



Description of the Healthy Options Preferred Drug List

The Health Options **Preferred Drug List** (also known as the Drug Formulary) lists the drugs that are eligible for coverage for New Jersey Healthy Options members, except as otherwise authorized by the plan. For those occasions where an unlisted drug is required for proper medical management, the alternative, unlisted medication may be requested as an exception through the Prior Authorization procedure, by faxing the Health Net Pharmaceutical Services (HNPS) Prior Authorization Department at (800) 977-8226.

The list of medications includes:

- Brand-name medications (listed in UPPER-CASE letters)
- Generic names (listed in lower-case letters).
- Drugs that require prior authorization are indicated by the letters "PA".
- Drugs that are subject to quantity limits are indicated by the letters "QL".
- Drugs that are available over-the-counter (see explanation below) are indicated by the letters "OTC".

Please note that all generic medications are listed by generic name. This list is subject to change. For further information, members may telephone the Customer Contact Center at the number listed on the back of their member ID card.

How the Preferred Drug List is Developed

The medications on the Healthy Options Preferred Drug List are selected by the Health Net Pharmacy & Therapeutics (P&T) Committee. The P&T Committee meets quarterly to evaluate the clinical effectiveness, safety profile, dosing regimen and affordability of medications before including them on the Preferred Drug List. The Preferred Drug List may change as medications are continually reviewed by the P&T Committee.

Physicians are encouraged to submit comments and recommendations on the Health Net Healthy Options Preferred Drug List to the Pharmacy & Therapeutics Committee. Requests should be faxed to: (203) 225-3232 or addressed to:

Health Net Pharmacy Management
One Far Mill Crossing
P.O. Box 904
Shelton, CT 06484-0944

Generic Medications

Generic drugs meet strict guidelines established by the FDA. The FDA approval certifies that the drugs are safe and effective, contain the same active ingredients as brand-name drugs and are judged to be equivalent to those drugs in strength, quality and purity. When available, generic drugs must be used unless the medical necessity of a brand prescription is established via the prior authorization process.

Non-Prescription (Over-The-Counter) Medications

Medications available without a prescription that are listed in the description of OTC covered medications from the Division of Medical Assistance and Health Services (DMAHS) are covered for Healthy Options members (i.e., Benadryl, Polysporin, etc.). These products are covered when obtained with a prescription order through a network pharmacy.

Drug Utilization Review (DUR)

The DUR program evaluates a prescription when the pharmacy provider electronically submits the prescription. As the prescription is submitted, a quality assurance check is made to determine if the medication poses a potential problem for the member. The criteria for this review is based on rational drug therapy, referenced interaction information, suggested dosage limits, and recommended length of therapy as indicated by the drug manufacturer's FDA-approved package insert and primary medical literature. The prior authorization process



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may also be used to request a dosing regimen that is outside the usual recommended DUR range.

DUR edits used to assist the pharmacist in the provision of quality care are:

- Drug / Age conflicts
- Drug / Disease conflicts
- Drug / Drug Interactions
- Drug / Gender Conflicts
- Drug/Pregnancy Conflicts
- Excessive Daily Doses
- Ingredient Duplication
- Insufficient Daily Doses
- Insufficient Duration
- Refill Too Late
- Refill Too Soon
- Therapeutic Duplication

Medications Subject to Prior Authorization

Drugs requiring prior authorization are denoted with the letters “PA” in the Preferred Drug List. Brand name drugs for which a generic is available, and drugs which do not meet DUR criteria, are also subject to prior authorization.

Prior Authorization Process

To seek prior authorization for a drug not listed on the Healthy Options Preferred Drug List or for a drug labeled “PA”, the participating physician or provider must fax a completed Prior Authorization Form to:

Health Net Pharmaceutical Services (HNPS)

Prior Authorization Department:

Fax: (800) 977-8226

Monday – Friday: 9 am – 9 pm EST

When prescribing or dispensing a medication that requires prior authorization, there are three communication options:

1. Using the Health Net Prior Authorization form, complete and fax the documented justification with reference to the criteria to (800) 977-8226.
2. When a prescription is written for a drug that requires Prior Authorization, please indicate on the prescription the specific documented justification for that drug based on specific criteria (i.e., diagnosis or drugs previously used).
3. The dispensing pharmacist can obtain the Prior Authorization from HNPS if the pharmacist has the necessary patient information, or can call the prescriber to obtain the necessary patient information.

