



**Alabama**  
**Individual & Family plans**

**2025 Prescription Drug List**

Effective as of Jan. 1, 2025

# Table of contents

Analgesics.....	9
Anesthetics .....	10
Anti-addiction/substance abuse treatment agents.....	10
Antibacterials .....	10
Anticonvulsants.....	11
Antidementia agents .....	12
Antidepressants .....	12
Antiemetics .....	13
Antifungals.....	13
Antigout agents.....	13
Antimigraine agents .....	13
Antimyasthenic agents.....	14
Antimycobacterials.....	14
Antineoplastics .....	14
Antiparasitics .....	15
Anti-Parkinson's agents .....	15
Antipsychotics .....	15
Antivirals .....	16
Anxiolytics.....	17
Bipolar agents.....	17
Blood glucose monitoring.....	17
Blood glucose regulators .....	18
Blood products and modifiers.....	18
Cardiovascular agents.....	19
Central nervous system agents .....	21
Dental and oral agents.....	21
Dermatological agents .....	21
Electrolytes/minerals/metals/vitamins.....	22
Gastrointestinal agents.....	23
Genetic or enzyme disorder: replacement, modifiers, treatment .....	24
Genitourinary agents .....	24
Hormonal agents, stimulant/replacement/modifying (adrenal) .....	24
Hormonal agents, stimulant/replacement/modifying (pituitary) .....	25
Hormonal agents, stimulant/replacement/modifying (prostaglandins) .....	25
Hormonal agents, stimulant/replacement/modifying (sex hormones/modifiers).....	25
Hormonal agents, stimulant/replacement/modifying (thyroid).....	28

Hormonal agents, suppressant (adrenal) .....	28
Hormonal agents, suppressant (pituitary).....	28
Hormonal agents, suppressant (thyroid) .....	28
Immunological agents .....	28
Inflammatory bowel disease agents .....	30
Metabolic bone disease agents .....	31
Miscellaneous therapeutic agents .....	31
Ophthalmic agents .....	32
Otic agents.....	33
Respiratory tract/pulmonary agents.....	33
Skeletal muscle relaxants.....	34
Sleep disorder agents .....	34

# Understanding your prescription drug list

## What is a prescription drug list (PDL)?

A PDL is a list of prescribed medications or other pharmacy care products or supplies chosen for their safety, cost, and effectiveness. Medications are listed by categories or classes and are placed into cost levels known as tiers. It includes both brand and generic prescription medications.

To create the list, UnitedHealthcare® is guided by the Individual & Family plan Pharmacy Management Committee. This group reviews which medications will be covered, based on how well the drugs work, and overall value. They also make sure there are safe and covered options.

## How do I use my PDL?

You and your healthcare provider can use the PDL to help you choose the most cost-effective prescription medications. This guide tells you if your medication is covered, what tier your medication is considered under your plan, and if your medication has coverage rules or limits. You can reference this list when you see your healthcare provider. If your medication is not listed here, please visit [myuhc.com/exchange](https://myuhc.com/exchange) or call the Member Services number on your health plan ID card.

## What are tiers?

Tiers are the different cost levels you pay for a medication. Each tier is assigned a cost, and you can find cost-sharing information in your plan documents. This determines how much you will pay when you fill a prescription at a network pharmacy. Using lower-tier medications can help you pay the lowest out-of-pocket cost. If you are prescribed a medication on a higher tier, you can ask your healthcare provider if a lower-tier medication can work for your condition. In the chart below, the overall value is based on factors such as medication effectiveness, safety, cost, and the availability of alternative medications to treat the same or similar medical condition.

Tier	Cost-share	Includes
1	\$0	<b>\$0 Cost-share</b> Medications available at no cost to you, which includes <b>preventive medications</b> .
2	\$	<b>Lower cost-share</b> Medications that offer the <b>highest overall value</b> , which includes <b>preferred generic medications</b> .
3	\$\$	<b>Mid-range cost-share</b> Medications that provide <b>good overall value</b> , which includes <b>preferred brand name</b> and <b>non-preferred generic medications</b> .
4	\$\$\$	<b>Higher cost-share</b> Medications that provide <b>lower overall value</b> , which includes <b>non-preferred brand name</b> medications and <b>non-preferred generic medications</b> .
5	\$\$\$\$	<b>Highest cost-share</b> Medications that provide the <b>lowest overall value</b> , which includes most <b>specialty medications</b> .

## About this PDL

Where differences between this document and your benefit plan exist, the benefit plan documents rule. This may not be a complete list of medications that are covered by your plan. Please review your benefit plan for full details.

## Can the PDL change?

Most changes in drug coverage happen on January 1<sup>st</sup>, but during the year UnitedHealthcare may add or remove drugs on the PDL, move them to different cost-sharing tiers, or add or remove rules.

When a medication changes tiers, you may have to pay a different amount for that medication. Talk to your healthcare provider to learn about alternatives.

## Why are some medications not covered?

A medication may not be covered under your pharmacy benefit when it works the same as or similar to another prescription or over-the-counter (OTC) medication.

## Coverage details

### What are coverage rules or limits?

Some medications on your PDL have extra rules before they can be covered. A few of the most common coverage rules or limits are prior authorization (PA), step therapy (ST), and quantity limits (QL). We use programs like these to help make sure the medication you take is safe and effective. Check your plan documents for more information. In this drug list, some medications are noted with letters next to them to help you see which ones may have coverage rules or limits. Your benefit plan sets how these medications may be covered for you. To get a medication that has a coverage rule or limit, see the “Prior authorization and exception requests” section.

<b>PA</b>	<b>Prior authorization required</b> UnitedHealthcare requires you or your healthcare provider to obtain prior authorization for certain drugs to be sure the drug is most appropriate for your condition. This means that you will need to get approval from UnitedHealthcare before you fill your prescriptions. If you don't get approval, the drug may not be covered.
<b>QL</b>	<b>Quantity limit</b> For certain drugs, UnitedHealthcare limits the amount of the drug being filled per copayment or over a certain period of time. We update quantity limits based on medical guidance and Food and Drug Administration (FDA) recommendations. This helps reduce waste and ensures medications are used appropriately.
<b>ST</b>	<b>Step therapy</b> In some cases, UnitedHealthcare requires you to first try certain drugs to treat your medical condition before we cover another drug for that condition. Step Therapy makes sure you are filling medically appropriate and affordable medications.
<b>SP</b>	<b>Specialty medication</b> Limited to a 1-month supply per prescription.
<b>MME</b>	<b>Morphine milligram equivalent</b> Additional quantity limits may apply across all drugs in the opioid class used for the treatment of pain. This additional limit is called a cumulative morphine milligram equivalent (MME) and is designed to monitor safe dosing levels of opioids for individuals who may be taking more than 1 opioid drug for pain management. If your healthcare provider prescribes more than this amount, or thinks the limit is not right for your situation, you or your healthcare provider can ask the plan to cover the additional quantity.

7D

### 7 day limit if you have not filled an opioid prescription recently

If you have not filled an opioid prescription recently, you may be limited to a 7-day supply. This limit is intended to minimize initial duration if you do not have recent history of opioid use. For members who are new to the plan and have a recent history of using opioids, the limit may be overridden by the pharmacy. For members who have filled an opioid recently, prescriptions are limited to a 1 month supply.

## Which preventive medications are covered?

Your UnitedHealthcare Individual & Family plan covers certain preventive medications and supplements at no cost to you when filled at a network pharmacy.

Under the Affordable Care Act (ACA) of 2010, prescription and over-the-counter (OTC) preventive medications and supplements include:

- Aspirin to prevent preeclampsia during pregnancy
- Birth control (contraceptives)
- Bowel preparation for a colonoscopy needed for colon cancer screening
- Breast cancer preventive medications
- Fluoride to prevent dental cavities
- Folic acid to prevent birth defects
- Gonococcal Ophthalmia Neonatorum preventive medications
- Human Immunodeficiency Virus (HIV) infection pre-exposure preventive (PrEP) medications
- Statin medications to prevent cardiovascular events
- Tobacco cessation medications to help you quit smoking
- Vaccines

We follow recommendations by the U.S. Preventive Services Task Force, Health Resources and Services Administration, and Advisory Committee on Immunization Practices.

Preventive medications are listed as Tier 1 or are noted as \$0 Copay medications in this drug list. Some medications are available at no cost to you only when certain requirements are met. As noted in this list, we may need your healthcare provider to provide information about your medical condition to confirm that you meet the requirements to obtain the preventive medication at no cost. Follow the steps in the “Prior authorization and exception requests” section. If you qualify, you can receive these drugs at \$0 cost-share. If you are using it to treat another medical condition, a cost-share may apply.

## What medications are covered under my medical benefit?

To learn about medications covered under your medical benefit, visit [uhcprovider.com/content/dam/provider/docs/public/resources/pharmacy/IFP-Clinical-Program-Summary-Drug-List.pdf](https://uhcprovider.com/content/dam/provider/docs/public/resources/pharmacy/IFP-Clinical-Program-Summary-Drug-List.pdf)

## Prior authorization and exception requests

Some medications require prior authorization or may need an exception. This includes medications that:

- Require a prior authorization, including compounded prescription medications
- Require step therapy
- Exceed quantity limits
- Exceed opioid safety edits
  - 7-day supply limit for members who have not filled an opioid prescription recently or
  - Opioid use that exceeds the established morphine milligram equivalent (MME) level
- Are not listed in the PDL (also called non-formulary drugs)
- May be covered at no cost when specific requirements are met such as preventive medications

### How can I get a medication that requires a prior authorization or an exception?

Optum Rx, our Pharmacy Benefit Manager, processes prior authorization and exception requests on behalf of UnitedHealthcare Individual & Family plans. Contact your healthcare provider to submit a request. Healthcare providers can submit a request:

- Online: [professionals.optumrx.com/prior-authorization.html](https://professionals.optumrx.com/prior-authorization.html)
- Phone: 1-800-711-4555

The request should include the diagnosis, medication history, clinical justification, medical records/lab tests as needed and other supporting information. If information is missing, Optum Rx will contact your healthcare provider and request additional information.

If you need help, you can also start a request at [myuhc.com/exchange](https://myuhc.com/exchange) or by calling the member services number on your health plan ID card, and we can contact your healthcare provider for information to help process the request.

We'll send written notification of the decision to both you and your healthcare provider. If your healthcare provider does not agree with the decision, this notification will provide instructions on requesting a peer-to-peer review or requesting an appeal.

You and your healthcare provider can learn more and find clinical criteria by visiting [uhcprovider.com/exchange](https://uhcprovider.com/exchange).

## 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.

### What if my healthcare provider writes a brand-name prescription?

If your healthcare provider gives you a prescription for a brand-name medication, ask if a generic or lower-cost option could be right for you. Generic medications are usually your lowest-cost option.

### Over-the-counter medications

An over-the-counter (OTC) medication may be the right treatment for some conditions. Talk to your healthcare provider about available OTC options. Even though OTC medications may not be covered by your pharmacy benefit, they may cost less than a prescription medication.

## What if I am taking a specialty medication?

Specialty medications are for rare or complex conditions and are usually higher-cost medications. Specialty medications are indicated with SP throughout the PDL.

Please note, not all specialty medications may be available at a retail pharmacy. If you have a question on how to access covered specialty medications, call the number on your health plan ID card or visit [myuhc.com/exchange](https://myuhc.com/exchange).

## Reading your PDL

The PDL gives you choices so you and your healthcare provider can decide your best course of treatment. In this PDL, brand-name medications are shown in UPPERCASE (for example, JARDIANCE). Generic medications are shown in lowercase (for example, atorvastatin). There are two ways to find your drug within the PDL:

1. The drugs in this formulary are grouped into categories depending on the medical conditions that they are used to treat. For example, drugs used to treat an infection are generally listed under the category, Antibacterial. If you know what your drug is used for, look for the category name, then look under the category name for your drug .
2. Alphabetical listing - if you are not sure what category to look under, you should look for your drug in the Index. The Index provides an alphabetical list of all the drugs included in this document for both brand name drugs and generic drugs. Review the Index to find your drug. Next to your drug, you will see the page number where you can find coverage information. Turn to that page listed in the Index and find the name of your drug in the first column of the list .

## Questions



Review your policy for more information about your pharmacy benefit



Call the Member Services number on your health plan ID card



Register or login to your online account at [myuhc.com/exchange](https://myuhc.com/exchange) to:

- Find current list of covered medications
- Find a network pharmacy by ZIP code
- Learn about home delivery
- Look up possible lower-cost medication alternatives
- Compare medication pricing and options



Drug name	Tier	Notes
<b>Analgesics</b>		
<b>Nonsteroidal anti-inflammatory drugs</b>		
aspirin 81 oral tablet delayed release	1	\$0 Copay for members between ages of 16 to 49 years.
aspirin adult low dose	1	\$0 Copay for members between ages of 16 to 49 years.
aspirin adult low strength	1	\$0 Copay for members between ages of 16 to 49 years.
aspirin childrens	1	\$0 Copay for members between ages of 16 to 49 years.
aspirin ec adult low dose	1	\$0 Copay for members between ages of 16 to 49 years.
aspirin ec low dose	1	\$0 Copay for members between ages of 16 to 49 years.
aspirin ec low strength	1	\$0 Copay for members between ages of 16 to 49 years.
aspirin low dose	1	\$0 Copay for members between ages of 16 to 49 years.
aspirin oral tablet chewable	1	\$0 Copay for members between ages of 16 to 49 years.
aspirin oral tablet delayed release 81 mg	1	\$0 Copay for members between ages of 16 to 49 years.
aspirin regimen	1	\$0 Copay for members between ages of 16 to 49 years.
celecoxib oral	2	QL
diclofenac potassium oral tablet 50 mg	2	
diclofenac sodium er	3	
diclofenac sodium external gel 1 %	3	QL
diclofenac sodium oral	2	
diclofenac-misoprostol	3	
diflunisal oral	2	
ec-naproxen	2	
etodolac	2	
etodolac er	3	
fenoprofen calcium oral tablet	4	
flurbiprofen oral tablet 100 mg	2	

Drug name	Tier	Notes
ft aspirin low dose	1	\$0 Copay for members between ages of 16 to 49 years.
ft aspirin oral tablet chewable	1	\$0 Copay for members between ages of 16 to 49 years.
goodsense aspirin low dose	1	\$0 Copay for members between ages of 16 to 49 years.
ibuprofen oral tablet 400 mg, 600 mg, 800 mg	2	
indomethacin er	2	
indomethacin oral capsule	2	QL
ketoprofen er	4	ST
ketoprofen oral	3	ST
ketorolac tromethamine oral	2	
KIPROFEN	3	ST
meclofenamate sodium oral	4	
mefenamic acid oral	4	
meloxicam oral tablet	2	
mm aspirin	1	\$0 Copay for members between ages of 16 to 49 years.
nabumetone oral	2	
naproxen dr	2	
naproxen oral suspension	4	PA
naproxen oral tablet	2	
naproxen oral tablet delayed release	2	
naproxen sodium oral tablet 275 mg, 550 mg	2	
oxaprozin oral tablet	3	
piroxicam oral	2	
salsalate oral	2	
ST JOSEPH LOW DOSE	1	\$0 Copay for members between ages of 16 to 49 years.
sulindac oral	2	
tolmetin sodium	4	
<b>Opioid analgesics, long-acting</b>		
fentanyl transdermal patch 72 hour 100 mcg/hr, 12 mcg/hr, 25 mcg/hr, 50 mcg/hr, 75 mcg/hr	3	PA; QL; MME; 7D
hydrocodone bitartrate er oral capsule extended release 12 hour	4	PA; QL; MME; 7D
hydromorphone hcl er	4	PA; QL; MME; 7D
levorphanol tartrate oral	4	PA; QL; MME; 7D
methadone hcl intensol	2	PA; QL; MME; 7D
methadone hcl oral concentrate	2	PA; QL; MME; 7D
methadone hcl oral solution	2	PA; QL; MME; 7D
methadone hcl oral tablet	2	PA; QL; MME; 7D
morphine sulfate er oral tablet extended release	2	PA; QL; MME; 7D

KEY: **7D** ..... 7 day limit  
**MME** ..... Morphine milligram equivalent  
**PA** ..... Prior authorization required

**QL** ..... Quantity limit  
**SP** ..... Specialty medication  
**ST** ..... Step therapy

Drug name	Tier	Notes
NUCYNTA ER	4	PA; QL; MME; 7D
oxymorphone hcl er	4	PA; QL; MME; 7D
tramadol hcl (er biphasic) oral tablet extended release 24 hour	3	PA; QL; MME; 7D
tramadol hcl er tablet	3	PA; QL; MME; 7D
XTAMPZA ER	4	PA; QL; MME; 7D
<b>Opioid analgesics, short-acting</b>		
acetaminophen-codeine	2	QL; MME; 7D
apap-caff-dihydrocodeine	4	QL; MME; 7D
ascomp-codeine	3	QL; MME; 7D
bac	2	QL
butalbital-acetaminophen oral tablet	3	QL
butalbital-apap-caff-cod	4	QL; MME; 7D
butalbital-apap-caffeine oral capsule	4	QL
butalbital-apap-caffeine oral tablet	2	QL
butalbital-asa-caff-codeine	3	QL; MME; 7D
butalbital-aspirin-caffeine	3	QL
butorphanol tartrate nasal	3	QL; MME; 7D
codeine sulfate	2	QL; MME; 7D
endocet	2	QL; MME; 7D
fentanyl citrate buccal lozenge on a handle	4	PA; QL
hydrocodone-acetaminophen oral solution 7.5-325 mg/15ml	2	QL; MME; 7D
hydrocodone-acetaminophen oral tablet 10-325 mg, 5-325 mg, 7.5-325 mg	2	QL; MME; 7D
hydrocodone-ibuprofen	4	QL; MME; 7D
hydromorphone hcl oral liquid	3	QL; MME; 7D
hydromorphone hcl oral tablet	2	QL; MME; 7D
morphine sulfate (concentrate)	3	QL; MME; 7D
morphine sulfate oral solution	3	QL; MME; 7D
morphine sulfate oral tablet	2	QL; MME; 7D
oxycodone hcl oral capsule	2	QL; MME; 7D
oxycodone hcl oral concentrate	4	QL; MME; 7D
oxycodone hcl oral solution	2	QL; MME; 7D
oxycodone hcl oral tablet	2	QL; MME; 7D
oxycodone-acetaminophen oral tablet 10-325 mg, 2.5-325 mg, 5-325 mg, 7.5-325 mg	2	QL; MME; 7D
oxymorphone hcl	3	QL; MME; 7D
pentazocine-naloxone hcl	3	QL; MME; 7D
TENCON	3	QL
tramadol hcl oral tablet 50 mg	2	QL; MME; 7D
tramadol-acetaminophen	2	QL; MME; 7D
<b>Anesthetics</b>		
<b>Local anesthetics</b>		
glydo	2	
lidocaine external patch 5 %	3	PA; QL
lidocaine hcl external solution	3	
lidocaine hcl mouth/throat	3	
lidocaine hcl urethral/mucosal	2	

Drug name	Tier	Notes
lidocaine viscous hcl	2	
lidocaine-prilocaine external cream	2	
<b>Anti-addiction/substance abuse treatment agents</b>		
<b>Alcohol deterrents/anti-craving</b>		
acamprosate calcium	3	
disulfiram oral	2	
naltrexone hcl oral	2	
<b>Opioid dependence treatments</b>		
buprenorphine hcl sublingual	2	
buprenorphine hcl-naloxone hcl sublingual film	4	
buprenorphine hcl-naloxone hcl sublingual tablet sublingual	2	
ZUBSOLV	3	
<b>Opioid reversal agents</b>		
naloxone hcl injection	2	
naloxone hcl nasal	1	
NARCAN	1	
<b>Smoking cessation agents</b>		
bupropion hcl er (smoking det)	1	
ft nicotine	1	
ft nicotine mini	1	
goodsense nicotine mouth/throat gum 2 mg	1	
goodsense nicotine mouth/throat lozenge 4 mg	1	
habitrol	1	
NICORETTE MINI	1	
NICORETTE MOUTH/THROAT GUM 2 MG	1	
NICORETTE MOUTH/THROAT LOZENGE	1	
nicotine mini	1	
nicotine polacrilex mini	1	
nicotine polacrilex mouth/throat	1	
nicotine step 1	1	
nicotine step 2	1	
nicotine step 3	1	
nicotine transdermal kit	1	
nicotine transdermal patch 24 hour 21 mg/24hr	1	
NICOTROL	1	PA
NICOTROL NS	1	PA
varenicline tartrate	1	PA
varenicline tartrate (starter)	1	PA
varenicline tartrate(continue)	1	PA
<b>Antibacterials</b>		
<b>Aminoglycosides</b>		
gentamicin sulfate external	3	
HUMATIN	4	
neomycin sulfate oral	2	
<b>Antibacterials, other</b>		
clindamycin hcl oral	2	

KEY: **7D** .....7 day limit  
**MME** .....Morphine milligram equivalent  
**PA** .....Prior authorization required

**QL** .....Quantity limit  
**SP** .....Specialty medication  
**ST** .....Step therapy

Drug name	Tier	Notes
clindamycin palmitate hcl	3	
clindamycin phosphate vaginal	2	
fosfomycin tromethamine	4	
linezolid oral suspension reconstituted	4	QL
linezolid oral tablet	3	QL
mafenide acetate external	4	
methenamine hippurate	3	
metronidazole oral tablet	2	
metronidazole vaginal	2	
mupirocin cream	4	QL
mupirocin ointment	2	QL
NEO-SYNALAR	4	QL
nitrofurantoin macrocrystal	3	
nitrofurantoin monohydrate macrocrystals	2	
nitrofurantoin oral suspension 25 mg/5ml	4	
silver sulfadiazine external	2	
SIVEXTRO ORAL	4	PA; QL
SOLOSEC	4	QL
ssd	2	
SULFAMYLON	4	
tinidazole oral	2	
trimethoprim oral	2	
vancomycin hcl oral capsule	2	QL
vancomycin hcl oral solution reconstituted	3	
VANDAZOLE	3	
XIFAXAN	5	PA; QL
<b>Beta-lactam, cephalosporins</b>		
cefaclor er	3	
cefaclor oral capsule	2	
cefadroxil oral capsule	2	
cefadroxil oral suspension reconstituted	2	
cefadroxil oral tablet	3	
cefdinir	2	
cefixime oral capsule	3	
cefixime oral suspension reconstituted	4	
cefepodoxime proxetil	3	
cefprozil	2	
cefuroxime axetil	2	
cephalexin oral capsule 250 mg, 500 mg	2	
cephalexin oral suspension reconstituted	2	
<b>Beta-lactam, penicillins</b>		
amoxicillin	2	
amoxicillin-potassium clavulanate	2	
ampicillin	2	
dicloxacillin sodium	2	
penicillin v potassium	2	

Drug name	Tier	Notes
<b>Macrolides</b>		
azithromycin oral	2	
clarithromycin er	3	
clarithromycin oral suspension reconstituted	4	
clarithromycin oral tablet	2	
erythromycin base oral capsule delayed release particles	4	
erythromycin base oral tablet	3	
erythromycin base oral tablet delayed release	3	
erythromycin ethylsuccinate oral	4	
erythromycin oral	3	
<b>Quinolones</b>		
BAXDELA ORAL	4	
ciprofloxacin hcl oral	2	
levofloxacin oral solution	4	
levofloxacin oral tablet	2	
moxifloxacin hcl oral	2	
ofloxacin oral	3	
<b>Sulfonamides</b>		
sulfadiazine oral	4	
sulfamethoxazole-trimethoprim oral suspension 200-40 mg/5ml	2	
sulfamethoxazole-trimethoprim oral tablet	2	
sulfatrim pediatric	2	
<b>Tetracyclines</b>		
avidoxy	2	
demeclocycline hcl	4	
doxycycline hyclate oral capsule	2	
doxycycline hyclate oral tablet 100 mg, 20 mg	2	
doxycycline monohydrate oral capsule 100 mg, 50 mg	2	
doxycycline monohydrate oral suspension reconstituted	3	
doxycycline monohydrate oral tablet	2	
minocycline hcl oral capsule	2	
mondoxylene nl	2	
tetracycline hcl oral capsule	2	
<b>Anticonvulsants</b>		
<b>Anticonvulsants, other</b>		
levetiracetam er	2	
levetiracetam oral	2	
NAYZILAM	5	PA
roweepra	2	
<b>Calcium channel modifying agents</b>		
ethosuximide oral	3	
methsuximide	3	
zonisamide oral	2	
<b>Gamma-aminobutyric acid (GABA) augmenting agents</b>		
clobazam	4	PA; QL

KEY: **7D** ..... 7 day limit  
**MME** ..... Morphine milligram equivalent  
**PA** ..... Prior authorization required

