



Your 2027 Prescription Drug List Traditional 4-Tier

Effective January 1, 2027

This Prescription Drug List (PDL) is accurate as of January 1, 2027 and is subject to change after this date. This PDL is a list of the most commonly prescribed medications and applies to members of our Surest medical plans when sold in your market with a pharmacy benefit subject to the Traditional 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.

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.**

What are tiers?

Tiers are the different cost levels you pay for a medication. Your plan sets a cost for each tier. This is how much you will pay when you fill a prescription. See page 5 for more information.

When does the PDL change?

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

Why are some medications excluded from coverage?

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

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

Who decides which medications are covered?

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

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

2. For New Jersey plans, a prescription drug product that is therapeutically equal to an over-the-counter drug may be covered if it is determined to be medically necessary.

Medication tips

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

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

What if my doctor writes a brand-name prescription?

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

What if I am taking a specialty medication?

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

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

Over-the-counter (OTC) medications

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

Reading your PDL

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

Tier information

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

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

Drug list information

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

E	May be excluded from coverage — There may be over-the-counter (OTC) or lower-cost covered options available.
H	Health Care Reform Preventive — This medication is part of a health care reform preventive benefit and is generally covered at no cost to you.
H-PA	Health Care Reform Preventive with prior authorization — May be part of health care reform preventive benefit and available at no cost to you if prior authorization criteria are met.
PA	Prior authorization (sometimes referred to as precertification)³ — Requires your doctor to provide information about why you are taking a medication before your plan can decide how it may be covered.
QL	Quantity limits — The largest quantity of medication covered per copayment or in a defined period of time.
RS	Refill and Save 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 (referred to as First Start in New Jersey) — Requires prior authorization and may require you to try one or more other medications before the medication you are requesting may be covered.

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

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

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

Coverage is set by your prescription drug benefit plan.

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

Coverage is set by your prescription drug benefit plan.

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

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

- **Endocrine: growth hormone**

Coverage is set by your prescription drug benefit plan.

- **Infertility**

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

- **Medications for sexual dysfunction**

Coverage is set by your prescription drug benefit plan.

- **Termination of pregnancy**

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

Questions

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



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



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

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

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

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

Drug name	Drug tier	Requirements & limits
Analgesics - Drugs for pain		
acetaminophen-codeine oral tablet	1	QL
apap-caff-dihydrocodeine	1	QL
ascomp-codeine	1	QL
bac (butalbital-acetamin-caff)	1	QL
BELBUCA	3	PA; QL
buprenorphine	1	PA; QL
butalbital-acetaminophen oral tablet 50-325 mg	1	
butalbital-apap-caff-cod oral capsule 50-325-40-30 mg	1	QL
butalbital-apap-caffeine oral capsule	1	QL
butalbital-apap-caffeine oral tablet	1	QL
butalbital-asa-caff-codeine	1	QL
butalbital-aspirin-caffeine	1	
butorphanol tartrate nasal	1	QL
endocet	1	QL
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	1	PA; QL
FIORICET	4	QL
hydrocodone-acetaminophen oral solution 10-300 mg/15ml, 10-325 mg/15ml, 7.5-325 mg/15ml	1	QL
hydrocodone-acetaminophen oral tablet 10-325 mg, 2.5-325 mg, 5-325 mg, 7.5-325 mg	1	QL
hydromorphone hcl oral tablet	1	QL
JOURNAVX	4	QL
lidocaine external ointment 5 %	1	QL
lidocaine external patch 5 %	1	PA; QL
lidocaine-prilocaine external cream	1	
methadone hcl oral tablet	1	PA; QL
morphine sulfate er	1	PA; QL

Drug name	Drug tier	Requirements & limits
morphine sulfate oral tablet	1	QL
NUCYNTEA ER	3	PA; QL
oxycodone hcl oral capsule	1	QL
oxycodone hcl oral solution	1	QL
oxycodone hcl oral tablet	1	QL
oxycodone-acetaminophen oral tablet 10-325 mg, 2.5-325 mg, 5-325 mg, 7.5-325 mg	1	QL
premium lidocaine external ointment 5 %	1	QL
tapentadol hcl	1	QL
TENCON	3	
tramadol hcl (er biphasic) oral tablet extended release 24 hour	1	(generic for Ryzolt); QL
tramadol hcl er tablet extended release 24 hour 100 mg oral	1	(generic for Ultram ER); QL
tramadol hcl er tablet extended release 24 hour 100 mg oral	1	QL
tramadol hcl er tablet extended release 24 hour 200 mg oral	1	(generic for Ultram ER); QL
tramadol hcl er tablet extended release 24 hour 200 mg oral	1	QL
tramadol hcl er tablet extended release 24 hour 300 mg oral	1	(generic for Ultram ER); QL
tramadol hcl er tablet extended release 24 hour 300 mg oral	1	QL
tramadol hcl oral tablet 50 mg	1	QL
tramadol-acetaminophen	1	QL
TREZIX	3	QL
XTAMPZA ER	4	PA; QL
ZTLIDO	3	PA; QL

Analgesics - Drugs for pain and inflammation		
aspirin 81 oral tablet delayed release	1	H
aspirin adult low dose	1	H
aspirin adult low strength	1	H
aspirin childrens	1	H
aspirin ec adult low dose	1	H
aspirin ec low dose	1	H
aspirin ec low strength	1	H
aspirin low dose	1	H

See page 6-7 for coverage details.

Drug name	Drug tier	Requirements & limits
aspirin oral tablet chewable	1	H
aspirin oral tablet delayed release 81 mg	1	H
aspirin regimen	1	H
celecoxib oral	1	
cvs aspirin adult low dose	1	H
cvs aspirin adult low strength	1	H
cvs aspirin ec	1	H
cvs aspirin low dose	1	H
cvs aspirin low strength	1	H
DAYPRO ORAL TABLET 600 MG	4	
diclofenac potassium oral tablet 50 mg	1	
diclofenac sodium er	1	
diclofenac sodium oral	1	
diclofenac-misoprostol	1	
EC-NAPROSYN ORAL TABLET DELAYED RELEASE 375 MG	3	
EC-NAPROSYN ORAL TABLET DELAYED RELEASE 500 MG	4	
ec-naproxen oral tablet delayed release 375 mg, 500 mg	1	
eq aspirin adult low dose	1	H
eq aspirin low dose	1	H
eqi aspirin low dose	1	H
etodolac	1	
ft aspirin low dose	1	H
ft aspirin oral tablet chewable	1	H
gnp adult aspirin low strength	1	H
gnp aspirin low dose	1	H
gnp aspirin oral tablet delayed release 81 mg	1	H
goodsense aspirin low dose	1	H
goodsense aspirin oral tablet chewable	1	H
h-e-b aspirin	1	H
ibuprofen oral tablet 400 mg, 600 mg, 800 mg	1	
indomethacin er	1	
indomethacin oral capsule	1	
ketorolac tromethamine oral	1	

Drug name	Drug tier	Requirements & limits
kl's aspirin low dose	1	H
kp aspirin	1	H
meloxicam oral tablet	1	
mm aspirin	1	H
nabumetone oral	1	
naproxen dr	1	
naproxen oral tablet	1	
naproxen oral tablet delayed release	1	
naproxen sodium oral tablet 275 mg, 550 mg	1	
oxaprozin oral tablet	1	
piroxicam oral	1	
qc aspirin low dose	1	H
qc childrens aspirin	1	H
ra aspirin adult low dose oral tablet chewable 81 mg	1	H
ra aspirin adult low strength oral tablet chewable 81 mg	1	H
ra aspirin childrens oral tablet chewable 81 mg	1	H
ra aspirin ec adult low st oral tablet delayed release 81 mg	1	H
ra aspirin ec oral tablet delayed release 81 mg	1	H
sm aspirin low dose oral tablet chewable 81 mg	1	H
sm childrens aspirin oral tablet chewable 81 mg	1	H
sulindac oral	1	

Anti-addiction / Substance abuse treatment agents

acamprosate calcium	1	
buprenorphine hcl sublingual	1	QL
buprenorphine hcl-naloxone hcl sublingual film	1	QL
buprenorphine hcl-naloxone hcl sublingual tablet sublingual	1	QL
bupropion hcl er (smoking det)	1	H
cvs nicotine	1	H
cvs nicotine polacrilex	1	H
disulfiram oral	1	

See page 6-7 for coverage details.

Drug name	Drug tier	Requirements & limits
eq nicotine	1	H
eq nicotine mouth/throat gum 4 mg	1	H
eq nicotine polacrilex	1	H
eq nicotine step 3	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
goodsense nicotine polacrilex	1	H
habitrol	1	H
hm nicotine polacrilex mouth/throat gum 2 mg, 4 mg	1	H
KLOXXADO	1	QL
kls quit2	1	H
kls quit4	1	H
naloxone hcl nasal	1	QL
naltrexone hcl oral	1	QL
NARCAN	1	QL (includes Narcan OTC)
NICODERM CQ	4	H
NICORETTE MINI	2	H
NICORETTE MOUTH/THROAT GUM	4	H
NICORETTE MOUTH/THROAT LOZENGE	2	H
NICORETTE STARTER KIT	4	H
nicotine mini	1	H
nicotine polacrilex mini	1	H
nicotine polacrilex mouth/throat	1	H
nicotine step 1	1	H
nicotine step 2	1	H
nicotine step 3	1	H

Drug name	Drug tier	Requirements & limits
nicotine transdermal patch 24 hour	1	H
OPVEE	1	QL
qc nicotine transdermal system	1	H
ra mini nicotine mouth/throat lozenge 2 mg, 4 mg	1	H
ra nicotine mouth/throat gum 4 mg	1	H
ra nicotine polacrilex mouth/throat lozenge 2 mg, 4 mg	1	H
ra nicotine transdermal patch 24 hour 21 mg/24hr	1	H
REXTOVY	1	QL
REZENOPY	3	QL
sm nicotine mouth/throat gum	1	H
sm nicotine polacrilex mouth/throat gum 2 mg, 4 mg	1	H
sm nicotine transdermal patch 24 hour 14 mg/24hr, 7 mg/24hr	1	H
THRIVE	4	H
varenicline tartrate	1	H
ZUBSOLV	1	QL
Antibacterials - Drugs for infections		
amoxicillin	1	
amoxicillin-potassium clavulanate	1	
ampicillin	1	
AVIDOXY	4	
azithromycin oral packet 1 gm	1	
BACTRIM	4	
BACTRIM DS	4	
BLUJEPa	4	QL
cefadroxil oral capsule	1	
cefadroxil oral suspension reconstituted	1	
cefdinir	1	
cefixime oral capsule	1	
cefpodoxime proxetil oral tablet	1	
cefprozil	1	
cefuroxime axetil	1	
cephalexin	1	

See page 6-7 for coverage details.

Drug name	Drug tier	Requirements & limits
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	1	
clindamycin phosphate vaginal	1	
CLINDESSE	2	
dicloxacillin sodium	1	
DIFICID ORAL SUSPENSION RECONSTITUTED	3	QL
doxycycline hyclate oral capsule 100 mg, 50 mg	1	
doxycycline hyclate oral tablet 100 mg, 20 mg	1	
doxycycline monohydrate oral capsule 100 mg, 50 mg	1	
doxycycline monohydrate oral suspension reconstituted	1	
doxycycline monohydrate oral tablet	1	
E.E.S. GRANULES	3	
ERYPED 200 ORAL SUSPENSION RECONSTITUTED 200 MG/5ML	3	
ERYPED 400	4	
erythromycin base oral tablet	1	
erythromycin ethylsuccinate oral suspension reconstituted	1	
fidaxomicin	1	QL
fosfomycin tromethamine	1	
gentamicin sulfate external	1	QL
HIPREX	4	
levofloxacin oral tablet	1	
linezolid oral tablet	1	
MACROBID	4	
MACRODANTIN	4	

Drug name	Drug tier	Requirements & limits
methenamine hippurate	1	
metronidazole oral tablet 250 mg, 500 mg	1	
metronidazole vaginal	1	
minocycline hcl oral capsule	1	
moxifloxacin hcl oral	1	
mupirocin cream	1	QL
mupirocin ointment	1	QL
neomycin sulfate oral	1	
nitrofurantoin macrocrystal	1	
nitrofurantoin monohydrate macrocrystals	1	
NUZYRA ORAL	4	QL
ORLYNVAH	4	QL
penicillin v potassium	1	
PIVYA	4	QL
SILVADENE	4	
silver sulfadiazine external	1	
ssd	1	
sulfamethoxazole-trimethoprim oral suspension 200-40 mg/5ml	1	
sulfamethoxazole-trimethoprim oral tablet	1	
sulfatrim pediatric	1	
tetracycline hcl oral capsule	1	
tinidazole oral	1	
trimethoprim oral	1	
VANCOCIN	4	
vancomycin hcl oral capsule	1	
VANDAZOLE	4	
VIBRAMYCIN ORAL SUSPENSION RECONSTITUTED 25 MG/5ML	4	
XACIATO	2	QL
XEPI	3	
XIFAXAN	3	PA; QL
ZITHROMAX	4	
Anticoagulants - Drugs to treat or prevent blood clots		
dabigatran etexilate mesylate	1	QL
ELIQUIS TABLET	2	QL

See page 6-7 for coverage details.

Drug name	Drug tier	Requirements & limits
enoxaparin sodium injection solution prefilled syringe	1	QL
jantoven oral tablet 1 mg, 10 mg, 2 mg, 2.5 mg, 3 mg, 4 mg, 5 mg, 6 mg, 7.5 mg	1	
rivaroxaban oral tablet	1	QL
warfarin sodium oral	1	
XARELTO	2	QL
Anticonvulsants - Drugs for seizures		
APTIOM	4	PA
brivaracetam oral tablet	1	PA
BRIVIACT ORAL SOLUTION	4	PA
BRIVIACT ORAL TABLET	3	PA
carbamazepine er	1	
carbamazepine oral tablet	1	
carbamazepine oral tablet chewable	1	
CARBATROL	4	
clobazam oral suspension 2.5 mg/ml	1	PA
clobazam oral tablet	1	PA
DEPAKOTE	4	PA
DEPAKOTE ER	4	PA
DEPAKOTE SPRINKLES	4	PA
diazepam rectal	1	QL
DILANTIN	3	
divalproex sodium er	1	
divalproex sodium oral	1	
EPIDIOLEX	3	PA; SP
epitol oral tablet 200 mg	1	
eslicarbazepine acetate	1	PA
ethosuximide oral	1	
FYCOMPA ORAL SUSPENSION	4	PA
FYCOMPA ORAL TABLET	3	PA
gabapentin oral capsule 100 mg, 300 mg, 400 mg	1	
gabapentin oral solution 250 mg/5ml	1	
gabapentin oral tablet 600 mg, 800 mg	1	
KEPPRA ORAL	4	PA

Drug name	Drug tier	Requirements & limits
KEPPRA XR	4	PA
lacosamide oral solution 10 mg/ml, 100 mg/10ml, 50 mg/5ml	1	
lacosamide oral tablet	1	
LAMICTAL	4	PA
LAMICTAL ODT ORAL TABLET DISPERSIBLE	4	PA
LAMICTAL XR ORAL TABLET EXTENDED RELEASE 24 HOUR	3	PA
lamotrigine er	1	
lamotrigine oral tablet	1	
lamotrigine oral tablet chewable	1	
lamotrigine oral tablet dispersible	1	PA
levetiracetam er	1	
levetiracetam oral solution	1	
levetiracetam oral tablet	1	
LIBERVANT BUCCAL FILM 10 MG, 12.5 MG, 15 MG, 5 MG, 7.5 MG	3	PA; QL
MOTPOLY XR	3	PA
MYSOLINE	2	
NAYZILAM	3	PA; QL
NEURONTIN	4	PA
ONFI	4	PA
oxcarbazepine	1	
perampanel oral tablet	1	PA
phenobarbital oral tablet	1	
phenytek	1	
phenytoin sodium extended	1	
primidone oral	1	
roweepra	1	
subvenite oral tablet	1	
SYMPAZAN	4	PA
TEGRETOL ORAL TABLET	4	
TEGRETOL-XR	4	
TOPAMAX	4	PA
TOPAMAX SPRINKLE	4	PA
topiramate oral capsule sprinkle	1	
topiramate oral tablet	1	
TRILEPTAL	4	PA
valproic acid oral capsule	1	

See page 6-7 for coverage details.

Drug name	Drug tier	Requirements & limits
valproic acid oral solution 250 mg/5ml	1	
VALTOCO 10 MG DOSE	3	PA; QL
VALTOCO 15 MG DOSE	3	PA; QL
VALTOCO 20 MG DOSE	3	PA; QL
VALTOCO 5 MG DOSE	3	PA; QL
VIMPAT ORAL	4	PA
XCOPRI	3	PA
ZARONTIN	4	
ZONEGRAN	4	PA
zonisamide oral	1	
Antidementia agents - Drugs for Alzheimer's disease and dementia		
donepezil hcl oral tablet	1	
memantine hcl er	1	
memantine hcl oral tablet	1	
rivastigmine	1	
rivastigmine tartrate	1	
Antidepressants - Drugs for depression		
amitriptyline hcl oral	1	
AUVELITY	4	ST; QL
bupropion hcl er (sr)	1	
bupropion hcl er (xl) oral tablet extended release 24 hour 150 mg, 300 mg	1	
bupropion hcl oral	1	
citalopram hydrobromide oral tablet	1	
clomipramine hcl oral	1	
desipramine hcl oral	1	
desvenlafaxine succinate er	1	
doxepin hcl oral capsule	1	
doxepin hcl oral concentrate	1	
duloxetine hcl oral capsule delayed release particles 20 mg, 30 mg, 60 mg	1	
escitalopram oxalate oral solution	1	
escitalopram oxalate oral tablet	1	
EXXUA	4	ST; QL

Drug name	Drug tier	Requirements & limits
EXXUA TITRATION PACK	4	ST; QL
FETZIMA	4	ST; QL
fluoxetine hcl oral capsule	1	
fluoxetine hcl oral solution	1	
fluoxetine hcl oral tablet	1	
fluvoxamine maleate	1	
fluvoxamine maleate er	1	
imipramine hcl oral	1	
mirtazapine oral	1	
NORPRAMIN	4	
nortriptyline hcl oral capsule	1	
paroxetine hcl er	1	
paroxetine hcl oral tablet	1	
RALDESY	4	PA
sertraline hcl oral concentrate	1	
sertraline hcl oral tablet	1	
SPRAVATO	4	PA; QL; SP
trazodone hcl oral	1	
TRINTELLIX	4	ST; QL
venlafaxine hcl	1	
venlafaxine hcl er oral capsule extended release 24 hour	1	
vilazodone hcl	1	
ZURZUVAE	2	PA; QL; SP
Antiemetics - Drugs for nausea and vomiting		
aprepitant oral capsule	1	QL
dronabinol oral capsule	1	
metoclopramide hcl oral tablet	1	
ondansetron hcl oral solution 4 mg/5ml	1	
ondansetron hcl oral tablet	1	
ondansetron odt oral tablet dispersible 4 mg, 8 mg	1	
perphenazine oral	1	
prochlorperazine maleate oral	1	
promethazine hcl oral	1	
promethazine hcl rectal	1	
PROMETHEGAN	3	
REGLAN	4	

See page 6-7 for coverage details.

