



2021-2022 Crisis Medication List

Health Choice AZ Crisis List Effective 04/01/2022

Drug Name **Requirements/Limits**
ADHD/ANTI-NARCOLEPSY/ANTI-OBESITY/ANOREXIANTS

ATTENTION-DEFICIT/HYPERACTIVITY DISORDER (ADHD) AGENTS

<i>atomoxetine hcl cap 10 mg (base equiv) (generic of STRATTERA)</i>	QL (Max 7 days)
<i>atomoxetine hcl cap 18 mg (base equiv) (generic of STRATTERA)</i>	QL (Max 7 days)
<i>atomoxetine hcl cap 25 mg (base equiv) (generic of STRATTERA)</i>	QL (Max 7 days)
<i>atomoxetine hcl cap 40 mg (base equiv) (generic of STRATTERA)</i>	QL (Max 7 days)
<i>atomoxetine hcl cap 60 mg (base equiv) (generic of STRATTERA)</i>	QL (Max 7 days)
<i>atomoxetine hcl cap 80 mg (base equiv) (generic of STRATTERA)</i>	QL (Max 7 days)
<i>atomoxetine hcl cap 100 mg (base equiv) (generic of STRATTERA)</i>	QL (Max 7 days)

ANALGESICS - OPIOID

OPIOID PARTIAL AGONISTS

<i>buprenorphine hcl-naloxone hcl sl film 2-0.5 mg (base equiv) (generic of SUBOXONE)</i>	QL (Max 7 days)
<i>buprenorphine hcl-naloxone hcl sl film 4-1 mg (base equiv) (generic of SUBOXONE)</i>	QL (Max 7 days)
<i>buprenorphine hcl-naloxone hcl sl film 8-2 mg (base equiv) (generic of SUBOXONE)</i>	QL (Max 7 days)
<i>buprenorphine hcl-naloxone hcl sl film 12-3 mg (base equiv) (generic of SUBOXONE)</i>	QL (Max 7 days)
<i>buprenorphine hcl-naloxone hcl sl tab 2-0.5 mg (base equiv)</i>	QL (Max 7 days)
<i>buprenorphine hcl-naloxone hcl sl tab 8-2 mg (base equiv)</i>	QL (Max 7 days)

ANTIANXIETY AGENTS

ANTIANXIETY AGENTS - MISC.

<i>hydroxyzine hcl syrup 10 mg/5ml</i>	QL (Max 7 days)
<i>hydroxyzine hcl tab 10 mg</i>	QL (Max 7 days)
<i>hydroxyzine hcl tab 25 mg</i>	QL (Max 7 days)
<i>hydroxyzine hcl tab 50 mg</i>	QL (Max 7 days)
<i>hydroxyzine pamoate cap 25 mg</i>	QL (Max 7 days)
<i>hydroxyzine pamoate cap 50 mg</i>	QL (Max 7 days)

BENZODIAZEPINES

<i>alprazolam tab 0.5 mg (generic of XANAX)</i>	QL (Max 7 days)
<i>alprazolam tab 0.25 mg (generic of XANAX)</i>	QL (Max 7 days)
<i>alprazolam tab 1 mg (generic of XANAX)</i>	QL (Max 7 days)
<i>alprazolam tab 2 mg (generic of XANAX)</i>	QL (Max 7 days)
<i>chlordiazepoxide hcl cap 5 mg</i>	QL (Max 7 days)
<i>chlordiazepoxide hcl cap 10 mg</i>	QL (Max 7 days)

Drug Name	Requirements/Limits
<i>chlordiazepoxide hcl cap 25 mg</i>	QL (Max 7 days)
<i>clorazepate dipotassium tab 3.75 mg</i>	QL (Max 7 days)
<i>clorazepate dipotassium tab 7.5 mg</i>	QL (Max 7 days)
<i>clorazepate dipotassium tab 15 mg</i>	QL (Max 7 days)
<i>diazepam tab 2 mg (generic of VALIUM)</i>	QL (Max 7 days)
<i>diazepam tab 5 mg (generic of VALIUM)</i>	QL (Max 7 days)
<i>diazepam tab 10 mg (generic of VALIUM)</i>	QL (Max 7 days)
<i>lorazepam tab 0.5 mg (generic of ATIVAN)</i>	QL (Max 7 days)
<i>lorazepam tab 1 mg (generic of ATIVAN)</i>	QL (Max 7 days)
<i>lorazepam tab 2 mg (generic of ATIVAN)</i>	QL (Max 7 days)
<i>oxazepam cap 10 mg</i>	QL (Max 7 days)
<i>oxazepam cap 15 mg</i>	QL (Max 7 days)
<i>oxazepam cap 30 mg</i>	QL (Max 7 days)

ANTICONVULSANTS

ANTICONVULSANTS - BENZODIAZEPINES

<i>clonazepam tab 0.5 mg (generic of KLONOPIN)</i>	QL (Max 7 days)
<i>clonazepam tab 1 mg (generic of KLONOPIN)</i>	QL (Max 7 days)
<i>clonazepam tab 2 mg (generic of KLONOPIN)</i>	QL (Max 7 days)

ANTICONVULSANTS - MISC.

