



Your 2026 Prescription Drug List

Access 4-Tier

Effective January 1, 2026



**United
Healthcare**

This Prescription Drug List (PDL) is accurate as of January 1, 2026 and is subject to change after this date. This PDL applies to members of our UnitedHealthcare, Neighborhood Health Partnership Plan, River Valley and Oxford medical plans when sold in your market with a pharmacy benefit subject to the Access 4-Tier PDL. Your estimated coverage and copayment/coinsurance may vary based on the benefit plan you choose and the effective date of the plan.

Table of contents

Understanding your Prescription Drug List (PDL)	4
Medication tips	5
Reading your PDL.....	6
Questions	8
Analgesics	
Drugs for Pain.....	9
Drugs for Pain and Inflammation.....	10
Anti-Addiction / Substance Abuse Treatment Agents.....	10
Antibacterials	
Drugs for Infections.....	11
Anticoagulants	
Drugs to Treat or Prevent Blood Clots.....	13
Anticonvulsants	
Drugs for Seizures.....	13
Antidementia Agents	
Drugs for Alzheimer’s Disease and Dementia	14
Antidepressants	
Drugs for Depression.....	14
Antiemetics	
Drugs for Nausea and Vomiting.....	15
Antifungals	
Drugs for Fungal Infections.....	15
Antigout Agents	
Drugs for Gout.....	16
Antimigraine Agents	
Drugs for Migraines	16
Antimyasthenic Agents	
Drugs to Treat Myasthenia Gravis.....	17
Antimycobacterials	
Drugs to Treat Infections.....	17
Antineoplastics	
Drugs for Cancer	17
Antiparasitics	
Drugs for Parasitic Infections.....	18
Antiparkinson Agents	
Drugs for Parkinson’s Disease.....	18
Antiplatelets	
Drugs for Heart Attack and Stroke Prevention.....	18
Antipsychotics	
Drugs for Mood Disorders.....	19
Antivirals	
Drugs for Viral Infections	19
Anxiolytics	
Drugs for Anxiety.....	20
Bipolar Agents	
Drugs for Mood Disorders.....	20
Cardiovascular Agents	
Drugs for Heart and Circulation Conditions.....	20
Central Nervous System Agents	
Drugs for Attention Deficit Disorder	24
Drugs for Multiple Sclerosis.....	25
Miscellaneous.....	25



Dental and Oral Agents	
Drugs for Mouth and Throat Conditions	25
Dermatological Agents	
Drugs for Skin Conditions.....	26
Diabetes	
Glucose Monitoring and Supplies.....	29
Insulin.....	31
Non-Insulin Agents.....	32
Drugs for Blood Disorders.....	33
Drugs for Sexual Dysfunction.....	34
Electrolytes / Vitamins.....	34
Gastrointestinal Agents	
Drugs for Acid Reflux and Ulcer.....	35
Drugs for Bowel, Intestine and Stomach Conditions	36
Genetic or Enzyme Disorder	
Drugs for Replacement, Modification, Treatment	37
Genitourinary Agents	
Drugs for Bladder, Genital and Kidney Conditions.....	37
Drugs for Prostate Conditions.....	38
Hormonal Agents	
Hormone Replacement and Birth Control	38
Oral Steroids.....	42
Other.....	42
Testosterone Replacement.....	42
Thyroid.....	43
Immunological Agents	
Drugs for Immune System Stimulation or Suppression	43
Drugs for Vaccination	45
Infertility Agents	45
Inflammatory Bowel Disease Agents	45
Metabolic Bone Disease Agents	
Drugs for Osteoporosis	46
Other.....	46
Ophthalmic Agents	
Drugs for Eye Allergy, Infection and Inflammation	46
Drugs for Glaucoma.....	47
Drugs for Miscellaneous Eye Conditions	48
Otic Agents	
Drugs for Ear Conditions.....	48
Respiratory	
Drugs for Anaphylaxis	48
Respiratory Tract / Pulmonary Agents	
Drugs for Allergies, Cough, Cold.....	49
Drugs for Asthma and COPD.....	49
Drugs for Cystic Fibrosis	51
Drugs for Pulmonary Fibrosis.....	51
Drugs for Pulmonary Hypertension	51
Skeletal Muscle Relaxants	
Drugs for Muscle Pain and Spasm	51
Sleep Disorder Agents.....	52
Index	53



Understanding your Prescription Drug List (PDL)

What is a PDL?

This document is a list of the most commonly prescribed medications. It includes both brand-name and generic prescription medications approved by the Food and Drug Administration (FDA). Medications are listed by common categories or classes and placed in tiers that represent the cost you pay out-of-pocket. Then, they are listed in alphabetical order.

How do I use my PDL?

You and your doctor can check the PDL to help you select the most cost-effective prescription medications. This guide tells you if a medication is generic or a brand-name, and if there are coverage requirements or limits that apply. Bring this list with you when you see your doctor. If your medication is not listed here, please visit your plan's member website or call the toll-free phone number on your member ID card.

What are tiers?

Tiers are the different cost levels you pay for a medication. Your plan sets a cost for each tier. This is how much you will pay when you fill a prescription. See page 6 for more information.

When does the PDL change?

PDL changes typically occur 2-3 times per year. However, changes that have a positive impact for you – such as coverage for new medications or cost savings – may occur at any time. You can log in to your plan's member website listed on your member ID card at any time to check your medication coverage and lower-cost options.

Why are some medications excluded from coverage?

We review treatments based on their total value, including how well they work, how safe they are, their cost and whether options are available to treat the same or similar medical conditions. Certain medications may not be covered or be subject to prior authorization (sometimes referred to as precertification)¹ if your plan covers other lower-cost medications. For example, there may be a lower-cost covered option or an over-the-counter medication that works the same way.² In some cases, the same product can be made by 2 or more drug companies, but greatly vary in cost. In these instances, only the lower-cost product may be covered.

You should review your benefit plan documents to confirm if any medications are excluded from your plan. You can log in to your plan's member website listed on your member ID card at any time to check your medication coverage. Talk to your doctor to see if there are lower-cost options or over-the-counter medications available.

Who decides which medications are covered?

The UnitedHealthcare® Pharmacy and Therapeutics Committee, which includes both internal and external doctors and pharmacists, meets regularly to provide clinical reviews of all medications. Using this information, senior UnitedHealth Group® doctors and business leaders meet to evaluate overall health care value. They also set coverage and tier status for all medications.

About this PDL

Where differences exist between this PDL and your benefit plan documents, the benefit plan documents rule. This PDL is not a full list of medications, and not all medications listed may be covered by your plan.

1. Depending on your benefit, you may have notification or medical necessity requirements for select medications.
2. For New York and New Jersey plans, a prescription drug product that is therapeutically equal to an over-the-counter drug may be covered if it is determined to be medically necessary.



Medication tips

What is the difference between brand-name and generic medications?

Generic medications contain the same active ingredients (what makes the medication work) as brand-name medications, but they often cost less. Once the patent for a brand-name medication ends, the FDA can approve a generic version with the same active ingredients. These types of medications are known as generic medications. Sometimes, the same company that makes a brand-name medication also makes the generic version.

What if my doctor writes a brand-name prescription?

If your doctor gives you a prescription for a brand-name medication, ask if a generic or lower-cost option is available and could be right for you. Generic medications are usually your lowest-cost option, but not always. For some plans, if a brand-name drug is filled, and a generic is available, your cost-share may be the copayment PLUS the cost difference between the brand-name drug and the generic.

What if I am taking a specialty medication?

Specialty medications are high-cost and are used to treat rare or complex conditions that require extra care and support. For most plans, these medications are managed through a specialty pharmacy. Take advantage of personalized support designed to help you get the most out of your treatment plan. To learn more, visit your plan's website or call the toll-free number on your member ID card.

Please note, not all specialty medications are listed here. If you're taking a specialty medication that is on a higher tier, call the toll-free phone number on your member ID card to talk with a pharmacist about finding lower-cost options.

Over-the-counter (OTC) medications

An OTC medication may be the right option for some conditions. Talk to your doctor about available OTC options. Even though these medications may not be covered by your pharmacy benefit, they may cost less than a prescription medication.

Reading your PDL

The PDL gives you choices. This allows you and your doctor to decide your best course of treatment. In this PDL, brand-name medications are shown in UPPERCASE. Generics are in lowercase.

Tier information

Using lower-tier medications may lower your out-of-pocket cost. Your plan may have multiple or no tiers. Please note: If you have a high deductible plan, the tier cost levels may apply once you hit your deductible.

Drug Tier	Includes	Helpful Tips
Tier 1	\$ Lower-cost Medications that provide the highest overall value. Mostly generic drugs. Some brand-name drugs may also be included.	Use Tier 1 drugs for the lowest out-of-pocket costs.
Tiers 2 and 3	\$\$ Mid-range cost Medications that provide good overall value. Mainly preferred brand name drugs.	Use Tier 2 or Tier 3 drugs, instead of Tier 4, to help reduce your out-of-pocket costs.
Tier 4	\$\$\$ Highest-cost Medications that provide the lowest overall value.	Many Tier 4 drugs have lower-cost options in Tiers 1, 2 or 3. Ask your doctor if they could work for you.



Reading your PDL (continued)

Drug list information

In this drug list, some medications are noted with letters next to them to help you see which ones may have specific coverage requirements or limits. Your plan sets how these medications may be covered for you.

E	May be excluded from coverage. May be subject to prior authorization for fully insured benefit plans governed by state law in Connecticut, New Jersey, and New York – There are over-the-counter (OTC) or lower-cost covered options available.
H	Health Care Reform Preventive – This medication is part of a health care reform preventive benefit and is generally available at no cost to you.
H-PA	Health Care Reform Preventive with prior authorization – May be part of health care reform preventive benefit and available at no cost to you if prior authorization criteria are met.
PA	Prior authorization (sometimes referred to as precertification)³ – Requires your doctor to provide information about why you are taking a medication before your plan can decide how it may be covered.
QL	Quantity limits – The largest quantity of medication covered per copayment or in a defined period of time.
RS	Refill and Save Program⁴ – Save money on your copayment when you refill your prescription on time as prescribed. Program eligibility may vary.
SP	Specialty medication – Specialty medications treat complex or rare conditions and may require special storage and handling. You may have to get these medications from a specialty pharmacy.
ST	Step therapy (referred to as First Start in New Jersey) – Requires prior authorization and may require you to try one or more other medications before the medication you are requesting may be covered.

3. Depending on your benefit, you may have notification or medical necessity requirements for select medications.

4. Not applicable to Neighborhood Health Plan and Oxford plans.



Reading your PDL (continued)

Coverage details

Some drug classes in this PDL have other important coverage details. Review this list to see if drug classes that apply to you are noted.

- **Central nervous system: sedatives/hypnotics**

Coverage is set by the member's prescription drug benefit plan. Please review your plan documents for coverage and cost-share.

- **Diabetes: blood glucose monitoring, insulin, non-insulin**

Diabetic supplies and prescription medications may be subject to different cost-share amounts for Oxford plans. Please see your Summary of Benefits and Coverage (SBC) for details.

- **Diabetes: continuous glucose monitors, sensors**

Coverage is set by your prescription drug benefit plan. Please review your plan documents for coverage and cost-share. Diabetic self-management items, including continuous glucose monitors, may be covered under your pharmacy and/or medical plan.

- **Endocrine: growth hormone**

Coverage is set by your prescription drug plan. Please review your plan documents for coverage and cost-share.

- **Infertility**

Coverage is set by your prescription drug plan. Please review your plan documents for coverage and cost-share. Prior authorization (sometimes referred to as precertification) may be required for Oxford plans or where a state mandates infertility drug coverage.

- **Medications for sexual dysfunction**

Coverage is set by your prescription drug benefit plan. Please review your plan documents for coverage and cost-share.

- **Termination of pregnancy**

Coverage under the prescription drug benefit is set by your medical benefit plan. Please review your plan documents for benefit coverage, exclusions and cost-sharing. Find out more by calling the number on your member ID card.

Questions

For the most current list of covered medications or if you have questions:



Call the toll-free phone number on your member ID card



Visit your plan's member website listed on your member ID card to:

- View your pharmacy benefit and coverage information, including prescription history
- View medication interactions and side effects
- Locate a participating retail pharmacy by ZIP code
- Look up possible lower-cost medication alternatives
- Compare medication pricing and options

And, if home delivery services are included in your pharmacy benefit, you can also:

- Refill prescriptions
- Check the status of your order
- Set up reminders for refills
- Manage your account



Drug Name	Drug Tier	Requirements & Limits
Analgesics - Drugs for Pain		
acetaminophen-codeine oral tablet	1	QL
apap-caff-dihydrocodeine	1	QL
ascomp-codeine	1	QL
bac (butalbital-acetamin-caff)	1	QL
BELBUCA	3	PA, QL
BUPAP ORAL TABLET 50-300 MG	E	
buprenorphine	1	PA, QL
butalbital-acetaminophen oral tablet 50-300 mg	E	
butalbital-acetaminophen oral tablet 50-325 mg	1	
butalbital-apap-caff-cod	1	QL
butalbital-apap-caffeine	1	QL
butalbital-asa-caff-codeine	1	QL
butalbital-aspirin-caffeine	1	
butorphanol tartrate nasal	1	QL
BUTRANS	E	PA, QL
DILAUDID ORAL TABLET	E	QL
endocet	1	QL
ESGIC ORAL CAPSULE 50-325-40 MG	4	QL
ESGIC ORAL TABLET 50-325-40 MG	4	QL
fentanyl	1	PA, QL
FIORICET	4	QL
FIORICET/CODEINE	E	QL
hydrocodone-acetaminophen oral solution 10-300 mg/15ml, 10-325 mg/15ml, 7.5-325 mg/15ml	1	QL
hydrocodone-acetaminophen oral tablet	1	QL
hydromorphone hcl oral tablet	1	QL
JOURNAVX	4	QL
lidocaine external ointment 5 %	1	QL
lidocaine external patch 5 %	1	PA, QL

Drug Name	Drug Tier	Requirements & Limits
lidocaine-prilocaine external cream	1	
LIDODERM	E	PA, QL
methadone hcl oral tablet	1	PA, QL
morphine sulfate er oral tablet extended release	1	PA, QL
morphine sulfate oral tablet	1	QL
MS CONTIN	E	PA, QL
NUCYNTA	2	QL
NUCYNTA ER	3	PA, QL
OXYCODONE HCL ER ORAL TABLET ER 12 HOUR ABUSE-DETERRENT 10 MG, 20 MG, 40 MG, 80 MG	E	PA, QL
oxycodone hcl oral capsule	1	QL
oxycodone hcl oral solution	1	QL
oxycodone hcl oral tablet 10 mg, 15 mg, 20 mg, 30 mg, 5 mg	1	QL
OXYCODONE-ACETAMINOPHEN ORAL TABLET 10-300 MG, 2.5-300 MG, 5-300 MG, 7.5-300 MG	E	QL
oxycodone-acetaminophen oral tablet 10-325 mg, 2.5-325 mg, 5-325 mg, 7.5-325 mg	1	QL
OXYCONTIN	E	PA, QL
PERCOCET	E	QL
premium lidocaine	1	QL
PROLATE ORAL TABLET	E	QL
ROXICODONE	E	QL
TENCON	3	
tramadol hcl (er biphasic) oral tablet extended release 24 hour	1	(generic for Ryzolt), QL
tramadol hcl er	1	(generic for Ultram ER), QL
tramadol hcl oral tablet 100 mg, 25 mg, 50 mg	1	QL
tramadol hcl oral tablet 75 mg	E	QL
tramadol-acetaminophen	1	QL
TREZIX	3	QL

See page 6-8 for coverage details.



Drug Name	Drug Tier	Requirements & Limits
XTAMPZA ER	4	PA, QL
ZEBUTAL ORAL CAPSULE 50-325-40 MG	4	QL
ZTLIDO	3	PA, QL
Analgesics - Drugs for Pain and Inflammation		
ANAPROX DS	E	
CELEBREX	E	
celecoxib oral	1	
DAYPRO	4	
diclofenac potassium oral tablet 25 mg	E	QL
diclofenac potassium oral tablet 50 mg	1	
diclofenac sodium er	1	
diclofenac sodium external gel 1 %	E	
diclofenac sodium oral	1	
diclofenac-misoprostol	1	
EC-NAPROSYN ORAL TABLET DELAYED RELEASE 375 MG	3	
EC-NAPROSYN ORAL TABLET DELAYED RELEASE 500 MG	4	
ec-naproxen	1	
etodolac	1	
FELDENE ORAL CAPSULE 20 MG	4	
ibuprofen oral suspension 100 mg/5ml	E	
ibuprofen oral tablet 400 mg, 600 mg, 800 mg	1	
indomethacin er	1	
indomethacin oral capsule	1	
ketorolac tromethamine oral	1	
LODINE	E	
LOFENA	E	QL
meloxicam oral tablet	1	
nabumetone oral	1	
NAPROSYN	E	
naproxen dr	1	
naproxen oral tablet	1	

Drug Name	Drug Tier	Requirements & Limits
naproxen oral tablet delayed release	1	
naproxen sodium oral tablet 275 mg, 550 mg	1	
oxaprozin oral tablet	1	
piroxicam oral	1	
RELAFEN DS	E	
sulindac oral	1	
Anti-Addiction / Substance Abuse Treatment Agents		
acamprosate calcium	1	
buprenorphine hcl sublingual	1	QL
buprenorphine hcl-naloxone hcl sublingual film	1	QL
buprenorphine hcl-naloxone hcl sublingual tablet sublingual	1	QL
bupropion hcl er (smoking det)	1	H
cvs nicotine	1	H
cvs nicotine polacrilex	1	H
disulfiram oral	1	
eq nicotine	1	H
eq nicotine mouth/throat gum 4 mg	1	H
eq nicotine polacrilex	1	H
eq nicotine step 3	1	H
eq nicotine polacrilex mouth/throat lozenge 2 mg, 4 mg	1	H
ft naloxone hcl	1	QL
ft nicotine	1	H
ft nicotine mini	1	H
gnp naloxone hcl	1	QL
gnp nicotine mini	1	H
gnp nicotine polacrilex mouth/throat gum 2 mg	1	H
gnp nicotine polacrilex mouth/throat lozenge	1	H
gnp nicotine transdermal	1	H
goodsense nicotine	1	H
habitrol	1	H

See page 6-8 for coverage details.



Drug Name	Drug Tier	Requirements & Limits
hm nicotine polacrilex mouth/throat gum 2 mg, 4 mg	1	H
hm nicotine polacrilex mouth/throat lozenge 2 mg	1	H
hm nicotine transdermal patch 24 hour 21 mg/24hr, 7 mg/24hr	1	H
KLOXXADO	1	QL
kls quit2	1	H
kls quit4	1	H
naloxone hcl injection solution prefilled syringe	1	QL
naloxone hcl nasal	1	QL
naltrexone hcl oral	1	QL
NARCAN	1	QL (includes Narcan OTC)
NICODERM CQ	4	H
NICORETTE MINI	2	H
NICORETTE MOUTH/THROAT GUM	4	H
NICORETTE MOUTH/THROAT LOZENGE	2	H
NICORETTE STARTER KIT	4	H
nicotine mini	1	H
nicotine polacrilex mini	1	H
nicotine polacrilex mouth/throat	1	H
nicotine step 1	1	H
nicotine step 2	1	H
nicotine step 3	1	H
nicotine transdermal patch 24 hour	1	H
OPVEE	1	QL
qc nicotine transdermal system	1	H
ra mini nicotine	1	H
ra nicotine mouth/throat gum 4 mg	1	H
ra nicotine polacrilex	1	H
ra nicotine transdermal patch 24 hour 21 mg/24hr	1	H
REXTOVY	1	QL

Drug Name	Drug Tier	Requirements & Limits
sm nicotine	1	H
sm nicotine polacrilex	1	H
sm nicotine transdermal patch 24 hour 14 mg/24hr, 21 mg/24hr, 7 mg/24hr	1	H
SUBOXONE	E	PA, QL
THRIVE	4	H
varenicline	1	PA, H
ZIMHI	2	QL
ZUBSOLV	1	QL
Antibacterials - Drugs for Infections		
amoxicillin	1	
amoxicillin-potassium clavulanate	1	
ampicillin	1	
AUGMENTIN	4	
AUGMENTIN ES-600	E	
AVIDOXY	4	
azithromycin oral packet 1 gm	1	
BACTRIM	4	
BACTRIM DS	4	
cefadroxil oral capsule	1	
cefadroxil oral suspension reconstituted	1	
cefdinir	1	
cefixime oral capsule	1	
cefpodoxime proxetil oral tablet	1	
cefprozil	1	
cefuroxime axetil	1	
cephalexin	1	
CIPRO ORAL TABLET	4	
ciprofloxacin hcl oral	1	
clarithromycin oral tablet	1	
CLEOCIN ORAL CAPSULE 150 MG, 300 MG	4	
CLEOCIN ORAL CAPSULE 75 MG	2	
CLEOCIN ORAL SOLUTION RECONSTITUTED	4	

See page 6-8 for coverage details.



Drug Name	Drug Tier	Requirements & Limits
CLEOCIN VAGINAL CREAM	4	
clindamycin hcl oral	1	
clindamycin palmitate hcl	1	
clindamycin phosphate vaginal	1	
CLINDESSE	2	
dicloxacillin sodium	1	
DIFICID ORAL TABLET	E	QL
doxycycline hyclate oral capsule	1	
doxycycline hyclate oral tablet 100 mg, 150 mg, 20 mg, 75 mg	1	
doxycycline hyclate oral tablet 50 mg	E	
doxycycline monohydrate oral	1	
E.E.S. GRANULES	3	
ERYPED 200 ORAL SUSPENSION RECONSTITUTED 200 MG/5ML	3	
ERYPED 400	4	
erythromycin base oral tablet	1	
erythromycin ethylsuccinate oral suspension reconstituted	1	
fidaxomicin oral tablet	1	QL
fosfomicin tromethamine	1	
gentamicin sulfate external	1	
HIPREX	4	
levofloxacin oral tablet	1	
LIKMEZ	4	
linezolid oral tablet	1	
MACROBID	4	
MACRODANTIN	4	
methenamine hippurate	1	
metronidazole oral tablet 125 mg	E	
metronidazole oral tablet 250 mg, 500 mg	1	
metronidazole vaginal	1	
minocycline hcl oral capsule	1	
MONDOXYNE NL	E	

Drug Name	Drug Tier	Requirements & Limits
moxifloxacin hcl oral	1	
mupirocin cream	1	
mupirocin ointment	1	
neomycin sulfate oral	1	
nitrofurantoin macrocrystal	1	
nitrofurantoin monohydrate macrocrystals	1	
NUVESSA	4	
NUZYRA ORAL	4	
penicillin v potassium	1	
SEYSARA	E	
SILVADENE	4	
silver sulfadiazine external	1	
ssd	1	
sulfamethoxazole-trimethoprim oral suspension 200-40 mg/5ml	1	
sulfamethoxazole-trimethoprim oral tablet	1	
sulfatrim pediatric	1	
TARGADOX	E	
tetracycline hcl oral capsule	1	
tinidazole oral	1	
trimethoprim oral	1	
VANCOCIN	4	
vancomycin hcl oral capsule	1	
VANDAZOLE	4	
VIBRAMYCIN ORAL CAPSULE 100 MG	4	
VIBRAMYCIN ORAL SUSPENSION RECONSTITUTED 25 MG/5ML	4	
XACIATO	2	
XENLETA ORAL TABLET 600 MG	3	
XIFAXAN ORAL TABLET 200 MG	3	
XIFAXAN ORAL TABLET 550 MG	3	QL
ZITHROMAX	4	
ZYVOX ORAL TABLET	E	

See page 6-8 for coverage details.



Drug Name	Drug Tier	Requirements & Limits
Anticoagulants - Drugs to Treat or Prevent Blood Clots		
dabigatran etexilate mesylate	1	QL
ELIQUIS TABLET	2	QL
enoxaparin sodium injection solution prefilled syringe	1	
jantoven	1	
LOVENOX INJECTION SOLUTION PREFILLED SYRINGE	E	
PRADAXA ORAL CAPSULE	E	QL
rivaroxaban	1	QL
warfarin sodium oral	1	
XARELTO	2	QL
Anticonvulsants - Drugs for Seizures		
APTIOM	4	PA
BRIVIACT ORAL TABLET	3	PA
carbamazepine er	1	
carbamazepine oral tablet	1	
carbamazepine oral tablet chewable	1	
CARBATROL	4	
clobazam oral suspension 2.5 mg/ml	1	PA
clobazam oral tablet	1	PA
DEPAKOTE	4	
DEPAKOTE ER	4	
DEPAKOTE SPRINKLES	4	
DIASTAT ACUDIAL RECTAL GEL 10 MG, 20 MG	4	
DIASTAT PEDIATRIC RECTAL GEL 2.5 MG	2	
diazepam rectal	1	
DILANTIN	3	
divalproex sodium er	1	
divalproex sodium oral	1	
ELEPSIA XR	E	PA
EPIDIOLEX	3	PA, SP
epitol	1	

Drug Name	Drug Tier	Requirements & Limits
eslicarbazepine acetate	1	PA
ethosuximide oral	1	
FYCOMPA ORAL SUSPENSION	4	PA
FYCOMPA ORAL TABLET	3	PA
gabapentin oral capsule	1	
gabapentin oral solution 250 mg/5ml	1	
GABAPENTIN ORAL TABLET 25 MG, 50 MG	E	
gabapentin oral tablet 600 mg, 800 mg	1	
GABARONE	E	
KEPPRA ORAL	4	
KEPPRA XR	4	
lacosamide oral	1	
LAMICTAL	4	
LAMICTAL ODT ORAL TABLET DISPERSIBLE	4	
LAMICTAL XR ORAL TABLET EXTENDED RELEASE 24 HOUR	3	
lamotrigine er	1	
lamotrigine oral tablet	1	
lamotrigine oral tablet chewable	1	
lamotrigine oral tablet dispersible	1	
levetiracetam er	1	
levetiracetam oral solution	1	
levetiracetam oral tablet	1	
LIBERVANT BUCCAL FILM 10 MG, 12.5 MG, 15 MG, 5 MG, 7.5 MG	3	PA
MOTPOLY XR	3	PA
MYSOLINE	2	
NAYZILAM	3	PA
NEURONTIN	4	
ONFI	4	PA
oxcarbazepine	1	
oxcarbazepine er	E	

See page 6-8 for coverage details.



Drug Name	Drug Tier	Requirements & Limits
perampanel	1	PA
phenobarbital oral tablet	1	
phenytek	1	
phenytoin sodium extended	1	
primidone oral tablet 125 mg	1	PA
primidone oral tablet 250 mg, 50 mg	1	
roweepa	1	
subvenite	1	
SYMPAZAN	4	PA
TEGRETOL ORAL TABLET	4	
TEGRETOL-XR	4	
TOPAMAX	4	PA
TOPAMAX SPRINKLE	4	PA
topiramate er oral capsule extended release 24 hour	E	
topiramate oral capsule sprinkle	1	
topiramate oral tablet	1	
TRILEPTAL	4	
TROKENDI XR	E	
valproic acid oral capsule	1	
valproic acid oral solution 250 mg/5ml	1	
VALTOCO	3	PA, QL
VIMPAT ORAL	4	
XCOPRI ORAL TABLET 100 MG, 150 MG, 200 MG, 25 MG, 50 MG	3	PA
ZARONTIN	4	
ZONEGRAN	4	PA
zonisamide oral	1	

Antidementia Agents - Drugs for Alzheimer's Disease and Dementia

ARICEPT	E	
donepezil hcl oral tablet	1	
EXELON	E	
memantine hcl er	1	
memantine hcl oral tablet	1	

Drug Name	Drug Tier	Requirements & Limits
NAMENDA ORAL TABLET 10 MG, 5 MG	E	
NAMENDA TITRATION PAK	E	
NAMENDA XR ORAL CAPSULE EXTENDED RELEASE 24 HOUR 14 MG, 21 MG, 28 MG, 7 MG	E	
rivastigmine	1	
rivastigmine tartrate	1	

Antidepressants - Drugs for Depression

amitriptyline hcl oral	1	
ANAFRANIL	E	
AUVELITY	4	ST, QL
bupropion hcl er (sr)	1	
bupropion hcl er (xl) oral tablet extended release 24 hour 150 mg, 300 mg	1	
BUPROPION HCL ER (XL) ORAL TABLET EXTENDED RELEASE 24 HOUR 450 MG	4	QL
bupropion hcl oral	1	
CELEXA	E	
citalopram hydrobromide oral tablet	1	
clomipramine hcl oral	1	
CYMBALTA	E	
desipramine hcl oral	1	
desvenlafaxine succinate er	1	QL
doxepin hcl oral capsule	1	
doxepin hcl oral concentrate	1	
duloxetine hcl oral	1	
EFFEXOR XR	E	
escitalopram oxalate oral solution 5 mg/5ml	1	
escitalopram oxalate oral tablet	1	
FETZIMA	4	ST, QL
fluoxetine hcl oral capsule	1	
fluoxetine hcl oral solution	1	
fluoxetine hcl oral tablet 10 mg	1	QL

See page 6-8 for coverage details.



