



# Your 2025 Prescription Drug List

## Advantage 4-Tier

Effective January 1, 2025



**United  
Healthcare**

This Prescription Drug List (PDL) is accurate as of January 1, 2025 and is subject to change after this date. This PDL applies to members of our UnitedHealthcare, Neighborhood Health Partnership Plan, UnitedHealthcare Freedom Plans, River Valley, UnitedHealthcare Level Funded, Global Solutions, Student Resources, Surest, UnitedHealthcare of Nevada, UnitedHealthOne and Oxford medical plans with a pharmacy benefit subject to the Advantage 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. They are then listed in alphabetical order.

## How do I use my PDL?

You and your doctor can consult 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 member phone number on your member ID card.

## What are tiers?

Tiers are the different cost levels you pay for a medication. Each tier is assigned a cost, set by your employer or benefit plan. This is how much you will pay when you fill a prescription. See page 6 for more information.

## When does the PDL change?

PDL changes typically occur 2-3 times per year. However, changes that have a positive impact for you – such as coverage for new medications or cost savings – may occur at any time. You can log in to the 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 medications based on their total value, including effectiveness and safety, how much they cost, and the availability of alternative medications to treat the same or similar medical conditions. Certain medications may be excluded from coverage or be subject to prior authorization (sometimes referred to as precertification)<sup>1</sup> if similar alternatives are available at a lower cost. Examples include medications that work the same way, but one is much more expensive than the other, or options that are available without a prescription (also referred to as over-the-counter medications<sup>2</sup>). There are also some instances where the same product can be made by two or more manufacturers, 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 the 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?

Thousands of medications are already available and more come to the market regularly. Often, several medications are available to treat the same condition. 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, the PDL Management Committee, which includes senior UnitedHealth Group® doctors and business leaders, meets 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 York and New Jersey plans, a prescription drug product that is therapeutically equal to an over-the-counter drug may be covered if it is determined to be medically necessary.

## About this PDL

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



# Medication tips

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

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

## What if my doctor writes a brand-name prescription?

If your doctor gives you a prescription for a brand-name medication, ask if a generic equivalent 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 benefit plans, if a brand-name drug is prescribed and a generic equivalent is available, your cost-share may be the copayment PLUS the cost difference between the brand-name drug and the generic equivalent.

## What if I am taking a specialty medication?

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

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 treatment 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 so you and your doctor can decide your best course of treatment. In this PDL, brand-name medications are shown in UPPERCASE and generic medications in lowercase.

## Tier information

Using lower-tier medications can help you pay your lowest 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.

In the chart below, overall value indicates medications' effectiveness and safety, cost, and the availability of alternative medications to treat the same or similar medical condition(s).

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



# Reading your PDL (continued)

## Drug list information

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

<b>E</b>	<b>May be excluded from coverage. May be subject to Prior Authorization for fully insured benefit plans governed by state law in Connecticut, New Jersey, and New York</b> – Lower-cost options are available and covered.
<b>H</b>	<b>Health Care Reform Preventive</b> – This medication is part of a health care reform preventive benefit and is generally available at no additional cost to you.
<b>H-PA</b>	<b>Health Care Reform Preventive with Prior Authorization</b> – May be part of health care reform preventive benefit and available at no additional cost to you if prior authorization criteria is met.
<b>PA</b>	<b>Prior Authorization (sometimes referred to as precertification)<sup>3</sup></b> – Requires your doctor to provide information about why you are taking a medication to determine how it may be covered by your plan.
<b>QL</b>	<b>Quantity Limits</b> – Specifies the largest quantity of medication covered per copayment or in a defined period of time.
<b>RS</b>	<b>Refill and Save Program<sup>4</sup></b> – Save money on your copayment when you refill your prescription on time as prescribed. Program eligibility may vary.
<b>SP</b>	<b>Specialty Medication</b> – Specialty medications treat complex or rare conditions and may require special storage and handling. You may be required to obtain these medications from a specialty pharmacy.
<b>ST</b>	<b>Step Therapy (referred to as First Start in New Jersey)</b> – Requires prior authorization and may require you to try one or more other medications before the medication you are requesting may be covered.

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

4. Not applicable to Neighborhood Health Plan, some UnitedHealthcare Freedom Plans, Golden Rule, Oxford and UnitedHealthOne.



# Reading your PDL (continued)

## Coverage details

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

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

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

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

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

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

Coverage is set by the member's prescription drug benefit plan. Please consult plan documents regarding benefit coverage and cost-share. Diabetic self-management items, including continuous glucose monitors, may be covered under the member's pharmacy and/or medical plan depending on the benefit.

- **Endocrine: growth hormone**

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

- **Infertility**

Coverage is set by the member's prescription drug benefit plan. Please consult plan documents regarding benefit coverage and cost-share. Prior authorization (sometimes referred to as precertification) may be required for Oxford plans or where a state mandates infertility drug coverage. This is not a covered benefit for Neighborhood Health Partnership Plan.

- **Medications for sexual dysfunction**

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

- **Termination of pregnancy**

Coverage under the prescription drug benefit is set by the member's medical benefit plan. Please consult plan documents regarding benefit coverage, exclusions and cost-sharing. Additional information is also available by calling the number on your member ID card.

## Questions

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



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



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

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

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

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





Drug Name	Drug Tier	Requirements & Limits
<b>Analgesics - Drugs for Pain</b>		
acetaminophen-codeine	1	QL
ALLZITAL	E	QL
apap-caff-dihydrocodeine	4	QL
ascomp-codeine	1	QL
bac	1	QL
BELBUCA	3	PA, QL
BUPAP	E	QL
buprenorphine	3	PA, QL
butalbital-acetaminophen oral tablet 50-300 mg	E	QL
butalbital-acetaminophen oral tablet 50-325 mg	1	QL
butalbital-apap-caff-cod oral capsule 50-300-40-30 mg	E	QL
butalbital-apap-caff-cod oral capsule 50-325-40-30 mg	1	QL
butalbital-apap-caffeine oral capsule 50-300-40 mg	3	QL
butalbital-apap-caffeine oral capsule 50-325-40 mg	1	QL
butalbital-apap-caffeine oral tablet	1	QL
butalbital-asa-caff-codeine	1	QL
butalbital-aspirin-caffeine	1	QL
butorphanol tartrate nasal	2	QL
BUTRANS	E	PA, QL
DILAUDID ORAL TABLET	E	QL
endocet	1	QL
ESGIC	4	QL
fentanyl transdermal patch 72 hour 100 mcg/hr, 12 mcg/hr, 25 mcg/hr, 50 mcg/hr, 75 mcg/hr	2	PA, QL
fentanyl transdermal patch 72 hour 37.5 mcg/hr, 62.5 mcg/hr, 87.5 mcg/hr	E	PA, QL
FIORICET	4	QL
FIORICET/CODEINE	E	QL
glydo	1	
hydrocodone-acetaminophen oral solution 7.5-325 mg/15ml	2	QL

Drug Name	Drug Tier	Requirements & Limits
hydrocodone-acetaminophen oral tablet 10-300 mg, 5-300 mg, 7.5-300 mg	E	QL
hydrocodone-acetaminophen oral tablet 10-325 mg, 5-325 mg, 7.5-325 mg	1	QL
hydrocodone-ibuprofen	1	QL
hydromorphone hcl oral tablet	1	QL
lidocaine external ointment 5 %	2	QL
lidocaine external patch 5 %	3	PA, QL
lidocaine hcl urethral/mucosal	1	
lidocaine-prilocaine external cream	1	
LIDOCAN	E	PA, QL
LIDODERM	E	PA, QL
LORTAB ORAL ELIXIR 10-300 MG/15ML	4	QL
methadone hcl oral tablet	1	PA, QL
morphine sulfate (concentrate)	1	QL
morphine sulfate er oral tablet extended release	1	PA, QL
morphine sulfate oral	1	QL
MS CONTIN	E	PA, QL
NALOCET	E	QL
NUCYNTA	4	QL
NUCYNTA ER	3	PA, QL
OXYCODONE HCL ER	E	PA, QL
oxycodone hcl oral capsule	1	QL
oxycodone hcl oral solution	1	QL
oxycodone hcl oral tablet 10 mg, 15 mg, 20 mg, 30 mg, 5 mg	1	QL
OXYCODONE-ACETAMINOPHEN ORAL TABLET 10-300 MG, 2.5-300 MG, 5-300 MG, 7.5-300 MG	E	QL
oxycodone-acetaminophen oral tablet 10-325 mg, 2.5-325 mg, 5-325 mg, 7.5-325 mg	1	QL
OXYCONTIN	E	PA, QL
oxymorphone hcl er	3	PA, QL
PERCOCET	E	QL
premium lidocaine	2	QL

See page 6-8 for coverage details. Drugs listed as E are subject to Prior Authorization in CT, NJ and NY. Drugs listed as ST are subject to Prior Authorization in CT, NJ and NY (referred to as First Start in New Jersey).



Drug Name	Drug Tier	Requirements & Limits
PROLATE ORAL TABLET	E	QL
ROXICODONE	E	QL
TENCON	3	QL
tramadol hcl (er biphasic) oral tablet extended release 24 hour	2	(generic for Ryzolt), QL
tramadol hcl er	2	(generic for Ultram ER), QL
tramadol hcl oral tablet 100 mg, 25 mg	E	QL
tramadol hcl oral tablet 50 mg	1	QL
tramadol-acetaminophen	1	QL
TREZIX	4	QL
TRIDACAINE II	E	PA, QL
ULTRACET ORAL TABLET 37.5-325 MG	4	QL
ULTRAM ORAL TABLET 50 MG	E	QL
XTAMPZA ER	4	PA, QL
ZTLIDO	3	PA, QL

#### Analgesics - Drugs for Pain and Inflammation

ANAPROX DS	E	
ARTHROTEC	E	
CAMBIA	E	QL
CELEBREX	E	QL
celecoxib oral	2	QL
DAYPRO	4	
diclofenac potassium oral tablet 25 mg	E	QL
diclofenac potassium oral tablet 50 mg	2	
diclofenac potassium(migraine)	E	QL
diclofenac sodium er	3	
diclofenac sodium external gel 1%	E	
diclofenac sodium oral	1	
diclofenac-misoprostol	3	
EC-NAPROSYN ORAL TABLET DELAYED RELEASE 375 MG	3	
EC-NAPROSYN ORAL TABLET DELAYED RELEASE 500 MG	4	
ec-naproxen	1	

Drug Name	Drug Tier	Requirements & Limits
etodolac	2	
etodolac er	3	
FELDENE ORAL CAPSULE 10 MG, 20 MG	4	
flurbiprofen oral	1	
ibuprofen oral suspension 100 mg/5ml	E	
ibuprofen oral tablet 400 mg, 600 mg, 800 mg	1	
indomethacin er	2	
indomethacin oral capsule	1	
ketorolac tromethamine oral	1	
LODINE	E	
LOFENA	E	QL
mefenamic acid oral	3	
meloxicam oral tablet	1	
nabumetone oral	1	
NAPROSYN ORAL TABLET	E	
naproxen dr	1	
naproxen oral tablet	1	
naproxen oral tablet delayed release	1	
naproxen sodium oral tablet 275 mg, 550 mg	2	
oxaprozin oral tablet	2	
piroxicam oral	2	
RELAFEN DS	E	
sulindac oral	1	

#### Anti-Addiction / Substance Abuse Treatment Agents

acamprosate calcium	1	
buprenorphine hcl sublingual	1	QL
buprenorphine hcl-naloxone hcl	2	QL
bupropion hcl er (smoking det)	1	H
disulfiram oral	1	
KLOXXADO	2	QL
naloxone hcl injection solution prefilled syringe 2 mg/2ml	1	
naloxone hcl nasal	1	QL
naltrexone hcl oral	1	

See page 6-8 for coverage details. Drugs listed as E are subject to Prior Authorization in CT, NJ and NY. Drugs listed as ST are subject to Prior Authorization in CT, NJ and NY (referred to as First Start in New Jersey).



Drug Name	Drug Tier	Requirements & Limits
NARCAN	2	QL (include Narcan OTC)
NICOTROL	4	PA, H
REXTOVY	E	
SUBOXONE	E	PA, QL
varenicline tartrate	3	PA, H
varenicline tartrate (starter)	3	PA, H
varenicline tartrate(continue)	3	PA, H
ZIMHI	2	QL
ZUBSOLV	2	QL
<b>Antibacterials - Drugs for Infections</b>		
ACTICLATE ORAL TABLET 150 MG, 75 MG	E	
amoxicillin	1	
amoxicillin-potassium clavulanate	1	
ampicillin	1	
AUGMENTIN	E	
AUGMENTIN ES-600	E	
AVIDOXY	4	
azithromycin oral	1	
BACTRIM	4	
BACTRIM DS	4	
cefadroxil	1	
cefdinir	1	
cefixime	3	
cefpodoxime proxetil oral tablet	1	
cefprozil	1	
cefuroxime axetil	1	
CENTANY EXTERNAL OINTMENT 2 %	4	QL
cephalexin	1	
CIPRO ORAL TABLET	4	
ciprofloxacin hcl oral	1	
clarithromycin er	2	
clarithromycin oral suspension reconstituted	2	
clarithromycin oral tablet	1	
CLEOCIN ORAL CAPSULE 150 MG, 300 MG	4	

Drug Name	Drug Tier	Requirements & Limits
CLEOCIN ORAL CAPSULE 75 MG	2	
CLEOCIN ORAL SOLUTION RECONSTITUTED	4	
CLEOCIN VAGINAL CREAM	4	
clindamycin hcl oral	1	
clindamycin palmitate hcl	2	
clindamycin phosphate vaginal	2	
CLINDESSE	2	
dicloxacillin sodium	1	
DIFICID ORAL TABLET	3	QL
DORYX MPC	E	
DORYX ORAL TABLET DELAYED RELEASE 200 MG, 50 MG, 80 MG	E	
doxycycline hyclate oral capsule	2	
doxycycline hyclate oral tablet 100 mg	2	
doxycycline hyclate oral tablet 150 mg, 50 mg, 75 mg	E	
doxycycline hyclate oral tablet 20 mg	1	
doxycycline hyclate oral tablet delayed release 100 mg, 150 mg, 200 mg, 50 mg, 75 mg	E	
DOXYCYCLINE HYCLATE ORAL TABLET DELAYED RELEASE 80 MG	E	
doxycycline monohydrate oral capsule 100 mg, 50 mg	1	
doxycycline monohydrate oral capsule 150 mg, 75 mg	E	
doxycycline monohydrate oral suspension reconstituted	3	
doxycycline monohydrate oral tablet	1	
E.E.S. GRANULES	3	
ERYPED 200	3	
ERYPED 400	4	
ERY-TAB	4	
erythromycin base oral tablet	1	
erythromycin base oral tablet delayed release	3	

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Drug Name	Drug Tier	Requirements & Limits
erythromycin ethylsuccinate oral suspension reconstituted 200 mg/5ml	1	
erythromycin ethylsuccinate oral suspension reconstituted 400 mg/5ml	3	
erythromycin oral	3	
FIRVANQ	4	
FLAGYL	4	
fosfomycin tromethamine	3	
gentamicin sulfate external	1	QL
HIPREX	4	
levofloxacin oral tablet	1	
LIKMEZ	4	
linezolid oral tablet	2	
MACROBID	4	
MACRODANTIN	4	
methenamine hippurate	1	
metronidazole oral	1	
metronidazole vaginal	2	
minocycline hcl oral capsule	1	
minocycline hcl oral tablet	E	
MONDOXYNE NL	4	
MONUROL ORAL PACKET 3 GM	4	
moxifloxacin hcl oral	3	
mupirocin calcium	3	QL
mupirocin external	1	QL
neomycin sulfate oral	1	
nitrofurantoin macrocrystal	1	
nitrofurantoin monohydrate macrocrystals	1	
nitrofurantoin oral suspension 25 mg/5ml	3	
NITROFURANTOIN ORAL SUSPENSION 50 MG/5ML	E	
NUVESSA	E	
NUZYRA ORAL	4	QL
penicillin v potassium	1	
SEYSARA	E	
SILVADENE	4	

Drug Name	Drug Tier	Requirements & Limits
silver sulfadiazine external	1	
ssd	1	
sulfamethoxazole-trimethoprim oral	1	
sulfatrim pediatric	1	
TARGADOX	E	
tetracycline hcl oral capsule	3	
tinidazole oral	3	
trimethoprim oral	1	
VANCOCIN	4	
vancomycin hcl oral	1	
VANDAZOLE	4	
VIBRAMYCIN	4	
XACIATO	2	QL
XENLETA ORAL TABLET 600 MG	3	
XIFAXAN	3	PA, QL
XIMINO ORAL CAPSULE EXTENDED RELEASE 24 HOUR 135 MG, 45 MG, 90 MG	E	PA
ZITHROMAX ORAL	4	
ZITHROMAX TRI-PAK	4	
ZITHROMAX Z-PAK	4	
ZYVOX ORAL TABLET	E	
<b>Anticoagulants - Drugs to Treat or Prevent Blood Clots</b>		
ARIXTRA	E	QL
dabigatran etexilate mesylate	2	QL
ELIQUIS	2	QL
ELIQUIS DVT/PE STARTER PACK	2	QL
enoxaparin sodium injection solution prefilled syringe	2	QL
fondaparinux sodium	2	QL
jantoven	1	
LOVENOX INJECTION SOLUTION PREFILLED SYRINGE	E	QL
PRADAXA ORAL CAPSULE	2	QL
warfarin sodium oral	1	
XARELTO	2	QL
XARELTO STARTER PACK	2	QL

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Drug Name	Drug Tier	Requirements & Limits
<b>Anticonvulsants - Drugs for Seizures</b>		
APTIOM	3	PA
BANZEL	4	PA
BRIVIACT ORAL SOLUTION	4	PA
BRIVIACT ORAL TABLET	3	PA
carbamazepine er oral capsule extended release 12 hour	2	
carbamazepine er oral tablet extended release 12 hour	3	
carbamazepine oral tablet	1	
carbamazepine oral tablet chewable	1	
CARBATROL	4	
clobazam oral suspension	3	PA
clobazam oral tablet	2	PA
DEPAKOTE	4	PA
DEPAKOTE ER	4	PA
DEPAKOTE SPRINKLES	4	PA
DIASTAT ACUDIAL RECTAL GEL 10 MG, 20 MG	4	QL
diazepam rectal	1	QL
DILANTIN INFATABS	3	
DILANTIN ORAL CAPSULE	3	
divalproex sodium er	2	
divalproex sodium oral capsule delayed release sprinkle	2	
divalproex sodium oral tablet delayed release	1	
ELEPSIA XR	E	PA
EPIDIOLEX	3	PA, SP
epitol	1	
ethosuximide oral	1	
felbamate	1	
FELBATOL	4	PA
FELBATOL ORAL SUSPENSION 600 MG/5ML	4	PA
FINTEPLA	4	PA
FYCOMPA ORAL SUSPENSION	4	PA
FYCOMPA ORAL TABLET	3	PA
gabapentin oral capsule	1	

Drug Name	Drug Tier	Requirements & Limits
gabapentin oral solution 250 mg/5ml	1	
GABAPENTIN ORAL TABLET 25 MG, 50 MG	E	PA
gabapentin oral tablet 600 mg, 800 mg	1	
KEPPRA ORAL	4	PA
KEPPRA XR	4	PA
lacosamide oral	2	
LAMICTAL	4	PA
LAMICTAL ODT ORAL TABLET DISPERSIBLE	4	PA
LAMICTAL XR ORAL TABLET EXTENDED RELEASE 24 HOUR	3	PA
lamotrigine er	3	
lamotrigine oral tablet	1	
lamotrigine oral tablet chewable	1	
lamotrigine oral tablet dispersible	3	PA
levetiracetam er	2	
levetiracetam oral	1	
MOTPOLY XR	3	PA
MYSOLINE	2	PA
NAYZILAM	3	PA, QL
NEURONTIN	4	PA
ONFI	4	PA
oxcarbazepine	1	
OXTELLAR XR	E	
phenobarbital oral	1	
phenytek	1	
phenytoin infatabs	1	
phenytoin oral tablet chewable	1	
phenytoin sodium extended	1	
primidone oral tablet 125 mg	1	PA
primidone oral tablet 250 mg, 50 mg	1	
QUDEXY XR	E	
roweepra	1	
rufinamide oral suspension	3	
rufinamide oral tablet	3	PA

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Drug Name	Drug Tier	Requirements & Limits
SABRIL ORAL PACKET	E	PA, QL, SP
subvenite	1	
SYMPAZAN	4	PA
TEGRETOL ORAL TABLET	3	
TEGRETOL-XR	4	
TOPAMAX	4	PA
TOPAMAX SPRINKLE	4	PA
topiramate er	E	
topiramate oral	1	
TRILEPTAL	4	PA
TROKENDI XR	E	
valproic acid oral	1	
VALTOCO	3	PA, QL
vigabatrin oral packet	2	PA, QL, SP
vigadrone oral packet	2	PA, QL, SP
vigpoder	2	PA, QL, SP
VIMPAT ORAL	4	PA
XCOPRI	3	PA
ZARONTIN	4	
ZONEGRAN	4	PA
zonisamide oral	1	

#### Antidementia Agents - Drugs for Alzheimer's Disease and Dementia

ARICEPT	E	
donepezil hcl oral tablet 10 mg, 5 mg	1	
donepezil hcl oral tablet 23 mg	2	
EXELON	E	
galantamine hydrobromide er	1	
memantine hcl er	3	
memantine hcl oral tablet	1	
NAMENDA ORAL TABLET 10 MG, 5 MG	E	
NAMENDA TITRATION PAK	E	
NAMENDA XR	E	
RAZADYNE ER ORAL CAPSULE EXTENDED RELEASE 24 HOUR 16 MG, 24 MG, 8 MG	4	
rivastigmine	3	

Drug Name	Drug Tier	Requirements & Limits
rivastigmine tartrate	1	
<b>Antidepressants - Drugs for Depression</b>		
amitriptyline hcl oral	1	
ANAFRANIL	E	
APLENZIN	E	QL
AUVELITY	4	ST, QL
bupropion hcl er (sr)	1	
bupropion hcl er (xl) oral tablet extended release 24 hour 150 mg, 300 mg	1	
BUPROPION HCL ER (XL) ORAL TABLET EXTENDED RELEASE 24 HOUR 450 MG	E	QL
bupropion hcl oral	1	
CELEXA	E	
citalopram hydrobromide oral solution	1	
citalopram hydrobromide oral tablet	1	
clomipramine hcl oral	3	
CYMBALTA	E	
desipramine hcl oral	1	
DESVENLAFAXINE ER	E	
desvenlafaxine succinate er	3	QL
doxepin hcl oral capsule	1	
doxepin hcl oral concentrate	1	
duloxetine hcl oral capsule delayed release particles 20 mg, 30 mg, 60 mg	2	
duloxetine hcl oral capsule delayed release particles 40 mg	E	
EFFEXOR XR	E	
escitalopram oxalate oral solution	3	
escitalopram oxalate oral tablet	1	
FETZIMA	4	ST, QL
fluoxetine hcl oral capsule	1	
fluoxetine hcl oral capsule delayed release	3	QL
fluoxetine hcl oral solution	1	
fluoxetine hcl oral tablet 10 mg	3	QL

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Drug Name	Drug Tier	Requirements & Limits
fluoxetine hcl oral tablet 20 mg, 60 mg	3	
fluvoxamine maleate	1	
fluvoxamine maleate er	3	QL
FORFIVO XL	E	QL
imipramine hcl oral	1	
LEXAPRO	E	
mirtazapine oral	1	
NORPRAMIN	4	
nortriptyline hcl oral capsule	1	
olanzapine-fluoxetine hcl	2	QL
PAMELOR	E	
PARNATE	4	
paroxetine hcl er	3	QL
paroxetine hcl oral tablet	1	
paroxetine mesylate	E	QL
PAXIL CR	E	QL
PAXIL ORAL TABLET	E	
PRISTIQ	E	QL
protriptyline hcl	1	
PROZAC	E	
REMERON	E	
REMERON SOLTAB ORAL TABLET DISPERSIBLE 15 MG, 30 MG	E	
SERTRALINE HCL ORAL CAPSULE	E	QL
sertraline hcl oral concentrate	1	
sertraline hcl oral tablet	1	
SPRAVATO (56 MG DOSE)	4	PA, QL
SPRAVATO (84 MG DOSE)	4	PA, QL
SYMBYAX	4	QL
tranylcypromine sulfate	1	
trazodone hcl oral	1	
TRINTELLIX	4	ST, QL
venlafaxine hcl	1	
venlafaxine hcl er oral capsule extended release 24 hour	1	
venlafaxine hcl er oral tablet extended release 24 hour	E	QL

Drug Name	Drug Tier	Requirements & Limits
VIIBRYD	E	QL
VIIBRYD STARTER PACK ORAL KIT 10 & 20 MG	4	
vilazodone hcl	3	QL
WAINUA	2	PA, QL, SP
WELLBUTRIN SR	E	
WELLBUTRIN XL	E	
ZOLOFT	E	
ZURZUVAE	2	PA, QL, SP
<b>Antiemetics - Drugs for Nausea and Vomiting</b>		
ANTIVERT ORAL TABLET	E	
aprepitant oral capsule 125 mg, 40 mg, 80 mg	2	QL
BONJESTA	E	PA
COMPRO	3	
DICLEGIS	E	PA
doxylamine-pyridoxine	E	PA
dronabinol	1	
EMEND ORAL CAPSULE	E	QL
GIMOTI	E	QL
granisetron hcl oral	2	
MARINOL 2.5 MG	4	
meclizine hcl oral tablet	E	
metoclopramide hcl oral solution	1	
metoclopramide hcl oral tablet	1	
ondansetron hcl oral	1	
ondansetron odt oral tablet dispersible 4 mg, 8 mg	1	
perphenazine oral	1	
prochlorperazine	1	
prochlorperazine maleate oral	1	
promethazine hcl oral	1	
promethazine hcl rectal	1	
PROMETHEGAN	3	
REGLAN	4	
scopolamine	3	
TRANSDERM-SCOP	E	

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Drug Name	Drug Tier	Requirements & Limits
<b>Antifungals - Drugs for Fungal Infections</b>		
ciclodan	1	
ciclopirox external gel	1	
ciclopirox external shampoo	2	
ciclopirox external solution	1	
ciclopirox olamine external cream	1	
clotrimazole mouth/throat	1	
CRESEMBA ORAL	3	
DIFLUCAN	E	
econazole nitrate external	2	
EXELDERM EXTERNAL CREAM	3	
fluconazole oral	1	
griseofulvin microsize oral	1	
griseofulvin ultramicrosize	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
LOPROX EXTERNAL CREAM 0.77 %	E	
LOPROX EXTERNAL SHAMPOO 1 %	E	
NOXAFIL ORAL TABLET DELAYED RELEASE	E	
nyamyc	1	QL
nystatin external	1	QL
nystatin mouth/throat	1	
nystatin oral	1	
nystatin-triamcinolone	2	
nystop	1	QL
posaconazole oral tablet delayed release	2	
SPORANOX ORAL CAPSULE	4	QL
SPORANOX PULSEPAK ORAL CAPSULE 100 MG	4	QL

