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BUILD CHART

As part of the underwriting process, the height and weight of the Proposed Insured is checked to ensure it is within Foresters height and weight guidelines. Insurance will be declined if the Proposed Insured is outside of the minimum or maximum weight for their height. Insurance will also be declined if the Proposed Insured's height is below the minimum or above the maximum, per the chart below.

| Height | Minimum Weight All Plans | Max Weight PlanRight Level | Max Weight PlanRight Graded | Max Weight PlanRight Modified |
|--------|--------------------------|----------------------------|-----------------------------|-------------------------------|
| 4'8" | 74 | 201 | 216 | 232 |
| 4'9" | 77 | 208 | 223 | 239 |
| 4'10" | 80 | 215 | 230 | 246 |
| 4'11" | 83 | 222 | 237 | 253 |
| 5'00" | 86 | 229 | 245 | 262 |
| 5'01" | 89 | 237 | 253 | 271 |
| 5'02" | 92 | 246 | 262 | 280 |
| 5'03" | 95 | 253 | 269 | 288 |
| 5'04" | 98 | 260 | 278 | 297 |
| 5'05" | 101 | 268 | 286 | 306 |
| 5'06" | 104 | 275 | 294 | 315 |
| 5'07" | 107 | 284 | 304 | 325 |
| 5'08" | 110 | 292 | 313 | 334 |
| 5'09" | 113 | 299 | 321 | 343 |
| 5'10" | 117 | 308 | 330 | 353 |
| 5'11" | 121 | 316 | 339 | 362 |
| 6'00" | 125 | 325 | 348 | 372 |
| 6'01" | 129 | 333 | 356 | 381 |
| 6'02" | 133 | 341 | 366 | 391 |
| 6'03" | 137 | 349 | 373 | 399 |
| 6'04" | 142 | 357 | 382 | 409 |
| 6'05" | 147 | 365 | 392 | 419 |
| 6'06" | 152 | 373 | 406 | 434 |
| 6'07" | 159 | 381 | 413 | 442 |
| 6'08" | 162 | 389 | 421 | 450 |
| 6'09" | 167 | 397 | 430 | 460 |

MEDICAL DEFINITIONS

The following definitions are provided for the conditions contained in the Medical Questions.

| | | |
|---|---|---|
| Activities of Daily Living (ADLs) | Activities of daily living (ADLs) are the things we normally do in daily living, including any basic activity we perform, such as feeding ourselves, bathing, dressing, taking medications and toileting. For the purpose of this product, Foresters does not consider help with housekeeping (cleaning, laundry) to be ADL's. | If assistance is required from anyone to perform any ADL's - No coverage |
| Acquired Immune Deficiency Syndrome (AIDS), AIDS Related Complex (ARC), Human Immunodeficiency Virus (HIV) | Acquired immune deficiency syndrome (AIDS) is a disease of the human immune system caused by the human immunodeficiency virus (HIV). This condition progressively reduces the effectiveness of the immune system and leaves individuals susceptible to infections and tumors. | No Coverage |
| Alcohol Abuse/Addiction | Use of alcohol becomes a primary focus, interfering with other activities. When alcohol abuse progresses to alcoholism, also called alcohol addiction or alcohol dependence, alcohol becomes essential to function, including a physical dependence on alcohol, and inability to stop despite severe physical and psychological consequences. | Diagnosed, treated or advised to receive treatment within the past 2 years – Modified Death Benefit |
| Alzheimer's disease | Alzheimer's disease is a progressive degenerative disease of the brain resulting in loss of memory, thinking and language skills and behavioral changes. It is the most common cause of dementia. | No Coverage |
| Amyotrophic Lateral Sclerosis (ALS) (Lou Gehrig's Disease) | Amyotrophic lateral sclerosis is a form of motor neuron disease. ALS is a progressive, fatal, disease caused by the degeneration of the nerve cells in the central nervous system that control voluntary muscle movement. | No Coverage |
| Amputation due to Complications of Diabetes | A complication of diabetic neuropathy in which there is an increased risk of injury to extremities because of loss of sensation. Infections can progress to ulceration which may require surgical removal of the affected extremity. | No Coverage |
| Aneurysm | An aneurysm is a localized abnormal dilatation of a blood vessel which if ruptured may lead to death. The most common aneurysm locations are the brain, abdomen, heart, legs, neck and spleen. | Within 2 yrs of diagnosis or if it has not been removed - Modified Death Benefit |
| Angina | Pain, discomfort or pressure localized in the chest and caused by insufficient blood supply to the heart muscles. | Within 2 years – Modified Death Benefit |
| Aricept, Cognex, Donepezil, Exelon, Razadyne, Namenda | Medications that can be used to treat the symptoms of Alzheimer's or Dementia. | Any current or previous use - No Coverage |

| | | |
|---|--|---|
| Basal Cell Skin Cancer | A common malignancy of the epidermis usually occurs with chronic sun exposure. Melanoma is a more serious form of skin cancer and is not excluded from Forester's definition of cancer. | Level Death Benefit |
| Bone Marrow Transplant | A procedure in which bone marrow that is diseased or damaged is replaced with healthy bone marrow. | No Coverage |
| Brain Tumor | A brain tumor is an abnormal growth of cells within the brain or inside the skull, which can be cancerous or non-cancerous (benign). | Within 2 yrs of diagnosis or if it has not been removed - Modified Death Benefit |
| Cancer | Cancer is a class of diseases in which a group of cells display uncontrolled growth, invasion (intrusion on and destruction of adjacent tissues), and sometimes metastasis (spread to other locations in the body). | Currently has cancer, or had one or more recurrences or had more than one type of cancer – No Coverage If diagnosis or treatment within 3 years – Modified Death Benefit |
| Cardiomyopathy | Cardiomyopathy is a chronic disease of the heart muscle. The muscle is enlarged, thickened and stiffened which leads to deterioration of the function of the heart. People with cardiomyopathy are often at risk of irregular heartbeats or heart failure. | Had or diagnosed within 2 years - Modified Death Benefit |
| Chronic Bronchitis | See Chronic Obstructive Pulmonary Disease (COPD). | Graded Death Benefit |
| Chronic Hepatitis | Hepatitis implies injury to the liver characterized by the presence of inflammatory cells in the tissue of the organ. The disease may impair liver functions that include, among other things, removal of harmful substances, regulation of blood composition, and production of bile to help digestion. | Graded Death Benefit |
| Chronic Obstructive Pulmonary Disease (COPD) | Chronic obstructive pulmonary disease (COPD) or Chronic obstructive lung disease (COLD) is a group of lung diseases characterized by narrowing of the airways leading to a limitation of air flow to and from the lungs. This causes shortness of breath which is generally not reversible and progresses over time. Diseases classified under the heading of COPD include emphysema, chronic bronchitis and bronchiectasis. | Graded Death Benefit |
| Circulatory Surgery | Circulatory surgery is surgery performed on any of the arteries of the body, including but not limited to coronary arteries, the aorta, arteries in the neck, legs and abdomen. | Within 2 yrs - Modified Death Benefit |

| | | |
|---------------------------------------|---|---|
| Cirrhosis of the Liver | In cirrhosis of the liver scar tissue replaces normal healthy liver tissue which blocks the flow of blood through the organ and inhibits normal liver function. | Graded Death Benefit |
| Congestive Heart Failure (CHF) | Congestive heart failure (CHF) occurs when the pumping action of the heart fails to maintain adequate circulation of blood to the body and causes shortness of breath, swollen feet and ankles and chronic fatigue. | No Coverage |
| Dementia | Dementia is a general term that describes a group of symptoms such as loss of memory, judgment, language, complex motor skills, and other intellectual function, caused by the permanent damage or death of the brain's nerve cells, or neurons. | No Coverage |
| Diabetic Coma | Diabetic Coma is a medical emergency in which a person with diabetes mellitus is unconscious due to too much sugar and too little insulin in the blood. | Within 2 yrs - Modified Death Benefit |
| Diagnostic Test | A diagnostic test is any kind of medical test performed to aid in the diagnosis or detection of disease or condition. | Advised to have within the past 12 months and not completed or results unknown – No Coverage |
| Drug Abuse / Addiction | Drug abuse, also known as substance abuse, involves the repeated and excessive use of chemical substances to achieve a certain effect. These substances may be “street” or “illicit” drugs, or may be drugs obtained with a prescription, used for pleasure rather than for medical reasons. Abuse quickly leads to addiction for many drugs. | Diagnosed, treated or advised to receive treatment within the past 2 years – Modified Death Benefit |
| Emphysema | See Chronic Obstructive Pulmonary Disease (COPD). | Graded Death Benefit |
| End-Stage Disease | A condition caused by injury, disease, or illness which has resulted in severe and permanent deterioration, indicated by incapacity and complete physical dependency, and for which, to a reasonable degree of medical certainty, treatment of the irreversible condition would be medically ineffective. | No Coverage |
| Heart Attack | Myocardial infarction (MI) commonly known as a heart attack occurs when the blood supply to part of the heart is interrupted causing some heart cells to die. | Within 2 yrs - Modified Death Benefit |
| Heart Surgery | Heart surgery or cardiac surgery is surgery performed on the heart including heart valves, coronary arteries or any other tissue of the heart. Heart surgery includes angioplasty, stent placement, ablation, pacemaker or implantable cardioverter defibrillator (ICD) insertion. | Within 2 yrs - Modified Death Benefit |