<i>carbamazepine chew tab 100 mg</i>	QL (Max 7 days)
<i>carbamazepine susp 100 mg/5ml (generic of TEGRETOL)</i>	QL (Max 7 days)
<i>carbamazepine tab 200 mg (generic of TEGRETOL)</i>	QL (Max 7 days)
<i>carbamazepine tab er 12hr 100 mg (generic of TEGRETOL-XR)</i>	QL (Max 7 days)
<i>carbamazepine tab er 12hr 200 mg (generic of TEGRETOL-XR)</i>	QL (Max 7 days)
<i>carbamazepine tab er 12hr 400 mg (generic of TEGRETOL-XR)</i>	QL (Max 7 days)
<i>oxcarbazepine susp 300 mg/5ml (60 mg/ml) (generic of TRILEPTAL)</i>	QL (Max 7 days)
<i>oxcarbazepine tab 150 mg (generic of TRILEPTAL)</i>	QL (Max 7 days)
<i>oxcarbazepine tab 300 mg (generic of TRILEPTAL)</i>	QL (Max 7 days)
<i>oxcarbazepine tab 600 mg (generic of TRILEPTAL)</i>	QL (Max 7 days)

VALPROIC ACID

<i>divalproex sodium tab delayed release 125 mg (generic of DEPAKOTE)</i>	QL (Max 7 days)
<i>divalproex sodium tab delayed release 250 mg (generic of DEPAKOTE)</i>	QL (Max 7 days)
<i>divalproex sodium tab delayed release 500 mg (generic of DEPAKOTE)</i>	QL (Max 7 days)
<i>divalproex sodium tab er 24 hr 250 mg (generic of DEPAKOTE ER)</i>	QL (Max 7 days)
<i>divalproex sodium tab er 24 hr 500 mg (generic of DEPAKOTE ER)</i>	QL (Max 7 days)

Drug Name	Requirements/Limits
<i>valproate sodium oral soln 250 mg/5ml (base equiv)</i>	QL (Max 7 days)
<i>valproic acid cap 250 mg</i>	QL (Max 7 days)

ANTIDEPRESSANTS

ALPHA-2 RECEPTOR ANTAGONISTS (TETRACYCLICS)

<i>mirtazapine tab 15 mg (generic of REMERON)</i>	QL (Max 7 days)
<i>mirtazapine tab 30 mg (generic of REMERON)</i>	QL (Max 7 days)
<i>mirtazapine tab 45 mg</i>	QL (Max 7 days)

ANTIDEPRESSANTS - MISC.

<i>bupropion hcl tab 75 mg</i>	QL (Max 7 days)
<i>bupropion hcl tab 100 mg</i>	QL (Max 7 days)
<i>bupropion hcl tab er 12hr 100 mg (generic of WELLBUTRIN SR)</i>	QL (Max 7 days)
<i>bupropion hcl tab er 12hr 150 mg (generic of WELLBUTRIN SR)</i>	QL (Max 7 days)
<i>bupropion hcl tab er 12hr 200 mg (generic of WELLBUTRIN SR)</i>	QL (Max 7 days)

SELECTIVE SEROTONIN REUPTAKE INHIBITORS (SSRIS)

<i>citalopram hydrobromide oral soln 10 mg/5ml</i>	QL (Max 7 days)
<i>citalopram hydrobromide tab 10 mg (base equiv) (generic of CELEXA)</i>	QL (Max 7 days)
<i>citalopram hydrobromide tab 20 mg (base equiv) (generic of CELEXA)</i>	QL (Max 7 days)
<i>citalopram hydrobromide tab 40 mg (base equiv) (generic of CELEXA)</i>	QL (Max 7 days)
<i>fluoxetine hcl cap 10 mg (generic of PROZAC)</i>	QL (Max 7 days)
<i>fluoxetine hcl cap 20 mg (generic of PROZAC)</i>	QL (Max 7 days)
<i>fluoxetine hcl cap 40 mg (generic of PROZAC)</i>	QL (Max 7 days)
<i>fluoxetine hcl solution 20 mg/5ml</i>	QL (Max 7 days)
<i>fluoxetine hcl tab 60 mg (generic of FLUOXETINE HYDROCHLORIDE)</i>	QL (Max 7 days)
<i>FLUOXETINE TAB 60MG</i>	QL (Max 7 days)
<i>fluvoxamine maleate tab 25 mg</i>	QL (Max 7 days)
<i>fluvoxamine maleate tab 50 mg</i>	QL (Max 7 days)
<i>fluvoxamine maleate tab 100 mg</i>	QL (Max 7 days)
<i>paroxetine hcl tab 10 mg (generic of PAXIL)</i>	QL (Max 7 days)
<i>paroxetine hcl tab 20 mg (generic of PAXIL)</i>	QL (Max 7 days)
<i>paroxetine hcl tab 30 mg (generic of PAXIL)</i>	QL (Max 7 days)
<i>paroxetine hcl tab 40 mg (generic of PAXIL)</i>	QL (Max 7 days)
<i>sertraline hcl oral concentrate for solution 20 mg/ml (generic of ZOLOFT)</i>	QL (Max 7 days)
<i>sertraline hcl tab 25 mg (generic of ZOLOFT)</i>	QL (Max 7 days)
<i>sertraline hcl tab 50 mg (generic of ZOLOFT)</i>	QL (Max 7 days)
<i>sertraline hcl tab 100 mg (generic of ZOLOFT)</i>	QL (Max 7 days)

