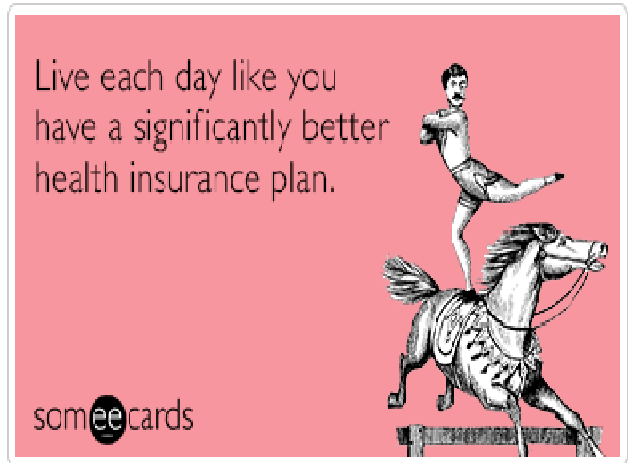


# The Prescribing Guide



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## PLANS

**AlohaCare**  
**CVS Caremark**  
**HMSA**  
**HMSA Quest**  
**Ohana**  
**United HealthCare**

## CLASSES

**Allergy** (antihistamine, nasal steroids).....  
**Antibiotics**.....  
**Anticoagulants** (&platelet Inhibitors).  
**Asthma/COPD**.....  
**Birth Control**.....  
**Cholesterol**.....  
**Depression**.....  
**Dermatology** (steroid creams).....  
**Diabetes**.....  
**Ear**.....  
**Heartburn**.....  
**Hypertension**.....  
**Insomnia**.....  
**Migraine**.....  
**Psychotics** (anti-psychotics).....  
**Smoking Cessation**.....  
**Walmart \$4/\$10 list**.....

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### **Sponsored by:**

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Univ. of Hawaii HMSA Chair for Health Care Services Quality Research  
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# ASTHMA (1 of 2)

## Beta Agonists

| BRAND       | Generic                  | Costco \$ (1 inhaler) | Generic Brand | Aloha Care | CVS State employees | HMSA          | HMSA Quest        | Ohana   | United Healthcare |
|-------------|--------------------------|-----------------------|---------------|------------|---------------------|---------------|-------------------|---------|-------------------|
| Proair      | <i>albuterol inhaler</i> | \$56 (Walmart neb\$4) | Brand         | \$0        | \$25                | \$20-25       | \$0 (2 inh/month) | need PA | need PA           |
| Proventil   | <i>albuterol inhaler</i> | \$66 Epocrates        | Generic       | \$0        | \$50                | non-preferred | need PA           | need PA | need PA           |
| Ventolin    | <i>albuterol inhaler</i> | \$58 Epocrates        | Generic       | \$0        | \$50                | \$20-25       | \$0               | \$0     | \$0               |
| Arcapta     | <i>indacaterol</i>       | \$215                 | Brand         | need PA    | \$25                | not covered   | need PA           | need PA | \$0               |
| Striverdi   | <i>olodaterol</i>        | \$163                 | Brand         | need PA    | \$50                | \$20-25       | \$0               | \$0     | \$0               |
| Xopenex HFA | <i>levalbuterol</i>      | \$60                  | Generic       | need PA    | \$50                | non-preferred | need PA           | \$0     | need PA           |
| Foradil     | <i>formoterol</i>        | \$239 for 60 caps     | Brand         | need PA    | \$50                | \$20-25       | need PA           | \$0     | need PA           |
| Serevent    | <i>salmeterol</i>        | \$242                 | Brand         | \$0        | \$25                | non-preferred | need PA           | need PA | need PA           |

## Inhaled Steroids

| BRAND              | Generic                       | Costco \$ (1 inhaler) | Generic Brand | Aloha Care          | CVS (State employees) | HMSA    | HMSA Quest  | Ohana             | United Healthcare  |
|--------------------|-------------------------------|-----------------------|---------------|---------------------|-----------------------|---------|-------------|-------------------|--------------------|
| QVAR               | <i>beclomethasone</i>         | \$190 (40mcg)         | Brand         | \$0 (not Redihaler) | \$25                  | \$20-25 | need PA     | \$0               | Redihaler only     |
| Pulmicort          | <i>budesonide</i>             | \$192                 | Brand         | \$0 flexhaler       | \$25                  | \$20-25 | nebs only   | neb only age ≤ 8y | if age ≥ 5 need PA |
| Arnuity Ellipta    | <i>fluticasone furoate</i>    | \$195                 | Brand         | need PA             | \$50                  | \$20-25 | \$0         | \$0               | \$0                |
| Flovent Diskus/HFA | <i>fluticasone propionate</i> | \$193 (110mcg)        | Brand         | \$0 - HFA only      | \$25 Diskus HFA       | \$20-25 | Diskus, HFA | Diskus, HFA       | HFA age ≤ 11       |
| Asmanex            | <i>mometasone</i>             | \$204                 | Brand         | need PA             | \$25                  | \$20-25 | need PA     | \$0               | \$0                |

## Steroid/Long-acting Beta-Agonists

| BRAND             | Generic                                   | Costco \$ (1 inhaler) | Generic Brand | Aloha Care  | CVS (State employees) | HMSA    | HMSA Quest  | Ohana   | United Healthcare |
|-------------------|---|-----------------------|---------------|-------------|-----------------------|---------|-------------|---------|-------------------|
| Advair Diskus/HFA | <i>fluticasone propionate/ salmeterol</i> | \$253 (45-21 HFA)     | Brand         | Diskus, HFA | \$25 Diskus, HFA      | \$20-25 | Diskus, HFA | Diskus  | need PA           |
| Breo Ellipta      | <i>fluticasone furoate/ vilanterol</i>    | \$288                 | Brand         | need PA     | \$25                  | \$20-25 | need PA     | need PA | step therapy*     |
| Symbicort         | <i>budesonide/ formoterol</i>             | \$270 (160-4.5)       | Brand         | \$0         | Breo, Dulera          | \$20-25 | need PA     | \$0     | need PA           |
| Dulera            | <i>mometasone/formoterol</i>              | \$264                 | Brand         | need PA     | \$25                  | \$20-25 | \$0         | \$0     | need PA           |

United HealthCare: Breo Ellipta - trial of 30 day inhaled steroids, long-acting beta2 agonist, or inhaled anticholinergic.

## ASTHMA (2 of 2)

### Anticholinergic (LAMA)

| BRAND           | Generic                        | Costco \$ (1 inhaler)  | Generic Brand | Aloha Care               | CVS State employees | HMSA          | HMSA Quest | Ohana | United Healthcare |
|-----------------|--------------------------------|------------------------|---------------|--------------------------|---------------------|---------------|------------|-------|-------------------|
| Atrovent        | <i>Ipratropium bromide</i>     | \$249 (neb \$4Walmart) | Generic       | \$0                      | Spiriva             | \$5-10        | nebs       | \$0   | \$0 HFA           |
| Spiriva         | <i>tiotropium</i>              | \$336                  | Brand         | handihaler, not respimat | \$25                | \$20-25       | need PA    | \$0   | need PA           |
| Incruse Ellipta | <i>umeclidinium</i>            | \$245                  | Brand         | need PA                  | Spiriva             | non-preferred | \$0        | \$0   | \$0               |
| Anoro Ellipta   | <i>umeclidinium/vilanterol</i> | \$305                  | Brand         | need PA                  | \$25                | non-preferred | \$0        | \$0   | \$0               |

### Other

| BRAND       | Generic                       | Costco \$ (1 inhaler) | Generic Brand | Aloha Care   | CVS (State employees) | HMSA    | HMSA Quest | Ohana | United Healthcare |
|-------------|-------------------------------|-----------------------|---------------|--------------|-----------------------|---------|------------|-------|-------------------|
| Intal (neb) | <i>cromolyn sodium (neb)</i>  | \$124                 | Generic       | nebs         | \$5                   | \$5-10  | nebs       | \$0   | \$0               |
| Combivent   | <i>albuterol/ ipratropium</i> | \$307                 | Brand         | \$0          | \$25                  | \$20-25 | \$0        | \$0   | \$0               |
| Singulair   | <i>montelukast</i>            | \$22                  | Generic       | step therapy | \$5                   | \$5-10  | \$0        | \$0   | \$0               |
| Accolate    | <i>zafirlukast</i>            | \$136 / 60 tabs       | Generic       | step therapy | \$5                   | \$5-10  | needs PA   | \$0   | need PA           |

### Spacers

|   |                |               |       |                                 |                   |                            |                    |                         |                  |
|---|----------------|---------------|-------|---------------------------------|-------------------|----------------------------|--------------------|-------------------------|------------------|
| E-Z Spacer, Vortex, Air Zone, Aerochamber | <i>spacers</i> | \$44 Easivent | Brand | Aerochamber, vortex, E-Z Spacer | pay out of pocket | Air Zone E-Z Spacer Vortex | Aerochamber Vortex | Aerochamber, E-Z spacer | Easivent, Vortex |
|---|----------------|---------------|-------|---------------------------------|-------------------|----------------------------|--------------------|-------------------------|------------------|

AlohaCare: Singulair and Accolate -- Needs trial of intranasal steroid or formulary asthma agent.

## ANTIBIOTICS (1 of 2)

### Penicillins and Cephalosporins

| BRAND            | Generic                          | Costco \$ (30 pills) | Generic Brand | Aloha Care | CVS State employees | HMSA   | HMSA Quest | Ohana | United Healthcare |
|------------------|----------------------------------|----------------------|---------------|------------|---------------------|--------|------------|-------|-------------------|
| Trimox           | <i>amoxicillin</i>               | \$6<br>walmart \$4   | Generic       | \$0        | \$5                 | \$5-10 | \$0        | \$0   | \$0               |
| Augmentin        | <i>amoxicillin / clavulanate</i> | \$70                 | Generic       | \$0        | \$5                 | \$5-10 | \$0        | \$0   | \$0               |
| Pen-Vee K        | <i>penicillin VK</i>             | \$15<br>walmart \$4  | Generic       | \$0        | \$5                 | \$5-10 | \$0        | \$0   | \$0               |
| Keflex (1st gen) | <i>cephalexin</i>                | \$10<br>walmart \$4  | Generic       | \$0        | \$5                 | \$5-10 | \$0        | \$0   | \$0 (caps)        |

### Quinolones

| BRAND          | Generic              | Costco \$ (30 pills) | Generic Brand | Aloha Care | CVS State employees | HMSA   | HMSA Quest | Ohana   | United Healthcare |
|----------------|----------------------|----------------------|---------------|------------|---------------------|--------|------------|---------|-------------------|
| Cipro          | <i>ciprofloxacin</i> | \$7<br>walmart \$4   | Generic       | \$0        | \$5                 | \$5-10 | \$0        | \$0     | \$0               |
| Levaquin       | <i>levofloxacin</i>  | \$19                 | Generic       | \$0        | \$5                 | \$5-10 | \$0        | \$0     | \$0 (tabs)        |
| Avelox, Moxeza | <i>moxifloxacin</i>  | \$845/30 pill        | Generic       | \$0        | \$5                 | \$5-10 | need PA    | need PA | need PA           |

### Tetracyclines

|       |                    |              |         |     |     |        |     |     |     |
|-------|--------------------|--------------|---------|-----|-----|--------|-----|-----|-----|
| Adoxa | <i>doxycycline</i> | \$85/50 caps | Generic | \$0 | \$5 | \$5-10 | \$0 | \$0 | \$0 |
|-------|--------------------|--------------|---------|-----|-----|--------|-----|-----|-----|

### Macrolides

|           |                     |               |         |     |     |        |     |     |     |
|-----------|---------------------|---------------|---------|-----|-----|--------|-----|-----|-----|
| Zithromax | <i>azithromycin</i> | \$10 250mg #6 | Generic | \$0 | \$5 | \$5-10 | \$0 | \$0 | \$0 |
|-----------|---------------------|---------------|---------|-----|-----|--------|-----|-----|-----|

### Sulfonamides

|            |  |                    |         |     |     |        |     |     |     |
|------------|--|--------------------|---------|-----|-----|--------|-----|-----|-----|
| Bactrim DS | <i>trimethoprim / sulfamethoxazole</i> | \$7<br>walmart \$4 | Generic | \$0 | \$5 | \$5-10 | \$0 | \$0 | \$0 |
|------------|--|--------------------|---------|-----|-----|--------|-----|-----|-----|

### Other Antimicrobials

|                   |                                     |       |         |                  |                      |                     |         |         |              |
|-------------------|-------------------------------------|-------|---------|------------------|----------------------|---------------------|---------|---------|--------------|
| Cleocin           | <i>clindamycin</i>                  | \$12  | Generic | \$0              | \$5                  | \$5-10              | \$0     | \$0     | 150mg, 300mg |
| Cleocin Vaginal   | <i>clindamycin 2% vaginal cream</i> | \$88  | Brand   | \$0              | \$5                  | \$5-10 cream & supp | \$0     | \$0     | \$0 (cream)  |
| Zyvox             | <i>linezolid</i>                    | \$240 | Generic | max 14 tabs/week | \$15 - up to 30 tabs | not covered         | need PA | need PA | need PA      |
| Macrobid          | <i>nitrofurantoin BID</i>           | \$58  | Generic | \$0              | \$5                  | \$5-10              | \$0     | \$0     | \$0          |
| Highlighted drugs | - covered by all 6 plans            |       |         |                  |                      |                     |         |         |              |

## ANTIBIOTICS (2 of 2)

### Antifungals

| BRAND           | Generic                                   | Costco \$ (30 pills)       | Generic Brand | Aloha Care | CVS State employees | HMSA   | HMSA Quest | Ohana   | United Healthcare |
|-----------------|---|----------------------------|---------------|------------|---------------------|--------|------------|---------|-------------------|
| Diflucan        | <i>fluconazole</i>                        | Walmart \$4/tab            | Generic       | \$0        | \$5                 | \$5-10 | \$0        | \$0     | \$0               |
| Sporanox        | <i>itraconazole</i>                       | \$208                      | Generic       | \$0        | \$5                 | \$5-10 | need PA    | need PA | need PA           |
| Nizoral         | <i>ketoconazole</i>                       | \$35                       | Generic       | \$0        | \$5                 | \$5-10 | need PA    | \$0     | \$0               |
| Nizoral Topical | <i>ketoconazole cream or shampoo</i>      | \$17 (120ml)               | Generic       | \$0        | \$5                 | \$5-10 | \$0        | \$0     | \$0               |
| Flagyl          | <i>metronidazole</i>                      | \$17                       | Generic       | \$0        | \$5                 | \$5-10 | \$0        | \$0     | \$0 (tabs)        |
| Metrogel        | <i>metronidazole vaginal gel 0.75%</i>    | \$32 (70 g)                | Generic       | \$0        | \$5                 | \$5-10 | \$0        | \$0     | \$0               |
| Mycostatin      | <i>nystatin topical cream, oint, pwdr</i> | \$18 (15g )<br>walmart \$4 | Generic       | \$0        | \$5                 | \$5-10 | \$0        | \$0     | \$0               |
| Lamisil         | <i>terbinafine</i>                        | \$16 Walmart \$4           | Generic       | \$0        | \$5                 | \$5-10 | \$0        | \$0     | \$0               |

### Anti-Virals

| BRAND    | Generic             | Costco \$ (30 pills) | Generic Brand | Aloha Care | CVS State employees      | HMSA   | HMSA Quest | Ohana   | United Healthcare      |
|----------|---------------------|----------------------|---------------|------------|--------------------------|--------|------------|---------|------------------------|
| Zovirax  | <i>acyclovir</i>    | \$7<br>walmart \$4   | Generic       | \$0        | \$5                      | \$5-10 | \$0        | \$0     | caps,<br>tabs,<br>susp |
| Famvir   | <i>famciclovir</i>  | \$42                 | Generic       | \$0        | covered?*                | \$5-10 | \$0        | need PA | need PA                |
| Cytovene | <i>ganciclovir</i>  | \$ not avail         | Generic       | 500mg vial | covered?* 5 up to 7 days | \$5-10 | need PA    | need PA | \$0                    |
| Valtrex  | <i>valacyclovir</i> | \$37                 | Generic       | \$0        | \$5                      | \$5-10 | \$0        | \$0     | \$0                    |

\*Conflicting information on CVS website.

