



The 2010 Passport Advantage Formulary is reviewed often to make sure you get the best medicines for the lowest costs. We consider if generics or alternatives are available, if medicines have been recalled, or if new medicines come onto the market.

This Formulary Changes document lists all changes that have been made to the 2010 Formulary since it was published in October 2009.

How to Find Your Medicine in This Document

To search for your medicine, follow these instructions:

1. Find the icon on your toolbar that looks like a pair of binoculars.
2. Click on this icon.
3. A search box will pop up. Type in the name of the medicine you want to find, and hit “enter.” (Tip: if you do not know the correct spelling, you can start your search by entering just the first few letters of the medicine’s name.)

Understand the Changes to Your Medicine

Once you find your medicine in this document, there will be 8 categories of information:

1. **Medicine Name:** This tells you the name of the medicine.
2. **Dosage Form:** This tells you the form of this medicine. (For example, if it is in a pill or liquid form.)
3. **Strength:** This tells you the dosage of the medicine.
4. **Generic Name:** This tells you if there are any generics of this medicine that are available.
5. **Brand Name:** This tells you the brand name of the medicine.
6. **Alternative Medicine:** This tells you if there are any alternative medicines available.
7. **Description of Formulary Change:** This tells you what change happened to your medicine.
8. **Updated Status on Formulary:** This tells you what the new status of the medicine is on the 2010 Passport Advantage formulary.

The following chart will explain what some of the abbreviations and symbols mean. For a complete listing of abbreviations, please refer to the Passport Advantage 2010 formulary.

Key		
Addition = Drug Was Added To Formulary	PT24 = Patch 24 hours	SUSR = Sustained Release
CAPS = Capsules	QL = Quantity Limits	TABS = Tablets
CONC = Concentrate	SOLN = Solution	TB12 = Tablet Extended Release 12 hour
CP12 = Capsules Extended Release 12 hour	SOLR = Solution Reconstituted	T1 = Tier 1 copay
ELIX = Elixir	ST = Step Therapy Required	T2 = Tier 2 copay
NEBU = Nebulizer	SUPP = Suppository	T3 = Tier 3 copay
PA = Prior Authorization Required	SYR = Syrup	T4 = Tier 4 copay

October

Drug Name	Dosage Form	Strength	Alternative Medicine*	Formulary Status of Alternative Medication		Formulary Change and Reason	Updated Status On Formulary	
ENOXAPARIN SODIUM	SOLN	80MG/0.8ML				Addition	T1	
ENOXAPARIN SODIUM	SOLN	100MG/ML				Addition	T1	
ENOXAPARIN SODIUM	SOLN	120MG/0.8ML				Addition	T1	
ENOXAPARIN SODIUM	SOLN	150MG/ML				Addition	T1	
ZORTRESS	TABS	0.25MG				Addition	T3	PA
ZORTRESS	TABS	0.5MG				Addition	T4	PA
ZORTRESS	TABS	0.75MG				Addition	T4	PA

September

Drug Name	Dosage Form	Strength	Alternative Medicine*	Formulary Status of Alternative Medication		Formulary Change and Reason	Updated Status On Formulary	
ANASTROZOLE	TABS	1MG				Addition	T1	
LEVETIRACETAM	SOLN	500MG/5ML				Addition	T1	
MEROPENEM	SOLR	500MG				Addition	T1	
NARATRIPTAN HCL	TABS	1MG				Addition	T1	QL
NARATRIPTAN HCL	TABS	2.5MG				Addition	T1	QL
RIVASTIGMINE TARTRATE	CAPS	1.5MG				Addition	T1	
RIVASTIGMINE TARTRATE	CAPS	3MG				Addition	T1	
RIVASTIGMINE TARTRATE	CAPS	4.5MG				Addition	T1	
RIVASTIGMINE TARTRATE	CAPS	6MG				Addition	T1	
VENLAFAXINE HCL ER	CP24	150MG				Addition	T1	
VENLAFAXINE HCL ER	CP24	37.5MG				Addition	T1	
VENLAFAXINE HCL ER	CP24	75MG				Addition	T1	
ZYMAR	SOLN	0.30%				Removal of PA	T2	

