

CASCADE HEALTH ALLIANCE DRUG FORMULARY

Administered by MedImpact

How to Use the Drug Formulary

The Drug Formulary is a list of covered drugs for Cascade Health Alliance members. The drugs are listed by their generic names and most common brand name. Generic drugs must be used when they are available. Certain drugs have limits. The legend for drugs with limits is below:

AGE	Age Edit
G	Generic
B	Brand
PA	Prior Authorization
QL	Quantity Limit
ST	Step Therapy
SP	Specialty Pharmacy Medication

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PRICE	DRUG(generic)	(brand)	COMMENTS
CARDIOVASCULAR AGENTS			
ANTIARRHYTHMIC AGENTS			
\$	Amiodarone Tablets (200mg Only)	Pacerone, Cordarone	
\$\$	Disopyramide Phosphate Capsule	Norpace	
\$	Flecainide Tablet	Tambocor	
\$\$	Mexiletine Tablet	Rythmol	
\$	Quinidine Tablet/ER Tablet	Quinaglute	
CARDIAC GLYCOSIDE AGENTS			
\$	Digoxin Tablet	Lanoxin	
THIAZIDES AND RELATED DIURETIC AGENTS			
\$	Chlorthalidone Tablet	Hygroton	
\$	Hydrochlorothiazide (25 & 50mg Tablet/12.5mg Capsule)	Hydrodiuril/ Microzide	
\$	Indapamide Tablet	Lozol	
\$	Metolazone Tablet	Zaroxolyn	
POTASSIUM-SPARING DIURETIC AGENTS			
\$	Amiloride Tablet	Midamor	
\$	Spironolactone Tablet	Aldactone	
\$	Triamterene/HCTZ Capsule	Dyazide	
\$	Triamterene/HCTZ Tablet	Maxzide	
LOOP DIURETIC AGENTS			
\$	Bumetanide Tablet	Bumex	
\$	Furosemide Tablet	Lasix	
\$	Torsemide Tablet	Demadex	
POTASSIUM AGENTS			
\$-\$-\$-\$	Potassium Chloride Capsule ER/Solution/ Tablet ER	Klor-Con; K-Tabs	
\$\$	Potassium Citrate Solution/Tablet ER	Urocit-K	

PRICE	DRUG(generic)	(brand)	COMMENT
BETA AND BETA-ALPHA BLOCKER AGENTS			
\$	Atenolol Tablet	Tenormin	
\$	Carvedilol Tablet	Coreg	
\$	Labetalol Tablet	Normodyne	
\$	Metoprolol Succinate Tab ER	Toprol XL	
\$	Metoprolol Tartrate Tablet	Lopressor	
\$\$	Nadolol Tablet	Corgard	
\$\$-\$	Propranolol Tablet/Tablet ER	Inderal; Inderal LA	
\$	Sotalol Tablet	Betapace	
ALPHA-BLOCKERS AND OTHER SYMPATHOLYTIC AGENTS			
\$	Clonidine Tablet	Catapress	
\$	Doxazosin Tablet	Cardura	
\$	Guanfacine Tablet	Tenex	
\$	Prazosin Capsule	Minipress	
\$	Terazosin Capsule	Hytrin	
VASODILATOR AGENTS			
\$	Hydralazine Tablet	Apresoline	
\$	Minoxidil Tablet	Loniten	
ANGIOTENSIN-CONVERTING ENZYME INHIBITOR (ACE) AGENTS			
\$	Benazepril Tablet	Lotensin	
\$\$	Captopril Tablet	Capoten	PA
\$	Enalapril Tablet	Vasotec	
\$	Fosinopril Tablet	Monopril	
\$	Lisinopril Tablet	Zestril, Prinivil	
\$	Lisinopril-HCTZ Tablet	Zestoretic; Prinizide	
\$	Ramipril Tablet	Altace	
\$	Trandolapril Tablet	Mavik	
ANGIOTENSIN RECEPTOR BLOCKER (ARB) AGENTS			
\$	Irbesartan Tablet	Avapro	
\$	Olmesartan Tablet	Benicar	
\$	Olmesartan-HCTZ Tablet	Benicar-HCT	
\$	Losartan Tablet	Cozaar	
\$	Losartan-HCTZ Tablet	Hyzaar	
\$	Telmisartan Tablet	Micardis	

PRICE	DRUG(generic)	(brand)	COMMENT
\$	Valsartan Tablet	Diovan	
\$	Valsartan-HCTZ Tablet	Diovan-HCT	

CALCIUM CHANNEL BLOCKER AGENTS

\$	Amlodipine	Norvasc	
\$	Diltiazem	Cardizem, Cardizem CD, Cartia XT, Cardizem LA, Dilt-XR, Matzim LA, Taztia XT, Tiazac	
\$\$	Nifedipine Capsule	Procardia	
\$	Nifedipine Tablet	Procardia XL	
\$	Verapamil Tablet/Tablet SR	Calan/Calan SR	
\$	Amlodipine-Benazepril Tablet	Lotrel	

NITRATE AGENTS

\$	Isosorbide Dinitrate Tablet	Isordil	
\$	Isosorbide Mononitrate Tablet/Tablet ER	Monoket	
\$	Nitroglycerin Patch (0.1mg, 0.2mg, 0.4mg, 0.6mg)	Nitro-DUR	
\$	Nitroglycerin Ointment	Nitro-BID	PA
\$	Nitroglycerin Tablet SL	Nitrostat	

ANTICOAGULANT AND ANTIPLATELET AGENTS

\$	Aspirin	Ecotrin, Halfprin	
\$	Cilostazol Tablet	Pletal	
\$	Clopidogrel 75mg Tablet	Plavix	
\$\$	Enoxaparin Syringe	Lovenox	PA>7 day supply
\$\$\$\$	Fondaparinux Syringe	Arixtra	PA
\$\$\$\$	Rivaroxaban Tablet	Xarelto	
\$	Warfarin Tablet	Coumadin	
\$\$\$\$	Apixaban Tablet	Eliquis	

CHOLESTEROL AGENTS

STATINS			
\$	Atorvastatin Tablet	Lipitor	
\$	Lovastatin Tablet	Mevacor	

PRICE	DRUG(generic)	(brand)	COMMENT
\$	Pravastatin Tablet	Pravachol	
\$	Rosuvastatin Tablet	Crestor	
FIBRATES			
\$\$	Fenofibrate Tablet (48mg, 54mg, 145mg, 160mg Only)	Tricor/Triglide	
\$	Gemfibrozil Tablet	Lopid	
BILE ACID SEQUESTRANTS			
\$\$	Cholestyramine Powder	Questran	
\$\$	Cholestyramine Lite Powder	Questran Lite	
\$\$	Colestipol Packet/Tablet	Colestid	QL-120/28 days
OTHER LIPOTROPIC AGENTS			
\$\$\$	Ezetimibe Tablet	Zetia	
\$	Fish Oil (OTC Only)		
\$	Niacin (OTC Only)		
DERMATOLOGIC AGENTS			
TOPICAL ANTIBACTERIAL AGENTS			
\$	Bacitracin Ointment	Baciguent	
\$	Bacitracin/Polymyxin Ointment	Polysporin	
\$	Gentamicin Cream/Ointment	Garamycin	
\$	Mupirocin 2% Ointment	Bactroban	QL 22gm/month
\$	Silver Sulfadiazine Cream	SSD	
TOPICAL ANTIFUNGAL AGENTS			
\$	Clotrimazole Cream	Lotrimin AF	PA
\$	Clotrimazole/Betamethasone Cream	Lotrisone	PA
\$	Ketoconazole Cream/Shampoo	Nizoral	PA
\$	Miconazole Aerosol Powder	Lotrimin AF	PA
\$	Nystatin Cream/Ointment	Mycostatin	PA IF AGE>2
\$\$	Nystatin Powder	Nystop	PA
\$	Terbinafine Cream	Lamisil	PA

PRICE	DRUG(generic)	(brand)	COMMENT
\$	Tolnaftate Cream	Tinactin	PA
TOPCIAL ANTIVIRAL AGENTS			
\$\$	Podofilox Solution	Condyllox	PA
\$	Imiquimod Cream	Aldara	PA
ANTIPARASITIC AGENTS			
\$	Ivermectin Tablet	Stromectol	
\$\$\$\$	Albendazole Tablet	Albenza	PA
\$	Permethrin 1% Liquid	Nix	QL-60mL
\$\$	Permethrin 5% Cream	Elimite	QL-60gm
TOPICAL CORTICOSTEROIDS LOWEST POTENCY			
\$	Hydrocortisone 2.5% Cream/Ointment/Lotion	Hytone	PA
\$	Hydrocortisone 1% Cream	Hytone	PA
TOPICAL CORTICOSTEROIDS MEDIUM TO LOW POTENCY			
\$\$	Betamethasone Valerate 0.01% Cream	Valisone	PA
TOPICAL CORTICOSTEROIDS MEDIUM POTENCY			
\$	Fluticasone Propionate 0.05% Cream	Cutivate	PA
\$	Mometasone Furate 0.1% Cream/Solution (Lotion)	Elocon	PA
\$	Triamcinolone Cream/Ointment (0.025% and 0.1% only)	Kenalog	PA
\$\$	Triamcinolone Lotion (0.025% and 0.1% only)	Kenalog	PA
TOPICAL CORTICOSTEROIDS MEDIUM TO HIGH POTENCY			
\$	Fluticasone Propionate 0.1% Ointment	Cutivate	PA
\$	Mometasone Euroate 0.1% Ointment	Elocon	PA
\$	Triamcinolone Acetonide 0.5% Cream/Ointment	Kenalog	PA

PRICE	DRUG(generic)	(brand)	COMMENT
TOPICAL CORTICOSTEROIDS HIGH POTENCY			
\$\$	Betamethasone Dipropionate 0.05% Cream	Diprosone	PA
\$\$	Fluocinonide 0.05% Gel/Cream/Solution	Lidex	PA
TOPICAL CORTICOSTEROIDS VERY HIGH POTENCY			
\$\$	Betamethasone Dipropionate 0.05% Ointment	Diprosone	PA
\$\$	Clobetasol Propionate 0.05% Cream/Solution	Temovate	PA
OTHERS			
\$	Capsaicin 0.1% Cream	Zostrix	
\$	Lidocaine/Prilocaine Cream	Emla	PA
\$	Lidocaine 2% Jelly	Xilocaine	QL 30mL in 20 days
\$\$	Lidocaine 5% Patch	Lidoderm	PA, QL-30 in 30 days
\$\$\$	Fluorouracil 5% Cream	Efudex	PA
\$	Salon-Pas Patch	Salon-Pas	PA, QL-60 in 30 days
\$	Selenium Sulfide 2.5% Lotion	Selsun	PA
ENDOCRINE AND HORMONAL AGENTS			
2ND GENERATION SULFONYLUREAS			
\$	Glimepiride Tablet	Amaryl	
\$	Glipizide Tablet/Tablet ER	Glucotrol	
\$	Glyburide Tablet	Diabeta/Micronase	
BIGUANIDES			
\$	Metformin Tablet XR (500mg and 750mg)	Glucophage XR	
\$	Metformin Tablet	Glucophage	
THIAZOLIDINEDIONES			
\$	Pioglitazone Tablet	Actos	