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| Home Healthcare | Health care or supportive care provided in the patient's home by licensed healthcare professionals such as Licensed Practical nurses, Registered nurses, Home Care Aids, Social Workers, Physical Therapists, Occupational Therapists, Speech and language pathologists and Dietitians. | Currently receiving or advised to receive – No Coverage |
| Hospice Care | Hospice care in the United States is a type of care which focuses on the reduction of symptoms for the terminally ill. These symptoms can be physical, emotional, or social in nature. | Receiving or advised to receive - No Coverage |
| Insulin Shock | Insulin Shock is a medical emergency in which a person with diabetes mellitus is unconscious due to too much insulin in the blood. | Within 2 yrs - Modified Death Benefit |
| Kidney Dialysis | Used to provide an artificial replacement for lost kidney function due to kidney or renal failure. | Had or advised to have within the past 12 months – No Coverage |
| Kidney Disease | Any damage that reduces the functioning of the kidney. Also called renal disease, it may lead to complications such as cardiovascular disease, anemia, and kidney failure. | Graded Death Benefit |
| Liver Disease | General term for any damage that reduces the functioning of the liver. | Graded Death Benefit |
| Nephropathy/Diabetic | Kidney disease from long-standing or poorly controlled diabetes. | Within 2 yrs Modified Death Benefit |
| Neuropathy/Diabetic | Nerve damage caused by diabetes that leads to numbness and sometimes pain and weakness in the hands, arms, feet, and legs. Diabetic neuropathy can affect the digestive tract, heart, and genitalia. | Within 2 yrs Modified Death Benefit |
| Nursing home, skilled nursing facility, hospital, psychiatric or correctional facility | A nursing home, convalescent home, Skilled Nursing Facility, care home or rest home provides care for residents. Residents include the elderly and younger adults with physical or mental disabilities. | Current resident of any facilities mentioned - No Coverage |
| Organ transplant | Organ transplant is the moving of an organ from one body to another (or from a donor site on the patient's own body), for the purpose of replacing the recipient's damaged or failing organ with a working one from the donor site. | No Coverage |
| Oxygen Equipment | Oxygen therapy is the administration of oxygen to prevent hypoxemia (not enough oxygen in the blood). Oxygen delivery systems are classified as stationary, portable, or ambulatory. Oxygen can be administered by nasal cannula, mask, and tent. CPAP machines used for sleep apnea are not considered "oxygen equipment". Nebulizers are not considered "oxygen equipment", however if used for COPD, Chronic bronchitis or emphysema the appropriate question should be answered affirmatively. | Within 12 months - No Coverage |

| | | |
|--|--|--|
| Parkinson's Disease | Parkinson's disease is a degenerative disorder of the central nervous system that often impairs motor skills, speech, and other functions. | Graded Death Benefit if able to perform all ADL's, otherwise - No Coverage |
| Retinopathy/Diabetic | Diabetic retinopathy is damage to the eye's retina that occurs with long-term or poorly controlled diabetes. | Within 2 yrs - Modified Death Benefit |
| Skilled Nursing Care | Care or treatment given or supervised by a Registered Nurse. Examples of skilled nursing needs include complex wound dressings, rehabilitation, tube feedings, observation during periods of acute or unstable illness; administration of intravenous fluids and intravenous or intramuscular medications. | Currently receiving or advised to receive – No Coverage |
| Stroke | A stroke is the rapidly developing loss of brain function due to disturbance in the blood supply to the brain. | Within 2 yrs - Modified Death Benefit |
| Systemic Lupus (SLE) | Systemic lupus erythematosus (SLE) or lupus is a chronic autoimmune connective tissue disease that can affect any part of the body. SLE most often harms the heart, joints, skin, lungs, blood vessels, liver, kidneys and nervous system. | Graded Death Benefit |
| Terminal Illness | A condition caused by injury, disease, or illness that would reasonably be expected to cause death within 12 months. | No Coverage |
| Tobacco Class | Applicants who have used any product containing tobacco or nicotine within the past year. | Within 1 year – Tobacco Class |
| Transient Ischemic Attack (TIA) | A transient ischemic attack (TIA) is caused by the changes in the blood supply to a particular area of the brain resulting in brief neurologic dysfunction that persists, by definition, for less than 24 hours. This is sometimes referred to as a mini-stroke. | Within 2 yrs - Modified Death Benefit |
| Wheelchair Use | Use of a wheelchair due to chronic illness or disease. | No Coverage |

MEDICATION REFERENCE CHART

Prescription medications are always changing. Foresters will make every effort to keep this chart current. Please make sure that you regularly go onto our producer website to access the most recent version of this guide. Please note that the lists provided are not exhaustive.

Applicants with a history of Congestive Heart Failure (CHF) are not eligible for PlanRight, regardless of when diagnosed or treated.

Drug Combinations

Any applicant who has been prescribed certain combinations of 3 or more medications may not be offered coverage, depending on the drug combinations. There are a few rare 2-drug CHF combinations which could also lead to no coverage.

If a client has been prescribed a medication from List A in combination with at least 2 medications from two other Lists (List B, C, or D) at the same time, they may not be eligible for coverage.

| LIST A | LIST B | LIST C | LIST D |
|----------------|---------------------------|-------------------|-------------------------|
| ALDACTAZIDE | BUMETANIDE | ACCUPRIL | ACEBUTOLOL HCL |
| ALDACTONE | BUMEX | ACCURETIC | ATENOLOL |
| SPIRONOLACTONE | DEMADEX | ACEON | BETAPACE |
| METOLAZONE | DYAZIDE | ALTACE | BISOPROLOL FUMARATE |
| MYKROX | DYRENIUM | ATACAND | BREVILOC |
| ZAROXOLYN | EDECIN | AVALIDE | BYSTOLIC |
| | FUROSEMIDE | AVAPRO | CARTROL |
| | LASIX | AZOR | CARVEDILOL |
| | MAXZIDE | BENAZEPRIL HCL | COREG |
| | MODURETIC 5-50 | BENICAR | CORGARD |
| | SODIUM EDECIN | CAPOTEN | CORZIDE |
| | TORSEMIDE | CAPTOPRIL | DIGITEK |
| | TRIAMTERENE | COZAAR | DIGOXIN |
| | TRIAMTERENE/HYDROCHLOROTH | DIOVAN | INDERAL |
| | | ENALAPRIL MALEATE | INDERIDE |
| | | EXFORGE | LABETALOL HCL |
| | | FOSINOPRIL SODIUM | LANOXIN |
| | | HYZAAR | LOPRESSOR |
| | | LISINAPRIL | METOPROLOL SUCCINATE ER |
| | | LOTENSIN | METOPROLOL TARTRATE |
| | | LOTREL | PINDOLOL |
| | | MAVIK | PROPRANOLOL HCL |
| | | MICARDIS | SECTRAL |
| | | MONOPRIL | SOTALOL HCL |
| | | PRINIVIL | TENORMIN |
| | | QUINAPRIL HCL | TOPROL XL |
| | | RAMIPRIL | VISKEN |
| | | TARKA | ZEBETA |
| | | TEVETEN | ZIAC |
| | | UNIVASC | |
| | | VALTURNA | |

Diabetes

Applicants who have diabetic kidney disease (nephropathy) or diabetic nerve/circulatory (neuropathy) disease may be eligible for the Modified death benefit.

Any applicant, who is taking medications from the nephropathy list and diabetes list, or medications from the neuropathy list and diabetes list, within the past 2 years, may be offered the Modified death benefit.

| Nephropathy | Neuropathy | Diabetes |
|--------------------|-------------------|-----------------|
| ARANESP | CARBAMAZEPINE | ACTOPLUS |
| CALCITRIOL | CARBATROL | ACTOS |
| CALCIUM ACETATE | DEPACON | AMARYL |
| CARNITOR | DEPAKENE | AVANDAMET |
| CYSTAGON | EPITOL | AVANDARYL |
| FOSRENOL | GABAPENTIN | AVANDIA |
| HECTOROL | LAMICTAL | DIABETA |
| PHOSLO | LAMOTRIGINE | DIABINESE |
| REVELA | LYRICA | FORTAMET |
| ROCALTROL | NEURONTIN | GLIPIZIDE |
| SENSIPAR | TEGRETOL | GLUCOPHAGE |
| ZEMPLAR | VALPROIC ACID | GLUCOTROL |
| | | GLYBURIDE |
| | | GLYNASE |
| | | HUMALOG |
| | | HUMULIN |
| | | ILETIN |
| | | JANUMET |
| | | JANUVIA |
| | | LANTUS |
| | | LEVEMIR |
| | | METFORMIN |
| | | MICRONASE |
| | | NOVOLIN |
| | | NOVOLOG |
| | | PRANDIN |
| | | STARLIX |
| | | TOLBUTAMIDE |
| | | TOLINASE |

Alphabetical Drug List

Where medications that can be used for more than one condition exist, the alternate uses and appropriate level of coverage has been indicated.