August

Drug Name	Dosage Form	Strength	Alternative Medicine*	Formulary Status of Alternative Medication		Formulary Change and Reason	Updated Status On Formulary	
AZELASTINE HCL	SOLN	137MCG/SPRAY				Addition	T1	
OLEPTRO	TB24	150MG				Addition	T3	
OLEPTRO	TB24	300MG				Addition	T3	
REVATIO	SOLN	10MG/12.5ML				Addition	T4	PA

TRANDOLAPRIL/VERAPAMIL HCL	TBCR	2MG; 180MG				Addition	T1	
TRANDOLAPRIL/VERAPAMIL HCL	TBCR	2MG; 240MG				Addition	T1	
TRANDOLAPRIL/VERAPAMIL HCL	TBCR	4MG; 240MG				Addition	T1	
VALTURNA	TABS	150MG/160MG				Addition	T2	
VALTURNA	TABS	300MG/ 320MG				Addition	T2	
VIMPAT	SOLN	10MG/ML				Addition	T3	
VPRIV	SOLR	400UNIT				Addition	T4	PA

July

Drug Name	Dosage Form	Strength	Alternative Medicine*	Formulary Status of Alternative Medication		Formulary Change and Reason	Updated Status On Formulary	
ACTOPLUS MET XR	TB24	1000MG; 15MG				Addition	T2	ST
ACTOPLUS MET XR	TB24	1000MG; 30MG				Addition	T2	ST
NORVIR	TABS	100MG				Addition	T2	
ZENPEP	CPEP	82000UNIT; 15000UNIT; 51000UNIT				Addition	T2	
ZENPEP	CPEP	109000UNIT; 20000UNIT; 68000UNIT				Addition	T2	
ZENPEP	CPEP	55000UNIT; 10000UNIT; 34000UNIT				Addition	T2	
ZENPEP	CPEP	27000UNIT; 5000UNIT; 17000UNIT				Addition	T2	

June

Drug Name	Dosage Form	Strength	Alternative Medicine*	Formulary Status of Alternative Medication		Formulary Change and Reason	Updated Status On Formulary	
AMOXICILLIN/CLAVULANATE POTASSIUM ER	TB12	1000MG; 62.5MG				Addition	T1	
DEXILANT	CPDR	30MG				Addition	T2	ST
DEXILANT	CPDR	60MG				Addition	T2	ST
FLUOXETINE DR	CPDR	90MG				Addition	T1	PA
IXIARO	SUSP	6MCG/0.5ML				Addition	T2	
LOCOID LIPOCREAM	CREA	0.10%				Removal of Prior Authorization	T3	
LOSARTAN POTASSIUM	TABS	100MG				Addition	T1	
LOSARTAN POTASSIUM	TABS	25MG				Addition	T1	
LOSARTAN POTASSIUM	TABS	50MG				Addition	T1	
LOSARTAN POTASSIUM/HYDROCHLOROTHIAZIDE	TABS	12.5MG; 100MG				Addition	T1	
LOSARTAN POTASSIUM/HYDROCHLOROTHIAZIDE	TABS	12.5MG;50MG				Addition	T1	
LOSARTAN POTASSIUM/HYDROCHLOROTHIAZIDE	TABS	25MG;100MG				Addition	T1	
METAXALONE	TABS	800MG				Addition	T1	PA

May

Drug Name	Dosage Form	Strength	Alternative Medicine*	Formulary Status of Alternative Medication		Formulary Change and Reason	Updated Status On Formulary	
AMANTADINE HCL	SYRP	50MG/5ML				Addition	T1	
AMPYRA	TB12	10MG				Addition	T4	PA
ASMANEX 30 METERED DOSES	AEPB	110MCG/INH				Addition	T2	
IMIQUIMOD	CREAM	5%				Addition	T1	
MIRAPEX ER	TB24	0.375MG				Addition	T3	
MIRAPEX ER	TB24	0.75MG				Addition	T3	