Exception Process for Drugs Not on Preferred Drug List

In the majority of cases, the Preferred Drug List will contain a drug that should meet the needs of the individual, and these choices should be considered first.

Exceptions will be granted where medically necessary and medically appropriate. The factors that will be considered in determining whether those definitions are met include the following:

1. Documented allergic/adverse reaction to drugs on the Preferred Drug List.
2. Documented failure on drugs on the Preferred Drug List.
3. Documented patient stability/control issues where change is contraindicated or not advisable.

Although some situations may require written documentation, the three means of communication listed for the Prior Authorization process also apply here.

Pharmacist Responsibilities

- When a claim is rejected, contact the physician or HNPS Prior Authorization Department.
- No member should leave the pharmacy without being assisted in obtaining his/her prescription or an alternative medication.



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- Provide 72-hour supply of medication while awaiting prior authorization.

Physician Responsibilities

- For Health Net Healthy Options members, please consider drugs on the Preferred Drug List first.
- When contacted by a pharmacist regarding a drug not on the Preferred Drug List or requiring a prior authorization:
 - Non-Preferred: when appropriate, change medication to preferred drug list option, or fax HNPS Prior Authorization Dept **(800) 977-8226** to provide justification/documentation for non-preferred selection.
 - Prior Authorization: fax HNPS Prior Authorization Dept **(800) 977-8226**

ANALGESICS

Analgesics

acetaminophen (otc)
 acetaminophen w/codeine
 butalbital/apap/caffeine/codeine
 butalbital/aspirin/caffeine/codeine
 butorphanol tartrate (QL)
 fentanyl patch (PA)
 hydrocodone/apap
 hydromorphone
 meperidine
 methadone
 morphine sulfate sr
 oxycodone (QL)
 oxycodone w/apap
 propoxyphene-n/apap
 tramadol
 tramadol/apap
 AVINZA
 KADIAN
 OPANA ER (QL)
 ORAMORPH SR (PA)

ANTI-HISTAMINES

Antihistamine - Miscellaneous

hydroxazine
 hydroxyzine pamoate
 promethazine

Low Sedating Antihistamines &

Combinations

cetirizine (OTC)
 fexofenadine (PA)
 loratadine (OTC)

ANTI-INFECTIVE AGENTS

Antifungal Antibiotics (Oral)

clotrimazole troche
 fluconazole
 fluconazole 150mg (QL)
 itraconazole (PA)
 ketoconazole
 nystatin oral
 terbinafine
 GRIS-PEG

Antimalarial Agents

chloroquine
 hydroxychloroquine
 isoniazid
 mefloquine (QL)
 rifampin
 DAPSONE
 MALARONE
 YODOXIN

Antivirals

acyclovir oral

valacyclovir
 RELENZA
 TAMIFLU (QL)
 TAMIFLU SUSPENSION (QL)
 VALCYTE

Cephalosporins

cefaclor
 cefadroxil
 cefdinir
 cefprozil
 cefuroxime
 cephalixin
 SUPRAX

Erythromycins / Macrolides

azithromycin 250mg (QL)
 azithromycin 500mg (QL)
 azithromycin 600mg (QL)
 azithromycin powder pak 1gm (QL)
 clarithromycin
 clarithromycin xl
 ZMAX (QL)

Fluoroquinolones

ciprofloxacin
 AVELOX (PA)

