



Ventegra Preferred Formulary Alphabetical Listing 2012

TIERING

Tier 1 = Generic
 Tier 2 = Preferred Brand
 Tier 3 = Non-Preferred Brand
 Tier 4 = Preferred Specialty/Injectable
 Tier 5 = Non-Preferred Specialty/Injectable

BENEFIT NOTES

A = Age Edit
 G = Gender Edit
 OTC = Over-The-Counter Drug
 PA = Prior Authorization Recommended
 QL = Quantity Limit
 ST = Step Therapy

Please Note: This listing does not include Generic Drugs, nor is it inclusive of all Non-Preferred Brand drugs available on the market.
 + = When a generic equivalent is available (indicated by "Yes"), the generic equivalent is recommended to process at Tier 1, unless otherwise noted below.

Label Name	Generic Name	Generic Available	Preferred Tiering Recommendations	Benefit Notes
Abilify DISC Tab 10MG	Aripiprazole	No	3	
Abilify DISC Tab 15MG	Aripiprazole	No	3	
Abilify Inj 9.75 Mg	Aripiprazole	No	5	
Abilify Sol 1MG	Aripiprazole	No	3	
Abilify Tab 10MG	Aripiprazole	No	3	
Abilify Tab 15MG	Aripiprazole	No	3	
Abilify Tab 20MG	Aripiprazole	No	3	
Abilify Tab 2MG	Aripiprazole	No	3	
Abilify Tab 30MG	Aripiprazole	No	3	
Abilify Tab 5MG	Aripiprazole	No	3	
Accuneb Neb 0.63MG/3ML	Albuterol	Yes	3	
Accuneb Neb 1.25MG/3ML	Albuterol	Yes	3	
Acetasol HC Otic Sol	Acetic Acid, Propylene Glycol Diacetate, and Hydrocortisone	Yes	3	
Aciphex Tab 20MG	Rabeprazole	No	3	QL
Acticin Cream 5%	Permethrin	Yes	3	
Actonel Tab 150MG	Risedronate	No	2	
Actonel Tab 30MG	Risedronate	No	2	
Actonel Tab 35MG	Risedronate	No	2	
Actonel Tab 5MG	Risedronate	No	2	
Actonel Tab 75MG	Risedronate	No	2	
Actonel Tab With Calcium	Risedronate	No	2	
Actoplus Met Tab 15/500MG	Pioglitazone and Metformin	No	3	
Actoplus Met Tab 15/850MG	Pioglitazone and Metformin	No	3	
Actos Tab 15MG	Pioglitazone	No	3	
Actos Tab 30MG	Pioglitazone	No	3	
Actos Tab 45MG	Pioglitazone	No	3	
Acular LS Sol 0.4%	Ketorolac	Yes	2	
Acular PF Sol 0.5% OP	Ketorolac	Yes	3	
Acular Sol 0.5% OP	Ketorolac	Yes	2	
ACUVAIL SOLUTION 0.45 %	Ketorolac	No	2	
Adalat CC Tab 30MG ER	Nifedipine	Yes	3	
Adalat CC Tab 60MG ER	Nifedipine	Yes	3	
Adalat CC Tab 90MG ER	Nifedipine	Yes	3	
Adderall Tab 10MG	Dextroamphetamine and Amphetamine	Yes	3	
Adderall Tab 12.5MG	Dextroamphetamine and Amphetamine	Yes	3	



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Adderall Tab 15MG	Dextroamphetamine and Amphetamine	Yes	3	
Adderall Tab 20MG	Dextroamphetamine and Amphetamine	Yes	3	
Adderall Tab 30MG	Dextroamphetamine and Amphetamine	Yes	3	
Adderall Tab 5MG	Dextroamphetamine and Amphetamine	Yes	3	
Adderall Tab 7.5MG	Dextroamphetamine and Amphetamine	Yes	3	
Adrucil Inj 50MG/ML	Fluorouracil	Yes	5	
Advair Disku MIS 100/50	Fluticasone and Salmeterol	No	3	
Advair Disku MIS 250/50	Fluticasone and Salmeterol	No	3	
Advair Disku MIS 500/50	Fluticasone and Salmeterol	No	3	
Advair HFA Aer 115/21	Fluticasone and Salmeterol	No	3	
Advair HFA Aer 230/21	Fluticasone and Salmeterol	No	3	
Advair HFA Aer 45/21	Fluticasone and Salmeterol	No	3	
Afeditab Tab 30MG CR	NIFEdipine	Yes	3	
Afeditab Tab 60MG CR	NIFEdipine	Yes	3	
AK-Con Opth Sol 0.1%	Naphazoline	No	3	
AK-Pentolate Opth Sol 1%	Cyclopentolate	Yes	3	
AK-Tob Opth Sol 0.3%	Tobramycin Sulfate	Yes	1	
Albalon Opth Sol 0.1%	Naphazoline	No	3	
ALBUTEIN SOLUTION 25 %	ALBUMIN	No	4	
ALBUTEIN SOLUTION 25 %	ALBUMIN	No	4	
ALBUTEIN SOLUTION 5 %	ALBUMIN	No	4	
ALBUTEIN SOLUTION 5 %	ALBUMIN	No	4	
Aldactazide Tab 25/25	Hydrochlorothiazide and Spironolactone	Yes	3	
Aldactazide Tab 50/50	Hydrochlorothiazide and Spironolactone	Yes	3	
Aldactone Tab 100MG	Spironolactone	Yes	3	
Aldactone Tab 25MG	Spironolactone	Yes	3	
Aldactone Tab 50MG	Spironolactone	Yes	3	
Alimita Inj 100MG	Pemetrexed	No	5	
Alimita Inj 500MG	Pemetrexed	No	5	
Allegra-D Tab 12 Hour	Fexofenadine and Pseudoephedrine	No	3	
Allegra-D Tab 24 Hour	Fexofenadine and Pseudoephedrine	No	3	
Aloprim Inj 500MG	Allopurinol	Yes	5	
Alora DIS 0.025MG	Estradiol	No	3	
Alora DIS 0.05MG	Estradiol	No	3	
Alora DIS 0.075MG	Estradiol	No	3	
Alora DIS 0.1MG	Estradiol	No	3	
Alphagan P Sol 0.1%	Brimonidine	No	3	
Alphagan P Sol 0.15%	Brimonidine	No	3	
ALPHANATE/VON WILLEBRAND FACTOR COMPLEX/H	ANTIHEMOPHILIC FACTOR/VON WILLEBRAND FACTOR C	No	4	
ALPHANATE/VON WILLEBRAND FACTOR COMPLEX/H	ANTIHEMOPHILIC FACTOR/VON WILLEBRAND FACTOR C	No	4	
ALPHANATE/VON WILLEBRAND FACTOR COMPLEX/H	ANTIHEMOPHILIC FACTOR/VON WILLEBRAND FACTOR C	No	4	



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ALPHANATE/VON WILLEBRAND FACTOR COMPLEX/H	ANTIHEMOPHILIC FACTOR/VON WILLEBRAND FACTOR C	No	4	
ALPHANINE SD RECON SOLN 1000 UNIT	COAGULATION FACTOR IX	No	4	
ALPHANINE SD RECON SOLN 1500 UNIT	COAGULATION FACTOR IX	No	4	
ALPHANINE SD RECON SOLN 500 UNIT	COAGULATION FACTOR IX	No	4	
Alupent Inh Aer 0.65/ACT	Metaproterenol	No	3	
AMBIEN CR 12.5mg	Zolpidem	No	3	
AMBIEN CR 6.25MG	Zolpidem	No	3	
Amibid DM Tab 30-600CR	Guaifenesin and Dextromethorphan	Yes	3	
Amigesic Tab 500MG	Salsalate	Yes	3	
Amigesic Tab 750MG	Salsalate	Yes	3	
Anabuse Tab 250MG	Disulfiram	No	3	
Anabuse Tab 500MG	Disulfiram	No	3	
Anaprox DS Tab 550MG	Naproxen	Yes	3	
Anaprox Tab 275MG	Naproxen	Yes	3	
Anaspaz Tab 0.125MG	Hyoscyamine	Yes	3	
AndroGel Gel 1%(25MG)	Testosterone	No	2	
AndroGel Gel 1%(50MG)	Testosterone	No	2	
AndroGel Gel Pump 1%	Testosterone	No	2	
AndroGel Pump Transdermal Gel 20.25 MG/ACT (1.62%)	Testosterone	No	2	
Anolor 300 Cap	Butalbital, Acetaminophen, and Caffeine	Yes	3	
AntibiOtic Ear Sol 1% Otic	Neomycin, Polymyxin B, and Hydrocortisone	Yes	3	
AntibiOtic Ear Susp 3.4MG/ML Otic	Neomycin, Polymyxin B, and Hydrocortisone	Yes	3	
Apidra Inj	Insulin Glulisine	No	1	
Apidra Inj U-100	Insulin Glulisine	No	1	
Apidra Solostar Pen	Insulin Glulisine	No	2	
Apri Tab 0.15-30MCG	Ethinyl Estradiol and Desogestrel	Yes	1	
APRISO	Mesalamine	No	2	
APTIVUS CAP 250 MG	tipranavir	No	2	
APTIVUS ORAL SOLN 100 MG/ML	tipranavir oral soln	No	2	
Aranelle Tab	Ethinyl Estradiol and Norethindrone	Yes	1	
Aricept ODT Tab 10MG	Donepezil	Yes	3	
Aricept ODT Tab 5MG	Donepezil	Yes	3	
Aricept Tab 10MG	Donepezil	Yes	3	
Aricept Tab 5MG	Donepezil	Yes	3	
ARICEPT TABLET 23 MG	Donepezil	No	2	
Armour Thyroid Tab 120MG	Thyroid	Yes	3	
Armour Thyroid Tab 15MG	Thyroid	Yes	3	
Armour Thyroid Tab 180MG	Thyroid	Yes	3	
Armour Thyroid Tab 240MG	Thyroid	Yes	3	
Armour Thyroid Tab 300MG	Thyroid	Yes	3	
Armour Thyroid Tab 30MG	Thyroid	Yes	3	



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Armour Thyroid Tab 60MG	Thyroid	Yes	3	
Armour Thyroid Tab 90MG	Thyroid	Yes	3	
Arranon Inj 5MG/ML	Nelarabine	No	5	
Asacol HD	Mesalamine	No	2	
Asacol Tab 400MG DR	Mesalamine	No	2	
Asmanex 120 Aer 220MCG	Mometasone	No	2	
Asmanex 14 Aer 220MCG	Mometasone	No	2	
Asmanex 30 Aer 110MCG	Mometasone	No	2	
Asmanex 30 Aer 220MCG	Mometasone	No	2	
Asmanex 60 Aer 220MCG	Mometasone	No	2	
ASSURE DOSE NORMAL CONTROL		No	2	
Astepro Spray 205.5MCG	Azelastine	No	2	QL
Atarax Syrup 10MG/5ML	Hydroxyzine	Yes	3	
Atarax Tab 100MG	Hydroxyzine	Yes	3	
Atarax Tab 10MG	Hydroxyzine	Yes	3	
Atarax Tab 25MG	Hydroxyzine	Yes	3	
Atarax Tab 50MG	Hydroxyzine	Yes	3	
ATELVIA 35 MG	Risedronate	No	2	
Atgam Inj 250MG	Antithymocyte Globulin (Equine)	No	5	
Atripla Tab	Efavirenz-Emtricitabine-Tenofovir DF	No	2	
Atropine-Care Sol 1% OP	Atropine	Yes	3	
Atrovent HFA Aero 17MCG	Ipratropium	No	3	
Avelox ABC Tab 400MG	Moxifloxacin	No	2	
Avelox Inj 400MG/250ML	Moxifloxacin	No	4	
Avelox Tab 400MG	Moxifloxacin	No	2	
AVIANE	LEVONORGESTREL & ETHINYL ESTRADIOL	Yes	1	
AVITA CRE 0.025%	Tretinoin, Topical	Yes	3	A
AVITA GEL 0.025%	Tretinoin, Topical	Yes	3	A
AVODART 0.5 MG	DUTASTERIDE	No	3	
Avonex Inj 30MCG	Interferon beta-1a	No	4	
Avonex Kit	Interferon beta-1a	No	4	
AZASAN TAB 75 MG	Azathioprine	Yes	3	
AZASAN TAB 100MG	Azathioprine	Yes	3	
Azilect Tab 0.5MG	Rasagiline	No	2	
Azilect Tab 1MG	Rasagiline	No	2	
Azopt Sus 1% OP	Brinzolamide	No	2	
AZULFIDINE TAB 500MG EN	Sulfasalazine	Yes	3	
AZULFIDINE TAB 500MG	Sulfasalazine	Yes	3	
Baraclude Sol .05MG/ML	Entecavir	No	2	
Baraclude Tab 0.5MG	Entecavir	No	2	
Baraclude Tab 1MG	Entecavir	No	2	



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BENTYL CAP 10MG	Dicyclomine	Yes	3	
BENTYL TAB 20MG	Dicyclomine	Yes	3	
BETADINE SOL 5% OP	Povidone-Iodine	No	3	
BETAGAN SOL 0.25% OP	Levobunolol	Yes	3	
BETAGAN SOL 0.5% OP	Levobunolol	Yes	3	
Betaseron Inj 0.3MG	Interferon beta-1b	No	4	
Betoptic S Sus 0.2%	Betaxolol	No	3	
BEYAZ	DROSPIRENONE-ETHINYL ESTRADIOL-LEVOMEFOLATE	No	2	
BICITRA SOL	Sodium Citrate and Citric Acid	Yes	3	
BIO-STATIN CAP 1000000	Nystatin	Yes	3	
BIO-STATIN CAP 500000	Nystatin	Yes	3	
BIO-STATIN POW	Nystatin	Yes	3	
BLEPHAMIDE OIN S.O.P.	Sulfacetamide and Prednisolone	Yes	3	
BLEPHAMIDE SUS OP	Sulfacetamide and Prednisolone	Yes	3	
BRETHINE TAB 2.5MG	Terbutaline	Yes	3	
BRETHINE TAB 5MG	Terbutaline	Yes	3	
BUMEX TAB 0.5MG	Bumetanide	Yes	3	
BUMEX TAB 1MG	Bumetanide	Yes	3	
BUMEX TAB 2MG	Bumetanide	Yes	3	
BUTISOL SOD TAB 30MG	Butabarbital	No	3	
BUTISOL SOD ELX 30MG/5ML	Butabarbital	No	3	
BUTISOL SOD TAB 50MG	Butabarbital	No	3	
Byetta Inj 10MCG	Exenatide	No	2	
Byetta Inj 5MCG	Exenatide	No	2	
CADUET TAB 10/10MG	Amlodipine and Atorvastatin	No	2	
CADUET TAB 10/20MG	Amlodipine and Atorvastatin	No	2	
CADUET TAB 10/40MG	Amlodipine and Atorvastatin	No	2	
CADUET TAB 10/80MG	Amlodipine and Atorvastatin	No	2	
CADUET TAB 2.5/10MG	Amlodipine and Atorvastatin	No	2	
CADUET TAB 2.5/20MG	Amlodipine and Atorvastatin	No	2	
CADUET TAB 2.5/40MG	Amlodipine and Atorvastatin	No	2	
CADUET TAB 5MG/10MG	Amlodipine and Atorvastatin	No	2	
CADUET TAB 5MG/20MG	Amlodipine and Atorvastatin	No	2	
CADUET TAB 5MG/40MG	Amlodipine and Atorvastatin	No	2	
CADUET TAB 5MG/80MG	Amlodipine and Atorvastatin	No	2	
CAFERGOT TAB 1-100MG	Ergotamine and Caffeine	No	3	
CALAN TAB 80MG	Verapamil	Yes	3	
CALAN SR TAB 120MG	Verapamil	Yes	3	
CALAN SR TAB 180MG	Verapamil	Yes	3	
CALAN SR TAB 240MG	Verapamil	Yes	3	
CAMILA TAB 0.35MG	Norethindrone	Yes	1	



