

**'Beneficiary Advisory Panel Handout
Uniform Formulary Decisions
30 July 2009**

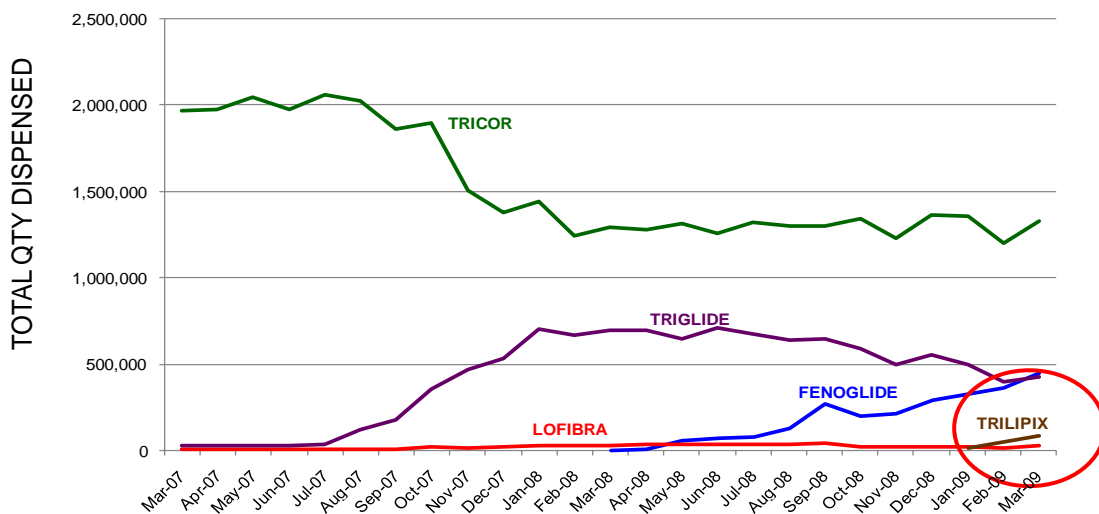
PURPOSE: The purpose of this handout is to provide BAP Committee members with a reference document for the relative clinical effectiveness presentations for each Uniform Formulary (UF) Class review.

Table 1: Fenofibrate acid (Trilipix): Uniform Formulary Recommendations from May 2009 for the Antilipidemic-II (LIP-2) Drugs

Antilipidemic II (LIP-2s)			
UF Status / Implementation Period	Generic Name (Brand)	Formulations	Generics Available?
Formulary	Fibric Acid Derivatives		
	Fenofibrate melt-dose (Fenoglide) – recommended for UF June 2008	Tab	No
	Fenofibrate IDD-P (micronized) (Triglide)	tab	No
	Fenofibrate micronized/nonmicronized (Lofibra)	tab/cap	Yes
	Gemfibrozil (Lopid)	tab	Yes
	Bile Acid Sequestrants (BAS)		
	Cholestyramine / aspartame (Questran Light, Prevalite)	powder	Yes
	Cholestyramine / sucrose (Questran)	powder	Yes
	Colestipol (Colestid)	tab	Yes
Non-Formulary	Fibric Acid Derivatives		
	Fenofibrate acid (Trilipix)	caps	No
	Fenofibrate nanocrystallized (Tricor)	tab	No
	Fenofibrate micronized (Antara)	cap	No
	Omega-3 fatty acids		
	Prescription omega-3 fatty acids (Omacor)	cap	No
	Bile Acid Sequestrants (BAS)		
	Colesevelam (Welchol)	tab	No
Recommended implementation period	60 days for Tilipix		

Figure 1

**Lip – 2 Utilization - All POS
Mar 07 – Mar 09**



SOURCE: PDTS

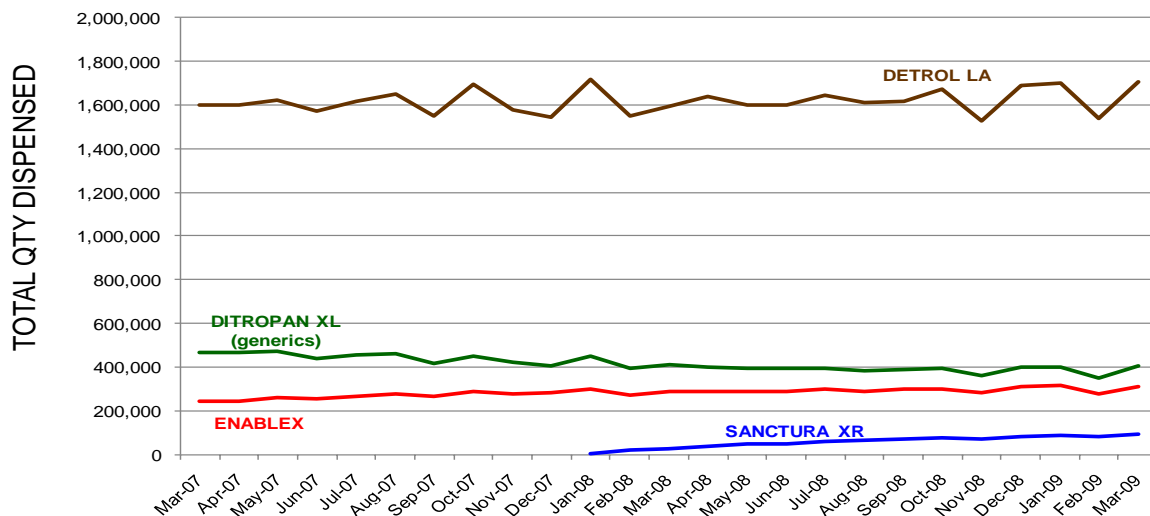
Table 2: Fesoterodine extended release (Toviaz): Uniform Formulary Recommendations from May 2009 for the Overactive Bladder (OAB) Drugs