**QL** ..... Quantity limit  
**SP** ..... Specialty medication  
**ST** ..... Step therapy

Drug name	Tier	Notes
DIACOMIT	5	PA; QL; SP
diazepam rectal	4	QL
gabapentin oral capsule	2	
gabapentin oral solution 250 mg/5ml	2	
gabapentin oral tablet 600 mg, 800 mg	2	
phenobarbital oral	2	
primidone oral	2	
tiagabine hcl	4	
valproic acid oral capsule	2	
valproic acid oral solution 250 mg/5ml	2	
vigabatrin	5	PA; QL; SP
vigadrone	5	PA; QL; SP
vigpoder	5	PA; QL; SP
<b>Glutamate reducing agents</b>		
felbamate	4	
FYCOMPA ORAL SUSPENSION	4	PA; QL
lamotrigine oral tablet	2	
lamotrigine oral tablet chewable	2	
subvenite	2	
topiramate oral capsule sprinkle	3	
topiramate oral tablet	2	
<b>Sodium channel agents</b>		
APTIOM	4	PA; QL
carbamazepine er	3	
carbamazepine oral suspension 100 mg/5ml	3	
carbamazepine oral tablet	2	
carbamazepine oral tablet chewable	2	
DILANTIN ORAL CAPSULE 30 MG	4	
epitol	2	
lacosamide oral	4	PA; QL
oxcarbazepine oral suspension	4	
oxcarbazepine oral tablet	2	
phenytek	2	
phenytoin infatabs	2	
phenytoin oral	2	
phenytoin sodium extended	2	
rufinamide	4	PA
<b>Antidementia agents</b>		
<b>Cholinesterase inhibitors</b>		
donepezil hcl oral tablet 10 mg, 5 mg	2	QL
donepezil hcl oral tablet dispersible	2	QL
galantamine hydrobromide er	3	QL
galantamine hydrobromide oral solution	4	QL
galantamine hydrobromide oral tablet	3	QL
rivastigmine	4	QL
rivastigmine tartrate	2	QL

Drug name	Tier	Notes
<b>N-methyl-D-aspartate (NMDA) receptor antagonist</b>		
memantine hcl oral solution	4	QL
memantine hcl oral tablet	2	QL
<b>Antidepressants</b>		
<b>Antidepressants, other</b>		
bupropion hcl er (sr)	2	
bupropion hcl er (xl) oral tablet extended release 24 hour 150 mg, 300 mg	2	QL
bupropion hcl oral	2	
chlordiazepoxide-amitriptyline	3	
mirtazapine oral tablet	2	
mirtazapine oral tablet dispersible	3	
olanzapine-fluoxetine hcl	4	QL
perphenazine-amitriptyline	3	
<b>Monoamine oxidase inhibitors</b>		
MARPLAN	4	
phenelzine sulfate oral	2	
tranylcypromine sulfate	4	
<b>SSRI/SNRI (selective serotonin reuptake inhibitors/serotonin and norepinephrine reuptake inhibitors)</b>		
citalopram hydrobromide oral solution	3	
citalopram hydrobromide oral tablet	2	
desvenlafaxine succinate er	3	QL
duloxetine hcl oral capsule delayed release particles 20 mg, 30 mg, 60 mg	2	QL
escitalopram oxalate oral solution	3	
escitalopram oxalate oral tablet	2	
FETZIMA	4	ST; QL
fluoxetine hcl (pmdd)	3	QL
fluoxetine hcl oral capsule	2	
fluoxetine hcl oral capsule delayed release	3	QL
fluoxetine hcl oral solution	2	
fluoxetine hcl oral tablet 10 mg, 20 mg	3	QL
fluvoxamine maleate	2	
fluvoxamine maleate er	4	QL
nefazodone hcl	3	
paroxetine hcl er	3	QL
paroxetine hcl oral suspension	4	
paroxetine hcl oral tablet	2	
sertraline hcl oral concentrate	2	
sertraline hcl oral tablet	2	
trazodone hcl oral	2	
venlafaxine hcl	2	
venlafaxine hcl er oral capsule extended release 24 hour	2	
vilazodone hcl	4	QL
<b>Tricyclics</b>		
amitriptyline hcl oral	2	

KEY: **7D** .....7 day limit  
**MME** .....Morphine milligram equivalent  
**PA** .....Prior authorization required

**QL** .....Quantity limit  
**SP** .....Specialty medication  
**ST** .....Step therapy

Drug name	Tier	Notes
amoxapine	2	
clomipramine hcl oral	4	
desipramine hcl oral	3	
doxepin hcl oral capsule	2	
doxepin hcl oral concentrate	2	
imipramine hcl oral	2	
imipramine pamoate	4	
nortriptyline hcl oral capsule	2	
nortriptyline hcl oral solution	3	
protriptyline hcl	3	
trimipramine maleate oral	4	
<b>Antiemetics</b>		
<b>Antiemetics, other</b>		
doxylamine-pyridoxine	4	
meclizine hcl oral tablet 25 mg	2	
meclizine hcl oral tablet 50 mg	3	
metoclopramide hcl oral solution 5 mg/5ml	2	
metoclopramide hcl oral tablet	2	
perphenazine oral	2	
prochlorperazine	3	
prochlorperazine maleate oral	2	
promethazine hcl oral	2	
promethazine hcl rectal	3	QL
promethegan	3	QL
scopolamine	3	
trimethobenzamide hcl oral	2	
<b>Emetogenic therapy adjuncts</b>		
ANZEMET	4	QL
aprepitant	3	QL
dronabinol	4	
EMEND ORAL SUSPENSION RECONSTITUTED	3	QL
granisetron hcl oral	3	QL
ondansetron hcl oral	2	
ondansetron odt oral tablet dispersible 4 mg, 8 mg	2	
VARUBI (180 MG DOSE)	3	QL
<b>Antifungals</b>		
ciclodan	2	
ciclopirox external	2	
ciclopirox olamine external	2	
clotrimazole mouth/throat	2	
clotrimazole-betamethasone external cream	2	QL
clotrimazole-betamethasone external lotion	3	
CRESEMBA ORAL	4	PA
econazole nitrate external	3	QL
EXELDERM	4	
fluconazole oral	2	
flucytosine oral	4	
griseofulvin microsize oral	3	

Drug name	Tier	Notes
griseofulvin ultramicrosize	3	
GYNAZOLE-1	4	
itraconazole oral	4	QL
ketoconazole external cream	2	QL
ketoconazole external shampoo	2	
ketoconazole oral	2	
klayesta	2	QL
LULICONAZOLE	4	QL
miconazole 3	2	
naftifine hcl external cream	4	
nyamyc	2	QL
nystatin external cream	2	
nystatin external ointment	2	
nystatin external powder	2	QL
nystatin mouth/throat	2	
nystatin oral	2	
nystatin-triamcinolone	2	
nystop	2	QL
oxiconazole nitrate	4	QL
posaconazole oral tablet delayed release	3	QL
SULCONAZOLE NITRATE	4	
tavaborole	3	QL
terbinafine hcl oral	2	QL
terconazole vaginal cream	2	
terconazole vaginal suppository	3	
voriconazole oral suspension reconstituted	4	
voriconazole oral tablet	4	QL
<b>Antigout agents</b>		
allopurinol oral tablet 100 mg, 300 mg	2	
colchicine oral tablet	2	QL
colchicine-probenecid	2	
febuxostat	2	ST; QL
probenecid	2	
<b>Antimigraine agents</b>		
<b>Calcitonin gene-related peptide (CGRP) receptor antagonist</b>		
AIMOVIG SUBCUTANEOUS SOLUTION AUTO-INJECTOR 140 MG/ML, 70 MG/ML	3	PA; QL
EMGALITY	3	PA; QL
UBRELVY	3	PA; QL
<b>Ergot alkaloids</b>		
dihydroergotamine mesylate injection	4	QL
ERGOMAR	4	QL
ergotamine-caffeine	4	
MIGERGOT	4	
<b>Serotonin (5-HT) receptor agonists</b>		
almotriptan malate	3	ST; QL
eletriptan hydrobromide	3	ST; QL

KEY: **7D** ..... 7 day limit  
**MME** ..... Morphine milligram equivalent  
**PA** ..... Prior authorization required

**QL** ..... Quantity limit  
**SP** ..... Specialty medication  
**ST** ..... Step therapy

Drug name	Tier	Notes
frovatriptan succinate	4	ST; QL
naratriptan hcl	2	QL
rizatriptan benzoate	2	QL
sumatriptan nasal	4	QL
sumatriptan succinate oral	2	QL
sumatriptan succinate refill subcutaneous solution cartridge	4	QL
sumatriptan succinate subcutaneous	4	QL
sumatriptan-naproxen sodium	4	ST; QL
zolmitriptan nasal	4	ST; QL
zolmitriptan oral	3	ST; QL
<b>Antimyasthenic agents</b>		
<b>Parasympathomimetics</b>		
pyridostigmine bromide er	4	
pyridostigmine bromide oral solution	4	
pyridostigmine bromide oral tablet 60 mg	2	
<b>Antimycobacterials</b>		
<b>Antimycobacterials, other</b>		
dapsone oral	2	
rifabutin	4	
<b>Antituberculars</b>		
cycloserine oral	4	
ethambutol hcl oral	2	
isoniazid oral syrup	4	
isoniazid oral tablet	2	
PRIFTIN	3	
pyrazinamide oral	3	
rifampin oral	2	
SIRTURO	5	PA
TRECTOR	3	
<b>Antineoplastics</b>		
<b>Alkylating agents</b>		
cyclophosphamide oral capsule	4	
CYCLOPHOSPHAMIDE ORAL TABLET	4	
GLEOSTINE	5	SP
LEUKERAN	4	
MATULANE	5	SP
MYLERAN	4	
temozolomide	5	PA; SP
VALCHLOR	5	PA; QL; SP
<b>Antiandrogens</b>		
abiraterone acetate	5	PA; QL; SP
bicalutamide	2	
ERLEADA	5	PA; QL; SP
nilutamide	5	SP
NUBEQA	5	PA; QL; SP
<b>Antiangiogenic agents</b>		
lenalidomide	5	PA; QL; SP
POMALYST	5	PA; QL; SP

Drug name	Tier	Notes
THALOMID	5	PA; QL; SP
<b>Antiestrogens/modifiers</b>		
EMCYT	4	
tamoxifen citrate oral tablet 10 mg	2	
tamoxifen citrate oral tablet 20 mg	2	\$0 Copay for members 35 years and older once your healthcare provider confirms use is for breast cancer prevention.
toremifene citrate	4	
<b>Antimetabolites</b>		
capecitabine	5	SP
DROXIA	4	
hydroxyurea oral	2	
mercaptopurine oral	2	
TABLOID	5	SP
<b>Antineoplastics, other</b>		
diclofenac sodium external gel 3 %	4	QL
fluorouracil external cream	2	QL
fluorouracil external solution	2	
leucovorin calcium oral	2	
PIQRAY	5	PA; QL; SP
ROZLYTREK	5	PA; QL; SP
VERZENIO	5	PA; QL; SP
ZOLINZA	5	QL; SP
<b>Aromatase inhibitors, 3rd generation</b>		
anastrozole oral	2	\$0 Copay for members 35 years and older once your healthcare provider confirms use is for breast cancer prevention.
exemestane	4	\$0 Copay for members 35 years and older once your healthcare provider confirms use is for breast cancer prevention.
letrozole oral	2	\$0 Copay for members 35 years and older once your healthcare provider confirms use is for breast cancer prevention.
<b>Enzyme inhibitors</b>		
etoposide oral	5	SP

KEY: **7D** ..... 7 day limit  
**MME** ..... Morphine milligram equivalent  
**PA** ..... Prior authorization required

**QL** ..... Quantity limit  
**SP** ..... Specialty medication  
**ST** ..... Step therapy



Drug name	Tier	Notes
HYCAMTIN ORAL	5	PA; QL; SP
TALZENNA	5	PA; QL; SP
<b>Molecular target inhibitors</b>		
ALECENSA	5	PA; QL; SP
BOSULIF	5	PA; QL; SP
CAPRELSA	5	PA; QL; SP
COMETRIQ	5	PA; QL; SP
COTELLIC	5	PA; QL; SP
erlotinib hcl	5	PA; QL; SP
everolimus oral tablet 10 mg, 2.5 mg, 5 mg, 7.5 mg	5	PA; QL; SP
gefitinib	5	PA; QL; SP
imatinib mesylate	5	PA; QL; SP
IMBRUVICA	5	PA; QL; SP
JAKAFI	5	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	5	PA; QL; SP
LORBRENA	5	PA; QL; SP
sorafenib tosylate	5	PA; QL; SP
STIVARGA	5	PA; QL; SP
sunitinib malate	5	PA; QL; SP
TURALIO	5	PA; QL; SP
VENCLEXTA	5	PA; QL; SP
VENCLEXTA STARTING PACK	5	PA; QL; SP
VITRAKVI	5	PA; QL; SP
XOSPATA	5	PA; QL; SP
ZELBORAF	5	PA; QL; SP
ZYKADIA	5	PA; QL; SP
<b>Retinoids</b>		
bexarotene external	5	QL; SP
bexarotene oral	5	SP
tretinoin oral	5	QL; SP
<b>Treatment adjuncts</b>		
MESNEX ORAL	5	SP
<b>Antiparasitics</b>		
<b>Anthelmintics</b>		
albendazole oral	4	PA; QL
EGATEN	4	PA
ivermectin oral	2	PA; QL
praziquantel oral	4	
<b>Antiprotozoals</b>		
ALINIA ORAL SUSPENSION RECONSTITUTED 100 MG/5ML	3	QL
atovaquone	4	
atovaquone-proguanil hcl	3	
BENZNIDAZOLE	3	PA; QL
chloroquine phosphate oral	2	QL
hydroxychloroquine sulfate oral tablet 100 mg, 200 mg	2	QL
KRINTAFEL	3	QL
mefloquine hcl	2	

Drug name	Tier	Notes
nitazoxanide oral	3	QL
pentamidine isethionate inhalation	3	QL
primaquine phosphate	2	
pyrimethamine oral	5	PA; SP
quinine sulfate	3	
<b>Pediculicides/scabicides</b>		
CROTAN	4	
malathion	4	
permethrin external	2	
spinosad	4	
<b>Anti-Parkinson's agents</b>		
<b>Anticholinergics</b>		
benztropine mesylate oral	2	
trihexyphenidyl hcl	2	
<b>Anti-Parkinson's agents, other</b>		
amantadine hcl oral	2	
carbidopa-levodopa-entacapone	4	
entacapone	3	
tolcapone	4	QL
<b>Dopamine agonists</b>		
apomorphine hcl subcutaneous	5	QL; SP
bromocriptine mesylate oral capsule	4	
bromocriptine mesylate oral tablet	3	
NEUPRO TRANSDERMAL PATCH 24 HOUR 2 MG/24HR	4	
pramipexole dihydrochloride	2	
ropinirole hcl	2	
<b>Dopamine precursors/L-amino acid decarboxylase inhibitors</b>		
carbidopa oral	4	
carbidopa-levodopa er	2	
carbidopa-levodopa oral tablet	2	
carbidopa-levodopa oral tablet dispersible	3	
DUOPA	4	PA
<b>Monoamine oxidase B (MAO-B) inhibitors</b>		
rasagiline mesylate oral	4	ST
selegiline hcl oral	3	
<b>Antipsychotics</b>		
<b>1st generation/typical</b>		
chlorpromazine hcl oral tablet	2	
fluphenazine hcl oral	3	
haloperidol lactate oral concentrate 2 mg/ml	2	
haloperidol oral	2	
loxapine succinate	2	
pimozide	3	
thioridazine hcl oral	2	
thiothixene	2	
trifluoperazine hcl	2	
<b>2nd generation/atypical</b>		

KEY: **7D** .....7 day limit  
**MME** .....Morphine milligram equivalent  
**PA** .....Prior authorization required

**QL** .....Quantity limit  
**SP** .....Specialty medication  
**ST** .....Step therapy

Drug name	Tier	Notes
aripiprazole oral solution	4	QL
aripiprazole oral tablet	2	QL
asenapine maleate	4	ST; QL
lurasidone hcl	2	QL
olanzapine oral tablet	2	QL
olanzapine oral tablet dispersible	3	QL
paliperidone er	4	QL
quetiapine fumarate	2	QL
quetiapine fumarate er	3	QL
risperidone oral solution	2	
risperidone oral tablet	2	
risperidone oral tablet dispersible	3	
VRAYLAR	4	QL
ziprasidone hcl	3	QL
<b>Treatment-resistant</b>		
clozapine oral tablet	2	
clozapine oral tablet dispersible	4	QL
<b>Antivirals</b>		
LAGEVRIO	4	QL
PAXLOVID (150/100)	4	QL
PAXLOVID (300/100)	4	QL
<b>Anti-cytomegalovirus (CMV) agents</b>		
valganciclovir hcl oral solution reconstituted	4	QL
valganciclovir hcl oral tablet	2	QL
<b>Anti-hepatitis B (HBV) agents</b>		
adefovir dipivoxil	5	
BARACLUDE ORAL SOLUTION	5	
entecavir	3	
lamivudine oral tablet 100 mg	3	
<b>Anti-hepatitis C (HCV) agents</b>		
LEDIPASVIR-SOFOSBUVIR	4	PA; QL; SP
PEGASYS	5	PA; QL; SP
ribavirin oral	3	
SOFOSBUVIR-VELPATASVIR	4	PA; QL; SP
SOVALDI	5	PA; QL; SP
VOSEVI	4	PA; QL; SP
<b>Antitherpetic agents</b>		
acyclovir external ointment	3	QL
acyclovir oral	2	
famciclovir oral	2	QL
penciclovir	4	QL
valacyclovir hcl oral	2	QL
<b>Anti-HIV agents, integrase inhibitors (INSTI)</b>		
BIKTARVY	4	QL
DOVATO	4	QL
GENVOYA	4	QL
JULUCA	4	QL
STRIBILD	4	QL
TIVICAY	4	QL
<b>Anti-HIV agents, non-nucleoside reverse transcriptase inhibitors (NNRTI)</b>		

Drug name	Tier	Notes
COMPLERA	4	QL
EDURANT	4	QL
efavirenz	2	QL
efavirenz-emtricitab-tenofo df	2	QL
efavirenz-lamivudine-tenofovir	3	QL
etravirine	4	QL
INTELENCE ORAL TABLET 25 MG	4	QL
nevirapine	2	QL
nevirapine er	2	QL
<b>Anti-HIV agents, nucleoside and nucleotide reverse transcriptase inhibitors (NRTI)</b>		
abacavir sulfate oral solution	3	QL
abacavir sulfate oral tablet	2	QL
abacavir sulfate-lamivudine	2	QL
emtricitabine	3	QL
emtricitabine-tenofovir df oral tablet 100-150 mg, 133-200 mg, 167-250 mg	2	QL
emtricitabine-tenofovir df oral tablet 200-300 mg	2	QL; \$0 Copay once your healthcare provider confirms use is to prevent HIV as preexposure prophylaxis (PrEP) in individuals at increased risk of HIV infection.
lamivudine oral solution	2	QL
lamivudine oral tablet 150 mg, 300 mg	2	QL
lamivudine-zidovudine	2	QL
ODEFSEY	4	QL
tenofovir disoproxil fumarate	2	QL; \$0 Copay once your healthcare provider confirms use is to prevent HIV as preexposure prophylaxis (PrEP) in individuals at increased risk of HIV infection.
TRIUMEQ	4	QL
zidovudine	2	QL
<b>Anti-HIV agents, other</b>		
FUZEON	5	QL
maraviroc	2	QL
SELZENTRY ORAL SOLUTION	4	QL
<b>Anti-HIV agents, protease inhibitors</b>		
APTIVUS	4	QL
atazanavir sulfate	2	QL
darunavir	2	QL
EVOTAZ	4	QL
fosamprenavir calcium	4	QL

KEY: **7D** ..... 7 day limit  
**MME** ..... Morphine milligram equivalent  
**PA** ..... Prior authorization required

**QL** ..... Quantity limit  
**SP** ..... Specialty medication  
**ST** ..... Step therapy



Drug name	Tier	Notes
lopinavir-ritonavir	2	QL
NORVIR ORAL PACKET	4	QL
PREZISTA ORAL SUSPENSION	4	QL
REYATAZ ORAL PACKET	4	QL
ritonavir	2	QL
VIRACEPT	4	QL
<b>Anti-influenza agents</b>		
oseltamivir phosphate oral	2	QL
RELENZA DISKHALER	4	QL
rimantadine hcl	3	
<b>Anxiolytics</b>		
<b>Anxiolytics, other</b>		
buspirone hcl oral	2	
hydroxyzine hcl oral	2	
hydroxyzine pamoate oral	2	
meprobamate	4	
<b>Benzodiazepines</b>		
alprazolam er	3	QL
alprazolam intensol	3	QL
alprazolam oral tablet	2	QL
alprazolam oral tablet dispersible	3	QL
alprazolam xr	3	QL
chlordiazepoxide hcl	2	
clonazepam oral tablet	2	QL
clonazepam oral tablet dispersible	3	QL
clorazepate dipotassium	3	QL
diazepam intensol	2	QL
diazepam oral concentrate	2	QL
diazepam oral solution	2	
diazepam oral tablet	2	QL
estazolam	2	QL
lorazepam intensol	2	QL
lorazepam oral concentrate 2 mg/ml	2	QL
lorazepam oral tablet	2	QL
oxazepam	2	
quazepam	4	
<b>Bipolar agents</b>		
<b>Mood stabilizers</b>		
divalproex sodium er	2	
divalproex sodium oral	2	
EQUETRO	4	
lithium	2	
lithium carbonate er	2	
lithium carbonate oral	2	
<b>Blood glucose monitoring</b>		
ACCU-CHEK AVIVA DEVICE	3	QL
ACCU-CHEK AVIVA PLUS TEST STRIPS	3	QL
ACCU-CHEK FASTCLIX LANCET KIT	3	QL
ACCU-CHEK GUIDE TEST STRIPS	3	QL
ACCU-CHEK GUIDE CONTROL	3	QL

Drug name	Tier	Notes
ACCU-CHEK GUIDE KIT W/DEVICE	3	QL
ACCU-CHEK SMARTVIEW CONTROL	3	QL
ACCU-CHEK SMARTVIEW TEST STRIPS	3	QL
ACCU-CHEK SOFTCLIX LANCET DEVICE KIT	3	QL
AUTOLET LANCING DEVICE	3	
CARESENS LANCETS 30G	3	QL
CARETOUCH LANCING/EJECTOR	3	
CHEMSTRIP K	3	
CHEMSTRIP MICRAL	3	
CHEMSTRIP UGK	3	
CHOSEN LANCETS 30G	3	QL
CHOSEN LANCING DEVICE	3	
CHOSEN SAFETY LANCETS 28G	3	QL
CLEVER CHOICE COMFORT EZ	3	QL
COMFORT TOUCH TWIST LANCET 30G	3	QL
CONTOUR CONTROL IN VITRO LIQUID LOW , NORMAL	3	QL
CVS KETONE CARE	3	
DEXCOM G6 RECEIVER	4	PA; QL
DEXCOM G6 SENSOR	4	PA; QL
DEXCOM G6 TRANSMITTER	4	PA; QL
DEXCOM G7 RECEIVER	4	PA; QL
DEXCOM G7 SENSOR	4	PA; QL
DIASTIX REAGENT	3	
FORA TEST N'GO ADV-VOICE-6 CON	3	
FREESTYLE LIBRE 14 DAY READER	4	PA; QL
FREESTYLE LIBRE 14 DAY SENSOR	4	PA; QL
FREESTYLE LIBRE 2 READER	4	PA; QL
FREESTYLE LIBRE 2 SENSOR	4	PA; QL
FREESTYLE LIBRE 3 READER	4	PA; QL
FREESTYLE LIBRE 3 SENSOR	4	PA; QL
FREESTYLE LIBRE READER	4	PA; QL
KETO-DIASTIX	3	
KETONE TEST	3	
KETOSTIX	3	
LANCETS	3	
LANCETS SUPER THIN	3	QL
MICROLET NEXT LANCING DEVICE	3	
NOVOPEN ECHO	3	
ONETOUCH DELICA PLUS LANCING	3	
ONETOUCH DELICA SAFETY LANCING	3	QL
ONETOUCH ULTRA TEST STRIPS	3	QL
ONETOUCH ULTRA 2 KIT W/DEVICE	3	QL
ONETOUCH ULTRA TEST STRIPS	3	QL
ONETOUCH VERIO FLEX SYSTEM KIT	3	QL
ONETOUCH VERIO IN VITRO LIQUID HIGH	3	QL

KEY: **7D** .....7 day limit  
**MME** .....Morphine milligram equivalent  
**PA** .....Prior authorization required

**QL** .....Quantity limit  
**SP** .....Specialty medication  
**ST** .....Step therapy

Drug name	Tier	Notes
ONETOUCH VERIO TEST STRIPS	3	QL
PERFECT POINT SAFETY LANCETS	3	QL
TECHLITE LANCETS 26G	3	QL
VERIFINE SAFE LANCET MINI 21G	3	QL
VERIFINE SAFE LANCET MINI 23G	3	QL
VERIFINE SAFE LANCET MINI 28G	3	QL
VERIFINE SAFE LANCET MINI 30G	3	QL
VIVAGUARD LANCETS 30G	3	QL
VIVAGUARD LANCING DEVICE	3	
VIVAGUARD SAFETY LANCETS 28G	3	QL
<b>Blood glucose regulators</b>		
<b>Antidiabetic agents</b>		
acarbose oral	2	QL
BYDUREON BCISE AUTOINJECTOR	3	PA; QL
FARXIGA	3	QL
glimepiride oral tablet 1 mg, 2 mg, 4 mg	2	QL
glipizide er	2	QL
glipizide ir	2	QL
glipizide xl	2	QL
glipizide-metformin hcl	3	QL
glyburide micronized	2	QL
glyburide oral	2	QL
glyburide-metformin	2	QL
JARDIANCE	3	QL
JENTADUETO	3	QL
JENTADUETO XR	3	QL
metformin hcl er	2	QL
metformin hcl oral solution	4	QL
metformin hcl oral tablet 1000 mg, 500 mg, 850 mg	2	QL
miglitol	3	QL
MOUNJARO	3	PA; QL
nateglinide	3	QL
OZEMPIC	3	PA; QL
pioglitazone hcl	2	QL
pioglitazone hcl-metformin hcl	3	QL
repaglinide	2	QL
RYBELSUS	3	PA; QL
saxagliptin hcl	3	QL
saxagliptin-metformin er	3	QL
SOLIQUA	3	QL
SYNJARDY	3	QL
SYNJARDY XR	3	QL
TRADJENTA	3	QL
TRULICITY	3	PA; QL
XIGDUO XR	3	QL
<b>Glycemic agents</b>		
BAQSIMI ONE PACK	1	QL
BAQSIMI TWO PACK	1	QL
diazoxide oral	4	
glucagon emergency kit	1	QL

