

# 2010

Effective January 1, 2010



BlueCross BlueShield  
of Illinois

## Blue Cross and Blue Shield of Illinois Formulary Updates

### Formulary Updates Summary

As a result of the last Pharmacy and Therapeutics Committee meeting, the following changes will be made to the Blue Cross and Blue Shield of Illinois Formulary:

#### New Brand Medications / Products Added to the Formulary

Brand Name	Generic Name	Date Added
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#### New Generic Medications / Products Added to the Formulary

Generic Name	Reference Brand Name	Date Added
bicalutamide	Casodex	January-10
clonidine transdermal patch	Catapres-TTS	January-10
lamotrigine	Lamictal Starter Kit	January-10
risperidone orally disintegrating tabs 3 mg, 4 mg	Risperdal M-tabs 3 mg, 4 mg	January-10
carbamazepine extended release 200 mg, 400 mg	Tegretol-XR 200 mg, 400 mg	January-10

#### Brand Medications / Products with Available Generic Removed from the Formulary

Brand Name	Generic Name	Date Removed
Casodex	bicalutamide	January-10
Catapres-TTS	clonidine transdermal patch	January-10
Lamictal Starter Kit	lamotrigine	January-10
Risperdal M-tabs 3 mg, 4 mg	risperidone orally disintegrating tabs 3 mg, 4 mg	January-10
Tegretol-XR 200 mg, 400 mg	carbamazepine extended release 200 mg, 400 mg	January-10

#### Brand Medications / Products Removed from the Formulary

Brand Name	Generic Name	Date Removed
Zovia 1/50	ethynodiol diacetate & ethinyl estradiol	January-10

Revised October 2009