

# Quick Reference Formulary - Costco Health Solutions Traditional Formulary

This formulary is not inclusive, nor does it guarantee coverage. It is an abridged list of Pharmacy and Therapeutics Committee approved drugs that may be prescribed for members. This document is subject to change. The most updated version of this document is available at [www.costcohealthsolutions.com](http://www.costcohealthsolutions.com) or upon request at 877-908-6024. Drugs will be filled as generics when acceptable generic equivalents are available.

## Reading the Drug List

Generic drugs are listed in all lower case letters. Brand name drugs are listed in all upper case letters. Each drug product is assigned a coverage level, shown to the right of each drug product.

Relative Cost to Member

Tier 1	Formulary Generics	\$
Tier 2	Formulary, brand products	\$\$
Tier 3	Non-preferred formulary products	\$\$\$

Cases where drug products are followed by parentheses indicate that the entry relates to a certain dosage form, e.g. ESTRACE (vaginal cream) or more than one form of the drug e.g. ZOMIG (ZMT). Quantity limits are for prescriptions filled at retail pharmacies.

All newly approved drugs on the market will initially NOT be covered, pending further review by the P&T Committee.

### ADHD/ ANTI-NARCOLEPSY/ ANTI-OBESITY/ ANOREXIANTS

amphetamine/		1
dextroamphetamine tab		
dexamethylphenidate ER cap		1
dexamethylphenidate tab		1
guanfacine ER tab		1
methylphenidate ER cap		1
methylphenidate tab		1
ADDERALL XR CAP	NC	

### AMINOGLYCOSIDES

TOBI PODHALER	CMSP, PA	3
---------------	----------	---

### ANALGESICS - ANTI-INFLAMMATORY

celecoxib cap		1
diclofenac sodium EC tab		1
diclofenac sodium XR tab		1
diclofenac/ misoprostol DR tab		1
ibuprofen tab		1
ketorolac tab	QL	1
meloxicam tab		1
nabumetone tab		1
piroxicam cap		1
sulindac tab		1

### ANALGESICS - OPIOID

acetaminophen/ codeine tab		1
fentanyl patch		1
hydrocodone/ acetaminophen tab		1
morphine sulfate ER tab		1
oxycodone/ acetaminophen tab		1
tramadol tab		1
OXYCODONE ER TAB	QL	2
OXYCONTIN CR TAB	NC	

### ANTIANKXIETY AGENTS

alprazolam tab		1
bupropion tab		1
hydroxyzine tab		1
lorazepam tab		1

### ANTIARRHYTHMICS

MULTAQ TAB		2
------------	--	---

### ANTIASTHMATIC AND BRONCHODILATOR AGENTS

albuterol/ ipratropium neb soln		1
budesonide inh susp		1
ipratropium neb soln		1
montelukast chew tab		1
montelukast tab		1
ANORO ELLIPTA INHALER		2
ARNUITY ELLIPTA INHALER		2
ASMANEX HFA INHALER		2

ASMANEX INHALER		2
COMBIVENT RESPIMAT INHALER		2
DULERA INHALER		2
FLOVENT DISKUS INHALER		2
INCRUSE ELLIPTA INHALER		2
SEREVENT DISKUS INHALER		2
PULMICORT FLEXHALER	NC	
QVAR INHALER	NC	
TUDORZA PRESSAIR INHALER	NC	

### ANTICOAGULANTS

warfarin tab		1
PRADAXA CAP 110MG		3

### ANTICONVULSANTS

carbamazepine ER tab		1
carbamazepine tab		1
clonazepam tab		1
divalproex sodium DR tab		1
gabapentin cap	QL	1
lamotrigine ER tab		1
lamotrigine tab		1
levetiracetam tab		1
phenytoin cap		1
topiramate tab		1