Drug name	Tier	Notes
GLUCAGON EMERGENCY KIT	1	QL
GLUCO TO GO	3	
GVOKE HYPOPEN 1-PACK	1	QL
GVOKE HYPOPEN 2-PACK	1	QL
GVOKE KIT	1	QL
GVOKE PFS	1	QL
ZEGALOGUE	1	QL
<b>Insulins</b>		
BASAGLAR KWIKPEN	1	QL
HUMALOG	1	QL
HUMALOG KWIKPEN	1	QL
HUMALOG MIX 50/50 KWIKPEN	1	QL
HUMALOG MIX 50/50 VIAL	1	QL
HUMALOG MIX 75/25 KWIKPEN	1	QL
HUMALOG MIX 75/25 VIAL	1	QL
HUMALOG U-100 JUNIOR KWIKPEN	1	QL
HUMULIN 70/30 KWIKPEN	1	QL
HUMULIN 70/30 VIAL	1	QL
HUMULIN N KWIKPEN	1	QL
HUMULIN N VIAL	1	QL
HUMULIN R U-500 KWIKPEN	1	QL
HUMULIN R U-500 VIAL	1	QL
HUMULIN R VIAL	1	QL
INSULIN ASPART PROT & ASPART	1	QL
INSULIN DEGLUDEC	1	QL
INSULIN DEGLUDEC FLEXTOUCH	1	QL
INSULIN LISPRO	1	QL
INSULIN LISPRO (1 UNIT DIAL)	1	QL
INSULIN LISPRO JUNIOR KWIKPEN	1	QL
INSULIN LISPRO PROT & LISPRO	1	QL
LEVEMIR FLEXPEN	1	QL
LEVEMIR U-100 VIAL	1	QL
REZVOGLAR KWIKPEN	1	QL
TRESIBA	1	QL
TRESIBA FLEXTOUCH	1	QL
<b>Blood products and modifiers</b>		
<b>Anticoagulants</b>		
ELIQUIS	3	QL
ELIQUIS DVT/PE STARTER PACK	3	QL
enoxaparin sodium	3	QL
fondaparinux sodium	4	QL
FRAGMIN	4	QL
heparin sodium (porcine)	2	
heparin sodium (porcine) pf	2	
jantoven	2	
warfarin sodium oral	2	
XARELTO	3	QL
XARELTO STARTER PACK	3	QL
<b>Blood formation modifiers</b>		
anagrelide hcl	4	
ARANESP (ALBUMIN FREE)	5	QL; SP

KEY: **7D** ..... 7 day limit  
**MME** ..... Morphine milligram equivalent  
**PA** ..... Prior authorization required

**QL** ..... Quantity limit  
**SP** ..... Specialty medication  
**ST** ..... Step therapy

Drug name	Tier	Notes
LEUKINE	5	SP
NEULASTA	5	SP
NEULASTA ONPRO	5	SP
plerixafor	5	SP
PROMACTA	5	PA; QL; SP
RETACRIT	5	QL; SP
ZARXIO	5	SP
<b>Hemostasis agents</b>		
aminocaproic acid oral	4	
RECOTHROM EXTERNAL SOLUTION RECONSTITUTED 5000 UNIT	4	
RECOTHROM SPRAY KIT	4	
THROMBIN-JMI EPISTAXIS	4	
THROMBIN-JMI EXTERNAL KIT	4	
tranexamic acid oral	3	QL
<b>Platelet modifying agents</b>		
aspirin-dipyridamole er	4	QL
BRILINTA	4	QL
cilostazol	2	
clopidogrel bisulfate oral	2	QL
dipyridamole oral	2	
prasugrel hcl	2	QL
YOSPRALA	3	QL
<b>Cardiovascular agents</b>		
<b>Alpha-adrenergic agonists</b>		
clonidine	3	
clonidine hcl oral	2	
guanfacine hcl	2	QL
METHYLDOPA	2	
midodrine hcl	2	
<b>Alpha-adrenergic blocking agents</b>		
doxazosin mesylate oral	2	
phenoxybenzamine hcl oral	4	
prazosin hcl oral	2	
<b>Angiotensin II receptor antagonists</b>		
candesartan cilexetil	3	QL
EDARBI	4	QL
irbesartan	2	QL
losartan potassium oral	2	QL
olmesartan medoxomil oral	2	QL
telmisartan	3	QL
valsartan oral tablet	2	QL
<b>Angiotensin-converting enzyme (ACE) inhibitors</b>		
benazepril hcl oral	2	QL
captopril oral	2	QL
enalapril maleate oral tablet	2	QL
fosinopril sodium	2	QL
lisinopril oral	2	QL
moexipril hcl	2	QL
perindopril erbumine	2	QL
quinapril hcl	2	QL
ramipril	2	QL

Drug name	Tier	Notes
trandolapril	2	QL
<b>Antiarrhythmics</b>		
amiodarone hcl oral	2	
disopyramide phosphate	3	
dofetilide	4	QL
flecainide acetate	2	
mexiletine hcl oral	3	
MULTAQ	4	PA; QL
NORPACE CR	3	
propafenone hcl	2	
propafenone hcl er	4	
quinidine gluconate er	2	
quinidine sulfate	2	
sotalol hcl (af)	2	
sotalol hcl oral	2	
SOTYLIZE	4	PA
<b>Beta-adrenergic blocking agents</b>		
acebutolol hcl oral	2	
atenolol oral	2	
betaxolol hcl oral	2	
bisoprolol fumarate oral	2	
carvedilol	2	
labetalol hcl oral	2	
metoprolol succinate er	2	
metoprolol tartrate oral tablet 100 mg, 25 mg, 50 mg	2	
nadolol oral	2	
pindolol	2	
propranolol hcl er	2	
propranolol hcl oral	2	
timolol maleate oral	2	
<b>Calcium channel blocking agents</b>		
amlodipine besylate oral	2	
cartia xt	2	
diltiazem hcl er beads	2	
diltiazem hcl er coated beads	2	
diltiazem hcl er oral capsule extended release 12 hour	3	
diltiazem hcl er oral capsule extended release 24 hour	2	
diltiazem hcl er oral tablet extended release 24 hour	3	
diltiazem hcl oral	2	
dilt-xr	2	
felodipine er	2	
isradipine	2	
matzim la	3	
nicardipine hcl oral	3	
nifedipine er	2	QL
nifedipine er osmotic release	2	QL
nifedipine oral	2	
nimodipine oral	4	
nisoldipine er	3	

KEY: **7D** ..... 7 day limit  
**MME** ..... Morphine milligram equivalent  
**PA** ..... Prior authorization required

**QL** ..... Quantity limit  
**SP** ..... Specialty medication  
**ST** ..... Step therapy

Drug name	Tier	Notes
tiadylt er	2	
verapamil hcl er oral capsule extended release 24 hour	3	
verapamil hcl er oral tablet extended release	2	
verapamil hcl oral	2	
<b>Cardiovascular agents, other</b>		
aliskiren fumarate	4	QL
amiloride-hydrochlorothiazide	2	
amlodipine besylate-benazepril hcl	2	QL
amlodipine besylate-valsartan	3	QL
atenolol-chlorthalidone	2	
benazepril-hydrochlorothiazide	3	QL
bisoprolol-hydrochlorothiazide	2	QL
candesartan cilexetil-hctz	3	QL
captopril-hydrochlorothiazide	3	QL
CORLANOR	4	PA; QL
digoxin oral solution	3	
digoxin oral tablet 125 mcg, 250 mcg	2	
digoxin oral tablet 62.5 mcg	4	
EDARBYCLOR	4	QL
enalapril-hydrochlorothiazide	2	QL
ENTRESTO	4	PA; QL
fosinopril sodium-hctz	3	QL
irbesartan-hydrochlorothiazide	2	QL
isosorb dinitrate-hydralazine	3	QL
ivabradine hcl	4	PA; QL
lisinopril-hydrochlorothiazide	2	QL
losartan potassium-hctz	2	QL
metoprolol-hydrochlorothiazide	3	
olmesartan medoxomil-hctz	2	QL
pentoxifylline er	2	
quinapril-hydrochlorothiazide	3	QL
ranolazine er	4	QL
spironolactone-hctz	2	
telmisartan-hctz	3	QL
triamterene-hctz	2	
valsartan-hydrochlorothiazide	2	QL
<b>Diuretics, carbonic anhydrase inhibitors</b>		
acetazolamide er	3	
acetazolamide oral	3	
methazolamide oral	4	
<b>Diuretics, loop</b>		
bumetanide oral	2	
ethacrynic acid	4	
furosemide oral	2	
toremide	2	
<b>Diuretics, potassium-sparing</b>		
amiloride hcl oral	2	
eplerenone	3	
spironolactone oral tablet	2	
<b>Diuretics, thiazide</b>		

Drug name	Tier	Notes
chlorthalidone	2	
DIURIL	3	
hydrochlorothiazide oral	2	
indapamide	2	
metolazone	2	
<b>Dyslipidemics, fibric acid derivatives</b>		
fenofibrate micronized oral capsule 134 mg, 200 mg, 67 mg	2	
fenofibrate oral capsule 134 mg, 200 mg, 67 mg	2	
fenofibrate oral tablet 145 mg, 160 mg, 48 mg, 54 mg	2	
gemfibrozil oral	2	
<b>Dyslipidemics, HMG COA reductase inhibitors</b>		
atorvastatin calcium oral tablet 10 mg, 20 mg	2	QL; \$0 Copay for members between ages 40 to 75 years.
atorvastatin calcium oral tablet 40 mg, 80 mg	2	QL
fluvastatin sodium	3	QL; \$0 Copay for members between ages 40 to 75 years once your health-care provider confirms risk of cardiovascular disease.
lovastatin oral	2	QL; \$0 Copay for members between ages 40 to 75 years.
pravastatin sodium	2	QL; \$0 Copay for members between ages 40 to 75 years once your health-care provider confirms risk of cardiovascular disease.
rosuvastatin calcium oral tablet 10 mg, 5 mg	2	QL; \$0 Copay for members between ages 40 to 75 years once your health-care provider confirms risk of cardiovascular disease.
rosuvastatin calcium oral tablet 20 mg, 40 mg	2	QL
simvastatin oral tablet 10 mg, 20 mg, 40 mg, 5 mg	2	QL; \$0 Copay for members between ages 40 to 75 years.
simvastatin oral tablet 80 mg	2	QL
<b>Dyslipidemics, other</b>		
cholestyramine light	3	

KEY: **7D** ..... 7 day limit  
**MME** ..... Morphine milligram equivalent  
**PA** ..... Prior authorization required

**QL** ..... Quantity limit  
**SP** ..... Specialty medication  
**ST** ..... Step therapy

Drug name	Tier	Notes
cholestyramine oral	3	
colesevelam hcl	3	
colestipol hcl oral granules	3	
colestipol hcl oral packet	3	
colestipol hcl oral tablet	2	
ezetimibe	2	QL
ezetimibe-simvastatin	3	QL
icosapent ethyl	4	PA
niacin (antihyperlipidemic)	3	
niacin er (antihyperlipidemic)	3	
niacor	3	
omega-3-acid ethyl esters	2	PA; QL
prevalite	3	
REPATHA	4	PA; QL
REPATHA PUSHTRONEX SYSTEM	4	PA; QL
REPATHA SURECLICK	4	PA; QL
<b>Vasodilators, direct-acting arterial/venous</b>		
isosorbide dinitrate oral tablet 10 mg, 20 mg, 30 mg, 5 mg	2	
isosorbide mononitrate	2	
isosorbide mononitrate er	2	
NITRO-BID	3	
NITRO-DUR TRANSDERMAL PATCH 24 HOUR 0.3 MG/HR, 0.8 MG/HR	4	
nitroglycerin rectal	4	QL
nitroglycerin sublingual	2	
nitroglycerin transdermal	2	
<b>Vasodilators, direct-acting arterial</b>		
hydralazine hcl oral	2	
minoxidil oral	2	
<b>Central nervous system agents</b>		
<b>Attention deficit hyperactivity disorder agents, amphetamines</b>		
amphetamine sulfate	4	PA
amphetamine-dextroamphetamine	2	PA; QL
amphetamine-dextroamphetamine er	3	PA; QL
dextroamphetamine sulfate er	3	PA; QL
dextroamphetamine sulfate oral solution	3	PA
dextroamphetamine sulfate oral tablet 10 mg, 5 mg	2	PA; QL
lisdexamfetamine dimesylate oral capsule	4	PA; QL
methamphetamine hcl	4	PA
<b>Attention deficit hyperactivity disorder agents, non-amphetamines</b>		
atomoxetine hcl	3	QL
clonidine hcl er oral tablet extended release 12 hour	3	
dexmethylphenidate hcl	2	PA; QL
dexmethylphenidate hcl er	3	PA; QL
guanfacine hcl er	2	QL
methylphenidate hcl er (cd)	3	PA; QL

Drug name	Tier	Notes
methylphenidate hcl er (la)	3	PA; QL
methylphenidate hcl er (osm) oral tablet extended release 18 mg, 27 mg, 36 mg, 54 mg	3	PA; QL
methylphenidate hcl er oral tablet extended release	3	PA; QL
methylphenidate hcl oral solution	3	PA; QL
methylphenidate hcl oral tablet	2	PA; QL
methylphenidate hcl oral tablet chewable	3	PA; QL
<b>Central nervous system, other</b>		
AUSTEDO	5	PA; QL; SP
caffeine citrate oral	2	
DAYBUE	5	PA; QL; SP
INGREZZA	5	PA; QL; SP
riluzole	4	SP
tetrabenazine	5	PA; QL; SP
<b>Fibromyalgia agents</b>		
pregabalin oral capsule	2	QL
SAVELLA	4	ST; QL
SAVELLA TITRATION PACK	4	ST; QL
<b>Multiple sclerosis agents</b>		
AVONEX PEN	5	PA; QL; SP
AVONEX PREFILLED	5	PA; QL; SP
BETASERON	5	PA; QL; SP
dalfampridine er	4	PA; QL; SP
dimethyl fumarate oral	4	PA; QL; SP
dimethyl fumarate starter pack	4	PA; QL; SP
fingolimod hcl	5	PA; QL; SP
glatiramer acetate	4	PA; QL; SP
glatopa	4	PA; QL; SP
PLEGRIDY	5	PA; QL; SP
PLEGRIDY STARTER PACK	5	PA; QL; SP
teriflunomide	5	PA; QL; SP
<b>Dental and oral agents</b>		
cevimeline hcl	4	
chlorhexidine gluconate mouth/throat	2	
kourzeq	2	
oralone	2	
periogard	2	
pilocarpine hcl oral	3	
triamcinolone acetonide mouth/throat	2	
<b>Dermatological agents</b>		
accutane	4	
acitretin	4	
adapalene external cream	4	PA; QL
adapalene external gel	4	PA; QL
ammonium lactate external cream	2	
amnestem	4	
azelaic acid external	4	QL
benzoyl peroxide-erythromycin	3	QL

KEY: **7D** ..... 7 day limit  
**MME** ..... Morphine milligram equivalent  
**PA** ..... Prior authorization required

**QL** ..... Quantity limit  
**SP** ..... Specialty medication  
**ST** ..... Step therapy

Drug name	Tier	Notes
brimonidine tartrate external	4	QL
calcipotriene external cream	4	QL
calcipotriene external ointment	4	QL
calcipotriene external solution	3	QL
calcipotriene-betameth diprop	4	QL
calcitriol external	4	QL
claravis	4	
CLINDACIN ETZ EXTERNAL KIT	2	QL
clindacin etz external swab	2	QL
clindacin-p	2	QL
clindamycin phos-benzoyl perox external gel 1.2-5 %	3	QL
clindamycin phosphate external gel	3	QL
clindamycin phosphate external lotion	3	QL
clindamycin phosphate external solution	2	QL
clindamycin phosphate external swab	2	QL
doxepin hcl external	4	PA; QL
DUOBRII	4	ST; QL
DUPIXENT	5	PA; QL; SP
ery pad 2%	2	
erythromycin external	3	
ESKATA	4	
imiquimod external cream 5 %	2	QL
isotretinoin oral capsule 10 mg, 20 mg, 30 mg, 40 mg	4	
ivermectin external cream	4	QL
methoxsalen rapid	4	
metronidazole external cream	3	
metronidazole external gel 0.75 %	3	
metronidazole external lotion	3	
pimecrolimus	4	ST; QL
podofilox external gel	4	
podofilox external solution	2	
REGRANEX	3	PA; QL
SANTYL	4	QL
selenium sulfide external lotion	2	
SKYRIZI SUBCUTANEOUS SOLUTION CARTRIDGE	5	PA; QL; SP
STELARA SUBCUTANEOUS	5	PA; QL; SP
sulfacetamide sodium (acne)	4	
tacrolimus external	4	ST; QL
tazarotene external cream 0.1 %	4	PA; QL
tazarotene external gel	4	PA; QL
tretinoin external cream	3	PA; QL
VEREGEN	4	QL
zenatane	4	
<b>Electrolytes/minerals/metals/vitamins</b>		
<b>Electrolyte/mineral replacement</b>		
carglumic acid	5	PA; SP
EFFER-K ORAL TABLET EFFERVESCENT 10 MEQ, 20 MEQ	3	

Drug name	Tier	Notes
effer-k oral tablet effervescent 25 meq	2	
GALZIN	4	
klor-con 10	2	
klor-con m10	2	
klor-con m15	2	
klor-con m20	2	
klor-con oral packet	4	
klor-con oral tablet extended release	2	
klor-con/ef	2	
k-prime	2	
levocarnitine oral solution	3	
levocarnitine oral tablet	2	
levocarnitine sf	3	
potassium chloride crys er	2	
potassium chloride er	2	
potassium chloride oral packet	4	
potassium chloride oral solution	2	
potassium citrate er	3	
sodium fluoride oral	1	\$0 Copay for members ages 0 to 16 years.
<b>Electrolyte/mineral/metal modifiers</b>		
CHEMET	3	
deferasirox granules	5	PA; SP
deferasirox oral packet	5	PA; SP
deferasirox oral tablet	4	PA; SP
deferasirox oral tablet soluble	5	PA; SP
LOKELMA	4	PA; QL
sodium polystyrene sulfonate	2	
SPS	3	
trientine hcl oral capsule 250 mg	5	PA; QL; SP
VELTASSA ORAL PACKET 16.8 GM, 25.2 GM, 8.4 GM	4	PA; QL
<b>Phosphate binders</b>		
AURYXIA	4	SP
calcium acetate (phos binder)	2	
calcium acetate oral tablet 667 mg	2	
FOSRENOL ORAL PACKET	4	
lanthanum carbonate	4	
sevelamer carbonate oral packet	4	
sevelamer carbonate oral tablet	3	
VELPHORO	3	SP
<b>Vitamins</b>		
ATABEX OB	2	
cyanocobalamin injection solution 1000 mcg/ml	2	
CYANOCOBALAMIN INJECTION SOLUTION 2000 MCG/ML	2	
DODEX	3	
ergocalciferol oral capsule	2	
folic acid oral tablet 1 mg	2	

KEY: **7D** ..... 7 day limit  
**MME** ..... Morphine milligram equivalent  
**PA** ..... Prior authorization required

**QL** ..... Quantity limit  
**SP** ..... Specialty medication  
**ST** ..... Step therapy



Drug name	Tier	Notes
folic acid oral tablet 400 mcg, 800 mcg	1	
ft folic acid	1	
M-NATAL PLUS	2	
NEONATAL COMPLETE	2	
NEONATAL PLUS	2	
ONE VITE WOMENS PLUS	2	
phytonadione oral	4	QL
pnv prenatal plus multivit+dha	2	
prenatal oral tablet 27-1 mg	2	
prenatal plus vitamin/mineral	2	
PRENATRIX	2	
PRENATRYL	2	
TRINATE	2	
TRUE FOLIC ACID ORAL TABLET 1 MG	2	
TRUE FOLIC ACID ORAL TABLET 400 MCG	1	
VINATE ONE ORAL TABLET 60-1 MG	2	
vitamin d (ergocalciferol) oral capsule 1.25 mg (50000 ut), 50000 unit	2	
VITATHELY WITH GINGER	2	
WESNATAL DHA COMPLETE	2	
WESTAB PLUS	2	
<b>Gastrointestinal agents</b>		
<b>Antispasmodics, gastrointestinal</b>		
dicyclomine hcl oral capsule	2	
dicyclomine hcl oral solution	3	
dicyclomine hcl oral tablet	2	
glycopyrrolate oral tablet 1 mg, 2 mg	2	
methscopolamine bromide oral	3	
<b>Gastrointestinal agents, other</b>		
alvimopan	4	
amoxicill-clarithro-lansopraz	4	QL
cromolyn sodium oral	4	
diphenoxylate-atropine oral liquid	3	
diphenoxylate-atropine oral tablet	2	
loperamide hcl oral capsule	2	
opium	4	QL
RELISTOR SUBCUTANEOUS	4	PA; QL
SYMPROIC	3	PA; QL
ursodiol oral capsule 300 mg	2	
ursodiol oral tablet	2	
<b>Histamine2 (H2) receptor antagonists</b>		
cimetidine hcl	2	
cimetidine oral	2	
famotidine oral suspension reconstituted	3	
famotidine oral tablet 20 mg, 40 mg	2	
nizatidine	3	
<b>Irritable bowel syndrome agents</b>		
alosetron hcl	4	PA; QL

Drug name	Tier	Notes
LINZESS	3	PA; QL
lubiprostone	4	QL
VIBERZI	4	PA; QL; SP
<b>Laxatives</b>		
bisacodyl ec	1	QL
bisacodyl oral	1	QL
citroma	1	QL
clearlax	1	QL
CLENPIQ	4	\$0 Copay once your healthcare provider confirms use is to prepare for a preventive colonoscopy.
constulose	2	
enulose	2	
FRESKARO MAGNESIUM CITRATE	1	QL
ft clearlax	1	QL
ft laxative	1	QL
ft magnesium citrate	1	QL
gavilax oral powder	1	QL
gavilyte-c	2	QL; \$0 Copay once your healthcare provider confirms use is to prepare for a preventive colonoscopy.
gavilyte-g	2	QL; \$0 Copay once your healthcare provider confirms use is to prepare for a preventive colonoscopy.
gavilyte-n with flavor pack	2	QL; \$0 Copay once your healthcare provider confirms use is to prepare for a preventive colonoscopy.
generlac	2	
gentle laxative oral tablet delayed release	1	QL
gentlelax	1	QL
glycolax	1	QL
KRISTALOSE	4	
lactulose encephalopathy oral solution 10 gm/15ml	2	
lactulose oral packet	4	
lactulose oral solution	2	
magnesium citrate oral solution	1	QL
mm clearlax	1	QL

KEY: **7D** ..... 7 day limit  
**MME** ..... Morphine milligram equivalent  
**PA** ..... Prior authorization required

**QL** ..... Quantity limit  
**SP** ..... Specialty medication  
**ST** ..... Step therapy

Drug name	Tier	Notes
na sulfate-k sulfate-mg sulf	4	QL; \$0 Copay once your healthcare provider confirms use is to prepare for a preventive colonoscopy.
ONELAX MAGNESIUM CITRATE	1	QL
peg 3350-kcl-na bicarb-nacl	2	QL; \$0 Copay once your healthcare provider confirms use is to prepare for a preventive colonoscopy.
peg-3350/electrolytes	2	QL; \$0 Copay once your healthcare provider confirms use is to prepare for a preventive colonoscopy.
peg-3350/electrolytes/ascorbic	4	QL; \$0 Copay once your healthcare provider confirms use is to prepare for a preventive colonoscopy.
peg-kcl-nacl-nasulf-na asc-c	4	QL; \$0 Copay once your healthcare provider confirms use is to prepare for a preventive colonoscopy.
PLENVU	4	QL; \$0 Copay once your healthcare provider confirms use is to prepare for a preventive colonoscopy.
polyethylene glycol 3350 oral powder	1	QL
TRUE LAXATIVE	1	QL
<b>Protectants</b>		
misoprostol oral	2	
sucralfate oral suspension	4	PA
sucralfate oral tablet	2	
<b>Proton pump inhibitors</b>		
dexlansoprazole	4	QL
esomeprazole magnesium oral capsule delayed release	2	QL
ft acid reducer oral capsule delayed release 15 mg	2	QL
lansoprazole oral capsule delayed release	2	QL
omeprazole oral capsule delayed release 10 mg	2	QL

