



The drugs in the left column will require prior authorization if the dosage is greater than the amount listed in the right hand column. Drugs may be covered by medical exception prior authorization *only* following demonstration by the physician of treatment failure or appropriateness of excessive dosage. Prior authorization forms are available for members by calling the number on their Pharmacy Benefit card.

**QUANTITY MANAGEMENT DRUG LISTING**

| <b>Drug Product</b>                                 | <b>Maximum Quantity per Rx</b>   |
|---|--|
| A.P.L. 5,000 units                                  | 3 vials  |
| A.P.L. 10,000 units                                 | 3 vials  |
| Actonel 5, 30 mg                                    | 30 tablets   |
| Actos 15, 30, 45 mg                                 | 30 tablets   |
| Adalat CC 30, 60, 90 mg                             | 30 tablets   |
| Allegra 180 mg                                      | 30 tablets   |
| Allegra 30 mg                                       | 60 tablets   |
| Allegra 60 mg                                       | 60 tablets/capsules  |
| Allegra-D   | 60 tablets   |
| Alora   | 10 patches   |
| Ambien 5 and 10 mg                                  | 30 tablets   |
| Amerge 1 and 2.5 mg                                 | 9 tablets  |
| Amoxil 500 and 875 mg                               | 28 tablets   |
| Ana-Guard   | 2 units (kits)   |
| Ana-Kit   | 2 units (kits)   |
| Anzemet 50 and 100 mg                               | 1 tablet   |
| Arava 10 and 20 mg                                  | 30 tablets   |
| Arava 100 mg  | 3 tablets  |
| Avandia 2, 4 mg                                     | 60 tablets   |
| Avandia 8 mg  | 30 tablets   |
| Avapro 75, 150, 300 mg                              | 30 capsules  |
| Avonex  | 4 vials  |
| Axert 6.25, 12.5 mg                                 | 6 tablets  |
| Betaseron   | 15 vials   |
| Biaxin reg and XL                                   | 28 tablets   |
| Cardura 1, 2, 4, 8 mg                               | 60 tablets   |
| Catapres TTS Patches                                | 5 patches  |
| Caverject   | 4 vials, kits, or ampoules except for 40 mcg/2 mL ampoule is 24 and package size = 2 |
| Ceclor CD 375 mg                                    | 20 tablets   |
| Ceclor CD 500 mg                                    | 14 tablets   |
| Celebrex 100 mg                                     | 30 tablets   |
| Celebrex 200 mg                                     | 60 tablets   |
| Celexa 10, 20, 40 mg                                | 30 tablets   |
| Chorionic gonadotropin 5,000, 10,000 units, generic | 3 vials  |
| Cipro 100 mg  | 6 tablets  |
| Cipro 250, 500, 750 mg                              | 30 tablets   |
| Cipro Suspension                                    | one 100 ml bottle  |

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| Claritin 10 mg/Claritin Reditabs 10 mg                                | 30 tablets                        |
| Claritin-D 12 Hour  | 60 tablets                        |
| Claritin-D 24 Hour  | 30 tablets                        |
| Climara Patches   | 5 patches                         |
| Copaxone  | 32 vials                          |
| Cordran Patch   | 24 patches (2 boxes)              |
| Cordran Tape  | 2 rolls                           |
| Diastat   | 1 box (2 rectal delivery systems) |
| Diflucan 150 mg   | 1 tablet                          |
| Diovan 80, 160, 320 mg  | 30 capsules                       |
| Dostinex 0.5 mg   | 10 tablets                        |
| Edex  | 4 vials or kits                   |
| Epi E-Z Pen/EZ Pen Jr.  | 2 units                           |
| Epipen, EpiPen JR.  | 2 units                           |
| Epivir  | 60 tablets                        |
| Esclim  | 10 patches                        |
| Estraderm   | 10 patches                        |
| Famvir 125 mg   | 21 tablets                        |
| Famvir 250 mg   | 60 tablets                        |
| Famvir 500 mg   | 21 tablets                        |
| Fempatch 0.025 mg   | 5 patches                         |
| Fentanyl Oralet 100 mcg, 200 mcg, 300 mcg, 400 mcg                    | 1 lozenge                         |
| Fosamax 35 and 70 mg  | 4 tablets                         |
| Fosamax 5, 10, and 40 mg  | 30 tablets                        |
| GoLYTELY  | 1 packet                          |
| Hytrin 1, 2, 5, 10 mg   | 60 capsules                       |
| Imitrex 25, 50 and 100 mg tablets                                     | 9 tablets                         |
| Imitrex 5 and 20 mg Nasal Spray                                       | 12 nasal spray devices            |
| Imitrex Syringe (Injection)   | 2 kit (2 syringes)                |
| Infergen 9 and 15 mcg   | 12 vials or syringes              |
| Kytril  | 2 tablets                         |
| Lescol 20, 40 mg  | 30 capsules                       |
| Lescol XL 80 mg   | 30 tablets                        |
| Lipitor 10, 20, 40, 80 mg   | 30 tablets                        |
| Luvox 100 mg  | 102 tablets                       |
| Luvox 25 mg   | 30 tablets                        |
| Luvox 50 mg   | 60 tablets                        |
| Maxalt/Maxalt-MLT 5 and 10 mg   | 12 tablets                        |
| Mevacor 10 mg   | 30 tablets                        |
| Mevacor 20, 40 mg   | 60 tablets                        |
| miconazole generic  | see Monistat                      |
| Migranal 4 mg/mL  | 8 ampules/spray                   |
| Monistat 3 suppositories & equivalent                                 | 3 (1 box)                         |
| Monistat Dual-Pak (1200 mg vaginal insert, 9 g 2% cream)              | 1 (1 box)                         |
| Monistat Dual-Pak (three 200 mg vaginal suppositories, 15 g 2% cream) | 1 (1 box)                         |
| Monopril 10, 20, 40 mg  | 30 tablets                        |