Overactive Bladder Drugs			
UF Status / Implementation Period	Generic Name (Brand)	Formulations	Generics Available?
Formulary	Darifenacin (Enablex)	tabs	No
	Oxybutynin IR (Ditropan)	tabs, syrup	Yes
	Oxybutynin ER (Ditropan XL)	tabs	Yes
	Oxybutynin transdermal (Oxytrol)	patch	No
	Solifenacin (Vesicare)	tabs	No
	Tolterodine ER (Detrol LA)	caps	No
	Trospium ER (Sanctura XR)	caps	No
Non-Formulary	Fesoterodine ER (Toviaz)	Tabs	No
	Tolterodine IR (Detrol)	tabs	No
	Sanctura IR (Trospium IR)	tabs	No
Recommended implementation period	60 days for Toviaz		

ER: extended release
IR: immediate release

Figure 2:

OAB Utilization - All POS Mar 07 – Mar 09



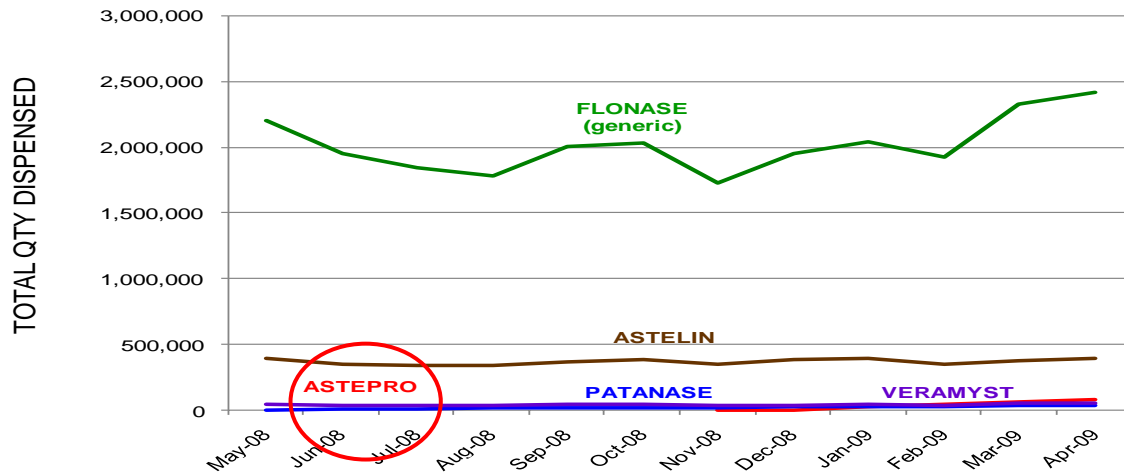
SOURCE: PDTS

Table 3: Azelastine with sucralose (Astepro): Uniform Formulary Recommendations from May 2009 for the Nasal Allergy Drugs

Nasal Allergy Drugs			
UF Status / Implementation Period	Generic Name (Brand)	Formulations	Generics Available?
Formulary	Nasal Antihistamines		
	Azelastine (Astelin)	nasal spray	No
	Nasal Corticosteroids		
	Flunisolide (Nasarel, generics)	nasal inhaler	Yes
	Fluticasone propionate (Flonase, generics)	nasal inhaler	Yes
	Mometasone (Nasonex)	nasal inhaler	No
	Ipratropium (Atrovent)	nasal inhaler	Yes
Non-Formulary	Nasal Antihistamines		
	Azelastine with Sucralose (Astepro)	nasal inhaler	No
	Nasal Corticosteroids		
	Beclomethasone (Beconase AQ)	nasal inhaler	No
	Budesonide (Rhinocort Aqua)	nasal inhaler	No
	Ciclesonide (Omnaris)	nasal inhaler	No
	Fluticasone furoate (Veramyst)	nasal inhaler	No
	Triamcinolone (Nasacort AQ)	nasal inhaler	No
Olopatadine (Patanase)	nasal inhaler	No	
Recommended implementation period	60 days for Astepro		

Figure 3:

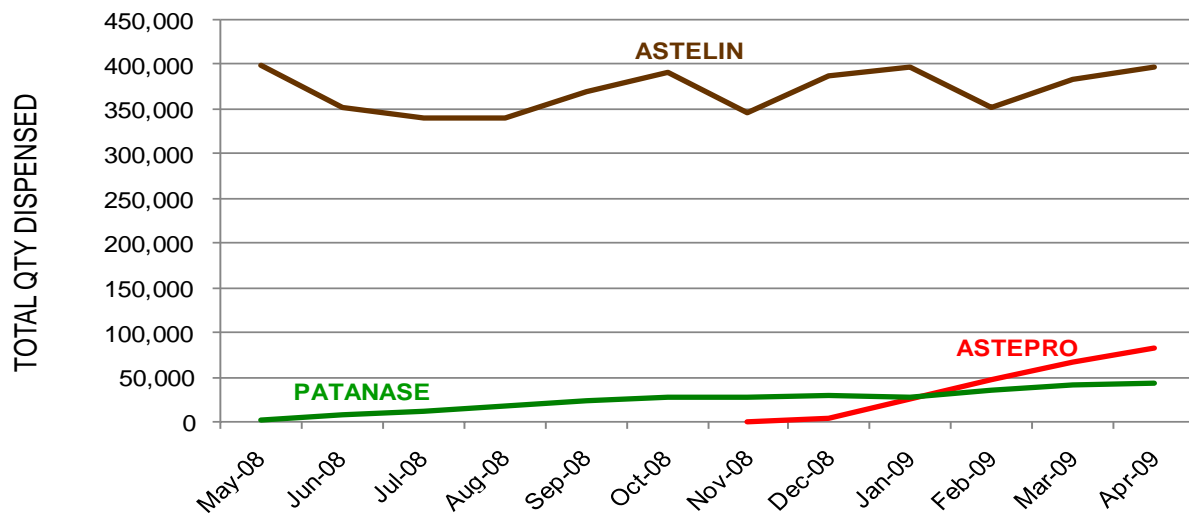
Nasal Allergy Drugs Utilization - All POS May 08 – Apr 09