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CANASA SUP 1000MG	Mesalamine	No	3	
CAPEX SHA 0.01%	Fluocinolone	No	3	
CAPOTEN TAB 12.5MG	Captopril	Yes	3	
CAPOTEN TAB 25MG	Captopril	Yes	3	
CAPOTEN TAB 50MG	Captopril	Yes	3	
CAPOTEN TAB 100MG	Captopril	Yes	3	
CAPOZIDE TAB 25-15MG	Captopril and Hydrochlorothiazide	Yes	3	
CAPOZIDE TAB 25-25MG	Captopril and Hydrochlorothiazide	Yes	3	
CAPOZIDE TAB 50-15MG	Captopril and Hydrochlorothiazide	Yes	3	
CAPOZIDE TAB 50-25MG	Captopril and Hydrochlorothiazide	Yes	3	
CARAC CRE 0.5%	Fluorouracil	Yes	3	
CARAFATE SUS 1GM/10ML	Sucralfate	Yes	3	
CARAFATE TAB 1GM	Sucralfate	Yes	3	
CARBATROL CAP 100MG	Carbamazepine	No	3	
CARBATROL CAP 200MG	Carbamazepine	No	3	
CARBATROL CAP 300MG	Carbamazepine	No	3	
CARDIZEM TAB 120MG	Diltiazem	Yes	3	
CARDIZEM TAB 30MG	Diltiazem	Yes	3	
CARDIZEM TAB 60MG	Diltiazem	Yes	3	
CARDIZEM TAB 90MG	Diltiazem	Yes	3	
CARDIZEM Cap SR 12HR 120 MG	Diltiazem	Yes	3	
CARDIZEM Cap SR 12HR 60 MG	Diltiazem	Yes	3	
CARDIZEM Cap SR 12HR 90 MG	Diltiazem	Yes	3	
CARDIZEM CD CAP 120MG/24	Diltiazem	No	3	
CARDIZEM CD CAP 180MG/24	Diltiazem	No	3	
CARDIZEM CD CAP 240MG/24	Diltiazem	No	3	
CARDIZEM CD CAP 300MG/24	Diltiazem	No	3	
CARDIZEM CD CAP 360MG/24	Diltiazem	No	3	
CARDIZEM LA TAB 120MG	Diltiazem	No	3	
CARDIZEM LA TAB 180MG	Diltiazem	No	3	
CARDIZEM LA TAB 240MG	Diltiazem	No	3	
CARDIZEM LA TAB 300MG	Diltiazem	No	3	
CARDIZEM LA TAB 360MG	Diltiazem	No	3	
CARDIZEM LA TAB 420MG	Diltiazem	No	3	
CARTIA XT CAP 120/24HR	Diltiazem	Yes	3	
CARTIA XT CAP 180/24HR	Diltiazem	Yes	3	
CARTIA XT CAP 240/24HR	Diltiazem	Yes	3	
CARTIA XT CAP 300/24HR	Diltiazem	Yes	3	
CATAFLAM TAB 50MG	Diclofenac	Yes	3	
Celebrex Cap 100MG	Celecoxib	No	2	
Celebrex Cap 200MG	Celecoxib	No	2	



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Celebrex Cap 400MG	Celecoxib	No	2	
CELLCEPT CAP 250MG	Mycophenolate	No	3	
CELLCEPT TAB 500MG	Mycophenolate	No	3	
CELLCEPT SUS 200MG/ML	Mycophenolate	No	3	
CESIA	DESOGEST-ETHIN EST	Yes	1	
CETA PLUS Cap 5-500 MG	Hydrocodone and Acetaminophen	Yes	3	
CIMZIA KIT 2 x 200MG	Certolizumab Pegol	No	4	
Cimzia Starter Kit Subcutaneous Kit 6 X 200 MG/ML	Certolizumab Pegol	No	4	
Cimzia Subcutaneous Kit 2 X 200 MG/ML	Certolizumab Pegol	No	4	
Ciprodex Sus 0.3-0.1%	Ciprofloxacin and Dexamethasone	No	2	
CLENIA CRE 10-5%	Sulfur and Sulfacetamide	Yes	1	
CLINDAGEL GEL 1%	Clindamycin	Yes	3	
CLINDAMAX CRE 2%	Clindamycin	Yes	1	
CLINDAMAX GEL 1%	Clindamycin	Yes	1	
CLINDESSE CRE 2%	Clindamycin	No	3	
CLINDETS 1%	Clindamycin	Yes	1	
CLINORIL TAB 200MG	Sulindac	Yes	3	
CLOLAR INJ 1MG/ML	Clofarabine	No	5	
CLOMID TAB 50MG	ClomiPHENE	Yes	3	
CLORPRES TAB 0.1-15MG	Clonidine and Chlorthalidone	No	3	
CLORPRES TAB 0.2-15MG	Clonidine and Chlorthalidone	No	3	
CLORPRES TAB 0.3-15MG	Clonidine and Chlorthalidone	No	3	
COLDCOUGH HC SYP	Pseudoephedrine, Hydrocodone, and Chlorpheniramine	Yes	3	
COLY-MYCIN-S SUS OTIC	Neomycin, Colistin, Hydrocortisone, and Thonzonium	No	3	
COLYTE SOL	Polyethylene Glycol-Electrolyte Solution	Yes	3	
COMBIGAN Ophth Soln 0.2-0.5%	Brimonidine Tartrate-Timolol Maleate Ophth Soln	No	3	
Combivent Aerosol	Ipratropium and Albuterol	No	3	
COMBIVIR TAB 150/300	Zidovudine and Lamivudine	No	2	
COMPAZINE SUP 5MG	Prochlorperazine	Yes	3	
COMPAZINE SUP 2.5MG	Prochlorperazine	Yes	3	
COMPAZINE SYR 5MG/5ML	Prochlorperazine	Yes	3	
COMPAZINE Inj 5 MG/ML	Prochlorperazine	Yes	3	
COMPAZINE Tab 10 MG	Prochlorperazine	Yes	3	
COMPAZINE Tab 5 MG	Prochlorperazine	Yes	3	
COMPRO SUP 25MG	Prochlorperazine	Yes	3	
COMTAN TAB 200MG	Entacapone	No	3	
CONSTULOSE SOL 10GM/15	Lactulose	Yes	3	
Copaxone Kit 20MG/ML	Glatiramer Acetate Inj Kit 20 MG/ML	No	4	
Copegus Tab 200MG	Ribavirin	Yes	3	
CORDARONE TAB 200MG	Amiodarone	Yes	3	
CORDRAN LOT 0.05%	Flurandrenolide	No	3	



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CORDRON-HC LIQ	Pseudoephedrine, Hydrocodone, and Chlorpheniramine	Yes	3	
CORGARD TAB 20MG	Nadolol	Yes	3	
CORGARD TAB 40MG	Nadolol	Yes	3	
CORGARD TAB 80MG	Nadolol	Yes	3	
CORTISPORIN CRE 0.5%	Neomycin, Polymyxin B, and Hydrocortisone	No	3	
CORTISPORIN SUS OP 1%	Neomycin, Polymyxin B, and Hydrocortisone	Yes	3	
CORTISPORIN SOL 1% OTIC	Neomycin, Polymyxin B, and Hydrocortisone	Yes	3	
CORTISPORIN SUS 1% OTIC	Neomycin, Polymyxin B, and Hydrocortisone	Yes	3	
CORTISPORIN SUS -TC OTIC	Neomycin, Colistin, Hydrocortisone, and Thonzonium	No	3	
COUMADIN TAB 10MG	Warfarin	Yes	3	
COUMADIN TAB 1MG	Warfarin	Yes	3	
COUMADIN TAB 2.5MG	Warfarin	Yes	3	
COUMADIN TAB 2MG	Warfarin	Yes	3	
COUMADIN TAB 3MG	Warfarin	Yes	3	
COUMADIN TAB 4MG	Warfarin	Yes	3	
COUMADIN TAB 5MG	Warfarin	Yes	3	
COUMADIN TAB 6MG	Warfarin	Yes	3	
COUMADIN TAB 7.5MG	Warfarin	Yes	3	
COZAAR TAB 100MG	Losartan	No	3	
COZAAR TAB 25MG	Losartan	No	3	
COZAAR TAB 50MG	Losartan	No	3	
CREON 5 CAP DR PARTICLES 16.6-5-18.75 MU	Pancrelipase	No	2	
CREON 10 CAP DR PARTICLES 33.2-10-37.5 MU	Pancrelipase	No	2	
CREON 20 CAP DR PARTICLES 66.4-20-75 MU	Pancrelipase	No	2	
Creon Oral Capsule Delayed Release Particles 12000 UN	Pancrelipase	No	2	
Creon Oral Capsule Delayed Release Particles 24000 UN	Pancrelipase	No	2	
Creon Oral Capsule Delayed Release Particles 3000-950	Pancrelipase	No	2	
Creon Oral Capsule Delayed Release Particles 6000 UN	Pancrelipase	No	2	
CRESTOR TAB 10MG	Rosuvastatin	No	3	
CRESTOR TAB 20MG	Rosuvastatin	No	3	
CRESTOR TAB 40MG	Rosuvastatin	No	3	
CRESTOR TAB 5MG	Rosuvastatin	No	3	
CRIXIVAN CAP 100MG	Indinavir Sulfate	No	2	
CRIXIVAN CAP 200MG	Indinavir Sulfate	No	2	
CRIXIVAN CAP 333MG	Indinavir Sulfate	No	2	
CRIXIVAN CAP 400MG	Indinavir Sulfate	No	2	
CROLOM SOL 4% OP	Cromolyn	Yes	3	
CUPRIMINE CAP 125MG	Penicillamine	No	3	
CUPRIMINE CAP 250MG	Penicillamine	No	3	
CYCLOGYL SOL 0.5% OP	Cyclopentolate	Yes	3	
CYCLOGYL SOL 1% OP	Cyclopentolate	Yes	3	



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CYCLOGYL SOL 2% OP	Cyclopentolate	Yes	3	
CYLATE SOL 1% OP	Cyclopentolate	Yes	3	
CYSTOSPAZ TAB 0.15MG	Hyoscyamine	Yes	3	
CYSTOSPAZ-M SR 12HR 0.375MG	Hyoscyamine	Yes	3	
CYTADREN TAB 250MG	Aminoglutethimide	No	3	
CYTOMEL TAB 25MCG	Liothyronine	Yes	3	
CYTOMEL TAB 50MCG	Liothyronine	Yes	3	
CYTOMEL TAB 5MCG	Liothyronine	Yes	3	
CYTOTEC TAB 100MCG	Misoprostol	Yes	3	
CYTOTEC TAB 200MCG	Misoprostol	Yes	3	
CYTRA-2 SOL	Sodium Citrate and Citric Acid	Yes	3	
CYTRA-K SOL	Potassium Citrate and Citric Acid	Yes	3	
DANTRIUM CAP 100MG	Dantrolene	Yes	3	
DANTRIUM CAP 25MG	Dantrolene	Yes	3	
DANTRIUM CAP 50MG	Dantrolene	Yes	3	
DECADRON ELX 0.5/5ML	Dexamethasone	Yes	3	
DEPADE Tab 50 MG	Naltrexone	Yes	3	
DEPEN TITRA TAB 250MG	Penicillamine	No	3	
DepoCyt Inj 50MG/5ML	Cytarabine (Liposomal)	No	5	
DERMA-SMOOTH OIL /FS BODY	Fluocinolone	No	3	
DETROL TAB 1MG	Tolterodine	No	2	
DETROL TAB 2MG	Tolterodine	No	2	
DETROL LA CAP 2MG	Tolterodine	No	2	
DETROL LA CAP 4MG	Tolterodine	No	2	
DETUSS Liquid 30-2-5 MG/5ML	Pseudoephedrine, Hydrocodone, and Chlorpheniramine	Yes	3	
DEXACIDIN Ophth Susp 0.1%	Neomycin, Polymyxin B, and Dexamethasone	Yes	3	
DEXASPORIN Ophth Susp 0.1%	Neomycin, Polymyxin B, and Dexamethasone	Yes	3	
DEXEDRINE Cap SR 24HR 10 MG	Dextroamphetamine	Yes	3	
DEXEDRINE Cap SR 24HR 15 MG	Dextroamphetamine	Yes	3	
DEXEDRINE Cap SR 24HR 5 MG	Dextroamphetamine	Yes	3	
DEXPAK Tab 1.5 MG Taper Pack	Dexamethasone	Yes	3	
DHT TAB 0.4MG	Dihydrotachysterol	No	3	
DHT TAB 0.125MG	Dihydrotachysterol	No	3	
DHT INTENSOL CNT 0.2MG/ML	Dihydrotachysterol	No	3	
DIAMOX SR 12HR 500 MG	AcetaZOLAMIDE	Yes	3	
DIASTAT ACDL GEL 10-15-20	Diazepam	No	3	
DIASTAT ACDL GEL 5-7.5-10	Diazepam	No	3	
DIASTAT ADUL GEL 20MG GEL	Diazepam	No	3	
DIASTAT PED GEL 2.5M GEL	Diazepam	No	3	
DIBENZYLINE CAP 10MG	Phenoxybenzamine	No	3	
DIDRONEL TAB 200MG	Etidronate Disodium	No	3	



Ventegra Preferred Formulary Alphabetical Listing 2012

Label Name	Generic Name	Generic Available	Preferred Tiering Recommendations	Benefit Notes
DIGITEX Tab 0.25 MG	Digoxin	Yes	3	
DIHISTINE Liq 30-2-10 MG/5ML	Chlorpheniramine, Pseudoephedrine, and Codeine	Yes	3	
DIHYDRO-CP Syrup 15-2-7.5 MG/5ML	Pseudoephedrine, Dihydrocodeine, and Chlorpheniramine	Yes	3	
DILACOR XR Cap 24HR 120 MG	Diltiazem	Yes	3	
DILACOR XR Cap 24HR 180 MG	Diltiazem	Yes	3	
DILACOR XR Cap 24HR 240 MG	Diltiazem	Yes	3	
DILANTIN CHEW TAB 50MG	Phenytoin	Yes	3	
DILANTIN Extended Cap 100 MG	Phenytoin	Yes	3	
DILANTIN Extended Cap 30 MG	Phenytoin	Yes	3	
DILANTIN SUSP 125MG/5ML	Phenytoin	Yes	3	
DILATRATE SR Cap 40 MG	Isosorbide Dinitrate	Yes	3	
DILTIA XT Cap 24HR 120 MG	Diltiazem	Yes	3	
DILTIA XT Cap 24HR 180 MG	Diltiazem	Yes	3	
DILTIA XT Cap 24HR 240 MG	Diltiazem	Yes	3	
DIOVAN TAB 160MG	Valsartan	No	3	
DIOVAN TAB 320MG	Valsartan	No	3	
DIOVAN TAB 40MG	Valsartan	No	3	
DIOVAN TAB 80MG	Valsartan	No	3	
DIOVAN HCT TAB 160/12.5	Valsartan and Hydrochlorothiazide	No	3	
DIOVAN HCT TAB 160/25MG	Valsartan and Hydrochlorothiazide	No	3	
DIOVAN HCT TAB 320/12.5	Valsartan and Hydrochlorothiazide	No	3	
DIOVAN HCT TAB 320/25MG	Valsartan and Hydrochlorothiazide	No	3	
DIOVAN HCT TAB 80/12.5	Valsartan and Hydrochlorothiazide	No	3	
DISALCID Tab 500 MG	Salsalate	Yes	3	
DISALCID Tab 750 MG	Salsalate	Yes	3	
DITROPAN SYRUP 5MG/5ML	Oxybutynin	Yes	3	
DITROPAN Tab 5 MG	Oxybutynin	Yes	3	
DIURIL Susp 250 MG/5ML	Chlorothiazide	Yes	3	
DOLGIC Elixir 50-325-40 MG/15ML	Butalbital, Acetaminophen, and Caffeine	Yes	3	
DOLGIC TAB 50-750-40 MG/15ML	Butalbital, Acetaminophen, and Caffeine	Yes	3	
DOLOBID TAB 250MG	Diflunisal	Yes	3	
DOLOBID TAB 500MG	Diflunisal	Yes	3	
DONNATAL Elixir 16 MG/5ML	Hyoscyamine, Atropine, Scopolamine, and Phenobarbital	Yes	3	
DONNATAL EXTENTAB Tab CR 48 MG	Hyoscyamine, Atropine, Scopolamine, and Phenobarbital	Yes	3	
DONNATAL Tab 16.2 MG	Hyoscyamine, Atropine, Scopolamine, and Phenobarbital	Yes	3	
DORYX Tab 100 MG	Doxycycline Hyclate	No	3	
DORYX Tab 150 MG	Doxycycline Hyclate	No	3	
DORYX Tab 75 MG	Doxycycline Hyclate	No	3	
DROXIA Cap 200 MG	Hydroxyurea	Yes	3	
DROXIA Cap 300 MG	Hydroxyurea	Yes	3	
DROXIA Cap 400 MG	Hydroxyurea	Yes	3	