MIRAPEX ER	TB24	1.5MG				Addition	T3	
MIRAPEX ER	TB24	3MG				Addition	T3	
MIRAPEX ER	TB24	4.5MG				Addition	T3	
NAPROXEN SODIUM	TABS	275MG				Addition	T1	
NAPROXEN SODIUM	TABS	550MG				Addition	T1	
TAMSULOSIN HYDROCHLORIDE	CAPS	0.4MG				Addition	T1	
ZIRGAN	GEL	0.15%				Addition	T3	
ZYPREXA RELPREVV	SUSR	405MG				Addition	T4	PA

April

Drug Name	Dosage Form	Strength	Alternative Medicine*	Formulary Status of Alternative Medication	Formulary Change and Reason	Updated Status On Formulary	
ACTEMRA	SOLN	200MG/10ML			Addition	T4	PA
ASTEPRO	SOLN	0.15%			Addition	T2	
BUDESONIDE	SUSP	0.25MG/2ML			Addition	T1	
BUDESONIDE	SUSP	0.5MG/2ML			Addition	T1	
ENBREL	SOLN	25MG/0.5ML			Addition	T3	PA
ISTODAX	SOLR	10MG			Addition	T4	PA
PACERONE	TABS	200MG			Addition	T3	PA
PHENYTOIN SODIUM EXTENDED	CAPS	200MG			Addition	T1	
PHENYTOIN SODIUM EXTENDED	CAPS	300MG			Addition	T1	
PRIVIGEN	SOLN	20GM/200ML			Addition	T4	PA
STELARA	VIAL	45MG/0.5ML			Addition	T4	PA
STELARA	SOLN	45MG/0.5ML			Addition	T4	PA
STELARA	SOLN	90MG/ML			Addition	T4	PA
VAGIFEM	TABS	10MCG			Addition	T3	
VALCYTE	SOLR	50MG/ML			Addition	T3	

March

Drug Name	Dosage Form	Strength	Alternative Medicine*	Formulary Status of Alternative Medication	Formulary Change and Reason	Updated Status On Formulary	
CIMZIA	KIT	200MG/ML			Addition	T4	PA
KAPIDEX	CPDR	30MG			Step Therapy Changed from third line to second line	T2	ST
KAPIDEX	CPDR	60MG			Step Therapy Changed from third line to second line	T2	ST
LAMICTAL XR	KIT	0			Addition	T3	
LAMICTAL XR	KIT	0			Addition	T3	
LAMICTAL XR	KIT	0			Addition	T3	
MAXAIR AUTOHALER	AERB	200MCG/INH			Addition	T2	

MOZOBIL	SOLN	24MG/1.2ML				Addition	T4	PA
PRAMIPEXOLE DIHYDROCHLORIDE	TABS	0.25MG				Addition	T1	
PRAMIPEXOLE DIHYDROCHLORIDE	TABS	0.5MG				Addition	T1	
PRAMIPEXOLE DIHYDROCHLORIDE	TABS	1MG				Addition	T1	
PRAMIPEXOLE DIHYDROCHLORIDE	TABS	1.5MG				Addition	T1	
PRAMIPEXOLE DIHYDROCHLORIDE	TABS	0.125MG				Addition	T1	

February

Drug Name	Dosage Form	Strength	Alternative Medicine*	Formulary Status of Alternative Medication		Formulary Change and Reason	Updated Status On Formulary	
AMINESS	SOLN	5.2%	RENAMIN	T2		Deletion of NDC 00338048803. This product will not be covered by Medicare Part D.		
ARZERRA	CONC	100MG/5ML				Addition	T4	PA
AZELASTINE HYDROCHLORIDE	SOLN	0.05%				Addition	T1	ST
BYETTA	SOLN	5MCG/0.02ML				Addition	T3	PA
CERVARIX	SUSP	20MG / 5ML				Addition	T2	
CERVARIX	VIAL	20MG / 5ML				Addition	T2	
EFFIENT	TABS	10MG				Decreased Tier	T2	
EFFIENT	TABS	5MG				Decreased Tier	T2	
FANAPT	TABS	1MG				Addition	T3	
FANAPT	TABS	10MG				Addition	T3	
FANAPT	TABS	12MG				Addition	T3	
FANAPT	TABS	2MG				Addition	T3	
FANAPT	TABS	4MG				Addition	T3	
FANAPT	TABS	6MG				Addition	T3	
FANAPT	TABS	8MG				Addition	T3	
FANAPT TITRATION PACK	TABS	1MG (2) – 2 MG (2) 4 MG (2) –				Addition	T3	