Drug Name	Drug Tier	Requirements & Limits
fluoxetine hcl oral tablet 20 mg, 60 mg	1	
fluvoxamine maleate	1	
fluvoxamine maleate er	1	QL
FORFIVO XL	4	QL
imipramine hcl oral	1	
LEXAPRO	E	
mirtazapine oral	1	
NORPRAMIN	4	
nortriptyline hcl oral capsule	1	
PAMELOR	E	
paroxetine hcl er	1	QL
paroxetine hcl oral tablet	1	
PAXIL	E	
PAXIL CR	E	QL
PRISTIQ	E	QL
PROZAC	E	
RALDESY	4	PA
REMERON	E	
REMERON SOLTAB ORAL TABLET DISPERSIBLE 15 MG, 30 MG	E	
SERTRALINE HCL ORAL CAPSULE	4	QL
sertraline hcl oral concentrate	1	
sertraline hcl oral tablet	1	
SPRAVATO	4	PA, QL
trazodone hcl oral	1	
TRINTELLIX	4	ST, QL
venlafaxine hcl	1	
venlafaxine hcl er oral capsule extended release 24 hour	1	
venlafaxine hcl er oral tablet extended release 24 hour	1	QL
VIIBRYD	E	QL
vilazodone hcl	1	QL
WAINUA	2	PA, QL, SP

Drug Name	Drug Tier	Requirements & Limits
WELLBUTRIN SR	E	
WELLBUTRIN XL	E	
ZOLOFT	E	
ZURZUVAE	2	PA, QL, SP
Antiemetics - Drugs for Nausea and Vomiting		
ANTIVERT ORAL TABLET 50 MG	E	
aprepitant oral capsule 125 mg, 40 mg, 80 mg	1	
DICLEGIS	E	
doxylamine-pyridoxine	1	
dronabinol	1	
EMEND BIPACK	E	
MARINOL	E	
meclizine hcl oral tablet	E	
metoclopramide hcl oral tablet	1	
ondansetron hcl oral	1	
ondansetron odt oral tablet dispersible 16 mg	E	
ondansetron odt oral tablet dispersible 4 mg, 8 mg	1	
perphenazine oral	1	
prochlorperazine maleate oral	1	
promethazine hcl oral solution	1	
promethazine hcl oral tablet	1	
promethazine hcl rectal	1	
PROMETHEGAN	3	
REGLAN	4	
scopolamine	1	
TRANSDERM-SCOP TRANSDERMAL PATCH 72 HOUR 1 MG/3DAYS	E	
Antifungals - Drugs for Fungal Infections		
ciclodan	1	
ciclopirox external	1	
ciclopirox olamine external cream	1	
clotrimazole mouth/throat	1	

See page 6-8 for coverage details.



Drug Name	Drug Tier	Requirements & Limits
CRESEMBA ORAL	3	
DIFLUCAN	E	
econazole nitrate external	1	
fluconazole oral	1	
griseofulvin microsize oral suspension	1	
GYNAZOLE-1	3	
itraconazole oral capsule	1	QL
JUBLIA	4	QL
ketoconazole external cream	1	
ketoconazole external shampoo	1	
ketoconazole oral	1	
klayesta	1	
LOPROX EXTERNAL SHAMPOO 1 %	E	
NOXAFIL ORAL TABLET DELAYED RELEASE	E	
nyamyc	1	
nystatin external	1	
nystatin mouth/throat	1	
nystatin oral	1	
nystatin-triamcinolone	1	
nystop	1	
posaconazole oral tablet delayed release	1	
SPORANOX	4	QL
terbinafine hcl oral	1	
terconazole	1	
TOLSURA	E	
VFEND ORAL TABLET 200 MG	4	
VFEND ORAL TABLET 50 MG	3	
VIVJOA	3	PA, QL
voriconazole oral tablet	1	
Antigout Agents - Drugs for Gout		
allopurinol oral	1	
colchicine oral	1	
colchicine-probenecid	1	

Drug Name	Drug Tier	Requirements & Limits
COLCRYS ORAL TABLET 0.6 MG	E	
febuxostat	1	
MITIGARE	2	
probenecid	1	
ULORIC	E	
ZYLOPRIM ORAL TABLET 100 MG, 300 MG	4	
Antimigraine Agents - Drugs for Migraines		
AIMOVIG	2	PA, ST, QL
AJOVY	E	PA, ST, QL
eletriptan hydrobromide	1	
EMGALITY	2	PA, ST, QL
frovatriptan succinate	1	
IMITREX NASAL SOLUTION 20 MG/ACT, 5 MG/ACT	4	
IMITREX ORAL	E	
IMITREX STATDOSE SYSTEM	E	
MAXALT	E	
MAXALT-MLT	E	
naratriptan hcl	1	
NURTEC	2	PA, ST, QL
QULIPTA	2	PA, ST, QL
RELPAK	E	
REYVOW	4	PA, ST, QL
rizatriptan	1	
sumatriptan nasal	1	
sumatriptan succinate oral	1	
sumatriptan succinate subcutaneous solution auto-injector	1	
TOSYMRA	4	
UBRELVY	2	PA, ST, QL
ZAVZPRET	4	PA, ST
ZEMBRACE SYMTOUCH	4	
ZOLMITRIPTAN NASAL SOLUTION 2.5 MG	E	
zolmitriptan nasal solution 5 mg	E	

See page 6-8 for coverage details.



Drug Name	Drug Tier	Requirements & Limits
zolmitriptan oral	1	
ZOMIG NASAL SOLUTION 2.5 MG	2	
ZOMIG NASAL SOLUTION 5 MG	1	
ZOMIG ORAL TABLET 5 MG	E	

Antimyasthenic Agents - Drugs to Treat Myasthenia Gravis

MESTINON ORAL TABLET	E	
pyridostigmine bromide oral tablet 30 mg	E	
pyridostigmine bromide oral tablet 60 mg	1	
ZILBRYSQ	4	PA, QL, SP

Antimycobacterials - Drugs to Treat Infections

dapsone oral	1	
ethambutol hcl oral	1	
isoniazid oral tablet	1	
MYAMBUTOL ORAL TABLET 400 MG	4	
rifampin oral	1	

Antineoplastics - Drugs for Cancer

abiraterone acetate oral tablet 250 mg	1	QL, SP
abiraterone acetate oral tablet 500 mg	E	QL, SP
ABIRTEGA	E	QL, SP
ALECENSA	2	PA, QL, SP
ALUNBRIG	2	PA, QL, SP
anastrozole oral	1	H-PA
ARIMIDEX	E	
AROMASIN	E	
AUGTYRO	2	PA, QL, SP
BESREMI	4	PA, QL, SP
bicalutamide	1	
BRUKINSA	3	PA, ST, QL, SP
CABOMETYX	2	PA, QL, SP
CALQUENCE	2	PA, QL, SP
capecitabine	1	SP

Drug Name	Drug Tier	Requirements & Limits
CASODEX	E	
COTELLIC	2	PA, QL, SP
dasatinib	1	PA, QL, SP
ERIVEDGE	2	PA, QL, SP
ERLEADA	2	PA, QL, SP
everolimus oral tablet 10 mg, 2.5 mg, 5 mg, 7.5 mg	1	PA, QL, SP
exemestane	1	H-PA
EXKIVITY ORAL CAPSULE 40 MG	4	SP
FEMARA	E	
GAVRETO	4	PA, QL, SP
GLEEVEC	E	QL, SP
HYDREA	E	
hydroxyurea oral	1	
IBRANCE ORAL TABLET	4	PA, ST, QL, SP
ICLUSIG	3	PA, QL, SP
IDHIFA	2	PA, QL, SP
imatinib mesylate oral	1	QL, SP
IMBRUVICA ORAL CAPSULE	2	PA, QL, SP
IMBRUVICA ORAL TABLET 140 MG, 280 MG	E	PA, QL, SP
IMBRUVICA ORAL TABLET 420 MG	2	PA, QL, SP
IMKELDI	4	PA, QL, SP
JAKAFI	2	PA, QL, SP
KISQALI	2	PA, QL, SP
KOSELUGO	3	PA, QL, SP
lenalidomide	1	PA, QL, SP
letrozole oral	1	H-PA
leucovorin calcium oral	1	
LUMAKRAS	4	PA, QL, SP
LYNPARZA	2	PA, QL, SP
mercaptopurine oral tablet	1	
nilotinib hcl	1	PA, ST, QL, SP
NUBEQA	2	PA, QL, SP
ODOMZO	2	PA, QL, SP

See page 6-8 for coverage details.



Drug Name	Drug Tier	Requirements & Limits
ORGOVYX	3	PA, QL, SP
PIQRAY	2	PA, QL, SP
POMALYST	3	PA, QL, SP
RETEVMO	4	PA, QL, SP
REVLIMID	2	PA, QL, SP
ROZLYTREK	2	PA, QL, SP
RYDAPT	2	PA, QL, SP
SCSEMBLIX	4	PA, QL, SP
SPRYCEL	E	PA, QL, SP
STIVARGA	2	PA, QL, SP
TABRECTA	4	PA, QL, SP
TAGRISSO	3	PA, QL, SP
tamoxifen citrate oral tablet 10 mg	1	
tamoxifen citrate oral tablet 20 mg	1	H-PA
TASIGNA	E	PA, ST, QL, SP
temozolomide	1	SP
torpenz	1	PA, QL, SP
TRUQAP ORAL TABLET	2	PA, QL, SP
VENCLEXTA	2	PA, QL, SP
VERZENIO	2	PA, QL, SP
VITRAKVI	2	PA, QL, SP
XELODA	E	SP
XTANDI	2	PA, QL, SP
ZEJULA	2	PA, QL, SP
ZELBORAF	2	PA, QL, SP
ZYTIGA	E	QL, SP
Antiparasitics - Drugs for Parasitic Infections		
ARAKODA	4	QL
atovaquone	1	
atovaquone-proguanil hcl	1	
ELIMITE	4	
hydroxychloroquine sulfate oral	1	
ivermectin oral tablet 3 mg	1	PA, QL
ivermectin oral tablet 6 mg	1	PA
KRINTAFEL	1	

Drug Name	Drug Tier	Requirements & Limits
MALARONE	4	
mefloquine hcl	1	
MEPRON	E	
permethrin external	1	
PLAQUENIL	E	
SOVUNA	E	
STROMEKTOL	4	PA, QL
Antiparkinson Agents - Drugs for Parkinson's Disease		
amantadine hcl oral capsule	1	
amantadine hcl oral tablet	1	
AZILECT	E	
benztropine mesylate oral	1	
bromocriptine mesylate oral tablet	1	
carbidopa-levodopa er	1	
carbidopa-levodopa oral tablet	1	
CREXONT	4	ST
DHIVY	E	
INBRIJA	3	PA, QL, SP
NEUPRO	3	
PARLODEL ORAL TABLET	E	
pramipexole dihydrochloride	1	
rasagiline mesylate oral	1	
ropinirole hcl	1	
RYTARY	E	ST
SINEMET	4	
trihexyphenidyl hcl oral tablet	1	
Antiplatelets - Drugs for Heart Attack and Stroke Prevention		
BRILINTA	E	QL
cilostazol	1	
clopidogrel bisulfate oral	1	
EFFIENT	E	
PLAVIX	E	
prasugrel hcl	1	
ticagrelor	1	QL

See page 6-8 for coverage details.



Drug Name	Drug Tier	Requirements & Limits
Antipsychotics - Drugs for Mood Disorders		
ABILIFY	E	
aripiprazole oral solution	1	
aripiprazole oral tablet	1	
asenapine maleate	1	QL
CAPLYTA	4	PA, QL
chlorpromazine hcl oral tablet	1	QL
clozapine oral tablet	1	
CLOZARIL	4	
GEODON ORAL	E	
haloperidol oral	1	
INVEGA	E	QL
LATUDA	E	QL
lurasidone hcl	1	QL
olanzapine oral	1	
paliperidone er	1	QL
quetiapine fumarate	1	
quetiapine fumarate er	1	
REXULTI	4	QL
RISPERDAL	E	
risperidone	1	
SAPHRIS	E	QL
SEROQUEL	E	
SEROQUEL XR	E	
VRAYLAR	4	QL
ziprasidone hcl	1	
ZYPREXA ORAL	E	
ZYPREXA ZYDIS ORAL TABLET DISPERSIBLE 10 MG, 15 MG, 20 MG, 5 MG	E	
Antivirals - Drugs for Viral Infections		
acyclovir external ointment	1	
acyclovir oral capsule	1	
acyclovir oral suspension 200 mg/5ml	1	
acyclovir oral tablet	1	

Drug Name	Drug Tier	Requirements & Limits
BARACLUDE ORAL TABLET	E	
BIKTARVY	4	QL
CIMDUO	2	QL
DESCOVY ORAL TABLET 120-15 MG	4	QL
DESCOVY ORAL TABLET 200-25 MG	4	QL, H
DOVATO	2	QL
emtricitabine-tenofovir df oral tablet 100-150 mg, 133-200 mg, 167-250 mg	1	QL
emtricitabine-tenofovir df oral tablet 200-300 mg	1	QL, H
entecavir	1	
EPCLUSA ORAL TABLET	2	PA, QL, SP
famciclovir oral	1	
GENVOYA	4	QL
HARVONI ORAL TABLET	2	PA, ST, QL, SP
ISENTRESS HD	2	
ISENTRESS ORAL TABLET	2	
JULUCA	2	QL
LAGEVRIO	2	QL
LEDIPASVIR-SOFOSBUVIR	2	PA, ST, QL, SP
MAVYRET ORAL PACKET	2	PA, QL, SP
ODEFSEY	4	QL
oseltamivir phosphate oral	1	
PAXLOVID	2	QL
PREVYMIS ORAL TABLET	2	PA
PREZCOBIX	2	
RUKOBIA	4	PA
SITAVIG	E	
SOFOSBUVIR-VELPATASVIR	2	PA, QL, SP
SYMFI	2	QL
SYMFI LO ORAL TABLET 400-300-300 MG	2	QL
TAMIFLU	E	
tenofovir disoproxil fumarate	1	H-PA

See page 6-8 for coverage details.



Drug Name	Drug Tier	Requirements & Limits
TIVICAY	3	
TRIUMEQ	2	QL
TRUVADA ORAL TABLET 100-150 MG, 133-200 MG, 167-250 MG	4	QL
TRUVADA ORAL TABLET 200-300 MG	E	QL
valacyclovir hcl oral	1	
VALCYTE ORAL TABLET	E	
valganciclovir hcl oral tablet	1	
VALTREX	E	
VEMLIDY	E	PA
VIREAD ORAL TABLET 150 MG, 200 MG, 250 MG	2	
VIREAD ORAL TABLET 300 MG	E	
VOSEVI	2	PA, QL, SP
XOFLUZA (40 MG DOSE)	3	QL
XOFLUZA (80 MG DOSE)	3	QL
ZOVIRAX EXTERNAL OINTMENT	E	
Anxiolytics - Drugs for Anxiety		
alprazolam er	1	
alprazolam oral	1	
alprazolam xr	1	
ATIVAN ORAL	E	
bupirone hcl oral	1	
chlordiazepoxide hcl	1	
clonazepam oral	1	
clorazepate dipotassium	1	
diazepam oral solution	1	
diazepam oral tablet	1	
HALCION	4	
hydroxyzine hcl oral	1	
hydroxyzine pamoate oral	1	
KLONOPIN	E	
lorazepam oral tablet	1	
triazolam	1	
VALIUM	E	

Drug Name	Drug Tier	Requirements & Limits
VISTARIL ORAL CAPSULE 25 MG	4	
XANAX	E	
XANAX XR	E	
Bipolar Agents - Drugs for Mood Disorders		
lithium carbonate er	1	
lithium carbonate oral	1	
LITHOBID	4	
Cardiovascular Agents - Drugs for Heart and Circulation Conditions		
acebutolol hcl oral	1	
acetazolamide er	1	
acetazolamide oral	1	
ALDACTONE	E	
aliskiren fumarate	1	
ALTACE	E	
amiloride hcl oral	1	
amiodarone hcl oral	1	
amlodipine besylate oral	1	
amlodipine besylate-benazepril hcl	1	
amlodipine besylate-valsartan	1	
amlodipine-olmesartan	1	
ATACAND	E	
ATACAND HCT	E	
atenolol oral	1	
atenolol-chlorthalidone	1	
ATORVALIQ	4	
atorvastatin calcium oral tablet 10 mg, 20 mg	1	H-PA
atorvastatin calcium oral tablet 40 mg, 80 mg	1	
AVALIDE	E	
AVAPRO	E	
AZOR	E	
benazepril hcl oral	1	
benazepril-hydrochlorothiazide	1	
BENICAR	E	

See page 6-8 for coverage details.



Drug Name	Drug Tier	Requirements & Limits
BENICAR HCT	E	
BETAPACE	E	
bisoprolol fumarate oral tablet	1	
bisoprolol-hydrochlorothiazide	1	
bumetanide oral	1	
BUMEX	3	
BYSTOLIC	E	
CAMZYOS	4	PA, QL, SP
candesartan cilexetil	1	
candesartan cilexetil-hctz	1	
captopril oral	1	
CARDIZEM	E	
CARDIZEM CD	E	
CARDIZEM LA	E	
CARDURA	4	
cartia xt	1	
carvedilol	1	
carvedilol phosphate er	1	
CATAPRES-TTS-1	E	
CATAPRES-TTS-2	E	
CATAPRES-TTS-3	E	
chlorthalidone	1	
cholestyramine light	1	
cholestyramine oral	1	
clonidine hcl oral	1	
clonidine patch	1	
colesevelam hcl oral tablet	1	
COLESTID ORAL TABLET	4	
colestipol hcl oral tablet	1	
COREG	E	
COREG CR	E	
CORGARD ORAL TABLET 20 MG, 40 MG	4	
CORLANOR	3	PA, QL
COZAAR	E	
CRESTOR	E	

Drug Name	Drug Tier	Requirements & Limits
digoxin oral tablet	1	
diltiazem hcl er	1	
diltiazem hcl er beads	1	
diltiazem hcl er coated beads	1	
diltiazem hcl oral	1	
dilt-xr	1	
DIOVAN	E	
DIOVAN HCT	E	
dofetilide	1	
doxazosin mesylate oral	1	
EDARBI	4	
EDARBYCLOR	4	
enalapril maleate oral	1	
enalapril-hydrochlorothiazide	1	
ENTRESTO ORAL TABLET	E	PA, QL
EPANED	4	
eplerenone	1	
EXFORGE	E	
ezetimibe	1	
ezetimibe-simvastatin	1	
felodipine er	1	
fenofibrate micronized oral capsule 130 mg, 134 mg, 200 mg, 43 mg, 67 mg	1	
FENOFIBRATE MICRONIZED ORAL CAPSULE 90 MG	4	
fenofibrate oral capsule 134 mg, 200 mg, 67 mg	1	
fenofibrate oral tablet	1	
fenofibric acid oral capsule delayed release	1	
FENOGLIDE ORAL TABLET 120 MG, 40 MG	E	
flecainide acetate	1	
fosinopril sodium	1	
FUROSCIX	4	
furosemide oral	1	

See page 6-8 for coverage details.



Drug Name	Drug Tier	Requirements & Limits
gemfibrozil oral	1	
guanfacine hcl	1	
HEMANGEOL	3	
HEMICLOR	E	
hydralazine hcl oral	1	
hydrochlorothiazide oral	1	
HYZAAR	E	
icosapent ethyl	E	PA
indapamide	1	
INDERAL LA	E	
INSPRA	E	
INZIRQO	4	
irbesartan	1	
irbesartan-hydrochlorothiazide	1	
ISORDIL TITRADOSE	E	
isosorbide dinitrate oral tablet 10 mg, 20 mg, 30 mg, 5 mg	1	
isosorbide dinitrate oral tablet 40 mg	E	
isosorbide mononitrate er	1	
ivabradine hcl	1	PA, QL
KAPSPARGO SPRINKLE	4	
KERENDIA ORAL TABLET 10 MG, 20 MG	4	PA, QL
labetalol hcl oral	1	
LANOXIN ORAL TABLET 125 MCG, 250 MCG	3	
LANOXIN ORAL TABLET 62.5 MCG	4	
LASIX	4	
LIPITOR	E	
lisinopril oral	1	
lisinopril-hydrochlorothiazide	1	
LIVALO	E	ST
LODOCO	4	QL
LOPID	4	
LOPRESSOR ORAL TABLET	4	

Drug Name	Drug Tier	Requirements & Limits
losartan potassium oral	1	
losartan potassium-hctz	1	
LOTENSIN	4	
LOTENSIN HCT	4	
LOTREL	E	
lovastatin oral	1	H
LOVAZA	E	
matzim la	1	
MAXZIDE ORAL TABLET 75-50 MG	4	
MAXZIDE-25 ORAL TABLET 37.5-25 MG	4	
metolazone	1	
metoprolol succinate er	1	
metoprolol tartrate oral	1	
metoprolol-hydrochlorothiazide	1	
mexiletine hcl oral	1	
MICARDIS	E	
MICARDIS HCT	E	
midodrine hcl	1	
MINIPRESS ORAL CAPSULE 1 MG, 2 MG, 5 MG	4	
minoxidil oral	1	
MULTAQ	4	PA
nadolol oral	1	
nebivolol hcl	1	
NEXLETOL	2	PA, ST, QL
NEXLIZET	2	PA, ST, QL
niacin er (antihyperlipidemic)	1	
nifedipine er	1	
nifedipine er osmotic release	1	
nifedipine oral	1	
NITRO-BID	2	
NITRO-DUR	3	
nitroglycerin rectal	1	QL
nitroglycerin sublingual	1	

See page 6-8 for coverage details.



Drug Name	Drug Tier	Requirements & Limits
nitroglycerin transdermal	1	
NITROSTAT	4	
NORLIQVA	4	
NORVASC	E	
olmesartan medoxomil oral	1	
olmesartan medoxomil-hctz	1	
olmesartan-amlodipine-hctz	1	
omega-3-acid ethyl esters	1	
PACERONE ORAL TABLET 100 MG, 400 MG	3	
PACERONE ORAL TABLET 200 MG	4	
pentoxifylline er	1	
pitavastatin calcium	E	
PRALUENT	E	PA, ST, QL
pravastatin sodium	1	
prazosin hcl oral	1	
prevalite	1	
PROCARDIA XL	E	
propafenone hcl	1	
propafenone hcl er	1	
propranolol hcl er	1	
propranolol hcl oral	1	
QUESTRAN	4	
QUESTRAN LIGHT	4	
ramipril	1	
ranolazine er	1	
RECTIV	4	QL
REPATHA	2	QL
REPATHA PUSHTRONEX SYSTEM	2	QL
REPATHA SURECLICK	2	QL
rosuvastatin calcium oral	1	
RYTHMOL SR ORAL CAPSULE EXTENDED RELEASE 12 HOUR 225 MG, 325 MG, 425 MG	E	
sacubitril-valsartan	1	PA, QL

Drug Name	Drug Tier	Requirements & Limits
simvastatin oral tablet 10 mg, 20 mg, 40 mg, 5 mg	1	H-PA
simvastatin oral tablet 80 mg	1	
SOAANZ	4	QL
sotalol hcl oral	1	
spironolactone oral tablet	1	
spironolactone-hctz	1	
taztia xt oral capsule extended release 24 hour 120 mg, 180 mg, 240 mg, 300 mg, 360 mg	1	
TEKTURNA	3	
TEKTURNA HCT ORAL TABLET 300-12.5 MG, 300-25 MG	3	
telmisartan	1	
telmisartan-hctz	1	
TENORETIC 100	E	
TENORETIC 50	E	
TENORMIN	E	
THALITONE	4	
tiadylt er	1	
TIAZAC	4	
TIKOSYN	4	
TOPROL XL	E	
toremide	1	
trandolapril	1	
triamterene-hctz	1	
TRIBENZOR	E	
TRICOR	E	
TRILIPIX ORAL CAPSULE DELAYED RELEASE 135 MG, 45 MG	E	
VALSARTAN ORAL SOLUTION	4	
valsartan oral tablet	1	
valsartan-hydrochlorothiazide	1	
VASCEPA	E	PA
VASERETIC	E	
VASOTEC	E	

See page 6-8 for coverage details.



Drug Name	Drug Tier	Requirements & Limits
verapamil hcl er	1	
verapamil hcl oral	1	
VERELAN	4	
VERELAN PM ORAL CAPSULE EXTENDED RELEASE 24 HOUR 100 MG, 200 MG, 300 MG	4	
VERQUVO	4	PA, QL
VYNDAQEL	2	PA, QL, SP
VYTORIN	E	
WELCHOL ORAL TABLET	E	
ZESTORETIC	E	
ZESTRIL ORAL TABLET 2.5 MG, 30 MG, 40 MG	E	
ZESTRIL TABLET 10 MG ORAL	4	
ZESTRIL TABLET 10 MG ORAL	E	
ZESTRIL TABLET 20 MG ORAL	4	
ZESTRIL TABLET 20 MG ORAL	E	
ZESTRIL TABLET 5 MG ORAL	4	
ZESTRIL TABLET 5 MG ORAL	E	
ZETIA	E	
ZIAC ORAL TABLET 10-6.25 MG, 2.5-6.25 MG	3	
ZIAC ORAL TABLET 5-6.25 MG	4	
ZOCOR	E	
Central Nervous System Agents - Drugs for Attention Deficit Disorder		
ADDERALL	E	
ADDERALL XR	E	QL
ADZENYS XR-ODT	4	QL
amphetamine sulfate	1	
amphetamine-dextroamphetamine	1	
amphetamine-dextroamphetamine er	1	QL
amphet-dextroamphet 3-bead er	1	QL
APTENSIO XR	4	QL
atomoxetine hcl	1	QL

Drug Name	Drug Tier	Requirements & Limits
AZSTARYS	2	ST, QL
clonidine hcl er	1	
CONCERTA	E	QL
COTEMPLA XR-ODT	4	QL
DEXEDRINE	E	QL
dexmethylphenidate hcl	1	
dexmethylphenidate hcl er	1	QL
dextroamphetamine sulfate er	1	QL
dextroamphetamine sulfate oral tablet	1	
DYANAVEL XR ORAL TABLET EXTENDED RELEASE	4	QL
EVEKEO	4	
FOCALIN	4	
FOCALIN XR	E	QL
guanfacine hcl er	1	
INTUNIV	E	
JORNAY PM	2	ST, QL
KAPVAY ORAL TABLET EXTENDED RELEASE 12 HOUR 0.1 MG	E	
lisdexamfetamine dimesylate	1	QL
METADATE CD	E	QL
METHYLIN	4	
methylphenidate hcl er (cd)	1	QL
methylphenidate hcl er (la) oral capsule extended release 24 hour	1	QL
methylphenidate hcl er (osm) oral tablet extended release 18 mg, 27 mg, 36 mg, 54 mg	1	QL
METHYLPHENIDATE HCL ER (OSM) ORAL TABLET EXTENDED RELEASE 45 MG, 63 MG	E	QL
methylphenidate hcl er (osm) oral tablet extended release 72 mg	E	QL
methylphenidate hcl er (xr)	1	QL
methylphenidate hcl er oral tablet extended release	1	QL

See page 6-8 for coverage details.



Drug Name	Drug Tier	Requirements & Limits
methylphenidate hcl er oral tablet extended release 24 hour	E	QL
methylphenidate hcl oral	1	
MYDAYIS	4	QL
ONYDA XR	3	QL
QELBREE	E	QL
QUILLICHEW ER	4	QL
QUILLIVANT XR	4	QL
RELEXXII	E	QL
RITALIN	E	
RITALIN LA	E	QL
STRATTERA ORAL CAPSULE 10 MG, 100 MG, 18 MG, 25 MG, 40 MG, 60 MG, 80 MG	E	QL
VYVANSE	E	QL
ZENZEDI	E	
Central Nervous System Agents - Drugs for Multiple Sclerosis		
AMPYRA	E	PA, QL, SP
AUBAGIO	E	PA, QL, SP
AVONEX	2	PA, QL, SP
BAFIERTAM	2	PA, QL, SP
BETASERON	2	PA, QL, SP
COPAXONE	E	PA, QL, SP
dalfampridine er	1	PA, QL, SP
dimethyl fumarate oral	1	PA, QL, SP
EXTAVIA SUBCUTANEOUS KIT 0.3 MG	E	PA, ST, QL, SP
fingolimod hcl	1	PA, QL, SP
GILENYA ORAL CAPSULE 0.25 MG	4	PA, QL, SP
GILENYA ORAL CAPSULE 0.5 MG	E	PA, QL, SP
glatiramer acetate	1	PA, QL, SP
glatopa	1	PA, QL, SP
KESIMPTA	2	PA, QL, SP
MAVENCLAD	3	PA, ST, QL, SP
MAYZENT	3	PA, QL, SP

Drug Name	Drug Tier	Requirements & Limits
PLEGRIDY	3	PA, QL, SP
TECFIDERA ORAL CAPSULE DELAYED RELEASE	E	PA, QL, SP
teriflunomide	1	PA, QL, SP
VUMERITY	E	PA, QL, SP
Central Nervous System Agents - Miscellaneous		
AUSTEDO	2	PA, QL, SP
AUSTEDO XR	2	PA, QL, SP
INGREZZA	2	PA, QL, SP
INGREZZA SPRINKLE	2	PA, QL, SP
LYRICA ORAL CAPSULE	4	
NUEDEXTA	2	PA, QL
pregabalin oral capsule	1	
RADICAVA ORS	3	PA, QL, SP
RADICAVA ORS STARTER KIT	3	PA, QL, SP
SAVELLA	4	QL
TEGLUTIK	3	PA
TIGLUTIK	3	PA
VEOZAH	4	PA, QL
ZEPOSIA	3	PA, ST, QL, SP
Dental and Oral Agents - Drugs for Mouth and Throat Conditions		
cevimeline hcl	1	
chlorhexidine gluconate mouth/throat	1	
CLINPRO 5000	3	
DENTA 5000 PLUS	4	
DENTAGEL	4	
EVOXAC	E	
FLUORIDEX	3	
FLUORIDEX ENHANCED WHITENING	3	
FLUORIMAX 5000	3	
FRAICHE 5000 DENTAL	4	
JUST RIGHT 5000 DENTAL GEL 1.1 %	4	

See page 6-8 for coverage details.



