

Rx3 Drug List

Effective January 1, 2009

Level One – Lowest copayment for low cost generic drugs.

Level Two – Higher copayment for higher cost brand-name drugs.

Level Three – Highest copayment for higher cost drugs. These drugs may have generic or brand-name alternatives in Levels One or Two.

Listed below in alphabetical order are commonly prescribed drugs for each level. This is not a complete list. If there is a prescription drug that is not on this list, go to **Humana.com** or call the Customer Service phone number on the back of your ID card to see if it's covered and into what level it falls.

Note: The drugs in **BOLD TYPE** are generic drugs. The drugs in regular type are brand-name drugs.

Drugs listed with a ^{QL} have dispensing limitations. Please refer to the Quantity Limitations section in this document.

IR = immediate release, SR = sustained release, ER = extended release

Level One – Generic Drugs

| | | |
|--|----------------------------------|---|
| ACETAMINOPHEN W/CODEINE ^{QL} | DICYCLOMINE | ISOSORBIDE DINITRATE |
| ACYCLOVIR | DILTIA XT ^{QL} | ISOSORBIDE MONONITRATE |
| ALBUTEROL ^{QL} | DOXAZOSIN | JOLESSA ^{QL} |
| ALLOPURINOL | DOXEPIN | LEFLUNOMIDE ^{(1) QL} |
| ALPRAZOLAM | DOXYCYCLINE | LEVOTHROID |
| AMITRIPTYLINE | ENALAPRIL | LEVOTHYROXINE SODIUM |
| AMLODIPINE BESYLATE ^{QL} | ERYTHROMYCIN | LEVOXYL |
| AMOXICILLIN | ESTRADIOL | LISINOPRIL |
| AMPHETAMINE Salts ^{QL} | ESTROPIPATE | LISINOPRIL HCTZ |
| ATENOLOL | FENOPROFEN | LORAZEPAM |
| AZITHROMYCIN | FENTANYL ^{QL} | LOVASTATIN ^{QL} |
| BENZONATATE | FEXOFENADINE HCL ^{QL} | MEDROXYPROGESTERONE |
| BENAZEPRIL | FLUCONAZOLE ^{QL} | MELOXICAM ^{QL} |
| BENAZEPRIL HCTZ | FLUNISOLIDE ^{QL} | MERCAPTOPYRINE |
| BUDEPRION XL ^{QL} | FLUOXETINE ^{QL} | METFORMIN IR,ER |
| BUPROPION IR, SR | FLURBIPROFEN | METHYLPHENIDATE |
| BUTALBITAL/APAP/CAFFEINE ^{QL} | FLUTICASONE | METHYLPREDNISOLONE |
| BUTORPHANOL NASAL SPRAY ^{QL} | FOLIC ACID, 1 mg | METOCLOPRAMIDE |
| CAPTOPRIL | FOSINOPRIL | METOPROLOL |
| CARBIDOPA/LEVODOPA | FUROSEMIDE | METRONIDAZOLE |
| CARISOPRODOL | GABAPENTIN ^{QL} | MINOCYCLINE |
| CARTIA XT ^{QL} | GEMFIBROZIL ^{QL} | MIRTAZAPINE |
| CEPHALEXIN | GLIPIZIDE | NABUMETONE |
| CIMETIDINE, prescription strength | GLIPIZIDE ER | NAPROXEN, prescription strength |
| CIPROFLOXACIN | GLYBURIDE | NECON |
| CITALOPRAM HBR ^{QL} | GLYBURIDE/METFORMIN | NEOMYCIN/POLYMYXIN/HC |
| CLARAVIS ^{QL} | GLYBURIDE MICRONIZED | NIFEDIPINE, immediate release |
| CLINDAMYCIN | HYDROCODONE | NITROGLYCERIN |
| CLONAZEPAM | W/ACETAMINOPHEN ^{QL} | NORTRIPTYLINE |
| CLONIDINE | HYDROCHLOROTHIAZIDE | NYSTATIN |
| CYCLOBENZAPRINE | HYDROXYZINE | ONDANSETRON HCL ^{QL} |
| DESMOPRESSIN INJ. | HYOSCYAMINE | ORAMORPH ^{QL} |
| DEXAMETHASONE | IBUPROFEN, prescription strength | OXYBUTYNIN, immediate release |
| DEXMETHYLPHENIDATE HCL | IMIPRAMINE | OXYCODONE W/ACETAMINOPHEN ^{QL} |
| DIAZEPAM | INDAPAMIDE | PAROXETINE ^{QL} |
| DICLOFENAC | INDOMETHACIN | PENICILLIN |