Highlighted drugs - covered by all 6 plans

## Anticoagulants/Platelet Inhibitors

| BRAND   | Generic            | Costco \$ (30 days) | Generic Brand | Aloha Care             | CVS (State employees) | HMSA        | HMSA Quest | Ohana   | United Healthcare |
|---------|--------------------|---------------------|---------------|------------------------|-----------------------|-------------|------------|---|-------------------|
| Eliquis | <i>apixaban</i>    | \$413 (#60)         | Brand         | preferred but need PA* | \$25                  | \$20-25     | \$0        | need PA   | \$0               |
| Pradaxa | <i>dabigatran</i>  | \$328(60 cap)       | Brand         | need PA                | \$50                  | \$20-25     | need PA    | need PA   | need PA           |
| Savaysa | <i>edoxaban</i>    | \$335               | Brand         | need PA                | \$50                  | not covered | need PA    | need PA   | \$0               |
| Xarelto | <i>rivaroxaban</i> | \$406               | Brand         | preferred but need PA* | \$25                  | \$20-25     | \$0        | 10mg -\$0<br>15mg -\$0<br>20mg - must fail warfarin | need PA           |

\*Aloha Care: **Eliquis, Xarelto** are preferred, but still need PA

HMSA Quest: **Xarelto** - 10mg - 35 per 35 days, 1 fill per 90d. 15mg - 42 per 21 days, 1 fill per 90d

Ohana: **Xarelto** -10mg - \$0, 15mg - 62 per 31 days. 20mg - must fail warfarin within past 90 days. Starter Pack - 51 per 30 days

| BRAND         | Generic                   | Costco \$ (30 days) | Generic Brand  | Aloha Care | CVS (State employees) | HMSA    | HMSA Quest | Ohana   | United Healthcare  |
|---------------|---------------------------|---------------------|----------------|------------|-----------------------|---------|------------|---------|--------------------|
| <b>Plavix</b> | <b><i>clopidogrel</i></b> | <b>\$12</b>         | <b>Generic</b> | \$0        | \$5                   | \$5-10  | \$0        | \$0     | \$0                |
| Brilinta      | <i>ticagrelor</i>         | \$369 (60 tab)      | Brand          | need PA    | \$25                  | \$20-25 | \$0        | need PA | Diagnosis required |

**Highlighted drugs** - covered by all 6 plans

# ASTHMA (1 of 2)

## Beta Agonists

| BRAND       | Generic                  | Costco \$ (1 inhaler) | Generic Brand | Aloha Care | CVS State employees | HMSA          | HMSA Quest        | Ohana   | United Healthcare |
|-------------|--------------------------|-----------------------|---------------|------------|---------------------|---------------|-------------------|---------|-------------------|
| Proair      | <i>albuterol inhaler</i> | \$56 (Walmart neb\$4) | Brand         | \$0        | \$25                | \$20-25       | \$0 (2 inh/month) | need PA | need PA           |
| Proventil   | <i>albuterol inhaler</i> | \$66 Epocrates        | Generic       | \$0        | \$50                | non-preferred | need PA           | need PA | need PA           |
| Ventolin    | <i>albuterol inhaler</i> | \$58 Epocrates        | Generic       | \$0        | \$50                | \$20-25       | \$0               | \$0     | \$0               |
| Arcapta     | <i>indacaterol</i>       | \$215                 | Brand         | need PA    | \$25                | not covered   | need PA           | need PA | \$0               |
| Striverdi   | <i>olodaterol</i>        | \$163                 | Brand         | need PA    | \$50                | \$20-25       | \$0               | \$0     | \$0               |
| Xopenex HFA | <i>levalbuterol</i>      | \$60                  | Generic       | need PA    | \$50                | non-preferred | need PA           | \$0     | need PA           |
| Foradil     | <i>formoterol</i>        | \$239 for 60 caps     | Brand         | need PA    | \$50                | \$20-25       | need PA           | \$0     | need PA           |
| Serevent    | <i>salmeterol</i>        | \$242                 | Brand         | \$0        | \$25                | non-preferred | need PA           | need PA | need PA           |

## Inhaled Steroids

| BRAND              | Generic                       | Costco \$ (1 inhaler) | Generic Brand | Aloha Care          | CVS (State employees) | HMSA    | HMSA Quest  | Ohana             | United Healthcare  |
|--------------------|-------------------------------|-----------------------|---------------|---------------------|-----------------------|---------|-------------|-------------------|--------------------|
| QVAR               | <i>beclomethasone</i>         | \$190 (40mcg)         | Brand         | \$0 (not Redihaler) | \$25                  | \$20-25 | need PA     | \$0               | Redihaler only     |
| Pulmicort          | <i>budesonide</i>             | \$192                 | Brand         | \$0 flexhaler       | \$25                  | \$20-25 | nebs only   | neb only age ≤ 8y | if age ≥ 5 need PA |
| Arnuity Ellipta    | <i>fluticasone furoate</i>    | \$195                 | Brand         | need PA             | \$50                  | \$20-25 | \$0         | \$0               | \$0                |
| Flovent Diskus/HFA | <i>fluticasone propionate</i> | \$193 (110mcg)        | Brand         | \$0 - HFA only      | \$25 Diskus HFA       | \$20-25 | Diskus, HFA | Diskus, HFA       | HFA age ≤ 11       |
| Asmanex            | <i>mometasone</i>             | \$204                 | Brand         | need PA             | \$25                  | \$20-25 | need PA     | \$0               | \$0                |

## Steroid/Long-acting Beta-Agonists

| BRAND             | Generic                                   | Costco \$ (1 inhaler) | Generic Brand | Aloha Care  | CVS (State employees) | HMSA    | HMSA Quest  | Ohana   | United Healthcare |
|-------------------|---|-----------------------|---------------|-------------|-----------------------|---------|-------------|---------|-------------------|
| Advair Diskus/HFA | <i>fluticasone propionate/ salmeterol</i> | \$253 (45-21 HFA)     | Brand         | Diskus, HFA | \$25 Diskus, HFA      | \$20-25 | Diskus, HFA | Diskus  | need PA           |
| Breo Ellipta      | <i>fluticasone furoate/ vilanterol</i>    | \$288                 | Brand         | need PA     | \$25                  | \$20-25 | need PA     | need PA | step therapy*     |
| Symbicort         | <i>budesonide/ formoterol</i>             | \$270 (160-4.5)       | Brand         | \$0         | Breo, Dulera          | \$20-25 | need PA     | \$0     | need PA           |
| Dulera            | <i>mometasone/formoterol</i>              | \$264                 | Brand         | need PA     | \$25                  | \$20-25 | \$0         | \$0     | need PA           |

United HealthCare: Breo Ellipta - trial of 30 day inhaled steroids, long-acting beta2 agonist, or inhaled anticholinergic.

## ASTHMA (2 of 2)

### Anticholinergic (LAMA)

| BRAND           | Generic                        | Costco \$ (1 inhaler)  | Generic Brand | Aloha Care               | CVS State employees | HMSA          | HMSA Quest | Ohana | United Healthcare |
|-----------------|--------------------------------|------------------------|---------------|--------------------------|---------------------|---------------|------------|-------|-------------------|
| Atrovent        | <i>Ipratropium bromide</i>     | \$249 (neb \$4Walmart) | Generic       | \$0                      | Spiriva             | \$5-10        | nebs       | \$0   | \$0 HFA           |
| Spiriva         | <i>tiotropium</i>              | \$336                  | Brand         | handihaler, not respimat | \$25                | \$20-25       | need PA    | \$0   | need PA           |
| Incruse Ellipta | <i>umeclidinium</i>            | \$245                  | Brand         | need PA                  | Spiriva             | non-preferred | \$0        | \$0   | \$0               |
| Anoro Ellipta   | <i>umeclidinium/vilanterol</i> | \$305                  | Brand         | need PA                  | \$25                | non-preferred | \$0        | \$0   | \$0               |

### Other

| BRAND       | Generic                       | Costco \$ (1 inhaler) | Generic Brand | Aloha Care   | CVS (State employees) | HMSA    | HMSA Quest | Ohana | United Healthcare |
|-------------|-------------------------------|-----------------------|---------------|--------------|-----------------------|---------|------------|-------|-------------------|
| Intal (neb) | <i>cromolyn sodium (neb)</i>  | \$124                 | Generic       | nebs         | \$5                   | \$5-10  | nebs       | \$0   | \$0               |
| Combivent   | <i>albuterol/ ipratropium</i> | \$307                 | Brand         | \$0          | \$25                  | \$20-25 | \$0        | \$0   | \$0               |
| Singulair   | <i>montelukast</i>            | \$22                  | Generic       | step therapy | \$5                   | \$5-10  | \$0        | \$0   | \$0               |
| Accolate    | <i>zafirlukast</i>            | \$136 / 60 tabs       | Generic       | step therapy | \$5                   | \$5-10  | needs PA   | \$0   | need PA           |

### Spacers

|   |                |               |       |                                 |                   |                            |                    |                         |                  |
|---|----------------|---------------|-------|---------------------------------|-------------------|----------------------------|--------------------|-------------------------|------------------|
| E-Z Spacer, Vortex, Air Zone, Aerochamber | <i>spacers</i> | \$44 Easivent | Brand | Aerochamber, vortex, E-Z Spacer | pay out of pocket | Air Zone E-Z Spacer Vortex | Aerochamber Vortex | Aerochamber, E-Z spacer | Easivent, Vortex |
|---|----------------|---------------|-------|---------------------------------|-------------------|----------------------------|--------------------|-------------------------|------------------|

AlohaCare: Singulair and Accolate -- Needs trial of intranasal steroid or formulary asthma agent.



# BIRTH CONTROL

## Monophasic

| BRAND                              | Ethinyl estradiol (EE mcg)   | Costco \$ (30 days)                           | Generic Brand | Aloha Care            | CVS State employees | HMSA                | HMSA Quest | Ohana               | United Healthcare |
|------------------------------------|------------------------------|---|---------------|-----------------------|---------------------|---------------------|------------|---------------------|-------------------|
| Alesse, Aviane                     | 20 EE<br>0.1 levonorgestrel  | \$19 levonest-28 (Walmart \$9)                | Generic       | Aviane                | \$0-5 Aviane        | \$0-\$10 Alesse     | \$0        | Aviane              | Alesse            |
| Loestrin (Junel) 1/20              | 20 EE<br>1.0 norethindrone   | \$97 Loestrin 21                              | Generic       | Junel                 | \$0-5 Junel         | not covered         | \$0        | Junel               | loestrin          |
| Yaz, Gianvi                        | 20 EE<br>3.0 drospirenone    | \$45 Loryna                                   | Generic       | Gianvi                | \$0-5 Gianvi        | \$0-10 Yaz          | \$0        | Gianvi              | need PA           |
| Desogen, Apri, Ortho-Cept, Enskyce | 30 EE<br>0.15 desogestrel    | \$22 CVS (Walmart \$9 Enskyce)                | Generic       | Apri, Enskyce         | \$0-5 Apri          | \$0-10 Desogen      | \$0        | Apri                | Ortho-Cept        |
| Yasmin, Ocella, Syeda              | 30 EE<br>3.0 drospirenone    | \$57 Syeda                                    | Generic       | Ocella, Syeda         | \$0-5 Ocella        | \$0-10 Yasmin       | \$0        | Ocella, Syeda       | need PA           |
| Nordette, Altavera, Kurvelo        | 30 EE<br>0.15 levonorgestrel | \$29 Altavera Epocrates (Walmart \$4 Kurvelo) | Generic       | Altavera, Kurvelo     | \$0-5 Altavera      | not covered         | \$0        | Altavera            | Nordette          |
| Lo/ovral, Low-Ogestrel, Elinest    | 30 EE<br>0.3 norgestrel      | \$20 Elinest                                  | Generic       | Elinest, Low-ogestrel | \$0-5 Low-Ogestrel  | not covered         | \$0        | Low-Ogestrel        | Lo/ovral          |
| Ortho-Cyclen, Mononessa, sprintec  | 35 EE<br>0.25 norgestimate   | \$29 Sprintec Epocrates (Walmart \$9)         | Generic       | Sprintec, Mononessa   | \$0-5 Mononessa     | Ortho Tri-Cyclen Lo | \$0        | Mononessa, Sprintec | Ortho-Cyclen      |

