



Nonprofit corporations and independent licensees
of the Blue Cross and Blue Shield Association

Your 2026 Blue Cross Blue Shield of Michigan Clinical Drug List

If you have questions, call the number on the back of your Blue Cross member ID card to:

- Find a participating retail pharmacy by ZIP code
- Look up lower-cost medication alternatives
- Compare medication pricing and options

Blue Cross Blue Shield of Michigan and Blue Care Network are nonprofit corporations and independent licensees of the Blue Cross and Blue Shield Association.

Blue Cross Blue Shield of Michigan Clinical Drug List

The Blue Cross Blue Shield of Michigan *Clinical Drug List* is a useful reference and educational tool for prescribers, pharmacists and members.

We regularly update this list with medications approved by the U.S. Food and Drug Administration and reviewed by our Pharmacy and Therapeutics Committee. The list represents the clinical judgment of Michigan doctors, pharmacists and other experts in the diagnosis and treatment of disease and the promotion of health. New drugs must be reviewed by the committee prior to being considered for coverage. The committee selects medications based on safety, clinical effectiveness and opportunity for savings.

This drug list is updated monthly. Refer to our [Drug List Updates](#) document for recent changes or updates that may not yet be reflected on our drug lists.

About this drug list

Use this list to find information about your drug coverage and medication options. It's divided by chapter into major drug classes or indications for use. Products approved for more than one use may be included in more than one chapter. Within each chapter, drugs are identified according to their tier placement. Refer to the "Reading your drug list" section for details.

We encourage doctors to prescribe preferred medications whenever possible. Blue Cross respects the judgment of dispensing pharmacists and expects them to contact the prescribing health care professional when a drug or dose may not be appropriate for a member. We also encourage pharmacists to contact the prescriber to suggest an alternative when a prescription is written for a nonpreferred or excluded drug.

Coverage and applicable out-of-pocket costs for drugs on this list are based on your drug plan. Not all drugs included in the list are covered by each member's plan. Drugs that aren't listed may not be covered.

Some medications excluded by your pharmacy benefits may be covered under your medical benefits. These are medications that are generally administered in a doctor's office under the supervision of appropriate health care personnel and aren't normally dispensed for self-administration.

Nonformulary drugs (drugs that aren't covered)

Our goals are to provide you with safe, high-quality prescription drug therapies and keep your medical costs low. To accomplish this, we don't cover some high-cost drugs that have comparable therapeutic alternatives with similar effectiveness, quality and safety, but at a fraction of the cost. We also don't cover select brand-name drugs that have generic equivalents. We don't cover glucagon-like peptide-agonist drugs used for weight loss, including Saxenda®, Wegovy®, and Zepbound® for commercial members of fully insured large groups and some self-funded groups. If you have a question about a drug that isn't covered and doesn't appear on this list, call the Customer Service number on the back of your Blue Cross member ID card.

Several drugs and drug categories are excluded altogether from coverage under this drug list and are not shown. These include:

- Prescription drugs for which there is an over-the-counter equivalent in both strength and dosage form (unless considered preventive by the United States Preventive Services Task Force)
- Drugs used for experimental purposes
- Drugs prescribed for cosmetic purposes
- Products covered as a medical benefit (for example, injectable drugs and vaccines that are usually administered in a doctor's office)
 - Note: Most Blue Cross members can get multiple common vaccines at network retail pharmacies. Restrictions may apply.
- Compounded products, with some exceptions
- Replacement prescriptions resulting from loss, theft or mishandling
- Drugs not approved by the FDA

Specialty drugs

For more information on specialty drugs, see the [Specialty Drug Program Pharmacy Benefit Member Guide](#). Specialty drugs are limited to a 30-day supply. Select specialty drugs are managed by the [15-Day Specialty Drug Limitation Program](#). Drugs included on this list are limited to a 15-day supply for all fills. Members pay half their usual out-of-pocket cost for a 15-day supply. For more details, visit bcbsm.com/pharmacy.

Preventive drug coverage

Under the Affordable Care Act, also known as national health care reform, most health care plans must cover certain preventive services and prescription drugs with no out-of-pocket costs. These drugs will have a “PV1,” PV2” or “PV3” listing in the “Notes” column of the drug list.

For a complete list of preventive drugs and coverage requirements, refer to our [Preventive Drug Coverage](#) list or visit bcbsm.com/pharmacy. For information specific to your prescription drug benefits, check your Blue Cross benefits at a glance drug summary.

New generics

When a generic version of a brand-name drug becomes available, the generic version is generally added to the generic tier of the drug list. After the generic drug is added, the original branded version will move to a nonpreferred brand tier or nonformulary.

Generic drug substitution

Generic drug substitution occurs when a pharmacist dispenses a generic equivalent in place of the brand-name product. Generic substitution is required for most Blue Cross members. Members are encouraged to receive the generic equivalent if available. Some Blue Cross members, depending on their plan, may be required to pay the difference between the cost of the brand-name drug and its generic equivalent, in addition to the applicable brand-name copay, if they opt to not fill their prescription with the generic equivalent.

Brand-for-generic substitution

Select brand-name drugs may be covered at a generic copay, and the generic drug will not be covered. These brand-name drugs will be shown without the generic drug and will be listed with a generic copay.

Prescription coverage

For details about your prescription drug benefits, please call the Customer Service phone number on the back of your Blue Cross member ID card. If you have online access, log in to your account at bcbsm.com or the Blue Cross mobile app. You can also find general information about Blue Cross prescription drug coverage at bcbsm.com/pharmacy.

Vaccines

Select vaccines are covered at pharmacies without out-of-pocket costs for most members whose pharmacies participate with Blue Cross and are certified to administer vaccines.

Reading your drug list

This drug list gives you options so you and your doctor can decide your best course of treatment. In this drug list, brand-name medication names are shown in UPPERCASE (for example, CLOBEX). Generic medication names are shown in lowercase (for example, clobetasol).

Tier information

Using lower tier or preferred medications can help you lower your out-of-pocket cost. Note: If you have a high-deductible health plan, the tier cost levels will apply once you meet your deductible. For tiering information specific to your drug benefit, check your Blue Cross benefits at a glance drug summary.

Select drugs in the generic, preferred brand or nonpreferred brand tiers may also be covered with no out-of-pocket costs when health care reform requirements are met. These drugs will have a “PV1,” PV2” or “PV3” listing in the “Notes” column of the drug list.

Drug Tiers	2-tier plan
Not covered	<p>Nonformulary This tier includes nonformulary high-cost, FDA-approved, prescription-only drugs that have comparable therapeutic alternatives with similar effectiveness, quality and safety, but at a fraction of the cost. Nonformulary drugs are not covered.</p>
Covered \$0	<p>No out-of-pocket cost This tier includes select products that are covered with no out-of-pocket costs.</p>
Preventive	<p>No out-of-pocket cost This tier includes drugs that are covered with no out-of-pocket costs when health care reform requirements are met. When health care reform requirements are not met, the drug is not covered.</p>
Generic	<p>Generic – lowest out-of-pocket cost This tier includes generic drugs. Members pay the lowest copay for generics, making them the most cost-effective option for treatment.</p>
Preferred brand	<p>Brand – higher out-of-pocket cost This tier includes preferred specialty and nonspecialty brand-name drugs. These drugs are more expensive than generics, and members pay more for them.</p>
Nonpreferred brand	<p>Brand – higher out-of-pocket cost This tier includes nonpreferred brand-name specialty and nonspecialty drugs for which there's a more cost-effective generic alternative or preferred brand-name drug available.</p>

Drug list information

In this drug list, some medications are noted with letters next to them to indicate which ones may have coverage requirements or limits. Your drug plan determines how these medications may be paid for.

AL	Age limit – Age restrictions apply.
ABA	Authorized brand alternative – Approved brand medication marketed by either the brand company or another company without the brand-name on its label. Authorized brand alternatives are drugs that are considered brand-name drugs and don't have generic equivalents. These drugs are the same as the brand-name drugs but are not true generic drugs. The respective brand out-of-pocket cost will apply for these medications. Some authorized brand alternatives may not be covered.
OVM	Oncology Value Management – Prior authorization for antineoplastics and oncology supportive care drugs is required through the Oncology Value Management program, which is administered by OncoHealth. Your doctor is required to submit more information to determine coverage.
PA	Prior authorization – Your doctor is required to give more information to determine coverage.
PV1	Preventive 1 – Covered with no out-of-pocket cost when health care reform requirements are met. When health care reform requirements are not met, the drug is not covered.
PV2	Preventive 2 – Covered with no out-of-pocket cost when health care reform requirements are met. When health care reform requirements are not met, coverage and applicable out-of-pocket costs apply, based on the members' benefit design.
PV3	Preventive 3 – Covered with no out-of-pocket cost when health care reform requirements are met. When health care reform requirements are not met, coverage and applicable out-of-pocket costs apply, based on the members' benefit design. Additional coverage requirements may apply.
QL	Quantity limit – The quantity of medication dispensed at one time is limited.
SP	Specialty medication – Specialty medications treat complex health conditions and may require special handling or administration.
ST	Step therapy – Requires you try one or more preferred drugs before a higher-cost medication can be covered.
15DS	15-day supply – Limits the amount of certain specialty drugs to 15-day supply to help reduce out-of-pocket costs and waste.

How to fill a prescription

The type of drug you take determines which pharmacy you may use.

- **Specialty drugs**

- Local retail pharmacy
 - Walgreens is our preferred specialty pharmacy. Find a location at walgreens.com/pharmacy/*
 - You can use any retail pharmacy in your applicable network.
- Limited-distribution specialty drugs
 - Pharmacy options vary based on the drug. Refer to the [Specialty Drug Program Pharmacy Benefit Member Guide](#), and search for the drug you take.
- Home delivery
 - Walgreens Specialty Pharmacy**
 - Website: WalgreensSpecialtyRx.com*
 - Telephone: 1-866-515-1355

- **All other drugs**

- Local retail pharmacy — More than 2,300 retail pharmacies in Michigan and 65,000 retail pharmacies outside of Michigan accept your member ID card.
- Home delivery
 - Optum Home Delivery***
 - Telephone: 1-855-811-2223

If you have questions about which home delivery service to use, call the Customer Service phone number on the back of your BCN member ID card or visit bcbsm.com/pharmacy.

* Blue Cross Blue Shield of Michigan and Blue Care Network don't own or control this website.

** Walgreens Specialty Pharmacy® is an independent company that provides specialty pharmacy benefit management services for Blue Cross Blue Shield of Michigan and Blue Care Network.

*** Optum Rx® is an independent company providing home delivery pharmacy and other pharmacy benefit administration services for Blue Cross Blue Shield of Michigan and Blue Care Network.

How prior authorization, step therapy and quantity limits work

Prior authorization

Prior authorization may be necessary for coverage of certain medications. In these cases, the member must meet clinical criteria or additional information must be provided before coverage is approved. Clinical criteria are based on current medical information and approved by our Pharmacy and Therapeutics Committee.

Step therapy

Drugs subject to step therapy may require previous treatment with one or more preferred drugs before coverage is approved.

For a current list of drugs requiring prior authorization or step therapy, see the **Prior Authorization and Step Therapy Coverage Criteria** and refer to the column labeled *Blue Cross Clinical Drug List*.

Quantity limits

For certain medications, Blue Cross limits the quantity that can be dispensed per fill. Blue Cross sets quantity limits based on clinical appropriateness and manufacturer-recommended dosing for select drugs.

For a current list of drugs that have limits on the quantity that can be dispensed per fill, please see the **Quantity Limit Program**, and refer to the column labeled *BCBSM Clinical, Custom, Closed Drug Lists*.

How to request authorization

Consult your prescription drug benefit packet for information on how to get prior authorization or request reviews for coverage of drugs that aren't included in your plan. You can also call the Customer Service number on the back of your Blue Cross member ID card for more information.

- **To request coverage of a drug:** Fill out the [Coverage Request Form online at bcbsm.com](https://www.bcbsm.com).

- **Write to:**

Pharmacy Services — Mail Code 512C
Blue Cross Blue Shield of Michigan
600 E. Lafayette Blvd.
Detroit, MI 48226-2998

Doctors can request authorization for you. We notify the doctor of approved requests and process the claim accordingly. If a request isn't approved, we'll notify you and the doctor in writing. The notification includes the reason for the denial, an explanation of your appeal rights and the appeals process.

Doctors can request authorization one of four ways:

- **Electronic prior authorization:** Doctors can use their electronic health record or CoverMyMeds® to submit electronic prior authorization requests for commercial pharmacy members.

- **Call:** 1-800-437-3803

- **Fax:** 1-866-601-4425

- **Write:**

Pharmacy Services — Mail Code 512C
Blue Cross Blue Shield of Michigan
600 E. Lafayette Blvd.
Detroit, MI 48226-2998

Note: Prior authorization for antineoplastics and oncology supportive care drugs is required through the Oncology Value Management program, which is administered by OncoHealth.

- **Electronic prior authorization:** Submit requests through the OncoHealth OneUM™ portal, which you can access by logging in to our provider portal (availability.com*), clicking *Payer Spaces* and then clicking the BCBSM and BCN logo. This takes you to the Blue Cross and BCN payer space where you'll click the *OncoHealth Provider Portal* tile.

- **Call:** 1-888-916-2616

- **Fax:** 1-800-264-6128

- **Write:**

OncoHealth
7000 Central Parkway, Ste 1750
Atlanta, GA 30328

* Blue Cross Blue Shield of Michigan and Blue Care Network don't own or control this website.

This document is current at the time of publication and subject to change. Go to bcbsm.com/pharmacy and click on *Drug Lists* for the most up-to-date information about this drug list.

This content was developed to comply with applicable federal and state regulations. To learn more about your plan, go to bcbsm.com and type “How Health Insurance Works” in the search field.

Send us your feedback:

Please send your comments and suggestions about this list to:

Drug Information Services — Mail Code 512C
Blue Cross Blue Shield of Michigan
600 E. Lafayette Blvd.
Detroit, MI 48226-2998

BCBSM Clinical Drug List - May 2026

Table of Contents

Analgesics	11
Anesthetics	15
Anti-Addiction/Substance Abuse Treatment Agents	15
Antibacterials	16
Anticonvulsants	20
Antidementia Agents	22
Antidepressants	22
Antiemetics	24
Antifungals	25
Antigout Agents	27
Antimigraine Agents	27
Antimyasthenic Agents	28
Antimycobacterials	28
Antineoplastics	29
Antiparasitics	34
Antiparkinson Agents	35
Antipsychotics	36
Antivirals	38
Anxiolytics	41
Bipolar Agents	42
Blood Glucose Monitoring	42
Blood Glucose Regulators	44
Blood Products and Modifiers	47
Cardiovascular Agents	51
Central Nervous System Agents	57
Cholestatic Pruritus Agent	60
Dental and Oral Agents	60
Dermatological Agents	61
Electrolytes/Minerals/Metals/Vitamins	65
Gastrointestinal Agents	69
Genetic or Enzyme Disorder: Replacement, Modifiers, Treatment	73
Genitourinary Agents	74
Hormonal Agents, Stimulant/Replacement/Modifying (Adrenal)	76
Hormonal Agents, Stimulant/Replacement/Modifying (Pituitary)	78
Hormonal Agents, Stimulant/Replacement/Modifying (Prostaglandins)	79
Hormonal Agents, Stimulant/Replacement/Modifying (Sex Hormones/Modifiers)	80
Hormonal Agents, Stimulant/Replacement/Modifying (Thyroid)	87
Hormonal Agents, Suppressant (Adrenal)	88
Hormonal Agents, Suppressant (Pituitary)	88
Hormonal Agents, Suppressant (Thyroid)	88
Immunological Agents	88
Inflammatory Bowel Disease Agents	94
Metabolic Bone Disease Agents	95
Miscellaneous Therapeutic Agents	96
Ophthalmic Agents	99
Otic Agents	103
Respiratory Tract/Pulmonary Agents	103
Skeletal Muscle Relaxants	110
Sleep Disorder Agents	111

Drug Name	Drug Tier	Notes
Analgesics		
JOURNAVX	Not covered	QL
Nonsteroidal Anti-inflammatory Drugs		
aspirin 81 oral tablet delayed release	Preventive	PV1
aspirin adult low dose	Preventive	PV1
aspirin adult low strength	Preventive	PV1
aspirin childrens	Preventive	PV1
aspirin ec adult low dose	Preventive	PV1
aspirin ec low dose	Preventive	PV1
aspirin ec low strength	Preventive	PV1
aspirin low dose	Preventive	PV1
aspirin oral tablet chewable	Preventive	PV1
aspirin oral tablet delayed release 81 mg	Preventive	PV1
aspirin regimen	Preventive	PV1
celecoxib oral	Generic	
COMBOGESIC ORAL	Not covered	
COXANTO	Not covered	QL
DICLOFENAC PATCH 1.3%	Nonpreferred brand	PA; QL
DICLOFENAC PATCH 1.3%	Nonpreferred brand	PA; ABA; QL
diclofenac potassium oral capsule	Generic	PA; QL
diclofenac potassium oral tablet 25 mg	Not covered	
diclofenac potassium oral tablet 50 mg	Generic	
diclofenac sodium er	Generic	
diclofenac sodium external solution 1.5 %	Generic	
diclofenac sodium external solution 2 %	Generic	PA; QL
diclofenac sodium oral	Generic	
diclofenac-misoprostol	Generic	
diflunisal oral	Generic	
DOLOBID	Not covered	
ELYXYB	Not covered	
etodolac	Generic	
etodolac er	Generic	
fenoprofen calcium oral	Generic	QL
FENOPRON	Not covered	
FLECTOR	Nonpreferred brand	PA; QL
flurbiprofen oral	Generic	

Drug Name	Drug Tier	Notes
ft aspirin low dose	Preventive	PV1
ft aspirin oral tablet chewable	Preventive	PV1
goodsense aspirin low dose	Preventive	PV1
ibuprofen oral suspension 100 mg/5ml	Generic	
ibuprofen oral tablet 300 mg	Not covered	
ibuprofen oral tablet 400 mg, 600 mg, 800 mg	Generic	
ibuprofen-famotidine	Not covered	QL
indomethacin er	Generic	
indomethacin oral capsule	Generic	
indomethacin oral suspension	Not covered	
INDOMETHACIN RECTAL SUPPOSITORY 100 MG	Not covered	QL
indomethacin rectal suppository 50 mg	Generic	QL
ketoprofen er	Generic	
ketoprofen oral capsule 25 mg	Generic	PA; QL
ketoprofen oral capsule 50 mg	Generic	
ketorolac tromethamine +rfid	Generic	
ketorolac tromethamine injection	Generic	
ketorolac tromethamine intramuscular solution 60 mg/2ml	Generic	
ketorolac tromethamine oral	Generic	QL
LICART	Not covered	QL
meclofenamate sodium oral	Generic	
mefenamic acid oral	Generic	
meloxicam oral capsule	Generic	PA; QL
MELOXICAM ORAL SUSPENSION	Not covered	ABA
meloxicam oral tablet	Generic	
mm aspirin	Preventive	PV1
nabumetone oral	Generic	
naproxen dr	Generic	
naproxen oral	Generic	
naproxen sodium er	Not covered	
naproxen sodium oral tablet 275 mg, 550 mg	Generic	
naproxen-esomeprazole mg	Not covered	QL
ORUDIS	Not covered	
OXAPROZIN ORAL CAPSULE	Not covered	ABA; QL
oxaprozin oral tablet	Generic	

Drug Name	Drug Tier	Notes
piroxicam oral	Generic	
RELAFEN DS	Not covered	
salsalate oral	Generic	
SPRIX	Not covered	QL
sulindac oral	Generic	
TOLECTIN 600	Not covered	
tolmetin sodium oral capsule	Not covered	
tolmetin sodium oral tablet	Generic	
VYSCOXA	Not covered	
ZYBIC	Not covered	
Opioid Analgesics, Long-acting		
BELBUCA	Nonpreferred brand	PA; QL
buprenorphine	Generic	QL
CONZIP	Not covered	
fentanyl transdermal patch 72 hour 100 mcg/hr, 12 mcg/hr, 25 mcg/hr, 50 mcg/hr, 75 mcg/hr	Generic	QL
fentanyl transdermal patch 72 hour 37.5 mcg/hr, 62.5 mcg/hr, 87.5 mcg/hr	Not covered	QL
hydrocodone bitartrate er	Generic	PA; QL
hydromorphone hcl er	Generic	PA; QL
levorphanol tartrate oral	Not covered	QL
methadone hcl intensol	Generic	
methadone hcl oral concentrate	Generic	
methadone hcl oral solution	Generic	
methadone hcl oral tablet	Generic	
morphine sulfate er	Generic	QL
morphine sulfate er beads	Generic	QL
NUCYNTA ER	Nonpreferred brand	PA; QL
OXYCONTIN	Not covered	QL
oxymorphone hcl er	Generic	PA; QL
TAPENTADOL HCL ER	Nonpreferred brand	PA; QL
TRAMADOL HCL (ER BIPHASIC) ORAL CAPSULE EXTENDED RELEASE 24 HOUR	Not covered	ABA
tramadol hcl (er biphasic) oral tablet extended release 24 hour	Generic	
tramadol hcl er	Generic	
TRAMADOL HCL ORAL SOLUTION	Not covered	ABA; QL
XTAMPZA ER	Preferred brand	PA; QL

Drug Name	Drug Tier	Notes
xyvona	Not covered	QL
Opioid Analgesics, Short-acting		
acetaminophen-codeine	Generic	
ALLZITAL	Not covered	
apap-caff-dihydrocodeine	Generic	
ascomp-codeine	Generic	
bac (butalbital-acetamin-caff)	Generic	
butalbital-acetaminophen oral capsule	Not covered	
butalbital-acetaminophen oral tablet 50-300 mg	Not covered	
butalbital-acetaminophen oral tablet 50-325 mg	Generic	
butalbital-apap-caff-cod	Generic	
butalbital-apap-caffeine	Generic	
butalbital-asa-caff-codeine	Generic	
butalbital-aspirin-caffeine	Generic	
butorphanol tartrate nasal	Generic	
codeine sulfate	Generic	
endocet	Generic	
hydrocodone-acetaminophen oral solution 10-300 mg/15ml, 7.5-325 mg/15ml	Generic	
hydrocodone-acetaminophen oral tablet	Generic	
hydrocodone-ibuprofen	Generic	
hydromorphone hcl oral	Generic	
hydromorphone hcl rectal	Generic	
meperidine hcl oral	Generic	
morphine sulfate (concentrate) oral solution 100 mg/5ml	Generic	
morphine sulfate oral	Generic	
morphine sulfate rectal	Generic	
nalbuphine hcl injection	Generic	
NALOCET	Not covered	
oxycodone hcl oral capsule	Generic	QL
oxycodone hcl oral concentrate	Generic	QL
oxycodone hcl oral solution	Generic	QL
oxycodone hcl oral tablet	Generic	QL
OXYCODONE HCL ORAL TABLET ABUSE-DETERRENT	Not covered	ABA
OXYCODONE-ACETAMINOPHEN ORAL SOLUTION	Not covered	

Drug Name	Drug Tier	Notes
OXYCODONE-ACETAMINOPHEN ORAL TABLET 10-300 MG, 2.5-300 MG, 5-300 MG, 7.5-300 MG	Not covered	
oxycodone-acetaminophen oral tablet 10-325 mg, 2.5-325 mg, 5-325 mg, 7.5-325 mg	Generic	
oxymorphone hcl	Generic	QL
pentazocine-naloxone hcl	Generic	
PROLATE	Not covered	
ROXYBOND	Not covered	
tapentadol hcl	Generic	PA; QL
TENCON	Preferred brand	
tramadol hcl oral tablet 100 mg, 50 mg	Generic	
tramadol hcl oral tablet 25 mg, 75 mg	Not covered	
tramadol-acetaminophen	Generic	
Anesthetics		
Local Anesthetics		
glydo	Generic	
lidocaine external ointment 5 %	Not covered	
lidocaine external patch 5 %	Generic	
lidocaine hcl external solution	Generic	
lidocaine hcl mouth/throat	Generic	
lidocaine hcl urethral/mucosal external gel	Not covered	
lidocaine hcl urethral/mucosal external prefilled syringe	Generic	
lidocaine viscous hcl	Generic	
lidocaine-prilocaine external cream	Generic	
ZTLIDO	Not covered	QL
Anti-Addiction/Substance Abuse Treatment Agents		
Alcohol Deterrents/Anti-craving		
acamprosate calcium	Generic	
disulfiram oral	Generic	
naltrexone hcl oral	Generic	
Opioid Dependence Treatments		
buprenorphine hcl sublingual	Generic	
buprenorphine hcl-naloxone hcl	Generic	QL
lofexidine hcl	Generic	QL
ZUBSOLV	Preferred brand	QL

Drug Name	Drug Tier	Notes
Opioid Reversal Agents		
ft naloxone hcl	Generic	QL
KLOXXADO	Preferred brand	QL
naloxone hcl injection	Generic	
naloxone hcl nasal	Generic	QL
NARCAN	Nonpreferred brand	QL
OPVEE	Preferred brand	QL
REXTOVY	Preferred brand	QL
RIVIVE	Preferred brand	QL
ZURNAI	Nonpreferred brand	QL
Smoking Cessation Agents		
bupropion hcl er (smoking det)	Generic	PV2; QL; AL (Min 18 Years)
ft nicotine	Preventive	PV1; QL; AL (Min 18 Years)
ft nicotine mini	Preventive	PV1; QL; AL (Min 18 Years)
goodsense nicotine mouth/throat gum	Preventive	PV1; QL; AL (Min 18 Years)
goodsense nicotine mouth/throat lozenge 4 mg	Preventive	PV1; QL; AL (Min 18 Years)
goodsense nicotine polacrilex	Preventive	PV1; QL; AL (Min 18 Years)
habitrol	Preventive	PV1; QL; AL (Min 18 Years)
nicotine mini	Preventive	PV1; QL; AL (Min 18 Years)
nicotine polacrilex mini	Preventive	PV1; QL; AL (Min 18 Years)
nicotine polacrilex mouth/throat	Preventive	PV1; QL; AL (Min 18 Years)
nicotine step 1	Preventive	PV1; QL; AL (Min 18 Years)
nicotine step 2	Preventive	PV1; QL; AL (Min 18 Years)
nicotine step 3	Preventive	PV1; QL; AL (Min 18 Years)
nicotine transdermal kit	Preventive	PV1; QL; AL (Min 18 Years)
nicotine transdermal patch 24 hour 21 mg/24hr	Preventive	PV1; QL; AL (Min 18 Years)
NICOTROL NS	Preferred brand	PV2; QL; AL (Min 18 Years)
varenicline tartrate	Generic	PV2; QL; AL (Min 18 Years)
varenicline tartrate (starter)	Generic	PV2; QL; AL (Min 18 Years)
varenicline tartrate(continue)	Generic	PV2; QL; AL (Min 18 Years)
Antibacterials		
Aminoglycosides		
ARIKAYCE	Preferred brand	PA; SP; QL
gentamicin sulfate external	Generic	
HUMATIN	Nonpreferred brand	
neomycin sulfate oral	Generic	

Drug Name	Drug Tier	Notes
Antibacterials, Other		
BLUJEP A	Nonpreferred brand	QL
CLEOCIN VAGINAL SUPPOSITORY	Nonpreferred brand	
clindamycin hcl oral	Generic	
clindamycin palmitate hcl	Generic	
clindamycin phosphate vaginal	Generic	
CLINDESSE	Nonpreferred brand	
fosfomycin tromethamine	Generic	
LIKMEZ	Nonpreferred brand	QL
linezolid oral	Generic	
methenamine hippurate	Generic	
metronidazole oral capsule	Not covered	
metronidazole oral tablet 125 mg	Not covered	
metronidazole oral tablet 250 mg, 500 mg	Generic	
metronidazole vaginal	Generic	
mupirocin cream	Not covered	
mupirocin ointment	Generic	
NEO-SYNALAR	Nonpreferred brand	
nitrofurantoin macrocrystal	Generic	
nitrofurantoin monohydrate macrocrystals	Generic	
nitrofurantoin oral suspension 25 mg/5ml	Generic	
NITROFURANTOIN ORAL SUSPENSION 50 MG/5ML	Not covered	ABA
NUVESSA	Nonpreferred brand	
ORLYNVAH	Nonpreferred brand	PA; QL
silver sulfadiazine external	Generic	
SIVEXTRO ORAL	Nonpreferred brand	QL
SOLOSEC	Not covered	QL
ssd	Generic	
SULFAMYLON	Nonpreferred brand	
tinidazole oral	Generic	QL
trimethoprim oral	Generic	
vancomycin hcl oral capsule	Generic	
vancomycin hcl oral solution reconstituted	Generic	QL
VANDAZOLE	Nonpreferred brand	
XACIATO	Not covered	
XIFAXAN ORAL TABLET 200 MG	Nonpreferred brand	QL

Drug Name	Drug Tier	Notes
XIFAXAN ORAL TABLET 550 MG	Nonpreferred brand	PA; QL
Beta-lactam, Cephalosporins		
cefaclor	Generic	
cefaclor er	Generic	
cefadroxil	Generic	
cefdinir	Generic	
cefixime oral capsule	Generic	
cefixime oral suspension reconstituted	Generic	
CEFIXIME ORAL TABLET	Not covered	
cefpodoxime proxetil	Generic	
cefprozil	Generic	
cefuroxime axetil	Generic	
cephalexin	Generic	
Beta-lactam, Penicillins		
amoxicillin	Generic	
amoxicillin-potassium clavulanate	Generic	
amoxicillin-potassium clavulanate er	Generic	
ampicillin	Generic	
AUGMENTIN	Nonpreferred brand	
dicloxacillin sodium	Generic	
penicillin v potassium	Generic	
PIVYA	Nonpreferred brand	QL
Macrolides		
azithromycin oral	Generic	
clarithromycin er	Generic	
clarithromycin oral	Generic	
DIFICID ORAL SUSPENSION RECONSTITUTED	Nonpreferred brand	QL
E.E.S. 400	Nonpreferred brand	
erythromycin base oral	Generic	
erythromycin ethylsuccinate oral suspension reconstituted	Generic	
erythromycin oral	Generic	
fidaxomicin	Generic	QL
Quinolones		
BAXDELA ORAL	Nonpreferred brand	

Drug Name	Drug Tier	Notes
CIPRO ORAL SUSPENSION RECONSTITUTED	Nonpreferred brand	
ciprofloxacin hcl oral	Generic	
levofloxacin oral	Generic	
moxifloxacin hcl oral	Generic	
ofloxacin oral	Generic	
Sulfonamides		
sulfadiazine oral	Generic	
sulfamethoxazole-trimethoprim oral suspension 200-40 mg/5ml	Generic	
sulfamethoxazole-trimethoprim oral tablet	Generic	
sulfatrim pediatric	Generic	
Tetracyclines		
demeclocycline hcl	Generic	
DORYX MPC	Nonpreferred brand	ST
doxycycline hyclate oral capsule	Generic	
doxycycline hyclate oral tablet 100 mg, 20 mg, 75 mg	Generic	
doxycycline hyclate oral tablet 150 mg	Generic	QL
doxycycline hyclate oral tablet 50 mg	Not covered	
doxycycline hyclate oral tablet delayed release	Generic	ST
doxycycline monohydrate oral capsule 100 mg, 50 mg, 75 mg	Generic	
doxycycline monohydrate oral capsule 150 mg	Generic	ST
doxycycline monohydrate oral suspension reconstituted	Generic	
doxycycline monohydrate oral tablet	Generic	
minocycline hcl er oral tablet extended release 24 hour 105 mg, 115 mg, 135 mg, 45 mg, 65 mg, 90 mg	Not covered	
minocycline hcl er oral tablet extended release 24 hour 55 mg, 80 mg	Generic	
minocycline hcl oral	Generic	
NUZYRA ORAL	Nonpreferred brand	QL
SEYSARA	Not covered	
tetracycline hcl oral capsule	Generic	
TETRACYCLINE HCL ORAL TABLET	Not covered	

Drug Name	Drug Tier	Notes
Anticonvulsants		
Anticonvulsants, Other		
brivaracetam oral	Generic	PA; QL
ELEPSIA XR	Nonpreferred brand	PA; QL
EPIDIOLEX	Nonpreferred brand	PA; SP; QL
FINTEPLA	Nonpreferred brand	PA; SP; QL
levetiracetam er	Generic	
levetiracetam oral solution	Generic	
levetiracetam oral tablet	Generic	
LEVETIRACETAM ORAL TABLET DISINTEGRATING SOLUBLE 500 MG	Nonpreferred brand	PA; QL
LEVETIRACETAM TABLET DISINTEGRATING SOLUBLE 250 MG ORAL	Nonpreferred brand	ABA; QL
roweepra	Generic	
SPRITAM	Nonpreferred brand	PA; QL
Calcium Channel Modifying Agents		
ethosuximide oral	Generic	
methsuximide	Generic	
ZONISADE	Nonpreferred brand	PA; QL
zonisamide oral	Generic	
Gamma-aminobutyric Acid (GABA) Augmenting Agents		
clobazam oral suspension 2.5 mg/ml	Generic	QL
clobazam oral tablet	Generic	QL
DIACOMIT	Nonpreferred brand	PA; SP; QL
diazepam rectal	Generic	
gabapentin oral capsule	Generic	
gabapentin oral solution	Generic	
gabapentin oral tablet 600 mg, 800 mg	Generic	
GABARONE	Not covered	
NAYZILAM	Preferred brand	QL
phenobarbital oral	Generic	
primidone oral	Generic	
SYMPAZAN	Not covered	QL
tiagabine hcl	Generic	
valproic acid oral capsule	Generic	
valproic acid oral solution 250 mg/5ml	Generic	

Drug Name	Drug Tier	Notes
VALTOCO 10 MG DOSE	Preferred brand	QL
VALTOCO 15 MG DOSE	Preferred brand	QL
VALTOCO 20 MG DOSE	Preferred brand	QL
VALTOCO 5 MG DOSE	Preferred brand	QL
vigabatrin	Generic	PA; SP; QL
VIGAFYDE	Not covered	SP; QL
XCOPRI	Nonpreferred brand	PA; QL
ZTALMY	Preferred brand	PA; SP; QL
Glutamate Reducing Agents		
felbamate	Generic	
LAMICTAL XR ORAL KIT	Nonpreferred brand	
lamotrigine er	Generic	
lamotrigine oral	Generic	
lamotrigine starter kit-blue	Generic	
lamotrigine starter kit-green	Generic	
lamotrigine starter kit-orange	Generic	
perampanel	Generic	QL
SUBVENITE ORAL SUSPENSION	Not covered	
subvenite oral tablet	Generic	
subvenite starter kit-blue	Generic	
subvenite starter kit-green	Generic	
subvenite starter kit-orange	Generic	
TOPAMAX	Nonpreferred brand	
topiramate er	Generic	PA; QL
topiramate oral capsule sprinkle	Generic	
topiramate oral solution	Generic	PA; QL
topiramate oral tablet	Generic	
Sodium Channel Agents		
carbamazepine er	Generic	
carbamazepine oral suspension 100 mg/5ml	Generic	
carbamazepine oral tablet	Generic	
carbamazepine oral tablet chewable	Generic	
DILANTIN ORAL CAPSULE 30 MG	Preferred brand	
eslicarbazepine acetate	Generic	PA; QL
lacosamide oral solution 10 mg/ml	Generic	
lacosamide oral tablet	Generic	QL
MOTPOLY XR	Nonpreferred brand	PA; QL

Drug Name	Drug Tier	Notes
oxcarbazepine	Generic	
oxcarbazepine er	Generic	PA; QL
phenytek	Generic	
phenytoin infatabs	Generic	
phenytoin oral suspension 125 mg/5ml	Generic	
phenytoin oral tablet chewable	Generic	
phenytoin sodium extended	Generic	
rufinamide oral suspension 40 mg/ml	Generic	
rufinamide oral tablet	Generic	PA; QL
Antidementia Agents		
Antidementia Agents, Other		
memantine hcl-donepezil hcl er	Generic	ST; QL
NAMZARIC ORAL CAPSULE EXTENDED RELEASE 24 HOUR 7-10 MG	Nonpreferred brand	ST; QL
Cholinesterase Inhibitors		
donepezil hcl oral tablet 10 mg, 5 mg	Generic	
donepezil hcl oral tablet 23 mg	Generic	QL
donepezil hcl oral tablet dispersible	Generic	
galantamine hydrobromide	Generic	
galantamine hydrobromide er	Generic	
rivastigmine	Generic	
rivastigmine tartrate	Generic	
ZUNVEYL	Not covered	
N-methyl-D-aspartate (NMDA) Receptor Antagonist		
memantine hcl er	Generic	QL
memantine hcl oral solution 2 mg/ml	Generic	
memantine hcl oral tablet 10 mg, 5 mg	Generic	
memantine hcl oral tablet 28 x 5 mg & 21 x 10 mg	Generic	QL
Antidepressants		
Antidepressants, Other		
APLENZIN	Not covered	
AUVELITY	Nonpreferred brand	ST; QL
bupropion hcl er (sr)	Generic	
bupropion hcl er (xl) oral tablet extended release 24 hour 150 mg, 300 mg	Generic	

Drug Name	Drug Tier	Notes
BUPROPION HCL ER (XL) ORAL TABLET EXTENDED RELEASE 24 HOUR 450 MG	Not covered	ABA; QL
bupropion hcl oral	Generic	
chlordiazepoxide-amitriptyline	Generic	
EXXUA	Nonpreferred brand	ST; QL
EXXUA TITRATION PACK	Nonpreferred brand	ST; QL
mirtazapine oral	Generic	
olanzapine-fluoxetine hcl	Generic	
perphenazine-amitriptyline	Generic	
ZURZUVAE	Nonpreferred brand	PA; QL
Monoamine Oxidase Inhibitors		
EMSAM	Nonpreferred brand	PA; QL
MARPLAN	Nonpreferred brand	
phenelzine sulfate oral	Generic	
tranylcypromine sulfate	Generic	
SSRI/SNRI (Selective Serotonin Reuptake Inhibitors/Serotonin and Norepinephrine Reuptake Inhibitors)		
CITALOPRAM HYDROBROMIDE ORAL CAPSULE	Not covered	QL
citalopram hydrobromide oral solution 10 mg/5ml	Generic	
citalopram hydrobromide oral tablet	Generic	
DESVENLAFAXINE ER	Nonpreferred brand	ST
desvenlafaxine succinate er	Generic	
DRIZALMA SPRINKLE	Not covered	QL
duloxetine hcl oral	Generic	
ESCITALOPRAM OXALATE ORAL CAPSULE	Not covered	
escitalopram oxalate oral solution	Generic	
escitalopram oxalate oral tablet	Generic	
FETZIMA	Nonpreferred brand	ST; QL
FETZIMA TITRATION	Nonpreferred brand	ST; QL
fluoxetine hcl (pmdd)	Generic	
fluoxetine hcl oral	Generic	
fluvoxamine maleate	Generic	
fluvoxamine maleate er	Generic	
nefazodone hcl	Generic	
paroxetine hcl	Generic	