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Label Name	Generic Name	Generic Available	Preferred Tiering Recommendations	Benefit Notes
Duetact Tab 30-2MG	Pioglitazone and Glimepiride	No	3	
Duetact Tab 30-4MG	Pioglitazone and Glimepiride	No	3	
DULERA AEROSOL 100-5 MCG/ACT	MOMETASONE FUROATE-FORMOTEROL FUMARATE DIHYDRATE	No	2	
DULERA AEROSOL 200-5 MCG/ACT	MOMETASONE FUROATE-FORMOTEROL FUMARATE DIHYDRATE	No	2	
DURATUSS DM Elixir 20-200 MG/5ML	Guaifenesin and Dextromethorphan	Yes	3	
DURATUSS DM Elixir 25-225 MG/5ML	Guaifenesin and Dextromethorphan	Yes	3	
DUREZOL EMULSION 0.05 %	DIFLUPREDNATE	No	3	
DYAZIDE Cap 37.5-25 MG	Hydrochlorothiazide and Triamterene	Yes	3	
DYRENIUM CAP 100MG	Triamterene	No	3	
DYRENIUM CAP 50MG	Triamterene	No	3	
EASPRIN 975 MG	Aspirin	Yes	3	
ECONOPRED Ophth Susp 1%	PrednisolONE	Yes	3	
EFFER-K Tab 10 mEq	Potassium Bicarbonate and Potassium Citrate	Yes	3	
EFFER-K Tab 20 mEq	Potassium Bicarbonate and Potassium Citrate	Yes	3	
EFFER-K Tab 25 mEq	Potassium Bicarbonate and Potassium Citrate	Yes	3	
EFUDEX CREAM 5%	Fluorouracil	Yes	3	
EFUDEX Soln 5%	Fluorouracil	Yes	3	
ELIMITE Cream 5%	Permethrin	Yes	3	
ELIXOPHYLLN Elixir 80 MG/15ML	Theophylline	Yes	3	
ELOCON Cream 0.1%	Mometasone Furoate	Yes	3	
ELOCON OINT 0.1%	Mometasone Furoate	Yes	3	
ELOCON SOLUTION 0.1%	Mometasone Furoate	Yes	3	
EMBEDA CAP CR 100-4 MG	MORPHINE-NALTREXONE	No	3	
EMBEDA CAP CR 20-0.8 MG	MORPHINE-NALTREXONE	No	3	
EMBEDA CAP CR 30-1.2 MG	MORPHINE-NALTREXONE	No	3	
EMBEDA CAP CR 50-2 MG	MORPHINE-NALTREXONE	No	3	
EMBEDA CAP CR 60-2.4 MG	MORPHINE-NALTREXONE	No	3	
EMBEDA CAP CR 80-3.2 MG	MORPHINE-NALTREXONE	No	3	
Emsam DIS 12MG/24H	Selegiline	No	3	
Emsam DIS 6MG/24HR	Selegiline	No	3	
Emsam DIS 9MG/24HR	Selegiline	No	3	
EMTRIVA CAP 200	Emtricitabine	No	2	
EMTRIVA SOL 10MG/ML	Emtricitabine	No	2	
ENABLEX TAB 15MG	Darifenacin	No	3	
ENABLEX TAB 7.5MG	Darifenacin	No	3	
ENULOSE Solution 10 GM/15ML	Lactulose	Yes	3	
EPIVIR TAB 150MG	Lamivudine	No	2	
EPIVIR TAB 300MG	Lamivudine	No	2	
EPIVIR HBV SOL 5MG/ML	Lamivudine	No	2	
EPIVIR HBV TAB 100MG	Lamivudine	No	2	
EPZICOM TAB	Abacavir Sulfate-Lamivudine	No	2	



Ventegra Preferred Formulary Alphabetical Listing 2012

Label Name	Generic Name	Generic Available	Preferred Tiering Recommendations	Benefit Notes
EQUETRO CAP 300MG	Carbamazepine	No	3	
EQUETRO CAP 100MG	Carbamazepine	No	3	
EQUETRO CAP 200MG	Carbamazepine	No	3	
ERGOMAR SUB 2MG	Ergotamine	No	3	
ERRIN Tab 0.35 MG	Norethindrone	Yes	1	
ERYPED Susp 100 MG/2.5ML	Erythromycin	No	3	
ERY-TAB Tab Delayed Release 250 MG	Erythromycin Delayed Release	No	3	
ERY-TAB Tab Delayed Release 333 MG	Erythromycin Delayed Release	No	3	
ERY-TAB Tab Delayed Release 500 MG	Erythromycin Delayed Release	No	3	
ERYTHROCIN Stearate Tab 250 MG	Erythromycin	Yes	3	
ERYTHROCIN Stearate Tab 500 MG	Erythromycin	No	3	
ESCLIM TD Patch Biweekly 0.025 MG/24HR	Estradiol	No	3	
ESCLIM TD Patch Biweekly 0.0375 MG/24HR	Estradiol	No	3	
ESCLIM TD Patch Biweekly 0.05 MG/24HR	Estradiol	No	3	
ESCLIM TD Patch Biweekly 0.075 MG/24HR	Estradiol	No	3	
ESCLIM TD Patch Biweekly 0.1 MG/24HR	Estradiol	No	3	
ESGIC Cap 50-325-40 MG	Butalbital, Acetaminophen, and Caffeine	Yes	3	
ESGIC TAB 50-325-40 MG	Butalbital, Acetaminophen, and Caffeine	Yes	3	
ESGIC-PLUS Cap 50-500-40 MG	Butalbital, Acetaminophen, and Caffeine	Yes	3	
ESGIC-PLUS Tab 50-500-40 MG	Butalbital, Acetaminophen, and Caffeine	Yes	3	
ESTRADERM 0.05 MG/24HR	Estradiol	Yes	3	
ESTRADERM 0.1MG/24HR	Estradiol	Yes	3	
ESTRASORB EMU	Estradiol	No	3	
ESTROGEL GEL	Estradiol	No	3	
EVOCLIN Foam 1%	Clindamycin Phosphate	No	3	
EXOREX STABILIZING CRE	Coal Tar	No	3	
FAMVIR Tab 125 MG	Famciclovir	Yes	3	
FAMVIR Tab 250 MG	Famciclovir	Yes	3	
FAMVIR Tab 500 MG	Famciclovir	Yes	3	
FAZACLO Tab 100 MG	Clozapine	No	3	
FAZACLO Tab 12.5 MG	Clozapine	No	3	
FAZACLO Tab 25 MG	Clozapine	No	3	
FELBATOL TAB 400MG	Felbamate	No	3	
FELBATOL TAB 600MG	Felbamate	No	3	
FELBATOL SUS 600/5ML	Felbamate	No	3	
FELDENE Cap 10 MG	Piroxicam	Yes	3	
FELDENE Cap 20 MG	Piroxicam	Yes	3	
FEMTRACE TAB 0.9MG	Estradiol	No	3	
FEMTRACE TAB 1.8MG	Estradiol	No	3	
FEMTRACE TAB 0.45MG	Estradiol	No	3	
FLEBOGAMMA DIF SOLUTION 5 %	IMMUNE GLOBULIN (HUMAN) IV	No	4	



Ventegra Preferred Formulary Alphabetical Listing 2012

Label Name	Generic Name	Generic Available	Preferred Tiering Recommendations	Benefit Notes
FLEBOGAMMA DIF SOLUTION 5 %	IMMUNE GLOBULIN (HUMAN) IV	No	4	
FLEBOGAMMA DIF SOLUTION 5 %	IMMUNE GLOBULIN (HUMAN) IV	No	4	
FLEBOGAMMA DIF SOLUTION 5 %	IMMUNE GLOBULIN (HUMAN) IV	No	4	
FLEBOGAMMA DIF SOLUTION 5 %	IMMUNE GLOBULIN (HUMAN) IV	No	4	
Flector Transdermal Patch 1.3 %	Diclofenac Epolamine	No	2	
FLEXERIL Tab 10 MG	Cyclobenzaprine	Yes	3	
FLEXERIL Tab 5 MG	Cyclobenzaprine	Yes	3	
FLORINEF Tab 0.1 MG	Fludrocortisone	Yes	3	
Fludara Inj 50MG	Fludarabine	Yes	5	
FLUMADINE Tab 100 MG	Rimantadine	Yes	3	
FluMist Nasa Liq	Influenza Virus Vaccine	No	2	
FLUOROPLEX Cream 1%	Fluorouracil	Yes	3	
FOLLISTIM AQ 150U	Follitropin Beta	No	4	
FOLLISTIM AQ 300U	Follitropin Beta	No	4	
FOLLISTIM AQ 600U	Follitropin Beta	No	4	
FOLLISTIM AQ 75U	Follitropin Beta	No	4	
FOLLISTIM AQ 900U	Follitropin Beta	No	4	
FORADIL AER	Formoterol	No	2	
FORTAMET Tab 1000 MG	Metformin	Yes	3	
FORTAMET Tab 500 MG	Metformin	Yes	3	
FORTOVASE CAP 200MG	Saquinavir	No	2	
FreeStyle Flash Meter		No	2	
FreeStyle Freedom Lite Meter		No	2	
FreeStyle Lite Meter		No	2	
FreeStyle Lite Test Strips 50 ct		No	2	
FreeStyle Test Strips 100 ct		No	2	
FreeStyle Test Strips 50 ct		No	2	
Fudr Inj 0.5GM	Floxuridine	Yes	5	
FURADANTIN Susp 25 MG/5ML	Nitrofurantoin Susp	No	3	
FUZEON KIT 90 MG	ENFUVRTIDE	No	2	
GANIDIN NR LIQ 100/5ML	Guaifenesin	Yes	3	
GANI-TUSS Liquid 10-100 MG/5ML	Guaifenesin and Dextromethorphan	Yes	3	
GANTRISIN Susp 500 MG/5ML	SULFISOXAZOLE ACETYL SUSP	No	3	
GASTROCROM Oral Conc 100 MG/5ML	Cromolyn	Yes	3	
Gemzar Inj 1 GM	Gemcitabine	No	5	
Gemzar Inj 200MG	Gemcitabine	No	5	
GENERLAC Solution 10 GM/15ML	Lactulose	Yes	3	
GENGRAF Cap 25 MG	CycloSPORINE	Yes	3	
GENOPTIC Ophth Soln 0.3%	Gentamicin	Yes	3	
GENTACIDIN Ophth Soln 0.3%	Gentamicin	Yes	3	
GENTAK Ophth Soln 0.3%	Gentamicin	Yes	3	



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Label Name	Generic Name	Generic Available	Preferred Tiering Recommendations	Benefit Notes
GEODON CAP 20MG	Ziprasidone	No	2	
GEODON CAP 40MG	Ziprasidone	No	2	
GEODON CAP 60MG	Ziprasidone	No	2	
GEODON CAP 80MG	Ziprasidone	No	2	
Gilenya 0.5MG Cap	Fingolimod	No	5	
Gleevec Tab 100MG	Imatinib	No	3	
Gleevec Tab 400MG	Imatinib	No	3	
GLUCAGEN INJ HYPOKIT	Glucagon	No	5	
GLUCAGEN DIA INJ 1MG	Glucagon	No	3	
GLUCAGON KIT 1MG	Glucagon	No	3	
GLUCOCARD 01 BLOOD GLUCOSE KIT		No	2	
GLUCOCARD 01 CONTROL SOLUTION NORMAL/HIGH		No	2	
GLUCOCARD 01 CONTROL SOLUTION/NORMAL		No	2	
GLUCOCARD 01 TEST STRIPS		No	2	
GLUCOCARD VITAL BLOOD GLUCOSE MONITORING SYSTEM		No	2	
GLUCOCARD VITAL TEST STRIPS		No	2	
GLYCOLAX 3350 Oral Powder	Polyethylene Glycol-Electrolyte Solution	Yes	3	
GRANULEX	Trypsin, Balsam Peru, and Castor Oil	Yes	3	
GRIFULVIN Susp 125 MG/5ML	Griseofulvin	Yes	3	
GRIFULVIN TAB 500MG	Griseofulvin	Yes	3	
GRIS-PEG Tab 125 MG	Griseofulvin	Yes	3	
GRIS-PEG Tab 250 MG	Griseofulvin	Yes	3	
GUAIFENESIN DM Tab 12HR 30-600 MG	Guaifenesin and Dextromethorphan	Yes	3	
GYNODIOL TAB 1.5MG	Estradiol	No	3	
GYNODIOL TAB 1MG	Estradiol	No	3	
GYNODIOL TAB 2MG	Estradiol	No	3	
HALDOL Soln 100 MG/ML	Haloperidol	Yes	3	
HALDOL Soln 50 MG/ML	Haloperidol	Yes	3	
HALOG OIN 0.1%	Halcinonide	No	3	
HALOG CRE 0.1%	Halcinonide	No	3	
HEPSERA TAB 10MG	Adefovir Dipivoxil	No	2	
HISTINEX PV	Pseudoephedrine, Hydrocodone, and Chlorpheniramine	Yes	3	
HIVID TAB 0.375MG	Zalcitabine	No	2	
HIVID TAB 0.75MG	Zalcitabine	No	2	
Homatropine HBr Ophth Soln 2%	Homatropine	No	3	
Homatropine HBr Ophth Soln 5%	Homatropine	No	3	
Humira Inj Kit 20MG/0.4ML	Adalimumab	No	4	
Humira Inj Kit 40MG/0.8ML	Adalimumab	No	4	
Humira Pen Kit 40MG/0.8ML	Adalimumab	No	4	
Humira Pen Kit Starter 40MG/0.8ML	Adalimumab	No	4	
HUMULIN INJ 70/30	Insulin NPH and Insulin Regular	No	3	



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Label Name	Generic Name	Generic Available	Preferred Tiering Recommendations	Benefit Notes
Humulin 50/50	Insulin NPH and Insulin Regular	No	3	
HUMULIN N INJ U-100	Insulin NPH and Insulin Regular	No	3	
HUMULIN R INJ U-100	Insulin NPH and Insulin Regular	No	3	
Hyalgan Inj 20MG/2ML	Hyaluronate Intra-articular	No	4	
Hyalgan Inj 20MG/2ML	Hyaluronate Intra-articular	No	4	
Hyalgan Inj 20MG/2ML	Hyaluronate Intra-articular	No	4	
Hyalgan Inj 20MG/2ML	Hyaluronate Intra-articular	No	4	
Hydrea Cap 500 MG	Hydroxyurea	Yes	3	
HYDRON Liquid 30-2-5 MG/5ML	Pseudoephedrine, Hydrocodone, and Chlorpheniramine	Yes	3	
HYDRO-TUSSIN DHC Syrup	Pseudoephedrine, Dihydrocodeine, and Chlorpheniramine	Yes	3	
HYDRO-TUSSIN DM ELIXIR	Guaifenesin and Dextromethorphan	Yes	3	
HYDRO-TUSSIN HC SYRUP	Pseudoephedrine, Hydrocodone, and Chlorpheniramine	Yes	3	
HYPHED SYRUP	Pseudoephedrine, Hydrocodone, and Chlorpheniramine	Yes	3	
HYTAKEROL CAP 0.125MG	Dihydrotachysterol	No	3	
HYZAAR TAB 100-12.5	Losartan and Hydrochlorothiazide	No	3	
HYZAAR TAB 100-25	Losartan and Hydrochlorothiazide	No	3	
HYZAAR TAB 50-12.5	Losartan and Hydrochlorothiazide	No	3	
IMDUR 120MG	Isosorbide Mononitrate	Yes	3	
IMDUR 30MG	Isosorbide Mononitrate	Yes	3	
IMDUR 60MG	Isosorbide Mononitrate	Yes	3	
IMURAN 50MG	Azathioprine	Yes	3	
INDERAL 10MG	Propranolol	Yes	3	
INDERAL 20MG	Propranolol	Yes	3	
INDERAL 40MG	Propranolol	Yes	3	
INDERAL 60MG	Propranolol	Yes	3	
INDERAL 80MG	Propranolol	Yes	3	
INDERAL LA CAP 120MG	Propranolol	Yes	3	
INDERAL LA CAP 160MG	Propranolol	Yes	3	
INDERAL LA CAP 60MG	Propranolol	Yes	3	
INDERAL LA CAP 80MG	Propranolol	Yes	3	
INDERIDE Tab 40-25 MG	Propranolol and Hydrochlorothiazide	Yes	3	
INDERIDE Tab 80-25 MG	Propranolol and Hydrochlorothiazide	Yes	3	
INDOCIN Cap 25 MG	Indomethacin	Yes	3	
INDOCIN Cap 50MG	Indomethacin	Yes	3	
INDOCIN SUSP 25 MG/5ML	Indomethacin	Yes	3	
INNOPRAN XL CAP 120MG	Propranolol	No	3	
INNOPRAN XL CAP 80MG	Propranolol	No	3	
INTAL INH	Cromolyn	Yes	3	
INTAL SOL NEB 20MG/2ML	Cromolyn	Yes	3	
INTELENCE TAB 100 MG	etravirine	No	2	
INVEGA TAB 3MG	Paliperidone	No	3	