The "Rx Fill Within" column means the drug was prescribed within the time period noted. For some circulatory/heart and cancer medications, the "Rx Fill Within" column notes "First Fill". This refers to when the medication was originally prescribed.

| Medication | Indication | Rx Fill Within | Benefit Eligibility |
|--------------------|--|---|-------------------------|
| Abilify | Psychotic Disorder | N/A | Level |
| Abraxane | Cancer | 3 years Current Use | Modified No Coverage |
| Accupril | Hypertension CHF | N/A N/A | Level No Coverage |
| Accuretic | Hypertension CHF | N/A N/A | Level No Coverage |
| Acebutolol HCL | Hypertension CHF | N/A N/A | Level No Coverage |
| Aceon | Hypertension CHF | N/A N/A | Level No Coverage |
| Acetyl L-Carnitine | Alzheimer's / Dementia | N/A | No Coverage |
| Actiq | Cancer Pain Severe Pain | 3 years N/A | Modified Level |
| Activase | Stroke/TIA/Heart Attack | 2 years | Modified |
| Actoplus | Diabetes Diabetic Nephropathy/Neuropathy | N/A 2 years | Level Modified |
| Actos | Diabetes Diabetic Nephropathy/Neuropathy | N/A 2 years | Level Modified |
| Adalat | Hypertension | N/A | Level |
| Adriamycin | Cancer | 3 years Current Use | Modified No Coverage |
| Adrucil | Cancer | 3 years Current Use | Modified No Coverage |
| Advair | Asthma COPD / Emphysema | N/A N/A | Level Graded |
| Afinitor | Cancer | 3 years Current Use | Modified No Coverage |
| Agenerase | AIDS | N/A | No Coverage |
| Aggrastat | Heart Attack | 2 years | Modified |
| Aggrenox | Stroke / TIA | First Fill <2years First Fill >2 years | Modified Level |
| Aglylin | Cancer | 3 years Current Use | Modified No Coverage |
| Akineton | Parkinson's Other Use | N/A N/A | Graded Level |
| Albuterol | Asthma COPD | N/A N/A | Level Graded |
| Aldactazide | Hypertension CHF | N/A N/A | Level No Coverage |
| Aldactone | Hypertension CHF | N/A N/A | Level No Coverage |
| Aldomat | Hypertension | N/A | Level |

| Medication | Indication | Rx Fill Within | Benefit Eligibility |
|-------------------------------|---|---|-----------------------------------|
| Alimta | Cancer | 3 years Current Use | Modified No Coverage |
| Alkeran | Cancer | 3 years Current Use | Modified No Coverage |
| Allopurinol | Gout | N/A | Level |
| Aloxi | Cancer | 3 years Current Use | Modified No Coverage |
| Alprazolam | Anxiety Disorder | N/A | Level |
| Altace | Hypertension CHF | N/A N/A | Level No Coverage |
| Amantadine HCL | Parkinson's | N/A | Graded |
| Amaryl | Diabetes Diabetic Nephropathy/Neuropathy | N/A 2 years | Level Modified |
| Ambisome | AIDS | N/A | No Coverage |
| Amifostine | Cancer | 3 years Current Use | Modified No Coverage |
| Amiloride HCL | Hypertension CHF | N/A N/A | Level No Coverage |
| Amlodipine Besylate/Benzaz | Hypertension CHF | N/A N/A | Level No Coverage |
| Amyl Nitrate | Angina CHF | 2 years N/A | Modified No Coverage |
| Anagrelide HCL | Cancer | 3 years Current Use | Modified No Coverage |
| Angiomax | Circulatory Surgery | 2 years | Modified |
| Antabuse | Alcohol / Drugs | 2 years | Modified |
| Anastrozole | Cancer | First Fill <3years First Fill >3 years | Modified Level |
| Anoro Ellipta | COPD | N/A | Graded |
| Anzemet | Cancer | 3 years Current Use | Modified No Coverage |
| Aptivus | AIDS | N/A | No Coverage |
| Apokyn | Parkinson's | N/A | Graded |
| Apresoline | Hypertension CHF | N/A N/A | Level No Coverage |
| Aranesp | Kidney Dialysis Kidney Disease/Failure Diabetic Nephropathy | 1 year N/A 2 years | No coverage Graded Modified |
| Arcapta Neohaler | COPD | N/A | Graded |
| Aredia | Cancer | 3 years Current Use | Modified No Coverage |
| Argatroban | Circulatory Surgery | 2 years | Modified |
| Aricept | Alzheimer's / Dementia | N/A | No Coverage |
| Arimidex | Cancer | First Fill <3years First Fill >3 years | Modified Level |
| Aromasin | Cancer | First Fill <3years First Fill >3 years | Modified Level |

| Medication | Indication | Rx Fill Within | Benefit Eligibility |
|--|--|------------------------|-------------------------|
| Arranon | Cancer | 3 years Current Use | Modified No Coverage |
| Arsenic Trioxide | Cancer | 3 years Current Use | Modified No Coverage |
| Arzerra | Cancer | 3 years Current Use | Modified No Coverage |
| Atacand | Hypertension CHF | N/A N/A | Level No Coverage |
| Atamet | Parkinson's | N/A | Graded |
| Atenolol | Hypertension CHF | N/A N/A | Level No Coverage |
| Atgam | Organ / Tissue Transplant | N/A | No coverage |
| Ativan | Anxiety Disorder | N/A | Level |
| Atripla | AIDS | N/A | No coverage |
| Atrovent/Atrovent HFA Atrovent (Nasal) | COPD Allergies | N/A N/A | Graded Level |
| Avalide | Hypertension CHF | N/A N/A | Level No Coverage |
| Avandia | Diabetes Diabetic Nephropathy/Neuropathy | N/A 2 years | Level Modified |
| Avapro | Hypertension CHF | N/A N/A | Level No Coverage |
| Avastin | Cancer | 3 years Current Use | Modified No Coverage |
| Avonex | Multiple Sclerosis | N/A | Level |
| Azilect | Parkinson's | N/A | Graded |
| Azasan | Organ / Tissue Transplant | N/A | No coverage |
| | Rheumatoid Arthritis | N/A | Level |
| | Systemic Lupus | N/A | Graded |
| Azathioprine | Organ / Tissue Transplant | N/A | No coverage |
| | Rheumatoid Arthritis | N/A | Level |
| | Systemic Lupus | N/A | Graded |
| Azmacort | Asthma | N/A | Level |
| | COPD / Emphysema | N/A | Graded |
| Azor | Hypertension | N/A | Level |
| | CHF | N/A | No Coverage |
| Baclofen | Multiple Sclerosis | N/A | Level |
| Baraclude | Liver Disorder | N/A | Graded |
| Benazepril HCL | Hypertension | N/A | Level |
| | CHF | N/A | No Coverage |
| Benicar | Hypertension | N/A | Level |
| | CHF | N/A | No Coverage |
| Benlysta | Systemic Lupus | N/A | Graded |
| Bentropine Mesylate | Parkinson's | N/A | Graded |
| | Other Use | N/A | Level |
| Betapace | Heart Arrhythmia | N/A | Level |
| | CHF | N/A | No Coverage |
| Betaseron | Multiple Sclerosis | N/A | Level |
| Betaxolol HCL | Hypertension | N/A | Level |
| | CHF | N/A | No Coverage |
| Bexxar | Cancer | 3 years Current Use | Modified No Coverage |

| Medication | Indication | Rx Fill Within | Benefit Eligibility |
|---------------------------|---|--------------------------|-----------------------------------|
| Bicnu | Cancer | 3 years Current Use | Modified No Coverage |
| BiDil | CHF | N/A | No Coverage |
| Bisoprolol Fumarate | Hypertension CHF | N/A N/A | Level No Coverage |
| Blenoxane | Cancer | 3 years Current Use | Modified No Coverage |
| Bleomycin Sulphate | Cancer | 3 years Current Use | Modified No Coverage |
| Blocadren | Hypertension CHF | N/A N/A | Level No Coverage |
| Brevibloc | Hypertension CHF | N/A N/A | Level No Coverage |
| Brovana | COPD | N/A | Graded |
| Breo Ellipta | COPD | N/A | Graded |
| Bromocriptine Mesylate | Parkinson's | N/A | Graded |
| Bumetadine | Hypertension CHF | N/A N/A | Level No Coverage |
| Bumex | Hypertension CHF | N/A N/A | Level No Coverage |
| Buprenex | Alcohol / Drugs | 2 years | Modified |
| Busulfex | Cancer | 3 years Current Use | Modified No Coverage |
| Bystolic | Hypertension CHF | N/A N/A | Level No Coverage |
| Calcijex | Kidney Dialysis Kidney Disease/Failure Diabetic Nephropathy | 1 year N/A 2 years | No coverage Graded Modified |
| Calcitriol | Kidney Dialysis Kidney Disease/Failure Diabetic Nephropathy | 1 year N/A 2 years | No coverage Graded Modified |
| Calcium Acetate | Kidney Dialysis Kidney Disease/Failure Diabetic Nephropathy | 1 year N/A 2 years | No coverage Graded Modified |
| Calan | Hypertension | N/A | Level |
| Campath | Cancer | 3 years Current Use | Modified No Coverage |
| Campral | Alcohol / Drugs | 2 years | Modified |
| Camptosar | Cancer | 3 years Current Use | Modified No Coverage |
| Capoten | Hypertension CHF | N/A N/A | Level No Coverage |
| Capozide | Hypertension CHF | N/A N/A | Level No Coverage |
| Captopril | Hypertension CHF | N/A N/A | Level No Coverage |
| Carbamazepine | Seizures Diabetic Neuropathy | N/A 2 years | Level Modified |
| Carbatrol | Seizures Diabetic Neuropathy | N/A 2 years | Level Modified |
| Carbidopa | Parkinson's | N/A | Graded |
| Carboplatin | Cancer | 3 years Current Use | Modified No Coverage |

