

Effective November 2024

# 2024-2025 Drug Formulary

For Federal Employees and Retirees on the Kaiser Foundation Health Plan of Washington

Federal Employees Health Benefits Program Options (FEHB Options)

# Drug Formulary

## INTRODUCTION



### What is a formulary?

A formulary is a list of generic, brand, and specialty drugs. It is used by practitioners to identify drugs that offer the best overall value, considering effectiveness, safety, and cost.

### How is the drug formulary developed?

The formulary is developed by the Kaiser Permanente Pharmacy and Therapeutics (P&T) Committee. The P&T Committee is composed of physicians from various medical specialties, pharmacists, and a consumer member. The P&T Committee reviews and selects the most appropriate drugs in each class for the formulary based on safety, effectiveness, and cost. The P&T Committee meets quarterly to review new and existing drugs to ensure that the formulary remains responsive to the needs of members and providers.

### How do I search the formulary?

Drugs on the formulary are listed by therapeutic class. An alphabetical index is included at the end of this document to assist in locating specific drugs.

Drugs are listed by generic name if a generic is available. If there is no generic available, drugs are listed by the brand name. Drugs are organized by class and drug formulary tier. Drugs administered in a provider's office or in a clinic (e.g., drugs given intravenously) may not be listed on the formulary. For coverage of these drugs, refer to your Benefit Booklet.

### How do I use the formulary to understand my drug coverage?

Drug coverage is based on an individual's contracted benefit. Coverage for a specific drug is subject to each member's medical coverage agreement. Please consult your Benefit Booklet or call Member Service if you have questions about your drug coverage.

Kaiser Permanente will only cover FDA-approved drugs used for non-experimental therapies. Most plans exclude experimental and investigational drugs, over-the-counter drugs, drugs used in the treatment of sexual dysfunction disorders, drugs for anticipated illnesses while traveling, or drugs used for cosmetic purposes. Please consult your Benefit Booklet for limitations and exclusions.

***Medications not listed in this document are not on the formulary at the time of publication.*** The most current information is online at [www.kp.org/wa/formulary](http://www.kp.org/wa/formulary). Non-formulary drugs are not covered unless approved by the health plan as a coverage exception. The prescriber must contact Kaiser Permanente to determine the medical necessity of the non-formulary medication. An alternative formulary medication will be recommended when clinically appropriate. If a coverage exception is not approved, the patient is responsible for the full price of the drug.

***Prior authorization requests are considered based on coverage criteria requirements approved by the P&T Committee.*** To request review of an exception to Kaiser Permanente requirements for coverage of prescription drugs, you or your prescriber may contact Kaiser

Permanente Member Services at 1-888-630-4636 and request an exception. If the evidence your prescriber provides meets medical necessity, an exception may be approved. Exceptions to required therapy that may be approved include: contraindications, clinical factors associated with adverse reactions, clinical factors reducing effect, other risks of clinical harm, and barriers to compliance with clinical care. Your prescriber may also request temporary coverage while the exception request is being processed.

**Generic drugs are substituted when available and allowed by your prescriber.** When a generic is available, the brand-name drug is generally considered non-formulary and subject to a higher cost share.

**The drug formulary is updated periodically and is subject to change.** If a drug will be removed from the formulary, members who filled the drug in the prior three months will be notified by letter of the upcoming change. A formulary change notice will also be posted on the member website at least 60 days prior to the effective date.

## **What are the methods that Kaiser Permanente uses to ensure appropriate and safe use of formulary drugs?**

### **Prior Authorization (PA)**

The P&T Committee determines that certain drugs should require prior authorization before they will be covered. These drugs most often have alternatives on the formulary, safety concerns, or a high potential for inappropriate use. To request coverage for prior authorization drugs, you or your prescriber must contact Kaiser Permanente. Drugs requiring prior authorization are indicated with a “PA” superscript next to the drug name.

### **Quantity Limit (QL)**

A quantity limit defines how much of a particular drug you can get during a specific time period or the maximum days supply that you can get at once. The P&T Committee determines if a drug should have a quantity limit. To request exceptions to quantity limits, your prescriber must contact Kaiser Permanente. Drugs with quantity limits are indicated with “QL” superscript next to the drug name.