Drug name	Tier	Notes
omeprazole oral capsule delayed release 20 mg, 40 mg	2	
pantoprazole sodium oral tablet delayed release	2	QL
rabeprazole sodium oral tablet delayed release	3	QL
sm lansoprazole	2	QL
<b>Genetic or enzyme disorder: replacement, modifiers, treatment</b>		
betaine	5	SP
CREON	3	
CYSTAGON	5	SP
MYALEPT	5	PA; QL; SP
sapropterin dihydrochloride	5	PA; QL; SP
SUCRAID	5	PA; SP
ZENPEP	3	
<b>Genitourinary agents</b>		
<b>Antispasmodics, urinary</b>		
darifenacin hydrobromide er	3	ST; QL
fesoterodine fumarate er	4	ST; QL
flavoxate hcl	2	
oxybutynin chloride er	2	QL
oxybutynin chloride oral solution	2	
oxybutynin chloride oral tablet 5 mg	2	
solifenacin succinate	2	QL
tolterodine tartrate	3	
tolterodine tartrate er	3	
tropium chloride	3	
tropium chloride er	3	ST
<b>Benign prostatic hypertrophy agents</b>		
alfuzosin hcl er	2	
CARDURA XL	4	QL
dutasteride oral	2	QL
dutasteride-tamsulosin hcl	4	
finasteride oral tablet 5 mg	2	
silodosin	3	QL
tamsulosin hcl	2	
terazosin hcl	2	
<b>Genitourinary agents, other</b>		
bethanechol chloride oral	2	
ELMIRON	3	
ENCARE	1	QL
OPTIONS GYNOL II CONTRACEPTIVE	1	
penicillamine oral	5	SP
phenazo oral tablet 200 mg	2	
phenazopyridine hcl oral tablet 100 mg, 200 mg	2	
tadalafil oral tablet 2.5 mg, 5 mg	4	QL
tiopronin oral tablet	5	SP
VCF VAGINAL CONTRACEPTIVE	1	
<b>Hormonal agents, stimulant/replacement/modifying (adrenal)</b>		

KEY: **7D** ..... 7 day limit  
**MME** ..... Morphine milligram equivalent  
**PA** ..... Prior authorization required

**QL** ..... Quantity limit  
**SP** ..... Specialty medication  
**ST** ..... Step therapy



Drug name	Tier	Notes
ALA SCALP	4	
alclometasone dipropionate	2	
amcinonide	4	
APEXICON E	3	QL
betamethasone dipropionate aug	3	
betamethasone dipropionate external	3	
betamethasone valerate external cream	3	
betamethasone valerate external lotion	3	
betamethasone valerate external ointment	3	
clobetasol propionate e	4	QL
clobetasol propionate external cream	3	QL
clobetasol propionate external gel	3	QL
clobetasol propionate external ointment	3	QL
clobetasol propionate external solution	2	QL
clocortolone pivalate	4	ST; QL
CORDRAN	4	QL
desonide external cream	3	QL
desonide external lotion	3	QL
desonide external ointment	3	QL
desoximetasone external	3	QL
dexamethasone intensol	2	
dexamethasone oral elixir	2	
dexamethasone oral solution	2	
dexamethasone oral tablet	2	
diflorasone diacetate external cream	4	QL
fludrocortisone acetate oral	2	
fluocinolone acetonide body	3	QL
fluocinolone acetonide external	3	QL
fluocinolone acetonide scalp	3	QL
fluocinonide emulsified base	3	QL
fluocinonide external cream 0.05 %	3	QL
fluocinonide external gel	3	QL
fluocinonide external ointment	3	QL
fluocinonide external solution	3	QL
flurandrenolide external lotion	4	ST; QL
fluticasone propionate external cream	2	
fluticasone propionate external ointment	2	
halobetasol propionate external cream	3	QL
halobetasol propionate external ointment	3	QL
hydrocortisone butyrate external cream	4	QL
hydrocortisone butyrate external ointment	4	

Drug name	Tier	Notes
hydrocortisone butyrate external solution	4	
hydrocortisone external cream 2.5 %	2	
hydrocortisone external lotion 2.5 %	2	
hydrocortisone external ointment 1 %, 2.5 %	2	
hydrocortisone oral	2	
hydrocortisone valerate	3	QL
methylprednisolone oral	2	
mometasone furoate external	2	
PANDEL	4	
prednisolone oral solution	2	
prednisolone oral tablet	3	
prednisolone sodium phosphate oral solution	2	
prednisolone sodium phosphate oral tablet dispersible	4	
prednisone intensol	3	
prednisone oral solution	3	
prednisone oral tablet	2	
prednisone oral tablet therapy pack	2	
TEXACORT	3	
triamcinolone acetonide external cream	2	QL
triamcinolone acetonide external lotion	2	
triamcinolone acetonide external ointment 0.025 %, 0.1 %, 0.5 %	2	
triderm	2	QL
<b>Hormonal agents, stimulant/replacement/modifying (pituitary)</b>		
cabergoline	2	
desmopressin ace spray refig	3	
desmopressin acetate injection	4	
desmopressin acetate oral	2	
desmopressin acetate pf	4	
desmopressin acetate spray	3	
INCRELEX	5	PA; QL; SP
OMNITROPE	4	PA; QL; SP
<b>Selective estrogen receptor modifying agents</b>		
CLOMID	3	PA
<b>Hormonal agents, stimulant/replacement/modifying (prostaglandins)</b>		
PREPIDIL	4	
<b>Hormonal agents, stimulant/replacement/modifying (sex hormones/modifiers)</b>		
<b>Androgens</b>		
ANDRODERM	3	PA; QL
danazol oral	3	
methyltestosterone oral	4	
testosterone cypionate intramuscular	2	PA
testosterone enanthate intramuscular	2	PA

KEY: **7D** ..... 7 day limit  
**MME** ..... Morphine milligram equivalent  
**PA** ..... Prior authorization required

**QL** ..... Quantity limit  
**SP** ..... Specialty medication  
**ST** ..... Step therapy

Drug name	Tier	Notes
testosterone transdermal gel 1.62 %, 20.25 mg/act (1.62%), 50 mg/5gm (1%)	3	PA; QL
<b>Estrogens</b>		
afirmelle	1	
altavera	1	
alyacen 1/35	1	
alyacen 7/7/7	1	
amethyst	1	
ANNOVERA	1	QL
apri	1	
aranelle	1	
ashlyna	1	
aubra eq	1	
aurovela 1.5/30	1	
aurovela 1/20	1	
aurovela 24 fe	1	
aurovela fe 1.5/30	1	
aurovela fe 1/20	1	
aviane	1	
ayuna	1	
azurette	1	
balziva	1	
BIJUVA ORAL CAPSULE 0.5-100 MG	4	
blisovi 24 fe	1	
blisovi fe 1.5/30	1	
blisovi fe 1/20	1	
briellyn	1	
camrese	1	
camrese lo	1	
charlotte 24 fe	1	
chateal eq	1	
CLIMARA PRO	4	QL
cryselle-28	1	
cyred eq	1	
dasetta 1/35	1	
dasetta 7/7/7	1	
daysee	1	
delyla	1	
desogestrel-ethinyl estradiol	1	
dolishale	1	
dotti	3	QL
drospiren-eth estrad-levomefol	1	
drospirenone-ethinyl estradiol	1	
DUAVEE	4	QL
elinest	1	
eluryng	1	
enilloring	1	
enpresse-28	1	
enskyce	1	
estarylla	1	
estradiol oral	2	

Drug name	Tier	Notes
estradiol transdermal patch twice weekly	3	QL
estradiol transdermal patch weekly	2	QL
estradiol vaginal cream	3	
estradiol vaginal tablet	3	QL
estradiol valerate intramuscular	2	
estradiol-norethindrone acet	3	
ESTRING	3	QL
ethynodiol diac-eth estradiol	1	
etonogestrel-ethinyl estradiol	1	
falmina	1	
finzala	1	
fyavolv	3	
gemmily	1	
hailey 1.5/30	1	
hailey 24 fe	1	
hailey fe 1.5/30	1	
hailey fe 1/20	1	
haloette	1	
iclevia	1	
introvale	1	
isibloom	1	
jaimiess	1	
jasmiel	1	
jinteli	3	
jolessa	1	
joyeaux	1	
juleber	1	
junel 1.5/30	1	
junel 1/20	1	
junel fe 1.5/30	1	
junel fe 1/20	1	
junel fe 24	1	
kaitlib fe	1	
kalliga	1	
kariva	1	
kelnor 1/35	1	
kelnor 1/50	1	
kurvelo	1	
larin 1.5/30	1	
larin 1/20	1	
larin 24 fe	1	
larin fe 1.5/30	1	
larin fe 1/20	1	
layolis fe	1	
leena	1	
lessina	1	
levonest	1	
levonorgest-eth est & eth est	1	
levonorgest-eth estrad 91-day	1	
levonorgest-eth estradiol-iron	1	
levonorgestrel-ethinyl estrad	1	
levonorg-eth estrad triphasic	1	

KEY: **7D** ..... 7 day limit  
**MME** ..... Morphine milligram equivalent  
**PA** ..... Prior authorization required

**QL** ..... Quantity limit  
**SP** ..... Specialty medication  
**ST** ..... Step therapy

Drug name	Tier	Notes
levora 0.15/30 (28)	1	
LO LOESTRIN FE	1	
lojaimiess	1	
loryna	1	
low-ogestrel	1	
lo-zumandimine	1	
luteru	1	
lyllana	3	QL
marlissa	1	
merzee	1	
mibelas 24 fe	1	
microgestin 1.5/30	1	
microgestin 1/20	1	
microgestin 24 fe oral tablet 1-20 mg-mcg	1	
microgestin fe 1.5/30	1	
microgestin fe 1/20	1	
mili	1	
mimvey	3	
mono-lynyah	1	
NATAZIA	1	
necon 0.5/35 (28)	1	
NEXTSTELLIS	1	
nikki	1	
norelgestromin-eth estradiol	1	
norethin ace-eth estrad-fe	1	
norethindrone acet-ethinyl est	1	
norethindrone-eth estradiol	3	
norethindron-ethinyl estrad-fe	1	
norethin-eth estradiol-fe	1	
norgestimate-eth estradiol	1	
norgestimate-ethinyl estradiol triphasic	1	
nortrel 0.5/35 (28)	1	
nortrel 1/35 (21)	1	
nortrel 1/35 (28)	1	
nortrel 7/7/7	1	
nylia 1/35	1	
nylia 7/7/7	1	
nymyo oral tablet 0.25-35 mg-mcg	1	
ocella	1	
philith	1	
pimtrea	1	
portia-28	1	
PREMARIN VAGINAL	4	
reclipsen	1	
rivelsa	1	
setlakin	1	
simliya	1	
simpesse	1	
sprintec 28	1	
sronyx	1	
syeda	1	

Drug name	Tier	Notes
tarina 24 fe	1	
tarina fe 1/20 eq	1	
taysofy	1	
tilia fe	1	
tri-estarylla	1	
tri-legest fe	1	
tri-lynyah	1	
tri-lo-estarylla	1	
tri-lo-marzia	1	
tri-lo-mili	1	
tri-lo-sprintec	1	
tri-mili	1	
tri-nymyo oral tablet 0.18/0.215/0.25 mg-35 mcg	1	
tri-sprintec	1	
trivora (28)	1	
tri-vylibra	1	
tri-vylibra lo	1	
turqoz	1	
TWIRLA	1	
TYBLUME	1	
tydemy	1	
velivet	1	
vestura	1	
vienva	1	
viorele	1	
volnea	1	
vyfemla	1	
vylibra	1	
wera	1	
wymzya fe	1	
xulane	1	
yuvaferm	3	QL
zafemy	1	
zovia 1/35 (28)	1	
zumandimine	1	
<b>Progestins</b>		
aftera	1	
camila	1	
curae	1	
deblitane	1	
DEPO-SUBQ PROVERA 104	1	QL; Available under pharmacy or medical benefit
econtra one-step	1	
ELLA	1	QL
emzahn	1	
errin	1	
heather	1	
her style	1	
incassia	1	
jencycla	1	

KEY: **7D** ..... 7 day limit  
**MME** ..... Morphine milligram equivalent  
**PA** ..... Prior authorization required

**QL** ..... Quantity limit  
**SP** ..... Specialty medication  
**ST** ..... Step therapy

Drug name	Tier	Notes
KYLEENA	1	Available under pharmacy or medical benefit
levonorgestrel	1	
LILETTA (52 MG)	1	Available under pharmacy or medical benefit
lyleq	1	
lyza	1	
medroxyprogesterone acetate intramuscular suspension	1	QL; Available under pharmacy or medical benefit
medroxyprogesterone acetate intramuscular suspension prefilled syringe	1	Available under pharmacy or medical benefit
medroxyprogesterone acetate oral	2	
megestrol acetate oral suspension 40 mg/ml	2	
megestrol acetate oral suspension 625 mg/5ml	4	
megestrol acetate oral tablet	2	
MIRENA (52 MG)	1	Available under pharmacy or medical benefit
my choice	1	
my way	1	
new day	1	
NEXPLANON	1	QL; Available under pharmacy or medical benefit
nora-be	1	
norethindrone acetate oral	2	
norethindrone oral	1	
norlyroc	1	
opcicon one-step	1	
OPILL	1	
option 2	1	
PLAN B ONE-STEP	1	
progesterone intramuscular	2	
progesterone oral	2	
react	1	
sharobel	1	
SKYLA	1	Available under pharmacy or medical benefit
take action	1	
<b>Selective estrogen receptor modifying agents</b>		
OSPHENA	4	PA; QL
raloxifene hcl	2	QL; \$0 Copay for members 35 years and older once your healthcare provider confirms use is for breast cancer prevention.

Drug name	Tier	Notes
<b>Hormonal agents, stimulant/replacement/modifying (thyroid)</b>		
ARMOUR THYROID	4	
euthyrox	2	
levo-t	2	
levothyroxine sodium oral tablet	2	
levoxyl	2	
liothyronine sodium oral	2	
NIVA THYROID	4	
np thyroid	4	
SYNTHROID	3	
THYQUIDITY	4	PA
thyroid oral	4	
TIROSINT-SOL	4	PA
unithroid	2	
<b>Hormonal agents, suppressant (adrenal)</b>		
LYSODREN	4	
<b>Hormonal agents, suppressant (pituitary)</b>		
ELIGARD	5	PA; SP
leuprolide acetate injection	5	PA; SP
octreotide acetate	4	PA; SP
ORLISSA	4	PA; QL
SIGNIFOR	5	PA; QL; SP
SOMAVERT	5	PA; QL; SP
SYNAREL	3	
<b>Hormonal agents, suppressant (thyroid)</b>		
<b>Antithyroid agents</b>		
methimazole oral	2	
propylthiouracil oral	2	
<b>Immunological agents</b>		
<b>Angioedema agents</b>		
HAEGARDA	5	PA; QL; SP
icatibant acetate	4	PA; QL; SP
sajazir	4	PA; QL; SP
<b>Immune suppressants</b>		
ADALIMUMAB-ADAZ	5	PA; QL; SP
ADALIMUMAB-ADBIM (2 PEN)	5	PA; QL; SP
ADALIMUMAB-ADBIM (2 SYRINGE)	5	PA; QL; SP
ADALIMUMAB-ADBIM(CD/UC/HS STRT)	5	PA; SP
ADALIMUMAB-ADBIM(PS/UV STARTER)	5	PA; SP
AMJEVITA FOR NUVAILA	5	PA; SP
AMJEVITA SUBCUTANEOUS SOLUTION AUTO-INJECTOR 40 MG/0.4ML, 80 MG/0.8ML	5	PA; QL; SP
AMJEVITA SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 40 MG/0.4ML	5	PA; QL; SP
AMJEVITA-PED 15KG TO <30KG SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 20 MG/0.2ML	5	PA; QL; SP
azathioprine oral tablet 50 mg	2	
CIMZIA	5	PA; QL; SP

KEY: **7D** .....7 day limit  
**MME** .....Morphine milligram equivalent  
**PA** .....Prior authorization required

**QL** .....Quantity limit  
**SP** .....Specialty medication  
**ST** .....Step therapy

Drug name	Tier	Notes
CIMZIA (2 SYRINGE)	5	PA; QL; SP
CIMZIA STARTER KIT	5	PA; QL; SP
cyclosporine modified	2	
cyclosporine oral	3	
gengraf	3	
HADLIMA	5	PA; QL; SP
HADLIMA PUSH TOUCH	5	PA; QL; SP
HUMIRA (2 PEN)	5	PA; QL; SP
HUMIRA (2 SYRINGE)	5	PA; QL; SP
HUMIRA-CD/UC/HS STARTER	5	PA; SP
HUMIRA-PSORIASIS/UVEIT STARTER	5	PA; QL; SP
methotrexate sodium	2	
methotrexate sodium (pf)	2	
mycophenolate mofetil oral capsule	3	
mycophenolate mofetil oral suspension reconstituted	4	
mycophenolate mofetil oral tablet	3	
mycophenolate sodium	4	
mycophenolic acid	4	
OLUMIANT	5	PA; QL; SP
SIMPONI	5	PA; QL; SP
sirolimus oral solution	5	
sirolimus oral tablet	4	
SKYRIZI PEN	5	PA; QL; SP
SKYRIZI SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	5	PA; QL; SP
tacrolimus oral	2	
TALTZ	5	PA; SP
XELJANZ	5	PA; QL; SP
XELJANZ XR	5	PA; QL; SP
<b>Immunomodulators</b>		
ACTEMRA ACTPEN	5	PA; QL; SP
ACTEMRA SUBCUTANEOUS	5	PA; QL; SP
ACTIMMUNE	5	PA; QL; SP
BEYFORTUS	1	QL; \$0 copay for members 19 months of age or younger.
leflunomide oral	2	
OTEZLA	5	PA; QL; SP
RIDAURA	5	SP
RINVOQ	5	PA; QL; SP
RINVOQ LQ	5	PA; QL; SP
XOLAIR SUBCUTANEOUS SOLUTION AUTO-INJECTOR	5	PA; QL
XOLAIR SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 150 MG/ML, 75 MG/0.5ML	5	PA; QL; SP
XOLAIR SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 300 MG/2ML	5	PA; QL
<b>Vaccines</b>		
ABRYVO	1	QL

Drug name	Tier	Notes
ACTHIB	1	QL
ADACEL	1	QL
AFLURIA	1	QL; \$0 copay for members 6 months of age or older.
AFLURIA PRESERVATIVE FREE	1	QL; \$0 copay for members 6 months of age or older.
AREXVY	1	QL; \$0 Copay for members 60 years of age or older.
BEXSERO	1	QL; \$0 copay for members 10 years of age or older.
BOOSTRIX	1	QL
BOOSTRIX INTRAMUSCULAR SUSPENSION 5-2.5-18.5 LF-MCG/0.5	1	QL
CAPVAXIVE	1	QL; \$0 copay for members 19 years of age or older.
COMIRNATY	1	QL; \$0 copay for members 12 years of age or older.
COMIRNATY INTRAMUSCULAR SUSPENSION 30 MCG/0.3ML	1	QL; \$0 copay for members 12 years of age or older.
DAPTACEL	1	QL
DENGVAXIA	1	QL; \$0 copay for members between ages of 9 to 16 years.
ENGERIX-B	1	QL
FLUAD	1	QL; \$0 copay for members 65 years of age or older.
FLUARIX	1	QL; \$0 copay for members 6 months of age or older.
FLUCELVAX INTRAMUSCULAR SUSPENSION PREFILLED SYRINGE	1	QL; \$0 copay for members 6 months of age or older.
FLULAVAL	1	QL; \$0 copay for members 6 months of age or older.
FLUMIST	1	QL; \$0 copay for members between ages of 2 to 49 years.

KEY: **7D** ..... 7 day limit  
**MME** ..... Morphine milligram equivalent  
**PA** ..... Prior authorization required

**QL** ..... Quantity limit  
**SP** ..... Specialty medication  
**ST** ..... Step therapy

Drug name	Tier	Notes
FLUMIST QUADRIVALENT NASAL SUSPENSION	1	QL; \$0 copay for members between ages of 2 to 49 years.
FLUZONE HIGH-DOSE	1	QL; \$0 copay for members 65 years of age or older.
FLUZONE INTRAMUSCULAR SUSPENSION PREFILLED SYRINGE	1	QL; \$0 copay for members 6 months of age or older.
GARDASIL 9	1	QL; \$0 copay for members between ages of 9 to 45 years.
HAVRIX	1	QL
HEPLISAV-B	1	QL; \$0 copay for members 18 years of age or older.
HIBERIX	1	QL
INFANRIX	1	QL
IPOL	1	QL
MENQUADFI	1	QL
MENVEO	1	QL
M-M-R II	1	QL
PEDIARIX	1	QL; \$0 copay for members 6 years of age or younger.
PEDVAX HIB	1	QL
PENBRAYA	1	QL; \$0 copay for members between ages of 10 to 25 years.
PENTACEL	1	QL; \$0 copay for members 4 years of age or younger.
PFIZER COVID-19 VAC-TRIS 5-11Y	1	QL; \$0 copay for members between ages of 5 to 11 years.
PFIZER COVID-19 VAC-TRIS 6M-4Y	1	QL; \$0 copay for members between ages of 6 months to 4 years.
PNEUMOVAX 23	1	QL
PREHEVBRIO	1	QL; \$0 copay for members 18 years of age or older.
PREVNAR 20	1	QL; \$0 copay for members 1 month of age or older.
PRIORIX	1	QL

Drug name	Tier	Notes
PROQUAD	1	QL; \$0 copay for members between ages of 1 to 12 years.
QUADRACEL INTRAMUSCULAR SUSPENSION	1	QL
RECOMBIVAX HB	1	QL
ROTARIX	1	QL; \$0 copay for members 8 months of age or younger.
ROTATEQ	1	QL; \$0 copay for members 8 months of age or younger.
SHINGRIX	1	QL; \$0 Copay for members 19 years of age or older.
SPIKEVAX	1	QL; \$0 copay for members 12 years of age or older.
TDVAX	1	QL
TENIVAC	1	QL
TETANUS-DIPHThERIA TOXOIDS TD	1	QL
TRUMENBA	1	QL; \$0 copay for members 10 years of age or older.
TWINRIX	1	QL
VAQTA	1	QL
VARIVAX	1	QL
VAXELIS	1	QL; \$0 copay for members 4 years of age or younger.
VAXNEUVANCE	1	QL; \$0 copay for members 1 month of age or older.
<b>Inflammatory bowel disease agents</b>		
<b>Aminosalicylates</b>		
balsalazide disodium	3	
DIPENTUM	4	
mesalamine er oral capsule 0.375 gm	3	QL
mesalamine oral tablet delayed release 1.2 gm	3	QL
mesalamine rectal	4	QL
mesalamine-cleanser	4	QL
<b>Glucocorticoids</b>		
ANALPRAM-HC EXTERNAL LOTION	4	
budesonide oral	4	
budesonide rectal	3	
CORTIFOAM	3	
hydrocortisone (perianal) external cream 2.5 %	2	

KEY: **7D** ..... 7 day limit  
**MME** ..... Morphine milligram equivalent  
**PA** ..... Prior authorization required

**QL** ..... Quantity limit  
**SP** ..... Specialty medication  
**ST** ..... Step therapy

Drug name	Tier	Notes
hydrocortisone ace-pramoxine external cream 1-1 %	3	
hydrocortisone rectal	3	
PROCTOFOAM HC	3	
procto-med hc	2	
proctosol hc	2	
proctozone-hc	2	
<b>Sulfonamides</b>		
sulfasalazine oral	2	
<b>Metabolic bone disease agents</b>		
alendronate sodium oral solution	3	
alendronate sodium oral tablet 10 mg, 35 mg, 70 mg	2	QL
calcitonin (salmon) nasal	2	QL
calcitriol oral capsule	2	
calcitriol oral solution	3	
cinacalcet hcl	3	PA; QL
doxercalciferol oral	4	
ibandronate sodium oral	2	QL
paricalcitol oral	3	
risedronate sodium oral tablet	3	QL
TYMLOS	5	PA; QL; SP
<b>Miscellaneous therapeutic agents</b>		
ADVOCATE INSULIN PEN NEEDLE	1	
AEROCHAMBER HOLDING CHAMBER	2	QL
AEROCHAMBER PLS FLOVU MTHPIECE	2	QL
AEROCHAMBER PLUS FLO-VU INTERM	2	QL
AEROCHAMBER PLUS FLO-VU LARGE DEVICE	2	QL
AEROCHAMBER PLUS FLO-VU MEDIUM DEVICE	2	QL
AEROCHAMBER PLUS FLO-VU SMALL DEVICE	2	QL
ALCOHOL PREP PADS PAD , 70 %	3	
AQ INSULIN SYRINGE	1	
AQINJECT PEN NEEDLE	1	
ASSURE ID DUO PRO PEN NEEDLES	1	
ASSURE ID PRO PEN NEEDLES	1	
AUM ALCOHOL PREP PADS	3	
AUM INSULIN SAFETY PEN NEEDLE	1	
AUM MINI INSULIN PEN NEEDLE	1	
AUM PEN NEEDLE	1	
AUM READYGARD DUO PEN NEEDLE	1	
AUM SAFETY PEN NEEDLE	1	
BD AUTOSHIELD DUO PEN NEEDLES	1	
BD SHARPS COLLECTOR	3	
BD ULTRA-FINE INSULIN SYRINGES	1	
BD ULTRA-FINE PEN NEEDLES	1	