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Label Name	Generic Name	Generic Available	Preferred Tiering Recommendations	Benefit Notes
INVEGA TAB 6MG	Paliperidone	No	3	
INVEGA TAB 9MG	Paliperidone	No	3	
INVIRASE CAP 200MG	Saquinavir Mesylate	No	2	
INVIRASE TAB 500	Saquinavir Mesylate	No	2	
IOPHEN-NR LIQ 100MG/5ML	Guaifenesin	Yes	3	
ISENTRESS TAB 400MG	Raltegravir Potassium	No	2	
ISMO TAB 20MG	Isosorbide Mononitrate	Yes	3	
ISOCHRON TAB 40MG	Isosorbide Dinitrate	Yes	3	
ISOPTIN SR TAB 120MG	Verapamil	No	3	
ISOPTIN SR TAB 180MG	Verapamil	No	3	
ISOPTIN SR TAB 240MG	Verapamil	No	3	
ISOPTO ATROPINE OPH SOL 1%	Atropine	Yes	3	
ISOPTO CARPINE OPH SOL 2%	Pilocarpine	Yes	3	
ISOPTO CARPINE OPH SOL 4%	Pilocarpine	Yes	3	
ISOPTO CARPINE OPH SOL 6%	Pilocarpine	Yes	3	
ISORDIL TAB 10MG	Isosorbide Dinitrate	Yes	3	
ISORDIL TAB 40MG	Isosorbide Dinitrate	Yes	3	
ISORDIL TAB 5MG	Isosorbide Dinitrate	Yes	3	
Jantoven Tab 10MG	Warfarin	Yes	3	
Jantoven Tab 1MG	Warfarin	Yes	3	
Jantoven Tab 2.5MG	Warfarin	Yes	3	
Jantoven Tab 2MG	Warfarin	Yes	3	
Jantoven Tab 3MG	Warfarin	Yes	3	
Jantoven Tab 4MG	Warfarin	Yes	3	
Jantoven Tab 5MG	Warfarin	Yes	3	
Jantoven Tab 6MG	Warfarin	Yes	3	
Jantoven Tab 7.5MG	Warfarin	Yes	3	
Janumet Tab 50-1000 MG	Sitagliptin-Metformin HCl	No	2	
Janumet Tab 50-500 MG	Sitagliptin-Metformin HCl	No	2	
Januvia Tab 100 MG	Sitagliptin Phosphate	No	2	
Januvia Tab 25 MG	Sitagliptin Phosphate	No	2	
Januvia Tab 50 MG	Sitagliptin Phosphate	No	2	
JOLIVETTE Tab 0.35 MG	Norethindrone	Yes	1	
JUNEL 1.5/30	Ethinyl Estradiol and Norethindrone	Yes	1	
JUNEL 1/20	Ethinyl Estradiol and Norethindrone	Yes	1	
JUNEL FE 1.5/30	Ethinyl Estradiol and Norethindrone	Yes	1	
JUNEL FE 1/20	Ethinyl Estradiol and Norethindrone	Yes	1	
KALETRA CAP 133.3-33.3 MG	LOPINAVIR-RITONAVIR	No	2	
KALETRA SOL	LOPINAVIR-RITONAVIR	No	2	
KALETRA TAB 100-25MG	LOPINAVIR-RITONAVIR	No	2	
KALETRA TAB 200-50MG	LOPINAVIR-RITONAVIR	No	2	



Ventegra Preferred Formulary Alphabetical Listing 2012

Label Name	Generic Name	Generic Available	Preferred Tiering Recommendations	Benefit Notes
KAON-CL-10MEQ TAB	Potassium Chloride	Yes	3	
KARIVA TAB	Ethinyl Estradiol and Desogestrel	Yes	1	
KAY CIEL ORAL LIQ 10% 20MEQ/15ML	Potassium Chloride	Yes	3	
KAY CIEL POWDER PKT 20MEQ	Potassium Chloride	Yes	3	
KAYEXALATE	Sodium Polystyrene Sulfonate	Yes	3	
K-DUR 10MEQ	Potassium Chloride	Yes	3	
K-DUR 20MEQ	Potassium Chloride	Yes	3	
KEMADRIN TAB 5MG	Procyclidine	No	3	
KENALOG IN ORABASE 0.1%	Triamcinolone Acetonide Paste	Yes	3	
KIONEX POWDER	Sodium Polystyrene Sulfonate	Yes	3	
K-LOR POWDER PKT 20MEQ	Potassium Chloride	Yes	3	
KLOR-CON 10MEQ CR TAB	Potassium Chloride	Yes	3	
KLOR-CON 8MEQ CR TAB	Potassium Chloride	Yes	3	
KLOR-CON Powder Packet 25 MEQ	Potassium Chloride	Yes	3	
KLOR-CON POWDER PKT 20MEQ	Potassium Chloride	Yes	3	
KLOR-CON/EF TAB 10MEQ	Potassium Bicarbonate and Potassium Citrate	Yes	3	
KLOR-M CR Tab 10 MEQ	Potassium Chloride	Yes	3	
KLOR-M CR Tab 15 MEQ	Potassium Chloride	Yes	3	
KLOTRIX TAB CR 10MEQ	Potassium Chloride	Yes	3	
K-LYTE DS EFFER TAB 50MEQ	Potassium Bicarbonate and Potassium Citrate	Yes	3	
K-LYTE EFFER TAB 25MEQ	Potassium Bicarbonate and Potassium Citrate	Yes	3	
K-LYTE/CL 50 TAB 50MEQ	Potassium Bicarbonate and Potassium Chloride	No	3	
K-LYTE/CL TAB CITRUS	Potassium Bicarbonate and Potassium Chloride	No	3	
K-LYTE/CL TAB FRUIT	Potassium Bicarbonate and Potassium Chloride	No	3	
KOMBIGLYZE XR 2.5-1000 MG	SAXAGLIPTIN-METFORMIN HCL	No	2	
KOMBIGLYZE XR 5-1000 MG MG	SAXAGLIPTIN-METFORMIN HCL	No	2	
KOMBIGLYZE XR 5-500 MG MG	SAXAGLIPTIN-METFORMIN HCL	No	2	
K-PHOS TAB	Potassium Acid Phosphate	No	3	
K-PHOS MF TAB 155-350MG	Potassium Phosphate and Sodium Phosphate	Yes	3	
K-PHOS NEUTRAL TAB	Potassium Phosphate and Sodium Phosphate	Yes	3	
K-PHOS NO 2 TAB	Potassium Phosphate and Sodium Phosphate	Yes	3	
KRISTALOSE PKT 10GM	Lactulose	Yes	3	
KRISTALOSE PKT 20GM	Lactulose	Yes	3	
K-TABS 10MEQ	Potassium Chloride	Yes	3	
LAC-HYDRIN CREAM 12%	Lactic Acid and Ammonium Hydroxide	Yes	3	
LAC-HYDRIN LOTION 12%	Lactic Acid and Ammonium Hydroxide	Yes	3	
LAC-HYDRIN LOTION 5%	Lactic Acid and Ammonium Hydroxide	Yes	3	
LACLOTION LOTION	Lactic Acid and Ammonium Hydroxide	Yes	3	
LAMISIL Granules Packet 125 MG	Terbinafine	Yes	3	
LAMISIL Granules Packet 187.5 MG	Terbinafine	Yes	3	
LAMISIL Soln 1%	Terbinafine	No	3	



Ventegra Preferred Formulary Alphabetical Listing 2012

Label Name	Generic Name	Generic Available	Preferred Tiering Recommendations	Benefit Notes
LAMISIL Tab 250 MG	Terbinafine	Yes	3	
LANOXICAPS CAP 0.1MG	Digoxin	No	3	
LANOXIN Tab 0.125 MG	Digoxin	Yes	3	
LANOXIN Tab 0.25 MG	Digoxin	Yes	3	
Lantus Inj 100/ML	Insulin Glargine	No	1	
Lantus Inj Solostar	Insulin Glargine	No	2	
LASIX TAB 20MG	Furosemide	Yes	3	
LASIX TAB 40MG	Furosemide	Yes	3	
LASIX TAB 80MG	Furosemide	Yes	3	
Leustatin Inj 1MG/ML	Cladribine	Yes	5	
LEVBID	Hyoscyamine	Yes	3	
Levemir Inj	Insulin Detemir	No	1	
Levemir Inj Flexpen	Insulin Detemir	No	2	
LEVORA 0.15/30-28	LEVONORGESTREL & ETHINYL ESTRADIOL	Yes	1	
LEVOTHROID TAB 100MCG	Levothyroxine	Yes	3	
LEVOTHROID TAB 125MCG	Levothyroxine	Yes	3	
LEVOTHROID TAB 150MCG	Levothyroxine	Yes	3	
LEVOXYL Tab 100 MCG	Levothyroxine	Yes	3	
LEVOXYL Tab 25 MCG	Levothyroxine	Yes	3	
LEVOXYL Tab 50 MCG	Levothyroxine	Yes	3	
LEVOXYL Tab 75 MCG	Levothyroxine	Yes	3	
LEVOXYL Tab 88 MCG	Levothyroxine	Yes	3	
LEVSIN TAB 0.125MG	Hyoscyamine	Yes	3	
LEVSIN/SL TAB 0.125MG	Hyoscyamine	Yes	3	
LEVSINEX CAP	Hyoscyamine	Yes	3	
LEXIVA SUS 50M	Fosamprenavir Calcium	No	2	
LEXIVA TAB 700MG	Fosamprenavir Calcium	No	2	
LIBRIUM Cap 10 MG	Chlordiazepoxide	Yes	3	
LIBRIUM Cap 25 MG	Chlordiazepoxide	Yes	3	
LIBRIUM Cap 5 MG	Chlordiazepoxide	Yes	3	
LIDEX Cream 0.05%	Fluocinonide	Yes	3	
LIDEX GEL 0.05%	Fluocinonide	Yes	3	
LIDEX OINT 0.05%	Fluocinonide	Yes	3	
LIDEX-E CREAM 0.05%	Fluocinonide	Yes	3	
LIMBITROL DS TAB 10-25MG	Amitriptyline and Chlordiazepoxide	Yes	3	
LIMBITROL TAB 5-12.5MG	Amitriptyline and Chlordiazepoxide	Yes	3	
LIPITOR TAB 10MG	Atorvastatin	No	2	
LIPITOR TAB 20MG	Atorvastatin	No	2	
LIPITOR TAB 40MG	Atorvastatin	No	2	
LIPITOR TAB 80MG	Atorvastatin	No	2	
LODINE Cap 200 MG	Etodolac	Yes	3	



Ventegra Preferred Formulary Alphabetical Listing 2012

Label Name	Generic Name	Generic Available	Preferred Tiering Recommendations	Benefit Notes
LODINE Cap 300 MG	Etodolac	Yes	3	
LODINE TAB 400 MG	Etodolac	Yes	3	
LODINE TAB 500 MG	Etodolac	Yes	3	
LODOSYN TAB 25MG	Carbidopa	No	3	
LOMOTIL LIQ 2.5-0.025MG	Diphenoxylate and Atropine	Yes	3	
LOMOTIL TAB 2.5-0.025MG	Diphenoxylate and Atropine	Yes	3	
LONOX TAB	Diphenoxylate and Atropine	Yes	3	
LOPRESSOR Tab 100 MG	Metoprolol	Yes	3	
LOPRESSOR Tab 50 MG	Metoprolol	Yes	3	
LOXITANE Cap 10 MG	Loxapine	Yes	3	
LOXITANE Cap 25 MG	Loxapine	Yes	3	
LOXITANE Cap 5 MG	Loxapine	Yes	3	
LOXITANE Cap 50 MG	Loxapine	Yes	3	
LUMIGAN SOLUTION 0.01 %	Bimatoprost	No	2	
LUMIGAN SOLUTION 0.03%	Bimatoprost	No	2	
LYRICA CAP 100MG	Pregabalin	No	2	
LYRICA CAP 150MG	Pregabalin	No	2	
LYRICA CAP 200MG	Pregabalin	No	2	
LYRICA CAP 225MG	Pregabalin	No	2	
LYRICA CAP 25MG	Pregabalin	No	2	
LYRICA CAP 300MG	Pregabalin	No	2	
LYRICA CAP 50MG	Pregabalin	No	2	
LYRICA CAP 75MG	Pregabalin	No	2	
MARPLAN TAB 10MG	Isocarboxazid	No	3	
Maxalt Tab 10MG	Rizatriptan	No	2	QL
Maxalt Tab 5MG	Rizatriptan	No	2	QL
Maxalt-MLT Tab 10MG	Rizatriptan	No	2	QL
Maxalt-MLT Tab 5MG	Rizatriptan	No	2	QL
MAXIDEX SUS 0.1% OP	Dexamethasone	Yes	3	
Maxitrol Oint 0.1% Opth	Neomycin, Polymyxin B, and Dexamethasone	Yes	3	
Maxitrol Sus 0.1% Opth	Neomycin, Polymyxin B, and Dexamethasone	Yes	3	
MAXZIDE TAB 75-50	Hydrochlorothiazide and Triamterene	Yes	3	
MAXZIDE-25 TAB	Hydrochlorothiazide and Triamterene	Yes	3	
MEBARAL TAB 32MG	Mephobarbital	No	3	
MEBARAL TAB 50MG	Mephobarbital	No	3	
Medi-gesic tab 30-325 MG	Butalbital, Acetaminophen, and Caffeine	Yes	3	
Megace oral Sus 40MG/ML	Megestrol	Yes	3	
MELLARIL TAB 15MG	Thioridazine	Yes	3	
MELLARIL TAB 200MG	Thioridazine	Yes	3	
MELLARIL Tab 100 MG	Thioridazine	Yes	3	
MELLARIL CNT 100MG/ML	Thioridazine	Yes	3	