### ANTIDEPRESSANTS

amitriptyline tab		1
bupropion ER tab		1
bupropion XL tab		1
citalopram soln		1
citalopram tab		1
duloxetine EC cap		1
escitalopram tab		1
fluoxetine cap		1
fluoxetine tab		1
mirtazapine tab		1
NEFAZODONE TAB		1
nefazodone tab 50mg, 250mg		1
nortriptyline cap		1
paroxetine tab		1
sertraline conc		1
sertraline tab		1
trazodone tab		1
venlafaxine ER cap		1
venlafaxine tab		1
PEXEVA TAB	NC	
venlafaxine ER tab	NC	

### ANTIDIABETICS

glipizide ER tab		1
glipizide tab		1
glyburide tab		1
metformin tab		1
AVANDIA TAB		2
BYDUREON PEN INJ	QL, RDX	2
FARXIGA TAB	QL	2
INSULIN		2
GLARGINE-YFGN		

INSULIN		2
GLARGINE-YFGN PEN		
JANUMET TAB	QL	2
JANUMET XR TAB	QL	2
JANUVIA TAB	QL, ¢	2
JENTADUETO TAB	QL	2
LEVEMIR FLEXTOUCH INJ		2
LEVEMIR INJ		2
NOVOLIN 70/ 30 INJ	OTC	2
NOVOLIN N INJ	OTC	2
NOVOLIN R INJ	OTC	2
TOUJEO MAX		2
SOLOSTAR INJ		
TOUJEO SOLOSTAR INJ		2
TRADJENTA TAB	QL	2
TRESIBA FLEXTOUCH INJ		2
VICTOZA INJ	QL, RDX	2
ADMELOG INJ, INSULIN LISPRO INJ		NC
BASAGLAR INJ, LANTUS SOLOSTAR INJ, INSULIN GLARGINE SOLOSTAR INJ		NC
HUMULIN N INJ	OTC	NC
HUMULIN R INJ	OTC	NC
LANTUS INJ, INSULIN GLARGINE INJ		NC
pioglitazone/ metformin tab		NC

### ANTIEMETICS

ondansetron tab		1
-----------------	--	---

### ANTIFUNGALS

fluconazole susp		1
fluconazole tab		1
griseofulvin micro tab		1
griseofulvin susp		1
itraconazole cap		1
ketoconazole tab		1
nystatin tab		1
terbinafine tab		1
voriconazole tab		1

### ANTIHYPERLIPIDEMICS

lovastatin tab	\$0	
pravastatin tab	\$0	
simvastatin tab	\$0	
cholestyramine powder		1
fluvastatin cap		1
gemfibrozil tab		1
NIASPAN ER TAB	NC	
TRILIPIX CAP	NC	

### ANTIHYPERTENSIVES

amlodipine/ benazepril cap		1
amlodipine/ valsartan tab		1
benazepril/ benazepril/ hydrochlorothiazide tab		1
bisoprolol/ hydrochlorothiazide tab		1
candesartan tab		1
captopril tab		1

doxazosin tab		1
enalapril tab		1
enalapril/ hydrochlorothiazide tab		1
irbesartan tab		1
irbesartan/ hydrochlorothiazide tab		1
lisinopril tab		1
lisinopril/ hydrochlorothiazide tab		1
losartan tab		1
losartan/ hydrochlorothiazide tab		1
metoprolol/ hydrochlorothiazide tab		1
phenoxymethamine cap		1
terazosin cap		1
valsartan tab		1
valsartan/ hydrochlorothiazide tab		1
candesartan/ hydrochlorothiazide tab		NC

### ANTI-INFECTIVE AGENTS - MISC.

clindamycin cap		1
metronidazole tab		1
nitrofurantoin monohydrate cap		1
smz/ tmp (DS) tab		1
metronidazole cap		NC