## Progestin only

|  |               |                          |         |                        |               |                      |     |                                   |                          |
|--|---------------|--------------------------|---------|------------------------|---------------|----------------------|-----|-----------------------------------|--------------------------|
| Nor-QD, Heather, Micronor, Errin, Camila, Aygestin | norethindrone | \$20 Heather walmart \$9 | Generic | Heather, Camila, Errin | \$0-5 Heather | \$0-10 Norethindrone | \$0 | Camila, Errin, Jolivette, Nora-Be | Ortho Micronor, Aygestin |
|--|---------------|--------------------------|---------|------------------------|---------------|----------------------|-----|-----------------------------------|--------------------------|

## Others/HPV Vaccine

| BRAND                        | Generic                                     | Costco \$ (30 days)                      | Generic Brand | Aloha Care                  | CVS State employees   | HMSA                | HMSA Quest              | Ohana           | United Healthcare    |
|------------------------------|---|--|---------------|-----------------------------|-----------------------|---------------------|-------------------------|-----------------|----------------------|
| Ella                         | ulipristal                                  | \$43                                     | Brand         | need PA                     | \$0-20                | not covered         | Ella (2/year)           | need PA         | need PA              |
| Plan B One step              | levonorgestrel 1.5mg                        | Longs \$40 - OTC age > 18. N/a at Costco | OTC           | levo-norgestrel 1.5mg       | \$0-5 levo norgestrel | \$0-10              | levonorgestrel (2/year) | Plan B one-step | levonorgestrel 1.5mg |
| OrthoEvra (patch/wk), Xulane | norelgestromin/ethinyl estradiol            | \$113 (3 patch)                          | Generic       | Xulane (Trial of OCP first) | \$0-20 Xulane         | \$0-10              | \$0                     | \$0 Xulane      | \$0 Xulane           |
| NuvaRing (vaginal ring)      | 0.12 etonogestrel / 0.015 ethinyl estradiol | \$111                                    | Brand         | Trial of OCP first          | \$25                  | \$0-25              | \$0                     | \$0             | \$0                  |
| Gardasil                     | Human Papillomavirus Quadrivalent Vaccine   | \$155/inj Epocrates                      | Brand         | 19-26 year old              | \$25                  | F 19-26, M 19-21 yr | F 19-26 yr, M 19-21 yr  | 19-26 year old  | \$0                  |

# CHOLESTEROL

## Statins

| BRAND     | GENERIC      | Costco \$ (30 days)       | Generic Brand | Aloha Care | CVS State employees | HMSA   | HMSA Quest | Ohana | United Healthcare |
|-----------|--------------|---------------------------|---------------|------------|---------------------|--------|------------|-------|-------------------|
| Lipitor   | atorvastatin | \$15 (10mg)               | Generic       | \$0        | \$5                 | \$5-10 | \$0        | \$0   | \$0               |
| Mevacor   | lovastatin   | \$6 (walmart \$4 10.20mg) | Generic       | \$0        | \$5                 | \$5-10 | \$0        | \$0   | \$0               |
| Pravachol | pravastatin  | \$44                      | Generic       | \$0        | \$5                 | \$5-10 | \$0        | \$0   | need PA           |
| Crestor   | rosuvastatin | \$200                     | Generic       | \$0        | \$5                 | \$5-10 | need PA    | \$0   | need PA           |
| Zocor     | simvastatin  | \$8                       | Generic       | \$0        | \$5                 | \$5-10 | \$0        | \$0   | \$0               |

Ohana: Lipitor -- Must fail simvastatin, pravastatin, lovastatin.

Walmart: Pravastatin -- 10mg \$4, 20mg-\$4, 40mg-\$10.

## Ezetimibe

| BRAND   | GENERIC               | Costco \$ (30 days) | Generic Brand | Aloha Care | CVS State employees | HMSA          | HMSA Quest | Ohana   | United Healthcare |
|---------|-----------------------|---------------------|---------------|------------|---------------------|---------------|------------|---------|-------------------|
| Zetia   | ezetimibe             | \$210               | Generic       | \$0        | \$25                | \$5-10        | \$0        | need PA | need PA           |
| Vytorin | ezetimibe/simvastatin | \$217               | Generic       | \$0        | need PA             | non-preferred | need PA    | need PA | need PA           |

## Gemfibrozil

| BRAND | GENERIC     | Costco \$ (30 days) | Generic Brand | Aloha Care | CVS State employees | HMSA   | HMSA Quest | Ohana | United Healthcare |
|-------|-------------|---------------------|---------------|------------|---------------------|--------|------------|-------|-------------------|
| Lopid | gemfibrozil | \$7                 | Generic       | 600 mg tab | \$5                 | \$5-10 | \$0        | \$0   | \$0               |

## Niacin

|         |                |       |     |     |     |        |     |        |     |
|---------|----------------|-------|-----|-----|-----|--------|-----|--------|-----|
| Niaspan | niacin SR (QD) | \$111 | OTC | \$0 | \$5 | \$5-10 | \$0 | Niacor | \$0 |
|---------|----------------|-------|-----|-----|-----|--------|-----|--------|-----|

## Fibrates

| BRAND           | GENERIC                 | Costco \$ (30 days)      | Generic Brand | Aloha Care | CVS State employees | HMSA        | HMSA Quest     | Ohana | United Healthcare |
|-----------------|-------------------------|--------------------------|---------------|------------|---------------------|-------------|----------------|-------|-------------------|
| Lofibra, Antara | fenofibrate, micronized | \$150 (antara 130mg #30) | Generic       | \$0        | need PA             | not covered | 67, 134, 200mg | \$0   | step therapy*     |
| Tricor          | fenofibrate             | \$19 (54mg)              | Generic       | \$0        | \$5                 | \$5-10      | \$0            | \$0   | need PA           |

## Others

| BRAND    | GENERIC        | Costco \$ (30 days) | Generic Brand | Aloha Care | CVS State employees | HMSA          | HMSA Quest | Ohana   | United Healthcare          |
|----------|----------------|---------------------|---------------|------------|---------------------|---------------|------------|---------|----------------------------|
| Colestid | colestipol     | \$46                | Generic       | \$0        | \$5                 | \$5-10        | \$0        | need PA | need PA                    |
| Questran | cholestyramine | \$55                | Generic       | \$0        | \$5                 | \$5-10        | \$0        | \$0     | cans covered (not packets) |
| WelChol  | colesevelam    | \$494 (3.75g #30)   | Brand         | need PA    | \$25                | non-preferred | need PA    | need PA | need PA                    |

\*Conflicting information on CVS website.

United HealthCare: fenofibrate, micronized -- must be on a statin or 90 day supply of gemfibrozil within 180 days

Highlighted drugs - covered by all 6 plans

# DEPRESSION

## SSRI

| BRAND         | Generic                  | Costco \$<br>(30 pills)   | Generic<br>Brand | Aloha Care | CVS State<br>employees | HMSA           | HMSA<br>Quest | Ohana | United<br>Healthcare |
|---------------|--------------------------|---------------------------|------------------|------------|------------------------|----------------|---------------|-------|----------------------|
| Celexa        | <i>citalopram</i>        | \$6<br>walmart \$4        | Generic          | \$0        | \$5                    | \$5-10         | \$0           | \$0   | \$0                  |
| Lexapro       | <i>escitalopram</i>      | \$7                       | Generic          | \$0        | \$5                    | \$5-10         | \$0           | \$0   | \$0 tabs<br>only     |
| Prozac        | <i>fluoxetine</i>        | \$6                       | Generic          | \$0        | \$5                    | \$5-10         | \$0           | \$0   | 10mg &<br>20mg caps  |
| Prozac weekly | <i>fluoxetine weekly</i> | \$173/ 4 tab<br>Epocrates | Generic          | \$0        | covered?*              | need PA        | \$0           | \$0   | need PA              |
| Luvox         | <i>fluvoxamine</i>       | \$20                      | Generic          | \$0        | covered?*              | \$5-10         | \$0           | \$0   | \$0                  |
| Luvox CR      | <i>fluvoxamine ER</i>    | \$220                     | Generic          | \$0        | covered?*              | not<br>covered | \$0           | \$0   | need PA              |
| Paxil         | <i>paroxetine</i>        | \$6<br>(Walmart \$10)     | Generic          | \$0        | \$5                    | \$5-10         | \$0           | \$0   | \$0 tabs<br>only     |
| Paxil CR      | <i>paroxetine ER</i>     | \$80                      | Generic          | \$0        | \$5                    | \$5-10         | \$0           | \$0   | need PA              |
| Zoloft        | <i>sertraline</i>        | \$12                      | Generic          | \$0        | \$5                    | \$5-10         | \$0           | \$0   | \$0 tabs<br>only     |

## SNRIs

| BRAND           | Generic               | Costco \$<br>(30 pills) | Generic<br>Brand | Aloha Care              | CVS State<br>employees | HMSA              | HMSA<br>Quest | Ohana              | United<br>Healthcare |
|-----------------|-----------------------|-------------------------|------------------|-------------------------|------------------------|-------------------|---------------|--------------------|----------------------|
| Pristiq         | <i>desvenlafaxine</i> | \$114                   | Generic          | Must fail 2<br>generics | \$25                   | \$5-10            | \$0           | fail 2<br>generics | need PA              |
| Cymbalta        | <i>duloxetine</i>     | \$247                   | Generic          | \$0                     | \$5                    | non-<br>preferred | \$0           | \$0                | \$0                  |
| Effexor (bid)   | <i>venlafaxine</i>    | \$15                    | Generic          | \$0                     | \$5                    | \$5-10            | \$0           | \$0                | \$0                  |
| Effexor XR (QD) | <i>venlafaxine ER</i> | \$90                    | Generic          | \$0 cap<br>only         | \$5                    | \$5-10            | \$0           | \$0                | \$0                  |

## Other

| BRAND               | Generic             | Costco \$<br>(30 pills) | Generic<br>Brand | Aloha Care               | CVS State<br>employees | HMSA   | HMSA<br>Quest | Ohana | United<br>Healthcare |
|---------------------|---------------------|-------------------------|------------------|--------------------------|------------------------|--------|---------------|-------|----------------------|
| Wellbutrin SR (BID) | <i>bupropion SR</i> | \$21                    | Generic          | \$0                      | \$5                    | \$5-10 | \$0           | \$0   | \$0                  |
| Wellbutrin XL (QD)  | <i>bupropion XL</i> | \$27                    | Generic          | \$0<br>150,300mg<br>only | \$5                    | \$5-10 | \$0           | \$0   | 150,<br>300mg        |
| Remeron             | <i>mirtazapine</i>  | \$15                    | Generic          | \$0                      | \$5                    | \$5-10 | \$0           | \$0   | tabs only            |
| Serzone             | <i>nefazodone</i>   | \$44                    | Generic          | \$0                      | \$5                    | \$5-10 | \$0           | \$0   | need PA              |

\*Conflicting information on CVS website.

Highlighted drugs - covered by all 6 plans

## DERMATOLOGY (1 of 2)

### Very high potency

| BRAND                   | Generic  | Costco \$ (30 pills) | Generic Brand  | Aloha Care             | CVS State employees | HMSA                     | HMSA Quest                          | Ohana             | United Healthcare |
|-------------------------|--|----------------------|----------------|------------------------|---------------------|--------------------------|-------------------------------------|-------------------|-------------------|
| Diprolene AF            | <i>a. betamethasone d. 0.05% oint</i>          | \$67 (15g)           | Generic        | \$0 oint               | \$77 oint           | \$5-10 oint, gel         | ointment, gel                       | need PA           | ointment, gel     |
| <b>Temovate, Cormax</b> | <b><i>clobetasol 0.05%, cream, oint</i></b>    | <b>\$21 (30gm)</b>   | <b>Generic</b> | <b>\$0 cream, oint</b> | <b>\$5</b>          | <b>\$5-10</b>            | <b>cream, gel, oint, soln, foam</b> | <b>soln only</b>  | <b>soln only</b>  |
| Temovate E              | <i>clobetasol 0.05% emollient cream</i>        | \$80                 | Brand          | \$0                    | not covered         | non-preferred            | need PA                             | need PA           | need PA           |
| <b>Ultravate</b>        | <b><i>halobetasol p. 0.05% cream, oint</i></b> | <b>\$82 (15gm)</b>   | <b>Generic</b> | <b>\$0 cream, oint</b> | <b>\$5</b>          | <b>\$5-10 cream oint</b> | <b>cream, oint</b>                  | <b>cream oint</b> | <b>cream</b>      |

### High potency

| BRAND                                    | Generic   | Costco \$ (30 pills)          | Generic Brand  | Aloha Care                       | CVS State employees    | HMSA                                | HMSA Quest                    | Ohana                         | United Healthcare             |
|--|---|-------------------------------|----------------|----------------------------------|------------------------|-------------------------------------|-------------------------------|-------------------------------|-------------------------------|
| <b>Betatrex (ointment)</b>               | <b><i>betamethasone valerate 0.1% oint</i></b>        | <b>\$62</b>                   | <b>Generic</b> | <b>\$0 oint</b>                  | <b>\$5</b>             | <b>\$5-10</b>                       | <b>ointment</b>               | <b>cream, lotion, oint</b>    | <b>\$0</b>                    |
| Cyclocort                                | <i>amcinonide 0.1% cream, lotion</i>                  | \$244                         | Generic        | \$0 cream, lotion, oint          | \$5                    | \$5-10                              | need PA                       | need PA                       | ointment only                 |
| Diprolene AF                             | <i>a. betamethasone d. 0.05% cream</i>                | \$90                          | Generic        | \$0 cream                        | \$30                   | non-preferred                       | cream                         | cream                         | cream                         |
| Diprolene                                | <i>a. betamethasone d. 0.05% lotion, gel</i>          | \$90                          | Generic        | \$0 lotion                       | \$30                   | ointment, gel only                  | lotion                        | need PA                       | lotion, gel                   |
| <b>Diprosone, Maxivate (cream, oint)</b> | <b><i>betamethasone d. 0.05% cream, oint</i></b>      | <b>\$70</b>                   | <b>Generic</b> | <b>\$0 cream, oint</b>           | <b>\$5 cream, oint</b> | <b>\$5-10 cream/ointment/lotion</b> | <b>cream, lotion, oint</b>    | <b>cream, oint</b>            | <b>cream, lotion, oint</b>    |
| Florone, Maxiflor, Psorcon B             | <i>diflorasone 0.05% cream, oint</i>                  | \$75 (15gm)                   | Generic        | \$0 cream, oint                  | \$25 Apexicon E        | \$5-10 cream oint                   | cream                         | need PA                       | need PA                       |
| <b>Kenalog</b>                           | <b><i>triamcinolone a. 0.5% cream, oint</i></b>       | <b>\$12 (15g) walmart \$4</b> | <b>Generic</b> | <b>\$0 cream, oint</b>           | <b>\$5</b>             | <b>\$5-10 cream oint</b>            | <b>cream, oint</b>            | <b>cream, oint</b>            | <b>cream</b>                  |
| <b>Lidex</b>                             | <b><i>fluocinonide 0.05% cream, oint, gel</i></b>     | <b>\$10 Epocrates</b>         | <b>Generic</b> | <b>\$0 cream, oint, sol, gel</b> | <b>\$5</b>             | <b>\$5-10</b>                       | <b>cream, gel, oint, soln</b> | <b>cream, gel, oint, soln</b> | <b>cream, gel, oint, soln</b> |
| Lidex E                                  | <i>fluocinonide 0.05% emollient cream</i>             | \$41                          | Generic        | \$0 cream                        | covered?*              | not covered                         | need PA                       | cream                         | need PA                       |
| Topicort                                 | <i>desoximetasone 0.25% cream/ointment, 0.05% gel</i> | \$70                          | Generic        | \$0 cream, oint, gel             | \$5                    | \$5-10 0.25% cream/ointment         | cream, gel, oint              | need PA                       | need PA                       |