| Medication | Indication | Rx Fill Within | Benefit Eligibility |
|-------------------|---------------------------|------------------------|----------------------------|
| Cardioplegic | Circulatory Surgery | 2 years | Modified |
| Cardizem | Hypertension | N/A | Level |
| Cardura | Hypertension | N/A | Level |
| Carnitor | Kidney Dialysis | 1 year | No coverage |
| | Kidney Disease/Failure | N/A | Graded |
| | Diabetic Nephropathy | 2 years | Modified |
| Cartia | Hypertension | N/A | Level |
| Cartrol | Hypertension | N/A | Level |
| | CHF | N/A | No Coverage |
| Carvedilol | Hypertension | N/A | Level |
| | CHF | N/A | No Coverage |
| Catapress | Hypertension | N/A | Level |
| Casodex | Cancer | 3 years | Modified |
| | | Current Use | No Coverage |
| CeeNu | Cancer | 3 years | Modified |
| | | Current Use | No Coverage |
| Celebrex | Arthritis | N/A | Level |
| Cellcept | Organ / Tissue Transplant | N/A | No coverage |
| Cerubidine | Cancer | 3 years | Modified |
| | | Current Use | No Coverage |
| Cesamet | Cancer | 3 years | Modified |
| | | Current Use | No Coverage |
| Chlorambucil | Cancer | 3 years | Modified |
| | | Current Use | No Coverage |
| Chlorpromazine | Psychotic Disorder | N/A | Level |
| Cisplatin | Cancer | 3 years | Modified |
| | | Current Use | No Coverage |
| Citalopram | Depressive Disorder | N/A | Level |
| Cladribine | Cancer | 3 years | Modified |
| | | Current Use | No Coverage |
| Clolar | Cancer | 3 years | Modified |
| | | Current Use | No Coverage |
| Clopidogrel | Stroke/TIA/Heart Attack | First Fill <2years | Modified |
| | | First Fill >2 years | Level |
| Cogentin | Parkinson's | N/A | Graded |
| | Other Use | N/A | Level |
| Cognex | Alzheimer's/Dementia | N/A | No coverage |
| Combivent | COPD | N/A | Graded |
| Combivir | AIDS | N/A | No Coverage |
| Complera | AIDS | N/A | No Coverage |
| Comtan | Parkinson's | N/A | Graded |
| Copaxone | Multiple Sclerosis | N/A | Level |
| Copegus | Liver Disorder | N/A | Graded |
| Cordarone | Arrhythmia | N/A | Level |
| Coreg | Hypertension | N/A | Level |
| | CHF | N/A | No Coverage |
| Corgard | Hypertension | N/A | Level |
| | CHF | N/A | No Coverage |
| Cosmegen | Cancer | 3 years | Modified |
| | | Current Use | No Coverage |

| Medication | Indication | Rx Fill Within | Benefit Eligibility |
|-----------------------|----------------------------------|----------------|---------------------|
| Coumadin | Cardiac Valve Replacement | 2 years | Modified |
| | TIA/Stroke | 2 years | Modified |
| | Pulmonary Embolism Thrombosis | N/A N/A | Level Level |
| Cozaar | Hypertension | N/A | Level |
| | CHF | N/A | No Coverage |
| Crixivan | AIDS | N/A | No Coverage |
| Cyclophosphamide | Cancer | 3 years | Modified |
| | | Current Use | No Coverage |
| Cyclosporine | Organ / Tissue Transplant | N/A | No Coverage |
| Cyclosporine Modified | Organ / Tissue Transplant | N/A | No Coverage |
| Cystagon | Kidney Dialysis | 1 year | No coverage |
| | Kidney Disease/Failure | N/A | Graded |
| | Diabetic Nephropathy | 2 years | Modified |
| Cytarabine | Cancer | 3 years | Modified |
| | | Current Use | No Coverage |
| Cytogam | Organ / Tissue Transplant | N/A | No coverage |
| Cytosar-U | Cancer | 3 years | Modified |
| | | Current Use | No Coverage |
| Cytovene | AIDS | N/A | No Coverage |
| Cytosan | Cancer | 3 years | Modified |
| | | Current Use | No Coverage |
| Dacarbazine | Cancer | 3 years | Modified |
| | | Current Use | No Coverage |
| Dacogen | Cancer | 3 years | Modified |
| | | Current Use | No Coverage |
| Dactinomycin | Cancer | 3 years | Modified |
| | | Current Use | No Coverage |
| Daliresp | COPD | N/A | Graded |
| Daunorubicin HCL | Cancer | 3 years | Modified |
| | | Current Use | No Coverage |
| Daunoxome | Cancer | 3 years | Modified |
| | | Current Use | No Coverage |
| Demadex | Hypertension | N/A | Level |
| | CHF | N/A | No Coverage |
| Depacon | Seizures | N/A | Level |
| | Diabetic Neuropathy | 2 years | Modified |
| Depade | Alcohol / Drugs | 2 years | Modified |
| Depakene | Seizures | N/A | Level |
| | Diabetic Neuropathy | 2 years | Modified |
| Depakote | Seizure Disorder | N/A | Level |
| Depocyt | Cancer | 3 years | Modified |
| | | Current Use | No Coverage |
| Dexrazoxane | Cancer | 3 years | Modified |
| | | Current Use | No Coverage |
| Diabeta | Diabetes | N/A | Level |
| | Diabetic Nephropathy/Neuropathy | 2 years | Modified |
| Diabinese | Diabetes | N/A | Level |
| | Diabetic Nephropathy/Neuropathy | 2 years | Modified |
| Diazoxide | Cancer | 3 years | Modified |
| | | Current Use | No Coverage |

| Medication | Indication | Rx Fill Within | Benefit Eligibility |
|-------------------|---|--------------------------|-----------------------------------|
| Didanosine | AIDS | N/A | No coverage |
| Digitek | Atrial Fibrillation CHF | N/A N/A | Level No Coverage |
| Digoxin | Atrial Fibrillation CHF | N/A N/A | Level No Coverage |
| Dilacor | Hypertension | N/A | Level |
| Dilantin | Seizure Disorder | N/A | Level |
| Dilatrate SR | Angina CHF | 2 years N/A | Modified No Coverage |
| Dilor | Asthma COPD / Emphysema | N/A N/A | Level Graded |
| Diltiazem | Hypertension | N/A | Level |
| Diovan | Hypertension CHF | N/A N/A | Level No Coverage |
| Disulfiram | Alcohol / Drugs | 2 years | Modified |
| Dolophine | Opioid Dependence | 1 year | Modified |
| Donepezil HCL | Alzheimer's / Dementia | N/A | No coverage |
| Doxil | Cancer | 3 years Current Use | Modified No Coverage |
| Doxorubicin HCL | Cancer | 3 years Current Use | Modified No Coverage |
| Dronabinol | Cancer | 3 years Current Use | Modified No Coverage |
| DTIC-Dome | Cancer | 3 years Current Use | Modified No Coverage |
| Duoneb | COPD | N/A | Graded |
| Dyazide | Hypertension CHF | N/A N/A | Level No Coverage |
| Dynacirc | Hypertension | N/A | Level |
| Dyrenium | Hypertension CHF | N/A N/A | Level No Coverage |
| Edecrin | Hypertension CHF | N/A N/A | Level No Coverage |
| Edurant | AIDS | N/A | No Coverage |
| Eldepryl | Parkinson's | N/A | Graded |
| Eligard | Cancer | 3 years Current Use | Modified No Coverage |
| Eliphos | Kidney Dialysis Kidney Disease/Failure Diabetic Nephropathy | 1 year N/A 2 years | No coverage Graded Modified |
| Elitek | Cancer | 3 years Current Use | Modified No Coverage |
| Ellence | Cancer | 3 years Current Use | Modified No Coverage |
| Eloxatin | Cancer | 3 years Current Use | Modified No Coverage |
| Elspar | Cancer | 3 years Current Use | Modified No Coverage |
| Emcyt | Cancer | 3 years Current Use | Modified No Coverage |
| Emend | Cancer | 3 years Current Use | Modified No Coverage |

| Medication | Indication | Rx Fill Within | Benefit Eligibility |
|--------------------|---------------------------------|-----------------------|----------------------------|
| Emtriva | AIDS | N/A | No coverage |
| Enalapril Maleate | Hypertension | N/A | Level |
| | CHF | N/A | No Coverage |
| Enalaprilat | Hypertension | N/A | Level |
| | CHF | N/A | No Coverage |
| Eptol | Seizures | N/A | Level |
| | Diabetic Neuropathy | 2 years | Modified |
| Epivir | AIDS | N/A | No coverage |
| Epizicom | AIDS | N/A | No coverage |
| Eplerenone | CHF | N/A | No Coverage |
| Erbix | Cancer | 3 years | Modified |
| | | Current Use | No Coverage |
| Ergoloid Mesylates | Alzheimer's / Dementia | N/A | No coverage |
| Eskalith | Bipolar Disorder | N/A | Level |
| Esmolol HCL | Hypertension | N/A | Level |
| | CHF | N/A | No Coverage |
| Estinyl | Cancer | 3 years | Modified |
| | | Current Use | No Coverage |
| Ethyol | Cancer | 3 years | Modified |
| | | Current Use | No Coverage |
| Etopophos | Cancer | 3 years | Modified |
| | | Current Use | No Coverage |
| Etoposide | Cancer | 3 years | Modified |
| | | Current Use | No Coverage |
| Eulexin | Cancer | 3 years | Modified |
| | | Current Use | No Coverage |
| Evista | Cancer | 3 years | Modified |
| | Osteoporosis | Current Use | No Coverage |
| Exelon | Alzheimer's / Dementia | N/A | Level |
| | | N/A | No Coverage |
| Exforge | Hypertension | N/A | Level |
| | CHF | N/A | No Coverage |
| Fareston | Cancer | 3 years | Modified |
| | | Current Use | No Coverage |
| Farxiga | Diabetes | N/A | Level |
| | Diabetic Nephropathy/Neuropathy | 2 years | Modified |
| Faslodex | Cancer | 3 years | Modified |
| | | Current Use | No Coverage |
| Felodipine | Hypertension | N/A | Level |
| Femara | Cancer | First Fill < 3years | Modified |
| | | First Fill > 3 years | Level |
| Fentanyl Citrate | Cancer Pain | 3 years | Modified |
| | Severe Pain | N/A | Level |
| Fentora | Cancer Pain | 3 years | Modified |
| | Severe Pain | N/A | Level |
| Floxuridine | Cancer | 3 years | Modified |
| | | Current Use | No Coverage |
| Fludara | Cancer | 3 years | Modified |
| | | Current Use | No Coverage |

