



FULTON COUNTY

July 6, 2016

Re: 17RFP07012016B-BR Inmate Medical Services

Dear Proposers:

Attached is one (1) copy of Addendum #1, hereby made a part of the above-referenced Request for Proposal (RFP).

Except as provided herein, all terms and conditions in the RFQ referenced above remain unchanged and in full force and effect.

Sincerely,

Brian Richmond

APA

RFP# 17RFP07012016B-BR Inmate Medical Services
Addendum #1
July 6, 2016

This Addendum forms a part of the contract documents and **modifies** the original RFP documents as noted below:

The documents following this page are to be considered part of the RFP proposal package. They consist of the following:

- 1st document are the insurance requirements for this project
- 2nd Document Appendix 1
- 3rd Document Appendix 2
- 4th Document Appendix 3
- 5th Document Appendix 4
- 6th Document Appendix 5

**ACKNOWLEDGEMENT OF ADDENDUM NO. 1,
17RFP07012016B-BR Inmate Medical Services.**

The undersigned Proposer acknowledges receipt of this Addendum by returning one (1) copy of this form with the proposal submittal package to the Department of Purchasing & Contract Compliance, Fulton County Public Safety Building, 130 Peachtree Street, S.W., Suite 1168, Atlanta, Georgia 30303 by the RFP due date and time of Monday, August 8, 2016 11:00 AM.

This is to acknowledge receipt of Addendum No. 1, _____ day of _____, 2016.

Legal Name of Bidder

Signature of Authorized Representative

Title

RFP# 17RFP07012016B-BR Inmate Medical Services
Addendum #1
July 6, 2016

SECTION 7 INSURANCE AND RISK MANAGEMENT PROVISIONS

Insurance and Risk Management Provisions In-mate Medical Services

The following is the minimum insurance and limits that the Contractor/Vendor must maintain. If the Contractor/Vendor maintains higher limits than the minimum shown below, Fulton County Government requires and shall be entitled to coverage for the higher limits maintained by the Contractor/Vendor.

It is Fulton County Government's practice to obtain Certificates of Insurance from our Contractors and Providers. Insurance must be written by a licensed agent in a company licensed to write insurance in the State of Georgia, with an A.M. Best rating of at least A- VI, subject to final approval by Fulton County. A letter from an insurance carrier stating that upon your firm/company being the successful Bidder/Respondent that a Certificate of Insurance shall be issued in compliance with the Insurance and Risk Management Provisions outlined below.

Evidence of insurance must be provided to Fulton County Government prior to the start of any activities/services as described in the Contract document(s). Any and all Insurance Coverage(s) required under the terms and conditions of the contract shall be maintained during the entire length of the contract, including any extensions or renewals thereto, and until all work has been completed to the satisfaction of Fulton County Government.

Accordingly the Contractor/Provider shall provide a certificate evidencing the following:

1. WORKERS COMPENSATION/EMPLOYER'S LIABILITY INSURANCE – STATUTORY (In compliance with the Georgia Workers Compensation Acts and any other State or Federal Acts or Provisions in which jurisdiction may be granted)

Employer's Liability Insurance	BY ACCIDENT	EACH ACCIDENT	\$500,000
Employer's Liability Insurance	BY DISEASE	POLICY LIMIT	\$500,000
Employer's Liability Insurance	BY DISEASE	EACH EMPLOYEE	\$500,000

2. COMMERCIAL GENERAL LIABILITY INSURANCE (Including contractual Liability Insurance)

Bodily Injury and Property Damage Liability (Other than Products/Completed Operations) General Aggregate	Each Occurrence	\$1,000,000
		\$2,000,000
Products\Completed Operation	Aggregate Limit	\$2,000,000
Personal and Advertising Injury	Limits	\$1,000,000
Damage to Rented Premises	Limits	\$100,000

3. BUSINESS AUTOMOBILE LIABILITY INSURANCE

Bodily Injury & Property Damage	Each Occurrence	\$1,000,000
(Including operation of non-owned, owned, and hired automobiles).		

4. UMBRELLA LIABILITY

(In excess of above noted coverages)	Each Occurrence	\$1,000,000
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In-mate Medical Services (Fulton County Jail Facilities)

5. PROFESSIONAL LIABILITY
(Medical Malpractice)

Per Claim/Aggregate \$5,000,000/\$5,000,000

Professional Liability (Medical Malpractice) to be scheduled as underlying coverage, in addition to General Liability, Auto Liability and Employers Liability.

General Liability and Professional Liability (Medical Malpractice) and Umbrella coverage provided on a Claims-made basis, must be kept in force and uninterrupted for a period of three (3) years beyond policy expiration. If coverage is discontinued for any reason during this three (3) year term, Vendor must purchase and evidence full Extended Reporting Period (ERP) coverage.

Certificates of Insurance

Contractor shall provide written notice to Fulton County Government immediately if it becomes aware of or receives notice from any insurance company that coverage afforded under such policy or policies shall expire, be cancelled or altered. Certificates of Insurance are to list Fulton County Government as an Additional Insured (except for Workers' Compensation and Professional Liability) using ISO Additional Insured Endorsement form CG 20 10 (11/85 version), its' equivalent or on a blanket basis.

The Contractor/Vendor insurance shall apply as Primary Insurance before any other insurance or self-insurance, including any deductible, non-contributory, and Waiver of Subrogation provided in favor of Fulton County.

Additional Insured under the General Liability, Auto Liability, Umbrella Policies (with exception of Workers Compensation and Professional Liability), with no Cross Suits exclusion.

If Fulton County Government shall so request, the Respondent, Contractor or Vendor will furnish the County for its inspection and approval such policies of insurance with all endorsements, or confirmed specimens thereof certified by the insurance company to be true and correct copies. Such certificates and notices **must** identify the "Certificate Holder" as follows:

Fulton County Government – Purchasing and Contract Compliance Department
130 Peachtree Street, S.W.
Suite 1168
Atlanta, Georgia 30303-3459

IMPORTANT:

It is understood that neither failure to comply nor full compliance with the foregoing insurance requirements shall limit or relieve the Contractor/Vendor from any liability incurred as a result of their activities/operations in conjunction with the Contract and/or Scope of Work.

Effective 07-05-16

In-mate Medical Services (Fulton County Jail Facilities)

USE OF PREMISES

Contractor/Vendor shall confine its apparatus, the storage of materials and the operations of its workers to limits/requirements indicated by law, ordinance, permits and any restrictions of Fulton County Government and shall not unreasonably encumber the premises with its materials (Where applicable).

PROTECTION OF PROPERTY

Contractor/Vendor will adequately protect its own work from damage, will protect Fulton County Government's property from damage or loss and will take all necessary precautions during the progress of the work to protect all persons and the property of others from damage or loss.

Contractor/Vendor shall take all necessary precautions for the safety of employees of the work and shall comply with all applicable provisions of the Federal, State and local safety laws and building codes to prevent accidents or injury to persons on, about, or adjacent to the premises where work is being performed.

Contractor/Vendor shall erect and properly maintain at all times as required by the conditions and progress of the work, all necessary safeguards for the protection of its employees, Fulton County Government employees and the public and shall post all applicable signage and other warning devices to protect against potential hazards for the work being performed (Where applicable).

THE RESPONDENT ACKNOWLEDGES HAVING READ, UNDERSTANDING, AND AGREES TO COMPLY WITH THE ABOVE STATEMENTS, AND IS AUTHORIZED TO SIGN CONTRACTS ON BEHALF OF THE RESPONDING COMPANY.

COMPANY: _____ SIGNATURE: _____

NAME: _____ TITLE: _____

DATE: _____

Appendix #1



Formulary Drug List - Corizon Health National Formulary

6/14/2016

The attached Formulary includes symbols representing pharmaceutical acquisition costs.

Products which are typically dispensed as individual, solid, oral dosage forms are priced per unit (e.g. capsules, tablets).

Products which are not solid, oral dosage forms and are dispensed as one counted unit will be priced as such (e.g. one tube of cream, one individual injection or vial, one inhaler, one oral liquid bottle).

Products which are typically dispensed as packages are priced per package (e.g. oral contraceptives, manufactured kits, multi-syringe or vial packs).

If you have any questions regarding pharmaceutical pricing, please contact PharmaCorr for clarification.

6705 Camille St; **Oklahoma City**, OK 73149
Toll Free: 888-321-7774 Local: 405-670-1400 Fax: 888-200-7774

6002 Corporate Way, Corporate Cntr North II; B; **Indianapolis**, IN 46278
Toll Free: 800-259-3067 Local: 317-299-3426 Fax: 800-259-3066

Formulary Drug List - Corizon Health National Formulary

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Formulary Drug List - Corizon Health National Formulary

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Formulary Drug List - Corizon Health National Formulary

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Formulary Drug List - Corizon Health National Formulary

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Formulary Drug List - Corizon Health National Formulary

1. Analgesics and Anti-Inflammatories

Acetaminophen Agents (01.01)

APAP 325 MG TABLET	TYLENOL
APAP ELIXIR 160 MG/5 ML ELIXIR	TYLENOL
APAP SUPPOSITORY 650 MG SUPPOSITORY	TYLENOL

Anti-Gout Agents (01.02)

ALLOPURINOL 100 MG TABLET	ZYLOPRIM
ALLOPURINOL 300 MG TABLET	ZYLOPRIM
PROBENECID 500 MG TABLET	BENEMID

Anti-Migraine Agents (01.03)

APAP-ASA-CAFF 250-250-65 MG TABLET	EXCEDRIN MIGRAINE
APAP-ASA-CAFFEINE 250-250-65 MG TABLET	EXCEDRIN MIGRAINE

Narcotic Analgesics / Antagonists (01.04)

CODEINE/APAP 12-120 MG/5 ML ELIXIR	TYLENOL/COD ELIX
CODEINE/APAP 30-300 MG TABLET	TYLENOL W/COD #3
CODEINE/APAP 30-300 MG/12.5 ML ELIXIR	TYLENOL/ COD
CODEINE/APAP 60 MG-300 MG TABLET	TYLENOL W/COD #4
CODEINE/APAP 60-300 MG TABLET	TYLENOL W/COD #4
MORPHINE SULF ER 100 MG TAB SR 12 HR	MS CONTIN
MORPHINE SULF ER 15 MG TAB SR 12 HR	MS CONTIN
MORPHINE SULF ER 30 MG TAB SR 12 HR	MS CONTIN
MORPHINE SULF ER 60 MG TAB SR 12 HR	MS CONTIN
MORPHINE SULFATE 10 MG/ML INJECTION	MORPHINE SULFATE
MORPHINE SULFATE 15 MG TABLET	MSIR
MORPHINE SULFATE 30 MG TABLET	MSIR
MORPHINE SULFATE 4 MG/ML INJECTION	MORPHINE SULFATE
MORPHINE SULFATE ER 100 MG TAB SR 12 HR	MS CONTIN
MORPHINE SULFATE ER 15 MG TAB SR 12 HR	MS CONTIN
MORPHINE SULFATE ER 30 MG TAB SR 12 HR	MS CONTIN
MORPHINE SULFATE ER 60 MG TAB SR 12 HR	MS CONTIN
MORPHINE VIAL 10 MG/ML INJECTION	MORPHINE SULFATE INJ

Neuropathic Pain Agents (01.05)

NORTRIPTYLINE HCL 10 MG CAPSULE	PAMELOR
NORTRIPTYLINE HCL 25 MG CAPSULE	PAMELOR
NORTRIPTYLINE HCL 50 MG CAPSULE	PAMELOR
NORTRIPTYLINE HCL 75 MG CAPSULE	PAMELOR
VENLAFAXINE HCL XR 150 MG CAP SR 24 HR	EFFEXOR XR
VENLAFAXINE HCL XR 37.5 MG CAP SR 24 HR	EFFEXOR XR
VENLAFAXINE HCL XR 75 MG CAP SR 24 HR	EFFEXOR XR

Non-Steroidal Anti-Inflammatory Drugs (NSAIDS) (01.06)

IBUPROFEN 200 MG TABLET	ADVIL
IBUPROFEN 400 MG TABLET	MOTRIN
IBUPROFEN 600 MG TABLET	MOTRIN
INDOMETHACIN 25 MG CAPSULE	INDOCIN
INDOMETHACIN 50 MG CAPSULE	INDOCIN

1. Analgesics and Anti-Inflammatories

MELOXICAM 15 MG TABLET	MOBIC
MELOXICAM 7.5 MG TABLET	MOBIC
NAPROXEN 250 MG TABLET	NAPROSYN
NAPROXEN 375 MG TABLET	NAPROSYN
NAPROXEN 500 MG TABLET	NAPROSYN

Salicylates (01.07)

ASA 325 MG TAB EC	ECOTRIN
ASPIRIN 325 MG TABLET	ASA FC
ASPIRIN 325 MG TABLET	ASPIRIN
ASPIRIN EC 81 MG TAB EC	ECOTRIN

Skeletal Muscle Relaxants (01.08)

Other Analgesics and Anti-Inflammatories (01.09)

HYDROXYCHLOROQUINE 200 MG TABLET	PLAQUENIL
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Formulary Drug List - Corizon Health National Formulary

2. Antihistamines / Decongestants / Antitussives / Expectorants

1st Generation Antihistamines (02.01)

CHLORPHENIRAMINE 4 MG TABLET	CHLORTRIMETON
CHLORPHENIRAMINE MAL 4 MG TABLET	CHLORTRIMETON
CYPROHEPTADINE 4 MG TABLET	PERIACTIN
DIPHENHYDRAMINE SYRG 50 MG/ML INJECTION	BENADRYL
DIPHENHYDRAMINE VIAL 50 MG/ML INJECTION	BENADRYL
HYDROXYZINE HCL VIAL 25 MG/ML INJECTION	VISTARIL INJ
HYDROXYZINE HCL VIAL 50 MG/ML INJECTION	VISTARIL INJ
HYDROXYZINE HCL VL 50 MG/ML INJECTION	VISTARIL
HYDROXYZINE PAMOATE 100 MG CAPSULE	VISTARIL
HYDROXYZINE PAMOATE 25 MG CAPSULE	VISTARIL
HYDROXYZINE PAMOATE 50 MG CAPSULE	VISTARIL

2nd Generation Antihistamines (02.02)

CETIRIZINE HCL 10 MG TABLET	ZYRTEC
CETIRIZINE HCL 5 MG TABLET	ZYRTEC
LORATADINE 10 MG TABLET	CLARITIN

Antitussives (02.03)

Expectorants (02.04)

GUAIFENESIN 100 MG/5 ML SYRUP	ROBITUSSIN PLAIN
GUAIFENESIN 200 MG TABLET	ROBITUSSIN
GUAIFENESIN 400 MG TABLET	MUCUS RELIEF
GUAIFENESIN 400 MG TABLET	TAB TUSSIN

Decongestants (02.05)

PHENYLEPHRINE 10 MG TABLET	SUDAFED PE
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Combination Products (02.06)

GUAIFENESIN DM 400-20 MG TABLET	TAB TUSSIN DM
GUAIFENESIN-DM 100-10/5 ML SYRUP	ROBITUSSIN DM

Formulary Drug List - Corizon Health National Formulary

3. Anti-Infectives

Aminoglycosides (03.01)

GENTAMICIN 100 MG/NS 100ML INJECTION	GARAMYCIN IVPB
GENTAMICIN 120 MG/NS 100 ML INJECTION	GARAMYCIN IVPB
GENTAMICIN 80 MG/NS 100 ML INJECTION	GARAMYCIN IVPB
GENTAMICIN MDV 40 MG/ML INJECTION	GARAMYCIN
GENTAMICIN VIAL 40 MG/ML INJECTION	GARAMYCIN
TOBRAMYCIN MDV 40 MG/ML INJECTION	NEBCIN INJ
TOBRAMYCIN VIAL 80 MG/2 ML INJECTION	NEBCIN INJ

Antifungals (03.02)

CLOTRIMAZOLE 10 MG TROCHE	MYCELEX
FLUCONAZOLE 100 MG TABLET	DIFLUCAN
FLUCONAZOLE 150 MG TABLET	DIFLUCAN
FLUCONAZOLE 200 MG TABLET	DIFLUCAN
FLUCONAZOLE 50 MG TABLET	DIFLUCAN
NYSTATIN 100,000 U/ML SUSPENSION	MYCOSTATIN

Anthelmintics (03.03)

IVERMECTIN TAB 3 MG TABLET	STROMEKTOL
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Antimalarials (03.04)

PYRIMETHAMINE 25 MG TABLET	DARAPRIM
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Antituberculars (03.05)

ETHAMBUTOL HCL 100 MG TABLET	MYAMBUTOL
ETHAMBUTOL HCL 400 MG TABLET	MYAMBUTOL
ISONIAZID 100 MG TABLET	INH
ISONIAZID 300 MG TABLET	INH
PYRAZINAMIDE 500 MG TABLET	PYRAZINAMIDE
RIFABUTIN 150 MG CAPSULE	MYCOBUTIN
RIFAMPIN 300 MG CAPSULE	RIFADIN

Antivirals (non-HIV) (03.06)

ACYCLOVIR 200 MG CAPSULE	ZOVIRAX
ACYCLOVIR 400 MG TABLET	ZOVIRAX
ACYCLOVIR 800 MG TABLET	ZOVIRAX
AMANTADINE HCL 100 MG CAPSULE	SYMMETREL
GANCICLOVIR VIAL 500 MG INJECTION	CYTOVENE INJ

Cephalosporins (03.07)

CEFAZOLIN SOD 1 GM INJECTION	ANCEF
CEFAZOLIN SOD 1GM INJECTION	ANCEF
CEFAZOLIN SOD VIAL 500 MG INJECTION	KEFZOL
CEFTRIAXONE SOD 1 GM INJECTION	ROCEPHIN
CEFTRIAXONE SOD 1GM INJECTION	ROCEPHIN
CEFTRIAXONE SOD 2 GM INJECTION	ROCEPHIN
CEFTRIAXONE SOD 250 MG INJECTION	ROCEPHIN
CEFTRIAXONE SOD 2GM INJECTION	ROCEPHIN
CEFTRIAXONE SOD 500 MG INJECTION	ROCEPHIN

3. Anti-Infectives

Fluoroquinolones (03.08)

CIPROFLOXACIN HCL 250 MG TABLET	CIPRO
CIPROFLOXACIN HCL 500 MG TABLET	CIPRO
CIPROFLOXACIN HCL 750 MG TABLET	CIPRO

HIV Agents - Fusion Inhibitors (03.09.01)

HIV Agents - Integrase Inhibitors (03.09.02)

RALTEGRAVIR 400 MG TABLET	ISENTRESS
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HIV Agents - Non-Nucleoside Reverse Transcriptase Inhibitors (NNRTIs) (03.09.03)

DELAVIRDINE MESYLATE 200 MG TABLET	RESCRIPTOR
EFAVIRENZ 200 MG CAPSULE	SUSTIVA
EFAVIRENZ 600 MG TABLET	SUSTIVA
ETRAVIRINE 100 MG TABLET	INTELENCE
ETRAVIRINE 200 MG TABLET	INTELENCE
NEVIRAPINE 200 MG TABLET	VIRAMUNE

HIV Agents - Nucleos(t)ide Reverse Transcriptase Inhibitors (NRTIs) (03.09.04)

ABACAVIR 300 MG TABLET	ZIAGEN
ABACAVIR ORAL SOLN 20 MG/ML SOLUTION	ZIAGEN
DIDANOSINE 125 MG CAP DELAY-REL	VIDEX EC
DIDANOSINE 200 MG CAP DELAY-REL	VIDEX EC
DIDANOSINE 250 MG CAP DELAY-REL	VIDEX EC
DIDANOSINE 400 MG CAP DELAY-REL	VIDEX EC
EMTRICITABINE 200 MG CAPSULE	EMTRIVA
LAMIVUDINE 150 MG TABLET	EPIVIR
LAMIVUDINE 300 MG TABLET	EPIVIR
LAMIVUDINE- 10 MG/ML SOLUTION	EPIVIR
STAVUDINE 15 MG CAPSULE	ZERIT
STAVUDINE 20 MG CAPSULE	ZERIT
STAVUDINE 30 MG CAPSULE	ZERIT
STAVUDINE 40 MG CAPSULE	ZERIT
TENOFOVIR DISOPROXIL 300 MG TABLET	VIREAD
ZIDOVUDINE 10 MG/ML SYRUP	RETROVIR SYRUP
ZIDOVUDINE 100 MG CAPSULE	RETROVIR
ZIDOVUDINE 300 MG TABLET	RETROVIR

HIV Agents - Protease Inhibitors (03.09.05)

ATAZANAVIR SULFATE 150 MG CAPSULE	REYATAZ
ATAZANAVIR SULFATE 200 MG CAPSULE	REYATAZ
ATAZANAVIR SULFATE 300 MG CAPSULE	REYATAZ
DARUNAVIR ETHANOLATE 600 MG TABLET	PREZISTA
DARUNAVIR ETHANOLATE 800 MG TABLET	PREZISTA
FOSAMPRENAVIR CA 700 MG TABLET	LEXIVA
INDINAVIR 200 MG CAPSULE	CRIXIVAN
INDINAVIR 400 MG CAPSULE	CRIXIVAN
LOPINAVIR/RITONAVIR 200 MG-50 MG TABLET	KALETRA TAB
LOPINAVIR\RITON 400-100/5 ML SOLUTION	KALETRA SUSP
NELFINAVIR MESYLATE 250 MG TABLET	VIRACEPT

3. Anti-Infectives

NELFINAVIR MESYLATE 625 MG TABLET	VIRACEPT
RITONAVIR 100 MG TABLET	NORVIR
SAQUINAVIR*INVIRASE 200 MG CAPSULE	INVIRASE
SAQUINAVIR*INVIRASE 500 MG TABLET	INVIRASE
TIPRANAVIR 250 MG CAPSULE	APTIVUS

HIV Agents - Combination Products (03.09.06)

ABACAV-3TC-AZT 300-150-300 TABLET	TRIZIVIR
LAMIVUDINE - AZT 150/300 MG TABLET	COMBIVIR

HIV Agents - Supportive Agents (03.09.07)

AZITHROMYCIN 600 MG TABLET	ZITHROMAX
DAPSONE 100 MG TABLET	DAPSONE
DAPSONE 25 MG TABLET	DAPSONE

Macrolides / Azalides / Lincosamides / Oxazolidinones (03.10)

AZITHROMYCIN 250 MG TABLET	ZITHROMAX
AZITHROMYCIN 500 MG TABLET	ZITHROMAX
AZITHROMYCIN 600 MG TABLET	ZITHROMAX
AZITHROMYCIN Z-PAK 250 MG TABLET	ZITHROMAX Z-PAK
CLINDAMYCIN HCL 150 MG CAPSULE	CLEOCIN
CLINDAMYCIN HCL 300 MG CAPSULE	CLEOCIN
CLINDAMYCIN IVPB 300 MG INJECTION	CLEOCIN
CLINDAMYCIN IVPB 600 MG INJECTION	CLEOCIN IVPB
CLINDAMYCIN IVPB 900 MG INJECTION	CLEOCIN
CLINDAMYCIN PHOS ADV 600 MG/4 ML INJECTION	CLEOCIN
CLINDAMYCIN PHOS VL 150 MG/ML INJECTION	CLEOCIN INJ

Penicillins (03.11)

AMOXICILLIN 250 MG CAPSULE	AMOXIL
AMOXICILLIN 500 MG CAPSULE	AMOXIL
AMOXICILLIN/CLAV 500-125 MG TABLET	AUGMENTIN
AMOXICILLIN/CLAV 875-125 MG TABLET	AUGMENTIN
AMPICILLIN 1 GRAM INJECTION	AMPICILLIN
AMPICILLIN 1GM INJECTION	AMPICILLIN
AMPICILLIN 500 MG INJECTION	AMPICILLIN
DICLOXACILLIN 250 MG CAPSULE	DYNAPEN
DICLOXACILLIN 500 MG CAPSULE	DYNAPEN
PEN-G BENZATHINE 1.2 MILLION UNITS INJECTION	BICILLIN LA
PEN-G BENZATHINE 2.4 MILLION UNITS INJECTION	BICILLIN LA
PEN-G PROCAINE 1.2 MILLION UNITS INJECTION	WYCILLIN
PENICILLIN V-K 250 MG TABLET	PEN-VK
PENICILLIN V-K 500 MG TABLET	PEN-VK
PENICILLIN VK SUSP 250MG/5 ML SUSPENSION	PEN-VK ORAL SUSP
PENICILLIN-G POTASSIUM 5 MU INJECTION	PENICILLIN

Sulfonamides (03.12)

SULFAMETH-TRIMETH 800-160 MG TABLET	BACTRIM DS
SULFAMETH/TRIMETH 400/80 MG TABLET	BACTRIM/SEPTRA
SULFAMETH/TRIMETH VL 80-16 MG/ML INJECTION	BACTRIM INJ

Tetracyclines (03.13)

3. Anti-Infectives

DOXYCYCLINE 100 MG CAPSULE	VIBRAMYCIN
DOXYCYCLINE 100 MG TABLET	VIBRATABS
DOXYCYCLINE 50 MG CAPSULE	VIBRAMYCIN
MINOCYCLINE HCL 100 MG CAPSULE	MINOCIN
MINOCYCLINE HCL 50 MG CAPSULE	MINOCIN

Other Anti-Infectives (03.14)

METRONIDAZOLE 250 MG TABLET	FLAGYL
METRONIDAZOLE 500 MG TABLET	FLAGYL
METRONIDAZOLE/NACL 500 MG/100 ML INJECTION	FLAGYL IVPB
VANCOMYCIN HCL 1GM INJECTION	VANCOCIN
VANCOMYCIN HCL 500 MG INJECTION	VANCOCIN
VANCOMYCIN HCL VIAL 1GM INJECTION	VANCOCIN
VANCOMYCIN HCL VIAL 500 MG INJECTION	VANCOCIN

Formulary Drug List - Corizon Health National Formulary

4. Cancer-Related Agents

Antineoplastics (04.01)

HYDROXYUREA 500 MG CAPSULE

LOMUSTINE 40 MG CAPSULE

TAMOXIFEN CITRATE 10 MG TABLET

TAMOXIFEN CITRATE 20 MG TABLET

HYDREA

CEENU

NOLVADEX

NOLVADEX

Formulary Drug List - Corizon Health National Formulary

5. Cardiovascular Agents

Alpha-adrenergic Blockers (05.01)

Angiotensin-Converting Enzyme Inhibitors (ACE) (05.02)

LISINAPRIL 10 MG TABLET	ZESTRIL/PRINIVIL
LISINAPRIL 2.5 MG TABLET	ZESTRIL/PRINIVIL
LISINAPRIL 20 MG TABLET	ZESTRIL/PRINIVIL
LISINAPRIL 30 MG TABLET	ZESTRIL/PRINIVIL
LISINAPRIL 40 MG TABLET	ZESTRIL/PRINIVIL
LISINAPRIL 5 MG TABLET	ZESTRIL/PRINIVIL

Angiotensin Receptor Blockers (ARBs) (05.03)

LOSARTAN POTASSIUM 100 MG TABLET	COZAAR
LOSARTAN POTASSIUM 25 MG TABLET	COZAAR
LOSARTAN POTASSIUM 50 MG TABLET	COZAAR

Antidysrhythmics - Type 1a (05.04.01)

Antidysrhythmics - Type 1b (05.04.02)

Antidysrhythmics - Type 1c (05.04.03)

Antidysrhythmics - Type III (05.04.04)

AMIODARONE HCL 200 MG TABLET	CORDARONE
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Antilipidemics - HMG-Coenzyme A Reductase Inhibitors (05.05.01)

ATORVASTATIN 10 MG TABLET	LIPITOR
ATORVASTATIN 20 MG TABLET	LIPITOR
ATORVASTATIN 40 MG TABLET	LIPITOR
ATORVASTATIN 80 MG TABLET	LIPITOR
SIMVASTATIN 10 MG TABLET	ZOCOR
SIMVASTATIN 20 MG TABLET	ZOCOR
SIMVASTATIN 40 MG TABLET	ZOCOR
SIMVASTATIN 5 MG TABLET	ZOCOR

Antilipidemics - Other Antilipidemics (05.05.02)

GEMFIBROZIL 600 MG TABLET	LOPID
NIACIN 100 MG TABLET	NIACIN
NIACIN 250 MG TABLET	NIACIN
NIACIN 50 MG TABLET	NIACIN
NIACIN 500 MG TABLET	NIACIN
NIACIN- TIME REL 250 MG TAB CR	SLO-NIACIN
NIACIN- TIME REL 500 MG TAB CR	SLO-NIACIN
NIACIN- TIME REL 750 MG TAB CR	SLO-NIACIN

Beta-Adrenergic Blockers - Selective Agents (05.06.01)

5. Cardiovascular Agents

ATENOLOL 100 MG TABLET	TENORMIN
ATENOLOL 25 MG TABLET	TENORMIN
ATENOLOL 50 MG TABLET	TENORMIN
METOPROLOL TART 100 MG TABLET	LOPRESSOR
METOPROLOL TART 25 MG TABLET	LOPRESSOR
METOPROLOL TART 50 MG TABLET	LOPRESSOR
METOPROLOL TARTRATE 25 MG TABLET	LOPRESSOR
METOPROLOL TARTRATE 50 MG TABLET	LOPRESSOR

Beta-Adrenergic Blockers - Non-Selective Agents (05.06.02)

PROPRANOLOL HCL 10 MG TABLET	INDERAL
PROPRANOLOL HCL 20 MG TABLET	INDERAL
PROPRANOLOL HCL 40 MG TABLET	INDERAL
PROPRANOLOL HCL 80 MG TABLET	INDERAL

Beta-Adrenergic Blockers - α,β Antagonists (05.06.03)

CARVEDILOL 12.5 MG TABLET	COREG
CARVEDILOL 25 MG TABLET	COREG
CARVEDILOL 3.125 MG TABLET	COREG
CARVEDILOL 6.25 MG TABLET	COREG

Calcium Channel Blockers - Dihydropyridine (05.07.01)

AMLODIPINE BESY 10 MG TABLET	NORVASC
AMLODIPINE BESY 2.5 MG TABLET	NORVASC
AMLODIPINE BESY 5 MG TABLET	NORVASC
AMLODIPINE BESYLATE 10 MG TABLET	NORVASC
AMLODIPINE BESYLATE 2.5 MG TABLET	NORVASC
AMLODIPINE BESYLATE 5 MG TABLET	NORVASC

Calcium Channel Blockers - Non-Dihydropyridine (05.07.02)

DILTIAZEM CD 120 MG CAP CD 24 HR	DILACOR XR
DILTIAZEM CD 180 MG CAP CD 24 HR	DILACOR XR
DILTIAZEM CD 240 MG CAP CD 24 HR	DILACOR XR
DILTIAZEM CD 300 MG CAP CD 24 HR	CARDIZEM-CD
DILTIAZEM CD 360 MG CAP CD 24 HR	TAZTIA XT
VERAPAMIL HCL 120 MG TABLET	CALAN
VERAPAMIL HCL 40 MG TABLET	CALAN
VERAPAMIL HCL 80 MG TABLET	CALAN
VERAPAMIL HCL SR 120 MG TAB CR	CALAN SR
VERAPAMIL HCL SR 180 MG TAB CR	CALAN SR
VERAPAMIL HCL SR 240 MG TAB CR	CALAN SR

Cardiac Glycosides (05.08)

DIGOXIN 0.125 MG TABLET	LANOXIN
DIGOXIN 0.25 MG TABLET	LANOXIN
DIGOXIN AMP 0.25 MG/ML INJECTION	LANOXIN INJ

Centrally-Acting Antihypertensives (05.09)

CLONIDINE HCL 0.1 MG TABLET	CATAPRES
CLONIDINE HCL 0.2 MG TABLET	CATAPRES
CLONIDINE HCL 0.3 MG TABLET	CATAPRES

5. Cardiovascular Agents

Diuretics (05.10)

ACETAZOLAMIDE 250 MG TABLET	DIAMOX
FUROSEMIDE 20 MG TABLET	LASIX
FUROSEMIDE 40 MG TABLET	LASIX
FUROSEMIDE 80 MG TABLET	LASIX
FUROSEMIDE VIAL 100 MG/10 ML INJECTION	LASIX
FUROSEMIDE VIAL 20 MG/2 ML INJECTION	LASIX
FUROSEMIDE VIAL 40 MG/4 ML INJECTION	LASIX
HYDROCHLOROTHIAZIDE 12.5 MG CAPSULE	HCTZ
HYDROCHLOROTHIAZIDE 25 MG TABLET	HYDRODIURIL
SPIRONOLACTONE 100 MG TABLET	ALDACTONE
SPIRONOLACTONE 25 MG TABLET	ALDACTONE
SPIRONOLACTONE 50 MG TABLET	ALDACTONE

Hemorrhheologic Agents (05.11)

HEPARIN SODIUM MDV 10,000 U/ML INJECTION	HEPARIN
HEPARIN SODIUM VL 1,000 U/ML INJECTION	HEPARIN
HEPARIN SODIUM VL 10 U/ML INJECTION	HEP-LOCK
HEPARIN SODIUM VL 10,000 U/ML INJECTION	HEPARIN
HEPARIN SODIUM VL 100 U/ML INJECTION	HEP-LOCK
HEPARIN SODIUM VL 5,000 U/ML INJECTION	HEPARIN
WARFARIN SOD 1 MG TABLET	JANTOVEN
WARFARIN SOD 10 MG TABLET	JANTOVEN
WARFARIN SOD 2 MG TABLET	JANTOVEN
WARFARIN SOD 2.5 MG TABLET	JANTOVEN
WARFARIN SOD 3 MG TABLET	JANTOVEN
WARFARIN SOD 4 MG TABLET	JANTOVEN
WARFARIN SOD 5 MG TABLET	JANTOVEN
WARFARIN SOD 6 MG TABLET	JANTOVEN
WARFARIN SOD 7.5 MG TABLET	JANTOVEN

Vasodilators - Nitrates (05.12.01)

ISOSORBIDE-MONONIT 10 MG TABLET	MONOKET
ISOSORBIDE-MONONIT 120 MG TAB SR 24 HR	IMDUR
ISOSORBIDE-MONONIT 20 MG TABLET	MONOKET
ISOSORBIDE-MONONIT 30 MG TAB SR 24 HR	IMDUR
ISOSORBIDE-MONONIT 60 MG TAB SR 24 HR	IMDUR
NITROGLYCERIN 6.5 MG CAP CR	NITRO-BID
NITROGLYCERIN SL 1/150 (0.4MG) TAB SUBL	NITROSTAT

Vasodilators - Non-Nitrates (05.12.02)

HYDRALAZINE HCL 10 MG TABLET	APRESOLINE
HYDRALAZINE HCL 25 MG TABLET	APRESOLINE
HYDRALAZINE HCL 50 MG TABLET	APRESOLINE
MINOXIDIL 10 MG TABLET	LONITEN
MINOXIDIL 2.5 MG TABLET	LONITEN

Combination Agents (05.13)

Other CV Agents (05.14)

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6. Psychiatric Agents

Antidepressants - Tricyclic Antidepressants (06.01.01)

IMIPRAMINE HCL 10 MG TABLET	TOFRANIL
IMIPRAMINE HCL 25 MG TABLET	TOFRANIL
IMIPRAMINE HCL 50 MG TABLET	TOFRANIL
NORTRIPTYLINE HCL 10 MG CAPSULE	PAMELOR
NORTRIPTYLINE HCL 25 MG CAPSULE	PAMELOR
NORTRIPTYLINE HCL 50 MG CAPSULE	PAMELOR
NORTRIPTYLINE HCL 75 MG CAPSULE	PAMELOR

Antidepressants - Serotonin +/- Norepinephrine Reuptake Inhibitors (SSRI / SNRI) (06.01.02)

CITALOPRAM 10 MG TABLET	CELEXA
CITALOPRAM 20 MG TABLET	CELEXA
CITALOPRAM 40 MG TABLET	CELEXA
FLUOXETINE 10 MG CAPSULE	PROZAC
FLUOXETINE 20 MG CAPSULE	PROZAC
PAROXETINE HCL 10 MG TABLET	PAXIL
PAROXETINE HCL 20 MG TABLET	PAXIL
PAROXETINE HCL 30 MG TABLET	PAXIL
PAROXETINE HCL 40 MG TABLET	PAXIL
SERTRALINE HCL 100 MG TABLET	ZOLOFT
SERTRALINE HCL 25 MG TABLET	ZOLOFT
SERTRALINE HCL 50 MG TABLET	ZOLOFT
VENLAFAXINE HCL XR 150 MG CAP SR 24 HR	EFFEXOR XR
VENLAFAXINE HCL XR 37.5 MG CAP SR 24 HR	EFFEXOR XR
VENLAFAXINE HCL XR 75 MG CAP SR 24 HR	EFFEXOR XR

Antidepressants - Other Antidepressants (06.01.03)

MIRTAZAPINE 15 MG TABLET	REMERON
MIRTAZAPINE 30 MG TABLET	REMERON
MIRTAZAPINE 45 MG TABLET	REMERON

Antipsychotic Agents - 1st Generation Agents (06.02.01)

FLUPHENAZINE 0.5 MG/ML ELIXIR	PROLIXIN ELIXIR
FLUPHENAZINE 10 MG TABLET	PROLIXIN
FLUPHENAZINE 5 MG TABLET	PROLIXIN
FLUPHENAZINE DECON VL 25 MG/ML INJECTION	PROLIXIN INJ
FLUPHENAZINE HCL 1 MG TABLET	PROLIXIN
FLUPHENAZINE HCL 10 MG TABLET	PROLIXIN
FLUPHENAZINE HCL 2.5 MG TABLET	PROLIXIN
FLUPHENAZINE HCL 5 MG TABLET	PROLIXIN
FLUPHENAZINE HCL VL 2.5 MG/ML INJECTION	PROLIXIN INJ
HALOPERIDOL 0.5 MG TABLET	HALDOL
HALOPERIDOL 1 MG TABLET	HALDOL
HALOPERIDOL 10 MG TABLET	HALDOL
HALOPERIDOL 2 MG TABLET	HALDOL
HALOPERIDOL 20 MG TABLET	HALDOL
HALOPERIDOL 5 MG TABLET	HALDOL
HALOPERIDOL DEC 100 MG/ML INJECTION	HALDOL
HALOPERIDOL DEC 50 MG/ML INJECTION	HALDOL

6. Psychiatric Agents

HALOPERIDOL DEC VL 100 MG/ML INJECTION	HALDOL
HALOPERIDOL DEC VL 50 MG/ML INJECTION	HALDOL
HALOPERIDOL LACTATE VL 5 MG/ML INJECTION	HALDOL
HALOPERIDOL ORAL 2 MG/ML CONCENTRATE	HALDOL
LOXAPINE SUCCINATE 10 MG CAPSULE	LOXITANE
LOXAPINE SUCCINATE 25 MG CAPSULE	LOXITANE
LOXAPINE SUCCINATE 5 MG CAPSULE	LOXITANE
LOXAPINE SUCCINATE 50 MG CAPSULE	LOXITANE
PERPHENAZINE 16 MG TABLET	TRILAFON
PERPHENAZINE 2 MG TABLET	TRILAFON
PERPHENAZINE 4 MG TABLET	TRILAFON
PERPHENAZINE 8 MG TABLET	TRILAFON
THIOTHIXENE 1 MG CAPSULE	NAVANE
THIOTHIXENE 10 MG CAPSULE	NAVANE
THIOTHIXENE 2 MG CAPSULE	NAVANE
THIOTHIXENE 5 MG CAPSULE	NAVANE
TRIFLUOPERAZINE HCL 1 MG TABLET	STELAZINE
TRIFLUOPERAZINE HCL 10 MG TABLET	STELAZINE
TRIFLUOPERAZINE HCL 2 MG TABLET	STELAZINE
TRIFLUOPERAZINE HCL 5 MG TABLET	STELAZINE

Antipsychotic Agents - 2nd Generation Agents (06.02.02)

RISPERIDONE 0.5 MG TABLET	RISPERDAL
RISPERIDONE 1 MG TABLET	RISPERDAL
RISPERIDONE 1 MG/ML SOLUTION	RISPERDAL SOLN
RISPERIDONE 2 MG TABLET	RISPERDAL
RISPERIDONE 3 MG TABLET	RISPERDAL
RISPERIDONE 4 MG TABLET	RISPERDAL
ZIPRASIDONE HCL 20 MG CAPSULE	GEODON
ZIPRASIDONE HCL 40 MG CAPSULE	GEODON
ZIPRASIDONE HCL 60 MG CAPSULE	GEODON
ZIPRASIDONE HCL 80 MG CAPSULE	GEODON

Barbiturates (06.03)

PHENOBARBITAL 16.2 MG TABLET	PHENOBARBITAL
PHENOBARBITAL 32.4 MG TABLET	PHENOBARBITAL
PHENOBARBITAL 64.8 MG TABLET	PHENOBARBITAL
PHENOBARBITAL 97.2 MG TABLET	PHENOBARBITAL

Cerebral Stimulants (06.04)

Mood Stabilizers (06.05)

CARBAMAZEPINE 100 MG TAB CHEW	TEGRETOL
CARBAMAZEPINE 200 MG TABLET	TEGRETOL
DIVALPROEX SODIUM 125 MG TAB EC	DEPAKOTE
DIVALPROEX SODIUM 250 MG TAB EC	DEPAKOTE
DIVALPROEX SODIUM 500 MG TAB EC	DEPAKOTE
LAMOTRIGINE 100 MG TABLET	LAMICTAL
LAMOTRIGINE 150 MG TABLET	LAMICTAL
LAMOTRIGINE 200 MG TABLET	LAMICTAL
LAMOTRIGINE 25 MG TABLET	LAMICTAL

6. Psychiatric Agents

LITHIUM CARB 300 MG CAPSULE	ESKALITH
LITHIUM CARBONATE 150 MG CAPSULE	ESKALITH
LITHIUM CARBONATE 300 MG CAPSULE	ESKALITH

Sedatives / Hypnotics - Benzodiazepine (06.06.01)

CHLORDIAZEPOXIDE 10 MG CAPSULE	LIBRIUM
CHLORDIAZEPOXIDE 25 MG CAPSULE	LIBRIUM
CHLORDIAZEPOXIDE 5 MG CAPSULE	LIBRIUM
DIAZEPAM 10 MG TABLET	VALIUM
DIAZEPAM 2 MG TABLET	VALIUM
DIAZEPAM 5 MG TABLET	VALIUM
DIAZEPAM SYRINGE 5 MG/ML INJECTION	VALIUM
DIAZEPAM VIAL 5 MG/ML INJECTION	VALIUM INJ
LORAZEPAM VIAL 2 MG/ML INJECTION	ATIVAN

Sedatives / Hypnotics - Other Agents (06.06.02)

Anxiolytic (06.08)

Other CNS Agents (06.99)

BENZTROPINE MES 0.5 MG TABLET	COGENTIN
BENZTROPINE MES 1 MG TABLET	COGENTIN
BENZTROPINE MES 2 MG TABLET	COGENTIN
TRIHEXYPHENIDYL HCL 2 MG TABLET	ARTANE
TRIHEXYPHENIDYL HCL 5 MG TABLET	ARTANE

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7. Dental Agents

Dental Agents (07.01)

CHLORHEXIDINE GLUC 0.12% SOLUTION

LIDOCAINE VISCOUS 2% SOLUTION

PERIDEX

XYLOCAINE VISC

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8. Dermatological Agents

Anti-Acne Products (08.01)

BENZOYL PEROXIDE 10% GEL (JELLY)	BENZAGEL
BENZOYL PEROXIDE 5% GEL (JELLY)	BENZAGEL
ERYTHROMYCIN TOPICAL 2% SOLUTION	ERYMAX

Antifungals (08.02)

