



Your 2026 Prescription Drug List

Advantage 3-Tier

Effective January 1, 2026



**United
Healthcare**

This Prescription Drug List (PDL) is accurate as of January 1, 2026 and is subject to change after this date. This PDL applies to members of our UnitedHealthcare, Neighborhood Health Partnership Plan, UnitedHealthcare Freedom Plans, River Valley, UnitedHealthcare Level Funded, Level2, Global Solutions, Student Resources, Surest, UnitedHealthcare of Nevada, UnitedHealthOne and Oxford medical plans when sold in your market with a pharmacy benefit subject to the Advantage 3-Tier PDL. Your estimated coverage and copayment/coinsurance may vary based on the benefit plan you choose and the effective date of the plan.

Table of contents

Understanding your Prescription Drug List (PDL)	4
Medication tips	5
Reading your PDL.....	6
Questions	8
Analgesics	
Drugs for Pain.....	9
Drugs for Pain and Inflammation.....	10
Anti-Addiction / Substance Abuse Treatment Agents.....	10
Antibacterials	
Drugs for Infections.....	11
Anticoagulants	
Drugs to Treat or Prevent Blood Clots.....	13
Anticonvulsants	
Drugs for Seizures	13
Antidementia Agents	
Drugs for Alzheimer’s Disease and Dementia	14
Antidepressants	
Drugs for Depression.....	14
Antiemetics	
Drugs for Nausea and Vomiting.....	15
Antifungals	
Drugs for Fungal Infections.....	16
Antigout Agents	
Drugs for Gout.....	16
Antimigraine Agents	
Drugs for Migraines	16
Antimyasthenic Agents	
Drugs to Treat Myasthenia Gravis.....	17
Antimycobacterials	
Drugs to Treat Infections.....	17
Antineoplastics	
Drugs for Cancer	17
Antiparasitics	
Drugs for Parasitic Infections.....	18
Antiparkinson Agents	
Drugs for Parkinson’s Disease.....	19
Antiplatelets	
Drugs for Heart Attack and Stroke Prevention.....	19
Antipsychotics	
Drugs for Mood Disorders.....	19
Antivirals	
Drugs for Viral Infections	19
Anxiolytics	
Drugs for Anxiety.....	20
Bipolar Agents	
Drugs for Mood Disorders.....	20
Cardiovascular Agents	
Drugs for Heart and Circulation Conditions.....	20
Central Nervous System Agents	
Drugs for Attention Deficit Disorder	24
Drugs for Multiple Sclerosis.....	25
Miscellaneous.....	26



Dental and Oral Agents	
Drugs for Mouth and Throat Conditions	26
Dermatological Agents	
Drugs for Skin Conditions.....	27
Diabetes	
Glucose Monitoring and Supplies.....	30
Insulin.....	34
Non-Insulin Agents.....	35
Drugs for Blood Disorders.....	36
Drugs for Sexual Dysfunction.....	36
Electrolytes / Vitamins	37
Gastrointestinal Agents	
Drugs for Acid Reflux and Ulcer.....	38
Drugs for Bowel, Intestine and Stomach Conditions	39
Genetic or Enzyme Disorder	
Drugs for Replacement, Modification, Treatment	40
Genitourinary Agents	
Drugs for Bladder, Genital and Kidney Conditions.....	40
Drugs for Prostate Conditions.....	40
Hormonal Agents	
Hormone Replacement and Birth Control	41
Oral Steroids.....	45
Other.....	45
Testosterone Replacement.....	45
Thyroid.....	46
Immunological Agents	
Drugs for Immune System Stimulation or Suppression	46
Drugs for Vaccination	50
Infertility Agents	51
Inflammatory Bowel Disease Agents.....	51
Metabolic Bone Disease Agents	
Drugs for Osteoporosis	52
Other.....	52
Ophthalmic Agents	
Drugs for Eye Allergy, Infection and Inflammation	52
Drugs for Glaucoma.....	53
Drugs for Miscellaneous Eye Conditions	54
Otic Agents	
Drugs for Ear Conditions.....	54
Respiratory	
Drugs for Anaphylaxis.....	54
Respiratory Tract / Pulmonary Agents	
Drugs for Allergies, Cough, Cold.....	54
Drugs for Asthma and COPD.....	55
Drugs for Cystic Fibrosis	57
Drugs for Pulmonary Fibrosis.....	57
Drugs for Pulmonary Hypertension	57
Skeletal Muscle Relaxants	
Drugs for Muscle Pain and Spasm	58
Sleep Disorder Agents.....	58
Index	59

Understanding your Prescription Drug List (PDL)

What is a PDL?

This document is a list of the most commonly prescribed medications. It includes both brand-name and generic prescription medications approved by the Food and Drug Administration (FDA). Medications are listed by common categories or classes and placed in tiers that represent the cost you pay out-of-pocket. Then, they are listed in alphabetical order.

How do I use my PDL?

You and your doctor can check the PDL to help you select the most cost-effective prescription medications. This guide tells you if a medication is generic or a brand-name, and if there are coverage requirements or limits that apply. Bring this list with you when you see your doctor. If your medication is not listed here, please visit your plan's member website or call the toll-free phone number on your member ID card.

What are tiers?

Tiers are the different cost levels you pay for a medication. Your plan sets a cost for each tier. This is how much you will pay when you fill a prescription. See page 6 for more information.

When does the PDL change?

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

Why are some medications excluded from coverage?

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

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

Who decides which medications are covered?

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

About this PDL

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

1. Depending on your benefit, you may have notification or medical necessity requirements for select medications.
2. For New York and New Jersey plans, a prescription drug product that is therapeutically equal to an over-the-counter drug may be covered if it is determined to be medically necessary.



Medication tips

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

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

What if my doctor writes a brand-name prescription?

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

What if I am taking a specialty medication?

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

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

Over-the-counter (OTC) medications

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

Reading your PDL

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

Tier information

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

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



Reading your PDL (continued)

Drug list information

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

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

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

4. Not applicable to Neighborhood Health Plan, some UnitedHealthcare Freedom Plans and Oxford plans.



Reading your PDL (continued)

Coverage details

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

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

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

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

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

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

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

- **Endocrine: growth hormone**

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

- **Infertility**

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

- **Medications for sexual dysfunction**

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

- **Termination of pregnancy**

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

Questions

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



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



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

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

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

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



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

FIORICET/CODEINE	E	QL
GEN7T EXTERNAL PATCH 3.5 %	E	
hydrocodone-acetaminophen oral solution 10-300 mg/15ml	1	QL
hydrocodone-acetaminophen oral solution 10-325 mg/15ml, 7.5-325 mg/15ml	2	QL
hydrocodone-acetaminophen oral tablet 10-300 mg, 5-300 mg, 7.5-300 mg	E	QL
hydrocodone-acetaminophen oral tablet 10-325 mg, 2.5-325 mg, 5-325 mg, 7.5-325 mg	1	QL
hydromorphone hcl oral tablet	1	QL
JOURNAVX	3	QL
lidocaine external ointment 5 %	2	QL
lidocaine external patch 5 %	3	PA, QL
lidocaine-prilocaine external cream	1	
LIDOCAN	E	PA, QL
LIDODERM	E	PA, QL
LIDOTRAL 1 EXTERNAL PATCH 4.88 %	E	
methadone hcl oral tablet	1	PA, QL
morphine sulfate er oral tablet extended release	1	PA, QL
morphine sulfate oral tablet	1	QL
MS CONTIN	E	PA, QL
NALOCET	E	QL
NUCYNTA	3	QL
NUCYNTA ER	3	PA, QL
OXAYDO ORAL TABLET 5 MG, 7.5 MG	E	QL
OXYCODONE HCL ER ORAL TABLET ER 12 HOUR ABUSE-DETERRENT 10 MG, 20 MG, 40 MG, 80 MG	E	PA, QL
oxycodone hcl oral capsule	1	QL
oxycodone hcl oral solution	1	QL
oxycodone hcl oral tablet 10 mg, 15 mg, 20 mg, 30 mg, 5 mg	1	QL

See page 6-8 for coverage details.



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

Drug Name	Drug Tier	Requirements & Limits
diclofenac-misoprostol	3	
DICLOFONO	E	
EC-NAPROSYN ORAL TABLET DELAYED RELEASE 375 MG	3	
EC-NAPROSYN ORAL TABLET DELAYED RELEASE 500 MG	3	
ec-naproxen	1	
etodolac	2	
FELDENE ORAL CAPSULE 20 MG	3	
ibuprofen oral suspension 100 mg/5ml	E	
ibuprofen oral tablet 400 mg, 600 mg, 800 mg	1	
indomethacin er	2	
indomethacin oral capsule	1	
ketorolac tromethamine oral	1	
LODINE	E	
LOFENA	E	QL
meloxicam oral tablet	1	
nabumetone oral	1	
NAPROSYN	E	
naproxen dr	1	
naproxen oral tablet	1	
naproxen oral tablet delayed release	1	
naproxen sodium oral tablet 275 mg, 550 mg	2	
oxaprozin oral tablet	2	
piroxicam oral	2	
RELAFEN DS	E	
sulindac oral	1	
Anti-Addiction / Substance Abuse Treatment Agents		
acamprosate calcium	1	
APO-VARENICLINE ORAL TABLET 0.5 MG, 1 MG	E	
buprenorphine hcl sublingual	1	QL
buprenorphine hcl-naloxone hcl sublingual film	2	QL
buprenorphine hcl-naloxone hcl sublingual tablet sublingual	2	QL

See page 6-8 for coverage details.



Drug Name	Drug Tier	Requirements & Limits	Drug Name	Drug Tier	Requirements & Limits
bupropion hcl er (smoking det)	1	H	NICORETTE MOUTH/THROAT GUM	3	H
cvs nicotine	1	H	NICORETTE MOUTH/THROAT LOZENGE	2	H
cvs nicotine polacrilex	1	H	NICORETTE STARTER KIT	3	H
disulfiram oral	1		nicotine mini	1	H
eq nicotine	1	H	nicotine polacrilex mini	1	H
eq nicotine mouth/throat gum 4 mg	1	H	nicotine polacrilex mouth/throat	1	H
eq nicotine polacrilex	1	H	nicotine step 1	1	H
eq nicotine step 3	1	H	nicotine step 2	1	H
eq nicotine polacrilex mouth/throat lozenge 2 mg, 4 mg	1	H	nicotine step 3	1	H
ft naloxone hcl	1	QL	nicotine transdermal patch 24 hour	1	H
ft nicotine	1	H	OPVEE	1	QL
ft nicotine mini	1	H	qc nicotine transdermal system	1	H
gnp naloxone hcl	1	QL	ra mini nicotine	1	H
gnp nicotine mini	1	H	ra nicotine mouth/throat gum 4 mg	1	H
gnp nicotine polacrilex mouth/throat gum 2 mg	1	H	ra nicotine polacrilex	1	H
gnp nicotine polacrilex mouth/throat lozenge	1	H	ra nicotine transdermal patch 24 hour 21 mg/24hr	1	H
gnp nicotine transdermal	1	H	REXTOVY	1	QL
goodsense nicotine	1	H	sm nicotine	1	H
habitrol	1	H	sm nicotine polacrilex	1	H
hm nicotine polacrilex mouth/throat gum 2 mg, 4 mg	1	H	sm nicotine transdermal patch 24 hour 14 mg/24hr, 21 mg/24hr, 7 mg/24hr	1	H
hm nicotine polacrilex mouth/throat lozenge 2 mg	1	H	SUBOXONE	E	PA, QL
hm nicotine transdermal patch 24 hour 21 mg/24hr, 7 mg/24hr	1	H	THRIVE	3	H
KLOXXADO	1	QL	varenicline tartrate	3	PA, H
kls quit2	1	H	varenicline tartrate (starter)	3	PA, H
kls quit4	1	H	varenicline tartrate(continue)	3	PA, H
naloxone hcl injection solution prefilled syringe	1	QL	ZIMHI	2	QL
naloxone hcl nasal	1	QL	ZUBSOLV	2	QL
naltrexone hcl oral	1	QL	Antibacterials - Drugs for Infections		
NARCAN	1	QL (includes Narcan OTC)	amoxicillin	1	
NICODERM CQ	3	H	amoxicillin-potassium clavulanate	1	
NICORETTE MINI	2	H	ampicillin	1	
			AUGMENTIN	E	

See page 6-8 for coverage details.



Drug Name	Drug Tier	Requirements & Limits	Drug Name	Drug Tier	Requirements & Limits
AUGMENTIN ES-600	E		doxycycline monohydrate oral suspension reconstituted	3	
AVIDOXY	3		doxycycline monohydrate oral tablet	1	
azithromycin oral packet 1 gm	1		E.E.S. GRANULES	3	
BACTRIM	3		ERYPED 200 ORAL SUSPENSION RECONSTITUTED 200 MG/5ML	3	
BACTRIM DS	3		ERYPED 400	3	
cefadroxil oral capsule	1		erythromycin base oral tablet	1	
cefadroxil oral suspension reconstituted	1		erythromycin ethylsuccinate oral suspension reconstituted 200 mg/5ml	1	
cefdinir	1		erythromycin ethylsuccinate oral suspension reconstituted 400 mg/5ml	3	
cefixime oral capsule	3		fidaxomicin oral tablet	3	QL
cefpodoxime proxetil oral tablet	1		fosfomycin tromethamine	3	
cefprozil	1		gentamicin sulfate external	1	QL
cefuroxime axetil	1		HIPREX	3	
cephalexin	1		levofloxacin oral tablet	1	
CIPRO ORAL TABLET	3		LIKMEZ	3	
ciprofloxacin hcl oral	1		linezolid oral tablet	2	
clarithromycin oral tablet	1		MACROBID	3	
CLEOCIN ORAL CAPSULE 150 MG, 300 MG	3		MACRODANTIN	3	
CLEOCIN ORAL CAPSULE 75 MG	2		methenamine hippurate	1	
CLEOCIN ORAL SOLUTION RECONSTITUTED	3		metronidazole oral tablet 125 mg	E	
CLEOCIN VAGINAL CREAM	3		metronidazole oral tablet 250 mg, 500 mg	1	
clindamycin hcl oral	1		metronidazole vaginal	2	
clindamycin palmitate hcl	2		minocycline hcl oral capsule	1	
clindamycin phosphate vaginal	2		MONDOXYNE NL	E	
CLINDESSE	2		moxifloxacin hcl oral	3	
dicloxacillin sodium	1		mupirocin cream	3	QL
DIFICID ORAL TABLET	E	QL	mupirocin ointment	1	QL
doxycycline hyclate oral capsule	2		neomycin sulfate oral	1	
doxycycline hyclate oral tablet 100 mg	2		nitrofurantoin macrocrystal	1	
doxycycline hyclate oral tablet 150 mg, 50 mg, 75 mg	E		nitrofurantoin monohydrate macrocrystals	1	
doxycycline hyclate oral tablet 20 mg	1		NUVESSA	E	
doxycycline monohydrate oral capsule 100 mg, 50 mg	1		NUZYRA ORAL	3	QL
doxycycline monohydrate oral capsule 150 mg, 75 mg	E				

See page 6-8 for coverage details.



Drug Name	Drug Tier	Requirements & Limits
penicillin v potassium	1	
SEYSARA	E	
SILVADENE	3	
silver sulfadiazine external	1	
ssd	1	
sulfamethoxazole-trimethoprim oral suspension 200-40 mg/5ml	1	
sulfamethoxazole-trimethoprim oral tablet	1	
sulfatrim pediatric	1	
TARGADOX	E	
tetracycline hcl oral capsule	3	
tinidazole oral	3	
trimethoprim oral	1	
VANCOCIN	3	
vancomycin hcl oral capsule	1	
VANDAZOLE	3	
VIBRAMYCIN ORAL CAPSULE 100 MG	3	
VIBRAMYCIN ORAL SUSPENSION RECONSTITUTED 25 MG/5ML	3	
XACIATO	2	QL
XENLETA ORAL TABLET 600 MG	3	
XIFAXAN	3	PA, QL
ZITHROMAX ORAL	3	
ZITHROMAX TRI-PAK	3	
ZITHROMAX Z-PAK	3	
ZYVOX ORAL TABLET	E	

Anticoagulants - Drugs to Treat or Prevent Blood Clots

dabigatran etexilate mesylate	2	QL
ELIQUIS	2	QL
ELIQUIS DVT/PE STARTER PACK	2	QL
enoxaparin sodium injection solution prefilled syringe	2	QL
jantoven	1	
LOVENOX INJECTION SOLUTION PREFILLED SYRINGE	E	QL
PRADAXA ORAL CAPSULE	E	QL

Drug Name	Drug Tier	Requirements & Limits
rivaroxaban	2	QL
warfarin sodium oral	1	
XARELTO	2	QL
XARELTO STARTER PACK	2	QL

Anticonvulsants - Drugs for Seizures

APTOM	3	PA
BRIVIACT ORAL TABLET	3	PA
carbamazepine er	2	
carbamazepine oral tablet	1	
carbamazepine oral tablet chewable	1	
CARBATROL	3	
clobazam oral suspension 2.5 mg/ml	3	PA
clobazam oral tablet	2	PA
DEPAKOTE	3	PA
DEPAKOTE ER	3	PA
DEPAKOTE SPRINKLES	3	PA
DIASTAT ACUDIAL RECTAL GEL 10 MG, 20 MG	3	QL
DIASTAT PEDIATRIC RECTAL GEL 2.5 MG	2	QL
diazepam rectal	1	QL
DILANTIN	3	
divalproex sodium er	2	
divalproex sodium oral capsule delayed release sprinkle	2	
divalproex sodium oral tablet delayed release	1	
ELEPSIA XR	E	PA
EPIDIOLEX	3	PA, SP
epitol	1	
eslicarbazepine acetate	3	PA
ethosuximide oral	1	
FYCOMPA ORAL SUSPENSION	3	PA
FYCOMPA ORAL TABLET	3	PA
gabapentin oral capsule	1	
gabapentin oral solution 250 mg/5ml	1	

See page 6-8 for coverage details.



Drug Name	Drug Tier	Requirements & Limits
GABAPENTIN ORAL TABLET 25 MG, 50 MG	E	PA
gabapentin oral tablet 600 mg, 800 mg	1	
GABARONE	E	PA
KEPPRA ORAL	3	PA
KEPPRA XR	3	PA
lacosamide oral	2	
LAMICTAL	3	PA
LAMICTAL ODT ORAL TABLET DISPERSIBLE	3	PA
LAMICTAL XR ORAL TABLET EXTENDED RELEASE 24 HOUR	3	PA
lamotrigine er	3	
lamotrigine oral tablet	1	
lamotrigine oral tablet chewable	1	
lamotrigine oral tablet dispersible	3	PA
levetiracetam er	2	
levetiracetam oral solution	1	
levetiracetam oral tablet	1	
LIBERVANT BUCCAL FILM 10 MG, 12.5 MG, 15 MG, 5 MG, 7.5 MG	3	PA, QL
MOTPOLY XR	3	PA
MYSOLINE	2	PA
NAYZILAM	3	PA, QL
NEURONTIN	3	PA
ONFI	3	PA
oxcarbazepine	1	
oxcarbazepine er	E	
perampanel	2	PA
phenobarbital oral tablet	1	
phenytek	1	
phenytoin sodium extended	1	
primidone oral tablet 125 mg	1	PA
primidone oral tablet 250 mg, 50 mg	1	
roweepra	1	
subvenite	1	

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

Antidementia Agents - Drugs for Alzheimer's Disease and Dementia

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

Antidepressants - Drugs for Depression

amitriptyline hcl oral	1	
ANAFRANIL	E	
AUVELITY	3	ST, QL

See page 6-8 for coverage details.



Drug Name	Drug Tier	Requirements & Limits	Drug Name	Drug Tier	Requirements & Limits
bupropion hcl er (sr)	1		paroxetine hcl er	3	QL
bupropion hcl er (xl) oral tablet extended release 24 hour 150 mg, 300 mg	1		paroxetine hcl oral tablet	1	
BUPROPION HCL ER (XL) ORAL TABLET EXTENDED RELEASE 24 HOUR 450 MG	E	QL	PAXIL	E	
bupropion hcl oral	1		PAXIL CR	E	QL
CELEXA	E		PRISTIQ	E	QL
citalopram hydrobromide oral tablet	1		PROZAC	E	
clomipramine hcl oral	3		RALDESY	3	PA
CYMBALTA	E		REMERON	E	
desipramine hcl oral	1		REMERON SOLTAB ORAL TABLET DISPERSIBLE 15 MG, 30 MG	E	
desvenlafaxine succinate er	3	QL	SERTRALINE HCL ORAL CAPSULE	E	QL
doxepin hcl oral capsule	1		sertraline hcl oral concentrate	1	
doxepin hcl oral concentrate	1		sertraline hcl oral tablet	1	
duloxetine hcl oral capsule delayed release particles 20 mg, 30 mg, 60 mg	2		SPRAVATO (56 MG DOSE)	3	PA, QL
duloxetine hcl oral capsule delayed release particles 40 mg	E		SPRAVATO (84 MG DOSE)	3	PA, QL
EFFEXOR XR	E		trazodone hcl oral	1	
escitalopram oxalate oral solution 5 mg/5ml	2		TRINTELLIX	3	ST, QL
escitalopram oxalate oral tablet	1		venlafaxine hcl	1	
FETZIMA	3	ST, QL	venlafaxine hcl er oral capsule extended release 24 hour	1	
fluoxetine hcl oral capsule	1		venlafaxine hcl er oral tablet extended release 24 hour	E	QL
fluoxetine hcl oral solution	1		VIIBRYD	E	QL
fluoxetine hcl oral tablet 10 mg	3	QL	vilazodone hcl	3	QL
fluoxetine hcl oral tablet 20 mg, 60 mg	3		WAINUA	2	PA, QL, SP
fluvoxamine maleate	1		WELLBUTRIN SR	E	
fluvoxamine maleate er	3	QL	WELLBUTRIN XL	E	
FORFIVO XL	E	QL	ZOLOFT	E	
imipramine hcl oral	1		ZURZUVAE	2	PA, QL, SP
LEXAPRO	E		Antiemetics - Drugs for Nausea and Vomiting		
mirtazapine oral	1		ANTIVERT ORAL TABLET 50 MG	E	
NORPRAMIN	3		aprepitant oral capsule 125 mg, 40 mg, 80 mg	2	QL
nortriptyline hcl oral capsule	1		DICLEGIS	E	PA
PAMELOR	E		doxylamine-pyridoxine	E	PA
			dronabinol	1	
			EMEND BIPACK	E	QL
			MARINOL	E	

See page 6-8 for coverage details.



Drug Name	Drug Tier	Requirements & Limits
meclizine hcl oral tablet	E	
metoclopramide hcl oral tablet	1	
ondansetron hcl oral	1	
ondansetron odt oral tablet dispersible 16 mg	E	
ondansetron odt oral tablet dispersible 4 mg, 8 mg	1	
perphenazine oral	1	
prochlorperazine maleate oral	1	
promethazine hcl oral solution	1	
promethazine hcl oral tablet	1	
promethazine hcl rectal	1	
PROMETHEGAN	3	
REGLAN	3	
scopolamine	3	
TRANSDERM-SCOP TRANSDERMAL PATCH 72 HOUR 1 MG/3DAYS	E	

Antifungals - Drugs for Fungal Infections

ciclodan	1	
ciclopirox external gel	1	
ciclopirox external shampoo	2	
ciclopirox external solution	1	
ciclopirox olamine external cream	1	
clotrimazole mouth/throat	1	
CRESEMBA ORAL	3	
DIFLUCAN	E	
econazole nitrate external	2	
fluconazole oral	1	
griseofulvin microsize oral suspension	1	
GYNAZOLE-1	3	
itraconazole oral capsule	1	QL
JUBLIA	3	PA, ST, QL
ketoconazole external cream	1	QL
ketoconazole external shampoo	1	
ketoconazole oral	1	
klayesta	1	QL

Drug Name	Drug Tier	Requirements & Limits
LOPROX EXTERNAL SHAMPOO 1 %	E	
NOXAFIL ORAL TABLET DELAYED RELEASE	E	
nyamyc	1	QL
nystatin external	1	QL
nystatin mouth/throat	1	
nystatin oral	1	
nystatin-triamcinolone	2	
nystop	1	QL
posaconazole oral tablet delayed release	2	
SPORANOX	3	QL
terbinafine hcl oral	1	
terconazole	1	
TOLSURA	E	
VFEND ORAL TABLET 200 MG	3	QL
VFEND ORAL TABLET 50 MG	3	QL
VIVJOA	3	PA, QL
voriconazole oral tablet	1	QL

Antigout Agents - Drugs for Gout

allopurinol oral tablet 100 mg, 300 mg	1	
allopurinol oral tablet 200 mg	E	
colchicine oral	2	
colchicine-probenecid	1	
COLCRYS ORAL TABLET 0.6 MG	E	
febuxostat	3	
MITIGARE	2	
probenecid	1	
ULORIC	E	
ZYLOPRIM ORAL TABLET 100 MG, 300 MG	3	

Antimigraine Agents - Drugs for Migraines

AIMOVIG SUBCUTANEOUS SOLUTION AUTO-INJECTOR 140 MG/ML, 70 MG/ML	2	PA, ST, QL
AJOVY	E	PA, ST, QL
eletriptan hydrobromide	2	QL
EMGALITY	2	PA, ST, QL

See page 6-8 for coverage details.



Drug Name	Drug Tier	Requirements & Limits
FROVA	E	QL
frovatriptan succinate	3	QL
IMITREX NASAL SOLUTION 20 MG/ACT, 5 MG/ACT	3	QL
IMITREX ORAL	E	QL
IMITREX STATDOSE SYSTEM	E	QL
MAXALT	E	QL
MAXALT-MLT	E	QL
naratriptan hcl	1	QL
NURTEC	2	PA, ST, QL
QULIPTA	2	PA, ST, QL
RELPAK	E	QL
REYVOW	3	PA, ST, QL
rizatriptan benzoate oral tablet 10 mg	1	QL
rizatriptan benzoate oral tablet 5 mg	1	
rizatriptan benzoate oral tablet dispersible 10 mg	1	QL
rizatriptan benzoate oral tablet dispersible 5 mg	1	
sumatriptan nasal	2	QL
sumatriptan succinate oral	1	QL
sumatriptan succinate subcutaneous solution auto-injector	1	QL
TOSYMRA	E	QL
UBRELVY	2	PA, ST, QL
ZAVZPRET	3	PA, ST, QL
ZEMBRACE SYMTOUCH	E	QL
ZOLMITRIPTAN NASAL SOLUTION 2.5 MG	E	QL
zolmitriptan nasal solution 5 mg	E	QL
zolmitriptan oral tablet	2	QL
zolmitriptan oral tablet dispersible	3	QL
ZOMIG NASAL SOLUTION 2.5 MG	3	QL
ZOMIG NASAL SOLUTION 5 MG	2	QL
ZOMIG ORAL TABLET 5 MG	E	QL

Drug Name	Drug Tier	Requirements & Limits
Antimyasthenic Agents - Drugs to Treat Myasthenia Gravis		
MESTINON ORAL TABLET	E	
pyridostigmine bromide oral tablet 30 mg	E	
pyridostigmine bromide oral tablet 60 mg	1	
ZILBRYSQ	3	PA, QL, SP
Antimycobacterials - Drugs to Treat Infections		
dapsone oral	2	
ethambutol hcl oral	1	
isoniazid oral tablet	1	
MYAMBUTOL ORAL TABLET 400 MG	3	
rifampin oral	1	
Antineoplastics - Drugs for Cancer		
abiraterone acetate oral tablet 250 mg	2	QL, SP
abiraterone acetate oral tablet 500 mg	E	QL, SP
ABIRTEGA	E	QL, SP
ALECENSA	2	PA, QL
ALUNBRIG	2	PA, QL, SP
anastrozole oral	1	H-PA
ARIMIDEX	E	
AROMASIN	E	
AUGTYRO	2	PA, QL, SP
BESREMI	3	PA, QL, SP
bicalutamide	1	
BRUKINSA	3	PA, ST, QL, SP
CABOMETYX	2	PA, QL, SP
CALQUENCE	2	PA, QL, SP
capecitabine	1	QL, SP
CASODEX	E	
COTELLIC	2	PA, QL, SP
dasatinib	2	PA, QL, SP
ERIVEDGE	2	PA, QL, SP
ERLEADA ORAL TABLET 240 MG	2	PA, QL
ERLEADA ORAL TABLET 60 MG	2	PA, QL, SP

See page 6-8 for coverage details.



Drug Name	Drug Tier	Requirements & Limits	Drug Name	Drug Tier	Requirements & Limits
everolimus oral tablet 10 mg, 2.5 mg, 5 mg, 7.5 mg	2	PA, QL, SP	RETEVMO ORAL CAPSULE 80 MG	3	PA, SP
exemestane	2	H-PA	REVLIMID	2	PA, QL, SP
EXKIVITY ORAL CAPSULE 40 MG	3	SP	ROZLYTREK	2	PA, QL, SP
FEMARA	E		RYDAPT	2	PA, QL, SP
GAVRETO	3	PA, QL, SP	SCEMBLIX	3	PA, QL, SP
GLEEVEC	E	QL, SP	SPRYCEL	E	PA, QL, SP
HYDREA	E		STIVARGA	2	PA, QL, SP
hydroxyurea oral	1		TABRECTA	3	PA, QL, SP
IBRANCE ORAL TABLET	3	PA, ST, QL, SP	TAGRISSO	3	PA, QL, SP
ICLUSIG ORAL TABLET 10 MG, 30 MG	3	PA, QL	tamoxifen citrate oral tablet 10 mg	1	
ICLUSIG ORAL TABLET 15 MG, 45 MG	3	PA, QL, SP	tamoxifen citrate oral tablet 20 mg	1	H-PA
IDHIFA	2	PA, QL, SP	TASIGNA	E	PA, ST, QL, SP
imatinib mesylate oral	1	QL, SP	temozolomide	1	SP
IMBRUVICA ORAL CAPSULE	2	PA, QL, SP	torpenz	2	PA, QL, SP
IMBRUVICA ORAL TABLET 140 MG, 280 MG	E	PA, QL, SP	TRUQAP ORAL TABLET	2	PA, QL, SP
IMBRUVICA ORAL TABLET 420 MG	2	PA, QL, SP	VENCLEXTA	2	PA, QL, SP
IMKELDI	3	QL, SP	VERZENIO	2	PA, QL, SP
JAKAFI	2	PA, QL, SP	VITRAKVI	2	PA, QL, SP
KISQALI	2	PA, QL, SP	XELODA	E	QL, SP
KOSELUGO	3	PA, QL, SP	XTANDI	2	PA, QL, SP
lenalidomide	2	PA, QL, SP	ZEJULA ORAL CAPSULE 100 MG	2	PA, SP
letrozole oral	1	H-PA	ZELBORAF	2	PA, QL, SP
leucovorin calcium oral	1		ZYTIGA	E	QL, SP
LUMAKRAS	3	PA, QL, SP	Antiparasitics - Drugs for Parasitic Infections		
LYNPARZA	2	PA, QL, SP	ARAKODA	3	QL
mercaptopurine oral tablet	1		atovaquone	2	
nilotinib hcl	2	PA, ST, QL, SP	atovaquone-proguanil hcl	2	
NUBEQA	2	PA, QL, SP	ELIMITE	3	
ODOMZO	2	PA, QL, SP	hydroxychloroquine sulfate oral	1	
ORGOVYX	3	PA, QL, SP	ivermectin oral tablet 3 mg	1	PA, QL
PIQRAY	2	PA, QL, SP	ivermectin oral tablet 6 mg	1	PA
POMALYST	3	PA, QL, SP	KRINTAFEL	1	QL
RETEVMO ORAL CAPSULE 40 MG	3	PA, QL, SP	MALARONE	3	
			mefloquine hcl	1	
			MEPRON	E	
			permethrin external	1	

See page 6-8 for coverage details.



Drug Name	Drug Tier	Requirements & Limits	Drug Name	Drug Tier	Requirements & Limits
PLAQUENIL	E		CLOZARIL	3	
SOVUNA	E		GEODON ORAL	E	
STROMEKTOL	3	PA, QL	haloperidol oral	1	
Antiparkinson Agents - Drugs for Parkinson's Disease			INVEGA	E	QL
amantadine hcl oral capsule	1		LATUDA	E	QL
amantadine hcl oral tablet	1		lurasidone hcl	2	QL
AZILECT	E		olanzapine oral tablet	1	
benztropine mesylate oral	1		olanzapine oral tablet dispersible	2	
bromocriptine mesylate oral tablet	1		paliperidone er	3	QL
carbidopa-levodopa er	1		quetiapine fumarate	1	
carbidopa-levodopa oral tablet	1		quetiapine fumarate er	2	
CREXONT	3	ST	REXULTI	3	QL
DHIVY	E		RISPERDAL	E	
INBRIJA	3	PA, QL, SP	risperidone	1	
NEUPRO	3		SAPHRIS	E	QL
PARLODEL ORAL TABLET	E		SEROQUEL	E	
pramipexole dihydrochloride	1		SEROQUEL XR	E	
rasagiline mesylate oral	3		VRAYLAR	3	QL
ropinirole hcl	1		ziprasidone hcl	2	
RYTARY	E	ST	ZYPREXA ORAL	E	
SINEMET	3		ZYPREXA ZYDIS ORAL TABLET DISPERSIBLE 10 MG, 15 MG, 20 MG, 5 MG	E	
trihexyphenidyl hcl oral tablet	1		Antivirals - Drugs for Viral Infections		
Antiplatelets - Drugs for Heart Attack and Stroke Prevention			acyclovir external ointment	3	QL
BRILINTA	E	QL	acyclovir oral capsule	1	
cilostazol	1		acyclovir oral suspension 200 mg/5ml	1	
clopidogrel bisulfate oral	1		acyclovir oral tablet	1	
EFFIENT	E		BARACLUDE ORAL TABLET	E	
PLAVIX	E		BIKTARVY	3	QL
prasugrel hcl	3		CIMDUO	2	QL
ticagrelor	3	QL	DESCOVY ORAL TABLET 120-15 MG	3	QL
Antipsychotics - Drugs for Mood Disorders			DESCOVY ORAL TABLET 200-25 MG	3	QL, H
ABILIFY	E		DOVATO	2	QL
aripiprazole oral	2		emtricitabine-tenofovir df oral tablet 100-150 mg, 133-200 mg, 167-250 mg	1	QL
asenapine maleate	3	QL			
CAPLYTA	3	PA, ST, QL			
chlorpromazine hcl oral tablet	1	QL			
clozapine oral tablet	1				

See page 6-8 for coverage details.



