

# MedStar Family Choice - Maryland HealthChoice MAIL ORDER and 90 Day Retail Pharmacy List

This list represents brand products in CAPS and generic products in lowercase *italics*. This document is subject to state-specific regulations and rules, including, but not limited to, those regarding generic substitution, controlled substance schedules, preference for brands and mandatory generics whenever applicable.

Refer to the Formulary Booklet or visit the MedStar Family Choice (MFC) website at [www.medstarfamilychoice.com](http://www.medstarfamilychoice.com) for a complete list. You are welcome to call MFC at 1-800-905-1722 to inquire about coverage for any medication, formulary or non-formulary.

## ANTI-INFECTIVES

### ANTIVIRALS

#### § HERPES AGENTS

*acyclovir caps, susp, tabs*  
*famciclovir*  
*valacyclovir*

## CARDIOVASCULAR

### § ACE INHIBITORS

*benazepril*  
*captopril*  
*enalapril*  
*fosinopril*  
*lisinopril*  
*moexipril*  
*quinapril*  
*ramipril*  
*trandolapril*

### § ACE INHIBITOR / CALCIUM CHANNEL BLOCKER COMBINATIONS

*amlodipine-benazepril*  
*trandolapril-verapamil ext-rel*

### § ACE INHIBITOR / DIURETIC COMBINATIONS

*benazepril-hydrochlorothiazide*  
*captopril-hydrochlorothiazide*  
*enalapril-hydrochlorothiazide*  
*fosinopril-hydrochlorothiazide*  
*lisinopril-hydrochlorothiazide*  
*moexipril-hydrochlorothiazide*  
*quinapril-hydrochlorothiazide*

### § ADRENOLYTICS, CENTRAL

*clonidine*  
*clonidine transdermal*  
*guanfacine*

### § ALDOSTERONE RECEPTOR ANTAGONISTS

*spironolactone*

### § ALPHA BLOCKERS

*doxazosin*  
*prazosin*  
*terazosin*

### § ANGIOTENSIN II RECEPTOR ANTAGONISTS / DIURETIC COMBINATIONS

*candesartan / candesartan-hydrochlorothiazide*  
*irbesartan / irbesartan-hydrochlorothiazide*  
*losartan / losartan-hydrochlorothiazide*  
*valsartan / valsartan-hydrochlorothiazide*

### § ANTIARRHYTHMICS

*amiodarone*  
*disopyramide*  
*dofetilide*  
*flecainide*  
*propafenone*  
*sotalol*

### ANTILIPEMICS

#### § BILE ACID RESINS

*cholestyramine*

#### § CHOLESTEROL ABSORPTION INHIBITORS

*ezetimibe*

#### § FIBRATES

*fenofibrate*  
48, 54, 160 mg  
*fenofibrate, micronized*  
67, 134, 200 mg  
*gemfibrozil*

#### § HMG-CoA REDUCTASE INHIBITORS / COMBINATIONS

*atorvastatin*  
*ezetimibe-simvastatin*  
*lovastatin pravastatin*  
*simvastatin*  
*rosuvastatin*

#### § NIACINS

*niacin OTC*  
*niacin*  
*niacin ext-rel*

### § BETA-BLOCKERS

*atenolol*  
*bisoprolol*  
*carvedilol*  
*carvedilol phosphate ext-rel*  
*labetalol*  
*metoprolol succinate ext-rel*  
*metoprolol tartrate 25 mg, 50 mg, 100 mg*  
*nadolol*  
*pindolol*  
*propranolol*  
*propranolol ext-rel*  
*timolol maleate tabs*  
HEMANGEOL AL

AL Covered for age 5 or younger

### § BETA-BLOCKER / DIURETIC COMBINATIONS

*atenolol-chlorthalidone*  
*bisoprolol-hydrochlorothiazide*

### CALCIUM CHANNEL BLOCKERS

#### § DIHYDROPYRIDINES

*amlodipine*  
*felodipine ext-rel*  
*nicardipine*  
*nifedipine*  
*nifedipine ext-rel*  
*nimodipine*

