



Your 2025 Prescription Drug List

Advantage 3-Tier

Effective January 1, 2025

This Prescription Drug List (PDL) is accurate as of January 1, 2025. This PDL applies to members of our Surest plan. Your estimated coverage and copay may vary based on the benefit plan you choose and the effective date of the plan.

Table of contents

Understanding your Prescription Drug List (PDL)	4
Medication tips	5
Reading your PDL	6
Questions	7
Analgesics	
Drugs for Pain.....	8
Drugs for Pain and Inflammation.....	9
Anti-Addiction / Substance Abuse Treatment Agents.....	9
Antibacterials	
Drugs for Infections.....	10
Anticoagulant	
Drugs to Treat or Prevent Blood Clots.....	11
Anticonvulsants	
Drugs for Seizures	11
Antidementia Agents	
Drugs for Alzheimer’s Disease and Dementia	13
Antidepressants	
Drugs for Depression	13
Antiemetics	
Drugs for Nausea and Vomiting	14
Antifungals	
Drugs for Fungal Infections.....	14
Antigout Agents	
Drugs for Gout	15
Antimigraine Agents	
Drugs for Migraines.....	15
Antimyasthenic Agents	
Drugs to Treat Myasthenia Gravis	15
Antimycobacterials	
Drugs to Treat Infections	15
Antineoplastics	
Drugs for Cancer	16
Antiparasitics	
Drugs for Parasitic Infections	17
Antiparkinson Agents	
Drugs for Parkinson’s Disease	17
Antiplatelets	
Drugs for Heart Attack and Stroke Prevention	17
Antipsychotics	
Drugs for Mood Disorders	18
Antivirals	
Drugs for Viral Infections.....	18
Anxiolytics	
Drugs for Anxiety	19
Bipolar Agents	
Drugs for Mood Disorders	19
Cardiovascular Agents	
Drugs for Heart and Circulation Conditions	19
Central Nervous System Agents	
Drugs for Attention Deficit Disorder	23
Drugs for Multiple Sclerosis.....	24
Miscellaneous.....	25

Dental and Oral Agents	
Drugs for Mouth and Throat Conditions . . . . .	.25
Dermatological Agents	
Drugs for Skin Conditions . . . . .	.26
Diabetes	
Glucose Monitoring and Supplies . . . . .	.29
Insulin . . . . .	.32
Non-Insulin Agents . . . . .	.33
Drugs for Blood Disorders . . . . .	.34
Drugs for Sexual Dysfunction . . . . .	.35
Electrolytes / Vitamins . . . . .	.35
Gastrointestinal Agents	
Drugs for Acid Reflux and Ulcer . . . . .	.37
Gastrointestinal Agents	
Drugs for Bowel, Intestine and Stomach Conditions . . . . .	.38
Genetic or Enzyme Disorder - Drugs for Replacement, Modification, Treatment . . . . .	.39
Genitourinary Agents	
Drugs for Bladder, Genital and Kidney Conditions . . . . .	.39
Drugs for Prostate Conditions . . . . .	.40
Hormonal Agents	
Hormone Replacement and Birth Control . . . . .	.40
Oral Steroids . . . . .	.44
Other . . . . .	.44
Testosterone Replacement . . . . .	.45
Thyroid . . . . .	.45
Immunological Agents	
Drugs for Immune System Stimulation or Suppression . . . . .	.45
Drugs for Vaccination . . . . .	.48
Infertility Agents . . . . .	.49
Inflammatory Bowel Disease Agents . . . . .	.49
Metabolic Bone Disease Agents	
Drugs for Osteoporosis . . . . .	.50
Other . . . . .	.50
Ophthalmic Agents	
Drugs for Eye Allergy, Infection and Inflammation . . . . .	.50
Drugs for Eye Infection and Inflammation . . . . .	.51
Drugs for Glaucoma . . . . .	.51
Drugs for Miscellaneous Eye Conditions . . . . .	.52
Otic Agents	
Drugs for Ear Conditions . . . . .	.52
Respiratory	
Drugs for Anaphylaxis . . . . .	.52
Respiratory Tract / Pulmonary Agents	
Drugs for Allergies, Cough, Cold . . . . .	.52
Drugs for Asthma and COPD . . . . .	.53
Drugs for Cystic Fibrosis . . . . .	.55
Drugs for Pulmonary Fibrosis . . . . .	.55
Drugs for Pulmonary Hypertension . . . . .	.55
Skeletal Muscle Relaxants	
Drugs for Muscle Pain and Spasm . . . . .	.55
Sleep Disorder Agents . . . . .	.56
Index . . . . .	.57

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. 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)¹ 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 medications²). 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	\$ Lower-cost Medications that provide the highest overall value. Mostly generic drugs. Some brand-name drugs may also be included.	Use Tier 1 drugs for the lowest out-of-pocket costs.
Tier 2	\$\$ Mid-range cost Medications that provide good overall value. A mix of brand name and generic drugs.	Use Tier 2 drugs, instead of Tier 3, to help reduce your out-of-pocket costs.
Tier 3	\$\$\$ Highest-cost Medications that provide the lowest overall value. Mostly brand-name drugs, as well as some generics.	Ask your doctor if a Tier 1 or Tier 2 option could work for you.

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.

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

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

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.

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

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

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

Coverage is set by the consumer'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 consumer pharmacy and/or medical plan depending on the benefit.

- **Endocrine: growth hormone**

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

- **Infertility**

Coverage is set by the consumer'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 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 consumer'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 consumer'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 the back of your ID card.

Questions

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



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



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

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

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

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

Drug Name	Drug Tier	Requirements & Limits
Analgesics - Drugs for Pain		
acetaminophen-codeine	1	QL
ALLZITAL	E	QL
apap-caff-dihydrocodeine	3	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	3	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	3	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	3	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	3	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
PROLATE ORAL TABLET	E	QL

See page 6, 7 for coverage details. Drugs listed as E or 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
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	3	QL
TRIDACAINE II	E	PA, QL
ULTRACET ORAL TABLET 37.5-325 MG	3	QL
ULTRAM ORAL TABLET 50 MG	E	QL
XTAMPZA ER	3	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	3	
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	3	
ec-naproxen	1	
etodolac	2	
etodolac er	3	
FELDENE ORAL CAPSULE 10 MG, 20 MG	3	

Drug Name	Drug Tier	Requirements & Limits
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	
NARCAN	2	QL (include Narcan OTC)
NICOTROL	3	PA, H
RETOVY	E	
SUBOXONE	E	PA, QL
varenicline tartrate	3	PA, H
varenicline tartrate (starter)	3	PA, H
varenicline tartrate(continue)	3	PA, H

See page 6, 7 for coverage details. Drugs listed as E or 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
ZIMHI	2	QL
ZUBSOLV	2	QL
Antibacterials - Drugs for Infections		
ACTICLATE ORAL TABLET 150 MG, 75 MG	E	
amoxicillin	1	
amoxicillin-potassium clavulanate	1	
ampicillin	1	
AUGMENTIN	E	
AUGMENTIN ES-600	E	
AVIDOXY	3	
azithromycin oral	1	
BACTRIM	3	
BACTRIM DS	3	
cefadroxil	1	
cefdinir	1	
cefixime	3	
cefpodoxime proxetil oral tablet	1	
cefprozil	1	
cefuroxime axetil	1	
CENTANY EXTERNAL OINTMENT 2 %	3	QL
cephalexin	1	
CIPRO ORAL TABLET	3	
ciprofloxacin hcl oral	1	
clarithromycin er	2	
clarithromycin oral suspension reconstituted	2	
clarithromycin oral tablet	1	
CLEOCIN ORAL CAPSULE 150 MG, 300 MG	3	
CLEOCIN ORAL CAPSULE 75 MG	2	
CLEOCIN ORAL SOLUTION RECONSTITUTED	3	
CLEOCIN VAGINAL CREAM	3	
clindamycin hcl oral	1	
clindamycin palmitate hcl	2	
clindamycin phosphate vaginal	2	
CLINDESSE	2	
dicloxacillin sodium	1	
DIFICID ORAL TABLET	3	QL

Drug Name	Drug Tier	Requirements & Limits
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	3	
ERY-TAB	3	
erythromycin base oral tablet	1	
erythromycin base oral tablet delayed release	3	
erythromycin ethylsuccinate oral suspension reconstituted 200 mg/5ml	1	
erythromycin ethylsuccinate oral suspension reconstituted 400 mg/5ml	3	
erythromycin oral	3	
FIRVANQ	3	
FLAGYL	3	
fosfomicin tromethamine	3	
gentamicin sulfate external	1	QL
HIPREX	3	
levofloxacin oral tablet	1	

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Drug Name	Drug Tier	Requirements & Limits
LIKMEZ	3	
linezolid oral tablet	2	
MACROBID	3	
MACRODANTIN	3	
methenamine hippurate	1	
metronidazole oral	1	
metronidazole vaginal	2	
minocycline hcl oral capsule	1	
minocycline hcl oral tablet	E	
MONDOXYNE NL	3	
MONUROL ORAL PACKET 3 GM	3	
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	3	QL
penicillin v potassium	1	
SEYSARA	E	
SILVADENE	3	
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	3	
vancomycin hcl oral	1	
VANDAZOLE	3	
VIBRAMYCIN	3	
XACIATO	2	QL
XENLETA ORAL TABLET 600 MG	3	

Drug Name	Drug Tier	Requirements & Limits
XIFAXAN	3	PA, QL
XIMINO ORAL CAPSULE EXTENDED RELEASE 24 HOUR 135 MG, 45 MG, 90 MG	E	PA
ZITHROMAX ORAL	3	
ZITHROMAX TRI-PAK	3	
ZITHROMAX Z-PAK	3	
ZYVOX ORAL TABLET	E	
Anticoagulants - Drugs to Treat or Prevent Blood Clots		
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
Anticonvulsants - Drugs for Seizures		
APTIOM	3	PA
BANZEL	3	PA
BRIVIACT ORAL SOLUTION	3	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	3	
clobazam oral suspension	3	PA
clobazam oral tablet	2	PA
DEPAKOTE	3	PA
DEPAKOTE ER	3	PA
DEPAKOTE SPRINKLES	3	PA

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Drug Name	Drug Tier	Requirements & Limits
DIASTAT ACUDIAL RECTAL GEL 10 MG, 20 MG	3	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	3	PA
FELBATOL ORAL SUSPENSION 600 MG/5ML	3	PA
FINTEPLA	3	PA
FYCOMPA ORAL SUSPENSION	3	PA
FYCOMPA ORAL TABLET	3	PA
gabapentin oral capsule	1	
gabapentin oral solution 250 mg/5ml	1	
GABAPENTIN ORAL TABLET 25 MG, 50 MG	E	PA
gabapentin oral tablet 600 mg, 800 mg	1	
KEPPRA ORAL	3	PA
KEPPRA XR	3	PA
lacosamide oral	2	
LAMICTAL	3	PA
LAMICTAL ODT ORAL TABLET DISPERSIBLE	3	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	

Drug Name	Drug Tier	Requirements & Limits
MOTPOLY XR	3	PA
MYSOLINE	2	PA
NAYZILAM	3	PA, QL
NEURONTIN	3	PA
ONFI	3	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
SABRIL ORAL PACKET	E	PA, QL, SP
subvenite	1	
SYMPAZAN	3	PA
TEGRETOL ORAL TABLET	3	
TEGRETOL-XR	3	
TOPAMAX	3	PA
TOPAMAX SPRINKLE	3	PA
topiramate er	E	
topiramate oral	1	
TRILEPTAL	3	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	3	PA
XCOPRI	3	PA
ZARONTIN	3	
ZONEGRAN	3	PA
zonisamide oral	1	

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Drug Name	Drug Tier	Requirements & Limits
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	3	
rivastigmine	3	
rivastigmine tartrate	1	
Antidepressants - Drugs for Depression		
amitriptyline hcl oral	1	
ANAFRANIL	E	
APLENZIN	E	QL
AUVELITY	3	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	

Drug Name	Drug Tier	Requirements & Limits
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	3	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
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	3	
nortriptyline hcl oral capsule	1	
olanzapine-fluoxetine hcl	2	QL
PAMELOR	E	
PARNATE	3	
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	

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Drug Name	Drug Tier	Requirements & Limits
sertraline hcl oral tablet	1	
SPRAVATO (56 MG DOSE)	3	PA, QL
SPRAVATO (84 MG DOSE)	3	PA, QL
SYMBYAX	3	QL
tranylcypromine sulfate	1	
trazodone hcl oral	1	
TRINTELLIX	3	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
VIIBRYD	E	QL
VIIBRYD STARTER PACK ORAL KIT 10 & 20 MG	3	
vilazodone hcl	3	QL
WAINUA	2	PA, QL, SP
WELLBUTRIN SR	E	
WELLBUTRIN XL	E	
ZOLOFT	E	
ZURZUVAE	2	PA, QL, SP
Antiemetics - Drugs for Nausea and Vomiting		
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	3	
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	

Drug Name	Drug Tier	Requirements & Limits
prochlorperazine maleate oral	1	
promethazine hcl oral	1	
promethazine hcl rectal	1	
PROMETHEGAN	3	
REGLAN	3	
scopolamine	3	
TRANSDERM-SCOP	E	
Antifungals - Drugs for Fungal Infections		
cicloclan	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	
GNAZOLE-1	3	
itraconazole oral capsule	1	QL
JUBLIA	3	PA, ST, QL
ketoconazole external cream	1	QL
ketoconazole external shampoo	1	
ketoconazole oral	1	
klayesta	1	QL
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

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Drug Name	Drug Tier	Requirements & Limits
posaconazole oral tablet delayed release	2	
SPORANOX ORAL CAPSULE	3	QL
SPORANOX PULSEPAK ORAL CAPSULE 100 MG	3	QL
SULCONAZOLE NITRATE EXTERNAL CREAM	3	
terbinafine hcl oral	1	
terconazole	1	
TOLSURA	E	
VFEND ORAL TABLET 200 MG	3	QL
VFEND ORAL TABLET 50 MG	3	QL
VIVJOA	3	PA, QL
voriconazole oral tablet	1	QL
Antigout Agents - Drugs for Gout		
allopurinol oral tablet 100 mg, 300 mg	1	
ALLOPURINOL ORAL TABLET 200 MG	E	
colchicine oral	2	
colchicine-probenecid	1	
febuxostat	3	
MITIGARE	2	
probenecid	1	
ULORIC	E	
ZYLOPRIM ORAL TABLET 100 MG, 300 MG	3	
Antimigraine Agents - Drugs for Migraines		
AIMOVIG	2	PA, ST
AIMOVIG 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	3	QL
IMITREX ORAL	E	QL

Drug Name	Drug Tier	Requirements & Limits
IMITREX STATDOSE REFILL	E	QL
IMITREX STATDOSE SYSTEM	E	QL
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	3	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	3	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
Antimyasthenic Agents - Drugs to Treat Myasthenia Gravis		
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	
Antimycobacterials - Drugs to Treat Infections		
dapsone oral	2	
ethambutol hcl oral	1	
isoniazid oral tablet	1	
MYAMBUTOL	3	

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Drug Name	Drug Tier	Requirements & Limits
MYCOBUTIN	3	
rifabutin	1	
rifampin oral	1	
Antineoplastics - Drugs for Cancer		
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	3	
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	3	PA, QL, SP
FEMARA	E	
GAVRETO	3	PA, QL, SP
GLEEVEC	E	PA, QL, SP
HYDREA	3	
hydroxyurea oral	1	
IBRANCE	2	PA, QL, SP
ICLUSIG ORAL TABLET 10 MG, 30 MG	3	PA, QL

Drug Name	Drug Tier	Requirements & Limits
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	3	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	3	PA, QL, SP
LUMAKRAS	3	PA, QL, SP
LYNPARZA	2	PA, QL, SP
MEKINIST ORAL TABLET	3	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	3	PA, QL, SP
RETEVMO ORAL CAPSULE 80 MG	3	PA, SP
REVLIMID	2	PA, QL, SP
ROZLYTREK ORAL CAPSULE	2	PA, QL, SP
ROZLYTREK ORAL PACKET	2	PA, SP
SPRYCEL	3	PA, ST, QL, SP

See page 6, 7 for coverage details. Drugs listed as E or 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
STIVARGA	2	PA, QL, SP
TABRECTA	3	PA, QL, SP
TAFINLAR ORAL CAPSULE	3	PA, ST, QL, SP
TAGRISSO	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

Antiparasitics - Drugs for Parasitic Infections

albendazole oral	3	PA, QL
ALINIA ORAL TABLET	E	QL
ARAKODA	3	QL
atovaquone	2	
atovaquone-proguanil hcl	2	
hydroxychloroquine sulfate oral	1	
ivermectin oral	1	PA, QL
KRINTAFEL	1	QL
MALARONE	3	
mefloquine hcl	1	
MEPRON	E	
nitazoxanide oral	2	QL
permethrin external	1	
PLAQUENIL	E	
SOVUNA	E	
STROMEKTOL	3	PA, QL

Drug Name	Drug Tier	Requirements & Limits
Antiparkinson Agents - Drugs for Parkinson's Disease		
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	3	
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	3	
STALEVO 100 ORAL TABLET 25-100-200 MG	3	
STALEVO 125 ORAL TABLET 31.25-125-200 MG	3	
STALEVO 150	3	
STALEVO 200 ORAL TABLET 50-200-200 MG	3	
STALEVO 50 ORAL TABLET 12.5-50-200 MG	3	
STALEVO 75 ORAL TABLET 18.75-75-200 MG	3	
trihexyphenidyl hcl oral tablet	1	
Antiplatelets - Drugs for Heart Attack and Stroke Prevention		
BRILINTA	3	QL
cilostazol	1	

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Drug Name	Drug Tier	Requirements & Limits
clopidogrel bisulfate oral	1	
EFFIENT	E	
PLAVIX	E	
prasugrel hcl	3	
Antipsychotics - Drugs for Mood Disorders		
ABILIFY	E	
aripiprazole oral solution	3	
aripiprazole oral tablet	2	
asenapine maleate	3	QL
CAPLYTA	3	PA, ST, QL
chlorpromazine hcl oral tablet	1	QL
clozapine oral tablet	1	
CLOZARIL	3	
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	3	PA
olanzapine oral tablet	1	
olanzapine oral tablet dispersible	2	
paliperidone er	3	QL
pimozide	2	
quetiapine fumarate	1	
quetiapine fumarate er	2	
REXULTI	3	QL
RISPERDAL	E	
risperidone	1	
SAPHRIS	E	QL
SEROQUEL	E	
SEROQUEL XR	E	
UZEDY SUBCUTANEOUS SUSPENSION PREFILLED SYRINGE 100 MG/0.28ML	E	
VRAYLAR	3	QL
ziprasidone hcl	2	
ZYPREXA ORAL	E	
ZYPREXA ZYDIS	E	

Drug Name	Drug Tier	Requirements & Limits
Antivirals - Drugs for Viral Infections		
abacavir sulfate-lamivudine	2	QL
acyclovir external cream	E	QL
acyclovir external ointment	3	QL
acyclovir oral	1	
BARACLUDE ORAL TABLET	E	
BIKTARVY	3	QL
CIMDUO	2	QL
COMPLERA	3	QL
darunavir	1	
DELSTRIGO	2	QL
DESCOVY	E	PA, ST, QL
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	3	QL
HARVONI ORAL TABLET	2	PA, ST, QL, SP
INTELENCE ORAL TABLET 100 MG, 200 MG	3	
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	3	QL
oseltamivir phosphate oral capsule	2	

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Drug Name	Drug Tier	Requirements & Limits
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	3	PA
SITAVIG	E	QL
SOFOSBUVIR-VELPATASVIR	2	PA, QL, SP
STRIBILD	3	QL
SYMFI	2	QL
SYMFI LO	2	QL
SYMTUZA	E	QL
TAMIFLU ORAL CAPSULE	E	
TAMIFLU ORAL SUSPENSION RECONSTITUTED	E	QL
tenofovir disoproxil fumarate	1	H-PA
TIVICAY	3	
TRIUMEQ	2	QL
TRUVADA ORAL TABLET 100-150 MG, 133-200 MG, 167-250 MG	3	QL
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	

Drug Name	Drug Tier	Requirements & Limits
ZOVIRAX EXTERNAL	E	QL
ZOVIRAX ORAL SUSPENSION 200 MG/5ML	3	
Anxiolytics - Drugs for Anxiety		
alprazolam er	1	
alprazolam oral	1	
alprazolam xr	1	
ATIVAN ORAL	E	
buspirone hcl oral	1	
chlordiazepoxide hcl	1	
clonazepam oral	1	
clorazepate dipotassium	1	
diazepam oral solution	1	
diazepam oral tablet	1	
HALCION	3	
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	
triazolam	1	
VALIUM	E	
VISTARIL	3	
XANAX	E	
XANAX XR	E	
Bipolar Agents - Drugs for Mood Disorders		
EQUETRO	3	
lithium carbonate er	1	
lithium carbonate oral	1	
LITHOBID	3	PA
Cardiovascular Agents - Drugs for Heart and Circulation Conditions		
ACCUPRIL	E	
acebutolol hcl oral	1	
acetazolamide er	1	
acetazolamide oral	1	
ALDACTAZIDE ORAL TABLET 25-25 MG	3	

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Drug Name	Drug Tier	Requirements & Limits
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	
ATACAND	E	
ATACAND HCT	E	
atenolol oral	1	
atenolol-chlorthalidone	1	
ATORVALIQ	3	PA
atorvastatin calcium oral tablet 10 mg, 20 mg	1	H-PA
atorvastatin calcium oral tablet 40 mg, 80 mg	1	
AVALIDE	E	
AVAPRO	E	
AZOR	E	
benazepril hcl oral	1	
benazepril-hydrochlorothiazide	1	
BENICAR	E	
BENICAR HCT	E	
BETAPACE	E	
BETAPACE AF	3	
betaxolol hcl oral	1	
BIDIL	E	
bisoprolol fumarate oral	1	

Drug Name	Drug Tier	Requirements & Limits
bisoprolol-hydrochlorothiazide	1	
bumetanide oral	1	
BUMEX	3	
BYSTOLIC	E	
CADUET	E	
CALAN SR ORAL TABLET EXTENDED RELEASE 120 MG, 180 MG, 240 MG	3	
CAMZYOS	3	PA, QL, SP
candesartan cilexetil	3	
candesartan cilexetil-hctz	3	
captopril oral	1	
CARDIZEM	E	
CARDIZEM CD	E	
CARDIZEM LA	E	
CARDURA	3	
cartia xt	2	
carvedilol	1	
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	3	
colestipol hcl oral tablet	1	
COREG	E	
COREG CR	E	

See page 6, 7 for coverage details. Drugs listed as E or 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
CORGARD	3	
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	
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	3	PA, QL
EPANED	3	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	

Drug Name	Drug Tier	Requirements & Limits
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	3	PA, QL
furosemide oral	1	
gemfibrozil oral	1	
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	3	
KERENDIA	3	PA, QL
labetalol hcl oral	1	
LANOXIN ORAL TABLET 125 MCG, 250 MCG	3	
LANOXIN ORAL TABLET 62.5 MCG	3	
LASIX	3	

See page 6, 7 for coverage details. Drugs listed as E or 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
LIPITOR	E	
LIPOFEN	E	
lisinopril oral	1	
lisinopril-hydrochlorothiazide	1	
LIVALO	E	ST
LODOCO	3	QL
LOPID	3	
LOPRESSOR	3	
losartan potassium oral	1	
losartan potassium-hctz	1	
LOTENSIN	3	
LOTENSIN HCT	3	
LOTREL	E	
lovastatin oral	1	H
LOVAZA	E	
matzim la	2	
MAXZIDE ORAL TABLET 75-50 MG	3	
MAXZIDE-25 ORAL TABLET 37.5-25 MG	3	
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	3	
minoxidil oral	1	
moexipril hcl	1	
MULTAQ	3	PA
nadolol oral	1	

Drug Name	Drug Tier	Requirements & Limits
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	
nifedipine oral	1	
nisoldipine er	2	
NITRO-BID	2	
NITRO-DUR	3	
nitroglycerin rectal	3	QL
nitroglycerin sublingual	1	
nitroglycerin transdermal	1	
NITROSTAT	3	
NORLIQVA	3	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	3	
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	3	
QUESTRAN LIGHT	3	

See page 6, 7 for coverage details. Drugs listed as E or 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
quinapril hcl	1	
ramipril	1	
ranolazine er	2	
RECTIV	3	QL
REPATHA	2	PA, ST, QL
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	
SOANZ	E	QL
sotalol hcl (af)	1	
sotalol hcl oral	1	
spironolactone oral tablet	1	
spironolactone-hctz	1	
SULAR	3	
TEKTURNA	3	
telmisartan	2	
telmisartan-hctz	2	
TENORETIC 100	E	
TENORETIC 50	E	
TENORMIN	E	
THALITONE	E	
tiadylt er	2	
TIAZAC	3	
TIKOSYN	3	
TOPROL XL	E	
torse mide	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	

