



Your 2026 Prescription Drug List

Louisiana Essential 4-Tier

Effective January 1, 2026



**United
Healthcare**

This Prescription Drug List (PDL) is accurate as of January 1, 2026 and is subject to change after this date. This PDL applies to members of fully insured groups with corporate offices located in Louisiana with a pharmacy benefit subject to the Essential 4-Tier PDL. Your estimated coverage and copayment/coinsurance may vary based on the benefit plan you choose and the effective date of the plan.

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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 6 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.

Over-the-counter (OTC) medications

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

Reading your PDL

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

Tier information

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

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



Reading your PDL (continued)

Drug list information

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

H	Health Care Reform Preventive – This medication is part of a health care reform preventive benefit and is generally available at no cost to you.
H-PA	Health Care Reform Preventive with prior authorization – May be part of health care reform preventive benefit and available at no cost to you if prior authorization criteria are met.
NF	Non-Formulary Non-formulary drugs are not covered by your insurance provider, however may be filled at a Tier 4 cost share if certain criteria is met.
PA	Prior authorization – Requires your doctor to provide information about why you are taking a medication before your plan can decide how it may be covered.
QL	Quantity limits – The largest quantity of medication covered per copayment or in a defined period of time.
RS	Refill and Save Program – Save money on your copayment when you refill your prescription on time as prescribed. Program eligibility may vary.
SP	Specialty medication – Specialty medications treat complex or rare conditions and may require special storage and handling. You may have to get these medications from a specialty pharmacy.
ST	Step therapy – Requires prior authorization and may require you to try one or more other medications before the medication you are requesting may be covered.



Reading your PDL (continued)

Coverage details

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

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

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

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

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

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

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

- **Endocrine: growth hormone**

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

- **Infertility**

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

- **Medications for sexual dysfunction**

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

- **Termination of pregnancy**

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

Questions

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



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



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

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

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

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



Drug Name	Drug Tier	Requirements & Limits
Analgesics - Drugs for Pain		
acetaminophen-codeine oral tablet	1	
apap-caff-dihydrocodeine	NF	QL
ascomp-codeine	1	
bac (butalbital-acetamin-caff)	1	QL
BELBUCA	3	PA, QL
BUPAP ORAL TABLET 50-300 MG	NF	
buprenorphine	3	PA, QL
butalbital-acetaminophen oral tablet 50-300 mg	NF	
butalbital-acetaminophen oral tablet 50-325 mg	1	
butalbital-apap-caff-cod oral capsule 50-300-40-30 mg	NF	QL
butalbital-apap-caff-cod oral capsule 50-325-40-30 mg	1	QL
butalbital-apap-caffeine oral capsule 50-300-40 mg	3	QL
butalbital-apap-caffeine oral capsule 50-325-40 mg	1	QL
butalbital-apap-caffeine oral tablet	1	QL
butalbital-asa-caff-codeine	1	
butalbital-aspirin-caffeine	1	
butorphanol tartrate nasal	2	QL
BUTRANS	NF	PA, QL
DILAUDID ORAL TABLET	NF	
endocet	1	
ESGIC ORAL CAPSULE 50-325-40 MG	4	QL
ESGIC ORAL TABLET 50-325-40 MG	4	QL
fentanyl transdermal patch 72 hour 100 mcg/hr, 12 mcg/hr, 25 mcg/hr, 50 mcg/hr, 75 mcg/hr	2	PA, QL
fentanyl transdermal patch 72 hour 37.5 mcg/hr, 62.5 mcg/hr, 87.5 mcg/hr	NF	PA, QL

Drug Name	Drug Tier	Requirements & Limits
FIORICET	4	QL
FIORICET/CODEINE	NF	QL
hydrocodone-acetaminophen oral solution 10-300 mg/15ml	1	
hydrocodone-acetaminophen oral solution 10-325 mg/15ml, 7.5-325 mg/15ml	2	
hydrocodone-acetaminophen oral tablet 10-300 mg, 5-300 mg, 7.5-300 mg	NF	
hydrocodone-acetaminophen oral tablet 10-325 mg, 2.5-325 mg, 5-325 mg, 7.5-325 mg	1	
hydromorphone hcl oral tablet	1	
JOURNAVX	4	QL
lidocaine external ointment 5 %	2	QL
lidocaine external patch 5 %	3	PA, QL
lidocaine-prilocaine external cream	1	
LIDODERM	NF	PA, QL
methadone hcl oral tablet	1	PA, QL
morphine sulfate er oral tablet extended release	1	PA, QL
morphine sulfate oral tablet	1	
MS CONTIN	NF	PA, QL
NUCYNTA	4	QL
NUCYNTA ER	3	PA, QL
OXYCODONE HCL ER ORAL TABLET ER 12 HOUR ABUSE-DETERRENT 10 MG, 20 MG, 40 MG, 80 MG	NF	PA, QL
oxycodone hcl oral capsule	1	
oxycodone hcl oral solution	1	
oxycodone hcl oral tablet 10 mg, 15 mg, 20 mg, 30 mg	1	
oxycodone hcl oral tablet 5 mg	1	QL
OXYCODONE-ACETAMINOPHEN ORAL TABLET 10-300 MG, 5-300 MG, 7.5-300 MG	NF	

See page 6-8 for coverage details.



Drug Name	Drug Tier	Requirements & Limits
oxycodone-acetaminophen oral tablet 10-325 mg, 2.5-325 mg, 5-325 mg, 7.5-325 mg	1	
OXYCODONE-ACETAMINOPHEN ORAL TABLET 2.5-300 MG	NF	QL
OXYCONTIN	NF	PA, QL
PERCOCET	NF	
premium lidocaine	2	QL
PROLATE ORAL TABLET	NF	
ROXICODONE	NF	
TENCON	3	
tramadol hcl (er biphasic) oral tablet extended release 24 hour	2	(generic for Ryzolt), QL
tramadol hcl er	2	(generic for Ultram ER), QL
tramadol hcl oral tablet 100 mg, 25 mg, 75 mg	NF	
tramadol hcl oral tablet 50 mg	1	
tramadol-acetaminophen	1	QL
TREZIX	NF	QL
XTAMPZA ER	4	PA, QL
ZEBUTAL ORAL CAPSULE 50-325-40 MG	4	QL
ZTLIDO	3	PA, QL
Analgesics - Drugs for Pain and Inflammation		
ANAPROX DS	NF	
CELEBREX	NF	
celecoxib oral	2	
DAYPRO	4	
diclofenac potassium oral tablet 25 mg	NF	QL
diclofenac potassium oral tablet 50 mg	2	
diclofenac sodium er	3	
diclofenac sodium external gel 1%	NF	
diclofenac sodium oral	1	
diclofenac-misoprostol	3	
EC-NAPROSYN ORAL TABLET DELAYED RELEASE 375 MG	3	

Drug Name	Drug Tier	Requirements & Limits
EC-NAPROSYN ORAL TABLET DELAYED RELEASE 500 MG	4	
ec-naproxen	1	
etodolac	2	
FELDENE ORAL CAPSULE 20 MG	4	
ibuprofen oral suspension 100 mg/5ml	NF	
ibuprofen oral tablet 400 mg, 600 mg, 800 mg	1	
indomethacin er	2	
indomethacin oral capsule	1	
ketorolac tromethamine oral	1	
LODINE	NF	
LOFENA	NF	QL
meloxicam oral tablet	1	
nabumetone oral	1	
NAPROSYN	NF	
naproxen dr	1	
naproxen oral tablet	1	
naproxen oral tablet delayed release	1	
naproxen sodium oral tablet 275 mg, 550 mg	2	
oxaprozin oral tablet	2	
piroxicam oral	2	
RELAFEN DS	NF	
sulindac oral	1	
Anti-Addiction / Substance Abuse Treatment Agents		
acamprosate calcium	1	
buprenorphine hcl sublingual	1	QL
buprenorphine hcl-naloxone hcl sublingual film	2	QL
buprenorphine hcl-naloxone hcl sublingual tablet sublingual	2	
bupropion hcl er (smoking det)	1	H
cvs nicotine	1	H
cvs nicotine polacrilex	1	H
disulfiram oral	1	
eq nicotine	1	H

See page 6-8 for coverage details.



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

Drug Name	Drug Tier	Requirements & Limits
nicotine mini	1	H
nicotine polacrilex mini	1	H
nicotine polacrilex mouth/throat	1	H
nicotine step 1	1	H
nicotine step 2	1	H
nicotine step 3	1	H
nicotine transdermal patch 24 hour	1	H
OPVEE	1	QL
qc nicotine transdermal system	1	H
ra mini nicotine	1	H
ra nicotine mouth/throat gum 4 mg	1	H
ra nicotine polacrilex	1	H
ra nicotine transdermal patch 24 hour 21 mg/24hr	1	H
REXTOVY	1	QL
sm nicotine	1	H
sm nicotine polacrilex	1	H
sm nicotine transdermal patch 24 hour 14 mg/24hr, 21 mg/24hr, 7 mg/24hr	1	H
SUBOXONE	NF	PA, QL
THRIVE	4	H
varenicline	3	PA, H
ZIMHI	2	QL
ZUBSOLV	2	QL
Antibacterials - Drugs for Infections		
amoxicillin	1	
amoxicillin-potassium clavulanate	1	
ampicillin	1	
AUGMENTIN	NF	
AUGMENTIN ES-600	NF	
AVIDOXY	4	
azithromycin oral packet 1 gm	1	
BACTRIM	4	
BACTRIM DS	4	

See page 6-8 for coverage details.



Drug Name	Drug Tier	Requirements & Limits
cefadroxil oral capsule	1	
cefadroxil oral suspension reconstituted	1	
cefdinir	1	
cefixime oral capsule	3	
cefpodoxime proxetil oral tablet	1	
cefprozil	1	
cefuroxime axetil	1	
cephalexin	1	
CIPRO ORAL TABLET	4	
ciprofloxacin hcl oral	1	
clarithromycin oral tablet	1	
CLEOCIN ORAL CAPSULE 150 MG, 300 MG	4	
CLEOCIN ORAL CAPSULE 75 MG	2	
CLEOCIN ORAL SOLUTION RECONSTITUTED	4	
CLEOCIN VAGINAL CREAM	4	
clindamycin hcl oral	1	
clindamycin palmitate hcl	2	
clindamycin phosphate vaginal	2	
CLINDESSE	2	
dicloxacillin sodium	1	
DIFICID ORAL TABLET	NF	QL
doxycycline hyclate oral capsule	2	
doxycycline hyclate oral tablet 100 mg	2	
doxycycline hyclate oral tablet 150 mg, 50 mg, 75 mg	NF	
doxycycline hyclate oral tablet 20 mg	1	
doxycycline monohydrate oral capsule 100 mg, 50 mg	1	
doxycycline monohydrate oral capsule 150 mg, 75 mg	NF	
doxycycline monohydrate oral suspension reconstituted	3	
doxycycline monohydrate oral tablet	1	
E.E.S. GRANULES	3	

Drug Name	Drug Tier	Requirements & Limits
ERYPED 200 ORAL SUSPENSION RECONSTITUTED 200 MG/5ML	3	
ERYPED 400	4	
erythromycin base oral tablet	1	
erythromycin ethylsuccinate oral suspension reconstituted 200 mg/5ml	1	
erythromycin ethylsuccinate oral suspension reconstituted 400 mg/5ml	3	
fidaxomicin oral tablet	4	QL
fosfomycin tromethamine	3	
gentamicin sulfate external	1	QL
HIPREX	4	
levofloxacin oral tablet	1	
LIKMEZ	4	
linezolid oral tablet	2	
MACROBID	4	
MACRODANTIN	4	
methenamine hippurate	1	
metronidazole oral tablet 125 mg	NF	
metronidazole oral tablet 250 mg, 500 mg	1	
metronidazole vaginal	2	
minocycline hcl oral capsule	1	
MONDOXYNE NL	NF	
moxifloxacin hcl oral	3	
mupirocin cream	3	QL
mupirocin ointment	1	QL
neomycin sulfate oral	1	
nitrofurantoin macrocrystal	1	
nitrofurantoin monohydrate macrocrystals	1	
NUVESSA	NF	
NUZYRA ORAL	4	QL
penicillin v potassium	1	
SEYSARA	NF	
SILVADENE	4	

See page 6-8 for coverage details.



Drug Name	Drug Tier	Requirements & Limits
silver sulfadiazine external	1	
ssd	1	
sulfamethoxazole-trimethoprim oral suspension 200-40 mg/5ml	1	
sulfamethoxazole-trimethoprim oral tablet	1	
sulfatrim pediatric	1	
TARGADOX	NF	
tetracycline hcl oral capsule	3	
tinidazole oral	3	
trimethoprim oral	1	
VANCOCIN	4	
vancomycin hcl oral capsule	1	
VANDAZOLE	4	
VIBRAMYCIN ORAL CAPSULE 100 MG	4	
VIBRAMYCIN ORAL SUSPENSION RECONSTITUTED 25 MG/5ML	4	
XACIATO	2	QL
XENLETA ORAL TABLET 600 MG	4	
XIFAXAN	NF	PA, QL
ZITHROMAX	4	
ZYVOX ORAL TABLET	NF	
Anticoagulants - Drugs to Treat or Prevent Blood Clots		
dabigatran etexilate mesylate	2	QL
ELIQUIS TABLET	2	QL
enoxaparin sodium injection solution prefilled syringe	2	QL
jantoven	1	
LOVENOX INJECTION SOLUTION PREFILLED SYRINGE	NF	QL
PRADAXA ORAL CAPSULE	NF	QL
rivaroxaban	2	QL
warfarin sodium oral	1	
XARELTO	2	QL
Anticonvulsants - Drugs for Seizures		
APTIOM	NF	PA

Drug Name	Drug Tier	Requirements & Limits
BRIVIACT ORAL TABLET	NF	PA
carbamazepine er	2	
carbamazepine oral tablet	1	
carbamazepine oral tablet chewable	1	
CARBATROL	NF	
clobazam oral suspension 2.5 mg/ml	3	PA
clobazam oral tablet	2	PA
DEPAKOTE	4	PA
DEPAKOTE ER	4	PA
DEPAKOTE SPRINKLES	4	PA
DIASTAT ACUDIAL RECTAL GEL 10 MG, 20 MG	4	QL
DIASTAT PEDIATRIC RECTAL GEL 2.5 MG	2	QL
diazepam rectal	1	QL
DILANTIN	3	
divalproex sodium er	2	
divalproex sodium oral capsule delayed release sprinkle	2	
divalproex sodium oral tablet delayed release	1	
ELEPSIA XR	NF	PA
EPIDIOLEX	4	PA, SP
epitol	1	
eslicarbazepine acetate	4	PA
ethosuximide oral	1	
FYCOMPA ORAL SUSPENSION	4	PA
FYCOMPA ORAL TABLET	NF	PA
gabapentin oral capsule	1	
gabapentin oral solution 250 mg/5ml	1	
GABAPENTIN ORAL TABLET 25 MG, 50 MG	NF	PA
gabapentin oral tablet 600 mg, 800 mg	1	
GABARONE	NF	PA
KEPPRA ORAL	NF	PA

See page 6-8 for coverage details.



Drug Name	Drug Tier	Requirements & Limits
KEPPRA XR	NF	PA
lacosamide oral	2	
LAMICTAL	NF	PA
LAMICTAL ODT ORAL TABLET DISPERSIBLE	NF	PA
LAMICTAL XR ORAL TABLET EXTENDED RELEASE 24 HOUR	NF	PA
lamotrigine er	NF	
lamotrigine oral tablet	1	
lamotrigine oral tablet chewable	1	
lamotrigine oral tablet dispersible	NF	PA
levetiracetam er	2	
levetiracetam oral solution	1	
levetiracetam oral tablet	1	
LIBERVANT BUCCAL FILM 10 MG, 12.5 MG, 15 MG, 5 MG, 7.5 MG	3	PA, QL
MOTPOLY XR	4	PA
MYSOLINE	NF	PA
NAYZILAM	3	PA, QL
NEURONTIN	NF	PA
ONFI	4	PA
oxcarbazepine	1	
oxcarbazepine er	NF	
perampanel	3	PA
phenobarbital oral tablet	1	
phenytek oral capsule 200 mg	1	
phenytek oral capsule 300 mg	4	
phenytoin sodium extended	1	
primidone oral tablet 125 mg	1	PA
primidone oral tablet 250 mg, 50 mg	1	
roweepra	1	
subvenite	1	
SYMPAZAN	4	PA
TEGRETOL ORAL TABLET	4	
TEGRETOL-XR	NF	
TOPAMAX	NF	PA

Drug Name	Drug Tier	Requirements & Limits
TOPAMAX SPRINKLE	NF	PA
topiramate er oral capsule extended release 24 hour	NF	
topiramate oral capsule sprinkle	1	
topiramate oral tablet	1	
TRILEPTAL	NF	PA
TROKENDI XR	NF	
valproic acid oral capsule	1	
valproic acid oral solution 250 mg/5ml	1	
VALTOCO	3	PA, QL
VIMPAT ORAL SOLUTION	4	PA
VIMPAT ORAL TABLET	NF	PA
XCOPRI ORAL TABLET 100 MG, 150 MG, 200 MG, 25 MG, 50 MG	NF	PA
ZARONTIN	4	
ZONEGRAN	NF	PA
zonisamide oral	1	

Antidementia Agents - Drugs for Alzheimer's Disease and Dementia

ARICEPT	NF	
donepezil hcl oral tablet	1	
EXELON	NF	
memantine hcl er	1	
memantine hcl oral tablet	1	
NAMENDA ORAL TABLET 10 MG, 5 MG	NF	
NAMENDA TITRATION PAK	NF	
NAMENDA XR ORAL CAPSULE EXTENDED RELEASE 24 HOUR 14 MG, 21 MG, 28 MG, 7 MG	NF	
rivastigmine	3	
rivastigmine tartrate	1	

Antidepressants - Drugs for Depression

amitriptyline hcl oral	1	
ANAFRANIL	NF	
AUVELITY	NF	ST, QL
bupropion hcl er (sr)	1	

See page 6-8 for coverage details.