#### § NONDIHYDROPYRIDINES

*diltiazem*  
*diltiazem ext-rel*  
*verapamil*  
*verapamil ext-rel*

#### § DIGITALIS GLYCOSIDES

*digoxin*

### DIURETICS

#### § CARBONIC ANHYDRASE INHIBITORS

*acetazolamide*  
*acetazolamide ext-rel*  
*methazolamide*

### § LOOP DIURETICS

*bumetanide*  
*furosemide*  
*torsemide*

#### § POTASSIUM-SPARING DIURETICS

*amiloride*  
DYRENIUM

#### § THIAZIDES AND THIAZIDE-LIKE DIURETICS

*chlorothiazide*  
*chlorthalidone*  
*hydrochlorothiazide*  
*indapamide*  
*methyclothiazide*  
*metolazone*  
DIURIL

#### § DIURETIC COMBINATIONS

*amiloride-hydrochlorothiazide*  
*spironolactone-hydrochlorothiazide*  
*triamterene-hydrochlorothiazide*

### HEART FAILURE

ENTRESTO

### NITRATES

#### § ORAL

*isosorbide dinitrate ext-rel tabs*  
*isosorbide dinitrate oral*  
*isosorbide mononitrate*  
*isosorbide mononitrate ext-rel*

#### § SUBLINGUAL / TRANSLINGUAL

*nitroglycerin lingual spray*  
*nitroglycerin sublingual*

#### § TRANSDERMAL

*nitroglycerin transdermal*  
NITRO-BID

### PULMONARY ARTERIAL HYPERTENSION

#### § PHOSPHODIESTERASE INHIBITORS

*sildenafil*

#### § MISCELLANEOUS

BIDIL  
*hydralazine*  
*methyl dopa*  
*methyl dopa-hydrochlorothiazide*  
*midodrine*  
*minoxidil*  
RANEXA

## CENTRAL NERVOUS SYSTEM

### § ANTIDEMENTIA

*donepezil*  
*galantamine*  
*memantine*  
*rivastigmine caps, soln*

### § ANTIPARKINSONIAN AGENTS

Certain Parkinson's medications are carved out to the Maryland Department of Health (MDH). If you do not see the medication you wish to prescribe below, it may be covered by MDH. For more information and a list of medications, please visit the following link: <https://mmcp.health.maryland.gov/pap/Pages/paphome.aspx>

*amantadine caps, syrup*  
*bromocriptine*  
*carbidopa*  
*carbidopa-levodopa*  
*carbidopa-levodopa ext-rel*  
*carbidopa-levodopa-entacapone*  
*entacapone*  
*pramipexole*  
*ropinirole*  
*selegiline caps, tabs*  
NEUPRO  
XADAGO PA

## FIBROMYALGIA

Certain fibromyalgia medications are carved out to the Maryland Department of Health (MDH). If you do not see the medication you wish to prescribe below, it may be covered by MDH. For more information and a list of medications, please visit the following link: <https://mmcp.health.maryland.gov/pap/Pages/paphome.aspx>

SAVELLA

## § MULTIPLE SCLEROSIS AGENTS

dalfampridine ext-rel **PA**  
glatiramer  
AVONEX  
REBIF  
COPAXONE 40 MG  
EXTAVIA  
GILENYA  
TECFIDERA

## ENDOCRINE AND METABOLIC

### ANTIDIABETICS

#### § ALPHA-GLUCOSIDASE INHIBITORS

acarbose

#### § BIGUANIDES

metformin **MDL**  
metformin ext-rel

#### § BIGUANIDE / SULFONYLUREA COMBINATIONS

glipizide-metformin  
glyburide-metformin

#### DIPEPTIDYL PEPTIDASE-4 (DPP-4) INHIBITORS

NESINA

#### DIPEPTIDYL PEPTIDASE-4 (DPP-4) INHIBITOR / BIGUANIDE COMBINATIONS

KAZANO

#### INCRETIN MIMETIC AGENTS

OZEMPIC  
TRULICITY  
VICTOZA

#### INCRETIN MIMETIC AGENT / INSULIN COMBINATIONS

SOLIQUA

#### INSULINS

HUMULIN 70/30 \*, **OTC**  
HUMULIN N \*, **OTC**  
HUMULIN R **OTC**  
NOVOLIN 70/30 **OTC**  
NOVOLIN N **OTC**  
NOVOLIN R **OTC**  
ADMELOG \*  
BASAGLAR  
HUMALOG MIX 50/50 \*  
HUMALOG MIX 75/25 \*  
NOVOLOG \*

