List of Covered Drugs (*Drug List* or Formulary) 2026

UHC Dual Choice DC-Y001 (HMO D-SNP)

PLEASE READ: This document contains information about the drugs covered by this plan. For more recent information or if you have questions, contact Enrollee Services:

myUHC.com/CommunityPlan

Toll-free **866-242-7726**, TTY **711**
8 a.m.-8 p.m.: 7 Days Oct-Mar; 8 a.m.-5:30 p.m. M-F Apr-Sept

United Healthcare®

Formulary ID Number 00026002, Version 25
H7464_071425_112530_C v1.11

Last updated November 1, 2026

UHC Dual Choice DC-Y001 (HMO D-SNP)

2026 *List of Covered Drugs* (*Drug List* or Formulary)

Introduction

This document is called the *List of Covered Drugs* (also known as the *Drug List*). It tells you which drugs and over-the-counter (OTC) drugs and non-drug products are covered by UHC Dual Choice DC-Y001. The *Drug List* also tells you if there are any special rules or restrictions on any drugs covered by UHC Dual Choice DC-Y001. Key terms and their definitions appear in the last chapter of the *Enrollee Handbook*.

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A. Disclaimers

This is a list of drugs that enrollees can get in UHC Dual Choice DC-Y001.

- UHC Dual Choice DC-Y001 is insured through UnitedHealthcare Insurance Company or one of its affiliated companies, a Medicare Advantage organization with a Medicare contract and a contract with the District Medicaid Program. Enrollment in the plan depends on the plan's contract renewal with Medicare and District Medicaid.
- You can always check UHC Dual Choice DC-Y001's up-to-date *List of Covered Drugs* online at **myUHC.com/CommunityPlan** or by calling Enrollee Services at the numbers listed at the bottom of this page. The call is free.
- You can get this document for free in other formats, such as large print, braille, or audio. Call Enrollee Services at the numbers listed at the bottom of the page. The call is free.
- This document is available for free in Spanish and Amharic.
- You can call Enrollee Services at the numbers listed at the bottom of this page, and ask us to make a note in our system that you would like materials in a different language and/or alternate format now and in the future. This is called a "standing order". You can also make changes to your standing order at any time by calling Enrollee Services. The call is free.
- UnitedHealthcare does not discriminate on the basis of race, color, national origin, creed, religion, sexual orientation, public assistance status, age, mental or physical disability, gender, marital status, or disability in health programs and activities.

B. Frequently Asked Questions (FAQ)

Find answers to questions you have about this *Drug List*. You can read all of the FAQ to learn more or look for a question and answer.

B1. What drugs are on the *List of Covered Drugs*? (We call the *List of Covered Drugs* the *Drug List* for short.)

The drugs on the *Drug List* that starts in **Section C1** are the drugs covered by UHC Dual Choice DC-Y001. The drugs are available at pharmacies within our network. A pharmacy is in our network if we have an agreement with them to work with us and provide you services. We refer to these pharmacies as "network pharmacies."

- UHC Dual Choice DC-Y001 will cover all medically necessary drugs on the *Drug List* if:
  - your doctor or other prescriber says you need them to get better or stay healthy,
  - UHC Dual Choice DC-Y001 agrees that the drug is medically necessary for you, **and**
  - you fill the prescription at a UHC Dual Choice DC-Y001 network pharmacy.
- In some cases, you have to do something before you can get a drug. Refer to question B4 for more information.

You can also find an up-to-date list of drugs that we cover on our website at **myUHC.com/CommunityPlan** or call Enrollee Services at the numbers listed at the bottom of this page.

B2. Does the *Drug List* ever change?

Yes, and UHC Dual Choice DC-Y001 must follow Medicare and DC Medicaid rules when making changes. We may add or remove drugs on the *Drug List* during the year.

We may also change our rules about drugs. For example, we could:

- Decide to require or not require prior authorization for a drug. (Prior authorization is permission from UHC Dual Choice DC-Y001 before you can get a drug.)
- Add or change the amount of a drug you can get (called quantity limits).
- Add or change step therapy restrictions on a drug. (Step therapy means you must try one drug before we'll cover another drug.)

For more information on these drug rules, refer to question B4.

This section is continued on the next page.

If you're taking a drug that was covered at the **beginning** of the year, we'll generally not remove or change coverage of that drug **during the rest of the year** unless:

- a new, cheaper drug comes on the market that works as well as a drug on the *Drug List* now, **or**
- we learn that a drug isn't safe, **or**
- a drug is removed from the market.

Questions B3 and B6 below have more information on what happens when the *Drug List* changes.

- You can always check UHC Dual Choice DC-Y001's up-to-date *Drug List* online at **myUHC.com/CommunityPlan**. Updates to the *Drug List* are posted on the website monthly.
- You can also call Enrollee Services at the numbers listed at the bottom of this page to check the current *Drug List*.

B3. What happens when there's a change to the *Drug List*?

Some changes to the *Drug List* will happen **immediately**. For example:

- **Substitutions of certain new versions of drugs**. We may immediately remove the drugs from the *Drug List* if we replace them with certain new versions of that drug, but the new drug will appear on the same or lower cost-sharing tier with the same or fewer restrictions. When we add a new version of a drug, we may also decide to keep the brand name drug or original biological product on the list but change its coverage rules or limits.
    - We may not tell you before we make this change, but we'll send you information about the specific change we made once it happens.
    - We can make these changes only if the drug we're adding:
        - is a new generic version of a brand name drug, **or**
        - is a certain new biosimilar version of original biological products on the *Drug List* (for example, adding an interchangeable biosimilar that can be substituted for an original biological product without a new prescription).
        - Some of these drug types may be new to you. For more information, refer to **Section B14**.
    - You or your provider can ask for an exception from these changes. We'll send you a notice with the steps you can take to ask for an exception. Please refer to questions B10 - B12 for more information on exceptions.

This section is continued on the next page.

- **Remove unsafe drugs and other drugs that are taken off the market.** Sometimes a drug may be found unsafe or taken off the market for another reason. If this happens, we may immediately take it off the *Drug List*. If you're taking the drug, we'll send you a notice after we make the change. Contact your doctor or other prescriber and ask about your other options.

We may make other changes that affect the drugs you take. We'll tell you in advance about these other changes to the *Drug List*. These changes might happen if:

- The FDA provides new guidance or there are new clinical guidelines about a drug.
- We remove a brand name drug from the *Drug List* when adding a generic drug that isn't new to the market, **or**
- we remove an original biological product when adding a biosimilar, **or**
- we change the coverage rules or limits for the brand name drug.

When these changes happen, we'll:

- tell you at least 30 days before we make the change to the *Drug List* **or**
- let you know and give you a 30-day supply of the drug after you ask for a refill.

This will give you time to talk to your doctor or other prescriber. They can help you decide:

- if there's a similar drug on the *Drug List* you can take instead **or**
- whether to ask for an exception from these changes. To learn more about exceptions, refer to questions B10 - B12.

B4. Are there any restrictions or limits on drug coverage or any required actions to take to get certain drugs?

Yes. Some drugs have coverage rules or have limits on the amount you can get. In some cases you or your doctor or other prescriber must do something before you can get the drug. For example:

- **Prior authorization:** For some drugs, you or your doctor or other prescriber must get authorization from UHC Dual Choice DC-Y001 before you fill your prescription. Prior authorization is different from a referral. UHC Dual Choice DC-Y001 may not cover the drug if you don't get prior authorization.
- **Quantity limits:** Sometimes UHC Dual Choice DC-Y001 limits the amount of a drug you can get.

This section is continued on the next page.

- **Step therapy:** Sometimes UHC Dual Choice DC-Y001 requires you to do step therapy. This means you'll have to try drugs in a certain order for your medical condition. You might have to try one drug before we'll cover another drug. If your prescriber thinks the first drug doesn't work for you, then we'll cover the second.

You can find out if your drug has any additional requirements or limits by looking in the tables in **Section C**. You can also get more information by visiting our website at **myUHC.com/CommunityPlan**. We have posted online documents that explain our prior authorization and step therapy restrictions. You may also ask us to send you a copy.

You can ask for an exception from these limits. This will give you time to talk to your doctor or other prescriber. They can help you decide if there's a similar drug on the *Drug List* you can take instead or whether to ask for an exception. Refer to questions B10 - B12 for more information about exceptions.

B5. How will I know if the drug I want has limits or if there are required actions to take to get the drug?

The table in the List of Drugs by Medical Condition has a column labeled "Necessary actions, restrictions, or limits on use."

B6. What happens if UHC Dual Choice DC-Y001 changes their rules about how they cover some drugs (for example, prior authorization, quantity limits, and/or step therapy restrictions)?

In some cases, we'll tell you in advance if we add or change prior authorization, quantity limits, and/or step therapy restrictions on a drug. Refer to question B3 for more information about this advance notice and situations where we may not be able to tell you in advance when our rules about drugs on the *Drug List* change.

B7. How can I find a drug on the *Drug List*?

There are two ways to find a drug:

- You can search alphabetically, **or**
- You can search by medical condition.

To search **alphabetically**, look for your drug in the Index of Covered Drugs section. You can find it on page 143. The Index of Covered Drugs is an alphabetical list of all of the drugs included in the

This section is continued on the next page.

Drug List. Brand name drugs and generic drugs as well as over-the-counter (OTC) drugs and non-drug products are listed in the index.

To search **by medical condition**, find **Section C** labeled "List of Drugs by Medical Condition". The drugs in this section are grouped into categories depending on the type of medical conditions they are used to treat. For example, if you have a heart condition, you should look in the Cardiovascular Agents category. That's where you will find drugs that treat heart conditions.

B8. What if the drug I want to take isn't on the *Drug List*?

If you don't find your drug on the *Drug List*, call Enrollee Services at the numbers listed at the bottom of this page and ask about it. If you learn that UHC Dual Choice DC-Y001 won't cover the drug, you can do one of these things:

- Ask Enrollee Services for a list of drugs like the one you want to take. Then show the list to your doctor or other prescriber. They can prescribe a drug on the *Drug List* that's like the one you want to take. **or**
- You can ask the health plan to make an exception to cover your drug. Refer to questions B10 - B12 for more information about exceptions.

B9. What if I'm a new UHC Dual Choice DC-Y001 enrollee and can't find my drug on the *Drug List* or have a problem getting my drug?

We can help. We may cover a temporary 30-day supply of your drug during the first 90 days you are a member of UHC Dual Choice DC-Y001. This will give you time to talk to your doctor or other prescriber. They can help you decide if there is a similar drug on the *Drug List* you can take instead, or whether to ask for an exception.

If your prescription is written for fewer days, we'll allow multiple refills to provide up to a maximum of 30 days of medication.

We'll cover a 30-day supply of your drug if:

- you're taking a drug that is not on our *Drug List*, **or**
- our plan rules do not let you get the amount ordered by your prescriber, **or**
- the drug requires prior authorization by UHC Dual Choice DC-Y001, **or**
- you're taking a drug that is part of a step therapy restriction.

This section is continued on the next page.

If you're taking a drug that UHC Dual Choice DC-Y001 does not consider to be a Part D drug, you have the right to get a one-time, 72-hour emergency supply of the drug.

If you're in a nursing home or other long-term care facility and need a drug that isn't on the *Drug List* or if you cannot easily get the drug you need, we can help. If you've been in the plan for more than 90 days, live in a long-term care facility, and need a supply right away:

- We'll cover one 31-day supply of the drug you need (unless you have a prescription for fewer days), whether or not you are a new UHC Dual Choice DC-Y001 member.
- This is in addition to the temporary supply during the first 90 days you are a member of UHC Dual Choice DC-Y001.

If you're going through a change in your level of care, such as being transferred from a hospital to a long-term care facility, any time during the year, we may cover a temporary 31-day supply of the drug you need. This will give you time to talk to your doctor or other prescriber about other treatment options or to try to get an exception. Refer to questions B10 - B12 for more information about exceptions.

We won't pay for more of your drug after you get a temporary supply unless you receive authorization from the plan.

B10. Can I ask for an exception to cover my drug?

Yes. You can ask UHC Dual Choice DC-Y001 to make an exception to cover a drug that isn't not on the *Drug List*.

You can also ask us to change the rules on your drug.

- For example, UHC Dual Choice DC-Y001 may limit the amount of a drug we'll cover. If your drug has a limit, you can ask us to change the limit and cover more.
- Other examples: You can ask us to drop step therapy restrictions or prior authorization requirements.

B11. How can I ask for an exception?

To ask for an exception, call Enrollee Services. An Enrollee Services representative will work with you and your prescriber to help you ask for an exception. You can also read Chapter 9, section G2 of the *Enrollee Handbook* to learn more about exceptions.

This section is continued on the next page.

B12. How long does it take to get an exception?

After we get a statement from your prescriber supporting your request for an exception, we'll give you a decision within 72 hours. Your doctor or other prescriber can fax or mail the statement to us. Or your doctor or other prescriber can tell us on the phone and then fax or mail the statement. If you have questions, call Enrollee Services at the numbers listed at the bottom of this page.

If you or your prescriber think your health may be harmed if you have to wait 72 hours for a decision, you can ask for an expedited exception. This is a faster decision. If your prescriber supports your request, we'll give you a decision within 24 hours of getting your prescriber's supporting statement.

B13. What are generic drugs?

Generic drugs are made up of the same active ingredients as brand name drugs. They usually cost less than the brand name drug and generally work just as well. They usually don't have well-known names. Generic drugs are approved by the Food and Drug Administration (FDA). There are generic drugs available for many brand name drugs. Generic drugs usually can be substituted for brand name drugs at the pharmacy without a new prescription- depending on state and District laws .

UHC Dual Choice DC-Y001 covers both brand name drugs and generic drugs.

B14. What are original biological products and how are they related to biosimilars?

When we refer to drugs, this could mean a drug or a biological product. Biological products are drugs that are more complex than typical drugs. Since biological products are more complex than typical drugs, instead of having a generic form, they have forms that are called biosimilars. Generally, biosimilars work just as well as the original biological product and may cost less. There are biosimilar alternatives for some original biological products. Some biosimilars are interchangeable biosimilars and, depending on state and District laws, may be substituted for the original biological product at the pharmacy without needing a new prescription, just like generic drugs can be substituted for brand name drugs.

For more information on drug types, refer to **Chapter 5** of the *Enrollee Handbook*.

This section is continued on the next page.

B15. What are OTC drugs?

OTC stands for “over-the-counter.” UHC Dual Choice DC-Y001 covers some OTC drugs when they’re written as prescriptions by your provider.

You can read the UHC Dual Choice DC-Y001 *Drug List* to find out what OTC drugs are covered.

B16. Does UHC Dual Choice DC-Y001 cover non-drug OTC products?

Yes. UHC Dual Choice DC-Y001 covers some non-drug OTC products when they’re written as prescriptions by your provider. Examples of non-drug OTC products include Rubbing Alcohol, Urine Test Strips, and Petroleum Ointment. You can read the UHC Dual Choice DC-Y001 *Drug List* to find out what non-drug OTC products are covered.

B17. Does UHC Dual Choice DC-Y001 cover long-term supplies of prescriptions?

Yes. UHC Dual Choice DC-Y001 offers two ways to get a long-term supply (also called an extended supply) of “maintenance” drugs on our plan’s *Drug List*. Maintenance drugs are drugs that you take on a regular basis, for a chronic or long-term medical condition.

- **Retail pharmacy.** Some retail pharmacies in our network allow you to get a long-term supply of maintenance drugs. Your *Provider and Pharmacy Directory* tells you which pharmacies in our network can give you a long-term supply of maintenance drugs.
- **Mail-order.** Our plan’s mail-order service allows you to order up to a 100-day supply.To get order forms and information about filling your prescriptions by mail, please reference your *Provider and Pharmacy Directory* to find the mail service pharmacies in our network. If you use a mail-order pharmacy not in the plan’s network, your prescription won’t be covered. You can use our plan’s network mail-order services to get a long-term supply of maintenance drugs. Optum Home Delivery Pharmacy is a service of Optum Rx, a home delivery pharmacy, pharmacy benefit manager and affiliate of UnitedHealthcare Insurance Company. You are not required to use Optum Rx for your maintenance medications. Other pharmacies are available in your network.

For more information about getting a long-term supply of drugs, call Enrollee Services at the numbers listed at the bottom of this page.

B18. Can I get prescriptions delivered to my home from my local pharmacy?

This section is continued on the next page.

Your local pharmacy may be able to deliver your prescription to your home. You can call your pharmacy to find out if they offer home delivery.

B19. What's my copay?

UHC Dual Choice DC-Y001 enrollees have copays that range from $0 to $12.65 (depending on the level of Extra Help the member qualifies for) for prescription drugsand OTC drugs and non-drug products as long as the enrollee follows the plan's rules and qualifies for "Extra Help". Refer to questions B15 and B16 for more information about OTC drugs and non-drug products.

All members in this plan are automatically enrolled with "Extra Help". However, if that is lost after enrollment, regular Cost Shares would be implemented.

Cost Shares if you receive "Extra Help":

All covered drugs on our list (Generic or Brand) have copays that range from $0 to $12.65 (depending on the level of Extra Help the member qualifies for).

OTC drugs have a $0 copay.

Cost Shares without Extra Help:

Drug	Your cost-sharing amount
All covered drugs	25% coinsurance

If you have questions, call Enrollee Services at the numbers listed at the bottom of this page.

C. Overview of the *List of Covered Drugs*

The *List of Covered Drugs* gives you information about the drugs covered by UHC Dual Choice DC-Y001. If you have trouble finding your drug in the list, turn to the Index of Covered Drugs that begins in section D. The index alphabetically lists all drugs covered by UHC Dual Choice DC-Y001.

Note: The asterisk (*) at the end of the Drug name in the Drug Name column means the drug isn't a "Part D drug." These drugs have different rules for appeals.

- An appeal is a formal way of asking us to review a decision we made about your coverage and to change it if you think we made a mistake.
- For example, we might decide that a drug that you want isn't covered or is no longer covered by Medicare or Medicaid.
- If you or your prescriber disagrees with our decision, you can appeal. If you ever have a question, call Enrollee Services at the numbers listed at the bottom of this page.
- You can also read **Chapter 9** of the *Enrollee Handbook*to learn how to appeal a decision.

C1. List of Drugs by Medical Condition

The drugs in this section are grouped into categories depending on the type of medical conditions they are used to treat. For example, if you have a heart condition, you should look in the Cardiovascular Agents category. That is where you will find drugs that treat heart conditions.

The first column of the table lists the name of the drug. Generic drugs are listed in lower-case italics (for example, *simvastatin*) and brand name drugs are capitalized (for example, HUMALOG). The information in the "Necessary actions, restrictions, or limits on use" column tells you if UHC Dual Choice DC-Y001 has any rules for covering your drug. OTC drugs and non-drug products are also listed in this table. Generic drugs are in lower-case italics (for example, *aspirin*) and brand name drugs are capitalized (for example, TYLENOL).

Here are the meanings of the codes used in the "Necessary actions, restrictions, or limits on use" column:

PA – Prior authorization
For some drugs, you or your doctor or other prescriber must get authorization from UHC Dual Choice DC-Y001 before you fill your prescription. Prior authorization is different from a referral. UHC Dual Choice DC-Y001 may not cover the drug if you don't get prior authorization.

QL – Quantity limits
Sometimes UHC Dual Choice DC-Y001 limits the amount of a drug you can get.

ST – Step therapy
Sometimes UHC Dual Choice DC-Y001 requires you to do step therapy. This means you'll have to try drugs in a certain order for your medical condition. You might have to try one drug before we'll

This section is continued on the next page.

cover another drug. If your prescriber thinks the first drug doesn't work for you, then we'll cover the second.

B/D – Medicare Part B or Part D
Depending on how this drug is used, it may be covered by either Medicare Part B (doctor and outpatient health care) or Medicare Part D (prescription drugs). Your doctor or prescriber may need to provide the plan with more information about how this drug will be used to make sure it's correctly covered by Medicare.

LA – Limited access
Drugs are considered "limited access" if the FDA says the drug can only be given out by certain facilities, doctors or prescribers. These drugs may require extra handling, provider coordination or patient education that can't be done at a network pharmacy.

MME – Morphine milligram equivalent
Additional quantity limits may apply to all opioid drugs used to treat pain. This additional limit is called a cumulative Morphine Milligram Equivalent (MME). It's designed to monitor safe dosing levels of opioids for people who may be taking more than one opioid drug for pain management. If your doctor or prescriber prescribes more than this amount or thinks the limit isn't right for your situation, you or your doctor or prescriber can ask the plan to cover the additional quantity.

7D – 7-day limit
An opioid drug used to treat pain may be limited to a 7-day supply if you don't have a recent history of using opioids. This limit helps minimize long-term opioid use. If you are new to the plan and have a recent history of using opioids, the pharmacy may override the limit when appropriate.

DL – Dispensing limit
Dispensing limits apply to this drug. This drug is limited to a 1-month supply per prescription.

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
Analgesics		
Analgesics		
8 hour pain tab 650mg (tablet er) *	$0 (OTC)	
8 hr arthrts tab 650mg (tablet er) *	$0 (OTC)	
8 hr pain tab 650mg (tablet er) *	$0 (OTC)	
8hr arthrits tab 650mg er (tablet er) *	$0 (OTC)	
8hr pain er tab 650mg (tablet er) *	$0 (OTC)	
8hr pain rel tab 650mg (tablet er) *	$0 (OTC)	
8hr pain rel tab 650mg er (tablet er) *	$0 (OTC)	
acetamin er tab 650mg (tablet er) *	$0 (OTC)	
acetamin liq 160/5ml (liquid) *	$0 (OTC)	
acetamin liq 500/15ml (liquid) *	$0 (OTC)	
acetamin sup 120mg (suppository) *	$0 (OTC)	
acetamin sup 650mg (suppository) *	$0 (OTC)	
acetamin tab 650mg (tablet er) *	$0 (OTC)	
acetaminophe liq 160/5ml (liquid) *	$0 (OTC)	
acetaminophe tab 160mg (tablet disintegrating) *	$0 (OTC)	
acetaminophe tab 650mg (tablet er) *	$0 (OTC)	
acetaminophe tab 650mg er (tablet er) *	$0 (OTC)	
arthrts pain tab 650mg (tablet er) *	$0 (OTC)	
arthrts pain tab 650mg er (tablet er) *	$0 (OTC)	
eq arthrts tab 650mg (tablet er) *	$0 (OTC)	
feverall sup 120mg (suppository) *	$0 (OTC)	
fevr reducng sup 120mg (suppository) *	$0 (OTC)	
ft 8hr pain tab 650mg (tablet er) *	$0 (OTC)	
hm pain rlf tab 650mg (tablet er) *	$0 (OTC)	
m-pap liq 160/5ml (liquid) *	$0 (OTC)	
non-asa jr tab 160mg qm (tablet disintegrating) *	$0 (OTC)	
pain & fever liq 160/5ml (liquid) *	$0 (OTC)	
pain relief cap 500mg (capsule) *	$0 (OTC)	
pain relief liq 160/5ml (liquid) *	$0 (OTC)	
pain relief liq 500/15ml (liquid) *	$0 (OTC)	
pain relief tab 650mg (tablet er) *	$0 (OTC)	
pain relieve sup 120mg (suppository) *	$0 (OTC)	
pain relieve sup 650mg (suppository) *	$0 (OTC)	
pain relievr liq 500/15ml (liquid) *	$0 (OTC)	

You can find information on what the symbols and abbreviations in this table mean by referring to pages 14 and 15.

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
*pain/fever sup 120mg (suppository)**	$0 (OTC)	
*qc 8 hr pain tab 650mg er (tablet er)**	$0 (OTC)	
*qc apap 8 hr tab 650mg (tablet er)**	$0 (OTC)	
*qc pain reli liq 500/15ml (liquid)**	$0 (OTC)	
Nonsteroidal Anti-inflammatory Drugs		
celecoxib (oral capsule)	Tier 1	QL (60 EA per 30 days)
diclofenac potassium (50mg oral tablet)	Tier 1	
diclofenac sodium (1.5% external solution)	Tier 1	PA
diclofenac sodium (oral tablet delayed release)	Tier 1	
diclofenac sodium er (oral tablet extended release 24 hour)	Tier 1	
diflunisal (oral tablet)	Tier 1	
etodolac (oral capsule)	Tier 1	
etodolac (oral tablet immediate release)	Tier 1	
etodolac er (oral tablet extended release 24 hour)	Tier 1	DL
FLECTOR (EXTERNAL PATCH)	Tier 1	PA; DL; QL (60 EA per 30 days)
flurbiprofen (100mg oral tablet)	Tier 1	
ibu (600mg oral tablet, 800mg oral tablet)	Tier 1	
ibuprofen (100mg/5ml oral suspension)	Tier 1	
ibuprofen (400mg oral tablet, 600mg oral tablet, 800mg oral tablet)	Tier 1	
indomethacin (oral capsule immediate release)	Tier 1	
meloxicam (oral tablet)	Tier 1	
nabumetone (oral tablet)	Tier 1	
naproxen (375mg oral tablet delayed release) (generic ec-naprosyn)	Tier 1	
naproxen (oral tablet immediate release)	Tier 1	
naproxen dr (oral tablet delayed release)	Tier 1	
piroxicam (oral capsule)	Tier 1	
sulindac (oral tablet)	Tier 1	
Opioid Analgesics, Long-acting		
buprenorphine (transdermal patch weekly)	Tier 1	7D; DL; QL (4 EA per 28 days)

You can find information on what the symbols and abbreviations in this table mean by referring to pages 14 and 15.

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
fentanyl (100mcg/hr transdermal patch 72 hour, 12mcg/hr transdermal patch 72 hour, 25mcg/hr transdermal patch 72 hour, 50mcg/hr transdermal patch 72 hour, 75mcg/hr transdermal patch 72 hour)	Tier 1	7D; MME; DL; QL (15 EA per 30 days)
methadone hcl (10mg oral tablet)	Tier 1	7D; MME; DL; QL (360 EA per 30 days)
methadone hcl (10mg/5ml oral solution)	Tier 1	7D; MME; DL; QL (1800 ML per 30 days)
methadone hcl (5mg oral tablet)	Tier 1	7D; MME; DL; QL (240 EA per 30 days)
methadone hcl (5mg/5ml oral solution)	Tier 1	7D; MME; DL; QL (3600 ML per 30 days)
morphine sulfate er (100mg oral tablet extended release, 15mg oral tablet extended release) (generic ms contin)	Tier 1	7D; MME; DL; QL (90 EA per 30 days)
morphine sulfate er (200mg oral tablet extended release) (generic ms contin)	Tier 1	7D; MME; DL; QL (60 EA per 30 days)
morphine sulfate er (30mg oral tablet extended release, 60mg oral tablet extended release) (generic ms contin)	Tier 1	7D; MME; DL; QL (120 EA per 30 days)
XTAMPZA ER (13.5MG ORAL CAPSULE ER 12 HOUR ABUSE-DETERRENT, 18MG ORAL CAPSULE ER 12 HOUR ABUSE-DETERRENT, 9MG ORAL CAPSULE ER 12 HOUR ABUSE-DETERRENT)	Tier 1	7D; MME; DL; QL (90 EA per 30 days)
XTAMPZA ER (27MG ORAL CAPSULE ER 12 HOUR ABUSE-DETERRENT, 36MG ORAL CAPSULE ER 12 HOUR ABUSE-DETERRENT)	Tier 1	7D; MME; DL; QL (180 EA per 30 days)
Opioid Analgesics, Short-acting		
acetaminophen-codeine (120-12mg/5ml oral solution)	Tier 1	7D; MME; DL; QL (4500 ML per 30 days)

You can find information on what the symbols and abbreviations in this table mean by referring to pages 14 and 15.

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
acetaminophen-codeine (300-15mg oral tablet, 300-30mg oral tablet, 300-60mg oral tablet)	Tier 1	7D; MME; DL; QL (390 EA per 30 days)
butalbital-acetaminophen-caffeine (oral tablet)	Tier 1	QL (180 EA per 30 days)
butalbital-aspirin-caffeine (oral capsule)	Tier 1	QL (180 EA per 30 days)
hydrocodone-acetaminophen (10-300mg/15ml oral solution, 7.5-325mg/15ml oral solution)	Tier 1	7D; MME; DL; QL (2700 ML per 30 days)
hydrocodone-acetaminophen (10-325mg oral tablet, 7.5-325mg oral tablet)	Tier 1	7D; MME; DL; QL (180 EA per 30 days)
hydrocodone-acetaminophen (2.5-325mg oral tablet, 5-325mg oral tablet)	Tier 1	7D; MME; DL; QL (240 EA per 30 days)
hydrocodone-ibuprofen (7.5-200mg oral tablet)	Tier 1	7D; MME; DL; QL (150 EA per 30 days)
hydromorphone hcl (2mg oral tablet immediate release, 4mg oral tablet immediate release)	Tier 1	7D; MME; DL; QL (240 EA per 30 days)
hydromorphone hcl (8mg oral tablet immediate release)	Tier 1	7D; MME; DL; QL (180 EA per 30 days)
hydromorphone hcl preservative free (10mg/ml injection solution, 50mg/5ml injection solution)	Tier 1	7D; DL
morphine sulfate (10mg/5ml oral solution)	Tier 1	7D; MME; DL; QL (3000 ML per 30 days)
morphine sulfate (15mg oral tablet immediate release)	Tier 1	7D; MME; DL; QL (240 EA per 30 days)
morphine sulfate (20mg/5ml oral solution)	Tier 1	7D; MME; DL; QL (1500 ML per 30 days)
morphine sulfate (30mg oral tablet immediate release)	Tier 1	7D; MME; DL; QL (180 EA per 30 days)

You can find information on what the symbols and abbreviations in this table mean by referring to pages 14 and 15.

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
morphine sulfate (concentrate) (20mg/ml oral solution)	Tier 1	7D; MME; DL; QL (300 ML per 30 days)
oxycodone hcl (100mg/5ml oral concentrate)	Tier 1	7D; MME; DL; QL (180 ML per 30 days)
oxycodone hcl (10mg oral tablet immediate release, 5mg oral tablet immediate release)	Tier 1	7D; MME; DL; QL (360 EA per 30 days)
oxycodone hcl (15mg oral tablet immediate release)	Tier 1	7D; MME; DL; QL (240 EA per 30 days)
oxycodone hcl (20mg oral tablet immediate release, 30mg oral tablet immediate release)	Tier 1	7D; MME; DL; QL (180 EA per 30 days)
oxycodone hcl (5mg/5ml oral solution)	Tier 1	7D; MME; DL; QL (3900 ML per 30 days)
oxycodone-acetaminophen (10-325mg oral tablet, 2.5-325mg oral tablet, 5-325mg oral tablet, 7.5-325mg oral tablet)	Tier 1	7D; MME; DL; QL (360 EA per 30 days)
tramadol hcl (50mg oral tablet immediate release)	Tier 1	7D; MME; DL; QL (240 EA per 30 days)
Anesthetics		
Local Anesthetics		
lidocaine (5% external ointment)	Tier 1	QL (152 GM per 30 days)
lidocaine (5% external patch)	Tier 1	PA; DL; QL (90 EA per 30 days)
lidocaine hcl (4% external solution)	Tier 1	DL
lidocaine viscous (2% mouth/throat solution)	Tier 1	
lidocaine-prilocaine (external cream)	Tier 1	
Anti-Addiction/Substance Abuse Treatment Agents		
Alcohol Deterrents/Anti-craving		
acamprosate calcium (oral tablet delayed release)	Tier 1	DL
disulfiram (oral tablet)	Tier 1	
naltrexone hcl (oral tablet)	Tier 1	

You can find information on what the symbols and abbreviations in this table mean by referring to pages 14 and 15.

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
VIVITROL (INTRAMUSCULAR SUSPENSION RECONSTITUTED)	Tier 1	DL
Opioid Dependence		
buprenorphine hcl (tablet sublingual)	Tier 1	
buprenorphine hcl-naloxone hcl (sublingual film)	Tier 1	DL
buprenorphine hcl-naloxone hcl (tablet sublingual)	Tier 1	
SUBOXONE (SUBLINGUAL FILM)	Tier 1	DL
Opioid Reversal Agents		
KLOXXADO (NASAL LIQUID)	Tier 1	
naloxone hcl (0.4mg/ml injection solution)	Tier 1	
naloxone hcl (injection solution cartridge)	Tier 1	
naloxone hcl (injection solution prefilled syringe)	Tier 1	
OPVEE (NASAL SOLUTION)	Tier 1	DL
Smoking Cessation Agents		
bupropion hcl sr (150mg oral tablet extended release 12 hour smoking-deterrent)	Tier 1	
NICOTROL NS (NASAL SOLUTION)	Tier 1	DL
varenicline tartrate (continuing month box) (oral tablet)	Tier 1	
varenicline tartrate (oral tablet)	Tier 1	
varenicline tartrate (starter) (oral tablet therapy pack)	Tier 1	
Anti-Constipation Agents		
Gastrointestinal Agents		
*choc laxativ chw 15mg (tablet chewable)**	$0 (OTC)	
*clearlax pow (powder)**	$0 (OTC)	
*cvs laxative chw 15mg (tablet chewable)**	$0 (OTC)	
*cvs laxative tab 25mg (tablet)**	$0 (OTC)	
*cvs purelax pow (powder)**	$0 (OTC)	
*cvs senna cap 8.6mg (capsule)**	$0 (OTC)	
*cvs senna tab 8.6mg (tablet)**	$0 (OTC)	
*eq laxative chw 15mg (tablet chewable)**	$0 (OTC)	
*eq laxative pow 3350 (packet)**	$0 (OTC)	
*eq laxative tab 25mg (tablet)**	$0 (OTC)	
*eq vege laxa tab 8.6mg (tablet)**	$0 (OTC)	

You can find information on what the symbols and abbreviations in this table mean by referring to pages 14 and 15.

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
eql laxative chw 15mg (tablet chewable) *	$0 (OTC)	
eql laxative tab 25mg (tablet) *	$0 (OTC)	
eqvegetable tab 8.6mg (tablet) *	$0 (OTC)	
ft clearlax pow (powder) *	$0 (OTC)	
ft senna lax tab 8.6mg (tablet) *	$0 (OTC)	
gavilax pow (packet, powder) *	$0 (OTC)	
geri-kot tab 8.6mg (tablet) *	$0 (OTC)	
glycolax pow 3350 nf (powder) *	$0 (OTC)	
gnp clearlax pak 3350 (packet) *	$0 (OTC)	
gnp clearlax pow (powder) *	$0 (OTC)	
gnp senna lx tab 8.6mg (tablet) *	$0 (OTC)	
healthylax pow (packet) *	$0 (OTC)	
laxative chw 15mg (tablet chewable) *	$0 (OTC)	
laxative max tab 25mg (tablet) *	$0 (OTC)	
laxative pow osmotic (powder) *	$0 (OTC)	
laxative reg tab 15mg (tablet) *	$0 (OTC)	
laxative tab 25mg (tablet) *	$0 (OTC)	
MIRALAX POW 3350 NF (POWDER)*	$0 (OTC)	
nat veg lax tab 8.6mg (tablet) *	$0 (OTC)	
natura-lax pow 3350 nf (powder) *	$0 (OTC)	
peg 3350 pow (packet, powder) *	$0 (OTC)	
polyeth glyc pow 3350 (packet, powder) *	$0 (OTC)	
polyeth glyc pow 3350 nf (powder) *	$0 (OTC)	
qc vege laxa tab 8.6mg (tablet) *	$0 (OTC)	
sb senna-lax tab 8.6mg (tablet) *	$0 (OTC)	
senna cap 8.6mg (capsule) *	$0 (OTC)	
senna laxati tab 8.6mg (tablet) *	$0 (OTC)	
senna syp 26.4/15 (syrup) *	$0 (OTC)	
senna syp 8.8/5ml (syrup) *	$0 (OTC)	
senna syp 8.8mg/5 (syrup) *	$0 (OTC)	
senna tab 8.6mg (tablet) *	$0 (OTC)	
senna-extra tab 17.2mg (tablet) *	$0 (OTC)	
senna-lax tab 8.6mg (tablet) *	$0 (OTC)	
senna-tabs tab 8.6mg (tablet) *	$0 (OTC)	
senna-time tab 8.6mg (tablet) *	$0 (OTC)	
sennosides tab 8.6mg (tablet) *	$0 (OTC)	

You can find information on what the symbols and abbreviations in this table mean by referring to pages 14 and 15.

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
SENOKOT EXTR TAB 17.2MG (TABLET)*	$0 (OTC)	
SENOKOT TAB 8.6MG (TABLET)*	$0 (OTC)	
Anti-inflammatories, Inhaled Corticosteroids		
Respiratory Tract/Pulmonary Agents		
24 hr nasal spr allergy (aerosol) *	$0 (OTC)	
allergy nasa spr 24hr (aerosol) *	$0 (OTC)	
ft 24 hour spr 55mcg (aerosol) *	$0 (OTC)	
nasal allrgy spr 55mcg/ac (aerosol) *	$0 (OTC)	
triamcinolon aer 55mcg/ac (aerosol) *	$0 (OTC)	
triamcinolon spr 55mcg/ac (aerosol) *	$0 (OTC)	
Antibacterials		
Aminoglycosides		
amikacin sulfate (500mg/2ml injection solution)	Tier 1	DL
ARIKAYCE (INHALATION SUSPENSION)	Tier 1	PA; DL
gentamicin sulfate (40mg/ml injection solution)	Tier 1	DL
gentamicin sulfate-0.9% sodium chloride (intravenous solution)	Tier 1	DL
HUMATIN (ORAL CAPSULE)	Tier 1	DL
neomycin sulfate (oral tablet)	Tier 1	
streptomycin sulfate (intramuscular solution reconstituted)	Tier 1	DL
tobramycin sulfate (10mg/ml injection solution, 80mg/2ml injection solution)	Tier 1	DL
Antibacterials, Other		
aztreonam (injection solution reconstituted)	Tier 1	DL
BLUJEPA (ORAL TABLET)	Tier 1	DL
clindamycin hcl (oral capsule)	Tier 1	
clindamycin palmitate hcl (oral solution reconstituted)	Tier 1	DL
clindamycin phosphate (300mg/2ml injection solution, 600mg/4ml injection solution, 900mg/6ml injection solution)	Tier 1	DL
clindamycin phosphate (vaginal cream)	Tier 1	
clindamycin phosphate in d5w (intravenous solution)	Tier 1	DL
colistimethate sodium (cba) (injection solution reconstituted)	Tier 1	DL

You can find information on what the symbols and abbreviations in this table mean by referring to pages 14 and 15.