Drug Name	Drug Tier	Requirements & Limits
bupropion hcl er (xl) oral tablet extended release 24 hour 150 mg, 300 mg	1	
BUPROPION HCL ER (XL) ORAL TABLET EXTENDED RELEASE 24 HOUR 450 MG	NF	QL
bupropion hcl oral	1	
CELEXA	NF	
citalopram hydrobromide oral tablet	1	
clomipramine hcl oral	3	
CYMBALTA	NF	
desipramine hcl oral	1	
desvenlafaxine succinate er	3	QL
doxepin hcl oral capsule	1	
doxepin hcl oral concentrate	1	
duloxetine hcl oral capsule delayed release particles 20 mg, 30 mg, 60 mg	2	
duloxetine hcl oral capsule delayed release particles 40 mg	NF	
EFFEXOR XR	NF	
escitalopram oxalate oral solution 5 mg/5ml	2	
escitalopram oxalate oral tablet	1	
FETZIMA	NF	ST, QL
fluoxetine hcl oral capsule	1	
fluoxetine hcl oral solution	1	
fluoxetine hcl oral tablet 10 mg	3	QL
fluoxetine hcl oral tablet 20 mg, 60 mg	3	
fluvoxamine maleate	1	
fluvoxamine maleate er	4	QL
FORFIVO XL	NF	QL
imipramine hcl oral	1	
LEXAPRO	NF	
mirtazapine oral	1	
NORPRAMIN	4	
nortriptyline hcl oral capsule	1	
PAMELOR	NF	

Drug Name	Drug Tier	Requirements & Limits
paroxetine hcl er	3	QL
paroxetine hcl oral tablet	1	
PAXIL	NF	
PAXIL CR	NF	QL
PRISTIQ	NF	QL
PROZAC	NF	
RALDESY	NF	PA
REMERON	NF	
REMERON SOLTAB ORAL TABLET DISPERSIBLE 15 MG, 30 MG	NF	
SERTRALINE HCL ORAL CAPSULE	NF	QL
sertraline hcl oral concentrate	1	
sertraline hcl oral tablet	1	
SPRAVATO	4	PA, QL
trazodone hcl oral	1	
TRINTELLIX	4	ST, QL
venlafaxine hcl	1	
venlafaxine hcl er oral capsule extended release 24 hour	1	
venlafaxine hcl er oral tablet extended release 24 hour	NF	QL
VIIBRYD	NF	QL
vilazodone hcl	3	QL
WAINUA	3	PA, QL, SP
WELLBUTRIN SR	NF	
WELLBUTRIN XL	NF	
ZOLOFT	NF	
ZURZUVAE	3	PA, QL, SP
Antiemetics - Drugs for Nausea and Vomiting		
ANTIVERT ORAL TABLET 50 MG	NF	
aprepitant oral capsule 125 mg, 40 mg, 80 mg	2	QL
DICLEGIS	NF	PA
doxylamine-pyridoxine	NF	PA
dronabinol	1	
EMEND BIPACK	NF	QL
MARINOL	NF	

See page 6-8 for coverage details.



Drug Name	Drug Tier	Requirements & Limits
meclizine hcl oral tablet	NF	
metoclopramide hcl oral tablet	1	
ondansetron hcl oral	1	
ondansetron odt oral tablet dispersible 16 mg	NF	
ondansetron odt oral tablet dispersible 4 mg, 8 mg	1	
perphenazine oral	1	
prochlorperazine maleate oral	1	
promethazine hcl oral solution	1	
promethazine hcl oral tablet	1	
promethazine hcl rectal	1	
PROMETHEGAN	3	
REGLAN	4	
scopolamine	3	
TRANSDERM-SCOP TRANSDERMAL PATCH 72 HOUR 1 MG/3DAYS	NF	
Antifungals - Drugs for Fungal Infections		
ciclodan	1	
ciclopirox external gel	1	
ciclopirox external shampoo	2	
ciclopirox external solution	1	
ciclopirox olamine external cream	1	
clotrimazole mouth/throat	1	
CRESEMBA ORAL	3	
DIFLUCAN	NF	
econazole nitrate external	2	
fluconazole oral	1	
griseofulvin microsize oral suspension	1	
GNAZOLE-1	3	
itraconazole oral capsule	1	QL
JUBLIA	NF	PA, ST, QL
ketoconazole external cream	1	QL
ketoconazole external shampoo	1	
ketoconazole oral	1	
klayesta	1	QL

Drug Name	Drug Tier	Requirements & Limits
LOPROX EXTERNAL SHAMPOO 1 %	NF	
NOXAFIL ORAL TABLET DELAYED RELEASE	NF	
nyamyc	1	QL
nystatin external	1	QL
nystatin mouth/throat	1	
nystatin oral	1	
nystatin-triamcinolone	2	
nystop	1	QL
posaconazole oral tablet delayed release	2	
SPORANOX	4	QL
terbinafine hcl oral	1	
terconazole	1	
TOLSURA	NF	
VFEND ORAL TABLET 200 MG	4	QL
VFEND ORAL TABLET 50 MG	3	QL
VIVJOA	3	PA, QL
voriconazole oral tablet	1	QL
Antigout Agents - Drugs for Gout		
allopurinol oral tablet 100 mg, 300 mg	1	
allopurinol oral tablet 200 mg	NF	
colchicine oral	2	
colchicine-probenecid	1	
COLCRYS ORAL TABLET 0.6 MG	NF	
febuxostat	3	
MITIGARE	2	
probenecid	1	
ULORIC	NF	
ZYLOPRIM ORAL TABLET 100 MG, 300 MG	4	
Antimigraine Agents - Drugs for Migraines		
AIMOVIG	3	PA, ST, QL
AJOVY	NF	PA, ST, QL
eletriptan hydrobromide	3	QL
EMGALITY	3	PA, ST, QL

See page 6-8 for coverage details.



Drug Name	Drug Tier	Requirements & Limits
frovatriptan succinate	3	QL
IMITREX NASAL SOLUTION 20 MG/ACT, 5 MG/ACT	4	QL
IMITREX ORAL	NF	QL
IMITREX STATDOSE SYSTEM	NF	QL
MAXALT	NF	QL
MAXALT-MLT	NF	QL
naratriptan hcl	1	QL
NURTEC	3	PA, ST, QL
QULIPTA	3	PA, ST, QL
RELPAX	NF	QL
REYVOW	NF	PA, ST, QL
rizatriptan	1	QL
sumatriptan nasal	2	QL
sumatriptan succinate oral	1	QL
sumatriptan succinate subcutaneous solution auto-injector	1	QL
TOSYMRA	NF	QL
UBRELVY	3	PA, ST, QL
ZAVZPRET	4	PA, ST, QL
ZEMBRACE SYMTOUCH	NF	QL
ZOLMITRIPTAN NASAL SOLUTION 2.5 MG	NF	QL
zolmitriptan nasal solution 5 mg	NF	QL
zolmitriptan oral tablet	2	QL
zolmitriptan oral tablet dispersible	3	QL
ZOMIG NASAL SOLUTION 2.5 MG	3	QL
ZOMIG NASAL SOLUTION 5 MG	2	QL
ZOMIG ORAL TABLET 5 MG	NF	QL
Antimyasthenic Agents - Drugs to Treat Myasthenia Gravis		
MESTINON ORAL TABLET	NF	
pyridostigmine bromide oral tablet 30 mg	NF	
pyridostigmine bromide oral tablet 60 mg	1	
ZILBRYSQ	4	PA, QL, SP

Drug Name	Drug Tier	Requirements & Limits
Antimycobacterials - Drugs to Treat Infections		
dapsone oral	2	
ethambutol hcl oral	1	
isoniazid oral tablet	1	
MYAMBUTOL ORAL TABLET 400 MG	4	
rifampin oral	1	
Antineoplastics - Drugs for Cancer		
abiraterone acetate oral tablet 250 mg	3	QL, SP
abiraterone acetate oral tablet 500 mg	NF	QL, SP
ABIRTEGA	NF	QL, SP
ALECENSA	3	PA, QL, SP
ALUNBRIG	3	PA, QL, SP
anastrozole oral	1	H-PA
ARIMIDEX	NF	
AROMASIN	NF	
AUGTYRO	3	PA, QL, SP
BESREMI	NF	PA, QL, SP
bicalutamide	1	
BRUKINSA	4	PA, ST, QL, SP
CABOMETYX	3	PA, QL, SP
CALQUENCE	3	PA, QL, SP
capecitabine	2	QL, SP
CASODEX	NF	
COTELLIC	4	PA, QL, SP
dasatinib	3	PA, QL, SP
ERIVEDGE	3	PA, QL, SP
ERLEADA	3	PA, QL, SP
everolimus oral tablet 10 mg, 2.5 mg, 5 mg, 7.5 mg	3	PA, QL, SP
exemestane	2	H-PA
EXKIVITY ORAL CAPSULE 40 MG	4	SP
FEMARA	NF	
GAVRETO	4	PA, QL, SP
GLEEVEC	NF	QL, SP

See page 6-8 for coverage details.



Drug Name	Drug Tier	Requirements & Limits
HYDREA	NF	
hydroxyurea oral	1	
IBRANCE ORAL TABLET	NF	PA, ST, QL, SP
ICLUSIG	4	PA, QL, SP
IDHIFA	3	PA, QL, SP
imatinib mesylate oral	1	QL, SP
IMBRUVICA ORAL CAPSULE	3	PA, QL, SP
IMBRUVICA ORAL TABLET 140 MG, 280 MG	NF	PA, QL, SP
IMBRUVICA ORAL TABLET 420 MG	3	PA, QL, SP
IMKELDI	4	PA, QL, SP
JAKAFI	3	PA, QL, SP
KISQALI	3	PA, QL, SP
KOSELUGO	3	PA, QL, SP
lenalidomide	3	PA, QL, SP
letrozole oral	1	H-PA
leucovorin calcium oral	1	
LUMAKRAS	4	PA, QL, SP
LYNPARZA	3	PA, QL, SP
mercaptopurine oral tablet	1	
nilotinib hcl	3	PA, ST, QL, SP
NUBEQA	3	PA, QL, SP
ODOMZO	3	PA, QL, SP
ORGOVYX	4	PA, QL, SP
PIQRAY	3	PA, QL, SP
POMALYST	4	PA, QL, SP
RETEVMO	4	PA, QL, SP
REVLIMID	3	PA, QL, SP
ROZLYTREK ORAL CAPSULE	3	PA, QL, SP
ROZLYTREK ORAL PACKET	2	PA, QL, SP
RYDAPT	3	PA, QL, SP
SCEMBLIX	4	PA, QL, SP
SPRYCEL	NF	PA, QL, SP
STIVARGA	3	PA, QL, SP
TABRECTA	4	PA, QL, SP
TAGRISO	4	PA, QL, SP

Drug Name	Drug Tier	Requirements & Limits
tamoxifen citrate oral tablet 10 mg	1	
tamoxifen citrate oral tablet 20 mg	1	H-PA
TASIGNA	NF	PA, ST, QL, SP
temozolomide	1	SP
torpenz	3	PA, QL, SP
TRUQAP ORAL TABLET	3	PA, QL, SP
VENCLEXTA	3	PA, QL, SP
VERZENIO	3	PA, QL, SP
VITRAKVI	3	PA, QL, SP
XELODA	NF	QL, SP
XTANDI	3	PA, QL, SP
ZEJULA	3	PA, QL, SP
ZELBORAF	3	PA, QL, SP
ZYTIGA	NF	QL, SP

Antiparasitics - Drugs for Parasitic Infections

ARAKODA	4	QL
atovaquone	2	
atovaquone-proguanil hcl	2	
ELIMITE	4	
hydroxychloroquine sulfate oral	1	
ivermectin oral tablet 3 mg	1	PA, QL
ivermectin oral tablet 6 mg	1	PA
KRINTAFEL	1	QL
MALARONE	4	
mefloquine hcl	1	
MEPRON	NF	
permethrin external	1	
PLAQUENIL	NF	
SOVUNA	NF	
STROMEKTOL	4	PA, QL

Antiparkinson Agents - Drugs for Parkinson's Disease

amantadine hcl oral capsule	1	
amantadine hcl oral tablet	1	
AZILECT	NF	ST
benztropine mesylate oral	1	

See page 6-8 for coverage details.



Drug Name	Drug Tier	Requirements & Limits
bromocriptine mesylate oral tablet	1	
carbidopa-levodopa er	1	
carbidopa-levodopa oral tablet	1	
CREXONT	4	ST
DHIVY	NF	
INBRIJA	3	PA, QL, SP
NEUPRO	NF	
PARLODEL ORAL TABLET	NF	
pramipexole dihydrochloride	1	
rasagiline mesylate oral	NF	ST
ropinirole hcl	1	
RYTARY	NF	ST
SINEMET	4	
trihexyphenidyl hcl oral tablet	1	
Antiplatelets - Drugs for Heart Attack and Stroke Prevention		
BRILINTA	NF	QL
cilostazol	1	
clopidogrel bisulfate oral	1	
EFFIENT	NF	
PLAVIX	NF	
prasugrel hcl	3	
ticagrelor	3	QL
Antipsychotics - Drugs for Mood Disorders		
ABILIFY	NF	
aripiprazole oral	2	
asenapine maleate	3	QL
CAPLYTA	4	PA, ST, QL
chlorpromazine hcl oral tablet	1	QL
clozapine oral tablet	1	
CLOZARIL	4	
GEODON ORAL	NF	
haloperidol oral	1	
INVEGA	NF	QL
LATUDA	NF	QL
lurasidone hcl	2	QL

Drug Name	Drug Tier	Requirements & Limits
olanzapine oral tablet	1	
olanzapine oral tablet dispersible	2	
paliperidone er	NF	QL
quetiapine fumarate	1	
quetiapine fumarate er	2	
REXULTI	4	QL
RISPERDAL	NF	
risperidone	1	
SAPHRIS	NF	QL
SEROQUEL	NF	
SEROQUEL XR	NF	
VRAYLAR	4	QL
ziprasidone hcl	2	
ZYPREXA ORAL	NF	
ZYPREXA ZYDIS ORAL TABLET DISPERSIBLE 10 MG, 15 MG, 20 MG, 5 MG	NF	
Antivirals - Drugs for Viral Infections		
acyclovir external ointment	3	QL
acyclovir oral capsule	1	
acyclovir oral suspension 200 mg/5ml	1	
acyclovir oral tablet	1	
BARACLUDE ORAL TABLET	NF	
BIKTARVY	4	QL
CIMDUO	2	QL
DESCOVY ORAL TABLET 120-15 MG	4	QL
DESCOVY ORAL TABLET 200-25 MG	4	QL, H
DOVATO	2	QL
emtricitabine-tenofovir df oral tablet 100-150 mg, 133-200 mg, 167-250 mg	1	QL
emtricitabine-tenofovir df oral tablet 200-300 mg	1	QL, H
entecavir	2	
EPCLUSA ORAL TABLET	3	PA, QL, SP

See page 6-8 for coverage details.



Drug Name	Drug Tier	Requirements & Limits
famciclovir oral	2	
GENVOYA	4	QL
HARVONI ORAL TABLET	3	PA, ST, QL, SP
ISENTRESS HD	2	
ISENTRESS ORAL TABLET	2	
JULUCA	2	QL
LAGEVRIO	3	QL
LEDIPASVIR-SOFOSBUVIR	3	PA, ST, QL, SP
MAVYRET ORAL PACKET	3	PA, QL, SP
ODEFSEY	4	QL
oseltamivir phosphate oral	2	
PAXLOVID	3	QL
PREVYMIS ORAL TABLET	3	PA
PREZCOBIX	2	
RUKOBIA	4	PA
SITAVIG	NF	QL
SOFOSBUVIR-VELPATASVIR	3	PA, QL, SP
SYMFI	2	QL
SYMFI LO ORAL TABLET 400-300-300 MG	2	QL
TAMIFLU	NF	
tenofovir disoproxil fumarate	2	H-PA
TIVICAY	3	
TRIUMEQ	2	QL
TRUVADA ORAL TABLET 100-150 MG, 133-200 MG, 167-250 MG	4	QL
TRUVADA ORAL TABLET 200-300 MG	NF	QL
valacyclovir hcl oral	1	QL
VALCYTE ORAL TABLET	NF	
valganciclovir hcl oral tablet	1	
VALTREX	NF	QL
VEMLIDY	NF	PA
VIREAD ORAL TABLET 150 MG, 200 MG, 250 MG	2	
VIREAD ORAL TABLET 300 MG	NF	
VOSEVI	3	PA, QL, SP
XOFLUZA (40 MG DOSE)	3	QL

Drug Name	Drug Tier	Requirements & Limits
XOFLUZA (80 MG DOSE)	3	QL
ZOVIRAX EXTERNAL OINTMENT	NF	QL
Anxiolytics - Drugs for Anxiety		
alprazolam er	1	
alprazolam oral	1	
alprazolam xr	1	
ATIVAN ORAL	NF	
bupirone hcl oral	1	
chlordiazepoxide hcl	1	
clonazepam oral	1	
clorazepate dipotassium	1	
diazepam oral solution	1	
diazepam oral tablet	1	
HALCION	4	
hydroxyzine hcl oral	1	
hydroxyzine pamoate oral	1	
KLONOPIN	NF	
lorazepam oral tablet	1	
triazolam	1	
VALIUM	NF	
VISTARIL ORAL CAPSULE 25 MG	4	
XANAX	NF	
XANAX XR	NF	
Bipolar Agents - Drugs for Mood Disorders		
lithium carbonate er	1	
lithium carbonate oral	1	
LITHOBID	4	PA
Cardiovascular Agents - Drugs for Heart and Circulation Conditions		
acebutolol hcl oral	1	
acetazolamide er	1	
acetazolamide oral	1	
ALDACTONE	NF	
aliskiren fumarate	NF	
ALTACE	NF	
amiloride hcl oral	1	
amiodarone hcl oral	1	
amlodipine besylate oral	1	

See page 6-8 for coverage details.



Drug Name	Drug Tier	Requirements & Limits
amlodipine besylate-benazepril hcl	1	
amlodipine besylate-valsartan	2	
amlodipine-olmesartan	NF	
ATACAND	NF	
ATACAND HCT	NF	
atenolol oral	1	
atenolol-chlorthalidone	1	
ATORVALIQ	4	PA
atorvastatin calcium oral tablet 10 mg, 20 mg	1	H-PA
atorvastatin calcium oral tablet 40 mg, 80 mg	1	
AVALIDE	NF	
AVAPRO	NF	
AZOR	NF	
benazepril hcl oral	1	
benazepril-hydrochlorothiazide	1	
BENICAR	NF	
BENICAR HCT	NF	
BETAPACE	NF	
bisoprolol fumarate oral tablet	1	
bisoprolol-hydrochlorothiazide	1	
bumetanide oral	1	
BUMEX	3	
BYSTOLIC	NF	
CAMZYOS	4	PA, QL, SP
candesartan cilexetil	3	
candesartan cilexetil-hctz	3	
captopril oral	1	
CARDIZEM	NF	
CARDIZEM CD	NF	
CARDIZEM LA	NF	
CARDURA	4	
cartia xt	2	
carvedilol	1	
carvedilol phosphate er	NF	
CATAPRES-TTS-1	NF	

Drug Name	Drug Tier	Requirements & Limits
CATAPRES-TTS-2	NF	
CATAPRES-TTS-3	NF	
chlorthalidone	1	
cholestyramine light	1	
cholestyramine oral	1	
clonidine hcl oral	1	
clonidine patch	3	
colesevelam hcl oral tablet	2	
COLESTID ORAL TABLET	4	
colestipol hcl oral tablet	1	
COREG	NF	
COREG CR	NF	
CORGARD ORAL TABLET 20 MG, 40 MG	4	
CORLANOR	3	PA, QL
COZAAR	NF	
CRESTOR	NF	
digoxin oral tablet	1	
diltiazem hcl er beads	2	
diltiazem hcl er coated beads	2	
diltiazem hcl er oral capsule extended release 12 hour	1	
diltiazem hcl er oral capsule extended release 24 hour	1	
diltiazem hcl er oral tablet extended release 24 hour	2	
diltiazem hcl oral	1	
dilt-xr	1	
DIOVAN	NF	
DIOVAN HCT	NF	
dofetilide	2	
doxazosin mesylate oral	1	
EDARBI	NF	
EDARBYCLOR	NF	
enalapril maleate oral solution	3	PA
enalapril maleate oral tablet	1	
enalapril-hydrochlorothiazide	1	
ENTRESTO ORAL TABLET	NF	PA, QL

See page 6-8 for coverage details.