Drug Name	Drug Tier	Notes
paroxetine hcl er	Generic	
paroxetine mesylate	Generic	QL
RALDESY	Not covered	
sertraline hcl oral capsule	Generic	PA; QL
sertraline hcl oral concentrate	Generic	
sertraline hcl oral tablet	Generic	
trazodone hcl oral	Generic	
TRINTELLIX	Nonpreferred brand	ST; QL
VENLAFAXINE BESYLATE ER	Not covered	QL
venlafaxine hcl	Generic	
venlafaxine hcl er oral capsule extended release 24 hour	Generic	
venlafaxine hcl er oral tablet extended release 24 hour	Not covered	
vilazodone hcl	Generic	
Tricyclics		
amitriptyline hcl oral	Generic	
amoxapine	Generic	
clomipramine hcl oral	Generic	
desipramine hcl oral	Generic	
doxepin hcl oral capsule	Generic	
doxepin hcl oral concentrate	Generic	
imipramine hcl oral	Generic	
imipramine pamoate	Generic	
nortriptyline hcl oral	Generic	
protriptyline hcl	Generic	
trimipramine maleate oral	Generic	
Antiemetics		
Antiemetics, Other		
BONJESTA	Nonpreferred brand	PA; QL
doxylamine-pyridoxine	Generic	QL
GIMOTI	Not covered	QL
meclizine hcl oral tablet 12.5 mg, 25 mg	Generic	
meclizine hcl oral tablet 50 mg	Not covered	
metoclopramide hcl oral solution 5 mg/5ml	Generic	
metoclopramide hcl oral tablet	Generic	
metoclopramide hcl oral tablet dispersible	Generic	

Drug Name	Drug Tier	Notes
perphenazine oral	Generic	
prochlorperazine	Generic	
prochlorperazine maleate oral	Generic	
promethazine hcl oral solution 6.25 mg/5ml	Generic	
promethazine hcl oral tablet	Generic	
promethazine hcl rectal	Generic	
PROMETHEGAN RECTAL SUPPOSITORY 50 MG	Nonpreferred brand	
scopolamine	Generic	
trimethobenzamide hcl oral	Generic	
Emetogenic Therapy Adjuncts		
AKYNZEO ORAL	Nonpreferred brand	PA; OVM
ANZEMET	Not covered	
aprepitant oral capsule	Generic	QL
dronabinol	Generic	
EMEND ORAL	Preferred brand	QL
granisetron hcl oral	Generic	QL
ondansetron hcl oral solution 4 mg/5ml	Generic	
ondansetron hcl oral tablet	Generic	QL
ondansetron odt oral tablet dispersible 16 mg	Not covered	QL
ondansetron odt oral tablet dispersible 4 mg, 8 mg	Generic	QL
SANCUSO	Nonpreferred brand	PA; OVM
SYNDROS	Not covered	
VARUBI (180 MG DOSE)	Nonpreferred brand	PA; OVM
Antifungals		
ciclodan	Generic	
ciclopirox external	Generic	
ciclopirox olamine external	Generic	
clotrimazole external	Generic	
clotrimazole mouth/throat	Generic	
clotrimazole-betamethasone	Generic	
CRESEMBA ORAL	Preferred brand	QL
econazole nitrate external cream	Generic	
ECONAZOLE NITRATE EXTERNAL FOAM	Not covered	ABA; QL
ECOZA	Nonpreferred brand	PA; QL
ERTACZO	Nonpreferred brand	

Drug Name	Drug Tier	Notes
EXELDERM	Nonpreferred brand	
fluconazole oral	Generic	
flucytosine oral	Generic	
griseofulvin microsize oral	Generic	
griseofulvin ultramicrosize oral tablet 125 mg, 250 mg	Generic	
griseofulvin ultramicrosize oral tablet 165 mg	Not covered	
GYNAZOLE-1	Nonpreferred brand	
itraconazole oral	Generic	
JUBLIA	Not covered	QL
ketoconazole external	Generic	
ketoconazole oral	Generic	
ketodan	Generic	
klayesta	Generic	
LULICONAZOLE	Nonpreferred brand	PA; ABA; QL
LUZU	Not covered	QL
miconazole 3 vaginal suppository	Generic	
MICONAZOLE-ZINC OXIDE-PETROLAT	Nonpreferred brand	ABA; QL
naftifine hcl external cream	Generic	QL
naftifine hcl external gel	Generic	PA; QL
NOXAFIL ORAL	Not covered	QL
nyamyc	Generic	
nystatin external	Generic	
nystatin mouth/throat	Generic	
nystatin oral	Generic	
nystatin-triamcinolone	Generic	
nystop	Generic	
ORAVIG	Nonpreferred brand	QL
oxiconazole nitrate	Generic	PA; QL
OXISTAT	Nonpreferred brand	PA; QL
posaconazole oral	Generic	QL
SULCONAZOLE NITRATE	Nonpreferred brand	ABA
tavaborole	Not covered	QL
terbinafine hcl oral	Generic	
terconazole	Generic	
TOLSURA	Not covered	
VIVJOA	Nonpreferred brand	PA; QL

Drug Name	Drug Tier	Notes
voriconazole oral	Generic	
VUSION	Nonpreferred brand	QL
Antigout Agents		
allopurinol oral tablet 100 mg, 300 mg	Generic	
allopurinol oral tablet 200 mg	Not covered	
colchicine oral	Generic	
colchicine-probenecid	Generic	
febuxostat	Generic	QL
GLOPERBA	Not covered	QL
probenecid	Generic	
Antimigraine Agents		
diclofenac potassium(migraine)	Not covered	QL
SYMBRAVO	Not covered	
Calcitonin Gene-Related Peptide (CGRP) Receptor Antagonist		
AIMOVIG SUBCUTANEOUS SOLUTION AUTO-INJECTOR 140 MG/ML, 70 MG/ML	Preferred brand	PA; QL
AJOVY	Nonpreferred brand	PA; QL
EMGALITY	Preferred brand	PA; QL
NURTEC	Preferred brand	PA; QL
QULIPTA	Preferred brand	PA; QL
UBRELVY	Preferred brand	PA; QL
ZAVZPRET	Nonpreferred brand	PA; QL
Ergot Alkaloids		
BREKIYA	Not covered	QL
dihydroergotamine mesylate injection	Generic	QL
dihydroergotamine mesylate nasal	Generic	QL
ERGOMAR	Not covered	QL
ergotamine-caffeine	Generic	QL
MIGERGOT	Not covered	QL
TRUDHESA	Not covered	QL
Serotonin (5-HT) Receptor Agonists		
almotriptan malate	Generic	ST; QL
eletriptan hydrobromide	Generic	QL
frovatriptan succinate	Generic	ST; QL
IMITREX STATDOSE REFILL	Nonpreferred brand	QL

Drug Name	Drug Tier	Notes
IMITREX STATDOSE SYSTEM SUBCUTANEOUS SOLUTION AUTO-INJECTOR 4 MG/0.5ML	Nonpreferred brand	QL
naratriptan hcl	Generic	QL
ONZETRA XSAIL	Nonpreferred brand	ST; QL
REYVOW	Nonpreferred brand	PA; QL
rizatriptan benzoate	Generic	QL
sumatriptan nasal	Generic	QL
sumatriptan succinate oral	Generic	QL
sumatriptan succinate subcutaneous	Generic	QL
sumatriptan-naproxen sodium	Generic	PA; QL
TOSYMRA	Not covered	QL
ZEMBRACE SYMTOUCH	Nonpreferred brand	ST; QL
ZOLMITRIPTAN NASAL SOLUTION 2.5 MG	Nonpreferred brand	ST; ABA; QL
zolmitriptan nasal solution 5 mg	Generic	ST; QL
zolmitriptan oral	Generic	QL
ZOMIG NASAL SOLUTION 2.5 MG	Nonpreferred brand	ST; QL
Antimyasthenic Agents		
Parasympathomimetics		
pyridostigmine bromide er oral tablet extended release	Generic	
pyridostigmine bromide oral solution	Generic	
pyridostigmine bromide oral tablet 30 mg	Not covered	
pyridostigmine bromide oral tablet 60 mg	Generic	
VYVGART HYTRULO SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	Nonpreferred brand	PA; SP; QL
Antimycobacterials		
Antimycobacterials, Other		
dapsone oral	Generic	
rifabutin	Generic	
Antituberculars		
cycloserine oral	Generic	
ethambutol hcl oral	Generic	
isoniazid oral	Generic	
PRETOMANID	Preferred brand	QL
PRIFTIN	Nonpreferred brand	
pyrazinamide oral	Generic	

Drug Name	Drug Tier	Notes
rifampin oral	Generic	
SIRTURO	Preferred brand	PA; QL
Antineoplastics		
Alkylating Agents		
cyclophosphamide oral capsule	Generic	
CYCLOPHOSPHAMIDE ORAL TABLET	Nonpreferred brand	ABA
LEUKERAN	Nonpreferred brand	
lomustine	Generic	
MATULANE	Preferred brand	SP
MYLERAN	Nonpreferred brand	
temozolomide	Generic	SP
VALCHLOR	Nonpreferred brand	PA; SP; OVM
Antiandrogens		
abiraterone acetate oral tablet 500 mg	Not covered	SP
abiraterone acetate tablet 250 mg oral (Civca)	Generic	SP
abiraterone acetate tablet 250 mg oral	Not covered	SP
abirtega	Generic	SP
bicalutamide	Generic	
ERLEADA	Nonpreferred brand	PA; SP; OVM
EULEXIN	Nonpreferred brand	PA; 15DS; SP; OVM
nilutamide	Generic	PA; OVM
NUBEQA	Nonpreferred brand	PA; 15DS; SP; OVM
ORGOVYX	Nonpreferred brand	PA; SP; OVM
XTANDI	Preferred brand	PA; 15DS; SP; OVM
YONSA	Not covered	SP
Antiangiogenic Agents		
lenalidomide	Generic	SP; QL
pomalidomide	Generic	PA; SP; OVM
REVLIMID	Not covered	SP
THALOMID	Preferred brand	SP
Antiestrogens/Modifiers		
fulvestrant	Generic	
INLURIYO	Preferred brand	PA; 15DS; SP; OVM
ORSERDU	Preferred brand	PA; 15DS; SP; OVM
SOLTAMOX	Nonpreferred brand	
tamoxifen citrate oral	Generic	PV3; QL

Drug Name	Drug Tier	Notes
toremifene citrate	Generic	
Antimetabolites		
capecitabine	Generic	SP
DROXIA	Nonpreferred brand	PA
hydroxyurea oral	Generic	
mercaptopurine oral suspension	Generic	SP
mercaptopurine oral tablet	Generic	
SIKLOS	Nonpreferred brand	PA
TABLOID	Nonpreferred brand	
XROMI	Nonpreferred brand	PA; QL
Antineoplastics, Other		
AKEEGA	Preferred brand	PA; 15DS; SP; OVM
BESREMI	Preferred brand	PA; 15DS; SP; OVM
COPIKTRA	Preferred brand	PA; SP; OVM
diclofenac sodium external gel 3 %	Generic	PA; QL
FLUOROURACIL EXTERNAL CREAM 0.5 %	Not covered	ABA; QL
fluorouracil external cream 5 %	Generic	
fluorouracil external solution	Generic	
INREBIC	Nonpreferred brand	PA; 15DS; SP; OVM
KISQALI (200 MG DOSE)	Preferred brand	PA; SP; OVM
KISQALI (400 MG DOSE)	Preferred brand	PA; SP; OVM
KISQALI (600 MG DOSE)	Preferred brand	PA; SP; OVM
KLISYRI (250 MG)	Nonpreferred brand	PA; QL
KLISYRI (350 MG)	Nonpreferred brand	PA; QL
KOMZIFTI	Preferred brand	PA; 15DS; SP; OVM
KRAZATI	Preferred brand	PA; 15DS; SP; OVM
lederle leucovorin	Generic	PA; QL
leucovorin calcium oral	Generic	PA; QL
LONSURF	Preferred brand	PA; SP; OVM
LUMAKRAS	Preferred brand	PA; 15DS; SP; OVM
MODEYSO	Preferred brand	PA; 15DS; SP; OVM
NINLARO	Preferred brand	PA; SP; OVM
OJJAARA	Preferred brand	PA; SP; OVM
ONUREG	Preferred brand	PA; SP; OVM
PIQRAY	Preferred brand	PA; SP; OVM
REVUFORJ	Preferred brand	PA; 15DS; SP; OVM
TOLAK	Not covered	QL

Drug Name	Drug Tier	Notes
VERZENIO	Preferred brand	PA; 15DS; SP; OVM
VONJO	Preferred brand	PA; SP; OVM
WELIREG	Preferred brand	PA; 15DS; SP; OVM
XPOVIO (100 MG ONCE WEEKLY)	Preferred brand	PA; SP; OVM
XPOVIO (40 MG ONCE WEEKLY)	Preferred brand	PA; SP; OVM
XPOVIO (40 MG TWICE WEEKLY)	Preferred brand	PA; SP; OVM
XPOVIO (60 MG ONCE WEEKLY)	Preferred brand	PA; SP; OVM
XPOVIO (60 MG TWICE WEEKLY)	Preferred brand	PA; SP; OVM
XPOVIO (80 MG ONCE WEEKLY)	Preferred brand	PA; SP; OVM
XPOVIO (80 MG TWICE WEEKLY)	Preferred brand	PA; SP; OVM
ZOLINZA	Preferred brand	PA; 15DS; SP; OVM
Aromatase Inhibitors, 3rd Generation		
anastrozole oral	Generic	PV3; QL
exemestane	Generic	PV3; QL
letrozole oral	Generic	
Enzyme Inhibitors		
BALVERSA	Preferred brand	PA; 15DS; SP; OVM
etoposide oral	Generic	
HYCAMTIN ORAL	Preferred brand	SP
LYTGOBI (12 MG DAILY DOSE)	Preferred brand	PA; 15DS; SP; OVM
LYTGOBI (16 MG DAILY DOSE)	Preferred brand	PA; 15DS; SP; OVM
LYTGOBI (20 MG DAILY DOSE)	Preferred brand	PA; 15DS; SP; OVM
OJEMDA ORAL SUSPENSION RECONSTITUTED	Preferred brand	PA; 15DS; SP; OVM
OJEMDA ORAL TABLET	Preferred brand	PA; SP; OVM
PEMAZYRE	Preferred brand	PA; SP; OVM
RUBRACA	Not covered	SP; QL
TALZENNA	Preferred brand	PA; 15DS; SP; OVM
VORANIGO	Preferred brand	PA; 15DS; SP; OVM
ZEJULA	Preferred brand	PA; SP; OVM
Molecular Target Inhibitors		
ALECENSA	Preferred brand	PA; SP; OVM
ALUNBRIG	Preferred brand	PA; SP; OVM
AUGTYRO	Nonpreferred brand	PA; 15DS; SP; OVM
AVMAPKI FAKZYNJA CO-PACK	Preferred brand	PA; SP; OVM
AYVAKIT	Preferred brand	PA; 15DS; SP; OVM
BOSULIF ORAL CAPSULE	Preferred brand	PA; SP; OVM

Drug Name	Drug Tier	Notes
BOSULIF ORAL TABLET	Preferred brand	PA; 15DS; SP; OVM
BRAFTOVI	Preferred brand	PA; SP; OVM
BRUKINSA	Nonpreferred brand	PA; 15DS; SP; OVM
CABOMETYX	Preferred brand	PA; 15DS; SP; OVM
CALQUENCE	Preferred brand	PA; 15DS; SP; OVM
CAPRELSA	Preferred brand	PA; 15DS; SP; OVM
COMETRIQ	Preferred brand	PA; SP; OVM
COTELLIC	Preferred brand	PA; SP; OVM
DANZITEN	Not covered	SP
dasatinib	Generic	PA; 15DS; SP; OVM
DAURISMO	Preferred brand	PA; 15DS; SP; OVM
ENSACOVE	Preferred brand	PA; SP; OVM
ERIVEDGE	Preferred brand	PA; 15DS; SP; OVM
erlotinib hcl	Generic	PA; 15DS; SP; OVM
everolimus oral tablet 10 mg, 2.5 mg, 5 mg, 7.5 mg	Generic	PA; 15DS; SP; OVM
everolimus oral tablet soluble	Generic	PA; 15DS; SP; OVM
FOTIVDA	Preferred brand	PA; SP; OVM
FRUZAQLA	Preferred brand	PA; SP; OVM
GAVRETO	Preferred brand	PA; 15DS; SP; OVM
gefitinib	Generic	PA; SP; OVM
GILOTRIF	Preferred brand	PA; SP; OVM
GOMEKLI	Preferred brand	PA; SP; OVM
HERNEXEOS	Preferred brand	PA; 15DS; SP; OVM
HYRNUO	Preferred brand	PA; SP; OVM
IBRANCE	Preferred brand	PA; SP; OVM
IBTROZI	Nonpreferred brand	PA; 15DS; SP; OVM
ICLUSIG	Preferred brand	PA; 15DS; SP; OVM
IDHIFA	Preferred brand	PA; SP; OVM
imatinib mesylate oral	Generic	SP
IMBRUVICA ORAL CAPSULE	Preferred brand	PA; 15DS; SP; OVM
IMBRUVICA ORAL SUSPENSION	Preferred brand	PA; SP; OVM
IMBRUVICA ORAL TABLET 140 MG, 280 MG	Not covered	SP
IMBRUVICA ORAL TABLET 420 MG	Preferred brand	PA; SP; OVM
IMKELDI	Not covered	SP
INLYTA	Preferred brand	PA; 15DS; SP; OVM
INQOVI	Preferred brand	PA; SP; OVM

Drug Name	Drug Tier	Notes
ITOVEBI	Preferred brand	PA; 15DS; SP; OVM
JAKAFI	Preferred brand	PA; 15DS; SP; OVM
JAYPIRCA	Preferred brand	PA; 15DS; SP; OVM
KOSELUGO	Preferred brand	PA; SP; OVM
lapatinib ditosylate	Generic	PA; SP; OVM
LAZCLUZE	Preferred brand	PA; 15DS; SP; OVM
LENVIMA ORAL CAPSULE THERAPY PACK 10 & 4 MG, 10 MG, 10 MG & 2 X 4 MG, 2 X 10 MG, 2 X 10 MG & 4 MG, 2 X 4 MG, 3 X 4 MG, 4 MG	Preferred brand	PA; 15DS; SP; OVM
LORBRENA	Preferred brand	PA; 15DS; SP; OVM
LYNPARZA	Preferred brand	PA; SP; OVM
MEKINIST	Preferred brand	PA; SP; OVM
MEKTOVI	Preferred brand	PA; SP; OVM
NERLYNX	Preferred brand	PA; 15DS; SP; OVM
NILOTINIB D-TARTRATE	Not covered	SP
nilotinib hcl	Generic	PA; 15DS; SP; OVM
ODOMZO	Preferred brand	PA; 15DS; SP; OVM
OGSIVEO	Preferred brand	PA; 15DS; SP; OVM
pazopanib hcl	Generic	PA; 15DS; SP; OVM
PHYRAGO	Not covered	15DS; SP
QINLOCK	Preferred brand	PA; SP; OVM
RETEVMO	Preferred brand	PA; 15DS; SP; OVM
REZLIDHIA	Preferred brand	PA; 15DS; SP; OVM
ROMVIMZA	Preferred brand	PA; SP; OVM
ROZLYTREK ORAL CAPSULE	Preferred brand	PA; 15DS; SP; OVM
ROZLYTREK ORAL PACKET	Nonpreferred brand	PA; SP; OVM
RYDAPT	Preferred brand	PA; SP; OVM
SCEMBLIX	Preferred brand	PA; SP; OVM
sorafenib tosylate	Generic	PA; 15DS; SP; OVM
STIVARGA	Preferred brand	PA; SP; OVM
sunitinib malate	Generic	PA; 15DS; SP; OVM
TABRECTA	Preferred brand	PA; 15DS; SP; OVM
TAFINLAR	Preferred brand	PA; SP; OVM
TAGRISO	Preferred brand	PA; 15DS; SP; OVM
TEPMETKO	Preferred brand	PA; 15DS; SP; OVM
TIBSOVO	Preferred brand	PA; 15DS; SP; OVM

Drug Name	Drug Tier	Notes
torpenz	Generic	PA; 15DS; SP; OVM
TRUQAP	Preferred brand	PA; SP; OVM
TUKYSA	Preferred brand	PA; SP; OVM
TURALIO	Preferred brand	PA; SP; OVM
VANFLYTA	Preferred brand	PA; 15DS; SP; OVM
VENCLEXTA	Preferred brand	PA; SP; OVM
VENCLEXTA STARTING PACK	Preferred brand	PA; SP; OVM
VIJOICE ORAL PACKET	Preferred brand	PA; SP; QL
VIJOICE ORAL TABLET THERAPY PACK 125 MG, 50 MG	Preferred brand	PA; SP; QL
VIJOICE ORAL TABLET THERAPY PACK 200 & 50 MG	Not covered	SP; QL
VITRAKVI ORAL CAPSULE	Preferred brand	PA; 15DS; SP; OVM
VITRAKVI ORAL SOLUTION	Preferred brand	PA; SP; OVM
VIZIMPRO	Preferred brand	PA; 15DS; SP; OVM
XALKORI	Not covered	SP
XOSPATA	Preferred brand	PA; SP; OVM
ZELBORAF	Preferred brand	PA; 15DS; SP; OVM
ZYDELIG	Preferred brand	PA; SP; OVM
ZYKADIA	Not covered	SP
Retinoids		
bexarotene external	Generic	PA; SP; OVM
bexarotene oral	Generic	PA; 15DS; SP; OVM
PANRETIN	Preferred brand	
tretinoin oral	Generic	
Treatment Adjuncts		
mesna oral	Generic	
Antiparasitics		
Anthelmintics		
albendazole oral	Generic	QL
BILTRICIDE	Nonpreferred brand	
EMVERM	Nonpreferred brand	QL
ivermectin oral tablet 3 mg	Generic	QL
ivermectin oral tablet 6 mg	Not covered	QL
praziquantel oral	Generic	
Antiprotozoals		
ARAKODA	Nonpreferred brand	QL

Drug Name	Drug Tier	Notes
atovaquone	Generic	
atovaquone-proguanil hcl	Generic	
BENZNIDAZOLE	Preferred brand	QL
chloroquine phosphate oral	Generic	
COARTEM	Preferred brand	QL
hydroxychloroquine sulfate oral	Generic	
IMPAVIDO	Preferred brand	QL
KRINTAFEL	Preferred brand	QL
LAMPIT	Nonpreferred brand	QL
mefloquine hcl	Generic	
nitazoxanide oral	Generic	QL
pentamidine isethionate inhalation	Generic	
primaquine phosphate	Generic	
pyrimethamine oral	Generic	PA; SP
quinine sulfate	Generic	
SOVUNA	Not covered	
Pediculicides/Scabicides		
CROTAN	Nonpreferred brand	
malathion	Generic	
permethrin external	Generic	
PRURADIK	Nonpreferred brand	
spinosad	Generic	
Antiparkinson Agents		
Anticholinergics		
benztropine mesylate oral	Generic	
trihexyphenidyl hcl	Generic	
Antiparkinson Agents, Other		
amantadine hcl oral capsule	Generic	
amantadine hcl oral solution 50 mg/5ml	Generic	
amantadine hcl oral tablet	Generic	
carbidopa-levodopa-entacapone	Generic	
entacapone	Generic	
GOCOVRI ORAL CAPSULE EXTENDED RELEASE 24 HOUR 137 MG	Not covered	QL
NOURIANZ	Nonpreferred brand	PA; SP; QL
ONGENTYS	Nonpreferred brand	QL
tolcapone	Generic	

Drug Name	Drug Tier	Notes
Dopamine Agonists		
apomorphine hcl subcutaneous	Not covered	SP; QL
bromocriptine mesylate oral	Generic	
INBRIJA	Nonpreferred brand	SP; QL
NEUPRO	Nonpreferred brand	PA; QL
ONAPGO	Nonpreferred brand	PA; SP; QL
pramipexole dihydrochloride	Generic	
pramipexole dihydrochloride er	Generic	QL
ropinirole hcl	Generic	
ropinirole hcl er	Generic	
Dopamine Precursors/L-Amino Acid Decarboxylase Inhibitors		
carbidopa oral	Generic	
carbidopa-levodopa	Generic	
CARBIDOPA-LEVODOPA ER ORAL CAPSULE EXTENDED RELEASE	Not covered	ABA; QL
carbidopa-levodopa er oral tablet extended release	Generic	
CREXONT	Nonpreferred brand	ST; QL
DHIVY	Not covered	QL
DUOPA	Preferred brand	PA; SP; QL
RYTARY	Nonpreferred brand	ST; QL
VYALEV	Nonpreferred brand	PA; SP; QL
Monoamine Oxidase B (MAO-B) Inhibitors		
rasagiline mesylate oral	Generic	
selegiline hcl oral	Generic	
XADAGO	Nonpreferred brand	QL
ZELAPAR	Nonpreferred brand	QL
Antipsychotics		
1st Generation/Typical		
chlorpromazine hcl oral tablet	Generic	
fluphenazine decanoate injection	Generic	
fluphenazine hcl oral	Generic	
haloperidol decanoate intramuscular	Generic	
haloperidol lactate oral concentrate 2 mg/ml	Generic	
haloperidol oral	Generic	
loxapine succinate	Generic	

Drug Name	Drug Tier	Notes
molindone hcl	Generic	QL
pimozide	Generic	
thioridazine hcl oral	Generic	
thiothixene	Generic	
trifluoperazine hcl	Generic	
2nd Generation/Atypical		
ABILIFY ASIMTUFII	Preferred brand	QL
ABILIFY MAINTENA	Preferred brand	
aripiprazole	Generic	
ARISTADA	Preferred brand	QL
ARISTADA INITIO	Preferred brand	
asenapine maleate	Generic	QL
CAPLYTA	Nonpreferred brand	ST; QL
ERZOFRI	Nonpreferred brand	QL
FANAPT	Nonpreferred brand	ST
FANAPT TITRATION PACK A	Nonpreferred brand	ST
FANAPT TITRATION PACK B	Nonpreferred brand	ST
FANAPT TITRATION PACK C	Nonpreferred brand	ST
INVEGA HAFYERA	Preferred brand	QL
INVEGA SUSTENNA	Preferred brand	
INVEGA TRINZA	Preferred brand	QL
lurasidone hcl	Generic	
LYBALVI	Nonpreferred brand	ST; QL
NUPLAZID	Nonpreferred brand	PA; QL
olanzapine oral	Generic	
OPIPZA	Not covered	QL
paliperidone er	Generic	QL
PERSERIS	Preferred brand	QL
quetiapine fumarate	Generic	
quetiapine fumarate er	Generic	QL
REXULTI	Nonpreferred brand	PA; QL
risperidone	Generic	
risperidone microspheres er	Generic	
RYKINDO	Preferred brand	QL
SECUADO	Nonpreferred brand	ST; QL
UZEDY	Preferred brand	QL
VRAYLAR	Nonpreferred brand	ST; QL

Drug Name	Drug Tier	Notes
ziprasidone hcl	Generic	
ZYPREXA RELPREVV	Preferred brand	
Antipsychotics, Other		
COBENFY	Not covered	QL
COBENFY STARTER PACK	Not covered	QL
Treatment-Resistant		
clozapine	Generic	
VERSACLOZ	Nonpreferred brand	
Antivirals		
LAGEVRIO	Preferred brand	QL; AL (Min 18 Years)
PAXLOVID (150/100)	Preferred brand	QL; AL (Min 12 Years)
PAXLOVID (300/100 & 150/100)	Preferred brand	QL; AL (Min 12 Years)
PAXLOVID (300/100)	Preferred brand	QL; AL (Min 12 Years)
Anti-cytomegalovirus (CMV) Agents		
LIVTENCITY	Preferred brand	PA; SP; QL
PREVYMIS ORAL	Nonpreferred brand	QL
valganciclovir hcl	Generic	
Anti-hepatitis B (HBV) Agents		
adefovir dipivoxil	Generic	SP
BARACLUDE ORAL SOLUTION	Preferred brand	SP
entecavir	Generic	SP
lamivudine oral tablet 100 mg	Generic	
VEMLIDY	Preferred brand	SP; QL
Anti-hepatitis C (HCV) Agents		
EPCLUSA	Preferred brand	PA; SP; QL
HARVONI	Nonpreferred brand	PA; SP; QL
LEDIPASVIR-SOFOSBUVIR	Preferred brand	PA; ABA; SP; QL
MAVYRET	Nonpreferred brand	PA; SP; QL
PEGASYS	Preferred brand	SP; QL
ribavirin oral	Generic	SP
SOFOSBUVIR-VELPATASVIR	Preferred brand	PA; ABA; SP; QL
SOVALDI	Nonpreferred brand	PA; SP; QL
VOSEVI	Nonpreferred brand	PA; SP; QL
Antitherpetic Agents		
acyclovir external cream	Not covered	
acyclovir external ointment	Generic	

Drug Name	Drug Tier	Notes
acyclovir oral capsule	Generic	
acyclovir oral suspension 200 mg/5ml	Generic	
acyclovir oral tablet	Generic	
famciclovir oral	Generic	
penciclovir	Not covered	
valacyclovir hcl oral	Generic	
XERESE	Not covered	QL
Anti-HIV Agents, Integrase Inhibitors (INSTI)		
BIKTARVY	Preferred brand	QL
DOVATO	Preferred brand	QL
GENVOYA	Preferred brand	QL
ISENTRESS	Preferred brand	
ISENTRESS HD	Preferred brand	
JULUCA	Preferred brand	QL
STRIBILD	Preferred brand	QL
TIVICAY	Preferred brand	
TIVICAY PD	Preferred brand	QL
Anti-HIV Agents, Non-nucleoside Reverse Transcriptase Inhibitors (NNRTI)		
DELSTRIGO	Preferred brand	QL
EDURANT PED	Preferred brand	QL
efavirenz	Generic	
efavirenz-emtricitab-tenofo df	Generic	
efavirenz-lamivudine-tenofovir	Generic	QL
emtricitab-rilpivir-tenofov df	Generic	QL
etravirine	Generic	
INTELENCE ORAL TABLET 25 MG	Preferred brand	
nevirapine	Generic	
nevirapine er	Generic	
PIFELTRO	Preferred brand	QL
rilpivirine hcl	Generic	QL
Anti-HIV Agents, Nucleoside and Nucleotide Reverse Transcriptase Inhibitors (NRTI)		
abacavir sulfate	Generic	
abacavir sulfate-lamivudine	Generic	
CIMDUO	Preferred brand	QL
DESCOVY ORAL TABLET 120-15 MG	Preferred brand	QL

Drug Name	Drug Tier	Notes
DESCOVY ORAL TABLET 200-25 MG	Preferred brand	PV2; QL
emtricitabine	Generic	
emtricitabine-tenofovir df oral tablet 100-150 mg, 133-200 mg, 167-250 mg	Generic	QL
emtricitabine-tenofovir df oral tablet 200-300 mg	Generic	PV2; QL
EMTRIVA ORAL SOLUTION	Preferred brand	
lamivudine oral solution 10 mg/ml	Generic	
lamivudine oral tablet 150 mg, 300 mg	Generic	
lamivudine-zidovudine	Generic	
ODEFSEY	Preferred brand	QL
tenofovir disoproxil fumarate	Generic	
TRIUMEQ	Preferred brand	QL
TRIUMEQ PD	Preferred brand	QL
VIREAD ORAL POWDER	Preferred brand	
VIREAD ORAL TABLET 150 MG, 200 MG, 250 MG	Preferred brand	
zidovudine	Generic	
Anti-HIV Agents, Other		
maraviroc	Generic	
RUKOBIA	Preferred brand	QL
SELZENTRY ORAL SOLUTION	Preferred brand	
SUNLENCA ORAL	Preferred brand	SP; QL
YEZTUGO ORAL	Nonpreferred brand	SP; QL
Anti-HIV Agents, Protease Inhibitors		
APTIVUS	Preferred brand	
atazanavir sulfate	Generic	
darunavir	Generic	
EVOTAZ	Preferred brand	QL
fosamprenavir calcium	Generic	
KALETRA ORAL SOLUTION	Nonpreferred brand	
lopinavir-ritonavir	Generic	
NORVIR ORAL PACKET	Preferred brand	
PREZCOBIX	Preferred brand	QL
PREZISTA ORAL SUSPENSION	Preferred brand	
PREZISTA ORAL TABLET 150 MG, 75 MG	Preferred brand	
REYATAZ ORAL PACKET	Preferred brand	
ritonavir	Generic	

Drug Name	Drug Tier	Notes
SYMTUZA	Preferred brand	QL
VIRACEPT	Not covered	
Anti-influenza Agents		
oseltamivir phosphate oral	Generic	QL
RELENZA DISKHALER	Preferred brand	QL
rimantadine hcl	Generic	
XOFLUZA (40 MG DOSE)	Preferred brand	QL
XOFLUZA (80 MG DOSE)	Preferred brand	QL
Anxiolytics		
Anxiolytics, Other		
BUCAPSOL	Not covered	
bupirone hcl oral	Generic	
hydroxyzine hcl oral syrup 10 mg/5ml	Generic	
hydroxyzine hcl oral tablet	Generic	
hydroxyzine pamoate oral	Generic	
meprobamate	Generic	
Benzodiazepines		
alprazolam er	Generic	
alprazolam intensol	Generic	
alprazolam oral	Generic	
alprazolam xr	Generic	
chlordiazepoxide hcl	Generic	
clonazepam oral	Generic	
clorazepate dipotassium	Generic	
diazepam intensol	Generic	
diazepam oral	Generic	
estazolam	Generic	QL
lorazepam intensol	Generic	
lorazepam oral concentrate 2 mg/ml	Generic	
lorazepam oral tablet	Generic	
LOREEV XR	Not covered	QL
midazolam hcl oral	Generic	
oxazepam	Generic	
quazepam	Not covered	QL

Drug Name	Drug Tier	Notes
Bipolar Agents		
Mood Stabilizers		
divalproex sodium er	Generic	
divalproex sodium oral	Generic	
EQUETRO	Nonpreferred brand	
lithium	Generic	
lithium carbonate er	Generic	
lithium carbonate oral	Generic	
Blood Glucose Monitoring		
ACCU-CHEK AVIVA PLUS KIT W/DEVICE	Covered \$0	QL
ACCU-CHEK AVIVA PLUS TEST STRIPS	Preferred brand	QL
ACCU-CHEK GUIDE	Covered \$0	QL
ACCU-CHEK GUIDE KIT W/DEVICE	Covered \$0	QL
ACCU-CHEK GUIDE TEST STRIPS	Preferred brand	QL
ACCU-CHEK SMARTVIEW TEST STRIPS	Preferred brand	QL
ADVANTAGE SAFETY LANCETS 28G	Preferred brand	QL
ADVOCATE SAFETY LANCETS 21G	Preferred brand	QL
ADVOCATE SAFETY LANCETS 23G	Preferred brand	QL
ADVOCATE SAFETY LANCETS 28G	Preferred brand	QL
CARESENS LANCETS 30G	Preferred brand	QL
CEQUR SIMPLICITY 2U 10PK	Preferred brand	QL
CEQUR SIMPLICITY INSERTER	Preferred brand	QL
CHOSEN LANCETS 30G	Preferred brand	QL
CHOSEN SAFETY LANCETS 28G	Preferred brand	QL
CLEVER CHOICE COMFORT EZ	Preferred brand	QL
COMFORT TOUCH TWIST LANCET 30G	Preferred brand	QL
CONTOUR NEXT EZ KIT W/DEVICE	Covered \$0	QL
CONTOUR NEXT GEN MONITOR KIT W/DEVICE	Covered \$0	QL
CONTOUR NEXT MONITOR KIT W/DEVICE	Covered \$0	QL
CONTOUR NEXT ONE KIT	Covered \$0	QL
CONTOUR NEXT GEN TEST STRIPS	Preferred brand	QL
CONTOUR PLUS TEST STRIP	Preferred brand	QL
CONTOUR TEST STRIPS	Preferred brand	QL
DEXCOM G6 RECEIVER	Covered \$0	PA; QL
DEXCOM G6 SENSOR	Preferred brand	PA; QL
DEXCOM G6 TRANSMITTER	Covered \$0	PA; QL

Drug Name	Drug Tier	Notes
DEXCOM G7 15 DAY SENSOR	Preferred brand	PA; QL
DEXCOM G7 RECEIVER	Covered \$0	PA; QL
DEXCOM G7 SENSOR	Preferred brand	PA; QL
DROPSAFE ACTI-LANCE 23G	Preferred brand	QL
DROPSAFE MEDLANCE LANCET 30G	Preferred brand	QL
FONDCIRCLE SINGLE USE LANCETS	Preferred brand	QL
FREESTYLE LIBRE 14 DAY READER	Preferred brand	PA; QL
FREESTYLE LIBRE 14 DAY SENSOR	Preferred brand	PA; QL
FREESTYLE LIBRE 2 PLUS SENSOR	Preferred brand	PA; QL
FREESTYLE LIBRE 2 READER	Preferred brand	PA; QL
FREESTYLE LIBRE 2 SENSOR	Preferred brand	PA; QL
FREESTYLE LIBRE 3 PLUS SENSOR	Preferred brand	PA; QL
FREESTYLE LIBRE 3 READER	Preferred brand	PA; QL
FREESTYLE LIBRE 3 SENSOR	Preferred brand	PA; QL
FREESTYLE LIBRE READER	Preferred brand	PA; QL
LANCETS	Preferred brand	QL
LANCETS 28G THIN	Preferred brand	QL
LANCETS SUPER THIN	Preferred brand	QL
MOBILE LANCETS 30G	Preferred brand	QL
ONETOUCH DELICA SAFETY LANCING	Preferred brand	QL
PERFECT POINT SAFETY LANCETS	Preferred brand	QL
PRODIGY AUTOCODE BLOOD GLUCOSE DEVICE	Covered \$0	PA; QL
PRODIGY NO CODING BLOOD GLUC IN VITRO	Preferred brand	PA; QL
PRODIGY VOICE BLOOD GLUCOSE	Covered \$0	PA; QL
PURE COMFORT SAFETY LANCET 30G	Preferred brand	QL
SENSILANCE SAFETY LANCETS 21G	Preferred brand	QL
SENSILANCE SAFETY LANCETS 26G	Preferred brand	QL
SENSILANCE SAFETY LANCETS 28G	Preferred brand	QL
TECHLITE LANCETS 26G	Preferred brand	QL
VERIFINE SAFE LANCET MINI 21G	Preferred brand	QL
VERIFINE SAFE LANCET MINI 23G	Preferred brand	QL
VERIFINE SAFE LANCET MINI 28G	Preferred brand	QL
VERIFINE SAFE LANCET MINI 30G	Preferred brand	QL
VIVAGUARD LANCETS 30G	Preferred brand	QL
VIVAGUARD SAFETY LANCETS 28G	Preferred brand	QL