Level One – Generic Drugs *(continued)*

PENTOXIFYLLINE
POTASSIUM CHLORIDE
PRAVASTATIN ^{QL}
PREDNISOLONE
PREDNISON
PROMETHAZINE
PROMETHAZINE W/CODEINE
PROPOXYPHENE W/APAP ^{QL}
PROPRANOLOL
QUASENSE ^{QL}
QUINAPRIL ^{QL}
RANITIDINE
RIBAPAK ^{(1) QL}

RIBASPHERE ^{(1) QL}
RIBAVIRIN ^{(1) QL}
SERTRALINE ^{QL}
SIMVASTATIN ^{QL}
SPIRONOLACTONE
SULFAMETHOXAZOLE/
TRIMETHOPRIM
SULFASALAZINE ^{QL}
SULINDAC
TAMOXIFEN
TEMAZEPAM ^{QL}
TERAZOSIN
THEOPHYLLINE

TIMOLOL
TIZANIDINE
TOLMETIN
TORSEMIDE
TRAMADOL HCL ^{QL}
TRAZODONE
TRIAMCINOLONE CREAM
TRIAMTERENE W/HCTZ
TRIAZOLAM ^{QL}
TRINESSA ^{QL}
VERAPAMIL IR, SR ^{QL}
WARFARIN
ZOLPIDEM ^{QL}

Level Two – Brand-Name Drugs

ABILIFY DISCMELT ^{QL}
ACCU-CHEK TEST STRIPS ^{QL}
ACTOPLUS MET ^{QL}
ACTOS ^{QL}
ADVAIR ^{QL}
ADVICOR ^{QL}
AGGRENOX
ALPHAGAN
ALUPENT ^{QL}
ANALPRAM HC ^{QL}
ANDROGEL ^{QL}
ARICEPT ^{QL}
AROMASIN ^{QL}
ASACOL ^{QL}
ASMANEX ^{QL}
ASTELIN ^{QL}
AUGMENTIN XR
AVALIDE ^{QL}
AVANDAMET ^{QL}
AVANDARYL ^{QL}
AVANDIA ^{QL}
AVAPRO ^{QL}
AVINZA ^{QL}
AVODART ^{QL}
AZMACORT ^{QL}
BENICAR ^{QL}
BENICAR HCT ^{QL}
CADUET ^{QL}
CANASA ^{QL}
CAPEX
CARDIZEM LA ^{QL}
CATAPRES-TTS ^{QL}
CELLCEPT
CENESTIN
CIPRODEX
CLOBEX
COMBIVENT ^{QL}
COMBIVIR
COMTAN ^{QL}
COREG
COSOPT ^{QL}

COUMADIN
CRESTOR ^{QL}
CYMBALTA ^{QL}
DAYPRO
DETROL
DETROL LA ^{QL}
DIFFERIN
DILANTIN
EFFEXOR XR ^{QL}
EVISTA
EXELON ^{QL}
FLOMAX ^{QL}
FLOVENT ^{QL}
FORADIL ^{QL}
FORTAMET ^{QL}
GEODON ^{QL}
INNOPRAN XL
KADIAN ^{QL}
LANTUS
LESCOL ^{QL}
LESCOL XL ^{QL}
LEVAQUIN ^{QL}
LEVEMIR
LEXAPRO ^{QL}
LIPITOR ^{QL}
LODINE XL
LUMIGAN ^{QL}
MAXAIR ^{QL}
MENOSTAR ^{QL}
METROGEL
METROLOTION
NAMENDA ^{QL}
NASONEX ^{QL}
NIASPAN
NOVOLIN
NOVOLOG
NOVOLOG MIX 70/30
NUVARING ^{QL}
ONE TOUCH TEST STRIPS ^{QL}
OPANA ER ^{QL}
ORTHO EVRA ^{QL}