Drug Name	Drug Tier	Requirements & Limits
EPANED	4	PA
eplerenone	2	
EXFORGE	NF	
ezetimibe	2	
ezetimibe-simvastatin	NF	
felodipine er	1	
fenofibrate micronized oral capsule 130 mg, 134 mg, 200 mg, 43 mg, 67 mg	2	
FENOFIBRATE MICRONIZED ORAL CAPSULE 90 MG	NF	
fenofibrate oral capsule 134 mg, 200 mg, 67 mg	2	
fenofibrate oral tablet 120 mg, 40 mg	NF	
fenofibrate oral tablet 145 mg, 160 mg, 48 mg, 54 mg	2	
fenofibric acid oral capsule delayed release	2	
FENOGLIDE ORAL TABLET 120 MG, 40 MG	NF	
flecainide acetate	1	
fosinopril sodium	1	
FUROSCIX	NF	PA, QL
furosemide oral	1	
gemfibrozil oral	1	
guanfacine hcl	1	
HEMANGEOL	NF	
HEMICLOR	NF	
hydralazine hcl oral	1	
hydrochlorothiazide oral	1	
HYZAAR	NF	
icosapent ethyl	NF	PA
indapamide	1	
INDERAL LA	NF	
INSPRA	NF	
INZIRQO	NF	PA
irbesartan	1	
irbesartan-hydrochlorothiazide	1	

Drug Name	Drug Tier	Requirements & Limits
ISORDIL TITRADOSE	NF	
isosorbide dinitrate oral tablet 10 mg, 20 mg, 30 mg, 5 mg	1	
isosorbide dinitrate oral tablet 40 mg	NF	
isosorbide mononitrate er	1	
ivabradine hcl	3	PA, QL
KAPSPARGO SPRINKLE	4	
KERENDIA ORAL TABLET 10 MG, 20 MG	NF	PA, QL
labetalol hcl oral	1	
LANOXIN ORAL TABLET 125 MCG, 250 MCG	3	
LANOXIN ORAL TABLET 62.5 MCG	4	
LASIX	4	
LIPITOR	NF	
lisinopril oral	1	
lisinopril-hydrochlorothiazide	1	
LIVALO	NF	ST
LODOCO	4	QL
LOPID	4	
LOPRESSOR ORAL TABLET	4	
losartan potassium oral	1	
losartan potassium-hctz	1	
LOTENSIN	4	
LOTENSIN HCT	4	
LOTREL	NF	
lovastatin oral	1	H
LOVAZA	NF	
matzim la	2	
MAXZIDE ORAL TABLET 75-50 MG	4	
MAXZIDE-25 ORAL TABLET 37.5-25 MG	4	
metolazone	1	
metoprolol succinate er oral tablet extended release 24 hour 100 mg, 200 mg, 50 mg	2	

See page 6-8 for coverage details.



Drug Name	Drug Tier	Requirements & Limits
metoprolol succinate er oral tablet extended release 24 hour 25 mg	1	
metoprolol tartrate oral tablet 100 mg, 25 mg, 50 mg	1	
metoprolol tartrate oral tablet 37.5 mg, 75 mg	NF	
metoprolol-hydrochlorothiazide	1	
mexiletine hcl oral	1	
MICARDIS	NF	
MICARDIS HCT	NF	
midodrine hcl	1	
MINIPRESS ORAL CAPSULE 1 MG, 2 MG, 5 MG	4	
minoxidil oral	1	
MULTAQ	NF	PA
nadolol oral	1	
nebivolol hcl	3	
NEXLETOL	2	PA, ST, QL
NEXLIZET	2	PA, ST, QL
niacin er (antihyperlipidemic)	3	
nifedipine er	1	
nifedipine er osmotic release	1	
nifedipine oral	1	
NITRO-BID	2	
NITRO-DUR	3	
nitroglycerin rectal	NF	QL
nitroglycerin sublingual	1	
nitroglycerin transdermal	1	
NITROSTAT	4	
NORLIQVA	4	PA
NORVASC	NF	
olmesartan medoxomil oral	2	
olmesartan medoxomil-hctz	2	
olmesartan-amlodipine-hctz	NF	
omega-3-acid ethyl esters	2	
PACERONE ORAL TABLET 100 MG, 400 MG	3	

Drug Name	Drug Tier	Requirements & Limits
PACERONE ORAL TABLET 200 MG	4	
pentoxifylline er	1	
pitavastatin calcium	NF	ST
PRALUENT	NF	PA, ST, QL
pravastatin sodium	1	
prazosin hcl oral	1	
prevalite	1	
PROCARDIA XL	NF	
propafenone hcl	1	
propafenone hcl er	4	
propranolol hcl er	2	
propranolol hcl oral	1	
QUESTRAN	4	
QUESTRAN LIGHT	4	
ramipril	1	
ranolazine er	2	
RECTIV	NF	QL
REPATHA	2	QL
REPATHA PUSHTRONEX SYSTEM	2	QL
REPATHA SURECLICK	2	QL
rosuvastatin calcium oral	2	
RYTHMOL SR ORAL CAPSULE EXTENDED RELEASE 12 HOUR 225 MG, 325 MG, 425 MG	NF	
sacubitril-valsartan	3	PA, QL
simvastatin oral tablet 10 mg, 20 mg, 40 mg, 5 mg	1	H-PA
simvastatin oral tablet 80 mg	1	
SOAANZ	NF	QL
sotalol hcl oral	1	
spironolactone oral tablet	1	
spironolactone-hctz	1	
taztia xt oral capsule extended release 24 hour 120 mg, 180 mg, 240 mg, 300 mg, 360 mg	2	
TEKTURNA	NF	

See page 6-8 for coverage details.



Drug Name	Drug Tier	Requirements & Limits
TEKTURNA HCT ORAL TABLET 300-12.5 MG, 300-25 MG	NF	
telmisartan	2	
telmisartan-hctz	2	
TENORETIC 100	NF	
TENORETIC 50	NF	
TENORMIN	NF	
THALITONE	NF	
tiadylt er	2	
TIAZAC	4	
TIKOSYN	4	
TOPROL XL	NF	
toremide	1	
trandolapril	1	
triamterene-hctz	1	
TRIBENZOR	NF	
TRICOR	NF	
TRILIPIX ORAL CAPSULE DELAYED RELEASE 135 MG, 45 MG	NF	
VALSARTAN ORAL SOLUTION	4	PA
valsartan oral tablet	2	
valsartan-hydrochlorothiazide	1	
VASCEPA	NF	PA
VASERETIC	NF	
VASOTEC	NF	
verapamil hcl er oral capsule extended release 24 hour 100 mg, 200 mg, 300 mg	3	
verapamil hcl er oral capsule extended release 24 hour 120 mg, 180 mg, 240 mg, 360 mg	1	
verapamil hcl er oral tablet extended release	1	
verapamil hcl oral	1	
VERELAN	4	
VERELAN PM ORAL CAPSULE EXTENDED RELEASE 24 HOUR 100 MG, 200 MG, 300 MG	4	

Drug Name	Drug Tier	Requirements & Limits
VERQUVO	NF	PA, QL
VYNDAQEL	3	PA, QL, SP
VYTORIN	NF	
WELCHOL ORAL TABLET	NF	
ZESTORETIC	NF	
ZESTRIL	NF	
ZETIA	NF	
ZIAC ORAL TABLET 10-6.25 MG, 2.5-6.25 MG	3	
ZIAC ORAL TABLET 5-6.25 MG	4	
ZOCOR	NF	
Central Nervous System Agents - Drugs for Attention Deficit Disorder		
ADDERALL	NF	
ADDERALL XR	NF	QL
ADZENYS XR-ODT	NF	QL
amphetamine sulfate	2	
amphetamine-dextroamphetamine	1	
amphetamine-dextroamphetamine er	2	QL
amphet-dextroamphet 3-bead er	3	QL
APTENSIO XR	NF	QL
atomoxetine hcl	4	QL
AZSTARYS	3	ST, QL
clonidine hcl er	2	
CONCERTA	NF	QL
COTEMPLA XR-ODT	NF	QL
DEXEDRINE	NF	QL
dexmethylphenidate hcl	1	
dexmethylphenidate hcl er	2	QL
dextroamphetamine sulfate er oral capsule extended release 24 hour 10 mg, 15 mg	3	QL
dextroamphetamine sulfate er oral capsule extended release 24 hour 5 mg	2	QL
dextroamphetamine sulfate oral tablet 10 mg, 5 mg	2	

See page 6-8 for coverage details.



Drug Name	Drug Tier	Requirements & Limits
dextroamphetamine sulfate oral tablet 15 mg, 2.5 mg, 20 mg, 30 mg, 7.5 mg	NF	
DYANAVEL XR ORAL TABLET EXTENDED RELEASE	NF	QL
EVEKEO	NF	
FOCALIN	NF	
FOCALIN XR	NF	QL
guanfacine hcl er	2	
INTUNIV	NF	
JORNAY PM	3	ST, QL
KAPVAY ORAL TABLET EXTENDED RELEASE 12 HOUR 0.1 MG	NF	
lisdexamfetamine dimesylate	3	QL
METADATE CD	NF	QL
METHYLIN	NF	
methylphenidate hcl er (cd)	2	QL
methylphenidate hcl er (la) oral capsule extended release 24 hour	2	QL
methylphenidate hcl er (osm) oral tablet extended release 18 mg, 27 mg, 36 mg, 54 mg	2	QL
METHYLPHENIDATE HCL ER (OSM) ORAL TABLET EXTENDED RELEASE 45 MG, 63 MG	NF	QL
methylphenidate hcl er (osm) oral tablet extended release 72 mg	NF	QL
methylphenidate hcl er (xr)	NF	QL
methylphenidate hcl er oral tablet extended release	2	QL
methylphenidate hcl er oral tablet extended release 24 hour	NF	QL
methylphenidate hcl oral solution	1	
methylphenidate hcl oral tablet	1	
methylphenidate hcl oral tablet chewable	3	
MYDAYIS	NF	QL
ONYDA XR	3	QL

Drug Name	Drug Tier	Requirements & Limits
QELBREE	NF	PA, QL
QUILLICHEW ER	NF	QL
QUILLIVANT XR	NF	QL
RELEXXII	NF	QL
RITALIN	NF	
RITALIN LA	NF	QL
STRATTERA ORAL CAPSULE 10 MG, 100 MG, 18 MG, 25 MG, 40 MG, 60 MG, 80 MG	NF	QL
VYVANSE	NF	QL
ZENZEDI	NF	
Central Nervous System Agents - Drugs for Multiple Sclerosis		
AMPYRA	NF	PA, QL, SP
AUBAGIO	NF	PA, QL, SP
AVONEX	3	PA, QL, SP
BAFIERTAM	3	PA, QL, SP
BETASERON	3	PA, QL, SP
COPAXONE	NF	PA, QL, SP
dalfampridine er	3	PA, QL, SP
dimethyl fumarate oral	1	PA, QL, SP
EXTAVIA SUBCUTANEOUS KIT 0.3 MG	NF	PA, ST, QL, SP
fingolimod hcl	1	PA, QL, SP
GILENYA	NF	PA, QL, SP
glatiramer acetate	3	PA, QL, SP
glatopa	3	PA, QL, SP
KESIMPTA	3	PA, QL, SP
MAVENCLAD	4	PA, ST, QL, SP
MAYZENT	4	PA, QL, SP
PLEGRIDY	4	PA, QL, SP
TECFIDERA ORAL CAPSULE DELAYED RELEASE	NF	PA, QL, SP
teriflunomide	3	PA, QL, SP
VUMERITY	NF	PA, QL, SP
Central Nervous System Agents - Miscellaneous		
AUSTEDO	3	PA, QL, SP
AUSTEDO XR	3	PA, QL, SP
INGREZZA	3	PA, QL, SP

See page 6-8 for coverage details.



Drug Name	Drug Tier	Requirements & Limits
INGREZZA SPRINKLE	3	PA, QL, SP
LYRICA ORAL CAPSULE	NF	PA
NUEDEXTA	2	PA, QL
pregabalin oral capsule	2	
RADICAVA ORS	4	PA, QL, SP
RADICAVA ORS STARTER KIT	4	PA, QL, SP
SAVELLA	4	QL
TEGLUTIK	4	PA
TIGLUTIK	4	PA
VEOZAH	4	PA, QL
ZEPOSIA	4	PA, ST, QL, SP

Dental and Oral Agents - Drugs for Mouth and Throat Conditions

cevimeline hcl	1	
chlorhexidine gluconate mouth/throat	1	
CLINPRO 5000	3	
DENTA 5000 PLUS	4	
DENTAGEL	4	
EVOXAC	NF	
FLUORIDEX	3	
FLUORIDEX ENHANCED WHITENING	3	
FLUORIMAX 5000	3	
FRAICHE 5000 DENTAL	4	
JUST RIGHT 5000 DENTAL GEL 1.1 %	4	
JUST RIGHT 5000 DENTAL PASTE	3	
KOURZEQ	2	
lidocaine hcl mouth/throat	1	
lidocaine viscous hcl	1	
ORALONE	2	
PERIDEX	4	
perio gard	1	
pilocarpine hcl oral	1	
PREVIDENT 5000 BOOSTER PLUS	3	
PREVIDENT 5000 DRY MOUTH	4	

Drug Name	Drug Tier	Requirements & Limits
PREVIDENT 5000 KIDS	3	
PREVIDENT 5000 ORTHO DEFENSE	3	
PREVIDENT 5000 PLUS	4	
PREVIDENT DENTAL	4	
SALAGEN	4	
sf 5000 plus	1	
sf gel 1.1%	1	
sodium fluoride 5000 plus	1	
sodium fluoride 5000 ppm	1	
sodium fluoride dental	1	
triamcinolone acetonide mouth/throat	1	

Dermatological Agents - Drugs for Skin Conditions

ABSORICA	NF	PA
ACANYA	NF	QL
acutane	2	
acitretin	1	
ACZONE	NF	QL
ADAINZDE EXTERNAL GEL 0.3-2.5-1 %	NF	
adapalene external gel	NF	PA, QL
adapalene-benzoyl peroxide external gel	3	QL
ADEINZDE	NF	
AKLIEF	4	PA, QL
ALA SCALP	4	
ala-cort	NF	
alclometasone dipropionate	1	
ammonium lactate external	NF	
amnesteem	2	
AMZEEQ	NF	QL
ARAZLO	NF	PA, QL
ATRALIN	NF	PA, QL
AVAR CLEANSER	4	
AVAR LS CLEANSER	NF	
AVITA EXTERNAL CREAM 0.025 %	NF	PA, QL

See page 6-8 for coverage details.



Drug Name	Drug Tier	Requirements & Limits
azelaic acid external	3	
AZELEX	NF	QL
BENZAMYCIN	NF	QL
benzoyl peroxide-erythromycin	1	QL
betamethasone dipropionate aug external cream	1	
betamethasone dipropionate aug external lotion	3	
betamethasone dipropionate aug external ointment	3	
betamethasone dipropionate external cream	2	
betamethasone dipropionate external lotion	1	
betamethasone dipropionate external ointment	2	
betamethasone valerate external cream	1	
betamethasone valerate external lotion	1	
betamethasone valerate external ointment	1	
BLANCHE	NF	
CABTREO	NF	QL
calcipotriene external cream	2	QL
calcipotriene external ointment	2	
calcipotriene external solution	1	QL
CALCITRENE	3	
CARAC EXTERNAL CREAM 0.5 %	NF	
CIBINQO	3	PA, QL, SP
ciclopirox olamine external suspension	1	
claravis	2	
CLEOCIN-T	NF	
clindacin etz external swab	1	
clindacin-p	1	
CLINDAGEL	NF	QL
clindamycin phos (once-daily) gel 1 % external	2	QL

Drug Name	Drug Tier	Requirements & Limits
clindamycin phos (once-daily) gel 1 % external	NF	(generic for Clindagel), QL
clindamycin phos (twice-daily) gel 1 % external	2	QL
clindamycin phos (twice-daily) gel 1 % external	2	(generic for Cleocin-T), QL
clindamycin phos (twice-daily) gel 1 % external	NF	(generic for Clindagel), QL
clindamycin phos-benzoyl perox external gel 1.2-5 %	3	QL
clindamycin phos-benzoyl perox external gel 1-5 %, 1.2-2.5 %, 1.2-3.75 %	NF	QL
clindamycin phosphate external lotion	3	
clindamycin phosphate external solution	1	
clindamycin phosphate external swab	1	
clobetasol prop emollient base external cream 0.05 %	2	QL
clobetasol propionate e	2	QL
CLOBETASOL PROPIONATE EXTERNAL CREAM 0.025 %	NF	QL
clobetasol propionate external cream 0.05 %	2	QL
clobetasol propionate external foam	NF	QL
clobetasol propionate external gel	2	QL
clobetasol propionate external liquid	1	QL
clobetasol propionate external ointment	2	QL
clobetasol propionate external shampoo	NF	QL
clobetasol propionate external solution	1	QL
CLOBEX EXTERNAL SHAMPOO	NF	QL
CLOBEX SPRAY	NF	QL
clodan	NF	QL

See page 6-8 for coverage details.



Drug Name	Drug Tier	Requirements & Limits
clotrimazole external cream	NF	
clotrimazole-betamethasone	1	
dapsone external	NF	QL
DERMACINRX UREA	NF	
DERMA-SMOOTHIE/FS BODY	4	QL
DERMA-SMOOTHIE/FS SCALP	4	
desonide external cream	2	QL
desonide external lotion	3	QL
desonide external ointment	2	QL
DESOWEN	3	QL
desoximetasone external cream	1	QL
desoximetasone external ointment	3	QL
diclofenac sodium external gel 3 %	2	PA, QL
DIFFERIN EXTERNAL GEL 0.3 %	NF	PA, QL
DIPROLENE	4	
doxycycline	NF	
DRYSOL	4	
DUPIXENT	3	PA, QL, SP
EBGLYSS SUBCUTANEOUS SOLUTION AUTO-INJECTOR	3	PA, QL, SP
EFUDEX EXTERNAL CREAM 5 %	4	
ENSTILAR	4	QL
EPIDUO	NF	QL
EPIDUO FORTE	NF	QL
ERYGEL	3	
erythromycin external	1	
EUCRISA	3	ST, QL
FINACEA EXTERNAL FOAM	4	
FINACEA EXTERNAL GEL	NF	
fluocinolone acetonide body	3	QL
fluocinolone acetonide external cream	3	QL
fluocinolone acetonide external ointment	2	QL
fluocinolone acetonide external solution	1	QL
fluocinolone acetonide scalp	3	

Drug Name	Drug Tier	Requirements & Limits
fluocinonide external cream 0.05 %	1	
fluocinonide external cream 0.1 %	NF	QL
fluocinonide external gel	1	
fluocinonide external ointment	1	
fluocinonide external solution	1	
FLUOROURACIL EXTERNAL CREAM 0.5 %	NF	
fluorouracil external cream 5 %	1	
fluticasone propionate external cream	1	
fluticasone propionate external ointment	1	
halobetasol propionate external cream	2	QL
halobetasol propionate external ointment	2	QL
hydrocortisone external cream 1 %	NF	
hydrocortisone external cream 2.5 %	1	
hydrocortisone external lotion 2 %	4	
hydrocortisone external lotion 2.5 %	1	
hydrocortisone external ointment 1 %, 2.5 %	1	
hydrocortisone valerate external cream	2	QL
hydroquinone external	NF	
HYDROXYM EXTERNAL CREAM	NF	
imiquimod external cream 3.75 %	NF	QL
imiquimod external cream 5 %	1	
imiquimod pump	NF	QL
IMPOYZ	NF	QL
isotretinoin oral capsule 10 mg, 20 mg, 30 mg, 40 mg	2	
isotretinoin oral capsule 25 mg, 35 mg	NF	PA

See page 6-8 for coverage details.



