



This list is a sample of commonly prescribed generic and formulary brand drugs. Refer to the Blue Cross and Blue Shield of Illinois Prescription Drug Formulary at [www.bcsil.com](http://www.bcsil.com) for a more comprehensive and up-to-date list. The online formulary is updated after new generic drugs become available and also on a regular basis. The formulary list may contain medications not covered under your prescription drug benefit plan. In addition, prescription versions of over-the-counter (OTC) medications may not be covered based on your prescription drug benefit plan. If you have questions about your prescription drug benefit, call the Pharmacy Program number on the back of your ID card.

**CARDIOVASCULAR****ACE Inhibitors/Combinations**

amlodipine/benazepril  
captopril  
captopril/hydrochlorothiazide  
enalapril  
enalapril/hydrochlorothiazide  
lisinopril  
lisinopril/hydrochlorothiazide  
quinapril  
quinapril/hydrochlorothiazide  
ramipril

**Angiotensin II Receptor Blockers**

BENICAR/BENICAR HCT  
DIOVAN/DIOVAN HCT

**Beta-Blockers**

atenolol  
carvedilol  
metoprolol/metoprolol ER  
propranolol  
INNOPRAN XL

**Calcium Channel Blockers**

amlodipine  
diltiazem/XR/SR  
nifedipine/ER  
verapamil/SR/ER

**Cholesterol Lowering Drugs**

cholestyramine  
colestipol pkt  
gemfibrozil  
lovastatin  
pravastatin  
simvastatin  
CRESTOR  
NIASPAN  
TRICOR  
VYTORIN  
WELCHOL  
ZETIA

**DEPRESSION****SSRIs**

citalopram  
fluoxetine  
paroxetine  
sertraline  
LEXAPRO

**Other Antidepressants**

amitriptyline  
bupropion/SR  
bupropion ext-release 24hr  
mirtazapine/ODT  
nefazodone  
trazodone  
venlafaxine  
EFFEXOR XR  
WELLBUTRIN XL 150MG

**DIABETES**

metformin/XR  
metformin/glyburide  
**Sulfonylureas**  
glimepiride  
glipizide/XL  
glyburide/glyburide micronized  
ACTOS  
AVANDIA/AVANDAMET  
DUETACT

**DIABETES, cont'd**

PRANDIN  
PRECOSE  
**Insulin Products**  
HUMALOG/HUMALIN  
LANTUS  
NOVOLIN/NOVOLOG  
**Monitoring Kits/Strips & Syringes**  
ACCU-CHEK STRIPS & KITS  
BD SYRINGES/LANCETS  
CHEMSTRIP BG STRIPS & KITS  
FREESTYLE STRIPS & KITS  
PRECISION STRIPS & KITS

**GASTROINTESTINAL****H<sub>2</sub> Receptor Antagonists**

cimetidine  
famotidine  
ranitidine

**Proton Pump Inhibitors**

omeprazole  
NEXIUM  
PROTONIX

**ANTI-INFECTIVE AGENTS**

amoxicillin  
amoxicillin/clavulanate  
ampicillin  
azithromycin tabs/susp  
cefaclor  
cefadroxil  
cefdinir  
cefprozil  
cefuroxime  
cephalexin  
ciprofloxacin  
doxycycline  
EES/sulfisoxazole  
erythromycin  
penicillin VK  
tetracycline  
tmp-smz DS  
ERY-TAB  
GRIFULVIN V  
LEVAQUIN

**Antifungals/Onychomycosis**

terbinafine  
**Antiviral/Herpes**  
acyclovir  
VALTREX

**LOW MOLECULAR WEIGHT**

**HEPARIN**  
LOVENOX

**MIGRAINE****Triptans**

IMITREX  
MAXALT/MAXALT-MLT  
ZOMIG/ZOMIG-ZMT

**OPHTHALMIC****Antibacterial**

ofloxacin ophth soln  
polymyxin B/trimethoprim  
tobramycin  
VIGAMOX

**OPHTHALMIC, cont'd****Glaucoma**

brimonidine 0.2%  
timolol maleate soln  
ALPHAGAN P  
AZOPT  
BETOPTIC-S  
TRAVATAN/TRAVATAN Z  
TRUSOPT  
XALATAN  
**Other Eye Products**  
ACULAR/ACULAR LS  
OPTIVAR  
PATANOL  
TOBRADEX  
VOLTAREN  
ZYLET

**PAIN/ARTHRITIS****Anti-inflammatory Agents**

diclofenac  
etodolac  
ibuprofen  
indomethacin  
meloxicam  
nabumetone  
naproxen  
oxaprozin  
sulindac  
CELEBREX  
ENBREL

**RESPIRATORY****Allergy Drugs**

All generically available  
antihistamine/decongestant  
combinations that require a  
prescription are on the formulary.

fexofenadine  
flunisolide  
fluticasone  
ALLEGRA-D – 12HR, 24HR  
ASTELIN  
NASACORT AQ  
NASONEX

**Asthma Drugs**

albuterol inhaler  
ADVAIR DISKUS/ADVAIR HFA  
FLOVENT HFA  
FORADIL AEROLIZER  
INTAL  
PULMICORT  
QVAR  
SEREVENT DISKUS  
SINGULAIR  
SYMBICORT  
XOPENEX HFA

**Cough and Cold**

All generically available cough/  
cold medications that require a  
prescription are on the formulary.

**Miscellaneous**

ATROVENT HFA  
COMBIVENT  
DUONEB  
SPIRIVA HANDIHALER

**SLEEP AIDS**

zaleplon  
zolpidem

**THYROID REPLACEMENT**

levothyroxine – includes LevoxyI\*

**UROLOGIC DISORDERS****Benign Prostatic Hypertrophy**

doxazosin  
terazosin

**Urinary Incontinence**

oxybutynin/ext-release  
DETROL/DETROL LA

**Others**

finasteride  
AVODART  
FLOMAX

**WOMEN'S HEALTH****Contraceptives****Monophasic**

EE/desogestrel (Apri\*)  
EE/levonorgestrel (Aviane\*,  
Levora\*)  
EE/norethindrone (Necon\*, Necon  
1/35\*, Nortrel\*, Nortrel 1/35\*)  
EE/norgestimate (Mononessa\*,  
Sprintec\*)  
EE/norgestrel (Low-Ogestrel\*)  
mestranol/norethindrone  
(Necon 1/50\*)  
YASMIN  
YAZ

**Biphasic**

EE/desogestrel (Kariva\*)  
EE/norethindrone (Necon 10/11\*)

**Triphasic**

EE/desogestrel (Velivet\*)  
EE/levonorgestrel (Trivora\*)  
EE/norethindrone (Necon 7/7/7\*,  
Nortrel 7/7/7\*)  
EE/norgestimate (Tri-Sprintec\*,  
Trinessa\*)  
ORTHO TRI-CYCLEN LO

**Progestin Only**

norethindrone (Errin\*, Jolivet\*)

**Others**

NUVARING  
ORTHO EVRA  
PLAN B

**Hormone Therapy**

estradiol  
estropipate  
medoxyprogesterone  
norethindrone  
ACTIVELLA  
CENESTIN  
ESTRADERM  
PREMARIN  
PREMPHASE  
PREMPRO  
PROMETRIUM

**Miscellaneous**

alendronate  
ACTONEL  
EVISTA  
HECTORAL

Formulary brand drugs are noted with names in UPPERCASE. Certain generic drug products are listed by their proprietary name, and are indicated with an asterisk (\*).  
EE = ethinyl estradiol  
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