Drug Name	Drug Tier	Requirements & Limits
VASOTEC	E	
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	3	
VERELAN PM	3	
VERQUOVO	3	PA, QL
VYTORIN	E	
WELCHOL ORAL TABLET	E	
ZESTORETIC	E	
ZESTRIL	3	
ZETIA	E	
ZIAC ORAL TABLET 10-6.25 MG, 2.5-6.25 MG	3	
ZIAC ORAL TABLET 5-6.25 MG	3	
ZOCOR	E	
Central Nervous System Agents - Drugs for Attention Deficit Disorder		
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	
CONCERTA	E	QL

See page 6, 7 for coverage details. Drugs listed as E or 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
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	3	
FOCALIN XR	E	QL
guanfacine hcl er	2	
INTUNIV	E	
JORNAY PM	3	ST, QL
lisdexamfetamine dimesylate	3	QL
METHYLIN	3	
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
methylphenidate hcl er (osm) oral tablet extended release 72 mg	E	QL
methylphenidate hcl er (xr)	E	QL

Drug Name	Drug Tier	Requirements & Limits
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	
Central Nervous System Agents - Drugs for Multiple Sclerosis		
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	3	PA, QL, SP
GILENYA ORAL CAPSULE 0.5 MG	E	PA, QL, SP
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

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Drug Name	Drug Tier	Requirements & Limits
MAYZENT ORAL TABLET 1 MG	3	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	3	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
Central Nervous System Agents - Miscellaneous		
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 gabapentin (once-daily)	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
INGREZZA ORAL CAPSULE THERAPY PACK	2	PA, QL, SP
LYRICA ORAL CAPSULE	3	PA
NUEDEXTA	2	PA, QL
pregabalin oral capsule	2	
RADICAVA ORS	3	PA, QL, SP
RADICAVA ORS STARTER KIT	3	PA, QL, SP
RELYVRIO	3	PA, QL, SP
riluzole	1	SP

Drug Name	Drug Tier	Requirements & Limits
SAVELLA	3	QL
TEGLUTIK	3	PA
VEOZAH	3	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
Dental and Oral Agents - Drugs for Mouth and Throat Conditions		
cevimeline hcl	1	
chlorhexidine gluconate mouth/throat	1	
CLINPRO 5000	3	
DENTA 5000 PLUS	3	
DENTAGEL	3	
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	3	
periogard	1	
pilocarpine hcl oral	1	
PREVIDENT 5000 BOOSTER PLUS	3	
PREVIDENT 5000 DRY MOUTH	3	
PREVIDENT 5000 KIDS	3	
PREVIDENT 5000 ORTHO DEFENSE	3	
PREVIDENT 5000 PLUS	3	
PREVIDENT DENTAL	3	
SALAGEN	3	
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	

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Drug Name	Drug Tier	Requirements & Limits
sodium fluoride dental	1	
triamcinolone acetonide mouth/throat	1	
Dermatological Agents - Drugs for Skin Conditions		
ABSORICA	E	PA
ACANYA	E	QL
acutane	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	3	PA, QL
ala-cort	E	
alclometasone dipropionate	1	
ALTRENO	E	PA, QL
amnestem	2	
AMZEEQ	3	QL
ARAZLO	E	PA, QL
ATRALIN	E	PA, QL
AVAR CLEANSER	3	
AVAR LS CLEANSER	E	
AVAR-E EMOLLIENT	3	
AVAR-E GREEN	3	
AVAR-E LS	3	
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	

Drug Name	Drug Tier	Requirements & Limits
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	3	
clindacin	3	
clindacin etz external swab	1	
clindacin-p	1	
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

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Drug Name	Drug Tier	Requirements & Limits
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
DAZOMON	E	PA
DERMACINRX UREA	E	
DERMA-SMOOTH/FS BODY	3	QL
DERMA-SMOOTH/FS SCALP	3	
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	3	

Drug Name	Drug Tier	Requirements & Limits
DOVONEX EXTERNAL CREAM 0.005 %	E	QL
doxycycline	E	
DRYSOL	3	
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	3	
ELIDEL	E	QL
ENSTILAR	3	QL
EPIDUO	E	QL
EPIDUO FORTE	E	QL
ERYGEL	3	
erythromycin external	1	
EUCRISA	3	ST, QL
EVOCALIN EXTERNAL FOAM 1 %	3	
FABIOR	E	PA, QL
FINACEA EXTERNAL FOAM	3	
FINACEA EXTERNAL GEL	E	
fluocinolone acetonide body	3	QL
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	

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Drug Name	Drug Tier	Requirements & Limits
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	
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	3	
KLISYRI	3	ST, QL
LOPROX EXTERNAL SUSPENSION 0.77 %	E	
METROCREAM	3	
METROGEL	E	
METROLOTION	3	

Drug Name	Drug Tier	Requirements & Limits
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	3	PA, QL, SP
ORACEA	E	
OVACE PLUS WASH EXTERNAL LIQUID	3	
OVACE WASH	3	
PANRETIN	3	
pimecrolimus	3	QL
PLEXION CLEANSER	E	
PLEXION EXTERNAL CREAM	E	
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	3	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	3	QL
spinosad	3	
sss 10-5 external cream	1	
sulfacetamide sodium (acne)	1	
sulfacetamide sodium external	1	

See page 6, 7 for coverage details. Drugs listed as E or 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
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
TACLONEX EXTERNAL SUSPENSION	3	QL
tacrolimus external	2	QL
tazarotene external cream	3	PA, QL
TAZAROTENE EXTERNAL FOAM	E	PA, QL
TAZORAC EXTERNAL CREAM	3	PA, QL
TEMOVATE EXTERNAL CREAM 0.05 %	3	QL
TOLAK	E	
TOPICORT EXTERNAL CREAM	3	QL
TOPICORT EXTERNAL OINTMENT	3	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

Drug Name	Drug Tier	Requirements & Limits
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 absorbase	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	
VANOS	E	QL
VELTIN EXTERNAL GEL 1.2-0.025 %	E	QL
VTAMA	3	PA, QL
WINLEVI	E	PA, QL
zenatane	2	
ZIANA	E	QL
ZILXI	3	PA, ST, QL
ZORYVE	3	PA, QL
ZYCLARA	E	QL
ZYCLARA PUMP	E	QL
Diabetes - Glucose Monitoring and Supplies		
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

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Drug Name	Drug Tier	Requirements & Limits
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
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	

Drug Name	Drug Tier	Requirements & Limits
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
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

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Drug Name	Drug Tier	Requirements & Limits
EQ BLOOD GLUCOSE TEST	E	QL
EVERSENSE E3 SENSOR/HOLDER	E	PA
EVERSENSE E3 SMART TRANSMITTER	E	PA
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

Drug Name	Drug Tier	Requirements & Limits
HEALTHPRO BLOOD GLUCOSE MONITO	E	
INPEN 100-BLUE-LILLY-HUMALOG DEVICE	3	
INPEN 100-BLUE-LILLY-HUMALOG DEVICE	3	ST
INPEN 100-BLUE-NOVOLOG-FIASP DEVICE	3	
INPEN 100-BLUE-NOVOLOG-FIASP DEVICE	3	ST
INPEN 100-GREY-LILLY-HUMALOG DEVICE	3	
INPEN 100-GREY-LILLY-HUMALOG DEVICE	3	ST
INPEN 100-GREY-NOVOLOG-FIASP DEVICE	3	
INPEN 100-GREY-NOVOLOG-FIASP DEVICE	3	ST
INPEN 100-PINK-LILLY-HUMALOG DEVICE	3	
INPEN 100-PINK-LILLY-HUMALOG DEVICE	3	ST
INPEN 100-PINK-NOVOLOG-FIASP DEVICE	3	
INPEN 100-PINK-NOVOLOG-FIASP DEVICE	3	ST
INSULIN PEN NEEDLES 29G X 12MM , 30G X 5 MM , 31G X 5 MM , 31G X 8 MM , 32G X 4 MM	2	QL
INSULIN SYRINGES 27G X 1/2" 0.5 ML, 27G X 1/2" 1 ML, 28G X 1/2" 0.5 ML, 28G X 1/2" 1 ML, 29G X 1/2" 0.5 ML, 29G X 1/2" 1 ML, 30G X 1/2" 1 ML, 30G X 5/16" 0.5 ML, 31G X 5/16" 0.5 ML, 31G X 5/16" 1 ML	2	QL
LANCETS	1	
MICRODOT TEST	E	QL
MINILINK REAL-TIME TRANSMITTER	3	PA
MINIMED 630G GUARDIAN PRESS	3	PA
MM BLOOD GLUCOSE SYSTEM	E	
MM BLOOD GLUCOSE SYSTEM REFILL	E	
MM BLULINK GLUCOSE TEST	E	QL

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Drug Name	Drug Tier	Requirements & Limits
MM EASY TOUCH GLUCOSE METER	E	
MONOJECT HYPODERMIC NEEDLE 18G X 1"	2	
NEUTEK 2TEK TEST	E	QL
NOVOFINE AUTOCOVER PEN NEEDLE 30G X 8 MM	2	QL
NOVOFINE PEN NEEDLE	2	QL
NOVOFINE PLUS PEN NEEDLE	2	QL
NOVOPEN ECHO	3	
NOVOTWIST PEN NEEDLE	2	QL
OMNIPOD 5 G6 INTRO (GEN 5)	2	PA, QL
OMNIPOD 5 G6 PODS (GEN 5)	2	PA, QL
OMNIPOD 5 G7 INTRO (GEN 5) KIT	2	PA
OMNIPOD 5 G7 PODS (GEN 5)	2	PA
ON CALL EXPRESS BLOOD GLUCOSE	E	QL
ON CALL EXPRESS MONITORING SYS	E	
ONETOUCH DELICA PLUS LANCETS	1	
ONETOUCH ULTRA 2 KIT W/ DEVICE	1	
ONETOUCH ULTRA TEST	1	QL
ONETOUCH ULTRA TEST STRIPS	1	QL
ONETOUCH ULTRASOFT LANCETS	1	
ONETOUCH VERIO FLEX SYSTEM KIT	1	
ONETOUCH VERIO IQ SYSTEM KIT W/DEVICE	1	
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	
PRECISION XTRA BLOOD GLUCOSE	E	QL
PREMIUM BLOOD GLUCOSE TEST	E	QL
PTS PANELS EGLU TEST	E	QL

Drug Name	Drug Tier	Requirements & Limits
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
Diabetes - Insulin		
ADMELOG	E	QL
ADMELOG SOLOSTAR	E	QL
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

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Drug Name	Drug Tier	Requirements & Limits
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
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

Drug Name	Drug Tier	Requirements & Limits
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
Diabetes - Non-Insulin Agents		
acarbose oral	1	
ACTOPLUS MET	3	QL
ACTOS	E	QL
ADLYXIN STARTER PACK SUBCUTANEOUS PEN-INJECTOR KIT 10 & 20 MCG/0.2ML	3	
ADLYXIN SUBCUTANEOUS SOLUTION PEN-INJECTOR 20 MCG/0.2ML	3	
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

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Drug Name	Drug Tier	Requirements & Limits
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	3	
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	3	
GLYXAMBI	2	ST, QL
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

Drug Name	Drug Tier	Requirements & Limits
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	3	
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
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
Drugs for Blood Disorders		
ADVATE	2	SP
ADYNOVATE	3	PA, SP
AFSTYLA INTRAVENOUS KIT 1000 UNIT, 2000 UNIT, 250 UNIT, 3000 UNIT, 500 UNIT	3	PA
AFSTYLA INTRAVENOUS KIT 1500 UNIT, 2500 UNIT	3	PA, SP
AGRYLIN	E	
ALPHANATE	2	SP
ALPROLIX	3	SP
ALTUVIIIIO	3	PA, SP
ALVAIZ	3	PA, SP

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Drug Name	Drug Tier	Requirements & Limits
anagrelide hcl	1	
ARANESP (ALBUMIN FREE)	2	QL, SP
aspirin-dipyridamole er	3	
DOPTELET	3	PA, QL, SP
ELOCTATE	3	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
KOATE	2	SP
KOATE-DVI	2	SP
KOGENATE FS	2	SP
KOVALTRY	2	SP
MULPLETA	3	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	3	PA, QL, SP
tranexamic acid oral	2	QL
UDENYCA SUBCUTANEOUS SOLUTION AUTO-INJECTOR	2	

Drug Name	Drug Tier	Requirements & Limits
WILATE	2	
ZARXIO	2	
Drugs for Sexual Dysfunction		
ADDYI	3	PA, QL
CIALIS	E	QL
IMVEXXY MAINTENANCE PACK	2	QL
IMVEXXY STARTER PACK	2	QL
INTRAROSA	3	PA, QL
OSPHENA	3	PA, QL
sildenafil citrate oral tablet 100 mg, 25 mg, 50 mg	2	QL
STENDRA	3	PA, QL
tadalafil oral	2	QL
vardeafil hcl oral tablet	3	QL
VIAGRA	E	QL
VYLEESI	3	PA, QL
Electrolytes / Vitamins		
adc/f (0.5mg/ml)	1	
calcium acetate (phos binder) oral tablet	1	
calcium acetate oral tablet 667 mg	1	
CARNITOR ORAL SOLUTION	3	
CARNITOR SF	3	
CITRANATAL 90 DHA	3	
CITRANATAL ASSURE	3	
CITRANATAL DHA ORAL 27-1 & 250 MG	3	
COMPLETENATE	3	
CO-NATAL FA	2	
CONCEPT DHA	3	
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	3	
DRISDOL	3	
EFFER-K ORAL TABLET EFFERVESCENT 10 MEQ, 20 MEQ	2	

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Drug Name	Drug Tier	Requirements & Limits
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	
K-TAB	3	
levocarnitine oral solution	1	
levocarnitine sf	1	
LOKELMA	3	PA, QL
M-NATAL PLUS	3	
multivitamin w/fluoride tablet chewable 0.25 mg oral	1	
multivitamin w/fluoride tablet chewable 0.25 mg oral	E	
multivitamin w/fluoride tablet chewable 0.5 mg oral	1	
multivitamin w/fluoride tablet chewable 0.5 mg oral	E	
multivitamin w/fluoride tablet chewable 1 mg oral	1	
multivitamin w/fluoride tablet chewable 1 mg oral	E	
multi-vitamin/fluoride	1	
multivitamin/fluoride tablet chewable 0.25 mg oral (rx)	1	
MULTIVITAMIN/FLUORIDE TABLET CHEWABLE 0.25 MG ORAL (RX)	3	
multivitamin/fluoride tablet chewable 0.5 mg oral (rx)	1	
MULTIVITAMIN/FLUORIDE TABLET CHEWABLE 0.5 MG ORAL (RX)	3	
multivitamin/fluoride tablet chewable 1 mg oral (rx)	1	

Drug Name	Drug Tier	Requirements & Limits
MULTIVITAMIN/FLUORIDE TABLET CHEWABLE 1 MG ORAL (RX)	3	
MULTI-VIT-FLOR	E	
nafrinse drops oral solution 0.275 (0.125 f) mg/drop	1	H
NAFRINSE ORAL TABLET CHEWABLE 2.2 (1 F) MG	1	H
NASCOBAL	3	
NATALVIT	2	
NEONATAL COMPLETE	3	
NEONATAL PLUS	3	
NIVA-PLUS	3	
OB COMPLETE	3	
ONE VITE WOMENS PLUS	3	
ORACIT	2	
ORAL CITRATE	2	
PHOSPHA 250 NEUTRAL	2	
phosphorous	1	
phospho-trin 250 neutral	1	
pnv-dha	3	
POKONZA	E	
POLY-VI-FLOR	E	
potassium chloride crys er	1	
potassium chloride er	1	
potassium chloride oral	1	
potassium citrate er	1	
potassium citrate-citric acid	1	
PRENA1 PEARL	3	
prenatal 19 oral tablet 29-1 mg	1	
prenatal 19 oral tablet chewable	1	
prenatal oral tablet 27-1 mg	1	
prenatal plus	1	
prenatal plus vitamin/mineral	1	
PRENATE DHA	3	
PRENATE ENHANCE	3	
PRENATE ESSENTIAL	3	
PRENATE MINI	3	
PRENATE PIXIE	3	
PRENATE RESTORE	3	
PRENATOL-M	E	

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Drug Name	Drug Tier	Requirements & Limits
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	
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	3	
THRIVITE RX	3	
TRICARE	3	
TRINATAL RX 1	3	
TRINATE	3	
tri-vite/fluoride	1	
UROCIT-K 10	3	
UROCIT-K 15	3	
UROCIT-K 5	3	
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	

Drug Name	Drug Tier	Requirements & Limits
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	3	
WESCAP-PN DHA	3	
wes-phos 250 neutral	1	
WESTAB PLUS	E	
ZATEAN-PN DHA ORAL CAPSULE 27-0.6-0.4-300 MG	3	
Gastrointestinal Agents - Drugs for Acid Reflux and Ulcer		
ACIPHEX	E	QL
bis subcit-metronid-tetracyc	3	QL
bismuth/metronidaz/tetracyclin	3	QL
CARAFATE	E	
cimetidine oral	1	
CYTOTEC	3	
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	3	PA, ST, QL
OMECLAMOX-PAK	3	QL
omeprazole oral capsule delayed release	1	
pantoprazole sodium oral tablet delayed release	1	

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Drug Name	Drug Tier	Requirements & Limits
PEPCID	E	
PREVACID	E	QL
PREVACID SOLUTAB	E	PA, ST, QL
PROTONIX ORAL TABLET DELAYED RELEASE	E	
PYLERA	3	QL
rabeprazole sodium oral tablet delayed release	2	QL
sucralfate oral suspension	3	
sucralfate oral tablet	1	
VOQUEZNA	3	PA, QL
VOQUEZNA DUAL PAK	3	ST, QL
VOQUEZNA TRIPLE PAK	3	ST, QL
Gastrointestinal Agents - Drugs for Bowel, Intestine and Stomach Conditions		
alosetron hcl	2	PA, QL
AMITIZA	3	PA, QL
ANASPAZ	2	
chlordiazepoxide-clidinium	3	
CLENPIQ	3	QL
constulose	1	
cromolyn sodium oral	1	
CUVPOSA	3	
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	

Drug Name	Drug Tier	Requirements & Limits
GOLYTELY	3	QL
hyoscyamine sulfate er	1	
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	3	
LEVSIN	3	
LEVSIN/SL	3	
LIBRAX	E	
LINZESS	2	PA, QL
LOMOTIL	3	
loperamide hcl oral capsule	E	
LOTRONEX	E	PA, QL
lubiprostone	2	PA, QL
methscopolamine bromide oral	1	
MOTEGRITY	3	PA, QL
MOVANTIK	E	PA, QL
MOVIPREP	3	QL
na sulfate-k sulfate-mg sulf	3	QL
NULEV	3	
OCALIVA	3	PA, ST, QL, SP
OMEPRAZOLE+SYRSPEND SF ALKA	3	PA
opium	1	
OSCIMIN	3	
peg 3350-kcl-na bicarb-nacl	1	QL, H
peg-3350/electrolytes	1	QL, H
peg-3350/electrolytes/ascorbic acid	3	QL
peg-kcl-nacl-nasulf-na asc-c	3	QL
PLENVU	3	QL
RELTONE	E	
ROBINUL	E	
ROBINUL-FORTE	E	
SUFLAVE	3	QL
SUPREP BOWEL PREP KIT	3	QL

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Drug Name	Drug Tier	Requirements & Limits
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
Genetic or Enzyme Disorder - Drugs for Replacement, Modification, Treatment		
CARNITOR ORAL TABLET	3	
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	3	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	
ZENPEP ORAL CAPSULE DELAYED RELEASE PARTICLES 60000-189600 UNIT	E	

Drug Name	Drug Tier	Requirements & Limits
Genitourinary Agents - Drugs for Bladder, Genital and Kidney Conditions		
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	3	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	3	SP
THIOLA EC	3	SP
tiopronin oral tablet delayed release	3	SP
tolterodine tartrate	3	
tolterodine tartrate er	E	
TOVIAZ	E	
tropium chloride	3	
tropium chloride er	E	

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Drug Name	Drug Tier	Requirements & Limits
UROGESIC-BLUE	2	
VELPHORO	3	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	3	
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	3	
ANGELIQ	3	
ANNOVERA	3	QL
apri	1	H
aranelle	1	H
ashlyna	3	
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

Drug Name	Drug Tier	Requirements & Limits
aurovela fe 1/20	1	H
aviane	1	H
AYGESTIN ORAL TABLET 5 MG	3	
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
daysee	3	
deblitane	1	H
DELESTROGEN	3	
delyla	1	H
DEPO-ESTRADIOL	3	
DEPO-PROVERA	3	QL
DEPO-SUBQ PROVERA 104	2	QL
desogestrel-ethinyl estradiol oral tablet 0.15-0.02/0.01 mg (21/5)	2	

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Drug Name	Drug Tier	Requirements & Limits
desogestrel-ethinyl estradiol oral tablet 0.15-30 mg-mcg	1	H
DIVIGEL	3	
dolishale	3	
dotti	2	QL
drosipren-eth estrad-levomefol	E	
drosiprenone-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
emzahh	1	H
enilloring	1	H
enpresse-28	1	H
enskyce	1	H
errin	1	H
est estrogens-methyltest	1	
est estrogens-methyltest ds	1	
est estrogens-methyltest hs	1	
estarylla	1	H
ESTRACE	E	
estradiol oral	1	
estradiol patch twice weekly 0.025 mg/24hr transdermal	2	(generic for Minivelle), QL
estradiol patch twice weekly 0.025 mg/24hr transdermal	2	(generic for Vivelle-Dot), QL
estradiol patch twice weekly 0.025 mg/24hr transdermal	3	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 0.0375 mg/24hr transdermal	3	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

Drug Name	Drug Tier	Requirements & Limits
estradiol patch twice weekly 0.05 mg/24hr transdermal	3	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 0.075 mg/24hr transdermal	3	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 patch twice weekly 0.1 mg/24hr transdermal	3	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	E	
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

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Drug Name	Drug Tier	Requirements & Limits
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	E	
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
larin fe 1/20	1	H
larissia oral tablet 0.1-20 mg-mcg	1	H
layolis fe	E	
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

Drug Name	Drug Tier	Requirements & Limits
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	3	
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	3	
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
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	

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Drug Name	Drug Tier	Requirements & Limits
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
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	E	
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

Drug Name	Drug Tier	Requirements & Limits
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	3	
QUARTETTE ORAL TABLET 42-21-21-7 DAYS	E	
reclipsen	1	H
rivelisa	E	
SAFYRAL	E	
SEASONIQUE ORAL TABLET 0.15-0.03 & 0.01 MG	E	
setlakin	2	H
sharobel	1	H
simliya	2	
simpesse	3	
SLYND	3	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	3	
tri-estarylla	1	H
tri-legest fe	3	

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Drug Name	Drug Tier	Requirements & Limits
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	E	
VAGIFEM	E	
velivet	1	H
vestura	3	
vienva	1	H
viorele	2	
VIVELLE-DOT	E	QL
volnea	2	
vyfemla	1	H
vylibra	1	H
wera	1	H
wymzya fe	3	
xulane	3	H
YASMIN 28	2	
YAZ	2	
yuvaferm	2	
zafemy	3	H
zovia 1/35 (28)	1	H
zumandimine	3	
Hormonal Agents - Oral Steroids		
CORTEF	3	
DEXABLISS	E	
dexamethasone intensol	1	
dexamethasone oral elixir	1	
dexamethasone oral solution	1	
dexamethasone oral tablet	1	

Drug Name	Drug Tier	Requirements & Limits
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	3	
MEDROL ORAL TABLET 2 MG	2	
MEDROL ORAL TABLET THERAPY PACK	3	
methylprednisolone oral	1	
ORAPRED ODT	3	
PEDIAPRED	2	
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	3	
TAPERDEX 6-DAY ORAL TABLET THERAPY PACK 1.5 MG (21)	3	
TAPERDEX 7-DAY	3	
Hormonal Agents - Other		
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

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Drug Name	Drug Tier	Requirements & Limits
megestrol acetate oral suspension 40 mg/ml	1	
METHERGINE	3	QL
methylergonovine maleate oral	1	QL
NGENLA	3	PA, QL, SP
NOCDURNA	3	PA, QL
NORDITROPIN FLEXPPO	2	PA, QL, SP
NUTROPIN AQ NUSPIN	E	PA, QL, SP
OMNITROPE	2	PA, QL, SP
ORIAHNN	2	PA, QL
ORLISSA	2	PA, QL
SKYTROFA	3	PA, QL, SP
SOMATULINE DEPOT	3	SP
Hormonal Agents - Testosterone Replacement		
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	3	
JATENZO	E	QL
KYZATREX	3	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

Drug Name	Drug Tier	Requirements & Limits
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
Hormonal Agents - Thyroid		
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	
Immunological Agents - Drugs for Immune System Stimulation or Suppression		
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

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Drug Name	Drug Tier	Requirements & Limits
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
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	3	
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