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

Drug Name	Drug Tier	Requirements & Limits
VIREAD ORAL TABLET 300 MG	E	
VOSEVI	2	PA, QL, SP
XOFLUZA (40 MG DOSE)	3	QL
XOFLUZA (80 MG DOSE)	3	QL
ZOVIRAX EXTERNAL OINTMENT	E	QL
Anxiolytics - Drugs for Anxiety		
alprazolam er	1	
alprazolam oral	1	
alprazolam xr	1	
ATIVAN ORAL	E	
buspirone hcl oral	1	
chlordiazepoxide hcl	1	
clonazepam oral	1	
clorazepate dipotassium	1	
diazepam oral solution	1	
diazepam oral tablet	1	
HALCION	3	
hydroxyzine hcl oral	1	
hydroxyzine pamoate oral	1	
KLONOPIN	E	
lorazepam oral tablet	1	
triazolam	1	
VALIUM	E	
VISTARIL ORAL CAPSULE 25 MG	3	
XANAX	E	
XANAX XR	E	
Bipolar Agents - Drugs for Mood Disorders		
lithium carbonate er	1	
lithium carbonate oral	1	
LITHOBID	3	PA
Cardiovascular Agents - Drugs for Heart and Circulation Conditions		
acebutolol hcl oral	1	
acetazolamide er	1	
acetazolamide oral	1	
ALDACTONE	E	
aliskiren fumarate	3	
ALTACE	E	

See page 6-8 for coverage details.



Drug Name	Drug Tier	Requirements & Limits	Drug Name	Drug Tier	Requirements & Limits
amiloride hcl oral	1		carvedilol phosphate er	E	
amiodarone hcl oral	1		CATAPRES-TTS-1	E	
amlodipine besylate oral	1		CATAPRES-TTS-2	E	
amlodipine besylate-benazepril hcl	1		CATAPRES-TTS-3	E	
amlodipine besylate-valsartan	2		chlorthalidone	1	
amlodipine-olmesartan	E		cholestyramine light	1	
ATACAND	E		cholestyramine oral	1	
ATACAND HCT	E		clonidine hcl oral	1	
atenolol oral	1		clonidine patch weekly 0.1 mg/24hr transdermal	3	
atenolol-chlorthalidone	1		clonidine patch weekly 0.1 mg/24hr transdermal	3	(Patch)
ATORVALIQ	3	PA	clonidine patch weekly 0.2 mg/24hr transdermal	3	
atorvastatin calcium oral tablet 10 mg, 20 mg	1	H-PA	clonidine patch weekly 0.2 mg/24hr transdermal	3	(Patch)
atorvastatin calcium oral tablet 40 mg, 80 mg	1		clonidine patch weekly 0.3 mg/24hr transdermal	3	
AVALIDE	E		clonidine patch weekly 0.3 mg/24hr transdermal	3	(Patch)
AVAPRO	E		clonidine patch weekly 0.3 mg/24hr transdermal	3	(Patch)
AZOR	E		colesevelam hcl oral tablet	2	
benazepril hcl oral	1		COLESTID ORAL TABLET	3	
benazepril-hydrochlorothiazide	1		colestipol hcl oral tablet	1	
BENICAR	E		COREG	E	
BENICAR HCT	E		COREG CR	E	
BETAPACE	E		CORGARD ORAL TABLET 20 MG, 40 MG	3	
bisoprolol fumarate oral tablet	1		CORLANOR	3	PA, QL
bisoprolol-hydrochlorothiazide	1		COZAAR	E	
bumetanide oral	1		CRESTOR	E	
BUMEX	3		digoxin oral tablet	1	
BYSTOLIC	E		diltiazem hcl er beads	2	
CAMZYOS	3	PA, QL, SP	diltiazem hcl er coated beads	2	
candesartan cilexetil	3		diltiazem hcl er oral capsule extended release 12 hour	1	
candesartan cilexetil-hctz	3		diltiazem hcl er oral capsule extended release 24 hour	1	
captopril oral	1		diltiazem hcl er oral tablet extended release 24 hour	2	
CARDIZEM	E		diltiazem hcl oral	1	
CARDIZEM CD	E		dilt-xr	1	
CARDIZEM LA	E				
CARDURA	3				
cartia xt	2				
carvedilol	1				

See page 6-8 for coverage details.



Drug Name	Drug Tier	Requirements & Limits	Drug Name	Drug Tier	Requirements & Limits
DIOVAN	E		hydrochlorothiazide oral	1	
DIOVAN HCT	E		HYZAAR	E	
dofetilide	2		icosapent ethyl	E	PA
doxazosin mesylate oral	1		indapamide	1	
EDARBI	E		INDERAL LA	E	
EDARBYCLOR	E		INSPIRA	E	
enalapril maleate oral solution	3	PA	INZIRQO	3	PA
enalapril maleate oral tablet	1		irbesartan	1	
enalapril-hydrochlorothiazide	1		irbesartan-hydrochlorothiazide	1	
ENTRESTO ORAL TABLET	E	PA, QL	ISORDIL TITRADOSE	E	
EPANED	3	PA	isosorbide dinitrate oral tablet 10 mg, 20 mg, 30 mg, 5 mg	1	
eplerenone	2		isosorbide dinitrate oral tablet 40 mg	E	
EXFORGE	E		isosorbide mononitrate er	1	
ezetimibe	2		ivabradine hcl	3	PA, QL
ezetimibe-simvastatin	3		KASPARGO SPRINKLE	3	
felodipine er	1		KERENDIA ORAL TABLET 10 MG, 20 MG	3	PA, QL
fenofibrate micronized oral capsule 130 mg, 134 mg, 200 mg, 43 mg, 67 mg	2		labetalol hcl oral	1	
FENOFIBRATE MICRONIZED ORAL CAPSULE 90 MG	E		LANOXIN ORAL TABLET 125 MCG, 250 MCG	3	
fenofibrate oral capsule 134 mg, 200 mg, 67 mg	2		LANOXIN ORAL TABLET 62.5 MCG	3	
fenofibrate oral tablet 120 mg, 40 mg	E		LASIX	3	
fenofibrate oral tablet 145 mg, 160 mg, 48 mg, 54 mg	2		LIPITOR	E	
fenofibric acid oral capsule delayed release	2		lisinopril oral	1	
FENOGLIDE ORAL TABLET 120 MG, 40 MG	E		lisinopril-hydrochlorothiazide	1	
flecainide acetate	1		LIVALO	E	ST
fosinopril sodium	1		LODOCO	3	QL
FUROSCIX	3	PA, QL	LOPID	3	
furosemide oral	1		LOPRESSOR ORAL TABLET	3	
gemfibrozil oral	1		losartan potassium oral	1	
guanfacine hcl	1		losartan potassium-hctz	1	
HEMANGEOL	3		LOTENSIN	3	
HEMICLOR	E		LOTENSIN HCT	3	
hydralazine hcl oral	1		LOTREL	E	
			lovastatin oral	1	H
			LOVAZA	E	

See page 6-8 for coverage details.



Drug Name	Drug Tier	Requirements & Limits	Drug Name	Drug Tier	Requirements & Limits
matzim la	2		olmesartan medoxomil oral	2	
MAXZIDE ORAL TABLET 75-50 MG	3		olmesartan medoxomil-hctz	2	
MAXZIDE-25 ORAL TABLET 37.5-25 MG	3		olmesartan-amlodipine-hctz	E	
metolazone	1		omega-3-acid ethyl esters	2	
metoprolol succinate er oral tablet extended release 24 hour 100 mg, 200 mg, 50 mg	2		PACERONE ORAL TABLET 100 MG, 400 MG	3	
metoprolol succinate er oral tablet extended release 24 hour 25 mg	1		PACERONE ORAL TABLET 200 MG	3	
metoprolol tartrate oral tablet 100 mg, 25 mg, 50 mg	1		pentoxifylline er	1	
metoprolol tartrate oral tablet 37.5 mg, 75 mg	E		pitavastatin calcium	E	ST
metoprolol-hydrochlorothiazide	1		PRALUENT	E	PA, ST, QL
mexiletine hcl oral	1		pravastatin sodium	1	
MICARDIS	E		prazosin hcl oral	1	
MICARDIS HCT	E		prevalite	1	
midodrine hcl	1		PROCARDIA XL	E	
MINIPRESS ORAL CAPSULE 1 MG, 2 MG, 5 MG	3		propafenone hcl	1	
minoxidil oral	1		propafenone hcl er	3	
MULTAQ	3	PA	propranolol hcl er	2	
nadolol oral	1		propranolol hcl oral	1	
nebivolol hcl	3		QUESTRAN	3	
NEXLETOL	2	PA, ST, QL	QUESTRAN LIGHT	3	
NEXLIZET	2	PA, ST, QL	ramipril	1	
niacin er (antihyperlipidemic)	2		ranolazine er	2	
nifedipine er	1		RECTIV	3	QL
nifedipine er osmotic release	1		REPATHA	2	QL
nifedipine oral	1		REPATHA PUSHTRONEX SYSTEM	2	QL
NITRO-BID	2		REPATHA SURECLICK	2	QL
NITRO-DUR	3		rosuvastatin calcium oral	2	
nitroglycerin rectal	3	QL	RYTHMOL SR ORAL CAPSULE EXTENDED RELEASE 12 HOUR 225 MG, 325 MG, 425 MG	E	
nitroglycerin sublingual	1		sacubitril-valsartan	3	PA, QL
nitroglycerin transdermal	1		simvastatin oral tablet 10 mg, 20 mg, 40 mg, 5 mg	1	H-PA
NITROSTAT	3		simvastatin oral tablet 80 mg	1	
NORLIQVA	3	PA	SOANZ	E	QL
NORVASC	E		sotalol hcl oral	1	
			spironolactone oral tablet	1	
			spironolactone-hctz	1	

See page 6-8 for coverage details.



Drug Name	Drug Tier	Requirements & Limits	Drug Name	Drug Tier	Requirements & Limits
taztia xt oral capsule extended release 24 hour 120 mg, 180 mg, 240 mg, 300 mg, 360 mg	2		VERELAN PM ORAL CAPSULE EXTENDED RELEASE 24 HOUR 100 MG, 200 MG, 300 MG	3	
TEKTURNA	3		VERQUVO	3	PA, QL
TEKTURNA HCT ORAL TABLET 300-12.5 MG, 300-25 MG	3		VYNDAQEL	2	PA, QL, SP
telmisartan	2		VYTORIN	E	
telmisartan-hctz	2		WELCHOL ORAL TABLET	E	
TENORETIC 100	E		ZESTORETIC	E	
TENORETIC 50	E		ZESTRIL	E	
TENORMIN	E		ZETIA	E	
THALITONE	E		ZIAC ORAL TABLET 10-6.25 MG, 2.5-6.25 MG	3	
tiadylt er	2		ZIAC ORAL TABLET 5-6.25 MG	3	
TIAZAC	3		ZOCOR	E	
TIKOSYN	3		Central Nervous System Agents - Drugs for Attention Deficit Disorder		
TOPROL XL	E		ADDERALL	E	
torsemide	1		ADDERALL XR	E	QL
trandolapril	1		ADZENYS XR-ODT	E	QL
triamterene-hctz	1		amphetamine sulfate	2	
TRIBENZOR	E		amphetamine-dextroamphetamine	1	
TRICOR	E		amphetamine-dextroamphetamine er	2	QL
TRILIPIX ORAL CAPSULE DELAYED RELEASE 135 MG, 45 MG	E		amphet-dextroamphet 3-bead er	3	QL
VALSARTAN ORAL SOLUTION	3	PA	APTENSIO XR	E	QL
valsartan oral tablet	2		atomoxetine hcl	3	QL
valsartan-hydrochlorothiazide	1		AZSTARYS	3	ST, QL
VASCEPA	E	PA	clonidine hcl er	2	
VASERETIC	E		CONCERTA	E	QL
VASOTEC	E		COTEMPLA XR-ODT	E	QL
verapamil hcl er oral capsule extended release 24 hour 100 mg, 200 mg, 300 mg	3		DEXEDRINE	E	QL
verapamil hcl er oral capsule extended release 24 hour 120 mg, 180 mg, 240 mg, 360 mg	1		dexmethylphenidate hcl	1	
verapamil hcl er oral tablet extended release	1		dexmethylphenidate hcl er	2	QL
verapamil hcl oral	1		dextroamphetamine sulfate er oral capsule extended release 24 hour 10 mg, 15 mg	3	QL
VERELAN	3		dextroamphetamine sulfate er oral capsule extended release 24 hour 5 mg	2	QL

See page 6-8 for coverage details.



Drug Name	Drug Tier	Requirements & Limits	Drug Name	Drug Tier	Requirements & Limits
dextroamphetamine sulfate oral tablet 10 mg, 5 mg	2		methylphenidate hcl oral tablet chewable	3	
dextroamphetamine sulfate oral tablet 15 mg, 2.5 mg, 20 mg, 30 mg, 7.5 mg	E		MYDAYIS	E	QL
DYANAVEL XR ORAL TABLET EXTENDED RELEASE	E	QL	ONYDA XR	3	QL
EVEKEO	E		QELBREE	E	PA, QL
FOCALIN	3		QUILLICHEW ER	E	QL
FOCALIN XR	E	QL	QUILLIVANT XR	E	QL
guanfacine hcl er	2		RELEXXII	E	QL
INTUNIV	E		RITALIN	E	
JORNAY PM	3	ST, QL	RITALIN LA	E	QL
KAPVAY ORAL TABLET EXTENDED RELEASE 12 HOUR 0.1 MG	E		STRATTERA ORAL CAPSULE 10 MG, 100 MG, 18 MG, 25 MG, 40 MG, 60 MG, 80 MG	E	QL
lisdexamfetamine dimesylate	3	QL	VYVANSE	E	QL
METADATE CD	E	QL	ZENZEDI	E	
METHYLIN	3		Central Nervous System Agents - Drugs for Multiple Sclerosis		
methylphenidate hcl er (cd)	2	QL	AMPYRA	E	PA, QL, SP
methylphenidate hcl er (la) oral capsule extended release 24 hour 10 mg, 20 mg, 30 mg, 40 mg	2	QL	AUBAGIO	E	PA, QL, SP
methylphenidate hcl er (la) oral capsule extended release 24 hour 60 mg	2		AVONEX PEN	2	PA, QL, SP
methylphenidate hcl er (osm) oral tablet extended release 18 mg, 27 mg, 36 mg, 54 mg	2	QL	AVONEX PREFILLED	2	PA, QL, SP
METHYLPHENIDATE HCL ER (OSM) ORAL TABLET EXTENDED RELEASE 45 MG, 63 MG	E	QL	BAFIERTAM	2	PA, QL, SP
methylphenidate hcl er (osm) oral tablet extended release 72 mg	E	QL	BETASERON	2	PA, QL, SP
methylphenidate hcl er (xr)	E	QL	COPAXONE	E	PA, QL, SP
methylphenidate hcl er oral tablet extended release	2	QL	dalfampridine er	2	PA, QL, SP
methylphenidate hcl er oral tablet extended release 24 hour	E	QL	dimethyl fumarate oral	1	PA, QL, SP
methylphenidate hcl oral solution	1		EXTAVIA SUBCUTANEOUS KIT 0.3 MG	E	PA, ST, QL, SP
methylphenidate hcl oral tablet	1		fingolimod hcl	1	PA, QL, SP
			GILENYA ORAL CAPSULE 0.25 MG	3	PA, QL, SP
			GILENYA ORAL CAPSULE 0.5 MG	E	PA, QL, SP
			glatiramer acetate	2	PA, QL, SP
			glatopa	2	PA, QL, SP
			KESIMPTA	2	PA, QL, SP
			MAVENCLAD	3	PA, ST, QL, SP
			MAYZENT STARTER PACK ORAL TABLET THERAPY PACK 12 X 0.25 MG	3	PA, QL, SP

See page 6-8 for coverage details.



Drug Name	Drug Tier	Requirements & Limits
MAYZENT STARTER PACK ORAL TABLET THERAPY PACK 7 X 0.25 MG	3	PA, QL, SP
PLEGRIDY INTRAMUSCULAR	3	PA, QL
PLEGRIDY STARTER PACK	3	PA, QL, SP
PLEGRIDY SUBCUTANEOUS	3	PA, QL, SP
TECFIDERA ORAL CAPSULE DELAYED RELEASE	E	PA, QL, SP
teriflunomide	2	PA, QL, SP

Central Nervous System Agents - Miscellaneous

AUSTEDO	2	PA, QL, SP
AUSTEDO XR	2	PA, QL, SP
AUSTEDO XR PATIENT TITRATION ORAL TABLET EXTENDED RELEASE THERAPY PACK 12 & 18 & 24 & 30 MG	2	PA, SP
AUSTEDO XR PATIENT TITRATION ORAL TABLET EXTENDED RELEASE THERAPY PACK 6 & 12 & 24 MG	2	PA, QL, SP
INGREZZA ORAL CAPSULE 40 MG, 80 MG	2	PA, QL, SP
INGREZZA ORAL CAPSULE 60 MG	2	PA, QL
INGREZZA ORAL CAPSULE SPRINKLE	2	PA, QL, SP
INGREZZA ORAL CAPSULE THERAPY PACK	2	PA, QL, SP
LYRICA ORAL CAPSULE	3	PA
NUEDEXTA	2	PA, QL
pregabalin oral capsule	2	
RADICAVA ORS	3	PA, QL, SP
RADICAVA ORS STARTER KIT	3	PA, QL, SP
SAVELLA	3	QL
TEGLUTIK	3	PA
TIGLUTIK	3	PA
VEOZAH	3	PA, QL
ZEPOSIA	3	PA, ST, QL, SP
ZEPOSIA 7-DAY STARTER PACK	3	PA, ST, QL, SP
ZEPOSIA STARTER KIT	3	PA, ST, QL, SP

Drug Name	Drug Tier	Requirements & Limits
Dental and Oral Agents - Drugs for Mouth and Throat Conditions		
cevimeline hcl	1	
chlorhexidine gluconate mouth/throat	1	
CLINPRO 5000	3	
DENTA 5000 PLUS	3	
DENTAGEL	3	
EVOXAC	E	
FLUORIDEX	3	
FLUORIDEX ENHANCED WHITENING	3	
FLUORIMAX 5000	3	
FRAICHE 5000 DENTAL	3	
JUST RIGHT 5000 DENTAL GEL 1.1 %	3	
JUST RIGHT 5000 DENTAL PASTE	3	
KOURZEQ	2	
lidocaine hcl mouth/throat	1	
lidocaine viscous hcl	1	
ORALONE	2	
PERIDEX	3	
periogard	1	
pilocarpine hcl oral	1	
PREVIDENT 5000 BOOSTER PLUS	3	
PREVIDENT 5000 DRY MOUTH	3	
PREVIDENT 5000 KIDS	3	
PREVIDENT 5000 ORTHO DEFENSE	3	
PREVIDENT 5000 PLUS	3	
PREVIDENT DENTAL	3	
SALAGEN	3	
sf 5000 plus	1	
sf gel 1.1%	1	
sodium fluoride 5000 plus	1	
sodium fluoride 5000 ppm	1	
sodium fluoride dental	1	

See page 6-8 for coverage details.



Drug Name	Drug Tier	Requirements & Limits	Drug Name	Drug Tier	Requirements & Limits
triamcinolone acetonide mouth/throat	1		betamethasone dipropionate external ointment	2	
Dermatological Agents - Drugs for Skin Conditions			betamethasone valerate external cream	1	
ABSORICA	E	PA	betamethasone valerate external lotion	1	
ACANYA	E	QL	betamethasone valerate external ointment	1	
accutane	2		BLANCHE	E	
acitretin	1		CABTREO	E	QL
ACZONE	E	QL	calcipotriene external cream	2	QL
ADAINZDE EXTERNAL GEL 0.3-2.5-1 %	E		calcipotriene external ointment	2	
adapalene external gel	E	PA, QL	calcipotriene external solution	1	QL
adapalene-benzoyl peroxide external gel	3	QL	CALCITRENE	3	
ADEINZDE	E		CARAC EXTERNAL CREAM 0.5 %	E	
AKLIEF	3	PA, QL	CIBINQO	2	PA, QL, SP
ALA SCALP	3		ciclopirox olamine external suspension	1	
ala-cort	E		claravis	2	
alclometasone dipropionate	1		CLEOCIN-T	3	
ammonium lactate external	E		clindacin etz external swab	1	
amnestem	2		clindacin-p	1	
AMZEEQ	3	QL	CLINDAGEL	E	QL
ARAZLO	E	PA, QL	clindamycin phos (once-daily) gel 1 % external	2	QL
ATRALIN	E	PA, QL	clindamycin phos (once-daily) gel 1 % external	E	(generic for Clindagel), QL
AVAR CLEANSER	3		clindamycin phos (twice-daily) gel 1 % external	2	QL
AVAR LS CLEANSER	E		clindamycin phos (twice-daily) gel 1 % external	2	(generic for Cleocin-T), QL
AVITA EXTERNAL CREAM 0.025 %	E	PA, QL	clindamycin phos (twice-daily) gel 1 % external	E	(generic for Clindagel), QL
azelaic acid external	3		clindamycin phos-benzoyl perox external gel 1.2-5 %	3	QL
AZELEX	3	QL	clindamycin phos-benzoyl perox external gel 1-5 %, 1.2-2.5 %, 1.2-3.75 %	E	QL
BENZAMYCIN	2	QL	clindamycin phosphate external lotion	3	
benzoyl peroxide-erythromycin	1	QL	clindamycin phosphate external solution	1	
betamethasone dipropionate aug external cream	1				
betamethasone dipropionate aug external lotion	3				
betamethasone dipropionate aug external ointment	3				
betamethasone dipropionate external cream	2				
betamethasone dipropionate external lotion	1				

See page 6-8 for coverage details.



Drug Name	Drug Tier	Requirements & Limits	Drug Name	Drug Tier	Requirements & Limits
clindamycin phosphate external swab	1		doxycycline	E	
clobetasol prop emollient base external cream 0.05 %	2	QL	DRYSOL	3	
clobetasol propionate e	2	QL	DUPIXENT SUBCUTANEOUS SOLUTION AUTO-INJECTOR	2	PA, QL, SP
CLOBETASOL PROPIONATE EXTERNAL CREAM 0.025 %	E	QL	DUPIXENT SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 100 MG/0.67ML	2	PA, QL
clobetasol propionate external cream 0.05 %	2	QL	DUPIXENT SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 200 MG/1.14ML, 300 MG/2ML	2	PA, QL, SP
clobetasol propionate external foam	E	QL	EBGLYSS SUBCUTANEOUS SOLUTION AUTO-INJECTOR	2	PA, QL, SP
clobetasol propionate external gel	2	QL	EFUDEX EXTERNAL CREAM 5 %	3	
clobetasol propionate external liquid	1	QL	ELIDEL	E	QL
clobetasol propionate external ointment	2	QL	ENSTILAR	3	QL
clobetasol propionate external shampoo	E	QL	EPIDUO	E	QL
clobetasol propionate external solution	1	QL	EPIDUO FORTE	E	QL
CLOBEX EXTERNAL SHAMPOO	E	QL	ERYGEL	3	
CLOBEX SPRAY	E	QL	erythromycin external	1	
clodan	E	QL	EUCRISA	3	ST, QL
clotrimazole external cream	E		FINACEA EXTERNAL FOAM	3	
clotrimazole-betamethasone	1		FINACEA EXTERNAL GEL	E	
dapsone external	3	QL	fluocinolone acetonide body	3	QL
DERMACINRX UREA	E		fluocinolone acetonide external cream	3	QL
DERMA-SMOOTHIE/FS BODY	3	QL	fluocinolone acetonide external ointment	2	QL
DERMA-SMOOTHIE/FS SCALP	3		fluocinolone acetonide external solution	1	QL
desonide external cream	2	QL	fluocinolone acetonide scalp	3	
desonide external lotion	3	QL	fluocinonide external cream 0.05 %	1	
desonide external ointment	2	QL	fluocinonide external cream 0.1 %	E	QL
DESOWEN	3	QL	fluocinonide external gel	1	
desoximetasone external cream	1	QL	fluocinonide external ointment	1	
desoximetasone external ointment	3	QL	fluocinonide external solution	1	
diclofenac sodium external gel 3 %	2	PA, QL	FLUOROURACIL EXTERNAL CREAM 0.5 %	E	
DIFFERIN EXTERNAL GEL 0.3 %	E	PA, QL	fluorouracil external cream 5 %	1	
DIPROLENE	3		fluticasone propionate external cream	1	

See page 6-8 for coverage details.



Drug Name	Drug Tier	Requirements & Limits	Drug Name	Drug Tier	Requirements & Limits
fluticasone propionate external ointment	1		metronidazole external lotion	1	
halobetasol propionate external cream	2	QL	MIRVASO	2	PA, QL
halobetasol propionate external ointment	2	QL	mometasone furoate external	1	
hydrocortisone external cream 1 %	E		NEMLUVIO	2	PA, QL, SP
hydrocortisone external cream 2.5 %	1		neuac	3	QL
hydrocortisone external lotion 2 %	3		NORITATE	E	
hydrocortisone external lotion 2.5 %	1		ONEXTON	E	QL
hydrocortisone external ointment 1 %, 2.5 %	1		OPZELURA	3	PA, QL, SP
hydrocortisone valerate external cream	2	QL	ORACEA	E	
hydroquinone external	E		OVACE PLUS WASH EXTERNAL LIQUID	3	
HYDROXYM EXTERNAL CREAM	E		OVACE WASH	3	
imiquimod external cream 3.75 %	E	QL	PANRETIN	3	
imiquimod external cream 5 %	1		pimecrolimus	3	QL
imiquimod pump	E	QL	PLEXION CLEANSER	E	
IMPOYZ	E	QL	podofilox external solution	1	
isotretinoin oral capsule 10 mg, 20 mg, 30 mg, 40 mg	2		RETIN-A	E	PA, QL
isotretinoin oral capsule 25 mg, 35 mg	E	PA	RHOFADE	3	PA, QL
ivermectin external cream	E	QL	SANTYL	3	QL
KLARON	3		selenium sulfide external lotion	1	
KLISYRI (250 MG)	3	ST, QL	sodium sulfacetamide wash	1	
KLISYRI (350 MG)	3	ST, QL	SOOLANTRA	3	QL
LOPROX EXTERNAL SUSPENSION 0.77 %	E		sulfacetamide sodium (acne)	1	
METROCREAM	3		sulfacetamide sodium external	1	
METROGEL	E		sulfacetamide sodium-sulfur external liquid 10-2 %, 9-4.5 %, 9.8-4.8 %	E	
METROLOTION	3		sulfacetamide sodium-sulfur external liquid 10-5 %, 9-4 %	1	
metronidazole external cream	1		sulfacetamide sod-sulfur wash external liquid 9-4 %	1	
metronidazole external gel 0.75 %	1		sulfacetamide sod-sulfur wash external liquid 9-4.5 %	E	
metronidazole external gel 1 %	E		SUMADAN WASH	E	
			SYNALAR	E	QL
			SYNALAR EXTERNAL SOLUTION 0.01 %	E	QL
			TACLONEX EXTERNAL OINTMENT 0.005-0.064 %	E	QL

See page 6-8 for coverage details.



Drug Name	Drug Tier	Requirements & Limits
TACLONEX EXTERNAL SUSPENSION	3	QL
tacrolimus external	2	QL
tazarotene external cream	3	PA, QL
TAZORAC EXTERNAL CREAM	3	PA, QL
TOLAK	E	
TOPICORT	3	QL
TOPICORT EXTERNAL CREAM 0.05 %, 0.25 %	3	QL
TREMFYA CROHNS INDUCTION	3	PA, QL
TREMFYA PEN SUBCUTANEOUS SOLUTION AUTO-INJECTOR 200 MG/2ML	2	PA, QL
TREMFYA SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 200 MG/2ML	2	PA, QL
tretinoin external cream	3	QL
tretinoin external gel 0.01 %, 0.025 %	E	QL
tretinoin external gel 0.05 %	E	PA, QL
triamcinolone acetonide external cream 0.025 %, 0.1 %	1	
triamcinolone acetonide external cream 0.5 %	1	QL
triamcinolone acetonide external lotion	1	
triamcinolone acetonide external ointment 0.025 %, 0.1 %, 0.5 %	1	
triamcinolone acetonide external ointment 0.05 %	E	
triamcinolone in absorbbase	E	
TRIANEX EXTERNAL OINTMENT 0.05 %	E	
triderm	1	QL
TRIDESILON EXTERNAL CREAM 0.05 %	3	QL
tritocin external ointment 0.05 %	E	
urea external cream 20 %, 40 %, 45 %	1	
urea external cream 39 %, 41 %, 47 %	E	
UREA EXTERNAL CREAM 39.5 %	E	

Drug Name	Drug Tier	Requirements & Limits
uredeb	E	
UREMEZ-40	3	
URESOL	E	
VANOS	E	QL
VTAMA	3	PA, QL
WINLEVI	E	PA, QL
xurea	E	
zenatane	2	
ZILXI	3	PA, ST, QL
ZORYVE EXTERNAL CREAM 0.15 %	3	PA
ZORYVE EXTERNAL CREAM 0.3 %	3	PA, QL
ZORYVE EXTERNAL FOAM	3	PA, QL
ZYCLARA	E	QL
ZYCLARA PUMP	E	QL

Diabetes - Glucose Monitoring and Supplies

ACCU-CHEK AVIVA PLUS TEST STRIPS	E	QL
ACCU-CHEK FASTCLIX LANCET	1	
ACCU-CHEK FASTCLIX LANCET DEVICE KIT	1	
ACCU-CHEK GUIDE KIT W/ DEVICE	2	
ACCU-CHEK GUIDE ME METER	2	
ACCU-CHEK GUIDE TEST STRIPS	2	QL
ACCU-CHEK SMARTVIEW TEST STRIPS	E	QL
ACCU-CHEK SOFTCLIX LANCET	1	
ACCU-CHEK SOFTCLIX LANCET DEVICE KIT	1	
ACCUTREND GLUCOSE	E	QL
AGAMATRIX PRESTO TEST	E	QL
AQ INSULIN SYRINGE	2	QL
AQINJECT PEN NEEDLE	2	QL
BD AUTOSHIELD DUO PEN NEEDLES	2	QL
BD BLUNT FILL NEEDLE W/ FILTER	2	

See page 6-8 for coverage details.



Drug Name	Drug Tier	Requirements & Limits	Drug Name	Drug Tier	Requirements & Limits
BD ECLIPSE NEEDLE 18G X 1-1/2", 25G X 5/8", 27G X 1/2"	2		CARETOUCH TEST	E	QL
BD ECLIPSE NEEDLE 23G X 1" (OTC)	2		CEQUR SIMPLICITY 2U 8PK	3	ST
BD ECLIPSE NEEDLE 23G X 1" (RX)	2		CONTOUR MONITOR KIT W/ DEVICE	E	
BD ECLIPSE SHIELDED NEEDLE	2		CONTOUR NEXT EZ KIT W/ DEVICE	1	
BD PEN NEEDLE MICRO ULTRAFINE	2	QL	CONTOUR NEXT GEN MONITOR KIT	1	
BD PEN NEEDLE MINI ULTRAFINE	2	QL	CONTOUR NEXT GEN TEST STRIPS	1	QL
BD PEN NEEDLE NANO ULTRAFINE	2	QL	CONTOUR NEXT LINK KIT W/ DEVICE	E	
BD PEN NEEDLE ORIG ULTRAFINE	2	QL	CONTOUR NEXT LINK KIT W/ DEVICE	E	(Contour Next Link 24)
BD PEN NEEDLE SHORT ULTRAFINE	2	QL	CONTOUR NEXT MONITOR KIT W/DEVICE	1	
BD SAFETYGLIDE NEEDLE 23G X 1-1/2"	2		CONTOUR NEXT ONE KIT	1	
BD SAFETYGLIDE SHIELDED NEEDLE 21G X 1-1/2"	2		CONTOUR NEXT TEST STRIPS	1	
BD ULTRA-FINE PEN NEEDLES	2		CONTOUR PLUS BLUE KIT W/ DEVICE	1	
BD ULTRA-FINE PEN NEEDLES	2	QL	CONTOUR PLUS TEST STRIP	1	QL
BD ULTRA-FINE U-500 INSULIN SYRINGES	2		CONTOUR TEST STRIPS	E	QL
BD VEO ULTRA-FINE INSULIN SYRINGES	2		CVS ADVANCED GLUCOSE TEST	E	QL
BD-ULTRA FINE INSULIN SYRINGES	2		CVS GLUCOSE METER TEST STRIPS	E	QL
BIGFOOT UNITY PROGRAM	3		CVS TRUE METRIX GLUCOSE TEST	E	QL
BIOTEL CARE TEST STRIPS	E	QL	D-CARE BLOOD GLUCOSE	E	QL
BLOOD GLUCOSE TEST STRIPS	E	QL	D-CARE GLUCOMETER	E	
BLOOD GLUCOSE TEST STRIPS 333	E	QL	DEXCOM G6 RECEIVER	3	PA, QL
CAREPOINT POLY HUB NEEDLE 18G X 1", 21G X 1", 22G X 1", 23G X 1", 25G X 1", 25G X 5/8"	2		DEXCOM G6 SENSOR	3	PA, QL
CAREPOINT POLY HUB NEEDLE 22G X 1-1/2"	2		DEXCOM G6 TRANSMITTER	3	PA, QL
CAREPOINT SAFETY 1ST NEEDLE	2		DEXCOM G7 RECEIVER	3	PA, QL
CARESENS N PLUS BT	E		DEXCOM G7 SENSOR	3	PA, QL
CARETOUCH MONITOR SYSTEM	E		DIABETES CARE	E	
			DIABETES MONITOR DIGIT ADD-ON	3	
			DIABETES MONITOR DIGIT SOLN	3	
			DROPSAFE SAFETY SYRINGE/ NEEDLE	2	QL

See page 6-8 for coverage details.