#### NOVOLOG MIX 70/30 \*

TRESIBA  
SEMGLEE

\* Cartridges and pens are covered for participants 0-18 years of age

#### § INSULIN SENSITIZERS

pioglitazone

#### § INSULIN SENSITIZER / BIGUANIDE COMBINATIONS

pioglitazone-metformin

#### § INSULIN SENSITIZER / SULFONYLUREA COMBINATIONS

pioglitazone-glimepiride

#### § MEGLITINIDES

nateglinide  
repaglinide

#### SODIUM-GLUCOSE CO-TRANSPORTER 2 (SGLT2) INHIBITORS

FARXIGA  
JARDIANCE **PA\***  
STEGLATRO

**PA\*** Covered for cardiovascular indication

#### SODIUM-GLUCOSE CO-TRANSPORTER 2 (SGLT2) INHIBITORS / BIGUANIDE COMBINATIONS

XIGDUO XR  
SYNJARDY **PA\***  
SYNJARDY XR **PA\***

**PA\*** Covered for cardiovascular indication

#### SODIUM-GLUCOSE CO-TRANSPORTER 2 (SGLT2) INHIBITORS / DIPEPTIDYL PEPTIDASE-4 (DPP-4) INHIBITORS

STEGLUJAN

#### SODIUM-GLUCOSE CO-TRANSPORTER 2 (SGLT2) INHIBITORS / DIPEPTIDYL PEPTIDASE-4 (DPP-4) INHIBITORS / BIGUANIDE COMBINATIONS

TRIJARDY **PA\***

**PA\*** Covered for cardiovascular indication

#### § SULFONYLUREAS

glimepiride  
glipizide  
glipizide ext-rel  
glyburide  
glyburide, micronized

## SUPPLIES

ACCU-CHEK CONTROL SOLUTION **OTC**  
ACCU-CHEK STRIPS AND KITS **OTC**  
CHEMSTRIP URINE TEST STRIPS **OTC**  
INSULIN SYRINGES, NEEDLES **OTC**  
KETOSTIX URINE TEST STRIPS **OTC**  
LANCETS, LANCET DEVICES **OTC**

## CALCIUM REGULATORS

### § BISPHOSPHONATES

alendronate tabs  
FOSAMAX PLUS D

## CONTRACEPTIVES

EE = ethinyl estradiol

## MONOPHASIC

### 10 mcg Estrogen

LO LOESTRIN FE **PA**

### § 20 mcg Estrogen

drospirenone-EE 3/20 - Gianvi  
drospirenone-EE-levomefolate 3/20 and levomefolate **PA**  
drospirenone-EE-levomefolate 3/20 and levomefolate - Rajani  
levonorgestrel-EE 0.1/20 - Aviane  
norethindrone acetate-EE 1/20  
norethindrone acetate-EE 1/20 and iron  
norethindrone acetate-EE 1/20 and iron chewable **PA**  
TAYTULLA **PA**

### § 25 mcg Estrogen

norethindrone-EE 0.8/25 chewable

### § 30 mcg Estrogen

desogestrel-EE 0.15/30 - Apri  
drospirenone-EE 3/30  
levonorgestrel-EE 0.15/30 - Levora  
norethindrone acetate-EE 1.5/30  
norethindrone acetate-EE 1.5/30 and iron  
norgestrel-EE 0.3/30 - Low-Ogestrel

### § 35 mcg Estrogen

ethynodiol diacetate-EE 1/35 - Zovia 1/35  
norethindrone-EE 0.4/35 - Briellyn  
norethindrone-EE 0.4/35 chewable - Wymzya FE

norethindrone-EE 0.5/35 - Necon 0.5/35  
norethindrone-EE 1/35  
norgestimate-EE 0.25/35