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| Monurol   | 1 sachet                    |
| Muse  | 4 urethral suppositories    |
| Mycobutin 150 mg                                      | 60 capsules                 |
| NebuPent  | 1 container (inhaler)       |
| Neumega   | 21 vials                    |
| Nexium 20, 40 mg                                      | 30 capsules                 |
| Norvasc 2.5, 5, 10 mg                                 | 30 tablets                  |
| Paxil 10 mg   | 30 tablets                  |
| Paxil 20, 30 mg                                       | 60 tablets                  |
| Paxil 40 mg   | 30 tablets                  |
| PEG-Intron all strengths                              | 4 units                     |
| Plan B  | 2 tablets                   |
| Pravachol 10, 20, 40 mg                               | 30 tablets                  |
| Pregnyl   | 3 vials                     |
| Prevacid 15, 30 mg                                    | 30 capsules                 |
| Preven  | 1 kit                       |
| Prevpak patient pack                                  | 1 package (package size 14) |
| Prilosec 10, 20, 40 mg                                | 30 capsules                 |
| Procardia XL 30, 60, 90 mg                            | 30 tablets                  |
| Profasi 5,000, 10,000 units                           | 3 vials                     |
| Prozac 10 mg  | 30 capsules, tablets        |
| Prozac 20 mg  | 30 capsules                 |
| Prozac 40 mg  | 60 capsules                 |
| Prozac Weekly 90 mg                                   | 5 capsules                  |
| Pulmicort Respules 0.25 and 0.5 mg/2 mL               | 70 ampules                  |
| Rebetron Combination (1200, 1000, or 600 therapy pak) | 2 packages                  |
| Regranex 0.01% gel 2, 7.5, and 15 g                   | 1 tube                      |
| Relenza   | 20 blisters                 |
| Sarafem 10 mg   | 35 capsules                 |
| Sarafem 20 mg   | 60 capsules                 |
| Serzone 50 mg   | 30 tablets                  |
| Sonata 10 mg  | 60 capsules                 |
| Sonata 5 mg   | 30 capsules                 |
| Sporanox 100 mg capsule                               | 30 capsules                 |
| Stadol Nasal Spray                                    | 2 spray bottles             |
| Tamiflu 75 mg   | 10 capsules                 |
| Tamiflu for oral suspension 12 mg/mL, 75 mL           | 1 bottle                    |
| Terazol 3   | 3 (1 box)                   |
| Terazol 3 Cream 0.8%                                  | 1 tube (of the 20 g)        |
| Terazol 7 Cream 0.4%                                  | 1 tube (of the 45 g)        |
| Terazosin 1, 2, 5, 10 mg                              | 60 capsules                 |
| TOBI  | 56 ampules                  |
| Toradol tablets                                       | 20 tablets                  |
| Tri-Nasal   | 3 bottles                   |
| Trovan 100 and 200 mg                                 | 14 tablets                  |
| Valtrex 1 g and 500 mg                                | 21 / 42 caplets (tablets)   |
| Vasotec / enalapril 2.5, 5, 10 mg                     | 30 tablets                  |
| Viagra  | 4 tablets                   |

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| Vioxx 12.5, 25 mg                                      | 30 tablets                                  |
| Vioxx 50 mg  | 5 tablets                                   |
| Vivelle  | 10 patches                                  |
| Vivelle-Dot  | 10 patches                                  |
| Zestril / Prinivil 2.5, 5, 10, 20, 30, 40 mg           | 30 tablets                                  |
| Zithromax for oral suspension 100 mg/5 ml, 200 mg/5 ml | 1 bottle (15 or 22.5 mL)                    |
| Zithromax for oral suspension 200 mg/5 ml              | 2 bottles (30 mL)                           |
| Zithromax Powder Packet for oral suspension, 1 g       | 2 packets                                   |
| Zithromax tablet or capsule, 250 mg                    | 6 tablets or capsules                       |
| Zithromax tablets, 600 mg                              | 10 tablets                                  |
| Zocor 5, 10, 20, 40, 80 mg                             | 30 tablets                                  |
| Zofran 24 mg   | 1 tablet                                    |
| Zofran 4 and 8 mg                                      | 12 tablets or orally disintegrating tablets |
| Zofran solution, 4 mg/5 mL                             | 3 bottles                                   |
| Zoloft 25 mg   | 30 tablets                                  |
| Zoloft 50, 100 mg                                      | 60 tablets                                  |
| Zomig 2.5, 5 mg  | 6 tablets                                   |
| Zomig-ZMT 2.5, 5 mg                                    | 6 tablets                                   |
| Zyrtec 5 and 10 mg                                     | 30 tablets                                  |
| Zyrtec-D   | 60 tablets                                  |
| Zyban  | One 12-week treatment per lifetime          |

If a drug interaction problem is detected, clinical review will be required for your protection.

*Please note that our members' benefits require them to take an FDA approved generic substitute if available or be responsible for the cost difference between the generic and the brand drug.*

*If the physician writes for a non-formulary drug on the Tier 2 benefits, the member will pay their standard group copay plus an additional \$15.00. If the physician writes for a non-formulary drug on the Tier 3 Benefit, the member will pay his or her group's Tier 3 copay amount.*

**NOTE:** Blue Cross of Northeastern Pennsylvania and First Priority Health will continue to make changes in the review process to protect our members from higher premiums and medication problems. The end result is safer, better, and more affordable healthcare. If you have any questions regarding your benefits, please call the number listed on your card.