Drug Name	Drug Tier	Requirements & Limits
ivermectin external cream	NF	QL
KLARON	4	
KLISYRI	4	ST, QL
LOPROX EXTERNAL SUSPENSION 0.77 %	NF	
METROCREAM	4	
METROGEL	NF	
METROLOTION	4	
metronidazole external cream	1	
metronidazole external gel 0.75 %	1	
metronidazole external gel 1 %	NF	
metronidazole external lotion	1	
MIRVASO	3	PA, QL
mometasone furoate external	1	
NEMLUVIO	3	PA, QL, SP
neuac	3	QL
NORITATE	NF	
ONEXTON	NF	QL
OPZELURA	NF	PA, QL, SP
ORACEA	NF	
OVACE PLUS WASH EXTERNAL LIQUID	4	
OVACE WASH	4	
PANRETIN	3	
pimecrolimus	3	QL
PLEXION CLEANSER	NF	
podofilox external solution	1	
RETIN-A	NF	PA, QL
RHOFADE	NF	PA, QL
SANTYL	4	QL
selenium sulfide external lotion	1	
sodium sulfacetamide wash	1	
SOOLANTRA	4	QL
sulfacetamide sodium (acne)	1	
sulfacetamide sodium external	1	
sulfacetamide sodium-sulfur external liquid 10-2 %, 9-4.5 %, 9.8-4.8 %	NF	

Drug Name	Drug Tier	Requirements & Limits
sulfacetamide sodium-sulfur external liquid 10-5 %, 9-4 %	1	
sulfacetamide sod-sulfur wash external liquid 9-4 %	1	
sulfacetamide sod-sulfur wash external liquid 9-4.5 %	NF	
SUMADAN WASH	NF	
SYNALAR	NF	QL
SYNALAR EXTERNAL SOLUTION 0.01 %	NF	QL
TACLONEX	NF	QL
TACLONEX EXTERNAL OINTMENT 0.005-0.064 %	NF	QL
tacrolimus external	2	QL
tazarotene external cream	3	PA, QL
TAZORAC EXTERNAL CREAM	NF	PA, QL
TOLAK	NF	
TOPICORT	4	QL
TOPICORT EXTERNAL CREAM 0.05 %, 0.25 %	4	QL
tretinoin external cream	3	QL
tretinoin external gel 0.01 %, 0.025 %	NF	QL
tretinoin external gel 0.05 %	NF	PA, 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	
triamcinolone acetonide external ointment 0.05 %	NF	
triamcinolone in absorbbase	NF	
TRIANEX EXTERNAL OINTMENT 0.05 %	NF	
triderm	1	QL
TRIDESILON EXTERNAL CREAM 0.05 %	3	QL

See page 6-8 for coverage details.



Drug Name	Drug Tier	Requirements & Limits
tritocin external ointment 0.05 %	NF	
urea external cream 20 %, 40 %, 45 %	1	
urea external cream 39 %	NF	
UREA EXTERNAL CREAM 39.5 %	NF	
urea external cream 41 %, 47 %	NF	
uredeb	NF	
UREMEZ-40	3	
URESOL	NF	
VANOS	NF	QL
VTAMA	4	PA, QL
WINLEVI	NF	PA, QL
xurea	NF	
zenatane	2	
ZILXI	NF	PA, ST, QL
ZORYVE EXTERNAL CREAM	4	PA, QL
ZORYVE EXTERNAL FOAM	4	PA, QL
ZYCLARA	NF	QL
ZYCLARA PUMP	NF	QL
Diabetes - Glucose Monitoring and Supplies		
ACCU-CHEK AVIVA PLUS TEST STRIPS	NF	QL
ACCU-CHEK FASTCLIX LANCET	1	
ACCU-CHEK FASTCLIX LANCET DEVICE KIT	1	
ACCU-CHEK GUIDE KIT W/ DEVICE	2	
ACCU-CHEK GUIDE ME METER	2	
ACCU-CHEK GUIDE TEST STRIPS	2	QL
ACCU-CHEK SMARTVIEW TEST STRIPS	NF	QL
ACCU-CHEK SOFTCLIX LANCET	1	
ACCU-CHEK SOFTCLIX LANCET DEVICE KIT	1	
BD AUTOSHIELD DUO PEN NEEDLES	2	QL
BD ULTRA-FINE PEN NEEDLES	2	QL
BD ULTRA-FINE U-500 INSULIN SYRINGES	2	

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

See page 6-8 for coverage details.



Drug Name	Drug Tier	Requirements & Limits
EVERSENSE E3 SENSOR/HOLDER	NF	PA
EVERSENSE E3 SMART TRANSMITTER	NF	PA
EVERSENSE SENSOR/HOLDER	NF	PA
EVERSENSE SMART TRANSMITTER	NF	PA
FREESTYLE LIBRE 14 DAY READER	3	PA, QL
FREESTYLE LIBRE 14 DAY SENSOR	3	PA, QL
FREESTYLE LIBRE 2 PLUS SENSOR	3	PA
FREESTYLE LIBRE 2 READER	3	PA, QL
FREESTYLE LIBRE 2 SENSOR	3	PA, QL
FREESTYLE LIBRE 3 PLUS SENSOR	3	PA
FREESTYLE LIBRE 3 READER	3	PA
FREESTYLE LIBRE 3 SENSOR	3	PA, QL
FREESTYLE LIBRE READER	3	PA, QL
FREESTYLE PRECISION NEO SYSTEM	NF	
FREESTYLE PRECISION NEO TEST	NF	QL
FREESTYLE TEST	NF	QL
GLUCOCARD EXPRESSION TEST	NF	QL
GLUCOCARD SHINE TEST	NF	QL
GLUCOCARD VITAL TEST	NF	QL
GUARDIAN 4 GLUCOSE SENSOR	3	PA, QL
GUARDIAN 4 TRANSMITTER	3	PA, QL
GUARDIAN CONNECT TRANSMITTER	3	PA, QL
GUARDIAN LINK 3 TRANSMITTER	3	PA, QL
GUARDIAN REAL-TIME REPLACE PED	3	PA
GUARDIAN SENSOR 3	3	PA, QL
INPEN	3	ST
NOVOFINE AUTOCOVER PEN NEEDLE 30G X 8 MM	2	QL
NOVOFINE PEN NEEDLE	2	QL

Drug Name	Drug Tier	Requirements & Limits
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 INTRO KIT	2	PA, QL
OMNIPOD 5 LIBRE PODS	2	PA, QL
ONETOUCH ULTRA 2 KIT W/ DEVICE	NF	
ONETOUCH ULTRA BLUE TEST	NF	QL
ONETOUCH ULTRA TEST STRIPS	NF	QL
ONETOUCH VERIO FLEX SYSTEM KIT	NF	
ONETOUCH VERIO IQ SYSTEM KIT W/DEVICE	NF	
ONETOUCH VERIO KIT W/ DEVICE	NF	
ONETOUCH VERIO REFLECT KIT W/DEVICE	NF	
ONETOUCH VERIO TEST STRIPS	NF	QL
TECHLITE INSULIN SYRINGES (Arkray)	2	QL
TECHLITE PEN NEEDLES (Arkray)	2	QL
TECHLITE PLUS PEN NEEDLES (Arkray)	2	QL
TEMPO REFILL	NF	
TEMPO WELCOME	NF	
TRUE FOCUS BLOOD GLUCOSE STRIP	NF	QL
TRUE METRIX AIR GLUCOSE METER KIT	NF	
TRUE METRIX BLOOD GLUCOSE TEST	NF	QL
TRUE METRIX GO GLUCOSE METER	NF	
TRUE METRIX METER	NF	
TRUE METRIX PRO BLOOD GLUCOSE	NF	QL

See page 6-8 for coverage details.



Drug Name	Drug Tier	Requirements & Limits
TWIIST REFILL KIT	2	PA, QL
TWIIST REFILL KIT/INFUSION SET	2	PA, QL
TWIIST STARTER KIT	2	PA, QL
Diabetes - Insulin		
ADMELOG	NF	QL
ADMELOG SOLOSTAR	NF	QL
BASAGLAR TEMPO PEN	NF	QL
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	2	QL
HUMALOG MIX 75/25 KWIKPEN	2	QL
HUMALOG MIX 75/25 VIAL	2	QL
HUMALOG TEMPO PEN	NF	QL
HUMALOG U-100 JUNIOR KWIKPEN	2	QL
HUMALOG VIAL	NF	QL
HUMULIN 70/30 KWIKPEN	2	QL
HUMULIN 70/30 VIAL	2	QL
HUMULIN N KWIKPEN	2	QL
HUMULIN N VIAL	2	QL
HUMULIN R SOLUTION 100 UNIT/ML INJECTION	1	QL
HUMULIN R SOLUTION 100 UNIT/ML INJECTION	2	QL
HUMULIN R U-500 KWIKPEN	2	QL
HUMULIN R U-500 VIAL	2	QL
INSULIN ASPART	NF	ST, QL
INSULIN ASPART FLEXPEN	NF	ST, QL
INSULIN DEGLUDEC FLEXTOUCH	NF	QL
INSULIN GLARGINE	NF	QL
INSULIN GLARGINE MAX SOLOSTAR	NF	QL
INSULIN GLARGINE SOLOSTAR	NF	QL
INSULIN LISPRO JUNIOR KWIKPEN	2	QL

Drug Name	Drug Tier	Requirements & Limits
INSULIN LISPRO KWIKPEN	2	QL
INSULIN LISPRO PROT & LISPRO	2	QL
INSULIN LISPRO VIAL	2	QL
LANTUS SOLOSTAR	2	QL
LANTUS U-100 VIAL	2	QL
LYUMJEV KWIKPEN	2	QL
LYUMJEV TEMPO PEN	NF	QL
LYUMJEV VIAL	2	QL
NOVOLIN 70/30 FLEXPEN	NF	ST, QL
NOVOLIN 70/30 FLEXPEN RELION	NF	ST, QL
NOVOLIN 70/30 RELION	NF	ST, QL
NOVOLIN 70/30 VIAL	NF	ST, QL
NOVOLIN N FLEXPEN	NF	ST, QL
NOVOLIN N FLEXPEN RELION	NF	ST, QL
NOVOLIN N RELION	NF	ST, QL
NOVOLIN N VIAL	NF	ST, QL
NOVOLIN R FLEXPEN	NF	ST, QL
NOVOLIN R FLEXPEN RELION	NF	ST, QL
NOVOLIN R RELION	NF	ST, QL
NOVOLIN R VIAL	NF	ST, QL
NOVOLOG FLEXPEN	NF	ST, QL
NOVOLOG FLEXPEN RELION	NF	ST, QL
NOVOLOG RELION	NF	ST, QL
NOVOLOG U-100 VIAL	NF	ST, QL
TOUJEO MAX SOLOSTAR	3	QL
TOUJEO SOLOSTAR	3	QL
TRESIBA FLEXTOUCH	NF	QL
Diabetes - Non-Insulin Agents		
acarbose oral	1	
ACTOPLUS MET	NF	QL
ACTOS	NF	QL
ALOGLIPTIN BENZOATE	2	QL
BAQSIMI ONE PACK	2	QL
BAQSIMI TWO PACK	2	QL
BRENZAVVY	3	ST, QL

See page 6-8 for coverage details.



Drug Name	Drug Tier	Requirements & Limits
BYDUREON BCISE AUTOINJECTOR SUBCUTANEOUS AUTO-INJECTOR 2 MG/0.85ML	3	PA, QL
DAPAGLIFLOZIN PRO-METFORMIN ER	NF	ST, QL
DAPAGLIFLOZIN PROPANEDIOL	NF	ST, QL
FARXIGA	NF	ST, QL
glimepiride oral tablet 1 mg, 2 mg, 4 mg	1	
glimepiride oral tablet 3 mg	NF	
glipizide er	1	
glipizide oral tablet 10 mg, 5 mg	1	
glipizide oral tablet 2.5 mg	NF	
glipizide xl oral tablet extended release 24 hour 10 mg, 2.5 mg, 5 mg	1	
glipizide-metformin hcl	2	
glucagon emergency kit 1 mg injection	2	QL
GLUCAGON EMERGENCY KIT 1 MG INJECTION	NF	QL
GLUCAGON EMERGENCY KIT for LOW BLOOD SUGAR (Fresenius)	2	QL
GLUCOTROL XL	4	
GLUMETZA ORAL TABLET EXTENDED RELEASE 24 HOUR 1000 MG, 500 MG	NF	PA
glyburide oral	1	
glyburide-metformin	1	
GLYXAMBI	2	ST, QL
GVOKE HYOPEN 1-PACK	2	QL
GVOKE HYOPEN 2-PACK	2	QL
GVOKE KIT	2	
GVOKE PFS	2	
INVOKANA	NF	ST, QL
JANUMET	NF	ST, QL
JANUVIA	NF	ST, QL
JARDIANCE	2	QL
JENTADUETO	2	QL

Drug Name	Drug Tier	Requirements & Limits
JENTADUETO XR	2	QL
KOMBIGLYZE XR ORAL TABLET EXTENDED RELEASE 24 HOUR 2.5-1000 MG, 5-1000 MG, 5-500 MG	NF	QL
liraglutide solution pen-injector 18 mg/3ml subcutaneous	2	PA, QL (2-pack)
liraglutide solution pen-injector 18 mg/3ml subcutaneous	3	PA, QL (3-pack)
metformin hcl er	1	
metformin hcl er (mod)	NF	PA
metformin hcl er (osm)	NF	PA
metformin hcl oral tablet 1000 mg, 500 mg, 850 mg	1	
metformin hcl oral tablet 625 mg, 750 mg	NF	
MOUNJARO	3	PA, QL
nateglinide	2	QL
NESINA ORAL TABLET 12.5 MG, 25 MG, 6.25 MG	NF	QL
ONGLYZA	NF	QL
OZEMPIC	3	PA, QL
pioglitazone hcl	1	QL
pioglitazone hcl-metformin hcl	2	QL
repaglinide	2	QL
RYBELSUS	3	PA, QL
saxagliptin hcl	2	QL
saxagliptin-metformin er	2	QL
SOLQUA	2	QL
SYMLINPEN 120	NF	QL
SYMLINPEN 60	NF	QL
SYNJARDY	2	QL
SYNJARDY XR	2	QL
TRADJENTA	2	QL
TRIJARDY XR	2	QL
TRULICITY	3	PA, QL
XIGDUO XR	NF	ST, QL
ZEGALOGUE SUBCUTANEOUS SOLUTION AUTO-INJECTOR	2	QL

See page 6-8 for coverage details.



Drug Name	Drug Tier	Requirements & Limits
Drugs for Blood Disorders		
ADVATE	3	SP
ADYNOVATE	4	PA, SP
AFSTYLA	4	PA, SP
ALPHANATE	3	SP
ALPROLIX INTRAVENOUS SOLUTION RECONSTITUTED 1000 UNIT, 2000 UNIT, 3000 UNIT, 4000 UNIT, 500 UNIT	4	SP
ALPROLIX INTRAVENOUS SOLUTION RECONSTITUTED 250 UNIT	3	SP
ALTUVIIIIO	4	PA, SP
ALVAIZ	4	PA, SP
ARANESP (ALBUMIN FREE)	3	QL, SP
BENEFIX	3	SP
DOPTELET	4	PA, QL, SP
ELOCTATE	NF	PA, SP
FABHALTA	3	PA, QL, SP
HEMLIBRA SUBCUTANEOUS SOLUTION 105 MG/0.7ML, 150 MG/ML, 30 MG/ML, 300 MG/2ML, 60 MG/0.4ML	3	PA, SP
HEMLIBRA SUBCUTANEOUS SOLUTION 12 MG/0.4ML	NF	PA, SP
HEMOFIL M	3	SP
HUMATE-P	3	SP
HYMPAVZI	3	PA, QL, SP
IDELVION	4	SP
KOATE	3	SP
KOATE-DVI	3	SP
KOGENATE FS	3	SP
KOVALTRY	3	SP
NEULASTA	3	SP
NIVESTYM	3	SP
NOVOEIGHT	3	SP
NUWIQ	3	SP
NYVEPRIA	NF	
PROMACTA POWDER	4	PA, QL, SP
PROMACTA TABLET	NF	PA, QL, SP

Drug Name	Drug Tier	Requirements & Limits
RECOMBINATE	3	SP
RETACRIT	3	QL, SP
TAVALISSE	4	PA, QL, SP
tranexamic acid oral	2	QL
UDENYCA SUBCUTANEOUS SOLUTION AUTO-INJECTOR	3	SP
VOYDEYA	3	PA, QL, SP
WILATE	3	SP
ZARXIO	3	SP
Drugs for Sexual Dysfunction		
ADDYI	4	PA, QL
avanafil	3	PA, QL
CIALIS	NF	QL
IMVEXXY MAINTENANCE PACK	2	QL
IMVEXXY STARTER PACK	2	QL
INTRAROSA	NF	PA, QL
OSPHENA	3	PA, QL
sildenafil citrate oral tablet 100 mg, 25 mg, 50 mg	2	QL
STENDRA	4	PA, QL
tadalafil oral	2	QL
vardeafil hcl oral tablet	3	QL
VIAGRA	NF	QL
VYLEESI	4	PA, QL
Electrolytes / Vitamins		
ACCRUFER	NF	
CARNITOR ORAL SOLUTION	NF	
CARNITOR SF	NF	
CO-NATAL FA	2	
cvs prenatal	NF	
cyanocobalamin injection solution 1000 mcg/ml	1	
CYANOCOBALAMIN INJECTION SOLUTION 2000 MCG/ML	3	
cyanocobalamin nasal	3	
DAVIMET-FLUORIDE	NF	
DENTA 5000 PLUS SENSITIVE	3	
DODEX INJECTION SOLUTION 1000 MCG/ML	4	

See page 6-8 for coverage details.