SEROTONIN MODULATORS

<i>trazodone hcl tab 50 mg</i>	QL (Max 7 days)
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Drug Name	Requirements/Limits
<i>trazodone hcl tab 100 mg</i>	QL (Max 7 days)
<i>trazodone hcl tab 150 mg</i>	QL (Max 7 days)
<i>trazodone hcl tab 300 mg</i>	QL (Max 7 days)
SEROTONIN-NOREPINEPHRINE REUPTAKE INHIBITORS (SNRIS)	
<i>venlafaxine hcl cap er 24hr 37.5 mg (base equivalent) (generic of EFFEXOR XR)</i>	QL (Max 7 days)
<i>venlafaxine hcl cap er 24hr 75 mg (base equivalent) (generic of EFFEXOR XR)</i>	QL (Max 7 days)
<i>venlafaxine hcl cap er 24hr 150 mg (base equivalent) (generic of EFFEXOR XR)</i>	QL (Max 7 days)
<i>venlafaxine hcl tab 25 mg (base equivalent)</i>	QL (Max 7 days)
<i>venlafaxine hcl tab 50 mg (base equivalent)</i>	QL (Max 7 days)
<i>venlafaxine hcl tab 75 mg (base equivalent)</i>	QL (Max 7 days)
<i>venlafaxine hcl tab 100 mg (base equivalent)</i>	QL (Max 7 days)
ANTIDOTES AND SPECIFIC ANTAGONISTS	
OPIOID ANTAGONISTS	
<i>naltrexone hcl tab 50 mg</i>	QL (Max 7 days)
ANTIHIISTAMINES	
ANTIHIISTAMINES - ETHANOLAMINES	
<i>diphenhydramine hcl cap 25 mg</i>	QL (Max 7 days), OTC
<i>diphenhydramine hcl cap 50 mg</i>	QL (Max 7 days), OTC
<i>diphenhydramine hcl tab 25 mg</i>	QL (Max 7 days), OTC
ANTIHIISTAMINES - PIPERIDINES	
<i>cyproheptadine hcl tab 4 mg</i>	QL (Max 7 days)
ANTIHYPERTENSIVES	
ANTIADRENERGIC ANTIHYPERTENSIVES	
<i>clonidine hcl tab 0.1 mg</i>	QL (Max 7 days)
<i>clonidine hcl tab 0.2 mg</i>	QL (Max 7 days)
<i>clonidine hcl tab 0.3 mg</i>	QL (Max 7 days)
<i>guanfacine hcl tab 1 mg</i>	QL (Max 7 days)
<i>guanfacine hcl tab 2 mg</i>	QL (Max 7 days)
ANTIPARKINSON AND RELATED THERAPY AGENTS	
ANTIPARKINSON ANTICHOLINERGICS	
<i>benztropine mesylate tab 0.5 mg</i>	QL (Max 7 days)
<i>benztropine mesylate tab 1 mg</i>	QL (Max 7 days)
<i>benztropine mesylate tab 2 mg</i>	QL (Max 7 days)
<i>trihexyphenidyl hcl tab 2 mg</i>	QL (Max 7 days)
<i>trihexyphenidyl hcl tab 5 mg</i>	QL (Max 7 days)
ANTIPSYCHOTICS/ANTIMANIC AGENTS	
ANTIMANIC AGENTS	
<i>lithium carbonate cap 150 mg</i>	QL (Max 7 days)
<i>lithium carbonate cap 300 mg</i>	QL (Max 7 days)
<i>lithium carbonate cap 600 mg</i>	QL (Max 7 days)
<i>lithium carbonate tab er 300 mg (generic of LITHOBID)</i>	QL (Max 7 days)

Drug Name	Requirements/Limits
<i>lithium carbonate tab er 450 mg</i>	QL (Max 7 days)
BENZISOXAZOLES	
<i>risperidone orally disintegrating tab 0.5 mg</i>	QL (Max 7 days)
<i>risperidone orally disintegrating tab 1 mg</i>	QL (Max 7 days)
<i>risperidone orally disintegrating tab 2 mg</i>	QL (Max 7 days)
<i>risperidone orally disintegrating tab 3 mg</i>	QL (Max 7 days)
<i>risperidone orally disintegrating tab 4 mg</i>	QL (Max 7 days)
<i>risperidone soln 1 mg/ml (generic of RISPERDAL)</i>	QL (Max 7 days)
<i>risperidone tab 0.5 mg (generic of RISPERDAL)</i>	QL (Max 7 days)
<i>risperidone tab 0.25 mg</i>	QL (Max 7 days)
<i>risperidone tab 1 mg (generic of RISPERDAL)</i>	QL (Max 7 days)
<i>risperidone tab 2 mg (generic of RISPERDAL)</i>	QL (Max 7 days)
<i>risperidone tab 3 mg (generic of RISPERDAL)</i>	QL (Max 7 days)
<i>risperidone tab 4 mg (generic of RISPERDAL)</i>	QL (Max 7 days)
BUTYROPHENONES	
<i>haloperidol decanoate im soln 50 mg/ml (generic of HALDOL DECANOATE 50)</i>	QL (Max 7 days)
<i>haloperidol decanoate im soln 100 mg/ml (generic of HALDOL DECANOATE 100)</i>	QL (Max 7 days)
<i>haloperidol tab 0.5 mg</i>	QL (Max 7 days)
<i>haloperidol tab 1 mg</i>	QL (Max 7 days)
<i>haloperidol tab 2 mg</i>	QL (Max 7 days)
<i>haloperidol tab 5 mg</i>	QL (Max 7 days)
<i>haloperidol tab 10 mg</i>	QL (Max 7 days)
<i>haloperidol tab 20 mg</i>	QL (Max 7 days)
DIBENZAPINES	
<i>loxapine succinate cap 5 mg</i>	QL (Max 7 days)
<i>loxapine succinate cap 10 mg</i>	QL (Max 7 days)
<i>loxapine succinate cap 25 mg</i>	QL (Max 7 days)
<i>loxapine succinate cap 50 mg</i>	QL (Max 7 days)
<i>olanzapine tab 2.5 mg (generic of ZYPREXA)</i>	QL (Max 7 days)
<i>olanzapine tab 5 mg (generic of ZYPREXA)</i>	QL (Max 7 days)
<i>olanzapine tab 7.5 mg (generic of ZYPREXA)</i>	QL (Max 7 days)
<i>olanzapine tab 10 mg (generic of ZYPREXA)</i>	QL (Max 7 days)
<i>olanzapine tab 15 mg (generic of ZYPREXA)</i>	QL (Max 7 days)
<i>olanzapine tab 20 mg (generic of ZYPREXA)</i>	QL (Max 7 days)
<i>quetiapine fumarate tab 25 mg (generic of SEROQUEL)</i>	QL (Max 7 days)
<i>quetiapine fumarate tab 50 mg (generic of SEROQUEL)</i>	QL (Max 7 days)
<i>quetiapine fumarate tab 100 mg (generic of SEROQUEL)</i>	QL (Max 7 days)
<i>quetiapine fumarate tab 200 mg (generic of SEROQUEL)</i>	QL (Max 7 days)
<i>quetiapine fumarate tab 300 mg (generic of SEROQUEL)</i>	QL (Max 7 days)