Ventegra Preferred Formulary Alphabetical Listing 2012

Label Name	Generic Name	Generic Available	Preferred Tiering Recommendations	Benefit Notes
MENOSTAR DIS 14MCG	Estradiol	No	3	
METHADEX SUS 0.1% OP	Neomycin, Polymyxin B, and Dexamethasone	Yes	3	
METHYLIN TAB 10MG	Methylphenidate	Yes	1	
METHYLIN TAB 20MG	Methylphenidate	Yes	1	
METHYLIN TAB 5MG	Methylphenidate	Yes	1	
METHYLIN ER TAB 10MG	Methylphenidate	Yes	1	
METHYLIN ER TAB 20MG	Methylphenidate	Yes	1	
MICRO-K CAP 10MEQ CR	Potassium Chloride	Yes	3	
MICRO-K CAP 8MEQ CR	Potassium Chloride	Yes	3	
MICROZIDE CAP 12.5MG	Hydrochlorothiazide	Yes	3	
MILTOWN TAB 200MG	Meprobamate	Yes	3	
MILTOWN TAB 400MG	Meprobamate	Yes	3	
MINIPRESS CAP 1MG	Prazosin	Yes	3	
MINIPRESS CAP 2MG	Prazosin	Yes	3	
MINIPRESS CAP 5MG	Prazosin	Yes	3	
MINITRAN DIS 0.1MG/HR	Nitroglycerin	Yes	3	
MINITRAN DIS 0.2MG/HR	Nitroglycerin	Yes	3	
MINITRAN DIS 0.4MG/HR	Nitroglycerin	Yes	3	
MINITRAN DIS 0.6MG/HR	Nitroglycerin	Yes	3	
MINIZIDE CAP 0.5 MG-5MG	Prazosin and Polythiazide	No	3	
MINIZIDE CAP 0.5MG-1MG	Prazosin and Polythiazide	No	3	
MINIZIDE CAP 0.5MG-2MG	Prazosin and Polythiazide	No	3	
MIRAPEX TAB 0.125MG	Pramipexole	No	3	
MIRAPEX TAB 0.25MG	Pramipexole	No	3	
MIRAPEX TAB 0.5MG	Pramipexole	No	3	
MIRAPEX TAB 0.75MG	Pramipexole	No	3	
MIRAPEX TAB 1.5MG	Pramipexole	No	3	
MIRAPEX TAB 1MG	Pramipexole	No	3	
Mirena IUD System	Levonorgestrel	No	4	
MOBAN TAB 10MG	Molindone	No	3	
MOBAN TAB 25MG	Molindone	No	3	
MOBAN TAB 50MG	Molindone	No	3	
MOBAN TAB 5MG	Molindone	No	3	
MOBIC TAB 15MG	Meloxicam	Yes	3	
MOBIC TAB 7.5MG	Meloxicam	Yes	3	
Monistat Cre Derm 2%	Miconazole	Yes	3	
MONO-GESIC Tab 750 MG	Salsalate	Yes	3	
Monoket Tab 10MG	Isosorbide Mononitrate	Yes	3	
Monoket Tab 20MG	Isosorbide Mononitrate	Yes	3	
Mononessa Tab	Ethinyl Estradiol and Norgestimate	Yes	1	
MONOPRIL TAB 10MG	Fosinopril	Yes	3	



Ventegra Preferred Formulary Alphabetical Listing 2012

Label Name	Generic Name	Generic Available	Preferred Tiering Recommendations	Benefit Notes
MONOPRIL TAB 20MG	Fosinopril	Yes	3	
MONOPRIL TAB 40MG	Fosinopril	Yes	3	
MONOPRIL-HCT TAB 10/12.5	Fosinopril and Hydrochlorothiazide	Yes	3	
MONOPRIL-HCT TAB 20/12.6	Fosinopril and Hydrochlorothiazide	Yes	3	
MOTRIN TAB 400MG	Ibuprofen	Yes	3	
MOTRIN TAB 600MG	Ibuprofen	Yes	3	
MOTRIN TAB 800MG	Ibuprofen	Yes	3	
MOVIPREP Soln 100 GM	PEG 3350-KCl-NaCl-Na Sulfate-Na Acorbate-C	No	2	
MULTAQ TABLET 400 MG	DRONEDARONE HCL	No	2	
MYCOLOG-II CREAM	Nystatin and Triamcinolone	Yes	3	
MYCOLOG-II OINT	Nystatin and Triamcinolone	Yes	3	
MYCOSTATIN POW 100000	Nystatin	Yes	3	
MYFORTIC TAB 180MG	Mycophenolate	No	3	
MYFORTIC TAB 360MG	Mycophenolate	No	3	
MYLOCEL TAB 1GM	Hydroxyurea	Yes	3	
MYSOLINE TAB 250MG	Primidone	Yes	3	
MYSOLINE TAB 50MG	Primidone	Yes	3	
NAPRELAN TAB 375MG CR	Naproxen	Yes	3	
NAPRELAN TAB 500MG CR	Naproxen	Yes	3	
NAPROSYN SUS 125/5ML	Naproxen	Yes	3	
NAPROSYN TAB 375MG	Naproxen	Yes	3	
NAPROSYN TAB 500MG	Naproxen	Yes	3	
NAPROSYN Tab EC 375 MG	Naproxen	Yes	3	
NAPROSYN Tab EC 500 MG	Naproxen	Yes	3	
Nasarel Spr 29MCG	Flunisolide	No	3	
Nasonex Spr 50MCG/AC	Mometasone Furoate	No	2	
NATAZIA	ESTRADIOL VALERATE-DIENOGEST	No	2	
NATURE-THROID Tab 130 MG	Thyroid	Yes	3	
NATURE-THROID Tab 16.25 MG	Thyroid	No	3	
NATURE-THROID Tab 195 MG	Thyroid	Yes	3	
NATURE-THROID Tab 32.5 MG	Thyroid	Yes	3	
NATURE-THROID Tab 65 MG	Thyroid	Yes	3	
NEORAL CAP 100MG	CycloSPORINE	Yes	3	
NEORAL CAP 25MG	CycloSPORINE	Yes	3	
NEORAL SOL 100MG/ML	CycloSPORINE	Yes	3	
NEUPRO DIS 2MG/24HR	Rotigotine	No	3	
NEUPRO DIS 4MG/24HR	Rotigotine	No	3	
NEUPRO DIS 6MG/24HR	Rotigotine	No	3	
NEURONTIN CAP 100MG	Gabapentin	Yes	3	
NEURONTIN CAP 300MG	Gabapentin	Yes	3	
NEURONTIN CAP 400MG	Gabapentin	Yes	3	



Ventegra Preferred Formulary Alphabetical Listing 2012

Label Name	Generic Name	Generic Available	Preferred Tiering Recommendations	Benefit Notes
NEURONTIN TAB 600MG	Gabapentin	Yes	3	
NEURONTIN TAB 800MG	Gabapentin	Yes	3	
Nevanac Sus 0.1%	Nepafenac	No	2	
NEXIUM CAP 20MG	Esomeprazole	No	2	QL
NEXIUM CAP 40MG	Esomeprazole	No	2	QL
NEXIUM GRA 10MG DR	Esomeprazole	No	2	QL
NEXIUM GRA 20MG DR	Esomeprazole	No	2	QL
NEXIUM GRA 40MG DR	Esomeprazole	No	2	QL
Niacor Tab 500MG	Niacin	Yes	3	
NIASPAN TAB 1000 ER	Niacin	No	2	
NIASPAN TAB 500MG ER	Niacin	No	2	
NIASPAN TAB 750MG ER	Niacin	No	2	
NIFEDIAC CC TAB 30MG ER	NIFEdipine	Yes	3	
NIFEDIAC CC TAB 60MG	NIFEdipine	Yes	3	
NIFEDIAC CC TAB 90MG ER	NIFEdipine	Yes	3	
NIFEDICAL XL TAB 30MG	NIFEdipine	Yes	3	
NIFEDICAL XL TAB 60MG	NIFEdipine	Yes	3	
NIMOTOP CAP 30MG	Nimodipine	Yes	3	
Nipent Inj 10MG	Pentostatin	Yes	5	
NITREK DIS 0.2MG/HR	Nitroglycerin	Yes	3	
NITREK DIS 0.4MG/HR	Nitroglycerin	Yes	3	
NITREK DIS 0.6MG/HR	Nitroglycerin	Yes	3	
NITRO-BID Oint 2%	Nitroglycerin	Yes	3	
NITRO-DUR DIS 0.1MG/HR	Nitroglycerin	Yes	3	
NITRO-DUR DIS 0.2MG/HR	Nitroglycerin	Yes	3	
NITRO-DUR DIS 0.3MG/HR	Nitroglycerin	No	3	
NITRO-DUR DIS 0.4MG/HR	Nitroglycerin	Yes	3	
NITRO-DUR DIS 0.6MG/HR	Nitroglycerin	Yes	3	
NITRO-DUR DIS 0.8MG/HR	Nitroglycerin	No	3	
NITROGARD TAB 3MG CR	Nitroglycerin	No	3	
NITROQUICK SUB 0.3MG	Nitroglycerin	Yes	3	
NITROQUICK SUB 0.4MG	Nitroglycerin	Yes	3	
NITROQUICK SUB 0.6MG	Nitroglycerin	Yes	3	
NITROSTAT SUB 0.4MG	Nitroglycerin	Yes	3	
NITROTAB SL Tab 0.3 MG	Nitroglycerin	Yes	3	
NITROTAB SL Tab 0.4 MG	Nitroglycerin	Yes	3	
NITROTAB SL Tab 0.6 MG	Nitroglycerin	Yes	3	
NITRO-TIME CAP 2.5MG CR	Nitroglycerin	Yes	3	
NITRO-TIME CAP 9MG CR	Nitroglycerin	Yes	3	
NIZORAL CRE 2%	Ketoconazole	Yes	3	
NIZORAL SHA 2%	Ketoconazole	Yes	3	



Ventegra Preferred Formulary Alphabetical Listing 2012

Label Name	Generic Name	Generic Available	Preferred Tiering Recommendations	Benefit Notes
Nolvadex Tab 10MG	Tamoxifen	Yes	3	
NORA-BE TAB 0.35MG	Norethindrone	Yes	1	
Norditropin Inj 10/1.5ML	Somatropin	No	4	
Norditropin Inj 15/1.5ML	Somatropin	No	4	
Norditropin Inj 5/1.5ML	Somatropin	No	4	
NORGESIC FORTE Tab 50-770-60 MG	Orphenadrine, Aspirin, and Caffeine	Yes	3	
NORGESIC Tab 25-385-30 MG	Orphenadrine, Aspirin, and Caffeine	Yes	3	
NORMODYNE IV Soln 5 MG/ML	Labetalol	Yes	3	
NORMODYNE Tab 100 MG	Labetalol	Yes	3	
NORMODYNE Tab 200 MG	Labetalol	Yes	3	
NORPACE CAP 100MG	Disopyramide	Yes	3	
NORPACE CAP 150MG	Disopyramide	Yes	3	
NORPACE CAP 150MG CR	Disopyramide	Yes	3	
NORTREL (28) TAB 1/35	Ethinyl Estradiol and Norethindrone	Yes	1	
NORTREL 28 TAB 0.5/35	Ethinyl Estradiol and Norethindrone	Yes	1	
NORTREL7/7/7 TAB 28 DAYS	Ethinyl Estradiol and Norethindrone	Yes	1	
NORVIR CAP 100MG	Ritonavir	No	2	
NORVIR SOL 80MG/ML	Ritonavir	No	2	
NOVOFINE 30GX8MM	Insulin Pen Needle	No	2	
NOVOFINE 31	Insulin Pen Needle	No	2	
NOVOFINE 32GX6MM	Insulin Pen Needle	No	2	
NOVOFINE AUTOCOVER 30GX8M M	Insulin Pen Needle	No	2	
Novolin 70/30	Insulin	No	3	
Novolin N	Insulin NPH	No	3	
Novolin R	Insulin Reg	No	3	
NovoLog	Insulin Aspart	No	1	
Novolog FlexPen	Insulin Aspart	No	2	
NovoLog Mix 70/30	Insulin Aspart Protamine and Insulin Aspart	No	1	
NovoLog Mix 70/30 FlexPen	Insulin Aspart Protamine and Insulin Aspart	No	2	
NOVOTWIST 30GX8MM MISC	INSULIN PEN NEEDLE	No	1	
NOVOTWIST 32GX5MM MISC	INSULIN PEN NEEDLE	No	1	
NULEV TAB 0.125MG	Hyoscyamine	Yes	3	
NULYTELY SOL	Polyethylene Glycol-Electrolyte Solution	Yes	3	
NUVARING MIS	Ethinyl Estradiol and Etonogestrel	No	2	
NYSTAT-RX POW	Nystatin	Yes	3	
NYSTOP POW 100000	Nystatin	Yes	3	
OCUSULF-10 SOL 10% OP	Sulfacetamide	Yes	3	
OGEN TAB 0.625	Estropiate	Yes	3	
OGEN TAB 1.25	Estropiate	Yes	3	
OGEN TAB 2.5	Estropiate	Yes	3	
OGESTREL TAB	Ethinyl Estradiol and Norgestrel	Yes	3	



Ventegra Preferred Formulary Alphabetical Listing 2012

Label Name	Generic Name	Generic Available	Preferred Tiering Recommendations	Benefit Notes
ONGLYZA TABLET 2.5 MG	Saxagliptin	No	2	
ONGLYZA TABLET 5 MG	Saxagliptin	No	2	
OPANA ER TABLET 12/10 MG	OXYMORPHONE HCL	No	2	QL
OPANA ER TABLET 12/15 MG	OXYMORPHONE HCL	No	2	QL
OPANA ER TABLET 12/20 MG	OXYMORPHONE HCL	No	2	QL
OPANA ER TABLET 12/30 MG	OXYMORPHONE HCL	No	2	QL
OPANA ER TABLET 12/40 MG	OXYMORPHONE HCL	No	2	QL
OPANA ER TABLET 12/5 MG	OXYMORPHONE HCL	No	2	QL
OPANA ER TABLET 12/7.5 MG	OXYMORPHONE HCL	No	2	QL
OPANA SOLUTION 1 MG/ML	OXYMORPHONE HCL	No	3	QL
OPANA TABLET 10 MG	OXYMORPHONE HCL	No	3	QL
OPANA TABLET 5 MG	OXYMORPHONE HCL	No	3	QL
OPTICROM Ophth Soln 4%	Cromolyn	Yes	3	
OPTIPRANOLOL SOL 0.3% OP	Metipranolol	Yes	3	
ORACIT	Sodium Citrate and Citric Acid	Yes	3	
ORAMORPH SR TAB 100MG	Morphine Sulfate	Yes	3	
ORAMORPH SR TAB 15MG	Morphine Sulfate	Yes	3	
ORAMORPH SR TAB 30MG	Morphine Sulfate	Yes	3	
ORAMORPH SR TAB 60MG	Morphine Sulfate	Yes	3	
ORAPRED ODT TAB 10MG	PrednisoLONE	Yes	3	
ORAPRED ODT TAB 15MG	PrednisoLONE	Yes	3	
ORAPRED ODT TAB 30MG	PrednisoLONE	Yes	3	
ORAPRED SOL 15MG/ML	PrednisoLONE	Yes	3	
ORGAN-1 NR TAB 200MG	Guaifenesin	Yes	3	
ORGANIDIN NR LIQ 100/5ML	Guaifenesin	Yes	3	
ORGANIDIN NR TAB 200MG	Guaifenesin	Yes	3	
ORPHENGESIC FORTE Tab 50-770-60 MG	Orphenadrine, Aspirin, and Caffeine	Yes	3	
ORPHENGESIC Tab 25-385-30 MG	Orphenadrine, Aspirin, and Caffeine	Yes	3	
ORTHOCLONE INJ OKT3	Muromonab-CD3	No	3	
ORTHO-EST TAB 0.625	Estropipate	Yes	3	
ORTHO-EST TAB 1.25	Estropipate	Yes	3	
ORUVAIL CAP 100MG	Ketoprofen	Yes	3	
ORUVAIL CAP 150MG	Ketoprofen	Yes	3	
ORUVAIL CAP SR 24HR 200 MG	Ketoprofen	Yes	3	
OSMOPREP Tabs	Sod Phos Mono-Sod Phos Di	No	2	
OxyContin Tab 10MG CR	Oxycodone	No	2	QL
OxyContin Tab 15MG CR	Oxycodone	No	2	QL
OxyContin Tab 20MG CR	Oxycodone	No	2	QL
OxyContin Tab 30MG CR	Oxycodone	No	2	QL
OxyContin Tab 40MG CR	Oxycodone	No	2	QL
OxyContin Tab 60MG CR	Oxycodone	No	2	QL