Drug Name	Drug Tier	Requirements & Limits
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
CYLTEZO-CD/UC/HS STARTER SUBCUTANEOUS AUTO-INJECTOR KIT 40 MG/0.4ML	E	PA, QL, SP
CYLTEZO-CD/UC/HS STARTER SUBCUTANEOUS AUTO-INJECTOR KIT 40 MG/0.8ML	E	PA, QL, SP
CYLTEZO-PSORIASIS/UV STARTER SUBCUTANEOUS AUTO-INJECTOR KIT 40 MG/0.4ML	E	PA, QL, SP
CYLTEZO-PSORIASIS/UV STARTER SUBCUTANEOUS AUTO-INJECTOR KIT 40 MG/0.8ML	E	PA, QL, SP
EMPAVELI	2	PA, QL, SP
ENBREL	2	PA, QL, SP
ENBREL MINI	2	PA, QL, SP
ENBREL SURECLICK	2	PA, QL, SP
ENTYVIO	2	PA, QL, SP
ENVARUSUS XR	E	
everolimus oral tablet 0.25 mg, 0.5 mg, 0.75 mg, 1 mg	3	
gengraf oral capsule	1	
GRASTEK	3	PA, QL
HADLIMA	E	PA, QL, SP
HAEGARDA	2	PA, QL, SP
HULIO (2 PEN)	E	PA, QL, SP
HULIO (2 SYRINGE)	E	PA, QL, SP
HUMIRA (2 PEN) PEN-INJECTOR KIT 40 MG/0.4ML SUBCUTANEOUS	2	PA, QL, SP
HUMIRA (2 PEN) PEN-INJECTOR KIT 80 MG/0.8ML SUBCUTANEOUS	2	PA, QL, SP

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Drug Name	Drug Tier	Requirements & Limits
HUMIRA (2 PEN) SUBCUTANEOUS PEN-INJECTOR KIT 40 MG/0.8ML	2	PA, QL, SP
HUMIRA (2 SYRINGE) PREFILLED SYRINGE KIT 10 MG/0.1ML SUBCUTANEOUS	2	PA, QL, SP
HUMIRA (2 SYRINGE) PREFILLED SYRINGE KIT 20 MG/0.2ML SUBCUTANEOUS	2	PA, QL, SP
HUMIRA (2 SYRINGE) PREFILLED SYRINGE KIT 40 MG/0.4ML SUBCUTANEOUS	2	PA, QL, SP
HUMIRA (2 SYRINGE) SUBCUTANEOUS PREFILLED SYRINGE KIT 40 MG/0.8ML	2	PA, QL, SP
HUMIRA-CD/UC/HS STARTER	2	PA, QL, SP
HUMIRA-PED<40KG CROHNS STARTER	2	PA, QL, SP
HUMIRA-PED>=40KG CROHNS START	2	PA, QL, SP
HUMIRA-PED>=40KG UC STARTER	2	PA, QL, SP
HUMIRA-PS/UV/ADOL HS STARTER SUBCUTANEOUS PEN-INJECTOR KIT 40 MG/0.8ML	2	PA, QL, SP
HUMIRA-PSORIASIS/UVEIT STARTER	2	PA, QL, SP
HYFTOR	3	PA, QL
HYRIMOZ SUBCUTANEOUS SOLUTION AUTO-INJECTOR 40 MG/0.4ML	E	PA, QL, SP
HYRIMOZ SUBCUTANEOUS SOLUTION AUTO-INJECTOR 40 MG/0.8ML, 80 MG/0.8ML	E	PA, SP
HYRIMOZ SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 10 MG/0.1 ML, 20 MG/0.2ML, 40 MG/0.4ML	E	PA, QL, SP
HYRIMOZ SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 40 MG/0.8ML	E	PA, SP
HYRIMOZ-CROHNS/UC STARTER	E	PA, QL, SP
HYRIMOZ-PED<40KG CROHN STARTER	E	PA, QL, SP
HYRIMOZ-PED>=40KG CROHN START	E	PA, QL, SP

Drug Name	Drug Tier	Requirements & Limits
HYRIMOZ-PLAQUE PSORIASIS START	E	PA, QL, SP
IDACIO (2 PEN)	E	PA, QL, SP
IDACIO (2 SYRINGE)	E	PA, QL, SP
IDACIO-CROHNS/UC STARTER	E	PA, QL, SP
IDACIO-PSORIASIS STARTER	E	PA, QL, SP
IMURAN	E	
JYLAMVO	3	PA
KEVZARA SUBCUTANEOUS SOLUTION AUTO-INJECTOR	3	PA, ST, QL, SP
KINERET	3	PA, ST, QL, SP
leflunomide oral	1	
LITFULO	3	PA, QL, SP
LUPKYNIS	3	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	3	
RAPAMUNE ORAL SOLUTION	3	
RAPAMUNE ORAL TABLET	E	
RASUVO	2	QL
RINVOQ	2	PA, QL, SP

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Drug Name	Drug Tier	Requirements & Limits
RUCONEST	3	PA, QL, SP
SANDIMMUNE ORAL	E	
SIMLANDI (1 PEN)	E	PA, QL, SP
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	
Immunological Agents - Drugs for Vaccination		
ADACEL	3	H
AFLURIA QUADRIVALENT INTRAMUSCULAR SUSPENSION PREFILLED SYRINGE	3	H
BEXSERO	3	H
BOOSTRIX	2	H

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
SHINGRIX	3	H
SPIKEVAX INTRAMUSCULAR SUSPENSION	3	H

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Drug Name	Drug Tier	Requirements & Limits
TENIVAC	3	H
TRUMENBA	3	H
TWINRIX	3	H
VAQTA	2	H
VARIVAX	3	H
Infertility Agents		
cetorelix acetate	3	PA, ST, QL, SP
CETROTIDE	3	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	3	(manufactured by Ferring), QL, SP
ganirelix acetate solution prefilled syringe 250 mcg/0.5ml subcutaneous	2	(manufactured by Merck/Organon), QL, SP
GONAL-F	3	ST, SP
GONAL-F RFF	3	ST, SP
GONAL-F RFF REDIJECT	3	ST, SP
MENOPUR	3	QL, SP
NOVAREL	3	SP
OVIDREL	3	SP
PREGNYL	3	SP
Inflammatory Bowel Disease Agents		
ANALPRAM HC	3	
ANALPRAM-HC EXTERNAL CREAM	3	
ANUCORT-HC	2	
ANUSOL-HC EXTERNAL	3	
ANUSOL-HC RECTAL	E	
APRISO	1	
ASACOL HD ORAL TABLET DELAYED RELEASE 800 MG	E	
AZULFIDINE	3	

Drug Name	Drug Tier	Requirements & Limits
AZULFIDINE EN-TABS	3	
balsalazide disodium	1	
budesonide er	E	
budesonide oral	2	
budesonide rectal	2	
CANASA	E	
COLAZAL	E	
CORTENEMA	3	
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	
PROCTOSOL HC	3	
PROCTOZONE-HC	3	
ROWASA	3	QL
SFROWASA	3	
sulfasalazine oral	1	
UCERIS ORAL	3	
UCERIS RECTAL	E	

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Drug Name	Drug Tier	Requirements & Limits
Metabolic Bone Disease Agents - Drugs for Osteoporosis		
ACTONEL	E	QL
alendronate sodium oral tablet	1	
calcitonin (salmon) injection	3	
calcitonin (salmon) nasal	2	
EVISTA	E	
FORTEO	E	PA, ST, SP
FOSAMAX	3	
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
Metabolic Bone Disease Agents - Other		
calcitriol oral	1	
cinacalcet hcl	3	PA
paricalcitol oral	1	
ROCALTROL	3	
SENSIPAR	E	PA
ZEMPLAR ORAL	3	
Ophthalmic Agents - Drugs for Eye Allergy, Infection and Inflammation		
ACULAR	3	
ACULAR LS	3	
ACUVAIL	E	
ak-poly-bac ophthalmic ointment 500-10000 unit/gm	1	
ALREX	3	QL
AZASITE	3	
azelastine hcl ophthalmic	1	

Drug Name	Drug Tier	Requirements & Limits
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	3	QL
FLAREX	2	
fluorometholone	1	
FML FORTE	3	
FML LIQUIFILM	3	
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	
LOTEMAX OPHTHALMIC SUSPENSION	E	QL
LOTEMAX SM	3	QL
loteprednol etabonate ophthalmic gel	E	
loteprednol etabonate ophthalmic suspension	3	QL
MAXITROL	3	
moxifloxacin hcl (2x day)	3	
moxifloxacin hcl ophthalmic	3	
neomycin-polymyxin-dexameth ophthalmic ointment	1	

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Drug Name	Drug Tier	Requirements & Limits
neomycin-polymyxin-dexameth ophthalmic suspension 3.5-10000-0.1	1	
NEVANAC	3	
OCUFLOX	3	
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 %	3	
TOBRADEX ST	E	
tobramycin ophthalmic	1	QL
tobramycin-dexamethasone	2	
VIGAMOX	E	
XDEMVI	3	PA, QL
ZYLET	3	
ZYMAXID OPHTHALMIC SOLUTION 0.5 %	3	
Ophthalmic Agents - Drugs for Eye Infection and Inflammation		
bacitracin ophthalmic	1	
neomycin-bacitracin zn-polymyx	1	
neomycin-polymyxin-hc ophthalmic	1	
NEO-POLYCIN	3	
sulfacetamide-prednisolone	1	
Ophthalmic Agents - Drugs for Glaucoma		
ALPHAGAN P OPHTHALMIC SOLUTION 0.1 %	2	QL

Drug Name	Drug Tier	Requirements & Limits
ALPHAGAN P OPHTHALMIC SOLUTION 0.15 %	3	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	3	
COSOPT PF	E	QL
DORZOLAMIDE HCL SOLUTION 2 % OPHTHALMIC	3	
dorzolamide hcl solution 2 % ophthalmic	1	
dorzolamide hcl-timolol mal	2	
dorzolamide hcl-timolol mal pf	E	QL
ISTALOL	3	
IYUZEH	E	QL
latanoprost ophthalmic	1	
LUMIGAN	2	
methazolamide oral	1	
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	3	
TIMOPTIC OPHTHALMIC SOLUTION 0.25 %, 0.5 %	3	
TIMOPTIC-XE OPHTHALMIC GEL FORMING SOLUTION 0.25 %, 0.5 %	3	

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Drug Name	Drug Tier	Requirements & Limits
TRAVATAN Z	E	ST, QL
travoprost (bak free)	3	QL
TRUSOPT OPHTHALMIC SOLUTION 2 %	3	
VYZULTA	E	ST, QL
XALATAN	E	
ZIOPTAN	3	ST, QL
Ophthalmic Agents - Drugs for Miscellaneous Eye Conditions		
atropine sulfate ophthalmic solution 1 %	1	
CEQUA	E	PA, QL
cromolyn sodium ophthalmic	1	
CYCLOGYL	3	
cyclopentolate hcl ophthalmic	1	
cyclosporine ophthalmic	E	PA, QL
difluprednate	3	
DUREZOL	3	
ISOPTO ATROPINE OPHTHALMIC SOLUTION 1 %	3	
KLARITY-C DROPS	E	PA
MIEBO	3	PA, QL
RESTASIS	3	PA, QL
RESTASIS MULTIDOSE	E	PA, QL
TYRVAYA	3	PA, QL
VERKAZIA	3	PA, QL
VEVYE	E	PA, QL
XIIDRA	3	PA, QL
Otic Agents - Drugs for Ear Conditions		
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	3	
flac	1	
fluocinolone acetonide otic	1	
hydrocortisone-acetic acid	1	
neomycin-polymyxin-hc otic	1	
ofloxacin otic	2	

Drug Name	Drug Tier	Requirements & Limits
Respiratory - Drugs for Anaphylaxis		
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
Respiratory Tract / Pulmonary Agents - Drugs for Allergies, Cough, Cold		
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

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Drug Name	Drug Tier	Requirements & Limits
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	3	PA, QL
olopatadine hcl nasal	3	
PATANASE NASAL SOLUTION 0.6 %	E	
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
Respiratory Tract / Pulmonary Agents - Drugs for Asthma and COPD		
ACCOLATE	3	
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	

Drug Name	Drug Tier	Requirements & Limits
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
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

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Drug Name	Drug Tier	Requirements & Limits
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
brey-na	E	QL, RS
BREZTRI AEROSPHERE	3	QL, RS
BROVANA	3	QL
budesonide inhalation	2	QL
budesonide-formoterol fumarate	E	QL, RS
COMBIVENT RESPIMAT	3	QL
DALIRESP	3	PA, QL
DULERA	E	ST, QL
EASIVENT	3	
EASIVENT MASK LARGE	3	
EASIVENT MASK MEDIUM	3	
EASIVENT MASK SMALL	3	
FASENRA PEN	3	PA, QL
FLEXICHAMBER	3	
FLOVENT DISKUS INHALATION AEROSOL POWDER BREATH ACTIVATED 100 MCG/ACT, 250 MCG/ACT, 50 MCG/ACT	E	QL
FLOVENT HFA INHALATION AEROSOL 110 MCG/ACT, 220 MCG/ACT, 44 MCG/ACT	E	QL
FLUTICASONE FUROATE-VILANTEROL	E	QL, RS
FLUTICASONE PROPIONATE DISKUS	E	QL
FLUTICASONE PROPIONATE HFA	E	QL
FLUTICASONE-SALMETEROL INHALATION AEROSOL	E	QL, RS
fluticasone-salmeterol inhalation aerosol powder breath activated 100-50 mcg/act, 250-50 mcg/act, 500-50 mcg/act	3	QL, RS
FLUTICASONE-SALMETEROL INHALATION AEROSOL POWDER BREATH ACTIVATED 113-14 MCG/ACT, 232-14 MCG/ACT, 55-14 MCG/ACT	3	QL
formoterol fumarate inhalation	3	QL

Drug Name	Drug Tier	Requirements & Limits
INSPIREASE	3	
ipratropium bromide inhalation	1	
ipratropium-albuterol	2	
levalbuterol hcl inhalation	3	QL
LEVALBUTEROL HFA INHALATION AEROSOL 45 MCG/ACT	3	QL
MICROCHAMBER	3	
montelukast sodium oral packet	2	
montelukast sodium oral tablet	1	
montelukast sodium oral tablet chewable	1	
NUCALA SUBCUTANEOUS SOLUTION AUTO-INJECTOR	3	PA, QL, SP
NUCALA SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 100 MG/ML	3	PA, QL, SP
NUCALA SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 40 MG/0.4ML	3	PA, QL
PERFOROMIST	3	QL
PROCHAMBER VHC	3	
PROVENTIL HFA	E	QL
PULMICORT FLEXHALER	E	QL
PULMICORT SUSPENSION	E	QL
QNASL	E	QL
QNASL CHILDRENS	E	QL
QVAR REDIHALER	1	QL
roflumilast	3	PA, QL
SEREVENT DISKUS	2	QL
SINGULAIR ORAL PACKET	3	
SINGULAIR ORAL TABLET	E	
SINGULAIR ORAL TABLET CHEWABLE	E	
SPIRIVA HANDIHALER	2	QL
SPIRIVA RESPIMAT	2	QL
STIOLTO RESPIMAT	2	QL
STRIVERDI RESPIMAT	2	QL
SYMBICORT	3	QL, RS
TEZSPIRE SUBCUTANEOUS SOLUTION AUTO-INJECTOR	3	PA, QL, SP
theophylline er	1	
tiotropium bromide monohydrate	E	QL

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Drug Name	Drug Tier	Requirements & Limits
TRELEGY ELLIPTA	3	QL, RS
VENTOLIN HFA	E	QL
VORTEX HOLD CHMBR/MASK/CHILD	2	
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	3	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 Tobi), 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	3	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	3	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	3	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	
cyclobenzaprine hcl oral tablet 10 mg, 5 mg	1	
cyclobenzaprine hcl oral tablet 7.5 mg	E	

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Drug Name	Drug Tier	Requirements & Limits
DANTRIUM ORAL	3	
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	3	
Sleep Disorder Agents		
AMBIEN	E	
AMBIEN CR	E	
armodafinil	2	QL
BELSOMRA	3	ST, QL
DAYVIGO	3	ST, QL
doxepin hcl oral tablet	E	QL
estazolam	1	
eszopiclone	2	
LUMRYZ	3	PA, QL, SP

Drug Name	Drug Tier	Requirements & Limits
LUNESTA	E	
modafinil oral	2	QL
NUVIGIL	E	QL
PROVIGIL	E	QL
QUVIVIQ	E	ST, QL
ramelteon	3	
RESTORIL	3	
ROZEREM	E	ST, QL
SILENOR	E	QL
SODIUM OXYBATE SOLUTION 500 MG/ML ORAL	3	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	3	PA, QL, SP
XYREM	E	PA, QL, SP
XYWAV	3	PA, QL, SP
zaleplon	1	
zolpidem tartrate er	2	
zolpidem tartrate oral tablet	1	

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Index

A

abacavir sulfate-lamivudine	18	ACIPHEX	37	ADDERALL	23
ABILIFY	18	acitretin	26	ADDERALL XR	23
abiraterone acetate oral tablet 250 mg	16	ACTEMRA ACTPEN	45	ADDYI	35
abiraterone acetate oral tablet 500 mg	16	ACTEMRA SUBCUTANEOUS	45	ADEMPAS	55
ABRILADA (1 PEN)	45	ACTICLATE ORAL TABLET 150 MG, 75 MG	10	ADHANSIA XR ORAL CAPSULE EXTENDED RELEASE 24 HOUR 25 MG, 35 MG, 45 MG, 55 MG, 70 MG, 85 MG	23
ABRILADA (2 PEN)	45	ACTIVELLA	40	ADLYXIN STARTER PACK SUBCUTANEOUS PEN-INJECTOR KIT 10 & 20 MCG/0.2ML	33
ABRILADA (2 SYRINGE)	45	ACTONEL	50	ADLYXIN SUBCUTANEOUS SOLUTION PEN-INJECTOR 20 MCG/0.2ML	33
ABSORICA	26	ACTOPLUS MET	33	ADMELOG	32
acamprosate calcium	9	ACTOS	33	ADMELOG SOLOSTAR	32
ACANYA	26	ACULAR	50	ADTHYZA	45
acarbose oral	33	ACULAR LS	50	ADVAIR DISKUS	53
ACCOLATE	53	ACUVAIL	50	ADVAIR HFA	53
ACCU-CHEK AVIVA PLUS TEST STRIPS	29	acyclovir external cream	18	ADVATE	34
ACCU-CHEK FASTCLIX LANCET DEVICE KIT	29	acyclovir external ointment	18	ADYNOVATE	34
ACCU-CHEK FASTCLIX LANCETS	29	acyclovir oral	18	ADZENYS XR-ODT	23
ACCU-CHEK GUIDE KIT W/DEVICE	29	ACZONE	26	AEROCHAMBER HOLDING CHAMBER	53
ACCU-CHEK GUIDE ME METER	29	ADACEL	48	AEROCHAMBER PLS FLOVU MTHPIECE	53
ACCU-CHEK GUIDE TEST STRIPS	29	ADALIMUMAB-AACF (2 PEN)	45	AEROCHAMBER PLUS FLO-VU	53
ACCU-CHEK MULTICLIX LANCET DEVICE KIT	29	ADALIMUMAB-AATY (1 PEN) SUBCUTANEOUS AUTO- INJECTOR KIT 40 MG/0.4ML	46	AEROCHAMBER PLUS FLO-VU INTERM	53
ACCU-CHEK MULTICLIX LANCETS	29	ADALIMUMAB-AATY (1 PEN) SUBCUTANEOUS AUTO- INJECTOR KIT 80 MG/0.8ML	46	AEROCHAMBER PLUS FLO-VU LARGE	53
ACCU-CHEK SMARTVIEW TEST STRIPS	29	ADALIMUMAB-AATY (2 PEN)	46	AEROCHAMBER PLUS FLO-VU MEDIUM DEVICE	53
ACCU-CHEK SOFTCLIX LANCET	30	ADALIMUMAB-AATY (2 SYRINGE)	46	AEROCHAMBER PLUS FLO-VU SMALL	53
ACCU-CHEK SOFTCLIX LANCET DEVICE KIT	30	ADALIMUMAB-ADAZ	46	AEROCHAMBER PLUS FLO-VU W/ MASK	53
ACCU-CHEK SOFT TOUCH LANCETS	30	ADALIMUMAB-ADB	46	AFINITOR	16
ACCUPRIL	19	ADALIMUMAB-FKJP	46	afirmelle	40
accutane	26	ADALIMUMAB-RYVK (2 PEN)	46	AFLURIA QUADRIVALENT INTRAMUSCULAR SUSPENSION PREFILLED SYRINGE	48
ACCUTREND GLUCOSE	30	adapalene-benzoyl peroxide external gel 0.1-2.5 %	26		
acebutolol hcl oral	19	adapalene-benzoyl peroxide external gel 0.3-2.5 %	26		
acetaminophen-codeine	8	adapalene external gel	26		
acetazolamide er	19	ADBRY SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	46		
acetazolamide oral	19	adc/f (0.5mg/ml)	35		
acetic acid otic	52	ADCIRCA	55		

AFREZZA	32	albuterol sulfate oral syrup.....	53	amantadine hcl oral	17
AFSTYLA INTRAVENOUS KIT 1000 UNIT, 2000 UNIT, 250 UNIT, 3000 UNIT, 500 UNIT.....	34	alclometasone dipropionate	26	AMARYL ORAL TABLET 1 MG, 2 MG, 4 MG	33
AFSTYLA INTRAVENOUS KIT 1500 UNIT, 2500 UNIT	34	ALCOHOL PREP PADS PAD.....	30	AMBIEN	56
AGRYLIN.....	34	ALDACTAZIDE ORAL TABLET 25-25 MG.....	19	AMBIEN CR	56
AIMOVIG.....	15	ALDACTAZIDE ORAL TABLET 50-50 MG.....	20	ambrisentan.....	55
AIMOVIG SUBCUTANEOUS SOLUTION AUTO-INJECTOR 140 MG/ML	15	ALDACTONE	20	AMERGE ORAL TABLET 1 MG, 2.5 MG	15
AIRDUO RESPICLICK 55/14	53	ALECENSA.....	16	amethia oral tablet 0.15-0.03 &0.01 mg.....	40
AIRDUO RESPICLICK 113/14	53	alendronate sodium oral tablet..	50	amethyst.....	40
AIRDUO RESPICLICK 232/14	53	alfuzosin hcl er.....	40	amiloride hcl oral	20
AIRSUPRA	53	ALINIA ORAL TABLET	17	amiloride-hydrochlorothiazide ..	20
AJOVY	15	aliskiren fumarate.....	20	amiodarone hcl oral.....	20
AKLIEF	26	allopurinol oral tablet 100 mg, 300 mg.....	15	AMITIZA.....	38
ak-poly-bac ophthalmic ointment 500-10000 unit/gm	50	ALLOPURINOL ORAL TABLET 200 MG.....	15	amitriptyline hcl oral	13
ala-cort	26	ALLZITAL.....	8	AMJEVITA FOR NUVAILA.....	46
albendazole oral	17	almotriptan malate.....	15	amlodipine-atorvastatin oral tablet 2.5-10 mg, 2.5-20 mg, 2.5-40 mg	20
albuterol sulfate hfa aerosol solution 108 (90 base) mcg/act inhalation	53	ALOGLIPTIN BENZOATE	33	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.....	20
albuterol sulfate hfa aerosol solution 108 (90 base) mcg/act inhalation	53	ALOGLIPTIN-METFORMIN HCL ...	33	amlodipine besylate-benazepril hcl.....	20
albuterol sulfate hfa aerosol solution 108 (90 base) mcg/act inhalation	53	ALORA	40	amlodipine besylate oral.....	20
ALBUTEROL SULFATE HFA AEROSOL SOLUTION 108 (90 BASE) MCG/ACT INHALATION	53	alose tron hcl	38	amlodipine besylate-valsartan ..	20
albuterol sulfate inhalation nebulization solution (2.5 mg/3ml) 0.083%, 0.63 mg/3ml, 1.25 mg/3ml, 2.5 mg/0.5ml	53	ALPHAGAN P OPHTHALMIC SOLUTION 0.1 %	51	amlodipine-olmesartan	20
albuterol sulfate nebulization solution (5 mg/ml) 0.5% inhalation	53	ALPHAGAN P OPHTHALMIC SOLUTION 0.15 %	51	amlodipine-valsartan-hctz.....	20
ALBUTEROL SULFATE NEBULIZATION SOLUTION (5 MG/ML) 0.5% INHALATION	53	ALPHANATE	34	amne steem	26
ALBUTEROL SULFATE NEBULIZATION SOLUTION (5 MG/ML) 0.5% INHALATION	53	alprazolam er.....	19	amoxicillin	10
		alprazolam oral.....	19	amoxicillin-potassium clavulanate	10
		alprazolam xr.....	19	amphetamine-dextroamphetamine	23
		ALPROLIX	34	amphetamine-dextroamphetamine er	23
		ALREX.....	50	amphetamine sulfate.....	23
		ALTACE.....	20	amphet-dextroamphet 3-bead er	23
		altavera.....	40	ampicillin	10
		ALTRENO.....	26	AMPYRA.....	24
		ALTUVIIIIO	34	AMZEEQ.....	26
		ALUNBRIG.....	16	ANAFRANIL.....	13
		ALVAIZ	34	anagrelide hcl	35
		ALVESCO	53		
		alyacen 1/35.....	40		
		alyacen 7/7/7	40		
		alyq.....	55		

