



# Your 2026 Prescription Drug List

## Louisiana Traditional 3-Tier

Effective September 1, 2026



**United  
Healthcare**

This Prescription Drug List (PDL) is accurate as of September 1, 2026 and is subject to change after this date. This PDL is a list of the most commonly prescribed medications and applies to members of our fully insured UnitedHealthcare and Student Resources medical plans with corporate offices located in Louisiana with a pharmacy benefit subject to the Traditional 3-Tier PDL. Your estimated coverage and copayment/coinsurance may vary based on the benefit plan you choose and when your plan renews.

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# 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 5 for more information.

## When does the PDL change?

- Medications may move to a lower tier at any time.
- Medications may move to a higher tier or be excluded from coverage most often upon your group's renewal.

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) 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. 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.**

# 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.

# 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	\$ <b>Lower-cost</b> 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.
Tier 2	\$\$ <b>Mid-range cost</b> Medications that provide good overall value. A mix of brand-name and generic drugs.	Use Tier 2 drugs, instead of Tier 3, to help lower your out-of-pocket costs.
Tier 3	\$\$\$ <b>Highest-cost</b> Medications that provide the lowest overall value. Mostly brand-name drugs, as well as some generics.	Ask your doctor if a Tier 1 or Tier 2 option could work for you.

## 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 (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.

<b>E</b>	<b>May be excluded from coverage</b> – There may be over-the-counter (OTC) or lower-cost covered options available.
<b>H</b>	<b>Health Care Reform Preventive</b> – This medication is part of a health care reform preventive benefit and is generally available at no cost to you.
<b>H-PA</b>	<b>Health Care Reform Preventive with prior authorization</b> – May be part of health care reform preventive benefit and available at no cost to you if prior authorization criteria are met.
<b>PA</b>	<b>Prior authorization (sometimes referred to as precertification)</b> <sup>1</sup> – Requires your doctor to provide information about why you are taking a medication before your plan can decide how it may be covered.
<b>QL</b>	<b>Quantity limits</b> – The largest quantity of medication covered per copayment or in a defined period of time.
<b>RS</b>	<b>Refill and Save Program</b> <sup>2</sup> – Save money on your copayment when you refill your prescription on time as prescribed. Program eligibility may vary.
<b>SP</b>	<b>Specialty medication</b> – 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.
<b>ST</b>	<b>Step therapy</b> <sup>3</sup> – Requires prior authorization and may require you to try one or more other medications before the medication you are requesting may be covered.

## 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. Please review your plan documents for coverage and cost-share.

- **Central nervous system: sedatives/hypnotics**  
Coverage is set by your prescription drug benefit plan.
- **Diabetes: blood glucose monitoring, insulin, non-insulin**  
Coverage is set by your prescription drug benefit plan.
- **Diabetes: continuous glucose monitors, sensors**  
Coverage is set by your prescription drug benefit plan. 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 benefit plan.

1. For certain Student Resources plans, applies to specialty medications and topical retinoids only.

2. Not applicable to Student Resources plans.

3. Not applicable to certain Student Resources plans.



## Reading your PDL (continued)

- **Infertility**

Coverage is set by your prescription drug benefit plan. Prior authorization (sometimes referred to as precertification) may be required where a state mandates infertility drug coverage.

- **Medications for sexual dysfunction**

Coverage is set by your prescription drug benefit plan.

- **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
<b>Analgesics - Drugs for pain</b>		
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
buprenorphine	1	PA, QL
butalbital-acetaminophen oral tablet 50-325 mg	1	
butalbital-apap-caff-cod oral capsule 50-325-40-30 mg	1	QL
butalbital-apap-caffeine	1	QL
butalbital-asa-caff-codeine	1	QL
butalbital-aspirin-caffeine	1	
butorphanol tartrate nasal	1	QL
endocet	1	QL
fentanyl transdermal patch 72 hour 100 mcg/hr, 12 mcg/hr, 25 mcg/hr, 50 mcg/hr, 75 mcg/hr	1	PA, QL
glydo	1	
hydrocodone-acetaminophen oral solution 10-300 mg/15ml, 10-325 mg/15ml, 7.5-325 mg/15ml	1	QL
hydrocodone-acetaminophen oral tablet 10-325 mg, 2.5-325 mg, 5-325 mg, 7.5-325 mg	1	QL
hydromorphone hcl oral tablet	1	QL
JOURNAVX	3	QL
lidocaine external ointment 5 %	1	QL
lidocaine external patch 5 %	1	PA, QL
lidocaine hcl urethral/mucosal	1	
lidocaine-prilocaine external cream	1	
morphine sulfate er oral tablet extended release	1	PA, QL
morphine sulfate oral tablet	1	QL
NUCYNTA	3	QL

Drug name	Drug tier	Requirements & limits
NUCYNTA ER	3	PA, QL
oxycodone hcl oral capsule	1	QL
oxycodone hcl oral solution	1	QL
oxycodone hcl oral tablet	1	QL
oxycodone-acetaminophen oral tablet 10-325 mg, 2.5-325 mg, 5-325 mg, 7.5-325 mg	1	QL
premium lidocaine external ointment 5 %	1	QL
tramadol hcl (er biphasic) oral tablet extended release 24 hour	1	(generic for Ryzolt), QL
tramadol hcl er tablet extended release	1	(generic for Ultram ER), QL
tramadol hcl oral tablet 50 mg	1	QL
tramadol-acetaminophen	1	QL
XTAMPZA ER	3	PA, QL
ZTLIDO	3	PA, QL
<b>Analgesics - Drugs for pain and inflammation</b>		
aspirin 81 oral tablet delayed release	E	H
BAYER LOW DOSE ORAL TABLET CHEWABLE	E	H
celecoxib oral	1	
diclofenac potassium oral tablet 50 mg	1	
diclofenac sodium er	1	
diclofenac sodium oral	1	
diclofenac-misoprostol	1	
ec-naproxen	1	
etodolac	1	
etodolac er	1	
flurbiprofen oral	1	
hydrocodone-ibuprofen	1	QL
ibuprofen oral tablet 400 mg, 600 mg, 800 mg	1	
indomethacin er	1	
indomethacin oral capsule	1	
ketorolac tromethamine oral	1	
mefenamic acid oral	1	

See page 5-7 for coverage details.



Drug name	Drug tier	Requirements & limits
meloxicam oral tablet	1	
morphine sulfate (concentrate) oral solution 100 mg/5ml, 20 mg/ml	1	QL
morphine sulfate oral solution	1	QL
nabumetone oral	1	
naproxen dr	1	
naproxen oral tablet	1	
naproxen oral tablet delayed release	1	
naproxen sodium oral tablet 275 mg, 550 mg	1	
oxaprozin oral tablet	1	
piroxicam oral	1	
sulindac oral	1	
<b>Anti-addiction / Substance abuse treatment agents</b>		
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
disulfiram oral	1	
eq nicotine step 3	1	H
ft naloxone hcl	1	QL
gnp naloxone hcl	1	QL
habitrol	1	H
KLOXXADO	1	QL
naloxone hcl nasal	1	QL
naltrexone hcl oral	1	QL
NARCAN	1	QL (includes Narcan OTC)
NICODERM CQ	3	H
NICORETTE MOUTH/THROAT GUM	3	H
NICORETTE STARTER KIT	3	H
nicotine	1	H
nicotine mini	1	H

Drug name	Drug tier	Requirements & limits
nicotine mouth/throat gum	1	H
nicotine polacrilex	1	H
nicotine polacrilex mini	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
REXTOVY	1	QL
THRIVE	3	H
varenicline	1	H
ZIMHI INJECTION SOLUTION PREFILLED SYRINGE 5 MG/0.5ML	2	QL
ZUBSOLV	1	QL
<b>Antibacterials - Drugs for infections</b>		
amoxicillin	1	
amoxicillin-potassium clavulanate	1	
ampicillin	1	
azithromycin oral	1	
BLUJEPA	3	QL
cefadroxil	1	
cefdinir	1	
cefixime oral capsule	1	
cefepodoxime proxetil oral tablet	1	
cefprozil	1	
cefuroxime axetil	1	
cephalexin	1	
ciprofloxacin hcl oral	1	
clarithromycin oral	1	
clindamycin hcl oral	1	
clindamycin palmitate hcl	1	
clindamycin phosphate vaginal	1	
CLINDESSE	2	
dicloxacillin sodium	1	
doxycycline hyclate oral capsule	1	

See page 5-7 for coverage details.



Drug name	Drug tier	Requirements & limits
doxycycline hyclate oral tablet 100 mg, 20 mg	1	
doxycycline monohydrate oral capsule 100 mg, 50 mg	1	
doxycycline monohydrate oral suspension reconstituted	1	
doxycycline monohydrate oral tablet	1	
erythromycin base oral tablet	1	
erythromycin ethylsuccinate oral suspension reconstituted	1	
fidaxomicin	1	QL
fosfomycin tromethamine	1	
gentamicin sulfate external	1	QL
levofloxacin oral tablet	1	
LIKMEZ	3	
linezolid oral tablet	1	
methenamine hippurate	1	
metronidazole oral tablet 250 mg, 500 mg	1	
metronidazole vaginal	1	
minocycline hcl oral capsule	1	
moxifloxacin hcl oral	1	
mupirocin cream	1	QL
mupirocin ointment	1	QL
neomycin sulfate oral	1	
nitrofurantoin macrocrystal	1	
nitrofurantoin monohydrate macrocrystals	1	
nitrofurantoin oral suspension 25 mg/5ml	1	
NUZYRA ORAL	3	QL
penicillin v potassium	1	
silver sulfadiazine external	1	
ssd	1	
sulfamethoxazole-trimethoprim oral suspension 200-40 mg/5ml	1	
sulfamethoxazole-trimethoprim oral tablet	1	
sulfatrim pediatric	1	

Drug name	Drug tier	Requirements & limits
tetracycline hcl oral capsule	1	
tinidazole oral	1	
trimethoprim oral	1	
vancomycin hcl oral capsule	1	
VANDAZOLE	3	
XACIATO	2	QL
XEPI EXTERNAL CREAM 1 %	3	QL
XIFAXAN	3	PA, QL
<b>Anticoagulants - Drugs to treat or prevent blood clots</b>		
dabigatran etexilate mesylate	1	QL
ELIQUIS	2	QL
enoxaparin sodium injection solution prefilled syringe	1	QL
jantoven	1	
rivaroxaban oral tablet	1	QL
warfarin sodium oral	1	
XARELTO	2	QL
<b>Anticonvulsants - Drugs for seizures</b>		
APTIOM	3	PA
BRIVIACT	3	PA
carbamazepine er	1	
carbamazepine oral tablet	1	
carbamazepine oral tablet chewable	1	
CARBATROL	3	
clobazam oral suspension 2.5 mg/ml	1	PA
clobazam oral tablet	1	PA
DEPAKOTE	3	PA
DEPAKOTE ER	3	PA
DEPAKOTE SPRINKLES	3	PA
diazepam rectal	1	QL
DILANTIN	3	
divalproex sodium er	1	
divalproex sodium oral	1	
EPIDIOLEX	3	PA, SP
epitol oral tablet 200 mg	1	

See page 5-7 for coverage details.



Drug name	Drug tier	Requirements & limits
eslicarbazepine acetate	1	PA
ethosuximide oral	1	
felbamate oral tablet	1	
FYCOMPA	3	PA
gabapentin oral capsule	1	
gabapentin oral solution 250 mg/5ml	1	
gabapentin oral tablet 600 mg, 800 mg	1	
KEPPRA ORAL	3	PA
KEPPRA XR	3	PA
lacosamide oral solution 10 mg/ml, 100 mg/10ml, 50 mg/5ml	1	
lacosamide oral tablet	1	
LAMICTAL ORAL TABLET	3	PA
LAMICTAL XR ORAL TABLET EXTENDED RELEASE 24 HOUR	3	PA
lamotrigine er	1	
lamotrigine oral tablet	1	
lamotrigine oral tablet chewable	1	
lamotrigine oral tablet dispersible	1	PA
levetiracetam er	1	
levetiracetam oral solution	1	
levetiracetam oral tablet	1	
LIBERVANT BUCCAL FILM 10 MG, 15 MG, 5 MG, 7.5 MG	3	PA, QL
MOTPOLY XR	3	PA
NAYZILAM	3	PA, QL
ONFI	3	PA
oxcarbazepine	1	
perampanel oral tablet	1	PA
phenobarbital oral elixir 20 mg/5ml	1	
phenobarbital oral tablet	1	
phenytek	1	
phenytoin sodium extended	1	
primidone oral tablet 125 mg	1	PA

Drug name	Drug tier	Requirements & limits
primidone oral tablet 250 mg, 50 mg	1	
roweepra	1	
rufinamide oral suspension 40 mg/ml	1	
rufinamide oral tablet	1	PA
subvenite oral tablet	1	
SYMPAZAN	3	PA
TEGRETOL ORAL TABLET	3	
TEGRETOL-XR	3	
TOPAMAX	3	PA
TOPAMAX SPRINKLE	3	PA
topiramate oral capsule sprinkle	1	
topiramate oral tablet	1	
TRILEPTAL	3	PA
valproic acid oral capsule	1	
valproic acid oral solution 250 mg/5ml	1	
VALTOCO	3	PA, QL
VIMPAT ORAL	3	PA
XCOPRI	3	PA
ZONEGRAN	3	PA
ZONISADE	3	PA
zonisamide oral	1	
<b>Antidementia agents - Drugs for Alzheimer's disease and dementia</b>		
donepezil hcl oral tablet	1	
memantine hcl er	1	
memantine hcl oral tablet	1	
rivastigmine	1	
rivastigmine tartrate	1	
<b>Antidepressants - Drugs for depression</b>		
amitriptyline hcl oral	1	
AUVELITY	3	ST, QL
bupropion hcl er (sr)	1	
bupropion hcl oral	1	
citalopram hydrobromide oral solution 10 mg/5ml	1	

See page 5-7 for coverage details.



Drug name	Drug tier	Requirements & limits
citalopram hydrobromide oral tablet	1	
clomipramine hcl oral	1	
desipramine hcl oral	1	
desvenlafaxine succinate er	1	
doxepin hcl oral capsule	1	
doxepin hcl oral concentrate	1	
duloxetine hcl oral capsule delayed release particles 20 mg, 30 mg, 60 mg	1	
escitalopram oxalate oral solution	1	
escitalopram oxalate oral tablet	1	
FETZIMA	3	ST, QL
fluoxetine hcl oral capsule	1	
fluoxetine hcl oral solution	1	
fluoxetine hcl oral tablet	1	
fluvoxamine maleate	1	
fluvoxamine maleate er	1	
imipramine hcl oral	1	
mirtazapine oral	1	
nortriptyline hcl oral capsule	1	
olanzapine-fluoxetine hcl	1	QL
paroxetine hcl er	1	
paroxetine hcl oral tablet	1	
RALDESY	3	PA
sertraline hcl oral tablet	1	
trazodone hcl oral	1	
TRINTELLIX	3	ST, QL
venlafaxine hcl	1	
venlafaxine hcl er oral capsule extended release 24 hour	1	
vilazodone hcl	1	
ZURZUVAE	2	PA, QL, SP
<b>Antiemetics - Drugs for nausea and vomiting</b>		
aprepitant oral capsule 125 mg, 40 mg, 80 mg	1	QL
dronabinol	1	
granisetron hcl oral	1	

Drug name	Drug tier	Requirements & limits
metoclopramide hcl oral solution	1	
metoclopramide hcl oral tablet	1	
ondansetron hcl oral solution 4 mg/5ml	1	
ondansetron hcl oral tablet	1	
ondansetron odt oral tablet dispersible 4 mg, 8 mg	1	
perphenazine oral	1	
prochlorperazine maleate oral	1	
promethazine hcl oral	1	
promethazine hcl rectal	1	
scopolamine	1	
<b>Antifungals - Drugs for fungal infections</b>		
ciclodan	1	
ciclopirox external	1	
ciclopirox olamine external cream	1	
clotrimazole mouth/throat	1	
CRESEMBA ORAL	3	
econazole nitrate external cream	1	
fluconazole oral	1	
griseofulvin microsize oral	1	
GYNAZOLE-1	3	
itraconazole oral capsule	1	QL
JUBLIA	3	PA, ST, QL
ketoconazole external cream	1	QL
ketoconazole external shampoo	1	
ketoconazole oral	1	
klayesta	1	QL
nyamyc	1	QL
nystatin external	1	QL
nystatin mouth/throat	1	
nystatin oral	1	
nystatin-triamcinolone	1	
nystop	1	QL
posaconazole oral tablet delayed release	1	

See page 5-7 for coverage details.