ORTHO TRI CYCLEN LO
OXYCONTIN ^{QL}
OXYTROL
PREMARIN
PREMPHASE
PREMPRO
PREMPRO Low Dose
PROAIR HFA ^{QL}
PROGRAF
PROMETRIUM
PROVENTIL HFA ^{QL}
PULMICORT
PULMICORT FLEXHALER ^{QL}
PULMICORT TURBUHALER ^{QL}
QVAR ^{QL}
RAZADYNE ^{QL}
RAZADYNE ER ^{QL}
RELPAX ^{QL}
REMINYL ^{QL}
RETIN-A MICRO
REYATAZ
RISPERDAL M ^{QL}
RYTHMOL SR
SEREVENT ^{QL}
SEROQUEL ^{QL}
SEROQUEL XR ^{QL}
SINGULAIR ^{QL}
STALEVO
STARLIX
STRIANT
SYNTHROID
TARKA
TILADE ^{QL}
TOBRADEX
TRANSDERM - SCOP ^{QL}
TRAVATAN ^{QL}
TRICOR ^{QL}
TRUSOPT
TRUVADA
VALTRES ^{QL}
VIGAMOX

Level Two – Brand-Name Drugs (continued)

VIVELLE ^{QL}
XALATAN ^{QL}
XODOL ^{QL}

YAZ
ZYMAR
ZYPREXA ^{QL}

ZYPREXA ZYDIS ^{QL}

Level Three – Brand-Name Drugs

ABILIFY ^{QL}
ACCOLATE ^{QL}
ACCUNEB
ACCUPRIL
ACCURETIC
AC CUTANE ^{QL}
ACEON
ACTIMMUNE ^{(1) (2) QL}
ACTIQ ^{(1) QL}
ACTIVELLA
ACTONEL ^{(1) QL}
ACTONEL WITH CALCIUM ^{(1) QL}
ADALAT CC ^{QL}
ADDERALL ^{QL}
ADDERALL XR ^{QL}
ADOXA ⁽¹⁾
AEROBID ^{QL}
ALCET
ALDACTAZIDE
ALDACTONE
ALESSE
ALFERON N ^{QL}
ALLEGRA ^{(1) QL}
ALLEGRA-D ^{(1) QL}
ALLEGRA ODT ^{(1) QL}
ALORA ^{QL}
ALPROSTADIL
ALTACE ⁽¹⁾
ALTOPREV ^{(1) QL}
AMARYL
AMBIEN ^{(1) QL}
AMBIEN CR ^{(1) QL}
AMERGE ^{QL}
AMEVIVE ^{(1) QL}
AMITIZA ^{QL}
AMRIX ^{(1) QL}
ANALPRAM HC
ANAMANTLE
ANDRODERM ^{QL}
ANTARA ^{(1) QL}
ANZEMET ^{QL}
ARANESP ^{(1) (2) QL}
ARA VA ^{(1) (2) QL}
ARTHROTEC
ARIMIDEX ^{QL}
ARIXTRA ^{(1) QL}
ASCENSIA TEST STRIPS ^{QL}
ATACAND ^{QL}
ATRIPLA
ATROVENT ^{QL}