Drug name	Drug tier	Requirements & limits
scopolamine	1	
Antifungals - Drugs for fungal infections		
ciclodan	1	
ciclopirox external	1	
ciclopirox olamine external cream	1	
clotrimazole mouth/throat	1	
CRESEMBA ORAL	3	
econazole nitrate external cream	1	
fluconazole oral	1	
griseofulvin microsize oral suspension	1	
GYNAZOLE-1	3	
itraconazole oral capsule	1	QL
JUBLIA	4	PA; ST; QL
ketoconazole external cream	1	QL
ketoconazole external shampoo	1	
ketoconazole oral	1	
klayesta	1	QL
nyamyc external powder 100000 unit/gm	1	QL
nystatin external	1	QL
nystatin mouth/throat suspension 100000 unit/ml	1	
nystatin oral	1	
nystatin-triamcinolone	1	
nystop	1	QL
posaconazole oral tablet delayed release	1	
SPORANOX	4	QL
terbinafine hcl oral	1	
terconazole	1	
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	
colchicine oral	1	
colchicine-probenecid	1	
febuxostat	1	

Drug name	Drug tier	Requirements & limits
MITIGARE	2	
probenecid	1	
Antimigraine agents - Drugs for migraines		
AIMOVIG	2	PA; ST; QL
eletriptan hydrobromide	1	QL
EMGALITY	2	PA; ST; QL
frovatriptan succinate	1	QL
naratriptan hcl	1	QL
NURTEC	2	PA; ST; QL
QULIPTA	2	PA; ST; QL
REYVOW ORAL TABLET 100 MG, 50 MG	4	PA; QL
rizatriptan benzoate oral	1	QL
sumatriptan nasal	1	QL
sumatriptan succinate oral	1	QL
sumatriptan succinate subcutaneous solution auto-injector	1	QL
UBRELVY	2	PA; ST; QL
ZAVZPRET	4	PA; ST; QL
zolmitriptan oral	1	QL
ZOMIG NASAL SOLUTION 2.5 MG	3	QL
ZOMIG NASAL SOLUTION 5 MG	1	QL
Antimyasthenic agents - Drugs to treat myasthenia gravis		
pyridostigmine bromide oral tablet 60 mg	1	
Antimycobacterials - Drugs to treat infections		
dapsone oral	1	
ethambutol hcl oral	1	
isoniazid oral tablet	1	
MYAMBUTOL ORAL TABLET 400 MG	4	
rifampin oral	1	
Antineoplastics - Drugs for cancer		
abiraterone acetate oral tablet 250 mg	1	QL; SP
abirtega	1	QL; SP
ALECENSA	2	PA; QL; SP
ALUNBRIG	2	PA; QL; SP

See page 6-7 for coverage details.

Drug name	Drug tier	Requirements & limits
anastrozole oral	1	H-PA
AUGTYRO	2	PA; QL; SP
BESREMI	4	PA; QL; SP
bicalutamide	1	
BRUKINSA ORAL CAPSULE	3	PA; ST; SP
CABOMETYX	2	PA; QL; SP
CALQUENCE	2	PA; QL; SP
capecitabine	1	SP
COTELLIC	2	PA; QL; SP
dasatinib	1	PA; QL; SP
ENSACOVE	2	PA; QL; SP
ERIVEDGE	2	PA; QL; SP
ERLEADA	2	PA; QL; SP
everolimus oral tablet 10 mg, 2.5 mg, 5 mg, 7.5 mg	1	PA; QL; SP
exemestane	1	H-PA
GAVRETO	4	PA; QL; SP
hydroxyurea oral	1	
HYRNUO	2	PA; QL; SP
IBRANCE ORAL TABLET	4	PA; ST; QL; SP
ICLUSIG	3	PA; QL; SP
IDHIFA	2	PA; QL; SP
imatinib mesylate oral	1	QL; SP
IMBRUVICA ORAL CAPSULE	2	PA; QL; SP
IMBRUVICA ORAL SUSPENSION	2	PA; QL; SP
IMBRUVICA ORAL TABLET 420 MG	2	PA; QL; SP
IMKELDI	4	PA; QL; SP
JAKAFI	2	PA; QL; SP
KISQALI (200 MG DOSE)	2	PA; QL; SP
KISQALI (400 MG DOSE)	2	PA; QL; SP
KISQALI (600 MG DOSE)	2	PA; QL; SP
KOSELUGO ORAL CAPSULE	3	PA; QL; SP
lederle leucovorin	1	
lenalidomide	1	PA; QL; SP
LENVIMA ORAL CAPSULE THERAPY PACK 10 & 4 MG, 10 MG, 10 MG & 2 X 4 MG, 2 X 10 MG, 2 X 10 MG & 4 MG, 2 X 4 MG, 3 X 4 MG, 4 MG	2	PA; QL; SP
letrozole oral	1	H-PA

Drug name	Drug tier	Requirements & limits
leucovorin calcium oral	1	
leuprolide acetate injection	1	PA; SP
LUMAKRAS	4	PA; QL; SP
LYNPARZA	2	PA; QL; SP
mercaptopurine oral tablet	1	
nilotinib hcl	1	PA; ST; QL; SP
NUBEQA	2	PA; QL; SP
ODOMZO	2	PA; QL; SP
ORGOVYX	3	PA; QL; SP
PIQRAY	2	PA; QL; SP
pomalidomide	1	PA; QL; SP
RETEVMO	4	PA; QL; SP
ROZLYTREK	2	PA; QL; SP
RYDAPT	2	PA; QL; SP
SCEMBLIX	4	PA; QL; SP
STIVARGA	2	PA; QL; SP
TABRECTA	4	PA; QL; SP
TAGRISSO	3	PA; QL; SP
tamoxifen citrate oral tablet 10 mg	1	
tamoxifen citrate oral tablet 20 mg	1	H-PA
temozolomide	1	SP
TEPMETKO	4	PA; QL; SP
torpenz	1	PA; QL; SP
TRUQAP	2	PA; QL; SP
VENCLEXTA	2	PA; QL; SP
VERZENIO	2	PA; QL; SP
VITRAKVI	2	PA; QL; SP
XTANDI	2	PA; QL; SP
yulithira	1	PA; QL; SP
ZEJULA	2	PA; QL; SP
ZELBORAF	2	PA; QL; SP

Antiparasitics - Drugs for parasitic infections

ARAKODA	4	QL
atovaquone	1	
atovaquone-proguanil hcl	1	
ELIMITE EXTERNAL CREAM 5 %	4	
hydroxychloroquine sulfate oral	1	

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Drug name	Drug tier	Requirements & limits
ivermectin oral tablet 3 mg	1	PA; QL
ivermectin oral tablet 6 mg	1	PA
MALARONE	4	
mefloquine hcl	1	
permethrin external	1	
STROMECTOL	4	PA; QL
Antiparkinson agents - Drugs for Parkinson's disease		
amantadine hcl oral capsule	1	
amantadine hcl oral tablet	1	
benztropine mesylate oral	1	
bromocriptine mesylate oral tablet	1	
carbidopa-levodopa er oral tablet extended release	1	
carbidopa-levodopa oral tablet	1	
CREXONT	4	ST
INBRIJA	3	PA; QL; SP
NEUPRO	3	
pramipexole dihydrochloride	1	
rasagiline mesylate oral	1	
ropinirole hcl	1	
SINEMET	4	
trihexyphenidyl hcl oral tablet	1	
Antiplatelets - Drugs for heart attack and stroke prevention		
cilostazol	1	
clopidogrel bisulfate oral	1	
prasugrel hcl	1	
ticagrelor	1	QL
Antipsychotics - Drugs for mood disorders		
aripiprazole oral solution	1	
aripiprazole oral tablet	1	
asenapine maleate	1	QL
CAPLYTA	4	PA; ST; QL
chlorpromazine hcl oral tablet	1	QL
clozapine oral tablet	1	
CLOZARIL	4	
haloperidol oral	1	
lurasidone hcl	1	QL
olanzapine oral	1	

Drug name	Drug tier	Requirements & limits
paliperidone er	1	QL
quetiapine fumarate	1	
quetiapine fumarate er	1	
REXULTI	4	QL
risperidone	1	
VRAYLAR	4	QL
ziprasidone hcl	1	
Antivirals - Drugs for viral infections		
acyclovir external ointment	1	
acyclovir oral capsule	1	
acyclovir oral suspension 200 mg/5ml	1	
acyclovir oral tablet	1	
BIKTARVY	4	QL
CIMDUO	2	QL
DELSTRIGO	2	QL
DESCOVY ORAL TABLET 120-15 MG	4	QL
DESCOVY ORAL TABLET 200-25 MG	4	QL; H
DOVATO	2	QL
emtricitabine-tenofovir df oral tablet 100-150 mg, 133-200 mg, 167-250 mg	1	QL
emtricitabine-tenofovir df oral tablet 200-300 mg	1	QL; H
entecavir	1	
famciclovir oral	1	
GENVOYA	4	QL
ISENTRESS HD	2	
ISENTRESS ORAL TABLET	2	
JULUCA	2	QL
LAGEVRIO	2	QL
LEDIPASVIR-SOFOSBUVIR	2	PA; ST; QL; SP
MAVYRET	2	PA; QL; SP
ODEFSEY	4	QL
oseltamivir phosphate oral	1	
PAXLOVID (150/100)	2	QL
PAXLOVID (300/100 & 150/100)	2	QL
PAXLOVID (300/100)	2	QL

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Drug name	Drug tier	Requirements & limits
PREVYMIS ORAL TABLET	2	PA
PREZCOBIX	2	
SOFOSBUVIR-VELPATASVIR	2	PA; QL; SP
SYMFI	2	QL
SYMFI LO ORAL TABLET 400-300-300 MG	2	QL
tenofovir disoproxil fumarate	1	H-PA
TIVICAY	3	
TRIUMEQ	2	QL
TRUVADA ORAL TABLET 100-150 MG, 133-200 MG, 167-250 MG	4	QL
valacyclovir hcl oral tablet 1 gm	1	QL
valacyclovir hcl oral tablet 500 mg	1	
valganciclovir hcl oral tablet	1	
VIREAD ORAL TABLET 150 MG, 200 MG, 250 MG	2	
VOSEVI	2	PA; QL; SP
XOFLUZA (40 MG DOSE)	3	QL
XOFLUZA (80 MG DOSE)	3	QL
Anxiolytics - Drugs for anxiety		
alprazolam er	1	
alprazolam oral	1	
alprazolam xr	1	
buspirone hcl oral tablet 10 mg, 15 mg, 30 mg, 5 mg, 7.5 mg	1	
chlordiazepoxide hcl	1	
clonazepam oral	1	
clorazepate dipotassium	1	
diazepam oral solution	1	
diazepam oral tablet	1	
HALCION ORAL TABLET 0.25 MG	4	
hydroxyzine hcl oral syrup 10 mg/5ml	1	
hydroxyzine hcl oral tablet	1	
hydroxyzine pamoate oral	1	
lorazepam oral tablet	1	
triazolam	1	
Bipolar agents - Drugs for mood disorders		
lithium carbonate er	1	
lithium carbonate oral	1	

Drug name	Drug tier	Requirements & limits
LITHOBID	4	PA
Cardiovascular agents - Drugs for heart and circulation conditions		
acebutolol hcl oral	1	
acetazolamide er	1	
acetazolamide oral	1	
amiloride hcl oral	1	
amiodarone hcl oral	1	
amlodipine besylate oral	1	
amlodipine besylate-benazepril hcl	1	
amlodipine besylate-valsartan	1	
amlodipine-olmesartan	1	
ARBLI	4	PA
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	
benazepril hcl oral	1	
benazepril-hydrochlorothiazide	1	
bisoprolol fumarate oral	1	
bisoprolol-hydrochlorothiazide	1	
bumetanide oral	1	
BUMEX	3	
CAMZYOS	4	PA; QL; SP
candesartan cilexetil	1	
candesartan cilexetil-hctz	1	
captopril oral	1	
CARDURA	4	
cartia xt	1	
carvedilol	1	
chlorthalidone	1	
cholestyramine light	1	
cholestyramine oral	1	
clonidine hcl oral tablet 0.1 mg, 0.2 mg, 0.3 mg	1	
clonidine patch weekly	1	

See page 6-7 for coverage details.

Drug name	Drug tier	Requirements & limits
colesevelam hcl oral tablet	1	
COLESTID ORAL TABLET	4	
colestipol hcl oral tablet	1	
CORLANOR ORAL TABLET	3	PA; QL
digoxin oral tablet	1	
dilt-xr	1	
diltiazem hcl er	1	
diltiazem hcl er beads	1	
diltiazem hcl er coated beads	1	
diltiazem hcl oral	1	
dofetilide	1	
doxazosin mesylate oral	1	
enalapril maleate oral solution	1	PA
enalapril maleate oral tablet	1	
enalapril-hydrochlorothiazide	1	
eplerenone	1	
ezetimibe	1	
ezetimibe-simvastatin	1	
felodipine er	1	
fenofibrate micronized	1	
fenofibrate oral capsule 134 mg, 200 mg, 67 mg	1	
fenofibrate oral tablet 145 mg, 160 mg, 48 mg, 54 mg	1	
fenofibric acid oral capsule delayed release	1	
flecainide acetate	1	
fosinopril sodium	1	
furosemide oral	1	
gemfibrozil oral	1	
guanfacine hcl	1	
HEMANGEOL	3	
hydralazine hcl oral	1	
hydrochlorothiazide oral	1	
indapamide	1	
INZIRQO	4	PA
irbesartan	1	
irbesartan-hydrochlorothiazide	1	
isosorbide dinitrate oral tablet 10 mg, 20 mg, 30 mg, 5 mg	1	

Drug name	Drug tier	Requirements & limits
isosorbide mononitrate er	1	
ivabradine hcl	1	PA; QL
KAPSPARGO SPRINKLE	4	
KERENDIA	4	PA; QL
labetalol hcl oral	1	
LANOXIN ORAL TABLET 125 MCG, 250 MCG	3	
LANOXIN ORAL TABLET 62.5 MCG	4	
LASIX	4	
lisinopril oral	1	
lisinopril-hydrochlorothiazide	1	
LODOCO	4	QL
LOPID	4	
LOPRESSOR ORAL SOLUTION	4	PA
losartan potassium oral	1	
losartan potassium-hctz	1	
LOTENSIN	4	
LOTENSIN HCT	4	
lovastatin oral	1	H
matzim la	1	
metolazone	1	
metoprolol succinate er	1	
metoprolol tartrate oral tablet 100 mg, 25 mg, 50 mg	1	
metoprolol-hydrochlorothiazide	1	
mexiletine hcl oral	1	
midodrine hcl	1	
minoxidil oral	1	
MULTAQ	4	PA
nadolol oral	1	
nebivolol hcl	1	
NEXLETOL	2	PA; ST; QL
NEXLIZET	2	PA; ST; QL
niacin er (antihyperlipidemic)	1	
nifedipine er	1	
nifedipine er osmotic release	1	
nifedipine oral	1	
nitro-bid	1	
NITRO-DUR	3	

See page 6-7 for coverage details.

Drug name	Drug tier	Requirements & limits
nitroglycerin rectal	1	QL
nitroglycerin sublingual	1	
nitroglycerin transdermal	1	
NITROSTAT	4	
NORLIQVA	4	PA
olmesartan medoxomil oral	1	
olmesartan medoxomil-hctz	1	
omega-3-acid ethyl esters	1	
PACERONE ORAL TABLET 100 MG, 400 MG	3	
PACERONE ORAL TABLET 200 MG	4	
pentoxifylline er	1	
pravastatin sodium	1	
prazosin hcl oral	1	
prevalite	1	
propafenone hcl	1	
propafenone hcl er	1	
propranolol hcl er	1	
propranolol hcl oral	1	
QUESTRAN	4	
QUESTRAN LIGHT	4	
ramipril	1	
ranolazine er	1	
RECTIV	4	QL
REPATHA	2	QL
REPATHA PUSHTRONEX SYSTEM SUBCUTANEOUS SOLUTION CARTRIDGE 420 MG/3.5ML	2	QL
REPATHA SURECLICK	2	QL
rosuvastatin calcium oral	1	
sacubitril-valsartan	1	PA; QL
simvastatin oral tablet 10 mg, 20 mg, 40 mg, 5 mg	1	H-PA
simvastatin oral tablet 80 mg	1	
sotalol hcl oral	1	
spironolactone oral tablet	1	
spironolactone-hctz	1	
TEKURNA	3	
telmisartan	1	
telmisartan-hctz	1	

Drug name	Drug tier	Requirements & limits
tiadylt er	1	
TIAZAC	4	
TIKOSYN	4	
toremide	1	
trandolapril	1	
triamterene-hctz	1	
TRYNGOLZA SUBCUTANEOUS SOLUTION AUTO-INJECTOR 80 MG/0.8ML	4	PA; QL; SP
valsartan oral solution	1	PA
valsartan oral tablet	1	
valsartan-hydrochlorothiazide	1	
verapamil hcl er	1	
verapamil hcl oral	1	
VERELAN ORAL CAPSULE EXTENDED RELEASE 24 HOUR 120 MG, 180 MG, 240 MG, 360 MG	4	
VERELAN PM ORAL CAPSULE EXTENDED RELEASE 24 HOUR 100 MG, 200 MG, 300 MG	4	
VERQUVO	4	PA; QL
VYNDAQEL ORAL CAPSULE 20 MG	2	PA; QL; SP
Central nervous system agents - Drugs for attention deficit disorder		
amphet-dextroamphet 3-bead er	1	QL
amphetamine sulfate	1	
amphetamine-dextroamphetamine	1	
amphetamine-dextroamphetamine er	1	QL
atomoxetine hcl oral capsule	1	QL
AZSTARYS	3	ST; QL
clonidine hcl er	1	
dexmethylphenidate hcl	1	
dexmethylphenidate hcl er	1	QL
dextroamphetamine sulfate er	1	QL
dextroamphetamine sulfate oral tablet 10 mg, 5 mg	1	
FOCALIN	4	
guanfacine hcl er	1	
JORNAY PM	3	ST; QL

See page 6-7 for coverage details.