Ventegra Preferred Formulary Alphabetical Listing 2012

Label Name	Generic Name	Generic Available	Preferred Tiering Recommendations	Benefit Notes
OxyContin Tab 80MG CR	Oxycodone	Yes	2	QL
PACERONE TAB 100MG	Amiodarone	Yes	3	
PACERONE TAB 200MG	Amiodarone	Yes	3	
PACERONE TAB 300MG	Amiodarone	Yes	3	
PACERONE TAB 400MG	Amiodarone	Yes	3	
PANCOF SYP	Pseudoephedrine, Dihydrocodeine, and Chlorpheniramine	Yes	3	
PARA-TIME CAP 150MG ER	Papaverine	Yes	3	
PATADAY Sol	Olopatadine	No	2	
PCE TAB 333MG EC	Erythromycin	Yes	3	
PCE TAB 500MG EC	Erythromycin	Yes	3	
PEDIAPRED LIQ 6.7/5ML	PrednisolONE	Yes	3	
PEDIATEX HC LIQ	Pseudoephedrine, Hydrocodone, and Chlorpheniramine	Yes	3	
PEDI-DRI POW 100000	Nystatin	Yes	3	
PEDIOTIC SUS 1% OTIC	Neomycin, Polymyxin B, and Hydrocortisone	Yes	3	
PEGANONE TAB 250MG	Ethotoin	No	3	
PEG-INTRON KIT 150MCG	Peginterferone Alfa-2b	No	4	
PEG-INTRON KIT 120MCG	Peginterferone Alfa-2b	No	4	
PEG-INTRON KIT 50MCG	Peginterferone Alfa-2b	No	4	
PEG-INTRON KIT 80MCG	Peginterferone Alfa-2b	No	4	
PENTASA CAP 250MG CR	Mesalamine	No	3	
PENTASA CAP 500MG CR	Mesalamine	No	3	
PENTOXIL TAB 400MG CR	Pentoxifylline	Yes	3	
PEPCID TAB 20MG	Famotidine	Yes	3	
PEPCID TAB 40MG	Famotidine	Yes	3	
PERIDEX Soln 0.12%	Chlorhexidine Gluconate	Yes	3	
PERIOGARD SOL 0.12%	Chlorhexidine Gluconate	Yes	3	
PERSANTINE TAB 25MG	Dipyridamole	Yes	3	
PERSANTINE TAB 50MG	Dipyridamole	Yes	3	
PERSANTINE TAB 75MG	Dipyridamole	Yes	3	
PHENADOZ SUP 12.5MG	Promethazine	Yes	3	
PHENADOZ SUP 25MG	Promethazine	Yes	3	
PHENERGAN Inj 25 MG/ML	Promethazine	Yes	3	
PHENERGAN SUP 12.5MG	Promethazine	Yes	3	
PHENERGAN SUP 25MG	Promethazine	Yes	3	
PHENERGAN SUP 50MG	Promethazine	Yes	3	
PHENERGAN Inj 50 MG/ML	Promethazine	Yes	3	
PHENERGAN Tab 12.5 MG	Promethazine	Yes	3	
PHENERGAN Tab 25 MG	Promethazine	Yes	3	
PHENERGAN Tab 50 MG	Promethazine	Yes	3	
PHENERGAN/CODEINE Syrup 6.25-10 MG/5ML	Promethazine and Codeine	Yes	3	
PHENYTEK CAP 200MG	Phenytoin	Yes	3	



Ventegra Preferred Formulary Alphabetical Listing 2012

Label Name	Generic Name	Generic Available	Preferred Tiering Recommendations	Benefit Notes
PHENYTEK CAP 300MG	Phenytoin	Yes	3	
PHISOHEX LIQ 3%	Hexachlorophene	No	3	
PHRENILIN Tab 50-325 MG	Butalbital, Aspirin, Caffeine, and Codeine	Yes	3	
PILOCAR SOL 0.5% OP	Pilocarpine	Yes	3	
PILOCAR SOL 2% OP	Pilocarpine	Yes	3	
PILOCAR SOL 4% OP	Pilocarpine	Yes	3	
PILOCAR SOL 6% OP	Pilocarpine	Yes	3	
PILOCAR TAB 5MG	Pilocarpine	Yes	3	
PILOCAR TAB 7.5MG	Pilocarpine	Yes	3	
PILOCAR SOL 1% OP	Pilocarpine	Yes	3	
PILOPINE HS GEL 4% OP	Pilocarpine	No	3	
PLAQUENIL Tab 200 MG	Hydroxychloroquine	Yes	3	
POLYCITRA-K SOL 1100-334 MG/5ML	Potassium Citrate and Citric Acid	Yes	3	
POLY-PRED SUS OP	Neomycin, Polymyxin B, and Prednisolone	No	3	
Prandimet Tab 1-500MG	Repaglinide and Metformin	No	2	
Prandimet Tab 2-500MG	Repaglinide and Metformin	No	2	
PRANDIN Tab 0.5MG	Repaglinide	No	2	
PRANDIN Tab 1MG	Repaglinide	No	2	
PRANDIN Tab 2MG	Repaglinide	No	2	
PRECISION Xtr Beta Ketone Test Strips 10 ct		No	2	
PRECISION Xtr Meter		No	2	
PRECISION Xtr Test Strips 100 ct		No	2	
PRECISION Xtr Test Strips 50 ct		No	2	
PRED FORTE SUS 1% OP	PrednisoLONE	Yes	3	
PRED MILD SUS 0.12% OP	PrednisoLONE	Yes	3	
PRED-G SUS OP	Prednisolone and Gentamicin	No	3	
PREDNISONONE CONC 5 MG/ML	PredniSONE	Yes	3	
PRELONE SYP 5MG/5ML	PrednisoLONE	Yes	3	
PREMARIN Tab 0.3MG	Estrogens (Conjugated/Equine)	No	2	
PREMARIN Tab 0.45MG	Estrogens (Conjugated/Equine)	No	2	
PREMARIN Tab 0.625MG	Estrogens (Conjugated/Equine)	No	2	
PREMARIN Tab 0.9MG	Estrogens (Conjugated/Equine)	No	2	
PREMARIN Tab 1.25MG	Estrogens (Conjugated/Equine)	No	2	
Premarin Vag Cre 0.625MG	Estrogens (Conjugated/Equine)	No	2	
Premarin Vag Cre Refill 0.625MG	Estrogens (Conjugated/Equine)	No	2	
PREMPHASE Tab	Estrogens (Conjugated/Equine) and Medroxyprogesterone	No	2	
PREMPRO Tab 0.3-1.5MG	Estrogens (Conjugated/Equine) and Medroxyprogesterone	No	2	
PREMPRO Tab 0.45-1.5MG	Estrogens (Conjugated/Equine) and Medroxyprogesterone	No	2	
PREMPRO Tab 0.625-2.5MG	Estrogens (Conjugated/Equine) and Medroxyprogesterone	No	2	
PREMPRO Tab 0.625-5MG	Estrogens (Conjugated/Equine) and Medroxyprogesterone	No	2	
PREVACID CAP 15MG DR	Lansoprazole	No	3	QL



Ventegra Preferred Formulary Alphabetical Listing 2012

Label Name	Generic Name	Generic Available	Preferred Tiering Recommendations	Benefit Notes
PREVACID CAP 30MG DR	Lansoprazole	No	3	QL
PREVACID GRA 15MG	Lansoprazole	No	3	QL
PREVACID GRA 30M	Lansoprazole	No	3	QL
PREVACID TAB 15MG STB	Lansoprazole	No	3	QL
PREVACID TAB 30MG STB	Lansoprazole	No	3	QL
PREVALITE Powder 4 GM/DOSE	Cholestyramine Resin	Yes	3	
PREVALITE Powder Packets 4 GM	Cholestyramine Resin	Yes	3	
PREVIFEM Tab 0.25 MG-35 MCG	Ethinyl Estradiol and Norgestimate	Yes	1	
PREZISTA 75 MG	Darunavir	No	2	
PREZISTA TAB 150MG	Darunavir	No	2	
PREZISTA TAB 300MG	Darunavir	No	2	
PREZISTA TAB 400MG	Darunavir	No	2	
PREZISTA TAB 600MG	Darunavir	No	2	
PRIMABELLA	Nerve Stimulator	No	4	
PRINIVIL Tab 10 MG	Lisinopril	Yes	3	
PRINIVIL Tab 2.5 MG	Lisinopril	Yes	3	
PRINIVIL Tab 20 MG	Lisinopril	Yes	3	
PRINIVIL Tab 40 MG	Lisinopril	Yes	3	
PRINIVIL Tab 5 MG	Lisinopril	Yes	3	
PRINZIDE TAB 10/12.5	Lisinopril and Hydrochlorothiazide	Yes	3	
PRINZIDE TAB 20-12.5	Lisinopril and Hydrochlorothiazide	Yes	3	
PRISTIQ Tab SR 24HR 100 MG	Desvenlafaxine Succinate	No	2	
PRISTIQ Tab SR 24HR 50 MG	Desvenlafaxine Succinate	No	2	
ProAir HFA Aer	Albuterol	No	2	
ProAir HFA Aer	Albuterol	No	2	
ProAir HFA Aer	Albuterol	No	2	
ProAir HFA Aer	Albuterol	No	2	
ProAir HFA Aer	Albuterol	No	2	
ProAir HFA Aer	Albuterol	No	2	
PROCANBID Tab SR 12HR 1000 MG	Procainamide	No	3	
PROCANBID Tab SR 12HR 500 MG	Procainamide	No	3	
PROCARDIA CAP 10MG	NIFEdipine	Yes	3	
PROCARDIA XL TAB 30MG CR	NIFEdipine	Yes	3	
PROCARDIA XL TAB 60MG CR	NIFEdipine	Yes	3	
PROCARDIA XL TAB 90MG CR	NIFEdipine	Yes	3	
Procrit Inj 10000/ML	Epoetin Alfa	No	4	
Procrit Inj 10000/ML	Epoetin Alfa	No	4	
Procrit Inj 10000/ML	Epoetin Alfa	No	4	
Procrit Inj 10000/ML	Epoetin Alfa	No	4	
Procrit Inj 10000/ML	Epoetin Alfa	No	4	
Procrit Inj 10000/ML	Epoetin Alfa	No	4	



Ventegra Preferred Formulary Alphabetical Listing 2012

Label Name	Generic Name	Generic Available	Preferred Tiering Recommendations	Benefit Notes
Procrit Inj 10000/ML	Epoetin Alfa	No	4	
Procrit Inj 10000/ML	Epoetin Alfa	No	4	
Procrit Inj 2000/ML	Epoetin Alfa	No	4	
Procrit Inj 2000/ML	Epoetin Alfa	No	4	
Procrit Inj 20000/ML	Epoetin Alfa	No	4	
Procrit Inj 20000/ML	Epoetin Alfa	No	4	
Procrit Inj 20000/ML	Epoetin Alfa	No	4	
Procrit Inj 20000/ML	Epoetin Alfa	No	4	
Procrit Inj 3000/ML	Epoetin Alfa	No	4	
Procrit Inj 3000/ML	Epoetin Alfa	No	4	
Procrit Inj 4000/ML	Epoetin Alfa	No	4	
Procrit Inj 4000/ML	Epoetin Alfa	No	4	
Procrit Inj 40000/ML	Epoetin Alfa	No	4	
Procrit Inj 40000/ML	Epoetin Alfa	No	4	
PROFILNINE SD RECON SOLN 1000 -1500 UNIT	FACTOR IX COMPLEX	No	4	
PROFILNINE SD RECON SOLN 1000 UNIT	FACTOR IX COMPLEX	No	4	
PROFILNINE SD RECON SOLN 1500 UNIT	FACTOR IX COMPLEX	No	4	
PROFILNINE SD RECON SOLN 500 UNIT	FACTOR IX COMPLEX	No	4	
PROGRAF CAP 0.5MG	Tacrolimus	No	3	
PROGRAF CAP 1MG	Tacrolimus	No	3	
PROGRAF CAP 5MG	Tacrolimus	No	3	
PROGRAF INJ 5MG/ML	Tacrolimus	No	5	
PROLIXIN Inj 25 MG/ML	Fluphenazine	Yes	3	
PROLIXIN Elixir 2.5 MG/5ML	Fluphenazine	Yes	3	
PROLIXIN Oral Conc 5 MG/ML	Fluphenazine	Yes	3	
PROLIXIN Tab 10 MG	Fluphenazine	Yes	3	
PROLIXIN Tab 5 MG	Fluphenazine	Yes	3	
PROMETHEGAN SUP 12.5MG	Promethazine	Yes	3	
PROMETHEGAN SUP 25MG	Promethazine	Yes	3	
PROMETHEGAN SUP 50MG	Promethazine	Yes	3	
PROPINE Ophth Soln 0.1%	Dipivefrin	Yes	3	
PROPRANOLOL CONC 80MG/ML	Propranolol	No	3	
Protonix Pak	Pantoprazole	No	3	QL
Protonix Tab 20MG	Pantoprazole	Yes	3	QL
Protonix Tab 40MG	Pantoprazole	Yes	3	QL
PROTOPIC OIN 0.03%	Tacrolimus	No	3	A
PROTOPIC OIN 0.1%	Tacrolimus	No	3	A
Proventil Aer HFA	Albuterol	No	2	
Proventil Aer HFA	Albuterol	No	2	
Proventil Aer HFA	Albuterol	No	2	
Proventil Aer HFA	Albuterol	No	2	



Ventegra Preferred Formulary Alphabetical Listing 2012

Label Name	Generic Name	Generic Available	Preferred Tiering Recommendations	Benefit Notes
Proventil Aer HFA	Albuterol	No	2	
PRUDOXIN CRE 5%	Doxepin	No	3	
PULMICORT INH 180MCG	Budesonide	No	2	
PULMICORT INH 200MCG	Budesonide	No	2	
PULMICORT INH 90MCG	Budesonide	No	2	
PULMICORT SUS 0.25MG/2	Budesonide	No	2	
PULMICORT SUS 0.5MG/2	Budesonide	No	2	
PULMICORT SUS 1MG/2ML	Budesonide	No	2	
PULMOZYME	Dornase Alfa	No	5	
QUIBRON-300 CAP	Theophylline and Guaifenesin	No	3	
QUIBRON-T TAB 300MG	Theophylline	Yes	3	
QUIBRON-T/SR Tab SR 12HR 300 MG	Theophylline	Yes	3	
Q-V TUSSIN SYR 30-2-2.5 MG/5ML	Pseudoephedrine, Hydrocodone, and Chlorpheniramine	Yes	3	
QVAR Aer 40MCG	Beclomethasone	No	2	
QVAR Aer 80MCG	Beclomethasone	No	2	
RAPAMUNE TAB 1MG	Sirolimus	No	3	
RAPAMUNE TAB 2MG	Sirolimus	No	3	
Raptiva Inj Kit 125MG	Efalizumab	No	5	
Rebetol Cap 200 MG	Ribavirin	Yes	3	
Rebetol Soln 40 MG/ML	Ribavirin Soln	No	3	
REGLAN Tab 10 MG	Metoclopramide	Yes	3	
REGLAN Tab 5 MG	Metoclopramide	Yes	3	
RELAFEN TAB 500 MG	Nabumetone	Yes	3	
RELAFEN TAB 750 MG	Nabumetone	Yes	3	
Relenza Aer Diskhale	Zanamivir	No	2	QL
Relpax Tab 20MG	Eletriptan	No	2	QL
Relpax Tab 40MG	Eletriptan	No	2	QL
Renagel Tab 400MG	Sevelamer	No	3	
Renagel Tab 800MG	Sevelamer	No	3	
REVELA PACKET 0.8 GM	Sevelamer	No	3	
REVELA PACKET 2.4 GM	Sevelamer	No	3	
Renvela Tab 800MG	Sevelamer	No	3	
REPAN Tab 50-325-40 MG	Butalbital, Acetaminophen, and Caffeine	Yes	3	
REPAN-CFTab 50-650 MG	Butalbital, Acetaminophen, and Caffeine	Yes	3	
REQUIP XL TAB 4MG	Ropinirole	No	3	
REQUIP XL TAB 8MG	Ropinirole	No	3	
RESCRIPTOR TAB 100MG	Delavirdine	No	2	
RESCRIPTOR TAB 200MG	Delavirdine	No	2	
RESPA DM Tab SR 12HR 28-600 MG	Guaifenesin and Dextromethorphan	Yes	3	
Retin-A Cream 0.025%	Tretinoin, Topical	Yes	3	A
Retin-A Cream 0.05%	Tretinoin, Topical	Yes	3	A