Drug name	Tier	Notes
BREATHE COMFORT CHAMBER/ ADULT	2	QL
BREATHE COMFORT CHAMBER/ CHILD	2	QL
CAYA	1	
COMFORT EZ PRO PEN NEEDLES	1	
CONDOMS	1	QL
DROPSAFE ALCOHOL PREP	3	
DROPSAFE SAFETY SYRINGE/ NEEDLE	1	
DUREX EXTRA SENSITIVE THIN	1	QL
DUREX TROPICAL	1	QL
EASIVENT	2	QL
EASY COMFORT SHARPS CONTAINER	3	
EMBRACE PEN NEEDLES 30G X 5 MM , 30G X 8 MM , 31G X 6 MM , 31G X 8 MM , 32G X 4 MM	1	
ergoloid mesylates oral	4	
FC2 FEMALE CONDOM	1	QL
FEMCAP	1	
FLEXICHAMBER	2	QL
FLEXICHAMBER ADULT MASK/ SMALL	2	QL
FLEXICHAMBER CHILD MASK/ LARGE	2	QL
FLEXICHAMBER CHILD MASK/ SMALL	2	QL
GRASTEK	4	PA; QL
INSPIREASE RESERVOIR BAGS	2	QL
INSULIN PEN NEEDLES 29G X 12.7MM , 29G X 12MM , 29G X 5MM , 29G X 8MM , 30G X 5 MM , 30G X 8 MM , 31G X 4 MM , 31G X 5 MM , 31G X 6 MM , 31G X 8 MM , 32G X 4 MM , 32G X 5 MM , 32G X 6 MM , 32G X 8 MM , 33G X 4 MM , 33G X 5 MM , 33G X 6 MM	1	
INSULIN SYRINGES 27G X 1/2" 0.5 ML, 27G X 1/2" 1 ML, 28G X 1/2" 0.5 ML, 28G X 1/2" 1 ML, 29G X 1/2" 0.5 ML, 29G X 1/2" 1 ML, 30G X 1/2" 0.3 ML, 30G X 1/2" 0.5 ML, 30G X 1/2" 1 ML, 30G X 5/16" 0.3 ML, 30G X 5/16" 0.5 ML, 30G X 5/16" 1 ML, 31G X 15/64" 0.3 ML, 31G X 15/64" 0.5 ML, 31G X 15/64" 1 ML, 31G X 5/16" 0.3 ML, 31G X 5/16" 0.5 ML, 31G X 5/16" 1 ML, 32G X 5/16" 1 ML	1	
methergine	4	QL
methylegonovine maleate oral	4	QL
NOVOFINE PEN NEEDLE	1	
NOVOFINE PLUS PEN NEEDLE	1	
OMNIPOD 5 G6 INTRO (GEN 5)	4	PA; QL
OMNIPOD 5 G6 PODS (GEN 5)	4	PA; QL
PARAGARD INTRAUTERINE COPPER	1	Available under pharmacy or medical benefit

KEY: **7D** ..... 7 day limit  
**MME** ..... Morphine milligram equivalent  
**PA** ..... Prior authorization required

**QL** ..... Quantity limit  
**SP** ..... Specialty medication  
**ST** ..... Step therapy



Drug name	Tier	Notes
PARI VORTEX ADULT MASK	2	QL
PHEXXI	1	QL
PURE COMFORT SAFETY PEN NEEDLE	1	
RADIOGARDASE	5	
RAYA SURE PEN NEEDLE	1	
SAFETY PEN NEEDLES	1	
SHARPS COLLECTOR	3	
SHARPS CONTAINER	3	
TRUE COVER	1	QL
UNIFINE PROTECT PEN NEEDLE	1	
VERIFINE INSULIN PEN NEEDLE	1	
VERIFINE INSULIN SYRINGE	1	
VERIFINE PLUS PEN NEEDLE	1	
VERIFINE SHARPS CONTAINER	3	
VORTEX VALVED HOLDING CHAMBER	2	QL
WIDE-SEAL DIAPHRAGM 60	1	
WIDE-SEAL DIAPHRAGM 65	1	
WIDE-SEAL DIAPHRAGM 70	1	
WIDE-SEAL DIAPHRAGM 75	1	
WIDE-SEAL DIAPHRAGM 80	1	
WIDE-SEAL DIAPHRAGM 85	1	
WIDE-SEAL DIAPHRAGM 90	1	
WIDE-SEAL DIAPHRAGM 95	1	
<b>Ophthalmic agents</b>		
<b>Aminoglycosides</b>		
gentamicin sulfate ophthalmic	2	
neomycin-polymyxin-gramicidin	2	
TOBRADEX	4	
tobramycin ophthalmic	2	
tobramycin-dexamethasone	3	
TOBEX	4	
<b>Antibacterials, other</b>		
bacitracin ophthalmic	3	
bacitracin-polymyxin b	2	
bacitra-neomycin-polymyxin-hc	3	
BETADINE OPHTHALMIC PREP	4	
neomycin-bacitracin zn-polymyx	2	
neomycin-polymyxin-dexameth ophthalmic ointment	2	
neomycin-polymyxin-dexameth ophthalmic suspension 3.5-10000-0.1	2	
neomycin-polymyxin-hc ophthalmic	3	
neo-polycin	2	
neo-polycin hc	3	
polycin	2	
polymyxin b-trimethoprim	2	
<b>Anti-cytomegalovirus (CMV) agents</b>		
ZIRGAN	4	
<b>Antifungals</b>		
NATACYN	4	

Drug name	Tier	Notes
<b>Antiherpetic agents</b>		
trifluridine	3	
<b>Macrolides</b>		
AZASITE	4	
erythromycin ophthalmic	2	\$0 Copay once your healthcare provider confirms use is to prevent gonococcal ophthalmia neonatorum in newborns.
<b>Ophthalmic agents, other</b>		
AKTEN	4	
ALTACAINE	2	
atropine sulfate ophthalmic solution 1 %	2	
cyclopentolate hcl ophthalmic	2	
cyclosporine ophthalmic	4	PA; QL
CYSTARAN	5	PA; QL; SP
MITOSOL	4	
proparacaine hcl ophthalmic	2	
sulfacetamide-prednisolone	2	
tetracaine hcl ophthalmic	2	
ZYLET	4	
<b>Ophthalmic anti-allergy agents</b>		
ALOCRIAL	4	
ALOMIDE	4	
altafrin	2	
azelastine hcl ophthalmic	2	
bepotastine besilate	4	QL
cromolyn sodium ophthalmic	2	
CYCLOMYDRIL	4	
epinastine hcl	2	ST; QL
olopatadine hcl ophthalmic solution 0.1 %	2	QL
phenylephrine hcl ophthalmic	2	
<b>Ophthalmic antiglaucoma agents</b>		
apraclonidine hcl	2	
betaxolol hcl ophthalmic	2	
BETIMOL	3	QL
BETOPTIC-S	4	
brimonidine tartrate ophthalmic solution 0.15 %, 0.2 %	2	QL
brimonidine tartrate-timolol	3	QL
brinzolamide	3	QL
carteolol hcl	2	
dorzolamide hcl ophthalmic	2	
dorzolamide hcl-timolol mal	2	QL
dorzolamide hcl-timolol mal pf	3	QL
IOPIDINE	4	
levobunolol hcl	2	
PHOSPHOLINE IODIDE	3	
pilocarpine hcl ophthalmic	2	

KEY: **7D** ..... 7 day limit  
**MME** ..... Morphine milligram equivalent  
**PA** ..... Prior authorization required

**QL** ..... Quantity limit  
**SP** ..... Specialty medication  
**ST** ..... Step therapy



Drug name	Tier	Notes
SIMBRINZA	4	QL
timolol maleate (once-daily)	2	
timolol maleate ophthalmic gel forming solution	3	
timolol maleate ophthalmic solution	2	
timolol maleate pf	3	
<b>Ophthalmic anti-inflammatories</b>		
bromfenac sodium (once-daily)	3	QL
dexamethasone sodium phosphate ophthalmic	2	
diclofenac sodium ophthalmic	2	
difluprednate	4	
fluorometholone	2	
flurbiprofen sodium	2	
INVELTYS	4	QL
ketorolac tromethamine ophthalmic	2	
LOTEMAX OPHTHALMIC OINTMENT	4	
LOTEMAX SM	4	QL
loteprednol etabonate ophthalmic suspension 0.5 %	4	QL
prednisolone acetate ophthalmic	2	
prednisolone sodium phosphate ophthalmic	2	
<b>Ophthalmic prostaglandin and prostamide analogs</b>		
latanoprost ophthalmic	2	
LUMIGAN	3	QL
tafluprost (pf)	4	ST; QL
travoprost (bak free)	3	QL
XELPROS	4	QL
<b>Quinolones</b>		
BESIVANCE	4	
CILOXAN	4	
ciprofloxacin hcl ophthalmic	2	
gatifloxacin ophthalmic	3	
levofloxacin ophthalmic	2	
moxifloxacin hcl (2x day)	2	
moxifloxacin hcl ophthalmic	2	
ofloxacin ophthalmic	2	
<b>Sulfonamides</b>		
sulfacetamide sodium ophthalmic	2	
<b>Otic agents</b>		
acetic acid otic	2	
ciprofloxacin hcl otic	3	
ciprofloxacin-dexamethasone	4	ST
CIPROFLOXACIN-FLUOCINOLONE PF	4	
CORTISPORIN-TC	4	
flac	3	
fluocinolone acetonide otic	3	
hydrocortisone-acetic acid	3	
neomycin-polymyxin-hc otic	2	
ofloxacin otic	2	

Drug name	Tier	Notes
OTOVEL	4	
<b>Respiratory tract/pulmonary agents</b>		
<b>Antihistamines</b>		
azelastine hcl nasal solution 0.1 %, 137 mcg/spray	2	QL
carbinoxamine maleate oral solution	2	
carbinoxamine maleate oral tablet 4 mg	2	
clemastine fumarate oral tablet	2	
cyproheptadine hcl oral	2	
desloratadine oral tablet	3	
diphenhydramine hcl oral elixir	2	
levocetirizine dihydrochloride oral solution	3	
levocetirizine dihydrochloride oral tablet	2	QL
olopatadine hcl nasal	3	QL
promethazine vc	2	
promethazine-phenylephrine	2	
<b>Anti-inflammatories, inhaled corticosteroids</b>		
ALVESCO	4	ST; QL
ARNUITY ELLIPTA	3	QL
ASMANEX (120 METERED DOSES)	3	QL
ASMANEX (14 METERED DOSES)	3	QL
ASMANEX (30 METERED DOSES)	3	QL
ASMANEX (60 METERED DOSES)	3	QL
ASMANEX HFA	3	QL
BEVESPI AEROSPHERE	3	QL
breyna	4	QL
budesonide inhalation	3	QL
budesonide-formoterol fumarate	4	QL
flunisolide nasal	3	
fluticasone propionate nasal	2	QL
fluticasone-salmeterol inhalation aerosol powder breath activated 100-50 mcg/act, 250-50 mcg/act, 500-50 mcg/act	3	QL
FLUTICASONE-SALMETEROL INHALATION AEROSOL POWDER BREATH ACTIVATED 113-14 MCG/ACT, 232-14 MCG/ACT, 55-14 MCG/ACT	3	QL
QVAR REDHALER	3	QL
wixela inhub	3	QL
<b>Antileukotrienes</b>		
montelukast sodium oral	2	QL
zafirlukast	3	QL
zileuton er	4	ST
<b>Bronchodilators, anticholinergic</b>		
ATROVENT HFA	4	QL
INCRUSE ELLIPTA	3	QL
ipratropium bromide inhalation	2	
ipratropium bromide nasal	2	

KEY: **7D** ..... 7 day limit  
**MME** ..... Morphine milligram equivalent  
**PA** ..... Prior authorization required

**QL** ..... Quantity limit  
**SP** ..... Specialty medication  
**ST** ..... Step therapy

Drug name	Tier	Notes
SPIRIVA HANDIHALER	3	QL
SPIRIVA RESPIMAT	3	QL
tiotropium bromide monohydrate	3	QL
<b>Bronchodilators, sympathomimetic</b>		
albuterol sulfate hfa aerosol solution 108 (90 base) mcg/act inhalation	1	
ALBUTEROL SULFATE HFA AEROSOL SOLUTION 108 (90 BASE) MCG/ACT INHALATION	1	
albuterol sulfate inhalation	1	
albuterol sulfate oral	3	
arformoterol tartrate	4	QL
epinephrine injection solution auto-injector	1	QL
formoterol fumarate inhalation	4	QL
levalbuterol hcl inhalation	3	QL
STRIVERDI RESPIMAT	3	QL
terbutaline sulfate oral	4	
VENTOLIN HFA	1	
<b>Cystic fibrosis agents</b>		
ORKAMBI	5	PA; QL; SP
PULMOZYME	5	PA; QL; SP
tobramycin nebulization solution 300 mg/5ml inhalation	5	PA; QL; SP
TOBRAMYCIN NEBULIZATION SOLUTION 300 MG/5ML INHALATION	5	PA; QL; SP
<b>Mast cell stabilizers</b>		
cromolyn sodium inhalation	3	
<b>Phosphodiesterase inhibitors, airways disease</b>		
elixophyllin	3	
roflumilast	4	PA; QL
THEO-24	4	
theophylline er	2	
theophylline oral	3	
<b>Pulmonary antihypertensives</b>		
ADEMPAS	5	PA; QL; SP
alyq	5	PA; QL; SP
ambrisentan	5	PA; QL; SP
bosentan	5	PA; QL; SP
OPSUMIT	5	PA; QL; SP
ORENITRAM	5	PA; QL; SP
ORENITRAM MONTH 1	5	PA; QL; SP
ORENITRAM MONTH 2	5	PA; QL; SP
ORENITRAM MONTH 3	5	PA; QL; SP
sildenafil citrate oral suspension reconstituted	5	PA; QL; SP
sildenafil citrate oral tablet 20 mg	4	PA; QL; SP
tadalafil (pah)	5	PA; QL; SP
TYVASO	5	PA; QL; SP
TYVASO DPI INSTITUTIONAL KIT	5	PA; QL; SP
TYVASO DPI MAINTENANCE KIT	5	PA; QL; SP
TYVASO DPI TITRATION KIT	5	PA; QL; SP

Drug name	Tier	Notes
TYVASO REFILL KIT	5	PA; QL; SP
TYVASO STARTER KIT	5	PA; QL; SP
VENTAVIS	5	PA; QL; SP
<b>Pulmonary fibrosis agents</b>		
OFEV	5	PA; QL; SP
pirfenidone	4	PA; QL; SP
<b>Respiratory tract agents, other</b>		
acetylcysteine inhalation	2	
azelastine-fluticasone	4	QL
benzonatate oral capsule 100 mg, 200 mg	2	
BREZTRI AEROSPHERE	3	QL
guaifenesin-codeine	2	PA; QL
hydrocod poli-chlorphe poli er	4	PA; QL
hydrocodone bit-homatrop mbr	2	PA; QL
hydromet	2	PA; QL
HYPERSAL	3	
ipratropium-albuterol	2	
maxi-tuss ac	2	PA; QL
mometasone furoate nasal	3	QL
NEBUSAL	3	
promethazine-codeine oral solution	2	PA; QL
promethazine-dm	2	
pseudoephedrine-bromphen-dm	2	
PULMOSAL	3	
sodium chloride inhalation	2	
STIOLTO RESPIMAT	3	QL
TRELEGY ELLIPTA	3	QL
TUXARIN ER	4	PA; QL
<b>Skeletal muscle relaxants</b>		
baclofen oral tablet 10 mg, 20 mg, 5 mg	2	
carisoprodol oral tablet 350 mg	2	QL
chlorzoxazone oral tablet 500 mg	3	
cyclobenzaprine hcl oral	2	
dantrolene sodium oral	3	
metaxalone	3	
methocarbamol oral tablet 500 mg, 750 mg	2	
orphenadrine citrate er	2	
orphenadrine-aspirin-caffeine	5	
tizanidine hcl oral capsule	3	
tizanidine hcl oral tablet	2	
<b>Sleep disorder agents</b>		
<b>GABA receptor modulators</b>		
eszopiclone	2	QL
flurazepam hcl	2	QL
temazepam	2	QL
triazolam	2	QL
zaleplon	2	QL
zolpidem tartrate er	3	QL
zolpidem tartrate oral tablet	2	QL

KEY: **7D** ..... 7 day limit  
**MME** ..... Morphine milligram equivalent  
**PA** ..... Prior authorization required

**QL** ..... Quantity limit  
**SP** ..... Specialty medication  
**ST** ..... Step therapy

Drug name	Tier	Notes
<b>Sleep disorders, other</b>		
BELSOMRA	4	ST; QL
doxepin hcl oral tablet	2	QL
ramelteon	4	ST; QL
tasimelteon	5	PA; QL; SP
<b>Wakefulness promoting agents</b>		
armodafinil	3	PA; QL
modafinil oral	2	PA; QL
SODIUM OXYBATE	5	PA; QL; SP
SUNOSI	4	PA; QL

KEY: **7D** ..... 7 day limit  
**MME** ..... Morphine milligram equivalent  
**PA** ..... Prior authorization required

**QL** ..... Quantity limit  
**SP** ..... Specialty medication  
**ST** ..... Step therapy

# Index

abacavir sulfate-lamivudine.....	16	AEROCHAMBER PLUS FLO-VU SMALL DEVICE .....	31	amiodarone hcl oral .....	19
abacavir sulfate oral solution.....	16	afirmelle.....	26	amitriptyline hcl oral.....	12
abacavir sulfate oral tablet .....	16	AFLURIA.....	29	Amjevita for Nuvaila .....	28
abiraterone acetate.....	14	AFLURIA PRESERVATIVE FREE .....	29	AMJEVITA-PED 15KG TO <30KG SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 20 MG/0.2ML... ..	28
ABRYSVO.....	29	aftera.....	27	AMJEVITA SUBCUTANEOUS SOLUTION AUTO-INJECTOR 40 MG/0.4ML, 80 MG/0.8ML .....	28
acamprosate calcium.....	10	AIMOVIG SUBCUTANEOUS SOLUTION AUTO-INJECTOR 140 MG/ML, 70 MG/ML .....	13	AMJEVITA SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 40 MG/0.4ML.....	28
acarbose oral.....	18	AKTEN .....	32	amlodipine besylate-benazepril hcl... ..	20
ACCU-CHEK AVIVA DEVICE .....	17	ALA SCALP .....	25	amlodipine besylate oral .....	19
ACCU-CHEK AVIVA PLUS TEST STRIPS.....	17	albendazole oral .....	15	amlodipine besylate-valsartan .....	20
ACCU-CHEK FASTCLIX LANCET KIT .....	17	albuterol sulfate hfa aerosol solution 108 (90 base) mcg/act inhalation.....	34	ammonium lactate external cream .....	21
ACCU-CHEK GUIDE CONTROL .....	17	ALBUTEROL SULFATE HFA AEROSOL SOLUTION 108 (90 BASE) MCG/ACT INHALATION .....	34	amnesteam .....	21
ACCU-CHEK GUIDE KIT W/DEVICE.....	17	albuterol sulfate inhalation.....	34	amoxapine .....	13
ACCU-CHEK GUIDE TEST STRIPS .....	17	albuterol sulfate oral.....	34	amoxicill-clarithro-lansopraz.....	23
ACCU-CHEK SMARTVIEW CONTROL .....	17	alclometasone dipropionate .....	25	amoxicillin.....	11
ACCU-CHEK SMARTVIEW TEST STRIPS.....	17	ALCOHOL PREP PADS PAD , 70 % .....	31	amoxicillin-potassium clavulanate.....	11
ACCU-CHEK SMARTVIEW TEST STRIPS.....	17	ALECENSA .....	15	amphetamine-dextroamphetamine... ..	21
ACCU-CHEK SOFTCLIX LANCET DEVICE KIT .....	17	alendronate sodium oral solution .....	31	amphetamine-dextroamphetamine er.....	21
accutane .....	21	alendronate sodium oral tablet 10 mg, 35 mg, 70 mg.....	31	amphetamine sulfate.....	21
acebutolol hcl oral .....	19	alfuzosin hcl er .....	24	ampicillin.....	11
acetaminophen-codeine .....	10	ALINIA ORAL SUSPENSION RECONSTITUTED 100 MG/5ML .....	15	anagrelide hcl.....	18
acetazolamide er .....	20	aliskiren fumarate.....	20	ANALPRAM-HC EXTERNAL LOTION .....	30
acetazolamide oral .....	20	allopurinol oral tablet 100 mg, 300 mg.....	13	anastrozole oral.....	14
acetic acid otic.....	33	almotriptan malate .....	13	ANDRODERM .....	25
acetylcysteine inhalation .....	34	ALOCRIL .....	32	ANNOVERA.....	26
acitretin .....	21	ALOMIDE.....	32	ANZEMET .....	13
ACTEMRA ACTPEN.....	29	alosectron hcl .....	23	apap-caff-dihydrocodeine .....	10
ACTEMRA SUBCUTANEOUS .....	29	alprazolam er .....	17	APEXICON E .....	25
ACTHIB.....	29	alprazolam intensol.....	17	apomorphine hcl subcutaneous .....	15
actimmune .....	29	alprazolam oral tablet .....	17	apraclonidine hcl .....	32
acyclovir external ointment .....	16	alprazolam oral tablet dispersible.....	17	aprepitant.....	13
acyclovir oral.....	16	alprazolam xr.....	17	apri .....	26
ADACEL .....	29	ALTACAINE .....	32	APTIOM .....	12
ADALIMUMAB-ADAZ .....	28	altafrin .....	32	APTIVUS.....	16
ADALIMUMAB-ADBM (2 PEN) .....	28	altavera.....	26	AQINJECT PEN NEEDLE.....	31
ADALIMUMAB-ADBM (2 SYRINGE).....	28	ALVESCO .....	33	AQ INSULIN SYRINGE .....	31
ADALIMUMAB-ADBM(CD/UC/HS STRT).....	28	alvimopan.....	23	aranella.....	26
ADALIMUMAB-ADBM(PS/UV STARTER).....	28	alyacen 1/35 .....	26	ARANESP (ALBUMIN FREE) .....	18
adapalene external cream.....	21	alyacen 7/7/7.....	26	AREXVY.....	29
adapalene external gel .....	21	alyq.....	34	arformoterol tartrate .....	34
adefovir dipivoxil.....	16	amantadine hcl oral.....	15	aripiprazole oral solution .....	16
ADEMPAS .....	34	ambrisentan .....	34	aripiprazole oral tablet.....	16
ADVOCATE INSULIN PEN NEEDLE.....	31	amcinonide .....	25	armodafinil.....	35
AEROCHAMBER HOLDING CHAMBER.....	31	amethyst .....	26	ARMOUR THYROID .....	28
AEROCHAMBER PLS FLOVU MTHPIECE .....	31	amiloride hcl oral .....	20	ARNUITY ELLIPTA .....	33
AEROCHAMBER PLUS FLO-VU INTERM.....	31	amiloride-hydrochlorothiazide.....	20	ascomp-codeine.....	10
AEROCHAMBER PLUS FLO-VU LARGE DEVICE.....	31	aminocaproic acid oral .....	19	asenapine maleate .....	16
AEROCHAMBER PLUS FLO-VU MEDIUM DEVICE .....	31			ashlyna .....	26