Drug Name	Drug Tier	Notes
Blood Glucose Regulators		
Antidiabetic Agents		
acarbose oral	Generic	
ALOGLIPTIN BENZOATE	Not covered	ABA; QL
ALOGLIPTIN-METFORMIN HCL	Not covered	ABA; QL
ALOGLIPTIN-PIOGLITAZONE	Not covered	ABA; QL
BEXAGLIFLOZIN	Not covered	ABA; QL
BRENZAVVY	Not covered	QL
BRYNOVIN	Not covered	QL
CYCLOSET	Nonpreferred brand	QL
DAPAGLIFLOZIN PRO-METFORMIN ER	Not covered	ABA; QL
DAPAGLIFLOZIN PROPANEDIOL	Generic	QL
EXENATIDE	Not covered	QL
FARXIGA	Nonpreferred brand	QL
glimepiride	Generic	
glipizide er	Generic	
glipizide ir	Generic	
glipizide-metformin hcl	Generic	
glyburide	Generic	
glyburide-metformin	Generic	
GLYXAMBI	Preferred brand	QL
INVOKAMET	Not covered	QL
INVOKAMET XR	Not covered	QL
INVOKANA	Not covered	QL
JANUMET	Preferred brand	QL
JANUMET XR	Preferred brand	QL
JANUVIA	Preferred brand	QL
JARDIANCE	Preferred brand	QL
JENTADUETO	Preferred brand	QL
JENTADUETO XR	Preferred brand	QL
liraglutide	Generic	ST; QL
metformin hcl er	Generic	
metformin hcl er (mod)	Not covered	
metformin hcl er (osm)	Generic	PA
metformin hcl oral solution	Generic	
metformin hcl oral tablet 1000 mg, 500 mg, 850 mg	Generic	

Drug Name	Drug Tier	Notes
metformin hcl oral tablet 625 mg, 750 mg	Not covered	
miglitol	Generic	
MOUNJARO	Preferred brand	ST; QL
nateglinide	Generic	
OZEMPIC	Preferred brand	ST; QL
pioglitazone hcl	Generic	
pioglitazone hcl-glimepiride	Generic	
pioglitazone hcl-metformin hcl	Generic	
repaglinide	Generic	
RYBELSUS	Preferred brand	ST; QL
saxagliptin hcl	Not covered	QL
saxagliptin-metformin er	Not covered	
SEGLUROMET	Not covered	QL
SITAGLIPT BASE-METFORM HCL ER	Not covered	ABA; QL
SITAGLIPTIN	Not covered	ABA; QL
SITAGLIPTIN BASE-METFORMIN HCL	Not covered	ABA
SOLIQUA	Preferred brand	QL
STEGLATRO	Not covered	QL
STEGLUJAN	Not covered	QL
SYNJARDY	Preferred brand	QL
SYNJARDY XR	Preferred brand	QL
TRADJENTA	Preferred brand	QL
TRIJARDY XR	Preferred brand	QL
TRULICITY	Preferred brand	ST; QL
XIGDUO XR 2.5-1000MG	Preferred brand	QL
XULTOPHY	Preferred brand	QL
ZITUVIMET	Not covered	
ZITUVIMET XR	Not covered	QL
ZITUVIO	Not covered	QL
Glycemic Agents		
BAQSIMI ONE PACK	Preferred brand	QL
BAQSIMI TWO PACK	Preferred brand	QL
diazoxide oral	Generic	
glucagon emergency kit injection solution reconstituted 1 mg	Generic	
GLUCAGON EMERGENCY KIT	Not covered	
GVOKE HYPOPEN 1-PACK	Preferred brand	QL

Drug Name	Drug Tier	Notes
GVOKE HYOPEN 2-PACK	Preferred brand	QL
GVOKE KIT	Preferred brand	QL
GVOKE PFS	Preferred brand	QL
Insulins		
ADMELOG	Not covered	
ADMELOG SOLOSTAR	Not covered	
AFREZZA	Nonpreferred brand	PA
APIDRA SOLOSTAR	Not covered	
APIDRA VIAL	Not covered	
BASAGLAR KWIKPEN	Preferred brand	
FIASP	Preferred brand	
FIASP FLEXTOUCH	Preferred brand	
FIASP PENFILL	Preferred brand	
FIASP PUMPCART	Preferred brand	
HUMALOG	Not covered	
HUMALOG KWIKPEN	Not covered	
HUMALOG MIX 50/50 KWIKPEN	Not covered	
HUMALOG MIX 75/25 KWIKPEN	Not covered	
HUMALOG MIX 75/25 VIAL	Not covered	
HUMALOG U-100 JUNIOR KWIKPEN	Not covered	
HUMULIN 70/30 KWIKPEN	Not covered	
HUMULIN 70/30 VIAL	Not covered	
HUMULIN N KWIKPEN	Not covered	
HUMULIN N VIAL	Not covered	
HUMULIN R U-500 KWIKPEN	Preferred brand	
HUMULIN R VIAL	Not covered	
INSULIN GLARGINE MAX SOLOSTAR	Not covered	ABA
INSULIN GLARGINE SOLOSTAR	Not covered	ABA
INSULIN GLARGINE-YFGN SOLUTION PEN-INJECTOR 100 UNIT/ML SUBCUTANEOUS	Not covered	ABA
INSULIN GLARGINE-YFGN SOLUTION PEN-INJECTOR 100 UNIT/ML SUBCUTANEOUS (CIVICA)	Preferred brand	
INSULIN GLARGINE-YFGN SUBCUTANEOUS SOLUTION	Not covered	ABA
INSULIN LISPRO	Not covered	ABA
INSULIN LISPRO (1 UNIT DIAL)	Not covered	ABA
INSULIN LISPRO JUNIOR KWIKPEN	Nonpreferred brand	ABA

Drug Name	Drug Tier	Notes
INSULIN LISPRO PROT & LISPRO	Not covered	ABA
KIRSTY	Not covered	
LANTUS SOLOSTAR	Preferred brand	
LANTUS U-100 VIAL	Preferred brand	
LYUMJEV KWIKPEN	Not covered	
LYUMJEV VIAL	Not covered	
MERILOG	Not covered	
MERILOG SOLOSTAR	Not covered	
NOVOLIN 70/30 FLEXPEN	Preferred brand	
NOVOLIN 70/30 RELION	Not covered	
NOVOLIN 70/30 VIAL	Preferred brand	
NOVOLIN N FLEXPEN	Preferred brand	
NOVOLIN N RELION	Not covered	
NOVOLIN N VIAL	Preferred brand	
NOVOLIN R FLEXPEN	Preferred brand	
NOVOLIN R FLEXPEN RELION	Not covered	
NOVOLIN R RELION	Not covered	
NOVOLIN R VIAL	Preferred brand	
NOVOLOG 70/30 FLEXPEN RELION	Not covered	
NOVOLOG FLEXPEN	Preferred brand	
NOVOLOG FLEXPEN RELION	Not covered	
NOVOLOG MIX 70/30 FLEXPEN	Preferred brand	
NOVOLOG MIX 70/30 RELION	Not covered	
NOVOLOG MIX 70/30 VIAL	Preferred brand	
NOVOLOG PENFILL	Preferred brand	
NOVOLOG RELION	Not covered	
NOVOLOG U-100 VIAL	Preferred brand	
REZVOGLAR KWIKPEN	Preferred brand	
SEMGLEE (YFGN)	Not covered	
TOUJEO MAX SOLOSTAR	Preferred brand	
TOUJEO SOLOSTAR	Preferred brand	
TRESIBA	Preferred brand	
TRESIBA FLEXTOUCH	Preferred brand	
Blood Products and Modifiers		
EMPAVELI	Preferred brand	PA; SP; QL
FABHALTA	Nonpreferred brand	PA; SP; QL

Drug Name	Drug Tier	Notes
VOYDEYA	Nonpreferred brand	PA; SP; QL
Anticoagulants		
dabigatran etexilate mesylate	Generic	QL
ELIQUIS	Preferred brand	QL
ELIQUIS (1.5 MG PACK)	Preferred brand	QL
ELIQUIS (2 MG PACK)	Preferred brand	QL
ELIQUIS DVT/PE STARTER PACK	Preferred brand	QL
enoxaparin sodium	Generic	
fondaparinux sodium	Generic	
FRAGMIN	Not covered	
heparin sodium (porcine)	Generic	
heparin sodium (porcine) +rfid	Generic	
heparin sodium (porcine) pf	Generic	
jantoven	Generic	
PRADAXA ORAL PACKET	Nonpreferred brand	QL
rivaroxaban	Generic	QL
SAVAYSA	Nonpreferred brand	QL
warfarin sodium oral	Generic	
XARELTO	Preferred brand	QL
XARELTO STARTER PACK	Preferred brand	QL
ZONTIVITY	Nonpreferred brand	QL
Blood Formation Modifiers		
ALVAIZ	Not covered	SP; QL
anagrelide hcl	Generic	
AQVESME	Preferred brand	PA; SP; QL
ARANESP (ALBUMIN FREE)	Nonpreferred brand	SP
DOPTELET	Preferred brand	PA; SP; QL
DOPTELET SPRINKLE	Preferred brand	PA; SP; QL
eltrombopag olamine	Generic	PA; SP
EPOGEN	Nonpreferred brand	PA; SP; OVM
FULPHILA	Nonpreferred brand	PA; SP; OVM
FYLNETRA	Not covered	SP
GRANIX	Not covered	SP
LEUKINE	Nonpreferred brand	SP
MIRCERA	Nonpreferred brand	SP; QL
MULPLETA	Not covered	SP; QL

Drug Name	Drug Tier	Notes
NEULASTA SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	Preferred brand	SP; QL
NEUPOGEN	Not covered	SP
NIVESTYM	Preferred brand	SP; QL
NYPOZI	Not covered	SP; QL
NYVEPRIA	Nonpreferred brand	PA; SP; OVM
PROCRIT	Preferred brand	SP
PYRUKYND	Preferred brand	PA; SP; QL
PYRUKYND TAPER PACK	Preferred brand	PA; SP; QL
RELEUKO	Not covered	SP; QL
RETACRIT	Preferred brand	SP
ROLVEDON	Nonpreferred brand	PA; SP; OVM
STIMUFEND	Nonpreferred brand	PA; SP; OVM
TAVALISSE	Nonpreferred brand	PA; SP; QL
UDENYCA	Nonpreferred brand	PA; SP; OVM
VAFSEO	Nonpreferred brand	SP; QL
WAYRILZ	Nonpreferred brand	PA; SP; QL
XOLREMDI	Preferred brand	PA; SP; QL
ZARXIO	Preferred brand	SP
ZIEXTENZO	Preferred brand	SP; QL
Hemostasis Agents		
ADVATE	Preferred brand	
ADYNOVATE	Preferred brand	
AFSTYLA	Preferred brand	
ALHEMO	Nonpreferred brand	PA; QL
ALPHANATE	Preferred brand	
ALPHANINE SD	Preferred brand	
ALPROLIX	Preferred brand	
ALTUVIIIO	Preferred brand	
aminocaproic acid oral	Generic	
BENEFIX	Preferred brand	
COAGADEX	Preferred brand	
CORIFACT	Preferred brand	
ELOCTATE	Preferred brand	
ESPEROCT	Preferred brand	
FEIBA	Preferred brand	
HEMLIBRA	Preferred brand	PA; QL

Drug Name	Drug Tier	Notes
HEMOFIL M	Preferred brand	
HUMATE-P	Preferred brand	
HYMPAVZI	Nonpreferred brand	PA; QL
IDELVION	Preferred brand	
IXINITY	Preferred brand	
JIVI	Preferred brand	
KOATE	Preferred brand	
KOATE-DVI	Preferred brand	
KOVALTRY	Preferred brand	
NOVOEIGHT	Preferred brand	
NOVOSEVEN RT	Preferred brand	
NUWIQ	Preferred brand	
OBIZUR	Preferred brand	
PROFILNINE	Preferred brand	
QFITLIA	Nonpreferred brand	PA; QL
REBINYN	Preferred brand	
RECOMBINATE	Preferred brand	
RIXUBIS	Preferred brand	
SEVENFACT	Preferred brand	
tranexamic acid oral	Generic	QL
TRETTEN	Preferred brand	
VONVENDI	Preferred brand	
WILATE	Preferred brand	
XYNTHA	Preferred brand	
XYNTHA SOLOFUSE	Preferred brand	
Platelet Modifying Agents		
aspirin-dipyridamole er	Generic	
CABLIVI	Preferred brand	PA; SP; QL
cilostazol	Generic	
clopidogrel bisulfate oral	Generic	
dipyridamole oral	Generic	
prasugrel hcl	Generic	QL
ticagrelor	Generic	QL
YOSPRALA	Not covered	

Drug Name	Drug Tier	Notes
Cardiovascular Agents		
Alpha-adrenergic Agonists		
clonidine	Generic	
CLONIDINE ER	Not covered	ABA
clonidine hcl oral	Generic	
guanfacine hcl	Generic	
JAVADIN	Not covered	
methyldopa	Generic	
midodrine hcl	Generic	
NEXICLON XR	Not covered	
Alpha-adrenergic Blocking Agents		
doxazosin mesylate oral	Generic	
phenoxybenzamine hcl oral	Generic	PA; QL
prazosin hcl oral	Generic	
Angiotensin II Receptor Antagonists		
ARB LI	Not covered	QL
candesartan cilexetil	Generic	
EDARBI	Nonpreferred brand	ST; QL
irbesartan	Generic	
losartan potassium oral	Generic	
olmesartan medoxomil oral	Generic	
telmisartan	Generic	
valsartan oral solution	Not covered	
valsartan oral tablet	Generic	
Angiotensin-converting Enzyme (ACE) Inhibitors		
benazepril hcl oral	Generic	
captopril oral	Generic	
enalapril maleate oral	Generic	
fosinopril sodium	Generic	
lisinopril oral	Generic	
moexipril hcl	Generic	
perindopril erbumine	Generic	
QBRELIS	Nonpreferred brand	QL
quinapril hcl	Generic	
ramipril	Generic	
trandolapril	Generic	

Drug Name	Drug Tier	Notes
Antiarrhythmics		
amiodarone hcl oral	Generic	
disopyramide phosphate	Generic	
dofetilide	Generic	
flecainide acetate	Generic	
mexiletine hcl oral	Generic	
MULTAQ	Preferred brand	QL
NORPACE CR	Preferred brand	
propafenone hcl	Generic	
propafenone hcl er	Generic	
quinidine gluconate er	Generic	
quinidine sulfate	Generic	
sotalol hcl (af)	Generic	
sotalol hcl oral	Generic	
SOTYLIZE	Nonpreferred brand	
Beta-adrenergic Blocking Agents		
acebutolol hcl oral	Generic	
atenolol oral	Generic	
betaxolol hcl oral	Generic	
bisoprolol fumarate oral	Generic	
carvedilol	Generic	
carvedilol phosphate er	Generic	QL
HEMANGEOL	Nonpreferred brand	QL
INDERAL XL	Not covered	
INNOPRAN XL	Not covered	
KAPSPARGO SPRINKLE	Not covered	
labetalol hcl oral	Generic	
LOPRESSOR ORAL SOLUTION	Nonpreferred brand	QL
LOPRESSOR ORAL TABLET 12.5 MG	Not covered	
metoprolol succinate er	Generic	
metoprolol tartrate oral tablet 100 mg, 25 mg, 37.5 mg, 50 mg, 75 mg	Generic	
METOPROLOL TARTRATE ORAL TABLET 12.5 MG	Not covered	
nadolol oral	Generic	
nebivolol hcl	Generic	QL
pindolol	Generic	

Drug Name	Drug Tier	Notes
propranolol hcl er	Generic	
propranolol hcl oral	Generic	
timolol maleate oral	Generic	
Calcium Channel Blocking Agents		
amlodipine besylate oral	Generic	
CARDAMYST	Nonpreferred brand	PA; QL
cartia xt	Generic	
CONJUPRI	Not covered	
diltiazem hcl er	Generic	
diltiazem hcl er beads	Generic	
diltiazem hcl er coated beads	Generic	
diltiazem hcl oral	Generic	
dilt-xr	Generic	
felodipine er	Generic	
isradipine	Generic	
KATERZIA	Nonpreferred brand	QL
LEVAMLODIPINE MALEATE	Not covered	ABA
matzim la	Generic	
nicardipine hcl oral	Generic	
nifedipine er	Generic	
nifedipine er osmotic release	Generic	
nifedipine oral	Generic	
nimodipine oral capsule	Generic	
NIMODIPINE ORAL SOLUTION	Nonpreferred brand	QL
nisoldipine er	Generic	
NORLIQVA	Nonpreferred brand	QL
NYMALIZE	Not covered	QL
SDAMLO	Not covered	
tiadyt er	Generic	
verapamil hcl er	Generic	
verapamil hcl oral	Generic	
Cardiovascular Agents, Other		
aliskiren fumarate	Generic	
amiloride-hydrochlorothiazide	Generic	
amlodipine besylate-benazepril hcl	Generic	
amlodipine besylate-valsartan	Generic	
amlodipine-atorvastatin	Generic	QL

Drug Name	Drug Tier	Notes
amlodipine-olmesartan	Generic	
amlodipine-valsartan-hctz	Generic	
atenolol-chlorthalidone	Generic	
ATTRUBY	Not covered	SP; QL
benazepril-hydrochlorothiazide	Generic	
bisoprolol-hydrochlorothiazide	Generic	
CAMZYOS	Preferred brand	PA; SP; QL
candesartan cilexetil-hctz	Generic	
captopril-hydrochlorothiazide	Generic	
CORLANOR ORAL SOLUTION	Preferred brand	QL
digoxin oral	Generic	
DOBUTAMINE-DEXTROSE	Not covered	
droxidopa	Generic	SP; QL
EDARBYCLOR	Nonpreferred brand	ST; QL
enalapril-hydrochlorothiazide	Generic	
ENTRESTO ORAL CAPSULE SPRINKLE	Nonpreferred brand	QL
fosinopril sodium-hctz	Generic	
INPEFA	Not covered	QL
irbesartan-hydrochlorothiazide	Generic	
isosorb dinitrate-hydralazine	Generic	
ivabradine hcl	Generic	QL
lisinopril-hydrochlorothiazide	Generic	
LODOCO	Not covered	QL
losartan potassium-hctz	Generic	
metoprolol-hydrochlorothiazide	Generic	
metyrosine	Generic	
MYQORZO	Nonpreferred brand	PA; SP; QL
olmesartan medoxomil-hctz	Generic	
olmesartan-amlodipine-hctz	Generic	QL
pentoxifylline er	Generic	
PRESTALIA	Nonpreferred brand	QL
quinapril-hydrochlorothiazide	Generic	
ranolazine er	Generic	
sacubitril-valsartan	Generic	QL
spironolactone-hctz	Generic	
telmisartan-amlodipine	Generic	
telmisartan-hctz	Generic	

Drug Name	Drug Tier	Notes
trandolapril-verapamil hcl er	Generic	
triamterene-hctz	Generic	
TRYVIO	Not covered	QL
valsartan-hydrochlorothiazide	Generic	
VECAMYL	Nonpreferred brand	PA; QL
VERQUVO	Nonpreferred brand	PA; QL
VYNDAMAX	Preferred brand	PA; SP; QL
Diuretics, Carbonic Anhydrase Inhibitors		
acetazolamide er	Generic	
acetazolamide oral	Generic	
dichlorphenamide	Generic	PA; SP; QL
methazolamide oral	Generic	
Diuretics, Loop		
bumetanide oral	Generic	
ENBUMYST	Nonpreferred brand	PA; QL
ethacrynic acid	Generic	
FUROSCIX	Nonpreferred brand	PA; SP; QL
furosemide oral	Generic	
LASIX ONYU	Nonpreferred brand	PA; QL
SOAANZ	Not covered	
toremide	Generic	
Diuretics, Potassium-sparing		
amiloride hcl oral	Generic	
eplerenone	Generic	
spironolactone oral	Generic	
triamterene oral	Generic	
Diuretics, Thiazide		
chlorthalidone	Generic	
DIURIL	Nonpreferred brand	
HEMICLOR	Not covered	QL
hydrochlorothiazide oral	Generic	
indapamide	Generic	
INZIRQO	Not covered	QL
metolazone	Generic	
THALITONE	Not covered	
Dyslipidemics, Fibric Acid Derivatives		
fenofibrate micronized	Generic	

Drug Name	Drug Tier	Notes
fenofibrate oral	Generic	
fenofibric acid oral capsule delayed release	Generic	
fenofibric acid oral tablet	Not covered	
gemfibrozil oral	Generic	
Dyslipidemics, HMG CoA Reductase Inhibitors		
ATORVALIQ	Not covered	
atorvastatin calcium oral tablet 10 mg, 20 mg	Generic	PV2; QL; AL (Min 40 Years and Max 75 Years)
atorvastatin calcium oral tablet 40 mg, 80 mg	Generic	QL
EZALLOR SPRINKLE	Not covered	
FLOLIPID	Not covered	
fluvastatin sodium	Not covered	QL
fluvastatin sodium er	Not covered	QL
lovastatin oral	Generic	PV2; QL; AL (Min 40 Years and Max 75 Years)
pitavastatin calcium	Generic	ST; QL
pravastatin sodium	Generic	PV2; QL; AL (Min 40 Years and Max 75 Years)
rosuvastatin calcium oral tablet 10 mg, 5 mg	Generic	PV2; QL; AL (Min 40 Years and Max 75 Years)
rosuvastatin calcium oral tablet 20 mg, 40 mg	Generic	QL
simvastatin oral tablet 10 mg, 20 mg, 40 mg, 5 mg	Generic	PV2; QL; AL (Min 40 Years and Max 75 Years)
simvastatin oral tablet 80 mg	Generic	QL
ZYPITAMAG	Not covered	
Dyslipidemics, Other		
cholestyramine light	Generic	
cholestyramine oral	Generic	
colesevelam hcl	Generic	
colestipol hcl	Generic	
ezetimibe	Generic	QL
ezetimibe-simvastatin	Generic	QL
icosapent ethyl	Generic	QL
JUXTAPID	Nonpreferred brand	PA; SP; QL
NEXLETOL	Preferred brand	PA; QL
NEXLIZET	Preferred brand	PA; QL
niacin (antihyperlipidemic)	Not covered	

Drug Name	Drug Tier	Notes
niacin er (antihyperlipidemic)	Generic	
niacor	Not covered	
omega-3-acid ethyl esters	Generic	QL
PRALUENT	Not covered	QL
prevalite	Generic	
REDEMPLO	Preferred brand	PA; SP; QL
REPATHA	Preferred brand	PA; QL
REPATHA SURECLICK	Preferred brand	PA; QL
TRYNGOLZA	Not covered	SP; QL
Vasodilators, Direct-acting Arterial/Venous		
isosorbide dinitrate	Generic	
isosorbide mononitrate	Generic	
isosorbide mononitrate er	Generic	
NITRO-BID	Preferred brand	
NITRO-DUR	Not covered	
nitroglycerin rectal	Generic	QL
nitroglycerin sublingual	Generic	
nitroglycerin transdermal	Generic	
nitroglycerin translingual	Generic	
NITRO-TIME	Preferred brand	
Vasodilators, Direct-acting Arterial		
hydralazine hcl oral	Generic	
minoxidil oral	Generic	
Central Nervous System Agents		
Attention Deficit Hyperactivity Disorder Agents, Amphetamines		
amphetamine er	Generic	PA; QL
amphetamine sulfate	Generic	QL
amphetamine-dextroamphetamine	Generic	QL
amphetamine-dextroamphetamine er	Generic	QL
amphet-dextroamphet 3-bead er	Generic	QL
dextroamphetamine sulfate	Generic	QL
dextroamphetamine sulfate er	Generic	QL
DYANAVEL XR	Nonpreferred brand	PA; QL
lisdexamfetamine dimesylate	Generic	QL
methamphetamine hcl	Generic	QL
VYVANSE	Nonpreferred brand	QL

Drug Name	Drug Tier	Notes
XELSTRYM	Nonpreferred brand	PA; QL
Attention Deficit Hyperactivity Disorder Agents, Non-amphetamines		
atomoxetine hcl	Generic	QL
AZSTARYS	Nonpreferred brand	PA; QL
clonidine hcl er	Generic	QL
CONCERTA	Nonpreferred brand	QL
COTEMPLA XR-ODT	Not covered	QL
dexmethylphenidate hcl	Generic	QL
dexmethylphenidate hcl er	Generic	QL
guanfacine hcl er	Generic	QL
JORNAY PM	Nonpreferred brand	PA; QL
methylphenidate	Generic	QL
methylphenidate hcl er	Generic	QL
methylphenidate hcl er (cd)	Generic	QL
methylphenidate hcl er (la)	Generic	QL
methylphenidate hcl er (osm) oral tablet extended release 18 mg, 27 mg, 36 mg, 54 mg, 72 mg	Generic	QL
METHYLPHENIDATE HCL ER (OSM) ORAL TABLET EXTENDED RELEASE 45 MG, 63 MG	Not covered	ABA; QL
methylphenidate hcl er (xr)	Generic	QL
methylphenidate hcl oral	Generic	QL
ONYDA XR	Not covered	QL
QELBREE	Nonpreferred brand	PA; QL
QUILLICHEW ER	Nonpreferred brand	PA; QL
QUILLIVANT XR	Nonpreferred brand	PA; QL
RELEXXII ORAL TABLET EXTENDED RELEASE 18 MG, 27 MG, 36 MG, 45 MG, 54 MG, 63 MG	Not covered	QL
RELEXXII ORAL TABLET EXTENDED RELEASE 72 MG	Nonpreferred brand	QL
Central Nervous System, Other		
ADDYI	Nonpreferred brand	PA; QL
AUSTEDO	Preferred brand	PA; SP; QL
AUSTEDO XR	Nonpreferred brand	PA; SP; QL
AUSTEDO XR PATIENT TITRATION	Nonpreferred brand	PA; SP; QL
benzphetamine hcl	Generic	

Drug Name	Drug Tier	Notes
caffeine citrate oral	Generic	
CONTRAIVE	Nonpreferred brand	PA; QL
DAYBUE	Preferred brand	PA; SP; QL
DAYBUE STIX	Preferred brand	PA; SP; QL
diethylpropion hcl er	Generic	
diethylpropion hcl oral	Generic	
gabapentin (once-daily)	Generic	PA; QL
HORIZANT	Nonpreferred brand	PA; QL
INGREZZA	Nonpreferred brand	PA; SP; QL
LOMAIRA	Nonpreferred brand	
NUDEXTA	Preferred brand	PA; QL
phendimetrazine tartrate	Generic	
phendimetrazine tartrate er	Generic	
phentermine hcl oral	Generic	
phentermine-topiramate er	Generic	PA; QL
RADICAVA ORS	Nonpreferred brand	PA; SP; QL
RADICAVA ORS STARTER KIT	Nonpreferred brand	PA; SP; QL
riluzole	Generic	
SKYCLARYS	Preferred brand	PA; SP; QL
TEGLUTIK	Nonpreferred brand	PA; SP; QL
tetrabenazine	Generic	SP; QL
TIGLUTIK	Nonpreferred brand	PA; SP; QL
VYLEESI	Nonpreferred brand	PA; QL
Fibromyalgia Agents		
pregabalin er	Generic	QL
pregabalin oral	Generic	QL
SAVELLA	Nonpreferred brand	PA; QL
SAVELLA TITRATION PACK	Nonpreferred brand	PA; QL
TONMYA	Not covered	
Multiple Sclerosis Agents		
AVONEX PEN	Preferred brand	SP; QL
AVONEX PREFILLED	Preferred brand	SP; QL
BAFIERTAM	Preferred brand	SP; QL
BETASERON	Preferred brand	SP; QL
cladribine (10 tabs)	Generic	ST; SP; QL
cladribine (4 tabs)	Generic	ST; SP; QL
cladribine (5 tabs)	Generic	ST; SP; QL

Drug Name	Drug Tier	Notes
cladribine (6 tabs)	Generic	ST; SP; QL
cladribine (7 tabs)	Generic	ST; SP; QL
cladribine (8 tabs)	Generic	ST; SP; QL
cladribine (9 tabs)	Generic	ST; SP; QL
dalfampridine er	Generic	SP; QL
dimethyl fumarate oral	Generic	SP; QL
dimethyl fumarate starter pack	Generic	SP; QL
fingolimod hcl	Generic	SP; QL
GILENYA ORAL CAPSULE 0.25 MG	Nonpreferred brand	SP; QL
glatiramer acetate	Generic	SP; QL
glatopa	Generic	SP; QL
KESIMPTA	Preferred brand	SP; QL
MAVENCLAD	Nonpreferred brand	ST; SP; QL
MAYZENT	Nonpreferred brand	SP; QL
MAYZENT STARTER PACK	Nonpreferred brand	SP; QL
PLEGRIDY	Not covered	SP; QL
PLEGRIDY STARTER PACK	Not covered	SP; QL
PONVORY	Nonpreferred brand	SP; QL
PONVORY STARTER PACK	Nonpreferred brand	SP; QL
REBIF	Nonpreferred brand	ST; SP; QL
REBIF REBIDOSE	Nonpreferred brand	ST; SP; QL
REBIF REBIDOSE TITRATION PACK	Nonpreferred brand	ST; SP; QL
REBIF TITRATION PACK	Nonpreferred brand	ST; SP; QL
TASCENSO ODT	Nonpreferred brand	PA; SP; QL
teriflunomide	Generic	SP; QL
VUMERITY	Preferred brand	SP; QL
ZEPOSIA	Nonpreferred brand	PA; SP; QL
ZEPOSIA 7-DAY STARTER PACK	Nonpreferred brand	PA; SP; QL
ZEPOSIA STARTER KIT	Nonpreferred brand	PA; SP; QL
Cholestatic Pruritus Agent		
Ileal Bile Acid Transporter Inhibitor		
BYLVAY	Preferred brand	PA; SP; QL
BYLVAY (PELLETS)	Preferred brand	PA; SP; QL
LIVMARLI	Preferred brand	PA; SP; QL
Dental and Oral Agents		
cevimeline hcl	Generic	

Drug Name	Drug Tier	Notes
chlorhexidine gluconate mouth/throat	Generic	
CLINPRO 5000	Nonpreferred brand	
DENTA 5000 PLUS	Nonpreferred brand	
DENTA 5000 PLUS SENSITIVE	Nonpreferred brand	
DENTAGEL	Nonpreferred brand	
FLUORIDEX	Nonpreferred brand	
FLUORIDEX ENHANCED WHITENING	Nonpreferred brand	
FLUORIMAX 5000	Nonpreferred brand	
FLUORIMAX 5000 SENSITIVE	Nonpreferred brand	
JUST RIGHT 5000	Nonpreferred brand	
periogard	Generic	
pilocarpine hcl oral	Generic	
PREVIDENT	Nonpreferred brand	
PREVIDENT 5000 BOOSTER PLUS	Nonpreferred brand	
PREVIDENT 5000 DRY MOUTH	Nonpreferred brand	
PREVIDENT 5000 ENAMEL PROTECT	Nonpreferred brand	
PREVIDENT 5000 KIDS	Nonpreferred brand	
PREVIDENT 5000 ORTHO DEFENSE	Nonpreferred brand	
PREVIDENT 5000 PLUS	Nonpreferred brand	
PREVIDENT 5000 SENSITIVE	Nonpreferred brand	
sf gel 1.1%	Generic	
sf 5000 plus	Generic	
sod fluoride-potassium nitrate	Generic	
sodium fluoride 5000 enamel	Generic	
sodium fluoride 5000 plus	Generic	
sodium fluoride 5000 ppm	Generic	
sodium fluoride 5000 sensitive	Generic	
sodium fluoride dental	Generic	
sodium fluoride mouth/throat	Generic	
triamcinolone acetonide mouth/throat	Generic	
Dermatological Agents		
ABSORICA LD	Not covered	QL
accutane	Generic	QL
acitretin	Generic	
adapalene external cream	Generic	
adapalene external gel	Generic	

Drug Name	Drug Tier	Notes
ADAPALENE EXTERNAL PAD	Not covered	
ADAPALENE EXTERNAL SOLUTION	Not covered	
adapalene-benzoyl peroxide external gel 0.1-2.5 %	Generic	
adapalene-benzoyl peroxide external gel 0.3-2.5 %	Generic	PA; QL
ADBRY	Preferred brand	PA; SP; QL
AKLIEF	Not covered	QL
ALTRENO	Nonpreferred brand	QL
ammonium lactate external	Generic	
amneesteem	Generic	QL
AMZEEQ	Nonpreferred brand	QL
ANZUPGO	Nonpreferred brand	PA; QL
ARAZLO	Not covered	QL
azelaic acid external	Generic	
AZELEX	Nonpreferred brand	
benzoyl peroxide-erythromycin	Generic	
BIMZELX	Not covered	SP; QL
CABTREO	Not covered	QL
calcipotriene external cream	Generic	
CALCIPOTRIENE EXTERNAL FOAM	Nonpreferred brand	ABA
calcipotriene external ointment	Generic	
calcipotriene external solution	Generic	
calcipotriene-betameth diprop	Generic	
calcitriol external	Generic	
CIBINQO	Preferred brand	PA; SP; QL
claravis	Generic	QL
clindacin	Not covered	
clindacin etz external swab	Generic	
clindacin-p	Generic	
clindamycin phos (once-daily)	Generic	
clindamycin phos (twice-daily)	Generic	
clindamycin phos-benzoyl perox external gel 1.2-3.75 %	Not covered	QL
clindamycin phos-benzoyl perox external gel 1-5 %, 1.2-2.5 %, 1.2-5 %	Generic	
clindamycin phosphate external foam	Not covered	
clindamycin phosphate external lotion	Generic	

Drug Name	Drug Tier	Notes
clindamycin phosphate external solution	Generic	
clindamycin phosphate external swab	Generic	
clindamycin-tretinoin	Not covered	
COSENTYX (300 MG DOSE)	Nonpreferred brand	PA; SP; QL
COSENTYX 150 MG/ML SUBCUTANEOUS	Nonpreferred brand	PA; SP; QL
COSENTYX SENSOREADY (300 MG)	Nonpreferred brand	PA; SP; QL
COSENTYX SENSOREADY PEN	Nonpreferred brand	PA; SP; QL
COSENTYX UNOREADY	Nonpreferred brand	PA; SP; QL
dapsone external gel 5 %	Generic	QL
dapsone external gel 7.5 %	Not covered	
doxepin hcl external	Generic	PA; QL
doxycycline	Generic	ST
DRYSOL	Preferred brand	
DUOBRII	Nonpreferred brand	QL
DUPIXENT	Preferred brand	PA; SP; QL
EBGLYSS	Preferred brand	PA; SP; QL
EMROSI	Not covered	QL
ENSTILAR	Nonpreferred brand	PA; QL
EPIFOAM	Preferred brand	
EPSOLAY	Not covered	QL
ERY PAD 2%	Nonpreferred brand	
erythromycin external	Generic	
EUCRISA	Preferred brand	ST; QL
FILSUVEZ	Preferred brand	PA; SP; QL
FINACEA EXTERNAL FOAM	Nonpreferred brand	ST; QL
hydrocortisone ace-pramoxine external cream 2.5-1 %	Generic	
HYFTOR	Preferred brand	SP; QL
imiquimod external cream 3.75 %	Generic	PA; QL
imiquimod external cream 5 %	Generic	QL
imiquimod pump	Generic	PA; QL
isotretinoin oral capsule 10 mg, 20 mg, 30 mg, 40 mg	Generic	QL
isotretinoin oral capsule 25 mg, 35 mg	Not covered	QL
ivermectin external cream	Generic	ST; QL
LEQSELVI	Not covered	SP; QL
LITFULO	Nonpreferred brand	PA; SP; QL

Drug Name	Drug Tier	Notes
methoxsalen rapid	Generic	
metronidazole external	Generic	
NEMLUVIO	Nonpreferred brand	PA; SP; QL
neuac	Generic	
NORITATE	Nonpreferred brand	
OPZELURA	Preferred brand	ST; QL
pimecrolimus	Generic	
podofilox external	Generic	
PRAMOSONE	Nonpreferred brand	
QBREXZA	Nonpreferred brand	PA; QL
RETIN-A MICRO PUMP EXTERNAL GEL 0.06 %	Not covered	
SANTYL	Preferred brand	
selenium sulfide external lotion	Generic	
SILIQ	Not covered	SP; QL
SKYRIZI INTRAVENOUS	Preferred brand	PA; SP; QL
SKYRIZI SUBCUTANEOUS SOLUTION CARTRIDGE	Preferred brand	PA; SP; QL
sodium sulfacetamide wash	Generic	
SOFDRA	Not covered	QL
SORILUX	Nonpreferred brand	
SOTYKTU	Nonpreferred brand	PA; SP; QL
SPEVIGO SUBCUTANEOUS	Nonpreferred brand	PA; SP; QL
sss 10-5	Generic	
sulfacetamide sodium (acne)	Generic	
sulfacetamide sodium external	Generic	
sulfacetamide sodium-sulfur external cream 10-5 %	Generic	
sulfacetamide sodium-sulfur external liquid 10-5 %, 9-4.5 %	Generic	
sulfacetamide sodium-sulfur external suspension 8-4 %	Generic	
sulfacetamide sod-sulfur wash external liquid 9-4.5 %	Generic	
tacrolimus external	Generic	
TALTZ	Nonpreferred brand	PA; SP; QL
tazarotene external cream	Generic	
TAZAROTENE EXTERNAL FOAM	Nonpreferred brand	ST; ABA; QL

Drug Name	Drug Tier	Notes
tazarotene external gel	Generic	
tretinoin external	Generic	
tretinoin microsphere	Not covered	
tretinoin microsphere pump	Not covered	
TWYNEO	Not covered	QL
VEREGEN	Nonpreferred brand	
VTAMA	Preferred brand	ST; QL
WINLEVI	Nonpreferred brand	PA; QL
WYNZORA	Not covered	QL
ZELSUVMI	Nonpreferred brand	PA; QL
zenatane	Generic	QL
ZILXI	Not covered	QL
ZORYVE EXTERNAL CREAM 0.05 %	Not covered	QL
ZORYVE EXTERNAL CREAM 0.15 %, 0.3 %	Preferred brand	ST; QL
ZORYVE EXTERNAL FOAM	Preferred brand	ST; QL
Electrolytes/Minerals/Metals/Vitamins		
Electrolyte/Mineral Replacement		
ACCRUFER	Nonpreferred brand	PA; QL
AQUASTAT	Nonpreferred brand	
AQUASTAT SFR	Nonpreferred brand	
BD POSIFLUSH	Nonpreferred brand	
BD POSIFLUSH SAFESCRUB	Nonpreferred brand	
carglumic acid	Generic	PA; SP
EFFER-K ORAL TABLET EFFERVESCENT 10 MEQ, 20 MEQ	Preferred brand	
effer-k oral tablet effervescent 25 meq	Generic	
GALZIN	Nonpreferred brand	PA; QL
iodine strong	Generic	
klor-con	Generic	
klor-con 10	Generic	
klor-con m10	Generic	
klor-con m15	Generic	
klor-con m20	Generic	
K-PHOS	Nonpreferred brand	
K-PHOS NO 2	Nonpreferred brand	
levocarnitine oral solution	Generic	
levocarnitine oral tablet	Generic	