HIV Antivirals

didanosine
 didanosine ec
 stavudine
 APTIVUS
 ATRIPLA
 COMBIVIR
 CRIVIVAN
 EMTRIVA
 EPIVIR
 EPIVIR 300MG (QL)
 EPZICOM
 FUZEON (PA)
 INTELENCE
 INVIRASE
 KALETRA
 LEXIVA
 NORVIR
 PREZISTA 150MG (QL)
 PREZISTA 300MG (QL)
 PREZISTA 400MG, 600MG (QL)
 PREZISTA 75MG (QL)
 RESCRIPTOR
 REYATAZ
 SELZENTRY
 SUSTIVA
 TRIZIVIR
 TRUVADA
 VIRACEPT
 VIRAMUNE
 VIREAD
 ZIAGEN

Miscellaneous Anti-infectives

clindamycin oral
 metronidazole

nitrofurantoin macrocrystals
 MEPRON (PA)
 VANCOCIN (PA)

Penicillins

amoxicillin
 amoxicillin/clavulanate
 amoxicillin/clavulanate suspension
 penicillin v potassium
 AUGMENTIN XR

Sulfonamides

sulfamethoxazole/trimethoprim
 sulfasalazine

Tetracyclines

doxycycline hyclate
 doxycycline monohydrate
 minocycline
 tetracycline

ANTINEOPLASTIC AGENTS

Antineoplastics

bicalutamide
 cyclophosphamide
 hydroxyurea
 megestrol
 mercaptopurine
 methotrexate
 tamoxifen
 ARIMIDEX (QL)
 AROMASIN (QL)
 FEMARA (QL)
 NEXAVAR (PA)
 SUTENT (PA)
 TEMODAR
 XELODA

CARDIOVASCULAR AGENTS

Angiotensin Converting Enzyme Inhibitors (ACE) and Combinations

benazapril/hctz
 benazepril
 captopril
 captopril/hctz
 enalapril
 enalapril/hctz
 fosinopril
 fosinopril/hctz
 lisinopril
 lisinopril/hctz
 moexipril
 moexipril/hctz
 quinapril
 quinapril/hctz
 ramipril
 trandolapril

Angiotensin II Receptor Blockers (ARB) and Combinations

BENICAR (PA)
 BENICAR HCT (PA)
 DIOVAN (PA)
 DIOVAN HCT (PA)

Antiadrenergic Agents

clonidine
 doxazosin
 prazosin
 terazosin capsules

Antilipidemic Agents

cholestyramine can
 colestipol
 fenofibrate
 gemfibrozil
 lovastatin
 pravastatin 10mg, 20mg (QL)
 pravastatin 40mg (QL)
 simvastatin (QL)
 ADVICOR 1000-20MG (QL)
 ADVICOR 500-20MG, 750-20MG (QL)
 CRESTOR (QL)
 NIASPAN
 SIMCOR
 TRICOR (QL)
 VYTORIN (QL)

Beta-Adrenergic Antagonists

acebutolol
 atenolol
 atenolol/chlorthalidone
 metoprolol
 metoprolol xl
 nadolol
 propranolol
 propranolol sr
 propranolol/hctz

Calcium Channel Blockers

amlodipine
 diltiazem
 diltiazem sr
 felodipine
 nifedipine sr
 nisoldipine
 verapamil

Cardiac Glycosides

digoxin

Combination Alpha-Beta Antagonist

carvedilol
 labetalol

Combination Antihypertensives

amlodipine/benazepril
 bisoprolol/hctz
 clonidine/chlorthalidone
 hydralazine/hctz
 methyl dopa/hctz

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EXFORGE (PA)
EXFORGE HCT (PA)

Renin Inhibitors

TEKTURNA (PA)
TEKTURNA HCT (PA)

Vasodilators

hydralazine
isosorbide mononitrate
isosorbide mononitrate sr
nitroglycerin ointment
nitroglycerin oral sr
nitroglycerin patch
nitroglycerin sl
NITROLINGUAL SPRAY

CENTRAL NERVOUS SYSTEM MEDICATIONS

Antianxiety Medications

alprazolam
alprazolam xr
buspirone
chlordiazepoxide
clorazepate
diazepam
lorazepam