Drug name	Drug tier	Requirements & limits
terbinafine hcl oral	1	
terconazole	1	
VIVJOA	3	PA, QL
voriconazole oral tablet	1	QL
<b>Antigout agents - Drugs for gout</b>		
allopurinol oral tablet 100 mg, 300 mg	1	
colchicine oral	1	
colchicine-probenecid	1	
febuxostat	1	
MITIGARE	2	
probenecid	1	
<b>Antimigraine agents - Drugs for migraines</b>		
AIMOVIG SUBCUTANEOUS SOLUTION AUTO-INJECTOR 140 MG/ML, 70 MG/ML	2	PA, ST, QL
almotriptan malate	1	QL
eletriptan hydrobromide	1	QL
EMGALITY	2	PA, ST, QL
frovatriptan succinate	1	QL
naratriptan hcl	1	QL
NURTEC	2	PA, ST, QL
QULIPTA	2	PA, ST, QL
REYVOW	3	PA, ST, QL
rizatriptan benzoate oral tablet dispersible	1	QL
sumatriptan nasal	1	QL
sumatriptan succinate oral	1	QL
sumatriptan succinate subcutaneous	1	QL
UBRELVY	2	PA, ST, QL
ZAVZPRET	3	PA, ST, QL
zolmitriptan oral	1	QL
ZOMIG NASAL SOLUTION 2.5 MG	3	QL
ZOMIG NASAL SOLUTION 5 MG	1	QL
<b>Antimyasthenic agents - Drugs to treat myasthenia gravis</b>		
pyridostigmine bromide er oral tablet extended release	1	

Drug name	Drug tier	Requirements & limits
pyridostigmine bromide oral tablet 60 mg	1	
<b>Antimycobacterials - Drugs to treat infections</b>		
dapsone oral	1	
ethambutol hcl oral	1	
isoniazid oral tablet	1	
rifabutin	1	
rifampin oral	1	
<b>Antineoplastics - Drugs for cancer</b>		
ALECENSA	2	PA, QL, SP
ALUNBRIG	2	PA, QL, SP
anastrozole oral	1	H-PA
AUGTYRO	2	PA, QL, SP
BESREMI	3	PA, QL, SP
bicalutamide	1	
CABOMETYX	2	PA, QL, SP
CALQUENCE	2	PA, QL, SP
COTELLIC	2	PA, QL, SP
cyclophosphamide oral capsule	1	
ENSACOVE	2	PA, QL, SP
ERIVEDGE	2	PA, QL, SP
ERLEADA	2	PA, QL, SP
exemestane	1	H-PA
GAVRETO	3	PA, QL, SP
hydroxyurea oral	1	
ICLUSIG	3	PA, QL, SP
IDHIFA	2	PA, QL, SP
IMKELDI	3	PA, QL, SP
KISQALI	2	PA, QL, SP
KOSELUGO ORAL CAPSULE	3	PA, QL, SP
lederle leucovorin	1	
LENVIMA	2	PA, QL, SP
letrozole oral	1	H-PA
leucovorin calcium oral	1	
LUMAKRAS	3	PA, QL, SP
LYNPARZA	2	PA, QL, SP
mercaptopurine oral tablet	1	

See page 5-7 for coverage details.



Drug name	Drug tier	Requirements & limits
NUBEQA	2	PA, QL, SP
ODOMZO	2	PA, QL, SP
ORGOVYX	3	PA, QL, SP
PIQRAY	2	PA, QL, SP
RETEVMO	3	PA, QL, SP
ROZLYTREK	2	PA, QL, SP
RYDAPT	2	PA, QL, SP
SCSEMBLIX	3	PA, QL, SP
STIVARGA	2	PA, QL, SP
TABRECTA	3	PA, QL, SP
TAGRISSE	3	PA, QL, SP
tamoxifen citrate oral tablet 10 mg	1	
tamoxifen citrate oral tablet 20 mg	1	H-PA
TEPMETKO	3	PA, QL, SP
TRUQAP	2	PA, QL, SP
VERZENIO	2	PA, QL, SP
VITRAKVI	2	PA, QL, SP
XTANDI	2	PA, QL, SP
ZEJULA	2	PA, QL, SP
ZELBORAF	2	PA, QL, SP
<b>Antiparasitics - Drugs for parasitic infections</b>		
albendazole oral	1	QL
ARAKODA	3	QL
atovaquone	1	
atovaquone-proguanil hcl	1	
hydroxychloroquine sulfate oral	1	
ivermectin oral tablet 3 mg	1	PA, QL
ivermectin oral tablet 6 mg	1	PA
mefloquine hcl	1	
nitazoxanide oral	1	QL
permethrin external	1	
spinosad	1	
<b>Antiparkinson agents - Drugs for Parkinson's disease</b>		
amantadine hcl oral capsule	1	
amantadine hcl oral solution 50 mg/5ml	1	

Drug name	Drug tier	Requirements & limits
amantadine hcl oral tablet	1	
benztropine mesylate oral	1	
bromocriptine mesylate oral tablet	1	
carbidopa-levodopa er oral tablet extended release	1	
carbidopa-levodopa oral tablet	1	
CREXONT	3	ST
entacapone	1	
INBRIJA	3	PA, QL, SP
NEUPRO	3	
pramipexole dihydrochloride	1	
rasagiline mesylate oral	1	
ropinirole hcl	1	
trihexyphenidyl hcl oral tablet	1	
<b>Antiplatelets - Drugs for heart attack and stroke prevention</b>		
cilostazol	1	
clopidogrel bisulfate oral	1	
prasugrel hcl	1	
ticagrelor	1	QL
<b>Antipsychotics - Drugs for mood disorders</b>		
aripiprazole oral solution	1	
aripiprazole oral tablet	1	
asenapine maleate	1	QL
CAPLYTA	3	PA, ST, QL
chlorpromazine hcl oral tablet	1	QL
clozapine oral tablet	1	
FANAPT	3	QL
fluphenazine hcl oral tablet	1	
haloperidol oral	1	
lurasidone hcl	1	QL
olanzapine oral	1	
paliperidone er	1	QL
quetiapine fumarate	1	
quetiapine fumarate er	1	
REXULTI	3	QL
risperidone	1	

See page 5-7 for coverage details.



Drug name	Drug tier	Requirements & limits
VRAYLAR	3	QL
VRAYLAR	3	QL
ziprasidone hcl	1	
<b>Antivirals - Drugs for viral infections</b>		
acyclovir external ointment	1	QL
acyclovir oral capsule	1	
acyclovir oral suspension 200 mg/5ml	1	
acyclovir oral tablet	1	
BIKTARVY	3	QL
CIMDUO	2	QL
darunavir	1	
DELSTRIGO	2	QL
DESCOVY ORAL TABLET 120-15 MG	3	QL
DESCOVY ORAL TABLET 200-25 MG	3	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	2	PA, QL, SP
famciclovir oral	1	
GENVOYA	3	QL
HARVONI	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	2	PA, QL, SP
ODEFSEY	3	QL
oseltamivir phosphate oral	1	
PAXLOVID	2	QL
PIFELTRO	3	
PREVMIS ORAL TABLET	2	PA

Drug name	Drug tier	Requirements & limits
PREZCOBIX	2	
ritonavir	1	
SOFOSBUVIR-VELPATASVIR	2	PA, QL, SP
SYMFI	2	QL
tenofovir disoproxil fumarate	1	H-PA
TIVICAY	3	
TRIUMEQ	2	QL
TRUVADA ORAL TABLET 100-150 MG, 133-200 MG, 167-250 MG	3	QL
valacyclovir hcl oral	1	QL
valganciclovir hcl oral tablet	1	
VOSEVI	2	PA, QL, SP
XOFLUZA	3	QL
<b>Anxiolytics - Drugs for anxiety</b>		
alprazolam er	1	
alprazolam oral	1	
alprazolam xr	1	
buspirone hcl oral	1	
chlordiazepoxide hcl	1	
clonazepam oral	1	
clorazepate dipotassium	1	
diazepam oral solution	1	
diazepam oral tablet	1	
estazolam	1	
hydroxyzine hcl oral syrup 10 mg/5ml	1	
hydroxyzine hcl oral tablet	1	
hydroxyzine pamoate oral	1	
lorazepam intensol	1	
lorazepam oral concentrate 2 mg/ml	1	
lorazepam oral tablet	1	
triazolam	1	
<b>Bipolar agents - Drugs for mood disorders</b>		
lithium carbonate er	1	
lithium carbonate oral	1	

See page 5-7 for coverage details.



Drug name	Drug tier	Requirements & limits
<b>Cardiovascular agents - Drugs for heart and circulation conditions</b>		
acebutolol hcl oral	1	
acetazolamide er	1	
acetazolamide oral	1	
aliskiren fumarate	1	
amiloride hcl oral	1	
amiloride-hydrochlorothiazide	1	
amiodarone hcl oral	1	
amlodipine besylate oral	1	
amlodipine besylate-benazepril hcl	1	
amlodipine besylate-valsartan	1	
ARBLI	3	PA
atenolol oral	1	
atenolol-chlorthalidone	1	
ATORVALIQ	3	PA
atorvastatin calcium oral tablet 10 mg, 20 mg	1	H-PA
atorvastatin calcium oral tablet 40 mg, 80 mg	1	
benazepril hcl oral	1	
benazepril-hydrochlorothiazide	1	
bisoprolol fumarate oral	1	
bisoprolol-hydrochlorothiazide	1	
bumetanide oral	1	
candesartan cilexetil	1	
candesartan cilexetil-hctz	1	
captopril oral	1	
cartia xt	1	
carvedilol	1	
chlorthalidone	1	
cholestyramine light	1	
cholestyramine oral	1	
clonidine hcl oral	1	
clonidine patch weekly	1	
colesevelam hcl oral tablet	1	
colestipol hcl oral tablet	1	

Drug name	Drug tier	Requirements & limits
CORLANOR ORAL TABLET	3	PA, QL
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	
dofetilide	1	
doxazosin mesylate oral	1	
enalapril maleate oral solution	1	PA
enalapril maleate oral tablet	1	
enalapril-hydrochlorothiazide	1	
eplerenone	1	
ezetimibe	1	
ezetimibe-simvastatin	1	
felodipine er	1	
fenofibrate micronized	1	
fenofibrate oral capsule 134 mg, 200 mg, 67 mg	1	
fenofibrate oral tablet 145 mg, 160 mg, 48 mg, 54 mg	1	
fenofibric acid oral capsule delayed release	1	
flecainide acetate	1	
fluvastatin sodium	1	
fosinopril sodium	1	
furosemide oral	1	
gemfibrozil oral	1	
guanfacine hcl	1	
HEMANGEOL	3	
hydralazine hcl oral	1	
hydrochlorothiazide oral	1	
indapamide	1	
INZIRQO	3	PA
irbesartan	1	
irbesartan-hydrochlorothiazide	1	
isosorb dinitrate-hydralazine	1	

See page 5-7 for coverage details.



Drug name	Drug tier	Requirements & limits
isosorbide dinitrate oral tablet 10 mg, 20 mg, 30 mg, 5 mg	1	
isosorbide mononitrate er	1	
ivabradine hcl	1	PA, QL
KAPSPARGO SPRINKLE	3	
KERENDIA	3	PA, QL
labetalol hcl oral	1	
lisinopril oral	1	
lisinopril-hydrochlorothiazide	1	
LODOCO	3	QL
LOPRESSOR ORAL SOLUTION	3	PA
losartan potassium oral	1	
losartan potassium-hctz	1	
lovastatin oral	1	H
matzim la	1	
metolazone	1	
metoprolol succinate er	1	
metoprolol tartrate oral tablet 100 mg, 25 mg, 50 mg	1	
metoprolol-hydrochlorothiazide	1	
mexiletine hcl oral	1	
midodrine hcl	1	
minoxidil oral	1	
MULTAQ	3	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	
nitroglycerin rectal	1	QL
nitroglycerin sublingual	1	
nitroglycerin transdermal	1	
NORLIQVA	3	PA

Drug name	Drug tier	Requirements & limits
olmesartan medoxomil oral	1	
olmesartan medoxomil-hctz	1	
omega-3-acid ethyl esters	1	
pentoxifylline er	1	
perindopril erbumine	1	
pindolol	1	
pravastatin sodium	1	
prazosin hcl oral	1	
prevalite	1	
propafenone hcl	1	
propafenone hcl er	1	
propranolol hcl er	1	
propranolol hcl oral	1	
ramipril	1	
ranolazine er	1	
REPATHA	2	QL
REPATHA PUSHTRONEX SYSTEM SUBCUTANEOUS SOLUTION CARTRIDGE 420 MG/3.5ML	2	QL
REPATHA SURECLICK	2	QL
rosuvastatin calcium oral	1	
sacubitril-valsartan	1	PA, QL
simvastatin oral tablet 10 mg, 20 mg, 40 mg, 5 mg	1	H-PA
simvastatin oral tablet 80 mg	1	
sotalol hcl (af)	1	
sotalol hcl oral	1	
spironolactone oral suspension	1	PA
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	
telmisartan	1	
telmisartan-hctz	1	
tiadylt er	1	
torseamide	1	

See page 5-7 for coverage details.



Drug name	Drug tier	Requirements & limits
trandolapril	1	
triamterene oral	1	
triamterene-hctz	1	
valsartan oral tablet	1	
valsartan-hydrochlorothiazide	1	
verapamil hcl er	1	
verapamil hcl oral	1	
VERQUVO	3	PA, QL
VYNDAQEL	2	PA, QL, SP
<b>Central nervous system agents - Drugs for attention deficit disorder</b>		
amphetamine sulfate	1	
amphetamine-dextroamphetamine	1	
amphetamine-dextroamphetamine er	1	QL
amphet-dextroamphet 3-bead er	1	QL
atomoxetine hcl	1	QL
AZSTARYS	3	ST, QL
clonidine hcl er	1	
dexmethylphenidate hcl	1	
dexmethylphenidate hcl er	1	QL
dextroamphetamine sulfate er	1	QL
dextroamphetamine sulfate oral solution	1	
FOCALIN	3	
guanfacine hcl er	1	
JORNAY PM	3	ST, QL
lisdexamfetamine dimesylate	1	QL
methylphenidate hcl er (cd)	1	QL
methylphenidate hcl er (la)	1	QL
methylphenidate hcl er (osm) oral tablet extended release 18 mg, 27 mg, 36 mg, 54 mg	1	QL
methylphenidate hcl er oral tablet extended release	1	QL
methylphenidate hcl oral	1	
ONYDA XR	3	QL

Drug name	Drug tier	Requirements & limits
XELSTRYM	3	PA, QL
<b>Central nervous system agents - Drugs for multiple sclerosis</b>		
AVONEX	2	PA, QL, SP
BAFIERTAM	2	PA, QL, SP
BETASERON	2	PA, QL, SP
KESIMPTA	2	PA, QL, SP
MAVENCLAD	3	PA, ST, QL, SP
MAYZENT	3	PA, QL, SP
PLEGRIDY	3	PA, QL, SP
PLEGRIDY INTRAMUSCULAR	3	PA, QL, SP
<b>Central nervous system agents - Miscellaneous</b>		
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	3	PA
NUEDEXTA	2	PA, QL
pregabalin oral capsule	1	
RADICAVA ORS	3	PA, QL, SP
RADICAVA ORS STARTER KIT	3	PA, QL, SP
SAVELLA	3	QL
TEGLUTIK	3	PA, SP
TIGLUTIK	3	PA, SP
VEOZAH	3	PA, QL
ZEPOSIA	3	PA, ST, QL, SP
<b>Dental and oral agents - Drugs for mouth and throat conditions</b>		
cevimeline hcl	1	
chlorhexidine gluconate mouth/throat	1	
CLINPRO 5000	3	
DENTA 5000 PLUS	3	
DENTAGEL	3	
FLUORIDEX	3	
FLUORIDEX ENHANCED WHITENING	3	
FLUORIMAX 5000	3	

See page 5-7 for coverage details.