Drug Name	Drug Tier	Requirements & Limits	Drug Name	Drug Tier	Requirements & Limits
EASY MAX BLOOD GLUCOSE TEST	E	QL	FREESTYLE LIBRE 3 READER	3	PA
EASY MAX T1 GLUCOSE SYSTEM	E		FREESTYLE LIBRE 3 SENSOR	3	PA, QL
EASY TOUCH HEALTHPRO GLUCOSE	E		FREESTYLE LIBRE READER	3	PA, QL
EASY TOUCH TEST	E	QL	FREESTYLE PRECISION NEO SYSTEM	E	
EASYGLUCO	E		FREESTYLE PRECISION NEO TEST	E	QL
EASYMAX 15 TEST	E	QL	FREESTYLE TEST	E	QL
EASYMAX NG BLOOD GLUCOSE KIT	E		GLUCOCARD EXPRESSION TEST	E	QL
EMBECTA INSULIN SYRINGE	2	QL	GLUCOCARD SHINE TEST	E	QL
EMBRACE BLOOD GLUCOSE TEST	E	QL	GLUCOCARD VITAL TEST	E	QL
EMBRACE WAVE BLOOD GLUCOSE IN VITRO	E	QL	GUARDIAN 4 GLUCOSE SENSOR	3	PA, QL
ENLITE GLUCOSE SENSOR	3	PA	GUARDIAN 4 TRANSMITTER	3	PA, QL
EQ BLOOD GLUCOSE TEST	E	QL	GUARDIAN CONNECT TRANSMITTER	3	PA, QL
EVERSENSE 365 SENSOR/HOLDER	E	PA	GUARDIAN LINK 3 TRANSMITTER	3	PA, QL
EVERSENSE 365 SMART TRANSMIT	E	PA	GUARDIAN REAL-TIME REPLACE PED	3	PA
EVERSENSE E3 SENSOR/HOLDER	E	PA	GUARDIAN SENSOR 3	3	PA, QL
EVERSENSE E3 SMART TRANSMITTER	E	PA	GVOKE HYPOPEN 1-PACK	2	QL
EVERSENSE SENSOR/HOLDER	E	PA	GVOKE HYPOPEN 2-PACK	2	QL
EVERSENSE SMART TRANSMITTER	E	PA	GVOKE KIT	2	
FORA 6 CONNECT/GTEL TEST	E	QL	GVOKE PFS	2	
FORTISCARE G1 TEST STRIP IN VITRO STRIP	E	QL	HEALTHPRO BLOOD GLUCOSE MONITO	E	
FORTISCARE TEST IN VITRO STRIP	E	QL	IHEALTH BLOOD GLUCOSE TEST STR	E	QL
FREESTYLE LIBRE 14 DAY READER	3	PA, QL	IHEALTH GLUCO+ KIT 10	E	
FREESTYLE LIBRE 14 DAY SENSOR	3	PA, QL	IHEALTH GLUCO+ KIT 100	E	
FREESTYLE LIBRE 2 PLUS SENSOR	3	PA	INPEN	3	ST
FREESTYLE LIBRE 2 READER	3	PA, QL	INSULIN PEN NEEDLES 29G X 12MM , 30G X 5 MM , 31G X 5 MM, 31G X 6 MM , 31G X 8 MM , 32G X 4 MM	2	QL
FREESTYLE LIBRE 2 SENSOR	3	PA, QL	INSULIN SYRINGES 27G X 1/2" 0.5 ML, 27G X 1/2" 1 ML, 28G X 1/2" 0.5 ML, 28G X 1/2" 1 ML, 29G X 1/2" 0.5 ML, 29G X 1/2" 1 ML, 30G X 1/2" 1 ML, 30G X 5/16" 0.5 ML, 31G X 5/16" 0.5 ML, 31G X 5/16" 1 ML	2	QL
FREESTYLE LIBRE 3 PLUS SENSOR	3	PA	LANCETS	1	

See page 6-8 for coverage details.



Drug Name	Drug Tier	Requirements & Limits	Drug Name	Drug Tier	Requirements & Limits
MICRODOT TEST	E	QL	ONETOUCH VERIO REFLECT KIT W/DEVICE	E	
MINILINK REAL-TIME TRANSMITTER	3	PA	ONETOUCH VERIO TEST STRIPS	E	QL
MINIMED 630G GUARDIAN PRESS	3	PA	OPTIUMEZ TEST	E	QL
MM BLOOD GLUCOSE SYSTEM	E		PARADIGM REAL-TIME TRANSMITTER	3	PA
MM BLOOD GLUCOSE SYSTEM REFILL	E		PIP BLOOD GLUCOSE TEST STRIP	E	QL
MM BLULINK GLUCOSE TEST	E	QL	PRECISION XTRA BLOOD GLUCOSE	E	QL
MM EASY TOUCH GLUCOSE METER	E		PRECISION XTRA KIT W/DEVICE	E	
MONOJECT HYPODERMIC NEEDLE 18G X1"	2		PREMIUM BLOOD GLUCOSE TEST IN VITRO STRIP	E	QL
NEUTEK 2TEK TEST	E	QL	PTS PANELS EGLU TEST	E	QL
NOVOFINE AUTOCOVER PEN NEEDLE 30G X 8 MM	2	QL	QUICK TOUCH BLOOD GLUCOSE	E	
NOVOFINE PEN NEEDLE	2	QL	QUICK TOUCH BLOOD GLUCOSE TEST	E	QL
NOVOFINE PLUS PEN NEEDLE	2	QL	QUINTET AC BLOOD GLUCOSE TEST	E	QL
NOVOPEN ECHO	3		QUINTET BLOOD GLUCOSE TEST	E	QL
OMNIPOD 5 DEXCOM INTRO KIT	2	PA, QL	RELION GLUCOSE TEST STRIPS	E	QL
OMNIPOD 5 DEXCOM PODS	2	PA	RELION TRUE MET AIR GLUC METER	E	
OMNIPOD 5 DEXCOM PODS	2	PA, QL	RELION TRUE METRIX TEST STRIPS	E	QL
OMNIPOD 5 G7 INTRO (GEN 5) KIT	2	PA, QL	RELION ULTIMA GLUCOSE SYSTEM	E	
OMNIPOD 5 G7 PODS (GEN 5)	2	PA, QL	RELION ULTIMA TEST	E	QL
OMNIPOD 5 LIBRE INTRO KIT	2	PA	RIGHTEST GT333 GLUCOSE TEST	E	QL
OMNIPOD 5 LIBRE PODS	2	PA	SIMPLERA SENSOR	E	PA
ON CALL EXPRESS BLOOD GLUCOSE	E	QL	SIMPLERA SYNC SENSOR	E	PA
ON CALL EXPRESS MONITORING SYS	E		SIMPLERA SYSTEM	E	PA
ONETOUCH ULTRA 2 KIT W/ DEVICE	E		TECHLITE INSULIN SYRINGES	2	QL (Arkay)
ONETOUCH ULTRA BLUE TEST	E	QL	TECHLITE PEN NEEDLES	2	QL (Arkay)
ONETOUCH ULTRA TEST STRIPS	E	QL	TECHLITE PLUS PEN NEEDLES	2	QL (Arkay)
ONETOUCH VERIO FLEX SYSTEM KIT	E		TEMPO REFILL	E	
ONETOUCH VERIO IQ SYSTEM KIT W/DEVICE	E		TEMPO WELCOME	E	
ONETOUCH VERIO KIT W/ DEVICE	E		TRUE FOCUS BLOOD GLUCOSE STRIP	E	QL

See page 6-8 for coverage details.



Drug Name	Drug Tier	Requirements & Limits
TRUE METRIX AIR GLUCOSE METER KIT	E	
TRUE METRIX BLOOD GLUCOSE TEST	E	QL
TRUE METRIX GO GLUCOSE METER	E	
TRUE METRIX METER	E	
TRUE METRIX PRO BLOOD GLUCOSE	E	QL
TWIIST REFILL KIT	2	PA, QL
TWIIST REFILL KIT/INFUSION SET	2	PA, QL
TWIIST STARTER KIT	2	PA, QL
UNISTRIPI1 GENERIC	E	QL
VERISAFE SAFETY STERILE NEEDLE	2	
VIVAGUARD INO GLUCOSE METER KIT	E	
VIVAGUARD INO TEST STRIPS	E	QL
Diabetes - Insulin		
ADMELOG	E	QL
ADMELOG SOLOSTAR	E	QL
BASAGLAR KWIKPEN	E	QL
BASAGLAR TEMPO PEN	E	
HUMALOG CARTRIDGE	2	QL
HUMALOG INJECTION	E	QL
HUMALOG KWIKPEN	2	QL
HUMALOG MIX 50/50 KWIKPEN	2	QL
HUMALOG MIX 50/50 VIAL SUBCUTANEOUS SUSPENSION (50-50) 100 UNIT/ML	1	QL
HUMALOG MIX 75/25 KWIKPEN	2	QL
HUMALOG MIX 75/25 VIAL	1	QL
HUMALOG SUBCUTANEOUS	2	QL
HUMALOG TEMPO PEN	E	QL
HUMALOG U-100 JUNIOR KWIKPEN	2	QL
HUMULIN 70/30 KWIKPEN	2	QL
HUMULIN 70/30 VIAL	1	QL
HUMULIN N KWIKPEN	2	QL
HUMULIN N VIAL	1	QL

Drug Name	Drug Tier	Requirements & Limits
HUMULIN R U-500 KWIKPEN	2	QL
HUMULIN R U-500 VIAL	1	QL
HUMULIN R VIAL	1	QL
INSULIN ASPART	E	ST, QL
INSULIN ASPART FLEXPEN	E	ST, QL
INSULIN DEGLUDEC FLEXTOUCH	E	QL
INSULIN GLARGINE	E	QL
INSULIN GLARGINE MAX SOLOSTAR	E	QL
INSULIN GLARGINE SOLOSTAR	E	QL
INSULIN LISPRO	1	QL
INSULIN LISPRO (1 UNIT DIAL)	2	(Insulin Lispro Kwikpen), QL
INSULIN LISPRO KWIKPEN	2	QL
INSULIN LISPRO PROT & LISPRO	2	QL
LANTUS SOLOSTAR	1	QL
LANTUS U-100 VIAL	1	QL
LYUMJEV KWIKPEN	2	QL
LYUMJEV TEMPO PEN	E	QL
LYUMJEV VIAL	1	QL
NOVOLIN 70/30 FLEXPEN	E	ST, QL
NOVOLIN 70/30 FLEXPEN RELION	E	ST, QL
NOVOLIN 70/30 RELION	E	ST, QL
NOVOLIN 70/30 VIAL	E	ST, QL
NOVOLIN N FLEXPEN	E	ST, QL
NOVOLIN N FLEXPEN RELION	E	ST, QL
NOVOLIN N RELION	E	ST, QL
NOVOLIN N VIAL	E	ST, QL
NOVOLIN R FLEXPEN RELION SOLUTION PEN-INJECTOR 100 UNIT/ML INJECTION	2	QL
NOVOLIN R FLEXPEN RELION SOLUTION PEN-INJECTOR 100 UNIT/ML INJECTION	E	ST, QL
NOVOLIN R FLEXPEN SOLUTION PEN-INJECTOR 100 UNIT/ML INJECTION	2	QL

See page 6-8 for coverage details.



Drug Name	Drug Tier	Requirements & Limits
NOVOLIN R FLEXPEN SOLUTION PEN-INJECTOR 100 UNIT/ML INJECTION	E	ST, QL
NOVOLIN R RELION	E	ST, QL
NOVOLIN R VIAL	E	ST, QL
NOVOLOG FLEXPEN	E	ST, QL
NOVOLOG FLEXPEN RELION	E	ST, QL
NOVOLOG RELION	E	ST, QL
NOVOLOG U-100 VIAL	E	ST, QL
TOUJEO MAX SOLOSTAR	2	QL
TOUJEO SOLOSTAR	2	QL
TRESIBA FLEXTOUCH	E	QL
Diabetes - Non-Insulin Agents		
acarbose oral	1	
ACTOPLUS MET	3	QL
ACTOS	E	QL
ALOGLIPTIN BENZOATE	2	QL
BAQSIMI ONE PACK	2	QL
BAQSIMI TWO PACK	2	QL
BYDUREON BCISE AUTOINJECTOR SUBCUTANEOUS AUTO-INJECTOR 2 MG/0.85ML	2	PA, QL
DAPAGLIFLOZIN PRO-METFORMIN ER	E	ST, QL
DAPAGLIFLOZIN PROPANEDIOL	E	ST, QL
FARXIGA	E	ST, QL
glimepiride oral tablet 1 mg, 2 mg, 4 mg	1	
glimepiride oral tablet 3 mg	E	
glipizide er	1	
glipizide oral tablet 10 mg, 5 mg	1	
glipizide oral tablet 2.5 mg	E	
glipizide xl oral tablet extended release 24 hour 10 mg, 2.5 mg, 5 mg	1	
glipizide-metformin hcl	2	
glucagon emergency kit 1 mg injection	2	QL
GLUCAGON EMERGENCY KIT 1 MG INJECTION	E	QL

Drug Name	Drug Tier	Requirements & Limits
GLUCAGON EMERGENCY KIT for LOW BLOOD SUGAR	2	QL (Fresenius)
GLUCOTROL XL	3	
GLUMETZA ORAL TABLET EXTENDED RELEASE 24 HOUR 1000 MG, 500 MG	E	PA
glyburide oral	1	
glyburide-metformin	1	
GLYXAMBI	2	ST, QL
INVOKANA	E	ST, QL
JANUMET	E	ST, QL
JANUVIA	E	ST, QL
JARDIANCE	2	QL
JENTADUETO	2	QL
JENTADUETO XR	2	QL
KOMBIGLYZE XR ORAL TABLET EXTENDED RELEASE 24 HOUR 2.5-1000 MG, 5-1000 MG, 5-500 MG	E	QL
liraglutide solution pen-injector 18 mg/3ml subcutaneous	1	PA, QL
liraglutide solution pen-injector 18 mg/3ml subcutaneous	2	PA, QL
liraglutide solution pen-injector 18 mg/3ml subcutaneous	3	PA, QL
metformin hcl er	1	
metformin hcl er (mod)	E	PA
metformin hcl er (osm)	E	PA
metformin hcl oral tablet 1000 mg, 500 mg, 850 mg	1	
metformin hcl oral tablet 625 mg, 750 mg	E	
MOUNJARO	2	PA, QL
nateglinide	2	QL
NESINA ORAL TABLET 12.5 MG, 25 MG, 6.25 MG	E	QL
ONGLYZA	E	QL
OZEMPIC SUBCUTANEOUS SOLUTION PEN-INJECTOR 2 MG/3ML	2	PA
OZEMPIC SUBCUTANEOUS SOLUTION PEN-INJECTOR 4 MG/3ML, 8 MG/3ML	2	PA, QL

See page 6-8 for coverage details.



Drug Name	Drug Tier	Requirements & Limits	Drug Name	Drug Tier	Requirements & Limits
pioglitazone hcl	1	QL	HUMATE-P	2	SP
pioglitazone hcl-metformin hcl	2	QL	HYMPAVZI	2	PA, QL, SP
repaglinide	2	QL	IDELVION	3	SP
RYBELSUS	2	PA, QL	KOATE	2	SP
saxagliptin hcl	2	QL	KOATE-DVI	2	SP
saxagliptin-metformin er	2	QL	KOGENATE FS	2	SP
SOLQUA	2	QL	KOVALTRY	2	SP
SYMLINPEN 120	3	QL	NEULASTA	2	
SYMLINPEN 60	3	QL	NIVESTYM	2	
SYNJARDY	2	QL	NOVOEIGHT	2	SP
SYNJARDY XR	2	QL	NUWIQ INTRAVENOUS KIT 1000 UNIT, 2000 UNIT, 250 UNIT, 2500 UNIT, 3000 UNIT, 4000 UNIT, 500 UNIT	2	SP
TRADJENTA	2	QL	NUWIQ INTRAVENOUS KIT 1500 UNIT	2	
TRIJARDY XR	2	QL	NYVEPRIA	E	
TRULICITY	2	PA, QL	RECOMBINATE	2	SP
XIGDUO XR	E	ST, QL	RETACRIT INJECTION SOLUTION 10000 UNIT/ML, 2000 UNIT/ML, 3000 UNIT/ML, 4000 UNIT/ML, 40000 UNIT/ML	2	QL, SP
ZEGALOGUE SUBCUTANEOUS SOLUTION AUTO-INJECTOR	2	QL	RETACRIT INJECTION SOLUTION 20000 UNIT/ML	2	
Drugs for Blood Disorders			TAVALISSE	3	PA, QL, SP
ADVATE	2	SP	tranexamic acid oral	2	QL
ADYNOVATE	3	PA, SP	UDENYCA SUBCUTANEOUS SOLUTION AUTO-INJECTOR	2	
AFSTYLA INTRAVENOUS KIT 1000 UNIT, 2000 UNIT, 250 UNIT, 3000 UNIT, 500 UNIT	3	PA	VOYDEYA	2	PA, QL, SP
AFSTYLA INTRAVENOUS KIT 1500 UNIT, 2500 UNIT	3	PA, SP	WILATE	2	
ALPHANATE	2	SP	ZARXIO	2	
ALPROLIX	3	SP	Drugs for Sexual Dysfunction		
ALTUVIIIO	3	PA, SP	ADDYI	3	PA, QL
ALVAIZ	3	PA, SP	avanafil	3	PA, QL
ARANESP (ALBUMIN FREE)	2	QL, SP	CIALIS	E	QL
DOPTELET	3	PA, QL, SP	IMVEXXY MAINTENANCE PACK	2	QL
ELOCTATE	3	PA, SP	IMVEXXY STARTER PACK	2	QL
FABHALTA	2	PA, QL, SP	INTRAROSA	3	PA, QL
HEMLIBRA SUBCUTANEOUS SOLUTION 105 MG/0.7ML, 150 MG/ML, 30 MG/ML, 300 MG/2ML, 60 MG/0.4ML	2	PA, SP	OSPHERA	3	PA, QL
HEMLIBRA SUBCUTANEOUS SOLUTION 12 MG/0.4ML	E	PA, SP	sildenafil citrate oral tablet 100 mg, 25 mg, 50 mg	2	QL
HEMOFIL M	2	SP			

See page 6-8 for coverage details.



Drug Name	Drug Tier	Requirements & Limits	Drug Name	Drug Tier	Requirements & Limits
STENDRA	3	PA, QL	levocarnitine oral solution	1	
tadalafil oral	2	QL	levocarnitine sf	1	
varidenafil hcl oral tablet	3	QL	LOKELMA	3	PA, QL
VIAGRA	E	QL	M-NATAL PLUS	3	
VYLEESI	3	PA, QL	multivitamin w/fluoride tablet chewable 0.25 mg oral	1	
Electrolytes / Vitamins			multivitamin w/fluoride tablet chewable 0.25 mg oral	E	
ACCRUFER	E		multivitamin w/fluoride tablet chewable 0.5 mg oral	1	
CARNITOR ORAL SOLUTION	3		multivitamin w/fluoride tablet chewable 0.5 mg oral	E	
CARNITOR SF	3		multivitamin w/fluoride tablet chewable 1 mg oral	1	
CO-NATAL FA	2		multivitamin w/fluoride tablet chewable 1 mg oral	E	
cvs prenatal	E		multi-vitamin/fluoride	1	
cyanocobalamin injection solution 1000 mcg/ml	1		multivitamin/fluoride oral tablet chewable	1	
CYANOCOBALAMIN INJECTION SOLUTION 2000 MCG/ML	3		MULTI-VIT-FLOR	E	
cyanocobalamin nasal	3		NASCOBAL	3	
DAVIMET-FLUORIDE	E		NEONATAL COMPLETE	3	
DENTA 5000 PLUS SENSITIVE	3		NEONATAL PLUS	3	
DODEX INJECTION SOLUTION 1000 MCG/ML	3		NEONATAL PRENATAL	E	
DRISDOL	3		NEONATAL VITAMIN	E	
ergocalciferol oral capsule	1		NIVA-PLUS	3	
FLORAFOL PEDIATRIC ORAL SOLUTION 0.25 MG/ML	3		ONE VITE WOMENS	E	
FLORAFOL PEDIATRIC ORAL TABLET CHEWABLE 0.5 MG, 1 MG	E		ONE VITE WOMENS PLUS	3	
FLORIVA PLUS	E		ORACIT	2	
FLOTREX	E		ORAL CITRATE	2	
FLUORIMAX 5000 SENSITIVE	3		PHOSPHA 250 NEUTRAL	2	
folic acid oral tablet 1 mg	1		phosphorous	1	
FRAICHE 5000 SENSITIVE DENTAL GEL 1.1-4.5 %	E		phospho-trin 250 neutral	1	
klor-con	1		pnv 27-ca/fe/fa	1	
klor-con 10	1		POKONZA	E	
klor-con m10	1		POLY-VI-FLOR ORAL TABLET CHEWABLE	E	
klor-con m15	1		potassium chloride crys er	1	
klor-con m20	1		potassium chloride er	1	
K-PHOS-NEUTRAL	2		potassium chloride oral	1	
K-TAB ORAL TABLET EXTENDED RELEASE 10 MEQ, 20 MEQ	3				

See page 6-8 for coverage details.



Drug Name	Drug Tier	Requirements & Limits
potassium citrate er	1	
prenatal oral tablet 27-0.8 mg	E	
prenatal oral tablet 27-1 mg	1	
prenatal plus	1	
prenatal plus vitamin/mineral	1	
prenatal vitamins oral tablet 27-0.8 mg	E	
PRENATE MINI	3	
PRENATOL-M	E	
PRENATRIX	E	
PRENATRYL	E	
PREVIDENT 5000 ENAMEL PROTECT	3	
PREVIDENT 5000 SENSITIVE	3	
QUFLORA PEDIATRIC	3	
sod citrate-citric acid oral solution 500-334 mg/5ml	1	
sod fluoride-potassium nitrate	1	
sodium fluoride 5000 enamel	1	
sodium fluoride 5000 sensitive	1	
sodium fluoride oral solution	1	H
sodium fluoride oral tablet chewable	1	H
TRICARE ORAL TABLET	3	
TRINATAL RX 1	3	
TRINATE	3	
tri-vite/fluoride	1	
UROCIT-K 10	3	
UROCIT-K 15	3	
UROCIT-K 5 ORAL TABLET EXTENDED RELEASE 5 MEQ (540 MG)	3	
VELTASSA	3	PA, QL
VITAFOL FE+	3	
VITAFOL ULTRA	3	
VITAFOL-OB	3	
vitamin d (ergocalciferol) oral capsule 1.25 mg (50000 ut), 50000 unit	1	
VITATHELY WITH GINGER	3	

Drug Name	Drug Tier	Requirements & Limits
wes-phos 250 neutral	1	
WESTAB PLUS	E	
Gastrointestinal Agents - Drugs for Acid Reflux and Ulcer		
ACIPHEX	E	QL
bis subcit-metronid-tetracyc	3	QL
bismuth/metronidaz/tetracyclin	3	QL
CARAFATE	E	
cimetidine oral	1	
CYTOTEC	3	
DEXILANT	E	QL
dexlansoprazole	E	QL
esomeprazole magnesium oral capsule delayed release	E	QL
esomeprazole magnesium oral packet	3	PA, ST, QL
famotidine oral suspension reconstituted	1	
famotidine oral tablet 20 mg, 40 mg	E	
lansoprazole oral capsule delayed release	E	QL
lansoprazole oral tablet delayed release dispersible	3	PA, ST, QL
misoprostol oral	1	
NEXIUM ORAL CAPSULE DELAYED RELEASE	E	QL
NEXIUM ORAL PACKET	3	PA, ST, QL
OMECLAMOX-PAK	3	QL
omeprazole oral capsule delayed release	1	
pantoprazole sodium oral tablet delayed release	1	
PEPCID	E	
PREVACID	E	QL
PREVACID SOLUTAB	E	PA, ST, QL
PROTONIX ORAL TABLET DELAYED RELEASE	E	
PYLERA	3	QL
rabeprazole sodium oral tablet delayed release	2	QL

See page 6-8 for coverage details.



Drug Name	Drug Tier	Requirements & Limits	Drug Name	Drug Tier	Requirements & Limits
sucralfate oral suspension	3		lactulose oral solution	1	
sucralfate oral tablet	1		LEVBIID	3	
VOQUEZNA	3	PA, QL	LEVSIN	3	
VOQUEZNA DUAL PAK	3	ST, QL	LEVSIN/SL	3	
VOQUEZNA TRIPLE PAK	3	ST, QL	LIBRAX	E	
Gastrointestinal Agents - Drugs for Bowel, Intestine and Stomach Conditions			LINZESS	2	PA, QL
AMITIZA	E	PA, QL	LIVDELZI	3	PA, ST, QL, SP
ANASPAZ	2		LOMOTIL	3	
BYLVAY	3	PA, QL, SP	loperamide hcl oral capsule	E	
BYLVAY (PELLETS)	3	PA, QL, SP	lubiprostone	2	PA, QL
chlordiazepoxide-clidinium	3		MOTEGRITY	E	PA, QL
CLENPIQ	3	QL	MOVIPREP	3	QL
constulose	1		na sulfate-k sulfate-mg sulf	3	QL
cromolyn sodium oral	1		NULEV	3	
dicyclomine hcl oral capsule	1		OSCIMIN	3	
dicyclomine hcl oral tablet 20 mg	1		peg 3350-kcl-na bicarb-nacl	1	QL, H
diphenoxylate-atropine oral tablet	1		peg-3350/electrolytes	1	QL, H
enulose	1		peg-3350/electrolytes/ascorbat	3	QL
GASTROCROM	E		peg-kcl-nacl-nasulf-na asc-c	3	QL
gavilyte-c	1	H	PLENVU	3	QL
gavilyte-g	1	QL, H	prucalopride succinate	3	PA, QL
gavilyte-n with flavor pack	1	QL, H	RELTONE	E	
generlac	1		REZDIFFRA	3	PA, QL
GLYCATE	E		ROBINUL ORAL TABLET 1 MG	E	
glycopyrrolate oral tablet 1 mg, 2 mg	1		ROBINUL-FORTE ORAL TABLET 2 MG	E	
GLYCOPYRROLATE ORAL TABLET 1.5 MG	E		SUFLAVE	3	QL
GOLYTELY	1	QL, H	SUPREP BOWEL PREP KIT	3	QL
hyoscyamine sulfate er	1		SUTAB	3	
hyoscyamine sulfate oral tablet	1		SYMPROIC	2	PA, QL
hyoscyamine sulfate oral tablet dispersible	1		TRULANCE	E	PA, ST, QL
hyoscyamine sulfate sublingual	1		URSO 250 ORAL TABLET 250 MG	E	
IBSRELA	E	PA, ST, QL	URSO FORTE	E	
IQIRVO	3	PA, ST, QL, SP	URSODIOL ORAL CAPSULE 200 MG, 400 MG	E	
lactulose encephalopathy	1		ursodiol oral capsule 300 mg	1	
			ursodiol oral tablet	1	
			VIBERZI	3	PA, QL

See page 6-8 for coverage details.



Drug Name	Drug Tier	Requirements & Limits
Genetic or Enzyme Disorder - Drugs for Replacement, Modification, Treatment		
ATTRUBY	2	PA, QL, SP
CARNITOR ORAL TABLET	3	
CERDELGA	2	PA, SP
CREON	2	
DEPEN TITRATABS	2	SP
EVRYSDI ORAL SOLUTION RECONSTITUTED	2	PA, QL, SP
JYNARQUE ORAL TABLET THERAPY PACK 15 MG, 45 & 15 MG, 60 & 30 MG, 90 & 30 MG	E	PA, QL, SP
JYNARQUE ORAL TABLET THERAPY PACK 30 & 15 MG	E	PA, QL
levocarnitine oral tablet	1	
ORFADIN	2	PA, SP
PANCREAZE	3	ST
PERTZYE	3	ST
STRENSIQ	2	PA, QL, SP
SUCRAID	2	PA, SP
TEGSEDI SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 284 MG/1.5ML	2	PA, QL, SP
tolvaptan oral tablet therapy pack 15 mg, 45 & 15 mg, 60 & 30 mg, 90 & 30 mg	2	PA, QL, SP
tolvaptan oral tablet therapy pack 30 & 15 mg	2	PA, QL
VYNDAMAX	2	PA, QL, SP
ZENPEP	2	
Genitourinary Agents - Drugs for Bladder, Genital and Kidney Conditions		
bethanechol chloride oral	1	
calcium acetate (phos binder) oral capsule	1	
DETROL	E	
DETROL LA ORAL CAPSULE EXTENDED RELEASE 24 HOUR 2 MG, 4 MG	E	
DITROPAN XL ORAL TABLET EXTENDED RELEASE 24 HOUR 5 MG	E	

Drug Name	Drug Tier	Requirements & Limits
ELMIRON	3	ST
GEMTESA	E	
mirabegron er	3	ST
MYRBETRIQ ORAL TABLET EXTENDED RELEASE 24 HOUR	E	
oxybutynin chloride er	2	
oxybutynin chloride oral solution	1	
oxybutynin chloride oral tablet 2.5 mg	3	
oxybutynin chloride oral tablet 5 mg	1	
phenazo oral tablet 200 mg	1	
phenazopyridine hcl oral tablet 100 mg, 200 mg	1	
PYRIDIUM	3	
REVELA ORAL TABLET	E	
sevelamer carbonate oral tablet	2	
solifenacin succinate	2	
tolterodine tartrate	3	
tolterodine tartrate er	E	
tropium chloride	3	
tropium chloride er	E	
VANRAFIA	3	PA, SP
VELPHORO	3	ST
VESICARE	E	
Genitourinary Agents - Drugs for Prostate Conditions		
alfuzosin hcl er	1	
AVODART	E	
dutasteride oral	2	
finasteride oral tablet 5 mg	1	
FLOMAX ORAL CAPSULE 0.4 MG	E	
PROSCAR	E	
RAPAFLO	E	
silodosin	3	
tamsulosin hcl	1	
terazosin hcl	1	
UROXATRAL	E	

See page 6-8 for coverage details.



Drug Name	Drug Tier	Requirements & Limits
Hormonal Agents - Hormone Replacement and Birth Control		
abigale	2	
abigale lo	2	
ACTIVELLA	3	
afirmelle	1	H
ALORA	3	QL
altavera	1	H
alyacen 1/35	1	H
alyacen 7/7/7	1	H
amabelz oral tablet 0.5-0.1 mg, 1-0.5 mg	2	
amethia oral tablet 0.15-0.03 & 0.01 mg	1	H
ANNOVERA	3	QL
apri	1	H
aranelle	1	H
ashlyna	1	H
aubra eq	1	H
aurovela 1.5/30	1	H
aurovela 1/20	1	H
aurovela 24 fe	1	H
aurovela fe 1.5/30	1	H
aurovela fe 1/20	1	H
aviane	1	H
AYGESTIN ORAL TABLET 5 MG	3	
ayuna	1	H
azurette	1	H
balziva	1	H
BEYAZ	E	
BIJUVA	3	
blisovi 24 fe	1	H
blisovi fe 1.5/30	1	H
blisovi fe 1/20	1	H
briellyn	1	H
camila	1	H
camrese	1	H
camrese lo	1	H
charlotte 24 fe	1	H

Drug Name	Drug Tier	Requirements & Limits
chateal eq	1	H
CLIMARA	E	QL
CLIMARA PRO	3	QL
COMBIPATCH	3	QL
COVARYX	2	
COVARYX HS	3	
cryselle-28	1	H
cyred eq	1	H
dasetta 1/35 (28)	1	H
dasetta 7/7/7	1	H
daysee	1	H
deblitane	1	H
DELESTROGEN	3	
delyla	1	H
DEPO-PROVERA	3	QL
DEPO-SUBQ PROVERA 104	1	QL, H
desogestrel-ethinyl estradiol	1	H
DIVIGEL	3	
dotti	2	QL
drospiren-eth estrad-levomefol oral tablet 3-0.02-0.451 mg	E	
drospiren-eth estrad-levomefol oral tablet 3-0.03-0.451 mg	1	H
drospirenone-ethinyl estradiol	3	
DUAVEE	3	QL
EEMT	2	
EEMT HS	3	
ELESTRIN	3	
elinest	1	H
ELLA	1	QL, H
eluryng	1	H
emzahh	1	H
enilloring	1	H
enpresse-28	1	H
enskyce	1	H
errin	1	H
est estrogens-methyltest	1	
est estrogens-methyltest ds	1	

See page 6-8 for coverage details.



Drug Name	Drug Tier	Requirements & Limits	Drug Name	Drug Tier	Requirements & Limits
junel 1.5/30	1	H	lyleq	1	H
junel 1/20	1	H	lyllana	2	QL
junel fe 1.5/30	1	H	lyza	1	H
junel fe 1/20	1	H	marlissa	1	H
junel fe 24	1	H	medroxyprogesterone acetate intramuscular	1	QL, H
kalliga	1	H	medroxyprogesterone acetate oral	1	
kariva	1	H	megestrol acetate oral tablet	1	
kelnor 1/35	1	H	meleya	1	H
kelnor 1/50	1	H	MENOSTAR	3	QL
kurvelo	1	H	mibelas 24 fe	1	H
larin 1.5/30	1	H	microgestin 1.5/30	1	H
larin 1/20	1	H	microgestin 1/20	1	H
larin 24 fe	1	H	microgestin 24 fe oral tablet 1-20 mg-mcg	1	H
larin fe 1.5/30	1	H	microgestin fe 1.5/30	1	H
larin fe 1/20	1	H	microgestin fe 1/20	1	H
leena	1	H	mili	1	H
lessina	1	H	mimvey	1	
levonest	1	H	MINASTRIN 24 FE ORAL TABLET CHEWABLE 1-20 MG-MCG(24)	E	
levonorgest-eth est & eth est oral tablet 42-21-21-7 days	1	H	MINIVELLE	E	QL
levonorgest-eth estrad 91-day oral tablet 0.1-0.02 & 0.01 mg, 0.15-0.03 & 0.01 mg	1	H	MIRCETTE ORAL TABLET 0.15-0.02/0.01 MG (21/5)	E	
levonorgest-eth estrad 91-day oral tablet 0.15-0.03 mg	2	H	mono-lynyah	1	H
levonorgestrel-ethinyl estrad oral tablet 0.1-20 mg-mcg, 0.15-30 mg-mcg	1	H	MYFEMBREE	2	PA, QL
levonorg-eth estrad triphasic	1	H	NATAZIA	1	
levora 0.15/30 (28)	1	H	necon 0.5/35 (28)	1	H
LO LOESTRIN FE	1	H	NEXTSTELLIS	E	
LOESTRIN 1.5/30 (21)	E		nikki	3	
LOESTRIN 1/20 (21)	E		nora-be	1	H
LOESTRIN FE 1.5/30	E		norelgestromin-eth estradiol	3	H
LOESTRIN FE 1/20	E		norethin ace-eth estrad-fe oral tablet	1	H
lojaimiess	1	H	norethin ace-eth estrad-fe oral tablet chewable	1	H
loryna	3		norethindrone acetate oral	1	
low-ogestrel	1	H	norethindrone acet-ethinyl est	1	H
lo-zumandimine	3		norethindrone oral	1	H
lutra	1	H			

See page 6-8 for coverage details.