Drug Name	Drug Tier	Notes
levocarnitine sf	Generic	
MONOJECT FLUSH SYRINGE	Nonpreferred brand	
MONOJECT SODIUM CHLORIDE FLUSH	Nonpreferred brand	
normal saline flush	Generic	
PHOSPHO-TRIN K500	Nonpreferred brand	
POKONZA	Not covered	
potassium chloride crys er	Generic	
potassium chloride er	Generic	
potassium chloride oral packet 20 meq	Generic	
potassium chloride oral packet 40 meq	Not covered	
potassium chloride oral solution	Generic	
potassium citrate er	Generic	
saline flush	Generic	
sodium chloride flush solution 0.9 % intravenous	Generic	
SODIUM CHLORIDE FLUSH SOLUTION 0.9 % INTRAVENOUS	Nonpreferred brand	
sodium fluoride oral	Generic	PV2; AL (Min 6 Months and Max 16 Years)
ZYCUBO	Preferred brand	PA; SP; QL
Electrolyte/Mineral/Metal Modifiers		
CHEMET	Preferred brand	
CUVRIOR	Not covered	SP; QL
deferasirox	Generic	15DS; SP
deferasirox granules	Generic	15DS; SP
deferiprone	Generic	PA; SP; QL
FERRIPROX ORAL SOLUTION	Nonpreferred brand	PA; SP; QL
FERRIPROX TWICE-A-DAY	Nonpreferred brand	PA; SP; QL
KIONEX	Nonpreferred brand	
LOKELMA	Preferred brand	QL
sodium polystyrene sulfonate	Generic	
SPS (SODIUM POLYSTYRENE SULF)	Nonpreferred brand	
tolvaptan	Generic	SP; QL
trientine hcl	Generic	PA; SP; QL
VELTASSA	Preferred brand	QL
Phosphate Binders		
AURYXIA	Nonpreferred brand	
calcium acetate (phos binder)	Generic	

Drug Name	Drug Tier	Notes
calcium acetate oral tablet 667 mg	Generic	
ferric citrate tablet 1 gm 210 mg(fe) oral	Generic	
FERRIC CITRATE TABLET 1 GM 210 MG(FE) ORAL	Not covered	ABA
FOSRENOL ORAL PACKET	Nonpreferred brand	
lanthanum carbonate	Generic	
sevelamer carbonate	Generic	
sevelamer hcl	Generic	
VELPHORO	Nonpreferred brand	
Vitamins		
AZESCO	Not covered	
cyanocobalamin injection solution 1000 mcg/ml	Generic	
cyanocobalamin nasal	Not covered	
DERMACINRX PRETRATE	Not covered	
ELITE-OB	Not covered	
EMBRIVA	Not covered	
ENBRACE HR	Not covered	
ergocalciferol oral capsule	Generic	
folate	Preventive	PV1
FOLATEXCEL	Not covered	
folic acid oral tablet 1 mg	Generic	
folic acid oral tablet 400 mcg, 800 mcg	Preventive	PV1
ft folic acid	Preventive	PV1
GESTYRA	Not covered	
hydroxocobalamin acetate	Generic	
JENLIVA PRENATAL/POSTNATAL	Not covered	
MATERNACEL	Not covered	
MATERVIA	Not covered	
MATRONEX	Not covered	
M-NATAL PLUS	Preferred brand	
NATAL PNV	Not covered	
NEOMATERNA	Not covered	
NEONATAL COMPLETE	Not covered	
NEONATAL PLUS	Preferred brand	
NEO-VITAL RX	Not covered	
NESTABS	Not covered	
NESTABS ONE	Not covered	

Drug Name	Drug Tier	Notes
ONE VITE WOMENS PLUS	Preferred brand	
ONENATAL RX	Not covered	
phytonadione injection solution 10 mg/ml	Generic	
phytonadione oral	Generic	
pnv 27-ca/fe/fa	Generic	
pnv prenatal plus multivit+dha	Generic	
PNV TABS 20-1	Not covered	
PREGEN DHA	Not covered	
PREGENNA	Not covered	
PREMESISRX	Not covered	
prenatal oral tablet 27-1 mg	Generic	
prenatal plus vitamin/mineral	Generic	
PRENATE	Not covered	
PRENATE DHA	Not covered	
PRENATE ELITE	Not covered	
PRENATE ENHANCE	Not covered	
PRENATE ESSENTIAL	Not covered	
PRENATE MINI	Not covered	
PRENATE PIXIE	Not covered	
PRENATE RESTORE	Not covered	
PRENATOL-M	Not covered	
PRENATRIX	Not covered	
PRENATRYL	Not covered	
RELEVIA	Not covered	
RELNATE DHA	Not covered	
SELECT-OB ORAL TABLET CHEWABLE 29-1 MG	Not covered	
TRINATE	Preferred brand	
TRISTART DHA	Not covered	
VITAFOL FE+	Not covered	
VITAFOL-OB+DHA	Not covered	
VITALARA	Not covered	
vitamin d (ergocalciferol) oral capsule 1.25 mg (50000 ut)	Generic	
vitamin k1 injection	Generic	
VITATHELY WITH GINGER	Not covered	
WESCAP-PN DHA	Not covered	

Drug Name	Drug Tier	Notes
WESNATAL DHA COMPLETE	Preferred brand	
WESNATE DHA	Not covered	
WESTAB PLUS	Preferred brand	
WESTGEL DHA	Not covered	
yl folic acid	Preventive	PV1
ZALVIT	Not covered	
ZIPHEX	Not covered	
Gastrointestinal Agents		
Antispasmodics, Gastrointestinal		
belladonna alkaloids-opium	Generic	
dicyclomine hcl oral capsule	Generic	
dicyclomine hcl oral solution 10 mg/5ml	Generic	
dicyclomine hcl oral tablet 20 mg	Generic	
dicyclomine hcl oral tablet 40 mg	Not covered	
GLYCATE	Not covered	
glycopyrrolate oral solution	Generic	
glycopyrrolate oral tablet 1 mg, 2 mg	Generic	
GLYCOPYRROLATE ORAL TABLET 1.5 MG	Not covered	
hyoscyamine sulfate er	Generic	
hyoscyamine sulfate oral	Generic	
hyoscyamine sulfate sl	Generic	
hyoscyamine sulfate sublingual	Generic	
hyosyne	Generic	
LEVBID	Nonpreferred brand	
LEVSIN	Nonpreferred brand	
LEVSIN/SL	Nonpreferred brand	
methscopolamine bromide oral	Generic	
NULEV	Nonpreferred brand	
OSCIMIN	Nonpreferred brand	
Gastrointestinal Agents, Other		
amoxicill-clarithro-lansopraz	Generic	
bis subcit-metronid-tetracyc	Not covered	
bismuth/metronidaz/tetracyclin	Not covered	
chlordiazepoxide-clidinium	Generic	
cromolyn sodium oral	Generic	
CTEXLI	Preferred brand	PA; SP

Drug Name	Drug Tier	Notes
diphenoxylate-atropine	Generic	
GATTEX	Nonpreferred brand	PA; SP; QL
IQIRVO	Nonpreferred brand	PA; SP; QL
LIVDELZI	Nonpreferred brand	PA; SP; QL
loperamide hcl oral capsule	Generic	
MOTOFEN	Nonpreferred brand	
MOVANTIK	Not covered	QL
MYTESI	Nonpreferred brand	PA; QL
prucalopride succinate	Generic	ST; QL
RELISTOR	Not covered	QL
RELTONE	Not covered	
REZDIFFRA	Preferred brand	PA; 15DS; SP; QL
SEROSTIM	Nonpreferred brand	PA; SP
SYMPROIC	Preferred brand	QL
TALICIA	Nonpreferred brand	QL
TRULANCE	Not covered	QL
URSODIOL ORAL CAPSULE 200 MG, 400 MG	Not covered	
ursodiol oral capsule 300 mg	Generic	
ursodiol oral tablet	Generic	
VOQUEZNA	Nonpreferred brand	PA; QL
VOQUEZNA DUAL PAK	Not covered	QL
VOQUEZNA TRIPLE PAK	Not covered	QL
VOWST	Nonpreferred brand	PA; SP; QL
XERMELO	Preferred brand	PA; SP; OVM
Histamine2 (H2) Receptor Antagonists		
cimetidine hcl	Generic	
cimetidine oral	Generic	
famotidine oral suspension reconstituted	Generic	
famotidine oral tablet 20 mg, 40 mg	Generic	
nizatidine	Generic	
RANITIDINE HCL	Not covered	
Irritable Bowel Syndrome Agents		
alosetron hcl oral tablet 0.5 mg	Generic	QL
alosetron hcl oral tablet 1 mg	Not covered	QL
IBSRELA	Nonpreferred brand	ST; QL
LINZESS	Preferred brand	QL
lubiprostone	Generic	QL

Drug Name	Drug Tier	Notes
VIBERZI	Preferred brand	PA; QL
Laxatives		
bisacodyl ec	Preventive	PV1; QL; AL (Min 45 Years and Max 75 Years)
citroma	Preventive	PV1; QL; AL (Min 45 Years and Max 75 Years)
clearlax	Preventive	PV1; QL; AL (Min 45 Years and Max 75 Years)
CLENPIQ	Nonpreferred brand	QL
constulose	Generic	
enulose	Generic	
ft clearlax	Preventive	PV1; QL; AL (Min 45 Years and Max 75 Years)
ft laxative	Preventive	PV1; QL; AL (Min 45 Years and Max 75 Years)
ft magnesium citrate	Preventive	PV1; QL; AL (Min 45 Years and Max 75 Years)
ft milk of magnesia	Preventive	PV1; QL; AL (Min 45 Years and Max 75 Years)
gavilax oral powder	Preventive	PV1; QL; AL (Min 45 Years and Max 75 Years)
gavilyte-c	Generic	PV2; QL; AL (Min 45 Years and Max 75 Years)
gavilyte-g	Generic	PV2; QL; AL (Min 45 Years and Max 75 Years)
gavilyte-n with flavor pack	Generic	PV2; QL; AL (Min 45 Years and Max 75 Years)
generlac	Generic	
gentle laxative oral	Preventive	PV1; QL; AL (Min 45 Years and Max 75 Years)
glycolax	Preventive	PV1; QL; AL (Min 45 Years and Max 75 Years)
goodsense milk of magnesia	Preventive	PV1; QL; AL (Min 45 Years and Max 75 Years)
healthylax	Preventive	PV1; QL; AL (Min 45 Years and Max 75 Years)
KRISTALOSE	Not covered	
lactulose encephalopathy	Generic	
lactulose oral packet	Not covered	
lactulose oral solution	Generic	

Drug Name	Drug Tier	Notes
laxative osmotic	Preventive	PV1; QL; AL (Min 45 Years and Max 75 Years)
magnesium citrate oral solution	Preventive	PV1; QL; AL (Min 45 Years and Max 75 Years)
milk of magnesia concentrate	Preventive	PV1; QL; AL (Min 45 Years and Max 75 Years)
milk of magnesia oral suspension 1200 mg/15ml, 2400 mg/30ml, 400 mg/5ml	Preventive	PV1; QL; AL (Min 45 Years and Max 75 Years)
mm clearlax	Preventive	PV1; QL; AL (Min 45 Years and Max 75 Years)
na sulfate-k sulfate-mg sulf	Generic	QL
peg 3350	Preventive	PV1; QL; AL (Min 45 Years and Max 75 Years)
peg 3350-kcl-na bicarb-nacl	Generic	PV2; QL; AL (Min 45 Years and Max 75 Years)
peg-3350/electrolytes	Generic	PV2; QL; AL (Min 45 Years and Max 75 Years)
peg-3350/electrolytes/ascorbat	Generic	PV2; QL; AL (Min 45 Years and Max 75 Years)
peg-kcl-nacl-nasulf-na asc-c	Generic	PV2; QL; AL (Min 45 Years and Max 75 Years)
PLENVU	Nonpreferred brand	QL
polyethylene glycol 3350 oral	Preventive	PV1; QL; AL (Min 45 Years and Max 75 Years)
smooth lax oral powder	Preventive	PV1; QL; AL (Min 45 Years and Max 75 Years)
SUFLAVE	Nonpreferred brand	QL
SUTAB	Nonpreferred brand	QL
Protectants		
misoprostol oral	Generic	
sucralfate oral	Generic	
Proton Pump Inhibitors		
acid reducer oral tablet delayed release	Generic	
dexlansoprazole	Generic	ST
esomeprazole magnesium	Generic	
ft omeprazole	Generic	
KONVOMEPE	Not covered	
lansoprazole oral	Generic	
omeprazole magnesium oral tablet delayed release	Generic	

Drug Name	Drug Tier	Notes
omeprazole oral	Generic	
omeprazole-sodium bicarbonate oral capsule	Generic	QL
omeprazole-sodium bicarbonate oral packet	Not covered	QL
pantoprazole sodium oral	Generic	
PRILOSEC	Nonpreferred brand	
RABEPRAZOLE SODIUM ORAL CAPSULE SPRINKLE	Not covered	ABA; QL
rabeprazole sodium oral tablet delayed release	Generic	
Genetic or Enzyme Disorder: Replacement, Modifiers, Treatment		
betaine	Generic	SP
CERDELGA	Preferred brand	PA; SP; QL
CHOLBAM	Preferred brand	PA; SP; QL
CREON	Preferred brand	
CYSTAGON	Preferred brand	SP
DUVYZAT	Nonpreferred brand	PA; SP; QL
EVRYSDI	Preferred brand	PA; SP; QL
GALAFOLD	Preferred brand	PA; SP; QL
GLASSIA	Preferred brand	PA; SP; QL
glycerol phenylbutyrate	Generic	PA; SP; QL
HARLIKU	Not covered	SP; QL
IMCIVREE	Preferred brand	PA; SP; QL
miglustat	Generic	PA; SP; QL
MYALEPT	Nonpreferred brand	PA; SP; QL
nitisinone	Generic	PA; SP
NITYR	Not covered	SP
OLPRUVA (2 GM DOSE)	Nonpreferred brand	PA; SP; QL
OLPRUVA (3 GM DOSE)	Nonpreferred brand	PA; SP; QL
OLPRUVA (4 GM DOSE)	Nonpreferred brand	PA; SP; QL
OLPRUVA (5 GM DOSE)	Nonpreferred brand	PA; SP; QL
OLPRUVA (6 GM DOSE)	Nonpreferred brand	PA; SP; QL
OLPRUVA (6.67 GM DOSE)	Nonpreferred brand	PA; SP; QL
OPFOLDA	Nonpreferred brand	SP; QL
ORFADIN ORAL SUSPENSION	Preferred brand	PA; SP
PALYNZIQ	Preferred brand	PA; SP; QL
PANCREAZE	Nonpreferred brand	ST
PERTZYE	Nonpreferred brand	ST

Drug Name	Drug Tier	Notes
PHEBURANE	Nonpreferred brand	PA; SP; QL
PROCYSBI ORAL CAPSULE DELAYED RELEASE 25 MG	Nonpreferred brand	PA; SP; QL
PROCYSBI ORAL CAPSULE DELAYED RELEASE 75 MG	Nonpreferred brand	PA; SP
PROCYSBI ORAL PACKET	Nonpreferred brand	PA; SP; QL
REVCOVI	Preferred brand	PA; SP; QL
sapropterin dihydrochloride	Generic	PA; SP
SEPHIENCE	Nonpreferred brand	PA; SP
sodium phenylbutyrate oral powder	Generic	
sodium phenylbutyrate oral tablet	Generic	QL
STRENSIQ	Preferred brand	PA; SP; QL
SUCRAID	Nonpreferred brand	PA; SP; QL
VIOKACE	Nonpreferred brand	ST
VOXZOGO	Preferred brand	PA; SP; QL
WAINUA	Nonpreferred brand	PA; SP; QL
XURIDEN	Preferred brand	PA; SP; QL
yargesa	Generic	PA; SP; QL
zelvysia	Generic	PA; SP
ZENPEP	Preferred brand	
Genitourinary Agents		
Antispasmodics, Urinary		
darifenacin hydrobromide er	Generic	QL
fesoterodine fumarate er	Generic	QL
flavoxate hcl	Generic	
GEMTESA	Nonpreferred brand	ST; QL
mirabegron er	Generic	PA; QL
MYRBETRIQ ORAL SUSPENSION RECONSTITUTED ER	Nonpreferred brand	PA; QL
oxybutynin chloride er	Generic	
oxybutynin chloride oral	Generic	
OXYTROL	Not covered	QL
solifenacin succinate	Generic	QL
tolterodine tartrate	Generic	
tolterodine tartrate er	Generic	
tropium chloride	Generic	QL
tropium chloride er	Generic	QL

Drug Name	Drug Tier	Notes
Benign Prostatic Hypertrophy Agents		
alfuzosin hcl er	Generic	
CARDURA XL	Nonpreferred brand	
dutasteride oral	Generic	
dutasteride-tamsulosin hcl	Generic	QL
ENTADFI	Not covered	QL
finasteride oral tablet 5 mg	Generic	
silodosin	Generic	QL
tamsulosin hcl	Generic	
terazosin hcl	Generic	
TEZRULY	Not covered	
Genitourinary Agents, Other		
acetic acid irrigation	Generic	
ARGYLE STERILE SALINE	Nonpreferred brand	
avanafil	Generic	PA; QL
bethanechol chloride oral	Generic	
CAVERJECT	Nonpreferred brand	PA; QL
CAVERJECT IMPULSE	Nonpreferred brand	PA; QL
CURITY STERILE SALINE	Nonpreferred brand	
EDEX (2 CARTRIDGE)	Nonpreferred brand	PA; QL
EDEX (6 CARTRIDGE)	Nonpreferred brand	PA; QL
ELMIRON	Nonpreferred brand	
FILSPARI	Preferred brand	PA; 15DS; SP; QL
LITHOSTAT	Nonpreferred brand	
OPTIONS GYNOL II CONTRACEPTIVE	Preventive	PV1; QL
penicillamine oral	Generic	QL
RENACIDIN	Preferred brand	
RIVFLOZA	Nonpreferred brand	PA; SP; QL
sildenafil citrate oral tablet 100 mg, 25 mg, 50 mg	Generic	PA; QL
sodium chloride irrigation	Generic	
tadalafil oral	Generic	PA; QL
tiopronin	Generic	PA
TODAY SPONGE	Preventive	PV1; QL
VANRAFIA	Nonpreferred brand	PA; SP; QL
varденаfil hcl oral	Generic	PA; QL
VCF VAGINAL CONTRACEPTIVE	Preventive	PV1; QL

Drug Name	Drug Tier	Notes
VOYXACT	Nonpreferred brand	PA; SP; QL
Hormonal Agents, Stimulant/Replacement/Modifying (Adrenal)		
AGAMREE	Nonpreferred brand	PA; SP; QL
ALA SCALP	Nonpreferred brand	
ala-cort	Generic	
alclometasone dipropionate	Generic	
ALKINDI SPRINKLE	Not covered	SP; QL
amcinonide	Generic	
betamethasone dipropionate aug	Generic	
betamethasone dipropionate external	Generic	
betamethasone valerate external	Generic	
BRYHALI	Nonpreferred brand	QL
clobetasol prop emollient base	Generic	
clobetasol propionate e	Generic	
clobetasol propionate emulsion	Generic	
CLOBETASOL PROPIONATE EXTERNAL CREAM 0.025 %	Not covered	ABA
clobetasol propionate external cream 0.05 %	Generic	
clobetasol propionate external foam	Generic	
clobetasol propionate external gel	Generic	
clobetasol propionate external liquid	Generic	
clobetasol propionate external lotion	Generic	
clobetasol propionate external ointment	Generic	
clobetasol propionate external shampoo	Generic	
clobetasol propionate external solution	Generic	
clocortolone pivalate	Generic	
clodan	Generic	
CORDRAN	Nonpreferred brand	
CORTISONE ACETATE ORAL	Not covered	
deflazacort	Generic	PA; SP
desonide external	Generic	
desoximetasone external	Generic	
dexamethasone intensol	Generic	
dexamethasone oral	Generic	
diflorasone diacetate	Generic	

Drug Name	Drug Tier	Notes
fludrocortisone acetate oral	Generic	
fluocinolone acetonide body	Generic	
fluocinolone acetonide external	Generic	
fluocinolone acetonide scalp	Generic	
fluocinonide emulsified base	Generic	
fluocinonide external cream 0.05 %	Generic	
fluocinonide external cream 0.1 %	Generic	QL
fluocinonide external gel	Generic	
fluocinonide external ointment	Generic	
fluocinonide external solution	Generic	
flurandrenolide	Generic	
fluticasone propionate external	Generic	
halcinonide	Generic	
halobetasol propionate external cream	Generic	
halobetasol propionate external foam	Not covered	
halobetasol propionate external ointment	Generic	
HEMADY	Not covered	
HIDEX 6-DAY	Not covered	
HYDROCORTISONE ACETATE EXTERNAL CREAM 2.5 %	Not covered	
hydrocortisone butyrate	Generic	
hydrocortisone external cream 1 %, 2.5 %	Generic	
hydrocortisone external lotion 2 %	Not covered	
hydrocortisone external lotion 2.5 %	Generic	
hydrocortisone external ointment 1 %, 2.5 %	Generic	
HYDROCORTISONE EXTERNAL SOLUTION	Not covered	
hydrocortisone oral	Generic	
hydrocortisone sod suc (pf)	Generic	
hydrocortisone valerate	Generic	
HYDROXYM EXTERNAL CREAM	Not covered	
IMPOYZ	Not covered	
jaythari	Generic	PA; SP
KHINDIVI	Not covered	SP; QL
kymbee	Generic	PA; SP
MEDROL ORAL TABLET 2 MG	Nonpreferred brand	
methylprednisolone oral	Generic	
MICORT HC	Not covered	

Drug Name	Drug Tier	Notes
mometasone furoate external	Generic	
prednisolone oral	Generic	
prednisolone sodium phosphate oral	Generic	
prednisone intensol	Generic	
prednisone oral solution	Generic	
prednisone oral tablet	Generic	
PREDNISONE ORAL TABLET DELAYED RELEASE	Nonpreferred brand	PA; QL
prednisone oral tablet therapy pack	Generic	
pyquvi	Generic	PA; SP
SERNIVO	Not covered	QL
TAPERDEX 12-DAY	Not covered	
TAPERDEX 6-DAY	Not covered	
TAPERDEX 7-DAY	Not covered	
TEXACORT	Nonpreferred brand	
tovet	Generic	
triamcinolone acetonide external aerosol solution	Generic	QL
triamcinolone acetonide external cream	Generic	
triamcinolone acetonide external lotion	Generic	
triamcinolone acetonide external ointment	Generic	
triamcinolone in absorbbase	Generic	
triderm	Generic	
ULTRAVATE	Not covered	
Hormonal Agents, Stimulant/Replacement/Modifying (Pituitary)		
ACTHAR	Nonpreferred brand	PA; SP; QL
ACTHAR GEL	Not covered	SP; QL
cabergoline	Generic	
CHORIONIC GONADOTROPIN INTRAMUSCULAR	Nonpreferred brand	PA; SP
CORTROPHIN	Not covered	SP; QL
CORTROPHIN GEL	Not covered	SP
CRENESSITY	Preferred brand	PA; SP; QL
desmopressin ace spray refrig	Generic	
desmopressin acetate injection	Generic	
desmopressin acetate oral	Generic	

Drug Name	Drug Tier	Notes
desmopressin acetate pf	Generic	
desmopressin acetate spray	Generic	
EGRIFTA SV	Nonpreferred brand	PA; SP; QL
EGRIFTA WR	Nonpreferred brand	PA; SP; QL
FOLLISTIM AQ	Nonpreferred brand	PA; SP
GENOTROPIN	Preferred brand	PA; SP
GENOTROPIN MINIQUICK	Preferred brand	PA; SP
GONAL-F	Preferred brand	SP
GONAL-F RFF REDIJECT	Preferred brand	SP
HUMATROPE	Nonpreferred brand	PA; SP
INCRELEX	Nonpreferred brand	PA; SP
ISTURISA	Nonpreferred brand	PA; SP; QL
MENOPUR	Nonpreferred brand	SP
NGENLA	Nonpreferred brand	PA; SP
NORDITROPIN FLEXPPO	Preferred brand	PA; SP
NOVAREL	Nonpreferred brand	PA; SP
NUTROPIN AQ NUSPIN 10	Nonpreferred brand	PA; SP
NUTROPIN AQ NUSPIN 20	Nonpreferred brand	PA; SP
NUTROPIN AQ NUSPIN 5	Nonpreferred brand	PA; SP
OMNITROPE	Nonpreferred brand	PA; SP
OVIDREL	Preferred brand	SP
PREGNYL	Preferred brand	PA; SP
RECORLEV	Nonpreferred brand	PA; SP; QL
SKYTROFA	Nonpreferred brand	PA; SP
SOGROYA	Nonpreferred brand	PA; SP; QL
ZOMACTON	Nonpreferred brand	PA; SP
Selective Estrogen Receptor Modifying Agents		
clomid	Generic	
clomiphene citrate oral	Generic	
milophene	Generic	
Hormonal Agents, Stimulant/Replacement/Modifying (Prostaglandins)		
mifepristone oral tablet 300 mg	Generic	PA; SP; QL

Drug Name	Drug Tier	Notes
Hormonal Agents, Stimulant/Replacement/Modifying (Sex Hormones/Modifiers)		
Androgens		
AZMIRO	Not covered	
danazol oral	Generic	
INTRAROSA	Not covered	
JATENZO	Nonpreferred brand	PA; QL
KYZATREX	Nonpreferred brand	PA; QL
METHITEST	Nonpreferred brand	QL
methyltestosterone oral	Generic	QL
NATESTO	Not covered	QL
TESTOSTERONE CYPIONATE INJECTION	Not covered	
testosterone cypionate intramuscular	Generic	
testosterone enanthate intramuscular	Generic	
testosterone transdermal	Generic	PA; QL
TLANDO	Nonpreferred brand	PA; QL
XYOSTED	Nonpreferred brand	PA; QL
Estrogens		
abigale	Generic	
abigale lo	Generic	
afirmelle	Generic	PV2
ALORA	Preferred brand	
altavera	Generic	PV2
alyacen 1/35	Generic	PV2
alyacen 7/7/7	Generic	PV2
amethyst	Generic	PV2
ANGELIQ	Nonpreferred brand	
ANNOVERA	Nonpreferred brand	QL
apri	Generic	PV2
aranelle	Generic	PV2
ashlyna	Generic	PV2; QL
aubra eq	Generic	PV2
aurovela 1.5/30	Generic	PV2
aurovela 1/20	Generic	PV2
aurovela 24 fe	Generic	PV2
aurovela fe 1.5/30	Generic	PV2

Drug Name	Drug Tier	Notes
aurovela fe 1/20	Generic	PV2
AVERI	Nonpreferred brand	
aviane	Generic	PV2
ayuna	Generic	PV2
azurette	Generic	PV2
balziva	Generic	PV2
BIJUVA	Nonpreferred brand	QL
blisovi 24 fe	Generic	PV2
blisovi fe 1.5/30	Generic	PV2
blisovi fe 1/20	Generic	PV2
briellyn	Generic	PV2
camrese	Generic	PV2; QL
camrese lo	Generic	PV2; QL
charlotte 24 fe	Generic	PV2
chateal eq	Generic	PV2
CLIMARA	Nonpreferred brand	
CLIMARA PRO	Preferred brand	
COMBIPATCH	Nonpreferred brand	
COVARYX	Nonpreferred brand	
COVARYX HS	Nonpreferred brand	
cryselle	Generic	PV2
cyred eq	Generic	PV2
dasetta 1/35 (28)	Generic	PV2
dasetta 7/7/7	Generic	PV2
daysee	Generic	PV2; QL
delyla	Generic	PV2
DEPO-ESTRADIOL	Nonpreferred brand	
desogestrel-ethinyl estradiol	Generic	PV2
dolishale	Generic	PV2
dotti	Generic	
drospiren-eth estrad-levomefol	Generic	PV2
drospirenone-ethinyl estradiol	Generic	PV2
DUAVEE	Nonpreferred brand	
EEMT	Nonpreferred brand	
EEMT HS	Nonpreferred brand	
ELESTRIN	Nonpreferred brand	
elinest	Generic	PV2

Drug Name	Drug Tier	Notes
eluryng	Generic	PV2; QL
enilloring	Generic	PV2; QL
enskyce	Generic	PV2
est estrogens-methyltest	Generic	
est estrogens-methyltest ds	Generic	
est estrogens-methyltest hs	Generic	
estarylla	Generic	PV2
estradiol oral	Generic	
estradiol transdermal	Generic	
estradiol vaginal	Generic	
estradiol valerate intramuscular	Generic	
estradiol-norethindrone acet	Generic	
ESTRATEST H.S.	Nonpreferred brand	
ESTRING	Preferred brand	
estrogens conjugated	Generic	
ethynodiol diac-eth estradiol	Generic	PV2
etonogestrel-ethinyl estradiol	Generic	PV2; QL
EVAMIST	Nonpreferred brand	
falmina	Generic	PV2
feirza 1.5/30	Generic	PV2
feirza 1/20	Generic	PV2
FEMLYV	Nonpreferred brand	QL
FEMRING	Nonpreferred brand	
finzala	Generic	PV2
fyavolv	Generic	
galbriela	Generic	PV2
gemmily	Generic	PV2
hailey 1.5/30	Generic	PV2
hailey 24 fe	Generic	PV2
hailey fe 1.5/30	Generic	PV2
hailey fe 1/20	Generic	PV2
iclevia	Generic	PV2; QL
IMVEXXY MAINTENANCE PACK	Nonpreferred brand	
IMVEXXY STARTER PACK	Nonpreferred brand	
introvale	Generic	PV2; QL
isibloom	Generic	PV2
jaimiess	Generic	PV2; QL

Drug Name	Drug Tier	Notes
jasmiel	Generic	PV2
jinteli	Generic	
jolessa	Generic	PV2; QL
joyeaux	Generic	PV2
juleber	Generic	PV2
junel 1.5/30	Generic	PV2
junel 1/20	Generic	PV2
junel fe 1.5/30	Generic	PV2
junel fe 1/20	Generic	PV2
junel fe 24	Generic	PV2
kaitlib fe	Generic	PV2
kalliga	Generic	PV2
kariva	Generic	PV2
kelnor 1/35	Generic	PV2
kurvelo	Generic	PV2
larin 1.5/30	Generic	PV2
larin 1/20	Generic	PV2
larin 24 fe	Generic	PV2
larin fe 1.5/30	Generic	PV2
larin fe 1/20	Generic	PV2
lessina	Generic	PV2
levonest	Generic	PV2
levonorgest-eth est & eth est	Generic	PV2; QL
levonorgest-eth estrad 91-day oral tablet 0.1-0.02 & 0.01 mg, 0.15-0.03 mg	Generic	PV2; QL
levonorgest-eth estradiol-iron	Generic	PV2
levonorgestrel-ethinyl estrad	Generic	PV2
levonorg-eth estrad triphasic	Generic	PV2
LO LOESTRIN FE	Nonpreferred brand	
lojaimiess	Generic	PV2; QL
loryna	Generic	PV2
low-ogestrel	Generic	PV2
lo-zumandimine	Generic	PV2
luizza 1.5/30	Generic	PV2
luizza 1/20	Generic	PV2
lutera	Generic	PV2
lyllana	Generic	

Drug Name	Drug Tier	Notes
marlissa	Generic	PV2
MENOSTAR	Nonpreferred brand	
mibelas 24 fe	Generic	PV2
microgestin 1.5/30	Generic	PV2
microgestin 1/20	Generic	PV2
microgestin fe 1.5/30	Generic	PV2
microgestin fe 1/20	Generic	PV2
mili	Generic	PV2
mimvey	Generic	
MINIVELLE	Nonpreferred brand	
minzoya	Generic	PV2
mono-lynyah	Generic	PV2
MYFEMBREE	Nonpreferred brand	PA; QL
NATAZIA	Nonpreferred brand	
necon 0.5/35 (28)	Generic	PV2
NEXTSTELLIS	Nonpreferred brand	
nikki	Generic	PV2
norelgestromin-eth estradiol	Generic	PV2; QL
norethin ace-eth estrad-fe	Generic	PV2
norethindrone acet-ethinyl est	Generic	PV2
norethindrone-eth estradiol	Generic	
norethin-eth estradiol-fe	Generic	PV2
norgestimate-eth estradiol oral tablet 0.25-35 mg-mcg	Generic	PV2
norgestimate-ethinyl estradiol triphasic	Generic	PV2
nortrel 0.5/35 (28)	Generic	PV2
nortrel 1/35 (21)	Generic	PV2
nortrel 1/35 (28)	Generic	PV2
nortrel 7/7/7	Generic	PV2
nylia 1/35	Generic	PV2
nylia 7/7/7	Generic	PV2
ORIAHNN	Nonpreferred brand	PA; QL
philith	Generic	PV2
pimtrea	Generic	PV2
portia-28	Generic	PV2
PREMARIN VAGINAL	Preferred brand	
PREMPHASE	Preferred brand	

Drug Name	Drug Tier	Notes
PREMPRO	Preferred brand	
reclipsen	Generic	PV2
rivelsa	Generic	PV2; QL
rosyrah	Generic	PV2; QL
setlakin	Generic	PV2; QL
simliya	Generic	PV2
simpesse	Generic	PV2; QL
sprintec 28	Generic	PV2
syeda	Generic	PV2
tarina 24 fe	Generic	PV2
tarina fe 1/20 eq	Generic	PV2
taysofy	Generic	PV2
tilia fe	Generic	PV2
tri-estarylla	Generic	PV2
tri-legest fe	Generic	PV2
tri-linyah	Generic	PV2
tri-lo-estarylla	Generic	PV2
tri-lo-marzia	Generic	PV2
tri-lo-mili	Generic	PV2
tri-lo-sprintec	Generic	PV2
tri-mili	Generic	PV2
tri-sprintec	Generic	PV2
tri-vylibra	Generic	PV2
tri-vylibra lo	Generic	PV2
turqoz	Generic	PV2
TWIRLA	Not covered	QL
TYBLUME	Nonpreferred brand	
tydemy	Generic	PV2
valtya 1/35	Generic	PV2
valtya 1/50	Generic	PV2
velivet	Generic	PV2
vestura	Generic	PV2
vienva	Generic	PV2
viorele	Generic	PV2
volnea	Generic	PV2
vyfemla	Generic	PV2
vylibra	Generic	PV2

Drug Name	Drug Tier	Notes
wera	Generic	PV2
wymzya fe	Generic	PV2
xarah fe	Generic	PV2
xelria fe	Generic	PV2
xulane	Generic	PV2; QL
yuvafem	Generic	
zafemy	Generic	PV2; QL
zovia 1/35 (28)	Generic	PV2
zumandimine	Generic	PV2
Progestins		
aftera	Preventive	PV1; QL
camila	Generic	PV2
CRINONE VAGINAL GEL 4 %	Nonpreferred brand	
CRINONE VAGINAL GEL 8 %	Nonpreferred brand	PA
deblitane	Generic	PV2
DEPO-SUBQ PROVERA 104	Preferred brand	
econtra one-step	Preventive	PV1; QL
ELLA	Preferred brand	PV2; QL
emzahh	Generic	PV2
errin	Generic	PV2
gallifrey	Generic	
heather	Generic	PV2
her style	Preventive	PV1; QL
incassia	Generic	PV2
jencycla	Generic	PV2
levonorgestrel	Preventive	PV1; QL
lyleq	Generic	PV2
lyza	Generic	PV2
medroxyprogesterone acetate intramuscular	Generic	PV2
medroxyprogesterone acetate oral	Generic	
megestrol acetate oral	Generic	
meleya	Generic	PV2
my choice	Preventive	PV1; QL
my way	Preventive	PV1; QL
new day	Preventive	PV1; QL
nora-be	Generic	PV2
norethindrone acetate oral	Generic	

Drug Name	Drug Tier	Notes
norethindrone oral	Generic	PV2
norlyroc	Generic	PV2
opcicon one-step	Preventive	PV1; QL
option 2	Preventive	PV1; QL
orquidea	Generic	PV2
progesterone intramuscular	Generic	
progesterone oral	Generic	
progesterone vaginal	Generic	PA
sharobel	Generic	PV2
shewise	Preventive	PV1; QL
SLYND	Nonpreferred brand	QL
take action	Preventive	PV1; QL
Selective Estrogen Receptor Modifying Agents		
OSPHENA	Nonpreferred brand	
raloxifene hcl	Generic	PV3; QL
Hormonal Agents, Stimulant/Replacement/Modifying (Thyroid)		
ARMOUR THYROID	Nonpreferred brand	
EVEXITHROID	Nonpreferred brand	
levo-t	Generic	
LEVOTHYROXINE SODIUM ORAL CAPSULE	Not covered	ABA
levothyroxine sodium oral tablet	Generic	
levoxyl	Generic	
liomny	Generic	
liothyronine sodium oral	Generic	
NIVA THYROID	Nonpreferred brand	
np thyroid	Generic	
RENTHYROID	Nonpreferred brand	
SYNTHROID	Nonpreferred brand	
THYQUIDITY	Not covered	
thyroid oral	Generic	
TIROSINT	Nonpreferred brand	
TIROSINT-SOL	Nonpreferred brand	
unithroid	Generic	

Drug Name	Drug Tier	Notes
Hormonal Agents, Suppressant (Adrenal)		
LYSODREN	Preferred brand	QL
Hormonal Agents, Suppressant (Pituitary)		
BYNFEZIA PEN	Nonpreferred brand	PA; SP; QL
cetorelix acetate	Generic	SP
ganirelix acetate	Generic	SP
leuprolide acetate injection	Generic	SP
LUPRON DEPOT (1-MONTH) INTRAMUSCULAR KIT 3.75 MG	Preferred brand	SP
LUPRON DEPOT (3-MONTH) INTRAMUSCULAR KIT 11.25 MG	Preferred brand	SP
LUPRON DEPOT-PED (1-MONTH)	Preferred brand	SP
LUPRON DEPOT-PED (3-MONTH)	Preferred brand	SP
LUPRON DEPOT-PED (6-MONTH)	Preferred brand	SP
MYCAPSSA	Nonpreferred brand	PA; SP; QL
octreotide acetate injection	Generic	SP
octreotide acetate subcutaneous	Generic	SP
ORILISSA	Preferred brand	PA; QL
PALSONIFY	Nonpreferred brand	PA; SP; QL
SIGNIFOR	Preferred brand	PA; SP; QL
SOMAVERT	Preferred brand	PA; SP
SYNAREL	Nonpreferred brand	
Hormonal Agents, Suppressant (Thyroid)		
Antithyroid Agents		
methimazole oral	Generic	
propylthiouracil oral	Generic	
Immunological Agents		
Angioedema Agents		
ANDEMBRY	Nonpreferred brand	PA; SP; QL
DAWNZERA	Nonpreferred brand	PA; SP; QL
EKTERLY	Not covered	SP; QL
HAEGARDA	Preferred brand	PA; SP; QL
icatibant acetate	Generic	PA; SP; QL
ORLADEYO	Preferred brand	PA; SP; QL
RUCONEST	Nonpreferred brand	PA; SP; QL
TAKHZYRO	Preferred brand	PA; SP; QL