Drug name	Drug tier	Requirements & limits
lisdexamfetamine dimesylate	1	QL
METHYLIN	4	
methylphenidate hcl er (cd)	1	QL
methylphenidate hcl er (la)	1	QL
methylphenidate hcl er (osm) oral tablet extended release 18 mg, 27 mg, 36 mg, 54 mg	1	QL
methylphenidate hcl er oral tablet extended release	1	QL
methylphenidate hcl er(diffus)	1	QL
methylphenidate hcl oral	1	
ONYDA XR	3	QL
Central nervous system agents - Drugs for multiple sclerosis		
AVONEX	2	PA; QL; SP
BAFIERTAM	2	PA; QL; SP
BETASERON	2	PA; QL; SP
dalfampridine er	1	PA; QL; SP
dimethyl fumarate oral	1	PA; QL; SP
fingolimod hcl	1	PA; QL; SP
GILENYA ORAL CAPSULE 0.25 MG	4	PA; QL; SP
glatiramer acetate	1	PA; QL; SP
glatopa	1	PA; QL; SP
KESIMPTA	2	PA; QL; SP
MAYZENT	3	PA; QL; SP
PLEGRIDY	3	PA; QL; SP
teriflunomide	1	PA; QL; SP
Central nervous system agents - Miscellaneous		
AUSTEDO	2	PA; QL; SP
AUSTEDO XR	2	PA; QL; SP
INGREZZA	2	PA; QL; SP
INGREZZA SPRINKLE	2	PA; QL; SP
LYNKUET	4	PA; QL
LYRICA ORAL CAPSULE	4	PA
milnacipran hcl oral tablet	1	QL
NUEDEXTA	2	PA; QL
pregabalin oral capsule	1	
RADICAVA ORS	3	PA; QL; SP
RADICAVA ORS STARTER KIT	3	PA; QL; SP
TEGLUTIK	3	PA; SP

Drug name	Drug tier	Requirements & limits
TIGLUTIK	3	PA; SP
VEOZAH	4	PA; QL
ZEPOSIA	3	PA; ST; QL; SP
Dental and oral agents - Drugs for mouth and throat conditions		
cevimeline hcl	1	
chlorhexidine gluconate mouth/throat	1	
CLINPRO 5000	3	
DENTA 5000 PLUS	4	
DENTAGEL	4	
FLUORIDEX	3	
FLUORIDEX ENHANCED WHITENING	3	
FLUORIMAX 5000	3	
FRAICHE 5000 DENTAL DENTAL GEL 1.1 %	4	
JUST RIGHT 5000	3	
KOURZEQ	2	
lidocaine hcl mouth/throat	1	
lidocaine viscous hcl	1	
ORALONE	2	
PERIDEX	4	
periogard	1	
pilocarpine hcl oral	1	
PREVIDENT 5000 BOOSTER PLUS	3	
PREVIDENT 5000 DRY MOUTH	4	
PREVIDENT 5000 KIDS	3	
PREVIDENT 5000 ORTHO DEFENSE	3	
PREVIDENT 5000 PLUS	4	
PREVIDENT DENTAL	4	
SALAGEN	4	
sf 5000 plus	1	
sf gel 1.1%	1	
sodium fluoride 5000 plus	1	
sodium fluoride 5000 ppm	1	
sodium fluoride 5000 ppm dental cream 1.1 %	1	
sodium fluoride dental	1	

See page 6-7 for coverage details.

Drug name	Drug tier	Requirements & limits
triamcinolone acetonide mouth/throat	1	
Dermatological agents - Drugs for skin conditions		
acutane	1	
acitretin	1	
adapalene-benzoyl peroxide external gel 0.1-2.5 %	1	QL
ADBRY	2	PA; QL; SP
AKLIEF	4	PA; QL
alclometasone dipropionate	1	
amnesteem	1	
AMZEEQ	4	QL
ANZUPGO	4	PA; QL; SP
AVAR CLEANSER	4	
azelaic acid external	1	
AZELEX	3	QL
BENZAMYCIN	2	QL
benzoyl peroxide-erythromycin	1	QL
betamethasone dipropionate aug external cream	1	
betamethasone dipropionate aug external lotion	1	
betamethasone dipropionate aug external ointment	1	
betamethasone dipropionate external	1	
betamethasone valerate external cream	1	
betamethasone valerate external lotion	1	
betamethasone valerate external ointment	1	
calcipotriene external cream	1	QL
calcipotriene external ointment	1	
calcipotriene external solution	1	QL
CALCITRENE	3	
CIBINQO	2	PA; QL; SP
ciclopirox olamine external suspension	1	
claravis	1	
CLEOCIN-T	4	

Drug name	Drug tier	Requirements & limits
clindacin etz	1	
clindacin-p	1	
clindamycin phos (twice-daily) gel 1 % external	1	(generic for Cleocin-T); QL
clindamycin phos (twice-daily) gel 1 % external	1	QL
clindamycin phos-benzoyl perox external gel 1.2-5 %	1	QL
clindamycin phosphate external lotion	1	
clindamycin phosphate external solution	1	
clindamycin phosphate external swab	1	
clobetasol prop emollient base	1	QL
clobetasol propionate e	1	QL
clobetasol propionate external cream 0.05 %	1	QL
clobetasol propionate external gel	1	QL
clobetasol propionate external liquid	1	QL
clobetasol propionate external ointment	1	QL
clobetasol propionate external solution	1	QL
clotrimazole-betamethasone	1	
dapsone external	1	QL
DERMA-SMOOTH/FS BODY	4	QL
DERMA-SMOOTH/FS SCALP	4	
desonide external cream	1	QL
desonide external lotion	1	QL
desonide external ointment	1	QL
DESOWEN EXTERNAL CREAM 0.05 %	3	QL
desoximetasone external cream	1	QL
desoximetasone external ointment	1	QL
diclofenac sodium external gel 3 %	1	PA; QL
DIPROLENE	4	
DRYSOL	4	

See page 6-7 for coverage details.

Drug name	Drug tier	Requirements & limits
DUPIXENT	2	PA; QL; SP
EBGLYSS	2	PA; QL; SP
EFUDEX EXTERNAL CREAM 5 %	4	
ENSTILAR	4	QL
ERYGEL EXTERNAL GEL 2 %	3	
erythromycin external	1	
EUCRISA	3	ST; QL
FINACEA EXTERNAL FOAM	4	
fluocinolone acetonide body	1	QL
fluocinolone acetonide external cream	1	QL
fluocinolone acetonide external ointment	1	QL
fluocinolone acetonide external solution	1	
fluocinolone acetonide scalp	1	
fluocinonide external cream 0.05 %	1	
fluocinonide external gel	1	
fluocinonide external ointment	1	
fluocinonide external solution	1	
fluorouracil external cream 5 %	1	
fluticasone propionate external cream	1	
fluticasone propionate external ointment	1	
halobetasol propionate external cream	1	QL
halobetasol propionate external ointment	1	QL
hydrocortisone external cream 2.5 %	1	
hydrocortisone external lotion 2.5 %	1	
hydrocortisone external ointment 1 %, 2.5 %	1	
hydrocortisone valerate external cream	1	QL
ICOTYDE	2	PA; QL; SP
imiquimod external cream 5 %	1	
isotretinoin oral capsule 10 mg, 20 mg, 30 mg, 40 mg	1	

Drug name	Drug tier	Requirements & limits
KLARON	4	
KLISYRI	4	ST; QL
METROCREAM EXTERNAL CREAM 0.75 %	4	
METROLOTION EXTERNAL LOTION 0.75 %	4	
metronidazole external cream	1	
metronidazole external gel 0.75 %	1	
metronidazole external lotion	1	
MIRVASO	2	PA; QL
mometasone furoate external	1	
NEMLUVIO	2	PA; QL; SP
neuac	1	QL
OPZELURA	4	PA; QL; SP
OVACE PLUS WASH EXTERNAL LIQUID 10 %	4	
OVACE WASH EXTERNAL LIQUID 10 %	4	
PANRETIN	3	
PELLIX	4	QL
pimecrolimus	1	QL
podofilox external solution	1	
RHOFADE	4	PA; QL
SANTYL	3	QL
selenium sulfide external lotion	1	
sodium sulfacetamide wash	1	
SOOLANTRA	1	QL
STARJEMZA SUBCUTANEOUS	2	PA; QL; SP
STEQEYMA SUBCUTANEOUS SOLUTION	2	SP
STEQEYMA SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	2	PA; QL; SP
sulfacetamide sod-sulfur wash external liquid 9-4 %	1	
sulfacetamide sodium (acne)	1	
sulfacetamide sodium external	1	
sulfacetamide sodium-sulfur external liquid 10-5 %, 9-4 %	1	
tacrolimus external	1	QL
tazarotene external cream	1	PA; QL
TAZORAC EXTERNAL CREAM	4	PA; QL

See page 6-7 for coverage details.

Drug name	Drug tier	Requirements & limits
TOPICORT	4	QL
TOPICORT EXTERNAL CREAM 0.05 %, 0.25 %	4	QL
TREMFYA	2	PA; QL; SP
tretinoin external cream	1	QL
triamcinolone acetonide external cream 0.025 %, 0.1 %	1	
triamcinolone acetonide external cream 0.5 %	1	QL
triamcinolone acetonide external lotion	1	
triamcinolone acetonide external ointment 0.025 %, 0.1 %, 0.5 %	1	
triderm	1	QL
urea external cream 20 %, 40 %, 45 %	1	
UREMEZ-40 EXTERNAL CREAM 40 %	3	
VTAMA	4	PA; QL
WEZLANA SUBCUTANEOUS	2	PA; QL; SP
ZELSUVMI	4	QL
zenatane	1	
ZILXI	4	PA; ST; QL
ZORYVE	4	PA; QL
Diabetes - Glucose monitoring and supplies		
ACCU-CHEK FASTCLIX LANCET DEVICE KIT	1	
ACCU-CHEK GUIDE	2	QL
ACCU-CHEK GUIDE KIT W/DEVICE	2	QL
ACCU-CHEK GUIDE ME KIT W/DEVICE	2	QL
ACCU-CHEK GUIDE TEST STRIPS	2	QL
ACCU-CHEK SOFTCLIX LANCET DEVICE KIT	1	
AQ INSULIN SYRINGE	2	QL
AQINJECT PEN NEEDLE	2	QL
BD AUTOSHIELD DUO PEN NEEDLES	2	
BD ULTRA-FINE INSULIN SYRINGES	2	QL
BD ULTRA-FINE PEN NEEDLES	2	QL

Drug name	Drug tier	Requirements & limits
BIGFOOT UNITY PROGRAM	3	QL
CAREPOINT POLY HUB NEEDLE 18G X 1" , 21G X 1" , 22G X 1" , 23G X 1" , 25G X 1" , 25G X 1-1/2" , 25G X 5/8"	2	
CAREPOINT POLY HUB NEEDLE 22G X 1-1/2"	2	
CAREPOINT PRECISION POLY HUB	2	
CAREPOINT SAFETY 1ST NEEDLE	2	
CEQUR SIMPLICITY 2U 10PK	3	ST
CONTOUR NEXT EZ KIT W/DEVICE	1	QL
CONTOUR NEXT GEN MONITOR KIT W/DEVICE	1	QL
CONTOUR NEXT GEN TEST STRIPS	1	QL
CONTOUR NEXT MONITOR KIT W/DEVICE	1	QL
CONTOUR NEXT ONE KIT	1	QL
CONTOUR PLUS BLUE KIT W/DEVICE	1	QL
CONTOUR PLUS TEST STRIP	1	QL
DEXCOM G6 RECEIVER	3	PA; QL
DEXCOM G6 SENSOR	3	PA; QL
DEXCOM G6 TRANSMITTER	3	PA; QL
DEXCOM G7 15 DAY SENSOR	3	PA; QL
DEXCOM G7 RECEIVER	3	PA; QL
DEXCOM G7 SENSOR	3	PA; QL
DROPSAFE SAFETY SYRINGE/NEEDLE	2	QL
DROPSAFE SICURA	2	
EMBECTA AUTOSHIELD 30GX5MM	2	QL
EMBECTA INSULIN SYRINGE	2	QL
EMBECTA INSULIN SYRINGE U-500	2	QL
EMBECTA PEN NEEDLE/NANO/32G X 4MM	2	QL
ENLITE GLUCOSE SENSOR	3	PA
FREESTYLE LIBRE 14 DAY READER	3	PA; QL
FREESTYLE LIBRE 14 DAY SENSOR	3	PA; QL
FREESTYLE LIBRE 2 PLUS SENSOR	3	PA; QL

See page 6-7 for coverage details.

Drug name	Drug tier	Requirements & limits
FREESTYLE LIBRE 2 READER	3	PA; QL
FREESTYLE LIBRE 2 SENSOR	3	PA; QL
FREESTYLE LIBRE 3 PLUS SENSOR	3	PA; QL
FREESTYLE LIBRE 3 READER	3	PA; QL
FREESTYLE LIBRE 3 SENSOR	3	PA; QL
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 SENSOR 3	3	PA; QL
INPEN 100-BLUE-LILLY-HUMALOG	3	ST
INPEN 100-BLUE-NOVOLOG-FIASP	3	ST
INPEN 100-GREY-LILLY-HUMALOG	3	ST
INPEN 100-GREY-NOVOLOG-FIASP	3	ST
INPEN 100-PINK-LILLY-HUMALOG	3	ST
INPEN 100-PINK-NOVOLOG-FIASP	3	ST
INSULIN PEN NEEDLES 29G X 12MM , 30G X 5 MM , 31G X 5 MM , 31G X 6 MM , 31G X 8 MM , 32G X 4 MM	2	QL
INSULIN SYRINGES 27G X 1/2" 0.5 ML, 27G X 1/2" 1 ML, 28G X 1/2" 0.5 ML, 28G X 1/2" 1 ML, 29G X 1/2" 0.5 ML, 29G X 1/2" 1 ML, 30G X 1/2" 1 ML, 30G X 5/16" 0.5 ML, 31G X 5/16" 0.5 ML, 31G X 5/16" 1 ML	2	QL
LANCETS	1	
MINIMED 630G GUARDIAN PRESS	3	PA
MINIMED INSTINCT GLUC SENSOR	3	PA; QL
MONOJECT HYPODERMIC NEEDLE 18G X 1"	2	
NOVOFINE PEN NEEDLE	2	QL
NOVOFINE PLUS PEN NEEDLE	2	QL
OMNIPOD 5 DEXCOM INTRO KIT	2	PA; QL
OMNIPOD 5 DEXCOM PODS	2	PA; QL
OMNIPOD 5 LIBRE INTRO	2	PA; QL
OMNIPOD 5 LIBRE PODS	2	PA; QL

Drug name	Drug tier	Requirements & limits
RELION GLUCOSE TEST STRIPS	4	QL
SIMPLERA SYNC SENSOR	3	PA
TECHLITE INSULIN SYRINGES (Arkay)	2	QL
TECHLITE PEN NEEDLES (Arkay)	2	QL
TWIIST REFILL KIT	2	PA; QL
TWIIST REFILL KIT/INFUSION SET	2	PA; QL
TWIIST STARTER KIT	2	PA; QL
VERISAFE SAFETY STERILE NEEDLE	2	
Diabetes - Insulin		
HUMALOG KWIKPEN	2	QL
HUMALOG MIX 50/50 KWIKPEN	2	QL
HUMALOG MIX 50/50 VIAL SUBCUTANEOUS SUSPENSION (50-50) 100 UNIT/ML	1	QL
HUMALOG MIX 75/25 KWIKPEN	2	QL
HUMALOG MIX 75/25 VIAL	1	QL
HUMALOG U-100 JUNIOR KWIKPEN	2	QL
HUMULIN 70/30 KWIKPEN	2	QL
HUMULIN 70/30 VIAL	1	QL
HUMULIN N KWIKPEN	2	QL
HUMULIN N VIAL	1	QL
HUMULIN R U-500 KWIKPEN	2	QL
HUMULIN R U-500 VIAL SUBCUTANEOUS SOLUTION 500 UNIT/ML	1	QL
HUMULIN R VIAL	1	QL
INSULIN LISPRO (1 UNIT DIAL)	2	(Insulin Lispro Kwikpen); QL
INSULIN LISPRO JUNIOR KWIKPEN	2	QL
INSULIN LISPRO PROT & LISPRO	2	QL
INSULIN LISPRO VIAL	1	QL
LANTUS SOLOSTAR	1	QL
LANTUS U-100 VIAL	1	QL
LYUMJEV KWIKPEN	2	QL
LYUMJEV VIAL	1	QL
TOUJEO MAX SOLOSTAR	2	QL
TOUJEO SOLOSTAR	2	QL

See page 6-7 for coverage details.