CLOTRIMAZOLE 1% CREAM	LOTRIMIN/MYCELEX
CLOTRIMAZOLE 1% SOLUTION	LOTRIMIN/MYCELEX
MICONAZOLE TOPICAL 2% CREAM	MONISTAT-DERM
NYSTATIN 100,000 U/GM CREAM	MYCOSTATIN
NYSTATIN 100,000 U/GM OINTMENT	MYCOSTATIN
TOLNAFTATE 1% CREAM	TINACTIN

Anti-Infectives (08.03)

BACITRACIN 500 U/G OINTMENT	BACITRACIN
BACITRACIN PACKET 500 U/G OINTMENT	BACITRACIN
BACITRACIN/POLYMXIN B OINTMENT	POLYSPORIN
BACITRACIN/POLYMYXIN B OINTMENT	POLYSPORIN
SILVER SULFADIAZINE 1% CREAM	SILVADENE

Antipsoriatics (08.04)

COAL TAR SHAMPOO 0.5% SHAMPOO	DOAK TAR/THERA-GEL
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Antipruritics & Local Anesthetics (08.05)

CALAMINE 8% LOTION	CALAMINE
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Moisturizing and Barrier Agents (08.06)

Scabicides (08.07)

PERMETHRIN 5% CREAM	ELIMITE/ACTICIN
PYRETHRINS/PIPERONYL 0.33%-4% SHAMPOO	LICE TREATMENT

Steroid Anti-Inflammatories - Very High Potency (08.08.01)

BETAMETHASONE-AUG 0.05% CREAM	DIPROLENE AF
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Steroid Anti-Inflammatories - High Potency (08.08.02)

BETAMETHASONE-AUG 0.05% CREAM	DIPROLENE AF
TRIAMCINOLONE 0.025% CR 0.025% CREAM	KENALOG
TRIAMCINOLONE 0.025% LOT 0.025% LOTION	KENALOG
TRIAMCINOLONE 0.025% OINT 0.025% OINTMENT	KENALOG
TRIAMCINOLONE 0.1% CR 0.1% CREAM	KENALOG
TRIAMCINOLONE 0.1% LOT 0.1% LOTION	KENALOG
TRIAMCINOLONE 0.1% OINT 0.1% OINTMENT	KENALOG
TRIAMCINOLONE 0.5% CR 0.5% CREAM	KENALOG
TRIAMCINOLONE 0.5% OINT 0.5% OINTMENT	KENALOG

Steroid Anti-Inflammatories - Medium Potency (08.08.03)

FLUOCINOLONE 0.01% CREAM	SYNALAR
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8. Dermatological Agents

FLUOCINOLONE 0.01% SOLUTION	SYNALAR
FLUOCINOLONE 0.025% CREAM	SYNALAR
FLUOCINOLONE 0.025% OINTMENT	SYNALAR
TRIAMCINOLONE 0.025% CR 0.025% CREAM	KENALOG
TRIAMCINOLONE 0.025% LOT 0.025% LOTION	KENALOG
TRIAMCINOLONE 0.025% OINT 0.025% OINTMENT	KENALOG
TRIAMCINOLONE 0.1% CR 0.1% CREAM	KENALOG
TRIAMCINOLONE 0.1% LOT 0.1% LOTION	KENALOG
TRIAMCINOLONE 0.1% OINT 0.1% OINTMENT	KENALOG
TRIAMCINOLONE 0.5% CR 0.5% CREAM	KENALOG
TRIAMCINOLONE 0.5% OINT 0.5% OINTMENT	KENALOG

Steroid Anti-Inflammatories - Low Potency (08.08.04)

FLUOCINOLONE 0.01% CREAM	SYNALAR
FLUOCINOLONE 0.01% SOLUTION	SYNALAR
FLUOCINOLONE 0.025% CREAM	SYNALAR
FLUOCINOLONE 0.025% OINTMENT	SYNALAR
HEMORRHOIDAL HC 1% OINTMENT	HEMORRHOIDAL HC
HYDROCORTISONE CR 1% CREAM	HYTONE
HYDROCORTISONE LOT 1% LOTION	HYTONE
HYDROCORTISONE OINT 1% OINTMENT	HYTONE

Other Derm Agents (08.09)

ANALGESIC BALM OINTMENT	ANALGESIC BALM
PODOPHYLLUM RESIN 25% SOLUTION	PODODERM
SALICYLIC ACID PLASTER 40%	MEDIPLAST PATCH
SELENIUM SULFIDE 2.5% SHAMPOO	SELSUN-RX LOTION

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9. Diagnostics and Supplies

Diagnostics and Supplies (09.01)

1/2NS + KCL 20 MEQ INJECTION	SODIUM CHLORIDE 0.45% + KCL
APLISOL VL 5 TU / 0.1 ML INJECTION	APLISOL
CARPUJECT HOLDER DEVICE	CARPUJECT
D5-1/2NS + KCL 20 MEQ INJECTION	D5-1/2NS + KCL
D5-NS + KCL 20 MEQ 5%-0.9%-20MEQ INJECTION	D5-NS + KCL
DEXTROSE 50% INJECTION	D-50W
DEXTROSE 50% INJECTION	D50-W
DEXTROSE WATER 5% INJECTION	D5-W 100ML
DEXTROSE WATER 5% INJECTION	D5-W 250ML
DEXTROSE WATER 5% INJECTION	D5-W 500ML
DEXTROSE WATER 5% INJECTION	D5-W 1000ML
DEXTROSE WATER- 5% INJECTION	D5-W ADVANTAGE
DEXTROSE-NACL 5%-0.45% INJECTION	D5-1/2NS 1000ML
LACTATED RINGERS INJECTION	LACTATED RINGERS
NS 1000 ML + KCL 20 MEQ INJECTION	NORMAL SALINE+ KCL
SOD CHL BACTERIOSTAT VL (10ML 0.9% INJECTION	NORMAL SALINE
SOD CHL BACTERIOSTAT VL (30ML 0.9% INJECTION	NORMAL SALINE
SOD CHL PRESERV-FREE VL (10ML 0.9% INJECTION	NORMAL SALINE
SOD CHL PRESERV-FREE VL (20ML 0.9% INJECTION	NORMAL SALINE
SOD CHLORIDE 0.9% INJECTION	NORMAL SALINE
SOD CHLORIDE IV 0.9 % INJECTION	NORMAL SALINE
SOD CHLORIDE IV 0.9% INJECTION	NORMAL SALINE
TUBERCULIN PPD VL 5 TU/0.1ML INJECTION	APLISOL/TUBERSOL
WATER INJECTION	STERILE WATER

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10. Emergency Medications

Emergency Medications (10.01)

ATROPINE SYRINGE 0.1 MG/ML INJECTION	ATROPINE SULFATE
DEXAMETHASONE VIAL 4 MG/ML INJECTION	DECADRON INJ
DIAZEPAM SYRINGE 5 MG/ML INJECTION	VALIUM
DIAZEPAM VIAL 5 MG/ML INJECTION	VALIUM INJ
DIPHENHYDRAMINE SYRG 50 MG/ML INJECTION	BENADRYL
DIPHENHYDRAMINE VIAL 50 MG/ML INJECTION	BENADRYL
EPINEPHRINE AMP 1:1000 (1 MG/ML) INJECTION	ADRENALIN
EPINEPHRINE VL 1:1000 INJECTION	ADRENALIN
FLUPHENAZINE 0.5 MG/ML ELIXIR	PROLIXIN ELIXIR
FLUPHENAZINE HCL VL 2.5 MG/ML INJECTION	PROLIXIN INJ
FUROSEMIDE VIAL 100 MG/10 ML INJECTION	LASIX
FUROSEMIDE VIAL 20 MG/2 ML INJECTION	LASIX
FUROSEMIDE VIAL 40 MG/4 ML INJECTION	LASIX
GLUCAGON SYRINGE 1 MG INJECTION	GLUCAGON EMERGENCY KIT
HALOPERIDOL LACTATE VL 5 MG/ML INJECTION	HALDOL
LIDOCAINE 1% SYRG 10 MG/ML INJECTION	XYLOCAINE
LORAZEPAM VIAL 2 MG/ML INJECTION	ATIVAN
MAGNESIUM SO4 50% VL 4 MEQ/ML INJECTION	MGSO4 INJ
METHYLPRED ACETATE VL 40 MG/ML INJECTION	DEPO-MEDROL
METHYLPRED ACETATE VL 80 MG/ML INJECTION	DEPO-MEDROL
METHYLPRED SOD SUCC 40 MG INJECTION	SOLU-MEDROL
METHYLPRED SOD SUCC VL 125 MG INJECTION	SOLU-MEDROL
METHYLPRED SOD SUCC VL 1GM INJECTION	SOLU-MEDROL
METHYLPRED SOD SUCC VL 500 MG INJECTION	SOLU-MEDROL
NALOXONE HCL 0.4 MG/ML INJECTION	NARCAN
NALOXONE HCL SYRG 0.4 MG/ML INJECTION	NARCAN INJ
NITROGLYCERIN SL 1/150 (0.4MG) TAB SUBL	NITROSTAT
PHENYTOIN SOD 100 MG/2 ML INJECTION	DILANTIN
PHENYTOIN SOD VIAL 50 MG/ML INJECTION	DILANTIN
PHYTONADIONE AMP 10 MG/ML INJECTION	AQUA-MEPHYTON
POTASSIUM CL 10% 20 MEQ/15ML LIQUID	POTASSIUM CHLORIDE
POTASSIUM CL IVPB 10 MEQ/100 ML INJECTION	POTASSIUM CHLORIDE
POTASSIUM CL IVPB 20 MEQ/100 ML INJECTION	POTASSIUM CHLORIDE
SOD POLYSTY SULF 15GM/60 ML SUSPENSION	KAYEXALATE SUSP
THIAMINE HCL 100 MG TABLET	VITAMIN B-1
THIAMINE HCL 50 MG TABLET	VITAMIN B-1
THIAMINE HCL MDV 100 MG/ML INJECTION	VITAMIN B-1

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11. Endocrine – Metabolic Agents

Androgens (11.01)

Estrogens – Progestins (11.02)

ESTRADIOL 0.5 MG TABLET	ESTRACE
ESTRADIOL 1 MG TABLET	ESTRACE
ESTRADIOL 2 MG TABLET	ESTRACE
MEDROXYPROGESTERONE 10 MG TABLET	PROVERA
MEDROXYPROGESTERONE 2.5 MG TABLET	PROVERA
MEDROXYPROGESTERONE 5 MG TABLET	PROVERA

Insulins (11.03)

INSULIN HUM 70/30 VL 100 U/ML INJECTION	HUMULIN 70/30
INSULIN HUM NPH VL 100 U/ML INJECTION	HUMULIN N
INSULIN HUM REG VL 100 U/ML INJECTION	HUMULIN R

Hypoglycemics - Sulfonylureas (11.04.01)

GLIPIZIDE 10 MG TABLET	GLUCOTROL
GLIPIZIDE 5 MG TABLET	GLUCOTROL

Hypoglycemics - Biguanides (11.04.02)

METFORMIN HCL 1000 MG TABLET	GLUCOPHAGE
METFORMIN HCL 500 MG TABLET	GLUCOPHAGE
METFORMIN HCL 850 MG TABLET	GLUCOPHAGE
METFORMIN HCL SA 500 MG TAB SR 24 HR	GLUCOPHAGE XR
METFORMIN HCL SA 750 MG TAB SR 24 HR	GLUCOPHAGE XR

Hypoglycemics - Thiazolidinediones (11.04.03)

Hypoglycemics - Incretin Mimetics (11.04.04)

Hypoglycemics - Combination Agents (11.04.05)

Hypoglycemics - Other Agents (11.04.06)

Thyroid Agents (11.05)

LEVOTHYROXINE SOD 0.025 MG TABLET	SYNTHROID
LEVOTHYROXINE SOD 0.05 MG TABLET	SYNTHROID
LEVOTHYROXINE SOD 0.075 MG TABLET	SYNTHROID
LEVOTHYROXINE SOD 0.088 MG TABLET	SYNTHROID
LEVOTHYROXINE SOD 0.1 MG TABLET	SYNTHROID
LEVOTHYROXINE SOD 0.112 MG TABLET	SYNTHROID
LEVOTHYROXINE SOD 0.125 MG TABLET	SYNTHROID
LEVOTHYROXINE SOD 0.137 MG TABLET	SYNTHROID
LEVOTHYROXINE SOD 0.15 MG TABLET	SYNTHROID

11. Endocrine – Metabolic Agents

LEVOTHYROXINE SOD 0.175 MG TABLET	SYNTHROID
LEVOTHYROXINE SOD 0.2 MG TABLET	SYNTHROID
LEVOTHYROXINE SOD 0.3 MG TABLET	SYNTHROID
METHIMAZOLE 10 MG TABLET	TAPAZOLE
METHIMAZOLE 5 MG TABLET	TAPAZOLE

Adrenal Corticosteroids (11.06)

PREDNISONE 1 MG TABLET	DELTASONE
PREDNISONE 10 MG TABLET	DELTASONE
PREDNISONE 2.5 MG TABLET	DELTASONE
PREDNISONE 20 MG TABLET	DELTASONE
PREDNISONE 5 MG TABLET	DELTASONE
PREDNISONE 50 MG TABLET	DELTASONE
PREDNISONE DOSEPAK 10 MG TABLET	PREDNISONE
PREDNISONE DOSEPAK 5 MG TABLET	PREDNISONE
PREDNISONE- 10 MG TABLET	DELTASONE
PREDNISONE- 20 MG TABLET	DELTASONE
PREDNISONE- 5 MG TABLET	DELTASONE
TRIAMCINOLONE ACET VL 40 MG/ML INJECTION	KENALOG
TRIAMCINOLONE ACET VL 40 MG/ML INJECTION	KENALOG INJ

Osteoporosis Agents (11.07)

ALENDRONATE SODIUM 35 MG TABLET	FOSAMAX
ALENDRONATE SODIUM 70 MG TABLET	FOSAMAX

Other Endocrine - Metabolic Agents (11.08)

CALCITRIOL 0.25 MCG CAPSULE	ROCALTROL
CALCITRIOL 0.5 MCG CAPSULE	ROCALTROL
CALCITRIOL 1 MCG/ML INJECTION	CALCITRIOL
CINACALCET HCL 30 MG TABLET	SENSIPAR
CINACALCET HCL 60 MG TABLET	SENSIPAR
CINACALCET HCL 90 MG TABLET	SENSIPAR
DOXERCALCIFEROL 2 MCG/ML INJECTION	HECTOROL
GLUCAGON 1 MG INJECTION	GLUCAGEN
GLUCOSE 40% GEL (JELLY)	GLUTOSE 15
PARICALCITOL VIAL 2 MCG/ML INJECTION	ZEMPLAR
PARICALCITOL VIAL 5 MCG/ML INJECTION	ZEMPLAR

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12. Gastrointestinal Agents

Aminosalicylates (12.01)

BALSALAZIDE DISODIUM 750 MG CAPSULE COLAZAL

Antacids (12.02)

CALCIUM CARB 500 MG TAB CHEW TUMS
CALCIUM CARBONATE 420 MG TAB CHEW ALCALAK
MAG/ALUM HYD/SIMETH TAB CHEW MYLANTA
MAG/ALUM HYD/SIMETH 200/200/20 SUSPENSION MYLANTA SUSP
SIMETHICONE 80 MG TAB CHEW MYLANTA GAS
SIMETHICONE PROTOCOL 125 MG TAB CHEW MYLANTA GAS

Anti-Diarrheals (12.03)

LOPERAMIDE 2 MG CAPSULE IMODIUM
LOPERAMIDE 2 MG TABLET IMODIUM
PINK BISMUTH 262 MG TAB CHEW PEPTO-BISMOL
PINK BISMUTH LIQ 262 MG/15 ML SUSPENSION PEPTO-BISMOL

Anti-Emetics (12.04)

ONDANSETRON ODT 4 MG TAB DISPERS ZOFRAN ODT
ONDANSETRON ODT 8 MG TAB DISPERS ZOFRAN ODT
PROCHLORPERAZINE 10 MG TABLET COMPAZINE
PROCHLORPERAZINE 5 MG TABLET COMPAZINE
PROCHLORPERAZINE MAL 25 MG SUPPOSITORY COMPAZINE
PROMETHAZINE HCL 12.5 MG TABLET PHENERGAN
PROMETHAZINE HCL 25 MG TABLET PHENERGAN
PROMETHAZINE HCL 25 MG/ML INJECTION PHENERGAN
PROMETHAZINE HCL 50 MG TABLET PHENERGAN

Cathartics / Laxatives (12.05)

BISACODYL 10 MG SUPPOSITORY DULCOLAX SUPP
BISACODYL 5 MG TAB EC DULCOLAX
BISACODYL 5 MG TABLET DULCOLAX
CALCIUM POLYCARB 625 MG TABLET FIBER-LAX
DOCUSATE SOD 100 MG CAPSULE COLACE
DOCUSATE SOD PROTOCOL 100 MG CAPSULE COLACE
LACTULOSE 10GM/15 ML SOLUTION CHRONULAC
MAGNESIUM CITRATE SOLUTION CITRATE OF MAG
MILK OF MAGNESIA 80MEQ/30 ML SUSPENSION MOM
MINERAL OIL OIL MINERAL OIL
PEG 3350/ELECTROLYTE SOLUTION GOLYTELY
SODIUM PHOSPHATE ENEMA ENEMA FLEET ENEMA

Digestive Enzymes (12.06)

PANCREALIPASE 5-17-27 CAP DELAY-REL ZENPEP

GI Motility Agents (12.07)

DICYCLOMINE HCL 10 MG CAPSULE BENTYL
DICYCLOMINE HCL 20 MG TABLET BENTYL
METOCLOPRAMIDE 10 MG TABLET REGLAN

12. Gastrointestinal Agents

METOCLOPRAMIDE 5 MG TABLET

REGLAN

Hepatitis Medications - Hepatitis B Agents (12.08.01)

LAMIVUDINE 100 MG TABLET

EPIVIR HBV

Hepatitis Medications - Hepatitis C Agents (12.08.02)

PEGINTERFERON A-2B 120 UG/0.5ML INJECTION

PEG-INTRON

PEGINTERFERON A-2B 150 UG/0.5ML INJECTION

PEG-INTRON

PEGINTERFERON A-2B 50 UG/0.5ML INJECTION

PEG-INTRON

PEGINTERFERON A-2B 80 UG/0.5ML INJECTION

PEG-INTRON

Histamine-2 Receptor Antagonists (H2RAs) (12.09)

RANITIDINE HCL 150 MG TABLET

ZANTAC

RANITIDINE HCL 300 MG TABLET

ZANTAC

Proton Pump Inhibitors (PPIs) (12.10)

OMEPRAZOLE 10 MG CAP DELAY-REL

PRILOSEC

OMEPRAZOLE 20 MG CAP DELAY-REL

PRILOSEC

OMEPRAZOLE 40 MG CAP DELAY-REL

PRILOSEC

Other GI Agents (12.11)

SEVELAMER CARBONATE 800 MG TABLET

RENVELA

SIMETHICONE 80 MG TAB CHEW

MYLANTA GAS

SIMETHICONE PROTOCOL 125 MG TAB CHEW

MYLANTA GAS

Hemorrhoidal Agents (12.12)

DIBUCAINE 1% OINTMENT

NUPERCAINAL

HEMORRHOIDAL HC 1% OINTMENT

HEMORRHOIDAL HC

HEMORRHOIDAL PLAIN OINTMENT

FORMULATION R

HEMORRHOIDAL PLAIN SUPPOSITORY

ANUSOL/VERSAL

HEMORRHOIDAL HC 2.5% CREAM

ANUSOL-HC / PROCTOSOL-HC

HYDROCORTISONE CR 1% CREAM

HYTONE

HYDROCORTISONE LOT 1% LOTION

HYTONE

HYDROCORTISONE OINT 1% OINTMENT

HYTONE

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13. Genitourinary Agents

Benign Prostatic Hypertrophy Agents (13.01)

TAMSULOSIN HCL 0.4 MG CAP SR 24 HR

FLOMAX

Other GU Agents (13.02)

BETHANECHOL 10 MG TABLET

URECHOLINE

BETHANECHOL 25 MG TABLET

URECHOLINE

BETHANECHOL 5 MG TABLET

URECHOLINE

OXYBUTYNIN CHLORIDE 5 MG TABLET

DITROPAN

OXYBUTYNIN CL 5 MG TABLET

DITROPAN

PHENAZOPYRIDINE HCL 100 MG TABLET

PYRIDIUM

PHENAZOPYRIDINE HCL 200 MG TABLET

PYRIDIUM

SOD BICARBONATE 325 MG TABLET

SODIUM BICARB

SOD BICARBONATE 650 MG TABLET

SODIUM BICARB

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14. Hematological Agents

Hematological Agents (14.01)

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15. Immunosuppressants

Immunosuppressants (15.01)

AZATHIOPRINE 50 MG TABLET	IMURAN
CYCLOSPORINE 100 MG CAPSULE	SANDIMMUNE
CYCLOSPORINE 25 MG CAPSULE	SANDIMMUNE
CYCLOSPORINE MODIFIED 100 MG/ML SOLUTION	NEORAL SOLUTION
CYCLOSPORINE MODIFY 100 MG CAPSULE	NEORAL/GENGRAF
CYCLOSPORINE MODIFY 25 MG CAPSULE	NEORAL/GENGRAF
TACROLIMUS ANHYDROUS 0.5 MG CAPSULE	PROGRAF
TACROLIMUS ANHYDROUS 1 MG CAPSULE	PROGRAF
TACROLIMUS ANHYDROUS 5 MG CAPSULE	PROGRAF

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16. Neurological Agents

Alzheimer's Agents (16.01)

Anticonvulsants (16.02)

CARBAMAZEPINE 100 MG TAB CHEW	TEGRETOL
CARBAMAZEPINE 200 MG TABLET	TEGRETOL
DIVALPROEX SODIUM 125 MG TAB EC	DEPAKOTE
DIVALPROEX SODIUM 250 MG TAB EC	DEPAKOTE
DIVALPROEX SODIUM 500 MG TAB EC	DEPAKOTE
LAMOTRIGINE 100 MG TABLET	LAMICTAL
LAMOTRIGINE 150 MG TABLET	LAMICTAL
LAMOTRIGINE 200 MG TABLET	LAMICTAL
LAMOTRIGINE 25 MG TABLET	LAMICTAL
LEVETIRACETAM 1000 MG TABLET	KEPPRA
LEVETIRACETAM 250 MG TABLET	KEPPRA
LEVETIRACETAM 500 MG TABLET	KEPPRA
LEVETIRACETAM 750 MG TABLET	KEPPRA
PHENOBARBITAL 16.2 MG TABLET	PHENOBARBITAL
PHENOBARBITAL 32.4 MG TABLET	PHENOBARBITAL
PHENOBARBITAL 64.8 MG TABLET	PHENOBARBITAL
PHENOBARBITAL 97.2 MG TABLET	PHENOBARBITAL
PHENYTOIN 125 MG/5 ML SUSPENSION	DILANTIN-125
PHENYTOIN SOD *EXT* 100 MG CAPSULE	DILANTIN
PHENYTOIN SOD *EXT* 30 MG CAPSULE	DILANTIN

Anti-Parkinsons Agents (16.03)

AMANTADINE HCL 100 MG CAPSULE	SYMMETREL
BENZTROPINE MES 0.5 MG TABLET	COGENTIN
BENZTROPINE MES 1 MG TABLET	COGENTIN
BENZTROPINE MES 2 MG TABLET	COGENTIN
CARBIDOPA/LEVODOPA 10-100 MG TABLET	SINEMET
CARBIDOPA/LEVODOPA 25-100 MG TABLET	SINEMET
CARBIDOPA/LEVODOPA 25-250 MG TABLET	SINEMET

Multiple Sclerosis Agents (16.04)

Other Neuro Agents (16.05)

MECLIZINE HCL 12.5 MG TABLET	ANTIVERT
MECLIZINE HCL 25 MG TABLET	ANTIVERT

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17. Obstetric – Gynecologic Agents

Contraceptives (17.01)

NORETH/ESTRAD 1-0.035 MG TABLET

NORETH/MESTRAN 1-0.050 MG TABLET

ORTHO-NOVUM 1/35

ORTHO-NOVUM 1/50

Anti-Infectives (17.02)

CLOTRIMAZOLE VAGINAL 1% CREAM

METRONIDAZOLE-VAG 0.75% GEL (JELLY)

MICONAZOLE VAGINAL 100 MG SUPPOSITORY

GYNE LOTRIMIN

METROGEL VAGINAL

MONISTAT 7

Other OB Agents (17.03)

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18. Otic – Ophthalmic Preparations

Anti-Glaucoma Agents (18.01)

BRIMONIDINE SOLN 0.2% OPHTHALMIC	ALPHAGAN
DORZOLAMIDE O/S 2% OPHTHALMIC	TRUSOPT
LATANOPROST O/S 0.005% OPHTHALMIC	XALATAN
LEVOBUNOLOL HCL O/S 0.5% OPHTHALMIC	BETAGAN
PILOCARPINE HCL O/S 1% OPHTHALMIC	ISOPTO CARPINE
PILOCARPINE HCL O/S 2% OPHTHALMIC	ISOPTO CARPINE
PILOCARPINE HCL O/S 4% OPHTHALMIC	ISOPTO CARPINE
TIMOLOL MAL SOLN 0.25% OPHTHALMIC	TIMOPTIC
TIMOLOL MAL SOLN 0.5% OPHTHALMIC	TIMOPTIC

Antihistamines / Decongestants (18.02)

KETOTIFEN O/S 0.025% OPHTHALMIC	ZADITOR
NAPHAZOLINE EYE DROPS 0.012% OPHTHALMIC	NAPHCON
NAPHAZOLINE/PHENIR O/S OPHTHALMIC	NAPHCON-A

Anti-Infective Agents (18.03)

BACITRACIN O/O 500 U/G OPHTHALMIC	BACITRACIN
ERYTHROMYCIN O/O 0.5% OPHTHALMIC	ILOTYCIN
GENTAMICIN O/O 0.3% OPHTHALMIC	GARAMYCIN
GENTAMICIN O/S 0.3% OPHTHALMIC	GARAMYCIN EYE DROPS
NEOMY/BAC/POLY O/O OPHTHALMIC	NEOSPORIN
NEOMY/POLY B/GRAM SOL OPHTHALMIC	NEOSPORIN
NEOMY/POLYMYX/DEX O/O OPHTHALMIC	MAXITROL
NEOMY/POLYMYX/DEX O/S OPHTHALMIC	MAXITROL/DEXACIDIN
OFLOXACIN O/S 0.3% OPHTHALMIC	OCUFLOX
SULFACETAMIDE SOD O/S 10% OPHTHALMIC	SULAMYD
TOBRAMYCIN O/S 0.3% OPHTHALMIC	TOBREX
TOBRAMYCIN OINT 0.3% OPHTHALMIC	TOBREX

Anti-Inflammatory Agents (18.04)

PREDNISOLONE ACET O/S 1% OPHTHALMIC	PRED FORTE
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Otic Preparations (18.05)

ACETIC ACID SOLN 2% OTIC	VOSOL
ACETIC ACID-HC SOLN 2% OTIC	VOSOL-HC
CARBAMIDE PEROXIDE OTIC 6.5% OTIC	DEBROX EAR DROPS
NEOMY/POLYMX/HC SOLN OTIC	CORTISPORIN OTIC
NEOMY/POLYMX/HC SUSP OTIC	CORTISPORIN OTIC

Other Otic-Ophthalmic Agents (18.06)

ARTIFICIAL TEARS 1.4% OPHTHALMIC	LIQUIFILM TEARS
EYE WASH IRRG OPHTHALMIC	DACRIOSE
FLUORESCEIN NA/BENOX O/S 0.25% OPHTHALMIC	FLURESS
FLUORESCEIN SOD STRIP 1 MG STRIP	FUL-GLO
HOMATROPINE HBR O/S 5% OPHTHALMIC	ISOPTO HOMATROPINE
PROPARACAINE HCL O/S 0.5% OPHTHALMIC	OPHTHETIC
TROPICAMIDE O/S 1% OPHTHALMIC	MYDRIACYL
WHITE PETROLATUM O/O 83% OPHTHALMIC	REFRESH PM

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19. Respiratory Agents

Anticholinergics (19.01)

IPRATROPIUM BROM 17 MCG INHALER

IPRATROPIUM INH 0.02% SOLUTION

ATROVENT HFA

ATROVENT SOLN

Beta Agonists (19.02)

ALBUTEROL HFA 90 MCG INHALER

ALBUTEROL INH SOL 0.083% NEBULIZE SOLN

EPINEPHRINE AMP 1:1000 (1 MG/ML) INJECTION

PROAIR HFA

PROVENTIL

ADRENALIN

Inhaled Oral Steroids (19.03)

CICLESONIDE 160 MCG INHALER

CICLESONIDE 80 MCG INHALER

ALVESCO

ALVESCO

Nasal Sprays (19.04)

SOD CHL NASAL SPRAY 0.65%

OCEAN/DEEP SEA

Combination Products (19.05)

Other Respiratory Agents (19.06)

AMINOPHYLLINE VL 250 MG/10 ML INJECTION

MONTELUKAST 10 MG TABLET

AMINOPHYLLINE

SINGULAIR

Formulary Drug List - Corizon Health National Formulary

20. Vaccines

Vaccines - Exposure Immune Globulin (20.01)

HEPATITIS A VACC VL 50 UNITS/ML INJECTION
HEPATITIS B VACC PF VL 5 MCG/0.5 ML INJECTION
INFLUENZA VACCINE 2015-2016 INJECTION
INFLUENZA-PF VACC SYG 2015-2016 INJECTION
MENINGOCOCCAL VACCINE INJECTION
PNEUMOCOCCAL VACC SDV INJECTION
TETANUS-DIPHThERIA TOX INJECTION

VAQTA
RECOMBIVAX HB PED
FLUVIRIN
ALFURIA
MENACTRA
PNEUMOVAX 23
DECAVAC / TENIVAC

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21. Vitamins – Minerals – Dietary Supplements

Vitamins – Minerals – Dietary Supplements (21.01)

CALCIUM ACETATE 667 MG TABLET	PHOSLO
CALCIUM CARB 1250MG/VIT D 1250 MG TABLET	OSCAL-D 500
CALCIUM CARBONATE 1250 MG TABLET	OSCAL
CYANOCOBALAMIN 1000 MCG/ML INJECTION	VITAMIN B-12
FERROUS SULFATE 325 MG TAB EC	FESO4
FERROUS SULFATE 325 MG TABLET	FESO4
FOLIC ACID 1 MG TABLET	FOLIC ACID
IRON DEXTRAN COMP 50 MG/ML INJECTION	INFED
IRON POLYSAC COMP 150 MG CAPSULE	NIFEREX 150
IRON SUCROSE VL 20 MG/ML INJECTION	VENOFER
LANTHANUM CARB 1000 MG TAB CHEW	FOSRENOL
LANTHANUM CARB 500 MG TAB CHEW	FOSRENOL
LANTHANUM CARB 750 MG TAB CHEW	FOSRENOL
PHYTONADIONE AMP 10 MG/ML INJECTION	AQUA-MEPHYTON
POTASSIUM CL 10 MEQ TAB CR	K-DUR
POTASSIUM CL 10% 20 MEQ/15ML LIQUID	POTASSIUM CHLORIDE
POTASSIUM CL 20 MEQ TAB CR	KLOR-CON M20
POTASSIUM CL 8 MEQ TAB CR	SLOW-K
POTASSIUM CL IVPB 10 MEQ/100 ML INJECTION	POTASSIUM CHLORIDE
POTASSIUM CL IVPB 20 MEQ/100 ML INJECTION	POTASSIUM CHLORIDE
POTASSIUM EFF 25 MEQ TAB EFFERVES	K-LYTE
PRENATAL VIT TABLET	PRENATAL VIT
PYRIDOXINE HCL 100 MG TABLET	VITAMIN B-6
PYRIDOXINE HCL 25 MG TABLET	VITAMIN B-6
PYRIDOXINE HCL 50 MG TABLET	VITAMIN B-6
THIAMINE HCL 100 MG TABLET	VITAMIN B-1
THIAMINE HCL 50 MG TABLET	VITAMIN B-1
THIAMINE HCL MDV 100 MG/ML INJECTION	VITAMIN B-1
VITAMIN B COMP W-C/FA TABLET	NEPHRO-VITE

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22. Miscellaneous and Unclassified Agents

Miscellaneous and Unclassified Agents (22.01)

BUPIVACAINE HCL VL 0.25% INJECTION	MARCAINE
BUPIVACAINE HCL/EPI VL 0.25% INJECTION	MARCAINE EPI
LIDOCAINE 1% 10 MG/ML INJECTION	XYLOCAINE
LIDOCAINE 1% VIAL 10 MG/ML INJECTION	XYLOCAINE
LIDOCAINE 1%+EPI VIAL 10 MG/ML INJECTION	XYLOCAINE W/EPI
LIDOCAINE 2% AMP 20 MG/ML INJECTION	XYLOCAINE
LIDOCAINE 2% VL 20 MG/ML INJECTION	XYLOCAINE

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<i>Product Name</i>	<i>Equivalent Brand Name</i>	<i>Therapy Section</i>
1/2NS + KCL 20 MEQ INJECTION	SODIUM CHLORIDE 0.45% + KCL	09.01
ABACAV-3TC-AZT 300-150-300 TABLET	TRIZIVIR	03.09.06
ABACAVIR 300 MG TABLET	ZIAGEN	03.09.04
ABACAVIR ORAL SOLN 20 MG/ML SOLUTION	ZIAGEN	03.09.04
ACETAZOLAMIDE 250 MG TABLET	DIAMOX	05.10
ACETIC ACID SOLN 2% OTIC	VOSOL	18.05
ACETIC ACID-HC SOLN 2% OTIC	VOSOL-HC	18.05
ACYCLOVIR 200 MG CAPSULE	ZOVIRAX	03.06
ACYCLOVIR 400 MG TABLET	ZOVIRAX	03.06
ACYCLOVIR 800 MG TABLET	ZOVIRAX	03.06
ALBUTEROL HFA 90 MCG INHALER	PROAIR HFA	19.02
ALBUTEROL INH SOL 0.083% NEBULIZE SOLN	PROVENTIL	19.02
ALENDRONATE SODIUM 35 MG TABLET	FOSAMAX	11.07
ALENDRONATE SODIUM 70 MG TABLET	FOSAMAX	11.07
ALLOPURINOL 100 MG TABLET	ZYLOPRIM	01.02
ALLOPURINOL 300 MG TABLET	ZYLOPRIM	01.02
AMANTADINE HCL 100 MG CAPSULE	SYMMETREL	03.06
AMANTADINE HCL 100 MG CAPSULE	SYMMETREL	16.03
AMINOPHYLLINE VL 250 MG/10 ML INJECTION	AMINOPHYLLINE	19.06
AMIODARONE HCL 200 MG TABLET	CORDARONE	05.04.04
AMLODIPINE BESY 10 MG TABLET	NORVASC	05.07.01
AMLODIPINE BESY 2.5 MG TABLET	NORVASC	05.07.01
AMLODIPINE BESY 5 MG TABLET	NORVASC	05.07.01
AMLODIPINE BESYLATE 10 MG TABLET	NORVASC	05.07.01
AMLODIPINE BESYLATE 2.5 MG TABLET	NORVASC	05.07.01
AMLODIPINE BESYLATE 5 MG TABLET	NORVASC	05.07.01
AMOXICILLIN 250 MG CAPSULE	AMOXIL	03.11
AMOXICILLIN 500 MG CAPSULE	AMOXIL	03.11
AMOXICILLIN/CLAV 500-125 MG TABLET	AUGMENTIN	03.11
AMOXICILLIN/CLAV 875-125 MG TABLET	AUGMENTIN	03.11
AMPICILLIN 1 GRAM INJECTION	AMPICILLIN	03.11
AMPICILLIN 1GM INJECTION	AMPICILLIN	03.11
AMPICILLIN 500 MG INJECTION	AMPICILLIN	03.11
ANALGESIC BALM OINTMENT	ANALGESIC BALM	08.09
APAP 325 MG TABLET	TYLENOL	01.01
APAP ELIXIR 160 MG/5 ML ELIXIR	TYLENOL	01.01
APAP SUPPOSITORY 650 MG SUPPOSITORY	TYLENOL	01.01
APAP-ASA-CAFF 250-250-65 MG TABLET	EXCEDRIN MIGRAINE	01.03
APAP-ASA-CAFFEINE 250-250-65 MG TABLET	EXCEDRIN MIGRAINE	01.03
APLISOL VL 5 TU / 0.1 ML INJECTION	APLISOL	09.01
ARTIFICIAL TEARS 1.4% OPHTHALMIC	LIQUIFILM TEARS	18.06
ASA 325 MG TAB EC	ECOTRIN	01.07
ASPIRIN 325 MG TABLET	ASA FC	01.07
ASPIRIN 325 MG TABLET	ASPIRIN	01.07
ASPIRIN EC 81 MG TAB EC	ECOTRIN	01.07
ATAZANAVIR SULFATE 150 MG CAPSULE	REYATAZ	03.09.05
ATAZANAVIR SULFATE 200 MG CAPSULE	REYATAZ	03.09.05
ATAZANAVIR SULFATE 300 MG CAPSULE	REYATAZ	03.09.05
ATENOLOL 100 MG TABLET	TENORMIN	05.06.01
ATENOLOL 25 MG TABLET	TENORMIN	05.06.01
ATENOLOL 50 MG TABLET	TENORMIN	05.06.01

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<i>Product Name</i>	<i>Equivalent Brand Name</i>	<i>Therapy Section</i>
ATORVASTATIN 10 MG TABLET	LIPITOR	05.05.01
ATORVASTATIN 20 MG TABLET	LIPITOR	05.05.01
ATORVASTATIN 40 MG TABLET	LIPITOR	05.05.01
ATORVASTATIN 80 MG TABLET	LIPITOR	05.05.01
ATROPINE SYRINGE 0.1 MG/ML INJECTION	ATROPINE SULFATE	10.01
AZATHIOPRINE 50 MG TABLET	IMURAN	15.01
AZITHROMYCIN 250 MG TABLET	ZITHROMAX	03.10
AZITHROMYCIN 500 MG TABLET	ZITHROMAX	03.10
AZITHROMYCIN 600 MG TABLET	ZITHROMAX	03.09.07
AZITHROMYCIN 600 MG TABLET	ZITHROMAX	03.10
AZITHROMYCIN Z-PAK 250 MG TABLET	ZITHROMAX Z-PAK	03.10
BACITRACIN 500 U/G OINTMENT	BACITRACIN	08.03
BACITRACIN O/O 500 U/G OPHTHALMIC	BACITRACIN	18.03
BACITRACIN PACKET 500 U/G OINTMENT	BACITRACIN	08.03
BACITRACIN/POLYMYXIN B OINTMENT	POLYSPORIN	08.03
BACITRACIN/POLYMYXIN B OINTMENT	POLYSPORIN	08.03
BALSALAZIDE DISODIUM 750 MG CAPSULE	COLAZAL	12.01
BENZOYL PEROXIDE 10% GEL (JELLY)	BENZAGEL	08.01
BENZOYL PEROXIDE 5% GEL (JELLY)	BENZAGEL	08.01
BENZTROPINE MES 0.5 MG TABLET	COGENTIN	06.99
BENZTROPINE MES 0.5 MG TABLET	COGENTIN	16.03
BENZTROPINE MES 1 MG TABLET	COGENTIN	06.99
BENZTROPINE MES 1 MG TABLET	COGENTIN	16.03
BENZTROPINE MES 2 MG TABLET	COGENTIN	06.99
BENZTROPINE MES 2 MG TABLET	COGENTIN	16.03
BETAMETHASONE-AUG 0.05% CREAM	DIPROLENE AF	08.08.01
BETAMETHASONE-AUG 0.05% CREAM	DIPROLENE AF	08.08.02
BETHANECHOL 10 MG TABLET	URECHOLINE	13.02
BETHANECHOL 25 MG TABLET	URECHOLINE	13.02
BETHANECHOL 5 MG TABLET	URECHOLINE	13.02
BISACODYL 10 MG SUPPOSITORY	DULCOLAX SUPP	12.05
BISACODYL 5 MG TAB EC	DULCOLAX	12.05
BISACODYL 5 MG TABLET	DULCOLAX	12.05
BRIMONIDINE SOLN 0.2% OPHTHALMIC	ALPHAGAN	18.01
BUPIVACAINE HCL VL 0.25% INJECTION	MARCAINE	22.01
BUPIVACAINE HCL/EPI VL 0.25% INJECTION	MARCAINE EPI	22.01
CALAMINE 8% LOTION	CALAMINE	08.05
CALCITRIOL 0.25 MCG CAPSULE	ROCALTROL	11.08
CALCITRIOL 0.5 MCG CAPSULE	ROCALTROL	11.08
CALCITRIOL 1 MCG/ML INJECTION	CALCITRIOL	11.08
CALCIUM ACETATE 667 MG TABLET	PHOSLO	21.01
CALCIUM CARB 1250MG/VIT D 1250 MG TABLET	OSCAL-D 500	21.01
CALCIUM CARB 500 MG TAB CHEW	TUMS	12.02
CALCIUM CARBONATE 1250 MG TABLET	OSCAL	21.01
CALCIUM CARBONATE 420 MG TAB CHEW	ALCALAK	12.02
CALCIUM POLYCARB 625 MG TABLET	FIBER-LAX	12.05
CARBAMAZEPINE 100 MG TAB CHEW	TEGRETOL	06.05
CARBAMAZEPINE 100 MG TAB CHEW	TEGRETOL	16.02
CARBAMAZEPINE 200 MG TABLET	TEGRETOL	06.05
CARBAMAZEPINE 200 MG TABLET	TEGRETOL	16.02
CARBAMIDE PEROXIDE OTIC 6.5% OTIC	DEBROX EAR DROPS	18.05