PRICE	DRUG(generic)	(brand)	COMMENT
ALPHA-GLUCOSIDASE INHIBITORS			
\$	Acarbose Tablet	Precose	PA
DPP-4 INHIBITORS			
\$\$\$\$	Linagliptin Tablet	Tradjenta	PA-ST
\$\$	Alogliptin Tablet	Nesina	PA
MEGLITINIDES			
\$\$	Nateglinide Tablet	Starlix	QL-90/30 days
SGLT-2 INHIBITORS			
\$\$\$\$	Ertugliflozin Tablet	Steglatro	PA
\$\$\$\$	Ertugliflozin-Metformin Tablet	Segluromet	PA
GLP-1 Agonists			
\$\$\$\$	Lixisenatide	Adlyxin	PA
\$\$\$\$	Exenatide Microsphere	Bydureon	PA-ST
RAPID-ACTING INSULIN			
\$\$\$	Insulin Aspart Vial	Novolog	
\$\$\$\$	Insulin Aspart Cartridge/Pen	Novolog Penfill/Flexpen	PA-ST
\$\$\$	Insulin Glulisine Vial	Apidra	
\$\$\$\$	Insulin Glulisine Pen	Apidra Solostar	PA
\$\$\$	Insulin Lispro Vial	Admelog	
\$\$\$	Insulin Lispro Vial	Humalog	
\$\$\$\$	Insulin Lispro Pen	Humalog/Admelog Kwikpen	
\$\$\$\$	Insulin Lispro Pen	Humalog Jr Kwikpen	PA
SHORT-ACTING INSULIN			
\$\$	Insulin Regular Vial	Humulin-R/ Novolin-R	
\$\$\$\$	Insulin Regular Vial	Humulin R U-500	PA
INTERMEDIATE-ACTING INSULIN			
\$\$	Insulin NPH Vial	Humulin/Novolin N	

\$\$\$\$	Insulin NPH Pen	Humulin N Kwikpen	PA
PRICE	DRUG(generic)	(brand)	COMMENT
LONG-ACTING INSULIN			
\$\$\$	Insulin Detemir Vial	Levemir	PA
\$\$\$\$	Insulin Detemir Pen	Levemir FlexTouch	PA
\$\$\$	Insulin Glargine Vial	Lantus	PA-ST
\$\$\$\$	Insulin Glargine Pen	Lantus/Basaglar	PA-ST
\$\$\$	Insulin Glargine Vial/Pen	Semglee	
COMBINATION INSULIN			
\$\$	Insulin NPH-Insulin Human Regular Vial	Humulin 70:30/ Novolin 70:30	
\$\$\$	Insulin NPH-Insulin Human Regular Pen	Humulin 70:30 Kwikpen	PA
\$\$\$	Insulin Lispro Protamine- Insulin Lispro Vial	Humalog Mix 75:25 Humalog Mix 50:50	
\$\$\$	Insulin Lispro Protamine- Insulin Lispro Pen	Humalog Mix 75:25 or 50:50 Kwikpen	PA
\$\$\$	Insulin Lispro Protamine- Insulin Aspart Vial	Novolog Mix 70:30	
\$\$\$	Insulin Lispro Protamine- Insulin Aspart Pen	Novolog Mix 70:30 FlexPen	PA
ANTIHYPOLYCEMIC AGENTS			
\$\$\$	Glucagon Nasal Spray	Baqsimi	PA
THYROID AND ANTI-THYROID AGENTS			
\$	Levothyroxine Tablet	Synthroid	
\$	Liothyronine Tablet	Cytomel	PA
\$	Methimazole Tablet	Tapazole	
\$	Propylthiouracil Tablet	PTU	
ADRENAL CORTICOSTEROIDS/MINERALOCORTICOIDS			
\$	Dexamethasone Elixir/Solution 0.5mg, 0.75mg, 1.0mg, 1.5mg, 4.0mg Tablets	Decadron	
\$	Fludrocortisone Tablet	Florinef	
\$	Hydrocortisone Tablet	Cortef	

PRICE	DRUG(generic)	(brand)	COMMENT
\$	Methylprednisolone Tablet/Dose Pak (4mg and 16mg Only)	Medrol	
\$	Prednisolone Sodium Phosphate Solution	Orapred	
\$\$	Prednisone Oral Concentrate	Prednisone Intensol	
\$	Prednisone Dose Pak/Solution/Tablets	Sterapred	
ANDROGENS			
\$\$\$	Testosterone Cypionate Vial	Depo-Testosterone	PA
GROWTH HORMONES			
\$\$\$\$	Somatropin	Genotropin	PA, SP
\$\$\$\$	Somatropin	Omnitrope	PA, SP
OSTEOPOROSIS AGENTS			
\$	Alendronate Tablet	Fosamax	
\$	Ibandronate Tablet	Boniva	
\$\$	Raloxifene Tablet	Evista	
EYE, EAR, NOSE, AND THROAT			
OPHTHALMIC ANTI-INFECTIVES			
\$	Bacitracin-Polymyxin Ointment	Polycin	
\$	Ciprofloxacin Drops	Ciloxan	
\$	Erythromycin Base Ointment	Ilotycin	
\$	Gentamicin Drops	Genoptic	
\$	Gentamicin Ointment	Gentak	
\$	Neomycin-Bacitracin Polymyxin Ointment	Neo-Polycin	
\$	Neomycin-Polymyxin- Dexamethasone Drops and Ointment	Maxitrol	
\$	Neomycin-Polymyxin Gramicidin Drops	Neosporin Eye Solution	
\$	Ofloxacin Drops	Ocuflax	

PRICE	DRUG(generic)	(brand)	COMMENT
\$	Polymyxin-Trimethoprim Drops	Polytrim	
\$	Sulfacetamide Drops and Ointment	Bleph-10	
\$	Tobramycin Drops	Tobrex	
\$\$	Tobramycin-Dexamethasone Drops	Tobradex	

OPHTHALMIC ANTI-INFLAMMATORY

\$	Dexamethasone Drops	Maxidex	
\$	Diclofenac Drops (0.1% Only)	Voltaren	
\$\$	Fluorometholone Suspension Drops	FML	PA
\$	Ketorolac Drops (0.5% Only)	Acular	
\$	Prednisolone Drops	Pred Mild/ Pred Forte	

OCULAR ALLERGY PRODUCTS

ALLERGIC CONJUNCTIVITIS IS NOT COVERED BY OHP

\$	Cromolyn Drops	Opticrom	PA
\$	Tetrahydrozoline Drops	Visine	PA

GLAUCOMA AGENTS

\$\$	Acetazolamide Tablet (250mg IR Only)	Diamox	
\$	Atropine Drops and Ointment	Isopto Atropine	
\$	Betaxolol Drops	Betoptic	
\$	Carteolol Drops	Cartrol	
\$\$	Cyclopentolate Drops (1% Only)	Cyclogyl	
\$	Dorzolamide Drops	Trusopt	
\$	Latanoprost Drops	Xalatan	
\$	Levobunolol Drops	Betagan	
-\$-\$	Timolol Maleate Drops/Sol-Gel	Timoptic	
\$\$	Travoprost Drops	Travatan	
\$\$\$	Bimatoprost 0.01% Drops	Lumigan	

PRICE	DRUG(generic)	(brand)	COMMENT
MISC. OPHTHALMIC AGENTS			
\$	Dextran 70/Hypromellose Drops	Artificial Tears	PA
\$	Mineral Oil-White Petrolatum Ointment	Artificial Tears	PA
OTIC ANTI-INFECTIVES			
\$\$	Acetic Acid/Hydrocortisone Drops	Vosol HC	
\$	Ciprofloxacin Drops	Use Ciloxan Eye Drop	
\$\$\$	Ciprofloxacin-Dexamethasone Drops	Ciprodex	PA
\$\$	Neomycin-Polymyxin- Hydrocortisone Drops (Solution Only)	Cortisporin TC	PA
MISC. OTIC AGENTS			
\$	Carbamoxide 6.5% Drops	Debrox	PA
ORAL MUCOUS MEMBRANE AGENTS			
\$\$\$	Cevimeline Capsule	Evoxac	PA
\$	Lidocaine Viscous Solution	Xylocaine	PA
\$\$	Pilocarpine 5mg Tablet	Salagen	
MISC. NASAL PREPARATIONS			
\$	Cromolyn Nasal Spray	Nasalcrom	PA
\$\$-\$\$\$\$	Desmopressin Nasal Solution/ Spray	Stimate	PA
\$	Oxymetazoline Mist/ Spray	Afrin	PA
\$	Saline Spray	Ocean	PA

PRICE	DRUG(generic)	(brand)	COMMENT
NASAL CORTICOSTEROIDS			
ALLERGIC RHINITIS IS NOT COVERED BY OHP			
\$	Flunisolide	Nasalide	PA
\$	Fluticasone	Flonase	PA
ANTIHISTAMINES			
ALLERGIC RHINITIS IS NOT COVERED BY OHP			
\$-\$	Cetirizine Chew Tabs/ Solution/ Tablets	Zyrtec	PA
\$	Diphenhydramine Syrup	Benadryl	
\$	Diphenhydramine Capsule (25mg Only)	Benadryl	
\$	Hydroxyzine HCL Solution/Tablet	Atarax	PA
\$	Hydroxyzine Pamoate Capsule	Vistaril	PA
\$	Loratadine Solution/Tablet	Claritin	PA
COUGH AND COLD AGENTS			
COUGH AND COLD IS NOT COVERED BY OHP			
\$	Benzonatate Capsule	Tessalon	PA
\$	Guaifenesin-Codeine Liquid	Robitussin AC	PA
\$	Guaifenesin-Codeine- Pseudoephedrine Syrup	Robitussin DAC	PA
\$	Promethazine-Codeine Syrup	Phenergan w/ Codeine	PA
\$	Promethazine- Dextromethorphan Syrup	Phenergan DM	PA
\$	Pseudoephedrine Liquid; Tablets; Tablet ER 12 HR	Sudafed	PA
GASTROINTESTINAL AGENTS			
H2 BLOCKERS			
\$	Cimetidine Solution	Tagament	
\$	Famotidine Tablet (20mg and 40mg Only)	Pepcid	