### § 50 mcg Estrogen

ethynodiol diacetate-EE 1/50 - Kelnor 1/50  
norgestrel-EE 0.5/50 - Ogestrel

### § BIPHASIC

desogestrel-EE

### § TRIPHASIC

desogestrel-EE - Velivet  
levonorgestrel-EE - Trivora  
norethindrone acetate-EE and iron  
norethindrone-EE  
norgestimate-EE

## FOUR PHASE

NATAZIA **PA**

### § EXTENDED CYCLE

levonorgestrel-EE 0.1/20 and EE 10  
levonorgestrel-EE 0.15/20, 0.15/25, 0.15/30 and EE 10  
levonorgestrel-EE 0.15/30 - Quasense  
levonorgestrel-EE 0.15/30 and EE 10

### § PROGESTIN ONLY

norethindrone

### § INJECTABLE

medroxyprogesterone acetate 150 mg/mL

### § TRANSDERMAL

norelgestromin-EE

## VAGINAL

NUVARING

## ESTROGENS

### § INJECTABLE

estradiol valerate  
DEPO-ESTRADIOL

### § ORAL

estradiol

### § TRANSDERMAL

estradiol  
ALORA

## VAGINAL

ESTRACE  
FEMRING  
YUVAFEM

## ESTROGEN / PROGESTINS

### § ORAL

EE-norethindrone acetate

EE-norethindrone acetate - Jinteli  
PREMPHASE  
PREMPRO

## TRANSDERMAL CLIMARA PRO COMBIPATCH

### § GLUCOCORTICOIDS

cortisone acetate  
dexamethasone  
fludrocortisone  
hydrocortisone  
methylprednisolone  
prednisolone sodium phosphate soln 5 mg/5 mL, 15 mg/5 mL, 25 mg/5 mL  
prednisolone syrup  
prednisone

## PROGESTINS

### § INJECTABLE

hydroxyprogesterone caproate

### § ORAL

medroxyprogesterone acetate  
megestrol acetate susp  
norethindrone acetate  
progesterone, micronized

### § SELECTIVE ESTROGEN RECEPTOR MODULATORS

raloxifene

## THYROID AGENTS

### § THYROID SUPPLEMENTS

levothyroxine  
levothyroxine - Levoxyol  
liothyronine

## GASTROINTESTINAL

### § ANTACIDS

aluminum hydroxide **OTC**  
aluminum hydroxide-magnesium hydroxide **OTC**  
calcium carbonate **OTC**  
sodium bicarbonate **OTC**

### § H<sub>2</sub> RECEPTOR ANTAGONISTS

famotidine **OTC**  
PEPCID AC  
CHEWABLE **OTC**  
cimetidine  
famotidine

### § LAXATIVES / STOOL SOFTENERS

docusate sodium caps, liquid **OTC**  
methylcellulose **OTC**  
mineral oil **OTC**

polyethylene glycol  
3350 **OTC**  
psyllium-aspartame **OTC**  
sennosides **OTC**  
lactulose  
peg 3350-electrolytes

**PANCREATIC ENZYMES**  
CREON  
VIOKACE  
ZENPEP

§ **PROTON PUMP  
INHIBITORS**

lansoprazole  
delayed-rel **OTC**  
omeprazole-sodium  
bicarbonate **OTC**  
NEXIUM 24HR **OTC, MDL**  
PRILOSEC **OTC OTD**  
lansoprazole  
delayed-rel **MDL**  
lansoprazole orally  
disintegrating tabs  
15 mg \*, **MDL**  
omeprazole delayed-rel  
caps **MDL**  
pantoprazole  
delayed-rel **MDL**

\* Covered for members eight years of  
age and under

§ **MISCELLANEOUS**  
simethicone **OTC**  
sucralfate

## GENITOURINARY

§ **BENIGN PROSTATIC  
HYPERPLASIA**

alfuzosin ext-rel  
doxazosin  
dutasteride  
finasteride  
tamsulosin  
terazosin