ASMANEX (14 METERED DOSES).....	33	azathioprine oral tablet 50 mg.....	28	bicalutamide.....	14
ASMANEX (30 METERED DOSES).....	33	azelaic acid external.....	21	BIJUVA ORAL CAPSULE 0.5-100 MG..	26
ASMANEX (60 METERED DOSES).....	33	azelastine-fluticasone.....	34	BIKTARVY.....	16
ASMANEX (120 METERED DOSES)....	33	azelastine hcl nasal solution 0.1 %, 137 mcg/spray.....	33	bisacodyl ec.....	23
ASMANEX HFA.....	33	azelastine hcl ophthalmic.....	32	bisacodyl oral.....	23
aspirin 81 oral tablet delayed release...9		azithromycin oral.....	11	bisoprolol fumarate oral.....	19
aspirin adult low dose.....	9	azurette.....	26	bisoprolol-hydrochlorothiazide.....	20
aspirin adult low strength.....	9	bac.....	10	blisovi 24 fe.....	26
aspirin childrens.....	9	bacitracin ophthalmic.....	32	blisovi fe 1.5/30.....	26
aspirin-dipyridamole er.....	19	bacitracin-polymyxin b.....	32	blisovi fe 1/20.....	26
aspirin ec adult low dose.....	9	bacitra-neomycin-polymyxin-hc.....	32	BOOSTRIX.....	29
aspirin ec low dose.....	9	baclofen oral tablet 10 mg, 20 mg, 5 mg.....	34	BOOSTRIX INTRAMUSCULAR SUSPENSION 5-2.5-18.5 LF-MCG/0.5..	29
aspirin ec low strength.....	9	balsalazide disodium.....	30	bosentan.....	34
aspirin low dose.....	9	balziva.....	26	BOSULIF.....	15
aspirin oral tablet chewable.....	9	BAQSIMI ONE PACK.....	18	BREATHE COMFORT CHAMBER/ADULT.....	31
aspirin oral tablet delayed release 81 mg.....	9	BAQSIMI TWO PACK.....	18	BREATHE COMFORT CHAMBER/CHILD.....	31
aspirin regimen.....	9	BARACLUDE ORAL SOLUTION.....	16	brey-na.....	33
ASSURE ID DUO PRO PEN NEEDLES...31		BASAGLAR KWIKPEN.....	18	BREZTRI AEROSPHERE.....	34
ASSURE ID PRO PEN NEEDLES.....	31	BAXDELA ORAL.....	11	briellyn.....	26
ATABEX OB.....	22	BD AUTOSHIELD DUO PEN NEEDLES..	31	BRILINTA.....	19
atazanavir sulfate.....	16	BD SHARPS COLLECTOR.....	31	brimonidine tartrate external.....	22
atenolol-chlorthalidone.....	20	BD ULTRA-FINE INSULIN SYRINGES...31		brimonidine tartrate ophthalmic solution 0.15 %, 0.2 %.....	32
atenolol oral.....	19	BD ULTRA-FINE PEN NEEDLES.....	31	brimonidine tartrate-timolol.....	32
atomoxetine hcl.....	21	BELSOMRA.....	35	brinzolamide.....	32
atorvastatin calcium oral tablet 10 mg, 20 mg.....	20	benazepril hcl oral.....	19	bromfenac sodium (once-daily).....	33
atorvastatin calcium oral tablet 40 mg, 80 mg.....	20	benazepril-hydrochlorothiazide.....	20	bromocriptine mesylate oral capsule...15	
atovaquone.....	15	BENZNIDAZOLE.....	15	bromocriptine mesylate oral tablet...15	
atovaquone-proguanil hcl.....	15	benzonatate oral capsule 100 mg, 200 mg.....	34	budesonide-formoterol fumarate....	33
atropine sulfate ophthalmic solution 1 %.....	32	benzoyl peroxide-erythromycin.....	21	budesonide inhalation.....	33
ATROVENT HFA.....	33	benztropine mesylate oral.....	15	budesonide oral.....	30
abra eq.....	26	bepotastine besilate.....	32	budesonide rectal.....	30
AUM ALCOHOL PREP PADS.....	31	BESIVANCE.....	33	bumetanide oral.....	20
AUM INSULIN SAFETY PEN NEEDLE...31		BETADINE OPHTHALMIC PREP.....	32	buprenorphine hcl-naloxone hcl sublingual film.....	10
AUM MINI INSULIN PEN NEEDLE.....	31	betaine.....	24	buprenorphine hcl-naloxone hcl sublingual tablet sublingual.....	10
AUM PEN NEEDLE.....	31	betamethasone dipropionate aug....	25	buprenorphine hcl sublingual.....	10
AUM READYGARD DUO PEN NEEDLE...31		betamethasone dipropionate external	25	bupropion hcl er (smoking det).....	10
AUM SAFETY PEN NEEDLE.....	31	betamethasone valerate external cream.....	25	bupropion hcl er (sr).....	12
aurovela 1.5/30.....	26	betamethasone valerate external lotion.....	25	bupropion hcl er (xl) oral tablet extended release 24 hour 150 mg, 300 mg.....	12
aurovela 1/20.....	26	betamethasone valerate external ointment.....	25	bupropion hcl oral.....	12
aurovela 24 fe.....	26	BETASERON.....	21	bupropion hcl oral.....	12
aurovela fe 1.5/30.....	26	betaxolol hcl ophthalmic.....	32	buspirone hcl oral.....	17
aurovela fe 1/20.....	26	betaxolol hcl oral.....	19	butalbital-acetaminophen oral tablet...10	
AURYXIA.....	22	bethanechol chloride oral.....	24	butalbital-apap-caff-cod.....	10
AUSTEDO.....	21	BETIMOL.....	32	butalbital-apap-caffeine oral capsule...10	
AUTOLET LANCING DEVICE.....	17	BETOPTIC-S.....	32	butalbital-apap-caffeine oral tablet...10	
aviane.....	26	BEVESPI AEROSPHERE.....	33	butalbital-asa-caff-codeine.....	10
avidoxy.....	11	bexarotene external.....	15	butalbital-aspirin-caffeine.....	10
AVONEX PEN.....	21	bexarotene oral.....	15	butorphanol tartrate nasal.....	10
AVONEX PREFILLED.....	21	BEXSERO.....	29	BYDUREON BCISE AUTOINJECTOR...18	
ayuna.....	26	BEYFORTUS.....	29		
AZASITE.....	32				

cabergoline .....	25	cefprozil .....	11	CLINDACIN ETZ EXTERNAL KIT .....	22
caffeine citrate oral .....	21	cefuroxime axetil .....	11	clindacin etz external swab .....	22
calcipotriene-betameth diprop .....	22	celecoxib oral .....	9	clindacin-p .....	22
calcipotriene external cream .....	22	cephalexin oral capsule 250 mg, 500 mg .....	11	clindamycin hcl oral .....	10
calcipotriene external ointment .....	22	cephalexin oral suspension reconstituted .....	11	clindamycin palmitate hcl .....	11
calcipotriene external solution .....	22	cevimeline hcl .....	21	clindamycin phos-benzoyl perox external gel 1.2-5 % .....	22
calcitonin (salmon) nasal .....	31	charlotte 24 fe .....	26	clindamycin phosphate external gel ..	22
calcitriol external .....	22	chateal eq .....	26	clindamycin phosphate external lotion	22
calcitriol oral capsule .....	31	CHEMET .....	22	clindamycin phosphate external solution .....	22
calcitriol oral solution .....	31	CHEMSTRIP K .....	17	clindamycin phosphate external swab	22
calcium acetate oral tablet 667 mg ..	22	CHEMSTRIP MICRAL .....	17	clindamycin phosphate vaginal .....	11
calcium acetate (phos binder) .....	22	CHEMSTRIP UGK .....	17	clobazam .....	11
camila .....	27	chlordiazepoxide-amitriptyline .....	12	clobetasol propionate e .....	25
camrese .....	26	chlordiazepoxide hcl .....	17	clobetasol propionate external cream	25
camrese lo .....	26	chlorhexidine gluconate mouth/throat	21	clobetasol propionate external gel ..	25
candesartan cilexetil .....	19	chloroquine phosphate oral .....	15	clobetasol propionate external ointment .....	25
candesartan cilexetil-hctz .....	20	chlorpromazine hcl oral tablet .....	15	clobetasol propionate external solution .....	25
capecitabine .....	14	chlorthalidone .....	20	clocortolone pivalate .....	25
CAPRELSA .....	15	chlorzoxazone oral tablet 500 mg ....	34	CLOMID .....	25
captopril-hydrochlorothiazide .....	20	cholestyramine light .....	20	clomipramine hcl oral .....	13
captopril oral .....	19	cholestyramine oral .....	21	clonazepam oral tablet .....	17
CAPVAXIVE .....	29	CHOSEN LANCETS 30G .....	17	clonazepam oral tablet dispersible ..	17
carbamazepine er .....	12	CHOSEN LANCING DEVICE .....	17	clonidine .....	19
carbamazepine oral suspension 100 mg/5ml .....	12	CHOSEN SAFETY LANCETS 28G .....	17	clonidine hcl er oral tablet extended release 12 hour .....	21
carbamazepine oral tablet .....	12	ciclodan .....	13	clonidine hcl oral .....	19
carbamazepine oral tablet chewable ..	12	ciclopirox external .....	13	clopidogrel bisulfate oral .....	19
carbidopa-levodopa-entacapone .....	15	ciclopirox olamine external .....	13	clorazepate dipotassium .....	17
carbidopa-levodopa er .....	15	cilostazol .....	19	clotrimazole-betamethasone external cream .....	13
carbidopa-levodopa oral tablet .....	15	CILOXAN .....	33	clotrimazole-betamethasone external lotion .....	13
carbidopa-levodopa oral tablet dispersible .....	15	cimetidine hcl .....	23	clotrimazole mouth/throat .....	13
carbidopa oral .....	15	cimetidine oral .....	23	clozapine oral tablet .....	16
carbinoxamine maleate oral solution ..	33	CIMZIA .....	28	clozapine oral tablet dispersible .....	16
carbinoxamine maleate oral tablet 4 mg .....	33	CIMZIA (2 SYRINGE) .....	29	codeine sulfate .....	10
CARDURA XL .....	24	CIMZIA STARTER KIT .....	29	colchicine oral tablet .....	13
CARESENS LANCETS 30G .....	17	cinacalcet hcl .....	31	colchicine-probenecid .....	13
CARETOUCH LANCING/EJECTOR .....	17	ciprofloxacin-dexamethasone .....	33	colesevelam hcl .....	21
carglumic acid .....	22	CIPROFLOXACIN-FLUOCINOLONE PF33	33	colestipol hcl oral granules .....	21
carisoprodol oral tablet 350 mg .....	34	ciprofloxacin hcl ophthalmic .....	33	colestipol hcl oral packet .....	21
carteolol hcl .....	32	ciprofloxacin hcl oral .....	11	colestipol hcl oral tablet .....	21
cartia xt .....	19	ciprofloxacin hcl otic .....	33	COMETRIQ .....	15
carvedilol .....	19	citalopram hydrobromide oral solution	12	COMFORT EZ PRO PEN NEEDLES .....	31
CAYA .....	31	citalopram hydrobromide oral tablet ..	12	COMFORT TOUCH TWIST LANCET 30G .....	17
cefaclor er .....	11	citroma .....	23	COMIRNATY .....	29
cefaclor oral capsule .....	11	claravis .....	22	COMIRNATY INTRAMUSCULAR SUSPENSION 30 MCG/0.3ML .....	29
cefadroxil oral capsule .....	11	clarithromycin er .....	11	COMPLERA .....	16
cefadroxil oral suspension reconstituted .....	11	clarithromycin oral suspension reconstituted .....	11	CONDOMS .....	31
cefadroxil oral tablet .....	11	clarithromycin oral tablet .....	11	constulose .....	23
cefdinir .....	11	clearlax .....	23		
cefixime oral capsule .....	11	clemastine fumarate oral tablet .....	33		
cefixime oral suspension reconstituted	11	CLENPIQ .....	23		
cefpodoxime proxetil .....	11	CLEVER CHOICE COMFORT EZ .....	17		
		CLIMARA PRO .....	26		



CONTOUR CONTROL IN VITRO LIQUID LOW , NORMAL.....	17	desmopressin ace spray refrig .....	25	dihydroergotamine mesylate injection	13
CORDRAN .....	25	desmopressin acetate injection.....	25	DILANTIN ORAL CAPSULE 30 MG .....	12
CORLANOR .....	20	desmopressin acetate oral .....	25	diltiazem hcl er beads .....	19
CORTIFOAM .....	30	desmopressin acetate pf .....	25	diltiazem hcl er coated beads .....	19
CORTISPORIN-TC.....	33	desmopressin acetate spray .....	25	diltiazem hcl er oral capsule extended release 12 hour.....	19
COTELLIC.....	15	desogestrel-ethinyl estradiol.....	26	diltiazem hcl er oral capsule extended release 24 hour.....	19
CREON .....	24	desonide external cream.....	25	diltiazem hcl er oral tablet extended release 24 hour.....	19
CRESEMBA ORAL .....	13	desonide external lotion.....	25	diltiazem hcl oral.....	19
cromolyn sodium inhalation.....	34	desonide external ointment.....	25	dilt-xr.....	19
cromolyn sodium ophthalmic.....	32	desoximetasone external.....	25	dimethyl fumarate oral .....	21
cromolyn sodium oral .....	23	desvenlafaxine succinate er.....	12	dimethyl fumarate starter pack.....	21
CROTAN .....	15	dexamethasone intensol .....	25	DIPENTUM .....	30
cryselle-28 .....	26	dexamethasone oral elixir .....	25	diphenhydramine hcl oral elixir .....	33
curae .....	27	dexamethasone oral solution .....	25	diphenoxylate-atropine oral liquid ....	23
CVS KETONE CARE .....	17	dexamethasone oral tablet.....	25	diphenoxylate-atropine oral tablet ...	23
cyanocobalamin injection solution 1000 mcg/ml.....	22	dexamethasone sodium phosphate ophthalmic.....	33	dipyridamole oral .....	19
CYANOCOBALAMIN INJECTION SOLUTION 2000 MCG/ML .....	22	DEXCOM G6 RECEIVER.....	17	disopyramide phosphate.....	19
cyclobenzaprine hcl oral.....	34	DEXCOM G6 SENSOR.....	17	disulfiram oral.....	10
CYCLOMYDRIL.....	32	DEXCOM G6 TRANSMITTER.....	17	DIURIL .....	20
cyclopentolate hcl ophthalmic.....	32	DEXCOM G7 RECEIVER.....	17	divalproex sodium er .....	17
cyclophosphamide oral capsule .....	14	DEXCOM G7 SENSOR.....	17	divalproex sodium oral .....	17
CYCLOPHOSPHAMIDE ORAL TABLET ..	14	dexlansoprazole .....	24	DODEX .....	22
cycloserine oral .....	14	dexmethylphenidate hcl.....	21	dofetilide.....	19
cyclosporine modified.....	29	dexmethylphenidate hcl er.....	21	dolishale.....	26
cyclosporine ophthalmic .....	32	dextroamphetamine sulfate er.....	21	donepezil hcl oral tablet 10 mg, 5 mg ..	12
cyclosporine oral.....	29	dextroamphetamine sulfate oral solution.....	21	donepezil hcl oral tablet dispersible ..	12
cyproheptadine hcl oral .....	33	DIACOMIT .....	12	dorzolamide hcl ophthalmic .....	32
cyred eq .....	26	DIASTIX REAGENT .....	17	dorzolamide hcl-timolol mal .....	32
CYSTAGON.....	24	diazepam intensol .....	17	dorzolamide hcl-timolol mal pf .....	32
CYSTARAN .....	32	diazepam oral concentrate.....	17	dotti .....	26
dalfampridine er.....	21	diazepam oral solution .....	17	DOVATO .....	16
danazol oral .....	25	diazepam oral tablet.....	17	doxazosin mesylate oral .....	19
dantrolene sodium oral.....	34	diazepam rectal.....	12	doxepin hcl external .....	22
dapsone oral .....	14	diazoxide oral .....	18	doxepin hcl oral capsule.....	13
DAPTACEL.....	29	diclofenac-misoprostol.....	9	doxepin hcl oral concentrate.....	13
darifenacin hydrobromide er.....	24	diclofenac potassium oral tablet 50 mg	9	doxepin hcl oral tablet.....	35
darunavir .....	16	diclofenac sodium er .....	9	doxercalciferol oral .....	31
dasetta 1/35.....	26	diclofenac sodium external gel 1 %.....	9	doxycycline hyclate oral capsule .....	11
dasetta 7/7/7.....	26	diclofenac sodium external gel 3 % ..	14	doxycycline hyclate oral tablet 100 mg, 20 mg.....	11
DAYBUE .....	21	diclofenac sodium ophthalmic.....	33	doxycycline monohydrate oral capsule 100 mg, 50 mg .....	11
daysee.....	26	diclofenac sodium oral .....	9	doxycycline monohydrate oral suspension reconstituted .....	11
deblitane.....	27	dicloxacillin sodium.....	11	doxycycline monohydrate oral tablet ..	11
deferasirox granules .....	22	dicyclomine hcl oral capsule .....	23	doxylamine-pyridoxine .....	13
deferasirox oral packet .....	22	dicyclomine hcl oral solution.....	23	dronabinol .....	13
deferasirox oral tablet .....	22	dicyclomine hcl oral tablet .....	23	DROPSAFE ALCOHOL PREP.....	31
deferasirox oral tablet soluble.....	22	diflorasone diacetate external cream.	25	DROPSAFE SAFETY SYRINGE/NEEDLE	31
delyla .....	26	diflunisal oral.....	9	drosipren-eth estrad-levomefol.....	26
demeclocycline hcl .....	11	difluprednate .....	33	drosiprenone-ethinyl estradiol.....	26
DENGVAXIA .....	29	digoxin oral solution .....	20	DROXIA .....	14
DEPO-SUBQ PROVERA 104.....	27	digoxin oral tablet 62.5 mcg.....	20	DUAVEE .....	26
desipramine hcl oral .....	13	digoxin oral tablet 125 mcg, 250 mcg.	20		
desloratadine oral tablet .....	33				

duloxetine hcl oral capsule delayed release particles 20 mg, 30 mg, 60 mg	12	enskyce.....	26	everolimus oral tablet 10 mg, 2.5 mg, 5 mg, 75 mg.....	15
DUOBRII.....	22	entacapone.....	15	EVOTAZ.....	16
DUOPA.....	15	entecavir.....	16	EXELDERM.....	13
DUPIXENT.....	22	ENTRESTO.....	20	exemestane.....	14
DUREX EXTRA SENSITIVE THIN.....	31	enulose.....	23	ezetimibe.....	21
DUREX TROPICAL.....	31	epinastine hcl.....	32	ezetimibe-simvastatin.....	21
dutasteride oral.....	24	epinephrine injection solution auto-injector.....	34	falmina.....	26
dutasteride-tamsulosin hcl.....	24	epitol.....	12	famciclovir oral.....	16
EASIVENT.....	31	eplerenone.....	20	famotidine oral suspension reconstituted.....	23
EASY COMFORT SHARPS CONTAINER.....	31	EQUETRO.....	17	famotidine oral tablet 20 mg, 40 mg.....	23
ec-naproxen.....	9	ergocalciferol oral capsule.....	22	FARXIGA.....	18
econazole nitrate external.....	13	ergoloid mesylates oral.....	31	FC2 FEMALE CONDOM.....	31
econtra one-step.....	27	ERGOMAR.....	13	febuxostat.....	13
EDARBI.....	19	ergotamine-caffeine.....	13	felbamate.....	12
EDARBYCLOR.....	20	ERLEADA.....	14	felodipine er.....	19
EDURANT.....	16	erlotinib hcl.....	15	FEMCAP.....	31
efavirenz.....	16	errin.....	27	fenofibrate micronized oral capsule 134 mg, 200 mg, 67 mg.....	20
efavirenz-emtricitab-tenofo df.....	16	ery pad 2%.....	22	fenofibrate oral capsule 134 mg, 200 mg, 67 mg.....	20
efavirenz-lamivudine-tenofovir.....	16	erythromycin base oral capsule delayed release particles.....	11	fenofibrate oral tablet 145 mg, 160 mg, 48 mg, 54 mg.....	20
EFFER-K ORAL TABLET		erythromycin base oral tablet.....	11	fenopropfen calcium oral tablet.....	9
EFFERVESCENT 10 MEQ, 20 MEQ.....	22	erythromycin base oral tablet delayed release.....	11	fentanyl citrate buccal lozenge on a handle.....	10
effer-k oral tablet effervescent 25 meq.....	22	erythromycin ethylsuccinate oral.....	11	fentanyl transdermal patch 72 hour 100 mcg/hr, 12 mcg/hr, 25 mcg/hr, 50 mcg/hr, 75 mcg/hr.....	9
EGATEN.....	15	erythromycin external.....	22	fesoterodine fumarate er.....	24
eletriptan hydrobromide.....	13	erythromycin ophthalmic.....	32	FETZIMA.....	12
ELIGARD.....	28	erythromycin oral.....	11	finasteride oral tablet 5 mg.....	24
elinest.....	26	escitalopram oxalate oral solution.....	12	fingolimod hcl.....	21
ELIQUIS.....	18	escitalopram oxalate oral tablet.....	12	finzala.....	26
ELIQUIS DVT/PE STARTER PACK.....	18	ESKATA.....	22	flac.....	33
elixophyllin.....	34	esomeprazole magnesium oral capsule delayed release.....	24	flavoxate hcl.....	24
ELLA.....	27	estarylla.....	26	flecainide acetate.....	19
ELMIRON.....	24	estazolam.....	17	FLEXICHAMBER.....	31
eluryng.....	26	estradiol-norethindrone acet.....	26	FLEXICHAMBER ADULT MASK/SMALL.....	31
EMBRACE PEN NEEDLES 30G X 5 MM, 30G X 8 MM, 31G X 6 MM, 31G X 8 MM, 32G X 4 MM.....	31	estradiol oral.....	26	FLEXICHAMBER CHILD MASK/LARGE.....	31
EMCYT.....	14	estradiol transdermal patch twice weekly.....	26	FLEXICHAMBER CHILD MASK/SMALL.....	31
EMEND ORAL SUSPENSION RECONSTITUTED.....	13	estradiol transdermal patch weekly.....	26	FLUAD.....	29
EMGALITY.....	13	estradiol vaginal cream.....	26	FLUARIX.....	29
emtricitabine.....	16	estradiol vaginal tablet.....	26	FLUCELVAX INTRAMUSCULAR SUSPENSION PREFILLED SYRINGE.....	29
emtricitabine-tenofovir df oral tablet 100-150 mg, 133-200 mg, 167-250 mg.....	16	estradiol valerate intramuscular.....	26	fluconazole oral.....	13
emtricitabine-tenofovir df oral tablet 200-300 mg.....	16	ESTRING.....	26	flucytosine oral.....	13
emzahn.....	27	eszopiclone.....	34	fludrocortisone acetate oral.....	25
enalapril-hydrochlorothiazide.....	20	ethacrynic acid.....	20	FLULAVAL.....	29
enalapril maleate oral tablet.....	19	ethambutol hcl oral.....	14	FLUMIST.....	29
ENCARE.....	24	ethosuximide oral.....	11	FLUMIST QUADRIVALENT NASAL SUSPENSION.....	30
endocet.....	10	ethynodiol diac-eth estradiol.....	26	flunisolide nasal.....	33
ENGERIX-B.....	29	etodolac.....	9	fluocinolone acetonide body.....	25
enilloring.....	26	etodolac er.....	9	fluocinolone acetonide external.....	25
enoxaparin sodium.....	18	etonogestrel-ethinyl estradiol.....	26	fluocinolone acetonide otic.....	33
enpresse-28.....	26	etoposide oral.....	14		
		etravirine.....	16		
		euthyrox.....	28		



fluocinolone acetonide scalp .....	25	FREESTYLE LIBRE READER.....	17	glyburide micronized .....	18
fluocinonide emulsified base .....	25	FRESKARO MAGNESIUM CITRATE ....	23	glyburide oral .....	18
fluocinonide external cream 0.05 %...	25	frovatriptan succinate .....	14	glycolax .....	23
fluocinonide external gel .....	25	ft acid reducer oral capsule delayed		glycopyrrolate oral tablet 1 mg, 2 mg	23
fluocinonide external ointment.....	25	release 15 mg .....	24	glydo .....	10
fluocinonide external solution .....	25	ft aspirin low dose .....	9	goodsense aspirin low dose .....	9
fluorometholone.....	33	ft aspirin oral tablet chewable.....	9	goodsense nicotine mouth/throat	
fluorouracil external cream.....	14	ft clearlax .....	23	gum 2 mg .....	10
fluorouracil external solution.....	14	ft folic acid .....	23	goodsense nicotine mouth/throat	
fluoxetine hcl oral capsule.....	12	ft laxative.....	23	lozenge 4 mg.....	10
fluoxetine hcl oral capsule delayed		ft magnesium citrate .....	23	granisetron hcl oral .....	13
release.....	12	ft nicotine .....	10	GRASTEK .....	31
fluoxetine hcl oral solution .....	12	ft nicotine mini.....	10	griseofulvin microsize oral.....	13
fluoxetine hcl oral tablet 10 mg, 20 mg	12	furosemide oral .....	20	griseofulvin ultramicronsize .....	13
fluoxetine hcl (pmdd) .....	12	FUZEON.....	16	guaifenesin-codeine.....	34
fluphenazine hcl oral .....	15	fyavolv.....	26	guanfacine hcl .....	19
flurandrenolide external lotion.....	25	FYCOMPA ORAL SUSPENSION.....	12	guanfacine hcl er .....	21
flurazepam hcl .....	34	gabapentin oral capsule.....	12	GVOKE HYPOPEN 1-PACK.....	18
flurbiprofen oral tablet 100 mg .....	9	gabapentin oral solution 250 mg/5ml	12	GVOKE HYPOPEN 2-PACK.....	18
flurbiprofen sodium .....	33	gabapentin oral tablet 600 mg, 800		GVOKE KIT.....	18
fluticasone propionate external cream25		mg.....	12	GVOKE PFS.....	18
fluticasone propionate external		galantamine hydrobromide er .....	12	GYNAZOLE-1.....	13
ointment .....	25	galantamine hydrobromide oral		habitrol .....	10
fluticasone propionate nasal .....	33	solution.....	12	HADLIMA.....	29
fluticasone-salmeterol inhalation		galantamine hydrobromide oral tablet	12	HADLIMA PUSH TOUCH.....	29
aerosol powder breath activated		GALZIN.....	22	HAEGARDA.....	28
100-50 mcg/act, 250-50 mcg/act,		GARDASIL 9.....	30	hailey 1.5/30.....	26
500-50 mcg/act .....	33	gatifloxacin ophthalmic .....	33	hailey 24 fe .....	26
FLUTICASONE-SALMETEROL		gavilax oral powder .....	23	hailey fe 1.5/30 .....	26
INHALATION AEROSOL POWDER		gavilyte-c.....	23	hailey fe 1/20.....	26
BREATH ACTIVATED 113-14 MCG/		gavilyte-g .....	23	halobetasol propionate external	
ACT, 232-14 MCG/ACT, 55-14 MCG/		gavilyte-n with flavor pack.....	23	cream .....	25
ACT.....	33	gefitinib .....	15	halobetasol propionate external	
fluvastatin sodium.....	20	gemfibrozil oral .....	20	ointment .....	25
fluvoxamine maleate .....	12	gemmily.....	26	haloette .....	26
fluvoxamine maleate er .....	12	generlac.....	23	haloperidol lactate oral concentrate	
FLUZONE HIGH-DOSE.....	30	gengraf.....	29	2 mg/ml .....	15
FLUZONE INTRAMUSCULAR		gentamicin sulfate external .....	10	haloperidol oral .....	15
SUSPENSION PREFILLED SYRINGE...	30	gentamicin sulfate ophthalmic .....	32	HAVRIX .....	30
folic acid oral tablet 1 mg .....	22	gentlelax .....	23	heather .....	27
folic acid oral tablet 400 mcg, 800		gentle laxative oral tablet delayed		heparin sodium (porcine) .....	18
mcg.....	23	release.....	23	heparin sodium (porcine) pf .....	18
fondaparinux sodium.....	18	GENVOYA .....	16	HEPLISAV-B .....	30
FORA TEST N'GO ADV-VOICE-6 CON ..	17	glatiramer acetate .....	21	her style .....	27
formoterol fumarate inhalation .....	34	glatopa .....	21	HIBERIX .....	30
fosamprenavir calcium .....	16	GLEOSTINE .....	14	HUMALOG.....	18
fosfomycin tromethamine .....	11	glimepiride oral tablet 1 mg, 2 mg, 4		HUMALOG KWIKPEN .....	18
fosinopril sodium .....	19	mg.....	18	HUMALOG MIX 50/50 KWIKPEN .....	18
fosinopril sodium-hctz.....	20	glipizide er .....	18	HUMALOG MIX 50/50 VIAL .....	18
FOSRENOL ORAL PACKET.....	22	glipizide ir .....	18	HUMALOG MIX 75/25 KWIKPEN.....	18
FRAGMIN.....	18	glipizide-metformin hcl .....	18	HUMALOG MIX 75/25 VIAL .....	18
FREESTYLE LIBRE 2 READER.....	17	glipizide xl.....	18	HUMALOG U-100 JUNIOR KWIKPEN...	18
FREESTYLE LIBRE 2 SENSOR.....	17	glucagon emergency kit.....	18	HUMATIN.....	10
FREESTYLE LIBRE 3 READER.....	17	GLUCAGON EMERGENCY KIT.....	18	HUMIRA (2 PEN) .....	29
FREESTYLE LIBRE 3 SENSOR.....	17	GLUCO TO GO .....	18	HUMIRA (2 SYRINGE).....	29
FREESTYLE LIBRE 14 DAY READER.....	17	glyburide-metformin .....	18	HUMIRA-CD/UC/HS STARTER.....	29
FREESTYLE LIBRE 14 DAY SENSOR.....	17				