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
daptomycin (intravenous solution reconstituted)	Tier 1	DL
fosfomycin tromethamine (oral packet)	Tier 1	DL
linezolid (intravenous solution)	Tier 1	DL
linezolid (oral suspension reconstituted)	Tier 1	DL; QL (1800 ML per 30 days)
linezolid (oral tablet)	Tier 1	DL; QL (60 EA per 30 days)
methenamine hippurate (oral tablet)	Tier 1	
metronidazole (0.75% external cream)	Tier 1	
metronidazole (0.75% external gel)	Tier 1	
metronidazole (0.75% external lotion)	Tier 1	DL
metronidazole (0.75% vaginal gel)	Tier 1	
metronidazole (1% external gel)	Tier 1	DL
metronidazole (250mg oral tablet, 500mg oral tablet)	Tier 1	
metronidazole (500mg/100ml intravenous solution)	Tier 1	DL
nitrofurantoin macrocrystal (100mg oral capsule, 50mg oral capsule) (generic macrodantin)	Tier 1	
nitrofurantoin monohydrate (generic macrobid)	Tier 1	
polymyxin b sulfate (injection solution reconstituted)	Tier 1	DL
tigecycline (intravenous solution reconstituted)	Tier 1	DL
tinidazole (oral tablet)	Tier 1	DL
trimethoprim (oral tablet)	Tier 1	
vancomycin hcl (10gm intravenous solution reconstituted, 1gm intravenous solution reconstituted, 500mg intravenous solution reconstituted, 750mg intravenous solution reconstituted)	Tier 1	DL
vancomycin hcl (125mg oral capsule)	Tier 1	DL; QL (120 EA per 30 days)
vancomycin hcl (250mg oral capsule)	Tier 1	DL; QL (240 EA per 30 days)
XIFAXAN (200MG ORAL TABLET)	Tier 1	PA; DL
XIFAXAN (550MG ORAL TABLET)	Tier 1	PA; DL
Beta-lactam, Cephalosporins		

You can find information on what the symbols and abbreviations in this table mean by referring to pages 14 and 15.

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
cefaclor (oral capsule)	Tier 1	
cefadroxil (oral capsule)	Tier 1	
cefadroxil (oral suspension reconstituted)	Tier 1	
cefazolin sodium (10gm injection solution reconstituted, 1gm injection solution reconstituted, 500mg injection solution reconstituted)	Tier 1	DL
cefdinir (oral capsule)	Tier 1	
cefdinir (oral suspension reconstituted)	Tier 1	
cefepime hcl (2gm intravenous solution reconstituted)	Tier 1	DL
cefepime hcl (injection solution reconstituted)	Tier 1	DL
cefixime (oral capsule)	Tier 1	
cefixime (oral suspension reconstituted)	Tier 1	DL
CEFIXIME (ORAL TABLET)	Tier 1	DL
cefotetan disodium (injection solution reconstituted)	Tier 1	DL
cefoxitin sodium (intravenous solution reconstituted)	Tier 1	DL
cefpodoxime proxetil (oral suspension reconstituted)	Tier 1	DL
cefpodoxime proxetil (oral tablet)	Tier 1	DL
cefprozil (oral suspension reconstituted)	Tier 1	
cefprozil (oral tablet)	Tier 1	
ceftaroline fosamil (intravenous solution reconstituted)	Tier 1	DL
ceftazidime (injection solution reconstituted)	Tier 1	DL
ceftazidime (intravenous solution reconstituted)	Tier 1	DL
ceftriaxone sodium (10gm intravenous solution reconstituted)	Tier 1	DL
ceftriaxone sodium (1gm injection solution reconstituted, 250mg injection solution reconstituted, 2gm injection solution reconstituted, 500mg injection solution reconstituted)	Tier 1	DL
cefuroxime axetil (oral tablet)	Tier 1	

You can find information on what the symbols and abbreviations in this table mean by referring to pages 14 and 15.

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
cefuroxime sodium (injection solution reconstituted)	Tier 1	DL
cefuroxime sodium (intravenous solution reconstituted)	Tier 1	DL
cephalexin (250mg oral capsule, 500mg oral capsule)	Tier 1	
cephalexin (750mg oral capsule)	Tier 1	
cephalexin (oral suspension reconstituted)	Tier 1	
tazicef (2gm intravenous solution reconstituted, 6gm intravenous solution reconstituted)	Tier 1	DL
tazicef (injection solution reconstituted)	Tier 1	DL
Beta-lactam, Penicillins		
amoxicillin (oral capsule)	Tier 1	
amoxicillin (oral suspension reconstituted)	Tier 1	
amoxicillin (oral tablet chewable)	Tier 1	
amoxicillin (oral tablet immediate release)	Tier 1	
amoxicillin-potassium clavulanate (oral suspension reconstituted)	Tier 1	
amoxicillin-potassium clavulanate (oral tablet immediate release)	Tier 1	
amoxicillin-potassium clavulanate er (oral tablet extended release 12 hour)	Tier 1	DL
ampicillin (oral capsule)	Tier 1	
ampicillin sodium (10gm intravenous solution reconstituted)	Tier 1	DL
ampicillin sodium (1gm injection solution reconstituted, 2gm injection solution reconstituted)	Tier 1	DL
ampicillin-sulbactam sodium (15 (10-5)gm intravenous solution reconstituted)	Tier 1	DL
ampicillin-sulbactam sodium (injection solution reconstituted)	Tier 1	DL
BICILLIN C-R (INTRAMUSCULAR SUSPENSION)	Tier 1	DL
BICILLIN C-R 900/300 (INTRAMUSCULAR SUSPENSION)	Tier 1	DL
BICILLIN L-A (INTRAMUSCULAR SUSPENSION PREFILLED SYRINGE)	Tier 1	DL

You can find information on what the symbols and abbreviations in this table mean by referring to pages 14 and 15.

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
dicloxacillin sodium (oral capsule)	Tier 1	
nafcillin sodium (injection solution reconstituted)	Tier 1	DL
nafcillin sodium (intravenous solution reconstituted)	Tier 1	DL
oxacillin sodium (injection solution reconstituted)	Tier 1	DL
oxacillin sodium (intravenous solution reconstituted)	Tier 1	DL
OXACILLIN SODIUM IN DEXTROSE (INTRAVENOUS SOLUTION)	Tier 1	DL
penicillin g potassium (20000000unit injection solution reconstituted)	Tier 1	DL
penicillin g sodium (injection solution reconstituted)	Tier 1	DL
penicillin v potassium (oral solution reconstituted)	Tier 1	
penicillin v potassium (oral tablet)	Tier 1	
piperacillin-tazobactam (2.25 (2-0.25)gm intravenous solution reconstituted, 3.375 (3-0.375)gm intravenous solution reconstituted, 4.5 (4-0.5)gm intravenous solution reconstituted, 40.5 (36-4.5)gm intravenous solution reconstituted)	Tier 1	DL
Carbapenems		
ertapenem sodium (injection solution reconstituted)	Tier 1	DL
imipenem-cilastatin (intravenous solution reconstituted)	Tier 1	DL
meropenem (1gm intravenous solution reconstituted)	Tier 1	DL
meropenem (500mg intravenous solution reconstituted)	Tier 1	
Macrolides		
azithromycin (intravenous solution reconstituted)	Tier 1	DL
azithromycin (oral suspension reconstituted)	Tier 1	
azithromycin (oral tablet)	Tier 1	
clarithromycin (oral suspension reconstituted)	Tier 1	DL
clarithromycin (oral tablet immediate release)	Tier 1	
clarithromycin er (oral tablet extended release 24 hour)	Tier 1	DL

You can find information on what the symbols and abbreviations in this table mean by referring to pages 14 and 15.

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
DIFICID (ORAL TABLET)	Tier 1	DL
erythromycin (oral tablet delayed release)	Tier 1	DL
erythromycin base (oral capsule delayed release particles)	Tier 1	DL
erythromycin base (oral tablet immediate release)	Tier 1	DL
erythromycin ethylsuccinate (200mg/5ml oral suspension reconstituted)	Tier 1	DL
fidaxomicin (oral tablet)	Tier 1	DL
Quinolones		
ciprofloxacin hcl (oral tablet immediate release)	Tier 1	
ciprofloxacin in d5w (200mg/100ml intravenous solution)	Tier 1	DL
levofloxacin (oral solution)	Tier 1	DL
levofloxacin (oral tablet)	Tier 1	
levofloxacin in d5w (500mg/100ml intravenous solution, 750mg/150ml intravenous solution)	Tier 1	DL
moxifloxacin hcl (oral tablet)	Tier 1	
moxifloxacin hcl in nacl (intravenous solution)	Tier 1	DL
ofloxacin (oral tablet)	Tier 1	
Sulfonamides		
sulfadiazine (oral tablet)	Tier 1	DL
sulfamethoxazole-trimethoprim (200-40mg/5ml oral suspension)	Tier 1	
sulfamethoxazole-trimethoprim (oral tablet)	Tier 1	
Tetracyclines		
demeclocycline hcl (oral tablet)	Tier 1	DL
doxy 100 (intravenous solution reconstituted)	Tier 1	DL
doxycycline hyclate (100mg oral capsule, 50mg oral capsule)	Tier 1	
doxycycline hyclate (100mg oral tablet immediate release, 20mg oral tablet immediate release)	Tier 1	
doxycycline hyclate (intravenous solution reconstituted)	Tier 1	DL
doxycycline monohydrate (100mg oral capsule, 50mg oral capsule)	Tier 1	
doxycycline monohydrate (100mg oral tablet, 50mg oral tablet, 75mg oral tablet)	Tier 1	

You can find information on what the symbols and abbreviations in this table mean by referring to pages 14 and 15.

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
doxycycline monohydrate (oral suspension reconstituted)	Tier 1	DL
minocycline hcl (oral capsule)	Tier 1	
minocycline hcl (oral tablet immediate release)	Tier 1	DL
NUZYRA (INTRAVENOUS SOLUTION RECONSTITUTED)	Tier 1	PA; DL
NUZYRA (ORAL TABLET)	Tier 1	PA; DL; QL (30 EA per 14 days)
tetracycline hcl (oral capsule)	Tier 1	DL
Antibacterials, Other		
Antibacterials		
*antib + pain cre relief (cream)**	$0 (OTC)	
*antibiotic + cre pain rlf (cream)**	$0 (OTC)	
*antibiotic oin 500unit (ointment)**	$0 (OTC)	
*bacitracin oin 500/gm (ointment)**	$0 (OTC)	
*cvs antibiot cre pain rel (cream)**	$0 (OTC)	
*double antib oin (ointment)**	$0 (OTC)	
*double oin antibiot (ointment)**	$0 (OTC)	
*ft double oin antibiot (ointment)**	$0 (OTC)	
*multi antibi cre plus (cream)**	$0 (OTC)	
*poly bacitra oin (ointment)**	$0 (OTC)	
*wal-sporin oin (ointment)**	$0 (OTC)	
Anticonvulsants		
Anticonvulsants, Other		
brivaracetam (oral solution)	Tier 1	PA; DL; QL (600 ML per 30 days)
brivaracetam (oral tablet)	Tier 1	PA; DL; QL (60 EA per 30 days)
EPIDIOLEX (ORAL SOLUTION)	Tier 1	PA; DL
EPRONTIA (ORAL SOLUTION)	Tier 1	DL
felbamate (oral suspension)	Tier 1	DL
felbamate (oral tablet)	Tier 1	DL
FINTEPLA (ORAL SOLUTION)	Tier 1	PA; DL; QL (360 ML per 30 days)
FYCOMPA (10MG ORAL TABLET, 12MG ORAL TABLET, 4MG ORAL TABLET, 6MG ORAL TABLET, 8MG ORAL TABLET)	Tier 1	DL; QL (30 EA per 30 days)

You can find information on what the symbols and abbreviations in this table mean by referring to pages 14 and 15.

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
FYCOMPA (2MG ORAL TABLET)	Tier 1	DL; QL (30 EA per 30 days)
FYCOMPA (ORAL SUSPENSION)	Tier 1	DL; QL (720 ML per 30 days)
lamotrigine (100mg oral tablet immediate release, 150mg oral tablet immediate release, 200mg oral tablet immediate release, 25mg oral tablet immediate release)	Tier 1	
lamotrigine (25mg oral tablet chewable, 5mg oral tablet chewable)	Tier 1	
levetiracetam (1000mg oral tablet immediate release, 250mg oral tablet immediate release, 500mg oral tablet immediate release, 750mg oral tablet immediate release)	Tier 1	
levetiracetam (100mg/ml oral solution)	Tier 1	
levetiracetam er (oral tablet extended release 24 hour)	Tier 1	
LEVETIRACETAM ODT (250MG ORAL TABLET DISINTEGRATING SOLUBLE)	Tier 1	DL; QL (60 EA per 30 days)
LEVETIRACETAM ODT (500MG ORAL TABLET DISINTEGRATING SOLUBLE)	Tier 1	DL; QL (180 EA per 30 days)
roweepra (oral tablet immediate release)	Tier 1	
SPRITAM ODT (250MG ORAL TABLET DISINTEGRATING SOLUBLE)	Tier 1	DL; QL (60 EA per 30 days)
SPRITAM ODT (500MG ORAL TABLET DISINTEGRATING SOLUBLE)	Tier 1	DL; QL (180 EA per 30 days)
subvenite (100mg oral tablet, 150mg oral tablet, 200mg oral tablet, 25mg oral tablet)	Tier 1	
SUBVENITE (ORAL SUSPENSION)	Tier 1	DL
topiramate (25mg/ml oral solution)	Tier 1	DL
topiramate (oral capsule sprinkle immediate release)	Tier 1	
topiramate (oral tablet)	Tier 1	
valproic acid (250mg/5ml oral solution)	Tier 1	
valproic acid (oral capsule)	Tier 1	
Calcium Channel Modifying Agents		
ethosuximide (oral capsule)	Tier 1	
ethosuximide (oral solution)	Tier 1	

You can find information on what the symbols and abbreviations in this table mean by referring to pages 14 and 15.

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
methsuximide (oral capsule)	Tier 1	DL
Gamma-aminobutyric Acid (GABA) Modulating Agents		
clobazam (10mg oral tablet, 20mg oral tablet)	Tier 1	PA; DL; QL (60 EA per 30 days)
clobazam (2.5mg/ml oral suspension)	Tier 1	PA; DL; QL (480 ML per 30 days)
DIACOMIT (250MG ORAL CAPSULE)	Tier 1	DL; QL (360 EA per 30 days)
DIACOMIT (250MG ORAL PACKET)	Tier 1	DL; QL (360 EA per 30 days)
DIACOMIT (500MG ORAL CAPSULE)	Tier 1	DL; QL (180 EA per 30 days)
DIACOMIT (500MG ORAL PACKET)	Tier 1	DL; QL (180 EA per 30 days)
diazepam (10mg rectal gel, 2.5mg rectal gel, 20mg rectal gel)	Tier 1	DL; QL (5 EA per 30 days)
gabapentin (100mg oral capsule, 300mg oral capsule, 400mg oral capsule)	Tier 1	
gabapentin (200mg oral capsule)	Tier 1	PA; DL
gabapentin (250mg/5ml oral solution)	Tier 1	
gabapentin (600mg oral tablet, 800mg oral tablet)	Tier 1	
NAYZILAM (NASAL SOLUTION)	Tier 1	PA; DL; QL (10 EA per 30 days)
phenobarbital (20mg/5ml oral elixir)	Tier 1	
phenobarbital (oral tablet)	Tier 1	
primidone (oral tablet)	Tier 1	
SYMPAZAN (10MG ORAL FILM, 20MG ORAL FILM)	Tier 1	PA; DL; QL (60 EA per 30 days)
SYMPAZAN (5MG ORAL FILM)	Tier 1	PA; DL; QL (60 EA per 30 days)
tiagabine hcl (oral tablet)	Tier 1	DL
VALTOCO 10MG DOSE (NASAL LIQUID)	Tier 1	PA; DL; QL (10 EA per 30 days)
VALTOCO 15MG DOSE (NASAL LIQUID THERAPY PACK)	Tier 1	PA; DL; QL (10 EA per 30 days)
VALTOCO 20MG DOSE (NASAL LIQUID THERAPY PACK)	Tier 1	PA; DL; QL (10 EA per 30 days)

You can find information on what the symbols and abbreviations in this table mean by referring to pages 14 and 15.

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
VALTOCO 5MG DOSE (NASAL LIQUID)	Tier 1	PA; DL; QL (10 EA per 30 days)
vigabatrin (oral packet)	Tier 1	PA; DL; QL (180 EA per 30 days)
vigabatrin (oral tablet)	Tier 1	PA; DL; QL (180 EA per 30 days)
VIGAFYDE (ORAL SOLUTION)	Tier 1	PA; DL
ZTALMY (ORAL SUSPENSION)	Tier 1	PA; DL
Sodium Channel Agents		
carbamazepine (100mg/5ml oral suspension)	Tier 1	
carbamazepine (oral tablet chewable)	Tier 1	
carbamazepine (oral tablet immediate release)	Tier 1	
carbamazepine er (oral capsule extended release 12 hour)	Tier 1	
carbamazepine er (oral tablet extended release 12 hour)	Tier 1	
DILANTIN (ORAL CAPSULE)	Tier 1	
DILANTIN INFATABS (ORAL TABLET CHEWABLE)	Tier 1	
eslicarbazepine acetate (200mg oral tablet, 400mg oral tablet)	Tier 1	DL; QL (30 EA per 30 days)
eslicarbazepine acetate (600mg oral tablet, 800mg oral tablet)	Tier 1	DL; QL (60 EA per 30 days)
lacosamide (10mg/ml oral solution)	Tier 1	DL; QL (1200 ML per 30 days)
lacosamide (oral tablet)	Tier 1	DL; QL (60 EA per 30 days)
oxcarbazepine (oral suspension)	Tier 1	DL
oxcarbazepine (oral tablet immediate release)	Tier 1	
phenytek (oral capsule)	Tier 1	
phenytoin (125mg/5ml oral suspension)	Tier 1	
phenytoin (oral tablet chewable)	Tier 1	
phenytoin sodium extended (100mg oral capsule)	Tier 1	
rufinamide (oral suspension)	Tier 1	DL
rufinamide (oral tablet)	Tier 1	DL
XCOPRI (100MG ORAL TABLET, 25MG ORAL TABLET, 50MG ORAL TABLET)	Tier 1	DL; QL (30 EA per 30 days)

You can find information on what the symbols and abbreviations in this table mean by referring to pages 14 and 15.

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
XCOPRI (14 X 12.5MG & 14 X 25MG ORAL TABLET THERAPY PACK)	Tier 1	DL; QL (56 EA per 365 days)
XCOPRI (14 X 150MG & 14 X 200MG ORAL TABLET THERAPY PACK, 14 X 50MG & 14 X 100MG ORAL TABLET THERAPY PACK)	Tier 1	DL; QL (56 EA per 365 days)
XCOPRI (150MG ORAL TABLET, 200MG ORAL TABLET)	Tier 1	DL; QL (60 EA per 30 days)
XCOPRI (250MG DAILY DOSE) (ORAL TABLET THERAPY PACK)	Tier 1	DL; QL (56 EA per 28 days)
XCOPRI (350MG DAILY DOSE) (150MG & 200MG ORAL TABLET THERAPY PACK)	Tier 1	DL; QL (56 EA per 28 days)
ZONISADE (ORAL SUSPENSION)	Tier 1	ST; DL
zonisamide (oral capsule)	Tier 1	
Antidementia Agents		
Antidementia Agents, Other		
memantine hcl-donepezil hcl er (oral capsule extended release 24 hour)	Tier 1	PA; QL (30 EA per 30 days)
Cholinesterase Inhibitors		
donepezil hcl (10mg oral tablet)	Tier 1	QL (60 EA per 30 days)
donepezil hcl (23mg oral tablet, 5mg oral tablet)	Tier 1	QL (30 EA per 30 days)
donepezil hcl odt (10mg oral tablet dispersible)	Tier 1	QL (60 EA per 30 days)
donepezil hcl odt (5mg oral tablet dispersible)	Tier 1	QL (30 EA per 30 days)
galantamine hydrobromide (oral solution)	Tier 1	DL; QL (200 ML per 30 days)
galantamine hydrobromide (oral tablet)	Tier 1	DL; QL (60 EA per 30 days)
galantamine hydrobromide er (oral capsule extended release 24 hour)	Tier 1	DL; QL (30 EA per 30 days)
rivastigmine (transdermal patch 24 hour)	Tier 1	ST; DL; QL (30 EA per 30 days)
rivastigmine tartrate (oral capsule)	Tier 1	QL (60 EA per 30 days)
N-methyl-D-aspartate (NMDA) Receptor Antagonist		

You can find information on what the symbols and abbreviations in this table mean by referring to pages 14 and 15.

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
memantine hcl (10mg oral tablet)	Tier 1	PA; QL (60 EA per 30 days)
memantine hcl (2mg/ml oral solution)	Tier 1	PA; DL; QL (300 ML per 30 days)
memantine hcl (5mg oral tablet)	Tier 1	PA; QL (90 EA per 30 days)
memantine hcl er (oral capsule extended release 24 hour)	Tier 1	PA; QL (30 EA per 30 days)
Antidepressants		
Antidepressants, Other		
AUVELITY (ORAL TABLET EXTENDED RELEASE)	Tier 1	DL
bupropion hcl (oral tablet immediate release)	Tier 1	
bupropion hcl sr (oral tablet extended release 12 hour)	Tier 1	
bupropion hcl xl (150mg oral tablet extended release 24 hour, 300mg oral tablet extended release 24 hour)	Tier 1	
mirtazapine (oral tablet)	Tier 1	
mirtazapine odt (oral tablet dispersible)	Tier 1	
ZURZUVAE (20MG ORAL CAPSULE, 25MG ORAL CAPSULE)	Tier 1	PA; DL; QL (28 EA per 14 days)
ZURZUVAE (30MG ORAL CAPSULE)	Tier 1	PA; DL; QL (14 EA per 14 days)
Monoamine Oxidase Inhibitors		
EMSAM (TRANSDERMAL PATCH 24 HOUR)	Tier 1	DL; QL (30 EA per 30 days)
MARPLAN (ORAL TABLET)	Tier 1	DL
phenelzine sulfate (oral tablet)	Tier 1	
tranylcypromine sulfate (oral tablet)	Tier 1	DL
SSRI/SNRI (Selective Serotonin Reuptake Inhibitors/Serotonin and Norepinephrine Reuptake Inhibitors)		
citalopram hydrobromide (10mg/5ml oral solution)	Tier 1	
citalopram hydrobromide (oral tablet)	Tier 1	
desvenlafaxine succinate er (100mg oral tablet extended release 24 hour) (generic pristiq)	Tier 1	QL (120 EA per 30 days)

You can find information on what the symbols and abbreviations in this table mean by referring to pages 14 and 15.

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
desvenlafaxine succinate er (25mg oral tablet extended release 24 hour, 50mg oral tablet extended release 24 hour) (generic pristiq)	Tier 1	QL (30 EA per 30 days)
escitalopram oxalate (oral solution)	Tier 1	
escitalopram oxalate (oral tablet)	Tier 1	
EXXUA (ORAL TABLET EXTENDED RELEASE 24 HOUR)	Tier 1	DL; QL (30 EA per 30 days)
EXXUA TITRATION PACK (ORAL TABLET EXTENDED RELEASE 24 HOUR)	Tier 1	DL
FETZIMA (ORAL CAPSULE EXTENDED RELEASE 24 HOUR)	Tier 1	ST; DL; QL (30 EA per 30 days)
FETZIMA TITRATION (ORAL CAPSULE ER 24 HOUR THERAPY PACK)	Tier 1	ST; DL; QL (56 EA per 365 days)
fluoxetine hcl (10mg oral capsule immediate release, 20mg oral capsule immediate release, 40mg oral capsule immediate release)	Tier 1	
fluoxetine hcl (10mg oral tablet, 20mg oral tablet, 60mg oral tablet)	Tier 1	
fluoxetine hcl (20mg/5ml oral solution)	Tier 1	
fluoxetine hcl (90mg oral capsule delayed release)	Tier 1	DL
fluvoxamine maleate (oral tablet)	Tier 1	
nefazodone hcl (oral tablet)	Tier 1	DL
paroxetine hcl (10mg oral tablet immediate release, 20mg oral tablet immediate release, 30mg oral tablet immediate release, 40mg oral tablet immediate release)	Tier 1	
paroxetine hcl (10mg/5ml oral suspension)	Tier 1	DL
RALDESY (ORAL SOLUTION)	Tier 1	DL
sertraline hcl (oral concentrate)	Tier 1	DL
sertraline hcl (oral tablet)	Tier 1	
trazodone hcl (100mg oral tablet, 150mg oral tablet, 50mg oral tablet)	Tier 1	
trazodone hcl (300mg oral tablet)	Tier 1	
TRINTELLIX (ORAL TABLET)	Tier 1	DL; QL (30 EA per 30 days)
venlafaxine hcl (oral tablet immediate release)	Tier 1	

You can find information on what the symbols and abbreviations in this table mean by referring to pages 14 and 15.

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
venlafaxine hcl er (oral capsule extended release 24 hour)	Tier 1	
vilazodone hcl (oral tablet)	Tier 1	DL; QL (30 EA per 30 days)
Tricyclics		
amitriptyline hcl (oral tablet)	Tier 1	PA; DL
amoxapine (oral tablet)	Tier 1	PA
clomipramine hcl (oral capsule)	Tier 1	PA; DL
desipramine hcl (oral tablet)	Tier 1	PA; DL
doxepin hcl (oral capsule)	Tier 1	PA; DL
doxepin hcl (oral concentrate)	Tier 1	PA; DL
imipramine hcl (oral tablet)	Tier 1	DL
nortriptyline hcl (oral capsule)	Tier 1	PA; DL
nortriptyline hcl (oral solution)	Tier 1	PA; DL
protriptyline hcl (oral tablet)	Tier 1	DL
trimipramine maleate (oral capsule)	Tier 1	DL
Antiemetics		
Antiemetics, Other		
meclizine hcl (12.5mg oral tablet, 25mg oral tablet)	Tier 1	PA
metoclopramide hcl (5mg/5ml oral solution)	Tier 1	
metoclopramide hcl (oral tablet)	Tier 1	
perphenazine (oral tablet)	Tier 1	PA; DL
prochlorperazine (rectal suppository)	Tier 1	PA; DL
prochlorperazine maleate (oral tablet)	Tier 1	PA
promethazine hcl (12.5mg rectal suppository)	Tier 1	DL; QL (180 EA per 30 days)
promethazine hcl (25mg rectal suppository)	Tier 1	DL; QL (120 EA per 30 days)
promethazine hcl (6.25mg/5ml oral solution)	Tier 1	DL
promethazine hcl (oral tablet)	Tier 1	
scopolamine (transdermal patch 72 hour)	Tier 1	PA; DL
Emetogenic Therapy Adjuncts		
aprepitant (125mg oral capsule)	Tier 1	PA; DL; QL (2 EA per 28 days)

You can find information on what the symbols and abbreviations in this table mean by referring to pages 14 and 15.

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
aprepitant (40mg oral capsule, 80mg oral capsule)	Tier 1	PA; DL; QL (4 EA per 28 days)
aprepitant (oral capsule therapy pack)	Tier 1	PA; DL; QL (6 EA per 28 days)
dronabinol (oral capsule)	Tier 1	PA; DL
granisetron hcl (oral tablet)	Tier 1	B/D, PA; DL; QL (60 EA per 30 days)
ondansetron hcl (4mg oral tablet)	Tier 1	B/D, PA; QL (180 EA per 30 days)
ondansetron hcl (4mg/5ml oral solution)	Tier 1	B/D, PA; DL; QL (900 ML per 30 days)
ondansetron hcl (8mg oral tablet)	Tier 1	B/D, PA; QL (90 EA per 30 days)
ondansetron odt (4mg oral tablet dispersible)	Tier 1	B/D, PA; QL (180 EA per 30 days)
ondansetron odt (8mg oral tablet dispersible)	Tier 1	B/D, PA; QL (90 EA per 30 days)
SANCUSO (TRANSDERMAL PATCH)	Tier 1	DL; QL (4 EA per 28 days)
Antifungals		
Antifungals		
amphotericin b (intravenous solution reconstituted)	Tier 1	B/D, PA; DL
amphotericin b liposome (intravenous suspension reconstituted)	Tier 1	B/D, PA; DL
*anti-fungal cre 1% (cream)**	$0 (OTC)	
*antifungal cre 2% (cream)**	$0 (OTC)	
*antifungal pow 2% (powder)**	$0 (OTC)	
*athlete foot aer 1% (aerosol powder)**	$0 (OTC)	
*athlete foot aer 2% (aerosol, aerosol powder)**	$0 (OTC)	
*athlete foot cre 1% (cream)**	$0 (OTC)	
*athlete foot pow 2% (powder)**	$0 (OTC)	
*athlete foot spr 1% (aerosol)**	$0 (OTC)	
*athletes ft aer 1% pow (aerosol powder)**	$0 (OTC)	
*athletes ft cre 1% (cream)**	$0 (OTC)	
*baza antifun cre 2% (cream)**	$0 (OTC)	

You can find information on what the symbols and abbreviations in this table mean by referring to pages 14 and 15.

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
clotrimazole (mouth/throat troche)	Tier 1	
CRESEMBA (ORAL CAPSULE)	Tier 1	PA; DL
fluconazole (oral suspension reconstituted)	Tier 1	
fluconazole (oral tablet)	Tier 1	
fluconazole in sodium chloride (200-0.9mg/100ml-% intravenous solution, 400-0.9mg/200ml-% intravenous solution)	Tier 1	DL
flucytosine (oral capsule)	Tier 1	PA; DL
*foot&sneaker aer 1% (aerosol powder)**	$0 (OTC)	
*ft antifunga cre 1% (cream)**	$0 (OTC)	
*ft antifunga cre 2% (cream)**	$0 (OTC)	
*fungi-guard cre 1% (cream)**	$0 (OTC)	
griseofulvin microsize (oral suspension)	Tier 1	DL
griseofulvin microsize (oral tablet)	Tier 1	DL
griseofulvin ultramicrosize (125mg oral tablet, 250mg oral tablet)	Tier 1	DL
itraconazole (oral capsule)	Tier 1	PA; DL; QL (120 EA per 30 days)
*jock itch cre 1% (cream)**	$0 (OTC)	
ketoconazole (oral tablet)	Tier 1	
*micaderm cre 2% (cream)**	$0 (OTC)	
micafungin sodium (intravenous solution reconstituted)	Tier 1	DL
miconazole 3 (vaginal suppository)	Tier 1	
*miconazole cre 2% (cream)**	$0 (OTC)	
*miconazole sol 2% (solution)**	$0 (OTC)	
*miconazorb pow af 2% (powder)**	$0 (OTC)	
nystatin (100000unit/ml mouth/throat suspension)	Tier 1	
nystatin (oral tablet)	Tier 1	
*odor control aer powd 1% (aerosol powder)**	$0 (OTC)	
posaconazole (oral suspension)	Tier 1	DL; QL (600 ML per 30 days)
posaconazole (oral tablet delayed release)	Tier 1	PA; DL; QL (180 EA per 30 days)
*qc antifunga cre 1% (cream)**	$0 (OTC)	
*qc ath foot aer 2% (aerosol powder)**	$0 (OTC)	

You can find information on what the symbols and abbreviations in this table mean by referring to pages 14 and 15.

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
*terbinafine cre 1% (cream)**	$0 (OTC)	
terbinafine hcl (oral tablet)	Tier 1	QL (60 EA per 30 days)
terconazole (vaginal cream)	Tier 1	
terconazole (vaginal suppository)	Tier 1	
*tolnaftate aer 1% (aerosol powder)**	$0 (OTC)	
*tolnaftate cre 1% (cream)**	$0 (OTC)	
*tolnaftate pow 1% (powder)**	$0 (OTC)	
voriconazole (200mg oral tablet)	Tier 1	DL; QL (120 EA per 30 days)
voriconazole (50mg oral tablet)	Tier 1	DL; QL (480 EA per 30 days)
voriconazole (intravenous solution reconstituted)	Tier 1	PA; DL
voriconazole (oral suspension reconstituted)	Tier 1	DL; QL (600 ML per 30 days)
Antigout Agents		
Antigout Agents		
allopurinol (100mg oral tablet, 300mg oral tablet)	Tier 1	
colchicine (0.6mg oral tablet) (generic colcrys)	Tier 1	QL (120 EA per 30 days)
colchicine-probenecid (oral tablet)	Tier 1	
febuxostat (oral tablet)	Tier 1	ST
probenecid (oral tablet)	Tier 1	
Antihistamines		
Respiratory Tract/Pulmonary Agents		
*12hr allergy tab 60mg (tablet)**	$0 (OTC)	
*24hr allergy tab 180mg (tablet)**	$0 (OTC)	
*aler-cap cap 25mg (capsule)**	$0 (OTC)	
*alertab tab 25mg (tablet)**	$0 (OTC)	
*all day allg cap 10mg (capsule)**	$0 (OTC)	
*all day allg tab 10mg (tablet)**	$0 (OTC)	
*all day alrg tab 5-120mg (tablet er 12hr)**	$0 (OTC)	
*allergy 24hr tab 10mg (tablet)**	$0 (OTC)	
*allergy 24hr tab 180mg (tablet)**	$0 (OTC)	
*allergy cap 25mg (capsule)**	$0 (OTC)	
*allergy chil chw 12.5mg (tablet chewable)**	$0 (OTC)	

You can find information on what the symbols and abbreviations in this table mean by referring to pages 14 and 15.

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
allergy chld liq 12.5/5ml (liquid) *	$0 (OTC)	
allergy chld sol 5mg/5ml (solution) *	$0 (OTC)	
allergy d tab 5-120mg (tablet er 12hr) *	$0 (OTC)	
allergy d tab 60-120mg (tablet er 12hr) *	$0 (OTC)	
allergy med liq 12.5/5ml (liquid) *	$0 (OTC)	
allergy rel cap 10mg (capsule) *	$0 (OTC)	
allergy rel cap 25mg (capsule) *	$0 (OTC)	
allergy relf cap 10mg (capsule) *	$0 (OTC)	
allergy relf cap 25mg (capsule) *	$0 (OTC)	
allergy relf liq 12.5/5ml (liquid) *	$0 (OTC)	
allergy relf liq 25/10ml (liquid) *	$0 (OTC)	
allergy relf liq 50/20ml (liquid) *	$0 (OTC)	
allergy relf sol 5mg/5ml (solution, syrup) *	$0 (OTC)	
allergy relf tab 10mg (tablet, tablet disintegrating) *	$0 (OTC)	
allergy relf tab 12mg cr (tablet er) *	$0 (OTC)	
allergy relf tab 180mg (tablet) *	$0 (OTC)	
allergy relf tab 25mg (tablet) *	$0 (OTC)	
allergy relf tab 4mg (tablet) *	$0 (OTC)	
allergy relf tab 5-120mg (tablet er 12hr) *	$0 (OTC)	
allergy relf tab 5mg (tablet) *	$0 (OTC)	
allergy relf tab 60mg (tablet) *	$0 (OTC)	
allergy reli tab 60-120mg (tablet er 12hr) *	$0 (OTC)	
allergy reli tab d (tablet er 24hr) *	$0 (OTC)	
allergy rlf chw 5mg (tablet chewable) *	$0 (OTC)	
allergy rlf liq 50/20ml (liquid) *	$0 (OTC)	
allergy tab 10mg (tablet) *	$0 (OTC)	
allergy tab 180mg (tablet) *	$0 (OTC)	
allergy tab 4mg (tablet) *	$0 (OTC)	
allergy-d tab 12 hour (tablet er 12hr) *	$0 (OTC)	
allergy-d tab 5-120mg (tablet er 12hr) *	$0 (OTC)	
allrgy relf tab 5-120mg (tablet er 12hr) *	$0 (OTC)	
alrgy & hive tab 180mg (tablet) *	$0 (OTC)	
alrgy/cong-d tab 60-120mg (tablet er 12hr) *	$0 (OTC)	
antihistamin cap 25mg (capsule) *	$0 (OTC)	
cetiriz/pse tab 5-120mg (tablet er 12hr) *	$0 (OTC)	

You can find information on what the symbols and abbreviations in this table mean by referring to pages 14 and 15.

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
*cetirizine chw 10mg (tablet chewable)**	$0 (OTC)	
*cetirizine chw 5mg (tablet chewable)**	$0 (OTC)	
*cetirizine tab 10mg (tablet)**	$0 (OTC)	
*cetirizine tab 5mg (tablet)**	$0 (OTC)	
*chld allergy liq 12.5/5ml (liquid)**	$0 (OTC)	
*chlor-phenir tab 4mg (tablet)**	$0 (OTC)	
*chlorhist tab 4mg (tablet)**	$0 (OTC)	
*chlorphen tab 4mg (tablet)**	$0 (OTC)	
*chlorphenir tab 12mg cr (tablet er)**	$0 (OTC)	
*chlorphenir tab 4mg (tablet)**	$0 (OTC)	
CLARITIN RDT TAB 5MG (TABLET DISINTEGRATING)*	$0 (OTC)	
*comp allergy tab 25mg (tablet)**	$0 (OTC)	
*cvs allerg d tab 60-120mg (tablet er 12hr)**	$0 (OTC)	
*cvs allergy cap 25mg (capsule)**	$0 (OTC)	
*cvs allergy liq 25/10ml (liquid)**	$0 (OTC)	
*cvs allergy sol 5mg/5ml (solution)**	$0 (OTC)	
*cvs allergy tab 10mg (tablet)**	$0 (OTC)	
*cvs allergy tab 180mg (tablet)**	$0 (OTC)	
*cvs allergy tab 5-120mg (tablet er 12hr)**	$0 (OTC)	
*cvs allergy tab 5mg (tablet disintegrating)**	$0 (OTC)	
*diphen tab 25mg (tablet)**	$0 (OTC)	
*diphenhydram cap 25mg (capsule)**	$0 (OTC)	
*diphenhydram cap 50mg (capsule)**	$0 (OTC)	
*diphenhydram liq 12.5/5ml (liquid)**	$0 (OTC)	
*diphenhydram liq 25/10ml (liquid)**	$0 (OTC)	
*diphenhydram tab 25mg (tablet)**	$0 (OTC)	
*eq allerg d tab 60-120mg (tablet er 12hr)**	$0 (OTC)	
*eq allergy cap 25mg (capsule)**	$0 (OTC)	
*eq allergy sol 5mg/5ml (solution)**	$0 (OTC)	
*eq allergy tab 4mg (tablet)**	$0 (OTC)	
*eq alrgy rel tab 180mg (tablet)**	$0 (OTC)	
*eq loratadin tab 10mg (tablet disintegrating)**	$0 (OTC)	
*eql allergy tab 25mg (tablet)**	$0 (OTC)	
*eql allergy tab 4mg (tablet)**	$0 (OTC)	
*fexofen/pse tab 180-240 (tablet er 24hr)**	$0 (OTC)	

You can find information on what the symbols and abbreviations in this table mean by referring to pages 14 and 15.