SOURCE: PDTS

Figure 4:

Nasal Antihistamines Utilization - All POS May 08 – Apr 09



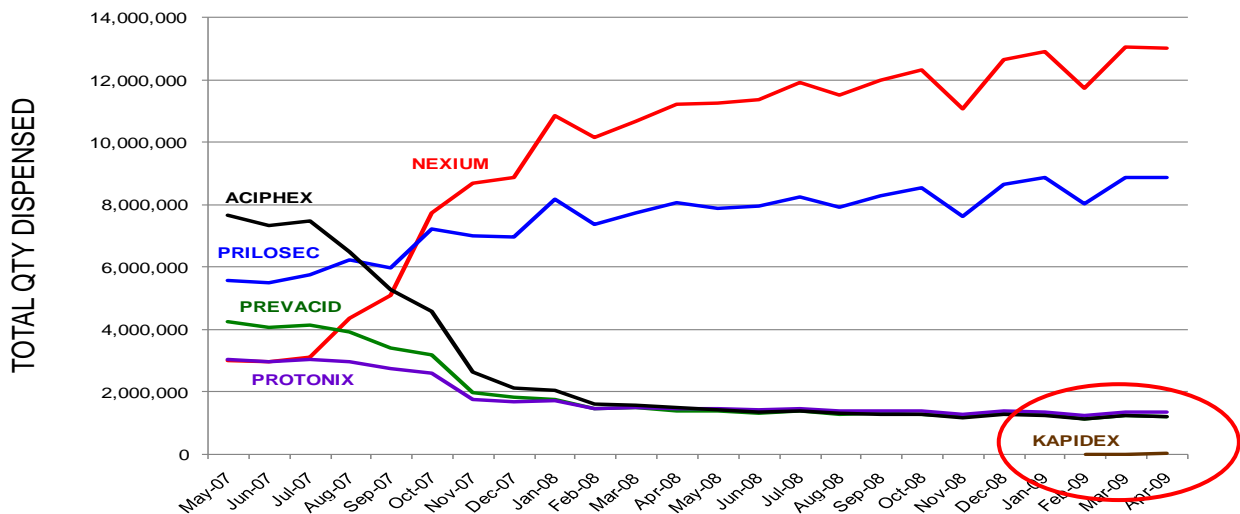
SOURCE: PDTS

Table 4: Dexlansoprazole delayed release capsules (Kapidex): Uniform Formulary Recommendations from May 2009 for the Proton Pump Inhibitors

Proton Pump Inhibitors (PPIs)			
UF Status / Implementation Period	Generic Name (Brand)	Formulations	Generics Available?
Formulary	Omeprazole (Prilosec)	cap	Yes
	Esomeprazole (Nexium)	cap	No
Non-Formulary	Dexlansoprazole (Kapidex)	delayed release cap	No
	Lansoprazole (Prevacid)	cap	No
	Omeprazole/sodium bicarbonate (Zegerid)	cap	No
	Pantoprazole (Protonix)	tab	No
	Rabeprazole (Aciphex)	tab	No
Recommended implementation period	60 days for Kapidex		

Figure 5:

**PPI Utilization - All POS
Mar 07 – Apr 09**



SOURCE: PDTS

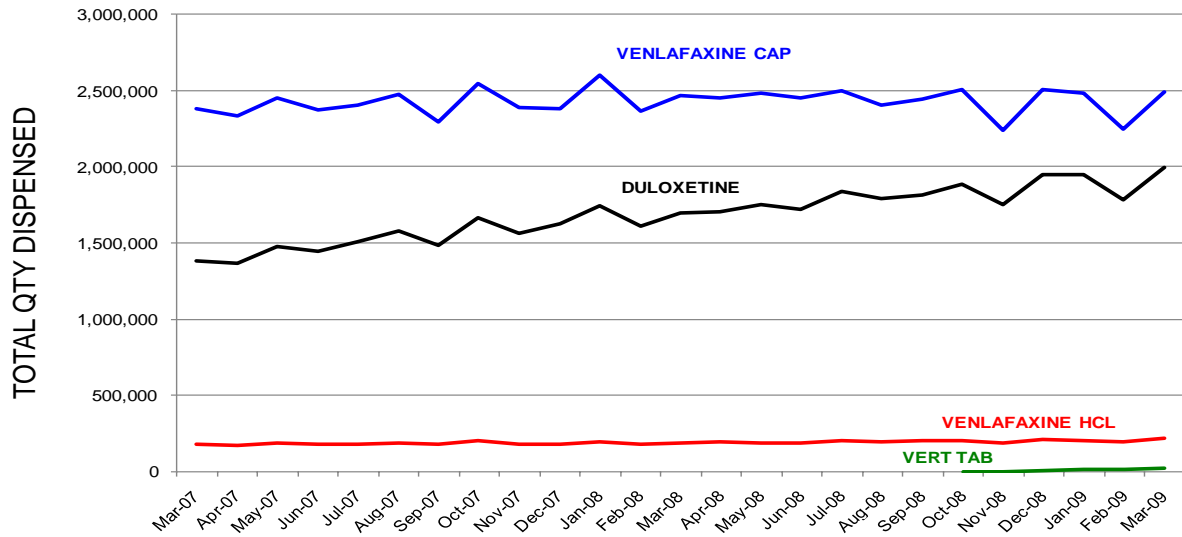
Table 5: Venlafaxine extended release (no brand name): Uniform Formulary Recommendations from May 2009 for the Anti-depressant 1 (AD-1) Drugs

