UNIVERSITY of MARYLAND HEALTH PARTNERS

Quick Reference List

January 2018

The **University of Maryland Health Partners Quick Reference List** is a guide to the medicines that are most appropriate and cost effective for each therapeutic class. This list can help your doctor choose the medicines that are right for you. If a medicine that you use is not on this list, it may still be covered if your doctor asks for you to get it.

Authorizations:

Authorization requests for both **FORMULARY** and **NON-FORMULARY** products requiring either a PA (Prior Authorization), QL (Quantity Limit), ST (Step Therapy) or medical necessity review - contact **CVS Caremark®** at: 1-877-418-4133.

Authorization requests for specific **MENTAL HEALTH/HIV** products - contact MDH - Maryland Department of Health at: 1-800-932-3918 (Anti-Psychotic Peer Review Line for children 0-9 years old: 1-855-283-0876).

BRAND PRODUCTS are listed in CAPITAL LETTERS, branded generics in upper-and lowercase *Italics*, and *generic products* in lowercase *italic letters*.

This list is not an all-inclusive list and does not guarantee coverage. Please visit **www.umhealthpartners.com** for a complete list.

ANALGESICS

§ ANALGESICS, OTHER
acetaminophen **OTC, QL**

§ NSAIDs
aspirin delayed-rel **OTC**
ibuprofen **OTC**
naproxen sodium **OTC**
diclofenac potassium
diclofenac sodium delayed-rel
diclofenac sodium ext-rel
diflunisal
etodolac
etodolac ext-rel
flurbiprofen
ibuprofen
ketoprofen
ketorolac **QL**
meloxicam
nabumetone
naproxen
naproxen sodium
oxaprozin
sulindac

§ COX-2 INHIBITORS
celecoxib **PA**

§ OPIOID ANALGESICS[1]
codeine-acetaminophen **QL**
fentanyl transdermal **QL, †**
hydrocodone-acetaminophen 5/325 mg, 7.5/325 mg, 10/325 mg **QL**
hydrocodone-acetaminophen soln 7.5/325 mg/15 mL **QL**
hydromorphone tabs **QL**
methadone tabs 5 mg, 10 mg **QL**
morphine **QL**
morphine ext-rel **QL, †**
morphine supp **QL**
oxycodone **QL**
oxycodone-acetaminophen 2.5/325 mg, 5/325 mg, 7.5/325 mg, 10/325 mg **QL**
oxycodone-aspirin **QL**
tramadol **QL**
tramadol ext-rel tabs **QL, †**
tramadol-acetaminophen **QL**

† PA may apply to higher strengths

§ NON-OPIOID ANALGESICS
butalbital-acetaminophen-caffeine **QL**
butalbital-aspirin-caffeine **QL**

ANTI-INFECTIVES

ANTIBACTERIALS

CEPHALOSPORINS

§ First Generation
cefadroxil
cephalexin

§ Second Generation
cefprozil
cefuroxime axetil

§ Third Generation
cefdinir
ceftriaxone inj

§ ERYTHROMYCINS / MACROLIDES
azithromycin
clarithromycin
clarithromycin ext-rel
erythromycin base
erythromycin delayed-rel
erythromycin ethylsuccinate
erythromycin stearate

§ FLUOROQUINOLONES
ciprofloxacin ext-rel
ciprofloxacin tabs
levofloxacin

§ PENICILLINS
amoxicillin
amoxicillin-clavulanate
ampicillin
dicloxacillin
penicillin VK
BICILLIN L-A

§ SULFONAMIDES
sulfamethoxazole-trimethoprim
sulfamethoxazole-trimethoprim DS
SULFADIAZINE

§ TETRACYCLINES
doxycycline hyclate caps 50 mg, 100 mg
doxycycline hyclate tabs 20 mg, 100 mg
doxycycline monohydrate susp
minocycline
tetracycline

§ ANTIFUNGALS
clotrimazole troches
fluconazole
griseofulvin microsize susp
griseofulvin ultramicrosize
itraconazole caps **PA, QL**
nystatin
terbinafine tabs **QL**
voriconazole **PA**

ANTIRETROVIRAL AGENTS
Drugs used to treat HIV/AIDS are covered by Medicaid fee-for-service.

ANTIVIRALS

§ HERPES AGENTS
acyclovir caps, susp, tabs
famciclovir
valacyclovir

§ MISCELLANEOUS
pyrantel - Reeses Pinworm Medicine **OTC**
atovaquone
clindamycin
dapsone
ivermectin
linezolid **PA**
linezolid inj **PA**
metronidazole
nitrofurantoin ext-rel
nitrofurantoin macrocrystals
nitrofurantoin susp
rifabutin
trimethoprim
vancomycin **ST**
EMVERM **QL**
XIFAXAN 550 MG **ST**

CARDIOVASCULAR

§ ACE INHIBITORS
benazepril
captopril
enalapril
fosinopril
lisinopril
quinapril
ramipril
trandolapril

§ ACE INHIBITOR / CALCIUM CHANNEL BLOCKER COMBINATIONS
amlodipine-benazepril

§ ACE INHIBITOR / DIURETIC COMBINATIONS
benazepril-hydrochlorothiazide
captopril-hydrochlorothiazide
enalapril-hydrochlorothiazide
fosinopril-hydrochlorothiazide
lisinopril-hydrochlorothiazide
quinapril-hydrochlorothiazide

LEGEND **AL**: Age Limit **OTC**: Over the counter **PA**: Prior Authorization **PA, QL:** Quantity Limit is applied after Prior Authorization approval **QL**: Quantity Limit **SP**: Specialty Drug **ST**: Step Therapy

§ ADRENOLYTICS, CENTRAL
clonidine
clonidine transdermal
guanfacine

§ ALDOSTERONE RECEPTOR ANTAGONISTS
eplerenone
spironolactone

§ ALPHA BLOCKERS
doxazosin
prazosin
terazosin

§ ANGIOTENSIN II RECEPTOR ANTAGONISTS / DIURETIC COMBINATIONS
irbesartan
irbesartan-hydrochlorothiazide
losartan
losartan-hydrochlorothiazide
valsartan
valsartan-hydrochlorothiazide