Drug Name	Drug Tier	Requirements & Limits
JUST RIGHT 5000 DENTAL PASTE	3	
KOURZEQ	2	
lidocaine hcl mouth/throat	1	
lidocaine viscous hcl	1	
ORALONE	2	
PERIDEX	4	
perio gard	1	
pilocarpine hcl oral	1	
PREVIDENT 5000 BOOSTER PLUS	3	
PREVIDENT 5000 DRY MOUTH	4	
PREVIDENT 5000 KIDS	3	
PREVIDENT 5000 ORTHO DEFENSE	3	
PREVIDENT 5000 PLUS	4	
PREVIDENT DENTAL	4	
SALAGEN	4	
sf 5000 plus	1	
sf gel 1.1%	1	
sodium fluoride 5000 plus	1	
sodium fluoride 5000 ppm	1	
sodium fluoride dental	1	
triamcinolone acetonide mouth/throat	1	
Dermatological Agents - Drugs for Skin Conditions		
ABSORICA	E	
ACANYA	4	
acutane	1	
acitretin	1	
ACZONE	E	
ADAINZDE EXTERNAL GEL 0.3-2.5-1 %	E	
adapalene external gel	E	PA
adapalene-benzoyl peroxide external gel	1	
ADEINZDE	E	

Drug Name	Drug Tier	Requirements & Limits
AKLIEF	4	PA
ALA SCALP	4	
ala-cort	E	
alclometasone dipropionate	1	
ammonium lactate external	E	
amnesteem	1	
AMZEEQ	4	
ARAZLO	E	PA
ATRALIN	E	PA
AVAR CLEANSER	4	
AVAR LS CLEANSER	3	
AVITA EXTERNAL CREAM 0.025 %	4	PA
azelaic acid external	1	
AZELEX	3	
BENZAMYCIN	2	
benzoyl peroxide-erythromycin	1	
betamethasone dipropionate aug external cream	1	
betamethasone dipropionate aug external lotion	1	
betamethasone dipropionate aug external ointment	1	
betamethasone dipropionate external	1	
betamethasone valerate external cream	1	
betamethasone valerate external lotion	1	
betamethasone valerate external ointment	1	
BLANCHE	E	
CABTREO	E	
calcipotriene external cream	1	
calcipotriene external ointment	1	
calcipotriene external solution	1	
CALCITRENE	3	

See page 6-8 for coverage details.



Drug Name	Drug Tier	Requirements & Limits
CARAC EXTERNAL CREAM 0.5 %	E	
CIBINQO	2	PA, QL, SP
ciclopirox olamine external suspension	1	
claravis	1	
CLEOCIN-T	4	
clindacin etz external swab	1	
clindacin-p	1	
CLINDAGEL	4	
clindamycin phos (once-daily) gel 1 % external	1	
clindamycin phos (once-daily) gel 1 % external	1	(generic for Clindagel)
clindamycin phos (twice-daily) gel 1 % external	1	
clindamycin phos (twice-daily) gel 1 % external	1	(generic for Cleocin-T)
clindamycin phos (twice-daily) gel 1 % external	1	(generic for Clindagel)
clindamycin phos-benzoyl perox external gel 1.2-5 %	1	QL
clindamycin phos-benzoyl perox external gel 1-5 %, 1.2-2.5 %, 1.2-3.75 %	1	
clindamycin phosphate external lotion	1	
clindamycin phosphate external solution	1	
clindamycin phosphate external swab	1	
clobetasol prop emollient base external cream 0.05 %	1	
clobetasol propionate e	1	
CLOBETASOL PROPIONATE EXTERNAL CREAM 0.025 %	4	
clobetasol propionate external cream 0.05 %	1	
clobetasol propionate external foam	1	
clobetasol propionate external gel	1	

Drug Name	Drug Tier	Requirements & Limits
clobetasol propionate external liquid	1	
clobetasol propionate external ointment	1	
clobetasol propionate external shampoo	1	
clobetasol propionate external solution	1	
CLOBEX EXTERNAL SHAMPOO	E	
CLOBEX SPRAY	E	
clodan	1	
clotrimazole external cream	E	
clotrimazole-betamethasone	1	
dapsone external	1	
DERMACINRX UREA	4	
DERMA-SMOOTH/FS BODY	4	
DERMA-SMOOTH/FS SCALP	4	
desonide external cream	1	
desonide external lotion	1	
desonide external ointment	1	
DESOWEN	3	
desoximetasone external cream	1	
desoximetasone external ointment	1	
diclofenac sodium external gel 3 %	1	PA
DIFFERIN EXTERNAL GEL 0.3 %	E	PA
DIPROLENE	4	
doxycycline	E	
DRYSOL	2	
DUPIXENT	2	PA, QL, SP
EBGLYSS SUBCUTANEOUS SOLUTION AUTO-INJECTOR	2	PA, QL, SP
EFUDEX EXTERNAL CREAM 5 %	4	
ENSTILAR	4	
EPIDUO	E	
EPIDUO FORTE	E	
ERYGEL	3	

See page 6-8 for coverage details.



Drug Name	Drug Tier	Requirements & Limits
erythromycin external	1	
EUCRISA	3	ST
FINACEA EXTERNAL FOAM	2	
FINACEA EXTERNAL GEL	E	
fluocinolone acetonide body	1	
fluocinolone acetonide external	1	
fluocinolone acetonide scalp	1	
fluocinonide external	1	
FLUOROURACIL EXTERNAL CREAM 0.5 %	E	
fluorouracil external cream 5 %	1	
fluticasone propionate external cream	1	
fluticasone propionate external ointment	1	
halobetasol propionate external cream	1	
halobetasol propionate external ointment	1	
hydrocortisone external cream 1 %	E	
hydrocortisone external cream 2.5 %	1	
hydrocortisone external lotion 2 %, 2.5 %	1	
hydrocortisone external ointment 1 %, 2.5 %	1	
hydrocortisone valerate external cream	1	
hydroquinone external	E	
HYDROXYM EXTERNAL CREAM	E	
imiquimod external cream 3.75 %	E	
imiquimod external cream 5 %	1	
imiquimod pump	E	
IMPOYZ	4	
isotretinoin oral capsule 10 mg, 20 mg, 30 mg, 40 mg	1	
isotretinoin oral capsule 25 mg, 35 mg	E	

Drug Name	Drug Tier	Requirements & Limits
ivermectin external cream	E	
KLARON	4	
KLISYRI	4	ST
LOPROX EXTERNAL SUSPENSION 0.77 %	E	
METROCREAM	4	
METROGEL	E	
METROLOTION	4	
metronidazole external	1	
MIRVASO	2	PA
mometasone furoate external	1	
NEMLUVIO	2	PA, QL, SP
neuac	1	QL
NORITATE	E	
ONEXTON	4	
OPZELURA	4	PA, QL, SP
ORACEA	E	
OVACE PLUS WASH EXTERNAL LIQUID	4	
OVACE WASH	4	
PANRETIN	3	
pimecrolimus	1	
PLEXION CLEANSER	4	
podofilox external solution	1	
RETIN-A	E	PA
RHOFADE	4	PA
SANTYL	3	
selenium sulfide external lotion	1	
sodium sulfacetamide wash	1	
SOOLANTRA	1	
sulfacetamide sodium (acne)	1	
sulfacetamide sodium external	1	
sulfacetamide sodium-sulfur external liquid 10-2 %, 10-5 %, 9-4 %, 9.8-4.8 %	1	
sulfacetamide sodium-sulfur external liquid 9-4.5 %	E	

See page 6-8 for coverage details.



Drug Name	Drug Tier	Requirements & Limits
sulfacetamide sod-sulfur wash external liquid 9-4 %	1	
sulfacetamide sod-sulfur wash external liquid 9-4.5 %	E	
SUMADAN WASH	E	
SYNALAR	4	
SYNALAR EXTERNAL SOLUTION 0.01 %	4	
TACLONEX EXTERNAL OINTMENT 0.005-0.064 %	E	
TACLONEX EXTERNAL SUSPENSION	1	
tacrolimus external	1	
tazarotene external cream	1	PA
TAZORAC EXTERNAL CREAM	4	PA
TOLAK	4	
TOPICORT	4	
TOPICORT EXTERNAL CREAM 0.05 %, 0.25 %	4	
tretinoin external cream	1	
tretinoin external gel 0.01 %, 0.025 %	1	
tretinoin external gel 0.05 %	1	PA
triamcinolone acetonide external cream	1	
triamcinolone acetonide external lotion	1	
triamcinolone acetonide external ointment 0.025 %, 0.1 %, 0.5 %	1	
triamcinolone acetonide external ointment 0.05 %	E	
triamcinolone in absorbbase	E	
TRIANEX EXTERNAL OINTMENT 0.05 %	E	
triderm	1	
TRIDESILON EXTERNAL CREAM 0.05 %	3	
tritocin external ointment 0.05 %	E	

Drug Name	Drug Tier	Requirements & Limits
urea external cream 20 %, 40 %, 41 %, 45 %	1	
urea external cream 39 %, 47 %	E	
UREA EXTERNAL CREAM 39.5 %	E	
uredeb	E	
UREMEZ-40	3	
URESOL	E	
VANOS	E	
VTAMA	4	PA
WINLEVI	E	
xurea	E	
zenatane	1	
ZILXI	4	PA, ST
ZORYVE EXTERNAL CREAM	4	PA, QL
ZORYVE EXTERNAL FOAM	4	PA
ZYCLARA	E	
ZYCLARA PUMP	E	
Diabetes - Glucose Monitoring and Supplies		
ACCU-CHEK AVIVA PLUS TEST STRIPS	E	QL
ACCU-CHEK FASTCLIX LANCET	1	
ACCU-CHEK FASTCLIX LANCET DEVICE KIT	1	
ACCU-CHEK GUIDE KIT W/ DEVICE	2	
ACCU-CHEK GUIDE ME METER	2	
ACCU-CHEK GUIDE TEST STRIPS	2	QL
ACCU-CHEK SMARTVIEW TEST STRIPS	E	QL
ACCU-CHEK SOFTCLIX LANCET	1	
ACCU-CHEK SOFTCLIX LANCET DEVICE KIT	1	
BD AUTOSHIELD DUO PEN NEEDLES	2	QL
BD ULTRA-FINE PEN NEEDLES	2	QL
BD ULTRA-FINE U-500 INSULIN SYRINGES	2	

See page 6-8 for coverage details.



Drug Name	Drug Tier	Requirements & Limits
BD VEO ULTRA-FINE INSULIN SYRINGES	2	
BD-ULTRA FINE INSULIN SYRINGES	2	
CEQUR SIMPLICITY 2U 8PK	3	ST
CONTOUR MONITOR KIT W/ DEVICE	E	
CONTOUR NEXT EZ KIT W/ DEVICE	1	
CONTOUR NEXT GEN MONITOR KIT	1	
CONTOUR NEXT LINK KIT W/ DEVICE	E	
CONTOUR NEXT MONITOR KIT W/DEVICE	1	
CONTOUR NEXT ONE KIT	1	
CONTOUR NEXT TEST STRIPS	1	
CONTOUR PLUS BLUE KIT W/ DEVICE	1	
CONTOUR PLUS TEST STRIP	1	QL
CONTOUR TEST STRIPS	E	QL
DEXCOM G6 RECEIVER	3	PA, QL
DEXCOM G6 SENSOR	3	PA, QL
DEXCOM G6 TRANSMITTER	3	PA, QL
DEXCOM G7 RECEIVER	3	PA, QL
DEXCOM G7 SENSOR	3	PA, QL
EASYGLUCO	E	
EASYMAX 15 TEST	E	QL
EASYMAX NG BLOOD GLUCOSE KIT	E	
EMBECTA INSULIN SYRINGE	2	QL
EMBRACE BLOOD GLUCOSE TEST	E	QL
EMBRACE WAVE BLOOD GLUCOSE IN VITRO	E	QL
ENLITE GLUCOSE SENSOR	3	PA
EQ BLOOD GLUCOSE TEST	E	QL
EVERSENSE 365 SENSOR/ HOLDER	E	PA

Drug Name	Drug Tier	Requirements & Limits
EVERSENSE 365 SMART TRANSMIT	E	PA
EVERSENSE E3 SENSOR/ HOLDER	E	PA
EVERSENSE E3 SMART TRANSMITTER	E	PA
EVERSENSE SENSOR/HOLDER	E	PA
EVERSENSE SMART TRANSMITTER	E	PA
FREESTYLE LIBRE 14 DAY READER	3	PA, QL
FREESTYLE LIBRE 14 DAY SENSOR	3	PA, QL
FREESTYLE LIBRE 2 PLUS SENSOR	3	PA
FREESTYLE LIBRE 2 READER	3	PA, QL
FREESTYLE LIBRE 2 SENSOR	3	PA, QL
FREESTYLE LIBRE 3 PLUS SENSOR	3	PA
FREESTYLE LIBRE 3 READER	3	PA
FREESTYLE LIBRE 3 SENSOR	3	PA, QL
FREESTYLE LIBRE READER	3	PA, QL
FREESTYLE PRECISION NEO SYSTEM	E	
FREESTYLE PRECISION NEO TEST	E	QL
FREESTYLE TEST	E	QL
GLUCOCARD EXPRESSION TEST	E	QL
GLUCOCARD SHINE TEST	E	QL
GLUCOCARD VITAL TEST	E	QL
GUARDIAN 4 GLUCOSE SENSOR	3	PA, QL
GUARDIAN 4 TRANSMITTER	3	PA, QL
GUARDIAN CONNECT TRANSMITTER	3	PA, QL
GUARDIAN LINK 3 TRANSMITTER	3	PA, QL
GUARDIAN REAL-TIME REPLACE PED	3	PA
GUARDIAN SENSOR 3	3	PA, QL

See page 6-8 for coverage details.



Drug Name	Drug Tier	Requirements & Limits
INPEN	3	ST
NOVOFINE AUTOCOVER PEN NEEDLE 30G X 8 MM	2	QL
NOVOFINE PEN NEEDLE	2	QL
NOVOFINE PLUS PEN NEEDLE	2	QL
NOVOPEN ECHO	3	
OMNIPOD 5 DEXCOM INTRO KIT	2	PA, QL
OMNIPOD 5 DEXCOM PODS	2	PA
OMNIPOD 5 G7 INTRO (GEN 5) KIT	2	PA, QL
OMNIPOD 5 G7 PODS (GEN 5)	2	PA
OMNIPOD 5 LIBRE INTRO KIT	2	PA, QL
OMNIPOD 5 LIBRE PODS	2	PA
ONETOUCH ULTRA 2 KIT W/ DEVICE	E	
ONETOUCH ULTRA BLUE TEST	E	QL
ONETOUCH ULTRA TEST STRIPS	E	QL
ONETOUCH VERIO FLEX SYSTEM KIT	E	
ONETOUCH VERIO IQ SYSTEM KIT W/DEVICE	E	
ONETOUCH VERIO KIT W/ DEVICE	E	
ONETOUCH VERIO REFLECT KIT W/DEVICE	E	
ONETOUCH VERIO TEST STRIPS	E	QL
TECHLITE INSULIN SYRINGES (Arkray)	2	QL
TECHLITE PEN NEEDLES (Arkray)	2	QL
TECHLITE PLUS PEN NEEDLES (Arkray)	2	QL
TEMPO REFILL	E	
TEMPO WELCOME	E	
TRUE FOCUS BLOOD GLUCOSE STRIP	E	QL
TRUE METRIX AIR GLUCOSE METER KIT	E	

Drug Name	Drug Tier	Requirements & Limits
TRUE METRIX BLOOD GLUCOSE TEST	E	QL
TRUE METRIX GO GLUCOSE METER	E	
TRUE METRIX METER	E	
TRUE METRIX PRO BLOOD GLUCOSE	E	QL
TWIIST REFILL KIT	2	PA
TWIIST REFILL KIT/INFUSION SET	2	PA
TWIIST STARTER KIT	2	PA, QL
Diabetes - Insulin		
ADMELOG	E	
ADMELOG SOLOSTAR	E	
BASAGLAR TEMPO PEN	E	
HUMALOG CARTRIDGE	2	QL
HUMALOG KWIKPEN	2	
HUMALOG MIX 50/50 KWIKPEN	2	
HUMALOG MIX 50/50 VIAL SUBCUTANEOUS SUSPENSION (50-50) 100 UNIT/ML	1	
HUMALOG MIX 75/25 KWIKPEN	2	
HUMALOG MIX 75/25 VIAL	1	
HUMALOG TEMPO PEN	E	
HUMALOG U-100 JUNIOR KWIKPEN	2	
HUMALOG VIAL	4	
HUMULIN 70/30 KWIKPEN	2	
HUMULIN 70/30 VIAL	1	
HUMULIN N KWIKPEN	2	
HUMULIN N VIAL	1	
HUMULIN R U-500 KWIKPEN	2	
HUMULIN R U-500 VIAL	1	
HUMULIN R VIAL	1	
INSULIN ASPART	E	ST
INSULIN ASPART FLEXPEN	E	ST

See page 6-8 for coverage details.



Drug Name	Drug Tier	Requirements & Limits
INSULIN DEGLUDEC FLEXTOUCH	E	
INSULIN GLARGINE	E	
INSULIN GLARGINE MAX SOLOSTAR	E	
INSULIN GLARGINE SOLOSTAR	E	
INSULIN LISPRO JUNIOR KWIKPEN	2	
INSULIN LISPRO KWIKPEN	2	
INSULIN LISPRO PROT & LISPRO	2	
INSULIN LISPRO VIAL	1	
LANTUS SOLOSTAR	1	
LANTUS U-100 VIAL	1	
LYUMJEV KWIKPEN	2	
LYUMJEV TEMPO PEN	E	
LYUMJEV VIAL	1	
NOVOLIN 70/30 FLEXPEN	E	
NOVOLIN 70/30 FLEXPEN RELION	E	
NOVOLIN 70/30 RELION	E	
NOVOLIN 70/30 VIAL	E	
NOVOLIN N FLEXPEN	E	
NOVOLIN N FLEXPEN RELION	E	
NOVOLIN N RELION	E	
NOVOLIN N VIAL	E	
NOVOLIN R FLEXPEN	E	
NOVOLIN R FLEXPEN RELION	E	
NOVOLIN R RELION	E	
NOVOLIN R VIAL	E	
NOVOLOG FLEXPEN	E	ST
NOVOLOG FLEXPEN RELION	E	ST
NOVOLOG RELION	E	ST, QL
NOVOLOG U-100 VIAL	E	ST, QL
TOUJEO MAX SOLOSTAR	2	
TOUJEO SOLOSTAR	2	
TRESIBA FLEXTOUCH	E	

Drug Name	Drug Tier	Requirements & Limits
Diabetes - Non-Insulin Agents		
acarbose oral	1	
ACTOPLUS MET	4	QL
ACTOS	E	QL
ALOGLIPTIN BENZOATE	2	QL
BAQSIMI ONE PACK	2	
BAQSIMI TWO PACK	2	
BRENZAVVY	3	ST, QL
BYDUREON BCISE AUTOINJECTOR SUBCUTANEOUS AUTO-INJECTOR 2 MG/0.85ML	2	PA, QL
DAPAGLIFLOZIN PRO-METFORMIN ER	E	ST, QL
DAPAGLIFLOZIN PROPANEDIOL	E	ST, QL
FARXIGA	E	ST, QL
glimepiride oral tablet 1 mg, 2 mg, 4 mg	1	
glimepiride oral tablet 3 mg	E	
glipizide er	1	
glipizide ir	1	
glipizide xl oral tablet extended release 24 hour 10 mg, 2.5 mg, 5 mg	1	
glipizide-metformin hcl	1	
glucagon emergency kit 1 mg injection	1	
GLUCAGON EMERGENCY KIT 1 MG INJECTION	4	
GLUCAGON EMERGENCY KIT for LOW BLOOD SUGAR (Fresenius)	2	
GLUCOTROL XL	4	
GLUMETZA ORAL TABLET EXTENDED RELEASE 24 HOUR 1000 MG, 500 MG	E	
glyburide oral	1	
glyburide-metformin	1	
GLYXAMBI	2	ST, QL

See page 6-8 for coverage details.



Drug Name	Drug Tier	Requirements & Limits
GVOKE HYPOPEN 1-PACK	2	
GVOKE HYPOPEN 2-PACK	2	
GVOKE KIT	2	
GVOKE PFS	2	
INVOKANA	E	ST, QL
JANUMET	E	ST, QL
JANUVIA	E	ST, QL
JARDIANCE	2	QL
JENTADUETO	2	QL
JENTADUETO XR	2	QL
KOMBIGLYZE XR ORAL TABLET EXTENDED RELEASE 24 HOUR 2.5-1000 MG, 5-1000 MG, 5-500 MG	E	QL
liraglutide	1	PA, QL
metformin hcl er	1	
metformin hcl er (mod)	E	
metformin hcl er (osm)	E	
metformin hcl oral tablet 1000 mg, 500 mg, 850 mg	1	
metformin hcl oral tablet 625 mg, 750 mg	E	
MOUNJARO	2	PA, QL
nateglinide	1	QL
NESINA ORAL TABLET 12.5 MG, 25 MG, 6.25 MG	4	QL
ONGLYZA	E	QL
OZEMPIC	2	PA, QL
pioglitazone hcl	1	QL
pioglitazone hcl-metformin hcl	1	QL
repaglinide	1	QL
RYBELSUS	2	PA, QL
saxagliptin hcl	1	QL
saxagliptin-metformin er	1	QL
SOLIQUA	2	QL
SYMLINPEN 120	3	QL
SYMLINPEN 60	3	QL

Drug Name	Drug Tier	Requirements & Limits
SYNJARDY	2	QL
SYNJARDY XR	2	QL
TRADJENTA	2	QL
TRIJARDY XR	2	QL
TRULICITY	2	PA, QL
XIGDUO XR	E	ST, QL
ZEGALOGUE SUBCUTANEOUS SOLUTION AUTO-INJECTOR	2	
Drugs for Blood Disorders		
ADVATE	2	SP
ADYNOVATE	4	PA, SP
AFSTYLA	4	PA, SP
ALPHANATE	2	SP
ALPROLIX	3	SP
ALTUVIIIIO	4	PA, SP
ALVAIZ	4	PA, SP
ARANESP (ALBUMIN FREE)	2	QL, SP
BENEFIX	2	SP
DOPTELET	4	PA, QL, SP
ELOCTATE	4	PA, SP
FABHALTA	2	PA, QL, SP
HEMLIBRA SUBCUTANEOUS SOLUTION 105 MG/0.7ML, 150 MG/ML, 30 MG/ML, 300 MG/2ML, 60 MG/0.4ML	2	PA, SP
HEMLIBRA SUBCUTANEOUS SOLUTION 12 MG/0.4ML	E	PA, SP
HEMOFIL M	2	SP
HUMATE-P	2	SP
HYMPAVZI	2	PA, QL, SP
IDELVION	3	SP
KOATE	2	SP
KOATE-DVI	2	SP
KOGENATE FS	2	SP
KOVALTRY	2	SP
NEULASTA	2	SP
NIVESTYM	2	SP

See page 6-8 for coverage details.



Drug Name	Drug Tier	Requirements & Limits
NOVOEIGHT	2	SP
NUWIQ	2	SP
NYVEPRIA	E	
PROMACTA POWDER	4	PA, QL, SP
PROMACTA TABLET	E	PA, QL, SP
RECOMBINATE	2	SP
RETACRIT	2	QL, SP
TAVALISSE	4	PA, QL, SP
tranexamic acid oral	1	QL
UDENYCA SUBCUTANEOUS SOLUTION AUTO-INJECTOR	2	SP
VOYDEYA	2	PA, QL, SP
WILATE	2	SP
ZARXIO	2	SP
Drugs for Sexual Dysfunction		
ADDYI	4	QL
avanafil	1	QL
CIALIS	E	QL
IMVEXXY MAINTENANCE PACK	2	QL
IMVEXXY STARTER PACK	2	QL
INTRAROSA	4	PA, QL
OSPHENA	2	PA, QL
sildenafil citrate oral tablet 100 mg, 25 mg, 50 mg	1	QL
STENDRA	4	QL
tadalafil oral	1	QL
vardenafil hcl oral tablet	1	QL
VIAGRA	E	QL
VYLEESI	4	QL
Electrolytes / Vitamins		
ACCRUFER	E	
CARNITOR ORAL SOLUTION	4	
CARNITOR SF	4	
CO-NATAL FA	2	
cvs prenatal	E	
cyanocobalamin injection solution 1000 mcg/ml	1	

Drug Name	Drug Tier	Requirements & Limits
CYANOCOBALAMIN INJECTION SOLUTION 2000 MCG/ML	3	
cyanocobalamin nasal	1	
DAVIMET-FLUORIDE	4	
DENTA 5000 PLUS SENSITIVE	3	
DODEX INJECTION SOLUTION 1000 MCG/ML	4	
DRISDOL	4	
ergocalciferol oral capsule	1	
FLORAFOL PEDIATRIC ORAL SOLUTION 0.25 MG/ML	3	
FLORAFOL PEDIATRIC ORAL TABLET CHEWABLE 0.5 MG, 1 MG	4	
FLORIVA PLUS	4	
FLOTREX	4	
FLUORIMAX 5000 SENSITIVE	3	
folic acid oral tablet 1 mg	1	
FRAICHE 5000 SENSITIVE DENTAL GEL 1.1-4.5 %	E	
klor-con	1	
klor-con 10	1	
klor-con m10	1	
klor-con m15	1	
klor-con m20	1	
K-PHOS-NEUTRAL	2	
K-TAB ORAL TABLET EXTENDED RELEASE 10 MEQ, 20 MEQ	3	
levocarnitine oral solution	1	
levocarnitine sf	1	
LOKELMA	3	QL
M-NATAL PLUS	3	
multivitamin w/fluoride	1	
multi-vitamin/fluoride	1	
multivitamin/fluoride oral tablet chewable	1	
MULTI-VIT-FLOR	4	
NASCOBAL	3	

See page 6-8 for coverage details.



Drug Name	Drug Tier	Requirements & Limits
NEONATAL COMPLETE	3	
NEONATAL PLUS	3	
NEONATAL PRENATAL	E	
NEONATAL VITAMIN	E	
NIVA-PLUS	3	
ONE VITE WOMENS	E	
ONE VITE WOMENS PLUS	3	
ORACIT	2	
ORAL CITRATE	2	
PHOSPHA 250 NEUTRAL	2	
phosphorous	1	
phospho-trin 250 neutral	1	
pnv 27-ca/fe/fa	1	
POKONZA	E	
POLY-VI-FLOR ORAL TABLET CHEWABLE	4	
potassium chloride crys er	1	
potassium chloride er	1	
potassium chloride oral	1	
potassium citrate er	1	
prenatal oral tablet 27-0.8 mg	E	
prenatal oral tablet 27-1 mg	1	
prenatal plus	1	
prenatal plus vitamin/mineral	1	
prenatal vitamins oral tablet 27-0.8 mg	E	
PRENATE MINI	3	
PRENATOL-M	E	
PRENATRIX	E	
PRENATRYL	E	
PREVIDENT 5000 ENAMEL PROTECT	3	
PREVIDENT 5000 SENSITIVE	3	
QUFLORA PEDIATRIC	3	
sod citrate-citric acid oral solution 500-334 mg/5ml	1	
sod fluoride-potassium nitrate	1	

Drug Name	Drug Tier	Requirements & Limits
sodium fluoride 5000 enamel	1	
sodium fluoride 5000 sensitive	1	
sodium fluoride oral solution	1	H
sodium fluoride oral tablet chewable	1	H
TRICARE ORAL TABLET	3	
TRINATAL RX 1	3	
TRINATE	3	
tri-vite/fluoride	1	
UROCIT-K 10	4	
UROCIT-K 15	4	
UROCIT-K 5 ORAL TABLET EXTENDED RELEASE 5 MEQ (540 MG)	4	
VELTASSA	3	QL
VITAFOL FE+	3	
VITAFOL ULTRA	3	
VITAFOL-OB	3	
vitamin d (ergocalciferol) oral capsule 1.25 mg (50000 ut), 50000 unit	1	
VITATHELY WITH GINGER	3	
wes-phos 250 neutral	1	
WESTAB PLUS	E	
Gastrointestinal Agents - Drugs for Acid Reflux and Ulcer		
ACIPHEX	E	QL
bis subcit-metronid-tetracyc	1	QL
bismuth/metronidaz/tetracyclin	1	QL
CARAFATE	E	
cimetidine oral	1	
CYTOTEC	4	
DEXILANT	E	QL
dexlansoprazole	E	QL
esomeprazole magnesium oral capsule delayed release	E	QL
esomeprazole magnesium oral packet	1	QL

See page 6-8 for coverage details.