UF Status / Implementation Period	Generic Name (Brand)	Formulations	Generics Available?
Antidepressant 1 (AD-1s)			
Formulary	Serotonin-Norepinephrine Reuptake Inhibitors (SNRIs)		
	Venlafaxine ER (no brand name)	Tabs	N/A
	Venlafaxine IR (Effexor)	tabs	Yes
	Venlafaxine ER (Effexor XR)	caps	No
	Selective Reuptake Inhibitors (SSRI)		
	Fluoxetine (excludes Prozac Weekly, Sarafem)	caps, syrup	Yes
	Citalopram	tabs	Yes
	Paroxetine HCl IR	tabs	Yes
	Paroxetine mesylate (Pexeva)	tabs	No
	Sertraline (Zoloft)	tabs	Yes
	Fluvoxamine (Luvox brand discontinued)	tabs	Yes
	Serotonin-Antagonist/Reuptake Inhibitors (SARIs)		
	Nefazodone	tabs	Yes
	Trazodone	tabs	Yes
	Norepinephrine and Dopamine Reuptake Inhibitors (NDRIs)		
	Bupropion immediate release (Wellbutrin)	tabs	Yes
	Bupropion sustained release (Wellbutrin SR)	tabs	Yes
	Alpa-2 Receptor Antagonists		
	Mirtazapine (Remeron)	Tabs,	Yes
	Non-Formulary	Serotonin-Norepinephrine Reuptake Inhibitors (SNRIs)	
Desvenlafaxine (Pristiq) - recommended for NF August 2008		tab	No
Duloxetine (Cymbalta)		caps	No
Norepinephrine and Dopamine Reuptake Inhibitors (NDRIs)			
Bupropion ER (Wellbutrin XL)		tabs	
Selective Reuptake Inhibitors (SSRI)			
Fluoxetine weekly (Prozac Weekly)		caps	No
Fluoxetine in special packaging for premenstrual dysphoric disorder (Sarafem)		caps, tabs	Yes
Escitalopram (Lexapro)		tabs	No
Paroxetine ER (Paxil CR)	Tabs	Nt	
Recommended implementation period	Not Applicable for Venlafaxine ER Tabs		

ER: extended release
IR: immediate release

Figure 6:

Antidepressant-1 Utilization - All POS Mar 07 – Mar 09



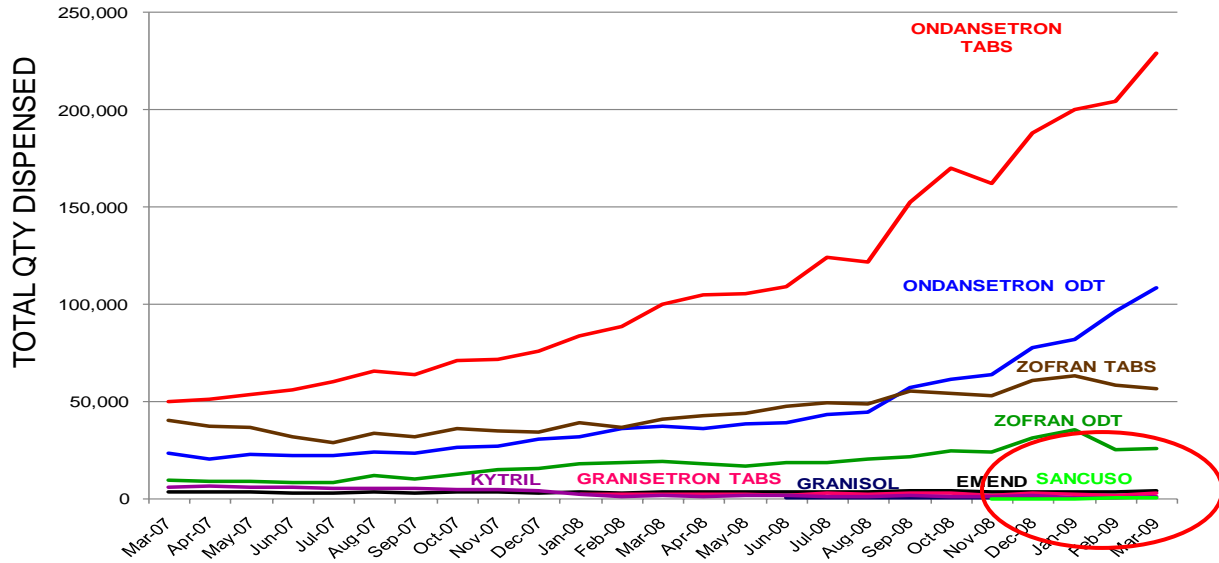
SOURCE: PDTS

Table 6: Granisetron Transdermal System (Sancuso): Uniform Formulary Recommendations from May 2009 for the Antiemetics

