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Revised Document Date: 07/28/2015

**Pharmacy Benefit Management (PBM) Program
 FORMULARY/PRODUCT RESTRICTIONS**

Key:

B Available as brand name only
G Available as a generic equivalent

\$ Average cost < \$50 per prescription
\$\$ Average cost \$50 to \$99 per prescription
\$\$\$ Average cost \$100 to \$249 per prescription
\$\$\$\$ Average cost \$250 to \$499 per prescription
\$\$\$\$\$ Average cost > \$499 per prescription

F Formulary: Indicates that the product is available without prior authorization.
N/F Non-Formulary: Indicates that the product is not available. An alternative F (Formulary) or PA (Prior Authorization) agent must be selected.
PA Prior Authorization: Indicates that the product require prior approval by WSI before being dispensed to the injured worker.

84 Hemostatics	Description	Brand Name	B/G	Cost	Status
<i>8410 Hemostatics - Systemic</i>					
	Aminocaproic Acid Soln 1.25gm/5ml	Amicar	B		PA
	Aminocaproic Acid Tab 500mg	Amicar	B		PA
	Aminocaproic Acid Tab 1000mg	Amicar	B		PA
	Tranexamic Acid Tab 650mg	Lysteda	G		PA