Drug Name	Drug Tier	Requirements & Limits
DRISDOL	4	
ergocalciferol oral capsule	1	
FLORAFOL PEDIATRIC ORAL SOLUTION 0.25 MG/ML	3	
FLORAFOL PEDIATRIC ORAL TABLET CHEWABLE 0.5 MG, 1 MG	NF	
FLORIVA PLUS	NF	
FLOTREX	NF	
FLUORIMAX 5000 SENSITIVE	3	
folic acid oral tablet 1 mg	1	
FRAICHE 5000 SENSITIVE DENTAL GEL 1.1-4.5 %	NF	
klor-con	1	
klor-con 10	1	
klor-con m10	1	
klor-con m15	1	
klor-con m20	1	
K-PHOS-NEUTRAL	2	
K-TAB ORAL TABLET EXTENDED RELEASE 10 MEQ, 20 MEQ	3	
levocarnitine oral solution	1	
levocarnitine sf	1	
LOKELMA	3	PA, QL
M-NATAL PLUS	3	
multivitamin w/fluoride tablet chewable 0.25 mg oral	1	
multivitamin w/fluoride tablet chewable 0.25 mg oral	NF	
multivitamin w/fluoride tablet chewable 0.5 mg oral	1	
multivitamin w/fluoride tablet chewable 0.5 mg oral	NF	
multivitamin w/fluoride tablet chewable 1 mg oral	1	
multivitamin w/fluoride tablet chewable 1 mg oral	NF	
multi-vitamin/fluoride	1	
multivitamin/fluoride oral tablet chewable	1	

Drug Name	Drug Tier	Requirements & Limits
MULTI-VIT-FLOR	NF	
NASCOBAL	4	
NEONATAL COMPLETE	3	
NEONATAL PLUS	3	
NEONATAL PRENATAL	NF	
NEONATAL VITAMIN	NF	
NIVA-PLUS	3	
ONE VITE WOMENS	NF	
ONE VITE WOMENS PLUS	3	
ORACIT	2	
ORAL CITRATE	2	
PHOSPHA 250 NEUTRAL	2	
phosphorous	1	
phospho-trin 250 neutral	1	
pnv 27-ca/fe/fa	1	
POKONZA	NF	
POLY-VI-FLOR ORAL TABLET CHEWABLE	NF	
potassium chloride crys er	1	
potassium chloride er oral capsule extended release	1	
potassium chloride er oral tablet extended release 10 meq, 20 meq, 8 meq	1	
potassium chloride er oral tablet extended release 15 meq	2	
potassium chloride oral	1	
potassium citrate er	1	
prenatal oral tablet 27-0.8 mg	NF	
prenatal oral tablet 27-1 mg	1	
prenatal plus	1	
prenatal plus vitamin/mineral	1	
prenatal vitamins oral tablet 27-0.8 mg	NF	
PRENATE MINI	3	
PRENATOL-M	NF	
PRENATRIX	NF	
PRENATRYL	NF	

See page 6-8 for coverage details.



Drug Name	Drug Tier	Requirements & Limits
PREVIDENT 5000 ENAMEL PROTECT	3	
PREVIDENT 5000 SENSITIVE	3	
QUFLORA PEDIATRIC	3	
sod citrate-citric acid oral solution 500-334 mg/5ml	1	
sod fluoride-potassium nitrate	1	
sodium fluoride 5000 enamel	1	
sodium fluoride 5000 sensitive	1	
sodium fluoride oral solution	1	H
sodium fluoride oral tablet chewable	1	H
TRICARE ORAL TABLET	3	
TRINATAL RX 1	3	
TRINATE	3	
tri-vite/fluoride	1	
UROCIT-K 10	4	
UROCIT-K 15	4	
UROCIT-K 5 ORAL TABLET EXTENDED RELEASE 5 MEQ (540 MG)	4	
VELTASSA	3	PA, QL
VITAFOL FE+	3	
VITAFOL ULTRA	3	
VITAFOL-OB	3	
vitamin d (ergocalciferol) oral capsule 1.25 mg (50000 ut), 50000 unit	1	
VITATHELY WITH GINGER	3	
wes-phos 250 neutral	1	
WESTAB PLUS	NF	
Gastrointestinal Agents - Drugs for Acid Reflux and Ulcer		
ACIPHEX	NF	QL
bis subcit-metronid-tetracyc	NF	QL
bismuth/metronidaz/tetracyclin	NF	QL
CARAFATE	NF	
cimetidine oral	1	
CYTOTEC	4	

Drug Name	Drug Tier	Requirements & Limits
DEXILANT	NF	QL
dexlansoprazole	NF	QL
esomeprazole magnesium oral capsule delayed release	NF	QL
esomeprazole magnesium oral packet	4	PA, ST, QL
famotidine oral suspension reconstituted	1	
famotidine oral tablet 20 mg, 40 mg	NF	
lansoprazole oral capsule delayed release	NF	QL
lansoprazole oral tablet delayed release dispersible	3	PA, ST, QL
misoprostol oral	1	
NEXIUM ORAL CAPSULE DELAYED RELEASE	NF	QL
NEXIUM ORAL PACKET	4	PA, ST, QL
OMECLAMOX-PAK	4	QL
omeprazole oral capsule delayed release	1	
pantoprazole sodium oral tablet delayed release	1	
PEPCID	NF	
PREVACID	NF	QL
PREVACID SOLUTAB	NF	PA, ST, QL
PROTONIX ORAL TABLET DELAYED RELEASE	NF	
PYLERA	NF	QL
rabeprazole sodium oral tablet delayed release	2	QL
sucralfate oral suspension	3	
sucralfate oral tablet	1	
VOQUEZNA	4	PA, QL
VOQUEZNA DUAL PAK	4	ST, QL
VOQUEZNA TRIPLE PAK	4	ST, QL
Gastrointestinal Agents - Drugs for Bowel, Intestine and Stomach Conditions		
AMITIZA	NF	PA, QL
ANASPAZ	2	

See page 6-8 for coverage details.



Drug Name	Drug Tier	Requirements & Limits
BYLVAY	NF	PA, QL, SP
BYLVAY (PELLETS)	NF	PA, QL, SP
chlordiazepoxide-clidinium	NF	
CLENPIQ	3	QL
constulose	1	
cromolyn sodium oral	1	
dicyclomine hcl oral capsule	1	
dicyclomine hcl oral tablet 20 mg	1	
diphenoxylate-atropine oral tablet	1	
enulose	1	
GASTROCROM	NF	
gavilyte-c	1	H
gavilyte-g	1	QL, H
gavilyte-n with flavor pack	1	QL, H
generlac	1	
GLYCATE	NF	
glycopyrrolate oral tablet 1 mg, 2 mg	1	
GLYCOPYRROLATE ORAL TABLET 1.5 MG	NF	
GOLYTELY	1	QL, H
hyoscyamine sulfate er	1	
hyoscyamine sulfate oral tablet	1	
hyoscyamine sulfate oral tablet dispersible	1	
hyoscyamine sulfate sublingual	1	
IBSRELA	NF	PA, ST, QL
IQIRVO	4	PA, ST, QL, SP
lactulose encephalopathy	1	
lactulose oral solution	1	
LEVBID	4	
LEVSIN	4	
LEVSIN/SL	4	
LIBRAX	NF	
LINZESS	2	PA, QL
LIVDELZI	4	PA, ST, QL, SP

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

See page 6-8 for coverage details.



Drug Name	Drug Tier	Requirements & Limits
EVRYSDI ORAL SOLUTION RECONSTITUTED	3	PA, QL, SP
JYNARQUE ORAL TABLET THERAPY PACK	NF	PA, QL, SP
levocarnitine oral tablet	1	
ORFADIN	3	PA, SP
PANCREAZE	NF	ST
PERTZYE	4	ST
STRENSIQ	3	PA, QL, SP
SUCRAID	3	PA, SP
TEGSEDI SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 284 MG/1.5ML	3	PA, QL, SP
tolvaptan oral tablet therapy pack	3	PA, QL, SP
VYNDAMAX	3	PA, QL, SP
VYNDAQEL	3	PA, QL, SP
ZENPEP	2	

Genitourinary Agents - Drugs for Bladder, Genital and Kidney Conditions

bethanechol chloride oral	1	
calcium acetate (phos binder) oral capsule	1	
DETROL	NF	
DETROL LA ORAL CAPSULE EXTENDED RELEASE 24 HOUR 2 MG, 4 MG	NF	
DITROPAN XL ORAL TABLET EXTENDED RELEASE 24 HOUR 5 MG	NF	
ELMIRON	NF	ST
GEMTESA	NF	
mirabegron er	3	ST
MYRBETRIQ ORAL TABLET EXTENDED RELEASE 24 HOUR	NF	
oxybutynin chloride er	2	
oxybutynin chloride oral solution	1	
oxybutynin chloride oral tablet 2.5 mg	4	
oxybutynin chloride oral tablet 5 mg	1	

Drug Name	Drug Tier	Requirements & Limits
phenazo oral tablet 200 mg	1	
phenazopyridine hcl oral tablet 100 mg, 200 mg	1	
PYRIDIUM	3	
REVELA ORAL TABLET	NF	
sevelamer carbonate oral tablet	2	
solifenacin succinate	2	
tolterodine tartrate	3	ST
tolterodine tartrate er	NF	
tropium chloride	3	
tropium chloride er	NF	
VANRAFIA	4	PA, SP
VELPHORO	4	ST
VESICARE	NF	

Genitourinary Agents - Drugs for Prostate Conditions

alfuzosin hcl er	1	
AVODART	NF	
dutasteride oral	2	
finasteride oral tablet 5 mg	1	
FLOMAX ORAL CAPSULE 0.4 MG	NF	
PROSCAR	NF	
RAPAFLO	NF	
silodosin	3	
tamsulosin hcl	1	
terazosin hcl	1	
UROXATRAL	NF	

Hormonal Agents - Hormone Replacement and Birth Control

abigale	2	
abigale lo	2	
ACTIVELLA	4	
afirmelle	1	H
ALORA	3	QL
altavera	1	H
alyacen 1/35	1	H
alyacen 7/7/7	1	H

See page 6-8 for coverage details.



Drug Name	Drug Tier	Requirements & Limits
amabelz oral tablet 0.5-0.1 mg, 1-0.5 mg	2	
amethia oral tablet 0.15-0.03 & 0.01 mg	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
AYGESTIN ORAL TABLET 5 MG	4	
ayuna	1	H
azurette	1	H
balziva	1	H
BEYAZ	NF	
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	NF	QL
CLIMARA PRO	3	QL
COMBIPATCH	3	QL
COVARYX	2	
COVARYX HS	3	
cryselle-28	1	H
cyred eq	1	H

Drug Name	Drug Tier	Requirements & Limits
dasetta 1/35 (28)	1	H
dasetta 7/7/7	1	H
daysee	1	H
deblitane	1	H
DELESTROGEN	4	
delyla	1	H
DEPO-PROVERA	4	QL
DEPO-SUBQ PROVERA 104	1	QL, H
desogestrel-ethinyl estradiol	1	H
DIVIGEL	3	
dotti	2	QL
drospiren-eth estrad-levomefol oral tablet 3-0.02-0.451 mg	NF	
drospiren-eth estrad-levomefol oral tablet 3-0.03-0.451 mg	1	H
drospirenone-ethinyl estradiol	NF	
DUAVEE	4	QL
EEMT	2	
EEMT HS	3	
ELESTRIN	3	
elinest	1	H
ELLA	1	QL, H
eluryng	1	H
emzahh	1	H
enilloring	1	H
enpresse-28	1	H
enskyce	1	H
errin	1	H
est estrogens-methyltest	1	
est estrogens-methyltest ds	1	
est estrogens-methyltest hs	1	
estarylla	1	H
ESTRACE	NF	
estradiol oral	1	
estradiol patch twice weekly	2	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	3	

See page 6-8 for coverage details.



Drug Name	Drug Tier	Requirements & Limits
estradiol transdermal gel 0.75 mg/1.25 gm (0.06%)	3	QL
estradiol transdermal patch weekly	1	(generic for Climara), QL
estradiol vaginal cream	4	
estradiol vaginal tablet	2	
estradiol valerate intramuscular	1	
estradiol-norethindrone acet	2	
estratest f.s.	1	
ESTRATEST H.S.	3	
ESTRING	2	QL
ESTROGEL	3	QL
ethynodiol diac-eth estradiol	1	H
etonogestrel-ethinyl estradiol	1	H
EVAMIST	2	
falmina	1	H
fayosim oral tablet 42-21-21-7 days	1	H
feirza 1.5/30	1	H
feirza 1/20	1	H
FEMRING	4	QL
finzala	1	H
fyavolv	1	
gallifrey	1	
hailey 1.5/30	1	H
hailey 24 fe	1	H
hailey fe 1.5/30	1	H
hailey fe 1/20	1	H
haloette	1	H
heather	1	H
iclevia	2	H
incassia	1	H
introvale	2	H
isibloom	1	H
jaimiess	1	H
jasmiel	NF	
jencycla	1	H
jinteli	1	

Drug Name	Drug Tier	Requirements & Limits
jolessa	2	H
juleber	1	H
junel 1.5/30	1	H
junel 1/20	1	H
junel fe 1.5/30	1	H
junel fe 1/20	1	H
junel fe 24	1	H
kalliga	1	H
kariva	1	H
kelnor 1/35	1	H
kelnor 1/50	1	H
kurvelo	1	H
larin 1.5/30	1	H
larin 1/20	1	H
larin 24 fe	1	H
larin fe 1.5/30	1	H
larin fe 1/20	1	H
leena	1	H
lessina	1	H
levonest	1	H
levonorgest-eth est & eth est oral tablet 42-21-21-7 days	1	H
levonorgest-eth estrad 91-day oral tablet 0.1-0.02 & 0.01 mg, 0.15-0.03 & 0.01 mg	1	H
levonorgest-eth estrad 91-day oral tablet 0.15-0.03 mg	2	H
levonorgestrel-ethinyl estrad oral tablet 0.1-20 mg-mcg, 0.15-30 mg-mcg	1	H
levonorg-eth estrad triphasic	1	H
levora 0.15/30 (28)	1	H
LO LOESTRIN FE	1	H
LOESTRIN 1.5/30 (21)	NF	
LOESTRIN 1/20 (21)	NF	
LOESTRIN FE 1.5/30	NF	
LOESTRIN FE 1/20	NF	
lojaimiess	1	H
loryna	NF	

See page 6-8 for coverage details.



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

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
norgestimate-eth estradiol oral tablet 0.25-35 mg-mcg	1	H
norgestimate-ethinyl estradiol triphasic oral tablet 0.18/0.215/0.25 mg-25 mcg	2	
norgestimate-ethinyl estradiol triphasic oral tablet 0.18/0.215/0.25 mg-35 mcg	1	H
norlyroc	1	H
nortrel 0.5/35 (28)	1	H
nortrel 1/35 (21)	1	H
nortrel 1/35 (28)	1	H
nortrel 7/7/7	1	H
NUVARING	NF	
nylia 1/35	1	H
nylia 7/7/7	1	H
nymyo oral tablet 0.25-35 mg-mcg	1	H
ocella	NF	
PHEXXI	NF	PA
philith	1	H
pimtrea	1	H
portia-28	1	H
PREMARIN ORAL	4	
PREMARIN VAGINAL	3	
PREMPHASE	3	
PREMPRO	4	
progesterone intramuscular	1	
progesterone oral	2	
PROMETRIUM	NF	

See page 6-8 for coverage details.



Drug Name	Drug Tier	Requirements & Limits
PROVERA	4	
QUARTETTE ORAL TABLET 42-21-21-7 DAYS	NF	
reclipsen	1	H
rivelsa	1	H
rosyrah	1	H
SAFYRAL	NF	
SEASONIQUE ORAL TABLET 0.15-0.03 & 0.01 MG	NF	
setlakin	2	H
sharobel	1	H
simliya	1	H
simpesse	1	H
SLYND	4	PA, ST
sprintec 28	1	H
sronyx	1	H
syeda	NF	
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	2	
tri-lo-marzia	2	
tri-lo-mili	2	
tri-lo-sprintec	2	
tri-mili	1	H
tri-nymyo oral tablet 0.18/0.215/0.25 mg-35 mcg	1	H
tri-sprintec	1	H
trivora (28)	1	H
tri-vylibra	1	H
tri-vylibra lo	2	
turqoz	1	H
TWIRLA	NF	
TYBLUME	1	
tydemy oral tablet 3-0.03-0.451 mg	1	H

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

See page 6-8 for coverage details.



Drug Name	Drug Tier	Requirements & Limits
MEDROL ORAL TABLET THERAPY PACK	4	
methylprednisolone oral	1	
PEDIAPRED	2	
prednisolone oral solution	1	
prednisolone sodium phosphate oral solution 10 mg/5ml, 25 mg/5ml, 5 mg/5ml	NF	
prednisolone sodium phosphate oral solution 15 mg/5ml	1	
prednisolone sodium phosphate oral solution 20 mg/5ml	NF	QL
prednisone oral	1	
TAPERDEX 12-DAY	3	
TAPERDEX 6-DAY	4	
TAPERDEX 7-DAY	3	
Hormonal Agents - Other		
cabergoline	2	
DDAVP ORAL	NF	
desmopressin acetate oral	1	
desmopressin acetate spray	1	
leuprolide acetate injection	1	PA
megestrol acetate oral suspension 40 mg/ml	1	
NGENLA	4	PA, QL, SP
NOCDURNA SUBLINGUAL TABLET SUBLINGUAL 27.7 MCG, 55.3 MCG	3	PA, QL
NORDITROPIN FLEXPRO	3	PA, QL, SP
OMNITROPE	3	PA, QL, SP
ORIAHNN	2	PA, QL
ORILISSA	2	PA, QL
SKYTROFA	4	PA, QL, SP
Hormonal Agents - Testosterone Replacement		
ANDROGEL PUMP	NF	PA, QL
DEPO-TESTOSTERONE INTRAMUSCULAR SOLUTION 100 MG/ML	3	
DEPO-TESTOSTERONE INTRAMUSCULAR SOLUTION 200 MG/ML	4	

Drug Name	Drug Tier	Requirements & Limits
FORTESTA TRANSDERMAL GEL 10 MG/ACT (2%)	NF	PA, QL
JATENZO	NF	QL
KYZATREX	4	PA, QL
NATESTO	NF	PA, QL
TESTIM	2	PA, QL
TESTOSTERONE CYPIONATE INJECTION	NF	
testosterone cypionate intramuscular	1	
testosterone enanthate intramuscular	1	
testosterone gel 10 mg/act (2%) transdermal	NF	PA, QL
testosterone gel 12.5 mg/act (1%) transdermal	NF	PA, QL
testosterone gel 20.25 mg/1.25gm (1.62%) transdermal	NF	PA, QL
testosterone gel 25 mg/2.5gm (1%) transdermal	NF	PA, QL
testosterone gel 40.5 mg/2.5gm (1.62%) transdermal	NF	PA, QL
testosterone gel 50 mg/5gm (1%) transdermal	NF	PA, QL
testosterone transdermal gel 1.62 %	2	PA, QL (generic Androgel Pump)
TLANDO	NF	PA, QL
UNDECATREX	NF	PA, QL
VOGELXO	NF	PA, QL
VOGELXO PUMP	NF	PA, QL
XYOSTED	NF	PA, QL
Hormonal Agents - Thyroid		
ADTHYZA	NF	
ARMOUR THYROID	3	
CYTOMEL	NF	
ERMEZA	3	PA
euthyrox	1	
levo-t	1	

See page 6-8 for coverage details.