Antidepressants

amitriptyline
amitriptyline/chlordiazepoxide
bupropion
bupropion sr
bupropion xl 150mg (QL)
bupropion xl 300mg (QL)
citalopram 10mg
citalopram 20mg
citalopram 40mg
clomipramine
desipramine
doxepin
fluoxetine
fluvoxamine
imipramine
mirtazapine
mirtazapine odt
nefazodone
nortriptyline
paroxetine (QL)
paroxetine cr (QL)
sertraline
trazodone
venlafaxine
CYMBALTA (PA)
EFFEXOR XR (PA)
EMSAM (PA)
LEXAPRO (QL)

Antimanic Agents

lithium carbonate er

Barbiturates

phenobarbital

Cerebral Stimulants

amphetamine/dextroamphetamine
amphetamine/dextroamphetamine sr (QL)
dexmethylphenidate
dextroamphetamine
methylphenidate
methylphenidate cr
CONCERTA 18MG, 27MG (QL)
CONCERTA 36MG (QL)
CONCERTA 54MG (QL)
METADATE CD
STRATTERA (PA)
VYVANSE (QL)

Miscellaneous Central Nervous

System Agents

meprobamate
naltrexone

Sedative / Hypnotics

estazolam
flurazepam
temazepam
triazolam
zolpidem (QL)

ELECTROLYTIC, CALORIC, AND WATER BALANCE

Electrolyte Depleters

sodium polystyrene sulfonate

Loop Diuretics

bumetadine
furosemide

Potassium Chloride Formulations

potassium chloride

Potassium Sparing Diuretics

amiloride
amiloride/hctz
spironolactone
spironolactone/hctz
triamterene/hctz

Thiazide and Related Diuretics

hydrochlorothiazide tablets

ENDOCRINE AGENTS

Antidiabetic Agents

glimepiride
glipizide
glipizide sr
glyburide
glyburide, micronized
glyburide/metformin
metformin
metformin er

ACTOPLUS MET
ACTOS (QL)
AVANDAMET
AVANDARYL
AVANDIA 2MG, 4MG (QL)
AVANDIA 8MG (QL)
DUETACT
GLUCAGON (QL)
GLUMETZA
JANUMET (QL)
JANUVIA (QL)
PRANDIN (PA)

Estrogens

estradiol patch (PA)
estradiol tablet
estropiate
CLIMARA PRO
ESTRACE CREAM
ESTRATEST HS
MENEST
PREMARIN
PREMARIN VAGINAL CREAM
PREMPHASE
PREMPRO

Insulin

HUMALOG
HUMULIN
LANTUS
LEVEMIR

Miscellaneous Endocrine Agents

desmopressin

Osteoporosis Agents

alendronate 35mg, 70mg (QL)
alendronate 5mg, 10mg, 40mg (QL)
etidronate
fortical (QL)
EVISTA
FOSAMAX PLUS D

Thyroid Agents

levothyroxine or levoxyl or levotroid
liothyronine
ARMOUR THYROID

Thyroid Antagonist Agents

methimazole
propylthiouracil

EYE, EAR, NOSE & THROAT AGENTS

NASAL - Corticosteroids

flunisolide nasal (QL)
fluticasone nasal spray (QL)
NASONEX (QL)
VERAMYST (QL)

NASAL - Miscellaneous

ipratropium nasal

ASTELIN
ASTEPRO (QL)

OPHTHALMIC - Antibiotic / Anti-Inflammatory Combinations

dexamethasone/neomycin/poly-b
neomycin/poly-b/gramicidin
sulfacetamide/prednisolone
tobramycin/dexamethasone
BLEPHAMIDE
CORTISPORIN OPHTH SUSP
FML-S
LOTEMAX
PRED-G
ZYLET

OPHTHALMIC - Anti-Glaucoma Agents

acetazolamide
acetazolamide sr
brimonidine tartrate
brimonidine tartrate pres. free
dorzolamide/timolol
levobunolol
pilocarpine
timolol maleate
timolol maleate gel
AZOPT
BETOPTIC-S
LUMIGAN (QL)
TRAVATAN
TRAVATAN Z