Drug name	Drug tier	Requirements & limits
Diabetes - Non-insulin agents		
acarbose oral	1	
ACTOPLUS MET	4	QL
ALOGLIPTIN BENZOATE	2	QL
BAQSIMI ONE PACK	2	QL
BAQSIMI TWO PACK	2	QL
BYDUREON BCISE AUTOINJECTOR SUBCUTANEOUS AUTO-INJECTOR 2 MG/0.85ML	2	
BYETTA 10 MCG PEN SUBCUTANEOUS SOLUTION PEN-INJECTOR 10 MCG/0.04ML	2	
BYETTA 5 MCG PEN SUBCUTANEOUS SOLUTION PEN-INJECTOR 5 MCG/0.02ML	2	
CYCLOSET	3	
glimepiride oral tablet 1 mg, 2 mg, 4 mg	1	
glipizide er	1	
glipizide oral tablet 10 mg, 5 mg	1	
glipizide xl oral tablet extended release 24 hour 10 mg, 2.5 mg, 5 mg	1	
glipizide-metformin hcl	1	
GLUCAGON EMERGENCY KIT	2	(manufactured by Fresenius)
glucagon emergency kit injection solution reconstituted 1 mg	1	
GLUCOTROL XL	4	
glyburide	1	
glyburide-metformin	1	
GLYXAMBI	2	QL
GVOKE HYPOPEN 1-PACK	2	QL
GVOKE HYPOPEN 2-PACK	2	QL
GVOKE KIT	2	QL
GVOKE PFS	2	QL
JARDIANCE	2	QL
JENTADUETO	2	QL
JENTADUETO XR	2	QL
liraglutide subcutaneous solution pen-injector 18 mg/3ml	1	PA; QL

Drug name	Drug tier	Requirements & limits
metformin hcl er	1	
metformin hcl oral tablet 1000 mg, 500 mg, 850 mg	1	
MOUNJARO	2	PA; QL
nateglinide	1	
OZEMPIC	2	PA; QL
pioglitazone hcl	1	QL
pioglitazone hcl-metformin hcl	1	QL
repaglinide	1	QL
RYBELSUS	2	PA; QL
saxagliptin hcl	1	QL
saxagliptin-metformin er	1	QL
SOLIQUA	2	QL
SYMLINPEN 120 SUBCUTANEOUS SOLUTION PEN-INJECTOR 2700 MCG/2.7ML	3	QL
SYMLINPEN 60 SUBCUTANEOUS SOLUTION PEN-INJECTOR 1500 MCG/1.5ML	3	QL
SYNJARDY	2	QL
SYNJARDY XR	2	QL
TRADJENTA	2	QL
TRIJARDY XR	2	QL
TRULICITY	2	PA; QL
Drugs for blood disorders		
ADVATE	2	SP
ADYNOVATE	2	SP
AFSTYLA	2	SP
ALPROLIX	3	SP
ALTUVIIIO	2	SP
ALVAIZ	4	PA; SP
ARANESP (ALBUMIN FREE)	2	QL; SP
BENEFIX	2	SP
DOPTelet	4	PA; QL; SP
ELOCTATE	2	SP
eltrombopag olamine oral tablet	1	PA; SP
FABHALTA	2	PA; QL; SP
HEMLIBRA	2	PA; SP

See page 6-7 for coverage details.

Drug name	Drug tier	Requirements & limits
HYMPAVZI SUBCUTANEOUS SOLUTION AUTO-INJECTOR 150 MG/ML	2	PA; QL; SP
IDELVION	3	SP
KOGENATE FS INTRAVENOUS KIT 1000 UNIT, 2000 UNIT, 250 UNIT, 3000 UNIT, 500 UNIT	2	SP
KOVALTRY	2	SP
NEULASTA	2	SP
NIVESTYM	2	SP
NOVOEIGHT	2	SP
NUWIQ	2	SP
RECOMBINATE	2	SP
RETACRIT	2	QL; SP
tranexamic acid oral	1	QL
UDENYCA	2	SP
VOYDEYA	2	PA; QL; SP
WILATE	2	SP
ZARXIO	2	SP

Drugs for sexual dysfunction

ADDYI	4	PA; QL
IMVEXXY MAINTENANCE PACK	2	QL
IMVEXXY STARTER PACK	2	QL
INTRAROSA	4	PA; QL
OSPHENA	3	PA; QL
sildenafil citrate oral tablet 100 mg, 25 mg, 50 mg	1	QL
tadalafil oral	1	QL
varденаfil hcl oral tablet	1	QL
VYLEESI	4	PA; QL

Electrolytes / Vitamins

CARNITOR ORAL SOLUTION	4	
CARNITOR SF	4	
CO-NATAL FA	2	
cyanocobalamin injection solution 1000 mcg/ml	1	
CYANOCOBALAMIN INJECTION SOLUTION 2000 MCG/ML	3	
cyanocobalamin nasal	1	
DENTA 5000 PLUS SENSITIVE	3	

Drug name	Drug tier	Requirements & limits
DODEX INJECTION SOLUTION 1000 MCG/ML	4	
DRISDOL	4	
ergocalciferol oral capsule	1	
FLOTREX ORAL TABLET CHEWABLE 1 MG	3	
FLUORIMAX 5000 SENSITIVE	3	
folic acid oral tablet 1 mg	1	
K-PHOS-NEUTRAL	2	
K-TAB ORAL TABLET EXTENDED RELEASE 20 MEQ	3	
klor-con	1	
klor-con 10	1	
klor-con m10	1	
klor-con m15	1	
klor-con m20	1	
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 0.5 mg oral	1	
Multivitamin w/fluoride tablet chewable 1 mg oral	1	
Multivitamin/fluoride oral tablet chewable	1	
NASCOBAL	3	
NEONATAL COMPLETE	3	
NEONATAL PLUS	3	
NIVA-PLUS	3	
ONE VITE WOMENS PLUS	3	
ORACIT	2	
ORAL CITRATE ORAL SOLUTION 490-640 MG/5ML	2	
PHOSPHA 250 NEUTRAL	2	
phospho-trin 250 neutral	1	
phosphorous	1	
pnv 27-ca/fe/fa	1	
potassium chloride crys er	1	

See page 6-7 for coverage details.

Drug name	Drug tier	Requirements & limits
potassium chloride er	1	
potassium chloride oral packet 20 meq	1	
potassium chloride oral solution	1	
potassium citrate er	1	
prenatal oral tablet 27-1 mg	1	
prenatal plus	1	
prenatal plus vitamin/mineral	1	
PREVIDENT 5000 ENAMEL PROTECT	3	
PREVIDENT 5000 SENSITIVE	3	
QUFLORA PEDIATRIC ORAL TABLET CHEWABLE 0.25 MG, 0.5 MG, 1 MG	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 1.1 (0.5 f) mg/ml	1	H
sodium fluoride oral tablet chewable	1	H
tolvaptan oral tablet therapy pack	1	PA; QL; SP
tri-vite/fluoride	1	
TRICARE ORAL TABLET	3	
TRINATAL RX 1	3	
TRINATE	3	
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	

Drug name	Drug tier	Requirements & limits
VITATHELY WITH GINGER	3	
Gastrointestinal agents - Drugs for acid reflux and ulcer		
cimetidine oral	1	
CYTOTEC	4	
esomeprazole magnesium oral packet	1	PA; ST; QL
famotidine oral suspension reconstituted	1	
lansoprazole oral tablet delayed release dispersible	1	PA; ST; QL
misoprostol oral	1	
omeprazole oral capsule delayed release	1	
pantoprazole sodium oral tablet delayed release	1	
PYLERA	4	QL
rabeprazole sodium oral tablet delayed release	1	QL
sucralfate oral	1	
VOQUEZNA	4	PA; QL
VOQUEZNA DUAL PAK	4	ST; QL
VOQUEZNA TRIPLE PAK	4	ST; QL
Gastrointestinal agents - Drugs for bowel, intestine and stomach conditions		
ANASPAZ ORAL TABLET DISPERSIBLE 0.125 MG	2	
BYLVAY	4	PA; QL; SP
BYLVAY (PELLETS)	4	PA; QL; SP
chlordiazepoxide-clidinium	1	
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	
gavilyte-c	1	H
gavilyte-g	1	QL; H
gavilyte-n with flavor pack	1	QL; H
generlac	1	

See page 6-7 for coverage details.

Drug name	Drug tier	Requirements & limits
glycopyrrolate oral tablet 1 mg, 2 mg	1	
GOLYTELY	1	QL; H
hyoscyamine sulfate er	1	
hyoscyamine sulfate oral tablet	1	
hyoscyamine sulfate oral tablet dispersible	1	
hyoscyamine sulfate sl	1	
hyoscyamine sulfate sublingual	1	
IQIRVO	4	PA; ST; QL; SP
lactulose encephalopathy	1	
lactulose oral solution	1	
LEVBID	4	
LEVSIN	4	
LEVSIN/SL	4	
LINZESS	2	PA; QL
LIVDELZI	4	PA; ST; QL; SP
LOMOTIL	4	
lubiprostone	1	PA; QL
MOVIPREP	4	QL
na sulfate-k sulfate-mg sulf	1	QL
NULEV	4	
OSCIMIN	4	
peg 3350-kcl-na bicarb-nacl	1	QL; H
peg-3350/electrolytes	1	QL; H
peg-3350/electrolytes/ascorbic	1	QL
peg-kcl-nacl-nasulf-na asc-c	1	QL
prucalopride succinate	1	PA; QL
REZDIFFRA	4	PA; QL
SUFLAVE	3	QL
SUPREP BOWEL PREP KIT	3	QL
SUTAB	3	QL
SYMPROIC	2	PA; QL
ursodiol oral capsule 300 mg	1	
ursodiol oral tablet	1	
VIBERZI	3	PA; QL
Genetic or enzyme disorder - Drugs for replacement, modification, treatment		
ATTRUBY	2	PA; QL; SP
CARNITOR ORAL TABLET	4	

Drug name	Drug tier	Requirements & limits
CREON	2	
DEPEN TITRATABS	2	SP
EVRYSDI	2	PA; QL; SP
levocarnitine oral tablet	1	
ORFADIN ORAL CAPSULE	1	PA; SP
ORFADIN ORAL SUSPENSION	2	PA; SP
PANCREAZE	3	ST
PERTZYE	4	ST
STRENSIQ	2	PA; QL; SP
SUCRAID	2	PA; SP
VYNDAMAX	2	PA; QL; SP
YUWIWEL	4	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	
ELMIRON	4	ST
FILSPARI	4	PA; QL; SP
mirabegron er oral tablet extended release 24 hour	1	ST
oxybutynin chloride er	1	
oxybutynin chloride oral	1	
phenazo oral tablet 200 mg	1	
phenazopyridine hcl oral tablet 100 mg, 200 mg	1	
PYRIDIUM	3	
sevelamer carbonate oral tablet	1	
solifenacin succinate	1	
tolterodine tartrate	1	
tropium chloride	1	
VANRAFIA	4	PA; QL; SP
VELPHORO	4	ST
VOYXACT	4	PA; QL; SP
Genitourinary agents - Drugs for prostate conditions		
alfuzosin hcl er	1	
dutasteride oral	1	
finasteride oral tablet 5 mg	1	
silodosin	1	

See page 6-7 for coverage details.

Drug name	Drug tier	Requirements & limits
tamsulosin hcl	1	
terazosin hcl	1	
TEZRULY	4	PA
Hormonal agents - Hormone replacement and birth control		
abigale	1	
abigale lo	1	
ACTIVEVELLA	4	
afirmelle	1	H
ALORA	3	QL
altavera	1	H
alyacen 1/35	1	H
alyacen 7/7/7	1	H
ANNOVERA	3	QL
apri	1	H
aranelle	1	H
ashlyna	1	H
aubra eq	1	H
aurovela 1.5/30	1	H
aurovela 1/20	1	H
aurovela 24 fe	1	H
aurovela fe 1.5/30	1	H
aurovela fe 1/20	1	H
aviane	1	H
ayuna	1	H
azurette	1	H
balziva	1	H
BIJUVA	3	
blisovi 24 fe	1	H
blisovi fe 1.5/30	1	H
blisovi fe 1/20	1	H
briellyn	1	H
camila	1	H
camrese	1	H
camrese lo	1	H
charlotte 24 fe	1	H
chateal eq	1	H
CLIMARA PRO	3	QL
COMBIPATCH	3	QL

Drug name	Drug tier	Requirements & limits
COVARYX	2	
COVARYX HS	3	
cryselle	1	H
cryselle-28	1	H
cyred eq	1	H
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	1	QL
drospiren-eth estrad-levomefol oral tablet 3-0.03-0.451 mg	1	H
drospirenone-ethinyl estradiol	1	H
DUAVEE	3	QL
EEMT	2	
EEMT HS	3	
ELESTRIN	3	
elinest	1	H
ELLA	1	QL; H
eluryng	1	H
emzahh	1	H
enilloring	1	H
enpresse-28 oral tablet 50-30/75-40/ 125-30 mcg	1	H
enskyce	1	H
errin	1	H
est estrogens-methyltest	1	
est estrogens-methyltest ds	1	
est estrogens-methyltest hs	1	
estarylla	1	H
estradiol oral	1	
estradiol patch twice weekly	1	QL

See page 6-7 for coverage details.

Drug name	Drug tier	Requirements & limits
estradiol transdermal gel 0.25 mg/0.25gm, 0.5 mg/0.5gm, 0.75 mg/0.75gm, 1 mg/gm, 1.25 mg/1.25gm	1	
estradiol transdermal gel 0.75 mg/1.25 gm (0.06%)	1	QL
estradiol transdermal patch weekly	1	(generic for Climara); QL
estradiol vaginal	1	
estradiol valerate intramuscular	1	
estradiol-norethindrone acet	1	
estratest f.s. oral tablet 1.25-2.5 mg	1	
ESTRATEST H.S.	3	
ESTRING	2	QL
estrogens conjugated	1	
ethynodiol diac-eth estradiol oral tablet 1-35 mg-mcg, 1-50 mg-mcg	1	H
etonogestrel-ethinyl estradiol	1	H
EVAMIST	2	
falmina	1	H
feirza 1.5/30	1	H
feirza 1/20	1	H
FEMRING	3	QL
finzala	1	H
fyavolv	1	
gallifrey	1	
hailey 1.5/30	1	H
hailey 24 fe	1	H
hailey fe 1.5/30	1	H
hailey fe 1/20	1	H
haloette vaginal ring 0.12-0.015 mg/24hr	1	H
heather	1	H
iclevia	1	H
incassia	1	H
introvale	1	H
isibloom	1	H
jaimiess	1	H
jasmiel	1	H
jencycla	1	H

Drug name	Drug tier	Requirements & limits
jinteli	1	
jolessa	1	H
juleber	1	H
junel 1.5/30	1	H
junel 1/20	1	H
junel fe 1.5/30	1	H
junel fe 1/20	1	H
junel fe 24	1	H
kalliga	1	H
kariva	1	H
kelnor 1/35	1	H
kelnor 1/50 oral tablet 1-50 mg-mcg	1	H
kurvelo	1	H
larin 1.5/30	1	H
larin 1/20	1	H
larin 24 fe	1	H
larin fe 1.5/30	1	H
larin fe 1/20	1	H
leena oral tablet 0.5/1/0.5-35 mg-mcg	1	H
lessina	1	H
levonest	1	H
levonorg-eth estrad triphasic	1	H
levonorgest-eth est & eth est oral tablet 42-21-21-7 days	1	H
levonorgest-eth estrad 91-day	1	H
levonorgestrel-ethinyl estrad oral tablet 0.1-20 mg-mcg, 0.15-30 mg-mcg	1	H
levora 0.15/30 (28)	1	H
LO LOESTRIN FE	1	H
lo-zumandimine	1	H
lojaimiess	1	H
loryna	1	H
low-ogestrel	1	H
luizza 1.5/30	1	H
luizza 1/20	1	H
luteria	1	H
lyleq	1	H

See page 6-7 for coverage details.

Drug name	Drug tier	Requirements & limits
lyllana	1	QL
lyza	1	H
marlissa	1	H
medroxyprogesterone acetate intramuscular	1	QL; H
medroxyprogesterone acetate oral	1	
megestrol acetate oral tablet	1	
meleya	1	H
MENOSTAR	3	QL
mibelas 24 fe	1	H
microgestin 1.5/30	1	H
microgestin 1/20	1	H
microgestin fe 1.5/30	1	H
microgestin fe 1/20	1	H
mili	1	H
mimvey	1	
mono-lynyah	1	H
MYFEMBREE	2	PA; QL
NATAZIA	1	
necon 0.5/35 (28)	1	H
nikki	1	H
nora-be	1	H
norelgestromin-eth estradiol	1	H
norethin ace-eth estrad-fe oral tablet 1-20 mg-mcg, 1.5-30 mg-mcg	1	H
norethin ace-eth estrad-fe oral tablet chewable	1	H
norethindron-ethinyl estrad-fe oral tablet 1-20/1-30/1-35 mg-mcg	1	H
norethindrone acet-ethinyl est	1	H
norethindrone acetate oral	1	
norethindrone oral	1	H
norethindrone-eth estradiol	1	
norgestimate-eth estradiol oral tablet 0.25-35 mg-mcg	1	H
norgestimate-ethinyl estradiol triphasic	1	H
norlyroc	1	H
nortrel 0.5/35 (28)	1	H

Drug name	Drug tier	Requirements & limits
nortrel 1/35 (21)	1	H
nortrel 1/35 (28)	1	H
nortrel 7/7/7	1	H
nylia 1/35	1	H
nylia 7/7/7	1	H
ocella oral tablet 3-0.03 mg	1	H
orquidea	1	H
philith	1	H
pimtrea	1	H
portia-28	1	H
PREMARIN ORAL	3	
PREMARIN VAGINAL	3	
PREMPHASE	3	
PREMPRO	3	
progesterone intramuscular	1	
progesterone oral	1	
PROVERA	4	
reclipsen	1	H
rivelsa	1	H
rosyrah	1	H
setlakin	1	H
sharobel	1	H
simliya	1	H
simpesse	1	H
SLYND	4	PA; ST
sprintec 28	1	H
sronyx	1	H
syeda	1	H
tarina 24 fe	1	H
tarina fe 1/20 eq	1	H
tilia fe	1	H
tri-estarylla	1	H
tri-legest fe	1	H
tri-lynyah	1	H
tri-lo-estarylla	1	H
tri-lo-marzia	1	H
tri-lo-mili	1	H
tri-lo-sprintec	1	H
tri-mili	1	H

See page 6-7 for coverage details.