Drug Name	Drug Tier	Requirements & Limits
norethindrone-eth estradiol	1	
norethindron-ethinyl estrad-fe oral tablet 1-20/1-30/1-35 mg-mcg	1	H
norgestimate-eth estradiol oral tablet 0.25-35 mg-mcg	1	H
norgestimate-ethinyl estradiol triphasic oral tablet 0.18/0.215/0.25 mg-25 mcg	2	
norgestimate-ethinyl estradiol triphasic oral tablet 0.18/0.215/0.25 mg-35 mcg	1	H
norlyroc	1	H
nortrel 0.5/35 (28)	1	H
nortrel 1/35 (21)	1	H
nortrel 1/35 (28)	1	H
nortrel 7/7/7	1	H
NUVARING	E	
nylia 1/35	1	H
nylia 7/7/7	1	H
nymyo oral tablet 0.25-35 mg-mcg	1	H
ocella	3	
PHEXXI	E	PA
philith	1	H
pimtrea	1	H
portia-28	1	H
PREMARIN ORAL	3	
PREMARIN VAGINAL	3	
PREMPHASE	3	
PREMPRO	3	
progesterone intramuscular	1	
progesterone oral	2	
PROMETRIUM	E	
PROVERA	3	
QUARTETTE ORAL TABLET 42-21-21-7 DAYS	E	
reclipsen	1	H
rivelsa	1	H
rosyrah	1	H
SAFYRAL	E	

Drug Name	Drug Tier	Requirements & Limits
SEASONIQUE ORAL TABLET 0.15-0.03 & 0.01 MG	E	
setlakin	2	H
sharobel	1	H
simliya	1	H
simpesse	1	H
SLYND	3	PA, ST
sprintec 28	1	H
sronyx	1	H
syeda	3	
tarina 24 fe	1	H
tarina fe 1/20 eq	1	H
tilia fe	1	H
tri-estarylla	1	H
tri-legest fe	1	H
tri-linyah	1	H
tri-lo-estarylla	2	
tri-lo-marzia	2	
tri-lo-mili	2	
tri-lo-sprintec	2	
tri-mili	1	H
tri-nymyo oral tablet 0.18/0.215/0.25 mg-35 mcg	1	H
tri-sprintec	1	H
trivora (28)	1	H
tri-vylibra	1	H
tri-vylibra lo	2	
turqoz	1	H
TWIRLA	E	
TYBLUME	1	
tydemy oral tablet 3-0.03-0.451 mg	1	H
VAGIFEM	E	
valtya 1/50	1	H
velivet	1	H
vestura	3	
vienva	1	H
viorele	1	H
VIVELLE-DOT	E	QL

See page 6-8 for coverage details.



Drug Name	Drug Tier	Requirements & Limits
volnea	1	H
vyfemla	1	H
vylibra	1	H
wera	1	H
xarah fe	1	H
xulane	3	H
YASMIN 28	2	
YAZ	2	
yuvaferm	2	
zafemy	3	H
zovia 1/35 (28)	1	H
zumandimine	3	
Hormonal Agents - Oral Steroids		
CORTEF	3	
DEXABLISS ORAL TABLET THERAPY PACK 1.5 MG (39)	E	
dexamethasone intensol	1	
dexamethasone oral elixir	1	
dexamethasone oral solution	1	
dexamethasone oral tablet	1	
dexamethasone oral tablet therapy pack	3	
DXEVO 11-DAY ORAL TABLET THERAPY PACK 1.5 MG	E	
fludrocortisone acetate oral	1	
HEMADY	E	
HIDEX 6-DAY	E	
hydrocortisone oral	1	
MEDROL ORAL TABLET 16 MG, 4 MG, 8 MG	3	
MEDROL ORAL TABLET 2 MG	2	
MEDROL ORAL TABLET THERAPY PACK	3	
methylprednisolone oral	1	
PEDIAPRED	2	
prednisolone oral solution	1	
prednisolone sodium phosphate oral solution 10 mg/5ml, 25 mg/5ml, 5 mg/5ml	E	

Drug Name	Drug Tier	Requirements & Limits
prednisolone sodium phosphate oral solution 15 mg/5ml	1	
prednisolone sodium phosphate oral solution 20 mg/5ml	E	QL
prednisone oral	1	
TAPERDEX 12-DAY	3	
TAPERDEX 6-DAY ORAL TABLET THERAPY PACK 1.5 MG	3	
TAPERDEX 6-DAY ORAL TABLET THERAPY PACK 1.5 MG (21)	3	
TAPERDEX 7-DAY	3	
Hormonal Agents - Other		
cabergoline	2	
DDAVP ORAL	E	
desmopressin acetate oral	1	
desmopressin acetate spray	1	
leuprolide acetate injection	1	PA
megestrol acetate oral suspension 40 mg/ml	1	
NGENLA	3	PA, QL, SP
NOC DURNA SUBLINGUAL TABLET SUBLINGUAL 27.7 MCG, 55.3 MCG	3	PA, QL
NORDITROPIN FLEXPPO	2	PA, QL, SP
NUTROPIN AQ NUSPIN 10	E	PA, QL, SP
NUTROPIN AQ NUSPIN 20	E	PA, QL, SP
NUTROPIN AQ NUSPIN 5	E	PA, QL, SP
OMNITROPE	2	PA, QL, SP
ORIAHNN	2	PA, QL
ORILISSA	2	PA, QL
SKYTROFA	3	PA, QL, SP
Hormonal Agents - Testosterone Replacement		
ANDROGEL PUMP	E	PA, QL
DEPO-TESTOSTERONE INTRAMUSCULAR SOLUTION 100 MG/ML	3	
DEPO-TESTOSTERONE INTRAMUSCULAR SOLUTION 200 MG/ML	3	
FORTESTA TRANSDERMAL GEL 10 MG/ACT (2%)	E	PA, QL

See page 6-8 for coverage details.



Drug Name	Drug Tier	Requirements & Limits
JATENZO	E	QL
KYZATREX	3	PA, QL
NATESTO	E	PA, QL
TESTIM	2	PA, QL
TESTOSTERONE CYPIONATE INJECTION	E	
testosterone cypionate intramuscular	1	
testosterone enanthate intramuscular	1	
testosterone gel 12.5 mg/act (1%) transdermal	3	PA, QL
testosterone gel 12.5 mg/act (1%) transdermal	E	PA, QL
testosterone gel 20.25 mg/act (1.62%) transdermal	2	PA, QL
testosterone gel 20.25 mg/act (1.62%) transdermal	E	PA, QL
testosterone transdermal gel 1.62 %	2	PA, QL
testosterone transdermal gel 10 mg/act (2%), 20.25 mg/1.25gm (1.62%), 25 mg/2.5gm (1%), 40.5 mg/2.5gm (1.62%), 50 mg/5gm (1%)	E	PA, QL
TLANDO	E	PA, QL
UNDECATREX	E	PA, QL
VOGELXO	E	PA, QL
VOGELXO PUMP	E	PA, QL
XYOSTED	E	PA, QL
Hormonal Agents - Thyroid		
ADTHYZA	E	
ARMOUR THYROID	3	
CYTOMEL	E	
ERMEZA	2	PA
euthyrox	1	
levo-t	1	
LEVOTHYROXINE SODIUM ORAL CAPSULE	E	
levothyroxine sodium oral tablet	1	
levoxyl	2	

Drug Name	Drug Tier	Requirements & Limits
liothyronine sodium oral	2	
methimazole oral	1	
NIVA THYROID	3	
np thyroid	1	
propylthiouracil oral	1	
RENTHYROID	3	
SYNTHROID	E	
THYQUIDITY	E	PA
thyroid oral	1	
TIROSINT	E	
TIROSINT-SOL	2	PA
unithroid	1	
Immunological Agents - Drugs for Immune System Stimulation or Suppression		
ABRILADA (1 PEN) SUBCUTANEOUS AUTO-INJECTOR KIT 40 MG/0.8ML	E	PA, SP
ABRILADA (1 PEN) SUBCUTANEOUS AUTO-INJECTOR KIT 40 MG/0.8ML	E	PA, QL, SP
ABRILADA (2 PEN) SUBCUTANEOUS AUTO-INJECTOR KIT 40 MG/0.8ML	E	PA, SP
ABRILADA (2 PEN) SUBCUTANEOUS AUTO-INJECTOR KIT 40 MG/0.8ML	E	PA, QL, SP
ABRILADA (2 SYRINGE)	E	PA, QL, SP
ACTEMRA ACTPEN	3	PA, ST, QL, SP
ACTEMRA SUBCUTANEOUS	3	PA, ST, QL, SP
ADALIMUMAB-AACF (2 PEN)	E	PA, (Manufactured by Fresenius), SP
ADALIMUMAB-AACF (2 SYRINGE)	E	PA, (Manufactured by Fresenius), QL, SP
ADALIMUMAB-AACF(CD/UC/HS STRT)	E	PA, (Manufactured by Fresenius), SP

See page 6-8 for coverage details.



Drug Name	Drug Tier	Requirements & Limits	Drug Name	Drug Tier	Requirements & Limits
ADALIMUMAB-AACF(PS/UV STARTER)	E	PA, (Manufactured by Fresenius), SP	ADALIMUMAB-ADB (2 SYRINGE) PREFILLED SYRINGE KIT 40 MG/0.4ML SUBCUTANEOUS	E	PA, (Manufactured by Boehringer Ingelheim), QL, SP
ADALIMUMAB-AATY (1 PEN) SUBCUTANEOUS AUTO-INJECTOR KIT 40 MG/0.4ML	E	PA, (Manufactured by Celltrion), QL, SP	ADALIMUMAB-ADB (2 SYRINGE) PREFILLED SYRINGE KIT 40 MG/0.8ML SUBCUTANEOUS	E	PA, (Manufactured by Boehringer Ingelheim), QL, SP
ADALIMUMAB-AATY (1 PEN) SUBCUTANEOUS AUTO-INJECTOR KIT 80 MG/0.8ML	E	PA, (Manufactured by Celltrion), SP	ADALIMUMAB-ADB (2 SYRINGE) SUBCUTANEOUS PREFILLED SYRINGE KIT 10 MG/0.2ML, 20 MG/0.4ML	E	PA, (Manufactured by Boehringer Ingelheim), QL, SP
ADALIMUMAB-AATY (2 PEN)	E	PA, (Manufactured by Celltrion), QL, SP	ADALIMUMAB-ADB(CD/UC/HS STRT)	E	PA, (Manufactured by Boehringer Ingelheim), QL, SP
ADALIMUMAB-AATY (2 SYRINGE)	E	PA, (Manufactured by Celltrion), QL, SP	ADALIMUMAB-ADB(PS/UV STARTER)	E	PA, (Manufactured by Boehringer Ingelheim), QL, SP
ADALIMUMAB-AATY CD/UC/HS START	E	PA, (Manufactured by Celltrion), SP	ADALIMUMAB-FKJP (2 PEN)	E	PA, (Manufactured by Biocon), QL, SP
ADALIMUMAB-ADAZ SUBCUTANEOUS SOLUTION AUTO-INJECTOR 40 MG/0.4ML	2	PA, (manufactured by Sandoz), QL, SP	ADALIMUMAB-FKJP (2 SYRINGE)	E	PA, (Manufactured by Biocon), QL, SP
ADALIMUMAB-ADAZ SUBCUTANEOUS SOLUTION AUTO-INJECTOR 80 MG/0.8ML	2	PA, (manufactured by Sandoz), SP	ADBRY SOLUTION AUTO-INJECTOR	2	PA, QL, SP
ADALIMUMAB-ADAZ SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	2	PA, (manufactured by Sandoz), QL, SP	ADBRY SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	2	PA, QL, SP
ADALIMUMAB-ADB (2 PEN) AUTO-INJECTOR KIT 40 MG/0.4ML SUBCUTANEOUS	E	PA, (Manufactured by Boehringer Ingelheim), QL, SP	AMJEVITA 40 MG/0.4ML, 80 MG/0.8ML	2	PA, QL, SP
ADALIMUMAB-ADB (2 PEN) AUTO-INJECTOR KIT 40 MG/0.8ML SUBCUTANEOUS	E	PA, (Manufactured by Boehringer Ingelheim), QL, SP	AMJEVITA 40 MG/0.8ML	E	PA, QL, SP
			AMJEVITA-PED 10KG TO <15KG SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 10MG/0.2ML	E	PA, QL, SP
			AMJEVITA-PED 15KG TO <30KG SOLUTION PREFILLED SYRINGE 20 MG/0.2ML SUBCUTANEOUS	2	PA, SP

See page 6-8 for coverage details.



Drug Name	Drug Tier	Requirements & Limits	Drug Name	Drug Tier	Requirements & Limits
AMJEVITA-PED 15KG TO <30KG SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 20 MG/0.4ML	E	PA, QL, SP	ENBREL	2	PA, QL, SP
ARAVA	E		ENBREL MINI	2	PA, QL, SP
AZASAN	3		ENBREL SURECLICK	2	PA, QL, SP
azathioprine oral tablet 100 mg, 75 mg	3		ENTYVIO PEN	2	PA, (SUBCUTANEOUS), QL, SP
azathioprine oral tablet 50 mg	1		ENVARUS XR	E	
BENLYSTA SUBCUTANEOUS SOLUTION AUTO-INJECTOR	2	PA, QL, SP	everolimus oral tablet 0.25 mg, 0.5 mg, 0.75 mg, 1 mg	3	
BIMZELX	3	PA, ST, QL, SP	gengraf oral capsule	1	
CELLCEPT ORAL CAPSULE	E		HADLIMA	E	PA, QL, SP
CELLCEPT ORAL TABLET	E		HADLIMA PUSHTOUCH	E	PA, QL, SP
CIMZIA (2 SYRINGE)	2	PA, QL, SP	HAEGARDA	2	PA, QL, SP
CIMZIA-STARTER	2	PA, QL, SP	HULIO (2 PEN)	E	PA, QL, SP
CINRYZE	E	PA, QL, SP	HULIO (2 SYRINGE)	E	PA, QL, SP
COSENTYX (300 MG DOSE)	2	PA, QL, SP	HUMIRA (1 PEN)	E	PA, QL, SP
COSENTYX 150 MG/ML SUBCUTANEOUS	2	PA, QL, SP	HUMIRA (2 PEN) AUTO-INJECTOR KIT 40 MG/0.4ML SUBCUTANEOUS	E	PA, QL, SP
COSENTYX SENSOREADY (300 MG)	2	PA, QL, SP	HUMIRA (2 PEN) AUTO-INJECTOR KIT 80 MG/0.8ML SUBCUTANEOUS	E	PA, QL, SP
COSENTYX SENSOREADY PEN	2	PA, QL, SP	HUMIRA (2 PEN) SUBCUTANEOUS AUTO-INJECTOR KIT 40 MG/0.8ML	E	PA, QL, SP
COSENTYX UNOREADY	2	PA, QL, SP	HUMIRA (2 SYRINGE) PREFILLED SYRINGE KIT 10 MG/0.1ML SUBCUTANEOUS	E	PA, QL, SP
cyclosporine modified oral capsule	1		HUMIRA (2 SYRINGE) PREFILLED SYRINGE KIT 20 MG/0.2ML SUBCUTANEOUS	E	PA, QL, SP
CYLTEZO (2 PEN)	E	PA, QL, SP	HUMIRA (2 SYRINGE) PREFILLED SYRINGE KIT 40 MG/0.4ML SUBCUTANEOUS	E	PA, QL, SP
CYLTEZO (2 SYRINGE)	E	PA, QL, SP	HUMIRA (2 SYRINGE) SUBCUTANEOUS PREFILLED SYRINGE KIT 40 MG/0.8ML	E	PA, QL, SP
CYLTEZO-CD/UC/HS STARTER SUBCUTANEOUS AUTO-INJECTOR KIT 40 MG/0.4ML	E	PA, SP	HUMIRA-CD/UC/HS STARTER	E	PA, QL, SP
CYLTEZO-CD/UC/HS STARTER SUBCUTANEOUS AUTO-INJECTOR KIT 40 MG/0.8ML	E	PA, QL, SP	HUMIRA-PED<40KG CROHNS STARTER SUBCUTANEOUS PREFILLED SYRINGE KIT 80 MG/0.8ML & 40MG/0.4ML	E	PA, QL, SP
CYLTEZO-PSORIASIS/UV STARTER SUBCUTANEOUS AUTO-INJECTOR KIT 40 MG/0.4ML	E	PA, SP			
CYLTEZO-PSORIASIS/UV STARTER SUBCUTANEOUS AUTO-INJECTOR KIT 40 MG/0.8ML	E	PA, QL, SP			
EMPAVELI	2	PA, QL, SP			

See page 6-8 for coverage details.



Drug Name	Drug Tier	Requirements & Limits	Drug Name	Drug Tier	Requirements & Limits
HUMIRA-PED $\geq$ 40KG CROHNS START SUBCUTANEOUS PREFILLED SYRINGE KIT 80 MG/0.8ML	E	PA, QL, SP	IDACIO (2 SYRINGE) SUBCUTANEOUS PREFILLED SYRINGE KIT 40 MG/0.8ML	E	PA, QL, SP
HUMIRA-PED $\geq$ 40KG UC STARTER SUBCUTANEOUS AUTO-INJECTOR KIT 80 MG/0.8ML	E	PA, QL, SP	IDACIO-CROHNS/UC STARTER SUBCUTANEOUS AUTO-INJECTOR KIT 40 MG/0.8ML	E	PA, QL, SP
HUMIRA-PSORIASIS/UEIT STARTER	E	PA, QL, SP	IDACIO-PSORIASIS STARTER SUBCUTANEOUS AUTO-INJECTOR KIT 40 MG/0.8ML	E	PA, QL, SP
HYFTOR	3	PA, QL	IMURAN	E	
HYRIMOZ SUBCUTANEOUS SOLUTION AUTO-INJECTOR 40 MG/0.4ML	E	PA, QL, SP	JYLAMVO	3	PA
HYRIMOZ SUBCUTANEOUS SOLUTION AUTO-INJECTOR 40 MG/0.8ML, 80 MG/0.8ML	E	PA, SP	KEVZARA SUBCUTANEOUS SOLUTION AUTO-INJECTOR	3	PA, ST, QL, SP
HYRIMOZ SUBCUTANEOUS SOLUTION AUTO-INJECTOR 80 MG/0.8ML	E	PA, QL, SP	leflunomide oral	1	
HYRIMOZ SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 10 MG/0.1ML, 20 MG/0.2ML, 40 MG/0.4ML	E	PA, QL, SP	LITFULO	3	PA, QL, SP
HYRIMOZ SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 40 MG/0.8ML	E	PA, SP	LUPKYNIS	3	PA, QL, SP
HYRIMOZ-CROHNS/UC STARTER SUBCUTANEOUS SOLUTION AUTO-INJECTOR 80 MG/0.8ML	E	PA, SP	methotrexate sodium (pf)	1	
HYRIMOZ-CROHNS/UC STARTER SUBCUTANEOUS SOLUTION AUTO-INJECTOR 80 MG/0.8ML	E	PA, QL, SP	methotrexate sodium injection solution	1	
HYRIMOZ-PED <40KG CROHN STARTER	E	PA, QL, SP	methotrexate sodium oral	1	
HYRIMOZ-PED $\geq$ 40KG CROHN START	E	PA, QL, SP	mycophenolate mofetil oral capsule	1	
HYRIMOZ-PLAQ PSOR/UEIT START	E	PA, QL, SP	mycophenolate mofetil oral tablet	1	
HYRIMOZ-PLAQUE PSORIASIS START	E	PA, QL, SP	mycophenolate sodium	2	
IDACIO (2 PEN) SUBCUTANEOUS AUTO-INJECTOR KIT 40 MG/0.8ML	E	PA, QL, SP	mycophenolic acid	2	
			MYFORTIC	E	
			MYHIBBIN	1	
			NEORAL ORAL CAPSULE	E	
			OLUMIANT ORAL TABLET 1 MG, 4 MG	3	PA, ST, QL
			OLUMIANT ORAL TABLET 2 MG	3	PA, ST, QL, SP
			OMVOH (300 MG DOSE) SUBCUTANEOUS SOLUTION AUTO-INJECTOR	2	PA, (SUBCUTANEOUS), QL, SP
			OMVOH SUBCUTANEOUS SOLUTION AUTO-INJECTOR	2	PA, (SUBCUTANEOUS), QL, SP
			ORENCIA CLICKJECT	3	PA, ST, QL, SP
			ORENCIA SUBCUTANEOUS	3	PA, ST, QL, SP
			OTEZLA ORAL TABLET 20 MG	2	PA, QL
			OTEZLA ORAL TABLET 30 MG	2	PA, QL, SP

See page 6-8 for coverage details.



Drug Name	Drug Tier	Requirements & Limits	Drug Name	Drug Tier	Requirements & Limits
OTREXUP	E	QL	XELJANZ XR ORAL TABLET EXTENDED RELEASE 24 HOUR 22 MG	2	PA, QL
PROGRAF ORAL CAPSULE	3		XOLAIR SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	2	PA, QL, SP
RAPAMUNE ORAL TABLET 0.5 MG, 1 MG, 2 MG	E		YESINTEK SUBCUTANEOUS	2	PA, QL, SP
RASUVO	2	QL	YUFLYMA (1 PEN) SUBCUTANEOUS AUTO-INJECTOR KIT 40 MG/0.4ML	E	PA, QL, SP
RINVOQ	2	PA, QL, SP	YUFLYMA (1 PEN) SUBCUTANEOUS AUTO-INJECTOR KIT 80 MG/0.8ML	E	PA, SP
RUCONEST	3	PA, QL, SP	YUFLYMA (2 PEN)	E	PA, QL, SP
SIMLANDI (1 PEN)	E	PA, QL, SP	YUFLYMA (2 SYRINGE)	E	PA, QL, SP
SIMLANDI (1 SYRINGE)	E	PA, QL, SP	YUFLYMA-CD/UC/HS STARTER	E	PA, SP
SIMLANDI (2 PEN)	E	PA, QL, SP	YUSIMRY	E	PA, QL, SP
SIMLANDI (2 SYRINGE) SUBCUTANEOUS PREFILLED SYRINGE KIT 20 MG/0.2ML	E	PA, QL, SP	ZORTRESS	E	
SIMLANDI (2 SYRINGE) SUBCUTANEOUS PREFILLED SYRINGE KIT 40 MG/0.4ML	E	PA, SP	Immunological Agents - Drugs for Vaccination		
SIMPONI	2	PA, QL, SP	ABRYSVO	3	H
sirolimus oral tablet	1		ADACEL	3	H
SKYRIZI PEN	2	PA, QL, SP	AFLURIA PRESERVATIVE FREE	3	H
SKYRIZI SUBCUTANEOUS	2	PA, QL, SP	AREXVY	3	H
SOTYKTU	2	PA, QL, SP	BOOSTRIX	2	H
STELARA SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	E	PA, QL, SP	BOOSTRIX INTRAMUSCULAR SUSPENSION 5-2.5-18.5 LF-MCG/0.5	2	H
STEQEYMA SUBCUTANEOUS	2	PA, QL, SP	CAPVAXIVE	3	H
tacrolimus oral	1		COMIRNATY	3	H
TAKHZYRO SUBCUTANEOUS SOLUTION	2	PA, QL, SP	ENGERIX-B	2	H
TALTZ SUBCUTANEOUS SOLUTION AUTO-INJECTOR	E	PA, ST, QL, SP	FLUAD	3	H
TREMFYA ONE-PRESS	2	PA, QL, SP	FLUARIX	3	H
TREMFYA PEN SUBCUTANEOUS SOLUTION AUTO-INJECTOR 100 MG/ML	2	PA, QL, SP	FLUCELVAX INTRAMUSCULAR SUSPENSION PREFILLED SYRINGE	3	H
TREMFYA SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 100 MG/ML	2	PA, QL, SP	FLULAVAL	3	H
TREXALL	2		FLUZONE HIGH-DOSE	3	H
USTEKINUMAB SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	E	PA, QL, SP	FLUZONE INTRAMUSCULAR SUSPENSION PREFILLED SYRINGE	3	H
XELJANZ	2	PA, QL, SP	GARDASIL 9 INTRAMUSCULAR SUSPENSION PREFILLED SYRINGE	3	H
XELJANZ XR ORAL TABLET EXTENDED RELEASE 24 HOUR 11 MG	2	PA, QL, SP	HAVRIX	3	H

See page 6-8 for coverage details.



Drug Name	Drug Tier	Requirements & Limits
HEPLISAV-B	3	H
IPOL	2	H
MENQUADFI	3	H
MENVEO	3	H
M-M-R II	2	H
MODERNA COVID-19 VAC 6M-11Y	3	H
PFIZER COVID-19 VAC-TRIS 5-11Y	3	H
PFIZER COVID-19 VAC-TRIS 6M-4Y	3	H
PREVNAR 20	3	H
PRIORIX	3	H
RECOMBIVAX HB	2	H
SHINGRIX	3	H
SPIKEVAX	3	H
TENIVAC	3	H
TWINRIX	3	H
VAQTA	2	H
VARIVAX	3	H
VIVOTIF	E	
Infertility Agents		
CETROTIDE	3	PA, ST, QL, SP
CHORIONIC GONADOTROPIN INTRAMUSCULAR	3	SP
CLOMID	2	
clomiphene citrate oral	2	
ENDOMETRIN	2	
FOLLISTIM AQ	2	QL, SP
FYREMADEL	3	QL, SP
ganirelix acetate solution prefilled syringe 250 mcg/0.5ml subcutaneous	2	QL, SP
ganirelix acetate solution prefilled syringe 250 mcg/0.5ml subcutaneous	2	(manufactured by Merck/ Organon), QL, SP
ganirelix acetate solution prefilled syringe 250 mcg/0.5ml subcutaneous	3	QL, SP
GONAL-F	3	ST, SP

Drug Name	Drug Tier	Requirements & Limits
GONAL-F RFF	3	ST, SP
GONAL-F RFF REDIJECT	3	ST, SP
MENOPUR	3	QL, SP
NOVAREL	3	SP
OVIDREL	3	SP
PREGNYL	3	SP
Inflammatory Bowel Disease Agents		
ANALPRAM HC	3	
ANALPRAM HC SINGLES EXTERNAL CREAM 2.5-1 %	3	
ANALPRAM-HC EXTERNAL CREAM	3	
ANUCORT-HC	2	
ANUSOL-HC EXTERNAL	3	
ANUSOL-HC RECTAL	E	
APRISO	1	
AZULFIDINE	3	
AZULFIDINE EN-TABS	3	
balsalazide disodium	1	
budesonide oral	2	
CANASA	E	
COLAZAL	E	
CORTIFOAM	2	
DELZICOL	E	
DIPENTUM	3	
HEMMOREX-HC RECTAL SUPPOSITORY 25 MG	3	
HEMMOREX-HC RECTAL SUPPOSITORY 30 MG	E	
hydrocortisone (perianal) external cream 1 %	E	
hydrocortisone (perianal) external cream 2.5 %	1	
hydrocortisone ace-pramoxine external cream 1-1 %	1	
hydrocortisone acetate rectal	2	
hydrocort-pramoxine (perianal)	1	
LIALDA	E	
mesalamine er oral capsule 0.375 gm	E	

See page 6-8 for coverage details.



Drug Name	Drug Tier	Requirements & Limits
mesalamine oral capsule delayed release 400 mg	2	
mesalamine oral tablet delayed release 1.2 gm	2	
mesalamine oral tablet delayed release 800 mg	E	
mesalamine rectal enema	1	
mesalamine rectal suppository	2	QL
PROCORT	E	
PROCTOCORT	E	
PROCTOFOAM HC	2	
procto-med hc	1	
PROCTOSOL HC	3	
PROCTOZONE-HC	3	
SFROWASA	3	
sulfasalazine oral	1	
UCERIS ORAL	3	

Metabolic Bone Disease Agents - Drugs for Osteoporosis

ACTONEL	E	QL
alendronate sodium oral tablet	1	
BONSITY	3	PA, SP
EVISTA	E	
FORTEO	E	PA, SP
FOSAMAX	3	
ibandronate sodium oral	2	
raloxifene hcl	2	H-PA
risedronate sodium oral tablet 150 mg, 35 mg	3	QL
risedronate sodium oral tablet 30 mg, 5 mg	3	
teriparatide solution pen-injector 560 mcg/2.24ml subcutaneous	E	PA, SP
TERIPARATIDE SOLUTION PEN-INJECTOR 560 MCG/2.24ML SUBCUTANEOUS	3	PA, SP
TYMLOS	3	PA, SP

Metabolic Bone Disease Agents - Other

calcitriol oral capsule	1	
cinacalcet hcl	1	

Drug Name	Drug Tier	Requirements & Limits
ROCALTROL ORAL CAPSULE	3	
SENSIPAR	E	
YORVIPATH	3	PA, QL, SP
Ophthalmic Agents - Drugs for Eye Allergy, Infection and Inflammation		
ACULAR	3	
ACULAR LS	3	
ACUVAIL	E	
ALREX	3	QL
AZASITE	3	
azelastine hcl ophthalmic	1	
bacitracin-polymyxin b	1	
BESIVANCE	3	
bromfenac sodium (once-daily)	3	
bromfenac sodium ophthalmic solution 0.07 %	E	
bromfenac sodium ophthalmic solution 0.075 %	E	QL
BROMSITE	E	QL
ciprofloxacin hcl ophthalmic	1	
dexamethasone sodium phosphate ophthalmic	1	
diclofenac sodium ophthalmic	1	
epinastine hcl	3	QL
erythromycin ophthalmic	1	H-PA
EYSUVIS	3	QL
FLAREX	2	
fluorometholone	1	
FML FORTE	3	
FML LIQUIFILM	3	
gatifloxacin ophthalmic	3	
gentamicin sulfate ophthalmic	1	QL
ILEVRO	E	
INVELTYS	3	
ketorolac tromethamine ophthalmic	1	
KLARITY-A	E	
LOTEMAX OPHTHALMIC GEL	E	
LOTEMAX OPHTHALMIC OINTMENT	3	

See page 6-8 for coverage details.



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

Drug Name	Drug Tier	Requirements & Limits
ALPHAGAN P OPHTHALMIC SOLUTION 0.15 %	3	QL
AZOPT	E	QL
BETIMOL OPHTHALMIC SOLUTION 0.25 %	2	QL
BETIMOL OPHTHALMIC SOLUTION 0.5 %	3	QL
bimatoprost ophthalmic	2	QL
brimonidine tartrate ophthalmic solution 0.1 %	E	QL
brimonidine tartrate ophthalmic solution 0.15 %	2	QL
brimonidine tartrate ophthalmic solution 0.2 %	1	
brimonidine tartrate-timolol	E	QL
brinzolamide	2	QL
COMBIGAN	2	QL
COSOPT	3	
COSOPT PF	E	QL
DORZOLAMIDE HCL SOLUTION 2 % OPHTHALMIC	3	
dorzolamide hcl solution 2 % ophthalmic	1	
dorzolamide hcl-timolol mal	2	
dorzolamide hcl-timolol mal pf	E	QL
ISTALOL	3	
IYUZEH	E	QL
latanoprost ophthalmic	1	
LUMIGAN	2	
RHOPRESSA	3	QL
ROCKLATAN	3	QL
tafluprost (pf)	3	ST, QL
timolol hemihydrate	2	QL
timolol maleate (once-daily)	3	
timolol maleate ocudose	2	
timolol maleate ophthalmic	1	
timolol maleate pf	2	
TIMOPTIC OCUDOSE	3	
TIMOPTIC OPHTHALMIC SOLUTION 0.25 %, 0.5 %	3	

See page 6-8 for coverage details.



Drug Name	Drug Tier	Requirements & Limits
TIMOPTIC-XE OPHTHALMIC GEL FORMING SOLUTION 0.25 %, 0.5 %	3	
TRAVATAN Z	E	ST, QL
travoprost (bak free)	3	QL
VYZULTA	E	ST, QL
XALATAN	E	
ZIOPTAN	3	ST, QL

Ophthalmic Agents - Drugs for Miscellaneous Eye Conditions

ATROPINE SULFATE OPHTHALMIC SOLUTION 0.01 %, 0.025 %, 0.05 %	E	
atropine sulfate ophthalmic solution 1 %	1	
CEQUA	E	PA, QL
cromolyn sodium ophthalmic	1	
CYCLOGYL	3	
cyclopentolate hcl ophthalmic	1	
cyclosporine ophthalmic	E	PA, QL
difluprednate	3	
DUREZOL	E	
ISOPTO ATROPINE OPHTHALMIC SOLUTION 1 %	3	
KLARITY-C DROPS	E	PA
MIEBO	3	PA, QL
RESTASIS	3	PA, QL
RESTASIS MULTIDOSE	E	PA, QL
TYRVAYA	3	PA, QL
VERKAZIA	3	PA, QL
VEVYE	E	PA, QL
XIIDRA	3	PA, QL

Otic Agents - Drugs for Ear Conditions

acetic acid otic	1	
CIPRODEX OTIC SUSPENSION 0.3-0.1 %	E	
ciprofloxacin-dexamethasone	3	
DERMOTIC	3	
flac otic oil 0.01 %	1	
fluocinolone acetonide otic	1	

Drug Name	Drug Tier	Requirements & Limits
hydrocortisone-acetic acid	1	
neomycin-polymyxin-hc otic	1	
ofloxacin otic	2	
Respiratory - Drugs for Anaphylaxis		
AUVI-Q	2	QL
EPINEPHRINE INJECTION SOLUTION PREFILLED SYRINGE 0.3 MG/0.3ML	2	
epinephrine solution auto-injector 0.15 mg/0.15ml injection	1	(generic for Adrenaclick), QL
epinephrine solution auto-injector 0.15 mg/0.15ml injection	1	QL
epinephrine solution auto-injector 0.15 mg/0.3ml injection	1	(generic for EpiPen-JR-Single Pack), QL
epinephrine solution auto-injector 0.15 mg/0.3ml injection	1	(generic for EpiPen-JR), QL
epinephrine solution auto-injector 0.3 mg/0.3ml injection	1	(generic for Adrenaclick), QL
epinephrine solution auto-injector 0.3 mg/0.3ml injection	1	(generic for EpiPen-Single Pack), QL
epinephrine solution auto-injector 0.3 mg/0.3ml injection	1	QL
epinephrine solution auto-injector 0.3 mg/0.3ml injection	1	(generic for EpiPen), QL
EPIPEN 2-PAK	E	QL
EPIPEN JR 2-PAK	E	QL
NEFFY	3	QL
SYMJEPI INJECTION SOLUTION PREFILLED SYRINGE 0.15 MG/0.3ML, 0.3 MG/0.3ML	2	

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

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

See page 6-8 for coverage details.