ANALPRAM HC	49	ARMOUR THYROID	45	aurovela fe 1/20	40
ANALPRAM-HC EXTERNAL CREAM	49	ARNUIITY ELLIPTA	53	AURYXIA	39
ANAPROX DS	9	AROMASIN	16	AUSTEDO	25
ANASPAZ	38	ARTHROTEC	9	AUSTEDO XR ORAL TABLET EXTENDED RELEASE 24 HOUR 12 MG, 24 MG, 6 MG	25
anastrozole oral	16	ASACOL HD ORAL TABLET DELAYED RELEASE 800 MG	49	AUSTEDO XR ORAL TABLET EXTENDED RELEASE 24 HOUR 30 MG, 36 MG, 42 MG, 48 MG	25
ANDRODERM	45	ascomp-codeine	8	AUSTEDO XR PATIENT TITRATION	25
ANDROGEL PUMP	45	asenapine maleate	18	AUVELITY	13
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%)	45	ashlyna	40	AUVI-Q	52
ANGELIQ	40	ASMANEX (14 METERED DOSES) .	53	AVALIDE	20
ANNOVERA	40	ASMANEX (30 METERED DOSES) .	54	AVAPRO	20
ANORO ELLIPTA	53	ASMANEX (60 METERED DOSES) .	54	AVAR CLEANSER	26
ANTARA ORAL CAPSULE 30 MG . .	20	ASMANEX (120 METERED DOSES)	53	AVAR-E EMOLLIENT	26
ANTIVERT ORAL TABLET	14	ASMANEX HFA	54	AVAR-E GREEN	26
ANUCORT-HC	49	aspirin-dipyridamole er	35	AVAR-E LS	26
ANUSOL-HC EXTERNAL	49	ATACAND	20	AVAR LS CLEANSER	26
ANUSOL-HC RECTAL	49	ATACAND HCT	20	aviane	40
apap-caff-dihydrocodeine	8	atenolol-chlorthalidone	20	AVIDOXY	10
APLENZIN	13	atenolol oral	20	AVITA EXTERNAL CREAM 0.025 %	26
aprepitant oral capsule 125 mg, 40 mg, 80 mg	14	ATIVAN ORAL	19	AVITA EXTERNAL GEL 0.025 % . .	26
apri	40	atomoxetine hcl	23	AVODART	40
APRISO	49	ATORVALIQ	20	AVONEX PEN	24
APTENSIO XR	23	atorvastatin calcium oral tablet 10 mg, 20 mg	20	AVONEX PREFILLED	24
APTIOM	11	atorvastatin calcium oral tablet 40 mg, 80 mg	20	AYGESTIN ORAL TABLET 5 MG . .	40
AQINJECT PEN NEEDLE	30	atovaquone	17	ayuna	40
AQ INSULIN SYRINGE	30	atovaquone-proguanil hcl	17	AZASAN	46
ARAKODA	17	ATRALIN	26	AZASITE	50
aranelle	40	atropine sulfate ophthalmic solution 1 %	52	azathioprine oral tablet 50 mg . .	46
ARANESP (ALBUMIN FREE)	35	ATROVENT HFA	54	azathioprine oral tablet 100 mg, 75 mg	46
ARAVA	46	AUBAGIO	24	azelaic acid external	26
ARAZLO	26	aubra eq	40	azelastine-fluticasone	52
arformoterol tartrate	53	aubra oral tablet 0.1-20 mg-mcg .	40	azelastine hcl nasal solution 0.1 %, 137 mcg/spray	52
ARICEPT	13	AUGMENTIN	10	azelastine hcl nasal solution 0.15 %	52
ARIMIDEX	16	AUGMENTIN ES-600	10	azelastine hcl ophthalmic	50
aripiprazole oral solution	18	AUGTYRO	16	AZELEX	26
aripiprazole oral tablet	18	aurovela 1.5/30	40	AZILECT	17
ARIXTRA	11	aurovela 1/20	40		
armodafinil	56	aurovela 24 fe	40		
		aurovela fe 1.5/30	40		

azithromycin oral	10
AZOPT	51
AZOR	20
AZSTARYS	23
AZULFIDINE	49
AZULFIDINE EN-TABS	49
azurette	40

B

bac	8
bacitracin ophthalmic	51
bacitracin-polymyxin b	50
baclofen oral tablet 10 mg, 20 mg, 5 mg	55
baclofen oral tablet 15 mg	55
BACTRIM	10
BACTRIM DS	10
BAFIERTAM	24
BALCOLTRA	40
balsalazide disodium	49
balziva	40
BANZEL	11
BAQSIMI ONE PACK	33
BAQSIMI TWO PACK	33
BARACLUDE ORAL TABLET	18
BASAGLAR KWIKPEN	32
BASAGLAR TEMPO PEN	32
BD AUTOSHIELD DUO PEN NEEDLES	30
BD ECLIPSE NEEDLE 18G X 1-1/2", 25G X 5/8", 27G X 1/2"	30
BD ECLIPSE NEEDLE 23G X 1" (OTC)	30
BD ECLIPSE NEEDLE 23G X 1" (RX)	30
BD ECLIPSE SHIELDED NEEDLE	30
BD SAFETYGLIDE SHIELDED NEEDLE 21G X 1-1/2"	30
BD SHARPS COLLECTOR	30
BD ULTRA-FINE insulin syringes	30
BD ULTRA-FINE PEN NEEDLES	30
BD ULTRA-FINE U-500 insulin syringes	30

BD ULTRA-FINE VEO insulin syringes	30
BELBUCA	8
BELSOMRA	56
benazepril hcl oral	20
benazepril-hydrochlorothiazide	20
BENICAR	20
BENICAR HCT	20
BENLYSTA SUBCUTANEOUS SOLUTION AUTO-INJECTOR	46
BENZAMYCIN	26
benzonatate oral capsule 100 mg, 200 mg	52
benzonatate oral capsule 150 mg	52
benzoyl peroxide-erythromycin	26
benztropine mesylate oral	17
BESIVANCE	50
betamethasone dipropionate aug external cream	26
betamethasone dipropionate aug external lotion	26
betamethasone dipropionate aug external ointment	26
betamethasone dipropionate external cream	26
betamethasone dipropionate external lotion	26
betamethasone dipropionate external ointment	26
betamethasone valerate external cream	26
betamethasone valerate external lotion	26
betamethasone valerate external ointment	26
BETAPACE	20
BETAPACE AF	20
BETASERON	24
betaxolol hcl oral	20
bethanechol chloride oral	39
BETHKIS	55
BETIMOL	51
BEVESPI AEROSPHERE	54
BEXSERO	48

BEYAZ	40
bicalutamide	16
BIDIL	20
BIGFOOT UNITY PROGRAM	30
BIJUVA	40
BIKTARVY	18
bimatoprost ophthalmic	51
BIMZELX	46
BIOTEL CARE TEST STRIPS	30
bismuth/metronidaz/tetracyclin	37
bisoprolol fumarate oral	20
bisoprolol-hydrochlorothiazide	20
bis subcit-metronid-tetracyc	37
BLEPH-10 OPHTHALMIC SOLUTION 10 %	50
blisovi 24 fe	40
blisovi fe 1.5/30	40
blisovi fe 1/20	40
BLOOD GLUCOSE TEST STRIPS	30
BLOOD GLUCOSE TEST STRIPS 33330	
BONJESTA	14
BOOSTRIX	48
BOSULIF ORAL TABLET	16
BREO ELLIPTA	54
breyana	54
BREZTRI AEROSPHERE	54
briellyn	40
BRILINTA	17
brimonidine tartrate external	26
brimonidine tartrate ophthalmic solution 0.1 %	51
brimonidine tartrate ophthalmic solution 0.2 %	51
brimonidine tartrate ophthalmic solution 0.15 %	51
brimonidine tartrate-timolol	51
brinzolamide	51
BRIVIACT ORAL SOLUTION	11
BRIVIACT ORAL TABLET	11
BROMFED DM	52
bromfenac sodium (once-daily)	50

bromfenac sodium ophthalmic solution 0.07 %	50	butalbital-apap-caffeine oral tablet	8	capecitabine.	16	
bromfenac sodium ophthalmic solution 0.075 %	50	butalbital-asa-caff-codeine	8	CAPLYTA	18	
bromocriptine mesylate oral tablet	17	butalbital-aspirin-caffeine	8	captopril oral	20	
BROMSITE	50	butorphanol tartrate nasal	8	CARAC	26	
BRONCHITOL	55	BUTRANS	8	CARAFATE	37	
BRONCHITOL TOLERANCE TEST	55	BYDUREON BCISE AUTOINJECTOR	33	carbamazepine er oral capsule extended release 12 hour	11	
BROVANA	54	BYETTA 5 MCG PEN	33	carbamazepine er oral tablet extended release 12 hour	11	
BRUKINSA	16	BYSTOLIC	20	carbamazepine oral tablet	11	
budesonide er	49	C			carbamazepine oral tablet chewable	11
budesonide-formoterol fumarate	54	cabergoline.	44	CARBATROL	11	
budesonide inhalation.	54	CABOMETYX	16	carbidopa-levodopa-entacapone	17	
budesonide oral	49	CADUET	20	carbidopa-levodopa er	17	
budesonide rectal.	49	CALAN SR ORAL TABLET EXTENDED RELEASE 120 MG, 180 MG, 240 MG	20	carbidopa-levodopa oral tablet.	17	
bumetanide oral	20	calcipotriene-betameth diprop external suspension	26	carbinoxamine maleate oral tablet 4 mg	52	
BUMEX	20	calcipotriene external cream	26	carbinoxamine maleate oral tablet 6 mg	52	
BUPAP	8	calcipotriene external ointment	26	CARDIZEM	20	
buprenorphine	8	calcipotriene external solution	26	CARDIZEM CD	20	
buprenorphine hcl-naloxone hcl.	9	calcitonin (salmon) injection	50	CARDIZEM LA	20	
buprenorphine hcl sublingual	9	calcitonin (salmon) nasal	50	CARDURA	20	
bupropion hcl er (smoking det)	9	CALCITRENE	26	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"	30	
bupropion hcl er (sr)	13	calcitriol oral	50	CAREPOINT POLY HUB NEEDLE 22G X 1-1/2"	30	
bupropion hcl er (xl) oral tablet extended release 24 hour 150 mg, 300 mg	13	calcium acetate oral tablet 667 mg.	35	CAREPOINT SAFETY 1ST NEEDLE	30	
BUPROPION HCL ER (XL) ORAL TABLET EXTENDED RELEASE 24 HOUR 450 MG	13	calcium acetate (phos binder) oral capsule	39	CARETOUCH MONITOR SYSTEM	30	
bupropion hcl oral	13	calcium acetate (phos binder) oral tablet.	35	CARETOUCH TEST	30	
buspirone hcl oral	19	CALQUENCE	16	carisoprodol oral tablet 250 mg	55	
butalbital-acetaminophen oral tablet 50-300 mg.	8	CALQUENCE ORAL CAPSULE 100 MG.	16	carisoprodol oral tablet 350 mg	55	
butalbital-acetaminophen oral tablet 50-325 mg.	8	CAMBIA	9	CARNITOR ORAL SOLUTION	35	
butalbital-apap-caff-cod oral capsule 50-300-40-30 mg	8	camila	40	CARNITOR ORAL TABLET	39	
butalbital-apap-caff-cod oral capsule 50-325-40-30 mg	8	camrese.	40	CARNITOR SF	35	
butalbital-apap-caffeine oral capsule 50-300-40 mg	8	camrese lo	40	cartia xt.	20	
butalbital-apap-caffeine oral capsule 50-325-40 mg	8	CAMZYOS	20	carvedilol	20	
		CANASA	49	carvedilol phosphate er.	20	
		candesartan cilexetil	20	CASODEX	16	
		candesartan cilexetil-hctz	20	CATAPRES-TTS-1	20	

CATAPRES-TTS-2.....	20	CHORIONIC GONADOTROPIN INTRAMUSCULAR	49	CLEOCIN ORAL CAPSULE 75 MG	10
CATAPRES-TTS-3.....	20	CIALIS.....	35	CLEOCIN ORAL CAPSULE 150 MG, 300 MG	10
CAVERJECT IMPULSE.....	39	CIBINQO	26	CLEOCIN ORAL SOLUTION RECONSTITUTED.....	10
caziant oral tablet 0.1/0.125/ 0.15 -0.025 mg	40	ciclodan.....	14	CLEOCIN-T.....	26
cefadroxil	10	ciclopirox external gel	14	CLEOCIN VAGINAL CREAM.....	10
cefdinir.....	10	ciclopirox external shampoo	14	CLIMARA	40
cefixime.....	10	ciclopirox external solution	14	CLIMARA PRO.....	40
cefpodoxime proxetil oral tablet	10	ciclopirox olamine external cream.....	14	clindacin	26
cefprozil.....	10	ciclopirox olamine external suspension	26	clindacin etz external swab	26
cefuroxime axetil.....	10	cilostazol.....	17	clindacin-p	26
CELEBREX.....	9	CIMDUO.....	18	CLINDAGEL	26
celecoxib oral.....	9	cimetidine oral.....	37	clindamycin hcl oral	10
CELEXA	13	CIMZIA	46	clindamycin palmitate hcl.....	10
CELLCEPT	46	CIMZIA (2 SYRINGE).....	46	clindamycin phos-benzoyl perox external gel 1.2-5 %	26
CENTANY EXTERNAL OINTMENT 2 %.....	10	CIMZIA STARTER KIT.....	46	clindamycin phos-benzoyl perox external gel 1-5 %, 1.2-2.5 %, 1.2-3.75 %	26
cephalexin	10	cinacalcet hcl.....	50	clindamycin phosphate external foam.....	26
CEQUA	52	CINRYZE.....	46	clindamycin phosphate external lotion	26
CEQUR SIMPLICITY 2U 10PK	30	CIPRODEX OTIC SUSPENSION 0.3-0.1 %.....	52	clindamycin phosphate external solution.....	26
CERDELGA.....	39	ciprofloxacin-dexamethasone ...	52	clindamycin phosphate external swab.....	26
cetirizine hcl oral solution.....	52	ciprofloxacin hcl ophthalmic	50	clindamycin phosphate gel 1 % external.....	26
CETRAXAL.....	52	ciprofloxacin hcl oral	10	clindamycin phosphate gel 1 % external.....	27
cetorelix acetate	49	ciprofloxacin hcl otic	52	clindamycin phosphate gel 1 % external.....	27
CETROTIDE.....	49	CIPRO HC.....	52	clindamycin phosphate vaginal ..	10
cevimeline hcl	25	CIPRO ORAL TABLET.....	10	clindamycin-tretinoin	27
charlotte 24 fe	40	citalopram hydrobromide oral solution.....	13	CLINDESSE	10
chateal eq.....	40	citalopram hydrobromide oral tablet	13	CLINPRO 5000	25
chateal oral tablet 0.15-30 mg-mcg.....	40	CITRANATAL 90 DHA.....	35	clobazam oral suspension	11
chlordiazepoxide-clidinium	38	CITRANATAL ASSURE	35	clobazam oral tablet	11
chlordiazepoxide hcl	19	CITRANATAL DHA ORAL 27-1 & 250 MG.....	35	clobetasol propionate e.....	27
chlorhexidine gluconate mouth/ throat.....	25	claravis	26	clobetasol propionate external cream.....	27
chlorpromazine hcl oral tablet. ...	18	CLARINEX	52		
chlorthalidone.....	20	clarithromycin er.....	10		
chlorzoxazone oral tablet 250 mg, 375 mg, 750 mg	55	clarithromycin oral suspension reconstituted	10		
chlorzoxazone oral tablet 500 mg.....	55	clarithromycin oral tablet.....	10		
cholestyramine light	20	CLENPIQ	38		
cholestyramine oral	20				

clobetasol propionate external foam.....	27	colesevelam hcl oral tablet.....	20	COSENTYX UNOREADY.....	46
clobetasol propionate external gel	27	COLESTID ORAL TABLET.....	20	COSOPT.....	51
clobetasol propionate external liquid.....	27	colestipol hcl oral tablet.....	20	COSOPT PF.....	51
clobetasol propionate external ointment.....	27	COMBIGAN.....	51	COTELIC.....	16
clobetasol propionate external shampoo.....	27	COMBIPATCH.....	40	COTEMPLA XR-ODT.....	24
clobetasol propionate external solution.....	27	COMBIVENT RESPIMAT.....	54	COVARYX.....	40
CLOBEX EXTERNAL SHAMPOO... ..	27	COMIRNATY INTRAMUSCULAR SUSPENSION.....	48	COVARYX HS.....	40
CLOBEX SPRAY.....	27	COMPLERA.....	18	COZAAR.....	21
clodan.....	27	COMPLETENATE.....	35	CREON.....	39
CLOMID.....	49	COMPRO.....	14	CRESEMBA ORAL.....	14
clomiphene citrate oral tablet 50 mg.....	49	COMTAN ORAL TABLET 200 MG ..	17	CRESTOR.....	21
clomipramine hcl oral.....	13	CO-NATAL FA.....	35	cromolyn sodium ophthalmic... ..	52
clonazepam oral.....	19	CONCEPT DHA.....	35	cromolyn sodium oral.....	38
clonidine hcl er oral tablet extended release 12 hour.....	23	CONCERTA.....	23	cryselle-28.....	40
clonidine hcl oral.....	20	constulose.....	38	CUVPOSA.....	38
clonidine patch weekly 0.1 mg/24hr transdermal.....	20	CONTOUR MONITOR KIT W/DEVICE30		CVS ADVANCED GLUCOSE TEST.. .	30
clonidine patch weekly 0.1 mg/24hr transdermal.....	20	CONTOUR NEXT EZ KIT W/DEVICE	30	CVS GLUCOSE METER TEST STRIPS30	
clonidine patch weekly 0.2 mg/24hr transdermal.....	20	CONTOUR NEXT GEN MONITOR KIT30		cyanocobalamin injection solution 1000 mcg/ml.....	35
clonidine patch weekly 0.2 mg/24hr transdermal.....	20	CONTOUR NEXT GEN TEST STRIPS30		CYANOCOBALAMIN INJECTION SOLUTION 2000 MCG/ML.....	35
clonidine patch weekly 0.3 mg/24hr transdermal.....	20	CONTOUR NEXT GEN TEST STRIPS30		cyanocobalamin nasal.....	35
clonidine patch weekly 0.3 mg/24hr transdermal.....	20	CONTOUR NEXT LINK KIT W/DEVICE.....	30	cyclobenzaprine hcl oral tablet 7.5 mg.....	55
clonidine patch weekly 0.3 mg/24hr transdermal.....	20	CONTOUR NEXT LINK KIT W/DEVICE.....	30	cyclobenzaprine hcl oral tablet 10 mg, 5 mg.....	55
clonidine patch weekly 0.3 mg/24hr transdermal.....	20	CONTOUR NEXT MONITOR KIT W/DEVICE.....	30	CYCLOGYL.....	52
clonidine patch weekly 0.3 mg/24hr transdermal.....	20	CONTOUR NEXT ONE DEVICE....	30	cyclopentolate hcl ophthalmic ..	52
clonidine patch weekly 0.3 mg/24hr transdermal.....	20	CONTOUR NEXT ONE KIT.....	30	cyclophosphamide oral capsule .	16
clonidine patch weekly 0.3 mg/24hr transdermal.....	20	CONTOUR TEST STRIPS.....	30	CYCLOSET.....	33
clonidine patch weekly 0.3 mg/24hr transdermal.....	20	COPAXONE.....	24	cyclosporine modified oral capsule.....	46
clonidine patch weekly 0.3 mg/24hr transdermal.....	20	CORDRAN.....	27	cyclosporine ophthalmic.....	52
clonidine patch weekly 0.3 mg/24hr transdermal.....	20	COREG.....	20	cyclosporine oral.....	46
clonidine patch weekly 0.3 mg/24hr transdermal.....	20	COREG CR.....	20	CYLTEZO (2 PEN) SUBCUTANEOUS AUTO-INJECTOR KIT 40 MG/0.4ML.....	46
clonidine patch weekly 0.3 mg/24hr transdermal.....	20	CORGARD.....	21	CYLTEZO (2 PEN) SUBCUTANEOUS AUTO-INJECTOR KIT 40 MG/0.8ML.....	46
clonidine patch weekly 0.3 mg/24hr transdermal.....	20	CORLANOR.....	21	CYLTEZO (2 SYRINGE) SUBCUTANEOUS PREFILLED SYRINGE KIT 10 MG/0.2ML, 20 MG/0.4ML, 40 MG/0.8ML.....	46
clonidine patch weekly 0.3 mg/24hr transdermal.....	20	CORTEF.....	44		
clonidine patch weekly 0.3 mg/24hr transdermal.....	20	CORTENEMA.....	49		
clonidine patch weekly 0.3 mg/24hr transdermal.....	20	CORTIFOAM.....	49		
clonidine patch weekly 0.3 mg/24hr transdermal.....	20	COSENTYX SENSOREADY.....	46		
clonidine patch weekly 0.3 mg/24hr transdermal.....	20	COSENTYX SUBCUTANEOUS SOLUTION PREFILLED SYRINGE..	46		
clonidine patch weekly 0.3 mg/24hr transdermal.....	20				
clonidine patch weekly 0.3 mg/24hr transdermal.....	20				
clonidine patch weekly 0.3 mg/24hr transdermal.....	20				