AUGMENTIN
AVANDARYL ^{QL}
AVELOX ^{QL}
AVONEX ^{(1) QL}
AXERT ^{QL}
AXID
AZILECT ^{QL}
AZOR ^{QL}
AZULPHIDINE ^{QL}
BACTROBAN
BARACLUDGE ^{QL}
BECONASE AQ ^{(1) QL}
BENZA CLIN
BETASERON ^{(1) (2) QL}
BIAXIN
BIAXIN XL
BIDIL ^{QL}
BONIVA ^{(1) QL}
BRAVELLE
BROVANA ^{QL}
BUPROBAN
BUPROPION HCL SR
BUSPAR
BYETTA ^{(1) QL}
BYSTOLIC ^{(1) QL}
CALAN SR
CALOMIST ^{QL}
CARBATROL ^{QL}
CARDENE SR ^{QL}
CARDIZEM
CARDIZEM CD
CARDURA
CAVERJECT
CEFTIN
CEFZIL
CELEBREX ^{QL}
CELEXA ^{QL}
CERUMENEX
CETROTIDE
CHANTIX
CHLOMIPHENE CITRATE
CIALIS
CIPRO
CIPRO XR ^{QL}
CLARINEX ^{(1) QL}
CLARINEX-D ^{(1) QL}
CLEOCIN T 1% GEL
CLEOCIN T 1% PLEDGETS
CLEOCIN T 1% SOL
CLIMARA ^{QL}

CLINDAGEL
CLOMID
CLOZARIL
COLAZAL ^{QL}
COMBIGAN ^{QL}
COMBIPATCH ^{QL}
CONCERTA ^{QL}
COPAXONE ^{(1) (2) QL}
COPEGUS ^{(1) QL}
COREG CR ^{(1) QL}
COVERA-HS ^{QL}
COZAAR ^{QL}
CRINONE
DARVOCET
DAYTO-HIMBIN
DAYTRANA ^{QL}
DDAVP ^{QL}
DEMADEX
DENAVIR
DEPAKOTE
DEPAKOTE ER ^{QL}
DEPAKOTE SPRINKLE
DESOGEN
DEXEDRINE ^{QL}
DIFLUCAN ^{QL}
DILACOR XR
DIOVAN ^{QL}
DIOVAN HCT ^{QL}
DIPENTUM ^{QL}
DIPROLENE
DITROPAN XL ^{QL}
DIVIGEL
DORYX ⁽¹⁾
DOSTINEX ^{QL}
DRISDOL
DUETACT ^{QL}
DURABAC
DURAGESIC ^{QL}
DYAZIDE
DYNACIN
DYNACIRC CR ^{QL}
EFFEXOR
EDEX
ELIDEL
ELIGARD ^{(1) QL}
ELMIRON
ELOCON
EMEND ^{QL}
EMLA
EMSAM

Level Three – Brand-Name Drugs (continued)