Drug Name	Drug Tier	Requirements & Limits
famotidine oral suspension reconstituted	1	
famotidine oral tablet 20 mg, 40 mg	E	
lansoprazole oral capsule delayed release	E	QL
lansoprazole oral tablet delayed release dispersible	1	QL
misoprostol oral	1	
NEXIUM ORAL CAPSULE DELAYED RELEASE	E	QL
NEXIUM ORAL PACKET	4	QL
OMECLAMOX-PAK	3	QL
omeprazole oral capsule delayed release	1	
pantoprazole sodium oral tablet delayed release	1	
PEPCID	E	
PREVACID	E	QL
PREVACID SOLUTAB	E	QL
PROTONIX ORAL TABLET DELAYED RELEASE	E	
PYLERA	4	QL
rabeprazole sodium oral tablet delayed release	1	QL
sucralfate oral	1	
VOQUEZNA	4	PA, QL
VOQUEZNA DUAL PAK	4	ST, QL
VOQUEZNA TRIPLE PAK	4	ST, QL
Gastrointestinal Agents - Drugs for Bowel, Intestine and Stomach Conditions		
AMITIZA	4	PA, QL
ANASPAZ	2	
BYLVAY	4	PA, QL, SP
BYLVAY (PELLETS)	4	PA, QL, SP
chlordiazepoxide-clidinium	1	
CLENPIQ	2	
constulose	1	
cromolyn sodium oral	1	

Drug Name	Drug Tier	Requirements & Limits
dicyclomine hcl oral capsule	1	
dicyclomine hcl oral tablet 20 mg	1	
diphenoxylate-atropine oral tablet	1	
enulose	1	
GASTROCROM	E	
gavilyte-c	1	H
gavilyte-g	1	H
gavilyte-n with flavor pack	1	H
generlac	1	
GLYCATE	E	
glycopyrrolate oral tablet 1 mg, 2 mg	1	
GLYCOPYRROLATE ORAL TABLET 1.5 MG	E	
GOLYTELY	1	H
hyoscyamine sulfate er	1	
hyoscyamine sulfate oral tablet	1	
hyoscyamine sulfate oral tablet dispersible	1	
hyoscyamine sulfate sublingual	1	
IBSRELA	E	PA, ST, QL
IQIRVO	4	PA, ST, QL, SP
lactulose encephalopathy	1	
lactulose oral solution	1	
LEVBIID	4	
LEVSIN	4	
LEVSIN/SL	4	
LIBRAX	E	
LINZESS	2	PA, QL
LIVDELZI	4	PA, ST, QL, SP
LOMOTIL	4	
loperamide hcl oral capsule	E	
lubiprostone	1	PA, QL
MOTEGRITY	E	PA, QL
MOVIPREP	4	

See page 6-8 for coverage details.



Drug Name	Drug Tier	Requirements & Limits
na sulfate-k sulfate-mg sulf	1	
NULEV	4	
OSCIMIN	4	
peg 3350-kcl-na bicarb-nacl	1	H
peg-3350/electrolytes	1	H
peg-3350/electrolytes/ascorbat	1	
peg-kcl-nacl-nasulf-na asc-c	1	
PLENVU	2	
prucalopride succinate	1	PA, QL
RELTONE	E	
REZDIFFRA	4	PA, QL
ROBINUL ORAL TABLET 1 MG	E	
ROBINUL-FORTE ORAL TABLET 2 MG	E	
SUFLAVE	3	
SUPREP BOWEL PREP KIT	3	
SUTAB	2	
SYMPROIC	2	PA, QL
TRULANCE	4	PA, ST, QL
URSO 250 ORAL TABLET 250 MG	E	
URSO FORTE	E	
URSODIOL ORAL CAPSULE 200 MG, 400 MG	E	
ursodiol oral capsule 300 mg	1	
ursodiol oral tablet	1	
VIBERZI	3	QL
Genetic or Enzyme Disorder - Drugs for Replacement, Modification, Treatment		
ATTRUBY	2	PA, QL, SP
CARNITOR ORAL TABLET	4	
CERDELGA	2	PA, SP
CREON	2	
DEPEN TITRATABS	2	SP
EVRYSDI ORAL SOLUTION RECONSTITUTED	2	PA, QL, SP
JYNARQUE ORAL TABLET THERAPY PACK	E	PA, QL, SP

Drug Name	Drug Tier	Requirements & Limits
levocarnitine oral tablet	1	
ORFADIN ORAL CAPSULE	1	PA, SP
ORFADIN ORAL SUSPENSION	2	PA, SP
PANCREAZE	3	ST
PERTZYE	4	ST
STRENSIQ	2	PA, QL, SP
SUCRAID	2	PA, SP
TEGSEDI SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 284 MG/1.5ML	2	PA, QL, SP
tolvaptan oral tablet therapy pack	1	PA, QL, SP
VYNDAMAX	2	PA, QL, SP
VYNDAQEL	2	PA, QL, SP
ZENPEP	2	
Genitourinary Agents - Drugs for Bladder, Genital and Kidney Conditions		
bethanechol chloride oral	1	
calcium acetate (phos binder) oral capsule	1	
DETROL	E	
DETROL LA ORAL CAPSULE EXTENDED RELEASE 24 HOUR 2 MG, 4 MG	E	
DITROPAN XL ORAL TABLET EXTENDED RELEASE 24 HOUR 5 MG	E	
ELMIRON	4	ST
GEMTESA	4	
mirabegron er	1	ST
MYRBETRIQ ORAL TABLET EXTENDED RELEASE 24 HOUR	4	
oxybutynin chloride er	1	
oxybutynin chloride oral	1	
phenazo oral tablet 200 mg	1	
phenazopyridine hcl oral tablet 100 mg, 200 mg	1	
PYRIDIDIUM	3	

See page 6-8 for coverage details.



Drug Name	Drug Tier	Requirements & Limits
REVELA ORAL TABLET	E	
sevelamer carbonate oral tablet	1	
solifenacin succinate	1	
tolterodine tartrate	1	
tolterodine tartrate er	1	
tropium chloride	1	
tropium chloride er	1	
VANRAFIA	4	PA, SP
VELPHORO	4	ST
VESICARE	4	
Genitourinary Agents - Drugs for Prostate Conditions		
alfuzosin hcl er	1	
AVODART	E	
dutasteride oral	1	
finasteride oral tablet 5 mg	1	
FLOMAX ORAL CAPSULE 0.4 MG	E	
PROSCAR	E	
RAPAFLO	E	
silodosin	1	
tamsulosin hcl	1	
terazosin hcl	1	
UROXATRAL	E	
Hormonal Agents - Hormone Replacement and Birth Control		
abigale	1	
abigale lo	1	
ACTIVELLA	4	
afirmelle	1	H
ALORA	3	QL
altavera	1	H
alyacen 1/35	1	H
alyacen 7/7/7	1	H
amabelz oral tablet 0.5-0.1 mg, 1-0.5 mg	1	
amethia oral tablet 0.15-0.03 & 0.01 mg	1	H

Drug Name	Drug Tier	Requirements & Limits
ANNOVERA	3	QL
apri	1	H
aranelle	1	H
ashlyna	1	H
aubra eq	1	H
aurovela 1.5/30	1	H
aurovela 1/20	1	H
aurovela 24 fe	1	H
aurovela fe 1.5/30	1	H
aurovela fe 1/20	1	H
aviane	1	H
AYGESTIN ORAL TABLET 5 MG	4	
ayuna	1	H
azurette	1	H
balziva	1	H
BEYAZ	E	
BIJUVA	3	
blisovi 24 fe	1	H
blisovi fe 1.5/30	1	H
blisovi fe 1/20	1	H
briellyn	1	H
camila	1	H
camrese	1	H
camrese lo	1	H
charlotte 24 fe	1	H
chateal eq	1	H
CLIMARA	E	QL
CLIMARA PRO	2	QL
COMBIPATCH	2	QL
COVARYX	2	
COVARYX HS	3	
cryselle-28	1	H
cyred eq	1	H
dasetta 1/35 (28)	1	H
dasetta 7/7/7	1	H
daysee	1	H

See page 6-8 for coverage details.



Drug Name	Drug Tier	Requirements & Limits
deblitane	1	H
DELESTROGEN	4	
delyla	1	H
DEPO-PROVERA	4	QL
DEPO-SUBQ PROVERA 104	1	QL, H
desogestrel-ethinyl estradiol	1	H
DIVIGEL TRANSDERMAL GEL 0.25 MG/0.25GM, 0.5 MG/ 0.5GM, 1 MG/GM, 1.25 MG/1.25GM	3	
DIVIGEL TRANSDERMAL GEL 0.75 MG/0.75GM	2	
dotti	1	QL
drospiren-eth estrad-levomefol oral tablet 3-0.02-0.451 mg	1	
drospiren-eth estrad-levomefol oral tablet 3-0.03-0.451 mg	1	H
drospirenone-ethinyl estradiol	1	H
DUAVEE	3	QL
EEMT	2	
EEMT HS	3	
ELESTRIN	3	
elinest	1	H
ELLA	1	QL, H
eluryng	1	H
emzahh	1	H
enilloring	1	H
enpresse-28	1	H
enskyce	1	H
errin	1	H
est estrogens-methyltest	1	
est estrogens-methyltest ds	1	
est estrogens-methyltest hs	1	
estarylla	1	H
ESTRACE	E	
estradiol oral	1	
estradiol patch twice weekly	1	QL

Drug Name	Drug Tier	Requirements & Limits
estradiol transdermal gel 0.25 mg/0.25gm, 0.5 mg/0.5gm, 0.75 mg/0.75gm, 1 mg/gm, 1.25 mg/1.25gm	1	
estradiol transdermal gel 0.75 mg/1.25 gm (0.06%)	1	QL
estradiol transdermal patch weekly	1	(generic for Climara), QL
estradiol vaginal	1	
estradiol valerate intramuscular	1	
estradiol-norethindrone acet	1	
estratest f.s.	1	
ESTRATEST H.S.	3	
ESTRING	2	QL
ESTROGEL	3	QL
ethynodiol diac-eth estradiol	1	H
etonogestrel-ethinyl estradiol	1	H
EVAMIST	2	
falmina	1	H
fayosim oral tablet 42-21-21-7 days	1	H
feirza 1.5/30	1	H
feirza 1/20	1	H
FEMRING	3	QL
finzala	1	H
fyavolv	1	
gallifrey	1	
hailey 1.5/30	1	H
hailey 24 fe	1	H
hailey fe 1.5/30	1	H
hailey fe 1/20	1	H
haloette	1	H
heather	1	H
iclevia	1	H
incassia	1	H
introvale	1	H
isibloom	1	H

See page 6-8 for coverage details.



Drug Name	Drug Tier	Requirements & Limits
jaimiess	1	H
jasmiel	1	H
jencycla	1	H
jinteli	1	
jolessa	1	H
juleber	1	H
junel 1.5/30	1	H
junel 1/20	1	H
junel fe 1.5/30	1	H
junel fe 1/20	1	H
junel fe 24	1	H
kalliga	1	H
kariva	1	H
kelnor 1/35	1	H
kelnor 1/50	1	H
kurvelo	1	H
larin 1.5/30	1	H
larin 1/20	1	H
larin 24 fe	1	H
larin fe 1.5/30	1	H
larin fe 1/20	1	H
leena	1	H
lessina	1	H
levonest	1	H
levonorgest-eth est & eth est oral tablet 42-21-21-7 days	1	H
levonorgest-eth estrad 91-day	1	H
levonorgestrel-ethinyl estrad oral tablet 0.1-20 mg-mcg, 0.15-30 mg-mcg	1	H
levonorg-eth estrad triphasic	1	H
levora 0.15/30 (28)	1	H
LO LOESTRIN FE	1	H
LOESTRIN 1.5/30 (21)	E	
LOESTRIN 1/20 (21)	E	
LOESTRIN FE 1.5/30	E	
LOESTRIN FE 1/20	E	

Drug Name	Drug Tier	Requirements & Limits
lojaimiess	1	H
loryna	1	H
low-ogestrel	1	H
lo-zumandimine	1	H
lutera	1	H
lyleq	1	H
lyllana	1	QL
lyza	1	H
marlissa	1	H
medroxyprogesterone acetate intramuscular	1	QL, H
medroxyprogesterone acetate oral	1	
megestrol acetate oral tablet	1	
meleya	1	H
MENOSTAR	3	QL
mibelas 24 fe	1	H
microgestin 1.5/30	1	H
microgestin 1/20	1	H
microgestin 24 fe oral tablet 1-20 mg-mcg	1	H
microgestin fe 1.5/30	1	H
microgestin fe 1/20	1	H
mili	1	H
mimvey	1	
MINASTRIN 24 FE ORAL TABLET CHEWABLE 1-20 MG-MCG(24)	E	
MINIVELLE	E	QL
MIRCETTE ORAL TABLET 0.15-0.02/0.01 MG (21/5)	E	
mono-linyah	1	H
MYFEMBREE	2	QL
NATAZIA	1	
necon 0.5/35 (28)	1	H
NEXTSTELLIS	4	
nikki	1	H
nora-be	1	H

See page 6-8 for coverage details.



Drug Name	Drug Tier	Requirements & Limits
norelgestromin-eth estradiol	1	H
norethin ace-eth estrad-fe oral tablet	1	H
norethin ace-eth estrad-fe oral tablet chewable	1	H
norethindrone acetate oral	1	
norethindrone acet-ethinyl est	1	H
norethindrone oral	1	H
norethindrone-eth estradiol	1	
norethindron-ethinyl estrad-fe oral tablet 1-20/1-30/1-35 mg-mcg	1	H
norgestimate-eth estradiol oral tablet 0.25-35 mg-mcg	1	H
norgestimate-ethinyl estradiol triphasic	1	H
norlyroc	1	H
nortrel 0.5/35 (28)	1	H
nortrel 1/35 (21)	1	H
nortrel 1/35 (28)	1	H
nortrel 7/7/7	1	H
NUVARING	E	
nylia 1/35	1	H
nylia 7/7/7	1	H
nymyo oral tablet 0.25-35 mg-mcg	1	H
ocella	1	H
PHEXXI	E	
philith	1	H
pimtrea	1	H
portia-28	1	H
PREMARIN ORAL	2	
PREMARIN VAGINAL	3	
PREMPHASE	2	
PREMPRO	2	
progesterone intramuscular	1	
progesterone oral	1	
PROMETRIUM	E	

Drug Name	Drug Tier	Requirements & Limits
PROVERA	4	
QUARTETTE ORAL TABLET 42-21-21-7 DAYS	E	
reclipsen	1	H
rivelsa	1	H
rosyrah	1	H
SAFYRAL	E	
SEASONIQUE ORAL TABLET 0.15-0.03 & 0.01 MG	E	
setlakin	1	H
sharobel	1	H
simliya	1	H
simpesse	1	H
SLYND	4	
sprintec 28	1	H
sronyx	1	H
syeda	1	H
tarina 24 fe	1	H
tarina fe 1/20 eq	1	H
tilia fe	1	H
tri-estarylla	1	H
tri-legest fe	1	H
tri-linyah	1	H
tri-lo-estarylla	1	H
tri-lo-marzia	1	H
tri-lo-mili	1	H
tri-lo-sprintec	1	H
tri-mili	1	H
tri-nymyo oral tablet 0.18/0.215/0.25 mg-35 mcg	1	H
tri-sprintec	1	H
trivora (28)	1	H
tri-vylibra	1	H
tri-vylibra lo	1	H
turqoz	1	H
TWIRLA	4	
TYBLUME	1	

See page 6-8 for coverage details.



Drug Name	Drug Tier	Requirements & Limits
tydemy oral tablet 3-0.03-0.451 mg	1	H
VAGIFEM	E	
valtya 1/50	1	H
velivet	1	H
vestura	1	H
vienva	1	H
viorele	1	H
VIVELLE-DOT	E	QL
volnea	1	H
vyfemla	1	H
vylibra	1	H
wera	1	H
xarah fe	1	H
xulane	1	H
YASMIN 28	3	
YAZ	3	
yuvafem	1	
zafemy	1	H
zovia 1/35 (28)	1	H
zumandimine	1	H
Hormonal Agents - Oral Steroids		
CORTEF	4	
DEXABLISS ORAL TABLET THERAPY PACK 1.5 MG (39)	E	
dexamethasone intensol	1	
dexamethasone oral	1	
DXEVO 11-DAY ORAL TABLET THERAPY PACK 1.5 MG	E	
fludrocortisone acetate oral	1	
HEMADY	E	
HIDEX 6-DAY	E	
hydrocortisone oral	1	
MEDROL ORAL TABLET 16 MG, 4 MG, 8 MG	4	
MEDROL ORAL TABLET 2 MG	2	
MEDROL ORAL TABLET THERAPY PACK	4	

Drug Name	Drug Tier	Requirements & Limits
methylprednisolone oral	1	
PEDIAPRED	2	
prednisolone oral solution	1	
prednisolone sodium phosphate oral solution 10 mg/5ml, 20 mg/5ml, 25 mg/5ml, 5 mg/5ml	E	
prednisolone sodium phosphate oral solution 15 mg/5ml	1	
prednisone oral	1	
TAPERDEX 12-DAY	3	
TAPERDEX 6-DAY ORAL TABLET THERAPY PACK 1.5 MG	4	
TAPERDEX 6-DAY ORAL TABLET THERAPY PACK 1.5 MG (21)	3	
TAPERDEX 7-DAY	3	
Hormonal Agents - Other		
cabergoline	1	
DDAVP ORAL	E	
desmopressin acetate oral	1	
desmopressin acetate spray	1	
leuprolide acetate injection	1	PA
megestrol acetate oral suspension 40 mg/ml	1	
NGENLA	4	PA, QL, SP
NOCDURNA SUBLINGUAL TABLET SUBLINGUAL 27.7 MCG, 55.3 MCG	3	PA, QL
NORDITROPIN FLEXPPO	2	PA, QL, SP
OMNITROPE	2	PA, QL, SP
ORIAHNN	2	PA, QL
ORILISSA	2	QL
SKYTROFA	4	PA, QL, SP
Hormonal Agents - Testosterone Replacement		
ANDROGEL PUMP	E	QL
DEPO-TESTOSTERONE INTRAMUSCULAR SOLUTION 100 MG/ML	3	

See page 6-8 for coverage details.



Drug Name	Drug Tier	Requirements & Limits
DEPO-TESTOSTERONE INTRAMUSCULAR SOLUTION 200 MG/ML	4	
FORTESTA TRANSDERMAL GEL 10 MG/ACT (2%)	E	QL
JATENZO	E	QL
KYZATREX	4	QL
NATESTO	E	QL
TESTIM	1	QL
TESTOSTERONE CYPIONATE INJECTION	E	
testosterone cypionate intramuscular	1	
testosterone enanthate intramuscular	1	
testosterone gel 12.5 mg/act (1%) transdermal	E	QL
testosterone gel 25 mg/2.5gm (1%) transdermal	1	QL
testosterone gel 25 mg/2.5gm (1%) transdermal	E	QL
testosterone transdermal gel 1.62 %	1	QL (generic Androgel Pump)
testosterone transdermal gel 10 mg/act (2%), 20.25 mg/1.25gm (1.62%), 40.5 mg/2.5gm (1.62%), 50 mg/5gm (1%)	E	QL
TLANDO	E	QL
UNDECATREX	E	QL
VOGELXO	E	QL
VOGELXO PUMP	E	QL
XYOSTED	E	QL
Hormonal Agents - Thyroid		
ADTHYZA	E	
ARMOUR THYROID ORAL TABLET 120 MG, 180 MG, 240 MG, 30 MG, 300 MG, 60 MG, 90 MG	2	
ARMOUR THYROID TABLET 15 MG ORAL	3	

Drug Name	Drug Tier	Requirements & Limits
ARMOUR THYROID TABLET 15 MG ORAL	2	
CYTOMEL	E	
ERMEZA	2	
euthyrox	1	
levo-t	1	
LEVOTHYROXINE SODIUM ORAL CAPSULE	4	
levothyroxine sodium oral tablet	1	
levoxyl	1	
liothyronine sodium oral	1	
methimazole oral	1	
NIVA THYROID	3	
np thyroid	1	
propylthiouracil oral	1	
RENTHYROID	3	
SYNTHROID	E	
THYQUIDITY	4	
thyroid oral	1	
TIROSINT	4	
TIROSINT-SOL	2	
unithroid	1	
Immunological Agents - Drugs for Immune System Stimulation or Suppression		
ACTEMRA ACTPEN	3	PA, ST, QL, SP
ACTEMRA SUBCUTANEOUS	3	PA, ST, QL, SP
ADALIMUMAB-ADAZ	2	PA, QL, SP
ADBRY	2	PA, QL, SP
AMJEVITA	2	PA, QL, SP
ARAVA	E	
AZASAN	4	
azathioprine oral	1	
BENLYSTA SUBCUTANEOUS SOLUTION AUTO-INJECTOR	2	PA, QL, SP
BIMZELX	3	PA, ST, QL, SP
CELLCEPT ORAL CAPSULE	E	
CELLCEPT ORAL TABLET	E	

See page 6-8 for coverage details.



Drug Name	Drug Tier	Requirements & Limits
CIMZIA	2	PA, QL, SP
CINRYZE	E	PA, QL, SP
COSENTYX	2	PA, QL, SP
cyclosporine modified oral capsule	1	
EMPAVELI	2	PA, QL, SP
ENBREL	2	PA, QL, SP
ENBREL MINI	2	PA, QL, SP
ENBREL SURECLICK	2	PA, QL, SP
ENTYVIO PEN	2	PA, (SUBCUTANEOUS), QL, SP
ENVARUSUS XR	E	
everolimus oral tablet 0.25 mg, 0.5 mg, 0.75 mg, 1 mg	1	
gengraf oral capsule	1	
HAEGARDA SUBCUTANEOUS SOLUTION RECONSTITUTED 2000 UNIT	2	PA, QL, SP
HAEGARDA SUBCUTANEOUS SOLUTION RECONSTITUTED 3000 UNIT	2	PA, SP
HUMIRA	E	PA, QL, SP
HYFTOR	4	PA, QL
IMURAN	E	
JYLAMVO	4	PA
KEVZARA	4	PA, ST, QL, SP
leflunomide oral	1	
LITFULO	3	PA, QL, SP
LUPKYNIS	4	PA, QL, SP
methotrexate sodium (pf)	1	
methotrexate sodium injection solution	1	
methotrexate sodium oral	1	
mycophenolate mofetil oral capsule	1	
mycophenolate mofetil oral tablet	1	
mycophenolate sodium	1	

Drug Name	Drug Tier	Requirements & Limits
mycophenolic acid	1	
MYFORTIC	E	
MYHIBBIN	1	
NEORAL ORAL CAPSULE	E	
OLUMIANT	3	PA, ST, QL, SP
OMVOH SUBCUTANEOUS	2	PA, QL, SP
ORENCIA CLICKJECT	3	PA, ST, QL, SP
ORENCIA SUBCUTANEOUS	3	PA, ST, QL, SP
OTEZLA	2	PA, QL, SP
OTREXUP	E	QL
PROGRAF ORAL CAPSULE	4	
RAPAMUNE ORAL TABLET 0.5 MG, 1 MG, 2 MG	E	
RASUVO	2	QL
RINVOQ	2	PA, QL, SP
RUCONEST	4	PA, QL, SP
SIMPONI	2	PA, QL, SP
sirolimus oral tablet	1	
SKYRIZI	2	PA, QL, SP
SOTYKTU	2	PA, QL, SP
STELARA SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	E	PA, QL, SP
STEQEYMA SUBCUTANEOUS	2	PA, QL, SP
tacrolimus oral	1	
TAKHZYRO SUBCUTANEOUS SOLUTION	2	PA, QL, SP
TALTZ SUBCUTANEOUS SOLUTION AUTO-INJECTOR	E	PA, ST, QL, SP
TREMFYA	2	PA, QL, SP
TREXALL	2	
USTEKINUMAB SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	E	PA, QL, SP
WEZLANA	2	PA, QL, SP
XELJANZ	2	PA, QL, SP
XELJANZ XR	2	PA, QL, SP
YESINTEK SUBCUTANEOUS	2	PA, QL, SP
ZORTRESS	E	

See page 6-8 for coverage details.



Drug Name	Drug Tier	Requirements & Limits
Immunological Agents - Drugs for Vaccination		
ABRYSO	3	H
ADACEL	3	H
AFLURIA PRESERVATIVE FREE	3	H
AREXVY	3	H
BOOSTRIX	2	H
BOOSTRIX INTRAMUSCULAR SUSPENSION 5-2.5-18.5 LF-MCG/0.5	2	H
CAPVAXIVE	3	H
COMIRNATY	3	H
ENGERIX-B	2	H
FLUAD	3	H
FLUARIX	3	H
FLUCELVAX INTRAMUSCULAR SUSPENSION PREFILLED SYRINGE	3	H
FLULAVAL	3	H
FLUZONE HIGH-DOSE	3	H
FLUZONE INTRAMUSCULAR SUSPENSION PREFILLED SYRINGE	3	H
GARDASIL 9 INTRAMUSCULAR SUSPENSION PREFILLED SYRINGE	3	H
HAVRIX	3	H
HEPLISAV-B	3	H
IPOL	2	H
MENQUADFI	3	H
MENVEO	3	H
M-M-R II	2	H
MODERNA COVID-19 VAC 6M-11Y	3	H
PFIZER COVID-19 VAC-TRIS 5-11Y	3	H
PFIZER COVID-19 VAC-TRIS 6M-4Y	3	H
PREVNAR 20	3	H
PRIORIX	3	H

Drug Name	Drug Tier	Requirements & Limits
RECOMBIVAX HB	2	H
SHINGRIX	3	H
SPIKEVAX	3	H
TENIVAC	3	H
TWINRIX	3	H
VAQTA	2	H
VARIVAX	3	H
VIVOTIF	E	
Infertility Agents		
CETROTIDE	4	PA, ST, QL, SP
CHORIONIC GONADOTROPIN INTRAMUSCULAR	3	SP
CLOMID	2	
clomiphene citrate oral	1	
ENDOMETRIN	2	
FOLLISTIM AQ	2	QL, SP
FYREMADEL	3	QL, SP
ganirelix acetate solution prefilled syringe 250 mcg/0.5ml subcutaneous	1	QL, SP
ganirelix acetate solution prefilled syringe 250 mcg/0.5ml subcutaneous	1	(manufactured by Merck/Organon), QL, SP
GONAL-F	4	ST, SP
GONAL-F RFF	4	ST, SP
GONAL-F RFF REDIJECT	4	ST, SP
MENOPUR	4	QL, SP
NOVAREL	3	SP
OVIDREL	4	SP
PREGNYL	3	SP
Inflammatory Bowel Disease Agents		
ANALPRAM HC	4	
ANALPRAM HC SINGLES EXTERNAL CREAM 2.5-1 %	4	
ANALPRAM-HC EXTERNAL CREAM	4	

See page 6-8 for coverage details.