PRICE	DRUG(generic)	(brand)	COMMENT
\$	Famotidine Suspension	Pepcid	PA>90 Days/365 Days
\$	Ranitidine Tablet (150mg and 300mg Only)	Zantac	
PROTON-PUMP INHIBITORS			
\$	Lansoprazole Capsule	Prevacid	
\$	Omeprazole Capsule	Prilosec	
\$	Omeprazole Suspension	First-Omeprazole	PA
\$	Pantoprazole Tablet	Protonix	
OTHER GI AGENTS			
\$	Misoprostol Tablet	Cytotec	
GASTROINTESTINAL AGENTS			
\$	Sucralfate Tablet	Carafate	
ANTIEMETIC AGENTS			
\$	Meclizine Tablet	Antivert	
\$	Metoclopramide Solution/Tablet	Reglan	
\$	Ondansetron HCL Tablet	Zofran	QL-30 per 24 days
\$	Ondansetron ODT Tablet	Zofran ODT	QL-30 per 24 days
\$-\$	Prochlorperazine Suppository/Tablet	Compazine	
\$	Promethazine Tablet	Phenergan	
\$\$	Promethazine Suppository 12.5mg and 25mg Only	Phenergan	
ANTISPASMODICS			
\$	Dicyclomine Tablet	Bentyl	
ANTIDIARRHEAL			
\$	Bismuth Subsalicylate Suspension/Chew Tabs	Pepto-Bismol	PA
\$	Diphenoxylate-Atropine Liquid/Tablet	Lomotil	

PRICE	DRUG(generic)	(brand)	COMMENT
CONSTIPATION			
\$	Bisacodyl Suppository/Tablet	Dulcolax	PA
\$	Docusate Liquid/ Capsule-100mg Only	Colace	PA
\$	Glycerin Suppository	Fleet/Pedia-Lax	PA
\$	Polyethylene Glycol (PEG) 3350 Powder	Miralax	PA
\$	Psyllium Husk Capsule	Metamucil	PA
\$	Sennosides Tablet (8.6mg Only)	Senokot	PA
\$\$	Lactulose	Kristalose	PA
BOWEL PREP AGENTS			
\$	PEG-3350-Electrolytes	Gavilyte-C Gavilyte-G Golytely	
\$	NaCl-NaHCO3-KCL-PEG	Gavilyte-N	
\$	Sodium-Potassium- Magnesium Sulfates	Suprep	QL-354ml in 180 days
\$	NaCl-NaHCO3/KCL/PEG	Trilyte	
INFLAMMATORY BOWEL AGENTS			
\$\$\$\$	Mesalamine Tablet (800mg Only)	Asacol HD	PA
\$\$	Mesalamine Enema	Rowasa	PA
\$\$\$	Balsalazide Capsule	Colazal	PA
\$	Sulfasalazine Tablet/ Tablet DR	Azulfidine	
\$\$	Hydrocortisone Enema	Cortenema	
PANCREATIC ENZYMES			
\$\$-\$ \$\$	Lipase-Protease-Amylase Capsule DR	Creon	PA
\$\$	Lipase-Protease-Amylase Capsule DR	Pancreaze	PA
\$\$-\$ \$\$	Lipase-Protease-Amylase Capsule DR	Zenpep	PA

PRICE	DRUG(generic)	(brand)	COMMENT
MISC. GI AGENTS			
\$	Simethicone Chew Tabs	Gas-X	
\$\$\$	Ursodiol Capsule	Actigall	
INFECTIOUS DISEASE			
PENICILLINS			
\$	Amoxicillin Capsule/Suspension	Amoxil	
\$	Amoxicillin-Clavulanic Acid Tablet/Suspension	Augmentin	
\$	Ampicillin Capsule/Suspension	Polycillin/Omnipen	
\$	Dicloxacillin Capsule	Dynapen	
\$	Penicillin VK Tablet/Solution	Beopen VK	
CEPHALOSPORINS-FIRST GENERATION			
\$	Cefadroxil Capsule/Suspension	Duricef	
\$	Cephalexin Capsule/Suspension	Keflex	
CEPHALOSPORINS-SECOND GENERATION			
\$\$	Cefaclor Capsule/Suspension	Ceclor	
\$	Cefprozil Tablet/Suspension	Cefzil	
\$	Cefuroxime Tablet	Ceftin/Zinacef	
CEPHALOSPORINS-THIRD GENERATION			
\$	Cefdinir Capsule/Suspension	Omnicef	
\$\$	Cefixime Suspension (100mg/5ml Only)	Suprax	
\$\$	Cefpodoxime Tablet/Suspension	Vantin	

PRICE	DRUG(generic)	(brand)	COMMENT
MACROLIDES			
\$	Azithromycin Suspension	Zithromax	
\$	Azithromycin 250mg Tablet	Zithromax Z-Pak	QL-12/fill
\$	Azithromycin 500mg Tablet	Zithromax Tri-Pak	QL-6/fill
\$\$	Clarithromycin Suspension/Tablet	Biaxin	
\$\$\$\$	Erythromycin Base	Eryc/Ery-Tab/PCE	PA
\$\$\$\$	Erythromycin Ethylsuccinate	E.E.S./EryPed	PA
QUINOLONES			
\$	Ciprofloxacin Tablet	Cipro	
\$\$	Ciprofloxacin Suspension	Cipro	AGE<=8
\$	Levofloxacin Tablet	Levaquin	
TETRACYCLINES			
\$	Doxycycline Hyclate Tablet/Capsule (50mg and 100mg Only)	Vibramycin/ Vibratab	
\$	Doxycycline Monohydrate Tablet/Capsule (50mg and 100mg Only)	Monodox	
\$\$	Doxycycline Monohydrate Suspension	Adoxa	
\$\$\$\$	Tetracycline Capsule	Sumycin	PA
OTHER ORAL ANTIBIOTICS			
\$\$	Clindamycin Suspension	Cleocin	AGE<=8
\$	Clindamycin Capsule	Cleocin	
\$\$	Dapsone Tablet	Aczone	
\$	Metronidazole Tablet	Flagyl	
-\$-\$	Nitrofurantoin Capsule/ Suspension	Macrobid	
\$	Nitrofurantoin-Nitrofuran Macrocrystals	Macrodantin	
\$\$	Rifampin Capsule	Rifadin	

PRICE	DRUG(generic)	(brand)	COMMENT
\$\$	Sulfamethoxazole- Trimethoprim Suspension/ Tablet	Bactrim/ Septra	
\$	Trimethoprim Tablet	Proloprim	
ORAL ANTIFUNGALS			
\$\$	Clotrimazole Troche	Mycelex	PA
\$	Fluconazole 150mg Tablet Fluconazole 200mg Tablet	Diflucan	QL-3 per fill (150mg)
	Fluconazole Tablets 50mg and 100mg	Diflucan	PA
\$	Fluconazole Suspension	Diflucan	
\$\$	Griseofulvin Suspension/ 500mg Tablet	Gris-Peg	PA
\$\$	Ketoconazole Tablet	Nizoral	PA
\$\$-\$	Nystatin Suspension/ Tablet	Mycostatin	
\$	Terbinafine Tablet	Lamisil	PA
VAGINAL ANTI-INFECTIVES			
\$\$	Clindamycin Cream	Cleocin	PA
\$	Clotrimazole 3 or 7-Day Cream	Gyne-Lotrimin	
\$\$	Metronidazole Gel	Metro-Gel Vaginal	
\$	Miconazole 3 or 7-Day Cream	Monistat	
\$	Terconazole Cream	Terazol	
HERPES SIMPLEX ANTI-VIRALS			
\$-\$	Acyclovir Capsule/ Suspension/Tablet	Zovirax	
\$	Valacyclovir Tablet	Valtrex	
HEPATITIS B VIRUS AGENTS			
\$\$\$\$	Lamuvidine Tablet	Epivir HBV	PA, SP
\$\$\$\$	Tenofovir Tablet	Viread	PA, SP

PRICE	DRUG(generic)	(brand)	COMMENT
HEPATITIS C VIRUS AGENTS			
\$\$\$\$	Sofosbuvir-Velpatasvir Tablet	Epclusa	PA
\$\$\$\$	Sofosbuvir-Velpatasvir-Voxilprevir Tablet	Vosevi	PA
\$\$\$\$	Glecaprevir-Pibrentasvir	Mavyret	PA
\$\$\$\$	Peginterferon Alfa-2a	Pegasys	PA
\$\$\$\$	Ribavirin 200mg Capsule/Tablet	Rebetal/Copegus	PA
INFLUENZA VIRUS AGENTS			
\$\$	Amantadine Syrup	Symmetrel	
\$\$	Oseltamivir Capsule/Suspension	Tamiflu	
RSV AGENTS			
\$\$\$\$	Palivizumab	Synagis	PA
HIV ANTIVIRALS			
\$\$-\$\$\$\$	ALL HIV ANTI-RETROVIRALS ARE COVERED; MAY REQUIRE PRIOR AUTHORIZATION FOR APPROVAL		PA, SP
ANTINEOPLASTIC AGENTS			
\$\$\$\$	ALL ANTINEOPLASTIC AGENTS ARE COVERED; MAY REQUIRE PRIOR AUTHORIZATION FOR APPROVAL		PA, SP

PRICE	DRUG(generic)	(brand)	COMMENT
IMMUNOSUPPRESSANT AGENTS			
\$	Azathioprine Tablet	Imuran	
\$\$\$\$	Cyclosporine Capsule/ Solution	Sandimmune	
\$	Mycophenolate Mofetil Capsule/Tablet	Cellcept	
\$-\$-\$	Tacrolimus Capsule	Prograf	
NEUROLOGIC AGENTS			
ANTICONVULSANTS			
\$-\$-\$	Carbamazepine Chewable Tablet/Suspension/Tablet/ ER Tablet	Tegretol/ Tegretol XR	
\$	Clonazepam Tablet	Klonopin	PA>30 days use
\$\$\$	Ethosuximide Capsule/ Solution	Zarontin	
\$	Gabapentin Capsule/Tablet	Neurontin	QL-90/30 days
\$-\$-\$	Levetiracetam Solution/ Tablet/ ER Tablet	Keppra/Keppra XR	
\$-\$-\$	Oxcarbazepine Suspension/ Tablet	Trileptal	
\$	Phenobarbital Tablet	Luminol	
\$	Phenytoin Chewable Tablet/ Suspension	Dilantin Infatabs/ Dilantin	
\$	Phenytoin Sodium Extended Capsule	Phenytek	
\$	Primidone Tablet	Mysoline	
\$	Topiramate Tablet	Topamax	
\$	Zonisamide Capsule	Zonegran	
ANTIPARKINSONIAN AGENTS			
\$-\$-\$	Amantadine Solution	Symmetrel	
\$	Benztropine Tablet	Cogentin	
\$	Carbidopa-Levodopa IR Tablet/ER Tablet	Sinemet/ Sinemet CR	
\$	Pramipexole Tablet	Mirapex	PA