Drug name	Drug tier	Requirements & limits
tri-sprintec	1	H
tri-vylibra	1	H
tri-vylibra lo	1	H
trivora (28)	1	H
turqoz	1	H
TYBLUME	1	H
tydemy	1	H
valtya 1/35	1	H
valtya 1/50	1	H
velivet	1	H
vestura	1	H
vienva	1	H
violele	1	H
volnea	1	H
vyfemla	1	H
vylibra	1	H
wera	1	H
xarah fe	1	H
xulane	1	H
YASMIN 28	3	
YAZ	3	
yuvaferm	1	
zafemy	1	H
zovia 1/35 (28)	1	H
zumandimine	1	H
Hormonal agents - Oral steroids		
CORTEF	4	
dexamethasone intensol	1	
dexamethasone oral elixir	1	
dexamethasone oral solution	1	
dexamethasone oral tablet	1	
fludrocortisone acetate oral	1	
hydrocortisone oral	1	
MEDROL ORAL TABLET 16 MG, 4 MG, 8 MG	4	
MEDROL ORAL TABLET 2 MG	2	
MEDROL ORAL TABLET THERAPY PACK	4	

Drug name	Drug tier	Requirements & limits
methylprednisolone oral	1	
PEDIAPRED ORAL SOLUTION 5 MG/5ML	2	
prednisolone oral solution	1	
prednisolone sodium phosphate oral solution 15 mg/5ml	1	
prednisone oral solution	1	
prednisone oral tablet	1	
prednisone oral tablet therapy pack	1	
Hormonal agents - Other		
cabergoline	1	
desmopressin acetate oral	1	
desmopressin acetate spray	1	
megestrol acetate oral suspension 40 mg/ml	1	
NGENLA	4	PA; QL; SP
NORDITROPIN FLEXPPO	2	PA; QL; SP
OMNITROPE	2	PA; QL; SP
ORIAHNN	2	PA; QL
ORILISSA	2	PA; QL
SKYTROFA	4	PA; QL; SP
SOGROYA	4	PA; QL; SP
Hormonal agents - Testosterone replacement		
DEPO-TESTOSTERONE INTRAMUSCULAR SOLUTION 100 MG/ML	3	
DEPO-TESTOSTERONE INTRAMUSCULAR SOLUTION 200 MG/ML	4	
KYZATREX	4	PA; QL
TESTIM	1	PA; QL
testosterone cypionate intramuscular	1	
testosterone enanthate intramuscular	1	
testosterone gel 20.25 mg/act (1.62%) transdermal	1	PA; QL
testosterone transdermal gel 1.62 %	1	PA; QL (generic Androgel Pump)

See page 6-7 for coverage details.

Drug name	Drug tier	Requirements & limits
Hormonal agents - Thyroid		
ARMOUR THYROID	3	
ERMEZA ORAL SOLUTION 150 MCG/5ML	2	PA
euthyrox oral tablet 100 mcg, 112 mcg, 125 mcg, 137 mcg, 150 mcg, 175 mcg, 200 mcg, 25 mcg, 50 mcg, 75 mcg, 88 mcg	1	
EVEXITHROID ORAL TABLET 120 MG, 15 MG, 180 MG, 30 MG, 60 MG, 90 MG	3	
levo-t	1	
levothyroxine sodium oral tablet	1	
levoxyl	1	
liomny	1	
liothyronine sodium oral	1	
methimazole oral	1	
NIVA THYROID	3	
np thyroid	1	
propylthiouracil oral	1	
RENTHYROID ORAL TABLET 120 MG, 15 MG, 30 MG, 60 MG, 90 MG	3	
thyroid oral	1	
TIROSINT-SOL	2	PA
unithroid	1	
Immunological agents - Drugs for immune system stimulation or suppression		
ACTEMRA ACTPEN	3	PA; ST; QL; SP
ACTEMRA SUBCUTANEOUS	3	PA; ST; QL; SP
ADALIMUMAB-AATY (1 PEN) SUBCUTANEOUS AUTO-INJECTOR KIT 40 MG/0.4ML	2	PA; (Manufactured by Celltrion); QL; SP
ADALIMUMAB-AATY (1 PEN) SUBCUTANEOUS AUTO-INJECTOR KIT 80 MG/0.8ML	2	PA; (Manufactured by Celltrion); SP
ADALIMUMAB-AATY (2 PEN)	2	PA; (Manufactured by Celltrion); QL; SP

Drug name	Drug tier	Requirements & limits
ADALIMUMAB-AATY (2 SYRINGE)	2	PA; (Manufactured by Celltrion); QL; SP
ADALIMUMAB-AATY CD/UC/HS START	2	PA; (Manufactured by Celltrion); SP
ADALIMUMAB-ADAZ	2	PA; (manufactured by Sandoz); QL; SP
AMJEVITA	2	PA; QL; SP
ANDEMBRY	2	PA; QL; SP
AVTOZMA SUBCUTANEOUS	3	PA; ST; QL; SP
AZASAN	4	
azathioprine oral	1	
BENLYSTA SUBCUTANEOUS SOLUTION AUTO-INJECTOR	2	PA; QL; SP
BIMZELX	3	PA; ST; QL; SP
CIMZIA	2	PA; QL; SP
COSENTYX	2	PA; QL; SP
cyclosporine modified oral capsule	1	
EMPAVELI	2	PA; QL; SP
ENBREL	2	PA; QL; SP
ENBREL MINI	2	PA; QL; SP
ENBREL SURECLICK	2	PA; QL; SP
ENTYVIO PEN	2	PA; (SUBCUTANEOUS); QL; SP
everolimus oral tablet 0.25 mg, 0.5 mg, 0.75 mg, 1 mg	1	SP
gengraf	1	
HAEGARDA	2	PA; QL; SP
HYFTOR	4	PA; QL
JYLAMVO	4	PA
KEVZARA	4	PA; ST; QL; SP
leflunomide oral	1	
LITFULO	3	PA; QL; SP
LUPKYNIS	4	PA; QL; SP
methotrexate sodium (pf)	1	

See page 6-7 for coverage details.

Drug name	Drug tier	Requirements & limits
methotrexate sodium injection solution	1	
methotrexate sodium oral	1	
mycophenolate mofetil oral capsule	1	
mycophenolate mofetil oral tablet	1	
mycophenolate sodium	1	
mycophenolic acid	1	
MYHIBBIN	1	
OLUMIANT	3	PA; ST; QL; SP
OMVOH SUBCUTANEOUS	2	PA; QL; SP
ORENCIA CLICKJECT	3	PA; ST; QL; SP
ORENCIA SUBCUTANEOUS	3	PA; ST; QL; SP
OTEZLA	2	PA; QL; SP
OTEZLA XR	2	PA; QL; SP
PROGRAF ORAL CAPSULE	4	
RASUVO	2	QL
RINVOQ	2	PA; QL; SP
RINVOQ LQ	2	PA; QL; SP
RUCONEST	4	PA; QL; SP
SIMPONI	2	PA; QL; SP
sirolimus oral tablet	1	
SKYRIZI	2	PA; QL; SP
tacrolimus oral	1	
TAKHZYRO	2	PA; QL; SP
TAKHZYRO SUBCUTANEOUS SOLUTION 300 MG/2ML	2	PA; QL; SP
TDVAX INTRAMUSCULAR SUSPENSION 2-2 LF/0.5ML	3	H
TENIVAC	3	H
tofacitinib citrate er	1	PA; QL; SP
tofacitinib citrate oral tablet	1	PA; QL; SP
TREXALL	2	
VAQTA INTRAMUSCULAR SUSPENSION	2	H
VYVGART HYTRULO SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	4	PA; QL; SP
XOLAIR	2	PA; QL; SP
YESINTEK	2	PA; QL; SP

Drug name	Drug tier	Requirements & limits
Immunological agents - Drugs for vaccination		
ABRYVO	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
COMIRNATY 5-11 YEARS	3	H
ENGRIX-B	2	H
FLUAD	3	H
FLUARIX INTRAMUSCULAR SUSPENSION PREFILLED SYRINGE 0.5 ML	3	H
FLUCELVAX INTRAMUSCULAR SUSPENSION PREFILLED SYRINGE	3	H
FLULAVAL INTRAMUSCULAR SUSPENSION PREFILLED SYRINGE 0.5 ML	3	H
FLUZONE	3	H
FLUZONE HIGH-DOSE	3	H
GARDASIL 9 INTRAMUSCULAR SUSPENSION PREFILLED SYRINGE	3	H
HAVRIX	3	H
HEPLISAV-B	3	H
IPOL	2	H
M-M-R II	2	H
MENQUADFI	3	H
MENVEO	3	H
MNEXSPIKE	3	H
PREVNAR 20	3	H
PRIORIX	3	H
RECOMBIVAX HB	2	H
SHINGRIX INTRAMUSCULAR SUSPENSION RECONSTITUTED 50 MCG/0.5ML	3	H
SPIKEVAX	3	H
SPIKEVAX 6M-11Y	3	H

See page 6-7 for coverage details.

Drug name	Drug tier	Requirements & limits
TWINRIX	3	H
VAQTA INTRAMUSCULAR SUSPENSION PREFILLED SYRINGE	2	H
VARIVAX	3	H
Infertility agents		
CETROTIDE	4	PA; ST; QL; SP
CHORIONIC GONADOTROPIN INTRAMUSCULAR	3	SP
clomid	1	
clomiphene citrate oral	1	
ENDOMETRIN	2	
FOLLISTIM AQ	2	QL; SP
FYREMADEL	3	QL; SP
ganirelix acetate solution prefilled syringe 250 mcg/0.5ml subcutaneous	1	(manufactured by Merck/ Organon); QL; SP
ganirelix acetate solution prefilled syringe 250 mcg/0.5ml subcutaneous	1	QL; SP
GONAL-F	4	ST; SP
GONAL-F RFF REDIJECT	4	ST; SP
GONAL-F RFF SUBCUTANEOUS SOLUTION RECONSTITUTED 75 UNIT	4	ST; SP
MENOPUR	4	QL; SP
milophene	1	
NOVAREL	3	SP
OVIDREL	4	SP
PREGNYL	3	SP
progesterone vaginal	1	
Inflammatory bowel disease agents		
ANALPRAM HC EXTERNAL CREAM	4	
ANALPRAM-HC EXTERNAL CREAM 1-1 %	4	
ANUCORT-HC	2	
ANUSOL-HC EXTERNAL	4	
APRISO	1	
AZULFIDINE	4	
AZULFIDINE EN-TABS	4	
balsalazide disodium	1	

Drug name	Drug tier	Requirements & limits
budesonide oral	1	
CORTIFOAM	2	
DIPENTUM	3	
EOHILIA	4	PA; QL
HEMMOREX-HC RECTAL SUPPOSITORY 25 MG	3	
hydrocort-pramoxine (perianal)	1	
hydrocortisone (perianal) external cream 2.5 %	1	
hydrocortisone ace-pramoxine external cream 1-1 %	1	
hydrocortisone acetate rectal	1	
mesalamine oral capsule delayed release 400 mg	1	
mesalamine oral tablet delayed release 1.2 gm	1	
mesalamine rectal	1	QL
procto-med hc	1	
PROCTOFOAM HC	2	
PROCTOSOL HC	4	
PROCTOZONE-HC	4	
SFROWASA RECTAL ENEMA 4 GM/60ML	4	
sulfasalazine oral	1	
UCERIS ORAL	1	
Metabolic bone disease agents - Drugs for osteoporosis		
alendronate sodium oral tablet	1	
BONSITY	3	PA; SP
FOSAMAX	4	
ibandronate sodium oral	1	
raloxifene hcl	1	H-PA
risedronate sodium oral tablet	1	
TERIPARATIDE SOLUTION PEN-INJECTOR 560 MCG/2.24ML SUBCUTANEOUS	3	PA; SP
TYMLOS	3	PA; SP
Metabolic bone disease agents - Other		
calcitriol oral capsule	1	
cinacalcet hcl	1	
ROCALtrol ORAL CAPSULE	4	

See page 6-7 for coverage details.

Drug name	Drug tier	Requirements & limits
YORVIPATH	4	PA; QL; SP
Ophthalmic agents - Drugs for eye allergy, infection and inflammation		
ACULAR	4	
ACULAR LS	4	
ALREX	4	QL
AZASITE	3	
azelastine hcl ophthalmic	1	
bacitracin-polymyxin b	1	
BESIVANCE	3	
bromfenac sodium (once-daily)	1	
ciprofloxacin hcl ophthalmic	1	
dexamethasone sodium phosphate ophthalmic	1	
diclofenac sodium ophthalmic	1	
epinastine hcl	1	QL
erythromycin ophthalmic	1	H-PA
EYSUVIS	4	QL
FLAREX	2	
fluorometholone	1	
FML FORTE	3	
FML LIQUIFILM	4	
gatifloxacin ophthalmic	1	
gentamicin sulfate ophthalmic	1	QL
INVELTYS	3	
ketorolac tromethamine ophthalmic	1	
LOTEMAX OPHTHALMIC OINTMENT	3	
LOTEMAX SM	3	QL
loteprednol etabonate ophthalmic suspension	1	QL
MAXITROL	4	
moxifloxacin hcl (2x day)	1	
moxifloxacin hcl ophthalmic	1	
neomycin-polymyxin-dexameth	1	
NEVANAC	4	
OCUFLOX	4	
ofloxacin ophthalmic	1	

Drug name	Drug tier	Requirements & limits
POLYCIN OPHTHALMIC OINTMENT 500-10000 UNIT/GM	3	
polymyxin b-trimethoprim	1	
PRED MILD	3	
prednisolone acetate ophthalmic	1	
sulfacetamide sodium ophthalmic	1	
TOBRADEX	3	
tobramycin ophthalmic	1	QL
tobramycin-dexamethasone	1	
XDEMZY	4	PA; QL
ZYLET	3	
Ophthalmic agents - Drugs for glaucoma		
ALPHAGAN P OPHTHALMIC SOLUTION 0.1 %	1	QL
ALPHAGAN P OPHTHALMIC SOLUTION 0.15 %	4	QL
BETIMOL OPHTHALMIC SOLUTION 0.25 %	2	QL
BETIMOL OPHTHALMIC SOLUTION 0.5 %	4	QL
bimatoprost ophthalmic solution 0.03 %	1	QL
bimatoprost solution 0.01 % ophthalmic	1	QL
brimonidine tartrate ophthalmic solution 0.15 %	1	QL
brimonidine tartrate ophthalmic solution 0.2 %	1	
brinzolamide	1	QL
COMBIGAN	1	QL
COSOPT	4	
dorzolamide hcl solution 2 % ophthalmic	1	
DORZOLAMIDE HCL SOLUTION 2 % OPHTHALMIC	4	
dorzolamide hcl-timolol mal	1	
ISTALOL	4	
latanoprost ophthalmic	1	
RHOPRESSA	3	QL
ROCKLATAN	3	QL

See page 6-7 for coverage details.