### **High Dose Pain Medicine Prescriber Review**

Members on high doses of certain pain medicines will need their prescriber to confirm safety standards are in place annually to continue coverage of therapy.

### **Drugs Limited to Select Pharmacies**

Some drugs are required to be dispensed from a preferred specialty pharmacy vendor. Members with an out-of-network benefit may use other pharmacies; however, they may pay a higher cost share.

Please consult your Benefit Booklet for limitations and exclusions. Drugs limited to select pharmacies are listed on the [www.kp.org/wa/formulary](http://www.kp.org/wa/formulary) webpage.

### **Covered Diabetic Supplies**

Some diabetic supplies may be covered at a Tier 1 cost share if they are filled as a prescription. These items are:

- Preferred blood glucose strips:
  - One Touch Verio
  - One Touch Ultra
  - Prodigy – prior authorization required
  - Contour Next – prior authorization required

- Freestyle – prior authorization required
- Disposable insulin syringes and needles
- Lancing devices and lancets

Preferred blood glucose meters are covered only when filled through mail order pharmacy.

### **Mail Order Pharmacy Service**

Mail order is convenient and efficiently utilizes Kaiser Permanente's resources. This service works best for drugs that must be taken on regular basis, such as birth control pills and drugs for high blood pressure, high cholesterol, or other chronic conditions.

To begin using mail order, ask your prescriber to send your prescription directly to the Mail Order Pharmacy.

To transfer an existing prescription from a retail pharmacy, contact the Mail Order Pharmacy.

**Address:** Kaiser Permanente Mail Order Pharmacy PO Box

34383

Seattle, WA 98124-1383

**Phone:** 800-245-RXRX (1-800-245-7979)

**Fax:** 206-630-7950, or toll-free 1-800-350-1683

### **Specialty Drugs**

Specialty drugs are high-cost drugs prescribed by a physician for the treatment of complex conditions. Some specialty products are dispensed from a preferred specialty pharmacy vendor.

### **Over-the-Counter (OTC) Drugs**

A few plans offer coverage for OTC drugs. For these plans, a list of covered OTC drugs can be found in *Appendix A*. You may contact Member Service at 1-888-630-4636 to find if you have OTC drug coverage.

### **Preventative Medications and Preferred Contraceptives**

In accordance with the Affordable Care Act (ACA) requirements for preventive services, most plans cover preventative care medicines and contraceptives in full. If your plan offers ACA benefits, all prescribed FDA approved contraceptive methods from the Kaiser Permanente formulary list will be covered in full when obtained in-network. For plans with out-of-network (OON) benefits, contraceptives will be subject to the OON cost-share. The list of the preventative medications covered in full is available on the [www.kp.org/wa/formulary](http://www.kp.org/wa/formulary) webpage.

Please consult your Benefit Booklet under "Preventive Services" or call Member Service if you have questions about your coverage for these drugs.

If you request coverage for a non-preferred contraceptive, we will contact your provider to recommend a preferred generic or therapeutically equivalent product. If you and your provider determine that the preferred contraceptive(s) would be medically inappropriate, your provider must request a contraceptive waiver. If waiver is completed, the requested non-preferred contraceptive will be covered in full.

## **Excluded Prescription Products for Medications that have Over-The-Counter (OTC) Alternatives**

There are certain prescription products that have the same or similar products available over-the- counter (OTC) without a prescription. In certain cases, Kaiser Permanente will not cover the prescription product. The following prescription drug products are excluded from coverage: esomeprazole magnesium (Nexium), omeprazole/sodium bicarbonate (Zegerid), budesonide nasal spray (Rhinocort Aqua), triamcinolone nasal spray (Nasacort), and fluticasone propionate nasal spray (Flonase).

## **How do I get additional information?**

Please contact Member Service at 1-888-630-4636 with any questions or concerns regarding the information contained in this document.