		6MG (2)					
FRAGMIN	INJ	10000UNIT/ML				Removal of Prior Authorization	T4
FRAGMIN	INJ	2500UNIT/0.2ML				Removal of Prior Authorization	T3
FRAGMIN	INJ	25000UNIT/ML				Removal of Prior Authorization	T4
FRAGMIN	INJ	5000UNIT/0.2ML				Removal of Prior Authorization	T3
FRAGMIN	INJ	7500UNIT/0.3ML				Removal of Prior Authorization	T4
HUMIRA	KIT	20MG/0.4ML				Addition	T4 PA
INVEGA	TB24	1.5MG				Addition	T3 PA
INVEGA SUSTENNA	SUSP	78MG/0.5ML				Addition	T3 PA
INVEGA SUSTENNA	SUSP	234MG/1.5ML				Addition	T4 PA
INVEGA SUSTENNA	SUSP	156MG/ML				Addition	T4 PA
INVEGA SUSTENNA	SUSP	117MG/0.75ML				Addition	T4 PA
INVEGA SUSTENNA	SUSP	39MG/0.25ML				Addition	T3 PA
KETOROLAC TROMETHAMINE	SOLN	0.4%				Addition	T1
KETOROLAC TROMETHAMINE	SOLN	0.5%				Addition	T1
LANSOPRAZOLE	CPDR	15MG				Addition	T1 ST
LANSOPRAZOLE	CPDR	30MG				Addition	T1 ST
NATEGLINIDE	TABS	120MG				Addition	T1 ST
NATEGLINIDE	TABS	60MG				Addition	T1 ST
NUTROPIN AQ PEN	SOLN	20MG/2ML				Addition	T4 PA
NUTROPIN AQ PEN	SOLN	10MG/2ML				Addition	T4 PA
ONGLYZA	TABS	2.5 MG				Addition	T3 ST
ONGLYZA	TABS	5 MG				Addition	T3 ST
OXCARBAZEPINE	SUSP	300MG/5ML				Addition	T1
POLYETHYLENE GLYCOL	POWD	17GRAM/DOSE				Addition	T1
RENAGEL	TABS	400MG				Addition	T2
RENAGEL	TABS	800MG				Addition	T2
RISPERIDONE ODT	TBDP	1MG				Addition	T1
SAMSCA	TABS	15MG				Addition	T4
SAMSCA	TABS	30MG				Addition	T4
SODIUM BICARBONATE	SOLN	8.4%				Addition	T1
SUMAVEL DOSEPRO	DEVI	6MG/0.5ML				Addition	T3 QL
TACROLIMUS	CAPS	0.5MG				Addition	T1 PA
TACROLIMUS	CAPS	1MG				Addition	T1 PA
TACROLIMUS	CAPS	5MG				Addition	T1 PA

TIMOLOL MALEATE OPHTHALMIC GEL FORMING	SOLG	0.25%				Addition	T1	
TIMOLOL MALEATE OPHTHALMIC GEL FORMING	SOLG	0.5%				Addition	T1	
VALACYCLOVIR HCL	TABS	1000MG				Addition	T1	
VALACYCLOVIR HCL	TABS	500MG				Addition	T1	
VIOKASE	POWD	70000UNIT; 16800UNIT; 70000UNIT				Decreased Tier	T2	
VIOKASE 16	TABS	60000UNIT; 16000UNIT; 60000UNIT				Decreased Tier	T2	
VOTRIENT	TABS	200MG				Addition	T4	PA