## DERMATOLOGY (2 of 2)

### Medium potency

| BRAND                               | Generic  | Costco \$ (15gm)        | Generic Brand  | Aloha Care              | CVS State employees | HMSA                     | HMSA Quest              | Ohana                      | United Healthcare          |
|-------------------------------------|--|-------------------------|----------------|-------------------------|---------------------|--------------------------|-------------------------|----------------------------|----------------------------|
| <b>Betatrex</b>                     | <i>betamethasone v. 0.1% cream, lotion</i>         | <b>\$15</b>             | <b>Generic</b> | <b>\$0 cream lotion</b> | \$5, cream, lotion  | <b>\$5-10 cream lot</b>  | cream, lotion, oint     | <b>cream, lotion, oint</b> | cream, lotion, oint        |
| Cutivate                            | <i>fluticasone p. 0.05% cream, 0.005% oint</i>     | \$18 Epocrates          | Generic        | \$0 cream, oint, lotion | \$5, cream, lotion  | non-preferred            | cream, oint             | cream, oint                | cream, oint                |
| <b>Diprosone, Maxivate (lotion)</b> | <i>betamethasone d. 0.05% lotion</i>               | <b>\$51 Epocrates</b>   | <b>Generic</b> | <b>\$0 lotion</b>       | <b>\$5 lotion</b>   | <b>\$5-10 lotion</b>     | <b>lotion</b>           | <b>lotion</b>              | <b>lotion</b>              |
| Elocon                              | <i>mometasone f. 0.1% cream, soln, oint</i>        | \$11 (15gm)             | Generic        | \$0 cream, soln, oint   | \$5                 | non-preferred            | cream, lot, oint        | cream, oint, soln          | cream, oint, soln          |
| <b>Kenalog</b>                      | <i>triamcinolone a. 0.1% or 0.025% cream, oint</i> | <b>\$10 walmart \$4</b> | <b>Generic</b> | <b>\$0</b>              | <b>\$5</b>          | <b>\$5-10</b>            | <b>cream, lot, oint</b> | <b>cream, oint</b>         | <b>cream, oint, lotion</b> |
| Locoid                              | <i>hydrocortisone butyrate 0.1% cream</i>          | \$35 Epocrates          | Generic        | \$0 cream, oint, soln   | \$5                 | \$5-10                   | cream, oint, soln       | need PA                    | cream, oint, soln          |
| <b>Synalar 0.025%</b>               | <i>fluocinolone a. 0.025% cream, oint</i>          | <b>\$36</b>             | <b>Generic</b> | <b>\$0 cream, oint</b>  | <b>\$5</b>          | <b>\$5-10</b>            | <b>cream, oint</b>      | <b>ointment, cream</b>     | <b>cream, oint</b>         |
| Topicort LP                         | <i>desoximetasone 0.05% cream</i>                  | \$43 (15g) Epocrates    | Generic        | cream, gel, oint        | \$5                 | \$5-10                   | cream                   | need PA                    | need PA                    |
| <b>Westcort</b>                     | <i>hydrocortisone v. 0.2% cream, oint</i>          | <b>\$53 Epocrates</b>   | <b>Generic</b> | <b>\$0 cream, oint</b>  | <b>\$5</b>          | <b>\$5-10 cream oint</b> | <b>cream, oint</b>      | <b>cream, oint</b>         | <b>cream</b>               |

### Low potency

| BRAND                   | Generic  | Costco \$ (30 pills)         | Generic Brand  | Aloha Care             | CVS State employees | HMSA                | HMSA Quest                  | Ohana                      | United Healthcare          |
|-------------------------|--|------------------------------|----------------|------------------------|---------------------|---------------------|-----------------------------|----------------------------|----------------------------|
| <b>Aclovote</b>         | <i>aclometasone d. 0.05% cream, oint</i>             | <b>\$26 Epocrates</b>        | <b>Generic</b> | <b>\$0 cream, oint</b> | \$5                 | non-preferred       | cream, oint                 | cream, oint                | cream, oint                |
| <b>Cetacort, Hytone</b> | <i>hydrocortisone 1% or 2.5% cream, oint, lotion</i> | <b>\$8 (30g) walmart \$4</b> | <b>Generic</b> | <b>\$0</b>             | <b>\$5</b>          | <b>0.25% lotion</b> | cream, gel, lot, oint, soln | <b>cream, oint, lotion</b> | <b>lotion, cream, oint</b> |
| <b>Desowen</b>          | <i>desonide 0.05% cream, oint, lotion</i>            | <b>\$89</b>                  | <b>Generic</b> | <b>\$0</b>             | \$5                 | \$5-10              | cream, lot, oint            | cream, oint                | need PA                    |

\*Conflicting information on UHC Evercare website.

Highlighted - covered by all 6 plans

## DIABETES (1 of 4)

### Metformin

| BRAND         | Generic             | Costco \$ (30 pills)       | Generic Brand | Aloha Care | CVS State employees | HMSA   | HMSA Quest | Ohana | United Healthcare |
|---------------|---------------------|----------------------------|---------------|------------|---------------------|--------|------------|-------|-------------------|
| Glucophage    | <i>metformin</i>    | \$7 (500mg)<br>walmart \$4 | Generic       | \$0        | \$5                 | \$5-10 | \$0        | \$0   | \$0               |
| Glucophage XR | <i>metformin ER</i> | \$7 (500mg)<br>walmart \$4 | Generic       | \$0        | \$5                 | \$5-10 | \$0        | \$0   | \$0               |

### Sulfonylurea/Combinations

| BRAND              | Generic                    | Costco \$ (30 pills) | Generic Brand | Aloha Care | CVS State employees | HMSA   | HMSA Quest | Ohana | United Healthcare |
|--------------------|----------------------------|----------------------|---------------|------------|---------------------|--------|------------|-------|-------------------|
| Amaryl             | <i>glimepiride</i>         | \$6<br>walmart \$4   | Generic       | \$0        | \$5                 | \$5-10 | \$0        | \$0   | \$0               |
| Glucotrol          | <i>glipizide</i>           | \$6<br>walmart \$4   | Generic       | \$0        | \$5                 | \$5-10 | \$0        | \$0   | \$0               |
| Glucotrol XL       | <i>glipizide ER</i>        | \$17                 | Generic       | \$0        | \$5                 | \$5-10 | \$0        | \$0   | \$0               |
| Micronase, Diabeta | <i>glyburide</i>           | \$6<br>walmart \$4   | Generic       | \$0        | \$5                 | \$5-10 | \$0        | \$0   | \$0               |
| Metaglip           | <i>glipizide/metformin</i> | \$25<br>Epocrates    | Generic       | \$0        | \$5                 | \$5-10 | \$0        | \$0   | need PA           |
| Glucovance         | <i>glyburide/metformin</i> | \$7                  | Generic       | \$0        | \$5                 | \$5-10 | \$0        | \$0   | \$0               |

### TZD/Combinations

| BRAND        | Generic                         | Costco \$ (30 pills) | Generic Brand | Aloha Care   | CVS State employees | HMSA   | HMSA Quest | Ohana               | United Healthcare |
|--------------|---------------------------------|----------------------|---------------|--------------|---------------------|--------|------------|---------------------|-------------------|
| Actos        | <i>pioglitazone</i>             | \$15 (15mg)          | Generic       | step therapy | \$5                 | \$5-10 | \$0        | must fail metformin | \$0               |
| Duetact      | <i>pioglitazone/glimepiride</i> | \$293                | Generic       | step therapy | \$5                 | \$5-10 | \$0        | need PA             | need PA           |
| ACTOplus met | <i>pioglitazone/metformin</i>   | \$255                | Generic       | step therapy | \$5                 | \$5-10 | \$0        | must fail metformin | need PA           |

AlohaCare: Actos, Duetact, ACTOplusmet - trial of metformin or metformin/combo drugs in last 60 days

## DIABETES (2 of 4)

### DPP-4 Inhibitors/Combinations

| BRAND         | Generic                         | Costco \$ (30 pills) | Generic Brand | Aloha Care | CVS State employees | HMSA          | HMSA Quest    | Ohana               | United Healthcare |
|---------------|---------------------------------|----------------------|---------------|------------|---------------------|---------------|---------------|---------------------|-------------------|
| Januvia       | <i>sitagliptin</i>              | \$408                | Brand         | need PA    | \$25                | \$25          | step therapy* | must fail metformin | need PA           |
| Tradjenta     | <i>linagliptin</i>              | \$338                | Brand         | \$0        | \$25                | \$25          | need PA       | need PA             | need PA           |
| Onglyza       | <i>saxagliptin</i>              | \$316                | Brand         | need PA    | \$30                | non-preferred | need PA       | need PA             | need PA           |
| Nesina        | <i>alogliptin</i>               | \$172                | Generic       | need PA    | \$30                | \$5-\$10      | need PA       | need PA             | step therapy*     |
| Kazano        | <i>alogliptin/metformin</i>     | \$172                | Generic       | need PA    |                     | \$5-\$10      | need PA       | need PA             | step therapy*     |
| Janumet       | <i>sitagliptin/metformin</i>    | \$435                | Brand         | need PA    | \$25                | \$25          | step therapy* | must fail metformin | need PA           |
| Janumet XR    | <i>sitagliptin/metformin ER</i> | \$435                | Brand         | need PA    | \$25                | \$25          | step therapy* | must fail metformin | need PA           |
| Kombiglyze XR | <i>saxagliptin/metformin ER</i> | \$394                | Brand         | need PA    | \$30                | non-preferred | need PA       | need PA             | need PA           |

### GLP-1 Mimetic

| BRAND     | Generic             | Costco \$ (30 pills) | Generic Brand | Aloha Care | CVS State employees | HMSA          | HMSA Quest    | Ohana   | United Healthcare |
|-----------|---------------------|----------------------|---------------|------------|---------------------|---------------|---------------|---------|-------------------|
| Byetta    | <i>exenatide</i>    | \$474 (3ml)          | Brand         | need PA    | \$30                | non-preferred | need PA       | need PA | need PA           |
| Bydureon  | <i>exenatide ER</i> | \$514 (8ml)          | Brand         | need PA    | \$25                | \$25          | need PA       | need PA | need PA           |
| Victoza   | <i>liraglutide</i>  | \$440 6ml            | Brand         | need PA    | \$25                | \$25          | step therapy* | need PA | need PA           |
| Trulicity | <i>dulaglutide</i>  | \$699                | Brand         | need PA    | \$25                | not covered   | step therapy* | need PA | step therapy*     |
| Tanzeum   | <i>albiglutide</i>  | \$541                | Brand         | need PA    | \$50                | not covered   | need PA       | need PA | step therapy*     |

HMSA Quest: **Trulicity, Victoza, Januvia, Janumet, Janumet XR** -trial of metformin, sulfonyleurea, or insulin sensitizer for 60 days

United Health Care: **Nesina, Trulicity, Tanzeum**, --trial of Metformin 1500mg qd for 90 days

## DIABETES (3 of 4)

### SGLT2 Inhibitors/Combinations

| BRAND        | Generic                    | Costco \$<br>(30 pills) | Generic Brand | Aloha Care | CVS State employees | HMSA            | HMSA Quest    | Ohana         | United Healthcare |
|--------------|----------------------------|-------------------------|---------------|------------|---------------------|-----------------|---------------|---------------|-------------------|
| Invokana     | canagliflozin              | \$453                   | Brand         | need PA    | \$50                | metformin first | step therapy* | step therapy* | step therapy*     |
| Invokamet    | canagliflozin/metformin    | \$453                   | Brand         | need PA    | \$50                | metformin first | step therapy* | step therapy* | step therapy*     |
| Invokamet XR | canagliflozin/metformin    | \$453                   | Brand         | need PA    | \$50                | metformin first | step therapy* | need PA       | step therapy*     |
| Jardiance    | empagliflozin              | \$415                   | Brand         | need PA    | \$25                | metformin first | need PA       | step therapy* | step therapy*     |
| Synjardy     | empagliflozin/metformin    | \$415                   | Brand         | need PA    | \$50                | metformin first | need PA       | step therapy* | step therapy*     |
| Synjardy XR  | empagliflozin/metformin    | \$415                   | Brand         | need PA    | \$50                | metformin first | need PA       | need PA       | step therapy*     |
| Farxiga      | dapagliflozin              | \$457                   | Brand         | need PA    | \$25                | non-preferred   | need PA       | need PA       | need PA           |
| Xigduo XR    | dapagliflozin/metformin ER | \$457                   | Brand         | need PA    | \$25                | non-preferred   | need PA       | need PA       | need PA           |

AlohaCare: **Invokana, Jardiance, Farxiga** - step 1: metformin AND one DPP-4 Inhibitor/combination product OR GLP-1

HMSA Quest: **Invokana, Invokamet, Invokamet XR** - must try metformin, sulfonylurea, or insulin sensitizer

Ohana: **Invokana, Invokamet, Jardiance** - must try metformin, metformin er, or Riomet within past 100 days