Drug Name	Drug Tier	Requirements & Limits
SULCONAZOLE NITRATE EXTERNAL CREAM	3	
terbinafine hcl oral	1	
terconazole	1	
TOLSURA	E	
VFEND ORAL TABLET 200 MG	4	QL
VFEND ORAL TABLET 50 MG	3	QL
VIVJOA	3	PA, QL
voriconazole oral tablet	1	QL
<b>Antigout Agents - Drugs for Gout</b>		
allopurinol oral tablet 100 mg, 300 mg	1	
ALLOPURINOL ORAL TABLET 200 MG	E	
colchicine oral	2	
colchicine-probenecid	1	
febuxostat	3	
MITIGARE	2	
probenecid	1	
ULORIC	E	
ZYLOPRIM ORAL TABLET 100 MG, 300 MG	4	
<b>Antimigraine Agents - Drugs for Migraines</b>		
AIMOVIQ	2	PA, ST
AIMOVIQ SUBCUTANEOUS SOLUTION AUTO-INJECTOR 140 MG/ML	2	PA, ST, QL
AJOVY	E	PA, ST, QL
almotriptan malate	3	QL
AMERGE ORAL TABLET 1 MG, 2.5 MG	E	QL
eletriptan hydrobromide	2	QL
EMGALITY	2	PA, ST, QL
FROVA	E	QL
frovatriptan succinate	3	QL
IMITREX NASAL SOLUTION 20 MG/ACT, 5 MG/ACT	4	QL
IMITREX ORAL	E	QL
IMITREX STATDOSE REFILL	E	QL
IMITREX STATDOSE SYSTEM	E	QL

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Drug Name	Drug Tier	Requirements & Limits
MAXALT	E	QL
MAXALT-MLT	E	QL
naratriptan hcl	1	QL
NURTEC ODT	2	PA, ST, QL
QULIPTA	2	PA, ST, QL
RELPAX	E	QL
REYVOW	4	PA, ST, QL
rizatriptan benzoate	1	QL
sumatriptan nasal	2	QL
sumatriptan succinate oral	1	QL
sumatriptan succinate refill subcutaneous solution cartridge	1	QL
sumatriptan succinate subcutaneous	1	QL
sumatriptan-naproxen sodium	E	QL
TOSYMRA	E	QL
TREXIMET	E	QL
TRUDHESA	E	PA, QL
UBRELVY	2	PA, ST, QL
ZAVZPRET	4	PA, ST, QL
ZEMBRACE SYMTOUCH	E	QL
zolmitriptan nasal	E	QL
zolmitriptan oral tablet	2	QL
zolmitriptan oral tablet dispersible	3	QL
ZOMIG NASAL	2	QL
<b>Antimyasthenic Agents - Drugs to Treat Myasthenia Gravis</b>		
MESTINON ORAL TABLET	E	
MESTINON ORAL TABLET EXTENDED RELEASE	E	
pyridostigmine bromide er	1	
pyridostigmine bromide oral tablet 30 mg	E	
pyridostigmine bromide oral tablet 60 mg	1	
<b>Antimycobacterials - Drugs to Treat Infections</b>		
dapsone oral	2	
ethambutol hcl oral	1	
isoniazid oral tablet	1	

Drug Name	Drug Tier	Requirements & Limits
MYAMBUTOL	4	
MYCOBUTIN	4	
rifabutin	1	
rifampin oral	1	
<b>Antineoplastics - Drugs for Cancer</b>		
abiraterone acetate oral tablet 250 mg	2	PA, QL, SP
abiraterone acetate oral tablet 500 mg	E	PA, QL, SP
AFINITOR	E	PA, QL, SP
ALECENSA	2	PA, QL
ALUNBRIG	2	PA, QL, SP
anastrozole oral	1	H-PA
ARIMIDEX	E	
AROMASIN	E	
AUGTYRO	2	PA, QL, SP
bicalutamide	1	
BOSULIF ORAL TABLET	2	PA, ST, QL, SP
BRUKINSA	3	PA, ST, QL, SP
CABOMETYX	2	PA, QL, SP
CALQUENCE	2	PA, QL, SP
CALQUENCE ORAL CAPSULE 100 MG	2	PA, QL, SP
capecitabine	1	QL, SP
CASODEX	4	
COTELLIC	2	PA, QL, SP
cyclophosphamide oral capsule	2	
ERIVEDGE	2	PA, QL, SP
ERLEADA ORAL TABLET 240 MG	2	PA, QL
ERLEADA ORAL TABLET 60 MG	2	PA, QL, SP
everolimus oral tablet 10 mg, 2.5 mg, 5 mg, 7.5 mg	2	PA, QL, SP
exemestane	2	H-PA
EXKIVITY ORAL CAPSULE 40 MG	4	PA, QL, SP
FEMARA	E	
GAVRETO	4	PA, QL, SP
GLEEVEC	E	PA, QL, SP
HYDREA	4	

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Drug Name	Drug Tier	Requirements & Limits
hydroxyurea oral	1	
IBRANCE	2	PA, QL, SP
ICLUSIG ORAL TABLET 10 MG, 30 MG	3	PA, QL
ICLUSIG ORAL TABLET 15 MG, 45 MG	3	PA, QL, SP
IDHIFA	2	PA, QL, SP
imatinib mesylate	1	PA, QL, SP
IMBRUVICA ORAL CAPSULE	2	PA, QL, SP
IMBRUVICA ORAL TABLET 140 MG, 280 MG	E	PA, QL, SP
IMBRUVICA ORAL TABLET 420 MG	2	PA, QL, SP
INLYTA	3	PA, QL, SP
JAKAFI	2	PA, QL, SP
KISQALI ORAL TABLET THERAPY PACK 200 MG	4	PA, ST, QL, SP
KOSELUGO	3	PA, QL, SP
lenalidomide	2	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	3	PA, QL, SP
letrozole oral	1	H-PA
leucovorin calcium oral	1	
LONSURF	4	PA, QL, SP
LUMAKRAS	4	PA, QL, SP
LYNPARZA	2	PA, QL, SP
MEKINIST ORAL TABLET	4	PA, ST, QL, SP
mercaptopurine oral	1	
NERLYNX	2	PA, QL, SP
NINLARO	2	PA, QL, SP
NUBEQA	2	PA, QL, SP
ODOMZO	2	PA, QL, SP
ORGOVYX	3	PA, QL, SP
pazopanib hcl	3	PA, QL, SP
PIQRAY	2	PA, QL, SP
POMALYST	3	PA, QL, SP
RETEVMO ORAL CAPSULE 40 MG	4	PA, QL, SP

Drug Name	Drug Tier	Requirements & Limits
RETEVMO ORAL CAPSULE 80 MG	4	PA, SP
REVLIMID	2	PA, QL, SP
ROZLYTREK ORAL CAPSULE	2	PA, QL, SP
ROZLYTREK ORAL PACKET	2	PA, SP
SPRYCEL	4	PA, ST, QL, SP
STIVARGA	2	PA, QL, SP
TABRECTA	4	PA, QL, SP
TAFINLAR ORAL CAPSULE	4	PA, ST, QL, SP
TAGRISO	3	PA, QL, SP
tamoxifen citrate oral tablet 10 mg	1	
tamoxifen citrate oral tablet 20 mg	1	H-PA
TASIGNA	2	PA, ST, QL, SP
TEMODAR ORAL CAPSULE 250 MG	E	PA, SP
temozolomide	1	PA, SP
TRUQAP	2	PA, QL, SP
VENCLEXTA	2	PA, QL, SP
VERZENIO	2	PA, QL, SP
VITRAKVI	2	PA, QL, SP
VOTRIENT	E	PA, QL, SP
XELODA	E	QL, SP
XTANDI	2	PA, QL, SP
ZEJULA ORAL CAPSULE 100 MG	2	PA, QL, SP
ZELBORAF	2	PA, QL, SP
ZYTIGA	E	PA, QL, SP
<b>Antiparasitics - Drugs for Parasitic Infections</b>		
albendazole oral	3	PA, QL
ALINIA ORAL TABLET	E	QL
ARAKODA	4	QL
atovaquone	2	
atovaquone-proguanil hcl	2	
hydroxychloroquine sulfate oral	1	
ivermectin oral	1	PA, QL
KRINTAFEL	1	QL
MALARONE	4	
mefloquine hcl	1	

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Drug Name	Drug Tier	Requirements & Limits
MEPRON	E	
nitazoxanide oral	2	QL
permethrin external	1	
PLAQUENIL	E	
SOVUNA	E	
STROMEKTOL	4	PA, QL
<b>Antiparkinson Agents - Drugs for Parkinson's Disease</b>		
amantadine hcl oral	1	
AZILECT	E	
benztropine mesylate oral	1	
bromocriptine mesylate oral tablet	1	
carbidopa-levodopa er	1	
carbidopa-levodopa oral tablet	1	
carbidopa-levodopa-entacapone	1	
COMTAN ORAL TABLET 200 MG	4	
DHIVY	E	
entacapone	1	
INBRIJA	3	PA, QL, SP
MIRAPEX ER	E	
NEUPRO	3	
NOURIANZ	3	PA, QL
PARLODEL ORAL TABLET	E	
pramipexole dihydrochloride	1	
pramipexole dihydrochloride er	E	
rasagiline mesylate oral	3	
ropinirole hcl	1	
ropinirole hcl er	E	
RYTARY	E	
SINEMET	4	
STALEVO 100 ORAL TABLET 25-100-200 MG	4	
STALEVO 125 ORAL TABLET 31.25-125-200 MG	4	
STALEVO 150	4	
STALEVO 200 ORAL TABLET 50-200-200 MG	4	
STALEVO 50 ORAL TABLET 12.5-50-200 MG	4	

Drug Name	Drug Tier	Requirements & Limits
STALEVO 75 ORAL TABLET 18.75-75-200 MG	4	
trihexyphenidyl hcl oral tablet	1	
<b>Antiplatelets - Drugs for Heart Attack and Stroke Prevention</b>		
BRILINTA	4	QL
cilostazol	1	
clopidogrel bisulfate oral	1	
EFFIENT	E	
PLAVIX	E	
prasugrel hcl	3	
<b>Antipsychotics - Drugs for Mood Disorders</b>		
ABILIFY	E	
aripiprazole oral solution	3	
aripiprazole oral tablet	2	
asenapine maleate	3	QL
CAPLYTA	4	PA, ST, QL
chlorpromazine hcl oral tablet	1	QL
clozapine oral tablet	1	
CLOZARIL	4	
fluphenazine hcl oral tablet	1	
GEODON ORAL	E	
haloperidol oral	1	
INVEGA	E	QL
LATUDA	E	QL
loxapine succinate	1	
lurasidone hcl	2	QL
LYBALVI	E	PA, QL
NUPLAZID ORAL CAPSULE	4	PA
olanzapine oral tablet	1	
olanzapine oral tablet dispersible	2	
paliperidone er	3	QL
pimozide	2	
quetiapine fumarate	1	
quetiapine fumarate er	2	
REXULTI	4	QL
RISPERDAL	E	
risperidone	1	

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Drug Name	Drug Tier	Requirements & Limits
SAPHRIS	E	QL
SEROQUEL	E	
SEROQUEL XR	E	
UZEDY SUBCUTANEOUS SUSPENSION PREFILLED SYRINGE 100 MG/0.28ML	E	
VRAYLAR	4	QL
ziprasidone hcl	2	
ZYPREXA ORAL	E	
ZYPREXA ZYDIS	E	
<b>Antivirals - Drugs for Viral Infections</b>		
abacavir sulfate-lamivudine	2	QL
acyclovir external cream	E	QL
acyclovir external ointment	3	QL
acyclovir oral	1	
BARACLUDE ORAL TABLET	E	
BIKTARVY	4	QL
CIMDUO	2	QL
COMPLERA	4	QL
darunavir	1	
DELSTRIGO	2	QL
DESCOVY ORAL TABLET 120/15 MG	4	QL
DESCOVY ORAL TABLET 200/25 MG	4	QL, H
DOVATO	2	QL
efavirenz-emtricitab-tenofo df	2	QL
emtricitabine-tenofovir df oral tablet 100-150 mg, 133-200 mg, 167-250 mg	1	QL
emtricitabine-tenofovir df oral tablet 200-300 mg	1	QL, H
entecavir	1	
EPCLUSA ORAL TABLET	2	PA, QL, SP
EPZICOM	E	QL
etravirine	2	
famciclovir oral tablet 125 mg, 500 mg	2	
famciclovir oral tablet 250 mg	2	QL
GENVOYA	4	QL

Drug Name	Drug Tier	Requirements & Limits
HARVONI ORAL TABLET	2	PA, ST, QL, SP
INTELENCE ORAL TABLET 100 MG, 200 MG	4	
INTELENCE ORAL TABLET 25 MG	2	
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
NORVIR ORAL TABLET	E	
ODEFSEY	4	QL
oseltamivir phosphate oral capsule	2	
oseltamivir phosphate oral suspension reconstituted	2	QL
PAXLOVID (150/100)	2	QL
PAXLOVID (300/100)	2	QL
PIFELTRO	3	
PREVYMIS ORAL	2	PA
PREZCOBIX	2	
PREZISTA ORAL TABLET 150 MG, 75 MG	2	
PREZISTA ORAL TABLET 600 MG, 800 MG	E	
ritonavir	2	
RUKOBIA	4	PA
SITAVIG	E	QL
SOFOSBUVIR-VELPATASVIR	2	PA, QL, SP
STRIBILD	4	QL
SYMFI	2	QL
SYMFI LO	2	QL
SYMITUZA	E	QL
TAMIFLU ORAL CAPSULE	E	
TAMIFLU ORAL SUSPENSION RECONSTITUTED	E	QL
tenofovir disoproxil fumarate	1	H-PA
TIVICAY	3	
TRIUMEQ	2	QL

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Drug Name	Drug Tier	Requirements & Limits
TRUVADA ORAL TABLET 100-150 MG, 133-200 MG, 167-250 MG	4	QL
TRUVADA ORAL TABLET 200-300 MG	E	QL
valacyclovir hcl oral	1	QL
VALCYTE ORAL TABLET	E	
valganciclovir hcl oral tablet	1	
VALTREX	E	QL
VEMLIDY	E	PA
VIREAD ORAL TABLET 150 MG, 200 MG, 250 MG	2	
VIREAD ORAL TABLET 300 MG	E	
VOSEVI	2	PA, QL, SP
XOFLUZA (40 MG DOSE)	3	QL
XOFLUZA (80 MG DOSE)	3	QL
ZIRGAN	3	
ZOVIRAX EXTERNAL	E	QL
ZOVIRAX ORAL SUSPENSION 200 MG/5ML	4	
<b>Anxiolytics - Drugs for Anxiety</b>		
alprazolam er	1	
alprazolam oral	1	
alprazolam xr	1	
ATIVAN ORAL	E	
bupirone hcl oral	1	
chlordiazepoxide hcl	1	
clonazepam oral	1	
clorazepate dipotassium	1	
diazepam oral solution	1	
diazepam oral tablet	1	
HALCION	4	
hydroxyzine hcl oral	1	
hydroxyzine pamoate oral	1	
KLONOPIN	E	
lorazepam intensol	1	
lorazepam oral concentrate 2 mg/ml	1	
lorazepam oral tablet	1	
oxazepam	1	

Drug Name	Drug Tier	Requirements & Limits
triazolam	1	
VALIUM	E	
VISTARIL	4	
XANAX	E	
XANAX XR	E	
<b>Bipolar Agents - Drugs for Mood Disorders</b>		
EQUETRO	3	
lithium carbonate er	1	
lithium carbonate oral	1	
LITHOBID	4	PA
<b>Cardiovascular Agents - Drugs for Heart and Circulation Conditions</b>		
ACCUPRIL	E	
acebutolol hcl oral	1	
acetazolamide er	1	
acetazolamide oral	1	
ALDACTAZIDE ORAL TABLET 25-25 MG	4	
ALDACTAZIDE ORAL TABLET 50-50 MG	2	
ALDACTONE	E	
aliskiren fumarate	3	
ALTACE	E	
amiloride hcl oral	1	
amiloride-hydrochlorothiazide	1	
amiodarone hcl oral	1	
amlodipine besylate oral	1	
amlodipine besylate-benazepril hcl	1	
amlodipine besylate-valsartan	2	
amlodipine-atorvastatin oral tablet 10-10 mg, 10-20 mg, 10-40 mg, 10-80 mg, 5-10 mg, 5-20 mg, 5-40 mg, 5-80 mg	E	
amlodipine-atorvastatin oral tablet 2.5-10 mg, 2.5-20 mg, 2.5-40 mg	E	QL
amlodipine-olmesartan	E	
amlodipine-valsartan-hctz	E	
ANTARA ORAL CAPSULE 30 MG	E	

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Drug Name	Drug Tier	Requirements & Limits
ATACAND	E	
ATACAND HCT	E	
atenolol oral	1	
atenolol-chlorthalidone	1	
ATORVALIQ	4	PA
atorvastatin calcium oral tablet 10 mg, 20 mg	1	H-PA
atorvastatin calcium oral tablet 40 mg, 80 mg	1	
AVALIDE	E	
AVAPRO	E	
AZOR	E	
benazepril hcl oral	1	
benazepril-hydrochlorothiazide	1	
BENICAR	E	
BENICAR HCT	E	
BETAPACE	E	
BETAPACE AF	4	
betaxolol hcl oral	1	
BIDIL	E	
bisoprolol fumarate oral	1	
bisoprolol-hydrochlorothiazide	1	
bumetanide oral	1	
BUMEX	3	
BYSTOLIC	E	
CADUET	E	
CALAN SR ORAL TABLET EXTENDED RELEASE 120 MG, 180 MG, 240 MG	4	
CAMZYOS	4	PA, QL, SP
candesartan cilexetil	3	
candesartan cilexetil-hctz	3	
captopril oral	1	
CARDIZEM	E	
CARDIZEM CD	E	
CARDIZEM LA	E	
CARDURA	4	
cartia xt	2	
carvedilol	1	

Drug Name	Drug Tier	Requirements & Limits
carvedilol phosphate er	E	
CATAPRES-TTS-1	E	
CATAPRES-TTS-2	E	
CATAPRES-TTS-3	E	
chlorthalidone	1	
cholestyramine light	1	
cholestyramine oral	1	
clonidine hcl oral	1	
clonidine patch weekly 0.1 mg/24hr transdermal	3	
clonidine patch weekly 0.1 mg/24hr transdermal	3	(Patch)
clonidine patch weekly 0.2 mg/24hr transdermal	3	
clonidine patch weekly 0.2 mg/24hr transdermal	3	(Patch)
clonidine patch weekly 0.3 mg/24hr transdermal	3	
clonidine patch weekly 0.3 mg/24hr transdermal	3	(Patch)
colesevelam hcl oral tablet	2	
COLESTID ORAL TABLET	4	
colestipol hcl oral tablet	1	
COREG	E	
COREG CR	E	
CORGARD	4	
CORLANOR	3	PA, QL
COZAAR	E	
CRESTOR	E	
digitek oral tablet 125 mcg, 250 mcg	1	
digox	1	
digoxin oral tablet	1	
diltiazem hcl er beads	2	
diltiazem hcl er coated beads	2	
diltiazem hcl er oral capsule extended release 12 hour	1	
diltiazem hcl er oral capsule extended release 24 hour	1	
diltiazem hcl er oral tablet extended release 24 hour	2	

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Drug Name	Drug Tier	Requirements & Limits
diltiazem hcl oral	1	
dilt-xr	1	
DIOVAN	E	
DIOVAN HCT	E	
dofetilide	2	
doxazosin mesylate oral	1	
DYRENIUM	E	
EDARBI	E	
EDARBYCLOR	E	
enalapril maleate oral solution	3	PA
enalapril maleate oral tablet	1	
enalapril-hydrochlorothiazide	1	
ENTRESTO ORAL TABLET	4	PA, QL
EPANED	4	PA
eplerenone	2	
EXFORGE	E	
EXFORGE HCT	E	
ezetimibe	2	
ezetimibe-simvastatin	3	
felodipine er	1	
fenofibrate micronized	2	
fenofibrate oral capsule 134 mg, 200 mg, 67 mg	2	
fenofibrate oral capsule 150 mg, 50 mg	E	
fenofibrate oral tablet 120 mg, 40 mg	E	
fenofibrate oral tablet 145 mg, 160 mg, 48 mg, 54 mg	2	
fenofibric acid oral capsule delayed release	3	
FENOGLIDE	E	
flecainide acetate	1	
fluvastatin sodium	1	
fosinopril sodium	1	
fosinopril sodium-hctz	1	
FUROSCIX	4	PA, QL
furosemide oral	1	
gemfibrozil oral	1	

Drug Name	Drug Tier	Requirements & Limits
guanfacine hcl	1	
HEMANGEOL	3	
hydralazine hcl oral	1	
hydrochlorothiazide oral	1	
HYZAAR	E	
icosapent ethyl	E	PA
indapamide	1	
INDERAL LA	E	
INSPRA	E	
irbesartan	1	
irbesartan-hydrochlorothiazide	1	
ISORDIL TITRADOSE	E	
isosorb dinitrate-hydralazine	2	
isosorbide dinitrate oral tablet 10 mg, 20 mg, 30 mg, 5 mg	1	
isosorbide dinitrate oral tablet 40 mg	E	
isosorbide mononitrate	1	
isosorbide mononitrate er	1	
ivabradine	3	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	
LIPITOR	E	
LIPOFEN	E	
lisinopril oral	1	
lisinopril-hydrochlorothiazide	1	
LIVALO	E	ST
LODOCO	4	QL
LOPID	4	
LOPRESSOR	4	
losartan potassium oral	1	
losartan potassium-hctz	1	
LOTENSIN	4	

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Drug Name	Drug Tier	Requirements & Limits
LOTENSIN HCT	4	
LOTREL	E	
lovastatin oral	1	H
LOVAZA	E	
matzim la	2	
MAXZIDE ORAL TABLET 75-50 MG	4	
MAXZIDE-25 ORAL TABLET 37.5-25 MG	4	
metolazone	1	
metoprolol succinate er oral tablet extended release 24 hour 100 mg, 200 mg, 50 mg	2	
metoprolol succinate er oral tablet extended release 24 hour 25 mg	1	
metoprolol tartrate oral tablet 100 mg, 25 mg, 50 mg	1	
metoprolol tartrate oral tablet 37.5 mg, 75 mg	E	
metoprolol-hydrochlorothiazide	1	
mexiletine hcl oral	1	
MICARDIS	E	
MICARDIS HCT	E	
midodrine hcl	1	
MINIPRESS ORAL CAPSULE 1 MG, 2 MG, 5 MG	4	
minoxidil oral	1	
moexipril hcl	1	
MULTAQ	4	PA
nadolol oral	1	
nebivolol hcl	E	
NEXLETOL	2	PA, ST, QL
NEXLIZET	2	PA, ST, QL
niacin er (antihyperlipidemic)	2	
NIASPAN ORAL TABLET EXTENDED RELEASE 1000 MG, 500 MG, 750 MG	E	
nifedipine er	1	
nifedipine er osmotic release	1	

Drug Name	Drug Tier	Requirements & Limits
nifedipine oral	1	
nisoldipine er	2	
NITRO-BID	2	
NITRO-DUR	3	
nitroglycerin rectal	3	QL
nitroglycerin sublingual	1	
nitroglycerin transdermal	1	
NITROSTAT	4	
NORLIQVA	4	PA
NORVASC	E	
olmesartan medoxomil oral	2	
olmesartan medoxomil-hctz	2	
olmesartan-amlodipine-hctz	E	
omega-3-acid ethyl esters	2	
PACERONE ORAL TABLET 100 MG, 400 MG	3	
PACERONE ORAL TABLET 200 MG	4	
pentoxifylline er	1	
perindopril erbumine	2	
pindolol	1	
pitavastatin calcium	E	ST
PRALUENT	E	PA, ST, QL
pravastatin sodium	1	
prazosin hcl oral	1	
prevalite	1	
PROCARDIA XL	E	
propafenone hcl	1	
propafenone hcl er	3	
propranolol hcl er	2	
propranolol hcl oral	1	
QUESTRAN	4	
QUESTRAN LIGHT	4	
quinapril hcl	1	
ramipril	1	
ranolazine er	2	
RECTIV	4	QL
REPATHA	2	PA, ST, QL

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Drug Name	Drug Tier	Requirements & Limits
REPATHA PUSHTRONEX SYSTEM	2	PA, ST, QL
REPATHA SURECLICK	2	PA, ST, QL
rosuvastatin calcium oral	2	
RYTHMOL SR ORAL CAPSULE EXTENDED RELEASE 12 HOUR 225 MG, 325 MG, 425 MG	E	
simvastatin oral tablet 10 mg, 20 mg, 40 mg, 5 mg	1	H-PA
simvastatin oral tablet 80 mg	1	
SOAANZ	E	QL
sotalol hcl (af)	1	
sotalol hcl oral	1	
spironolactone oral tablet	1	
spironolactone-hctz	1	
SULAR	4	
TEKTURNA	3	
telmisartan	2	
telmisartan-hctz	2	
TENORETIC 100	E	
TENORETIC 50	E	
TENORMIN	E	
THALITONE	E	
tiadylt er	2	
TIAZAC	4	
TIKOSYN	4	
TOPROL XL	E	
torseamide	1	
trandolapril	1	
triamterene oral	3	
triamterene-hctz	1	
TRIBENZOR	E	
TRICOR	E	
TRILIPIX	E	
valsartan oral tablet	2	
valsartan-hydrochlorothiazide	1	
VASCEPA	E	PA
VASERETIC	E	
VASOTEC	E	

Drug Name	Drug Tier	Requirements & Limits
verapamil hcl er oral capsule extended release 24 hour 100 mg, 200 mg, 300 mg	3	
verapamil hcl er oral capsule extended release 24 hour 120 mg, 180 mg, 240 mg, 360 mg	1	
verapamil hcl er oral tablet extended release	1	
verapamil hcl oral	1	
VERELAN	4	
VERELAN PM	4	
VERQUVO	4	PA, QL
VYTORIN	E	
WELCHOL ORAL TABLET	E	
ZESTORETIC	E	
ZESTRIL	4	
ZETIA	E	
ZIAC ORAL TABLET 10-6.25 MG, 2.5-6.25 MG	3	
ZIAC ORAL TABLET 5-6.25 MG	4	
ZOCOR	E	
<b>Central Nervous System Agents - Drugs for Attention Deficit Disorder</b>		
ADDERALL	E	
ADDERALL XR	E	QL
ADHANSIA XR ORAL CAPSULE EXTENDED RELEASE 24 HOUR 25 MG, 35 MG, 45 MG, 55 MG, 70 MG, 85 MG	E	QL
ADZENYS XR-ODT	E	QL
amphetamine sulfate	2	
amphetamine-dextroamphetamine	1	
amphetamine-dextroamphetamine er	2	QL
amphet-dextroamphet 3-bead er	E	QL
APTENSIO XR	E	QL
atomoxetine hcl	3	QL
AZSTARYS	3	ST, QL
clonidine hcl er oral tablet extended release 12 hour	3	