Drug Name	Drug Tier	Notes
Immune Suppressants		
ABRILADA (1 PEN)	Not covered	SP; QL
ABRILADA (2 PEN)	Not covered	SP; QL
ABRILADA (2 SYRINGE)	Not covered	SP; QL
ADALIMUMAB-AACF (2 PEN)	Not covered	SP; QL
ADALIMUMAB-AACF (2 SYRINGE)	Not covered	SP; QL
ADALIMUMAB-AACF(CD/UC/HS STRT)	Not covered	SP; QL
ADALIMUMAB-AACF(PS/UV STARTER)	Not covered	SP; QL
ADALIMUMAB-AATY (1 PEN)	Not covered	SP; QL
ADALIMUMAB-AATY (2 PEN)	Not covered	SP; QL
ADALIMUMAB-AATY (2 SYRINGE)	Not covered	SP; QL
ADALIMUMAB-AATY CD/UC/HS START	Not covered	SP
ADALIMUMAB-ADAZ	Not covered	SP
ADALIMUMAB-ADBM (2 PEN)	Not covered	SP
ADALIMUMAB-ADBM (2 SYRINGE)	Not covered	SP
ADALIMUMAB-BWWD	Not covered	SP
ADALIMUMAB-FKJP (2 PEN)	Not covered	SP
ADALIMUMAB-FKJP (2 SYRINGE)	Not covered	SP
AMJEVITA	Not covered	SP
AMJEVITA-PED 10KG TO <15KG SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 10MG/0.2ML	Not covered	SP
AMJEVITA-PED 15KG TO <30KG	Not covered	SP
ASTAGRAF XL	Nonpreferred brand	SP
azathioprine oral	Generic	
CIMZIA (1 SYRINGE)	Nonpreferred brand	PA; SP; QL
CIMZIA (2 SYRINGE)	Nonpreferred brand	PA; SP; QL
CIMZIA-STARTER	Nonpreferred brand	PA; SP; QL
cyclosporine modified	Generic	SP
cyclosporine oral	Generic	SP
CYLTEZO (2 PEN)	Not covered	SP
CYLTEZO (2 SYRINGE)	Not covered	SP
ENBREL	Preferred brand	PA; SP; QL
ENBREL MINI	Preferred brand	PA; SP; QL
ENBREL SURECLICK	Preferred brand	PA; SP; QL
ENVARUSUS XR	Nonpreferred brand	SP

Drug Name	Drug Tier	Notes
everolimus oral tablet 0.25 mg, 0.5 mg, 0.75 mg, 1 mg	Generic	SP
gengraf	Generic	SP
HADLIMA	Not covered	SP
HADLIMA PUSH TOUCH	Not covered	SP
HULIO (2 PEN)	Not covered	SP
HULIO (2 SYRINGE)	Not covered	SP
HUMIRA (2 PEN)	Not covered	SP; QL
HUMIRA (2 SYRINGE)	Not covered	SP; QL
HUMIRA-CD/UC/HS STARTER	Not covered	SP; QL
HUMIRA-PSORIASIS/UEIT STARTER	Not covered	SP; QL
HYRIMOZ	Not covered	SP
HYRIMOZ-CROHNS/UC STARTER	Not covered	SP
HYRIMOZ-PED<40KG CROHN STARTER	Not covered	SP
HYRIMOZ-PED>/=40KG CROHN START	Not covered	SP
HYRIMOZ-PLAQ PSOR/UEIT START	Not covered	SP
HYRIMOZ-PLAQUE PSORIASIS START	Not covered	SP
IMULDOSA SUBCUTANEOUS	Not covered	SP; QL
JYLAMVO	Not covered	SP
KINERET	Nonpreferred brand	PA; SP; QL
LUPKYNIS	Nonpreferred brand	PA; SP; QL
methotrexate sodium (pf)	Generic	
methotrexate sodium injection solution	Generic	
methotrexate sodium oral	Generic	
mycophenolate mofetil oral	Generic	SP
mycophenolate sodium	Generic	SP
mycophenolic acid	Generic	SP
MYHIBBIN	Not covered	SP; QL
OLUMIANT	Nonpreferred brand	PA; SP; QL
OMVOH (300 MG DOSE)	Not covered	SP; QL
OMVOH SUBCUTANEOUS SOLUTION AUTO-INJECTOR 200 MG/2ML	Not covered	SP; QL
OMVOH SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 200 MG/2ML	Not covered	SP; QL
ORENCIA CLICKJECT	Nonpreferred brand	PA; SP; QL
ORENCIA SUBCUTANEOUS	Nonpreferred brand	PA; SP; QL
OTULFI SUBCUTANEOUS	Not covered	SP

Drug Name	Drug Tier	Notes
PROGRAF ORAL PACKET	Nonpreferred brand	SP
RASUVO	Nonpreferred brand	PA; SP; QL
REZUROCK	Preferred brand	PA; SP; OVM
RHAPSIDO	Nonpreferred brand	PA; SP; QL
SIMLANDI (1 PEN)	Preferred brand	PA; SP; QL
SIMLANDI (2 PEN)	Preferred brand	PA; SP; QL
SIMLANDI (2 SYRINGE)	Preferred brand	PA; SP; QL
SIMPONI	Preferred brand	PA; SP; QL
sirolimus oral	Generic	SP
SKYRIZI PEN	Preferred brand	PA; SP; QL
SKYRIZI SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	Preferred brand	PA; SP; QL
STARJEMZA SUBCUTANEOUS	Not covered	SP
STEQEYMA SUBCUTANEOUS	Not covered	SP; QL
tacrolimus oral	Generic	SP
TREXALL	Preferred brand	
USTEKINUMAB-AAUZ	Not covered	SP
XATMEP	Not covered	SP
XELJANZ	Preferred brand	PA; SP; QL
XELJANZ XR	Preferred brand	PA; SP; QL
YESINTEK SUBCUTANEOUS	Preferred brand	PA; SP; QL
YUFLYMA (1 PEN)	Not covered	SP; QL
YUFLYMA (2 PEN)	Not covered	SP; QL
YUFLYMA (2 SYRINGE)	Not covered	SP; QL
YUFLYMA-CD/UC/HS STARTER	Not covered	SP; QL
YUSIMRY	Not covered	SP
ZYMFENTRA (1 PEN)	Not covered	SP; QL
ZYMFENTRA (2 PEN)	Not covered	SP; QL
ZYMFENTRA (2 SYRINGE)	Not covered	SP; QL
Immunoglobulins		
CUTAQUIG	Nonpreferred brand	PA; SP
CUVITRU	Nonpreferred brand	PA; SP
GAMMAGARD	Preferred brand	PA; SP
GAMMAGARD ERC	Preferred brand	PA; SP
GAMMAKED	Nonpreferred brand	PA; SP
GAMUNEX-C	Not covered	SP
HIZENTRA	Preferred brand	PA; SP

Drug Name	Drug Tier	Notes
HYQVIA	Nonpreferred brand	PA; SP
XEMBIFY	Nonpreferred brand	PA; SP
Immunomodulators		
ACTEMRA ACTPEN	Not covered	SP; QL
ACTEMRA SUBCUTANEOUS	Not covered	SP; QL
ACTIMMUNE	Preferred brand	SP
ARCALYST	Nonpreferred brand	PA; SP; QL
AURANOFIN	Nonpreferred brand	ABA
AVTOZMA SUBCUTANEOUS	Not covered	SP
BENLYSTA SUBCUTANEOUS	Preferred brand	PA; SP; QL
BEYFORTUS	Preventive	PV1; QL
ENFLONIA	Preventive	PV1; QL
ENSPRYNG	Preferred brand	PA; SP; QL
ENTYVIO PEN	Nonpreferred brand	PA; SP; QL
KEVZARA	Nonpreferred brand	PA; SP; QL
leflunomide oral	Generic	
OTEZLA	Preferred brand	PA; SP; QL
OTEZLA XR	Preferred brand	PA; SP; QL
OTEZLA/OTEZLA XR INITIATION PK	Preferred brand	PA; SP; QL
PYZCHIVA SUBCUTANEOUS	Not covered	SP
RIDAURA	Nonpreferred brand	
RINVOQ	Preferred brand	PA; SP; QL
RINVOQ LQ	Preferred brand	PA; SP; QL
SELARSDI SUBCUTANEOUS	Not covered	SP
STELARA SUBCUTANEOUS	Not covered	SP; QL
TREMFYA ONE-PRESS	Preferred brand	PA; SP; QL
TREMFYA PEN	Preferred brand	PA; SP; QL
TREMFYA SUBCUTANEOUS	Preferred brand	PA; SP; QL
TREMFYA-CD/UC INDUCTION	Preferred brand	PA; SP; QL
TYENNE SUBCUTANEOUS	Preferred brand	PA; SP; QL
USTEKINUMAB SUBCUTANEOUS	Not covered	SP; QL
USTEKINUMAB-AEKN	Not covered	SP
USTEKINUMAB-TTWE SUBCUTANEOUS	Not covered	SP
VELSIPITY	Not covered	SP; QL
WEZLANA SUBCUTANEOUS	Not covered	SP; QL
XOLAIR SUBCUTANEOUS SOLUTION AUTO-INJECTOR	Preferred brand	PA; SP; QL

Drug Name	Drug Tier	Notes
XOLAIR SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	Preferred brand	PA; SP; QL
Immunosuppressants		
JOENJA	Preferred brand	PA; SP; QL
Vaccines		
ABRYSVO	Preventive	PV1; QL
ACTHIB	Preventive	PV1; QL
ADACEL	Preventive	PV1; QL
AFLURIA	Preventive	PV1; QL
AFLURIA PRESERVATIVE FREE	Preventive	PV1; QL
AREXVY	Preventive	PV1; QL
BEXSERO	Preventive	PV1; QL
BOOSTRIX	Preventive	PV1; QL
CAPVAXIVE	Preventive	PV1; QL
COMIRNATY	Preventive	PV1; QL
COMIRNATY 5-11 YEARS	Preventive	PV1; QL
DAPTACEL	Preventive	PV1; QL
DENGVAXIA	Preventive	PV1; QL
ENGERIX-B	Preventive	PV1; QL
FLUAD	Preventive	PV1; QL
FLUARIX	Preventive	PV1; QL
FLUBLOK	Preventive	PV1; QL
FLUCELVAX	Preventive	PV1; QL
FLULAVAL	Preventive	PV1; QL
FLUMIST	Preventive	PV1; QL
FLUZONE HIGH-DOSE	Preventive	PV1; QL
FLUZONE INTRAMUSCULAR SUSPENSION PREFILLED SYRINGE	Preventive	PV1; QL
GARDASIL 9	Preventive	PV1; QL; AL (Min 9 Years and Max 45 Years)
HAVRIX	Preventive	PV1; QL
HEPLISAV-B	Preventive	PV1; QL
HIBERIX	Preventive	PV1; QL
INFANRIX	Preventive	PV1; QL
IPOL	Preventive	PV1; QL
JYNNEOS	Preventive	PV1; QL
KINRIX	Preventive	PV1; QL

Drug Name	Drug Tier	Notes
MENQUADFI	Preventive	PV1; QL
MENVEO	Preventive	PV1; QL
M-M-R II	Preventive	PV1; QL
MNEXSPIKE	Preventive	PV1; QL
MRESVIA	Preventive	PV1; QL
NUVAXOVID COVID-19 VACCINE	Preventive	PV1; QL
PEDIARIX	Preventive	PV1; QL
PEDVAX HIB	Preventive	PV1; QL
PENBRAYA	Preventive	PV1; QL
PENMENVY	Preventive	PV1; QL
PENTACEL	Preventive	PV1; QL
PNEUMOVAX 23	Preventive	PV1; QL
PREVNAR 20	Preventive	PV1; QL
PRIORIX	Preventive	PV1; QL
PROQUAD	Preventive	PV1; QL
QUADRACEL	Preventive	PV1; QL
RECOMBIVAX HB	Preventive	PV1; QL
ROTARIX	Preventive	PV1; QL
ROTATEQ	Preventive	PV1; QL
SHINGRIX	Preventive	PV1; QL
SPIKEVAX	Preventive	PV1; QL
SPIKEVAX 6M-11Y	Preventive	PV1; QL
TENIVAC	Preventive	PV1; QL
TRUMENBA	Preventive	PV1; QL
TWINRIX	Preventive	PV1; QL
VAQTA	Preventive	PV1; QL
VARIVAX	Preventive	PV1; QL
VAXELIS	Preventive	PV1; QL
VAXNEUVANCE	Preventive	PV1; QL
Inflammatory Bowel Disease Agents		
Aminosalicylates		
balsalazide disodium	Generic	
DIPENTUM	Nonpreferred brand	
mesalamine er oral capsule 0.375 gm	Generic	
mesalamine oral capsule delayed release 400 mg	Generic	
mesalamine oral tablet delayed release 1.2 gm	Generic	QL

Drug Name	Drug Tier	Notes
mesalamine oral tablet delayed release 800 mg	Generic	
mesalamine rectal	Generic	
PENTASA	Preferred brand	
Glucocorticoids		
ANALPRAM HC EXTERNAL CREAM 2.5-1 %	Not covered	
ANALPRAM HC EXTERNAL LOTION	Not covered	
ANUCORT-HC	Not covered	
ANUSOL-HC RECTAL	Not covered	
budesonide er	Generic	QL
budesonide oral	Generic	
budesonide rectal	Generic	
CORTIFOAM	Nonpreferred brand	
EOHILIA	Nonpreferred brand	PA; SP; QL
HEMMOREX-HC	Not covered	
hydrocortisone (perianal)	Generic	
hydrocortisone ace-pramoxine external cream 1-1 %	Generic	
hydrocortisone acetate rectal	Generic	
hydrocortisone rectal	Generic	
hydrocort-pramoxine (perianal)	Generic	
lidocaine-hydrocort (perianal)	Generic	
LIDOCORT	Not covered	
PROCTOCORT RECTAL	Not covered	
PROCTOFOAM HC	Preferred brand	
procto-med hc	Generic	
TARPEYO	Nonpreferred brand	PA; SP; QL
Sulfonamides		
sulfasalazine oral	Generic	
Metabolic Bone Disease Agents		
alendronate sodium	Generic	QL
BINOSTO	Not covered	QL
BONSITY	Not covered	SP; QL
calcitonin (salmon)	Generic	
calcitriol oral	Generic	
cinacalcet hcl	Generic	SP
doxercalciferol oral	Generic	
FOSAMAX PLUS D	Not covered	QL

Drug Name	Drug Tier	Notes
ibandronate sodium oral	Generic	QL
paricalcitol oral	Generic	
RAYALDEE	Nonpreferred brand	QL
risedronate sodium	Generic	QL
teriparatide solution pen-injector 560 mcg/2.24ml subcutaneous	Generic	PA; SP; QL
TERIPARATIDE SOLUTION PEN-INJECTOR 560 MCG/2.24ML SUBCUTANEOUS	Not covered	SP; QL
TYMLOS	Preferred brand	PA; SP; QL
Miscellaneous Therapeutic Agents		
AEROCHAMBER HOLDING CHAMBER	Preferred brand	QL
AEROCHAMBER MINI CHAMBER	Preferred brand	QL
AEROCHAMBER MV	Preferred brand	QL
AEROCHAMBER PLS FLOVU MTHPIECE	Preferred brand	QL
AEROCHAMBER PLUS FLO-VU INTERM	Preferred brand	QL
AEROCHAMBER PLUS FLO-VU LARGE DEVICE	Preferred brand	QL
AEROCHAMBER PLUS FLO-VU MEDIUM DEVICE	Preferred brand	QL
AEROCHAMBER PLUS FLO-VU SMALL DEVICE	Preferred brand	QL
AEROCHAMBER PLUS FLOW VU	Preferred brand	QL
AEROCHAMBER2GO ANTI-STATIC	Preferred brand	QL
AQNEURSA	Preferred brand	PA; SP; QL
BD AUTOSHIELD DUO PEN NEEDLES	Preferred brand	
BD PEN NEEDLE MICRO ULTRAFINE	Preferred brand	
BD PEN NEEDLE MINI ULTRAFINE	Preferred brand	
BD PEN NEEDLE NANO ULTRAFINE	Preferred brand	
BD PEN NEEDLE ORIG ULTRAFINE	Preferred brand	
BD PEN NEEDLE SHORT ULTRAFINE	Preferred brand	
BD ULTRA-FINE INSULIN SYRINGES 30G X 1/2" 0.3 ML, 30G X 1/2" 0.5 ML, 30G X 1/2" 1 ML, 31G X 15/64" 0.3 ML, 31G X 5/16" 0.3 ML, 31G X 5/16" 0.5 ML, 31G X 5/16" 1 ML, 31G X 6MM 0.5 ML	Preferred brand	
BD ULTRA-FINE PEN NEEDLES	Preferred brand	
BD VEO INSULIN SYR ULTRAFINE	Preferred brand	
BREATHE COMFORT CHAMBER/ADULT	Nonpreferred brand	QL
BREATHE COMFORT CHAMBER/CHILD	Nonpreferred brand	QL

Drug Name	Drug Tier	Notes
BREATHE EASE LARGE	Nonpreferred brand	QL
BREATHE EASE MEDIUM	Nonpreferred brand	QL
BREATHE EASE SMALL	Nonpreferred brand	QL
BREATHERITE VALVED MDI CHAMBER	Nonpreferred brand	QL
CAYA	Preferred brand	PV2
CLEVER CHOICE HOLDING CHAMBER	Nonpreferred brand	QL
COMPACT SPACE CHAMBER	Nonpreferred brand	QL
COMPACT SPACE CHAMBER/LG MASK	Nonpreferred brand	QL
COMPACT SPACE CHAMBER/MED MASK	Nonpreferred brand	QL
COMPACT SPACE CHAMBER/SM MASK	Nonpreferred brand	QL
CONDOMS	Preventive	PV1; QL
deferroxamine mesylate	Generic	
DOJOLVI	Preferred brand	PA; SP
DUREX EXTRA SENSITIVE THIN	Preventive	PV1; QL
DUREX TROPICAL	Preventive	PV1; QL
EASIVENT	Nonpreferred brand	QL
FC2 FEMALE CONDOM	Preventive	PV1; QL
FEMCAP	Preferred brand	PV2; QL
FIRDAPSE	Preferred brand	PA; SP; QL
FLEXICHAMBER	Nonpreferred brand	QL
GRASTEK	Nonpreferred brand	PA; QL
IWILFIN	Preferred brand	PA; 15DS; SP; OVM
KERENDIA	Preferred brand	PA; QL
l-glutamine oral packet	Generic	PA; QL
liraglutide -weight management	Not covered	QL
LYNKUET	Nonpreferred brand	PA; QL
methylergonovine maleate oral	Generic	PA; QL
MICROCHAMBER DEVICE	Nonpreferred brand	QL
MIPLYFFA	Not covered	SP; QL
NOVOFINE PEN NEEDLE	Preferred brand	
NOVOFINE PLUS PEN NEEDLE	Preferred brand	
ODACTRA	Nonpreferred brand	PA; QL
OMNIPOD 5 DEXCOM INTRO KIT	Preferred brand	QL
OMNIPOD 5 DEXCOM PODS	Preferred brand	QL
OMNIPOD 5 LIBRE2 G6 INTRO GEN5	Preferred brand	QL
OMNIPOD 5 LIBRE PODS	Preferred brand	QL
OMNIPOD DASH INTRO KIT	Preferred brand	QL

Drug Name	Drug Tier	Notes
OMNIPOD DASH PDM (GEN 4)	Preferred brand	
OMNIPOD DASH PODS	Preferred brand	QL
OPTICHAMBER DIAMOND	Preferred brand	QL
OPTICHAMBER DIAMOND-LG MASK	Preferred brand	QL
OPTICHAMBER DIAMOND-MD MASK	Preferred brand	QL
OPTICHAMBER DIAMOND-SM MASK	Preferred brand	QL
ORLISTAT ORAL	Nonpreferred brand	PA; ABA; QL
PALFORZIA ORAL PACKET 300 MG	Preferred brand	PA; SP; QL
PHEXX	Nonpreferred brand	PV2; QL
POCKET SPACER	Nonpreferred brand	QL
PRO COMFORT SPACER ADULT	Nonpreferred brand	QL
PRO COMFORT SPACER CHILD	Nonpreferred brand	QL
PRO COMFORT SPACER INFANT	Nonpreferred brand	QL
PROCARE SPACER/ADULT MASK	Nonpreferred brand	QL
PROCARE SPACER/CHILD MASK	Nonpreferred brand	QL
PURE COMFORT SPACER CHAMBER	Nonpreferred brand	QL
RADIOGARDASE	Preferred brand	
RAGWITEK	Nonpreferred brand	PA; QL
RYPLAZIM	Nonpreferred brand	PA; SP; QL
SOHONOS	Preferred brand	PA; SP; QL
sterile water for irrigation	Generic	
TAVNEOS	Nonpreferred brand	PA; SP; QL
TRUE COVER	Preventive	PV1; QL
VEOZAH	Nonpreferred brand	PA; QL
V-GO 20	Preferred brand	QL
V-GO 30	Preferred brand	QL
V-GO 40	Preferred brand	QL
VISTOGARD	Preferred brand	SP; QL
VORTEX VALVE CHAMBER-PEDI MASK	Nonpreferred brand	QL
VORTEX VALVED HOLDING CHAMBER	Nonpreferred brand	QL
VYKAT XR	Preferred brand	PA; SP; QL
water for irrigation, sterile	Generic	
WEGOZY SUBCUTANEOUS	Preferred brand	PA; QL
WIDE-SEAL DIAPHRAGM 60	Preferred brand	PV2; QL
WIDE-SEAL DIAPHRAGM 65	Preferred brand	PV2; QL
WIDE-SEAL DIAPHRAGM 70	Preferred brand	PV2; QL
WIDE-SEAL DIAPHRAGM 75	Preferred brand	PV2; QL

Drug Name	Drug Tier	Notes
WIDE-SEAL DIAPHRAGM 80	Preferred brand	PV2; QL
WIDE-SEAL DIAPHRAGM 85	Preferred brand	PV2; QL
WIDE-SEAL DIAPHRAGM 90	Preferred brand	PV2; QL
WIDE-SEAL DIAPHRAGM 95	Preferred brand	PV2; QL
XENICAL	Nonpreferred brand	PA; QL
XPHOZAH	Preferred brand	PA; QL
YORVIPATH	Preferred brand	PA; SP; QL
ZEPBOUND KWIKPEN	Not covered	QL
ZEPBOUND SUBCUTANEOUS SOLUTION AUTO-INJECTOR	Preferred brand	PA; QL
ZILBRYSQ	Nonpreferred brand	PA; SP; QL
ZOKINVY	Preferred brand	PA; SP; QL
Ophthalmic Agents		
Aminoglycosides		
gentamicin sulfate ophthalmic	Generic	
neomycin-polymyxin-gramicidin	Generic	
TOBRADEX	Nonpreferred brand	
TOBRADEX ST	Nonpreferred brand	
tobramycin ophthalmic	Generic	
tobramycin-dexamethasone	Generic	
TOBEX	Nonpreferred brand	
Antibacterials, Other		
bacitracin ophthalmic	Generic	
bacitracin-polymyxin b	Generic	
bacitra-neomycin-polymyxin-hc	Generic	
neomycin-bacitracin zn-polymyx	Generic	
neomycin-polymyxin-dexameth	Generic	
neomycin-polymyxin-hc ophthalmic	Generic	
polymyxin b-trimethoprim	Generic	
XDEMZY	Preferred brand	PA; QL
Anti-cytomegalovirus (CMV) Agents		
ZIRGAN	Preferred brand	
Antifungals		
NATACYN	Preferred brand	
Antitherpetic Agents		
trifluridine	Generic	

Drug Name	Drug Tier	Notes
Macrolides		
AZASITE	Nonpreferred brand	
erythromycin ophthalmic	Generic	
Ophthalmic Agents, Other		
atropine sulfate ophthalmic solution 1 %	Generic	
CEQUA	Nonpreferred brand	QL
CYCLOGYL OPHTHALMIC SOLUTION 0.5 %, 2 %	Nonpreferred brand	
cyclopentolate hcl ophthalmic	Generic	
cyclosporine ophthalmic emulsion 0.05 %	Generic	
CYSTADROPS	Nonpreferred brand	PA; SP; QL
CYSTARAN	Preferred brand	PA; SP; QL
HOMATROPAIRE	Nonpreferred brand	
loteprednol-tobramycin	Generic	
MIEBO	Preferred brand	QL
OXERVATE	Preferred brand	PA; SP; QL
RESTASIS MULTIDOSE	Not covered	
sulfacetamide-prednisolone	Generic	
tropicamide ophthalmic	Generic	
TRYPTYR	Not covered	QL
TYRVAYA	Nonpreferred brand	QL
VERKAZIA	Nonpreferred brand	PA; QL
VEVYE	Not covered	QL
XIIDRA	Preferred brand	QL
Ophthalmic Anti-allergy Agents		
ALOCRIL	Nonpreferred brand	
altafrin	Generic	
azelastine hcl ophthalmic	Generic	
bepotastine besilate	Generic	
cromolyn sodium ophthalmic	Generic	
CYCLOMYDRIL	Nonpreferred brand	
epinastine hcl	Generic	
olopatadine hcl ophthalmic solution 0.2 %	Generic	
phenylephrine hcl ophthalmic	Generic	
UPNEEQ	Not covered	QL
ZERVIATE	Not covered	

Drug Name	Drug Tier	Notes
Ophthalmic Antiglaucoma Agents		
apraclonidine hcl	Generic	
betaxolol hcl ophthalmic	Generic	
BETOPTIC-S	Nonpreferred brand	
brimonidine tartrate ophthalmic	Generic	
brimonidine tartrate-timolol	Generic	
brinzolamide	Generic	
carteolol hcl	Generic	
dorzolamide hcl ophthalmic	Generic	
dorzolamide hcl-timolol mal	Generic	
dorzolamide hcl-timolol mal pf	Generic	
IOPIDINE	Nonpreferred brand	
levobunolol hcl	Generic	
OMLONTI	Not covered	
PHOSPHOLINE IODIDE	Not covered	
pilocarpine hcl ophthalmic solution 1 %, 2 %, 4 %	Generic	
RHOPRESSA	Nonpreferred brand	ST; QL
ROCKLATAN	Nonpreferred brand	ST; QL
SIMBRINZA	Nonpreferred brand	
timolol hemihydrate	Generic	
timolol maleate (once-daily)	Generic	
timolol maleate ocudose	Generic	
timolol maleate ophthalmic	Generic	
timolol maleate pf	Generic	
Ophthalmic Anti-inflammatories		
ACUVAIL	Nonpreferred brand	
bromfenac sodium (once-daily)	Generic	
bromfenac sodium ophthalmic solution 0.07 %	Generic	
bromfenac sodium ophthalmic solution 0.075 %	Not covered	QL
CLOBETASOL PROPIONATE OPHTHALMIC	Not covered	
dexamethasone sodium phosphate ophthalmic	Generic	
diclofenac sodium ophthalmic	Generic	
difluprednate	Generic	
EYSUVIS	Not covered	QL
FLAREX	Nonpreferred brand	
fluorometholone	Generic	

Drug Name	Drug Tier	Notes
flurbiprofen sodium	Generic	
FML FORTE	Nonpreferred brand	
ILEVRO	Not covered	
INVELTYS	Nonpreferred brand	QL
ketorolac tromethamine ophthalmic	Generic	
LOTEMAX OPHTHALMIC OINTMENT	Nonpreferred brand	
LOTEMAX SM	Nonpreferred brand	QL
loteprednol etabonate	Generic	
MAXIDEX	Nonpreferred brand	
NEVANAC	Not covered	
PRED MILD	Nonpreferred brand	
prednisolone acetate ophthalmic	Generic	
PREDNISOLONE ACETATE P-F	Nonpreferred brand	
prednisolone sodium phosphate ophthalmic	Generic	
Ophthalmic Prostaglandin and Prostanoid Analogs		
bimatoprost ophthalmic solution 0.03 %	Generic	
IYUZEH	Nonpreferred brand	ST; QL
latanoprost ophthalmic	Generic	
LUMIGAN	Nonpreferred brand	
tafluprost (pf)	Generic	
travoprost (bak free)	Generic	
VYZULTA	Nonpreferred brand	PA
XELPROS	Nonpreferred brand	PA; QL
Quinolones		
BESIFLOXACIN HCL	Not covered	
BESIVANCE	Nonpreferred brand	
CILOXAN	Nonpreferred brand	
ciprofloxacin hcl ophthalmic	Generic	
gatifloxacin ophthalmic	Generic	
levofloxacin ophthalmic	Generic	
moxifloxacin hcl (2x day)	Generic	
moxifloxacin hcl ophthalmic	Generic	
ofloxacin ophthalmic	Generic	
Sulfonamides		
sulfacetamide sodium ophthalmic	Generic	

Drug Name	Drug Tier	Notes
Otic Agents		
acetic acid otic	Generic	
ciprofloxacin hcl otic	Generic	
ciprofloxacin-dexamethasone	Generic	
CIPROFLOXACIN-FLUOCINOLONE PF	Nonpreferred brand	
ciprofloxacin-hydrocortisone	Generic	
CORTISPORIN-TC	Nonpreferred brand	
fluocinolone acetonide otic	Generic	
hydrocortisone-acetic acid	Generic	
neomycin-polymyxin-hc otic	Generic	
ofloxacin otic	Generic	
OTOVEL	Nonpreferred brand	
Respiratory Tract/Pulmonary Agents		
Antihistamines		
12 hour allergy-d	Generic	
12hr allergy relief	Generic	
24hr allergy relief	Generic	
ALAVERT	Generic	
ALAVERT D-12 HOUR ALLERGY/CONG	Generic	
all day allergy d	Generic	
all day allergy-d	Generic	
ALLEGRA ALLERGY ORAL TABLET 180 MG	Generic	
ALLEGRA HIVES 24HR	Generic	
allergy (cetirizine)	Generic	
allergy 24hour indoor/outdoor	Generic	
allergy childrens oral solution	Generic	
allergy childrens oral suspension	Generic	
allergy rel child (cetirizine)	Generic	
allergy rel child (loratadine)	Generic	
allergy relief (cetirizine)	Generic	
allergy relief (loratadine)	Generic	
allergy relief cetirizine	Generic	
allergy relief childrens 24-hr	Generic	
allergy relief childrens oral solution	Generic	
allergy relief d oral tablet extended release 24 hour 10-240 mg	Generic	

Drug Name	Drug Tier	Notes
allergy relief d oral tablet extended release 24 hour 180-240 mg	Generic	QL
allergy relief d-12	Generic	
allergy relief d12 oral tablet extended release 12 hour 60-120 mg	Generic	QL
allergy relief oral tablet 10 mg, 180 mg	Generic	
allergy relief oral tablet 5 mg	Generic	QL
allergy relief/indoor/outdoor oral tablet 180 mg	Generic	
allergy relief/nasal decongest	Generic	
allergy relief-d	Generic	
allergy/congestion relief	Generic	
allergy-d 12hr	Generic	
allergy-d 24hr	Generic	
azelastine hcl nasal	Generic	QL
CARBINOXAMINE MALEATE ER	Nonpreferred brand	ST; ABA; QL
carbinoxamine maleate oral solution	Generic	
carbinoxamine maleate oral tablet 4 mg	Generic	
carbinoxamine maleate oral tablet 6 mg	Not covered	
cetirizine hcl childrens alrgy	Generic	
cetirizine hcl oral solution	Generic	
cetirizine hcl oral tablet	Generic	
cetirizine hcl oral tablet chewable 10 mg	Generic	
cetirizine-pseudoephedrine er	Generic	
CLARINEX-D 12 HOUR	Nonpreferred brand	QL
CLARITIN CHILDRENS	Generic	
CLARITIN ORAL TABLET CHEWABLE 10 MG	Generic	
CLARITIN REDITABS JUNIORS	Generic	
CLARITIN REDITABS ORAL TABLET DISPERSIBLE 10 MG	Generic	
clemastine fumarate oral syrup	Not covered	
clemastine fumarate oral tablet	Generic	
CORPHENA	Not covered	
cyproheptadine hcl oral	Generic	
DESLORATADINE ORAL SOLUTION	Not covered	
desloratadine oral tablet	Generic	QL
desloratadine oral tablet dispersible	Generic	QL
diphenhydramine hcl oral elixir	Generic	

Drug Name	Drug Tier	Notes
fexofenadine hcl oral	Generic	
fexofenadine-pseudoephed er	Generic	QL
ft all day allergy	Generic	
ft all day allergy 24 hour	Generic	
ft all day allergy childrens	Generic	
ft all day allergy relief	Generic	
ft all day allergy-d	Generic	
ft allergy & congestion-d 12hr	Generic	QL
ft allergy childrens	Generic	
ft allergy d-12 hour	Generic	
ft allergy relief 12 hour	Generic	
ft allergy relief 24 hour	Generic	
ft allergy relief cetirizine	Generic	
ft allergy relief childrens oral solution	Generic	
ft allergy relief childrens oral tablet chewable	Generic	
ft allergy relief oral tablet 10 mg, 180 mg	Generic	
ft allergy relief-d	Generic	
goodsense all day allergy-d	Generic	
goodsense aller-ease	Generic	
goodsense allergy relief child	Generic	
KARBINAL ER	Nonpreferred brand	ST; QL
levocetirizine dihydrochloride oral	Generic	QL
loratadine childrens	Generic	
loratadine oral solution	Generic	
loratadine oral tablet	Generic	
loratadine oral tablet dispersible	Generic	
loratadine-d 12hr	Generic	
loratadine-d 24hr	Generic	
mm allergy relief 24 hour	Generic	
mm fexofenadine hcl	Generic	
olopatadine hcl nasal	Generic	QL
promethazine-phenylephrine	Generic	
RYCLORA	Not covered	
ryvent	Not covered	
wal-itin d	Generic	
wal-zyr allergy childrens	Generic	
wal-zyr childrens oral solution 5 mg/5ml	Generic	

Drug Name	Drug Tier	Notes
XYZAL ALLERGY 24HR CHILDRENS	Generic	QL
ZYRTEC	Generic	
ZYRTEC ALLERGY ORAL TABLET	Generic	
ZYRTEC CHILDRENS ALLERGY ORAL SOLUTION 5 MG/5ML	Generic	
ZYRTEC CHILDRENS ALLERGY ORAL TABLET CHEWABLE	Generic	
ZYRTEC-D ALLERGY & SINUS	Generic	
Anti-inflammatories, Inhaled Corticosteroids		
ADVAIR HFA	Preferred brand	QL
ALVESCO	Not covered	QL
ARNUITY ELLIPTA	Not covered	QL
ASMANEX (120 METERED DOSES)	Preferred brand	QL
ASMANEX (30 METERED DOSES)	Preferred brand	QL
ASMANEX (60 METERED DOSES)	Preferred brand	QL
ASMANEX HFA	Preferred brand	QL
BEVESPI AEROSPHERE	Not covered	QL
BREO ELLIPTA	Preferred brand	QL
breyna	Not covered	QL
budesonide inhalation	Generic	
budesonide-formoterol fumarate	Not covered	QL
DULERA INHALATION AEROSOL 100-5 MCG/ACT, 200-5 MCG/ACT	Not covered	QL
DULERA INHALATION AEROSOL 50-5 MCG/ACT	Not covered	
flunisolide nasal	Generic	QL
FLUTICASONE FUROATE ELLIPTA	Not covered	ABA; QL
FLUTICASONE FUROATE-VILANTEROL	Not covered	ABA; QL
FLUTICASONE PROPIONATE DISKUS	Nonpreferred brand	ABA; QL; AL (Max 5 Years)
FLUTICASONE PROPIONATE HFA	Generic	QL; AL (Max 5 Years)
fluticasone propionate nasal	Generic	QL
FLUTICASONE-SALMETEROL INHALATION AEROSOL 45-21 MCG/ACT, 115-21 MCG/ACT, 230-21 MCG/ACT	Not covered	ABA; QL
fluticasone-salmeterol inhalation aerosol powder breath activated 100-50 mcg/act, 250-50 mcg/act, 500-50 mcg/act	Generic	QL

Drug Name	Drug Tier	Notes
FLUTICASONE-SALMETEROL INHALATION AEROSOL POWDER BREATH ACTIVATED 113-14 MCG/ACT, 232-14 MCG/ACT, 55-14 MCG/ACT	Nonpreferred brand	ABA; QL
OMNARIS	Nonpreferred brand	ST; QL
PULMICORT FLEXHALER	Preferred brand	QL
QNASL	Nonpreferred brand	ST; QL
QNASL CHILDRENS	Nonpreferred brand	ST; QL
QVAR REDHALER	Not covered	QL
SYMBICORT	Generic	QL
wixela inhub	Generic	QL
XHANCE	Not covered	QL
Antileukotrienes		
montelukast sodium oral	Generic	QL
zafirlukast	Generic	QL
zileuton er	Generic	QL
Bronchodilators, Anticholinergic		
ATROVENT HFA	Preferred brand	QL
INCRUSE ELLIPTA	Not covered	QL
ipratropium bromide inhalation	Generic	
ipratropium bromide nasal	Generic	QL
SPIRIVA RESPIMAT	Preferred brand	QL
tiotropium bromide	Generic	QL
TUDORZA PRESSAIR	Not covered	QL
YUPELRI INHALATION SOLUTION 175 MCG/3ML	Preferred brand	QL
Bronchodilators, Sympathomimetic		
albuterol sulfate hfa	Generic	QL
albuterol sulfate inhalation nebulization solution (2.5 mg/3ml) 0.083%, 0.63 mg/3ml, 1.25 mg/3ml, 2.5 mg/0.5ml	Generic	
albuterol sulfate nebulization solution (5 mg/ml) 0.5% inhalation	Generic	
ALBUTEROL SULFATE NEBULIZATION SOLUTION (5 MG/ML) 0.5% INHALATION	Nonpreferred brand	
albuterol sulfate oral syrup 2 mg/5ml	Generic	
albuterol sulfate oral tablet	Generic	
arformoterol tartrate	Generic	QL
AUVI-Q	Nonpreferred brand	QL

Drug Name	Drug Tier	Notes
epinephrine injection solution auto-injector	Generic	QL
formoterol fumarate inhalation	Generic	QL
levalbuterol hcl inhalation	Generic	
LEVALBUTEROL HFA INHALATION AEROSOL 45 MCG/ACT	Nonpreferred brand	ABA; QL
NEFFY NASAL SOLUTION 1 MG/0.1ML	Not covered	
NEFFY NASAL SOLUTION 2 MG/0.1ML	Not covered	QL
PROAIR RESPICLICK	Not covered	QL
SEREVENT DISKUS	Preferred brand	QL
STRIVERDI RESPIMAT	Preferred brand	QL
terbutaline sulfate oral	Generic	
XOPENEX HFA	Nonpreferred brand	QL
Cystic Fibrosis Agents		
ALYFTREK	Preferred brand	PA; SP
BRONCHITOL	Nonpreferred brand	PA; SP; QL
BRONCHITOL TOLERANCE TEST	Nonpreferred brand	PA; SP; QL
CAYSTON	Nonpreferred brand	PA; SP; QL
KALYDECO	Preferred brand	PA; SP; QL
ORKAMBI	Preferred brand	PA; SP; QL
PULMOZYME	Preferred brand	PA; SP
SYMDEKO	Preferred brand	PA; SP; QL
TOBI PODHALER	Nonpreferred brand	PA; SP; QL
tobramycin inhalation	Generic	SP; QL
TRIKAFTA	Preferred brand	PA; SP; QL
Mast Cell Stabilizers		
cromolyn sodium inhalation	Generic	
Phosphodiesterase Inhibitors, Airways Disease		
elixophyllin	Generic	
OHTUVAYRE	Nonpreferred brand	PA; SP; QL
roflumilast	Generic	QL
THEO-24	Nonpreferred brand	
theophylline er	Generic	
theophylline oral	Generic	
Pulmonary Antihypertensives		
ADEMPAS	Preferred brand	PA; SP; QL
alyq	Generic	PA; SP; QL