Drug Name	Drug Tier	Requirements & Limits
LEVOTHYROXINE SODIUM ORAL CAPSULE	NF	
levothyroxine sodium oral tablet	1	
levoxyl	2	
liothyronine sodium oral	2	
methimazole oral	1	
NIVA THYROID	3	
np thyroid	1	
propylthiouracil oral	1	
RENTHYROID	3	
SYNTHROID	NF	
THYQUIDITY	NF	PA
thyroid oral	1	
TIROSINT	NF	
TIROSINT-SOL	NF	PA
unithroid	1	
Immunological Agents - Drugs for Immune System Stimulation or Suppression		
ACTEMRA ACTPEN	4	PA, ST, QL, SP
ACTEMRA SUBCUTANEOUS	4	PA, ST, QL, SP
ADALIMUMAB-ADAZ	3	PA, QL, SP
ADBRY	3	PA, QL, SP
AMJEVITA	3	PA, QL, SP
ARAVA	NF	
AZASAN	4	
azathioprine oral tablet 100 mg, 75 mg	3	
azathioprine oral tablet 50 mg	1	
BENLYSTA SUBCUTANEOUS SOLUTION AUTO-INJECTOR	3	PA, QL, SP
BIMZELX	4	PA, ST, QL, SP
CELLCEPT ORAL CAPSULE	NF	
CELLCEPT ORAL TABLET	NF	
CIMZIA	3	PA, QL, SP
CINRYZE	NF	PA, QL, SP
COSENTYX	3	PA, QL, SP
cyclosporine modified oral capsule	1	

Drug Name	Drug Tier	Requirements & Limits
EMPAVELI	3	PA, QL, SP
ENBREL	3	PA, QL, SP
ENBREL MINI	3	PA, QL, SP
ENBREL SURECLICK	3	PA, QL, SP
ENTYVIO PEN	3	PA, (SUBCUTANEOUS), QL, SP
ENVARUSUS XR	NF	
everolimus oral tablet 0.25 mg, 0.5 mg, 0.75 mg, 1 mg	NF	
gengraf oral capsule	1	
HAEGARDA	3	PA, QL, SP
HUMIRA	NF	PA, QL, SP
HYFTOR	4	PA, QL
IMURAN	NF	
JYLAMVO	4	PA
KEVZARA	NF	PA, ST, QL, SP
leflunomide oral	1	
LITFULO	4	PA, QL, SP
LUPKYNIS	NF	PA, QL, SP
methotrexate sodium (pf)	1	
methotrexate sodium injection solution	1	
methotrexate sodium oral	1	
mycophenolate mofetil oral capsule	1	
mycophenolate mofetil oral tablet	1	
mycophenolate sodium	3	
mycophenolic acid	3	
MYFORTIC	NF	
MYHIBBIN	1	
NEORAL ORAL CAPSULE	NF	
OLUMIANT	4	PA, ST, QL, SP
OMVOH SUBCUTANEOUS	3	PA, QL, SP
ORENCIA CLICKJECT	4	PA, ST, QL, SP
ORENCIA SUBCUTANEOUS	4	PA, ST, QL, SP
OTEZLA	3	PA, QL, SP

See page 6-8 for coverage details.



Drug Name	Drug Tier	Requirements & Limits
OTREXUP	NF	QL
PROGRAF ORAL CAPSULE	4	
RAPAMUNE ORAL TABLET 0.5 MG, 1 MG, 2 MG	NF	
RASUVO	2	QL
RINVOQ	3	PA, QL, SP
RUCONEST	4	PA, QL, SP
SIMPONI	3	PA, QL, SP
sirolimus oral tablet	1	
SKYRIZI	3	PA, QL, SP
SOTYKTU	3	PA, QL, SP
STELARA SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	NF	PA, QL, SP
STEQEYMA SUBCUTANEOUS	3	PA, QL, SP
tacrolimus oral	1	
TAKHZYRO SUBCUTANEOUS SOLUTION	3	PA, QL, SP
TALTZ SUBCUTANEOUS SOLUTION AUTO-INJECTOR	NF	PA, ST, QL, SP
TREMFYA	3	PA, QL, SP
TREXALL	2	
USTEKINUMAB SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	NF	PA, QL, SP
WEZLANA	3	PA, QL, SP
XELJANZ	3	PA, QL, SP
XELJANZ XR	3	PA, QL, SP
YESINTEK SUBCUTANEOUS	3	PA, QL, SP
ZORTRESS	NF	
Immunological Agents - Drugs for Vaccination		
ABRYSVO	3	H
ADACEL	3	H
AFLURIA PRESERVATIVE FREE	3	H
AREXVY	3	H
BOOSTRIX	2	H
BOOSTRIX INTRAMUSCULAR SUSPENSION 5-2.5-18.5 LF- MCG/0.5	2	H
CAPVAXIVE	3	H
COMIRNATY	3	H

Drug Name	Drug Tier	Requirements & Limits
ENGERIX-B	2	H
FLUAD	3	H
FLUARIX	3	H
FLUCELVAX INTRAMUSCULAR SUSPENSION PREFILLED SYRINGE	3	H
FLULAVAL	3	H
FLUZONE HIGH-DOSE	3	H
FLUZONE INTRAMUSCULAR SUSPENSION PREFILLED SYRINGE	3	H
GARDASIL 9 INTRAMUSCULAR SUSPENSION PREFILLED SYRINGE	3	H
HAVRIX	3	H
HEPLISAV-B	3	H
IPOL	2	H
MENQUADFI	3	H
MENVEO	3	H
M-M-R II	2	H
MODERNA COVID-19 VAC 6M-11Y	3	H
PFIZER COVID-19 VAC-TRIS 5-11Y	3	H
PFIZER COVID-19 VAC-TRIS 6M-4Y	3	H
PREVNAR 20	3	H
PRIORIX	3	H
RECOMBIVAX HB	2	H
SHINGRIX	3	H
SPIKEVAX	3	H
TENIVAC	3	H
TWINRIX	3	H
VAQTA	2	H
VARIVAX	3	H
VIVOTIF	NF	
Infertility Agents		
CETROTIDE	4	PA, ST, QL, SP
CHORIONIC GONADOTROPIN INTRAMUSCULAR	3	SP

See page 6-8 for coverage details.



Drug Name	Drug Tier	Requirements & Limits
CLOMID	2	
clomiphene citrate oral	2	
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
ganirelix acetate solution prefilled syringe 250 mcg/0.5ml subcutaneous	4	QL, SP
GONAL-F	4	ST, SP
GONAL-F RFF	4	ST, SP
GONAL-F RFF REDIJECT	4	ST, SP
MENOPUR	4	QL, SP
NOVAREL	3	SP
OVIDREL	4	SP
PREGNYL	3	SP
Inflammatory Bowel Disease Agents		
ANALPRAM HC	4	
ANALPRAM HC SINGLES EXTERNAL CREAM 2.5-1 %	4	
ANALPRAM-HC EXTERNAL CREAM	4	QL
ANUCORT-HC	2	
ANUSOL-HC EXTERNAL	4	
ANUSOL-HC RECTAL	NF	
APRISO	1	
AZULFIDINE	NF	
AZULFIDINE EN-TABS	NF	
balsalazide disodium	1	
budesonide oral	2	
CANASA	NF	
COLAZAL	NF	
CORTIFOAM	2	
DELZICOL	NF	

Drug Name	Drug Tier	Requirements & Limits
DIPENTUM	NF	
HEMMOREX-HC RECTAL SUPPOSITORY 25 MG	3	
HEMMOREX-HC RECTAL SUPPOSITORY 30 MG	NF	
hydrocortisone (perianal) external cream 1 %	NF	
hydrocortisone (perianal) external cream 2.5 %	1	
hydrocortisone ace-pramoxine external cream 1-1 %	1	
hydrocortisone acetate rectal	2	
hydrocort-pramoxine (perianal)	1	
LIALDA	NF	
mesalamine er oral capsule 0.375 gm	NF	
mesalamine oral capsule delayed release 400 mg	2	
mesalamine oral tablet delayed release 1.2 gm	2	
mesalamine oral tablet delayed release 800 mg	NF	
mesalamine rectal enema	1	
mesalamine rectal suppository	2	QL
PROCORT	NF	
PROCTOCORT	NF	
PROCTOFOAM HC	2	
procto-med hc	1	
PROCTOSOL HC	4	
PROCTOZONE-HC	4	
SFROWASA	NF	
sulfasalazine oral	1	
UCERIS ORAL	NF	
Metabolic Bone Disease Agents - Drugs for Osteoporosis		
ACTONEL	NF	QL
alendronate sodium oral tablet	1	
BONSITY	4	PA, SP
EVISTA	NF	
FORTEO	NF	PA, SP

See page 6-8 for coverage details.



Drug Name	Drug Tier	Requirements & Limits
FOSAMAX	4	
ibandronate sodium oral	2	
raloxifene hcl	2	H-PA
risedronate sodium oral tablet 150 mg, 35 mg	4	QL
risedronate sodium oral tablet 30 mg, 5 mg	4	
teriparatide solution pen-injector 560 mcg/2.24ml subcutaneous	NF	PA, SP
TYMLOS	4	PA, SP
Metabolic Bone Disease Agents - Other		
calcitriol oral capsule	1	
cinacalcet hcl	1	
ROCALTROL ORAL CAPSULE	NF	
SENSIPAR	NF	
YORVIPATH	4	PA, QL, SP
Ophthalmic Agents - Drugs for Eye Allergy, Infection and Inflammation		
ACULAR	4	
ACULAR LS	4	
ACUVAIL	NF	
ALREX	4	QL
AZASITE	3	
azelastine hcl ophthalmic	1	
bacitracin-polymyxin b	1	
BESIVANCE	3	
bromfenac sodium (once-daily)	3	
bromfenac sodium ophthalmic solution 0.07 %	NF	
bromfenac sodium ophthalmic solution 0.075 %	NF	QL
BROMSITE	NF	QL
ciprofloxacin hcl ophthalmic	1	
dexamethasone sodium phosphate ophthalmic	1	
diclofenac sodium ophthalmic	1	
epinastine hcl	4	QL
erythromycin ophthalmic	1	H-PA

Drug Name	Drug Tier	Requirements & Limits
EYSUVIS	4	QL
FLAREX	2	
fluorometholone	1	
FML FORTE	3	
FML LIQUIFILM	4	
gatifloxacin ophthalmic	3	
gentamicin sulfate ophthalmic	1	QL
ILEVRO	NF	
INVELTYS	3	
ketorolac tromethamine ophthalmic	1	
KLARITY-A	NF	
LOTEMAX OPHTHALMIC GEL	NF	
LOTEMAX OPHTHALMIC OINTMENT	3	
LOTEMAX OPHTHALMIC SUSPENSION	NF	QL
LOTEMAX SM	3	QL
loteprednol etabonate ophthalmic gel	NF	
loteprednol etabonate ophthalmic suspension	3	QL
MAXITROL	4	
moxifloxacin hcl (2x day)	3	
moxifloxacin hcl ophthalmic	3	
neomycin-polymyxin-dexameth	1	
NEVANAC	4	
OCUFLOX	4	
ofloxacin ophthalmic	1	
olopatadine hcl ophthalmic solution 0.1 %	3	
olopatadine hcl ophthalmic solution 0.2 %	NF	
POLYCIN	3	
polymyxin b-trimethoprim	1	
PRED FORTE	NF	
PRED MILD	3	
prednisolone acetate ophthalmic	1	

See page 6-8 for coverage details.



Drug Name	Drug Tier	Requirements & Limits
PREDNISOLONE ACETATE P-F	NF	
PROLENSA	NF	
sulfacetamide sodium ophthalmic solution	1	
TOBRADEX OPHTHALMIC OINTMENT	3	
TOBRADEX OPHTHALMIC SUSPENSION 0.3-0.1 %	4	
TOBRADEX ST	NF	
tobramycin ophthalmic	1	QL
tobramycin-dexamethasone	2	
VIGAMOX	NF	
XDEMVIY	4	PA, QL
ZYLET	3	
Ophthalmic Agents - Drugs for Glaucoma		
ALPHAGAN P OPHTHALMIC SOLUTION 0.1 %	2	QL
ALPHAGAN P OPHTHALMIC SOLUTION 0.15 %	4	QL
AZOPT	NF	QL
BETIMOL OPHTHALMIC SOLUTION 0.25 %	2	QL
BETIMOL OPHTHALMIC SOLUTION 0.5 %	4	QL
bimatoprost ophthalmic	2	QL
brimonidine tartrate ophthalmic solution 0.1 %	NF	QL
brimonidine tartrate ophthalmic solution 0.15 %	2	QL
brimonidine tartrate ophthalmic solution 0.2 %	1	
brimonidine tartrate-timolol	NF	QL
brinzolamide	2	QL
COMBIGAN	2	QL
COSOPT	4	
COSOPT PF	NF	QL
DORZOLAMIDE HCL SOLUTION 2 % OPHTHALMIC	4	
dorzolamide hcl solution 2 % ophthalmic	1	
dorzolamide hcl-timolol mal	2	

Drug Name	Drug Tier	Requirements & Limits
dorzolamide hcl-timolol mal pf	NF	QL
ISTALOL	4	
IYUZEH	NF	QL
latanoprost ophthalmic	1	
LUMIGAN	2	
RHOPRESSA	3	QL
ROCKLATAN	3	QL
tafluprost (pf)	3	ST, QL
timolol hemihydrate	2	QL
timolol maleate (once-daily)	3	
timolol maleate ocudose	2	
timolol maleate ophthalmic	1	
timolol maleate pf	2	
TIMOPTIC OCUDOSE	4	
TIMOPTIC OPHTHALMIC SOLUTION 0.25 %, 0.5 %	4	
TIMOPTIC-XE OPHTHALMIC GEL FORMING SOLUTION 0.25 %, 0.5 %	4	
TRAVATAN Z	NF	ST, QL
travoprost (bak free)	3	QL
VYZULTA	NF	ST, QL
XALATAN	NF	
ZIOPTAN	3	ST, QL
Ophthalmic Agents - Drugs for Miscellaneous Eye Conditions		
ATROPINE SULFATE OPHTHALMIC SOLUTION 0.01 %, 0.025 %, 0.05 %	NF	
atropine sulfate ophthalmic solution 1 %	1	
CEQUA	NF	PA, QL
cromolyn sodium ophthalmic	1	
CYCLOGYL	4	
cyclopentolate hcl ophthalmic	1	
cyclosporine ophthalmic emulsion 0.05 %	NF	PA, QL
cyclosporine ophthalmic emulsion 0.05 %	NF	PA, QL
difluprednate	3	
DUREZOL	NF	

See page 6-8 for coverage details.



Drug Name	Drug Tier	Requirements & Limits
ISOPTO ATROPINE OPTHALMIC SOLUTION 1 %	3	
MIEBO	4	PA, QL
RESTASIS	4	PA, QL
RESTASIS MULTIDOSE	NF	PA, QL
TYRVAYA	NF	PA, QL
VERKAZIA	4	PA, QL
VEVYE	NF	PA, QL
XIIDRA	4	PA, QL

Otic Agents - Drugs for Ear Conditions

acetic acid otic	1	
CIPRODEX OTIC SUSPENSION 0.3-0.1 %	NF	
ciprofloxacin-dexamethasone	4	
DERMOTIC	4	
flac otic oil 0.01 %	1	
fluocinolone acetonide otic	1	
hydrocortisone-acetic acid	1	
neomycin-polymyxin-hc otic	1	
ofloxacin otic	2	

Respiratory - Drugs for Anaphylaxis

AUVI-Q	2	QL
EPINEPHRINE INJECTION SOLUTION PREFILLED SYRINGE 0.3 MG/0.3ML	2	
epinephrine solution auto-injector	1	QL
EPIPEN 2-PAK	4	QL
EPIPEN JR 2-PAK	NF	QL
NEFFY	4	QL

Respiratory Tract / Pulmonary Agents - Drugs for Allergies, Cough, Cold

azelastine hcl nasal solution 0.1 %, 137 mcg/spray	2	
azelastine hcl nasal solution 0.15 %	NF	
azelastine-fluticasone	NF	QL
benzonatate oral capsule 100 mg, 200 mg	1	

Drug Name	Drug Tier	Requirements & Limits
benzonatate oral capsule 150 mg	NF	
BROMFED DM ORAL SYRUP 2-30-10 MG/5ML	3	
bromphen-pseudoeph-dm	1	
carbinoxamine maleate oral tablet 4 mg	1	
carbinoxamine maleate oral tablet 6 mg	NF	
cetirizine hcl oral solution	NF	
CLARINEX	NF	
cyproheptadine hcl oral	1	
desloratadine oral tablet	NF	
DYMISTA	NF	QL
flunisolide nasal	3	
fluticasone propionate nasal	2	QL
g tussin ac	1	
guaifenesin ac oral syrup 100-10 mg/5ml	1	
guaifenesin-codeine	1	
HYCODAN ORAL SOLUTION	NF	PA, QL
hydrocod poli-chlorphe poli er	3	PA, QL
hydrocodone bit-homatrop mbr oral solution	1	PA, QL
hydromet	1	PA, QL
HYPERSAL	2	
ipratropium bromide nasal	1	
levocetirizine dihydrochloride oral solution	3	
levocetirizine dihydrochloride oral tablet	1	
maxi-tuss ac	1	
mometasone furoate nasal	3	QL
NEBUSAL INHALATION NEBULIZATION SOLUTION 3 %	3	
NEBUSAL INHALATION NEBULIZATION SOLUTION 6 %	NF	
ODACTRA	4	PA, QL
olopatadine hcl nasal	3	

See page 6-8 for coverage details.



Drug Name	Drug Tier	Requirements & Limits
PATANASE NASAL SOLUTION 0.6 %	NF	
promethazine-codeine	1	PA, QL
promethazine-dm	1	
pseudoephedrine-bromphen-dm	1	
PULMOSAL	2	
RYALTRIS	NF	QL
ryvent	NF	
sodium chloride inhalation	1	
XHANCE	NF	ST, QL
ZETONNA NASAL AEROSOL SOLUTION 37 MCG/ACT	3	QL
Respiratory Tract / Pulmonary Agents - Drugs for Asthma and COPD		
ACCOLATE	4	
ADVAIR DISKUS	NF	QL
ADVAIR HFA	3	QL, RS
AEROCHAMBER HOLDING CHAMBER	3	
AEROCHAMBER PLS FLOVU MTHPIECE	3	
AEROCHAMBER PLUS FLO-VU	3	
AEROCHAMBER PLUS FLO-VU INTERM	3	
AEROCHAMBER PLUS FLO-VU LARGE	3	
AEROCHAMBER PLUS FLO-VU MEDIUM DEVICE	3	
AEROCHAMBER PLUS FLO-VU SMALL	3	
AEROCHAMBER PLUS FLO-VU W/MASK	3	
AEROCHAMBER2GO ANTI-STATIC	3	
AIRDUO RESPICLICK	NF	QL
AIRSUPRA	3	QL
albuterol sulfate hfa aerosol solution 108 (90 base) mcg/act inhalation	2	QL

Drug Name	Drug Tier	Requirements & Limits
albuterol sulfate inhalation nebulization solution (2.5 mg/3ml) 0.083%, 0.63 mg/3ml, 1.25 mg/3ml	1	
ALBUTEROL SULFATE NEBULIZATION SOLUTION (5 MG/ML) 0.5% INHALATION	3	
albuterol sulfate oral syrup 2 mg/5ml	1	
ANORO ELLIPTA	3	QL
ARNUITY ELLIPTA	2	QL
ASMANEX HFA	NF	QL
ATROVENT HFA	3	QL
BEVESPI AEROSPHERE	2	QL
BREATHE COMFORT CHAMBER/ ADULT	3	
BREATHE COMFORT CHAMBER/ CHILD	3	
BREO ELLIPTA	3	QL, RS
breyna	NF	QL, RS
BREZTRI AEROSPHERE	3	QL, RS
budesonide inhalation	2	QL
budesonide-formoterol fumarate	NF	QL, RS
COMBIVENT RESPIMAT	4	QL
DALIRESP	NF	QL
DULERA	NF	ST, QL
EASIVENT	3	
EASIVENT MASK LARGE	3	
EASIVENT MASK MEDIUM	3	
EASIVENT MASK SMALL	3	
FASENRA PEN	4	PA, QL, SP
FLEXICHAMBER	3	
FLOVENT HFA INHALATION AEROSOL 110 MCG/ACT, 220 MCG/ACT, 44 MCG/ACT	NF	QL
FLUTICASONE FUROATE-VILANTEROL	NF	QL, RS
FLUTICASONE PROPIONATE HFA	NF	QL

See page 6-8 for coverage details.