CYLTEZO (2 SYRINGE) SUBCUTANEOUS PREFILLED SYRINGE KIT 40 MG/0.4ML	46	DAYVIGO	56	desoximetasone external cream .	27
CYLTEZO-CD/UC/HS STARTER SUBCUTANEOUS AUTO- INJECTOR KIT 40 MG/0.4ML	46	DAZOMON	27	desoximetasone external ointment	27
CYLTEZO-CD/UC/HS STARTER SUBCUTANEOUS AUTO- INJECTOR KIT 40 MG/0.8ML	46	D-CARE BLOOD GLUCOSE	30	DESVENLAFAXINE ER	13
CYLTEZO-PSORIASIS/UV STARTER SUBCUTANEOUS AUTO- INJECTOR KIT 40 MG/0.4ML	46	D-CARE GLUCOMETER	30	desvenlafaxine succinate er	13
CYLTEZO-PSORIASIS/UV STARTER SUBCUTANEOUS AUTO- INJECTOR KIT 40 MG/0.8ML	46	DDAVP ORAL	44	DETROL	39
CYMBALTA	13	deblitane	40	DETROL LA	39
cyproheptadine hcl oral	52	deferasirox oral tablet	35	DEXABLISS	44
cyred eq.	40	DELESTROGEN	40	dexamethasone intensol	44
cyred oral tablet 0.15-30 mg-mcg.	40	DELSTRIGO	18	dexamethasone oral elixir	44
CYTOMEL	45	delyla	40	dexamethasone oral solution	44
CYTOTEC	37	DENTA 5000 PLUS	25	dexamethasone oral tablet	44
D		DENTAGEL	25	dexamethasone oral tablet therapy pack	44
dabigatran etexilate mesylate	11	DEPAKOTE	11	dexamethasone sodium phosphate ophthalmic	50
dalfampridine er	24	DEPAKOTE ER	11	DEXCOM G6 RECEIVER	30
DALIRESP	54	DEPAKOTE SPRINKLES	11	DEXCOM G6 SENSOR	30
DANTRIUM ORAL	56	DEPEN TITRATABS	39	DEXCOM G6 TRANSMITTER	30
dantrolene sodium oral	56	DEPO-ESTRADIOL	40	DEXCOM G7 RECEIVER	30
DAPAGLIFLOZIN PRO- METFORMIN ER	33	DEPO-PROVERA	40	DEXCOM G7 SENSOR	30
DAPAGLIFLOZIN PROPANEDIOL	34	DEPO-SUBQ PROVERA 104	40	DEXEDRINE	24
dapsone external	27	DEPO-TESTOSTERONE INTRAMUSCULAR SOLUTION 100 MG/ML	45	DEXILANT	37
dapsone oral	15	DEPO-TESTOSTERONE INTRAMUSCULAR SOLUTION 200 MG/ML	45	dexlansoprazole	37
darifenacin hydrobromide er	39	DERMACINRX UREA	27	dexmethylphenidate hcl	24
darunavir	18	DERMA-SMOOTHIE/FS BODY	27	dexmethylphenidate hcl er	24
dasetta 1/35	40	DERMA-SMOOTHIE/FS SCALP	27	dextroamphetamine sulfate er oral capsule extended release 24 hour 10 mg, 5 mg.	24
dasetta 7/7/7	40	DERMOTIC	52	dextroamphetamine sulfate er oral capsule extended release 24 hour 15 mg	24
DAVIMET-FLUORIDE	35	DESCOVY	18	dextroamphetamine sulfate oral tablet 10 mg, 5 mg	24
DAYPRO	9	desipramine hcl oral	13	dextroamphetamine sulfate oral tablet 15 mg, 2.5 mg, 20 mg, 30 mg, 7.5 mg	24
daysee	40	desloratadine oral tablet	52	DHIVY	17
DAYTRANA	24	desmopressin acetate oral	44	DIASTAT ACUDIAL RECTAL GEL 10 MG, 20 MG	12
		desmopressin acetate spray	44	diazepam oral solution	19
		desogestrel-ethinyl estradiol oral tablet 0.15-0.02/0.01 mg (21/5)	40	diazepam oral tablet	19
		desogestrel-ethinyl estradiol oral tablet 0.15-30 mg-mcg.	41	diazepam rectal	12
		desonide external cream	27	DICLEGIS	14
		desonide external lotion	27		
		desonide external ointment	27		
		DESOWEN	27		

diclofenac-misoprostol	9	DITROPAN XL ORAL TABLET EXTENDED RELEASE 24 HOUR 10 MG, 5 MG	39	doxycycline hyclate oral tablet delayed release 100 mg, 150 mg, 200 mg, 50 mg, 75 mg.	10
diclofenac potassium(migraine) . .	9	divalproex sodium er	12	doxycycline monohydrate oral capsule 100 mg, 50 mg.	10
diclofenac potassium oral tablet 25 mg.	9	divalproex sodium oral capsule delayed release sprinkle	12	doxycycline monohydrate oral capsule 150 mg, 75 mg.	10
diclofenac potassium oral tablet 50 mg.	9	divalproex sodium oral tablet delayed release	12	doxycycline monohydrate oral suspension reconstituted	10
diclofenac sodium er	9	DIVIGEL	41	doxycycline monohydrate oral tablet	10
diclofenac sodium external gel 1 %	9	DODEX	35	doxylamine-pyridoxine	14
diclofenac sodium external gel 3 %	27	dofetilide.	21	DRISDOL	35
diclofenac sodium ophthalmic . .	50	dolishale	41	dronabinol	14
diclofenac sodium oral	9	donepezil hcl oral tablet 10 mg, 5 mg.	13	DROPSAFE SAFETY SYRINGE/ NEEDLE	30
dicloxacillin sodium	10	donepezil hcl oral tablet 23 mg . .	13	drospiren-eth estrad-levomefol . .	41
dicyclomine hcl oral.	38	DOPTelet.	35	drospirenone-ethinyl estradiol . .	41
DIFFERIN EXTERNAL GEL 0.3 % . .	27	DORYX MPC.	10	DRYSOL	27
DIFICID ORAL TABLET.	10	DORYX ORAL TABLET DELAYED RELEASE 200 MG, 50 MG, 80 MG	10	DUAVEE	41
DIFLUCAN	14	dorzolamide hcl solution 2 % ophthalmic	51	DULERA	54
difluprednate	52	DORZOLAMIDE HCL SOLUTION 2 % OPHTHALMIC.	51	duloxetine hcl oral capsule delayed release particles 20 mg, 30 mg, 60 mg	13
digitek oral tablet 125 mcg, 250 mcg.	21	dorzolamide hcl-timolol mal	51	duloxetine hcl oral capsule delayed release particles 40 mg . .	13
digox	21	dorzolamide hcl-timolol mal pf . .	51	DUPIXENT SUBCUTANEOUS SOLUTION PEN-INJECTOR	27
digoxin oral tablet.	21	dotti	41	DUPIXENT SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 100 MG/0.67ML.	27
DILANTIN INFATABS	12	DOVATO	18	DUPIXENT SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 200 MG/1.14ML, 300 MG/2ML	27
DILANTIN ORAL CAPSULE	12	DOVONEX EXTERNAL CREAM 0.005 %	27	DUREZOL.	52
DILAUDID ORAL TABLET	8	doxazosin mesylate oral	21	dutasteride oral.	40
diltiazem hcl er beads	21	doxepin hcl oral capsule	13	dutasteride-tamsulosin hcl.	40
diltiazem hcl er coated beads. . . .	21	doxepin hcl oral concentrate	13	DXEVO 11-DAY ORAL TABLET THERAPY PACK 1.5 MG	44
diltiazem hcl er oral capsule extended release 12 hour	21	doxepin hcl oral tablet.	56	DYANAVEL XR	24
diltiazem hcl er oral capsule extended release 24 hour	21	doxycycline.	27	DYMISTA	52
diltiazem hcl er oral tablet extended release 24 hour	21	doxycycline hyclate oral capsule. .	10	DYRENIUM.	21
diltiazem hcl oral.	21	doxycycline hyclate oral tablet 20 mg.	10		
dilt-xr	21	doxycycline hyclate oral tablet 100 mg.	10		
dimethyl fumarate oral	24	doxycycline hyclate oral tablet 150 mg, 50 mg, 75 mg	10		
DIOVAN	21	DOXYCYCLINE HYCLATE ORAL TABLET DELAYED RELEASE 80 MG	10		
DIOVAN HCT	21				
DIPENTUM.	49				
diphenoxylate-atropine oral tablet	38				
DIPROLENE.	27				
disulfiram oral	9				

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EASIVENT	54	ELMIRON	39	EPIDUO FORTE.....	27
EASIVENT MASK LARGE.....	54	ELOCTATE	35	epinephrine solution auto- injector 0.3 mg/0.3ml injection ..	52
EASIVENT MASK MEDIUM	54	eluryng	41	epinephrine solution auto- injector 0.3 mg/0.3ml injection ..	52
EASIVENT MASK SMALL.....	54	EMBRACE BLOOD GLUCOSE TEST	30	epinephrine solution auto- injector 0.3 mg/0.3ml injection ..	52
EASYGLUCO	30	EMBRACE WAVE BLOOD GLUCOSE IN VITRO	30	epinephrine solution auto- injector 0.3 mg/0.3ml injection ..	52
EASYMAX 15 TEST.....	30	EMEND ORAL CAPSULE	14	epinephrine solution auto- injector 0.3 mg/0.3ml injection ..	52
EASY MAX BLOOD GLUCOSE TEST	30	EMGALITY	15	epinephrine solution auto- injector 0.15 mg/0.3ml injection .	52
EASYMAX NG BLOOD GLUCOSE KIT	30	emoquette oral tablet 0.15-30 mg-mcg.....	41	epinephrine solution auto- injector 0.15 mg/0.3ml injection .	52
EASY MAX T1 GLUCOSE SYSTEM .	30	EMPAVELI	46	epinephrine solution auto- injector 0.15 mg/0.15ml injection	52
EASY TOUCH HEALTHPRO GLUCOSE.....	30	emtricitabine-tenofovir df oral tablet 100-150 mg, 133-200 mg, 167-250 mg	18	epinephrine solution auto- injector 0.15 mg/0.15ml injection	52
EASY TOUCH TEST	30	emtricitabine-tenofovir df oral tablet 200-300 mg.....	18	epinephrine solution auto- injector 0.15 mg/0.15ml injection	52
EC-NAPROSYN ORAL TABLET DELAYED RELEASE 375 MG	9	emzahn	41	EPIPEN 2-PAK.....	52
EC-NAPROSYN ORAL TABLET DELAYED RELEASE 500 MG	9	enalapril-hydrochlorothiazide ...	21	EPIPEN JR 2-PAK	52
ec-naproxen	9	enalapril maleate oral solution ..	21	epitol	12
econazole nitrate external	14	enalapril maleate oral tablet	21	eplerenone	21
EDARBI.....	21	ENBREL	46	EPZICOM	18
EDARBYCLOR	21	ENBREL MINI.....	46	EQ BLOOD GLUCOSE TEST	31
EDEX.....	39	ENBREL SURECLICK	46	EQUETRO	19
ED-SPAZ ORAL TABLET DISPERSIBLE 0.125 MG.....	38	endocet.....	8	ergocalciferol oral capsule	36
EEMT	41	ENDOMETRIN.....	49	ERIVEDGE	16
EEMT HS	41	ENGERIX-B	48	ERLEADA ORAL TABLET 60 MG...	16
E.E.S. GRANULES.....	10	enillorig.....	41	ERLEADA ORAL TABLET 240 MG..	16
efavirenz-emtricitab-tenofo df. .	18	ENLITE GLUCOSE SENSOR.....	30	ERMEZA.....	45
EFFER-K ORAL TABLET EFFERVESCENT 10 MEQ, 20 MEQ .	35	enoxaparin sodium injection solution prefilled syringe.....	11	errin	41
EFFEXOR XR	13	enpresse-28	41	ERYGEL	27
EFFIENT.....	18	enskyce	41	ERYPED 200	10
EFUDEX	27	ENSTILAR	27	ERYPED 400	10
ELEPSIA XR	12	entacapone	17	ERY-TAB.....	10
ELESTRIN	41	entecavir.....	18	erythromycin base oral tablet ...	10
eletriptan hydrobromide.....	15	ENTRESTO ORAL TABLET	21	erythromycin base oral tablet delayed release	10
ELIDEL	27	ENTYVIO	46	erythromycin ethylsuccinate oral suspension reconstituted 200 mg/5ml	10
elinest	41	enulose	38	erythromycin ethylsuccinate oral suspension reconstituted 400 mg/5ml	10
ELIQUIS	11	ENVARUSUS XR.....	46	erythromycin external.....	27
ELIQUIS DVT/PE STARTER PACK..	11	EPANED	21		
ELITE-OB.....	36	EPCLUSA ORAL TABLET	18		
ELLA.....	41	EPIDIOLEX.....	12		
		EPIDUO	27		

erythromycin ophthalmic	50	estradiol patch twice weekly 0.0375 mg/24hr transdermal	41	EXELON	13
erythromycin oral	10	estradiol patch twice weekly 0.0375 mg/24hr transdermal	41	exemestane	16
ESBRIET ORAL TABLET	55	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	41	EXFORGE	21
escitalopram oxalate oral solution	13	estradiol transdermal gel 0.75 mg/1.25 gm (0.06%)	41	EXFORGE HCT	21
escitalopram oxalate oral tablet .	13	estradiol transdermal patch weekly	41	EXKIVITY ORAL CAPSULE 40 MG	16
ESGIC	8	estradiol vaginal cream	41	EXTAVIA	24
esomeprazole magnesium oral capsule delayed release	37	estradiol vaginal tablet	41	EYSUVIS	50
esomeprazole magnesium oral packet	37	estradiol valerate intramuscular .	41	ezetimibe	21
estarylla	41	ESTRING	41	ezetimibe-simvastatin	21
estazolam	56	ESTROGEL	41		
est estrogens-methyltest	41	eszopiclone	56	F	
est estrogens-methyltest ds	41	ethambutol hcl oral	15	FABHALTA	35
est estrogens-methyltest hs	41	ethosuximide oral	12	FABIOR	27
ESTRACE	41	ethynodiol diac-eth estradiol . . .	41	falmina	41
estradiol-norethindrone acet . . .	41	etodolac	9	famciclovir oral tablet 125 mg, 500 mg	18
estradiol oral	41	etodolac er	9	famciclovir oral tablet 250 mg . . .	18
estradiol patch twice weekly 0.1 mg/24hr transdermal	41	etonogestrel-ethinyl estradiol . . .	41	famotidine oral suspension reconstituted	37
estradiol patch twice weekly 0.1 mg/24hr transdermal	41	etravirine	18	famotidine oral tablet 20 mg, 40 mg	37
estradiol patch twice weekly 0.1 mg/24hr transdermal	41	EUCRISA	27	FARXIGA	34
estradiol patch twice weekly 0.05 mg/24hr transdermal	41	euthyrox	45	FASENRA PEN	54
estradiol patch twice weekly 0.05 mg/24hr transdermal	41	EVAMIST	41	fayosim oral tablet 42-21-21-7 days	41
estradiol patch twice weekly 0.025 mg/24hr transdermal	41	EVEKEO	24	febuxostat	15
estradiol patch twice weekly 0.025 mg/24hr transdermal	41	everolimus oral tablet 0.25 mg, 0.5 mg, 0.75 mg, 1 mg	46	felbamate	12
estradiol patch twice weekly 0.025 mg/24hr transdermal	41	everolimus oral tablet 10 mg, 2.5 mg, 5 mg, 7.5 mg	16	FELBATOL	12
estradiol patch twice weekly 0.075 mg/24hr transdermal	41	EVERSENSE E3 SENSOR/HOLDER	31	FELBATOL ORAL SUSPENSION 600 MG/5ML	12
estradiol patch twice weekly 0.075 mg/24hr transdermal	41	EVERSENSE E3 SMART TRANSMITTER	31	FELDENE ORAL CAPSULE 10 MG, 20 MG	9
estradiol patch twice weekly 0.075 mg/24hr transdermal	41	EVERSENSE SENSOR/HOLDER . . .	31	felodipine er	21
estradiol patch twice weekly 0.075 mg/24hr transdermal	41	EVERSENSE SMART TRANSMITTER	31	FEMARA	16
estradiol patch twice weekly 0.0375 mg/24hr transdermal	41	EVISTA	50	FEMRING	41
		EVOCALIN EXTERNAL FOAM 1 % . .	27	fenofibrate micronized	21
		EVOXAC	25	fenofibrate oral capsule 134 mg, 200 mg, 67 mg	21
		EVRYSDI	39	fenofibrate oral capsule 150 mg, 50 mg	21
		EXELDERM EXTERNAL CREAM . . .	14	fenofibrate oral tablet 120 mg, 40 mg	21

fenofibrate oral tablet 145 mg, 160 mg, 48 mg, 54 mg	21	FLUARIX QUADRIVALENT INTRAMUSCULAR SUSPENSION PREFILLED SYRINGE 0.5 ML.	48	fluoxetine hcl oral tablet 20 mg, 60 mg	13
fenofibric acid oral capsule delayed release	21	FLUBLOK QUADRIVALENT INTRAMUSCULAR SOLUTION PREFILLED SYRINGE 0.5 ML.	48	fluphenazine hcl oral tablet	18
FENOGLIDE.	21	FLUCELVAX QUADRIVALENT INTRAMUSCULAR SUSPENSION PREFILLED SYRINGE	48	flurbiprofen oral	9
fentanyl transdermal patch 72 hour 37.5 mcg/hr, 62.5 mcg/ hr, 87.5 mcg/hr.	8	fluconazole oral.	14	FLUTICASONE FUROATE- VILANTEROL.	54
fentanyl transdermal patch 72 hour 100 mcg/hr, 12 mcg/hr, 25 mcg/hr, 50 mcg/hr, 75 mcg/hr	8	fludrocortisone acetate oral.	44	FLUTICASONE PROPIONATE DISKUS.	54
fesoterodine fumarate er	39	FLULAVAL QUADRIVALENT INTRAMUSCULAR SUSPENSION PREFILLED SYRINGE 0.5 ML.	48	fluticasone propionate external cream.	28
FETZIMA	13	flunisolide nasal	53	fluticasone propionate external ointment	28
FEXMID.	56	fluocinolone acetonide body	27	FLUTICASONE PROPIONATE HFA.	54
FIASP	32	fluocinolone acetonide external cream.	27	fluticasone propionate nasal	53
FIASP FLEXTOUCH	32	fluocinolone acetonide external ointment.	27	FLUTICASONE-SALMETEROL INHALATION AEROSOL.	54
FINACEA EXTERNAL FOAM	27	fluocinolone acetonide external solution.	27	fluticasone-salmeterol inhalation aerosol powder breath activated 100-50 mcg/act, 250-50 mcg/act, 500-50 mcg/act	54
FINACEA EXTERNAL GEL	27	fluocinolone acetonide otic	52	FLUTICASONE-SALMETEROL INHALATION AEROSOL POWDER BREATH ACTIVATED 113-14 MCG/ ACT, 232-14 MCG/ACT, 55-14 MCG/ACT.	54
finasteride oral tablet 5 mg	40	fluocinolone acetonide scalp.	27	fluvastatin sodium	21
fingolimod hcl	24	fluocinonide external cream 0.1 %	27	fluvoxamine maleate	13
FINTEPLA	12	fluocinonide external cream 0.05 %	27	fluvoxamine maleate er.	13
finzala	41	fluocinonide external gel	27	FLUZONE HIGH- DOSE QUADRIVALENT INTRAMUSCULAR SUSPENSION PREFILLED SYRINGE 0.7 ML.	48
FIORICET.	8	fluocinonide external ointment.	27	FLUZONE QUADRIVALENT INTRAMUSCULAR SUSPENSION PREFILLED SYRINGE 0.5 ML.	48
FIORICET/CODEINE	8	fluocinonide external solution.	27	FML FORTE	50
FIRST-LANSOPRAZOLE	38	FLUORIDEX	25	FML LIQUIFILM.	50
FIRST-OMEPRAZOLE.	38	FLUORIDEX ENHANCED WHITENING.	25	FOCALIN	24
FIRVANQ	10	FLUORIMAX 5000.	25	FOCALIN XR	24
flac	52	fluoritab oral solution 0.275 (0.125 f) mg/drop	36	folic acid oral tablet 1 mg	36
FLAGYL.	10	fluorometholone.	50	FOLLISTIM AQ.	49
FLAREX	50	FLUOROURACIL EXTERNAL CREAM 0.5 %	27	fondaparinux sodium.	11
flecainide acetate	21	fluorouracil external cream 5 %	27	FORA 6 CONNECT/GTEL TEST.	31
FLEXICHAMBER	54	fluoxetine hcl oral capsule	13	FORFIVO XL.	13
FLOMAX.	40	fluoxetine hcl oral capsule delayed release	13	formoterol fumarate inhalation.	54
FLORIVA PLUS	36	fluoxetine hcl oral solution.	13	FORTEO.	50
FLOVENT DISKUS INHALATION AEROSOL POWDER BREATH ACTIVATED 100 MCG/ACT, 250 MCG/ACT, 50 MCG/ACT	54	fluoxetine hcl oral tablet 10 mg	13		
FLOVENT HFA INHALATION AEROSOL 110 MCG/ACT, 220 MCG/ACT, 44 MCG/ACT	54				
FLUAD QUADRIVALENT	48				

FORTISCARE G1 TEST STRIP IN VITRO STRIP	31
FORTISCARE TEST IN VITRO STRIP31	
FOSAMAX	50
fosfomycin tromethamine	10
fosinopril sodium	21
fosinopril sodium-hctz	21
FREESTYLE LIBRE 2 READER	31
FREESTYLE LIBRE 2 SENSOR	31
FREESTYLE LIBRE 3 PLUS SENSOR31	
FREESTYLE LIBRE 3 READER	31
FREESTYLE LIBRE 3 SENSOR	31
FREESTYLE LIBRE 14 DAY READER	31
FREESTYLE LIBRE 14 DAY SENSOR	31
FREESTYLE LIBRE READER	31
FREESTYLE PRECISION NEO SYSTEM	31
FREESTYLE PRECISION NEO TEST	31
FREESTYLE TEST	31
FROVA	15
frovatriptan succinate	15
FUROSCIX	21
furosemide oral	21
fyavolv	41
FYCOMPA ORAL SUSPENSION	12
FYCOMPA ORAL TABLET	12
FYREMADEL	49

G

gabapentin (once-daily)	25
gabapentin oral capsule	12
gabapentin oral solution 250 mg/5ml	12
GABAPENTIN ORAL TABLET 25 MG, 50 MG	12
gabapentin oral tablet 600 mg, 800 mg	12
galantamine hydrobromide er	13
ganirelix acetate	49
ganirelix acetate solution prefilled syringe 250 mcg/0.5ml subcutaneous	49

ganirelix acetate solution prefilled syringe 250 mcg/0.5ml subcutaneous	49
GARDASIL 9 INTRAMUSCULAR SUSPENSION PREFILLED SYRINGE	48
GASTROCROM	38
gatifloxacin ophthalmic	50
gavilyte-c	38
gavilyte-g	38
gavilyte-n with flavor pack	38
GAVRETO	16
gemfibrozil oral	21
gemmily	41
GEMTESA	39
GENERESS FE ORAL TABLET CHEWABLE 0.8-25 MG-MCG	41
generlac	38
gengraf oral capsule	46
gentamicin sulfate external	10
gentamicin sulfate ophthalmic	50
GENVOYA	18
GEODON ORAL	18
GILENYA ORAL CAPSULE 0.5 MG	24
GILENYA ORAL CAPSULE 0.25 MG	24
GIMOTI	14
glatiramer acetate	24
glatopa	24
GLEEVEC	16
glimepiride	34
glipizide er	34
glipizide-metformin hcl	34
glipizide oral tablet 2.5 mg	34
glipizide oral tablet 10 mg, 5 mg	34
glipizide xl	34
GLUCAGON EMERGENCY KIT	34
glucagon emergency kit 1 mg injection	34
GLUCAGON EMERGENCY KIT 1 MG INJECTION	34
GLUCOCARD EXPRESSION TEST	31
GLUCOCARD SHINE TEST	31

GLUCOCARD VITAL TEST	31
GLUCOTROL XL	34
GLUMETZA	34
glyburide-metformin	34
glyburide micronized	34
glyburide oral	34
GLYCATE	38
glycopyrrolate oral solution	38
GLYCOPYRROLATE ORAL TABLET 1.5 MG	38
glycopyrrolate oral tablet 1 mg, 2 mg	38
glydo	8
GLYNASE ORAL TABLET 1.5 MG	34
GLYNASE ORAL TABLET 3 MG, 6 MG	34
GLYXAMBI	34
GOLYTELY	38
GONAL-F	49
GONAL-F RFF	49
GONAL-F RFF REDIJECT	49
GRALISE ORAL TABLET	25
granisetron hcl oral	14
GRASTEK	46
griseofulvin microsize oral	14
griseofulvin ultramicrosize	14
guanfacine hcl	21
guanfacine hcl er	24
GUARDIAN 4 GLUCOSE SENSOR	31
GUARDIAN 4 TRANSMITTER	31
GUARDIAN CONNECT TRANSMITTER	31
GUARDIAN LINK 3 TRANSMITTER	31
GUARDIAN REAL-TIME REPLACE PED	31
GUARDIAN SENSOR (3)	31
GUARDIAN SENSOR 3	31
GVOKE HYPOPEN 1-PACK	31
GVOKE HYPOPEN 2-PACK	31
GVOKE KIT	31
GVOKE PFS	31
GYNAZOLE-1	14

H

HADLIMA	46	HUMALOG MIX 75/25 KWIKPEN ..	33	HYDREA.....	16
HAEGARDA	46	HUMALOG MIX 75/25 VIAL	33	hydrochlorothiazide oral.....	21
hailey 1.5/30.....	41	HUMALOG SUBCUTANEOUS.....	33	hydrocodone-acetaminophen	
hailey 24 fe	41	HUMALOG TEMPO PEN.....	33	oral solution 7.5-325 mg/15ml....	8
hailey fe 1.5/30.....	41	HUMALOG U-100 JUNIOR KWIKPEN	33	hydrocodone-acetaminophen	
hailey fe 1/20	42	HUMATE-P.....	35	oral tablet 10-300 mg,	
HALCION	19	HUMIRA (2 PEN) PEN-INJECTOR	46	5-300 mg, 7.5-300 mg.....	8
halobetasol propionate external		KIT 40 MG/0.4ML SUBCUTANEOUS	46	hydrocodone-acetaminophen	
cream.....	28	HUMIRA (2 PEN) PEN-INJECTOR	46	oral tablet 10-325 mg, 5-325 mg,	
halobetasol propionate external		KIT 80 MG/0.8ML SUBCUTANEOUS	46	7.5-325 mg	8
ointment.....	28	HUMIRA (2 PEN) SUBCUTANEOUS	47	hydrocodone bit-homatrop mbr	
haloette.....	42	PEN-INJECTOR KIT 40 MG/0.8ML.	47	oral solution.....	53
haloperidol oral.....	18	HUMIRA (2 SYRINGE) PREFILLED	47	hydrocodone-ibuprofen	8
HARVONI ORAL TABLET.....	18	SYRINGE KIT	47	hydrocod poli-chlorphe poli er ..	53
HAVRIX.....	48	10 MG/0.1ML SUBCUTANEOUS ...	47	hydrocortisone ace-pramoxine	
HEALTHPRO BLOOD GLUCOSE		HUMIRA (2 SYRINGE) PREFILLED	47	external cream 1-1 %	49
MONITO.....	31	SYRINGE KIT	47	hydrocortisone ace-pramoxine	
heather	42	20 MG/0.2ML SUBCUTANEOUS ..	47	external cream 2.5-1 %	28
HEMADY.....	44	HUMIRA (2 SYRINGE) PREFILLED	47	hydrocortisone acetate rectal ...	49
HEMANGEOL.....	21	SYRINGE KIT	47	hydrocortisone-acetic acid.....	52
HEMLIBRA SUBCUTANEOUS		40 MG/0.4ML SUBCUTANEOUS ...	47	hydrocortisone butyrate external	
SOLUTION 12 MG/0.4ML	35	HUMIRA (2 SYRINGE)	47	cream.....	28
HEMLIBRA SUBCUTANEOUS		SUBCUTANEOUS PREFILLED	47	hydrocortisone external cream 1	
SOLUTION 105 MG/0.7ML,		SYRINGE KIT 40 MG/0.8ML.....	47	%.....	28
150 MG/ML, 30 MG/ML,		HUMIRA-CD/UC/HS STARTER....	47	hydrocortisone external cream	
300 MG/2ML, 60 MG/0.4ML	35	HUMIRA-PED<40KG CROHNS	47	2.5 %	28
HEMMOREX-HC	49	STARTER	47	hydrocortisone external lotion	
HEMOPIL M	35	HUMIRA-PED>=40KG CROHNS	47	2 %, 2.5 %	28
heparin sodium (porcine)		START.....	47	hydrocortisone external	
injection solution	35	HUMIRA-PSORIASIS/UEVIT	47	ointment 1 %, 2.5 %.....	28
heparin sodium (porcine) pf.....	35	STARTER	47	hydrocortisone lotion 2%	28
HEPLISAV-B.....	48	HUMIRA-PS/UV/ADOL HS	47	hydrocortisone oral	44
HIDEX 6-DAY	44	STARTER SUBCUTANEOUS PEN-	47	hydrocortisone (perianal)	
HIPREX.....	10	INJECTOR KIT 40 MG/0.8ML	47	external cream 1 %.....	49
HORIZANT.....	25	HUMULIN 70/30 KWIKPEN.....	33	hydrocortisone (perianal)	
HULIO (2 PEN)	46	HUMULIN 70/30 VIAL	33	external cream 2.5 %	49
HULIO (2 SYRINGE)	46	HUMULIN N KWIKPEN	33	hydrocortisone rectal	49
HUMALOG INJECTION	32	HUMULIN N VIAL	33	hydrocortisone valerate external	
HUMALOG KWIKPEN.....	32	HUMULIN R U-500 KWIKPEN.....	33	cream.....	28
HUMALOG MIX 50/50 KWIKPEN ..	32	HUMULIN R U-500 VIAL	33	hydrocortisone valerate external	
HUMALOG MIX 50/50 VIAL	33	HUMULIN R VIAL	33	ointment.....	28
		HYCODAN ORAL SOLUTION	53	hydrocort-pramoxine (perianal) .	49
		hydralazine hcl oral	21	hydromet	53
				hydromorphone hcl oral tablet ...	8
				hydroxychloroquine sulfate oral .	17