### ANTIMALARIALS

hydroxychloroquine tab		1
------------------------	--	---

### ANTIMYCOBACTERIAL AGENTS

rifampin cap		1
--------------	--	---

### ANTINEOPLASTICS

methotrexate tab		1
------------------	--	---

### ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES

anastrozole tab		\$0
tamoxifen tab		\$0
bexarotene cap	CMSP, PA, SF	1

letrozole tab		1
BOSULIF TAB	MSP, PA, SF	MSP
ERIVEDGE CAP	LD, PA, SF	MSP

### ANTIPARKINSON AGENTS

amantadine cap		1
carbidopa/ levodopa tab		1
pramipexole ER tab		1
ropinirole ER tab		1
ropinirole tab		1
selegiline cap		1

### ANTIPSYCHOTICS/ ANTIMANIC AGENTS

aripiprazole tab		1
clozapine tab		1
lithium carbonate cap		1
lithium carbonate tab		1
olanzapine ODT		1

NC Not Covered

generic =small letters

BRANDS =CAPITAL LETTERS

NC/3P Not Covered, Third Party Reviewer

CMSP Costco Mandatory Specialty Pharmacy Program

EXC Plan Exclusion

INF Infertility

LD Limited Distribution

MSP Mandatory Specialty Pharmacy Program

OTC Over-the-Counter

PA Prior Authorization

QL Quantity Limit

RDX Restricted to Diagnosis

RS Restricted to Specialist

SF Limited to two 15 day fills per month for first 3 months

SMKG Smoking Cessation

ST Step Therapy

VAC Vaccine Program

¢ RxCENTS

Last Updated 10/1/2023

# Quick Reference Formulary - Costco Health Solutions Traditional Formulary

This formulary is not inclusive, nor does it guarantee coverage. It is an abridged list of Pharmacy and Therapeutics Committee approved drugs that may be prescribed for members. This document is subject to change. The most updated version of this document is available at [www.costcohealthsolutions.com](http://www.costcohealthsolutions.com) or upon request at 877-908-6024. Drugs will be filled as generics when acceptable generic equivalents are available.