Drug Name	Drug Tier	Requirements & Limits
FLUTICASONE-SALMETEROL INHALATION AEROSOL	NF	QL, RS
fluticasone-salmeterol inhalation aerosol powder breath activated 100-50 mcg/act, 250-50 mcg/act, 500-50 mcg/act	3	QL, RS
FLUTICASONE-SALMETEROL INHALATION AEROSOL POWDER BREATH ACTIVATED 113-14 MCG/ACT, 232-14 MCG/ACT, 55-14 MCG/ACT	3	QL
INSPIREASE	3	
ipratropium bromide inhalation	1	
ipratropium-albuterol	2	
levalbuterol hcl inhalation	3	QL
LEVALBUTEROL HFA INHALATION AEROSOL 45 MCG/ACT	3	QL
MICROCHAMBER	3	
montelukast sodium oral packet	2	
montelukast sodium oral tablet	1	
montelukast sodium oral tablet chewable	1	
NUCALA	4	PA, QL, SP
PERFOROMIST	NF	QL
PROCHAMBER VHC	3	
PROVENTIL HFA INHALATION AEROSOL SOLUTION 108 (90 BASE) MCG/ACT	NF	QL
PULMICORT SUSPENSION	NF	QL
QVAR REDIHALER	2	QL
roflumilast	2	QL
SEREVENT DISKUS	2	QL
SINGULAIR ORAL PACKET	3	
SINGULAIR ORAL TABLET	NF	
SINGULAIR ORAL TABLET CHEWABLE	NF	
SPIRIVA HANDIHALER	2	QL
SPIRIVA RESPIMAT	2	QL
STIOLTO RESPIMAT	2	QL

Drug Name	Drug Tier	Requirements & Limits
STRIVERDI RESPIMAT	2	QL
SYMBICORT	3	QL, RS
TEZSPIRE SUBCUTANEOUS SOLUTION AUTO-INJECTOR	4	PA, QL, SP
tiotropium bromide monohydrate	NF	QL
TRELEGY ELLIPTA	3	QL, RS
UMECLIDINIUM-VILANTEROL	NF	QL
VENTOLIN HFA	NF	QL
VORTEX HOLD CHMBR/MASK/CHILD DEVICE	2	
VORTEX HOLD CHMBR/MASK/TODDLER DEVICE	2	
VORTEX VALVE CHAMBER-PEDI MASK	3	
VORTEX VALVED HOLDING CHAMBER DEVICE	3	
VORTEX VALVED HOLDING CHAMBER DEVICE	2	
wixela inhub	3	QL, RS
XOLAIR	3	PA, QL, SP
XOPENEX HFA	3	QL
YUPELRI	4	PA, QL
zafirlukast	1	
Respiratory Tract / Pulmonary Agents - Drugs for Cystic Fibrosis		
BRONCHITOL	NF	PA, ST, QL, SP
PULMOZYME	3	PA, QL, SP
TOBI PODHALER	NF	PA, QL, SP
TRIKAFTA ORAL TABLET THERAPY PACK	3	PA, QL, SP
Respiratory Tract / Pulmonary Agents - Drugs for Pulmonary Fibrosis		
OFEV	NF	PA, QL, SP
pirfenidone	3	PA, QL, SP
Respiratory Tract / Pulmonary Agents - Drugs for Pulmonary Hypertension		
ADCIRCA	NF	PA, QL, SP
ADEMPAS	3	PA, QL, SP
alyq	NF	PA, QL, SP

See page 6-8 for coverage details.



Drug Name	Drug Tier	Requirements & Limits
OPSUMIT	3	PA, QL, SP
REVATIO ORAL	NF	QL, SP
sildenafil citrate oral tablet 20 mg	1	QL
tadalafil (pah)	1	PA, QL, SP
TADLIQ	4	PA, QL, SP
TRACLEER	3	PA, QL, SP
TYVASO	3	PA, SP
TYVASO DPI	3	PA, QL, SP
Skeletal Muscle Relaxants - Drugs for Muscle Pain and Spasm		
baclofen oral tablet 10 mg, 20 mg, 5 mg	1	
baclofen oral tablet 15 mg	NF	
carisoprodol oral tablet 250 mg	NF	
carisoprodol oral tablet 350 mg	1	
chlorzoxazone oral tablet 250 mg, 375 mg, 750 mg	NF	
chlorzoxazone oral tablet 500 mg	1	
cyclobenzaprine hcl oral tablet 10 mg, 5 mg	1	
cyclobenzaprine hcl oral tablet 7.5 mg	NF	
FEXMID	NF	
metaxalone oral tablet 400 mg, 800 mg	3	
metaxalone oral tablet 640 mg	NF	
methocarbamol oral tablet 1000 mg	NF	
methocarbamol oral tablet 500 mg, 750 mg	1	
orphenadrine citrate er	2	
SOMA	NF	
TANLOR	3	
tizanidine hcl oral capsule	3	
tizanidine hcl oral tablet	1	
VANADOM ORAL TABLET 350 MG	NF	

Drug Name	Drug Tier	Requirements & Limits
ZANAFLEX	4	
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Sleep Disorder Agents		
AMBIEN	NF	
AMBIEN CR	NF	
armodafinil	2	QL
BELSOMRA	4	QL
DAYVIGO	NF	QL
doxepin hcl oral tablet	NF	QL
eszopiclone	2	
LUMRYZ	4	PA, QL, SP
LUNESTA	NF	
modafinil oral	2	QL
NUVIGIL	NF	QL
PROVIGIL	NF	QL
QUVIVIQ	NF	QL
ramelteon	4	QL
RESTORIL	4	
ROZEREM	NF	QL
SILENOR	NF	QL
SODIUM OXYBATE	4	PA, QL, SP (Manufactured by Hikma)
SUNOSI	2	PA, QL
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WAKIX	4	PA, QL, SP
XYWAV	4	PA, QL, SP
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finasteride oral tablet 5 mg	38	fluocinonide external cream 0.05 %	28	FOCALIN XR	25
fingolimod hcl	25	fluocinonide external cream 0.1 %	28	FOCALIN XR	25
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		fluoxetine hcl oral tablet 20 mg, 60 mg	15		
		FLUTICASONE FUROATE-VILANTEROL	50		



hailey 24 fe	40	HUMALOG TEMPO PEN	32	hydrocortisone external cream 2.5 %	28
hailey fe 1/20	40	HUMALOG U-100 JUNIOR KWIKPEN	32	hydrocortisone external lotion 2 %	28
hailey fe 1.5/30	40	HUMALOG VIAL	32	hydrocortisone external lotion 2.5 %	28
HALCION	20	HUMATE-P	34	hydrocortisone external ointment 1 %, 2.5 %	28
halobetasol propionate external cream	28	HUMIRA	44	hydrocortisone oral	42
halobetasol propionate external ointment	28	HUMULIN 70/30 KWIKPEN	32	hydrocortisone valerate external cream	28
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HEPLISAV-B	45	hydrocodone-acetaminophen oral solution 10-325 mg/15ml, 7.5-325 mg/15ml	9	hyoscyamine sulfate oral tablet dispersible	37
HIDEX 6-DAY	42	hydrocodone-acetaminophen oral tablet 10-300 mg, 5-300 mg, 7.5-300 mg	9	hyoscyamine sulfate sublingual ...	37
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hm nicotine polacrilex mouth/ throat lozenge 2 mg	11	hydrocortisone (perianal) external cream 1 %	46		
hm nicotine transdermal patch 24 hour 21 mg/24hr, 7 mg/24hr ...	11	hydrocortisone (perianal) external cream 2.5 %	46		
HUMALOG CARTRIDGE	32	hydrocortisone ace-pramoxine external cream 1-1 %	46		
HUMALOG KWIKPEN	32	hydrocortisone acetate rectal ...	46		
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ibuprofen oral tablet 400 mg, 600 mg, 800 mg	10
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imiquimod external cream 5 %	28	INVEGA	19	jasmiel	40
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indomethacin er	10	isoniazid oral tablet	17	junel fe 1/20	40
indomethacin oral capsule	10	ISOPTO ATROPINE OPHTHALMIC SOLUTION 1 %	49	junel fe 1.5/30	40
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INGREZZA SPRINKLE	26	isosorbide dinitrate oral tablet 10 mg, 20 mg, 30 mg, 5 mg	22	JUST RIGHT 5000 DENTAL GEL 1.1 %	26
INPEN	31	isosorbide dinitrate oral tablet 40 mg	22	JUST RIGHT 5000 DENTAL PASTE	26
INSPIREASE	51	isosorbide mononitrate er	22	JYLAMVO	44
INSPIRA	22	isotretinoin oral capsule 10 mg, 20 mg, 30 mg, 40 mg	28	JYNARQUE ORAL TABLET THERAPY PACK	38
INSULIN ASPART	32	isotretinoin oral capsule 25 mg, 35 mg	28	K	
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INSULIN DEGLUDEC FLEXTOUCH	32	itraconazole oral capsule	16	K-TAB ORAL TABLET EXTENDED RELEASE 10 MEQ, 20 MEQ	35
INSULIN GLARGINE	32	ivabradine hcl	22	kalliga	40
INSULIN GLARGINE MAX SOLOSTAR	32	ivermectin external cream	29	KAPSPARGO SPRINKLE	22
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KLARITY-A.....	47	lamotrigine oral tablet dispersible.....	14	levocetirizine dihydrochloride oral tablet.....	49	
KLARON.....	29	LANOXIN ORAL TABLET 125 MCG, 250 MCG.....	22	levofloxacin oral tablet.....	12	
klayesta.....	16	LANOXIN ORAL TABLET 62.5 MCG.....	22	levonest.....	40	
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KLONOPIN.....	20	lansoprazole oral tablet delayed release dispersible.....	36	levonorgest-eth est & eth est oral tablet 42-21-21-7 days.....	40	
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norethin ace-eth estrad-fe oral tablet chewable	41	NOVOLIN N VIAL	32	ODEFSEY	20
norethindron-ethinyl estrad-fe oral tablet 1-20/1-30/1-35 mg-mcg	41	NOVOLIN R FLEXPEN	32	ODOMZO	18
norethindrone acet-ethinyl est ...	41	NOVOLIN R FLEXPEN RELION ...	32	OFEV	51
norethindrone acetate oral	41	NOVOLIN R RELION	32	ofloxacin ophthalmic	47
norethindrone oral	41	NOVOLIN R VIAL	32	ofloxacin otic	49
norethindrone-eth estradiol	41	NOVOLOG FLEXPEN	32	olanzapine oral tablet	19
norgestimate-eth estradiol oral tablet 0.25-35 mg-mcg	41	NOVOLOG FLEXPEN RELION	32	olanzapine oral tablet dispersible.	19
norgestimate-ethinyl estradiol triphasic oral tablet 0.18/0.215/0.25 mg-25 mcg	41	NOVOLOG RELION	32	olmesartan medoxomil oral	23
norgestimate-ethinyl estradiol triphasic oral tablet 0.18/0.215/0.25 mg-35 mcg	41	NOVOLOG U-100 VIAL	32	olmesartan medoxomil-hctz	23
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NORLIQVA	23	NOXAFIL ORAL TABLET DELAYED RELEASE	16	olopatadine hcl nasal	49
norlyroc	41	np thyroid	44	olopatadine hcl ophthalmic solution 0.1 %	47
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nortrel 0.5/35 (28)	41	NUCALA	51	OLUMIANT	44
nortrel 1/35 (21)	41	NUCYNTA	9	OMECLAMOX-PAK	36
nortrel 1/35 (28)	41	NUCYNTA ER	9	omega-3-acid ethyl esters	23
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		nylia 1/35	41	ondansetron hcl oral	16
		nylia 7/7/7	41	ondansetron odt oral tablet dispersible 16 mg	16
		nymyo oral tablet 0.25-35 mg-mcg	41	ondansetron odt oral tablet dispersible 4 mg, 8 mg	16
		nystatin external	16		
		nystatin mouth/throat	16		
		nystatin oral	16		
		nystatin-triamcinolone	16		



ONE VITE WOMENS	35	oxaprozin oral tablet.....	10	PATANASE NASAL SOLUTION	
ONE VITE WOMENS PLUS.....	35	oxcarbazepine	14	0.6 %.....	50
ONETOUCH ULTRA 2 KIT W/ DEVICE.....	31	oxcarbazepine er	14	PAXIL.....	15
ONETOUCH ULTRA BLUE TEST ...	31	oxybutynin chloride er	38	PAXIL CR.....	15
ONETOUCH ULTRA TEST STRIPS .	31	oxybutynin chloride oral solution .	38	PAXLOVID.....	20
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ONETOUCH VERIO REFLECT KIT W/DEVICE	31	oxycodone hcl oral capsule	9	peg-3350/electrolytes/ascorbat .	37
ONETOUCH VERIO TEST STRIPS .	31	oxycodone hcl oral solution.....	9	peg-kcl-nacl-nasulf-na asc-c	37
ONEXTON.....	29	oxycodone hcl oral tablet 10 mg, 15 mg, 20 mg, 30 mg	9	penicillin v potassium	12
ONFI	14	oxycodone hcl oral tablet 5 mg.....	9	pentoxifylline er	23
ONGLYZA	33	OXYCODONE-ACETAMINOPHEN ORAL TABLET 10-300 MG, 5-300 MG, 7.5-300 MG.....	9	PEPCID.....	36
ONYDA XR.....	25	oxycodone-acetaminophen oral tablet 10-325 mg, 2.5-325 mg, 5-325 mg, 7.5-325 mg	10	perampanel.....	14
OPSUMIT.....	52	OXYCODONE-ACETAMINOPHEN ORAL TABLET 2.5-300 MG	10	PERCOCET.....	10
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ORALONE.....	26			PERTZYE	38
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ORIAHNN	43			phenobarbital oral tablet.....	14
ORILISSA	43			phenytek oral capsule 200 mg....	14
orphenadrine citrate er.....	52			phenytek oral capsule 300 mg....	14
OSCIMIN	37			phenytoin sodium extended	14
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				pioglitazone hcl.....	33

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paroxetine hcl oral tablet.....	15



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PIQRAY.....	18	prednisolone sodium phosphate oral solution 10 mg/5ml, 25 mg/5ml, 5 mg/5ml	43	primidone oral tablet 125 mg	14
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pitavastatin calcium.....	23	prednisone oral.....	43	PRISTIQ.....	15
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PLAVIX.....	19	PREGNYL.....	46	PROCARDIA XL	23
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PLENVU	37	PREMARIN VAGINAL	41	prochlorperazine maleate oral....	16
PLEXION CLEANSER	29	premium lidocaine.....	10	PROCORT	46
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POLYCIN	47	prenatal plus.....	35	PROCTOZONE-HC.....	46
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prazosin hcl oral	23	PREVIDENT 5000 SENSITIVE	36	propafenone hcl er	23
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QUILLICHEW ER.....	25	REMERON SOLTAB ORAL TABLET DISPERSIBLE 15 MG, 30 MG	15	roflumilast	51
QUILLIVANT XR	25	RENTHYROID	44	ropinirole hcl.....	19
QULIPTA	17	REVELA ORAL TABLET	38	rosuvastatin calcium oral	23
QUVIVIQ.....	52	repaglinide.....	33	rosyrah	42
QVAR REDIHALER	51	REPATHA.....	23	roweepra	14
R					
ra mini nicotine	11	REPATHA PUSHTRONEX SYSTEM .	23	ROXICODONE	10
ra nicotine mouth/throat gum 4 mg.....	11	REPATHA SURECLICK	23	ROZEREM	52
ra nicotine polacrilex	11	RESTASIS.....	49	ROZLYTREK ORAL CAPSULE.....	18
ra nicotine transdermal patch 24 hour 21 mg/24hr.....	11	RESTASIS MULTIDOSE	49	ROZLYTREK ORAL PACKET.....	18
rabeprazole sodium oral tablet delayed release	36	RESTORIL.....	52	RUCONEST.....	45
RADICAVA ORS	26	RETACRIT	34	RUKOBIA.....	20
		RETEVMO	18	RYALTRIS.....	50
		RETIN-A.....	29	RYBELSUS.....	33
		REVATIO ORAL	52	RYDAPT	18
		REVLIMID.....	18	RYTARY.....	19
		REXTOVY.....	11	RYTHMOL SR ORAL CAPSULE EXTENDED RELEASE 12 HOUR 225 MG, 325 MG, 425 MG.....	23
		REXULTI.....	19		
		REYVOW	17		



ryvent	50	simpesse	42	SOVUNA.....	18
S					
sacubitril-valsartan	23	SIMPONI.....	45	SPIKEVAX.....	45
SAFYRAL.....	42	simvastatin oral tablet 10 mg, 20 mg, 40 mg, 5 mg.....	23	SPIRIVA HANDIHALER	51
SALAGEN	26	simvastatin oral tablet 80 mg.....	23	SPIRIVA RESPIMAT	51
SANTYL	29	SINEMET.....	19	spironolactone oral tablet.....	23
SAPHRIS	19	SINGULAIR ORAL PACKET.....	51	spironolactone-hctz.....	23
SAVELLA	26	SINGULAIR ORAL TABLET	51	SPORANOX	16
saxagliptin hcl	33	SINGULAIR ORAL TABLET CHEWABLE.....	51	SPRAVATO.....	15
saxagliptin-metformin er	33	sirolimus oral tablet	45	sprintec 28	42
SCSEMBLIX	18	SITAVIG	20	SPRYCEL	18
scopolamine	16	SKYRIZI	45	sronyx	42
SEASONIQUE ORAL TABLET 0.15-0.03 & 0.01 MG.....	42	SKYTROFA	43	ssd.....	13
selenium sulfide external lotion ..	29	SLYND.....	42	STELARA SUBCUTANEOUS SOLUTION PREFILLED SYRINGE.....	45
SENSIPAR	47	sm nicotine.....	11	STENDRA.....	34
SEREVENT DISKUS	51	sm nicotine polacrilex.....	11	STEQEYMA SUBCUTANEOUS	45
SEROQUEL.....	19	sm nicotine transdermal patch 24 hour 14 mg/24hr, 21 mg/24hr, 7 mg/24hr.....	11	STIOLTO RESPIMAT	51
SEROQUEL XR	19	SOAAZ.....	23	STIVARGA.....	18
SERTRALINE HCL ORAL CAPSULE.....	15	sod citrate-citric acid oral solution 500-334 mg/5ml.....	36	STRATTERA ORAL CAPSULE 10 MG, 100 MG, 18 MG, 25 MG, 40 MG, 60 MG, 80 MG	25
sertraline hcl oral concentrate....	15	sod fluoride-potassium nitrate ...	36	STRENSIQ.....	38
sertraline hcl oral tablet.....	15	sodium chloride inhalation.....	50	STRIVERDI RESPIMAT.....	51
setlakin.....	42	sodium fluoride 5000 enamel	36	STROMECTOL	18
sevelamer carbonate oral tablet..	38	sodium fluoride 5000 plus.....	26	SUBOXONE	11
SEYSARA	12	sodium fluoride 5000 ppm	26	subvenite.....	14
sf 5000 plus.....	26	sodium fluoride 5000 sensitive...	36	SUCRAID.....	38
sf gel 1.1%	26	sodium fluoride dental	26	sucalfate oral suspension	36
SFROWASA.....	46	sodium fluoride oral solution	36	sucalfate oral tablet	36
sharobel.....	42	sodium fluoride oral tablet chewable.....	36	SUFLAVE	37
SHINGRIX.....	45	SODIUM OXYBATE.....	52	sulfacetamide sod-sulfur wash external liquid 9-4 %.....	29
sildenafil citrate oral tablet 100 mg, 25 mg, 50 mg.....	34	sodium sulfacetamide wash	29	sulfacetamide sod-sulfur wash external liquid 9-4.5 %.....	29
sildenafil citrate oral tablet 20 mg	52	SOFOSBUVIR-VELPATASVIR.....	20	sulfacetamide sodium (acne).....	29
SILENOR	52	solifenacin succinate	38	sulfacetamide sodium external...	29
silodosin.....	38	SOLQUA.....	33	sulfacetamide sodium ophthalmic solution	48
SILVADENE.....	12	SOMA.....	52	sulfacetamide sodium-sulfur external liquid 10-2 %, 9-4.5 %, 9.8-4.8 %	29
silver sulfadiazine external	13	SOOLANTRA.....	29		
simliya.....	42	sotalol hcl oral	23		
		SOTYKTU.....	45		