§ ANTIARRHYTHMICS
amiodarone 200 mg
disopyramide
dofetilide PA, SP
flecainide
propafenone
propafenone ext-rel
sotalol
NORPACE CR

ANTILIPEMICS
§ BILE ACID RESINS
cholestyramine
colestipol

§ CHOLESTEROL ABSORPTION INHIBITORS
ezetimibe

§ FIBRATES
fenofibrate
gemfibrozil

§ HMG-CoA REDUCTASE INHIBITORS
atorvastatin
lovastatin
pravastatin
simvastatin

MICROSOMAL TRIGLYCERIDE TRANSFER PROTEIN INHIBITORS
JUXTAPID PA, SP

§ NIACINS
niacin ext-rel

PCSK9 INHIBITORS
REPATHA PA, SP

§ BETA-BLOCKERS
atenolol
bisoprolol
carvedilol
labetalol
metoprolol succinate ext-rel
metoprolol tartrate 25 mg, 50 mg, 100 mg
nadolol
pindolol
propranolol
propranolol ext-rel
timolol

§ BETA-BLOCKER / DIURETIC COMBINATIONS
atenolol-chlorthalidone
bisoprolol-hydrochlorothiazide
metoprolol-hydrochlorothiazide

CALCIUM CHANNEL BLOCKERS
§ DIHYDROPYRIDINES
amlodipine
felodipine ext-rel
nifedipine ext-rel

§ NONDIHYDROPYRIDINES
diltiazem
diltiazem ext-rel
verapamil ext-rel

§ DIGITALIS GLYCOSIDES
digoxin
digoxin ped elixir

DIURETICS
§ CARBONIC ANHYDRASE INHIBITORS
acetazolamide
acetazolamide ext-rel
methazolamide

§ LOOP DIURETICS
bumetanide
furosemide
torsemide

§ POTASSIUM-SPARING DIURETICS
amiloride

§ THIAZIDES AND THIAZIDE-LIKE DIURETICS
chlorthalidone
hydrochlorothiazide
indapamide
metolazone

§ DIURETIC COMBINATIONS
amiloride-hydrochlorothiazide
spironolactone-hydrochlorothiazide
triamterene-hydrochlorothiazide

HEART FAILURE
CORLANOR
ENTRESTO

NITRATES
§ ORAL
isosorbide dinitrate ext-rel tabs
isosorbide dinitrate oral
isosorbide mononitrate
isosorbide mononitrate ext-rel
nitroglycerin ext-rel

§ SUBLINGUAL
nitroglycerin sublingual

§ TRANSDERMAL
nitroglycerin transdermal
NITRO-BID

PULMONARY ARTERIAL HYPERTENSION
ENDOTHELIN RECEPTOR ANTAGONISTS
LETAIRIS PA, SP
TRACLEER PA, SP

§ PHOSPHODIESTERASE INHIBITORS
sildenafil PA, SP

PROSTACYCLIN RECEPTOR AGONISTS
UPTRAVI PA, SP

§ PROSTAGLANDIN VASODILATORS
epoprostenol sodium PA, SP
REMODULIN PA, SP
TYVASO PA, SP
VENTAVIS PA, SP

§ MISCELLANEOUS
hydralazine
methyldopa
midodrine
RANEXA ST

CENTRAL NERVOUS SYSTEM [2]

§ ANTICONVULSANTS
phenobarbital
primidone
ethosuximide
phenytoin
phenytoin sodium extended

§ ANTIDEMENTIA
donepezil
galantamine
galantamine ext-rel
memantine PA*
rivastigmine PA
rivastigmine transdermal PA

PA*Only applies to members <30 years of age

§ ANTIPARKINSONIAN AGENTS
amantadine
bromocriptine
carbidopa-levodopa
carbidopa-levodopa ext-rel
carbidopa-levodopa orally disintegrating tabs
carbidopa-levodopa-entacapone
entacapone
pramipexole
ropinirole
selegiline

§ ATTENTION DEFICIT HYPERACTIVITY DISORDER
clonidine ext-rel [3]
guanfacine ext-rel [3]

FIBROMYALGIA
SAVELLA PA

MIGRAINE
§ ERGOTAMINE DERIVATIVES
dihydroergotamine inj
dihydroergotamine spray QL
ergotamine-caffeine

§ SELECTIVE SEROTONIN AGONISTS
naratriptan ST, QL
rizatriptan ST, QL
sumatriptan QL
sumatriptan inj QL
sumatriptan nasal spray QL
zolmitriptan ST, QL

§ MULTIPLE SCLEROSIS AGENTS
glatiramer PA, SP
AUBAGIO PA, SP
AVONEX PA, SP
EXTAVIA PA, SP
GILENYA PA, SP
REBIF PA, SP
TECFIDERA PA, SP

§ MUSCULOSKELETAL THERAPY AGENTS
baclofen
carisoprodol QL
chlorzoxazone
cyclobenzaprine 5 mg, 10 mg
dantrolene
methocarbamol
orphenadrine ext-rel
orphenadrine-aspirin-caffeine
tizanidine tabs

PSYCHOTHERAPEUTIC-MISCELLANEOUS
§ ALCOHOL DETERRENTS
Most Substance Use Disorders (SUD) Medications are covered by Medicaid fee-for-service.

§ OPIOID ANTAGONISTS
Most Substance Use Disorders (SUD) Medications are covered by Medicaid fee-for-service.

§ PARTIAL OPIOID AGONISTS
Most Substance Use Disorders (SUD) Medications are covered by Medicaid fee-for-service.

§ PARTIAL OPIOID AGONIST / OPIOID ANTAGONIST COMBINATIONS
Most Substance Use Disorders (SUD) Medications are covered by Medicaid fee-for-service.

§ SMOKING DETERRENTS
Most smoking cessation products are covered by Medicaid fee-for-service.