Drug name	Drug tier	Requirements & limits
tafluprost (pf)	1	ST; QL
timolol maleate (once-daily)	1	
timolol maleate ocudose	1	
timolol maleate ophthalmic	1	
timolol maleate pf	1	
TIMOPTIC OCUDOSE	4	
travoprost (bak free)	1	QL
ZIOPTAN	3	ST; QL
Ophthalmic agents - Drugs for miscellaneous eye conditions		
atropine sulfate ophthalmic solution 1 %	1	
cromolyn sodium ophthalmic	1	
CYCLOGYL	4	
cyclopentolate hcl ophthalmic	1	
difluprednate	1	
MIEBO	4	PA; QL
RESTASIS	1	PA; QL
TRYPTYR	4	PA; QL
TYRVAYA	4	PA; QL
VERKAZIA	4	PA; QL
XIIDRA	4	PA; QL
Otic agents - Drugs for ear conditions		
acetic acid otic	1	
ciprofloxacin-dexamethasone	1	
DERMOTIC	4	
flac otic oil 0.01 %	1	
fluocinolone acetone otic	1	
hydrocortisone-acetic acid	1	
neomycin-polymyxin-hc otic	1	
ofloxacin otic	1	
Respiratory - Drugs for anaphylaxis		
AUVI-Q	2	QL
epinephrine solution auto-injector	1	QL
NEFFY	4	QL
Respiratory tract / Pulmonary agents - Drugs for allergies, cough, cold		
azelastine hcl nasal solution 0.1 %, 137 mcg/spray	1	

Drug name	Drug tier	Requirements & limits
benzonatate oral capsule 100 mg, 200 mg	1	
BROMFED DM ORAL SYRUP 2-30-10 MG/5ML	3	
carbinoxamine maleate oral tablet 4 mg	1	
cyproheptadine hcl oral syrup 2 mg/5ml	1	
cyproheptadine hcl oral tablet	1	
flunisolide nasal	1	
fluticasone propionate nasal	1	
g tussin ac	1	
guaifenesin-codeine	1	
hydrocod poli-chlorphe poli er	1	PA; QL
hydrocodone bit-homatrop mbr oral solution	1	PA; QL
hydromet oral solution 5-1.5 mg/5ml	1	PA; QL
HYPERSAL	2	
ipratropium bromide nasal	1	
levocetirizine dihydrochloride oral	1	
maxi-tuss ac	1	
mometasone furoate nasal	1	QL
NEBUSAL INHALATION NEBULIZATION SOLUTION 3 %	3	
ODACTRA	4	PA; QL
olopatadine hcl nasal	1	
promethazine-codeine	1	PA; QL
promethazine-dm	1	
pseudoephedrine-bromphen-dm	1	
PULMOSAL	2	
RHAPSIDO	2	PA; QL; SP
sodium chloride inhalation	1	
Respiratory tract / Pulmonary agents - Drugs for asthma and COPD		
ACCOLATE ORAL TABLET 10 MG, 20 MG	4	
ADVAIR HFA	3	QL; RS
AEROCHAMBER HOLDING CHAMBER	2	

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Drug name	Drug tier	Requirements & limits
AEROCHAMBER PLS FLOVU MTHPIECE	2	
AEROCHAMBER PLUS FLO-VU INTERM	2	
AEROCHAMBER PLUS FLO-VU LARGE DEVICE	2	
AEROCHAMBER PLUS FLO-VU MEDIUM DEVICE	2	
AEROCHAMBER PLUS FLO-VU SMALL DEVICE	2	
AEROCHAMBER2GO ANTI-STATIC	2	
AIRSUPRA	3	QL
albuterol sulfate hfa aerosol solution 108 (90 base) mcg/act inhalation	1	QL
albuterol sulfate inhalation nebulization solution (2.5 mg/3ml) 0.083%, 0.63 mg/3ml, 1.25 mg/3ml, 2.5 mg/0.5ml	1	
albuterol sulfate nebulization solution (5 mg/ml) 0.5% inhalation	1	
ALBUTEROL SULFATE NEBULIZATION SOLUTION (5 MG/ML) 0.5% INHALATION	3	
albuterol sulfate oral syrup 2 mg/5ml	1	
ANORO ELLIPTA	3	QL
ARNUITY ELLIPTA	1	QL
BEVESPI AEROSPHERE	2	QL
BREATHE COMFORT CHAMBER/ADULT	2	
BREATHE COMFORT CHAMBER/CHILD	2	
BREO ELLIPTA	3	QL; RS
BREZTRI AEROSPHERE INHALATION AEROSOL 160-18-4.8 MCG/ACT	3	RS
BREZTRI AEROSPHERE INHALATION AEROSOL 160-9-4.8 MCG/ACT	3	QL; RS
budesonide inhalation	1	QL
COMBIVENT RESPIMAT	3	QL

Drug name	Drug tier	Requirements & limits
EASIVENT	2	
EASIVENT MASK LARGE	2	
EASIVENT MASK MEDIUM	2	
EASIVENT MASK SMALL	2	
FASENRA PEN	4	PA; QL; SP
FLEXICHAMBER	2	
fluticasone-salmeterol inhalation aerosol powder breath activated 100-50 mcg/act, 250-50 mcg/act, 500-50 mcg/act	1	QL
FLUTICASONE-SALMETEROL INHALATION AEROSOL POWDER BREATH ACTIVATED 113-14 MCG/ACT, 232-14 MCG/ACT, 55-14 MCG/ACT	3	QL
INSPIREASE	2	
ipratropium bromide hfa	1	QL
ipratropium bromide inhalation	1	
ipratropium-albuterol	1	
levalbuterol hcl inhalation	1	QL
LEVALBUTEROL HFA INHALATION AEROSOL 45 MCG/ACT	3	QL
MICROCHAMBER	2	
montelukast sodium oral	1	
NUCALA	4	PA; QL; SP
PERFOROMIST	4	QL
PROCHAMBER VHC	2	
QVAR REDIHALER	1	QL
roflumilast	1	QL
SEREVENT DISKUS	2	QL
SINGULAIR ORAL PACKET	3	
SPIRIVA HANDIHALER	1	QL
SPIRIVA RESPIMAT	2	QL
STIOLTO RESPIMAT	2	QL
STRIVERDI RESPIMAT	2	QL
SYMBICORT	1	QL; RS
TEZSPIRE SUBCUTANEOUS SOLUTION AUTO-INJECTOR	4	PA; QL; SP
TRELEGY ELLIPTA	3	QL; RS
VORTEX HOLD CHMBR/MASK/CHILD DEVICE	2	

See page 6-7 for coverage details.

Drug name	Drug tier	Requirements & limits
VORTEX HOLD CHMBR/MASK/TODDLER DEVICE	2	
VORTEX VALVE CHAMBER-PEDI MASK	2	
VORTEX VALVED HOLDING CHAMBER	2	
wixela inhub	1	QL
XOPENEX HFA	3	QL
YUPELRI	4	PA; QL
zafirlukast	1	
Respiratory tract / Pulmonary agents - Drugs for cystic fibrosis		
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TOBI PODHALER	3	PA; QL; SP
TRIKAFTA ORAL TABLET THERAPY PACK	2	PA; QL; SP
Respiratory tract / Pulmonary agents - Drugs for pulmonary fibrosis		
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alyq	1	PA; QL; SP
macitentan	1	PA; QL; SP
sildenafil citrate oral tablet 20 mg	1	QL; SP
tadalafil (pah)	1	PA; QL; SP
TADLIQ	3	PA; QL; SP
TYVASO	2	PA; QL; SP
YUTREPIA	2	PA; QL; SP
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chlorzoxazone oral tablet 500 mg	1	
cyclobenzaprine hcl oral tablet 10 mg, 5 mg	1	
metaxalone oral tablet 400 mg, 800 mg	1	
methocarbamol oral tablet 500 mg, 750 mg	1	
orphenadrine citrate er	1	

Drug name	Drug tier	Requirements & limits
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tizanidine hcl oral tablet	1	
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armodafinil	1	QL
BELSOMRA	4	QL
eszopiclone	1	
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LUMRYZ STARTER PACK	4	PA; QL; SP
modafinil oral	1	QL
ramelteon	1	QL
RESTORIL	4	
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XYWAV	4	PA; QL; SP
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EMBECTA INSULIN SYRINGE U-500	23	epinephrine solution auto-injector	37
EMBECTA PEN NEEDLE/NANO/32G X 4MM	23	epitol oral tablet 200 mg	12
EMGALITY	14	eplerenone	18
EMPAVELI	33	eq aspirin adult low dose	9
		eq aspirin low dose	9
		eq aspirin low dose	9
		eq nicotine	10
		eq nicotine mouth/throat gum 4 mg . . .	10
		eq nicotine polacrilex	10
		eq nicotine step 3	10
		ergocalciferol oral capsule	26
		ERIVEDGE	15
		ERLEADA	15
		ERMEZA ORAL SOLUTION 150 MCG/5ML	33
		errin	29
		ERYGEL EXTERNAL GEL 2 %	22
		ERYPED 200 ORAL SUSPENSION RECONSTITUTED 200 MG/5ML	11
		ERYPED 400	11
		erythromycin base oral tablet	11

erythromycin ethylsuccinate oral suspension reconstituted	11
erythromycin external	22
erythromycin ophthalmic	36
escitalopram oxalate oral solution	13
escitalopram oxalate oral tablet	13
ESGIC ORAL CAPSULE 50-325-40 MG	8
ESGIC ORAL TABLET 50-325-40 MG	8
eslicarbazepine acetate	12
esomeprazole magnesium oral packet	27
estaryl	29
est estrogens-methyltest	29
est estrogens-methyltest ds	29
est estrogens-methyltest hs	29
estradiol-norethindrone acet	30
estradiol oral	29
estradiol patch twice weekly	29
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	30
estradiol transdermal gel 0.75 mg/1.25 gm (0.06%)	30
estradiol transdermal patch weekly	30
estradiol vaginal	30
estradiol valerate intramuscular	30
estratest f.s. oral tablet 1.25-2.5 mg.	30
ESTRATEST H.S.	30
ESTRING	30
estrogens conjugated	30
eszopiclone	39
ethambutol hcl oral	14
ethosuximide oral	12
ethynodiol diac-eth estradiol oral tablet 1-35 mg-mcg, 1-50 mg-mcg	30
etodolac	9
etonogestrel-ethinyl estradiol	30
EUCRISA	22
euthyrox oral tablet 100 mcg, 112 mcg, 125 mcg, 137 mcg, 150 mcg, 175 mcg, 200 mcg, 25 mcg, 50 mcg, 75 mcg, 88 mcg	33
EVAMIST	30
everolimus oral tablet 0.25 mg, 0.5 mg, 0.75 mg, 1 mg	33
everolimus oral tablet 10 mg, 2.5 mg, 5 mg, 7.5 mg	15
EVEXITHROID ORAL TABLET 120 MG, 15 MG, 180 MG, 30 MG, 60 MG, 90 MG.	33
EVRYSDI	28
exemestane	15
EXXUA	13

EXXUA TITRATION PACK	13
EYSUVIS	36
ezetimibe	18
ezetimibe-simvastatin	18

F

FABHALTA	25
falmina	30
famciclovir oral	16
famotidine oral suspension reconstituted	27
FASENRA PEN	38
febuxostat	14
feirza 1.5/30	30
feirza 1/20	30
felodipine er	18
FEMRING	30
fenofibrate micronized	18
fenofibrate oral capsule 134 mg, 200 mg, 67 mg	18
fenofibrate oral tablet 145 mg, 160 mg, 48 mg, 54 mg	18
fenofibric acid oral capsule delayed release	18
fentanyl transdermal patch 72 hour 100 mcg/hr, 12 mcg/hr, 25 mcg/hr, 50 mcg/hr, 75 mcg/hr	8
FETZIMA	13
fidaxomicin	11
FILSPARI	28
FINACEA EXTERNAL FOAM	22
finasteride oral tablet 5 mg	28
ingolimod hcl	20
finzala	30
FIORICET	8
flac otic oil 0.01 %	37
FLAREX	36
flecainide acetate	18
FLEXICHAMBER	38
FLOTREX ORAL TABLET CHEWABLE 1 MG	26
FLUAD	34
FLUARIX INTRAMUSCULAR SUSPENSION PREFILLED SYRINGE 0.5 ML	34
FLUCELVAX INTRAMUSCULAR SUSPENSION PREFILLED SYRINGE	34
fluconazole oral	14
fludrocortisone acetate oral	32
FLULAVAL INTRAMUSCULAR SUSPENSION PREFILLED SYRINGE 0.5 ML	34

flunisolide nasal	37
fluocinolone acetonide body	22
fluocinolone acetonide external cream	22
fluocinolone acetonide external ointment	22
fluocinolone acetonide external solution	22
fluocinolone acetonide otic	37
fluocinolone acetonide scalp	22
fluocinonide external cream 0.05 % ...	22
fluocinonide external gel	22
fluocinonide external ointment	22
fluocinonide external solution	22
FLUORIDEX	20
FLUORIDEX ENHANCED WHITENING ...	20
FLUORIMAX 5000	20
FLUORIMAX 5000 SENSITIVE	26
fluorometholone	36
fluorouracil external cream 5 %	22
fluoxetine hcl oral capsule	13
fluoxetine hcl oral solution	13
fluoxetine hcl oral tablet	13
fluticasone propionate external cream	22
fluticasone propionate external ointment	22
fluticasone propionate nasal	37
fluticasone-salmeterol inhalation aerosol powder breath activated 100-50 mcg/act, 250-50 mcg/act, 500-50 mcg/act	38
FLUTICASONE-SALMETEROL INHALATION AEROSOL POWDER BREATH ACTIVATED 113-14 MCG/ACT, 232-14 MCG/ACT, 55-14 MCG/ACT	38
fluvoxamine maleate	13
fluvoxamine maleate er	13
FLUZONE	34
FLUZONE HIGH-DOSE	34
FML FORTE	36
FML LIQUIFILM	36
FOCALIN	19
folic acid oral tablet 1 mg	26
FOLLISTIM AQ	35
FOSAMAX	35
fosfomycin tromethamine	11
fosinopril sodium	18
FRAICHE 5000 DENTAL DENTAL GEL 1.1 %	20
FREESTYLE LIBRE 2 PLUS SENSOR	23
FREESTYLE LIBRE 2 READER	24
FREESTYLE LIBRE 2 SENSOR	24

FREESTYLE LIBRE 3 PLUS SENSOR.....	24	glucagon emergency kit injection solution reconstituted 1 mg.....	25	HALCION ORAL TABLET 0.25 MG.....	17
FREESTYLE LIBRE 3 READER	24	GLUCOTROL XL.....	25	halobetasol propionate external cream	22
FREESTYLE LIBRE 3 SENSOR	24	glyburide	25	halobetasol propionate external ointment.....	22
FREESTYLE LIBRE 14 DAY READER	23	glyburide-metformin	25	haloette vaginal ring 0.12-0.015 mg/24hr	30
FREESTYLE LIBRE 14 DAY SENSOR	23	glycopyrrolate oral tablet 1 mg, 2 mg ..	28	haloperidol oral	16
frovatriptan succinate	14	GLYXAMBI.....	25	HAVRIX.....	34
ft aspirin low dose	9	gnp adult aspirin low strength.....	9	heather	30
ft aspirin oral tablet chewable.....	9	gnp aspirin low dose.....	9	h-e-b aspirin	9
ft naloxone hcl	10	gnp aspirin oral tablet delayed release 81 mg	9	HEMANGEOL.....	18
ft nicotine	10	gnp naloxone hcl.....	10	HEMLIBRA	25
ft nicotine mini	10	gnp nicotine mini.....	10	HEMMOREX-HC RECTAL SUPPOSITORY 25 MG	35
furosemide oral	18	gnp nicotine polacrilex mouth/throat gum 2 mg.....	10	HEPLISAV-B	34
fyavolv.....	30	gnp nicotine polacrilex mouth/throat lozenge	10	HIPREX	11
FYCOMPA ORAL SUSPENSION.....	12	gnp nicotine transdermal	10	hm nicotine polacrilex mouth/throat gum 2 mg, 4 mg	10
FYCOMPA ORAL TABLET	12	GOLYTELY.....	28	HUMALOG KWIKPEN.....	24
FYREMADEL.....	35	GONAL-F	35	HUMALOG MIX 50/50 KWIKPEN	24
G		GONAL-F RFF REDIRECT	35	HUMALOG MIX 50/50 VIAL SUBCUTANEOUS SUSPENSION (50- 50) 100 UNIT/ML.....	24
gabapentin oral capsule 100 mg, 300 mg, 400 mg	12	GONAL-F RFF SUBCUTANEOUS SOLUTION RECONSTITUTED 75 UNIT ..	35	HUMALOG MIX 75/25 KWIKPEN	24
gabapentin oral solution 250 mg/5ml ..	12	goodsense aspirin low dose.....	9	HUMALOG MIX 75/25 VIAL	24
gabapentin oral tablet 600 mg, 800 mg	12	goodsense aspirin oral tablet chewable.	9	HUMALOG U-100 JUNIOR KWIKPEN.....	24
gallifrey.....	30	goodsense nicotine.....	10	HUMULIN 70/30 KWIKPEN.....	24
ganirelix acetate solution prefilled syringe 250 mcg/0.5ml subcutaneous .	35	goodsense nicotine polacrilex	10	HUMULIN 70/30 VIAL.....	24
ganirelix acetate solution prefilled syringe 250 mcg/0.5ml subcutaneous .	35	griseofulvin microsize oral suspension ..	14	HUMULIN N KWIKPEN	24
GARDASIL 9 INTRAMUSCULAR SUSPENSION PREFILLED SYRINGE	34	g tussin ac	37	HUMULIN N VIAL	24
gatifloxacin ophthalmic.....	36	guaifenesin-codeine.....	37	HUMULIN R U-500 KWIKPEN	24
gavilyte-c	27	guanfacine hcl	18	HUMULIN R U-500 VIAL SUBCUTANEOUS SOLUTION 500 UNIT/ML	24
gavilyte-g	27	guanfacine hcl er.....	19	HUMULIN R VIAL.....	24
gavilyte-n with flavor pack	27	GUARDIAN 4 GLUCOSE SENSOR	24	hydralazine hcl oral.....	18
GAVRETO	15	GUARDIAN 4 TRANSMITTER	24	hydrochlorothiazide oral.....	18
gemfibrozil oral	18	GUARDIAN CONNECT TRANSMITTER ...	24	hydrocodone-acetaminophen oral solution 10-300 mg/15ml, 10-325 mg/15ml, 7.5-325 mg/15ml	8
generlac	27	GUARDIAN LINK 3 TRANSMITTER	24	hydrocodone-acetaminophen oral tablet 10-325 mg, 2.5-325 mg, 5-325 mg, 7.5-325 mg.....	8
gengraf	33	GUARDIAN SENSOR 3.....	24	hydrocodone bit-homatrop mbr oral solution.....	37
gentamicin sulfate external	11	GVOKE HYPOPEN 1-PACK	25	hydrocod poli-chlorphe poli er	37
gentamicin sulfate ophthalmic	36	GVOKE HYPOPEN 2-PACK	25	hydrocortisone ace-pramoxine external cream 1-1 %	35
GENVOYA	16	GVOKE KIT	25	hydrocortisone acetate rectal.....	35
GILENYA ORAL CAPSULE 0.25 MG.....	20	GVOKE PFS.....	25	hydrocortisone-acetic acid.....	37
glatiramer acetate.....	20	GYNAZOLE-1	14	hydrocortisone external cream 2.5 % ..	22
glatopa	20	H		hydrocortisone external lotion 2.5 % ..	22
glimepiride oral tablet 1 mg, 2 mg, 4 mg	25	habitrol.....	10		
glipizide er.....	25	HAEGARDA.....	33		
glipizide-metformin hcl	25	hailey 1.5/30	30		
glipizide oral tablet 10 mg, 5 mg.....	25	hailey 24 fe.....	30		
glipizide xl oral tablet extended release 24 hour 10 mg, 2.5 mg, 5 mg ...	25	hailey fe 1.5/30.....	30		
GLUCAGON EMERGENCY KIT	25	hailey fe 1/20.....	30		

hydrocortisone external ointment 1 % , 2.5 %	22
hydrocortisone oral	32
hydrocortisone (perianal) external cream 2.5 %	35
hydrocortisone valerate external cream	22
hydrocort-pramoxine (perianal)	35
hydromet oral solution 5-1.5 mg/5ml	37
hydromorphone hcl oral tablet	8
hydroxychloroquine sulfate oral	15
hydroxyurea oral	15
hydroxyzine hcl oral syrup 10 mg/5ml	17
hydroxyzine hcl oral tablet	17
hydroxyzine pamoate oral	17
HYFTOR	33
HYMPAVZI SUBCUTANEOUS SOLUTION AUTO-INJECTOR 150 MG/ML	26
hyoscyamine sulfate er	28
hyoscyamine sulfate oral tablet	28
hyoscyamine sulfate oral tablet dispersible	28
hyoscyamine sulfate sl	28
hyoscyamine sulfate sublingual	28
HYPERSAL	37
HYRNUO	15