Drug Name	Drug Tier	Notes
ambrisentan	Generic	PA; SP; QL
bosentan	Generic	PA; SP; QL
OPSUMIT	Preferred brand	PA; SP; QL
OPSYNVI	Nonpreferred brand	PA; SP; QL
ORENITRAM	Nonpreferred brand	PA; SP; QL
ORENITRAM MONTH 1	Nonpreferred brand	PA; SP; QL
ORENITRAM MONTH 2	Nonpreferred brand	PA; SP; QL
ORENITRAM MONTH 3	Nonpreferred brand	PA; SP; QL
REMODULIN	Nonpreferred brand	SP
sildenafil citrate oral suspension reconstituted	Generic	PA; QL
sildenafil citrate oral tablet 20 mg	Generic	QL
tadalafil (pah)	Generic	PA; SP; QL
TADLIQ	Nonpreferred brand	PA; SP; QL
treprostinil	Generic	SP
TYVASO	Preferred brand	PA; SP; QL
TYVASO DPI MAINTENANCE KIT	Preferred brand	PA; SP; QL
TYVASO DPI TITRATION KIT	Preferred brand	PA; SP; QL
TYVASO REFILL KIT	Preferred brand	PA; SP; QL
TYVASO STARTER KIT	Preferred brand	PA; SP; QL
UPTRAVI ORAL	Nonpreferred brand	PA; SP; QL
UPTRAVI TITRATION	Nonpreferred brand	PA; SP; QL
WINREVAIR	Nonpreferred brand	PA; SP; QL
YUTREPIA	Not covered	SP; QL
Pulmonary Fibrosis Agents		
JASCAYD	Nonpreferred brand	PA; SP; QL
OFEV	Nonpreferred brand	PA; SP; QL
pirfenidone	Generic	SP; QL
Respiratory Tract Agents, Other		
acetylcysteine inhalation	Generic	
AIRSUPRA	Preferred brand	QL
ANORO ELLIPTA	Preferred brand	QL
azelastine-fluticasone	Generic	QL
benzonatate	Generic	
BREZTRI AEROSPHERE	Preferred brand	QL
BRINSUPRI	Preferred brand	PA; SP; QL
COMBIVENT RESPIMAT	Preferred brand	QL
DUAKLIR PRESSAIR	Not covered	QL

Drug Name	Drug Tier	Notes
FASENRA PEN	Preferred brand	PA; SP; QL
guaifenesin-codeine	Generic	
hydrocod poli-chlorphe poli er	Generic	
hydrocodone bit-homatrop mbr	Generic	
hydromet	Generic	
HYPERSAL	Nonpreferred brand	
ipratropium-albuterol	Generic	
maxi-tuss ac	Generic	
mometasone furoate nasal	Generic	QL
NEBUSAL	Nonpreferred brand	
NUCALA SUBCUTANEOUS SOLUTION AUTO-INJECTOR	Preferred brand	PA; SP; QL
NUCALA SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	Preferred brand	PA; SP; QL
ORALAIR	Nonpreferred brand	PA; QL
potassium iodide (expectorant)	Generic	
promethazine-codeine	Generic	
promethazine-dm	Generic	
pseudoephedrine-bromphen-dm	Generic	
PULMOSAL	Nonpreferred brand	
RYALTRIS	Nonpreferred brand	PA; QL
sodium chloride inhalation	Generic	
SSKI	Nonpreferred brand	
STIOLTO RESPIMAT	Preferred brand	QL
TEZSPIRE SUBCUTANEOUS SOLUTION AUTO-INJECTOR	Preferred brand	PA; SP; QL
TRELEGY ELLIPTA	Preferred brand	QL
TUXARIN ER	Nonpreferred brand	
UMECLIDINIUM-VILANTEROL	Not covered	ABA; QL
Skeletal Muscle Relaxants		
baclofen oral solution	Generic	PA; QL
baclofen oral suspension	Generic	PA; QL
baclofen oral tablet	Generic	
carisoprodol oral	Not covered	
chlorzoxazone oral tablet 250 mg, 375 mg, 750 mg	Not covered	
chlorzoxazone oral tablet 500 mg	Generic	

Drug Name	Drug Tier	Notes
cyclobenzaprine hcl er	Not covered	QL
cyclobenzaprine hcl oral	Generic	
dantrolene sodium oral	Generic	
metaxalone oral tablet 400 mg, 800 mg	Generic	
metaxalone oral tablet 640 mg	Not covered	
methocarbamol oral tablet 1000 mg	Not covered	
methocarbamol oral tablet 500 mg, 750 mg	Generic	
NORGESIC	Not covered	QL
NORGESIC FORTE	Not covered	
ONTRALFY	Not covered	
orphenadrine citrate er	Generic	
orphenadrine-aspirin-caffeine	Not covered	QL
ORPHENGESIC FORTE	Not covered	
tizanidine hcl oral capsule 2 mg, 4 mg, 6 mg	Generic	
tizanidine hcl oral capsule 8 mg	Not covered	
tizanidine hcl oral tablet	Generic	
ZANAFLEX ORAL CAPSULE	Not covered	
Sleep Disorder Agents		
GABA Receptor Modulators		
EDLUAR	Not covered	QL
eszopiclone	Generic	QL
flurazepam hcl	Generic	QL
temazepam	Generic	QL
triazolam	Generic	QL
zaleplon	Generic	QL
zolpidem tartrate er	Generic	QL
ZOLPIDEM TARTRATE ORAL CAPSULE	Not covered	QL
zolpidem tartrate oral tablet	Generic	QL
zolpidem tartrate sublingual	Generic	PA; QL
Sleep Disorders, Other		
BELSOMRA	Nonpreferred brand	ST; QL
DAYVIGO	Nonpreferred brand	ST; QL
doxepin hcl oral tablet	Generic	QL
HETLIOZ LQ	Nonpreferred brand	PA; SP; QL
QUVIVIQ	Nonpreferred brand	ST; QL
ramelteon	Generic	QL

Drug Name	Drug Tier	Notes
tasimelteon	Generic	PA; SP; QL
Wakefulness Promoting Agents		
armodafinil	Generic	QL
LUMRYZ	Nonpreferred brand	PA; SP; QL
LUMRYZ STARTER PACK	Nonpreferred brand	PA; SP; QL
modafinil oral	Generic	QL
sodium oxybate solution 500 mg/ml oral	Generic	PA; SP; QL
sodium oxybate solution 500 mg/ml oral	Generic	PA; ABA; SP; QL
SUNOSI	Nonpreferred brand	PA; QL
WAKIX	Nonpreferred brand	PA; SP; QL
XYWAV	Nonpreferred brand	PA; SP; QL

Index of Drugs

12 hour allergy-d.....	103	ADALIMUMAB-AACF(PS/UV STARTER).....	89	AEROCHAMBER PLUS FLOW VU.....	96
12hr allergy relief.....	103	ADALIMUMAB-AATY (1 PEN)..	89	AEROCHAMBER2GO ANTI-STATIC.....	96
24hr allergy relief.....	103	ADALIMUMAB-AATY (2 PEN)..	89	afirmelle.....	80
abacavir sulfate.....	39	ADALIMUMAB-AATY (2 SYRINGE).....	89	AFLURIA.....	93
abacavir sulfate-lamivudine.....	39	ADALIMUMAB-AATY CD/UC/HS START.....	89	AFLURIA PRESERVATIVE FREE.....	93
abigale.....	80	ADALIMUMAB-ADAZ.....	89	AFREZZA.....	46
abigale lo.....	80	ADALIMUMAB-ADBAM (2 PEN)..	89	AFSTYLA.....	49
ABILIFY ASIMTUFII.....	37	ADALIMUMAB-ADBAM (2 SYRINGE).....	89	aftera.....	86
ABILIFY MAINTENA.....	37	ADALIMUMAB-BWWD.....	89	AGAMREE.....	76
abiraterone acetate.....	29	ADALIMUMAB-FKJP (2 PEN)..	89	AIMOVIG.....	27
abirtega.....	29	ADALIMUMAB-FKJP (2 SYRINGE).....	89	AIRSUPRA.....	109
ABRILADA (1 PEN).....	89	adapalene.....	61	AJOVY.....	27
ABRILADA (2 PEN).....	89	ADAPALENE.....	62	AKEEGA.....	30
ABRILADA (2 SYRINGE).....	89	adapalene-benzoyl peroxide.....	62	AKLIEF.....	62
ABRYSVO.....	93	ADBRY.....	62	AKYNZEO.....	25
ABSORICA LD.....	61	ADDYI.....	58	ALA SCALP.....	76
acamprosate calcium.....	15	adefovir dipivoxil.....	38	ala-cort.....	76
acarbose.....	44	ADEMPAS.....	108	ALAVERT.....	103
ACCRUFER.....	65	ADMELOG.....	46	ALAVERT D-12 HOUR ALLERGY/CONG.....	103
ACCU-CHEK AVIVA PLUS KIT W/DEVICE.....	42	ADMELOG SOLOSTAR.....	46	albendazole.....	34
ACCU-CHEK GUIDE.....	42	ADVAIR HFA.....	106	albuterol sulfate.....	107
ACCU-CHEK GUIDE KIT W/DEVICE.....	42	ADVANTAGE SAFETY LANCETS 28G.....	42	ALBUTEROL SULFATE.....	107
ACCU-CHEK GUIDE TEST STRIPS.....	42	ADVATE.....	49	albuterol sulfate hfa.....	107
ACCU-CHEK SMARTVIEW TEST STRIPS.....	42	ADVOCATE SAFETY LANCETS 21G.....	42	alclometasone dipropionate.....	76
accutane.....	61	ADVOCATE SAFETY LANCETS 23G.....	42	ALECENSA.....	31
acebutolol hcl.....	52	ADVOCATE SAFETY LANCETS 28G.....	42	alendronate sodium.....	95
acetaminophen-codeine.....	14	ADYNOVATE.....	49	alfuzosin hcl er.....	75
acetazolamide.....	55	AEROCHAMBER HOLDING CHAMBER.....	96	ALHEMO.....	49
acetazolamide er.....	55	AEROCHAMBER MINI CHAMBER.....	96	aliskiren fumarate.....	53
acetic acid.....	75, 103	AEROCHAMBER MV.....	96	ALKINDI SPRINKLE.....	76
acetylcysteine.....	109	AEROCHAMBER PLS FLOVU MTHPIECE.....	96	all day allergy d.....	103
acid reducer.....	72	AEROCHAMBER PLUS FLOVU INTERM.....	96	all day allergy-d.....	103
acitretin.....	61	AEROCHAMBER PLUS FLOVU LARGE.....	96	ALLEGRA ALLERGY.....	103
ACTEMRA.....	92	AEROCHAMBER PLUS FLOVU MEDIUM.....	96	ALLEGRA HIVES 24HR.....	103
ACTEMRA ACTPEN.....	92	AEROCHAMBER PLUS FLOVU SMALL.....	96	allergy (cetirizine).....	103
ACTHAR.....	78			allergy 24hour indoor/outdoor.....	103
ACTHAR GEL.....	78			allergy childrens.....	103
ACTHIB.....	93			allergy rel child (cetirizine).....	103
ACTIMMUNE.....	92			allergy rel child (loratadine).....	103
ACUVAIL.....	101			allergy relief.....	104
acyclovir.....	38, 39			allergy relief (cetirizine).....	103
ADACEL.....	93			allergy relief (cetirizine).....	103
ADALIMUMAB-AACF (2 PEN)..	89			allergy relief (cetirizine).....	103
ADALIMUMAB-AACF (2 SYRINGE).....	89			allergy relief cetirizine.....	103
ADALIMUMAB-AACF(CD/UC/HS STRT).....	89			allergy relief childrens.....	103
				allergy relief childrens 24-hr....	103
				allergy relief d.....	103, 104
				allergy relief d12.....	104
				allergy relief d-12.....	104

allergy relief/indoor/outdoor....	104	amlodipine besylate-valsartan..	53	AREXVY.....	93
allergy relief/nasal decongest.	104	amlodipine-atorvastatin.....	53	arformoterol tartrate.....	107
allergy relief-d.....	104	amlodipine-olmesartan.....	54	ARGYLE STERILE SALINE.....	75
allergy/congestion relief.....	104	amlodipine-valsartan-hctz.....	54	ARIKAYCE.....	16
allergy-d 12hr.....	104	ammonium lactate.....	62	aripiprazole.....	37
allergy-d 24hr.....	104	amnesteem.....	62	ARISTADA.....	37
allopurinol.....	27	amoxapine.....	24	ARISTADA INITIO.....	37
ALLZITAL.....	14	amoxicill-clarithro-lansopraz....	69	armodafinil.....	112
almotriptan malate.....	27	amoxicillin.....	18	ARMOUR THYROID.....	87
ALOCRIAL.....	100	amoxicillin-potassium		ARNUITY ELLIPTA.....	106
ALOGLIPTIN BENZOATE.....	44	clavulanate.....	18	ascomp-codeine.....	14
ALOGLIPTIN-METFORMIN		amoxicillin-potassium		asenapine maleate.....	37
HCL.....	44	clavulanate er.....	18	ashlyna.....	80
ALOGLIPTIN-PIOGLITAZONE.	44	amphetamine er.....	57	ASMANEX (120 METERED	
ALORA.....	80	amphetamine sulfate.....	57	DOSES).....	106
alosetron hcl.....	70	amphetamine-		ASMANEX (30 METERED	
ALPHANATE.....	49	dextroamphetamine.....	57	DOSES).....	106
ALPHANINE SD.....	49	amphetamine-		ASMANEX (60 METERED	
alprazolam.....	41	dextroamphetamine er.....	57	DOSES).....	106
alprazolam er.....	41	amphet-dextroamphet 3-bead		ASMANEX HFA.....	106
alprazolam intensol.....	41	er.....	57	aspirin.....	11
alprazolam xr.....	41	ampicillin.....	18	aspirin 81.....	11
ALPROLIX.....	49	AMZEEQ.....	62	aspirin adult low dose.....	11
altafrin.....	100	anagrelide hcl.....	48	aspirin adult low strength.....	11
altavera.....	80	ANALPRAM HC.....	95	aspirin childrens.....	11
ALTRENO.....	62	anastrozole.....	31	aspirin ec adult low dose.....	11
ALTUVIIIO.....	49	ANDEMBRY.....	88	aspirin ec low dose.....	11
ALUNBRIG.....	31	ANGELIQ.....	80	aspirin ec low strength.....	11
ALVAIZ.....	48	ANNOVERA.....	80	aspirin low dose.....	11
ALVESCO.....	106	ANORO ELLIPTA.....	109	aspirin regimen.....	11
alyacen 1/35.....	80	ANUCORT-HC.....	95	aspirin-dipyridamole er.....	50
alyacen 7/7/7.....	80	ANUSOL-HC.....	95	ASTAGRAF XL.....	89
ALYFTREK.....	108	ANZEMET.....	25	atazanavir sulfate.....	40
alyq.....	108	ANZUPGO.....	62	atenolol.....	52
amantadine hcl.....	35	apap-caff-dihydrocodeine.....	14	atenolol-chlorthalidone.....	54
ambrisentan.....	109	APIDRA SOLOSTAR.....	46	atomoxetine hcl.....	58
amcinonide.....	76	APIDRA VIAL.....	46	ATORVALIQ.....	56
amethyst.....	80	APLENZIN.....	22	atorvastatin calcium.....	56
amiloride hcl.....	55	apomorphine hcl.....	36	atovaquone.....	35
amiloride-hydrochlorothiazide..	53	apraclonidine hcl.....	101	atovaquone-proguanil hcl.....	35
aminocaproic acid.....	49	aprepitant.....	25	atropine sulfate.....	100
amiodarone hcl.....	52	apri.....	80	ATROVENT HFA.....	107
amitriptyline hcl.....	24	APTIVUS.....	40	ATTRUBY.....	54
AMJEVITA.....	89	AQNEURSA.....	96	aubra eq.....	80
AMJEVITA-PED 10KG TO		AQUASTAT.....	65	AUGMENTIN.....	18
<15KG SUBCUTANEOUS		AQUASTAT SFR.....	65	AUGTYRO.....	31
SOLUTION PREFILLED		AQVESME.....	48	AURANOFIN.....	92
SYRINGE 10MG/0.2ML.....	89	ARAKODA.....	34	aurovela 1.5/30.....	80
AMJEVITA-PED 15KG TO		aranelle.....	80	aurovela 1/20.....	80
<30KG.....	89	ARANESP (ALBUMIN FREE).....	48	aurovela 24 fe.....	80
amlodipine besylate.....	53	ARAZLO.....	62	aurovela fe 1.5/30.....	80
amlodipine besylate-benazepril		ARBLI.....	51	aurovela fe 1/20.....	81
hcl.....	53	ARCALYST.....	92	AURYXIA.....	66

AUSTEDO.....	58	BD POSIFLUSH.....	65	BLUJEP.....	17
AUSTEDO XR.....	58	BD POSIFLUSH SAFESCRUB.....	65	BONJESTA.....	24
AUSTEDO XR PATIENT TITRATION.....	58	BD ULTRA-FINE INSULIN SYRINGES.....	96	BONSITY.....	95
AUVELITY.....	22	BD ULTRA-FINE PEN NEEDLES.....	96	BOOSTRIX.....	93
AUVI-Q.....	107	BD VEO INSULIN SYR ULTRAFINE.....	96	bosentan.....	109
avanafil.....	75	BELBUCA.....	13	BOSULIF.....	31, 32
AVERI.....	81	belladonna alkaloids-opium.....	69	BRAFTOVI.....	32
aviane.....	81	BELSOMRA.....	111	BREATHE COMFORT CHAMBER/ADULT.....	96
AVMAPKI FAKZYNJA CO- PACK.....	31	benazepril hcl.....	51	BREATHE COMFORT CHAMBER/CHILD.....	96
AVONEX PEN.....	59	benazepril-hydrochlorothiazide.....	54	BREATHE EASE LARGE.....	97
AVONEX PREFILLED.....	59	BENEFIX.....	49	BREATHE EASE MEDIUM.....	97
AVTOZMA.....	92	BENLYSTA.....	92	BREATHE EASE SMALL.....	97
ayuna.....	81	BENZNIDAZOLE.....	35	BREATHERITE VALVED MDI CHAMBER.....	97
AYVAKIT.....	31	benzonatate.....	109	BREKIYA.....	27
AZASITE.....	100	benzoyl peroxide-erythromycin.....	62	BRENZAVVY.....	44
azathioprine.....	89	benzphetamine hcl.....	58	BREO ELLIPTA.....	106
azelaic acid.....	62	benztropine mesylate.....	35	breyana.....	106
azelastine hcl.....	100, 104	bepotastine besilate.....	100	BREZTRI AEROSPHERE.....	109
azelastine-fluticasone.....	109	BESIFLOXACIN HCL.....	102	briellyn.....	81
AZELEX.....	62	BESIVANCE.....	102	brimonidine tartrate.....	101
AZESCO.....	67	BESREMI.....	30	brimonidine tartrate-timolol.....	101
azithromycin.....	18	betaine.....	73	BRINSUPRI.....	109
AZMIRO.....	80	betamethasone dipropionate.....	76	brinzolamide.....	101
AZSTARYS.....	58	betamethasone dipropionate aug.....	76	brivaracetam.....	20
azurette.....	81	betamethasone valerate.....	76	bromfenac sodium.....	101
bac (butalbital-acetamin-caff).....	14	BETASERON.....	59	bromfenac sodium (once-daily)	101
bacitracin.....	99	betaxolol hcl.....	52, 101	bromocriptine mesylate.....	36
bacitracin-polymyxin b.....	99	bethanechol chloride.....	75	BRONCHITOL.....	108
bacitra-neomycin-polymyxin-hc.....	99	BETOPTIC-S.....	101	BRONCHITOL TOLERANCE TEST.....	108
baclofen.....	110	BEVESPI AEROSPHERE.....	106	BRUKINSA.....	32
BAFIERTAM.....	59	BEXAGLIFLOZIN.....	44	BRYHALI.....	76
balsalazide disodium.....	94	bexarotene.....	34	BRYNOVIN.....	44
BALVERSA.....	31	BEXSERO.....	93	BUCAPSOL.....	41
balziva.....	81	BEYFORTUS.....	92	budesonide.....	95, 106
BAQSIMI ONE PACK.....	45	bicalutamide.....	29	budesonide er.....	95
BAQSIMI TWO PACK.....	45	BIJUVA.....	81	budesonide-formoterol fumarate.....	106
BARACLUDE.....	38	BIKTARVY.....	39	bumetanide.....	55
BASAGLAR KWIKPEN.....	46	BILTRICIDE.....	34	buprenorphine.....	13
BAXDELA.....	18	bimatoprost.....	102	buprenorphine hcl.....	15
BD AUTOSHIELD DUO PEN NEEDLES.....	96	BIMZELX.....	62	buprenorphine hcl-naloxone hcl.....	15
BD PEN NEEDLE MICRO ULTRAFINE.....	96	BINOSTO.....	95	bupropion hcl.....	23
BD PEN NEEDLE MINI ULTRAFINE.....	96	bis subcit-metronid-tetracyc.....	69	bupropion hcl er (smoking det).....	16
BD PEN NEEDLE NANO ULTRAFINE.....	96	bisacodyl ec.....	71	bupropion hcl er (sr).....	22
BD PEN NEEDLE ORIG ULTRAFINE.....	96	bismuth/metronidaz/tetracyclin.....	69	bupropion hcl er (xl).....	22
BD PEN NEEDLE SHORT ULTRAFINE.....	96	bisoprolol fumarate.....	52	BUPROPION HCL ER (XL).....	23
		bisoprolol-hydrochlorothiazide.....	54	buspirone hcl.....	41
		blisovi 24 fe.....	81		
		blisovi fe 1.5/30.....	81		
		blisovi fe 1/20.....	81		

butalbital-acetaminophen.....	14	carvedilol phosphate er.....	52	cimetidine hcl.....	70
butalbital-apap-caff-cod.....	14	CAVERJECT.....	75	CIMZIA (1 SYRINGE).....	89
butalbital-apap-caffeine.....	14	CAVERJECT IMPULSE.....	75	CIMZIA (2 SYRINGE).....	89
butalbital-asa-caff-codeine.....	14	CAYA.....	97	CIMZIA-STARTER.....	89
butalbital-aspirin-caffeine.....	14	CAYSTON.....	108	cinacalcet hcl.....	95
butorphanol tartrate.....	14	cefaclor.....	18	CIPRO.....	19
BYLVAY.....	60	cefaclor er.....	18	ciprofloxacin hcl.....	19, 102, 103
BYLVAY (PELLETS).....	60	cefadroxil.....	18	ciprofloxacin-dexamethasone.....	103
BYNFEZIA PEN.....	88	cefdinir.....	18	CIPROFLOXACIN- FLUOCINOLONE PF.....	103
cabergoline.....	78	cefixime.....	18	ciprofloxacin-hydrocortisone... ..	103
CABLIVI.....	50	CEFIXIME.....	18	CITALOPRAM HYDROBROMIDE.....	23
CABOMETYX.....	32	cefpodoxime proxetil.....	18	citalopram hydrobromide.....	23
CABTREEO.....	62	cefprozil.....	18	citroma.....	71
caffeine citrate.....	59	cefuroxime axetil.....	18	cladribine (10 tabs).....	59
calcipotriene.....	62	celecoxib.....	11	cladribine (4 tabs).....	59
CALCIPOTRIENE.....	62	cephalexin.....	18	cladribine (5 tabs).....	59
calcipotriene-betameth diprop... ..	62	CEQUA.....	100	cladribine (6 tabs).....	60
calcitonin (salmon).....	95	CEQUR SIMPLICITY 2U 10PK.....	42	cladribine (7 tabs).....	60
calcitriol.....	62, 95	CEQUR SIMPLICITY INSERTER.....	42	cladribine (8 tabs).....	60
calcium acetate.....	67	CERDELGA.....	73	cladribine (9 tabs).....	60
calcium acetate (phos binder)... ..	66	cetirizine hcl.....	104	claravis.....	62
CALQUENCE.....	32	cetirizine hcl childrens alrgy... ..	104	CLARINEX-D 12 HOUR.....	104
camila.....	86	cetirizine-pseudoephedrine er.....	104	clarithromycin.....	18
camrese.....	81	cetorelix acetate.....	88	clarithromycin er.....	18
camrese lo.....	81	cevimeline hcl.....	60	CLARITIN.....	104
CAMZYOS.....	54	charlotte 24 fe.....	81	CLARITIN CHILDRENS.....	104
candesartan cilexetil.....	51	chateal eq.....	81	CLARITIN REDITABS.....	104
candesartan cilexetil-hctz.....	54	CHEMET.....	66	CLARITIN REDITABS JUNIORS.....	104
capecitabine.....	30	chlordiazepoxide hcl.....	41	clearax.....	71
CAPLYTA.....	37	chlordiazepoxide-amitriptyline... ..	23	clemastine fumarate.....	104
CAPRELSA.....	32	chlordiazepoxide-clidinium.....	69	CLENPIQ.....	71
captopril.....	51	chlorhexidine gluconate.....	61	CLEOCIN.....	17
captopril-hydrochlorothiazide... ..	54	chloroquine phosphate.....	35	CLEVER CHOICE COMFORT EZ.....	42
CAPVAXIVE.....	93	chlorpromazine hcl.....	36	CLEVER CHOICE HOLDING CHAMBER.....	97
carbamazepine.....	21	chlorthalidone.....	55	CLIMARA.....	81
carbamazepine er.....	21	chlorzoxazone.....	110	CLIMARA PRO.....	81
carbidopa.....	36	CHOLBAM.....	73	clindacin.....	62
carbidopa-levodopa.....	36	cholestyramine.....	56	clindacin etz.....	62
CARBIDOPA-LEVODOPA ER... ..	36	cholestyramine light.....	56	clindacin-p.....	62
carbidopa-levodopa er.....	36	CHORIONIC GONADOTROPIN.....	78	clindamycin hcl.....	17
carbidopa-levodopa- entacapone.....	35	CHOSEN LANCETS 30G.....	42	clindamycin palmitate hcl.....	17
carbinoxamine maleate.....	104	CHOSEN SAFETY LANCETS 28G.....	42	clindamycin phos (once-daily)... ..	62
CARBINOXAMINE MALEATE ER.....	104	CIBINQO.....	62	clindamycin phos (twice-daily).. ..	62
CARDAMYST.....	53	ciclodan.....	25	clindamycin phosphate.....	17, 62, 63
CARDURA XL.....	75	ciclopirox.....	25	clindamycin phosphate- benzoyl peroxide.....	62
CARESENS LANCETS 30G.....	42	ciclopirox olamine.....	25	clindamycin-tretinoin.....	63
carglumic acid.....	65	cilostazol.....	50	CLINDESSE.....	17
carisoprodol.....	110	CILOXAN.....	102		
carteolol hcl.....	101	CIMDUO.....	39		
cartia xt.....	53	cimetidine.....	70		
carvedilol.....	52				

CLINPRO 5000.....	61	CONTOUR NEXT EZ KIT		CYCLOMYDRIL.....	100
clobazam.....	20	W/DEVICE.....	42	cyclopentolate hcl.....	100
clobetasol prop emollient base.	76	CONTOUR NEXT GEN		cyclophosphamide.....	29
CLOBETASOL PROPIONATE		MONITOR KIT W/DEVICE.....	42	CYCLOPHOSPHAMIDE.....	29
.....	76, 101	CONTOUR NEXT GEN TEST		cycloserine.....	28
clobetasol propionate.....	76	STRIPS.....	42	CYCLOSET.....	44
clobetasol propionate e.....	76	CONTOUR NEXT MONITOR		cyclosporine.....	89, 100
clobetasol propionate emulsion	76	KIT W/DEVICE.....	42	cyclosporine modified.....	89
clocortolone pivalate.....	76	CONTOUR NEXT ONE KIT.....	42	CYLTEZO (2 PEN).....	89
clodan.....	76	CONTOUR PLUS TEST		CYLTEZO (2 SYRINGE).....	89
clomid.....	79	STRIP.....	42	cyproheptadine hcl.....	104
clomiphene citrate.....	79	CONTOUR TEST STRIPS.....	42	cyred eq.....	81
clomipramine hcl.....	24	CONTRAVE.....	59	CYSTADROPS.....	100
clonazepam.....	41	CONZIP.....	13	CYSTAGON.....	73
clonidine.....	51	COPIKTRA.....	30	CYSTARAN.....	100
CLONIDINE ER.....	51	CORDRAN.....	76	dabigatran etexilate mesylate...	48
clonidine hcl.....	51	CORIFACT.....	49	dalfampridine er.....	60
clonidine hcl er.....	58	CORLANOR.....	54	danazol.....	80
clopidogrel bisulfate.....	50	CORPHENA.....	104	dantrolene sodium.....	111
clorazepate dipotassium.....	41	CORTIFOAM.....	95	DANZITEN.....	32
clotrimazole.....	25	CORTISONE ACETATE.....	76	DAPAGLIFLOZIN PRO-	
clotrimazole-betamethasone.....	25	CORTISPORIN-TC.....	103	METFORMIN ER.....	44
clozapine.....	38	CORTROPHIN.....	78	DAPAGLIFLOZIN	
COAGADEX.....	49	CORTROPHIN GEL.....	78	PROPANEDIOL.....	44
COARTEM.....	35	COSENTYX (300 MG DOSE)...	63	dapsone.....	28, 63
COBENFY.....	38	COSENTYX 150 MG/ML.....	63	DAPTACEL.....	93
COBENFY STARTER PACK....	38	COSENTYX SENSOREADY		darifenacin hydrobromide er....	74
codeine sulfate.....	14	(300 MG).....	63	darunavir.....	40
colchicine.....	27	COSENTYX SENSOREADY		dasatinib.....	32
colchicine-probenecid.....	27	PEN.....	63	dasetta 1/35 (28).....	81
colesevelam hcl.....	56	COSENTYX UNOREADY.....	63	dasetta 7/7/7.....	81
colestipol hcl.....	56	COTELLIC.....	32	DAURISMO.....	32
COMBIPATCH.....	81	COTEMPLA XR-ODT.....	58	DAWNZERA.....	88
COMBIVENT RESPIMAT.....	109	COVARYX.....	81	DAYBUE.....	59
COMBOGESIC.....	11	COVARYX HS.....	81	DAYBUE STIX.....	59
COMETRIQ.....	32	COXANTO.....	11	daysee.....	81
COMFORT TOUCH TWIST		CRENESSITY.....	78	DAYVIGO.....	111
LANCET 30G.....	42	CREON.....	73	deblitane.....	86
COMIRNATY.....	93	CRESEMBA.....	25	deferasirox.....	66
COMIRNATY 5-11 YEARS.....	93	CREXONT.....	36	deferasirox granules.....	66
COMPACT SPACE		CRINONE.....	86	deferiprone.....	66
CHAMBER.....	97	cromolyn sodium.....	69, 100, 108	deferoxamine mesylate.....	97
COMPACT SPACE		CROTAN.....	35	deflazacort.....	76
CHAMBER/LG MASK.....	97	cryselle.....	81	DELSTRIGO.....	39
COMPACT SPACE		CTEXLI.....	69	delyla.....	81
CHAMBER/MED MASK.....	97	CURITY STERILE SALINE.....	75	demeclocycline hcl.....	19
COMPACT SPACE		CUTAQUIG.....	91	DENGVAXIA.....	93
CHAMBER/SM MASK.....	97	CUVITRU.....	91	DENTA 5000 PLUS.....	61
CONCERTA.....	58	CUVRIOR.....	66	DENTA 5000 PLUS	
CONDOMS.....	97	cyanocobalamin.....	67	SENSITIVE.....	61
CONJUPRI.....	53	cyclobenzaprine hcl.....	111	DENTAGEL.....	61
constulose.....	71	cyclobenzaprine hcl er.....	111	DEPO-ESTRADIOL.....	81
		CYCLOGYL.....	100	DEPO-SUBQ PROVERA 104... 86	

DERMACINRX PRETRATE.....	67	diltiazem hcl.....	53	DUOPA.....	36
DESCOVY.....	39, 40	diltiazem hcl er.....	53	DUPIXENT.....	63
desipramine hcl.....	24	diltiazem hcl er beads.....	53	DUREX EXTRA SENSITIVE	
DES LorATADINE.....	104	diltiazem hcl er coated beads...	53	THIN.....	97
desloratadine.....	104	dilt-xr.....	53	DUREX TROPICAL.....	97
desmopressin ace spray refig..	78	dimethyl fumarate.....	60	dutasteride.....	75
desmopressin acetate.....	78	dimethyl fumarate starter pack..	60	dutasteride-tamsulosin hcl.....	75
desmopressin acetate pf.....	79	DIPENTUM.....	94	DUVYZAT.....	73
desmopressin acetate spray.....	79	diphenhydramine hcl.....	104	DYANAVEL XR.....	57
desogestrel-ethinyl estradiol....	81	diphenoxylate-atropine.....	70	E.E.S. 400.....	18
desonide.....	76	dipyridamole.....	50	EASIVENT.....	97
desoximetasone.....	76	disopyramide phosphate.....	52	EBGLYSS.....	63
DESVENLAFAXINE ER.....	23	disulfiram.....	15	econazole nitrate.....	25
desvenlafaxine succinate er.....	23	DIURIL.....	55	ECONAZOLE NITRATE.....	25
dexamethasone.....	76	divalproex sodium.....	42	econtra one-step.....	86
dexamethasone intensol.....	76	divalproex sodium er.....	42	ECOZA.....	25
dexamethasone sodium		DOBUTAMINE-DEXTROSE.....	54	EDARBI.....	51
phosphate.....	101	dofetilide.....	52	EDARBYCLOR.....	54
DEXCOM G6 RECEIVER.....	42	DOJOLVI.....	97	EDEX (2 CARTRIDGE).....	75
DEXCOM G6 SENSOR.....	42	dolishale.....	81	EDEX (6 CARTRIDGE).....	75
DEXCOM G6 TRANSMITTER..	42	DOLOBID.....	11	EDLUAR.....	111
DEXCOM G7 15 DAY		donepezil hcl.....	22	EDURANT PED.....	39
SENSOR.....	43	DOPTelet.....	48	EEMT.....	81
DEXCOM G7 RECEIVER.....	43	DOPTelet SPRINKLE.....	48	EEMT HS.....	81
DEXCOM G7 SENSOR.....	43	DORYX MPC.....	19	efavirenz.....	39
dexlansoprazole.....	72	dorzolamide hcl.....	101	efavirenz-emtricitab-tenofo df...	39
dexmethylphenidate hcl.....	58	dorzolamide hcl-timolol mal....	101	efavirenz-lamivudine-tenofovir..	39
dexmethylphenidate hcl er.....	58	dorzolamide hcl-timolol mal pf	101	EFFER-K.....	65
dextroamphetamine sulfate.....	57	dotti.....	81	effer-k.....	65
dextroamphetamine sulfate er..	57	DOVATO.....	39	EGRIFTA SV.....	79
DHIVY.....	36	doxazosin mesylate.....	51	EGRIFTA WR.....	79
DIACOMIT.....	20	doxepin hcl.....	24, 63, 111	EKTERLY.....	88
diazepam.....	20, 41	doxercalciferol.....	95	ELEPSIA XR.....	20
diazepam intensol.....	41	doxycycline.....	63	ELESTRIN.....	81
diazoxide.....	45	doxycycline hyclate.....	19	eletriptan hydrobromide.....	27
dichlorphenamide.....	55	doxycycline monohydrate.....	19	elinest.....	81
DICLOFENAC PATCH 1.3%....	11	doxylamine-pyridoxine.....	24	ELIQUIS.....	48
diclofenac potassium.....	11	DRIZALMA SPRINKLE.....	23	ELIQUIS (1.5 MG PACK).....	48
diclofenac potassium(migraine)	27	dronabinol.....	25	ELIQUIS (2 MG PACK).....	48
diclofenac sodium.....	11, 30, 101	DROPSAFE ACTI-LANCE		ELIQUIS DVT/PE STARTER	
diclofenac sodium er.....	11	23G.....	43	PACK.....	48
diclofenac-misoprostol.....	11	DROPSAFE MEDLANCE		ELITE-OB.....	67
dicloxacin sodium.....	18	LANCET 30G.....	43	elixophyllin.....	108
dicyclomine hcl.....	69	drospiren-eth estrad-levomefol.	81	ELLA.....	86
diethylpropion hcl.....	59	drospirenone-ethinyl estradiol...	81	ELMIRON.....	75
diethylpropion hcl er.....	59	DROXIA.....	30	ELOCTATE.....	49
DIFICID.....	18	droxidopa.....	54	eltrombopag olamine.....	48
diflorasone diacetate.....	76	DRYSOL.....	63	eluryng.....	82
diflunisal.....	11	DUAKLIR PRESSAIR.....	109	ELYXYB.....	11
difluprednate.....	101	DUAVEE.....	81	EMBRIVA.....	67
digoxin.....	54	DULERA.....	106	EMEND.....	25
dihydroergotamine mesylate.....	27	duloxetine hcl.....	23	EMGALITY.....	27
DILANTIN.....	21	DUOBRII.....	63	EMPAVELI.....	47

