

Quick Reference Formulary

Most Commonly Prescribed Medications

All generic medications are listed on the Partners Rx standard formulary. Please use this quick reference list when you receive a prescription. To receive maximum prescription drug benefits, ask your doctor to prescribe a medication on this formulary. Remember, if a preferred drug from the formulary is prescribed, your copay may be less than if a non-preferred drug (a drug not on the complete formulary list) is prescribed for you. To see the complete Partners Rx standard formulary, visit www.partnersrx.com, under Members, or call toll-free 1.800.711.4550.

Drugs are listed alphabetically by brand name.

Accu-Chek: Aviva, Compact	Ceclor, CD* (cefaclor, ER)	Glucophage, XR* (metformin, ER)	Micronase* (glyburide)	Renvela
Activella* (estradiol/norethin-drone)	Ceftin* (cefuroxime)	Glucotrol, XL* (glipizide)	Mirapex* (pramipexole)	Requip* (ropinirole)
Actonel	Cefzil* (cefprozil)	Glucovance* (glyburide/ metformin)	Motrin* (ibuprofen)	Restoril* (temazepam)
ActoPlus Met, XR	Centestin	Glynase Prestab* (glyburide micro)	Nalfon* (fenoprofen)	Safyral
Actos	Cipro* (ciprofloxacin)	Glyset	Namenda	Sepra, DS*
Advair	Ciprodex	Halcion* (triazolam)	Naprosyn* (naproxen)	(sulfamethoxazole/ trimethoprim)
Alora	Climara* (estradiol patch)	Humalog, Humulin	Nasonex	Serevent Diskus
Alphagan P* (brimonidine)	Climara Pro	Hydrodiuril* (hydrochlorothiazide)	Natazia	Seroquel
Altace* (ramipril)	Coreg* (carvedilol)	Hytrin* (terazosin)	Niaspan	Seroquel XR
Amaryl* (glimeperide)	Coreg CR	Hyzaar* (losartan HCT)	Nitro-Dur (nitroglycerin patch)	Singulair
Ambien* (zolpidem)	Coregard* (nadolol)	Imdur* (isosorbide mononitrate)	Nitrostat	Spiriva
Amoxil* (amoxicillin)	Cortifoam	Imitrex* (sumatriptan)	Nizoral* (ketoconazole)	Starlix* (nateglinide)
Anaprox, DS* (naproxen sodium)	Cosopt* (dorzolamide-timolol)	Inderal* (propranolol)	Norpramin* (desipramine)	Symbicort
AndroGel	Coumadin (warfarin)	Inderal LA* (propranolol LA)	Norvasc* (amlodipine)	Symmlin
Ansaid* (flurbiprofen)	Cozaar* (losartan)	Indocin, SR* (indomethacin, SR)	Novolin, Novolog	Synthroid (levothyroxine)
Apriso	Crestor	ISMO* (isosorbide mononitrate)	Nuvaring	Tenormin* (atenolol)
Arixtra* (fondaparinux)	Crolom* (cromolyn)	Isoptin, SR* (verapamil, SR)	Ocupress* (carteolol)	Timoptic XE* (timolol, XE)
Asacol	Cymbalta	Isordil* (isosorbide dinitrate)	Ogen* (estropipate)	Tolectin* (tolmetin)
Asmanex	Desyrel* (trazodone)	Janumet	Omnicef* (cefdinir)	Toprol XL* (metoprolol XL)
Astelin	Detrol, LA	Januvia	Onglyza	Travatan Z
Atrovent* (ipratropium bromide)	Diabeta* (glyburide)	Keflex* (cephalexin)	Ortho-Est* (estropipate)	Trental* (pentoxifylline)
Augmentin* (amox/clav)	Diflucan* (fluconazole)	Lanoxin (digoxin)	Orudis* (ketoprofen)	Tricor
Avalide	Dilacor XR* (diltiazem CR)	Lantus	Pamelor* (nortriptyline)	Trusopt* (dorzolamide)
Avapro	Dipentum	Lasix* (furosemide)	Persantine* (dipyridamole)	Uniphyll* (theophylline)
Azopt	Diovan, HCT	Levaquin* (levofloxacin)	Plavix	Verelan* (verapamil SR)
Azor	Duac	Levemir	Prandin	VESicare
Bactrim, DS* (sulfamethoxazole/ trimethoprim)	Dyazide* (triamterene/ HCTZ)	Lexapro* (escitalopram)	Precose* (acarbose)	Vivelle, Vivelle Dot
Bayer: Contour, Breeze 2	Effexor* (venlafaxine)	Lipitor* (atorvastatin)	Premarin	Voltaren* (diclofenac)
Benicar, HCT	Effexor XR* (venlafaxine XR)	Lodine* (etodolac)	Prempo	Welchol
Betagan* (levobunolol)	Effient	Lopid* (gemfibrozil)	Premphase	Wellbutrin, SR* (bupropion)
Betimol	Estrace* (estradiol)	Lopressor* (metoprolol)	Prinivil* (lisinopril)	Wellbutrin XL* (bupropion XL)
Betopic S	Estraderm* (estradiol)	Lortab* (hydrocodone/APAP)	Prinzide* (lisinopril/hctz)	Xalatan* (latanoprost)
Beyaz	Evista	Lotensin, HCT* (benazepril/ HCTZ)	Pristiq	Xopenex HFA
Boniva	Exforge HCT	Lotrel* (amlodipine/ benazepril)	ProAir HFA	Zantac* (ranitidine)
Byetta	FemHRT* (estradiol/norethin-drone)	Lovaza	Prometrium	Zaroxolyn* (metolazone)
Calan, SR* (verapamil, SR)	Flomax* (tamsulosin)	Lozol* (indapamide)	Protonix (pantoprazole)	Zenpep
Capoten* (captopril)	Flonase* (fluticasone)	Maxzide* (triamterene/ HCTZ)	Provera* (medroxy - progesterone)	Zetia
Carafate* (sucralfate)	Flovent, HFA	Metaglip* (glipizide/ metformin)	Prozac* (fluoxetine)	Zithromax* (azithromycin)
Cardizem* (diltiazem)	Flovent, HFA		Pulmicort	Zocor* (simvastatin)
Cardura* (doxazosin)	Foradil		Questran* (cholestyramine)	Zolof* (sertraline)
	Fosamax* (alendronate)		QVAR	Zomig, ZMT
	Fosamax-D*		Remeron* (mirtazapine)	Zyprexa* (olanzapine)
	Fosrenol			Zyprexa Zydys* (olanzapine ODT)

Key

Lowest Copay	Generic Medications	Listed in all lower-case letters
Middle Copay	Preferred Brand Name Medications	Listed with a leading capital letter
Highest Copay	Non-Preferred Brand Medications	Listed with an asterisk (*)

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Note: This is a partial list of medications that changes periodically. To ensure you have the most current version of the standard formulary, www.partnersrx.com, under Members, or call toll-free 1.800.711.4550. Inclusion of a medication on this formulary is not a guarantee of coverage. Please refer to your plan of benefits for coverage limitations and exclusions. Not all benefits plans in all states are subject to quantity limits. For details regarding quantity limits for your particular benefits plan, contact Customer Service at the telephone number listed on your identification card.