ENDOCRINE AND METABOLIC

ANTIDIABETICS
§ ALPHA-GLUCOSIDASE INHIBITORS
acarbose

AMYLIN ANALOGS
SYMLINPEN PA

§ BIGUANIDES
metformin
metformin ext-rel

§ BIGUANIDE / SULFONYLUREA COMBINATIONS
glipizide-metformin
glyburide-metformin

DIPEPTIDYL PEPTIDASE-4 (DPP-4) INHIBITORS
JANUVIA ST

DIPEPTIDYL PEPTIDASE-4 (DPP-4) INHIBITOR / BIGUANIDE COMBINATIONS
JANUMET ST
JANUMET XR ST

INCRETIN MIMETIC AGENTS
TRULICITY ST
VICTOZA ST

INSULINS
HUMULIN 70/30 OTC
HUMULIN N OTC
HUMULIN R OTC
NOVOLIN 70/30 OTC
NOVOLIN N OTC
NOVOLIN R OTC
APIDRA
BASAGLAR
HUMALOG 100 UNITS/ML
HUMALOG MIX
NOVOLOG
NOVOLOG MIX 70/30
TRESIBA

§ INSULIN SENSITIZERS
pioglitazone

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§ INSULIN SENSITIZER / BIGUANIDE COMBINATIONS
pioglitazone-metformin

§ INSULIN SENSITIZER / SULFONYLUREA COMBINATIONS
pioglitazone-glimepiride

§ MEGLITINIDES
nateglinide
repaglinide

SODIUM-GLUCOSE CO-TRANSPORTER 2 (SGLT2) INHIBITORS
INVOKANA **ST**

SODIUM-GLUCOSE CO-TRANSPORTER 2 (SGLT2) INHIBITOR / BIGUANIDE COMBINATIONS
INVOKAMET **ST**
INVOKAMET XR **ST**

§ SULFONYLUREAS
glimepiride
glipizide
glipizide ext-rel
glyburide
glyburide, micronized

SUPPLIES
ALCOHOL SWABS **OTC, QL**
BD ULTRAFINE INSULIN SYRINGES AND NEEDLES **OTC**
KETO-DIASTIX **OTC, QL**
LANCETS **OTC**
MULTISTIX **OTC, QL**
ONETOUCH ULTRA STRIPS AND KITS **OTC, QL***
ONETOUCH VERIO STRIPS AND KITS **OTC, QL***

QL* Applies to test strips only

CALCIUM REGULATORS

§ BISPHOSPHONATES
alendronate tabs

CONTRACEPTIVES
EE = ethinyl estradiol
ME = mestranol

MONOPHASIC

§ 20 mcg Estrogen
drospirenone-EE 3/20
levonorgestrel-EE 0.1/20
norethindrone acetate-EE 1/20
norethindrone acetate-EE 1/20 and iron

§ 30 mcg Estrogen
desogestrel-EE 0.15/30 - Apri
drospirenone-EE 3/30
levonorgestrel-EE 0.15/30
norethindrone acetate-EE 1.5/30
norethindrone acetate-EE 1.5/30 and iron
norgestrel-EE 0.3/30

§ 35 mcg Estrogen
ethynodiol diacetate-EE 1/35
norethindrone-EE 0.4/35
norethindrone-EE 0.5/35
norethindrone-EE 1/35
norgestimate-EE 0.25/35

§ 50 mcg Estrogen
ethynodiol diacetate-EE 1/50 - Zovia 1/50
norethindrone-ME 1/50
norgestrel-EE 0.5/50 - Ogestrel

§ BIPHASIC
desogestrel-EE

§ TRIPHASIC
desogestrel-EE
levonorgestrel-EE
norethindrone-EE
norgestimate-EE

§ PROGESTIN ONLY
norethindrone

§ EMERGENCY CONTRACEPTION
levonorgestrel **OTC *, QL**
levonorgestrel **QL**
ELLA **QL**

OTC* Prescription is not required regardless of member's age

IMPLANT
NEXPLANON **SP, QL**

§ INJECTABLE
medroxyprogesterone acetate 150 mg/mL **QL**

PROGESTIN INTRAUTERINE DEVICE
MIRENA **SP, QL**
SKYLA **SP, QL**

TRANSDERMAL
norelgestromin-EE

VAGINAL
NUVARING

MISCELLANEOUS
CONDOMS, MALE **OTC*, QL**
GYNOL II **OTC**
SHUR-SEAL **OTC**
DIAPHRAGM **QL**

OTC* Prescription is not required regardless of member's age

ESTROGENS

§ ORAL
estradiol
estropipate

§ TRANSDERMAL
estradiol

§ VAGINAL
estradiol vaginal tabs

ESTROGEN / PROGESTINS

§ ORAL
EE-norethindrone acetate
estradiol-norethindrone acetate

TRANSDERMAL
COMBIPATCH

§ GLUCOCORTICOIDS
dexamethasone
fludrocortisone
hydrocortisone
methylprednisolone
prednisolone sodium phosphate
prednisolone syrup
prednisone
MEDROL 2 MG

§ PROGESTINS
medroxyprogesterone acetate
norethindrone acetate
progesterone, micronized

§ SELECTIVE ESTROGEN RECEPTOR MODULATORS
raloxifene
OSPHENA

THYROID AGENTS

§ THYROID SUPPLEMENTS
levothyroxine
levothyroxine - Levoxyl
liothyronine

GASTROINTESTINAL

§ ANTACIDS
alumina-magnesia **OTC**
alumina-magnesia-simethicone **OTC**
calcium carbonate **OTC**

§ ANTIEMETICS
meclizine **OTC**
aprepitant **PA, QL**
dronabinol **QL**
granisetron tabs **QL**
meclizine
metoclopramide
ondansetron **QL**
prochlorperazine
promethazine
promethazine supp
trimethobenzamide

§ H_2 RECEPTOR ANTAGONISTS
cimetidine **OTC**
famotidine **OTC**
ranitidine **OTC**
cimetidine
famotidine
nizatidine
ranitidine

§ LAXATIVES / STOOL SOFTENERS
bisacodyl **OTC**
docusate calcium **OTC**
docusate sodium **OTC**
polyethylene glycol 3350 **OTC**
senna **OTC**
sennosides **OTC**
sennosides-docusate sodium **OTC**
lactulose
peg 3350-electrolytes
polyethylene glycol 3350
psyllium **OTC**
KRISTALOSE
SUPREP