Nasal Allergy Drugs			
UF Status / Implementation Period	Generic Name (Brand)	Formulations	Generics Available?
Formulary	Newer Antiemetics		
	Granisetron (Kytril)	Tabs, oral solution	Yes
	Ondansetron (Zofran)	Tabs, oral solution, orally dissolving tabs	Yes
	Aprepitant (Emend)	Caps	No
	Older Antiemetics		
	Dronabinol (Marinol)	Caps	No
	Nabilone (Cesamet)	Caps	No
	Meclizine (Antivert)	Tabs, chewable tabs	Yes
	Promethazine (Phenergan)	Tabs, suppositories, syrup	Yes
	Prochlorperazine (Compazine)	Tabs, ER tabs, concentrated oral solution, oral solution, suppositories	Yes
	Thiethylperazine (Torecan)	Tabs	No
	Transdermal scopolamine (Transderm Scop)	Patch	Yes
	Trimethobenzamide (Tigan)	Tabs, suppositories	Yes
Non-Formulary	Newer Antiemetics		
	Granisetron transdermal system (Sancuso)	Patch	No
	Dolasetron (Anzemet)	Tabs	No
	Older Antiemetics		
Not applicable (no NF older antiemetics)			
Recommended implementation period	60 days for Sancuso		

Figure 7:

Antiemetic Utilization - All POS Mar 07 – Mar 09



SOURCE: PDTS

Table 8: Uniform Formulary Implementation Plan Summary – 2006 to present

Meeting	Drug Class	Non-Formulary Medications	Total Beneficiaries Affected (# of patients affected)	Beneficiaries Affected by POS			Implementation Plan First Wednesday X days after the decision date	Justification	Step Therapy
				MTF	Retail	Mail Order			
May 09	Antilipidemic II Agents (LIP-2s)	<ul style="list-style-type: none"> Fenofibrate acid (Trilipix) 	4,037	4	3,128	885	60 days	New drug in already reviewed class; low utilization	
May 07		<i>Update May 07; 1st review May 07</i> <ul style="list-style-type: none"> fenofibrate nanocrystallized (Tricor) fenofibrate micronized (Antara) omega-3 fatty acids (Omacor) colesevelam (Welchol) 	See previous meeting below						No
May 09	Overactive Bladder Drugs	<ul style="list-style-type: none"> Fesoterodine ER (Toviaz) 	102	1	86	15	60 days	New drug in already reviewed class; low utilization	No
Aug 08		<i>Update Aug 08; 1st review Feb 06</i> <ul style="list-style-type: none"> Tolterodine IR (Detrol) Trospium IR (Sanctura) 	See previous meeting below						No
May 09	Nasal Allergy Drugs	<ul style="list-style-type: none"> Azelastine with Sucralose (Astepro) 	5,269	4	5,037	428	60 days	New drug in already reviewed class; low utilization	No
		<i>Original Meeting Nov 08</i> <ul style="list-style-type: none"> Beclomethasone (Beconase AQ) Budesonide (Rhinocort AQ) Ciclesonide (Omnaris) Fluticasone Furoate (Veramyst) Triamcinolone (Nasacort AQ) Olopatadine (Patanase) 	34,271	440	27,017	6,814	60 (8 Apr 09)	Nasal corticosteroids reviewed Nov 05, no changes to UF other than Patanase and Omnaris made non-formulary (1,794 users)	No

Meeting	Drug Class	Non-Formulary Medications	Total Beneficiaries Affected (# of patients affected)	Beneficiaries Affected by POS			Implementation Plan First Wednesday X days after the decision date	Justification	Step Therapy
				MTF	Retail	Mail Order			
May 09	PPIs	<ul style="list-style-type: none"> Dexlansoprazole delayed release tabs (Kapidex) 	1,015	0	872	143	60 days	New drug in already reviewed class; low utilization	Yes
		<i>May 07 Update; Feb 05 1st review</i> <ul style="list-style-type: none"> lansoprazole (Prevacid) omeprazole/sodium bicarbonate (Zegerid) pantoprazole (Protonix) rabeprazole (Aciphex) 	See previous meeting below						Yes
May 09	Antiemetics	<ul style="list-style-type: none"> Granisetron transdermal system (Sancuso) 	115	3	109	3	60 days	Small number of beneficiaries affected, and acute nature of treatment (e.g., chemotherapy)	No
		<i>Original Meeting May 06</i> <ul style="list-style-type: none"> Dolasetron (Anzemet) 	852	14	668	170	27 Sept 06 (60 days)	Small number of beneficiaries affected, and acute nature of treatment (e.g., chemotherapy)	No
Feb 09	Inhaled Corticosteroids	<ul style="list-style-type: none"> Beclomethasone HFA MDI (Qvar) Budesonide DPI (Pulmicort Flexhaler) Ciclesonide HFA MDI (Alvesco) Flunisolide CFC MDI (Aerobid) Flunisolide CFC MDI with Menthol (Aerobid M) Triamcinolone CFC MDI (Azmacort) 	13,489	3,556	7,831	2,102	120 (1 Sep 09)	Lag time to allow implementation of drug classes from Aug 08 and Nov 08	No
Feb 09	Long-Acting Beta Agonists	<ul style="list-style-type: none"> Formoterol inhalation solution (Perforomist) 	109	2	44	63	120 (1 Sep 09)	Lag time to allow implementation of drug classes from Aug 08 and Nov 08	No