Drug Name	Drug Tier	Requirements & Limits
benzonatate oral capsule 150 mg	E	
BROMFED DM ORAL SYRUP 2-30-10 MG/5ML	3	
bromphen-pseudoeph-dm	1	
carbinoxamine maleate oral tablet 4 mg	1	
carbinoxamine maleate oral tablet 6 mg	E	
cetirizine hcl oral solution	E	
CLARINEX	E	
cypheptadine hcl oral	1	
desloratadine oral tablet	E	
DYMISTA	E	QL
flunisolide nasal	3	
fluticasone propionate nasal	2	QL
g tussin ac	1	
guaifenesin ac oral syrup 100-10 mg/5ml	1	
guaifenesin-codeine	1	
HYCODAN ORAL SOLUTION	E	PA, QL
hydrocod poli-chlorphe poli er	3	PA, QL
hydrocodone bit-homatrop mbr oral solution	1	PA, QL
hydromet	1	PA, QL
HYPERSAL	2	
ipratropium bromide nasal	1	
levocetirizine dihydrochloride oral solution	3	
levocetirizine dihydrochloride oral tablet	1	
maxi-tuss ac	1	
mometasone furoate nasal	3	QL
NEBUSAL INHALATION NEBULIZATION SOLUTION 3 %	3	
NEBUSAL INHALATION NEBULIZATION SOLUTION 6 %	E	
ODACTRA	3	PA, QL
olopatadine hcl nasal	3	
PATANASE NASAL SOLUTION 0.6 %	E	

Drug Name	Drug Tier	Requirements & Limits
promethazine-codeine	1	PA, QL
promethazine-dm	1	
pseudoephedrine-bromphen-dm	1	
PULMOSAL	2	
RYALTRIS	E	QL
ryvent	E	
sodium chloride inhalation	1	
XHANCE	E	ST, QL
ZETONNA NASAL AEROSOL SOLUTION 37 MCG/ACT	3	QL
Respiratory Tract / Pulmonary Agents - Drugs for Asthma and COPD		
ACCOLATE	3	
ADVAIR DISKUS	E	QL
ADVAIR HFA	3	QL, RS
AEROCHAMBER HOLDING CHAMBER	3	
AEROCHAMBER PLS FLOVU MTHPIECE	3	
AEROCHAMBER PLUS FLO-VU	3	
AEROCHAMBER PLUS FLO-VU INTERM	3	
AEROCHAMBER PLUS FLO-VU LARGE	3	
AEROCHAMBER PLUS FLO-VU MEDIUM DEVICE	3	
AEROCHAMBER PLUS FLO-VU SMALL	3	
AEROCHAMBER PLUS FLO-VU W/MASK	3	
AEROCHAMBER2GO ANTI-STATIC	3	
AIRDUO RESPICLICK 113/14 INHALATION AEROSOL POWDER BREATH ACTIVATED 113-14 MCG/ACT	E	QL
AIRDUO RESPICLICK 232/14 INHALATION AEROSOL POWDER BREATH ACTIVATED 232-14 MCG/ACT	E	QL

See page 6-8 for coverage details.



Drug Name	Drug Tier	Requirements & Limits	Drug Name	Drug Tier	Requirements & Limits
AIRDUO RESPICLICK 55/14 INHALATION AEROSOL POWDER BREATH ACTIVATED 55-14 MCG/ACT	E	QL	budesonide-formoterol fumarate	E	QL, RS
AIRSUPRA	3	QL	COMBIVENT RESPIMAT	3	QL
albuterol sulfate hfa aerosol solution 108 (90 base) mcg/act inhalation	2	QL	DALIRESP	E	QL
albuterol sulfate hfa aerosol solution 108 (90 base) mcg/act inhalation	2	(generic for ProAir HFA or Proventil HFA), QL	DULERA	E	ST, QL
albuterol sulfate hfa aerosol solution 108 (90 base) mcg/act inhalation	2	(generic for Ventolin HFA), QL	EASIVENT	3	
albuterol sulfate hfa aerosol solution 108 (90 base) mcg/act inhalation	2	(generic ProAir HFA or Proventil HFA), QL	EASIVENT MASK LARGE	3	
albuterol sulfate inhalation nebulization solution (2.5 mg/3ml) 0.083%, 0.63 mg/3ml, 1.25 mg/3ml	1		EASIVENT MASK MEDIUM	3	
ALBUTEROL SULFATE NEBULIZATION SOLUTION (5 MG/ML) 0.5% INHALATION	3		EASIVENT MASK SMALL	3	
ALBUTEROL SULFATE NEBULIZATION SOLUTION (5 MG/ML) 0.5% INHALATION	E		FASENRA PEN	3	PA, QL
albuterol sulfate oral syrup 2 mg/5ml	1		FLEXICHAMBER	3	
ANORO ELLIPTA	3	QL	FLOVENT HFA INHALATION AEROSOL 110 MCG/ACT, 220 MCG/ACT, 44 MCG/ACT	E	QL
ARNUITY ELLIPTA	1	QL	FLUTICASONE FUROATE-VILANTEROL	E	QL, RS
ASMANEX HFA	E	QL	FLUTICASONE PROPIONATE HFA	E	QL
ATROVENT HFA	3	QL	FLUTICASONE-SALMETEROL INHALATION AEROSOL	E	QL, RS
BEVESPI AEROSPHERE	2	QL	fluticasone-salmeterol inhalation aerosol powder breath activated 100-50 mcg/act, 250-50 mcg/act, 500-50 mcg/act	3	QL, RS
BREATHE COMFORT CHAMBER/ADULT	3		FLUTICASONE-SALMETEROL INHALATION AEROSOL POWDER BREATH ACTIVATED 113-14 MCG/ACT, 232-14 MCG/ACT, 55-14 MCG/ACT	3	QL
BREATHE COMFORT CHAMBER/CHILD	3		INSPIREASE	3	
BREO ELLIPTA	3	QL, RS	ipratropium bromide inhalation	1	
brey-na	E	QL, RS	ipratropium-albuterol	2	
BREZTRI AEROSPHERE	3	QL, RS	levalbuterol hcl inhalation	3	QL
budesonide inhalation	2	QL	LEVALBUTEROL HFA INHALATION AEROSOL 45 MCG/ACT	3	QL
			MICROCHAMBER	3	
			montelukast sodium oral packet	2	
			montelukast sodium oral tablet	1	
			montelukast sodium oral tablet chewable	1	

See page 6-8 for coverage details.



Drug Name	Drug Tier	Requirements & Limits
NUCALA SUBCUTANEOUS SOLUTION AUTO-INJECTOR	3	PA, QL, SP
NUCALA SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 100 MG/ML	3	PA, QL, SP
NUCALA SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 40 MG/0.4ML	3	PA, QL
PERFOROMIST	3	QL
PROCHAMBER VHC	3	
PROVENTIL HFA INHALATION AEROSOL SOLUTION 108 (90 BASE) MCG/ACT	E	QL
PULMICORT SUSPENSION	E	QL
QVAR REDIHALER	1	QL
roflumilast	2	QL
SEREVENT DISKUS	2	QL
SINGULAIR ORAL PACKET	3	
SINGULAIR ORAL TABLET	E	
SINGULAIR ORAL TABLET CHEWABLE	E	
SPIRIVA HANDIHALER	2	QL
SPIRIVA RESPIMAT	2	QL
STIOLTO RESPIMAT	2	QL
STRIVERDI RESPIMAT	2	QL
SYMBICORT	3	QL
TEZSPIRE SUBCUTANEOUS SOLUTION AUTO-INJECTOR	3	PA, QL, SP
tiotropium bromide monohydrate	E	QL
TRELEGY ELLIPTA	3	QL, RS
UMECLIDINIUM-VILANTEROL	E	QL
VENTOLIN HFA	E	QL
VORTEX HOLD CHMBR/MASK/CHILD DEVICE	2	
VORTEX HOLD CHMBR/MASK/TODDLER DEVICE	2	
VORTEX VALVE CHAMBER-PEDI MASK	3	
VORTEX VALVED HOLDING CHAMBER DEVICE	3	

Drug Name	Drug Tier	Requirements & Limits
VORTEX VALVED HOLDING CHAMBER DEVICE	2	
wixela inhub	3	QL, RS
XOLAIR SUBCUTANEOUS SOLUTION AUTO-INJECTOR	2	PA, QL, SP
XOPENEX HFA	3	QL
YUPELRI	3	PA, QL
zafirlukast	1	
Respiratory Tract / Pulmonary Agents - Drugs for Cystic Fibrosis		
BRONCHITOL	3	PA, ST, QL, SP
BRONCHITOL TOLERANCE TEST	3	PA, ST, QL, SP
PULMOZYME	2	PA, QL, SP
TOBI PODHALER	3	PA, QL, SP
TRIKAFTA ORAL TABLET THERAPY PACK	2	PA, QL, SP
Respiratory Tract / Pulmonary Agents - Drugs for Pulmonary Fibrosis		
OFEV	3	PA, QL, SP
Respiratory Tract / Pulmonary Agents - Drugs for Pulmonary Hypertension		
ADCIRCA	E	PA, QL, SP
ADEMPAS	2	PA, QL, SP
alyq	2	PA, QL, SP
OPSUMIT	2	PA, QL, SP
REVATIO ORAL	E	QL, SP
sildenafil citrate oral tablet 20 mg	1	QL
tadalafil (pah)	1	PA, QL, SP
TADLIQ	3	PA, QL, SP
TRACLEER	2	PA, QL, SP
TYVASO	2	PA, SP
TYVASO DPI INSTITUTIONAL KIT	2	PA, QL, SP
TYVASO DPI MAINTENANCE KIT	2	PA, QL, SP
TYVASO DPI TITRATION KIT	2	PA, QL, SP
TYVASO REFILL KIT	2	PA, SP
TYVASO STARTER KIT	2	PA, SP

See page 6-8 for coverage details.



Drug Name	Drug Tier	Requirements & Limits
Skeletal Muscle Relaxants - Drugs for Muscle Pain and Spasm		
baclofen oral tablet 10 mg, 20 mg, 5 mg	1	
baclofen oral tablet 15 mg	E	
carisoprodol oral tablet 250 mg	E	
carisoprodol oral tablet 350 mg	1	
chlorzoxazone oral tablet 250 mg, 375 mg, 750 mg	E	
chlorzoxazone oral tablet 500 mg	1	
cyclobenzaprine hcl oral tablet 10 mg, 5 mg	1	
cyclobenzaprine hcl oral tablet 7.5 mg	E	
FEXMID	E	
metaxalone oral tablet 400 mg, 800 mg	3	
metaxalone oral tablet 640 mg	E	
methocarbamol oral tablet 1000 mg	E	
methocarbamol oral tablet 500 mg, 750 mg	1	
orphenadrine citrate er	2	
SOMA	E	
TANLOR	3	
tizanidine hcl oral capsule	3	
tizanidine hcl oral tablet	1	
VANADOM ORAL TABLET 350 MG	E	
ZANAFLEX	3	
ZANAFLEX ORAL CAPSULE 2 MG, 4 MG, 6 MG	3	
Sleep Disorder Agents		
AMBIEN	E	
AMBIEN CR	E	
armodafinil	2	QL
BELSOMRA	3	ST, QL
DAYVIGO	E	ST, QL
doxepin hcl oral tablet	E	QL

Drug Name	Drug Tier	Requirements & Limits
eszopiclone	2	
LUMRYZ	3	PA, QL, SP
LUNESTA	E	
modafinil oral	2	QL
NUVIGIL	E	QL
PROVIGIL	E	QL
QUVIVIQ	E	ST, QL
ramelteon	3	ST, QL
RESTORIL	3	
ROZEREM	E	ST, QL
SILENOR	E	QL
SODIUM OXYBATE	3	PA, (Manufactured by Hikma), QL, SP
SUNOSI	2	PA, QL
temazepam	1	
WAKIX	3	PA, QL, SP
XYWAV	3	PA, QL, SP
zaleplon	1	
zolpidem tartrate er	2	
zolpidem tartrate oral tablet	1	

See page 6-8 for coverage details.



Index

A

abigale	41
abigale lo.....	41
ABILIFY	19
abiraterone acetate oral tablet 250 mg	17
abiraterone acetate oral tablet 500 mg.....	17
ABIRTEGA.....	17
ABRILADA (1 PEN) SUBCUTANEOUS AUTO- INJECTOR KIT 40 MG/0.8ML	46
ABRILADA (2 PEN) SUBCUTANEOUS AUTO- INJECTOR KIT 40 MG/0.8ML	46
ABRILADA (2 SYRINGE)	46
ABRYSVO.....	50
ABSORICA	27
acamprosate calcium	10
ACANYA	27
acarbose oral	35
ACCOLATE	55
ACCRUFER	37
ACCU-CHEK AVIVA PLUS TEST STRIPS	30
ACCU-CHEK FASTCLIX LANCET ..	30
ACCU-CHEK FASTCLIX LANCET DEVICE KIT	30
ACCU-CHEK GUIDE KIT W/ DEVICE.....	30
ACCU-CHEK GUIDE ME METER...30	
ACCU-CHEK GUIDE TEST STRIPS	30
ACCU-CHEK SMARTVIEW TEST STRIPS	30
ACCU-CHEK SOFTCLIX LANCET ..	30
ACCU-CHEK SOFTCLIX LANCET DEVICE KIT	30
accutane	27
ACCUTREND GLUCOSE	30
acebutolol hcl oral.....	20
acetaminophen-codeine oral tablet.....	9
acetazolamide er	20
acetazolamide oral	20

acetic acid otic.....	54
ACIPHEX	38
acitretin	27
ACTEMRA ACTPEN	46
ACTEMRA SUBCUTANEOUS.....	46
ACTIVELLA	41
ACTONEL	52
ACTOPLUS MET.....	35
ACTOS.....	35
ACULAR	52
ACULAR LS.....	52
ACUVAIL	52
acyclovir external ointment.....	19
acyclovir oral capsule.....	19
acyclovir oral suspension 200 mg/5ml	19
acyclovir oral tablet.....	19
ACZONE.....	27
ADACEL	50
ADAINZDE EXTERNAL GEL 0.3-2.5-1 %.....	27
ADALIMUMAB-AACF (2 PEN)	46
ADALIMUMAB-AACF (2 SYRINGE)	46
ADALIMUMAB-AACF(CD/UC/HS STRT).....	46
ADALIMUMAB-AACF(PS/UV STARTER).....	47
ADALIMUMAB-AATY (1 PEN) SUBCUTANEOUS AUTO- INJECTOR KIT 40 MG/0.4ML	47
ADALIMUMAB-AATY (1 PEN) SUBCUTANEOUS AUTO- INJECTOR KIT 80 MG/0.8ML	47
ADALIMUMAB-AATY (2 PEN).....	47
ADALIMUMAB-AATY (2 SYRINGE)	47
ADALIMUMAB-AATY CD/UC/HS START	47
ADALIMUMAB-ADAZ SUBCUTANEOUS SOLUTION AUTO-INJECTOR 40 MG/0.4ML ..	47
ADALIMUMAB-ADAZ SUBCUTANEOUS SOLUTION AUTO-INJECTOR 80 MG/0.8ML ..	47

ADALIMUMAB-ADAZ SUBCUTANEOUS SOLUTION PREFILLED SYRINGE.....	47
ADALIMUMAB-ADBM (2 PEN) AUTO-INJECTOR KIT 40 MG/0.4ML SUBCUTANEOUS	47
ADALIMUMAB-ADBM (2 PEN) AUTO-INJECTOR KIT 40 MG/0.8ML SUBCUTANEOUS	47
ADALIMUMAB-ADBM (2 SYRINGE) PREFILLED SYRINGE KIT 40 MG/0.4ML SUBCUTANEOUS.....	47
ADALIMUMAB-ADBM (2 SYRINGE) PREFILLED SYRINGE KIT 40 MG/0.8ML SUBCUTANEOUS.....	47
ADALIMUMAB-ADBM (2 SYRINGE) SUBCUTANEOUS PREFILLED SYRINGE KIT 10 MG/0.2ML, 20 MG/0.4ML	47
ADALIMUMAB-ADBM(CD/UC/ HS STRT)	47
ADALIMUMAB-ADBM(PS/UV STARTER).....	47
ADALIMUMAB-FKJP (2 PEN).....	47
ADALIMUMAB-FKJP (2 SYRINGE)	47
adapalene external gel	27
adapalene-benzoyl peroxide external gel	27
ADBRY SOLUTION AUTO- INJECTOR.....	47
ADBRY SUBCUTANEOUS SOLUTION PREFILLED SYRINGE ..	47
ADCIRCA.....	57
ADDERALL	24
ADDERALL XR	24
ADDYI	36
ADEINZDE	27
ADEMPAS	57
ADMELOG.....	34
ADMELOG SOLOSTAR.....	34
ADTHYZA.....	46
ADVAIR DISKUS.....	55
ADVAIR HFA.....	55
ADVATE.....	36



ADYNOVATE	36	albuterol sulfate inhalation nebulization solution (2.5 mg/3ml) 0.083%, 0.63 mg/3ml, 1.25 mg/3ml	56	amethia oral tablet 0.15-0.03 & 0.01 mg	41
ADZENYS XR-ODT	24	ALBUTEROL SULFATE NEBULIZATION SOLUTION (5 MG/ML) 0.5% INHALATION	56	amiloride hcl oral	21
AEROCHAMBER HOLDING CHAMBER.....	55	albuterol sulfate oral syrup 2 mg/5ml	56	amiodarone hcl oral	21
AEROCHAMBER PLS FLOVU MTHPIECE	55	alclometasone dipropionate	27	AMITIZA	39
AEROCHAMBER PLUS FLO-VU....	55	ALDACTONE	20	amitriptyline hcl oral	14
AEROCHAMBER PLUS FLO-VU INTERM	55	ALECENSA	17	AMJEVITA 40 MG/0.4ML, 80 MG/0.8ML	47
AEROCHAMBER PLUS FLO-VU LARGE.....	55	alendronate sodium oral tablet ...	52	AMJEVITA 40 MG/0.8ML	47
AEROCHAMBER PLUS FLO-VU MEDIUM DEVICE	55	alfuzosin hcl er.....	40	AMJEVITA-PED 10KG TO <15KG SUBCUTANEOUS SOLUTION REFILLED SYRINGE 10MG/0.2ML	47
AEROCHAMBER PLUS FLO-VU SMALL.....	55	aliskiren fumarate	20	AMJEVITA-PED 15KG TO <30KG SOLUTION REFILLED SYRINGE 20 MG/0.2ML SUBCUTANEOUS.....	47
AEROCHAMBER PLUS FLO-VU W/MASK.....	55	allopurinol oral tablet 100 mg, 300 mg.....	16	AMJEVITA-PED 15KG TO <30KG SUBCUTANEOUS SOLUTION REFILLED SYRINGE 20 MG/0.4ML.....	48
AEROCHAMBER2GO ANTI- STATIC	55	allopurinol oral tablet 200 mg	16	amlodipine besylate oral	21
afirmelle.....	41	ALLZITAL	9	amlodipine besylate-benazepril hcl	21
AFLURIA PRESERVATIVE FREE ...	50	ALOGLIPTIN BENZOATE	35	amlodipine besylate-valsartan....	21
AFSTYLA INTRAVENOUS KIT 1000 UNIT, 2000 UNIT, 250 UNIT, 3000 UNIT, 500 UNIT.....	36	ALORA.....	41	amlodipine-olmesartan	21
AFSTYLA INTRAVENOUS KIT 1500 UNIT, 2500 UNIT	36	ALPHAGAN P OPHTHALMIC SOLUTION 0.1 %	53	ammonium lactate external	27
AGAMATRIX PRESTO TEST	30	ALPHAGAN P OPHTHALMIC SOLUTION 0.15 %.....	53	amnestem	27
AIMOVIG SUBCUTANEOUS SOLUTION AUTO-INJECTOR 140 MG/ML, 70 MG/ML	16	ALPHANATE.....	36	amoxicillin.....	11
AIRDUO RESPICLICK 113/14 INHALATION AEROSOL POWDER BREATH ACTIVATED 113-14 MCG/ACT.....	55	alprazolam er	20	amoxicillin-potassium clavulanate.....	11
AIRDUO RESPICLICK 232/14 INHALATION AEROSOL POWDER BREATH ACTIVATED 232-14 MCG/ACT	55	alprazolam oral	20	amphet-dextroamphet 3-bead er.....	24
AIRDUO RESPICLICK 55/14 INHALATION AEROSOL POWDER BREATH ACTIVATED 55-14 MCG/ACT.....	56	alprazolam xr	20	amphetamine sulfate.....	24
AIRSUPRA.....	56	ALPROLIX.....	36	amphetamine- dextroamphetamine	24
AJOVY.....	16	ALREX.....	52	amphetamine- dextroamphetamine er	24
AKLIEF	27	ALTACE.....	20	ampicillin.....	11
ALA SCALP	27	altavera.....	41	AMPYRA.....	25
ala-cort.....	27	ALTUVIIIO	36	AMZEEQ.....	27
albuterol sulfate hfa aerosol solution 108 (90 base) mcg/act inhalation	56	ALUNBRIG	17	ANAFRANIL.....	14
		ALVAIZ	36	ANALPRAM HC.....	51
		alyacen 1/35	41	ANALPRAM HC SINGLES EXTERNAL CREAM 2.5-1 %	51
		alyacen 7/7/7	41	ANALPRAM-HC EXTERNAL CREAM	51
		alyq.....	57	ANAPROX DS.....	10
		amabelz oral tablet 0.5-0.1 mg, 1-0.5 mg.....	41		
		amantadine hcl oral capsule	19		
		amantadine hcl oral tablet	19		
		AMBIEN	58		
		AMBIEN CR.....	58		



ANASPAZ.....	39	ATORVALIQ.....	21	AVONEX PEN.....	25
anastrozole oral.....	17	atorvastatin calcium oral tablet 10 mg, 20 mg.....	21	AVONEX PREFILLED.....	25
ANDROGEL PUMP.....	45	atorvastatin calcium oral tablet 40 mg, 80 mg.....	21	AYGESTIN ORAL TABLET 5 MG ...	41
ANNOVERA.....	41	atovaquone.....	18	ayuna.....	41
ANORO ELLIPTA.....	56	atovaquone-proguanil hcl.....	18	AZASAN.....	48
ANTIVERT ORAL TABLET 50 MG..	15	ATRALIN.....	27	AZASITE.....	52
ANUCORT-HC.....	51	ATROPINE SULFATE OPHTHALMIC SOLUTION 0.01 %, 0.025 %, 0.05 %.....	54	azathioprine oral tablet 100 mg, 75 mg.....	48
ANUSOL-HC EXTERNAL.....	51	atropine sulfate ophthalmic solution 1 %.....	54	azathioprine oral tablet 50 mg....	48
ANUSOL-HC RECTAL.....	51	ATROVENT HFA.....	56	azelaic acid external.....	27
apap-caff-dihydrocodeine.....	9	ATTRUBY.....	40	azelastine hcl nasal solution 0.1 %, 137 mcg/spray.....	54
APO-VARENICLINE ORAL TABLET 0.5 MG, 1 MG.....	10	AUBAGIO.....	25	azelastine hcl nasal solution 0.15 %.....	54
aprepitant oral capsule 125 mg, 40 mg, 80 mg.....	15	aubra eq.....	41	azelastine hcl ophthalmic.....	52
apri.....	41	AUGMENTIN.....	11, 12	azelastine-fluticasone.....	54
APRISO.....	51	AUGMENTIN ES-600.....	12	AZELEX.....	27
APTENSIO XR.....	24	AUGTYRO.....	17	AZILECT.....	19
APTIOM.....	13	aurovela 1/20.....	41	azithromycin oral packet 1 gm	12
AQ INSULIN SYRINGE.....	30	aurovela 1.5/30.....	41	AZOPT.....	53
AQINJECT PEN NEEDLE.....	30	aurovela 24 fe.....	41	AZOR.....	21
ARAKODA.....	18	aurovela fe 1/20.....	41	AZSTARYS.....	24
aranelle.....	41	aurovela fe 1.5/30.....	41	AZULFIDINE.....	51
ARANESP (ALBUMIN FREE).....	36	AUSTEDO.....	26	AZULFIDINE EN-TABS.....	51
ARAVA.....	48	AUSTEDO XR.....	26	azurette.....	41
ARAZLO.....	27	AUSTEDO XR PATIENT TITRATION ORAL TABLET EXTENDED RELEASE THERAPY PACK 12 & 18 & 24 & 30 MG.....	26		
AREXVY.....	50	AUSTEDO XR PATIENT TITRATION ORAL TABLET EXTENDED RELEASE THERAPY PACK 6 & 12 & 24 MG.....	26		
ARICEPT.....	14	AUVELITY.....	14		
ARIMIDEX.....	17	AUVI-Q.....	54		
aripiprazole oral.....	19	AVALIDE.....	21		
armodafinil.....	58	avanafil.....	36		
ARMOUR THYROID.....	46	AVAPRO.....	21		
ARNUITY ELLIPTA.....	56	AVAR CLEANSER.....	27		
AROMASIN.....	17	AVAR LS CLEANSER.....	27		
ARTHROTEC.....	10	aviane.....	41		
ascomp-codeine.....	9	AVIDOXY.....	12		
asenapine maleate.....	19	AVITA EXTERNAL CREAM 0.025 %.....	27		
ashlyna.....	41	AVODART.....	40		
ASMANEX HFA.....	56				
ATACAND.....	21				
ATACAND HCT.....	21				
atenolol oral.....	21				
atenolol-chlorthalidone.....	21				
ATIVAN ORAL.....	20				
atomoxetine hcl.....	24				

B

bac (butalbital-acetamin-caff)	9
bacitracin-polymyxin b.....	52
baclofen oral tablet 10 mg, 20 mg, 5 mg.....	58
baclofen oral tablet 15 mg.....	58
BACTRIM.....	12
BACTRIM DS.....	12
BAFIERTAM.....	25
balsalazide disodium.....	51
balziva.....	41
BAQSIMI ONE PACK.....	35
BAQSIMI TWO PACK.....	35
BARACLUDE ORAL TABLET.....	19
BASAGLAR KWIKPEN.....	34
BASAGLAR TEMPO PEN.....	34
BD AUTOSHIELD DUO PEN NEEDLES.....	30



BD BLUNT FILL NEEDLE W/ FILTER.....	30	betamethasone dipropionate aug external lotion.....	27	BOOSTRIX INTRAMUSCULAR SUSPENSION 5-2.5-18.5 LF- MCG/0.5	50
BD ECLIPSE NEEDLE 18G X 1-1/2" , 25G X 5/8" , 27G X 1/2".....	31	betamethasone dipropionate aug external ointment.....	27	BREATHE COMFORT CHAMBER/ ADULT	56
BD ECLIPSE NEEDLE 23G X 1" (OTC).....	31	betamethasone dipropionate external cream.....	27	BREATHE COMFORT CHAMBER/ CHILD	56
BD ECLIPSE NEEDLE 23G X 1" (RX).....	31	betamethasone dipropionate external lotion	27	BREO ELLIPTA	56
BD ECLIPSE SHIELDED NEEDLE..	31	betamethasone dipropionate external ointment	27	breyna.....	56
BD PEN NEEDLE MICRO ULTRAFINE	31	betamethasone valerate external cream.....	27	BREZTRI AEROSPHERE.....	56
BD PEN NEEDLE MINI ULTRAFINE	31	betamethasone valerate external lotion	27	briellyn	41
BD PEN NEEDLE NANO ULTRAFINE	31	betamethasone valerate external ointment	27	BRILINTA.....	19
BD PEN NEEDLE ORIG ULTRAFINE	31	BETAPACE.....	21	brimonidine tartrate ophthalmic solution 0.1 %	53
BD PEN NEEDLE SHORT ULTRAFINE	31	BETASERON.....	25	brimonidine tartrate ophthalmic solution 0.15 %	53
BD SAFETYGLIDE NEEDLE 23G X 1-1/2".....	31	bethanechol chloride oral.....	40	brimonidine tartrate ophthalmic solution 0.2 %	53
BD SAFETYGLIDE SHIELDED NEEDLE 21G X 1-1/2".....	31	BETIMOL OPHTHALMIC SOLUTION 0.25 %.....	53	brimonidine tartrate-timolol.....	53
BD ULTRA-FINE PEN NEEDLES ...	31	BETIMOL OPHTHALMIC SOLUTION 0.5 %.....	53	brinzolamide	53
BD ULTRA-FINE U-500 INSULIN SYRINGES.....	31	BEVESPI AEROSPHERE.....	56	BRIVIACT ORAL TABLET	13
BD VEO ULTRA-FINE INSULIN SYRINGES.....	31	BEYAZ.....	41	BROMFED DM ORAL SYRUP 2-30-10 MG/5ML	55
BD-ULTRA FINE INSULIN SYRINGES.....	31	bicalutamide.....	17	bromfenac sodium (once-daily) ..	52
BELBUCA.....	9	BIGFOOT UNITY PROGRAM	31	bromfenac sodium ophthalmic solution 0.07 %.....	52
BELSOMRA.....	58	BIJUVA.....	41	bromfenac sodium ophthalmic solution 0.075 %	52
benazepril hcl oral	21	BIKTARVY	19	bromocriptine mesylate oral tablet.....	19
benazepril-hydrochlorothiazide ..	21	bimatoprost ophthalmic	53	bromphen-pseudoeph-dm	55
BENICAR	21	BIMZELX	48	BROMSITE	52
BENICAR HCT.....	21	BIOTEL CARE TEST STRIPS	31	BRONCHITOL.....	57
BENLYSTA SUBCUTANEOUS SOLUTION AUTO-INJECTOR	48	bis subcit-metronid-tetracyc	38	BRONCHITOL TOLERANCE TEST.....	57
BENZAMYCIN.....	27	bismuth/metronidaz/tetracyclin ..	38	BRUKINSA.....	17
benzonatate oral capsule 100 mg, 200 mg	54	bisoprolol fumarate oral tablet ...	21	budesonide inhalation.....	56
benzonatate oral capsule 150 mg.....	55	bisoprolol-hydrochlorothiazide... ..	21	budesonide oral	51
benzoyl peroxide-erythromycin ..	27	BLANCHE	27	budesonide-formoterol fumarate ..	56
benztropine mesylate oral	19	blisovi 24 fe	41	bumetanide oral.....	21
BESIVANCE	52	blisovi fe 1/20	41	BUMEX	21
BESREMI	17	blisovi fe 1.5/30	41	BUPAP ORAL TABLET 50-300 MG .	9
betamethasone dipropionate aug external cream.....	27	BLOOD GLUCOSE TEST STRIPS ..	31	buprenorphine.....	9, 10
		BLOOD GLUCOSE TEST STRIPS 333	31	buprenorphine hcl sublingual.....	10
		BONSITY.....	52	buprenorphine hcl-naloxone hcl sublingual film	10
		BOOSTRIX	50	buprenorphine hcl-naloxone hcl sublingual tablet sublingual.....	10



bupropion hcl er (smoking det)	11	CALQUENCE	17	carvedilol	21
bupropion hcl er (sr)	15	camila	41	carvedilol phosphate er	21
bupropion hcl er (xl) oral tablet extended release 24 hour 150 mg, 300 mg	15	camrese	41	CASODEX	17
BUPROPION HCL ER (XL) ORAL TABLET EXTENDED RELEASE 24 HOUR 450 MG	15	camrese lo	41	CATAPRES-TTS-1	21
bupropion hcl oral	15	CAMZYOS	21	CATAPRES-TTS-2	21
buspirone hcl oral	20	CANASA	51	CATAPRES-TTS-3	21
butalbital-acetaminophen oral tablet 50-300 mg	9	candesartan cilexetil	21	cefadroxil oral capsule	12
butalbital-acetaminophen oral tablet 50-325 mg	9	candesartan cilexetil-hctz	21	cefadroxil oral suspension reconstituted	12
butalbital-apap-caff-cod oral capsule 50-300-40-30 mg	9	capecitabine	17	cefdinir	12
butalbital-apap-caff-cod oral capsule 50-325-40-30 mg	9	CAPLYTA	19	cefixime oral capsule	12
butalbital-apap-caffeine oral capsule 50-300-40 mg	9	captopril oral	21	cefpodoxime proxetil oral tablet	12
butalbital-apap-caffeine oral capsule 50-325-40 mg	9	CAPVAXIVE	50	cefprozil	12
butalbital-apap-caffeine oral tablet	9	CARAC EXTERNAL CREAM 0.5 %	27	cefuroxime axetil	12
butalbital-asa-caff-codeine	9	CARAFATE	38	CELEBREX	10
butalbital-aspirin-caffeine	9	carbamazepine er	13	celecoxib oral	10
butorphanol tartrate nasal	9	carbamazepine oral tablet	13	CELEXA	15
BUTRANS	9	carbamazepine oral tablet chewable	13	CELLCEPT ORAL CAPSULE	48
BYDUREON BCISE AUTOINJECTOR SUBCUTANEOUS AUTO- INJECTOR 2 MG/0.85ML	35	CARBATROL	13	CELLCEPT ORAL TABLET	48
BYLVAY	39	carbidopa-levodopa er	19	cephalexin	12
BYLVAY (PELLETS)	39	carbidopa-levodopa oral tablet	19	CEQUA	54
BYSTOLIC	21	carbinoxamine maleate oral tablet 4 mg	55	CEQUR SIMPLICITY 2U 8PK	31
C		carbinoxamine maleate oral tablet 6 mg	55	CERDELGA	40
cabergoline	45	CARDIZEM	21	cetirizine hcl oral solution	55
CABOMETYX	17	CARDIZEM CD	21	CETROTIDE	51
CABTREO	27	CARDIZEM LA	21	cevimeline hcl	26
calcipotriene external cream	27	CARDURA	21	charlotte 24 fe	41
calcipotriene external ointment	27	CAREPOINT POLY HUB NEEDLE 18G X 1", 21G X 1", 22G X 1", 23G X 1", 25G X 1", 25G X 5/8"	31	chateal eq	41
calcipotriene external solution	27	CAREPOINT POLY HUB NEEDLE 22G X 1-1/2"	31	chlordiazepoxide hcl	20
CALCITRENE	27	CAREPOINT SAFETY 1ST NEEDLE	31	chlordiazepoxide-clidinium	39
calcitriol oral capsule	52	CARESENS N PLUS BT	31	chlorhexidine gluconate mouth/ throat	26
calcium acetate (phos binder) oral capsule	40	CARETOUCH MONITOR SYSTEM	31	chlorpromazine hcl oral tablet	19
		CARETOUCH TEST	31	chlorthalidone	21
		carisoprodol oral tablet 250 mg	58	chlorzoxazone oral tablet 250 mg, 375 mg, 750 mg	58
		carisoprodol oral tablet 350 mg	58	chlorzoxazone oral tablet 500 mg	58
		CARNITOR ORAL SOLUTION	37	cholestyramine light	21
		CARNITOR ORAL TABLET	40	cholestyramine oral	21
		CARNITOR SF	37	CHORIONIC GONADOTROPIN INTRAMUSCULAR	51
		cartia xt	21	CIALIS	36
				CIBINQO	27