ENABLEX^{QL}
ENBREL^{(1) (2) QL}
ENDOMETRIN
EPOGEN^{(1) (2) QL}
ERYTHROCIN
ESTRACE
ESTRADERM^{QL}
ESTRASORB^{QL}
ESTRATEST
ESTRING^{QL}
ESTROGEL^{QL}
EXIADE^{(1) QL}
EXELON^{QL}
EXFORGE^{QL}
EXUBERA^{(1) QL}
FACTIVE^{QL}
FAMVIR^{QL}
FEMARA^{QL}
FEMRING^{QL}
FENOGLIDE^{(1) QL}
FENTANYL CITRATE^{(1) QL}
FENTORA^{(1) QL}
FIRST PROGESTERONE VGS 25
FIRST PROGESTERONE VGS 50
FIRST PROGESTERONE VGS 100
FLAGYL
FLAGYL ER
FLECTOR^{(1) QL}
FLEXERIL
FLONASE^{QL}
FLOXIN^{QL}
FLUMIST
FOCALIN
FOCALIN XR^{QL}
FOLLITROPIN ALPHA, RECOMB
FOLLITROPIN BETA, RECOMB
FOLLISTIM AQ
FOLTZ
FORTEO^{(1) (2)}
FOSAMAX^{QL}
FOSAMAX PLUS D^{(1) QL}
FOSRENOL⁽¹⁾
FRAGMIN^{(1) (2) QL}
FREESTYLE TEST STRIPS^{QL}
FROVA^{QL}
FUZEON^{QL}
GABITRIL^{QL}
GAMUNEX⁽¹⁾
GANIRELIX ACETATE
GENOTROPIN^{(1) (2) QL}
GONAL-F
GONAL-FRFF
GLEEVEC^{(1) QL}
GLUCOPHAGE
GLUCOPHAGE XR^{QL}
GLUCOTROL XL
GLUCOVANCE
GLUMETZA⁽¹⁾
HCG ALPHA, RECOMBINANT
HUMALOG
HUMALOS MIX 50/50
HUMALOG MIX 75/25
HUMATROPE^{(1) (2) QL}
HUMIRA^{(1) (2) QL}
HUMULIN
HYLAGAN^{(1) QL}
HYTRIN
HYZAAR^{QL}
IMITREX^{QL}
INCRELEX^{(1) QL}
INDERAL
INDERAL LA
INOVA
INTAL INHALER^{QL}
INTELENCE^{QL}
INTRON A^{(1) (2) QL}
INVEGA^{(1) QL}
IPLEX^{(1) QL}
IRESSA^{QL}
ISENTRESS^{QL}
JANUMET^{(1) QL}
JANUVIA^{(1) QL}
K-DUR
KEFTAB
KEPPRA^{QL}
KETEK
KINERET^{(1) (2) QL}
KLONOPIN TABLETS
KLONOPIN WAFERS
KUVAN^{(1) QL}
KYTRIL^{QL}
LAMICTAL^{QL}
LAMISIL^{QL}
LANOXIN
LASIX
LETAIRIS^{(1) QL}
LEUPROLIDE ACETATE (POWDER)⁽¹⁾
LEVITRA
LIALDA^{QL}
LIPOFEN^{(1) QL}
LOFIBRA^{(1) QL}
LOESTRIN FE
LORCET
LORTAB
LOTENSIN
LOTENSIN HCT
LOTREL^{QL}
LOTRISONE
LOTRONEX^{QL}
LOVENOX^{QL}
LUVERIS
LUVOX CR^{QL}
LUNESTA^{(1) QL}
LUPRON DEPOT^{(1) QL}
LUXIQ
LYBREL
LYNOX
LYRICA^{(1) QL}
MACROBID
MAGNACET^{QL}
MAVIK
MAXALT^{QL}
MAXALT MLT^{QL}
MAXZIDE
MAXZIDE 25
MEGACE ES⁽¹⁾
MENOPUR
METADATE CD^{QL}
METADATE ER
METAGLIP
METROCREAM
METROGEL VAGINAL
MEVACOR^{QL}
MIACALCIN^{(1) QL}
MICARDIS^{QL}
MIGRANAL NASAL SPRAY
MINOCIN
MINOTROPINS
MIRAPEX⁽¹⁾
MIRCETTE
MOBIC^{QL}
MONOPRIL
MONOPRIL HCT
MS CONTIN^{QL}
MUSE
NAPRELAN
NAPROSYN
NASACORT AQ^{(1) QL}
NASAREL^{(1) QL}
NEORAL SOFTGEL
NEULASTA^{(1) QL}
NEUPOGEN^{(1) QL}
NEUPRO^{QL}
NEURONTIN^{QL}
NEXAVAR^{(1) QL}
NICOTINE NS
NICOTROL
NIZORAL
NOLVADEX
NORCO
NORDITROPIN^{(1) (2) QL}
NORDITROPIN AQ^{QL}
NORDITROPIN NORDIFLEX^{(1) QL}
NORVASC^{QL}
NORITATE
NOROXIN^{QL}
NOXAFIL⁽¹⁾
NUTROPIN^{(1) (2) QL}
NUTROPIN AQ^{(1) QL}
OGEN
OMNARIS^{(1) QL}