Meeting	Drug Class	Non-Formulary Medications	Total Beneficiaries Affected (# of patients affected)	Beneficiaries Affected by POS			Implementation Plan First Wednesday X days after the decision date	Justification	Step Therapy
				MTF	Retail	Mail Order			
Feb 09	Inhaled Corticosteroids / Long-Acting Beta Agonist Combinations	<ul style="list-style-type: none"> (no drugs made non-formulary) 	N/A	N/A	N/A	N/A	N/A	N/A	N/A
Nov 08	Inhaled Short Acting Beta Agonist	<ul style="list-style-type: none"> Metaproterenol inhaled solution Pirbuterol CFC MDI (Maxair) 	1,278	44	1,002	232	60 (8 Apr 09)	Small number of beneficiaries affected	No
Nov 08	Nasal Allergy Drugs	<ul style="list-style-type: none"> Beclomethasone (Beconase AQ) Budesonide (Rhinocort AQ) Ciclesonide (Omnaris) Fluticasone Furoate (Veramyst) Triamcinolone (Nasacort AQ) Olopatadine (Patanase) 	34,271	440	27,017	6,814	60 (8 Apr 09)	Nasal corticosteroids reviewed Nov 05, no changes to UF other than Patanase and Omnaris made non-formulary (1,794 users)	No
Aug 08	Self-Monitoring Blood Glucose System Test Strips	<ul style="list-style-type: none"> One Touch (for One Touch Ultra 2, Ultra Mini, and Ultra Smart meters) TrueTrack strips (for TrueTrack meter) Accu-chek Comfort Curve strips (for Accu-chek Advantage meter) Accu-chek Compact Plus drum (for Accu-check Compact Plus meter) Accu-chek Simplicity, Ascensia Autodisk, Ascensia Breeze 2, Ascensia Elite, Assure, Assure 3, Assure II, Assure Pro, Bd Test Strips, Chemstrip Bg, Control AST, Dextrostix Reagent, Easygluco, Easypro, Fast Take, Freestyle test strips (other than Freestyle Lite), Glucofilm, Glucolab, Glucometer Dex, Glucometer Elite, Glucose Test Strip, Glucostix, Optium, 	58,142	12,271	33,658	12,231	120	Allow time for patients to receive new meters	No

Meeting	Drug Class	Non-Formulary Medications	Total Beneficiaries Affected (# of patients affected)	Beneficiaries Affected by POS			Implementation Plan First Wednesday X days after the decision date	Justification	Step Therapy
				MTF	Retail	Mail Order			
		Precision Pcx, Precision Pcx Plus, Precision Q-I-D, Precision Sof-Tact, Prestige Smart System, Prodigy, Quicktek, Sidekick, Sof-Tact, Surestep, Surestep Pro, Test Strip, Relion Ultima, Uni-Check <ul style="list-style-type: none"> Plus all other store/private label brand strips not included on Uniform Formulary (see the BCF/ECF column) 							
Aug 08	Overactive Bladder Drugs	<ul style="list-style-type: none"> Tolterodine IR (Detrol) Trospium IR (Sanctura) 	4,215	235	1,210	2,770	90	Typical 90-day implementation period	No
Aug 08	Antidepressant – 1s	<ul style="list-style-type: none"> Desvenlafaxine (Pristiq) 	745	0	694	51	60	New drug in already reviewed class; low utilization	No
		<i>Original Meeting Nov 05</i> <ul style="list-style-type: none"> paroxetine HCl CR (Paxil) fluoxetine 90 mg for weekly administration (Prozac Weekly) fluoxetine in special packaging for PMDD (Sarafem) escitalopram (Lexapro) duloxetine (Cymbalta) bupropion extended release (Wellbutrin XL) 	See previous meetings below in table			See previous meetings below in table	See previous meetings below in table	No	
Aug 08	Calcium Channel Blockers	<ul style="list-style-type: none"> Nisoldipine geomatrix (Sular geomatrix) 	2,027	56	1,188	783	60	New drug in already reviewed class; low utilization	No

Meeting	Drug Class	Non-Formulary Medications	Total Beneficiaries Affected (# of patients affected)	Beneficiaries Affected by POS			Implementation Plan First Wednesday X days after the decision date	Justification	Step Therapy
				MTF	Retail	Mail Order			
		<i>Original Meeting Aug 05</i> <ul style="list-style-type: none"> ▪ amlodipine (Norvasc) <ul style="list-style-type: none"> ○ Nov 07: removed from NF status ▪ isradipine IR (Dynacirc) ▪ isradipine ER (Dynacirc CR) ▪ nicardipine IR (Cardene, generics) ▪ nicardipine SR (Cardene SR) ▪ verapamil ER (Verelan) ▪ verapamil ER for bedtime dosing (Verelan PM, Covera HS) ▪ diltiazem ER for bedtime dosing (Cardizem LA) 	See previous meetings below in table				See previous meetings below in table	See previous meetings below in table	No
Jun 08	Triptans	<ul style="list-style-type: none"> ▪ Almotriptan (Axert) ▪ Frovatriptan (Frova) ▪ Naratriptan (Amerge) 	3,763	208	3,212	343	(26 Nov 2008) 90 days	Typical 90-day implementation period	No
Jun 08	Osteoporosis Agents	<ul style="list-style-type: none"> ▪ Salmon-calcitonin (Miacalcin) 	2,914	945	1,948	1,021	(26 Nov 2008) 90 days	Typical 90-day implementation period	No
Jun 08	Newer Antihistamines (NAs) (new drug in previously reviewed class); Original decision Aug 07	<ul style="list-style-type: none"> ▪ Levocetirizine (Xyzal) 	19,254	0	19,254	0	(29 Oct 2008) 60 days	New drug in already reviewed class	No
		<i>Original Meeting Aug 07</i> <ul style="list-style-type: none"> ▪ desloratadine (Clarinet) ▪ desloratadine/pseudoephed. (Clarinet D) 	27,396	60	20,102	7,234	See previous meetings below in table	Typical 90-day implementation period	No
Jun 08	Leukotriene Modifiers (LMs (new drug in previously reviewed class);	<ul style="list-style-type: none"> ▪ Zileuton extended release (Zyflo CR) 	288	0	288	0	(29 Oct 2008) 60 days	New drug in already reviewed class; low utilization	No