Drug name	Drug tier	Requirements & limits
FRAICHE 5000 DENTAL DENTAL GEL 1.1 %	3	
JUST RIGHT 5000	3	
lidocaine hcl mouth/throat	1	
lidocaine viscous hcl	1	
periogard	1	
pilocarpine hcl oral	1	
PREVIDENT 5000 BOOSTER PLUS	3	
PREVIDENT 5000 DRY MOUTH	3	
PREVIDENT 5000 KIDS	3	
PREVIDENT 5000 ORTHO DEFENSE	3	
PREVIDENT 5000 PLUS	3	
PREVIDENT DENTAL	3	
PREVIDENT MOUTH/THROAT	3	
sf 5000 plus	1	
sf gel 1.1%	1	
sodium fluoride 5000 plus	1	
sodium fluoride 5000 ppm	1	
sodium fluoride 5000 ppm dental cream 1.1 %	1	
sodium fluoride dental	1	
sodium fluoride mouth/throat	1	
triamcinolone acetonide mouth/throat	1	
<b>Dermatological agents - Drugs for skin conditions</b>		
accutane	1	
acitretin	1	
adapalene-benzoyl peroxide external gel 0.1-2.5 %	1	QL
ADBRY	2	PA, QL, SP
AKLIEF	3	PA, QL
alclometasone dipropionate external cream	1	
amnesteem	1	
AMZEEQ	3	QL
ANZUPGO	3	PA, QL, SP
AVAR CLEANSER	3	

Drug name	Drug tier	Requirements & limits
azelaic acid external	1	
AZELEX	3	QL
benzoyl peroxide-erythromycin	1	QL
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	
brimonidine tartrate external	1	PA, QL
calcipotriene external cream	1	QL
calcipotriene external ointment	1	
calcipotriene external solution	1	QL
CIBINQO	2	PA, QL, SP
ciclopirox olamine external suspension	1	
claravis	1	
clindacin	1	
clindacin etz external swab	1	
clindacin-p	1	
clindamycin phos (twice-daily) gel 1 % external	1	(generic for Cleocin-T), QL
clindamycin phos-benzoyl perox external gel 1.2-5 %	1	QL
clindamycin phos-benzoyl perox gel 1-5 % external	1	QL
clindamycin phosphate external	1	
clobetasol prop emollient base	1	QL
clobetasol propionate e	1	QL
clobetasol propionate external cream 0.05 %	1	QL

See page 5-7 for coverage details.



Drug name	Drug tier	Requirements & limits	Drug name	Drug tier	Requirements & limits
clobetasol propionate external gel	1	QL	fluticasone propionate external ointment	1	
clobetasol propionate external liquid	1	QL	halobetasol propionate external cream	1	QL
clobetasol propionate external ointment	1	QL	halobetasol propionate external ointment	1	QL
clobetasol propionate external solution	1	QL	hydrocortisone external cream 2.5 %	1	
clotrimazole-betamethasone	1		hydrocortisone external lotion 2.5 %	1	
dapsone external	1	QL	hydrocortisone external ointment 1 %, 2.5 %	1	
DERMA-SMOOTH/FS BODY	3	QL	hydrocortisone valerate external cream	1	QL
DERMA-SMOOTH/FS SCALP	3		imiquimod external cream 5 %	1	
desonide external cream	1	QL	isotretinoin oral capsule 10 mg, 20 mg, 30 mg, 40 mg	1	
desonide external lotion	1	QL	KLISYRI	3	ST, QL
desonide external ointment	1	QL	metronidazole external cream	1	
desoximetasone external cream	1	QL	metronidazole external gel 0.75 %	1	
desoximetasone external ointment	1	QL	metronidazole external lotion	1	
diclofenac sodium external gel 3 %	1	PA, QL	MIRVASO	2	PA, QL
DRYSOL	3		mometasone furoate external	1	
DUPIXENT	2	PA, QL, SP	NEMLUVIO	2	PA, QL, SP
EBGLYSS	2	PA, QL, SP	neuc	1	QL
ENSTILAR	3	QL	OPZELURA	3	PA, QL, SP
erythromycin external	1		PANRETIN	3	
EUCRISA	3	ST, QL	pimecrolimus	1	QL
FINACEA EXTERNAL FOAM	3		podofilox external solution	1	
fluocinolone acetonide body	1	QL	RHOFADE	3	PA, QL
fluocinolone acetonide external	1	QL	SANTYL	3	QL
fluocinolone acetonide scalp	1		selenium sulfide external lotion	1	
fluocinonide external cream 0.05 %	1		sodium sulfacetamide wash	1	
fluocinonide external gel	1		SOOLANTRA	1	QL
fluocinonide external ointment	1		STARJEMZA SUBCUTANEOUS	2	PA, QL, SP
fluocinonide external solution	1		STEQEYMA SUBCUTANEOUS	2	PA, QL, SP
fluorouracil external cream 5 %	1		sulfacetamide sodium (acne)	1	
fluticasone propionate external cream	1		sulfacetamide sodium external	1	

See page 5-7 for coverage details.



Drug name	Drug tier	Requirements & limits
sulfacetamide sodium-sulfur external liquid 10-5 %, 9-4 %	1	
sulfacetamide sodium-sulfur external suspension 10-5 %	1	
sulfacetamide sod-sulfur wash external liquid 9-4 %	1	
TACLONEX	1	
tacrolimus external	1	QL
TREMFYA	2	PA, QL, SP
tretinoin external cream	1	QL
triamcinolone acetonide external cream 0.025 %, 0.1 %	1	
triamcinolone acetonide external cream 0.5 %	1	QL
triamcinolone acetonide external lotion	1	
triamcinolone acetonide external ointment 0.025 %, 0.1 %, 0.5 %	1	
triderm	1	QL
urea external cream 20 %, 40 %, 45 %	1	
VTAMA	3	PA, QL
WEZLANA SUBCUTANEOUS	2	PA, QL, SP
ZELSUVMI	3	QL
zenatane	1	
ZILXI	3	PA, ST, QL
ZORYVE	3	PA, QL
<b>Diabetes - Glucose monitoring and supplies</b>		
ACCU-CHEK FASTCLIX LANCET	1	
ACCU-CHEK FASTCLIX LANCET DEVICE KIT	1	
ACCU-CHEK GUIDE	2	
ACCU-CHEK GUIDE KIT W/ DEVICE	2	
ACCU-CHEK GUIDE TEST STRIPS	2	QL
ACCU-CHEK SOFTCLIX LANCET	1	
ACCU-CHEK SOFTCLIX LANCET DEVICE KIT	1	

Drug name	Drug tier	Requirements & limits
AQ INSULIN SYRINGE	2	QL
AQINJECT PEN NEEDLE	2	QL
BD AUTOSHIELD DUO PEN NEEDLES	2	QL
BD BLUNT FILL NEEDLE	2	
BD BLUNT FILL NEEDLE W/ FILTER	2	
BD ECLIPSE NEEDLE 18G X 1-1/2" , 25G X 5/8" , 27G X 1/2"	2	
BD ECLIPSE NEEDLE 23G X 1" (OTC)	2	
BD ECLIPSE NEEDLE 23G X 1" (RX)	2	
BD ECLIPSE SHIELDED NEEDLE	2	
BD PEN NEEDLE ULTRAFINE	2	QL
BD SAFETYGLIDE NEEDLE 23G X 1-1/2"	2	
BD SAFETYGLIDE SHIELDED NEEDLE 21G X 1-1/2"	2	
BD ULTRA-FINE INSULIN SYRINGES	2	QL
BD ULTRA-FINE PEN NEEDLES	2	QL
CAREPOINT POLY HUB NEEDLE 18G X 1" , 21G X 1" , 22G X 1" , 23G X 1" , 25G X 1" , 25G X 5/8"	2	
CAREPOINT POLY HUB NEEDLE 22G X 1-1/2"	2	
CAREPOINT PRECISION POLY HUB	2	
CAREPOINT SAFETY 1ST NEEDLE	2	
CEQUR SIMPLICITY 2U 8PK	3	ST
CONTOUR NEXT EZ KIT W/ DEVICE	1	
CONTOUR NEXT GEN MONITOR KIT W/DEVICE	1	
CONTOUR NEXT GEN TEST STRIPS	1	QL
CONTOUR NEXT MONITOR KIT W/DEVICE	1	
CONTOUR NEXT ONE KIT	1	

See page 5-7 for coverage details.



Drug name	Drug tier	Requirements & limits
CONTOUR PLUS BLUE KIT W/ DEVICE	1	
CONTOUR PLUS TEST STRIP	1	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
DROPSAFE SAFETY SYRINGE/ NEEDLE	2	QL
DROPSAFE SICURA	2	
EMBECTA INSULIN SYRINGE	2	QL
FREESTYLE LIBRE 14 DAY READER	3	PA, QL
FREESTYLE LIBRE 14 DAY SENSOR	3	PA, QL
FREESTYLE LIBRE 2 PLUS SENSOR	3	PA, QL
FREESTYLE LIBRE 2 READER	3	PA, QL
FREESTYLE LIBRE 2 SENSOR	3	PA, QL
FREESTYLE LIBRE 3 PLUS SENSOR	3	PA, QL
FREESTYLE LIBRE 3 READER	3	PA, QL
FREESTYLE LIBRE 3 SENSOR	3	PA, QL
GVOKE HYOPEN	2	QL
GVOKE KIT	2	QL
GVOKE PFS	2	QL
INPEN	3	ST
INSULIN PEN NEEDLES 29G X 12MM , 30G X 5 MM , 31G X 5 MM, 31G X 6 MM , 31G X 8 MM , 32G X 4 MM	2	QL
INSULIN SYRINGES 27G X 1/2" 0.5 ML, 27G X 1/2" 1 ML, 28G X 1/2" 0.5 ML, 28G X 1/2" 1 ML, 29G X 1/2" 0.5 ML, 29G X 1/2" 1 ML, 30G X 1/2" 1 ML, 30G X 5/16" 0.5 ML, 31G X 5/16" 0.5 ML, 31G X 5/16" 1 ML	2	QL
LANCETS	1	

Drug name	Drug tier	Requirements & limits
MONOJECT HYPODERMIC NEEDLE 18G X 1"	2	
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, QL
OMNIPOD 5 G7 INTRO (GEN 5) KIT	2	PA, QL
OMNIPOD 5 G7 PODS (GEN 5)	2	PA, QL
OMNIPOD 5 LIBRE PODS	2	PA
OMNIPOD 5 LIBRE2 G6 INTRO GEN5	2	PA, QL
RELION GLUCOSE TEST STRIPS	3	QL
TECHLITE INSULIN SYRINGES (Arkray)	2	QL
TECHLITE PEN NEEDLES	2	QL
TECHLITE PLUS PEN NEEDLES	2	QL
TWIIST REFILL KIT/INFUSION SET	2	PA, QL
TWIIST STARTER KIT	2	PA, QL
VERISAFE SAFETY STERILE NEEDLE	2	
<b>Diabetes - Insulin</b>		
HUMALOG CARTRIDGE	2	QL
HUMALOG KWIKPEN	2	QL
HUMALOG MIX 50/50 KWIKPEN	2	QL
HUMALOG MIX 50/50 VIAL SUBCUTANEOUS SUSPENSION (50-50) 100 UNIT/ML	1	QL
HUMALOG MIX 75/25 KWIKPEN	2	QL
HUMALOG MIX 75/25 VIAL	1	QL
HUMALOG U-100 JUNIOR KWIKPEN	2	QL
HUMULIN 70/30 KWIKPEN	2	QL
HUMULIN 70/30 VIAL	1	QL
HUMULIN N KWIKPEN	2	QL

See page 5-7 for coverage details.



Drug name	Drug tier	Requirements & limits
HUMULIN N VIAL	1	QL
HUMULIN R U-500 KWIKPEN	2	QL
HUMULIN R U-500 VIAL SUBCUTANEOUS SOLUTION 500 UNIT/ML	1	QL
HUMULIN R VIAL	1	QL
INSULIN LISPRO	1	QL
INSULIN LISPRO (1 UNIT DIAL)	2	(Insulin Lispro Kwikpen), QL
INSULIN LISPRO JUNIOR KWIKPEN	2	QL
INSULIN LISPRO PROT & LISPRO	2	QL
LANTUS SOLOSTAR	1	QL
LANTUS U-100 VIAL	1	QL
LYUMJEV KWIKPEN	2	QL
LYUMJEV VIAL	1	QL
NOVOLIN R FLEXPEN RELION SOLUTION PEN-INJECTOR 100 UNIT/ML INJECTION	2	ST, QL
NOVOLIN R FLEXPEN SOLUTION PEN-INJECTOR 100 UNIT/ML INJECTION	2	ST, QL
TOUJEO MAX SOLOSTAR	2	QL
TOUJEO SOLOSTAR	2	QL
<b>Diabetes - Non-insulin agents</b>		
acarbose oral	1	
ALOGLIPTIN BENZOATE	2	QL
ALOGLIPTIN-METFORMIN HCL	2	QL
BAQSIMI ONE PACK	2	QL
BAQSIMI TWO PACK	2	QL
BYDUREON BCISE AUTOINJECTOR SUBCUTANEOUS AUTO- INJECTOR 2 MG/0.85ML	2	PA, QL
BYETTA 5 MCG PEN SUBCUTANEOUS SOLUTION PEN-INJECTOR 5 MCG/0.02ML	2	PA, QL
glimepiride oral tablet 1 mg, 2 mg, 4 mg	1	
glipizide er	1	

Drug name	Drug tier	Requirements & limits
glipizide oral tablet 10 mg, 5 mg	1	
glipizide xl oral tablet extended release 24 hour 10 mg, 2.5 mg, 5 mg	1	
glipizide-metformin hcl	1	
GLUCAGON EMERGENCY KIT	2	
glucagon emergency kit injection solution reconstituted 1 mg	1	
glyburide	1	
glyburide-metformin	1	
GLYXAMBI	2	ST, QL
JARDIANCE	2	QL
JENTADUETO	2	QL
JENTADUETO XR	2	QL
liraglutide	1	PA, QL
metformin hcl er	1	
metformin hcl oral solution	1	
metformin hcl oral tablet 1000 mg, 500 mg, 850 mg	1	
MOUNJARO	2	PA, QL
nateglinide	1	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 SUBCUTANEOUS SOLUTION PEN-INJECTOR 2700 MCG/2.7ML	3	QL
SYMLINPEN 60 SUBCUTANEOUS SOLUTION PEN-INJECTOR 1500 MCG/1.5ML	3	QL
SYNJARDY	2	QL
SYNJARDY XR	2	QL
TRADJENTA	2	QL

See page 5-7 for coverage details.