PANCREATIC ENZYMES
CREON
VIOKACE
ZENPEP

§ PROTON PUMP INHIBITORS
lansoprazole delayed-rel **OTC, QL**
omeprazole magnesium delayed-rel caps **OTC, QL**
omeprazole-sodium bicarbonate **OTC, QL**
NEXIUM 24HR **OTC, QL**
PRILOSEC OTC **OTC, QL**
omeprazole delayed-rel caps **QL**
pantoprazole delayed-rel tabs **QL**
NEXIUM SUSP 2.5 MG, 5 MG, 10 MG **AL*, QL**

AL* Covered for < 1 year only

§ MISCELLANEOUS
loperamide-simethicone **OTC**
simethicone **OTC**
sucralfate
CUVPOSA **PA***

PA* Covered for 3-16 years of age

GENITOURINARY

§ BENIGN PROSTATIC HYPERPLASIA
alfuzosin ext-rel
doxazosin
finasteride
tamsulosin
terazosin

§ VAGINAL ANTI-INFECTIVES
clotrimazole **OTC**
miconazole **OTC**
clindamycin crm
clotrimazole
metronidazole
miconazole
terconazole

HEMATOLOGIC

ANTICOAGULANTS

§ INJECTABLE
enoxaparin

§ ORAL
warfarin
XARELTO

HEMATOPOIETIC GROWTH FACTORS
ARANESP **PA, SP**
NEULASTA **PA, SP**
ZARXIO **PA, SP**

§ PLATELET AGGREGATION INHIBITORS
aspirin **OTC**
clopidogrel
dipyridamole
prasugrel
BRILINTA
ZONTIVITY

IMMUNOLOGIC AGENTS

AUTOIMMUNE AGENTS
ENBREL **PA, SP**
HUMIRA **PA, SP**

IMMUNOMODULATORS

INTERFERONS
INTRON A **PA, SP**
PEGASYS **PA, SP**

IMMUNOSUPPRESSANTS

§ ANTIMETABOLITES
azathioprine
mycophenolate mofetil
AZASAN

§ CALCINEURIN INHIBITORS
cyclosporine, modified
tacrolimus
SANDIMMUNE

§ RAPAMYCIN DERIVATIVES
sirolimus

NUTRITIONAL / SUPPLEMENTS

ELECTROLYTES

§ POTASSIUM
potassium bicarbonate effer tabs 25 mEq
potassium chloride ext-rel
potassium chloride liquid

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VITAMINS AND MINERALS

§ FOLIC ACID / COMBINATIONS

folic acid **OTC**
folic acid
folic acid-vitamin B6-vitamin B12

§ PRENATAL VITAMINS *

* All generic prenatal vitamins both OTC and Rx are covered.

prenatal vitamins-carbonyl iron-docusate-folic acid - Prenatal AD
prenatal vitamins-carbonyl iron-folic acid - Prenatabs Rx
prenatal vitamins-ferrous fumarate-docusate-folic acid - Prenatal 19
CITRANATAL 90 DHA
CITRANATAL ASSURE
CITRANATAL B-CALM
CITRANATAL DHA
CITRANATAL HARMONY
CITRANATAL RX

§ MISCELLANEOUS

calcium **OTC**
calcium-vitamin D **OTC**
cholecalciferol (D3) **OTC**
electrolyte soln, oral **OTC**
ferrous fumarate **OTC**
ferrous gluconate **OTC**
ferrous sulfate **OTC**
omega-3 fatty acids **OTC**
omega-3 fatty acids-vitamin E **OTC**
pyridoxine 50 mg **OTC**
thiamine 50 mg, 100 mg **OTC**
cyanocobalamin inj
ergocalciferol (D2)
fluoride drops, tabs
multivitamins-fluoride drops, tabs
multivitamins-fluoride-iron drops, tabs
vitamin ADC-fluoride drops
vitamin ADC-fluoride-iron drops
vitamin B complex-vitamin C-folic acid
MEPHYTON

RESPIRATORY

§ ANAPHYLAXIS TREATMENT AGENTS

epinephrine auto-injector **QL**
EPIPEN **QL**
EPIPEN JR. **QL**

§ ANTICHOLINERGICS

ipratropium soln **QL**
INCRUSE ELLIPTA **QL**
SPIRIVA RESPIMAT **QL**

ANTICHOLINERGIC / BETA AGONIST COMBINATIONS

§ SHORT ACTING

ipratropium-albuterol soln **QL**
COMBIVENT RESPIMAT **QL**

§ ANTIHISTAMINES, LOW SEDATING

cetirizine **OTC**
cetirizine

§ ANTIHISTAMINES, NONSEDATING

fexofenadine **OTC**
loratadine **OTC**

§ ANTIHISTAMINES, SEDATING [2]

chlorpheniramine **OTC**
chlorpheniramine ext-rel **OTC**
clemastine **OTC**
diphenhydramine **OTC**
clemastine
cyproheptadine
diphenhydramine

§ ANTIHISTAMINE / DECONGESTANT COMBINATIONS

cetirizine-pseudoephedrine ext-rel **OTC**
fexofenadine-pseudoephedrine ext-rel **OTC**
loratadine-pseudoephedrine ext-rel **OTC**
triprolidine-pseudoephedrine liq, syp **OTC**
promethazine-phenylephrine

ANTITUSSIVE COMBINATIONS

§ NON-OPIOID

dextromethorphan-guaifenesin ext-rel **OTC**
dextromethorphan-guaifenesin liq, soln, syp **OTC**
dextromethorphan-guaifenesin-pseudoephedrine liq 10 mg/100 mg/ 30 mg/5 mL **OTC**
dextromethorphan-brompheniramine-pseudoephedrine
dextromethorphan-promethazine

BETA AGONISTS

INHALANTS

§ Short Acting

albuterol inhalation soln **QL**
VENTOLIN HFA **QL**

Long Acting

STRIVERDI RESPIMAT **QL**

§ ORAL AGENTS

albuterol
albuterol ext-rel
terbutaline

§ DECONGESTANTS

pseudoephedrine **OTC**
pseudoephedrine ext-rel **OTC, QL**

§ DECONGESTANT / EXPECTORANT COMBINATIONS

pseudoephedrine-guaifenesin ext-rel **OTC**
pseudoephedrine-guaifenesin syp 30 mg/100 mg/5 mL **OTC**