OPHTHALMIC - Anti-Inflammator

diclofenac ophthalmic
fluorometholone
flurbiprofen ophthalmic
prednisolone ophth
ACULAR
ACULAR LS

OPHTHALMIC - Anti-Allergy Agents

cromolyn
PATADAY
PATANOL

OPHTHALMIC - Antibiotics

bacitracin ophthalmic
bacitracin/polymixin b
ciprofloxacin ophthalmic
erythromycin ophthalmic
ofloxacin ophthalmic
polymyxin-b/trimethoprim
sulfacetamide sodium
tobramycin
VIGAMOX

OTIC Agents

acetic acid 2%
acetic acid 2%/hydrocortisone 1%
benzocaine/antipyrine
ofloxacin otic
CIPRO HC

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CIPRODEX

THROAT AND MOUTH

Preparations

perigard

GASTROINTESTINAL DRUGS

Anti-Emetics

meclizine
metoclopramide
ondansetron (QL)
ondansetron odt (QL)
prochlorperazine
trimethobenzamide

Antispasmodics and GI Motility

belladonna/phenobarbital
dicyclomine
l-hyoscyamine

Anti-Ulcer Agents - PPI

omeprazole (PA)
pantoprazole (PA)
ACIPHEX (PA)

Anti-Ulcer Agents Miscellaneous

famotidine
ranitidine
sucralfate

Miscellaneous Gastrointestinal

hydrocortisone enema
hydrocortisone rectal cream 2.5%
hydrocortisone suppository
misoprostol
pramoxine/hydrocortisone
ursodiol
ASACOL
CANASA
CREON
PENTASA

GENTOURINARY AGENTS

Benign Prostatic Hyperplasia Agents

(BPH)

finasteride
FLOMAX (QL)

Overactive Bladder Agents (OAB)

oxybutynin

GLUCOMETERS AND TEST STRIPS

Glucometers and Test Strips

ACCU-CHEK ACTIVE
ACCU-CHEK ADVANTAGE
ACCU-CHEK AVIVA

ACCU-CHEK COMFORT
ACCU-CHEK COMPACT
FREESTYLE FLASH
FREESTYLE FREEDOM
FREESTYLE LITE
PRECISION XTRA

HEMATOPOIETIC AGENTS

Hematopoietic Agents

LOVENOX (QL)

IMMUNOLOGIC AGENTS

Immunomodulators

INFERGEN

Immunosuppressive

azathioprine
cyclosporine microemulsion (PA)
AZASAN
CELLCEPT
PROGRAF
RAPAMUNE

JOINT / CONNECTIVE TISSUE / MUSCULOSKELETAL AGENTS

Adrenal Corticosteroids

dexamethasone
hydrocortisone
methylprednisolone
prednisolone sodium phosphate solution
prednisone

Antirheumatics

methotrexate

Gout Agents

allopurinol
colchicine
probenecid

Non-Steroidal Anti-Inflammatory Agents

diclofenac
diclofenac potassium
diclofenac sr
etodolac
ibuprofen (rx & otc)
indomethacin
indomethacin sr
ketorolac
meloxicam (QL)
nabumetone
naproxen
naproxen sodium ec
oxaprozin

piroxicam
sulindac
CELEBREX (QL) (PA)

Skeletal Muscle Relaxants

baclofen
carisoprodol
carisoprodol/aspirin
cyclobenzaprine
methocarbamol
tizanidine tablets

NEUROLOGICAL AGENTS

Alzheimers Agents

ARICEPT (PA)
EXELON (PA)
EXELON PATCH (PA)

Anticonvulsants

carbamazepine
clonazepam
divalproex
divalproex er
gabapentin
lamotrigine
levetiracetam
oxcarbazepine
phenytoin
topiramate
zonidamide
TEGRETOL XR

Anti-Parkinson Agents

amantadine
benztropine
bromocriptine
carbidopa/levodopa
carbidopa/levodopa cr
ropinirole
selegiline
trihexyphenidyl
COMTAN
MIRAPEX
STALEVO

