

2010 EMPIRE PLAN PREFERRED DRUG LIST

Administered by UnitedHealthcare

The following is a list of the most commonly prescribed generic and brand-name drugs included on the 2010 Empire Plan Preferred Drug List. **This is not a complete list of all prescription drugs on the preferred drug list or covered under the Empire Plan.** This list is subject to change due to FDA approval of new brand and generic drugs and product availability. For specific questions about your prescriptions, coverage and copayments, please call The Empire Plan toll free at 1-877-7-NYSHIP (1-877-769-7447) and select The Empire Plan Prescription Drug Program.

For the enrollee: Enrollees are encouraged to ask their doctors to prescribe generic versions of brand-name drugs whenever appropriate, as this will result in a lower copayment. Generic medications contain the same active ingredients as their corresponding brand-name medications, although they may look different in color or shape. They have been FDA-approved under strict standards.

For the physician: Please prescribe generic and preferred products when medically appropriate for your patients.

CARDIOVASCULAR

Antiarrhythmics

amiodarone
disopyramide
mexiletine
quinidine gluconate
quinidine sulfate
sotalol

Blood Modifiers

ticlopidine
warfarin
Arixtra
Lovenox
Plavix

Blood Pressure Lowering

amlodipine (generic Norvasc)
amlodipine and benazepril (generic Lotrel)
atenolol
atenolol with chlorthalidone
benazepril
benazepril with hydrochlorothiazide
bisoprolol with hydrochlorothiazide
captopril
captopril with hydrochlorothiazide
clonidine
clonidine patch (generic Catapres-TTS)
diltiazem (all formulations)
enalapril
enalapril with hydrochlorothiazide
felodipine (generic Plendil)
fosinopril
fosinopril with hydrochlorothiazide

furosemide
guanfacine
hydrochlorothiazide
indapamide
isradipine
labetalol
lisinopril
lisinopril with hydrochlorothiazide
losartan (generic Cozaar)
losartan with hydrochlorothiazide (generic Hyzaar)
metoprolol
metoprolol succinate sustained release (generic Toprol XL)
moexipril
nadolol
nadolol with bendroflumethiazide
nifedipine (all formulations)
perindopril (generic Aceon)
prazosin
propranolol sustained action capsule
propranolol tablet
quinapril
quinapril with hydrochlorothiazide
ramipril
spironolactone
spironolactone with hydrochlorothiazide
torsemide
trandolapril
triamterene with hydrochlorothiazide
verapamil
verapamil sustained release
Atacand
Atacand HCT

Azor
Benicar
Benicar HCT
Bystolic
Cardizem LA (g)*
Innopran XL
Micardis
Micardis HCT
Sular (g)*

Cholesterol Lowering

cholestyramine
colestipol
fenofibrate
gemfibrozil
lovastatin
pravastatin (generic Pravachol)
simvastatin (generic Zocor)
Advicor
Altoprev
Antara
Crestor
Fenoglide
Lipitor
Lipofen
Lofibra Tablet
Niaspan
Simcor
Tricor
Triglide
Vytorin
Welchol

Heart Failure

carvedilol (generic Coreg)
digoxin
BiDil

Nitrates/Other Angina

isosorbide
Nitrostat
Ranexa

Pulmonary Artery Hypertension Agents

Revatio (PA)
Tracleer (PA)
Ventavis (PA)

CENTRAL NERVOUS SYSTEM

Alzheimer's Disease

galantamine (generic Razadyne)
galantamine extended release (generic Razadyne ER)
Aricept*, Aricept ODT*
Namenda

Multiple Sclerosis

Avonex (PA)
Betaseron (PA)
Copaxone (PA)
Rebif (PA)

Nausea/Vomiting

granisetron (generic Kytril)
ondansetron (generic Zofran)
prochlorperazine
promethazine
Emend

Parkinson's Disease

amantadine
benztropine
carbidopa/levodopa
pramipexole (generic Mirapex)
ropinirole (generic Requip)
Akineton
Apokyn

Seizure Disorder

carbamazepine
clonazepam
divalproex sodium (generic Depakote)

KEY

Generic Drugs are listed in lower case letters. Brand-name drugs are listed with the first letter of the name capitalized.