PRICE	DRUG(generic)	(brand)	COMMENT
\$	Ropinirole Tablet	Requip	PA
\$	Trihexyphenidyl Tablet	Artane	
MULTIPLE SCLEROSIS AGENTS			
\$\$\$\$	Dimethyl Fumarate Capsule	Tecfidera	PA, SP
\$\$\$\$	Fingolimod Capsule	Gilenya	PA, SP
\$\$\$\$	Glatiramer Syringe	Glatopa	PA, SP
\$\$\$\$	Interferon Beta-1 a Kit/Pen	Avonex	PA, SP
\$\$\$\$	Interferon Beta-1 b Kit/Vial	Extavia	PA, SP
DEMENTIA AGENTS			
\$-\$ \$\$	Memantine IR Tablets/ Solution	Namenda	PA
\$	Donepezil ODT Rapdis/ Tablet	Aricept	PA, AGE>=40
\$\$	Galantamine Tablet/ ER Capsule	Razadyne/ Razadyne ER	PA
DENTAL AGENTS			
MISC. DENTAL AGENTS			
\$\$	Triamcinolone Acetonide Paste	Kenalog In Orabase	
\$	Sodium Fluoride 1.1% Gel, Paste, Cream	Prevident, Dentagel, Denta 5000 Plus	
\$	Chlorhexidine Gluconate 0.12% Mouthwash	Periogard	
\$	Sodium Fluoride Drops/ Tablets	Luride, Fluoritab	AGE<=18
NUTRITIONAL PRODUCTS/VITAMINS AND MINERALS			
IRON SUPPLEMENTS			
\$	Ferrous Gluconate	Fergon	

PRICE	DRUG(generic)	(brand)	COMMENT
\$	Ferrous Sulfate	Feosol	
VITAMIN B			
\$	Cyanocobalamin (B-12) 1,000mcg/ml Injection		PA
\$	Folic Acid 1mg Tablet	Folvite	
VITAMIN C			
\$	Ascorbic Acid Tablet (250, 500, 1000mg Only)	Vitamin C	
VITAMIN D			
\$	Calcitriol	Rocaltrol	
\$	Cholecalciferol (D3) Capsule/ Tablet (400, 1000, 2000, 5000, 50000 unit only)	Delta D3	
VITAMIN E			
\$	Vitamin E Capsule (400mg and 600mg Only)	E-400/E-600	
VITAMIN K			
\$	Vitamin K	Mephyton	
MULTIVITAMINS			
\$	Calcium+D 600-200mg Tablet	Oscal	
\$	Multivitamin and Fluoride Drops	Poly-Vi-Flor	AGE<=5
\$	Multivitamin and Fluoride Chewable Tablet	Poly-Vi-Flor	AGE<=18
\$	Tri-Vitamin (A, C, D3) With Fluoride Drops	Tri-Vi-Flor	AGE<=5
\$	MV with or without minerals	Therems/ Therems-M	
\$	Prenatal Vitamin	Prenatal Plus	
CALCIUM			
\$	Calcium Carbonate	Maalox/Tums	
\$	Clacium Citrate	Citracal	

PRICE	DRUG(generic)	(brand)	COMMENT
OTHERS			
\$\$	Levocarnitine Solution	Carnitor	PA
\$\$\$\$	Sevelamer Hydrochloride	Renagel	PA
\$	Renal Vitamin 0.8mg Tablet	Rena-Vite/ Nephro-Vite	
\$	Renal Vitamin 1mg Capsule	RenaCaps	
\$\$	Calcium Acetate 667mg Capsule/Tablet	Phoslo	PA
PAIN, MUSCULOSKELETAL, AND INFLAMMATION			
TOPICAL ANTI-INFLAMMATORY AGENTS			
\$\$	Diclofenac 1% Gel	Voltaren Gel	PA, QL-100gm (1 tube) in 30 Days
ANALGESIC AGENTS			
\$	Acetaminophen Drops/ Liquid/Suppository/Tablet/ Chewable Tablet	Tylenol	
ORAL ANTI-INFLAMMATORY AGENTS			
\$	Aspirin Tablet/ Chewable Tablet/ EC Tablet (81mg and 325mg Only)	Bufferin/Ecotrin	
\$\$	Celecoxib Capsule	Celebrex	PA
\$	Diclofenac Sodium Tablet	Voltaren	
\$\$	Etodolac Capsule/Tablet	Lodine	PA
\$\$	Etodolac ER Tablet	Lodine ER	PA
\$	Flurbiprofen Tablet	Ansaid	
\$	Ibuprofen Drops/Suspension Tablet (600 and 800mg only)	Motrin/Advil	
\$	Indomethacin Capsule	Indocin	
\$	Meloxicam Tablet	Mobic	QL-30/30 days
\$	Naproxen Tablet (250mg, 375mg, 500mg Only)	Naprosyn	
\$	Piroxicam Capsule	Feldene	

PRICE	DRUG(generic)	(brand)	COMMENT
\$\$	Salsalate Tablet	Salflex	PA
\$	Sulindac Tablet	Clinoril	
OPIOID/ANALGESIC COMBINATIONS			
DAYS SUPPLY GREATER THAN 7 REQUIRE PRIOR AUTHORIZATION ANY COMBINATION OF OPIOIDS GREATER THAN 90MED REQUIRE PRIOR AUTHORIZATION (DOES NOT APPLY TO CANCER/PALLIATIVE CARE)			
\$	Codeine-Acetaminophen Tablet	Tylenol With Codeine	
\$	Codeine-Acetaminophen 120-12.5-5ml Solution	Tylenol With Codeine	AGE<=5
\$\$	Hydrocodone-Acetaminophen 7.2-325mg/15ml Solution	Hycet	AGE<=5
\$	Hydrocodone-Acetaminophen Tablet (5-325/7.5-325/10-325mg)	Norco	
\$	Oxycodone-Acetaminophen Tablet (5-325mg Only)	Endocet/Percocet	
\$	Oxycodone-Aspirin Tablet	Percodan	
\$	Hydromorphone Tablet (2mg and 4mg Only)	Dilauidid	
\$-\$ \$\$	Morphine Sulfate IR Tablet	Roxanol	
\$	Morphine Sulfate 20mg/5ml Solution	Roxanol	
\$-\$ \$	Oxycodone 5mg Tablet	Roxidone	
\$	Tramadol Tablet	Ultram	QL-8 per day
LONG-ACTING OPIOIDS			
\$-\$ \$	Morphine Sulfate ER Tablet	MS Contin	PA
\$\$	Fentanyl Patch (12, 25, 50, 75, 100mcg Only)	Duragesic	PA
MIGRAINE AGENTS			
\$	Sumatriptan Succinate Oral Tablet	Imitrex	QL-9/30 days
\$\$\$	Sumatriptan Succinate Nasal Spray	Imitrex	PA, QL-6/30 days
\$	Rizatriptan ODT/Tablet	Maxalt MLT/Maxalt	QL-12/30 days

PRICE	DRUG(generic)	(brand)	COMMENT
\$	Naratriptan Tablet	Amerge	QL-9 per 30 days
\$	Butalbital-Acetaminophen Caffeine 50-325-40mg Tablet	Fioricet	QL-30 per 30 days
\$	Butalbital-Aspirin-Caffeine 50-325-40 Tablet	Fiorinal	QL-30 per 30 days
CGRP INHIBITORS			
\$\$\$	Erenumab Injection	Aimovig	PA
\$\$\$	Fremanezumab Injection	Ajovy	PA
MUSCLE RELAXANTS			
\$	Baclofen Tablet (10 and 20mg Only)	Lioresal	PA>120 days/365 days
\$	Cyclobenzaprine Tablet (5mg or 10mg Only)	Flexeril	
\$	Methocarbamol Tablet	Robaxin	
\$	Tizanidine Tablet	Zanaflex	
GOUT			
\$	Allopurinol Tablet	Zyloprim	
\$\$	Colchicine Tablet	Colcrys	QL-30 in 180 days
\$	Probenecid Tablet	Benemid	
RHEUMATOLOGY AGENTS			
\$\$\$\$	Adalimumab Injection	Humira	PA, SP
\$\$\$\$	Etanercept Injection	Enbrel	PA, SP
\$	Leflunomide Tablet	Arava	
\$	Methotrexate Tablet/Vial	Trexall	
\$\$	Hydroxychloroquine Tablet	Plaquenil	
PULMONARY AGENTS			
BETA-AGONIST, SHORT-ACTING AGENTS			
\$\$	Albuterol HFA	Proair HFA	QL-1 per 25 days
\$\$	Albuterol HFA	Ventolin HFA	
\$\$	Levalbuterol HFA	Xopenex HFA	
\$	Albuterol Nebulizer Solution	AccuNeb	QL-90mL per fill

PRICE	DRUG(generic)	(brand)	COMMENT
BETA-AGONIST, LONG-ACTING (LABA) AGENTS			
\$\$\$\$	Olodaterol	Striverdi Respimat	PA
INHALED CORTICOSTEROIDS (ICS) AGENTS			
\$\$\$	Beclomethasone	Qvar Qvar Redihaler	
\$\$\$	Budesonide	Pulmicort Flexhaler	
\$\$\$\$	Budesonide Nebulizer Solution	Pulmicort Respule	PA>5 years old
\$\$\$	Fluticasone Propionate (44mcg and 110mcg)	Flovent HFA	PA
\$\$\$\$	Fluticasone Propionate (220mcg)	Flovent HFA	PA
BETA AGONIST, LONG ACTING (LABA) & INHALED CORTICOSTEROID AGENTS			
\$\$\$\$	Mometasone-Formoterol	Dulera	PA
\$\$\$	Budesonide-Formoterol Fumarate	Symbicort	PA
\$\$\$\$	Fluticasone-Salmeterol (100-50mcg and 250-50mcg)	Advair Diskus	PA
\$\$\$\$	Fluticasone-Salmeterol (500-50mcg)	Advair Diskus	PA
\$\$	Fluticasone-Salmeterol	Airduo Respiclick	
ANTICHOLINERGIC AGENTS			
\$\$\$\$	Tiotropium	Spiriva	PA
\$\$\$\$	Ipratropium	Atrovent HFA	PA
\$\$\$\$	Umeclidinium	Incruse Ellipta	PA
\$	Ipratropium Albuterol Nebulizer Solution	Duoneb	QL-90ml per fill
BETA-AGONIST, LONG ACTING (LABA) & ANTICHOLINERGIC, LONG ACTING (LAMA) AGENTS			
\$\$\$\$	Tiotropium-Olodaterol	Stiolto Respimat	PA
\$\$\$\$	Glycopyrrrolate-Formoterol	Bevespi Aerosphere	