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
*fexofen/pse tab 60-120mg (tablet er 12hr)**	$0 (OTC)	
*fexofenadine tab 180mg (tablet)**	$0 (OTC)	
*fexofenadine tab 60mg (tablet)**	$0 (OTC)	
*ft allergy tab 10mg (tablet)**	$0 (OTC)	
*ft allr rlf tab 60mg (tablet)**	$0 (OTC)	
*ft alrgy rlf cap 25mg (capsule)**	$0 (OTC)	
*ft alrgy rlf liq 12.5/5ml (liquid)**	$0 (OTC)	
*ft alrgy rlf tab 180mg (tablet)**	$0 (OTC)	
*ft alrgy rlf tab 25mg (tablet)**	$0 (OTC)	
*ft alrgy rlf tab 4mg (tablet)**	$0 (OTC)	
*ft alrgy&con tab 60-120mg (tablet er 12hr)**	$0 (OTC)	
*geri-dryl liq 12.5/5ml (liquid)**	$0 (OTC)	
*geri-dryl tab 25mg (tablet)**	$0 (OTC)	
*gnp all day tab allergy (tablet)**	$0 (OTC)	
*gnp allergy cap 25mg (capsule)**	$0 (OTC)	
*gnp allergy chw 12.5mg (tablet chewable)**	$0 (OTC)	
*gnp allergy tab 25mg (tablet)**	$0 (OTC)	
*gnp allergy tab 4mg (tablet)**	$0 (OTC)	
*kls allergy tab 25mg (tablet)**	$0 (OTC)	
*liquid aller liq 12.5/5ml (liquid)**	$0 (OTC)	
*loradamed tab 10mg (tablet)**	$0 (OTC)	
*loratadine cap 10mg (capsule)**	$0 (OTC)	
*loratadine chw 5mg (tablet chewable)**	$0 (OTC)	
*loratadine sol 5mg/5ml (solution)**	$0 (OTC)	
*loratadine tab 10mg (tablet, tablet disintegrating)**	$0 (OTC)	
*m-dryl liq 12.5/5ml (liquid)**	$0 (OTC)	
*medi-phedryl cap 25mg (capsule)**	$0 (OTC)	
*mm fexofenad tab 180mg (tablet)**	$0 (OTC)	
PEDIACLEARPD LIQ 0.625/ML (LIQUID)*	$0 (OTC)	
*pharbechlor tab 4mg (tablet)**	$0 (OTC)	
*pharbedryl cap 25mg (capsule)**	$0 (OTC)	
*pharbedryl cap 50mg (capsule)**	$0 (OTC)	
*qc all day cap 10mg (capsule)**	$0 (OTC)	
*qc allergy cap 25mg (capsule)**	$0 (OTC)	
*qc allergy cap relief (capsule)**	$0 (OTC)	

You can find information on what the symbols and abbreviations in this table mean by referring to pages 14 and 15.

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
*qc allergy tab 25mg (tablet)**	$0 (OTC)	
*qc allergy tab 4mg (tablet)**	$0 (OTC)	
*sb allergy tab 10mg (tablet)**	$0 (OTC)	
*sb allergy tab 25mg (tablet)**	$0 (OTC)	
*siladryl alr liq 12.5/5ml (liquid)**	$0 (OTC)	
*sm allergy tab 60mg (tablet)**	$0 (OTC)	
*sm loratadin tab 10mg (tablet)**	$0 (OTC)	
*total allerg tab 25mg (tablet)**	$0 (OTC)	
*triprolidine dro 0.938mg (liquid)**	$0 (OTC)	
Antimigraine Agents		
Calcitonin Gene-Related Peptide (CGRP) Receptor Antagonists		
AIMOVIG (SUBCUTANEOUS SOLUTION AUTO-INJECTOR)	Tier 1	PA; QL (1 ML per 28 days)
EMGALITY (120MG/ML SUBCUTANEOUS SOLUTION PREFILLED SYRINGE)	Tier 1	PA; QL (2 ML per 28 days)
EMGALITY (300MG DOSE) (100MG/ML SUBCUTANEOUS SOLUTION PREFILLED SYRINGE)	Tier 1	PA; DL; QL (3 ML per 28 days)
EMGALITY (SUBCUTANEOUS SOLUTION AUTO-INJECTOR)	Tier 1	PA; QL (2 ML per 28 days)
NURTEC ODT (ORAL TABLET DISPERSIBLE)	Tier 1	PA; DL; QL (18 EA per 30 days)
QULIPTA (ORAL TABLET)	Tier 1	PA; DL; QL (30 EA per 30 days)
UBRELVY (ORAL TABLET)	Tier 1	PA; DL; QL (16 EA per 30 days)
Ergot Alkaloids		
dihydroergotamine mesylate (nasal solution)	Tier 1	DL; QL (16 ML per 28 days)
ergotamine-caffeine (oral tablet)	Tier 1	
Prophylactic		
timolol maleate (oral tablet)	Tier 1	
Serotonin (5-HT) Receptor Agonist		
naratriptan hcl (oral tablet)	Tier 1	QL (12 EA per 30 days)
rizatriptan benzoate (oral tablet)	Tier 1	QL (12 EA per 30 days)

You can find information on what the symbols and abbreviations in this table mean by referring to pages 14 and 15.

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
rizatriptan benzoate odt (oral tablet dispersible)	Tier 1	QL (12 EA per 30 days)
sumatriptan (nasal solution)	Tier 1	DL; QL (12 EA per 30 days)
sumatriptan succinate (6mg/0.5ml subcutaneous solution auto-injector)	Tier 1	DL; QL (6 ML per 30 days)
sumatriptan succinate (oral tablet)	Tier 1	QL (12 EA per 30 days)
sumatriptan succinate (subcutaneous solution)	Tier 1	DL; QL (6 ML per 30 days)
Antimyasthenic Agents		
Parasympathomimetics		
pyridostigmine bromide (60mg oral tablet immediate release)	Tier 1	
pyridostigmine bromide er (oral tablet extended release)	Tier 1	DL
Antimycobacterials		
Antimycobacterials, Other		
dapsone (oral tablet)	Tier 1	
rifabutin (oral capsule)	Tier 1	DL
Antituberculars		
cycloserine (oral capsule)	Tier 1	DL
ethambutol hcl (oral tablet)	Tier 1	
isoniazid (oral syrup)	Tier 1	DL
isoniazid (oral tablet)	Tier 1	
pyrazinamide (oral tablet)	Tier 1	DL
rifampin (intravenous solution reconstituted)	Tier 1	DL
rifampin (oral capsule)	Tier 1	
rifapentine (oral tablet)	Tier 1	DL
SIRTURO (ORAL TABLET)	Tier 1	PA; DL
Antineoplastics		
Alkylating Agents		
cyclophosphamide (25mg oral capsule, 50mg oral capsule)	Tier 1	B/D, PA
CYCLOPHOSPHAMIDE (50MG ORAL TABLET)	Tier 1	B/D, PA
GLEOSTINE (100MG ORAL CAPSULE)	Tier 1	DL

You can find information on what the symbols and abbreviations in this table mean by referring to pages 14 and 15.

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
GLEOSTINE (10MG ORAL CAPSULE, 40MG ORAL CAPSULE)	Tier 1	DL
LEUKERAN (ORAL TABLET)	Tier 1	DL
lomustine (100mg oral capsule)	Tier 1	DL
lomustine (10mg oral capsule, 40mg oral capsule)	Tier 1	DL
MATULANE (ORAL CAPSULE)	Tier 1	DL
VALCHLOR (EXTERNAL GEL)	Tier 1	PA; DL; QL (60 GM per 30 days)
Antiandrogens		
abiraterone acetate (250mg oral tablet)	Tier 1	DL; QL (120 EA per 30 days)
abiraterone acetate (500mg oral tablet)	Tier 1	DL; QL (60 EA per 30 days)
abirtega (oral tablet)	Tier 1	DL; QL (120 EA per 30 days)
bicalutamide (oral tablet)	Tier 1	
ERLEADA (240MG ORAL TABLET)	Tier 1	PA; DL; QL (30 EA per 30 days)
ERLEADA (60MG ORAL TABLET)	Tier 1	PA; DL; QL (120 EA per 30 days)
EULEXIN (ORAL CAPSULE)	Tier 1	DL
nilutamide (oral tablet)	Tier 1	DL
NUBEQA (ORAL TABLET)	Tier 1	PA; DL; QL (120 EA per 30 days)
XTANDI (40MG ORAL TABLET)	Tier 1	PA; DL; QL (120 EA per 30 days)
XTANDI (80MG ORAL TABLET)	Tier 1	PA; DL; QL (60 EA per 30 days)
XTANDI (ORAL CAPSULE)	Tier 1	PA; DL; QL (120 EA per 30 days)
Antiangiogenic Agents		
lenalidomide (oral capsule)	Tier 1	PA; DL; QL (30 EA per 30 days)
pomalidomide (oral capsule)	Tier 1	PA; DL; QL (30 EA per 30 days)
THALOMID (100MG ORAL CAPSULE)	Tier 1	PA; DL; QL (112 EA per 28 days)

You can find information on what the symbols and abbreviations in this table mean by referring to pages 14 and 15.

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
THALOMID (50MG ORAL CAPSULE)	Tier 1	PA; DL; QL (84 EA per 28 days)
Antiestrogens/Modifiers		
INLURIYO (ORAL TABLET)	Tier 1	PA; DL; QL (90 EA per 30 days)
ORSERDU (345MG ORAL TABLET)	Tier 1	PA; DL; QL (30 EA per 30 days)
ORSERDU (86MG ORAL TABLET)	Tier 1	PA; DL; QL (90 EA per 30 days)
SOLTAMOX (ORAL SOLUTION)	Tier 1	DL
tamoxifen citrate (oral tablet)	Tier 1	
toremifene citrate (oral tablet)	Tier 1	DL
Antimetabolites		
hydroxyurea (oral capsule)	Tier 1	
mercaptopurine (oral suspension)	Tier 1	PA; DL
mercaptopurine (oral tablet)	Tier 1	
ONUREG (ORAL TABLET)	Tier 1	PA; DL; QL (14 EA per 28 days)
TABLOID (ORAL TABLET)	Tier 1	PA; DL
Antineoplastics, Other		
AKEEGA (ORAL TABLET)	Tier 1	PA; DL; QL (60 EA per 30 days)
INQOVI (ORAL TABLET)	Tier 1	PA; DL; QL (5 EA per 28 days)
IWILFIN (ORAL TABLET)	Tier 1	PA; DL; QL (240 EA per 30 days)
KOMZIFTI (ORAL CAPSULE)	Tier 1	PA; DL; QL (90 EA per 30 days)
LAZCLUZE (240MG ORAL TABLET)	Tier 1	PA; DL; QL (30 EA per 30 days)
LAZCLUZE (80MG ORAL TABLET)	Tier 1	PA; DL; QL (60 EA per 30 days)
LONSURF (15-6.14MG ORAL TABLET)	Tier 1	PA; DL; QL (300 EA per 30 days)
LONSURF (20-8.19MG ORAL TABLET)	Tier 1	PA; DL; QL (240 EA per 30 days)
LYSODREN (ORAL TABLET)	Tier 1	DL

You can find information on what the symbols and abbreviations in this table mean by referring to pages 14 and 15.

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
MODEYSO (ORAL CAPSULE)	Tier 1	PA; DL; QL (20 EA per 28 days)
OGSIVEO (100MG ORAL TABLET, 150MG ORAL TABLET)	Tier 1	PA; DL; QL (60 EA per 30 days)
ORGOVYX (ORAL TABLET)	Tier 1	PA; DL; QL (30 EA per 28 days)
REVUFORJ (110MG ORAL TABLET)	Tier 1	PA; DL; QL (120 EA per 30 days)
REVUFORJ (160MG ORAL TABLET)	Tier 1	PA; DL; QL (60 EA per 30 days)
REVUFORJ (25MG ORAL TABLET)	Tier 1	PA; DL; QL (240 EA per 30 days)
VONJO (ORAL CAPSULE)	Tier 1	PA; DL; QL (120 EA per 30 days)
ZENBEXUS (ORAL CAPSULE)	Tier 1	PA; DL; QL (21 EA per 28 days)
ZOLINZA (ORAL CAPSULE)	Tier 1	PA; DL
Aromatase Inhibitors, 3rd Generation		
anastrozole (oral tablet)	Tier 1	
exemestane (oral tablet)	Tier 1	DL
letrozole (oral tablet)	Tier 1	
Enzyme Inhibitors		
AVMAPKI FAKZYNJA CO-PACK (ORAL THERAPY PACK)	Tier 1	PA; DL; QL (66 EA per 28 days)
Molecular Target Inhibitors		
ALECENSA (ORAL CAPSULE)	Tier 1	PA; DL; QL (240 EA per 30 days)
ALUNBRIG (180MG ORAL TABLET, 90MG ORAL TABLET)	Tier 1	PA; DL; QL (30 EA per 30 days)
ALUNBRIG (30MG ORAL TABLET)	Tier 1	PA; DL; QL (120 EA per 30 days)
ALUNBRIG (ORAL TABLET THERAPY PACK)	Tier 1	PA; DL; QL (60 EA per 365 days)
AUGTYRO (160MG ORAL CAPSULE)	Tier 1	PA; DL; QL (60 EA per 30 days)
AUGTYRO (40MG ORAL CAPSULE)	Tier 1	PA; DL; QL (240 EA per 30 days)

You can find information on what the symbols and abbreviations in this table mean by referring to pages 14 and 15.

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
AYVAKIT (ORAL TABLET)	Tier 1	PA; DL; QL (30 EA per 30 days)
BALVERSA (3MG ORAL TABLET)	Tier 1	PA; DL; QL (84 EA per 28 days)
BALVERSA (4MG ORAL TABLET)	Tier 1	PA; DL; QL (56 EA per 28 days)
BALVERSA (5MG ORAL TABLET)	Tier 1	PA; DL; QL (28 EA per 28 days)
BOSULIF (100MG ORAL CAPSULE)	Tier 1	PA; DL; QL (180 EA per 30 days)
BOSULIF (100MG ORAL TABLET)	Tier 1	PA; DL; QL (180 EA per 30 days)
BOSULIF (400MG ORAL TABLET, 500MG ORAL TABLET)	Tier 1	PA; DL; QL (30 EA per 30 days)
BOSULIF (50MG ORAL CAPSULE)	Tier 1	PA; DL; QL (330 EA per 30 days)
bosutinib (400mg oral tablet)	Tier 1	PA; DL; QL (30 EA per 30 days)
BRAFTOVI (ORAL CAPSULE)	Tier 1	PA; DL
BRUKINSA (ORAL TABLET)	Tier 1	PA; DL; QL (60 EA per 30 days)
CABOMETYX (20MG ORAL TABLET, 60MG ORAL TABLET)	Tier 1	PA; DL; QL (30 EA per 30 days)
CABOMETYX (40MG ORAL TABLET)	Tier 1	PA; DL; QL (60 EA per 30 days)
CALQUENCE (ORAL TABLET)	Tier 1	PA; DL; QL (60 EA per 30 days)
CAPRELSA (ORAL TABLET)	Tier 1	PA; DL
COMETRIQ (100MG DAILY DOSE) (ORAL KIT)	Tier 1	PA; DL; QL (56 EA per 28 days)
COMETRIQ (140MG DAILY DOSE) (ORAL KIT)	Tier 1	PA; DL; QL (112 EA per 28 days)
COMETRIQ (60MG DAILY DOSE) (ORAL KIT)	Tier 1	PA; DL; QL (84 EA per 28 days)
COPIKTRA (ORAL CAPSULE)	Tier 1	PA; DL; QL (56 EA per 28 days)
COTELLIC (ORAL TABLET)	Tier 1	PA; DL; QL (63 EA per 21 days)

You can find information on what the symbols and abbreviations in this table mean by referring to pages 14 and 15.

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
DANZITEN (ORAL TABLET)	Tier 1	PA; DL; QL (120 EA per 30 days)
dasatinib (100mg oral tablet, 140mg oral tablet, 70mg oral tablet)	Tier 1	PA; DL; QL (30 EA per 30 days)
dasatinib (20mg oral tablet, 50mg oral tablet)	Tier 1	PA; DL; QL (90 EA per 30 days)
dasatinib (80mg oral tablet)	Tier 1	PA; DL; QL (60 EA per 30 days)
DAURISMO (100MG ORAL TABLET)	Tier 1	PA; DL; QL (30 EA per 30 days)
DAURISMO (25MG ORAL TABLET)	Tier 1	PA; DL; QL (60 EA per 30 days)
ENSACOVE (100MG ORAL CAPSULE)	Tier 1	PA; DL; QL (60 EA per 30 days)
ENSACOVE (25MG ORAL CAPSULE)	Tier 1	PA; DL; QL (270 EA per 30 days)
ERIVEDGE (ORAL CAPSULE)	Tier 1	PA; DL
erlotinib hcl (100mg oral tablet, 150mg oral tablet)	Tier 1	PA; DL; QL (30 EA per 30 days)
erlotinib hcl (25mg oral tablet)	Tier 1	PA; DL; QL (90 EA per 30 days)
everolimus (10mg oral tablet, 2.5mg oral tablet, 5mg oral tablet, 7.5mg oral tablet)	Tier 1	PA; DL
everolimus (oral tablet soluble)	Tier 1	PA; DL
FOTIVDA (ORAL CAPSULE)	Tier 1	PA; DL; QL (21 EA per 28 days)
FRUZAQLA (1MG ORAL CAPSULE)	Tier 1	PA; DL; QL (84 EA per 28 days)
FRUZAQLA (5MG ORAL CAPSULE)	Tier 1	PA; DL; QL (21 EA per 28 days)
GAVRETO (ORAL CAPSULE)	Tier 1	PA; DL; QL (120 EA per 30 days)
gefitinib (oral tablet)	Tier 1	PA; DL; QL (60 EA per 30 days)
GILOTRIF (ORAL TABLET)	Tier 1	PA; DL
GOMEKLI (1MG ORAL CAPSULE)	Tier 1	PA; DL; QL (126 EA per 28 days)

You can find information on what the symbols and abbreviations in this table mean by referring to pages 14 and 15.

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
GOMEKLI (2MG ORAL CAPSULE)	Tier 1	PA; DL; QL (84 EA per 28 days)
GOMEKLI (ORAL TABLET SOLUBLE)	Tier 1	PA; DL; QL (168 EA per 28 days)
HERNEXEOS (ORAL TABLET)	Tier 1	PA; DL; QL (180 EA per 30 days)
HYRNUO (ORAL TABLET)	Tier 1	PA; DL; QL (120 EA per 30 days)
IBRANCE (125MG ORAL CAPSULE)	Tier 1	PA; DL; QL (21 EA per 21 days)
IBRANCE (ORAL TABLET)	Tier 1	PA; DL; QL (21 EA per 21 days)
IBTROZI (ORAL CAPSULE)	Tier 1	PA; DL; QL (90 EA per 30 days)
ICLUSIG (ORAL TABLET)	Tier 1	PA; DL; QL (30 EA per 30 days)
IDHIFA (ORAL TABLET)	Tier 1	PA; DL; QL (30 EA per 30 days)
imatinib mesylate (oral tablet)	Tier 1	QL (90 EA per 30 days)
IMBRUVICA (140MG ORAL CAPSULE)	Tier 1	PA; DL; QL (90 EA per 30 days)
IMBRUVICA (70MG ORAL CAPSULE)	Tier 1	PA; DL; QL (28 EA per 28 days)
IMBRUVICA (ORAL SUSPENSION)	Tier 1	PA; DL; QL (240 ML per 30 days)
IMBRUVICA (ORAL TABLET)	Tier 1	PA; DL; QL (28 EA per 28 days)
IMKELDI (ORAL SOLUTION)	Tier 1	PA; DL; QL (300 ML per 30 days)
INLYTA (ORAL TABLET)	Tier 1	PA; DL; QL (120 EA per 30 days)
INREBIC (ORAL CAPSULE)	Tier 1	PA; DL; QL (120 EA per 30 days)
ITOVEBI (3MG ORAL TABLET)	Tier 1	PA; DL; QL (60 EA per 30 days)
ITOVEBI (9MG ORAL TABLET)	Tier 1	PA; DL; QL (30 EA per 30 days)

You can find information on what the symbols and abbreviations in this table mean by referring to pages 14 and 15.

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
JAKAFI (ORAL TABLET)	Tier 1	PA; DL; QL (60 EA per 30 days)
JAKAFI XR (ORAL TABLET EXTENDED RELEASE 24 HOUR)	Tier 1	PA; DL; QL (30 EA per 30 days)
JAYPIRCA (100MG ORAL TABLET)	Tier 1	PA; DL; QL (90 EA per 30 days)
JAYPIRCA (50MG ORAL TABLET)	Tier 1	PA; DL; QL (30 EA per 30 days)
JIDEYTRO (100MG ORAL TABLET)	Tier 1	PA; DL; QL (30 EA per 30 days)
JIDEYTRO (25MG ORAL TABLET)	Tier 1	PA; DL; QL (90 EA per 30 days)
KISQALI (200MG DOSE) (ORAL TABLET)	Tier 1	PA; DL; QL (21 EA per 21 days)
KISQALI (400MG DOSE) (ORAL TABLET)	Tier 1	PA; DL; QL (42 EA per 21 days)
KISQALI (600MG DOSE) (ORAL TABLET)	Tier 1	PA; DL; QL (63 EA per 21 days)
KOSELUGO (10MG ORAL CAPSULE)	Tier 1	PA; DL; QL (240 EA per 30 days)
KOSELUGO (25MG ORAL CAPSULE)	Tier 1	PA; DL; QL (120 EA per 30 days)
KOSELUGO (5MG ORAL CAPSULE SPRINKLE)	Tier 1	PA; DL; QL (600 EA per 30 days)
KOSELUGO (7.5MG ORAL CAPSULE SPRINKLE)	Tier 1	PA; DL; QL (360 EA per 30 days)
KRAZATI (ORAL TABLET)	Tier 1	PA; DL; QL (180 EA per 30 days)
lapatinib ditosylate (oral tablet)	Tier 1	PA; DL
LENVIMA 10MG DAILY DOSE (ORAL CAPSULE THERAPY PACK)	Tier 1	PA; DL
LENVIMA 12MG DAILY DOSE (ORAL CAPSULE THERAPY PACK)	Tier 1	PA; DL
LENVIMA 14MG DAILY DOSE (ORAL CAPSULE THERAPY PACK)	Tier 1	PA; DL
LENVIMA 18MG DAILY DOSE (ORAL CAPSULE THERAPY PACK)	Tier 1	PA; DL

You can find information on what the symbols and abbreviations in this table mean by referring to pages 14 and 15.

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
LENVIMA 20MG DAILY DOSE (ORAL CAPSULE THERAPY PACK)	Tier 1	PA; DL
LENVIMA 24MG DAILY DOSE (ORAL CAPSULE THERAPY PACK)	Tier 1	PA; DL
LENVIMA 4MG DAILY DOSE (ORAL CAPSULE THERAPY PACK)	Tier 1	PA; DL
LENVIMA 8MG DAILY DOSE (ORAL CAPSULE THERAPY PACK)	Tier 1	PA; DL
LIFYORLI (125MG DOSE) (ORAL CAPSULE THERAPY PACK)	Tier 1	PA; DL; QL (18 EA per 28 days)
LIFYORLI (150MG DOSE) (ORAL CAPSULE THERAPY PACK)	Tier 1	PA; DL; QL (27 EA per 28 days)
LORBRENA (100MG ORAL TABLET)	Tier 1	PA; DL; QL (30 EA per 30 days)
LORBRENA (25MG ORAL TABLET)	Tier 1	PA; DL; QL (90 EA per 30 days)
LUMAKRAS (120MG ORAL TABLET)	Tier 1	PA; DL; QL (240 EA per 30 days)
LUMAKRAS (240MG ORAL TABLET)	Tier 1	PA; DL; QL (120 EA per 30 days)
LUMAKRAS (320MG ORAL TABLET)	Tier 1	PA; DL; QL (90 EA per 30 days)
LYNPARZA (ORAL TABLET)	Tier 1	PA; DL; QL (120 EA per 30 days)
LYTGOBI (12MG DAILY DOSE) (ORAL TABLET THERAPY PACK)	Tier 1	PA; DL; QL (84 EA per 28 days)
LYTGOBI (16MG DAILY DOSE) (ORAL TABLET THERAPY PACK)	Tier 1	PA; DL; QL (112 EA per 28 days)
LYTGOBI (20MG DAILY DOSE) (ORAL TABLET THERAPY PACK)	Tier 1	PA; DL; QL (140 EA per 28 days)
MEKINIST (ORAL SOLUTION RECONSTITUTED)	Tier 1	PA; DL
MEKINIST (ORAL TABLET)	Tier 1	PA; DL
MEKTOVI (ORAL TABLET)	Tier 1	PA; DL
NERLYNX (ORAL TABLET)	Tier 1	PA; DL; QL (180 EA per 30 days)
nilotinib hcl (150mg oral capsule)	Tier 1	PA; DL; QL (140 EA per 28 days)

You can find information on what the symbols and abbreviations in this table mean by referring to pages 14 and 15.

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
nilotinib hcl (200mg oral capsule)	Tier 1	PA; DL; QL (112 EA per 28 days)
nilotinib hcl (50mg oral capsule)	Tier 1	PA; DL; QL (420 EA per 30 days)
NINLARO (ORAL CAPSULE)	Tier 1	PA; DL; QL (3 EA per 28 days)
ODOMZO (ORAL CAPSULE)	Tier 1	PA; DL
OJEMDA (ORAL SUSPENSION RECONSTITUTED)	Tier 1	PA; DL; QL (96 ML per 28 days)
OJEMDA (ORAL TABLET)	Tier 1	PA; DL; QL (24 EA per 28 days)
OJJAARA (ORAL TABLET)	Tier 1	PA; DL; QL (30 EA per 30 days)
pazopanib hcl (200mg oral tablet)	Tier 1	PA; DL; QL (120 EA per 30 days)
PEMAZYRE (ORAL TABLET)	Tier 1	PA; DL; QL (14 EA per 21 days)
PHYRAGO (100MG ORAL TABLET, 140MG ORAL TABLET, 70MG ORAL TABLET)	Tier 1	PA; DL; QL (30 EA per 30 days)
PHYRAGO (20MG ORAL TABLET, 50MG ORAL TABLET)	Tier 1	PA; DL; QL (90 EA per 30 days)
PHYRAGO (80MG ORAL TABLET)	Tier 1	PA; DL; QL (60 EA per 30 days)
PIQRAY (200MG DAILY DOSE) (ORAL TABLET THERAPY PACK)	Tier 1	PA; DL; QL (28 EA per 28 days)
PIQRAY (250MG DAILY DOSE) (ORAL TABLET THERAPY PACK)	Tier 1	PA; DL; QL (56 EA per 28 days)
PIQRAY (300MG DAILY DOSE) (ORAL TABLET THERAPY PACK)	Tier 1	PA; DL; QL (56 EA per 28 days)
QINLOCK (ORAL TABLET)	Tier 1	PA; DL; QL (90 EA per 30 days)
RETEVMO (120MG ORAL TABLET, 160MG ORAL TABLET, 80MG ORAL TABLET)	Tier 1	PA; DL; QL (60 EA per 30 days)
RETEVMO (40MG ORAL TABLET)	Tier 1	PA; DL; QL (90 EA per 30 days)
REZLIDHIA (ORAL CAPSULE)	Tier 1	PA; DL; QL (60 EA per 30 days)

You can find information on what the symbols and abbreviations in this table mean by referring to pages 14 and 15.

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
ROMVIMZA (ORAL CAPSULE)	Tier 1	PA; DL; QL (8 EA per 28 days)
ROZLYTREK (100MG ORAL CAPSULE)	Tier 1	PA; DL; QL (150 EA per 30 days)
ROZLYTREK (200MG ORAL CAPSULE)	Tier 1	PA; DL; QL (90 EA per 30 days)
ROZLYTREK (ORAL PACKET)	Tier 1	PA; DL; QL (360 EA per 30 days)
RUBRACA (ORAL TABLET)	Tier 1	PA; DL; QL (120 EA per 30 days)
RYDAPT (ORAL CAPSULE)	Tier 1	PA; DL; QL (224 EA per 28 days)
SCEMBLIX (100MG ORAL TABLET)	Tier 1	PA; DL; QL (120 EA per 30 days)
SCEMBLIX (20MG ORAL TABLET)	Tier 1	PA; DL; QL (60 EA per 30 days)
SCEMBLIX (40MG ORAL TABLET)	Tier 1	PA; DL; QL (240 EA per 30 days)
sorafenib tosylate (oral tablet)	Tier 1	PA; DL
STIVARGA (ORAL TABLET)	Tier 1	PA; DL; QL (84 EA per 21 days)
sunitinib malate (12.5mg oral capsule, 25mg oral capsule, 50mg oral capsule)	Tier 1	PA; DL; QL (28 EA per 28 days)
sunitinib malate (37.5mg oral capsule)	Tier 1	PA; DL; QL (56 EA per 28 days)
TABRECTA (ORAL TABLET)	Tier 1	PA; DL; QL (112 EA per 28 days)
TAFINLAR (ORAL CAPSULE)	Tier 1	PA; DL
TAFINLAR (ORAL TABLET SOLUBLE)	Tier 1	PA; DL
TAGRISSO (ORAL TABLET)	Tier 1	PA; DL; QL (30 EA per 30 days)
TALZENNA (0.1MG ORAL CAPSULE, 0.35MG ORAL CAPSULE, 0.5MG ORAL CAPSULE, 0.75MG ORAL CAPSULE, 1MG ORAL CAPSULE)	Tier 1	PA; DL; QL (30 EA per 30 days)
TALZENNA (0.25MG ORAL CAPSULE)	Tier 1	PA; DL; QL (90 EA per 30 days)

You can find information on what the symbols and abbreviations in this table mean by referring to pages 14 and 15.

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
TEPMETKO (ORAL TABLET)	Tier 1	PA; DL; QL (60 EA per 30 days)
TIBSOVO (ORAL TABLET)	Tier 1	PA; DL; QL (60 EA per 30 days)
torpenz (oral tablet)	Tier 1	PA; DL
TRUQAP (160MG ORAL TABLET THERAPY PACK)	Tier 1	PA; DL; QL (64 EA per 28 days)
TRUQAP (200MG ORAL TABLET)	Tier 1	PA; DL; QL (64 EA per 28 days)
TUKYSA (150MG ORAL TABLET)	Tier 1	PA; DL; QL (120 EA per 30 days)
TUKYSA (50MG ORAL TABLET)	Tier 1	PA; DL; QL (360 EA per 30 days)
TURALIO (ORAL CAPSULE)	Tier 1	PA; DL; QL (120 EA per 30 days)
VANFLYTA (ORAL TABLET)	Tier 1	PA; DL; QL (60 EA per 30 days)
VENCLEXTA (100MG ORAL TABLET)	Tier 1	PA; DL; QL (180 EA per 30 days)
VENCLEXTA (10MG ORAL TABLET)	Tier 1	PA; DL; QL (14 EA per 7 days)
VENCLEXTA (50MG ORAL TABLET)	Tier 1	PA; DL; QL (7 EA per 7 days)
VENCLEXTA STARTING PACK (ORAL TABLET THERAPY PACK)	Tier 1	PA; DL; QL (84 EA per 365 days)
VERZENIO (ORAL TABLET)	Tier 1	PA; DL; QL (56 EA per 28 days)
VITRAKVI (100MG ORAL CAPSULE)	Tier 1	PA; DL; QL (120 EA per 30 days)
VITRAKVI (25MG ORAL CAPSULE)	Tier 1	PA; DL; QL (180 EA per 30 days)
VITRAKVI (ORAL SOLUTION)	Tier 1	PA; DL; QL (600 ML per 30 days)
VORANIGO (10MG ORAL TABLET)	Tier 1	PA; DL; QL (60 EA per 30 days)
VORANIGO (40MG ORAL TABLET)	Tier 1	PA; DL; QL (30 EA per 30 days)
XALKORI (ORAL CAPSULE SPRINKLE)	Tier 1	PA; DL

You can find information on what the symbols and abbreviations in this table mean by referring to pages 14 and 15.

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
XALKORI (ORAL CAPSULE)	Tier 1	PA; DL
XOSPATA (ORAL TABLET)	Tier 1	PA; DL; QL (90 EA per 30 days)
XPOVIO (100MG ONCE WEEKLY) (ORAL TABLET THERAPY PACK)	Tier 1	PA; DL; QL (8 EA per 28 days)
XPOVIO (40MG ONCE WEEKLY) (40MG ORAL TABLET THERAPY PACK)	Tier 1	PA; DL; QL (16 EA per 28 days)
XPOVIO (40MG TWICE WEEKLY) (40MG ORAL TABLET THERAPY PACK)	Tier 1	PA; DL; QL (8 EA per 28 days)
XPOVIO (60MG ONCE WEEKLY) (ORAL TABLET THERAPY PACK)	Tier 1	PA; DL; QL (4 EA per 28 days)
XPOVIO (60MG TWICE WEEKLY) (ORAL TABLET THERAPY PACK)	Tier 1	PA; DL; QL (24 EA per 28 days)
XPOVIO (80MG ONCE WEEKLY) (40MG ORAL TABLET THERAPY PACK)	Tier 1	PA; DL; QL (8 EA per 28 days)
XPOVIO (80MG ONCE WEEKLY) (80MG ORAL TABLET THERAPY PACK)	Tier 1	PA; DL; QL (4 EA per 28 days)
XPOVIO (80MG TWICE WEEKLY) (ORAL TABLET THERAPY PACK)	Tier 1	PA; DL; QL (32 EA per 28 days)
yulithira (oral tablet)	Tier 1	PA; DL
ZEJULA (ORAL TABLET)	Tier 1	PA; DL; QL (30 EA per 30 days)
ZELBORAF (ORAL TABLET)	Tier 1	PA; DL
ZYKADIA (ORAL TABLET)	Tier 1	PA; DL; QL (84 EA per 28 days)
Retinoids		
bexarotene (external gel)	Tier 1	PA; DL; QL (60 GM per 30 days)
bexarotene (oral capsule)	Tier 1	PA; DL
PANRETIN (EXTERNAL GEL)	Tier 1	PA; DL
tretinoin (oral capsule)	Tier 1	DL
Treatment Adjuncts		
leucovorin calcium (10mg oral tablet, 15mg oral tablet, 5mg oral tablet)	Tier 1	
leucovorin calcium (25mg oral tablet)	Tier 1	DL
mesna (oral tablet)	Tier 1	DL
Antiparasitics		

You can find information on what the symbols and abbreviations in this table mean by referring to pages 14 and 15.

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
Anthelmintics		
albendazole (oral tablet)	Tier 1	DL; QL (480 EA per 30 days)
ivermectin (3mg oral tablet)	Tier 1	PA
praziquantel (oral tablet)	Tier 1	DL
Antiprotozoals		
atovaquone (oral suspension)	Tier 1	DL; QL (420 ML per 30 days)
atovaquone-proguanil hcl (oral tablet)	Tier 1	
chloroquine phosphate (oral tablet)	Tier 1	DL; QL (60 EA per 30 days)
COARTEM (ORAL TABLET)	Tier 1	DL
hydroxychloroquine sulfate (200mg oral tablet)	Tier 1	QL (120 EA per 30 days)
mefloquine hcl (oral tablet)	Tier 1	
nitazoxanide (oral tablet)	Tier 1	DL; QL (60 EA per 30 days)
pentamidine isethionate (inhalation solution reconstituted)	Tier 1	B/D, PA; DL; QL (1 EA per 28 days)
pentamidine isethionate (injection solution reconstituted)	Tier 1	DL
primaquine phosphate (oral tablet)	Tier 1	DL
pyrimethamine (oral tablet)	Tier 1	DL
quinine sulfate (oral capsule)	Tier 1	PA; DL
Antiparkinson Agents		
Anticholinergics		
benztropine mesylate (oral tablet)	Tier 1	PA
trihexyphenidyl hcl (oral solution)	Tier 1	PA
trihexyphenidyl hcl (oral tablet)	Tier 1	PA
Antiparkinson Agents, Other		
amantadine hcl (50mg/5ml oral solution)	Tier 1	
amantadine hcl (oral capsule)	Tier 1	
amantadine hcl (oral tablet)	Tier 1	
carbidopa-levodopa-entacapone (oral tablet)	Tier 1	DL
entacapone (oral tablet)	Tier 1	DL
Dopamine Agonists		

You can find information on what the symbols and abbreviations in this table mean by referring to pages 14 and 15.

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
NEUPRO (TRANSDERMAL PATCH 24 HOUR)	Tier 1	DL
pramipexole dihydrochloride (oral tablet immediate release)	Tier 1	
ropinirole hcl (oral tablet immediate release)	Tier 1	
Dopamine Precursors and/or L-Amino Acid Decarboxylase Inhibitors		
carbidopa (oral tablet)	Tier 1	DL
carbidopa-levodopa (oral tablet immediate release)	Tier 1	
carbidopa-levodopa er (oral tablet extended release)	Tier 1	
carbidopa-levodopa odt (oral tablet dispersible)	Tier 1	
INBRIJA (INHALATION CAPSULE)	Tier 1	PA; DL
Monoamine Oxidase B (MAO-B) Inhibitors		
rasagiline mesylate (oral tablet)	Tier 1	DL
selegiline hcl (oral capsule)	Tier 1	
selegiline hcl (oral tablet)	Tier 1	
Antipsychotics		
1st Generation/Typical		
chlorpromazine hcl (oral concentrate)	Tier 1	PA; DL
chlorpromazine hcl (oral tablet)	Tier 1	PA; DL
fluphenazine decanoate (injection solution)	Tier 1	DL
fluphenazine hcl (10mg oral tablet, 1mg oral tablet, 2.5mg oral tablet, 5mg oral tablet)	Tier 1	
fluphenazine hcl (2.5mg/5ml oral elixir)	Tier 1	DL
fluphenazine hcl (2.5mg/ml injection solution)	Tier 1	DL
fluphenazine hcl (5mg/ml oral concentrate)	Tier 1	
haloperidol (oral tablet)	Tier 1	
haloperidol decanoate (intramuscular solution)	Tier 1	DL
haloperidol lactate (2mg/ml oral concentrate)	Tier 1	
haloperidol lactate (injection solution)	Tier 1	DL
loxapine succinate (oral capsule)	Tier 1	
molindone hcl (10mg oral tablet, 25mg oral tablet)	Tier 1	DL
molindone hcl (5mg oral tablet)	Tier 1	DL
pimozide (oral tablet)	Tier 1	DL
thioridazine hcl (oral tablet)	Tier 1	

You can find information on what the symbols and abbreviations in this table mean by referring to pages 14 and 15.