The symbol * next to a brand-name drug signifies that this drug may be available as a generic in 2010. When a generic version is available, mandatory generic substitution will apply. Use of a non-preferred brand-name prescription drug when the generic is available will result in the enrollee paying the applicable non-preferred copayment plus the difference in cost between the brand-name drug and the generic, not to exceed the full retail cost of the drug. The symbol (g) next to a brand-name drug indicates that a generic is currently available for at least one or more strengths of the brand medication. When a generic is available for a particular strength of the brand-name drug, that strength of the brand-name drug is non-preferred. For the drug Dilantin, enrollees will not be charged the difference in cost between the brand-name drug and the generic version when the brand-name drug is dispensed instead of the generic. The symbol (PA) next to a drug name indicates that prior authorization is required.

You can get more information about your prescription drug benefits by calling The Empire Plan toll free at 1-877-7-NYSHIP (1-877-769-7447) and selecting The Empire Plan Prescription Drug Program. From the homepage, <https://www.cs.state.ny.us>, select either Employees or Retirees and follow the links to Health Benefits. Select your group and benefit plan if prompted. On the resulting NYS Online health benefits page, select "Using Your Benefits" and scroll down to the 2010 Empire Plan Preferred Drug List.

divalproex sodium extended release (generic Depakote ER)
gabapentin
lamotrigine
levetiracetam (generic Keppra)
oxcarbazepine
phenobarbital
phenytoin
primidone
topiramate (generic Topamax)
Dilantin (g)
Felbatol
Gabitril
Lyrica
Tegretol XR (g)*

DERMATOLOGY/ SKIN DISORDER

benzoyl peroxide/erythromycin
betamethasone dipropionate
clindamycin (all formulations)
clobetasol
erythromycin topical
fluocinonide
hydrocortisone topical
imiquimod (generic Aldara)
isotretinoin
metronidazole topical
podofilox topical
sulfacetamide/sulfur
tretinoin (PA)
triamcinolone topical
Condylox (g)*
Dovonex (g)*
Duac
Protopic
Retin-A Micro Gel (PA)
Soriatane
Tazorac (PA)

DIABETES

acarbose (generic Precose)
glimepiride
glipizide
glipizide extended release
glipizide with metformin
glyburide
glyburide with metformin
glyburide, micronized
metformin
metformin extended release
nateglinide (generic Starlix)
Actoplus Met
Actos
Avandamet
Avandaryl
Avandia
Byetta
Duetact
Humalog
Humulin

KEY

Generic Drugs are listed in lower case letters. Brand-name drugs are listed with the first letter of the name capitalized.

The symbol * next to a brand-name drug signifies that this drug may be available as a generic in 2010. When a generic version is available, mandatory generic substitution will apply. Use of a non-preferred brand-name prescription drug when the generic is available will result in the enrollee paying the applicable non-preferred copayment plus the difference in cost between the brand-name drug and the generic, not to exceed the full retail cost of the drug. **The symbol (g)** next to a brand-name drug indicates that a generic is currently available for at least one or more strengths of the brand medication. When a generic is available for a particular strength of the brand-name drug, that strength of the brand-name drug is non-preferred. For the drug Dilantin, enrollees will not be charged the difference in cost between the brand-name drug and the generic version when the brand-name drug is dispensed instead of the generic. **The symbol (PA)** next to a drug name indicates that prior authorization is required.

You can get more information about your prescription drug benefits by calling The Empire Plan toll free at 1-877-7-NYSHIP (1-877-769-7447) and selecting The Empire Plan Prescription Drug Program. From the homepage, <https://www.cs.state.ny.us>, select either Employees or Retirees and follow the links to Health Benefits. Select your group and benefit plan if prompted. On the resulting NYS Online health benefits page, select "Using Your Benefits" and scroll down to the 2010 Empire Plan Preferred Drug List.