PRICE	DRUG(generic)	(brand)	COMMENT
LEUKOTRIENE INHIBITOR AGENTS			
\$	Montelukast Tablet	Singulair	
\$	Zafirlukast Tablet	Accolate	
OTHER PULMONARY AGENTS			
\$	Saline Inhalation 0.9%, 3%, 10% Nebulizer Vials	Modulose Saline Solution for Inhalation	
\$	Sildenafil 20mg Tablet	Revatio	PA
\$-\$	Theophylline ER Tablet (400mg and 600mg)	Theo-24	
INHALER ASSIST DEVICES			
MASKS, AEROCHAMBERS, PEAK FLOW METERS, AND NEBULIZERS ARE A COVERED BENEFIT WITH OHP AND ARE OBTAINED BY COMING DIRECTLY TO THE OFFICE OF CASCADE HEALTH ALLIANCE			
MISC			
\$\$\$\$	Epinephrine Injectable	Adrenaclick/Epipen	QL-4 pens/year
TOBACCO CESSATION AGENTS			
\$\$\$\$	Nicotine Inhaler	Nicotrol	PA
\$	Nicotine Gum	Nicorette	QL-720 per 30 days; 180 day supply per year
\$\$	Nicotine Lozenge	Nicorette	QL-600 per 30 days; 180 day supply per year
\$	Nicotine Patch	Nicoderm CQ	QL-30 per 30 days 180 day supply per year
\$\$\$\$	Varenicline Tablet	Chantix	QL-336/year
\$	Bupropion 150mg SR Tablet	Zyban	PA>6 fills in 365 days

PRICE	DRUG(generic)	(brand)	COMMENT
PSYCHOTHERAPEUTIC AND CNS AGENTS			
MENTAL HEALTH MEDICATIONS ARE CARVED OUT TO FEE-FOR-SERVICE. PLEASE CALL OREGON PHARMACY CALL CENTER AT 1(888)202-2126 FOR THE FOLLOWING MEDICATION CLASSES:			
<ul style="list-style-type: none"> • ANTIDEPRESSANTS • ANTIPSYCHOTIC AGENTS • BIPOLAR AGENTS • ANXIOLYTIC AGENTS • ADHD AGENTS (NONSTIMULANTS) 			
STIMULANTS			
ALL LONG-ACTING OR EXTENDED RELEASE ADHD MEDICATIONS REQUIRE A PRIOR AUTHORIZATION FOR MEMBERS 19 YEARS OLD AND OLDER LONG ACTING FORMULATIONS ARE SUBJECT TO QUANTITY LIMITATIONS			
\$	Amphetamine-Dextroamphetamine Tablet	Adderall	
\$\$	Amphetamine-Dextroamphetamine ER 24H Capsule	Adderall XR	QL-30 per 30 days AGE<=18
\$	Methylphenidate Solution/Tablet	Ritalin	
\$\$\$	Methylphenidate ER 24H Tablet	Concerta	QL-30 per 30 days AGE<=18
\$\$-\$ \$\$	Methylphenidate CD Capsule	Metadate CD	QL-30 per 30 days AGE<=18
\$\$-\$ \$\$	Methylphenidate LA Capsule	Ritalin LA	QL-30 per 30 days AGE<=18
\$\$	Methylphenidate SR 20mg Tablet	Ritalin-SR 20	QL-30 per 30 days AGE<=18
\$	Dexmethylphenidate Tablet	Focalin	
\$\$\$	Dexmethylphenidate ER Capsule	Focalin XR	QL-30 per 30 days AGE<=18

PRICE	DRUG(generic)	(brand)	COMMENT
AGENTS FOR OPIOID ADDICTION			
\$\$	Buprenorphine-Naloxone Tablet	Suboxone	PA
AGENTS FOR ALCOHOL DEPENDENCE			
\$\$\$	Acamprosate Tablet	Campral	
\$	Naltrexone Tablet	Revia	
AGENTS FOR OPIOID OVERDOSE			
\$	Naloxone 4mg HCL	Narcan	QL-1 box per fill
UROLOGICAL DRUGS			
BPH AGENTS			
\$	Doxazosin Tablet	Cardura	
\$	Tamsulosin Capsule ER	Flomax	
\$	Terazosin Capsule	Hytrin	
OTHERS			
\$	Bethanechol Tablet (5, 10, 25mg Only)	Urecholine	
\$	Citric Acid/Potassium Solution	Cytra-K	
\$	Oxybutynin Syrup/Tablet	Ditropan	
\$	Oxybutynin Tablet ER	Ditropan XL	QL-30 per 30 days
\$	Phenazopyridine Tablet	Pyridium	
VACCINES			
VACCINES			
ADDITIONAL VACCINATIONS AND ALL VACCINATIONS FOR CHILDREN AGES 18 AND YOUNGER ARE COVERED THROUGH PROVIDERS OFFICE			
CONTACT CHA CASE MANAGEMENT FOR ADDITIONAL INFORMATION			
\$	Flu Vaccine	Fluvirin, Fluzone, Flulaval	AGE>=19

PRICE	DRUG(generic)	(brand)	COMMENT
\$\$	Pneumonia Vaccine	Pneumovax	AGE>=19
\$\$\$	Zoster Vaccine, Recombinant-Adjuvanted	Shingrix	QL-2 per lifetime AGE>=50

WOMEN'S HEALTH AND CONTRACEPTIVE AGENTS

HORMONE REPLACEMENT THERAPY

\$	Estradiol Tablet	Estrace	
\$\$\$	Estradiol Cream	Estrace Vaginal	PA
\$\$\$	Estradiol Vaginal Tablet	Vagifem	PA
\$\$	Estradiol Patches	Climara	PA
\$\$\$\$	Estradiol Vaginal Ring	Estring	PA
\$	Estropipate Tablet	Ogen	
\$	Medroxyprogesterone Tablet	Provera	
\$\$	Norethindrone Acetate Tablet	Aygestin	
\$	Progesterone Micronized Capsule	Prometrium	
\$\$	Estradiol-Norethindrone Acetate Tablet	Activella	PA

EMERGENCY CONTRACEPTIVES

\$	Levonorgestrel Tablet	My Way, Next Choice, Fallback, Solo, Plan-B, Plan-B One Step	
\$	Ullipristal Acetate	Ella	

MISC

\$\$	Methylergonovine Tablet	Methergine	PA
\$	Misoprostol Tablet	Cytotec	

ORAL CONTRACEPTIVES

\$	Desogestrel-Ethinyl Estradiol Tablet	Kariva, Aprि, Azurette, Caziant, Emoquette, Reclipsen, Velvet, Viorele	
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PRICE	DRUG(generic)	(brand)	COMMENT
\$-\$	Drospirenone-Ethinyl Estradiol Tablet	Gianvi, Loryna, Nikki, Ocella, Syeda, Vestura, Zarah	
\$-\$	Ethyndiol-Ethinyl Estradiol Tablet	Kelnor 1/35, Zovia 1/35, Zovia 1/50	
\$-\$	Levonorgestrel-Ethinyl Estradiol Tablet	Altavera, Aviane-28, Falmina, Kurvelo, Lessina, Lutera, Marlissa, Sronyx, Levora, Orsythia, Portia-28, Empresse, Myzilra, Levonest, Trivora-28, Setlakin, Introvale, Jolessa	
\$-\$	Norethindrone-Ethinyl Estradiol Tablet	Alyacen, Cyclafem, Necon, Nortrel, Junel, Junel Fe, Microgestin, Microgestin Fe, Gildess Fe, Tri-Lejest Fe, Leena, Aranelle, Gildess, Wera	
\$	Norgestimate-Ethinyl Estradiol Tablet	Mononessa, Sprintec, Previfem, Trinessa, Tri-Previfem, Tri-Lo Sprintec	
\$	Norgestrel-Ethinyl Estradiol Tablet	Cryselle, Elinest, Low-Ogestrel, Ogestrel	
\$	Norethindrone Tablet	Errin, Camila, Nora-Be, Jolivette, Heather	
OTHER CONTRACEPTIVES			
\$\$	Norelgestromin-Ethinyl Estradiol Patch	Xulane	
\$\$	Etonogestrel-Ethinyl Estradiol Vaginal Ring	NuvaRing	

PRICE	DRUG(generic)	(brand)	COMMENT
\$\$	Medroxyprogesterone Acetate Injectable	Depro-Provera IM Shot	
LEVONORGESTREL IMPLANTS & IUDs MUST BE A COVERED DMAP SERVICE AND OBTAINED THROUGH PROVIDERS OFFICE			

CHOICE 90 FORMULARY

No PA required; must be written for 90 days*

Drug Name	Form	Strength
ANTIHYPERTENSIVES		
Amiloride	TABLET	5MG
Amlodipine	TABLET	2.5MG, 5MG, 10MG
Amlodipine-Benazepril	CAPSULE	2.5-10MG, 5-10MG, 5-20MG, 10-20MG, 10-40MG
Atenolol	TABLET	25MG, 50MG, 100MG
Benazepril	TABLET	5MG, 10MG, 20MG, 40MG
Carvedilol	TABLET	3.125MG, 6.25MG, 12.5MG, 25MG
Clonidine	TABLET	0.1MG, 0.2MG, 0.3MG
Enalapril	TABLET	2.5MG, 5MG, 10MG, 20MG
Fosinopril	TABLET	10MG, 20MG, 40MG
Furosemide	TABLET	20MG, 40MG, 80MG
Guanfacine HCL	TABLET	1MG, 2MG
Hydrochlorothiazide	CAPSULE	12.5MG
Hydrochlorothiazide	TABLET	25MG, 50MG
Indapamide	TABLET	1.25MG, 2.5MG
Irbesartan	TABLET	75MG, 150MG, 300MG
Isosorbide Mononitrate	TABLET	10MG, 20MG
Lisinopril	TABLET	2.5MG, 5MG, 10MG, 20MG, 30MG, 40MG
Lisinopril-HCTZ	TABLET	10-12.5MG, 20-12.5MG, 20-25MG
Losartan Potassium	TABLET	25MG, 50MG, 100MG
Losartan-HCTZ	TABLET	50-12.5MG, 100-12.5MG, 100-25MG
Metoprolol Tartrate	TABLET	25MG, 50MG, 100MG
Metoprolol Succinate ER 24 hr	TABLET	25MG, 50MG, 100MG, 200MG
Minoxidil	TABLET	2.5MG, 10MG
Olmesartan	TABLET	5MG, 20MG, 40MG
Olmesartan-HCTZ	TABLET	20-12.5MG, 40-12.5MG, 40-25MG
Ramipril	TABLET	1.25MG, 2.5MG, 5MG, 10MG
Spironolactone	TABLET	25MG, 50MG, 100MG
Telmisartan	TABLET	20MG, 40MG, 80MG
Telmisartan-HCTZ	TABLET	40-12.5MG, 80-12.5MG, 80-25MG
Terazosin	CAPSULE	1MG, 2MG, 5MG, 10MG
Torsemide	TABLET	5MG, 10MG, 20MG, 100MG