| Medication | Indication | Rx Fill Within | Benefit Eligibility |
|-----------------------|---|--------------------------|-----------------------------------|
| Fludarabine Phosphate | Cancer | 3 years Current Use | Modified No Coverage |
| Fluoxymesterone | Cancer | 3 years Current Use | Modified No Coverage |
| Flutamide | Cancer | 3 years Current Use | Modified No Coverage |
| Folotyn | Cancer | 3 years Current Use | Modified No Coverage |
| Fortamet | Diabetes Diabetic Nephropathy/Neuropathy | N/A 2 years | Level Modified |
| Fortovase | AIDS | N/A | No coverage |
| Foscarnet Sodium | AIDS | N/A | No coverage |
| Foscavir | AIDS | N/A | No coverage |
| Fosinopril Sodium | Hypertension CHF | N/A N/A | Level No Coverage |
| Fosrenol | Kidney Dialysis Kidney Disease/Failure Diabetic Nephropathy | 1 year N/A 2 years | No coverage Graded Modified |
| Fortesta | Cancer | 3 years Current Use | Modified No Coverage |
| FUDR | Cancer | 3 years Current Use | Modified No Coverage |
| Furosemide | Hypertension CHF | N/A N/A | Level No Coverage |
| Fusilev | Cancer | 3 years Current Use | Modified No Coverage |
| Fuzeon | AIDS | N/A | No coverage |
| Gabapentin | Seizures Diabetic Neuropathy | N/A 2 years | Level Modified |
| Gabitril | Seizure Disorder | N/A | Level |
| Galantamine | Alzheimer's / Dementia | N/A | No coverage |
| Gallium Nitrate | Cancer | 3 years Current Use | Modified No Coverage |
| Ganciclovir | AIDS | N/A | No coverage |
| Ganite | Cancer | 3 years Current Use | Modified No Coverage |
| Gemzar | Cancer | 3 years Current Use | Modified No Coverage |
| Gengraf | Organ / Tissue Transplant | N/A | No coverage |
| Gleevec | Cancer | 3 years Current Use | Modified No Coverage |
| Gliadel Wafer | Cancer | 3 years Current Use | Modified No Coverage |
| Glipizide | Diabetes Diabetic Nephropathy/Neuropathy | N/A 2 years | Level Modified |
| Glucophage | Diabetes Diabetic Nephropathy/Neuropathy | N/A 2 years | Level Modified |
| Glucotrol | Diabetes Diabetic Nephropathy/Neuropathy | N/A 2 years | Level Modified |

| Medication | Indication | Rx Fill Within | Benefit Eligibility |
|--------------------|---|--------------------------|-----------------------------------|
| Glyburide | Diabetes Diabetic Nephropathy/Neuropathy | N/A 2 years | Level Modified |
| Glynase | Diabetes Diabetic Nephropathy/Neuropathy | N/A 2 years | Level Modified |
| Granisetron HCL | Cancer | 3 years Current Use | Modified No Coverage |
| Granisol | Cancer | 3 years Current Use | Modified No Coverage |
| Halaven | Cancer | 3 years Current Use | Modified No Coverage |
| Haldol | Psychotic Disorder | N/A | Level |
| Haloperidol | Psychotic Disorder | N/A | Level |
| Halotestin | Cancer | 3 years Current Use | Modified No Coverage |
| HCTZ | Hypertension | N/A | Level |
| HCTZ/Triamterene | Hypertension CHF | N/A N/A | Level No Coverage |
| Hectoral | Kidney Dialysis Kidney Disease/Failure Diabetic Nephropathy | 1 year N/A 2 years | No coverage Graded Modified |
| Heparin | Pulmonary Embolism Thrombosis | N/A N/A | Level Level |
| Hepsera | Liver Disorder | N/A | Graded |
| Herceptin | Cancer | 3 years Current Use | Modified No Coverage |
| Hexalen | Cancer | 3 years Current Use | Modified No Coverage |
| Hivid | AIDS | N/A | No coverage |
| Humalog | Diabetes Diabetic Nephropathy/Neuropathy | N/A 2 years | Level Modified |
| Humulin | Diabetes Diabetic Nephropathy/Neuropathy | N/A 2 years | Level Modified |
| Hycamtin | Cancer | 3 years Current Use | Modified No Coverage |
| Hydralazine HCL | Hypertension CHF | N/A N/A | Level No Coverage |
| Hydrea | Cancer | 3 years Current Use | Modified No Coverage |
| Hydroxyurea | Cancer | 3 years Current Use | Modified No Coverage |
| Hydergine | Alzheimer's /Dementia | N/A | No coverage |
| Hydroxychloroquine | Systemic Lupus Malaria Rheumatoid Arthritis | N/A N/A N/A | Graded Level Level |
| Hyperstat IV | Cancer | 3 years Current Use | Modified No Coverage |
| Hytrin | Hypertension | N/A | Level |
| Hyzaar | Hypertension CHF | N/A N/A | Level No Coverage |

| Medication | Indication | Rx Fill Within | Benefit Eligibility |
|------------------------|---|-------------------------------|-----------------------------------|
| Idamycin PFS | Cancer | 3 years Current Use | Modified No Coverage |
| Idarubicin | Cancer | 3 years Current Use | Modified No Coverage |
| Ifex | Cancer | 3 years Current Use | Modified No Coverage |
| Ifex/Mesnex Combo Pack | Cancer | 3 years Current Use | Modified No Coverage |
| Ifosfamide | Cancer | 3 years Current Use | Modified No Coverage |
| Iletin | Diabetes Diabetic Nephropathy/Neuropathy | N/A 2 years | Level Modified |
| Imdur | Angina CHF | 2 years N/A | Modified No Coverage |
| Imuran | Organ / Tissue Transplant Rheumatoid Arthritis Systemic Lupus | N/A N/A N/A | No coverage Level Graded |
| Inamrinone | CHF | N/A | No Coverage |
| Inderal | Hypertension CHF | N/A N/A | Level No Coverage |
| Inderide | Hypertension CHF | N/A N/A | Level No Coverage |
| Infergen | Liver Disorder | N/A | Graded |
| Innopran XL | Hypertension CHF | N/A N/A | Level No Coverage |
| Inspra | CHF | N/A | No Coverage |
| Insulin | Diabetes Diabetic Nephropathy/Neuropathy | N/A 2 years | Level Modified |
| Intelence | AIDS | N/A | No Coverage |
| Intron-A | Cancer Hepatitis C | 3 years Current Use N/A | Modified No Coverage Graded |
| Invirase | AIDS | N/A | No coverage |
| Invokana | Diabetes Diabetic Nephropathy/Neuropathy | N/A 2 years | Level Modified |
| Ipratropium Bromide | COPD Allergies | N/A N/A | Graded Level |
| Iressa | Cancer | 3 years Current Use | Modified No Coverage |
| Irinotecan | Cancer | 3 years Current Use | Modified No Coverage |
| Ismo | Angina CHF | 2 years N/A | Modified No Coverage |
| Isochron | Angina CHF | 2 years N/A | Modified No Coverage |
| Isodax | Cancer | 3 years Current Use | Modified No Coverage |
| Isoptin | Hypertension | N/A | Level |
| Isordil | Angina CHF | 2 years N/A | Modified No Coverage |

| Medication | Indication | Rx Fill Within | Benefit Eligibility |
|-------------------------------------|--|------------------------|----------------------------|
| Isosorbide Dinitrate/Mononitrate | Angina CHF | 2 years N/A | Modified No Coverage |
| Ixempra | Cancer | 3 years Current Use | Modified No Coverage |
| Janumet | Diabetes Diabetic Nephropathy/Neuropathy | N/A 2 years | Level Modified |
| Januvia | Diabetes Diabetic Nephropathy/Neuropathy | N/A 2 years | Level Modified |
| Jardiance | Diabetes Diabetic Nephropathy/Neuropathy | N/A 2 years | Level Modified |
| Jetvana | Cancer | 3 years Current Use | Modified No Coverage |
| Kaletra | AIDS | N/A | No coverage |
| Kemadrin | Parkinson's Other Use | N/A N/A | Graded Level |
| Kepivance | Cancer | 3 years Current Use | Modified No Coverage |
| Kerlone | Hypertension CHF | N/A N/A | Level No Coverage |
| Kytril | Cancer | 3 years Current Use | Modified No Coverage |
| Labetalol | Hypertension CHF | N/A N/A | Level No Coverage |
| Lamictal | Seizures Diabetic Neuropathy | N/A 2 years | Level Modified |
| Lamtrofine | Seizures Diabetic Neuropathy | N/A 2 years | Level Modified |
| Lanoxicaps | Atrial Fibrillation CHF | N/A N/A | Level No Coverage |
| Lanoxin | Atrial Fibrillation CHF | N/A N/A | Level No Coverage |
| Lantus | Diabetes Diabetic Nephropathy/Neuropathy | N/A 2 years | Level Modified |
| Lasix | Hypertension CHF | N/A N/A | Level No Coverage |
| Larodopa | Parkinson's | N/A | Graded |
| Leucovorin Calcium | Cancer | 3 years Current Use | Modified No Coverage |
| Leukeran | Cancer | 3 years Current Use | Modified No Coverage |
| Leukine | Cancer | 3 years Current Use | Modified No Coverage |
| Leuprolide | Cancer | 3 years Current Use | Modified No Coverage |
| Leustatin | Cancer | 3 years Current Use | Modified No Coverage |
| Levatol | Hypertension CHF | N/A N/A | Level No Coverage |
| Levodopa | Parkinson's | N/A | Graded |
| Levamisole HCL | Cancer | 3 years Current Use | Modified No Coverage |