## DIABETES (4 of 4)

### Insulin (Rapid-Acting)

| BRAND   | Generic          | Costco \$ (30 pills)           | Generic Brand | Aloha Care | CVS State employees | HMSA    | HMSA Quest    | Ohana     | United Healthcare |
|---------|------------------|--------------------------------|---------------|------------|---------------------|---------|---------------|-----------|-------------------|
| Apidra  | <i>glulisine</i> | \$210 10ml,<br>\$430 15ml pen  | Brand         | vial, pen  | \$15 vial, pen      | need PA | \$0 vial, pen | vial, pen | need PA           |
| Humalog | <i>lispro</i>    | \$196 10 ml,<br>\$423 15ml pen | Brand         | vial, pen  | \$15 vial, pen      | need PA | \$0 vial, pen | vial, pen | vial              |
| Novolog | <i>aspart</i>    | \$197 10ml,<br>\$375 15ml pen  | Brand         | vial, pen  | \$5 pen             | \$5-10  | \$0 vial, pen | vial, pen | vial              |

### Insulin (Short-Acting)

|           |                |              |     |      |               |                  |               |           |      |
|-----------|----------------|--------------|-----|------|---------------|------------------|---------------|-----------|------|
| Humulin R | <i>insulin</i> | \$89 vial    | OTC | vial | \$5 vial, pen | need PA          | \$0 vial, pen | vial, pen | vial |
| Novolin R | <i>insulin</i> | \$28 Walmart | OTC | \$0  | \$15 vial     | \$5-10 vial, pen | \$0 vial, pen | vial      | vial |

### Insulin (Intermediate-Acting)

|           |            |                |     |           |                |                  |               |           |      |
|-----------|------------|----------------|-----|-----------|----------------|------------------|---------------|-----------|------|
| Humulin N | <i>NPH</i> | \$309 15ml pen | OTC | vial, pen | \$15 vial, pen | need PA          | \$0 vial, pen | vial, pen | vial |
| Novolin N | <i>NPH</i> | \$29 Walmart   | OTC | \$0       | \$15 vial      | \$5-10 vial, pen | \$0 vial, pen | vial      | vial |

### Insulin (Long-Acting)

|                          |                 |                               |       |                  |                       |               |                          |                     |                      |
|--------------------------|-----------------|-------------------------------|-------|------------------|-----------------------|---------------|--------------------------|---------------------|----------------------|
| Lantus, Basaglar, Toujeo | <i>glargine</i> | \$240 10ml,<br>\$371 15ml pen | Brand | Lantus vial, pen | \$15 Lantus vial, pen | \$5-10 Lantus | \$0 Lantus pen, Basaglar | Basaglar only (pen) | Basaglar, Toujeo pen |
| Levemir                  | <i>detemir</i>  | \$189 10ml                    | Brand | need PA          | vial, pen             | need PA       | \$0*                     | need PA             | need PA              |

### Insulin (Ultra Long-Acting)

|         |                 |  |       |         |               |         |         |         |         |
|---------|-----------------|--|-------|---------|---------------|---------|---------|---------|---------|
| Tresiba | <i>degludec</i> |  | Brand | need PA | non-preferred | need PA | need PA | need PA | need PA |
|---------|-----------------|--|-------|---------|---------------|---------|---------|---------|---------|

### Insulin (Pre-Mixed)

|                   |                    |                               |       |           |                |                  |               |           |      |
|-------------------|--------------------|-------------------------------|-------|-----------|----------------|------------------|---------------|-----------|------|
| Humalog Mix 50/50 | <i>lispro mix</i>  | \$131 10ml,<br>\$841 15ml pen | Brand | vial, pen | \$15 vial, pen | need PA          | \$0 vial, pen | vial, pen | vial |
| Humalog Mix 75/25 | <i>lispro mix</i>  | \$158 10ml,<br>\$423 15ml pen | Brand | vial, pen | \$15 vial, pen | need PA          | \$0 vial, pen | vial, pen | vial |
| Humulin 70/30     | <i>NPH/reg mix</i> | \$90 10ml,<br>\$385 15ml pen  | OTC   | vial, pen | \$15 vial, pen | need PA          | \$0 vial, pen | vial, pen | vial |
| Novolin 70/30     | <i>NPH/reg mix</i> | \$25 Walmart                  | OTC   | \$0       | \$15 vial      | \$5-10 vial, pen | \$0 vial, pen | vial      | vial |
| Novolog 70/30     | <i>aspart mix</i>  | \$375 15 ml pen               | Brand | vial, pen | \$5 pen        | \$5-10           | \$0 vial, pen | vial, pen | vial |

### Glucometers

| BRAND  | Generic | Costco \$ (30 pills) | Generic Brand | Aloha Care | CVS State employees | HMSA                      | HMSA Quest                            | Ohana               | United Healthcare           |
|--|---------|----------------------|---------------|------------|---------------------|---------------------------|---------------------------------------|---------------------|-----------------------------|
| Accu-Chek Aviva Plus, Accu-Chek Compact Plus |         | free meter*          | Brand         | need PA    | need PA             | not covered               | need PA                               | footnote            | need PA                     |
| Bayer Breeze 2/ Bayer Contour                |         | free meter*          | Brand         | need PA    | need PA             | not covered               | need PA                               | need PA             | need PA                     |
| Freestyle Lite/ Freestyle Freedom Lite       |         | free meter*          | Brand         | need PA    | need PA             | Freestyle, Freestyle Lite | Freestyle Freedom Lite (kit & strips) | footnote            | need PA                     |
| One touch (Ultra 2, Ultra mini, or Verio)    |         | free meter*          | Brand         | Ultra 2    | Ultra, Verio        | Surestep, Fast Take       | need PA                               | Ultra 2, Ultra Mini | 1 strip/day (no insulin). 6 |

Ohana - glucometer. Website and customer service both say accu-chek (AvivaPlus, Compact, Nano 100 stp/30d) and freestyle (Lite, Freedom Lite) covered, but pharmacists tell us onetouch glucometer/lancets covered (verio, ultra2, ultramini) although says need PA.

\*\*\*CVS State employees: Accu-Chek or One Touch glucometers- call 1-800-588-4456.

# EAR

## Ear antibiotics

| BRAND                    | Generic   | Costco \$ (30 pills)   | Generic Brand  | Aloha Care | CVS State employees | HMSA          | HMSA Quest | Ohana               | United Healthcare  |
|--------------------------|---|------------------------|----------------|------------|---------------------|---------------|------------|---------------------|--------------------|
| Cipro HC Otic            | <i>ciprofloxacin/hydrocortisone</i>                     | \$104 (10ml) Epocrates | Brand          | need PA    | \$25                | non-preferred | need PA    | need PA             | need PA            |
| Ciprodex                 | <i>ciprofloxacin/dexamethasone</i>                      | \$163                  | Brand          | need PA    | \$25                | non-preferred | \$0        | must fail ofloxacin | diagnosis required |
| Coly-Mycin S Otic        | <i>neomycin/hydrocortisone</i>                          | \$85                   | Brand          | need PA    | \$50                | non-preferred | need PA    | need PA             | need PA            |
| Cortisporin Otic         | <i>neomycin/polymyxin B/hydrocortisone (susp. soln)</i> | \$18                   | Generic        | \$0        | \$5                 | \$5-10        | \$0        | \$0                 | \$0                |
| Cortisporin TC Otic      | <i>neomycin/colistin/hydrocortisone</i>                 | \$78                   | Brand          | need PA    | \$50                | non-preferred | need PA    | need PA             | need PA            |
| Domeboro Otic, Star-Otic | <i>acetic acid/ aluminum acetate</i>                    | \$ not avail           | Generic        | \$0        | \$5                 | \$5-10        | need PA    | need PA             | \$0                |
| Floxin Otic              | <b><i>Ofloxacin, otic</i></b>                           | <b>\$27</b>            | <b>Generic</b> | <b>\$0</b> | <b>\$5</b>          | <b>\$5-10</b> | <b>\$0</b> | <b>\$0</b>          | <b>\$0</b>         |
| Vosol HC Otic            | <i>acetic acid/ hydrocortisone</i>                      | \$95 Walmart           | Generic        | need PA    | \$5                 | not covered   | need PA    | need PA             | \$0                |
| Vosol Otic               | <b><i>acetic acid</i></b>                               | <b>\$36</b>            | <b>Generic</b> | <b>\$0</b> | <b>\$5</b>          | <b>\$5-10</b> | <b>\$0</b> | <b>\$0</b>          | <b>\$0</b>         |

## Others

| BRAND      | Generic   | Costco \$ (30 pills) | Generic Brand | Aloha Care     | CVS State employees | HMSA        | HMSA Quest | Ohana   | United Healthcare |
|------------|---|----------------------|---------------|----------------|---------------------|-------------|------------|---------|-------------------|
| Americane  | <i>benzethonium chloride/glycerine / benzocaine</i> | \$ not available     | Brand         | need PA        | need PA             | not covered | need PA    | need PA | need PA           |
| Benzocaine | <i>benzocaine</i>                                   | \$ not available     | OTC           | need PA        | need PA             | not covered | need PA    | need PA | need PA           |
| Cerumenex  | <i>triethanolamine</i>                              | \$ not available     | Brand         | need PA        | need PA             | not covered | need PA    | need PA | need PA           |
| Debrox     | <i>carbamide peroxide 6.5%</i>                      | \$6                  | OTC           | carbamide 6.5% | need PA             | not covered | need PA    | \$0     | \$0               |
| Ear-Dry    | <i>boric acid/ isopropyl alcohol</i>                | \$ not available     | OTC           | need PA        | need PA             | not covered | need PA    | need PA | need PA           |
| Swim-Ear   | <i>glycerin / isopropyl alcohol</i>                 | \$ not available     | OTC           | need PA        | need PA             | not covered | need PA    | need PA | need PA           |

Highlighted - covered by all 6 plans

Ohana: - Debrox - plan listed as "carbamide ear drops otic solution 6.5%"

## HEARTBURN/ GERD

| BRAND   | Generic           | Costco \$<br>(30 pills)            | Generic<br>Brand | Aloha Care | CVS State<br>employees | HMSA   | HMSA<br>Quest | Ohana   | United<br>Healthcare        |
|---------|-------------------|------------------------------------|------------------|------------|------------------------|--------|---------------|---------|-----------------------------|
| Tagamet | <i>cimetidine</i> | \$23 (180tab)<br>(Walmart<br>\$10) | OTC              | \$0        | \$5                    | \$5-10 | \$0           | \$0     | \$0                         |
| Pepcid  | <i>famotidine</i> | \$16<br>walmart \$4                | OTC              | \$0        | \$5                    | \$5-10 | \$0           | \$0     | Pepcid AC<br>OTC<br>covered |
| Axid    | <i>nizatidine</i> | \$46 (60<br>tabs)                  | Generic          | \$0        | \$5                    | \$5-10 | \$0           | need PA | need PA                     |
| Zantac  | <i>ranitidine</i> | \$12<br>walmart \$4                | OTC              | \$0        | \$5                    | \$5-10 | \$0           | \$0     | \$0 150mg                   |

### Proton-pump Inhibitors (PPI)

| BRAND    | Generic             | Costco \$<br>(30 pills) | Generic<br>Brand | Aloha Care                     | CVS State<br>employees | HMSA                                       | HMSA<br>Quest                  | Ohana    | United<br>Healthcare |
|----------|---------------------|-------------------------|------------------|--------------------------------|------------------------|--|--------------------------------|----------|----------------------|
| Nexium   | <i>esomeprazole</i> | \$256                   | Generic          | Nexium<br>24HR 20mg<br>capsule | \$81                   | \$5-10                                     | Nexium<br>24HR 20mg<br>capsule | OTC only | need PA              |
| Prevacid | <i>lansoprazole</i> | \$21                    | Generic          | \$0 15mg<br>capsule            | \$5                    | \$5-10                                     | \$0                            | \$0      | \$0                  |
| Prilosec | <i>omeprazole</i>   | \$11                    | OTC              | \$0                            | \$5                    | \$5-10                                     | \$0                            | \$0      | \$0 caps             |
| Protonix | <i>pantoprazole</i> | \$14                    | Generic          | need PA                        | \$5                    | \$5-10                                     | \$0                            | \$0      | \$0                  |
| Aciphex  | <i>rabeprazole</i>  | \$55<br>Walmart         | Brand            | \$0                            | need PA                | non-<br>preferred fail<br>2 generic<br>PPI | need PA                        | need PA  | need PA              |

\*United Healthcare: Prevacid -- must fail 30 day omeprazole 40mg AND pantoprazole 40mg within prior 180 days.

Highlighted - covered by all 6 plans

## HTN - Ace Inhibitors

| BRAND             | Generic           | Costco \$<br>(30 pills) | Generic Brand | Aloha Care | CVS State employees | HMSA   | HMSA Quest | Ohana | United Healthcare |
|-------------------|-------------------|-------------------------|---------------|------------|---------------------|--------|------------|-------|-------------------|
| Lotensin          | <i>benazepril</i> | \$15<br>walmart \$4     | Generic       | \$0        | \$5                 | \$5-10 | \$0        | \$0   | \$0               |
| Vasotec           | <i>enalapril</i>  | \$10<br>walmart \$4     | Generic       | \$0        | \$5                 | \$5-10 | \$0        | \$0   | \$0               |
| Monopril          | <i>fosinopril</i> | \$11 Walmart            | Generic       | \$0        | \$5                 | \$5-10 | \$0        | \$0   | \$0               |
| Prinivil, Zestril | <i>lisinopril</i> | \$7<br>walmart \$4      | Generic       | \$0        | \$5                 | \$5-10 | \$0        | \$0   | \$0               |
| Accupril          | <i>quinapril</i>  | \$16                    | Generic       | \$0        | \$5                 | \$5-10 | \$0        | \$0   | \$0               |
| Altace            | <i>ramipril</i>   | \$11                    | Generic       | \$0        | \$5                 | \$5-10 | \$0        | \$0   | \$0               |

### ACE inhibitors with HCT

|              |                       |                     |         |     |     |        |     |         |     |
|--------------|-----------------------|---------------------|---------|-----|-----|--------|-----|---------|-----|
| Lotensin HCT | <i>benazepril/HCT</i> | \$12<br>walmart \$4 | Generic | \$0 | \$5 | \$5-10 | \$0 | \$0     | \$0 |
| Vaseretic    | <i>enalapril/HCT</i>  | \$21<br>walmart \$4 | Generic | \$0 | \$5 | \$5-10 | \$0 | \$0     | \$0 |
| Monopril HCT | <i>fosinopril/HCT</i> | \$38                | Generic | \$0 | \$5 | \$5-10 | \$0 | need PA | \$0 |
| Zestoretic   | <i>lisinopril/HCT</i> | \$6<br>walmart \$4  | Generic | \$0 | \$5 | \$5-10 | \$0 | \$0     | \$0 |
| Accuretic    | <i>quinapril/HCT</i>  | \$21                | Generic | \$0 | \$5 | \$5-10 | \$0 | need PA | \$0 |

