

FORMULARY UPDATES

Effective October 8, 2007

Alameda Alliance for Health Pharmacy & Therapeutics (P & T) Committee Decisions – September 6, 2007

The Alameda P & T committee reviewed the efficacy, safety, cost and utilization profiles of the following therapeutic categories at the September 6, 2007 meeting:

- Diabetes
- Hepatitis B
- Urinary Disorders
- Gastrointestinal Disorders
- Erythropoietin Stimulating Agents

*The Pharmacy & Therapeutics Committee has approved the following modifications:

Generic Name	Brand Name	Strength	Dosage Form	Committee Actions
Insulin Glargine	Lantus	All	Vials only	Add to Formulary. QL= 20 (2vials) per 30 days
Glimepiride	Amaryl	All	Tablets	Add all strengths to Formulary.
Glyburide micronized	Glynase	All	Tablets	Add all strengths to Formulary.
Glyburide/Metformin	Glucovance	All	Tablets	Add to Formulary. QL= 60 per 30 days. (No QL on 5/500mg strength)
Glucagon	Glucagen vial, kit	All	Kit	Add to Formulary with QL= 1 per Rx and 3kits/year
Pioglitazone	Actos	All	Tablets	Add to Formulary with Stepedit for metformin, sulfonylurea OR Avandia. QL= 30 per 30 days
Pioglitazone/Metformin	ActoPlusMet	All	Tablets	Add to Formulary with Stepedit for metformin, Avandia, Actos or Avandamet. QL= 30 per 30 days
Rosiglitazone	Avandia	All	Tablets	Add QL= 60 per 30 days to mg & 4mg strengths; QL= 30 per 30 days
Rosiglitazone/Metformin	Avandamet	All	Tablets	Add QL= 60 per 30 days on all strengths

Generic Name	Brand Name	Strength	Dosage Form	Committee Actions
Adefovir	Hepsera	All	Tablets	Add to Formulary with Step-edit for ANY Hepatitis B drug within past 90 days.
Potassium Citrate	Urocit-K	5MEQ	Tablets	Add to Formulary; QL= 60 per 30days
Potassium Citrate	Urocit-K	10MEQ	Tablets	Add to Formulary; QL= 120 per 30days
Finasteride, Tamsulosin	Proscar, Flomax	All	Tablets, Capsules	Add to Formulary with Step-edit for terazosin/ doxazosin or finasteride/ Flomax within past 90 days. QL= 30 per 30 days
Oxybutynin extended-release	Ditropan XL	All	Tablets	Add to Formulary with Step-edit for oxybutynin immediate-release. QL= 30 per 30 days.
Ranitidine	Zantac	All	Capsules	Add Generic to formulary
Polyethylene Glycol	Miralax	All	Powder/ packets	Remove from formulary since Miralax OTC is available on formulary.

***Note: Drugs removed from the formulary will be grandfathered for all utilizing members.**