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CARBIDOPA/LEVODOPA 25-100 MG TABLET	SINEMET	16.03
CARBIDOPA/LEVODOPA 25-250 MG TABLET	SINEMET	16.03
CARPUJECT HOLDER DEVICE	CARPUJECT	09.01
CARVEDILOL 12.5 MG TABLET	COREG	05.06.03
CARVEDILOL 25 MG TABLET	COREG	05.06.03
CARVEDILOL 3.125 MG TABLET	COREG	05.06.03
CARVEDILOL 6.25 MG TABLET	COREG	05.06.03
CEFAZOLIN SOD 1 GM INJECTION	ANCEF	03.07
CEFAZOLIN SOD 1GM INJECTION	ANCEF	03.07
CEFAZOLIN SOD VIAL 500 MG INJECTION	KEFZOL	03.07
CEFTRIAZONE SOD 1 GM INJECTION	ROCEPHIN	03.07
CEFTRIAZONE SOD 1GM INJECTION	ROCEPHIN	03.07
CEFTRIAZONE SOD 2 GM INJECTION	ROCEPHIN	03.07
CEFTRIAZONE SOD 250 MG INJECTION	ROCEPHIN	03.07
CEFTRIAZONE SOD 2GM INJECTION	ROCEPHIN	03.07
CEFTRIAZONE SOD 500 MG INJECTION	ROCEPHIN	03.07
CETIRIZINE HCL 10 MG TABLET	ZYRTEC	02.02
CETIRIZINE HCL 5 MG TABLET	ZYRTEC	02.02
CHLORDIAZEPOXIDE 10 MG CAPSULE	LIBRIUM	06.06.01
CHLORDIAZEPOXIDE 25 MG CAPSULE	LIBRIUM	06.06.01
CHLORDIAZEPOXIDE 5 MG CAPSULE	LIBRIUM	06.06.01
CHLORHEXIDINE GLUC 0.12% SOLUTION	PERIDEX	07.01
CHLORPHENIRAMINE 4 MG TABLET	CHLORTRIMETON	02.01
CHLORPHENIRAMINE MAL 4 MG TABLET	CHLORTRIMETON	02.01
CICLESONIDE 160 MCG INHALER	ALVESCO	19.03
CICLESONIDE 80 MCG INHALER	ALVESCO	19.03
CINACALCET HCL 30 MG TABLET	SENSIPAR	11.08
CINACALCET HCL 60 MG TABLET	SENSIPAR	11.08
CINACALCET HCL 90 MG TABLET	SENSIPAR	11.08
CIPROFLOXACIN HCL 250 MG TABLET	CIPRO	03.08
CIPROFLOXACIN HCL 500 MG TABLET	CIPRO	03.08
CIPROFLOXACIN HCL 750 MG TABLET	CIPRO	03.08
CITALOPRAM 10 MG TABLET	CELEXA	06.01.02
CITALOPRAM 20 MG TABLET	CELEXA	06.01.02
CITALOPRAM 40 MG TABLET	CELEXA	06.01.02
CLINDAMYCIN HCL 150 MG CAPSULE	CLEOCIN	03.10
CLINDAMYCIN HCL 300 MG CAPSULE	CLEOCIN	03.10
CLINDAMYCIN IVPB 300 MG INJECTION	CLEOCIN	03.10
CLINDAMYCIN IVPB 600 MG INJECTION	CLEOCIN IVPB	03.10
CLINDAMYCIN IVPB 900 MG INJECTION	CLEOCIN	03.10
CLINDAMYCIN PHOS ADV 600 MG/4 ML INJECTION	CLEOCIN	03.10
CLINDAMYCIN PHOS VL 150 MG/ML INJECTION	CLEOCIN INJ	03.10
CLONIDINE HCL 0.1 MG TABLET	CATAPRES	05.09
CLONIDINE HCL 0.2 MG TABLET	CATAPRES	05.09
CLONIDINE HCL 0.3 MG TABLET	CATAPRES	05.09
CLOTRIMAZOLE 1% CREAM	LOTRIMIN/MYCELEX	08.02
CLOTRIMAZOLE 1% SOLUTION	LOTRIMIN/MYCELEX	08.02
CLOTRIMAZOLE 10 MG TROCHE	MYCELEX	03.02
CLOTRIMAZOLE VAGINAL 1% CREAM	GYNE LOTRIMIN	17.02
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CODEINE/APAP 30-300 MG/12.5 ML ELIXIR	TYLENOL/ COD	01.04
CODEINE/APAP 60 MG-300 MG TABLET	TYLENOL W/COD #4	01.04
CODEINE/APAP 60-300 MG TABLET	TYLENOL W/COD #4	01.04
CYANOCOBALAMIN 1000 MCG/ML INJECTION	VITAMIN B-12	21.01
CYCLOSPORINE 100 MG CAPSULE	SANDIMMUNE	15.01
CYCLOSPORINE 25 MG CAPSULE	SANDIMMUNE	15.01
CYCLOSPORINE MODIFIED 100 MG/ML SOLUTION	NEORAL SOLUTION	15.01
CYCLOSPORINE MODIFY 100 MG CAPSULE	NEORAL/GENGRAF	15.01
CYCLOSPORINE MODIFY 25 MG CAPSULE	NEORAL/GENGRAF	15.01
CYPROHEPTADINE 4 MG TABLET	PERIACTIN	02.01
D5-1/2NS + KCL 20 MEQ INJECTION	D5-1/2NS + KCL	09.01
D5-NS + KCL 20 MEQ 5%-0.9%-20MEQ INJECTION	D5-NS + KCL	09.01
DAPSONE 100 MG TABLET	DAPSONE	03.09.07
DAPSONE 25 MG TABLET	DAPSONE	03.09.07
DARUNAVIR ETHANOLATE 600 MG TABLET	PREZISTA	03.09.05
DARUNAVIR ETHANOLATE 800 MG TABLET	PREZISTA	03.09.05
DELAVIRDINE MESYLATE 200 MG TABLET	RESCRIPTOR	03.09.03
DEXAMETHASONE VIAL 4 MG/ML INJECTION	DECADRON INJ	10.01
DEXTROSE 50% INJECTION	D-50W	09.01
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DEXTROSE WATER 5% INJECTION	D5-W 100ML	09.01
DEXTROSE WATER 5% INJECTION	D5-W 250ML	09.01
DEXTROSE WATER 5% INJECTION	D5-W 500ML	09.01
DEXTROSE WATER 5% INJECTION	D5-W 1000ML	09.01
DEXTROSE WATER- 5% INJECTION	D5-W ADVANTAGE	09.01
DEXTROSE-NACL 5%-0.45% INJECTION	D5-1/2NS 1000ML	09.01
DIAZEPAM 10 MG TABLET	VALIUM	06.06.01
DIAZEPAM 2 MG TABLET	VALIUM	06.06.01
DIAZEPAM 5 MG TABLET	VALIUM	06.06.01
DIAZEPAM SYRINGE 5 MG/ML INJECTION	VALIUM	06.06.01
DIAZEPAM SYRINGE 5 MG/ML INJECTION	VALIUM	10.01
DIAZEPAM VIAL 5 MG/ML INJECTION	VALIUM INJ	06.06.01
DIAZEPAM VIAL 5 MG/ML INJECTION	VALIUM INJ	10.01
DIBUCAINE 1% OINTMENT	NUPERCAINAL	12.12
DICLOXACILLIN 250 MG CAPSULE	DYNAPEN	03.11
DICLOXACILLIN 500 MG CAPSULE	DYNAPEN	03.11
DICYCLOMINE HCL 10 MG CAPSULE	BENTYL	12.07
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DIDANOSINE 125 MG CAP DELAY-REL	VIDEX EC	03.09.04
DIDANOSINE 200 MG CAP DELAY-REL	VIDEX EC	03.09.04
DIDANOSINE 250 MG CAP DELAY-REL	VIDEX EC	03.09.04
DIDANOSINE 400 MG CAP DELAY-REL	VIDEX EC	03.09.04
DIGOXIN 0.125 MG TABLET	LANOXIN	05.08
DIGOXIN 0.25 MG TABLET	LANOXIN	05.08
DIGOXIN AMP 0.25 MG/ML INJECTION	LANOXIN INJ	05.08
DILTIAZEM CD 120 MG CAP CD 24 HR	DILACOR XR	05.07.02
DILTIAZEM CD 180 MG CAP CD 24 HR	DILACOR XR	05.07.02
DILTIAZEM CD 240 MG CAP CD 24 HR	DILACOR XR	05.07.02
DILTIAZEM CD 300 MG CAP CD 24 HR	CARDIZEM-CD	05.07.02

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DIPHENHYDRAMINE SYRG 50 MG/ML INJECTION	BENADRYL	10.01
DIPHENHYDRAMINE VIAL 50 MG/ML INJECTION	BENADRYL	02.01
DIPHENHYDRAMINE VIAL 50 MG/ML INJECTION	BENADRYL	10.01
DIVALPROEX SODIUM 125 MG TAB EC	DEPAKOTE	06.05
DIVALPROEX SODIUM 125 MG TAB EC	DEPAKOTE	16.02
DIVALPROEX SODIUM 250 MG TAB EC	DEPAKOTE	06.05
DIVALPROEX SODIUM 250 MG TAB EC	DEPAKOTE	16.02
DIVALPROEX SODIUM 500 MG TAB EC	DEPAKOTE	06.05
DIVALPROEX SODIUM 500 MG TAB EC	DEPAKOTE	16.02
DOCUSATE SOD 100 MG CAPSULE	COLACE	12.05
DOCUSATE SOD PROTOCOL 100 MG CAPSULE	COLACE	12.05
DORZOLAMIDE O/S 2% OPHTHALMIC	TRUSOPT	18.01
DOXERCALCIFEROL 2 MCG/ML INJECTION	HECTOROL	11.08
DOXYCYCLINE 100 MG CAPSULE	VIBRAMYCIN	03.13
DOXYCYCLINE 100 MG TABLET	VIBRATABS	03.13
DOXYCYCLINE 50 MG CAPSULE	VIBRAMYCIN	03.13
EFAVIRENZ 200 MG CAPSULE	SUSTIVA	03.09.03
EFAVIRENZ 600 MG TABLET	SUSTIVA	03.09.03
EMTRICITABINE 200 MG CAPSULE	EMTRIVA	03.09.04
EPINEPHRINE AMP 1:1000 (1 MG/ML) INJECTION	ADRENALIN	10.01
EPINEPHRINE AMP 1:1000 (1 MG/ML) INJECTION	ADRENALIN	19.02
EPINEPHRINE VL 1:1000 INJECTION	ADRENALIN	10.01
ERYTHROMYCIN O/O 0.5% OPHTHALMIC	ILOTYCIN	18.03
ERYTHROMYCIN TOPICAL 2% SOLUTION	ERYMAX	08.01
ESTRADIOL 0.5 MG TABLET	ESTRACE	11.02
ESTRADIOL 1 MG TABLET	ESTRACE	11.02
ESTRADIOL 2 MG TABLET	ESTRACE	11.02
ETHAMBUTOL HCL 100 MG TABLET	MYAMBUTOL	03.05
ETHAMBUTOL HCL 400 MG TABLET	MYAMBUTOL	03.05
ETRAVIRINE 100 MG TABLET	INTELENCE	03.09.03
ETRAVIRINE 200 MG TABLET	INTELENCE	03.09.03
EYE WASH IRRG OPHTHALMIC	DACRIOSE	18.06
FERROUS SULFATE 325 MG TAB EC	FESO4	21.01
FERROUS SULFATE 325 MG TABLET	FESO4	21.01
FLUCONAZOLE 100 MG TABLET	DIFLUCAN	03.02
FLUCONAZOLE 150 MG TABLET	DIFLUCAN	03.02
FLUCONAZOLE 200 MG TABLET	DIFLUCAN	03.02
FLUCONAZOLE 50 MG TABLET	DIFLUCAN	03.02
FLUOCINOLONE 0.01% CREAM	SYNALAR	08.08.03
FLUOCINOLONE 0.01% CREAM	SYNALAR	08.08.04
FLUOCINOLONE 0.01% SOLUTION	SYNALAR	08.08.03
FLUOCINOLONE 0.01% SOLUTION	SYNALAR	08.08.04
FLUOCINOLONE 0.025% CREAM	SYNALAR	08.08.03
FLUOCINOLONE 0.025% CREAM	SYNALAR	08.08.04
FLUOCINOLONE 0.025% OINTMENT	SYNALAR	08.08.03
FLUOCINOLONE 0.025% OINTMENT	SYNALAR	08.08.04
FLUORESCEIN NA/BENOX O/S 0.25% OPHTHALMIC	FLURESS	18.06
FLUORESCEIN SOD STRIP 1 MG STRIP	FUL-GLO	18.06
FLUOXETINE 10 MG CAPSULE	PROZAC	06.01.02

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FLUPHENAZINE 0.5 MG/ML ELIXIR	PROLIXIN ELIXIR	06.02.01
FLUPHENAZINE 0.5 MG/ML ELIXIR	PROLIXIN ELIXIR	10.01
FLUPHENAZINE 10 MG TABLET	PROLIXIN	06.02.01
FLUPHENAZINE 5 MG TABLET	PROLIXIN	06.02.01
FLUPHENAZINE DECON VL 25 MG/ML INJECTION	PROLIXIN INJ	06.02.01
FLUPHENAZINE HCL 1 MG TABLET	PROLIXIN	06.02.01
FLUPHENAZINE HCL 10 MG TABLET	PROLIXIN	06.02.01
FLUPHENAZINE HCL 2.5 MG TABLET	PROLIXIN	06.02.01
FLUPHENAZINE HCL 5 MG TABLET	PROLIXIN	06.02.01
FLUPHENAZINE HCL VL 2.5 MG/ML INJECTION	PROLIXIN INJ	06.02.01
FLUPHENAZINE HCL VL 2.5 MG/ML INJECTION	PROLIXIN INJ	10.01
FOLIC ACID 1 MG TABLET	FOLIC ACID	21.01
FOSAMPRENAVIR CA 700 MG TABLET	LEXIVA	03.09.05
FUROSEMIDE 20 MG TABLET	LASIX	05.10
FUROSEMIDE 40 MG TABLET	LASIX	05.10
FUROSEMIDE 80 MG TABLET	LASIX	05.10
FUROSEMIDE VIAL 100 MG/10 ML INJECTION	LASIX	05.10
FUROSEMIDE VIAL 100 MG/10 ML INJECTION	LASIX	10.01
FUROSEMIDE VIAL 20 MG/2 ML INJECTION	LASIX	05.10
FUROSEMIDE VIAL 20 MG/2 ML INJECTION	LASIX	10.01
FUROSEMIDE VIAL 40 MG/4 ML INJECTION	LASIX	05.10
FUROSEMIDE VIAL 40 MG/4 ML INJECTION	LASIX	10.01
GANCICLOVIR VIAL 500 MG INJECTION	CYTOVENE INJ	03.06
GEMFIBROZIL 600 MG TABLET	LOPID	05.05.02
GENTAMICIN 100 MG/NS 100ML INJECTION	GARAMYCIN IVPB	03.01
GENTAMICIN 120 MG/NS 100 ML INJECTION	GARAMYCIN IVPB	03.01
GENTAMICIN 80 MG/NS 100 ML INJECTION	GARAMYCIN IVPB	03.01
GENTAMICIN MDV 40 MG/ML INJECTION	GARAMYCIN	03.01
GENTAMICIN O/O 0.3% OPHTHALMIC	GARAMYCIN	18.03
GENTAMICIN O/S 0.3% OPHTHALMIC	GARAMYCIN EYE DROPS	18.03
GENTAMICIN VIAL 40 MG/ML INJECTION	GARAMYCIN	03.01
GLIPIZIDE 10 MG TABLET	GLUCOTROL	11.04.01
GLIPIZIDE 5 MG TABLET	GLUCOTROL	11.04.01
GLUCAGON 1 MG INJECTION	GLUCAGEN	11.08
GLUCAGON SYRINGE 1 MG INJECTION	GLUCAGON EMERGENCY KIT	10.01
GLUCOSE 40% GEL (JELLY)	GLUTOSE 15	11.08
GUAIFENESIN 100 MG/5 ML SYRUP	ROBITUSSIN PLAIN	02.04
GUAIFENESIN 200 MG TABLET	ROBITUSSIN	02.04
GUAIFENESIN 400 MG TABLET	MUCUS RELIEF	02.04
GUAIFENESIN 400 MG TABLET	TAB TUSSIN	02.04
GUAIFENESIN DM 400-20 MG TABLET	TAB TUSSIN DM	02.06
GUAIFENESIN-DM 100-10/5 ML SYRUP	ROBITUSSIN DM	02.06
HALOPERIDOL 0.5 MG TABLET	HALDOL	06.02.01
HALOPERIDOL 1 MG TABLET	HALDOL	06.02.01
HALOPERIDOL 10 MG TABLET	HALDOL	06.02.01
HALOPERIDOL 2 MG TABLET	HALDOL	06.02.01
HALOPERIDOL 20 MG TABLET	HALDOL	06.02.01
HALOPERIDOL 5 MG TABLET	HALDOL	06.02.01
HALOPERIDOL DEC 100 MG/ML INJECTION	HALDOL	06.02.01
HALOPERIDOL DEC 50 MG/ML INJECTION	HALDOL	06.02.01

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HALOPERIDOL LACTATE VL 5 MG/ML INJECTION	HALDOL	06.02.01
HALOPERIDOL LACTATE VL 5 MG/ML INJECTION	HALDOL	10.01
HALOPERIDOL ORAL 2 MG/ML CONCENTRATE	HALDOL	06.02.01
HEMORRHOIDAL HC 1% OINTMENT	HEMORRHOIDAL HC	08.08.04
HEMORRHOIDAL HC 1% OINTMENT	HEMORRHOIDAL HC	12.12
HEMORRHOIDAL PLAIN OINTMENT	FORMULATION R	12.12
HEMORRHOIDAL PLAIN SUPPOSITORY	ANUSOL/VERSAL	12.12
HEMORROIDAL HC 2.5% CREAM	ANUSOL-HC / PROCTOSOL-HC	12.12
HEPARIN SODIUM MDV 10,000 U/ML INJECTION	HEPARIN	05.11
HEPARIN SODIUM VL 1,000 U/ML INJECTION	HEPARIN	05.11
HEPARIN SODIUM VL 10 U/ML INJECTION	HEP-LOCK	05.11
HEPARIN SODIUM VL 10,000 U/ML INJECTION	HEPARIN	05.11
HEPARIN SODIUM VL 100 U/ML INJECTION	HEP-LOCK	05.11
HEPARIN SODIUM VL 5,000 U/ML INJECTION	HEPARIN	05.11
HEPATITIS A VACC VL 50 UNITS/ML INJECTION	VAQTA	20.01
HEPATITIS B VACC PF VL 5 MCG/0.5 ML INJECTION	RECOMBIVAX HB PED	20.01
HOMATROPINE HBR O/S 5% OPHTHALMIC	ISOPTO HOMATROPINE	18.06
HYDRALAZINE HCL 10 MG TABLET	APRESOLINE	05.12.02
HYDRALAZINE HCL 25 MG TABLET	APRESOLINE	05.12.02
HYDRALAZINE HCL 50 MG TABLET	APRESOLINE	05.12.02
HYDROCHLOROTHIAZIDE 12.5 MG CAPSULE	HCTZ	05.10
HYDROCHLOROTHIAZIDE 25 MG TABLET	HYDRODIURIL	05.10
HYDROCORTISONE CR 1% CREAM	HYTONE	08.08.04
HYDROCORTISONE CR 1% CREAM	HYTONE	12.12
HYDROCORTISONE LOT 1% LOTION	HYTONE	08.08.04
HYDROCORTISONE LOT 1% LOTION	HYTONE	12.12
HYDROCORTISONE OINT 1% OINTMENT	HYTONE	08.08.04
HYDROCORTISONE OINT 1% OINTMENT	HYTONE	12.12
HYDROXYCHLOROQUINE 200 MG TABLET	PLAQUENIL	01.09
HYDROXYUREA 500 MG CAPSULE	HYDREA	04.01
HYDROXYZINE HCL VIAL 25 MG/ML INJECTION	VISTARIL INJ	02.01
HYDROXYZINE HCL VIAL 50 MG/ML INJECTION	VISTARIL INJ	02.01
HYDROXYZINE HCL VL 50 MG/ML INJECTION	VISTARIL	02.01
HYDROXYZINE PAMOATE 100 MG CAPSULE	VISTARIL	02.01
HYDROXYZINE PAMOATE 25 MG CAPSULE	VISTARIL	02.01
HYDROXYZINE PAMOATE 50 MG CAPSULE	VISTARIL	02.01
IBUPROFEN 200 MG TABLET	ADVIL	01.06
IBUPROFEN 400 MG TABLET	MOTRIN	01.06
IBUPROFEN 600 MG TABLET	MOTRIN	01.06
IMIPRAMINE HCL 10 MG TABLET	TOFRANIL	06.01.01
IMIPRAMINE HCL 25 MG TABLET	TOFRANIL	06.01.01
IMIPRAMINE HCL 50 MG TABLET	TOFRANIL	06.01.01
INDINAVIR 200 MG CAPSULE	CRIXIVAN	03.09.05
INDINAVIR 400 MG CAPSULE	CRIXIVAN	03.09.05
INDOMETHACIN 25 MG CAPSULE	INDOCIN	01.06
INDOMETHACIN 50 MG CAPSULE	INDOCIN	01.06
INFLUENZA VACCINE 2015-2016 INJECTION	FLUVIRIN	20.01
INFLUENZA-PF VACC SYG 2015-2016 INJECTION	ALFURIA	20.01
INSULIN HUM 70/30 VL 100 U/ML INJECTION	HUMULIN 70/30	11.03

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INSULIN HUM REG VL 100 U/ML INJECTION	HUMULIN R	11.03
IPRATROPIUM BROM 17 MCG INHALER	ATROVENT HFA	19.01
IPRATROPIUM INH 0.02% SOLUTION	ATROVENT SOLN	19.01
IRON DEXTRAN COMP 50 MG/ML INJECTION	INFED	21.01
IRON POLYSAC COMP 150 MG CAPSULE	NIFEREX 150	21.01
IRON SUCROSE VL 20 MG/ML INJECTION	VENOFER	21.01
ISONIAZID 100 MG TABLET	INH	03.05
ISONIAZID 300 MG TABLET	INH	03.05
ISOSORBIDE-MONONIT 10 MG TABLET	MONOKET	05.12.01
ISOSORBIDE-MONONIT 120 MG TAB SR 24 HR	IMDUR	05.12.01
ISOSORBIDE-MONONIT 20 MG TABLET	MONOKET	05.12.01
ISOSORBIDE-MONONIT 30 MG TAB SR 24 HR	IMDUR	05.12.01
ISOSORBIDE-MONONIT 60 MG TAB SR 24 HR	IMDUR	05.12.01
IVERMECTIN TAB 3 MG TABLET	STROMEKTOL	03.03
KETOTIFEN O/S 0.025% OPHTHALMIC	ZADITOR	18.02
LACTATED RINGERS INJECTION	LACTATED RINGERS	09.01
LACTULOSE 10GM/15 ML SOLUTION	CHRONULAC	12.05
LAMIVUDINE - AZT 150/300 MG TABLET	COMBIVIR	03.09.06
LAMIVUDINE 100 MG TABLET	EPIVIR HBV	12.08.01
LAMIVUDINE 150 MG TABLET	EPIVIR	03.09.04
LAMIVUDINE 300 MG TABLET	EPIVIR	03.09.04
LAMIVUDINE- 10 MG/ML SOLUTION	EPIVIR	03.09.04
LAMOTRIGINE 100 MG TABLET	LAMICTAL	06.05
LAMOTRIGINE 100 MG TABLET	LAMICTAL	16.02
LAMOTRIGINE 150 MG TABLET	LAMICTAL	06.05
LAMOTRIGINE 150 MG TABLET	LAMICTAL	16.02
LAMOTRIGINE 200 MG TABLET	LAMICTAL	06.05
LAMOTRIGINE 200 MG TABLET	LAMICTAL	16.02
LAMOTRIGINE 25 MG TABLET	LAMICTAL	06.05
LAMOTRIGINE 25 MG TABLET	LAMICTAL	16.02
LANTHANUM CARB 1000 MG TAB CHEW	FOSRENOL	21.01
LANTHANUM CARB 500 MG TAB CHEW	FOSRENOL	21.01
LANTHANUM CARB 750 MG TAB CHEW	FOSRENOL	21.01
LATANOPROST O/S 0.005% OPHTHALMIC	XALATAN	18.01
LEVETIRACETAM 1000 MG TABLET	KEPPRA	16.02
LEVETIRACETAM 250 MG TABLET	KEPPRA	16.02
LEVETIRACETAM 500 MG TABLET	KEPPRA	16.02
LEVETIRACETAM 750 MG TABLET	KEPPRA	16.02
LEVOBUNOLOL HCL O/S 0.5% OPHTHALMIC	BETAGAN	18.01
LEVOTHYROXINE SOD 0.025 MG TABLET	SYNTHROID	11.05
LEVOTHYROXINE SOD 0.05 MG TABLET	SYNTHROID	11.05
LEVOTHYROXINE SOD 0.075 MG TABLET	SYNTHROID	11.05
LEVOTHYROXINE SOD 0.088 MG TABLET	SYNTHROID	11.05
LEVOTHYROXINE SOD 0.1 MG TABLET	SYNTHROID	11.05
LEVOTHYROXINE SOD 0.112 MG TABLET	SYNTHROID	11.05
LEVOTHYROXINE SOD 0.125 MG TABLET	SYNTHROID	11.05
LEVOTHYROXINE SOD 0.137 MG TABLET	SYNTHROID	11.05
LEVOTHYROXINE SOD 0.15 MG TABLET	SYNTHROID	11.05
LEVOTHYROXINE SOD 0.175 MG TABLET	SYNTHROID	11.05
LEVOTHYROXINE SOD 0.2 MG TABLET	SYNTHROID	11.05

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LEVOTHYROXINE SOD 0.3 MG TABLET	SYNTHROID	11.05
LIDOCAINE 1% 10 MG/ML INJECTION	XYLOCAINE	22.01
LIDOCAINE 1% SYRG 10 MG/ML INJECTION	XYLOCAINE	10.01
LIDOCAINE 1% VIAL 10 MG/ML INJECTION	XYLOCAINE	22.01
LIDOCAINE 1%+EPI VIAL 10 MG/ML INJECTION	XYLOCAINE W/EPI	22.01
LIDOCAINE 2% AMP 20 MG/ML INJECTION	XYLOCAINE	22.01
LIDOCAINE 2% VL 20 MG/ML INJECTION	XYLOCAINE	22.01
LIDOCAINE VISCOUS 2% SOLUTION	XYLOCAINE VISC	07.01
LISINOPRIL 10 MG TABLET	ZESTRIL/PRINIVIL	05.02
LISINOPRIL 2.5 MG TABLET	ZESTRIL/PRINIVIL	05.02
LISINOPRIL 20 MG TABLET	ZESTRIL/PRINIVIL	05.02
LISINOPRIL 30 MG TABLET	ZESTRIL/PRINIVIL	05.02
LISINOPRIL 40 MG TABLET	ZESTRIL/PRINIVIL	05.02
LISINOPRIL 5 MG TABLET	ZESTRIL/PRINIVIL	05.02
LITHIUM CARB 300 MG CAPSULE	ESKALITH	06.05
LITHIUM CARBONATE 150 MG CAPSULE	ESKALITH	06.05
LITHIUM CARBONATE 300 MG CAPSULE	ESKALITH	06.05
LOMUSTINE 40 MG CAPSULE	CEENU	04.01
LOPERAMIDE 2 MG CAPSULE	IMODIUM	12.03
LOPERAMIDE 2 MG TABLET	IMODIUM	12.03
LOPINAVIR/RITONAVIR 200 MG-50 MG TABLET	KALETRA TAB	03.09.05
LOPINAVIR/RITON 400-100/5 ML SOLUTION	KALETRA SUSP	03.09.05
LORATADINE 10 MG TABLET	CLARITIN	02.02
LORAZEPAM VIAL 2 MG/ML INJECTION	ATIVAN	06.06.01
LORAZEPAM VIAL 2 MG/ML INJECTION	ATIVAN	10.01
LOSARTAN POTASSIUM 100 MG TABLET	COZAAR	05.03
LOSARTAN POTASSIUM 25 MG TABLET	COZAAR	05.03
LOSARTAN POTASSIUM 50 MG TABLET	COZAAR	05.03
LOXAPINE SUCCINATE 10 MG CAPSULE	LOXITANE	06.02.01
LOXAPINE SUCCINATE 25 MG CAPSULE	LOXITANE	06.02.01
LOXAPINE SUCCINATE 5 MG CAPSULE	LOXITANE	06.02.01
LOXAPINE SUCCINATE 50 MG CAPSULE	LOXITANE	06.02.01
MAG/ALUM HYD/SIMETH TAB CHEW	MYLANTA	12.02
MAG/ALUM HYD/SIMETH 200/200/20 SUSPENSION	MYLANTA SUSP	12.02
MAGNESIUM CITRATE SOLUTION	CITRATE OF MAG	12.05
MAGNESIUM SO4 50% VL 4 MEQ/ML INJECTION	MGSO4 INJ	10.01
MECLIZINE HCL 12.5 MG TABLET	ANTIVERT	16.05
MECLIZINE HCL 25 MG TABLET	ANTIVERT	16.05
MEDROXYPROGESTERONE 10 MG TABLET	PROVERA	11.02
MEDROXYPROGESTERONE 2.5 MG TABLET	PROVERA	11.02
MEDROXYPROGESTERONE 5 MG TABLET	PROVERA	11.02
MELOXICAM 15 MG TABLET	MOBIC	01.06
MELOXICAM 7.5 MG TABLET	MOBIC	01.06
MENINGOCOCCAL VACCINE INJECTION	MENACTRA	20.01
METFORMIN HCL 1000 MG TABLET	GLUCOPHAGE	11.04.02
METFORMIN HCL 500 MG TABLET	GLUCOPHAGE	11.04.02
METFORMIN HCL 850 MG TABLET	GLUCOPHAGE	11.04.02
METFORMIN HCL SA 500 MG TAB SR 24 HR	GLUCOPHAGE XR	11.04.02
METFORMIN HCL SA 750 MG TAB SR 24 HR	GLUCOPHAGE XR	11.04.02
METHIMAZOLE 10 MG TABLET	TAPAZOLE	11.05
METHIMAZOLE 5 MG TABLET	TAPAZOLE	11.05

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METHYLPRED ACETATE VL 40 MG/ML INJECTION	DEPO-MEDROL	10.01
METHYLPRED ACETATE VL 80 MG/ML INJECTION	DEPO-MEDROL	10.01
METHYLPRED SOD SUCC 40 MG INJECTION	SOLU-MEDROL	10.01
METHYLPRED SOD SUCC VL 125 MG INJECTION	SOLU-MEDROL	10.01
METHYLPRED SOD SUCC VL 1GM INJECTION	SOLU-MEDROL	10.01
METHYLPRED SOD SUCC VL 500 MG INJECTION	SOLU-MEDROL	10.01
METOCLOPRAMIDE 10 MG TABLET	REGLAN	12.07
METOCLOPRAMIDE 5 MG TABLET	REGLAN	12.07
METOPROLOL TART 100 MG TABLET	LOPRESSOR	05.06.01
METOPROLOL TART 25 MG TABLET	LOPRESSOR	05.06.01
METOPROLOL TART 50 MG TABLET	LOPRESSOR	05.06.01
METOPROLOL TARTRATE 25 MG TABLET	LOPRESSOR	05.06.01
METOPROLOL TARTRATE 50 MG TABLET	LOPRESSOR	05.06.01
METRONIDAZOLE 250 MG TABLET	FLAGYL	03.14
METRONIDAZOLE 500 MG TABLET	FLAGYL	03.14
METRONIDAZOLE-VAG 0.75% GEL (JELLY)	METROGEL VAGINAL	17.02
METRONIDAZOLE/NACL 500 MG/100 ML INJECTION	FLAGYL IVPB	03.14
MICONAZOLE TOPICAL 2% CREAM	MONISTAT-DERM	08.02
MICONAZOLE VAGINAL 100 MG SUPPOSITORY	MONISTAT 7	17.02
MILK OF MAGNESIA 80MEQ/30 ML SUSPENSION	MOM	12.05
MINERAL OIL OIL	MINERAL OIL	12.05
MINOCYCLINE HCL 100 MG CAPSULE	MINOCIN	03.13
MINOCYCLINE HCL 50 MG CAPSULE	MINOCIN	03.13
MINOXIDIL 10 MG TABLET	LONITEN	05.12.02
MINOXIDIL 2.5 MG TABLET	LONITEN	05.12.02
MIRTAZAPINE 15 MG TABLET	REMERON	06.01.03
MIRTAZAPINE 30 MG TABLET	REMERON	06.01.03
MIRTAZAPINE 45 MG TABLET	REMERON	06.01.03
MONTELUKAST 10 MG TABLET	SINGULAIR	19.06
MORPHINE SULF ER 100 MG TAB SR 12 HR	MS CONTIN	01.04
MORPHINE SULF ER 15 MG TAB SR 12 HR	MS CONTIN	01.04
MORPHINE SULF ER 30 MG TAB SR 12 HR	MS CONTIN	01.04
MORPHINE SULF ER 60 MG TAB SR 12 HR	MS CONTIN	01.04
MORPHINE SULFATE 10 MG/ML INJECTION	MORPHINE SULFATE	01.04
MORPHINE SULFATE 15 MG TABLET	MSIR	01.04
MORPHINE SULFATE 30 MG TABLET	MSIR	01.04
MORPHINE SULFATE 4 MG/ML INJECTION	MORPHINE SULFATE	01.04
MORPHINE SULFATE ER 100 MG TAB SR 12 HR	MS CONTIN	01.04
MORPHINE SULFATE ER 15 MG TAB SR 12 HR	MS CONTIN	01.04
MORPHINE SULFATE ER 30 MG TAB SR 12 HR	MS CONTIN	01.04
MORPHINE SULFATE ER 60 MG TAB SR 12 HR	MS CONTIN	01.04
MORPHINE VIAL 10 MG/ML INJECTION	MORPHINE SULFATE INJ	01.04
NALOXONE HCL 0.4 MG/ML INJECTION	NARCAN	10.01
NALOXONE HCL SYRG 0.4 MG/ML INJECTION	NARCAN INJ	10.01
NAPHAZOLINE EYE DROPS 0.012% OPHTHALMIC	NAPHCON	18.02
NAPHAZOLINE/PHENIR O/S OPHTHALMIC	NAPHCON-A	18.02
NAPROXEN 250 MG TABLET	NAPROSYN	01.06
NAPROXEN 375 MG TABLET	NAPROSYN	01.06
NAPROXEN 500 MG TABLET	NAPROSYN	01.06
NELFINAVIR MESYLATE 250 MG TABLET	VIRACEPT	03.09.05
NELFINAVIR MESYLATE 625 MG TABLET	VIRACEPT	03.09.05

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NEOMY/BAC/POLY O/O OPHTHALMIC	NEOSPORIN	18.03
NEOMY/POLY B/GRAM SOL OPHTHALMIC	NEOSPORIN	18.03
NEOMY/POLYMX/HC SOLN OTIC	CORTISPORIN OTIC	18.05
NEOMY/POLYMX/HC SUSP OTIC	CORTISPORIN OTIC	18.05
NEOMY/POLYMYX/DEX O/O OPHTHALMIC	MAXITROL	18.03
NEOMY/POLYMYX/DEX O/S OPHTHALMIC	MAXITROL/DEXACIDIN	18.03
NEVIRAPINE 200 MG TABLET	VIRAMUNE	03.09.03
NIACIN 100 MG TABLET	NIACIN	05.05.02
NIACIN 250 MG TABLET	NIACIN	05.05.02
NIACIN 50 MG TABLET	NIACIN	05.05.02
NIACIN 500 MG TABLET	NIACIN	05.05.02
NIACIN- TIME REL 250 MG TAB CR	SLO-NIACIN	05.05.02
NIACIN- TIME REL 500 MG TAB CR	SLO-NIACIN	05.05.02
NIACIN- TIME REL 750 MG TAB CR	SLO-NIACIN	05.05.02
NITROGLYCERIN 6.5 MG CAP CR	NITRO-BID	05.12.01
NITROGLYCERIN SL 1/150 (0.4MG) TAB SUBL	NITROSTAT	05.12.01
NITROGLYCERIN SL 1/150 (0.4MG) TAB SUBL	NITROSTAT	10.01
NORETH/ESTRAD 1-0.035 MG TABLET	ORTHO-NOVUM 1/35	17.01
NORETH/MESTRAN 1-0.050 MG TABLET	ORTHO-NOVUM 1/50	17.01
NORTRIPTYLINE HCL 10 MG CAPSULE	PAMELOR	01.05
NORTRIPTYLINE HCL 10 MG CAPSULE	PAMELOR	06.01.01
NORTRIPTYLINE HCL 25 MG CAPSULE	PAMELOR	01.05
NORTRIPTYLINE HCL 25 MG CAPSULE	PAMELOR	06.01.01
NORTRIPTYLINE HCL 50 MG CAPSULE	PAMELOR	01.05
NORTRIPTYLINE HCL 50 MG CAPSULE	PAMELOR	06.01.01
NORTRIPTYLINE HCL 75 MG CAPSULE	PAMELOR	01.05
NORTRIPTYLINE HCL 75 MG CAPSULE	PAMELOR	06.01.01
NS 1000 ML + KCL 20 MEQ INJECTION	NORMAL SALINE+ KCL	09.01
NYSTATIN 100,000 U/GM CREAM	MYCOSTATIN	08.02
NYSTATIN 100,000 U/GM OINTMENT	MYCOSTATIN	08.02
NYSTATIN 100,000 U/ML SUSPENSION	MYCOSTATIN	03.02
OFLOXACIN O/S 0.3% OPHTHALMIC	OCUFLOX	18.03
OMEPRAZOLE 10 MG CAP DELAY-REL	PRILOSEC	12.10
OMEPRAZOLE 20 MG CAP DELAY-REL	PRILOSEC	12.10
OMEPRAZOLE 40 MG CAP DELAY-REL	PRILOSEC	12.10
ONDANSETRON ODT 4 MG TAB DISPERS	ZOFRAN ODT	12.04
ONDANSETRON ODT 8 MG TAB DISPERS	ZOFRAN ODT	12.04
OXYBUTYNIN CHLORIDE 5 MG TABLET	DITROPAN	13.02
OXYBUTYNIN CL 5 MG TABLET	DITROPAN	13.02
PANCREALIPASE 5-17-27 CAP DELAY-REL	ZENPEP	12.06
PARICALCITOL VIAL 2 MCG/ML INJECTION	ZEMPLAR	11.08
PARICALCITOL VIAL 5 MCG/ML INJECTION	ZEMPLAR	11.08
PAROXETINE HCL 10 MG TABLET	PAXIL	06.01.02
PAROXETINE HCL 20 MG TABLET	PAXIL	06.01.02
PAROXETINE HCL 30 MG TABLET	PAXIL	06.01.02
PAROXETINE HCL 40 MG TABLET	PAXIL	06.01.02
PEG 3350/ELECTROLYTE SOLUTION	GOLYTELY	12.05
PEGINTERFERON A-2B 120 UG/0.5ML INJECTION	PEG-INTRON	12.08.02
PEGINTERFERON A-2B 150 UG/0.5ML INJECTION	PEG-INTRON	12.08.02
PEGINTERFERON A-2B 50 UG/0.5ML INJECTION	PEG-INTRON	12.08.02
PEGINTERFERON A-2B 80 UG/0.5ML INJECTION	PEG-INTRON	12.08.02

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PEN-G BENZATHINE 1.2 MILLION UNITS INJECTION	BICILLIN LA	03.11
PEN-G BENZATHINE 2.4 MILLION UNITS INJECTION	BICILLIN LA	03.11
PEN-G PROCAINE 1.2 MILLION UNITS INJECTION	WYCILLIN	03.11
PENICILLIN V-K 250 MG TABLET	PEN-VK	03.11
PENICILLIN V-K 500 MG TABLET	PEN-VK	03.11
PENICILLIN VK SUSP 250MG/5 ML SUSPENSION	PEN-VK ORAL SUSP	03.11
PENICILLIN-G POTASSIUM 5 MU INJECTION	PENICILLIN	03.11
PERMETHRIN 5% CREAM	ELIMITE/ACTICIN	08.07
PERPHENAZINE 16 MG TABLET	TRILAFON	06.02.01
PERPHENAZINE 2 MG TABLET	TRILAFON	06.02.01
PERPHENAZINE 4 MG TABLET	TRILAFON	06.02.01
PERPHENAZINE 8 MG TABLET	TRILAFON	06.02.01
PHENAZOPYRIDINE HCL 100 MG TABLET	PYRIDIUM	13.02
PHENAZOPYRIDINE HCL 200 MG TABLET	PYRIDIUM	13.02
PHENOBARBITAL 16.2 MG TABLET	PHENOBARBITAL	06.03
PHENOBARBITAL 16.2 MG TABLET	PHENOBARBITAL	16.02
PHENOBARBITAL 32.4 MG TABLET	PHENOBARBITAL	06.03
PHENOBARBITAL 32.4 MG TABLET	PHENOBARBITAL	16.02
PHENOBARBITAL 64.8 MG TABLET	PHENOBARBITAL	06.03
PHENOBARBITAL 64.8 MG TABLET	PHENOBARBITAL	16.02
PHENOBARBITAL 97.2 MG TABLET	PHENOBARBITAL	06.03
PHENOBARBITAL 97.2 MG TABLET	PHENOBARBITAL	16.02
PHENYLEPHRINE 10 MG TABLET	SUDAFED PE	02.05
PHENYTOIN 125 MG/5 ML SUSPENSION	DILANTIN-125	16.02
PHENYTOIN SOD *EXT* 100 MG CAPSULE	DILANTIN	16.02
PHENYTOIN SOD *EXT* 30 MG CAPSULE	DILANTIN	16.02
PHENYTOIN SOD 100 MG/2 ML INJECTION	DILANTIN	10.01
PHENYTOIN SOD VIAL 50 MG/ML INJECTION	DILANTIN	10.01
PHYTONADIONE AMP 10 MG/ML INJECTION	AQUA-MEPHYTON	10.01
PHYTONADIONE AMP 10 MG/ML INJECTION	AQUA-MEPHYTON	21.01
PILOCARPINE HCL O/S 1% OPHTHALMIC	ISOPTO CARPINE	18.01
PILOCARPINE HCL O/S 2% OPHTHALMIC	ISOPTO CARPINE	18.01
PILOCARPINE HCL O/S 4% OPHTHALMIC	ISOPTO CARPINE	18.01
PINK BISMUTH 262 MG TAB CHEW	PEPTO-BISMOL	12.03
PINK BISMUTH LIQ 262 MG/15 ML SUSPENSION	PEPTO-BISMOL	12.03
PNEUMOCOCCAL VACC SDV INJECTION	PNEUMOVAX 23	20.01
PODOPHYLLUM RESIN 25% SOLUTION	PODODERM	08.09
POTASSIUM CL 10 MEQ TAB CR	K-DUR	21.01
POTASSIUM CL 10% 20 MEQ/15ML LIQUID	POTASSIUM CHLORIDE	10.01
POTASSIUM CL 10% 20 MEQ/15ML LIQUID	POTASSIUM CHLORIDE	21.01
POTASSIUM CL 20 MEQ TAB CR	KLOR-CON M20	21.01
POTASSIUM CL 8 MEQ TAB CR	SLOW-K	21.01
POTASSIUM CL IVPB 10 MEQ/100 ML INJECTION	POTASSIUM CHLORIDE	10.01
POTASSIUM CL IVPB 10 MEQ/100 ML INJECTION	POTASSIUM CHLORIDE	21.01
POTASSIUM CL IVPB 20 MEQ/100 ML INJECTION	POTASSIUM CHLORIDE	10.01
POTASSIUM CL IVPB 20 MEQ/100 ML INJECTION	POTASSIUM CHLORIDE	21.01
POTASSIUM EFF 25 MEQ TAB EFFERVES	K-LYTE	21.01
PREDNISOLONE ACET O/S 1% OPHTHALMIC	PRED FORTE	18.04
PREDNISONE 1 MG TABLET	DELTASONE	11.06
PREDNISONE 10 MG TABLET	DELTASONE	11.06
PREDNISONE 2.5 MG TABLET	DELTASONE	11.06