Drug Name	Requirements/Limits
<i>quetiapine fumarate tab 400 mg (generic of SEROQUEL)</i>	QL (Max 7 days)
PHENOTHIAZINES	
<i>chlorpromazine hcl tab 10 mg</i>	QL (Max 7 days)
<i>chlorpromazine hcl tab 25 mg</i>	QL (Max 7 days)
<i>chlorpromazine hcl tab 50 mg</i>	QL (Max 7 days)
<i>chlorpromazine hcl tab 100 mg</i>	QL (Max 7 days)
<i>chlorpromazine hcl tab 200 mg</i>	QL (Max 7 days)
<i>fluphenazine decanoate inj 25 mg/ml</i>	QL (Max 7 days)
<i>fluphenazine hcl tab 1 mg</i>	QL (Max 7 days)
<i>fluphenazine hcl tab 2.5 mg</i>	QL (Max 7 days)
<i>fluphenazine hcl tab 5 mg</i>	QL (Max 7 days)
<i>fluphenazine hcl tab 10 mg</i>	QL (Max 7 days)
<i>perphenazine tab 2 mg</i>	QL (Max 7 days)
<i>perphenazine tab 4 mg</i>	QL (Max 7 days)
<i>perphenazine tab 8 mg</i>	QL (Max 7 days)
<i>perphenazine tab 16 mg</i>	QL (Max 7 days)
<i>trifluoperazine hcl tab 1 mg (base equivalent)</i>	QL (Max 7 days)
<i>trifluoperazine hcl tab 2 mg (base equivalent)</i>	QL (Max 7 days)
<i>trifluoperazine hcl tab 5 mg (base equivalent)</i>	QL (Max 7 days)
<i>trifluoperazine hcl tab 10 mg (base equivalent)</i>	QL (Max 7 days)
THIOXANTHENES	
<i>thiothixene cap 1 mg</i>	QL (Max 7 days)
<i>thiothixene cap 2 mg</i>	QL (Max 7 days)
<i>thiothixene cap 5 mg</i>	QL (Max 7 days)
<i>thiothixene cap 10 mg</i>	QL (Max 7 days)
HYPNOTICS/SEDATIVES/SLEEP DISORDER AGENTS	
ANTI-HISTAMINE HYPNOTICS	
<i>diphenhydramine hcl (sleep) cap 25 mg</i>	QL (Max 7 days), OTC
<i>diphenhydramine hcl (sleep) cap 50 mg</i>	QL (Max 7 days), OTC
<i>diphenhydramine hcl (sleep) tab 25 mg</i>	QL (Max 7 days), OTC
<i>diphenhydramine hcl (sleep) tab 50 mg</i>	QL (Max 7 days), OTC
NON-BARBITURATE HYPNOTICS	
<i>temazepam cap 15 mg (generic of RESTORIL)</i>	QL (Max 7 days)
<i>temazepam cap 30 mg (generic of RESTORIL)</i>	QL (Max 7 days)
PSYCHOTHERAPEUTIC AND NEUROLOGICAL AGENTS - MISC.	
AGENTS FOR CHEMICAL DEPENDENCY	
<i>acamprosate calcium tab delayed release 333 mg</i>	QL (Max 7 days)
<i>disulfiram tab 250 mg</i>	QL (Max 7 days)
<i>disulfiram tab 500 mg</i>	QL (Max 7 days)

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alprazolam tab 2 mg 1
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 see lorazepam tab 1 mg 2
 see lorazepam tab 2 mg 2
atomoxetine hcl cap 10 mg (base equiv) 1
atomoxetine hcl cap 100 mg (base equiv) 1
atomoxetine hcl cap 18 mg (base equiv) 1
atomoxetine hcl cap 25 mg (base equiv) 1
atomoxetine hcl cap 40 mg (base equiv) 1
atomoxetine hcl cap 60 mg (base equiv) 1
atomoxetine hcl cap 80 mg (base equiv) 1
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buprenorphine hcl-naloxone hcl sl film 12-3 mg (base equiv) 1
buprenorphine hcl-naloxone hcl sl film 2-0.5 mg (base equiv) 1
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buprenorphine hcl-naloxone hcl sl film 8-2 mg (base equiv) 1
buprenorphine hcl-naloxone hcl sl tab 2-0.5 mg (base equiv) 1
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citalopram hydrobromide tab 40 mg (base equiv) 3
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clonazepam tab 2 mg 2
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clonidine hcl tab 0.2 mg 4
clonidine hcl tab 0.3 mg 4
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clorazepate dipotassium tab 7.5 mg .. 2
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see <i>divalproex sodium tab er 24 hr 500 mg</i>	2
<i>diazepam tab 10 mg</i>	2
<i>diazepam tab 2 mg</i>	2
<i>diazepam tab 5 mg</i>	2
<i>diphenhydramine hcl (sleep) cap 25 mg</i>	6
<i>diphenhydramine hcl (sleep) cap 50 mg</i>	6
<i>diphenhydramine hcl (sleep) tab 25 mg</i>	6
<i>diphenhydramine hcl (sleep) tab 50 mg</i>	6
<i>diphenhydramine hcl cap 25 mg</i>	4
<i>diphenhydramine hcl cap 50 mg</i>	4
<i>diphenhydramine hcl tab 25 mg</i>	4
<i>disulfiram tab 250 mg</i>	6
<i>disulfiram tab 500 mg</i>	6
<i>divalproex sodium tab delayed release 125 mg</i>	2
<i>divalproex sodium tab delayed release 250 mg</i>	2
<i>divalproex sodium tab delayed release 500 mg</i>	2
<i>divalproex sodium tab er 24 hr 250 mg</i>	2
<i>divalproex sodium tab er 24 hr 500 mg</i>	2