| Medication | Indication | Rx Fill Within | Benefit Eligibility |
|----------------------------|---|--------------------------|-----------------------------------|
| Levemir | Diabetes Diabetic Nephropathy/Neuropathy | N/A 2 years | Level Modified |
| Levocarnitine | Kidney Dialysis Kidney Disease/Failure Diabetic Nephropathy | 1 year N/A 2 years | No coverage Graded Modified |
| Lexiva | AIDS | N/A | No coverage |
| Lexxel | Hypertension CHF | N/A N/A | Level No Coverage |
| Lipitor | Cholesterol | N/A | Level |
| Lisinopril | Hypertension CHF | N/A N/A | Level No Coverage |
| Lithium | Bipolar Disorder | N/A | Level |
| Lodosyn | Parkinson's | N/A | Graded |
| Lopressor | Hypertension | N/A | Level |
| Losartan Potassium | Hypertension CHF | N/A N/A | Level No Coverage |
| Lotensin | Hypertension CHF | N/A N/A | Level No Coverage |
| Lotrel | Hypertension CHF | N/A N/A | Level No Coverage |
| Loxapine | Psychotic Disorder | N/A | Level |
| Loxitane | Psychotic Disorder | N/A | Level |
| Lozol | Hypertension | N/A | Level |
| Lupron | Cancer | 3 years Current Use | Modified No Coverage |
| Lyrica | Seizures Diabetic Neuropathy | N/A 2 years | Level Modified |
| Lysodren | Cancer | 3 years Current Use | Modified No Coverage |
| Lytensopril | Hypertension CHF | N/A N/A | Level No Coverage |
| Marinol | Cancer | 3 years Current Use | Modified No Coverage |
| Matulane | Cancer | 3 years Current Use | Modified No Coverage |
| Maxzide | Hypertension CHF | N/A N/A | Level No Coverage |
| Mavik | Hypertension CHF | N/A N/A | Level No Coverage |
| Mellaril | Psychotic Disorder | N/A | Level |
| Melphalan Hydrochloride | Cancer | 3 years Current Use | Modified No Coverage |
| Mepron | AIDS | N/A | No coverage |
| Mercaptopurine | Cancer | 3 years Current Use | Modified No Coverage |
| Mesna | Cancer | 3 years Current Use | Modified No Coverage |
| Mesnex | Cancer | 3 years Current Use | Modified No Coverage |
| Metformin | Diabetes Diabetic Nephropathy/Neuropathy | N/A 2 years | Level Modified |
| Methadone | Opioid Dependence | 1 year | Modified |

| Medication | Indication | Rx Fill Within | Benefit Eligibility |
|----------------------------------|------------------------------------|------------------------|----------------------------|
| Methadose | Opioid Dependence | 1 year | Modified |
| Methotrexate | Cancer | 3 years Current Use | Modified No Coverage |
| | Rheumatoid Arthritis | N/A | Level |
| Methyldopa | Hypertension | N/A | Level |
| Metolazone | Hypertension | N/A | Level |
| | CHF | N/A | No Coverage |
| Metoprolol Tartrate/Succinate | Hypertension | N/A | Level |
| | CHF | N/A | No Coverage |
| Metoprolol HCTZ | Hypertension | N/A | Level |
| | CHF | N/A | No Coverage |
| Mevacor | Cholesterol | N/A | Level |
| Micardis | Hypertension | N/A | Level |
| | CHF | N/A | No Coverage |
| Micronase | Diabetes | N/A | Level |
| | Diabetic Nephropathy/Neuropathy | 2 years | Modified |
| Midamor | Hypertension | N/A | Level |
| | CHF | N/A | No Coverage |
| Milrinone | CHF | N/A | No Coverage |
| Minipress | Hypertension | N/A | Level |
| Minitran | Angina | 2 years | Modified |
| | CHF | N/A | No Coverage |
| Mirapex | Parkinson's | N/A | Graded |
| | Other Use | N/A | Level |
| Mithracin | Cancer | 3 years | Modified |
| | | Current Use | No Coverage |
| Mitomycin | Cancer | 3 years | Modified |
| | | Current Use | No Coverage |
| Mitoxantrone HCL | Cancer | 3 years | Modified |
| | | Current Use | No Coverage |
| Moban | Psychotic Disorder | N/A | Level |
| Moduretic | Hypertension | N/A | Level |
| | CHF | N/A | No Coverage |
| Moexipril HCL | Hypertension | N/A | Level |
| | CHF | N/A | No Coverage |
| Monoket | Angina | 2 years | Modified |
| | CHF | N/A | No Coverage |
| Monopril | Hypertension | N/A | Level |
| | CHF | N/A | No Coverage |
| Mustargen | Cancer | 3 years | Modified |
| | | Current Use | No Coverage |
| Mutamycin | Cancer | 3 years | Modified |
| | | Current Use | No Coverage |
| Mycobutin | AIDS | N/A | No coverage |
| Myfortic | Organ / Tissue Transplant | N/A | No coverage |
| Mykrok | Hypertension | N/A | Level |
| | CHF | N/A | No Coverage |
| Myleran | Cancer | 3 years | Modified |
| | | Current Use | No Coverage |
| Mylocel | Cancer | 3 years | Modified |
| | | Current Use | No Coverage |
| Mylotarg | Cancer | 3 years | Modified |
| | | Current Use | No Coverage |
| Mysoline | Seizure Disorder | N/A | Level |

| Medication | Indication | Rx Fill Within | Benefit Eligibility |
|--|---------------------------------|---|-------------------------|
| Nadolol | Hypertension CHF | N/A N/A | Level No Coverage |
| Namenda | Alzheimer's /Dementia | N/A | No coverage |
| Narcan | Alcohol / Drugs | 2 years | Modified |
| Naloxone | Alcohol / Drugs | 2 years | Modified |
| Naltrexone | Alcohol / Drugs | 2 years | Modified |
| Natrecor | CHF | N/A | No Coverage |
| Navane | Psychotic Disorder | N/A | Level |
| Navelbine | Cancer | 3 years Current Use | Modified No Coverage |
| Nebupent | AIDS | N/A | No coverage |
| Neosar | Cancer | 3 years Current Use | Modified No Coverage |
| Neulasta | Cancer | 3 years Current Use | Modified No Coverage |
| Neumega | Cancer | 3 years Current Use | Modified No Coverage |
| Neupro | Parkinson's | N/A | Graded |
| Neurontin | Seizures Diabetic Neuropathy | N/A 2 years | Level Modified |
| Neutrexin | AIDS | N/A | No coverage |
| Nexavar | Cancer | 3 years Current Use | Modified No Coverage |
| Nifedipine | Hypertension | N/A | Level |
| Nilandron | Cancer | 3 years | Modified |
| Nimodipine | Stroke/TIA/Aneurysm | First Fill <2years First Fill >2 years | Modified Level |
| Nimotop | Stroke/TIA/Aneurysm | First Fill <2years First Fill >2 years | Modified Level |
| Nipent | Cancer | 3 years Current Use | Modified No Coverage |
| Nitrek | Angina CHF | 2 years N/A | Modified No Coverage |
| Nitro-bid | Angina CHF | 2 years N/A | Modified No Coverage |
| Nitro-dur | Angina CHF | 2 years N/A | Modified No Coverage |
| Nitroglycerine/Nitrota b/Nitroquick/Nitrostat | Angina CHF | 2 years N/A | Modified No Coverage |
| Nitrol | Angina CHF | 2 years N/A | Modified No Coverage |
| Nitromist | Angina CHF | 2 years N/A | Modified No Coverage |
| Nolvadex | Cancer | First Fill <3years First Fill >3 years | Modified Level |
| Normodyne | Hypertension CHF | N/A N/A | Level No Coverage |
| Norpace | Arrhythmia | N/A | Level |
| Norvasc | Hypertension | N/A | Level |