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Drug Name	Drug Tier	Requirements & Limits
CONCERTA	E	QL
COTEMPLA XR-ODT	E	QL
DAYTRANA	E	QL
DEXEDRINE	E	QL
dexmethylphenidate hcl	1	
dexmethylphenidate hcl er	2	QL
dextroamphetamine sulfate er oral capsule extended release 24 hour 10 mg, 5 mg	2	QL
dextroamphetamine sulfate er oral capsule extended release 24 hour 15 mg	3	QL
dextroamphetamine sulfate oral tablet 10 mg, 5 mg	2	
dextroamphetamine sulfate oral tablet 15 mg, 2.5 mg, 20 mg, 30 mg, 7.5 mg	E	
DYANAVEL XR	E	QL
EVEKEO	E	
FOCALIN	4	
FOCALIN XR	E	QL
guanfacine hcl er	2	
INTUNIV	E	
JORNAY PM	3	ST, QL
lisdexamfetamine dimesylate	3	QL
METHYLIN	4	
methylphenidate	E	QL
methylphenidate hcl er (cd)	2	QL
methylphenidate hcl er (la) oral capsule extended release 24 hour 10 mg, 20 mg, 30 mg, 40 mg	2	QL
methylphenidate hcl er (la) oral capsule extended release 24 hour 60 mg	2	
methylphenidate hcl er (osm) oral tablet extended release 18 mg, 27 mg, 36 mg, 54 mg	2	QL
METHYLPHENIDATE HCL ER (OSM) ORAL TABLET EXTENDED RELEASE 45 MG, 63 MG	E	QL

Drug Name	Drug Tier	Requirements & Limits
methylphenidate hcl er (osm) oral tablet extended release 72 mg	E	QL
methylphenidate hcl er (xr)	E	QL
methylphenidate hcl er oral tablet extended release	2	QL
methylphenidate hcl er oral tablet extended release 24 hour	E	QL
methylphenidate hcl oral solution	1	
methylphenidate hcl oral tablet	1	
methylphenidate hcl oral tablet chewable	3	
MYDAYIS	E	QL
QELBREE	E	PA, QL
QUILLICHEW ER	E	QL
QUILLIVANT XR	E	QL
RELEXXII	E	QL
RITALIN	E	
RITALIN LA	E	QL
STRATTERA	E	QL
VYVANSE	E	QL
ZENZEDI	E	
<b>Central Nervous System Agents - Drugs for Multiple Sclerosis</b>		
AMPYRA	E	PA, QL, SP
AUBAGIO	E	PA, QL, SP
AVONEX PEN	2	PA, QL, SP
AVONEX PREFILLED	2	PA, QL, SP
BAFIERTAM	2	PA, QL, SP
BETASERON	2	PA, QL, SP
COPAXONE	E	PA, QL, SP
dalfampridine er	2	PA, QL, SP
dimethyl fumarate oral	1	PA, QL, SP
EXTAVIA	E	PA, ST, QL, SP
fingolimod hcl	1	PA, QL, SP
GILENYA ORAL CAPSULE 0.25 MG	4	PA, QL, SP
GILENYA ORAL CAPSULE 0.5 MG	E	PA, QL, SP

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Drug Name	Drug Tier	Requirements & Limits
glatiramer acetate	2	PA, QL, SP
glatopa	2	PA, QL, SP
KESIMPTA	2	PA, QL, SP
MAVENCLAD	3	PA, ST, QL, SP
MAYZENT ORAL TABLET 0.25 MG, 2 MG	3	PA, QL, SP
MAYZENT ORAL TABLET 1 MG	4	PA, QL, SP
MAYZENT STARTER PACK ORAL TABLET THERAPY PACK 12 X 0.25 MG	3	PA, QL, SP
MAYZENT STARTER PACK ORAL TABLET THERAPY PACK 7 X 0.25 MG	4	PA, QL, SP
PLEGRIDY INTRAMUSCULAR	3	PA, QL
PLEGRIDY STARTER PACK	3	PA, QL, SP
PLEGRIDY SUBCUTANEOUS	3	PA, QL, SP
REBIF	E	PA, QL, SP
REBIF TITRATION PACK	E	PA, QL, SP
TECFIDERA ORAL CAPSULE DELAYED RELEASE	E	PA, QL, SP
teriflunomide	2	PA, QL, SP
VUMERITY	E	PA, ST, QL, SP
<b>Central Nervous System Agents - Miscellaneous</b>		
AUSTEDO	2	PA, QL, SP
AUSTEDO XR ORAL TABLET EXTENDED RELEASE 24 HOUR 12 MG, 24 MG, 6 MG	2	PA, QL, SP
AUSTEDO XR ORAL TABLET EXTENDED RELEASE 24 HOUR 30 MG, 36 MG, 42 MG, 48 MG	2	PA, SP
AUSTEDO XR PATIENT TITRATION	2	PA, QL, SP
gabapentin (once-daily)	E	QL
GRALISE ORAL TABLET	E	QL
HORIZANT	E	QL
INGREZZA ORAL CAPSULE 40 MG, 80 MG	2	PA, QL, SP
INGREZZA ORAL CAPSULE 60 MG	2	PA, QL
INGREZZA ORAL CAPSULE SPRINKLE	2	SP

Drug Name	Drug Tier	Requirements & Limits
INGREZZA ORAL CAPSULE THERAPY PACK	2	PA, QL, SP
LYRICA ORAL CAPSULE	4	PA
NUEDEXTA	2	PA, QL
pregabalin oral capsule	2	
RADICAVA ORS	3	PA, QL, SP
RADICAVA ORS STARTER KIT	3	PA, QL, SP
RELYVRIO	4	PA, QL, SP
riluzole	1	SP
SAVELLA	4	QL
TEGLUTIK	3	PA
VEOZAH	4	PA, QL
ZEPOSIA	3	PA, ST, QL, SP
ZEPOSIA 7-DAY STARTER PACK	3	PA, ST, QL, SP
ZEPOSIA STARTER KIT	3	PA, ST, SP
<b>Dental and Oral Agents - Drugs for Mouth and Throat Conditions</b>		
cevimeline hcl	1	
chlorhexidine gluconate mouth/throat	1	
CLINPRO 5000	3	
DENTA 5000 PLUS	4	
DENTAGEL	4	
EVOXAC	E	
FLUORIDEX	3	
FLUORIDEX ENHANCED WHITENING	3	
FLUORIMAX 5000	3	
JUST RIGHT 5000	3	
KOURZEQ	3	
lidocaine hcl mouth/throat	1	
lidocaine viscous hcl	1	
ORALONE	3	
PERIDEX	4	
periogard	1	
pilocarpine hcl oral	1	
PREVIDENT 5000 BOOSTER PLUS	3	
PREVIDENT 5000 DRY MOUTH	4	

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

Dermatological Agents - Drugs for Skin Conditions		
ABSORICA	E	PA
ACANYA	E	QL
accutane	2	
acitretin	1	
ACZONE	E	QL
adapalene external gel	E	PA, QL
adapalene-benzoyl peroxide external gel 0.1-2.5 %	3	QL
adapalene-benzoyl peroxide external gel 0.3-2.5 %	E	QL
AKLIEF	4	PA, QL
ala-cort	E	
alclometasone dipropionate	1	
ALTRENO	E	PA, QL
amnesteem	2	
AMZEEQ	4	QL
ARAZLO	E	PA, QL
ATRALIN	E	PA, QL
AVAR CLEANSER	4	
AVAR LS CLEANSER	E	
AVAR-E EMOLLIENT	3	
AVAR-E GREEN	3	
AVAR-E LS	3	

Drug Name	Drug Tier	Requirements & Limits
AVITA EXTERNAL CREAM 0.025 %	E	PA, QL
AVITA EXTERNAL GEL 0.025 %	E	PA
azelaic acid external	3	
AZELEX	3	QL
BENZAMYCIN	2	QL
benzoyl peroxide-erythromycin	1	QL
betamethasone dipropionate aug external cream	1	
betamethasone dipropionate aug external lotion	3	
betamethasone dipropionate aug external ointment	3	
betamethasone dipropionate external cream	2	
betamethasone dipropionate external lotion	1	
betamethasone dipropionate external ointment	2	
betamethasone valerate external cream	1	
betamethasone valerate external lotion	1	
betamethasone valerate external ointment	1	
brimonidine tartrate external	3	PA, QL
calcipotriene external cream	2	QL
calcipotriene external ointment	2	
calcipotriene external solution	1	QL
calcipotriene-betameth diprop external suspension	E	QL
CALCITRENE	3	
CARAC	E	
CIBINQO	2	PA, QL, SP
ciclopirox olamine external suspension	1	
claravis	2	
CLEOCIN-T	4	
clindacin	3	
clindacin etz external swab	1	
clindacin-p	1	

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Drug Name	Drug Tier	Requirements & Limits
CLINDAGEL	E	QL
clindamycin phos-benzoyl perox external gel 1.2-5 %	3	QL
clindamycin phos-benzoyl perox external gel 1-5 %, 1.2-2.5 %, 1.2-3.75 %	E	QL
clindamycin phosphate external foam	3	
clindamycin phosphate external lotion	3	
clindamycin phosphate external solution	1	
clindamycin phosphate external swab	1	
clindamycin phosphate gel 1 % external	2	QL
clindamycin phosphate gel 1 % external	E	(generic for Clindagel), QL
clindamycin phosphate gel 1 % external	2	(generic for Cleocin-T), QL
clindamycin-tretinoin	E	QL
clobetasol propionate e	2	QL
clobetasol propionate external cream	2	QL
clobetasol propionate external foam	E	QL
clobetasol propionate external gel	2	QL
clobetasol propionate external liquid	1	QL
clobetasol propionate external ointment	2	QL
clobetasol propionate external shampoo	E	QL
clobetasol propionate external solution	1	QL
CLOBEX EXTERNAL SHAMPOO	E	QL
CLOBEX SPRAY	E	QL
clodan	E	QL
clotrimazole external cream	E	
clotrimazole-betamethasone	1	
CORDRAN	3	QL
dapsone external	3	QL

Drug Name	Drug Tier	Requirements & Limits
DAZOMON	E	PA
DERMACINRX UREA	E	
DERMA-SMOOTH/FS BODY	4	QL
DERMA-SMOOTH/FS SCALP	4	
desonide external cream	2	QL
desonide external lotion	3	QL
desonide external ointment	2	QL
DESOWEN	3	QL
desoximetasone external cream	1	QL
desoximetasone external ointment	3	QL
diclofenac sodium external gel 3 %	2	PA, QL
DIFFERIN EXTERNAL GEL 0.3 %	E	PA, QL
DIPROLENE	4	
DOVONEX EXTERNAL CREAM 0.005 %	E	QL
doxycycline	E	
DRYSOL	4	
DUPIXENT SUBCUTANEOUS SOLUTION PEN-INJECTOR	2	PA, QL, SP
DUPIXENT SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 100 MG/0.67ML	2	PA, QL
DUPIXENT SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 200 MG/1.14ML, 300 MG/2ML	2	PA, QL, SP
EFUDEX	4	
ELIDEL	E	QL
ENSTILAR	4	QL
EPIDUO	E	QL
EPIDUO FORTE	E	QL
ERYGEL	3	
erythromycin external	1	
EUCRISA	3	ST, QL
EVOCALIN EXTERNAL FOAM 1 %	4	
FABIOR	E	PA, QL
FINACEA EXTERNAL FOAM	4	
FINACEA EXTERNAL GEL	E	
fluocinolone acetonide body	3	QL

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Drug Name	Drug Tier	Requirements & Limits
fluocinolone acetonide external cream	3	QL
fluocinolone acetonide external ointment	2	QL
fluocinolone acetonide external solution	3	QL
fluocinolone acetonide scalp	3	
fluocinonide external cream 0.05 %	1	
fluocinonide external cream 0.1 %	E	QL
fluocinonide external gel	1	
fluocinonide external ointment	1	
fluocinonide external solution	1	
FLUOROURACIL EXTERNAL CREAM 0.5 %	E	
fluorouracil external cream 5 %	1	
fluticasone propionate external cream	1	
fluticasone propionate external ointment	1	
halobetasol propionate external cream	2	QL
halobetasol propionate external ointment	2	QL
hydrocortisone ace-pramoxine external cream 2.5-1 %	1	
hydrocortisone butyrate external cream	1	
hydrocortisone external cream 1 %	E	
hydrocortisone external cream 2.5 %	1	
hydrocortisone external lotion 2 %, 2.5 %	1	
hydrocortisone external ointment 1 %, 2.5 %	1	
hydrocortisone lotion 2%	3	
hydrocortisone valerate external cream	2	QL
hydrocortisone valerate external ointment	3	QL
HYDROXYM EXTERNAL CREAM	E	

Drug Name	Drug Tier	Requirements & Limits
imiquimod external cream 3.75 %	E	QL
imiquimod external cream 5 %	1	
imiquimod pump	E	QL
IMPOYZ	E	QL
isotretinoin oral capsule 10 mg, 20 mg, 30 mg, 40 mg	2	
isotretinoin oral capsule 25 mg, 35 mg	E	PA
ivermectin external cream	E	QL
KLARON	4	
KLISYRI	4	ST, QL
LOPROX EXTERNAL SUSPENSION 0.77 %	E	
METROCREAM	4	
METROGEL	E	
METROLOTION	4	
metronidazole external cream	1	
metronidazole external gel 0.75 %	1	
metronidazole external gel 1 %	E	
metronidazole external lotion	1	
MIRVASO	2	PA, QL
mometasone furoate external	1	
naftifine hcl external gel	E	
NAFTIN	E	
NATROBA	E	
neuac	3	QL
NORITATE	E	
OLUX EXTERNAL FOAM 0.05 %	E	QL
ONEXTON	E	QL
OPZELURA	4	PA, QL, SP
ORACEA	E	
OVACE PLUS WASH EXTERNAL LIQUID	4	
OVACE WASH	4	
PANRETIN	3	
pimecrolimus	3	QL
PLEXION CLEANSER	E	
PLEXION EXTERNAL CREAM	E	

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Drug Name	Drug Tier	Requirements & Limits
podofilox external solution	1	
PRAMOSONE EXTERNAL CREAM	2	
RETIN-A	E	PA, QL
RETIN-A MICRO GEL 0.04 %, 0.1 %	E	PA, QL
RETIN-A MICRO PUMP	E	PA, QL
RHOFADE	4	PA, QL
rosadan external cream 0.75 %	1	
rosadan external gel 0.75 %	1	
SANTYL	3	QL
selenium sulfide external lotion	1	
sodium sulfacetamide wash	1	
SOOLANTRA	4	QL
spinosad	3	
sss 10-5 external cream	1	
sulfacetamide sodium (acne)	1	
sulfacetamide sodium external	1	
sulfacetamide sodium-sulfur external cream 10-2 %, 10-5 %	1	
sulfacetamide sodium-sulfur external cream 9.8-4.8 %	E	
sulfacetamide sodium-sulfur external liquid 10-2 %, 9-4.5 %, 9.8-4.8 %	E	
sulfacetamide sodium-sulfur external liquid 10-5 %, 9-4 %	1	
sulfacetamide sodium-sulfur external suspension 10-5 %	1	
sulfacetamide sodium-sulfur external suspension 8-4 %	E	
sulfacetamide sod-sulfur wash external liquid 9-4 %	1	
sulfacetamide sod-sulfur wash external liquid 9-4.5 %	E	
SULFACLEANSE 8/4	E	
SUMADAN WASH	E	
SYNALAR	E	QL
SYNALAR EXTERNAL SOLUTION 0.01 %	E	QL
TACLONEX EXTERNAL OINTMENT 0.005-0.064 %	E	QL

Drug Name	Drug Tier	Requirements & Limits
TACLONEX EXTERNAL SUSPENSION	3	QL
tacrolimus external	2	QL
tazarotene external cream	3	PA, QL
TAZAROTENE EXTERNAL FOAM	E	PA, QL
TAZORAC EXTERNAL CREAM	4	PA, QL
TEMOVATE EXTERNAL CREAM 0.05 %	4	QL
TOLAK	E	
TOPICORT EXTERNAL CREAM	4	QL
TOPICORT EXTERNAL OINTMENT	4	QL
tretinoin external cream	3	QL
tretinoin external gel 0.01 %, 0.025 %	E	QL
tretinoin external gel 0.05 %	E	PA, QL
tretinoin microsphere	E	PA, QL
tretinoin microsphere pump	E	PA, QL
triamcinolone acetonide external cream 0.025 %, 0.1 %	1	
triamcinolone acetonide external cream 0.5 %	1	QL
triamcinolone acetonide external lotion	1	
triamcinolone acetonide external ointment 0.025 %, 0.1 %, 0.5 %	1	
triamcinolone acetonide external ointment 0.05 %	E	
triamcinolone in absorbbase	E	
TRIANEX EXTERNAL OINTMENT 0.05 %	E	
triderm	1	QL
TRIDESILON EXTERNAL CREAM 0.05 %	3	QL
tritocin external ointment 0.05 %	E	
TWYNEO	E	QL
urea external cream 20 %, 40 %, 45 %	1	
urea external cream 41 %, 47 %	E	
UREMEZ-40	3	

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Drug Name	Drug Tier	Requirements & Limits
VANOS	E	QL
VELTIN EXTERNAL GEL 1.2-0.025 %	E	QL
VTAMA	4	PA, QL
WINLEVI	E	PA, QL
zenatane	2	
ZIANA	E	QL
ZILXI	4	PA, ST, QL
ZORYVE	4	PA, QL
ZYCLARA	E	QL
ZYCLARA PUMP	E	QL
<b>Diabetes - Glucose Monitoring and Supplies</b>		
ACCU-CHEK AVIVA PLUS TEST STRIPS	E	QL
ACCU-CHEK FASTCLIX LANCET DEVICE KIT	1	
ACCU-CHEK FASTCLIX LANCETS	1	
ACCU-CHEK GUIDE KIT W/ DEVICE	3	
ACCU-CHEK GUIDE ME METER	1	
ACCU-CHEK GUIDE TEST STRIPS	3	QL
ACCU-CHEK MULTICLIX LANCET DEVICE KIT	1	
ACCU-CHEK MULTICLIX LANCETS	1	
ACCU-CHEK SMARTVIEW TEST STRIPS	E	QL
ACCU-CHEK SOFT TOUCH LANCETS	1	
ACCU-CHEK SOFTCLIX LANCET	1	
ACCU-CHEK SOFTCLIX LANCET DEVICE KIT	1	
ACCUTREND GLUCOSE	E	QL
ALCOHOL PREP PADS PAD	3	
AQ INSULIN SYRINGE	2	QL
AQINJECT PEN NEEDLE	2	QL
BD AUTOSHIELD DUO PEN NEEDLES	2	QL

Drug Name	Drug Tier	Requirements & Limits
BD ECLIPSE NEEDLE 18G X 1-1/2" , 25G X 5/8" , 27G X 1/2"	2	
BD ECLIPSE NEEDLE 23G X 1" (OTC)	2	
BD ECLIPSE NEEDLE 23G X 1" (RX)	2	
BD ECLIPSE SHIELDED NEEDLE	2	
BD SAFETYGLIDE SHIELDED NEEDLE 21G X 1-1/2"	2	
BD SHARPS COLLECTOR	3	
BD ULTRA-FINE insulin syringes	2	QL
BD ULTRA-FINE PEN NEEDLES	2	QL
BD ULTRA-FINE U-500 insulin syringes	2	QL
BD ULTRA-FINE VEO insulin syringes	2	QL
BIGFOOT UNITY PROGRAM	E	
BIOTEL CARE TEST STRIPS	E	QL
BLOOD GLUCOSE TEST STRIPS	E	QL
BLOOD GLUCOSE TEST STRIPS 333	E	QL
CAREPOINT POLY HUB NEEDLE 18G X 1" , 20G X 1" , 21G X 1" , 22G X 1" , 23G X 1" , 25G X 1" , 25G X 5/8"	2	
CAREPOINT POLY HUB NEEDLE 22G X 1-1/2"	2	
CAREPOINT SAFETY 1ST NEEDLE	2	
CARETOUCH MONITOR SYSTEM	E	
CARETOUCH TEST	E	QL
CEQUR SIMPLICITY 2U 10PK	3	ST
CONTOUR MONITOR KIT W/ DEVICE	E	
CONTOUR NEXT EZ KIT W/ DEVICE	E	
CONTOUR NEXT GEN MONITOR KIT	E	
CONTOUR NEXT GEN TEST STRIPS	2	QL
CONTOUR NEXT GEN TEST STRIPS	2	QL

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Drug Name	Drug Tier	Requirements & Limits
CONTOUR NEXT LINK KIT W/ DEVICE	E	
CONTOUR NEXT LINK KIT W/ DEVICE	E	(Contour Next Link 24 )
CONTOUR NEXT MONITOR KIT W/DEVICE	2	
CONTOUR NEXT ONE DEVICE	E	
CONTOUR NEXT ONE KIT	2	
CONTOUR TEST STRIPS	E	QL
CVS ADVANCED GLUCOSE TEST	E	QL
CVS GLUCOSE METER TEST STRIPS	E	QL
D-CARE BLOOD GLUCOSE	E	QL
D-CARE GLUCOMETER	E	
DEXCOM G6 RECEIVER	3	PA, QL
DEXCOM G6 SENSOR	3	PA, QL
DEXCOM G6 TRANSMITTER	3	PA, QL
DEXCOM G7 RECEIVER	3	PA, QL
DEXCOM G7 SENSOR	3	PA, QL
DROPSAFE SAFETY SYRINGE/ NEEDLE	2	QL
EASY MAX BLOOD GLUCOSE TEST	E	QL
EASY MAX T1 GLUCOSE SYSTEM	E	
EASY TOUCH HEALTHPRO GLUCOSE	E	
EASY TOUCH TEST	E	QL
EASYGLUCO	E	
EASYMAX 15 TEST	E	QL
EASYMAX NG BLOOD GLUCOSE KIT	E	
EMBRACE BLOOD GLUCOSE TEST	E	QL
EMBRACE WAVE BLOOD GLUCOSE IN VITRO	E	QL
ENLITE GLUCOSE SENSOR	3	PA
EQ BLOOD GLUCOSE TEST	E	QL
EVERSENSE E3 SENSOR/ HOLDER	E	PA
EVERSENSE E3 SMART TRANSMITTER	E	PA

Drug Name	Drug Tier	Requirements & Limits
EVERSENSE SENSOR/HOLDER	E	PA
EVERSENSE SMART TRANSMITTER	E	PA
FORA 6 CONNECT/GTEL TEST	E	QL
FORTISCARE G1 TEST STRIP IN VITRO STRIP	E	QL
FORTISCARE TEST IN VITRO STRIP	E	QL
FREESTYLE LIBRE 14 DAY READER	3	PA, QL
FREESTYLE LIBRE 14 DAY SENSOR	3	PA, QL
FREESTYLE LIBRE 2 READER	3	PA, QL
FREESTYLE LIBRE 2 SENSOR	3	PA, QL
FREESTYLE LIBRE 3 PLUS SENSOR	3	PA
FREESTYLE LIBRE 3 READER	3	PA
FREESTYLE LIBRE 3 SENSOR	3	PA, QL
FREESTYLE LIBRE READER	3	PA, QL
FREESTYLE PRECISION NEO SYSTEM	E	
FREESTYLE PRECISION NEO TEST	E	QL
FREESTYLE TEST	E	QL
GLUCOCARD EXPRESSION TEST	E	QL
GLUCOCARD SHINE TEST	E	QL
GLUCOCARD VITAL TEST	E	QL
GUARDIAN 4 GLUCOSE SENSOR	3	PA
GUARDIAN 4 TRANSMITTER	3	PA
GUARDIAN CONNECT TRANSMITTER	3	PA, QL
GUARDIAN LINK 3 TRANSMITTER	3	PA, QL
GUARDIAN REAL-TIME REPLACE PED	3	PA
GUARDIAN SENSOR (3)	3	PA, QL
GUARDIAN SENSOR 3	3	PA, QL
GVOKE HYPOPEN 1-PACK	2	QL
GVOKE HYPOPEN 2-PACK	2	QL
GVOKE KIT	2	
GVOKE PFS	2	QL

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Drug Name	Drug Tier	Requirements & Limits	Drug Name	Drug Tier	Requirements & Limits
HEALTHPRO BLOOD GLUCOSE MONITO	E		MM BLULINK GLUCOSE TEST	E	QL
INPEN 100-BLUE-LILLY-HUMALOG DEVICE	3		MM EASY TOUCH GLUCOSE METER	E	
INPEN 100-BLUE-LILLY-HUMALOG DEVICE	3	ST	MONOJECT HYPODERMIC NEEDLE 18G X 1"	2	
INPEN 100-BLUE-NOVOLOG-FIASP DEVICE	3		NEUTEK 2TEK TEST	E	QL
INPEN 100-BLUE-NOVOLOG-FIASP DEVICE	3	ST	NOVOFINE AUTOCOVER PEN NEEDLE 30G X 8 MM	2	QL
INPEN 100-GREY-LILLY-HUMALOG DEVICE	3		NOVOFINE PEN NEEDLE	2	QL
INPEN 100-GREY-LILLY-HUMALOG DEVICE	3	ST	NOVOFINE PLUS PEN NEEDLE	2	QL
INPEN 100-GREY-NOVOLOG-FIASP DEVICE	3		NOVOPEN ECHO	3	
INPEN 100-GREY-NOVOLOG-FIASP DEVICE	3	ST	NOVOTWIST PEN NEEDLE	2	QL
INPEN 100-GREY-NOVOLOG-FIASP DEVICE	3		OMNIPOD 5 G6 INTRO (GEN 5)	2	PA, QL
INPEN 100-GREY-NOVOLOG-FIASP DEVICE	3	ST	OMNIPOD 5 G6 PODS (GEN 5)	2	PA, QL
INPEN 100-PINK-LILLY-HUMALOG DEVICE	3		OMNIPOD 5 G7 INTRO (GEN 5) KIT	2	PA
INPEN 100-PINK-LILLY-HUMALOG DEVICE	3	ST	OMNIPOD 5 G7 PODS (GEN 5)	2	PA
INPEN 100-PINK-NOVOLOG-FIASP DEVICE	3		ON CALL EXPRESS BLOOD GLUCOSE	E	QL
INPEN 100-PINK-NOVOLOG-FIASP DEVICE	3	ST	ON CALL EXPRESS MONITORING SYS	E	
INSULIN PEN NEEDLES 29G X 12MM , 30G X 5 MM , 31G X 5 MM , 31G X 8 MM , 32G X 4 MM	2	QL	ONETOUCH DELICA PLUS LANCETS	1	
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	ONETOUCH ULTRA 2 KIT W/ DEVICE	1	
LANCETS	1		ONETOUCH ULTRA TEST	1	QL
MICRODOT TEST	E	QL	ONETOUCH ULTRA TEST STRIPS	1	QL
MINILINK REAL-TIME TRANSMITTER	3	PA	ONETOUCH ULTRASOFT LANCETS	1	
MINIMED 630G GUARDIAN PRESS	3	PA	ONETOUCH VERIO FLEX SYSTEM KIT	1	
MM BLOOD GLUCOSE SYSTEM	E		ONETOUCH VERIO IQ SYSTEM KIT W/DEVICE	1	
MM BLOOD GLUCOSE SYSTEM REFILL	E		ONETOUCH VERIO REFLECT KIT W/DEVICE	1	
			ONETOUCH VERIO TEST STRIPS	1	QL
			OPTIUMEZ TEST	E	QL
			PARADIGM REAL-TIME TRANSMITTER	3	PA
			PIP BLOOD GLUCOSE TEST STRIP	E	QL
			PRECISION XTRA	E	