E

EFFEXOR XR	
see <i>venlafaxine hcl cap er 24hr 150 mg (base equivalent)</i>	4
see <i>venlafaxine hcl cap er 24hr 37.5 mg (base equivalent)</i>	4
see <i>venlafaxine hcl cap er 24hr 75 mg (base equivalent)</i>	4

F

<i>fluoxetine hcl cap 10 mg</i>	3
<i>fluoxetine hcl cap 20 mg</i>	3
<i>fluoxetine hcl cap 40 mg</i>	3
<i>fluoxetine hcl solution 20 mg/5ml</i>	3
<i>fluoxetine hcl tab 60 mg</i>	3

FLUOXETINE HYDROCHLORIDE

see <i>fluoxetine hcl tab 60 mg</i>	3
FLUOXETINE TAB 60MG	3
<i>fluphenazine decanoate inj 25 mg/ml</i>	6
<i>fluphenazine hcl tab 1 mg</i>	6
<i>fluphenazine hcl tab 10 mg</i>	6
<i>fluphenazine hcl tab 2.5 mg</i>	6
<i>fluphenazine hcl tab 5 mg</i>	6
<i>fluvoxamine maleate tab 100 mg</i>	3
<i>fluvoxamine maleate tab 25 mg</i>	3
<i>fluvoxamine maleate tab 50 mg</i>	3

G

<i>guanfacine hcl tab 1 mg</i>	4
<i>guanfacine hcl tab 2 mg</i>	4

H

HALDOL DECANOATE 100	
see <i>haloperidol decanoate im soln 100 mg/ml</i>	5
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<i>haloperidol decanoate im soln 100 mg/ml</i>	5
<i>haloperidol decanoate im soln 50 mg/ml</i>	5
<i>haloperidol tab 0.5 mg</i>	5
<i>haloperidol tab 1 mg</i>	5
<i>haloperidol tab 10 mg</i>	5
<i>haloperidol tab 2 mg</i>	5
<i>haloperidol tab 20 mg</i>	5
<i>haloperidol tab 5 mg</i>	5
<i>hydroxyzine hcl syrup 10 mg/5ml</i>	1
<i>hydroxyzine hcl tab 10 mg</i>	1
<i>hydroxyzine hcl tab 25 mg</i>	1
<i>hydroxyzine hcl tab 50 mg</i>	1
<i>hydroxyzine pamoate cap 25 mg</i>	1
<i>hydroxyzine pamoate cap 50 mg</i>	1

K

KLONOPIN	
see <i>clonazepam tab 0.5 mg</i>	2
see <i>clonazepam tab 1 mg</i>	2
see <i>clonazepam tab 2 mg</i>	2

L

<i>lithium carbonate cap 150 mg</i>	4
<i>lithium carbonate cap 300 mg</i>	4
<i>lithium carbonate cap 600 mg</i>	4
<i>lithium carbonate tab er 300 mg</i>	4

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LITHOBID
 see lithium carbonate tab er 300 mg 4
lorazepam tab 0.5 mg 2
lorazepam tab 1 mg 2
lorazepam tab 2 mg 2
loxapine succinate cap 10 mg 5
loxapine succinate cap 25 mg 5
loxapine succinate cap 5 mg 5
loxapine succinate cap 50 mg 5
M
mirtazapine tab 15 mg 3
mirtazapine tab 30 mg 3
mirtazapine tab 45 mg 3
N
naltrexone hcl tab 50 mg 4
O
olanzapine tab 10 mg 5
olanzapine tab 15 mg 5
olanzapine tab 2.5 mg 5
olanzapine tab 20 mg 5
olanzapine tab 5 mg 5
olanzapine tab 7.5 mg 5
oxazepam cap 10 mg 2
oxazepam cap 15 mg 2
oxazepam cap 30 mg 2
oxcarbazepine susp 300 mg/5ml (60 mg/ml) 2
oxcarbazepine tab 150 mg 2
oxcarbazepine tab 300 mg 2
oxcarbazepine tab 600 mg 2
P
paroxetine hcl tab 10 mg 3
paroxetine hcl tab 20 mg 3
paroxetine hcl tab 30 mg 3
paroxetine hcl tab 40 mg 3
PAXIL
 see paroxetine hcl tab 10 mg 3
 see paroxetine hcl tab 20 mg 3
 see paroxetine hcl tab 30 mg 3
 see paroxetine hcl tab 40 mg 3
perphenazine tab 16 mg 6
perphenazine tab 2 mg 6
perphenazine tab 4 mg 6
perphenazine tab 8 mg 6
PROZAC
 see fluoxetine hcl cap 10 mg 3

see fluoxetine hcl cap 20 mg 3
 see fluoxetine hcl cap 40 mg 3

Q

quetiapine fumarate tab 100 mg 5
quetiapine fumarate tab 200 mg 5
quetiapine fumarate tab 25 mg 5
quetiapine fumarate tab 300 mg 5
quetiapine fumarate tab 400 mg 6
quetiapine fumarate tab 50 mg 5