Janumet
Januvia
Lantus
Levemir
Novolin
Novolog
Onglyza
Prandin*
Symlin
Victoza

GASTROINTESTINAL

GERD/Peptic Ulcer
lansoprazole capsule
(generic Prevacid capsule)
metoclopramide
misoprostol
omeprazole (generic Prilosec)
pantoprazole (generic Protonix)
ranitidine
sucralfate
Aciphex
Axid Oral Solution
Helidac
Prevpac
Pylera
Zegerid (g)*

Gastrointestinal-Other
chlordiazepoxide/clidinium
dicyclomine
hyoscyamine

Pancreatic Enzymes
Creon
Pancrease MT (g)*

Ulcerative Colitis
balsalazide disodium
(generic Colazal)
mesalamine enema
sulfasalazine
Apriso
Asacol
Dipentum
Entocort EC
Lialda

GROWTH HORMONES

Nutropin/Nutropin AQ (PA)
Saizen (PA)
Serostim (PA)
Tev-Tropin (PA)
Zorbtive (PA)

INFECTION

Antibiotics-Oral
amoxicillin
amoxicillin with potassium
clavulanate (generic
Augmentin)
ampicillin
azithromycin (generic Zithromax)

cefaclor
cefadroxil
cefdinir (generic Omnicef)
cefprozil
cefuroxime
cephalexin
ciprofloxacin
clarithromycin (generic Biaxin)
clarithromycin extended release
(generic Biaxin XL)
clindamycin capsule
doxycycline
erythromycin
metronidazole
minocycline
penicillin V potassium
sulfamethoxazole with
trimethoprim
tetracycline
Gantrisin
Levaquin

Antifungal Drugs-Oral

fluconazole
itraconazole (PA)
ketoconazole
nystatin
terbinafine (generic Lamisil) (PA)
Noxafil
Vfend

Antifungal Drugs-Topical

ciclopirox solution, non-oral
clotrimazole with
betamethasone
nystatin
nystatin with triamcinolone
Naftin

Antiviral Drugs

acyclovir
amantadine
famciclovir
rimantadine
valacyclovir (generic Valtrex)
Tamiflu
Zovirax Ointment, Cream

Hepatitis

ribavirin
Baraclude
Hepsera
Infergen (PA)
Intron-A (PA)
Pegasy (PA)
Peg-Intron (PA)
Roferon A (PA)
Tyzeka

MIGRAINE HEADACHE

butalbital/acetaminophen/
caffeine
butalbital/aspirin/caffeine
butorphanol nasal spray

ergotamine/caffeine
propranolol tablet
sumatriptan (generic Imitrex)
Frova
Maxalt
Relpax
Zomig

MUSCLE RELAXANTS

carisoprodol
cyclobenzaprine
diazepam
metaxalone (generic Skelaxin)
methocarbamol
orphenadrine/orphenadrine
compound

OPHTHALMIC (EYE)

Glaucoma

betaxolol
brimonidine
dorzolamide (generic Trusopt)
pilocarpine
timolol maleate
Azopt
Betimol
Combigan
Lumigan
Travatan/Travatan Z

Other Eye Medications

azelastine (generic Optivar)
ciprofloxacin drops
cromolyn sodium drops
cyclopentolate
diclofenac sodium drops (generic
Voltaren Ophthalmic)
flurbiprofen drops
ofloxacin drops
prednisolone drops
tobramycin drops
tobramycin/dexamethasone
drops (generic Tobradex)
Elestat
Flarex
FML Forte/FML SOP
Pred Mild
Restasis
Vexol