Trandolapril	TABLET	1MG, 2MG, 4MG
Triamterene-HCTZ	TABLET	37.5-25MG, 75-50MG
Valsartan	TABLET	40MG, 80MG 160MG, 320MG
Valsartan-HCTZ	TABLET	80-12.5MG, 160-12.5MG, 160-25MG
Verapamil HCL ER	TABLET	120MG, 180MG, 240MG
ANTIHYPERLIPIDEMICS		
Atorvastatin	TABLET	10MG, 20MG, 40MG, 80MG
Lovastatin	TABLET	10MG, 20MG, 40MG
Pravastatin	TABLET	10MG, 20MG, 40MG, 80MG
Rosuvastatin	TABLET	5MG, 10MG, 20MG, 40MG
Simvastatin	TABLET	5MG, 10MG, 20MG, 40MG, 80MG
ANTIDIABETICS		
Glimepiride	TABLET	1MG, 2MG, 4MG
Glipizide	TABLET	5MG, 10MG
Glipizide ER 24hr	TABLET	2.5MG, 5MG, 10MG
Glyburide Micronized	TABLET	1.5MG, 3MG, 6MG
Glyburide	TABLET	1.25MG, 2.5MG, 5MG
Metformin	TABLET	500MG, 850MG, 1,000MG
Metformin ER 24 Hour (Glucophage XR)	TABLET	500MG, 750MG
Pioglitazone	TABLET	15MG, 30MG, 45MG
BIPHOSPHONATES		
Alendronate	TABLET	5MG, 10MG, 35MG*, 40MG, 70MG*
Ibandronate	TABLET	150MG
THYROID HORMONES		
Levothyroxine	TABLET	25MCG, 50MCG, 75MCG, 88MCG, 100MCG, 112MCG, 125MCG, 137MCG, 150MCG, 175MCG, 200MCG, 300MCG
GLAUCOMA AGENTS		
Latanoprost	DROPS	0.005%
Timolol	DROPS	0.25%, 0.5%
ANTICOAGULANT AND ANTIPLATELET AGENTS		
Aspirin	TABLET	81MG, 325MG
Clopidogrel	TABLET	75MG
BPH AGENTS		
Doxazosin	TABLET	1MG, 2MG, 4MG, 8MG
Tamsulosin	CAPSULE	0.4MG

Terazosin	CAPSULE	1MG,2MG, 5MG, 10MG
POTASSIUM AGENTS		
Potassium Chloride ER	TABLET	8MEQ, 10MEQ, 20MEQ
Potassium Chloride ER	CAPSULE	10MEQ
GOUT AGENTS		
Allopurinol	TABLET	100MG, 300MG
NSAIDS		
Ibuprofen	TABLET	600MG, 800MG
OTC MEDICATIONS		
Aspirin	TABLET	81MG, 325MG
Fish Oil Concentrate	CAPSULE	1000MG
Calcium+Vitamin D	TABLET	600-200MG
Multivitamin with or without Minerals	TABLET	THEREMS OR THEREMS-M
Vitamin D3	CAPSULE	400IU, 1000IU, 2000IU, 5000IU, 50000IU
Acetaminophen	TABLET	325MG, 500MG
Vitamin C	TABLET	250MG, 500MG, 1000MG

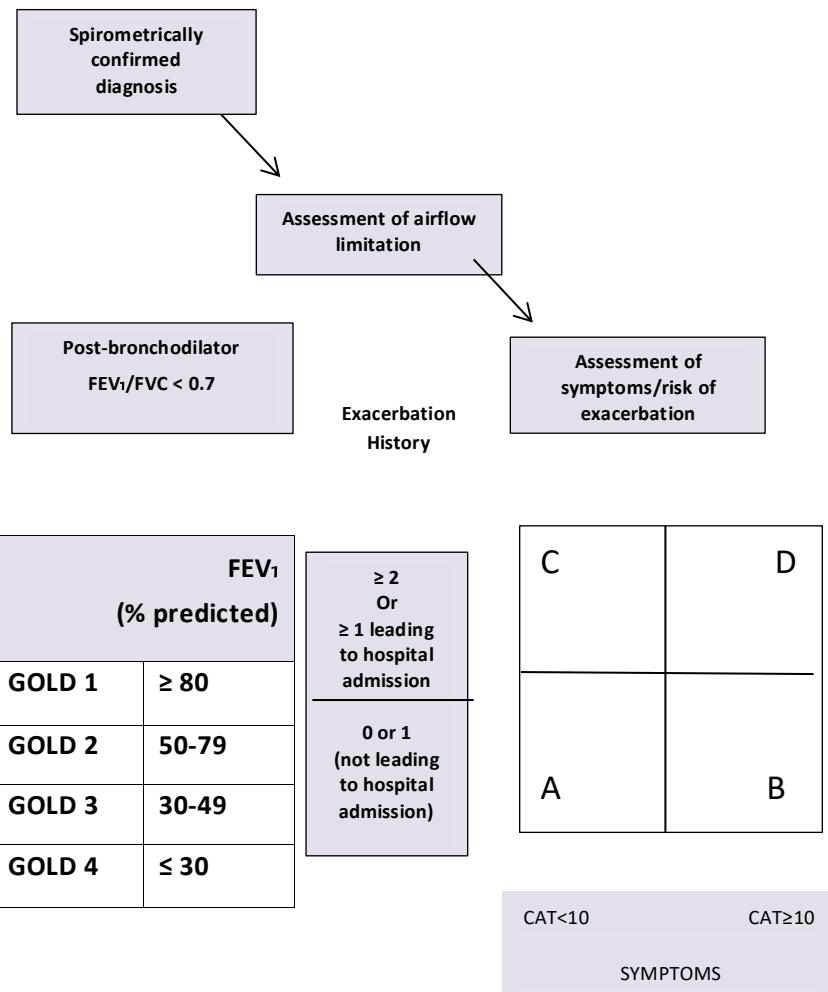
*Claim will pay for 12 tablets for an 84-day supply

GOLD COPD 2021 STRATEGY

CAT ASSESSMENT							
<p>For each item below, place a mark (X) in the box that best describes you currently. Be sure to only select one response for each question.</p>							
Example: I am very happy	1	2	3	4	5	I am very sad	SCORE
I never cough	1	2	3	4	5	I cough all the time	
I have no phlegm (mucus) in my chest at all	1	2	3	4	5	My chest is completely full of phlegm (mucus)	
My chest does not feel tight at all	1	2	3	4	5	My chest feels tight	
When I walk up a hill or one flight of stairs I am not breathless	1	2	3	4	5	When I walk up a hill or one flight of stairs I am very breathless	
I am not limited doing any activities at home	1	2	3		5	I am very limited doing activities at home	
I am confident leaving my home despite my lung condition	1	2	3	4	5	I am not confident leaving my home because of my lung condition	
I sleep soundly	1	2	3	4	5	I don't sleep soundly because of my lung condition	
I have lots of energy	1	2	3	4	5	I have no energy at all	
TOTAL SCORE							