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Drug Name	Drug Tier	Requirements & Limits
PRECISION XTRA BLOOD GLUCOSE	E	QL
PREMIUM BLOOD GLUCOSE TEST	E	QL
PTS PANELS EGLU TEST	E	QL
QUINTET AC BLOOD GLUCOSE TEST	E	QL
QUINTET BLOOD GLUCOSE TEST	E	QL
RELION TRUE MET AIR GLUC METER	E	
RELION TRUE METRIX TEST STRIPS	E	QL
RELION ULTIMA GLUCOSE SYSTEM	E	
RELION ULTIMA TEST	E	QL
RIGHTEST GT333 GLUCOSE TEST	E	QL
SHARPS CONTAINER	3	
TECHLITE INSULIN SYRINGES	2	(ARKRAY), QL
TECHLITE PEN NEEDLES	2	(ARKRAY), QL
TEMPO REFILL	E	
TEMPO WELCOME	E	
TRUE FOCUS BLOOD GLUCOSE STRIP	E	QL
TRUE METRIX AIR GLUCOSE METER KIT	E	
TRUE METRIX BLOOD GLUCOSE TEST	E	QL
TRUE METRIX GO GLUCOSE METER	E	
TRUE METRIX METER KIT	E	
TRUE METRIX PRO BLOOD GLUCOSE	E	QL
TRUETRACK TEST	E	QL
UNISTRIP1 GENERIC	E	QL
VIVAGUARD INO GLUCOSE METER KIT	E	
VIVAGUARD INO TEST STRIPS	E	QL
<b>Diabetes - Insulin</b>		
ADMELOG	E	QL
ADMELOG SOLOSTAR	E	QL

Drug Name	Drug Tier	Requirements & Limits
AFREZZA	E	PA, QL
BASAGLAR KWIKPEN	E	QL
BASAGLAR TEMPO PEN	E	
FIASP	E	ST, QL
FIASP FLEXTOUCH	E	ST, QL
HUMALOG INJECTION	E	QL
HUMALOG KWIKPEN	2	QL
HUMALOG MIX 50/50 KWIKPEN	2	QL
HUMALOG MIX 50/50 VIAL	1	QL
HUMALOG MIX 75/25 KWIKPEN	2	QL
HUMALOG MIX 75/25 VIAL	1	QL
HUMALOG SUBCUTANEOUS	2	QL
HUMALOG TEMPO PEN	E	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	1	QL
HUMULIN R VIAL	1	QL
INSULIN ASPART	E	ST, QL
INSULIN ASPART FLEXPEN	E	ST, QL
INSULIN DEGLUDEC FLEXTOUCH	E	QL
INSULIN GLARGINE	E	QL
INSULIN GLARGINE MAX SOLOSTAR	E	QL
INSULIN GLARGINE SOLOSTAR	E	QL
INSULIN GLARGINE-YFGN SUBCUTANEOUS SOLUTION PEN-INJECTOR	E	
INSULIN LISPRO	1	QL
INSULIN LISPRO (1 UNIT DIAL)	2	(Insulin Lispro Kwikpen), QL
INSULIN LISPRO JUNIOR KWIKPEN	2	QL
INSULIN LISPRO PROT & LISPRO	2	QL

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Drug Name	Drug Tier	Requirements & Limits
LANTUS SOLOSTAR	1	QL
LANTUS U-100 VIAL	1	QL
LEVEMIR FLEXPEN	E	PA, QL
LEVEMIR U-100 FLEXTOUCH SUBCUTANEOUS SOLUTION PEN-INJECTOR 100 UNIT/ML	E	PA, QL
LYUMJEV KWIKPEN	2	QL
LYUMJEV TEMPO PEN	E	QL
LYUMJEV VIAL	1	QL
NOVOLIN 70/30 FLEXPEN	E	ST, QL
NOVOLIN 70/30 FLEXPEN RELION	E	ST, QL
NOVOLIN 70/30 RELION	E	ST, QL
NOVOLIN 70/30 VIAL	E	ST, QL
NOVOLIN N FLEXPEN	E	ST, QL
NOVOLIN N FLEXPEN RELION	E	ST, QL
NOVOLIN N RELION	E	ST, QL
NOVOLIN N VIAL	E	ST, QL
NOVOLIN R FLEXPEN	E	ST, QL
NOVOLIN R FLEXPEN RELION	E	ST, QL
NOVOLIN R RELION	E	ST, QL
NOVOLIN R VIAL	E	ST, QL
NOVOLOG FLEXPEN	E	ST, QL
NOVOLOG FLEXPEN RELION	E	ST, QL
NOVOLOG RELION	E	ST, QL
NOVOLOG U-100 VIAL	E	ST, QL
SEMGLEE (YFGN) SUBCUTANEOUS SOLUTION PEN-INJECTOR	E	
TOUJEO MAX SOLOSTAR	2	QL
TOUJEO SOLOSTAR	2	QL
TRESIBA FLEXTOUCH	E	QL
<b>Diabetes - Non-Insulin Agents</b>		
acarbose oral	1	
ACTOPLUS MET	4	QL
ACTOS	E	QL
ADLYXIN STARTER PACK SUBCUTANEOUS PEN-INJECTOR KIT 10 & 20 MCG/0.2ML	4	

Drug Name	Drug Tier	Requirements & Limits
ADLYXIN SUBCUTANEOUS SOLUTION PEN-INJECTOR 20 MCG/0.2ML	4	
ALOGLIPTIN BENZOATE	2	QL
ALOGLIPTIN-METFORMIN HCL	2	QL
AMARYL ORAL TABLET 1 MG, 2 MG, 4 MG	E	
BAQSIMI ONE PACK	2	QL
BAQSIMI TWO PACK	2	QL
BYDUREON BCISE AUTOINJECTOR	2	PA, QL
BYETTA 10 MCG PEN	2	PA, QL
BYETTA 5 MCG PEN	2	PA, QL
CYCLOSET	3	
DAPAGLIFLOZIN PRO-METFORMIN ER	E	ST, QL
DAPAGLIFLOZIN PROPANEDIOL	E	ST, QL
FARXIGA	E	ST, QL
glimepiride	1	
glipizide er	1	
glipizide oral tablet 10 mg, 5 mg	1	
glipizide oral tablet 2.5 mg	E	
glipizide xl	1	
glipizide-metformin hcl	2	
GLUCAGON EMERGENCY KIT	2	QL (manufactured by Fresenius)
glucagon emergency kit 1 mg injection	2	QL
GLUCAGON EMERGENCY KIT 1 MG INJECTION	E	QL
GLUCOTROL XL	4	
GLUMETZA	E	PA
glyburide micronized	1	
glyburide oral	1	
glyburide-metformin	1	
GLYNASE ORAL TABLET 1.5 MG	3	
GLYNASE ORAL TABLET 3 MG, 6 MG	4	
GLYXAMBI	2	ST, QL

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Drug Name	Drug Tier	Requirements & Limits
INVOKAMET XR	E	ST, QL
INVOKANA	E	ST, QL
JANUMET	E	ST, QL
JANUMET XR	E	ST, QL
JANUVIA	E	ST, QL
JARDIANCE	2	QL
JENTADUETO	2	QL
JENTADUETO XR	2	QL
KOMBIGLYZE XR ORAL TABLET EXTENDED RELEASE 24 HOUR 2.5-1000 MG, 5-1000 MG, 5-500 MG	E	QL
LIRAGLUTIDE PEN-INJECTOR 18MG/3ML	2	PA, (2 Pak), QL
LIRAGLUTIDE PEN-INJECTOR 18MG/3ML	3	PA, (3 Pak), QL
metformin hcl er	1	
metformin hcl er (mod)	E	PA
metformin hcl er (osm)	E	PA
metformin hcl oral solution	3	
metformin hcl oral tablet 1000 mg, 500 mg, 850 mg	1	
metformin hcl oral tablet 625 mg	E	
MOUNJARO	2	PA, QL
nateglinide	2	QL
ONGLYZA	E	QL
OZEMPIC	2	PA, QL
pioglitazone hcl	1	QL
pioglitazone hcl-metformin hcl	2	QL
PRECOSE ORAL TABLET 100 MG, 25 MG, 50 MG	4	
repaglinide	2	QL
RIOMET	E	
RYBELSUS	2	PA, QL
saxagliptin hcl	2	QL
saxagliptin-metformin er	2	QL
SOLIQUA	2	QL
STEGLATRO	E	ST, QL
SYMLINPEN 120	3	QL

Drug Name	Drug Tier	Requirements & Limits
SYMLINPEN 60	3	QL
SYNJARDY	2	QL
SYNJARDY XR	2	QL
TRADJENTA	2	QL
TRIJARDY XR	2	QL
TRULICITY	2	PA, QL
XIGDUO XR	E	ST, QL
ZEGALOGUE SUBCUTANEOUS SOLUTION AUTO-INJECTOR	2	QL
<b>Drugs for Blood Disorders</b>		
ADVATE	2	SP
ADYNOVATE	4	PA, SP
AFSTYLA INTRAVENOUS KIT 1000 UNIT, 2000 UNIT, 250 UNIT, 3000 UNIT, 500 UNIT	4	PA
AFSTYLA INTRAVENOUS KIT 1500 UNIT, 2500 UNIT	4	PA, SP
AGRYLIN	E	
ALPHANATE	2	SP
ALPROLIX	3	SP
ALTUVIIIO	4	PA, SP
ALVAIZ	4	PA, SP
anagrelide hcl	1	
ARANESP (ALBUMIN FREE)	2	QL, SP
aspirin-dipyridamole er	3	
DOPTELET	4	PA, QL, SP
ELOCTATE	4	PA, SP
FABHALTA	2	PA, QL, SP
HEMLIBRA SUBCUTANEOUS SOLUTION 105 MG/0.7ML, 150 MG/ML, 30 MG/ML, 300 MG/2ML, 60 MG/0.4ML	2	PA, SP
HEMLIBRA SUBCUTANEOUS SOLUTION 12 MG/0.4ML	E	PA, SP
HEMOFIL M	2	SP
heparin sodium (porcine) injection solution	1	
heparin sodium (porcine) pf	1	
HUMATE-P	2	SP
IDELVION	3	SP

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Drug Name	Drug Tier	Requirements & Limits
KOATE	2	SP
KOATE-DVI	2	SP
KOGENATE FS	2	SP
KOVALTRY	2	SP
MULPLETA	4	PA, QL, SP
NEULASTA	2	
NOVOEIGHT	2	SP
NUWIQ INTRAVENOUS KIT 1000 UNIT, 2000 UNIT, 250 UNIT, 2500 UNIT, 3000 UNIT, 4000 UNIT, 500 UNIT	2	SP
NUWIQ INTRAVENOUS KIT 1500 UNIT	2	
PROMACTA ORAL TABLET	E	PA, SP
RECOMBINATE	2	SP
RETACRIT INJECTION SOLUTION 10000 UNIT/ML, 2000 UNIT/ML, 3000 UNIT/ML, 4000 UNIT/ML, 40000 UNIT/ML	2	QL, SP
RETACRIT INJECTION SOLUTION 20000 UNIT/ML	2	
TAVALISSE	4	PA, QL, SP
tranexamic acid oral	2	QL
UDENYCA SUBCUTANEOUS SOLUTION AUTO-INJECTOR	2	
WILATE	2	
ZARXIO	2	
<b>Drugs for Sexual Dysfunction</b>		
ADDYI	4	PA, QL
CIALIS	E	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	2	QL
STENDRA	4	PA, QL
tadalafil oral	2	QL
vardenafil hcl oral tablet	3	QL
VIAGRA	E	QL
VYLEESI	4	PA, QL

Drug Name	Drug Tier	Requirements & Limits
<b>Electrolytes / Vitamins</b>		
adc/f (0.5mg/ml)	1	
calcium acetate (phos binder) oral tablet	1	
calcium acetate oral tablet 667 mg	1	
CARNITOR ORAL SOLUTION	4	
CARNITOR SF	4	
CITRANATAL 90 DHA	3	
CITRANATAL ASSURE	3	
CITRANATAL DHA ORAL 27-1 & 250 MG	4	
COMPLETENATE	3	
CO-NATAL FA	2	
CONCEPT DHA	4	
cyanocobalamin injection solution 1000 mcg/ml	1	
CYANOCOBALAMIN INJECTION SOLUTION 2000 MCG/ML	3	
cyanocobalamin nasal	3	
DAVIMET-FLUORIDE	E	
deferasirox oral tablet	2	PA, SP
DODEX	4	
DRISDOL	4	
EFFER-K ORAL TABLET EFFERVESCENT 10 MEQ, 20 MEQ	2	
ELITE-OB	3	
ergocalciferol oral capsule	1	
FLORIVA PLUS	E	
fluoritab oral solution 0.275 (0.125 f) mg/drop	1	H
folic acid oral tablet 1 mg	1	
JADENU	E	PA, SP
klor-con	1	
klor-con 10	1	
klor-con m10	1	
klor-con m15	1	
klor-con m20	1	
kosher prenatal plus iron	1	
K-PHOS-NEUTRAL	2	

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Drug Name	Drug Tier	Requirements & Limits	Drug Name	Drug Tier	Requirements & Limits
K-TAB	3		NIVA-PLUS	3	
levocarnitine oral solution	1		OB COMPLETE	3	
levocarnitine sf	1		ONE VITE WOMENS PLUS	3	
LOKELMA	3	PA, QL	ORACIT	2	
M-NATAL PLUS	3		ORAL CITRATE	2	
multivitamin w/fluoride tablet chewable 0.25 mg oral	1		PHOSPHA 250 NEUTRAL	2	
multivitamin w/fluoride tablet chewable 0.25 mg oral	E		phosphorous	1	
multivitamin w/fluoride tablet chewable 0.5 mg oral	1		phospho-trin 250 neutral	1	
multivitamin w/fluoride tablet chewable 0.5 mg oral	E		pnv-dha	3	
multivitamin w/fluoride tablet chewable 1 mg oral	1		POKONZA	E	
multivitamin w/fluoride tablet chewable 1 mg oral	E		POLY-VI-FLOR	E	
multi-vitamin/fluoride	1		potassium chloride crys er	1	
multivitamin/fluoride tablet chewable 0.25 mg oral (rx)	1		potassium chloride er	1	
MULTIVITAMIN/FLUORIDE TABLET CHEWABLE 0.25 MG ORAL (RX)	3		potassium chloride oral	1	
multivitamin/fluoride tablet chewable 0.5 mg oral (rx)	1		potassium citrate er	1	
MULTIVITAMIN/FLUORIDE TABLET CHEWABLE 0.5 MG ORAL (RX)	3		potassium citrate-citric acid	1	
multivitamin/fluoride tablet chewable 1 mg oral (rx)	1		PRENA1 PEARL	3	
MULTIVITAMIN/FLUORIDE TABLET CHEWABLE 1 MG ORAL (RX)	3		prenatal 19 oral tablet 29-1 mg	1	
MULTI-VIT-FLOR	E		prenatal 19 oral tablet chewable	1	
nafrinse drops oral solution 0.275 (0.125 f) mg/drop	1	H	prenatal oral tablet 27-1 mg	1	
NAFRINSE ORAL TABLET CHEWABLE 2.2 (1 F) MG	1	H	prenatal plus	1	
NASCOBAL	3		prenatal plus vitamin/mineral	1	
NATALVIT	2		PRENATE DHA	3	
NEONATAL COMPLETE	3		PRENATE ENHANCE	3	
NEONATAL PLUS	3		PRENATE ESSENTIAL	3	
			PRENATE MINI	3	
			PRENATE PIXIE	3	
			PRENATE RESTORE	3	
			PRENATOL-M	E	
			PRENATRIX	E	
			PRENATRYL	E	
			PREVIDENT 5000 ENAMEL PROTECT	3	
			PREVIDENT 5000 SENSITIVE	3	
			PREVIDENT MOUTH/THROAT	3	
			QUFLORA PEDIATRIC	3	
			SE-NATAL 19	3	
			sevelamer hcl	E	

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Drug Name	Drug Tier	Requirements & Limits
sod citrate-citric acid oral solution 500-334 mg/5ml	1	
sodium fluoride 5000 enamel dental gel 1.1-5 %	1	
sodium fluoride 5000 sensitive dental gel 1.1-5 %	1	
sodium fluoride mouth/throat solution 0.2 %	1	
sodium fluoride oral solution	1	H
sodium fluoride oral tablet chewable	1	H
SPS	3	
TARON-C DHA	4	
THRIVITE RX	3	
TRICARE	3	
TRINATAL RX 1	3	
TRINATE	3	
tri-vite/fluoride	1	
UROCIT-K 10	4	
UROCIT-K 15	4	
UROCIT-K 5	4	
VELTASSA	3	PA, QL
VINATE ONE	3	
virt-c dha oral capsule 53.5-38-1 mg	1	
virt-pn dha oral capsule 27-0.6-0.4-300 mg	3	
VITAFOL FE+	3	
VITAFOL GUMMIES	3	
VITAFOL ULTRA	3	
VITAFOL-OB	3	
VITAMEDMD ONE RX/ QUATREFOLIC	3	
vitamin d (ergocalciferol) oral capsule 1.25 mg (50000 ut), 50000 unit	1	
vitamins acd-fluoride	1	
VITAPEARL	3	
VITATHELY WITH GINGER	3	
WESCAP-C DHA	4	

Drug Name	Drug Tier	Requirements & Limits
WESCAP-PN DHA	4	
wes-phos 250 neutral	1	
WESTAB PLUS	E	
ZATEAN-PN DHA ORAL CAPSULE 27-0.6-0.4-300 MG	4	
<b>Gastrointestinal Agents - Drugs for Acid Reflux and Ulcer</b>		
ACIPHEX	E	QL
bis subcit-metronid-tetracyc	3	QL
bismuth/metronidaz/tetracyclin	3	QL
CARAFATE	E	
cimetidine oral	1	
CYTOTEC	4	
DEXILANT	E	QL
dexlansoprazole	E	QL
esomeprazole magnesium oral capsule delayed release	E	QL
esomeprazole magnesium oral packet	3	PA, ST, QL
famotidine oral suspension reconstituted	1	
famotidine oral tablet 20 mg, 40 mg	E	
lansoprazole oral capsule delayed release	E	QL
lansoprazole oral tablet delayed release dispersible	3	PA, ST, QL
misoprostol oral	1	
NEXIUM ORAL CAPSULE DELAYED RELEASE	E	QL
NEXIUM ORAL PACKET	4	PA, ST, QL
OMECLAMOX-PAK	3	QL
omeprazole oral capsule delayed release	1	
pantoprazole sodium oral tablet delayed release	1	
PEPCID	E	
PREVACID	E	QL
PREVACID SOLUTAB	E	PA, ST, QL
PROTONIX ORAL TABLET DELAYED RELEASE	E	

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Drug Name	Drug Tier	Requirements & Limits
PYLERA	4	QL
rabeprazole sodium oral tablet delayed release	2	QL
sucralfate oral suspension	3	
sucralfate oral tablet	1	
VOQUEZNA	4	PA, QL
VOQUEZNA DUAL PAK	4	ST, QL
VOQUEZNA TRIPLE PAK	4	ST, QL
<b>Gastrointestinal Agents - Drugs for Bowel, Intestine and Stomach Conditions</b>		
alosetron hcl	2	PA, QL
AMITIZA	4	PA, QL
ANASPAZ	2	
chlordiazepoxide-clidinium	4	
CLENPIQ	3	QL
constulose	1	
cromolyn sodium oral	1	
CUVPOSA	4	
dicyclomine hcl oral	1	
diphenoxylate-atropine oral tablet	1	
ED-SPAZ ORAL TABLET DISPERSIBLE 0.125 MG	3	
enulose	1	
FIRST-LANSOPRAZOLE	3	PA
FIRST-OMEPRAZOLE	3	PA
GASTROCROM	E	
gavilyte-c	1	H
gavilyte-g	1	QL, H
gavilyte-n with flavor pack	1	QL, H
generlac	1	
GLYCATE	E	
glycopyrrolate oral solution	3	
glycopyrrolate oral tablet 1 mg, 2 mg	1	
GLYCOPYRROLATE ORAL TABLET 1.5 MG	E	
GOLYTELY	1	QL, H
hyoscyamine sulfate er	1	

Drug Name	Drug Tier	Requirements & Limits
hyoscyamine sulfate oral tablet	1	
hyoscyamine sulfate oral tablet dispersible	1	
hyoscyamine sulfate sublingual	1	
KRISTALOSE	3	
lactulose encephalopathy oral solution 10 gm/15ml	1	
lactulose oral packet	E	
lactulose oral solution	1	
LEVBID	4	
LEVSIN	4	
LEVSIN/SL	4	
LIBRAX	E	
LINZESS	2	PA, QL
LOMOTIL	4	
loperamide hcl oral capsule	E	
LOTROXEX	E	PA, QL
lubiprostone	2	PA, QL
methscopolamine bromide oral	1	
MOTEGRITY	3	PA, QL
MOVANTIK	E	PA, QL
MOVIPREP	4	QL
na sulfate-k sulfate-mg sulf	3	QL
NULEV	4	
OCALIVA	4	PA, ST, QL, SP
OMEPRAZOLE+SYRSPEND SF ALKA	3	PA
opium	1	
OSCIMIN	4	
peg 3350-kcl-na bicarb-nacl	1	QL, H
peg-3350/electrolytes	1	QL, H
peg-3350/electrolytes/ascorbat	3	QL
peg-kcl-nacl-nasulf-na asc-c	3	QL
PLENVU	3	QL
RELTONE	E	
ROBINUL	E	
ROBINUL-FORTE	E	
SUFLAVE	3	QL

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Drug Name	Drug Tier	Requirements & Limits
SUPREP BOWEL PREP KIT	3	QL
SUTAB	3	
SYMPROIC	2	PA, QL
TRULANCE	E	PA, ST, QL
URSO 250	E	
URSO FORTE	E	
URSODIOL ORAL CAPSULE 200 MG, 400 MG	E	
ursodiol oral capsule 300 mg	1	
ursodiol oral tablet	1	
VIBERZI	3	PA, QL
<b>Genetic or Enzyme Disorder - Drugs for Replacement, Modification, Treatment</b>		
CARNITOR ORAL TABLET	4	
CERDELGA	2	PA, SP
CREON	2	
DEPEN TITRATABS	2	SP
EVRYSDI	2	PA, QL, SP
JAVYGTOR ORAL PACKET	E	PA, QL, SP
JYNARQUE ORAL TABLET THERAPY PACK 15 MG, 45 & 15 MG, 60 & 30 MG, 90 & 30 MG	2	PA, QL, SP
JYNARQUE ORAL TABLET THERAPY PACK 30 & 15 MG	2	PA, QL
KUVAN ORAL PACKET	E	PA, QL, SP
levocarnitine oral tablet	1	
ORFADIN	2	PA, SP
PANCREAZE	3	ST
PERTZYE	4	ST
sapropterin dihydrochloride oral packet	2	PA, QL, SP
STRENSIQ	2	PA, QL, SP
SUCRAID	2	PA, SP
TEGSEDI	2	PA, QL, SP
VYNDAMAX	2	PA, QL, SP
ZENPEP ORAL CAPSULE DELAYED RELEASE PARTICLES 10000-32000 UNIT, 15000-47000 UNIT, 20000-63000 UNIT, 25000-79000 UNIT, 3000-10000 UNIT, 40000-126000 UNIT, 5000-24000 UNIT	2	

Drug Name	Drug Tier	Requirements & Limits
ZENPEP ORAL CAPSULE DELAYED RELEASE PARTICLES 60000-189600 UNIT	E	
<b>Genitourinary Agents - Drugs for Bladder, Genital and Kidney Conditions</b>		
AURYXIA	E	
bethanechol chloride oral	1	
calcium acetate (phos binder) oral capsule	1	
CAVERJECT IMPULSE	3	QL
darifenacin hydrobromide er	E	
DETROL	E	
DETROL LA	E	
DITROPAN XL ORAL TABLET EXTENDED RELEASE 24 HOUR 10 MG, 5 MG	E	
EDEX	3	QL
ELMIRON	4	ST
fesoterodine fumarate er	E	
GEMTESA	E	
me/naphos/mb/hyo1	1	
mirabegron er	3	PA, ST
MYRBETRIQ ORAL TABLET EXTENDED RELEASE 24 HOUR	E	
oxybutynin chloride er	2	
oxybutynin chloride oral tablet 2.5 mg	3	
oxybutynin chloride oral tablet 5 mg	1	
phenazo oral tablet 200 mg	1	
phenazopyridine hcl oral tablet 100 mg, 200 mg	1	
PYRIDIUM	3	
REVELA ORAL TABLET	E	
sevelamer carbonate oral tablet	2	
solifenacin succinate	2	
THIOLA	4	SP
THIOLA EC	4	SP
tiopronin oral tablet delayed release	3	SP
tolterodine tartrate	3	

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Drug Name	Drug Tier	Requirements & Limits
tolterodine tartrate er	E	
TOVIAZ	E	
tropium chloride	3	
tropium chloride er	E	
UROGESIC-BLUE	2	
VELPHORO	4	ST
VESICARE	E	

### Genitourinary Agents - Drugs for Prostate Conditions

alfuzosin hcl er	1	
AVODART	E	
dutasteride oral	2	
dutasteride-tamsulosin hcl	E	
finasteride oral tablet 5 mg	1	
FLOMAX	E	
JALYN ORAL CAPSULE 0.5-0.4 MG	E	
PROSCAR	E	
RAPAFLO	E	
silodosin	3	
tamsulosin hcl	1	
terazosin hcl	1	
UROXATRAL	E	

### Hormonal Agents - Hormone Replacement and Birth Control

ACTIVELLA	4	
afirmelle	1	H
ALORA	3	QL
altavera	1	H
alyacen 1/35	1	H
alyacen 7/7/7	1	H
amethia oral tablet 0.15-0.03 & 0.01 mg	3	
amethyst	1	H
ANGELIQ	3	
ANNOVERA	3	QL
apri	1	H
aranelle	1	H
ashlyna	3	

Drug Name	Drug Tier	Requirements & Limits
aubra eq	1	H
aubra oral tablet 0.1-20 mg-mcg	1	H
aurovela 1.5/30	1	H
aurovela 1/20	1	H
aurovela 24 fe	1	H
aurovela fe 1.5/30	1	H
aurovela fe 1/20	1	H
aviane	1	H
AYGESTIN ORAL TABLET 5 MG	4	
ayuna	1	H
azurette	2	
BALCOLTRA	E	
balziva	1	H
BEYAZ	E	
BIJUVA	3	
blisovi 24 fe	1	H
blisovi fe 1.5/30	1	H
blisovi fe 1/20	1	H
briellyn	1	H
camila	1	H
camrese	3	
camrese lo	3	
caziant oral tablet 0.1/0.125/0.15 -0.025 mg	1	H
charlotte 24 fe	1	H
chateal eq	1	H
chateal oral tablet 0.15-30 mg-mcg	1	H
CLIMARA	E	QL
CLIMARA PRO	3	QL
COMBIPATCH	3	QL
COVARYX	2	
COVARYX HS	3	
cryselle-28	1	H
cyred eq	1	H
cyred oral tablet 0.15-30 mg-mcg	1	H
dasetta 1/35	1	H
dasetta 7/7/7	1	H