ciclodan	16	clindamycin phos-benzoyl perox external gel 1-5 %, 1.2-2.5 %, 1.2-3.75 %	27	clonidine patch weekly 0.2 mg/24hr transdermal	21
ciclopirox external gel	16	clindamycin phos-benzoyl perox external gel 1.2-5 %	27	clonidine patch weekly 0.3 mg/24hr transdermal	21
ciclopirox external shampoo	16	clindamycin phosphate external lotion	27	clopidogrel bisulfate oral	19
ciclopirox olamine external cream	16	clindamycin phosphate external solution	27	clorazepate dipotassium	20
ciclopirox olamine external suspension	27	clindamycin phosphate external swab	28	clotrimazole external cream	28
cilostazol	19	clindamycin phosphate vaginal ...	12	clotrimazole mouth/throat	16
CIMDUO	19	CLINDESSE	12	clotrimazole-betamethasone	28
cimetidine oral	38	CLINPRO 5000	26	clozapine oral tablet	19
CIMZIA (2 SYRINGE)	48	clobazam oral suspension 2.5 mg/ml	13	CLOZARIL	19
CIMZIA-STARTER	48	clobazam oral tablet	13	[Co-Brand Logo] *****	
cinacalcet hcl	52	clobetasol prop emollient base external cream 0.05 %	28	CO-NATAL FA	37
CINRYZE	48	clobetasol propionate e	28	COLAZAL	51
CIPRO ORAL TABLET	12	CLOBETASOL PROPIONATE EXTERNAL CREAM 0.025 %	28	colchicine oral	16
CIPRODEX OTIC SUSPENSION 0.3-0.1 %	54	clobetasol propionate external cream 0.05 %	28	colchicine-probenecid	16
ciprofloxacin hcl ophthalmic	52	clobetasol propionate external foam	28	COLCRYS ORAL TABLET 0.6 MG ..	16
ciprofloxacin hcl oral	12	clobetasol propionate external gel	28	colesevelam hcl oral tablet	21
ciprofloxacin-dexamethasone	54	clobetasol propionate external liquid	28	COLESTID ORAL TABLET	21
citalopram hydrobromide oral tablet	15	clobetasol propionate external ointment	28	colestipol hcl oral tablet	21
claravis	27	clobetasol propionate external shampoo	28	COMBIGAN	53
CLARINEX	55	clobetasol propionate external solution	28	COMBIPATCH	41
clarithromycin oral tablet	12	CLOBEX EXTERNAL SHAMPOO ..	28	COMBIVENT RESPIMAT	56
CLENPIQ	39	CLOBEX SPRAY	28	COMIRNATY	50
CLEOCIN ORAL CAPSULE 150 MG, 300 MG	12	clodan	28	CONCERTA	24
CLEOCIN ORAL CAPSULE 75 MG.	12	CLOMID	51	constulose	39
CLEOCIN ORAL SOLUTION RECONSTITUTED	12	clomiphene citrate oral	51	CONTOUR MONITOR KIT W/ DEVICE	31
CLEOCIN VAGINAL CREAM	12	clomipramine hcl oral	15	CONTOUR NEXT EZ KIT W/ DEVICE	31
CLEOCIN-T	27	clonazepam oral	20	CONTOUR NEXT GEN MONITOR KIT	31
CLIMARA	41, 42	clonidine hcl er	24	CONTOUR NEXT GEN TEST STRIPS	31
CLIMARA PRO	41	clonidine hcl oral	21	CONTOUR NEXT LINK KIT W/ DEVICE	31
clindacin etz external swab	27	clonidine patch weekly 0.1 mg/24hr transdermal	21	CONTOUR NEXT MONITOR KIT W/DEVICE	31
clindacin-p	27			CONTOUR NEXT ONE KIT	31
CLINDAGEL	27			CONTOUR NEXT TEST STRIPS	31
clindamycin hcl oral	12			CONTOUR PLUS BLUE KIT W/ DEVICE	31
clindamycin palmitate hcl	12			CONTOUR PLUS TEST STRIP	31
clindamycin phos (once-daily) gel 1 % external	27			CONTOUR TEST STRIPS	31
clindamycin phos (twice-daily) gel 1 % external	27			COPAXONE	25

dexamethasone oral solution	45	diclofenac sodium external gel 1 %	10	DODEX INJECTION SOLUTION 1000 MCG/ML	37
dexamethasone oral tablet	45	diclofenac sodium external gel 3 %	28	dofetilide	22
dexamethasone oral tablet therapy pack	45	diclofenac sodium ophthalmic	52	donepezil hcl oral tablet	14
dexamethasone sodium phosphate ophthalmic	52	diclofenac sodium oral	10	DOPTelet	36
DEXCOM G6 RECEIVER	31	diclofenac-misoprostol	10	DORZOLAMIDE HCL SOLUTION 2 % OPHTHALMIC	53
DEXCOM G6 SENSOR	31	DICLOFONO	10	dorzolamide hcl-timolol mal	53
DEXCOM G6 TRANSMITTER	31	dicloxacin sodium	12	dorzolamide hcl-timolol mal pf . . .	53
DEXCOM G7 RECEIVER	31	dicyclomine hcl oral capsule	39	dotti	41
DEXCOM G7 SENSOR	31	dicyclomine hcl oral tablet 20 mg	39	DOVATO	19
DEXEDRINE	24	DIFFERIN EXTERNAL GEL 0.3 % . . .	28	doxazosin mesylate oral	22
DEXILANT	38	DIFICID ORAL TABLET	12	doxepin hcl oral capsule	15
dexlansoprazole	38	DIFLUCAN	16	doxepin hcl oral concentrate	15
dexmethylphenidate hcl	24	difluprednate	54	doxepin hcl oral tablet	58
dexmethylphenidate hcl er	24	digoxin oral tablet	21	doxycycline	12, 28
dextroamphetamine sulfate er oral capsule extended release 24 hour 10 mg, 15 mg	24	DILANTIN	13	doxycycline hyclate oral capsule . .	12
dextroamphetamine sulfate er oral capsule extended release 24 hour 5 mg	24	DILAUDID ORAL TABLET	9	doxycycline hyclate oral tablet 100 mg	12
dextroamphetamine sulfate oral tablet 10 mg, 5 mg	25	dilt-xr	21	doxycycline hyclate oral tablet 150 mg, 50 mg, 75 mg	12
dextroamphetamine sulfate oral tablet 15 mg, 2.5 mg, 20 mg, 30 mg, 7.5 mg	25	diltiazem hcl er beads	21	doxycycline hyclate oral tablet 20 mg	12
DHIVY	19	diltiazem hcl er coated beads	21	doxycycline monohydrate oral capsule 100 mg, 50 mg	12
DIABETES CARE	31	diltiazem hcl er oral capsule extended release 12 hour	21	doxycycline monohydrate oral capsule 150 mg, 75 mg	12
DIABETES MONITOR DIGIT ADD-ON	31	diltiazem hcl er oral capsule extended release 24 hour	21	doxycycline monohydrate oral suspension reconstituted	12
DIABETES MONITOR DIGIT SOLN	31	diltiazem hcl er oral tablet extended release 24 hour	21	doxycycline monohydrate oral tablet	12
DIASTAT ACUDIAL RECTAL GEL 10 MG, 20 MG	13	diltiazem hcl oral	21	doxylamine-pyridoxine	15
DIASTAT PEDIATRIC RECTAL GEL 2.5 MG	13	dimethyl fumarate oral	25	DRISDOL	37
diazepam oral solution	20	DIOVAN	22	dronabinol	15
diazepam oral tablet	20	DIOVAN HCT	22	DROPSAFE SAFETY SYRINGE/ NEEDLE	31
diazepam rectal	13	DIPENTUM	51	drospiren-eth estrad-levomefol oral tablet 3-0.02-0.451 mg	41
DICLEGIS	15	diphenoxylate-atropine oral tablet	39	drospiren-eth estrad-levomefol oral tablet 3-0.03-0.451 mg	41
diclofenac potassium oral tablet 25 mg	10	DIPROLENE	28	drospirenone-ethinyl estradiol . . .	41
diclofenac potassium oral tablet 50 mg	10	disulfiram oral	11	DRYSOL	28
diclofenac sodium er	10	DITROPAN XL ORAL TABLET EXTENDED RELEASE 24 HOUR 5 MG	40	DUAVEE	41
		divalproex sodium er	13	DULERA	56
		divalproex sodium oral capsule delayed release sprinkle	13		
		divalproex sodium oral tablet delayed release	13	duloxetine hcl oral capsule delayed release particles 20 mg, 30 mg, 60 mg	15
		DIVIGEL	41		

duloxetine hcl oral capsule delayed release particles 40 mg ..	15
DUPIXENT SUBCUTANEOUS SOLUTION AUTO-INJECTOR	28
DUPIXENT SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 100 MG/0.67ML	28
DUPIXENT SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 200 MG/1.14ML, 300 MG/2ML	28
DUREZOL	54
dutasteride oral	40
DXEVO 11-DAY ORAL TABLET THERAPY PACK 1.5 MG	45
DYANAVAL XR ORAL TABLET EXTENDED RELEASE	25
DYMISTA	55

E

E.E.S. GRANULES	12
EASIVENT	56
EASIVENT MASK LARGE	56
EASIVENT MASK MEDIUM	56
EASIVENT MASK SMALL	56
EASY MAX BLOOD GLUCOSE TEST	32
EASY MAX T1 GLUCOSE SYSTEM ..	32
EASY TOUCH HEALTHPRO GLUCOSE	32
EASY TOUCH TEST	32
EASYGLUCO	32
EASYMAX 15 TEST	32
EASYMAX NG BLOOD GLUCOSE KIT	32
EBGLYSS SUBCUTANEOUS SOLUTION AUTO-INJECTOR	28
EC-NAPROSYN ORAL TABLET DELAYED RELEASE 375 MG	10
EC-NAPROSYN ORAL TABLET DELAYED RELEASE 500 MG	10
ec-naproxen	10
econazole nitrate external	16
EDARBI	22
EDARBYCLOR	22
EEMT	41
EEMT HS	41

EFFEXOR XR	15
EFFIENT	19
EFUDEX EXTERNAL CREAM 5 % ..	28
ELEPSIA XR	13
ELESTRIN	41
eletriptan hydrobromide	16
ELIDEL	28
ELIMITE	18
elinest	41
ELIQUIS	13
ELIQUIS DVT/PE STARTER PACK ..	13
ELLA	41
ELMIRON	40
ELOCTATE	36
eluryng	41
EMBECTA INSULIN SYRINGE	32
EMBRACE BLOOD GLUCOSE TEST	32
EMBRACE WAVE BLOOD GLUCOSE IN VITRO	32
EMEND BIPACK	15
EMGALITY	16
EMPAVELI	48
emtricitabine-tenofovir df oral tablet 100-150 mg, 133-200 mg, 167-250 mg	19
emtricitabine-tenofovir df oral tablet 200-300 mg	20
emzahh	41
enalapril maleate oral solution ..	22
enalapril maleate oral tablet	22
enalapril-hydrochlorothiazide ..	22
ENBREL	48
ENBREL MINI	48
ENBREL SURECLICK	48
endocet	9
ENDOMETRIN	51
ENGERIX-B	50
enilloring	41
ENLITE GLUCOSE SENSOR	32
enoxaparin sodium injection solution prefilled syringe	13
enpresse-28	41
enskyce	41

ENSTILAR	28
entecavir	20
ENTRESTO ORAL TABLET	22
ENTYVIO PEN	48
enulose	39
ENVARUSUS XR	48
EPANED	22
EPCLUSA ORAL TABLET	20
EPIDIOLEX	13
EPIDUO	28
EPIDUO FORTE	28
epinastine hcl	52
EPINEPHRINE INJECTION SOLUTION PREFILLED SYRINGE 0.3 MG/0.3ML	54
epinephrine solution auto- injector 0.15 mg/0.15ml injection.	54
epinephrine solution auto- injector 0.15 mg/0.3ml injection ..	54
epinephrine solution auto- injector 0.3 mg/0.3ml injection ...	54
EPIPEN 2-PAK	54
EPIPEN JR 2-PAK	54
epitol	13
eplerenone	22
EQ BLOOD GLUCOSE TEST	32
eq nicotine	11
eq nicotine mouth/throat gum 4 mg	11
eq nicotine polacrilex	11
eq nicotine step 3	11
eq nicotine polacrilex mouth/ throat lozenge 2 mg, 4 mg	11
ergocalciferol oral capsule	37, 38
ERIVEDGE	17
ERLEADA ORAL TABLET 240 MG ..	17
ERLEADA ORAL TABLET 60 MG ...	17
ERMEZA	46
errin	41
ERYGEL	28
ERYPED 200 ORAL SUSPENSION RECONSTITUTED 200 MG/5ML ..	12
ERYPED 400	12
erythromycin base oral tablet	12

erythromycin ethylsuccinate
oral suspension reconstituted
200 mg/5ml 12

erythromycin ethylsuccinate
oral suspension reconstituted
400 mg/5ml 12

erythromycin external..... 28

erythromycin ophthalmic..... 52

escitalopram oxalate oral
solution 5 mg/5ml..... 15

escitalopram oxalate oral tablet.. 15

ESGIC ORAL CAPSULE
50-325-40 MG 9

ESGIC ORAL TABLET
50-325-40 MG 9

eslicarbazepine acetate 13

esomeprazole magnesium oral
capsule delayed release..... 38

esomeprazole magnesium oral
packet..... 38

est estrogens-methyltest.....
41, 42

est estrogens-methyltest ds..... 41

est estrogens-methyltest hs..... 42

estarylla..... 42

ESTRACE..... 42

estradiol oral.....
42, 44

estradiol patch twice weekly
0.025 mg/24hr transdermal..... 42

estradiol patch twice weekly
0.0375 mg/24hr transdermal..... 42

estradiol patch twice weekly
0.05 mg/24hr transdermal..... 42

estradiol patch twice weekly
0.075 mg/24hr transdermal..... 42

estradiol patch twice weekly
0.1 mg/24hr transdermal..... 42

estradiol transdermal gel
0.25 mg/0.25gm, 0.5 mg/0.5gm,
0.75 mg/0.75gm, 1 mg/gm,
1.25 mg/1.25gm..... 42

estradiol transdermal gel
0.75 mg/1.25 gm (0.06%)..... 42

estradiol transdermal patch
weekly..... 42

estradiol vaginal cream..... 42

estradiol vaginal tablet..... 42

estradiol valerate intramuscular.. 42

estradiol-norethindrone acet..... 42

estratest f.s..... 42

ESTRATEST H.S..... 42

ESTRING..... 42

ESTROGEL..... 42

eszopiclone 58

ethambutol hcl oral..... 17

ethosuximide oral 13

ethynodiol diac-eth estradiol 42

etodolac..... 10

etonogestrel-ethinyl estradiol 42

EUCRISA..... 28

euthyrox..... 46

EVAMIST..... 42

EVEKEO 25

everolimus oral tablet 0.25 mg,
0.5 mg, 0.75 mg, 1 mg 48

everolimus oral tablet 10 mg,
2.5 mg, 5 mg, 7.5 mg 18

EVERSENSE 365 SENSOR/
HOLDER..... 32

EVERSENSE 365 SMART
TRANSMIT 32

EVERSENSE E3 SENSOR/
HOLDER..... 32

EVERSENSE E3 SMART
TRANSMITTER..... 32

EVERSENSE SENSOR/HOLDER... 32

EVERSENSE SMART
TRANSMITTER..... 32

EVISTA 52

EVOXAC..... 26

EVRYSDI ORAL SOLUTION
RECONSTITUTED..... 40

EXELON 14

exemestane..... 18

EXFORGE 22

EXKIVITY ORAL CAPSULE
40 MG 18

EXTAVIA SUBCUTANEOUS KIT
0.3 MG..... 25

EYSUVIS 52

ezetimibe 22

ezetimibe-simvastatin..... 22

F

FABHALTA..... 36

falmina 42

famciclovir oral 20

famotidine oral suspension
reconstituted 38

famotidine oral tablet 20 mg,
40 mg 38

FARXIGA 35

FASENRA PEN..... 56

fayosim oral tablet 42-21-21-7
days 42

febuxostat 16

feirza 1/20..... 42

feirza 1.5/30..... 42

FELDENE ORAL CAPSULE
20 MG 10

felodipine er 22

FEMARA..... 18

FEMRING 42

fenofibrate micronized oral
capsule 130 mg, 134 mg, 200
mg, 43 mg, 67 mg..... 22

FENOFIBRATE MICRONIZED
ORAL CAPSULE 90 MG..... 22

fenofibrate oral capsule 134 mg,
200 mg, 67 mg..... 22

fenofibrate oral tablet 120 mg,
40 mg 22

fenofibrate oral tablet 145 mg,
160 mg, 48 mg, 54 mg..... 22

fenofibric acid oral capsule
delayed release 22

FENOGLIDE ORAL TABLET
120 MG, 40 MG..... 22

fentanyl transdermal patch 72
hour 100 mcg/hr, 12 mcg/hr,
25 mcg/hr, 50 mcg/hr,
75 mcg/hr..... 9

fentanyl transdermal patch 72
hour 37.5 mcg/hr, 62.5 mcg/hr,
87.5 mcg/hr 9

FETZIMA 15

FEXMID 58

fidaxomicin oral tablet 12

FINACEA EXTERNAL FOAM..... 28

FINACEA EXTERNAL GEL 28



finasteride oral tablet 5 mg	40	FLUORIDEX ENHANCED WHITENING.....	26	FORTEO	52
fingolimod hcl	25	FLUORIMAX 5000.....	26, 37	FORTESTA TRANSDERMAL GEL 10 MG/ACT (2%)	45
finzala	42	FLUORIMAX 5000 SENSITIVE....	37	FORTISCARE G1 TEST STRIP IN VITRO STRIP.....	32
FIORICET	9	fluorometholone	52	FORTISCARE TEST IN VITRO STRIP.....	32
FIORICET/CODEINE	9	FLUOROURACIL EXTERNAL CREAM 0.5 %.....	28	FOSAMAX	52
flac otic oil 0.01 %.....	54	fluorouracil external cream 5 %... 28		fosfomycin tromethamine	12
FLAREX	52	fluoxetine hcl oral capsule	15	fosinopril sodium	22
flecainide acetate	22	fluoxetine hcl oral solution.....	15	FRAICHE 5000 DENTAL.....	26
FLEXICHAMBER	56	fluoxetine hcl oral tablet 10 mg... 15		FRAICHE 5000 SENSITIVE DENTAL GEL 1.1-4.5 %	37
FLOMAX ORAL CAPSULE 0.4 MG. 40		fluoxetine hcl oral tablet 20 mg, 60 mg	15	FREESTYLE LIBRE 14 DAY READER	32
FLORAFOL PEDIATRIC ORAL SOLUTION 0.25 MG/ML.....	37	FLUTICASONE FUROATE-VILANTEROL	56	FREESTYLE LIBRE 14 DAY SENSOR	32
FLORAFOL PEDIATRIC ORAL TABLET CHEWABLE 0.5 MG, 1 MG.....	37	fluticasone propionate external cream	28	FREESTYLE LIBRE 2 PLUS SENSOR	32
FLORIVA PLUS	37	fluticasone propionate external ointment	29	FREESTYLE LIBRE 2 READER	32
FLOTREX.....	37	FLUTICASONE PROPIONATE HFA	56	FREESTYLE LIBRE 2 SENSOR	32
FLOVENT HFA INHALATION AEROSOL 110 MCG/ACT, 220 MCG/ACT, 44 MCG/ACT	56	fluticasone propionate nasal.....	55	FREESTYLE LIBRE 3 PLUS SENSOR	32
FLUAD.....	50	FLUTICASONE-SALMETEROL INHALATION AEROSOL	56	FREESTYLE LIBRE 3 READER	32
FLUARIX	50	fluticasone-salmeterol inhalation aerosol powder breath activated 100-50 mcg/act, 250-50 mcg/act, 500-50 mcg/act.....	56	FREESTYLE LIBRE 3 SENSOR	32
FLUCELVAX INTRAMUSCULAR SUSPENSION PREFILLED SYRINGE	50	FLUTICASONE-SALMETEROL INHALATION AEROSOL POWDER BREATH ACTIVATED 113-14 MCG/ACT, 232-14 MCG/ACT, 55-14 MCG/ACT	56	FREESTYLE LIBRE READER.....	32
fluconazole oral.....	16	fluvoxamine maleate	15	FREESTYLE PRECISION NEO SYSTEM	32
fludrocortisone acetate oral	45	fluvoxamine maleate er	15	FREESTYLE PRECISION NEO TEST.....	32
FLULAVAL.....	50	FLUZONE HIGH-DOSE	50	FREESTYLE TEST	32
flunisolide nasal.....	55	FLUZONE INTRAMUSCULAR SUSPENSION PREFILLED SYRINGE	50	FROVA.....	17
fluocinolone acetonide body	28	FML FORTE	52	frovatriptan succinate.....	17
fluocinolone acetonide external cream	28	FML LIQUIFILM	52	ft naloxone hcl.....	11
fluocinolone acetonide external ointment	28	FOCALIN.....	25	ft nicotine	11
fluocinolone acetonide external solution	28	FOCALIN XR	25	ft nicotine mini.....	11
fluocinolone acetonide otic.....	54	folic acid oral tablet 1 mg.....	37	FUROSCIX	22
fluocinolone acetonide scalp	28	FOLLISTIM AQ.....	51	furosemide oral.....	22
fluocinonide external cream 0.05 %	28	FORA 6 CONNECT/GTEL TEST....	32	fyavolv.....	42
fluocinonide external cream 0.1 % 28		FORFIVO XL	15	FYCOMPA ORAL SUSPENSION ...	13
fluocinonide external gel.....	28			FYCOMPA ORAL TABLET.....	13
fluocinonide external ointment... 28				FYREMADEL	51
fluocinonide external solution.... 28					
FLUORIDEX.....	26				

G

g tussin ac..... 55

gabapentin oral capsule.....	13	glipizide-metformin hcl.....	35	GUARDIAN LINK 3 TRANSMITTER.....	32
gabapentin oral solution 250 mg/5ml.....	13	glucagon emergency kit 1 mg injection.....	35	GUARDIAN REAL-TIME REPLACE PED.....	32
GABAPENTIN ORAL TABLET 25 MG, 50 MG.....	14	GLUCAGON EMERGENCY KIT for LOW BLOOD SUGAR.....	35	GUARDIAN SENSOR 3.....	32
gabapentin oral tablet 600 mg, 800 mg.....	14	GLUCOCARD EXPRESSION TEST.....	32	GVOKE HYPOPEN 1-PACK.....	32
GABARONE.....	14	GLUCOCARD SHINE TEST.....	32	GVOKE HYPOPEN 2-PACK.....	32
gallifrey.....	42	GLUCOCARD VITAL TEST.....	32	GVOKE KIT.....	32
ganirelix acetate solution prefilled syringe 250 mcg/0.5ml subcutaneous.....	51	GLUCOTROL XL.....	35	GVOKE PFS.....	32
GARDASIL 9 INTRAMUSCULAR SUSPENSION PREFILLED SYRINGE.....	50	GLUMETZA ORAL TABLET EXTENDED RELEASE 24 HOUR 1000 MG, 500 MG.....	35	GYNAZOLE-1.....	16
GASTROCROM.....	39	glyburide oral.....	35	H	
gatifloxacin ophthalmic.....	52	glyburide-metformin.....	35	habitrol.....	11
gavilyte-c.....	39	GLYCATÉ.....	39	HADLIMA.....	48
gavilyte-g.....	39	glycopyrrolate oral tablet 1 mg, 2 mg.....	39	HADLIMA PUSHTOUCH.....	48
gavilyte-n with flavor pack.....	39	GLYCOPYRROLATE ORAL TABLET 1.5 MG.....	39	HAEGARDA.....	48
GAVRETO.....	18	GLYXAMBI.....	35	hailey 1.5/30.....	42
gemfibrozil oral.....	22	gnp naloxone hcl.....	11	hailey 24 fe.....	42
GEMTESA.....	40	gnp nicotine mini.....	11	hailey fe 1/20.....	42
GEN7T EXTERNAL PATCH 3.5 %....	9	gnp nicotine polacrilex mouth/throat gum 2 mg.....	11	hailey fe 1.5/30.....	42
generlac.....	39	gnp nicotine polacrilex mouth/throat lozenge.....	11	HALCION.....	20
gengraf oral capsule.....	48	gnp nicotine transdermal.....	11	halobetasol propionate external cream.....	29
gentamicin sulfate external.....	12	GOLYTELY.....	39	halobetasol propionate external ointment.....	29
gentamicin sulfate ophthalmic....	52	GONAL-F.....	51	haloette.....	42
GENVOYA.....	20	GONAL-F RFF.....	51	haloperidol oral.....	19
GEODON ORAL.....	19	GONAL-F RFF REDIRECT.....	51	HARVONI ORAL TABLET.....	20
GILENYA ORAL CAPSULE 0.25 MG.....	25	goodsense nicotine.....	11	HAVRIX.....	50
GILENYA ORAL CAPSULE 0.5 MG.....	25	griseofulvin microsize oral suspension.....	16	HEALTHPRO BLOOD GLUCOSE MONITO.....	32
glatiramer acetate.....	25	guaifenesin ac oral syrup 100-10 mg/5ml.....	55	heather.....	42
glatopa.....	25	guaifenesin-codeine.....	55	HEMADY.....	45
GLEEVEC.....	18	guanfacine hcl.....	22, 25	HEMANGEOL.....	22
glimepiride oral tablet 1 mg, 2 mg, 4 mg.....	35	guanfacine hcl er.....	25	HEMICLOR.....	22
glimepiride oral tablet 3 mg.....	35	GUARDIAN 4 GLUCOSE SENSOR.....	32	HEMLIBRA SUBCUTANEOUS SOLUTION 105 MG/0.7ML, 150 MG/ML, 30 MG/ML, 300 MG/2ML, 60 MG/0.4ML.....	36
glipizide er.....	35	GUARDIAN 4 TRANSMITTER.....	32	HEMLIBRA SUBCUTANEOUS SOLUTION 12 MG/0.4ML.....	36
glipizide oral tablet 10 mg, 5 mg..	35	GUARDIAN CONNECT TRANSMITTER.....	32	HEMMOREX-HC RECTAL SUPPOSITORY 25 MG.....	51
glipizide oral tablet 2.5 mg.....	35			HEMMOREX-HC RECTAL SUPPOSITORY 30 MG.....	51
glipizide xl oral tablet extended release 24 hour 10 mg, 2.5 mg, 5 mg.....	35			HEMOFIL M.....	36

HEPLISAV-B.....	51	HUMIRA-PED<40KG CROHNS STARTER SUBCUTANEOUS PREFILLED SYRINGE KIT 80 MG/0.8ML & 40MG/0.4ML	48	hydrocortisone external cream 2.5 %.....	29
HIDEX 6-DAY.....	45	HUMIRA-PED>=40KG CROHNS START SUBCUTANEOUS PREFILLED SYRINGE KIT 80 MG/0.8ML.....	49	hydrocortisone external lotion 2 %.....	29
HIPREX.....	12	HUMIRA-PED>=40KG UC STARTER SUBCUTANEOUS AUTO-INJECTOR KIT 80 MG/0.8ML.....	49	hydrocortisone external lotion 2.5 %.....	29
hm nicotine polacrilex mouth/ throat gum 2 mg, 4 mg	11	HUMIRA-PSORIASIS/UVEIT STARTER	49	hydrocortisone external ointment 1 %, 2.5 %.....	29
hm nicotine polacrilex mouth/ throat lozenge 2 mg	11	HUMULIN 70/30 KWIKPEN	34	hydrocortisone oral.....	45
hm nicotine transdermal patch 24 hour 21 mg/24hr, 7 mg/24hr ...	11	HUMULIN 70/30 VIAL.....	34	hydrocortisone valerate external cream	29
HULIO (2 PEN)	48	HUMULIN N KWIKPEN	34	hydrocortisone-acetic acid	54
HULIO (2 SYRINGE)	48	HUMULIN N VIAL.....	34	hydromet.....	55
HUMALOG CARTRIDGE	34	HUMULIN R U-500 KWIKPEN	34	hydromorphone hcl oral tablet	9
HUMALOG INJECTION.....	34	HUMULIN R U-500 VIAL	34	hydroquinone external	29
HUMALOG KWIKPEN	34	HUMULIN R VIAL	34	hydroxychloroquine sulfate oral ..	18
HUMALOG MIX 50/50 KWIKPEN .	34	HYCODAN ORAL SOLUTION.....	55	HYDROXYM EXTERNAL CREAM ..	29
HUMALOG MIX 50/50 VIAL SUBCUTANEOUS SUSPENSION (50-50) 100 UNIT/ML	34	hydralazine hcl oral	22	hydroxyurea oral.....	18
HUMALOG MIX 75/25 KWIKPEN..	34	HYDREA	18	hydroxyzine hcl oral	20
HUMALOG MIX 75/25 VIAL	34	hydrochlorothiazide oral	22	hydroxyzine pamoate oral.....	20
HUMALOG SUBCUTANEOUS.....	34	hydrocod poli-chlorphe poli er....	55	HYFTOR	49
HUMALOG TEMPO PEN	34	hydrocodone bit-homatrop mbr oral solution.....	55	HYMPAVZI	36
HUMALOG U-100 JUNIOR KWIKPEN.....	34	hydrocodone-acetaminophen oral solution 10-300 mg/15ml	9	hyoscyamine sulfate er.....	39
HUMATE-P	36	hydrocodone-acetaminophen oral solution 10-325 mg/15ml, 7.5-325 mg/15ml.....	9	hyoscyamine sulfate oral tablet... 39	
HUMIRA (1 PEN)	48	hydrocodone-acetaminophen oral tablet 10-300 mg, 5-300 mg, 7.5-300 mg.....	9	hyoscyamine sulfate oral tablet dispersible	39
HUMIRA (2 PEN) AUTO- INJECTOR KIT 40 MG/0.4ML SUBCUTANEOUS.....	48	hydrocodone-acetaminophen oral tablet 10-325 mg, 2.5-325 mg, 5-325 mg, 7.5-325 mg .	9	hyoscyamine sulfate sublingual... 39	
HUMIRA (2 PEN) AUTO- INJECTOR KIT 80 MG/0.8ML SUBCUTANEOUS.....	48	hydrocort-pramoxine (perianal) ..	51	HYPERSAL	55
HUMIRA (2 PEN) SUBCUTANEOUS AUTO- INJECTOR KIT 40 MG/0.8ML	48	hydrocortisone (perianal) external cream 1 %.....	51	HYRIMOZ SUBCUTANEOUS SOLUTION AUTO-INJECTOR 40 MG/0.4ML	49
HUMIRA (2 SYRINGE) PREFILLED SYRINGE KIT 10 MG/0.1ML SUBCUTANEOUS ...	48	hydrocortisone (perianal) external cream 2.5 %.....	51	HYRIMOZ SUBCUTANEOUS SOLUTION AUTO-INJECTOR 40 MG/0.8ML, 80 MG/0.8ML	49
HUMIRA (2 SYRINGE) PREFILLED SYRINGE KIT 20 MG/0.2ML SUBCUTANEOUS...	48	hydrocortisone ace-pramoxine external cream 1-1 %.....	51	HYRIMOZ SUBCUTANEOUS SOLUTION AUTO-INJECTOR 80 MG/0.8ML.....	49
HUMIRA (2 SYRINGE) PREFILLED SYRINGE KIT 40 MG/0.4ML SUBCUTANEOUS ..	48	hydrocortisone acetate rectal	51	HYRIMOZ SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 10 MG/0.1ML, 20 MG/0.2ML, 40 MG/0.4ML.....	49
HUMIRA (2 SYRINGE) SUBCUTANEOUS PREFILLED SYRINGE KIT 40 MG/0.8ML.....	48	hydrocortisone external cream 1 %.....	29	HYRIMOZ SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 40 MG/0.8ML	49
HUMIRA-CD/UC/HS STARTER	48			HYRIMOZ-CROHNS/UC STARTER SUBCUTANEOUS SOLUTION AUTO-INJECTOR 80 MG/0.8ML.....	49

HYRIMOZ-PED<40KG CROHN STARTER	49
HYRIMOZ-PED>/=40KG CROHN START	49
HYRIMOZ-PLAQ PSOR/UEIT START	49
HYRIMOZ-PLAQUE PSORIASIS START	49
HYZAAR	22

I

ibandronate sodium oral	52
IBRANCE ORAL TABLET	18
IBSRELA	39
ibuprofen oral suspension 100 mg/5ml	10
ibuprofen oral tablet 400 mg, 600 mg, 800 mg	10
iclevia	42
ICLUSIG ORAL TABLET 10 MG, 30 MG	18
ICLUSIG ORAL TABLET 15 MG, 45 MG	18
icosapent ethyl	22
IDACIO (2 PEN) SUBCUTANEOUS AUTO- INJECTOR KIT 40 MG/0.8ML	49
IDACIO (2 SYRINGE) SUBCUTANEOUS PREFILLED SYRINGE KIT 40 MG/0.8ML	49
IDACIO-CROHN'S/UC STARTER SUBCUTANEOUS AUTO- INJECTOR KIT 40 MG/0.8ML	49
IDACIO-PSORIASIS STARTER SUBCUTANEOUS AUTO- INJECTOR KIT 40 MG/0.8ML	49
IDELVION	36
IDHIFA	18
IHEALTH BLOOD GLUCOSE TEST STR	32
IHEALTH GLUCO+ KIT 10	32
IHEALTH GLUCO+ KIT 100	32
ILEVRO	52
imatinib mesylate oral	18
IMBRUVICA ORAL CAPSULE	18
IMBRUVICA ORAL TABLET 140 MG, 280 MG	18

IMBRUVICA ORAL TABLET 420 MG	18
imipramine hcl oral	15
imiquimod external cream 3.75 %	29
imiquimod external cream 5 %	29
imiquimod pump	29
IMITREX NASAL SOLUTION 20 MG/ACT, 5 MG/ACT	17
IMITREX ORAL	17
IMITREX STATDOSE SYSTEM	17
IMKELDI	18
IMPOYZ	29
IMURAN	49
IMVEXXY MAINTENANCE PACK	36
IMVEXXY STARTER PACK	36
INBRIJA	19
incassia	42
indapamide	22
INDERAL LA	22
indomethacin er	10
indomethacin oral capsule	10
INGREZZA ORAL CAPSULE 40 MG, 80 MG	26
INGREZZA ORAL CAPSULE 60 MG	26
INGREZZA ORAL CAPSULE SPRINKLE	26
INGREZZA ORAL CAPSULE THERAPY PACK	26
INPEN	32
INSPIREASE	56
INSPIRA	22
INSULIN ASPART	34
INSULIN ASPART FLEXPEN	34
INSULIN DEGLUDEC FLEXTOUCH	34
INSULIN GLARGINE	34
INSULIN GLARGINE MAX SOLOSTAR	34
INSULIN GLARGINE SOLOSTAR	34
INSULIN LISPRO	34
INSULIN LISPRO (1 UNIT DIAL)	34
INSULIN LISPRO KWIKPEN	34
INSULIN LISPRO PROT & LISPRO	34

