

# Quick Reference Formulary - MercyCare Select 4-Tier Commercial Formulary

This document is subject to change. The most updated version of this document, as well as a complete formulary listing, are available at [www.navitus.com](http://www.navitus.com) or upon request. Drugs will be filled as generics when acceptable generic equivalents are available. This document is copyrighted by Navitus Health Solutions® and may be reprinted for personal use only. Reproduction of this document for any other reason is expressly prohibited, unless prior written consent is obtained from Navitus.

## Reading the Drug List

Generic drugs are listed in all lower case letters. Brand name drugs are listed in all upper case letters. Each drug product is assigned a coverage tier, shown to the right of each drug product.

		Relative Cost to Member
Tier 1	Formulary generics and some lower cost brand products	\$
Tier 2	Formulary, brand products	\$\$
Tier 3	Non-preferred formulary products	\$\$\$

Cases where drug products are followed by parentheses indicate that the entry relates to a certain dosage form, e.g. ESTRACE (vaginal cream) or more than one form of the drug, e.g. ZOMIG (ZMT). Quantity limits are for prescriptions filled at retail pharmacies. Please consult the complete version of the formulary for mail order quantity limits.

All newly approved drugs on the market will initially NOT be covered, pending further review by the Navitus P&T Committee.

A complete version of the Navitus Formulary, as well as information on prior authorization and clinical programs, are available at [www.navitus.com](http://www.navitus.com)

### ADHD/ ANTI-NARCOLEPSY/ ANTI-OBESITY/ ANOREXIANTS

amphetamine/		1
dextroamphetamine tab		
dexamethylphenidate tab		1
guanfacine ER tab		1
methylphenidate tab		1
methylphenidate ER cap		2
VYVANSE CAP		2
ADDERALL XR CAP	NC	

### AMINOGLYCOSIDES

TOBI PODHALER	NC	
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### ANALGESICS - ANTI-INFLAMMATORY

celecoxib cap	QL	1
diclofenac sodium EC tab		1
diclofenac sodium XR tab		1
ibuprofen tab		1
ketorolac tab	QL	1
meloxicam tab		1
nabumetone tab		1
sulindac tab		1
piroxicam cap		2
diclofenac/ misoprostol DR		3
tab		

### ANALGESICS - OPIOID

acetaminophen/ codeine		1
tab		
hydrocodone/		1
acetaminophen tab		
morphine sulfate ER tab		1
oxycodone/		1
acetaminophen tab		
tramadol tab		1
fentanyl patch 100mcg	QL	2
KADIAN CAP	QL	3

### ANTI-ANXIETY AGENTS

alprazolam tab		1
bupirone tab		1
hydroxyzine tab		1
lorazepam tab		1

### ANTIARRHYTHMICS

MULTAQ TAB		2
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### ANTI-ASTHMATIC AND BRONCHODILATOR AGENTS

albuterol/ ipratropium neb		1
soln		
ARNUITY ELLIPTA		1
INHALER		
ASMANEX HFA INHALER	QL	1
ASMANEX INHALER	QL	1
budesonide inh susp		1
FLOVENT DISKUS	QL	1
INHALER		
ipratropium neb soln		1
montelukast chew tab		1
montelukast tab		1
ADVAIR HFA INHALER	QL	2

ANORO ELLIPTA		2
INHALER		
COMBIVENT INHALER	QL	2
COMBIVENT RESPIMAT	QL	2
INHALER		
DULERA INHALER	QL	2
INCRUSE ELLIPTA		2
INHALER		
VENTOLIN HFA INHALER	QL	2
PULMICORT FLEXHALER	NC	
QVAR INHALER	NC	
TUDORZA PRESSAIR	NC	
INHALER		

### ANTICOAGULANTS

warfarin tab		1
PRADAXA CAP		3

### ANTICONVULSANTS

carbamazepine tab		1
clonazepam tab		1
divalproex sodium DR tab		1
gabapentin cap	QL	1
lamotrigine tab		1
levetiracetam tab		1
phenytoin cap		1
topiramate tab		1
carbamazepine ER tab		2
lamotrigine ER tab		3

### ANTIDEPRESSANTS

fluoxetine cap		\$0
amitriptyline tab		1
bupropion ER tab		1
bupropion XL tab		1
citalopram soln		1
citalopram tab		1
duloxetine EC cap		1
escitalopram tab		1
mirtazapine tab		1
nortriptyline cap		1
paroxetine tab		1
sertraline conc		1
sertraline tab		1
trazodone tab		1
venlafaxine ER cap		1
venlafaxine tab		1
NEFAZODONE TAB	QL	2
nefazodone tab 50mg,	QL	2
250mg		
venlafaxine ER tab	NC	