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Drug Name	Drug Tier	Requirements & Limits
daysee	3	
deblitane	1	H
DELESTROGEN	4	
delyla	1	H
DEPO-ESTRADIOL	3	
DEPO-PROVERA	4	QL
DEPO-SUBQ PROVERA 104	1	QL, H
desogestrel-ethinyl estradiol oral tablet 0.15-0.02/0.01 mg (21/5)	2	
desogestrel-ethinyl estradiol oral tablet 0.15-30 mg-mcg	1	H
DIVIGEL	3	
dolishale	1	H
dotti	2	QL
drospiren-eth estrad-levomefol	E	
drospirenone-ethinyl estradiol	3	
DUAVEE	3	QL
EEMT	2	
EEMT HS	3	
ELESTRIN	3	
elinest	1	H
ELLA	1	QL, H
eluryng	1	H
emoquette oral tablet 0.15-30 mg-mcg	1	H
emzahn	1	H
enilloring	1	H
enpresse-28	1	H
enskyce	1	H
errin	1	H
est estrogens-methyltest	1	
est estrogens-methyltest ds	1	
est estrogens-methyltest hs	1	
estarylla	1	H
ESTRACE	E	
estradiol oral	1	
estradiol patch twice weekly 0.025 mg/24hr transdermal	2	(generic for Minivelle), QL

Drug Name	Drug Tier	Requirements & Limits
estradiol patch twice weekly 0.025 mg/24hr transdermal	2	(generic for Vivelle-Dot), QL
estradiol patch twice weekly 0.0375 mg/24hr transdermal	2	(generic for Minivelle), QL
estradiol patch twice weekly 0.0375 mg/24hr transdermal	2	(generic for Vivelle-Dot), QL
estradiol patch twice weekly 0.05 mg/24hr transdermal	2	(generic for Minivelle), QL
estradiol patch twice weekly 0.05 mg/24hr transdermal	2	(generic for Vivelle-Dot), QL
estradiol patch twice weekly 0.075 mg/24hr transdermal	2	(generic for Minivelle), QL
estradiol patch twice weekly 0.075 mg/24hr transdermal	2	(generic for Vivelle-Dot), QL
estradiol patch twice weekly 0.1 mg/24hr transdermal	2	(generic for Minivelle), QL
estradiol patch twice weekly 0.1 mg/24hr transdermal	2	(generic for Vivelle-Dot), QL
estradiol transdermal gel 0.25 mg/0.25gm, 0.5 mg/0.5gm, 0.75 mg/0.75gm, 1 mg/gm, 1.25 mg/1.25gm	3	
estradiol transdermal gel 0.75 mg/1.25 gm (0.06%)	3	QL
estradiol transdermal patch weekly	1	(generic for Climara), QL
estradiol vaginal cream	3	
estradiol vaginal tablet	2	
estradiol valerate intramuscular	1	
estradiol-norethindrone acet	2	
ESTRING	2	QL
ESTROGEL	3	QL
ethynodiol diac-eth estradiol	1	H
etonogestrel-ethinyl estradiol	1	H
EVAMIST	2	
falmina	1	H
fayosim oral tablet 42-21-21-7 days	1	H

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Drug Name	Drug Tier	Requirements & Limits
FEMRING	3	QL
finzala	1	H
fyavolv	3	
gemmily	E	
GENERESS FE ORAL TABLET CHEWABLE 0.8-25 MG-MCG	E	
hailey 1.5/30	1	H
hailey 24 fe	1	H
hailey fe 1.5/30	1	H
hailey fe 1/20	1	H
haloette	1	H
heather	1	H
iclevia	2	H
incassia	1	H
introvale	2	H
isibloom	1	H
jaimiess	3	
jasmiel	3	
jencycla	1	H
jinteli	3	
jolessa	2	H
joyeaux	E	
juleber	1	H
junel 1.5/30	1	H
junel 1/20	1	H
junel fe 1.5/30	1	H
junel fe 1/20	1	H
junel fe 24	1	H
kaitlib fe	1	H
kalliga	1	H
kariva	2	
kelnor 1/35	1	H
kelnor 1/50	1	H
kurvelo	1	H
larin 1.5/30	1	H
larin 1/20	1	H
larin 24 fe	1	H
larin fe 1.5/30	1	H

Drug Name	Drug Tier	Requirements & Limits
larin fe 1/20	1	H
larissia oral tablet 0.1-20 mg-mcg	1	H
layolis fe	1	H
leena	1	H
lessina	1	H
levonest	1	H
levonorgest-eth est & eth est	1	
levonorgest-eth estrad 91-day oral tablet 0.1-0.02 & 0.01 mg, 0.15-0.03 & 0.01 mg	3	
levonorgest-eth estrad 91-day oral tablet 0.15-0.03 mg	2	H
levonorgest-eth estradiol-iron	E	
levonorgestrel-ethinyl estrad oral tablet 0.1-20 mg-mcg, 0.15-30 mg-mcg	1	H
levonorgestrel-ethinyl estrad oral tablet 90-20 mcg	1	H
levonorg-eth estrad triphasic	1	H
levora 0.15/30 (28)	1	H
lillow oral tablet 0.15-30 mg-mcg	1	H
LO LOESTRIN FE	1	H
LOESTRIN 1.5/30 (21)	E	
LOESTRIN 1/20 (21)	E	
LOESTRIN FE 1.5/30	E	
LOESTRIN FE 1/20	E	
lojaimiess	3	
loryna	3	
LOSEASONIQUE ORAL TABLET 0.1-0.02 & 0.01 MG	4	
low-ogestrel	1	H
lo-zumandimine	3	
lutera	1	H
lyleq	1	H
lyllana	2	QL
lyza	1	H
marlissa	1	H
medroxyprogesterone acetate intramuscular	1	QL, H

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Drug Name	Drug Tier	Requirements & Limits
medroxyprogesterone acetate oral	1	
megestrol acetate oral tablet	1	
MENOSTAR	3	QL
merzee	E	
mibelas 24 fe	1	H
microgestin 1.5/30	1	H
microgestin 1/20	1	H
microgestin 24 fe	1	H
microgestin fe 1.5/30	1	H
microgestin fe 1/20	1	H
mili	1	H
mimvey	2	
MINASTRIN 24 FE ORAL TABLET CHEWABLE 1-20 MG-MCG(24)	E	
MINIVELLE	E	QL
MIRCETTE ORAL TABLET 0.15-0.02/0.01 MG (21/5)	E	
mono-linyah	1	H
MYFEMBREE	2	PA, QL
NATAZIA	1	
necon 0.5/35 (28)	1	H
NEXTSTELLIS	E	
nikki	3	
nora-be	1	H
norelgestromin-eth estradiol	3	H
norethin ace-eth estrad-fe oral capsule	E	
norethin ace-eth estrad-fe oral tablet	1	H
norethin ace-eth estrad-fe oral tablet chewable	1	H
norethindrone acetate oral	1	
norethindrone acet-ethinyl est	1	H
norethindrone oral	1	H
norethindrone-eth estradiol	2	(generic for FemHRT/ FemHRT 1/5)
norethindron-ethinyl estrad-fe	1	H

Drug Name	Drug Tier	Requirements & Limits
norethin-eth estradiol-fe oral tablet chewable 0.4-35 mg-mcg	1	H
norethin-eth estradiol-fe oral tablet chewable 0.8-25 mg-mcg	1	H
norgestimate-eth estradiol	1	H
norgestimate-ethinyl estradiol triphasic oral tablet 0.18/0.215/0.25 mg-25 mcg	2	
norgestimate-ethinyl estradiol triphasic oral tablet 0.18/0.215/0.25 mg-35 mcg	1	H
norlyda	1	H
norlyroc	1	H
nortrel 0.5/35 (28)	1	H
nortrel 1/35 (21)	1	H
nortrel 1/35 (28)	1	H
nortrel 7/7/7	1	H
NUVARING	E	
nylia 1/35	1	H
nylia 7/7/7	1	H
nymyo	1	H
ocella	3	
PHEXXI	E	PA
philith	1	H
pimtrea	2	
portia-28	1	H
PREMARIN ORAL	3	
PREMARIN VAGINAL	3	
PREMPHASE	3	
PREMPRO	3	
previfem oral tablet 0.25-35 mg-mcg	1	H
progesterone intramuscular	1	
progesterone oral	2	
PROMETRIUM	E	
PROVERA	4	
QUARTETTE ORAL TABLET 42-21-21-7 DAYS	E	
reclipsen	1	H
rivelsa	1	H

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Drug Name	Drug Tier	Requirements & Limits
SAFYRAL	E	
SEASONIQUE ORAL TABLET 0.15-0.03 & 0.01 MG	E	
setlakin	2	H
sharobel	1	H
simliya	2	
simpesse	3	
SLYND	4	PA, ST
sprintec 28	1	H
sronyx	1	H
syeda	3	
tarina 24 fe	1	H
tarina fe 1/20 eq	1	H
tarina fe 1/20 oral tablet 1-20 mg-mcg	1	H
taysofy	E	
TAYTULLA	E	
tilia fe	1	H
tri-estarylla	1	H
tri-legest fe	1	H
tri-linyah	1	H
tri-lo-estarylla	2	
tri-lo-marzia	2	
tri-lo-mili	2	
tri-lo-sprintec	2	
tri-mili	1	H
tri-nymyo	1	H
tri-sprintec	1	H
trivora (28)	1	H
tri-vylibra	1	H
tri-vylibra lo	2	
tulana oral tablet 0.35 mg	1	H
turqoz	1	H
TWIRLA	E	
TYBLUME	1	
tydemy	1	H
VAGIFEM	E	
velivet	1	H

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

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Drug Name	Drug Tier	Requirements & Limits
prednisolone oral solution	1	
prednisolone sodium phosphate oral solution 10 mg/5ml, 25 mg/5ml, 6.7 (5 base) mg/5ml	E	
prednisolone sodium phosphate oral solution 15 mg/5ml	1	
prednisolone sodium phosphate oral solution 20 mg/5ml	E	QL
prednisolone sodium phosphate oral tablet dispersible	1	
prednisone oral	1	
TAPERDEX 12-DAY	3	
TAPERDEX 6-DAY ORAL TABLET THERAPY PACK 1.5 MG	4	
TAPERDEX 6-DAY ORAL TABLET THERAPY PACK 1.5 MG (21)	3	
TAPERDEX 7-DAY	3	
<b>Hormonal Agents - Other</b>		
cabergoline	2	
DDAVP ORAL	E	
desmopressin acetate oral	1	
desmopressin acetate spray	1	
lanreotide acetate solution 120 mg/0.5ml subcutaneous	1	SP
lanreotide acetate solution 120 mg/0.5ml subcutaneous	E	SP
leuprolide acetate injection	1	PA
megestrol acetate oral suspension 40 mg/ml	1	
METHERGINE	4	QL
methylergonovine maleate oral	1	QL
NGENLA	4	PA, QL, SP
NOCDURNA	3	PA, QL
NORDITROPIN FLEXPRO	2	PA, QL, SP
NUTROPIN AQ NUSPIN	E	PA, QL, SP
OMNITROPE	2	PA, QL, SP
ORIAHNN	2	PA, QL
ORILISSA	2	PA, QL
SKYTROFA	4	PA, QL, SP
SOMATULINE DEPOT	4	SP

Drug Name	Drug Tier	Requirements & Limits
<b>Hormonal Agents - Testosterone Replacement</b>		
ANDRODERM	2	PA, QL
ANDROGEL PUMP	E	PA, QL
ANDROGEL TRANSDERMAL GEL 20.25 MG/1.25GM (1.62%), 25 MG/2.5GM (1%), 40.5 MG/2.5GM (1.62%), 50 MG/5GM (1%)	E	PA, QL
DEPO-TESTOSTERONE INTRAMUSCULAR SOLUTION 100 MG/ML	3	
DEPO-TESTOSTERONE INTRAMUSCULAR SOLUTION 200 MG/ML	4	
JATENZO	E	QL
KYZATREX	4	PA, QL
NATESTO	E	PA, QL
TESTIM	2	PA, QL
TESTOSTERONE CYPIONATE INJECTION	E	
testosterone cypionate intramuscular	1	
testosterone enanthate intramuscular	1	
testosterone gel 20.25 mg/act (1.62%) transdermal	2	PA, QL
testosterone gel 20.25 mg/act (1.62%) transdermal	E	PA, QL
testosterone transdermal gel 1.62 %	2	PA, QL
testosterone transdermal gel 10 mg/act (2%), 12.5 mg/act (1%), 20.25 mg/1.25gm (1.62%), 25 mg/2.5gm (1%), 40.5 mg/2.5gm (1.62%), 50 mg/5gm (1%)	E	PA, QL
testosterone transdermal solution	E	PA, QL
TLANDO	E	PA, QL
VOGELXO	E	PA, QL
VOGELXO PUMP	E	PA, QL
XYOSTED	E	PA, QL

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Drug Name	Drug Tier	Requirements & Limits
<b>Hormonal Agents - Thyroid</b>		
ADTHYZA	E	
ARMOUR THYROID	3	
CYTOMEL	E	
ERMEZA	2	PA
euthyrox	1	
levo-t	1	
LEVOTHYROXINE SODIUM ORAL CAPSULE	E	
levothyroxine sodium oral tablet	1	
levoxyl	2	
liothyronine sodium oral	2	
methimazole oral	1	
NIVA THYROID	3	
np thyroid	1	
propylthiouracil oral	1	
SYNTHROID	E	
THYQUIDITY	E	PA
thyroid oral	1	
TIROSINT	E	
TIROSINT-SOL	2	PA
unithroid	1	
<b>Immunological Agents - Drugs for Immune System Stimulation or Suppression</b>		
ABRILADA (1 PEN)	E	PA, SP
ABRILADA (2 PEN)	E	PA, QL, SP
ABRILADA (2 SYRINGE)	E	PA, QL, SP
ACTEMRA ACTPEN	3	PA, ST, QL, SP
ACTEMRA SUBCUTANEOUS	3	PA, ST, QL, SP
ADALIMUMAB-AACF (2 PEN)	E	PA, SP
ADALIMUMAB-AATY (1 PEN) SUBCUTANEOUS AUTO-INJECTOR KIT 40 MG/0.4ML	E	PA, QL, SP
ADALIMUMAB-AATY (1 PEN) SUBCUTANEOUS AUTO-INJECTOR KIT 80 MG/0.8ML	E	PA, SP
ADALIMUMAB-AATY (2 PEN)	E	PA, QL, SP
ADALIMUMAB-AATY (2 SYRINGE)	E	PA, (manufactured by Celltrion), QL, SP

Drug Name	Drug Tier	Requirements & Limits
ADALIMUMAB-ADAZ	2	(manufactured by Sandoz), PA, QL, SP
ADALIMUMAB-ADBM	E	PA, QL, SP
ADALIMUMAB-FKJP	E	PA, QL, SP
ADALIMUMAB-RYVK (2 PEN)	E	PA, SP
ADBRY SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	2	PA, QL, SP
AMJEVITA FOR NUVAILA	2	PA, QL, SP
ARAVA	E	
AZASAN	4	
azathioprine oral tablet 100 mg, 75 mg	3	
azathioprine oral tablet 50 mg	1	
BENLYSTA SUBCUTANEOUS SOLUTION AUTO-INJECTOR	2	PA, QL, SP
BIMZELX	3	PA, ST, QL, SP
CELLCEPT	E	
CIMZIA	E	PA
CIMZIA (2 SYRINGE)	2	PA, QL, SP
CIMZIA STARTER KIT	2	PA, QL, SP
CINRYZE	E	PA, QL, SP
COSENTYX SENSOREADY	2	PA, QL, SP
COSENTYX SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	2	PA, QL, SP
COSENTYX UNOREADY	2	PA, QL, SP
cyclosporine modified oral capsule	1	
cyclosporine oral	1	
CYLTEZO (2 PEN) SUBCUTANEOUS AUTO-INJECTOR KIT 40 MG/0.4ML	E	PA, QL, SP
CYLTEZO (2 PEN) SUBCUTANEOUS AUTO-INJECTOR KIT 40 MG/0.8ML	E	PA, QL, SP
CYLTEZO (2 SYRINGE) SUBCUTANEOUS PREFILLED SYRINGE KIT 10 MG/0.2ML, 20 MG/0.4ML, 40 MG/0.8ML	E	PA, QL, SP
CYLTEZO (2 SYRINGE) SUBCUTANEOUS PREFILLED SYRINGE KIT 40 MG/0.4ML	E	PA, QL, SP

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Drug Name	Drug Tier	Requirements & Limits	Drug Name	Drug Tier	Requirements & Limits
CYLTEZO-CD/UC/HS STARTER SUBCUTANEOUS AUTO-INJECTOR KIT 40 MG/0.4ML	E	PA, QL, SP	HUMIRA (2 SYRINGE) PREFILLED SYRINGE KIT 40 MG/0.4ML SUBCUTANEOUS	2	PA, QL, SP
CYLTEZO-CD/UC/HS STARTER SUBCUTANEOUS AUTO-INJECTOR KIT 40 MG/0.8ML	E	PA, QL, SP	HUMIRA (2 SYRINGE) SUBCUTANEOUS PREFILLED SYRINGE KIT 40 MG/0.8ML	2	PA, QL, SP
CYLTEZO-PSORIASIS/UV STARTER SUBCUTANEOUS AUTO-INJECTOR KIT 40 MG/0.4ML	E	PA, QL, SP	HUMIRA-CD/UC/HS STARTER	2	PA, QL, SP
CYLTEZO-PSORIASIS/UV STARTER SUBCUTANEOUS AUTO-INJECTOR KIT 40 MG/0.8ML	E	PA, QL, SP	HUMIRA-PED<40KG CROHNS STARTER	2	PA, QL, SP
EMPAVELI	2	PA, QL, SP	HUMIRA-PED≥40KG CROHNS START	2	PA, QL, SP
ENBREL	2	PA, QL, SP	HUMIRA-PED≥40KG UC STARTER	2	PA, QL, SP
ENBREL MINI	2	PA, QL, SP	HUMIRA-PS/UV/ADOL HS STARTER SUBCUTANEOUS PEN-INJECTOR KIT 40 MG/0.8ML	2	PA, QL, SP
ENBREL SURECLICK	2	PA, QL, SP	HUMIRA-PSORIASIS/UEIT STARTER	2	PA, QL, SP
ENTYVIO	2	PA, QL, SP	HYFTOR	4	PA, QL
ENVARUS XR	E		HYRIMOZ SUBCUTANEOUS SOLUTION AUTO-INJECTOR 40 MG/0.4ML	E	PA, QL, SP
everolimus oral tablet 0.25 mg, 0.5 mg, 0.75 mg, 1 mg	3		HYRIMOZ SUBCUTANEOUS SOLUTION AUTO-INJECTOR 40 MG/0.8ML, 80 MG/0.8ML	E	PA, SP
gengraf oral capsule	1		HYRIMOZ SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 10 MG/0.1 ML, 20 MG/0.2ML, 40 MG/0.4ML	E	PA, QL, SP
GRASTEK	4	PA, QL	HYRIMOZ SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 40 MG/0.8ML	E	PA, SP
HADLIMA	E	PA, QL, SP	HYRIMOZ-CROHNS/UC STARTER	E	PA, QL, SP
HAEGARDA	2	PA, QL, SP	HYRIMOZ-PED<40KG CROHN STARTER	E	PA, QL, SP
HULIO (2 PEN)	E	PA, QL, SP	HYRIMOZ-PED≥40KG CROHN START	E	PA, QL, SP
HULIO (2 SYRINGE)	E	PA, QL, SP	HYRIMOZ-PLAQUE PSORIASIS START	E	PA, QL, SP
HUMIRA (2 PEN) PEN-INJECTOR KIT 40 MG/0.4ML SUBCUTANEOUS	2	PA, QL, SP	IDACIO (2 PEN)	E	PA, QL, SP
HUMIRA (2 PEN) PEN-INJECTOR KIT 80 MG/0.8ML SUBCUTANEOUS	2	PA, QL, SP	IDACIO (2 SYRINGE)	E	PA, QL, SP
HUMIRA (2 PEN) SUBCUTANEOUS PEN-INJECTOR KIT 40 MG/0.8ML	2	PA, QL, SP	IDACIO-CROHNS/UC STARTER	E	PA, QL, SP
HUMIRA (2 SYRINGE) PREFILLED SYRINGE KIT 10 MG/0.1ML SUBCUTANEOUS	2	PA, QL, SP	IDACIO-PSORIASIS STARTER	E	PA, QL, SP
HUMIRA (2 SYRINGE) PREFILLED SYRINGE KIT 20 MG/0.2ML SUBCUTANEOUS	2	PA, QL, SP			

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Drug Name	Drug Tier	Requirements & Limits
IMURAN	E	
JYLAMVO	4	PA
KEVZARA SUBCUTANEOUS SOLUTION AUTO-INJECTOR	4	PA, ST, QL, SP
KINERET	3	PA, ST, QL, SP
leflunomide oral	1	
LITFULO	3	PA, QL, SP
LUPKYNIS	4	PA, QL, SP
methotrexate sodium (pf)	1	
methotrexate sodium injection solution	1	
methotrexate sodium oral	1	
mycophenolate mofetil oral	1	
mycophenolate sodium	2	
mycophenolic acid	2	
MYFORTIC	E	
NEORAL ORAL CAPSULE	E	
OLUMIANT ORAL TABLET 1 MG, 4 MG	3	PA, ST, QL
OLUMIANT ORAL TABLET 2 MG	3	PA, ST, QL, SP
OMVOH SUBCUTANEOUS SOLUTION AUTO-INJECTOR	2	PA, QL, SP
ORENCIA CLICKJECT	3	PA, ST, QL, SP
ORENCIA SUBCUTANEOUS	3	PA, ST, QL, SP
OTEZLA	2	PA, QL, SP
OTREXUP	E	QL
PALFORZIA ORAL 0.5 & 1 & 1.5 & 3 & 6 MG, 2 X 1 MG & 10 MG, 2 X 100 MG, 2 X 20 MG, 2 X 20 MG & 2 X 100 MG, 20 MG, 20 MG & 100 MG, 3 X 1 MG, 3 X 20 MG & 100 MG, 4 X 20 MG, 6 X 1 MG	3	PA, QL, SP
PROGRAF ORAL CAPSULE	4	
RAPAMUNE ORAL SOLUTION	4	
RAPAMUNE ORAL TABLET	E	
RASUVO	2	QL
RINVOQ	2	PA, QL, SP
RUCONEST	4	PA, QL, SP
SANDIMMUNE ORAL	E	
SIMLANDI (1 PEN)	E	PA, QL, SP

Drug Name	Drug Tier	Requirements & Limits
SIMLANDI (2 PEN)	E	PA, QL, SP
SIMPONI	2	PA, QL, SP
sirolimus oral solution	2	
sirolimus oral tablet	1	
SKYRIZI PEN	2	PA, QL, SP
SKYRIZI SUBCUTANEOUS	2	PA, QL, SP
SOTYKTU	2	PA, QL, SP
STELARA SUBCUTANEOUS	2	PA, QL, SP
tacrolimus oral	1	
TAKHZYRO	2	PA, QL, SP
TALTZ	E	PA, ST, QL, SP
TREMFYA	2	PA, QL, SP
TREXALL	2	
XELJANZ	2	PA, QL, SP
XELJANZ XR ORAL TABLET EXTENDED RELEASE 24 HOUR 11 MG	2	PA, QL, SP
XELJANZ XR ORAL TABLET EXTENDED RELEASE 24 HOUR 22 MG	2	PA, QL
XOLAIR SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	2	PA, QL, SP
YUFLYMA (1 PEN) SUBCUTANEOUS AUTO-INJECTOR KIT 40 MG/0.4ML	E	PA, QL, SP
YUFLYMA (1 PEN) SUBCUTANEOUS AUTO-INJECTOR KIT 80 MG/0.8ML	E	PA, SP
YUFLYMA (2 PEN)	E	PA, QL, SP
YUFLYMA (2 SYRINGE)	E	PA, QL, SP
YUFLYMA-CD/UC/HS STARTER	E	PA, SP
YUSIMRY	E	PA, QL, SP
ZORTRESS	E	
<b>Immunological Agents - Drugs for Vaccination</b>		
ADACEL	3	H
AFLURIA QUADRIVALENT INTRAMUSCULAR SUSPENSION PREFILLED SYRINGE	3	H
BEXSERO	3	H
BOOSTRIX	2	H

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Drug Name	Drug Tier	Requirements & Limits
COMIRNATY INTRAMUSCULAR SUSPENSION	3	H
ENGERIX-B	2	H
FLUAD QUADRIVALENT	3	H
FLUARIX QUADRIVALENT INTRAMUSCULAR SUSPENSION PREFILLED SYRINGE 0.5 ML	3	H
FLUBLOK QUADRIVALENT INTRAMUSCULAR SOLUTION PREFILLED SYRINGE 0.5 ML	3	H
FLUCELVAX QUADRIVALENT INTRAMUSCULAR SUSPENSION PREFILLED SYRINGE	3	H
FLULAVAL QUADRIVALENT INTRAMUSCULAR SUSPENSION PREFILLED SYRINGE 0.5 ML	3	H
FLUZONE HIGH-DOSE QUADRIVALENT INTRAMUSCULAR SUSPENSION PREFILLED SYRINGE 0.7 ML	3	H
FLUZONE QUADRIVALENT INTRAMUSCULAR SUSPENSION PREFILLED SYRINGE 0.5 ML	3	H
GARDASIL 9 INTRAMUSCULAR SUSPENSION PREFILLED SYRINGE	3	H
HAVRIX	3	H
HEPLISAV-B	3	H
IPOL	2	H
MENQUADFI	3	H
MENVEO INTRAMUSCULAR SOLUTION RECONSTITUTED	3	H
M-M-R II	2	H
MODERNA COVID-19 VAC 6M-11Y	3	H
NOVAVAX COVID-19 VACCINE	3	H
PFIZER COVID-19 VAC-TRIS 5-11Y	3	H
PFIZER COVID-19 VAC-TRIS 6M-4Y	3	H
PNEUMOVAX 23	2	H
PREVNAR 20	3	H
RECOMBIVAX HB	2	H

Drug Name	Drug Tier	Requirements & Limits
SHINGRIX	3	H
SPIKEVAX INTRAMUSCULAR SUSPENSION	3	H
TENIVAC	3	H
TRUMENBA	3	H
TWINRIX	3	H
VAQTA	2	H
VARIVAX	3	H
<b>Infertility Agents</b>		
cetorelix acetate	3	PA, ST, QL, SP
CETROTIDE	4	PA, ST, QL, SP
CHORIONIC GONADOTROPIN INTRAMUSCULAR	3	SP
CLOMID	2	
clomiphene citrate oral tablet 50 mg	1	
ENDOMETRIN	2	
FOLLISTIM AQ	2	QL, SP
FYREMADEL	3	QL, SP
ganirelix acetate	3	QL, SP
ganirelix acetate solution prefilled syringe 250 mcg/0.5ml subcutaneous	4	(manufactured by Ferring), QL, SP
ganirelix acetate solution prefilled syringe 250 mcg/0.5ml subcutaneous	2	(manufactured by Merck/Organon), QL, SP
GONAL-F	4	ST, SP
GONAL-F RFF	4	ST, SP
GONAL-F RFF REDIJECT	4	ST, SP
MENOPUR	4	QL, SP
NOVAREL	3	SP
OVIDREL	4	SP
PREGNYL	3	SP
<b>Inflammatory Bowel Disease Agents</b>		
ANALPRAM HC	4	
ANALPRAM-HC EXTERNAL CREAM	4	
ANUCORT-HC	2	
ANUSOL-HC EXTERNAL	4	