## HEMATOLOGIC

**ANTICOAGULANTS**

§ **INJECTABLE**  
enoxaparin

§ **ORAL**

warfarin  
ELIQUIS  
PRADAXA  
XARELTO

§ **PLATELET AGGREGATION  
INHIBITORS**

clopidogrel  
dipyridamole  
dipyridamole ext-rel-aspirin  
prasugrel  
BRILINTA  
ZONTIVITY **PA**

## IMMUNOLOGIC AGENTS

**AUTOIMMUNE AGENTS**

COSENTYX  
ENBREL  
HUMIRA  
KEVZARA  
OTEZLA **PA**  
SILIQ  
XELJANZ  
XELJANZ XR

**IMMUNOSUPPRESSANTS**

§ **ANTIMETABOLITES**  
azathioprine  
mycophenolate mofetil

§ **CALCINEURIN INHIBITORS**

cyclosporine  
cyclosporine, modified  
tacrolimus

§ **RAPAMYCIN DERIVATIVES**

sirolimus

## NUTRITIONAL / SUPPLEMENTS

**ELECTROLYTES**

§ **POTASSIUM**

potassium chloride  
effervescent  
potassium chloride ext-rel  
potassium chloride liquid  
potassium chloride powder  
25 mEq

§ **SODIUM**

sodium chloride  
tabs 1 gm **OTC**

**VITAMINS AND MINERALS**

§ **FOLIC ACID AGENTS**

folic acid

§ **PRENATAL VITAMINS**

prenatal vitamins-  
folic acid **OTC**  
ONE DAILY  
PRENATAL **OTC**  
prenatal vitamins-folic acid  
CITRANATAL DHA

§ **MISCELLANEOUS**

cholecalciferol (D3) **OTC**  
cyanocobalamin tabs  
1000 mg **OTC**  
ergocalciferol (D2)  
drops **OTC**  
ferrous gluconate **OTC**  
ferrous sulfate **OTC**  
ferrous sulfate  
delayed-rel **OTC**  
lutein **OTC**  
magnesium oxide **OTC**  
melatonin **OTC**  
multivitamins drops **OTC**

multivitamins-iron drops **OTC**

polysaccharide iron complex  
150 mg - Nu-Iron 150 **OTC**  
polysaccharide iron complex-  
vitamin B12-folic acid -  
Ferrex 150 **OTC**  
pyridoxine 25 mg,  
50 mg **OTC**

vitamin ADC drops **OTC**  
FERRIMIN 150 **OTC**  
TRI-VI-SOL DROPS **OTC**

cyanocobalamin inj  
ergocalciferol (D2) caps  
ferrous fumarate-  
polysaccharide iron  
complex-folic acid-  
B complex-vitamin C-  
minerals  
fluoride drops, tabs  
multivitamins-fluoride drops,  
tabs  
multivitamins-fluoride-  
iron drops, tabs  
phytonadione  
vitamin ADC-fluoride drops  
vitamin ADC-fluoride-  
iron drops  
vitamin B complex-vitamin C-  
folic acid  
GALZIN

## RESPIRATORY

§ **ANTICHOLINERGICS**

ipratropium inhalation  
solution  
INCRUSE ELLIPTA  
SPIRIVA RESPIMAT

**ANTICHOLINERGIC / BETA  
AGONIST COMBINATIONS**

§ **SHORT ACTING**  
ipratropium-albuterol  
inhalation solution  
COMBIVENT RESPIMAT

**LONG ACTING**

ANORO ELLIPTA  
STIOLTO RESPIMAT

§ **ANTIHISTAMINES,  
LOW SEDATING**

cetirizine,  
except chewable **OTC**  
levocetirizine

§ **ANTIHISTAMINES,  
NONSEDATING**

fexofenadine susp, tabs **OTC**  
loratadine **OTC**

§ **ANTIHISTAMINES,  
SEDATING**

Certain antihistamine medications are  
carved out to the Maryland Department  
of Health (MDH). If you do not see the  
medication you wish to prescribe below,  
it may be covered by MDH. For more  
information and a list of medications,

please visit the following link:  
[https://mmcp.health.maryland.gov/pap/  
Pages/paphome.aspx](https://mmcp.health.maryland.gov/pap/Pages/paphome.aspx)

chlorpheniramine **OTC**  
diphenhydramine \*, **OTC**  
clemastine  
cyproheptadine