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
thiothixene (oral capsule)	Tier 1	
trifluoperazine hcl (oral tablet)	Tier 1	
2nd Generation/Atypical		
CAPLYTA (ORAL CAPSULE)	Tier 1	DL; QL (30 EA per 30 days)
FANAPT (10MG ORAL TABLET, 12MG ORAL TABLET, 1MG ORAL TABLET, 2MG ORAL TABLET, 4MG ORAL TABLET, 6MG ORAL TABLET, 8MG ORAL TABLET)	Tier 1	ST; DL; QL (60 EA per 30 days)
FANAPT TITRATION PACK A (ORAL TABLET)	Tier 1	ST; DL; QL (16 EA per 365 days)
FANAPT TITRATION PACK B (ORAL TABLET)	Tier 1	ST; DL; QL (24 EA per 365 days)
FANAPT TITRATION PACK C (ORAL TABLET)	Tier 1	ST; DL; QL (16 EA per 365 days)
INVEGA HAFYERA (INTRAMUSCULAR SUSPENSION PREFILLED SYRINGE)	Tier 1	DL
INVEGA SUSTENNA (117MG/0.75ML INTRAMUSCULAR SUSPENSION PREFILLED SYRINGE, 156MG/ML INTRAMUSCULAR SUSPENSION PREFILLED SYRINGE, 234MG/1.5ML INTRAMUSCULAR SUSPENSION PREFILLED SYRINGE, 78MG/0.5ML INTRAMUSCULAR SUSPENSION PREFILLED SYRINGE)	Tier 1	DL
INVEGA SUSTENNA (39MG/0.25ML INTRAMUSCULAR SUSPENSION PREFILLED SYRINGE)	Tier 1	DL
INVEGA TRINZA (INTRAMUSCULAR SUSPENSION PREFILLED SYRINGE)	Tier 1	DL
NUPLAZID (ORAL CAPSULE)	Tier 1	PA; DL; QL (30 EA per 30 days)
NUPLAZID (ORAL TABLET)	Tier 1	PA; DL; QL (30 EA per 30 days)
paliperidone er (1.5mg oral tablet extended release 24 hour, 3mg oral tablet extended release 24 hour, 9mg oral tablet extended release 24 hour)	Tier 1	DL; QL (30 EA per 30 days)
paliperidone er (6mg oral tablet extended release 24 hour)	Tier 1	DL; QL (60 EA per 30 days)

You can find information on what the symbols and abbreviations in this table mean by referring to pages 14 and 15.

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
REXULTI (ORAL TABLET)	Tier 1	DL; QL (30 EA per 30 days)
VRAYLAR (ORAL CAPSULE)	Tier 1	DL; QL (30 EA per 30 days)
Treatment-Resistant		
clozapine (100mg oral tablet, 200mg oral tablet, 25mg oral tablet, 50mg oral tablet)	Tier 1	PA
clozapine odt (100mg oral tablet dispersible)	Tier 1	PA; DL; QL (270 EA per 30 days)
clozapine odt (12.5mg oral tablet dispersible)	Tier 1	PA; DL; QL (60 EA per 30 days)
clozapine odt (150mg oral tablet dispersible)	Tier 1	PA; DL; QL (180 EA per 30 days)
clozapine odt (200mg oral tablet dispersible)	Tier 1	PA; DL; QL (120 EA per 30 days)
clozapine odt (25mg oral tablet dispersible)	Tier 1	PA; DL; QL (90 EA per 30 days)
VERSACLOZ (ORAL SUSPENSION)	Tier 1	PA; DL
Antispasticity Agents		
Antispasticity Agents		
baclofen (10mg oral tablet, 20mg oral tablet, 5mg oral tablet)	Tier 1	
dantrolene sodium (oral capsule)	Tier 1	DL
tizanidine hcl (oral tablet)	Tier 1	
Antivirals		
Anti-cytomegalovirus (CMV) Agents		
LIVTENCITY (ORAL TABLET)	Tier 1	PA; DL; QL (360 EA per 30 days)
PREVYMIS (ORAL PACKET)	Tier 1	PA; DL; QL (120 EA per 30 days)
PREVYMIS (ORAL TABLET)	Tier 1	PA; DL; QL (28 EA per 28 days)
valganciclovir hcl (oral solution reconstituted)	Tier 1	DL; QL (1080 ML per 30 days)
valganciclovir hcl (oral tablet)	Tier 1	QL (120 EA per 30 days)
ZIRGAN (OPHTHALMIC GEL)	Tier 1	DL

You can find information on what the symbols and abbreviations in this table mean by referring to pages 14 and 15.

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
Anti-hepatitis B (HBV) Agents		
adefovir dipivoxil (oral tablet)	Tier 1	DL
BARACLUDE (ORAL SOLUTION)	Tier 1	DL
entecavir (oral tablet)	Tier 1	DL
lamivudine (100mg oral tablet)	Tier 1	
VEMLIDY (ORAL TABLET)	Tier 1	DL; QL (30 EA per 30 days)
Anti-hepatitis C (HCV) Agents		
MAVYRET (ORAL PACKET)	Tier 1	PA; DL; QL (140 EA per 28 days)
MAVYRET (ORAL TABLET)	Tier 1	PA; DL; QL (84 EA per 28 days)
ribavirin (oral tablet)	Tier 1	
SOFOSBUVIR-VELPATASVIR (ORAL TABLET)	Tier 1	PA; DL; QL (28 EA per 28 days)
VOSEVI (ORAL TABLET)	Tier 1	PA; DL; QL (28 EA per 28 days)
Anti-HIV Agents, Integrase Inhibitors (INSTI)		
BIKTARVY (ORAL TABLET)	Tier 1	DL; QL (30 EA per 30 days)
DOVATO (ORAL TABLET)	Tier 1	DL; QL (30 EA per 30 days)
GENVOYA (ORAL TABLET)	Tier 1	DL; QL (30 EA per 30 days)
ISENTRESS (100MG ORAL TABLET CHEWABLE)	Tier 1	DL; QL (180 EA per 30 days)
ISENTRESS (25MG ORAL TABLET CHEWABLE)	Tier 1	QL (180 EA per 30 days)
ISENTRESS (ORAL PACKET)	Tier 1	DL; QL (60 EA per 30 days)
ISENTRESS (ORAL TABLET)	Tier 1	DL; QL (60 EA per 30 days)
ISENTRESS HD (ORAL TABLET)	Tier 1	DL; QL (60 EA per 30 days)
JULUCA (ORAL TABLET)	Tier 1	DL; QL (30 EA per 30 days)
STRIBILD (ORAL TABLET)	Tier 1	DL; QL (30 EA per 30 days)

You can find information on what the symbols and abbreviations in this table mean by referring to pages 14 and 15.

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
TIVICAY (ORAL TABLET)	Tier 1	DL; QL (60 EA per 30 days)
TIVICAY PD (ORAL TABLET SOLUBLE)	Tier 1	DL; QL (180 EA per 30 days)
Anti-HIV Agents, Non-nucleoside Reverse Transcriptase Inhibitors (NNRTI)		
COMPLERA (ORAL TABLET)	Tier 1	DL; QL (30 EA per 30 days)
DELSTRIGO (ORAL TABLET)	Tier 1	DL; QL (30 EA per 30 days)
EDURANT (ORAL TABLET)	Tier 1	DL; QL (30 EA per 30 days)
EDURANT PED (ORAL TABLET SOLUBLE)	Tier 1	DL; QL (180 EA per 30 days)
efavirenz (oral tablet)	Tier 1	DL; QL (30 EA per 30 days)
efavirenz-emtricitabine-tenofovir (oral tablet)	Tier 1	DL; QL (30 EA per 30 days)
efavirenz-lamivudine-tenofovir (oral tablet)	Tier 1	DL; QL (30 EA per 30 days)
emtricitabine-rilpivirine-tenofovir df (oral tablet)	Tier 1	DL; QL (30 EA per 30 days)
etravirine (oral tablet)	Tier 1	DL; QL (60 EA per 30 days)
INTELENCE (25MG ORAL TABLET)	Tier 1	DL; QL (120 EA per 30 days)
nevirapine (oral suspension)	Tier 1	DL; QL (1200 ML per 30 days)
nevirapine (oral tablet immediate release)	Tier 1	QL (60 EA per 30 days)
nevirapine er (oral tablet extended release 24 hour)	Tier 1	DL; QL (30 EA per 30 days)
PIFELTRO (ORAL TABLET)	Tier 1	DL; QL (30 EA per 30 days)
rilpivirine hcl (oral tablet)	Tier 1	DL; QL (30 EA per 30 days)
Anti-HIV Agents, Nucleoside and Nucleotide Reverse Transcriptase Inhibitors (NRTI)		
abacavir sulfate (oral solution)	Tier 1	DL; QL (960 ML per 30 days)

You can find information on what the symbols and abbreviations in this table mean by referring to pages 14 and 15.

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
abacavir sulfate (oral tablet)	Tier 1	DL; QL (60 EA per 30 days)
abacavir sulfate-lamivudine (oral tablet)	Tier 1	DL; QL (30 EA per 30 days)
CIMDUO (ORAL TABLET)	Tier 1	DL; QL (30 EA per 30 days)
DESCOVY (ORAL TABLET)	Tier 1	DL; QL (30 EA per 30 days)
emtricitabine (oral capsule)	Tier 1	DL; QL (30 EA per 30 days)
emtricitabine-tenofovir disoproxil fumarate (oral tablet)	Tier 1	DL; QL (30 EA per 30 days)
EMTRIVA (ORAL SOLUTION)	Tier 1	DL; QL (850 ML per 30 days)
lamivudine (10mg/ml oral solution)	Tier 1	QL (960 ML per 30 days)
lamivudine (150mg oral tablet)	Tier 1	QL (60 EA per 30 days)
lamivudine (300mg oral tablet)	Tier 1	QL (30 EA per 30 days)
lamivudine-zidovudine (oral tablet)	Tier 1	DL; QL (60 EA per 30 days)
ODEFSEY (ORAL TABLET)	Tier 1	DL; QL (30 EA per 30 days)
tenofovir disoproxil fumarate (oral tablet)	Tier 1	DL; QL (30 EA per 30 days)
TRIUMEQ (ORAL TABLET)	Tier 1	DL; QL (30 EA per 30 days)
TRIUMEQ PD (ORAL TABLET SOLUBLE)	Tier 1	DL; QL (180 EA per 30 days)
VIREAD (150MG ORAL TABLET, 200MG ORAL TABLET, 250MG ORAL TABLET)	Tier 1	DL; QL (30 EA per 30 days)
VIREAD (ORAL POWDER)	Tier 1	DL; QL (240 GM per 30 days)
zidovudine (oral capsule)	Tier 1	QL (180 EA per 30 days)
zidovudine (oral syrup)	Tier 1	QL (1920 ML per 30 days)

You can find information on what the symbols and abbreviations in this table mean by referring to pages 14 and 15.

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
zidovudine (oral tablet)	Tier 1	QL (60 EA per 30 days)
Anti-HIV Agents, Other		
IDVYNSO (ORAL TABLET)	Tier 1	DL; QL (30 EA per 30 days)
maraviroc (150mg oral tablet)	Tier 1	DL; QL (60 EA per 30 days)
maraviroc (300mg oral tablet)	Tier 1	DL; QL (120 EA per 30 days)
RUKOBIA (ORAL TABLET EXTENDED RELEASE 12 HOUR)	Tier 1	DL; QL (60 EA per 30 days)
SUNLENCA (4 X 300MG ORAL TABLET THERAPY PACK)	Tier 1	DL; QL (8 EA per 365 days)
SUNLENCA (5 X 300MG ORAL TABLET THERAPY PACK)	Tier 1	DL; QL (10 EA per 365 days)
SUNLENCA (ORAL TABLET)	Tier 1	DL; QL (24 EA per 168 days)
Anti-HIV Agents, Protease Inhibitors		
APTIVUS (ORAL CAPSULE)	Tier 1	DL; QL (120 EA per 30 days)
atazanavir sulfate (150mg oral capsule, 300mg oral capsule)	Tier 1	DL; QL (30 EA per 30 days)
atazanavir sulfate (200mg oral capsule)	Tier 1	DL; QL (60 EA per 30 days)
darunavir (600mg oral tablet)	Tier 1	DL; QL (60 EA per 30 days)
darunavir (800mg oral tablet)	Tier 1	DL; QL (30 EA per 30 days)
EVOTAZ (ORAL TABLET)	Tier 1	DL; QL (30 EA per 30 days)
fosamprenavir calcium (oral tablet)	Tier 1	DL; QL (120 EA per 30 days)
lopinavir-ritonavir (100-25mg oral tablet)	Tier 1	DL; QL (240 EA per 30 days)
lopinavir-ritonavir (200-50mg oral tablet)	Tier 1	DL; QL (120 EA per 30 days)
PREZCOBIX (ORAL TABLET)	Tier 1	DL; QL (30 EA per 30 days)

You can find information on what the symbols and abbreviations in this table mean by referring to pages 14 and 15.

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
PREZISTA (150MG ORAL TABLET)	Tier 1	DL; QL (180 EA per 30 days)
PREZISTA (75MG ORAL TABLET)	Tier 1	DL; QL (300 EA per 30 days)
PREZISTA (ORAL SUSPENSION)	Tier 1	DL; QL (400 ML per 30 days)
REYATAZ (ORAL PACKET)	Tier 1	DL; QL (180 EA per 30 days)
ritonavir (oral tablet)	Tier 1	QL (360 EA per 30 days)
SYMTUZA (ORAL TABLET)	Tier 1	DL; QL (30 EA per 30 days)
VIRACEPT (250MG ORAL TABLET)	Tier 1	DL; QL (300 EA per 30 days)
VIRACEPT (625MG ORAL TABLET)	Tier 1	DL; QL (120 EA per 30 days)
Anti-influenza Agents		
oseltamivir phosphate (oral capsule)	Tier 1	QL (60 EA per 30 days)
oseltamivir phosphate (oral suspension reconstituted)	Tier 1	QL (780 ML per 30 days)
RELENZA DISKHALER (INHALATION AEROSOL POWDER BREATH ACTIVATED)	Tier 1	QL (60 EA per 30 days)
rimantadine hcl (oral tablet)	Tier 1	DL
XOFLUZA (40MG DOSE) (ORAL TABLET THERAPY PACK)	Tier 1	QL (2 EA per 30 days)
XOFLUZA (80MG DOSE) (ORAL TABLET THERAPY PACK)	Tier 1	QL (1 EA per 30 days)
Antiherpetic Agents		
acyclovir (200mg/5ml oral suspension)	Tier 1	
acyclovir (external ointment)	Tier 1	DL; QL (30 GM per 30 days)
acyclovir (oral capsule)	Tier 1	
acyclovir (oral tablet)	Tier 1	
acyclovir sodium (intravenous solution)	Tier 1	B/D, PA; DL
famciclovir (125mg oral tablet, 250mg oral tablet)	Tier 1	QL (60 EA per 30 days)

You can find information on what the symbols and abbreviations in this table mean by referring to pages 14 and 15.

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
famciclovir (500mg oral tablet)	Tier 1	QL (90 EA per 30 days)
valacyclovir hcl (1gm oral tablet)	Tier 1	QL (120 EA per 30 days)
valacyclovir hcl (500mg oral tablet)	Tier 1	QL (60 EA per 30 days)
Antiviral, Coronavirus Agents		
LAGEVRIO (ORAL CAPSULE)	Tier 1	QL (40 EA per 5 days)
PAXLOVID (150/100MG) (ORAL TABLET THERAPY PACK)	Tier 1	DL; QL (20 EA per 5 days)
PAXLOVID (300/100MG & 150/100MG) (ORAL TABLET THERAPY PACK)	Tier 1	DL; QL (11 EA per 5 days)
PAXLOVID (300/100MG) (ORAL TABLET THERAPY PACK)	Tier 1	DL; QL (30 EA per 5 days)
Anxiolytics		
Anxiolytics, Other		
buspirone hcl (10mg oral tablet, 15mg oral tablet, 30mg oral tablet, 5mg oral tablet, 7.5mg oral tablet)	Tier 1	
hydroxyzine hcl (10mg/5ml oral syrup)	Tier 1	PA; DL
hydroxyzine hcl (oral tablet)	Tier 1	PA; DL
hydroxyzine pamoate (oral capsule)	Tier 1	PA; DL
Benzodiazepines		
alprazolam (0.25mg oral tablet immediate release, 0.5mg oral tablet immediate release, 1mg oral tablet immediate release)	Tier 1	PA; QL (120 EA per 30 days)
alprazolam (2mg oral tablet immediate release)	Tier 1	PA; QL (150 EA per 30 days)
clonazepam (0.5mg oral tablet, 1mg oral tablet)	Tier 1	QL (120 EA per 30 days)
clonazepam (2mg oral tablet)	Tier 1	QL (300 EA per 30 days)
clonazepam odt (0.125mg oral tablet dispersible, 0.25mg oral tablet dispersible, 0.5mg oral tablet dispersible, 1mg oral tablet dispersible)	Tier 1	DL; QL (120 EA per 30 days)
clonazepam odt (2mg oral tablet dispersible)	Tier 1	DL; QL (300 EA per 30 days)

You can find information on what the symbols and abbreviations in this table mean by referring to pages 14 and 15.

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
clorazepate dipotassium (15mg oral tablet)	Tier 1	PA; DL; QL (180 EA per 30 days)
clorazepate dipotassium (3.75mg oral tablet)	Tier 1	PA; DL; QL (720 EA per 30 days)
clorazepate dipotassium (7.5mg oral tablet)	Tier 1	PA; DL; QL (360 EA per 30 days)
diazepam (10mg oral tablet, 2mg oral tablet, 5mg oral tablet)	Tier 1	PA; QL (120 EA per 30 days)
diazepam (5mg/5ml oral solution)	Tier 1	PA; DL
diazepam intensol (oral concentrate)	Tier 1	PA; DL; QL (240 ML per 30 days)
lorazepam (0.5mg oral tablet, 1mg oral tablet)	Tier 1	QL (120 EA per 30 days)
lorazepam (2mg oral tablet)	Tier 1	QL (150 EA per 30 days)
Bipolar Agents		
Bipolar Agents, Other		
ABILIFY ASIMTUFII (720MG/2.4ML INTRAMUSCULAR PREFILLED SYRINGE)	Tier 1	DL; QL (2.4 ML per 56 days)
ABILIFY ASIMTUFII (960MG/3.2ML INTRAMUSCULAR PREFILLED SYRINGE)	Tier 1	DL; QL (3.2 ML per 56 days)
ABILIFY MAINTENA (INTRAMUSCULAR PREFILLED SYRINGE)	Tier 1	DL
ABILIFY MAINTENA (INTRAMUSCULAR SUSPENSION RECONSTITUTED ER)	Tier 1	DL
aripiprazole (10mg oral tablet, 15mg oral tablet, 20mg oral tablet, 2mg oral tablet, 30mg oral tablet, 5mg oral tablet)	Tier 1	QL (30 EA per 30 days)
aripiprazole (1mg/ml oral solution)	Tier 1	DL; QL (750 ML per 30 days)
aripiprazole odt (10mg oral tablet dispersible, 15mg oral tablet dispersible)	Tier 1	DL; QL (60 EA per 30 days)
ARISTADA (INTRAMUSCULAR PREFILLED SYRINGE)	Tier 1	DL
ARISTADA INITIO (INTRAMUSCULAR PREFILLED SYRINGE)	Tier 1	DL
asenapine maleate (tablet sublingual)	Tier 1	DL; QL (60 EA per 30 days)

You can find information on what the symbols and abbreviations in this table mean by referring to pages 14 and 15.

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
lurasidone hcl (120mg oral tablet, 20mg oral tablet, 40mg oral tablet, 60mg oral tablet)	Tier 1	QL (30 EA per 30 days)
lurasidone hcl (80mg oral tablet)	Tier 1	QL (60 EA per 30 days)
LYBALVI (ORAL TABLET)	Tier 1	ST; DL; QL (30 EA per 30 days)
olanzapine (10mg intramuscular solution reconstituted)	Tier 1	DL
olanzapine (10mg oral tablet, 2.5mg oral tablet, 5mg oral tablet, 7.5mg oral tablet)	Tier 1	PA; QL (60 EA per 30 days)
olanzapine (15mg oral tablet, 20mg oral tablet)	Tier 1	PA; QL (30 EA per 30 days)
olanzapine odt (10mg oral tablet dispersible, 5mg oral tablet dispersible)	Tier 1	PA; DL; QL (60 EA per 30 days)
olanzapine odt (15mg oral tablet dispersible, 20mg oral tablet dispersible)	Tier 1	PA; DL; QL (30 EA per 30 days)
OPIPZA (10MG ORAL FILM, 5MG ORAL FILM)	Tier 1	PA; DL; QL (90 EA per 30 days)
OPIPZA (2MG ORAL FILM)	Tier 1	PA; DL; QL (30 EA per 30 days)
quetiapine fumarate (100mg oral tablet immediate release, 150mg oral tablet immediate release, 200mg oral tablet immediate release, 50mg oral tablet immediate release)	Tier 1	QL (90 EA per 30 days)
quetiapine fumarate (25mg oral tablet immediate release)	Tier 1	QL (120 EA per 30 days)
quetiapine fumarate (300mg oral tablet immediate release, 400mg oral tablet immediate release)	Tier 1	QL (60 EA per 30 days)
quetiapine fumarate er (150mg oral tablet extended release 24 hour, 200mg oral tablet extended release 24 hour)	Tier 1	QL (30 EA per 30 days)
quetiapine fumarate er (300mg oral tablet extended release 24 hour, 400mg oral tablet extended release 24 hour, 50mg oral tablet extended release 24 hour)	Tier 1	QL (60 EA per 30 days)
risperidone (0.25mg oral tablet, 0.5mg oral tablet, 1mg oral tablet, 2mg oral tablet, 3mg oral tablet, 4mg oral tablet)	Tier 1	

You can find information on what the symbols and abbreviations in this table mean by referring to pages 14 and 15.

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
risperidone (1mg/ml oral solution)	Tier 1	DL
risperidone microspheres er (12.5mg intramuscular suspension reconstituted er, 25mg intramuscular suspension reconstituted er, 37.5mg intramuscular suspension reconstituted er)	Tier 1	DL
risperidone microspheres er (50mg intramuscular suspension reconstituted er)	Tier 1	DL
risperidone odt (0.25mg oral tablet dispersible, 0.5mg oral tablet dispersible, 1mg oral tablet dispersible, 2mg oral tablet dispersible, 3mg oral tablet dispersible, 4mg oral tablet dispersible)	Tier 1	DL
SECUADO (TRANSDERMAL PATCH 24 HOUR)	Tier 1	ST; DL; QL (30 EA per 30 days)
ziprasidone hcl (oral capsule)	Tier 1	QL (60 EA per 30 days)
ziprasidone mesylate (intramuscular solution reconstituted)	Tier 1	DL
Mood Stabilizers		
divalproex sodium (oral capsule delayed release sprinkle)	Tier 1	
divalproex sodium (oral tablet delayed release)	Tier 1	
divalproex sodium er (oral tablet extended release 24 hour)	Tier 1	
lithium (oral solution)	Tier 1	
lithium carbonate (oral capsule)	Tier 1	
lithium carbonate (oral tablet immediate release)	Tier 1	
lithium carbonate er (oral tablet extended release)	Tier 1	
Blood Glucose Regulators		
Antidiabetic Agents		
acarbose (100mg oral tablet)	Tier 1	QL (90 EA per 30 days)
acarbose (25mg oral tablet)	Tier 1	QL (360 EA per 30 days)
acarbose (50mg oral tablet)	Tier 1	QL (180 EA per 30 days)
glimepiride (1mg oral tablet)	Tier 1	QL (240 EA per 30 days)

You can find information on what the symbols and abbreviations in this table mean by referring to pages 14 and 15.

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
glimepiride (2mg oral tablet)	Tier 1	QL (120 EA per 30 days)
glimepiride (4mg oral tablet)	Tier 1	QL (60 EA per 30 days)
glipizide (10mg oral tablet immediate release)	Tier 1	QL (120 EA per 30 days)
glipizide (5mg oral tablet immediate release)	Tier 1	QL (240 EA per 30 days)
glipizide er (10mg oral tablet extended release 24 hour)	Tier 1	QL (60 EA per 30 days)
glipizide er (2.5mg oral tablet extended release 24 hour)	Tier 1	QL (240 EA per 30 days)
glipizide er (5mg oral tablet extended release 24 hour)	Tier 1	QL (120 EA per 30 days)
glipizide-metformin hcl (2.5-250mg oral tablet)	Tier 1	QL (240 EA per 30 days)
glipizide-metformin hcl (2.5-500mg oral tablet, 5-500mg oral tablet)	Tier 1	QL (120 EA per 30 days)
GLYXAMBI (ORAL TABLET)	Tier 1	QL (30 EA per 30 days)
JANUMET XR (100-1000MG ORAL TABLET EXTENDED RELEASE 24 HOUR, 50-500MG ORAL TABLET EXTENDED RELEASE 24 HOUR)	Tier 1	QL (30 EA per 30 days)
JANUMET XR (50-1000MG ORAL TABLET EXTENDED RELEASE 24 HOUR)	Tier 1	QL (60 EA per 30 days)
JANUVIA (ORAL TABLET)	Tier 1	QL (30 EA per 30 days)
JENTADUETO (2.5-1000MG ORAL TABLET IMMEDIATE RELEASE, 2.5-500MG ORAL TABLET IMMEDIATE RELEASE)	Tier 1	QL (60 EA per 30 days)
JENTADUETO XR (2.5-1000MG ORAL TABLET EXTENDED RELEASE 24 HOUR)	Tier 1	QL (60 EA per 30 days)
JENTADUETO XR (5-1000MG ORAL TABLET EXTENDED RELEASE 24 HOUR)	Tier 1	QL (30 EA per 30 days)
metformin hcl (1000mg oral tablet immediate release)	Tier 1	QL (75 EA per 30 days)
metformin hcl (500mg oral tablet immediate release)	Tier 1	QL (150 EA per 30 days)

You can find information on what the symbols and abbreviations in this table mean by referring to pages 14 and 15.

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
metformin hcl (850mg oral tablet immediate release)	Tier 1	QL (90 EA per 30 days)
metformin hcl (oral solution)	Tier 1	QL (765 ML per 30 days)
metformin hcl er (500mg oral tablet extended release 24 hour) (generic glucophage xr)	Tier 1	QL (120 EA per 30 days)
metformin hcl er (750mg oral tablet extended release 24 hour) (generic glucophage xr)	Tier 1	QL (60 EA per 30 days)
miglitol (100mg oral tablet)	Tier 1	DL; QL (90 EA per 30 days)
miglitol (25mg oral tablet)	Tier 1	DL; QL (360 EA per 30 days)
miglitol (50mg oral tablet)	Tier 1	DL; QL (180 EA per 30 days)
MOUNJARO (SUBCUTANEOUS SOLUTION AUTO-INJECTOR)	Tier 1	PA; QL (2 ML per 28 days)
nateglinide (120mg oral tablet)	Tier 1	QL (90 EA per 30 days)
nateglinide (60mg oral tablet)	Tier 1	QL (180 EA per 30 days)
OZEMPIC (0.25MG/DOSE OR 0.5MG/DOSE) (SUBCUTANEOUS SOLUTION PEN-INJECTOR)	Tier 1	PA; QL (3 ML per 28 days)
OZEMPIC (1MG/DOSE) (4MG/3ML SUBCUTANEOUS SOLUTION PEN-INJECTOR)	Tier 1	PA; QL (3 ML per 28 days)
OZEMPIC (2MG/DOSE) (8MG/3ML SUBCUTANEOUS SOLUTION PEN-INJECTOR)	Tier 1	PA; QL (3 ML per 28 days)
OZEMPIC (ORAL TABLET)	Tier 1	PA; QL (30 EA per 30 days)
pioglitazone hcl (oral tablet)	Tier 1	QL (30 EA per 30 days)
pioglitazone hcl-glimepiride (oral tablet)	Tier 1	QL (30 EA per 30 days)
pioglitazone hcl-metformin hcl (oral tablet)	Tier 1	QL (90 EA per 30 days)
repaglinide (0.5mg oral tablet)	Tier 1	QL (960 EA per 30 days)
repaglinide (1mg oral tablet)	Tier 1	QL (480 EA per 30 days)

You can find information on what the symbols and abbreviations in this table mean by referring to pages 14 and 15.

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
repaglinide (2mg oral tablet)	Tier 1	QL (240 EA per 30 days)
sitagliptin phosphate-metformin hcl (oral tablet)	Tier 1	QL (60 EA per 30 days)
SOLIQUA (SUBCUTANEOUS SOLUTION PEN-INJECTOR)	Tier 1	QL (15 ML per 24 days)
SYNJARDY (ORAL TABLET IMMEDIATE RELEASE)	Tier 1	QL (60 EA per 30 days)
SYNJARDY XR (10-1000MG ORAL TABLET EXTENDED RELEASE 24 HOUR, 12.5-1000MG ORAL TABLET EXTENDED RELEASE 24 HOUR, 5-1000MG ORAL TABLET EXTENDED RELEASE 24 HOUR)	Tier 1	QL (60 EA per 30 days)
SYNJARDY XR (25-1000MG ORAL TABLET EXTENDED RELEASE 24 HOUR)	Tier 1	QL (30 EA per 30 days)
TRADJENTA (ORAL TABLET)	Tier 1	QL (30 EA per 30 days)
TRIJARDY XR (10-5-1000MG ORAL TABLET EXTENDED RELEASE 24 HOUR, 25-5-1000MG ORAL TABLET EXTENDED RELEASE 24 HOUR)	Tier 1	QL (30 EA per 30 days)
TRIJARDY XR (12.5-2.5-1000MG ORAL TABLET EXTENDED RELEASE 24 HOUR, 5-2.5-1000MG ORAL TABLET EXTENDED RELEASE 24 HOUR)	Tier 1	QL (60 EA per 30 days)
TRULICITY (SUBCUTANEOUS SOLUTION AUTO-INJECTOR)	Tier 1	PA; QL (2 ML per 28 days)
XIGDUO XR (10-1000MG ORAL TABLET EXTENDED RELEASE 24 HOUR, 10-500MG ORAL TABLET EXTENDED RELEASE 24 HOUR, 5-500MG ORAL TABLET EXTENDED RELEASE 24 HOUR)	Tier 1	QL (30 EA per 30 days)
XIGDUO XR (2.5-1000MG ORAL TABLET EXTENDED RELEASE 24 HOUR, 5-1000MG ORAL TABLET EXTENDED RELEASE 24 HOUR)	Tier 1	QL (60 EA per 30 days)
Glycemic Agents		
BAQSIMI ONE PACK (NASAL POWDER)	Tier 1	
diazoxide (oral suspension)	Tier 1	DL
glucagon emergency (1mg injection solution reconstituted)	Tier 1	
GVOKE HYPOPEN 2-PACK (SUBCUTANEOUS SOLUTION AUTO-INJECTOR)	Tier 1	

You can find information on what the symbols and abbreviations in this table mean by referring to pages 14 and 15.

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
GVOKE KIT (SUBCUTANEOUS SOLUTION)	Tier 1	
GVOKE PFS (SUBCUTANEOUS SOLUTION PREFILLED SYRINGE)	Tier 1	
Insulins		
FIASP (INJECTION SOLUTION)	Tier 1	
FIASP FLEXTOUCH (SUBCUTANEOUS SOLUTION PEN-INJECTOR)	Tier 1	
FIASP PENFILL (SUBCUTANEOUS SOLUTION CARTRIDGE)	Tier 1	
HUMALOG (INJECTION SOLUTION)	Tier 1	
HUMALOG (SUBCUTANEOUS SOLUTION CARTRIDGE)	Tier 1	
HUMALOG JUNIOR KWIKPEN (SUBCUTANEOUS SOLUTION PEN-INJECTOR)	Tier 1	
HUMALOG KWIKPEN (SUBCUTANEOUS SOLUTION PEN-INJECTOR)	Tier 1	
HUMALOG MIX 50/50 KWIKPEN (SUBCUTANEOUS SUSPENSION PEN-INJECTOR)	Tier 1	
HUMALOG MIX 75/25 (SUBCUTANEOUS SUSPENSION)	Tier 1	
HUMALOG MIX 75/25 KWIKPEN (SUBCUTANEOUS SUSPENSION PEN-INJECTOR)	Tier 1	
HUMULIN 70/30 (SUBCUTANEOUS SUSPENSION)	Tier 1	
HUMULIN 70/30 KWIKPEN (SUBCUTANEOUS SUSPENSION PEN-INJECTOR)	Tier 1	
HUMULIN N (SUBCUTANEOUS SUSPENSION)	Tier 1	
HUMULIN N KWIKPEN (SUBCUTANEOUS SUSPENSION PEN-INJECTOR)	Tier 1	
HUMULIN R (INJECTION SOLUTION)	Tier 1	
HUMULIN R U-500 KWIKPEN (SUBCUTANEOUS SOLUTION PEN-INJECTOR)	Tier 1	
INSULIN GLARGINE-YFGN (SUBCUTANEOUS SOLUTION PEN-INJECTOR)	Tier 1	
INSULIN LISPRO (1 UNIT DIAL) (SUBCUTANEOUS SOLUTION PEN-INJECTOR) (BRAND EQUIVALENT HUMALOG)	Tier 1	

You can find information on what the symbols and abbreviations in this table mean by referring to pages 14 and 15.

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
INSULIN LISPRO (INJECTION SOLUTION) (BRAND EQUIVALENT HUMALOG)	Tier 1	
INSULIN LISPRO JUNIOR KWIKPEN (SUBCUTANEOUS SOLUTION PEN-INJECTOR) (BRAND EQUIVALENT HUMALOG)	Tier 1	
INSULIN LISPRO PROT & LISPRO (SUBCUTANEOUS SUSPENSION PEN-INJECTOR) (BRAND EQUIVALENT HUMALOG)	Tier 1	
LANTUS (SUBCUTANEOUS SOLUTION)	Tier 1	
LANTUS SOLOSTAR (SUBCUTANEOUS SOLUTION PEN-INJECTOR)	Tier 1	
LYUMJEV (INJECTION SOLUTION)	Tier 1	
LYUMJEV KWIKPEN (SUBCUTANEOUS SOLUTION PEN-INJECTOR)	Tier 1	
NOVOLIN R FLEXPEN (INJECTION SOLUTION PEN-INJECTOR)	Tier 1	
NOVOLOG (INJECTION SOLUTION)	Tier 1	
NOVOLOG FLEXPEN (SUBCUTANEOUS SOLUTION PEN-INJECTOR)	Tier 1	
NOVOLOG PENFILL (SUBCUTANEOUS SOLUTION CARTRIDGE)	Tier 1	
TOUJEO MAX SOLOSTAR (SUBCUTANEOUS SOLUTION PEN-INJECTOR)	Tier 1	
TOUJEO SOLOSTAR (SUBCUTANEOUS SOLUTION PEN-INJECTOR)	Tier 1	
Blood Products and Modifiers		
Anticoagulants		
dabigatran etexilate mesylate (oral capsule)	Tier 1	DL; QL (60 EA per 30 days)
ELIQUIS (0.5MG ORAL TABLET SOLUBLE)	Tier 1	QL (112 EA per 28 days)
ELIQUIS (1.5MG PACK) (ORAL TABLET SOLUBLE)	Tier 1	QL (336 EA per 28 days)
ELIQUIS (2MG PACK) (ORAL TABLET SOLUBLE)	Tier 1	QL (448 EA per 28 days)
ELIQUIS (ORAL CAPSULE SPRINKLE)	Tier 1	QL (56 EA per 28 days)
ELIQUIS (ORAL TABLET)	Tier 1	QL (60 EA per 30 days)

You can find information on what the symbols and abbreviations in this table mean by referring to pages 14 and 15.

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
ELIQUIS STARTER PACK (ORAL TABLET)	Tier 1	QL (148 EA per 365 days)
enoxaparin sodium (100mg/ml injection solution prefilled syringe, 150mg/ml injection solution prefilled syringe)	Tier 1	DL; QL (60 ML per 30 days)
enoxaparin sodium (120mg/0.8ml injection solution prefilled syringe, 80mg/0.8ml injection solution prefilled syringe)	Tier 1	DL; QL (48 ML per 30 days)
enoxaparin sodium (30mg/0.3ml injection solution prefilled syringe)	Tier 1	DL; QL (18 ML per 30 days)
enoxaparin sodium (40mg/0.4ml injection solution prefilled syringe)	Tier 1	DL; QL (24 ML per 30 days)
enoxaparin sodium (60mg/0.6ml injection solution prefilled syringe)	Tier 1	DL; QL (36 ML per 30 days)
fondaparinux sodium (subcutaneous solution)	Tier 1	DL
heparin sodium (porcine) (injection solution)	Tier 1	B/D, PA
jantoven (10mg oral tablet, 1mg oral tablet, 2.5mg oral tablet, 2mg oral tablet, 3mg oral tablet, 4mg oral tablet, 5mg oral tablet, 6mg oral tablet, 7.5mg oral tablet)	Tier 1	
rivaroxaban (oral tablet)	Tier 1	QL (360 EA per 30 days)
warfarin sodium (oral tablet)	Tier 1	
XARELTO (10MG ORAL TABLET, 20MG ORAL TABLET)	Tier 1	QL (30 EA per 30 days)
XARELTO (15MG ORAL TABLET, 2.5MG ORAL TABLET)	Tier 1	QL (60 EA per 30 days)
XARELTO (ORAL SUSPENSION RECONSTITUTED)	Tier 1	QL (600 ML per 30 days)
XARELTO STARTER PACK (ORAL TABLET THERAPY PACK)	Tier 1	QL (102 EA per 365 days)
Blood Products and Modifiers, Other		
anagrelide hcl (oral capsule)	Tier 1	

You can find information on what the symbols and abbreviations in this table mean by referring to pages 14 and 15.