| Medication | Indication | Rx Fill Within | Benefit Eligibility |
|-------------------------|---|--------------------------|-----------------------------------|
| Norvir | AIDS | N/A | No coverage |
| Novolin | Diabetes Diabetic Nephropathy/Neuropathy | N/A 2 years | Level Modified |
| Novolog | Diabetes Diabetic Nephropathy/Neuropathy | N/A 2 years | Level Modified |
| Novanitrone | Cancer | 3 years Current Use | Modified No Coverage |
| Noxafil | Cancer | 3 years Current Use | Modified No Coverage |
| Octreotide Acetate | Cancer | 3 years Current Use | Modified No Coverage |
| Oforta | Cancer | 3 years Current Use | Modified No Coverage |
| Olanzapine | Psychotic Disorder | N/A | Level |
| Olysio | Hepatitis C | N/A | Graded |
| Omontys | Kidney Dialysis Kidney Disease/Failure Diabetic Nephropathy | 1 year N/A 2 years | No coverage Graded Modified |
| Oncaspar | Cancer | 3 years Current Use | Modified No Coverage |
| Ondansetron | Cancer | 3 years Current Use | Modified No Coverage |
| Onsolis | Cancer Pain Severe Pain | 3 years N/A | Modified Level |
| Ontak | Cancer | 3 years Current Use | Modified No Coverage |
| Onxol | Cancer | 3 years Current Use | Modified No Coverage |
| Orthoclone OKT3 | Organ / Tissue Transplant | N/A | No coverage |
| Oseni | Diabetes Diabetic Nephropathy/Neuropathy | N/A 2 years | Level Modified |
| Pacerone | Arrhythmia | NA | Level |
| Paclitaxel | Cancer | 3 years Current Use | Modified No Coverage |
| Pamidronate Disodium | Cancer | 3 years Current Use | Modified No Coverage |
| Panretin | AIDS | N/A | No coverage |
| Paraplatin | Cancer | 3 years Current Use | Modified No Coverage |
| Parcopa | Parkinson's | N/A | Graded |
| Parlodel | Parkinson's | N/A | Graded |
| Paxil | Depressive Disorder | N/A | Level |
| Pentam 300 | AIDS | N/A | No coverage |
| Pentamidine Isethionate | AIDS | N/A | No coverage |
| Pentostatin | Cancer | 3 years Current Use | Modified No Coverage |
| Pegasys | Liver Disorder | N/A | Graded |
| Peg-Intron | Liver Disorder | N/A | Graded |
| Pepcid | Stomach Disorder | N/A | Level |

| Medication | Indication | Rx Fill Within | Benefit Eligibility |
|----------------------|---|---|-----------------------------------|
| Pergolide Mesylate | Parkinson's | N/A | Graded |
| Perindopril Erbumine | Hypertension CHF | N/A N/A | Level No Coverage |
| Permax | Parkinson's | N/A | Graded |
| Phenobarbital | Seizure Disorder | N/A | Level |
| Phoslo | Kidney Dialysis Kidney Disease/Failure Diabetic Nephropathy | 1 year N/A 2 years | No coverage Graded Modified |
| Photofrin | Cancer | 3 years Current Use | Modified No Coverage |
| Pindolol | Hypertension CHF | N/A N/A | Level No Coverage |
| Plaquenil | Systemic Lupus Malaria Rheumatoid Arthritis | N/A N/A N/A | Graded Level Level |
| Platinol AQ | Cancer | 3 years Current Use | Modified No Coverage |
| Plavix | Stroke/TIA/Heart Attack | First Fill <2years First Fill >2 years | Modified Level |
| Plegisol | Circulatory Surgery | 2 years | Modified |
| Plenaxis | Cancer | 3 years Current Use | Modified No Coverage |
| Plendil | Hypertension | N/A | Level |
| Prandin | Diabetes Diabetic Nephropathy/Neuropathy | N/A 2 years | Level Modified |
| Pravachol | Cholesterol | N/A | Level |
| Prazosin | Hypertension | N/A | Level |
| Prezista | AIDS | N/A | No coverage |
| Primacor | CHF | N/A | No Coverage |
| Prinivil | Hypertension CHF | N/A N/A | Level No Coverage |
| Prinzide | Hypertension CHF | N/A N/A | Level No Coverage |
| Procardia | Hypertension | N/A | Level |
| Prograf | Organ / Tissue Transplant | N/A | No Coverage |
| Proleukin | Cancer | 3 years Current Use | Modified No Coverage |
| Prolixin | Psychotic Disorder | N/A | Level |
| Propranolol HCL | Hypertension CHF | N/A N/A | Level No Coverage |
| Provenge | Cancer | 3 years Current Use | Modified No Coverage |
| Proventil | Asthma COPD / Emphysema | N/A N/A | Level Graded |
| Prozac | Depressive Disorder | N/A | Level |
| Purinethol | Cancer | 3 years Current Use | Modified No Coverage |
| Quadramet | Cancer | 3 years Current Use | Modified No Coverage |
| Quetiapine | Psychotic Disorder | N/A | Level |

| Medication | Indication | Rx Fill Within | Benefit Eligibility |
|-----------------------|---------------------------|------------------------|----------------------------|
| Quinapril | Hypertension CHF | N/A N/A | Level No Coverage |
| Quinaretic | Hypertension CHF | N/A N/A | Level No Coverage |
| Ramipril | Hypertension CHF | N/A N/A | Level No Coverage |
| Ranexa | Angina | 2 years | Modified |
| Ranitidine | Stomach Disorder | N/A | Level |
| Rapamune | Organ / Tissue Transplant | N/A | No Coverage |
| Razadyne | Alzheimer's / Dementia | N/A | No Coverage |
| Rebetol | Liver Disorder | N/A | Graded |
| Rebetron | Liver Disorder | N/A | Graded |
| Rebif | Multiple Sclerosis | N/A | Level |
| Reglan | Stomach Disorder | N/A | Level |
| Requip | Parkinson's Other Use | N/A N/A | Graded Level |
| Reminyl | Alzheimer's / Dementia | N/A | No Coverage |
| Renagel | Kidney Dialysis | 1 year | No coverage |
| | Kidney Disease/Failure | N/A | Graded |
| | Diabetic Nephropathy | 2 years | Modified |
| Renvela | Kidney Dialysis | 1 year | No coverage |
| | Kidney Disease/Failure | N/A | Graded |
| | Diabetic Nephropathy | 2 years | Modified |
| Rescriptor | AIDS | N/A | No Coverage |
| Retrovir | AIDS | N/A | No Coverage |
| Revex | Alcohol / Drugs | 2 years | Modified |
| Revia | Alcohol / Drugs | 2 years | Modified |
| Revlimid | Cancer | 3 years | Modified |
| | | Current Use | No Coverage |
| Reyataz | AIDS | N/A | No Coverage |
| Ribapak | Liver Disorder | N/A | Graded |
| Ribasphere | Liver Disorder | N/A | Graded |
| Ribatab | Liver Disorder | N/A | Graded |
| Ribavirin | Liver Disorder | N/A | Graded |
| Rilutek | ALS | N/A | No Coverage |
| Risperdal | Psychotic Disorder | N/A | Level |
| Risperidone | Psychotic Disorder | N/A | Level |
| Rituxan | Cancer | 3 years Current Use | Modified No Coverage |
| | Rheumatoid Arthritis | N/A | Level |
| Rivastigmine Tartrate | Alzheimer's / Dementia | N/A | No Coverage |
| Rocaltrol | Kidney Dialysis | 1 year | No coverage |
| | Kidney Disease/Failure | N/A | Graded |
| | Diabetic Nephropathy | 2 years | Modified |
| Roferon | Cancer | 3 years Current Use | Modified No Coverage |
| | Hepatitis C | N/A | Graded |
| Ropinirole | Parkinson's | N/A | Graded |
| | Other Use | N/A | Level |
| Rubex | Cancer | 3 years Current Use | Modified No Coverage |
| Rythmol | Arrhythmia | N/A | Level |
| Sancuso | Cancer | 3 years | Modified |
| | | Current Use | No Coverage |

| Medication | Indication | Rx Fill Within | Benefit Eligibility |
|------------------------|---|---|-----------------------------------|
| Sandimmune | Organ / Tissue Transplant | N/A | No Coverage |
| Sandostatin | Cancer | 3 years Current Use | Modified No Coverage |
| Sectral | Hypertension CHF | N/A N/A | Level No Coverage |
| Selegiline HCL | Parkinson's | N/A | Graded |
| Selzentry | AIDS | N/A | No Coverage |
| Sensipar | Kidney Dialysis Kidney Disease/Failure Diabetic Nephropathy | 1 year N/A 2 years | No coverage Graded Modified |
| Serevent | Asthma COPD / Emphysema | N/A N/A | Level Graded |
| Seroquel | Psychotic Disorder | N/A | Level |
| Simvastatin | Cholesterol | N/A | Level |
| Simulect | Organ / Tissue Transplant | N/A | No Coverage |
| Sinemet/Sinemet CR | Parkinson's | N/A | Graded |
| Sodium Edecrin | Hypertension CHF | N/A N/A | Level No Coverage |
| Soltalol Hydrochloride | Hypertension CHF | N/A N/A | Level No Coverage |
| Soltamox | Cancer | First Fill <3years First Fill >3 years | Modified Level |
| Sorine | Hypertension CHF | N/A N/A | Level No Coverage |
| Sotalol HCL | Hypertension CHF | N/A N/A | Level No Coverage |
| Spiriva | COPD | N/A | Graded |
| Spironolactone | Hypertension CHF | N/A N/A | Level No Coverage |
| Sprycel | Cancer | 3 years Current Use | Modified No Coverage |
| Stalevo | Parkinson's | N/A | Graded |
| Starlix | Diabetes Diabetic Nephropathy/Neuropathy | N/A 2 years | Level Modified |
| Stilphostrol | Cancer | 3 years Current Use | Modified No Coverage |
| Striverdi Respiat | COPD | N/A | Graded |
| Sublimaze | Cancer Pain Severe Pain | 3 years N/A | Modified Level |
| Suboxone | Alcohol / Drugs | 2 years | Modified |
| Subutex | Alcohol / Drugs | 2 years | Modified |
| Sustiva | AIDS | N/A | No Coverage |
| Sutent | Cancer | 3 years Current Use | Modified No Coverage |
| Symbicort | Asthma COPD / Emphysema | N/A N/A | Level Graded |
| Symmetrel | Parkinson's | N/A | Graded |
| Tabloid | Cancer | 3 years Current Use | Modified No Coverage |