olanzapine tab	1	mupirocin oint	1	clarithromycin tab	1	amoxicillin cap	1
paliperidone ER tab	1	nystatin/ triamcinolone oint	1	DIFICID TAB QL, ST	2	amoxicillin/ clavulanate tab	1
quetiapine tab	1	pimecrolimus cream	1	<b>MEDICAL DEVICES AND SUPPLIES</b>		penicillin vk tab	1
risperidone tab	1	tacrolimus oint	1	B-D INSULIN SYRINGE OTC	1	<b>PSYCHOTHERAPEUTIC AND NEUROLOGICAL AGENTS - MISC.</b>	
ziprasidone cap	1	tretinoin cream PA	1	ACCU-CHEK AVIVA PLUS OTC	NC	bupropion SR tab QL, SMKG	\$0
<b>ANTIVIRALS</b>		tretinoin gel PA	1	METER		nicotine gum	OTC, QL, SMKG
acyclovir cap	1	ELIDEL CREAM	3	B-D PEN NEEDLE OTC	NC	nicotine lozenge	OTC, QL, SMKG
acyclovir susp	1	TAZORAC CREAM 0.05%	3	FREESTYLE FREEDOM OTC	NC	nicotine patch	OTC, QL, SMKG
entecavir tab QL	1	AZELEX CREAM	NC	LITE METER		NICOTROL INHALER	QL, SMKG
nevirapine tab CMSP	1	mupirocin cream	NC	NOVOFINE PEN NEEDLE OTC	NC	NICOTROL NASAL SPRAY	QL, SMKG
valacyclovir tab	1	ZOVIRAX OINT	NC	NOVOTWIST PEN OTC	NC	VARENICLINE TAB	QL, SMKG
zidovudine cap	1	<b>DIAGNOSTIC PRODUCTS</b>		NEEDLE		varenicline tartrate tab	QL, SMKG
RELENZA DISKHALER	QL	ACCU-CHEK TEST STRIP OTC	NC	PRECISION XTRA OTC	NC	starter pack	
FUZEON INJ	CMSP	FREESTYLE LITE TEST OTC	NC	METER		donepezil ODT	QL
PEG-INTRON INJ	CMSP	STRIP	NC	<b>MIGRAINE PRODUCTS</b>		donepezil tab	QL
PEGASYS INJ	CMSP	FREESTYLE TEST STRIP OTC	NC	naratriptan tab	QL	galantamine ER cap	1
<b>ASSORTED CLASSES</b>		PRECISION XTRA TEST OTC	NC	rizatriptan ODT	QL	galantamine tab	1
azathioprine tab	1	STRIP	NC	sumatriptan inj	QL	memantine tab	1
cyclosporine cap	1	TEST STRIP (all other test OTC strips)	NC	sumatriptan tab	QL	rivastigmine cap	1
mycophenolate mofetil tab	1	<b>DIURETICS</b>		sumatriptan vial inj	QL	NAMENDA XR	2
<b>BETA BLOCKERS</b>		acetazolamide ER cap	1	zolmitriptan ODT	QL	TITRATION PACK	
atenolol tab	1	amiloride/ hydrochlorothiazide tab	1	zolmitriptan ODT	QL	<b>TETRACYCLINES</b>	
carvedilol tab	1	furosemide tab	1	zolmitriptan tab	QL	doxycycline hyclate cap	1
labetalol tab	1	hydrochlorothiazide tab	1	SUMATRIPTAN INJ 6MG/ 0.5ML	2	minocycline cap	1
metoprolol ER tab	1	spironolactone tab	1	acetaminophen/ isometheptene/ dichloral cap	NC	<b>THYROID AGENTS</b>	
metoprolol tab	1	triamterene/ hydrochlorothiazide cap	1	SUMAVEL DOSEPRO INJ	NC	liothyronine tab	1
nadolol tab	1	triamterene/ hydrochlorothiazide tab	1	<b>MOUTH/ THROAT/ DENTAL AGENTS</b>		methimazole tab	1
propranolol tab	1	THALITONE TAB	NC	clotrimazole troches	1	THYROLAR TAB	2
<b>CALCIUM CHANNEL BLOCKERS</b>		<b>ENDOCRINE AND METABOLIC AGENTS - MISC.</b>		nystatin susp	1	SYNTHROID TAB	3
amlodipine tab	1	raloxifene tab	\$0	<b>MULTIVITAMINS</b>		<b>ULCER DRUGS</b>	
diltiazem ER cap	1	alendronate tab	1	PRENATAL VITAMINS (PRENATAL PLUS, PREPLUS, PRENAPLUS)	1	cimetidine tab	1
diltiazem tab	1	ibandronate tab 150mg QL	1	<b>NASAL AGENTS - SYSTEMIC AND TOPICAL</b>		famotidine susp	1
felodipine ER tab	1	FORTICAL NASAL SPRAY	2	budesonide nasal spray OTC, QL	1	famotidine tab	OTC
nifedipine cap	1	ACTONEL TAB	3	fluticasone nasal spray	QL	misoprostol tab	1