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PREDNISONONE 20 MG TABLET	DELTASONE	11.06
PREDNISONONE 5 MG TABLET	DELTASONE	11.06
PREDNISONONE 50 MG TABLET	DELTASONE	11.06
PREDNISONONE DOSEPAK 10 MG TABLET	PREDNISONONE	11.06
PREDNISONONE DOSEPAK 5 MG TABLET	PREDNISONONE	11.06
PREDNISONONE- 10 MG TABLET	DELTASONE	11.06
PREDNISONONE- 20 MG TABLET	DELTASONE	11.06
PREDNISONONE- 5 MG TABLET	DELTASONE	11.06
PRENATAL VIT TABLET	PRENATAL VIT	21.01
PROBENECID 500 MG TABLET	BENEMID	01.02
PROCHLORPERAZINE 10 MG TABLET	COMPAZINE	12.04
PROCHLORPERAZINE 5 MG TABLET	COMPAZINE	12.04
PROCHLORPERAZINE MAL 25 MG SUPPOSITORY	COMPAZINE	12.04
PROMETHAZINE HCL 12.5 MG TABLET	PHENERGAN	12.04
PROMETHAZINE HCL 25 MG TABLET	PHENERGAN	12.04
PROMETHAZINE HCL 25 MG/ML INJECTION	PHENERGAN	12.04
PROMETHAZINE HCL 50 MG TABLET	PHENERGAN	12.04
PROPARACAINE HCL O/S 0.33%-4% OPHTHALMIC	OPHTHETIC	18.06
PROPRANOLOL HCL 10 MG TABLET	INDERAL	05.06.02
PROPRANOLOL HCL 20 MG TABLET	INDERAL	05.06.02
PROPRANOLOL HCL 40 MG TABLET	INDERAL	05.06.02
PROPRANOLOL HCL 80 MG TABLET	INDERAL	05.06.02
PYRAZINAMIDE 500 MG TABLET	PYRAZINAMIDE	03.05
PYRETHRINS/PIPERONYL 0.33%-4% SHAMPOO	LICE TREATMENT	08.07
PYRIDOXINE HCL 100 MG TABLET	VITAMIN B-6	21.01
PYRIDOXINE HCL 25 MG TABLET	VITAMIN B-6	21.01
PYRIDOXINE HCL 50 MG TABLET	VITAMIN B-6	21.01
PYRIMETHAMINE 25 MG TABLET	DARAPRIM	03.04
RALTEGRAVIR 400 MG TABLET	ISENTRESS	03.09.02
RANITIDINE HCL 150 MG TABLET	ZANTAC	12.09
RANITIDINE HCL 300 MG TABLET	ZANTAC	12.09
RIFABUTIN 150 MG CAPSULE	MYCOBUTIN	03.05
RIFAMPIN 300 MG CAPSULE	RIFADIN	03.05
RISPERIDONE 0.5 MG TABLET	RISPERDAL	06.02.02
RISPERIDONE 1 MG TABLET	RISPERDAL	06.02.02
RISPERIDONE 1 MG/ML SOLUTION	RISPERDAL SOLN	06.02.02
RISPERIDONE 2 MG TABLET	RISPERDAL	06.02.02
RISPERIDONE 3 MG TABLET	RISPERDAL	06.02.02
RISPERIDONE 4 MG TABLET	RISPERDAL	06.02.02
RITONAVIR 100 MG TABLET	NORVIR	03.09.05
SALICYLIC ACID PLASTER 40%	MEDIPLAST PATCH	08.09
SAQUINAVIR*INVIRASE 200 MG CAPSULE	INVIRASE	03.09.05
SAQUINAVIR*INVIRASE 500 MG TABLET	INVIRASE	03.09.05
SELENIUM SULFIDE 2.5% SHAMPOO	SELSUN-RX LOTION	08.09
SERTRALINE HCL 100 MG TABLET	ZOLOFT	06.01.02
SERTRALINE HCL 25 MG TABLET	ZOLOFT	06.01.02
SERTRALINE HCL 50 MG TABLET	ZOLOFT	06.01.02
SEVELAMER CARBONATE 800 MG TABLET	REVELA	12.11
SILVER SULFADIAZINE 1% CREAM	SILVADENE	08.03
SIMETHICONE 80 MG TAB CHEW	MYLANTA GAS	12.02
SIMETHICONE 80 MG TAB CHEW	MYLANTA GAS	12.11

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SIMETHICONE PROTOCOL 125 MG TAB CHEW	MYLANTA GAS	12.02
SIMETHICONE PROTOCOL 125 MG TAB CHEW	MYLANTA GAS	12.11
SIMVASTATIN 10 MG TABLET	ZOCOR	05.05.01
SIMVASTATIN 20 MG TABLET	ZOCOR	05.05.01
SIMVASTATIN 40 MG TABLET	ZOCOR	05.05.01
SIMVASTATIN 5 MG TABLET	ZOCOR	05.05.01
SOD BICARBONATE 325 MG TABLET	SODIUM BICARB	13.02
SOD BICARBONATE 650 MG TABLET	SODIUM BICARB	13.02
SOD CHL BACTERIOSTAT VL (10ML 0.9% INJECTION	NORMAL SALINE	09.01
SOD CHL BACTERIOSTAT VL (30ML 0.9% INJECTION	NORMAL SALINE	09.01
SOD CHL NASAL SPRAY 0.65%	OCEAN/DEEP SEA	19.04
SOD CHL PRESERV-FREE VL (10ML 0.9% INJECTION	NORMAL SALINE	09.01
SOD CHL PRESERV-FREE VL (20ML 0.9% INJECTION	NORMAL SALINE	09.01
SOD CHLORIDE 0.9% INJECTION	NORMAL SALINE	09.01
SOD CHLORIDE IV 0.9 % INJECTION	NORMAL SALINE	09.01
SOD CHLORIDE IV 0.9% INJECTION	NORMAL SALINE	09.01
SOD POLYSTY SULF 15GM/60 ML SUSPENSION	KAYEXALATE SUSP	10.01
SODIUM PHOSPHATE ENEMA ENEMA	FLEET ENEMA	12.05
SPIRONOLACTONE 100 MG TABLET	ALDACTONE	05.10
SPIRONOLACTONE 25 MG TABLET	ALDACTONE	05.10
SPIRONOLACTONE 50 MG TABLET	ALDACTONE	05.10
STAVUDINE 15 MG CAPSULE	ZERIT	03.09.04
STAVUDINE 20 MG CAPSULE	ZERIT	03.09.04
STAVUDINE 30 MG CAPSULE	ZERIT	03.09.04
STAVUDINE 40 MG CAPSULE	ZERIT	03.09.04
SULFACETAMIDE SOD O/S 10% OPHTHALMIC	SULAMYD	18.03
SULFAMETH-TRIMETH 800-160 MG TABLET	BACTRIM DS	03.12
SULFAMETH/TRIMETH 400/80 MG TABLET	BACTRIM/SEPTRA	03.12
SULFAMETH/TRIMETH VL 80-16 MG/ML INJECTION	BACTRIM INJ	03.12
TACROLIMUS ANHYDROUS 0.5 MG CAPSULE	PROGRAF	15.01
TACROLIMUS ANHYDROUS 1 MG CAPSULE	PROGRAF	15.01
TACROLIMUS ANHYDROUS 5 MG CAPSULE	PROGRAF	15.01
TAMOXIFEN CITRATE 10 MG TABLET	NOLVADEX	04.01
TAMOXIFEN CITRATE 20 MG TABLET	NOLVADEX	04.01
TAMSULOSIN HCL 0.4 MG CAP SR 24 HR	FLOMAX	13.01
TENOFOVIR DISOPROXIL 300 MG TABLET	VIREAD	03.09.04
TETANUS-DIPHThERIA TOX INJECTION	DECAVAC / TENIVAC	20.01
THIAMINE HCL 100 MG TABLET	VITAMIN B-1	10.01
THIAMINE HCL 100 MG TABLET	VITAMIN B-1	21.01
THIAMINE HCL 50 MG TABLET	VITAMIN B-1	10.01
THIAMINE HCL 50 MG TABLET	VITAMIN B-1	21.01
THIAMINE HCL MDV 100 MG/ML INJECTION	VITAMIN B-1	10.01
THIAMINE HCL MDV 100 MG/ML INJECTION	VITAMIN B-1	21.01
THIOTHIXENE 1 MG CAPSULE	NAVANE	06.02.01
THIOTHIXENE 10 MG CAPSULE	NAVANE	06.02.01
THIOTHIXENE 2 MG CAPSULE	NAVANE	06.02.01
THIOTHIXENE 5 MG CAPSULE	NAVANE	06.02.01
TIMOLOL MAL SOLN 0.25% OPHTHALMIC	TIMOPTIC	18.01
TIMOLOL MAL SOLN 0.5% OPHTHALMIC	TIMOPTIC	18.01
TIPRANA VIR 250 MG CAPSULE	APTIVUS	03.09.05
TOBRAMYCIN MDV 40 MG/ML INJECTION	NEBCIN INJ	03.01

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TOBRAMYCIN O/S 0.3% OPHTHALMIC	TOBREX	18.03
TOBRAMYCIN OINT 0.3% OPHTHALMIC	TOBREX	18.03
TOBRAMYCIN VIAL 80 MG/2 ML INJECTION	NEBCIN INJ	03.01
TOLNAFTATE 1% CREAM	TINACTIN	08.02
TRIAMCINOLONE 0 025% CR 0.025% CREAM	KENALOG	08.08.02
TRIAMCINOLONE 0 025% CR 0.025% CREAM	KENALOG	08.08.03
TRIAMCINOLONE 0 025% LOT 0.025% LOTION	KENALOG	08.08.02
TRIAMCINOLONE 0 025% LOT 0.025% LOTION	KENALOG	08.08.03
TRIAMCINOLONE 0 025% OINT 0.025% OINTMENT	KENALOG	08.08.02
TRIAMCINOLONE 0 025% OINT 0.025% OINTMENT	KENALOG	08.08.03
TRIAMCINOLONE 0 1% CR 0.1% CREAM	KENALOG	08.08.02
TRIAMCINOLONE 0 1% CR 0.1% CREAM	KENALOG	08.08.03
TRIAMCINOLONE 0 1% LOT 0.1% LOTION	KENALOG	08.08.02
TRIAMCINOLONE 0 1% LOT 0.1% LOTION	KENALOG	08.08.03
TRIAMCINOLONE 0 1% OINT 0.1% OINTMENT	KENALOG	08.08.02
TRIAMCINOLONE 0 1% OINT 0.1% OINTMENT	KENALOG	08.08.03
TRIAMCINOLONE 0 5% CR 0.5% CREAM	KENALOG	08.08.02
TRIAMCINOLONE 0 5% CR 0.5% CREAM	KENALOG	08.08.03
TRIAMCINOLONE 0 5% OINT 0.5% OINTMENT	KENALOG	08.08.02
TRIAMCINOLONE 0 5% OINT 0.5% OINTMENT	KENALOG	08.08.03
TRIAMCINOLONE ACET VL 40 MG/ML INJECTION	KENALOG	11.06
TRIAMCINOLONE ACET VL 40 MG/ML INJECTION	KENALOG INJ	11.06
TRIFLUOPERAZINE HCL 1 MG TABLET	STELAZINE	06.02.01
TRIFLUOPERAZINE HCL 10 MG TABLET	STELAZINE	06.02.01
TRIFLUOPERAZINE HCL 2 MG TABLET	STELAZINE	06.02.01
TRIFLUOPERAZINE HCL 5 MG TABLET	STELAZINE	06.02.01
TRIHEXYPHENIDYL HCL 2 MG TABLET	ARTANE	06.99
TRIHEXYPHENIDYL HCL 5 MG TABLET	ARTANE	06.99
TROPICAMIDE O/S 1% OPHTHALMIC	MYDRIACYL	18.06
TUBERCULIN PPD VL 5 TU/0.1ML INJECTION	APLISOL/TUBERSOL	09.01
VANCOMYCIN HCL 1GM INJECTION	VANCOCIN	03.14
VANCOMYCIN HCL 500 MG INJECTION	VANCOCIN	03.14
VANCOMYCIN HCL VIAL 1GM INJECTION	VANCOCIN	03.14
VANCOMYCIN HCL VIAL 500 MG INJECTION	VANCOCIN	03.14
VENLAFAXINE HCL XR 150 MG CAP SR 24 HR	EFFEXOR XR	01.05
VENLAFAXINE HCL XR 150 MG CAP SR 24 HR	EFFEXOR XR	06.01.02
VENLAFAXINE HCL XR 37.5 MG CAP SR 24 HR	EFFEXOR XR	01.05
VENLAFAXINE HCL XR 37.5 MG CAP SR 24 HR	EFFEXOR XR	06.01.02
VENLAFAXINE HCL XR 75 MG CAP SR 24 HR	EFFEXOR XR	01.05
VENLAFAXINE HCL XR 75 MG CAP SR 24 HR	EFFEXOR XR	06.01.02
VERAPAMIL HCL 120 MG TABLET	CALAN	05.07.02
VERAPAMIL HCL 40 MG TABLET	CALAN	05.07.02
VERAPAMIL HCL 80 MG TABLET	CALAN	05.07.02
VERAPAMIL HCL SR 120 MG TAB CR	CALAN SR	05.07.02
VERAPAMIL HCL SR 180 MG TAB CR	CALAN SR	05.07.02
VERAPAMIL HCL SR 240 MG TAB CR	CALAN SR	05.07.02
VITAMIN B COMP W-C/FA TABLET	NEPHRO-VITE	21.01
WARFARIN SOD 1 MG TABLET	JANTOVEN	05.11
WARFARIN SOD 10 MG TABLET	JANTOVEN	05.11
WARFARIN SOD 2 MG TABLET	JANTOVEN	05.11
WARFARIN SOD 2.5 MG TABLET	JANTOVEN	05.11

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WARFARIN SOD 3 MG TABLET	JANTOVEN	05.11
WARFARIN SOD 4 MG TABLET	JANTOVEN	05.11
WARFARIN SOD 5 MG TABLET	JANTOVEN	05.11
WARFARIN SOD 6 MG TABLET	JANTOVEN	05.11
WARFARIN SOD 7.5 MG TABLET	JANTOVEN	05.11
WATER INJECTION	STERILE WATER	09.01
WHITE PETROLATUM O/O 83% OPHTHALMIC	REFRESH PM	18.06
ZIDOVUDINE 10 MG/ML SYRUP	RETROVIR SYRUP	03.09.04
ZIDOVUDINE 100 MG CAPSULE	RETROVIR	03.09.04
ZIDOVUDINE 300 MG TABLET	RETROVIR	03.09.04
ZIPRASIDONE HCL 20 MG CAPSULE	GEODON	06.02.02
ZIPRASIDONE HCL 40 MG CAPSULE	GEODON	06.02.02
ZIPRASIDONE HCL 60 MG CAPSULE	GEODON	06.02.02
ZIPRASIDONE HCL 80 MG CAPSULE	GEODON	06.02.02

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EPINEPHRINE AMP 1:1000 (1 MG/ML) INJECTION	ADRENALIN	10.01
EPINEPHRINE AMP 1:1000 (1 MG/ML) INJECTION	ADRENALIN	19.02
EPINEPHRINE VL 1:1000 INJECTION	ADRENALIN	10.01
IBUPROFEN 200 MG TABLET	ADVIL	01.06
CALCIUM CARBONATE 420 MG TAB CHEW	ALCALAK	12.02
SPIRONOLACTONE 100 MG TABLET	ALDACTONE	05.10
SPIRONOLACTONE 25 MG TABLET	ALDACTONE	05.10
SPIRONOLACTONE 50 MG TABLET	ALDACTONE	05.10
INFLUENZA-PF VACC SYG 2015-2016 INJECTION	ALFURIA	20.01
BRIMONIDINE SOLN 0.2% OPHTHALMIC	ALPHAGAN	18.01
CICLESONIDE 160 MCG INHALER	ALVESCO	19.03
CICLESONIDE 80 MCG INHALER	ALVESCO	19.03
AMINOPHYLLINE VL 250 MG/10 ML INJECTION	AMINOPHYLLINE	19.06
AMOXICILLIN 250 MG CAPSULE	AMOXIL	03.11
AMOXICILLIN 500 MG CAPSULE	AMOXIL	03.11
AMPICILLIN 1 GRAM INJECTION	AMPICILLIN	03.11
AMPICILLIN 1GM INJECTION	AMPICILLIN	03.11
AMPICILLIN 500 MG INJECTION	AMPICILLIN	03.11
ANALGESIC BALM OINTMENT	ANALGESIC BALM	08.09
CEFAZOLIN SOD 1 GM INJECTION	ANCEF	03.07
CEFAZOLIN SOD 1GM INJECTION	ANCEF	03.07
MECLIZINE HCL 12.5 MG TABLET	ANTIVERT	16.05
MECLIZINE HCL 25 MG TABLET	ANTIVERT	16.05
HEMORROIDAL HC 2.5% CREAM	ANUSOL-HC / PROCTOSOL-HC	12.12
HEMORRHOIDAL PLAIN SUPPOSITORY	ANUSOL/VERSAL	12.12
APLISOL VL 5 TU / 0.1 ML INJECTION	APLISOL	09.01
TUBERCULIN PPD VL 5 TU/0.1ML INJECTION	APLISOL/TUBERSOL	09.01
HYDRALAZINE HCL 10 MG TABLET	APRESOLINE	05.12.02
HYDRALAZINE HCL 25 MG TABLET	APRESOLINE	05.12.02
HYDRALAZINE HCL 50 MG TABLET	APRESOLINE	05.12.02
TIPRANAVIR 250 MG CAPSULE	APTIVUS	03.09.05
PHYTONADIONE AMP 10 MG/ML INJECTION	AQUA-MEPHYTON	10.01
PHYTONADIONE AMP 10 MG/ML INJECTION	AQUA-MEPHYTON	21.01
TRIHEXYPHENIDYL HCL 2 MG TABLET	ARTANE	06.99
TRIHEXYPHENIDYL HCL 5 MG TABLET	ARTANE	06.99
ASPIRIN 325 MG TABLET	ASA FC	01.07
ASPIRIN 325 MG TABLET	ASPIRIN	01.07
LORAZEPAM VIAL 2 MG/ML INJECTION	ATIVAN	06.06.01
LORAZEPAM VIAL 2 MG/ML INJECTION	ATIVAN	10.01
ATROPINE SYRINGE 0.1 MG/ML INJECTION	ATROPINE SULFATE	10.01
IPRATROPIUM BROM 17 MCG INHALER	ATROVENT HFA	19.01
IPRATROPIUM INH 0.02% SOLUTION	ATROVENT SOLN	19.01
AMOXICILLIN/CLAV 500-125 MG TABLET	AUGMENTIN	03.11
AMOXICILLIN/CLAV 875-125 MG TABLET	AUGMENTIN	03.11
BACITRACIN 500 U/G OINTMENT	BACITRACIN	08.03
BACITRACIN O/O 500 U/G OPHTHALMIC	BACITRACIN	18.03
BACITRACIN PACKET 500 U/G OINTMENT	BACITRACIN	08.03
SULFAMETH-TRIMETH 800-160 MG TABLET	BACTRIM DS	03.12
SULFAMETH/TRIMETH VL 80-16 MG/ML INJECTION	BACTRIM INJ	03.12
SULFAMETH/TRIMETH 400/80 MG TABLET	BACTRIM/SEPTRA	03.12
DIPHENHYDRAMINE SYRG 50 MG/ML INJECTION	BENADRYL	02.01

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DIPHENHYDRAMINE SYRG 50 MG/ML INJECTION	BENADRYL	10.01
DIPHENHYDRAMINE VIAL 50 MG/ML INJECTION	BENADRYL	02.01
DIPHENHYDRAMINE VIAL 50 MG/ML INJECTION	BENADRYL	10.01
PROBENECID 500 MG TABLET	BENEMID	01.02
DICYCLOMINE HCL 10 MG CAPSULE	BENTYL	12.07
DICYCLOMINE HCL 20 MG TABLET	BENTYL	12.07
BENZOYL PEROXIDE 10% GEL (JELLY)	BENZAGEL	08.01
BENZOYL PEROXIDE 5% GEL (JELLY)	BENZAGEL	08.01
LEVOBUNOLOL HCL O/S 0.5% OPHTHALMIC	BETAGAN	18.01
PEN-G BENZATHINE 1.2 MILLION UNITS INJECTION	BICILLIN LA	03.11
PEN-G BENZATHINE 2.4 MILLION UNITS INJECTION	BICILLIN LA	03.11
CALAMINE 8% LOTION	CALAMINE	08.05
VERAPAMIL HCL 120 MG TABLET	CALAN	05.07.02
VERAPAMIL HCL 40 MG TABLET	CALAN	05.07.02
VERAPAMIL HCL 80 MG TABLET	CALAN	05.07.02
VERAPAMIL HCL SR 120 MG TAB CR	CALAN SR	05.07.02
VERAPAMIL HCL SR 180 MG TAB CR	CALAN SR	05.07.02
VERAPAMIL HCL SR 240 MG TAB CR	CALAN SR	05.07.02
CALCITRIOL 1 MCG/ML INJECTION	CALCITRIOL	11.08
DILTIAZEM CD 300 MG CAP CD 24 HR	CARDIZEM-CD	05.07.02
CARPUJECT HOLDER DEVICE	CARPUJECT	09.01
CLONIDINE HCL 0.1 MG TABLET	CATAPRES	05.09
CLONIDINE HCL 0.2 MG TABLET	CATAPRES	05.09
CLONIDINE HCL 0.3 MG TABLET	CATAPRES	05.09
LOMUSTINE 40 MG CAPSULE	CEENU	04.01
CITALOPRAM 10 MG TABLET	CELEXA	06.01.02
CITALOPRAM 20 MG TABLET	CELEXA	06.01.02
CITALOPRAM 40 MG TABLET	CELEXA	06.01.02
CHLORPHENIRAMINE 4 MG TABLET	CHLORTRIMETON	02.01
CHLORPHENIRAMINE MAL 4 MG TABLET	CHLORTRIMETON	02.01
LACTULOSE 10GM/15 ML SOLUTION	CHRONULAC	12.05
CIPROFLOXACIN HCL 250 MG TABLET	CIPRO	03.08
CIPROFLOXACIN HCL 500 MG TABLET	CIPRO	03.08
CIPROFLOXACIN HCL 750 MG TABLET	CIPRO	03.08
MAGNESIUM CITRATE SOLUTION	CITRATE OF MAG	12.05
LORATADINE 10 MG TABLET	CLARITIN	02.02
CLINDAMYCIN HCL 150 MG CAPSULE	CLEOCIN	03.10
CLINDAMYCIN HCL 300 MG CAPSULE	CLEOCIN	03.10
CLINDAMYCIN IVPB 300 MG INJECTION	CLEOCIN	03.10
CLINDAMYCIN IVPB 900 MG INJECTION	CLEOCIN	03.10
CLINDAMYCIN PHOS ADV 600 MG/4 ML INJECTION	CLEOCIN	03.10
CLINDAMYCIN PHOS VL 150 MG/ML INJECTION	CLEOCIN INJ	03.10
CLINDAMYCIN IVPB 600 MG INJECTION	CLEOCIN IVPB	03.10
BENZTROPINE MES 0.5 MG TABLET	COGENTIN	06.99
BENZTROPINE MES 0.5 MG TABLET	COGENTIN	16.03
BENZTROPINE MES 1 MG TABLET	COGENTIN	06.99
BENZTROPINE MES 1 MG TABLET	COGENTIN	16.03
BENZTROPINE MES 2 MG TABLET	COGENTIN	06.99
BENZTROPINE MES 2 MG TABLET	COGENTIN	16.03
DOCUSATE SOD 100 MG CAPSULE	COLACE	12.05
DOCUSATE SOD PROTOCOL 100 MG CAPSULE	COLACE	12.05

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BALSALAZIDE DISODIUM 750 MG CAPSULE	COLAZAL	12.01
LAMIVUDINE - AZT 150/300 MG TABLET	COMBIVIR	03.09.06
PROCHLORPERAZINE 10 MG TABLET	COMPAZINE	12.04
PROCHLORPERAZINE 5 MG TABLET	COMPAZINE	12.04
PROCHLORPERAZINE MAL 25 MG SUPPOSITORY	COMPAZINE	12.04
AMIODARONE HCL 200 MG TABLET	CORDARONE	05.04.04
CARVEDILOL 12.5 MG TABLET	COREG	05.06.03
CARVEDILOL 25 MG TABLET	COREG	05.06.03
CARVEDILOL 3.125 MG TABLET	COREG	05.06.03
CARVEDILOL 6.25 MG TABLET	COREG	05.06.03
NEOMY/POLYMX/HC SOLN OTIC	CORTISPORIN OTIC	18.05
NEOMY/POLYMX/HC SUSP OTIC	CORTISPORIN OTIC	18.05
LOSARTAN POTASSIUM 100 MG TABLET	COZAAR	05.03
LOSARTAN POTASSIUM 25 MG TABLET	COZAAR	05.03
LOSARTAN POTASSIUM 50 MG TABLET	COZAAR	05.03
INDINAVIR 200 MG CAPSULE	CRIXIVAN	03.09.05
INDINAVIR 400 MG CAPSULE	CRIXIVAN	03.09.05
GANCICLOVIR VIAL 500 MG INJECTION	CYTOVENE INJ	03.06
DEXTROSE 50% INJECTION	D-50W	09.01
D5-1/2NS + KCL 20 MEQ INJECTION	D5-1/2NS + KCL	09.01
DEXTROSE-NACL 5%-0.45% INJECTION	D5-1/2NS 1000ML	09.01
D5-NS + KCL 20 MEQ 5%-0.9%-20MEQ INJECTION	D5-NS + KCL	09.01
DEXTROSE WATER 5% INJECTION	D5-W 100ML	09.01
DEXTROSE WATER 5% INJECTION	D5-W 250ML	09.01
DEXTROSE WATER 5% INJECTION	D5-W 500ML	09.01
DEXTROSE WATER 5% INJECTION	D5-W 1000ML	09.01
DEXTROSE WATER- 5% INJECTION	D5-W ADVANTAGE	09.01
DEXTROSE 50% INJECTION	D50-W	09.01
EYE WASH IRRG OPHTHALMIC	DACRIOSE	18.06
DAPSONE 100 MG TABLET	DAPSONE	03.09.07
DAPSONE 25 MG TABLET	DAPSONE	03.09.07
PYRIMETHAMINE 25 MG TABLET	DARAPRIM	03.04
CARBAMIDE PEROXIDE OTIC 6.5% OTIC	DEBROX EAR DROPS	18.05
DEXAMETHASONE VIAL 4 MG/ML INJECTION	DECADRON INJ	10.01
TETANUS-DIPHThERIA TOX INJECTION	DECAVAC / TENIVAC	20.01
PREDNISONONE 1 MG TABLET	DELTASONE	11.06
PREDNISONONE 10 MG TABLET	DELTASONE	11.06
PREDNISONONE 2.5 MG TABLET	DELTASONE	11.06
PREDNISONONE 20 MG TABLET	DELTASONE	11.06
PREDNISONONE 5 MG TABLET	DELTASONE	11.06
PREDNISONONE 50 MG TABLET	DELTASONE	11.06
PREDNISONONE- 10 MG TABLET	DELTASONE	11.06
PREDNISONONE- 20 MG TABLET	DELTASONE	11.06
PREDNISONONE- 5 MG TABLET	DELTASONE	11.06
DIVALPROEX SODIUM 125 MG TAB EC	DEPAKOTE	06.05
DIVALPROEX SODIUM 125 MG TAB EC	DEPAKOTE	16.02
DIVALPROEX SODIUM 250 MG TAB EC	DEPAKOTE	06.05
DIVALPROEX SODIUM 250 MG TAB EC	DEPAKOTE	16.02
DIVALPROEX SODIUM 500 MG TAB EC	DEPAKOTE	06.05
DIVALPROEX SODIUM 500 MG TAB EC	DEPAKOTE	16.02
METHYLPRED ACETATE VL 40 MG/ML INJECTION	DEPO-MEDROL	10.01

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METHYLPRED ACETATE VL 80 MG/ML INJECTION	DEPO-MEDROL	10.01
ACETAZOLAMIDE 250 MG TABLET	DIAMOX	05.10
FLUCONAZOLE 100 MG TABLET	DIFLUCAN	03.02
FLUCONAZOLE 150 MG TABLET	DIFLUCAN	03.02
FLUCONAZOLE 200 MG TABLET	DIFLUCAN	03.02
FLUCONAZOLE 50 MG TABLET	DIFLUCAN	03.02
DILTIAZEM CD 120 MG CAP CD 24 HR	DILACOR XR	05.07.02
DILTIAZEM CD 180 MG CAP CD 24 HR	DILACOR XR	05.07.02
DILTIAZEM CD 240 MG CAP CD 24 HR	DILACOR XR	05.07.02
PHENYTOIN SOD *EXT* 100 MG CAPSULE	DILANTIN	16.02
PHENYTOIN SOD *EXT* 30 MG CAPSULE	DILANTIN	16.02
PHENYTOIN SOD 100 MG/2 ML INJECTION	DILANTIN	10.01
PHENYTOIN SOD VIAL 50 MG/ML INJECTION	DILANTIN	10.01
PHENYTOIN 125 MG/5 ML SUSPENSION	DILANTIN-125	16.02
BETAMETHASONE-AUG 0.05% CREAM	DIPROLENE AF	08.08.01
BETAMETHASONE-AUG 0.05% CREAM	DIPROLENE AF	08.08.02
OXYBUTYNIN CHLORIDE 5 MG TABLET	DITROPAN	13.02
OXYBUTYNIN CL 5 MG TABLET	DITROPAN	13.02
COAL TAR SHAMPOO 0.5% SHAMPOO	DOAK TAR/THERA-GEL	08.04
BISACODYL 5 MG TAB EC	DULCOLAX	12.05
BISACODYL 5 MG TABLET	DULCOLAX	12.05
BISACODYL 10 MG SUPPOSITORY	DULCOLAX SUPP	12.05
DICLOXACILLIN 250 MG CAPSULE	DYNAPEN	03.11
DICLOXACILLIN 500 MG CAPSULE	DYNAPEN	03.11
ASA 325 MG TAB EC	ECOTRIN	01.07
ASPIRIN EC 81 MG TAB EC	ECOTRIN	01.07
VENLAFAXINE HCL XR 150 MG CAP SR 24 HR	EFFEXOR XR	01.05
VENLAFAXINE HCL XR 150 MG CAP SR 24 HR	EFFEXOR XR	06.01.02
VENLAFAXINE HCL XR 37.5 MG CAP SR 24 HR	EFFEXOR XR	01.05
VENLAFAXINE HCL XR 37.5 MG CAP SR 24 HR	EFFEXOR XR	06.01.02
VENLAFAXINE HCL XR 75 MG CAP SR 24 HR	EFFEXOR XR	01.05
VENLAFAXINE HCL XR 75 MG CAP SR 24 HR	EFFEXOR XR	06.01.02
PERMETHRIN 5% CREAM	ELIMITE/ACTICIN	08.07
EMTRICITABINE 200 MG CAPSULE	EMTRIVA	03.09.04
LAMIVUDINE 150 MG TABLET	EPIVIR	03.09.04
LAMIVUDINE 300 MG TABLET	EPIVIR	03.09.04
LAMIVUDINE- 10 MG/ML SOLUTION	EPIVIR	03.09.04
LAMIVUDINE 100 MG TABLET	EPIVIR HBV	12.08.01
ERYTHROMYCIN TOPICAL 2% SOLUTION	ERYMAX	08.01
LITHIUM CARB 300 MG CAPSULE	ESKALITH	06.05
LITHIUM CARBONATE 150 MG CAPSULE	ESKALITH	06.05
LITHIUM CARBONATE 300 MG CAPSULE	ESKALITH	06.05
ESTRADIOL 0.5 MG TABLET	ESTRACE	11.02
ESTRADIOL 1 MG TABLET	ESTRACE	11.02
ESTRADIOL 2 MG TABLET	ESTRACE	11.02
APAP-ASA-CAFF 250-250-65 MG TABLET	EXCEDRIN MIGRAINE	01.03
APAP-ASA-CAFFEINE 250-250-65 MG TABLET	EXCEDRIN MIGRAINE	01.03
FERROUS SULFATE 325 MG TAB EC	FESO4	21.01
FERROUS SULFATE 325 MG TABLET	FESO4	21.01
CALCIUM POLYCARB 625 MG TABLET	FIBER-LAX	12.05
METRONIDAZOLE 250 MG TABLET	FLAGYL	03.14

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METRONIDAZOLE 500 MG TABLET	FLAGYL	03.14
METRONIDAZOLE/NACL 500 MG/100 ML INJECTION	FLAGYL IVPB	03.14
SODIUM PHOSPHATE ENEMA ENEMA	FLEET ENEMA	12.05
TAMSULOSIN HCL 0.4 MG CAP SR 24 HR	FLOMAX	13.01
FLUORESCEIN NA/BENOX O/S 0.25% OPHTHALMIC	FLURESS	18.06
INFLUENZA VACCINE 2015-2016 INJECTION	FLUVIRIN	20.01
FOLIC ACID 1 MG TABLET	FOLIC ACID	21.01
HEMORRHOIDAL PLAIN OINTMENT	FORMULATION R	12.12
ALENDRONATE SODIUM 35 MG TABLET	FOSAMAX	11.07
ALENDRONATE SODIUM 70 MG TABLET	FOSAMAX	11.07
LANTHANUM CARB 1000 MG TAB CHEW	FOSRENOL	21.01
LANTHANUM CARB 500 MG TAB CHEW	FOSRENOL	21.01
LANTHANUM CARB 750 MG TAB CHEW	FOSRENOL	21.01
FLUORESCEIN SOD STRIP 1 MG STRIP	FUL-GLO	18.06
GENTAMICIN MDV 40 MG/ML INJECTION	GARAMYCIN	03.01
GENTAMICIN O/O 0.3% OPHTHALMIC	GARAMYCIN	18.03
GENTAMICIN VIAL 40 MG/ML INJECTION	GARAMYCIN	03.01
GENTAMICIN O/S 0.3% OPHTHALMIC	GARAMYCIN EYE DROPS	18.03
GENTAMICIN 100 MG/NS 100ML INJECTION	GARAMYCIN IVPB	03.01
GENTAMICIN 120 MG/NS 100 ML INJECTION	GARAMYCIN IVPB	03.01
GENTAMICIN 80 MG/NS 100 ML INJECTION	GARAMYCIN IVPB	03.01
ZIPRASIDONE HCL 20 MG CAPSULE	GEODON	06.02.02
ZIPRASIDONE HCL 40 MG CAPSULE	GEODON	06.02.02
ZIPRASIDONE HCL 60 MG CAPSULE	GEODON	06.02.02
ZIPRASIDONE HCL 80 MG CAPSULE	GEODON	06.02.02
GLUCAGON 1 MG INJECTION	GLUCAGEN	11.08
GLUCAGON SYRINGE 1 MG INJECTION	GLUCAGON EMERGENCY KIT	10.01
METFORMIN HCL 1000 MG TABLET	GLUCOPHAGE	11.04.02
METFORMIN HCL 500 MG TABLET	GLUCOPHAGE	11.04.02
METFORMIN HCL 850 MG TABLET	GLUCOPHAGE	11.04.02
METFORMIN HCL SA 500 MG TAB SR 24 HR	GLUCOPHAGE XR	11.04.02
METFORMIN HCL SA 750 MG TAB SR 24 HR	GLUCOPHAGE XR	11.04.02
GLIPIZIDE 10 MG TABLET	GLUCOTROL	11.04.01
GLIPIZIDE 5 MG TABLET	GLUCOTROL	11.04.01
GLUCOSE 40% GEL (JELLY)	GLUTOSE 15	11.08
PEG 3350/ELECTROLYTE SOLUTION	GOLYTELY	12.05
CLOTRIMAZOLE VAGINAL 1% CREAM	GYNE LOTRIMIN	17.02
HALOPERIDOL 0.5 MG TABLET	HALDOL	06.02.01
HALOPERIDOL 1 MG TABLET	HALDOL	06.02.01
HALOPERIDOL 10 MG TABLET	HALDOL	06.02.01
HALOPERIDOL 2 MG TABLET	HALDOL	06.02.01
HALOPERIDOL 20 MG TABLET	HALDOL	06.02.01
HALOPERIDOL 5 MG TABLET	HALDOL	06.02.01
HALOPERIDOL DEC 100 MG/ML INJECTION	HALDOL	06.02.01
HALOPERIDOL DEC 50 MG/ML INJECTION	HALDOL	06.02.01
HALOPERIDOL DEC VL 100 MG/ML INJECTION	HALDOL	06.02.01
HALOPERIDOL DEC VL 50 MG/ML INJECTION	HALDOL	06.02.01
HALOPERIDOL LACTATE VL 5 MG/ML INJECTION	HALDOL	06.02.01
HALOPERIDOL LACTATE VL 5 MG/ML INJECTION	HALDOL	10.01
HALOPERIDOL ORAL 2 MG/ML CONCENTRATE	HALDOL	06.02.01
HYDROCHLOROTHIAZIDE 12.5 MG CAPSULE	HCTZ	05.10

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DOXERCALCIFEROL 2 MCG/ML INJECTION	HECTOROL	11.08
HEMORRHOIDAL HC 1% OINTMENT	HEMORRHOIDAL HC	08.08.04
HEMORRHOIDAL HC 1% OINTMENT	HEMORRHOIDAL HC	12.12
HEPARIN SODIUM VL 10 U/ML INJECTION	HEP-LOCK	05.11
HEPARIN SODIUM VL 100 U/ML INJECTION	HEP-LOCK	05.11
HEPARIN SODIUM MDV 10,000 U/ML INJECTION	HEPARIN	05.11
HEPARIN SODIUM VL 1,000 U/ML INJECTION	HEPARIN	05.11
HEPARIN SODIUM VL 10,000 U/ML INJECTION	HEPARIN	05.11
HEPARIN SODIUM VL 5,000 U/ML INJECTION	HEPARIN	05.11
INSULIN HUM 70/30 VL 100 U/ML INJECTION	HUMULIN 70/30	11.03
INSULIN HUM NPH VL 100 U/ML INJECTION	HUMULIN N	11.03
INSULIN HUM REG VL 100 U/ML INJECTION	HUMULIN R	11.03
HYDROXYUREA 500 MG CAPSULE	HYDREA	04.01
HYDROCHLOROTHIAZIDE 25 MG TABLET	HYDRODIURIL	05.10
HYDROCORTISONE CR 1% CREAM	HYTONE	08.08.04
HYDROCORTISONE CR 1% CREAM	HYTONE	12.12
HYDROCORTISONE LOT 1% LOTION	HYTONE	08.08.04
HYDROCORTISONE LOT 1% LOTION	HYTONE	12.12
HYDROCORTISONE OINT 1% OINTMENT	HYTONE	08.08.04
HYDROCORTISONE OINT 1% OINTMENT	HYTONE	12.12
ERYTHROMYCIN O/O 0.5% OPHTHALMIC	ILOTYCIN	18.03
ISOSORBIDE-MONONIT 120 MG TAB SR 24 HR	IMDUR	05.12.01
ISOSORBIDE-MONONIT 30 MG TAB SR 24 HR	IMDUR	05.12.01
ISOSORBIDE-MONONIT 60 MG TAB SR 24 HR	IMDUR	05.12.01
LOPERAMIDE 2 MG CAPSULE	IMODIUM	12.03
LOPERAMIDE 2 MG TABLET	IMODIUM	12.03
AZATHIOPRINE 50 MG TABLET	IMURAN	15.01
PROPRANOLOL HCL 10 MG TABLET	INDERAL	05.06.02
PROPRANOLOL HCL 20 MG TABLET	INDERAL	05.06.02
PROPRANOLOL HCL 40 MG TABLET	INDERAL	05.06.02
PROPRANOLOL HCL 80 MG TABLET	INDERAL	05.06.02
INDOMETHACIN 25 MG CAPSULE	INDOCIN	01.06
INDOMETHACIN 50 MG CAPSULE	INDOCIN	01.06
IRON DEXTRAN COMP 50 MG/ML INJECTION	INFED	21.01
ISONIAZID 100 MG TABLET	INH	03.05
ISONIAZID 300 MG TABLET	INH	03.05
ETRAVIRINE 100 MG TABLET	INTELENCE	03.09.03
ETRAVIRINE 200 MG TABLET	INTELENCE	03.09.03
SAQUINAVIR*INVIRASE 200 MG CAPSULE	INVIRASE	03.09.05
SAQUINAVIR*INVIRASE 500 MG TABLET	INVIRASE	03.09.05
RALTEGRAVIR 400 MG TABLET	ISENTRESS	03.09.02
PILOCARPINE HCL O/S 1% OPHTHALMIC	ISOPTO CARPINE	18.01
PILOCARPINE HCL O/S 2% OPHTHALMIC	ISOPTO CARPINE	18.01
PILOCARPINE HCL O/S 4% OPHTHALMIC	ISOPTO CARPINE	18.01
HOMATROPINE HBR O/S 5% OPHTHALMIC	ISOPTO HOMATROPINE	18.06
WARFARIN SOD 1 MG TABLET	JANTOVEN	05.11
WARFARIN SOD 10 MG TABLET	JANTOVEN	05.11
WARFARIN SOD 2 MG TABLET	JANTOVEN	05.11
WARFARIN SOD 2.5 MG TABLET	JANTOVEN	05.11
WARFARIN SOD 3 MG TABLET	JANTOVEN	05.11
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WARFARIN SOD 5 MG TABLET	JANTOVEN	05.11
WARFARIN SOD 6 MG TABLET	JANTOVEN	05.11
WARFARIN SOD 7.5 MG TABLET	JANTOVEN	05.11
POTASSIUM CL 10 MEQ TAB CR	K-DUR	21.01
POTASSIUM EFF 25 MEQ TAB EFFERVES	K-LYTE	21.01
LOPINAVIR/RITON 400-100/5 ML SOLUTION	KALETRA SUSP	03.09.05
LOPINAVIR/RITONAVIR 200 MG-50 MG TABLET	KALETRA TAB	03.09.05
SOD POLYSTY SULF 15GM/60 ML SUSPENSION	KAYEXALATE SUSP	10.01
CEFAZOLIN SOD VIAL 500 MG INJECTION	KEFZOL	03.07
TRIAMCINOLONE 0.025% CR 0.025% CREAM	KENALOG	08.08.02
TRIAMCINOLONE 0.025% CR 0.025% CREAM	KENALOG	08.08.03
TRIAMCINOLONE 0.025% LOT 0.025% LOTION	KENALOG	08.08.02
TRIAMCINOLONE 0.025% LOT 0.025% LOTION	KENALOG	08.08.03
TRIAMCINOLONE 0.025% OINT 0.025% OINTMENT	KENALOG	08.08.02
TRIAMCINOLONE 0.025% OINT 0.025% OINTMENT	KENALOG	08.08.03
TRIAMCINOLONE 0.1% CR 0.1% CREAM	KENALOG	08.08.02
TRIAMCINOLONE 0.1% CR 0.1% CREAM	KENALOG	08.08.03
TRIAMCINOLONE 0.1% LOT 0.1% LOTION	KENALOG	08.08.02
TRIAMCINOLONE 0.1% LOT 0.1% LOTION	KENALOG	08.08.03
TRIAMCINOLONE 0.1% OINT 0.1% OINTMENT	KENALOG	08.08.02
TRIAMCINOLONE 0.1% OINT 0.1% OINTMENT	KENALOG	08.08.03
TRIAMCINOLONE 0.5% CR 0.5% CREAM	KENALOG	08.08.02
TRIAMCINOLONE 0.5% CR 0.5% CREAM	KENALOG	08.08.03
TRIAMCINOLONE 0.5% OINT 0.5% OINTMENT	KENALOG	08.08.02
TRIAMCINOLONE 0.5% OINT 0.5% OINTMENT	KENALOG	08.08.03
TRIAMCINOLONE ACET VL 40 MG/ML INJECTION	KENALOG	11.06
TRIAMCINOLONE ACET VL 40 MG/ML INJECTION	KENALOG INJ	11.06
LEVETIRACETAM 1000 MG TABLET	KEPPRA	16.02
LEVETIRACETAM 250 MG TABLET	KEPPRA	16.02
LEVETIRACETAM 500 MG TABLET	KEPPRA	16.02
LEVETIRACETAM 750 MG TABLET	KEPPRA	16.02
POTASSIUM CL 20 MEQ TAB CR	KLOR-CON M20	21.01
LACTATED RINGERS INJECTION	LACTATED RINGERS	09.01
LAMOTRIGINE 100 MG TABLET	LAMICTAL	06.05
LAMOTRIGINE 100 MG TABLET	LAMICTAL	16.02
LAMOTRIGINE 150 MG TABLET	LAMICTAL	06.05
LAMOTRIGINE 150 MG TABLET	LAMICTAL	16.02
LAMOTRIGINE 200 MG TABLET	LAMICTAL	06.05
LAMOTRIGINE 200 MG TABLET	LAMICTAL	16.02
LAMOTRIGINE 25 MG TABLET	LAMICTAL	06.05
LAMOTRIGINE 25 MG TABLET	LAMICTAL	16.02
DIGOXIN 0.125 MG TABLET	LANOXIN	05.08
DIGOXIN 0.25 MG TABLET	LANOXIN	05.08
DIGOXIN AMP 0.25 MG/ML INJECTION	LANOXIN INJ	05.08
FUROSEMIDE 20 MG TABLET	LASIX	05.10
FUROSEMIDE 40 MG TABLET	LASIX	05.10
FUROSEMIDE 80 MG TABLET	LASIX	05.10
FUROSEMIDE VIAL 100 MG/10 ML INJECTION	LASIX	05.10
FUROSEMIDE VIAL 100 MG/10 ML INJECTION	LASIX	10.01
FUROSEMIDE VIAL 20 MG/2 ML INJECTION	LASIX	05.10
FUROSEMIDE VIAL 20 MG/2 ML INJECTION	LASIX	10.01