Drug name	Drug tier	Requirements & limits
TRIJARDY XR	2	QL
TRULICITY	2	PA, QL
ZEGALOGUE	2	QL
<b>Drugs for blood disorders</b>		
ADVATE	2	SP
ADYNOVATE	3	SP
AFSTYLA	3	SP
ALPROLIX	3	SP
ALTUVIIIIO	3	SP
ALVAIZ	3	PA, SP
anagrelide hcl	1	
ARANESP (ALBUMIN FREE) INJECTION SOLUTION 25 MCG/ML	2	QL, SP
BENEFIX	2	SP
DOPTELET	3	PA, QL, SP
ELOCTATE	3	SP
FABHALTA	2	PA, QL, SP
heparin sodium (porcine) rfid	1	
heparin sodium (porcine) injection solution	1	
heparin sodium (porcine) pf	1	
HYMPAVZI	2	PA, QL, SP
IDELVION	3	SP
KOGENATE FS	2	SP
KOVALTRY	2	SP
NEULASTA	2	SP
NIVESTYM	2	SP
NOVOEIGHT	2	SP
NUWIQ INTRAVENOUS KIT	2	SP
RECOMBINATE	2	SP
RETACRIT	2	QL, SP
TAVALISSE	3	PA, QL, SP
tranexamic acid oral	1	QL
UDENYCA	2	SP
VOYDEYA ORAL TABLET THERAPY PACK	2	PA, QL, SP
WILATE	2	SP

Drug name	Drug tier	Requirements & limits
ZARXIO	2	SP
<b>Drugs for sexual dysfunction</b>		
ADDYI	3	PA, QL
IMVEXXY	2	QL
INTRAROSA	3	PA, QL
OSPHENA	3	PA, QL
sildenafil citrate oral tablet 100 mg, 25 mg, 50 mg	1	QL
tadalafil oral	1	QL
vardeafil hcl oral tablet	1	QL
VYLEESI	3	PA, QL
<b>Electrolytes / Vitamins</b>		
CO-NATAL FA	2	
cyanocobalamin injection solution 1000 mcg/ml	1	
cyanocobalamin nasal	1	
DENTA 5000 PLUS SENSITIVE	3	
EFFER-K ORAL TABLET EFFERVESCENT 10 MEQ, 20 MEQ	2	
ergocalciferol oral capsule	1	
FLUORIMAX 5000 SENSITIVE	3	
folic acid oral tablet 1 mg	1	
folic acid oral tablet 400 mcg, 800 mcg	E	H
klor-con	1	
klor-con 10	1	
klor-con m10	1	
klor-con m15	1	
klor-con m20	1	
K-PHOS-NEUTRAL	2	
levocarnitine oral solution	1	
levocarnitine sf	1	
LOKELMA	3	PA, QL
MATRONEX	3	
M-NATAL PLUS	3	
multivitamin w/fluoride tablet chewable 0.25 mg oral	1	

See page 5-7 for coverage details.



Drug name	Drug tier	Requirements & limits
multivitamin w/fluoride tablet chewable 0.5 mg oral	1	
multivitamin w/fluoride tablet chewable 1 mg oral	1	
multi-vitamin/fluoride	1	
multivitamin/fluoride oral tablet chewable	1	
NASCOBAL	3	
NEONATAL COMPLETE	3	
NEONATAL PLUS	3	
NIVA-PLUS	3	
ONE VITE WOMENS PLUS	3	
PHOSPHA 250 NEUTRAL	2	
phosphorous	1	
phospho-trin 250 neutral	1	
pnv 27-ca/fe/fa	1	
pnv-dha	1	
potassium chloride crys er	1	
potassium chloride er	1	
potassium chloride oral packet 20 meq	1	
potassium chloride oral solution	1	
potassium citrate er	1	
potassium citrate-citric acid	1	
prenatal oral tablet 27-1 mg	1	
prenatal plus	1	
prenatal plus vitamin/mineral	1	
PRENATE ENHANCE	3	
PRENATE MINI	3	
PRENATE RESTORE	3	
PREVIDENT 5000 ENAMEL PROTECT	3	
PREVIDENT 5000 SENSITIVE	3	
SE-NATAL 19 ORAL TABLET	3	
sod citrate-citric acid oral solution 500-334 mg/5ml	1	
sod fluoride-potassium nitrate	1	
sodium fluoride 5000 enamel	1	
sodium fluoride 5000 sensitive	1	

Drug name	Drug tier	Requirements & limits
sodium fluoride oral solution 1.1 (0.5 f) mg/ml	1	H
sodium fluoride oral tablet chewable	1	H
TRICARE ORAL TABLET	3	
TRINATAL RX 1	3	
TRINATE	3	
tri-vite/fluoride	1	
VELTASSA	3	PA, QL
VITAFOL FE+	3	
VITAFOL ULTRA	3	
VITAFOL-OB	3	
VITAMEDMD ONE RX/ QUATREFOLIC ORAL CAPSULE 30-0.6-0.4-200 MG	3	
vitamin d (ergocalciferol) oral capsule 1.25 mg (50000 ut), 50000 unit	1	
VITATHELY WITH GINGER	3	
WESCAP-PN DHA	3	
<b>Gastrointestinal agents - Drugs for acid reflux and ulcer</b>		
bis subcit-metronid-tetracyc	1	QL
bismuth/metronidaz/tetracyclin	1	QL
cimetidine oral	1	
esomeprazole magnesium oral packet	1	PA, ST, QL
famotidine oral suspension reconstituted	1	
lansoprazole oral tablet delayed release dispersible	1	PA, ST, QL
misoprostol oral	1	
omeprazole oral capsule delayed release	1	
pantoprazole sodium oral tablet delayed release	1	
PYLERA	3	QL
rabeprazole sodium oral tablet delayed release	1	QL
sucralfate oral	1	

See page 5-7 for coverage details.



Drug name	Drug tier	Requirements & limits
VOQUEZNA	3	PA, QL
VOQUEZNA DUAL PAK	3	ST, QL
VOQUEZNA TRIPLE PAK	3	ST, QL
<b>Gastrointestinal agents - Drugs for bowel, intestine and stomach conditions</b>		
bisacodyl oral tablet delayed release 5 mg	E	H
BYLVAY	3	PA, QL, SP
BYLVAY (PELLETS)	3	PA, QL, SP
chlordiazepoxide-clidinium	1	
clearlax	E	H
CLENPIQ	3	QL
constulose	1	
cromolyn sodium oral	1	
dicyclomine hcl oral capsule	1	
dicyclomine hcl oral solution 10 mg/5ml	1	
dicyclomine hcl oral tablet 20 mg	1	
diphenoxylate-atropine oral tablet	1	
enulose	1	
gavilax oral powder	E	H
gavilyte-c	1	H
gavilyte-g	1	QL, H
gavilyte-n with flavor pack	1	QL, H
generlac	1	
gentlelax oral powder 17 gm/ scoop	E	H
glycolax	E	H
glycopyrrolate oral solution	1	
glycopyrrolate oral tablet 1 mg, 2 mg	1	
hyoscyamine sulfate er	1	
hyoscyamine sulfate oral tablet	1	
hyoscyamine sulfate oral tablet dispersible	1	
hyoscyamine sulfate sl	1	
hyoscyamine sulfate sublingual	1	

Drug name	Drug tier	Requirements & limits
IQIRVO	3	PA, ST, QL, SP
KRISTALOSE	3	
lactulose encephalopathy	1	
lactulose oral packet 20 gm	1	
lactulose oral solution	1	
LEVSIN/SL	3	
LINZESS	2	PA, QL
LIVDELZI	3	PA, ST, QL, SP
lubiprostone	1	PA, QL
magnesium citrate oral solution	E	H
MOVIPREP	3	QL
na sulfate-k sulfate-mg sulf	1	QL
OSCIMIN SUBLINGUAL	3	
peg 3350-kcl-na bicarb-nacl	1	QL, H
peg-3350/electrolytes	1	QL, H
peg-3350/electrolytes/ascorbat	1	QL
peg-kcl-nacl-nasulf-na asc-c	1	QL
PLENVU	3	QL
polyethylene glycol 3350 oral powder	E	H
prucalopride succinate	1	PA, QL
REZDIFFRA	3	PA, QL
SUFLAVE	3	QL
SUPREP BOWEL PREP KIT	3	QL
SUTAB	3	
SYMPROIC	2	PA, QL
ursodiol oral capsule 300 mg	1	
ursodiol oral tablet	1	
VIBERZI	3	PA, QL
<b>Genetic or enzyme disorder - Drugs for replacement, modification, treatment</b>		
ATTRUBY	2	PA, QL, SP
CREON	2	
EVRYSDI	2	PA, QL, SP
levocarnitine oral tablet	1	
ORFADIN ORAL CAPSULE	1	PA, SP
ORFADIN ORAL SUSPENSION	2	PA, SP

See page 5-7 for coverage details.



Drug name	Drug tier	Requirements & limits
PANCREAZE	3	ST
PERTZYE	3	ST
STRENSIQ	2	PA, QL, SP
VYNDAMAX	2	PA, QL, SP
XPHOZAH	3	PA, QL
ZENPEP	2	

#### Genitourinary agents - Drugs for bladder, genital and kidney conditions

bethanechol chloride oral	1	
calcium acetate (phos binder) oral capsule	1	
CAVERJECT IMPULSE	3	QL
EDEX (2 CARTRIDGE)	3	QL
EDEX (6 CARTRIDGE)	3	QL
ELMIRON	3	ST
me/naphos/mb/hyo1	1	
mirabegron er	1	ST
oxybutynin chloride er	1	
oxybutynin chloride oral	1	
phenazo oral tablet 200 mg	1	
phenazopyridine hcl oral tablet 100 mg, 200 mg	1	
PYRIDIUM	3	
sevelamer carbonate oral tablet	1	
solifenacin succinate	1	
tolterodine tartrate	1	
tropium chloride	1	
UROGESIC-BLUE	2	
VANRAFIA	3	PA, QL, SP
VELPHORO	3	ST

#### Genitourinary agents - Drugs for prostate conditions

alfuzosin hcl er	1	
dutasteride oral	1	
finasteride oral tablet 5 mg	1	
silodosin	1	
tamsulosin hcl	1	
terazosin hcl	1	
TEZRULY	3	PA

Drug name	Drug tier	Requirements & limits
<b>Hormonal agents - Hormone replacement and birth control</b>		
abigale	1	
abigale lo	1	
afirmelle	1	H
aftera	1	H
altavera	1	H
alyacen 1/35	1	H
alyacen 7/7/7	1	H
amabelz oral tablet 0.5-0.1 mg	1	
amethyst	1	H
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
ayuna	1	H
azurette	1	H
balziva	1	H
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 PRO	3	QL
COMBIPATCH	3	QL

See page 5-7 for coverage details.



Drug name	Drug tier	Requirements & limits
cryselle	1	H
cryselle-28	1	H
curae oral tablet 1.5 mg	1	H
cyred eq	1	H
dasetta 1/35 (28)	1	H
dasetta 7/7/7	1	H
daysee	1	H
deblitane	1	H
delyla	1	H
DEPO-ESTRADIOL	3	
DEPO-PROVERA INTRAMUSCULAR SUSPENSION PREFILLED SYRINGE	3	QL
DEPO-SUBQ PROVERA 104	1	QL, H
desogestrel-ethinyl estradiol	1	H
DIVIGEL	3	
dolishale	1	H
dotti	1	QL
drospiren-eth estrad-levomefol oral tablet 3-0.03-0.451 mg	1	H
drospirenone-ethinyl estradiol	1	H
DUAVEE	3	QL
econtra one-step	1	H
ELESTRIN	3	
elinest	1	H
ELLA	1	QL, H
eluryng	1	H
emzahh	1	H
enilloring	1	H
enpresse-28 oral tablet 50-30/75-40/ 125-30 mcg	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
estradiol oral	1	

Drug name	Drug tier	Requirements & limits
estradiol patch twice weekly	1	QL
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. oral tablet 1.25-2.5 mg	1	
ESTRING	2	QL
estrogens conjugated	1	
ethynodiol diac-eth estradiol	1	H
etonogestrel-ethinyl estradiol	1	H
EVAMIST	2	
falmina	1	H
feirza 1.5/30	1	H
feirza 1/20	1	H
FEMRING	3	QL
finzala	1	H
fyavolv	1	
galbriela	1	H
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 vaginal ring 0.12-0.015 mg/24hr	1	H
heather	1	H
her style	1	H
iclevia	1	H
incassia	1	H
introvale	1	H
isibloom	1	H

See page 5-7 for coverage details.



Drug name	Drug tier	Requirements & limits
jaimiess	1	H
jasmiel	1	H
jencycla	1	H
jinteli	1	
jolessa	1	H
joyeaux	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
kaitlib fe	1	H
kalliga	1	H
kariva	1	H
kelnor 1/35	1	H
kelnor 1/50 oral tablet 1-50 mg-mcg	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
layolis fe oral tablet chewable 0.8-25 mg-mcg	1	H
leena oral tablet 0.5/1/0.5-35 mg-mcg	1	H
lessina	1	H
levonest	1	H
levonorgest-eth est & eth est	1	H
levonorgest-eth estrad 91-day	1	H
levonorgest-eth estradiol-iron	1	H
levonorgestrel	1	H
levonorgestrel-ethinyl estrad	1	H
levonorg-eth estrad triphasic	1	H
levora 0.15/30 (28)	1	H
LO LOESTRIN FE	1	H

Drug name	Drug tier	Requirements & limits
lojaimiess	1	H
loryna	1	H
low-ogestrel	1	H
lo-zumandimine	1	H
luizza 1.5/30	1	H
luizza 1/20	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 fe 1.5/30	1	H
microgestin fe 1/20	1	H
mili	1	H
mimvey	1	
minzoya	1	H
mono-lynyah	1	H
my choice	1	H
my way	1	H
MYFEMBREE	2	PA, QL
NATAZIA	1	
necon 0.5/35 (28)	1	H
new day	1	H
nikki	1	H
nora-be	1	H
norelgestromin-eth estradiol	1	H
norethin ace-eth estrad-fe oral tablet	1	H

See page 5-7 for coverage details.



Drug name	Drug tier	Requirements & limits
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
norethin-eth estradiol-fe	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
nylia 1/35	1	H
nylia 7/7/7	1	H
ocella oral tablet 3-0.03 mg	1	H
opcicon one-step	1	H
OPILL	1	H
option 2	1	H
orquidea	1	H
philith	1	H
pimtrea	1	H
PLAN B ONE-STEP	1	H
portia-28	1	H
PREMARIN ORAL	3	
PREMARIN VAGINAL	3	
PREMPHASE	3	
PREMPRO	3	
progesterone intramuscular	1	
progesterone oral	1	
react oral tablet 1.5 mg	1	H
reclipsen	1	H

Drug name	Drug tier	Requirements & limits
rivelsa	1	H
rosyrah	1	H
setlakin	1	H
sharobel	1	H
shewise	1	H
simliya	1	H
simpesse	1	H
SLYND	3	PA, ST
sprintec 28	1	H
sronyx	1	H
syeda	1	H
take action	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-sprintec	1	H
trivora (28)	1	H
tri-vylibra	1	H
tri-vylibra lo	1	H
turqoz	1	H
TYBLUME	1	H
tydemy	1	H
valtya 1/35	1	H
valtya 1/50	1	H
velivet	1	H
vestura	1	H
vienva	1	H
viorele	1	H
volnea	1	H

See page 5-7 for coverage details.