## HTN - ARBs

| BRAND         | Generic                     | Costco \$<br>(30 pills) | Generic Brand  | Aloha Care | CVS State employees | HMSA          | HMSA Quest | Ohana         | United Healthcare |
|---------------|-----------------------------|-------------------------|----------------|------------|---------------------|---------------|------------|---------------|-------------------|
| Atacand       | <i>candesartan</i>          | \$97                    | Generic        | \$0        | \$5                 | \$5-10        | need PA    | need PA       | need PA           |
| Avapro        | <i>irbesartan</i>           | \$10                    | Generic        | \$0        | \$5                 | \$5-10        | \$0        | \$0           | need PA           |
| <b>Cozaar</b> | <b><i>losartan</i></b>      | <b>\$10</b>             | <b>Generic</b> | <b>\$0</b> | <b>\$5</b>          | <b>\$5-10</b> | <b>\$0</b> | <b>\$0</b>    | <b>\$0</b>        |
| Benicar       | <i>olmesartan medoxomil</i> | \$137                   | Generic        | \$0        | \$25                | \$5-10        | need PA    | Step Therapy* | need PA           |
| Micardis      | <i>telmisartan</i>          | \$32                    | Generic        | \$0        | \$5                 | \$5-10        | need PA    | need PA       | need PA           |
| Diovan        | <i>valsartan</i>            | \$137                   | Generic        | \$0        | \$5                 | \$5-10        | \$0        | \$0           | need PA           |

### ARBs with HCT

|               |   |             |                |            |            |               |            |            |            |
|---------------|---|-------------|----------------|------------|------------|---------------|------------|------------|------------|
| Atacand HCT   | <i>candesartan/HCT</i>                          | \$128       | Generic        | \$0        | \$5        | non-preferred | need PA    | need PA    | need PA    |
| Avalide       | <i>irbesartan/HCT</i>                           | \$167       | Generic        | \$0        | \$5        | \$5-10        | \$0        | need PA    | need PA    |
| <b>Hyzaar</b> | <b><i>losartan/HCT</i></b>                      | <b>\$13</b> | <b>Generic</b> | <b>\$0</b> | <b>\$5</b> | <b>\$5-10</b> | <b>\$0</b> | <b>\$0</b> | <b>\$0</b> |
| Benicar HCT   | <i>olmesartan medoxomil-hydrochlorothiazide</i> | \$180       | Generic        | \$0        | \$25       | \$5-10        | need PA    | need PA    | need PA    |
| Micardis HCT  | <i>telmisartan/HCT</i>                          | \$106       | Generic        | \$0        | \$5        | \$5-10        | need PA    | need PA    | need PA    |
| Diovan HCT    | <i>valsartan/HCT</i>                            | \$15        | Generic        | \$0        | \$5        | \$5-10        | \$0        | \$0        | need PA    |

Highlighted - covered by all 6 plans

Ohana; Benicar - Must fail preferred ARB -losartan, irbesartan, valsartan

## HTN - beta blockers

### Cardioselective

| BRAND         | Generic                 | Costco \$<br>(30 pills) | Generic<br>Brand | Aloha Care | CVS State<br>employees | HMSA           | HMSA<br>Quest | Ohana   | United<br>Healthcare |
|---------------|-------------------------|-------------------------|------------------|------------|------------------------|----------------|---------------|---------|----------------------|
| Tenormin      | atenolol                | \$6<br>walmart \$4      | Generic          | \$0        | \$5                    | \$5-10         | \$0           | \$0     | \$0                  |
| Zebeta        | bisoprolol              | \$12                    | Generic          | \$0        | not<br>covered         | \$5-10         | \$0           | \$0     | \$0                  |
| Lopressor     | metoprolol tartrate     | \$12<br>walmart \$4     | Generic          | \$0        | \$5                    | \$5-10         | \$0           | \$0     | 20mg, 50mg,<br>100mg |
| Toprol XL     | metoprolol succinate ER | \$19                    | Generic          | \$0        | \$5                    | \$5-10         | \$0           | \$0     | \$0                  |
| Lopressor HCT | metoprolol HCT          | \$37                    | Generic          | \$0        | covered?*              | \$5-10         | \$0           | need PA | need PA              |
| Bystolic      | nebivolol               | \$97                    | Brand            | need PA    | \$25                   | not<br>covered | need PA       | need PA | need PA              |

### Non-cardioselective

|                |                          |                        |         |         |           |        |         |         |                   |
|----------------|--------------------------|------------------------|---------|---------|-----------|--------|---------|---------|-------------------|
| Ziac           | bisoprolol/HCT           | \$12<br>walmart \$10   | Generic | \$0     | covered?* | \$5-10 | \$0     | \$0     | \$0               |
| Coreg (bid)    | carvedilol               | \$6<br>walmart \$4     | Generic | \$0     | \$5       | \$5-10 | \$0     | \$0     | \$0               |
| Coreg CR (qd)  | carvedilol ER            | \$52                   | Brand   | need PA | \$25      | \$25   | need PA | need PA | need PA           |
| Trandate       | labetalol                | \$26 (200mg<br>30 tab) | Generic | \$0     | covered?* | \$5-10 | \$0     | \$0     | \$0               |
| Inderal (IR)   | propranolol              | \$6<br>walmart \$4     | Generic | \$0     | \$5       | \$5-10 | \$0     | \$0     | IR only           |
| Inderal LA     | propranolol ER           | \$73                   | Generic | \$0     | \$5       | \$5-10 | \$0     | \$0     | need<br>diagnosis |
| Inderide (HCT) | propranolol/ HCT         | \$31                   | Generic | \$0     | covered?* | \$5-10 | need PA | need PA | \$0               |
| Highlighted -  | - covered by all 6 plans |                        |         |         |           |        |         |         |                   |

## HTN - calcium channel blockers

### Dihydropyridines

| BRAND                   | Generic            | Costco \$<br>(30 pills) | Generic<br>Brand | Aloha Care | CVS State<br>employees | HMSA   | HMSA<br>Quest | Ohana   | United<br>Healthcare |
|-------------------------|--------------------|-------------------------|------------------|------------|------------------------|--------|---------------|---------|----------------------|
| Norvasc                 | amlodipine         | \$8                     | Generic          | \$0        | \$5                    | \$5-10 | \$0           | \$0     | \$0                  |
| Plendil                 | felodipine ER      | \$19                    | Generic          | \$0        | covered?*              | \$5-10 | \$0           | \$0     | \$0                  |
| Dynacirc                | isradipine BID     | \$65                    | Generic          | \$0        | covered?*              | \$5-10 | need PA       | need PA | need PA              |
| Procardia XL/ Adalat CC | nifedipine ER (QD) | \$27                    | Generic          | \$0        | \$5                    | \$5-10 | \$0           | \$0     | \$0                  |

### Non-dihydropyridines

|             |              |      |         |     |     |        |     |     |     |
|-------------|--------------|------|---------|-----|-----|--------|-----|-----|-----|
| Cardizem CD | diltiazem ER | \$85 | Generic | \$0 | \$5 | \$5-10 | \$0 | \$0 | \$0 |
| Calan SR    | verapamil SR | \$13 | Generic | \$0 | \$5 | \$5-10 | \$0 | \$0 | \$0 |

### Chlorthalidone

|          |                |      |         |     |     |        |     |     |     |
|----------|----------------|------|---------|-----|-----|--------|-----|-----|-----|
| Hygroton | chlorthalidone | \$30 | Generic | \$0 | \$5 | \$5-10 | \$0 | \$0 | \$0 |
|----------|----------------|------|---------|-----|-----|--------|-----|-----|-----|

# INSOMNIA

## Benzodiazepine

| BRAND    | Generic                 | Costco \$ (30 pills) | Generic Brand | Aloha Care | CVS State employees | HMSA   | HMSA Quest     | Ohana         | United Healthcare |
|----------|-------------------------|----------------------|---------------|------------|---------------------|--------|----------------|---------------|-------------------|
| Xanax    | <i>alprazolam</i>       | \$12                 | Generic       | age ≥ 18   | \$5                 | \$5-10 | \$0            | \$0           | IR only           |
| Xanax XR | <i>alprazolam ER</i>    | \$29                 | Generic       | age ≥ 18   | \$5                 | \$5-10 | \$0            | \$0           | need PA           |
| Librium  | <i>chlordiazepoxide</i> | \$12                 | Generic       | age ≥ 6    | \$5                 | \$5-10 | \$0            | \$0           | \$0               |
| Klonopin | <i>clonazepam</i>       | \$9                  | Generic       | \$0        | \$5                 | \$5-10 | \$0            | \$0           | \$0               |
| Valium   | <i>diazepam</i>         | \$12                 | Generic       | age ≥ 1    | \$5                 | \$5-10 | \$0            | \$0           | \$0               |
| Prozom   | <i>estazolam</i>        | \$18                 | Generic       | \$0        | \$5                 | \$5-10 | need PA        | \$0           | need PA           |
| Dalmane  | <i>flurazepam</i>       | \$18                 | Generic       | \$0        | \$5                 | \$5-10 | need PA        | need PA       | \$0               |
| Ativan   | <i>lorazepam</i>        | \$11                 | Generic       | age ≥ 12   | \$5                 | \$5-10 | \$0            | \$0           | \$0               |
| Restoril | <i>temazepam</i>        | \$11                 | Generic       | \$0        | \$5                 | \$5-10 | 15 per 30 days | \$0           | \$0               |
| Halcion  | <i>triazolam</i>        | \$14                 | Generic       | \$0        | \$5                 | \$5-10 | need PA        | \$0 age > 18y | \$0               |

## Benzodiazepine Receptor Agonist (non-benzo benzodiazepine)

| BRAND     | Generic            | Costco \$ (30 pills) | Generic Brand | Aloha Care | CVS State employees | HMSA          | HMSA Quest    | Ohana                | United Healthcare |
|-----------|--------------------|----------------------|---------------|------------|---------------------|---------------|---------------|----------------------|-------------------|
| Lunesta   | <i>eszopiclone</i> | \$34 w/ coupon       | Generic       | \$0        | \$5                 | non-preferred | need PA       | need PA              | need PA           |
| Sonata    | <i>zaleplon</i>    | \$22                 | Generic       | \$0        | \$5                 | \$5-10        | need PA       | need PA              | \$0               |
| Ambien    | <i>zolpidem</i>    | \$12                 | Generic       | \$0        | \$5                 | \$5-10        | 30 tabs/month | age > 18, 31 pills/m | \$0               |
| Ambien CR | <i>zolpidem ER</i> | \$85                 | Generic       | \$0        | \$5                 | non-preferred | 30 tabs/month | need PA              | need PA           |

Note: -- Benadryl, Unisom (doxylamine), etc., are over the counter and not included here.

## Others

| BRAND   | Generic             | Costco \$ (30 pills) | Generic Brand | Aloha Care   | CVS (State employees) | HMSA        | HMSA Quest | Ohana                | United Healthcare |
|---------|---------------------|----------------------|---------------|--------------|-----------------------|-------------|------------|----------------------|-------------------|
| Desyrel | <i>trazodone</i>    | \$6<br>walmart \$4   | Generic       | age ≥ 18     | \$5                   | \$5-10      | \$0        | \$0                  | 50,100,150 mg     |
| Oleptro | <i>trazodone ER</i> | \$15                 | Brand         | step therapy | \$50                  | not covered | need PA    | must fail 2 generics | need PA           |
| Rozerem | <i>ramelteon</i>    | \$290                | Brand         | need PA      | \$50                  | not covered | need PA    | need PA              | need PA           |

\*Conflicting information on CVS website.

# MIGRAINE HEADACHES

## Triptan

| BRAND             | Generic      | Costco \$ (6 tab) | Generic Brand | Aloha Care | CVS State employees  | HMSA                             | HMSA Quest                 | Ohana            | United Healthcare         |
|-------------------|--------------|-------------------|---------------|------------|----------------------|----------------------------------|----------------------------|------------------|---------------------------|
| Axert             | almotriptan  | \$49 (12 tab)     | Generic       | \$0        | need PA              | \$5-10<br>12tab/30d              | need PA                    | need PA          | need PA                   |
| Relpax            | eletriptan   | \$234 (6tab)      | Brand         | need PA    | \$25                 | \$20-\$25<br>12tab/30d           | need PA                    | need PA          | need PA                   |
| Frova             | frovatriptan | \$438 (9tab)      | Generic       | \$0        | not covered          | non-preferred<br>9tab/30d        | need PA                    | need PA          | need PA                   |
| Amerge            | naratriptan  | \$83 (9tab)       | Generic       | \$0        | \$5                  | \$5-10<br>9tab/30d               | 12 tab/30d<br>fail imitrex | Step<br>Therapy* | trial sumatriptan<br>50mg |
| Maxalt            | rizatriptan  | \$119 (3tab)      | Generic       | \$0        | \$5                  | \$5-10<br>12tab/30d              | 18 tab/30d<br>fail imitrex | \$0              | \$0                       |
| Imitrex Oral      | sumatriptan  | \$20 (9tab)       | Generic       | \$0        | \$5 (9 per<br>30d)   | \$5-10<br>9tab/30d               | 12 tab/30d                 | 9 tab/31d        | \$0 limit 9 per<br>23d    |
| Imitrex Nasal     | sumatriptan  | \$313             | Generic       | \$0        | \$5 (6 per<br>30d)   | non-preferred<br>12s<br>pray/30d | 24<br>spray/30d            | 12<br>spray/31d  | covered? 6 per<br>23d     |
| Imitrex Injection | sumatriptan  | \$264 (2 ml)      | Generic       | \$0        | \$5 (1.5<br>per 30d) | \$5-10<br>8inj/30d               | 6 inj/30d                  | 4 inj/31d        | \$0 4mg and 6mg           |
| Zomig             | zolmitriptan | \$235 (3tab)      | Brand         | \$0        | \$5                  | non-preferred<br>12tab/30d       | 12 tab/30d<br>fail imitrex | need PA          | need PA                   |
| Zomig Nasal       | zolmitriptan | \$ not avail      | Brand         | need PA    | \$25                 | non-preferred<br>12spray/ 30d    | need PA                    | need PA          | need PA                   |

Ohana: **Amerge** - must fail preferred sumatriptan, rizatriptan, or rizatriptan odt with 100 days