§ **ANTIHISTAMINE /  
DECONGESTANT  
COMBINATIONS**

cetirizine-pseudoephedrine  
ext-rel **OTC**  
chlorpheniramine-  
phenylephrine **OTC**  
loratadine-pseudoephedrine  
ext-rel **OTC**

**BETA AGONISTS**

**INHALANTS**

**Long Acting**

Hand-held Active Inhalation  
SEREVENT

§ **LEUKOTRIENE RECEPTOR  
ANTAGONISTS**

montelukast  
zafirlukast

§ **MAST CELL STABILIZERS**

cromolyn inhalation solution

§ **NASAL ANTIHISTAMINES**

azelastine spray **MDL**  
olopatadine spray

§ **NASAL STEROIDS**

fluticasone spray **OTC**  
triamcinolone acetonide  
spray **OTC**  
FLONASE SENSIMIST **OTC**  
flunisolide spray  
fluticasone spray

**STEROID / BETA AGONIST  
COMBINATIONS**

budesonide-formoterol  
fluticasone-salmeterol  
DULERA

§ **STEROID INHALANTS**

budesonide inhalation  
suspension \*  
FLOVENT DISKUS  
FLOVENT HFA  
QVAR REDIHALER

\* Covered for individuals one through  
three years of age

## TOPICAL

**DERMATOLOGY**

§ **ACTINIC KERATOSIS**

fluorouracil crm 5%  
FLUOROPLEX

**OPHTHALMIC**

§ **ANTIALLERGENICS**

ketotifen **OTC**  
azelastine  
cromolyn sodium

**ANTI-INFLAMMATORIES**

§ **Nonsteroidal**

flurbiprofen  
ketorolac

§ **Steroidal**

dexamethasone sodium  
phosphate  
fluorometholone 0.1%  
prednisolone acetate 1%  
FML FORTE  
FML S.O.P.  
LOTEMAX  
PRED MILD  
PREDNISOLONE  
PHOSPHATE 1%

**BETA-BLOCKERS**

§ **Nonselective**

carteolol  
levobunolol  
metipranolol  
timolol maleate  
timolol maleate gel  
BETIMOL

§ **Selective**

betaxolol 0.5%

**CARBONIC ANHYDRASE  
INHIBITORS**

§ **Topical**

dorzolamide  
AZOPT

§ **CARBONIC ANHYDRASE  
INHIBITOR / BETA-  
BLOCKER COMBINATIONS**

dorzolamide-timolol maleate

§ **PROSTAGLANDINS**

latanoprost  
LUMIGAN

§ **SYMPATHOMIMETICS**

brimonidine 0.15%, 0.2%  
ALPHAGAN P 0.1%

**SYMPATHOMIMETIC / BETA-  
BLOCKER COMBINATIONS**

COMBIGAN

**SYMPATHOMIMETIC /  
CARBONIC ANHYDRASE  
INHIBITOR COMBINATIONS**

SIMBRINZA

**FOR YOUR INFORMATION:** This drug list represents a summary of prescription coverage. It is not all-inclusive and does not guarantee coverage. In most instances, a brand-name drug for which a generic product becomes available will require prior authorization or will no longer be covered upon release of the generic product to the market. Unless specifically indicated, drug list products will include all dosage forms. This list represents brand products in CAPS and generic products in lowercase *italics*. Listed products may be available generically in certain strengths or dosage forms. Dosage forms on this list will be consistent with the category and use where listed.

An exception process may exist for specific clinical or regulatory circumstances that require coverage of a removed medication.

§ Generics are available in this class and should be considered the first line of prescribing.

This document contains references to brand-name prescription drugs that are trademarks or registered trademarks of pharmaceutical manufacturers. Listed products are for informational purposes only and are not intended to replace the clinical judgment of the prescriber.

The information contained in this document is proprietary. The information may not be copied in whole or in part without written permission.

©2018. All rights reserved. 106-MS15984-1-010119