Drug Name	Drug Tier	Requirements & Limits
ANUCORT-HC	2	
ANUSOL-HC	4	
APRISO	1	
AZULFIDINE	4	
AZULFIDINE EN-TABS	4	
balsalazide disodium	1	
budesonide oral	1	
CANASA	E	
COLAZAL	E	
CORTIFOAM	2	
DELZICOL	E	
DIPENTUM	3	
HEMMOREX-HC RECTAL SUPPOSITORY 25 MG	3	
HEMMOREX-HC RECTAL SUPPOSITORY 30 MG	4	
hydrocortisone (perianal) external cream 1 %	E	
hydrocortisone (perianal) external cream 2.5 %	1	
hydrocortisone ace-pramoxine external cream 1-1 %	1	
hydrocortisone acetate rectal	1	
hydrocort-pramoxine (perianal)	1	
LIALDA	E	
mesalamine er oral capsule 0.375 gm	E	
mesalamine oral capsule delayed release 400 mg	1	
mesalamine oral tablet delayed release 1.2 gm	1	
mesalamine oral tablet delayed release 800 mg	E	
mesalamine rectal enema	1	
mesalamine rectal suppository	1	QL
PROCORT	4	
PROCTOCORT EXTERNAL	E	
PROCTOCORT RECTAL	4	

Drug Name	Drug Tier	Requirements & Limits
PROCTOFOAM HC	2	
procto-med hc	1	
PROCTOSOL HC	4	
PROCTOZONE-HC	4	
SFROWASA	4	
sulfasalazine oral	1	
UCERIS ORAL	1	
Metabolic Bone Disease Agents - Drugs for Osteoporosis		
ACTONEL	E	QL
alendronate sodium oral tablet	1	
BONSITY	3	PA, SP
EVISTA	E	
FORTEO	E	PA, SP
FOSAMAX	4	
ibandronate sodium oral	1	
raloxifene hcl	1	H-PA
risedronate sodium oral tablet 150 mg, 35 mg	1	QL
risedronate sodium oral tablet 30 mg, 5 mg	1	
teriparatide solution pen-injector 560 mcg/2.24ml subcutaneous	E	PA, SP
TYMLOS	3	PA, SP
Metabolic Bone Disease Agents - Other		
calcitriol oral capsule	1	
cinacalcet hcl	1	
ROCALTROL ORAL CAPSULE	4	
SENSIPAR	E	
YORVIPATH	4	PA, QL, SP
Ophthalmic Agents - Drugs for Eye Allergy, Infection and Inflammation		
ACULAR	4	
ACULAR LS	4	
ACUVAIL	4	
ALREX	4	

See page 6-8 for coverage details.



Drug Name	Drug Tier	Requirements & Limits
AZASITE	3	
azelastine hcl ophthalmic	1	
bacitracin-polymyxin b	1	
BESIVANCE	3	
bromfenac sodium (once-daily)	1	
bromfenac sodium ophthalmic	1	
BROMSITE	4	
ciprofloxacin hcl ophthalmic	1	
dexamethasone sodium phosphate ophthalmic	1	
diclofenac sodium ophthalmic	1	
epinastine hcl	1	
erythromycin ophthalmic	1	H-PA
EYSUVIS	2	
FLAREX	2	
fluorometholone	1	
FML FORTE	3	
FML LIQUIFILM	4	
gatifloxacin ophthalmic	1	
gentamicin sulfate ophthalmic	1	
ILEVRO	4	
INVELTYS	3	
ketorolac tromethamine ophthalmic	1	
KLARITY-A	E	
LOTEMAX OPHTHALMIC GEL	4	
LOTEMAX OPHTHALMIC OINTMENT	3	
LOTEMAX OPHTHALMIC SUSPENSION	E	
LOTEMAX SM	3	
loteprednol etabonate	1	
MAXITROL	4	
moxifloxacin hcl (2x day)	1	
moxifloxacin hcl ophthalmic	1	
neomycin-polymyxin-dexameth	1	

Drug Name	Drug Tier	Requirements & Limits
NEVANAC	4	
OCUFLOX	4	
ofloxacin ophthalmic	1	
olopatadine hcl ophthalmic solution 0.1 %	1	
olopatadine hcl ophthalmic solution 0.2 %	E	
POLYCIN	3	
polymyxin b-trimethoprim	1	
PRED FORTE	E	
PRED MILD	3	
prednisolone acetate ophthalmic	1	
PREDNISOLONE ACETATE P-F	E	
PROLENSA	4	
sulfacetamide sodium ophthalmic solution	1	
TOBRADEX OPHTHALMIC OINTMENT	3	
TOBRADEX OPHTHALMIC SUSPENSION 0.3-0.1 %	4	
TOBRADEX ST	4	
tobramycin ophthalmic	1	
tobramycin-dexamethasone	1	
VIGAMOX	E	
XDEMVIY	4	PA, QL
ZYLET	3	
Ophthalmic Agents - Drugs for Glaucoma		
ALPHAGAN P OPHTHALMIC SOLUTION 0.1 %	1	
ALPHAGAN P OPHTHALMIC SOLUTION 0.15 %	4	
AZOPT	E	
BETIMOL OPHTHALMIC SOLUTION 0.25 %	2	
BETIMOL OPHTHALMIC SOLUTION 0.5 %	4	
bimatoprost ophthalmic	1	

See page 6-8 for coverage details.



Drug Name	Drug Tier	Requirements & Limits
brimonidine tartrate ophthalmic solution 0.1 %	E	
brimonidine tartrate ophthalmic solution 0.15 %, 0.2 %	1	
brimonidine tartrate-timolol	E	
brinzolamide	1	
COMBIGAN	1	
COSOPT	4	
COSOPT PF	E	
DORZOLAMIDE HCL SOLUTION 2 % OPHTHALMIC	4	
dorzolamide hcl solution 2 % ophthalmic	1	
dorzolamide hcl-timolol mal	1	
dorzolamide hcl-timolol mal pf	1	
ISTALOL	4	
IYUZEH	4	
latanoprost ophthalmic	1	
LUMIGAN	2	
RHOPRESSA	3	
ROCKLATAN	3	
tafluprost (pf)	1	ST
timolol hemihydrate	1	
timolol maleate (once-daily)	1	
timolol maleate ocudose	1	
timolol maleate ophthalmic	1	
timolol maleate pf	1	
TIMOPTIC OCUDOSE	4	
TIMOPTIC OPHTHALMIC SOLUTION 0.25 %, 0.5 %	4	
TIMOPTIC-XE OPHTHALMIC GEL FORMING SOLUTION 0.25 %, 0.5 %	4	
TRAVATAN Z	E	ST
travoprost (bak free)	1	
VYZULTA	4	ST
XALATAN	E	
ZIOPTAN	3	ST

Drug Name	Drug Tier	Requirements & Limits
Ophthalmic Agents - Drugs for Miscellaneous Eye Conditions		
ATROPINE SULFATE OPHTHALMIC SOLUTION 0.01 %, 0.025 %, 0.05 %	E	
atropine sulfate ophthalmic solution 1 %	1	
CEQUA	E	PA
cromolyn sodium ophthalmic	1	
CYCLOGYL	4	
cyclopentolate hcl ophthalmic	1	
cyclosporine ophthalmic	E	PA
difluprednate	1	
DUREZOL	E	
ISOPTO ATROPINE OPHTHALMIC SOLUTION 1 %	3	
MIEBO	4	PA, QL
RESTASIS	1	PA
RESTASIS MULTIDOSE	4	PA, QL
TYRVAYA	4	PA, QL
VERKAZIA	4	PA, QL
VEVYE	E	PA, QL
XIIDRA	2	PA
Otic Agents - Drugs for Ear Conditions		
acetic acid otic	1	
CIPRODEX OTIC SUSPENSION 0.3-0.1 %	E	
ciprofloxacin-dexamethasone	1	
DERMOTIC	4	
flac otic oil 0.01 %	1	
fluocinolone acetonide otic	1	
hydrocortisone-acetic acid	1	
neomycin-polymyxin-hc otic	1	
ofloxacin otic	1	
Respiratory - Drugs for Anaphylaxis		
AUVI-Q	2	
EPINEPHRINE INJECTION SOLUTION PREFILLED SYRINGE 0.3 MG/0.3ML	2	

See page 6-8 for coverage details.



Drug Name	Drug Tier	Requirements & Limits
epinephrine solution auto-injector	1	
EPIPEN 2-PAK	E	
EPIPEN JR 2-PAK	E	
NEFFY	4	
Respiratory Tract / Pulmonary Agents - Drugs for Allergies, Cough, Cold		
azelastine hcl nasal solution 0.1 %, 137 mcg/spray	1	
azelastine hcl nasal solution 0.15 %	E	
azelastine-fluticasone	E	
benzonatate	1	
BROMFED DM ORAL SYRUP 2-30-10 MG/5ML	3	
bromphen-pseudoeph-dm	1	
carbinoxamine maleate oral tablet 4 mg	1	
carbinoxamine maleate oral tablet 6 mg	E	
cetirizine hcl oral solution	E	
CLARINEX	E	
cyproheptadine hcl oral	1	
desloratadine oral tablet	1	
DYMISTA	E	
flunisolide nasal	1	
fluticasone propionate nasal	1	
g tussin ac	1	
guaifenesin ac oral syrup 100-10 mg/5ml	1	
guaifenesin-codeine	1	
HYCODAN ORAL SOLUTION	E	PA
hydrocod poli-chlorphe poli er	1	PA
hydrocodone bit-homatrop mbr oral solution	1	PA
hydromet	1	PA
HYPERSAL	2	
ipratropium bromide nasal	1	

Drug Name	Drug Tier	Requirements & Limits
levocetirizine dihydrochloride oral	1	
maxi-tuss ac	1	
mometasone furoate nasal	1	
NEBUSAL INHALATION NEBULIZATION SOLUTION 3 %	3	
NEBUSAL INHALATION NEBULIZATION SOLUTION 6 %	E	
ODACTRA	4	PA, QL
olopatadine hcl nasal	1	
PATANASE NASAL SOLUTION 0.6 %	E	
promethazine-codeine	1	PA
promethazine-dm	1	
pseudoephedrine-bromphen-dm	1	
PULMOSAL	2	
RYALTRIS	4	
ryvent	E	
sodium chloride inhalation	1	
XHANCE	E	ST
ZETONNA NASAL AEROSOL SOLUTION 37 MCG/ACT	3	
Respiratory Tract / Pulmonary Agents - Drugs for Asthma and COPD		
ACCOLATE	4	
ADVAIR DISKUS	E	QL
ADVAIR HFA	2	QL, RS
AEROCHAMBER HOLDING CHAMBER	2	
AEROCHAMBER PLS FLOVU MTHPIECE	2	
AEROCHAMBER PLUS FLO-VU	2	
AEROCHAMBER PLUS FLO-VU INTERM	2	
AEROCHAMBER PLUS FLO-VU LARGE	2	
AEROCHAMBER PLUS FLO-VU MEDIUM DEVICE	2	

See page 6-8 for coverage details.



Drug Name	Drug Tier	Requirements & Limits
AEROCHAMBER PLUS FLO-VU SMALL	2	
AEROCHAMBER PLUS FLO-VU W/MASK	2	
AEROCHAMBER2GO ANTI-STATIC	2	
AIRDUO RESPICLICK	E	QL
AIRSUPRA	3	
albuterol sulfate hfa aerosol solution 108 (90 base) mcg/act inhalation	1	
albuterol sulfate inhalation nebulization solution (2.5 mg/3ml) 0.083%, 0.63 mg/3ml, 1.25 mg/3ml	1	
ALBUTEROL SULFATE NEBULIZATION SOLUTION (5 MG/ML) 0.5% INHALATION	3	
albuterol sulfate oral syrup 2 mg/5ml	1	
ANORO ELLIPTA	3	QL
ARNUITY ELLIPTA	1	QL
ASMANEX HFA	E	QL
ATROVENT HFA	2	QL
BEVESPI AEROSPHERE	2	QL
BREATHE COMFORT CHAMBER/ ADULT	2	
BREATHE COMFORT CHAMBER/ CHILD	2	
BREO ELLIPTA INHALATION AEROSOL POWDER BREATH ACTIVATED 100-25 MCG/ACT	2	QL, RS
BREO ELLIPTA INHALATION AEROSOL POWDER BREATH ACTIVATED 200-25 MCG/ACT, 50-25 MCG/INH	3	QL, RS
brey-na	E	QL, RS
BREZTRI AEROSPHERE	3	QL, RS
budesonide inhalation	1	QL
budesonide-formoterol fumarate	E	QL, RS

Drug Name	Drug Tier	Requirements & Limits
COMBIVENT RESPIMAT	2	QL
DALIRESP	E	QL
DULERA	4	ST, QL
EASIVENT	2	
EASIVENT MASK LARGE	2	
EASIVENT MASK MEDIUM	2	
EASIVENT MASK SMALL	2	
FASENRA PEN	4	PA, QL, SP
FLEXICHAMBER	2	
FLOVENT HFA INHALATION AEROSOL 110 MCG/ACT, 220 MCG/ACT, 44 MCG/ACT	E	QL
FLUTICASONE FUROATE-VILANTEROL	4	QL, RS
FLUTICASONE PROPIONATE HFA	4	QL
FLUTICASONE-SALMETEROL INHALATION AEROSOL	4	QL, RS
fluticasone-salmeterol inhalation aerosol powder breath activated 100-50 mcg/act, 250-50 mcg/act, 500-50 mcg/act	1	QL
FLUTICASONE-SALMETEROL INHALATION AEROSOL POWDER BREATH ACTIVATED 113-14 MCG/ACT, 232-14 MCG/ACT, 55-14 MCG/ACT	2	QL
INSPIREASE	2	
ipratropium bromide inhalation	1	
ipratropium-albuterol	1	
levalbuterol hcl inhalation	1	
LEVALBUTEROL HFA INHALATION AEROSOL 45 MCG/ACT	3	
MICROCHAMBER	2	
montelukast sodium oral	1	
NUCALA	4	PA, QL, SP
PERFOROMIST	4	QL
PROCHAMBER VHC	2	

See page 6-8 for coverage details.



Drug Name	Drug Tier	Requirements & Limits
PROVENTIL HFA INHALATION AEROSOL SOLUTION 108 (90 BASE) MCG/ACT	E	QL
PULMICORT SUSPENSION	E	QL
QVAR REDHALER	1	QL
roflumilast	1	QL
SEREVENT DISKUS	2	QL
SINGULAIR ORAL PACKET	3	
SINGULAIR ORAL TABLET	E	
SINGULAIR ORAL TABLET CHEWABLE	E	
SPIRIVA HANDIHALER	1	QL
SPIRIVA RESPIMAT	2	QL
STIOLTO RESPIMAT	2	QL
STRIVERDI RESPIMAT	2	QL
SYMBICORT	1	QL
TEZSPIRE SUBCUTANEOUS SOLUTION AUTO-INJECTOR	4	PA, QL, SP
tiotropium bromide monohydrate	E	QL
TRELEGY ELLIPTA	3	QL, RS
UMECLIDINIUM-VILANTEROL	E	QL
VENTOLIN HFA	E	
VORTEX HOLD CHMBR/MASK/CHILD DEVICE	2	
VORTEX HOLD CHMBR/MASK/TODDLER DEVICE	2	
VORTEX VALVE CHAMBER-PEDI MASK	2	
VORTEX VALVED HOLDING CHAMBER	2	
wixela inhub	1	QL
XOLAIR	2	PA, QL, SP
XOPENEX HFA	3	
YUPELRI	4	QL
zafirlukast	1	

Drug Name	Drug Tier	Requirements & Limits
Respiratory Tract / Pulmonary Agents - Drugs for Cystic Fibrosis		
BRONCHITOL	3	PA, ST, QL, SP
PULMOZYME	2	PA, QL, SP
TOBI PODHALER	3	PA, QL, SP
TRIKAFTA ORAL TABLET THERAPY PACK	2	PA, QL, SP
Respiratory Tract / Pulmonary Agents - Drugs for Pulmonary Fibrosis		
OFEV	4	PA, QL, SP
pirfenidone	1	PA, QL, SP
Respiratory Tract / Pulmonary Agents - Drugs for Pulmonary Hypertension		
ADCIRCA	E	PA, QL, SP
ADEMPAS	2	PA, QL, SP
alyq	1	PA, QL, SP
OPSUMIT	2	PA, QL, SP
REVATIO ORAL	E	QL, SP
sildenafil citrate oral tablet 20 mg	1	QL
tadalafil (pah)	1	PA, QL, SP
TADLIQ	3	PA, QL, SP
TRACLEER	2	PA, QL, SP
TYVASO	2	PA, SP
TYVASO DPI	2	PA, QL, SP
Skeletal Muscle Relaxants - Drugs for Muscle Pain and Spasm		
baclofen oral tablet	1	
carisoprodol oral	1	
chlorzoxazone oral tablet 250 mg	E	
chlorzoxazone oral tablet 375 mg, 500 mg, 750 mg	1	
cyclobenzaprine hcl oral tablet 10 mg, 5 mg	1	
cyclobenzaprine hcl oral tablet 7.5 mg	E	

See page 6-8 for coverage details.



Drug Name	Drug Tier	Requirements & Limits
FEXMID	E	
metaxalone oral tablet 400 mg, 800 mg	1	
metaxalone oral tablet 640 mg	E	
methocarbamol oral	1	
orphenadrine citrate er	1	
SOMA	E	
TANLOR	3	
tizanidine hcl oral	1	
VANADOM ORAL TABLET 350 MG	E	
ZANAFLEX	4	
ZANAFLEX ORAL CAPSULE 2 MG, 4 MG, 6 MG	4	
Sleep Disorder Agents		
AMBIEN	E	
AMBIEN CR	E	
armodafinil	1	QL
BELSOMRA	4	QL
DAYVIGO	E	QL
doxepin hcl oral tablet	1	QL
eszopiclone	1	
LUMRYZ	4	PA, QL, SP
LUNESTA	E	
modafinil oral	1	QL
NUVIGIL	E	QL
PROVIGIL	E	QL
QUVIVIQ	E	QL
ramelteon	1	QL
RESTORIL	4	
ROZEREM	E	QL
SILENOR	4	QL
SODIUM OXYBATE	4	PA, QL, SP (Manufactured by Hikma)
SUNOSI	2	PA, QL

Drug Name	Drug Tier	Requirements & Limits
temazepam	1	
WAKIX	4	PA, QL, SP
XYWAV	4	PA, QL, SP
zaleplon	1	
zolpidem tartrate er	1	
zolpidem tartrate oral tablet	1	

See page 6-8 for coverage details.



Index

A					
abigale	38	acitretin	26	ADZENYS XR-ODT	24
abigale lo.....	38	ACTEMRA ACTPEN	43	AEROCHAMBER HOLDING	
ABILIFY	19	ACTEMRA SUBCUTANEOUS.....	43	CHAMBER	49
abiraterone acetate oral tablet		ACTIVELLA	38	AEROCHAMBER PLS FLOVU	
250 mg	17	ACTONEL	46	MTHPIECE	49
abiraterone acetate oral tablet		ACTOPLUS MET.....	32	AEROCHAMBER PLUS	
500 mg	17	ACTOS.....	32	FLO-VU.....	49, 50
ABIRTEGA.....	17	ACULAR	46	AEROCHAMBER PLUS FLO-VU	
ABRYSSO.....	45	ACULAR LS.....	46	INTERM	49
ABSORICA	26	ACUVAIL	46	AEROCHAMBER PLUS FLO-VU	
acamprosate calcium	10	acyclovir external ointment.....	19	LARGE.....	49
ACANYA	26	acyclovir oral capsule.....	19	AEROCHAMBER PLUS FLO-VU	
acarbose oral	32	acyclovir oral suspension 200		MEDIUM DEVICE	49
ACCOLATE	49	mg/5ml	19	AEROCHAMBER PLUS FLO-VU	
ACCRUFER.....	34	acyclovir oral tablet.....	19	SMALL.....	50
ACCU-CHEK AVIVA PLUS TEST		ACZONE.....	26	AEROCHAMBER PLUS FLO-VU	
STRIPS	29	ADACEL	45	W/MASK.....	50
ACCU-CHEK FASTCLIX LANCET..	29	ADAINZDE EXTERNAL GEL		AEROCHAMBER2GO ANTI-	
ACCU-CHEK FASTCLIX LANCET		0.3-2.5-1 %.....	26	STATIC	50
DEVICE KIT	29	ADALIMUMAB-ADAZ	43	afirmelle.....	38
ACCU-CHEK GUIDE KIT W/		adapalene external gel	26	AFLURIA PRESERVATIVE FREE ...	45
DEVICE.....	29	adapalene-benzoyl peroxide		AFSTYLA.....	33
ACCU-CHEK GUIDE ME METER...	29	external gel	26	AIMOVIG.....	16
ACCU-CHEK GUIDE TEST		ADBRY.....	43	AIRDUO RESPICLICK.....	50
STRIPS	29	ADCIRCA.....	51	AIRSUPRA.....	50
ACCU-CHEK SMARTVIEW TEST		ADDERALL	24	AJOVY.....	16
STRIPS	29	ADDERALL XR	24	AKLIEF	26
ACCU-CHEK SOFTCLIX LANCET .	29	ADDYI.....	34	ALA SCALP.....	26
ACCU-CHEK SOFTCLIX LANCET		ADEINZDE	26	ala-cort.....	26
DEVICE KIT	29	ADEMPAS	51	albuterol sulfate hfa aerosol	
accutane	26	ADMELOG.....	31	solution 108 (90 base) mcg/act	
acebutolol hcl oral.....	20	ADMELOG SOLOSTAR.....	31	inhalation	50
acetaminophen-codeine oral		ADTHYZA.....	43	albuterol sulfate inhalation	
tablet.....	9	ADVAIR DISKUS.....	49	nebulization solution	
acetazolamide er	20	ADVAIR HFA.....	49	(2.5 mg/3ml) 0.083%,	
acetazolamide oral	20	ADVATE.....	33	0.63 mg/3ml, 1.25 mg/3ml.....	50
acetic acid otic.....	48	ADYNOVATE	33	ALBUTEROL SULFATE	
ACIPHEX	35			NEBULIZATION SOLUTION	
				(5 MG/ML) 0.5% INHALATION ...	50
				albuterol sulfate oral syrup	
				2 mg/5ml.....	50



alclometasone dipropionate.....	26	amlodipine besylate oral.....	20	APTIOM.....	13
ALDACTONE.....	20	amlodipine besylate-benazepril hcl.....	20	ARAKODA.....	18
ALECENSA.....	17	amlodipine besylate-valsartan....	20	aranelle.....	38
alendronate sodium oral tablet...	46	amlodipine-olmesartan.....	20	ARANESP (ALBUMIN FREE).....	33
alfuzosin hcl er.....	38	ammonium lactate external.....	26	ARAVA.....	43
aliskiren fumarate.....	20	amnesteam.....	26	ARAZLO.....	26
allopurinol oral.....	16	amoxicillin.....	11	AREXVY.....	45
ALOGLIPTIN BENZOATE.....	32	amoxicillin-potassium clavulanate.....	11	ARICEPT.....	14
ALORA.....	38	amphet-dextroamphet 3-bead er.....	24	ARIMIDEX.....	17
ALPHAGAN P OPHTHALMIC SOLUTION 0.1 %.....	47	amphetamine sulfate.....	24	aripiprazole oral solution.....	19
ALPHAGAN P OPHTHALMIC SOLUTION 0.15 %.....	47	amphetamine- dextroamphetamine.....	24	aripiprazole oral tablet.....	19
ALPHANATE.....	33	amphetamine- dextroamphetamine er.....	24	armodafinil.....	52
alprazolam er.....	20	ampicillin.....	11	ARMOUR THYROID ORAL TABLET 120 MG, 180 MG, 240 MG, 30 MG, 300 MG, 60 MG, 90 MG.....	43
alprazolam oral.....	20	AMPYRA.....	25	ARMOUR THYROID TABLET 15 MG ORAL.....	43
alprazolam xr.....	20	AMZEEQ.....	26	ARNUITY ELLIPTA.....	50
ALPROLIX.....	33	ANAFRANIL.....	14	AROMASIN.....	17
ALREX.....	46	ANALPRAM HC.....	45	ascomp-codeine.....	9
ALTACE.....	20	ANALPRAM HC SINGLES EXTERNAL CREAM 2.5-1 %.....	45	asenapine maleate.....	19
altavera.....	38	ANALPRAM-HC EXTERNAL CREAM.....	45	ashlyna.....	38
ALTUVIIIO.....	33	ANAPROX DS.....	10	ASMANEX HFA.....	50
ALUNBRIG.....	17	ANASPAZ.....	36	ATACAND.....	20
ALVAIZ.....	33	anastrozole oral.....	17	ATACAND HCT.....	20
alyacen 1/35.....	38	ANDROGEL PUMP.....	42, 43	atenolol oral.....	20
alyacen 7/7/7.....	38	ANNOVERA.....	38	atenolol-chlorthalidone.....	20
alyq.....	51	ANORO ELLIPTA.....	50	ATIVAN ORAL.....	20
amabelz oral tablet 0.5-0.1 mg, 1-0.5 mg.....	38	ANTIVERT ORAL TABLET 50 MG..	15	atomoxetine hcl.....	24
amantadine hcl oral capsule.....	18	ANUCORT-HC.....	46	ATORVALIQ.....	20
amantadine hcl oral tablet.....	18	ANUSOL-HC.....	46	atorvastatin calcium oral tablet 10 mg, 20 mg.....	20
AMBIEN.....	52	apap-caff-dihydrocodeine.....	9	atorvastatin calcium oral tablet 40 mg, 80 mg.....	20
AMBIEN CR.....	52	aprepitant oral capsule 125 mg, 40 mg, 80 mg.....	15	atovaquone.....	18
amethia oral tablet 0.15-0.03 &0.01 mg.....	38	apri.....	38	atovaquone-proguanil hcl.....	18
amiloride hcl oral.....	20	APRISO.....	46	ATRALIN.....	26
amiodarone hcl oral.....	20	APTENSIO XR.....	24	ATROPINE SULFATE OPHTHALMIC SOLUTION 0.01 %, 0.025 %, 0.05 %.....	48
AMITIZA.....	36				
amitriptyline hcl oral.....	14				
AMJEVITA.....	43				



atropine sulfate ophthalmic solution 1 %.....	48	azelastine-fluticasone.....	49	BENICAR HCT.....	21	
ATROVENT HFA.....	50	AZELEX.....	26	BENLYSTA SUBCUTANEOUS SOLUTION AUTO-INJECTOR.....	43	
ATTRUBY.....	37	AZILECT.....	18	BENZAMYCIN.....	26	
AUBAGIO.....	25	azithromycin oral packet 1 gm.....	11	benzonatate.....	49	
aubra eq.....	38	AZOPT.....	47	benzoyl peroxide-erythromycin ..	26	
AUGMENTIN.....	11	AZOR.....	20	benztropine mesylate oral.....	18	
AUGMENTIN ES-600.....	11	AZSTARYS.....	24	BESIVANCE.....	47	
AUGTYRO.....	17	AZULFIDINE.....	46	BESREMI.....	17	
aurovela 1/20.....	38	AZULFIDINE EN-TABS.....	46	betamethasone dipropionate aug external cream.....	26	
aurovela 1.5/30.....	38	azurette.....	38	betamethasone dipropionate aug external lotion.....	26	
aurovela 24 fe.....	38	B			betamethasone dipropionate aug external ointment.....	26
aurovela fe 1/20.....	38	bac (butalbital-acetamin-caff)....	9	betamethasone dipropionate aug external ointment.....	26	
aurovela fe 1.5/30.....	38	bacitracin-polymyxin b.....	47	betamethasone dipropionate external.....	26	
AUSTEDO.....	25	baclofen oral tablet.....	51	betamethasone valerate external cream.....	26	
AUSTEDO XR.....	25	BACTRIM.....	11	betamethasone valerate external lotion.....	26	
AUVELITY.....	14	BACTRIM DS.....	11	betamethasone valerate external ointment.....	26	
AUVI-Q.....	48	BAFIERTAM.....	25	BETAPACE.....	21	
AVALIDE.....	20	balsalazide disodium.....	46	BETASERON.....	25	
avanafil.....	34	balziva.....	38	bethanechol chloride oral.....	37	
AVAPRO.....	20	BAQSIMI ONE PACK.....	32	BETIMOL OPHTHALMIC SOLUTION 0.25 %.....	47	
AVAR CLEANSER.....	26	BAQSIMI TWO PACK.....	32	BETIMOL OPHTHALMIC SOLUTION 0.5 %.....	47	
AVAR LS CLEANSER.....	26	BARACLUDE ORAL TABLET.....	19	BEVESPI AEROSPHERE.....	50	
aviane.....	38	BASAGLAR TEMPO PEN.....	31	BEYAZ.....	38	
AVIDOXY.....	11	BD AUTOSHIELD DUO PEN NEEDLES.....	29	bicalutamide.....	17	
AVITA EXTERNAL CREAM 0.025 %.....	26	BD ULTRA-FINE PEN NEEDLES.....	29	BIJUVA.....	38	
AVODART.....	38	BD ULTRA-FINE U-500 INSULIN SYRINGES.....	29	BIKTARVY.....	19	
AVONEX.....	25	BD VEO ULTRA-FINE INSULIN SYRINGES.....	30	bimatoprost ophthalmic.....	47	
AYGESTIN ORAL TABLET 5 MG ...	38	BD-ULTRA FINE INSULIN SYRINGES.....	30	BIMZELX.....	43	
ayuna.....	38	BELBUCA.....	9	bis subcit-metronid-tetracyc.....	35	
AZASAN.....	43	BELSOMRA.....	52	bismuth/metronidaz/tetracyclin ..	35	
AZASITE.....	47	benazepril hcl oral.....	20	bisoprolol fumarate oral tablet ...	21	
azathioprine oral.....	43	benazepril-hydrochlorothiazide ..	20	bisoprolol-hydrochlorothiazide ...	21	
azelaic acid external.....	26	BENEFIX.....	33			
azelastine hcl nasal solution 0.1 %, 137 mcg/spray.....	49	BENICAR.....	20, 21			
azelastine hcl nasal solution 0.15 %.....	49					
azelastine hcl ophthalmic.....	47					