HYDROXYM EXTERNAL CREAM... 28	icosapent ethyl 21	INLYTA 16
hydroxyurea oral..... 16	IDACIO (2 PEN) 47	INPEN 100-BLUE-LILLY-HUMALOG DEVICE..... 31
hydroxyzine hcl oral 19	IDACIO (2 SYRINGE)..... 47	INPEN 100-BLUE-LILLY-HUMALOG DEVICE..... 31
hydroxyzine pamoate oral 19	IDACIO-CROHNS/UC STARTER ... 47	INPEN 100-BLUE-NOVOLOG- FIASP DEVICE..... 31
HYFTOR 47	IDACIO-PSORIASIS STARTER..... 47	INPEN 100-BLUE-NOVOLOG- FIASP DEVICE..... 31
hyoscyamine sulfate er 38	IDELVION..... 35	INPEN 100-GREY-LILLY-HUMALOG DEVICE..... 31
hyoscyamine sulfate oral tablet. . 38	IDHIFA 16	INPEN 100-GREY-LILLY-HUMALOG DEVICE..... 31
hyoscyamine sulfate oral tablet dispersible 38	ILEVRO..... 50	INPEN 100-GREY-NOVOLOG- FIASP DEVICE..... 31
hyoscyamine sulfate sublingual. . 38	imatinib mesylate 16	INPEN 100-GREY-NOVOLOG- FIASP DEVICE..... 31
HYPERSAL..... 53	IMBRUVICA ORAL CAPSULE 16	INPEN 100-GREY-NOVOLOG- FIASP DEVICE..... 31
HYRIMOZ-CROHNS/UC STARTER . 47	IMBRUVICA ORAL TABLET 140 MG, 280 MG 16	INPEN 100-GREY-NOVOLOG- FIASP DEVICE..... 31
HYRIMOZ-PED<40KG CROHN STARTER 47	IMBRUVICA ORAL TABLET 420 MG..... 16	INPEN 100-GREY-NOVOLOG- FIASP DEVICE..... 31
HYRIMOZ-PED>/=40KG CROHN START..... 47	imipramine hcl oral 13	INPEN 100-GREY-NOVOLOG- FIASP DEVICE..... 31
HYRIMOZ-PLAQUE PSORIASIS START..... 47	imiquimod external cream 3.75 % 28	INPEN 100-PINK-LILLY-HUMALOG DEVICE..... 31
HYRIMOZ SUBCUTANEOUS SOLUTION AUTO-INJECTOR 40 MG/0.4ML..... 47	imiquimod external cream 5 % .. 28	INPEN 100-PINK-LILLY-HUMALOG DEVICE..... 31
HYRIMOZ SUBCUTANEOUS SOLUTION AUTO-INJECTOR 40 MG/0.8ML, 80 MG/0.8ML..... 47	imiquimod pump 28	INPEN 100-PINK-NOVOLOG- FIASP DEVICE..... 31
HYRIMOZ SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 10 MG/0.1 ML, 20 MG/0.2ML, 40 MG/0.4ML..... 47	IMITREX NASAL SOLUTION 20 MG/ACT, 5 MG/ACT..... 15	INPEN 100-PINK-NOVOLOG- FIASP DEVICE..... 31
HYRIMOZ SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 40 MG/0.8ML..... 47	IMITREX ORAL 15	INSPIREASE 54
HYZAAR..... 21	IMITREX STATDOSE REFILL 15	INSPRA..... 21
	IMITREX STATDOSE SYSTEM..... 15	INSULIN ASPART 33
	IMPOYZ 28	INSULIN ASPART FLEXPEN 33
	IMURAN 47	INSULIN DEGLUDEC FLEXTOUCH. 33
	IMVEXXY MAINTENANCE PACK... 35	INSULIN GLARGINE..... 33
	IMVEXXY STARTER PACK 35	INSULIN GLARGINE MAX SOLOSTAR..... 33
	INBRIJA 17	INSULIN GLARGINE SOLOSTAR .. 33
	incassia 42	INSULIN GLARGINE-YFGN SUBCUTANEOUS SOLUTION PEN- INJECTOR 33
	indapamide 21	INSULIN LISPRO..... 33
	INDERAL LA..... 21	INSULIN LISPRO (1 UNIT DIAL) ... 33
	indomethacin er 9	INSULIN LISPRO JUNIOR KWIKPEN33
	indomethacin oral capsule..... 9	INSULIN LISPRO PROT & LISPRO . 33
	INGREZZA ORAL CAPSULE 40 MG, 80 MG 25	INSULIN PEN NEEDLES 29G X 12MM , 30G X 5 MM , 31G X 5 MM , 31G X 8 MM , 32G X 4 MM 31
	INGREZZA ORAL CAPSULE 60 MG 25	
	INGREZZA ORAL CAPSULE SPRINKLE 25	
	INGREZZA ORAL CAPSULE THERAPY PACK 25	

I

ibandronate sodium oral..... 50
IBRANCE 16
ibuprofen oral suspension 100 mg/5ml 9
ibuprofen oral tablet 400 mg, 600 mg, 800 mg..... 9
iclevia..... 42
ICLUSIG ORAL TABLET 10 MG, 30 MG..... 16
ICLUSIG ORAL TABLET 15 MG, 45 MG..... 16

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	31
INTELENCE ORAL TABLET 25 MG	18
INTELENCE ORAL TABLET 100 MG, 200 MG	18
INTRAROSA	35
introvale	42
INTUNIV	24
INVEGA	18
INVELTYS	50
INVOKAMET XR	34
INVOKANA	34
IPOL	48
ipratropium-albuterol	54
ipratropium bromide inhalation	54
ipratropium bromide nasal	53
irbesartan	21
irbesartan-hydrochlorothiazide	21
ISENTRESS HD	18
ISENTRESS ORAL TABLET	18
isibloom	42
isoniazid oral tablet	15
ISOPTO ATROPINE OPHTHALMIC SOLUTION 1 %	52
ISORDIL TITRADOSE	21
isosorb dinitrate-hydralazine	21
isosorbide dinitrate oral tablet 10 mg, 20 mg, 30 mg, 5 mg	21
isosorbide dinitrate oral tablet 40 mg	21
isosorbide mononitrate	21
isosorbide mononitrate er	21
isotretinoin oral capsule 10 mg, 20 mg, 30 mg, 40 mg	28
isotretinoin oral capsule 25 mg, 35 mg	28
ISTALOL	51
itraconazole oral capsule	14

ivabradine	21
ivermectin external cream	28
ivermectin oral	17
IYUZEH	51

J

JADENU	36
jaimiess	42
JAKAFI	16
JALYN ORAL CAPSULE 0.5-0.4 MG	40
jantoven	11
JANUMET	34
JANUMET XR	34
JANUVIA	34
JARDIANCE	34
jasmiel	42
JATENZO	45
JAVYGTOR ORAL PACKET	39
jencycla	42
JENTADUETO	34
JENTADUETO XR	34
jinteli	42
jolessa	42
JORNAY PM	24
joyeaux	42
JUBLIA	14
juleber	42
JULUCA	18
junel 1.5/30	42
junel 1/20	42
junel fe 1.5/30	42
junel fe 1/20	42
junel fe 24	42
JUST RIGHT 5000	25
JYLAMVO	47
JYNARQUE ORAL TABLET THERAPY PACK 15 MG, 45 & 15 MG, 60 & 30 MG, 90 & 30 MG	39
JYNARQUE ORAL TABLET THERAPY PACK 30 & 15 MG	39

K

kaitlib fe	42
kalliga	42
KAPSPARGO SPRINKLE	21
kariva	42
kelnor 1/35	42
kelnor 1/50	42
KEPPRA ORAL	12
KEPPRA XR	12
KERENDIA	21
KESIMPTA	24
ketoconazole external cream	14
ketoconazole external shampoo	14
ketoconazole oral	14
ketorolac tromethamine ophthalmic	50
ketorolac tromethamine oral	9
KEVZARA SUBCUTANEOUS SOLUTION AUTO-INJECTOR	47
KINERET	47
KISQALI ORAL TABLET THERAPY PACK 200 MG	16
KITABIS PAK	55
KLARITY-A	50
KLARITY-C DROPS	52
KLARON	28
klayesta	14
KLISYRI	28
KLONOPIN	19
klor-con	36
klor-con 10	36
klor-con m10	36
klor-con m15	36
klor-con m20	36
KLOXXADO	9
KOATE	35
KOATE-DVI	35
KOGENATE FS	35
KOMBIGLYZE XR ORAL TABLET EXTENDED RELEASE 24 HOUR 2.5-1000 MG, 5-1000 MG, 5-500 MG	34

KOSELUGO	16	LANTUS U-100 VIAL.....	33	levonest.....	42
kosher prenatal plus iron	36	larin 1.5/30	42	levonorgest-eth est & eth est ...	42
KOURZEQ	25	larin 1/20.....	42	levonorgest-eth estrad 91-day	
KOVALTRY	35	larin 24 fe.....	42	oral tablet 0.1-0.02 & 0.01 mg,	
K-PHOS-NEUTRAL.....	36	larin fe 1.5/30.....	42	0.15-0.03 & 0.01 mg	42
KRINTAFEL	17	larin fe 1/20.....	42	levonorgest-eth estrad 91-day	
KRISTALOSE	38	larissia oral tablet 0.1-20 mg-mcg	42	oral tablet 0.15-0.03 mg.....	42
K-TAB	36	LASIX	21	levonorgest-eth estradiol-iron...	42
kurvelo	42	latanoprost ophthalmic.....	51	levonorgestrel-ethinyl estrad	
KUVAN ORAL PACKET.....	39	LATUDA	18	oral tablet 0.1-20 mg-mcg,	
KYZATREX.....	45	layolis fe	42	0.15-30 mg-mcg.....	42
		LEDIPASVIR-SOFOSBUVIR.....	18	levonorgestrel-ethinyl estrad	
		leena	42	oral tablet 90-20 mcg.....	42
		leflunomide oral	47	levonorg-eth estrad triphasic...	42
		lenalidomide	16	levora 0.15/30 (28).....	42
		LENVIMA ORAL CAPSULE		levo-t	45
		THERAPY PACK 10 & 4 MG,		LEVOTHYROXINE SODIUM ORAL	
		10 MG, 10 MG & 2 X 4 MG,		CAPSULE	45
		2 X 10 MG, 2 X 10 MG & 4 MG,		levothyroxine sodium oral tablet	45
		2 X 4 MG, 3 X 4 MG, 4 MG.....	16	levoxyl.....	45
		lessina	42	LEVSIN.....	38
		LETAIRIS	55	LEVSIN/SL	38
		letrozole oral	16	LEXAPRO.....	13
		leucovorin calcium oral	16	LIALDA	49
		leuprolide acetate injection	44	LIBRAX.....	38
		levabuterol hcl inhalation	54	lidocaine external ointment 5 % ..	8
		LEVABUTEROL HFA INHALATION		lidocaine external patch 5 %	8
		AEROSOL 45 MCG/ACT	54	lidocaine hcl mouth/throat.....	25
		LEVBID.....	38	lidocaine hcl urethral/mucosal ...	8
		LEVEMIR FLEXPEN.....	33	lidocaine-prilocaine external cream	8
		LEVEMIR U-100 FLEXTOUCH		lidocaine viscous hcl	25
		SUBCUTANEOUS SOLUTION PEN-		LIDOCAN	8
		INJECTOR 100 UNIT/ML	33	LIDODERM.....	8
		levetiracetam er	12	LIKMEZ.....	11
		levetiracetam oral.....	12	lillow oral tablet 0.15-30 mg-mcg	42
		levocarnitine oral solution	36	linezolid oral tablet.....	11
		levocarnitine oral tablet	39	LINZESS.....	38
		levocarnitine sf	36	liothyronine sodium oral.....	45
		levocetirizine dihydrochloride		LIPITOR	22
		oral solution.....	53	LIPOFEN	22
		levocetirizine dihydrochloride		LIRAGLUTIDE PEN-INJECTOR	
		oral tablet.....	53	18MG/3ML.....	34
		levofloxacin oral tablet	10		

L

LIRAGLUTIDE PEN-INJECTOR 18MG/3ML.....	34	LOTEMAX OPHTHALMIC GEL.....	50	MALARONE.....	17
lisdexamfetamine dimesylate ...	24	LOTEMAX OPHTHALMIC OINTMENT50		MARINOL 2.5 MG	14
lisinopril-hydrochlorothiazide ...	22	LOTEMAX OPHTHALMIC SUSPENSION	50	marlissa.....	42
lisinopril oral	22	LOTEMAX SM	50	matzim la	22
LITFULO.....	47	LOTENSIN	22	MAVENCLAD.....	24
lithium carbonate er.....	19	LOTENSIN HCT.....	22	MAVYRET.....	18
lithium carbonate oral.....	19	loteprednol etabonate ophthalmic gel.....	50	MAXALT	15
LITHOBID.....	19	loteprednol etabonate ophthalmic suspension	50	MAXALT-MLT.....	15
LIVALO	22	LOTREL	22	MAXITROL	50
LODINE	9	LOTRONEX	38	MAXZIDE-25 ORAL TABLET 37.5-25 MG	22
LODOCO	22	lovastatin oral	22	MAXZIDE ORAL TABLET 75-50 MG	22
LOESTRIN 1.5/30 (21).....	42	LOVAZA	22	MAYZENT ORAL TABLET 0.25 MG, 2 MG.....	24
LOESTRIN 1/20 (21).....	42	LOVENOX INJECTION SOLUTION PREFILLED SYRINGE	11	MAYZENT ORAL TABLET 1 MG....	25
LOESTRIN FE 1.5/30	42	low-ogestrel.....	42	MAYZENT STARTER PACK ORAL TABLET THERAPY PACK 7 X 0.25 MG	25
LOESTRIN FE 1/20.....	42	loxapine succinate	18	MAYZENT STARTER PACK ORAL TABLET THERAPY PACK 12 X 0.25 MG	25
LOFENA	9	lo-zumandimine	42	meclizine hcl oral tablet	14
lojaimiess	42	lubiprostone.....	38	MEDROL ORAL TABLET 2 MG....	44
LOKELMA.....	36	LUMAKRAS	16	MEDROL ORAL TABLET 16 MG, 4 MG, 8 MG	44
LO LOESTRIN FE	42	LUMIGAN.....	51	MEDROL ORAL TABLET THERAPY PACK.....	44
LOMOTIL	38	LUMRYZ.....	56	medroxyprogesterone acetate intramuscular.....	42
LONSURF.....	16	LUNESTA.....	56	medroxyprogesterone acetate oral	42
loperamide hcl oral capsule.....	38	LUPKYNIS	47	mefenamic acid oral.....	9
LOPID.....	22	lurasidone hcl	18	mefloquine hcl.....	17
LOPRESSOR	22	lutera	42	megestrol acetate oral suspension 40 mg/ml.....	45
LOPROX EXTERNAL CREAM 0.77 %	14	LYBALVI	18	megestrol acetate oral tablet....	42
LOPROX EXTERNAL SHAMPOO 1 %	14	lyleq	42	MEKINIST ORAL TABLET	16
LOPROX EXTERNAL SUSPENSION 0.77 %	28	lyllana	42	meloxicam oral tablet	9
lorazepam intensol.....	19	LYNPARZA.....	16	memantine hcl er	13
lorazepam oral concentrate 2 mg/ml.....	19	LYRICA ORAL CAPSULE	25	memantine hcl oral tablet.....	13
lorazepam oral tablet.....	19	LYUMJEV KWIKPEN.....	33	me/naphos/mb/hyo1	39
LORTAB ORAL ELIXIR 10-300 MG/15ML	8	LYUMJEV TEMPO PEN.....	33	MENOPUR.....	49
loryna.....	42	LYUMJEV VIAL	33	MENOSTAR	42
LORZONE	56	lyza.....	42		
losartan potassium-hctz.....	22				
losartan potassium oral	22				
LOSEASONIQUE ORAL TABLET 0.1-0.02 & 0.01 MG	42				

M

MACROBID	11
MACRODANTIN.....	11

MENQUADFI	48	methylphenidate hcl er (cd)	24	metronidazole external gel 0.75 %	28
MENVEO INTRAMUSCULAR SOLUTION RECONSTITUTED	48	methylphenidate hcl er (la) oral capsule extended release 24 hour 10 mg, 20 mg, 30 mg, 40 mg	24	metronidazole external gel 1 % ..	28
MEPRON	17	methylphenidate hcl er (la) oral capsule extended release 24 hour 60 mg	24	metronidazole external lotion ...	28
mercaptopurine oral	16	methylphenidate hcl er oral tablet extended release	24	metronidazole oral	11
merzee	42	methylphenidate hcl er oral tablet extended release 24 hour .	24	metronidazole vaginal	11
mesalamine-cleanser	49	methylphenidate hcl er (osm) oral tablet extended release 18 mg, 27 mg, 36 mg, 54 mg	24	mexiletine hcl oral	22
mesalamine er	49	METHYLPHENIDATE HCL ER (OSM) ORAL TABLET EXTENDED RELEASE 45 MG, 63 MG	24	MIACALCIN	50
mesalamine oral tablet delayed release 1.2 gm	49	methylphenidate hcl er (osm) oral tablet extended release 72 mg	24	mibelas 24 fe	42
mesalamine oral tablet delayed release 800 mg	49	methylphenidate hcl er (xr)	24	MICARDIS	22
mesalamine rectal enema	49	methylphenidate hcl oral solution	24	MICARDIS HCT	22
mesalamine rectal suppository ..	49	methylphenidate hcl oral tablet .	24	MICROCHAMBER	54
MESTINON ORAL TABLET	15	methylphenidate hcl oral tablet chewable	24	MICRODOT TEST	31
MESTINON ORAL TABLET EXTENDED RELEASE	15	methylprednisolone oral	44	microgestin 1.5/30	42
metaxalone	56	metoclopramide hcl oral solution	14	microgestin 1/20	42
metformin hcl er	34	metoclopramide hcl oral tablet ..	14	microgestin 24 fe	42
metformin hcl er (mod)	34	metolazone	22	microgestin fe 1.5/30	42
metformin hcl er (osm)	34	metoprolol-hydrochlorothiazide .	22	microgestin fe 1/20	42
metformin hcl oral solution	34	metoprolol succinate er oral tablet extended release 24 hour 25 mg	22	midodrine hcl	22
metformin hcl oral tablet 625 mg	34	metoprolol succinate er oral tablet extended release 24 hour 100 mg, 200 mg, 50 mg	22	MIEBO	52
metformin hcl oral tablet 1000 mg, 500 mg, 850 mg	34	metoprolol tartrate oral tablet 37.5 mg, 75 mg	22	mili	42
methadone hcl oral tablet	8	metoprolol tartrate oral tablet 100 mg, 25 mg, 50 mg	22	mimvey	42
methazolamide oral	51	METROCREAM	28	MINASTRIN 24 FE ORAL TABLET CHEWABLE 1-20 MG-MCG(24)	42
methenamine hippurate	11	METROGEL	28	MINILINK REAL-TIME TRANSMITTER	31
METHERGINE	45	METROLOTION	28	MINIMED 630G GUARDIAN PRESS	31
methimazole oral	45	metronidazole external cream ...	28	MINIPRESS ORAL CAPSULE 1 MG, 2 MG, 5 MG	22
methocarbamol oral tablet 500 mg, 750 mg	56			MINIVELLE	43
methocarbamol oral tablet 1000 mg	56			minocycline hcl oral capsule	11
methotrexate sodium injection solution	47			minocycline hcl oral tablet	11
methotrexate sodium oral	47			minoxidil oral	22
methotrexate sodium (pf)	47			mirabegron er	39
methscopolamine bromide oral .	38			MIRAPEX ER	17
methylergonovine maleate oral .	45			MIRCETTE ORAL TABLET 0.15-0.02/0.01 MG (21/5)	43
METHYLIN	24			mirtazapine oral	13
methylphenidate	24			MIRVASO	28
				misoprostol oral	37
				MITIGARE	15
				MM BLOOD GLUCOSE SYSTEM ...	31

MM BLOOD GLUCOSE SYSTEM REFILL	31	multivitamin/fluoride tablet chewable 0.25 mg oral (rx)	36	naftifine hcl external gel	28
MM BLULINK GLUCOSE TEST	31	MULTIVITAMIN/FLUORIDE TABLET CHEWABLE 0.25 MG ORAL (RX)	36	NAFTIN	28
MM EASY TOUCH GLUCOSE METER32		multivitamin/fluoride tablet chewable 1 mg oral (rx)	36	NALOCET.....	8
M-M-R II.....	48	MULTIVITAMIN/FLUORIDE TABLET CHEWABLE 1 MG ORAL (RX).....	36	naloxone hcl injection solution prefilled syringe 2 mg/2ml	9
M-NATAL PLUS.....	36	multivitamin w/fluoride tablet chewable 0.5 mg oral.....	36	naloxone hcl nasal	9
modafinil oral.....	56	multivitamin w/fluoride tablet chewable 0.5 mg oral.....	36	naltrexone hcl oral	9
MODERNA COVID-19 VAC 6M-11Y .	48	multivitamin w/fluoride tablet chewable 0.25 mg oral.....	36	NAMENDA ORAL TABLET 10 MG, 5 MG.....	13
moexipril hcl	22	multivitamin w/fluoride tablet chewable 1 mg oral.....	36	NAMENDA TITRATION PAK	13
mometasone furoate external... .	28	MULTI-VIT-FLOR.....	36	NAMENDA XR	13
mometasone furoate nasal.....	53	mupirocin calcium	11	NAPROSYN ORAL TABLET	9
MONDOXYNE NL	11	mupirocin external.....	11	naproxen dr	9
MONOJECT HYPODERMIC NEEDLE 18G X 1"	32	MYAMBUTOL.....	15	naproxen oral tablet.....	9
mono-linyah.....	43	MYCOBUTIN	16	naproxen oral tablet delayed release.....	9
montelukast sodium oral packet.	54	mycophenolate mofetil oral.....	47	naproxen sodium oral tablet 275 mg, 550 mg	9
montelukast sodium oral tablet .	54	mycophenolate sodium.....	47	naratriptan hcl.....	15
montelukast sodium oral tablet chewable.....	54	mycophenolic acid	47	NARCAN.....	9
MONUROL ORAL PACKET 3 GM ..	11	MYDAYIS	24	NASCOBAL	36
morphine sulfate (concentrate) ...	8	MYFEMBREE	43	na sulfate-k sulfate-mg sulf	38
morphine sulfate er oral tablet extended release.....	8	MYFORTIC	47	NATALVIT.....	36
morphine sulfate oral.....	8	MYRBETRIQ ORAL TABLET EXTENDED RELEASE 24 HOUR ...	39	NATAZIA.....	43
MOTEGRITY.....	38	MYSOLINE	12	nateglinide	34
MOTPOLY XR.....	12			NATESTO.....	45
MOUNJARO.....	34			NATROBA.....	28
MOVANTI.K.....	38			NAYZILAM	12
MOVIPREP.....	38			nebivolol hcl.....	22
moxifloxacin hcl (2x day).....	50			NEBUSAL INHALATION NEBULIZATION SOLUTION 3% ..	53
moxifloxacin hcl ophthalmic	50			necon 0.5/35 (28).....	43
moxifloxacin hcl oral	11			neomycin-bacitracin zn-polymyx	51
MS CONTIN	8			neomycin-polymyxin-dexameth ophthalmic ointment.....	50
MULPLETA.....	35			neomycin-polymyxin-dexameth ophthalmic suspension 3.5-10000-0.1.....	51
MULTAQ.....	22			neomycin-polymyxin-hc ophthalmic.....	51
multi-vitamin/fluoride.....	36			neomycin-polymyxin-hc otic	52
multivitamin/fluoride tablet chewable 0.5 mg oral (rx)	36			neomycin sulfate oral.....	11
MULTIVITAMIN/FLUORIDE TABLET CHEWABLE 0.5 MG ORAL (RX).....	36			NEONATAL COMPLETE	36
		N			
		nabumetone oral	9		
		nadolol oral	22		
		nafrinse drops oral solution 0.275 (0.125 f) mg/drop	36		
		NAFRINSE ORAL TABLET CHEWABLE 2.2 (1 F) MG	36		