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FUROSEMIDE VIAL 40 MG/4 ML INJECTION	LASIX	05.10
FUROSEMIDE VIAL 40 MG/4 ML INJECTION	LASIX	10.01
FOSAMPRENAVIR CA 700 MG TABLET	LEXIVA	03.09.05
CHLORDIAZEPOXIDE 10 MG CAPSULE	LIBRIUM	06.06.01
CHLORDIAZEPOXIDE 25 MG CAPSULE	LIBRIUM	06.06.01
CHLORDIAZEPOXIDE 5 MG CAPSULE	LIBRIUM	06.06.01
PYRETHRINS/PIPERONYL 0.33%-4% SHAMPOO	LICE TREATMENT	08.07
ATORVASTATIN 10 MG TABLET	LIPITOR	05.05.01
ATORVASTATIN 20 MG TABLET	LIPITOR	05.05.01
ATORVASTATIN 40 MG TABLET	LIPITOR	05.05.01
ATORVASTATIN 80 MG TABLET	LIPITOR	05.05.01
ARTIFICIAL TEARS 1.4% OPHTHALMIC	LIQUIFILM TEARS	18.06
MINOXIDIL 10 MG TABLET	LONITEN	05.12.02
MINOXIDIL 2.5 MG TABLET	LONITEN	05.12.02
GEMFIBROZIL 600 MG TABLET	LOPID	05.05.02
METOPROLOL TART 100 MG TABLET	LOPRESSOR	05.06.01
METOPROLOL TART 25 MG TABLET	LOPRESSOR	05.06.01
METOPROLOL TART 50 MG TABLET	LOPRESSOR	05.06.01
METOPROLOL TARTRATE 25 MG TABLET	LOPRESSOR	05.06.01
METOPROLOL TARTRATE 50 MG TABLET	LOPRESSOR	05.06.01
CLOTRIMAZOLE 1% CREAM	LOTRIMIN/MYCELEX	08.02
CLOTRIMAZOLE 1% SOLUTION	LOTRIMIN/MYCELEX	08.02
LOXAPINE SUCCINATE 10 MG CAPSULE	LOXITANE	06.02.01
LOXAPINE SUCCINATE 25 MG CAPSULE	LOXITANE	06.02.01
LOXAPINE SUCCINATE 5 MG CAPSULE	LOXITANE	06.02.01
LOXAPINE SUCCINATE 50 MG CAPSULE	LOXITANE	06.02.01
BUPIVACAINE HCL VL 0.25% INJECTION	MARCAINE	22.01
BUPIVACAINE HCL/EPI VL 0.25% INJECTION	MARCAINE EPI	22.01
NEOMY/POLYMYX/DEX O/O OPHTHALMIC	MAXITROL	18.03
NEOMY/POLYMYX/DEX O/S OPHTHALMIC	MAXITROL/DEXACIDIN	18.03
SALICYLIC ACID PLASTER 40%	MEDIPLAST PATCH	08.09
MENINGOCOCCAL VACCINE INJECTION	MENACTRA	20.01
METRONIDAZOLE-VAG 0.75% GEL (JELLY)	METROGEL VAGINAL	17.02
MAGNESIUM SO4 50% VL 4 MEQ/ML INJECTION	MGSO4 INJ	10.01
MINERAL OIL OIL	MINERAL OIL	12.05
MINOCYCLINE HCL 100 MG CAPSULE	MINOCIN	03.13
MINOCYCLINE HCL 50 MG CAPSULE	MINOCIN	03.13
MELOXICAM 15 MG TABLET	MOBIC	01.06
MELOXICAM 7.5 MG TABLET	MOBIC	01.06
MILK OF MAGNESIA 80MEQ/30 ML SUSPENSION	MOM	12.05
MICONAZOLE VAGINAL 100 MG SUPPOSITORY	MONISTAT 7	17.02
MICONAZOLE TOPICAL 2% CREAM	MONISTAT-DERM	08.02
ISOSORBIDE-MONONIT 10 MG TABLET	MONOKET	05.12.01
ISOSORBIDE-MONONIT 20 MG TABLET	MONOKET	05.12.01
MORPHINE SULFATE 10 MG/ML INJECTION	MORPHINE SULFATE	01.04
MORPHINE SULFATE 4 MG/ML INJECTION	MORPHINE SULFATE	01.04
MORPHINE VIAL 10 MG/ML INJECTION	MORPHINE SULFATE INJ	01.04
IBUPROFEN 400 MG TABLET	MOTRIN	01.06
IBUPROFEN 600 MG TABLET	MOTRIN	01.06
MORPHINE SULF ER 100 MG TAB SR 12 HR	MS CONTIN	01.04
MORPHINE SULF ER 15 MG TAB SR 12 HR	MS CONTIN	01.04

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MORPHINE SULF ER 30 MG TAB SR 12 HR	MS CONTIN	01.04
MORPHINE SULF ER 60 MG TAB SR 12 HR	MS CONTIN	01.04
MORPHINE SULFATE ER 100 MG TAB SR 12 HR	MS CONTIN	01.04
MORPHINE SULFATE ER 15 MG TAB SR 12 HR	MS CONTIN	01.04
MORPHINE SULFATE ER 30 MG TAB SR 12 HR	MS CONTIN	01.04
MORPHINE SULFATE ER 60 MG TAB SR 12 HR	MS CONTIN	01.04
MORPHINE SULFATE 15 MG TABLET	MSIR	01.04
MORPHINE SULFATE 30 MG TABLET	MSIR	01.04
GUAIFENESIN 400 MG TABLET	MUCUS RELIEF	02.04
ETHAMBUTOL HCL 100 MG TABLET	MYAMBUTOL	03.05
ETHAMBUTOL HCL 400 MG TABLET	MYAMBUTOL	03.05
CLOTRIMAZOLE 10 MG TROCHE	MYCELEX	03.02
RIFABUTIN 150 MG CAPSULE	MYCOBUTIN	03.05
NYSTATIN 100,000 U/GM CREAM	MYCOSTATIN	08.02
NYSTATIN 100,000 U/GM OINTMENT	MYCOSTATIN	08.02
NYSTATIN 100,000 U/ML SUSPENSION	MYCOSTATIN	03.02
TROPICAMIDE O/S 1% OPHTHALMIC	MYDRIACYL	18.06
MAG/ALUM HYD/SIMETH TAB CHEW	MYLANTA	12.02
MAG/ALUM HYD/SIMETH 200/200/20 SUSPENSION	MYLANTA SUSP	12.02
SIMETHICONE 80 MG TAB CHEW	MYLANTA GAS	12.02
SIMETHICONE 80 MG TAB CHEW	MYLANTA GAS	12.11
SIMETHICONE PROTOCOL 125 MG TAB CHEW	MYLANTA GAS	12.02
SIMETHICONE PROTOCOL 125 MG TAB CHEW	MYLANTA GAS	12.11
NAPHAZOLINE EYE DROPS 0.012% OPHTHALMIC	NAPHCON	18.02
NAPHAZOLINE/PHENIR O/S OPHTHALMIC	NAPHCON-A	18.02
NAPROXEN 250 MG TABLET	NAPROSYN	01.06
NAPROXEN 375 MG TABLET	NAPROSYN	01.06
NAPROXEN 500 MG TABLET	NAPROSYN	01.06
NALOXONE HCL 0.4 MG/ML INJECTION	NARCAN	10.01
NALOXONE HCL SYRG 0.4 MG/ML INJECTION	NARCAN INJ	10.01
THIOTHIXENE 1 MG CAPSULE	NAVANE	06.02.01
THIOTHIXENE 10 MG CAPSULE	NAVANE	06.02.01
THIOTHIXENE 2 MG CAPSULE	NAVANE	06.02.01
THIOTHIXENE 5 MG CAPSULE	NAVANE	06.02.01
TOBRAMYCIN MDV 40 MG/ML INJECTION	NEBCIN INJ	03.01
TOBRAMYCIN VIAL 80 MG/2 ML INJECTION	NEBCIN INJ	03.01
CYCLOSPORINE MODIFIED 100 MG/ML SOLUTION	NEORAL SOLUTION	15.01
CYCLOSPORINE MODIFY 100 MG CAPSULE	NEORAL/GENGRAF	15.01
CYCLOSPORINE MODIFY 25 MG CAPSULE	NEORAL/GENGRAF	15.01
NEOMY/BAC/POLY O/O OPHTHALMIC	NEOSPORIN	18.03
NEOMY/POLY B/GRAM SOL OPHTHALMIC	NEOSPORIN	18.03
VITAMIN B COMP W-C/FA TABLET	NEPHRO-VITE	21.01
NIACIN 100 MG TABLET	NIACIN	05.05.02
NIACIN 250 MG TABLET	NIACIN	05.05.02
NIACIN 50 MG TABLET	NIACIN	05.05.02
NIACIN 500 MG TABLET	NIACIN	05.05.02
IRON POLYSAC COMP 150 MG CAPSULE	NIFEREX 150	21.01
NITROGLYCERIN 6.5 MG CAP CR	NITRO-BID	05.12.01
NITROGLYCERIN SL 1/150 (0.4MG) TAB SUBL	NITROSTAT	05.12.01
NITROGLYCERIN SL 1/150 (0.4MG) TAB SUBL	NITROSTAT	10.01
TAMOXIFEN CITRATE 10 MG TABLET	NOLVADEX	04.01

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TAMOXIFEN CITRATE 20 MG TABLET	NOLVADEX	04.01
SOD CHL BACTERIOSTAT VL (10ML 0.9% INJECTION	NORMAL SALINE	09.01
SOD CHL BACTERIOSTAT VL (30ML 0.9% INJECTION	NORMAL SALINE	09.01
SOD CHL PRESERV-FREE VL (10ML 0.9% INJECTION	NORMAL SALINE	09.01
SOD CHL PRESERV-FREE VL (20ML 0.9% INJECTION	NORMAL SALINE	09.01
SOD CHLORIDE 0.9% INJECTION	NORMAL SALINE	09.01
SOD CHLORIDE IV 0.9 % INJECTION	NORMAL SALINE	09.01
SOD CHLORIDE IV 0.9% INJECTION	NORMAL SALINE	09.01
NS 1000 ML + KCL 20 MEQ INJECTION	NORMAL SALINE+ KCL	09.01
AMLODIPINE BESY 10 MG TABLET	NORVASC	05.07.01
AMLODIPINE BESY 2.5 MG TABLET	NORVASC	05.07.01
AMLODIPINE BESY 5 MG TABLET	NORVASC	05.07.01
AMLODIPINE BESYLATE 10 MG TABLET	NORVASC	05.07.01
AMLODIPINE BESYLATE 2.5 MG TABLET	NORVASC	05.07.01
AMLODIPINE BESYLATE 5 MG TABLET	NORVASC	05.07.01
RITONAVIR 100 MG TABLET	NORVIR	03.09.05
DIBUCAINE 1% OINTMENT	NUPERCAINAL	12.12
SOD CHL NASAL SPRAY 0.65%	OCEAN/DEEP SEA	19.04
OFLOXACIN O/S 0.3% OPHTHALMIC	OCUFLOX	18.03
PROPARACAINE HCL O/S 0.5% OPHTHALMIC	OPHTHETIC	18.06
NORETH/ESTRAD 1-0.035 MG TABLET	ORTHO-NOVUM 1/35	17.01
NORETH/MESTRAN 1-0.050 MG TABLET	ORTHO-NOVUM 1/50	17.01
CALCIUM CARBONATE 1250 MG TABLET	OSCAL	21.01
CALCIUM CARB 1250MG/VIT D 1250 MG TABLET	OSCAL-D 500	21.01
NORTRIPTYLINE HCL 10 MG CAPSULE	PAMELOR	01.05
NORTRIPTYLINE HCL 10 MG CAPSULE	PAMELOR	06.01.01
NORTRIPTYLINE HCL 25 MG CAPSULE	PAMELOR	01.05
NORTRIPTYLINE HCL 25 MG CAPSULE	PAMELOR	06.01.01
NORTRIPTYLINE HCL 50 MG CAPSULE	PAMELOR	01.05
NORTRIPTYLINE HCL 50 MG CAPSULE	PAMELOR	06.01.01
NORTRIPTYLINE HCL 75 MG CAPSULE	PAMELOR	01.05
NORTRIPTYLINE HCL 75 MG CAPSULE	PAMELOR	06.01.01
PAROXETINE HCL 10 MG TABLET	PAXIL	06.01.02
PAROXETINE HCL 20 MG TABLET	PAXIL	06.01.02
PAROXETINE HCL 30 MG TABLET	PAXIL	06.01.02
PAROXETINE HCL 40 MG TABLET	PAXIL	06.01.02
PEGINTERFERON A-2B 120 UG/0.5ML INJECTION	PEG-INTRON	12.08.02
PEGINTERFERON A-2B 150 UG/0.5ML INJECTION	PEG-INTRON	12.08.02
PEGINTERFERON A-2B 50 UG/0.5ML INJECTION	PEG-INTRON	12.08.02
PEGINTERFERON A-2B 80 UG/0.5ML INJECTION	PEG-INTRON	12.08.02
PENICILLIN V-K 250 MG TABLET	PEN-VK	03.11
PENICILLIN V-K 500 MG TABLET	PEN-VK	03.11
PENICILLIN VK SUSP 250MG/5 ML SUSPENSION	PEN-VK ORAL SUSP	03.11
PENICILLIN-G POTASSIUM 5 MU INJECTION	PENICILLIN	03.11
PINK BISMUTH 262 MG TAB CHEW	PEPTO-BISMOL	12.03
PINK BISMUTH LIQ 262 MG/15 ML SUSPENSION	PEPTO-BISMOL	12.03
CYPROHEPTADINE 4 MG TABLET	PERIACTIN	02.01
CHLORHEXIDINE GLUC 0.12% SOLUTION	PERIDEX	07.01
PROMETHAZINE HCL 12.5 MG TABLET	PHENERGAN	12.04
PROMETHAZINE HCL 25 MG TABLET	PHENERGAN	12.04
PROMETHAZINE HCL 25 MG/ML INJECTION	PHENERGAN	12.04

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PROMETHAZINE HCL 50 MG TABLET	PHENERGAN	12.04
PHENOBARBITAL 16.2 MG TABLET	PHENOBARBITAL	06.03
PHENOBARBITAL 16.2 MG TABLET	PHENOBARBITAL	16.02
PHENOBARBITAL 32.4 MG TABLET	PHENOBARBITAL	06.03
PHENOBARBITAL 32.4 MG TABLET	PHENOBARBITAL	16.02
PHENOBARBITAL 64.8 MG TABLET	PHENOBARBITAL	06.03
PHENOBARBITAL 64.8 MG TABLET	PHENOBARBITAL	16.02
PHENOBARBITAL 97.2 MG TABLET	PHENOBARBITAL	06.03
PHENOBARBITAL 97.2 MG TABLET	PHENOBARBITAL	16.02
CALCIUM ACETATE 667 MG TABLET	PHOSLO	21.01
HYDROXYCHLOROQUINE 200 MG TABLET	PLAQUENIL	01.09
PNEUMOCOCCAL VACC SDV INJECTION	PNEUMOVAX 23	20.01
PODOPHYLLUM RESIN 25% SOLUTION	PODODERM	08.09
BACITRACIN/POLYMYXIN B OINTMENT	POLYSPORIN	08.03
BACITRACIN/POLYMYXIN B OINTMENT	POLYSPORIN	08.03
POTASSIUM CL 10% 20 MEQ/15ML LIQUID	POTASSIUM CHLORIDE	10.01
POTASSIUM CL 10% 20 MEQ/15ML LIQUID	POTASSIUM CHLORIDE	21.01
POTASSIUM CL IVPB 10 MEQ/100 ML INJECTION	POTASSIUM CHLORIDE	10.01
POTASSIUM CL IVPB 10 MEQ/100 ML INJECTION	POTASSIUM CHLORIDE	21.01
POTASSIUM CL IVPB 20 MEQ/100 ML INJECTION	POTASSIUM CHLORIDE	10.01
POTASSIUM CL IVPB 20 MEQ/100 ML INJECTION	POTASSIUM CHLORIDE	21.01
PREDNISOLONE ACET O/S 1% OPHTHALMIC	PRED FORTE	18.04
PREDNISON DOSEPAK 10 MG TABLET	PREDNISON	11.06
PREDNISON DOSEPAK 5 MG TABLET	PREDNISON	11.06
PRENATAL VIT TABLET	PRENATAL VIT	21.01
DARUNAVIR ETHANOLATE 600 MG TABLET	PREZISTA	03.09.05
DARUNAVIR ETHANOLATE 800 MG TABLET	PREZISTA	03.09.05
OMEPRAZOLE 10 MG CAP DELAY-REL	PRIOSEC	12.10
OMEPRAZOLE 20 MG CAP DELAY-REL	PRIOSEC	12.10
OMEPRAZOLE 40 MG CAP DELAY-REL	PRIOSEC	12.10
ALBUTEROL HFA 90 MCG INHALER	PROAIR HFA	19.02
TACROLIMUS ANHYDROUS 0.5 MG CAPSULE	PROGRAF	15.01
TACROLIMUS ANHYDROUS 1 MG CAPSULE	PROGRAF	15.01
TACROLIMUS ANHYDROUS 5 MG CAPSULE	PROGRAF	15.01
FLUPHENAZINE 10 MG TABLET	PROLIXIN	06.02.01
FLUPHENAZINE 5 MG TABLET	PROLIXIN	06.02.01
FLUPHENAZINE HCL 1 MG TABLET	PROLIXIN	06.02.01
FLUPHENAZINE HCL 10 MG TABLET	PROLIXIN	06.02.01
FLUPHENAZINE HCL 2.5 MG TABLET	PROLIXIN	06.02.01
FLUPHENAZINE HCL 5 MG TABLET	PROLIXIN	06.02.01
FLUPHENAZINE 0.5 MG/ML ELIXIR	PROLIXIN ELIXIR	06.02.01
FLUPHENAZINE 0.5 MG/ML ELIXIR	PROLIXIN ELIXIR	10.01
FLUPHENAZINE DECON VL 25 MG/ML INJECTION	PROLIXIN INJ	06.02.01
FLUPHENAZINE HCL VL 2.5 MG/ML INJECTION	PROLIXIN INJ	06.02.01
FLUPHENAZINE HCL VL 2.5 MG/ML INJECTION	PROLIXIN INJ	10.01
ALBUTEROL INH SOL 0.083% NEBULIZE SOLN	PROVENTIL	19.02
MEDROXYPROGESTERONE 10 MG TABLET	PROVERA	11.02
MEDROXYPROGESTERONE 2.5 MG TABLET	PROVERA	11.02
MEDROXYPROGESTERONE 5 MG TABLET	PROVERA	11.02
FLUOXETINE 10 MG CAPSULE	PROZAC	06.01.02
FLUOXETINE 20 MG CAPSULE	PROZAC	06.01.02

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PYRAZINAMIDE 500 MG TABLET	PYRAZINAMIDE	03.05
PHENAZOPYRIDINE HCL 100 MG TABLET	PYRIDIUM	13.02
PHENAZOPYRIDINE HCL 200 MG TABLET	PYRIDIUM	13.02
HEPATITIS B VACC PF VL 5 MCG/0.5 ML INJECTION	RECOMBIVAX HB PED	20.01
WHITE PETROLATUM O/O 83% OPHTHALMIC	REFRESH PM	18.06
METOCLOPRAMIDE 10 MG TABLET	REGLAN	12.07
METOCLOPRAMIDE 5 MG TABLET	REGLAN	12.07
MIRTAZAPINE 15 MG TABLET	REMERON	06.01.03
MIRTAZAPINE 30 MG TABLET	REMERON	06.01.03
MIRTAZAPINE 45 MG TABLET	REMERON	06.01.03
SEVELAMER CARBONATE 800 MG TABLET	REVELA	12.11
DELAVIRDINE MESYLATE 200 MG TABLET	RESCRIPTOR	03.09.03
ZIDOVUDINE 100 MG CAPSULE	RETROVIR	03.09.04
ZIDOVUDINE 300 MG TABLET	RETROVIR	03.09.04
ZIDOVUDINE 10 MG/ML SYRUP	RETROVIR SYRUP	03.09.04
ATAZANAVIR SULFATE 150 MG CAPSULE	REYATAZ	03.09.05
ATAZANAVIR SULFATE 200 MG CAPSULE	REYATAZ	03.09.05
ATAZANAVIR SULFATE 300 MG CAPSULE	REYATAZ	03.09.05
RIFAMPIN 300 MG CAPSULE	RIFADIN	03.05
RISPERIDONE 0.5 MG TABLET	RISPERDAL	06.02.02
RISPERIDONE 1 MG TABLET	RISPERDAL	06.02.02
RISPERIDONE 2 MG TABLET	RISPERDAL	06.02.02
RISPERIDONE 3 MG TABLET	RISPERDAL	06.02.02
RISPERIDONE 4 MG TABLET	RISPERDAL	06.02.02
RISPERIDONE 1 MG/ML SOLUTION	RISPERDAL SOLN	06.02.02
GUAIFENESIN 200 MG TABLET	ROBITUSSIN	02.04
GUAIFENESIN-DM 100-10/5 ML SYRUP	ROBITUSSIN DM	02.06
GUAIFENESIN 100 MG/5 ML SYRUP	ROBITUSSIN PLAIN	02.04
CALCITRIOL 0.25 MCG CAPSULE	ROCALTROL	11.08
CALCITRIOL 0.5 MCG CAPSULE	ROCALTROL	11.08
CEFTRIAXONE SOD 1 GM INJECTION	ROCEPHIN	03.07
CEFTRIAXONE SOD 1GM INJECTION	ROCEPHIN	03.07
CEFTRIAXONE SOD 2 GM INJECTION	ROCEPHIN	03.07
CEFTRIAXONE SOD 250 MG INJECTION	ROCEPHIN	03.07
CEFTRIAXONE SOD 2GM INJECTION	ROCEPHIN	03.07
CEFTRIAXONE SOD 500 MG INJECTION	ROCEPHIN	03.07
CYCLOSPORINE 100 MG CAPSULE	SANDIMMUNE	15.01
CYCLOSPORINE 25 MG CAPSULE	SANDIMMUNE	15.01
SELENIUM SULFIDE 2.5% SHAMPOO	SELSUN-RX LOTION	08.09
CINACALCET HCL 30 MG TABLET	SENSIPAR	11.08
CINACALCET HCL 60 MG TABLET	SENSIPAR	11.08
CINACALCET HCL 90 MG TABLET	SENSIPAR	11.08
SILVER SULFADIAZINE 1% CREAM	SILVADENE	08.03
CARBIDOPA/LEVODOPA 10-100 MG TABLET	SINEMET	16.03
CARBIDOPA/LEVODOPA 25-100 MG TABLET	SINEMET	16.03
CARBIDOPA/LEVODOPA 25-250 MG TABLET	SINEMET	16.03
MONTELUKAST 10 MG TABLET	SINGULAIR	19.06
NIACIN- TIME REL 250 MG TAB CR	SLO-NIACIN	05.05.02
NIACIN- TIME REL 500 MG TAB CR	SLO-NIACIN	05.05.02
NIACIN- TIME REL 750 MG TAB CR	SLO-NIACIN	05.05.02
POTASSIUM CL 8 MEQ TAB CR	SLOW-K	21.01

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Product Name	Equivalent Brand Name	Therapy Section
SOD BICARBONATE 325 MG TABLET	SODIUM BICARB	13.02
SOD BICARBONATE 650 MG TABLET	SODIUM BICARB	13.02
1/2NS + KCL 20 MEQ INJECTION	SODIUM CHLORIDE 0.45% + KCL	09.01
METHYLPRED SOD SUCC 40 MG INJECTION	SOLU-MEDROL	10.01
METHYLPRED SOD SUCC VL 125 MG INJECTION	SOLU-MEDROL	10.01
METHYLPRED SOD SUCC VL 1GM INJECTION	SOLU-MEDROL	10.01
METHYLPRED SOD SUCC VL 500 MG INJECTION	SOLU-MEDROL	10.01
TRIFLUOPERAZINE HCL 1 MG TABLET	STELAZINE	06.02.01
TRIFLUOPERAZINE HCL 10 MG TABLET	STELAZINE	06.02.01
TRIFLUOPERAZINE HCL 2 MG TABLET	STELAZINE	06.02.01
TRIFLUOPERAZINE HCL 5 MG TABLET	STELAZINE	06.02.01
WATER INJECTION	STERILE WATER	09.01
IVERMECTIN TAB 3 MG TABLET	STROMECTOL	03.03
PHENYLEPHRINE 10 MG TABLET	SUDAFED PE	02.05
SULFACETAMIDE SOD O/S 10% OPHTHALMIC	SULAMYD	18.03
EFAVIRENZ 200 MG CAPSULE	SUSTIVA	03.09.03
EFAVIRENZ 600 MG TABLET	SUSTIVA	03.09.03
AMANTADINE HCL 100 MG CAPSULE	SYMMETREL	03.06
AMANTADINE HCL 100 MG CAPSULE	SYMMETREL	16.03
FLUOCINOLONE 0.01% CREAM	SYNALAR	08.08.03
FLUOCINOLONE 0.01% CREAM	SYNALAR	08.08.04
FLUOCINOLONE 0.01% SOLUTION	SYNALAR	08.08.03
FLUOCINOLONE 0.01% SOLUTION	SYNALAR	08.08.04
FLUOCINOLONE 0.025% CREAM	SYNALAR	08.08.03
FLUOCINOLONE 0.025% CREAM	SYNALAR	08.08.04
FLUOCINOLONE 0.025% OINTMENT	SYNALAR	08.08.03
FLUOCINOLONE 0.025% OINTMENT	SYNALAR	08.08.04
LEVOTHYROXINE SOD 0.025 MG TABLET	SYNTHROID	11.05
LEVOTHYROXINE SOD 0.05 MG TABLET	SYNTHROID	11.05
LEVOTHYROXINE SOD 0.075 MG TABLET	SYNTHROID	11.05
LEVOTHYROXINE SOD 0.088 MG TABLET	SYNTHROID	11.05
LEVOTHYROXINE SOD 0.1 MG TABLET	SYNTHROID	11.05
LEVOTHYROXINE SOD 0.112 MG TABLET	SYNTHROID	11.05
LEVOTHYROXINE SOD 0.125 MG TABLET	SYNTHROID	11.05
LEVOTHYROXINE SOD 0.137 MG TABLET	SYNTHROID	11.05
LEVOTHYROXINE SOD 0.15 MG TABLET	SYNTHROID	11.05
LEVOTHYROXINE SOD 0.175 MG TABLET	SYNTHROID	11.05
LEVOTHYROXINE SOD 0.2 MG TABLET	SYNTHROID	11.05
LEVOTHYROXINE SOD 0.3 MG TABLET	SYNTHROID	11.05
GUAIFENESIN 400 MG TABLET	TAB TUSSIN	02.04
GUAIFENESIN DM 400-20 MG TABLET	TAB TUSSIN DM	02.06
METHIMAZOLE 10 MG TABLET	TAPAZOLE	11.05
METHIMAZOLE 5 MG TABLET	TAPAZOLE	11.05
DILTIAZEM CD 360 MG CAP CD 24 HR	TAZTIA XT	05.07.02
CARBAMAZEPINE 100 MG TAB CHEW	TEGRETOL	06.05
CARBAMAZEPINE 100 MG TAB CHEW	TEGRETOL	16.02
CARBAMAZEPINE 200 MG TABLET	TEGRETOL	06.05
CARBAMAZEPINE 200 MG TABLET	TEGRETOL	16.02
ATENOLOL 100 MG TABLET	TENORMIN	05.06.01
ATENOLOL 25 MG TABLET	TENORMIN	05.06.01
ATENOLOL 50 MG TABLET	TENORMIN	05.06.01

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Product Name	Equivalent Brand Name	Therapy Section
TIMOLOL MAL SOLN 0.25% OPHTHALMIC	TIMOPTIC	18.01
TIMOLOL MAL SOLN 0.5% OPHTHALMIC	TIMOPTIC	18.01
TOLNAFTATE 1% CREAM	TINACTIN	08.02
TOBRAMYCIN O/S 0.3% OPHTHALMIC	TOBREX	18.03
TOBRAMYCIN OINT 0.3% OPHTHALMIC	TOBREX	18.03
IMIPRAMINE HCL 10 MG TABLET	TOFRANIL	06.01.01
IMIPRAMINE HCL 25 MG TABLET	TOFRANIL	06.01.01
IMIPRAMINE HCL 50 MG TABLET	TOFRANIL	06.01.01
PERPHENAZINE 16 MG TABLET	TRILAFON	06.02.01
PERPHENAZINE 2 MG TABLET	TRILAFON	06.02.01
PERPHENAZINE 4 MG TABLET	TRILAFON	06.02.01
PERPHENAZINE 8 MG TABLET	TRILAFON	06.02.01
ABACAV-3TC-AZT 300-150-300 TABLET	TRIZIVIR	03.09.06
DORZOLAMIDE O/S 2% OPHTHALMIC	TRUSOPT	18.01
CALCIUM CARB 500 MG TAB CHEW	TUMS	12.02
APAP 325 MG TABLET	TYLENOL	01.01
APAP ELIXIR 160 MG/5 ML ELIXIR	TYLENOL	01.01
APAP SUPPOSITORY 650 MG SUPPOSITORY	TYLENOL	01.01
CODEINE/APAP 30-300 MG TABLET	TYLENOL W/COD #3	01.04
CODEINE/APAP 60 MG-300 MG TABLET	TYLENOL W/COD #4	01.04
CODEINE/APAP 60-300 MG TABLET	TYLENOL W/COD #4	01.04
CODEINE/APAP 30-300 MG/12.5 ML ELIXIR	TYLENOL/ COD	01.04
CODEINE/APAP 12-120 MG/5 ML ELIXIR	TYLENOL/COD ELIX	01.04
BETHANECHOL 10 MG TABLET	URECHOLINE	13.02
BETHANECHOL 25 MG TABLET	URECHOLINE	13.02
BETHANECHOL 5 MG TABLET	URECHOLINE	13.02
DIAZEPAM 10 MG TABLET	VALIUM	06.06.01
DIAZEPAM 2 MG TABLET	VALIUM	06.06.01
DIAZEPAM 5 MG TABLET	VALIUM	06.06.01
DIAZEPAM SYRINGE 5 MG/ML INJECTION	VALIUM	06.06.01
DIAZEPAM SYRINGE 5 MG/ML INJECTION	VALIUM	10.01
DIAZEPAM VIAL 5 MG/ML INJECTION	VALIUM INJ	06.06.01
DIAZEPAM VIAL 5 MG/ML INJECTION	VALIUM INJ	10.01
VANCOMYCIN HCL 1GM INJECTION	VANCOCIN	03.14
VANCOMYCIN HCL 500 MG INJECTION	VANCOCIN	03.14
VANCOMYCIN HCL VIAL 1GM INJECTION	VANCOCIN	03.14
VANCOMYCIN HCL VIAL 500 MG INJECTION	VANCOCIN	03.14
HEPATITIS A VACC VL 50 UNITS/ML INJECTION	VAQTA	20.01
IRON SUCROSE VL 20 MG/ML INJECTION	VENOFER	21.01
DOXYCYCLINE 100 MG CAPSULE	VIBRAMYCIN	03.13
DOXYCYCLINE 50 MG CAPSULE	VIBRAMYCIN	03.13
DOXYCYCLINE 100 MG TABLET	VIBRATABS	03.13
DIDANOSINE 125 MG CAP DELAY-REL	VIDEX EC	03.09.04
DIDANOSINE 200 MG CAP DELAY-REL	VIDEX EC	03.09.04
DIDANOSINE 250 MG CAP DELAY-REL	VIDEX EC	03.09.04
DIDANOSINE 400 MG CAP DELAY-REL	VIDEX EC	03.09.04
NELFINAVIR MESYLATE 250 MG TABLET	VIRACEPT	03.09.05
NELFINAVIR MESYLATE 625 MG TABLET	VIRACEPT	03.09.05
NEVIRAPINE 200 MG TABLET	VIRAMUNE	03.09.03
TENOFOVIR DISOPROXIL 300 MG TABLET	VIREAD	03.09.04
HYDROXYZINE HCL VL 50 MG/ML INJECTION	VISTARIL	02.01

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Product Name	Equivalent Brand Name	Therapy Section
HYDROXYZINE PAMOATE 100 MG CAPSULE	VISTARIL	02.01
HYDROXYZINE PAMOATE 25 MG CAPSULE	VISTARIL	02.01
HYDROXYZINE PAMOATE 50 MG CAPSULE	VISTARIL	02.01
HYDROXYZINE HCL VIAL 25 MG/ML INJECTION	VISTARIL INJ	02.01
HYDROXYZINE HCL VIAL 50 MG/ML INJECTION	VISTARIL INJ	02.01
THIAMINE HCL 100 MG TABLET	VITAMIN B-1	10.01
THIAMINE HCL 100 MG TABLET	VITAMIN B-1	21.01
THIAMINE HCL 50 MG TABLET	VITAMIN B-1	10.01
THIAMINE HCL 50 MG TABLET	VITAMIN B-1	21.01
THIAMINE HCL MDV 100 MG/ML INJECTION	VITAMIN B-1	10.01
THIAMINE HCL MDV 100 MG/ML INJECTION	VITAMIN B-1	21.01
CYANOCOBALAMIN 1000 MCG/ML INJECTION	VITAMIN B-12	21.01
PYRIDOXINE HCL 100 MG TABLET	VITAMIN B-6	21.01
PYRIDOXINE HCL 25 MG TABLET	VITAMIN B-6	21.01
PYRIDOXINE HCL 50 MG TABLET	VITAMIN B-6	21.01
ACETIC ACID SOLN 2% OTIC	VOSOL	18.05
ACETIC ACID-HC SOLN 2% OTIC	VOSOL-HC	18.05
PEN-G PROCAINE 1.2 MILLION UNITS INJECTION	WYCILLIN	03.11
LATANOPROST O/S 0.005% OPHTHALMIC	XALATAN	18.01
LIDOCAINE 1% 10 MG/ML INJECTION	XYLOCAINE	22.01
LIDOCAINE 1% SYRG 10 MG/ML INJECTION	XYLOCAINE	10.01
LIDOCAINE 1% VIAL 10 MG/ML INJECTION	XYLOCAINE	22.01
LIDOCAINE 2% AMP 20 MG/ML INJECTION	XYLOCAINE	22.01
LIDOCAINE 2% VL 20 MG/ML INJECTION	XYLOCAINE	22.01
LIDOCAINE VISCOUS 2% SOLUTION	XYLOCAINE VISC	07.01
LIDOCAINE 1%+EPI VIAL 10 MG/ML INJECTION	XYLOCAINE W/EPI	22.01
KETOTIFEN O/S 0.025% OPHTHALMIC	ZADITOR	18.02
RANITIDINE HCL 150 MG TABLET	ZANTAC	12.09
RANITIDINE HCL 300 MG TABLET	ZANTAC	12.09
PARICALCITOL VIAL 2 MCG/ML INJECTION	ZEMPLAR	11.08
PARICALCITOL VIAL 5 MCG/ML INJECTION	ZEMPLAR	11.08
PANCREALIPASE 5-17-27 CAP DELAY-REL	ZENPEP	12.06
STAVUDINE 15 MG CAPSULE	ZERIT	03.09.04
STAVUDINE 20 MG CAPSULE	ZERIT	03.09.04
STAVUDINE 30 MG CAPSULE	ZERIT	03.09.04
STAVUDINE 40 MG CAPSULE	ZERIT	03.09.04
LISINAPRIL 10 MG TABLET	ZESTRIL/PRINIVIL	05.02
LISINAPRIL 2.5 MG TABLET	ZESTRIL/PRINIVIL	05.02
LISINAPRIL 20 MG TABLET	ZESTRIL/PRINIVIL	05.02
LISINAPRIL 30 MG TABLET	ZESTRIL/PRINIVIL	05.02
LISINAPRIL 40 MG TABLET	ZESTRIL/PRINIVIL	05.02
LISINAPRIL 5 MG TABLET	ZESTRIL/PRINIVIL	05.02
ABACAVIR 300 MG TABLET	ZIAGEN	03.09.04
ABACAVIR ORAL SOLN 20 MG/ML SOLUTION	ZIAGEN	03.09.04
AZITHROMYCIN 250 MG TABLET	ZITHROMAX	03.10
AZITHROMYCIN 500 MG TABLET	ZITHROMAX	03.10
AZITHROMYCIN 600 MG TABLET	ZITHROMAX	03.09.07
AZITHROMYCIN 600 MG TABLET	ZITHROMAX	03.10
AZITHROMYCIN Z-PAK 250 MG TABLET	ZITHROMAX Z-PAK	03.10
SIMVASTATIN 10 MG TABLET	ZOCOR	05.05.01
SIMVASTATIN 20 MG TABLET	ZOCOR	05.05.01

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<i>Product Name</i>	<i>Equivalent Brand Name</i>	<i>Therapy Section</i>
SIMVASTATIN 40 MG TABLET	ZOCOR	05.05.01
SIMVASTATIN 5 MG TABLET	ZOCOR	05.05.01
ONDANSETRON ODT 4 MG TAB DISPERS	ZOFRAN ODT	12.04
ONDANSETRON ODT 8 MG TAB DISPERS	ZOFRAN ODT	12.04
SERTRALINE HCL 100 MG TABLET	ZOLOFT	06.01.02
SERTRALINE HCL 25 MG TABLET	ZOLOFT	06.01.02
SERTRALINE HCL 50 MG TABLET	ZOLOFT	06.01.02
ACYCLOVIR 200 MG CAPSULE	ZOVIRAX	03.06
ACYCLOVIR 400 MG TABLET	ZOVIRAX	03.06
ACYCLOVIR 800 MG TABLET	ZOVIRAX	03.06
ALLOPURINOL 100 MG TABLET	ZYLOPRIM	01.02
ALLOPURINOL 300 MG TABLET	ZYLOPRIM	01.02
CETIRIZINE HCL 10 MG TABLET	ZYRTEC	02.02
CETIRIZINE HCL 5 MG TABLET	ZYRTEC	02.02

RFP# 17RFP07012016B-BR Inmate Medical Services
Addendum #1
July 6, 2016

Appendix #2

UNITED STATES DISTRICT COURT
NORTHERN DISTRICT OF GEORGIA
ATLANTA DIVISION

APR 16 2002

LUTHER D. THOMAS, Clerk
By: *J. Reed* Deputy Clerk

RUBEN FOSTER, et al.,	:	
	:	
Plaintiffs,	:	CIVIL ACTION
	:	
v.	:	1:99-cv-900-MHS
	:	
FULTON COUNTY, GEORGIA,	:	
et al.,	:	
	:	
Defendants.	:	

ORDER

On November 5, 2001, the Court ordered the parties to respond to Dr. Greifinger's October 30, 2001, Report and to "set forth specific recommendations for addressing" each of ten areas that Dr. Greifinger identified as "far from compliance" with the Final Settlement Agreement.¹ The parties filed their responses on December 5, 2001. On January 15, 2002, the Court toured the jail with Dr. Greifinger, and after a follow-up visit on February 25-26, 2002, Dr. Greifinger submitted his latest Report on March 2, 2002.

¹ The deficient areas identified by Dr. Greifinger were (1) crowding, (2) security staffing, (3) physical plant intake and kitchen, (4) access to Grady Hospital System, (5) timely medication to new HIV infected patients, (6) follow-up on abnormal chest x-rays, (7) continuity of care on release, (8) diets, (9) cross-training, and (10) quality management.

The Court has reviewed the parties' responses, Dr. Greifinger's latest report and plaintiffs' response to that Report filed March 21, 2002, as well as defendants' most recent updates on jail population, filed March 1 and April 1, 2002. It is clear from these submissions that, despite significant progress, much remains to be done to achieve full compliance with the Final Settlement Agreement and to assure that all plaintiff class members receive constitutionally adequate medical care. It is also clear that these goals will not be realized without continued monitoring by Dr. Greifinger and active supervision by this Court.

The following additional steps are needed to enforce the terms of the Final Settlement Agreement and to correct violations of plaintiffs' federal rights to minimally adequate conditions of confinement and receipt of adequate medical care. The Court finds that this relief is narrowly drawn, extends no further than necessary to correct violations of federal rights arising from defendants' failure to comply with the Final Settlement Agreement, and is the least intrusive means to correct these violations. The areas where additional relief is needed, the relevant provisions of the Final Settlement Agreement, and the specific remedial actions required are set out below.

I. Overcrowding

The County shall identify mechanisms for accommodating current and anticipated jail population.

Final Settlement Agreement ¶ V.D.

Inmate population at the Rice Street facility continues to exceed physical capacity by a significant number. After reaching a low of 2,266 on September 30, 2000, the population rose to 2,544 as of February 15, 2002, and was 2,526 on March 15, 2002. Although the population declined to 2,362 on March 31, 2002, even this figure is more than 100 over the facility's capacity of 2,250, and recent fluctuations suggest that it is likely to rise again. Clearly, the programs implemented by defendants to reduce the jail population to at or below capacity have not succeeded. Something more must be done.

As Dr. Greifinger has repeatedly stated, overcrowding causes a myriad of problems that increase the likelihood of disease and interfere with the delivery of adequate medical care. The conditions described in Dr. Greifinger's latest Report are totally unacceptable. These conditions include lack of adequate heat, water, ventilation, and sanitation, all

caused, at least in part, by the strain of chronic overcrowding on the facility's physical plant.

Defendants argue that, despite the overcrowding, the conditions of confinement and the provision of medical care still satisfy constitutional requirements. The Court rejects this argument. The Constitution prohibits depriving inmates of "basic human needs" or "the minimal civilized measure of life's necessities." Rhodes v. Chapman, 452 U.S. 337, 347 (1981). Adequate heat, water, fresh air, and sanitation are basic human needs, which inmates may not be denied without violating minimal constitutional requirements.

Defendants report that they have undertaken the following additional steps designed to reduce the jail population: (1) regular review of misdemeanor inmates for possible release, (2) expansion of the number and type of cases handled through the Complaint Room, (3) increased efforts to place convicted inmates in the state system, (4) possible reinstatement of the home arrest program, and (5) appointment of a new full-time magistrate judge to handle primarily criminal cases. While these

are all steps in the right direction, there is no evidence, nor does the Court believe, that these steps alone will be sufficient to solve the problem.

Plaintiffs have proposed a number of measures that defendants have not yet undertaken, which are designed to correct systemic problems that result in unnecessary incarceration and thus contribute to jail overcrowding. Plaintiffs' principal proposal is that defendants be required to provide counsel within 72 hours of arrest to all persons accused of minor offenses who cannot make bail. For the following reasons, the Court concludes that this proposal should be implemented immediately.