Drug name	Drug tier	Requirements & limits
vyfemla	1	H
vylibra	1	H
wera	1	H
wymzya fe	1	H
xarah fe	1	H
xelria 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
<b>Hormonal agents - Oral steroids</b>		
CORTEF	3	
dexamethasone intensol	1	
dexamethasone oral elixir	1	
dexamethasone oral solution	1	
dexamethasone oral tablet	1	
fludrocortisone acetate oral	1	
hydrocortisone oral	1	
MEDROL ORAL TABLET THERAPY PACK	3	
methylprednisolone oral	1	
prednisolone oral solution	1	
prednisolone sodium phosphate oral solution 15 mg/5ml	1	
prednisone oral solution	1	
prednisone oral tablet	1	
prednisone oral tablet therapy pack	1	
<b>Hormonal agents - Other</b>		
cabergoline	1	
desmopressin acetate oral	1	
desmopressin acetate spray	1	
megestrol acetate oral suspension 40 mg/ml	1	
NGENLA	3	PA, QL, SP

Drug name	Drug tier	Requirements & limits
NORDITROPIN FLEXPRO	2	PA, QL, SP
OMNITROPE	2	PA, QL, SP
ORIAHNN	2	PA, QL
ORLISSA	2	PA, QL
SKYTROFA	3	PA, QL, SP
<b>Hormonal agents - Testosterone replacement</b>		
KYZATREX	3	PA, QL
TESTIM	1	PA, QL
testosterone cypionate intramuscular	1	
testosterone enanthate intramuscular	1	
testosterone gel 12.5 mg/act (1%) transdermal	1	PA, QL
testosterone gel 20.25 mg/act (1.62%) transdermal	1	PA, QL
testosterone transdermal gel 1.62 %	1	PA, QL
<b>Hormonal agents - Thyroid</b>		
ARMOUR THYROID	3	
ERMEZA ORAL SOLUTION 150 MCG/5ML	2	PA
euthyrox oral tablet 100 mcg, 112 mcg, 125 mcg, 137 mcg, 150 mcg, 175 mcg, 200 mcg, 25 mcg, 50 mcg, 75 mcg, 88 mcg	1	
EVEXITHROID ORAL TABLET 120 MG, 15 MG, 180 MG, 30 MG, 60 MG, 90 MG	3	
levo-t	1	
levothyroxine sodium oral tablet	1	
levoxyl	1	
liomny	1	
liothyronine sodium oral	1	
methimazole oral	1	
NIVA THYROID	3	
np thyroid	1	
propylthiouracil oral	1	

See page 5-7 for coverage details.



Drug name	Drug tier	Requirements & limits
RENTHYROID ORAL TABLET 120 MG, 15 MG, 30 MG, 60 MG, 90 MG	3	
thyroid oral	1	
TIROSINT	E	
TIROSINT-SOL	2	PA
unithroid	1	
<b>Immunological agents - Drugs for immune system stimulation or suppression</b>		
ACTEMRA ACTPEN	3	PA, ST, QL, SP
ACTEMRA SUBCUTANEOUS	3	PA, ST, QL, SP
ADALIMUMAB-ADAZ	2	PA, (manufactured by Sandoz), QL, SP
AMJEVITA	2	PA, QL, SP
AMJEVITA-PED 15KG TO <30KG	2	PA, SP
ANDEMBRY	2	PA, QL, SP
azathioprine oral	1	
BIMZELX	3	PA, ST, QL, SP
CIMZIA	2	PA, QL, SP
COSENTYX	2	PA, QL, SP
cyclosporine modified oral capsule	1	
cyclosporine oral	1	
EMPAVELI	2	PA, QL, SP
ENBREL	2	PA, QL, SP
ENTYVIO PEN	2	PA, (SUBCUTANEOUS), QL, SP
everolimus oral tablet 0.25 mg, 0.5 mg, 0.75 mg, 1 mg	1	
gengraf	1	
HAEGARDA	2	PA, QL, SP
HUMIRA*	E	PA, QL, SP
HYFTOR	3	PA, QL
JYLAMVO	3	PA
leflunomide oral	1	
LITFULO	3	PA, QL, SP
LUPKYNIS	3	PA, QL, SP

Drug name	Drug tier	Requirements & limits
methotrexate sodium (pf)	1	
methotrexate sodium injection solution	1	
methotrexate sodium oral	1	
mycophenolate mofetil oral	1	
mycophenolate sodium	1	
mycophenolic acid	1	
MYHIBBIN	1	
OLUMIANT	3	PA, ST, QL, SP
OMVOH SUBCUTANEOUS	2	PA, QL, SP
ORENCIA CLICKJECT	3	PA, ST, QL, SP
OTEZLA	2	PA, QL, SP
PROGRAF ORAL CAPSULE	3	
RASUVO	2	QL
RINVOQ	2	PA, QL, SP
RUCONEST	3	PA, QL, SP
SIMPONI	2	PA, QL, SP
sirolimus oral tablet	1	
SKYRIZI	2	PA, QL, SP
SOTYKTU	2	PA, QL, SP
tacrolimus oral	1	
TAKHZYRO	2	PA, QL, SP
TREXALL	2	
VYVGART HYTRULO SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	3	PA, QL, SP
XELJANZ	2	PA, QL, SP
XELJANZ XR	2	PA, QL, SP
XOLAIR SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	2	PA, QL, SP
YESINTEK SUBCUTANEOUS	2	PA, QL, SP
<b>Immunological agents - Drugs for vaccination</b>		
ABRYSCO	3	H
ADACEL	3	H
AFLURIA PRESERVATIVE FREE	3	H
AREXVY	3	H
BEXSERO	3	H
BOOSTRIX	2	H

See page 5-7 for coverage details.

\* Members currently on therapy may be allowed to continue.



Drug name	Drug tier	Requirements & limits
BOOSTRIX INTRAMUSCULAR SUSPENSION 5-2.5-18.5 LF-MCG/0.5	2	H
CAPVAXIVE	3	H
COMIRNATY	3	H
COMIRNATY 5-11 YEARS	3	H
ENGERIX-B	2	H
FLUAD	3	H
FLUARIX	3	H
FLUCELVAX INTRAMUSCULAR SUSPENSION PREFILLED SYRINGE	3	H
FLULAVAL	3	H
FLUMIST	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
MNEXSPIKE	3	H
PNEUMOVAX 23	2	H
PREVNAR 20	3	H
PRIORIX	3	H
RECOMBIVAX HB	2	H
SHINGRIX INTRAMUSCULAR SUSPENSION RECONSTITUTED	3	H
SPIKEVAX	3	H
SPIKEVAX 6M-11Y	3	H
TRUMENBA	3	H
TWINRIX	3	H

Drug name	Drug tier	Requirements & limits
VAQTA INTRAMUSCULAR SUSPENSION PREFILLED SYRINGE	2	H
VARIVAX	3	H
<b>Infertility agents</b>		
CETROTIDE	3	PA, ST, QL, SP
CHORIONIC GONADOTROPIN INTRAMUSCULAR	3	SP
CLOMID	1	
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	3	ST, SP
MENOPUR	3	QL, SP
NOVAREL	3	SP
OVIDREL	3	SP
PREGNYL	3	SP
progesterone vaginal	1	
<b>Inflammatory bowel disease agents</b>		
ANUCORT-HC	2	
APRISO	1	
balsalazide disodium	1	
budesonide oral	1	
budesonide rectal	1	
CORTIFOAM	2	
DIPENTUM	3	
HEMMOREX-HC RECTAL SUPPOSITORY 25 MG	3	
hydrocortisone (perianal) external cream 2.5 %	1	
hydrocortisone ace-pramoxine external cream 1-1 %	1	

See page 5-7 for coverage details.



Drug name	Drug tier	Requirements & limits
hydrocortisone acetate rectal	1	
hydrocort-pramoxine (perianal)	1	
mesalamine oral capsule delayed release 400 mg	1	
mesalamine oral tablet delayed release 1.2 gm	1	
mesalamine rectal	1	QL
PROCTOFOAM HC	2	
procto-med hc	1	
sulfasalazine oral	1	
UCERIS ORAL	1	
<b>Metabolic bone disease agents - Drugs for osteoporosis</b>		
alendronate sodium oral tablet	1	
BONSITY	3	PA, SP
calcitonin (salmon)	1	
ibandronate sodium oral	1	
raloxifene hcl	1	H-PA
risedronate sodium oral tablet	1	
TERIPARATIDE	3	PA, SP
TYMLOS	3	PA, SP
<b>Metabolic bone disease agents - Other</b>		
calcitriol oral capsule	1	
cinacalcet hcl	1	
YORVIPATH	3	PA, QL, SP
<b>Ophthalmic agents - Drugs for eye allergy, infection and inflammation</b>		
ALREX	3	QL
AZASITE	3	
azelastine hcl ophthalmic	1	
bacitracin-polymyxin b	1	
BESIVANCE	3	
bromfenac sodium (once-daily)	1	
ciprofloxacin hcl ophthalmic	1	
dexamethasone sodium phosphate ophthalmic	1	
diclofenac sodium ophthalmic	1	
epinastine hcl	1	QL

Drug name	Drug tier	Requirements & limits
erythromycin ophthalmic	1	H-PA
EYSUVIS	3	QL
FLAREX	2	
FML FORTE	3	
FML LIQUIFILM	3	
gatifloxacin ophthalmic	1	
gentamicin sulfate ophthalmic	1	QL
INVELTYS	3	
ketorolac tromethamine ophthalmic	1	
LOTEMAX OPHTHALMIC OINTMENT	3	
LOTEMAX SM	3	QL
loteprednol etabonate ophthalmic suspension	1	QL
moxifloxacin hcl (2x day)	1	
moxifloxacin hcl ophthalmic	1	
neomycin-polymyxin-dexameth	1	
NEVANAC	3	
ofloxacin ophthalmic	1	
polymyxin b-trimethoprim	1	
PRED MILD	3	
prednisolone acetate ophthalmic	1	
sulfacetamide sodium ophthalmic	1	
TOBRADEX	3	
tobramycin ophthalmic	1	QL
tobramycin-dexamethasone	1	
XDEMVY	3	PA, QL
ZIRGAN	3	
ZYLET	3	
<b>Ophthalmic agents - Drugs for glaucoma</b>		
ALPHAGAN P OPHTHALMIC SOLUTION 0.1 %	1	QL
ALPHAGAN P OPHTHALMIC SOLUTION 0.15 %	3	QL
BETIMOL OPHTHALMIC SOLUTION 0.25 %	2	QL

See page 5-7 for coverage details.



Drug name	Drug tier	Requirements & limits
BETIMOL OPHTHALMIC SOLUTION 0.5 %	3	QL
bimatoprost ophthalmic solution 0.03 %	1	QL
brimonidine tartrate ophthalmic solution 0.15 %	1	QL
brimonidine tartrate ophthalmic solution 0.2 %	1	
brinzolamide	1	QL
COMBIGAN	1	QL
dorzolamide hcl ophthalmic	1	
dorzolamide hcl-timolol mal	1	
ISTALOL	3	
latanoprost ophthalmic	1	
LUMIGAN	2	QL
methazolamide oral	1	
pilocarpine hcl ophthalmic solution 1 %, 2 %, 4 %	1	
RHOPRESSA	3	QL
ROCKLATAN	3	QL
tafluprost (pf)	1	ST, QL
timolol hemihydrate	1	QL
timolol maleate (once-daily)	1	
timolol maleate ocudose	1	
timolol maleate ophthalmic	1	
timolol maleate pf	1	
TIMOPTIC OCUDOSE	3	
travoprost (bak free)	1	QL
ZIOPTAN	3	ST, QL
<b>Ophthalmic agents - Drugs for miscellaneous eye conditions</b>		
atropine sulfate ophthalmic solution 1 %	1	
cromolyn sodium ophthalmic	1	
cyclopentolate hcl ophthalmic	1	
difluprednate	1	
MIEBO	3	PA, QL
RESTASIS	1	PA, QL
TRYPTYR	3	PA, QL

Drug name	Drug tier	Requirements & limits
TYRVAYA	3	PA, QL
VERKAZIA	3	PA, QL
XIIDRA	3	PA, QL
<b>Otic agents - Drugs for ear conditions</b>		
acetic acid otic	1	
CIPRO HC	3	
ciprofloxacin hcl otic	1	
ciprofloxacin-dexamethasone	1	
flac otic oil 0.01 %	1	
fluocinolone acetonide otic	1	
hydrocortisone-acetic acid	1	
neomycin-polymyxin-hc otic	1	
ofloxacin otic	1	
<b>Respiratory - Drugs for anaphylaxis</b>		
AUVI-Q	2	QL
epinephrine solution auto-injector 0.15 mg/0.15ml injection	1	(generic for Adrenaclick), QL
epinephrine solution auto-injector 0.15 mg/0.3ml injection	1	(generic for EpiPen-JR), QL
epinephrine solution auto-injector 0.3 mg/0.3ml injection	1	(generic for Adrenaclick), QL
epinephrine solution auto-injector 0.3 mg/0.3ml injection	1	(generic for EpiPen), QL
NEFFY	3	QL
<b>Respiratory tract / Pulmonary agents - Drugs for allergies, cough, cold</b>		
azelastine hcl nasal solution 0.1 %, 137 mcg/spray	1	
benzonatate oral capsule 100 mg, 200 mg	1	
carbinoxamine maleate oral tablet 4 mg	1	
cyproheptadine hcl oral	1	
flunisolide nasal	1	
fluticasone propionate nasal	1	
g tussin ac	1	
guaifenesin-codeine	1	
hydrocod poli-chlorphe poli er	1	PA, QL

See page 5-7 for coverage details.



Drug name	Drug tier	Requirements & limits
hydrocodone bit-homatrop mbr oral solution	1	PA, QL
hydromet	1	PA, QL
HYPERSAL	2	
ipratropium bromide nasal	1	
levocetirizine dihydrochloride oral	1	
maxi-tuss ac	1	
mometasone furoate nasal	1	QL
NEBUSAL INHALATION NEBULIZATION SOLUTION 3 %	3	
ODACTRA	3	PA, QL
olopatadine hcl nasal	1	
PALFORZIA (1 MG DAILY DOSE)	3	PA
PALFORZIA INITIAL DOSE 1-3YRS	3	PA, QL
PALFORZIA INITIAL DOSE 4-17YRS	3	PA, QL
PALFORZIA ORAL 0.5 & 1 & 1.5 & 3 & 6 MG, 2 X 1 MG & 10 MG, 2 X 100 MG, 2 X 20 MG, 2 X 20 MG & 2 X 100 MG, 20 MG, 20 MG & 100 MG, 3 X 1 MG, 3 X 20 MG & 100 MG, 4 X 20 MG, 6 X 1 MG	3	PA, QL
promethazine-codeine	1	PA, QL
promethazine-dm	1	
pseudoephedrine-bromphen-dm	1	
PULMOSAL	2	
RHAPSIDO	2	PA, QL, SP
sodium chloride inhalation	1	
<b>Respiratory tract / Pulmonary agents - Drugs for asthma and COPD</b>		
acetylcysteine inhalation	1	
ADVAIR HFA	3	QL, RS
AEROCHAMBER HOLDING CHAMBER	2	
AEROCHAMBER PLS FLOVU MTHPIECE	2	
AEROCHAMBER PLUS FLO-VU DEVICE	2	

Drug name	Drug tier	Requirements & limits
AEROCHAMBER PLUS FLO-VU INTERM	2	
AEROCHAMBER2GO ANTI-STATIC	2	
AIRSUPRA	3	QL
albuterol sulfate hfa aerosol solution 108 (90 base) mcg/act inhalation	1	(generic for Ventolin HFA), QL
albuterol sulfate hfa aerosol solution 108 (90 base) mcg/act inhalation	1	(generic ProAir HFA or Proventil HFA), QL
albuterol sulfate inhalation	1	
albuterol sulfate oral syrup 2 mg/5ml	1	
ANORO ELLIPTA	3	QL
ARNUITY ELLIPTA	1	QL
ATROVENT HFA	3	QL
BEVESPI AEROSPHERE	2	QL
BREATHE COMFORT CHAMBER/ADULT	2	
BREATHE COMFORT CHAMBER/CHILD	2	
BREO ELLIPTA	3	QL, RS
BREZTRI AEROSPHERE	3	QL, RS
budesonide inhalation	1	QL
COMBIVENT RESPIMAT	3	QL
EASIVENT	2	
EASIVENT MASK LARGE	2	
EASIVENT MASK MEDIUM	2	
EASIVENT MASK SMALL	2	
FASENRA PEN	3	PA, QL, SP
FLEXICHAMBER	2	
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	3	QL

See page 5-7 for coverage details.