R

REMERON

see mirtazapine tab 15 mg 3
 see mirtazapine tab 30 mg 3

RESTORIL

see temazepam cap 15 mg 6
 see temazepam cap 30 mg 6

RISPERDAL

see risperidone soln 1 mg/ml 5
 see risperidone tab 0.5 mg 5
 see risperidone tab 1 mg 5
 see risperidone tab 2 mg 5
 see risperidone tab 3 mg 5
 see risperidone tab 4 mg 5
risperidone orally disintegrating tab 0.5 mg 5
risperidone orally disintegrating tab 1 mg 5
risperidone orally disintegrating tab 2 mg 5
risperidone orally disintegrating tab 3 mg 5
risperidone orally disintegrating tab 4 mg 5
risperidone soln 1 mg/ml 5
risperidone tab 0.25 mg 5
risperidone tab 0.5 mg 5
risperidone tab 1 mg 5
risperidone tab 2 mg 5
risperidone tab 3 mg 5
risperidone tab 4 mg 5

S

SEROQUEL

see quetiapine fumarate tab 100 mg 5
 see quetiapine fumarate tab 200 mg 5
 see quetiapine fumarate tab 25 mg 5
 see quetiapine fumarate tab 300 mg 5
 see quetiapine fumarate tab 400 mg 6

see *quetiapine fumarate tab 50 mg* 5
sertraline hcl oral concentrate for
solution 20 mg/ml 3
sertraline hcl tab 100 mg 3
sertraline hcl tab 25 mg 3
sertraline hcl tab 50 mg 3

STRATTERA

see *atomoxetine hcl cap 10 mg (base equiv)* 1
 see *atomoxetine hcl cap 100 mg (base equiv)* 1
 see *atomoxetine hcl cap 18 mg (base equiv)* 1
 see *atomoxetine hcl cap 25 mg (base equiv)* 1
 see *atomoxetine hcl cap 40 mg (base equiv)* 1
 see *atomoxetine hcl cap 60 mg (base equiv)* 1
 see *atomoxetine hcl cap 80 mg (base equiv)* 1

SUBOXONE

see *buprenorphine hcl-naloxone hcl sl film 12-3 mg (base equiv)* 1
 see *buprenorphine hcl-naloxone hcl sl film 2-0.5 mg (base equiv)* 1
 see *buprenorphine hcl-naloxone hcl sl film 4-1 mg (base equiv)* 1
 see *buprenorphine hcl-naloxone hcl sl film 8-2 mg (base equiv)* 1

T

TEGRETOL

see *carbamazepine susp 100 mg/5ml* 2
 see *carbamazepine tab 200 mg* 2

TEGRETOL-XR

see *carbamazepine tab er 12hr 100 mg* 2
 see *carbamazepine tab er 12hr 200 mg* 2
 see *carbamazepine tab er 12hr 400 mg* 2

temazepam cap 15 mg 6
temazepam cap 30 mg 6
thiothixene cap 1 mg 6
thiothixene cap 10 mg 6
thiothixene cap 2 mg 6

thiothixene cap 5 mg 6
trazodone hcl tab 100 mg 4
trazodone hcl tab 150 mg 4
trazodone hcl tab 300 mg 4
trazodone hcl tab 50 mg 3

trifluoperazine hcl tab 1 mg (base equivalent) 6
trifluoperazine hcl tab 10 mg (base equivalent) 6
trifluoperazine hcl tab 2 mg (base equivalent) 6
trifluoperazine hcl tab 5 mg (base equivalent) 6
trihexyphenidyl hcl tab 2 mg 4
trihexyphenidyl hcl tab 5 mg 4

TRILEPTAL

see *oxcarbazepine susp 300 mg/5ml (60 mg/ml)* 2
 see *oxcarbazepine tab 150 mg* 2
 see *oxcarbazepine tab 300 mg* 2
 see *oxcarbazepine tab 600 mg* 2

V

VALIUM

see *diazepam tab 10 mg* 2
 see *diazepam tab 2 mg* 2
 see *diazepam tab 5 mg* 2
valproate sodium oral soln 250 mg/5ml (base equiv) 3
valproic acid cap 250 mg 3
venlafaxine hcl cap er 24hr 150 mg (base equivalent) 4
venlafaxine hcl cap er 24hr 37.5 mg (base equivalent) 4
venlafaxine hcl cap er 24hr 75 mg (base equivalent) 4
venlafaxine hcl tab 100 mg (base equivalent) 4
venlafaxine hcl tab 25 mg (base equivalent) 4
venlafaxine hcl tab 50 mg (base equivalent) 4
venlafaxine hcl tab 75 mg (base equivalent) 4

W

WELLBUTRIN SR

see *bupropion hcl tab er 12hr 100 mg* 3

see *bupropion hcl tab er 12hr 150 mg*..... 3
 see *bupropion hcl tab er 12hr 200 mg*..... 3

X

XANAX

see *alprazolam tab 0.25 mg*..... 1
 see *alprazolam tab 0.5 mg* 1
 see *alprazolam tab 1 mg* 1
 see *alprazolam tab 2 mg* 1

Z

ZOLOFT

see *sertraline hcl oral concentrate for solution 20 mg/ml* 3
 see *sertraline hcl tab 100 mg*..... 3
 see *sertraline hcl tab 25 mg*..... 3
 see *sertraline hcl tab 50 mg*..... 3

ZYPREXA

see *olanzapine tab 10 mg*..... 5
 see *olanzapine tab 15 mg*..... 5
 see *olanzapine tab 2.5 mg*..... 5
 see *olanzapine tab 20 mg*..... 5
 see *olanzapine tab 5 mg* 5
 see *olanzapine tab 7.5 mg*..... 5

Notice of Non-Discrimination



Health
Choice

In Compliance with Section 1557 of the Affordable Care Act

Health Choice Arizona complies with applicable Federal civil rights laws and does not discriminate on the basis of race, color, national origin, age, disability, or sex (including pregnancy, sexual orientation, and gender identity). Health Choice Arizona does not exclude people or treat them differently because of race, color, national origin, age, disability, or sex (including pregnancy, sexual orientation, and gender identity).