Much of the overcrowding at the jail is the result of persons charged with relatively minor offenses who cannot make bail and must remain in jail for weeks or even months waiting for the State Court Solicitor General to file an accusation.² Only after an accusation is filed are these inmates' cases placed on a calendar, and only after these inmates are finally brought to court are they provided counsel. By this time, they have often

² According to defendants' latest report, as of March 15, 2002, there were 308 inmates in the Fulton County Jail who were charged with misdemeanors but had not yet been formally accused. Of that number, 88 had been in jail for more than 30 days, and of those, 12 had been in jail for more than 60 days.

spent far more time in jail than they would ever receive as a sentence for their offenses. Under these circumstances, counsel can serve little purpose other than to handle the entering of a plea so that the inmate can finally get out of jail.

If these inmates are appointed counsel promptly after their arrest, they will have the opportunity to file bond review motions, to negotiate pleas, or simply to demand prompt attention to their cases. As a result, many of these inmates will spend only a few days in jail rather than weeks or months before their cases are even heard. This will not only help to alleviate the overcrowding at the jail; it will also save the County money spent in housing these inmates unnecessarily.³

Not only does the current treatment of individuals charged with minor offenses contribute to the serious overcrowding problem at the jail,

³ In an April 5, 2002, letter to the Solicitor General, plaintiff's counsel provides several examples. One inmate, Barbara Anholt, spent 68 days in jail for public drunkenness, at a cost to the County of over \$3,000, while her case was being "reviewed and drafted." Another inmate, Bobby Nelson Richard, spent 83 days in jail for public drunkenness, at a cost to the County of \$3,735, because of "researching for other warrants." An examination of a random sample of 57 detainees being held only on State Court charges who were on the jail calendars for a single week in February revealed that they spent a total of 1,519 days in jail at a cost to Fulton County of \$68,355 (\$45 a day).

it also constitutes a clear denial of these individuals' constitutional right to counsel. See Argersinger v. Hamlin, 407 U.S. 25, 37 (1972) (no person may be imprisoned for any offense, whether classified as petty, misdemeanor, or felony, unless represented by counsel). The Solicitor General contends that "[c]ounsel has always been appointed in Fulton County in cases where a defendant is sentenced to jail time."⁴ This argument apparently refers to Fulton County's practice of appointing counsel at the time of arraignment. At this point, however, it is too late for an attorney to provide any real representation, since his client has likely already served more time than he or she would if found guilty. Under these circumstances, an appointed lawyer provides no professional assistance but merely serves the clerical function of processing people through court. Appointing counsel to handle a plea at this point is, as plaintiffs' counsel puts it, "a meaningless and hollow gesture." The Constitution requires more than this.

⁴ The Solicitor General's argument is contained in her March 18, 2002, response to a letter from plaintiffs' counsel expressing concern over Fulton County's denial of counsel to persons charged with minor offenses.

Accordingly, the Court ORDERS defendants to immediately implement a program to provide counsel within 72 hours of arrest to all persons accused of minor offenses who cannot make bail.

Plaintiffs have also proposed additional measures to address the overcrowding problem. The Court concludes that each of these measures is a reasonable and necessary step in identifying and correcting the problems that lead to unnecessary incarceration and jail overcrowding. Accordingly, the Court ORDERS defendants to immediately implement each of the following measures:

- (1) Expand the authority of Pretrial Services to include supervision of persons arrested for misdemeanor offenses;⁵
- (2) Evaluate the factors currently used to exclude certain persons charged with felonies from pretrial release and eliminate any that are unreasonable;
- (3) Ensure that all persons charged with misdemeanors are offered a *reasonable* bond in accordance with Georgia law;

⁵ Defendants report that on August 2, 2001, Pretrial Services began expanded screening of misdemeanor cases. It is not clear, however, whether this includes actual supervision. According to plaintiffs, Pretrial Services is currently not allowed to supervise anyone whose case is in State Court. Defendants should clarify this issue.

(4) Develop and implement meaningful mental health diversion and mental health discharge planning;⁶

(5) Increase compensation paid to appointed counsel in misdemeanor cases from the current \$50 to a reasonable amount, or expand the Fulton County Public Defenders Office to handle cases in State Court;

(6) Institute an All-Purpose Hearing calendar in State Court modeled on the hearings currently conducted in Superior Court, with the hearings to be held within 72 hours of arrest;⁷

(7) Expand the authority of the Judicial Administrative Expeditors to facilitate release of inmates whose cases are in State Court as well as Superior Court;

⁶ This will require defendants (1) to determine how many inmates have a serious mental illness, the number of times they have been subject to short-term incarcerations, the types of offenses they are charged with, and their prior access to mental health services in the community; (2) to study viable models currently used in other counties and evaluate the current mental health out-patient and in-patient services available in Fulton County; and (3) to provide adequate funding to expand mental health resources in the County, if necessary. Defendants report that various Fulton County agencies have been meeting to develop a mental health diversion program and possibly establish a mental health diversion court. Defendants should move forward with these plans expeditiously.

⁷ Defendants have indicated that State Court will begin conducting All Purpose Hearings in April or May 2002. The further requirement that these hearings be held within 72 hours of arrest is consonant with the Court's order that counsel be appointed within 72 hours of arrest. As explained in plaintiffs' counsel's April 8, 2002, letter to State Court Chief Judge Thompson and Judge Newkirk, other major metropolitan courts such as New York and Washington, D.C., generally conduct such hearings within 24 hours of arrest.

(8) Impose reasonable restrictions on the length of time a person may remain in jail (a) without accusation or indictment, and (b) accused or indicted but untried;

(9) Implement an integrated computer system that links all of the appropriate agencies in the Fulton County criminal justice system.

II. Security Staffing

Fulton County defendants shall employ a sufficient number of trained correctional staff to meet the healthcare needs of HIV-positive inmates at all times. Shortages in correctional staff shall not interfere with the provision of medical care in accordance with Section III, above. The Fulton County defendants shall ensure that shortages in correctional staff do not prevent or delay the distribution of medications or the transport of HIV-positive inmates for any medical appointments or needed medical care, either within the facility or in the community.

Final Settlement Agreement ¶ IV.B.

More than two years after the Final Settlement Agreement was signed, Dr. Greifinger reports that there continues to be an insufficient number of security staff positions for the current population of inmates. Defendants state that they have consistently kept 96-97% of staff positions filled, which is above average for correctional institutions. However, given the overpopulation of inmates and the number of inmates who are HIV-

positive or have other health problems, even if *all* positions were filled, there would still not be sufficient staff to assure inmates timely access to medical care. Something more must be done.

Accordingly, the Court ORDERS defendants to immediately develop and implement a plan to increase security staffing at the jail to the level necessary to provide timely access to medical care for the current population of inmates. The plan shall authorize and provide funding for a sufficient number of additional staff positions, taking into account normal turnover and vacancy rates, so that at any given time there will be adequate security staff available to ensure timely access to medical care.

III. Access to Grady Health System.

HIV-positive inmates shall be referred in a timely manner to outside specialists in all cases when the Jail's own staff lacks the resources to treat in a timely manner the medical or mental conditions of HIV-positive inmates. Accordingly, defendants shall coordinate timely access to the Grady Hospital's Infectious Disease Program or other appropriate specialists for HIV-positive inmates and implement all necessary procedures to provide specialty consultations and specialized testing on an emergency (immediate), urgent (within three days), and routine (within four weeks) basis, as directed by medical staff including the HIV Specialist.

Final Settlement Agreement ¶ III.G.

In the past, inmates without a "Grady card" experienced long delays in receiving specialty care because an appointment could not be made until after a financial review, which took anywhere from three weeks to six months. Defendants claim that this problem has been resolved. In his latest report, however, Dr. Greifinger states that, although the financial review barrier may have been solved, bureaucratic problems remain for those without a card, and that the appointment making process can still take from three weeks to six months. This is not acceptable.

Accordingly, the Court ORDERS defendants to immediately develop and implement a plan to establish an efficient and reliable appointment system that will assure inmates timely access to specialty care.

IV. Timely Medication to New HIV-Positive Inmates

If during intake screening an HIV-positive person is able to identify credibly his or her medications, the intake nurse shall obtain a verbal order from a physician and continue these medications immediately. There shall be no unreasonable disruption in the continuity of medication.

Final Settlement Agreement ¶ III.A.ii.

Dr. Greifinger's latest report states: "During my January visit, the timeliness of initial medication for HIV-positive inmates remains lower

than acceptable. Only half of the inmates with a credible history of HIV medications when they arrive at the jail were getting their first doses within 24 hours." Report at 4. A 50% compliance rate with this important requirement is not acceptable.⁸

Accordingly, the Court ORDERS defendants to immediately develop and implement a plan that will ensure that new HIV-positive inmates with credible medication histories receive their medication in a timely manner.

V. Chest X-Rays

Defendants shall screen all incoming inmates for symptoms of tuberculosis infection immediately upon admission. Defendants shall promptly isolate, diagnose, and treat any individual with a suspicion of contagious tuberculosis. Follow-up treatment and testing shall be conducted according to the recommendations and guidelines of the Centers for Disease Control ("CDC"). Any individual who has symptoms of tuberculosis and all HIV-positive persons shall have a chest x-ray within 48 hours of intake.

Final Settlement Agreement ¶ III.M.

⁸ By the time of Dr. Greifinger's February visit, defendants had eliminated a requirement that inmates know their exact dosages before being prescribed medication, but it is not clear that this change in policy will solve the problem. Plaintiffs report that delays have occurred even when the new inmate has arrived with medication from another correctional institution, and that some inmates are waiting in the intake area for as long as 20 hours before an intake nurse even takes their medical history.

Plaintiffs contend that not only has there been a problem with follow-up and treatment of abnormal chest x-rays, but also a failure to provide chest x-rays to all inmates who are required to have them within 48 hours. In his latest report, Dr. Greifinger states that a new system for timely follow-up of abnormal chest x-rays has been instituted, and that the new tracking system is excellent. However, it remains unclear whether all inmates who are required to have chest x-rays within 48 hours of intake, including all HIV-positive inmates, are actually receiving them.

Accordingly, the Court ORDERS defendants to immediately take all steps necessary to ensure that all inmates who are required to be given x-rays actually receive them.

VI. Continuity of Care on Release

Prior to discharge from the Jail to the community, all HIV-positive inmates shall have an appropriate discharge plan. A post-discharge appointment with an appropriate HIV medical care provider in the community shall be scheduled for every HIV-positive inmate, and each inmate shall be informed upon discharge of the date, time, and location of that appointment. If the inmate is on any prescribed medications, defendants shall provide sufficient medications to prevent gaps in the availability of those medications.

Final Settlement Agreement ¶ III.J.

In his latest report, Dr. Greifinger states that there has been "no substantial progress in the area of continuity of care on release." Report at 6. Although more HIV-positive inmates are being referred to AID Atlanta, half of the inmates are released before AID Atlanta makes contact with them. In addition, there are continuing logistical problems with providing discharged inmates with a supply of their medications. In his prior report, Dr. Greifinger also noted that there is a major problem for inmates with dual diagnoses -- both HIV infection and major mental illness such as schizophrenia or bipolar disorder. A significant number of the inmates in this category had had multiple incarcerations over the previous four months. As plaintiffs point out, "[t]his high rate of re-incarceration of seriously mentally ill persons indicates that mental health discharge planning is either not happening or not working." Response at 9.

Accordingly, the Court ORDERS defendants to immediately develop and implement a plan to expand the current discharge planning resources at the jail and to evaluate obstacles to discharge planning and take steps to remove these obstacles.

VII. Medical Diets

A registered dietician employed by the County or its food contractor shall work closely with medical and security personnel to ensure that HIV-positive inmates receive appropriate diets, as indicated on the inmates' treatment plans. The dietician shall be responsible for menu planning and monitoring of both general and medically prescribed diets.

Final Settlement Agreement ¶ III.B.ii.

In his October 30 Report, Dr. Greifinger found this area "worse than ever." Report at 6. In his latest Report, Dr. Greifinger states that there is a new dietician, and that grievances regarding medical diets have been reduced. Nevertheless, it is clear that full compliance with this requirement has not yet been achieved.

Accordingly, the Court ORDERS defendants to evaluate the performance of the food vendor as well as the system for delivering food to inmates and to take whatever steps are necessary to ensure delivery of appropriate medical diets to all inmates for whom such diets have been prescribed.

VIII. Quality Management

Defendants shall perform ongoing quality management that monitors the quality of healthcare services provided at the Jail. The

quality management program shall monitor all aspects of healthcare including at least the following: access to healthcare, medication management, nursing services, physician services, access to specialty care, mental health services, pharmacy services, dental services, environmental services, infection control procedures, healthcare records, sick call services, intake screening and evaluations, chronic disease services, infirmary care, diagnostic services, discharge planning, and adverse patient occurrences including all deaths. The quality management program shall include reviews of all aspects of healthcare provision at the Jail, and shall identify any deficiencies in services to inmates as well as any staff training needs and/or deficiencies. Corrective plans to address all deficiencies and recommended improvements shall be prepared, and the quality management program shall include ongoing assessment of the effectiveness of corrective plans and actions.

Final Settlement Agreement ¶ VII.A.

In his October Report, Dr. Greifinger stated that “[t]he quality management program is evolving, but nowhere near complete.” Report at 5. In his latest report, Dr. Greifinger found that there had been a “hiatus” in the quality management program, and that the medical vendor “had not been paying sufficient attention to this critical area.” Report at 5. As plaintiffs point out, it is essential that a fully operational quality management program be in place so that improvements made in the past can be and will be sustained. Likewise, in his latest Report, Dr. Greifinger states: “I cannot emphasize more strongly that good management cannot succeed without good measurement.” Report at 5.

Accordingly, the Court ORDERS defendants to immediately take all necessary steps to address deficiencies in their quality management program.

IX. Environmental Health and Sanitation

All housing units to which HIV-positive inmates are assigned shall be adequate to meet the needs of the HIV-positive inmates placed there. This shall include, but is not limited to, assurance that no HIV-positive inmate in a chronic care unit or with a diagnosis of AIDS shall sleep on the floor, and that all HIV-positive inmates shall have adequate access to toilet facilities, clean bedding and clothing, hot and cold running water, and drinkable water at all times.

Final Settlement Agreement ¶ V.B.

Despite recent renovations, the condition of the plumbing and HVAC systems at the jail continues to deteriorate. According to Dr. Greifinger's latest report: "The benefit from the renovation is gone. Sinks are inoperable again, showers are not functioning well and water fountains often do not work. The plumbing system is either poorly designed or maintained. It should be changed." Report at 5-6. Dr. Greifinger notes that during the coldest week of the winter, a boiler broke down, causing temperatures in many housing areas to drop into the low 60s. A backup boiler, which should have prevented this problem, has not worked in years. Report at 2. As another example, during his latest tour of the jail,

Dr. Greifinger observed that there was no cold water in the showers in one of the living areas, so that inmates were unable to take showers. Id. In conclusion, Dr. Greifinger states: "Although renovated, the plumbing and air handling systems are virtually collapsed. The County needs to correct these deficiencies in short order." Id. at 6.

Accordingly, the Court ORDERS defendants to immediately develop and implement a plan to repair or replace existing plumbing and HVAC systems so that they are able to function under the current population load without constantly breaking down. If the jail cannot be renovated to cure these problems, defendants should so advise the Court so that construction of a new jail can be considered.⁹

X. Conclusion

It is now more than two years since the parties entered into the Final Settlement Agreement. Yet defendants still remain "far from compliance" in many key areas. The Court is totally out of patience with the persistent assurances and promises that compliance will be achieved.

⁹ The Court notes that in the past it has ordered the construction of new jails in Cobb, Fayette, and Douglas Counties after the county commissioners acknowledged that a new facility was needed.

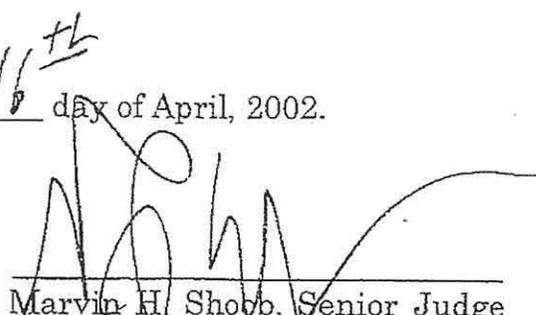
Defendants must do what is necessary to comply with their obligations, and they must do it now.

The Court ORDERS defendants to file a report with the Court within thirty (30) days of the date of entry of this order setting out the specific steps they have taken to comply with each of the requirements set out in this order. Plaintiffs shall have 10 days thereafter to file any response. The Court will conduct a hearing on Tuesday, May 28, 2002, beginning at 10:30 a.m. to consider the progress that has been made and to determine what further action may be necessary. Defendants should have appropriate representatives present at the hearing, other than counsel, to address any areas in which full compliance with this order has not been achieved. Finally, the Court DIRECTS defendants' counsel to deliver a copy of this order to each individual defendant, as well as to the chief judges of the State Court and the Magistrate Court of Fulton County.

In summary, the Court ORDERS defendants to immediately implement the remedial actions set out above and to report to the Court within thirty (30) days of the date of entry of this order. A hearing to consider defendants' progress in complying with this order and to

determine if further action is needed is scheduled for Tuesday, May 28,
2002, at 10:30 a.m. in Courtroom 1707.

IT IS SO ORDERED, this 16th day of April, 2002.



Marvin H. Shobe, Senior Judge
United States District Court
Northern District of Georgia

2002-4154

Appendix #3

IN THE UNITED STATES DISTRICT COURT
FOR THE NORTHERN DISTRICT OF GEORGIA
ATLANTA DIVISION

J. Reed
Deputy Clerk

EXHIBIT 4

_____)	
RUBEN FOSTER et al.,)	
)	
Plaintiffs,)	CIVIL ACTION
)	
v.)	No. 1:99-CV-0900 (MHS)
)	
FULTON COUNTY, GEORGIA et al.,)	CLASS ACTION
)	
Defendants.)	
_____)	

FINAL SETTLEMENT AGREEMENT

I. Introduction

A. Plaintiffs in this class action are all HIV-positive persons who are now or will be in the future incarcerated at the Fulton County Jail in Atlanta, Georgia ("the Jail"). They filed this action on April 8, 1999, seeking declaratory and injunctive relief for violations of their Eighth and Fourteenth Amendment rights. In their complaint, plaintiffs allege that HIV-positive inmates at the Jail have received constitutionally inadequate medical care.

B. Defendants in this case are Fulton County, Georgia; the Fulton County Board of Commissioners and its members; Fulton County Sheriff Jacquelyn Barrett; Chief Jailer of the Fulton County Jail L.L. Briggs; Medical Services Director of the Fulton County Sheriff's Department George Herron; Correctional Healthcare Solutions, Inc. (CHS); CHS Health Services Administrator Kevin Ramos; CHS Medical Director Harold Minerve; and CHS physician Eno

Ikoku. All defendants are sued in their official capacity.¹ The plaintiff class and all defendants are parties to this *Final Settlement Agreement* (hereinafter also referred to as "*Agreement*" and "*Settlement Agreement*"). The term "defendants" refers to all these defendants and their successors, agents, and assigns.

C. This *Final Settlement Agreement* is submitted and entered into as a settlement of all claims for declaratory and injunctive relief set forth in plaintiffs' *First Amended Complaint*, filed on April 15, 1999. The United States District Court for the Northern District of Georgia, Atlanta Division, shall retain jurisdiction to enforce the terms of this *Settlement Agreement* and shall preside over any further proceedings, as necessary.

D. On April 8, 1999, plaintiffs filed their *Complaint, Motion for Preliminary Injunction, Motion for Class Certification*, and supporting materials. Plaintiffs filed their *First Amended Complaint* on April 15, 1999. The United States District Court, the Honorable Marvin H. Shoob presiding, scheduled a hearing on plaintiffs' *Motion for Preliminary Injunction* for April 16, 1999. Prior to the hearing that morning, the parties reached an agreement resolving plaintiffs' *Motion for Preliminary Injunction* and submitted it to the Court for approval.² On April 16, the Court entered the *Consent Order* resolving the plaintiffs' motion.

E. On April 22, 1999, the parties submitted for the Court's approval, and the Court

¹ Kevin Ramos, Harold Minerve, and Eno Ikoku have been replaced since the inception of this lawsuit.

² This lawsuit also originally named as defendants the Board Members of the Fulton-DeKalb Hospital Authority and Edward J. Renford, Chief Executive Officer of Grady Health System, in their official capacities. These defendants were voluntarily dismissed on April 16, 1999, based on their representation that the Grady Health System would continue to provide medical appointments to HIV-positive inmates at the Fulton County Jail.

approved and entered, a *Consent Order on Class Certification*. Pursuant to the April 16th *Consent Order*, on May 28, 1999, the Court appointed Dr. James Steinberg to oversee and report on defendants' compliance with the preliminary injunction. Discovery began on May 25, and concluded on August 27, 1999.

F. CHS shall be bound by the terms and conditions of this *Agreement* to the extent those terms and conditions do not exceed CHS's obligations under its contract with Fulton County. Obligations in excess of CHS's contractual responsibilities shall be the sole responsibility of Fulton County. Additionally, upon the termination, cancellation, or expiration of a contract to provide medical care at the Fulton County Jail between Fulton County and CHS, CHS's obligations, duties, and responsibilities under this *Settlement Agreement* shall terminate. Because they are sued only in their official capacities, upon termination of this contract, CHS and all CHS defendants will no longer be parties to this lawsuit. If at any time during this *Agreement* the contractor for medical care at the Jail changes, the County shall require the new contractor to comply with the terms and conditions of this *Agreement*.

G. During and after the discovery period, the parties engaged in settlement negotiations seeking to resolve all claims for declaratory and injunctive relief raised in plaintiffs' *First Amended Complaint*. The parties hereby agree to the following terms.

II. Definitions

A. "HIV Specialist" refers to the on-site physician hired by the defendants to be responsible for the medical care of HIV-positive inmates at the Jail. The HIV Specialist shall be a medical doctor who is board certified as either an internist or an infectious disease specialist, and who has more than three years experience in inpatient and outpatient management of HIV

infection as set forth in Section XIII, below.

B. "HIV Coordinator" refers to the on-site registered nurse, nurse practitioner, or physician's assistant hired by the defendants to be responsible for coordinating the care provided to HIV-positive inmates. This coordination includes overseeing the arrangement of appointments both within the Jail and with outside providers; ensuring that any follow-up care ordered by a medical provider (including laboratory testing, appointments, monitoring, etc.) occurs in a timely manner; monitoring the progress and treatment of all known HIV-positive inmates at the Jail; and organizing education on the transmission and treatment of HIV, sexually transmitted diseases, and tuberculosis for all inmates at the Jail.

C. "Correctional Healthcare Monitor" or "Monitor" refers to the physician appointed by the Court to monitor defendants' compliance with this *Settlement Agreement*, as set forth in Section VIII, below.

D. "Medical Director" refers to the on-site physician hired by the defendants to be responsible for the provision of medical care at the Jail. This responsibility includes overseeing the quality and effectiveness of medical care provided at the Jail; ensuring that medical staff are sufficiently hired, scheduled, and trained to provide constitutionally adequate medical care; coordinating the Quality Management program at the Jail; and any other duties related to medical care provision and medical decision-making at the Jail.

E. "Director of Medical Services" refers to the on-site administrator hired by and reporting to the Fulton County Sheriff's Office responsible for overseeing the administration of medical care provided at the Jail. This administration includes coordinating communication between CHS (or any other on-site medical care contractor) and the Sheriff's Department, and

any other administrative duties related to the County's oversight of the medical care provided at the Jail.

III. Medical Care

A. Defendants shall implement policies and procedures to ensure that when HIV-positive persons enter the Fulton County Jail, they have timely access to medical staff and to any treatment regimen for HIV infection and the prevention of opportunistic infections consistent with the standard of care set forth by the United States Department of Health and Human Services. Defendants shall maintain conformance with the National Commission on Correctional Health Care's current *Standards for Health Services in Jails* ("NCCHC Standards"). In the event that an inmate enters the Jail on an HIV treatment plan, any change in that plan shall also be consistent with these standards. Defendants shall take reasonable measures to seek prompt confirmation of any HIV treatment plan reported by a new inmate. Adequate stocks of all FDA-approved antiretroviral medications shall be available for dispensing to inmates who come into the jail without any lapse or delay that is inconsistent with this standard of care.

i. All inmates shall receive an intake screening upon their arrival at the Jail. This screening shall include, but shall not be limited to, inquiry into any communicable diseases, including tuberculosis and sexually transmitted diseases, and urgent chronic conditions, review and continuation of any medications, and timely referral for inmates in urgent need of physician review. Information gathered during the intake screening shall be used to provide any necessary medical care. During the intake screening, the medical provider shall ask each person who identifies him/herself as HIV-positive if he or she is on medications.

ii. If during intake screening an HIV-positive person is able to identify credibly his

or her medications, the intake nurse shall obtain a verbal order from a physician and continue these medications immediately. There shall be no unreasonable disruption in the continuity of medication. The intake medical provider shall ask each known HIV-positive person to sign a release of information form so that confirmation of any treatment regimen and exchange of relevant information can take place as soon as possible. Blood shall be drawn for T-cell and viral load testing of all known HIV-positive inmates within 48 hours of arrival at the Jail or 72 hours if the person arrives on a Friday.

iii. Intake screening of HIV-positive inmates shall occur no later than four hours after an inmate's arrival at the Jail except in the event of a bonafide emergency or unexpected influx of new inmates, in which case defendants shall document the duration of and reasons for the delay. In order to identify and triage HIV-positive inmates, all inmates shall be asked the following question by medical personnel upon arrival at the Jail: Are you presently taking medication for or suffering from diabetes, heart disease, seizures, arthritis, asthma, ulcers, high blood pressure, HIV/AIDS, tuberculosis, or a psychiatric disorder?

iv. Any person whose HIV medications are initiated at intake or has symptoms of active HIV-related infections shall be given a comprehensive physical exam within 48 hours of arrival at the Jail, or 72 hours if the person arrives on a Friday. All other HIV-positive inmates shall have a comprehensive physical exam when the results of their T-cell and viral load tests are received by the Jail, but no later than ten days after their arrival at the Jail. All physical exams of HIV-positive inmates shall be performed by an HIV Specialist or an appropriate medical provider in consultation with an HIV Specialist. Defendants shall test all HIV-positive inmates for syphilis and shall test all HIV-positive women for chlamydia and gonorrhea at their first physical

exam. All HIV-positive men shall be screened for chlamydia and gonorrhea and tested for these diseases if symptoms are present.

B. When an inmate is identified as HIV-positive, either through a blood test, through credible self-identification, through confirmation with an outside health provider, through medical records from a previous incarceration at the Jail, or through any other means, the inmate shall be offered initial treatment consisting of a comprehensive health history; a physical examination; and laboratory blood testing, including but not limited to T-cell and viral load testing. The tests shall occur in time for results to be available to the HIV Specialist for an initial consultation within two weeks after the person is identified as HIV-positive. During this initial consultation, an assessment shall be conducted and a written treatment plan developed. This assessment and treatment plan shall comply with the applicable standard of care, including, to the extent dictated by the applicable standard of care, appropriate vaccinations, opportunistic infection prophylaxis if indicated, any necessary referrals to other specialists, any further laboratory or other testing, and appropriate medical diets.

i. Defendants shall inform incoming inmates that HIV testing is available at the Jail, and shall provide them with pamphlets, approved by the Fulton County Health Department, that describe the methods by which HIV can and cannot be transmitted. Defendants shall test an inmate for HIV upon his or her request or when testing is medically indicated, and the inmate has given his or her consent. Defendants shall possess adequate equipment, including at least one fax machine with a dedicated line for the medical department, for the sharing of medical information between the jail and outside health providers.

ii. A registered dietician employed by the County or its food contractor shall work

closely with medical and security personnel to ensure that HIV-positive inmates receive appropriate diets, as indicated on the inmates' treatment plans. The dietician shall be responsible for menu planning and monitoring of both general and medically prescribed diets.

C. Each HIV-positive inmate for whom antiretroviral (ARV) therapy is appropriate according to the applicable standard of care and who consents to such therapy shall be provided appropriate ARV therapy individually designed for that inmate by an HIV Specialist in accordance with guidelines published by the United States Department of Health and Human Services. Where testing indicates that a regimen is failing, the regimen shall be examined by the HIV Specialist and appropriate changes and substitutions shall be made. As these guidelines are updated, an HIV Specialist shall review each patient's treatment regimen and make any appropriate changes in order to maintain compliance with the standards set forth in the guidelines. Unless the HIV Specialist is unavailable, only the HIV Specialist or a physician in consultation with an HIV Specialist may change a patient's HIV treatment regimen. In the event that someone other than the HIV Specialist changes a patient's regimen, that change shall be reviewed by the HIV Specialist as soon as practicable.

D. Defendants shall implement policies and procedures to ensure that when the HIV Specialist prescribes a medication for the treatment of HIV infection or to prevent opportunistic infections, adequate stocks of the medication are available for dispensing to the patient without any lapse or delay. These medications shall be provided in appropriate doses and at appropriate times in accordance with the standard of care. Unless patients are allowed to self-administer medications, complete and accurate medication administration records shall be kept by the administering medical staff. These records shall specify what medications are provided; when

and by whom they are provided; and if prescribed medications are not provided, these records shall specify the reason that they are not.

i. The defendants shall develop and implement systems to provide medications in a timely manner and to track problems with the dispensing and administration of medications. Defendants shall dispense HIV medication at the prescribed time intervals or within one hour of the prescribed time. The schedule for administration of medication shall accommodate the medical needs of the inmates, in accordance with the standard of care. All refusals of medication by inmates must be in-person and must be documented as in-person. If prescribed medications are not provided because of refusal or for any other reason, the written explanation for their not being provided shall be initialed by the dispensing medical staff member. All persons refusing medication shall be provided counseling regarding the consequences of incomplete adherence, and this counseling shall be documented.

ii. Medication records for inmates who are on self-medications shall include documentation of education of the patient regarding the medications, documentation of any follow-up inquiries or education, and documentation of the dispensation and compliance checks of all self-medications.

iii. Defendants shall maintain sufficient stocks of all antiretroviral medications at all times. Medications shall be maintained on chronic care units and stock carts shall be checked and refilled every day. Defendants shall ensure that any errors in medication orders or in medication administration are corrected immediately through the Medical Director or by whatever means necessary.

E. Each HIV-positive inmate shall be provided T-cell and viral load tests every three

months, or more frequently if directed by an HIV Specialist, and any other appropriate follow-up tests, including tests for potential treatment toxicity. Each inmate with a T-cell count under 500, suffering from any HIV-related illness, or who is prescribed ARV medication shall be seen by an HIV Specialist at least every three months, or more often if recommended by the HIV Specialist. Blood testing shall be timed so that results of tests taken within one month are available to the HIV Specialist on each regularly scheduled visit.

i. The defendants shall inform inmates of the results of any medical tests and assessments (including their T-cell counts and viral loads) within one week of receipt of these results by defendants. Treatment guidelines for testing toxicity and HIV disease progression shall be developed by the Medical Director and approved by the Monitor. The defendants shall ensure that the results of medical tests and assessments performed at the Jail or by an off-site provider are obtained in a timely manner and that recommended follow-up care is provided in a timely manner.

F. HIV-positive inmates shall be provided emergency access to a physician or licensed nurse practitioner consistent with the applicable standard of care because acute or serious medical conditions may arise in HIV-positive persons at any time. Incarcerated persons with HIV shall also have access to routine sick call by a physician, nurse practitioner, physician's assistant, or registered nurse. Emergency and routine access shall include both physical observation and examination as the physician or nurse practitioner deems medically appropriate. All medical staff who provide sick call to HIV-positive inmates shall participate in an effective training program approved by an HIV Specialist, in order to maintain competence in current methods for diagnosing and treating medical complications associated with HIV, including the

ability to recognize when referral to an HIV Specialist is necessary. This training shall include any necessary ongoing updating of skills and knowledge, and a method of effectively ensuring medical staff's compliance shall be implemented.

i. The defendants shall ensure that security officers provide any appropriate assistance, with the approval of the medical staff, in the event of an emergency and that all security officers are appropriately trained in emergency procedures. Additionally, defendants shall take all necessary steps to ensure that appropriate and accessible equipment is available to respond to medical emergencies.

ii. The defendants shall create systems to ensure that medical request forms are available to inmates at all times. Provision shall be made for inmates to keep a duplicate copy of their request forms at the time it is submitted. In the general population units, medical requests shall be reviewed every day according to appropriate written triage protocols developed by the Medical Director and approved by the Monitor. Defendants shall ensure that inmates housed in the chronic care units have daily access to sick call administered by a registered nurse. The nurse shall refer inmates immediately to a medical provider, who will see the inmate within a reasonable period of time, according to appropriate written protocols developed by the Medical Director and approved by the Monitor.

G. HIV-positive inmates shall be referred in a timely manner to outside specialists in all cases when the Jail's own staff lacks the resources to treat in a timely manner the medical or mental conditions of HIV-positive inmates. Accordingly, defendants shall coordinate timely access to the Grady Hospital's Infectious Disease Program or other appropriate specialists for HIV-positive inmates and implement all necessary procedures to provide specialty consultations

and specialized testing on an emergency (immediate), urgent (within three days), and routine (within four weeks) basis, as directed by medical staff including the HIV Specialist. While at outpatient appointments, inmates shall be provided with weather-appropriate clothing.

i. The defendants shall establish written protocols developed by the Medical Director and Director of Medical Services, and approved by the Monitor, regarding the County's policy on referrals to outside providers.

H. All medical treatment provided to HIV-positive inmates shall be accurately documented in each inmate's medical record. Each request for medical attention and each response by medical staff shall be written, reviewed at sick call, and included in the inmate's medical record. Each visit to an outside specialist shall be documented, and copies of all resulting medical records returned with the inmate for placement in the inmate's medical records when provided. Jail medical staff shall take reasonable steps to communicate with outside specialists whenever appropriate. Fully updated in-house medical records shall be available to the in-house HIV Specialist before each scheduled appointment with an HIV-positive inmate, including a chronological log that lists demographic data and a history of T-cell counts, medications and doses prescribed, medical complaints and responses, and any other relevant information. As described in Section III. B. above, the HIV Specialist shall develop a written treatment plan consistent with the standard of care, in consultation with each HIV-positive inmate.

i. The defendants shall develop a system for ensuring that medical records at the Jail are complete, legible, and contain the necessary signatures in accordance with professional standards. All healthcare entries shall be dated and timed. Laboratory and diagnostic reports

shall be signed and dated to acknowledge timely review. Medical records maintained at the Fulton County shall contain at least the information and documents required by J-58 of the NCCHC Standards.

ii. Defendants shall ensure that all records are complete and that all forms are entered into patient records. The system shall ensure that loose paper is placed into the records in a timely manner and that medication administration reports are promptly filed in the record at the end of each month. The health record shall be available to and used for documentation by all healthcare practitioners in each clinical encounter with inmates.

I. If an HIV-positive inmate is deemed by an HIV Specialist to be in the terminal stages of the disease, the inmate shall be provided with appropriate care and treatment. This shall include appropriate pain control, adequate nutrition, and other appropriate palliative care coordinated by the HIV Specialist in accordance with the Eighth and Fourteenth Amendments of the United States Constitution.

i. The defendants shall make good faith efforts to place inmates in the terminal stages of AIDS in appropriate facilities or in the community, should the HIV Specialist determine that the Jail cannot provide appropriate care for the end-stage HIV-positive inmate.

J. Prior to discharge from the Jail to the community, all HIV-positive inmates shall have an appropriate discharge plan. A post-discharge appointment with an appropriate HIV medical care provider in the community shall be scheduled for every HIV-positive inmate, and each inmate shall be informed upon discharge of the date, time, and location of that appointment. If the inmate is on any prescribed medications, defendants shall provide sufficient medications to prevent gaps in the availability of those medications.

i. The post-discharge appointment may be with the Fulton County Health Department (“FCHD”). The FCHD has agreed to see HIV-positive inmates released from the Fulton County Jail daily (Monday-Friday). Defendants shall provide these inmates with at least a four-day supply of medication upon their release from the Jail. In the event that the FCHD changes its schedule or policy, defendants shall immediately make alternative arrangements to continue providing post-discharge appointments, notification of the appointments, and medications to prevent gaps in the availability of HIV medications. Defendants shall not be obligated to provide more than a seven-day supply of medication.

ii. Defendants shall attempt to schedule post-discharge appointments at Grady Hospital’s Infectious Disease Program (“IDP”) for those inmates who qualify for the IDP, and shall notify inmates of their individual appointments.

iii. The defendants shall allow AIDS service organizations and treatment providers to provide inmates copies of pamphlets and other materials containing information about HIV, its treatment, and related social services. The defendants shall make these materials available to inmates by placing copies in the Jail’s library.

K. If a patient is transferred to another incarcerated setting, the inmate’s updated medical records, including progress notes, laboratory testing records, HIV consultation records, and a list of prescribed medications shall accompany the inmate. If the inmate is on any prescribed medications, defendants shall provide sufficient medications to last at least through the inmate’s transfer to the next facility.

L. All HIV-related services and treatment shall be kept confidential in accordance with applicable state, local, and federal law.

M. Defendants shall screen all incoming inmates for symptoms of tuberculosis infection immediately upon admission. Defendants shall promptly isolate, diagnose, and treat any individual with a suspicion of contagious tuberculosis. Follow-up treatment and testing shall be conducted according to the recommendations and guidelines of the Centers for Disease Control ("CDC"). Any individual who has symptoms of tuberculosis and all HIV-positive persons shall have a chest x-ray within 48 hours of intake. Tuberculin skin test screening shall be performed on all inmates who do not have a documented history of a positive tuberculin skin test result. Preventive treatment for tuberculosis shall be offered to any inmate with a positive PPD whose anticipated length of stay is greater than two months. Defendants shall maintain appropriate facilities for respiratory isolation that are consistent with the recommendations of the CDC and the Occupational Safety and Health Administration ("OSHA").

N. All HIV-positive women shall receive a pregnancy test upon admission to the Jail and shall receive pap smears at their first physical exam. Known HIV-positive women shall receive pap smears every six months thereafter.

IV. Staffing

A. Defendants shall employ a sufficient number of qualified permanent medical staff to meet the healthcare needs of HIV-positive inmates at all times.

B. Fulton County defendants shall employ a sufficient number of trained correctional staff to meet the healthcare needs of HIV-positive inmates at all times. Shortages in correctional staff shall not interfere with the provision of medical care in accordance with Section III, above. The Fulton County defendants shall ensure that shortages in correctional staff do not prevent or delay the distribution of medications or the transport of HIV-positive inmates for any medical

appointments or needed medical care, either within the facility or in the community.

C. All correctional staff members, including command staff, shall receive regular training regarding HIV and tuberculosis infection, including modes of transmission and universal precautions.

D. Defendants shall maintain an attendance log and daily staffing schedule for both correctional and medical personnel. The adequacy of staffing shall be reviewed monthly by the Sheriff, the Chief Jailer, the Director of Medical Services, the Medical Director, and the on-site health services administrator.

E. Defendants shall establish a regular monthly meeting that includes correctional line staff members and direct medical service providers to address integration of medical and correctional goals and services (i.e., conflicts among medical and correctional staff; incidents when inmate care was delayed or denied due to problems or miscommunication among staff members; staffing, staff training, or staff deployment needs; etc.). Defendants shall identify and implement solutions to address integration needs. Defendants shall keep minutes of all meetings, and shall provide the Monitor with copies of those minutes.

V. Sanitation and Housing

A. Because environmental factors impact significantly on the health of inmates, particularly HIV-positive inmates whose immune systems are weakened, the chronic care units, medical observation units, and any housing unit or other area where HIV-positive inmates are or may be placed shall comply with the standards set forth in the guidelines and recommendations of the American Correctional Association, OSHA, and the CDC. In accordance with such standards, these areas shall be cleaned on a daily basis, shall be disinfected between placements

or inmates, and shall be kept in good working order and physical condition. Fulton County defendants shall conduct weekly checks on each of these areas to ensure that sanitation and physical conditions comply with these standards, and shall respond promptly to any deficiencies identified during these checks. Sanitary supplies such as hand soap, clean hand towels, bleach, and disinfectant shall be available to inmates and staff as needed. Defendants shall maintain an exposure control plan for blood-borne pathogens.

B. All housing units to which HIV-positive inmates are assigned shall be adequate to meet the needs of the HIV-positive inmates placed there. This shall include, but is not limited to, assurance that no HIV-positive inmate in a chronic care unit or with a diagnosis of AIDS shall sleep on the floor, and that all HIV-positive inmates shall have adequate access to toilet facilities, clean bedding and clothing, hot and cold running water, and drinkable water at all times.

C. HIV-positive inmates shall not remain in the intake holding cell for greater than eight hours. The intake holding cell shall provide inmates adequate access to toilet facilities and drinkable water at all times, and shall be sufficiently large to accommodate the number of inmates held in the cell.

D. The County shall identify mechanisms for accommodating current and anticipated jail population.

VI. Grievances

A. Because of the importance of the grievance system in identifying both individual and systematic problems, defendants shall ensure that medical and dietary grievances by HIV-positive inmates are answered within 72 hours of their submission to medical personnel. No issue related to medical care shall be designated as "non-grievable." Grievance forms shall be

available to inmates at all times, and defendants shall provide inmates with a duplicate copy of their medical and dietary grievances at the time of their submission.

B. The medical staff person who serves as medical Grievance Coordinator shall keep a log of all medical and dietary grievances received from HIV-positive inmates. Each month, he or she shall compile a report including the numbers of such medical grievances received during the month, the substance of the grievances by category, the time taken to reply to grievances, and the resolution reached. This report shall be provided to the Monitor, the Medical Director, the Director of Medical Services, the Sheriff, and the on-site health services administrator.

VII. Quality Management

A. Defendants shall perform ongoing quality management that monitors the quality of healthcare services provided at the Jail. The quality management program shall monitor all aspects of healthcare including at least the following: access to healthcare, medication management, nursing services, physician services, access to specialty care, mental health services, pharmacy services, dental services, environmental services, infection control procedures, healthcare records, sick call services, intake screening and evaluations, chronic disease services, infirmary care, diagnostic services, discharge planning, and adverse patient occurrences including all deaths. The quality management program shall include reviews of all aspects of healthcare provision at the Jail, and shall identify any deficiencies in services to inmates as well as any staff training needs and/or deficiencies. Corrective plans to address all deficiencies and recommended improvements shall be prepared, and the quality management program shall include ongoing assessment of the effectiveness of corrective plans and actions.

B. A multi-disciplinary Quality Management Committee shall meet monthly, and

shall perform at least quarterly reviews of all aspects of healthcare. The Committee shall involve the participation of qualified healthcare professionals with appropriate specialities and representatives from all medical departments at the Jail.

C. For the first six months of this *Agreement*, the Monitor shall be provided with copies of all findings, conclusions, corrective plans, and any other reports of the Quality Management Committee and the outcome of corrective plans and shall review this information to determine whether the Quality Management program is working effectively. The Monitor shall also be provided with copies of all findings, conclusions, and any other reports resulting from the peer review process, as well as any corrective plans or actions that occur as a result of the peer review process. After the first six months of this *Agreement*, the defendants shall provide the Monitor with copies of quality management documents related to specific problems the Monitor has identified during his assessment. If at any time during this *Agreement* the contractor for medical care at the Jail changes, the Monitor shall be provided with copies of quality management documents for the first six months of the new contract.

D. The Sheriff shall be informed about problems with the healthcare delivery system as well as on-going efforts to resolve these problems.