§ EXPECTORANTS

guaifenesin liq, syp, tabs **OTC**
MUCINEX **OTC**

§ LEUKOTRIENE MODULATORS

montelukast

§ MAST CELL STABILIZERS

cromolyn sodium nasal spray **OTC**
cromolyn soln for inhalation **QL**

§ NASAL ANTIHISTAMINES

azelastine spray **QL**

§ NASAL STEROIDS

budesonide spray - Rhinocort Allergy **OTC, QL**
fluticasone spray **OTC, QL**
triamcinolone acetonide spray **OTC, QL**
flunisolide spray **QL**
fluticasone spray **QL**
triamcinolone acetonide spray **QL**

STEROID / BETA AGONIST COMBINATIONS

ADVAIR DISKUS 100/50 **AL*, ST, QL**
DULERA **ST, QL**
SYMBICORT **ST, QL**

AL* Covered for ages 4-11 years only

§ STEROID INHALANTS

budesonide inhalation susp **QL**
ASMANEX **QL**
ASMANEX HFA **QL**
PULMICORT FLEXHALER **QL**
QVAR **QL**

§ XANTHINES

theophylline ext-rel tabs
theophylline liquid
ELIXOPHYLLIN
THEO-24

TOPICAL

DERMATOLOGY

§ ACTINIC KERATOSIS

fluorouracil

§ ANTIBIOTICS

bacitracin **OTC**
bacitracin-polymyxin B **OTC**
neomycin-bacitracin-polymyxin B **OTC**
gentamicin
mupirocin
silver sulfadiazine
BACTROBAN NASAL

§ ANTIFUNGALS

miconazole **OTC**
tolnaftate **OTC**
ciclopirox
clotrimazole
ketoconazole crm 2%
nystatin

CORTICOSTEROIDS

§ Low Potency

hydrocortisone crm, gel, lotion, oint, soln 1% **OTC**
hydrocortisone oint 0.5% **OTC**
hydrocortisone-aloe vera crm 0.5%, 1% **OTC**
alclometasone crm, oint 0.05%
desonide crm, lotion, oint 0.05%
fluocinolone acetonide soln 0.01%
hydrocortisone crm, lotion, oint 2.5%

§ Medium Potency

betamethasone valerate crm, lotion, oint 0.1%
desoximetasone crm 0.05%
fluocinolone acetonide crm, oint 0.025%
fluticasone propionate crm 0.05%, oint 0.005%
hydrocortisone butyrate crm, oint, soln 0.1%
hydrocortisone valerate crm, oint 0.2%
mometasone crm, lotion, oint 0.1%
triamcinolone acetonide crm, lotion, oint 0.025%
triamcinolone acetonide crm, lotion, oint 0.1%

§ High Potency

betamethasone dipropionate augmented crm, lotion 0.05%
betamethasone dipropionate crm, lotion, oint 0.05%
desoximetasone crm, oint 0.25%, gel 0.05%
diflorasone diacetate crm 0.05%
fluocinonide crm, gel, oint, soln 0.05%
triamcinolone acetonide crm, oint 0.5%

§ Very High Potency

betamethasone dipropionate augmented gel, oint 0.05%
diflorasone diacetate oint 0.05%
halobetasol propionate crm, oint 0.05%

§ MISCELLANEOUS SKIN AND MUCOUS MEMBRANE

lidocaine-benzalkonium chloride **OTC**
povidone-iodine **OTC**
ABREVA **OTC**
CALAMINE LOTION **OTC**
imiquimod
podofilox soln
SANTYL

OPHTHALMIC

§ ANTIALLERGICS

ketotifen **OTC**
azelastine
cromolyn sodium

§ ANTI-INFECTIVES

bacitracin
ciprofloxacin soln
erythromycin
gentamicin
levofloxacin
neomycin-polymyxin B-gramicidin
ofloxacin
polymyxin B-bacitracin
polymyxin B-trimethoprim
sulfacetamide soln 10%
tobramycin soln

ANTI-INFLAMMATORIES

§ Nonsteroidal

diclofenac sodium
ketorolac 0.4%, 0.5%

§ Steroidal

dexamethasone sodium phosphate
fluorometholone 0.1% susp
prednisolone acetate 1%
PREDNISOLONE PHOSPHATE 1%

BETA-BLOCKERS

§ Nonselective

levobunolol
metipranolol
timolol maleate
timolol maleate gel
BETIMOL

§ Selective
betaxolol 0.5%

CARBONIC ANHYDRASE INHIBITORS

§ Topical
dorzolamide

§ CARBONIC ANHYDRASE INHIBITOR / BETA-BLOCKER COMBINATIONS
dorzolamide-timolol maleate

§ PROSTAGLANDINS
latanoprost

§ SYMPATHOMIMETICS
brimonidine 0.15%, 0.2%

OTIC

§ ANTI-INFECTIVES
acetic acid
ofloxacin otic

§ ANTI-INFECTIVE / ANTI-INFLAMMATORY COMBINATIONS
neomycin-polymyxin B-hydrocortisone
CIPRODEX