### ANTIDIABETICS

glipizide ER tab		1
glipizide tab		1
glyburide tab		1
metformin tab		1
pioglitazone tab		1
AVANDAMET TAB		2
BYDUREON PEN INJ	QL	2
FARXIGA TAB	QL	2
JANUMET TAB	QL	2
JANUMET XR TAB	QL	2
JANUVIA TAB	QL	2
LEVEMIR FLEXTOUCH		2
INJ		

LEVEMIR INJ		2
NOVOLIN 70/ 30 INJ	OTC	2
NOVOLIN N INJ	OTC	2
NOVOLIN R INJ	OTC	2
SEMGLEE INJ, INSULIN		2
GLARGINE-YFGN INJ		
SEMGLEE PEN, INSULIN		2
GLARGINE-YFGN PEN		
TOUJEO MAX		2
SOLOSTAR INJ		
TOUJEO SOLOSTAR INJ		2
TRESIBA FLEXTOUCH		2
INJ		
VICTOZA INJ	QL	2
AVANDIA TAB		
ADMELOG INJ, INSULIN		NC
LISPRO INJ		
BASAGLAR INJ, LANTUS		NC
SOLOSTAR INJ, INSULIN		
GLARGINE SOLOSTAR		
INJ		
HUMULIN N INJ	OTC	NC
HUMULIN R INJ	OTC	NC
KOMBIGLYZE XR TAB		NC
LANTUS INJ, INSULIN		NC
GLARGINE INJ		
ONGLYZA TAB		NC
pioglitazone/ metformin		NC
tab		

### ANTIEMETICS

ondansetron tab		1
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### ANTIFUNGALS

fluconazole susp		1
fluconazole tab		1
ketoconazole tab		1
nystatin tab		1
terbinafine tab		1
griseofulvin micro tab		2
griseofulvin susp		2
itraconazole cap		2
voriconazole tab	MSP, RS	S

### ANTI-HISTAMINES

cetirizine tab	OTC	1
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### ANTI-HYPERLIPIDEMICS

cholestyramine powder		1
gemfibrozil tab		1
fluvastatin cap		2
TRILIPIX CAP		NC

### ANTI-HYPERTENSIVES

amlodipine/ benazepril cap		1
benazepril tab		1
bisoprolol/		1
hydrochlorothiazide tab		
candesartan tab		1
doxazosin tab		1
enalapril tab		1
enalapril/		1
hydrochlorothiazide tab		
irbesartan tab		1
irbesartan/		1
hydrochlorothiazide tab		

lisinopril tab		1
lisinopril/		1
hydrochlorothiazide tab		
losartan tab		1
losartan/		1
hydrochlorothiazide tab		
terazosin cap		1
valsartan tab		1
valsartan/		1
hydrochlorothiazide tab		
amlodipine/ valsartan tab		2
benazepril/		2
hydrochlorothiazide tab		
metoprolol/		2
hydrochlorothiazide tab		
candesartan/		NC
hydrochlorothiazide tab		
phenoxybenzamine cap	MSP, PA	S

### ANTI-INFECTIVE AGENTS - MISC.

clindamycin cap		1
erythromycin/ sulfisoxazole		1
susp		
metronidazole tab		1
nitrofurantoin monohydrate		1
cap		
smz/ tmp (DS) tab		1
metronidazole cap		NC

### ANTIMALARIALS

hydroxychloroquine tab		1
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### ANTIMYCOBACTERIAL AGENTS

rifampin cap		2
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### ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES

anastrozole tab		\$0
tamoxifen tab		\$0
letrozole tab		1
methotrexate tab		1
bexarotene cap	MSP, PA, SF	S
BOSULIF TAB	MSP, PA, SF	S
ERIVEDGE CAP	LD, PA, SF	S

### ANTI-PARKINSON AGENTS

amantadine cap		1
carbidopa/ levodopa tab		1
ropinirole tab		1
selegiline cap		1
pramipexole ER tab		3
ropinirole ER tab		3

### ANTI-PSYCHOTICS/ ANTI-MANIC AGENTS

aripiprazole tab		1
lithium carbonate cap		1
lithium carbonate tab		1
olanzapine tab		1
quetiapine tab		1
risperidone tab		1
ziprasidone cap		1
clozapine tab		2
olanzapine ODT		2