VIII. Appointment of Correctional Healthcare Monitor

A. The parties agree that the Court shall appoint a Correctional Healthcare Monitor to monitor defendants' compliance with this *Settlement Agreement*, to report to the Court with regard to defendants' progress in bringing the medical care at the Jail to the constitutionally acceptable level outlined in this *Agreement*, and to consult and work with defendants as necessary to bring the medical care at the Jail into compliance with this *Agreement*. Robert B.

Greifinger, M.D., shall serve as the Monitor (curriculum vitae attached). Dr. Greifinger is an experienced correctional healthcare professional with extensive expertise in the areas of HIV and AIDS, infection control, medical peer review and quality management, and policy and protocol development. He has served both as the chief medical authority for both Rikers Island Health Services (New York City Jails) and the New York State Department of Correctional Services. He has also served as consultant to many prison and jail systems and to the parties and judges in correctional healthcare litigation.

B. The Monitor shall be paid by the Fulton County defendants at an hourly rate of \$250 per hour, plus \$125 per hour for travel time (not to exceed five hours each way), and reasonable expenses. For the preparation of his initial report and for each subsequent quarterly report, the Monitor may spend up to 45 working hours. For each report, the 45 hours shall include at least one onsite inspection, unannounced to the defendants. If the Monitor identifies the need for additional specialists or experts to assist the Monitor in discharging his duties under the *Agreement*, he shall notify the parties of the need and the reasons. If the parties are unable to reach an agreement concerning the Monitor's request for additional assistance, the request shall be submitted to the Court.

C. The Monitor shall have access to medical, dental, and mental health records of the class members, to defendants and any members of their staffs, to class members themselves, to attorneys for any party, and to any other information (including minutes, reports, and other documents), as he deems necessary to determine compliance with this *Settlement Agreement* and to accomplish his obligations pursuant to the *Agreement*. The Monitor's access to information shall not be unreasonably withheld.

D. Within thirty days of the Court's approval of this *Settlement Agreement*, the Monitor shall conduct an initial assessment of the medical services provided to HIV-positive inmates at the Jail and shall develop recommendations addressing any deficiencies that prevent compliance with this order. The assessment and recommendations shall include a review of any changes and improvements made by defendants since the filing of this lawsuit, the reasons for those changes and improvements, and the success of those changes and improvements. The scope of the assessment and recommendations shall include any and all systems and aspects of care that the Monitor deems relevant to the provision of constitutionally adequate medical care to the plaintiff class. The assessment and recommendations shall address all aspects of this *Settlement Agreement*, including but not limited to review of the following systems:

- i. Intake screening and management
- ii. Access to routine and acute medical care, including hospitalization, surgical care, consultation, and referrals
- iii. Medication administration, management, and tracking, including pharmacy services
- iv. Emergency care and services
- v. Medical observation unit equipment and procedures
- vi. Follow-up of diagnostic testing and referral providers' treatment decisions
- vii. Complaint tracking and resolution
- viii. Health record maintenance, documentation, and transfer
- ix. Communicable disease control
- x. Credentialing

- xi. Staffing, including job descriptions and scopes of practice
- xii. Quality Management, including performance measurement, practice guidelines, and peer review
- xiii. Discharge planning
- xiv. Environmental health and sanitation
- xv. Coordination between medical, mental health, dental, and security staff
- xvi. Initial and ongoing training of medical and correctional staff

Following the initial assessment, the Monitor shall review any of these systems he deems necessary.

E. In conducting his assessment and preparing his recommendations, the Monitor

shall have access to and work with medical and correctional personnel at Fulton County Jail and in the Fulton County Sheriff's office as he deems appropriate. Defendants shall have thirty days to remedy deficiencies identified and shall report to the Court, the Monitor, and plaintiffs'

counsel on these improvements. The Monitor shall determine the types of information that defendants must include in their reports. If at any time following the defendants' initial report on their compliance plaintiffs believe that defendants are not in compliance with any term of this *Agreement*, plaintiffs shall bring their concerns to the attention of the defendants and make reasonable attempts to resolve these concerns informally. Plaintiffs shall seek the Court's assistance in obtaining compliance only if the parties are unable to resolve their differences informally.

F. Following the initial assessment, the Monitor shall report on defendants' compliance with this *Settlement Agreement*. These reports shall take place at least quarterly,

unless the Court directs that they shall take place more frequently. The Monitor shall provide copies of these reports to the District Court, plaintiffs' counsel, and counsel for the defendants. All parties shall have the opportunity to respond to the reports submitted by the Monitor.

G. In addition to the work of the Monitor, plaintiffs' counsel shall continue to have reasonable access to the plaintiffs; to plaintiffs' Jail and medical records (subject to relevant protective orders); and to defendants, their agents and employees in order to monitor defendants' compliance with this *Settlement Agreement*. Before speaking with any named defendant about matters related to this *Agreement*, plaintiffs' counsel shall advise defendants' counsel of their intent to do so and allow counsel a reasonable opportunity to respond and/or be present.

IX. Implementation

A. Defendants shall immediately explain the terms of this *Settlement Agreement* to all of their agents, servants, representatives, and employees in any way connected with the subject matter of this suit, in order to ensure their understanding of this *Settlement Agreement* and the necessity for strict compliance with its terms. Defendants shall require strict compliance with this *Settlement Agreement* by all such persons and their successors.

B. The Fulton County defendants shall immediately provide notice of the material terms of this *Settlement Agreement* to all current and future class members by providing all HIV-positive inmates who enter the Jail with an HIV/AIDS information pamphlet. This pamphlet will include the material terms of this *Settlement Agreement*, as well as notification of the *Settlement Agreement*, and contact information for the class counsel. Prior to its distribution, this pamphlet shall be approved by plaintiffs' counsel. Any inmate later identified as HIV-positive will also be provided this pamphlet. Four (4) copies of this *Settlement Agreement* shall be maintained and

available for use in the Jail's law library.

C. Defendants shall not retaliate against inmates for their participation in this lawsuit or membership in the class.

D. Fulton County shall be responsible for monitoring and enforcing compliance with all provisions of this *Settlement Agreement*. Fulton County shall also be responsible for quarterly compliance reviews of any correctional healthcare contract with the County. This shall include a review of the contractor's compliance with any required reporting.

X. Conclusion

A. If defendants fail to comply with the terms and conditions of this *Settlement Agreement*, plaintiffs' counsel may apply to the Court for a finding of contempt or other appropriate relief. Prior to approaching the Court for such relief, plaintiffs' counsel will bring any deficiencies to the attention of the defendants and the Monitor and will make reasonable attempts to resolve the issues informally.

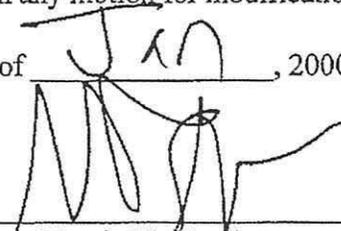
B. The parties agree and stipulate, and the Court hereby finds, that the prospective relief set forth in this *Settlement Agreement* is narrowly drawn, extends no further than necessary to correct the violations of plaintiffs' federal rights set forth in their *First Amended Complaint* and is the least intrusive means necessary to correct these violations. The parties agree and stipulate, and the Court hereby finds, that this *Settlement Agreement* will not have an adverse impact on public safety or the operation of a criminal justice system. Accordingly, the parties agree and stipulate, and the Court hereby finds, that this *Settlement Agreement* complies in all respects with the provisions of 18 U.S.C. § 3626(a). This *Settlement Agreement* is not intended to have any preclusive effect except between the parties in this action. Should the issue of the

preclusive effect of this *Settlement Agreement* be raised in any proceedings other than this action, the parties agree to certify that this *Settlement Agreement* was intended to have no such preclusive effect. This *Settlement Agreement* does not resolve, adjudicate, or bar the damages claims of any former, present, or future class members.

C. Subsequent to an agreement or order for attorney's fees and costs in this action to date, plaintiffs will only seek fees and costs that are directly and reasonably incurred in enforcing the relief ordered for the violation of plaintiffs' rights.

D. Any party may seek modification of any part of this *Final Settlement Agreement* for good cause shown. Defendants shall continue to implement in a timely manner all parts of this *Agreement* pending decision of the Court on any motion for modification.

SO ORDERED this 24 day of JAN, 2000.

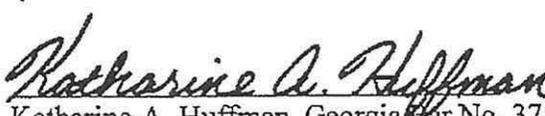


Hon. Marvin H. Shopp
United States District Court
Northern District of Georgia

Submitted, approved, and consented to by:



Tamara H. Serwer, Georgia Bar No. 617053



Katharine A. Huffman, Georgia Bar No. 375320
Stephen B. Bright, Georgia Bar No. 082075
Robert E. Toone, Georgia Bar No. 714670
Southern Center for Human Rights
83 Poplar Street, N.W.
Atlanta, Georgia 30303-2122
Telephone: (404) 688-1202



Chip Rowan / by THS
Chip Rowan, Georgia Bar No. 616577
Rowan & Associates
235 Peachtree Street, Suite 1725
Atlanta, Georgia 30303
Telephone: (404) 586-2350

Attorneys for Plaintiffs

Jacquelyn A. Barrett
Jacquelyn Barrett, Fulton County Sheriff
Fulton County Sheriff's Department
185 Central Avenue, S.W.
Atlanta, Georgia 30303

Mike Kenn

Mike Kenn, Chairman
Fulton County Board of Commissioners
141 Pryor Street, S.W.
Atlanta, Georgia 30303-3444

Overtis Hicks Brantley

Overtis Hicks Brantley, Esq.
Office of the County Attorney
Suite 4083
141 Pryor Street, S.W.
Atlanta, Georgia 30303-3444
Telephone: (404) 730-7750

Attorney for Fulton County

William T. Mitchell / by THS
William T. Mitchell, Esq.
Drew, Eckl & Farnham
P.O. Box 7600
Atlanta, Georgia 30357-0600
Telephone: (404) 885-1400

Attorney for Correctional Healthcare Solutions, Inc.

RFP# 17RFP07012016B-BR Inmate Medical Services
Addendum #1
July 6, 2016

Appendix #4

ORIGINAL

IN THE UNITED STATES DISTRICT COURT
FOR THE NORTHERN DISTRICT OF GEORGIA
ATLANTA DIVISION

FILED IN CLERK'S OFFICE
U.S.D.C. Atlanta

DEC 2 2005

LUTHER D. THOMAS, Clerk

By: *J. Reed* Deputy Clerk

FREDERICK HARPER, individually and on
behalf of all present and future inmates in the
Fulton County Jail in Atlanta, Georgia,

Plaintiff,

v.

DEPUTY TYRONE BENNETT, individually;
and FULTON COUNTY, GEORGIA; FULTON
COUNTY BOARD OF COMMISSIONERS,
KAREN HANDEL, Chairperson, ROB PITTS,
EMMA I. DARNELL, WILLIAM EDWARDS,
TOM LOWE, NANCY BOXILL, members, in
their official capacities;

Defendants,

MYRON FREEMAN, Fulton County Sheriff,
in his official capacity,

Defendant and Third Party Plaintiff,

v.

JIM DONALD, Commissioner Georgia,
Department of Corrections in his official capacity,
and the GEORGIA DEPARTMENT OF
CORRECTIONS,

Third-party defendants.

CIVIL ACTION

NO. 04-CV-1416-MHS

CONSENT ORDER

EXHIBIT 1**Required Proposal Submittal Check List for Request to Proposal (RFP)**

	Equal Business Opportunity Plan (EBO Plan) Exhibit H – First Source Jobs Program Information Form 1 Exhibit H – First Source Jobs Program Agreement Form 2	
	Evidence of Insurability, proposer must submit one (1) of the following: Letter from insurance carrier Certificate of Insurance An umbrella policy in excess of required limits for this project	

I. Introduction

1. This Consent Order resolves the dispute between the Plaintiffs, a class of inmates who are now or will be incarcerated in the future at the Fulton County Jail facilities in Atlanta, Georgia, and the Defendants, Fulton County, Georgia; the Fulton County Board of Commissioners and its members, in their official capacities; the Sheriff of Fulton County, in his official capacity, and the Commissioner of the Georgia Department of Corrections, in his official capacity, regarding conditions at the Fulton County Jail. The term "Defendants" herein refers to all of these defendants and their successors, agents, and assigns, with the exception of the Commissioner of the Georgia Department of Corrections and the Georgia Department of Corrections. The term "County Defendants" refers to Defendants Fulton County and the Fulton County Board of Commissioners and its members in their official capacities. The term "Sheriff" refers to the Sheriff of Fulton County in his official capacity. The term "State Defendants" refers to the Commissioner of the Georgia Department of Corrections and the Georgia Department of Corrections. Unless otherwise expressly provided herein, any obligations of this Consent Order related to the physical condition or maintenance of jail facilities shall not be the responsibility of the State Defendants.

2. Plaintiff Frederick Harper brought this action on June 22, 2004, pursuant to 42 U.S.C. § 1983, seeking compensatory and punitive damages, and

preliminary and permanent injunctive relief and declaratory relief for violations of his rights under the Eighth and Fourteenth Amendments of the U.S. Constitution. In his amended complaint, the Plaintiff alleges that he, and all people at the Jail, were confined in unconstitutional living conditions due to an excessive number of inmates in the Jail, an inadequate number of detention officers to ensure their safety, the breakdown of the ventilation, plumbing and laundry systems, and other circumstances.

3. The conditions at the Jail were described in a report of Dr. Robert Griefinger dated May 31, 2004, which is appended to this Consent Order as Appendix A.

4. The parties agree that Dr. Greifinger's report accurately described the conditions at the Jail on May 26-27, 2004 and agreed on July 7, 2004, to the appointment of a receiver by the court. See Consent Order of July 7, 2004, entered herein. On July 14, the Court appointed John Gibson as the Receiver. Order Appointing Receiver of July 14, 2004, filed herein. The Court swore John Gibson in as receiver on July 23, 2004, and he immediately took charge of the Jail. He served until January 1, 2005, when the newly elected sheriff of Fulton County assumed responsibility for the Jail.

5. The Plaintiffs, the Fulton County Sheriff, and the County Defendants have reached agreement as set out in this Consent Order with regard to all claims

for declaratory and injunctive relief on behalf of the class. Defendant Department of Corrections has agreed to perform the obligations imposed by it under this Consent Order. The parties agree that Dr. Greifinger's letter of May 31, 2004 and his September 14, 2004 follow-up report (Appendix A) provide an adequate factual basis for the Court to assess the conditions at the Jail and make findings herein.

6. The Court shall retain jurisdiction to enforce the terms of this Consent Order as provided by law.

7. The parties agree that a violation of the terms and conditions of this consent order does not alone establish the existence of unconstitutional conditions at the Jail or that any violation of an inmate's constitutional rights has occurred. No citation of contempt shall be issued for violation of the terms of this Order unless the dispute resolution procedures set out in Paragraph 112 have first been invoked and unless the Court has made a finding that such violation has led to unconstitutional conditions of confinement at the Jail or that the violation has led to violation of the constitutional rights of an inmate.

II. Definitions and Descriptions

8. The terms "Jail" and "Fulton County Jail" refer to the three facilities presently operated by the Fulton County Sheriff as the Fulton County Jail: the main building at 901 Rice Street which has a capacity of 2250 inmates, the Bellwood

Annex which has a capacity of 200, and the Marietta Annex which has a capacity of 100.

9. The main jail at 901 Rice Street consists of a three-story low rise structure joined to an elevator tower, providing access to two housing towers, designated the North Tower and the South Tower. The North side of the jail has seven floors where inmates are housed; the South side of the jail has six. Each such floor has six cellblocks, each containing 16 to 18 cells and a dayroom. Each floor also has a unit for exercise and an all-purpose unit used for sick call, legal and family visitation, counseling, and other purposes.

10. "Zone" refers to any one of the cellblocks, units for exercise or multi-purpose units.

11. "Staff" refers to any and all individuals involved in the administration of the Jail, deputies, detention officers, security specialists, and other employees, whether sworn deputies or civilian, and any other agents, successors, and assigns.

As used herein, "uniformed officer" refers to personnel trained and qualified to supervise inmates in the jail, whether sworn deputies of the Sheriff's office or civilians trained for such duties.

III. Terms and Conditions Necessary to Prevent Overcrowding, Provide for Appropriate Staffing, and Reduce Processing Time

A. Staffing and Security

12. The number of uniformed officers at the Rice Street facility and the two annexes shall not be decreased below the level authorized on June 1, 2005, unless such decrease is authorized by order of this Court. See Appendix B. The Board of County Commissioners shall not "freeze" or otherwise prevent the filling of positions presently authorized for security staff at the jail facilities without leave of this Court.

13. All Staff shall be trained with regard to the Jail's Jail Bureau Policies and Procedures Standard Operations Manual and be required to consult and follow the policies and procedures contained in it.

14. The Sheriff shall assign sufficient detention staff to provide transport, security and other functions necessary for the provision of medical care. The County Defendants shall provide sufficient detention staff for regular sick call and the prompt distribution of medications in all three facilities, and for prompt transport of inmates to and from any medical appointments or needed medical care, either in the facility or in the community. The Sheriff shall train detention staff to recognize and respond appropriately to signs and symptoms of mental illness.

15. The Sheriff shall require detention staff assigned to each floor to conduct security rounds inside each zone every hour.

16. All cell doors at the Jail shall be equipped with functioning locks which can be opened remotely from the tower. These locks shall be maintained in good working order.

17. All housing units shall have functioning emergency call buttons or intercoms in the day room at all times. On the medical floor of the Jail, each cell shall have a functioning emergency call button. Emergency call buttons and intercoms shall remain on except for good reason documented. This documentation shall be maintained as a log at the Jail.

B. Population Limits and Housing

18. The population of the 901 Rice Street facility shall not exceed an average of 2250 inmates daily in any calendar month so long as all housing units are being utilized. If one or more cellblocks are not being used, the population shall be reduced by the number of inmates normally housed in that part of the Jail. Other population figures in this Consent Order shall be adjusted in this manner. The population of Bellwood shall not exceed 200, and Marietta shall not exceed 100.

19. No inmate shall be required to sleep on the floor.

20. No more than two inmates shall be housed in a cell.

21. Defendant Commissioner of the Georgia Department of Corrections shall ensure that all inmates eligible for transfer to state prison facilities will be

removed from the Fulton County Jail or any other facility operated or leased for the housing of arrestees or inmates by the Fulton County Sheriff on a priority basis and transferred to a state facility as soon as possible after receipt of the paperwork necessary to effect the transfer.

C. Processing of Releases

22. The Sheriff shall implement and maintain procedures to provide for the release of Inmates from the Jail within a reasonable period of time, not to exceed 24 hours after receipt of court documents establishing that the inmate has received a signature bond, been authorized to post and has posted bond, had the charges against them dismissed, or otherwise become eligible for release. (The parties acknowledge that this time period may be exceeded for inmates subject to unreleased holds from other counties or governmental authorities.) The Sheriff will take all reasonable and prudent measures available to reduce the release time as much as possible and shall provide to the court and all parties to this Consent Order a monthly report of all inmates detained more than 24 hours after receiving a signature bond, posting bond, having the charges against them dismissed, or otherwise becoming eligible for release. The report shall state how long the inmate was detained after becoming eligible for release and the reason the detention exceeded 24 hours.

23. The Clerk of Fulton County Superior Court shall work with the Sheriff to accomplish real time disposition of court cases.

24. The Fulton County State Court shall work with the Sheriff to implement first appearance hearings at the jail beyond normal business hours by the use of video-conferencing, a judicial officer conducting such hearings at the jail, or other means.

IV. Other Terms And Conditions

A. Staffing and Security

25. The Sheriff shall assign at least three uniformed officers to supervise the inmates in the six cellblocks on each side of each floor at the Rice Street facility on all shifts seven days a week. In addition, one supervisor shall be stationed on each floor and at least one person shall be stationed in the tower to observe the cellblocks on each side from the tower. The Sheriff shall report to the Court each month when there are fewer than three officers in a cellblock on any shift and the reason for there being fewer than three.

26. Whenever the number of inmates on the floor on one side at the Rice Street facility exceeds 224, the Sheriff shall deploy on that floor at least one additional uniformed officer for every 25 inmates over 200 on all shifts seven days a week until the population decreases to 204 or less. If the Sheriff is unable to deploy the officers required by this paragraph within 10 days after the number of

inmates requires it, the Sheriff shall find other housing for enough inmates to reduce the inmate population on the floor to a level for which he has the minimum staffing required by the provisions of this Consent Order.

27. If inmates are housed at those facilities, there shall be 5 officers and a supervisor at Bellwood and 3 officers and a supervisor at Marietta, for all shifts.

28. Maintaining sufficient personnel to meet these staffing levels 24 hours a day seven days a week is necessary for the safety and security of inmates and jail personnel and shall be a high priority of the Sheriff. The Sheriff shall employ various measures to maintain sufficient personnel, including, but not limited to the use of overtime, temporary reassignment of personnel, and filling any vacancies as promptly as possible.

29. The Sheriff shall maintain administrative staff at the Rice Street facility adequate to complete processing of: new inmates as soon as possible and no later than within 8 hours of commitment; inmates in time for first appearance on the next available court date; and inmates for release as soon as possible and in any event within 24 hours of notice and receipt from the court of paperwork establishing their eligibility for release.

30. The Sheriff shall ensure that detention staff shall conduct regular and random searches for weapons throughout inmate housing units, common areas, and all-purpose rooms.

31. The Sheriff shall ensure that there shall be sufficient detention staff to ensure that a detention officer is available to be present, as requested by the nurse, at all times during pill distribution.

B. Population Limits and Housing

32. The Sheriff shall maintain at the Jail a classification system that specifies at least three levels of custodial control. Any revisions in the ~~classification system shall be documented, provided to counsel for the Plaintiffs,~~ and maintained in the Jail Bureau Policies and Procedures Standard Operations Manual.

33. The Sheriff shall on a weekly basis notify the Chief Judge of the Superior and State Courts, the Chief Magistrate, the District Attorney, the Solicitor General, the chiefs of each police force in the county, the public defenders, and counsel for the Plaintiffs of the total population of the three jail facilities and the number of beds available for men and for women at the facilities on the day of the report.

34. The Sheriff shall on a daily basis provide the magistrates or judges conducting first appearance hearings in both Superior and State Court with the number of beds available for men and for women in the jail facilities before the start of first appearance hearings each day.

35. Whenever the inmate population at the Rice Street facility reaches or exceeds 2100 and other housing is not available, the Sheriff will take the following actions:

a. Notify the judges and magistrates of the State and Superior Courts, the District Attorney, the Solicitor General, and the chiefs of each police force in the county, that the Jail is near capacity, inform them of the number of beds available at the Jail and request that it be taken into account with regard to releasing arrestees on citation, setting bond, sentencing and sentencing modification,

b. Review inmate records for early releases or home arrest.

36. The Sheriff shall maintain a list of other facilities where beds are available. If the number of inmates in the Rice Street facility exceeds the number that can be housed two to a cell, the Sheriff may house inmates on bunks in the day rooms while making efforts to decrease the population and find alternative housing in order to reduce the overall inmate population to capacity within forty-five (45) days. If the population of the Rice Street facility remains over 2250 for twenty (20) consecutive days, the Sheriff shall find alternative housing, place inmates on home arrest pursuant to statute, implement early release, or take such other action as he deems appropriate to reduce the population to 2250.

37. In addition to the actions being taken by the Sheriff, if the Rice Street population exceeds 2250 for twenty (20) consecutive days, the Public Defender

shall provide a list of inmates deemed eligible for release to the District Attorney who shall examine such list to determine whether an agreement can be reached on the release of said inmates. If an agreement is not reached by the Public Defender and District Attorney, the list will be submitted to the Chief Judge who after review, may authorize the release of inmates from the list as deemed appropriate.

38. Whenever less than 15 or fewer beds remain available for women, the Sheriff shall take the measures set out in paragraph 35 in order to prevent, if possible, the number of women from exceeding the number of beds for women. If the number of women exceeds the number of permanent beds, two beds to a cell, for women by 10 or more for twenty days or more, the Sheriff shall find alternative housing, place inmates on home arrest pursuant to statute, implement early release, or take such other action as he deems appropriate to reduce the population so that it does not exceed the number of permanent beds, two beds to a cell, for women.

39. Upon inquiry, plaintiff's counsel shall be provided the Jail population count on any day.

C. Replacement, Repair and Preventive Maintenance of Mechanical, Plumbing and Electrical Systems

40. The maintenance of the physical structures that are used to house inmates by Fulton County, including the 901 Rice Street facility, the Bellwood Annex and the Marietta Annex, and the mechanical, plumbing, and electrical

systems shall be the responsibility of the County Defendants operating through the General Services Department of Fulton County.

41. The County Defendants shall inspect manholes 4 through 14 on the sewer line serving the Rice Street Facility no less than quarterly and shall pump these manholes as required to insure that sewage does not back up into the housing areas on the first floor of the Rice Street Facility. The County Defendants shall work with City of Atlanta officials to insure that there are no cross connections problems in the water and sewer pipes serving the Rice Street Facility and shall cause any such problems to be corrected as soon as practicable. In the event these actions do not lead to a resolution of the problem of sewage backing up into the housing areas, the County Defendants and the Plaintiffs will discuss and will bring to the Court for its review additional remedial actions needed to resolve the problem.

42. By July 1, 2009, County Defendants shall repair and upgrade as needed and appropriate the plumbing in the jail facilities, including but not limited to replacing fixtures in cells where needed; making such repairs as needed to ensure that all toilets, faucets and showers work properly; reinstalling those fixtures which are not properly affixed to the walls and the plumbing system; removing electrical hazards from showers; and, installing shutoff control devices.

43. The County Defendants shall by July 1, 2009, complete the following work at the 901 Rice Street facility:

- (a) replace the heating, ventilation and air conditioning equipment (HVAC), including the air handling units, terminal units and exhaust fans, associated ductwork and piping;
- (b) replace air grilles in the cells, dayrooms, corridors and support areas;
- (c) replace existing building energy management system with a direct digital control energy management system;
- (d) replace power disconnect and motor starter for all the HVAC equipment and modify electrical equipment to support new HVAC equipment;
- (e) install new lighting fixtures in all living areas in the towers at 901 Rice Street and salvage and reuse existing lighting fixtures in the low rise building at 901 Rice Street;
- (f) install new acoustic ceiling tile;
- (g) remove and replace chillers, cooling towers and chilled water pumps at the central plant.
- (h) upgrade the electrical capabilities of the facility at 901 Rice Street, including its generators, so that sufficient amounts of electricity are provided to the facility at all times and power outages are avoided.

44. The County Defendants shall by July 1, 2009, renovate the four employee/inmate elevators at 901 Rice Street as necessary to insure the safe and reliable operation of each elevator. The County Defendants shall by July 1, 2009, renovate the two public elevators at 901 Rice Street as necessary to insure the safe and reliable operation of each elevator.

45. The County Defendants shall issue requests for proposals to accomplish the goals of Paragraphs 42, 43, and 44 no later than November 1, 2005, and shall commence the renovations as soon as practicable thereafter.

46. The County Defendants, through the Fulton County General Services Department and retention of engineering, construction and other appropriate firms, shall bring all of the jail facilities into compliance with the electrical, fire, plumbing, mechanical and other applicable codes of Georgia and Fulton County.

47. The County Defendants, through the Fulton County General Services Department and/or consultants, contractors and other means, shall carry out a program of preventive maintenance to minimize disruptions of the operation of the jail facilities due to mechanical failures.

48. The County Defendants shall employ sufficient maintenance staff to identify maintenance needs, carry out routine maintenance and promptly make repairs where needed. When on-site maintenance staff is unable to repair some part of a critical system such as HVAC or heating, County Defendants shall

immediately secure a qualified person to make the repair. Dated work orders for both routine and extraordinary maintenance, including descriptions and dates of actions taken, shall be maintained at the Jail.

49. The Sheriff shall inform inmates of and shall have ready access to "Maintenance Repair Forms" such as the one appended as Appendix C to notify staff of maintenance needs. Maintenance Repair Forms shall be available to inmates at all times. The Sheriff shall arrange through a lock-box or other means a way for inmates to submit such forms. The Sheriff will screen requests to eliminate duplicate and frivolous requests.

50. Once notified by the Sheriff, the County Defendants shall address maintenance repairs in a timely fashion and in order of severity, as set forth in the maintenance contract. All responses to "Maintenance Repair" forms shall be documented and maintained at the Jail.

D. Ventilation and Temperatures

51. The Sheriff shall adopt and implement the "Excessive Heat Policy" appended hereto as Appendix D. The policy shall be included in the Jail's Jail Bureau Policies and Procedures Standard Operations Manual. A determination shall be made at medical screening at intake of those inmates vulnerable to heat injury, including aged or pregnant inmates, inmates with chronic illnesses, and

inmates taking certain medications and taken into account when establishing the inmate's medical profile.

52. The Sheriff shall ensure that the heat index is measured and reported on every shift where the reported ambient temperature is 80° or higher or the recorded heat index on the housing area is 88° or higher. Where the reported ambient temperature is 80 degrees or higher or the recorded heat index on the housing area is 88 degrees or higher then the "Excessive Heat Policy" shall be implemented by the Sheriff. Instruments used to measure temperatures and relative humidity shall be calibrated weekly.

53. The ventilation system in the cells shall provide at least fifteen (15) cubic feet per minute of circulated air per occupant. Additionally, cells shall have no less than four (4) air changes per hour.

54. The Sheriff shall provide inmates with additional clothing and blankets when the temperature falls below sixty-five (65) degrees Fahrenheit.

55. The Sheriff shall ensure that inmates being transferred from the Jail to the courthouse on a bus with no air conditioning shall be provided access to fresh ice water during the course of the trip and while waiting on the bus.

E. Environmental Health and Safety

56. The Sheriff shall provide inmates adequate cleaning supplies to clean and disinfect their living areas on a daily basis. When using cleaning supplies,

appropriate protective clothing and equipment shall be available for use by inmates and staff.

57. The Sheriff shall ensure that all safety and cleaning equipment is cleaned and stored in a safe manner. This equipment shall be maintained in good working order.

58. The Sheriff shall ensure that kitchen staff, including contracted employees and inmate workers, receive training which includes the reasons for and meaning of taking temperatures of food and delivering food quickly.

59. The Sheriff shall develop policies and procedures for maintaining the sanitation and environmental cleanliness of the Jail, which will be included in Jail Bureau Policies and Procedures Standard Operations Manual. Plaintiffs' counsel shall be permitted to review and comment on the policies and procedures prior to their final adoption.

60. The Sheriff shall ensure that all housing areas, including showers, sinks, and common areas are thoroughly and safely disinfected and cleaned on a regular basis to control mold and Staphylococcus.

61. The Sheriff shall ensure that the dishwashing machines in the Jail kitchen shall have a "final rinse" water temperature of one hundred-eighty degrees (180) Fahrenheit with a nozzle pressure of 15-10 psi. The time and conveyor

speed of water hitting the dish, utensil, or tray shall conform to the operating manual of the dishwasher.

62. The Sheriff shall cause the air quality in cells and day rooms to be documented by a qualified individual on a regular basis. This documentation shall be maintained at the Jail.

63. During the existence of this Consent Order, an environmental specialist retained by plaintiffs' counsel shall be allowed twice a year to inspect the Jail, speak with inmates and staff; inspect documents; take photographs of environmental conditions and take samples on a date and at a time approved by the Sheriff.

F. Plumbing

64. The County Defendants shall maintain toilets, showers, and sinks in good working order. The County Defendants shall develop a preventive maintenance schedule and policy for upkeep of the plumbing system.

65. All inmates in the Jail shall have access to fresh drinking water twenty-four (24) hours per day seven (7) days per week.

66. No inmate shall be housed in a cell with standing water in the cell. No inmate shall be housed in a cell with a toilet that does not work or a sink that does not work.

67. The County Defendants shall clean up any and all sewage leaks within two (2) hours of becoming aware of them.

68. The hot water temperature in all showers and sinks in the Jail shall be between one hundred (100) degrees and one hundred twenty (120) degrees Fahrenheit. There shall be at least one (1) working shower in each zone. All sinks shall have working cold and hot water.

69. All electrical wiring in showers shall be covered according to code such that no live wire is exposed.

G. Laundry

70. The Sheriff shall provide all inmates with at least three (3) sets of clean Jail uniforms and underwear per week upon being assigned to a housing zone. All inmate linens and towels shall be exchanged for clean linens and towels at least twice weekly.

71. The Sheriff shall permit only those inmates and staff trained in the proper use of all laundry equipment to use the equipment. Training shall include instructions regarding laundry procedures - how long clothes are to wash and dry, the amount of detergent to be used, the temperatures required to disinfect the materials being washed, the requirement that clothes be completely dry, and similar information - shall be maintained in writing.

72. The Sheriff shall maintain separate laundry carts for clean clothes and soiled clothes, and carts shall be clearly labeled indicating clean clothes or soiled clothes.

73. Dissolvable laundry bags shall be located in an area that is easily accessible during an emergency for collection of clothes, linens, and other laundry items that become contaminated with blood or bodily fluids.

H. Housing

74. All cells in the Jail shall be equipped with adequate lighting. Lighting in the cells shall be at least twenty (20) foot candles at desk level and at the grooming station pursuant to Jail Bureau Policies and Procedures Standard Operations Manual No:1100-01.

75. All cells shall have a working day light. No inmate shall be confined in a cell without a working light.

76. Noise levels in the inmate housing units shall not exceed 70 dBA (A Scale) during the daytime and 45 dBA (A Scale) at night. "Night" shall be defined as from 11:00 p.m. until breakfast is served. "Daytime" shall consist of all other times. See Jail Bureau Policies and Procedures Standard Operations Manual No. 1100-03.

I. Legal and Family Visits

77. The Sheriff shall allow legal visits at the Jail from 7 a.m. until midnight seven days a week. The County Defendants shall install telephones in the attorney visiting booths to facilitate confidential communications between attorneys and clients.

78. The County Defendants shall ensure that all steel grating covering windows in any visitation booth shall be removed and replaced with plexiglass or glass panels that make it possible for the inmate to see the visitor.

J. Medical Care

79. The Sheriff shall require the medical vendor to ensure that medication administration records specify what medications are provided, when, and by whom. If the prescribed medications are not provided, these records shall specify the reason that they are not. All staff distributing medication must observe medications being taken by the recipient inmate as they are distributed.

80. The Sheriff shall ensure that all negative pressure indicators in the tuberculosis isolation rooms shall be checked and maintained in good working order. If a negative pressure indicator is broken, it shall be repaired promptly.

81. The Sheriff shall ensure that all dental equipment shall be re-sterilized prior to each use. All sterilization and re-sterilization procedures shall be clearly

documented in writing and followed at all times. This documentation shall be maintained at the Jail.

K. Inmates with Physical Disabilities

82. The County Defendants shall ensure that there is housing for men and women inmates with physical disabilities and such housing shall conform to applicable guidelines provided by the United States Department of Justice pursuant to the Americans with Disabilities Act ("ADA"), including but not limited to, wheel-chair accessible cells, bathroom facilities, and shower facilities; and handrails and ramps to access shower facilities.

83. The County Defendants shall ensure that visitation areas are accessible to physically impaired inmates or appropriate accommodation made to ensure that they have the same access to visitation as all other inmates.

L. Mentally Ill Inmates

84. The Sheriff shall cause a mental health screening to be conducted on each person brought to the Jail. If during the intake assessment, the inmate is able to identify credibly his or her medication, the intake nurse shall refer the inmate to the main clinic to a physician or a physician's assistant who will continue the medications immediately. There shall be no unreasonable disruption in the continuity of medication. The intake medical provider shall ask each inmate identifying their medication to sign a release of information so that confirmation of

any treatment and medication administration and other relevant information can be exchanged as soon as possible.

85. Defendants shall employ a full-time board-certified psychiatrist. The psychiatrist's duties shall include, but not be limited to, evaluating treatment plans; review the prescriptions provided to mental health inmates; and oversee the creation, implementation, and revision of policies and procedures addressing mental health inmates.

86. The Sheriff shall provide staff assigned to the Jail, the courthouse, and transport duty with training in recognizing, responding, and working with mentally ill and mentally retarded people.

87. The Sheriff shall ensure that when a mentally ill inmate is identified during intake, the discharge planners at the jail shall be notified promptly.

88. Agencies providing support services to mentally ill and homeless people, such as Social Security Administration and those trained in administering benefits, shall be provided reasonable access to inmates to determine their eligibility for public benefits and begin the process of applying before they are released.

89. The Sheriff shall provide or arrange transportation for mentally ill and homeless inmates who are ordered by the court to enter day reporting or in-house treatment facilities.

90. The Sheriff shall ensure that court-ordered evaluations of inmates for competency to stand trial, insanity or other reasons shall be conducted within one week of such order.

91. The Sheriff and the Fulton County Defendants shall ensure that mentally ill inmates found incompetent to stand trial but remaining at the Jail awaiting transfer to Georgia Regional Hospital shall be reviewed each month to determine whether competency has been regained or other placement may be located.

92. The Sheriff shall provide to the courts each week a list of inmates the jail staff has identified as having substantial mental health issues. This list will be distributed to Public Defenders, Superior Court Expeditors, and any other parties necessary to assist in making appropriate recommendations for disposal of their cases.

M. Safety and Emergency Procedures

93. Comprehensive emergency policies and procedures conforming to National Commission on Correctional Healthcare ("NCCHC") and American Correctional Association guidelines shall be developed and implemented by the Sheriff. The emergency policies and procedures shall provide for immediate and appropriate response to any medical, fire, severe weather, riot, or other unforeseen emergency that could arise, and provide for drills at least twice a year. The

comprehensive emergency policies and procedures shall be in writing and made a part of the Jail Bureau Policies and Procedures Standard Operations Manual.

Plaintiffs' counsel shall be provided an opportunity to review and comment on the policies and procedures prior to their final adoption.

94. The Sheriff shall ensure that all uniformed staff at the Jail are trained in the proper use of fire safety equipment. Training in the proper use of fire safety equipment shall include quarterly retraining. All staff training and re-training in the use of fire safety equipment shall be documented and maintained at the Jail.

95. The County Defendants shall ensure that all fire doors in the Jail shall be maintained in good working order. All emergency equipment shall be maintained in good working order.

96. The Sheriff shall ensure that all uniformed staff and contracted medical staff shall be trained in administering CPR, and appropriate devices to prevent the spread of disease shall be made available on each floor in case of emergency.

97. The Sheriff shall ensure that the Jail fire system and equipment shall be tested quarterly. The Jail fire system and equipment shall be inspected and maintained annually. All inspections and findings shall be documented and maintained at the Jail. All sprinkler heads in the Jail shall be checked periodically

to ensure that they are clean of any debris. All sprinkler heads shall be maintained in good working order.

98. The County Defendants shall ensure that any electrical outlet that is located within twenty-four (24) inches of a sink or source of running water shall be equipped with a ground fault circuit interrupter or disconnected from electrical circuit.

99. The Defendants shall ensure that telephones located in the day rooms of the dorms shall be maintained in good working order.

100. The Sheriff shall ensure that recorded images of what occurs in the jail shall be kept for at least 10 days before the medium upon which they are recorded is reused. Any inmate that sustains an injury while incarcerated at the Jail shall be photographed pursuant to the Photographing Inmates Policy attached hereto at Appendix E.

N. Inmate Grievance Procedure

101. The Sheriff shall maintain a grievance procedure at the Jail. Upon admission to the Jail, inmates shall receive the inmate handbook or other document describing the grievance procedure and providing at least one grievance form. The handbook or other document shall inform inmates how to obtain additional forms, how to complete the forms, and submission of the forms. This information shall

also be set out on a laminated document and posted in each of the cellblocks housing units in the Jail.

102. Grievance forms shall be available to inmates at all times. Inmates shall receive a duplicate copy of their grievance forms at the time of their submission. All grievances shall be administered and responded to in accordance with the Jail Bureau Policies and Procedures Standard Operations Manual, No: 1900-08.

V. Monitor

103. The parties shall select a monitor subject to approval by the Court to inspect the Jail at least once a quarter and provide a report to the Court and the parties. If the parties are unable to agree on a monitor within 30 days of the entering of this order, the parties will each submit to the Court the names of three suggested monitors, and the Court will select a monitor.

104. The Monitor shall have access to any and all documents (including minutes, reports, and other documents), Jail staff, class members, and any other information, as he or she deems necessary to provide the Court with reports on the Jail.

105. The Sheriff and the Fulton County Defendants shall ensure the Monitor shall be paid by Fulton County defendants at a rate of \$90 per hour,

including for travel time (not to exceed five hours each way), for inspection of the jail (not to exceed 24 hours per visit) and for writing a report (not to exceed 10 hours for each report) and reasonable expenses, or such amounts and for such time periods as the Fulton County defendants and plaintiffs shall mutually agree are reasonable. The Monitor's visits shall be quarterly. If the Monitor identifies the need for additional specialists or experts to assist the Monitor in discharging his or her duties under the Order, he or she shall notify the parties of the need and reasons. If the parties are unable to reach an agreement concerning the Monitor's request for additional assistance, the request shall be submitted to the Court.

VI. Class Certification

106. Parties stipulate to and the Court hereby finds that this action is properly maintained as a class action. The plaintiff class is hereby certified as consisting of all inmates who have been since the date of the filing of the Complaint in this action, are now, or will in the future be incarcerated at the Fulton County Jail in Atlanta, Georgia.

VII. Scope of Relief; Impact

107. The parties, with the exception of the State Defendants, agree and stipulate, based upon the entire record, and the Court hereby finds, that the prospective relief set forth in this Consent Order is narrowly drawn, extends no further than necessary to correct the violations of the plaintiffs' federal rights, and

is the least intrusive means necessary to correct these violations. The parties, with the exception of the State Defendants, agree and stipulate, and the Court hereby finds that this Consent Order will not have an adverse impact on the public safety or the operation of the criminal justice system. The State Defendants agree that paragraph 21, the only one placing duties upon the State Defendants, extends no further than necessary to correct the violations of the plaintiffs' federal rights, is the least intrusive means necessary to correct these violations, and will not have an adverse impact on the public safety or the operation of the criminal justice system. Accordingly, the parties, with the exception of the State Defendants, agree and stipulate, and the Court finds, that this Consent Order complies in all respects with the provisions of 18 U.S.C. §3626(a). This Consent Order is not intended to have any preclusive effect except between the parties in this action. This Consent Order does not resolve, adjudicate, or bar the damages claims of any former, present, or future class members.

VIII. Modification and Enforcement

108. The Court shall retain jurisdiction to enforce the terms of this Order as provided by law.

109. The Sheriff and his staff shall provide a copy of this Consent Order to all of their agents, representatives, and employees in any way connected with the custody of class members. At least three copies of this agreement shall be

maintained in the Jail's library. Inmates who have questions about the provisions of this Consent Order shall be referred to plaintiffs' counsel by providing the names, telephone number and address of counsel.

110. Plaintiffs' counsel shall continue to have reasonable access to class members, documents maintained at the Jail and the Jail facility, including unannounced, escorted walkthrough visits of the Jail on a quarterly basis. Plaintiffs' counsel shall also be permitted communication with defendants directly, including their agents and employees, in order to monitor compliance with the terms of the Consent Order.

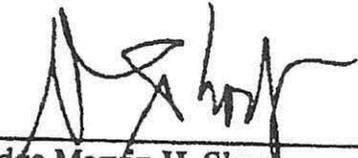
111. Any party may seek to modify any part of this Order for good cause shown. The parties acknowledge that these terms and conditions may require modification or situational variances to meet changed circumstances. Any party may initiate a modification or variance from the terms of this Consent Order by making a written request for such modification or variance to all parties to this Consent Order. If no party objects to the request within ten days, the party may submit the request to the Court for its consideration. If any party objects to a proposed modification or variance the dispute resolution procedures set forth in Paragraph 112 of this Consent Order shall be invoked. Once the dispute resolution procedures are invoked the parties shall comply with the Consent Order as written until the parties reach agreement or a modification is approved by the Court.