Drug name	Drug tier	Requirements & limits
GRASTEK	3	PA, QL
INSPIREASE	2	
ipratropium bromide inhalation	1	
ipratropium-albuterol	1	
levalbuterol hcl inhalation	1	QL
LEVALBUTEROL HFA INHALATION AEROSOL 45 MCG/ACT	3	QL
MICROCHAMBER	2	
montelukast sodium oral	1	
NUCALA	3	PA, QL, SP
PERFORMIST	3	QL
PROCHAMBER VHC	2	
QVAR REDIHALER	1	QL
roflumilast	1	QL
SEREVENT DISKUS	2	QL
SPIRIVA HANDIHALER	1	QL
SPIRIVA RESPIMAT	2	QL
STIOLTO RESPIMAT	2	QL
STRIVERDI RESPIMAT	2	QL
SYMBICORT	1	QL, RS
TEZSPIRE SUBCUTANEOUS SOLUTION AUTO-INJECTOR	3	PA, QL, SP
theophylline er oral tablet extended release 12 hour	1	
TRELEGY ELLIPTA	3	QL, RS
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 SUBCUTANEOUS SOLUTION AUTO-INJECTOR	2	PA, QL, SP
XOPENEX HFA	3	QL
YUPELRI	3	PA, QL

Drug name	Drug tier	Requirements & limits
zafirlukast	1	
<b>Respiratory tract / Pulmonary agents - Drugs for cystic fibrosis</b>		
BRONCHITOL	3	PA, ST, QL, SP
PULMOZYME	2	PA, QL, SP
TOBI PODHALER	3	PA, QL, SP
<b>Respiratory tract / Pulmonary agents - Drugs for pulmonary fibrosis</b>		
JASCAYD	3	PA, SP
OFEV	3	PA, QL, SP
<b>Respiratory tract / Pulmonary agents - Drugs for pulmonary hypertension</b>		
ADEMPAS	2	PA, QL, SP
OPSUMIT	2	PA, QL, SP
TADLIQ	3	PA, QL, SP
TYVASO	2	PA, SP
TYVASO DPI	2	PA, QL, SP
<b>Skeletal muscle relaxants - Drugs for muscle pain and spasm</b>		
baclofen oral suspension	1	PA
baclofen oral tablet 10 mg, 20 mg, 5 mg	1	
carisoprodol oral tablet 350 mg	1	
chlorzoxazone oral tablet 500 mg	1	
cyclobenzaprine hcl oral tablet 10 mg, 5 mg	1	
dantrolene sodium oral	1	
metaxalone oral tablet 400 mg, 800 mg	1	
methocarbamol oral tablet 500 mg, 750 mg	1	
orphenadrine citrate er	1	
tizanidine hcl oral capsule 2 mg, 4 mg, 6 mg	1	
tizanidine hcl oral tablet	1	
<b>Sleep disorder agents</b>		
armodafinil	1	QL
BELSOMRA	3	QL
eszopiclone	1	

See page 5-7 for coverage details.



Drug name	Drug tier	Requirements & limits
LUMRYZ	3	PA, QL, SP
modafinil oral	1	QL
ramelteon	1	QL
sodium oxybate	1	PA, (Manufactured by Hikma), QL, SP
SUNOSI	2	PA, QL
temazepam	1	
WAKIX	3	PA, QL, SP
XYWAV	3	PA, QL, SP
zaleplon	1	
zolpidem tartrate er	1	
zolpidem tartrate oral tablet	1	

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ARANESP (ALBUMIN FREE) INJECTION SOLUTION 25 MCG/ML	24	AVONEX	18	benazepril-hydrochlorothiazide	16
ARBLI	16	ayuna	27	BENEFIX	24
AREXVY	32	AZASITE	34	benzonatate oral capsule 100 mg, 200 mg	35
aripiprazole oral solution	14	azathioprine oral	32	benzoyl peroxide-erythromycin	19
aripiprazole oral tablet	14	azelaic acid external	19	benztropine mesylate oral	14
armodafinil	37	azelastine hcl nasal solution 0.1 %, 137 mcg/spray	35	BESIVANCE	34
ARMOUR THYROID	31	azelastine hcl ophthalmic	34	BESREMI	13
ARNUITY ELLIPTA	36	AZELEX	19	betamethasone dipropionate aug external cream	19
ascomp-codeine	8	azithromycin oral	9	betamethasone dipropionate aug external lotion	19
asenapine maleate	14	AZSTARYS	18	betamethasone dipropionate aug external ointment	19
ashlyna	27	azurette	27	betamethasone dipropionate external	19
aspirin 81 oral tablet delayed release	8	<b>B</b>			
atenolol oral	16	bac (butalbital-acetamin-caff)	8		
atenolol-chlorthalidone	16	bacitracin-polymyxin b	34		
atomoxetine hcl	18	baclofen oral suspension	37		
ATORVALIQ	16	baclofen oral tablet 10 mg, 20 mg, 5 mg	37		
atorvastatin calcium oral tablet 10 mg, 20 mg	16	BAFIERTAM	18		
atorvastatin calcium oral tablet 40 mg, 80 mg	16	balsalazide disodium	33		
		balziva	27		

betamethasone valerate external cream	19
betamethasone valerate external lotion	19
betamethasone valerate external ointment	19
BETASERON	18
bethanechol chloride oral	27
BETIMOL OPHTHALMIC SOLUTION 0.25 %	34
BETIMOL OPHTHALMIC SOLUTION 0.5 %	35
BEVESPI AEROSPHERE	36
BEXSERO	32
bicalutamide	13
BIJUVA	27
BIKTARVY	15
bimatoprost ophthalmic solution 0.03 %	35
BIMZELX	32
bisubcit-metronid-tetracyc	25
bisacodyl oral tablet delayed release 5 mg	26
bismuth/metronidaz/tetracyclin	25
bisoprolol fumarate oral	16
bisoprolol-hydrochlorothiazide	16
blisovi 24 fe	27
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blisovi fe 1.5/30	27
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BREZTRI AEROSPHERE	36
briellyn	27
brimonidine tartrate external	19

brimonidine tartrate ophthalmic solution 0.15 %	35
brimonidine tartrate ophthalmic solution 0.2 %	35
brinzolamide	35
BRIVIACT	10
bromfenac sodium (once-daily)	34
bromocriptine mesylate oral tablet	14
BRONCHITOL	37
budesonide inhalation	36
budesonide oral	33
budesonide rectal	33
bumetanide oral	16
buprenorphine	8, 9
buprenorphine hcl sublingual	9
buprenorphine hcl-naloxone hcl sublingual film	9
buprenorphine hcl-naloxone hcl sublingual tablet sublingual	9
bupropion hcl er (smoking det)	9
bupropion hcl er (sr)	11
bupropion hcl oral	11
bupirone hcl oral	15
butalbital-acetaminophen oral tablet 50-325 mg	8
butalbital-apap-caff-cod oral capsule 50-325-40-30 mg	8
butalbital-apap-caffeine	8
butalbital-asa-caff-codeine	8
butalbital-aspirin-caffeine	8
butorphanol tartrate nasal	8
BYDUREON BCISE AUTOINJECTOR SUBCUTANEOUS AUTO-INJECTOR 2 MG/0.85ML	23
BYETTA 5 MCG PEN SUBCUTANEOUS SOLUTION PEN-INJECTOR 5 MCG/0.02ML	23
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calcipotriene external cream	19
calcipotriene external ointment	19
calcipotriene external solution	19
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calcitriol oral capsule	34
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CAPLYTA	14
captopril oral	16
CAPVAXIVE	33
carbamazepine er	10
carbamazepine oral tablet	10
carbamazepine oral tablet chewable	10
CARBATROL	10
carbidopa-levodopa er oral tablet extended release	14
carbidopa-levodopa oral tablet	14
carbinoxamine maleate oral tablet 4 mg	35
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CAREPOINT POLY HUB NEEDLE 22G X 1-1/2"	21
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cefdinir.....	9	citalopram hydrobromide oral tablet.....	12	clonidine hcl oral.....	16
cefixime oral capsule.....	9	claravis.....	19	clonidine patch weekly.....	16
cefpodoxime proxetil oral tablet.....	9	clarithromycin oral.....	9	clopidogrel bisulfate oral.....	14
cefprozil.....	9	clearlax.....	26	clorazepate dipotassium.....	15
cefuroxime axetil.....	9	CLENPIQ.....	26	clotrimazole mouth/throat.....	12
celecoxib oral.....	8	CLIMARA PRO.....	27	clotrimazole-betamethasone.....	20
cephalexin.....	9	clindacin.....	19	clozapine oral tablet.....	14
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CETROTIDE.....	33	clindacin-p.....	19	colchicine oral.....	13
cevimeline hcl.....	18	clindamycin hcl oral.....	9	colchicine-probenecid.....	13
charlotte 24 fe.....	27	clindamycin palmitate hcl.....	9	colesevelam hcl oral tablet.....	16
chateal eq.....	27	clindamycin phos (twice-daily) gel 1 % external.....	19	colestipol hcl oral tablet.....	16
chlordiazepoxide hcl.....	15	clindamycin phos-benzoyl perox external gel 1.2-5 %.....	19	COMBIGAN.....	35
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cholestyramine light.....	16	clobazam oral suspension 2.5 mg/ml.....	10	CONTOUR NEXT EZ KIT W/ DEVICE.....	21
cholestyramine oral.....	16	clobazam oral tablet.....	10	CONTOUR NEXT GEN MONITOR KIT W/DEVICE.....	21
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CIBINQO.....	19	clobetasol propionate e.....	19	CONTOUR NEXT MONITOR KIT W/DEVICE.....	21
ciclodan.....	12	clobetasol propionate external cream 0.05 %.....	19	CONTOUR NEXT ONE KIT.....	21
ciclopirox external.....	12	clobetasol propionate external gel.....	20	CONTOUR PLUS BLUE KIT W/ DEVICE.....	22
ciclopirox olamine external cream.....	12	clobetasol propionate external liquid.....	20	CONTOUR PLUS TEST STRIP.....	22
ciclopirox olamine external suspension.....	19	clobetasol propionate external ointment.....	20	CORLANOR ORAL TABLET.....	16
cilostazol.....	14	clobetasol propionate external solution.....	20	CORTEF.....	31
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CIMZIA.....	32	clomipramine hcl oral.....	12	COTELLIC.....	13
cinacalcet hcl.....	34	clonazepam oral.....	15	CREON.....	26
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ciprofloxacin hcl oral.....	9			cromolyn sodium ophthalmic.....	35
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cryselle .....	28	DESCOVY ORAL TABLET 120-15 MG .....	15	dicloxacillin sodium .....	9
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curae oral tablet 1.5 mg.....	28	desipramine hcl oral .....	12	dicyclomine hcl oral solution 10 mg/5ml.....	26
cyanocobalamin injection solution 1000 mcg/ml .....	24	desmopressin acetate oral .....	31	dicyclomine hcl oral tablet 20 mg .....	26
cyanocobalamin nasal .....	24	desmopressin acetate spray.....	31	difluprednate.....	35
cyclobenzaprine hcl oral tablet 10 mg, 5 mg.....	37	desogestrel-ethinyl estradiol.....	28	digoxin oral tablet.....	16
cyclopentolate hcl ophthalmic ...	35	desonide external cream .....	20	DILANTIN .....	10
cyclophosphamide oral capsule...13		desonide external lotion.....	20	dilt-xr .....	16
cyclosporine modified oral capsule .....	32	desonide external ointment.....	20	diltiazem hcl er .....	16
cyclosporine oral.....	32	desoximetasone external cream. 20		diltiazem hcl er beads.....	16
cyproheptadine hcl oral .....	35	desoximetasone external ointment.....	20	diltiazem hcl er coated beads ....	16
cyred eq .....	28	desvenlafaxine succinate er .....	12	diltiazem hcl oral .....	16
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dabigatran etexilate mesylate.....	10	dexamethasone intensol .....	31	DIPENTUM.....	33
dantrolene sodium oral .....	37	dexamethasone oral elixir .....	31	diphenoxylate-atropine oral tablet .....	26
dapsone external.....	20	dexamethasone oral solution .....	31	disulfiram oral .....	9
dapsone oral.....	13	dexamethasone oral tablet.....	31	divalproex sodium er.....	10
darunavir .....	15	dexamethasone sodium phosphate ophthalmic.....	34	divalproex sodium oral.....	10
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deblitane .....	28	DEXCOM G7 RECEIVER.....	22	donepezil hcl oral tablet .....	11
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DEPAKOTE ER .....	10	diazepam oral tablet .....	15	doxepin hcl oral capsule .....	12
DEPAKOTE SPRINKLES .....	10	diazepam rectal .....	10	doxepin hcl oral concentrate.....	12
DEPO-ESTRADIOL .....	28	diclofenac potassium oral tablet 50 mg.....	8	doxycycline hyclate oral capsule ...	9
DEPO-PROVERA INTRAMUSCULAR SUSPENSION PREFILLED SYRINGE .....	28	diclofenac sodium er.....	8	doxycycline hyclate oral tablet 100 mg, 20 mg.....	10
DEPO-SUBQ PROVERA 104.....	28	diclofenac sodium external gel 3% .....	20	doxycycline monohydrate oral capsule 100 mg, 50 mg .....	10
DERMA-SMOOTH/FS BODY.....	20	diclofenac sodium ophthalmic ...	34	doxycycline monohydrate oral suspension reconstituted .....	10
DERMA-SMOOTH/FS SCALP.....	20	diclofenac sodium oral.....	8	doxycycline monohydrate oral tablet .....	10
		diclofenac-misoprostol.....	8	dronabinol.....	12

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DROPSAFE SICURA.....	22	emzahn.....	28	erythromycin external.....	20
drosipren-eth estrad-levomefol oral tablet 3-0.03-0.451 mg.....	28	enalapril maleate oral solution.....	16	erythromycin ophthalmic.....	34
drosiprenone-ethinyl estradiol.....	28	enalapril maleate oral tablet.....	16	escitalopram oxalate oral solution.....	12
DRYSOL.....	20	enalapril-hydrochlorothiazide.....	16	escitalopram oxalate oral tablet.....	12
DUAVEE.....	28	ENBREL.....	32	eslicarbazepine acetate.....	11
duloxetine hcl oral capsule delayed release particles 20 mg, 30 mg, 60 mg.....	12	endocet.....	8	esomeprazole magnesium oral packet.....	25
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dutasteride oral.....	27	ENGERIX-B.....	33	est estrogens-methyltest ds.....	28
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EASIVENT MASK LARGE.....	36	enoxaparin sodium injection solution prefilled syringe.....	10	estazolam.....	15
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EASIVENT MASK SMALL.....	36	ENSACOVE.....	13	estradiol patch twice weekly.....	28
EBGLYSS.....	20	enskyce.....	28	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.....	28
ec-naproxen.....	8	ENSTILAR.....	20	estradiol transdermal gel 0.75 mg/1.25 gm (0.06%).....	28
econazole nitrate external cream.....	12	entacapone.....	14	estradiol transdermal patch weekly.....	28
econtra one-step.....	28	entecavir.....	15	estradiol vaginal.....	28
EDEX (2 CARTRIDGE).....	27	ENTYVIO PEN.....	32	estradiol valerate intramuscular.....	28
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elinst.....	28	epinephrine solution auto- injector 0.15 mg/0.15ml injection.....	35	eszopiclone.....	37
ELIQUIS.....	10	epinephrine solution auto- injector 0.15 mg/0.3ml injection.....	35	ethambutol hcl oral.....	13
ELLA.....	28	epinephrine solution auto- injector 0.3 mg/0.3ml injection.....	35	ethosuximide oral.....	11
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		errin.....	28		
		erythromycin base oral tablet.....	10		