BLANCHE	26	budesonide inhalation.....	50	C
blisovi 24 fe	38	budesonide oral	46	cabergoline
blisovi fe 1/20.....	38	budesonide-formoterol		CABOMETRYX.....
blisovi fe 1.5/30	38	fumarate	50	CABTREQ.....
BONSITY.....	46	bumetanide oral	21	calcipotriene external cream
BOOSTRIX	45	BUMEX	21	calcipotriene external ointment ..
BOOSTRIX INTRAMUSCULAR		BUPAP ORAL TABLET 50-300 MG .	9	calcipotriene external solution ...
SUSPENSION 5-2.5-18.5		buprenorphine.....	9,10	CALCITRENE.....
LF-MCG/0.5.....	45	buprenorphine hcl sublingual.....	10	calcitriol oral capsule.....
BREATHE COMFORT CHAMBER/ ADULT	50	buprenorphine hcl-naloxone hcl		calcium acetate (phos binder)
BREATHE COMFORT CHAMBER/ CHILD	50	sublingual film	10	oral capsule
BRENZAVVY.....	32	buprenorphine hcl-naloxone hcl		CALQUENCE.....
BREO ELLIPTA INHALATION		sublingual tablet sublingual.....	10	camila
AEROSOL POWDER BREATH		bupropion hcl er (smoking det) ...	10	camrese
ACTIVATED 100-25 MCG/ACT	50	bupropion hcl er (sr).....	14	camrese lo
BREO ELLIPTA INHALATION		bupropion hcl er (xl) oral tablet		CAMZYOS
AEROSOL POWDER BREATH		extended release 24 hour		CANASA.....
ACTIVATED 200-25 MCG/ACT,		150 mg, 300 mg	14	candesartan cilexetil
50-25 MCG/INH	50	BUPROPION HCL ER (XL) ORAL		candesartan cilexetil-hctz
breyna.....	50	TABLET EXTENDED RELEASE 24		capecitabine.....
BREZTRI AEROSPHERE.....	50	HOUR 450 MG	14	CAPLYTA
briellyn	38	bupropion hcl oral	14	captopril oral.....
BRILINTA.....	18	bupropion hcl oral.....	20	CAPVAXIVE.....
brimonidine tartrate ophthalmic		buspirone hcl oral.....	20	CARAC EXTERNAL CREAM 0.5 % .
solution 0.1 %	48	butalbital-acetaminophen oral		CARAFATE.....
brimonidine tartrate ophthalmic		tablet 50-300 mg.....	9	carbamazepine er
solution 0.15 %, 0.2 %	48	butalbital-acetaminophen oral		carbamazepine oral tablet
brimonidine tartrate-timolol.....	48	tablet 50-325 mg	9	carbamazepine oral tablet
brinzolamide.....	48	butalbital-apap-caff-cod	9	chewable.....
BRIVIACT ORAL TABLET	13	butalbital-apap-caffeine.....	9	CARBATROL.....
BROMFED DM ORAL SYRUP		butalbital-asa-caff-codeine.....	9	carbidopa-levodopa er
2-30-10 MG/5ML	49	butalbital-aspirin-caffeine	9	carbidopa-levodopa oral tablet... 18
bromfenac sodium (once-daily) ..	47	butorphanol tartrate nasal.....	9	carbinoxamine maleate oral
bromfenac sodium ophthalmic... 47		BUTRANS	9	tablet 4 mg.....
bromocriptine mesylate oral		BYDUREON BCISE		carbinoxamine maleate oral
tablet.....	18	AUTOINJECTOR		tablet 6 mg.....
bromphen-pseudoeph-dm	49	SUBCUTANEOUS AUTO-		CARDIZEM
BROMSITE	47	INJECTOR 2 MG/0.85ML.....	32	CARDIZEM CD
BRONCHITOL.....	51	BYLVAY	36	CARDIZEM LA.....
BRUKINSA.....	17	BYLVAY (PELLETS).....	36	
		BYSTOLIC.....	21	

CARDURA	21	chlorthalidone	21	CLEOCIN-T.....	27
carisoprodol oral.....	51	chlorzoxazone oral tablet 250 mg	51	CLIMARA.....	38, 39
CARNITOR ORAL SOLUTION	34	chlorzoxazone oral tablet 375 mg, 500 mg, 750 mg.....	51	CLIMARA PRO	38
CARNITOR ORAL TABLET	37	cholestyramine light	21	clindacin etz external swab	27
CARNITOR SF.....	34	cholestyramine oral	21	clindacin-p	27
cartia xt	21	CHORIONIC GONADOTROPIN INTRAMUSCULAR.....	45	CLINDAGEL.....	27
carvedilol.....	21	CIALIS	34	clindamycin hcl oral	12
carvedilol phosphate er	21	CIBINQO.....	27	clindamycin palmitate hcl.....	12
CASODEX.....	17	ciclodan.....	15	clindamycin phos (once-daily) gel 1 % external	27
CATAPRES-TTS-1.....	21	ciclopirox external.....	15	clindamycin phos (twice-daily) gel 1 % external	27
CATAPRES-TTS-2	21	ciclopirox olamine external cream	15	clindamycin phos-benzoyl perox external gel 1-5 %, 1.2-2.5 %, 1.2- 3.75 %.....	27
CATAPRES-TTS-3	21	ciclopirox olamine external suspension.....	27	clindamycin phos-benzoyl perox external gel 1.2-5 %	27
cefadroxil oral capsule	11	cilostazol.....	18	clindamycin phosphate external lotion	27
cefadroxil oral suspension reconstituted	11	CIMDUO	19	clindamycin phosphate external solution	27
cefdinir.....	11	cimetidine oral.....	35	clindamycin phosphate external swab.....	27
cefixime oral capsule.....	11	CIMZIA.....	44	clindamycin phosphate external vaginal ...	12
cefpodoxime proxetil oral tablet ..	11	cinacalcet hcl	46	CLINDESSE	12
cefprozil.....	11	CINRYZE	44	CLINPRO 5000	25
cefuroxime axetil	11	CIPRO ORAL TABLET.....	11	clobazam oral suspension 2.5 mg/ml	13
CELEBREX	10	CIPRODEX OTIC SUSPENSION 0.3-0.1 %.....	48	clobazam oral tablet.....	13
celecoxib oral.....	10	ciprofloxacin hcl ophthalmic.....	47	clobetasol prop emollient base external cream 0.05 %.....	27
CELEXA	14	ciprofloxacin hcl oral	11	clobetasol propionate e.....	27
CELLCEPT ORAL CAPSULE	43	ciprofloxacin-dexamethasone....	48	CLOBETASOL PROPIONATE EXTERNAL CREAM 0.025 %	27
CELLCEPT ORAL TABLET	43	citalopram hydrobromide oral tablet.....	14	clobetasol propionate external cream 0.05 %.....	27
cephalexin	11	claravis	27	clobetasol propionate external foam.....	27
CEQUA	48	CLARINEX	49	clobetasol propionate external gel.....	27
CEQUR SIMPLICITY 2U 8PK.....	30	clarithromycin oral tablet	11	clobetasol propionate external liquid	27
CERDELGA.....	37	CLENPIQ.....	36		
cetirizine hcl oral solution.....	49	CLEOCIN ORAL CAPSULE 150 MG, 300 MG	11		
CETROTIDE.....	45	CLEOCIN ORAL CAPSULE 75 MG. .	11		
cevimeline hcl	25	CLEOCIN ORAL SOLUTION RECONSTITUTED.....	11		
charlotte 24 fe	38	CLEOCIN VAGINAL CREAM.....	12		
chateal eq.....	38				
chlordiazepoxide hcl	20				
chlordiazepoxide-clidinium	36				
chlorhexidine gluconate mouth/ throat.....	25				
chlorpromazine hcl oral tablet.....	19				



DELZICOL	46	DEXABLISS ORAL TABLET THERAPY PACK 1.5 MG (39)	42	dicyclomine hcl oral capsule	36
DENTA 5000 PLUS	25, 34	dexamethasone intensol	42	dicyclomine hcl oral tablet 20 mg	36
DENTA 5000 PLUS SENSITIVE	34	dexamethasone oral	42	DIFFERIN EXTERNAL GEL 0.3 % ..	27
DENTAGEL	25	dexamethasone sodium phosphate ophthalmic	47	DIFICID ORAL TABLET	12
DEPAKOTE	13	DEXCOM G6 RECEIVER	30	DIFLUCAN	16
DEPAKOTE ER	13	DEXCOM G6 SENSOR	30	difluprednate	48
DEPAKOTE SPRINKLES	13	DEXCOM G6 TRANSMITTER	30	digoxin oral tablet	21
DEPEN TITRATABS	37	DEXCOM G7 RECEIVER	30	DILANTIN	13
DEPO-PROVERA	39	DEXCOM G7 SENSOR	30	DILAUDID ORAL TABLET	9
DEPO-SUBQ PROVERA 104	39	DEXEDRINE	24	dilt-xr	21
DEPO-TESTOSTERONE INTRAMUSCULAR SOLUTION 100 MG/ML	42	DEXILANT	35	diltiazem hcl er	21
DEPO-TESTOSTERONE INTRAMUSCULAR SOLUTION 200 MG/ML	43	dexlansoprazole	35	diltiazem hcl er beads	21
DERMA-SMOOTHIE/FS BODY	27	dexmethylphenidate hcl	24	diltiazem hcl er coated beads	21
DERMA-SMOOTHIE/FS SCALP	27	dexmethylphenidate hcl er	24	diltiazem hcl oral	21
DERMACINRX UREA	27	dextroamphetamine sulfate er ..	24	dimethyl fumarate oral	25
DERMOTIC	48	dextroamphetamine sulfate oral tablet	24	DIOVAN	21
DESCOVY ORAL TABLET 120-15 MG	19	DHIVY	18	DIOVAN HCT	21
DESCOVY ORAL TABLET 200-25 MG	19	DIASTAT ACUDIAL RECTAL GEL 10 MG, 20 MG	13	DIPENTUM	46
desipramine hcl oral	14	DIASTAT PEDIATRIC RECTAL GEL 2.5 MG	13	diphenoxylate-atropine oral tablet	36
desloratadine oral tablet	49	diazepam oral solution	20	DIPROLENE	27
desmopressin acetate oral	42	diazepam oral tablet	20	disulfiram oral	10
desmopressin acetate spray	42	diazepam rectal	13	DITROPAN XL ORAL TABLET EXTENDED RELEASE 24 HOUR 5 MG	37
desogestrel-ethinyl estradiol	39	DICLEGIS	15	divalproex sodium er	13
desonide external cream	27	diclofenac potassium oral tablet 25 mg	10	divalproex sodium oral	13
desonide external lotion	27	diclofenac potassium oral tablet 50 mg	10	DIVIGEL TRANSDERMAL GEL 0.25 MG/0.25GM, 0.5 MG/0.5GM, 1 MG/GM, 1.25 MG/1.25GM	39
desonide external ointment	27	diclofenac sodium er	10	DIVIGEL TRANSDERMAL GEL 0.75 MG/0.75GM	39
DESOWEN	27	diclofenac sodium external gel 1 %	10	DODEx INJECTION SOLUTION 1000 MCG/ML	34
desoximetasone external cream ..	27	diclofenac sodium external gel 3 %	27	dofetilide	21
desoximetasone external ointment	27	diclofenac sodium ophthalmic ..	47	donepezil hcl oral tablet	14
desvenlafaxine succinate er	14	diclofenac sodium oral	10	DOPTELET	33
DETROL	37	diclofenac-misoprostol	10	DORZOLAMIDE HCL SOLUTION 2 % OPHTHALMIC	48
DETROL LA ORAL CAPSULE EXTENDED RELEASE 24 HOUR 2 MG, 4 MG	37	dicloxacillin sodium	12		



dorzolamide hcl-timolol mal	48	EASIVENT MASK MEDIUM	50	emtricitabine-tenofovir df oral tablet 100-150 mg, 133-200 mg, 167-250 mg	19
dorzolamide hcl-timolol mal pf . . .	48	EASIVENT MASK SMALL	50	emtricitabine-tenofovir df oral tablet 200-300 mg	19
dotti	39	EASYGLUCO	30	emzahh	39
DOVATO	19	EASYMAX 15 TEST	30	enalapril maleate oral	21
doxazosin mesylate oral	21	EASYMAX NG BLOOD GLUCOSE KIT	30	enalapril-hydrochlorothiazide	21
doxepin hcl oral capsule	14	EBGLYSS SUBCUTANEOUS SOLUTION AUTO-INJECTOR	27	ENBREL	44
doxepin hcl oral concentrate	14	EC-NAPROSYN ORAL TABLET DELAYED RELEASE 375 MG	10	ENBREL MINI	44
doxepin hcl oral tablet	52	EC-NAPROSYN ORAL TABLET DELAYED RELEASE 500 MG	10	ENBREL SURECLICK	44
doxycycline	12, 27	ec-naproxen	10	endocet	9
doxycycline hyclate oral capsule . .	12	econazole nitrate external	16	ENDOMETRIN	45
doxycycline hyclate oral tablet 100 mg, 150 mg, 20 mg, 75 mg . . .	12	EDARBI	21	ENGERIX-B	45
doxycycline hyclate oral tablet 50 mg	12	EDARBYCLOR	21	enilloring	39
doxycycline monohydrate oral . . .	12	EEMT	39	ENLITE GLUCOSE SENSOR	30
doxylamine-pyridoxine	15	EEMT HS	39	enoxaparin sodium injection solution prefilled syringe	13
DRISDOL	34	EFFEXOR XR	14	enpresse-28	39
dronabinol	15	EFFIENT	18	enskyce	39
drosipren-eth estrad-levomefol oral tablet 3-0.02-0.451 mg	39	EFUDEX EXTERNAL CREAM 5 % . .	27	ENSTILAR	27
drosipren-eth estrad-levomefol oral tablet 3-0.03-0.451 mg	39	ELEPSIA XR	13	entecavir	19
drosiprenone-ethinyl estradiol . .	39	ELESTRIN	39	ENTRESTO ORAL TABLET	21
DRYSOL	27	eletriptan hydrobromide	16	ENTYVIO PEN	44
DUAVEE	39	ELIMITE	18	enulose	36
DULERA	50	elinest	39	ENVARUSUS XR	44
duloxetine hcl oral	14	ELIQUIS TABLET	13	EPANED	21
DUPIXENT	27	ELLA	39	EPCLUSA ORAL TABLET	19
DUREZOL	48	ELMIRON	37	EPIDIOLEX	13
dutasteride oral	38	ELOCTATE	33	EPIDUO	27
DXEVO 11-DAY ORAL TABLET THERAPY PACK 1.5 MG	42	eluryng	39	EPIDUO FORTE	27
DYANAVAL XR ORAL TABLET EXTENDED RELEASE	24	EMBECTA INSULIN SYRINGE	30	epinastine hcl	47
DYMISTA	49	EMBRACE BLOOD GLUCOSE TEST	30	EPINEPHRINE INJECTION SOLUTION PREFILLED SYRINGE 0.3 MG/0.3ML	48
E		EMBRACE WAVE BLOOD GLUCOSE IN VITRO	30	epinephrine solution auto- injector	49
E.E.S. GRANULES	12	EMEND BIPACK	15	EPIPEN 2-PAK	49
EASIVENT	50	EMGALITY	16	EPIPEN JR 2-PAK	49
EASIVENT MASK LARGE	50	EMPAVELI	44	epitol	13



fenofibric acid oral capsule delayed release	21	fluocinolone acetonide otic.....	48	FML FORTE	47
FENOGLIDE ORAL TABLET 120 MG, 40 MG.....	21	fluocinolone acetonide scalp	28	FML LIQUIFILM	47
fentanyl	9	fluocinonide external.....	28	FOCALIN.....	24
FETZIMA	14	FLUORIDEX.....	25	FOCALIN XR	24
FEXMID	52	FLUORIDEX ENHANCED WHITENING.....	25	folic acid oral tablet 1 mg.....	34
fidaxomicin oral tablet	12	FLUORIMAX 5000.....	25, 34	FOLLISTIM AQ.....	45
FINACEA EXTERNAL FOAM.....	28	FLUORIMAX 5000 SENSITIVE....	34	FORFIVO XL	15
FINACEA EXTERNAL GEL.....	28	fluorometholone	47	FORTEO	46
finasteride oral tablet 5 mg	38	FLUOROURACIL EXTERNAL CREAM 0.5 %.....	28	FORTESTA TRANSDERMAL GEL 10 MG/ACT (2%)	43
fingolimod hcl	25	fluorouracil external cream 5 %...	28	FOSAMAX	46
finzala	39	fluoxetine hcl oral capsule	14	fosfomycin tromethamine	12
FIORICET	9	fluoxetine hcl oral solution.....	14	fosinopril sodium	21
FIORICET/CODEINE	9	fluoxetine hcl oral tablet 10 mg...	14	FRAICHE 5000 DENTAL.....	25
flac otic oil 0.01 %.....	48	fluoxetine hcl oral tablet 20 mg, 60 mg	15	FRAICHE 5000 SENSITIVE DENTAL GEL 1.1-4.5 %	34
FLAREX	47	FLUTICASONE FUROATE- VILANTEROL	50	FREESTYLE LIBRE 14 DAY READER	30
flecainide acetate	21	fluticasone propionate external cream	28	FREESTYLE LIBRE 14 DAY SENSOR.....	30
FLEXICHAMBER.....	50	fluticasone propionate external ointment.....	28	FREESTYLE LIBRE 2 PLUS SENSOR.....	30
FLOMAX ORAL CAPSULE 0.4 MG.	38	FLUTICASONE PROPIONATE HFA.....	50	FREESTYLE LIBRE 2 READER	30
FLORAFOL PEDIATRIC ORAL SOLUTION 0.25 MG/ML.....	34	fluticasone propionate nasal.....	49	FREESTYLE LIBRE 2 SENSOR	30
FLORAFOL PEDIATRIC ORAL TABLET CHEWABLE 0.5 MG, 1 MG.....	34	FLUTICASONE-SALMETEROL INHALATION AEROSOL.....	50	FREESTYLE LIBRE 3 PLUS SENSOR.....	30
FLORIVA PLUS.....	34	fluticasone-salmeterol inhalation aerosol powder breath activated 100-50 mcg/ act, 250-50 mcg/act, 500-50 mcg/act.....	50	FREESTYLE LIBRE 3 READER	30
FLOTREX.....	34	FLUTICASONE-SALMETEROL INHALATION AEROSOL POWDER BREATH ACTIVATED 113-14 MCG/ACT, 232-14 MCG/ ACT, 55-14 MCG/ACT	50	FREESTYLE LIBRE 3 SENSOR	30
FLOVENT HFA INHALATION AEROSOL 110 MCG/ACT, 220 MCG/ACT, 44 MCG/ACT	50	fluoxamine maleate	15	FREESTYLE LIBRE READER.....	30
FLUAD.....	45	fluoxamine maleate er	15	FREESTYLE PRECISION NEO SYSTEM	30
FLUARIX	45	FLUZONE HIGH-DOSE	45	FREESTYLE PRECISION NEO TEST.....	30
FLUCELVAX INTRAMUSCULAR SUSPENSION PREFILLED SYRINGE	45	FLUZONE INTRAMUSCULAR SUSPENSION PREFILLED SYRINGE	45	FREESTYLE TEST	30
fluconazole oral.....	16			frovatriptan succinate.....	16
fludrocortisone acetate oral	42			ft naloxone hcl.....	10
FLULAVAL.....	45			ft nicotine	10
flunisolide nasal.....	49			ft nicotine mini.....	10
fluocinolone acetonide body	28			FUROSCIX	21
fluocinolone acetonide external..	28			furosemide oral.....	21
				fyavolv.....	39



FYCOMPA ORAL SUSPENSION ...	13
FYCOMPA ORAL TABLET	13
FYREMADEL	45
G	
g tussin ac.....	49
gabapentin oral capsule.....	13
gabapentin oral solution 250 mg/5ml.....	13
GABAPENTIN ORAL TABLET 25 MG, 50 MG.....	13
gabapentin oral tablet 600 mg, 800 mg.....	13
GABARONE	13
gallifrey.....	39
ganirelix acetate solution prefilled syringe 250 mcg/0.5ml subcutaneous.....	45
GARDASIL 9 INTRAMUSCULAR SUSPENSION PREFILLED SYRINGE	45
GASTROCROM.....	36
gatifloxacin ophthalmic	47
gavilyte-c	36
gavilyte-g	36
gavilyte-n with flavor pack	36
GAVRETO	17
gemfibrozil oral.....	22
GEMTESA	37
generlac.....	36
gengraf oral capsule.....	44
gentamicin sulfate external.....	12
gentamicin sulfate ophthalmic ...	47
GENVOYA	19
GEODON ORAL.....	19
GILENYA ORAL CAPSULE 0.25 MG	25
GILENYA ORAL CAPSULE 0.5 MG.	25
glatiramer acetate.....	25
glatopa.....	25

GLEEVEC.....	17
glimepiride oral tablet 1 mg, 2 mg, 4 mg	32
glimepiride oral tablet 3 mg.....	32
glipizide er	32
glipizide ir	32
glipizide xl oral tablet extended release 24 hour 10 mg, 2.5 mg, 5 mg	32
glipizide-metformin hcl	32
glucagon emergency kit 1 mg injection.....	32
GLUCAGON EMERGENCY KIT for LOW BLOOD SUGAR (Fresenius)	32
GLUCOCARD EXPRESSION TEST.	30
GLUCOCARD SHINE TEST	30
GLUCOCARD VITAL TEST.....	30
GLUCOTROL XL	32
GLUMETZA ORAL TABLET EXTENDED RELEASE 24 HOUR 1000 MG, 500 MG	32
glyburide oral	32
glyburide-metformin.....	32
GLYCATE	36
glycopyrrolate oral tablet 1 mg, 2 mg	36
GLYCOPYRROLATE ORAL TABLET 1.5 MG.....	36
GLYXAMBI	32
gnp naloxone hcl	10
gnp nicotine mini	10
gnp nicotine polacrilex mouth/ throat gum 2 mg.....	10
gnp nicotine polacrilex mouth/ throat lozenge	10
gnp nicotine transdermal	10
GOLYTELY	36
GONAL-F	45
GONAL-F RFF	45
GONAL-F RFF REDIJECT.....	45
goodsense nicotine.....	10

griseofulvin microsize oral suspension.....	16
guaifenesin ac oral syrup 100-10 mg/5ml	49
guaifenesin-codeine	49
guanfacine hcl	22, 24
guanfacine hcl er	24
GUARDIAN 4 GLUCOSE SENSOR.....	30
GUARDIAN 4 TRANSMITTER.....	30
GUARDIAN CONNECT TRANSMITTER.....	30
GUARDIAN LINK 3 TRANSMITTER	30
GUARDIAN REAL-TIME REPLACE PED.....	30
GUARDIAN SENSOR 3	30
GVOKE HYPOPEN 1-PACK.....	33
GVOKE HYPOPEN 2-PACK.....	33
GVOKE KIT.....	33
GVOKE PFS.....	33
GYNAZOLE-1.....	16

H	
habitrol.....	10
HAEGARDA SUBCUTANEOUS SOLUTION RECONSTITUTED 2000 UNIT	44
HAEGARDA SUBCUTANEOUS SOLUTION RECONSTITUTED 3000 UNIT	44
hailey 1.5/30	39
hailey 24 fe	39
hailey fe 1/20.....	39
hailey fe 1.5/30.....	39
HALCION.....	20
halobetasol propionate external cream	28
halobetasol propionate external ointment.....	28
haloette.....	39
haloperidol oral.....	19



HARVONI ORAL TABLET	19	HUMULIN N KWIKPEN	31	HYDROXYM EXTERNAL CREAM ..	28
HAVRIX.....	45	HUMULIN N VIAL.....	31	hydroxyurea oral.....	17
heather.....	39	HUMULIN R U-500 KWIKPEN	31	hydroxyzine hcl oral	20
HEMADY.....	42	HUMULIN R U-500 VIAL	31	hydroxyzine pamoate oral.....	20
HEMANGEOL	22	HUMULIN R VIAL	31	HYFTOR.....	44
HEMICLOR.....	22	HYCODAN ORAL SOLUTION.....	49	HYMPAVZI	33
HEMLIBRA SUBCUTANEOUS SOLUTION 105 MG/0.7ML, 150 MG/ML, 30 MG/ML, 300 MG/2ML, 60 MG/0.4ML	33	hydralazine hcl oral	22	hyoscyamine sulfate er.....	36
HEMLIBRA SUBCUTANEOUS SOLUTION 12 MG/0.4ML.....	33	HYDREA	17	hyoscyamine sulfate oral tablet... 36	
HEMMOREX-HC RECTAL SUPPOSITORY 25 MG	46	hydrochlorothiazide oral	22	hyoscyamine sulfate oral tablet dispersible	36
HEMMOREX-HC RECTAL SUPPOSITORY 30 MG	46	hydrocod poli-chlorphe poli er....	49	hyoscyamine sulfate sublingual... 36	
HEMOFIL M	33	hydrocodone bit-homatrop mbr oral solution.....	49	HYPERSAL	49
HEPLISAV-B.....	45	hydrocodone-acetaminophen oral solution 10-300 mg/15ml, 10-325 mg/15ml, 7.5-325 mg/ 15ml	9	HYZAAR.....	22
HIDEX 6-DAY.....	42	hydrocodone-acetaminophen oral tablet.....	9		
HIPREX.....	12	hydrocort-pramoxine (perianal) ..	46		
hm nicotine polacrilex mouth/ throat gum 2 mg, 4 mg	11	hydrocortisone (perianal) external cream 1 %.....	46		
hm nicotine polacrilex mouth/ throat lozenge 2 mg	11	hydrocortisone (perianal) external cream 2.5 %.....	46		
hm nicotine transdermal patch 24 hour 21 mg/24hr, 7 mg/24hr ...	11	hydrocortisone ace-pramoxine external cream 1-1 %.....	46		
HUMALOG CARTRIDGE	31	hydrocortisone acetate rectal	46		
HUMALOG KWIKPEN	31	hydrocortisone external cream 1 %	28		
HUMALOG MIX 50/50 KWIKPEN .	31	hydrocortisone external cream 2.5 %.....	28		
HUMALOG MIX 50/50 VIAL SUBCUTANEOUS SUSPENSION (50-50) 100 UNIT/ML	31	hydrocortisone external lotion 2 %, 2.5 %	28		
HUMALOG MIX 75/25 KWIKPEN..	31	hydrocortisone external ointment 1 %, 2.5 %.....	28		
HUMALOG MIX 75/25 VIAL	31	hydrocortisone oral.....	42		
HUMALOG TEMPO PEN	31	hydrocortisone valerate external cream	28		
HUMALOG U-100 JUNIOR KWIKPEN.....	31	hydrocortisone-acetic acid	48		
HUMALOG VIAL	31	hydromet.....	49		
HUMATE-P	33	hydromorphone hcl oral tablet	9		
HUMIRA.....	44	hydroquinone external	28		
HUMULIN 70/30 KWIKPEN	31	hydroxychloroquine sulfate oral ..	18		
HUMULIN 70/30 VIAL.....	31				

I

ibandronate sodium oral	46
IBRANCE ORAL TABLET.....	17
IBSRELA.....	36
ibuprofen oral suspension 100 mg/5ml.....	10
ibuprofen oral tablet 400 mg, 600 mg, 800 mg	10
iclevia	39
ICLUSIG.....	17
icosapent ethyl	22
IDELVION	33
IDHIFA	17
ILEVRO.....	47
imatinib mesylate oral.....	17
IMBRUVICA ORAL CAPSULE.....	17
IMBRUVICA ORAL TABLET 140 MG, 280 MG	17
IMBRUVICA ORAL TABLET 420 MG.....	17
imipramine hcl oral	15
imiquimod external cream 3.75 %.....	28
imiquimod external cream 5 %....	28
imiquimod pump	28