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
ARANESP (ALBUMIN FREE) (100MCG/0.5ML INJECTION SOLUTION PREFILLED SYRINGE, 150MCG/0.3ML INJECTION SOLUTION PREFILLED SYRINGE, 200MCG/0.4ML INJECTION SOLUTION PREFILLED SYRINGE, 300MCG/0.6ML INJECTION SOLUTION PREFILLED SYRINGE, 500MCG/ML INJECTION SOLUTION PREFILLED SYRINGE)	Tier 1	PA; DL
ARANESP (ALBUMIN FREE) (100MCG/ML INJECTION SOLUTION, 200MCG/ML INJECTION SOLUTION)	Tier 1	PA; DL
ARANESP (ALBUMIN FREE) (10MCG/0.4ML INJECTION SOLUTION PREFILLED SYRINGE, 25MCG/0.42ML INJECTION SOLUTION PREFILLED SYRINGE, 40MCG/0.4ML INJECTION SOLUTION PREFILLED SYRINGE, 60MCG/0.3ML INJECTION SOLUTION PREFILLED SYRINGE)	Tier 1	PA; DL
ARANESP (ALBUMIN FREE) (25MCG/ML INJECTION SOLUTION, 40MCG/ML INJECTION SOLUTION, 60MCG/ML INJECTION SOLUTION)	Tier 1	PA; DL
DROXIA (ORAL CAPSULE)	Tier 1	DL
eltrombopag olamine (12.5mg oral tablet, 25mg oral tablet)	Tier 1	PA; DL; QL (30 EA per 30 days)
eltrombopag olamine (50mg oral tablet, 75mg oral tablet)	Tier 1	PA; DL; QL (60 EA per 30 days)
eltrombopag olamine (oral packet)	Tier 1	PA; DL; QL (180 EA per 30 days)
NEULASTA (SUBCUTANEOUS SOLUTION PREFILLED SYRINGE)	Tier 1	PA; DL
PROCRIT (10000UNIT/ML INJECTION SOLUTION, 2000UNIT/ML INJECTION SOLUTION, 3000UNIT/ML INJECTION SOLUTION, 4000UNIT/ML INJECTION SOLUTION)	Tier 1	PA; DL
PROCRIT (20000UNIT/ML INJECTION SOLUTION, 40000UNIT/ML INJECTION SOLUTION)	Tier 1	PA; DL
UDENYCA (SUBCUTANEOUS SOLUTION AUTO-INJECTOR)	Tier 1	PA; DL

You can find information on what the symbols and abbreviations in this table mean by referring to pages 14 and 15.

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
UDENYCA (SUBCUTANEOUS SOLUTION PREFILLED SYRINGE)	Tier 1	PA; DL
XOLREMDI (ORAL CAPSULE)	Tier 1	PA; DL; QL (120 EA per 30 days)
ZARXIO (INJECTION SOLUTION PREFILLED SYRINGE)	Tier 1	DL
Hemostasis Agents		
tranexamic acid (oral tablet)	Tier 1	
Platelet Modifying Agents		
aspirin-dipyridamole er (oral capsule extended release 12 hour)	Tier 1	QL (60 EA per 30 days)
CABLIVI (INJECTION KIT)	Tier 1	PA; DL; QL (30 EA per 30 days)
cilostazol (oral tablet)	Tier 1	
clopidogrel bisulfate (75mg oral tablet)	Tier 1	QL (30 EA per 30 days)
DOPTELET (ORAL TABLET)	Tier 1	PA; DL; QL (90 EA per 30 days)
DOPTELET SPRINKLE (ORAL CAPSULE SPRINKLE)	Tier 1	PA; DL; QL (60 EA per 30 days)
prasugrel hcl (oral tablet)	Tier 1	QL (30 EA per 30 days)
ticagrelor (oral tablet)	Tier 1	QL (60 EA per 30 days)
Cardiovascular Agents		
Alpha-adrenergic Agonists		
clonidine (transdermal patch weekly)	Tier 1	DL
clonidine hcl (0.1mg oral tablet immediate release, 0.2mg oral tablet immediate release, 0.3mg oral tablet immediate release)	Tier 1	
droxidopa (100mg oral capsule)	Tier 1	PA; DL; QL (90 EA per 30 days)
droxidopa (200mg oral capsule, 300mg oral capsule)	Tier 1	PA; DL; QL (180 EA per 30 days)
midodrine hcl (oral tablet)	Tier 1	
Alpha-adrenergic Blocking Agents		
doxazosin mesylate (oral tablet)	Tier 1	
prazosin hcl (oral capsule)	Tier 1	

You can find information on what the symbols and abbreviations in this table mean by referring to pages 14 and 15.

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
Angiotensin II Receptor Antagonists		
candesartan cilexetil (oral tablet)	Tier 1	
EDARBI (ORAL TABLET)	Tier 1	DL; QL (30 EA per 30 days)
irbesartan (oral tablet)	Tier 1	
losartan potassium (oral tablet)	Tier 1	
olmesartan medoxomil (20mg oral tablet, 40mg oral tablet)	Tier 1	QL (30 EA per 30 days)
olmesartan medoxomil (5mg oral tablet)	Tier 1	QL (60 EA per 30 days)
telmisartan (oral tablet)	Tier 1	QL (30 EA per 30 days)
valsartan (160mg oral tablet, 40mg oral tablet, 80mg oral tablet)	Tier 1	QL (60 EA per 30 days)
valsartan (320mg oral tablet)	Tier 1	QL (30 EA per 30 days)
Angiotensin-converting Enzyme (ACE) Inhibitors		
benazepril hcl (oral tablet)	Tier 1	
captopril (100mg oral tablet)	Tier 1	QL (120 EA per 30 days)
captopril (12.5mg oral tablet, 25mg oral tablet)	Tier 1	QL (90 EA per 30 days)
captopril (50mg oral tablet)	Tier 1	QL (270 EA per 30 days)
enalapril maleate (oral tablet)	Tier 1	QL (60 EA per 30 days)
fosinopril sodium (oral tablet)	Tier 1	
lisinopril (oral tablet)	Tier 1	QL (60 EA per 30 days)
moexipril hcl (oral tablet)	Tier 1	
perindopril erbumine (oral tablet)	Tier 1	
quinapril hcl (oral tablet)	Tier 1	
ramipril (oral capsule)	Tier 1	
trandolapril (oral tablet)	Tier 1	
Antiarrhythmics		
amiodarone hcl (200mg oral tablet)	Tier 1	

You can find information on what the symbols and abbreviations in this table mean by referring to pages 14 and 15.

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
dofetilide (125mcg oral capsule)	Tier 1	QL (180 EA per 30 days)
dofetilide (250mcg oral capsule, 500mcg oral capsule)	Tier 1	QL (60 EA per 30 days)
flecainide acetate (oral tablet)	Tier 1	
mexiletine hcl (oral capsule)	Tier 1	
MULTAQ (ORAL TABLET)	Tier 1	QL (60 EA per 30 days)
propafenone hcl (oral tablet)	Tier 1	
propafenone hcl er (oral capsule extended release 12 hour)	Tier 1	DL
quinidine gluconate er (oral tablet extended release)	Tier 1	DL
quinidine sulfate (oral tablet)	Tier 1	
sotalol hcl (af) (oral tablet)	Tier 1	
sotalol hcl (oral tablet)	Tier 1	
Beta-adrenergic Blocking Agents		
acebutolol hcl (oral capsule)	Tier 1	
atenolol (oral tablet)	Tier 1	
betaxolol hcl (oral tablet)	Tier 1	
bisoprolol fumarate (oral tablet)	Tier 1	
carvedilol (oral tablet)	Tier 1	
labetalol hcl (oral tablet)	Tier 1	
metoprolol succinate er (oral tablet extended release 24 hour)	Tier 1	
metoprolol tartrate (100mg oral tablet, 25mg oral tablet, 37.5mg oral tablet, 50mg oral tablet, 75mg oral tablet)	Tier 1	
nadolol (oral tablet)	Tier 1	DL
nebivolol hcl (10mg oral tablet, 2.5mg oral tablet, 5mg oral tablet)	Tier 1	QL (30 EA per 30 days)
nebivolol hcl (20mg oral tablet)	Tier 1	QL (60 EA per 30 days)
pindolol (oral tablet)	Tier 1	
propranolol hcl (oral solution)	Tier 1	
propranolol hcl (oral tablet)	Tier 1	

You can find information on what the symbols and abbreviations in this table mean by referring to pages 14 and 15.

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
propranolol hcl er (oral capsule extended release 24 hour)	Tier 1	
Calcium Channel Blocking Agents, Dihydropyridines		
amlodipine besylate (oral tablet)	Tier 1	
felodipine er (oral tablet extended release 24 hour)	Tier 1	
nicardipine hcl (oral capsule)	Tier 1	DL
nifedipine er (oral tablet extended release 24 hour)	Tier 1	QL (60 EA per 30 days)
nifedipine er osmotic release (oral tablet extended release 24 hour)	Tier 1	QL (60 EA per 30 days)
nimodipine (oral capsule)	Tier 1	DL
Calcium Channel Blocking Agents, Nondihydropyridines		
cartia xt (oral capsule extended release 24 hour)	Tier 1	
dilt-xr (oral capsule extended release 24 hour)	Tier 1	
diltiazem hcl (oral tablet immediate release)	Tier 1	
diltiazem hcl er (oral capsule extended release 12 hour)	Tier 1	
diltiazem hcl er (oral tablet extended release 24 hour)	Tier 1	
diltiazem hcl er beads (360mg oral capsule extended release 24 hour, 420mg oral capsule extended release 24 hour)	Tier 1	
diltiazem hcl er coated beads (120mg oral capsule extended release 24 hour, 180mg oral capsule extended release 24 hour, 240mg oral capsule extended release 24 hour, 300mg oral capsule extended release 24 hour)	Tier 1	
matzim la (oral tablet extended release 24 hour)	Tier 1	
tiadylt er (oral capsule extended release 24 hour)	Tier 1	
verapamil hcl (oral tablet immediate release)	Tier 1	
verapamil hcl er (oral capsule extended release 24 hour)	Tier 1	
verapamil hcl er (oral tablet extended release)	Tier 1	
Cardiovascular Agents, Other		
acetazolamide (oral tablet)	Tier 1	

You can find information on what the symbols and abbreviations in this table mean by referring to pages 14 and 15.

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
acetazolamide er (oral capsule extended release 12 hour)	Tier 1	DL
aliskiren fumarate (oral tablet)	Tier 1	
amiloride-hydrochlorothiazide (oral tablet)	Tier 1	
amlodipine-atorvastatin (oral tablet)	Tier 1	
amlodipine-benazepril (oral capsule)	Tier 1	
amlodipine-olmesartan (oral tablet)	Tier 1	QL (30 EA per 30 days)
amlodipine-valsartan (oral tablet)	Tier 1	QL (30 EA per 30 days)
amlodipine-valsartan-hctz (oral tablet)	Tier 1	QL (30 EA per 30 days)
atenolol-chlorthalidone (oral tablet)	Tier 1	
benazepril-hydrochlorothiazide (oral tablet)	Tier 1	
bisoprolol-hydrochlorothiazide (oral tablet)	Tier 1	QL (60 EA per 30 days)
CAMZYOS (ORAL CAPSULE)	Tier 1	PA; DL; QL (30 EA per 30 days)
candesartan cilexetil-hctz (oral tablet)	Tier 1	
digoxin (125mcg oral tablet, 250mcg oral tablet)	Tier 1	
digoxin (62.5mcg oral tablet)	Tier 1	DL
digoxin (oral solution)	Tier 1	
EDARBYCLOR (ORAL TABLET)	Tier 1	DL; QL (30 EA per 30 days)
enalapril-hydrochlorothiazide (10-25mg oral tablet)	Tier 1	QL (60 EA per 30 days)
enalapril-hydrochlorothiazide (5-12.5mg oral tablet)	Tier 1	QL (30 EA per 30 days)
ENTRESTO (ORAL CAPSULE SPRINKLE)	Tier 1	QL (240 EA per 30 days)
fosinopril sodium-hctz (oral tablet)	Tier 1	
irbesartan-hydrochlorothiazide (oral tablet)	Tier 1	
isosorbide dinitrate-hydralazine (oral tablet)	Tier 1	QL (180 EA per 30 days)
ivabradine hcl (oral tablet)	Tier 1	PA; DL; QL (60 EA per 30 days)

You can find information on what the symbols and abbreviations in this table mean by referring to pages 14 and 15.

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
lisinopril-hydrochlorothiazide (10-12.5mg oral tablet)	Tier 1	QL (30 EA per 30 days)
lisinopril-hydrochlorothiazide (20-12.5mg oral tablet)	Tier 1	QL (120 EA per 30 days)
lisinopril-hydrochlorothiazide (20-25mg oral tablet)	Tier 1	QL (60 EA per 30 days)
losartan potassium-hctz (oral tablet)	Tier 1	
metoprolol-hydrochlorothiazide (oral tablet)	Tier 1	
metyrosine (oral capsule)	Tier 1	DL
olmesartan medoxomil-hctz (oral tablet)	Tier 1	QL (30 EA per 30 days)
olmesartan-amlodipine-hctz (oral tablet)	Tier 1	QL (30 EA per 30 days)
pentoxifylline er (oral tablet extended release)	Tier 1	
quinapril-hydrochlorothiazide (oral tablet)	Tier 1	
ranolazine er (oral tablet extended release 12 hour)	Tier 1	QL (60 EA per 30 days)
sacubitril-valsartan (oral tablet)	Tier 1	QL (60 EA per 30 days)
spironolactone-hctz (oral tablet)	Tier 1	
telmisartan-amlodipine (oral tablet)	Tier 1	QL (30 EA per 30 days)
telmisartan-hctz (40-12.5mg oral tablet, 80-25mg oral tablet)	Tier 1	QL (30 EA per 30 days)
telmisartan-hctz (80-12.5mg oral tablet)	Tier 1	QL (60 EA per 30 days)
trandolapril-verapamil hcl er (oral tablet extended release)	Tier 1	
triamterene-hctz (oral capsule)	Tier 1	
triamterene-hctz (oral tablet)	Tier 1	
valsartan-hydrochlorothiazide (oral tablet)	Tier 1	QL (30 EA per 30 days)
Diuretics, Loop		
bumetanide (injection solution)	Tier 1	DL
bumetanide (oral tablet)	Tier 1	
ethacrynic acid (oral tablet)	Tier 1	DL; QL (480 EA per 30 days)

You can find information on what the symbols and abbreviations in this table mean by referring to pages 14 and 15.

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
furosemide (injection solution)	Tier 1	DL
furosemide (oral solution)	Tier 1	
furosemide (oral tablet)	Tier 1	
torsemide (oral tablet)	Tier 1	
Diuretics, Potassium-sparing		
amiloride hcl (oral tablet)	Tier 1	
triamterene (oral capsule)	Tier 1	DL
Diuretics, Thiazide		
chlorthalidone (oral tablet)	Tier 1	
hydrochlorothiazide (oral capsule)	Tier 1	
hydrochlorothiazide (oral tablet)	Tier 1	
indapamide (oral tablet)	Tier 1	
metolazone (oral tablet)	Tier 1	
Dyslipidemics, Fibric Acid Derivatives		
fenofibrate (145mg oral tablet, 48mg oral tablet)	Tier 1	
fenofibrate (160mg oral tablet, 54mg oral tablet)	Tier 1	
fenofibrate (50mg oral capsule)	Tier 1	
fenofibrate micronized (134mg oral capsule, 200mg oral capsule, 43mg oral capsule, 67mg oral capsule)	Tier 1	
fenofibric acid (oral capsule delayed release)	Tier 1	
gemfibrozil (oral tablet)	Tier 1	
Dyslipidemics, HMG CoA Reductase Inhibitors		
atorvastatin calcium (oral tablet)	Tier 1	
fluvastatin sodium (oral capsule)	Tier 1	
fluvastatin sodium er (oral tablet extended release 24 hour)	Tier 1	
LIVALO (ORAL TABLET)	Tier 1	QL (30 EA per 30 days)
lovastatin (oral tablet)	Tier 1	
pravastatin sodium (oral tablet)	Tier 1	
rosuvastatin calcium (oral tablet)	Tier 1	QL (30 EA per 30 days)
simvastatin (oral tablet)	Tier 1	QL (30 EA per 30 days)
Dyslipidemics, Other		

You can find information on what the symbols and abbreviations in this table mean by referring to pages 14 and 15.

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
cholestyramine (oral packet)	Tier 1	DL
cholestyramine light (oral packet)	Tier 1	DL
colesevelam hcl (oral packet)	Tier 1	
colesevelam hcl (oral tablet)	Tier 1	
colestipol hcl (oral packet)	Tier 1	DL
colestipol hcl (oral tablet)	Tier 1	
ezetimibe (oral tablet)	Tier 1	QL (30 EA per 30 days)
ezetimibe-simvastatin (oral tablet)	Tier 1	
NEXLETOL (ORAL TABLET)	Tier 1	QL (30 EA per 30 days)
NEXLIZET (ORAL TABLET)	Tier 1	QL (30 EA per 30 days)
niacin (antihyperlipidemic) (oral tablet immediate release)	Tier 1	DL
niacin er (antihyperlipidemic) (oral tablet extended release)	Tier 1	
niacor (oral tablet)	Tier 1	DL
omega-3-acid ethyl esters (oral capsule) (generic lovaza)	Tier 1	DL; QL (120 EA per 30 days)
prevalite (oral packet)	Tier 1	DL
REPATHA (140MG/ML SUBCUTANEOUS SOLUTION PREFILLED SYRINGE)	Tier 1	QL (3 ML per 28 days)
REPATHA SURECLICK (SUBCUTANEOUS SOLUTION AUTO-INJECTOR)	Tier 1	QL (3 ML per 28 days)
VASCEPA (ORAL CAPSULE)	Tier 1	
Mineralocorticoid Receptor Antagonists		
eplerenone (oral tablet)	Tier 1	
KERENDIA (ORAL TABLET)	Tier 1	PA; DL; QL (30 EA per 30 days)
spironolactone (oral tablet)	Tier 1	
Sodium-Glucose Co-Transporter 2 Inhibitors (SGLT2i)		
dapagliflozin (oral tablet)	Tier 1	QL (30 EA per 30 days)
JARDIANCE (ORAL TABLET)	Tier 1	QL (30 EA per 30 days)
Vasodilators, Direct-acting Arterial		

You can find information on what the symbols and abbreviations in this table mean by referring to pages 14 and 15.

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
hydralazine hcl (oral tablet)	Tier 1	
minoxidil (oral tablet)	Tier 1	
Vasodilators, Direct-acting Arterial/Venous		
isosorbide dinitrate (10mg oral tablet immediate release, 20mg oral tablet immediate release, 30mg oral tablet immediate release, 5mg oral tablet immediate release)	Tier 1	
isosorbide mononitrate (oral tablet immediate release)	Tier 1	
isosorbide mononitrate er (oral tablet extended release 24 hour)	Tier 1	
nitro-bid (transdermal ointment)	Tier 1	DL
nitroglycerin (rectal ointment)	Tier 1	DL; QL (30 GM per 30 days)
nitroglycerin (tablet sublingual)	Tier 1	
nitroglycerin (transdermal patch 24 hour)	Tier 1	
nitroglycerin (translingual solution)	Tier 1	
VERQUVO (ORAL TABLET)	Tier 1	PA; QL (30 EA per 30 days)
Central Nervous System Agents		
Attention Deficit Hyperactivity Disorder Agents, Amphetamines		
amphetamine-dextroamphetamine (10mg oral tablet, 12.5mg oral tablet, 15mg oral tablet, 30mg oral tablet, 5mg oral tablet, 7.5mg oral tablet)	Tier 1	QL (60 EA per 30 days)
amphetamine-dextroamphetamine (20mg oral tablet)	Tier 1	QL (90 EA per 30 days)
amphetamine-dextroamphetamine er (oral capsule extended release 24 hour)	Tier 1	DL; QL (60 EA per 30 days)
dextroamphetamine sulfate (10mg oral tablet, 5mg oral tablet)	Tier 1	DL; QL (180 EA per 30 days)
dextroamphetamine sulfate (15mg oral tablet, 20mg oral tablet)	Tier 1	DL; QL (90 EA per 30 days)
dextroamphetamine sulfate (30mg oral tablet)	Tier 1	DL; QL (60 EA per 30 days)
dextroamphetamine sulfate er (10mg oral capsule extended release 24 hour)	Tier 1	DL; QL (180 EA per 30 days)
dextroamphetamine sulfate er (15mg oral capsule extended release 24 hour)	Tier 1	DL; QL (120 EA per 30 days)

You can find information on what the symbols and abbreviations in this table mean by referring to pages 14 and 15.

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
dextroamphetamine sulfate er (5mg oral capsule extended release 24 hour)	Tier 1	DL; QL (90 EA per 30 days)
lisdexamfetamine dimesylate (oral capsule)	Tier 1	DL
lisdexamfetamine dimesylate (oral tablet chewable)	Tier 1	DL
Attention Deficit Hyperactivity Disorder Agents, Non-amphetamines		
atomoxetine hcl (100mg oral capsule, 60mg oral capsule, 80mg oral capsule)	Tier 1	DL; QL (30 EA per 30 days)
atomoxetine hcl (10mg oral capsule, 18mg oral capsule, 25mg oral capsule, 40mg oral capsule)	Tier 1	DL; QL (60 EA per 30 days)
clonidine hcl er (oral tablet extended release 12 hour)	Tier 1	PA
dexmethylphenidate hcl (oral tablet)	Tier 1	QL (60 EA per 30 days)
dexmethylphenidate hcl er (oral capsule extended release 24 hour)	Tier 1	DL
guanfacine hcl er (oral tablet extended release 24 hour)	Tier 1	DL
methylphenidate hcl (10mg/5ml oral solution)	Tier 1	DL; QL (900 ML per 30 days)
methylphenidate hcl (5mg/5ml oral solution)	Tier 1	DL; QL (1800 ML per 30 days)
methylphenidate hcl (oral tablet immediate release) (generic ritalin)	Tier 1	QL (90 EA per 30 days)
methylphenidate hcl er (10mg oral tablet extended release)	Tier 1	DL; QL (120 EA per 30 days)
methylphenidate hcl er (20mg oral tablet extended release)	Tier 1	DL; QL (90 EA per 30 days)
Central Nervous System, Other		
AUSTEDO (ORAL TABLET IMMEDIATE RELEASE)	Tier 1	PA; DL; QL (120 EA per 30 days)
COBENFY (ORAL CAPSULE)	Tier 1	PA; DL; QL (60 EA per 30 days)
COBENFY STARTER PACK (ORAL CAPSULE THERAPY PACK)	Tier 1	PA; DL; QL (112 EA per 365 days)
dextromethorphan-quinidine (oral capsule)	Tier 1	PA; DL; QL (60 EA per 30 days)

You can find information on what the symbols and abbreviations in this table mean by referring to pages 14 and 15.

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
INGREZZA (ORAL CAPSULE SPRINKLE)	Tier 1	PA; DL; QL (30 EA per 30 days)
INGREZZA (ORAL CAPSULE THERAPY PACK)	Tier 1	PA; DL; QL (28 EA per 28 days)
INGREZZA (ORAL CAPSULE)	Tier 1	PA; DL; QL (30 EA per 30 days)
LYNKUET (ORAL CAPSULE)	Tier 1	PA; DL; QL (60 EA per 30 days)
RADICAVA ORS STARTER KIT (ORAL SUSPENSION)	Tier 1	PA; DL; QL (70 ML per 28 days)
riluzole (oral tablet)	Tier 1	
SKYCLARYS (ORAL CAPSULE)	Tier 1	PA; DL; QL (90 EA per 30 days)
tetrabenazine (12.5mg oral tablet)	Tier 1	PA; DL; QL (90 EA per 30 days)
tetrabenazine (25mg oral tablet)	Tier 1	PA; DL; QL (120 EA per 30 days)
VEOZAH (ORAL TABLET)	Tier 1	PA; DL; QL (30 EA per 30 days)
Fibromyalgia Agents		
DRIZALMA SPRINKLE (20MG ORAL CAPSULE DELAYED RELEASE SPRINKLE, 40MG ORAL CAPSULE DELAYED RELEASE SPRINKLE, 60MG ORAL CAPSULE DELAYED RELEASE SPRINKLE)	Tier 1	ST; DL; QL (60 EA per 30 days)
DRIZALMA SPRINKLE (30MG ORAL CAPSULE DELAYED RELEASE SPRINKLE)	Tier 1	ST; DL; QL (90 EA per 30 days)
duloxetine hcl (20mg oral capsule delayed release particles)	Tier 1	QL (120 EA per 30 days)
duloxetine hcl (30mg oral capsule delayed release particles)	Tier 1	QL (90 EA per 30 days)
duloxetine hcl (60mg oral capsule delayed release particles)	Tier 1	QL (60 EA per 30 days)
pregabalin (100mg oral capsule, 25mg oral capsule, 50mg oral capsule, 75mg oral capsule)	Tier 1	QL (120 EA per 30 days)
pregabalin (150mg oral capsule, 200mg oral capsule)	Tier 1	QL (90 EA per 30 days)

You can find information on what the symbols and abbreviations in this table mean by referring to pages 14 and 15.

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
pregabalin (225mg oral capsule, 300mg oral capsule)	Tier 1	QL (60 EA per 30 days)
pregabalin (oral solution)	Tier 1	QL (900 ML per 30 days)
SAVELLA (ORAL TABLET)	Tier 1	
SAVELLA TITRATION PACK (ORAL TABLET)	Tier 1	
Multiple Sclerosis Agents		
BAFIERTAM (ORAL CAPSULE DELAYED RELEASE)	Tier 1	ST; DL; QL (120 EA per 30 days)
BETASERON (SUBCUTANEOUS KIT)	Tier 1	DL; QL (15 EA per 30 days)
dalfampridine er (oral tablet extended release 12 hour)	Tier 1	QL (60 EA per 30 days)
dimethyl fumarate (120mg oral capsule delayed release)	Tier 1	DL; QL (56 EA per 28 days)
dimethyl fumarate (240mg oral capsule delayed release)	Tier 1	DL; QL (60 EA per 30 days)
dimethyl fumarate starter pack (oral capsule delayed release therapy pack)	Tier 1	DL; QL (120 EA per 365 days)
fingolimod hcl (oral capsule)	Tier 1	DL; QL (30 EA per 30 days)
glatiramer acetate (20mg/ml subcutaneous solution prefilled syringe)	Tier 1	DL; QL (30 ML per 30 days)
glatiramer acetate (40mg/ml subcutaneous solution prefilled syringe)	Tier 1	DL; QL (12 ML per 28 days)
glatopa (20mg/ml subcutaneous solution prefilled syringe)	Tier 1	DL; QL (30 ML per 30 days)
glatopa (40mg/ml subcutaneous solution prefilled syringe)	Tier 1	DL; QL (12 ML per 28 days)
KESIMPTA (SUBCUTANEOUS SOLUTION AUTO-INJECTOR)	Tier 1	DL
teriflunomide (oral tablet)	Tier 1	DL; QL (30 EA per 30 days)
Central Nervous System, Other		
Central Nervous System Agents		
*acetamin sol 160/5ml (solution)**	$0 (OTC)	
*acetamin sol 325mg (solution)**	$0 (OTC)	
*acetamin sol 650/20.3 (solution)**	$0 (OTC)	

You can find information on what the symbols and abbreviations in this table mean by referring to pages 14 and 15.

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
*acetamin sol 650mg (solution)**	$0 (OTC)	
*acetaminophe sol 160/5ml (solution)**	$0 (OTC)	
Dental and Oral Agents		
Dental and Oral Agents		
chlorhexidine gluconate (mouth solution)	Tier 1	
periogard (mouth solution)	Tier 1	
pilocarpine hcl (oral tablet)	Tier 1	DL
triamcinolone acetonide (dental paste)	Tier 1	
Dermatitis and Pruritus Agents		
Dermatological Agents		
*hydrocort cre 0.5% (cream)**	$0 (OTC)	
*hydrocort oin 0.5% (ointment)**	$0 (OTC)	
*instacort 5 cre 0.5% (cream)**	$0 (OTC)	
Dermatological Agents		
Acne and Rosacea Agents		
accutane (10mg oral capsule, 20mg oral capsule, 40mg oral capsule)	Tier 1	PA; DL
acitretin (oral capsule)	Tier 1	DL
adapalene (0.3% external gel)	Tier 1	
amnesteem (oral capsule)	Tier 1	PA; DL
azelaic acid (external gel)	Tier 1	DL; QL (50 GM per 30 days)
benzoyl peroxide-erythromycin (external gel)	Tier 1	
claravis (oral capsule)	Tier 1	PA; DL
clindamycin phosphate-benzoyl peroxide (1-5% external gel, 1.2-5% external gel)	Tier 1	DL
isotretinoin (oral capsule)	Tier 1	PA; DL
neuac (external gel)	Tier 1	DL
tazarotene (0.1% external cream)	Tier 1	PA; DL; QL (60 GM per 30 days)
tretinoin (0.01% external gel, 0.025% external gel)	Tier 1	PA; DL
tretinoin (external cream)	Tier 1	PA; DL
tretinoin microsphere (0.1% external gel)	Tier 1	PA; DL
zenatane (oral capsule)	Tier 1	PA; DL
Dermatitis and Pruritus Agents		
ala-cort (external cream)	Tier 1	

You can find information on what the symbols and abbreviations in this table mean by referring to pages 14 and 15.

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
alclometasone dipropionate (external cream)	Tier 1	
alclometasone dipropionate (external ointment)	Tier 1	
ammonium lactate (external cream)	Tier 1	
ammonium lactate (external lotion)	Tier 1	
betamethasone dipropionate (external cream)	Tier 1	
betamethasone dipropionate (external lotion)	Tier 1	
betamethasone dipropionate (external ointment)	Tier 1	
betamethasone dipropionate aug (external cream)	Tier 1	
betamethasone dipropionate aug (external gel)	Tier 1	
betamethasone dipropionate aug (external lotion)	Tier 1	
betamethasone dipropionate aug (external ointment)	Tier 1	
betamethasone valerate (external cream)	Tier 1	
betamethasone valerate (external lotion)	Tier 1	
betamethasone valerate (external ointment)	Tier 1	
clobetasol propionate (0.05% external cream)	Tier 1	DL
clobetasol propionate (external gel)	Tier 1	DL
clobetasol propionate (external ointment)	Tier 1	DL
clobetasol propionate (external shampoo)	Tier 1	DL
clobetasol propionate (external solution)	Tier 1	
clobetasol propionate emollient base (external cream)	Tier 1	DL
clodan (external shampoo)	Tier 1	DL
desonide (external ointment)	Tier 1	DL; QL (120 GM per 30 days)
desoximetasone (0.25% external cream)	Tier 1	DL; QL (100 GM per 30 days)
fluocinolone acetonide (external cream)	Tier 1	
fluocinolone acetonide (external ointment)	Tier 1	
fluocinolone acetonide (external solution)	Tier 1	
fluocinolone acetonide scalp (external oil)	Tier 1	DL
fluocinonide (0.05% external cream)	Tier 1	QL (60 GM per 30 days)
fluocinonide (external gel)	Tier 1	QL (60 GM per 30 days)

You can find information on what the symbols and abbreviations in this table mean by referring to pages 14 and 15.

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
fluocinonide (external ointment)	Tier 1	QL (60 GM per 30 days)
fluocinonide (external solution)	Tier 1	QL (60 ML per 30 days)
fluocinonide emulsified base (external cream)	Tier 1	QL (60 GM per 30 days)
fluticasone propionate (external cream)	Tier 1	
fluticasone propionate (external ointment)	Tier 1	
halobetasol propionate (external cream)	Tier 1	DL
halobetasol propionate (external ointment)	Tier 1	DL
hydrocortisone (1% external cream)	Tier 1	
hydrocortisone (1% external ointment, 2.5% external ointment)	Tier 1	
hydrocortisone (2.5% external lotion)	Tier 1	
hydrocortisone butyrate (external ointment)	Tier 1	
hydrocortisone valerate (external cream)	Tier 1	DL
hydrocortisone valerate (external ointment)	Tier 1	DL
mometasone furoate (external cream)	Tier 1	
mometasone furoate (external ointment)	Tier 1	
mometasone furoate (external solution)	Tier 1	
pimecrolimus (external cream)	Tier 1	ST; DL; QL (100 GM per 30 days)
selenium sulfide (external lotion)	Tier 1	
tacrolimus (external ointment)	Tier 1	ST; DL
triamcinolone acetonide (0.025% external ointment, 0.1% external ointment, 0.5% external ointment)	Tier 1	
triamcinolone acetonide (external cream)	Tier 1	
triamcinolone acetonide (external lotion)	Tier 1	
triderm (external cream)	Tier 1	
Dermatological Agents, Other		
calcipotriene (external cream)	Tier 1	DL; QL (120 GM per 30 days)
calcipotriene (external ointment)	Tier 1	DL; QL (120 GM per 30 days)
calcipotriene (external solution)	Tier 1	

You can find information on what the symbols and abbreviations in this table mean by referring to pages 14 and 15.

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
clotrimazole-betamethasone (external cream)	Tier 1	QL (90 GM per 30 days)
clotrimazole-betamethasone (external lotion)	Tier 1	DL
diclofenac sodium (3% external gel)	Tier 1	PA; DL; QL (100 GM per 30 days)
fluorouracil (5% external cream)	Tier 1	DL; QL (40 GM per 30 days)
fluorouracil (external solution)	Tier 1	
imiquimod (5% external cream)	Tier 1	DL; QL (24 EA per 30 days)
methoxsalen rapid (oral capsule)	Tier 1	DL
podofilox (external solution)	Tier 1	
SANTYL (EXTERNAL OINTMENT)	Tier 1	DL; QL (180 GM per 30 days)
silver sulfadiazine (external cream)	Tier 1	
ssd (external cream)	Tier 1	
ZORYVE (EXTERNAL CREAM)	Tier 1	PA; DL
ZORYVE (EXTERNAL FOAM)	Tier 1	PA; DL
Pediculicides/Scabicides		
malathion (external lotion)	Tier 1	DL
permethrin (external cream)	Tier 1	
Topical Anti-infectives		
ciclopirox (external gel)	Tier 1	
ciclopirox (external shampoo)	Tier 1	
ciclopirox (external solution)	Tier 1	
ciclopirox olamine (external cream)	Tier 1	
ciclopirox olamine (external suspension)	Tier 1	
clindacin etz (external swab)	Tier 1	QL (69 EA per 30 days)
clindamycin phosphate (external lotion)	Tier 1	QL (60 ML per 30 days)
clindamycin phosphate (external solution)	Tier 1	QL (60 ML per 30 days)
clindamycin phosphate (external swab)	Tier 1	QL (69 EA per 30 days)
clindamycin phosphate (once-daily) (external gel)	Tier 1	QL (75 ML per 30 days)

You can find information on what the symbols and abbreviations in this table mean by referring to pages 14 and 15.

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
clindamycin phosphate (twice-daily) (external gel)	Tier 1	QL (75 GM per 30 days)
clotrimazole (external cream)	Tier 1	
clotrimazole (external solution)	Tier 1	
econazole nitrate (external cream)	Tier 1	DL; QL (90 GM per 30 days)
ERY (EXTERNAL PAD)	Tier 1	
erythromycin (external gel)	Tier 1	DL
erythromycin (external solution)	Tier 1	
gentamicin sulfate (external cream)	Tier 1	
gentamicin sulfate (external ointment)	Tier 1	
JUBLIA (EXTERNAL SOLUTION)	Tier 1	DL
ketoconazole (external cream)	Tier 1	QL (90 GM per 30 days)
ketoconazole (external shampoo)	Tier 1	
mupirocin (external ointment)	Tier 1	QL (110 GM per 30 days)
mupirocin calcium (external cream)	Tier 1	DL
nyamyc (100000unit/gm external powder)	Tier 1	QL (120 GM per 30 days)
nystatin (external cream)	Tier 1	
nystatin (external ointment)	Tier 1	
nystatin (external powder)	Tier 1	QL (120 GM per 30 days)
nystop (external powder)	Tier 1	QL (120 GM per 30 days)
Electrolyte/Mineral Replacement		
Electrolytes/Minerals/Metals/Vitamins		
*ca cit/vit d tab 315/250 (tablet)**	$0 (OTC)	
*cal cit+d3 tab maximum (tablet)**	$0 (OTC)	
*calc citr+d3 tab 315-250 (tablet)**	$0 (OTC)	
*calcium + d tab 600-200 (tablet)**	$0 (OTC)	
*calcium + d tab 600mg (tablet)**	$0 (OTC)	
*calcium +d3 tab maximum (tablet)**	$0 (OTC)	
*calcium 600 tab (tablet)**	$0 (OTC)	
*calcium 600 tab +d (tablet)**	$0 (OTC)	

You can find information on what the symbols and abbreviations in this table mean by referring to pages 14 and 15.

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
calcium 600 tab +d/mnrls (tablet) *	$0 (OTC)	
calcium 600 tab +d3 (tablet) *	$0 (OTC)	
calcium carb tab 600mg (tablet) *	$0 (OTC)	
calcium citr tab w/vit d3 (tablet) *	$0 (OTC)	
calcium tab 600mg (tablet) *	$0 (OTC)	
calcium tab vit d (tablet) *	$0 (OTC)	
calcium+d3 tab 315-250 (tablet) *	$0 (OTC)	
calcium/d tab 600-200 (tablet) *	$0 (OTC)	
calcium/d3 tab 600-5 (tablet) *	$0 (OTC)	
calcium/d3 tab 600mg (tablet) *	$0 (OTC)	
cvs iron tab 325mg (tablet) *	$0 (OTC)	
eq calcium tab citr+d (tablet) *	$0 (OTC)	
eql calcium tab citr/d3 (tablet) *	$0 (OTC)	
ferrous gluc tab 324mg (tablet) *	$0 (OTC)	
ferrous sulf tab 325mg (tablet) *	$0 (OTC)	
ferrous sulf tab 325mg ec (tablet, tablet dr) *	$0 (OTC)	
ferrous sulf tab 5gr (tablet) *	$0 (OTC)	
ft calc citr tab +vita d3 (tablet) *	$0 (OTC)	
ft calcium tab 600mg (tablet) *	$0 (OTC)	
ft iron tab 325mg (tablet) *	$0 (OTC)	
ft iron tab 65mg (tablet) *	$0 (OTC)	
gnp calcium tab cit +d3 (tablet) *	$0 (OTC)	
hgh-pot iron tab 325mg (tablet) *	$0 (OTC)	
iron supplem tab therapy (tablet) *	$0 (OTC)	
iron tab 325mg (tablet) *	$0 (OTC)	
iron tab 65mg (tablet) *	$0 (OTC)	
MAGNEBIND TAB 300 (TABLET)*	$0 (OTC)	
nat-rul iron tab 325mg (tablet) *	$0 (OTC)	
pure calcium tab carbonat (tablet) *	$0 (OTC)	
qc calcium tab 600mg (tablet) *	$0 (OTC)	
super calciu tab 600mg (tablet) *	$0 (OTC)	
sv iron tab 325mg (tablet) *	$0 (OTC)	
Electrolytes/Minerals/Metals/Vitamins		
Electrolyte/Mineral Replacement		
carglumic acid (oral tablet soluble)	Tier 1	DL
CLINOLIPID (INTRAVENOUS EMULSION)	Tier 1	B/D, PA; DL

You can find information on what the symbols and abbreviations in this table mean by referring to pages 14 and 15.