NEONATAL PLUS	36	NIVA-PLUS.....	36	NOVOEIGHT	35
NEO-POLYCIN.....	51	NIVA THYROID	45	NOVOFINE AUTOCOVER PEN	
NEORAL ORAL CAPSULE	47	NOCDURNA.....	45	NEEDLE 30G X 8 MM	32
NERLYNX	16	nora-be	43	NOVOFINE PEN NEEDLE.....	32
neuac.....	28	NORDITROPIN FLEXPEN	45	NOVOFINE PLUS PEN NEEDLE ...	32
NEULASTA.....	35	norelgestromin-eth estradiol....	43	NOVOLIN 70/30 FLEXPEN.....	33
NEUPRO.....	17	norethin ace-eth estrad-fe oral		NOVOLIN 70/30 FLEXPEN RELION	33
NEURONTIN	12	capsule	43	NOVOLIN 70/30 RELION	33
NEUTEK 2TEK TEST.....	32	norethin ace-eth estrad-fe oral		NOVOLIN 70/30 VIAL.....	33
NEVANAC.....	51	tablet	43	NOVOLIN N FLEXPEN	33
NEXIUM ORAL CAPSULE DELAYED		norethin ace-eth estrad-fe oral		NOVOLIN N FLEXPEN RELION	33
RELEASE	37	tablet chewable.....	43	NOVOLIN N RELION.....	33
NEXIUM ORAL PACKET.....	37	norethindrone acetate oral.....	43	NOVOLIN N VIAL.....	33
NEXLETOL.....	22	norethindrone acet-ethinyl est ..	43	NOVOLIN R FLEXPEN	33
NEXLIZET.....	22	norethindrone-eth estradiol	43	NOVOLIN R FLEXPEN RELION	33
NEXTSTELLIS	43	norethindrone oral	43	NOVOLIN R RELION.....	33
NGENLA.....	45	norethindron-ethinyl estrad-fe ..	43	NOVOLIN R VIAL.....	33
niacin er (antihyperlipidemic) ...	22	norethin-eth estradiol-fe oral		NOVOLOG FLEXPEN	33
NIASPAN ORAL TABLET		tablet chewable 0.4-35 mg-mcg .	43	NOVOLOG FLEXPEN RELION	33
EXTENDED RELEASE 1000 MG,		norethin-eth estradiol-fe oral		NOVOLOG RELION.....	33
500 MG, 750 MG.....	22	tablet chewable 0.8-25 mg-mcg .	43	NOVOLOG U-100 VIAL.....	33
NICOTROL.....	9	norgestimate-eth estradiol	43	NOVOPEN ECHO	32
nifedipine er	22	norgestimate-ethinyl		NOVOTWIST PEN NEEDLE	32
nifedipine er osmotic release....	22	estradiol triphasic oral tablet		NOXAFIL ORAL TABLET DELAYED	
nifedipine oral	22	0.18/0.215/0.25 mg-25 mcg.....	43	RELEASE	14
nikki	43	norgestimate-ethinyl		np thyroid.....	45
NINLARO	16	estradiol triphasic oral tablet		NUBEQA.....	16
nisoldipine er	22	0.18/0.215/0.25 mg-35 mcg.....	43	NUCALA SUBCUTANEOUS	
nitazoxanide oral.....	17	NORITATE	28	SOLUTION AUTO-INJECTOR.....	54
NITRO-BID.....	22	NORLIQVA	22	NUCALA SUBCUTANEOUS	
NITRO-DUR.....	22	norlyda	43	SOLUTION PREFILLED SYRINGE	
nitrofurantoin macrocrystal.....	11	norlyroc.....	43	40 MG/0.4ML.....	54
nitrofurantoin monohydrate		NORPRAMIN	13	NUCALA SUBCUTANEOUS	
macrocrystals	11	nortrel 0.5/35 (28)	43	SOLUTION PREFILLED SYRINGE	
nitrofurantoin oral suspension		nortrel 1/35 (21).....	43	100 MG/ML	54
25 mg/5ml.....	11	nortrel 1/35 (28).....	43	NUCYNTA.....	8
NITROFURANTOIN ORAL		nortrel 7/7/7	43	NUCYNTA ER.....	8
SUSPENSION 50 MG/5ML.....	11	nortriptyline hcl oral capsule....	13	NUEDEXTA	25
nitroglycerin rectal	22	NORVASC.....	22	NULEV	38
nitroglycerin sublingual.....	22	NORVIR ORAL TABLET	18	NUPLAZID ORAL CAPSULE	18
nitroglycerin transdermal.....	22	NOURIANZ	17	NURTEC ODT	15
NITROSTAT	22	NOVAREL.....	49	NUTROPIN AQ NUSPIN.....	45
		NOVAVAX COVID-19 VACCINE	48		

NUVARING.....	43	OLUMIANT ORAL TABLET 1 MG, 4 MG.....	47	ORACEA.....	28
NUVESSA.....	11	OLUMIANT ORAL TABLET 2 MG ..	47	ORACIT	36
NUVIGIL.....	56	OLUX EXTERNAL FOAM 0.05 %...	28	ORAL CITRATE	36
NUWIQ INTRAVENOUS KIT 1000 UNIT, 2000 UNIT, 250 UNIT, 2500 UNIT, 3000 UNIT, 4000 UNIT, 500 UNIT.....	35	OMECLAMOX-PAK	37	ORALONE	25
NUWIQ INTRAVENOUS KIT 1500 UNIT.....	35	omega-3-acid ethyl esters.....	22	ORAPRED ODT	44
NUZYRA ORAL	11	OMEPRAZOLE+SYRSPEND SF ALKA38		ORENCIA CLICKJECT.....	47
nyamyc	14	omeprazole oral capsule delayed release.....	37	ORENCIA SUBCUTANEOUS	47
nylia 1/35.....	43	OMNIPOD 5 G6 INTRO (GEN 5) ...	32	ORENITRAM	55
nylia 7/7/7.....	43	OMNIPOD 5 G6 PODS (GEN 5)	32	ORFADIN	39
nymyo	43	OMNIPOD 5 G7 INTRO (GEN 5) KIT	32	ORGOVYX	16
nystatin external.....	14	OMNIPOD 5 G7 PODS (GEN 5)	32	ORIAHNN.....	45
nystatin mouth/throat.....	14	OMNITROPE	45	ORILISSA.....	45
nystatin oral.....	14	OMVOH SUBCUTANEOUS SOLUTION AUTO-INJECTOR.....	47	orphenadrine citrate er.....	56
nystatin-triamcinolone	14	ON CALL EXPRESS BLOOD GLUCOSE.....	32	OSCIMIN	38
nystop	14	ON CALL EXPRESS MONITORING SYS	32	oseltamivir phosphate oral capsule	18
O					
OB COMPLETE	36	ondansetron hcl oral	14	oseltamivir phosphate oral suspension reconstituted	19
OCALIVA	38	ondansetron odt oral tablet dispersible 4 mg, 8 mg.....	14	OSPHERA	35
ocella	43	ONETOUCH DELICA PLUS LANCETS32		OTEZLA	47
OCUFLOX.....	51	ONETOUCH ULTRA 2 KIT W/DEVICE32		OTREXUP.....	47
ODACTRA	53	ONETOUCH ULTRASOFT LANCETS32		OVACE PLUS WASH EXTERNAL LIQUID	28
ODEFSEY.....	18	ONETOUCH ULTRA TEST	32	OVACE WASH	28
ODOMZO	16	ONETOUCH ULTRA TEST STRIPS. 32		OVIDREL	49
OFEV.....	55	ONETOUCH VERIO FLEX SYSTEM KIT	32	oxaprozin oral tablet	9
ofloxacin ophthalmic.....	51	ONETOUCH VERIO IQ SYSTEM KIT W/DEVICE	32	oxazepam	19
ofloxacin otic	52	ONETOUCH VERIO REFLECT KIT W/DEVICE	32	oxcarbazepine.....	12
olanzapine-fluoxetine hcl	13	ONETOUCH VERIO TEST STRIPS . 32		OXTELLAR XR.....	12
olanzapine oral tablet	18	ONE VITE WOMENS PLUS.....	36	oxybutynin chloride er.....	39
olanzapine oral tablet dispersible	18	ONEXTON	28	oxybutynin chloride oral tablet 2.5 mg	39
olmesartan-amlodipine-hctz....	22	ONFI	12	oxybutynin chloride oral tablet 5 mg.....	39
olmesartan medoxomil-hctz	22	ONGLYZA.....	34	OXYCODONE-ACETAMINOPHEN ORAL TABLET 10-300 MG, 2.5-300 MG, 5-300 MG, 7.5-300 MG	8
olmesartan medoxomil oral.....	22	opium.....	38	oxycodone-acetaminophen oral tablet 10-325 mg, 2.5-325 mg, 5-325 mg, 7.5-325 mg.....	8
olopatadine hcl nasal.....	53	OPSUMIT.....	55	OXYCODONE HCL ER.....	8
olopatadine hcl ophthalmic solution 0.1 %	51	OPTIUMEZ TEST	32	oxycodone hcl oral capsule	8
olopatadine hcl ophthalmic solution 0.2 %	51	OPZELURA	28		

oxycodone hcl oral solution	8
oxycodone hcl oral tablet 10 mg, 15 mg, 20 mg, 30 mg, 5 mg	8
OXYCONTIN.	8
oxymorphone hcl er	8
OZEMPIC	34

P

PACERONE ORAL TABLET 100 MG, 400 MG	22
PACERONE ORAL TABLET 200 MG	22
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	47
paliperidone er	18
PAMELOR.	13
PANCREAZE	39
PANRETIN	28
pantoprazole sodium oral tablet delayed release	37
PARADIGM REAL-TIME TRANSMITTER	32
paricalcitol oral	50
PARLODEL ORAL TABLET.	17
PARNATE	13
paroxetine hcl er	13
paroxetine hcl oral tablet	13
paroxetine mesylate.	13
PATANASE NASAL SOLUTION 0.6 %53	
PAXIL CR	13
PAXIL ORAL TABLET	13
PAXLOVID (150/100)	19
PAXLOVID (300/100)	19
pazopanib hcl.	16
PEDIAPRED.	44
peg-3350/electrolytes	38
peg-3350/electrolytes/ascorbat	38
peg 3350-kcl-na bicarb-nacl.	38
peg-kcl-nacl-nasulf-na asc-c.	38

penicillin v potassium	11
PENTASA	49
pentoxifylline er	22
PEPCID.	38
PERCOCET.	8
PERFOROMIST	54
PERIDEX.	25
perindopril erbumine.	22
periogard	25
permethrin external.	17
perphenazine oral.	14
PERTZYE	39
PFIZER COVID-19 VAC-TRIS 5-11Y	48
PFIZER COVID-19 VAC-TRIS 6M-4Y	48
phenazo oral tablet 200 mg	39
phenazopyridine hcl oral tablet 100 mg, 200 mg	39
phenobarbital oral	12
phenytek.	12
phenytoin infatabs	12
phenytoin oral tablet chewable.	12
phenytoin sodium extended	12
PHEXXI.	43
philith.	43
PHOSPHA 250 NEUTRAL	36
phosphorous	36
phospho-trin 250 neutral	36
PIFELTRO.	19
pilocarpine hcl ophthalmic.	51
pilocarpine hcl oral.	25
pimecrolimus.	28
pimozide	18
pimtrea	43
pindolol.	22
pioglitazone hcl.	34
pioglitazone hcl-metformin hcl.	34
PIP BLOOD GLUCOSE TEST STRIP	32
PIQRAY.	16
pirfenidone oral tablet 267 mg, 801 mg.	55

pirfenidone oral tablet 534 mg	55
piroxicam oral	9
pitavastatin calcium.	22
PLAQUENIL.	17
PLAVIX	18
PLEGRIDY INTRAMUSCULAR.	25
PLEGRIDY STARTER PACK	25
PLEGRIDY SUBCUTANEOUS.	25
PLENVU	38
PLEXION CLEANSER	28
PLEXION EXTERNAL CREAM	28
PNEUMOVAX 23	48
pnv-dha.	36
podofilox external solution.	28
POKONZA	36
POLYCIN.	51
polymyxin b-trimethoprim.	51
POLY-VI-FLOR.	36
POMALYST.	16
portia-28	43
posaconazole oral tablet delayed release	15
potassium chloride crys er	36
potassium chloride er	36
potassium chloride oral.	36
potassium citrate-citric acid	36
potassium citrate er	36
PRADAXA ORAL CAPSULE	11
PRALUENT	22
pramipexole dihydrochloride.	17
pramipexole dihydrochloride er	17
PRAMOSONE EXTERNAL CREAM	28
prasugrel hcl	18
pravastatin sodium.	22
prazosin hcl oral	22
PRECISION XTRA	32
PRECISION XTRA BLOOD GLUCOSE32	
PRECOSE ORAL TABLET 100 MG, 25 MG, 50 MG	34
PRED FORTE.	51
PRED MILD	51

prednisolone acetate ophthalmic 51	PREVIDENT 5000 ENAMEL PROTECT..... 37	PROMETHEGAN..... 14
PREDNISOLONE ACETATE P-F.... 51	PREVIDENT 5000 KIDS..... 25	PROMETRIUM..... 43
prednisolone oral solution..... 44	PREVIDENT 5000 ORTHO DEFENSE25	propafenone hcl..... 22
prednisolone sodium phosphate oral solution 10 mg/5ml, 25 mg/5ml, 6.7 (5 base) mg/5ml.. 44	PREVIDENT 5000 PLUS..... 25	propafenone hcl er..... 22
prednisolone sodium phosphate oral solution 15 mg/5ml..... 44	PREVIDENT 5000 SENSITIVE..... 37	propranolol hcl er..... 22
prednisolone sodium phosphate oral solution 20 mg/5ml..... 44	PREVIDENT DENTAL..... 25	propranolol hcl oral..... 22
prednisolone sodium phosphate oral tablet dispersible..... 44	PREVIDENT MOUTH/THROAT.... 37	propylthiouracil oral..... 45
prednisone oral..... 44	previfem oral tablet 0.25-35 mg-mcg..... 43	PROSCAR..... 40
pregabalin oral capsule..... 25	PREVNAR 20..... 48	PROTONIX ORAL TABLET DELAYED RELEASE..... 38
PREGNYL..... 49	PREVYMIS ORAL..... 19	protriptyline hcl..... 13
PREMARIN ORAL..... 43	PREZCOBIX..... 19	PROVENTIL HFA..... 54
PREMARIN VAGINAL..... 43	PREZISTA ORAL TABLET 150 MG, 75 MG..... 19	PROVERA..... 43
PREMIUM BLOOD GLUCOSE TEST 32	PREZISTA ORAL TABLET 600 MG, 800 MG..... 19	PROVIGIL..... 56
premium lidocaine..... 8	primidone oral tablet 125 mg. ... 12	PROZAC..... 13
PREMPHASE..... 43	primidone oral tablet 250 mg, 50 mg..... 12	pseudoephedrine-bromphen-dm 53
PREMPRO..... 43	PRISTIQ..... 13	PTS PANELS EGLU TEST..... 32
PRENA1 PEARL..... 36	probenecid..... 15	PULMICORT FLEXHALER..... 54
prenatal 19 oral tablet 29-1 mg .. 36	PROCARDIA XL..... 22	PULMICORT SUSPENSION..... 54
prenatal 19 oral tablet chewable. 36	PROCHAMBER VHC..... 54	PULMOSAL..... 53
prenatal oral tablet 27-1 mg..... 36	prochlorperazine..... 14	PULMOZYME..... 55
prenatal plus..... 36	prochlorperazine maleate oral .. 14	PYLERA..... 38
prenatal plus vitamin/mineral ... 36	PROCORT..... 49	PYRIDIDIUM..... 39
PRENATE DHA..... 36	PROCTOCORT..... 49	pyridostigmine bromide er..... 15
PRENATE ENHANCE..... 36	PROCTOFOAM HC..... 49	pyridostigmine bromide oral tablet 30 mg..... 15
PRENATE ESSENTIAL..... 36	procto-med hc..... 49	pyridostigmine bromide oral tablet 60 mg..... 15
PRENATE MINI..... 36	PROCTOSOL HC..... 49	
PRENATE PIXIE..... 36	PROCTOZONE-HC..... 49	
PRENATE RESTORE..... 36	progesterone intramuscular..... 43	
PRENATOL-M..... 36	progesterone oral..... 43	
PRENATRIX..... 37	PROGRAF ORAL CAPSULE..... 47	
PRENATRYL..... 37	PROLATE ORAL TABLET..... 8	
PREVACID..... 38	PROLENSA..... 51	
PREVACID SOLUTAB..... 38	PROMACTA ORAL TABLET..... 35	
prevalite..... 22	promethazine-codeine..... 53	
PREVIDENT 5000 BOOSTER PLUS 25	promethazine-dm..... 53	
PREVIDENT 5000 DRY MOUTH ... 25	promethazine hcl oral..... 14	
	promethazine hcl rectal..... 14	

Q

QELBREE..... 24
QNASL..... 54
QNASL CHILDRENS..... 54
QUARTETTE ORAL TABLET 42-21-21-7 DAYS..... 43
QUDEXY XR..... 12
QUESTRAN..... 22
QUESTRAN LIGHT..... 22
quetiapine fumarate..... 18
quetiapine fumarate er..... 18
QUFLORA PEDIATRIC..... 37

QUILLICHEW ER.....	24	RELPAK	15	RIOMET	34
QUILLIVANT XR.....	24	RELTONE.....	38	risedronate sodium oral tablet	
quinapril hcl.....	23	RELYVRIO	25	30 mg, 5 mg	50
QUINTET AC BLOOD GLUCOSE		REMERON	13	risedronate sodium oral tablet	
TEST.....	32	REMERON SOLTAB ORAL TABLET		150 mg, 35 mg	50
QUINTET BLOOD GLUCOSE TEST	32	DISPERSIBLE 15 MG,		RISPERDAL	18
QULIPTA	15	30 MG.....	13	risperidone.....	18
QUVIVIQ.....	56	REMODULIN	55	RITALIN	24
QVAR REDIHALER	54	REVELA ORAL TABLET	39	RITALIN LA	24
		repaglinide	34	ritonavir.....	19
		REPATHA.....	23	rivastigmine	13
		REPATHA PUSHTRONEX SYSTEM.	23	rivastigmine tartrate	13
		REPATHA SURECLICK	23	rivelsa	43
		RESTASIS.....	52	rizatriptan benzoate.....	15
		RESTASIS MULTIDOSE	52	ROBINUL	38
		RESTORIL	56	ROBINUL-FORTE	38
		RETACRIT INJECTION SOLUTION		ROCALTROL	50
		10000 UNIT/ML, 2000 UNIT/ML,		ROCKLATAN	51
		3000 UNIT/ML, 4000 UNIT/ML,		roflumilast	54
		40000 UNIT/ML	35	ropinirole hcl	17
		RETACRIT INJECTION SOLUTION		ropinirole hcl er.....	17
		20000 UNIT/ML.....	35	rosadan external cream 0.75 % ..	28
		RETEVMO ORAL CAPSULE		rosadan external gel 0.75 %	28
		40 MG.....	16	rosuvastatin calcium oral	23
		RETEVMO ORAL CAPSULE		ROWASA	49
		80 MG.....	16	roweepra.....	12
		RETIN-A.....	28	ROXICODONE.....	9
		RETIN-A MICRO GEL 0.04 %, 0.1 %.....	28	ROZEREM.....	56
		RETIN-A MICRO PUMP	28	ROZLYTREK ORAL CAPSULE	16
		REVATIO ORAL TABLET	55	ROZLYTREK ORAL PACKET	16
		REVLIMID.....	16	RUCONEST	48
		REXTOVY.....	9	rufinamide oral suspension	12
		REXULTI.....	18	rufinamide oral tablet	12
		REYVOW	15	RUKOBIA	19
		RHOFADE.....	28	RYBELSUS.....	34
		RHOPRESSA	51	RYTARY	17
		rifabutin	16	RYTHMOL SR ORAL CAPSULE	
		rifampin oral	16	EXTENDED RELEASE 12 HOUR	
		RIGHTEST GT333 GLUCOSE TEST	32	225 MG, 325 MG, 425 MG	23
		riluzole.....	25	ryvent	53
		RINVOQ	47		

R

rabeprazole sodium oral tablet					
delayed release	38				
RADICAVA ORS.....	25				
RADICAVA ORS STARTER KIT	25				
raloxifene hcl	50				
ramelteon.....	56				
ramipril	23				
ranolazine er	23				
RAPAFLO.....	40				
RAPAMUNE ORAL SOLUTION	47				
RAPAMUNE ORAL TABLET	47				
rasagiline mesylate oral	17				
RASUVO.....	47				
RAZADYNE ER ORAL CAPSULE					
EXTENDED RELEASE 24 HOUR					
16 MG, 24 MG, 8 MG.....	13				
REBIF	25				
REBIF TITRATION PACK	25				
reclipsen	43				
RECOMBINATE	35				
RECOMBIVAX HB	48				
RECTIV.....	23				
REGLAN	14				
RELAFEN DS	9				
RELEXXII	24				
RELION TRUE MET AIR GLUC					
METER	32				
RELION TRUE METRIX TEST STRIPS	32				
RELION ULTIMA GLUCOSE SYSTEM	32				
RELION ULTIMA TEST	32				