112. The parties stipulate and agree that any party aggrieved by an alleged violation of any term of this Consent Order or who seeks a modification or variance from any term of this Consent Order may request a dispute resolution conference with all parties for the purpose of seeking a resolution of the grievance or agreement on a proposed modification or variance. The Conference shall be held within ten (10) days of the receipt of written notice of the request for the Conference. All parties shall seek in good faith to resolve the dispute. In the event the parties are unable to resolve a dispute, any party may seek a determination from the Court resolving the dispute.

113. The parties agree and the Court finds that this Consent Order as well as previously entered orders of the Court created a material alteration of the legal relationship between the Plaintiffs and Defendants and therefore, Plaintiffs' counsel are entitled to the award of attorneys' fees from the County Defendants and Sheriff under *Buckhannon v. West Virginia Department of Health and Human Resources*, 533 U.S. 598 (2001). In the event that the Plaintiffs and Defendants are unable to resolve by agreement issues relating to Plaintiffs' claim for attorneys' fees, Plaintiffs may petition the Court within thirty days of the date on which the Court enters this Order.

114. Any party may move to terminate this Consent Order two years after the date the court enters it.

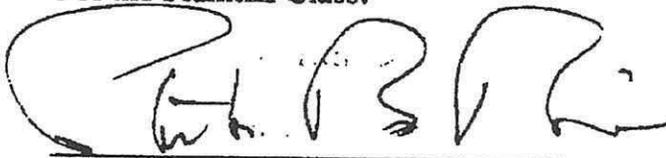
SO ENTERED THIS 21st DAY OF December, 2005.



Judge Maryin H. Shoob
United States District Court for the
Northern District of Georgia

WE CONSENT:

For the Plaintiff Class:



Stephen B. Bright
Georgia Bar No. 082075
Southern Center for Human Rights
83 Poplar Street, NW
Atlanta, Georgia 30303-2122
404-688-1202
404-688-9440 (fax)

Joshua R. Lipman
Mississippi Bar No. 101399
Southern Center for Human Rights

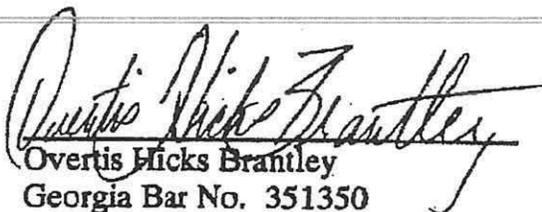
83 Poplar Street, NW
Atlanta, Georgia 30303-2122
404-688-1202
404-688-9440 (fax)

For the Sheriff:



Theodore H. Lackland
Georgia Bar No. 431055
Lackland & Associates, LLC
230 Peachtree St., NW
Suite 1150
Atlanta, GA 30303-1562

For the Fulton County Defendants:



Overtis Hicks Brantley
Georgia Bar No. 351350
Fulton County Attorney
Office of the Fulton County Attorney
141 Pryor Street, S.W.
Suite 4038
Atlanta, GA 30303
404-730-7750
404-730-6324 (fax)

Paula Morgan Nash
Georgia Bar No. 528884
Office of the Fulton County Attorney
141 Pryor Street, S.W.
Suite 4038
Atlanta, GA 30303
404-730-7750
404-730-6324 (fax)

Teresa Wynn Roseborough
Georgia Bar No. 614375
Sutherland Asbill & Brennan LLP
999 Peachtree St., N.E.
Atlanta, GA 30309-3996
404-853-8000
404-853-8806 (fax)

For the Georgia Department of Corrections Defendants:


John C. Jones w/permission PAK
Georgia Bar No. 401250
State Law Department
40 Capitol Square S.W.
Atlanta, GA 30334
404-656-3300
404-651-5304 (fax)

Appendix #5

2015 Administrative Census Report

Fulton County Jail Mainframe

POPULATION	JAN	FEB	MAR	APR	MAY	JUNE	JULY	AUG	SEPT	OCT	NOV	DEC	TOTAL	AVG.
Average daily population (FCJ)	2,520	2,534	2,548	2,569	2,458	2,444	2,504	2,472	2,491	2,505	2,543	2,547	30,135	2,511
Total population at end of month (FCJ)	2,545	2,601	2,644	2,488	2,480	2,363	2,479	2,469	2,473	2,545	2,569	2,525	30,181	2,515
Total Booked into Facility for the month	2313	2020	2447	2269	2025	2,251	2,293	2,182	2124	2,231	1,929	1,995.0	26,079	2,173
Total Medically Screened at Intake (*)	1,918	1,806	2,063	1,991	1,838	1,964	2,084	1,939	1,845	1,904	1,649	1,709	22,710	1,893
General Stats	JAN	FEB	MAR	APR	MAY	JUNE	JULY	AUG	SEPT	OCT	NOV	DEC	TOTAL	AVG.
Mortality	1	0	2	0	1	0	1	0	0	0	2	0	7	0.6
Grievances	100	92	97	87	75	71	117	81	100	65	78	64	1027	158.0
Grievances with Merit	55	66	62	51	42	33	83	58	58	35	51	3	597	91.8
MEETINGS	JAN	FEB	MAR	APR	MAY	JUNE	JULY	AUG	SEPT	OCT	NOV	DEC	TOTAL	AVG.
MAC	1	1	1	1	0	1	1	1	1	1	1	1	11	0.91667
COI	0	0	0	0	1	0	0	1	0	1	0	0	3	0
General Staff Meeting	1	1	1	1	1	1	1	1	1	1	1	1	12	1

Note: * The total number of inmates medically screened reflects the difference between the total number of individuals booked in for the month (FCJ) minus the total number of inmates booked or bonded out.

2015 INTAKE AND STD SCREENING

	JAN	FEB	MAR	APR	MAY	JUN	JUL	AUG	SEP	OCT	NOV	DEC	TOTAL	AVG.
Total Medically Screened at Intake	1,918	1,806	2,063	1,991	1,838	1,964	2,084	1,939	1,845	1,904	1,649	1,709	22,710	1,893
Males	1,532	1,489	1,690	1,635	1,498	1,616	1,693	1,564	1,502	1,581	1,370	1,415	18,585	1,549
Females	386	317	373	356	340	348	391	375	343	323	279	294	4,125	344
Total Screened for Tuberculosis at Intake ⁽¹⁾	1,918	1,806	2,063	1,991	1,835	1,995	2,081	1,934	1,845	1,904	1,649	1,709	22,730	1,894
Total PPD's Implanted at Intake	1,564	1,535	1,644	1,615	1,481	1,586	1,722	1,606	1,413	1,471	1,271	1,290	18,198	1,517
Males	1,235	1,259	1,314	1,296	1,191	1,283	1,368	1,272	1,125	1,189	1,032	1,051	14,615	1,218
Females	329	276	330	319	290	303	354	334	288	282	239	239	3,583	299
History of Positive PPD's at Intake	161	108	154	153	142	141	147	122	137	134	128	120	1,647	137
Refused PPD ⁽²⁾	30	24	30	27	32	26	28	27	69	71	60	101	525	44
PPD Implanted from another facility read and/or pending to be read.	163	139	235	196	180	242	184	179	226	228	190	198	2,360	197
Total Screened for Syphilis ⁽³⁾	1,918	1,806	2,063	1,991	1,838	1,944	2,080	1,935	1,845	1,904	1,864	1,709	22,897	1,908
Total Test for Syphilis ⁽³⁾	484	514	540	575	772	843	1,010	979	829	729	811	551	8,637	720
Males	390	434	463	486	629	713	843	802	685	605	664	464	7,178	598
Females	94	80	77	89	143	130	167	177	144	124	147	87	1,459	122
Refused Syphilis	1,425	1,278	1,501	1,390	1,030	1,059	1,031	924	964	1,138	1,012	1,129	13,881	1,157
Total Unable to test ⁽⁴⁾	9	14	22	26	36	42	39	32	52	37	41	29	379	32
Patient Reporting Hx of HIV⁽⁵⁾	55	46	61	65	64	61	55	48	50	62	59	53	679	57
Male	52	42	56	63	57	58	52	43	48	55	53	49	628	52
Female	3	4	5	2	7	3	3	5	2	7	6	4	51	4
Total HIV Test Completed	564	565	578	674	807	858	957	1,038	918	820	634	599	9,012	751
Total HIV Test Refused	1,299	1,195	1,424	1,252	958	963	871	856	917	1,076	1,008	1,109	12,928	1,077
Pregnancy Tests ⁽⁶⁾	383	315	371	355	338	328	375	355	321	304	253	284	3,982	332
Positive Pregnancy Results	18	15	21	22	11	16	10	11	18	10	5	14	171	14

Footnotes:

- (1) The difference between medically and total screened for TB/RPR is due to individuals bonded out prior to be screened of TB/RPR.
- (2) IUMs who refuses PPD implants are referred to Infectious Disease for FIU.
- (3) Syphilis test not done at the initial intake process, difficulty obtaining specimen, refusal, etc... additional attempts may be done during IUMs initial PE or Sick Call.
- (4) # represents plus who we are unable to obtain a blood sample from, that is, they may have "rolling veins" or other issue.
- (5) # of patients with a history of HIV.

2015 URGENT CARE CLINIC REPORT

Urgent Care Clinic	JAN	FEB	MAR	APR	MAY	JUN	JUL	AUG	SEPT	OCT	NOV	DEC	TOTAL	AVG.
Patients Seen in Clinic	1,495	1,534	1,977	1,878	1,633	1,925	2,124	2,368	2,485	2,522	2,677	2,626	25,244	2,104
Asthma	71	42	48	53	47	54	67	77	86	77	80	70	772	64
Chest Pain	85	60	97	120	71	92	74	93	58	62	71	78	961	80
Detox Patients	94	104	133	129	136	139	145	150	126	122	128	115	1,521	127
Injury due to Altercation	93	69	65	74	80	86	96	107	80	92	109	97	1,048	87
Medication Error	2	0	0	0	0	1	1	0	0	0	0	0	4	0
Mental Health	305	249	355	279	270	231	346	404	353	377	415	392	3,976	331
Pregnancy (High Risk)	16	0	2	0	6	19	16	18	28	21	10	14	150	13
Seizures	40	55	55	65	34	41	55	48	72	51	58	56	630	53
Sexual Assaults	0	2	0	0	0	2	1	1	0	0	1	0	7	1
Suspected insect bites	0	2	4	2	2	3	5	5	3	3	0	1	30	3
Other	789	951	1,070	1,031	901	1,122	1,200	1,352	1,624	1,632	1,723	1,707	15,102	1,259
Brought to Clinic and Refused Service	141	102	148	125	86	135	118	113	55	85	82	96	1,286	107
Grady Hospital	JAN	FEB	MAR	APR	MAY	JUN	JUL	AUG	SEPT	OCT	NOV	DEC	TOTAL	AVG.
Sent to Grady Emergency Room from throughout the facility	16	17	23	25	20	25	28	18	30	31	35	29	297	25
# of patients sent due to Diabetes	0	0	0	1	1	0	1	0	0	1	0	1	5	0
# of patient sent due to cardiac	0	4	7	1	1	3	7	2	6	2	3	1	37	3
# of Detox Patients sent to Grady	12	12	2	2	2	1	2	0	1	2	0	2	38	3
Patients to Grady Requiring EMS	5	14	13	12	9	8	13	11	8	11	8	7	119	10
# of Patients sent to Grady & are Admitted	14	9	18	15	13	18	12	8	13	6	12	14	152	13
Stretcher Calls	38	45	43	44	26	38	28	29	24	30	22	30	397	33
Dialysis	JAN	FEB	MAR	APR	MAY	JUN	JUL	AUG	SEPT	OCT	NOV	DEC	TOTAL	AVG.
Dialysis Runs on-site at Facility	5	12	17	10	13	26	36	27	16	16	16	34	228	19
# of Dialysis Patients Admitted to Grady	0	0	0	0	1	1	1	0	0	2	3	4	12	1
Disposition	JAN	FEB	MAR	APR	MAY	JUN	JUL	AUG	SEPT	OCT	NOV	DEC	TOTAL	AVG.
Admitted to Chronic Care Unit (CS)	188	159	214	209	200	210	192	185	186	190	201	177	2,311	193
Admitted to Infirmary (Medical)	49	56	59	52	39	38	67	66	48	56	60	47	637	53
Admitted to Acute Psych	89	82	97	86	80	93	88	109	111	105	111	105	1,156	96

2015 DENTAL REPORT

Valerie Smith, DDS, Dental Director

	JAN	FEB	MAR	APR	MAY	JUN	JUL	AUG	SEP	OCT	NOV	DEC	TOTAL	AVG
Scheduled Visits	643	575	638	654	639	672	717	676	658	644	528	471	7515	626.3
Total Seen from Scheduled Visits	535	509	569	591	563	580	637	609	590	562	472	479	6696	558.0
Emergency Visits	8	8	9	15	19	6	12	4	11	7	14	8	121	10.1
Failed Appointments	108	66	69	65	76	92	80	67	79	82	56	36	876	73.0
Refused Appt.	0	0	1	2	2	0	1	1	1	1	0	0	9	0.8
Missed Appt. due to Court Appt.	8	4	15	11	10	13	12	12	7	11	9	4	116	9.7
Released	4	5	2	4	13	8	7	9	6	5	9	2	74	6.2
Not Brought Down	23	8	13	10	25	40	33	13	32	31	17	15	260	21.7
Other*	73	49	38	38	26	31	27	32	33	34	21	15	417	34.8
Comprehensive Exams	535	478	557	587	563	573	634	603	559	562	457	471	6579	548.3
HIV Exams	21	17	17	16	18	22	10	8	15	18	21	21	210	17.5
Panoramic Radiographs	77	60	69	74	89	65	52	64	88	76	52	51	817	68.1
Periapical Radiographs	67	73	88	114	111	101	122	66	87	102	70	90	1091	90.9
Routine Extractions	61	48	40	85	66	65	75	60	73	70	50	47	740	61.7
Surgical Extractions	83	87	72	59	82	48	56	102	104	64	68	56	881	73.4
Surgical Procedures (Sutures & I&D)	65	49	66	87	92	55	73	89	71	63	63	53	826	68.8
Medications**	334	394	400	403	416	432	412	305	350	304	304	304	4459	371.6
Temporary Fillings	17	12	21	11	19	20	14	16	20	21	4	21	196	16.3
Grady Referrals	1	0	0	0	0	0	0	0	0	1	1	1	4	0.3
Grady Hospitalization	0	0	0	0	0	0	0	0	0	0	0	0	0	0.0
Permanent Restorations	1	0	1	1	0	0	1	0	0	21	0	0	25	2.1
Medical Referrals	0	1	0	1	1	0	1	0	0	0	0	0	5	0.4
Scaling/Root Plan (QUADS)	0	0	0	0	0	0	0	0	0	0	0	0	0	0.0
Pulp Therapy	0	0	0	0	0	0	0	0	0	0	0	0	0	0.0
Oral Surgery Referrals	2	1	4	1	4	3	5	3	7	1	2	2	35	2.9
Education Info.	543	517	578	604	582	586	649	613	590	569	486	479	6796	566.3
Treatment Plan	330	234	290	323	320	346	374	304	403	336	273	285	3818	318.2

Note(s):
 * Consists of patients outsourced to another facility or visitation.
 **

Medical Administrative Committee (MAC) Meeting:

2015 DENTAL WORKLOAD

Valerie Smith, DDS, Dental Director

	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Total	Avg
Dentist 1 (Director Day Shift)	155	162	165	168	190	174	170	223	188	185	189	156	2,125	177.08
Dentist 2 (Evening)	142	116	140	181	130	170	198	115	162	144	131	147	1,776	148.00
Dentist 3 (Split Shift)*	211	206	230	215	224	205	232	246	187	187	155	171	2,469	205.75
Dentist 4 (Evening Fri only)	35	33	43	40	38	37	49	29	53	53	11	5	426	35.50
Oral Surgeon (Weds)	0	0	0	0	0	0	0	0	0	0	0	0	0	0.00
Total	543	517	578	604	582	586	649	613	590	569	486	479	6,796	566.33

Note: * Split-Shift is a full time position however total hours worked overlap Day Shift and Evening Shift
 There were no oral surgeon on-site on the months of Jan - May.

2015 (Infirmary) ACUTE CARE REPORT

MOU	JAN	FEB	MAR	APR	MAY	JUN	JUL	AUG	SEPT	OCT	NOV	DEC	TOTAL	AVG.
Total Census for the Month in MOU	77	75	85	89	84	82	86	79	80	84	77	86	984	82
Males	31	40	45	39	49	51	47	41	43	43	42	50	521	43
Females	43	35	40	50	35	31	39	38	37	41	35	36	460	38
Medical Admissions	33	35	41	41	30	36	34	37	33	36	42	32	430	36
Sheltered Housing (*)	3	3	2	2	4	7	0	1	1	0	0	0	23	2
Surgical Admissions (**)	0	0	0	3	6	5	3	2	7	6	3	6	41	3
Infectious Disease Isolations	3	1	1	0	1	1	2	1	0	1	2	6	19	2
Diagnostic Admissions (***)	0	0	0	2	1	0	0	0	0	0	0	0	3	0
Detox Admissions	35	35	36	33	35	28	38	30	23	31	26	31	311	32
Males	5	7	7	5	10	6	4	1	0	1	1	3	38	4
Females	30	28	29	28	25	22	34	29	23	30	25	28	273	28
Total Administrative Lockdown (PC)	3	4	5	8	6	5	9	8	17	10	4	6	85	7
New Administrative lockdown	1	3	2	6	2	2	6	4	11	2	1	3	43	4
Average Length of Stay (days)	10	19	10	11	15	19	18	17	16	18	12	13	144	14

Notes: Of the 75 patients admitted in February, 18 were carried over from previous months and of those 4 (3 Medical & 1 Admin Lockdown) were carried over from 2014 Totalling

(*) Sheltered housing- for example, Special needs (Blind, Deaf, Paraplegic etc.)

(**) Pre & Post Surgical Procedures

(***) Eval/Pending Diagnosis Condition or Disorder i.e. ruling out or making a definitive diagnosis

2015 HIV Census Report

Infectious Disease Control

POPULATION	JAN	FEB	MAR	APR	MAY	JUN	JUL	AUG	SEP	OCT	NOV	DEC	TOTAL	AVG.
HIV New Admissions	72	59	80	82	70	88	60	68	76	80	77	75	887	74
Males	66	52	71	75	60	81	54	62	66	73	69	70	799	67
Females	6	7	9	7	10	7	6	6	10	7	8	5	88	7
Total HIV this Month(*)	163	159	171	180	169	180	163	160	175	184	181	185	2,070	173
Total HIV Last Day of Month	91	100	91	98	92	92	103	92	99	104	104	110	1,176	98
Total HIV Released	60	67	69	80	82	75	71	60	70	76	63	73	846	71
Newly Diagnosed	3	2	3	4	3	11	3	6	4	3	1	3	46	4
Newly Diagnosed AIDS Patients	18	7	4	12	15	11	7	8	8	4	9	10	113	9
Patients on HIV Meds	74	81	75	77	58	98	91	99	102	87	55	63	960	80
Total number of HIV medications (old & new)**	215	267	235	198	119	250	250	232	221	243	102	177	2,509	209

Note:

* # represents new admissions and carry over from previous months still incarcerated.

** Represents the # of scripts written for the month.

2015 PATIENT ENCOUNTER REPORT

	JAN	FEB	MAR	APR	MAY	JUN	JUL	AUG	SEP	OCT	NOV	DEC	Y-T-D Total	Average
Total Routine Encounters	6676	7880	7072	7938	6825	6387	6834	6920	7370	7102	6759	7554	85317	7391.5
PROVIDERS	3754	5231	4108	4785	3870	3010	3431	3716	3749	3725	3782	4479	47640	3970.0
Sick Call	1244	2661	1236	2004	1525	293	557	583	416	281	230	238	11268	939.0
Initial Physicals	502	388	246	383	219	237	253	274	209	258	113	800	3882	323.5
Annual Physicals	27	41	26	34	53	25	37	52	42	44	43	31	455	37.9
Chronic Care	432	567	571	440	391	472	410	400	535	582	666	712	6178	514.8
Urgent Care	1495	1534	1977	1878	1633	1925	2124	2368	2504	2526	2677	2626	25267	2105.6
PT/INR*	54	40	52	46	49	58	50	39	43	34	53	72	590	49.2
NURSE	1233	843	1202	1403	920	1132	1229	1138	1127	1100	991	1241	13559	1129.9
Sick Call	621	484	544	620	491	512	513	397	454	516	457	639	6248	520.7
Initial Physicals	612	359	658	783	429	620	716	741	673	584	534	602	7311	609.3
MEDICAL ASSISTANT	1689	1806	1762	1750	2035	2245	2174	2066	2494	2277	1986	1834	24118	2009.8
Labs	1663	1786	1743	1736	2015	2224	2149	2032	2474	2254	1968	1819	23863	1988.6
EKGs	26	20	19	14	20	21	25	34	20	23	18	15	255	21.3

* PT/INR - (Blood Test) Prothrombin Time and International Normalized Ratio

2015 CHRONIC CARE REPORT

	JAN	FEB	MAR	APR	MAY	JUN	JUL	AUG	SEP	OCT	NOV	DEC	Y-T-D Total	Average
Total (New) CCC Diagnosis	432	567	571	440	391	472	410	400	535	582	666	712	6178	514.8
HTN/Cardiac	177	198	203	177	189	182	180	179	210	246	328	356	2625	218.8
Neurological/Seizure	34	42	47	42	41	47	34	20	29	38	57	65	496	41.3
Endocrine/Diabetic	107	157	184	91	60	55	91	97	106	124	96	106	1274	106.2
Pulmonary	64	62	46	72	66	78	61	62	93	79	83	76	842	70.2
Other	50	108	91	58	35	110	44	42	97	95	102	109	941	78.4
Chronic Care Patients Seen**	184	183	256	170	108	160	348	286	315	221	369	426	3026	252.2
HTN/Cardiac	98	103	156	82	51	59	109	119	153	138	196	201	1465	122.1
Neurological/Seizure	14	11	10	16	14	16	55	28	45	24	45	63	341	28.4
Endocrine/Diabetic	22	40	51	18	26	13	108	73	72	40	61	77	601	50.1
Pulmonary	17	19	12	45	12	13	37	22	35	10	45	32	299	24.9
Other	33	10	27	9	5	59	39	44	10	9	22	53	320	26.7
New CC Pts Enrolled/Forms	143	157	127	179	195	140	105	181	187	139	250	260	2063	171.9
HTN/Cardiac	70	81	75	63	89	45	34	98	104	89	93	136	977	81.4
Neurological/Seizure	18	13	9	9	23	7	6	27	19	21	31	62	245	20.4
Endocrine/Diabetic	27	38	21	50	35	14	41	32	35	15	45	40	393	32.8
Pulmonary	10	14	8	18	30	15	14	10	16	11	39	9	194	16.2
Other	18	11	14	39	18	59	10	14	13	3	42	13	254	21.2
Non-Compliance (Refusal of Medications)	482	826	268	696	894	785	296	246	234	264	277	1021	6289	524.1
Total CC End of the Month	792	833	869	845	791	772	792	777	810	721	701	689	9392	782.7
Number of SAW Patients	124	121	154	154	129	153	178	127	131	132	138	118	1659	138.3
# of TeleHealth appts. Completed	1	2	1	3	2	4	2	1	1	2	0	1	20	1.7
# of TeleHealth appts. Rescheduled	5	6	1	9	9	8	4	4	5	5	0	4	60	5.0

** Incls - Pts scheduled for CCC visits and Medical Request. ***Total Admits = # of completed forms

Notes: Coumadin labs performed=50

2015 Infectious Disease Report:

Infectious Disease Control

MRSA												
	JAN	FEB	MAR	APR	MAY	JUN	JUL	AUG	SEP	OCT	NOV	DEC
MRSA	2	3	6	5	2	6	5	4	4	4	8	4
Community Acquired	1	2	2	1	0	2	2	1	1	1	1	0
Facility Acquired:	1	1	4	4	2	4	3	3	3	3	7	4
AVG.	3.25											
TUBERCULOSIS												
PPD's Implanted at Intake & Floor	1,609	1,612	1,694	1,676	1,531	1,634	1,832	1,700	1,491	1,539	1,362	1,432
PPD's Read	998	911	997	916	878	954	997	955	862	849	884	800
PPD's not read due to being released before time to be read (48-72 Hrs of implant)	611	701	697	760	653	680	835	745	629	690	478	632
Total Positive PPD read	26	7	21	19	19	27	16	23	23	17	10	18
Positive PPD released prior to provider evaluation to determine if tx is indicated.	19	4	13	3	8	8	3	11	9	9	4	11
Positive PPD Pending Provider F/UP or CXR	2	3	5	10	11	5	7	4	7	2	4	3
Positive PPD requiring Treatment	5	0	2	2	1	12	1	4	7	6	2	3
Positive PPD initiated treatment at Fulton County Jail (INH/B6)	4	0	1	2	9	1	1	0	0	6	0	2
Positive PPD refusing treatment	1	0	1	0	0	0	0	0	0	0	0	1
Positive PPD results when evaluated discovered history of previous treatment	1	0	0	4	0	2	5	0	4	0	0	1
PPD: ADDITIONAL INFO.												
Positive PPD/Abnormal CXR/Refusing Isolation	0	1	0	0	0	0	0	0	0	0	1	1
PPD/CXR requiring Respiratory Isolation	0	1	0	0	0	0	0	0	0	0	1	1
Positive PPD with Results of ≥15mm or >5mm for HIV	14	6	11	3	8	8	3	2	5	1	1	6
Total patients in isolation with active TB	2	0	0	1	1	1	2	1	0	1	2	2
RPR												
	JAN	FEB	MAR	APR	MAY	JUN	JUL	AUG	SEP	OCT	NOV	DEC
Total Tested for Syphilis	539	514	540	620	792	731	1,030	981	885	793	659	550
Positive RPR (*)	23	33	26	16	42	39	49	34	38	51	36	28
Males	18	30	23	15	36	32	46	28	32	43	35	26
Females	5	3	3	1	6	7	3	6	6	8	1	2
Positive requiring treatment	10	6	7	3	17	15	16	11	19	13	13	9
Males	9	5	5	3	13	11	14	9	9	16	13	13
Females	1	1	2	0	4	4	2	2	3	0	0	0
Positive RPR treated completed	1	2	2	2	5	4	5	6	7	2	6	1
Males	1	1	2	2	4	3	4	5	6	2	6	1
Females	0	1	0	0	1	1	1	1	1	0	0	0
Treatment started but not completed	2	1	0	0	2	2	3	1	5	3	1	2
Males	1	1	0	0	1	1	3	0	4	3	1	2
Females	1	0	0	0	1	1	0	1	1	0	0	0
Positive RPR released prior to Treatment	7	3	5	1	9	11	8	4	7	8	4	6
Males	7	3	5	1	9	11	8	4	7	8	4	6
Females	0	0	0	0	0	0	0	0	0	0	0	0
Positive RPR pending eval for treatment	0	0	0	0	1	6	0	0	0	0	3	0
Males	0	0	0	0	0	0	0	0	0	0	0	0
Females	0	0	0	0	1	2	3	1	0	0	3	0
Males	0	0	0	0	0	0	0	0	0	0	0	0
Females	0	0	0	0	0	0	0	0	0	0	0	0
AVG. <td colspan="12">3.25</td>	3.25											

Notes:

(*) The difference between pts identified with + PPD results, those requiring treatment, those previously treated, and those released are pending cases awaiting clinical assessment, and are carried over into the next month, thereby, the numbers will not add up. Not all + RPRs require treatment.

Note

2015 MEDICAL RECORDS REPORT
 Mrs. Paqutta Clark, Director of Medical Records

Total Scanned documents	JAN	FEB	MAR	APR	MAY	JUN	JUL	AUG	SEPT	OCT	NOV	DEC	TOTAL	AVG
42,350	45,250	45,300	54,600	46,300	49,340	60,300	49,540	36,800	49,250	32,450	39,100	550,580	45,882	
Total charts made	1,490	1,405	1,615	1,442	1,394	1,317	1,489	1,436	1,329	1,777	1,218	1,449	17,361	1,447
Total # of disability request	13	18	10	16	19	10	10	12	12	8	10	23	161	13
request	243	264	224	320	241	286	237	268	234	269	228	308	3,142	262
Extradition	13	10	13	10	5	14	6	6	12	7	6	15	117	9.75
Medical Transfer	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Forms (Institutions)	132	90	94	109	66	113	110	126	162	118	116	149	1385	115.42
Total	145	100	107	119	71	127	116	132	174	125	122	164	1502	125.17
Annual Physical Exams Scheduled	44	47	35	38	98	55	29	54	66	38	61	9	574	47.83
Annual Physical Exams Completed	27	41	26	17	60	25	37	28	42	17	41	31	392	32.67
HIV	34	27	25	40	31	34	26	29	31	32	32	32	373	31.08
Chronic Care	143	189	46	113	74	77	100	101	100	65	94	309	1411	117.58
Total	177	216	71	153	105	111	126	130	131	97	126	341	1,784	149
Initial Physical Done In Chronic Care Unit	202	101	207	223	109	202	66	164	221	196	163	290	2,144	179
Initial Physical Done at Exam	509	534	586	783	574	633	589	570	499	495	361	581	6,714	560
HIV	4	2	2	1	4	2	0	4	4	2	5	0	30	3
All Others	72	64	94	82	60	47	42	61	67	69	53	51	762	64
Total	76	66	96	83	64	49	42	65	71	71	58	51	792	66
Total Physicals	964	917	960	1,242	852	995	823	929	922	859	708	1,263	11,434	953
Patients Released	68	917	37	36	39	32	19	14	8	16	26	15	1,227	102
Prior to Physicals	JAN	FEB	MAR	APR	MAY	JUN	JUL	AUG	SEPT	OCT	NOV	DEC	TOTAL	AVG
Charts Pulled for (General Population)	70	80	0	0	15	29	0	3	9	2	0	5	213	18
Charts Pulled for Sick Call (Mental Health)	0	0	1	1	0	0	0	17	9	1	8	0	37	3
Charts Pulled for Sick Call (Denial)	304	260	243	271	300	289	311	276	296	318	248	254	3,370	281
Charts Pulled for Sick Call on Chronic Care Unit	304	0	0	0	0	0	0	0	0	0	0	0	304	25
Charts Pulled for Female Sick Call	262	380	399	458	429	390	505	421	487	689	691	504	5,615	468
Total Charts Pulled for Sick Call	940	720	643	730	744	708	816	717	801	1,010	947	763	9,539	795

Annual Physicals: Completed (cf-29, south annex 2, alphareta 0) and 1-released
 Release of Info. Request Detail:
 Social Security Admin. For Disability = 23
 Attorney for Disability = 7
 Other Requestors: Correctional Facilities, Medical Facilities, Attorneys, etc = 278

Notes:

2015 Mental Health Workload Report

Sophia Henry, LCSW, CPRP - Mental Health Director

	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Total	Avg
Mental Health Contacts ***	3,126	2,893	3,586	3,660	3,209	3,556	3,497	3,722	3,142	3,157	2,991	3,349	39,888	3324
MD	425	433	514	590	443	495	551	557	426	362	354	427	5,577	465
MHPs (LCSW/LPC)	1,894	1,826	2,306	2,239	2,065	2,106	2,146	2,280	1,819	1,985	1,894	2,144	24,704	2059
MHA	566	512	578	601	479	553	611	655	679	640	547	662	7,083	590
Re-Entry Coord.	241	122	188	230	222	402	189	230	218	170	112	116	2,440	203
Group (Therapy/Educational)	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Collateral Contacts	75	24	34	72	46	95	44	95	100	85	84	83	837	70
Initial Assessments	479	422	650	580	558	522	553	597	576	520	526	617	6,600	550
MD	92	115	157	132	170	120	130	145	121	109	125	135	1,551	129
MHPs (LCSW/LPC)	311	262	388	343	304	311	336	371	368	356	361	434	4,145	345
MHA	11	15	14	11	10	13	13	20	22	30	19	30	208	17
Re-Entry Coord.	65	30	91	94	74	78	74	61	65	25	21	18	696	58
Ongoing Care/Active Caseload	2,647	2,471	2,936	3,080	2,651	3,034	2,944	3,125	2,566	2,637	2,465	2,815	33,371	2781
MD	333	318	357	458	273	375	421	412	305	253	229	292	4,026	336
MHPs (LCSW/LPC)	1,583	1,564	1,918	1,896	1,761	1,795	1,810	1,909	1,451	1,629	1,533	1,710	20,559	1713
MHA	555	497	564	590	469	540	598	635	657	610	528	632	6,875	573
Re-Entry Coord.	176	92	97	136	148	324	115	169	153	145	175	181	1,911	159
Referrals	5	2	1	1	0	0	7	3	1	1	2	4	27	2
1013's to Grady	5	1	5	1	0	0	2	2	1	1	2	4	24	2
Georgia Regional Hospital	0	1	5	0	0	0	5	1	0	0	0	0	12	1
CHR Telemedicine	0	0	0	0	0	0	0	0	0	0	0	0	0	0
SOARS	0	0	0	0	0	0	0	0	0	0	0	0	0	0
LEGEND														
Mental Health Contacts	All forms of pt contact/all pts seen													
Initial Assessments	Self-explanatory													
Ongoing Care/Active Caseload	Any pt contact in addition to initial assessments (calculated)													
Discharges from Caseload/PRNs	Self-explanatory													
Referrals	Self-explanatory													
Readmits (within 6 months)	Self-explanatory													
SOURCE														
	Monthly provider statistic sheet													
	Monthly provider statistic sheet													
	Formula: (MH Contacts) - (Initial Assm)													
	Monthly provider statistic sheet													
	Monthly provider statistic sheet													
	Monthly provider statistic sheet													

Notes:

2015 ACUTE PSYCH UNIT REPORT*
Sophia Henry, LCSW, CPRP - Mental Health Director

	JAN	FEB	MAR	APR	MAY	JUN	JUL	AUG	SEP	OCT	NOV	DEC	TOTAL	AVG.
Total # of Admissions	131	118	124	143	115	123	134	142	143	115	155	127	1570	130.8
Males	106	92	103	119	98	103	113	110	113	92	126	99	1274	106.2
Females	25	26	21	24	17	20	21	32	30	23	29	28	296	24.7
Total # of Discharges	106	109	117	120	98	103	115	130	134	96	140	117	1385	115.4
Avg. # on Psych Observation	42	34	46	38	40	27	41	28	42	39	45	38	460	38.3
Avg. Length of Stay (days)	6	5	5.8	5	6	6	6	5	5	7	5	5	66.8	5.6
Number of Suicide Watches	89	84	78	105	75	96	93	114	101	76	110	89	1110	92.5
Average Daily Census	25	22	23.3	26	22	22	24	24	21	27	23	20	279.3	23.3
Total Number of Medical Consults	5	4	5	9	3	12	14	11	11	4	5	15	98	8.2
EMERGENCY REFERRALS														
Seen in clinic from General Population	140	124	153	129	106	157	111	152	111	134	141	118	1576	131.3
Males	127	112	148	115	100	144	100	128	92	116	126	107	1415	117.9
Females	13	12	5	14	6	13	11	24	19	18	15	11	161	13.4
Seen in clinic from Intake	165	125	202	166	182	231	235	252	242	243	274	274	2591	215.9
Males	112	94	167	130	140	175	167	179	184	191	218	214	1971	164.3
Females	53	31	35	36	42	56	68	73	58	52	56	60	620	51.7
Clinic Total	305	249	355	295	288	388	346	404	353	377	415	392	4167	347.3
MENTAL HEALTH STAFFINGS														
Educational In-services	0	2	3	2	0	0	0	0	3	3	4	3	20	1.67
Staff Meetings	11	13	14	12	11	14	12	13	13	13	11	12	149	12.42

2015 Pharmacy Utilization Report

	JAN	FEB	MAR	APR	MAY	JUN	JUL	AUG	SEP	OCT	NOV	DEC	TOTAL	Avg.
Total Medication Orders	3,899	3,366	4,807	5,263	4,772	5,243	5,372	5,155	5,412	4,981	4,840	4,739	57,849	4,821
Total Patients on Medications	1,159	1,018	1,355	1,500	1,384	1,462	1,475	1,431	1,467	1,383	1,356	1,411	16,401	1,367
Total Non-formulary Medication Orders	363	287	406	451	346	398	399	459	427	432	427	461	4,856	405
Medical	277	221	292	336	254	291	292	335	333	330	315	357	3,633	303
Psychotropics	86	66	114	115	92	107	107	124	94	102	112	104	1,223	102
Total Number of Patients with New Controlled Medication Orders	99	81	96	92	80	74	98	97	89	95	67	67	1,035	86
Total Number of prescriptions written for psychotropic meds	477	735	1,085	990	841	939	1,030	987	1,004	895	828	980	10,791	899
Total Number of Patients on Psychotropic Meds (Old & New)	242	252	383	330	327	339	357	349	354	331	291	346	3,901	325
Total Number of patients with New (INN/B6) medication Orders	1	6	8	5	12	16	21	8	4	2	3	4	90	8
Total HIV orders *New orders and current prescription	215	267	235	198	119	250	250	232	221	243	102	165	2,497	208

Medical Administrative Committee (MAC) Meeting:

2015 RADIOLOGY REPORT
Fidel Cosbert, RT- Radiology Department

	JAN	FEB	MAR	APR	MAY	JUN	JUL	AUG	SEP	OCT	NOV	DEC	TOTAL	AVG.
Number of X-rays Requested	306	261	296	569	433	526	454	390	400	353	302	488	4778	398
Total number of X-rays Completed	248	191	254	258	168	204	232	237	240	238	213	261	2744	229
Refused Appt.	19	9	34	57	48	77	10	12	12	22	44	24	368	31
Released before Film taken	20	35	40	25	13	10	18	22	19	35	26	38	301	25
Categories of Xrays Completed														
Chest-TTB Screening	127	108	146	158	127	142	136	128	134	159	161	148	1674	140
Chest Other	65	36	46	41	12	15	32	43	38	28	13	30	399	33
Extremities	40	37	42	32	20	35	48	54	60	39	25	72	504	42
Other Xrays*	16	10	20	27	9	12	16	12	18	12	14	11	177	15
Missed Appt. due to Court Appt.	26	14	45	71	42	37	57	42	35	32	31	77	509	42
Not Brought Down	176	179	220	211	191	195	119	56	90	184	132	124	1877	156
Other reasons**	16	40	10	9	23	16	18	15	4	9	10	15	185	15

Note(s):

*The "Other" category consists of anything other than what is listed. I.E. > Facial, Skull, Jaw, Hip, etc...

** The "Other" category under failed appointments consists of missed appts due to outsourcing to another facility; lockdown; visitation; or appts coming in the last day of the month pending to be completed. This number also includes appointments missed due to closures during inclement weather.

2015 South Fulton Annex Report Union City

POPULATION	JAN	FEB	MAR	APR	MAY	JUN	JUL	AUG	SEP	OCT	NOV	DEC	TOTAL	AVG.
Number booked into facility	474	419	567	583	611	504	475	490	459	572	370	411	5935	495
Nurse Sick Call	0	30	33	15	3	3	8	21	13	0	0	23	149	12
Provider Sick Call	153	140	152	176	246	204	183	177	141	262	77	77	1988	166
Physicals Completed	72	64	94	82	60	47	42	61	46	65	55	53	741	62
Number of X-rays Completed	4	3	12	9	15	11	8	15	13	11	18	6	125	10
Number of Patients on Meds last day of the month	145	118	185	131	148	122	108	83	115	104	123	130	1512	126
Number on KOP Meds last day of the month*	9	24	12	6	7	8	10	13	12	15	18	13	147	12
Number of Substance Abuse/Detox Patients	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Total # of Patients Medically Screened	78	50	71	85	91	67	67	95	77	65	52	68	866	72
Number of Pregnant Patients	7	13	10	12	6	6	10	6	3	5	3	5	86	7
Patients seen without an Appointment	77	80	96	70	70	42	40	14	40	38	49	52	668	56
# of Patients sent to ER	2	2	2	0	0	0	1	2	0	4	0	0	13	1
# of Patients sent via EMS	1	1	1	0	0	0	0	0	0	0	0	0	3	0
# of Patients Admitted	1	2	0	0	0	0	1	0	0	0	0	0	4	0
# of Labs Completed	83	158	133	142	114	125	129	133	129	131	88	104	1469	122
# of Insulin Dependent Patients.	2	1	1	1	3	3	2	2	2	2	1	2	22	2
# of Patients enrolled in Chronic Care	11	13	21	13	27	16	6	3	13	14	14	9	160	13
# of HIV Patients	4	6	5	6	7	9	6	8	9	12	11	5	88	7
# of HIV Patients on Meds	4	3	2	2	6	3	2	3	4	4	3	3	39	3

Note: * KOP - Keep on Person Meds.

**2015 South Fulton Annex
RADIOLOGY REPORT - Union City**

	JAN	FEB	MAR	APR	MAY	JUN	JUL	AUG	SEP	OCT	NOV	DEC	TOTAL	AVG.
Number of X-rays Requested	8	10	22	16	23	14	10	20	15	18	19	9	184	15
Number of Radiographs Done	7	9	12	9	15	11	8	15	13	11	18	6	134	11
Chest-TB Screening	3	4	9	8	7	4	2	4	5	5	6	3	60	5
Chest Other	3	3	0	0	5	4	0	7	4	3	8	2	39	3
Extremities	1	2	3	1	3	3	4	1	4	3	5	0	30	3
Other*	0	0	0	0	3	0	2	3	0	0	0	1	9	1
Failed *** Appointments	1	1	10	7	2	3	0	5	2	7	1	3	42	4
Refused Appt.	0	0	1	0	0	0	0	0	0	0	0	3	4	0
Missed Appt. due to Court Appt.	0	0	4	2	0	0	0	0	0	1	0	0	7	1
Released before film taken	1	1	5	5	0	3	2	2	2	6	0	0	27	2
Not Brought Down	0	0	0	0	0	0	0	0	0	0	1	0	1	0
Other**	0	0	0	0	3	0	0	3	0	0	0	0	6	1

Note(s):

Notes: other 3 at main jail, other 3 released, 2 xrays already done

2015 Annex Report
ALPHARETTA

POPULATION	JAN	FEB	MAR	APR	MAY	JUN	JUL	AUG	SEP	OCT	NOV	DEC	TOTAL	AVG.
Number booked into facility	654	689	792	756	560	620	615	553	419	620	719	751	7748	646
Sick Call	3	6	6	11	4	6	3	4	2	5	7	8	65	5
Physicals Completed	8	17	16	30	18	21	13	4	7	17	19	19	189	16
Number on Watch Take Meds	4	3	4	8	0	4	4	5	5	0	0	6	43	4
Number on KOP Meds *	0	1	0	1	0	0	0	0	0	0	0	0	2	0
Total # of Patients Medically Screened**	129	131	196	134	149	165	150	177	169	169	172	146	1887	157
Milton	16	25	14	13	12	22	19	26	8	15	23	17	210	18
Alpharetta	49	45	60	38	44	40	49	55	54	59	50	39	582	49
John Creek	5	5	17	6	9	19	8	15	6	11	6	6	113	9
Sandy Springs	44	47	95	66	84	78	74	80	90	79	82	78	897	75
Roswell	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Fulton County	15	9	10	11	0	6	0	1	11	5	11	6	85	7
ICE	0	0	0	0	0	0	0	0	0	0	0	0	0	0

Note: * KOP - Keep on Person Meds. ** The difference in numbers for the census reflects the actual number of individuals booked into the facility for the month, compared to those being housed there at the end of the month.