Migraine Medications

butalbital/apap/caffeine
butalbital/aspirin/caffeine
ergotamine/caffeine
sumatriptan inj statdose (QL)
sumatriptan inj vials (QL)
sumatriptan spray (QL)
sumatriptan tablets (QL)
AMERGE (QL)
AXERT (QL)

OBSTETRICAL AND GYNECOLOGICAL MEDICATIONS

Contraceptives

jolesa, quasense
medroxyprogesterone acetate 150mg/ml (QL)
microgestin fe
necon 1/35
necon 1/50
necon 10/11
necon 7/7/7
nora-be
ogestrel
sprintec
trivora

LOSEASONIQUE
NUVARING (QL)
ORTHO EVRA (QL)
ORTHO TRI-CYCLEN LO
SEASONIQUE
YASMIN
YAZ

Miscellaneous OB/GYN

levonorgestrel (QL)
METHERGINE

OB/GYN Anti-Infectives

clindamycin vaginal
metronidazole vaginal gel
nystatin vaginal
terconazole suppository

Progestin Agents

medroxyprogesterone

RESPIRATORY AGENTS

Emergency Respiratory Agents

EPIPEN (QL)
EPIPEN JR (QL)

Inhaled Bronchial Steroids

ASMANEX (QL)
AZMACORT (QL)
FLOVENT HFA (QL)
PULMICORT FLEXHALER (QL)
PULMICORT SOLUTION (QL)
QVAR (QL)

Inhaled Respiratory Medications

acetylcysteine
albuterol inhalation solution
ipratropium inhalation solution
ipratropium/albuterol inhalation solution
ADVAIR DISKUS (QL)
ADVAIR HFA (QL)
ATROVENT HFA
COMBIVENT (QL)
FORADIL (QL)
INTAL INHALER (QL)
PROVENTIL HFA (QL)
PULMOZYME
SPIRIVA (QL)
XOPENEX HFA (QL)

Oral Medication For Asthma or Lung Problems

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albuterol sulfate sr
terbutaline
theophylline er
SINGULAIR (QL)

SKIN AND MUCOUS MEMBRANE AGENTS

Anti-Acne Agents

benzoyl peroxide creamy wash
benzoyl peroxide gel
benzoyl peroxide/erythromycin
clindamycin topical solution
isotretinoin
metronidazole cream
sulfacetamide sodium w/ sulfur
tretinoin
CLINDAGEL
DIFFERIN CREAM, GEL (QL)
METROGEL
METROGEL KIT
RETIN-A MICRO GEL (QL)
RETIN-A MICRO GEL PUMP (QL)
TAZORAC (QL)

Antifungals

ciclopirox
clotrimazole/betamethasone
econazole
iodoquinol/hydrocortisone
ketoconazole shampoo
nystatin topical
nystatin/triamcinolone
EXELDERM
LOTRIMIN AF (OTC)
NAFTIN
OXISTAT

Anti-Infectives

mupirocin ointment
silver sulfadiazine
BACTROBAN CREAM (PA)

Anti-Inflammatory Agents

alclometasone
augmented betamethasone
augmented betamethasone cream
betamethasone dipropionate
betamethasone valerate
clobetasol
desonide
desoximetasone
fluocinolone
fluocinonide
hydrocortisone 2.5%
hydrocortisone butyrate
hydrocortisone valerate
mometasone
triamcinolone

Antipruritics and Local Anesthetics

lidocaine topical
lidocaine viscous

Antipsoriatic

urea
DOVONEX

Miscellaneous Skin & Mucous

Membrane

podofilox solution
CONDYLOX GEL

Scabicides

lindane
permethrin
EURAX

VITAMINS

Miscellaneous Vitamins

ferrous sulfate (otc)
folic acid
polyvitamins (otc)
tri-vitamins (otc)

Prenatal Vitamins

ob-natal one
vinate
PRENATE DHA
VITAFOL-OB
VITAFOL-OB + DHA

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