Level Three – Brand-Name Drugs (continued)

OMNICEF
OMNITROPE ⁽¹⁾ QL
OPANA
OPTASE
ORACEA ⁽¹⁾ QL
ORAPRED ODT
ORTHO-PREFEST
ORTHO TRI-CYCLEN
ORTHO-CEPT
ORTHO-CYCLEN
ORTHO-NOVUM
OVIDREL
OXYIR
PANIXINE
PARLODEL
PATANASE QL
PAXIL
PAXIL CR QL
PEGAYSYS ⁽¹⁾ ⁽²⁾ QL
PEG-INTRON ⁽¹⁾ ⁽²⁾ QL
PENTASA
PEPCID
PERCOCET
PERCODAN
PEXEVA QL
PLAN B QL
PLAQUENIL
PLAVIX QL
PLENDIL QL
PLETAL
PRAVACHOL QL
PRAVIGARD PAC QL
PRECISON TEST STRIPS QL
PRED FORTE
PRINIVIL
PRINZIDE QL
PRISTIQ ⁽¹⁾ QL
PROCARDIA XL QL
PROCHIEVE
PROCRIT ⁽¹⁾ ⁽²⁾ QL
PROGESTERONE
PROGESTERONE, MICRONIZED
PROLASTIN ⁽¹⁾ QL
PROLEUKIN ⁽¹⁾
PROSCAR QL
PROTOPIC
PROVENTIL
PROVIGIL ⁽¹⁾ QL
PROZAC QL
PROZAC WEEKLY QL
PULMOZYME QL
PURINETHOL
PYLERA ⁽¹⁾ QL
QUALAQUIN ⁽¹⁾ QL
RANEXA ⁽¹⁾ QL
RANICLOR
RAPAMUNE
RAPTIVA ⁽¹⁾ ⁽²⁾ QL
REGRANEX
REBETRON ⁽¹⁾ QL
REBIF ⁽¹⁾ ⁽²⁾ QL
RELAFEN
RELENZA QL
REMODULIN ⁽¹⁾ QL
REMERON
REVELA ⁽¹⁾ QL
REPRONEX
REQUIP QL
RESTORIL
RETIN-A
REVLIMID ⁽¹⁾ QL
RHINOCORT AQUA QL
RIBATAB ⁽¹⁾ QL
RILUTEK
RIOMET QL
RISPERDAL QL
RITALIN
RITALIN LA QL
RITUXAN ⁽¹⁾ QL
ROFERON-A ⁽¹⁾ ⁽²⁾ QL
ROSANIL
ROWASA QL
ROZEREM ⁽¹⁾ QL
SAIZEN ⁽¹⁾ ⁽²⁾ QL
SALEX
SANCTURA QL
SANCTURA XR QL
SANDOSTATIN ⁽¹⁾
SANDOSTATIN LAR DEPOT ⁽¹⁾
SARAFEM QL
SEASONALE QL
SEASONIQUE QL
SELZENTRY ⁽¹⁾ QL
SENSIPAR QL
SEROPHENE
SEROSTIM ⁽¹⁾ ⁽²⁾ QL
SILDENAFIL CITRATE
SIMCOR ⁽¹⁾ QL
SKELAXIN QL
SOLIRIS QL
SOLODYN ⁽¹⁾
SOLTAMOX
SOMA ⁽¹⁾ QL
SOMATULINE DEPOT ⁽¹⁾ QL
SONATA ⁽¹⁾ QL
SPIRIVIA ⁽¹⁾ QL
SPORANOX ⁽¹⁾ QL
SPORANOXSTADOL NASAL SPRAY QL
SPRYCEL ⁽¹⁾ QL
STRATTERA QL
SULAR QL
SUTENT ⁽¹⁾ QL
SYMBYAX QL
SYMLINPEN 60 ⁽¹⁾ ⁽²⁾ QL
SYNAGIS ⁽¹⁾ QL
TACLONEX ⁽¹⁾ QL
TAMIFLU QL
TARCEVA ⁽¹⁾ QL
TASIGNA ⁽¹⁾ QL
TAZORAC
TEGRETOL XR QL
TEKTRUNA ⁽¹⁾ QL
TEKTRUNA HCT ⁽¹⁾ QL
TENORMIN
TEQUIN
TERAZOL 3
TESTIM QL
TEVETEN QL
TEVETEN HCT QL
TEV-TROPIN ⁽¹⁾ ⁽²⁾ QL
TEV-TROPINTIAZAC Q
TIMOPTIC PLUS DROP
TIMOPTIC-XE
THALOMID ⁽¹⁾ QL
TOBI ⁽¹⁾ QL
TOPAMAX QL
TOPROL XL
TRACLEER ⁽¹⁾ QL
TRELSTAR ⁽¹⁾ QL
TRIGLIDE QL
TRILEPTAL
TRIPHASIL
TUSSICAPS QL
TYKERB ⁽¹⁾ QL
TYLENOL
TYLOX
TYZEKA QL
ULTRAM ⁽¹⁾ QL
ULTRAM ER ⁽¹⁾ QL
UNIRETIC
UNIVASC
UROFOLLITROPIN
UROXATRAL QL
VALIUM
VANCOCIN QL
VASERETIC
VASOTEC
VECTIBIX ⁽¹⁾
VENTAVIS ⁽¹⁾ QL
VENTOLIN QL
VERAMYST ⁽¹⁾ QL
VERELAN PM QL
VESICARE QL
VFEND ⁽¹⁾ QL
VIADUR ⁽¹⁾ QL
VIAGRA
VICODEN
VICODEN ES
VICOPROFEN QL
VIDAZA ⁽¹⁾
VIVELLE-DOT QL