<https://goldcopd.org/wp-content/uploads/2020/11/GOLD-REPORT-2021-v1.1-.pdf>

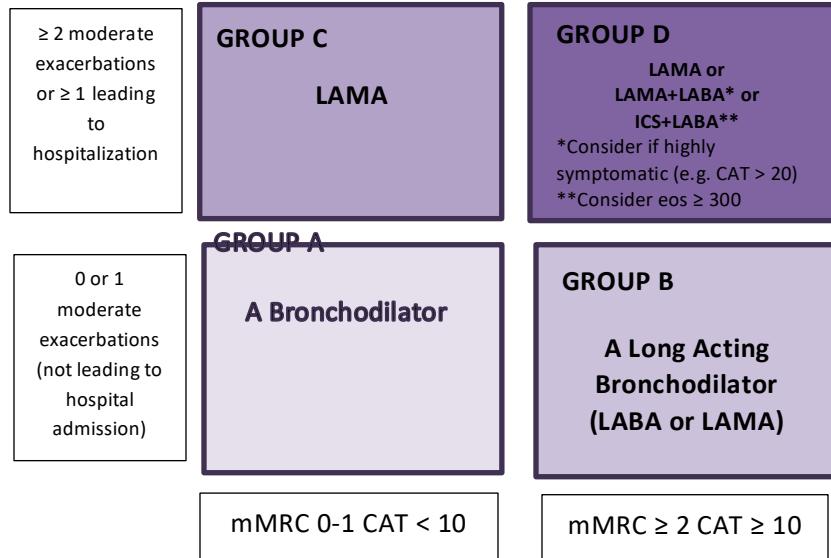
The refined ABCD assessment tool



<https://goldcopd.org/wp-content/uploads/2020/11/GOLD-REPORT-2021-v1.1-.pdf>

GOLD COPD 2021 STRATEGY

INITIAL PHARMACOLOGICAL TREATMENT

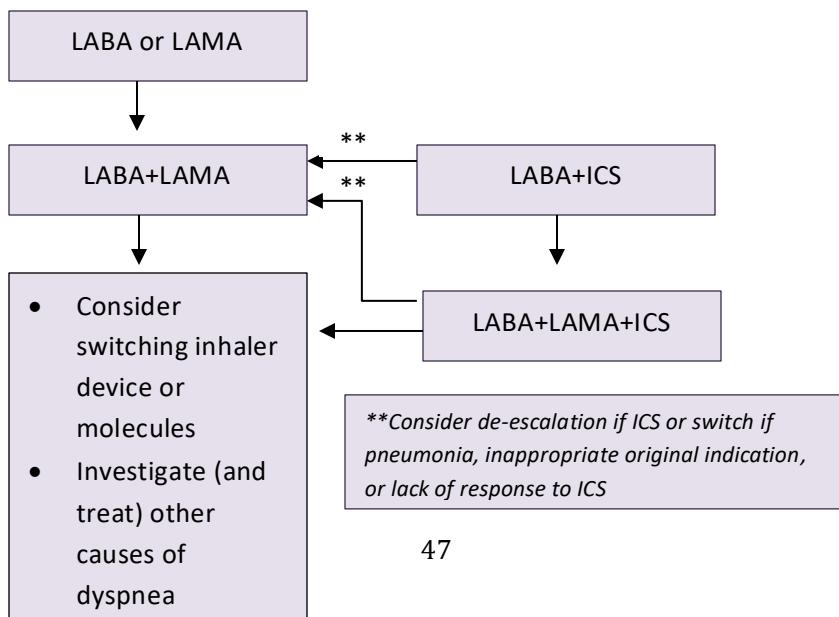


<https://goldcopd.org/wp-content/uploads/2020/11/GOLD-REPORT-2021-v1.1-.pdf>

FOLLOW-UP PHARMACOLOGICAL TREATMENT

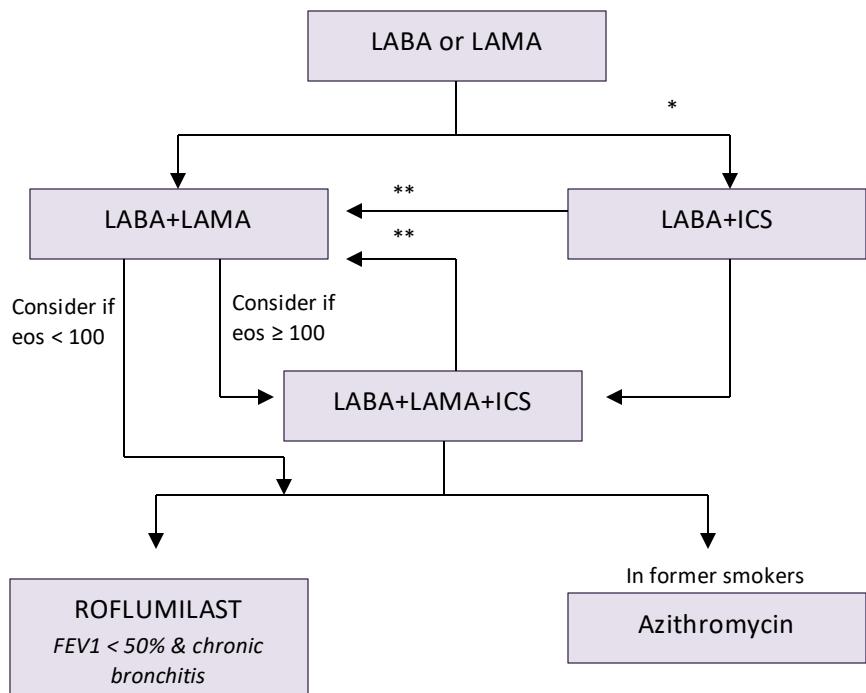
1. IF RESPONSE TO INITIAL TREATMENT IS APPROPRIATE, MAINTAIN IT.
2. IF NOT:
 - ✓ Consider the predominant treatable trait to target (dyspnea or exacerbations)
-Use exacerbations pathways if both exacerbations and dyspnea need to be targeted
 - ✓ Place patient in box corresponding to current treatment & follow indications
 - ✓ Assess response, adjust and review
 - ✓ These recommendations do not depend on the ABCD assessment at diagnosis

DYSPNEA



FOLLOW-UP PHARMACOLOGICAL TREATMENT

EXACERBATIONS



eos = blood eosinophil count (cells/ μ L)

*Consider if eos \geq 300 or eos \geq 100 and \geq 2 moderate exacerbations/1 hospitalization

**Consider de-escalation if ICS or switch if pneumonia, inappropriate original indication, or lack of response to ICS

LEGEND	
SABA	short acting bronchodilator
LABA	long acting bronchodilator
LAMA	long acting muscarinic antagonist
ICS	Inhaled corticosteroid
*	PA required

CHA FORMULARY MEDICATIONS	
SABA	Albuterol HFA, Levalbuterol HFA
LABA	Striverdi*
LAMA	Spiriva*, Incruse Ellipta*, Atrovent HFA*
ICS	QVAR Redihaler, Pulmicort Flexhaler, Flovent HFA*
LABA+LAMA COMBO	Bevespi Aerosphere, Stiolto Respimat*
LABA+ICS COMBO	Airduo, Symbicort*, Dulera*, Advair Diskus*

Initial pharmacological management

Rescue short-acting bronchodilators should be prescribed to all patients for immediate symptom relief.

GROUP A

- All Group A patients should be offered bronchodilator treatment based on its effect on breathlessness. This can be either a short- or a long-acting bronchodilator.
- This should be continued if benefit is documented.

Group B

- Initial therapy should consist of a long acting bronchodilator. Long-acting bronchodilators are superior to short-acting bronchodilators taken as needed i.e. *pro re nata* (prn) and are therefore recommended.
- There is no evidence to recommend one class of long-acting bronchodilators over another for initial relief of symptoms in this group of patients. In the individual patient, the choice should depend on the patient's perception of symptom relief.
- For patients with severe breathlessness initial therapy with two bronchodilators may be considered
- Group B patients are likely to have comorbidities that may add to their symptomology and impact the prognosis, and these possibilities should be investigated.

Group C

- Initial therapy should consist of a single long acting bronchodilator. In two head-to-head comparisons, the tested LAMA was superior to the LABA regarding exacerbation prevention therefore it is recommended starting with a LAMA in this group.

Group D

- In general, therapy can be started with a LAMA as it has effects on both breathlessness and exacerbations.
- For patients with more severe symptoms (order of magnitude of CAT \geq 20), especially driven by greater dyspnea and/or exercise limitation, LAMA/LABA may be chosen as initial treatment based on studies with patient reported outcomes as the primary endpoint where LABA/LAMA combinations showed superior results compared to the single substances. An advantage of LABA/LAMA over LAMA for exacerbation prevention has not been consistently demonstrated, so the decision to use LABA/LAMA as initial treatment should be guided by the level of symptoms.
- In some patients, initial therapy with LABA/ICS may be the first choice; this treatment has the greatest likelihood of reducing exacerbations in patients with blood eosinophil counts \geq 300/cells/ μ L. LABA/ICS may also be first choice in COPD patients with a history of asthma.
- ICS may cause side effects such as pneumonia, so should be used as initial therapy only after the possible clinical benefits versus risks have been considered.

CHA 2021 DIABETIC TREATMENT PLAN

*Adapted from the ADA

FIRST-LINE therapy is metformin and comprehensive lifestyle change (including weight management and physical activity)
If HbA1C above target proceed as below

↓

WITHOUT ESTABLISHED ASCVD OR CKD

↓

**COMPELLING NEED TO
MINIMIZE HYPOGLYCEMIA**

TZD

if HbA1C above target

DPP-4

if HbA1C above target

Continue with addition
of either:

SGLT2 or GLP-1 RA

if HbA1C above target

Consider addition of
later generation SU with
lower risk of
hypoglycemia or basal
insulin

SU TZD

if HbA1C above target

TZD SU

if HbA1C above target

Basal Insulin

Or

DPP-4

FIRST-LINE therapy is metformin and comprehensive lifestyle change (including weight management and physical activity)
If HbA1C above target proceed as below

ESTABLISHED ASCVD OR CKD

ASCVD PREDOMINATES

SGLT2 with proven CVD benefit
If eGFR adequate

If SGLT2 not tolerated or contraindicated or if eGFR less than adequate add GLP-1 RA with proven CVD benefit

if HbA1C above target

If further intensification is required or SGLT2/GLP-1 RA is intolerable choose agents demonstrating CV safety:

- DPP-4 (if not on GLP-1 RA)
- Basal Insulin
- TZD
- SU

HF OR CKD PREDOMINATES

SGLT2 with evidence of reducing HF and/or CKD progression if eGFR adequate

If SGLT2 not tolerated or contraindicated or if eGFR less than adequate add GLP-1 RA with proven CVD benefit

if HbA1C above target

- Avoid TZD in the setting of HF
- Choose agents demonstrating CV safety:

- DPP-4 (if not on GLP-1 RA)
- Basal Insulin

CHA

2021 DIABETES TREATMENT PLAN

*Adapted from the ADA

<https://care.diabetesjournals.org/content/44/Supplement>

FORMULARY OPTIONS	
BIGUANIDES	Metformin, Metformin XR
TZD	Pioglitazone
SU	Glimepiride, Glipizide, Glipizide ER, Glyburide, Glyburide Micronized
DPP-4	Alogliptin*, Tradjenta*
SGLT-2	Steglatro*, Segluromet*
GLP-1	Adlyxin*, Bydureon*
BASAL INSULIN	Semglee, Basaglar*, Lantus*, Levemir*
*PA REQUIRED	
Formulary Biguanides, TZD's, and SU's are part of CHA's Choice 90 Formulary and will pay at the point of sale for a 30 or 90-day supply.	

DIABETIC/RESPIRATORY SUPPLY POLICY

Supplies can be obtained at:
2909 Daggett Ave, Suite 225
541-883-2947

Office Hours: Monday-Friday 8:30am-4:30pm

Supplies Available:

- Meters
- Test Strips
- Lancets
- Syringes
- Pen Needles
- Sharps Containers
- Batteries
- Alcohol Swabs
- Syringe Magnifiers
- Masks
- Spacers
- Peak Flow Meters
- Nebulizers
- Compressors

A prescription is required for supplies, in accordance with
OHP guidelines

We will send your provider a copy of your glucometer
logbook, please bring your meter with you

PA criteria must be satisfied for insulin pens, pumps, and
CGM's

**We can also download your Medtronic and T-Slim insulin
pumps!**

Acamprosate	37	Alogliptin	16
Acarbose	16	Altace	11
Accolate	35	Altavera.....	39
AccuNeb	33	Alyacen.....	39
Acetaminophen	31	Amantadine.....	27, 28
Acetazolamide.....	19	Amaryl.....	15
Actigall	24	Amerge.....	33
Activella.....	38	Amiloride.....	10, 41
Actos	15	Amiodarone	10
Acular	19	Amlodipine	41
Acyclovir	26	Amlodipine-Benazepril	12, 41
Aczone.....	25	Amoxicillin	24
Adalimumab	33	Amoxicillin-Clavulanic Acid	24
Adderall	36	Amoxil	24
Adderall XR.....	36	Amphetamine- Dextroamphetamine	36
Ademelog	16	Amphetamine- Dextroamphetamine ER	36
Adlyxin	16	Ampicillin	24
Adoxa	25	Ansaid	31
Adrenaclick.....	35	Antivert	22
Advair Diskus	34	Apidra.....	16
Advil	31	Apixaban	12
Afrin	20	Apresoline	11
Aimovig	33	Apri.....	38
Airduo Resplicclick	34	Aranelle	39
Ajovy	33	Arava	33
Albendazole.....	14	Aricept.....	29
Albenza	14	Arixtra	12
Albuterol HFA	33	Artane	29
Albuterol Nebulizer Solution	33		
Aldactone	10		
Aldara.....	14		
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Allopurinol.....	33		