INSULIN PEN NEEDLES 29G X 12MM, 30G X 5 MM, 31G X 5 MM, 31G X 6 MM, 31G X 8 MM, 32G X 4 MM	32
INSULIN SYRINGES 27G X 1/2" 0.5 ML, 27G X 1/2" 1 ML, 28G X 1/2" 0.5 ML, 28G X 1/2" 1 ML, 29G X 1/2" 0.5 ML, 29G X 1/2" 1 ML, 30G X 1/2" 1 ML, 30G X 5/16" 0.5 ML, 31G X 5/16" 0.5 ML, 31G X 5/16" 1 ML	32
INTRAROSA	36
introvale	42
INTUNIV	25
INVEGA	19
INVELTYS	52
INVOKANA	35
INZIRQO	22
IPOL	51
ipratropium bromide inhalation	56
ipratropium bromide nasal	55
ipratropium-albuterol	56
IQIRVO	39
irbesartan	22
irbesartan-hydrochlorothiazide	22
ISENTRESS HD	20
ISENTRESS ORAL TABLET	20
isibloom	42
isoniazid oral tablet	17
ISOPTO ATROPINE OPHTHALMIC SOLUTION 1 %	54
ISORDIL TITRADOSE	22
isosorbide dinitrate oral tablet 10 mg, 20 mg, 30 mg, 5 mg	22
isosorbide dinitrate oral tablet 40 mg	22
isosorbide mononitrate er	22
isotretinoin oral capsule 10 mg, 20 mg, 30 mg, 40 mg	29
isotretinoin oral capsule 25 mg, 35 mg	29
ISTALOL	53
itraconazole oral capsule	16
ivabradine hcl	22
ivermectin external cream	29
ivermectin oral tablet 3 mg	18

ivermectin oral tablet 6 mg 18
IYUZEH..... 53

J

jaimiess..... 42
JAKAFI..... 18
jantoven..... 13
JANUMET..... 35
JANUVIA..... 35
JARDIANCE..... 35
jasmiel..... 42
JATENZO..... 46
jencycla..... 42
JENTADUETO..... 35
JENTADUETO XR..... 35
jinteli..... 42
jolessa..... 42
JORNAY PM..... 25
JOURNAVX..... 9
JUBLIA..... 16
juleber..... 42
JULUCA..... 20
junel 1/20..... 43
junel 1.5/30..... 43
junel fe 1/20..... 43
junel fe 1.5/30..... 43
junel fe 24..... 43
JUST RIGHT 5000 DENTAL GEL
1.1 %..... 26
JUST RIGHT 5000 DENTAL
PASTE..... 26
JYLAMVO..... 49
JYNARQUE ORAL TABLET
THERAPY PACK 15 MG, 45 & 15
MG, 60 & 30 MG, 90 & 30 MG..... 40
JYNARQUE ORAL TABLET
THERAPY PACK 30 & 15 MG..... 40

K

K-PHOS-NEUTRAL..... 37
K-TAB ORAL TABLET EXTENDED
RELEASE 10 MEQ, 20 MEQ..... 37
kalliga..... 43
KAPSPARGO SPRINKLE..... 22

KAPVAY ORAL TABLET
EXTENDED RELEASE 12 HOUR
0.1 MG..... 25
kariva..... 43
kelnor 1/35..... 43
kelnor 1/50..... 43
KEPPRA ORAL..... 14
KEPPRA XR..... 14
KERENDIA ORAL TABLET 10 MG,
20 MG..... 22
KESIMPTA..... 25
ketoconazole external cream..... 16
ketoconazole external shampoo..... 16
ketoconazole oral..... 16
ketorolac tromethamine
ophthalmic..... 52
ketorolac tromethamine oral..... 10
KEVZARA SUBCUTANEOUS
SOLUTION AUTO-INJECTOR..... 49
KISQALI..... 18
KLARITY-A..... 52
KLARITY-C DROPS..... 54
KLARON..... 29
klayesta..... 16
KLISYRI (250 MG)..... 29
KLISYRI (350 MG)..... 29
KLONOPIN..... 20
klor-con..... 37
klor-con 10..... 37
klor-con m10..... 37
klor-con m15..... 37
klor-con m20..... 37
KLOXXADO..... 11
kls quit2..... 11
kls quit4..... 11
KOATE..... 36
KOATE-DVI..... 36
KOGENATE FS..... 36
KOMBIGLYZE XR ORAL TABLET
EXTENDED RELEASE 24 HOUR
2.5-1000 MG, 5-1000 MG,
5-500 MG..... 35
KOSELUGO..... 18
KOURZEQ..... 26
KOVALTRY..... 36

KRINTAFEL..... 18
kurvelo..... 43
KYZATREX..... 46

L

labetalol hcl oral..... 22
lacosamide oral..... 14
lactulose encephalopathy..... 39
lactulose oral solution..... 39
LAGEVRIO..... 20
LAMICTAL..... 14
LAMICTAL ODT ORAL TABLET
DISPERSIBLE..... 14
LAMICTAL XR ORAL TABLET
EXTENDED RELEASE 24 HOUR... 14
lamotrigine er..... 14
lamotrigine oral tablet..... 14
lamotrigine oral tablet chewable . 14
lamotrigine oral tablet
dispersible..... 14
LANCETS..... 32
LANOXIN ORAL TABLET
125 MCG, 250 MCG..... 22
LANOXIN ORAL TABLET
62.5 MCG..... 22
lansoprazole oral capsule
delayed release..... 38
lansoprazole oral tablet delayed
release dispersible..... 38
LANTUS SOLOSTAR..... 34
LANTUS U-100 VIAL..... 34
larin 1/20..... 43
larin 1.5/30..... 43
larin 24 fe..... 43
larin fe 1/20..... 43
larin fe 1.5/30..... 43
LASIX..... 22
latanoprost ophthalmic..... 53
LATUDA..... 19
LEDIPASVIR-SOFOSBUVIR..... 20
leena..... 43
leflunomide oral..... 49
lenalidomide..... 18
lessina..... 43
letrozole oral..... 18



leucovorin calcium oral.....	18	lidocaine hcl mouth/throat	26	loryna	43
leuprolide acetate injection.....	45	lidocaine viscous hcl.....	26	losartan potassium oral	22
levalbuterol hcl inhalation.....	56	lidocaine-prilocaine external cream	9	losartan potassium-hctz	22
LEVALBUTEROL HFA INHALATION AEROSOL 45 MCG/ACT.....	56	LIDOCAN	9	LOTEMAX OPHTHALMIC GEL.....	52
LEVBID.....	39	LIDODERM.....	9	LOTEMAX OPHTHALMIC OINTMENT.....	52
levetiracetam er	14	LIDOTRAL 1 EXTERNAL PATCH 4.88 %	9	LOTEMAX OPHTHALMIC SUSPENSION	53
levetiracetam oral solution.....	14	LIKMEZ.....	12	LOTEMAX SM	53
levetiracetam oral tablet.....	14	linezolid oral tablet	12	LOTENSIN.....	22
levo-t	46	LINZESS.....	39	LOTENSIN HCT	22
levocarnitine oral solution.....	37	liothyronine sodium oral	46	loteprednol etabonate ophthalmic gel.....	53
levocarnitine oral tablet.....	40	LIPITOR.....	22	loteprednol etabonate ophthalmic suspension.....	53
levocarnitine sf	37	liraglutide solution pen-injector 18 mg/3ml subcutaneous	35	LOTREL.....	22
levocetirizine dihydrochloride oral solution.....	55	lisdexamphetamine dimesylate.....	25	lovastatin oral.....	22
levocetirizine dihydrochloride oral tablet.....	55	lisinopril oral	22	LOVAZA	22
levofloxacin oral tablet.....	12	lisinopril-hydrochlorothiazide.....	22	LOVENOX INJECTION SOLUTION PREFILLED SYRINGE. 13	
levonest	43	LITFULO	49	low-ogestrel	43
levonorg-eth estrad triphasic.....	43	lithium carbonate er.....	20	lubiprostone	39
levonorgest-eth est & eth est oral tablet 42-21-21-7 days	43	lithium carbonate oral.....	20	LUMAKRAS.....	18
levonorgest-eth estrad 91-day oral tablet 0.1-0.02 & 0.01 mg, 0.15-0.03 & 0.01 mg	43	LITHOBID.....	20	LUMIGAN	53
levonorgest-eth estrad 91-day oral tablet 0.15-0.03 mg.....	43	LIVALO	22	LUMRYZ.....	58
levonorgestrel-ethinyl estrad oral tablet 0.1-20 mg-mcg, 0.15-30 mg-mcg.....	43	LIVDELZI	39	LUNESTA	58
levora 0.15/30 (28)	43	LO LOESTRIN FE.....	43	LUPKYNIS.....	49
LEVOTHYROXINE SODIUM ORAL CAPSULE.....	46	lo-zumandimine	43	lurasidone hcl.....	19
levothyroxine sodium oral tablet .	46	LODINE	10	lutera.....	43
levoxyl.....	46	LODOCO	22	lyleq	43
LEVSIN.....	39	LOESTRIN 1/20 (21)	43	lyllana	43
LEVSIN/SL	39	LOESTRIN 1.5/30 (21)	43	LYNPARZA	18
LEXAPRO.....	15	LOESTRIN FE 1/20.....	43	LYRICA ORAL CAPSULE.....	26
LIALDA.....	51	LOESTRIN FE 1.5/30.....	43	LYUMJEV KWIKPEN	34
LIBERVANT BUCCAL FILM 10 MG, 12.5 MG, 15 MG, 5 MG, 7.5 MG	14	LOFENA	10	LYUMJEV TEMPO PEN.....	34
LIBRAX.....	39	lojaimiess	43	LYUMJEV VIAL	34
lidocaine external ointment 5 % ...	9	LOKELMA	37	lyza	43
lidocaine external patch 5 %	9	LOMOTIL.....	39		
		loperamide hcl oral capsule.....	39		
		LOPID	22		
		LOPRESSOR ORAL TABLET	22		
		LOPROX EXTERNAL SHAMPOO 1 %	16		
		LOPROX EXTERNAL SUSPENSION 0.77 %.....	29		
		lorazepam oral tablet.....	20		

M

M-M-R II.....	51
M-NATAL PLUS.....	37
MACROBID.....	12
MACRODANTIN.....	12
MALARONE	18

MARINOL	15	mesalamine oral capsule delayed release 400 mg.....	52	methylphenidate hcl er (osm) oral tablet extended release 72 mg.....	25
marlissa	43	mesalamine oral tablet delayed release 1.2 gm.....	52	methylphenidate hcl er (xr)	25
matzim la.....	23	mesalamine oral tablet delayed release 800 mg	52	methylphenidate hcl er oral tablet extended release.....	25
MAVENCLAD.....	25	mesalamine rectal enema.....	52	methylphenidate hcl er oral tablet extended release 24 hour ..	25
MAVYRET ORAL PACKET.....	20	mesalamine rectal suppository ...	52	methylphenidate hcl oral solution	25
MAXALT	17	MESTINON ORAL TABLET	17	methylphenidate hcl oral tablet ..	25
MAXALT-MLT	17	METADATE CD	25	methylphenidate hcl oral tablet chewable.....	25
maxi-tuss ac	55	metaxalone oral tablet 400 mg, 800 mg.....	58	methylprednisolone oral	45
MAXITROL	53	metaxalone oral tablet 640 mg...	58	metoclopramide hcl oral tablet...	16
MAXZIDE ORAL TABLET 75-50 MG	23	metformin hcl er.....	35	metolazone	23
MAXZIDE-25 ORAL TABLET 37.5-25 MG	23	metformin hcl er (mod)	35	metoprolol succinate er oral tablet extended release 24 hour 100 mg, 200 mg, 50 mg	23
MAYZENT STARTER PACK ORAL TABLET THERAPY PACK 12 X 0.25 MG	25	metformin hcl er (osm).....	35	metoprolol succinate er oral tablet extended release 24 hour 25 mg.....	23
MAYZENT STARTER PACK ORAL TABLET THERAPY PACK 7 X 0.25 MG	26	metformin hcl oral tablet 1000 mg, 500 mg, 850 mg	35	metoprolol tartrate oral tablet 100 mg, 25 mg, 50 mg	23
meclizine hcl oral tablet.....	16	metformin hcl oral tablet 625 mg, 750 mg	35	metoprolol tartrate oral tablet 37.5 mg, 75 mg.....	23
MEDROL ORAL TABLET 16 MG, 4 MG, 8 MG.....	45	methadone hcl oral tablet.....	9	metoprolol-hydrochlorothiazide..	23
MEDROL ORAL TABLET 2 MG	45	methenamine hippurate	12	METROCREAM.....	29
MEDROL ORAL TABLET THERAPY PACK	45	methimazole oral.....	46	METROGEL	29
medroxyprogesterone acetate intramuscular.....	43	methocarbamol oral tablet 1000 mg.....	58	METROLOTION.....	29
medroxyprogesterone acetate oral	43	methocarbamol oral tablet 500 mg, 750 mg	58	metronidazole external cream....	29
mefloquine hcl.....	18	methotrexate sodium (pf)	49	metronidazole external gel 0.75 %	29
megestrol acetate oral suspension 40 mg/ml	45	methotrexate sodium injection solution	49	metronidazole external gel 1 %....	29
megestrol acetate oral tablet....	43	methotrexate sodium oral	49	metronidazole external lotion	29
meleya	43	METHYLIN	25	metronidazole oral tablet 125 mg.	12
meloxicam oral tablet.....	10	methylphenidate hcl er (cd).....	25	metronidazole oral tablet 250 mg, 500 mg	12
memantine hcl er	14	methylphenidate hcl er (la) oral capsule extended release 24 hour 10 mg, 20 mg, 30 mg, 40 mg	25	metronidazole vaginal.....	12
memantine hcl oral tablet.....	14	methylphenidate hcl er (la) oral capsule extended release 24 hour 60 mg.....	25	mexiletine hcl oral	23
MENOPUR.....	51	methylphenidate hcl er (osm) oral tablet extended release 18 mg, 27 mg, 36 mg, 54 mg	25	mibelas 24 fe.....	43
MENOSTAR.....	43	METHYLPHENIDATE HCL ER (OSM) ORAL TABLET EXTENDED RELEASE 45 MG, 63 MG.....	25	MICARDIS.....	23
MENQUADFI.....	51			MICARDIS HCT	23
MENVEO	51			MICROCHAMBER.....	56
MEPRON	18			MICRODOT TEST	33
mercaptopurine oral tablet	18			microgestin 1/20	43
mesalamine er oral capsule 0.375 gm	51			microgestin 1.5/30	43

microgestin 24 fe oral tablet 1-20 mg-mcg.....	43	morphine sulfate er oral tablet extended release	9	naloxone hcl injection solution prefilled syringe	11	
microgestin fe 1/20.....	43	morphine sulfate oral tablet	9	naloxone hcl nasal	11	
microgestin fe 1.5/30.....	43	MOTEGRITY	39	naltrexone hcl oral.....	11	
midodrine hcl	23	MOTPOLY XR.....	14	NAMENDA ORAL TABLET 10 MG, 5 MG.....	14	
MIEBO.....	54	MOUNJARO.....	35	NAMENDA TITRATION PAK	14	
mili	43	MOVIPREP	39	NAMENDA XR ORAL CAPSULE EXTENDED RELEASE 24 HOUR 14 MG, 21 MG, 28 MG, 7 MG	14	
mimvey.....	43	moxifloxacin hcl (2x day).....	53	NAPROSYN.....	10	
MINASTRIN 24 FE ORAL TABLET CHEWABLE 1-20 MG-MCG(24)....	43	moxifloxacin hcl ophthalmic.....	53	naproxen dr	10	
MINILINK REAL-TIME TRANSMITTER.....	33	moxifloxacin hcl oral	12	naproxen oral tablet.....	10	
MINIMED 630G GUARDIAN PRESS	33	MS CONTIN.....	9	naproxen oral tablet delayed release	10	
MINIPRESS ORAL CAPSULE 1 MG, 2 MG, 5 MG	23	MULTAQ.....	23	naproxen sodium oral tablet 275 mg, 550 mg.....	10	
MINIVELLE	42, 43	MULTI-VIT-FLOR	37	naratriptan hcl	17	
minocycline hcl oral capsule	12	multi-vitamin/fluoride	37	NARCAN.....	11	
minoxidil oral	23	multivitamin w/fluoride tablet chewable 0.25 mg oral	37	NASCOBAL.....	37	
mirabegron er.....	40	multivitamin w/fluoride tablet chewable 0.5 mg oral.....	37	NATAZIA	43	
MIRCETTE ORAL TABLET 0.15-0.02/0.01 MG (21/5)	43	multivitamin w/fluoride tablet chewable 1 mg oral	37	nateglinide.....	35	
mirtazapine oral	15	multivitamin/fluoride oral tablet chewable.....	37	NATESTO.....	46	
MIRVASO.....	29	mupirocin cream	12	NAYZILAM	14	
misoprostol oral	38	mupirocin ointment.....	12	nebivolol hcl	23	
MITIGARE.....	16	MYAMBUTOL ORAL TABLET 400 MG.....	17	NEBUSAL INHALATION NEBULIZATION SOLUTION 3 %... 55		
MM BLOOD GLUCOSE SYSTEM... 33		mycophenolate mofetil oral capsule.....	49	NEBUSAL INHALATION NEBULIZATION SOLUTION 6 %... 55		
MM BLOOD GLUCOSE SYSTEM REFILL	33	mycophenolate mofetil oral tablet.....	49	necon 0.5/35 (28).....	43	
MM BLULINK GLUCOSE TEST ... 33		mycophenolate sodium	49	NEFFY	54	
MM EASY TOUCH GLUCOSE METER.....	33	mycophenolic acid	49	NEMLUVIO.....	29	
modafinil oral.....	58	MYDAYIS.....	25	neomycin sulfate oral	12	
MODERNA COVID-19 VAC 6M-11Y	51	MYFEMBREE	43	neomycin-polymyxin-dexameth . 53		
mometasone furoate external.... 29		MYFORTIC	49	neomycin-polymyxin-hc otic	54	
mometasone furoate nasal	55	MYHIBBIN.....	49	NEONATAL COMPLETE.....	37	
MONDOXYNE NL	12	MYRBETRIQ ORAL TABLET EXTENDED RELEASE 24 HOUR ... 40		NEONATAL PLUS.....	37	
mono-lynyah	43	MYSOLINE.....	14	NEONATAL PRENATAL.....	37	
MONOJECT HYPODERMIC NEEDLE 18G X 1”.....	33				NEONATAL VITAMIN	37
montelukast sodium oral packet . 56		N			NEORAL ORAL CAPSULE.....	49
montelukast sodium oral tablet .. 56		na sulfate-k sulfate-mg sulf.....	39	NESINA ORAL TABLET 12.5 MG, 25 MG, 6.25 MG	35	
montelukast sodium oral tablet chewable.....	56	nabumetone oral	10	neuac.....	29	
		nadolol oral	23	NEULASTA	36	
		NALOCET	9	NEUPRO.....	19	

NEURONTIN	14	NOC DURNA SUBLINGUAL TABLET SUBLINGUAL 27.7 MCG, 55.3 MCG.....	45	NOVOLIN N FLEXPEN	34
NEUTEK 2TEK TEST.....	33	nora-be.....	43	NOVOLIN N FLEXPEN RELION ...	34
NEVANAC	53	NORDITROPIN FLEXPEN	45	NOVOLIN N RELION.....	34
NEXIUM ORAL CAPSULE DELAYED RELEASE.....	38	norelgestromin-eth estradiol.....	43	NOVOLIN N VIAL.....	34
NEXIUM ORAL PACKET	38	norethin ace-eth estrad-fe oral tablet.....	43	NOVOLIN R FLEXPEN RELION SOLUTION PEN-INJECTOR 100 UNIT/ML INJECTION.....	34
NEXLETOL	23	norethin ace-eth estrad-fe oral tablet chewable.....	43	NOVOLIN R FLEXPEN SOLUTION PEN-INJECTOR 100 UNIT/ML INJECTION.....	34, 35
NEXLIZET.....	23	norethindron-ethinyl estrad-fe oral tablet 1-20/1-30/1-35 mg- mcg	44	NOVOLIN R RELION.....	35
NEXTSTELLIS.....	43	norethindrone acet-ethinyl est ...	43	NOVOLIN R VIAL	35
NGENLA.....	45	norethindrone acetate oral	43	NOVOLOG FLEXPEN	35
niacin er (antihyperlipidemic)....	23	norethindrone oral	43	NOVOLOG FLEXPEN RELION.....	35
NICODERM CQ	11	norethindrone-eth estradiol	44	NOVOLOG RELION.....	35
NICORETTE MINI.....	11	norgestimate-eth estradiol oral tablet 0.25-35 mg-mcg	44	NOVOLOG U-100 VIAL.....	35
NICORETTE MOUTH/THROAT GUM.....	11	norgestimate-ethinyl estradiol triphasic oral tablet 0.18/0.215/0.25 mg-25 mcg.....	44	NOVOPEN ECHO.....	33
NICORETTE MOUTH/THROAT LOZENGE	11	NORITATE.....	29	NOXAFIL ORAL TABLET DELAYED RELEASE.....	16
NICORETTE STARTER KIT.....	11	NORLIQVA	23	np thyroid	46
nicotine mini.....	11	norlyroc	44	NUBEQA.....	18
nicotine polacrilex mini.....	11	NORPRAMIN.....	15	NUCALA SUBCUTANEOUS SOLUTION AUTO-INJECTOR	57
nicotine polacrilex mouth/throat. .	11	nortrel 0.5/35 (28).....	44	NUCALA SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 100 MG/ML	57
nicotine step 1	11	nortrel 1/35 (21)	44	NUCALA SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 40 MG/0.4ML	57
nicotine step 2	11	nortrel 1/35 (28)	44	NUCYNTA	9
nicotine step 3	11	nortrel 7/7/7	44	NUCYNTA ER.....	9
nicotine transdermal patch 24 hour	11	nortriptyline hcl oral capsule.....	15	NUDEXTA.....	26
nifedipine er	23	NORVASC	23	NULEV.....	39
nifedipine er osmotic release	23	NOVAREL	51	NURTEC.....	17
nifedipine oral	23	NOVOEIGHT	36	NUTROPIN AQ NUSPIN 10	45
nikki	43	NOVOFINE AUTOCOVER PEN NEEDLE 30G X 8 MM	33	NUTROPIN AQ NUSPIN 20	45
nilotinib hcl.....	18	NOVOFINE PEN NEEDLE.....	33	NUTROPIN AQ NUSPIN 5.....	45
NITRO-BID.....	23	NOVOFINE PLUS PEN NEEDLE ...	33	NUVARING.....	44
NITRO-DUR.....	23	NOVOLIN 70/30 FLEXPEN.....	34	NUVESSA.....	12
nitrofurantoin macrocrystal	12	NOVOLIN 70/30 FLEXPEN RELION.....	34	NUVIGIL	58
nitrofurantoin monohydrate macrocrystals.....	12	NOVOLIN 70/30 RELION	34	NUWIQ INTRAVENOUS KIT 1000 UNIT, 2000 UNIT, 250 UNIT, 2500 UNIT, 3000 UNIT, 4000 UNIT, 500 UNIT	36
nitroglycerin rectal	23	NOVOLIN 70/30 VIAL.....	34	NUWIQ INTRAVENOUS KIT 1500 UNIT.....	36
nitroglycerin sublingual	23				
nitroglycerin transdermal.....	23				
NITROSTAT	23				
NIVA THYROID.....	46				
NIVA-PLUS	37				
NIVESTYM	36				

NUZYRA ORAL.....	12	OMNIPOD 5 G7 PODS (GEN 5)....	33	ORENCIA SUBCUTANEOUS	49
nyamyc.....	16	OMNIPOD 5 LIBRE INTRO KIT....	33	ORFADIN.....	40
nylia 1/35.....	44	OMNIPOD 5 LIBRE PODS	33	ORGOVYX.....	18
nylia 7/7/7.....	44	OMNITROPE.....	45	ORIAHNN	45
nymyo oral tablet 0.25-35 mg- mcg	44	OMVOH (300 MG DOSE) SUBCUTANEOUS SOLUTION AUTO-INJECTOR.....	49	ORILISSA	45
nystatin external.....	16	OMVOH SUBCUTANEOUS SOLUTION AUTO-INJECTOR	49	orphenadrine citrate er.....	58
nystatin mouth/throat	16	ON CALL EXPRESS BLOOD GLUCOSE	33	OSCIMIN	39
nystatin oral.....	16	ON CALL EXPRESS MONITORING SYS.....	33	oseltamivir phosphate oral.....	20
nystatin-triamcinolone.....	16	ondansetron hcl oral	16	OSPHENA	36
nystop.....	16	ondansetron odt oral tablet dispersible 16 mg	16	OTEZLA ORAL TABLET 20 MG	49
NYVEPRIA.....	36	ondansetron odt oral tablet dispersible 4 mg, 8 mg	16	OTEZLA ORAL TABLET 30 MG	49
O		ONE VITE WOMENS.....	37	OTREXUP.....	50
ocella.....	44	ONE VITE WOMENS PLUS.....	37	OVACE PLUS WASH EXTERNAL LIQUID	29
OCUFLOX	53	ONETOUCH ULTRA 2 KIT W/ DEVICE.....	33	OVACE WASH	29
ODACTRA	55	ONETOUCH ULTRA BLUE TEST ...	33	OVIDREL	51
ODEFSEY.....	20	ONETOUCH ULTRA TEST STRIPS.	33	oxaprozin oral tablet.....	10
ODOMZO.....	18	ONETOUCH VERIO FLEX SYSTEM KIT.....	33	OXAYDO ORAL TABLET 5 MG, 7.5 MG	9
OFEV	57	ONETOUCH VERIO IQ SYSTEM KIT W/DEVICE.....	33	oxcarbazepine	14
ofloxacin ophthalmic.....	53	ONETOUCH VERIO KIT W/ DEVICE.....	33	oxcarbazepine er	14
ofloxacin otic	54	ONETOUCH VERIO REFLECT KIT W/DEVICE	33	oxybutynin chloride er	40
olanzapine oral tablet	19	ONETOUCH VERIO TEST STRIPS .	33	oxybutynin chloride oral solution.	40
olanzapine oral tablet dispersible.	19	ONEXTON.....	29	oxybutynin chloride oral tablet 2.5 mg	40
olmesartan medoxomil oral.....	23	ONFI	14	oxybutynin chloride oral tablet 5 mg.....	40
olmesartan medoxomil-hctz.....	23	ONGLYZA	35	OXYCODONE HCL ER ORAL TABLET ER 12 HOUR ABUSE- DETERRENT 10 MG, 20 MG, 40 MG, 80 MG.....	9
olmesartan-amlodipine-hctz	23	ONYDA XR.....	25	oxycodone hcl oral capsule	9
olopatadine hcl nasal.....	55	OPSUMIT.....	57	oxycodone hcl oral solution.....	9
olopatadine hcl ophthalmic solution 0.1 %	53	OPTIUMEZ TEST.....	33	oxycodone hcl oral tablet 10 mg, 15 mg, 20 mg, 30 mg, 5 mg.....	9
olopatadine hcl ophthalmic solution 0.2 %	53	OPVEE.....	11	OXYCODONE-ACETAMINOPHEN ORAL TABLET 10-300 MG, 2.5-300 MG, 5-300 MG, 7.5-300 MG.....	10
OLUMIANT ORAL TABLET 1 MG, 4 MG.....	49	OPZELURA	29	oxycodone-acetaminophen oral tablet 10-325 mg, 2.5-325 mg, 5-325 mg, 7.5-325 mg	10
OLUMIANT ORAL TABLET 2 MG ..	49	ORACEA.....	29	OXYCONTIN	10
OMECLAMOX-PAK.....	38	ORACIT	37	OZEMPIC SUBCUTANEOUS SOLUTION PEN-INJECTOR 2 MG/3ML.....	35
omega-3-acid ethyl esters	23	ORAL CITRATE.....	37		
omeprazole oral capsule delayed release	38	ORALONE.....	26		
OMNIPOD 5 DEXCOM INTRO KIT.....	33	ORENCIA CLICKJECT.....	49		
OMNIPOD 5 DEXCOM PODS.....	33				
OMNIPOD 5 G7 INTRO (GEN 5) KIT.....	33				

OZEMPIC SUBCUTANEOUS
SOLUTION PEN-INJECTOR
4 MG/3ML, 8 MG/3ML..... 35

P

PACERONE ORAL TABLET
100 MG, 400 MG..... 23
PACERONE ORAL TABLET
200 MG..... 23
paliperidone er..... 19
PAMELOR 15
PANCREAZE..... 40
PANRETIN..... 29
pantoprazole sodium oral tablet
delayed release..... 38
PARADIGM REAL-TIME
TRANSMITTER..... 33
PARLODEL ORAL TABLET..... 19
paroxetine hcl er..... 15
paroxetine hcl oral tablet..... 15
PATANASE NASAL SOLUTION
0.6 %..... 55
PAXIL..... 15
PAXIL CR..... 15
PAXLOVID..... 20
PEDIAPRED 45
peg 3350-kcl-na bicarb-nacl..... 39
peg-3350/electrolytes 39
peg-3350/electrolytes/ascorbat . 39
peg-kcl-nacl-nasulf-na asc-c 39
penicillin v potassium 13
pentoxifylline er 23
PEPCID..... 38
perampanel..... 14
PERCOCET 10
PERFOROMIST..... 57
PERIDEX 26
periogard 26
permethrin external 18
perphenazine oral 16
PERTZYE 40
PFIZER COVID-19 VAC-TRIS
5-11Y..... 51
PFIZER COVID-19 VAC-TRIS
6M-4Y 51

phenazo oral tablet 200 mg..... 40
phenazopyridine hcl oral tablet
100 mg, 200 mg 40
phenobarbital oral tablet..... 14
phenytek..... 14
phenytoin sodium extended 14
PHEXXI..... 44
philith 44
PHOSPHA 250 NEUTRAL 37
phospho-trin 250 neutral 37
phosphorous..... 37
pilocarpine hcl oral 26
pimecrolimus 29
pimtrea..... 44
pioglitazone hcl..... 36
pioglitazone hcl-metformin hcl... 36
PIP BLOOD GLUCOSE TEST
STRIP..... 33
PIQRAY 18
piroxicam oral..... 10
pitavastatin calcium..... 23
PLAQUENIL..... 19
PLAVIX 19
PLEGRIDY INTRAMUSCULAR..... 26
PLEGRIDY STARTER PACK..... 26
PLEGRIDY SUBCUTANEOUS 26
PLENVU 39
PLEXION CLEANSER 29
pnv 27-ca/fe/fa 37
podofilox external solution 29
POKONZA 37
POLY-VI-FLOR ORAL TABLET
CHEWABLE..... 37
POLYCIN 53
polymyxin b-trimethoprim..... 53
POMALYST 18
portia-28 44
posaconazole oral tablet
delayed release..... 16
potassium chloride crys er..... 37
potassium chloride er 37
potassium chloride oral 37
potassium citrate er 38
PRADAXA ORAL CAPSULE..... 13

PRALUENT 23
pramipexole dihydrochloride 19
prasugrel hcl..... 19
pravastatin sodium..... 23
prazosin hcl oral 23
PRECISION XTRA BLOOD
GLUCOSE 33
PRECISION XTRA KIT W/DEVICE. 33
PRED FORTE 53
PRED MILD..... 53
prednisolone acetate ophthalmic 53
PREDNISOLONE ACETATE P-F.... 53
prednisolone oral solution 45
prednisolone sodium phosphate
oral solution 10 mg/5ml,
25 mg/5ml, 5 mg/5ml 45
prednisolone sodium phosphate
oral solution 15 mg/5ml 45
prednisolone sodium phosphate
oral solution 20 mg/5ml..... 45
prednisone oral 45
pregabalin oral capsule..... 26
PREGNYL..... 51
PREMARIN ORAL 44
PREMARIN VAGINAL 44
PREMIUM BLOOD GLUCOSE
TEST IN VITRO STRIP 33
premium lidocaine..... 10
PREMPHASE 44
PREMPRO 44
prenatal oral tablet 27-0.8 mg 38
prenatal oral tablet 27-1 mg 38
prenatal plus 38
prenatal plus vitamin/mineral. 38
prenatal vitamins oral tablet
27-0.8 mg 38
PRENATE MINI..... 38
PRENATOL-M..... 38
PRENATRIX 38
PRENATRYL 38
PREVACID..... 38
PREVACID SOLUTAB..... 38
prevalite..... 23
PREVIDENT 5000 BOOSTER
PLUS..... 26



PREVIDENT 5000 DRY MOUTH...	26
PREVIDENT 5000 ENAMEL PROTECT.....	38
PREVIDENT 5000 KIDS	26
PREVIDENT 5000 ORTHO DEFENSE.....	26
PREVIDENT 5000 PLUS	26
PREVIDENT 5000 SENSITIVE	38
PREVIDENT DENTAL	26
PREVNAR 20	51
PREVYMIS ORAL TABLET	20
PREZCOBIX.....	20
primidone oral tablet 125 mg	14
primidone oral tablet 250 mg, 50 mg	14
PRIORIX.....	51
PRISTIQ.....	15
probenecid.....	16
PROCARDIA XL	23
PROCHAMBER VHC.....	57
prochlorperazine maleate oral....	16
PROCORT	52
procto-med hc.....	52
PROCTOCORT	52
PROCTOFOAM HC.....	52
PROCTOSOL HC.....	52
PROCTOZONE-HC.....	52
progesterone intramuscular	44
progesterone oral	44
PROGRAF ORAL CAPSULE	50
PROLATE ORAL TABLET.....	10
PROLENSA	53
promethazine hcl oral solution....	16
promethazine hcl oral tablet.....	16
promethazine hcl rectal.....	16
promethazine-codeine.....	55
promethazine-dm	55
PROMETHEGAN	16
PROMETRIUM	44
propafenone hcl	23
propafenone hcl er	23
propranolol hcl er.....	23
propranolol hcl oral.....	23
propylthiouracil oral	46