KESIMPTA.....	25	lactulose encephalopathy.....	36	LEVALBUTEROL HFA	
ketoconazole external cream	16	lactulose oral solution.....	36	INHALATION AEROSOL	
ketoconazole external shampoo..	16	LAGEVRIO	19	45 MCG/ACT	50
ketoconazole oral.....	16	LAMICTAL.....	13	LEVVID.....	36
ketorolac tromethamine		LAMICTAL ODT ORAL TABLET		levetiracetam er	13
ophthalmic.....	47	DISPERSIBLE	13	levetiracetam oral solution.....	13
ketorolac tromethamine oral	10	LAMICTAL XR ORAL TABLET		levetiracetam oral tablet.....	13
KEVZARA.....	44	EXTENDED RELEASE 24 HOUR ...	13	levo-t.....	43
KISQALI.....	17	lamotrigine er.....	13	levocarnitine oral solution.....	34
KLARITY-A.....	47	lamotrigine oral tablet.....	13	levocarnitine oral tablet.....	37
KLARON.....	28	lamotrigine oral tablet chewable .	13	levocarnitine sf	34
klayesta	16	lamotrigine oral tablet		levocetirizine dihydrochloride	
KLISYRI	28	dispersible	13	oral	49
KLONOPIN.....	20	LANOXIN ORAL TABLET		levofloxacin oral tablet.....	12
klor-con	34	125 MCG, 250 MCG	22	levonest.....	40
klor-con 10	34	LANOXIN ORAL TABLET		levonorg-eth estrad triphasic.....	40
klor-con m10.....	34	62.5 MCG.....	22	levonorgest-eth est & eth est	
klor-con m15.....	34	lansoprazole oral capsule		oral tablet 42-21-21-7 days	40
klor-con m20.....	34	delayed release	36	levonorgest-eth estrad 91-day....	40
KLOXXADO	11	lansoprazole oral tablet delayed		levonorgestrel-ethinyl estrad	
kls quit2	11	release dispersible.....	36	oral tablet 0.1-20 mg-mcg,	
kls quit4	11	LANTUS SOLOSTAR	32	0.15-30 mg-mcg.....	40
KOATE.....	33	LANTUS U-100 VIAL.....	32	levora 0.15/30 (28)	40
KOATE-DVI.....	33	larin 1/20	40	LEVOTHYROXINE SODIUM	
KOGENATE FS.....	33	larin 1.5/30	40	ORAL CAPSULE.....	43
KOMBIGLYZE XR ORAL TABLET		larin 24 fe.....	40	levothyroxine sodium oral tablet .	43
EXTENDED RELEASE 24 HOUR		larin fe 1/20	40	levoxyl.....	43
2.5-1000 MG, 5-1000 MG,		larin fe 1.5/30	40	LEVSIN.....	36
5-500 MG	33	LASIX.....	22	LEVSIN/SL.....	36
KOSELUGO.....	17	latanoprost ophthalmic	48	LEXAPRO.....	15
KOURZEQ	26	LATUDA	19	LIALDA.....	46
KOVALTRY.....	33	LEDIPASVIR-SOFOSBUVIR.....	19	LIBERVANT BUCCAL FILM	
KRINTAFEL.....	18	leena	40	10 MG, 12.5 MG, 15 MG, 5 MG,	
kurvelo	40	leflunomide oral	44	7.5 MG	13
KYZATREX.....	43	lenalidomide.....	17	LIBRAX.....	36
		lessina.....	40	lidocaine external ointment 5 % ...	9
		letrozole oral.....	17	lidocaine external patch 5 %	9
		leucovorin calcium oral.....	17	lidocaine hcl mouth/throat	26
		leuprolide acetate injection.....	42	lidocaine viscous hcl.....	26
		levabuterol hcl inhalation.....	50	lidocaine-prilocaine external	
				cream	9

L



mesalamine oral tablet delayed release 1.2 gm.....	46	methylphenidate hcl er oral tablet extended release.....	24, 25	minoxidil oral	22
mesalamine oral tablet delayed release 800 mg	46	methylphenidate hcl er oral tablet extended release 24 hour..	25	mirabegron er.....	37
mesalamine rectal enema.....	46	methylphenidate hcl oral.....	25	MIRCETTE ORAL TABLET 0.15-0.02/0.01 MG (21/5)	40
mesalamine rectal suppository ...	46	methylprednisolone oral	42	mirtazapine oral	15
MESTINON ORAL TABLET	17	metoclopramide hcl oral tablet...	15	MIRVASO.....	28
METADATE CD	24	metolazone	22	misoprostol oral	36
metaxalone oral tablet 400 mg, 800 mg.....	52	metoprolol succinate er.....	22	MITIGARE.....	16
metaxalone oral tablet 640 mg...	52	metoprolol tartrate oral.....	22	modafinil oral	52
metformin hcl er.....	33	metoprolol-hydrochlorothiazide..	22	MODERNA COVID-19 VAC 6M-11Y	45
metformin hcl er (mod)	33	METROCREAM.....	28	mometasone furoate external....	28
metformin hcl er (osm).....	33	METROGEL	28	mometasone furoate nasal	49
metformin hcl oral tablet 1000 mg, 500 mg, 850 mg	33	METROLOTION.....	28	MONDOXYNE NL	12
metformin hcl oral tablet 625 mg, 750 mg	33	metronidazole external	28	mono-linyah	40
methadone hcl oral tablet.....	9	metronidazole oral tablet 125 mg.	12	montelukast sodium oral.....	50
methenamine hippurate	12	metronidazole oral tablet 250 mg, 500 mg	12	morphine sulfate er oral tablet extended release	9
methimazole oral	43	metronidazole vaginal.....	12	morphine sulfate oral tablet	9
methocarbamol oral.....	52	mexiletine hcl oral.....	22	MOTEGRITY	36
methotrexate sodium (pf)	44	mibelas 24 fe.....	40	MOTPOLY XR.....	13
methotrexate sodium injection solution	44	MICARDIS.....	22	MOUNJARO.....	33
methotrexate sodium oral	44	MICARDIS HCT	22	MOVIPREP	36
METHYLIN	24	MICROCHAMBER.....	50	moxifloxacin hcl (2x day).....	47
methylphenidate hcl er (cd).....	24	microgestin 1/20	40	moxifloxacin hcl ophthalmic.....	47
methylphenidate hcl er (la) oral capsule extended release 24 hour	24	microgestin 1.5/30	40	moxifloxacin hcl oral	12
methylphenidate hcl er (osm) oral tablet extended release 18 mg, 27 mg, 36 mg, 54 mg	24	microgestin 24 fe oral tablet 1-20 mg-mcg.....	40	MS CONTIN.....	9
METHYLPHENIDATE HCL ER (OSM) ORAL TABLET EXTENDED RELEASE 45 MG, 63 MG	24	microgestin fe 1/20.....	40	MULTAQ.....	22
methylphenidate hcl er (osm) oral tablet extended release 72 mg.....	24	microgestin fe 1.5/30.....	40	MULTI-VIT-FLOR	34
methylphenidate hcl er (xr)	24	midodrine hcl.....	22	multi-vitamin/fluoride	34
		MIEBO.....	48	multivitamin w/fluoride	34
		mili	40	multivitamin/fluoride oral tablet chewable.....	34
		mimvey.....	40	mupirocin cream	12
		MINASTRIN 24 FE ORAL TABLET CHEWABLE 1-20 MG-MCG(24)....	40	mupirocin ointment.....	12
		MINIPRESS ORAL CAPSULE 1 MG, 2 MG, 5 MG	22	MYAMBUTOL ORAL TABLET 400 MG.....	17
		MINIVELLE	40	mycophenolate mofetil oral capsule.....	44
		minocycline hcl oral capsule	12		

mycophenolate mofetil oral tablet.....	44	nebivolol hcl	22	nicotine polacrilex mouth/throat.....	10, 11
mycophenolate sodium	44	NEBUSAL INHALATION		nicotine step 1	11
mycophenolic acid	44	NEBULIZATION SOLUTION 3 % ..	49	nicotine step 2	11
MYDAYIS	25	NEBUSAL INHALATION		nicotine step 3	10, 11
MYFEMBREE	40	NEBULIZATION SOLUTION 6 % ..	49	nicotine transdermal patch 24 hour	11
MYFORTIC	44	necon 0.5/35 (28).....	40	nifedipine er	22
MYHIBBIN.....	44	NEFFY.....	49	nifedipine er osmotic release	22
MYRBETRIQ ORAL TABLET		NEMLUVIO.....	28	nifedipine oral	22
EXTENDED RELEASE 24 HOUR ...	37	neomycin sulfate oral	12	nikki	40
MYSOLINE	13	neomycin-polymyxin-dexameth .	47	nilotinib hcl.....	17
N					
na sulfate-k sulfate-mg sulf	37	neomycin-polymyxin-hc otic	48	NITRO-BID.....	22
nabumetone oral	10	NEONATAL COMPLETE.....	35	NITRO-DUR.....	22
nadolol oral	22	NEONATAL PLUS.....	35	nitrofurantoin macrocrystal	12
naloxone hcl injection solution		NEONATAL PRENATAL.....	35	nitrofurantoin monohydrate	
prefilled syringe	11	NEONATAL VITAMIN	35	macrocrystals.....	12
naloxone hcl nasal	11	NEORAL ORAL CAPSULE.....	44	nitroglycerin rectal	22
naltrexone hcl oral.....	11	NESINA ORAL TABLET 12.5 MG,		nitroglycerin sublingual	22
NAMENDA ORAL TABLET 10 MG,		25 MG, 6.25 MG	33	nitroglycerin transdermal	23
5 MG.....	14	neuac.....	28	NITROSTAT	23
NAMENDA TITRATION PAK	14	NEULASTA	33	NIVA THYROID.....	43
NAMENDA XR ORAL CAPSULE		NEUPRO.....	18	NIVA-PLUS.....	35
EXTENDED RELEASE 24 HOUR		NEURONTIN	13	NIVESTYM	33
14 MG, 21 MG, 28 MG, 7 MG	14	NEVANAC	47	NOC DURNA SUBLINGUAL	
NAPROSYN.....	10	NEXIUM ORAL CAPSULE		TABLET SUBLINGUAL 27.7 MCG,	
naproxen dr	10	DELAYED RELEASE.....	36	55.3 MCG.....	42
naproxen oral tablet.....	10	NEXIUM ORAL PACKET	36	nora-be.....	40
naproxen oral tablet delayed		NEXLETOL	22	NORDITROPIN FLEXPRO	42
release	10	NEXLIZET	22	norelgestromin-eth estradiol	41
naproxen sodium oral tablet		NEXTSTELLIS.....	40	norethin ace-eth estrad-fe oral	
275 mg, 550 mg.....	10	NGENLA.....	42	tablet.....	41
naratriptan hcl	16	niacin er (antihyperlipidemic)	22	norethin ace-eth estrad-fe oral	
NARCAN.....	11	NICODERM CQ	11	tablet chewable.....	41
NASCOBAL.....	34	NICORETTE MINI.....	11	norethindron-ethinyl estrad-fe	
NATAZIA	40	NICORETTE MOUTH/THROAT		oral tablet 1-20/1-30/	
nateglinide.....	33	GUM	11	1-35 mg-mcg.....	41
NATESTO.....	43	NICORETTE MOUTH/THROAT		norethindrone acet-ethinyl est ...	41
NAYZILAM	13	LOZENGE	11	norethindrone acetate oral	41
		NICORETTE STARTER KIT	11	norethindrone oral	41
		nicotine mini.....	10, 11	norethindrone-eth estradiol	41
		nicotine polacrilex mini.....	11		



norgestimate-eth estradiol oral tablet 0.25-35 mg-mcg	41	olopatadine hcl ophthalmic solution 0.1 %	47
norgestimate-ethinyl estradiol triphasic	41	olopatadine hcl ophthalmic solution 0.2 %	47
NORITATE	28	OLUMIANT	44
NORLIQVA	23	OMECLAMOX-PAK	36
norlyroc	41	omega-3-acid ethyl esters	23
NORPRAMIN	15	omeprazole oral capsule delayed release	36
nortrel 0.5/35 (28)	41	OMNIPOD 5 DEXCOM INTRO KIT	31
nortrel 1/35 (21)	41	OMNIPOD 5 DEXCOM PODS	31
nortrel 1/35 (28)	41	OMNIPOD 5 G7 INTRO (GEN 5) KIT	31
nortrel 7/7/7	41	OMNIPOD 5 G7 PODS (GEN 5)	31
nortriptyline hcl oral capsule	15	OMNIPOD 5 LIBRE INTRO KIT	31
NORVASC	23	OMNIPOD 5 LIBRE PODS	31
NOVAREL	45	OMNITROPE	42
NOVOEIGHT	34	OMVOH SUBCUTANEOUS	44
NOVOFINE AUTOCOVER PEN NEEDLE 30G X 8 MM	31	ondansetron hcl oral	15
NOVOFINE PEN NEEDLE	31	ondansetron odt oral tablet dispersible 16 mg	15
NOVOFINE PLUS PEN NEEDLE	31	ondansetron odt oral tablet dispersible 4 mg, 8 mg	15
NOVOLIN 70/30 FLEXPEN	32	ONE VITE WOMENS	35
NOVOLIN 70/30 FLEXPEN RELION	32	ONE VITE WOMENS PLUS	35
NOVOLIN 70/30 RELION	32	ONETOUCH ULTRA 2 KIT W/ DEVICE	31
NOVOLIN 70/30 VIAL	32	ONETOUCH ULTRA BLUE TEST	31
NOVOLIN N FLEXPEN	32	ONETOUCH ULTRA TEST STRIPS	31
NOVOLIN N FLEXPEN RELION	32	ONETOUCH VERIO FLEX SYSTEM KIT	31
NOVOLIN N RELION	32	ONETOUCH VERIO IQ SYSTEM KIT W/DEVICE	31
NOVOLIN N VIAL	32	ONETOUCH VERIO KIT W/DEVICE	31
NOVOLIN R FLEXPEN	32	ONETOUCH VERIO REFLECT KIT W/DEVICE	31
NOVOLIN R FLEXPEN RELION	32	ONETOUCH VERIO TEST STRIPS	31
NOVOLIN R RELION	32	ONEXTON	28
NOVOLIN R VIAL	32	ONFI	13
NOVOLOG FLEXPEN	32	ONGLYZA	33
NOVOLOG FLEXPEN RELION	32		
NOVOLOG RELION	32		
NOVOLOG U-100 VIAL	32		
NOVOPEN ECHO	31		
NOXAFIL ORAL TABLET DELAYED RELEASE	16		
np thyroid	43		
NUBEQA	17		
NUCALA	50		
NUCYNTA	9		
NUCYNTA ER	9		
NUEDEXTA	25		
NULEV	37		
NURTEC	16		
NUVARING	41		
NUVESSA	12		
NUVIGIL	52		
NUWIQ	34		
NUZYRA ORAL	12		
nyamyc	16		
nylia 1/35	41		
nylia 7/7/7	41		
nymyo oral tablet 0.25-35 mg-mcg	41		
nystatin external	16		
nystatin mouth/throat	16		
nystatin oral	16		
nystatin-triamcinolone	16		
nystop	16		
NYVEPRIA	34		
O			
ocella	41		
OCUFLOX	47		
ODACTRA	49		
ODEFSEY	19		
ODOMZO	17		
OFEV	51		
ofloxacin ophthalmic	47		
ofloxacin otic	48		
olanzapine oral	19		
olmesartan medoxomil oral	23		
olmesartan medoxomil-hctz	23		
olmesartan-amlodipine-hctz	23		
olopatadine hcl nasal	49		



ONYDA XR.....	25	2.5-300 MG, 5-300 MG,	permethrin external.....	18
OPSUMIT.....	51	7.5-300 MG.....	perphenazine oral.....	15
OPVEE.....	11	oxycodone-acetaminophen oral	PERTZYE.....	37
OPZELURA.....	28	tablet 10-325 mg, 2.5-325 mg,	PFIZER COVID-19 VAC-TRIS	
ORACEA.....	28	5-325 mg, 7.5-325 mg.....	5-11Y.....	45
ORACIT.....	35	OXYCONTIN.....	PFIZER COVID-19 VAC-TRIS	
ORAL CITRATE.....	35	OZEMPIC.....	6M-4Y.....	45
ORALONE.....	26		phenazo oral tablet 200 mg.....	37
ORENCIA CLICKJECT.....	44	P	phenazopyridine hcl oral tablet	
ORENCIA SUBCUTANEOUS.....	44	PACERONE ORAL TABLET	100 mg, 200 mg.....	37
ORFADIN ORAL CAPSULE.....	37	100 MG, 400 MG.....	phenobarbital oral tablet.....	14
ORFADIN ORAL SUSPENSION.....	37	PACERONE ORAL TABLET	phenytek.....	14
ORGOVYX.....	18	200 MG.....	phenytoin sodium extended.....	14
ORIAHNN.....	42	paliperidone er.....	PHEXXI.....	41
ORLISSA.....	42	PAMELOR.....	philith.....	41
orphenadrine citrate er.....	52	PANCREAZE.....	PHOSPHA 250 NEUTRAL.....	35
OSCIMIN.....	37	PANRETIN.....	phospho-trin 250 neutral.....	35
oseltamivir phosphate oral.....	19	pantoprazole sodium oral tablet	phosphorous.....	35
OSPHENA.....	34	delayed release.....	pilocarpine hcl oral.....	26
OTEZLA.....	44	PARLODEL ORAL TABLET.....	pimecrolimus.....	28
OTREXUP.....	44	paroxetine hcl er.....	pimtreea.....	41
OVACE PLUS WASH EXTERNAL		paroxetine hcl oral tablet.....	pioglitazone hcl.....	33
LIQUID.....	28	PATANASE NASAL SOLUTION	pioglitazone hcl-metformin hcl... 33	
OVACE WASH.....	28	0.6 %.....	PIQRAY.....	18
OVIDREL.....	45	PAXIL.....	pirfenidone.....	51
oxaprozin oral tablet.....	10	PAXIL CR.....	piroxicam oral.....	10
oxcarbazepine.....	13	PAXLOVID.....	pitavastatin calcium.....	23
oxcarbazepine er.....	13	PEDIAPRED.....	PLAQUENIL.....	18
oxybutynin chloride er.....	37	peg 3350-kcl-na bicarb-nacl.....	PLAVIX.....	18
oxybutynin chloride oral.....	37	peg-3350/electrolytes.....	PLEGRIDY.....	25
OXYCODONE HCL ER ORAL		peg-3350/electrolytes/ascorbat . 37	PLENVU.....	37
TABLET ER 12 HOUR ABUSE-		peg-kcl-nacl-nasulf-na asc-c 37	PLEXION CLEANSER.....	28
DETERRENT 10 MG, 20 MG,		penicillin v potassium.....	pnv 27-ca/fe/fa.....	35
40 MG, 80 MG.....	9	pentoxifylline er.....	podofilox external solution.....	28
oxycodone hcl oral capsule.....	9	PEPCID.....	POKONZA.....	35
oxycodone hcl oral solution.....	9	perampanel.....	POLY-VI-FLOR ORAL TABLET	
oxycodone hcl oral tablet 10 mg,		PERCOCET.....	CHEWABLE.....	35
15 mg, 20 mg, 30 mg, 5 mg.....	9	PERFOROMIST.....	POLYCIN.....	47
OXYCODONE-ACETAMINOPHEN		PERIDEX.....	polymyxin b-trimethoprim.....	47
ORAL TABLET 10-300 MG,		perigard.....	POMALYST.....	18



portia-28	41	PRENATOL-M.....	35	PROLENSA	47
posaconazole oral tablet delayed release	16	PRENATRIX	35	PROMACTA POWDER.....	34
potassium chloride crys er	35	PRENATRYL	35	PROMACTA TABLET	34
potassium chloride er	35	PREVACID.....	36	promethazine hcl oral solution....	15
potassium chloride oral	35	PREVACID SOLUTAB.....	36	promethazine hcl oral tablet.....	15
potassium citrate er	35	prevalite.....	23	promethazine hcl rectal.....	15
PRADAXA ORAL CAPSULE	13	PREVIDENT 5000 BOOSTER PLUS.....	26	promethazine-codeine.....	49
PRALUENT	23	PREVIDENT 5000 DRY MOUTH... 26		promethazine-dm	49
pramipexole dihydrochloride	18	PREVIDENT 5000 ENAMEL PROTECT.....	35	PROMETHEGAN	15
prasugrel hcl	18	PREVIDENT 5000 KIDS	26	PROMETRIUM	41
pravastatin sodium	23	PREVIDENT 5000 ORTHO DEFENSE.....	26	propafenone hcl	23
prazosin hcl oral	23	PREVIDENT 5000 PLUS	26	propafenone hcl er	23
PRED FORTE	47	PREVIDENT 5000 SENSITIVE	35	propranolol hcl er.....	23
PRED MILD.....	47	PREVIDENT DENTAL	26	propranolol hcl oral.....	23
prednisolone acetate ophthalmic.....	47	PREVNAR 20	45	propylthiouracil oral.....	43
PREDNISOLONE ACETATE P-F....	47	PREVYMIS ORAL TABLET	19	PROSCAR	38
prednisolone oral solution	42	PREZCOBIX	19	PROTONIX ORAL TABLET DELAYED RELEASE.....	36
prednisolone sodium phosphate oral solution 10 mg/5ml, 20 mg/5ml, 25 mg/5ml, 5 mg/5ml.....	42	primidone oral tablet 125 mg	14	PROVENTIL HFA INHALATION AEROSOL SOLUTION 108 (90 BASE) MCG/ACT.....	51
prednisolone sodium phosphate oral solution 15 mg/5ml	42	primidone oral tablet 250 mg, 50 mg	14	PROVERA.....	39, 41
prednisone oral	42	PRIORIX.....	45	PROVIGIL	52
pregabalin oral capsule.....	25	PRISTIQ.....	15	PROZAC.....	15
PREGNYL.....	45	probenecid.....	16	prucalopride succinate.....	37
PREMARIN ORAL	41	PROCARDIA XL	23	pseudoephedrine-bromphen-dm	49
PREMARIN VAGINAL	41	PROCHAMBER VHC.....	50	PULMICORT SUSPENSION.....	51
premium lidocaine.....	9	prochlorperazine maleate oral....	15	PULMOSAL.....	49
PREMPHASE	41	PROCORT	46	PULMOZYME.....	51
PREMPRO	41	procto-med hc.....	46	PYLERA.....	36
prenatal oral tablet 27-0.8 mg	35	PROCTOCORT EXTERNAL	46	PYRIDIDIUM.....	37
prenatal oral tablet 27-1 mg.....	35	PROCTOCORT RECTAL.....	46	pyridostigmine bromide oral tablet 30 mg	17
prenatal plus.....	35	PROCTOFOAM HC.....	46	pyridostigmine bromide oral tablet 60 mg	17
prenatal plus vitamin/mineral....	35	PROCTOSOL HC	46		
prenatal vitamins oral tablet 27-0.8 mg	35	PROCTOZONE-HC.....	46		
PRENATE MINI.....	35	progesterone intramuscular	41		
		progesterone oral	41		
		PROGRAF ORAL CAPSULE.....	44		
		PROLATE ORAL TABLET.....	9		

Q

qc nicotine transdermal system ...	11
QELBREE	25



QUARTETTE ORAL TABLET 42-21-21-7 DAYS.....	41	RELEXII.....	25	rivelsa	41
QUESTRAN.....	23	RELPAK.....	16	rizatriptan.....	16
QUESTRAN LIGHT.....	23	RELTONE.....	37	ROBINUL ORAL TABLET 1 MG.....	37
quetiapine fumarate	19	REMERON.....	15	ROBINUL-FORTE ORAL TABLET 2 MG.....	37
quetiapine fumarate er.....	19	REMERON SOLTAB ORAL TABLET DISPERSIBLE 15 MG, 30 MG	15	ROCALTROL ORAL CAPSULE.....	46
QUFLORA PEDIATRIC.....	35	RENTHYROID	43	ROCKLATAN	48
QUILLICHEW ER.....	25	REVELA ORAL TABLET	38	roflumilast	51
QUILLIVANT XR	25	repaglinide.....	33	ropinirole hcl.....	18
QULIPTA	16	REPATHA	23	rosuvastatin calcium oral	23
QUVIVIQ.....	52	REPATHA PUSHTRONEX SYSTEM.....	23	rosyrah	41
QVAR REDIHALER	51	REPATHA SURECLICK	23	rowepra	14
R					
ra mini nicotine	11	RESTASIS.....	48	ROXICODONE	9
ra nicotine mouth/throat gum 4 mg.....	11	RESTASIS MULTIDOSE	48	ROZEREM	52
ra nicotine polacrilex	11	RESTORIL.....	52	ROZLYTREK	18
ra nicotine transdermal patch 24 hour 21 mg/24hr.....	11	RETACRIT	34	RUCONEST.....	44
rabeprazole sodium oral tablet delayed release	36	RETEVMO.....	18	RUKOBIA	19
RADICAVA ORS	25	RETIN-A.....	28	RYALTRIS.....	49
RADICAVA ORS STARTER KIT	25	REVATIO ORAL	51	RYBELSUS.....	33
RALDESY.....	15	REVLIMID.....	18	RYDAPT	18
raloxifene hcl	46	REXTOVY.....	11	RYTARY.....	18
ramelteon.....	52	REXULTI.....	19	RYTHMOL SR ORAL CAPSULE EXTENDED RELEASE 12 HOUR 225 MG, 325 MG, 425 MG.....	23
ramipril.....	23	REYVOW	16	ryvent	49
ranolazine er	23	REZDIFFRA.....	37	S	
RAPAFLO.....	38	RHOFADE	28	sacubitril-valsartan.....	23
RAPAMUNE ORAL TABLET 0.5 MG, 1 MG, 2 MG	44	RHOPRESSA.....	48	SAFYRAL	41
rasagiline mesylate oral	18	rifampin oral	17	SALAGEN	26
RASUVO.....	44	RINVOQ	44	SANTYL	28
reclipsen	41	risedronate sodium oral tablet 150 mg, 35 mg	46	SAPHRIS	19
RECOMBINATE	34	risedronate sodium oral tablet 30 mg, 5 mg.....	46	SAVELLA	25
RECOMBIVAX HB	45	RISPERDAL	19	saxagliptin hcl	33
RECTIV.....	23	risperidone.....	19	saxagliptin-metformin er	33
REGLAN.....	15	RITALIN	25	SCSEMBLIX	18
RELAFEN DS	10	RITALIN LA	25	scopolamine	15
		rivaroxaban	13	SEASONIQUE ORAL TABLET 0.15-0.03 & 0.01 MG.....	41
		rivastigmine.....	14		
		rivastigmine tartrate	14		



selenium sulfide external lotion ..	28	SLYND.....	41	STELARA SUBCUTANEOUS	
SENSIPAR	46	sm nicotine.....	11	SOLUTION PREFILLED SYRINGE ..	44
SEREVENT DISKUS	51	sm nicotine polacrilex	11	STENDRA.....	34
SEROQUEL.....	19	sm nicotine transdermal patch		STEQEYMA SUBCUTANEOUS	44
SEROQUEL XR	19	24 hour 14 mg/24hr, 21 mg/24hr,		STIOLTO RESPIMAT	51
SERTRALINE HCL ORAL		7 mg/24hr.....	11	STIVARGA.....	18
CAPSULE.....	15	SOANZ.....	23	STRATTERA ORAL CAPSULE	
sertraline hcl oral concentrate....	15	sod citrate-citric acid oral		10 MG, 100 MG, 18 MG, 25 MG,	
sertraline hcl oral tablet	15	solution 500-334 mg/5ml.....	35	40 MG, 60 MG, 80 MG	25
setlakin.....	41	sod fluoride-potassium nitrate ...	35	STRENSIQ.....	37
sevelamer carbonate oral tablet..	38	sodium chloride inhalation.....	49	STRIVERDI RESPIMAT	51
SEYSARA	12	sodium fluoride 5000 enamel	35	STROMECTOL	18
sf 5000 plus.....	26	sodium fluoride 5000 plus	26	SUBOXONE	11
sf gel 1.1%	26	sodium fluoride 5000 ppm	26	subvenite.....	14
SFROWASA.....	46	sodium fluoride 5000 sensitive...	35	SUCRAID.....	37
sharobel.....	41	sodium fluoride dental	26	sucrafate oral	36
SHINGRIX.....	45	sodium fluoride oral solution	35	SUFLAVE	37
sildenafil citrate oral tablet		sodium fluoride oral tablet		sulfacetamide sod-sulfur wash	
100 mg, 25 mg, 50 mg	34	chewable.....	35	external liquid 9-4 %.....	29
sildenafil citrate oral tablet		SODIUM OXYBATE.....	52	sulfacetamide sod-sulfur wash	
20 mg	51	sodium sulfacetamide wash	28	external liquid 9-4.5 %.....	29
SILENOR	52	SOFOSBUVIR-VELPATASVIR	19	sulfacetamide sodium (acne)	28
silodosin.....	38	solifenacin succinate	38	sulfacetamide sodium external...	28
SILVADENE.....	12	SOLIQUA.....	33	sulfacetamide sodium	
silver sulfadiazine external	12	SOMA.....	52	ophthalmic solution	47
simliya	41	SOOLANTRA.....	28	sulfacetamide sodium-sulfur	
simpesse	41	sotalol hcl oral	23	external liquid 10-2 %, 10-5 %,	
SIMPONI	44	SOTYKTU.....	44	9-4 %, 9.8-4.8 %	28
simvastatin oral tablet 10 mg,		SOVUNA.....	18	sulfacetamide sodium-sulfur	
20 mg, 40 mg, 5 mg.....	23	SPIKEVAX	45	external liquid 9-4.5 %.....	28
simvastatin oral tablet 80 mg.....	23	SPIRIVA HANDIHALER	51	sulfamethoxazole-trimethoprim	
SINEMET	18	SPIRIVA RESPIMAT	51	oral suspension 200-40 mg/5ml..	12
SINGULAIR ORAL PACKET	51	spironolactone oral tablet.....	23	sulfamethoxazole-trimethoprim	
SINGULAIR ORAL TABLET	51	spironolactone-hctz.....	23	oral tablet	12
SINGULAIR ORAL TABLET		SPORANOX	16	sulfasalazine oral	46
CHEWABLE.....	51	SPRAVATO.....	15	sulfatrim pediatric.....	12
sirolimus oral tablet	44	sprintec 28	41	sulindac oral	10
SITAVIG	19	SPRYCEL	18	SUMADAN WASH	29
SKYRIZI	44	sronyx.....	41	sumatriptan nasal	16
SKYTROFA	42	ssd.....	12	sumatriptan succinate oral.....	16