EMROSI.....	63	ERZOFRI.....	37	FC2 FEMALE CONDOM.....	97
EMSAM.....	23	ESCITALOPRAM OXALATE....	23	febuxostat.....	27
emtricitabine.....	40	escitalopram oxalate.....	23	FEIBA.....	49
emtricitabine-tenofovir df.....	40	eslicarbazepine acetate.....	21	feirza 1.5/30.....	82
emtricitab-rilpivir-tenofov df.....	39	esomeprazole magnesium.....	72	feirza 1/20.....	82
EMTRIVA.....	40	ESPEROCT.....	49	felbamate.....	21
EMVERM.....	34	est estrogens-methyltest.....	82	felodipine er.....	53
emzahn.....	86	est estrogens-methyltest ds.....	82	FEMCAP.....	97
enalapril maleate.....	51	est estrogens-methyltest hs.....	82	FEMLYV.....	82
enalapril-hydrochlorothiazide....	54	estarylla.....	82	FEMRING.....	82
ENBRACE HR.....	67	estazolam.....	41	fenofibrate.....	56
ENBREL.....	89	estradiol.....	82	fenofibrate micronized.....	55
ENBREL MINI.....	89	estradiol valerate.....	82	fenofibric acid.....	56
ENBREL SURECLICK.....	89	estradiol-norethindrone acet.....	82	fenopropfen calcium.....	11
ENBUMYST.....	55	ESTRATEST H.S.....	82	FENOPRON.....	11
endocet.....	14	ESTRING.....	82	fentanyl.....	13
ENFLONIA.....	92	estrogens conjugated.....	82	ferric citrate.....	67
ENGERIX-B.....	93	eszopiclone.....	111	FERRIC CITRATE.....	67
enilloring.....	82	ethacrynic acid.....	55	FERRIPROX.....	66
enoxaparin sodium.....	48	ethambutol hcl.....	28	FERRIPROX TWICE-A-DAY....	66
ENSACOVE.....	32	ethosuximide.....	20	fesoterodine fumarate er.....	74
enskyce.....	82	ethynodiol diac-eth estradiol....	82	FETZIMA.....	23
ENSPRYNG.....	92	etodolac.....	11	FETZIMA TITRATION.....	23
ENSTILAR.....	63	etodolac er.....	11	fexofenadine hcl.....	105
entacapone.....	35	etonogestrel-ethinyl estradiol....	82	fexofenadine-pseudoephed er	105
ENTADFI.....	75	etoposide.....	31	FIASP.....	46
entecavir.....	38	etravirine.....	39	FIASP FLEXTOUCH.....	46
ENTRESTO.....	54	EUCRISA.....	63	FIASP PENFILL.....	46
ENTYVIO PEN.....	92	EULEXIN.....	29	FIASP PUMPCART.....	46
enulose.....	71	EVAMIST.....	82	fidaxomicin.....	18
ENVARBUS XR.....	89	everolimus.....	32, 90	FILSPARI.....	75
EOHILIA.....	95	EVEXITHROID.....	87	FILSUVEZ.....	63
EPCLUSA.....	38	EVOTAZ.....	40	FINACEA.....	63
EPIDIOLEX.....	20	EVRYSDI.....	73	finasteride.....	75
EPIFOAM.....	63	EXELDERM.....	26	fingolimod hcl.....	60
epinastine hcl.....	100	exemestane.....	31	FINTEPLA.....	20
epinephrine.....	108	EXENATIDE.....	44	finzala.....	82
eplerenone.....	55	EXXUA.....	23	FIRDAPSE.....	97
EPOGEN.....	48	EXXUA TITRATION PACK.....	23	FLAREX.....	101
EPSOLAY.....	63	EYSUVIS.....	101	flavoxate hcl.....	74
EQUETRO.....	42	EZALLOR SPRINKLE.....	56	flecainide acetate.....	52
ergocalciferol.....	67	ezetimibe.....	56	FLECTOR.....	11
ERGOMAR.....	27	ezetimibe-simvastatin.....	56	FLEXICHAMBER.....	97
ergotamine-caffeine.....	27	FABHALTA.....	47	FLOLIPID.....	56
ERIVEDGE.....	32	falmina.....	82	FLUAD.....	93
ERLEADA.....	29	famciclovir.....	39	FLUARIX.....	93
erlotinib hcl.....	32	famotidine.....	70	FLUBLOK.....	93
errin.....	86	FANAPT.....	37	FLUCELVAX.....	93
ERTACZO.....	25	FANAPT TITRATION PACK A..	37	fluconazole.....	26
ERY PAD 2%.....	63	FANAPT TITRATION PACK B..	37	flucytosine.....	26
erythromycin.....	18, 63, 100	FANAPT TITRATION PACK C. 37		fludrocortisone acetate.....	77
erythromycin base.....	18	FARXIGA.....	44	FLULAVAL.....	93
erythromycin ethylsuccinate.....	18	FASENRA PEN.....	110	FLUMIST.....	93

flunisolide.....	106	fosinopril sodium-hctz.....	54	FYLNETRA.....	48
fluocinolone acetonide.....	77, 103	FOSRENOL.....	67	gabapentin.....	20
fluocinolone acetonide body.....	77	FOTIVDA.....	32	gabapentin (once-daily).....	59
fluocinolone acetonide scalp.....	77	FRAGMIN.....	48	GABARONE.....	20
fluocinonide.....	77	FREESTYLE LIBRE 14 DAY		GALAFOLD.....	73
fluocinonide emulsified base.....	77	READER.....	43	galantamine hydrobromide.....	22
FLUORIDEX.....	61	FREESTYLE LIBRE 14 DAY		galantamine hydrobromide er... 22	
FLUORIDEX ENHANCED		SENSOR.....	43	galbriela.....	82
WHITENING.....	61	FREESTYLE LIBRE 2 PLUS		gallifrey.....	86
FLUORIMAX 5000.....	61	SENSOR.....	43	GALZIN.....	65
FLUORIMAX 5000 SENSITIVE	61	FREESTYLE LIBRE 2		GAMMAGARD.....	91
fluorometholone.....	101	READER.....	43	GAMMAGARD ERC.....	91
FLUOROURACIL.....	30	FREESTYLE LIBRE 2		GAMMAKED.....	91
fluorouracil.....	30	SENSOR.....	43	GAMUNEX-C.....	91
fluoxetine hcl.....	23	FREESTYLE LIBRE 3 PLUS		ganirelix acetate.....	88
fluoxetine hcl (pmdd).....	23	SENSOR.....	43	GARDASIL 9.....	93
fluphenazine decanoate.....	36	FREESTYLE LIBRE 3		gatifloxacin.....	102
fluphenazine hcl.....	36	READER.....	43	GATTEX.....	70
flurandrenolide.....	77	FREESTYLE LIBRE 3		gavilax.....	71
flurazepam hcl.....	111	SENSOR.....	43	gavilyte-c.....	71
flurbiprofen.....	11	FREESTYLE LIBRE READER..	43	gavilyte-g.....	71
flurbiprofen sodium.....	102	frovatriptan succinate.....	27	gavilyte-n with flavor pack.....	71
FLUTICASONE FUROATE		FRUZAQLA.....	32	GAVRETO.....	32
ELLIPTA.....	106	ft all day allergy.....	105	gefitinib.....	32
FLUTICASONE FUROATE-		ft all day allergy 24 hour.....	105	gemfibrozil.....	56
VILANTEROL.....	106	ft all day allergy childrens.....	105	gemmily.....	82
fluticasone propionate.....	77, 106	ft all day allergy relief.....	105	GEMTESA.....	74
FLUTICASONE PROPIONATE		ft all day allergy-d.....	105	generlac.....	71
DISKUS.....	106	ft allergy & congestion-d 12hr.	105	gengraf.....	90
FLUTICASONE PROPIONATE		ft allergy childrens.....	105	GENOTROPIN.....	79
HFA.....	106	ft allergy d-12 hour.....	105	GENOTROPIN MINIQUICK.....	79
FLUTICASONE-		ft allergy relief.....	105	gentamicin sulfate.....	16, 99
SALMETEROL.....	106, 107	ft allergy relief 12 hour.....	105	gentle laxative.....	71
fluticasone-salmeterol.....	106	ft allergy relief 24 hour.....	105	GENVOYA.....	39
fluvastatin sodium.....	56	ft allergy relief cetirizine.....	105	GESTYRA.....	67
fluvastatin sodium er.....	56	ft allergy relief childrens.....	105	GILENYA.....	60
fluvoxamine maleate.....	23	ft allergy relief-d.....	105	GILOTRIF.....	32
fluvoxamine maleate er.....	23	ft aspirin.....	12	GIMOTI.....	24
FLUZONE.....	93	ft aspirin low dose.....	12	GLASSIA.....	73
FLUZONE HIGH-DOSE.....	93	ft clearlax.....	71	glatiramer acetate.....	60
FML FORTE.....	102	ft folic acid.....	67	glatopa.....	60
folate.....	67	ft laxative.....	71	glimepiride.....	44
FOLATEXCEL.....	67	ft magnesium citrate.....	71	glipizide er.....	44
folic acid.....	67	ft milk of magnesia.....	71	glipizide ir.....	44
FOLLISTIM AQ.....	79	ft naloxone hcl.....	16	glipizide-metformin hcl.....	44
fondaparinux sodium.....	48	ft nicotine.....	16	GLOPERBA.....	27
FONDCIRCLE SINGLE USE		ft nicotine mini.....	16	glucagon emergency kit.....	45
LANCETS.....	43	ft omeprazole.....	72	GLUCAGON EMERGENCY	
formoterol fumarate.....	108	FULPHILA.....	48	KIT.....	45
FOSAMAX PLUS D.....	95	fulvestrant.....	29	glyburide.....	44
fosamprenavir calcium.....	40	FUROSCIX.....	55	glyburide-metformin.....	44
fosfomycin tromethamine.....	17	furosemide.....	55	GLYCATE.....	69
fosinopril sodium.....	51	fyavolv.....	82	glycerol phenylbutyrate.....	73

glycolax.....	71	heparin sodium (porcine).....	48	HYDROCORTISONE
glycopyrrolate.....	69	heparin sodium (porcine) +rfid..	48	ACETATE.....
GLYCOPYRROLATE.....	69	heparin sodium (porcine) pf.....	48	hydrocortisone acetate.....
glydo.....	15	HEPLISAV-B.....	93	hydrocortisone butyrate.....
GLYXAMBI.....	44	her style.....	86	hydrocortisone sod suc (pf).....
GOCOVRI.....	35	HERNEXEOS.....	32	hydrocortisone valerate.....
GOMEKLI.....	32	HETLIOZ LQ.....	111	hydrocortisone-acetic acid.....
GONAL-F.....	79	HIBERIX.....	93	hydrocort-pramoxine (perianal).....
GONAL-F RFF REDIRECT.....	79	HIDEX 6-DAY.....	77	hydromet.....
goodsense all day allergy-d....	105	HIZENTRA.....	91	hydromorphone hcl.....
goodsense aller-ease.....	105	HOMATROPAIRE.....	100	hydromorphone hcl er.....
goodsense allergy relief child..	105	HORIZANT.....	59	hydroxocobalamin acetate.....
goodsense aspirin low dose.....	12	HULIO (2 PEN).....	90	hydroxychloroquine sulfate.....
goodsense milk of magnesia....	71	HULIO (2 SYRINGE).....	90	HYDROXYM.....
goodsense nicotine.....	16	HUMALOG.....	46	hydroxyurea.....
goodsense nicotine policrix.....	16	HUMALOG KWIKPEN.....	46	hydroxyzine hcl.....
granisetron hcl.....	25	HUMALOG MIX 50/50		hydroxyzine pamoate.....
GRANIX.....	48	KWIKPEN.....	46	HYFTOR.....
GRASTEK.....	97	HUMALOG MIX 75/25		HYMPAVZI.....
griseofulvin microsize.....	26	KWIKPEN.....	46	hyoscyamine sulfate.....
griseofulvin ultramicrosize.....	26	HUMALOG MIX 75/25 VIAL.....	46	hyoscyamine sulfate er.....
guaifenesin-codeine.....	110	HUMALOG U-100 JUNIOR		hyoscyamine sulfate sl.....
guanfacine hcl.....	51	KWIKPEN.....	46	hyosyne.....
guanfacine hcl er.....	58	HUMATE-P.....	50	HYPERSAL.....
GVOKE HYPOPEN 1-PACK.....	45	HUMATIN.....	16	HYQVIA.....
GVOKE HYPOPEN 2-PACK.....	46	HUMATROPE.....	79	HYRIMOZ.....
GVOKE KIT.....	46	HUMIRA (2 PEN).....	90	HYRIMOZ-CROHNS/UC
GVOKE PFS.....	46	HUMIRA (2 SYRINGE).....	90	STARTER.....
GYNAZOLE-1.....	26	HUMIRA-CD/UC/HS		HYRIMOZ-PED<40KG
habitrol.....	16	STARTER.....	90	CROHN STARTER.....
HADLIMA.....	90	HUMIRA-PSORIASIS/UEIT		HYRIMOZ-PED>=40KG
HADLIMA PUSH TOUCH.....	90	STARTER.....	90	CROHN START.....
HAEGARDA.....	88	HUMULIN 70/30 KWIKPEN.....	46	HYRIMOZ-PLAQ
hailey 1.5/30.....	82	HUMULIN 70/30 VIAL.....	46	PSOR/UEIT START.....
hailey 24 fe.....	82	HUMULIN N KWIKPEN.....	46	HYRIMOZ-PLAQUE
hailey fe 1.5/30.....	82	HUMULIN N VIAL.....	46	PSORIASIS START.....
hailey fe 1/20.....	82	HUMULIN R U-500 KWIKPEN..	46	HYRNUO.....
halcinonide.....	77	HUMULIN R VIAL.....	46	ibandronate sodium.....
halobetasol propionate.....	77	HYCAMTIN.....	31	IBRANCE.....
haloperidol.....	36	hydralazine hcl.....	57	IBSRELA.....
haloperidol decanoate.....	36	hydrochlorothiazide.....	55	IBTROZI.....
haloperidol lactate.....	36	hydrocod poli-chlorphe poli er.	110	ibuprofen.....
HARLIKU.....	73	hydrocodone bitartrate er.....	13	ibuprofen-famotidine.....
HARVONI.....	38	hydrocodone bit-homatrop mbr		icatibant acetate.....
HAVRIX.....	93	110	iclevia.....
healthylax.....	71	hydrocodone-acetaminophen...	14	ICLUSIG.....
heather.....	86	hydrocodone-ibuprofen.....	14	icosapent ethyl.....
HEMADY.....	77	hydrocortisone.....	77, 95	IDELVION.....
HEMANGEOL.....	52	HYDROCORTISONE.....	77	IDHIFA.....
HEMICLOR.....	55	hydrocortisone (perianal).....	95	ILEVRO.....
HEMLIBRA.....	49	hydrocortisone ace-pramoxine		imatinib mesylate.....
HEMMOREX-HC.....	95	63, 95	IMBRUVICA.....
HEMOFIL M.....	50			IMCIVREE.....

imipramine hcl.....	24	INZIRQO.....	55	juleber.....	83
imipramine pamoate.....	24	iodine strong.....	65	JULUCA.....	39
imiquimod.....	63	IOPIDINE.....	101	junel 1.5/30.....	83
imiquimod pump.....	63	IPOL.....	93	junel 1/20.....	83
IMITREX STATDOSE REFILL..	27	ipratropium bromide.....	107	junel fe 1.5/30.....	83
IMITREX STATDOSE		ipratropium-albuterol.....	110	junel fe 1/20.....	83
SYSTEM.....	28	IQIRVO.....	70	junel fe 24.....	83
IMKELDI.....	32	irbesartan.....	51	JUST RIGHT 5000.....	61
IMPAVIDO.....	35	irbesartan-hydrochlorothiazide..	54	JUXTAPID.....	56
IMPOYZ.....	77	ISENTRESS.....	39	JYLAMVO.....	90
IMULDOSA.....	90	ISENTRESS HD.....	39	JYNNEOS.....	93
IMVEXXY MAINTENANCE		isibloom.....	82	kaitlib fe.....	83
PACK.....	82	isoniazid.....	28	KALETRA.....	40
IMVEXXY STARTER PACK.....	82	isosorb dinitrate-hydralazine.....	54	kalliga.....	83
INBRIJA.....	36	isosorbide dinitrate.....	57	KALYDECO.....	108
incassia.....	86	isosorbide mononitrate.....	57	KAPSPARGO SPRINKLE.....	52
INCRELEX.....	79	isosorbide mononitrate er.....	57	KARBINAL ER.....	105
INCRUSE ELLIPTA.....	107	isotretinoin.....	63	kariva.....	83
indapamide.....	55	isradipine.....	53	KATERZIA.....	53
INDERAL XL.....	52	ISTURISA.....	79	kelnor 1/35.....	83
indomethacin.....	12	ITOVEBI.....	33	KERENDIA.....	97
INDOMETHACIN.....	12	itraconazole.....	26	KESIMPTA.....	60
indomethacin er.....	12	ivabradine hcl.....	54	ketoconazole.....	26
INFANRIX.....	93	ivermectin.....	34, 63	ketodan.....	26
INGREZZA.....	59	IWILFIN.....	97	ketoprofen.....	12
INLURIYO.....	29	IXINITY.....	50	ketoprofen er.....	12
INLYTA.....	32	IYUZEH.....	102	ketorolac tromethamine....	12, 102
INNOPRAN XL.....	52	jaimiess.....	82	ketorolac tromethamine +rfid....	12
INPEFA.....	54	JAKAFI.....	33	KEVZARA.....	92
INQOVI.....	32	jantoven.....	48	KHINDIVI.....	77
INREBIC.....	30	JANUMET.....	44	KINERET.....	90
INSULIN GLARGINE MAX		JANUMET XR.....	44	KINRIX.....	93
SOLOSTAR.....	46	JANUVIA.....	44	KIONEX.....	66
INSULIN GLARGINE		JARDIANCE.....	44	KIRSTY.....	47
SOLOSTAR.....	46	JASCAYD.....	109	KISQALI (200 MG DOSE).....	30
INSULIN GLARGINE-YFGN....	46	jasmiel.....	83	KISQALI (400 MG DOSE).....	30
INSULIN LISPRO.....	46	JATENZO.....	80	KISQALI (600 MG DOSE).....	30
INSULIN LISPRO (1 UNIT		JAVADIN.....	51	klayesta.....	26
DIAL).....	46	JAYPIRCA.....	33	KLISYRI (250 MG).....	30
INSULIN LISPRO JUNIOR		jaythari.....	77	KLISYRI (350 MG).....	30
KWIKPEN.....	46	jencycla.....	86	klor-con.....	65
INSULIN LISPRO PROT &		JENLIVA		klor-con 10.....	65
LISPRO.....	47	PRENATAL/POSTNATAL.....	67	klor-con m10.....	65
INTELENCE.....	39	JENTADUETO.....	44	klor-con m15.....	65
INTRAROSA.....	80	JENTADUETO XR.....	44	klor-con m20.....	65
introvale.....	82	jinteli.....	83	KLOXXADO.....	16
INVEGA HAFYERA.....	37	JIVI.....	50	KOATE.....	50
INVEGA SUSTENNA.....	37	JOENJA.....	93	KOATE-DVI.....	50
INVEGA TRINZA.....	37	jolessa.....	83	KOMZIFTI.....	30
INVELTYS.....	102	JORNAY PM.....	58	KONVOMEPI.....	72
INVOKAMET.....	44	JOURNAVX.....	11	KOSELUGO.....	33
INVOKAMET XR.....	44	joyeaux.....	83	KOVALTRY.....	50
INVOKANA.....	44	JUBLIA.....	26	K-PHOS.....	65

K-PHOS NO 2.....	65	LEVVID.....	69	lofexidine hcl.....	15
KRAZATI.....	30	levetiracetam.....	20	lojaimiess.....	83
KRINTAFEL.....	35	LEVETIRACETAM.....	20	LOKELMA.....	66
KRISTALOSE.....	71	levetiracetam er.....	20	LOMAIRA.....	59
kurvelo.....	83	levobunolol hcl.....	101	lomustine.....	29
kymbee.....	77	levocarnitine.....	65	LONSURF.....	30
KYZATREX.....	80	levocarnitine sf.....	66	loperamide hcl.....	70
labetalol hcl.....	52	levocetirizine dihydrochloride..	105	lopinavir-ritonavir.....	40
lacosamide.....	21	levofloxacin.....	19, 102	LOPRESSOR.....	52
lactulose.....	71	levonest.....	83	loratadine.....	105
lactulose encephalopathy.....	71	levonorgest-eth est & eth est....	83	loratadine childrens.....	105
LAGEVRIO.....	38	levonorgest-eth estrad 91-day..	83	loratadine-d 12hr.....	105
LAMICTAL XR.....	21	levonorgest-eth estradiol-iron...	83	loratadine-d 24hr.....	105
lamivudine.....	38, 40	levonorgestrel.....	86	lorazepam.....	41
lamivudine-zidovudine.....	40	levonorgestrel-ethinyl estrad....	83	lorazepam intensol.....	41
lamotrigine.....	21	levonorg-eth estrad triphasic....	83	LORBRENA.....	33
lamotrigine er.....	21	levorphanol tartrate.....	13	LOREEV XR.....	41
lamotrigine starter kit-blue.....	21	levo-t.....	87	loryna.....	83
lamotrigine starter kit-green.....	21	LEVOTHYROXINE SODIUM....	87	losartan potassium.....	51
lamotrigine starter kit-orange....	21	levothyroxine sodium.....	87	losartan potassium-hctz.....	54
LAMPIT.....	35	levoxyl.....	87	LOTEMAX.....	102
LANCETS.....	43	LEVSIN.....	69	LOTEMAX SM.....	102
LANCETS 28G THIN.....	43	LEVSIN/SL.....	69	loteprednol etabonate.....	102
LANCETS SUPER THIN.....	43	l-glutamine.....	97	loteprednol-tobramycin.....	100
lansoprazole.....	72	LICART.....	12	lovastatin.....	56
lanthanum carbonate.....	67	lidocaine.....	15	low-ogestrel.....	83
LANTUS SOLOSTAR.....	47	lidocaine hcl.....	15	loxapine succinate.....	36
LANTUS U-100 VIAL.....	47	lidocaine hcl urethral/mucosal...	15	lo-zumandimine.....	83
lapatinib ditosylate.....	33	lidocaine viscous hcl.....	15	lubiprostone.....	70
larin 1.5/30.....	83	lidocaine-hydrocort (perianal)...	95	luizza 1.5/30.....	83
larin 1/20.....	83	lidocaine-prilocaine.....	15	luizza 1/20.....	83
larin 24 fe.....	83	LIDOCORT.....	95	LULICONAZOLE.....	26
larin fe 1.5/30.....	83	LIKMEZ.....	17	LUMAKRAS.....	30
larin fe 1/20.....	83	linezolid.....	17	LUMIGAN.....	102
LASIX ONYU.....	55	LINZESS.....	70	LUMRYZ.....	112
latanoprost.....	102	liomny.....	87	LUMRYZ STARTER PACK....	112
laxative osmotic.....	72	liothyronine sodium.....	87	LUPKYNIS.....	90
LAZCLUZE.....	33	liraglutide.....	44	LUPRON DEPOT (1-MONTH)..	88
lederle leucovorin.....	30	liraglutide -weight		LUPRON DEPOT (3-MONTH)..	88
LEDIPASVIR-SOFOSBUVIR....	38	management.....	97	LUPRON DEPOT-PED (1-	
leflunomide.....	92	lisdexamfetamine dimesylate....	57	MONTH).....	88
lenalidomide.....	29	lisinopril.....	51	LUPRON DEPOT-PED (3-	
LENVIMA.....	33	lisinopril-hydrochlorothiazide....	54	MONTH).....	88
LEQSELVI.....	63	LITFULO.....	63	LUPRON DEPOT-PED (6-	
lessina.....	83	lithium.....	42	MONTH).....	88
letrozole.....	31	lithium carbonate.....	42	lurasidone hcl.....	37
leucovorin calcium.....	30	lithium carbonate er.....	42	lutra.....	83
LEUKERAN.....	29	LITHOSTAT.....	75	LUZU.....	26
LEUKINE.....	48	LIVDELZI.....	70	LYBALVI.....	37
leuprolide acetate.....	88	LIVMARLI.....	60	lyleq.....	86
levabuterol hcl.....	108	LIVTENCITY.....	38	lyllana.....	83
LEVALBUTEROL HFA.....	108	LO LOESTRIN FE.....	83	LYNKUET.....	97
LEVAMLODIPINE MALEATE...	53	LODOCO.....	54	LYNPARZA.....	33

LYSODREN.....	88	mesna.....	34	MIEBO.....	100
LYTGOBI (12 MG DAILY DOSE).....	31	metaxalone.....	111	mifepristone.....	79
LYTGOBI (16 MG DAILY DOSE).....	31	metformin hcl er.....	44	MIGERGOT.....	27
LYTGOBI (20 MG DAILY DOSE).....	31	metformin hcl er (mod).....	44	miglitol.....	45
LYUMJEV KWIKPEN.....	47	metformin hcl er (osm).....	44	miglustat.....	73
LYUMJEV VIAL.....	47	metformin hcl ir.....	44, 45	mili.....	84
lyza.....	86	methadone hcl.....	13	milk of magnesia.....	72
magnesium citrate.....	72	methadone hcl intensol.....	13	milk of magnesia concentrate...	72
malathion.....	35	methamphetamine hcl.....	57	milophene.....	79
maraviroc.....	40	methazolamide.....	55	mimvey.....	84
marlissa.....	84	methenamine hippurate.....	17	MINIVELLE.....	84
MARPLAN.....	23	methimazole.....	88	minocycline hcl.....	19
MATERNACEL.....	67	METHITEST.....	80	minocycline hcl er.....	19
MATERVIA.....	67	methocarbamol.....	111	minoxidil.....	57
MATRONEX.....	67	methotrexate sodium.....	90	minzoya.....	84
MATULANE.....	29	methotrexate sodium (pf).....	90	MIPLYFFA.....	97
matzim la.....	53	methoxsalen rapid.....	64	mirabegron er.....	74
MAVENCLAD.....	60	methscopolamine bromide.....	69	MIRCERA.....	48
MAVYRET.....	38	methsuximide.....	20	mirtazapine.....	23
MAXIDEX.....	102	methyldopa.....	51	misoprostol.....	72
maxi-tuss ac.....	110	methylergonovine maleate.....	97	mm allergy relief 24 hour.....	105
MAYZENT.....	60	methylphenidate.....	58	mm aspirin.....	12
MAYZENT STARTER PACK....	60	methylphenidate hcl.....	58	mm clearlax.....	72
meclizine hcl.....	24	methylphenidate hcl er.....	58	mm fexofenadine hcl.....	105
meclofenamate sodium.....	12	methylphenidate hcl er (cd).....	58	M-M-R II.....	94
MEDROL.....	77	methylphenidate hcl er (la).....	58	M-NATAL PLUS.....	67
medroxyprogesterone acetate..	86	methylphenidate hcl er (osm)....	58	MNEXSPIKE.....	94
mefenamic acid.....	12	METHYLPHENIDATE HCL ER (OSM).....	58	MOBILE LANCETS 30G.....	43
mefloquine hcl.....	35	methylphenidate hcl er (xr).....	58	modafinil.....	112
megestrol acetate.....	86	methylprednisolone.....	77	MODEYSO.....	30
MEKINIST.....	33	methyltestosterone.....	80	moexipril hcl.....	51
MEKTOVI.....	33	metoclopramide hcl.....	24	molindone hcl.....	37
meleya.....	86	metolazone.....	55	mometasone furoate.....	78, 110
meloxicam.....	12	metoprolol succinate er.....	52	MONOJECT FLUSH SYRINGE.....	66
MELOXICAM.....	12	metoprolol tartrate.....	52	MONOJECT SODIUM CHLORIDE FLUSH.....	66
memantine hcl.....	22	METOPROLOL TARTRATE.....	52	mono-lynyah.....	84
memantine hcl er.....	22	metoprolol-hydrochlorothiazide..	54	montelukast sodium.....	107
memantine hcl-donepezil hcl er	22	metronidazole.....	17, 64	morphine sulfate.....	14
MENOPUR.....	79	metyrosine.....	54	morphine sulfate (concentrate)..	14
MENOSTAR.....	84	mexiletine hcl.....	52	morphine sulfate er.....	13
MENQUADFI.....	94	mibelas 24 fe.....	84	morphine sulfate er beads.....	13
MENVEO.....	94	miconazole 3.....	26	MOTOFEN.....	70
meperidine hcl.....	14	MICONAZOLE-ZINC OXIDE- PETROLAT.....	26	MOTPOLY XR.....	21
meprobamate.....	41	MICORT HC.....	77	MOUNJARO.....	45
mercaptapurine.....	30	MICROCHAMBER.....	97	MOVANTIK.....	70
MERILOG.....	47	microgestin 1.5/30.....	84	moxifloxacin hcl.....	19, 102
MERILOG SOLOSTAR.....	47	microgestin 1/20.....	84	moxifloxacin hcl (2x day).....	102
mesalamine.....	94, 95	microgestin fe 1.5/30.....	84	MRESVIA.....	94
mesalamine er oral capsule 0.375 gm.....	94	microgestin fe 1/20.....	84	MULPLETA.....	48
		midazolam hcl.....	41	MULTAQ.....	52
		midodrine hcl.....	51	mupirocin.....	17

mupirocin cream.....	17	NEO-VITAL RX.....	67	NIVESTYM.....	49
my choice.....	86	NERLYNX.....	33	nizatidine.....	70
my way.....	86	NESTABS.....	67	nora-be.....	86
MYALEPT.....	73	NESTABS ONE.....	67	NORDITROPIN FLEXPRO.....	79
MYCAPSSA.....	88	neuac.....	64	norelgestromin-eth estradiol.....	84
mycophenolate mofetil.....	90	NEULASTA.....	49	norethin ace-eth estrad-fe.....	84
mycophenolate sodium.....	90	NEUPOGEN.....	49	norethindrone.....	87
mycophenolic acid.....	90	NEUPRO.....	36	norethindrone acetate.....	86
MYFEMBREE.....	84	NEVANAC.....	102	norethindrone acet-ethinyl est...84	
MYHIBBIN.....	90	nevirapine.....	39	norethindrone-eth estradiol.....	84
MYLERAN.....	29	nevirapine er.....	39	norethin-eth estradiol-fe.....	84
MYQORZO.....	54	new day.....	86	NORGESIC.....	111
MYRBETRIQ.....	74	NEXICLON XR.....	51	NORGESIC FORTE.....	111
MYTESI.....	70	NEXLETOL.....	56	norgestimate-eth estradiol.....	84
na sulfate-k sulfate-mg sulf.....	72	NEXLIZET.....	56	norgestimate-ethinyl estradiol	
nabumetone.....	12	NEXTSTELLIS.....	84	triphasic.....	84
nadolol.....	52	NGENLA.....	79	NORITATE.....	64
naftifine hcl.....	26	niacin (antihyperlipidemic).....	56	NORLIQVA.....	53
nalbuphine hcl.....	14	niacin er (antihyperlipidemic)....	57	norlyroc.....	87
NALOCET.....	14	niacor.....	57	normal saline flush.....	66
naloxone hcl.....	16	nicardipine hcl.....	53	NORPACE CR.....	52
naltrexone hcl.....	15	nicotine.....	16	nortrel 0.5/35 (28).....	84
NAMZARIC.....	22	nicotine mini.....	16	nortrel 1/35 (21).....	84
naproxen.....	12	nicotine polacrilex.....	16	nortrel 1/35 (28).....	84
naproxen dr.....	12	nicotine polacrilex mini.....	16	nortrel 7/7/7.....	84
naproxen sodium.....	12	nicotine step 1.....	16	nortriptyline hcl.....	24
naproxen sodium er.....	12	nicotine step 2.....	16	NORVIR.....	40
naproxen-esomeprazole mg.....	12	nicotine step 3.....	16	NOURIANZ.....	35
naratriptan hcl.....	28	NICOTROL NS.....	16	NOVAREL.....	79
NARCAN.....	16	nifedipine.....	53	NOVOEIGHT.....	50
NATACYN.....	99	nifedipine er.....	53	NOVOFINE PEN NEEDLE.....	97
NATAL PNV.....	67	nifedipine er osmotic release....	53	NOVOFINE PLUS PEN	
NATAZIA.....	84	nikki.....	84	NEEDLE.....	97
nateglinide.....	45	NILOTINIB D-TARTRATE.....	33	NOVOLIN 70/30 FLEXPEN.....	47
NATESTO.....	80	nilotinib hcl.....	33	NOVOLIN 70/30 RELION.....	47
NAYZILAM.....	20	nilutamide.....	29	NOVOLIN 70/30 VIAL.....	47
nebivolol hcl.....	52	nimodipine.....	53	NOVOLIN N FLEXPEN.....	47
NEBUSAL.....	110	NIMODIPINE.....	53	NOVOLIN N RELION.....	47
necon 0.5/35 (28).....	84	NINLARO.....	30	NOVOLIN N VIAL.....	47
nefazodone hcl.....	23	nisoldipine er.....	53	NOVOLIN R FLEXPEN.....	47
NEFFY.....	108	nitazoxanide.....	35	NOVOLIN R FLEXPEN	
NEMLUVIO.....	64	nitisinone.....	73	RELION.....	47
NEOMATERNA.....	67	NITRO-BID.....	57	NOVOLIN R RELION.....	47
neomycin sulfate.....	16	NITRO-DUR.....	57	NOVOLIN R VIAL.....	47
neomycin-bacitracin zn-		nitrofurantoin.....	17	NOVOLOG 70/30 FLEXPEN	
polymyx.....	99	NITROFURANTOIN.....	17	RELION.....	47
neomycin-polymyxin-dexameth	99	nitrofurantoin macrocrystal.....	17	NOVOLOG FLEXPEN.....	47
neomycin-polymyxin-		nitrofurantoin monohydrate		NOVOLOG FLEXPEN	
gramicidin.....	99	macrocrystals.....	17	RELION.....	47
neomycin-polymyxin-hc....	99, 103	nitroglycerin.....	57	NOVOLOG MIX 70/30	
NEONATAL COMPLETE.....	67	NITRO-TIME.....	57	FLEXPEN.....	47
NEONATAL PLUS.....	67	NITYR.....	73	NOVOLOG MIX 70/30	
NEO-SYNALAR.....	17	NIVA THYROID.....	87	RELION.....	47

NOVOLOG MIX 70/30 VIAL.....	47	OLPRUVA (6.67 GM DOSE)....	73	ORENCIA.....	90
NOVOLOG PENFILL.....	47	OLUMIANT.....	90	ORENCIA CLICKJECT.....	90
NOVOLOG RELION.....	47	omega-3-acid ethyl esters.....	57	ORENITRAM.....	109
NOVOLOG U-100 VIAL.....	47	omeprazole.....	73	ORENITRAM MONTH 1.....	109
NOVOSEVEN RT.....	50	omeprazole magnesium.....	72	ORENITRAM MONTH 2.....	109
NOXAFIL.....	26	omeprazole-sodium		ORENITRAM MONTH 3.....	109
np thyroid.....	87	bicarbonate.....	73	ORFADIN.....	73
NUBEQA.....	29	OMLONTI.....	101	ORGOVYX.....	29
NUCALA.....	110	OMNARIS.....	107	ORIAHNN.....	84
NUCYNTA ER.....	13	OMNIPOD 5 DEXCOM INTRO		ORLISSA.....	88
NUDEXTA.....	59	KIT.....	97	ORKAMBI.....	108
NULEV.....	69	OMNIPOD 5 DEXCOM PODS..	97	ORLADEYO.....	88
NUPLAZID.....	37	OMNIPOD 5 LIBRE PODS.....	97	ORLISTAT.....	98
NURTEC.....	27	OMNIPOD 5 LIBRE2 G6		ORLYNVAH.....	17
NUTROPIN AQ NUSPIN 10.....	79	INTRO GEN5.....	97	orphenadrine citrate er.....	111
NUTROPIN AQ NUSPIN 20.....	79	OMNIPOD DASH INTRO KIT...	97	orphenadrine-aspirin-caffeine.	111
NUTROPIN AQ NUSPIN 5.....	79	OMNIPOD DASH PDM (GEN		ORPHENGESIC FORTE.....	111
NUVAXOVID COVID-19		4).....	98	orquidea.....	87
VACCINE.....	94	OMNIPOD DASH PODS.....	98	ORSERDU.....	29
NUVESSA.....	17	OMNITROPE.....	79	ORUDIS.....	12
NUWIQ.....	50	OMVOH.....	90	OSCIMIN.....	69
NUZYRA.....	19	OMVOH (300 MG DOSE).....	90	oseltamivir phosphate.....	41
nyamyc.....	26	ONAPGO.....	36	OSPHENA.....	87
nylia 1/35.....	84	ondansetron hcl.....	25	OTEZLA.....	92
nylia 7/7/7.....	84	ondansetron odt.....	25	OTEZLA XR.....	92
NYMALIZE.....	53	ONE VITE WOMENS PLUS.....	68	OTEZLA/OTEZLA XR	
NYPOZI.....	49	ONENATAL RX.....	68	INITIATION PK.....	92
nystatin.....	26	ONETOUCH DELICA SAFETY		OTOVEL.....	103
nystatin-triamcinolone.....	26	LANCING.....	43	OTULFI.....	90
nystop.....	26	ONGENTYS.....	35	OVIDREL.....	79
NYVEPRIA.....	49	ONTRALFY.....	111	OXAPROZIN.....	12
OBIZUR.....	50	ONUREG.....	30	oxaprozin.....	12
octreotide acetate.....	88	ONYDA XR.....	58	oxazepam.....	41
ODACTRA.....	97	ONZETRA XSAIL.....	28	oxcarbazepine.....	22
ODEFSEY.....	40	opcicon one-step.....	87	oxcarbazepine er.....	22
ODOMZO.....	33	OPFOLDA.....	73	OXERVATE.....	100
OFEV.....	109	OPIPZA.....	37	oxiconazole nitrate.....	26
ofloxacin.....	19, 102, 103	OPSUMIT.....	109	OXISTAT.....	26
OGSIVEO.....	33	OPSYNVI.....	109	oxybutynin chloride.....	74
OHTUVAYRE.....	108	OPTICHAMBER DIAMOND.....	98	oxybutynin chloride er.....	74
OJEMDA.....	31	OPTICHAMBER DIAMOND-		oxycodone hcl.....	14
OJJAARA.....	30	LG MASK.....	98	OXYCODONE HCL.....	14
olanzapine.....	37	OPTICHAMBER DIAMOND-		OXYCODONE-	
olanzapine-fluoxetine hcl.....	23	MD MASK.....	98	ACETAMINOPHEN.....	14, 15
olmesartan medoxomil.....	51	OPTICHAMBER DIAMOND-		oxycodone-acetaminophen.....	15
olmesartan medoxomil-hctz.....	54	SM MASK.....	98	OXYCONTIN.....	13
olmesartan-amlodipine-hctz.....	54	option 2.....	87	oxymorphone hcl.....	15
olopatadine hcl.....	100, 105	OPTIONS GYNOL II		oxymorphone hcl er.....	13
OLPRUVA (2 GM DOSE).....	73	CONTRACEPTIVE.....	75	OXYTROL.....	74
OLPRUVA (3 GM DOSE).....	73	OPVEE.....	16	OZEMPIC.....	45
OLPRUVA (4 GM DOSE).....	73	OPZELURA.....	64	PALFORZIA.....	98
OLPRUVA (5 GM DOSE).....	73	ORALAIR.....	110	paliperidone er.....	37
OLPRUVA (6 GM DOSE).....	73	ORAVIG.....	26	PALSONIFY.....	88