Health Choice Arizona:

Provides free aids and services to people with disabilities to communicate effectively with us, such as:

- Qualified sign language interpreters
- Written information in other formats (large print, audio, accessible electronic formats, other formats)

Provides free language services to people whose primary language is not English, such as:

- Qualified interpreters
- Information written in other languages

If you need these services, contact:

Health Choice Arizona
Address:
410 N. 44th Street, Ste. 900,
Phoenix, AZ 85008
Phone: **1-800-322-8670**, TTY: **711**
Fax: **480-760-4739**
Email: **HCHComments@azblue.com**

If you believe that Health Choice Arizona has failed to provide these services or discriminated in another way on the basis of race, color, national origin, age, disability, or sex (including pregnancy, sexual orientation, and gender identity). You can file a grievance with:

Health Choice Arizona
Address:
410 N. 44th Street, Ste. 900,
Phoenix, AZ 85008
Phone: **1-800-322-8670**, TTY: **711**
Fax: **480-760-4739**
Email: **HCH.GrievanceForms@azblue.com**

You can file a grievance in person or by mail, fax, or email. If you need help filing a grievance, the Grievance Manager/Civil Rights Coordinator is available to help you.

You can also file a civil rights complaint with the U.S. Department of Health and Human Services, Office for Civil Rights, electronically through the Office for Civil Rights Complaint Portal, available at **<https://ocrportal.hhs.gov/ocr/portal/lobby.jsf>**, or by mail or phone at:

U.S. Department of Health and Human Services
200 Independence Avenue, SW
Room 509F, HHH Building
Washington, D.C. 20201
1-800-368-1019, 1-800-537-7697 (TDD)

Complaint forms are available at
<http://www.hhs.gov/ocr/office/file/index.html>.

Notificación de no discriminación



Health
Choice

En cumplimiento con la Sección 1557 de la Ley de Cuidado de Salud de Bajo Costo

Health Choice Arizona cumple con las leyes federales de derechos civiles aplicables y no discrimina por motivos de raza, color, nacionalidad, edad, discapacidad o sexo (incluido el embarazo, la orientación sexual y la identidad de género). Health Choice Arizona no excluye a las personas ni las trata de forma diferente debido a su origen étnico, color, nacionalidad, edad, discapacidad o sexo (incluido el embarazo, la orientación sexual y la identidad de género).

Health Choice Arizona:

Proporciona asistencia y servicios gratuitos a las personas con discapacidades para que se comuniquen de manera eficaz con nosotros, como los siguientes:

- Intérpretes de lenguaje de señas capacitados.
- Información escrita en otros formatos (letra grande, audio, formatos electrónicos accesibles, otros formatos).

Proporciona servicios lingüísticos gratuitos a personas cuya lengua materna no es el inglés, como los siguientes:

- Intérpretes capacitados.
- Información escrita en otros idiomas.

Si necesita recibir estos servicios, con el Coordinador de Derechos Civiles,
410 N. 44th Street, Ste. 900,
Phoenix, AZ 85008,
Teléfono: **1-800-322-8670**, TTY: **711**
Fax: **480-760-4739**
Email: **HCHComments@azblue.com**

Si considera que Health Choice Arizona no le proporcionó estos servicios o lo discriminó de otra manera por motivos de origen étnico, color, nacionalidad, edad, discapacidad o sexo (incluido el embarazo, la orientación sexual y la identidad de género). Puede presentar un reclamo a la siguiente persona:

Coordinador de Derechos Civiles,
410 N. 44th Street, Ste. 900,
Phoenix, AZ 85008,
Teléfono: **1-800-322-8670**, TTY: **711**
Fax: **480-760-4739**
Email: **HCH.GrievanceForms@azblue.com**

Puede presentar el reclamo en persona o por correo postal, fax o correo electrónico. Si necesita ayuda para hacerlo, el Coordinador de Derechos Civiles está a su disposición para brindársela.

También puede presentar un reclamo de derechos civiles ante la Office for Civil Rights (Oficina de Derechos Civiles) del Department of Health and Human Services (Departamento de Salud y Servicios Humanos) de EE. UU. de manera electrónica a través de Office for Civil Rights Complaint Portal, disponible en **<https://ocrportal.hhs.gov/ocr/portal/lobby.jsf>**, o bien, por correo postal a la siguiente dirección o por teléfono a los números que figuran a continuación:

U.S. Department of Health and Human Services
200 Independence Avenue,
SW Room 509F, HHH Building
Washington, D.C. 20201
1-800-368-1019, 1-800-537-7697 (TDD)

Puede obtener los formularios de reclamo en el sitio web **<http://www.hhs.gov/ocr/office/file/index.html>**.

Multi-Language Interpreter Services



Health
Choice

as required by Section 1557
of the Affordable Care Act

ATTENTION: If you speak a language other than English, language assistance services, free of charge, are available to you.
Call **1-800-322-8670** (TTY: **711**), 8 a.m. – 5 p.m., Monday through Friday (except holidays).

ATENCIÓN: Si usted habla español, tiene a su disposición servicios de asistencia lingüística sin cargo. Llame al **1-800-322-8670** (TTY: **711**).

請注意：若您使用繁體中文，您可以接受免費的語言協助服務。請致電 **1-800-322-8670** (TTY: **711**)。

Bilag1ana bizaad doo bee y1n7[ti' dago d00 saad n11n1 [a' bee y1n7[ti'go, saad bee ata' hane', t'1 1 n77k'e h, n1 bee ah00t'i' . Koj8' hod77lnih **1-800-322-8670** (TTY: **711**).