NC Not Covered

NC/3P Not Covered, Third Party Reviewer

EXC Plan Exclusion

M Medical Benefit

PA Prior Authorization

SF Limited to two 15 day fills per month for first 3 months

VAC Vaccine Program

generic =small letters

INF Infertility

MSP Mandatory Specialty Pharmacy Program

QL Quantity Limit

SMKG Smoking Cessation

BRANDS =CAPITAL LETTERS

LD Limited Distribution

OTC Over-the-Counter

RS Restricted to Specialist

SP Available through Specialty Pharmacy Program

Last Updated 7/1/2022

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## ANTIVIRALS

acyclovir cap	1
acyclovir susp	1
nevirapine tab	1
valacyclovir tab	1
RELENZA DISKHALER	QL
zidovudine cap	2
entecavir tab	MSP, PA
FUZEON INJ	MSP
PEG-INTRON INJ	MSP
PEGASYS INJ	MSP

## ASSORTED CLASSES

azathioprine tab	1
mycophenolate mofetil tab	1
cyclosporine cap	MSP

## BETA BLOCKERS

atenolol tab	1
carvedilol tab	1
labetalol tab	1
metoprolol ER tab	1
metoprolol tab	1
propranolol tab	1
nadolol tab	2

## CALCIUM CHANNEL BLOCKERS

amlodipine tab	1
diltiazem ER cap	1
diltiazem tab	1
felodipine ER tab	1
nifedipine cap	1
nifedipine ER tab	1
verapamil SR tab	1
diltiazem ER tab	2
nisoldipine ER tab	3

## CEPHALOSPORINS

cefadroxil cap	1
cefdinir cap	1
cefdinir susp	1
cefprozil susp	1
cefprozil tab	1
cefuroxime susp	1
cephalexin cap	1
cefactor cap	3
cefepodoxime proxetil tab	3

## CONTRACEPTIVES

tri-sprintec tab	\$0
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## CORTICOSTEROIDS

prednisolone soln	1
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## COUGH/ COLD/ ALLERGY

guaifenesin/ codeine syrup	OTC, QL
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## DERMATOLOGICALS

clindamycin gel	1
clotrimazole/ betamethasone cream	1
erythromycin gel	1
imiquimod cream	1
ketoconazole cream	1
lidocaine/ prilocaine cream	1
metronidazole cream	1
mupirocin oint	1
nystatin cream	1
nystatin/ triamcinolone oint	1
tacrolimus oint	1
calcipotriene cream	PA, QL
clindamycin/ benzoyl peroxide gel	2
pimecrolimus cream	QL
tretinoin cream	PA, QL
tretinoin gel	PA, QL
lidocaine patch	QL
TAZORAC CREAM 0.05%	PA, QL
adapalene cream	NC
adapalene gel	NC
AZELEX CREAM	NC

ELIDEL CREAM	NC
mupirocin cream	NC
tretinoin microsphere gel	NC
ZOVIRAX OINT	NC
amnesteem cap, claravis cap, isotretinoin cap, myorisan cap, zenatane cap	S

## DIAGNOSTIC PRODUCTS

ACCU-CHEK AVIVA PLUS OTC	2
TEST STRIP	
ACCU-CHEK	OTC
SMARTVIEW TEST STRIP	
ACCU-CHEK TEST STRIP OTC	2
FREESTYLE LITE TEST STRIP	OTC
FREESTYLE TEST STRIP OTC	2
PRECISION XTRA TEST STRIP	OTC
TEST STRIP (all other test strips)	NC

## DIURETICS

amiloride/ hydrochlorothiazide tab	1
furosemide tab	1
hydrochlorothiazide tab	1
spironolactone tab	1
triamterene/ hydrochlorothiazide cap	1
triamterene/ hydrochlorothiazide tab	1
acetazolamide ER cap	2
THALITONE TAB	NC

## ENDOCRINE AND METABOLIC AGENTS - MISC.

raloxifene tab	\$0
alendronate tab	1
ibandronate tab 150mg	QL
FORTICAL NASAL SPRAY	2

## ESTROGENS

estradiol patch	1
estradiol tab	1
estradiol/ norethindrone tab	1
PREMARIN TAB	2
PREMPHASE TAB, PREMPRO TAB	2

## FLUOROQUINOLONES

ciprofloxacin tab	1
levofloxacin tab	1
ofloxacin tab	1
moxifloxacin tab	2

## GENITOURINARY AGENTS - MISCELLANEOUS

alfuzosin SR tab	1
finasteride tab	1
tamsulosin cap	1

## GOUT AGENTS

allopurinol tab	1
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## HEMATOLOGICAL AGENTS - MISC.

clopidogrel tab 75mg	1
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## HYPNOTICS/ SEDATIVES/ SLEEP DISORDER AGENTS

phenobarbital tab	1
temazepam cap 15mg	1
temazepam cap 30mg	1
zaleplon cap	1
ROZEREM TAB	NC