**The most current drug formulary is available at [www.kp.org/wa/formulary](http://www.kp.org/wa/formulary).**

## Kaiser Foundation Health Plan of Washington

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Drug Name	Drug Tier	Notes	Drug Name	Drug Tier	Notes
Analgesics - Drugs for Pain and Inflammation			ibuprofen oral tablet 400 mg, 600 mg, 800 mg	1	
ANAPROX DS	3		ibuprofen-famotidine	5	PA; QL
ARTHROTEC	3		INDOCIN	3	
CELEBREX	3		indomethacin er	1	
celecoxib oral	1		indomethacin oral capsule	1	
COXANTO	5	PA; QL	indomethacin oral suspension	3	
DAYPRO	3		indomethacin rectal suppository 50 mg	3	
DICLOFENAC PATCH 1.3%	3		ketoprofen er	3	
diclofenac potassium oral capsule	3	PA	ketoprofen oral	3	
diclofenac potassium oral tablet 25 mg	5	PA; QL	ketorolac tromethamine injection solution 15 mg/ml	1	
diclofenac potassium oral tablet 50 mg	1		KETOROLAC TROMETHAMINE INTRAMUSCULAR SOLUTION 30 MG/ML		
diclofenac sodium er	1		ketorolac tromethamine intramuscular solution 60 mg/2ml	1	
diclofenac sodium external gel 1 %	3		ketorolac tromethamine oral	3	
diclofenac sodium external solution 1.5 %	3		ketorolac tromethamine solution 30 mg/ml injection	1	
diclofenac sodium external solution 2 %	3	PA	KETOROLAC TROMETHAMINE SOLUTION 30 MG/ML INJECTION		
diclofenac sodium oral	1		KIPROFEN	3	
diclofenac-misoprostol	3		LICART	3	
DICLOFONO	3		LODINE	3	
diflunisal oral	1		LOFENA	5	PA; QL
DOLOBID	3		meclofenamate sodium oral	1	
DUEXIS	5	PA; QL	mefenamic acid oral	3	
EC-NAPROSYN	3		meloxicam oral capsule	3	
ec-naproxen	3		MELOXICAM ORAL SUSPENSION	3	
ELYXYB	5	PA; QL	meloxicam oral tablet	1	
etodolac	1				
etodolac er	3				
fenoprofen calcium oral	3				
FLECTOR	3				
flurbiprofen oral	1				
ibuprofen oral suspension 100 mg/5ml	3				

Drug Name	Drug Tier	Notes	Drug Name	Drug Tier	Notes
nabumetone oral	1		ascomp-codeine	3	QL
NALFON	3		bac	1	
NAPRELAN ORAL TABLET EXTENDED RELEASE 24 HOUR 375 MG, 500 MG	3		BELBUCA	3	PA; QL
NAPRELAN ORAL TABLET EXTENDED RELEASE 24 HOUR 750 MG	3	PA	BENZHYDROCODONE-ACETAMINOPHEN	3	QL
NAPROSYN	3		buprenorphine	3	PA; QL
naproxen dr	3		butalbital-acetaminophen capsule 50-300 mg oral	3	
naproxen oral suspension	1		BUTALBITAL-ACETAMINOPHEN CAPSULE 50-300 MG ORAL	3	
naproxen oral tablet	1		butalbital-acetaminophen oral tablet	3	
naproxen oral tablet delayed release	3		butalbital-apap-caff-cod	3	QL
naproxen sodium er	3		butalbital-apap-caffeine oral capsule	3	
naproxen sodium oral tablet 275 mg, 550 mg	1		butalbital-apap-caffeine oral tablet	1	
naproxen-esomeprazole mg	5	PA; QL	butalbital-asa-caff-codeine	3	QL
OXaprozin oral capsule	5	PA; QL	butalbital-aspirin-caffeine	1	
oxaprozin oral tablet	3		butorphanol tartrate nasal	3	QL
PENNSAID	3	PA	BUTRANS	3	PA; QL
piroxicam oral	1		codeine sulfate	1	QL
RELAFEN DS	3	PA	CONZIP	3	PA; QL
salsalate oral	1		DILAUDID ORAL	3	QL
SPRIX	3		endocet	1	QL
sulindac oral	1		ESGIC	3	
TOLECTIN 600	3		fentanyl citrate buccal lozenge on a handle	5	PA; QL
tolmetin sodium	1		FENTANYL CITRATE BUCCAL TABLET	5	PA; QL
VIMOVO	5	PA; QL	fentanyl transdermal patch 72 hour 100 mcg/hr, 12 mcg/hr, 25 mcg/hr, 50 mcg/hr, 75 mcg/hr	1	PA; QL
ZIPSOR	3	PA			
ZYNRELEF	3				
<b>Analgesics - Drugs for Pain</b>					
acetaminophen-codeine	1	QL	fentanyl transdermal patch 72 hour 37.5 mcg/hr, 62.5 mcg/hr, 87.5 mcg/hr	3	PA; QL
ALLZITAL	3				
APADAZ	3	QL			
apap-caff-dihydrocodeine	3	QL	FIORICET	3	