| Medication | Indication | Rx Fill Within | Benefit Eligibility |
|-------------------|---------------------------|------------------------|----------------------------|
| Tagamet | Stomach Disorder | N/A | Level |
| Tambocor | Arrythmia | N/A | Level |
| Tamoxifen | Cancer | First Fill <3years | Modified |
| | | First Fill >3 years | Level |
| Tarceva | Cancer | 3 years Current Use | Modified No Coverage |
| Targretin | Cancer | 3 years Current Use | Modified No Coverage |
| Tarka | Hypertension | N/A | Level |
| | CHF | N/A | No Coverage |
| Tasigna | Cancer | 3 years Current Use | Modified No Coverage |
| Tasmar | Parkinson's | N/A | Graded |
| Taxol | Cancer | 3 years Current Use | Modified No Coverage |
| Taxotere | Cancer | 3 years Current Use | Modified No Coverage |
| Tegretol | Seizures | N/A | Level |
| | Diabetic Neuropathy | 2 years | Modified |
| Temodar | Cancer | 3 years Current Use | Modified No Coverage |
| Tenex | Hypertension | N/A | Level |
| Tenoretic | Hypertension | N/A | Level |
| | CHF | N/A | No Coverage |
| Tenormin | Hypertension | N/A | Level |
| | CHF | N/A | No Coverage |
| Teslac | Cancer | 3 years Current Use | Modified No Coverage |
| Teveten | Hypertension | N/A | Level |
| | CHF | N/A | No Coverage |
| Thalomid | Cancer | 3 years Current Use | Modified No Coverage |
| Theodur | Asthma | N/A | Level |
| | COPD / Emphysema | N/A | Graded |
| Theophylline | Asthma | N/A | Level |
| | COPD / Emphysema | N/A | Graded |
| Theracys | Cancer | 3 years Current Use | Modified No Coverage |
| Thioplex | Cancer | 3 years Current Use | Modified No Coverage |
| Thioridazine | Psychotic Disorder | N/A | Level |
| Thiotepa | Cancer | 3 years Current Use | Modified No Coverage |
| Thiothixene | Psychotic Disorder | N/A | Level |
| Thymoglobulin | Organ / Tissue Transplant | N/A | No Coverage |
| Thorazine | Psychotic Disorder | N/A | Level |
| Tiazac | Hypertension | N/A | Level |
| Tice BCG | Cancer | 3 years Current Use | Modified No Coverage |
| Ticlid | Stroke/TIA/Heart Attack | First Fill <2years | Modified |
| | | First Fill >2 years | Level |

| Medication | Indication | Rx Fill Within | Benefit Eligibility |
|---------------------|--|------------------------|----------------------------|
| Tilade | Asthma COPD / Emphysema | N/A N/A | Level Graded |
| Timolide | Hypertension CHF | N/A N/A | Level No Coverage |
| Timolol Maleate | Hypertension CHF | N/A N/A | Level No Coverage |
| Tolazamide | Diabetes Diabetic Nephropathy/Neuropathy | N/A 2 years | Level Modified |
| Tolbutamide | Diabetes Diabetic Nephropathy/Neuropathy | N/A 2 years | Level Modified |
| Tolinase | Diabetes Diabetic Nephropathy/Neuropathy | N/A 2 years | Level Modified |
| Toposar | Cancer | 3 years Current Use | Modified No Coverage |
| Topotecan | Cancer | 3 years Current Use | Modified No Coverage |
| Totect | Cancer | 3 years Current Use | Modified No Coverage |
| Torisel | Cancer | 3 years Current Use | Modified No Coverage |
| Torseamide | Hypertension CHF | N/A N/A | Level No Coverage |
| Toprol XL | Hypertension CHF | N/A N/A | Level No Coverage |
| Trandate | Hypertension CHF | N/A N/A | Level No Coverage |
| Trandolapril | Hypertension CHF | N/A N/A | Level No Coverage |
| Treanda | Cancer | 3 years Current Use | Modified No Coverage |
| Trelstar | Cancer | 3 years Current Use | Modified No Coverage |
| Tretinoin | Cancer | 3 years Current Use | Modified No Coverage |
| Triamterene | Hypertension CHF | N/A N/A | Level No Coverage |
| Triamterene/HCTZ | Hypertension CHF | N/A N/A | Level No Coverage |
| Tribenzor | Hypertension CHF | N/A N/A | Level No Coverage |
| Trisenox | Cancer | 3 years Current Use | Modified No Coverage |
| Trihexyphenidyl HCL | Parkinson's Other Use | N/A N/A | Graded Level |
| Trizivir | AIDS | N/A | No Coverage |
| Truvada | AIDS | N/A | No Coverage |
| Twynsta | Hypertension CHF | N/A N/A | Level No Coverage |
| Tykerb | Cancer | 3 years Current Use | Modified No Coverage |
| Tyzeka | Liver Disorder | N/A | Graded |

| Medication | Indication | Rx Fill Within | Benefit Eligibility |
|----------------------|---------------------------------|------------------------|-------------------------|
| Uniretic | Hypertension CHF | N/A N/A | Level No Coverage |
| Univasc | Hypertension CHF | N/A N/A | Level No Coverage |
| Uvadex | Cancer | 3 years Current Use | Modified No Coverage |
| Valcyte | AIDS | N/A | No Coverage |
| Valproic Acid | Seizures Diabetic Neuropathy | N/A 2 years | Level Modified |
| Valstar | Cancer | 3 years Current Use | Modified No Coverage |
| Valturna | Hypertension CHF | N/A N/A | Level No Coverage |
| Vascor | Angina | 2 years | Modified |
| Vaseretic | Hypertension CHF | N/A N/A | Level No Coverage |
| Vasotec | Hypertension CHF | N/A N/A | Level No Coverage |
| Velcade | Cancer | 3 years Current Use | Modified No Coverage |
| Ventolin | Asthma COPD / Emphysema | N/A N/A | Level Graded |
| Vepisid | Cancer | 3 years Current Use | Modified No Coverage |
| Verapamil | Hypertension | N/A | Level |
| Vesanoid | Cancer | 3 years Current Use | Modified No Coverage |
| Viadur | Cancer | 3 years Current Use | Modified No Coverage |
| Viaspan | Organ / Tissue Transplant | N/A | No Coverage |
| Victrelis | Liver Disorder | N/A | Graded |
| Vidaza | Cancer | 3 years | Modified |
| Videx | AIDS | N/A | No Coverage |
| Vinblastine Sulfate | Cancer | 3 years Current Use | Modified No Coverage |
| Vincasar PFS | Cancer | 3 years Current Use | Modified No Coverage |
| Vincristine Sulfate | Cancer | 3 years Current Use | Modified No Coverage |
| Vinorelbine Tartrate | Cancer | 3 years Current Use | Modified No Coverage |
| Viracept | AIDS | N/A | No Coverage |
| Viramune | AIDS | N/A | No Coverage |
| Viread | AIDS | N/A | No Coverage |
| Visken | Hypertension CHF | N/A N/A | Level No Coverage |
| Vistide | AIDS | N/A | No Coverage |
| Vivitrol | Alcohol / Drugs | 2 years | Modified |
| Votrient | Cancer | 3 years Current Use | Modified No Coverage |
| Vumon | Cancer | 3 years Current Use | Modified No Coverage |

| Medication | Indication | Rx Fill Within | Benefit Eligibility |
|-------------------|----------------------------|------------------------|----------------------------|
| Warfarin | Cardiac Valve Replacement | 2 years | Modified |
| | TIA/Stroke | 2 years | Modified |
| | Pulmonary Embolism | N/A | Level |
| | Thrombosis | N/A | Level |
| Xeloda | Cancer | 3 years Current Use | Modified No Coverage |
| Xgeva | Cancer | 3 years Current Use | Modified No Coverage |
| Xopenex | Asthma COPD / Emphysema | N/A N/A | Level Graded |
| Zanosar | Cancer | 3 years Current Use | Modified No Coverage |
| Zantac | Stomach Disorder | N/A | Level |
| Zaroxolyn | Hypertension | N/A | Level |
| | CHF | N/A | No Coverage |
| Zebeta | Hypertension | N/A | Level |
| | CHF | N/A | No Coverage |
| Zelapar | Parkinson's | N/A | Graded |
| Zenapax | Organ / Tissue Transplant | N/A | No Coverage |
| Zemplar | Kidney Dialysis | 1 year | No coverage |
| | Kidney Disease/Failure | N/A | Graded |
| | Diabetic Nephropathy | 2 years | Modified |
| Zerit | AIDS | N/A | No Coverage |
| Zestoretic | Hypertension | N/A | Level |
| | CHF | N/A | No Coverage |
| Zestril | Hypertension | N/A | Level |
| | CHF | N/A | No Coverage |
| Zevalin Y-90 | Cancer | 3 years Current Use | Modified No Coverage |
| | | | |
| Ziac | Hypertension | N/A | Level |
| | CHF | N/A | No Coverage |
| Ziagen | AIDS | N/A | No Coverage |
| Zidovudine | AIDS | N/A | No Coverage |
| Zinecard | Cancer | 3 years Current Use | Modified No Coverage |
| | | | |
| Zocor | Cholesterol | N/A | Level |
| Zofran | Cancer | 3 years Current Use | Modified No Coverage |
| | | | |
| Zoladex | Cancer | 3 years Current Use | Modified No Coverage |
| | | | |
| Zolinza | Cancer | 3 years Current Use | Modified No Coverage |
| | | | |
| Zoloft | Depressive Disorder | N/A | Level |
| Zometa | Cancer | 3 years Current Use | Modified No Coverage |
| | | | |
| Zortress | Organ / Tissue Transplant | N/A | No Coverage |
| Zuplenz | Cancer | 3 years Current Use | Modified No Coverage |
| | | | |
| Zyprexa | Psychotic Disorder | N/A | Level |