ATENÇÃO: Se você fala português brasileiro, oferecemos serviços gratuitos de assistência para idiomas. Ligue para **1-800-322-8670** (TTY: **711**).

CHÚ Ý: Nếu quý vị nói [Tiếng Việt], chúng tôi sẽ cung cấp các dịch vụ hỗ trợ ngôn ngữ miễn phí cho quý vị. Hãy gọi số **1-800-322-8670** (TTY: **711**).

تنبيه: إذا كنت تتحدث العربية، فسوف تتوفر لديك خدمات المساعدة اللغوية، مجانًا. اتصل على **867-322-800-1** (هاتف نصي: **711**)

ATTENTION: Si vous parlez français, des services d'aide linguistique vous sont proposés gratuitement. Appelez le **1-800-322-8670** (TTY: **711**).

ATANSYON: Si ou pale Kreyòl Ayisyen, sèvis asistans lang, gratis, disponib pou ou. Rele **1-800-322-8670** (TTY: **711**).

ACHTUNG: Wenn Sie Deutsch sprechen, steht Ihnen ein kostenloser Fremdsprachenservice zur Verfügung. Rufen Sie **1-800-322-8670** (TTY: **711**) an.

ΠΡΟΣΟΧΗ: Εάν μιλάτε Ελληνικά, μπορείτε να λάβετε δωρεάν υπηρεσίες γλωσσικής βοήθειας. Καλέστε τον αριθμό **1-800-322-8670** (TTY: **711**).

સૂચના: જો તમે બોલતા હોવ, તો તમારા માટે મફત ભાષા સહાયતા સેવાઓ ઉપલબ્ધ છે. સંપર્ક **1-800-322-8670** (TTY: **711**).

ध्यान दें: यदि आप हिन्दी बोलते हैं, तो आपके लिए भाषा सहायता सेवाएं निःशुल्क उपलब्ध हैं। **1-800-322-8670** (TTY: **711**) पर कॉल करें।

ATTENZIONE: Se parla italiano, sono disponibili per lei servizi gratuiti di assistenza linguistica. Chiami il numero **1-800-322-8670** (TTY: **711**).

Multi-Language Interpreter Services



Health
Choice

as required by Section 1557
of the Affordable Care Act

注意：日本語を話される場合、無料で言語支援サービスをご利用いただけます。次の番号までお電話してください：**1-800-322-8670 (TTY: 711)**

주의: 한국어를 사용하는 경우, 언어 지원 서비스가 무료로 제공됩니다. **1-800-322-8670 (TTY: 711)** 번으로 전화하십시오.

សូមយកចិត្តទុកដាក់៖ ប្រសិនបើលោកអ្នកនិយាយភាសា ខ្មែរ យើងផ្តល់សេវាកម្មជំនួយភាសាដល់លោកអ្នកដោយមិនគិតថ្លៃនោះទេ។ សូមហៅទូរស័ព្ទមកលេខ **1-800-322-8670 (TTY: 711)**។

नेपाली – बोल्नुहुन्छ भने तपाईंका लागि निःशुल्क रूपमा भाषा सहायता सेवाहरू उपलब्ध छन् । ध्यान दिनुहोस्: तपाईं
1-800-322-8670 (TTY: 711) मा कल गर्नुहोस् ।

توجه: اگر به زبان فارسی صحبت می‌کنید، خدمات زبانی رایگان به شما ارائه می‌شود. **1-800-322-8670 (TTY: 711)**. تماس بگیرید.

UWAGA: Jeżeli mówi Pan/Pani po polsku, oferujemy bezpłatne usługi pomocy językowej. Prosimy o kontakt pod numerem **1-800-322-8670** (telefon tekstowy (TTY: 711)).

ВНИМАНИЕ! Если вы говорите на Русский, вам бесплатно доступны услуги языковой поддержки. Звоните **1-800-322-8670** (телетайп: 711).

PAŽNJA: Ako govorite srpsko-hrvatski, usluge jezičke pomoći dostupne su Vam besplatno. Pozovite **1-800-322-8670 (TTY: 711)**.

مَعِيرَتَوْهَ: اَيْنَ بَعَالَتُوكَ دَمَخِكَةَ (لِشْنَا أُسُورِيَّيَا) وَبِمَجَن دَلَا أَجْرًا بَنِيْشَا دَقْشِمِشْهَ وَغَدَرْنَهَ. **1-800-322-8670 (TTY: 711)** عِبُوْد شَقْلَيْبُ لَهَ بَنَنْ مَنِيْنَا.

ATENSIYON: Kung nagsasalita ka ng Tagalog, ang mga serbisyong tulong sa wika, na walang singil, ay magagamit mo. Tumawag sa **1-800-322-8670 (TTY: 711)**.

โปรดทราบ: หากคุณพูดภาษาไทย คุณจะได้รับการช่วยเหลือด้านภาษาได้โดยไม่มีค่าใช้จ่าย โทร **1-800-322-8670 (TTY: 711)**

FAKATOKANGA'I: Kapau 'oku ke Lea-Fakatonga, ko e kau tokoni fakatonu lea 'oku nau fai atu ha tokoni ta'etotongi, pea teke lava 'o ma'u ia. Telefoni mai **1-800-322-8670 (TTY: 711)**.

Member Services / Servicios Para Miembros:

410 N. 44th Street, Suite 900
Phoenix, Arizona 85008

Phone: 480-968-6866

Toll-free: 1-800-322-8670 | TTY/TDD:
711 Monday - Friday, 8 a.m. - 5 p.m.

HealthChoiceAZ.com



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