nifedipine ER tab	1	<b>ESTROGENS</b>		FLONASE SENSIMIST OTC	2	pantoprazole EC tab	1
nisoldipine ER tab	1	estradiol patch	1	<b>OPHTHALMIC AGENTS</b>		rabeprazole EC tab	1
verapamil SR tab	1	estradiol/ norethindrone tab	1	azelastine ophth soln	1	ZEGERID CAP OTC	OTC
<b>CEPHALOSPORINS</b>		PREMARIN TAB	2	bacitracin/ polymyxin b ophth oint	1	PREVACID OTC CAP	OTC
cefaclor cap	1	PREMPHASE TAB,	2	ciprofloxacin ophth soln	1	<b>ULCER DRUGS/ ANTISPASMODICS/ ANTICHLINERGICS</b>	
cefadroxil cap	1	PREMPRO TAB	2	dorzolamide/ timolol (pf) ophth soln	1	DEXILANT DR CAP	NC
cefdinir cap	1	<b>FLUOROQUINOLONES</b>		gentamicin ophth soln	1	dexlansoprazole DR cap	NC
cefdinir susp	1	ciprofloxacin tab	1	ketorolac ophth soln	1	<b>URINARY ANTISPASMODICS</b>	
cefepodoxime proxetil tab	1	levofloxacin tab	1	ketotifen ophth soln	1	oxybutynin ER tab	1
cefprozil susp	1	moxifloxacin tab	1	latanoprost ophth soln	1	oxybutynin tab	1
cefprozil tab	1	ofloxacin tab	1	ofloxacin ophth soln	1	tolterodine SR cap	1
cephalexin cap	1	<b>GENITOURINARY AGENTS - MISCELLANEOUS</b>		pilocarpine ophth soln	1	tolterodine tab	1
<b>CONTRACEPTIVES</b>		alfuzosin SR tab	1	timolol maleate ophth soln	1	<b>VAGINAL PRODUCTS</b>	
tri-sprintec tab	\$0	finasteride tab	1	tobramycin ophth soln	1	PREMARIN VAGINAL CREAM	2
YAZ TAB, YASMIN 28 TAB	NC	tamsulosin cap	1	tobramycin/ dexamethasone ophth soln	2		
<b>CORTICOSTEROIDS</b>		<b>GOUT AGENTS</b>		ALREX OPHTH SUSP	2		
prednisolone soln	1	allopurinol tab	1	BETIMOL OPHTH SOLN	2		
<b>COUGH/ COLD/ ALLERGY</b>		<b>HEMATOLOGICAL AGENTS - MISC.</b>		LUMIGAN OPHTH SOLN QL	2		
guaifenesin/ codeine syrup OTC, QL	1	clopidogrel tab 75mg	1	PROLENSA OPHTH SOLN	2		
<b>DERMATOLOGICALS</b>		<b>HYPNOTICS/ SEDATIVES/ SLEEP DISORDER AGENTS</b>		SOLN			
adapalene cream PA	1	phenobarbital tab	1	TOBRADEX OPHTH OINT	2		
adapalene gel PA	1	ramelteon tab QL	1	<b>OTIC AGENTS</b>			
amnestem cap, claravis cap, isotretinoin cap, myorisan cap, zenatane cap	1	temazepam cap 15mg	1	acetic acid otic soln	1		
calcipotriene cream	1	temazepam cap 30mg	1	neomycin/ polymyxin/ hydrocortisone otic susp	1		
clindamycin gel	1	zaleplon cap QL	1	ofloxacin otic soln	1		
clindamycin/ benzoyl peroxide gel	1	ROZEREM TAB	NC	<b>PENICILLINS</b>			
clotrimazole/ betamethasone cream	1	<b>MACROLIDES</b>		azithromycin susp	1		
erythromycin gel	1	azithromycin tab	1				
imiquimod cream	1						
ketoconazole cream	1						
lidocaine patch QL	1						
lidocaine/ prilocaine cream	1						
metronidazole cream	1						
metronidazole gel	1						

NC Not Covered

generic =small letters

BRANDS =CAPITAL LETTERS

NC/3P Not Covered, Third Party Reviewer

CMSP Costco Mandatory Specialty Pharmacy Program

EXC Plan Exclusion

INF Infertility

LD Limited Distribution

MSP Mandatory Specialty Pharmacy Program

OTC Over-the-Counter

PA Prior Authorization

QL Quantity Limit

RDX Restricted to Diagnosis

RS Restricted to Specialist

SF Limited to two 15 day fills per month for first 3 months

SMKG Smoking Cessation

ST Step Therapy

VAC Vaccine Program

¢ RxCENTS

Last Updated 10/1/2023