PALYNZIQ.....	73	phenytoin infatabs.....	22	prazosin hcl.....	51
PANCREAZE.....	73	phenytoin sodium extended.....	22	PRED MILD.....	102
PANRETIN.....	34	PHEXX.....	98	prednisolone.....	78
pantoprazole sodium.....	73	philith.....	84	prednisolone acetate.....	102
paricalcitol.....	96	PHOSPHOLINE IODIDE.....	101	PREDNISOLONE ACETATE	
paroxetine hcl.....	23	PHOSPHO-TRIN K500.....	66	P-F.....	102
paroxetine hcl er.....	24	PHYRAGO.....	33	prednisolone sodium	
paroxetine mesylate.....	24	phytonadione.....	68	phosphate.....	78, 102
PAXLOVID (150/100).....	38	PIFELTRO.....	39	prednisone.....	78
PAXLOVID (300/100 &		pilocarpine hcl.....	61, 101	PREDNISONE.....	78
150/100).....	38	pimecrolimus.....	64	prednisone intensol.....	78
PAXLOVID (300/100).....	38	pimozide.....	37	pregabalin.....	59
pazopanib hcl.....	33	pimtrea.....	84	pregabalin er.....	59
PEDIARIX.....	94	pindolol.....	52	PREGEN DHA.....	68
PEDVAX HIB.....	94	pioglitazone hcl.....	45	PREGENNA.....	68
peg 3350.....	72	pioglitazone hcl-glimepiride.....	45	PREGNYL.....	79
peg 3350-kcl-na bicarb-nacl.....	72	pioglitazone hcl-metformin hcl..	45	PREMARIN.....	84
peg-3350/electrolytes.....	72	PIQRAY.....	30	PREMESISRX.....	68
peg-3350/electrolytes/ascorbat.	72	pirfenidone.....	109	PREMPHASE.....	84
PEGASYS.....	38	piroxicam.....	13	PREMPRO.....	85
peg-kcl-nacl-nasulf-na asc-c.....	72	pitavastatin calcium.....	56	prenatal.....	68
PEMAZYRE.....	31	PIVYA.....	18	prenatal plus vitamin/mineral....	68
PENBRAYA.....	94	PLEGRIDY.....	60	PRENATE.....	68
penciclovir.....	39	PLEGRIDY STARTER PACK...	60	PRENATE DHA.....	68
penicillamine.....	75	PLENVU.....	72	PRENATE ELITE.....	68
penicillin v potassium.....	18	PNEUMOVAX 23.....	94	PRENATE ENHANCE.....	68
PENMENVY.....	94	pnv 27-ca/fe/fa.....	68	PRENATE ESSENTIAL.....	68
PENTACEL.....	94	pnv prenatal plus multivit+dha..	68	PRENATE MINI.....	68
pentamidine isethionate.....	35	PNV TABS 20-1.....	68	PRENATE PIXIE.....	68
PENTASA.....	95	POCKET SPACER.....	98	PRENATE RESTORE.....	68
pentazocine-naloxone hcl.....	15	podofilox.....	64	PRENATOL-M.....	68
pentoxifylline er.....	54	POKONZA.....	66	PRENATRIX.....	68
perampanel.....	21	polyethylene glycol 3350.....	72	PRENATRYL.....	68
PERFECT POINT SAFETY		polymyxin b-trimethoprim.....	99	PRESTALIA.....	54
LANCETS.....	43	pomalidomide.....	29	PRETOMANID.....	28
perindopril erbumine.....	51	PONVORY.....	60	prevalite.....	57
periogard.....	61	PONVORY STARTER PACK...	60	PREVIDENT.....	61
permethrin.....	35	portia-28.....	84	PREVIDENT 5000 BOOSTER	
perphenazine.....	25	posaconazole.....	26	PLUS.....	61
perphenazine-amitriptyline.....	23	potassium chloride.....	66	PREVIDENT 5000 DRY	
PERSERIS.....	37	potassium chloride crys er.....	66	MOUTH.....	61
PERTZYE.....	73	potassium chloride er.....	66	PREVIDENT 5000 ENAMEL	
PHEBURANE.....	74	potassium citrate er.....	66	PROTECT.....	61
phendimetrazine tartrate.....	59	potassium iodide (expectorant)		PREVIDENT 5000 KIDS.....	61
phendimetrazine tartrate er.....	59	110	PREVIDENT 5000 ORTHO	
phenelzine sulfate.....	23	PRADAXA.....	48	DEFENSE.....	61
phenobarbital.....	20	PRALUENT.....	57	PREVIDENT 5000 PLUS.....	61
phenoxybenzamine hcl.....	51	pramipexole dihydrochloride....	36	PREVIDENT 5000 SENSITIVE.	61
phentermine hcl.....	59	pramipexole dihydrochloride er.	36	PREVNAR 20.....	94
phentermine-topiramate er.....	59	PRAMOSONE.....	64	PREVYMIS.....	38
phenylephrine hcl.....	100	prasugrel hcl.....	50	PREZCOBIX.....	40
phenytek.....	22	pravastatin sodium.....	56	PREZISTA.....	40
phenytoin.....	22	praziquantel.....	34	PRIFTIN.....	28

PRILOSEC.....	73	PURE COMFORT SAFETY		REBIF TITRATION PACK.....	60
primaquine phosphate.....	35	LANCET 30G.....	43	REBINYN.....	50
primidone.....	20	PURE COMFORT SPACER		reclipsen.....	85
PRIORIX.....	94	CHAMBER.....	98	RECOMBINATE.....	50
PRO COMFORT SPACER		pyquvi.....	78	RECOMBIVAX HB.....	94
ADULT.....	98	pyrazinamide.....	28	RECORLEV.....	79
PRO COMFORT SPACER		pyridostigmine bromide.....	28	REDEMPLO.....	57
CHILD.....	98	pyridostigmine bromide er.....	28	RELAFEN DS.....	13
PRO COMFORT SPACER		pyrimethamine.....	35	RELENZA DISKHALER.....	41
INFANT.....	98	PYRUKYND.....	49	RELEUKO.....	49
PROAIR RESPICLICK.....	108	PYRUKYND TAPER PACK.....	49	RELEVIA.....	68
probenecid.....	27	PYZCHIVA.....	92	RELEXXII.....	58
PROCARE SPACER/ADULT		QBRELIS.....	51	RELISTOR.....	70
MASK.....	98	QBREXZA.....	64	RELNATE DHA.....	68
PROCARE SPACER/CHILD		QELBREE.....	58	RELTONE.....	70
MASK.....	98	QFITLIA.....	50	REMODULIN.....	109
prochlorperazine.....	25	QINLOCK.....	33	RENACIDIN.....	75
prochlorperazine maleate.....	25	QNASL.....	107	RENTHYROID.....	87
PROCRIT.....	49	QNASL CHILDRENS.....	107	repaglinide.....	45
PROCTOCORT.....	95	QUADRACEL.....	94	REPATHA.....	57
PROCTOFOAM HC.....	95	quazepam.....	41	REPATHA SURECLICK.....	57
procto-med hc.....	95	quetiapine fumarate.....	37	RESTASIS MULTIDOSE.....	100
PROCYSBI.....	74	quetiapine fumarate er.....	37	RETACRIT.....	49
PRODIGY AUTOCODE		QUILLICHEW ER.....	58	RETEVMO.....	33
BLOOD GLUCOSE.....	43	QUILLIVANT XR.....	58	RETIN-A MICRO PUMP.....	64
PRODIGY NO CODING		quinapril hcl.....	51	REVCIVI.....	74
BLOOD GLUC.....	43	quinapril-hydrochlorothiazide....	54	REVLIMID.....	29
PRODIGY VOICE BLOOD		quinidine gluconate er.....	52	REVUFORJ.....	30
GLUCOSE.....	43	quinidine sulfate.....	52	REXTOVY.....	16
PROFILNINE.....	50	quinine sulfate.....	35	REXULTI.....	37
progesterone.....	87	QULIPTA.....	27	REYATAZ.....	40
PROGRAF.....	91	QUVIVIQ.....	111	REYVOW.....	28
PROLATE.....	15	QVAR REDIHALER.....	107	REZDIFFRA.....	70
promethazine hcl.....	25	RABEPRAZOLE SODIUM.....	73	REZLIDHIA.....	33
promethazine-codeine.....	110	rabeprazole sodium.....	73	REZUROCK.....	91
promethazine-dm.....	110	RADICAVA ORS.....	59	REZVOGLAR KWIKPEN.....	47
promethazine-phenylephrine..	105	RADICAVA ORS STARTER		RHAPSIDO.....	91
PROMETHEGAN.....	25	KIT.....	59	RHOPRESSA.....	101
propafenone hcl.....	52	RADIOGARDASE.....	98	ribavirin.....	38
propafenone hcl er.....	52	RAGWITEK.....	98	RIDAURA.....	92
propranolol hcl.....	53	RALDESY.....	24	rifabutin.....	28
propranolol hcl er.....	53	raloxifene hcl.....	87	rifampin.....	29
propylthiouracil.....	88	ramelteon.....	111	rilpivirine hcl.....	39
PROQUAD.....	94	ramipril.....	51	riluzole.....	59
protriptyline hcl.....	24	RANITIDINE HCL.....	70	rimantadine hcl.....	41
prucalopride succinate.....	70	ranolazine er.....	54	RINVOQ.....	92
PRURADIK.....	35	rasagiline mesylate.....	36	RINVOQ LQ.....	92
pseudoephedrine-bromphen-		RASUVO.....	91	risedronate sodium.....	96
dm.....	110	RAYALDEE.....	96	risperidone.....	37
PULMICORT FLEXHALER.....	107	REBIF.....	60	risperidone microspheres er.....	37
PULMOSAL.....	110	REBIF REBIDOSE.....	60	ritonavir.....	40
PULMOZYME.....	108	REBIF REBIDOSE		rivaroxaban.....	48
		TITRATION PACK.....	60	rivastigmine.....	22

rivastigmine tartrate.....	22	SENSILANCE SAFETY	SODIUM CHLORIDE FLUSH... 66
rivelsa.....	85	LANCETS 21G.....	sodium fluoride.....61, 66
RIVFLOZA.....	75	SENSILANCE SAFETY	sodium fluoride 5000 enamel...61
RIVIVE.....	16	LANCETS 26G.....	sodium fluoride 5000 plus..... 61
RIXUBIS.....	50	SENSILANCE SAFETY	sodium fluoride 5000 ppm.....61
rizatriptan benzoate.....	28	LANCETS 28G.....	sodium fluoride 5000 sensitive..61
ROCKLATAN.....	101	SEPHIENCE.....	sodium oxybate..... 112
roflumilast.....	108	SEREVENT DISKUS.....	sodium phenylbutyrate..... 74
ROLVEDON.....	49	SERNIVO.....	sodium polystyrene sulfonate... 66
ROMVIMZA.....	33	SEROSTIM.....	sodium sulfacetamide wash.....64
ropinirole hcl.....	36	sertraline hcl.....	SOFDRA.....
ropinirole hcl er.....	36	setlakin.....	SOFOSBUVIR-VELPATASVIR..38
rosuvastatin calcium.....	56	sevelamer carbonate.....	SOGROYA.....
rosyrah.....	85	sevelamer hcl.....	SOHONOS.....
ROTARIX.....	94	SEVENFACT.....	solifenacin succinate..... 74
ROTATEQ.....	94	SEYSARA.....	SOLIUQA.....
roweepira.....	20	sf 5000 plus.....	SOLOSEC.....
ROXYBOND.....	15	sf gel 1.1%.....	SOLTAMOX.....
ROZLYTREK.....	33	sharobel.....	SOMAVERT.....
RUBRACA.....	31	shewise.....	sorafenib tosylate..... 33
RUCONEST.....	88	SHINGRIX.....	SORILUX.....
rufinamide.....	22	SIGNIFOR.....	sotalol hcl.....
RUKOBIA.....	40	SIKLOS.....	sotalol hcl (af).....
RYALTRIS.....	110	sildenafil citrate.....	SOTYKTU.....
RYBELSUS.....	45	SILIQ.....	SOTYLIZE.....
RYCLORA.....	105	silodosin.....	SOVALDI.....
RYDAPT.....	33	silver sulfadiazine.....	SOVUNA.....
RYKINDO.....	37	SIMBRINZA.....	SPEVIGO.....
RYPLAZIM.....	98	SIMLANDI (1 PEN).....	SPIKEVAX.....
RYTARY.....	36	SIMLANDI (2 PEN).....	SPIKEVAX 6M-11Y.....
ryvent.....	105	SIMLANDI (2 SYRINGE).....	spinosad.....
sacubitril-valsartan.....	54	simliya.....	SPIRIVA RESPIMAT.....
saline flush.....	66	simpesse.....	spironolactone.....
salsalate.....	13	SIMPONI.....	spironolactone-hctz.....
SANCUSO.....	25	simvastatin.....	sprintec 28.....
SANTYL.....	64	sirolimus.....	SPRITAM.....
sapropterin dihydrochloride.....	74	SIRTURO.....	SPRIX.....
SAVAYSA.....	48	SITAGLIPT BASE-METFORM	SPS (SODIUM
SAVELLA.....	59	HCL ER.....	POLYSTYRENE SULF).....
SAVELLA TITRATION PACK... 59		SITAGLIPTIN.....	66
saxagliptin hcl.....	45	SITAGLIPTIN BASE-	ssd.....
saxagliptin-metformin er.....	45	METFORMIN HCL.....	17
SCEMBLIX.....	33	SIVEXTRO.....	SSKI.....
scopolamine.....	25	SKYCLARYS.....	110
SDAMLO.....	53	SKYRIZI.....	64
SECUADO.....	37	SKYRIZI PEN.....	64
SEGLUROMET.....	45	SKYTROFA.....	91
SELARSDI.....	92	SLYND.....	91
SELECT-OB.....	68	smooth lax.....	79
selegiline hcl.....	36	SOAANZ.....	87
selenium sulfide.....	64	sod fluoride-potassium nitrate... 61	72
SELZENTRY.....	40	sodium chloride.....	55
SEMGLEE (YFGN).....	47	sodium chloride flush.....	61
			75, 110
			66

STRIVERDI RESPIMAT	108	TALZENNA.....	31	thioridazine hcl.....	37
SUBVENITE.....	21	tamoxifen citrate.....	29	thiothixene.....	37
subvenite.....	21	tamsulosin hcl.....	75	THYQUIDITY.....	87
subvenite starter kit-blue.....	21	tapentadol hcl.....	15	thyroid.....	87
subvenite starter kit-green.....	21	TAPENTADOL HCL ER.....	13	tiadylt er.....	53
subvenite starter kit-orange.....	21	TAPERDEX 12-DAY.....	78	tiagabine hcl.....	20
SUCRAID.....	74	TAPERDEX 6-DAY.....	78	TIBSOVO.....	33
sucralfate.....	72	TAPERDEX 7-DAY.....	78	ticagrelor.....	50
SUFLAVE.....	72	tarina 24 fe.....	85	TIGLUTIK.....	59
SULCONAZOLE NITRATE.....	26	tarina fe 1/20 eq.....	85	tilia fe.....	85
sulfacetamide sodium.....	64, 102	TARPEYO.....	95	timolol hemihydrate.....	101
sulfacetamide sodium (acne)....	64	TASCENSO ODT.....	60	timolol maleate.....	53, 101
sulfacetamide sodium-sulfur.....	64	tasimelteon.....	112	timolol maleate (once-daily)....	101
sulfacetamide sod-sulfur wash..	64	tavaborole.....	26	timolol maleate ocudose.....	101
sulfacetamide-prednisolone....	100	TAVALISSE.....	49	timolol maleate pf.....	101
sulfadiazine.....	19	TAVNEOS.....	98	tinidazole.....	17
sulfamethoxazole-trimethoprim..	19	taysofy.....	85	tiopronin.....	75
SULFAMYLON.....	17	tazarotene.....	64, 65	tiotropium bromide.....	107
sulfasalazine.....	95	TAZAROTENE.....	64	TIROSINT.....	87
sulfatrim pediatric.....	19	TECHLITE LANCETS 26G.....	43	TIROSINT-SOL.....	87
sulindac.....	13	TEGLUTIK.....	59	TIVICAY.....	39
sumatriptan.....	28	telmisartan.....	51	TIVICAY PD.....	39
sumatriptan succinate.....	28	telmisartan-amlodipine.....	54	tizanidine hcl.....	111
sumatriptan-naproxen sodium..	28	telmisartan-hctz.....	54	TLANDO.....	80
sunitinib malate.....	33	temazepam.....	111	TOBI PODHALER.....	108
SUNLENCA.....	40	temozolomide.....	29	TOBRADEX.....	99
SUNOSI.....	112	TENCON.....	15	TOBRADEX ST.....	99
SUTAB.....	72	TENIVAC.....	94	tobramycin.....	99, 108
syeda.....	85	tenofovir disoproxil fumarate....	40	tobramycin-dexamethasone.....	99
SYMBICORT.....	107	TEPMETKO.....	33	TOBEX.....	99
SYMBRAVO.....	27	terazosin hcl.....	75	TODAY SPONGE.....	75
SYMDEKO.....	108	terbinafine hcl.....	26	TOLAK.....	30
SYMPAZAN.....	20	terbutaline sulfate.....	108	tolcapone.....	35
SYMPROIC.....	70	terconazole.....	26	TOLECTIN 600.....	13
SYMTUZA.....	41	teriflunomide.....	60	tolmetin sodium.....	13
SYNAREL.....	88	teriparatide.....	96	TOLSURA.....	26
SYNDROS.....	25	TERIPARATIDE.....	96	tolterodine tartrate.....	74
SYNJARDY.....	45	testosterone.....	80	tolterodine tartrate er.....	74
SYNJARDY XR.....	45	TESTOSTERONE.....		tolvaptan.....	66
SYNTHROID.....	87	CYPIONATE.....	80	TONMYA.....	59
TABLOID.....	30	testosterone cypionate.....	80	TOPAMAX.....	21
TABRECTA.....	33	testosterone enanthate.....	80	topiramate.....	21
tacrolimus.....	64, 91	tetrabenazine.....	59	topiramate er.....	21
tadalafil.....	75	tetracycline hcl.....	19	toremifene citrate.....	30
tadalafil (pah).....	109	TETRACYCLINE HCL.....	19	torpenz.....	34
TADLIQ.....	109	TEXACORT.....	78	torse mide.....	55
TAFINLAR.....	33	TEZRULY.....	75	TOSYMRA.....	28
tafluprost (pf).....	102	TEZSPIRE.....	110	TOUJEO MAX SOLOSTAR.....	47
TAGRISSO.....	33	THALITONE.....	55	TOUJEO SOLOSTAR.....	47
take action.....	87	THALOMID.....	29	tovet.....	78
TAKHZYRO.....	88	THEO-24.....	108	TRADJENTA.....	45
TALICIA.....	70	theophylline.....	108	TRAMADOL HCL (ER	
TALTZ.....	64	theophylline er.....	108	BIPHASIC).....	13

tramadol hcl (er biphasic).....	13	TRIUMEQ PD.....	40	valganciclovir hcl.....	38
tramadol hcl er.....	13	tri-vylibra.....	85	valproic acid.....	20
TRAMADOL HCL IR.....	13	tri-vylibra lo.....	85	valsartan.....	51
tramadol hcl ir.....	15	tropicamide.....	100	valsartan-hydrochlorothiazide...	55
tramadol-acetaminophen.....	15	trosopium chloride.....	74	VALTOCO 10 MG DOSE.....	21
trandolapril.....	51	trosopium chloride er.....	74	VALTOCO 15 MG DOSE.....	21
trandolapril-verapamil hcl er.....	55	TRUDHESA.....	27	VALTOCO 20 MG DOSE.....	21
tranexamic acid.....	50	TRUE COVER.....	98	VALTOCO 5 MG DOSE.....	21
tranylcypramine sulfate.....	23	TRULANCE.....	70	valtya 1/35.....	85
travoprost (bak free).....	102	TRULICITY.....	45	valtya 1/50.....	85
trazodone hcl.....	24	TRUMENBA.....	94	vancomycin hcl.....	17
TRELEGY ELLIPTA.....	110	TRUQAP.....	34	VANDAZOLE.....	17
TREMFYA.....	92	TRYNGOLZA.....	57	VANFLYTA.....	34
TREMFYA ONE-PRESS.....	92	TRYPTYR.....	100	VANRAFIA.....	75
TREMFYA PEN.....	92	TRYVIO.....	55	VAQTA.....	94
TREMFYA-CD/UC		TUDORZA PRESSAIR.....	107	vardenafil hcl.....	75
INDUCTION.....	92	TUKYSA.....	34	varenicline tartrate.....	16
treprostinil.....	109	TURALIO.....	34	varenicline tartrate (starter).....	16
TRESIBA.....	47	turqoz.....	85	varenicline tartrate(continue)....	16
TRESIBA FLEXTOUCH.....	47	TUXARIN ER.....	110	VARIVAX.....	94
tretinoin.....	34, 65	TWINRIX.....	94	VARUBI (180 MG DOSE).....	25
tretinoin microsphere.....	65	TWIRLA.....	85	VAXELIS.....	94
tretinoin microsphere pump.....	65	TWYNEO.....	65	VAXNEUVANCE.....	94
TRETTEN.....	50	TYBLUME.....	85	VCF VAGINAL	
TREXALL.....	91	tydemy.....	85	CONTRACEPTIVE.....	75
triamcinolone acetonide.....	61, 78	TYENNE.....	92	VECAMYL.....	55
triamcinolone in absorbbase.....	78	TYMLOS.....	96	velivet.....	85
triamterene.....	55	TYRVAYA.....	100	VELPHORO.....	67
triamterene-hctz.....	55	TYVASO.....	109	VELSIPITY.....	92
triazolam.....	111	TYVASO DPI MAINTENANCE		VELTASSA.....	66
triderm.....	78	KIT.....	109	VEMLIDY.....	38
trientine hcl.....	66	TYVASO DPI TITRATION KIT.....	109	VENCLEXTA.....	34
tri-estarylla.....	85	TYVASO REFILL KIT.....	109	VENCLEXTA STARTING	
trifluoperazine hcl.....	37	TYVASO STARTER KIT.....	109	PACK.....	34
trifluridine.....	99	UBRELVY.....	27	VENLAFAXINE BESYLATE	
trihexyphenidyl hcl.....	35	UDENYCA.....	49	ER.....	24
TRIJARDY XR.....	45	ULTRAVATE.....	78	venlafaxine hcl.....	24
TRIKAFTA.....	108	UMECLIDINIUM-		venlafaxine hcl er.....	24
tri-legest fe.....	85	VILANTEROL.....	110	VEOZAH.....	98
tri-linyah.....	85	unithroid.....	87	verapamil hcl.....	53
tri-lo-estarylla.....	85	UPNEEQ.....	100	verapamil hcl er.....	53
tri-lo-marzia.....	85	UPTRAVI.....	109	VEREGEN.....	65
tri-lo-mili.....	85	UPTRAVI TITRATION.....	109	VERIFINE SAFE LANCET	
tri-lo-sprintec.....	85	URSODIOL.....	70	MINI 21G.....	43
trimethobenzamide hcl.....	25	ursodiol.....	70	VERIFINE SAFE LANCET	
trimethoprim.....	17	USTEKINUMAB.....	92	MINI 23G.....	43
tri-mili.....	85	USTEKINUMAB-AAUZ.....	91	VERIFINE SAFE LANCET	
trimipramine maleate.....	24	USTEKINUMAB-AEKN.....	92	MINI 28G.....	43
TRINATE.....	68	USTEKINUMAB-TTWE.....	92	VERIFINE SAFE LANCET	
TRINTELLIX.....	24	UZEDY.....	37	MINI 30G.....	43
tri-sprintec.....	85	VAFSEO.....	49	VERKAZIA.....	100
TRISTART DHA.....	68	valacyclovir hcl.....	39	VERQUOVO.....	55
TRIUMEQ.....	40	VALCHLOR.....	29	VERSACLOZ.....	38

VERZENIO.....	31	VYLEESI.....	59	XENICAL.....	99
vestura.....	85	vylibra.....	85	XERESE.....	39
VEVYE.....	100	VYNDAMAX.....	55	XERMELO.....	70
V-GO 20.....	98	VYSCOXA.....	13	XHANCE.....	107
V-GO 30.....	98	VYVANSE.....	57	XIFAXAN.....	17, 18
V-GO 40.....	98	VYVGART HYTRULO.....	28	XIGDUO XR.....	45
VIBERZI.....	71	VYZULTA.....	102	XIIDRA.....	100
vienna.....	85	WAINUA.....	74	XOFLUZA (40 MG DOSE).....	41
vigabatrin.....	21	WAKIX.....	112	XOFLUZA (80 MG DOSE).....	41
VIGAFYDE.....	21	wal-itin d.....	105	XOLAIR.....	92, 93
VIJOICE.....	34	wal-zyr allergy childrens.....	105	XOLREMDI.....	49
vilazodone hcl.....	24	wal-zyr childrens.....	105	XOPENEX HFA.....	108
VIOKACE.....	74	warfarin sodium.....	48	XOSPATA.....	34
viorele.....	85	water for irrigation, sterile.....	98	XPHOZAH.....	99
VIRACEPT.....	41	WAYRILZ.....	49	XPOVIO (100 MG ONCE	
VIREAD.....	40	WEGOVI.....	98	WEEKLY).....	31
VISTOGARD.....	98	WELIREG.....	31	XPOVIO (40 MG ONCE	
VITAFOL FE+.....	68	wera.....	86	WEEKLY).....	31
VITAFOL-OB+DHA.....	68	WESCAP-PN DHA.....	68	XPOVIO (40 MG TWICE	
VITALARA.....	68	WESNATAL DHA COMPLETE.....	69	WEEKLY).....	31
vitamin d (ergocalciferol).....	68	WESNATE DHA.....	69	XPOVIO (60 MG ONCE	
vitamin k1.....	68	WESTAB PLUS.....	69	WEEKLY).....	31
VITATHELY WITH GINGER.....	68	WESTGEL DHA.....	69	XPOVIO (60 MG TWICE	
VITRAKVI.....	34	WEZLANA.....	92	WEEKLY).....	31
VIVAGUARD LANCETS 30G... 43		WIDE-SEAL DIAPHRAGM 60..	98	XPOVIO (80 MG ONCE	
VIVAGUARD SAFETY		WIDE-SEAL DIAPHRAGM 65..	98	WEEKLY).....	31
LANCETS 28G.....	43	WIDE-SEAL DIAPHRAGM 70..	98	XPOVIO (80 MG TWICE	
VIVJOA.....	26	WIDE-SEAL DIAPHRAGM 75..	98	WEEKLY).....	31
VIZIMPRO.....	34	WIDE-SEAL DIAPHRAGM 80..	99	XROMI.....	30
volnea.....	85	WIDE-SEAL DIAPHRAGM 85..	99	XTAMPZA ER.....	13
VONJO.....	31	WIDE-SEAL DIAPHRAGM 90..	99	XTANDI.....	29
VONVENDI.....	50	WIDE-SEAL DIAPHRAGM 95..	99	xulane.....	86
VOQUEZNA.....	70	WILATE.....	50	XULTOPHY.....	45
VOQUEZNA DUAL PAK.....	70	WINLEVI.....	65	XURIDEN.....	74
VOQUEZNA TRIPLE PAK.....	70	WINREVAIR.....	109	XYNTHA.....	50
VORANIGO.....	31	wixela inhub.....	107	XYNTHA SOLOFUSE.....	50
voriconazole.....	27	wymzya fe.....	86	XYOSTED.....	80
VORTEX VALVE CHAMBER-		WYNZORA.....	65	xyvona.....	14
PEDI MASK.....	98	XACIATO.....	17	XYWAV.....	112
VORTEX VALVED HOLDING		XADAGO.....	36	XYZAL ALLERGY 24HR	
CHAMBER.....	98	XALKORI.....	34	CHILDRENS.....	106
VOSEVI.....	38	xarah fe.....	86	yargesa.....	74
VOWST.....	70	XARELTO.....	48	YESINTEK.....	91
VOXZOGO.....	74	XARELTO STARTER PACK.....	48	YEZTUGO.....	40
VOYDEYA.....	48	XATMEP.....	91	yl folic acid.....	69
VOYXACT.....	76	XCOPRI.....	21	YONSA.....	29
VRAYLAR.....	37	XDEMVY.....	99	YORVIPATH.....	99
VTAMA.....	65	XELJANZ.....	91	YOSPRALA.....	50
VUMERITY.....	60	XELJANZ XR.....	91	YUFLYMA (1 PEN).....	91
VUSION.....	27	XELPROS.....	102	YUFLYMA (2 PEN).....	91
VYALEV.....	36	xelria fe.....	86	YUFLYMA (2 SYRINGE).....	91
vyfemla.....	85	XELSTRYM.....	58	YUFLYMA-CD/UC/HS	
VYKAT XR.....	98	XEMBIFY.....	92	STARTER.....	91

YUPELRI.....	107	ZUBSOLV.....	15
YUSIMRY.....	91	zumandimine.....	86
YUTREPIA.....	109	ZUNVEYL.....	22
yuvafem.....	86	ZURNAL.....	16
zafemy.....	86	ZURZUVAE.....	23
zafirlukast.....	107	ZYBIC.....	13
zaleplon.....	111	ZYCUBO.....	66
ZALVIT.....	69	ZYDELIG.....	34
ZANAFLEX.....	111	ZYKADIA.....	34
ZARXIO.....	49	ZYMFENTRA (1 PEN).....	91
ZAVZPRET.....	27	ZYMFENTRA (2 PEN).....	91
ZEJULA.....	31	ZYMFENTRA (2 SYRINGE).....	91
ZELAPAR.....	36	ZYPITAMAG.....	56
ZELBORAF.....	34	ZYPREXA RELPREVV.....	38
ZELSUVMI.....	65	ZYRTEC.....	106
zelvysia.....	74	ZYRTEC ALLERGY.....	106
ZEMBRACE SYMTOUCH.....	28	ZYRTEC CHILDRENS	
zenatane.....	65	ALLERGY.....	106
ZENPEP.....	74	ZYRTEC-D ALLERGY &	
ZEPBOUND.....	99	SINUS.....	106
ZEPBOUND KWIKPEN.....	99		
ZEPOSIA.....	60		
ZEPOSIA 7-DAY STARTER			
PACK.....	60		
ZEPOSIA STARTER KIT.....	60		
ZERVIAE.....	100		
zidovudine.....	40		
ZIEXTENZO.....	49		
ZILBRYSQ.....	99		
zileuton er.....	107		
ZILXI.....	65		
ZIPHEX.....	69		
ziprasidone hcl.....	38		
ZIRGAN.....	99		
ZITUVIMET.....	45		
ZITUVIMET XR.....	45		
ZITUVIO.....	45		
ZOKINVY.....	99		
ZOLINZA.....	31		
ZOLMITRIPTAN.....	28		
zolmitriptan.....	28		
ZOLPIDEM TARTRATE.....	111		
zolpidem tartrate.....	111		
zolpidem tartrate er.....	111		
ZOMACTON.....	79		
ZOMIG.....	28		
ZONISADE.....	20		
zonisamide.....	20		
ZONTIVITY.....	48		
ZORYVE.....	65		
zovia 1/35 (28).....	86		
ZTALMY.....	21		
ZTLIDO.....	15		

We Speak Your Language

ATTENTION: If you speak English, free language assistance services are available to you. Appropriate auxiliary aids and services to provide information in accessible formats are also available free of charge.

Call 877-469-2583 TTY: 711 or speak to your provider.

ATENCIÓN: Si habla español, tiene a su disposición servicios gratuitos de asistencia lingüística. También se ofrecen, sin costo alguno, ayuda y servicios auxiliares adecuados para proporcionar información en formatos accesibles. Llame al 877-469-2583 TTY: 711 o hable con su proveedor.

تنبيه: إذا كنت تتحدث الإنجليزية، فإن خدمات المساعدة اللغوية المجانية متوفرة لك. تتوفر أيضًا المساعدات والخدمات المساعدة المناسبة لتوفير المعلومات بتنسيقات يسهل الوصول إليها مجانًا. اتصل برقم 877-469-2583 TTY: 711 أو تحدث إلى مزود الخدمة الخاص بك.

注意: 如果您说[中文], 我们将免费为您提供语言协助服务。我们还免费提供适当的辅助工具和服务, 以无障碍格式提供信息。请致电 877-469-2583 (TTY: 711) 或咨询您的服务提供商。

အတိုးပေးခြင်း: အင်္ဂလိပ်ဘာသာဖြင့် အကူအညီဆောင်ရွက်ပေးခြင်း၊ အသုံးပြုနိုင်သည့် အချက်အလက်များကို အကူအညီဆောင်ရွက်ပေးခြင်း၊ အသုံးပြုနိုင်သည့် အချက်အလက်များကို အကူအညီဆောင်ရွက်ပေးခြင်း၊ အသုံးပြုနိုင်သည့် အချက်အလက်များကို အကူအညီဆောင်ရွက်ပေးခြင်း။ 877-469-2583 TTY: 711

LU'U Y: Nếu bạn nói tiếng Việt, chúng tôi cung cấp miễn phí các dịch vụ hỗ trợ ngôn ngữ. Các hỗ trợ và dịch vụ phù hợp để cung cấp thông tin bằng các định dạng dễ tiếp cận cũng được cung cấp miễn phí. Vui lòng gọi số 877-469-2583 TTY: 711 hoặc trao đổi với người cung cấp dịch vụ của bạn.

VËMENDJE: Nëse flisni shqip, shërbime falas të ndihmës së gjuhës janë në dispozicion për ju. Ndhima të përshtatshme dhe shërbime shtesë për të siguruar informacion në formate të përdorshme janë gjithashtu në dispozicion falas. Telefononi 877-469-2583 TTY: 711 ose bisedoni me ofruesin tuaj të shërbimit.

알림: 한국어를 사용하는 경우 언어 지원 서비스를 무료로 이용할 수 있습니다. 정보를 접근 가능한 형식으로 제공받을 수 있는 적절한 보조 기구와 서비스도 무료로 이용할 수 있습니다. 877-469-2583 TTY: 711 번으로 전화하거나 담당 기관에 문의하십시오.

মনোযোগ দিন: যদি আপনি বাংলা বলেন তাহলে আপনার জন্য বিনামূল্যে ভাষা সহায়তা পরিষেবাদি উপলব্ধ রয়েছে। অ্যাক্সেসযোগ্য ফরম্যাটে তথ্য প্রদানের জন্য উপযুক্ত সহায়ক সহযোগিতা এবং পরিষেবাদিও বিনামূল্যে উপলব্ধ রয়েছে। 877-469-2583 TTY: 711 নম্বরে কল করুন অথবা আপনার প্রদানকারীর সাথে কথা বলুন।

UWAGA: Osoby mówiące po polsku mogą skorzystać z bezpłatnej pomocy językowej. Dodatkowe pomoce i usługi zapewniające informacje w dostępnych formatach są również dostępne bezpłatnie. Zadzwoń pod numer 877-469-2583 TTY: 711 lub porozmawiaj ze swoim usługodawcą.

ACHTUNG: Wenn Sie Deutsch sprechen, stehen Ihnen kostenlose Sprachassistentendienste zur Verfügung. Entsprechende Hilfsmittel und Dienste zur Bereitstellung von Informationen in barrierefreien Formaten stehen ebenfalls kostenlos zur Verfügung. Rufen Sie 877-469-2583 TTY: 711 an oder sprechen Sie mit Ihrem Provider.

ATTENZIONE: se parli Italiano, sono disponibili servizi di assistenza linguistica gratuiti. Sono inoltre disponibili gratuitamente ausili e servizi ausiliari adeguati per fornire informazioni in formati accessibili. Chiama l'877-469-2583 TTY: 711 o parla con il tuo fornitore.

注: 日本語を話される場合、無料の言語支援サービスをご利用いただけます。情報をアクセスしやすい形式で提供するための適切な補助器具やサービスも無料でご利用いただけます。877-469-2583 TTY: 711 までお電話いただくか、ご利用の事業者にご相談ください。

ВНИМАНИЕ: Если вы говорите на русский, вам доступны бесплатные услуги языковой поддержки. Соответствующие вспомогательные средства и услуги по предоставлению информации в доступных форматах также предоставляются бесплатно. Позвоните по

телефону 877-469-2583 TTY: 711 или обратитесь к своему поставщику услуг.

PAŽNJA: Ako govorite srpsko-hrvatski, dostupne su vam besplatne usluge jezične pomoći. Odgovarajuća pomoćna pomagala i usluge za pružanje informacija u pristupačnim formatima također su dostupni besplatno. Nazovite 877-469-2583 TTY: 711 ili razgovarajte sa svojim pružateljem usluga.

PAALALA: Kung nagsasalita ka ng Tagalog, magagamit mo ang mga libreng serbisyong tulong sa wika. Magagamit din nang libre ang mga naaangkop na karagdagang tulong at serbisyo upang magbigay ng impormasyon sa mga naa-access na format. Tumawag sa 877-469-2583 TTY: 711 o makipag-usap sa iyong provider.

Discrimination is against the law

Blue Cross Blue Shield of Michigan and Blue Care Network, along with our contracted vendors, comply with Federal civil rights laws and do not discriminate on the basis of race, color, national origin, age, disability, or sex (including sex characteristics, intersex traits; pregnancy or related conditions; sexual orientation; gender identity, and sex stereotypes). Blue Cross Blue Shield of Michigan and Blue Care Network does not exclude people or treat them less favorably because of race, color, national origin, age, disability, or sex.

Blue Cross Blue Shield of Michigan and Blue Care Network, along with our contracted vendors:

- Provide people with disabilities reasonable modifications and free appropriate auxiliary aids and services to communicate effectively with us, such as: qualified sign language interpreters, written information in other formats (large print, audio, accessible electronic formats, other formats).
- Provide free language services to people whose primary language is not English, which may include qualified interpreters and information written in other languages.

If you need reasonable modifications, appropriate auxiliary aids and services, or language assistance services, call the Customer Service number on the back of your card. If you aren't already a member, call 877-469-2583 or, if you're 65 or older, call 888-563-3307, TTY: 711. Here's how you can file a civil rights complaint if you believe that Blue Cross Blue Shield of Michigan and Blue Care Network or any of our contracted vendors have failed to provide these services or discriminated in another way on the basis of race, color, national origin, age, disability, or sex, you can file a grievance in person, by mail, fax, or email with:

Office of Civil Rights Coordinator
600 E. Lafayette Blvd., MC 1302
Detroit, MI 48226

Phone: 888-605-6461, TTY: 711

Fax: 866-559-0578

Email: CivilRights@bcbsm.com

If you need help filing a grievance, the Office of Civil Rights Coordinator is available to help you. You can also file a civil rights complaint with the U.S. Department of Health & Human Services Office for Civil Rights electronically through the [Office for Civil Rights Complaint Portal website](https://www.hhs.gov/ocr/portal) <https://www.hhs.gov/ocr/portal>, or by mail, phone, or email at:

U.S. Department of Health & Human Services

200 Independence Ave, SW

Room 509, HHH Building

Washington, D.C. 20201

Phone: 800-368-1019, TTD: 800-537-7697

Email: OCRComplaint@hhs.gov

Complaint forms are available on the U.S. Department of Health & Human Services [Office for Civil Rights website](https://www.hhs.gov/ocr/complaints/index.html)

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

[This notice is available at Blue Cross Blue Shield of Michigan and Blue Care Network's website: https://www.bcbsm.com/important-information/policies-practices/nondiscrimination-notice/](https://www.hhs.gov/ocr/complaints/index.html)



Nonprofit corporations and independent licensees
of the Blue Cross and Blue Shield Association

bcbsm.com/pharmacy

All trademarks and logos are property of their respective owners in the U.S. and other jurisdictions.

Blue Cross Blue Shield of Michigan Clinical Drug List