PREFERRED OPTIONS LIST

DRUG NAME(S)	PREFERRED OPTION(S)†
ACCU-CHEK STRIPS AND KITS	ONETOUCH ULTRA STRIPS AND KITS **OTC, QL,** [4], ONETOUCH VERIO STRIPS AND KITS **OTC, QL,** [4]
AEROSPAN	ASMANEX **QL**, ASMANEX HFA **QL**, PULMICORT FLEXHALER **QL**, QVAR **QL**
ALCORTIN A	*desonide, hydrocortisone*
ALLISON MEDICAL INSULIN SYRINGES [5]	BD ULTRAFINE INSULIN SYRINGES
ALOQUIN	*desonide, hydrocortisone*
ALORA	*estradiol*
ALTOPREV	*atorvastatin, lovastatin, pravastatin, simvastatin*
ALVESCO	ASMANEX **QL**, ASMANEX HFA **QL**, PULMICORT FLEXHALER **QL**, QVAR **QL**
AMRIX	*cyclobenzaprine 5 mg, 10 mg*
ANGELIQ	*EE-norethindrone, estradiol-norethindrone*
ANTARA	*fenofibrate*
ARMOUR THYROID	*levothyroxine*, *levothyroxine-Levoxyl*
ASCENSIA STRIPS AND KITS	ONETOUCH ULTRA STRIPS AND KITS **OTC, QL,** [4], ONETOUCH VERIO STRIPS AND KITS **OTC, QL,** [4]
ATROVENT HFA	INCRUSE ELLIPTA **QL,** SPIRIVA RESPIMAT **QL**
AXERT	*naratriptan* **ST, QL**, *rizatriptan* **ST, QL**, *sumatriptan* **QL**, *sumatriptan nasal spray* **QL**, *zolmitriptan* **ST, QL**
BECONASE AQ	*budesonide spray - Rhinocort Allergy* **OTC, QL**, *fluticasone spray* **OTC, QL**, *triamcinolone acetonide spray* **OTC, QL,** *flunisolide spray* **QL**, *fluticasone spray* **QL**, *triamcinolone acetonide spray* **QL**
BENSAL HP	*desonide, hydrocortisone*
BREEZE 2 STRIPS AND KITS	ONETOUCH ULTRA STRIPS AND KITS **OTC, QL,** [4], ONETOUCH VERIO STRIPS AND KITS **OTC, QL,** [4]
BREO ELLIPTA	ADVAIR **AL, ST, QL**, SYMBICORT **ST, QL**
BYDUREON	TRULICITY **ST**, VICTOZA **ST**
BYETTA	TRULICITY **ST**, VICTOZA **ST**
BYSTOLIC	*atenolol; bisoprolol; carvedilol; labetalol; metoprolol succinate ext-rel; metoprolol tartrate 25 mg, 50 mg, 100 mg; nadolol; pindolol; propranolol; propranolol ext-rel; timolol*
CARDURA XL	*alfuzosin ext-rel, doxazosin, tamsulosin*, *terazosin*
CLIMARA PRO	COMBIPATCH
CONTOUR NEXT STRIPS AND KITS	ONETOUCH ULTRA STRIPS AND KITS **OTC, QL,** [4], ONETOUCH VERIO STRIPS AND KITS **OTC, QL,** [4]
CONTOUR STRIPS AND KITS	ONETOUCH ULTRA STRIPS AND KITS **OTC, QL,** [4], ONETOUCH VERIO STRIPS AND KITS **OTC, QL,** [4]
COREG CR	*atenolol; bisoprolol; carvedilol; labetalol; metoprolol succinate ext-rel; metoprolol tartrate 25 mg, 50 mg, 100 mg; nadolol; pindolol; propranolol; propranolol ext-rel; timolol*
DEXILANT	*lansoprazole delayed-rel* **OTC, QL**, *omeprazole magnesium delayed-rel capsule* **OTC, QL**, *omeprazole-sodium bicarbonate* **OTC, QL**, NEXIUM 24HR **OTC, QL**, PRILOSEC OTC **OTC, QL**, *omeprazole delayed-rel capsule* **QL**, *pantoprazole delayed-rel tablet* **QL**
DEXPAK	*dexamethasone, methylprednisolone, prednisone*
DORYX MPC	*doxycycline hyclate*
DUTOPROL	*metoprolol succinate ext-rel* **WITH** *hydrochlorothiazide*
DYRENIUM	*amiloride*
EDARBI, EDARBYCLOR	*irbesartan, irbesartan-hydrochlorothiazide, losartan, losartan-hydrochlorothiazide, valsartan, valsartan-hydrochlorothiazide*
ESTRING	*estradiol vaginal tabs*
FEMRING	*estradiol vaginal tabs*
FLOVENT DISKUS, FLOVENT HFA	ASMANEX **QL**, ASMANEX HFA **QL**, PULMICORT FLEXHALER **QL**, QVAR **QL**
FORTAMET	*metformin, metformin ext-rel*
FOSAMAX PLUS D	*alendronate tablet*
FREESTYLE STRIPS AND KITS	ONETOUCH ULTRA STRIPS AND KITS **OTC, QL,** [4], ONETOUCH VERIO STRIPS AND KITS **OTC, QL,** [4]
FROVA	*naratriptan* **ST, QL**, *rizatriptan* **ST, QL**, *sumatriptan* **QL**, *sumatriptan nasal spray* **QL,** *zolmitriptan* **ST, QL**
GLUMETZA	*metformin, metformin ext-rel*
INNOPRAN XL	*atenolol; bisoprolol; carvedilol; labetalol; metoprolol succinate ext-rel; metoprolol tartrate 25 mg, 50 mg, 100 mg; nadolol; pindolol; propranolol; propranolol ext-rel; timolol*
ISTALOL	*levobunolol, metipranolol, timolol maleate gel, timolol maleate solution*, BETIMOL
JARDIANCE	INVOKANA **ST**
KAZANO	JANUMET **ST**, JANUMET XR **ST**
KOMBIGLYZE XR	JANUMET **ST**, JANUMET XR **ST**
LANTUS	BASAGLAR, TRESIBA
LIVALO	*atorvastatin, lovastatin, pravastatin, simvastatin*
MENEST	*estradiol*, *estropipate*
MENOSTAR	*estradiol*
MILLIPRED	*dexamethasone, methylprednisolone, prednisone*

