

**ATTACHMENT No. 1 to EXHIBIT C**

**PRESCRIPTION MEDICATION**

**1. Exceptions to Group Restricted Medications for Member Refills**

This section provides a list of medications Group shall allow for Member prescription refills. Member prescription refills shall be verified through Health Plans provider portal. Guidelines to allow for Member prescription refills for medications listed below shall be as follows (Reference Attachment No. 2 to Exhibit D, Process Flow):

- a. Health Plan’s Nurse Advice Line shall confirm patient is prescribed, stable, is due for refill and has a primary care physician follow-up.
- b. Group shall conduct a virtual visit.
- c. Group shall have the option to verify Member prescription on Health Plan’s portal.
- d. Group shall utilize e-script and prescribe a 30 day refill.

Below is the list of refill medications that are permissible to be transmitted through the system.

<b>Brand Name</b>	<b>Generic Name</b>	<b>Classification</b>
Buspar	Buspirone	Anti Anxiety
Celexa	Citalopram	Antidepressant
Climara	Estradiol	Hormone Replacement
Cymbalta	Duloxetine	Antidepressant/Antianxiety/Neuropathic Pain
Desyrel	Trazodone	Sleep Disorder/Depression
Effexor	Venlafaxine	Antidepressant
Elavil	Amitriptyline	Antidepressant
Lexapro	Escitalopram	Antidepressant
Luvox	Fluvoxamine	OCD
Paxil	Paroxetine	Antidepressant
Premarin	Estrogen	Hormone Replacement
Pristiq	Desvenlafaxine	Antidepressant
Provera	Medroxyprogesterone	Hormone Replacement
Prozac	Fluoxetine	Antidepressant
Wellbutrin	Bupropion	Antidepressant
Zoloft	Sertraline	Antidepressant/OCD

## 2. Group Restricted Medications for Member New Starts

Group prescription policy does not permit physicians to prescribe any scheduled drug due to the potential for abuse and need for direct supervision.

Furthermore, Group does not prescribe medications in the following classes: muscle relaxants, psychiatric medications including antidepressants, erectile dysfunction medications, pseudoephedrine, Neurontin, no lifestyle medications, immunosuppressive modulators, antiviral medications to treat or prevent HIV, and medical marijuana.

Group does not initiate any hormonal therapy including birth control, however, can provide a refill, per its policy, for a female patient with ongoing hormonal therapy (ex. birth control, menopause) without any lapse in their prescription.

Below is not an exhaustive list of restricted medications but is a quick reference to the most common medications that are not permissible to be transmitted through the system.

Brand Name	Generic Name	Classification
Abilify	Aripiprazole	Antidepressant
Adderall	Dextroamphetamine Saccharate	ADHD
Adipex	Phentermine	Appetite Suppressant
Ambien	Zolpidem	Insomnia
Arava	Leflunomide	Immunosuppressant
Ativan	Lorazepam	Anxiety/Seizures
Bromfed Dm	Brompheniramine	Antihistamine
Buspar	Buspirone	Anti-Anxiety
Celexa	Citalopram	Antidepressant
Cialis	Tadalafil	Erectile Dysfunction
Climara	Estradiol	Hormone Replacement
Clozaril	Clozapine	Antipsychotic
Cymbalta	Duloxetine	Antidepressant/Antianxiety/Neuropathic Pain
Desyrel	Trazodone	Sleep Disorder/Depression
Effexor	Venlafaxine	Antidepressant
Elavil	Amitriptyline	Antidepressant
Enbrel	Etanercept	Immunomodulator
Fanapt	Iloperidone	Antipsychotic
Fioricet	Butalbital/Acetaminophen/Caffeine	Pain Relief For Migraines
Flexeril	Cyclobenzaprine	Backache/Muscle Ache
Focalin	Dexemethylphenidate	Attention Deficit Disorder
Geodon	Ziprasidone	Antipsychotic
Humira	Adalimumab	Immunosuppressant
Imovane	Zopiclone	Insomnia
Imuran	Azathioprine	Immunosuppressant
Intuniv	Guanfacine	ADHD/Hypertension