sumatriptan succinate subcutaneous solution auto- injector.....	16	tamoxifen citrate oral tablet 10 mg.....	18	temozolomide	18
SUNOSI	52	tamoxifen citrate oral tablet 20 mg	18	TEMPO REFILL.....	31
SUPREP BOWEL PREP KIT.....	37	tamsulosin hcl	38	TEMPO WELCOME.....	31
SUTAB	37	TANLOR	52	TENCON	9
syeda	41	TAPERDEX 12-DAY	42	TENIVAC	45
SYMBICORT.....	51	TAPERDEX 6-DAY ORAL TABLET THERAPY PACK 1.5 MG	42	tenofovir disoproxil fumarate.....	19
SYMFI	19	TAPERDEX 6-DAY ORAL TABLET THERAPY PACK 1.5 MG (21)	42	TENORETIC 100	23
SYMFI LO ORAL TABLET 400-300-300 MG.....	19	TAPERDEX 7-DAY	42	TENORETIC 50	23
SYMLINPEN 120	33	TARGADOX.....	12	TENORMIN.....	23
SYMLINPEN 60	33	tarina 24 fe.....	41	terazosin hcl	38
SYMPAZAN.....	14	tarina fe 1/20 eq	41	terbinafine hcl oral	16
SYMPROIC	37	TASIGNA	18	terconazole	16
SYNALAR.....	29	TAVALISSE	34	teriflunomide	25
SYNALAR EXTERNAL SOLUTION 0.01 %.....	29	tazarotene external cream.....	29	teriparatide solution pen- injector 560 mcg/2.24ml subcutaneous.....	46
SYNJARDY	33	TAZORAC EXTERNAL CREAM.....	29	TESTIM.....	43
SYNJARDY XR.....	33	taztia xt oral capsule extended release 24 hour 120 mg, 180 mg, 240 mg, 300 mg, 360 mg.....	23	TESTOSTERONE CYPIONATE INJECTION	43
SYNTHROID.....	43	TECFIDERA ORAL CAPSULE DELAYED RELEASE.....	25	testosterone cypionate intramuscular	43
T					
TABRECTA.....	18	TECHLITE INSULIN SYRINGES (Arkray).....	31	testosterone enanthate intramuscular	43
TACLONEX EXTERNAL OINTMENT 0.005-0.064 %.....	29	TECHLITE PEN NEEDLES (Arkray).....	31	testosterone gel 12.5 mg/act (1%) transdermal.....	43
TACLONEX EXTERNAL SUSPENSION	29	TECHLITE PLUS PEN NEEDLES (Arkray).....	31	testosterone gel 25 mg/2.5gm (1%) transdermal.....	43
tacrolimus external.....	29	TEGLUTIK.....	25	testosterone transdermal gel 10 mg/act (2%), 20.25 mg/ 1.25gm (1.62%), 40.5 mg/2.5gm (1.62%), 50 mg/5gm (1%).....	43
tacrolimus oral.....	44	TEGRETOL ORAL TABLET	14	testosterone transdermal gel 1.62 %.....	43
tadalafil (pah).....	51	TEGRETOL-XR.....	14	tetracycline hcl oral capsule	12
tadalafil oral.....	34	TEGSEDI SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 284 MG/1.5ML	37	TEZSPIRE SUBCUTANEOUS SOLUTION AUTO-INJECTOR	51
TADLIQ.....	51	TEKTURNA	23	THALITONE.....	23
tafluprost (pf).....	48	TEKTURNA HCT ORAL TABLET 300-12.5 MG, 300-25 MG.....	23	THRIVE.....	11
TAGRISSO.....	18	telmisartan.....	23	THYQUIDITY	43
TAKHZYRO SUBCUTANEOUS SOLUTION	44	telmisartan-hctz.....	23	thyroid oral.....	43
TALTZ SUBCUTANEOUS SOLUTION AUTO-INJECTOR	44	temazepam	52	tiadylt er.....	23
TAMIFLU	19			TIAZAC.....	23



ticagrelor.....	18	TOPICORT EXTERNAL CREAM 0.05 %, 0.25 %	29	tri-linyah.....	41
TIGLUTIK	25	topiramate er oral capsule extended release 24 hour	14	tri-lo-estarylla	41
TIKOSYN	23	topiramate oral capsule sprinkle..	14	tri-lo-marzia	41
tilia fe.....	41	topiramate oral tablet.....	14	tri-lo-mili	41
timolol hemihydrate.....	48	TOPROL XL.....	23	tri-lo-sprintec.....	41
timolol maleate (once-daily).....	48	torpenz.....	18	tri-mili	41
timolol maleate ocudose.....	48	TOSYMRA	16	tri-nymyo oral tablet 0.18/0.215/0.25 mg-35 mcg.....	41
timolol maleate ophthalmic.....	48	TOUJEO MAX SOLOSTAR	32	tri-sprintec.....	41
timolol maleate pf	48	TOUJEO SOLOSTAR	32	tri-vite/fluoride	35
TIMOPTIC OCUDOSE	48	TRACLEER	51	tri-vylibra.....	41
TIMOPTIC OPHTHALMIC SOLUTION 0.25 %, 0.5 %.....	48	TRADJENTA.....	33	tri-vylibra lo	41
TIMOPTIC-XE OPHTHALMIC GEL FORMING SOLUTION 0.25 %, 0.5 %.....	48	tramadol hcl (er biphasic) oral tablet extended release 24 hour...	9	triamcinolone acetonide external cream.....	29
tinidazole oral.....	12	tramadol hcl er.....	9	triamcinolone acetonide external lotion	29
tiotropium bromide monohydrate	51	tramadol hcl oral tablet 100 mg, 25 mg, 50 mg	9	triamcinolone acetonide external ointment 0.025 %, 0.1 %, 0.5 %.....	29
TIROSINT	43	tramadol hcl oral tablet 75 mg.....	9	triamcinolone acetonide external ointment 0.05 %.....	29
TIROSINT-SOL.....	43	tramadol-acetaminophen	9	triamcinolone acetonide mouth/ throat.....	26
TIVICAY	20	trandolapril	23	triamcinolone in absorbbase	29
tizanidine hcl oral	52	tranexamic acid oral.....	34	triamterene-hctz	23
TLANDO.....	43	TRANSDERM-SCOP TRANSDERMAL PATCH 72 HOUR 1 MG/3DAYS	15	TRIANEX EXTERNAL OINTMENT 0.05 %	29
TOBI PODHALER.....	51	TRAVATAN Z.....	48	triazolam	20
TOBRADEX OPHTHALMIC OINTMENT.....	47	travoprost (bak free)	48	TRIBENZOR.....	23
TOBRADEX OPHTHALMIC SUSPENSION 0.3-0.1 %.....	47	trazodone hcl oral	15	TRICARE ORAL TABLET	35
TOBRADEX ST	47	TRELEGY ELLIPTA.....	51	TRICOR.....	23
tobramycin ophthalmic	47	TREMFYA.....	44	triderm.....	29
tobramycin-dexamethasone.....	47	TRESIBA FLEXTOUCH.....	32	TRIDESILON EXTERNAL CREAM 0.05 %	29
TOLAK.....	29	tretinoin external cream	29	trihexyphenidyl hcl oral tablet	18
TOLSURA.....	16	tretinoin external gel 0.01 %, 0.025 %	29	TRIJARDY XR.....	33
tolterodine tartrate.....	38	tretinoin external gel 0.05 %	29	TRIKAFTA ORAL TABLET THERAPY PACK	51
tolterodine tartrate er.....	38	TREXALL.....	44	TRILEPTAL.....	14
tolvaptan oral tablet therapy pack.....	37	TREZIX	9	TRILIPIX ORAL CAPSULE DELAYED RELEASE 135 MG, 45 MG	23
TOPAMAX	14	tri-estarylla	41		
TOPAMAX SPRINKLE	14	tri-legest fe	41		
TOPICORT	29				

trimethoprim oral	12	TYVASO	51	valproic acid oral capsule	14	
TRINATAL RX 1	35	TYVASO DPI	51	valproic acid oral solution 250 mg/5ml.....	14	
TRINATE.....	35	U			VALSARTAN ORAL SOLUTION	23
TRINTELLIX.....	15	UBRELVY.....	16	valsartan oral tablet	23	
tritocin external ointment 0.05 % ..	29	UCERIS ORAL.....	46	valsartan-hydrochlorothiazide....	23	
TRIUMEQ.....	20	UDENYCA SUBCUTANEOUS SOLUTION AUTO-INJECTOR	34	VALTOCO	14	
trivora (28).....	41	ULORIC	16	VALTRESX	20	
TROKENDI XR.....	14	UMECLIDINIUM-VILANTEROL ...	51	valtya 1/50	42	
tropium chloride.....	38	UNDECATREX.....	43	VANADOM ORAL TABLET 350 MG.....	52	
tropium chloride er.....	38	unithroid	43	VANCOGIN.....	12	
TRUE FOCUS BLOOD GLUCOSE STRIP.....	31	urea external cream 20 %, 40 %, 41 %, 45 %	29	vancomycin hcl oral capsule	12	
TRUE METRIX AIR GLUCOSE METER KIT	31	urea external cream 39 %, 47 % ...	29	VANDAZOLE	12	
TRUE METRIX BLOOD GLUCOSE TEST.....	31	UREA EXTERNAL CREAM 39.5 % ..	29	VANOS	29	
TRUE METRIX GO GLUCOSE METER.....	31	uredeb	29	VANRAFIA.....	38	
TRUE METRIX METER	31	UREMEZ-40	29	VAQTA	45	
TRUE METRIX PRO BLOOD GLUCOSE	31	URESOL	29	vardenafil hcl oral tablet	34	
TRULANCE.....	37	UROCIT-K 10.....	35	varenicline	11	
TRULICITY	33	UROCIT-K 15.....	35	VARIVAX	45	
TRUQAP ORAL TABLET.....	18	UROCIT-K 5 ORAL TABLET EXTENDED RELEASE 5 MEQ (540 MG).....	35	VASCEPA	23	
TRUVADA ORAL TABLET 100-150 MG, 133-200 MG, 167-250 MG	20	UROXATRAL	38	VASERETIC.....	23	
TRUVADA ORAL TABLET 200-300 MG	20	URSO 250 ORAL TABLET 250 MG.	37	VASOTEC.....	23	
turqoz	41	URSO FORTE.....	37	velivet	42	
TWIIST REFILL KIT.....	31	URSODIOL ORAL CAPSULE 200 MG, 400 MG.....	37	VELPHORO.....	38	
TWIIST REFILL KIT/INFUSION SET	31	ursodiol oral capsule 300 mg	37	VELTASSA	35	
TWIIST STARTER KIT	31	ursodiol oral tablet	37	VEMLIDY	20	
TWINRIX	45	USTEKINUMAB SUBCUTANEOUS SOLUTION PREFILLED SYRINGE.	44	VENCLEXTA.....	18	
TWIRLA	41	V			venlafaxine hcl.....	15
TYBLUME	41	VAGIFEM.....	42	venlafaxine hcl er oral capsule extended release 24 hour	15	
tydemy oral tablet 3-0.03-0.451 mg.....	42	valacyclovir hcl oral.....	20	venlafaxine hcl er oral tablet extended release 24 hour	15	
TYMLOS.....	46	VALCYTE ORAL TABLET.....	20	VENTOLIN HFA	51	
TYRVAYA	48	valganciclovir hcl oral tablet	20	VEOZAH.....	25	
		VALIUM	20	verapamil hcl er.....	24	
				verapamil hcl oral.....	24	
				VERELAN.....	24	



VERELAN PM ORAL CAPSULE EXTENDED RELEASE 24 HOUR 100 MG, 200 MG, 300 MG	24	volnea	42	WINLEVI	29
VERKAZIA	48	VOQUEZNA	36	wixela inhub	51
VERQUVO	24	VOQUEZNA DUAL PAK	36	X	
VERZENIO	18	VOQUEZNA TRIPLE PAK	36	XACIATO	12
VESICARE	38	voriconazole oral tablet	16	XALATAN	48
vestura	42	VORTEX HOLD CHMBR/MASK/ CHILD DEVICE	51	XANAX	20
VEVYE	48	VORTEX HOLD CHMBR/MASK/ TODDLER DEVICE	51	XANAX XR	20
VFEND ORAL TABLET 200 MG	16	VORTEX VALVE CHAMBER-PEDI MASK	51	xarah fe	42
VFEND ORAL TABLET 50 MG	16	VORTEX VALVED HOLDING CHAMBER	51	XARELTO	13
VIAGRA	34	VOSEVI	20	XCOPRI ORAL TABLET 100 MG, 150 MG, 200 MG, 25 MG, 50 MG	14
VIBERZI	37	VOYDEYA	34	XDEMVY	47
VIBRAMYCIN ORAL CAPSULE 100 MG	12	VRAYLAR	19	XELJANZ	44
VIBRAMYCIN ORAL SUSPENSION RECONSTITUTED 25 MG/5ML	12	VTAMA	29	XELJANZ XR	44
vienva	42	VUMERITY	25	XELODA	18
VIGAMOX	47	vyfemla	42	XENLETA ORAL TABLET 600 MG	12
VIIBRYD	15	VYLEESI	34	XHANCE	49
vilazodone hcl	15	vylibra	42	XIFAXAN ORAL TABLET 200 MG	12
VIMPAT ORAL	14	VYNDAMAX	37	XIFAXAN ORAL TABLET 550 MG	12
viorele	42	VYNDAQEL	24, 37	XIGDUO XR	33
VIREAD ORAL TABLET 150 MG, 200 MG, 250 MG	20	VYTORIN	24	XIIDRA	48
VIREAD ORAL TABLET 300 MG	20	VYVANSE	25	XOFLUZA (40 MG DOSE)	20
VISTARIL ORAL CAPSULE 25 MG	20	VYZULTA	48	XOFLUZA (80 MG DOSE)	20
VITAFOL FE+	35	W		XOLAIR	51
VITAFOL ULTRA	35	WAINUA	15	XOPENEX HFA	51
VITAFOL-OB	35	WAKIX	52	XTAMPZA ER	10
vitamin d (ergocalciferol) oral capsule 1.25 mg (50000 ut), 50000 unit	35	warfarin sodium oral	13	XTANDI	18
VITATHELY WITH GINGER	35	WELCHOL ORAL TABLET	24	xulane	42
VITRAKVI	18	WELLBUTRIN SR	15	xurea	29
VIVELLE-DOT	42	WELLBUTRIN XL	15	XYOSTED	43
VIVJOA	16	wera	42	XYWAV	52
VIVOTIF	45	wes-phos 250 neutral	35	Y	
VOGELXO	43	WESTAB PLUS	35	YASMIN 28	42
VOGELXO PUMP	43	WEZLANA	44	YAZ	42
		WILATE	34	YESINTEK SUBCUTANEOUS	44
				YORVIPATH	46
				YUPELRI	51



yuvaferm.....	42	ZITHROMAX	12
		ZOCOR	24
Z			
zafemy	42	ZOLMITRIPTAN NASAL SOLUTION 2.5 MG.....	16
zafirlukast.....	51	zolmitriptan nasal solution 5 mg..	16
zaleplon	52	zolmitriptan oral	17
ZANAFLEX	52	ZOLOFT	15
ZANAFLEX ORAL CAPSULE 2 MG, 4 MG, 6 MG	52	zolpidem tartrate er	52
ZARONTIN	14	zolpidem tartrate oral tablet.....	52
ZARXIO.....	34	ZOMIG NASAL SOLUTION 2.5 MG.....	17
ZAVZPRET.....	16	ZOMIG NASAL SOLUTION 5 MG ..	17
ZEBUTAL ORAL CAPSULE 50-325-40 MG	10	ZOMIG ORAL TABLET 5 MG.....	17
ZEGALOGUE SUBCUTANEOUS SOLUTION AUTO-INJECTOR	33	ZONEGRAN	14
ZEJULA	18	zonisamide oral	14
ZELBORAF	18	ZORTRESS.....	44
ZEMBRACE SYMTOUCH.....	16	ZORYVE EXTERNAL CREAM	29
zenatane	29	ZORYVE EXTERNAL FOAM	29
ZENPEP.....	37	zovia 1/35 (28)	42
ZENZEDI	25	ZOVIRAX EXTERNAL OINTMENT .	20
ZEPOSIA	25	ZTLIDO.....	10
ZESTORETIC.....	24	ZUBSOLV.....	11
ZESTRIL ORAL TABLET 2.5 MG, 30 MG, 40 MG.....	24	zumandimine	42
ZESTRIL TABLET 10 MG ORAL	24	ZURZUVAE	15
ZESTRIL TABLET 20 MG ORAL	24	ZYCLARA.....	29
ZESTRIL TABLET 5 MG ORAL	24	ZYCLARA PUMP	29
ZETIA.....	24	ZYLET	47
ZETONNA NASAL AEROSOL SOLUTION 37 MCG/ACT	49	ZYLOPRIM ORAL TABLET 100 MG, 300 MG	16
ZIAC ORAL TABLET 10-6.25 MG, 2.5-6.25 MG	24	ZYPREXA ORAL.....	19
ZIAC ORAL TABLET 5-6.25 MG ...	24	ZYPREXA ZYDIS ORAL TABLET DISPERSIBLE 10 MG, 15 MG, 20 MG, 5 MG	19
ZILBRYSQ.....	17	ZYTIGA.....	18
ZILXI	29	ZYVOX ORAL TABLET	12
ZIMHI	11		
ZIOPTAN	48		
ziprasidone hcl.....	19		



ATTENTION: Free language assistance services and free communications in other formats, such as large print, are available to you. Call the toll-free number on your member identification card. (TTY 711).

ማሳሰቢያ:- አማርኛ (Amharic) የሚናገሩ ከሆነ፣ ነፃ የቋንቋ እገዛ አገልግሎቶች እና ነፃ ተግባሮች እንደ ትልቅ እትም ባሉ ሌሎች ቅርፀቶች ለእርስዎ ይገኛሉ። በአባልነት መታወቂያ ካርድዎ ላይ ያለውን ነፃ የስልክ ቁጥር ይደውሉ።

ملاحظة: إذا كنت تتحدث اللغة العربية (Arabic)، ستتوفر لك خدمات المساعدة اللغوية المجانية والمراسلات المجانية بتنسيقات أخرى، مثل الطباعة بأحرف كبيرة. اتصل بالرقم المجاني المدون على بطاقة تعريف العضو خاصتك.

দেখুন: আপনি যদি **বাংলায় (Bengali-Bangala)** কথা বলেন, তাহলে বিনামূল্যে ভাষা সহায়তা পরিষেবা এবং বড় মুদ্রণের মতো অন্যান্য ফরম্যাটে যোগাযোগগুলি আপনার জন্য বিনামূল্যে উপলব্ধ। আপনার সদস্যের পরিচয়পত্রের কার্ডের টোল-ফ্রি নম্বরে কল করুন

ចំណាំ: ប្រសិនបើអ្នកនិយាយភាសាខ្មែរ (Cambodian-Mon-Khmer) សេវាជំនួយភាសាភាគតិចថ្លៃ និងការទំនាក់ទំនងភាគតិចថ្លៃក្នុងទម្រង់ផ្សេងទៀត ដូចជាពុម្ពអក្សរធំ មានសម្រាប់អ្នក។ ចូរសព្វថ្ងៃលេខភាគតិចថ្លៃនៅលើប័ណ្ណសម្គាល់សមាជិករបស់អ្នក។

請注意： 如果您說中文 (Chinese - Traditional), 您可以獲得免費語言協助服務和大字體等其他格式的免費通訊。請致電您的會員身份卡上的免付費電話號碼。

ATTENTION : Si vous parlez français (French), des services d'assistance linguistique et des communications dans d'autres formats, notamment en gros caractères, sont mis à votre disposition gratuitement. Appelez le numéro gratuit figurant sur votre carte de membre.

ATANSYON: Si w pale Kreyòl Ayisyen (Haitian Creole), gen sèvis lang gratis ak kominikasyon nan lòt fòm lo disponib, tankou sa ki enprime ak gwo lèt. Rele nimewo gratis ki sou kat idantifikasyon manm ou an.

ACHTUNG: Falls Sie Deutsch (German) sprechen, stehen Ihnen kostenlose Sprachassistentendienste und kostenlose Kommunikation in anderen Formaten, wie zum Beispiel große Schrift, zur Verfügung. Rufen Sie die gebührenfreie Nummer auf Ihrer Mitgliedskarte an.

ΠΡΟΣΟΧΗ: Εάν μιλάτε ελληνικά (Greek), υπάρχουν διαθέσιμες δωρεάν υπηρεσίες γλωσσικής βοήθειας και δωρεάν επικοινωνία σε άλλες μορφοποιήσεις, όπως μεγάλα γράμματα. Καλέστε τον αριθμό χωρίς χρέωση στην κάρτα μέλους σας.

ध्यान आपो: જો તમે ગુજરાતી (Gujarati) બોલતા હો તો વિના મૂલ્યે ભાષાકીય મદદરૂપ સેવાઓ અને અન્ય ફોર્મેટમાં વિના મૂલ્યે સંચાર, જેમ કે મોટી પ્રિન્ટ, તમારા માટે ઉપલબ્ધ છે. તમારા સભ્ય ઓળખ કાર્ડ પરના ટોલ-ફ્રી નંબર પર કોલ કરો.

ध्यान दें: यदि आप हिंदी (Hindi) बोलते हैं, तो आपके लिए मुफ्त भाषा सहायता सेवाएँ और अन्य प्रारूपों में मुफ्त संचार, जैसे कि बड़े प्रिंट, उपलब्ध हैं। अपने सदस्य पहचान पत्र पर दिए गए टोल-फ्री नंबर पर कॉल करें।

LUS TSEEM CEEB: Yog tias koj hais lus Hmoob (Hmong), muaj cov kev pab cuam txhais lus thiab muaj kev sib txuas lus pab dawb ua lwm hom ntawv, xws li luam ua ntawv loj rau koj. Thov hu rau tus xov tooj hu dawb ntawm koj daim npav ID.

ATENSIÓN: No agsasaoka iti Ilocano (Ilocano), magun-odmo dagiti libre a serbisio ti tulong iti pagsasao ken libre a komunikasion iti dadduma a pormat, kas iti dadakkel a letra. Tawagan ti awan-bayadna a numero a masarakan iti kard a pakabigbigam kas miembro.

ATTENZIONE: se parla italiano (Italian), può usufruire di servizi di assistenza linguistica gratuiti e comunicazioni gratuite in altri formati, come ad esempio la stampa a caratteri grandi. Chiami il numero verde riportato sul Suo tesserino identificativo.

注意事項：日本語 (Japanese) を話される場合、無料の言語支援サービスや、拡大文字などの形式での無料のコミュニケーションをご利用いただけます。会員証に記載されているフリーダイヤルにお電話ください。

알림 사항: 한국어(Korean)를 사용하시는 경우 무료 언어 지원 서비스와 대형 활자체 등 다른 형식으로 된 의사 소통 매체를 이용하실 수 있습니다. 회원 ID 카드에 나와 있는 무료 전화번호로 전화해 주십시오.

ໝາຍເຫດ: ຖ້າຫາກທ່ານເວົ້າພາສາລາວ (Lao), ທ່ານສາມາດໃຊ້ບໍລິການຊ່ວຍເຫຼືອດ້ານພາສາພາສີ ແລະ ການສື່ສານໃນຮູບແບບອື່ນໆພາສີ, ເຊັ່ນ: ການພິມຕົວອັກສອນຂະໜາດໃຫຍ່. ໂທຫາເບີໂທພາສີຢູ່ທີ່ບັດປະຈຳຕົວສະມາຊິກຂອງທ່ານ.

ध्यान दिनुहोस्: यदि तपाईंले नेपाली (Nepali) बोल्नुहुन्छ भने, निःशुल्क भाषा सहायता सेवाहरू र अन्य ढाँचाहरूमा निःशुल्क संचारहरू, जस्तै ठूलो छाप, तपाईंका लागि उपलब्ध छन्। आफ्नो सदस्य पहिचान कार्डमा रहेको टोल फ्री नम्बरमा कल गर्नुहोस्।

توجه: اگر به زبان فارسی (Persian-Farsi) صحبت می‌کنید، خدمات رایگان کمک زبانی و ارتباطات رایگان در قالب‌های دیگر، مانند چاپ بزرگ، در دسترس شما هستند. با شماره رایگان مندرج روی کارت شناسایی عضویتان تماس بگیرید.

UWAGA: Dla osób mówiących po **polsku (Polish)** dostępne są bezpłatne usługi pomocy językowej i bezpłatne komunikaty w innych formatach, takich jak duży druk. Prosimy zadzwonić pod bezpłatny numer podany na karcie identyfikacyjnej.

ATENÇÃO: se você fala **português (Portuguese)**, tem à sua disposição serviços gratuitos de assistência linguística e comunicações gratuitas em outros formatos, como caracteres grandes. Ligue para o número gratuito que se encontra no seu cartão de identificação de membro.

ਧਿਆਨ ਦਿਓ: ਜੇ ਤੁਸੀਂ **ਪੰਜਾਬੀ (Punjabi)** ਬੋਲਦੇ ਹੋ, ਤਾਂ ਤੁਹਾਡੇ ਲਈ ਮੁਫਤ ਭਾਸ਼ਾ ਸਹਾਇਤਾ ਸੇਵਾਵਾਂ ਅਤੇ ਹੋਰ ਫਾਰਮੈਟਾਂ, ਜਿਵੇਂ ਕਿ ਵੱਡੇ ਪ੍ਰਿੰਟ, ਵਿੱਚ ਮੁਫਤ ਸੰਚਾਰ ਉਪਲਬਧ ਹਨ। ਆਪਣੇ ਮੈਂਬਰ ਪਛਾਣ ਕਾਰਡ 'ਤੇ ਟੋਲ-ਫ੍ਰੀ ਨੰਬਰ 'ਤੇ ਕਾਲ ਕਰੋ।

ВНИМАНИЕ! Если вы говорите на **русском языке (Russian)**, вам доступны бесплатные услуги языковой поддержки и бесплатные материалы в других форматах, например напечатанные крупным шрифтом. Звоните по бесплатному номеру телефона, указанному на вашей идентификационной карте участника.

ATENCIÓN: Si habla **español (Spanish)**, hay servicios de asistencia de idiomas y comunicaciones en otros formatos como letra grande, sin cargo, a su disposición. Llame al número gratuito que figura en su tarjeta de identificación de miembro. (TTY 711).

PAUNAWA: Kung nagsasalita ka ng **Tagalog (Tagalog)**, may makukuha kang mga libreng serbisyo ng tulong sa wika at libreng komunikasyon sa ibang mga format, tulad ng malalaking print. Tawagan ang walang bayad na numero na nasa iyong ID card ng miyembro.

โปรดทราบ หากคุณพูดภาษาไทย (Thai) ได้

คุณสามารถใช้บริการช่วยเหลือด้านภาษาฟรีและการสื่อสารในรูปแบบอื่น ๆ ฟรี เช่น

การพิมพ์ด้วยตัวอักษรขนาดใหญ่ โทรไปยังหมายเลขโทรฟรีสำหรับสมาชิกตามบัตรประจำตัวของคุณ

ЗВЕРНІТЬ УВАГУ! Якщо ви розмовляєте **українською (Ukrainian)**, ви можете безоплатно користуватися послугами мовної підтримки, а також безоплатно отримувати інформаційні матеріали в інших форматах, як от набрані великим шрифтом. Телефонуйте на безкоштовний номер телефону, зазначений на вашій ідентифікаційній картці учасника.

توجہ دیں: اگر آپ اردو (Urdu) زبان بولتے ہیں تو زبان کی معاون خدمات اور دیگر فارمیٹس میں مواصلات، جیسے بڑے پرنٹ، آپ کے لیے مفت دستیاب ہیں۔ اپنے ممبر شناختی کارڈ پر دیئے گئے ٹول فری نمبر پر کال کریں۔

LƯU Ý: Nếu quý vị nói **Tiếng Việt (Vietnamese)**, quý vị sẽ được cung cấp các dịch vụ hỗ trợ ngôn ngữ miễn phí và các phương tiện trao đổi liên lạc miễn phí ở các định dạng khác, chẳng hạn như bản in chữ lớn. Gọi đến số điện thoại miễn phí có trên thẻ định danh thành viên của quý vị.

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