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Drug Name	Drug Tier	Requirements & Limits
ANUSOL-HC RECTAL	E	
APRISO	1	
ASACOL HD ORAL TABLET DELAYED RELEASE 800 MG	E	
AZULFIDINE	4	
AZULFIDINE EN-TABS	4	
balsalazide disodium	1	
budesonide er	E	
budesonide oral	2	
budesonide rectal	2	
CANASA	E	
COLAZAL	E	
CORTENEMA	4	
CORTIFOAM	2	
DIPENTUM	3	
HEMMOREX-HC	E	
hydrocortisone (perianal) external cream 1 %	E	
hydrocortisone (perianal) external cream 2.5 %	1	
hydrocortisone ace-pramoxine external cream 1-1 %	1	
hydrocortisone acetate rectal	2	
hydrocortisone rectal	1	
hydrocort-pramoxine (perianal)	1	
LIALDA	E	
mesalamine er	E	
mesalamine oral tablet delayed release 1.2 gm	2	
mesalamine oral tablet delayed release 800 mg	E	
mesalamine rectal enema	1	
mesalamine rectal suppository	2	QL
mesalamine-cleanser	1	QL
PENTASA	E	
PROCORT	E	
PROCTOCORT	E	
PROCTOFOAM HC	2	
procto-med hc	1	

Drug Name	Drug Tier	Requirements & Limits
PROCTOSOL HC	4	
PROCTOZONE-HC	3	
ROWASA	4	QL
SFROWASA	4	
sulfasalazine oral	1	
UCERIS ORAL	3	
UCERIS RECTAL	E	
<b>Metabolic Bone Disease Agents - Drugs for Osteoporosis</b>		
ACTONEL	E	QL
alendronate sodium oral tablet	1	
calcitonin (salmon) injection	3	
calcitonin (salmon) nasal	2	
EVISTA	E	
FORTEO	E	PA, ST, SP
FOSAMAX	4	
ibandronate sodium oral	2	
MIACALCIN	3	
raloxifene hcl	2	H
risedronate sodium oral tablet 150 mg, 35 mg	3	QL
risedronate sodium oral tablet 30 mg, 5 mg	3	
teriparatide	E	PA, ST, SP
teriparatide (recombinant) subcutaneous solution pen-injector 600 mcg/2.4ml	E	PA, ST, SP
TERIPARATIDE (RECOMBINANT) SUBCUTANEOUS SOLUTION PEN-INJECTOR 620 MCG/2.48ML	3	PA, SP
TYMLOS	3	PA, SP
<b>Metabolic Bone Disease Agents - Other</b>		
calcitriol oral	1	
cinacalcet hcl	3	PA
paricalcitol oral	1	
ROCALTROL	4	
SENSIPAR	E	PA
ZEMPLAR ORAL	4	

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Drug Name	Drug Tier	Requirements & Limits
<b>Ophthalmic Agents - Drugs for Eye Allergy, Infection and Inflammation</b>		
ACULAR	4	
ACULAR LS	4	
ACUVAIL	E	
ak-poly-bac ophthalmic ointment 500-10000 unit/gm	1	
ALREX	4	QL
AZASITE	3	
azelastine hcl ophthalmic	1	
bacitracin-polymyxin b	1	
BESIVANCE	3	
BLEPH-10 OPHTHALMIC SOLUTION 10 %	3	
bromfenac sodium (once-daily)	3	
bromfenac sodium ophthalmic solution 0.07 %	E	
bromfenac sodium ophthalmic solution 0.075 %	E	QL
BROMSITE	E	QL
ciprofloxacin hcl ophthalmic	1	
dexamethasone sodium phosphate ophthalmic	1	
diclofenac sodium ophthalmic	1	
erythromycin ophthalmic	1	H-PA
EYSUVIS	4	QL
FLAREX	2	
fluorometholone	1	
FML FORTE	3	
FML LIQUIFILM	4	
gatifloxacin ophthalmic	3	
gentamicin sulfate ophthalmic	1	QL
ILEVRO	E	
INVELTYS	3	
ketorolac tromethamine ophthalmic	1	
KLARITY-A	E	
LOTEMAX OPHTHALMIC GEL	E	
LOTEMAX OPHTHALMIC OINTMENT	3	

Drug Name	Drug Tier	Requirements & Limits
LOTEMAX OPHTHALMIC SUSPENSION	E	QL
LOTEMAX SM	3	QL
loteprednol etabonate ophthalmic gel	E	
loteprednol etabonate ophthalmic suspension	3	QL
MAXITROL	4	
moxifloxacin hcl (2x day)	3	
moxifloxacin hcl ophthalmic	3	
neomycin-polymyxin-dexameth ophthalmic ointment	1	
neomycin-polymyxin-dexameth ophthalmic suspension 3.5-10000-0.1	1	
NEVANAC	4	
OCUFLOX	4	
ofloxacin ophthalmic	1	
olopatadine hcl ophthalmic solution 0.1 %	3	
olopatadine hcl ophthalmic solution 0.2 %	E	
POLYCIN	3	
polymyxin b-trimethoprim	1	
PRED FORTE	E	
PRED MILD	3	
prednisolone acetate ophthalmic	1	
PREDNISOLONE ACETATE P-F	E	
PROLENSA	E	
sulfacetamide sodium ophthalmic solution	1	
TOBRADEX OPHTHALMIC OINTMENT	3	
TOBRADEX OPHTHALMIC SUSPENSION 0.3-0.1 %	4	
TOBRADEX ST	E	
tobramycin ophthalmic	1	QL
tobramycin-dexamethasone	2	
VIGAMOX	E	
XDEMVY	4	PA, QL

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Drug Name	Drug Tier	Requirements & Limits
ZYLET	3	
ZYMAXID OPHTHALMIC SOLUTION 0.5 %	4	
<b>Ophthalmic Agents - Drugs for Eye Infection and Inflammation</b>		
bacitracin ophthalmic	1	
neomycin-bacitracin zn-polymyx	1	
neomycin-polymyxin-hc ophthalmic	1	
NEO-POLYCIN	3	
sulfacetamide-prednisolone	1	
<b>Ophthalmic Agents - Drugs for Glaucoma</b>		
ALPHAGAN P OPHTHALMIC SOLUTION 0.1 %	2	QL
ALPHAGAN P OPHTHALMIC SOLUTION 0.15 %	4	QL
AZOPT	E	QL
BETIMOL	2	QL
bimatoprost ophthalmic	2	QL
brimonidine tartrate ophthalmic solution 0.1 %	E	QL
brimonidine tartrate ophthalmic solution 0.15 %	2	QL
brimonidine tartrate ophthalmic solution 0.2 %	1	
brimonidine tartrate-timolol	E	QL
brinzolamide	2	QL
COMBIGAN	2	QL
COSOPT	4	
COSOPT PF	E	QL
DORZOLAMIDE HCL SOLUTION 2 % OPHTHALMIC	4	
dorzolamide hcl solution 2 % ophthalmic	1	
dorzolamide hcl-timolol mal	2	
dorzolamide hcl-timolol mal pf	E	QL
ISTALOL	4	
IYUZEH	E	QL
latanoprost ophthalmic	1	
LUMIGAN	2	
methazolamide oral	1	

Drug Name	Drug Tier	Requirements & Limits
pilocarpine hcl ophthalmic	1	
RHOPRESSA	3	QL
ROCKLATAN	3	QL
SIMBRINZA	E	QL
tafluprost (pf)	3	ST, QL
timolol maleate (once-daily)	3	
timolol maleate ocudose	2	
timolol maleate ophthalmic	1	
timolol maleate pf	2	
TIMOPTIC OCUDOSE	4	
TIMOPTIC OPHTHALMIC SOLUTION 0.25 %, 0.5 %	4	
TIMOPTIC-XE OPHTHALMIC GEL FORMING SOLUTION 0.25 %, 0.5 %	4	
TRAVATAN Z	E	ST, QL
travoprost (bak free)	3	QL
TRUSOPT OPHTHALMIC SOLUTION 2 %	4	
VYZULTA	E	ST, QL
XALATAN	E	
ZIOPTAN	3	ST, QL
<b>Ophthalmic Agents - Drugs for Miscellaneous Eye Conditions</b>		
atropine sulfate ophthalmic solution 1 %	1	
CEQUA	E	PA, QL
cromolyn sodium ophthalmic	1	
CYCLOGYL	4	
cyclopentolate hcl ophthalmic	1	
cyclosporine ophthalmic	E	PA, QL
difluprednate	3	
DUREZOL	4	
ISOPTO ATROPINE OPHTHALMIC SOLUTION 1 %	3	
KLARITY-C DROPS	E	PA
MIEBO	4	PA, QL
RESTASIS	4	PA, QL
RESTASIS MULTIDOSE	E	PA, QL
TYRVAYA	4	PA, QL

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Drug Name	Drug Tier	Requirements & Limits
VERKAZIA	4	PA, QL
VEVYE	E	PA, QL
XIIDRA	4	PA, QL
<b>Otic Agents - Drugs for Ear Conditions</b>		
acetic acid otic	1	
CETRAXAL	3	
CIPRO HC	3	
CIPRODEX OTIC SUSPENSION 0.3-0.1 %	E	
ciprofloxacin hcl otic	1	
ciprofloxacin-dexamethasone	3	
DERMOTIC	4	
flac	1	
fluocinolone acetone otic	1	
hydrocortisone-acetic acid	1	
neomycin-polymyxin-hc otic	1	
ofloxacin otic	2	
<b>Respiratory - Drugs for Anaphylaxis</b>		
AUVI-Q	2	QL
epinephrine solution auto-injector 0.15 mg/0.15ml injection	1	(generic for Adrenaclick), QL
epinephrine solution auto-injector 0.15 mg/0.15ml injection	1	QL
epinephrine solution auto-injector 0.15 mg/0.3ml injection	1	(generic for EpiPen-JR-Single Pack), QL
epinephrine solution auto-injector 0.15 mg/0.3ml injection	1	(generic for EpiPen-JR), QL
epinephrine solution auto-injector 0.3 mg/0.3ml injection	1	(generic for Adrenaclick), QL
epinephrine solution auto-injector 0.3 mg/0.3ml injection	1	(generic for EpiPen-Single Pack), QL
epinephrine solution auto-injector 0.3 mg/0.3ml injection	1	QL
epinephrine solution auto-injector 0.3 mg/0.3ml injection	1	(generic for EpiPen), QL
EPIPEN 2-PAK	E	QL
EPIPEN JR 2-PAK	E	QL

Drug Name	Drug Tier	Requirements & Limits
<b>Respiratory Tract / Pulmonary Agents - Drugs for Allergies, Cough, Cold</b>		
azelastine hcl nasal solution 0.1 %, 137 mcg/spray	3	
azelastine hcl nasal solution 0.15 %	E	
azelastine-fluticasone	E	QL
benzonatate oral capsule 100 mg, 200 mg	1	
benzonatate oral capsule 150 mg	E	
BROMFED DM	3	
carbinoxamine maleate oral tablet 4 mg	1	
carbinoxamine maleate oral tablet 6 mg	E	
cetirizine hcl oral solution	E	
CLARINEX	E	
cyproheptadine hcl oral	1	
desloratadine oral tablet	E	
DYMISTA	E	QL
flunisolide nasal	3	
fluticasone propionate nasal	2	QL
HYCODAN ORAL SOLUTION	E	PA, QL
hydrocod poli-chlorphe poli er	3	PA, QL
hydrocodone bit-homatrop mbr oral solution	1	PA, QL
hydromet	1	PA, QL
HYPERSAL	2	
ipratropium bromide nasal	1	
levocetirizine dihydrochloride oral solution	3	
levocetirizine dihydrochloride oral tablet	1	
mometasone furoate nasal	3	QL
NEBUSAL INHALATION NEBULIZATION SOLUTION 3 %	3	
ODACTRA	4	PA, QL
olopatadine hcl nasal	3	
PATANASE NASAL SOLUTION 0.6 %	E	

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Drug Name	Drug Tier	Requirements & Limits
promethazine-codeine	1	PA, QL
promethazine-dm	1	
pseudoephedrine-bromphen-dm	1	
PULMOSAL	2	
ryvent	E	
sodium chloride inhalation	1	
XHANCE	E	QL, ST
ZETONNA	3	QL

<b>Respiratory Tract / Pulmonary Agents - Drugs for Asthma and COPD</b>		
ACCOLATE	4	
ADVAIR DISKUS	E	QL
ADVAIR HFA	3	QL, RS
AEROCHAMBER HOLDING CHAMBER	3	
AEROCHAMBER PLS FLOVU MTHPIECE	3	
AEROCHAMBER PLUS FLO-VU	3	
AEROCHAMBER PLUS FLO-VU INTERM	3	
AEROCHAMBER PLUS FLO-VU LARGE	3	
AEROCHAMBER PLUS FLO-VU MEDIUM DEVICE	3	
AEROCHAMBER PLUS FLO-VU SMALL	3	
AEROCHAMBER PLUS FLO-VU W/MASK	3	
AIRDUO RESPICLICK 113/14	E	QL
AIRDUO RESPICLICK 232/14	E	QL
AIRDUO RESPICLICK 55/14	E	QL
AIRSUPRA	3	QL
albuterol sulfate hfa aerosol solution 108 (90 base) mcg/act inhalation	2	QL
albuterol sulfate hfa aerosol solution 108 (90 base) mcg/act inhalation	2	(generic for ProAir HFA or Proventil HFA), QL

Drug Name	Drug Tier	Requirements & Limits
albuterol sulfate hfa aerosol solution 108 (90 base) mcg/act inhalation	2	(generic ProAir HFA or Proventil HFA), QL
ALBUTEROL SULFATE HFA AEROSOL SOLUTION 108 (90 BASE) MCG/ACT INHALATION	E	(generic for Ventolin HFA), 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	3	
ALBUTEROL SULFATE NEBULIZATION SOLUTION (5 MG/ML) 0.5% INHALATION	E	
albuterol sulfate nebulization solution (5 mg/ml) 0.5% inhalation	1	
albuterol sulfate oral syrup	1	
ALVESCO	E	QL
ANORO ELLIPTA	3	QL
arformoterol tartrate	3	QL
ARNUITY ELLIPTA	1	QL
ASMANEX (120 METERED DOSES)	E	QL
ASMANEX (14 METERED DOSES)	E	QL
ASMANEX (30 METERED DOSES)	E	QL
ASMANEX (60 METERED DOSES)	E	QL
ASMANEX HFA	E	QL
ATROVENT HFA	3	QL
BEVESPI AEROSPHERE	2	QL
BREO ELLIPTA	3	QL, RS
breyna	E	QL, RS
BREZTRI AEROSPHERE	3	QL, RS
BROVANA	4	QL
budesonide inhalation	2	QL
budesonide-formoterol fumarate	E	QL, RS

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Drug Name	Drug Tier	Requirements & Limits	Drug Name	Drug Tier	Requirements & Limits
COMBIVENT RESPIMAT	3	QL	montelukast sodium oral packet	2	
DALIRESP	4	PA, QL	montelukast sodium oral tablet	1	
DULERA	E	ST, QL	montelukast sodium oral tablet chewable	1	
EASIVENT	3		NUCALA SUBCUTANEOUS SOLUTION AUTO-INJECTOR	4	PA, QL, SP
EASIVENT MASK LARGE	3		NUCALA SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 100 MG/ML	4	PA, QL, SP
EASIVENT MASK MEDIUM	3		NUCALA SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 40 MG/0.4ML	4	PA, QL
EASIVENT MASK SMALL	3		PERFOROMIST	4	QL
FASENRA PEN	4	PA, QL	PROCHAMBER VHC	3	
FLEXICHAMBER	3		PROVENTIL HFA	E	QL
FLOVENT DISKUS INHALATION AEROSOL POWDER BREATH ACTIVATED 100 MCG/ACT, 250 MCG/ACT, 50 MCG/ACT	E	QL	PULMICORT FLEXHALER	E	QL
FLOVENT HFA INHALATION AEROSOL 110 MCG/ACT, 220 MCG/ACT, 44 MCG/ACT	E	QL	PULMICORT SUSPENSION	E	QL
FLUTICASONE FUROATE-VILANTEROL	E	QL, RS	QNASL	E	QL
FLUTICASONE PROPIONATE DISKUS	E	QL	QNASL CHILDRENS	E	QL
FLUTICASONE PROPIONATE HFA	E	QL	QVAR REDIHALER	1	QL
FLUTICASONE-SALMETEROL INHALATION AEROSOL	E	QL, RS	roflumilast	3	PA, QL
fluticasone-salmeterol inhalation aerosol powder breath activated 100-50 mcg/act, 250-50 mcg/act, 500-50 mcg/act	3	QL, RS	SEREVENT DISKUS	2	QL
FLUTICASONE-SALMETEROL INHALATION AEROSOL POWDER BREATH ACTIVATED 113-14 MCG/ACT, 232-14 MCG/ACT, 55-14 MCG/ACT	3	QL	SINGULAIR ORAL PACKET	3	
formoterol fumarate inhalation	3	QL	SINGULAIR ORAL TABLET	E	
INSPIREASE	3		SINGULAIR ORAL TABLET CHEWABLE	E	
ipratropium bromide inhalation	1		SPIRIVA HANDIHALER	2	QL
ipratropium-albuterol	2		SPIRIVA RESPIMAT	2	QL
levalbuterol hcl inhalation	3	QL	STIOLTO RESPIMAT	2	QL
LEVALBUTEROL HFA INHALATION AEROSOL 45 MCG/ACT	3	QL	STRIVERDI RESPIMAT	2	QL
MICROCHAMBER	3		SYMBICORT	3	QL, RS
			TEZSPIRE SUBCUTANEOUS SOLUTION AUTO-INJECTOR	4	PA, QL, SP
			theophylline er	1	
			tiotropium bromide monohydrate	E	QL
			TRELEGY ELLIPTA	3	QL, RS
			VENTOLIN HFA	E	QL
			VORTEX HOLD CHMBR/MASK/CHILD	2	

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Drug Name	Drug Tier	Requirements & Limits
VORTEX HOLD CHMBR/MASK/TODDLER	2	
VORTEX VALVED HOLDING CHAMBER	2	
wixela inhub	3	QL, RS
XOPENEX CONCENTRATE INHALATION NEBULIZATION SOLUTION 1.25 MG/0.5ML	E	QL
XOPENEX HFA	3	QL
XOPENEX INHALATION NEBULIZATION SOLUTION 0.31 MG/3ML, 0.63 MG/3ML, 1.25 MG/3ML	E	QL
YUPELRI	4	PA, QL
zafirlukast	1	

#### Respiratory Tract / Pulmonary Agents - Drugs for Cystic Fibrosis

BETHKIS	E	PA, QL, SP
BRONCHITOL	3	PA, ST, QL, SP
BRONCHITOL TOLERANCE TEST	3	PA, ST, QL, SP
KITABIS PAK	E	PA, QL, SP
PULMOZYME	2	PA, QL, SP
TOBI NEBULIZER	E	PA, QL, SP
TOBI PODHALER	3	PA, QL, SP
tobramycin inhalation nebulization solution 300 mg/4ml	2	PA, QL, SP
tobramycin nebulization solution 300 mg/5ml inhalation	E	PA, QL, SP
tobramycin nebulization solution 300 mg/5ml inhalation	E	PA, (generic for Tob), QL, SP
TOBRAMYCIN NEBULIZATION SOLUTION 300 MG/5ML INHALATION	E	PA, QL, SP
TRIKAFTA ORAL TABLET THERAPY PACK	2	PA, QL, SP

#### Respiratory Tract / Pulmonary Agents - Drugs for Pulmonary Fibrosis

ESBRIET ORAL TABLET	E	PA, QL, SP
OFEV	4	PA, QL, SP

Drug Name	Drug Tier	Requirements & Limits
pirfenidone oral tablet 267 mg, 801 mg	2	PA, QL, SP
pirfenidone oral tablet 534 mg	2	PA, QL

#### Respiratory Tract / Pulmonary Agents - Drugs for Pulmonary Hypertension

ADCIRCA	E	PA, QL, SP
ADEMPAS	2	PA, QL, SP
alyq	2	PA, QL, SP
ambrisentan	2	PA, QL, SP
LETAIRIS	E	PA, QL, SP
OPSUMIT	2	PA, QL, SP
ORENITRAM	4	PA, QL, SP
REMODULIN	E	PA
REVATIO ORAL TABLET	E	QL, SP
sildenafil citrate oral tablet 20 mg	1	QL
tadalafil (pah)	2	PA, QL, SP
TADLIQ	3	PA, QL, SP
TRACLEER 62.5 MG, 125 MG	2	PA, QL, SP
treprostinil	E	PA
TYVASO	2	PA
TYVASO DPI INSTITUTIONAL KIT	2	PA, QL, SP
TYVASO DPI MAINTENANCE KIT	2	PA, QL, SP
TYVASO DPI TITRATION KIT	2	PA, QL, SP
TYVASO REFILL	2	PA
TYVASO STARTER	2	PA
UPTRAVI ORAL	4	PA, QL

#### Skeletal Muscle Relaxants - Drugs for Muscle Pain and Spasm

baclofen oral tablet 10 mg, 20 mg, 5 mg	1	
baclofen oral tablet 15 mg	E	
carisoprodol oral tablet 250 mg	E	
carisoprodol oral tablet 350 mg	1	
chlorzoxazone oral tablet 250 mg, 375 mg, 750 mg	E	
chlorzoxazone oral tablet 500 mg	1	

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Drug Name	Drug Tier	Requirements & Limits
cyclobenzaprine hcl oral tablet 10 mg, 5 mg	1	
cyclobenzaprine hcl oral tablet 7.5 mg	E	
DANTRIUM ORAL	4	
dantrolene sodium oral	1	
FEXMID	E	
LORZONE	E	
metaxalone	3	
methocarbamol oral tablet 1000 mg	E	
methocarbamol oral tablet 500 mg, 750 mg	1	
orphenadrine citrate er	2	
SOMA	E	
tizanidine hcl oral capsule	3	
tizanidine hcl oral tablet	1	
ZANAFLEX	4	

#### Sleep Disorder Agents

AMBIEN	E	
AMBIEN CR	E	
armodafinil	2	QL
BELSOMRA	4	ST, QL
DAYVIGO	4	ST, QL
doxepin hcl oral tablet	E	QL
estazolam	1	
eszopiclone	2	
LUMRYZ	4	PA, QL, SP
LUNESTA	E	
modafinil oral	2	QL
NUVIGIL	E	QL
PROVIGIL	E	QL
QUVIVIQ	E	ST, QL
ramelteon	3	ST, QL
RESTORIL	4	
ROZEREM	E	ST, QL
SILENOR	E	QL

Drug Name	Drug Tier	Requirements & Limits
SODIUM OXYBATE SOLUTION 500 MG/ML ORAL	4	PA, (manufactured by Hikma), QL, SP
SODIUM OXYBATE SOLUTION 500 MG/ML ORAL	E	PA, (manufactured by Amneal), QL, SP
SUNOSI	2	PA, QL
temazepam	1	
WAKIX	4	PA, QL, SP
XYREM	E	PA, QL, SP
XYWAV	4	PA, QL, SP
zaleplon	1	
zolpidem tartrate er	2	
zolpidem tartrate oral tablet	1	

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alendronate sodium oral tablet ...	53	AMBIEN .....	60	ANDROGEL TRANSDERMAL GEL 20.25 MG/1.25GM (1.62%), 25 MG/2.5GM (1%), 40.5 MG/2.5GM (1.62%), 50 MG/5GM (1%).....	48
alfuzosin hcl er .....	43	AMBIEN CR.....	60	ANGELIQ.....	43
ALINIA ORAL TABLET .....	18	ambrisentan .....	59	ANNOVERA .....	43
aliskiren fumarate .....	21	AMERGE ORAL TABLET 1 MG, 2.5 MG.....	16	ANORO ELLIPTA.....	57
allopurinol oral tablet 100 mg, 300 mg.....	16	amethia oral tablet 0.15-0.03 & 0.01 mg.....	43	ANTARA ORAL CAPSULE 30 MG ..	21
ALLOPURINOL ORAL TABLET 200 MG.....	16	amethyst.....	43	ANTIVERT ORAL TABLET.....	15
ALLZITAL .....	9	amiloride hcl oral .....	21	ANUCORT-HC.....	52
almotriptan malate .....	16	amiloride-hydrochlorothiazide ...	21	ANUSOL-HC EXTERNAL.....	52
ALOGLIPTIN BENZOATE .....	36	amiodarone hcl oral .....	21	ANUSOL-HC RECTAL .....	53
		AMITIZA .....	41	apap-caff-dihydrocodeine.....	9
		amitriptyline hcl oral .....	14		
		AMJEVITA FOR NUVAILA .....	49		
		amlodipine besylate oral .....	21		
		amlodipine besylate-benazepril hcl .....	21		
		amlodipine besylate-valsartan....	21		