I

ibandronate sodium oral	35
IBRANCE ORAL TABLET	15
ibuprofen oral tablet 400 mg, 600 mg, 800 mg	9
iclevia	30
ICLUSIG	15
ICOTYDE	22
IDELVION	26
IDHIFA	15
imatinib mesylate oral	15
IMBRUVICA ORAL CAPSULE	15
IMBRUVICA ORAL SUSPENSION	15
IMBRUVICA ORAL TABLET 420 MG	15
imipramine hcl oral	13
imiquimod external cream 5 %	22
IMKELDI	15
IMVEXXY MAINTENANCE PACK	26
IMVEXXY STARTER PACK	26
INBRIJA	16
incassia	30
indapamide	18
indomethacin er	9
indomethacin oral capsule	9

INGREZZA	20
INGREZZA SPRINKLE	20
INPEN 100-BLUE-LILLY-HUMALOG	24
INPEN 100-BLUE-NOVOLOG-FIASP	24
INPEN 100-GREY-LILLY-HUMALOG	24
INPEN 100-GREY-NOVOLOG-FIASP	24
INPEN 100-PINK-LILLY-HUMALOG	24
INPEN 100-PINK-NOVOLOG-FIASP	24
INSPIREASE	38
INSULIN LISPRO (1 UNIT DIAL)	24
INSULIN LISPRO JUNIOR KWIKPEN	24
INSULIN LISPRO PROT & LISPRO	24
INSULIN LISPRO VIAL	24
INSULIN PEN NEEDLES 29G X 12MM , 30G X 5 MM , 31G X 5 MM , 31G X 6 MM , 31G X 8 MM , 32G X 4 MM	24
INSULIN SYRINGES 27G X 1/2" 0.5 ML, 27G X 1/2" 1 ML, 28G X 1/2" 0.5 ML, 28G X 1/2" 1 ML, 29G X 1/2" 0.5 ML, 29G X 1/2" 1 ML, 30G X 1/2" 1 ML, 30G X 5/16" 0.5 ML, 31G X 5/16" 0.5 ML, 31G X 5/16" 1 ML	24
INTRAROSA	26
introvale	30
INVELTYS	36
INZIRQO	18
IPOL	34
ipratropium-albuterol	38
ipratropium bromide hfa	38
ipratropium bromide inhalation	38
ipratropium bromide nasal	37
IQIRVO	28
irbesartan	18
irbesartan-hydrochlorothiazide	18
ISENTRESS HD	16
ISENTRESS ORAL TABLET	16
isibloom	30
isoniazid oral tablet	14
isosorbide dinitrate oral tablet 10 mg, 20 mg, 30 mg, 5 mg	18
isosorbide mononitrate er	18
isotretinoin oral capsule 10 mg, 20 mg, 30 mg, 40 mg	22
ISTALOL	36
itraconazole oral capsule	14
ivabradine hcl	18
ivermectin oral tablet 3 mg	16
ivermectin oral tablet 6 mg	16

J

jaimiess	30
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JAKAFI	15
jantoven oral tablet 1 mg, 10 mg, 2 mg, 2.5 mg, 3 mg, 4 mg, 5 mg, 6 mg, 7.5 mg	12
JARDIANCE	25
jasmiel	30
jencycla	30
JENTADUETO	25
JENTADUETO XR	25
jinteli	30
jolessa	30
JORNAY PM	19
JOURNAVX	8
JUBLIA	14
juleber	30
JULUCA	16
junel 1.5/30	30
junel 1/20	30
junel fe 1.5/30	30
junel fe 1/20	30
junel fe 24	30
JUST RIGHT 5000	20
JYLAMVO	33

K

kalliga	30
KAPSPARGO SPRINKLE	18
kariva	30
kelnor 1/35	30
kelnor 1/50 oral tablet 1-50 mg-mcg	30
KEPPRA ORAL	12
KEPPRA XR	12
KERENDIA	18
KESIMPTA	20
ketoconazole external cream	14
ketoconazole external shampoo	14
ketoconazole oral	14
ketorolac tromethamine ophthalmic	36
ketorolac tromethamine oral	9
KEVZARA	33
KISQALI (200 MG DOSE)	15
KISQALI (400 MG DOSE)	15
KISQALI (600 MG DOSE)	15
KLARON	22
klayesta	14
KLISYRI	22
klor-con	26
klor-con 10	26
klor-con m10	26

klor-con m15.....	26
klor-con m20.....	26
KLOXXADO.....	10
kls aspirin low dose.....	9
kls quit2.....	10
kls quit4.....	10
KOGENATE FS INTRAVENOUS KIT 1000 UNIT, 2000 UNIT, 250 UNIT, 3000 UNIT, 500 UNIT.....	26
KOSELUGO ORAL CAPSULE.....	15
KOURZEQ.....	20
KOVALTRY.....	26
kp aspirin.....	9
K-PHOS-NEUTRAL.....	26
K-TAB ORAL TABLET EXTENDED RELEASE 20 MEQ.....	26
kurvelo.....	30
KYZATREX.....	32

L

labetalol hcl oral.....	18
lacosamide oral solution 10 mg/ml, 100 mg/10ml, 50 mg/5ml.....	12
lacosamide oral tablet.....	12
lactulose encephalopathy.....	28
lactulose oral solution.....	28
LAGEVRIO.....	16
LAMICTAL.....	12
LAMICTAL ODT ORAL TABLET DISPERSIBLE.....	12
LAMICTAL XR ORAL TABLET EXTENDED RELEASE 24 HOUR.....	12
lamotrigine er.....	12
lamotrigine oral tablet.....	12
lamotrigine oral tablet chewable.....	12
lamotrigine oral tablet dispersible.....	12
LANCETS.....	24
LANOXIN ORAL TABLET 62.5 MCG.....	18
LANOXIN ORAL TABLET 125 MCG, 250 MCG.....	18
lansoprazole oral tablet delayed release dispersible.....	27
LANTUS SOLOSTAR.....	24
LANTUS U-100 VIAL.....	24
larin 1.5/30.....	30
larin 1/20.....	30
larin 24 fe.....	30
larin fe 1.5/30.....	30
larin fe 1/20.....	30
LASIX.....	18
latanoprost ophthalmic.....	36

lederle leucovorin.....	15
LEDIPASVIR-SOFOSBUVIR.....	16
leena oral tablet 0.5/1/0.5-35 mg-mcg.....	30
leflunomide oral.....	33
lenalidomide.....	15
LENVIMA ORAL CAPSULE THERAPY PACK 10 & 4 MG, 10 MG, 10 MG & 2 X 4 MG, 2 X 10 MG, 2 X 10 MG & 4 MG, 2 X 4 MG, 3 X 4 MG, 4 MG.....	15
lessina.....	30
letrozole oral.....	15
leucovorin calcium oral.....	15
leuprolide acetate injection.....	15
levalbuterol hcl inhalation.....	38
LEVALBUTEROL HFA INHALATION AEROSOL 45 MCG/ACT.....	38
LEVIBID.....	28
levetiracetam er.....	12
levetiracetam oral solution.....	12
levetiracetam oral tablet.....	12
levocarnitine oral solution.....	26
levocarnitine oral tablet.....	28
levocarnitine sf.....	26
levocetirizine dihydrochloride oral.....	37
levofloxacin oral tablet.....	11
levonest.....	30
levonorgest-eth est & eth est oral tablet 42-21-21-7 days.....	30
levonorgest-eth estrad 91-day.....	30
levonorgestrel-ethinyl estrad oral tablet 0.1-20 mg-mcg, 0.15-30 mg-mcg.....	30
levonorg-eth estrad triphasic.....	30
levora 0.15/30 (28).....	30
levo-t.....	33
levothyroxine sodium oral tablet.....	33
levoxyl.....	33
LEVSIN.....	28
LEVSIN/SL.....	28
LIBERVANT BUCCAL FILM 10 MG, 12.5 MG, 15 MG, 5 MG, 7.5 MG.....	12
lidocaine external ointment 5 %.....	8
lidocaine external patch 5 %.....	8
lidocaine hcl mouth/throat.....	20
lidocaine-prilocaine external cream.....	8
lidocaine viscous hcl.....	20
linezolid oral tablet.....	11
LINZESS.....	28
liomny.....	33
liothyronine sodium oral.....	33

liraglutide subcutaneous solution pen-injector 18 mg/3ml.....	25
lisdexamfetamine dimesylate.....	20
lisinopril-hydrochlorothiazide.....	18
lisinopril oral.....	18
LITFULO.....	33
lithium carbonate er.....	17
lithium carbonate oral.....	17
LITHOBID.....	17
LIVDELZI.....	28
LODOCO.....	18
lojaimiess.....	30
LOKELMA.....	26
LO LOESTRIN FE.....	30
LOMOTIL.....	28
LOPID.....	18
LOPRESSOR ORAL SOLUTION.....	18
lorazepam oral tablet.....	17
loryna.....	30
losartan potassium-hctz.....	18
losartan potassium oral.....	18
LOTEMAX OPHTHALMIC OINTMENT.....	36
LOTEMAX SM.....	36
LOTENSIN.....	18
LOTENSIN HCT.....	18
loteprednol etabonate ophthalmic suspension.....	36
lovastatin oral.....	18
low-ogestrel.....	30
lo-zumandimine.....	30
lubiprostone.....	28
luizza 1.5/30.....	30
luizza 1/20.....	30
LUMAKRAS.....	15
LUMRYZ.....	39
LUMRYZ STARTER PACK.....	39
LUPKYNIS.....	33
lurasidone hcl.....	16
lutera.....	30
lyleq.....	30
lyllana.....	31
LYNKUET.....	20
LYNPARZA.....	15
LYRICA ORAL CAPSULE.....	20
LYUMJEV KWIKPEN.....	24
LYUMJEV VIAL.....	24
lyza.....	31

M

macitentan	39	methylphenidate hcl er(diffus)	20	M-NATAL PLUS	26
MACROBID	11	methylphenidate hcl er (la)	20	MNEXSPIKE	34
MACRODANTIN	11	methylphenidate hcl er oral tablet extended release	20	modafinil oral	39
MALARONE	16	methylphenidate hcl er (osm) oral tablet extended release 18 mg, 27 mg, 36 mg, 54 mg	20	mometasone furoate external	22
marlissa	31	methylphenidate hcl oral	20	mometasone furoate nasal	37
matzim la	18	methylprednisolone oral	32	MONOJECT HYPODERMIC NEEDLE 18G X 1"	24
MAVYRET	16	metoclopramide hcl oral tablet	13	mono-lynyah	31
MAXITROL	36	metolazone	18	montelukast sodium oral	38
maxi-tuss ac	37	metoprolol-hydrochlorothiazide	18	morphine sulfate er	8
MAYZENT	20	metoprolol succinate er	18	morphine sulfate oral tablet	8
MEDROL ORAL TABLET 2 MG	32	metoprolol tartrate oral tablet 100 mg, 25 mg, 50 mg	18	MOTPOLY XR	12
MEDROL ORAL TABLET 16 MG, 4 MG, 8 MG	32	METROCREAM EXTERNAL CREAM 0.75 %	22	MOUNJARO	25
MEDROL ORAL TABLET THERAPY PACK	32	METROLOTION EXTERNAL LOTION 0.75 %	22	MOVIPREP	28
medroxyprogesterone acetate intramuscular	31	metronidazole external cream	22	moxifloxacin hcl (2x day)	36
medroxyprogesterone acetate oral	31	metronidazole external gel 0.75 %	22	moxifloxacin hcl ophthalmic	36
mefloquine hcl	16	metronidazole external lotion	22	moxifloxacin hcl oral	11
megestrol acetate oral suspension 40 mg/ml	32	metronidazole oral tablet 250 mg, 500 mg	11	MULTAQ	18
megestrol acetate oral tablet	31	metronidazole vaginal	11	multivitamin/fluoride oral tablet chewable	26
meleya	31	mexiletine hcl oral	18	multivitamin w/fluoride tablet chewable 0.5 mg oral	26
meloxicam oral tablet	9	mibelas 24 fe	31	multivitamin w/fluoride tablet chewable 0.25 mg oral	26
memantine hcl er	13	MICROCHAMBER	38	multivitamin w/fluoride tablet chewable 1 mg oral	26
memantine hcl oral tablet	13	microgestin 1.5/30	31	mupirocin cream	11
MENOPUR	35	microgestin 1/20	31	mupirocin ointment	11
MENOSTAR	31	microgestin fe 1.5/30	31	MYAMBUTOL ORAL TABLET 400 MG	14
MENQUADFI	34	microgestin fe 1/20	31	mycophenolate mofetil oral capsule	34
MENVEO	34	midodrine hcl	18	mycophenolate mofetil oral tablet	34
mercaptopurine oral tablet	15	MIEBO	37	mycophenolate sodium	34
mesalamine oral capsule delayed release 400 mg	35	mili	31	mycophenolic acid	34
mesalamine oral tablet delayed release 1.2 gm	35	milnacipran hcl oral tablet	20	MYFEMBREE	31
mesalamine rectal	35	milophene	35	MYHIBBIN	34
metaxalone oral tablet 400 mg, 800 mg	39	mimvey	31	MYSOLINE	12
metformin hcl er	25	MINIMED 630G GUARDIAN PRESS	24		
metformin hcl oral tablet 1000 mg, 500 mg, 850 mg	25	MINIMED INSTINCT GLUC SENSOR	24		
methadone hcl oral tablet	8	minocycline hcl oral capsule	11		
methenamine hippurate	11	minoxidil oral	18		
methimazole oral	33	mirabegron er oral tablet extended release 24 hour	28		
methocarbamol oral tablet 500 mg, 750 mg	39	mirtazapine oral	13		
methotrexate sodium injection solution	34	MIRVASO	22		
methotrexate sodium oral	34	misoprostol oral	27		
methotrexate sodium (pf)	33	MITIGARE	14		
METHYLIN	20	mm aspirin	9		
methylphenidate hcl er (cd)	20	M-M-R II	34		

N

nabumetone oral	9
nadolol oral	18
naloxone hcl nasal	10
naltrexone hcl oral	10
naproxen dr	9
naproxen oral tablet	9
naproxen oral tablet delayed release	9
naproxen sodium oral tablet 275 mg, 550 mg	9
naratriptan hcl	14
NARCAN	10
NASCOBAL	26

na sulfate-k sulfate-mg sulf.	28	nitroglycerin transdermal	19	nystatin-triamcinolone	14
NATAZIA	31	NITROSTAT.	19	nystop	14
nateglinide.	25	NIVA-PLUS	26		
NAYZILAM	12	NIVA THYROID.	33	O	
nebivolol hcl	18	NIVESTYM.	26	ocella oral tablet 3-0.03 mg	31
NEBUSAL INHALATION		nora-be.	31	OCUFLOX	36
NEBULIZATION SOLUTION 3 %	37	NORDITROPIN FLEXPPO	32	ODACTRA	37
necon 0.5/35 (28)	31	norelgestromin-eth estradiol.	31	ODEFSEY.	16
NEFFY	37	norethin ace-eth estrad-fe oral tablet		ODOMZO.	15
NEMLUVIO	22	1-20 mg-mcg, 1.5-30 mg-mcg	31	ofloxacin ophthalmic	36
neomycin-polymyxin-dexameth	36	norethin ace-eth estrad-fe oral tablet		ofloxacin otic.	37
neomycin-polymyxin-hc otic.	37	chewable	31	olanzapine oral.	16
neomycin sulfate oral.	11	norethindrone acetate oral	31	olmesartan medoxomil-hctz	19
NEONATAL COMPLETE	26	norethindrone acet-ethinyl est	31	olmesartan medoxomil oral.	19
NEONATAL PLUS.	26	norethindrone-eth estradiol	31	olopatadine hcl nasal.	37
neuac.	22	norethindrone oral	31	OLUMIANT	34
NEULASTA	26	norethindron-ethinyl estrad-fe oral		omega-3-acid ethyl esters	19
NEUPRO	16	tablet 1-20/1-30/1-35 mg-mcg	31	omeprazole oral capsule delayed	
NEURONTIN.	12	norgestimate-eth estradiol oral tablet		release.	27
NEVANAC	36	0.25-35 mg-mcg	31	OMNIPOD 5 DEXCOM INTRO KIT	24
NEXLETOL	18	norgestimate-ethinyl estradiol triphasic	31	OMNIPOD 5 DEXCOM PODS	24
NEXLIZET	18	NORLIQVA	19	OMNIPOD 5 LIBRE INTRO	24
NGENLA	32	norlyroc	31	OMNIPOD 5 LIBRE PODS	24
niacin er (antihyperlipidemic)	18	NORPRAMIN	13	OMNITROPE.	32
NICODERM CQ.	10	nortrel 0.5/35 (28)	31	OMVOH SUBCUTANEOUS	34
NICORETTE MINI	10	nortrel 1/35 (21)	31	ondansetron hcl oral solution 4 mg/5ml	13
NICORETTE MOUTH/THROAT GUM	10	nortrel 1/35 (28)	31	ondansetron hcl oral tablet	13
NICORETTE MOUTH/THROAT LOZENGE.	10	nortrel 7/7/7	31	ondansetron odt oral tablet	
NICORETTE STARTER KIT	10	nortriptyline hcl oral capsule.	13	dispersible 4 mg, 8 mg	13
nicotine mini	10	NOVAREL	35	ONE VITE WOMENS PLUS	26
nicotine polacrilex mini	10	NOVOEIGHT.	26	ONFI.	12
nicotine polacrilex mouth/throat	10	NOVOFINE PEN NEEDLE.	24	ONYDA XR.	20
nicotine step 1	10	NOVOFINE PLUS PEN NEEDLE	24	OPVEE	10
nicotine step 2	10	np thyroid.	33	OPZELURA.	22
nicotine step 3	10	NUBEQA	15	ORACIT	26
nicotine transdermal patch 24 hour.	10	NUCALA	38	ORAL CITRATE ORAL SOLUTION 490-	
nifedipine er	18	NUCYNTE ER	8	640 MG/5ML.	26
nifedipine er osmotic release.	18	NUDEXTA.	20	ORALONE.	20
nifedipine oral.	18	NULEV.	28	ORENCIA CLICKJECT.	34
nikki	31	NURTEC	14	ORENCIA SUBCUTANEOUS.	34
nilotinib hcl	15	NUWIQ.	26	ORFADIN ORAL CAPSULE	28
nintedanib esylate.	39	NUZYRA ORAL.	11	ORFADIN ORAL SUSPENSION.	28
nitro-bid	18	nyamyc external powder 100000 unit/		ORGOVYX	15
NITRO-DUR	18	gm	14	ORIAHNN	32
nitrofurantoin macrocrystal.	11	nylia 1/35	31	ORILISSA.	32
nitrofurantoin monohydrate		nylia 7/7/7.	31	ORLYNVAH	11
macrocrystals.	11	nystatin external	14	orphenadrine citrate er	39
nitroglycerin rectal	19	nystatin mouth/throat suspension		orquidea.	31
nitroglycerin sublingual.	19	100000 unit/ml.	14	OSCIMIN	28
		nystatin oral	14	oseltamivir phosphate oral.	16