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
dextrose (10% intravenous solution, 5% intravenous solution)	Tier 1	DL
dextrose-sodium chloride (10-0.2% intravenous solution, 10-0.45% intravenous solution, 2.5-0.45% intravenous solution, 5-0.2% intravenous solution, 5-0.45% intravenous solution, 5-0.9% intravenous solution)	Tier 1	DL
INTRALIPID (INTRAVENOUS EMULSION)	Tier 1	B/D, PA; DL
ISOLYTE-P IN D5W (INTRAVENOUS SOLUTION)	Tier 1	DL
ISOLYTE-S PH 7.4 (INTRAVENOUS SOLUTION)	Tier 1	DL
kcl in dextrose-nacl (intravenous solution)	Tier 1	DL
kcl-lactated ringers-d5w (intravenous solution)	Tier 1	DL
klor-con (oral packet)	Tier 1	
klor-con 10 (oral tablet extended release)	Tier 1	
klor-con 8 (oral tablet extended release)	Tier 1	
klor-con m10 (oral tablet extended release)	Tier 1	
klor-con m15 (oral tablet extended release)	Tier 1	
klor-con m20 (oral tablet extended release)	Tier 1	
l-glutamine (oral packet)	Tier 1	PA; DL
magnesium sulfate (injection solution)	Tier 1	DL
multiple electrolytes type 1 ph 7.4 (intravenous solution)	Tier 1	DL
NUTRILIPID (INTRAVENOUS EMULSION)	Tier 1	B/D, PA; DL
PLENAMINE (INTRAVENOUS SOLUTION)	Tier 1	B/D, PA; DL
potassium chloride (10meq/100ml intravenous solution, 20meq/100ml intravenous solution, 2meq/ml (30ml) intravenous solution, 2meq/ml (20ml) intravenous solution, 40meq/100ml intravenous solution)	Tier 1	DL
potassium chloride (20meq oral packet)	Tier 1	
potassium chloride (20meq/15ml(10%) oral solution, 40meq/15ml(20%) oral solution)	Tier 1	
potassium chloride er (oral capsule extended release)	Tier 1	
potassium chloride er (oral tablet extended release)	Tier 1	

You can find information on what the symbols and abbreviations in this table mean by referring to pages 14 and 15.

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
potassium chloride in dextrose 5% (20meq/l intravenous solution)	Tier 1	DL
potassium chloride in nacl (20-0.45meq/l-% intravenous solution, 20-0.9meq/l-% intravenous solution, 40-0.9meq/l-% intravenous solution)	Tier 1	DL
potassium chloride microencapsulated er (oral tablet extended release)	Tier 1	
potassium citrate er (oral tablet extended release)	Tier 1	
PREMASOL (INTRAVENOUS SOLUTION)	Tier 1	B/D, PA; DL
PROSOL (INTRAVENOUS SOLUTION)	Tier 1	B/D, PA; DL
sodium chloride (0.45% intravenous solution, 0.9% intravenous solution, 3% intravenous solution, 5% intravenous solution)	Tier 1	DL
sodium chloride (irrigation solution)	Tier 1	
sodium fluoride (oral tablet)	Tier 1	
TPN ELECTROLYTES (INTRAVENOUS CONCENTRATE)	Tier 1	DL
TRAVASOL (INTRAVENOUS SOLUTION)	Tier 1	B/D, PA; DL
TROPHAMINE (INTRAVENOUS SOLUTION)	Tier 1	B/D, PA; DL
Electrolyte/Mineral/Metal Modifiers		
deferasirox (oral tablet soluble) (generic exjade)	Tier 1	PA; DL
deferasirox (oral tablet) (generic jadenu)	Tier 1	PA
tolvaptan (15mg oral tablet, 30mg oral tablet) (generic jynarque)	Tier 1	PA; DL; QL (120 EA per 30 days)
tolvaptan (15mg oral tablet, 30mg oral tablet) (generic samsca)	Tier 1	PA; DL; QL (120 EA per 30 days)
trientine hcl (250mg oral capsule)	Tier 1	PA; DL; QL (240 EA per 30 days)
trientine hcl (500mg oral capsule)	Tier 1	PA; DL; QL (120 EA per 30 days)
Phosphate Binders		
calcium acetate (phosphate binder) (oral capsule)	Tier 1	B/D, PA
calcium acetate (phosphate binder) (oral tablet)	Tier 1	B/D, PA
sevelamer carbonate (oral packet)	Tier 1	B/D, PA; DL
sevelamer carbonate (oral tablet) (generic renvela)	Tier 1	B/D, PA; DL
Potassium Binders		

You can find information on what the symbols and abbreviations in this table mean by referring to pages 14 and 15.

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
LOKELMA (ORAL PACKET)	Tier 1	DL; QL (90 EA per 30 days)
sodium polystyrene sulfonate (combination suspension)	Tier 1	DL
sodium polystyrene sulfonate (oral powder)	Tier 1	
SPS (SODIUM POLYSTYRENE SULFATE) (COMBINATION SUSPENSION)	Tier 1	DL
VELTASSA (16.8GM ORAL PACKET, 25.2GM ORAL PACKET, 8.4GM ORAL PACKET)	Tier 1	DL; QL (30 EA per 30 days)
VELTASSA (1GM ORAL PACKET)	Tier 1	DL; QL (120 EA per 30 days)
Vitamins		
prenatal (27-1mg oral tablet)	Tier 1	
Gastrointestinal Agents		
Anti-Constipation Agents		
constulose (oral solution)	Tier 1	
enulose (oral solution)	Tier 1	
generlac (oral solution)	Tier 1	
lactulose (10gm/15ml oral solution)	Tier 1	
LINZESS (ORAL CAPSULE)	Tier 1	QL (30 EA per 30 days)
lubiprostone (oral capsule)	Tier 1	QL (60 EA per 30 days)
MOVANTIK (ORAL TABLET)	Tier 1	QL (30 EA per 30 days)
TRULANCE (ORAL TABLET)	Tier 1	QL (30 EA per 30 days)
Anti-Diarrheal Agents		
alosetron hcl (oral tablet)	Tier 1	PA; DL
diphenoxylate-atropine (oral tablet)	Tier 1	PA; DL
loperamide hcl (oral capsule)	Tier 1	
XERMELO (ORAL TABLET)	Tier 1	PA; DL; QL (84 EA per 28 days)
Antispasmodics, Gastrointestinal		
dicyclomine hcl (10mg/5ml oral solution)	Tier 1	PA; DL
dicyclomine hcl (20mg oral tablet)	Tier 1	PA; DL
dicyclomine hcl (oral capsule)	Tier 1	PA; DL

You can find information on what the symbols and abbreviations in this table mean by referring to pages 14 and 15.

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
glycopyrrolate (1mg oral tablet, 2mg oral tablet)	Tier 1	PA
methscopolamine bromide (oral tablet)	Tier 1	DL
Gastrointestinal Agents, Other		
BYLVAY (ORAL CAPSULE)	Tier 1	PA; DL
BYLVAY (PELLETS) (ORAL CAPSULE SPRINKLE)	Tier 1	PA; DL
CLENPIQ (ORAL SOLUTION)	Tier 1	
CTEXLI (ORAL TABLET)	Tier 1	PA; DL
gavilyte-c (oral solution reconstituted)	Tier 1	
gavilyte-g (oral solution reconstituted)	Tier 1	
gavilyte-n with flavor pack (oral solution reconstituted)	Tier 1	
peg-3350-electrolytes (oral solution) (generic golytely)	Tier 1	
peg-3350-nacl-na bicarbonate-kcl (oral solution) (generic nulytely)	Tier 1	
sodium sulfate-potassium sulfate-magnesium sulfate (oral solution)	Tier 1	
SUFLAVE (ORAL SOLUTION RECONSTITUTED)	Tier 1	DL
SUTAB (ORAL TABLET)	Tier 1	
ursodiol (300mg oral capsule)	Tier 1	
ursodiol (oral tablet)	Tier 1	DL
VOQUEZNA DUAL PAK (ORAL THERAPY PACK)	Tier 1	PA; DL
VOQUEZNA TRIPLE PAK (ORAL THERAPY PACK)	Tier 1	PA; DL
VOWST (ORAL CAPSULE)	Tier 1	PA; DL
Histamine2 (H2) Receptor Antagonists		
cimetidine (oral tablet)	Tier 1	
cimetidine hcl (oral solution)	Tier 1	
famotidine (20mg oral tablet, 40mg oral tablet)	Tier 1	
famotidine (oral suspension reconstituted)	Tier 1	DL
nizatidine (oral capsule)	Tier 1	
Protectants		
misoprostol (oral tablet)	Tier 1	
sucralfate (oral suspension)	Tier 1	DL
sucralfate (oral tablet)	Tier 1	

You can find information on what the symbols and abbreviations in this table mean by referring to pages 14 and 15.

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
Proton Pump Inhibitors		
dexlansoprazole (oral capsule delayed release)	Tier 1	DL; QL (30 EA per 30 days)
esomeprazole magnesium (20mg oral capsule delayed release) (generic nexium)	Tier 1	QL (90 EA per 30 days)
esomeprazole magnesium (40mg oral capsule delayed release) (generic nexium)	Tier 1	QL (60 EA per 30 days)
lansoprazole (oral capsule delayed release)	Tier 1	QL (60 EA per 30 days)
omeprazole (10mg oral capsule delayed release)	Tier 1	QL (90 EA per 30 days)
omeprazole (20mg oral capsule delayed release, 40mg oral capsule delayed release)	Tier 1	
pantoprazole sodium (20mg oral tablet delayed release)	Tier 1	QL (90 EA per 30 days)
pantoprazole sodium (40mg oral tablet delayed release)	Tier 1	QL (60 EA per 30 days)
rabeprazole sodium (oral tablet delayed release)	Tier 1	
VOQUEZNA (10MG ORAL TABLET)	Tier 1	PA; DL; QL (30 EA per 30 days)
VOQUEZNA (20MG ORAL TABLET)	Tier 1	PA; DL; QL (60 EA per 30 days)
Gastrointestinal Agents, Other		
Gastrointestinal Agents		
*alum/mag/sim sus (suspension)**	$0 (OTC)	
*alum/magnes/ sus simeth (suspension)**	$0 (OTC)	
*ant/anti-gas chw 1000-60 (tablet chewable)**	$0 (OTC)	
*antacid & sus anti-gas (suspension)**	$0 (OTC)	
*antacid & sus antigas (suspension)**	$0 (OTC)	
*antacid & sus gas relf (suspension)**	$0 (OTC)	
*antacid chw (tablet chewable)**	$0 (OTC)	
*antacid chw 1000mg (tablet chewable)**	$0 (OTC)	
*antacid chw 500mg (tablet chewable)**	$0 (OTC)	
*antacid chw 750mg (tablet chewable)**	$0 (OTC)	
*antacid extr chw 750mg (tablet chewable)**	$0 (OTC)	
*antacid fast sus relief (suspension)**	$0 (OTC)	
*antacid i sus (suspension)**	$0 (OTC)	

You can find information on what the symbols and abbreviations in this table mean by referring to pages 14 and 15.

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
antacid iii sus (suspension) *	$0 (OTC)	
antacid kids chw 750mg (tablet chewable) *	$0 (OTC)	
antacid liq sus (suspension) *	$0 (OTC)	
antacid m sus (suspension) *	$0 (OTC)	
antacid max chw 1000mg (tablet chewable) *	$0 (OTC)	
antacid max sus anti-gas (suspension) *	$0 (OTC)	
antacid max sus cherry (suspension) *	$0 (OTC)	
antacid mult chw -symptom (tablet chewable) *	$0 (OTC)	
antacid sus advanced (suspension) *	$0 (OTC)	
antacid sus anti-gas (suspension) *	$0 (OTC)	
antacid sus ex st (suspension) *	$0 (OTC)	
antacid sus max st (suspension) *	$0 (OTC)	
antacid sus mint (suspension) *	$0 (OTC)	
antacid ultr chw 1000mg (tablet chewable) *	$0 (OTC)	
antacid/gas chw multi-sy (tablet chewable) *	$0 (OTC)	
anti-gas cap 180mg (capsule) *	$0 (OTC)	
calcium carb chw 500mg (tablet chewable) *	$0 (OTC)	
childrens chw pepto (tablet chewable) *	$0 (OTC)	
comfort gel sus (suspension) *	$0 (OTC)	
comfort gel sus anti-gas (suspension) *	$0 (OTC)	
cvs antacid chw 1000mg (tablet chewable) *	$0 (OTC)	
cvs antacid chw 750mg (tablet chewable) *	$0 (OTC)	
cvs antacid sus anti-gas (suspension) *	$0 (OTC)	
cvs antacid sus antigas (suspension) *	$0 (OTC)	
cvs antacid sus max str (suspension) *	$0 (OTC)	
cvs antacid/ sus anti-gas (suspension) *	$0 (OTC)	
cvs gas relf chw 125mg (tablet chewable) *	$0 (OTC)	
cvs gas relf chw 80mg (tablet chewable) *	$0 (OTC)	
eq antacid chw 1000mg (tablet chewable) *	$0 (OTC)	
eq antacid chw 160-105 (tablet chewable) *	$0 (OTC)	
eq antacid chw 750mg (tablet chewable) *	$0 (OTC)	
eq antacid sus max st (suspension) *	$0 (OTC)	
eq gas relie cap 125mg (capsule) *	$0 (OTC)	
eq gas relie cap 180mg (capsule) *	$0 (OTC)	
eq gas relif cap 125mg (capsule) *	$0 (OTC)	
eql antacid chw 1000mg (tablet chewable) *	$0 (OTC)	

You can find information on what the symbols and abbreviations in this table mean by referring to pages 14 and 15.

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
*eql antacid chw fruit (tablet chewable) **	$0 (OTC)	
*eql antacid chw pepprmnt (tablet chewable) **	$0 (OTC)	
*eql gas gone chw 125mg (tablet chewable) **	$0 (OTC)	
*ft antacid chw 500mg (tablet chewable) **	$0 (OTC)	
*ft antacid chw 750mg (tablet chewable) **	$0 (OTC)	
*ft antacid sus antigas (suspension) **	$0 (OTC)	
*ft gas relf chw 80mg (tablet chewable) **	$0 (OTC)	
*ft gas relie chw 125mg (tablet chewable) **	$0 (OTC)	
*gas relief cap 125mg (capsule) **	$0 (OTC)	
*gas relief cap 180mg (capsule) **	$0 (OTC)	
*gas relief chw 125mg (tablet chewable) **	$0 (OTC)	
*gas relief chw 80mg (tablet chewable) **	$0 (OTC)	
*gas relief dro 20/0.3ml (suspension) **	$0 (OTC)	
*gas relief dro 40/0.6ml (suspension) **	$0 (OTC)	
*gas relief dro infants (suspension) **	$0 (OTC)	
*gas relief sus (suspension) **	$0 (OTC)	
*gas relief sus infants (suspension) **	$0 (OTC)	
*geri-lanta sus (suspension) **	$0 (OTC)	
*geri-lanta sus max st (suspension) **	$0 (OTC)	
*geri-mox sus (suspension) **	$0 (OTC)	
*gnp antacid chw 1000mg (tablet chewable) **	$0 (OTC)	
*gnp antacid chw 160-105 (tablet chewable) **	$0 (OTC)	
*gnp antacid chw 750mg (tablet chewable) **	$0 (OTC)	
*gnp antacid sus cherry (suspension) **	$0 (OTC)	
*gnp antacid sus coolmint (suspension) **	$0 (OTC)	
*gnp antacid sus original (suspension) **	$0 (OTC)	
*gnp antacid sus reg st (suspension) **	$0 (OTC)	
*gnp anti-gas cap 180mg (capsule) **	$0 (OTC)	
*gnp gas relf chw 125mg (tablet chewable) **	$0 (OTC)	
*gnp gas relf chw 80mg (tablet chewable) **	$0 (OTC)	
*goodsense sus ant/gas (suspension) **	$0 (OTC)	
*goodsense sus antacid (suspension) **	$0 (OTC)	
*heartbrn ant chw 160-105 (tablet chewable) **	$0 (OTC)	
*heartbrn rel sus cherry (suspension) **	$0 (OTC)	
*heartbrn rlf chw 160-105 (tablet chewable) **	$0 (OTC)	
*heartburn chw ex st (tablet chewable) **	$0 (OTC)	

You can find information on what the symbols and abbreviations in this table mean by referring to pages 14 and 15.

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
*heartburn sus relief (suspension) **	$0 (OTC)	
*hm antacid chw 750mg (tablet chewable) **	$0 (OTC)	
*qc antacid chw 1000mg (tablet chewable) **	$0 (OTC)	
*qc antacid chw 500mg (tablet chewable) **	$0 (OTC)	
*qc antacid chw 750mg (tablet chewable) **	$0 (OTC)	
*qc antacid sus (suspension) **	$0 (OTC)	
*qc antacid sus anti-gas (suspension) **	$0 (OTC)	
*qc antacid sus max str (suspension) **	$0 (OTC)	
*qc gas relf chw 125mg (tablet chewable) **	$0 (OTC)	
*qc gas relie cap 250mg (capsule) **	$0 (OTC)	
*sb antacid sus anti-gas (suspension) **	$0 (OTC)	
*sb gas relf chw 125mg (tablet chewable) **	$0 (OTC)	
*simethicone cap 125mg (capsule) **	$0 (OTC)	
*simethicone cap 180mg (capsule) **	$0 (OTC)	
*simethicone chw 125mg (tablet chewable) **	$0 (OTC)	
*simethicone chw 80mg (tablet chewable) **	$0 (OTC)	
*simethicone dro 40/0.6ml (suspension) **	$0 (OTC)	
*simethicone sus 20/0.3ml (suspension) **	$0 (OTC)	
*sm antacid sus advanced (suspension) **	$0 (OTC)	
*smooth anta chw fruit (tablet chewable) **	$0 (OTC)	
*smooth antac chw 750mg (tablet chewable) **	$0 (OTC)	
*sodium bicar tab 10gr (tablet) **	$0 (OTC)	
*sodium bicar tab 325mg (tablet) **	$0 (OTC)	
*sodium bicar tab 650mg (tablet) **	$0 (OTC)	
Genetic or Enzyme or Protein Disorder: Replacement, Modifiers, Treatment		
Genetic or Enzyme or Protein Disorder: Replacement, Modifiers, Treatment		
betaine (oral powder)	Tier 1	DL
CHOLBAM (ORAL CAPSULE)	Tier 1	PA; DL
CREON (ORAL CAPSULE DELAYED RELEASE PARTICLES)	Tier 1	
cromolyn sodium (oral concentrate)	Tier 1	
CYSTAGON (ORAL CAPSULE)	Tier 1	DL
levocarnitine (oral solution)	Tier 1	
levocarnitine (oral tablet)	Tier 1	
miglustat (oral capsule)	Tier 1	PA; DL
nitisinone (oral capsule)	Tier 1	DL

You can find information on what the symbols and abbreviations in this table mean by referring to pages 14 and 15.

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
PROLASTIN-C (INTRAVENOUS SOLUTION)	Tier 1	PA; DL
PYRUKYND (20MG ORAL TABLET, 5MG ORAL TABLET)	Tier 1	PA; DL; QL (56 EA per 28 days)
PYRUKYND (50MG ORAL TABLET)	Tier 1	PA; DL; QL (112 EA per 28 days)
PYRUKYND TAPER PACK (5MG ORAL TABLET THERAPY PACK)	Tier 1	PA; DL; QL (7 EA per 7 days)
PYRUKYND TAPER PACK (7 X 20MG & 7 X 5MG ORAL TABLET THERAPY PACK, 7 X 50MG & 7 X 20MG ORAL TABLET THERAPY PACK)	Tier 1	PA; DL; QL (14 EA per 14 days)
REVCOVI (INTRAMUSCULAR SOLUTION)	Tier 1	PA; DL
sapropterin dihydrochloride (oral packet)	Tier 1	DL
sapropterin dihydrochloride (oral tablet)	Tier 1	DL
sodium phenylbutyrate (oral powder)	Tier 1	DL
sodium phenylbutyrate (oral tablet)	Tier 1	DL
SUCRAID (ORAL SOLUTION)	Tier 1	DL
VYNDAMAX (ORAL CAPSULE)	Tier 1	PA; DL; QL (30 EA per 30 days)
WELIREG (ORAL TABLET)	Tier 1	PA; DL; QL (90 EA per 30 days)
yargesa (oral capsule)	Tier 1	PA; DL
zelvysia (oral packet)	Tier 1	DL
ZENPEP (ORAL CAPSULE DELAYED RELEASE PARTICLES)	Tier 1	
ZOKINVY (ORAL CAPSULE)	Tier 1	PA; DL; QL (120 EA per 30 days)
Genitourinary Agents		
Antispasmodics, Urinary		
GEMTESA (ORAL TABLET)	Tier 1	DL
MYRBETRIQ (ORAL SUSPENSION RECONSTITUTED ER)	Tier 1	
MYRBETRIQ (ORAL TABLET EXTENDED RELEASE 24 HOUR)	Tier 1	
oxybutynin chloride (5mg oral tablet immediate release)	Tier 1	PA
oxybutynin chloride (oral solution)	Tier 1	PA

You can find information on what the symbols and abbreviations in this table mean by referring to pages 14 and 15.

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
oxybutynin chloride er (10mg oral tablet extended release 24 hour)	Tier 1	PA; QL (90 EA per 30 days)
oxybutynin chloride er (15mg oral tablet extended release 24 hour)	Tier 1	PA; QL (60 EA per 30 days)
oxybutynin chloride er (5mg oral tablet extended release 24 hour)	Tier 1	PA; QL (30 EA per 30 days)
solifenacin succinate (oral tablet)	Tier 1	PA; QL (30 EA per 30 days)
tolterodine tartrate (oral tablet)	Tier 1	DL
tolterodine tartrate er (oral capsule extended release 24 hour)	Tier 1	DL
trospium chloride (oral tablet)	Tier 1	
Benign Prostatic Hypertrophy Agents		
alfuzosin hcl er (oral tablet extended release 24 hour)	Tier 1	
dutasteride (oral capsule)	Tier 1	QL (30 EA per 30 days)
finasteride (5mg oral tablet) (generic proscar)	Tier 1	
silodosin (oral capsule)	Tier 1	QL (30 EA per 30 days)
tadalafil (2.5mg oral tablet, 5mg oral tablet)	Tier 1	PA; DL; QL (30 EA per 30 days)
tamsulosin hcl (oral capsule)	Tier 1	
terazosin hcl (oral capsule)	Tier 1	
Genitourinary Agents, Other		
bethanechol chloride (oral tablet)	Tier 1	
penicillamine (oral tablet)	Tier 1	DL
Histamine2 (H2) Receptor Antagonists		
Gastrointestinal Agents		
*acid control tab 10mg (tablet)**	$0 (OTC)	
*acid reducer tab 10mg (tablet)**	$0 (OTC)	
*eq famotidin tab 10mg (tablet)**	$0 (OTC)	
*eql heartbrn tab 10mg (tablet)**	$0 (OTC)	
*famotidine tab 10mg (tablet)**	$0 (OTC)	
PEPCID AC TAB 10MG (TABLET)*	$0 (OTC)	
*qc famotidin tab acid red (tablet)**	$0 (OTC)	
Hormonal Agents, Stimulant/Replacement/Modifying (Adrenal)		

You can find information on what the symbols and abbreviations in this table mean by referring to pages 14 and 15.

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
Hormonal Agents, Stimulant/Replacement/Modifying (Adrenal)		
deflazacort (oral suspension)	Tier 1	PA; DL
deflazacort (oral tablet)	Tier 1	PA; DL
dexamethasone (oral solution)	Tier 1	
dexamethasone (oral tablet)	Tier 1	
fludrocortisone acetate (oral tablet)	Tier 1	
hydrocortisone (oral tablet)	Tier 1	
jaythari (oral suspension)	Tier 1	PA; DL
jaythari (oral tablet)	Tier 1	PA; DL
kymbee (oral suspension)	Tier 1	PA; DL
kymbee (oral tablet)	Tier 1	PA; DL
methylprednisolone (oral tablet therapy pack)	Tier 1	
methylprednisolone (oral tablet)	Tier 1	
prednisolone (oral solution)	Tier 1	
prednisolone sodium phosphate (25mg/5ml oral solution, 5mg/5ml oral solution)	Tier 1	
prednisone (10mg (21) oral tablet therapy pack, 10mg (48) oral tablet therapy pack, 5mg (21) oral tablet therapy pack, 5mg (48) oral tablet therapy pack)	Tier 1	
prednisone (10mg oral tablet, 1mg oral tablet, 2.5mg oral tablet, 20mg oral tablet, 50mg oral tablet, 5mg oral tablet)	Tier 1	
prednisone (5mg/5ml oral solution)	Tier 1	
prednisone intensol (oral concentrate)	Tier 1	
pyquvi (oral suspension)	Tier 1	PA; DL
Hormonal Agents, Stimulant/Replacement/Modifying (Pituitary)		
Hormonal Agents, Stimulant/Replacement/Modifying (Pituitary)		
desmopressin acetate (oral tablet)	Tier 1	
desmopressin acetate spray (nasal solution)	Tier 1	DL
FOLLISTIM AQ INJ 300UNIT (SOLUTION)*	$0 (OTC)	
FOLLISTIM AQ INJ 600UNIT (SOLUTION)*	$0 (OTC)	
FOLLISTIM AQ INJ 900UNIT (SOLUTION)*	$0 (OTC)	
GENOTROPIN (SUBCUTANEOUS CARTRIDGE)	Tier 1	PA; DL
GENOTROPIN MINIQUICK (0.2MG SUBCUTANEOUS PREFILLED SYRINGE)	Tier 1	PA; DL

You can find information on what the symbols and abbreviations in this table mean by referring to pages 14 and 15.

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
GENOTROPIN MINIQUICK (0.4MG SUBCUTANEOUS PREFILLED SYRINGE, 0.6MG SUBCUTANEOUS PREFILLED SYRINGE, 0.8MG SUBCUTANEOUS PREFILLED SYRINGE, 1.2MG SUBCUTANEOUS PREFILLED SYRINGE, 1.4MG SUBCUTANEOUS PREFILLED SYRINGE, 1.6MG SUBCUTANEOUS PREFILLED SYRINGE, 1.8MG SUBCUTANEOUS PREFILLED SYRINGE, 1MG SUBCUTANEOUS PREFILLED SYRINGE, 2MG SUBCUTANEOUS PREFILLED SYRINGE)	Tier 1	PA; DL
GONAL-F INJ 1050UNIT (SOLUTION RECONSTITUTED)*	$0 (OTC)	
GONAL-F INJ 450UNIT (SOLUTION RECONSTITUTED)*	$0 (OTC)	
GONAL-F RFF INJ 300/0.48 (SOLN PEN-INJ)*	$0 (OTC)	
GONAL-F RFF INJ 450/0.72 (SOLN PEN-INJ)*	$0 (OTC)	
GONAL-F RFF INJ 75UNIT (SOLUTION RECONSTITUTED)*	$0 (OTC)	
GONAL-F RFF INJ 900/1.44 (SOLN PEN-INJ)*	$0 (OTC)	
INCRELEX (SUBCUTANEOUS SOLUTION)	Tier 1	PA; DL
Hormonal Agents, Stimulant/Replacement/Modifying (Sex Hormones/Modifiers)		
Androgens		
danazol (oral capsule)	Tier 1	DL
testosterone (20.25mg/1.25gm 1.62% transdermal gel, 40.5mg/2.5gm 1.62% transdermal gel), testosterone pump (1.62% transdermal gel)	Tier 1	DL
testosterone (25mg/2.5gm 1% transdermal gel, 50mg/5gm 1% transdermal gel), testosterone pump (1% transdermal gel)	Tier 1	
testosterone cypionate (intramuscular solution)	Tier 1	
testosterone enanthate (intramuscular solution)	Tier 1	
Estrogens		
altavera (oral tablet)	Tier 1	
alyacen 1/35 (oral tablet)	Tier 1	
apri (oral tablet)	Tier 1	
aranelle (oral tablet)	Tier 1	
ashlyna (oral tablet)	Tier 1	
aubra eq (oral tablet)	Tier 1	

You can find information on what the symbols and abbreviations in this table mean by referring to pages 14 and 15.

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
aviane (oral tablet)	Tier 1	
azurette (oral tablet)	Tier 1	
balziva (oral tablet)	Tier 1	
blisovi 24 fe (oral tablet)	Tier 1	
blisovi fe 1.5/30 (oral tablet)	Tier 1	
briellyn (oral tablet)	Tier 1	
camrese lo (oral tablet)	Tier 1	
CLIMARA PRO (TRANSDERMAL PATCH WEEKLY)	Tier 1	DL
cryselle (oral tablet)	Tier 1	
cyred eq (oral tablet)	Tier 1	
DEPO-ESTRADIOL (INTRAMUSCULAR OIL)	Tier 1	DL
dolishale (oral tablet)	Tier 1	
drospirenone-ethinyl estradiol (oral tablet)	Tier 1	
DUAVEE (ORAL TABLET)	Tier 1	DL
eluryng (vaginal ring)	Tier 1	
enilloring (vaginal ring)	Tier 1	
enskyce (oral tablet)	Tier 1	
estarylla (oral tablet)	Tier 1	
estradiol (0.75mg/1.25gm(0.06%) transdermal gel)	Tier 1	DL
estradiol (oral tablet)	Tier 1	
estradiol (transdermal patch weekly)	Tier 1	QL (4 EA per 28 days)
estradiol (vaginal cream)	Tier 1	
estradiol (vaginal tablet)	Tier 1	DL; QL (18 EA per 28 days)
estradiol valerate (intramuscular oil)	Tier 1	DL
ESTRING (VAGINAL RING)	Tier 1	DL
etonogestrel-ethinyl estradiol (vaginal ring)	Tier 1	
falmina (oral tablet)	Tier 1	
feirza 1.5/30 (oral tablet)	Tier 1	
feirza 1/20 (oral tablet)	Tier 1	
finzala (oral tablet chewable)	Tier 1	
fyavolv (oral tablet)	Tier 1	DL
galbriela (oral tablet chewable)	Tier 1	

You can find information on what the symbols and abbreviations in this table mean by referring to pages 14 and 15.

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
hailey 24 fe (oral tablet)	Tier 1	
hailey fe 1/20 (oral tablet)	Tier 1	
iclevia (oral tablet)	Tier 1	
introvale (oral tablet)	Tier 1	
isibloom (oral tablet)	Tier 1	
jaimiess (oral tablet)	Tier 1	
jasmiel (oral tablet)	Tier 1	
jinteli (oral tablet)	Tier 1	DL
juleber (oral tablet)	Tier 1	
junel 1.5/30 (oral tablet)	Tier 1	
junel 1/20 (oral tablet)	Tier 1	
junel fe 1.5/30 (oral tablet)	Tier 1	
junel fe 1/20 (oral tablet)	Tier 1	
junel fe 24 (oral tablet)	Tier 1	
kaitlib fe (oral tablet chewable)	Tier 1	
kariva (oral tablet)	Tier 1	
kelnor 1/35 (oral tablet)	Tier 1	
kurvelo (oral tablet)	Tier 1	
larin 1.5/30 (oral tablet)	Tier 1	
larin 1/20 (oral tablet)	Tier 1	
larin fe 1.5/30 (oral tablet)	Tier 1	
larin fe 1/20 (oral tablet)	Tier 1	
lessina (oral tablet)	Tier 1	
levonest (oral tablet)	Tier 1	
levonorgestrel-ethinyl estradiol (0.1-20mg-mcg oral tablet, 90-20mcg oral tablet)	Tier 1	
levonorgestrel-ethinyl estradiol 91-day (0.1-0.02 & 0.01mg oral tablet, 0.15-0.03mg oral tablet)	Tier 1	
levonorgestrel-ethinyl estradiol triphasic (oral tablet)	Tier 1	
lojaimiess (oral tablet)	Tier 1	
loryna (oral tablet)	Tier 1	
low-ogestrel (oral tablet)	Tier 1	
luizza 1.5/30 (oral tablet)	Tier 1	
luizza 1/20 (oral tablet)	Tier 1	
marlissa (oral tablet)	Tier 1	

You can find information on what the symbols and abbreviations in this table mean by referring to pages 14 and 15.

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
mibelas 24 fe (oral tablet chewable)	Tier 1	
microgestin 1.5/30 (oral tablet)	Tier 1	
microgestin 1/20 (oral tablet)	Tier 1	
microgestin fe 1.5/30 (oral tablet)	Tier 1	
microgestin fe 1/20 (oral tablet)	Tier 1	
mili (oral tablet)	Tier 1	
necon 0.5/35 (28) (oral tablet)	Tier 1	
nikki (oral tablet)	Tier 1	
norelgestromin-ethinyl estradiol (transdermal patch weekly)	Tier 1	
norethindrone acetate-ethinyl estradiol (0.5-2.5mg-mcg oral tablet, 1-5mg-mcg oral tablet)	Tier 1	DL
norethindrone acetate-ethinyl estradiol (1-20mg-mcg oral tablet)	Tier 1	
norethindrone acetate-ethinyl estradiol-fe (1-20mg-mcg oral tablet chewable)	Tier 1	
norgestimate-ethinyl estradiol (0.25-35mg-mcg oral tablet)	Tier 1	
norgestimate-ethinyl estradiol triphasic (oral tablet)	Tier 1	
nortrel 0.5/35 (28) (oral tablet)	Tier 1	
nortrel 1/35 (21) (oral tablet)	Tier 1	
nortrel 1/35 (28) (oral tablet)	Tier 1	
nortrel 7/7/7 (oral tablet)	Tier 1	
nylia 1/35 (oral tablet)	Tier 1	
nylia 7/7/7 (oral tablet)	Tier 1	
pimtrea (oral tablet)	Tier 1	
portia-28 (oral tablet)	Tier 1	
PREMARIN (ORAL TABLET)	Tier 1	DL; QL (30 EA per 30 days)
PREMARIN (VAGINAL CREAM)	Tier 1	
PREMPHASE (ORAL TABLET)	Tier 1	DL; QL (28 EA per 28 days)
PREMPRO (ORAL TABLET)	Tier 1	DL; QL (28 EA per 28 days)
reclipsen (oral tablet)	Tier 1	

You can find information on what the symbols and abbreviations in this table mean by referring to pages 14 and 15.

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
rivelsa (oral tablet)	Tier 1	
rosyrah (oral tablet)	Tier 1	
setlakin (oral tablet)	Tier 1	
sprintec 28 (oral tablet)	Tier 1	
syeda (oral tablet)	Tier 1	
tarina 24 fe (oral tablet)	Tier 1	
tarina fe 1/20 eq (oral tablet)	Tier 1	
tilia fe (oral tablet)	Tier 1	
tri-estarylla (oral tablet)	Tier 1	
tri-legest fe (oral tablet)	Tier 1	
tri-lo-estarylla (oral tablet)	Tier 1	
tri-lo-sprintec (oral tablet)	Tier 1	
tri-mili (oral tablet)	Tier 1	
tri-sprintec (oral tablet)	Tier 1	
tri-vylibra (oral tablet)	Tier 1	
tri-vylibra lo (oral tablet)	Tier 1	
turqoz (oral tablet)	Tier 1	
valtya 1/35 (oral tablet)	Tier 1	
valtya 1/50 (oral tablet)	Tier 1	
velivet (oral tablet)	Tier 1	
vestura (oral tablet)	Tier 1	
vienva (oral tablet)	Tier 1	
viorele (oral tablet)	Tier 1	
vyfemla (oral tablet)	Tier 1	
vylibra (oral tablet)	Tier 1	
wymzya fe (oral tablet chewable)	Tier 1	
xarah fe (oral tablet)	Tier 1	
xelria fe (oral tablet chewable)	Tier 1	
xulane (transdermal patch weekly)	Tier 1	
yuvafem (vaginal tablet)	Tier 1	DL; QL (18 EA per 28 days)
zafemy (transdermal patch weekly)	Tier 1	
zovia 1/35 (28) (oral tablet)	Tier 1	
Progestins		
camila (oral tablet)	Tier 1	
CRINONE (8% VAGINAL GEL)	Tier 1	PA; DL

You can find information on what the symbols and abbreviations in this table mean by referring to pages 14 and 15.

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
deblitane (oral tablet)	Tier 1	
DEPO-SUBQ PROVERA 104 (SUBCUTANEOUS SUSPENSION PREFILLED SYRINGE)	Tier 1	
errin (oral tablet)	Tier 1	
gallifrey (oral tablet)	Tier 1	
heather (oral tablet)	Tier 1	
incassia (oral tablet)	Tier 1	
LILETTA (52MG) (INTRAUTERINE DEVICE)	Tier 1	
lyleq (oral tablet)	Tier 1	
lyza (oral tablet)	Tier 1	
medroxyprogesterone acetate (intramuscular suspension prefilled syringe)	Tier 1	
medroxyprogesterone acetate (intramuscular suspension)	Tier 1	
medroxyprogesterone acetate (oral tablet)	Tier 1	
megestrol acetate (40mg/ml oral suspension)	Tier 1	
megestrol acetate (625mg/5ml oral suspension)	Tier 1	DL
megestrol acetate (oral tablet)	Tier 1	
meleya (oral tablet)	Tier 1	
NEXPLANON (SUBCUTANEOUS IMPLANT)	Tier 1	
nora-be (oral tablet)	Tier 1	
norethindrone (0.35mg oral tablet)	Tier 1	
norethindrone acetate (5mg oral tablet)	Tier 1	
orquidea (oral tablet)	Tier 1	
progesterone (oral capsule)	Tier 1	
sharobel (oral tablet)	Tier 1	
Selective Estrogen Receptor Modifying Agents		
OSPHENA (ORAL TABLET)	Tier 1	PA; QL (30 EA per 30 days)
raloxifene hcl (oral tablet)	Tier 1	QL (30 EA per 30 days)
Hormonal Agents, Stimulant/Replacement/Modifying (Thyroid)		
Hormonal Agents, Stimulant/Replacement/Modifying (Thyroid)		
levothyroxine sodium (oral tablet)	Tier 1	
levoxyl (oral tablet)	Tier 1	
liomny (oral tablet)	Tier 1	

You can find information on what the symbols and abbreviations in this table mean by referring to pages 14 and 15.