Level Three – Brand-Name Drugs *(continued)*

| | | |
|-----------------------------|---------------------------|---------------------------------|
| VIVITROL ⁽¹⁾ | YASMIN | ZODERM |
| VOLTAREN | YOCON | ZOFRAN ^{QL} |
| VOLTAREN-XR | YOHIMBINE HCL | ZOFRAN ODT ^{QL} |
| VUSION | ZADITOR | ZOLADEX ^{(1) QL} |
| VYVANSE ^{QL} | ZANAFLEX ⁽¹⁾ | ZOLINZA ^{(1) QL} |
| VYTORIN ^{QL} | ZANTAC | ZOLOFT ^{QL} |
| WELLBUTRIN ^{QL} | ZEBUTAL | ZOMIG ^{QL} |
| WELLBUTRIN SR ^{QL} | ZEGERID ^{(1) QL} | ZOMIG NASAL SPRAY ^{QL} |
| WELLBUTRIN XL ^{QL} | ZEMAIRA ^{(1) QL} | ZOMIG ZMT ^{QL} |
| XANAX | ZESTORETIC | ZONEGRAN |
| XANAX XR | ZESTRIL | ZORBIVIVE ^{QL} |
| XIFAXAN ⁽¹⁾ | ZETIA ^{QL} | ZYBAN |
| XOLAIR ^{(1) QL} | ZIAC | ZYFLO ^{QL} |
| XOPENEX | ZIANA ⁽¹⁾ | ZYRTEC |
| XOPENEX HFA ^{QL} | ZITHROMAX ^{QL} | ZYVOX ^{QL} |
| XYREM | ZMAX ^{QL} | |
| XYZAL ^{(1) QL} | ZOCOR ^{QL} | |

- ⁽¹⁾ Prior authorization: before coverage for the drugs requiring prior authorization is extended, your physician must obtain prior authorization from Humana. Unless your physician requests and receives this approval from Humana, your prescription may not be covered. To request prior authorization, your physician should call our clinical hot line at 1-800-555-2546.
- ⁽²⁾ Check plan benefits for coverage of self-injectable medications.