APLENZIN.....	14	atorvastatin calcium oral tablet 10 mg, 20 mg.....	22	AVONEX PREFILLED.....	26
aprepitant oral capsule 125 mg, 40 mg, 80 mg.....	15	atorvastatin calcium oral tablet 40 mg, 80 mg.....	22	AYGESTIN ORAL TABLET 5 MG ...	43
apri.....	43	atovaquone.....	18	ayuna.....	43
APRISO.....	53	atovaquone-proguanil hcl.....	18	AZASAN.....	49
APTENSIO XR.....	25	ATRALIN.....	28	AZASITE.....	54
APTIOM.....	13	atropine sulfate ophthalmic solution 1 %.....	55	azathioprine oral tablet 100 mg, 75 mg.....	49
AQ INSULIN SYRINGE.....	32	ATROVENT HFA.....	57	azathioprine oral tablet 50 mg....	49
AQINJECT PEN NEEDLE.....	32	AUBAGIO.....	26	azelaic acid external.....	28
ARAKODA.....	18	aubra eq.....	43	azelastine hcl nasal solution 0.1 %, 137 mcg/spray.....	56
aranelle.....	43	aubra oral tablet 0.1-20 mg-mcg .	43	azelastine hcl nasal solution 0.15 %.....	56
ARANESP (ALBUMIN FREE).....	37	AUGMENTIN.....	11	azelastine hcl ophthalmic.....	54
ARAVA.....	49	AUGMENTIN ES-600.....	11	azelastine-fluticasone.....	56
ARAZLO.....	28	AUGTYRO.....	17	AZELEX.....	28
arformoterol tartrate.....	57	aurovela 1/20.....	43	AZILECT.....	19
ARICEPT.....	14	aurovela 1.5/30.....	43	azithromycin oral.....	11
ARIMIDEX.....	17	aurovela 24 fe.....	43	AZOPT.....	55
aripiprazole oral solution.....	19	aurovela fe 1/20.....	43	AZOR.....	22
aripiprazole oral tablet.....	19	aurovela fe 1.5/30.....	43	AZSTARYS.....	25
ARIXTRA.....	12	AURYXIA.....	42	AZULFIDINE.....	53
armodafinil.....	60	AUSTEDO.....	27	AZULFIDINE EN-TABS.....	53
ARMOUR THYROID.....	49	AUSTEDO XR ORAL TABLET EXTENDED RELEASE 24 HOUR 12 MG, 24 MG, 6 MG.....	27	azurette.....	43
ARNUITY ELLIPTA.....	57	AUSTEDO XR ORAL TABLET EXTENDED RELEASE 24 HOUR 30 MG, 36 MG, 42 MG, 48 MG.....	27		
AROMASIN.....	17	AUSTEDO XR PATIENT TITRATION.....	27		
ARTHROTEC.....	10	AUVELITY.....	14		
ASACOL HD ORAL TABLET DELAYED RELEASE 800 MG.....	53	AUVI-Q.....	56		
ascomp-codeine.....	9	AVALIDE.....	22		
asenapine maleate.....	19	AVAPRO.....	22		
ashlyna.....	43	AVAR CLEANSER.....	28		
ASMANEX (120 METERED DOSES).....	57	AVAR LS CLEANSER.....	28		
ASMANEX (14 METERED DOSES) .	57	AVAR-E EMOLLIENT.....	28		
ASMANEX (30 METERED DOSES) .	57	AVAR-E GREEN.....	28		
ASMANEX (60 METERED DOSES) .	57	AVAR-E LS.....	28		
ASMANEX HFA.....	57	aviane.....	43		
aspirin-dipyridamole er.....	37	AVIDOXY.....	11		
ATACAND.....	22	AVITA EXTERNAL CREAM 0.025 %.....	28		
ATACAND HCT.....	22	AVITA EXTERNAL GEL 0.025 %....	28		
atenolol oral.....	22	AVODART.....	43		
atenolol-chlorthalidone.....	22	AVONEX PEN.....	26		
ATIVAN ORAL.....	21				
atomoxetine hcl.....	25				
ATORVALIQ.....	22				

## B

bac.....	9
bacitracin ophthalmic.....	55
bacitracin-polymyxin b.....	54
baclofen oral tablet 10 mg, 20 mg, 5 mg.....	59
baclofen oral tablet 15 mg.....	59
BACTRIM.....	11
BACTRIM DS.....	11
BAFIERTAM.....	26
BALCOLTRA.....	43
balsalazide disodium.....	53
balziva.....	43
BANZEL.....	13
BAQSIMI ONE PACK.....	36
BAQSIMI TWO PACK.....	36
BARACLUDGE ORAL TABLET.....	20
BASAGLAR KWIKPEN.....	35
BASAGLAR TEMPO PEN.....	35
BD AUTOSHIELD DUO PEN NEEDLES.....	32



BD ECLIPSE NEEDLE 18G X 1-1/2", 25G X 5/8", 27G X 1/2".....	32	betamethasone valerate external ointment.....	28	brimonidine tartrate ophthalmic solution 0.2 %.....	55
BD ECLIPSE NEEDLE 23G X 1" (OTC).....	32	BETAPACE.....	22	brimonidine tartrate-timolol.....	55
BD ECLIPSE NEEDLE 23G X 1" (RX).....	32	BETAPACE AF.....	22	brinzolamide.....	55
BD ECLIPSE SHIELDED NEEDLE.....	32	BETASERON.....	26	BRIVIACT ORAL SOLUTION.....	13
BD SAFETYGLIDE SHIELDED NEEDLE 21G X 1-1/2".....	32	betaxolol hcl oral.....	22	BRIVIACT ORAL TABLET.....	13
BD SHARPS COLLECTOR.....	32	bethanechol chloride oral.....	42	BROMFED DM.....	56
BD ULTRA-FINE insulin syringes.....	32	BETHKIS.....	59	bromfenac sodium (once-daily) ..	54
BD ULTRA-FINE PEN NEEDLES.....	32	BETIMOL.....	55	bromfenac sodium ophthalmic solution 0.07 %.....	54
BD ULTRA-FINE U-500 insulin syringes.....	32	BEVESPI AEROSPHERE.....	57	bromfenac sodium ophthalmic solution 0.075 %.....	54
BD ULTRA-FINE VEO insulin syringes.....	32	BEXSERO.....	51	bromocriptine mesylate oral tablet.....	19
BELBUCA.....	9	BEYAZ.....	43	BROMSITE.....	54
BELSOMRA.....	60	bicalutamide.....	17	BRONCHITOL.....	59
benazepril hcl oral.....	22	BIDIL.....	22	BRONCHITOL TOLERANCE TEST.....	59
benazepril-hydrochlorothiazide ..	22	BIGFOOT UNITY PROGRAM.....	32	BROVANA.....	57
BENICAR.....	22	BIJUVA.....	43	BRUKINSA.....	17
BENICAR HCT.....	22	BIKTARVY.....	20	budesonide er.....	53
BENLYSTA SUBCUTANEOUS SOLUTION AUTO-INJECTOR.....	49	bimatoprost ophthalmic.....	55	budesonide inhalation.....	57
BENZAMYCIN.....	28	BIMZELX.....	49	budesonide oral.....	53
benzonatate oral capsule 100 mg, 200 mg.....	56	BIOTEL CARE TEST STRIPS.....	32	budesonide rectal.....	53
benzonatate oral capsule 150 mg.....	56	bis subcit-metronid-tetracyc.....	40	budesonide-formoterol fumarate.....	57
benzoyl peroxide-erythromycin ..	28	bismuth/metronidaz/tetracyclin .	40	bumetanide oral.....	22
benztropine mesylate oral.....	19	bisoprolol fumarate oral.....	22	BUMEX.....	22
BESIVANCE.....	54	bisoprolol-hydrochlorothiazide...	22	BUPAP.....	9
betamethasone dipropionate aug external cream.....	28	BLEPH-10 OPHTHALMIC SOLUTION 10 %.....	54	buprenorphine.....	9, 10
betamethasone dipropionate aug external lotion.....	28	blisovi 24 fe.....	43	buprenorphine hcl sublingual.....	10
betamethasone dipropionate aug external ointment.....	28	blisovi fe 1/20.....	43	buprenorphine hcl-naloxone hcl..	10
betamethasone dipropionate external cream.....	28	blisovi fe 1.5/30.....	43	bupropion hcl er (smoking det) ...	10
betamethasone dipropionate external lotion.....	28	BLOOD GLUCOSE TEST STRIPS ..	32	bupropion hcl er (sr).....	14
betamethasone dipropionate external ointment.....	28	BLOOD GLUCOSE TEST STRIPS 333.....	32	bupropion hcl er (xl) oral tablet extended release 24 hour 150 mg, 300 mg.....	14
betamethasone valerate external cream.....	28	BONJESTA.....	15	BUPROPION HCL ER (XL) ORAL TABLET EXTENDED RELEASE 24 HOUR 450 MG.....	14
betamethasone valerate external lotion.....	28	BOOSTRIX.....	51	bupropion hcl oral.....	14
		BOSULIF ORAL TABLET.....	17	buspirone hcl oral.....	21
		BREO ELLIPTA.....	57	butalbital-acetaminophen oral tablet 50-300 mg.....	9
		brey-na.....	57	butalbital-acetaminophen oral tablet 50-325 mg.....	9
		BREZTRI AEROSPHERE.....	57	butalbital-apap-caff-cod oral capsule 50-300-40-30 mg.....	9
		briellyn.....	43		
		BRILINTA.....	19		
		brimonidine tartrate external.....	28		
		brimonidine tartrate ophthalmic solution 0.1 %.....	55		
		brimonidine tartrate ophthalmic solution 0.15 %.....	55		





butalbital-apap-caff-cod oral capsule 50-325-40-30 mg	9	CAMZYOS	22	CASODEX	17
butalbital-apap-caffeine oral capsule 50-300-40 mg	9	CANASA	53	CATAPRES-TTS-1	22
butalbital-apap-caffeine oral capsule 50-325-40 mg	9	candesartan cilexetil	22	CATAPRES-TTS-2	22
butalbital-apap-caffeine oral tablet	9	candesartan cilexetil-hctz	22	CATAPRES-TTS-3	22
butalbital-asa-caff-codeine	9	capecitabine	17	CAVERJECT IMPULSE	42
butalbital-aspirin-caffeine	9	CAPLYTA	19	caziant oral tablet 0.1/0.125/0.15 -0.025 mg	43
butorphanol tartrate nasal	9	captopril oral	22	cefadroxil	11
BUTRANS	9	CARAC	28	cefdinir	11
BYDUREON BCISE AUTOINJECTOR	36	CARAFATE	40	cefixime	11
BYETTA 10 MCG PEN	36	carbamazepine er oral capsule extended release 12 hour	13	cefopodoxime proxetil oral tablet	11
BYETTA 5 MCG PEN	36	carbamazepine er oral tablet extended release 12 hour	13	cefprozil	11
BYSTOLIC	22	carbamazepine oral tablet	13	cefuroxime axetil	11
<b>C</b>					
cabergoline	48	carbamazepine oral tablet chewable	13	CELEBREX	10
CABOMETYX	17	CARBATROL	13	celecoxib oral	10
CADUET	22	carbidopa-levodopa er	19	CELEXA	14
CALAN SR ORAL TABLET EXTENDED RELEASE 120 MG, 180 MG, 240 MG	22	carbidopa-levodopa oral tablet	19	CELLCEPT	49
calcipotriene external cream	28	carbidopa-levodopa-entacapone	19	CENTANY EXTERNAL OINTMENT 2 %	11
calcipotriene external ointment	28	carbinoxamine maleate oral tablet 4 mg	56	cephalexin	11
calcipotriene external solution	28	carbinoxamine maleate oral tablet 6 mg	56	CEQUA	55
calcipotriene-betameth diprop external suspension	28	CARDIZEM	22	CEQUR SIMPLICITY 2U 10PK	32
calcitonin (salmon) injection	53	CARDIZEM CD	22	CERDELGA	42
calcitonin (salmon) nasal	53	CARDIZEM LA	22	cetirizine hcl oral solution	56
CALCITRENE	28	CARDURA	22	CETRAXAL	56
calcitriol oral	53	CAREPOINT POLY HUB NEEDLE 18G X 1", 20G X 1", 21G X 1", 22G X 1", 23G X 1", 25G X 1", 25G X 5/8"	32	cetorelix acetate	52
calcium acetate (phos binder) oral capsule	42	CAREPOINT POLY HUB NEEDLE 22G X 1-1/2"	32	CETROTIDE	52
calcium acetate (phos binder) oral tablet	38	CAREPOINT SAFETY 1ST NEEDLE	32	cevimeline hcl	27
calcium acetate oral tablet 667 mg	38	CARETOUCH MONITOR SYSTEM	32	charlotte 24 fe	43
CALQUENCE	17	CARETOUCH TEST	32	chateal eq	43
CALQUENCE ORAL CAPSULE 100 MG	17	carisoprodol oral tablet 250 mg	59	chateal oral tablet 0.15-30 mg-mcg	43
CAMBIA	10	carisoprodol oral tablet 350 mg	59	chlordiazepoxide hcl	21
camila	43	CARNITOR ORAL SOLUTION	38	chlordiazepoxide-clidinium	41
camrese	43	CARNITOR ORAL TABLET	42	chlorhexidine gluconate mouth/throat	27
camrese lo	43	CARNITOR SF	38	chlorpromazine hcl oral tablet	19
		cartia xt	22	chlorthalidone	22
		carvedilol	22	chlorzoxazone oral tablet 250 mg, 375 mg, 750 mg	59
		carvedilol phosphate er	22	chlorzoxazone oral tablet 500 mg	59
				cholestyramine light	22
				cholestyramine oral	22
				CHORIONIC GONADOTROPIN INTRAMUSCULAR	52



CIALIS .....	38	CLEOCIN VAGINAL CREAM.....	11	CLOBEX SPRAY .....	29
CIBINQO .....	28	CLEOCIN-T.....	28, 29	clodan .....	29
ciclodan .....	16	CLIMARA.....	43, 44	CLOMID.....	52
ciclopirox external gel.....	16	CLIMARA PRO .....	43	clomiphene citrate oral tablet	
ciclopirox external shampoo.....	16	clindacin .....	28	50 mg .....	52
ciclopirox external solution .....	16	clindacin etz external swab .....	28	clomipramine hcl oral .....	14
ciclopirox olamine external		clindacin-p .....	28	clonazepam oral .....	21
cream .....	16	CLINDAGEL.....	29	clonidine hcl er oral tablet	
ciclopirox olamine external		clindamycin hcl oral .....	11	extended release 12 hour .....	25
suspension.....	28	clindamycin palmitate hcl.....	11	clonidine hcl oral.....	22
cilostazol .....	19	clindamycin phos-benzoyl perox		clonidine patch weekly	
CIMDUO .....	20	external gel 1-5 %, 1.2-2.5 %, .....	29	0.1 mg/24hr transdermal.....	22
cimetidine oral.....	40	1.2-3.75 %.....	29	clonidine patch weekly	
CIMZIA.....	49	clindamycin phos-benzoyl perox		0.2 mg/24hr transdermal .....	22
CIMZIA (2 SYRINGE) .....	49	external gel 1.2-5 %.....	29	clonidine patch weekly	
CIMZIA STARTER KIT.....	49	clindamycin phosphate external		0.3 mg/24hr transdermal .....	22
cinacalcet hcl .....	53	foam.....	29	clopidogrel bisulfate oral.....	19
CINRYZE .....	49	clindamycin phosphate external		clorazepate dipotassium .....	21
CIPRO HC .....	56	lotion .....	29	clotrimazole external cream .....	29
CIPRO ORAL TABLET.....	11	clindamycin phosphate external		clotrimazole mouth/throat .....	16
CIPRODEX OTIC SUSPENSION		solution .....	29	clotrimazole-betamethasone.....	29
0.3-0.1 %.....	56	clindamycin phosphate external		clozapine oral tablet.....	19
ciprofloxacin hcl ophthalmic.....	54	swab .....	29	CLOZARIL.....	19
ciprofloxacin hcl oral .....	11	clindamycin phosphate gel 1 %		CO-NATAL FA .....	38
ciprofloxacin hcl otic .....	56	external .....	29	COLAZAL .....	53
ciprofloxacin-dexamethasone.....	56	clindamycin phosphate vaginal... ..	11	colchicine oral .....	16
citalopram hydrobromide oral		clindamycin-tretinoin .....	29	colchicine-probenecid .....	16
solution .....	14	CLINDESSE .....	11	colesevelam hcl oral tablet.....	22
citalopram hydrobromide oral		CLINPRO 5000 .....	27	COLESTID ORAL TABLET .....	22
tablet.....	14	clobazam oral suspension.....	13	colestipol hcl oral tablet.....	22
CITRANATAL 90 DHA.....	38	clobazam oral tablet.....	13	COMBIGAN .....	55
CITRANATAL ASSURE .....	38	clobetasol propionate e.....	29	COMBIPATCH.....	43
CITRANATAL DHA ORAL 27-1 &		clobetasol propionate external		COMBIVENT RESPIMAT.....	58
250 MG.....	38	cream .....	29	COMIRNATY INTRAMUSCULAR	
claravis .....	28	clobetasol propionate external		SUSPENSION .....	52
CLARINEX .....	56	foam.....	29	COMPLERA .....	20
clarithromycin er .....	11	clobetasol propionate external		COMPLETENATE .....	38
clarithromycin oral suspension		gel .....	29	COMPRO .....	15
reconstituted .....	11	clobetasol propionate external		COMTAN ORAL TABLET 200 MG..	19
clarithromycin oral tablet .....	11	liquid .....	29	CONCEPT DHA.....	38
CLENPIQ.....	41	clobetasol propionate external		CONCERTA.....	26
CLEOCIN ORAL CAPSULE		ointment.....	29	constulose .....	41
150 MG, 300 MG .....	11	clobetasol propionate external		CONTOUR MONITOR KIT W/	
CLEOCIN ORAL CAPSULE 75 MG..	11	shampoo.....	29	DEVICE.....	32
CLEOCIN ORAL SOLUTION		clobetasol propionate external		CONTOUR NEXT EZ KIT W/	
RECONSTITUTED.....	11	solution .....	29	DEVICE.....	32
		CLOBEX EXTERNAL SHAMPOO... ..	29		



CONTOUR NEXT GEN MONITOR KIT.....	32	cyclobenzaprine hcl oral tablet 10 mg, 5 mg.....	60	D-CARE GLUCOMETER .....	33
CONTOUR NEXT GEN TEST STRIPS .....	32	cyclobenzaprine hcl oral tablet 7.5 mg .....	60	dabigatran etexilate mesylate ....	12
CONTOUR NEXT LINK KIT W/ DEVICE.....	33	CYCLOGYL.....	55	dalfampridine er.....	26
CONTOUR NEXT MONITOR KIT W/DEVICE .....	33	cyclopentolate hcl ophthalmic ...	55	DALIRESP .....	58
CONTOUR NEXT ONE DEVICE....	33	cyclophosphamide oral capsule ..	17	DANTRIUM ORAL.....	60
CONTOUR NEXT ONE KIT.....	33	CYCLOSET .....	36	dantrolene sodium oral.....	60
CONTOUR TEST STRIPS.....	33	cyclosporine modified oral capsule.....	49	DAPAGLIFLOZIN PRO- METFORMIN ER.....	36
COPAXONE .....	26	cyclosporine ophthalmic.....	55	DAPAGLIFLOZIN PROPANEDIOL .	36
CORDRAN.....	29	cyclosporine oral .....	49	dapsone external .....	29
COREG .....	22	CYLTEZO (2 PEN) SUBCUTANEOUS AUTO- INJECTOR KIT 40 MG/0.4ML .....	49	dapsone oral .....	17
COREG CR .....	22	CYLTEZO (2 PEN) SUBCUTANEOUS AUTO- INJECTOR KIT 40 MG/0.8ML .....	49	darifenacin hydrobromide er.....	42
CORGARD.....	22	CYLTEZO (2 SYRINGE) SUBCUTANEOUS PREFILLED SYRINGE KIT 10 MG/0.2ML, 20 MG/0.4ML, 40 MG/0.8ML.....	49	darunavir.....	20
CORLANOR .....	22	CYLTEZO (2 SYRINGE) SUBCUTANEOUS PREFILLED SYRINGE KIT 40 MG/0.4ML.....	49	dasetta 1/35 .....	43
CORTEF .....	47	CYLTEZO-CD/UC/HS STARTER SUBCUTANEOUS AUTO- INJECTOR KIT 40 MG/0.4ML .....	50	dasetta 7/7/7 .....	43
CORTENEMA.....	53	CYLTEZO-CD/UC/HS STARTER SUBCUTANEOUS AUTO- INJECTOR KIT 40 MG/0.8ML .....	50	DAVIMET-FLUORIDE.....	38
CORTIFOAM .....	53	CYLTEZO-PSORIASIS/UV STARTER SUBCUTANEOUS AUTO-INJECTOR KIT 40 MG/0.4ML .....	50	DAYPRO .....	10
COSENTYX SENSOREADY.....	49	CYLTEZO-PSORIASIS/UV STARTER SUBCUTANEOUS AUTO-INJECTOR KIT 40 MG/0.8ML .....	50	daysee.....	44
COSENTYX SUBCUTANEOUS SOLUTION PREFILLED SYRINGE .	49	CYMBALTA .....	14	DAYTRANA.....	26
COSENTYX UNOREADY .....	49	cyproheptadine hcl oral.....	56	DAYVIGO.....	60
COSOPT.....	55	cyred eq.....	43	DAZOMON .....	29
COSOPT PF .....	55	cyred oral tablet 0.15-30 mg-mcg.....	43	DDAVP ORAL.....	48
COTELLIC.....	17	CYTOMEL.....	49	deblitane.....	44
COTEMPLA XR-ODT .....	26	CYTOTEC.....	40	deferasirox oral tablet.....	38
COVARYX .....	43			DELESTROGEN .....	44
COVARYX HS.....	43			DELSTRIGO.....	20
COZAAR.....	22			delyla.....	44
CREON .....	42			DENTA 5000 PLUS.....	27
CRESEMBA ORAL.....	16			DENTAGEL .....	27
CRESTOR.....	22			DEPAKOTE .....	13
cromolyn sodium ophthalmic.....	55			DEPAKOTE ER.....	13
cromolyn sodium oral .....	41			DEPAKOTE SPRINKLES.....	13
cryselle-28 .....	43			DEPEN TITRATABS.....	42
CUVPOSA .....	41			DEPO-ESTRADIOL .....	44
CVS ADVANCED GLUCOSE TEST .	33			DEPO-PROVERA .....	44
CVS GLUCOSE METER TEST STRIPS .....	33			DEPO-SUBQ PROVERA 104 .....	44
cyanocobalamin injection solution 1000 mcg/ml.....	38			DEPO-TESTOSTERONE INTRAMUSCULAR SOLUTION 100 MG/ML .....	48
CYANOCOBALAMIN INJECTION SOLUTION 2000 MCG/ML.....	38			DEPO-TESTOSTERONE INTRAMUSCULAR SOLUTION 200 MG/ML .....	48
cyanocobalamin nasal.....	38			DERMA-SMOOTH/FS BODY .....	29
				DERMA-SMOOTH/FS SCALP ....	29
				DERMACINRX UREA.....	29
		<b>D</b>			
		D-CARE BLOOD GLUCOSE.....	33		



DERMOTIC.....	56	dextroamphetamine sulfate er oral capsule extended release 24 hour 10 mg, 5 mg .....	26	diltiazem hcl er oral capsule extended release 12 hour .....	22
DESCOVY ORAL TABLET 120/15 MG.....	20	dextroamphetamine sulfate er oral capsule extended release 24 hour 15 mg .....	26	diltiazem hcl er oral capsule extended release 24 hour .....	22
DESCOVY ORAL TABLET 200/25 MG.....	20	dextroamphetamine sulfate oral tablet 10 mg, 5 mg .....	26	diltiazem hcl er oral tablet extended release 24 hour .....	22
desipramine hcl oral .....	14	dextroamphetamine sulfate oral tablet 15 mg, 2.5 mg, 20 mg, 30 mg, 7.5 mg .....	26	diltiazem hcl oral.....	23
desloratadine oral tablet .....	56	DHIVY.....	19	dimethyl fumarate oral.....	26
desmopressin acetate oral .....	48	DIASTAT ACUDIAL RECTAL GEL 10 MG, 20 MG .....	13	DIOVAN .....	23
desmopressin acetate spray .....	48	diazepam oral solution .....	21	DIOVAN HCT .....	23
desogestrel-ethinyl estradiol oral tablet 0.15-0.02/0.01 mg (21/5).....	44	diazepam oral tablet.....	21	DIPENTUM.....	53
desogestrel-ethinyl estradiol oral tablet 0.15-30 mg-mcg.....	44	diazepam rectal.....	13	diphenoxylate-atropine oral tablet.....	41
desonide external cream.....	29	DICLEGIS .....	15	DIPROLENE.....	29
desonide external lotion .....	29	diclofenac potassium oral tablet 25 mg.....	10	disulfiram oral .....	10
desonide external ointment .....	29	diclofenac potassium oral tablet 50 mg .....	10	DITROPAN XL ORAL TABLET EXTENDED RELEASE 24 HOUR 10 MG, 5 MG.....	42
DESOWEN.....	29	diclofenac potassium(migraine) ..	10	divalproex sodium er .....	13
desoximetasone external cream ..	29	diclofenac sodium er .....	10	divalproex sodium oral capsule delayed release sprinkle.....	13
desoximetasone external ointment .....	29	diclofenac sodium external gel 1% .....	10	divalproex sodium oral tablet delayed release .....	13
DESVENLAFAXINE ER.....	14	diclofenac sodium external gel 3%.....	29	DIVIGEL.....	44
desvenlafaxine succinate er .....	14	diclofenac sodium ophthalmic....	54	DODEx .....	38
DETROL .....	42	diclofenac sodium oral .....	10	dofetilide.....	23
DETROL LA .....	42	diclofenac-misoprostol .....	10	dolishale.....	44
DEXABLISS .....	47	dicloxacillin sodium.....	11	donepezil hcl oral tablet 10 mg, 5 mg .....	14
dexamethasone intensol.....	47	dicyclomine hcl oral .....	41	donepezil hcl oral tablet 23 mg ...	14
dexamethasone oral elixir.....	47	DIFFERIN EXTERNAL GEL 0.3% ..	29	DOPTELET .....	37
dexamethasone oral solution .....	47	DIFICID ORAL TABLET .....	11	DORYX MPC.....	11
dexamethasone oral tablet .....	47	DIFLUCAN .....	16	DORYX ORAL TABLET DELAYED RELEASE 200 MG, 50 MG, 80 MG ..	11
dexamethasone oral tablet therapy pack.....	47	difluprednate .....	55	DORZOLAMIDE HCL SOLUTION 2% OPHTHALMIC.....	55
dexamethasone sodium phosphate ophthalmic .....	54	digitek oral tablet 125 mcg, 250 mcg.....	22	dorzolamide hcl-timolol mal .....	55
DEXCOM G6 RECEIVER .....	33	digox .....	22	dorzolamide hcl-timolol mal pf ...	55
DEXCOM G6 SENSOR .....	33	digoxin oral tablet .....	22	dotti .....	44
DEXCOM G6 TRANSMITTER.....	33	DILANTIN INFATABS .....	13	DOVATO.....	20
DEXCOM G7 RECEIVER .....	33	DILANTIN ORAL CAPSULE.....	13	DOVONEX EXTERNAL CREAM 0.005%.....	29
DEXCOM G7 SENSOR .....	33	DILAUDID ORAL TABLET.....	9	doxazosin mesylate oral.....	23
DEXEDRINE.....	26	dilt-xr.....	23	doxepin hcl oral capsule.....	14
DEXILANT .....	40	diltiazem hcl er beads .....	22	doxepin hcl oral concentrate .....	14
dexlansoprazole .....	40	diltiazem hcl er coated beads.....	22	doxepin hcl oral tablet.....	60
dexmethylphenidate hcl .....	26			doxycycline .....	11, 29
dexmethylphenidate hcl er .....	26				



doxycycline hyclate oral capsule...	11	DXEVO 11-DAY ORAL TABLET THERAPY PACK 1.5 MG	47	ELIQUIS	12	
doxycycline hyclate oral tablet 100 mg	11	DYANAVEL XR	26	ELIQUIS DVT/PE STARTER PACK	12	
doxycycline hyclate oral tablet 150 mg, 50 mg, 75 mg	11	DYMISTA	56	ELITE-OB	38	
doxycycline hyclate oral tablet 20 mg	11	DYRENIUM	23	ELLA	44	
doxycycline hyclate oral tablet delayed release 100 mg, 150 mg, 200 mg, 50 mg, 75 mg	11	<b>E</b>			ELMIRON	42
DOXYCYCLINE HYCLATE ORAL TABLET DELAYED RELEASE 80 MG	11	E.E.S. GRANULES	11	ELOCTATE	37	
doxycycline monohydrate oral capsule 100 mg, 50 mg	11	EASIVENT	58	eluryng	44	
doxycycline monohydrate oral capsule 150 mg, 75 mg	11	EASIVENT MASK LARGE	58	EMBRACE BLOOD GLUCOSE TEST	33	
doxycycline monohydrate oral suspension reconstituted	11	EASIVENT MASK MEDIUM	58	EMBRACE WAVE BLOOD GLUCOSE IN VITRO	33	
doxycycline monohydrate oral tablet	11	EASIVENT MASK SMALL	58	EMEND ORAL CAPSULE	15	
doxylamine-pyridoxine	15	EASY MAX BLOOD GLUCOSE TEST	33	EMGALITY	16	
DRISDOL	38	EASY MAX T1 GLUCOSE SYSTEM	33	emoquette oral tablet 0.15-30 mg-mcg	44	
dronabinol	15	EASY TOUCH HEALTHPRO GLUCOSE	33	EMPAVELI	50	
DROPSAFE SAFETY SYRINGE/ NEEDLE	33	EASY TOUCH TEST	33	emtricitabine-tenofovir df oral tablet 100-150 mg, 133-200 mg, 167-250 mg	20	
drosipren-eth estrad-levomefol	44	EASYGLUCO	33	emtricitabine-tenofovir df oral tablet 200-300 mg	20	
drosiprenone-ethinyl estradiol	44	EASYMAX 15 TEST	33	emzahn	44	
DRYSOL	29	EASYMAX NG BLOOD GLUCOSE KIT	33	enalapril maleate oral solution	23	
DUAVEE	44	EC-NAPROSYN ORAL TABLET DELAYED RELEASE 375 MG	10	enalapril maleate oral tablet	23	
DULERA	58	EC-NAPROSYN ORAL TABLET DELAYED RELEASE 500 MG	10	enalapril-hydrochlorothiazide	23	
duloxetine hcl oral capsule delayed release particles 20 mg, 30 mg, 60 mg	14	ec-naproxen	10	ENBREL	50	
duloxetine hcl oral capsule delayed release particles 40 mg	14	econazole nitrate external	16	ENBREL MINI	50	
DUPIXENT SUBCUTANEOUS SOLUTION PEN-INJECTOR	29	ED-SPAZ ORAL TABLET DISPERSIBLE 0.125 MG	41	ENBREL SURECLICK	50	
DUPIXENT SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 100 MG/0.67ML	29	EDARBI	23	endocet	9	
DUPIXENT SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 200 MG/1.14ML, 300 MG/2ML	29	EDARBYCLOR	23	ENDOMETRIN	52	
DUREZOL	55	EDEX	42	ENGERIX-B	52	
dutasteride oral	43	EEMT	44	enilloring	44	
dutasteride-tamsulosin hcl	43	EEMT HS	44	ENLITE GLUCOSE SENSOR	33	
		efavirenz-emtricitab-tenofo df	20	enoxaparin sodium injection solution prefilled syringe	12	
		EFFER-K ORAL TABLET EFFERVESCENT 10 MEQ, 20 MEQ	38	enpresse-28	44	
		EFFEXOR XR	14	enskyce	44	
		EFFIENT	19	ENSTILAR	29	
		EFUDEX	29	entacapone	19	
		ELEPSIA XR	13	entecavir	20	
		ELESTRIN	44	ENTRESTO ORAL TABLET	23	
		eletriptan hydrobromide	16	ENTYVIO	50	
		ELIDEL	29	enulose	41	
		elinest	44	ENVARUSUS XR	50	
				EPANED	23	
				EPCLUSA ORAL TABLET	20	