HUMIRA-PSORIASIS/UVEIT STARTER	29	imipramine hcl oral	13	itraconazole oral	13
HUMULIN 70/30 KWIKPEN	18	imipramine pamoate	13	ivabradine hcl	20
HUMULIN 70/30 VIAL	18	imiquimod external cream 5 %	22	ivermectin external cream	22
HUMULIN N KWIKPEN	18	incassia	27	ivermectin oral	15
HUMULIN N VIAL	18	INCRELEX	25	jaimiess	26
HUMULIN R U-500 KWIKPEN	18	INCRUSE ELLIPTA	33	JAKAFI	15
HUMULIN R U-500 VIAL	18	indapamide	20	jantoven	18
HUMULIN R VIAL	18	indomethacin er	9	JARDIANCE	18
HYCAMTIN ORAL	15	indomethacin oral capsule	9	jasmiel	26
hydralazine hcl oral	21	INFANRIX	30	jencycla	27
hydrochlorothiazide oral	20	INGREZZA	21	JENTADUETO	18
hydrocodone-acetaminophen oral solution 7.5-325 mg/15ml	10	INSPIREASE RESERVOIR BAGS	31	JENTADUETO XR	18
hydrocodone-acetaminophen oral tablet 10-325 mg, 5-325 mg, 7.5-325 mg	10	INSULIN ASPART PROT & ASPART	18	jinteli	26
hydrocodone bitartrate er oral capsule extended release 12 hour	9	INSULIN DEGLUDEC	18	jolessa	26
hydrocodone bit-homatrop mbr	34	INSULIN DEGLUDEC FLEXTOUCH	18	joyeaux	26
hydrocodone-ibuprofen	10	INSULIN LISPRO	18	juleber	26
hydrocod poli-chlorphe poli er	34	INSULIN LISPRO (1 UNIT DIAL)	18	JULUCA	16
hydrocortisone ace-pramoxine external cream 1-1 %	31	INSULIN LISPRO JUNIOR KWIKPEN	18	junel 1.5/30	26
hydrocortisone-acetic acid	33	INSULIN LISPRO PROT & LISPRO	18	junel 1/20	26
hydrocortisone butyrate external cream	25	INSULIN PEN NEEDLES 29G X 12.7MM, 29G X 12MM, 29G X 5MM, 29G X 8MM, 30G X 5 MM, 30G X 8 MM, 31G X 4 MM, 31G X 5 MM, 31G X 6 MM, 31G X 8 MM, 32G X 4 MM, 32G X 5 MM, 32G X 6 MM, 32G X 8 MM, 33G X 4 MM, 33G X 5 MM, 33G X 6 MM	31	junel 1.5/30	26
hydrocortisone butyrate external ointment	25	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" 0.3 ML, 30G X 1/2" 0.5 ML, 30G X 1/2" 1 ML, 30G X 5/16" 0.3 ML, 30G X 5/16" 0.5 ML, 30G X 5/16" 1 ML, 31G X 15/64" 0.3 ML, 31G X 15/64" 0.5 ML, 31G X 15/64" 1 ML, 31G X 5/16" 0.3 ML, 31G X 5/16" 0.5 ML, 31G X 5/16" 1 ML, 32G X 5/16" 1 ML	31	junel fe 1.5/30	26
hydrocortisone butyrate external solution	25	INTELENCE ORAL TABLET 25 MG	16	junel fe 1/20	26
hydrocortisone external cream 2.5 %	25	introvale	26	junel fe 24	26
hydrocortisone external lotion 2.5 %	25	INVELTYS	33	kaitlib fe	26
hydrocortisone external ointment 1 %, 2.5 %	25	IOPIDINE	32	kalliga	26
hydrocortisone oral	25	IPOL	30	kariva	26
hydrocortisone (perianal) external cream 2.5 %	30	ipratropium-albuterol	34	kelnor 1/35	26
hydrocortisone rectal	31	ipratropium bromide inhalation	33	kelnor 1/50	26
hydrocortisone valerate	25	ipratropium bromide nasal	33	ketoconazole external cream	13
hydromet	34	irbesartan	19	ketoconazole external shampoo	13
hydromorphone hcl er	9	irbesartan-hydrochlorothiazide	20	ketoconazole oral	13
hydromorphone hcl oral liquid	10	isibloom	26	KETO-DIASTIX	17
hydromorphone hcl oral tablet	10	isoniazid oral syrup	14	KETONE TEST	17
hydroxychloroquine sulfate oral tablet 100 mg, 200 mg	15	isoniazid oral tablet	14	ketoprofen er	9
hydroxyurea oral	14	isosorb dinitrate-hydralazine	20	ketoprofen oral	9
hydroxyzine hcl oral	17	isosorbide dinitrate oral tablet 10 mg, 20 mg, 30 mg, 5 mg	21	ketorolac tromethamine ophthalmic	33
hydroxyzine pamoate oral	17	isosorbide dinitrate	21	ketorolac tromethamine oral	9
HYPERSAL	34	isosorbide mononitrate	21	KETOSTIX	17
ibandronate sodium oral	31	isosorbide mononitrate er	21	KIPROFEN	9
ibuprofen oral tablet 400 mg, 600 mg, 800 mg	9	isotretinoin oral capsule 10 mg, 20 mg, 30 mg, 40 mg	22	klayesta	13
icatibant acetate	28	isradipine	19	klor-con 10	22
iclevia	26			klor-con/ef	22
icosapent ethyl	21			klor-con m10	22
imatinib mesylate	15			klor-con m15	22
IMBRUVICA	15			klor-con m20	22
				klor-con oral packet	22
				klor-con oral tablet extended release	22
				kourzeq	21
				k-prime	22
				KRINTAFEL	15
				KRISTALOSE	23
				kurvelo	26
				KYLEENA	28
				labetalol hcl oral	19
				lacosamide oral	12

lactulose encephalopathy oral solution 10 gm/15ml	23	levonorgest-eth estradiol-iron	26	lyza	28
lactulose oral packet	23	levonorgestrel	28	mafenide acetate external	11
lactulose oral solution	23	levonorgestrel-ethinyl estrad	26	magnesium citrate oral solution	23
LAGEVRIO	16	levonorg-eth estrad triphasic	26	malathion	15
lamivudine oral solution	16	levora 0.15/30 (28)	27	maraviroc	16
lamivudine oral tablet 100 mg	16	levorphanol tartrate oral	9	marlissa	27
lamivudine oral tablet 150 mg, 300 mg	16	levo-t	28	MARPLAN	12
lamivudine-zidovudine	16	levothyroxine sodium oral tablet	28	MATULANE	14
lamotrigine oral tablet	12	levoxyl	28	matzim la	19
lamotrigine oral tablet chewable	12	lidocaine external patch 5 %	10	maxi-tuss ac	34
LANCETS	17	lidocaine hcl external solution	10	meclizine hcl oral tablet 25 mg	13
LANCETS SUPER THIN	17	lidocaine hcl mouth/throat	10	meclizine hcl oral tablet 50 mg	13
lansoprazole oral capsule delayed release	24	lidocaine hcl urethral/mucosal	10	meclofenamate sodium oral	9
lanthanum carbonate	22	lidocaine-prilocaine external cream	10	medroxyprogesterone acetate intramuscular suspension	28
larin 1.5/30	26	lidocaine viscous hcl	10	medroxyprogesterone acetate intramuscular suspension prefilled syringe	28
larin 1/20	26	LILETTA (52 MG)	28	medroxyprogesterone acetate oral	28
larin 24 fe	26	linezolid oral suspension reconstituted	11	mefenamic acid oral	9
larin fe 1.5/30	26	linezolid oral tablet	11	mefloquine hcl	15
larin fe 1/20	26	LINZESS	23	megestrol acetate oral suspension 40 mg/ml	28
latanoprost ophthalmic	33	liothyronine sodium oral	28	megestrol acetate oral suspension 625 mg/5ml	28
layolis fe	26	lisdexamfetamine dimesylate oral capsule	21	megestrol acetate oral tablet	28
LEDIPASVIR-SOFOSBUVIR	16	lisinopril-hydrochlorothiazide	20	meloxicam oral tablet	9
leena	26	lisinopril oral	19	memantine hcl oral solution	12
leflunomide oral	29	lithium	17	memantine hcl oral tablet	12
lenalidomide	14	lithium carbonate er	17	MENQUADFI	30
LENVIMA ORAL CAPSULE THERAPY PACK 10 & 4 MG, 10 MG, 10 MG & 2 X 4 MG, 2 X 10 MG, 2 X 10 MG & 4 MG, 2 X 4 MG, 3 X 4 MG, 4 MG	15	lithium carbonate oral	17	MENVEO	30
lessina	26	lojaimiess	27	meprobamate	17
letrozole oral	14	LOKELMA	22	mercaptopurine oral	14
leucovorin calcium oral	14	LO LOESTRIN FE	27	merzee	27
LEUKERAN	14	loperamide hcl oral capsule	23	mesalamine-cleanser	30
LEUKINE	19	lopinavir-ritonavir	17	mesalamine er oral capsule 0.375 gm	30
leuprolide acetate injection	28	lorazepam intensol	17	mesalamine oral tablet delayed release 1.2 gm	30
levabuterol hcl inhalation	34	lorazepam oral concentrate 2 mg/ml	17	mesalamine rectal	30
LEVEMIR FLEXPEN	18	lorazepam oral tablet	17	MESNEX ORAL	15
LEVEMIR U-100 VIAL	18	LORBRENA	15	metaxalone	34
levetiracetam er	11	loryna	27	metformin hcl er	18
levetiracetam oral	11	losartan potassium-hctz	20	metformin hcl oral solution	18
levobunolol hcl	32	losartan potassium oral	19	metformin hcl oral tablet 1000 mg, 500 mg, 850 mg	18
levocarnitine oral solution	22	LOTEMAX OPHTHALMIC OINTMENT	33	methadone hcl intensol	9
levocarnitine oral tablet	22	LOTEMAX SM	33	methadone hcl oral concentrate	9
levocarnitine sf	22	loteprednol etabonate ophthalmic suspension 0.5 %	33	methadone hcl oral solution	9
levocetirizine dihydrochloride oral solution	33	lovastatin oral	20	methadone hcl oral tablet	9
levocetirizine dihydrochloride oral tablet	33	low-ogestrel	27	methamphetamine hcl	21
levofloxacin ophthalmic	33	loxapine succinate	15	methazolamide oral	20
levofloxacin oral solution	11	lo-zumandimine	27	methenamine hippurate	11
levofloxacin oral tablet	11	lubiprostone	23	methergine	31
levonest	26	LULICONAZOLE	13	methimazole oral	28
levonorgest-eth est & eth est	26	LUMIGAN	33	methocarbamol oral tablet 500 mg, 750 mg	34
levonorgest-eth estrad 91-day	26	lurasidone hcl	16		
		lutera	27		
		lyleq	28		
		lyllana	27		
		LYSODREN	28		

methotrexate sodium	29	mm clearlax	23	neomycin-polymyxin-dexameth ophthalmic ointment	32
methotrexate sodium (pf)	29	M-M-R II	30	neomycin-polymyxin-dexameth ophthalmic suspension 3.5-10000-0.1	32
methoxsalen rapid	22	M-NATAL PLUS	23	neomycin-polymyxin-gramicidin	32
methscopolamine bromide oral	23	modafinil oral	35	neomycin-polymyxin-hc ophthalmic	32
methsuximide	11	moexipril hcl	19	neomycin-polymyxin-hc otic	33
METHYLDOPA	19	mometasone furoate external	25	neomycin sulfate oral	10
methylergonovine maleate oral	31	mometasone furoate nasal	34	NEONATAL COMPLETE	23
methylphenidate hcl er (cd)	21	mondoxyne nl	11	NEONATAL PLUS	23
methylphenidate hcl er (la)	21	mono-lynyah	27	neo-polycin	32
methylphenidate hcl er oral tablet extended release	21	montelukast sodium oral	33	neo-polycin hc	32
methylphenidate hcl er (osm) oral tablet extended release 18 mg, 27 mg, 36 mg, 54 mg	21	morphine sulfate (concentrate)	10	NEO-SYNALAR	11
methylphenidate hcl oral solution	21	morphine sulfate er oral tablet extended release	9	NEULASTA	19
methylphenidate hcl oral tablet	21	morphine sulfate oral solution	10	NEULASTA ONPRO	19
methylphenidate hcl oral tablet chewable	21	morphine sulfate oral tablet	10	NEUPRO TRANSDERMAL PATCH 24 HOUR 2 MG/24HR	15
methylprednisolone oral	25	MOUNJARO	18	nevirapine	16
methyltestosterone oral	25	moxifloxacin hcl (2x day)	33	nevirapine er	16
metoclopramide hcl oral solution 5 mg/5ml	13	moxifloxacin hcl ophthalmic	33	new day	28
metoclopramide hcl oral tablet	13	moxifloxacin hcl oral	11	NEXPLANON	28
metolazone	20	MULTAQ	19	NEXTSTELLIS	27
metoprolol-hydrochlorothiazide	20	mupirocin cream	11	niacin (antihyperlipidemic)	21
metoprolol succinate er	19	mupirocin ointment	11	niacin er (antihyperlipidemic)	21
metoprolol tartrate oral tablet 100 mg, 25 mg, 50 mg	19	MYALEPT	24	niacor	21
metronidazole external cream	22	my choice	28	nicardipine hcl oral	19
metronidazole external gel 0.75 %	22	mycophenolate mofetil oral capsule	29	NICORETTE MINI	10
metronidazole external lotion	22	mycophenolate mofetil oral suspension reconstituted	29	NICORETTE MOUTH/THROAT GUM 2 MG	10
metronidazole oral tablet	11	mycophenolate mofetil oral tablet	29	NICORETTE MOUTH/THROAT LOZENGE	10
metronidazole vaginal	11	mycophenolate sodium	29	nicotine mini	10
mexiletine hcl oral	19	mycophenolic acid	29	nicotine polacrilex mini	10
mibelas 24 fe	27	MYLERAN	14	nicotine polacrilex mouth/throat	10
miconazole 3	13	my way	28	nicotine step 1	10
microgestin 1.5/30	27	nabumetone oral	9	nicotine step 2	10
microgestin 1/20	27	nadolol oral	19	nicotine step 3	10
microgestin 24 fe oral tablet 1-20 mg-mcg	27	naftifine hcl external cream	13	nicotine transdermal kit	10
microgestin fe 1.5/30	27	naloxone hcl injection	10	nicotine transdermal patch 24 hour 21 mg/24hr	10
microgestin fe 1/20	27	naloxone hcl nasal	10	NICOTROL	10
MICROLET NEXT LANCING DEVICE	17	naltrexone hcl oral	10	NICOTROL NS	10
midodrine hcl	19	naproxen dr	9	nifedipine er	19
MIGERGOT	13	naproxen oral suspension	9	nifedipine er osmotic release	19
miglitol	18	naproxen oral tablet	9	nifedipine oral	19
mili	27	naproxen oral tablet delayed release	9	nikki	27
mimvey	27	naproxen sodium oral tablet 275 mg, 550 mg	9	nilutamide	14
minocycline hcl oral capsule	11	naratriptan hcl	14	nimodipine oral	19
minoxidil oral	21	NARCAN	10	nisoldipine er	19
MIRENA (52 MG)	28	na sulfate-k sulfate-mg sulf	24	nitazoxanide oral	15
mirtazapine oral tablet	12	NATACYN	32	NITRO-BID	21
mirtazapine oral tablet dispersible	12	NATAZIA	27	NITRO-DUR TRANSDERMAL PATCH 24 HOUR 0.3 MG/HR, 0.8 MG/HR	21
misoprostol oral	24	nateglinide	18	nitrofurantoin macrocrystal	11
MITOSOL	32	Nayzilam	11	nitrofurantoin monohydrate macrocrystals	11
mm aspirin	9	NEBUSAL	34		
		necon 0.5/35 (28)	27		
		nefazodone hcl	12		
		neomycin-bacitracin zn-polymyx	32		



nitrofurantoin oral suspension 25 mg/5ml.....	11	olmesartan medoxomil-hctz.....	20	oxycodone-acetaminophen oral tablet 10-325 mg, 2.5-325 mg, 5-325 mg, 7.5-325 mg.....	10
nitroglycerin rectal.....	21	olmesartan medoxomil oral.....	19	oxycodone hcl oral capsule.....	10
nitroglycerin sublingual.....	21	olopatadine hcl nasal.....	33	oxycodone hcl oral concentrate.....	10
nitroglycerin transdermal.....	21	olopatadine hcl ophthalmic solution 0.1 %.....	32	oxycodone hcl oral solution.....	10
NIVA THYROID.....	28	OLUMIANT.....	29	oxycodone hcl oral tablet.....	10
nizatidine.....	23	omega-3-acid ethyl esters.....	21	oxymorphone hcl.....	10
nora-be.....	28	omeprazole oral capsule delayed release 10 mg.....	24	oxymorphone hcl er.....	10
norelgestromin-eth estradiol.....	27	omeprazole oral capsule delayed release 20 mg, 40 mg.....	24	OZEMPIC.....	18
norethin ace-eth estrad-fe.....	27	OMNIPOD 5 G6 INTRO (GEN 5).....	31	paliperidone er.....	16
norethindrone acetate oral.....	28	OMNIPOD 5 G6 PODS (GEN 5).....	31	PANDEL.....	25
norethindrone acet-ethinyl est.....	27	OMNITROPE.....	25	pantoprazole sodium oral tablet delayed release.....	24
norethindrone-eth estradiol.....	27	ondansetron hcl oral.....	13	PARAGARD INTRAUTERINE COPPER.....	31
norethindrone oral.....	28	ondansetron odt oral tablet dispersible 4 mg, 8 mg.....	13	paricalcitol oral.....	31
norethindron-ethinyl estrad-fe.....	27	ONELAX MAGNESIUM CITRATE.....	24	PARI VORTEX ADULT MASK.....	32
norethin-eth estradiol-fe.....	27	ONETOUCH DELICA PLUS LANCING.....	17	paroxetine hcl er.....	12
norgestimate-eth estradiol.....	27	ONETOUCH DELICA SAFETY LANCING.....	17	paroxetine hcl oral suspension.....	12
norgestimate-ethinyl estradiol triphasic.....	27	ONETOUCH ULTRA 2 KIT W/DEVICE.....	17	paroxetine hcl oral tablet.....	12
norlyroc.....	28	ONETOUCH ULTRA TEST STRIPS.....	17	PAXLOVID (150/100).....	16
NORPACE CR.....	19	ONETOUCH ULTRA TEST STRIPS.....	17	PAXLOVID (300/100).....	16
nortrel 0.5/35 (28).....	27	ONETOUCH VERIO FLEX SYSTEM KIT.....	17	PEDIARIX.....	30
nortrel 1/35 (21).....	27	ONETOUCH VERIO IN VITRO LIQUID HIGH.....	17	PEDVAX HIB.....	30
nortrel 1/35 (28).....	27	ONETOUCH VERIO TEST STRIPS.....	18	peg-3350/electrolytes.....	24
nortrel 7/7/7.....	27	ONE VITE WOMENS PLUS.....	23	peg-3350/electrolytes/ascorbat.....	24
nortriptyline hcl oral capsule.....	13	opcicon one-step.....	28	peg 3350-kcl-na bicarb-nacl.....	24
nortriptyline hcl oral solution.....	13	OPILL.....	28	PEGASYS.....	16
NORVIR ORAL PACKET.....	17	opium.....	23	peg-kcl-nacl-nasulf-na asc-c.....	24
NOVOFINE PEN NEEDLE.....	31	OPSUMIT.....	34	PENBRAYA.....	30
NOVOFINE PLUS PEN NEEDLE.....	31	option 2.....	28	peniclovir.....	16
NOVOPEN ECHO.....	17	OPTIONS GYNOL II CONTRACEPTIVE.....	24	penicillamine oral.....	24
np thyroid.....	28	oralone.....	21	penicillin v potassium.....	11
NUBEQA.....	14	ORENITRAM.....	34	PENTACEL.....	30
NUCYNTA ER.....	10	ORENITRAM MONTH 1.....	34	pentamidine isethionate inhalation.....	15
nyamyc.....	13	ORENITRAM MONTH 2.....	34	pentazocine-naloxone hcl.....	10
nylia 1/35.....	27	ORENITRAM MONTH 3.....	34	pentoxifylline er.....	20
nylia 7/7/7.....	27	ORILISSA.....	28	PERFECT POINT SAFETY LANCETS.....	18
nymyo oral tablet 0.25-35 mg-mcg.....	27	ORKAMBI.....	34	perindopril erbumine.....	19
nystatin external cream.....	13	orphenadrine-aspirin-caffeine.....	34	periogard.....	21
nystatin external ointment.....	13	orphenadrine citrate er.....	34	permethrin external.....	15
nystatin external powder.....	13	oseltamivir phosphate oral.....	17	perphenazine-amitriptyline.....	12
nystatin mouth/throat.....	13	OSPHENA.....	28	perphenazine oral.....	13
nystatin oral.....	13	OTEZLA.....	29	PFIZER COVID-19 VAC-TRIS 5-11Y.....	30
nystatin-triamcinolone.....	13	OTOVEL.....	33	PFIZER COVID-19 VAC-TRIS 6M-4Y.....	30
nystop.....	13	oxaprozin oral tablet.....	9	phenazo oral tablet 200 mg.....	24
ocella.....	27	oxazepam.....	17	phenazopyridine hcl oral tablet 100 mg, 200 mg.....	24
octreotide acetate.....	28	oxcarbazepine oral suspension.....	12	phenelzine sulfate oral.....	12
ODEFSEY.....	16	oxcarbazepine oral tablet.....	12	phenobarbital oral.....	12
OFEV.....	34	oxiconazole nitrate.....	13	phenoxybenzamine hcl oral.....	19
ofloxacin ophthalmic.....	33	oxybutynin chloride er.....	24	phenylephrine hcl ophthalmic.....	32
ofloxacin oral.....	11	oxybutynin chloride oral solution.....	24	phenytek.....	12
ofloxacin otic.....	33	oxybutynin chloride oral tablet 5 mg.....	24	phenytoin infatabs.....	12
olanzapine-fluoxetine hcl.....	12			phenytoin oral.....	12
olanzapine oral tablet.....	16				
olanzapine oral tablet dispersible.....	16				