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
liothyronine sodium (oral tablet)	Tier 1	
SYNTHROID (ORAL TABLET)	Tier 1	
unithroid (oral tablet)	Tier 1	
Hormonal Agents, Suppressant (Adrenal or Pituitary)		
Hormonal Agents, Suppressant (Adrenal or Pituitary)		
bromocriptine mesylate (oral capsule)	Tier 1	
bromocriptine mesylate (oral tablet)	Tier 1	
cabergoline (oral tablet)	Tier 1	
*cetrorelix kit 0.25mg (kit)**	$0 (OTC)	
CETROTIDE KIT 0.25MG (KIT)*	$0 (OTC)	
ELIGARD (22.5MG SUBCUTANEOUS KIT)	Tier 1	PA; DL; QL (1 EA per 84 days)
ELIGARD (30MG SUBCUTANEOUS KIT)	Tier 1	PA; DL; QL (1 EA per 112 days)
ELIGARD (45MG SUBCUTANEOUS KIT)	Tier 1	PA; DL; QL (1 EA per 168 days)
ELIGARD (7.5MG SUBCUTANEOUS KIT)	Tier 1	PA; DL; QL (1 EA per 28 days)
FIRMAGON (240MG DOSE) (120MG/VIAL SUBCUTANEOUS SOLUTION RECONSTITUTED)	Tier 1	PA; DL; QL (4 EA per 365 days)
FIRMAGON (80MG SUBCUTANEOUS SOLUTION RECONSTITUTED)	Tier 1	PA; DL; QL (1 EA per 28 days)
FYREMADEL SOL 250/0.5 (SOLN PREF SYR)*	$0 (OTC)	
*ganirelix ac inj 250/0.5 (soln pref syr)**	$0 (OTC)	
leuprolide acetate (subcutaneous injection kit)	Tier 1	PA; DL; QL (2 EA per 28 days)
LUPRON DEPOT (1-MONTH) (INTRAMUSCULAR KIT)	Tier 1	PA; DL; QL (1 EA per 28 days)
LUPRON DEPOT (3-MONTH) (INTRAMUSCULAR KIT)	Tier 1	PA; DL; QL (1 EA per 84 days)
LUPRON DEPOT (4-MONTH) (INTRAMUSCULAR KIT)	Tier 1	PA; DL; QL (1 EA per 112 days)
LUPRON DEPOT (6-MONTH) (INTRAMUSCULAR KIT)	Tier 1	PA; DL; QL (1 EA per 168 days)
LUPRON DEPOT-PED (1-MONTH) (7.5MG INTRAMUSCULAR KIT)	Tier 1	PA; DL; QL (1 EA per 28 days)

You can find information on what the symbols and abbreviations in this table mean by referring to pages 14 and 15.

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
LUPRON DEPOT-PED (3-MONTH) (11.25MG INTRAMUSCULAR KIT)	Tier 1	PA; DL; QL (1 EA per 84 days)
LUPRON DEPOT-PED (6-MONTH) (INTRAMUSCULAR KIT)	Tier 1	PA; DL; QL (1 EA per 168 days)
MENOPUR INJ 75UNIT (SOLUTION RECONSTITUTED)*	$0 (OTC)	
mifepristone (300mg oral tablet)	Tier 1	PA; DL; QL (120 EA per 30 days)
octreotide acetate (injection solution)	Tier 1	PA; DL
SIGNIFOR (SUBCUTANEOUS SOLUTION)	Tier 1	PA; DL
SOMAVERT (SUBCUTANEOUS SOLUTION RECONSTITUTED)	Tier 1	PA; DL; QL (30 EA per 30 days)
Hormonal Agents, Suppressant (Thyroid)		
Antithyroid Agents		
methimazole (oral tablet)	Tier 1	
propylthiouracil (oral tablet)	Tier 1	
Immunological Agents		
Angioedema Agents		
HAEGARDA (SUBCUTANEOUS SOLUTION RECONSTITUTED)	Tier 1	PA; DL
icatibant acetate (subcutaneous solution prefilled syringe)	Tier 1	PA; DL; QL (36 ML per 30 days)
Immunoglobulins		
GAMUNEX-C (1GM/10ML INJECTION SOLUTION)	Tier 1	PA; DL
OCTAGAM (1GM/20ML INTRAVENOUS SOLUTION, 2GM/20ML INTRAVENOUS SOLUTION)	Tier 1	PA; DL
Immunological Agents, Other		
ARCALYST (SUBCUTANEOUS SOLUTION RECONSTITUTED)	Tier 1	PA; DL
AVTOZMA (SUBCUTANEOUS SOLUTION AUTO-INJECTOR)	Tier 1	PA; DL; QL (3.6 ML per 28 days)
AVTOZMA (SUBCUTANEOUS SOLUTION PREFILLED SYRINGE)	Tier 1	PA; DL; QL (3.6 ML per 28 days)
BENLYSTA (SUBCUTANEOUS SOLUTION AUTO-INJECTOR)	Tier 1	PA; DL

You can find information on what the symbols and abbreviations in this table mean by referring to pages 14 and 15.

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
BENLYSTA (SUBCUTANEOUS SOLUTION PREFILLED SYRINGE)	Tier 1	PA; DL
COSENTYX (300MG DOSE) (SUBCUTANEOUS SOLUTION PREFILLED SYRINGE)	Tier 1	PA; DL; QL (10 ML per 30 days)
COSENTYX (75MG/0.5ML SUBCUTANEOUS SOLUTION PREFILLED SYRINGE)	Tier 1	PA; DL; QL (10 ML per 30 days)
COSENTYX SENSOREADY (300MG) (SUBCUTANEOUS SOLUTION AUTO-INJECTOR)	Tier 1	PA; DL; QL (10 ML per 30 days)
COSENTYX UNOREADY (SUBCUTANEOUS SOLUTION AUTO-INJECTOR)	Tier 1	PA; DL; QL (10 ML per 30 days)
DUPIXENT (200MG/1.14ML SUBCUTANEOUS SOLUTION AUTO-INJECTOR)	Tier 1	PA; DL; QL (4.56 ML per 28 days)
DUPIXENT (200MG/1.14ML SUBCUTANEOUS SOLUTION PREFILLED SYRINGE)	Tier 1	PA; DL; QL (4.56 ML per 28 days)
DUPIXENT (300MG/2ML SUBCUTANEOUS SOLUTION AUTO-INJECTOR)	Tier 1	PA; DL; QL (8 ML per 28 days)
DUPIXENT (300MG/2ML SUBCUTANEOUS SOLUTION PREFILLED SYRINGE)	Tier 1	PA; DL; QL (8 ML per 28 days)
EBGLYSS (SUBCUTANEOUS SOLUTION AUTO-INJECTOR)	Tier 1	PA; DL
EBGLYSS (SUBCUTANEOUS SOLUTION PREFILLED SYRINGE)	Tier 1	PA; DL
ENTYVIO PEN (SUBCUTANEOUS SOLUTION AUTO-INJECTOR)	Tier 1	PA; DL; QL (1.36 ML per 28 days)
KINERET (SUBCUTANEOUS SOLUTION PREFILLED SYRINGE)	Tier 1	PA; DL
OTEZLA (ORAL TABLET IMMEDIATE RELEASE)	Tier 1	PA; DL; QL (60 EA per 30 days)
OTEZLA (ORAL TABLET THERAPY PACK)	Tier 1	PA; DL; QL (110 EA per 365 days)
OTEZLA XR (ORAL TABLET EXTENDED RELEASE 24 HOUR)	Tier 1	PA; DL; QL (30 EA per 30 days)
OTEZLA/OTEZLA XR INITIATION PACK (ORAL TABLET THERAPY PACK)	Tier 1	PA; DL; QL (82 EA per 365 days)
RINVOQ (ORAL TABLET EXTENDED RELEASE 24 HOUR)	Tier 1	PA; DL; QL (30 EA per 30 days)
RINVOQ LQ (ORAL SOLUTION)	Tier 1	PA; DL; QL (360 ML per 30 days)

You can find information on what the symbols and abbreviations in this table mean by referring to pages 14 and 15.

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
SKYRIZI (150MG/ML SUBCUTANEOUS SOLUTION PREFILLED SYRINGE)	Tier 1	PA; DL; QL (1 ML per 28 days)
SKYRIZI (180MG/1.2ML SUBCUTANEOUS SOLUTION CARTRIDGE)	Tier 1	PA; DL; QL (1.2 ML per 56 days)
SKYRIZI (360MG/2.4ML SUBCUTANEOUS SOLUTION CARTRIDGE)	Tier 1	PA; DL; QL (2.4 ML per 56 days)
SKYRIZI (55MG/0.37ML SUBCUTANEOUS SOLUTION PREFILLED SYRINGE)	Tier 1	PA; DL; QL (0.37 ML per 28 days)
SKYRIZI PEN (SUBCUTANEOUS SOLUTION AUTO-INJECTOR)	Tier 1	PA; DL; QL (1 ML per 28 days)
SOTYKTU (ORAL TABLET)	Tier 1	PA; DL; QL (30 EA per 30 days)
STARJEMZA (SUBCUTANEOUS SOLUTION PREFILLED SYRINGE)	Tier 1	PA; DL; QL (3 ML per 84 days)
STARJEMZA (SUBCUTANEOUS SOLUTION)	Tier 1	PA; DL; QL (3 ML per 84 days)
STEQEYMA (45MG/0.5ML SUBCUTANEOUS SOLUTION PREFILLED SYRINGE)	Tier 1	PA; QL (3 ML per 84 days)
STEQEYMA (90MG/ML SUBCUTANEOUS SOLUTION PREFILLED SYRINGE)	Tier 1	PA; DL; QL (3 ML per 84 days)
STEQEYMA (SUBCUTANEOUS SOLUTION)	Tier 1	PA; QL (3 ML per 84 days)
TEZSPIRE (SUBCUTANEOUS SOLUTION AUTO-INJECTOR)	Tier 1	PA; DL; QL (1.91 ML per 28 days)
tofacitinib citrate (oral solution)	Tier 1	PA; DL; QL (300 ML per 30 days)
tofacitinib citrate (oral tablet)	Tier 1	PA; DL; QL (60 EA per 30 days)
tofacitinib citrate er (oral tablet extended release 24 hour)	Tier 1	PA; DL; QL (30 EA per 30 days)
TREMFYA (100MG/ML SUBCUTANEOUS SOLUTION PREFILLED SYRINGE)	Tier 1	PA; DL; QL (2 ML per 56 days)
TREMFYA (200MG/2ML SUBCUTANEOUS SOLUTION PREFILLED SYRINGE)	Tier 1	PA; DL; QL (2 ML per 28 days)
TREMFYA ONE-PRESS (100MG/ML SUBCUTANEOUS SOLUTION PEN-INJECTOR)	Tier 1	PA; DL; QL (2 ML per 56 days)
TREMFYA PEN (200MG/2ML SUBCUTANEOUS SOLUTION AUTO-INJECTOR)	Tier 1	PA; DL; QL (2 ML per 28 days)

You can find information on what the symbols and abbreviations in this table mean by referring to pages 14 and 15.

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
TREMFYA-CROHN'S DISEASE/ULCERATIVE COLITIS INDUCTION (SUBCUTANEOUS SOLUTION AUTO-INJECTOR)	Tier 1	PA; DL
TYENNE (SUBCUTANEOUS SOLUTION AUTO-INJECTOR)	Tier 1	PA; DL; QL (3.6 ML per 28 days)
TYENNE (SUBCUTANEOUS SOLUTION PREFILLED SYRINGE)	Tier 1	PA; DL; QL (3.6 ML per 28 days)
XOLAIR (SUBCUTANEOUS SOLUTION AUTO-INJECTOR)	Tier 1	PA; DL
XOLAIR (SUBCUTANEOUS SOLUTION PREFILLED SYRINGE)	Tier 1	PA; DL
XOLAIR (SUBCUTANEOUS SOLUTION RECONSTITUTED)	Tier 1	PA; DL
YESINTEK (45MG/0.5ML SUBCUTANEOUS SOLUTION PREFILLED SYRINGE)	Tier 1	PA; QL (3 ML per 84 days)
YESINTEK (90MG/ML SUBCUTANEOUS SOLUTION PREFILLED SYRINGE)	Tier 1	PA; DL; QL (3 ML per 84 days)
YESINTEK (SUBCUTANEOUS SOLUTION)	Tier 1	PA; QL (3 ML per 84 days)
Immunostimulants		
ACTIMMUNE (SUBCUTANEOUS SOLUTION)	Tier 1	DL
BESREMI (SUBCUTANEOUS SOLUTION PREFILLED SYRINGE)	Tier 1	PA; DL
BESREMI PEN (SUBCUTANEOUS SOLUTION PEN-INJECTOR)	Tier 1	PA; DL
PEGASYS (SUBCUTANEOUS SOLUTION PREFILLED SYRINGE)	Tier 1	PA; DL
PEGASYS (SUBCUTANEOUS SOLUTION)	Tier 1	PA; DL
Immunosuppressants		
ADALIMUMAB-AATY (1 PEN) (80MG/0.8ML SUBCUTANEOUS AUTO-INJECTOR KIT)	Tier 1	PA; DL
ADALIMUMAB-AATY (2 PEN) (SUBCUTANEOUS AUTO-INJECTOR KIT)	Tier 1	PA; DL
ADALIMUMAB-AATY (2 SYRINGE) (SUBCUTANEOUS PREFILLED SYRINGE KIT)	Tier 1	PA; DL
ADALIMUMAB-AATY (CROHN'S DISEASE/ ULCERATIVE COLITIS/HIDRADENITIS SUPPURATIVA STARTER) (SUBCUTANEOUS AUTO-INJECTOR KIT)	Tier 1	PA; DL

You can find information on what the symbols and abbreviations in this table mean by referring to pages 14 and 15.

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
ADALIMUMAB-ADBM (2 PEN) (SUBCUTANEOUS AUTO-INJECTOR KIT) (BOEHRINGER INGELHEIM)	Tier 1	PA; DL; QL (4 EA per 28 days)
ADALIMUMAB-ADBM (2 SYRINGE) (10MG/ 0.2ML SUBCUTANEOUS PREFILLED SYRINGE KIT, 20MG/0.4ML SUBCUTANEOUS PREFILLED SYRINGE KIT) (BOEHRINGER INGELHEIM)	Tier 1	PA; DL; QL (2 EA per 28 days)
ADALIMUMAB-ADBM (2 SYRINGE) (40MG/ 0.4ML SUBCUTANEOUS PREFILLED SYRINGE KIT, 40MG/0.8ML SUBCUTANEOUS PREFILLED SYRINGE KIT) (BOEHRINGER INGELHEIM)	Tier 1	PA; DL; QL (4 EA per 28 days)
ASTAGRAF XL (ORAL CAPSULE EXTENDED RELEASE 24 HOUR)	Tier 1	B/D, PA; DL
azathioprine (50mg oral tablet)	Tier 1	B/D, PA
cyclosporine (oral capsule)	Tier 1	B/D, PA
cyclosporine modified (oral capsule)	Tier 1	B/D, PA
cyclosporine modified (oral solution)	Tier 1	B/D, PA
ENBREL (25MG/0.5ML SUBCUTANEOUS SOLUTION PREFILLED SYRINGE)	Tier 1	PA; DL; QL (4 ML per 28 days)
ENBREL (50MG/ML SUBCUTANEOUS SOLUTION PREFILLED SYRINGE)	Tier 1	PA; DL; QL (8 ML per 28 days)
ENBREL (SUBCUTANEOUS SOLUTION)	Tier 1	PA; DL; QL (4 ML per 28 days)
ENBREL MINI (SUBCUTANEOUS SOLUTION CARTRIDGE)	Tier 1	PA; DL; QL (8 ML per 28 days)
ENBREL SURECLICK (SUBCUTANEOUS SOLUTION AUTO-INJECTOR)	Tier 1	PA; DL; QL (8 ML per 28 days)
ENVARSUS XR (ORAL TABLET EXTENDED RELEASE 24 HOUR)	Tier 1	B/D, PA; DL
everolimus (0.25mg oral tablet, 0.5mg oral tablet)	Tier 1	B/D, PA; DL
everolimus (0.75mg oral tablet, 1mg oral tablet)	Tier 1	B/D, PA; DL
gengraf (oral capsule)	Tier 1	B/D, PA
leflunomide (oral tablet)	Tier 1	
methotrexate sodium (50mg/2ml injection solution prefilled syringe)	Tier 1	
methotrexate sodium (50mg/2ml injection solution)	Tier 1	

You can find information on what the symbols and abbreviations in this table mean by referring to pages 14 and 15.

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
methotrexate sodium (oral tablet)	Tier 1	
mycophenolate mofetil (oral capsule)	Tier 1	B/D, PA
mycophenolate mofetil (oral suspension reconstituted)	Tier 1	B/D, PA; DL
mycophenolate mofetil (oral tablet)	Tier 1	B/D, PA
mycophenolate sodium (oral tablet delayed release)	Tier 1	B/D, PA; DL
PROGRAF (ORAL PACKET)	Tier 1	B/D, PA; DL
sirolimus (oral solution)	Tier 1	B/D, PA; DL
sirolimus (oral tablet)	Tier 1	B/D, PA; DL
tacrolimus (oral capsule)	Tier 1	B/D, PA
XATMEP (ORAL SOLUTION)	Tier 1	PA; DL
Vaccines		
ABRYSVO (INTRAMUSCULAR SOLUTION RECONSTITUTED)	Tier 1	PA; QL (1 EA per 1 day)
ACTHIB (INTRAMUSCULAR SOLUTION RECONSTITUTED)	Tier 1	QL (1 EA per 1 day)
ADACEL (INTRAMUSCULAR SUSPENSION PREFILLED SYRINGE)	Tier 1	QL (0.5 ML per 1 day)
ADACEL (INTRAMUSCULAR SUSPENSION)	Tier 1	QL (0.5 ML per 1 day)
AREXVY (INTRAMUSCULAR SUSPENSION RECONSTITUTED)	Tier 1	PA; QL (1 EA per 1 day)
BCG VACCINE (INJECTION SOLUTION RECONSTITUTED)	Tier 1	QL (1 EA per 1 day)
BEXSERO (INTRAMUSCULAR SUSPENSION PREFILLED SYRINGE)	Tier 1	QL (0.5 ML per 1 day)
BOOSTRIX (INTRAMUSCULAR SUSPENSION PREFILLED SYRINGE)	Tier 1	QL (0.5 ML per 1 day)
DAPTACEL (INTRAMUSCULAR SUSPENSION)	Tier 1	QL (0.5 ML per 1 day)
ENGERIX-B (10MCG/0.5ML INJECTION SUSPENSION PREFILLED SYRINGE)	Tier 1	B/D, PA; QL (0.5 ML per 1 day)
ENGERIX-B (20MCG/ML INJECTION SUSPENSION PREFILLED SYRINGE)	Tier 1	B/D, PA; QL (1 ML per 1 day)
ENGERIX-B (INJECTION SUSPENSION)	Tier 1	B/D, PA; QL (1 ML per 1 day)

You can find information on what the symbols and abbreviations in this table mean by referring to pages 14 and 15.

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
GARDASIL 9 (INTRAMUSCULAR SUSPENSION PREFILLED SYRINGE)	Tier 1	QL (0.5 ML per 1 day)
GARDASIL 9 (INTRAMUSCULAR SUSPENSION)	Tier 1	QL (0.5 ML per 1 day)
HAVRIX (1440EL U/ML INTRAMUSCULAR SUSPENSION PREFILLED SYRINGE)	Tier 1	QL (2 ML per 999 days)
HAVRIX (720EL U/0.5ML INTRAMUSCULAR SUSPENSION PREFILLED SYRINGE)	Tier 1	QL (1 ML per 999 days)
HEPLISAV-B (INTRAMUSCULAR SOLUTION PREFILLED SYRINGE)	Tier 1	B/D, PA; QL (0.5 ML per 1 day)
HIBERIX (INJECTION SOLUTION RECONSTITUTED)	Tier 1	QL (1 EA per 1 day)
IMOVAX RABIES (INTRAMUSCULAR SUSPENSION RECONSTITUTED)	Tier 1	B/D, PA; QL (1 EA per 1 day)
INFANRIX (INTRAMUSCULAR SUSPENSION)	Tier 1	QL (0.5 ML per 1 day)
IPOL (INJECTION SUSPENSION)	Tier 1	QL (0.5 ML per 1 day)
IXIARO (INTRAMUSCULAR SUSPENSION)	Tier 1	QL (0.5 ML per 1 day)
JYNNEOS (SUBCUTANEOUS SUSPENSION)	Tier 1	QL (0.5 ML per 1 day)
KINRIX (INTRAMUSCULAR SUSPENSION PREFILLED SYRINGE)	Tier 1	QL (0.5 ML per 1 day)
M-M-R II (INJECTION SOLUTION RECONSTITUTED)	Tier 1	QL (1 EA per 1 day)
MENQUADFI (INTRAMUSCULAR SOLUTION)	Tier 1	QL (0.5 ML per 1 day)
MENVEO (INTRAMUSCULAR SOLUTION RECONSTITUTED)	Tier 1	QL (1 EA per 1 day)
MRESVIA (INTRAMUSCULAR SUSPENSION PREFILLED SYRINGE)	Tier 1	PA; QL (0.5 ML per 1 day)
PEDIARIX (INTRAMUSCULAR SUSPENSION PREFILLED SYRINGE)	Tier 1	QL (0.5 ML per 1 day)
PEDVAXHIB (INTRAMUSCULAR SUSPENSION)	Tier 1	QL (0.5 ML per 1 day)
PENBRAYA (INTRAMUSCULAR SUSPENSION RECONSTITUTED)	Tier 1	QL (1 EA per 1 day)

You can find information on what the symbols and abbreviations in this table mean by referring to pages 14 and 15.

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
PENMENVY (INTRAMUSCULAR SUSPENSION RECONSTITUTED)	Tier 1	QL (1 EA per 1 day)
PENTACEL (INTRAMUSCULAR SUSPENSION RECONSTITUTED)	Tier 1	QL (1 EA per 1 day)
PRIORIX (SUBCUTANEOUS SUSPENSION RECONSTITUTED)	Tier 1	QL (1 EA per 1 day)
PROQUAD (SUBCUTANEOUS SUSPENSION RECONSTITUTED)	Tier 1	QL (1 EA per 1 day)
QUADRACEL (INTRAMUSCULAR SUSPENSION PREFILLED SYRINGE)	Tier 1	QL (0.5 ML per 1 day)
QUADRACEL (INTRAMUSCULAR SUSPENSION)	Tier 1	QL (0.5 ML per 1 day)
RABAVERT (INTRAMUSCULAR SUSPENSION RECONSTITUTED)	Tier 1	B/D, PA; QL (1 EA per 1 day)
RECOMBIVAX HB (10MCG/ML INJECTION SUSPENSION PREFILLED SYRINGE)	Tier 1	B/D, PA; QL (1 ML per 1 day)
RECOMBIVAX HB (10MCG/ML INJECTION SUSPENSION, 40MCG/ML INJECTION SUSPENSION)	Tier 1	B/D, PA; QL (1 ML per 1 day)
RECOMBIVAX HB (5MCG/0.5ML INJECTION SUSPENSION PREFILLED SYRINGE)	Tier 1	B/D, PA; QL (0.5 ML per 1 day)
RECOMBIVAX HB (5MCG/0.5ML INJECTION SUSPENSION)	Tier 1	B/D, PA; QL (0.5 ML per 1 day)
ROTARIX (ORAL SUSPENSION)	Tier 1	QL (1.5 ML per 1 day)
ROTATEQ (ORAL SOLUTION)	Tier 1	QL (2 ML per 1 day)
SHINGRIX (50MCG/0.5ML INTRAMUSCULAR SUSPENSION RECONSTITUTED)	Tier 1	PA; QL (1 EA per 1 day)
SHINGRIX (INTRAMUSCULAR SUSPENSION PREFILLED SYRINGE)	Tier 1	PA; QL (0.5 ML per 1 day)
TENIVAC (INTRAMUSCULAR INJECTABLE)	Tier 1	QL (0.5 ML per 1 day)
TICOVAC (1.2MCG/0.25ML INTRAMUSCULAR SUSPENSION PREFILLED SYRINGE)	Tier 1	QL (0.25 ML per 1 day)
TICOVAC (2.4MCG/0.5ML INTRAMUSCULAR SUSPENSION PREFILLED SYRINGE)	Tier 1	QL (0.5 ML per 1 day)
TRUMENBA (INTRAMUSCULAR SUSPENSION PREFILLED SYRINGE)	Tier 1	QL (0.5 ML per 1 day)

You can find information on what the symbols and abbreviations in this table mean by referring to pages 14 and 15.

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
TWINRIX (INTRAMUSCULAR SUSPENSION PREFILLED SYRINGE)	Tier 1	QL (1 ML per 1 day)
TYPHIM VI (INTRAMUSCULAR SOLUTION PREFILLED SYRINGE)	Tier 1	QL (0.5 ML per 1 day)
VAQTA (25UNIT/0.5ML INTRAMUSCULAR SUSPENSION PREFILLED SYRINGE)	Tier 1	QL (1 ML per 999 days)
VAQTA (25UNIT/0.5ML INTRAMUSCULAR SUSPENSION)	Tier 1	QL (1 ML per 999 days)
VAQTA (50UNIT/ML INTRAMUSCULAR SUSPENSION PREFILLED SYRINGE)	Tier 1	QL (2 ML per 999 days)
VAQTA (50UNIT/ML INTRAMUSCULAR SUSPENSION)	Tier 1	QL (2 ML per 999 days)
VARIVAX (INJECTION SUSPENSION RECONSTITUTED)	Tier 1	QL (1 EA per 1 day)
VAXCHORA (ORAL SUSPENSION RECONSTITUTED)	Tier 1	PA; QL (100 ML per 1 day)
VIMKUNYA (INTRAMUSCULAR SUSPENSION PREFILLED SYRINGE)	Tier 1	QL (0.8 ML per 1 day)
VIVOTIF (ORAL CAPSULE DELAYED RELEASE)	Tier 1	QL (4 EA per 1825 days)
YF-VAX (SUBCUTANEOUS SUSPENSION RECONSTITUTED)	Tier 1	QL (1 EA per 1 day)
Inflammatory Bowel Disease Agents		
Aminosalicylates		
balsalazide disodium (oral capsule)	Tier 1	DL
mesalamine (1.2gm oral tablet delayed release) (generic lialda)	Tier 1	QL (120 EA per 30 days)
mesalamine (rectal enema)	Tier 1	DL; QL (1800 ML per 30 days)
mesalamine (rectal suppository)	Tier 1	DL; QL (30 EA per 30 days)
mesalamine er (0.375gm oral capsule extended release 24 hour) (generic apriso)	Tier 1	QL (120 EA per 30 days)
mesalamine er (250mg oral capsule extended release) (generic pentasa)	Tier 1	DL; QL (480 EA per 30 days)
mesalamine er (500mg oral capsule extended release) (generic pentasa)	Tier 1	DL; QL (240 EA per 30 days)

You can find information on what the symbols and abbreviations in this table mean by referring to pages 14 and 15.

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
PENTASA (250MG ORAL CAPSULE EXTENDED RELEASE)	Tier 1	DL; QL (480 EA per 30 days)
PENTASA (500MG ORAL CAPSULE EXTENDED RELEASE)	Tier 1	DL; QL (240 EA per 30 days)
sulfasalazine (oral tablet delayed release)	Tier 1	
sulfasalazine (oral tablet immediate release)	Tier 1	
Glucocorticoids		
budesonide (oral capsule delayed release particles)	Tier 1	DL
budesonide er (oral tablet extended release 24 hour)	Tier 1	ST; DL
hydrocortisone (perianal) (2.5% external cream)	Tier 1	
hydrocortisone (rectal enema)	Tier 1	DL
procto-med hc (external cream)	Tier 1	
Metabolic Bone Disease Agents		
Metabolic Bone Disease Agents		
alendronate sodium (10mg oral tablet)	Tier 1	QL (30 EA per 30 days)
alendronate sodium (35mg oral tablet)	Tier 1	QL (8 EA per 28 days)
alendronate sodium (70mg oral tablet)	Tier 1	QL (4 EA per 28 days)
BONSITY (SUBCUTANEOUS SOLUTION PEN-INJECTOR)	Tier 1	PA; DL; QL (2.24 ML per 28 days)
calcitonin salmon (nasal solution)	Tier 1	QL (3.7 ML per 28 days)
calcitriol (oral capsule)	Tier 1	B/D, PA
calcitriol (oral solution)	Tier 1	B/D, PA
cinacalcet hcl (30mg oral tablet, 60mg oral tablet)	Tier 1	B/D, PA; DL; QL (60 EA per 30 days)
cinacalcet hcl (90mg oral tablet)	Tier 1	B/D, PA; DL; QL (120 EA per 30 days)
doxercalciferol (oral capsule)	Tier 1	B/D, PA; DL
ibandronate sodium (oral tablet)	Tier 1	QL (1 EA per 28 days)

You can find information on what the symbols and abbreviations in this table mean by referring to pages 14 and 15.

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
JUBBONTI (SUBCUTANEOUS SOLUTION PREFILLED SYRINGE)	Tier 1	DL; QL (1 ML per 180 days)
OSENVELT (SUBCUTANEOUS SOLUTION)	Tier 1	DL
paricalcitol (oral capsule)	Tier 1	B/D, PA; DL
RAYALDEE (ORAL CAPSULE EXTENDED RELEASE)	Tier 1	DL; QL (60 EA per 30 days)
risedronate sodium (150mg oral tablet immediate release)	Tier 1	QL (1 EA per 30 days)
risedronate sodium (30mg oral tablet immediate release, 5mg oral tablet immediate release)	Tier 1	QL (30 EA per 30 days)
risedronate sodium (35mg (12 pack) oral tablet immediate release, 35mg (4 pack) oral tablet immediate release)	Tier 1	QL (4 EA per 28 days)
STOBOCLO (SUBCUTANEOUS SOLUTION PREFILLED SYRINGE)	Tier 1	DL; QL (1 ML per 180 days)
teriparatide (subcutaneous solution pen-injector)	Tier 1	PA; DL; QL (2.48 ML per 28 days)
TYMLOS (SUBCUTANEOUS SOLUTION PEN-INJECTOR)	Tier 1	PA; DL; QL (1.56 ML per 30 days)
WYOST (SUBCUTANEOUS SOLUTION)	Tier 1	DL
Miscellaneous Therapeutic Agents		
Miscellaneous Therapeutic Agents		
*acetamin chw 80mg (tablet chewable)**	$0 (OTC)	
*acetamin jr chw 160mg (tablet chewable)**	$0 (OTC)	
*acetaminophe chw 160mg (tablet chewable)**	$0 (OTC)	
ALCOHOL PREP PADS	Tier 1	
*asa free chw 160mg jr (tablet chewable)**	$0 (OTC)	
*childrens chw apap (tablet chewable)**	$0 (OTC)	
*chld non-asa chw 80mg grp (tablet chewable)**	$0 (OTC)	
*cornstarch pow baby (powder)**	$0 (OTC)	
*cvs baby pow cornstar (powder)**	$0 (OTC)	
*cvs childs chw 80mg (tablet chewable)**	$0 (OTC)	
*ft chld pain chw 160mg (tablet chewable)**	$0 (OTC)	
GAUZE (NON-MEDICATED 2X2 PAD)	Tier 1	
INSULIN SYRINGES, NEEDLES	Tier 1	
JOURNAVX (ORAL TABLET)	Tier 1	
*non-aspirin chw 160mg jr (tablet chewable)**	$0 (OTC)	

You can find information on what the symbols and abbreviations in this table mean by referring to pages 14 and 15.

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
*non-aspirin chw 80mg (tablet chewable) **	$0 (OTC)	
*pain & fever chw 160mg (tablet chewable) **	$0 (OTC)	
*pain relief chw 160mg (tablet chewable) **	$0 (OTC)	
*pain relievr chw 80mg (tablet chewable) **	$0 (OTC)	
REZDIFFRA (ORAL TABLET)	Tier 1	PA; DL; QL (30 EA per 30 days)
*sb non-asa chw 160mg (tablet chewable) **	$0 (OTC)	
*sb non-asa chw 80mg frt (tablet chewable) **	$0 (OTC)	
*sb non-asa chw 80mg grp (tablet chewable) **	$0 (OTC)	
Nonsteroidal Anti-inflammatory Drugs		
Analgesics		
*acetamin tab 325mg (tablet) **	$0 (OTC)	
*acetamin tab 500mg (tablet) **	$0 (OTC)	
*acetaminophe tab 325mg (tablet) **	$0 (OTC)	
*acetaminophe tab 500mg (tablet) **	$0 (OTC)	
*acetaminophn sus 160/5ml (suspension) **	$0 (OTC)	
*acetaminophn tab 325mg (tablet) **	$0 (OTC)	
*acetaminophn tab 500mg (tablet) **	$0 (OTC)	
*all day pain tab 220mg (tablet) **	$0 (OTC)	
*all day relf tab 220mg (tablet) **	$0 (OTC)	
*aminofen tab 325mg (tablet) **	$0 (OTC)	
*arthr pain gel 1% (gel) **	$0 (OTC)	
*aspirin 81 tab 81mg ec (tablet dr) **	$0 (OTC)	
*aspirin adlt tab 81mg (tablet dr) **	$0 (OTC)	
*aspirin adlt tab 81mg ec (tablet dr) **	$0 (OTC)	
*aspirin chld chw 81mg (tablet chewable) **	$0 (OTC)	
*aspirin chw 81mg (tablet chewable) **	$0 (OTC)	
*aspirin ec tab 81mg (tablet dr) **	$0 (OTC)	
*aspirin free tab 325mg (tablet) **	$0 (OTC)	
*aspirin low chw 81mg (tablet chewable) **	$0 (OTC)	
*aspirin low tab 81mg (tablet dr) **	$0 (OTC)	
*aspirin low tab 81mg ec (tablet dr) **	$0 (OTC)	
*aspirin regi tab 81mg (tablet dr) **	$0 (OTC)	
*aspirin tab 325mg (tablet, tablet dr) **	$0 (OTC)	
*aspirin tab 325mg ec (tablet dr) **	$0 (OTC)	
*aspirin tab 81mg (tablet dr) **	$0 (OTC)	

You can find information on what the symbols and abbreviations in this table mean by referring to pages 14 and 15.

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
aspirin tab 81mg ec (tablet dr) *	$0 (OTC)	
backache rel tab 500mg (tablet) *	$0 (OTC)	
betatemp sus 160/5ml (suspension) *	$0 (OTC)	
CAPSINAC PAK (THERAPY PACK)*	$0 (OTC)	
child asa chw 81mg (tablet chewable) *	$0 (OTC)	
cvs acetamin tab 325mg (tablet) *	$0 (OTC)	
cvs aspirin tab 325mg (tablet) *	$0 (OTC)	
cvs aspirin tab 81mg ec (tablet dr) *	$0 (OTC)	
cvs ibuprof dro 50/1.25 (suspension) *	$0 (OTC)	
cvs naproxen tab 220mg (tablet) *	$0 (OTC)	
DICLOFENAC GEL 1% (GEL)*	$0 (OTC)	
diclofenac gel 1% (gel) *	$0 (OTC)	
enteric asa tab 325mg ec (tablet dr) *	$0 (OTC)	
eq acetamin tab 500mg (tablet) *	$0 (OTC)	
eq arthritis gel 1% (gel) *	$0 (OTC)	
eq aspirin chw 81mg (tablet chewable) *	$0 (OTC)	
eq aspirin tab 325mg (tablet) *	$0 (OTC)	
eq ibuprofen tab 200-38mg (tablet) *	$0 (OTC)	
eq ibuprofen tab 200mg (tablet) *	$0 (OTC)	
eq pain reli sus 160mg/5 (suspension) *	$0 (OTC)	
eq pain reli tab 500mg (tablet) *	$0 (OTC)	
eql acetamin tab 325mg (tablet) *	$0 (OTC)	
eql aspirin chw 81mg (tablet chewable) *	$0 (OTC)	
eql aspirin tab 325mg ec (tablet dr) *	$0 (OTC)	
eql ibu pm tab 200-38mg (tablet) *	$0 (OTC)	
ft arthritis gel 1% (gel) *	$0 (OTC)	
ft aspirin chw 81mg (tablet chewable) *	$0 (OTC)	
ft aspirin tab 325mg (tablet) *	$0 (OTC)	
ft aspirin tab 325mg ec (tablet dr) *	$0 (OTC)	
ft aspirin tab 81mg (tablet dr) *	$0 (OTC)	
ft ibuprofen cap 200mg (capsule) *	$0 (OTC)	
ft ibuprofen dro 50/1.25 (suspension) *	$0 (OTC)	
ft ibuprofen tab 200-38mg (tablet) *	$0 (OTC)	
ft ibuprofen tab 200mg (tablet) *	$0 (OTC)	
ft naproxen cap 220mg (capsule) *	$0 (OTC)	
ft pain reli tab 500mg (tablet) *	$0 (OTC)	

You can find information on what the symbols and abbreviations in this table mean by referring to pages 14 and 15.

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
*genuine asa tab 325mg (tablet) **	$0 (OTC)	
*genuine aspr tab 325mg (tablet) **	$0 (OTC)	
*gnp acetamin tab 325mg (tablet) **	$0 (OTC)	
*gnp aspirin chw 81mg (tablet chewable) **	$0 (OTC)	
*gnp aspirin tab 325mg (tablet) **	$0 (OTC)	
*gnp aspirin tab 325mg ec (tablet dr) **	$0 (OTC)	
*gnp aspirin tab 81mg (tablet dr) **	$0 (OTC)	
*gnp aspirin tab 81mg ec (tablet dr) **	$0 (OTC)	
*gnp children sus pain&fev (suspension) **	$0 (OTC)	
*gnp diclofen gel 1% (gel) **	$0 (OTC)	
*gnp ibuprofe tab 200-38mg (tablet) **	$0 (OTC)	
*gnp pain rel tab 500mg (tablet) **	$0 (OTC)	
*ibuprofen cap 200mg (capsule) **	$0 (OTC)	
*ibuprofen dro 50/1.25 (suspension) **	$0 (OTC)	
*ibuprofen pm tab 200-38mg (tablet) **	$0 (OTC)	
*ibuprofen tab 200mg (tablet) **	$0 (OTC)	
*kls arthriti gel 1% (gel) **	$0 (OTC)	
*kls aspirin tab 81mg ec (tablet dr) **	$0 (OTC)	
*kls ibuprofn tab 200mg (tablet) **	$0 (OTC)	
*kls ibuprofn tab ib 200mg (tablet) **	$0 (OTC)	
*mm aspirin tab low dose (tablet dr) **	$0 (OTC)	
*naproxen sod cap 220mg (capsule) **	$0 (OTC)	
*naproxen sod tab 220mg (tablet) **	$0 (OTC)	
*naproxen tab 220mg (tablet) **	$0 (OTC)	
*non-aspirin sus 160/5ml (suspension) **	$0 (OTC)	
*non-aspirin tab 325mg (tablet) **	$0 (OTC)	
*non-aspirin tab 500mg (tablet) **	$0 (OTC)	
*non-aspirin tab 500mg/rr (tablet) **	$0 (OTC)	
*pain & fever sus 160/5ml (suspension) **	$0 (OTC)	
*pain relief sus 160/5ml (suspension) **	$0 (OTC)	
*pain relief tab 200mg (tablet) **	$0 (OTC)	
*pain relief tab 325mg (tablet, tablet effervescent) **	$0 (OTC)	
*pain relief tab 500mg (tablet) **	$0 (OTC)	
*pain relieve sus 160/5ml (suspension) **	$0 (OTC)	
*pain relieve tab 325mg (tablet) **	$0 (OTC)	
*pain relieve tab 500mg (tablet) **	$0 (OTC)	

You can find information on what the symbols and abbreviations in this table mean by referring to pages 14 and 15.