Meeting	Drug Class	Non-Formulary Medications	Total Beneficiaries Affected (# of patients affected)	Beneficiaries Affected by POS			Implementation Plan First Wednesday X days after the decision date	Justification	Step Therapy
				MTF	Retail	Mail Order			
	Original decision Aug 07	<i>Original Meeting Aug 07</i> ▪ zileuton (Zyflo)	144	4	110	31	See previous meetings below in table	Typical 90-day implementation period	No
Jun 08	Beta Adrenergic Receptor Blockers (ABAs) (new drug in previously reviewed class); Original decision Nov 07	▪ Nebivolol (Bystolic)	2,462	0	2,462	0	(29 Oct 2008) 60 days	New drug in already reviewed class; low utilization	No
		<i>Original Meeting Nov 07</i> (No drugs designated non formulary)	0	0	0	0	See previous meetings below in table	No meds moved to non-formulary status	No
Jun 08	Renin Antihypertensive Agents (RAAs) (new drug in previously reviewed class);	<i>ARB/CCB combos (Jun 08)</i> ▪ Olmesartan / amlodipine (Azor)	2,641	0	2,641	0	(29 Oct 2008) 60 days	New drug in already reviewed class with current low utilization	No
		<i>ARB/CCB combos (Nov 07)</i> ▪ valsartan / amlodipine (Exforge)	2,376	0	2,376	0	(16 Apr 2008) 60 days	New drug in already reviewed class with current low utilization	No
		<i>ARBs – (May 07 meeting)</i> ▪ eprosartan (Teveten) ▪ eprosartan HCTZ (Teveten HCT) ▪ irbesartan (Avapro) ▪ irbesartan HCTZ (Avalide) ▪ olmesartan (Benicar) ▪ olmesartan HCTZ (Benicar HCT) ▪ valsartan (Diovan) ▪ valsartan HCTZ (Diovan HCT) <i>ACE/CCB combos – Feb 06 meeting</i> ▪ felodipine/enalapril (Lexxel) ▪ verapamil/trandolapril (Tarka) <i>ACE Inhibitors (Aug 05 meeting)</i> ▪ moexipril (Univasc), ▪ moexipril / HCTZ (Uniretic) ▪ perindopril (Aceon) ▪ quinapril (Accupril) ▪ quinapril / HCTZ (Accuretic)	See previous meetings for affected beneficiaries for each subclass				See previous meetings below in table	See previous meetings below in table	

Meeting	Drug Class	Non-Formulary Medications	Total Beneficiaries Affected (# of patients affected)	Beneficiaries Affected by POS			Implementation Plan First Wednesday X days after the decision date	Justification	Step Therapy
				MTF	Retail	Mail Order			
		<ul style="list-style-type: none"> ramipril (Altace) 							
Nov 07	Benign Prostatic Hypertension (BPH) Alpha Blockers (ABs)	<ul style="list-style-type: none"> tamsulosin (Flomax) 	64,783	1,426	40,161	23,196	(16 Apr 2008) 60-days	3 rd class for Step Therapy	Yes
Nov 07	Targeted Immunomodulatory Biologics (TIBs)	<ul style="list-style-type: none"> etanercept (Enbrel) anakinra (Kineret) 	7,397	1,939	4,149	1,309	(18 Jun 2008) 90-days	Typical 90-day implementation period	No
Nov 07	Attention Deficit Hyperactivity Disorder (ADHD) / Narcolepsy agents (new drug in previously reviewed class); Previous decision Nov 06	<ul style="list-style-type: none"> lisdexamfetamine (Vyvanse) 	2,200 Rxs	0	2,200 Rxs	0	(16 Apr 2008) 60 days	New drug in already reviewed class with current low utilization	No
		<i>Original decision Nov 06</i> <ul style="list-style-type: none"> Dexmethylphenidate IR (Focalin) Dexmethylphenidate SODAS (Focalin XR) Methylphenidate transdermal patch (Daytrana) 	3,078 (1.7% of patients receiving an ADHD drug)	62	2,965	51	18 Apr 07 (90 days)	Small number of beneficiaries affected	
Nov 07	Contraceptive Agents (new drug in previously reviewed class); Previous decisions May 06, Nov 06	<ul style="list-style-type: none"> EE 20 mcg / levonorgestrel 0.09 mg (Lybrel) 	290 Rxs	2 Rxs	263 Rxs	25 Rxs	(16 Apr 2008) 60 days	New drug in already reviewed class with current low utilization	No