S

SABRIL ORAL PACKET 12

SAFYRAL 43

SALAGEN 25

SANDIMMUNE ORAL 48

SANTYL 28

SAPHRIS 18

sapropterin dihydrochloride oral packet 39

SAVELLA 25

saxagliptin hcl 34

saxagliptin-metformin er 34

scopolamine 14

SEASONIQUE ORAL TABLET 0.15-0.03 & 0.01 MG 43

selenium sulfide external lotion . 28

SEMGLEE (YFGN) SUBCUTANEOUS SOLUTION PEN-INJECTOR 33

SE-NATAL 19 37

SENSIPAR 50

SEREVENT DISKUS 54

SEROQUEL 18

SEROQUEL XR 18

SERTRALINE HCL ORAL CAPSULE 13

sertraline hcl oral concentrate. . . 13

sertraline hcl oral tablet 14

setlakin 43

sevelamer carbonate oral tablet . 39

sevelamer hcl 37

SEYSARA 11

sf 25

sf 5000 plus 25

SFROWASA 49

sharobel 43

SHARPS CONTAINER 32

SHINGRIX 48

sildenafil citrate oral tablet 20 mg 55

sildenafil citrate oral tablet 100 mg, 25 mg, 50 mg 35

SILENOR 56

silodosin 40

SILVADENE 11

silver sulfadiazine external 11

SIMBRINZA 51

SIMLANDI (1 PEN) 48

SIMLANDI (2 PEN) 48

simliya 43

simpesse 43

SIMPONI 48

simvastatin oral tablet 10 mg, 20 mg, 40 mg, 5 mg 23

simvastatin oral tablet 80 mg. . . 23

SINEMET 17

SINGULAIR ORAL PACKET 54

SINGULAIR ORAL TABLET 54

SINGULAIR ORAL TABLET CHEWABLE 54

sirolimus oral solution 48

sirolimus oral tablet 48

SITAVIG 19

SKYRIZI PEN 48

SKYRIZI SUBCUTANEOUS 48

SKYTROFA 45

SLYND 43

SOAAZ 23

sod citrate-citric acid oral solution 500-334 mg/5ml 37

sodium chloride inhalation 53

sodium fluoride 5000 enamel dental gel 1.1-5 % 37

sodium fluoride 5000 plus 25

sodium fluoride 5000 ppm 25

sodium fluoride 5000 ppm dental gel 1.1 % 25

sodium fluoride 5000 sensitive dental gel 1.1-5 % 37

sodium fluoride dental 26

sodium fluoride mouth/throat solution 0.2 % 37

sodium fluoride oral solution. . . 37

sodium fluoride oral tablet chewable 37

SODIUM OXYBATE SOLUTION 500 MG/ML ORAL 56

SODIUM OXYBATE SOLUTION 500 MG/ML ORAL 56

sodium sulfacetamide wash 28

SOFOSBUVIR-VELPATASVIR 19

solifenacin succinate 39

SOLIQUA 34

SOMA 56

SOMATULINE DEPOT 45

SOOLANTRA 28

sotalol hcl (af) 23

sotalol hcl oral 23

SOTYKTU 48

SOVUNA 17

SPIKEVAX INTRAMUSCULAR SUSPENSION 48

spinosad 28

SPIRIVA HANDIHALER 54

SPIRIVA RESPIMAT 54

spironolactone-hctz 23

spironolactone oral tablet 23

SPORANOX ORAL CAPSULE 15

SPORANOX PULSEPAK ORAL CAPSULE 100 MG 15

SPRAVATO (56 MG DOSE) 14

SPRAVATO (84 MG DOSE) 14

sprintec 28 43

SPRYCEL 16

SPS 37

sronyx 43

ssd 11

sss 10-5 external cream 28

STALEVO 50 ORAL TABLET 12.5-50-200 MG 17

STALEVO 75 ORAL TABLET 18.75-75-200 MG 17

STALEVO 100 ORAL TABLET 25-100-200 MG 17

STALEVO 125 ORAL TABLET 31.25-125-200 MG 17

STALEVO 150 17

STALEVO 200 ORAL TABLET 50-200-200 MG.....	17	sulfacetamide sod-sulfur wash external liquid 9-4.5 %.....	29	tacrolimus external	29
STEGLATRO	34	SULFACLEANSE 8/4.....	29	tacrolimus oral	48
STELARA SUBCUTANEOUS	48	sulfamethoxazole-trimethoprim oral.....	11	tadalafil oral.....	35
STENDRA.....	35	sulfasalazine oral	49	tadalafil (pah).....	55
STIOLTO RESPIMAT.....	54	sulfatrim pediatric	11	TADLIQ.....	55
STIVARGA	17	sulindac oral.....	9	TAFINLAR ORAL CAPSULE.....	17
STRATTERA.....	24	SUMADAN WASH	29	tafluprost (pf).....	51
STRENSIQ.....	39	sumatriptan-naproxen sodium ..	15	TAGRISSO	17
STRIBILD	19	sumatriptan nasal.....	15	TAKHZYRO	48
STRIVERDI RESPIMAT.....	54	sumatriptan succinate oral.....	15	TALTZ.....	48
STROMECTOL.....	17	sumatriptan succinate refill subcutaneous solution cartridge	15	TAMIFLU ORAL CAPSULE.....	19
SUBOXONE.....	9	sumatriptan succinate subcutaneous	15	TAMIFLU ORAL SUSPENSION RECONSTITUTED.....	19
subvenite	12	SUNOSI	56	tamoxifen citrate oral tablet 10 mg.....	17
SUCRAID	39	SUPREP BOWEL PREP KIT.....	38	tamoxifen citrate oral tablet 20 mg.....	17
sucralfate oral suspension	38	SUTAB	39	tamsulosin hcl.....	40
sucralfate oral tablet	38	syeda	43	TAPERDEX 6-DAY ORAL TABLET THERAPY PACK 1.5 MG.....	44
SUFLAVE	38	SYMBICORT.....	54	TAPERDEX 6-DAY ORAL TABLET THERAPY PACK 1.5 MG (21).....	44
SULAR	23	SYMBYAX.....	14	TAPERDEX 7-DAY	44
SULCONAZOLE NITRATE EXTERNAL CREAM.....	15	SYMFI.....	19	TAPERDEX 12-DAY	44
sulfacetamide-prednisolone	51	SYMFI LO	19	TARGADOX	11
sulfacetamide sodium (acne)....	28	SYMLINPEN 60	34	tarina 24 fe	43
sulfacetamide sodium external ..	28	SYMLINPEN 120	34	tarina fe 1/20 eq	43
sulfacetamide sodium ophthalmic solution.....	51	SYMPAZAN	12	tarina fe 1/20 oral tablet 1-20 mg-mcg.....	43
sulfacetamide sodium-sulfur external cream 9.8-4.8 %.....	29	SYMPROIC.....	39	TARON-C DHA.....	37
sulfacetamide sodium-sulfur external cream 10-2 %, 10-5 %...	29	SYMTUZA.....	19	TASIGNA	17
sulfacetamide sodium-sulfur external liquid 10-2 %, 9-4.5 %, 9.8-4.8 %.....	29	SYNALAR.....	29	TAVALISSE.....	35
sulfacetamide sodium-sulfur external liquid 10-5 %, 9-4 %	29	SYNALAR EXTERNAL SOLUTION 0.01 %	29	taysofy.....	43
sulfacetamide sodium-sulfur external suspension 8-4 %	29	SYNJARDY.....	34	TAYTULLA	43
sulfacetamide sodium-sulfur external suspension 10-5 %	29	SYNJARDY XR.....	34	tazarotene external cream	29
sulfacetamide sod-sulfur wash external liquid 9-4 %	29	SYNTHROID	45	TAZAROTENE EXTERNAL FOAM ..	29
				TAZORAC EXTERNAL CREAM	29
				TECFIDERA ORAL CAPSULE DELAYED RELEASE	25
				TECHLITE INSULIN SYRINGES ...	32
				TECHLITE PEN NEEDLES	32

T

TEGLUTIK	25	testosterone gel 20.25 mg/act (1.62%) transdermal.....	45	TOBI NEBULIZER	55
TEGRETOL ORAL TABLET.....	12	testosterone transdermal gel 1.62 %	45	TOBI PODHALER	55
TEGRETOL-XR.....	12	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%).....	45	TOBRADEX OPHTHALMIC OINTMENT	51
TEGSEDI.....	39	testosterone transdermal solution	45	TOBRADEX OPHTHALMIC SUSPENSION 0.3-0.1 %	51
TEKTURNA	23	tetracycline hcl oral capsule.....	11	TOBRADEX ST	51
telmisartan.....	23	TEZSPIRE SUBCUTANEOUS SOLUTION AUTO-INJECTOR.....	54	tobramycin-dexamethasone	51
telmisartan-hctz	23	THALITONE.....	23	tobramycin inhalation nebulization solution 300 mg/4ml	55
temazepam.....	56	theophylline er	54	tobramycin nebulization solution 300 mg/5ml inhalation.....	55
TEMODAR ORAL CAPSULE 250 MG.....	17	THIOLA	39	tobramycin nebulization solution 300 mg/5ml inhalation.....	55
TEMOVATE EXTERNAL CREAM 0.05 %.....	29	THIOLA EC.....	39	TOBRAMYCIN NEBULIZATION SOLUTION 300 MG/5ML INHALATION.....	55
temozolomide	17	THRIVITE RX.....	37	tobramycin ophthalmic.....	51
TEMPO REFILL	32	THYQUIDITY	45	TOLAK	29
TEMPO WELCOME	32	thyroid oral.....	45	TOLSURA.....	15
TENCON.....	9	tiadylt er	23	tolterodine tartrate	39
TENIVAC.....	49	TIAZAC.....	23	tolterodine tartrate er	39
tenofovir disoproxil fumarate....	19	TIKOSYN	23	TOPAMAX	12
TENORETIC 50	23	tilia fe.....	43	TOPAMAX SPRINKLE.....	12
TENORETIC 100	23	timolol maleate ocudose.....	51	TOPICORT EXTERNAL CREAM....	29
TENORMIN	23	timolol maleate (once-daily)	51	TOPICORT EXTERNAL OINTMENT	29
terazosin hcl.....	40	timolol maleate ophthalmic.....	51	topiramate er	12
terbinafine hcl oral	15	timolol maleate pf.....	51	topiramate oral	12
terconazole.....	15	TIMOPTIC OCUDOSE.....	51	TOPROL XL	23
teriflunomide	25	TIMOPTIC OPHTHALMIC SOLUTION 0.25 %, 0.5 %	51	torseמידe	23
teriparatide.....	50	TIMOPTIC-XE OPHTHALMIC GEL FORMING SOLUTION 0.25 %, 0.5 %	51	TOSYMRA	15
teriparatide (recombinant) subcutaneous solution pen- injector 600 mcg/2.4ml	50	tinidazole oral	11	TOUJEO MAX SOLOSTAR.....	33
TERIPARATIDE (RECOMBINANT) SUBCUTANEOUS SOLUTION PEN- INJECTOR 620 MCG/2.48ML	50	tiopronin oral tablet delayed release	39	TOUJEO SOLOSTAR	33
TESTIM.....	45	tiotropium bromide monohydrate	54	TOVIAZ.....	39
TESTOSTERONE CYPIONATE INJECTION	45	TIROSINT.....	45	TRACLEER 62.5 MG, 125 MG	55
testosterone cypionate intramuscular.....	45	TIROSINT-SOL	45	TRADJENTA.....	34
testosterone enanthate intramuscular.....	45	TIVICAY	19	tramadol-acetaminophen.....	9
testosterone gel 20.25 mg/act (1.62%) transdermal.....	45	tizanidine hcl oral capsule	56	tramadol hcl er	9
		tizanidine hcl oral tablet	56	tramadol hcl (er biphasic) oral tablet extended release 24 hour ..	9
		TLANDO.....	45	tramadol hcl oral tablet 50 mg....	9

tramadol hcl oral tablet 100 mg, 25 mg.	9	TRIDACAINE II.	9	TRUE METRIX METER KIT.	32
trandolapril	23	triderm	29	TRUE METRIX PRO BLOOD GLUCOSE32	
tranexamic acid oral.	35	TRIDESILON EXTERNAL CREAM		TRUETRACK TEST	32
TRANSDERM-SCOP	14	0.05 %	29	TRULANCE	39
tranylcypromine sulfate	14	tri-estarylla.	43	TRULICITY.	34
TRAVATAN Z	52	trihexyphenidyl hcl oral tablet. ...	17	TRUMENBA.	49
travoprost (bak free).	52	TRIJARDY XR.	34	TRUQAP.	17
trazodone hcl oral.	14	TRIKAFTA ORAL TABLET THERAPY		TRUSOPT OPHTHALMIC SOLUTION	
TRELEGY ELLIPTA	55	PACK.	55	2 %	52
TREMFYA	48	tri-legest fe.	43	TRUVADA ORAL TABLET	
treprostinil	55	TRILEPTAL.	12	100-150 MG, 133-200 MG,	
TRESIBA FLEXTOUCH.	33	tri-linyuh	44	167-250 MG.	19
tretinoin external cream	29	TRILIPIX	23	TRUVADA ORAL TABLET	
tretinoin external gel 0.01 %, 0.025 %	29	tri-lo-estarylla	44	200-300 MG.	19
tretinoin external gel 0.05 %	29	tri-lo-marzia	44	tulana oral tablet 0.35 mg.	44
tretinoin microsphere	29	tri-lo-mili.	44	turqoz	44
tretinoin microsphere pump	29	tri-lo-sprintec.	44	TWINRIX.	49
TREXALL	48	trimethoprim oral.	11	TWIRLA	44
TREXIMET	15	tri-mili	44	TWYNEO	29
TREZIX	9	TRINATAL RX 1	37	TYBLUME.	44
triamcinolone acetonide external		TRINATE.	37	tydemy	44
cream 0.5 %	29	TRINTELLIX.	14	TYMLOS	50
triamcinolone acetonide external		tri-nymyo	44	TYRVAYA	52
cream 0.025 %, 0.1 %	29	tri-sprintec	44	TYVASO	55
triamcinolone acetonide external		tritocin external ointment		TYVASO DPI INSTITUTIONAL KIT .	55
lotion	29	0.05 %	29	TYVASO DPI MAINTENANCE KIT. .	55
triamcinolone acetonide external		TRIUMEQ	19	TYVASO DPI TITRATION KIT	55
ointment 0.05 %	29	tri-vite/fluoride	37	TYVASO REFILL	55
triamcinolone acetonide external		trivora (28)	44	TYVASO STARTER	55
ointment 0.025 %, 0.1 %, 0.5 % ..	29	tri-vylibra	44		
triamcinolone acetonide mouth/		tri-vylibra lo	44		
throat.	26	TROKENDI XR	12		
triamcinolone in absorbbase	29	tropium chloride	39		
triamterene-hctz.	23	tropium chloride er.	39		
triamterene oral	23	TRUDHESA	15		
TRIANEX EXTERNAL OINTMENT		TRUE FOCUS BLOOD GLUCOSE			
0.05 %	29	STRIP	32		
triazolam.	19	TRUE METRIX AIR GLUCOSE METER			
TRIBENZOR.	23	KIT	32		
TRICARE	37	TRUE METRIX BLOOD GLUCOSE			
TRICOR.	23	TEST.	32		
		TRUE METRIX GO GLUCOSE METER32			

U

UBRELVY	15
UCERIS ORAL	49
UCERIS RECTAL	49
UDENYCA SUBCUTANEOUS	
SOLUTION AUTO-INJECTOR.	35
ULORIC	15
ULTRACET ORAL TABLET	
37.5-325 MG	9
ULTRAM ORAL TABLET 50 MG.	9
UNISTRIP1 GENERIC	32
unithroid	45

UPTRAVI ORAL.....	55	VASCEPA	23	VIGAMOX.....	51
urea external cream 20 %, 40 %, 45 %.....	29	VASERETIC	23	vigpoder	12
urea external cream 41 %, 47 %..	29	VASOTEC.....	23	VIIBRYD	14
UREMEZ-40.....	29	velivet	44	VIIBRYD STARTER PACK ORAL KIT 10 & 20 MG	14
UROCIT-K 5.....	37	VELPHORO	40	vilazodone hcl	14
UROCIT-K 10.....	37	VELTASSA	37	VIMPAT ORAL	12
UROCIT-K 15.....	37	VELTIN EXTERNAL GEL 1.2-0.025 %.....	29	VINATE ONE	37
UROGESIC-BLUE	40	VEMLIDY.....	19	viorele	44
UROXATRAL	40	VENCLEXTA.....	17	VIREAD ORAL TABLET 150 MG, 200 MG, 250 MG.....	19
URSO 250	39	venlafaxine hcl.....	14	VIREAD ORAL TABLET 300 MG ...	19
URSODIOL ORAL CAPSULE 200 MG, 400 MG	39	venlafaxine hcl er oral capsule extended release 24 hour	14	virt-c dha oral capsule 53.5-38-1 mg.....	37
ursodiol oral capsule 300 mg ...	39	venlafaxine hcl er oral tablet extended release 24 hour	14	virt-pn dha oral capsule 27-0.6-0.4-300 mg.....	37
ursodiol oral tablet.....	39	VENTOLIN HFA	55	VISTARIL	19
URSO FORTE.....	39	VEOZAH	25	VITAFOL FE+	37
UZEDY SUBCUTANEOUS SUSPENSION PREFILLED SYRINGE 100 MG/0.28ML	18	verapamil hcl er oral capsule extended release 24 hour 100 mg, 200 mg, 300 mg	23	VITAFOL GUMMIES	37
V					
VAGIFEM	44	verapamil hcl er oral capsule extended release 24 hour 120 mg, 180 mg, 240 mg, 360 mg.....	23	VITAFOL-OB	37
valacyclovir hcl oral	19	verapamil hcl er oral tablet extended release.....	23	VITAFOL ULTRA	37
VALCYTE ORAL TABLET	19	verapamil hcl oral.....	23	VITAMEDMD ONE RX/QUATREFOLIC37	
valganciclovir hcl oral tablet ...	19	VERELAN	23	vitamin d (ergocalciferol) oral capsule 1.25 mg (50000 ut), 50000 unit.....	37
VALIUM.....	19	VERELAN PM.....	23	vitamins acd-fluoride.....	37
valproic acid oral.....	12	VERKAZIA	52	VITAPEARL	37
valsartan-hydrochlorothiazide ..	23	VERQUOVO	23	VITATHELY WITH GINGER.....	37
valsartan oral tablet.....	23	VERZENIO	17	VITRAKVI.....	17
VALTOCO	12	VESICARE	40	VIVAGUARD INO GLUCOSE METER KIT	32
VALTRESX	19	vestura.....	44	VIVAGUARD INO TEST STRIPS....	32
VANCOCIN.....	11	VEVYE.....	52	VIVELLE-DOT	44
vancomycin hcl oral	11	VFEND ORAL TABLET 50 MG	15	VIVJOA	15
VANDAZOLE	11	VFEND ORAL TABLET 200 MG	15	VOGELXO.....	45
VANOS	29	VIAGRA.....	35	VOGELXO PUMP.....	45
VAQTA.....	49	VIBERZI	39	volnea	44
vardenafil hcl oral tablet.....	35	VIBRAMYCIN	11	VOQUEZNA.....	38
varenicline tartrate.....	9	vienna	44	VOQUEZNA DUAL PAK	38
varenicline tartrate(continue)	9	vigabatrin oral packet	12	VOQUEZNA TRIPLE PAK.....	38
varenicline tartrate (starter).....	9	vigadrone oral packet	12	voriconazole oral tablet.....	15
VARIVAX.....	49			VORTEX HOLD CHMBR/MASK/CHILD55	

VORTEX HOLD CHMBR/MASK/ TODDLER.....	55	XARELTO STARTER PACK.....	11	YUFLYMA (1 PEN) SUBCUTANEOUS AUTO-INJECTOR KIT 80 MG/0.8ML48	
VORTEX VALVED HOLDING CHAMBER.....	55	XCOPRI.....	12	YUFLYMA (2 PEN).....	48
VOSEVI.....	19	XDEMVI.....	51	YUFLYMA (2 SYRINGE).....	48
VOTRIENT.....	17	XELJANZ.....	48	YUFLYMA-CD/UC/HS STARTER...	48
VRAYLAR.....	18	XELJANZ XR ORAL TABLET EXTENDED RELEASE 24 HOUR 11 MG.....	48	YUPELRI.....	55
VTAMA.....	29	XELJANZ XR ORAL TABLET EXTENDED RELEASE 24 HOUR 22 MG.....	48	YUSIMRY.....	48
VUMERITY.....	25	XELODA.....	17	yuvafem.....	44
vyfemla.....	44	XENLETA ORAL TABLET 600 MG..	11		
VYLEESI.....	35	XHANCE.....	53	Z	
vylibra.....	44	XIFAXAN.....	11	zafemy.....	44
VYNDAMAX.....	39	XIGDUO XR.....	34	zafirlukast.....	55
VYTORIN.....	23	XIIDRA.....	52	zaleplon.....	56
VYVANSE.....	24	XIMINO ORAL CAPSULE EXTENDED RELEASE 24 HOUR 135 MG, 45 MG, 90 MG.....	11	ZANAFLEX.....	56
VYZULTA.....	52	XOFLUZA (40 MG DOSE).....	19	ZARONTIN.....	12
W		XOFLUZA (80 MG DOSE).....	19	ZARXIO.....	35
WAINUA.....	14	XOLAIR SUBCUTANEOUS SOLUTION PREFILLED SYRINGE..	48	ZATEAN-PN DHA ORAL CAPSULE 27-0.6-0.4-300 MG.....	37
WAKIX.....	56	XOPENEX CONCENTRATE INHALATION NEBULIZATION SOLUTION 1.25 MG/0.5ML.....	55	ZAVZPRET.....	15
warfarin sodium oral.....	11	XOPENEX HFA.....	55	ZEGALOGUE SUBCUTANEOUS SOLUTION AUTO-INJECTOR.....	34
WELCHOL ORAL TABLET.....	23	XOPENEX INHALATION NEBULIZATION SOLUTION 0.31 MG/3ML, 0.63 MG/3ML, 1.25 MG/3ML.....	55	ZEJULA ORAL CAPSULE 100 MG.....	17
WELLBUTRIN SR.....	14	XTAMPZA ER.....	9	ZELBORAF.....	17
WELLBUTRIN XL.....	14	XTANDI.....	17	ZEMBRACE SYMTOUCH.....	15
wera.....	44	xulane.....	44	ZEMPLAR ORAL.....	50
WESCAP-C DHA.....	37	XYOSTED.....	45	zenatane.....	29
WESCAP-PN DHA.....	37	XYREM.....	56	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.....	39
wes-phos 250 neutral.....	37	XYWAV.....	56	ZENPEP ORAL CAPSULE DELAYED RELEASE PARTICLES 60000-189600 UNIT.....	39
WESTAB PLUS.....	37			ZENZEDI.....	24
WILATE.....	35			ZEPOSIA.....	25
WINLEVI.....	29			ZEPOSIA 7-DAY STARTER PACK...	25
wixela inhub.....	55			ZEPOSIA STARTER KIT.....	25
wymzya fe.....	44			ZESTORETIC.....	23
X				ZESTRIL.....	23
XACIATO.....	11			ZETIA.....	23
XALATAN.....	52	Y			
XANAX.....	19	YASMIN 28.....	44		
XANAX XR.....	19	YAZ.....	44		
XARELTO.....	11	YUFLYMA (1 PEN) SUBCUTANEOUS AUTO-INJECTOR KIT 40 MG/0.4ML48			

ZETONNA	53	zonisamide oral.....	12
ZIAC ORAL TABLET 5-6.25 MG ...	23	ZORTRESS.....	48
ZIAC ORAL TABLET 10-6.25 MG, 2.5-6.25 MG	23	ZORYVE	29
ZIANA.....	29	zovia 1/35 (28)	44
ZILXI.....	29	ZOVIRAX EXTERNAL	19
ZIMHI	10	ZOVIRAX ORAL SUSPENSION 200 MG/5ML	19
ZIOPTAN	52	ZTLIDO.....	9
ziprasidone hcl	18	ZUBSOLV.....	10
ZIRGAN	19	zumandimine.....	44
ZITHROMAX ORAL.....	11	ZURZUVAE	14
ZITHROMAX TRI-PAK	11	ZYCLARA	29
ZITHROMAX Z-PAK	11	ZYCLARA PUMP	29
ZOCOR	23	ZYLET.....	51
zolmitriptan nasal.....	15	ZYLOPRIM ORAL TABLET 100 MG, 300 MG	15
zolmitriptan oral tablet.....	15	ZYMAXID OPHTHALMIC SOLUTION 0.5 %	51
zolmitriptan oral tablet dispersible	15	ZYPREXA ORAL	18
ZOLOFT	14	ZYPREXA ZYDIS	18
zolpidem tartrate er.....	56	ZYTIGA.....	17
zolpidem tartrate oral tablet ...	56	ZYVOX ORAL TABLET	11
ZOMIG NASAL.....	15		
ZONEGRAN	12		

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Mail: Civil Rights Coordinator
UnitedHealthcare Civil Rights Grievance
P.O. Box 30608
Salt Lake City, UT 84130

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<https://www.hhs.gov/ocr/complaints/index.html>

Phone: Toll-free **1-800-368-1019, 800-537-7697 (TDD)**

Mail: U.S. Dept. of Health and Human Services
200 Independence Avenue SW
Room 509F, HHH Building
Washington, D.C. 20201

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Multi-language interpreter services

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ATENCIÓN: Si habla **español (Spanish)**, hay servicios de asistencia de idiomas, sin cargo, a su disposición. Llame al número de teléfono gratuito que aparece en su tarjeta de identificación.

請注意：如果您說**中文 (Chinese)**，我們免費為您提供語言協助服務。請撥打會員卡所列的免付費會員電話號碼。

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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.

ATENÇÃO: Se você fala **português (Portuguese)**, contate o serviço de assistência de idiomas gratuito. Ligue gratuitamente para o número encontrado no seu cartão de identificação.

ATTENZIONE: in caso la lingua parlata sia l'**italiano (Italian)**, sono disponibili servizi di assistenza linguistica gratuiti. Per favore chiamate il numero di telefono verde indicato sulla vostra tessera identificativa.

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.

注意事項：日本語**(Japanese)**を話される場合、無料の言語支援サービスをご利用いただけます。健康保険証に記載されているフリーダイヤルにお電話ください。

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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)**សំដៅនូវការសម្របសម្រួលភាសាដើមរបស់អ្នក។ គឺមានសំរាប់អ្នក។ សូមទូរស័ព្ទទៅលេខឥតគិតថ្លៃ ដើម្បីមាននូវលេខអត្តសញ្ញាណប័ណ្ណរបស់អ្នក។

PAKDAAR: Nu saritaem ti **Ilocano (Ilocano)**, ti serbisyo para ti baddang ti lengguahe nga awanan bayadna, ket sidadaan para kenyam. Maidawat nga awagan iti toll-free a numero ti telepono nga nakalista ayan iti identification card mo.

DÍI BAA'AKONÍNÍZIN: **Diné (Navajo)** bizaad bee yániit'igo, saad beę áka'anída'awo'ígíí, t'áa jíík'eh, bee ná'ahóót'i'. T'áa shqodí ninaaltsoos niit'izí bee nééhozinígíí bine'déę t'áa jíík'ehgo béesh bee hane'í biká'ígíí bee hodíilnih.

OGOW: Haddii aad ku hadasho **Soomaali (Somali)**, adeegyada taageerada luqadda, oo bilaash ah, ayaad heli kartaa. Fadlan wac lambarka telefonka khadka bilaashka ee ku yaalla kaarkaaga aqoonsiga.



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