sulfacetamide sodium-sulfur external liquid 10-5 %, 9-4 %	29	tadalafil oral	34	TEKTURNA HCT ORAL TABLET 300-12.5 MG, 300-25 MG	24
sulfamethoxazole-trimethoprim oral suspension 200-40 mg/5ml	13	TADLIQ	52	telmisartan	24
sulfamethoxazole-trimethoprim oral tablet	13	tafluprost (pf)	48	telmisartan-hctz	24
sulfasalazine oral	46	TAGRISSO	18	temazepam	52
sulfatrim pediatric	13	TAKHZYRO SUBCUTANEOUS SOLUTION	45	temozolomide	18
sulindac oral	10	TALTZ SUBCUTANEOUS SOLUTION AUTO-INJECTOR	45	TEMPO REFILL	31
SUMADAN WASH	29	TAMIFLU	20	TEMPO WELCOME	31
sumatriptan nasal	17	tamoxifen citrate oral tablet 10 mg	18	TENCON	10
sumatriptan succinate oral	17	tamoxifen citrate oral tablet 20 mg	18	TENIVAC	45
sumatriptan succinate subcutaneous solution auto- injector	17	tamsulosin hcl	38	tenofovir disoproxil fumarate	20
SUNOSI	52	TANLOR	52	TENORETIC 100	24
SUPREP BOWEL PREP KIT	37	TAPERDEX 12-DAY	43	TENORETIC 50	24
SUTAB	37	TAPERDEX 6-DAY	43	TENORMIN	24
syeda	42	TAPERDEX 7-DAY	43	terazosin hcl	38
SYMBICORT	51	TARGADOX	13	terbinafine hcl oral	16
SYMFI	20	tarina 24 fe	42	terconazole	16
SYMFI LO ORAL TABLET 400-300-300 MG	20	tarina fe 1/20 eq	42	teriflunomide	25
SYMLINPEN 120	33	TASIGNA	18	teriparatide solution pen- injector 560 mcg/2.24ml subcutaneous	47
SYMLINPEN 60	33	TAVALISSE	34	TESTIM	43
SYMPAZAN	14	tazarotene external cream	29	TESTOSTERONE CYPIONATE INJECTION	43
SYMPROIC	37	TAZORAC EXTERNAL CREAM	29	testosterone cypionate intramuscular	43
SYNALAR	29	taztia xt oral capsule extended release 24 hour 120 mg, 180 mg, 240 mg, 300 mg, 360 mg	23	testosterone enanthate intramuscular	43
SYNALAR EXTERNAL SOLUTION 0.01 %	29	TECFIDERA ORAL CAPSULE DELAYED RELEASE	25	testosterone gel 10 mg/act (2%) transdermal	43
SYNJARDY	33	TECHLITE INSULIN SYRINGES (Arkray)	31	testosterone gel 12.5 mg/act (1%) transdermal	43
SYNJARDY XR	33	TECHLITE PEN NEEDLES (Arkray)	31	testosterone gel 20.25 mg/1.25gm (1.62%) transdermal	43
SYNTHROID	44	TECHLITE PLUS PEN NEEDLES (Arkray)	31	testosterone gel 25 mg/2.5gm (1%) transdermal	43
T		TEGLUTIK	26	testosterone gel 40.5 mg/2.5gm (1.62%) transdermal	43
TABRECTA	18	TEGRETOL ORAL TABLET	14	testosterone gel 50 mg/5gm (1%) transdermal	43
TACLONEX	29	TEGRETOL-XR	14	testosterone transdermal gel 1.62 %	43
TACLONEX EXTERNAL OINTMENT 0.005-0.064 %	29	TEGSEDI SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 284 MG/1.5ML	38	tetracycline hcl oral capsule	13
tacrolimus external	29	TEKTURNA	23, 24		
tacrolimus oral	45				
tadalafil (pah)	52				



TEZSPIRE SUBCUTANEOUS SOLUTION AUTO-INJECTOR	51	tolterodine tartrate	38	tretinoin external gel 0.05 %	29
THALITONE	24	tolterodine tartrate er	38	TREXALL	45
THRIVE	11	tolvaptan oral tablet therapy pack	38	TREZIX	10
THYQUIDITY	44	TOPAMAX	14	tri-estarylla	42
thyroid oral	44	TOPAMAX SPRINKLE	14	tri-legest fe	42
tiadylt er	24	TOPICORT	29	tri-linyah	42
TIAZAC	24	TOPICORT EXTERNAL CREAM 0.05 %, 0.25 %	29	tri-lo-estarylla	42
ticagrelor	19	topiramate er oral capsule extended release 24 hour	14	tri-lo-marzia	42
TIGLUTIK	26	topiramate oral capsule sprinkle	14	tri-lo-mili	42
TIKOSYN	24	topiramate oral tablet	14	tri-lo-sprintec	42
tilia fe	42	TOPROL XL	24	tri-mili	42
timolol hemihydrate	48	torpenz	18	tri-nymyo oral tablet 0.18/0.215/0.25 mg-35 mcg	42
timolol maleate (once-daily)	48	torsemide	24	tri-sprintec	42
timolol maleate ocudose	48	TOSYMRA	17	tri-vite/fluoride	36
timolol maleate ophthalmic	48	TOUJEO MAX SOLOSTAR	32	tri-vylibra	42
timolol maleate pf	48	TOUJEO SOLOSTAR	32	tri-vylibra lo	42
TIMOPTIC OCUDOSE	48	TRACLEER	52	triamcinolone acetonide external cream 0.025 %, 0.1 %	29
TIMOPTIC OPHTHALMIC SOLUTION 0.25 %, 0.5 %	48	TRADJENTA	33	triamcinolone acetonide external cream 0.5 %	29
TIMOPTIC-XE OPHTHALMIC GEL FORMING SOLUTION 0.25 %, 0.5 %	48	tramadol hcl (er biphasic) oral tablet extended release 24 hour	10	triamcinolone acetonide external lotion	29
tinidazole oral	13	tramadol hcl er	10	triamcinolone acetonide external ointment 0.025 %, 0.1 %, 0.5 %	29
tiotropium bromide monohydrate	51	tramadol hcl oral tablet 100 mg, 25 mg, 75 mg	10	triamcinolone acetonide external ointment 0.05 %	29
TIROSINT	44	tramadol hcl oral tablet 50 mg	10	triamcinolone acetonide mouth/throat	26
TIROSINT-SOL	44	tramadol-acetaminophen	10	triamcinolone in absorbase	29
TIVICAY	20	trandolapril	24	triamterene-hctz	24
tizanidine hcl oral capsule	52	tranexamic acid oral	34	TRIANEX EXTERNAL OINTMENT 0.05 %	29
tizanidine hcl oral tablet	52	TRANSDERM-SCOP TRANSDERMAL PATCH 72 HOUR 1 MG/3DAYS	16	triazolam	20
TLANDO	43	TRAVATAN Z	48	TRIBENZOR	24
TOBI PODHALER	51	travoprost (bak free)	48	TRICARE ORAL TABLET	36
TOBRADEX OPHTHALMIC OINTMENT	48	trazodone hcl oral	15	TRICOR	24
TOBRADEX OPHTHALMIC SUSPENSION 0.3-0.1 %	48	TRELEGY ELLIPTA	51	triderm	29
TOBRADEX ST	48	TREMFYA	45	TRIDESILON EXTERNAL CREAM 0.05 %	29
tobramycin ophthalmic	48	TRESIBA FLEXTOUCH	32	trihexyphenidyl hcl oral tablet	19
tobramycin-dexamethasone	48	tretinoin external cream	29	TRIJARDY XR	33
TOLAK	29	tretinoin external gel 0.01 %, 0.025 %	29		
TOLSURA	16				



TRIKAFTA ORAL TABLET THERAPY PACK	51	tydemy oral tablet 3-0.03-0.451 mg	42	VALCYTE ORAL TABLET.....	20
TRILEPTAL	14	TYMLOS.....	47	valganciclovir hcl oral tablet	20
TRILIPIX ORAL CAPSULE DELAYED RELEASE 135 MG, 45 MG	24	TYRVAYA	49	VALIUM	20
trimethoprim oral	13	TYVASO	52	valproic acid oral capsule	14
TRINATAL RX 1	36	TYVASO DPI	52	valproic acid oral solution 250 mg/5ml.....	14
TRINATE.....	36	U		VALSARTAN ORAL SOLUTION....	24
TRINTELLIX.....	15	UBRELVY.....	17	valsartan oral tablet	24
tritocin external ointment 0.05 %	30	UCERIS ORAL.....	46	valsartan-hydrochlorothiazide....	24
TRIUMEQ.....	20	UDENYCA SUBCUTANEOUS SOLUTION AUTO-INJECTOR	34	VALTOCO	14
trivora (28).....	42	ULORIC	16	VALTRESX	20
TROKENDI XR.....	14	UMECLIDINIUM-VILANTEROL ...	51	valtya 1/50	42
tropium chloride.....	38	UNDECATREX.....	43	VANADOM ORAL TABLET 350 MG.....	52
tropium chloride er.....	38	unithroid	44	VANOCOCIN.....	13
TRUE FOCUS BLOOD GLUCOSE STRIP.....	31	urea external cream 20 %, 40 %, 45 %	30	vancomycin hcl oral capsule	13
TRUE METRIX AIR GLUCOSE METER KIT	31	urea external cream 39 %	30	VANDAZOLE	13
TRUE METRIX BLOOD GLUCOSE TEST.....	31	UREA EXTERNAL CREAM 39.5 %..	30	VANOS	30
TRUE METRIX GO GLUCOSE METER.....	31	urea external cream 41 %, 47 %....	30	VANRAFIA.....	38
TRUE METRIX METER	31	uredeb	30	VAQTA	45
TRUE METRIX PRO BLOOD GLUCOSE	31	UREMEZ-40	30	vardenafil hcl oral tablet	34
TRULANCE.....	37	URESOL	30	varenicline	11
TRULICITY	33	UROCIT-K 10.....	36	VARIVAX	45
TRUQAP ORAL TABLET.....	18	UROCIT-K 15.....	36	VASCEPA	24
TRUVADA ORAL TABLET 100-150 MG, 133-200 MG, 167-250 MG	20	UROCIT-K 5 ORAL TABLET EXTENDED RELEASE 5 MEQ (540 MG).....	36	VASERETIC.....	24
TRUVADA ORAL TABLET 200-300 MG	20	UROXATRAL	38	VASOTEC.....	24
turqoz	42	URSO 250 ORAL TABLET 250 MG.	37	velivet	42
TWIIST REFILL KIT.....	32	URSO FORTE.....	37	VELPHORO.....	38
TWIIST REFILL KIT/INFUSION SET	32	URSODIOL ORAL CAPSULE 200 MG, 400 MG.....	37	VELTASSA	36
TWIIST STARTER KIT	32	ursodiol oral capsule 300 mg	37	VEMLIDY	20
TWINRIX	45	ursodiol oral tablet	37	VENCLEXTA.....	18
TWIRLA	42	USTEKINUMAB SUBCUTANEOUS SOLUTION PREFILLED SYRINGE .	45	venlafaxine hcl.....	15
TYBLUME	42	V		venlafaxine hcl er oral capsule extended release 24 hour	15
		VAGIFEM.....	42	venlafaxine hcl er oral tablet extended release 24 hour	15
		valacyclovir hcl oral.....	20	VENTOLIN HFA	51
				VEOZAH	26
				verapamil hcl er oral capsule extended release 24 hour 100 mg, 200 mg, 300 mg.....	24

verapamil hcl er oral capsule extended release 24 hour 120 mg, 180 mg, 240 mg, 360 mg.	24	VITRAKVI	18	wes-phos 250 neutral.....	36
verapamil hcl er oral tablet extended release	24	VIVELLE-DOT.....	42	WESTAB PLUS.....	36
verapamil hcl oral.....	24	VIVJOA.....	16	WEZLANA.....	45
VERELAN.....	24	VIVOTIF.....	45	WILATE.....	34
VERELAN PM ORAL CAPSULE EXTENDED RELEASE 24 HOUR 100 MG, 200 MG, 300 MG.....	24	VOGELXO.....	43	WINLEVI.....	30
VERKAZIA.....	49	VOGELXO PUMP.....	43	wixela inhub.....	51
VERQUVO.....	24	volnea.....	42		
VERZENIO.....	18	VOQUEZNA.....	36	X	
VESICARE.....	38	VOQUEZNA DUAL PAK.....	36	XACIATO.....	13
vestura.....	42	VOQUEZNA TRIPLE PAK.....	36	XALATAN.....	48
VEVYE.....	49	voriconazole oral tablet.....	16	XANAX.....	20
VFEND ORAL TABLET 200 MG.....	16	VORTEX HOLD CHMBR/MASK/ CHILD DEVICE.....	51	XANAX XR.....	20
VFEND ORAL TABLET 50 MG.....	16	VORTEX HOLD CHMBR/MASK/ TODDLER DEVICE.....	51	xarah fe.....	42
VIAGRA.....	34	VORTEX VALVE CHAMBER-PEDI MASK.....	51	XARELTO.....	13
VIBERZI.....	37	VORTEX VALVED HOLDING CHAMBER DEVICE.....	51	XCOPRI ORAL TABLET 100 MG, 150 MG, 200 MG, 25 MG, 50 MG ..	14
VIBRAMYCIN ORAL CAPSULE 100 MG.....	13	VOSEVI.....	20	XDEMVY.....	48
VIBRAMYCIN ORAL SUSPENSION RECONSTITUTED 25 MG/5ML.....	13	VOYDEYA.....	34	XELJANZ.....	45
vienva.....	42	VRAYLAR.....	19	XELJANZ XR.....	45
VIGAMOX.....	48	VTAMA.....	30	XELODA.....	18
VIIBRYD.....	15	VUMERITY.....	25	XENLETA ORAL TABLET 600 MG .	13
vilazodone hcl.....	15	vyfemla.....	42	XHANCE.....	50
VIMPAT ORAL SOLUTION.....	14	VYLEESI.....	34	XIFAXAN.....	13
VIMPAT ORAL TABLET.....	14	vylibra.....	42	XIGDUO XR.....	33
viorele.....	42	VYNDAMAX.....	38	XIIDRA.....	49
VIREAD ORAL TABLET 150 MG, 200 MG, 250 MG.....	20	VYNDAQEL.....	24, 38	XOFLUZA (40 MG DOSE).....	20
VIREAD ORAL TABLET 300 MG.....	20	VYTORIN.....	24	XOFLUZA (80 MG DOSE).....	20
VISTARIL ORAL CAPSULE 25 MG.	20	VYVANSE.....	25	XOLAIR.....	51
VITAFOL FE+.....	36	VYZULTA.....	48	XOPENEX HFA.....	51
VITAFOL ULTRA.....	36			XTAMPZA ER.....	10
VITAFOL-OB.....	36	W		XTANDI.....	18
vitamin d (ergocalciferol) oral capsule 1.25 mg (50000 ut), 50000 unit.....	36	WAINUA.....	15	xulane.....	42
VITATHELY WITH GINGER.....	36	WAKIX.....	52	xurea.....	30
		warfarin sodium oral.....	13	XYOSTED.....	43
		WELCHOL ORAL TABLET.....	24	XYWAV.....	52
		WELLBUTRIN SR.....	15		
		WELLBUTRIN XL.....	15	Y	
		wera.....	42	YASMIN 28.....	42
				YAZ.....	42
				YESINTEK SUBCUTANEOUS.....	45



YORVIPATH	47	zolmitriptan nasal solution 5 mg ..	17
YUPELRI	51	zolmitriptan oral tablet	17
yuvafem	42	zolmitriptan oral tablet dispersible	17
Z			
zafemy	42	ZOLOFT	15
zafirlukast	51	zolpidem tartrate er	52
zaleplon	52	zolpidem tartrate oral tablet	52
ZANAFLEX	52	ZOMIG NASAL SOLUTION 2.5 MG	17
ZANAFLEX ORAL CAPSULE 2 MG, 4 MG, 6 MG	52	ZOMIG NASAL SOLUTION 5 MG ..	17
ZARONTIN	14	ZOMIG ORAL TABLET 5 MG	17
ZARXIO	34	ZONEGRAN	14
ZAVZPRET	17	zonisamide oral	14
ZEBUTAL ORAL CAPSULE 50-325-40 MG	10	ZORTRESS	45
ZEGALOGUE SUBCUTANEOUS SOLUTION AUTO-INJECTOR	33	ZORYVE EXTERNAL CREAM	30
ZEJULA	18	ZORYVE EXTERNAL FOAM	30
ZELBORAF	18	zovia 1/35 (28)	42
ZEMBRACE SYMTOUCH	17	ZOVIRAX EXTERNAL OINTMENT .	20
zenatane	30	ZTLIDO	10
ZENPEP	38	ZUBSOLV	11
ZENZEDI	25	zumandimine	42
ZEPOSIA	26	ZURZUVAE	15
ZESTORETIC	24	ZYCLARA	30
ZESTRIL	24	ZYCLARA PUMP	30
ZETIA	24	ZYLET	48
ZETONNA NASAL AEROSOL SOLUTION 37 MCG/ACT	50	ZYLOPRIM ORAL TABLET 100 MG, 300 MG	16
ZIAC ORAL TABLET 10-6.25 MG, 2.5-6.25 MG	24	ZYPREXA ORAL	19
ZIAC ORAL TABLET 5-6.25 MG ...	24	ZYPREXA ZYDIS ORAL TABLET DISPERSIBLE 10 MG, 15 MG, 20 MG, 5 MG	19
ZILBRYSQ	17	ZYTIGA	18
ZILXI	30	ZYVOX ORAL TABLET	13
ZIMHI	11		
ZIOPTAN	48		
ziprasidone hcl	19		
ZITHROMAX	13		
ZOCOR	24		
ZOLMITRIPTAN NASAL SOLUTION 2.5 MG	17		



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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

โปรดทราบ หากคุณพูดภาษาไทย (Thai) ได้

คุณสามารถใช้บริการช่วยเหลือด้านภาษาฟรีและการสื่อสารในรูปแบบอื่น ๆ ฟรี เช่น

การพิมพ์ด้วยตัวอักษรขนาดใหญ่ โทรไปยังหมายเลขโทรฟรีสำหรับสมาชิกตามบัตรประจำตัวของคุณ

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

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

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

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