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
*pain relieve tab 500mg/rr (tablet)**	$0 (OTC)	
*pain relievr tab 500mg (tablet)**	$0 (OTC)	
PREVIDOLRX PAK ANALGESI (THERAPY PACK)*	$0 (OTC)	
*qc acetamino sus 160/5ml (suspension)**	$0 (OTC)	
*qc aspirin chw 81mg (tablet chewable)**	$0 (OTC)	
*qc aspirin tab 325mg (tablet)**	$0 (OTC)	
*qc aspirin tab 325mg ec (tablet dr)**	$0 (OTC)	
*qc diclofena gel 1% (gel)**	$0 (OTC)	
*qc ibuprofen cap 200mg (capsule)**	$0 (OTC)	
*qc ibuprofen dro 50/1.25 (suspension)**	$0 (OTC)	
*qc ibuprofen tab 200mg (tablet)**	$0 (OTC)	
*qc naproxen cap 220mg (capsule)**	$0 (OTC)	
*sb aspirin tab 325mg (tablet)**	$0 (OTC)	
*sb aspirin tab 325mg ec (tablet dr)**	$0 (OTC)	
*sb backache tab 500mg (tablet)**	$0 (OTC)	
*sb child asa chw 81mg (tablet chewable)**	$0 (OTC)	
*sb ibuprofen tab 200mg (tablet)**	$0 (OTC)	
*sm aspirin tab 325mg ec (tablet dr)**	$0 (OTC)	
*sm child asa chw 81mg (tablet chewable)**	$0 (OTC)	
*sm ibuprofen tab 200mg (tablet)**	$0 (OTC)	
ST JOSEPH CHW LOW 81MG (TABLET CHEWABLE)*	$0 (OTC)	
SURE RESULT MIS DSS PACK (THERAPY PACK)*	$0 (OTC)	
ZICLOPRO PAK (THERAPY PACK)*	$0 (OTC)	
Ophthalmic Agents		
Ophthalmic Agents, Other		
atropine sulfate (1% ophthalmic solution)	Tier 1	
brimonidine tartrate-timolol (ophthalmic solution)	Tier 1	
COMBIGAN (OPHTHALMIC SOLUTION)	Tier 1	
CYSTARAN (OPHTHALMIC SOLUTION)	Tier 1	DL
dorzolamide hcl-timolol maleate (ophthalmic solution)	Tier 1	
dorzolamide hcl-timolol maleate preservative free (ophthalmic solution)	Tier 1	DL

You can find information on what the symbols and abbreviations in this table mean by referring to pages 14 and 15.

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
MIEBO (OPHTHALMIC SOLUTION)	Tier 1	DL; QL (12 ML per 30 days)
neomycin-polymyxin-bacitracin-hydrocortisone (ophthalmic ointment)	Tier 1	
neomycin-polymyxin-dexamethasone (3.5-10000-0.1 ophthalmic suspension)	Tier 1	
neomycin-polymyxin-dexamethasone (ophthalmic ointment)	Tier 1	
neomycin-polymyxin-hc (ophthalmic suspension)	Tier 1	DL
RESTASIS MULTIDOSE (OPHTHALMIC EMULSION)	Tier 1	QL (5.5 ML per 25 days)
RESTASIS SINGLE-USE VIALS (OPHTHALMIC EMULSION)	Tier 1	QL (60 EA per 30 days)
ROCKLATAN (OPHTHALMIC SOLUTION)	Tier 1	ST
sulfacetamide-prednisolone (ophthalmic solution)	Tier 1	
TOBRADEX (OPHTHALMIC OINTMENT)	Tier 1	
tobramycin-dexamethasone (ophthalmic suspension)	Tier 1	
TYRVAYA (NASAL SOLUTION)	Tier 1	DL; QL (8.4 ML per 30 days)
XIIDRA (OPHTHALMIC SOLUTION)	Tier 1	DL; QL (60 EA per 30 days)
Ophthalmic Anti-allergy Agents		
azelastine hcl (ophthalmic solution)	Tier 1	
bepotastine besilate (ophthalmic solution)	Tier 1	DL
BEPREVE (1.5% OPHTHALMIC SOLUTION)	Tier 1	DL
cromolyn sodium (ophthalmic solution)	Tier 1	
epinastine hcl (ophthalmic solution)	Tier 1	
Ophthalmic Anti-Infectives		
bacitracin-polymyxin b (ophthalmic ointment)	Tier 1	
BESIVANCE (OPHTHALMIC SUSPENSION)	Tier 1	DL
ciprofloxacin hcl (ophthalmic solution)	Tier 1	
erythromycin (ophthalmic ointment)	Tier 1	
gatifloxacin (ophthalmic solution)	Tier 1	
gentamicin sulfate (ophthalmic solution)	Tier 1	
levofloxacin (0.5% ophthalmic solution)	Tier 1	

You can find information on what the symbols and abbreviations in this table mean by referring to pages 14 and 15.

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
moxifloxacin hcl (ophthalmic solution) (generic vigamox)	Tier 1	DL
NATACYN (OPHTHALMIC SUSPENSION)	Tier 1	DL
neomycin-bacitracin-polymyxin (ophthalmic ointment)	Tier 1	
neomycin-polymyxin-gramicidin (ophthalmic solution)	Tier 1	
ofloxacin (ophthalmic solution)	Tier 1	
polymyxin b-trimethoprim (ophthalmic solution)	Tier 1	
sulfacetamide sodium (ophthalmic solution)	Tier 1	
tobramycin (ophthalmic solution)	Tier 1	
trifluridine (ophthalmic solution)	Tier 1	
XDEMVY (OPHTHALMIC SOLUTION)	Tier 1	DL; QL (10 ML per 42 days)
Ophthalmic Anti-inflammatories		
dexamethasone sodium phosphate (ophthalmic solution)	Tier 1	
diclofenac sodium (ophthalmic solution)	Tier 1	
FLAREX (OPHTHALMIC SUSPENSION)	Tier 1	DL
fluorometholone (ophthalmic suspension)	Tier 1	
flurbiprofen sodium (ophthalmic solution)	Tier 1	
ILEVRO (OPHTHALMIC SUSPENSION)	Tier 1	
ketorolac tromethamine (ophthalmic solution)	Tier 1	
LOTEMAX (OPHTHALMIC GEL)	Tier 1	DL
LOTEMAX (OPHTHALMIC OINTMENT)	Tier 1	DL
LOTEMAX (OPHTHALMIC SUSPENSION)	Tier 1	DL
LOTEMAX SM (OPHTHALMIC GEL)	Tier 1	DL
loteprednol etabonate (0.5% ophthalmic suspension)	Tier 1	DL
loteprednol etabonate (ophthalmic gel)	Tier 1	DL
PRED MILD (OPHTHALMIC SUSPENSION)	Tier 1	DL
prednisolone acetate (ophthalmic suspension)	Tier 1	
prednisolone sodium phosphate (1% ophthalmic solution)	Tier 1	
Ophthalmic Beta-Adrenergic Blocking Agents		
betaxolol hcl (ophthalmic solution)	Tier 1	

You can find information on what the symbols and abbreviations in this table mean by referring to pages 14 and 15.

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
BETIMOL (0.5% OPHTHALMIC SOLUTION)	Tier 1	DL
carteolol hcl (ophthalmic solution)	Tier 1	
levobunolol hcl (ophthalmic solution)	Tier 1	
timolol maleate (ophthalmic solution) (generic timoptic)	Tier 1	
timolol maleate ophthalmic gel forming (ophthalmic solution) (generic timoptic-xe)	Tier 1	
Ophthalmic Intraocular Pressure Lowering Agents, Other		
ALPHAGAN P (0.1% OPHTHALMIC SOLUTION)	Tier 1	
apraclonidine hcl (ophthalmic solution)	Tier 1	
brimonidine tartrate (0.1% ophthalmic solution)	Tier 1	
brimonidine tartrate (0.15% ophthalmic solution)	Tier 1	DL
brimonidine tartrate (0.2% ophthalmic solution)	Tier 1	
brinzolamide (ophthalmic suspension)	Tier 1	
dorzolamide hcl (ophthalmic solution)	Tier 1	
methazolamide (oral tablet)	Tier 1	DL
pilocarpine hcl (1% ophthalmic solution, 2% ophthalmic solution, 4% ophthalmic solution)	Tier 1	
RHOPRESSA (OPHTHALMIC SOLUTION)	Tier 1	ST
SIMBRINZA (OPHTHALMIC SUSPENSION)	Tier 1	
Ophthalmic Prostaglandin and Prostamide Analogs		
latanoprost (ophthalmic solution)	Tier 1	
LUMIGAN (OPHTHALMIC SOLUTION)	Tier 1	
travoprost (bak free) (ophthalmic solution)	Tier 1	
VYZULTA (OPHTHALMIC SOLUTION)	Tier 1	DL
Ophthalmic Anti-inflammatories		
Ophthalmic Agents		
ALAWAY CHILD DRO 0.035%OP (SOLUTION)*	$0 (OTC)	
ALAWAY DRO 0.035%OP (SOLUTION)*	$0 (OTC)	
*cvs allergy dro 0.035%op (solution)**	$0 (OTC)	
*eye itch ref dro 0.035%op (solution)**	$0 (OTC)	
*eye itch rel dro 0.035%op (solution)**	$0 (OTC)	
*ketotif fum dro 0.035%op (solution)**	$0 (OTC)	
Opioid Reversal Agents		
Anti-Addiction/Substance Abuse Treatment Agents		
*ft naloxone spr 4mg (liquid)**	$0 (OTC)	

You can find information on what the symbols and abbreviations in this table mean by referring to pages 14 and 15.

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
*gnp naloxone spr 4mg (liquid)**	$0 (OTC)	
*naloxone hcl spr 4mg (liquid)**	$0 (OTC)	
*naloxone spr (liquid)**	$0 (OTC)	
*naloxone spr 4mg (liquid)**	$0 (OTC)	
NARCAN SPR 4MG (LIQUID)*	$0 (OTC)	
RIVIVE SPR 3/0.1ML (LIQUID)*	$0 (OTC)	
Otic Agents		
Otic Agents		
acetic acid (otic solution)	Tier 1	
CIPRO HC (OTIC SUSPENSION)	Tier 1	DL
ciprofloxacin-dexamethasone (otic suspension)	Tier 1	DL
ciprofloxacin-hydrocortisone (otic suspension)	Tier 1	DL
fluocinolone acetonide (otic oil)	Tier 1	DL
hydrocortisone-acetic acid (otic solution)	Tier 1	
neomycin-polymyxin-hc (1% otic solution)	Tier 1	
neomycin-polymyxin-hc (otic suspension)	Tier 1	
ofloxacin (otic solution)	Tier 1	
Progestins		
Hormonal Agents, Stimulant/Replacement/Modifying (Sex Hormones/Modifiers)		
*aftera tab 1.5mg (tablet)**	$0 (OTC)	
AFTERPILL TAB 1.5MG (TABLET)*	$0 (OTC)	
*curae tab 1.5mg (tablet)**	$0 (OTC)	
*econtra os tab 1.5mg (tablet)**	$0 (OTC)	
*her style tab 1.5mg (tablet)**	$0 (OTC)	
*levonorgestr tab 1.5mg (tablet)**	$0 (OTC)	
*my choice tab 1.5mg (tablet)**	$0 (OTC)	
*my way tab 1.5mg (tablet)**	$0 (OTC)	
*new day tab 1.5mg (tablet)**	$0 (OTC)	
*opcicon tab 1.5mg (tablet)**	$0 (OTC)	
*option 2 tab 1.5mg (tablet)**	$0 (OTC)	
PLAN B TAB 1.5MG (TABLET)*	$0 (OTC)	
*react tab 1.5mg (tablet)**	$0 (OTC)	
*shewise tab 1.5mg (tablet)**	$0 (OTC)	
*take action tab 1.5mg (tablet)**	$0 (OTC)	
Proton Pump Inhibitors		
Gastrointestinal Agents		

You can find information on what the symbols and abbreviations in this table mean by referring to pages 14 and 15.

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
*acid reducer cap 20.6mgdr (capsule delayed release) **	$0 (OTC)	
*acid reducer tab 20mg dr (tablet dr) **	$0 (OTC)	
*cvs omeprazo tab odt 20mg (tab dr disint) **	$0 (OTC)	
*eq omepraz tab 20mg (tablet dr) **	$0 (OTC)	
*ft omeprazol tab 20mg (tablet dr) **	$0 (OTC)	
*gnp omepraz tab 20mg (tablet dr) **	$0 (OTC)	
*gnp omeprazo cap 20mg (capsule delayed release) **	$0 (OTC)	
*gnp omeprazo tab 20mg odt (tab dr disint) **	$0 (OTC)	
*omeprazole cap 20.6mgdr (capsule delayed release) **	$0 (OTC)	
*omeprazole cap 20mg (capsule delayed release) **	$0 (OTC)	
*omeprazole tab 20mg (tablet dr) **	$0 (OTC)	
*omeprazole tab 20mg dr (tablet dr) **	$0 (OTC)	
*omeprazole tab 20mg odt (tab dr disint) **	$0 (OTC)	
*omeprazole tab odt 20mg (tab dr disint) **	$0 (OTC)	
*qc omepraza tab 20mg (tablet dr) **	$0 (OTC)	
Respiratory Tract Agents, Other		
Respiratory Tract/Pulmonary Agents		
*12hr deconge tab 120mg cr (tablet er 12hr) **	$0 (OTC)	
*decongestant tab 120mg er (tablet er 12hr) **	$0 (OTC)	
*decongestant tab 30mg (tablet) **	$0 (OTC)	
*ft nsl decon tab 30mg (tablet) **	$0 (OTC)	
*gnp deconge tab 30mg (tablet) **	$0 (OTC)	
*gnp nasal tab 120mg er (tablet er 12hr) **	$0 (OTC)	
*nasal decong tab 120mg er (tablet er 12hr) **	$0 (OTC)	
*nasal decong tab 30mg (tablet) **	$0 (OTC)	
*pseudoephedr tab 120mg er (tablet er 12hr) **	$0 (OTC)	
*pseudoephedr tab 30mg (tablet) **	$0 (OTC)	
*pseudofed tab 30mg (tablet) **	$0 (OTC)	
*sinus & cong tab 30mg (tablet) **	$0 (OTC)	
*sinus 12-hr tab 120mg er (tablet er 12hr) **	$0 (OTC)	
*suphedrine tab 120mg er (tablet er 12hr) **	$0 (OTC)	
Respiratory Tract/Pulmonary Agents		

You can find information on what the symbols and abbreviations in this table mean by referring to pages 14 and 15.

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
Anti-inflammatories, Inhaled Corticosteroids		
ARNUITY ELLIPTA (INHALATION AEROSOL POWDER BREATH ACTIVATED)	Tier 1	QL (30 EA per 30 days)
budesonide (inhalation suspension)	Tier 1	B/D, PA; DL
flunisolide (nasal solution)	Tier 1	
fluticasone propionate (nasal suspension)	Tier 1	
mometasone furoate (nasal suspension)	Tier 1	DL
QVAR REDIHALER (INHALATION AEROSOL BREATH ACTIVATED)	Tier 1	QL (21.2 GM per 30 days)
Antihistamines		
azelastine hcl (0.1% nasal solution)	Tier 1	
cetirizine hcl (5mg/5ml oral solution)	Tier 1	
desloratadine (oral tablet)	Tier 1	
levocetirizine dihydrochloride (oral tablet)	Tier 1	QL (30 EA per 30 days)
RYALTRIS (NASAL SUSPENSION)	Tier 1	
Antileukotrienes		
montelukast sodium (oral packet)	Tier 1	QL (30 EA per 30 days)
montelukast sodium (oral tablet chewable)	Tier 1	QL (30 EA per 30 days)
montelukast sodium (oral tablet)	Tier 1	QL (30 EA per 30 days)
zafirlukast (oral tablet)	Tier 1	QL (60 EA per 30 days)
Bronchodilators, Anticholinergic		
INCRUSE ELLIPTA (INHALATION AEROSOL POWDER BREATH ACTIVATED)	Tier 1	QL (30 EA per 30 days)
ipratropium bromide (inhalation solution)	Tier 1	B/D, PA
ipratropium bromide (nasal solution)	Tier 1	
ipratropium bromide hfa (inhalation aerosol solution)	Tier 1	DL
SPIRIVA HANDIHALER (INHALATION CAPSULE)	Tier 1	QL (30 EA per 30 days)
SPIRIVA RESPIMAT (INHALATION AEROSOL SOLUTION)	Tier 1	QL (4 GM per 30 days)
Bronchodilators, Sympathomimetic		

You can find information on what the symbols and abbreviations in this table mean by referring to pages 14 and 15.

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
albuterol sulfate (2mg/5ml oral syrup)	Tier 1	DL
albuterol sulfate (inhalation nebulization solution)	Tier 1	B/D, PA
albuterol sulfate (oral tablet immediate release)	Tier 1	DL
albuterol sulfate hfa (inhalation aerosol solution)	Tier 1	
arformoterol tartrate (inhalation nebulization solution)	Tier 1	B/D, PA; DL; QL (120 ML per 30 days)
epinephrine (injection solution auto-injector)	Tier 1	QL (4 EA per 30 days)
levalbuterol hcl (inhalation nebulization solution)	Tier 1	B/D, PA; DL
LEVALBUTEROL TARTRATE (INHALATION AEROSOL)	Tier 1	
SEREVENT DISKUS (INHALATION AEROSOL POWDER BREATH ACTIVATED)	Tier 1	QL (60 EA per 30 days)
VENTOLIN HFA (INHALATION AEROSOL SOLUTION)	Tier 1	
Cystic Fibrosis Agents		
CAYSTON (INHALATION SOLUTION RECONSTITUTED)	Tier 1	PA; DL
KALYDECO (ORAL PACKET)	Tier 1	PA; DL; QL (56 EA per 28 days)
KALYDECO (ORAL TABLET)	Tier 1	PA; DL; QL (60 EA per 30 days)
ORKAMBI (ORAL PACKET)	Tier 1	PA; DL; QL (56 EA per 28 days)
ORKAMBI (ORAL TABLET)	Tier 1	PA; DL; QL (112 EA per 28 days)
PULMOZYME (INHALATION SOLUTION)	Tier 1	B/D, PA; DL; QL (150 ML per 30 days)
TOBI PODHALER (INHALATION CAPSULE)	Tier 1	PA; DL; QL (224 EA per 28 days)
tobramycin (300mg/5ml inhalation nebulization solution)	Tier 1	B/D, PA; QL (280 ML per 28 days)
TRIKAFTA (ORAL GRANULE THERAPY PACK)	Tier 1	PA; DL; QL (56 EA per 28 days)
TRIKAFTA (ORAL TABLET THERAPY PACK)	Tier 1	PA; DL; QL (84 EA per 28 days)

You can find information on what the symbols and abbreviations in this table mean by referring to pages 14 and 15.

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
Mast Cell Stabilizers		
cromolyn sodium (inhalation nebulization solution)	Tier 1	B/D, PA
Phosphodiesterase Inhibitors, Airways Disease		
roflumilast (250mcg oral tablet)	Tier 1	PA; DL; QL (28 EA per 28 days)
roflumilast (500mcg oral tablet)	Tier 1	PA; DL; QL (30 EA per 30 days)
theophylline (oral solution)	Tier 1	
theophylline er (oral tablet extended release 12 hour)	Tier 1	
theophylline er (oral tablet extended release 24 hour)	Tier 1	
Pulmonary Antihypertensives		
ADEMPAS (ORAL TABLET)	Tier 1	PA; DL
alyq (oral tablet)	Tier 1	PA; DL; QL (60 EA per 30 days)
ambrisentan (oral tablet)	Tier 1	PA; DL; QL (30 EA per 30 days)
bosentan (oral tablet)	Tier 1	PA; DL; QL (60 EA per 30 days)
macitentan (oral tablet)	Tier 1	PA; DL
ORENITRAM (0.125MG ORAL TABLET EXTENDED RELEASE)	Tier 1	PA; DL
ORENITRAM (0.25MG ORAL TABLET EXTENDED RELEASE, 1MG ORAL TABLET EXTENDED RELEASE, 2.5MG ORAL TABLET EXTENDED RELEASE, 5MG ORAL TABLET EXTENDED RELEASE)	Tier 1	PA; DL
ORENITRAM MONTH 1 (ORAL TABLET EXTENDED RELEASE THERAPY PACK)	Tier 1	PA; DL; QL (336 EA per 365 days)
ORENITRAM MONTH 2 (ORAL TABLET EXTENDED RELEASE THERAPY PACK)	Tier 1	PA; DL; QL (672 EA per 365 days)
ORENITRAM MONTH 3 (ORAL TABLET EXTENDED RELEASE THERAPY PACK)	Tier 1	PA; DL; QL (504 EA per 365 days)
sildenafil citrate (20mg oral tablet) (generic revatio)	Tier 1	PA; QL (90 EA per 30 days)

You can find information on what the symbols and abbreviations in this table mean by referring to pages 14 and 15.

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
tadalafil (pah) (20mg oral tablet) (generic adcirca)	Tier 1	PA; DL; QL (60 EA per 30 days)
WINREVAIR (SUBCUTANEOUS KIT)	Tier 1	PA; DL; QL (1 EA per 21 days)
Pulmonary Fibrosis Agents		
nintedanib esylate (oral capsule)	Tier 1	PA; DL; QL (60 EA per 30 days)
pirfenidone (267mg oral tablet)	Tier 1	PA; DL; QL (180 EA per 30 days)
pirfenidone (801mg oral tablet)	Tier 1	PA; DL; QL (90 EA per 30 days)
pirfenidone (oral capsule)	Tier 1	PA; DL; QL (270 EA per 30 days)
Respiratory Tract Agents, Other		
acetylcysteine (inhalation solution)	Tier 1	B/D, PA
AIRSUPRA (INHALATION AEROSOL)	Tier 1	QL (32.1 GM per 30 days)
ANORO ELLIPTA (INHALATION AEROSOL POWDER BREATH ACTIVATED)	Tier 1	QL (60 EA per 30 days)
BREO ELLIPTA (INHALATION AEROSOL POWDER BREATH ACTIVATED)	Tier 1	QL (60 EA per 30 days)
BREZTRI AEROSPHERE (INHALATION AEROSOL)	Tier 1	QL (10.7 GM per 30 days)
COMBIVENT RESPIMAT (INHALATION AEROSOL SOLUTION)	Tier 1	QL (4 GM per 20 days)
DULERA (INHALATION AEROSOL)	Tier 1	DL; QL (13 GM per 30 days)
FASENRA (SUBCUTANEOUS SOLUTION PREFILLED SYRINGE)	Tier 1	PA; DL
FASENRA PEN (SUBCUTANEOUS SOLUTION AUTO-INJECTOR)	Tier 1	PA; DL
fluticasone-salmeterol (100-50mcg/act inhalation aerosol powder breath activated, 250-50mcg/act inhalation aerosol powder breath activated, 500-50mcg/act inhalation aerosol powder breath activated) (generic advair)	Tier 1	QL (60 EA per 30 days)
ipratropium-albuterol (inhalation solution)	Tier 1	B/D, PA

You can find information on what the symbols and abbreviations in this table mean by referring to pages 14 and 15.

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
NUCALA (100MG/ML SUBCUTANEOUS SOLUTION PREFILLED SYRINGE)	Tier 1	PA; DL; QL (3 ML per 28 days)
NUCALA (40MG/0.4ML SUBCUTANEOUS SOLUTION PREFILLED SYRINGE)	Tier 1	PA; DL; QL (0.4 ML per 28 days)
NUCALA (SUBCUTANEOUS SOLUTION AUTO-INJECTOR)	Tier 1	PA; DL; QL (3 ML per 28 days)
NUCALA (SUBCUTANEOUS SOLUTION RECONSTITUTED)	Tier 1	PA; DL; QL (3 EA per 28 days)
STIOLTO RESPIMAT (INHALATION AEROSOL SOLUTION)	Tier 1	QL (4 GM per 30 days)
SYMBICORT (INHALATION AEROSOL)	Tier 1	QL (10.2 GM per 30 days)
TRELEGY ELLIPTA (INHALATION AEROSOL POWDER BREATH ACTIVATED)	Tier 1	QL (60 EA per 30 days)
wixela inhub (inhalation aerosol powder breath activated) (generic advair)	Tier 1	QL (60 EA per 30 days)
Skeletal Muscle Relaxants		
Skeletal Muscle Relaxants		
chlorzoxazone (500mg oral tablet)	Tier 1	
cyclobenzaprine hcl (10mg oral tablet, 5mg oral tablet)	Tier 1	PA
methocarbamol (500mg oral tablet, 750mg oral tablet)	Tier 1	
Sleep Disorder Agents		
Sleep Promoting Agents		
BELSOMRA (ORAL TABLET)	Tier 1	QL (30 EA per 30 days)
eszopiclone (oral tablet)	Tier 1	QL (30 EA per 30 days)
QUVIVIQ (ORAL TABLET)	Tier 1	DL; QL (30 EA per 30 days)
ramelteon (oral tablet)	Tier 1	DL; QL (30 EA per 30 days)
tasimelteon (oral capsule)	Tier 1	PA; DL; QL (30 EA per 30 days)
temazepam (15mg oral capsule, 30mg oral capsule)	Tier 1	QL (30 EA per 30 days)

You can find information on what the symbols and abbreviations in this table mean by referring to pages 14 and 15.

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
zaleplon (10mg oral capsule)	Tier 1	QL (60 EA per 30 days)
zaleplon (5mg oral capsule)	Tier 1	QL (30 EA per 30 days)
zolpidem tartrate (oral tablet immediate release)	Tier 1	QL (30 EA per 30 days)
Wakefulness Promoting Agents		
armodafinil (150mg oral tablet, 200mg oral tablet, 250mg oral tablet)	Tier 1	PA; DL; QL (30 EA per 30 days)
armodafinil (50mg oral tablet)	Tier 1	PA; DL; QL (60 EA per 30 days)
LUMRYZ (ORAL PACKET)	Tier 1	PA; DL; QL (30 EA per 30 days)
LUMRYZ STARTER PACK (ORAL THERAPY PACK)	Tier 1	PA; DL; QL (56 EA per 365 days)
modafinil (100mg oral tablet)	Tier 1	PA; QL (30 EA per 30 days)
modafinil (200mg oral tablet)	Tier 1	PA; QL (60 EA per 30 days)
Smoking Cessation Agents		
Anti-Addiction/Substance Abuse Treatment Agents		
*cvs nicotine gum 2mg cinn (gum)**	$0 (OTC)	
*cvs nicotine gum 2mg mint (gum)**	$0 (OTC)	
*cvs nicotine gum 2mg orig (gum)**	$0 (OTC)	
*cvs nicotine gum 2mgfruit (gum)**	$0 (OTC)	
*cvs nicotine gum 4mg (gum)**	$0 (OTC)	
*cvs nicotine gum 4mg cinn (gum)**	$0 (OTC)	
*cvs nicotine gum 4mg mint (gum)**	$0 (OTC)	
*cvs nicotine gum 4mg orig (gum)**	$0 (OTC)	
*cvs nicotine gum 4mgfruit (gum)**	$0 (OTC)	
*cvs nicotine loz 2mg (lozenge)**	$0 (OTC)	
*cvs nicotine loz 2mg mint (lozenge)**	$0 (OTC)	
*cvs nicotine loz 4mg mint (lozenge)**	$0 (OTC)	
*eq nicotine gum 2mg cinn (gum)**	$0 (OTC)	
*eq nicotine gum 2mg mint (gum)**	$0 (OTC)	
*eq nicotine gum 2mgfruit (gum)**	$0 (OTC)	
*eq nicotine gum 4mg cinn (gum)**	$0 (OTC)	

You can find information on what the symbols and abbreviations in this table mean by referring to pages 14 and 15.

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
eq nicotine gum 4mg mint (gum) *	$0 (OTC)	
eq nicotine gum 4mg orig (gum) *	$0 (OTC)	
eq nicotine gum 4mgfruit (gum) *	$0 (OTC)	
eq nicotine loz 2mg cinn (lozenge) *	$0 (OTC)	
eq nicotine loz 2mg mint (lozenge) *	$0 (OTC)	
eq nicotine loz 4mg cinn (lozenge) *	$0 (OTC)	
eq nicotine loz 4mg mint (lozenge) *	$0 (OTC)	
ft nicotine gum 2mg (gum) *	$0 (OTC)	
ft nicotine gum 4mg (gum) *	$0 (OTC)	
ft nicotine loz 2mg (lozenge) *	$0 (OTC)	
ft nicotine loz 4mg (lozenge) *	$0 (OTC)	
gnp nicotine gum 2mg mint (gum) *	$0 (OTC)	
gnp nicotine gum 2mg orig (gum) *	$0 (OTC)	
gnp nicotine gum 4mg mint (gum) *	$0 (OTC)	
gnp nicotine gum 4mg orig (gum) *	$0 (OTC)	
gnp nicotine loz 2mg mint (lozenge) *	$0 (OTC)	
gnp nicotine loz 4mg mint (lozenge) *	$0 (OTC)	
gnp nicotine loz mini 2mg (lozenge) *	$0 (OTC)	
hm nicotine gum 2mg (gum) *	$0 (OTC)	
hm nicotine gum 4mg frt (gum) *	$0 (OTC)	
nicotine gum 2mg (gum) *	$0 (OTC)	
nicotine gum 2mgfruit (gum) *	$0 (OTC)	
nicotine gum 4mg (gum) *	$0 (OTC)	
nicotine loz 2mg mint (lozenge) *	$0 (OTC)	
nicotine loz 4mg cinn (lozenge) *	$0 (OTC)	
nicotine loz 4mg mint (lozenge) *	$0 (OTC)	
nicotine loz mini 2mg (lozenge) *	$0 (OTC)	
nicotine pol gum 2mg (gum) *	$0 (OTC)	
nicotine pol gum 2mg cinn (gum) *	$0 (OTC)	
nicotine pol gum 2mg mint (gum) *	$0 (OTC)	
nicotine pol gum 2mg orig (gum) *	$0 (OTC)	
nicotine pol gum 2mg ref (gum) *	$0 (OTC)	
nicotine pol gum 2mg strt (gum) *	$0 (OTC)	
nicotine pol gum 2mgfruit (gum) *	$0 (OTC)	
nicotine pol gum 4mg (gum) *	$0 (OTC)	
nicotine pol gum 4mg cinn (gum) *	$0 (OTC)	

You can find information on what the symbols and abbreviations in this table mean by referring to pages 14 and 15.

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
nicotine pol gum 4mg mint (gum) *	$0 (OTC)	
nicotine pol gum 4mg orig (gum) *	$0 (OTC)	
nicotine pol gum 4mg ref (gum) *	$0 (OTC)	
nicotine pol gum 4mg strt (gum) *	$0 (OTC)	
nicotine pol gum 4mgfruit (gum) *	$0 (OTC)	
nicotine pol loz 2mg chry (lozenge) *	$0 (OTC)	
nicotine pol loz 2mg cinn (lozenge) *	$0 (OTC)	
nicotine pol loz 2mg mini (lozenge) *	$0 (OTC)	
nicotine pol loz 2mg mint (lozenge) *	$0 (OTC)	
nicotine pol loz 4mg chry (lozenge) *	$0 (OTC)	
nicotine pol loz 4mg cinn (lozenge) *	$0 (OTC)	
nicotine pol loz 4mg mint (lozenge) *	$0 (OTC)	
sm nicotine gum 4mg (gum) *	$0 (OTC)	
sm nicotine gum 4mg mint (gum) *	$0 (OTC)	
Vitamins		
Electrolytes/Minerals/Metals/Vitamins		
animal shape chw complete (tablet chewable) *	$0 (OTC)	
b-12 tab 1000mcg (tablet, tablet disintegrating) *	$0 (OTC)	
b-12 tab 500mcg (tablet) *	$0 (OTC)	
b-6 tab 100mg (tablet) *	$0 (OTC)	
b-6 tab 50mg (tablet) *	$0 (OTC)	
b1 tab 100mg (tablet) *	$0 (OTC)	
b12 tab 500mcg (tablet) *	$0 (OTC)	
b6 natural tab 100mg (tablet) *	$0 (OTC)	
chewable chw children (tablet chewable) *	$0 (OTC)	
child chew chw vitamins (tablet chewable) *	$0 (OTC)	
child chew/ chw extra c (tablet chewable) *	$0 (OTC)	
children vit chw (tablet chewable) *	$0 (OTC)	
childrens chw /iron (tablet chewable) *	$0 (OTC)	
childrens chw multivit (tablet chewable) *	$0 (OTC)	
childrens chw vitamins (tablet chewable) *	$0 (OTC)	
chld mltivit chw /mineral (tablet chewable) *	$0 (OTC)	
compl multiv chw childrns (tablet chewable) *	$0 (OTC)	
cvs b6 tab 100mg (tablet) *	$0 (OTC)	
cvs children chw complete (tablet chewable) *	$0 (OTC)	
cvs d3 cap 250mcg (capsule) *	$0 (OTC)	

You can find information on what the symbols and abbreviations in this table mean by referring to pages 14 and 15.

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
d3 cap 10000 (capsule) *	$0 (OTC)	
d3 cap 10000unt (capsule) *	$0 (OTC)	
d3 cap 250mcg (capsule) *	$0 (OTC)	
d3 hp cap 250mcg (capsule) *	$0 (OTC)	
d3 max str cap 250mcg (capsule) *	$0 (OTC)	
d3 tab 1000unit (tablet) *	$0 (OTC)	
d3-50 cap 50000unt (capsule) *	$0 (OTC)	
eql b-12 tab 1000mcg (tablet) *	$0 (OTC)	
eql b-6 tab 100mg (tablet) *	$0 (OTC)	
fruity chews chw (tablet chewable) *	$0 (OTC)	
fruity chews chw /iron (tablet chewable) *	$0 (OTC)	
ft childrens chw multi (tablet chewable) *	$0 (OTC)	
ft vit b-12 tab 1000mcg (tablet, tablet er) *	$0 (OTC)	
ft vit b-12 tab 500mcg (tablet) *	$0 (OTC)	
ft vit b-6 tab 100mg (tablet) *	$0 (OTC)	
ft vit d3 cap 250mcg (capsule) *	$0 (OTC)	
ft vit d3 tab 25mcg (tablet) *	$0 (OTC)	
gnp children chw extra c (tablet chewable) *	$0 (OTC)	
gnp d3 cap 250mcg (capsule) *	$0 (OTC)	
gnp little chw ones (tablet chewable) *	$0 (OTC)	
gnp vit b-12 tab 500mcg (tablet) *	$0 (OTC)	
gnp vit b-6 tab 100mg (tablet) *	$0 (OTC)	
gnp vit d tab 1000unit (tablet) *	$0 (OTC)	
gnp vit d3 tab 1000unit (tablet) *	$0 (OTC)	
little chw animals (tablet chewable) *	$0 (OTC)	
MAGNEBIND TAB 400 (TABLET)*	$0 (OTC)	
MAXIMUM D3 CAP 325MCG (CAPSULE)*	$0 (OTC)	
multi vit/fl dro 0.5mg/ml (suspension) *	$0 (OTC)	
multi-vit/fe dro /fl 0.25 (solution) *	$0 (OTC)	
multi-vit/fl dro /fe 0.25 (solution) *	$0 (OTC)	
multi-vit/fl dro 0.5mg/ml (suspension) *	$0 (OTC)	
multivit/fl dro 0.25mg (suspension) *	$0 (OTC)	
multivit/fl sus 0.25mg (suspension) *	$0 (OTC)	
multivitamin chw children (tablet chewable) *	$0 (OTC)	
multivitamin chw iron (tablet chewable) *	$0 (OTC)	
pyridoxine tab 50mg (tablet) *	$0 (OTC)	

You can find information on what the symbols and abbreviations in this table mean by referring to pages 14 and 15.

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
qc childrens chw complete (tablet chewable) *	$0 (OTC)	
qc childrens chw extra c (tablet chewable) *	$0 (OTC)	
qc childrens chw iron (tablet chewable) *	$0 (OTC)	
qc vit b12 tab 500mcg (tablet) *	$0 (OTC)	
qc vit b6 tab 100mg (tablet) *	$0 (OTC)	
qc vit d3 tab 1000unit (tablet) *	$0 (OTC)	
qc vit d3 tab 25mcg (tablet) *	$0 (OTC)	
vitamin b 6 tab 50mg (tablet) *	$0 (OTC)	
vitamin b-1 tab 100mg (tablet) *	$0 (OTC)	
vitamin b-12 tab 1000mcg (tablet, tablet er) *	$0 (OTC)	
vitamin b-12 tab 500mcg (tablet) *	$0 (OTC)	
vitamin b-6 tab 100mg (tablet) *	$0 (OTC)	
vitamin b-6 tab 50mg (tablet) *	$0 (OTC)	
vitamin b1 tab 100mg (tablet) *	$0 (OTC)	
vitamin b12 tab 1000mcg (tablet, tablet er) *	$0 (OTC)	
vitamin b12 tab 500mcg (tablet) *	$0 (OTC)	
vitamin b6 tab 100mg (tablet) *	$0 (OTC)	
vitamin b6 tab 50mg (tablet) *	$0 (OTC)	
vitamin d cap 1250mcg (capsule) *	$0 (OTC)	
vitamin d tab 1000unit (tablet) *	$0 (OTC)	
vitamin d3 cap 1.25mg (capsule) *	$0 (OTC)	
vitamin d3 cap 10000 (capsule) *	$0 (OTC)	
vitamin d3 cap 10000unt (capsule) *	$0 (OTC)	
vitamin d3 cap 50000unt (capsule) *	$0 (OTC)	
vitamin d3 tab 1000unit (tablet) *	$0 (OTC)	
vitamin d3 tab 25mcg (tablet) *	$0 (OTC)	
yl vit b-6 tab 100mg (tablet) *	$0 (OTC)	

You can find information on what the symbols and abbreviations in this table mean by referring to pages 14 and 15.

D. Index of Covered Drugs

In this section, you can find a drug by searching for its name alphabetically. This will tell you the page number where you can find additional coverage information for your drug.

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