OTIC (EAR)

ofloxacin (generic Floxin)
Ciprodex

PAIN/ARTHRITIS

acetaminophen with codeine
acetaminophen with
hydrocodone
diclofenac
etodolac
fentanyl citrate lollipop
fentanyl transdermal system

flurbiprofen
ibuprofen
ibuprofen with hydrocodone
indomethacin
ketoprofen
leflunomide
meloxicam (generic Mobic)
methotrexate
nabumetone
naproxen
oxaprozin
oxycodone with acetaminophen
oxycodone with aspirin
piroxicam
propoxyphene with acetaminophen
sulindac
tolmetin
tramadol
tramadol with acetaminophen
Celebrex
Cimzia (PA)
Enbrel (PA)
Humira (PA)
Oxycontin
Prevacid NapraPAC
Simponi (PA)
Voltaren Gel

PSYCHOTHERAPEUTIC AGENTS

Anxiety, Insomnia and Sedative Agents

alprazolam/alprazolam extended release
buspirone
diazepam
flurazepam
lorazepam
temazepam
triazolam
zaleplon (generic Sonata)
zolpidem (generic Ambien)

Attention Deficit Hyperactivity Disorder (ADHD)

amphetamine with dextroamphetamine salt combination
amphetamine with dextroamphetamine salt combination extended release (generic Adderall XR)
dextroamphetamine sustained release
methylphenidate
methylphenidate extended release
Vyvanse

Depression
amitriptyline
bupropion
bupropion sustained action
bupropion sustained release 24 Hour
citalopram (generic Celexa)
desipramine
doxepin
fluoxetine (generic Prozac)
imipramine
mirtazapine
mirtazapine dispersible tablet
nortriptyline
paroxetine (generic Paxil)
paroxetine sustained release 24 hour (generic Paxil CR)
sertraline (generic Zoloft)
tranylcypromine
trazodone
venlafaxine (generic Effexor)
venlafaxine extended release capsule (generic Effexor XR)
Nardil

Psychosis

clozapine
haloperidol
risperidone (generic Risperdal)
Geodon
Moban
Seroquel (except for XR)
Symbyax
Zyprexa (except for Zydis)

RESPIRATORY

Allergy-Antihistamines
fexofenadine (generic Allegra)
hydroxyzine

Allergy-Antihistamines/Decongestants
Allegra-D (g)*

Allergy-Nasal Antihistamines
azelastine nasal spray (generic Astelin)

Allergy-Nasal Corticosteroids
flunisolide nasal spray
fluticasone (generic Flonase)
Nasonex

Allergy-Other
Epipen
Twinject

Asthma-Inhaled Drugs
albuterol inhalation solution
albuterol/ipratropium solution
cromolyn
ipratropium inhalation solution
Advair
Asmanex

Combivent
Flovent
Foradil
Pulmicort Flexhaler
Pulmicort Respules (g)*
QVAR
Serevent
Spiriva
Symbicort
Tilade
Ventolin HFA

Asthma-Oral Drugs

albuterol
prednisolone
prednisone
terbutaline
theophylline
Singulair

THYROID REPLACEMENT

levothyroxine (generic Synthroid)
liothyronine (generic Cytomel)

URINARY TRACT

Benign Prostatic Hyperplasia (BPH)

doxazosin
finasteride (generic Proscar)
tamsulosin (generic Flomax)
terazosin

Erectile Dysfunction

Viagra

Miscellaneous

Anticholinergics/

Antispasmodics-Other

desmopressin
oxybutynin/oxybutynin extended release
Enblex
Oxytrol
Sanctura XR
Vesicare

VITAMIN DEFICIENCY

cyanocobalamin injection
Nascobal

WEIGHT LOSS

phentermine (PA)
Meridia (PA)

WOMEN'S HEALTH

Contraceptives

aviane
gianvi (generic Yaz)
kariva

levonorgestrel-ethinyl estradiol tablet, dosepack, 3 month (generic Seasonale)
medroxyprogesterone 150mg/ml microgestin fe
ocella (generic Yasmin)
tri-sprintec
trinessa
NuvaRing

