The Drug Utilization Review Board reviewed the following Therapeutic Categories on
June 19, 2008

The DURB acknowledged that cost is a consideration for all products, and has provided its clinical evaluations for the Department's final decisions on the Preferred Drug List (PDL).

New Drugs

Antihistamines & Combinations

The DUR Board recommended ***non-preferred*** status with prior authorization for ***Xyzal***

Antihypertensive Combination

The DUR Board recommended ***non-preferred*** status with prior authorization for ***Azor***

Anti-infective

The DUR Board recommended ***non-preferred*** status with prior authorization for ***Doribax***

Antineoplastics

The DUR Board recommended ***preferred*** status with prior authorization for ***Ixempra***

The DUR Board recommended ***preferred*** status with prior authorization for ***Tasigna***

Antiretrovirals

The DUR Board recommended ***preferred*** status with prior authorization for ***Isentress***

The DUR Board recommended ***preferred*** status with prior authorization for ***Selzentry***

Bronchodilator

The DUR Board recommended ***non-preferred*** status with prior authorization for ***Perforomist***

The Drug Utilization Review Board reviewed the following Therapeutic Categories on
June 19, 2008

Ophthalmic Combination

The DUR Board recommended ***non-preferred*** status with prior authorization for ***Combigan***

Somatostatin Analogue

The DUR Board recommended ***non-preferred*** status with prior authorization for ***Somatuline Depot***

Phase IV - Supplemental Rebate Drugs

P = Preferred **NP** = Non-Preferred **PA** = Prior Authorization

ACE Inhibitors

Drug Name	DURB Recommendation
ACEON	NP
ALTACE CAPSULE	NP
ALTACE TABS	NP
BENAZEPRIL HCL	P
CAPTOPRIL	P
ENALAPRIL MALEATE	P
FOSINOPRIL SODIUM	NP
LISINOPRIL	P
MAVIK	NP
MOEXIPRIL HCL	NP
QUINAPRIL	NP
RAMIPRIL	NP
TRANDOLAPRIL	NP
UNIVASC	NP

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ACE Inhibitor Diuretic Combinations

Drug Name	DURB Recommendation
BENAZEPRIL HCL-HCTZ	P
CAPTOPRIL/HYDROCHLOROTHIAZIDE	P
ENALAPRIL MALEATE/HCTZ	P
FOSINOPRIL-HYDROCHLOROTHIAZIDE	NP
LISINOPRIL/HCTZ	P
MOEXIPRIL-HYDROCHLOROTHIAZIDE	NP
QUINAPRIL-HYDROCHLOROTHIAZIDE	NP
QUINARETIC	NP

ACE Inhibitor Calcium Channel Blockers

Drug Name	DURB Recommendation
AMLODIPINE BESYLATE/BENAZEPRIL	NP
LEXXEL	P
LOTREL	P
TARKA	P

Alpha Blockers for BPH

Drug Name	DURB Recommendation
FLOMAX	P
UROXATRAL	P

Androderm Hormone Inhibitors

Drug Name	DURB Recommendation
AVODART	P
FINASTERIDE	NP
PROSCAR	P

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Atypical Antipsychotics

Drug Name	DURB Recommendation
ABILIFY SOLUTION	NP
ABILIFY TABLET	NP
CLOZAPINE	NP
CLOZARIL	NP
FAZACLO	NP
GEODON	P
INVEGA	P
RISPERDAL SOLUTION	P
RISPERDAL TAB RAPDIS	NP
RISPERDAL TABLET	P
SEROQUEL	P
SEROQUEL XR	P
ZYPREXA TABLET	NP
ZYPREXA ZYDIS	NP

3rd Generation Cephalosporins

Drug Name	DURB Recommendation
CEDAX CAPSULE	P
CEDAX SUSP RECON	P
CEFDINIR CAPSULE	P
CEFDINIR SUSP RECON	P
CEFPODOXIME PROXETIL	P
CEFPODOXIME PROXETIL SUSP	P
OMNICEF CAPSULE	NP
OMNICEF SUSP RECON	NP
SPECTRACEF	P
SUPRAX SUSP RECON	P
VANTIN SUSP RECON	NP

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Macrolides - Adult

Drug Name	DURB Recommendation
AZITHROMYCIN PACKET	P
AZITHROMYCIN TABLET	P
CLARITHROMYCIN ER	P
CLARITHROMYCIN TABLET	P
ZITHROMAX PACKET	P
ZMAX	NP

Macrolides - Pediatric

Drug Name	DURB Recommendation
AZITHROMYCIN SUSP	P
CLARITHROMYCIN SUSP RECON	NP

Quinolones – Systemic

Drug Name	DURB Recommendation
AVELOX	P
AVELOX ABC PACK	P
CIPRO SUSP RECON	P
CIPROFLOXACIN HCL TABLET	P
FACTIVE	NP
LEVAQUIN SOLUTION	NP
LEVAQUIN TABLET	NP
NOROXIN	NP
OFLOXACIN TABLET	P