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DRUG NAME(S)	PREFERRED OPTION(S)†
NESINA	JANUVIA **ST**
NOVACORT	*desonide, hydrocortisone*
NOVO NORDISK NEEDLES [5]	BD ULTRAFINE NEEDLES
OMNARIS	*budesonide spray - Rhinocort Allergy* **OTC, QL**, *fluticasone spray* **OTC, QL**, *triamcinolone acetonide spray* **OTC, QL**, *flunisolide spray* **QL**, *fluticasone spray* **QL**, *triamcinolone acetonide spray* **QL**
ONGLYZA	JANUVIA **ST**
OPSUMIT	LETAIRIS **PA, SP**, TRACLEER **PA, SP**
OSENI	JANUMET **ST**, JANUMET XR **ST**
OWEN MUMFORD NEEDLES [5]	BD ULTRAFINE NEEDLES
PANCREAZE	CREON, VIOKACE, ZENPEP
PERRIGO NEEDLES [5]	BD ULTRAFINE NEEDLES
PERTZYE	CREON, VIOKACE, ZENPEP
PRADAXA	*warfarin,* XARELTO
PRECISION XTRA STRIPS AND KITS	ONETOUCH ULTRA STRIPS AND KITS **OTC, QL, [4]**, ONETOUCH VERIO STRIPS AND KITS **OTC, QL, [4]**
PRED MILD	*dexamethasone sodium phosphate, fluorometholone 0.1% susp, prednisolone acetate 1%,* PREDNISOLONE PHOSPHATE 1%
PREFERAOB	*generic prenatal vitamins*, CITRANATAL
PREFEST	*EE-norethindrone, estradiol-norethindrone*
PRENATAL PLUS	*generic prenatal vitamins*, CITRANATAL
PRIMLEV	*hydrocodone-acetaminophen 5/325 mg, 7.5/325 mg, 10/325 mg* **QL**, *hydromorphone tabs* **QL**, *morphine* **QL**, *oxycodone-acetaminophen 2.5/325 mg, 5/325 mg, 7.5/325 mg, 10/325 mg* **QL**
PROAIR HFA	VENTOLIN HFA **QL**
PROVENTIL HFA	VENTOLIN HFA **QL**
QNASL	*budesonide spray - Rhinocort Allergy* **OTC, QL**, *fluticasone spray* **OTC, QL**, *triamcinolone acetonide spray* **OTC, QL**, *flunisolide spray* **QL**, *fluticasone spray* **QL**, *triamcinolone acetonide spray* **QL**
RAYOS	*dexamethasone, methylprednisolone, prednisone*
RELION INSULIN	HUMULIN INSULIN **OTC**, NOVOLIN INSULIN **OTC**
RELPAX	*naratriptan* **ST, QL**, *rizatriptan* **ST, QL**, *sumatriptan* **QL**, *sumatriptan nasal spray* **QL**, *zolmitriptan* **ST, QL**
RIOMET	*metformin, metformin ext-rel*
SUMAVEL DOSEPRO	*naratriptan* **ST, QL**, *rizatriptan* **ST, QL**, *sumatriptan* **QL**, *sumatriptan nasal spray* **QL**, *zolmitriptan* **ST, QL**
SURE-TEST STRIPS AND KITS	ONETOUCH ULTRA STRIPS AND KITS **OTC, QL, [4]**, ONETOUCH VERIO STRIPS AND KITS **OTC, QL, [4]**
SYNJARDY	INVOKAMET **ST**, INVOKAMET XR **ST**
SYNJARDY XR	INVOKAMET **ST**, INVOKAMET XR **ST**
TOUJEO	BASAGLAR, TRESIBA
TRAVATAN Z	*latanoprost*
TRIGLIDE	*fenofibrate*
TRIVIDIA INSULIN SYRINGES [5]	BD ULTRAFINE INSULIN SYRINGES
TRUETEST STRIPS AND KITS	ONETOUCH ULTRA STRIPS AND KITS **OTC, QL, [4]**, ONETOUCH VERIO STRIPS AND KITS **OTC, QL, [4]**
TRUETRACK STRIPS AND KITS	ONETOUCH ULTRA STRIPS AND KITS **OTC, QL, [4]**, ONETOUCH VERIO STRIPS AND KITS **OTC, QL, [4]**
TUDORZA	INCRUSE ELLIPTA **QL**, SPIRIVA RESPIMAT **QL**
ULTIMED INSULIN SYRINGES [5]	BD ULTRAFINE INSULIN SYRINGES
ULTIMED NEEDLES [5]	BD ULTRAFINE NEEDLES
UROXATRAL	*alfuzosin ext-rel, doxazosin, tamsulosin, terazosin*
VANOXIDE-HC	*benzoyl peroxide*
VITAFOL-ONE	*generic prenatal vitamins*, CITRANATAL
XOPENEX HFA	VENTOLIN HFA **QL**
ZETONNA	*budesonide spray - Rhinocort Allergy* **OTC, QL**, *fluticasone spray* **OTC, QL**, *triamcinolone acetonide spray* **OTC, QL**, *flunisolide spray* **QL**, *fluticasone spray* **QL**, *triamcinolone acetonide spray* **QL**
ZIOPTAN	*latanoprost*
ZYFLO, ZYFLO CR	*montelukast*

UNIVERSITY OF MARYLAND HEALTH PARTNERS OTC REFERENCE LIST

The **UM Health Partners OTC Reference List** is a guide to the medicines that are most appropriate and cost effective for each therapeutic class. This list can help your doctor choose the medicines that are right for you. If an OTC medicine that you use is not on this list, it may still be covered if your doctor asks for you to get it.

This list is not an all-inclusive list and does not guarantee coverage. Please visit **www.umhealthpartners.com** for a complete list.

PRODUCT NAME ‡	BRAND NAME EXAMPLES
acetaminophen **QL**	TYLENOL
acetic acid soln	
alcohol swabs **QL**	
alumina-magnesia	MAALOX
alumina-magnesia-simethicone	MAALOX
alumina-magnesia-simethicone	MYLANTA
ammonium lactate 12%	LAC-HYDRIN

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PRODUCT NAME ‡	BRAND NAME EXAMPLES
artificial tears oint, soln	ARTIFICIAL TEARS
aspirin	
aspirin delayed-rel	
bacitracin	
bacitracin-polymyxin B	POLYSPORIN
benzoyl peroxide	
bisacodyl	DULCOLAX
bismuth subsalicylate	PEPTO-BISMOL
blood glucose monitoring kits, test strips **QL, [4]**	ONETOUCH ULTRA STRIPS AND KITS, ONETOUCH VERIO STRIPS AND KITS
budesonide spray **QL**	RHINOCORT ALLERGY
calamine lotion	
calcium	
calcium carbonate	
calcium-vitamin D	
cetirizine	ZYRTEC
cetirizine-pseudoephedrine ext-rel	ZYRTEC-D 12 Hour
chlorpheniramine	
chlorpheniramine ext-rel	
cholecalciferol (D3)	VITAMIN D
cimetidine	TAGAMET HB
clemastine	
clotrimazole	
condoms, male **QL, [6]**	
cromolyn sodium nasal spray	NASALCROM
dextromethorphan-guaifenesin ext-rel	MUCINEX DM
dextromethorphan-guaifenesin liq, soln, syp	
dextromethorphan-guaifenesin-pseudoephedrine liq 10 mg/100 mg/30 mg/5 mL	
diphenhydramine	BENADRYL
docosanol	ABREVA
docusate calcium	
docusate sodium	COLACE
electrolyte soln, oral	PEDIALYTE
esomeprazole magnesium delayed-rel **QL**	NEXIUM 24HR
famotidine	PEPCID AC
ferrous fumarate	
ferrous gluconate	FERGON
ferrous sulfate	FEOSOL
fexofenadine	ALLEGRA
fexofenadine-pseudoephedrine ext-rel	ALLEGRA-D
fluticasone spray **QL**	FLONASE ALLERGY RELIEF
folic acid	
guaifenesin ext-rel	MUCINEX
guaifenesin liq	DIABETIC TUSSIN
guaifenesin liq, syp, tabs	
hydrocortisone crm, gel, lotion, oint, soln 1%	CORTIZONE-10
hydrocortisone oint 0.5%	
hydrocortisone-aloe vera crm 0.5%, 1%	