Hormone Therapy-Oral

estropipate
medroxyprogesterone tablet
methyltestosterone with esterified estrogens
Activella (g)*
Cenestin
Enjuvia
Prefest
Prometrium

Hormone Therapy-Patches

estradiol patch
Combipatch
Esclim
Estraderm
Vivelle/Vivelle-Dot

Hormone Therapy-

Miscellaneous

Estrace Cream
Estring
Vagifem

Infertility

clomiphene
leuprolide
Cetrotide
Follistim AQ
Gonal-F
Luveris
Ovidrel

Osteoporosis

alendronate sodium tablet (generic Fosamax)
etidronate disodium
Actonel
Boniva
Evista
Forteo (PA)

Other Agents

clindamycin vaginal cream
metronidazole vaginal gel
prenatal vitamins (generic)
tamoxifen
terconazole
Clindesse
Precare

KEY

Generic Drugs are listed in lower case letters. Brand-name drugs are listed with the first letter of the name capitalized.

The symbol * next to a brand-name drug signifies that this drug may be available as a generic in 2010. When a generic version is available, mandatory generic substitution will apply. Use of a non-preferred brand-name prescription drug when the generic is available will result in the enrollee paying the applicable non-preferred copayment plus the difference in cost between the brand-name drug and the generic, not to exceed the full retail cost of the drug. **The symbol (g)** next to a brand-name drug indicates that a generic is currently available for at least one or more strengths of the brand medication. When a generic is available for a particular strength of the brand-name drug, that strength of the brand-name drug is non-preferred. For the drug Dilantin, enrollees will not be charged the difference in cost between the brand-name drug and the generic version when the brand-name drug is dispensed instead of the generic. **The symbol (PA)** next to a drug name indicates that prior authorization is required.

You can get more information about your prescription drug benefits by calling The Empire Plan toll free at 1-877-7-NYSHIP (1-877-769-7447) and selecting The Empire Plan Prescription Drug Program. From the homepage, <https://www.cs.state.ny.us>, select either Employees or Retirees and follow the links to Health Benefits. Select your group and benefit plan if prompted. On the resulting NYS Online health benefits page, select "Using Your Benefits" and scroll down to the 2010 Empire Plan Preferred Drug List.

Examples of Non-Preferred Brand-Name Drugs with 2010 Empire Plan Preferred Drug List Alternatives