OSPHENA	26	phenazopyridine hcl oral tablet 100 mg, 200 mg	28	premium lidocaine external ointment 5 %	8
OTZLA	34	phenobarbital oral tablet	12	PREMPHASE	31
OTZLA XR	34	phenytek	12	PREMPRO	31
OVACE PLUS WASH EXTERNAL LIQUID 10 %	22	phenytoin sodium extended	12	prenatal oral tablet 27-1 mg	27
OVACE WASH EXTERNAL LIQUID 10 % ..	22	philith	31	prenatal plus	27
OVIDREL	35	PHOSPHA 250 NEUTRAL	26	prenatal plus vitamin/mineral	27
oxaprozin oral tablet	9	phosphorous	26	prevalite	19
oxcarbazepine	12	phospho-trin 250 neutral	26	PREVIDENT 5000 BOOSTER PLUS	20
oxybutynin chloride er	28	pilocarpine hcl oral	20	PREVIDENT 5000 DRY MOUTH	20
oxybutynin chloride oral	28	pimecrolimus	22	PREVIDENT 5000 ENAMEL PROTECT ...	27
oxycodone-acetaminophen oral tablet 10-325 mg, 2.5-325 mg, 5-325 mg, 7.5-325 mg	8	pimtree	31	PREVIDENT 5000 KIDS	20
oxycodone hcl oral capsule	8	pioglitazone hcl	25	PREVIDENT 5000 ORTHO DEFENSE	20
oxycodone hcl oral solution	8	pioglitazone hcl-metformin hcl	25	PREVIDENT 5000 PLUS	20
oxycodone hcl oral tablet	8	PIQRAY	15	PREVIDENT 5000 SENSITIVE	27
OZEMPIC	25	piroxicam oral	9	PREVIDENT DENTAL	20
P					
PACERONE ORAL TABLET 100 MG, 400 MG	19	PIVYA	11	PREVNAR 20	34
PACERONE ORAL TABLET 200 MG	19	PLEGRIDY	20	PREVYMIS ORAL TABLET	17
paliperidone er	16	pnv 27-ca/fe/fa	26	PREZCOBIX	17
PANCREAZE	28	podofilox external solution	22	primidone oral	12
PANRETIN	22	POLYCIN OPHTHALMIC OINTMENT 500-10000 UNIT/GM	36	PRIORIX	34
pantoprazole sodium oral tablet delayed release	27	polymyxin b-trimethoprim	36	probenecid	14
paroxetine hcl er	13	pomalidomide	15	PROCHAMBER VHC	38
paroxetine hcl oral tablet	13	portia-28	31	prochlorperazine maleate oral	13
PAXLOVID (150/100)	16	posaconazole oral tablet delayed release	14	PROCTOFOAM HC	35
PAXLOVID (300/100)	16	potassium chloride crys er	26	procto-med hc	35
PAXLOVID (300/100 & 150/100)	16	potassium chloride er	27	PROCTOSOL HC	35
PEDIAPRED ORAL SOLUTION 5 MG/5ML ..	32	potassium chloride oral packet 20 meq ..	27	PROCTOZONE-HC	35
peg-3350/electrolytes	28	potassium chloride oral solution	27	progesterone intramuscular	31
peg-3350/electrolytes/ascorbat	28	potassium citrate er	27	progesterone oral	31
peg 3350-kcl-na bicarb-nacl	28	pramipexole dihydrochloride	16	progesterone vaginal	35
peg-kcl-nacl-nasulf-na asc-c	28	prasugrel hcl	16	PROGRAF ORAL CAPSULE	34
PELLIX	22	pravastatin sodium	19	promethazine-codeine	37
penicillin v potassium	11	prazosin hcl oral	19	promethazine-dm	37
pentoxifylline er	19	PRED MILD	36	promethazine hcl oral	13
perampanel oral tablet	12	prednisolone acetate ophthalmic	36	promethazine hcl rectal	13
PERFOROMIST	38	prednisolone oral solution	32	PROMETHEGAN	13
PERIDEX	20	prednisolone sodium phosphate oral solution 15 mg/5ml	32	propafenone hcl	19
periogard	20	prednisone oral solution	32	propafenone hcl er	19
permethrin external	16	prednisone oral tablet	32	propranolol hcl er	19
perphenazine oral	13	prednisone oral tablet therapy pack	32	propranolol hcl oral	19
PERTZYE	28	pregabalin oral capsule	20	propylthiouracil oral	33
phenazo oral tablet 200 mg	28	PREGNYL	35	PROVERA	31
		PREMARIN ORAL	31	prucalopride succinate	28
		PREMARIN VAGINAL	31	pseudoephedrine-bromphen-dm	37
				PULMOSAL	37
				PULMOZYME	39
				PYLERA	27

PYRIDIDIUM	28
pyridostigmine bromide oral tablet 60 mg.	14
Q	
qc aspirin low dose	9
qc childrens aspirin	9
qc nicotine transdermal system	10
QUESTRAN	19
QUESTRAN LIGHT	19
quetiapine fumarate	16
quetiapine fumarate er	16
QUFLORA PEDIATRIC ORAL TABLET CHEWABLE 0.25 MG, 0.5 MG, 1 MG	27
QULIPTA	14
QVAR REDIHALER	38
R	
ra aspirin adult low dose oral tablet chewable 81 mg	9
ra aspirin adult low strength oral tablet chewable 81 mg	9
ra aspirin childrens oral tablet chewable 81 mg	9
ra aspirin ec adult low st oral tablet delayed release 81 mg	9
ra aspirin ec oral tablet delayed release 81 mg	9
rabeprazole sodium oral tablet delayed release	27
RADICAVA ORS	20
RADICAVA ORS STARTER KIT	20
RALDESY	13
raloxifene hcl	35
ramelteon	39
ra mini nicotine mouth/throat lozenge 2 mg, 4 mg	10
ramipril	19
ra nicotine mouth/throat gum 4 mg	10
ra nicotine polacrilex mouth/throat lozenge 2 mg, 4 mg	10
ra nicotine transdermal patch 24 hour 21 mg/24hr	10
ranolazine er	19
rasagiline mesylate oral	16
RASUVO	34
reclipsen	31
RECOMBINATE	26
RECOMBIVAX HB	34
RECTIV	19
REGLAN	13
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RENTHYROID ORAL TABLET 120 MG, 15 MG, 30 MG, 60 MG, 90 MG.	33
repaglinide	25
REPATHA	19
REPATHA PUSHTRONEX SYSTEM SUBCUTANEOUS SOLUTION CARTRIDGE 420 MG/3.5ML	19
REPATHA SURECLICK	19
RESTASIS	37
RESTORIL	39
RETACRIT	26
RETEVMO	15
REXTOVY	10
REXULTI	16
REYVOW ORAL TABLET 100 MG, 50 MG ..	14
REZDIFFRA	28
REZENOPY	10
RHAPSIDO	37
RHOFADE	22
RHOPRESSA	36
rifampin oral	14
RINVOQ	34
RINVOQ LQ	34
risedronate sodium oral tablet	35
risperidone	16
rivaroxaban oral tablet	12
rivastigmine	13
rivastigmine tartrate	13
rivelsa	31
rizatriptan benzoate oral	14
ROCALTROL ORAL CAPSULE	35
ROCKLATAN	36
roflumilast	38
ropinirole hcl	16
rosuvastatin calcium oral	19
rosyrah	31
roweepra	12
ROZLYTREK	15
RUCONEST	34
RYBELSUS	25
RYDAPT	15
S	
sacubitril-valsartan	19
SALAGEN	20
SANTYL	22
saxagliptin hcl	25
saxagliptin-metformin er	25
SCEMBLIX	15
scopolamine	14

selenium sulfide external lotion	22
SEREVENT DISKUS	38
sertraline hcl oral concentrate	13
sertraline hcl oral tablet	13
setlakin	31
sevelamer carbonate oral tablet	28
sf 5000 plus	20
sf gel 1.1%	20
SFROWASA RECTAL ENEMA 4 GM/60ML	35
sharobel	31
SHINGRIX INTRAMUSCULAR SUSPENSION RECONSTITUTED 50 MCG/0.5ML	34
sildenafil citrate oral tablet 20 mg	39
sildenafil citrate oral tablet 100 mg, 25 mg, 50 mg	26
silodosin	28
SILVADENE	11
silver sulfadiazine external	11
simliya	31
simpesse	31
SIMPLERA SYNC SENSOR	24
SIMPONI	34
simvastatin oral tablet 10 mg, 20 mg, 40 mg, 5 mg	19
simvastatin oral tablet 80 mg	19
SINEMET	16
SINGULAIR ORAL PACKET	38
sirolimus oral tablet	34
SKYRIZI	34
SKYTROFA	32
SLYND	31
sm aspirin low dose oral tablet chewable 81 mg	9
sm childrens aspirin oral tablet chewable 81 mg	9
sm nicotine mouth/throat gum	10
sm nicotine polacrilex mouth/throat gum 2 mg, 4 mg	10
sm nicotine transdermal patch 24 hour 14 mg/24hr, 7 mg/24hr	10
sod citrate-citric acid oral solution 500-334 mg/5ml	27
sod fluoride-potassium nitrate	27
sodium chloride inhalation	37
sodium fluoride 5000 enamel	27
sodium fluoride 5000 plus	20
sodium fluoride 5000 ppm	20
sodium fluoride 5000 ppm dental cream 1.1 %	20
sodium fluoride 5000 sensitive	27

sodium fluoride dental	20	sulindac oral	9	TEGRETOL-XR	12
sodium fluoride oral solution 1.1 (0.5 f) mg/ml	27	sumatriptan nasal	14	TEKTURN	19
sodium fluoride oral tablet chewable	27	sumatriptan succinate oral	14	telmisartan	19
sodium oxybate solution 500 mg/ml oral	39	sumatriptan succinate subcutaneous solution auto-injector	14	telmisartan-hctz	19
sodium sulfacetamide wash	22	SUNOSI	39	temazepam	39
SOFOSBUVIR-VELPATASVIR	17	SUPREP BOWEL PREP KIT	28	temozolomide	15
SOGROYA	32	SUTAB	28	TENCON	8
solifenacin succinate	28	syeda	31	TENIVAC	34
SOLIQUA	25	SYMBICORT	38	tenofovir disoproxil fumarate	17
SOOLANTRA	22	SYMFI	17	TEPMETKO	15
sotalol hcl oral	19	SYMFI LO ORAL TABLET 400-300-300 MG	17	terazosin hcl	29
SPIKEVAX	34	SYMLINPEN 60 SUBCUTANEOUS SOLUTION PEN-INJECTOR 1500 MCG/1.5ML	25	terbinafine hcl oral	14
SPIKEVAX 6M-11Y	34	SYMLINPEN 120 SUBCUTANEOUS SOLUTION PEN-INJECTOR 2700 MCG/2.7ML	25	terconazole	14
SPIRIVA HANDIHALER	38	SYMPAZAN	12	teriflunomide	20
SPIRIVA RESPIMAT	38	SYMPROIC	28	TERIPARATIDE SOLUTION PEN-INJECTOR 560 MCG/2.24ML SUBCUTANEOUS	35
spironolactone-hctz	19	SYNJARDY	25	TESTIM	32
spironolactone oral tablet	19	SYNJARDY XR	25	testosterone cypionate intramuscular	32
SPORANOX	14			testosterone enanthate intramuscular	32
SPRAVATO	13			testosterone gel 20.25 mg/act (1.62%) transdermal	32
sprintec 28	31			testosterone transdermal gel 1.62 %	32
sronyx	31			tetracycline hcl oral capsule	11
ssd	11			TEZRULY	29
STARJEMZA SUBCUTANEOUS	22			TEZSPIRE SUBCUTANEOUS SOLUTION AUTO-INJECTOR	38
STEQEYMA SUBCUTANEOUS SOLUTION 22				THRIVE	10
STEQEYMA SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	22			thyroid oral	33
STIOLTO RESPIMAT	38			tiadylt er	19
STIVARGA	15			TIAZAC	19
STRENSIQ	28			ticagrelor	16
STRIVERDI RESPIMAT	38			TIGLUTIK	20
STROMEKTOL	16			TIKOSYN	19
subvenite oral tablet	12			tilia fe	31
SUCRAID	28			timolol maleate ocudose	37
sucalfate oral	27			timolol maleate (once-daily)	37
SUFLAVE	28			timolol maleate ophthalmic	37
sulfacetamide sodium (acne)	22			timolol maleate pf	37
sulfacetamide sodium external	22			TIMOPTIC OCUDOSE	37
sulfacetamide sodium ophthalmic	36			tinidazole oral	11
sulfacetamide sodium-sulfur external liquid 10-5 %, 9-4 %	22			TIROSINT-SOL	33
sulfacetamide sod-sulfur wash external liquid 9-4 %	22			TIVICAY	17
sulfamethoxazole-trimethoprim oral suspension 200-40 mg/5ml	11			tizanidine hcl oral capsule 2 mg, 4 mg, 6 mg	39
sulfamethoxazole-trimethoprim oral tablet	11			tizanidine hcl oral tablet	39
sulfasalazine oral	35			TOBI PODHALER	39
sulfatrim pediatric	11			TOBRADEX	36
				tobramycin-dexamethasone	36

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

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

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ចំណាំ: ប្រសិនបើអ្នកនិយាយ**ភាសាខ្មែរ (Cambodian-Mon-Khmer)** សេវាជំនួយភាសាភក្តិភក្តិក្តី និងការទំនាក់ទំនងភក្តិភក្តិក្តីក្នុងទម្រង់ផ្សេងទៀត ដូចជាពុម្ពអក្សរធំ មានសម្រាប់អ្នក។
ទូរសព្ទមកលេខភក្តិភក្តិក្តីនៅលើប័ណ្ណសម្គាល់សមាជិករបស់អ្នក។

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

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

ໝາຍເຫດ: ຖ້າຫາກທ່ານເວົ້າພາສາລາວ (Lao), ທ່ານສາມາດໃຊ້ບໍລິການຊ່ວຍເຫຼືອດ້ານພາສາຟຣີ ແລະ ການສື່ສານໃນຮູບແບບອື່ນໆຟຣີ, ເຊັ່ນ: ການພິມຕົວອັກສອນຂະໜາດໃຫຍ່. ໂທຫາເບີໂທຟຣີຢູ່ທີ່ບັດປະຈຳຕົວສະມາຊິກຂອງທ່ານ.

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 پہ زبان فارسی (Persian-Farsi) صحبت می‌کنید، خدمات رایگان کمک زبانی و ارتباطات رایگان در قالب‌های دیگر، مانند چاپ پزرگ، در دسترس شما هستند. پا شماره رایگان مندرج روی کارت شناسایی عضویتان تماس پگیرید.

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.



This document applies to commercial group members of Surest plans with a pharmacy benefit subject to the Advantage 3-Tier PDL.

Level Funded: Administrative services provided by United HealthCare Services, Inc. or their affiliates, and UnitedHealthcare Service LLC in NY. Stop-loss insurance is underwritten by UnitedHealthcare Insurance Company or their affiliates, including UnitedHealthcare Life Insurance Company in NJ, and UnitedHealthcare Insurance Company of New York in NY.

Fully Insured: Insurance coverage provided by UnitedHealthcare Insurance Company or its affiliates. Administrative services provided by United HealthCare Services, Inc. or its affiliates.

All Fully Insured Plans in California: If medically appropriate care from a qualified provider cannot be provided within the Network, we will arrange for the required care with an available and accessible out-of-Network provider. You will only be responsible for paying the cost sharing in an amount equal to the cost sharing you would have otherwise paid for that service or a similar service if you had received the Covered Health Care Service from a Network provider.

Surest Fully Insured Plans in California: A complete Network and timely access to care may only be available by obtaining treatment through providers available at the maximum Copayment shown for each service at the lowest cost-sharing tier. While some network providers are available at lower Copayments (reduced cost-sharing rates), there is no guarantee of a complete Network or timely access to care at any specific reduced cost-sharing rate.