euthyrox oral tablet 100 mcg, 112 mcg, 125 mcg, 137 mcg, 150 mcg, 175 mcg, 200 mcg, 25 mcg, 50 mcg, 75 mcg, 88 mcg	31	finasteride oral tablet 5 mg	27	fluticasone-salmeterol inhalation aerosol powder breath activated 100-50 mcg/ act, 250-50 mcg/act, 500-50 mcg/act	36
EVAMIST	28	finzala	28	FLUTICASONE-SALMETEROL INHALATION AEROSOL POWDER BREATH ACTIVATED 113-14 MCG/ACT, 232-14 MCG/ ACT, 55-14 MCG/ACT	36
everolimus oral tablet 0.25 mg, 0.5 mg, 0.75 mg, 1 mg	32	flac otic oil 0.01 %	35	fluvastatin sodium	16
EVEXITHROID ORAL TABLET 120 MG, 15 MG, 180 MG, 30 MG, 60 MG, 90 MG	31	FLAREX	34	fluvoxamine maleate	12
EVRYSDI	26	flecainide acetate	16	fluvoxamine maleate er	12
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FABHALTA	24	fludrocortisone acetate oral	31	folic acid oral tablet 1 mg	24
falmina	28	FLULAVAL	33	folic acid oral tablet 400 mcg, 800 mcg	24
famciclovir oral	15	FLUMIST	33	FOLLISTIM AQ	33
famotidine oral suspension reconstituted	25	flunisolide nasal	35	fosfomycin tromethamine	10
FANAPT	14	fluocinolone acetonide body	20	fosinopril sodium	16
FASENRA PEN	36	fluocinolone acetonide external	20	FRAICHE 5000 DENTAL DENTAL GEL 1.1 %	19
febuxostat	13	fluocinolone acetonide otic	35	FREESTYLE LIBRE 14 DAY READER	22
feirza 1/20	28	fluocinolone acetonide scalp	20	FREESTYLE LIBRE 14 DAY SENSOR	22
feirza 1.5/30	28	fluocinonide external cream 0.05 %	20	FREESTYLE LIBRE 2 PLUS SENSOR	22
felbamate oral tablet	11	fluocinonide external gel	20	FREESTYLE LIBRE 2 READER	22
felodipine er	16	fluocinonide external ointment	20	FREESTYLE LIBRE 2 SENSOR	22
FEMRING	28	fluocinonide external solution	20	FREESTYLE LIBRE 3 PLUS SENSOR	22
fenofibrate micronized	16	FLUORIDEX	18	FREESTYLE LIBRE 3 READER	22
fenofibrate oral capsule 134 mg, 200 mg, 67 mg	16	FLUORIDEX ENHANCED WHITENING	18	FREESTYLE LIBRE 3 SENSOR	22
fenofibrate oral tablet 145 mg, 160 mg, 48 mg, 54 mg	16	FLUORIMAX 5000	18, 24	frovatriptan succinate	13
fenofibric acid oral capsule delayed release	16	FLUORIMAX 5000 SENSITIVE	24	ft naloxone hcl	9
fentanyl transdermal patch 72 hour 100 mcg/hr, 12 mcg/hr, 25 mcg/hr, 50 mcg/hr, 75 mcg/hr	8	fluorouracil external cream 5 %	20	furosemide oral	16
FETZIMA	12	fluoxetine hcl oral capsule	12	fyavolv	28
fidaxomicin	10	fluoxetine hcl oral solution	12		
FINACEA EXTERNAL FOAM	20	fluoxetine hcl oral tablet	12		
		fluphenazine hcl oral tablet	14		
		flurbiprofen oral	8		
		fluticasone propionate external cream	20		
		fluticasone propionate external ointment	20		
		fluticasone propionate nasal	35		



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gengraf .....	32
gentamicin sulfate external .....	10
gentamicin sulfate ophthalmic...	34
gentlelax oral powder 17 gm/ scoop .....	26
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glimepiride oral tablet 1 mg, 2 mg, 4 mg.....	23
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glipizide oral tablet 10 mg, 5 mg...	23
glipizide xl oral tablet extended release 24 hour 10 mg, 2.5 mg, 5 mg .....	23
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haloette vaginal ring 0.12-0.015 mg/24hr .....	28
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hydrocodone bit-homatrop mbr oral solution .....	36
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hydrocodone-acetaminophen oral tablet 10-325 mg, 2.5-325 mg, 5-325 mg, 7.5-325 mg .	8
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hydrocortisone (perianal) external cream 2.5 % .....	33



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hydrocortisone acetate rectal	34
hydrocortisone external cream 2.5 %	20
hydrocortisone external lotion 2.5 %	20
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ketoconazole external cream.....	12	LANTUS SOLOSTAR.....	23	levora 0.15/30 (28).....	29
ketoconazole external shampoo ..	12	LANTUS U-100 VIAL .....	23	levothyroxine sodium oral tablet ..	31
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ketorolac tromethamine ophthalmic .....	34	larin 1.5/30.....	29	LEVSIN/SL.....	26
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klayesta.....	12	larin fe 1.5/30.....	29	lidocaine external patch 5 %.....	8
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klor-con 10.....	24	lederle leucovorin.....	13	lidocaine viscous hcl .....	19
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		levetiracetam oral tablet .....	11	lithium carbonate er .....	15
		levo-t.....	31	lithium carbonate oral .....	15
		levocarnitine oral solution .....	24	LIVDELZI .....	26
		levocarnitine oral tablet .....	26	LO LOESTRIN FE.....	29
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lorazepam oral tablet .....	15	MEDROL ORAL TABLET THERAPY PACK .....	31	methylphenidate hcl er oral tablet extended release .....	18
loryna .....	29	medroxyprogesterone acetate intramuscular .....	29	methylphenidate hcl oral .....	18
losartan potassium oral .....	17	medroxyprogesterone acetate oral .....	29	methylprednisolone oral .....	31
losartan potassium-hctz .....	17	mefenamic acid oral .....	8	metoclopramide hcl oral solution .....	12
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LOTEMAX SM .....	34	megestrol acetate oral suspension 40 mg/ml .....	31	metolazone .....	17
loteprednol etabonate ophthalmic suspension .....	34	megestrol acetate oral tablet .....	29	metoprolol succinate er .....	17
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low-ogestrel .....	29	meloxicam oral tablet .....	9	metoprolol-hydrochlorothiazide .....	17
lubiprostone .....	26	memantine hcl er .....	11	metronidazole external cream .....	20
luizza 1/20 .....	29	memantine hcl oral tablet .....	11	metronidazole external gel 0.75 % .....	20
luizza 1.5/30 .....	29	MENOPUR .....	33	metronidazole external lotion .....	20
LUMAKRAS .....	13	MENOSTAR .....	29	metronidazole oral tablet 250 mg, 500 mg .....	10
LUMIGAN .....	35	MENQUADFI .....	33	metronidazole vaginal .....	10
LUMRYZ .....	38	MENVEO .....	33	mexiletine hcl oral .....	17
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lurasidone hcl .....	14	mesalamine oral capsule delayed release 400 mg .....	34	MICROCHAMBER .....	37
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lyleq .....	29	mesalamine rectal .....	34	microgestin 1.5/30 .....	29
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LYNPARZA .....	13	metformin hcl er .....	23	microgestin fe 1.5/30 .....	29
LYRICA ORAL CAPSULE .....	18	metformin hcl oral solution .....	23	midodrine hcl .....	17
LYUMJEV KWIKPEN .....	23	metformin hcl oral tablet 1000 mg, 500 mg, 850 mg .....	23	MIEBO .....	35
LYUMJEV VIAL .....	23	methazolamide oral .....	35	mili .....	29
lyza .....	29	methenamine hippurate .....	10	mimvey .....	29
<b>M</b>		methimazole oral .....	31	minocycline hcl oral capsule .....	10
M-M-R II .....	33	methocarbamol oral tablet 500 mg, 750 mg .....	37	minoxidil oral .....	17
M-NATAL PLUS .....	24	methotrexate sodium (pf) .....	32	minzoya .....	29
magnesium citrate oral solution .....	26	methotrexate sodium injection solution .....	32	mirabegron er .....	27
marlissa .....	29	methotrexate sodium oral .....	32	mirtazapine oral .....	12
MATRONEX .....	24	methylphenidate hcl er (cd) .....	18	MIRVASO .....	20
matzim la .....	17	methylphenidate hcl er (la) .....	18	misoprostol oral .....	25
MAVENCLAD .....	18			MITIGARE .....	13
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MAYZENT .....	18				

modafinil oral.....	38	nabumetone oral.....	9	nicotine mini.....	9
mometasone furoate external ...	20	nadolol oral.....	17	nicotine mouth/throat gum .....	9
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mono-lynyah.....	29	naltrexone hcl oral .....	9	nicotine polacrilex mini .....	9
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montelukast sodium oral .....	37	naproxen oral tablet delayed		nicotine step 3.....	9
morphine sulfate (concentrate)		release.....	9	nicotine transdermal patch	
oral solution 100 mg/5ml,		naproxen sodium oral tablet		24 hour.....	9
20 mg/ml .....	9	275 mg, 550 mg .....	9	nifedipine er.....	17
morphine sulfate er oral tablet		naratriptan hcl.....	13	nifedipine er osmotic release.....	17
extended release.....	8	NARCAN .....	9	nifedipine oral .....	17
morphine sulfate oral solution .....	9	NASCOBAL .....	25	nikki.....	29
morphine sulfate oral tablet.....	8	NATAZIA.....	29	nitazoxanide oral.....	14
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MOUNJARO .....	23	NAYZILAM.....	11	nitrofurantoin macrocrystal.....	10
MOVIPREP.....	26	nebulolol hcl.....	17	nitrofurantoin monohydrate	
moxifloxacin hcl (2x day) .....	34	NEBUSAL INHALATION		macrocrystals .....	10
moxifloxacin hcl ophthalmic .....	34	NEBULIZATION SOLUTION 3 % ..	36	nitrofurantoin oral suspension	
moxifloxacin hcl oral.....	10	necon 0.5/35 (28).....	29	25 mg/5ml.....	10
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multi-vitamin/fluoride.....	25	NEMLUVIO .....	20	nitroglycerin sublingual.....	17
multivitamin w/fluoride tablet		neomycin sulfate oral .....	10	nitroglycerin transdermal.....	17
chewable 0.25 mg oral.....	24	neomycin-polymyxin-dexameth.	34	NIVA THYROID .....	31
multivitamin w/fluoride tablet		neomycin-polymyxin-hc otic.....	35	NIVA-PLUS .....	25
chewable 0.5 mg oral .....	25	NEONATAL COMPLETE.....	25	NIVESTYM.....	24
multivitamin w/fluoride tablet		NEONATAL PLUS .....	25	nora-be .....	29
chewable 1 mg oral.....	25	neuac .....	20	NORDITROPIN FLEXPPO.....	31
multivitamin/fluoride oral tablet		NEULASTA.....	24	norelgestromin-eth estradiol .....	29
chewable .....	25	NEUPRO .....	14	norethin ace-eth estrad-fe oral	
mupirocin cream.....	10	NEVANAC.....	34	tablet .....	29, 30
mupirocin ointment.....	10	new day.....	29	norethin ace-eth estrad-fe oral	
my choice.....	29	NEXLETOL.....	17	tablet chewable .....	30
my way.....	29	NEXLIZET .....	17	norethin-eth estradiol-fe .....	30
mycophenolate mofetil oral .....	32	NGENLA .....	31	norethindron-ethinyl estrad-fe	
mycophenolate sodium.....	32	niacin er (antihyperlipidemic) .....	17	oral tablet 1-20/1-30/	
mycophenolic acid.....	32	NICODERM CQ.....	9	1-35 mg-mcg .....	30
MYFEMBREE.....	29	NICORETTE MOUTH/THROAT		norethindrone acet-ethinyl est... 30	
MYHIBBIN .....	32	GUM .....	9	norethindrone acetate oral.....	30
		NICORETTE STARTER KIT .....	9	norethindrone oral .....	30
		nicotine.....	9	norethindrone-eth estradiol.....	30

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na sulfate-k sulfate-mg sulf .....



norgestimate-eth estradiol oral tablet 0.25-35 mg-mcg	30
norgestimate-ethinyl estradiol triphasic	30
NORLIQVA	17
norlyroc	30
nortrel 0.5/35 (28)	30
nortrel 1/35 (21)	30
nortrel 1/35 (28)	30
nortrel 7/7/7	30
nortriptyline hcl oral capsule	12
NOVAREL	33
NOVOEIGHT	24
NOVOFINE AUTOCOVER PEN NEEDLE 30G X 8 MM	22
NOVOFINE PEN NEEDLE	22
NOVOFINE PLUS PEN NEEDLE	22
NOVOLIN R FLEXPEN RELION SOLUTION PEN-INJECTOR 100 UNIT/ML INJECTION	23
NOVOLIN R FLEXPEN SOLUTION PEN-INJECTOR 100 UNIT/ML INJECTION	23
NOVOPEN ECHO	22
np thyroid	31
NUBEQA	14
NUCALA	37
NUCYNTA	8
NUCYNTA ER	8
NUEDEXTA	18
NURTEC	13
NUWIQ INTRAVENOUS KIT	24
NUZYRA ORAL	10
nyamyc	12
nylia 1/35	30
nylia 7/7/7	30
nystatin external	12
nystatin mouth/throat	12
nystatin oral	12
nystatin-triamcinolone	12
nystop	12

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ocella oral tablet 3-0.03 mg	30
ODACTRA	36
ODEFSEY	15
ODOMZO	14
OFEV	37
ofloxacin ophthalmic	34
ofloxacin otic	35
olanzapine oral	14
olanzapine-fluoxetine hcl	12
olmesartan medoxomil oral	17
olmesartan medoxomil-hctz	17
olopatadine hcl nasal	36
OLUMIANT	32
omega-3-acid ethyl esters	17
omeprazole oral capsule delayed release	25
OMNIPOD 5 DEXCOM INTRO KIT	22
OMNIPOD 5 DEXCOM PODS	22
OMNIPOD 5 G7 INTRO (GEN 5) KIT	22
OMNIPOD 5 G7 PODS (GEN 5)	22
OMNIPOD 5 LIBRE PODS	22
OMNIPOD 5 LIBRE2 G6 INTRO GEN5	22
OMNITROPE	31
OMVOH SUBCUTANEOUS	32
ondansetron hcl oral solution 4 mg/5ml	12
ondansetron hcl oral tablet	12
ondansetron odt oral tablet dispersible 4 mg, 8 mg	12
ONE VITE WOMENS PLUS	25
ONFI	11
ONYDA XR	18
opcicon one-step	30
OPILL	30
OPSUMIT	37
option 2	30
OPVEE	9
OPZELURA	20

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ORFADIN ORAL CAPSULE	26
ORFADIN ORAL SUSPENSION	26
ORGOVYX	14
ORIAHNN	31
ORILISSA	31
orphenadrine citrate er	37
orquidea	30
OSCIMIN SUBLINGUAL	26
oseltamivir phosphate oral	15
OSPHENA	24
OTEZLA	32
OVIDREL	33
oxaprozin oral tablet	9
oxcarbazepine	11
oxybutynin chloride er	27
oxybutynin chloride oral	27
oxycodone hcl oral capsule	8
oxycodone hcl oral solution	8
oxycodone hcl oral tablet	8
oxycodone-acetaminophen oral tablet 10-325 mg, 2.5-325 mg, 5-325 mg, 7.5-325 mg	8
OZEMPIC	23