## Ergotamine

| BRAND    | Generic                    | Costco \$ (6 tab) | Generic Brand | Aloha Care | CVS State employees | HMSA          | HMSA Quest               | Ohana   | United Healthcare |
|----------|----------------------------|-------------------|---------------|------------|---------------------|---------------|--------------------------|---------|-------------------|
| Cafergot | caffeine/ ergotamine       | \$20              | Generic       | need PA    | \$5                 | \$5-10        | \$0                      | need PA | \$0               |
| Migranal | dihydroergotamine<br>nasal | \$2734 (8ml)      | Generic       | need PA    | \$25                | non-preferred | 8 units (1<br>kit)/month | need PA | \$0               |

## Acetaminophen/dichloralphenazone/isometheptene

|          |  |      |         |                   |         |             |         |         |         |
|----------|--|------|---------|-------------------|---------|-------------|---------|---------|---------|
| Duradrin | acetaminophen/dichloralphenazone/isometheptene | \$52 | Generic | Migragesic<br>IDA | need PA | not covered | need PA | need PA | need PA |
| Midrin   | acetaminophen/dichloralphenazone/isometheptene | \$52 | Generic | Migragesic<br>IDA | need PA | not covered | need PA | need PA | need PA |

Highlighted - covered by all 6 plans





## PSYCHOTIC (anti-psychotics)

### Atypical

| BRAND                 | Generic                                   | Costco \$ (30 pills) | Generic Brand  | Aloha Care | CVS State employees   | HMSA                 | HMSA Quest | Ohana                | United Healthcare |
|-----------------------|---|----------------------|----------------|------------|-----------------------|----------------------|------------|----------------------|-------------------|
| <b>Abilify</b>        | <b>aripiprazole</b>                       | <b>\$872</b>         | <b>Generic</b> | <b>\$0</b> | <b>\$5</b>            | <b>\$5-10</b>        | <b>\$0</b> | <b>\$0</b>           | <b>\$0 tab</b>    |
| Abilify Discmelt      | <i>aripiprazole orally disintegrating</i> | \$825 Epocrates      | Generic        | \$0        | covered \$15?*        | not covered          | \$0        | \$0                  | \$0               |
| Saphris (BID)         | <i>asenapine</i>                          | \$390                | Brand          | \$0        | covered \$30?*        | <b>non-preferred</b> | <b>\$0</b> | \$0 - require ICD10  | \$0               |
| <b>Clozaril (BID)</b> | <b>clozapine</b>                          | <b>\$33</b>          | <b>Generic</b> | <b>\$0</b> | <b>\$5</b>            | <b>\$5-10</b>        | <b>\$0</b> | <b>\$0</b>           | <b>\$0</b>        |
| FazaClo ODT           | <i>clozapine orally disintegrating</i>    | \$620                | Generic        | \$0        | covered \$5?*         | non-preferred        | \$0        | \$0                  | \$0               |
| Fanapt (BID)          | <i>lloperidone</i>                        | \$790                | Brand          | \$0        | \$30                  | non-preferred        | \$0        | \$0 - require ICD10  | \$0               |
| Latuda                | <i>lurasidone</i>                         | \$730                | Brand          | \$0        | \$25                  | non-preferred        | \$0        | \$0 - require ICD10  | \$0               |
| <b>Zyprexa</b>        | <b>olanzapine</b>                         | <b>\$17</b>          | <b>Generic</b> | <b>\$0</b> | <b>\$5</b>            | <b>\$5-10</b>        | <b>\$0</b> | <b>\$0</b>           | <b>\$0</b>        |
| Zyprexa Zydys (ODT)   | <i>olanzapine orally disintegrating</i>   | \$75                 | Generic        | \$0        | covered \$5?*         | \$5-10               | \$0        | \$0                  | \$0               |
| Symbyax               | <i>olanzapine/ fluoxetine</i>             | \$155                | Generic        | \$0        | covered \$5?*         | \$5-10               | \$0        | \$0                  | need PA           |
| <b>Invega</b>         | <b>paliperidone ER</b>                    | <b>\$755</b>         | <b>Generic</b> | <b>\$0</b> | <b>covered \$30?*</b> | <b>\$5-10</b>        | <b>\$0</b> | <b>\$0</b>           | <b>\$0</b>        |
| <b>Seroquel (BID)</b> | <b>quetiapine</b>                         | <b>\$11</b>          | <b>Generic</b> | <b>\$0</b> | <b>\$5</b>            | <b>\$5-10</b>        | <b>\$0</b> | <b>\$0</b>           | <b>\$0</b>        |
| <b>Seroquel XR</b>    | <b>quetiapine ER</b>                      | <b>\$1,130</b>       | <b>Generic</b> | <b>\$0</b> | <b>\$25</b>           | <b>\$5-10</b>        | <b>\$0</b> | <b>\$0</b>           | <b>\$0</b>        |
| <b>Risperdal</b>      | <b>risperidone</b>                        | <b>\$16</b>          | <b>Generic</b> | <b>\$0</b> | <b>\$5</b>            | <b>\$5-10</b>        | <b>\$0</b> | <b>\$0</b>           | <b>\$0</b>        |
| Risperdal M-tab       | <i>risperidone orally disintegrating</i>  | \$10                 | Generic        | \$0        | covered \$5?*         | \$5-10               | \$0        | \$0                  | need PA           |
| <b>Geodon (BID)</b>   | <b>ziprasidone</b>                        | <b>\$146</b>         | <b>Generic</b> | <b>\$0</b> | <b>\$5</b>            | <b>\$5-10</b>        | <b>\$0</b> | <b>\$0 (capsule)</b> | <b>\$0</b>        |

\*Conflicting information on CVS website.

Highlighted - covered by all 6 plans



## SMOKING CESSATION

| BRAND  | Generic                                       | Costco \$ (30 pills)             | Generic Brand  | Aloha Care                   | CVS State employees | HMSA            | HMSA Quest | Ohana   | United Healthcare |
|--|---|----------------------------------|----------------|------------------------------|---------------------|-----------------|------------|---------|-------------------|
| Zyban, Wellbutrin SR, Budeprion SR, Buproban | <b>bupropion HCL</b>                          | <b>\$21</b>                      | <b>Generic</b> | HCL (age ≥ 18), SR, XL       | <b>\$0-\$10</b>     | <b>\$5-10</b>   | age 18+    | \$0     | see footnote      |
| Chantix                                      | <i>varenicline tartrate</i>                   | \$244 start, \$125 continue pack | Brand          | start month continuing month | covered \$0?        | \$25*           | age 18+    | \$0     | \$0               |
| Nicoderm CQ                                  | <i>nicotine patches, nicotine transdermal</i> | \$16 Walmart                     | OTC            | 90/365 days                  | \$0                 | OTC not covered | age 18+    | \$0     | \$0 patches       |
| Nicorette Gum                                | <i>nicotine gum, debroxnicotine gum</i>       | \$55 Walmart                     | OTC            | 90/365 days                  | \$0                 | OTC not covered | age 18+    | \$0     | \$0               |
| Nicorette Lozenge, Commit                    | <i>nicotine lozenge</i>                       | \$31 Walmart                     | OTC            | 90/365 days                  | \$0                 | OTC not covered | need PA    | \$0     | \$0               |
| Nicotrol NS (nasal spray)                    | <i>nicotine nasal spray</i>                   | \$73 Epocrates                   | Brand          | need PA                      | \$30                | non-preferred   | need PA    | need PA | need PA           |
| Nicotrol Inhaler                             | <i>nicotine inhaled, cartridge</i>            | \$265                            | Brand          | need PA                      | \$30                | non-preferred   | need PA    | need PA | need PA           |

\*Conflicting information on CVS website.

**Highlighted drugs** - covered by all 6 plans

Aloha Care: **bupropion hcl** - PA required for 150mg if patient is on it for more than 90 days

HMSA: Under Health Care Reform, nicotine gum, lozenge, transdermal and Chantix are covered under non-grandfather plans

United Health Care: PA required if indication is smoking cessation. PA not required if indication is depression



# Retail Prescription Program Drug List



## Price Matters

- Our \$4 prescriptions have saved our customers over \$3 billion
- The program is available to everyone, no membership required



## New Men's Health Category

- More affordable options for men
- \$9 Finasteride for 30 tablets



## Convenience

- The Walmart App is the easiest way to transfer and refill your prescriptions
- Get text messages to keep track of your prescription (Text ENROLL to 45500)
- Walmart Pay saves you time at the checkout counter

**\$4, 30-day \$10, 90-day**

### Allergies & Cold and Flu

|                                 |              |       |
|---------------------------------|--------------|-------|
| Benzonatate 100mg cap. . . . .  | 14 . . . . . | 42    |
| Loratadine 10mg tab . . . . .   | 30 . . . . . | 90    |
| Promethazine DM syrup . . . . . | 120ml . . .  | 360ml |

### Antibiotic Treatments

|   |             |   |
|---|-------------|---|
| Amoxicillin 125mg/5ml susp (80ml bottle) <sup>†</sup> . . . . .   | 1 . . . . . | 3 |
| Amoxicillin 125mg/5ml susp (100ml bottle) <sup>†</sup> . . . . .  | 1 . . . . . | 3 |
| Amoxicillin 125mg/5ml susp (150ml bottle) <sup>†</sup> . . . . .  | 1 . . . . . | 3 |
| Amoxicillin 200mg/5ml susp (50ml bottle) <sup>†</sup> . . . . .   | 1 . . . . . | 3 |
| Amoxicillin 200mg/5ml susp* (75ml bottle) <sup>†</sup> . . . . .  | 1 . . . . . | 3 |
| Amoxicillin 200mg/5ml susp* (100ml bottle) <sup>†</sup> . . . . . | 1 . . . . . | 3 |
| Amoxicillin 250mg/5ml susp (80ml bottle) <sup>†</sup> . . . . .   | 1 . . . . . | 3 |
| Amoxicillin 250mg/5ml susp (100ml bottle) <sup>†</sup> . . . . .  | 1 . . . . . | 3 |

**\$9/30-day**

|  |              |    |
|--|--------------|----|
| Amoxicillin 250mg/5ml susp (150ml bottle) <sup>†</sup> . . . . .   | 1 . . . . .  | 3  |
| Amoxicillin 400mg/5ml susp (50ml bottle) <sup>†</sup> . . . . .    | 1 . . . . .  | 3  |
| Amoxicillin 400mg/5ml susp* (75ml bottle) <sup>†</sup> . . . . .   | 1 . . . . .  | 3  |
| Amoxicillin 400mg/5ml susp* (100ml bottle) <sup>†</sup> . . . . .  | 1 . . . . .  | 3  |
| Amoxicillin 250mg cap . . . . .                                    | 30 . . . . . | 90 |
| Amoxicillin 500mg cap . . . . .                                    | 30 . . . . . | 90 |
| Cephalexin 250mg cap . . . . .                                     | 28 . . . . . | 84 |
| Cephalexin 500mg cap . . . . .                                     | 30 . . . . . | 90 |
| Ciprofloxacin 250mg tab . . . . .                                  | 14 . . . . . | 42 |
| Ciprofloxacin 500mg tab*. . . . .                                  | 20 . . . . . | 60 |
| Penicillin VK 250mg tab. . . . .                                   | 28 . . . . . | 84 |
| Penicillin VK 125mg/5ml susp (100ml bottle) <sup>†</sup> . . . . . | 1 . . . . .  | 3  |
| SMZ-TMP 400mg-80mg tab . . . . .                                   | 28 . . . . . | 84 |
| SMZ-TMP DS 800mg-160mg tab . . . . .                               | 20 . . . . . | 60 |

**\$4, 30-day \$10, 90-day**

### Arthritis & Pain

|                                    |              |       |
|------------------------------------|--------------|-------|
| Allopurinol 100mg tab. . . . .     | 30 . . . . . | 90    |
| Allopurinol 300mg tab . . . . .    | 30 . . . . . | 90    |
| Baclofen 10mg tab* . . . . .       | 30 . . . . . | 90    |
| Cyclobenzaprine 5mg tab . . . . .  | 30 . . . . . | 90    |
| Cyclobenzaprine 10mg tab . . . . . | 30 . . . . . | 90    |
| Dexamethasone 0.5mg tab . . . . .  | 30 . . . . . | 90    |
| Dexamethasone 0.75mg tab . . . . . | 12 . . . . . | 36    |
| Dexamethasone 4mg tab . . . . .    | 6 . . . . .  | 18    |
| Diclofenac DR 75mg tab* . . . . .  | 60 . . . . . | 180   |
| Ibuprofen 100mg/5ml susp*. . . . . | 120ml . . .  | 360ml |
| Ibuprofen 400mg tab . . . . .      | 90 . . . . . | 270   |
| Ibuprofen 600mg tab* . . . . .     | 60 . . . . . | 180   |
| Ibuprofen 800mg tab . . . . .      | 30 . . . . . | 90    |
| Indomethacin 25mg cap* . . . . .   | 60 . . . . . | 180   |
| Meloxicam 7.5mg tab . . . . .      | 30 . . . . . | 90    |
| Meloxicam 15mg tab . . . . .       | 30 . . . . . | 90    |
| Naproxen 375mg tab*. . . . .       | 60 . . . . . | 180   |
| Naproxen 500mg tab* . . . . .      | 60 . . . . . | 180   |

### Asthma

|   |              |       |
|---|--------------|-------|
| Albuterol 2mg tab* . . . . .  | 90 . . . . . | 270   |
| Albuterol 4mg tab* . . . . .  | 60 . . . . . | 180   |
| Albuterol 2mg/5ml syrup . . . . .   | 120ml . . .  | 360ml |
| Ipratropium 0.02% nebulizer soln* (25x2.5ml vials) <sup>†</sup> 1 . . . . . | 1 . . . . .  | 3     |

### Cholesterol

|                                |              |    |
|--------------------------------|--------------|----|
| Lovastatin 10mg tab. . . . .   | 30 . . . . . | 90 |
| Lovastatin 20mg tab* . . . . . | 30 . . . . . | 90 |

Prescription Program includes up to a 30-day supply for \$4 and a 90-day supply for \$10 of some covered generic drugs at commonly prescribed dosages. Higher dosages cost more. Prices for some drugs covered by the Prescription Program may be higher in some states, including but not necessarily limited to, CA, HI, MN, MT, PA, TN, WI, and WY. Prices may also vary in some states. For important information regarding Walmart's Patient accessibility program, including the availability of language interpretive services, please see the last page.