Ventegra Preferred Formulary Alphabetical Listing 2012

Label Name	Generic Name	Generic Available	Preferred Tiering Recommendations	Benefit Notes
Retin-A Cream 0.1%	Tretinoin, Topical	Yes	3	A
RETROVIR CAP 100 MG	Zidovudine	Yes	3	
RETROVIR SYRUP 10 MG/ML	Zidovudine Syrup	Yes	3	
RETROVIR TAB 300 MG	Zidovudine	Yes	3	
REVIA TAB 50 MG	Naltrexone	Yes	3	
Revlimid Cap 10MG	Lenalidomide	No	3	
Revlimid Cap 15MG	Lenalidomide	No	3	
Revlimid Cap 25MG	Lenalidomide	No	3	
Revlimid Cap 5MG	Lenalidomide	No	3	
Reyataz Cap 100MG	Atazanavir	No	2	
Reyataz Cap 150MG	Atazanavir	No	2	
Reyataz Cap 200MG	Atazanavir	No	2	
Reyataz Cap 300MG	Atazanavir	No	2	
RHEUMATREX Tab 2.5 MG (Antirheumatic)	Methotrexate	Yes	3	
RIBASPHERE Cap 200 MG	Ribavirin	Yes	1	
RIFADIN Cap 150 MG	Rifampin	Yes	3	
RIFADIN Cap 300 MG	Rifampin	Yes	3	
RIFAMATE CAP 150-300 MG	Rifampin and Isoniazid	Yes	3	
RIFATER TAB 50-120-300 MG	Rifampin, Isoniazid, and Pyrazinamide	No	3	
RIOMET ORAL SOLN 500 MG/5ML	Metformin	No	3	
ROBAXIN INJ 100 MG/ML	Methocarbamol	No	3	
ROBAXIN TAB 500 MG	Methocarbamol	Yes	3	
ROBAXIN TAB 750 MG	Methocarbamol	Yes	3	
ROBINUL INJ 0.2 MG/ML	Glycopyrrolate	Yes	3	
ROBINUL TAB 1 MG	Glycopyrrolate	Yes	3	
ROBINUL TAB 2 MG	Glycopyrrolate	Yes	3	
ROCALTROL Oral Soln 1 MCG/ML	Calcitriol	Yes	3	
ROCALTROL CAP 0.25 MCG	Calcitriol	Yes	3	
ROCALTROL CAP 0.5 MCG	Calcitriol	Yes	3	
ROMYCIN Ophth Oint 5 MG/GM	Erythromycin	Yes	3	
ROWASA ENEMA 4 GM	Mesalamine	Yes	3	
ROWASA Rectal Enema 4 GM & Cleanser Wipe Kit**	Mesalamine	No	3	
RUM-K LIQ 30MEQ/15ML	Potassium Chloride	Yes	3	
RYTHMOL Cap SR 12HR 225 MG	Propafenone	Yes	3	
RYTHMOL Cap SR 12HR 325 MG	Propafenone	Yes	3	
RYTHMOL Cap SR 12HR 425 MG	Propafenone	Yes	3	
RYTHMOL Tab 150 MG	Propafenone	Yes	3	
RYTHMOL Tab 225 MG	Propafenone	Yes	3	
RYTHMOL Tab 300 MG	Propafenone	Yes	3	
SALFLEX Tab 500 MG	Salsalate	Yes	3	
SALFLEX Tab 750 MG	Salsalate	Yes	3	



Ventegra Preferred Formulary Alphabetical Listing 2012

Label Name	Generic Name	Generic Available	Preferred Tiering Recommendations	Benefit Notes
SAL-TROPINE Tab 0.4 MG	Atropine	No	3	
SANCTURA TAB 20MG	Trospium	Yes	2	
SANCTURA XR CAP 60MG	Trospium	No	2	
SANDIMMUNE Oral Soln 100 MG/ML	CycloSPORINE	Yes	3	
SANDIMMUNE Cap 100 MG	CycloSPORINE	Yes	3	
SANDIMMUNE Cap 25 MG	CycloSPORINE	Yes	3	
SECTRAL CAP 200 MG	Acebutolol	Yes	3	
SECTRAL CAP 400 MG	Acebutolol	Yes	3	
SELZENTRY TAB 150 MG	maraviroc	No	2	
SELZENTRY TAB 300 MG	maraviroc	No	2	
SERAX Cap 10 MG	Oxazepam	Yes	3	
SERAX Cap 15 MG	Oxazepam	Yes	3	
SERAX Cap 30 MG	Oxazepam	Yes	3	
SERAX TAB 15 MG	Oxazepam	No	3	
SERENTIL TAB 100MG	Mesoridazine	No	3	
SEREVENT DIS AER 50MCG	Salmeterol	No	3	
SEROPHENE Tab 50 MG	Clomiphene	Yes	3	
SEROQUEL TAB 100MG	Quetiapine	No	2	
SEROQUEL TAB 200MG	Quetiapine	No	2	
SEROQUEL TAB 25MG	Quetiapine	No	2	
SEROQUEL TAB 300MG	Quetiapine	No	2	
SEROQUEL TAB 400MG	Quetiapine	No	2	
SEROQUEL TAB 50MG	Quetiapine	No	2	
SEROQUEL XR TAB 200MG	Quetiapine Fumarate	No	2	
SEROQUEL XR TAB 300MG	Quetiapine Fumarate	No	2	
SEROQUEL XR TAB 400MG	Quetiapine Fumarate	No	2	
SIMCOR 24HR 1000-20 MG	NIACIN-SIMVASTATIN	No	2	
SIMCOR 24HR 500-20 MG	NIACIN-SIMVASTATIN	No	2	
SIMCOR 24HR 750-20 MG	NIACIN-SIMVASTATIN	No	2	
Singulair Chew 4 MG	Montelukast	No	2	QL
Singulair Chew 5 MG	Montelukast	No	2	QL
Singulair Oral Granules 4 MG	Montelukast	No	2	QL
Singulair Tab 10MG	Montelukast	No	2	QL
SOLARAZE (Actinic Keratoses) Gel 3%	Diclofenac	Yes	3	
SOLIA Tab 0.15 MG-30 MCG	Ethinyl Estradiol and Desogestrel	Yes	1	
SOMNOTE Cap 500 MG	Chloral Hydrate	No	3	
SPACOL T/S TAB SR 12HR 0.375 MG	Hyoscyamine	Yes	3	
Spiriva Cap Handihlr	Tiotropium	No	2	
SPRINTEC 28 TAB 0.25 MG-35 MCG	Ethinyl Estradiol and Norgestimate	Yes	1	
SPS Oral Susp 15 GM/60ML	Sodium Polystyrene Sulfonate	Yes	3	
SPS Rectal Susp 30 GM/120ML	Sodium Polystyrene Sulfonate	Yes	3	



Ventegra Preferred Formulary Alphabetical Listing 2012

Label Name	Generic Name	Generic Available	Preferred Tiering Recommendations	Benefit Notes
SSD AF Cream 1%	Silver Sulfadiazine	Yes	3	
SSD Cream 1%	Silver Sulfadiazine	Yes	3	
STALEVO 100 TAB	Levodopa, Carbidopa, and Entacapone	No	3	
STALEVO 150 TAB	Levodopa, Carbidopa, and Entacapone	No	3	
STALEVO 200 TAB	Levodopa, Carbidopa, and Entacapone	No	3	
STALEVO 50 TAB	Levodopa, Carbidopa, and Entacapone	No	3	
STELAZINE Tab 5 MG	Trifluoperazine	Yes	3	
STERAPRED Tab 10 MG Dose Pack	PredniSONE	Yes	3	
STERAPRED Tab 5 MG Dose Pack	PredniSONE	Yes	3	
SULF-10 Opth Soln 10%	Sulfacetamide	Yes	3	
Supartz INJ 25/2.5ML	Hyaluronate and Derivatives	No	4	
Supartz INJ 25/2.5ML	Hyaluronate and Derivatives	No	4	
Supartz INJ 25/2.5ML	Hyaluronate and Derivatives	No	4	
Sustiva Cap 100MG	Efavirenz	No	2	
Sustiva Cap 200MG	Efavirenz	No	2	
Sustiva Cap 50MG	Efavirenz	No	2	
Sustiva Tab 600MG	Efavirenz	No	2	
SYMAX DUOTAB Tab CR 0.375 MG (0.125 MG IR/0.25 MG CR)	Hyoscyamine	Yes	3	
SYMAX FASTABS Tab Disp 0.125 MG	Hyoscyamine	Yes	3	
SYMAX-SL Tab SL 0.125 MG	Hyoscyamine	Yes	3	
SYMAX-SR Tab SR 12HR 0.375 MG	Hyoscyamine	Yes	3	
SYMBICORT AER 160-4.5MCG/ACT	Budesonide and Formoterol	No	2	
SYMBICORT AER 80-4.5MCG/ACT	Budesonide and Formoterol	No	2	
SYMBYAX CAP 12-25MG	Olanzapine and Fluoxetine	No	3	
SYMBYAX CAP 12-50MG	Olanzapine and Fluoxetine	No	3	
SYMBYAX CAP 3-25MG	Olanzapine and Fluoxetine	No	3	
SYMBYAX CAP 6-25MG	Olanzapine and Fluoxetine	No	3	
SYMBYAX CAP 6-50MG	Olanzapine and Fluoxetine	No	3	
Symlin Inj 600MCG	Pramlintide Acetate	No	2	
SymlinPen 120 Inj 1000MCG	Pramlintide Acetate	No	2	
SymlinPen 60 Inj 1000MCG	Pramlintide Acetate	No	2	
SYNALAR Oint 0.025%	Fluocinolone	Yes	3	
SYNALAR Cream 0.025%	Fluocinolone	Yes	3	
SYNALAR Soln 0.01%	Fluocinolone	Yes	3	
Synvisc Inj 8MG/ML	Hylan Intra-articular	No	4	
SYNVISC ONE	Hylan Intra-articular	No	4	
Tabloid Tab 40MG	Thioguanine	No	3	
TAGAMET Tab 300 MG	Cimetidine	Yes	3	
TAGAMET Tab 400 MG	Cimetidine	Yes	3	
TAGAMET Tab 800 MG	Cimetidine	Yes	3	
TAMBOCOR Tab 100 MG	Flecainide	Yes	3	



Ventegra Preferred Formulary Alphabetical Listing 2012

Label Name	Generic Name	Generic Available	Preferred Tiering Recommendations	Benefit Notes
TAMBOCOR Tab 50 MG	Flecainide	Yes	3	
TAMIFLU CAP 30 MG	OSELTAMIVIR PHOSPHATE	No	3	QL
Tamiflu Cap 45MG	OSELTAMIVIR PHOSPHATE	No	3	QL
Tamiflu Cap 75MG	OSELTAMIVIR PHOSPHATE	No	3	QL
Tamiflu Sus 12MG/ML	OSELTAMIVIR PHOSPHATE	No	3	QL
TAPAZOLE Tab 10 MG	Methimazole	Yes	3	
TAPAZOLE Tab 5 MG	Methimazole	Yes	3	
TAZTIA XT Extended Release Beads Cap SR 24HR 120 MG	Diltiazem	Yes	3	
TAZTIA XT Extended Release Beads Cap SR 24HR 180 MG	Diltiazem	Yes	3	
TAZTIA XT Extended Release Beads Cap SR 24HR 240 MG	Diltiazem	Yes	3	
TAZTIA XT Extended Release Beads Cap SR 24HR 300 MG	Diltiazem	Yes	3	
TAZTIA XT Extended Release Beads Cap SR 24HR 360 MG	Diltiazem	Yes	3	
TECHLITE LANCETS		No	2	
TEGRETOL Chew Tab 100 MG	Carbamazepine	Yes	3	
TEGRETOL Susp 100 MG/5ML	Carbamazepine	Yes	3	
TEGRETOL TAB 200 MG	Carbamazepine	Yes	3	
TENEX Tab 1 MG	Guanfacine	Yes	3	
TENEX Tab 2 MG	Guanfacine	Yes	3	
TENORETIC Tab 100-25 MG	Atenolol and Chlorthalidone	Yes	3	
TENORETIC Tab 50-25 MG	Atenolol and Chlorthalidone	Yes	3	
TENORMIN Inj 5 MG/10ML	Atenolol	No	3	
TENORMIN Tab 100 MG	Atenolol	Yes	3	
TENORMIN Tab 25 MG	Atenolol	Yes	3	
TENORMIN Tab 50 MG	Atenolol	Yes	3	
Tev-tropin INJ 5 MG	Somatropin	No	4	
Tev-tropin INJ 5 MG	Somatropin	No	4	
THALITONE TAB 15 MG	Chlorthalidone	Yes	3	
THEO-24 CAP SR 24HR 100 MG	Theophylline	Yes	3	
THEO-24 CAP SR 24HR 200 MG	Theophylline	Yes	3	
THEO-24 CAP SR 24HR 300 MG	Theophylline	Yes	3	
THEOCHRON TAB SR 12HR 100 MG	Theophylline	Yes	3	
THEOLAIR TAB 125MG	Theophylline	Yes	3	
THERMAZENE Cream 1%	Silver Sulfadiazine	Yes	3	
THORAZINE Inj 25 MG/ML	Chlorpromazine	Yes	3	
THORAZINE SUP 100MG	Chlorpromazine	No	3	
THORAZINE Tab 200 MG	Chlorpromazine	Yes	3	
THYROLAR-1 TAB 60MG	Liotrix	No	3	
THYROLAR-1/2 TAB 30MG	Liotrix	No	3	
THYROLAR-1/4 TAB 15MG	Liotrix	No	3	
THYROLAR-2 TAB 120MG	Liotrix	No	3	
THYROLAR-3 TAB 180MG	Liotrix	No	3	



Ventegra Preferred Formulary Alphabetical Listing 2012

Label Name	Generic Name	Generic Available	Preferred Tiering Recommendations	Benefit Notes
TIAZAC EXTENDED RELEASE BEADS CAP SR 24HR 120 MG	Diltiazem	Yes	3	
TIAZAC EXTENDED RELEASE BEADS CAP SR 24HR 180 MG	Diltiazem	Yes	3	
TIAZAC EXTENDED RELEASE BEADS CAP SR 24HR 240 MG	Diltiazem	Yes	3	
TIAZAC EXTENDED RELEASE BEADS CAP SR 24HR 300 MG	Diltiazem	Yes	3	
TIAZAC EXTENDED RELEASE BEADS CAP SR 24HR 360 MG	Diltiazem	Yes	3	
TIAZAC EXTENDED RELEASE BEADS CAP SR 24HR 420 MG	Diltiazem	Yes	3	
TICLID TAB 250MG	Ticlopidine	Yes	3	
TIGAN CAP 250MG	Trimethobenzamide	Yes	3	
TIGAN CAP 300 MG	Trimethobenzamide	Yes	3	
TIGAN INJ 100 MG/ML	Trimethobenzamide	Yes	3	
TILIA FE	NORETHINDRONE AC-ETHINYL ESTRAD-FE	Yes	1	
TobraDex Oint Op	Tobramycin and Dexamethasone	No	3	
TOBRADEX ST SUSPENSION 0.3-0.05 %	Tobramycin and Dexamethasone	No	2	
TobraDex Sus Op	Tobramycin and Dexamethasone	Yes	3	
TOBREX Ophth Ointment 0.3%	Tobramycin	No	3	
TOLECTIN DS Cap 400 MG	Tolmetin	Yes	3	
TOLECTIN Tab 600 MG	Tolmetin	Yes	3	
Touro Allergy Oral Tablet Extended Release 12 Hour 6-45 MG	Guaifenesin and Dextromethorphan	Yes	3	
TOVIAZ 4 MG	fesoterodine fumarate	No	2	
TOVIAZ 8 MG	fesoterodine fumarate	No	2	
TRANDATE Tab 100 MG	Labetalol	Yes	3	
TRANDATE Tab 200 MG	Labetalol	Yes	3	
TRANDATE Tab 300 MG	Labetalol	Yes	3	
Travatan Z Sol 0.004%	Travoprost	No	2	
Trelstar Dep Inj 3.75MG	Triptorelin	No	4	
Trelstar LA Inj 11.25MG	Triptorelin	No	4	
TRENTAL Tab CR 400 MG	Pentoxifylline	Yes	3	
Trexall Tab 10MG	Methotrexate	Yes	3	
Trexall Tab 15MG	Methotrexate	Yes	3	
TRI-LEGEST FE	NORETHINDRONE AC-ETHINYL ESTRAD-FE	Yes	1	
TRILIPIX 135MG	CHOLINE FENOFIBRATE	No	2	
TRILIPIX 45MG	CHOLINE FENOFIBRATE	No	2	
TRILYTE Soln 420 GM	Polyethylene Glycol-Electrolyte Solution	Yes	3	
TRIMOX Cap 250 MG	Amoxicillin	Yes	3	
TRIMOX Cap 500 MG	Amoxicillin	Yes	3	
TRIMOX For Susp 125 MG/5ML	Amoxicillin	Yes	3	
TRIMOX For Susp 250 MG/5ML	Amoxicillin	Yes	3	
TRINESSA Tab 0.18-35/0.215-35/0.25-35 MG-MCG	Ethinyl Estradiol and Norgestimate	Yes	1	
TRIOSTAT INJ 10MCG/ML	Liothyronine	No	5	
TRI-PREVI-FEM Tab 0.18-35/0.215-35/0.25-35 MG-MCG	Ethinyl Estradiol and Norgestimate	Yes	1	
TRI-SPRINTEC Tab 0.18-35/0.215-35/0.25-35 MG-MCG	Ethinyl Estradiol and Norgestimate	Yes	1	