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PRODUCT NAME ‡	BRAND NAME EXAMPLES
ibuprofen	ADVIL
insulin human	HUMULIN R
insulin human	NOVOLIN R
insulin isophane human	HUMULIN N
insulin isophane human	NOVOLIN N
insulin isophane human 70%/regular 30%	HUMULIN 70/30
insulin isophane human 70%/regular 30%	NOVOLIN 70/30
insulin syringes, needles	
ketotifen	ZADITOR
lancets	
lansoprazole delayed-rel **QL**	PREVACID 24HR
levonorgestrel **QL,** [6]	PLAN B ONE-STEP
lidocaine-benzalkonium chloride	BACTINE
loperamide	
loperamide-simethicone	IMODIUM
loratadine	CLARITIN
loratadine-pseudoephedrine ext-rel	CLARITIN-D
meclizine	
miconazole	MICATIN
multiple urine test products **QL**	KETO-DIASTIX
multiple urine test products **QL**	MULTISTIX
naproxen sodium	ALEVE
nebulizer **QL**	
neomycin-bacitracin-polymyxin B	NEOSPORIN
nonoxynol-9	GYNOL II
nonoxynol-9 **QL**	SHUR-SEAL
omega-3 fatty acids	FISH OIL
omega-3 fatty acids-vitamin E	FISH OIL
omeprazole delayed-rel tabs **QL**	
omeprazole magnesium delayed-rel **QL**	PRILOSEC OTC
omeprazole magnesium delayed-rel caps **QL**	
omeprazole-sodium bicarbonate **QL**	ZEGERID OTC
oxybutynin transdermal [7]	OXYTROL FOR WOMEN
peak flow meter **QL**	
permethrin	
polyethylene glycol 3350	MIRALAX
povidone-iodine	BETADINE
pseudoephedrine	SUDAFED
pseudoephedrine ext-rel **QL**	SUDAFED
pseudoephedrine-guaifenesin ext-rel	MUCINEX D
pseudoephedrine-guaifenesin syp 30 mg/100 mg/5 mL	
psyllium	
pyrantel - Reeses Pinworm Medicine	
pyridoxine 50 mg	VITAMIN B6
ranitidine	ZANTAC
respiratory mask **QL**	
selenium sulfide shampoo 1%	SELSUN BLUE

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PRODUCT NAME ‡	BRAND NAME EXAMPLES
senna	
sennosides	SENOKOT
sennosides-docusate sodium	SENNA PLUS
simethicone	
sodium chloride for inhalation	
sodium chloride nasal spray	OCEAN
spacer **QL**	AEROCHAMBER
thiamine 50 mg, 100 mg	VITAMIN B1
tolnaftate	TINACTIN
triamcinolone acetonide spray **QL**	NASACORT ALLERGY 24HR
triprolidine-pseudoephedrine liq, syp	
vaporizer **QL**	

FOR YOUR INFORMATION: This drug list represents a summary of prescription coverage. It is not all-inclusive and does not guarantee coverage. In most instances, a brand-name drug for which a generic product becomes available will require prior authorization or will no longer be covered upon release of the generic product onto the market. Unless specifically indicated, drug list products will include all dosage forms. This list represents brand products in CAPS, branded generics in upper-and lowercase *Italics,* and generic products in lowercase *italics*. Listed products may be available generically in certain strengths or dosage forms. Dosage forms on this list will be consistent with the category and use where listed. Log in to **www.umhealthpartners.com** to check coverage.

An exception process may exist for specific clinical or regulatory circumstances that may require coverage of an excluded medication.

§ Generics are available in this class and should be considered the first line of prescribing.

† The preferred options in this list are a broad representation within therapeutic categories of available treatment options and do not necessarily represent clinical equivalency.

‡ Only the generic version(s) are covered when available.

[1] The quantity of opioid products prescribed (including those that are combined with acetaminophen, aspirin or ibuprofen) will be limited to up to 90 morphine milligram equivalents (MME) per day based on a 30-day supply. Members who are opioid-naïve may be subject to additional step therapy requirements (use of an immediate-release (IR) formulation will be required before moving to an extended-release (ER) formulation) and quantity limit restrictions (first fill will be limited to seven days).

[2] Most Mental Health drugs are on MDH Medical Mental Health Formulary and covered by Medicaid fee-for-service.

[3] Covered for members ages 6 - 17. This drug is part of the mental health formulary and is billed fee for service. A medical exception may be requested for members not in this age range by calling UM Health Partners.

[4] Quantity Limits apply to test strips only

[5] BD ULTRAFINE syringes and needles are the only preferred options.

[6] Prescription is not required regardless of age.

[7] Gender restriction - Coverage only for females.

Plan member privacy is important to us. Our employees are trained regarding the appropriate way to handle members' private health information.

This document contains references to brand-name prescription drugs that are trademarks or registered trademarks of pharmaceutical manufacturers. Listed products are for informational purposes only and are not intended to replace the clinical judgment of the prescriber. The document is subject to state-specific regulations and rules, including, but not limited to, those regarding generic substitution, controlled substance schedules, preference for brands and mandatory generics whenever applicable.

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