EPIDIOLEX.....	13	est estrogens-methyltest .....	44	EVERSENSE E3 SENSOR/ HOLDER.....	33
EPIDUO .....	29	est estrogens-methyltest ds.....	44	EVERSENSE E3 SMART TRANSMITTER.....	33
EPIDUO FORTE .....	29	est estrogens-methyltest hs.....	44	EVERSENSE SENSOR/HOLDER ...	33
epinephrine solution auto- injector 0.15 mg/0.15ml injection.	56	estarylla .....	44	EVERSENSE SMART TRANSMITTER.....	33
epinephrine solution auto- injector 0.15 mg/0.3ml injection..	56	estazolam.....	60	EVISTA .....	53
epinephrine solution auto- injector 0.3 mg/0.3ml injection...	56	ESTRACE.....	44	EVOCLIN EXTERNAL FOAM 1 %... 29	
EPIPEN 2-PAK.....	56	estradiol oral.....	44	EVOXAC.....	27
EPIPEN JR 2-PAK .....	56	estradiol patch twice weekly 0.025 mg/24hr transdermal.....	44	EVRYSDI .....	42
epitol .....	13	estradiol patch twice weekly 0.0375 mg/24hr transdermal .....	44	EXELDERM EXTERNAL CREAM ...	16
eplerenone.....	23	estradiol patch twice weekly 0.05 mg/24hr transdermal.....	44	EXELON .....	14
EPZICOM.....	20	estradiol patch twice weekly 0.075 mg/24hr transdermal.....	44	exemestane.....	17
EQ BLOOD GLUCOSE TEST .....	33	estradiol patch twice weekly 0.1 mg/24hr transdermal.....	44	EXFORGE .....	23
EQUETRO .....	21	estradiol patch twice weekly 0.1 mg/24hr transdermal.....	44	EXFORGE HCT .....	23
ergocalciferol oral capsule ...	38, 40	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 .....	44	EXKIVITY ORAL CAPSULE 40 MG .....	17
ERIVEDGE .....	17	estradiol transdermal gel 0.75 mg/1.25 gm (0.06%).....	44	EXTAVIA.....	26
ERLEADA ORAL TABLET 240 MG .	17	estradiol transdermal patch weekly.....	44	EYSUVIS .....	54
ERLEADA ORAL TABLET 60 MG...	17	estradiol vaginal cream.....	44	ezetimibe .....	23
ERMEZA.....	49	estradiol vaginal tablet.....	44	ezetimibe-simvastatin.....	23
errin .....	44	estradiol valerate intramuscular ..	44		
ERY-TAB .....	11	estradiol-norethindrone acet.....	44	<b>F</b>	
ERYGEL.....	29	ESTRING .....	44	FABHALTA.....	37
ERYPED 200.....	11	ESTROGEL .....	44	FABIOR .....	29
ERYPED 400 .....	11	eszopiclone .....	60	falmina .....	44
erythromycin base oral tablet .....	11	ethambutol hcl oral.....	17	famciclovir oral tablet 125 mg, 500 mg.....	20
erythromycin base oral tablet delayed release .....	11	ethosuximide oral .....	13	famciclovir oral tablet 250 mg....	20
erythromycin ethylsuccinate oral suspension reconstituted 200 mg/5ml .....	12	ethynodiol diac-eth estradiol .....	44	famotidine oral suspension reconstituted .....	40
erythromycin ethylsuccinate oral suspension reconstituted 400 mg/5ml .....	12	etodolac.....	10	famotidine oral tablet 20 mg, 40 mg .....	40
erythromycin external.....	29	etodolac er.....	10	FARXIGA .....	36
erythromycin ophthalmic.....	54	etonogestrel-ethinyl estradiol....	44	FASENRA PEN.....	58
erythromycin oral.....	12	etravirine.....	20	fayosim oral tablet 42-21-21-7 days .....	44
ESBRIET ORAL TABLET .....	59	EUCRISA .....	29	febuxostat .....	16
escitalopram oxalate oral solution .....	14	euthyrox.....	49	felbamate .....	13
escitalopram oxalate oral tablet ..	14	EVAMIST .....	44	FELBATOL.....	13
ESGIC .....	9	EVEKEO .....	26	FELBATOL ORAL SUSPENSION 600 MG/5ML .....	13
esomeprazole magnesium oral capsule delayed release .....	40	everolimus oral tablet 0.25 mg, 0.5 mg, 0.75 mg, 1 mg .....	50	FELDENE ORAL CAPSULE 10 MG, 20 MG .....	10
esomeprazole magnesium oral packet.....	40	everolimus oral tablet 10 mg, 2.5 mg, 5 mg, 7.5 mg .....	17	felodipine er .....	23



FEMARA.....	17	FLOVENT HFA INHALATION AEROSOL 110 MCG/ACT, 220 MCG/ACT, 44 MCG/ACT.....	58	fluoxetine hcl oral solution.....	14
FEMRING.....	45	FLUAD QUADRIVALENT.....	52	fluoxetine hcl oral tablet 10 mg... ..	14
fenofibrate micronized.....	23	FLUARIX QUADRIVALENT INTRAMUSCULAR SUSPENSION PREFILLED SYRINGE 0.5 ML.....	52	fluoxetine hcl oral tablet 20 mg, 60 mg.....	15
fenofibrate oral capsule 134 mg, 200 mg, 67 mg.....	23	FLUBLOK QUADRIVALENT INTRAMUSCULAR SOLUTION PREFILLED SYRINGE 0.5 ML.....	52	fluphenazine hcl oral tablet.....	19
fenofibrate oral capsule 150 mg, 50 mg.....	23	FLUCELVAX QUADRIVALENT INTRAMUSCULAR SUSPENSION PREFILLED SYRINGE.....	52	flurbiprofen oral.....	10
fenofibrate oral tablet 120 mg, 40 mg.....	23	fluconazole oral.....	16	FLUTICASONE FUROATE- VILANTEROL.....	58
fenofibrate oral tablet 145 mg, 160 mg, 48 mg, 54 mg.....	23	fludrocortisone acetate oral.....	47	FLUTICASONE PROPIONATE DISKUS.....	58
fenofibric acid oral capsule delayed release.....	23	FLULAVAL QUADRIVALENT INTRAMUSCULAR SUSPENSION PREFILLED SYRINGE 0.5 ML.....	52	fluticasone propionate external cream.....	30
FENOGLIDE.....	23	flunisolide nasal.....	56	fluticasone propionate external ointment.....	30
fantanyl transdermal patch 72 hour 100 mcg/hr, 12 mcg/hr, 25 mcg/hr, 50 mcg/hr, 75 mcg/hr .	9	fluocinolone acetonide body.....	29	FLUTICASONE PROPIONATE HFA.....	58
fantanyl transdermal patch 72 hour 37.5 mcg/hr, 62.5 mcg/hr, 87.5 mcg/hr.....	9	fluocinolone acetonide external cream.....	30	fluticasone propionate nasal.....	56
fesoterodine fumarate er.....	42	fluocinolone acetonide external ointment.....	30	FLUTICASONE-SALMETEROL INHALATION AEROSOL.....	58
FETZIMA.....	14	fluocinolone acetonide external solution.....	30	fluticasone-salmeterol inhalation aerosol powder breath activated 100-50 mcg/ act, 250-50 mcg/act, 500-50 mcg/act.....	58
FEXMID.....	60	fluocinolone acetonide otic.....	56	FLUTICASONE-SALMETEROL INHALATION AEROSOL POWDER BREATH ACTIVATED 113-14 MCG/ACT, 232-14 MCG/ ACT, 55-14 MCG/ACT.....	58
FIASP.....	35	fluocinolone acetonide scalp.....	30	fluvastatin sodium.....	23
FIASP FLEXTOUCH.....	35	fluocinonide external cream 0.05 %.....	30	fluvoxamine maleate.....	15
FINACEA EXTERNAL FOAM.....	29	fluocinonide external cream 0.1 %.....	30	fluvoxamine maleate er.....	15
FINACEA EXTERNAL GEL.....	29	fluocinonide external gel.....	30	FLUZONE HIGH- DOSE QUADRIVALENT INTRAMUSCULAR SUSPENSION PREFILLED SYRINGE 0.7 ML.....	52
finasteride oral tablet 5 mg.....	43	fluocinonide external ointment.....	30	FLUZONE QUADRIVALENT INTRAMUSCULAR SUSPENSION PREFILLED SYRINGE 0.5 ML.....	52
fingolimod hcl.....	26	fluocinonide external solution.....	30	FML FORTE.....	54
FINTEPLA.....	13	FLUORIDEX.....	27	FML LIQUIFILM.....	54
finzala.....	45	FLUORIDEX ENHANCED WHITENING.....	27	FOCALIN.....	26
FIORICET.....	9	FLUORIMAX 5000.....	27	FOCALIN XR.....	26
FIORICET/CODEINE.....	9	fluoritab oral solution 0.275 (0.125 f) mg/drop.....	38	follic acid oral tablet 1 mg.....	38
FIRST-LANSOPRAZOLE.....	41	fluorometholone.....	54	FOLLISTIM AQ.....	52
FIRST-OMEPRAZOLE.....	41	FLUOROURACIL EXTERNAL CREAM 0.5 %.....	30	fondaparinux sodium.....	12
FIRVANQ.....	12	fluorouracil external cream 5 %.....	30	FORA 6 CONNECT/GTEL TEST.....	33
flac.....	56	fluoxetine hcl oral capsule.....	14	FORFIVO XL.....	15
FLAGYL.....	12	fluoxetine hcl oral capsule delayed release.....	14	formoterol fumarate inhalation... ..	58
FLAREX.....	54				
flecainide acetate.....	23				
FLEXICHAMBER.....	58				
FLOMAX.....	43				
FLORIVA PLUS.....	38				
FLOVENT DISKUS INHALATION AEROSOL POWDER BREATH ACTIVATED 100 MCG/ACT, 250 MCG/ACT, 50 MCG/ACT.....	58				



FORTEO.....	53	ganirelix acetate solution prefilled syringe 250 mcg/0.5ml subcutaneous.....	52	glyburide-metformin.....	36
FORTISCARE G1 TEST STRIP IN VITRO STRIP.....	33	GARDASIL 9 INTRAMUSCULAR SUSPENSION PREFILLED SYRINGE.....	52	GLYCATE.....	41
FORTISCARE TEST IN VITRO STRIP.....	33	GASTROCROM.....	41	glycopyrrolate oral solution.....	41
FOSAMAX.....	53	gatifloxacin ophthalmic.....	54	glycopyrrolate oral tablet 1 mg, 2 mg.....	41
fosfomycin tromethamine.....	12	gavilyte-c.....	41	GLYCOPYRROLATE ORAL TABLET 1.5 MG.....	41
fosinopril sodium.....	23	gavilyte-g.....	41	glydo.....	9
fosinopril sodium-hctz.....	23	gavilyte-n with flavor pack.....	41	GLYNASE ORAL TABLET 1.5 MG ..	36
FREESTYLE LIBRE 14 DAY READER.....	33	GAVRETO.....	17	GLYNASE ORAL TABLET 3 MG, 6 MG.....	36
FREESTYLE LIBRE 14 DAY SENSOR.....	33	gemfibrozil oral.....	23	GLYXAMBI.....	36
FREESTYLE LIBRE 2 READER.....	33	gemmily.....	45	GOLYTELY.....	41
FREESTYLE LIBRE 2 SENSOR.....	33	GEMTESA.....	42	GONAL-F.....	52
FREESTYLE LIBRE 3 PLUS SENSOR.....	33	GENERESS FE ORAL TABLET CHEWABLE 0.8-25 MG-MCG.....	45	GONAL-F RFF.....	52
FREESTYLE LIBRE 3 READER.....	33	generlac.....	41	GONAL-F RFF REDIJECT.....	52
FREESTYLE LIBRE 3 SENSOR.....	33	gengraf oral capsule.....	50	GRALISE ORAL TABLET.....	27
FREESTYLE LIBRE READER.....	33	gentamicin sulfate external.....	12	granisetron hcl oral.....	15
FREESTYLE PRECISION NEO SYSTEM.....	33	gentamicin sulfate ophthalmic.....	54	GRASTEK.....	50
FREESTYLE PRECISION NEO TEST.....	33	GENVOYA.....	20	griseofulvin microsize oral.....	16
FREESTYLE TEST.....	33	GEODON ORAL.....	19	griseofulvin ultramicrosize.....	16
FROVA.....	16	GILENYA ORAL CAPSULE 0.25 MG.....	26	guanfacine hcl.....	23, 26
frovatriptan succinate.....	16	GILENYA ORAL CAPSULE 0.5 MG.....	26	guanfacine hcl er.....	26
FUROSCIX.....	23	GIMOTI.....	15	GUARDIAN 4 GLUCOSE SENSOR.....	33
furosemide oral.....	23	glatiramer acetate.....	27	GUARDIAN 4 TRANSMITTER.....	33
fyavolv.....	45	glatopa.....	27	GUARDIAN CONNECT TRANSMITTER.....	33
FYCOMPA ORAL SUSPENSION.....	13	GLEEVEC.....	17	GUARDIAN LINK 3 TRANSMITTER.....	33
FYCOMPA ORAL TABLET.....	13	glimepiride.....	36	GUARDIAN REAL-TIME REPLACE PED.....	33
FYREMADEL.....	52	glipizide er.....	36	GUARDIAN SENSOR (3).....	33

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gabapentin (once-daily).....	27	glipizide oral tablet 10 mg, 5 mg ..	36	GUARDIAN SENSOR 3.....	33
gabapentin oral capsule.....	13	glipizide oral tablet 2.5 mg.....	36	GVOKE HYPOPEN 1-PACK.....	33
gabapentin oral solution 250 mg/5ml.....	13	glipizide xl.....	36	GVOKE HYPOPEN 2-PACK.....	33
GABAPENTIN ORAL TABLET 25 MG, 50 MG.....	13	glipizide-metformin hcl.....	36	GVOKE KIT.....	33
gabapentin oral tablet 600 mg, 800 mg.....	13	GLUCAGON EMERGENCY KIT.....	36	GVOKE PFS.....	33
galantamine hydrobromide er.....	14	glucagon emergency kit 1 mg injection.....	36	GYNAZOLE-1.....	16
ganirelix acetate.....	52	GLUCOCARD EXPRESSION TEST.....	33		
		GLUCOCARD SHINE TEST.....	33		
		GLUCOCARD VITAL TEST.....	33		
		GLUCOTROL XL.....	36		
		GLUMETZA.....	36		
		glyburide micronized.....	36		
		glyburide oral.....	36		

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HADLIMA.....	50
HAEGARDA.....	50
hailey 1.5/30.....	45
hailey 24 fe.....	45
hailey fe 1/20.....	45





hailey fe 1.5/30.....	45	HUMIRA (2 PEN) PEN- INJECTOR KIT 80 MG/0.8ML SUBCUTANEOUS.....	50	hydrocodone-acetaminophen oral tablet 10-325 mg, 5-325 mg, 7.5-325 mg .....	9
HALCION.....	21	HUMIRA (2 PEN) SUBCUTANEOUS PEN- INJECTOR KIT 40 MG/0.8ML .....	50	hydrocodone-ibuprofen.....	9
halobetasol propionate external cream .....	30	HUMIRA (2 SYRINGE) PREFILLED SYRINGE KIT 10 MG/0.1ML SUBCUTANEOUS ...	50	hydrocort-pramoxine (perianal) ..	53
halobetasol propionate external ointment .....	30	HUMIRA (2 SYRINGE) PREFILLED SYRINGE KIT 20 MG/0.2ML SUBCUTANEOUS... ..	50	hydrocortisone (perianal) external cream 1 %.....	53
haloette.....	45	HUMIRA (2 SYRINGE) PREFILLED SYRINGE KIT 40 MG/0.4ML SUBCUTANEOUS ..	50	hydrocortisone (perianal) external cream 2.5 %.....	53
haloperidol oral.....	19	HUMIRA (2 SYRINGE) SUBCUTANEOUS PREFILLED SYRINGE KIT 40 MG/0.8ML.....	50	hydrocortisone ace-pramoxine external cream 1-1 %.....	53
HARVONI ORAL TABLET .....	20	HUMIRA-CD/UC/HS STARTER ...	50	hydrocortisone ace-pramoxine external cream 2.5-1 %.....	30
HAVRIX.....	52	HUMIRA-PED<40KG CROHNS STARTER .....	50	hydrocortisone acetate rectal ....	53
HEALTHPRO BLOOD GLUCOSE MONITO.....	34	HUMIRA-PED>=40KG CROHNS START .....	50	hydrocortisone butyrate external cream.....	30
heather.....	45	HUMIRA-PED>=40KG UC STARTER .....	50	hydrocortisone external cream 1 %.....	30
HEMADY.....	47	HUMIRA-PS/UV/ADOL HS STARTER SUBCUTANEOUS PEN- INJECTOR KIT 40 MG/0.8ML .....	50	hydrocortisone external cream 2.5 %.....	30
HEMANGEOL .....	23	HUMIRA-PSORIASIS/UEVIT STARTER .....	50	hydrocortisone external lotion 2 %, 2.5 % .....	30
HEMLIBRA SUBCUTANEOUS SOLUTION 105 MG/0.7ML, 150 MG/ML, 30 MG/ML, 300 MG/2ML, 60 MG/0.4ML .....	37	HUMULIN 70/30 KWIKPEN .....	35	hydrocortisone external ointment 1 %, 2.5 %.....	30
HEMLIBRA SUBCUTANEOUS SOLUTION 12 MG/0.4ML.....	37	HUMULIN 70/30 VIAL.....	35	hydrocortisone lotion 2%.....	30
HEMMOREX-HC .....	53	HUMULIN N KWIKPEN .....	35	hydrocortisone oral.....	47
HEMOPIL M.....	37	HUMULIN N VIAL.....	35	hydrocortisone rectal .....	53
heparin sodium (porcine) injection solution .....	37	HUMULIN R U-500 KWIKPEN .....	35	hydrocortisone valerate external cream .....	30
heparin sodium (porcine) pf .....	37	HUMULIN R U-500 VIAL .....	35	hydrocortisone valerate external ointment.....	30
HEPLISAV-B.....	52	HUMULIN R VIAL .....	35	hydrocortisone-acetic acid .....	56
HIDEX 6-DAY.....	47	HYCODAN ORAL SOLUTION.....	56	hydromet.....	56
HIPREX.....	12	hydralazine hcl oral .....	23	hydromorphone hcl oral tablet ....	9
HORIZANT .....	27	HYDREA.....	17	hydroxychloroquine sulfate oral ..	18
HULIO (2 PEN) .....	50	hydrochlorothiazide oral .....	23	HYDROXYM EXTERNAL CREAM ..	30
HULIO (2 SYRINGE) .....	50	hydrocod poli-chlorphe poli er....	56	hydroxyurea oral.....	18
HUMALOG INJECTION.....	35	hydrocodone bit-homatrop mbr oral solution.....	56	hydroxyzine hcl oral .....	21
HUMALOG KWIKPEN .....	35	hydrocodone-acetaminophen oral solution 7.5-325 mg/15ml .....	9	hydroxyzine pamoate oral.....	21
HUMALOG MIX 50/50 KWIKPEN ..	35	hydrocodone-acetaminophen oral tablet 10-300 mg, 5-300 mg, 7.5-300 mg.....	9	HYFTOR.....	50
HUMALOG MIX 50/50 VIAL.....	35			hyoscyamine sulfate er.....	41
HUMALOG MIX 75/25 KWIKPEN ..	35			hyoscyamine sulfate oral tablet... ..	41
HUMALOG MIX 75/25 VIAL .....	35			hyoscyamine sulfate oral tablet dispersible .....	41
HUMALOG SUBCUTANEOUS.....	35			hyoscyamine sulfate sublingual... ..	41
HUMALOG TEMPO PEN .....	35			HYPERSAL .....	56
HUMALOG U-100 JUNIOR KWIKPEN.....	35				
HUMATE-P .....	37				
HUMIRA (2 PEN) PEN- INJECTOR KIT 40 MG/0.4ML SUBCUTANEOUS.....	50				

HYRIMOZ SUBCUTANEOUS SOLUTION AUTO-INJECTOR 40 MG/0.4ML.....	50	IMBRUVICA ORAL TABLET 420 MG.....	18	INSULIN DEGLUDEC FLEXTOUCH .....	35
HYRIMOZ SUBCUTANEOUS SOLUTION AUTO-INJECTOR 40 MG/0.8ML, 80 MG/0.8ML .....	50	imipramine hcl oral .....	15	INSULIN GLARGINE.....	35
HYRIMOZ SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 10 MG/0.1 ML, 20 MG/0.2ML, 40 MG/0.4ML.....	50	imiquimod external cream 3.75 %.....	30	INSULIN GLARGINE MAX SOLOSTAR .....	35
HYRIMOZ SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 40 MG/0.8ML .....	50	imiquimod external cream 5 %....	30	INSULIN GLARGINE SOLOSTAR..	35
HYRIMOZ-CROHNS/UC STARTER .....	50	imiquimod pump .....	30	INSULIN GLARGINE-YFGN SUBCUTANEOUS SOLUTION PEN-INJECTOR.....	35
HYRIMOZ-PED<40KG CROHN STARTER .....	50	IMITREX NASAL SOLUTION 20 MG/ACT, 5 MG/ACT .....	16	INSULIN LISPRO .....	35
HYRIMOZ-PED>/=40KG CROHN START .....	50	IMITREX ORAL.....	16	INSULIN LISPRO (1 UNIT DIAL) ..	35
HYRIMOZ-PLAQUE PSORIASIS START .....	50	IMITREX STATDOSE REFILL .....	16	INSULIN LISPRO JUNIOR KWIKPEN.....	35
HYZAAR .....	23	IMITREX STATDOSE SYSTEM .....	16	INSULIN LISPRO PROT & LISPRO .....	35
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naltrexone hcl oral.....	10	NEURONTIN.....	13	norethin ace-eth estrad-fe oral tablet chewable.....	46
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Salt Lake City, UT 84130

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200 Independence Avenue SW  
Room 509F, HHH Building  
Washington, D.C. 20201

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# Multi-language interpreter services

ATTENTION: If you speak English, language assistance services, free of charge, are available to you. Please call the toll-free phone number listed on your identification card.

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PAALALA: Kung nagsasalita ka ng **Tagalog (Tagalog)**, may makukuha kang mga libreng serbisyo ng tulong sa wika. Pakitawagan ang toll-free na numero ng telepono na nasa iyong identification card.

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UWAGA: Jeżeli mówisz po **polsku (Polish)**, udostępniliśmy darmowe usługi tłumacza. Prosimy zadzwonić pod bezpłatny numer telefonu podany na karcie identyfikacyjnej.

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ACHTUNG: Falls Sie **Deutsch (German)** sprechen, stehen Ihnen kostenlos sprachliche Hilfsdienstleistungen zur Verfügung. Bitte rufen Sie die gebührenfreie Rufnummer auf der Rückseite Ihres Mitgliedsausweises an.

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ध्यान दें: यदि आप **हिंदी (Hindi)** बोलते हैं, आपको भाषा सहायता सेवाएं, नि:शुल्क उपलब्ध हैं। कृपया अपने पहचान पत्र पर सूचीबद्ध टोल-फ्री फोन नंबर पर कॉल करें।

CEEB TOOM: Yog koj hais Lus **Hmoob (Hmong)**, muaj kev pab txhais lus pub dawb rau koj. Thov hu rau tus xov tooj hu deb dawb uas teev muaj nyob rau ntawm koj daim yuaj cim qhia tus kheej.

ចំណាប់អារម្មណ៍: បើសិនអ្នកនិយាយ**ខ្មែរ(Khmer)**សូមជំនួយភាសាដទៃយុត្តិធម៌ គឺមានសំរាប់អ្នក។ សូមទូរស័ព្ទទំនាក់ទំនងលើខ្សែកម្រិតតិចតួច ដល់មាន់នៃលើអ្នកសព្វញ្ញាណប័ណ្ណរបស់អ្នក។

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