<sup>†</sup> Prepackaged drugs are covered only in unit sizes specified on Drug List (back page) other restrictions may apply. See Program Details or your Walmart Pharmacist for details.

\$4, 30-day \$10, 90-day

## Diabetes

|   |    |     |
|---|----|-----|
| Glimepiride 1mg tab . . . . .           | 30 | 90  |
| Glimepiride 2mg tab . . . . .           | 30 | 90  |
| Glimepiride 4mg tab . . . . .           | 30 | 90  |
| Glipizide 5mg tab . . . . .             | 30 | 90  |
| Glipizide 10mg tab* . . . . .           | 60 | 180 |
| Glyburide 2.5mg tab . . . . .           | 30 | 90  |
| Glyburide 5mg tab (blue) . . . . .      | 30 | 90  |
| Glyburide 5mg tab (green) . . . . .     | 30 | 90  |
| Glyburide, micronized 3mg tab . . . . . | 30 | 90  |
| Glyburide, micronized 6mg tab . . . . . | 30 | 90  |
| Metformin 500mg tab . . . . .           | 60 | 180 |
| Metformin 850mg tab . . . . .           | 60 | 180 |
| Metformin 1000mg tab* . . . . .         | 60 | 180 |
| Metformin 500mg ER tab* . . . . .       | 60 | 180 |

## Fungal Infections

|  |    |    |
|--|----|----|
| Fluconazole 150mg tab . . . . .        | 1  | 3  |
| Nystatin cream* (15gm tube)†. . . . .  | 1  | 3  |
| Nystatin cream* (30gm tube)† . . . . . | 1  | 3  |
| Terbinafine 250mg tab* . . . . .       | 30 | 90 |

## Gastrointestinal Health

|                                     |       |       |
|-------------------------------------|-------|-------|
| Famotidine 20mg tab . . . . .       | 60    | 180   |
| Lactulose syrup*. . . . .           | 236ml | 708ml |
| Metoclopramide 10mg tab* . . . . .  | 60    | 180   |
| Metoclopramide syrup . . . . .      | 60ml  | 180ml |
| Promethazine 25mg tab* . . . . .    | 12    | 36    |
| Promethazine plain syrup* . . . . . | 180ml | 540ml |
| Ranitidine 150mg tab*. . . . .      | 60    | 180   |
| Ranitidine 300mg tab* . . . . .     | 30    | 90    |

## Glaucoma & Eye Care

|   |   |    |
|---|---|----|
| Erythromycin op. ointment (3.5gm tube)†*. . . . . | 1 | 3  |
| Gentak 0.3% op. soln . . . . .                    | 5 | 15 |
| Gentamicin 0.3% op. soln (5ml bottle)† . . . . .  | 1 | 3  |
| Levobunolol 0.5% op soln (5ml bottle)†* . . . . . | 1 | 3  |

\$9/30-day

|   |   |   |
|---|---|---|
| Neomycin/Polymyxin/Dexamethasone<br>0.1% op. ointment (3.5gm tube)† . . . . . | 1 | 3 |
| Neomycin/Polymyxin/Dexamethasone<br>0.1% op. susp (5ml bottle)† . . . . .     | 1 | 3 |

\$4, 30-day \$10, 90-day

|   |   |   |
|---|---|---|
| Polymyxin Sulfate/TMP op. soln* (10ml bottle)†. . . . . | 1 | 3 |
| Timolol Maleate 0.25% op. soln (5ml bottle)† . . . . .  | 1 | 3 |
| Timolol Maleate 0.5% op soln (5ml bottle)† . . . . .    | 1 | 3 |
| Tobramycin 0.3% op. soln (5ml bottle)† . . . . .        | 1 | 3 |

## Heart Health & Blood Pressure

|   |    |     |
|---|----|-----|
| Atenolol 25mg tab . . . . .                   | 30 | 90  |
| Atenolol 50mg tab . . . . .                   | 30 | 90  |
| Atenolol 100mg tab* . . . . .                 | 30 | 90  |
| Benazepril 5mg tab . . . . .                  | 30 | 90  |
| Benazepril 10mg tab. . . . .                  | 30 | 90  |
| Benazepril 20mg tab . . . . .                 | 30 | 90  |
| Benazepril 40mg tab . . . . .                 | 30 | 90  |
| Bisoprolol-HCTZ 2.5mg-6.25mg tab . . . . .    | 30 | 90  |
| Bisoprolol-HCTZ 5mg-6.25mg tab . . . . .      | 30 | 90  |
| Bisoprolol-HCTZ 10mg-6.25mg tab . . . . .     | 30 | 90  |
| Carvedilol 3.125mg tab . . . . .              | 60 | 180 |
| Carvedilol 6.25mg tab. . . . .                | 60 | 180 |
| Carvedilol 12.5mg tab . . . . .               | 60 | 180 |
| Carvedilol 25mg tab. . . . .                  | 60 | 180 |
| Clonidine 0.1mg tab . . . . .                 | 30 | 90  |
| Clonidine 0.2mg tab. . . . .                  | 30 | 90  |
| Enalapril-HCTZ 5mg-12.5mg tab* . . . . .      | 30 | 90  |
| Furosemide 20mg tab. . . . .                  | 30 | 90  |
| Furosemide 40mg tab. . . . .                  | 30 | 90  |
| Furosemide 80mg tab. . . . .                  | 30 | 90  |
| Hydralazine 10mg tab . . . . .                | 30 | 90  |
| Hydralazine 25mg tab. . . . .                 | 30 | 90  |
| Hydrochlorothiazide(HCTZ)12.5mg cap. . . . .  | 30 | 90  |
| Hydrochlorothiazide (HCTZ) 25mg tab . . . . . | 30 | 90  |
| Hydrochlorothiazide (HCTZ) 50mg tab . . . . . | 30 | 90  |
| Indapamide 1.25mg tab . . . . .               | 30 | 90  |
| Indapamide 2.5mg tab. . . . .                 | 30 | 90  |
| Isosorbide Mononitrate 30mg ER tab* . . . . . | 30 | 90  |
| Isosorbide Mononitrate 60mg ER tab* . . . . . | 30 | 90  |
| Lisinopril-HCTZ 10mg-12.5mg tab. . . . .      | 30 | 90  |
| Lisinopril-HCTZ 20mg-12.5mg tab* . . . . .    | 30 | 90  |
| Lisinopril-HCTZ 20mg-25mg tab*. . . . .       | 30 | 90  |
| Lisinopril 2.5mg tab . . . . .                | 30 | 90  |
| Lisinopril 5mg tab . . . . .                  | 30 | 90  |

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Revised 12/15/2017



|  | \$4, 30-day | \$10, 90-day |
|--|-------------|--------------|
| Lisinopril 10mg tab . . . . .              | .30         | .90          |
| Lisinopril 20mg tab . . . . .              | .30         | .90          |
| Methyldopa 250mg tab* . . . . .            | .60         | .180         |
| Metoprolol Tartrate 25mg tab. . . . .      | .60         | .180         |
| Metoprolol Tartrate 50mg tab . . . . .     | .60         | .180         |
| Metoprolol Tartrate 100mg tab* . . . . .   | .60         | .180         |
| Sotalol HCL 80mg tab* . . . . .            | .30         | .90          |
| Spirolonactone 25mg tab* . . . . .         | .30         | .90          |
| Triamterene-HCTZ 75mg-50mg tab . . . . .   | .30         | .90          |
| Triamterene-HCTZ 37.5mg-25mg tab . . . . . | .30         | .90          |
| Verapamil 80mg tab. . . . .                | .30         | .90          |
| Verapamil 120mg tab . . . . .              | .30         | .90          |
| Warfarin 1mg tab . . . . .                 | .30         | .90          |
| Warfarin 2mg tab . . . . .                 | .30         | .90          |
| Warfarin 2.5mg tab . . . . .               | .30         | .90          |
| Warfarin 3mg tab . . . . .                 | .30         | .90          |
| Warfarin 4mg tab . . . . .                 | .30         | .90          |
| Warfarin 5mg tab*. . . . .                 | .30         | .90          |
| Warfarin 6mg tab . . . . .                 | .30         | .90          |
| Warfarin 7.5mg tab . . . . .               | .30         | .90          |
| Warfarin 10mg tab. . . . .                 | .30         | .90          |

### Men's Health

|                           | \$9/30-day |
|---------------------------|------------|
| Finasteride 5mg . . . . . | 30         |

### Mental Health

|                                   |     |      |
|-----------------------------------|-----|------|
| Amitriptyline 10mg tab . . . . .  | .30 | .90  |
| Amitriptyline 25mg tab* . . . . . | .30 | .90  |
| Amitriptyline 50mg tab* . . . . . | .30 | .90  |
| Amitriptyline 75mg tab*. . . . .  | .30 | .90  |
| Amitriptyline 100mg tab*. . . . . | .30 | .90  |
| Benzotropine 2mg tab . . . . .    | .30 | .90  |
| Buspirone 5mg tab . . . . .       | .60 | .180 |
| Buspirone 10mg tab* . . . . .     | .60 | .180 |
| Citalopram 20mg tab . . . . .     | .30 | .90  |
| Citalopram 40mg tab . . . . .     | .30 | .90  |
| Fluoxetine 10mg cap* . . . . .    | .30 | .90  |
| Fluoxetine 10mg tab* . . . . .    | .30 | .90  |
| Fluoxetine 20mg cap*. . . . .     | .30 | .90  |
| Fluoxetine 40mg cap*. . . . .     | .30 | .90  |

|                                       | \$4, 30-day | \$10, 90-day |
|---------------------------------------|-------------|--------------|
| Haloperidol 0.5mg tab . . . . .       | .30         | .90          |
| Haloperidol 1mg tab. . . . .          | .30         | .90          |
| Haloperidol 2mg tab . . . . .         | .30         | .90          |
| Haloperidol 5mg tab . . . . .         | .30         | .90          |
| Lithium Carbonate 300mg cap*. . . . . | .90         | .270         |
| Nortriptyline 10mg cap*. . . . .      | .30         | .90          |
| Nortriptyline 25mg cap* . . . . .     | .30         | .90          |
| Paroxetine 10mg tab*. . . . .         | .30         | .90          |
| Paroxetine 20mg tab* . . . . .        | .30         | .90          |
| Prochlorperazine 10mg tab . . . . .   | .30         | .90          |
| Trazodone 50mg tab . . . . .          | .30         | .90          |
| Trazodone 100mg tab . . . . .         | .30         | .90          |
| Trazodone 150mg tab*. . . . .         | .30         | .90          |
| Trihexyphenidyl 2mg tab . . . . .     | .60         | .180         |

### Skin Conditions

|  |   |   |
|--|---|---|
| Hydrocortisone 1% cream (28.35-30g tube)†. . . . .   | 1 | 3 |
| Hydrocortisone 2.5% cream (30gm tube)†. . . . .      | 1 | 3 |
| Silver Sulfadiazine 1% cream* (50gm tube)† . . . . . | 1 | 3 |
| Triamcinolone 0.1% cream (15gm tube)†. . . . .       | 1 | 3 |
| Triamcinolone 0.1% cream (80gm tube)† . . . . .      | 1 | 3 |
| Triamcinolone 0.1% ointment (15gm tube)†. . . . .    | 1 | 3 |
| Triamcinolone 0.1% ointment (80gm tube)† . . . . .   | 1 | 3 |
| Triamcinolone 0.5% cream (15gm tube)† . . . . .      | 1 | 3 |

### Thyroid Conditions

|                                     |     |     |
|-------------------------------------|-----|-----|
| Levothyroxine 25mcg tab . . . . .   | .30 | .90 |
| Levothyroxine 50mcg tab . . . . .   | .30 | .90 |
| Levothyroxine 75mcg tab . . . . .   | .30 | .90 |
| Levothyroxine 88mcg tab . . . . .   | .30 | .90 |
| Levothyroxine 100mcg tab . . . . .  | .30 | .90 |
| Levothyroxine 112mcg tab . . . . .  | .30 | .90 |
| Levothyroxine 125mcg tab . . . . .  | .30 | .90 |
| Levothyroxine 137mcg tab . . . . .  | .30 | .90 |
| Levothyroxine 150mcg tab . . . . .  | .30 | .90 |
| Levothyroxine 175mcg tab*. . . . .  | .30 | .90 |
| Levothyroxine 200mcg tab* . . . . . | .30 | .90 |

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### Viruses

|                      |    |    |
|----------------------|----|----|
| Acyclovir 200mg cap* | 30 | 90 |
|----------------------|----|----|

### Vitamins & Nutritional Health

|                           |     |      |
|---------------------------|-----|------|
| Folic Acid 1mg tab.       | 30  | 90   |
| Mag 64 64mg tab*          | .60 | .180 |
| Magnesium Oxide 400mg tab | .30 | 90   |
| Prenatal Plus qty 30*     | .30 | 90   |

### Women's Health

|  |     |    |
|--|-----|----|
| Estradiol 0.5mg tab.                   | 30  | 90 |
| Estradiol 1mg tab                      | .30 | 90 |
| Estradiol 2mg tab*                     | .30 | 90 |
| Medroxyprogesterone Acetate 2.5mg tab* | .30 | 90 |
| Medroxyprogesterone Acetate 5mg tab*   | .30 | 90 |
| Medroxyprogesterone Acetate 10mg tab*  | .10 | 30 |

| Oral Contraceptives              | \$9, 28-day |
|----------------------------------|-------------|
| Levonorgestrel/Ethinyl Estradiol | 28          |
| Kurvelo                          | 28          |
| Norethindrone USP 0.35mg.        | 28          |
| Enskyce                          | 28          |
| Jencycla                         | 28          |
| Pirmella 1/35                    | 28          |
| Pirmella 7/7/7                   | 28          |
| Sprintec                         | 28          |
| Tri-Sprintec                     | 28          |

|                           | \$9, 30-day | \$24, 90-day |
|---------------------------|-------------|--------------|
| Alendronate SOD 35mg tab. | .4          | .12          |
| Alendronate SOD 70mg tab  | 4           | .12          |
| Clomiphene 50mg tab       | 5           | .15          |

### Other Medical Conditions

|  |     |    |
|--|-----|----|
| Chlorhexidine Gluconate 0.12% soln (473ml bottle)† | 1   | 3  |
| Megestrol 20mg tab*                                | .30 | 90 |
| Prednisone 2.5mg tab*                              | .30 | 90 |
| Prednisone 5mg tab*                                | .30 | 90 |

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