## P

PALFORZIA (1 MG DAILY DOSE)	36
PALFORZIA INITIAL DOSE 1-3YRS	36
PALFORZIA INITIAL DOSE 4-17YRS	36
PALFORZIA ORAL 0.5 & 1 & 1.5 & 3 & 6 MG, 2 X 1 MG & 10 MG, 2 X 100 MG, 2 X 20 MG, 2 X 20 MG & 2 X 100 MG, 20 MG, 20 MG & 100 MG, 3 X 1 MG, 3 X 20 MG & 100 MG, 4 X 20 MG, 6 X 1 MG	36
paliperidone er	14
PANCREAZE	27
PANRETIN	20
pantoprazole sodium oral tablet delayed release	25
paroxetine hcl er	12



paroxetine hcl oral tablet	12	PLENVU	26	prenatal plus vitamin/mineral	25
PAXLOVID	15	PNEUMOVAX 23	33	PRENATE ENHANCE	25
peg 3350-kcl-na bicarb-nacl	26	pnv 27-ca/fe/fa	25	PRENATE MINI	25
peg-3350/electrolytes	26	pnv-dha	25	PRENATE RESTORE	25
peg-3350/electrolytes/ascorbat	26	podofilox external solution	20	prevalite	17
peg-kcl-nacl-nasulf-na asc-c	26	polyethylene glycol 3350 oral powder	26	PREVIDENT 5000 BOOSTER PLUS	19
penicillin v potassium	10	polymyxin b-trimethoprim	34	PREVIDENT 5000 DRY MOUTH	19
pentoxifylline er	17	portia-28	30	PREVIDENT 5000 ENAMEL PROTECT	25
perampanel oral tablet	11	posaconazole oral tablet delayed release	12	PREVIDENT 5000 KIDS	19
PERFOROMIST	37	potassium chloride crys er	25	PREVIDENT 5000 ORTHO DEFENSE	19
perindopril erbumine	17	potassium chloride er	25	PREVIDENT 5000 PLUS	19
perio gard	19	potassium chloride oral packet 20 meq	25	PREVIDENT 5000 SENSITIVE	25
permethrin external	14	potassium chloride oral solution	25	PREVIDENT DENTAL	19
perphenazine oral	12	potassium citrate er	25	PREVIDENT MOUTH/THROAT	19
PERTZYE	27	potassium citrate-citric acid	25	PREVNAR 20	33
phenazo oral tablet 200 mg	27	pramipexole dihydrochloride	14	PREVYMIS ORAL TABLET	15
phenazopyridine hcl oral tablet 100 mg, 200 mg	27	prasugrel hcl	14	PREZCOBIX	15
phenobarbital oral elixir 20 mg/5ml	11	pravastatin sodium	17	primidone oral tablet 125 mg	11
phenobarbital oral tablet	11	prazosin hcl oral	17	primidone oral tablet 250 mg, 50 mg	11
phenytek	11	PRED MILD	34	PRIORIX	33
phenytoin sodium extended	11	prednisolone acetate ophthalmic	34	probenecid	13
philith	30	prednisolone oral solution	31	PROCHAMBER VHC	37
PHOSPHA 250 NEUTRAL	25	prednisolone sodium phosphate oral solution 15 mg/5ml	31	prochlorperazine maleate oral	12
phospho-trin 250 neutral	25	prednisone oral solution	31	procto-med hc	34
phosphorous	25	prednisone oral tablet	31	PROCTOFOAM HC	34
PIFELTRO	15	prednisone oral tablet therapy pack	31	progesterone intramuscular	30
pilocarpine hcl ophthalmic solution 1 %, 2 %, 4 %	35	pregabalin oral capsule	18	progesterone oral	30
pilocarpine hcl oral	19	PREGNYL	33	progesterone vaginal	33
pimecrolimus	20	PREMARIN ORAL	30	PROGRAF ORAL CAPSULE	32
pimtrex	30	PREMARIN VAGINAL	30	promethazine hcl oral	12
pindolol	17	premium lidocaine external ointment 5 %	8	promethazine hcl rectal	12
pioglitazone hcl	23	PREMPHASE	30	promethazine-codeine	36
pioglitazone hcl-metformin hcl	23	PREMPRO	30	promethazine-dm	36
PIQRAY	14	prenatal oral tablet 27-1 mg	25	propafenone hcl	17
piroxicam oral	9	prenatal plus	25	propafenone hcl er	17
PLAN B ONE-STEP	30			propranolol hcl er	17
PLEGRIDY	18			propranolol hcl oral	17
PLEGRIDY INTRAMUSCULAR	18				



propylthiouracil oral	31
prucalopride succinate	26
pseudoephedrine-bromphen-dm	36
PULMOSAL	36
PULMOZYME	37
PYLERA	25
PYRIDIDIUM	27
pyridostigmine bromide er oral tablet extended release	13
pyridostigmine bromide oral tablet 60 mg	13

## Q

quetiapine fumarate	14
quetiapine fumarate er	14
QULIPTA	13
QVAR REDIHALER	37

## R

rabeprazole sodium oral tablet delayed release	25
RADICAVA ORS	18
RADICAVA ORS STARTER KIT	18
RALDESY	12
raloxifene hcl	34
ramelteon	38
ramipril	17
ranolazine er	17
rasagiline mesylate oral	14
RASUVO	32
react oral tablet 1.5 mg	30
reclipsen	30
RECOMBINATE	24
RECOMBIVAX HB	33
RELION GLUCOSE TEST STRIPS	22
RENTHYROID ORAL TABLET 120 MG, 15 MG, 30 MG, 60 MG, 90 MG	32
repaglinide	23
REPATHA	17

REPATHA PUSHTRONEX SYSTEM SUBCUTANEOUS SOLUTION CARTRIDGE 420 MG/3.5ML	17
REPATHA SURECLICK	17
RESTASIS	35
RETACRIT	24
RETEVMO	14
REXTOVY	9
REXULTI	14
REYVOW	13
REZDIFFRA	26
RHAPSIDO	36
RHOFADE	20
RHOPRESSA	35
rifabutin	13
rifampin oral	13
RINVOQ	32
risedronate sodium oral tablet	34
risperidone	14
ritonavir	15
rivaroxaban oral tablet	10
rivastigmine	11
rivastigmine tartrate	11
rivelsa	30
rizatriptan benzoate oral tablet dispersible	13
ROCKLATAN	35
roflumilast	37
ropinirole hcl	14
rosuvastatin calcium oral	17
rosyrah	30
roweepra	11
ROZLYTREK	14
RUCONEST	32
rufinamide oral suspension 40 mg/ml	11
rufinamide oral tablet	11
RYBELSUS	23
RYDAPT	14

## S

sacubitril-valsartan	17
SANTYL	20
SAVELLA	18
saxagliptin hcl	23
saxagliptin-metformin er	23
SCEMBLIX	14
scopolamine	12
SE-NATAL 19 ORAL TABLET	25
selenium sulfide external lotion	20
SEREVENT DISKUS	37
sertraline hcl oral tablet	12
setlakin	30
sevelamer carbonate oral tablet	27
sf 5000 plus	19
sf gel 1.1%	19
sharobel	30
shewise	30
SHINGRIX INTRAMUSCULAR SUSPENSION RECONSTITUTED	33
sildenafil citrate oral tablet 100 mg, 25 mg, 50 mg	24
silodosin	27
silver sulfadiazine external	10
simliya	30
simpesse	30
SIMPONI	32
simvastatin oral tablet 10 mg, 20 mg, 40 mg, 5 mg	17
simvastatin oral tablet 80 mg	17
sirolimus oral tablet	32
SKYRIZI	32
SKYTROFA	31
SLYND	30
sod citrate-citric acid oral solution 500-334 mg/5ml	25
sod fluoride-potassium nitrate	25
sodium chloride inhalation	36
sodium fluoride 5000 enamel	25
sodium fluoride 5000 plus	19
sodium fluoride 5000 ppm	19





tetracycline hcl oral capsule	10	tramadol hcl er tablet extended release	8	TRILEPTAL	11
TEZRULY	27	tramadol hcl oral tablet 50 mg	8	trimethoprim oral	10
TEZSPIRE SUBCUTANEOUS SOLUTION AUTO-INJECTOR	37	tramadol-acetaminophen	8	TRINATAL RX1	25
theophylline er oral tablet extended release 12 hour	37	trandolapril	18	TRINATE	25
THRIVE	9	tranexamic acid oral	24	TRINTELLIX	12
thyroid oral	32	travoprost (bak free)	35	TRIUMEQ	15
tiadylt er	17	trazodone hcl oral	12	trivora (28)	30
ticagrelor	14	TRELEGY ELLIPTA	37	tropium chloride	27
TIGLUTIK	18	TREMFYA	21	TRULICITY	24
tilia fe	30	tretinoin external cream	21	TRUMENBA	33
timolol hemihydrate	35	TREXALL	32	TRUQAP	14
timolol maleate (once-daily)	35	tri-estarylla	30	TRUVADA ORAL TABLET 100-150 MG, 133-200 MG, 167-250 MG	15
timolol maleate ocudose	35	tri-legest fe	30	TRYPTYR	35
timolol maleate ophthalmic	35	tri-linyah	30	turqoz	30
timolol maleate pf	35	tri-lo-estarylla	30	TWIIST REFILL KIT/INFUSION SET	22
TIMOPTIC OCUDOSE	35	tri-lo-marzia	30	TWIIST STARTER KIT	22
tinidazole oral	10	tri-lo-mili	30	TWINRIX	33
TIROSINT	32	tri-lo-sprintec	30	TYBLUME	30
TIROSINT-SOL	32	tri-mili	30	tydemy	30
TIVICAY	15	tri-sprintec	30	TYMLOS	34
tizanidine hcl oral capsule 2 mg, 4 mg, 6 mg	37	tri-vite/fluoride	25	TYRVAYA	35
tizanidine hcl oral tablet	37	tri-vylibra	30	TYVASO	37
TOBI PODHALER	37	tri-vylibra lo	30	TYVASO DPI	37
TOBRADEX	34	triamcinolone acetonide external cream 0.025 %, 0.1 %	21		
tobramycin ophthalmic	34	triamcinolone acetonide external cream 0.5 %	21		
tobramycin-dexamethasone	34	triamcinolone acetonide external lotion	21		
tolterodine tartrate	27	triamcinolone acetonide external ointment 0.025 %, 0.1 %, 0.5 %	21		
TOPAMAX	11	triamcinolone acetonide mouth/throat	19		
TOPAMAX SPRINKLE	11	triamterene oral	18		
topiramate oral capsule sprinkle	11	triamterene-hctz	18		
topiramate oral tablet	11	triazolam	15		
torse mide	17	TRICARE ORAL TABLET	25		
TOUJEO MAX SOLOSTAR	23	triderm	21		
TOUJEO SOLOSTAR	23	trihexyphenidyl hcl oral tablet	14		
TRADJENTA	23	TRIJARDY XR	24		
tramadol hcl (er biphasic) oral tablet extended release 24 hour	8				

## U

UBRELVY	13
UCERIS ORAL	34
UDENYCA	24
unithroid	32
urea external cream 20 %, 40 %, 45 %	21
UROGESIC-BLUE	27
ursodiol oral capsule 300 mg	26
ursodiol oral tablet	26

## V

valacyclovir hcl oral	15
valganciclovir hcl oral tablet	15



valproic acid oral capsule .....	11	VITAMEDMD ONE RX/ QUATREFOLIC ORAL CAPSULE 30-0.6-0.4-200 MG .....	25	wixela inhub .....	37
valproic acid oral solution 250 mg/5ml .....	11	vitamin d (ergocalciferol) oral capsule 1.25 mg (50000 ut), 50000 unit .....	25	wymzya fe .....	31
valsartan oral tablet.....	18	VITATHELY WITH GINGER.....	25	<b>X</b>	
valsartan-hydrochlorothiazide ...	18	VITRAKVI.....	14	XACIATO.....	10
VALTOCO .....	11	VIVJOA .....	13	xarah fe .....	31
valtya 1/35.....	30	volnea.....	30	XARELTO .....	10
valtya 1/50.....	30	VOQUEZNA.....	26	XCOPRI .....	11
vancomycin hcl oral capsule.....	10	VOQUEZNA DUAL PAK.....	26	XDEMVY .....	34
VANDAZOLE.....	10	VOQUEZNA TRIPLE PAK .....	26	XELJANZ.....	32
VANRAFIA .....	27	voriconazole oral tablet.....	13	XELJANZ XR.....	32
VAQTA INTRAMUSCULAR SUSPENSION PREFILLED SYRINGE.....	33	VORTEX HOLD CHMBR/MASK/ CHILD DEVICE .....	37	xelria fe .....	31
vardenafil hcl oral tablet.....	24	VORTEX HOLD CHMBR/MASK/ TODDLER DEVICE .....	37	XELSTRYM.....	18
varenicline.....	9	VORTEX VALVE CHAMBER-PEDI MASK .....	37	XEPI EXTERNAL CREAM 1% .....	10
VARIVAX.....	33	VORTEX VALVED HOLDING CHAMBER .....	37	XIFAXAN.....	10
velivet.....	30	VOSEVI .....	15	XIIDRA.....	35
VELPHORO .....	27	VOYDEYA ORAL TABLET THERAPY PACK.....	24	XOFLUZA .....	15
VELTASSA.....	25	VRAYLAR .....	15	XOLAIR SUBCUTANEOUS SOLUTION AUTO-INJECTOR.....	37
venlafaxine hcl .....	12	VTAMA.....	21	XOLAIR SUBCUTANEOUS SOLUTION PREFILLED SYRINGE .....	32
venlafaxine hcl er oral capsule extended release 24 hour.....	12	vyfemla.....	31	XOPENEX HFA .....	37
VEOZAH.....	18	VYLEESI .....	24	XPHOZAH.....	27
verapamil hcl er .....	18	vylibra.....	31	XTAMPZA ER.....	8
verapamil hcl oral .....	18	VYNDAMAX.....	27	XTANDI .....	14
VERISAFE SAFETY STERILE NEEDLE.....	22	VYNDAQEL .....	18	xulane.....	31
VERKAZIA .....	35	VYVGART HYTRULO SUBCUTANEOUS SOLUTION PREFILLED SYRINGE .....	32	XYWAV.....	38
VERQUVO.....	18	<b>W</b>		<b>Y</b>	
VERZENIO .....	14	WAKIX .....	38	YASMIN 28.....	31
vestura.....	30	warfarin sodium oral .....	10	YAZ.....	31
VIBERZI.....	26	wera.....	31	YESINTEK SUBCUTANEOUS .....	32
vienna.....	30	WESCAP-PN DHA .....	25	YORVIPATH.....	34
vilazodone hcl .....	12	WEZLANA SUBCUTANEOUS .....	21	YUPELRI .....	37
VIMPAT ORAL .....	11	WILATE .....	24	yuvaferm .....	31
viorele .....	30	<b>Z</b>		<b>Z</b>	
VITAFOL FE+ .....	25	ZAFEMY.....	31	zafirlukast .....	37
VITAFOL ULTRA .....	25	zafepion.....	38	ZARXIO .....	24
VITAFOL-OB.....	25				



ZAVZPRET .....	13
ZEGALOGUE.....	24
ZEJULA .....	14
ZELBORAF.....	14
ZELSUVMI.....	21
zenatane.....	21
ZENPEP .....	27
ZEPOSIA.....	18
ZILXI.....	21
ZIMHI INJECTION SOLUTION PREFILLED SYRINGE 5 MG/0.5ML .....	9
ZIOPTAN.....	35
ziprasidone hcl .....	15
ZIRGAN .....	34
zolmitriptan oral.....	13
zolpidem tartrate er.....	38
zolpidem tartrate oral tablet .....	38
ZOMIG NASAL SOLUTION 2.5 MG .....	13
ZOMIG NASAL SOLUTION 5 MG ..	13
ZONEGRAN.....	11
ZONISADE.....	11
zonisamide oral .....	11
ZORYVE.....	21
zovia 1/35 (28).....	31
ZTLIDO .....	8
ZUBSOLV .....	9
zumandimine.....	31
ZURZUVAE.....	12
ZYLET.....	34

**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 አትም 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 និងការទំនាក់ទំនងដកតិចថ្លៃក្នុងទម្រង់ផ្សេងទៀត ដូចជាពុម្ពអក្សរធំ មានសម្រាប់អ្នក។ ទូរសព្ទមកលេខតិចថ្លៃនៅលើប័ណ្ណសម្គាល់សមាជិករបស់អ្នក។

**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、拡大文字など他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:** ຖ້າທາກທົນເວົ້າພາສາລາວ (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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