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Ascorbic Acid	30	Benzonataate	21
Aspirin	12, 31	Benztropine	28
Atarax.....	21	Betagan	19
Atenolol.....	11, 41	Betamethasone ..	14, 15
Atorvastatin.....	12, 42	Betapace	11
Atropine	19, 22	Betaxolol	19
Atrovent HFA.....	34	Bethanechol	37
Augmentin.....	24	Betoptic	19
Avapro.....	11	Bevespi Aerosphere	.34
Aviane-28	39	Biaxin.....	25
Avonex	29	Bimatoprost	19
Aygestin.....	38	Bisacodyl	23
Azathioprine	28	Bismuth Subsalicylate	
Azithromycin	25	22
Azulfidine	23	Bleph-10.....	19
Azurette	38	Boniva	18
Baciguent	13	Budesonide	34
Bacitracin	13	Budesonide-Formoterol	
Bacitracin/Polymyxin	13	34
Bacitracin-Polymyxin	18	Bufferin	31
Baclofen	33	Bumetanide.....	10
Bactrim.....	26	Bumex	10
Bactroban.....	13	Buprenorphine-	
Balsalazide.....	23	Naloxone	37
Baqsimi.....	17	Bupropion	35
Basaglar.....	17	Butalbital-	
Beclomethasone.....	34	Acetaminophen	
Beopen VK.....	24	Caffeine	33
Benadryl	21	Butalbital-Aspirin-	
Benazepril	11, 41	Caffeine	33
Benemid	33	Bydureon.....	16
Benicar	11	Calan	12
Benicar-HCT.....	11	Calan SR.....	12

Calcitriol	30	Cefzil.....	24
Calcium Acetate	31	Celebrex	31
Calcium Carbonate ...	30	Celecoxib	31
Calcium+Vitamin D ...	30	Cellcept	28
Camila	39	Cephalexin.....	24
Campral.....	37	Cetirizine	21
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Capsaicin	15	CHA 2019 DIABETIC TREATMENT PLAN	52
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Carbamazepine	28	Chlorthalidone.....	10
Carbamoxide	20	CHOICE 90 FORMULARY	41
Carbidopa-Levodopa	28	Cholecalciferol.....	30
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Cartrol	19	Citracal	30
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Caziant	38	Claritin.....	21
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Cefadroxil	24	Clindamycin	26
Cefdinir.....	24	Clinoril	32
Cefixime	24	Clobetasol	15
Cefpodoxime	24	Clonazepam.....	28
Cefprozil	24		
Ceftin.....	24		
Cefuroxime	24		

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Clopidogrel	12	Cyclopentolate	19
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Codeine- Acetaminophen	32	Cytotec	22, 38
Cogentin	28	Cytra-K	37
Colace.....	23	Dapsone	25
Colazal.....	23	Debrox.....	20
Colchicine	33	Decadron.....	17
Colcrys.....	33	Delta D3	30
Colestid	13	Demadex	10
Colestipol	13	Denta 5000 Plus	29
Compazine	22	Dentagel.....	29
Concerta.....	36	Depo-Testosterone...	18
Condyllox	14	Depro-Provera.....	40
Copegus.....	27	Desmopressin.....	20
Coradarone	10	Desogestrel-Ethinyl Estradiol	38
Coreg	11	Dexamethasone .17, 19, 20	
Corgard	11	Dexmethylphenidate	36
Cortef	17	Dexmethylphenidate ER	36
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Crestor	13	Dicloxacillin	24
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Cryselle.....	39	Diflucan	26
Cutivate.....	14	Digoxin	10
Cyanocobalamin.....	30		
Cyclafem.....	39		
Cyclobenzaprine	33		

Dilantin.....	28	Elimite	14
Dilantin Infatabs	28	Elinest.....	39
Dilaudid	32	Eliquis.....	12
Diltiazem	12	Ella.....	38
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Dimethyl Fumarate...	29	Emla	15
Diovan	12	Emoquette	38
Diovan-HCT	12	Enalapril	11, 41
Diphenhydramine.....	21	Enbrel.....	33
Diprosone.....	15	Endocet	32
Disopyramide Phosphate	10	Enoxaparin	12
Ditropan	37	Enpresse	39
Ditropan XL.....	37	Epclusa	27
Docusate	23	Epinephrine	35
Donepezil	29	Epipen	35
Dorzolamide	19	Epivir HBV.....	26
Doxazosin	11, 37	Erenumab Injection ..	33
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Doxycycline Monohydrate	25	Ertugliflozin	16
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Duricef.....	24	Estrace Vaginal	38
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Estring	38	Flexeril.....	33
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Ethosuximide.....	28	Florinef	17
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Estradiol	39	Flu Vaccine	37
Etodolac	31	Fluconazole	26
Etonogestrel-Ethinyl		Fludrocortisone	17
Estradiol	39	Flulaval	37
Evista.....	18	Flunisolide	21
Evoxac	20	Fluoritab.....	29
Exenatide	16	Fluorometholone	19
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Famotidine Suspension		Fluvirin	37
.....	22	Fluzone.....	37
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Ferrous Sulfate	30	Fosamax	18
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Fiorinal	33	Furosemide	10, 41
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Garamycin	13	Gris-Peg	26
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Gavilyte-G	23	Pseudoephedrine .	21
Gavilyte-N	23	Guanfacine	11, 41
Gemfibrozil	13	Gyne-Lotrimin	26
Genoptic	18	Halfprin	12
Genotropin	18	Heather	39
Gentak	18	Humalog	16
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Gianvi	39	Humira	33
Gildess	39	Humulin 70:30	17
Gildess Fe	39	Humulin N	17
Gilenya	29	Humulin R U-500	16
Glatiramer	29	Humulin-R	16
Glatopa	29	Hycet	32
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Pibrentasvir	27	Hydrochlorothiazide	10,
Glimepiride	15, 42	41	
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Arabic Number	Roman Numeral
½	ss
1	I or i
5	V or v
10	X or x
50	L or l
100	C or c
500	D or d
1000	M or m
Apothecary Weight And Volume	
Weight	Volume
1 grain (gr) = 65 mg	1 fluid dram (fl. dr) = 3.75 mL
60 grains (gr) = 1 dram (dr)	8 fluid drams (fl. dr) = 1 fluid ounce (fl. oz)
8 drams (dr) = 1 ounce (oz)	16 fluid oz (fl. oz) = 1 pint (pt)
12 ounces = 1 pound (lb)	2 pints (pt) = 1 quart (qt)
	4 quarts (qt) = 1 gallon (gal)
Metric Weight And Volume	
Weight	Volume
1 kilogram (kg) = 1000 grams (g)	1 liter (L) = 1000 milliliters (mL) or cc
1 gram (g) = 1000 milligram (mg)	1 deciliter (dL) = 100 milliliters (ml) or cc
1 milligram (mg) = 1000 microgram (mcg)	1 deciliter (dL) = 0.1 liter (L)
1 milligram (mg) = 0.001 grams (g)	
1 microgram (mcg) = 0.001 milligram (mg)	

Common Household Measurements			
1 tablespoon (tbsp) = 3 teaspoons (tsp)			
1 pint (pt) = 16 fluid oz (fl oz)			
2 tablespoon (tbsp) = 1 ounce (oz)			
1 cup (c) = 8 ounce (oz)			
1 pint (pt) = 2 cups (c)			
1 quart (qt) = 4 cups (c) = 2 pints (pt)			
Commonly Used Conversions Between Measurement Systems			
20 drops = 1 mL	1 grain = 65 mg		
1 oz = 30 mL	5 grain = 325 mg		
1 tbsp = 15 mL	1 lb = 0.454 kg		
1 tsp = 5 mL or cc	1 kg = 2.2 lb		
1 pt = 480 mL	1 oz = 28.35 g		
1 qt = 960 mL	1 cc = 1 mL		
1 gal = 3840 mL = 3.84 L			
Commonly Used Sig Codes			
q	every	qh	every hour
qam	every morning	qpm	every evening
qhs	nightly at bedtime	qd	everyday
qod	every other day	qwk	every week
qmo	every month	bid	twice daily
tid	three times daily	qid	four times daily
c	with	ac	before a meal
pc	after a meal	hs	at bedtime
prn	as needed	ud	as directed
qs	quantity sufficient	gtt	drop
od	right eye	os	left eye
ou	both eyes	ad	right ear
as	left ear	au	both ears
po	by mouth	sl	sublingual
pr	rectally	pv	vaginally
im	intramuscular	sq	subcutaneous

NORMAL CHOLESTEROL VALUES

Test (mg/dL)	Preferred	Boderline	Poor	Very Poor
Total Cholesterol	Below 200	200-239	Above 240	
HDL	Above 60	50-59	Below 40	
LDL	100-129	130-159	160-189	Above 190
Triglycerides	Below 150	150-199	200-499	Above 500

NORMAL DIABETES VALUES

Diabetes Test*	ADA Goal for	
	Diagnosis of Diabetes	Increased risk [Prediabetes]/IFG
HbA1c Using a method certified by NGSP and standardized to the DCCT assay. or	≥6.5%	5.7-6.4%
Fasting Plasma Glucose Fasting is defined as no caloric intake for at least 8 hours. or	≥126 mg/dL (7.0 mmol/L)	100-125 mg/dL (6.9 mmol/L)
2 Hour Plasma Glucose [OGTT] The test should be performed as described by the WHO, using a glucose load containing the equivalent of 75 g anhydrous glucose dissolved in water.	≥200 mg/dL (11.1 mmol/L)	140-199 mg/dL (7.8-11.0 mmol/L)

NORMAL CBC VALUES

<u>Parameter</u>	<u>Range of Normal Values</u>
RBC (millions of cells/cu mm)	2.5 - 4.5
PCV (packed cell volume)	35% - 55%
polychromasia	slt (slight)
anisocytosis	slt (slight)
WBC (cells/cu mm)	5000 - 15000
het (heterophils)	40 - 75%
lymphs (lymphocytes)	20 - 50%
baso (basophils)	0 - 5%
eos (eosinophils)	0 - 2%
monos (monocytes)	0 - 3%
buffy coat	1% or less
COMMENTS	none
Thrombocytes	present
Plasma color	clear or pale yellow
T.P. (total protein) gm/dl	2.5 - 5.5
parasites	none