phenytoin sodium extended	12	PREHEVBRIO	30	quinapril-hydrochlorothiazide	20
PHEXXI	32	PREMARIN VAGINAL	27	quinidine gluconate er	19
philit	27	prenatal oral tablet 27-1 mg	23	quinidine sulfate	19
PHOSPHOLINE IODIDE	32	prenatal plus vitamin/mineral	23	quinine sulfate	15
phytonadione oral	23	PRENATRIX	23	QVAR REDIHALER	33
pilocarpine hcl ophthalmic	32	PRENATRYL	23	rabeprazole sodium oral tablet delayed release	24
pilocarpine hcl oral	21	PREPIDIL	25	RADIOGARDASE	32
pimecrolimus	22	prevalite	21	raloxifene hcl	28
pimozide	15	PREVNAR 20	30	ramelteon	35
pimtrex	27	PREZISTA ORAL SUSPENSION	17	ramipril	19
pindolol	19	PRIFTIN	14	ranolazine er	20
pioglitazone hcl	18	primaquine phosphate	15	rasagiline mesylate oral	15
pioglitazone hcl-metformin hcl	18	primidone oral	12	RAYA SURE PEN NEEDLE	32
PIQRAY	14	PRIORIX	30	react	28
pirfenidone	34	probenecid	13	reclipsen	27
piroxicam oral	9	prochlorperazine	13	RECOMBIVAX HB	30
PLAN B ONE-STEP	28	prochlorperazine maleate oral	13	RECOTHROM EXTERNAL SOLUTION RECONSTITUTED 5000 UNIT	19
PLEGRIDY	21	PROCTOFOAM HC	31	RECOTHROM SPRAY KIT	19
PLEGRIDY STARTER PACK	21	procto-med hc	31	REGRANEX	22
PLENVU	24	proctosol hc	31	RELENZA DISKHALER	17
plerixafor	19	proctozone-hc	31	RELISTOR SUBCUTANEOUS	23
PNEUMOVAX 23	30	progesterone intramuscular	28	repaglinide	18
pnv prenatal plus multivit+dha	23	progesterone oral	28	REPATHA	21
podofilox external gel	22	PROMACTA	19	REPATHA PUSHTRONEX SYSTEM	21
podofilox external solution	22	promethazine-codeine oral solution	34	REPATHA SURECLICK	21
polycin	32	promethazine-dm	34	RETACRIT	19
polyethylene glycol 3350 oral powder	24	promethazine hcl oral	13	REYATAZ ORAL PACKET	17
polymyxin b-trimethoprim	32	promethazine hcl rectal	13	REZVOGLAR KWIKPEN	18
POMALYST	14	promethazine-phenylephrine	33	ribavirin oral	16
portia-28	27	promethazine vc	33	RIDAURA	29
posaconazole oral tablet delayed release	13	promethegan	13	rifabutin	14
potassium chloride crys er	22	propafenone hcl	19	rifampin oral	14
potassium chloride er	22	propafenone hcl er	19	riluzole	21
potassium chloride oral packet	22	proparacaine hcl ophthalmic	32	rimantadine hcl	17
potassium chloride oral solution	22	propranolol hcl er	19	RINVOQ	29
potassium citrate er	22	propranolol hcl oral	19	RINVOQ LQ	29
pramipexole dihydrochloride	15	propylthiouracil oral	28	risedronate sodium oral tablet	31
prasugrel hcl	19	PROQUAD	30	risperidone oral solution	16
pravastatin sodium	20	protriptyline hcl	13	risperidone oral tablet	16
praziquantel oral	15	pseudoephedrine-bromphen-dm	34	risperidone oral tablet dispersible	16
prazosin hcl oral	19	PULMOSAL	34	ritonavir	17
prednisolone acetate ophthalmic	33	PULMOZYME	34	rivastigmine	12
prednisolone oral solution	25	PURE COMFORT SAFETY PEN NEEDLE	32	rivastigmine tartrate	12
prednisolone oral tablet	25	pyrazinamide oral	14	rivelsa	27
prednisolone sodium phosphate ophthalmic	33	pyridostigmine bromide er	14	rizatriptan benzoate	14
prednisolone sodium phosphate oral solution	25	pyridostigmine bromide oral solution	14	roflumilast	34
prednisolone sodium phosphate oral tablet dispersible	25	pyridostigmine bromide oral tablet 60 mg	14	ropinirole hcl	15
prednisone intensol	25	pyrimethamine oral	15	rosuvastatin calcium oral tablet 10 mg, 5 mg	20
prednisone oral solution	25	QUADRACEL INTRAMUSCULAR SUSPENSION	30	rosuvastatin calcium oral tablet 20 mg, 40 mg	20
prednisone oral tablet	25	quazepam	17	ROTARIX	30
prednisone oral tablet therapy pack	25	quetiapine fumarate	16	ROTATEQ	30
pregabalin oral capsule	21	quetiapine fumarate er	16		
		quinapril hcl	19		

roweepra	11	solifenacin succinate	24	SYNTHROID	28
ROZLYTREK	14	SOLIQUA	18	TABLOID	14
rufinamide	12	SOLOSEC	11	tacrolimus external	22
RYBELSUS	18	SOMAVERT	28	tacrolimus oral	29
SAFETY PEN NEEDLES	32	sorafenib tosylate	15	tadalafil oral tablet 2.5 mg, 5 mg	24
sajazir	28	sotalol hcl (af)	19	tadalafil (pah)	34
salsalate oral	9	sotalol hcl oral	19	tafluprost (pf)	33
SANTYL	22	SOTYLIZE	19	take action	28
sapropterin dihydrochloride	24	SOVALDI	16	TALTZ	29
SAVELLA	21	SPIKEVAX	30	TALZENNA	15
SAVELLA TITRATION PACK	21	spinosad	15	tamoxifen citrate oral tablet 10 mg	14
saxagliptin hcl	18	SPIRIVA HANDIHALER	34	tamoxifen citrate oral tablet 20 mg	14
saxagliptin-metformin er	18	SPIRIVA RESPIMAT	34	tamsulosin hcl	24
scopolamine	13	spironolactone-hctz	20	tarina 24 fe	27
selegiline hcl oral	15	spironolactone oral tablet	20	tarina fe 1/20 eq	27
selenium sulfide external lotion	22	sprintec 28	27	tasimelteon	35
SELZENTRY ORAL SOLUTION	16	SPS	22	tavaborole	13
sertraline hcl oral concentrate	12	sronyx	27	taysofy	27
sertraline hcl oral tablet	12	ssd	11	tazarotene external cream 0.1 %	22
setlakin	27	STELARA SUBCUTANEOUS	22	tazarotene external gel	22
sevelamer carbonate oral packet	22	STIOLTO RESPIMAT	34	TDVAX	30
sevelamer carbonate oral tablet	22	STIVARGA	15	TECHLITE LANCETS 26G	18
sharobel	28	ST JOSEPH LOW DOSE	9	telmisartan	19
SHARPS COLLECTOR	32	STRIBILD	16	telmisartan-hctz	20
SHARPS CONTAINER	32	STRIVERDI RESPIMAT	34	temazepam	34
SHINGRIX	30	subvenite	12	temozolomide	14
SIGNIFOR	28	SUCRAID	24	TENCON	10
sildenafil citrate oral suspension reconstituted	34	sucralfate oral suspension	24	TENIVAC	30
sildenafil citrate oral tablet 20 mg	34	sucralfate oral tablet	24	tenofovir disoproxil fumarate	16
silodosin	24	SULCONAZOLE NITRATE	13	terazosin hcl	24
silver sulfadiazine external	11	sulfacetamide-prednisolone	32	terbinafine hcl oral	13
SIMBRINZA	33	sulfacetamide sodium (acne)	22	terbutaline sulfate oral	34
simliya	27	sulfacetamide sodium ophthalmic	33	terconazole vaginal cream	13
simpesse	27	sulfadiazine oral	11	terconazole vaginal suppository	13
SIMPONI	29	sulfamethoxazole-trimethoprim oral suspension 200-40 mg/5ml	11	teriflunomide	21
simvastatin oral tablet 10 mg, 20 mg, 40 mg, 5 mg	20	sulfamethoxazole-trimethoprim oral tablet	11	testosterone cypionate intramuscular	25
simvastatin oral tablet 80 mg	20	SULFAMYLON	11	testosterone enanthate intramuscular	25
sirolimus oral solution	29	sulfasalazine oral	31	testosterone transdermal gel 1.62 %, 20.25 mg/act (1.62%), 50 mg/5gm (1%)	26
sirolimus oral tablet	29	sulfatrim pediatric	11	TETANUS-DIPHThERIA TOXOIDS TD	30
SIRTURO	14	sulindac oral	9	tetrabenazine	21
SIVEXTRO ORAL	11	sumatriptan-naproxen sodium	14	tetracaine hcl ophthalmic	32
SKYLA	28	sumatriptan nasal	14	tetracycline hcl oral capsule	11
SKYRIZI PEN	29	sumatriptan succinate oral	14	TEXACORT	25
SKYRIZI SUBCUTANEOUS SOLUTION CARTRIDGE	22	sumatriptan succinate refill subcutaneous solution cartridge	14	THALOMID	14
SKYRIZI SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	29	sumatriptan succinate subcutaneous	14	THEO-24	34
sm lansoprazole	24	sunitinib malate	15	theophylline er	34
sodium chloride inhalation	34	SUNOSI	35	theophylline oral	34
sodium fluoride oral	22	syeda	27	thioridazine hcl oral	15
SODIUM OXYBATE	35	SYMPROIC	23	thiothixene	15
sodium polystyrene sulfonate	22	SYNAREL	28	THROMBIN-JMI EPISTAXIS	19
SOFOSBUVIR-VELPATASVIR	16	SYNJARDY	18	THROMBIN-JMI EXTERNAL KIT	19
		SYNJARDY XR	18	THYQUIDITY	28
				thyroid oral	28
				tiadylt er	20



tiagabine hcl .....	12	triamterene-hctz .....	20	VALCHLOR .....	14
tilia fe.....	27	triazolam .....	34	valganciclovir hcl oral solution reconstituted .....	16
timolol maleate (once-daily) .....	33	triderm .....	25	valganciclovir hcl oral tablet.....	16
timolol maleate ophthalmic gel forming solution .....	33	trientine hcl oral capsule 250 mg .....	22	valproic acid oral capsule.....	12
timolol maleate ophthalmic solution ..	33	tri-estarylla.....	27	valproic acid oral solution 250 mg/5ml	12
timolol maleate oral .....	19	trifluoperazine hcl .....	15	valsartan-hydrochlorothiazide .....	20
timolol maleate pf .....	33	trifluridine.....	32	valsartan oral tablet .....	19
tinidazole oral.....	11	trihexyphenidyl hcl .....	15	vancomycin hcl oral capsule .....	11
tiopronin oral tablet .....	24	tri-legest fe.....	27	vancomycin hcl oral solution reconstituted .....	11
tiotropium bromide monohydrate ....	34	tri-linyah.....	27	VANDAZOLE.....	11
TIROSINT-SOL .....	28	tri-lo-estarylla.....	27	VAQTA .....	30
TIVICAY .....	16	tri-lo-marzia.....	27	varenicline tartrate .....	10
tizanidine hcl oral capsule.....	34	tri-lo-mili .....	27	varenicline tartrate(continue).....	10
tizanidine hcl oral tablet.....	34	tri-lo-sprintec.....	27	varenicline tartrate (starter).....	10
TOBRADEX.....	32	trimethobenzamide hcl oral.....	13	VARIVAX.....	30
tobramycin-dexamethasone.....	32	trimethoprim oral.....	11	VARUBI (180 MG DOSE) .....	13
tobramycin nebulization solution 300 mg/5ml inhalation .....	34	tri-mili .....	27	VAXELIS .....	30
TOBRAMYCIN NEBULIZATION SOLUTION 300 MG/5ML INHALATION	34	TRIMATE.....	23	VAXNEUVANCE .....	30
tobramycin ophthalmic .....	32	tri-nymyo oral tablet 0.18/0.215/0.25 mg-35 mcg.....	27	VCF VAGINAL CONTRACEPTIVE .....	24
TOBREX .....	32	tri-sprintec .....	27	velivet .....	27
tolcapone .....	15	TRIUMEQ.....	16	VELPHORO.....	22
tolmetin sodium .....	9	trivora (28) .....	27	VELTASSA ORAL PACKET 16.8 GM, 25.2 GM, 8.4 GM .....	22
tolterodine tartrate .....	24	tri-vylibra.....	27	VENCLEXTA.....	15
tolterodine tartrate er .....	24	tri-vylibra lo .....	27	VENCLEXTA STARTING PACK .....	15
topiramate oral capsule sprinkle .....	12	tropium chloride.....	24	venlafaxine hcl .....	12
topiramate oral tablet .....	12	tropium chloride er.....	24	venlafaxine hcl er oral capsule extended release 24 hour.....	12
toremifene citrate .....	14	TRUE COVER.....	32	VENTAVIS .....	34
toremide .....	20	TRUE FOLIC ACID ORAL TABLET 1 MG	23	VENTOLIN HFA .....	34
TRADJENTA .....	18	TRUE FOLIC ACID ORAL TABLET 400 MCG.....	23	verapamil hcl er oral capsule extended release 24 hour.....	20
tramadol-acetaminophen.....	10	TRUE LAXATIVE.....	24	verapamil hcl er oral tablet extended release.....	20
tramadol hcl (er biphasic) oral tablet extended release 24 hour.....	10	TRULICITY .....	18	verapamil hcl oral.....	20
tramadol hcl er tablet.....	10	TRUMENBA.....	30	VEREGEN.....	22
tramadol hcl oral tablet 50 mg.....	10	TURALIO .....	15	VERIFINE INSULIN PEN NEEDLE .....	32
trandolapril.....	19	turqoz .....	27	VERIFINE INSULIN SYRINGE.....	32
tranexamic acid oral.....	19	TUXARIN ER.....	34	VERIFINE PLUS PEN NEEDLE .....	32
tranylcypromine sulfate .....	12	TWINRIX .....	30	VERIFINE SAFE LANCET MINI 21G.....	18
travoprost (bak free).....	33	TWIRLA.....	27	VERIFINE SAFE LANCET MINI 23G .....	18
trazodone hcl oral.....	12	TYBLUME.....	27	VERIFINE SAFE LANCET MINI 28G .....	18
TRECATOR .....	14	tydemy .....	27	VERIFINE SAFE LANCET MINI 30G .....	18
TRELEGY ELLIPTA .....	34	TYMLOS.....	31	VERIFINE SHARPS CONTAINER.....	32
TRESIBA.....	18	TYVASO .....	34	VERZENIO.....	14
TRESIBA FLEXTOUCH .....	18	TYVASO DPI INSTITUTIONAL KIT .....	34	vestura .....	27
tretinoin external cream.....	22	TYVASO DPI MAINTENANCE KIT.....	34	VIBERZI .....	23
tretinoin oral .....	15	TYVASO DPI TITRATION KIT.....	34	vienva .....	27
triamcinolone acetonide external cream .....	25	TYVASO REFILL KIT.....	34	vigabatrin .....	12
triamcinolone acetonide external lotion .....	25	TYVASO STARTER KIT.....	34	vigadrone .....	12
triamcinolone acetonide external ointment 0.025 %, 0.1 %, 0.5 % .....	25	UBRELVY .....	13	vigpoder.....	12
triamcinolone acetonide mouth/ throat.....	21	UNIFINE PROTECT PEN NEEDLE .....	32	vilazodone hcl.....	12
		unithroid .....	28	VINATE ONE ORAL TABLET 60-1 MG..	23
		ursodiol oral capsule 300 mg.....	23	viorele .....	27
		ursodiol oral tablet.....	23		
		valacyclovir hcl oral .....	16		

VIRACEPT .....	17	ZELBORAF .....	15
vitamin d (ergocalciferol) oral capsule 1.25 mg (50000 ut), 50000 unit .....	23	zenatane .....	22
VITATHELY WITH GINGER .....	23	ZENPEP .....	24
VITRAKVI .....	15	zidovudine .....	16
VIVAGUARD LANCETS 30G .....	18	zileuton er .....	33
VIVAGUARD LANCING DEVICE .....	18	ziprasidone hcl .....	16
VIVAGUARD SAFETY LANCETS 28G .....	18	ZIRGAN .....	32
volnea .....	27	ZOLINZA .....	14
voriconazole oral suspension reconstituted .....	13	zolmitriptan nasal .....	14
voriconazole oral tablet .....	13	zolmitriptan oral .....	14
VORTEX VALVED HOLDING CHAMBER	32	zolpidem tartrate er .....	34
VOSEVI .....	16	zolpidem tartrate oral tablet .....	34
VRAYLAR .....	16	zonisamide oral .....	11
vyfemla .....	27	zovia 1/35 (28) .....	27
vylibra .....	27	ZUBSOLV .....	10
warfarin sodium oral .....	18	zumandimine .....	27
wera .....	27	ZYKADIA .....	15
WESNATAL DHA COMPLETE .....	23	ZYLET .....	32
WESTAB PLUS .....	23		
WIDE-SEAL DIAPHRAGM 60 .....	32		
WIDE-SEAL DIAPHRAGM 65 .....	32		
WIDE-SEAL DIAPHRAGM 70 .....	32		
WIDE-SEAL DIAPHRAGM 75 .....	32		
WIDE-SEAL DIAPHRAGM 80 .....	32		
WIDE-SEAL DIAPHRAGM 85 .....	32		
WIDE-SEAL DIAPHRAGM 90 .....	32		
WIDE-SEAL DIAPHRAGM 95 .....	32		
wixela inhib .....	33		
wymzya fe .....	27		
XARELTO .....	18		
XARELTO STARTER PACK .....	18		
XELJANZ .....	29		
XELJANZ XR .....	29		
XELPROS .....	33		
XIFAXAN .....	11		
XIGDUO XR .....	18		
XOLAIR SUBCUTANEOUS SOLUTION AUTO-INJECTOR .....	29		
XOLAIR SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 150 MG/ML, 75 MG/0.5ML .....	29		
XOLAIR SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 300 MG/2ML .....	29		
XOSPATA .....	15		
XTAMPZA ER .....	10		
xulane .....	27		
YOSPRALA .....	19		
yuvafem .....	27		
zafemy .....	27		
zafirlukast .....	33		
zaleplon .....	34		
ZARXIO .....	19		
ZEGALOGUE .....	18		

# Language Assistance Services

1-877-265-9199, TTY 711

**English:** Translation services and interpreters are available at no cost to you. If you need help, please call the number above or the Member Services number on your health plan ID card.

**Spanish:** Hay servicios de traducción e interpretación disponibles sin costo para usted. Si necesita ayuda, llame al número anterior o al número de Servicios para Miembros que figura en la tarjeta de identificación de su plan de salud.

**Chinese:** 翻译服务和口译员免费供您使用。如果您需要帮助，请拨打上述号码或拨打您健康计划 ID 卡上的会员服务号码。

**Vietnamese:** Dịch vụ dịch thuật và thông dịch viên được cung cấp miễn phí cho quý vị. Nếu quý vị cần trợ giúp, vui lòng gọi số ở trên hoặc số bộ phận Dịch vụ Thành viên trên thẻ ID chương trình sức khỏe của quý vị.

**Korean:** 번역 서비스와 통역사는 비용 부담 없이 이용하실 수 있습니다. 도움이 필요하신 경우, 전술한 번호 또는 의료 플랜 ID 카드에 기재된 가입자 서비스 번호로 전화하십시오.

**Arabic:** تتوفر خدمات الترجمة والمترجمون الفوريون لك مجاناً. إذا كنت بحاجة إلى المساعدة، فيرجى الاتصال بالرقم أعلاه أو رقم خدمات الأعضاء الموجود على بطاقة معرف الخطة الصحية الخاصة بك.

**French Creole:** Sèvis tradiksyon ak entèprèt disponib pou ou gratis. Si w bezwen èd, tanpri rele nimewo ki anwo a oswa nimewo Sèvis Manm ki sou kat idantite (ID) plan sante w la.

**Tagalog:** Ang mga serbisyo sa pagsasalín at mga tagapagsalín ay magagamit mo nang walang bayad. Kung kailangan mo ng tulong, mangyaring tawagan ang numero sa itaas o ang numero ng mga Serbisyo sa Miyembro na nasa iyong ID kard ng planong pangkalusugan.

**French:** Les services de traduction et d'interprétation vous sont fournis gratuitement. Si vous avez besoin d'aide, veuillez appeler le numéro ci-dessus ou le numéro de services aux membres figurant sur votre carte d'assurance maladie.

**Russian:** Вам доступны бесплатные услуги перевода и устные переводчики. Если вам нужна помощь, позвоните по указанному выше номеру или по номеру отдела обслуживания участников, указанному на вашей идентификационной карте программы страхования здоровья.

**Polish:** Mogą Państwo bezpłatnie skorzystać z usługi tłumaczenia pisemnego lub ustnego. Jeśli potrzebują Państwo pomocy, należy zadzwonić pod numer podany powyżej lub numer usług dla członków podany na karcie identyfikacyjnej członka planu ubezpieczenia zdrowotnego.

**German:** Übersetzungsdienste und Dolmetscher stehen Ihnen kostenlos zur Verfügung. Wenn Sie Hilfe benötigen, rufen Sie bitte die oben genannte Nummer oder die Nummer des Mitgliederservices auf Ihrer Versichertenkarte an.

**Gujarati:** અનુવાદ સેવાઓ અને દુભાષિયા તમારા માટે નિ:શુલ્ક ઉપલબ્ધ છે. જો તમને મદદની જરૂર હોય, તો કૃપા કરીને ઉપરના નંબર પર અથવા તમારા હેલ્થ પ્લાન આઈડી કાર્ડ પરના સભ્ય સેવાઓ નંબર પર કૉલ કરો.

**Urdu:** آپ کے لیے بغیر کسی فیس یا اخراجات کے ترجمہ کی خدمات اور ترجمان دستیاب ہیں۔ اگر آپ کو مدد کی ضرورت ہو، تو برائے مہربانی اوپر دیئے گئے نمبر یا اپنے ہیلتھ پلان آئی ڈی کارڈ پر موجود Member Services کے نمبر پر کال کریں۔

**Portuguese:** Você tem à disposição serviços gratuitos de tradução e intérpretes. Caso precise de ajuda, ligue para o número acima ou para o número de Atendimento a Membros exibido em seu cartão de identificação do plano de saúde.

**Japanese:** 翻訳サービスと通訳サービスを利用できます。サポートが必要な場合は、上記の電話番号か、保険プラン ID カードのメンバーサービス番号に電話してください。

**Hindi:** अनुवाद सेवाएँ और दुभाषिए आपके लिए नि:शुल्क उपलब्ध हैं। यदि आपको सहायता की आवश्यकता है, तो कृपया अपने स्वास्थ्य योजना आईडी कार्ड पर ऊपर दिए गए नंबर या सदस्य सेवा नंबर पर कॉल करें।

**Persian:** خدمات ترجمه کتبی و شفاهی به صورت رایگان برای شما فراهم است. اگر به کمک نیاز دارید، با شماره تلفن بالا یا شماره تلفن خدمات مشتری درج شده روی کارت شناسایی برنامه درمانی خود تماس بگیرید.

**Amharic:** የትርጉም አገልግሎቶች እና አስተርጓሚዎች ለእርስዎ ያለ ምንም ወጪ ይገኛሉ። እርዳታ ከፈለጉ፣ እባክዎን ከላይ ባለው ቁጥር ወይም በጤና እቅድ መታወቂያ ካርድዎ ላይ ባለው የአባላት አገልግሎት ቁጥር ይደውሉ።

**Italian:** Sono disponibili gratuitamente servizi di traduzione e interpreti. Se hai bisogno di aiuto, chiama il numero sopra oppure il numero di assistenza presente sulla tua tessera sanitaria.



# Notice of non-discrimination

The company complies with applicable federal civil rights laws and does not treat members differently because of race, color, national origin, age, disability, sex, sexual orientation, or gender identity. If you think you were treated unfairly because of your race, color, national origin, age, disability, sex, sexual orientation, or gender identity, you can send a complaint to our Civil Rights Coordinator.

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

**Email:** [UHC\\_Civil\\_Rights@uhc.com](mailto:UHC_Civil_Rights@uhc.com)

You must send the complaint within 60 days of the incident. We will send you a decision within 30 days. If you disagree with the decision, you have 15 days to appeal.

If you need help with your complaint, please call **toll-free 1-877-265-9199** or the toll-free number on your health plan ID card (TTY/RTT 711). We are available Monday through Friday, 8 a.m. to 6 p.m., E.T.

You can also file a complaint with the U.S. Dept. of Health and Human services.

**Online:** <https://ocrportal.hhs.gov/ocr/portal/lobby.jsf>  
Complaint forms are available at <http://www.hhs.gov/ocr/office/file/index.html>.

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

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



Medical plan coverage offered by: UnitedHealthcare of Arizona, Inc.; Rocky Mountain Health Maintenance Organization Incorporated in CO; UnitedHealthcare of Florida, Inc.; UnitedHealthcare of Georgia, Inc.; UnitedHealthcare of Illinois, Inc.; UnitedHealthcare Insurance Company in AL, IN, KS, LA, MO, NE, NJ, TN, and WY; Optimum Choice, Inc. in MD and VA; UnitedHealthcare Community Plan, Inc. in MI; UnitedHealthcare of Mississippi, Inc.; UnitedHealthcare of New Mexico, Inc.; UnitedHealthcare of North Carolina, Inc.; UnitedHealthcare of Ohio, Inc.; UnitedHealthcare of Oklahoma, Inc.; UnitedHealthcare of South Carolina, Inc.; UnitedHealthcare of Texas, Inc.; UnitedHealthcare of Oregon, Inc. in WA; UnitedHealthcare of Wisconsin, Inc., and UnitedHealthcare Plan of the River Valley in Iowa. Administrative services provided by United HealthCare Services, Inc. or their affiliates.