## MACROLIDES

azithromycin susp	1
azithromycin tab	1

clarithromycin tab	1
DIFICID TAB	MSP, PA, QL

## MEDICAL DEVICES AND SUPPLIES

ACCU-CHEK AVIVA PLUS OTC	\$0
METER	
FREESTYLE FREEDOM	OTC
LITE METER	
PRECISION XTRA	OTC
METER	
B-D INSULIN SYRINGE	OTC
B-D PEN NEEDLE	OTC
NOVOFINE PEN NEEDLE	OTC
NOVOTWIST PEN NEEDLE	OTC

## MIGRAINE PRODUCTS

rizatriptan ODT	QL
rizatriptan tab	QL
sumatriptan tab	QL
naratriptan tab	QL
sumatriptan inj	QL
sumatriptan vial inj	QL
zolmitriptan ODT	QL
zolmitriptan tab	QL
almotriptan tab	PA, QL
acetaminophen/ isometheptene/ dichloral cap	NC

## MOUTH/ THROAT/ DENTAL AGENTS

clotrimazole troches	1
nystatin susp	1

## MULTIVITAMINS

PRENATAL VITAMINS (PRENATAL PLUS, PREPLUS, PRENAPLUS)	1
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## NASAL AGENTS - SYSTEMIC AND TOPICAL

budesonide nasal spray	OTC
fluticasone nasal spray	QL
flunisolide nasal spray	QL

## OPHTHALMIC AGENTS

azelastine ophth soln	QL
bacitracin/ polymyxin b ophth oint	QL
ciprofloxacin ophth soln	QL
gentamicin ophth soln	QL
ketotifen ophth soln	OTC, QL
latanoprost ophth soln	QL
levofloxacin ophth soln	QL
timolol maleate ophth soln	QL
tobramycin ophth soln	QL
tobramycin/ dexamethasone ophth soln	QL
ALPHAGAN P OPHTH	QL
SOLN 0.1%	
BETIMOL OPHTH SOLN	QL
LUMIGAN OPHTH SOLN	QL
PROLENSA OPHTH	QL
SOLN	
TOBRADEX OPHTH OINT	QL

## OTIC AGENTS

acetic acid otic soln	QL
neomycin/ polymyxin/ hydrocortisone otic susp	QL
ofloxacin otic soln	QL
CIPRO HC OTIC SUSP	QL

## PENICILLINS

amoxicillin cap	1
amoxicillin/ clavulanate tab	1
penicillin vk tab	1
amoxicillin/ clavulanate ER tab	3

## PSYCHOTHERAPEUTIC AND NEUROLOGICAL AGENTS - MISC.

bupropion SR tab	QL, SMKG	\$0
CHANTIX PAK	QL, SMKG	\$0
CHANTIX TAB	QL, SMKG	\$0
nicotine gum	OTC, QL, SMKG	\$0
nicotine lozenge	OTC, QL, SMKG	\$0
nicotine patch	OTC, QL, SMKG	\$0
NICOTROL INHALER	QL, SMKG	\$0
NICOTROL NASAL SPRAY	QL, SMKG	\$0

donepezil ODT	QL	1
donepezil tab	QL	1
galantamine tab		1
memantine tab		1
rivastigmine cap		1
galantamine ER cap		2
NAMENDA XR		2

## TETRACYCLINES

doxycycline hyclate cap	1
minocycline cap	1

## THYROID AGENTS

liothyronine tab	1
methimazole tab	1
SYNTHROID TAB	1
THYROLAR TAB	2

## ULCER DRUGS

cimetidine tab	OTC	1
famotidine tab	OTC	1
pantoprazole EC tab		1
famotidine susp		2
rabeprazole EC tab		2

## ULCER DRUGS/ ANTISPASMODICS/ ANTICHOLINERGICS

DEXILANT DR CAP	NC
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## URINARY ANTISPASMODICS

oxybutynin ER tab	1
oxybutynin tab	1
tolterodine tab	1
tolterodine SR cap	QL

## VAGINAL PRODUCTS

PREMARIN VAGINAL CREAM	2
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NC Not Covered      generic =small letters      BRANDS =CAPITAL LETTERS  
 NC/3P Not Covered, Third Party Reviewer  
 EXC Plan Exclusion      INF Infertility      LD Limited Distribution  
 M Medical Benefit      MSP Mandatory Specialty Pharmacy Program      OTC Over-the-Counter  
 PA Prior Authorization      QL Quantity Limit      RS Restricted to Specialist  
 SF Limited to two 15 day fills per month for first 3 months      SMKG Smoking Cessation      SP Available through Specialty Pharmacy Program  
 VAC Vaccine Program