Meeting	Drug Class	Non-Formulary Medications	Total Beneficiaries Affected (# of patients affected)	Beneficiaries Affected by POS			Implementation Plan First Wednesday X days after the decision date	Justification	Step Therapy
				MTF	Retail	Mail Order			
		<p><i>Previous meetings May 06 & Nov 06</i></p> <ul style="list-style-type: none"> EE 30 mcg / levonorgestrel 0.15 mg in special packaging for extended use (Seasonale) EE 25 mcg / norethindrone 0.4 mg (Ovcon 35) EE 50 mcg / norethindrone 1 mg (Ovcon 50) EE 20/30/35 mcg / norethindrone 1 mg (Estrostep Fe) EE 20 mcg/1 mg norethindrone- 24 day regimen (Loestrin 24 Fe) EE 30/10 mcg/ 0.15 mg levonorgestrel for extended use (Seasonique) 	23,221 (4% of patients receiving a contraceptive)	3,128	19,249	844	24 Jan 07 (180 days)	Seasonale, packaged as a 3-month supply; Loestrin 24 FE and Seasonique to coincide with Seasonale decision	
		Seasonique: 161 (from Apr 06-Oct 06)	0 Rxs	112 Rxs	4 Rxs				
		Loestrin 24 Fe: 2,227 (from Apr 06-Oct 06)	22 Rxs	3,417 Rxs	64 Rxs				
Aug 07	Nasal Corticosteroid Agents (new drug in previously reviewed class); Original decision Nov 05	<ul style="list-style-type: none"> fluticasone furoate (Veramyst) 	650	0	650	0	TMOP & TRRx: 60-days for current users; \$22 co-pay in effect immediately for new users MTF: No later than 60 days	New drug in already reviewed class with current low utilization	No
		<p><i>Original Decision: Nov 05</i></p> <ul style="list-style-type: none"> beclomethasone dipropionate (Beconase AQ, Vancenase AQ) budesonide (Rhinocort Aqua) triamcinolone (Nasacort AQ) 					19 Jan 06 (90 days)	Substantial number of beneficiaries	
Aug 07	Growth Stimulating Agents (GSAs)	<ul style="list-style-type: none"> somatropin (Genotropin, Genotropin Miniquick) somatropin (Humatrope) somatropin (Omnitrope) somatropin (Saizen) 	653	77	310	266	TMOP & TRRx: 60-days for current users; MTF: No later than 60 days	Low number of affected beneficiaries affected	No

Meeting	Drug Class	Non-Formulary Medications	Total Beneficiaries Affected (# of patients affected)	Beneficiaries Affected by POS			Implementation Plan First Wednesday X days after the decision date	Justification	Step Therapy
				MTF	Retail	Mail Order			
May 07	Antilipidemic II Agents (LIP-2s)	<ul style="list-style-type: none"> ▪ fenofibrate nanocrystallized (Tricor) ▪ fenofibrate micronized (Antara) ▪ omega-3 fatty acids (Omacor) ▪ colessevelam (Welchol) 	83,612	18,849	44,402	20,361	24 Oct 07 (90 days)	Typical 90-day implementation period	No
May 07	5-Alpha Reductase Inhibitors (5-ARIs)	<ul style="list-style-type: none"> ▪ dutasteride (Avodart) 	20,917	1,087	12,830	7,000	24 Oct 07 (90 days)	Typical 90-day implementation period	No
May 07 (Update from Feb 05)	PPIs	<ul style="list-style-type: none"> ▪ lansoprazole (Prevacid) ▪ omeprazole/sodium bicarbonate (Zegerid) ▪ pantoprazole (Protonix) ▪ rabeprazole (Aciphex) 	453,525	212,130	178,120	63,275	24 Oct 07 (90 days)	Typical 90-day implementation period	Yes
May 07 (Update from Feb 05)	ARBs	<ul style="list-style-type: none"> ▪ eprosartan (Teveten) ▪ eprosartan HCTZ (Teveten HCT) ▪ irbesartan (Avapro) ▪ irbesartan HCTZ (Avalide) ▪ olmesartan (Benicar) ▪ olmesartan HCTZ (Benicar HCT) ▪ valsartan (Diovan) ▪ valsartan HCTZ (Diovan HCT) 	228,581	68,059	109,595	50,930	21 Nov 07 (120 days)	Reservations regarding ESI ability to handle implementation	No

BCF = Basic Core Formulary; ECF = Extended Core Formulary; ESI = Express-Scripts, Inc; MN = Medical Necessity; TMOP = TRICARE Mail Order Pharmacy; TRRx = TRICARE Retail Pharmacy program; UF = Uniform Formulary

CR = controlled release; ER = extended release; IR = immediate release; LA = long-acting; SR = sustained release; XL = extended release

5-ARI = 5-Alpha Reductase Inhibitors; ADHD = Attention Deficit Hyperactivity Disorder; ACE Inhibitors = Angiotensin Converting Enzyme Inhibitors; ARBs = Angiotensin Receptor Blockers; BPH = Benign Prostatic Hypertrophy; CCBs = Calcium Channel Blockers; EE = ethinyl estradiol; GSAs = Growth Stimulating Agents; GI = gastrointestinal; GABA = gamma-aminobutyric acid; H2 = Histamine-2 receptor; HCTZ = hydrochlorothiazide; Leukotriene Modifiers = LMs; LIP-1s = Antilipidemic I; LIP-2s = Antilipidemic II; MAOI = Monoamine Oxidase Inhibitor; MS-DMDs = Multiple Sclerosis Disease-Modifying Drugs; NAs = Newer Antihistamines; OABs = Overactive Bladder Medications;

PDE-5 Inhibitors = Phosphodiesterase-5 inhibitors; PMDD = Premenstrual Dysmorphic Disorder; PPIs = Proton Pump Inhibitors; RAAs = Renin Antihypertensive Agents; SODAS = spheroidal oral drug absorption system; TZDs = thiazolidinediones

*The topical antifungal drug class excludes vaginal products and products for onychomycosis (e.g., ciclopirox topical solution [Penlac])