PROSCAR	40
PROTONIX ORAL TABLET DELAYED RELEASE.....	38
PROVENTIL HFA INHALATION AEROSOL SOLUTION 108 (90 BASE) MCG/ACT	57
PROVERA.....	41, 44
PROVIGIL	58
PROZAC.....	15
prucalopride succinate.....	39
pseudoephedrine-bromphen-dm	55
PTS PANELS EGLU TEST.....	33
PULMICORT SUSPENSION.....	57
PULMOSAL.....	55
PULMOZYME.....	57
PYLERA.....	38
PYRIDIUM.....	40
pyridostigmine bromide oral tablet 30 mg	17
pyridostigmine bromide oral tablet 60 mg	17

Q

qc nicotine transdermal system ..	11
QELBREE.....	25
QUARTETTE ORAL TABLET 42-21-21-7 DAYS.....	44
QUESTRAN.....	23
QUESTRAN LIGHT.....	23
quetiapine fumarate	19
quetiapine fumarate er.....	19
QUFLORA PEDIATRIC	38
QUICK TOUCH BLOOD GLUCOSE	33
QUICK TOUCH BLOOD GLUCOSE TEST.....	33
QUILLICHEW ER.....	25
QUILLIVANT XR	25
QUINTET AC BLOOD GLUCOSE TEST.....	33
QUINTET BLOOD GLUCOSE TEST.....	33
QULIPTA	17
QUVIVIQ.....	58
QVAR REDHALER	57

R

ra mini nicotine	11
ra nicotine mouth/throat gum 4 mg.....	11
ra nicotine polacrilex	11
ra nicotine transdermal patch 24 hour 21 mg/24hr.....	11
rabeprazole sodium oral tablet delayed release	38
RADICAVA ORS	26
RADICAVA ORS STARTER KIT	26
RALDESY.....	15
raloxifene hcl	52
ramelteon.....	58
ramipril.....	23
ranolazine er	23
RAPAFLO.....	40
RAPAMUNE ORAL TABLET 0.5 MG, 1 MG, 2 MG	50
rasagiline mesylate oral	19
RASUVO.....	50
reclipsen	44
RECOMBIMATE	36
RECOMBIVAX HB	51
RECTIV.....	23
REGLAN.....	16
RELAFEN DS	10
RELEXXII.....	25
RELION GLUCOSE TEST STRIPS..	33
RELION TRUE MET AIR GLUC METER.....	33
RELION TRUE METRIX TEST STRIPS	33
RELION ULTIMA GLUCOSE SYSTEM	33
RELION ULTIMA TEST.....	33
RELPAK.....	17
RELTONE.....	39
REMERON.....	15
REMERON SOLTAB ORAL TABLET DISPERSIBLE 15 MG, 30 MG	15
RENTHYROID	46
REVELA ORAL TABLET	40
repaglinide.....	36



REPATHA.....	23	ROBINUL ORAL TABLET 1 MG.....	39	sertraline hcl oral concentrate....	15
REPATHA PUSHTRONEX SYSTEM .	23	ROBINUL-FORTE ORAL TABLET		sertraline hcl oral tablet.....	15
REPATHA SURECLICK	23	2 MG.....	39	setlakin.....	44
RESTASIS.....	54	ROCALTROL ORAL CAPSULE.....	52	sevelamer carbonate oral tablet..	40
RESTASIS MULTIDOSE	54	ROCKLATAN	53	SEYSARA	13
RESTORIL.....	58	roflumilast	57	sf 5000 plus.....	26
RETACRIT INJECTION		ropinirole hcl.....	19	sf gel 1.1%	26
SOLUTION 10000 UNIT/ML,		rosuvastatin calcium oral	23	SFROWASA.....	52
2000 UNIT/ML, 3000 UNIT/ML,		rosyrah	44	sharobel.....	44
4000 UNIT/ML, 40000 UNIT/ML .	36	roweepra.....	14	SHINGRIX.....	51
RETACRIT INJECTION		ROXICODONE	10	sildenafil citrate oral tablet	
SOLUTION 20000 UNIT/ML	36	ROZEREM	58	100 mg, 25 mg, 50 mg	36
RETEVMO ORAL CAPSULE 40 MG	18	ROZLYTREK.....	18	sildenafil citrate oral tablet	
RETEVMO ORAL CAPSULE 80 MG	18	RUCONEST.....	50	20 mg	57
RETIN-A.....	29	RUKOBIA.....	20	SILENOR	58
REVATIO ORAL	57	RYALTRIS.....	55	silodosin.....	40
REVLIMID.....	18	RYBELSUS.....	36	SILVADENE.....	13
REXTOVY.....	11	RYDAPT	18	silver sulfadiazine external	13
REXULTI.....	19	RYTARY.....	19	SIMLANDI (1 PEN)	50
REYVOW	17	RYTHMOL SR ORAL CAPSULE		SIMLANDI (1 SYRINGE)	50
REZDIFFRA.....	39	EXTENDED RELEASE 12 HOUR		SIMLANDI (2 PEN)	50
RHOFADE	29	225 MG, 325 MG, 425 MG.....	23	SIMLANDI (2 SYRINGE)	
RHOPRESSA.....	53	ryvent	55	SUBCUTANEOUS PREFILLED	
rifampin oral	17			SYRINGE KIT 20 MG/0.2ML.....	50
RIGHTEST GT333 GLUCOSE TEST	33			SIMLANDI (2 SYRINGE)	
RINVOQ.....	50			SUBCUTANEOUS PREFILLED	
risedronate sodium oral tablet				SYRINGE KIT 40 MG/0.4ML.....	50
150 mg, 35 mg	52			simliya	44
risedronate sodium oral tablet				simpesse	44
30 mg, 5 mg.....	52			SIMPLERA SENSOR.....	33
RISPERDAL	19			SIMPLERA SYNC SENSOR.....	33
risperidone.....	19			SIMPLERA SYSTEM	33
RITALIN	25			SIMPONI	50
RITALIN LA	25			simvastatin oral tablet 10 mg,	
rivaroxaban	13			20 mg, 40 mg, 5 mg.....	23
rivastigmine.....	14			simvastatin oral tablet 80 mg.....	23
rivastigmine tartrate	14			SINEMET	19
rivelsa	44			SINGULAIR ORAL PACKET.....	57
rizatriptan benzoate oral tablet				SINGULAIR ORAL TABLET	57
10 mg	17			SINGULAIR ORAL TABLET	
rizatriptan benzoate oral tablet				CHEWABLE.....	57
5 mg.....	17			sirolimus oral tablet	50
rizatriptan benzoate oral tablet				SITAVIG	20
dispersible 10 mg	17			SKYRIZI PEN	50
rizatriptan benzoate oral tablet				SKYRIZI SUBCUTANEOUS.....	50
dispersible 5 mg	17				

S

sacubitril-valsartan.....	23
SAFYRAL.....	44
SALAGEN	26
SANTYL	29
SAPHRIS	19
SAVELLA	26
saxagliptin hcl	36
saxagliptin-metformin er	36
SCEMBLIX	18
scopolamine	16
SEASONIQUE ORAL TABLET	
0.15-0.03 & 0.01 MG.....	44
selenium sulfide external lotion ..	29
SENSIPAR	52
SEREVENT DISKUS	57
SEROQUEL.....	19
SEROQUEL XR	19
SERTRALINE HCL ORAL	
CAPSULE.....	15



SKYTROFA	45	STENDRA.....	37	SYMBICORT.....	57
SLYND.....	44	STEQUEYMA SUBCUTANEOUS	50	SYMFI	20
sm nicotine.....	11	STIOLTO RESPIMAT	57	SYMFI LO ORAL TABLET	
sm nicotine polacrilex.....	11	STIVARGA.....	18	400-300-300 MG.....	20
sm nicotine transdermal patch		STRATTERA ORAL CAPSULE		SYMJEPI INJECTION SOLUTION	
24 hour 14 mg/24hr, 21 mg/24hr,		10 MG, 100 MG, 18 MG, 25 MG,		PREFILLED SYRINGE	
7 mg/24hr.....	11	40 MG, 60 MG, 80 MG	25	0.15 MG/0.3ML, 0.3 MG/0.3ML....	54
SOAANZ.....	23	STRENSIQ.....	40	SYMLINPEN 120	36
sod citrate-citric acid oral		STRIVERDI RESPIMAT.....	57	SYMLINPEN 60	36
solution 500-334 mg/5ml.....	38	STROMECTOL	19	SYMPAZAN.....	14
sod fluoride-potassium nitrate ...	38	SUBOXONE	11	SYMPROIC	39
sodium chloride inhalation.....	55	subvenite.....	14	SYNALAR.....	29
sodium fluoride 5000 enamel	38	SUCRAID.....	40	SYNALAR EXTERNAL SOLUTION	
sodium fluoride 5000 plus	26	sucalfate oral suspension	39	0.01 %.....	29
sodium fluoride 5000 ppm	26	sucalfate oral tablet	39	SYNJARDY	36
sodium fluoride 5000 sensitive...	38	SUFLAVE	39	SYNJARDY XR.....	36
sodium fluoride dental	26	sulfacetamide sod-sulfur wash		SYNTHROID.....	46
sodium fluoride oral solution	38	external liquid 9-4 %.....	29		
sodium fluoride oral tablet		sulfacetamide sod-sulfur wash			
chewable.....	38	external liquid 9-4.5 %.....	29		
SODIUM OXYBATE.....	58	sulfacetamide sodium (acne)	29		
sodium sulfacetamide wash	29	sulfacetamide sodium external...	29		
SOFOSBUVIR-VELPATASVIR.....	20	sulfacetamide sodium			
solifenacin succinate	40	ophthalmic solution	53		
SOLIQUA.....	36	sulfacetamide sodium-sulfur			
SOMA.....	58	external liquid 10-2 %, 9-4.5 %,			
SOOLANTRA.....	29	9.8-4.8 %	29		
sotalol hcl oral	23	sulfacetamide sodium-sulfur			
SOTYKTU.....	50	external liquid 10-5 %, 9-4 %	29		
SOVUNA.....	19	sulfamethoxazole-trimethoprim			
SPIKEVAX.....	51	oral suspension 200-40 mg/5ml. .	13		
SPIRIVA HANDIHALER	57	sulfamethoxazole-trimethoprim			
SPIRIVA RESPIMAT	57	oral tablet	13		
spironolactone oral tablet.....	23	sulfasalazine oral	52		
spironolactone-hctz.....	23	sulfatrim pediatric.....	13		
SPORANOX	16	sulindac oral	10		
SPRAVATO (56 MG DOSE).....	15	SUMADAN WASH	29		
SPRAVATO (84 MG DOSE).....	15	sumatriptan nasal	17		
sprintec 28	44	sumatriptan succinate oral.....	17		
SPRYCEL	18	sumatriptan succinate			
sronyx	44	subcutaneous solution auto-			
ssd.....	13	injector.....	17		
STELARA SUBCUTANEOUS		SUNOSI	58		
SOLUTION PREFILLED SYRINGE.	50	SUPREP BOWEL PREP KIT.....	39		
		SUTAB.....	39		
		syeda.....	44		

T

TABRECTA.....	18
TACLONEX EXTERNAL	
OINTMENT 0.005-0.064 %.....	29
TACLONEX EXTERNAL	
SUSPENSION	30
tacrolimus external.....	30
tacrolimus oral.....	50
tadalafil (pah).....	57
tadalafil oral.....	37
TADLIQ.....	57
tafluprost (pf).....	53
TAGRISO.....	18
TAKHZYRO SUBCUTANEOUS	
SOLUTION	50
TALTZ SUBCUTANEOUS	
SOLUTION AUTO-INJECTOR	50
TAMIFLU	20
tamoxifen citrate oral tablet	
10 mg.....	18
tamoxifen citrate oral tablet	
20 mg	18
tamsulosin hcl	40
TANLOR	58
TAPERDEX 12-DAY	45
TAPERDEX 6-DAY ORAL TABLET	
THERAPY PACK 1.5 MG	45

TAPERDEX 6-DAY ORAL TABLET THERAPY PACK 1.5 MG (21)	45	teriparatide solution pen- injector 560 mcg/2.24ml subcutaneous.....	52	tiotropium bromide monohydrate	57
TAPERDEX 7-DAY	45	TESTIM.....	46	TIROSINT	46
TARGADOX.....	13	TESTOSTERONE CYPIONATE INJECTION	46	TIROSINT-SOL.....	46
tarina 24 fe	44	testosterone cypionate intramuscular.....	46	TIVICAY	20
tarina fe 1/20 eq	44	testosterone enanthate intramuscular.....	46	tizanidine hcl oral capsule.....	58
TASIGNA	18	testosterone gel 12.5 mg/act (1%) transdermal.....	46	tizanidine hcl oral tablet.....	58
TAVALISSE	36	testosterone gel 20.25 mg/act (1.62%) transdermal	46	TLANDO.....	46
tazarotene external cream	30	testosterone transdermal gel 10 mg/act (2%), 20.25 mg/ 1.25gm (1.62%), 25 mg/2.5gm (1%), 40.5 mg/2.5gm (1.62%), 50 mg/5gm (1%).....	46	TOBI PODHALER.....	57
TAZORAC EXTERNAL CREAM.....	30	testosterone transdermal gel 1.62 %.....	46	TOBRADEX OPHTHALMIC OINTMENT.....	53
taztia xt oral capsule extended release 24 hour 120 mg, 180 mg, 240 mg, 300 mg, 360 mg.....	24	tetracycline hcl oral capsule	13	TOBRADEX OPHTHALMIC SUSPENSION 0.3-0.1 %.....	53
TECFIDERA ORAL CAPSULE DELAYED RELEASE.....	26	TEZSPIRE SUBCUTANEOUS SOLUTION AUTO-INJECTOR	57	TOBRADEX ST	53
TECHLITE INSULIN SYRINGES ...	33	THALITONE.....	24	tobramycin ophthalmic	53
TECHLITE PEN NEEDLES.....	33	THRIVE	11	tobramycin-dexamethasone.....	53
TECHLITE PLUS PEN NEEDLES ...	33	THYQUIDITY.....	46	TOLAK.....	30
TEGLUTIK.....	26	thyroid oral.....	46	TOLSURA.....	16
TEGRETOL ORAL TABLET	14	tiadylt er.....	24	tolterodine tartrate.....	40
TEGRETOL-XR.....	14	TIAZAC.....	24	tolterodine tartrate er.....	40
TEGSEDI SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 284 MG/1.5ML	40	ticagrelor.....	19	tolvaptan oral tablet therapy pack 15 mg, 45 & 15 mg, 60 & 30 mg, 90 & 30 mg.....	40
TEKTRUNA	24	TIGLUTIK	26	tolvaptan oral tablet therapy pack 30 & 15 mg	40
TEKTRUNA HCT ORAL TABLET 300-12.5 MG, 300-25 MG.....	24	TIKOSYN	24	TOPAMAX	14
telmisartan.....	24	tilia fe.....	44	TOPAMAX SPRINKLE	14
telmisartan-hctz.....	24	timolol hemihydrate.....	53	TOPICORT	30
temazepam	58	timolol maleate (once-daily)	53	TOPICORT EXTERNAL CREAM 0.05 %, 0.25 %.....	30
temozolomide	18	timolol maleate ocudose.....	53	topiramate er oral capsule extended release 24 hour	14
TEMPO REFILL.....	33	timolol maleate ophthalmic.....	53	topiramate oral capsule sprinkle..	14
TEMPO WELCOME.....	33	timolol maleate pf.....	53	topiramate oral tablet.....	14
TENCON	10	TIMOPTIC OCUDOSE	53	TOPROL XL.....	24
TENIVAC	51	TIMOPTIC OPHTHALMIC SOLUTION 0.25 %, 0.5 %.....	53	torpenz.....	18
tenofovir disoproxil fumarate	20	TIMOPTIC-XE OPHTHALMIC GEL FORMING SOLUTION 0.25 %, 0.5 %.....	54	torsemide.....	24
TENORETIC 100	24	tinidazole oral.....	13	TOSYMRA	17
TENORETIC 50	24			TOUJEO MAX SOLOSTAR	35
TENORMIN.....	24			TOUJEO SOLOSTAR	35
terazosin hcl	40			TRACLEER	57
terbinafine hcl oral	16			TRADJENTA.....	36
terconazole	16			tramadol hcl (er biphasic) oral tablet extended release 24 hour ..	10
teriflunomide	26			tramadol hcl er.....	10

tramadol hcl oral tablet 100 mg, 25 mg, 75 mg.....	10	tri-vylibra.....	44	TRUE FOCUS BLOOD GLUCOSE STRIP.....	33
tramadol hcl oral tablet 50 mg....	10	tri-vylibra lo.....	44	TRUE METRIX AIR GLUCOSE METER KIT.....	34
tramadol-acetaminophen.....	10	triamcinolone acetonide external cream 0.025 %, 0.1 %....	30	TRUE METRIX BLOOD GLUCOSE TEST.....	34
trandolapril.....	24	triamcinolone acetonide external cream 0.5 %.....	30	TRUE METRIX GO GLUCOSE METER.....	34
tranexamic acid oral.....	36	triamcinolone acetonide external lotion.....	30	TRUE METRIX METER.....	34
TRANSDERM-SCOP TRANSDERMAL PATCH 72 HOUR 1 MG/3DAYS.....	16	triamcinolone acetonide external ointment 0.025 %, 0.1 %, 0.5 %.....	30	TRUE METRIX PRO BLOOD GLUCOSE.....	34
TRAVATAN Z.....	54	triamcinolone acetonide external ointment 0.05 %.....	30	TRULANCE.....	39
travoprost (bak free).....	54	triamcinolone acetonide mouth/ throat.....	27	TRULICITY.....	36
trazodone hcl oral.....	15	triamcinolone in absorbase.....	30	TRUQAP ORAL TABLET.....	18
TRELEGY ELLIPTA.....	57	triamterene-hctz.....	24	TRUVADA ORAL TABLET 100-150 MG, 133-200 MG, 167-250 MG.....	20
TREMFYA CROHNS INDUCTION.....	30	TRIANEX EXTERNAL OINTMENT 0.05 %.....	30	TRUVADA ORAL TABLET 200-300 MG.....	20
TREMFYA ONE-PRESS.....	50	triazolam.....	20	turqoz.....	44
TREMFYA PEN SUBCUTANEOUS SOLUTION AUTO-INJECTOR 100 MG/ML.....	50	TRIBENZOR.....	24	TWIIST REFILL KIT.....	34
TREMFYA PEN SUBCUTANEOUS SOLUTION AUTO-INJECTOR 200 MG/2ML.....	30	TRICARE ORAL TABLET.....	38	TWIIST REFILL KIT/INFUSION SET.....	34
TREMFYA SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 100 MG/ML.....	50	TRICOR.....	24	TWIIST STARTER KIT.....	34
TREMFYA SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 200 MG/2ML.....	30	TRIDACAINE II.....	10	TWINRIX.....	51
TRESIBA FLEXTOUCH.....	35	TRIDACAINE III.....	10	TWIRLA.....	44
tretinoin external cream.....	30	triderm.....	30	TYBLUME.....	44
tretinoin external gel 0.01 %, 0.025 %.....	30	TRIDESILON EXTERNAL CREAM 0.05 %.....	30	tydemy oral tablet 3-0.03-0.451 mg.....	44
tretinoin external gel 0.05 %.....	30	trihexyphenidyl hcl oral tablet....	19	TYMLOS.....	52
TREXALL.....	50	TRIJARDY XR.....	36	TYRVAYA.....	54
TREZIX.....	10	TRIKAFTA ORAL TABLET THERAPY PACK.....	57	TYVASO.....	57
tri-estarylla.....	44	TRILEPTAL.....	14	TYVASO DPI INSTITUTIONAL KIT	57
tri-legest fe.....	44	TRILIPIX ORAL CAPSULE DELAYED RELEASE 135 MG, 45 MG.....	24	TYVASO DPI MAINTENANCE KIT.	57
tri-lynyah.....	44	trimethoprim oral.....	13	TYVASO DPI TITRATION KIT.....	57
tri-lo-estarylla.....	44	TRINATAL RX1.....	38	TYVASO REFILL KIT.....	57
tri-lo-marzia.....	44	TRINATE.....	38	TYVASO STARTER KIT.....	57
tri-lo-mili.....	44	TRINTELLIX.....	15		
tri-lo-sprintec.....	44	tritocin external ointment 0.05 %.	30		
tri-mili.....	44	TRIUMEQ.....	20		
tri-nymyo oral tablet 0.18/0.215/0.25 mg-35 mcg.....	44	trivora (28).....	44		
tri-sprintec.....	44	TROKENDI XR.....	14		
tri-vite/fluoride.....	38	trosipium chloride.....	40		
		trosipium chloride er.....	40		

U

UBRELVY.....	17
UCERIS ORAL.....	52
UDENYCA SUBCUTANEOUS SOLUTION AUTO-INJECTOR.....	36
ULORIC.....	16
UMECLIDINIUM-VILANTEROL...	57

UNDECATREX.....	46	VANDAZOLE	13	VFEND ORAL TABLET 200 MG	16
UNISTRIPI1 GENERIC.....	34	VANOS	30	VFEND ORAL TABLET 50 MG	16
unithroid	46	VANRAFIA.....	40	VIAGRA	37
urea external cream 20 %, 40 %, 45 %	30	VAQTA.....	51	VIBERZI.....	39
urea external cream 39 %, 41 %, 47 %	30	vardenafil hcl oral tablet	37	VIBRAMYCIN ORAL CAPSULE 100 MG.....	13
UREA EXTERNAL CREAM 39.5 % ..	30	varenicline tartrate	11	VIBRAMYCIN ORAL SUSPENSION RECONSTITUTED 25 MG/5ML	13
uredeb	30	varenicline tartrate (starter)	11	vienna	44
UREMEZ-40	30	varenicline tartrate(continue).....	11	VIGAMOX	53
URESOL	30	VARIVAX	51	VIIBRYD.....	15
UROCIT-K 10.....	38	VASCEPA.....	24	vilazodone hcl.....	15
UROCIT-K 15.....	38	VASERETIC.....	24	VIMPAT ORAL.....	14
UROCIT-K 5 ORAL TABLET EXTENDED RELEASE 5 MEQ (540 MG).....	38	VASOTEC.....	24	violele	44
UROXATRAL	40	velivet	44	VIREAD ORAL TABLET 150 MG, 200 MG, 250 MG.....	20
URSO 250 ORAL TABLET 250 MG.	39	VELPHORO.....	40	VIREAD ORAL TABLET 300 MG ...	20
URSO FORTE.....	39	VELTASSA	38	VISTARIL ORAL CAPSULE 25 MG.	20
URSODIOL ORAL CAPSULE 200 MG, 400 MG.....	39	VEMLIDY.....	20	VITAFOL FE+.....	38
ursodiol oral capsule 300 mg	39	VENCLEXTA.....	18	VITAFOL ULTRA	38
ursodiol oral tablet	39	venlafaxine hcl.....	15	VITAFOL-OB	38
USTEKINUMAB SUBCUTANEOUS SOLUTION PREFILLED SYRINGE.	50	venlafaxine hcl er oral capsule extended release 24 hour	15	vitamin d (ergocalciferol) oral capsule 1.25 mg (50000 ut), 50000 unit.....	38
V		venlafaxine hcl er oral tablet extended release 24 hour	15	VITATHELY WITH GINGER	38
VAGIFEM.....	44	VENTOLIN HFA	56, 57	VITRAKVI	18
valacyclovir hcl oral.....	20	VEOZAH	26	VIVAGUARD INO GLUCOSE METER KIT	34
VALCYTE ORAL TABLET.....	20	verapamil hcl er oral capsule extended release 24 hour 100 mg, 200 mg, 300 mg.....	24	VIVAGUARD INO TEST STRIPS....	34
valganciclovir hcl oral tablet	20	verapamil hcl er oral capsule extended release 24 hour 120 mg, 180 mg, 240 mg, 360 mg.	24	VIVELLE-DOT.....	42, 44
VALIUM	20	verapamil hcl er oral tablet extended release	24	VIVJOA.....	16
valproic acid oral capsule	14	verapamil hcl oral.....	24	VIVOTIF.....	51
valproic acid oral solution 250 mg/5ml.....	14	VERELAN.....	24	VOGELXO	46
VALSARTAN ORAL SOLUTION	24	VERELAN PM ORAL CAPSULE EXTENDED RELEASE 24 HOUR 100 MG, 200 MG, 300 MG	24	VOGELXO PUMP.....	46
valsartan oral tablet	24	VERISAFE SAFETY STERILE NEEDLE	34	volnea	45
valsartan-hydrochlorothiazide....	24	VERKAZIA.....	54	VOQUEZNA	39
VALTOCO	14	VERQUVO	24	VOQUEZNA DUAL PAK	39
VALTRESX	20	VERZENIO.....	18	VOQUEZNA TRIPLE PAK.....	39
valtya 1/50	44	VESICARE	40	voriconazole oral tablet	16
VANADOM ORAL TABLET 350 MG	58	vestura	44	VORTEX HOLD CHMBR/MASK/CHILD DEVICE.....	57
VANCOCIN.....	13	VEVYE.....	54	VORTEX HOLD CHMBR/MASK/TODDLER DEVICE	57
vancomycin hcl oral capsule	13				

VORTEX VALVE CHAMBER-PEDI MASK.....	57
VORTEX VALVED HOLDING CHAMBER DEVICE	57
VOSEVI.....	20
VOYDEYA.....	36
VRAYLAR.....	19
VTAMA	30
vyfemla	45
VYLEESI.....	37
vylibra	45
VYNDAMAX.....	40
VYND AQEL.....	24
VYTORIN.....	24
VYVANSE.....	25
VYZULTA	54

W

WAINUA	15
WAKIX.....	58
warfarin sodium oral.....	13
WELCHOL ORAL TABLET.....	24
WELLBUTRIN SR.....	15
WELLBUTRIN XL.....	15
wera	45
wes-phos 250 neutral.....	38
WESTAB PLUS.....	38
WILATE.....	36
WINLEVI	30
wixela inhub.....	57

X

XACIATO	13
XALATAN.....	54
XANAX	20
XANAX XR.....	20
xarah fe	45
XARELTO.....	13
XARELTO STARTER PACK.....	13
XCOPRI ORAL TABLET 100 MG, 150 MG, 200 MG, 25 MG, 50 MG ..	14
XDEMVI.....	53
XELJANZ.....	50

XELJANZ XR ORAL TABLET EXTENDED RELEASE 24 HOUR 11 MG.....	50
XELJANZ XR ORAL TABLET EXTENDED RELEASE 24 HOUR 22 MG	50
XELODA	18
XENLETA ORAL TABLET 600 MG ..	13
XHANCE.....	55
XIFAXAN	13
XIGDUO XR	36
XIIDRA	54
XOFLUZA (40 MG DOSE)	20
XOFLUZA (80 MG DOSE).....	20
XOLAIR SUBCUTANEOUS SOLUTION AUTO-INJECTOR	57
XOLAIR SUBCUTANEOUS SOLUTION PREFILLED SYRINGE ..	50
XOPENEX HFA	57
XTAMPZA ER	10
XTANDI.....	18
xulane	45
xurea	30
XYOSTED.....	46
XYWAV	58

Y

YASMIN 28	45
YAZ	45
YESINTEK SUBCUTANEOUS.....	50
YORVIPATH	52
YUFLYMA (1 PEN) SUBCUTANEOUS AUTO-INJECTOR KIT 40 MG/0.4ML	50
YUFLYMA (1 PEN) SUBCUTANEOUS AUTO-INJECTOR KIT 80 MG/0.8ML	50
YUFLYMA (2 PEN).....	50
YUFLYMA (2 SYRINGE).....	50
YUFLYMA-CD/UC/HS STARTER ..	50
YUPELRI.....	57
YUSIMRY	50
yuvafer.....	45

Z

zafemy	45
zafirlukast.....	57
zaleplon	58
ZANAFLEX	58
ZANAFLEX ORAL CAPSULE 2 MG, 4 MG, 6 MG	58
ZARONTIN	14
ZARXIO.....	36
ZAVZPRET.....	17
ZEBUTAL ORAL CAPSULE 50-325-40 MG	10
ZEGALOGUE SUBCUTANEOUS SOLUTION AUTO-INJECTOR	36
ZEJULA ORAL CAPSULE 100 MG ..	18
ZELBORAF	18
ZEMBRACE SYMTOUCH	17
zenatane	30
ZENPEP.....	40
ZENZEDI	25
ZEPOSIA	26
ZEPOSIA 7-DAY STARTER PACK...	26
ZEPOSIA STARTER KIT	26
ZESTORETIC.....	24
ZESTRIL	24
ZETIA.....	24
ZETONNA NASAL AEROSOL SOLUTION 37 MCG/ACT	55
ZIAC ORAL TABLET 10-6.25 MG, 2.5-6.25 MG	24
ZIAC ORAL TABLET 5-6.25 MG ..	24
ZILBRYSQ.....	17
ZILXI	30
ZIMHI	11
ZIOPTAN	54
ziprasidone hcl.....	19
ZITHROMAX ORAL	13
ZITHROMAX TRI-PAK.....	13
ZITHROMAX Z-PAK	13
ZOCOR.....	24
ZOLMITRIPTAN NASAL SOLUTION 2.5 MG.....	17
zolmitriptan nasal solution 5 mg..	17
zolmitriptan oral tablet.....	17

zolmitriptan oral tablet dispersible	17
ZOLOFT	15
zolpidem tartrate er	58
zolpidem tartrate oral tablet.....	58
ZOMIG NASAL SOLUTION 2.5 MG	17
ZOMIG NASAL SOLUTION 5 MG ..	17
ZOMIG ORAL TABLET 5 MG	17
ZONEGRAN	14
zonisamide oral	14
ZORTRESS.....	50
ZORYVE EXTERNAL CREAM 0.15 %.....	30
ZORYVE EXTERNAL CREAM 0.3 %.....	30
ZORYVE EXTERNAL FOAM	30
zovia 1/35 (28)	45
ZOVIRAX EXTERNAL OINTMENT .	20
ZTLIDO.....	10
ZUBSOLV.....	11
zumandimine	45
ZURZUVAE	15
ZYCLARA.....	30
ZYCLARA PUMP	30
ZYLET	53
ZYLOPRIM ORAL TABLET 100 MG, 300 MG.....	16
ZYPREXA ORAL.....	19
ZYPREXA ZYDIS ORAL TABLET DISPERSIBLE 10 MG, 15 MG, 20 MG, 5 MG	19
ZYTIGA.....	18
ZYVOX ORAL TABLET	13

ATTENTION: Free language assistance services and free communications in other formats, such as large print, are available to you. Call the toll-free number on your member identification card. (TTY 711).

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

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

দেখুন: আপনি যদি বাংলায় (Bengali-Bangala) কথা বলেন, তাহলে বিনামূল্যে ভাষা সহায়তা পরিষেবা এবং বড় মুদ্রণের মতো অন্যান্য ফরম্যাটে যোগাযোগগুলি আপনার জন্য বিনামূল্যে উপলব্ধ। আপনার সদস্যের পরিচয়পত্রের কার্ডের টোল-ফ্রি নম্বরে কল করুন

ចំណាំ: ប្រសិនបើអ្នកនិយាយភាសាខ្មែរ (Cambodian-Mon-Khmer) សេវាជំនួយភាសាភាគតិចផ្លែ និងការទំនាក់ទំនងភាគតិចផ្លែក្នុងទម្រង់ផ្សេងទៀត ដូចជាពុម្ពអក្សរធំ មានសម្រាប់អ្នក។ ទូរសព្ទមកលេខភាគតិចផ្លែនៅលើប័ណ្ណសម្គាល់សមាជិករបស់អ្នក។

請注意： 如果您說中文 (Chinese - Traditional)，您可以獲得免費語言協助服務和大字體等其他格式的免費通訊。請致電您的會員身份卡上的免付費電話號碼。

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

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

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

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

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

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

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

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

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

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

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

ໝາຍເຫດ: ຖ້າຫາກທ່ານເວົ້າພາສາລາວ (Lao), ທ່ານສາມາດໃຊ້ບໍລິການຊ່ວຍເຫຼືອດ້ານພາສາພາສາລາວ ແລະ ການສື່ສານໃນຮູບແບບອື່ນໆພາສາລາວ, ເຊັ່ນ: ການພິມຕົວອັກສອນຂະໜາດໃຫຍ່. ໂທຫາເບີໂທພາສາລາວທີ່ບັດປະຈຳຕົວສະມາຊິກຂອງທ່ານ.

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

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

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

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

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

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

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

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

โปรดทราบ หากคุณพูดภาษาไทย (Thai) ได้
คุณสามารถใช้บริการช่วยเหลือด้านภาษาฟรีและการสื่อสารในรูปแบบอื่น ๆ ฟรี เช่น
การพิมพ์ด้วยตัวอักษรขนาดใหญ่ โทรไปยังหมายเลขโทรศัพท์สำหรับสมาชิกตามบัตรประจำตัวของคุณ

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

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

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

This document applies to commercial group members of UnitedHealthcare and Oxford New York and New Jersey plans.

Insurance coverage provided by or through UnitedHealthcare Insurance Company or its affiliates, including but not limited to: UnitedHealthcare Freedom Insurance Company; UnitedHealthcare Insurance Companies of Illinois, New York, and Ohio, Inc.; UnitedHealthcare Insurance Company of the River Valley; UnitedHealthcare Life Insurance Company; All Savers Insurance Company; Golden Rule Insurance Company; Oxford Health Insurance, Inc.; and Sierra Health & Life Insurance Company, Inc. Health plan coverage provided by or through a UnitedHealthcare company, including but not limited to: UnitedHealthcare of Alabama, Arizona, Arkansas, California, Colorado, Florida, Georgia, Illinois, Louisiana, Michigan, Mississippi, Nebraska, New England, New Mexico, New York, North Carolina, Ohio, Oklahoma, Oregon, Pennsylvania, Rhode Island, South Carolina, Texas, Utah, Washington, or Wisconsin, Inc.; UnitedHealthcare Benefits Plan of California; UnitedHealthcare of Kentucky, Ltd.; UnitedHealthcare of the Mid-Atlantic, Midlands, Midwest, or River Valley, Inc.; Health Plan of Nevada, Inc.; MAMSI Life and Health Insurance Company; Neighborhood Health Partnership, Inc.; Optimum Choice, Inc. Administrative services provided by or through United HealthCare Services, Inc. or its affiliates, including but not limited to: UnitedHealthcare Service LLC; UnitedHealthcare Services Company of the River Valley, Inc.; Oxford Health Plans LLC; and Bind Benefits, Inc. d/b/a Surest d/b/a Surest Administrators Services in CA. For level-funded plans, stop-loss insurance underwritten by UnitedHealthcare Insurance Company or its affiliates, including but not limited to: United HealthCare Life Insurance Company (NJ); and UnitedHealthcare Insurance Company of New York (NY).

UnitedHealthcare and the dimensional U logo are registered trademarks owned by UnitedHealth Group Incorporated. All other trademarks are the property of their respective owners.