Non-Preferred Drugs	Empire Plan Preferred Drug List Alternatives
Abilify	risperidone (generic Risperdal), Geodon, Seroquel (except for XR), Zyprexa (except for Zydis)
Adoxa	doxycycline
Ambien CR	zaleplon (generic Sonata), zolpidem (generic Ambien)
Amrix	cyclobenzaprine
Asacol HD	Apriso, Asacol, Lialda
Avalide	losartan with hydrochlorothiazide (generic Hyzaar), Atacand HCT, Benicar HCT, Micardis HCT
Avapro	losartan (generic Cozaar), Atacand, Benicar, Micardis
Avelox	ciprofloxacin, ofloxacin, Levaquin
Avodart	doxazosin, finasteride (generic Proscar), tamsulosin (generic Flomax), terazosin
Betoptic S	betaxolol, timolol, Betimol
Caduet	amlodipine (generic Norvasc) plus Lipitor
Cialis	Viagra
Clobex Shampoo	clobetasol
Concerta	amphetamine with dextroamphetamine salt combination extended release (generic Adderall XR), methylphenidate, Vyvanse
Coreg CR	carvedilol (generic Coreg)
Cymbalta	venlafaxine (generic Effexor), venlafaxine extended release capsule (generic Effexor XR)
Detrol LA	oxybutynin, oxybutynin extended release, Enablex, Sanctura XR, Vesicare
Dexilant (formerly Kapidex)	omeprazole (generic Prilosec), pantoprazole (generic Protonix), Aciphex, Zegerid (g)*
Diovan	losartan (generic Cozaar), Atacand, Benicar, Micardis
Diovan HCT	losartan with hydrochlorothiazide (generic Hyzaar), Atacand HCT, Benicar HCT, Micardis HCT
Doryx	doxycycline
Flector	Voltaren Gel
Humatrope (PA)	Nutropin (PA), Nutropin AQ (PA), Saizen (PA), Tev-Tropin (PA)
Levitra	Viagra
Lexapro	citalopram (generic Celexa), fluoxetine (generic Prozac), paroxetine (generic Paxil), paroxetine sustained release 24 hour (generic Paxil CR), sertraline (generic Zoloft), venlafaxine (generic Effexor), venlafaxine extended release capsule (generic Effexor XR)
Lunesta	zaleplon (generic Sonata), zolpidem (generic Ambien)
Nexium	omeprazole (generic Prilosec), pantoprazole (generic Protonix), Aciphex, Zegerid (g)*
Norditropin (PA)	Nutropin (PA), Nutropin AQ (PA), Saizen (PA), Tev-Tropin (PA)
Olux/OLux-E Complete Pack	clobetasol
Ortho Tri-Cyclen Lo	tri-sprintec, trinessa
Premarin Cream	Estrace Cream
Premarin Tablets	estradiol, estropipate, Cenestin, Enjuvia
Premphase	Activella (g)*, Prefest
Prempro	Activella (g)*, Prefest
Proventil HFA	Ventolin HFA
Provigil (PA)	amphetamine with dextroamphetamine salt combination, amphetamine with dextroamphetamine salt combination extended release (generic Adderall XR), dextroamphetamine, methylphenidate
Requip XL	ropinirole (generic Requip)
Soma 250	carisoprodol
Strattera	amphetamine with dextroamphetamine salt combination extended release (generic Adderall XR), methylphenidate, Vyvanse
Synthroid	levothyroxine
Testim	Androgel
Treximet	naproxen sodium plus sumatriptan (generic Imitrex)
Veramyst	flunisolide, fluticasone (generic Flonase), Nasonex
Xalatan	Lumigan, Travatan, Travatan Z
Xopenex HFA	Ventolin HFA
Xopenex Inhalation Solution (g)*	albuterol inhalation solution
Zetia	lovastatin, pravastatin (generic Pravachol), simvastatin (generic Zocor), Crestor, Lipitor, Tricor, Vytorin, Welchol
Zylet	neomycin/polymyxin/dexamethasone drops, tobramycin/dexamethasone drops (generic Tobradex)

KEY

Generic Drugs are listed in lower case letters. Brand-name drugs are listed with the first letter of the name capitalized.

The symbol * next to a brand-name drug signifies that this drug may be available as a generic in 2010. When a generic version is available, mandatory generic substitution will apply. Use of a non-preferred brand-name prescription drug when the generic is available will result in the enrollee paying the applicable non-preferred copayment plus the difference in cost between the brand-name drug and the generic, not to exceed the full retail cost of the drug. **The symbol (g)** next to a brand-name drug indicates that a generic is currently available for at least one or more strengths of the brand medication. When a generic is available for a particular strength of the brand-name drug, that strength of the brand-name drug is non-preferred. For the drug Dilantin, enrollees will not be charged the difference in cost between the brand-name drug and the generic version when the brand-name drug is dispensed instead of the generic. **The symbol (PA)** next to a drug name indicates that prior authorization is required.

You can get more information about your prescription drug benefits by calling The Empire Plan toll free at 1-877-7-NYSHIP (1-877-769-7447) and selecting The Empire Plan Prescription Drug Program. From the homepage, <https://www.cs.state.ny.us>, select either Employees or Retirees and follow the links to Health Benefits. Select your group and benefit plan if prompted. On the resulting NYS Online health benefits page, select "Using Your Benefits" and scroll down to the 2010 Empire Plan Preferred Drug List.