Ventegra Preferred Formulary Alphabetical Listing 2012

Label Name	Generic Name	Generic Available	Preferred Tiering Recommendations	Benefit Notes
TRIVORA-28	LEVONORGESTREL-ETH ESTRA	Yes	1	
TRIZIVIR TAB	Abacavir Sulfate-Lamivudine-Zidovudine	No	2	
TRUVADA TAB	Emtricitabine-Tenofovir Disoproxil Fumarate	No	2	
TUSSEND TAB	Pseudoephedrine, Hydrocodone, and Chlorpheniramine	No	3	
TUSSEND Soln 30-2.5-100 MG/5ML	Pseudoephedrine, Hydrocodone, and Chlorpheniramine	No	3	
TUSSEND Syr 30-2-2.5 MG/5ML	Pseudoephedrine, Hydrocodone, and Chlorpheniramine	Yes	3	
TUSSI-ORGANIDIN DM NR Liquid 10-100 MG/5ML	Guaifenesin and Dextromethorphan	Yes	3	
TUSSI-ORGANIDIN DM NR Liquid 10-300 MG/5ML	Guaifenesin and Dextromethorphan	Yes	3	
TUSSI-ORGANIDIN NR Liquid 300-10 MG/5ML	Guaifenesin and Codeine	Yes	3	
TUSSI-ORGANIDIN NR Soln 100-10 MG/5ML	Guaifenesin and Codeine	Yes	3	
TUSSI-ORGANIDIN-S NR LIQ	Guaifenesin and Codeine	Yes	3	
TWINJECT INJ 0.15MG	Epinephrine	No	5	
TWINJECT INJ 0.3MG	Epinephrine	No	5	
TYZEKA TAB 600MG	Telbivudine	No	2	
TYZINE Nasal Soln 0.05%	Tetrahydrozoline	No	3	
TYZINE Nasal Soln 0.1%	Tetrahydrozoline	No	3	
UNI-COF EXP Syrup 15-7.5-100 MG/5ML	Pseudoephedrine, Dihydrocodeine, GG	Yes	3	
UNI-COF Syrup 15-2-7.5 MG/5ML	Pseudoephedrine, Dihydrocodeine, and Chlorpheniramine	Yes	3	
UNIPHYL Tab SR 24HR 400 MG	Theophylline	Yes	3	
UNIPHYL Tab SR 24HR 600 MG	Theophylline	Yes	3	
UNITHROID TAB 112 MCG	Levothyroxine	Yes	3	
UNITHROID TAB 125 MCG	Levothyroxine	Yes	3	
UNITHROID TAB 137 MCG	Levothyroxine	Yes	3	
UNITHROID TAB 150 MCG	Levothyroxine	Yes	3	
UNITHROID TAB 175 MCG	Levothyroxine	Yes	3	
UNITHROID TAB 200 MCG	Levothyroxine	Yes	3	
UNITHROID TAB 300 MCG	Levothyroxine	Yes	3	
UNITHROID TAB 50 MCG	Levothyroxine	Yes	3	
UNITHROID TAB 75 MCG	Levothyroxine	Yes	3	
UNITHROID TAB 88 MCG	Levothyroxine	Yes	3	
URISPAS Tab 100 MG	Flavoxate	Yes	3	
Uroxatral Tab 10MG	Alfuzosin	No	3	
Vagifem Tab 25MCG	Estradiol	No	2	
Valcyte Tab 450MG	Valganciclovir	No	2	
VALTREX TAB 1000 MG	Valacyclovir	Yes	3	
VALTREX TAB 500MG	Valacyclovir	Yes	3	
VANOS Cream 0.1%	Fluocinonide	Yes	3	
VASERETIC Tab 10-25 MG	Enalapril and Hydrochlorothiazide	Yes	3	
VASERETIC Tab 5-12.5 MG	Enalapril and Hydrochlorothiazide	Yes	3	
VASOCIDIN Ophth Soln 10-0.23(0.25)%	Sulfacetamide and Prednisolone	Yes	3	
VASOTEC Tab 10 MG	Enalapril	Yes	3	



Ventegra Preferred Formulary Alphabetical Listing 2012

Label Name	Generic Name	Generic Available	Preferred Tiering Recommendations	Benefit Notes
VASOTEC Tab 2.5 MG	Enalapril	Yes	3	
VASOTEC Tab 20 MG	Enalapril	Yes	3	
VASOTEC Tab 5 MG	Enalapril	Yes	3	
VEETIDS Soln 125 MG/5ML	Penicillin V Potassium	Yes	3	
VEETIDS Soln 250 MG/5ML	Penicillin V Potassium	Yes	3	
VEETIDS Tab 250 MG	Penicillin V Potassium	Yes	3	
VEETIDS Tab 500 MG	Penicillin V Potassium	Yes	3	
VELIVET Tab 0.1-0.025/0.125-0.025/0.15-0.025MG-MG	Ethinyl Estradiol and Desogestrel	Yes	1	
VENTOLIN HFA AER	Albuterol	No	3	
VENTOLIN HFA AER	Albuterol	No	3	
VENTOLIN HFA AER	Albuterol	No	3	
VENTOLIN HFA AER	Albuterol	No	3	
VENTOLIN HFA AER	Albuterol	No	3	
VENTOLIN HFA AER	Albuterol	No	3	
VENTOLIN HFA AER	Albuterol	No	3	
VENTOLIN HFA AER	Albuterol	No	3	
VERELAN CAP 180MG	Verapamil	No	3	
Viagra Tab 100MG	Sildenafil	No	2	QL / G
Viagra Tab 25MG	Sildenafil	No	2	QL / G
Viagra Tab 50MG	Sildenafil	No	2	QL / G
VIBRAMYCIN Syrup 50 MG/5ML	Doxycycline	No	3	
VIBRAMYCIN Susp 25 MG/5ML	Doxycycline	Yes	3	
VICTOZA SOLUTION 18 MG/3ML	LIRAGLUTIDE	No	4	
Videx EC Cap 125MG	Didanosine	Yes	2	
Videx EC Cap 200MG	Didanosine	Yes	2	
Videx EC Cap 400MG	Didanosine	Yes	2	
Videx EX Cap 250MG	Didanosine	Yes	2	
Videx Sol 2GM	Didanosine	No	2	
Videx Sol 4GM	Didanosine	No	2	
Vigamox Dro 0.5%	Moxifloxacin	No	2	
VIRACEPT POW 50MG/GM	Nelfinavir	No	2	
VIRACEPT TAB 250MG	Nelfinavir	No	2	
VIRACEPT TAB 625MG	Nelfinavir	No	2	
VIRAMUNE SUS 50MG/5ML	Nevirapine	No	2	
VIRAMUNE TAB 200MG	Nevirapine	No	2	
VIRAZOLE For Inhal Soln 6 GM	Ribavirin	No	2	
VIREAD TAB 300MG	Tenofovir	No	2	
VIROPTIC Ophth Soln 1%	Trifluridine	Yes	3	
VISICOL Tabs 1.102-0.398 GM(1.5GM Na Phos)	Sodium Phosphates	No	3	
VISTARIL Cap 25 MG	Hydroxyzine	Yes	3	
VISTARIL Cap 50 MG	Hydroxyzine	Yes	3	
VISTARIL Susp 25 MG/5ML	Hydroxyzine	No	3	



Ventegra Preferred Formulary Alphabetical Listing 2012

Label Name	Generic Name	Generic Available	Preferred Tiering Recommendations	Benefit Notes
VOLMAX TAB 4MG	Albuterol	Yes	3	
VOLMAX TAB 8MG	Albuterol	No	3	
VOLTAREN TAB 50MG	Diclofenac	Yes	3	
VOLTAREN Tab Delayed Release 75 MG	Diclofenac	Yes	3	
VOLTAREN Sodium Gel 1%	Diclofenac	No	3	
VOSOL Otic Soln 2%	Acetic Acid, Propylene Glycol Diacetate, and Hydrocortisone	Yes	3	
VOSOL-HC Otic Soln 1-2%	Acetic Acid, Propylene Glycol Diacetate, and Hydrocortisone	Yes	3	
VOSPIRE ER TAB 4MG	Albuterol	No	3	
VOSPIRE ER TAB 8MG	Albuterol	No	3	
Vytorin Tab 10-10MG	Ezetimibe and Simvastatin	No	3	
Vytorin Tab 10-20MG	Ezetimibe and Simvastatin	No	3	
Vytorin Tab 10-40MG	Ezetimibe and Simvastatin	No	3	
Vytorin Tab 10-80MG	Ezetimibe and Simvastatin	No	3	ST
WESTHROID 180 MG (3 Grain)	Thyroid	Yes	3	
WESTHROID Tab 130 MG	Thyroid	Yes	3	
WESTHROID Tab 32.5 MG	Thyroid	Yes	3	
WESTHROID Tab 65 MG	Thyroid	Yes	3	
Xeloda Tab 150MG	Capecitabine	No	3	
Xeloda Tab 500MG	Capecitabine	No	3	
Xenaderm Oint	Trypsin, Balsam Peru, and Castor Oil	Yes	3	
XIFAXAN TABLET 200 MG	RIFAXIMIN	No	2	QL
XIFAXAN TABLET 550 MG	RIFAXIMIN	No	2	
Xopenex HFA Aer	Levalbuterol	No	3	ST
XYZAL SOLN	Levocetirizine Dihydrochloride	No	3	
XYZAL TAB 5MG	Levocetirizine Dihydrochloride	No	3	
ZANTAC Syrup 15 MG/ML (75 MG/5ML)	Ranitidine	Yes	3	
ZANTAC Tab 150 MG	Ranitidine	Yes	3	
ZANTAC Tab 300 MG	Ranitidine	Yes	3	
ZARONTIN Cap 250 MG	Ethosuximide	Yes	3	
ZARONTIN Cap 250 MG	Ethosuximide	Yes	3	
ZARONTIN Soln 250 MG/5ML	Metolazone	Yes	3	
Z-COF HC Liqd 8-2.5-3.25 MG/5ML	Phenyleph, Chlorpheniramine w/ Hydrocodone	Yes	3	
Z-COF HC Liqd 8-2.5-3.5 MG/5ML	Phenyleph, Chlorpheniramine w/ Hydrocodone	Yes	3	
Z-COF HCX Liqd Liquid 7.5-200 MG/5ML	Hydrocodone and Guaifenesin	Yes	3	
Z-COF LA Tab SR 12HR 30-650 MG	Guaifenesin and Dextromethorphan	Yes	3	
Z-COF LAX Tab SR 12HR 30-835 MG	Guaifenesin and Dextromethorphan	Yes	3	
ZEBUTAL Cap 50-500-40 MG	Butalbital, Acetaminophen, and Caffeine	Yes	3	
ZEMPLAR 1 MCG	PARICALCITOL	No	2	
ZEMPLAR 2 MCG	PARICALCITOL	No	2	
ZEMPLAR 4 MCG	PARICALCITOL	No	2	
ZENAPAX INJ 25MG/5ML	Daclizumab	No	5	



Ventegra Preferred Formulary Alphabetical Listing 2012

Label Name	Generic Name	Generic Available	Preferred Tiering Recommendations	Benefit Notes
Zerit Cap 15MG	Stavudine	No	2	
Zerit Cap 20MG	Stavudine	No	2	
Zerit Cap 30MG	Stavudine	No	2	
Zerit Cap 40MG	Stavudine	No	2	
Zerit Sol 1MG/ML	Stavudine	No	2	
ZESTORETIC Tab 20-25 MG	Lisinopril and Hydrochlorothiazide	Yes	3	
ZESTORETIC Tab 10-12.5 MG	Lisinopril and Hydrochlorothiazide	Yes	3	
ZESTORETIC Tab 20-12.5 MG	Lisinopril and Hydrochlorothiazide	Yes	3	
ZESTRIL Tab 10 MG	Lisinopril	Yes	3	
ZESTRIL Tab 2.5 MG	Lisinopril	Yes	3	
ZESTRIL Tab 20 MG	Lisinopril	Yes	3	
ZESTRIL Tab 30 MG	Lisinopril	Yes	3	
ZESTRIL Tab 40 MG	Lisinopril	Yes	3	
ZESTRIL Tab 5 MG	Lisinopril	Yes	3	
Zetia Tab 10MG	Ezetimibe	No	3	
ZIAGEN SOL 20MG/ML	Abacavir Sulfate	No	2	
ZIAGEN TAB 300MG	Abacavir Sulfate	No	2	
ZINCATE Cap 220 MG	Zinc Sulfate	Yes	3	
ZONALON Cream 5%	Doxepin	No	3	
ZORPRIN Tab CR 800 MG	Aspirin	Yes	3	
ZOVIA 1/35	ETHYNODIOL DIACETATE & ETHINYL ESTRADIOL	Yes	1	
ZOVIA 1/50	ETHYNODIOL DIACETATE & ETHINYL ESTRADIOL	No	1	
ZOVIRAX Cap 200 MG	Acyclovir	Yes	3	
ZOVIRAX Cap 800 MG	Acyclovir	Yes	3	
ZOVIRAX Cream 5%	Acyclovir	No	3	
ZOVIRAX Oint 5%	Acyclovir	No	3	
ZOVIRAX Susp 200 MG/5ML	Acyclovir	Yes	3	
ZOVIRAX Tab 400 MG	Acyclovir	Yes	3	
ZYLOPRIM Tab 100 MG	Allopurinol	Yes	3	
ZYLOPRIM Tab 300 MG	Allopurinol	Yes	3	
ZYMAR DRO 0.3	Gatifloxacin	No	2	
ZYMAXID SOLUTION 0.5 %	Gatifloxacin	No	2	
ZYPREXA TAB 10MG	Olanzapine	No	3	
ZYPREXA TAB 15MG	Olanzapine	No	3	
ZYPREXA TAB 2.5MG	Olanzapine	No	3	
ZYPREXA TAB 20MG	Olanzapine	No	3	
ZYPREXA TAB 5MG	Olanzapine	No	3	
ZYPREXA TAB 7.5MG	Olanzapine	No	3	
ZYPREXA ZYDI TAB 10MG	Olanzapine	No	3	
ZYPREXA ZYDI TAB 15MG	Olanzapine	No	3	
ZYPREXA ZYDI TAB 20MG	Olanzapine	No	3	



Ventegra Preferred Formulary Alphabetical Listing 2012

Label Name	Generic Name	Generic Available	Preferred Tiering Recommendations	Benefit Notes
ZYPREXA ZYDI TAB 5MG	Olanzapine	No	3	
	Azelastine	Yes	2	QL
	Methylphenidate HCL SA OSM	Yes	2	QL
	Methylphenidate HCL SA OSM	Yes	2	QL
	Methylphenidate HCL SA OSM	Yes	2	QL
	Methylphenidate HCL SA OSM	Yes	2	QL
	Ciprofloxacin XR	Yes	2	
	Ciprofloxacin XR	Yes	2	
	Clarithromycin XL	Yes	2	
	Donepezil	Yes	2	
	Donepezil	Yes	2	
	Donepezil	Yes	2	
	Donepezil	Yes	2	
	Donepezil	Yes	2	
	Donepezil	Yes	2	
	Enoxaparin	Yes	4	
	Risperidone ODT	Yes	2	
	Risperidone ODT	Yes	2	
	Risperidone ODT	Yes	2	
	Risperidone ODT	Yes	2	
	Risperidone ODT	Yes	2	
	Trospium	Yes	2	
	Venlafaxine SR	Yes	2	
	Venlafaxine SR	Yes	2	
	Venlafaxine SR	Yes	2	
	Zolpidem CR	Yes	2	
	Zolpidem CR	Yes	2	