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Drug Name	Drug Tier	Notes	Drug Name	Drug Tier	Notes
FIORICET/CODEINE	3	QL	MS CONTIN	3	PA; QL
hydrocodone bitartrate er	3	PA; QL	NALOCET	3	QL
hydrocodone-acetaminophen oral solution 10-325 mg/15ml	3	QL	NUCYNTA	3	PA; QL
			NUCYNTA ER	3	PA; QL
hydrocodone-acetaminophen oral solution 2.5-108 mg/5ml, 5-217 mg/10ml, 7.5-325 mg/15ml	1	QL	oxycodone hcl oral capsule	3	QL
			oxycodone hcl oral concentrate	1	QL
			oxycodone hcl oral solution	1	QL
hydrocodone-acetaminophen oral tablet 10-300 mg, 5-300 mg, 7.5-300 mg	3	QL	oxycodone hcl oral tablet	1	QL
			OXYCODONE HCL ORAL TABLET ABUSE-DETERRENT 15 MG	5	PA; QL
hydrocodone-acetaminophen oral tablet 10-325 mg, 5-325 mg, 7.5-325 mg	1	QL	OXYCODONE-ACETAMINOPHEN ORAL SOLUTION 10-300 MG/5ML	5	PA; QL
hydrocodone-ibuprofen	3	QL			
hydromorphone hcl er	3	PA; QL	OXYCODONE-		
hydromorphone hcl oral	1	QL	ACETAMINOPHEN		
hydromorphone hcl rectal	1	QL	ORAL SOLUTION 5-325 MG/5ML	2	QL
HYSINGLA ER	3	PA; QL	OXYCODONE-		
levorphanol tartrate oral	1	PA; QL	ACETAMINOPHEN		
meperidine hcl oral tablet	3	QL	ORAL TABLET 10-300 MG, 2.5-300 MG, 5-300 MG, 7.5-300 MG	3	QL
methadone hcl intensol	1	QL			
methadone hcl oral	1	QL	oxycodone-		
METHADOSE ORAL CONCENTRATE 10 MG/ML	3	QL	acetaminophen oral tablet 10-325 mg, 2.5-325 mg, 5-325 mg, 7.5-325 mg	1	QL
methadose oral tablet soluble	1	QL	OXYCONTIN	2	PA; QL
			oxymorphone hcl	3	QL
METHADOSE SUGAR-FREE	3	QL	oxymorphone hcl er	3	PA; QL
morphine sulfate (concentrate)	1	QL	pentazocine-naloxone hcl	3	QL
morphine sulfate er beads	3	PA; QL	PERCOSET	3	QL
morphine sulfate er oral capsule extended release 24 hour	3	PA; QL	PROLATE ORAL SOLUTION	5	PA; QL
morphine sulfate er oral tablet extended release	1	PA; QL	PROLATE ORAL TABLET	3	QL
			QDOLO	5	PA; QL
morphine sulfate oral	1	QL	ROXICODONE	3	QL
morphine sulfate rectal	1	QL	ROXYBOND	5	PA; QL
			SEGLENTIS	3	PA; QL

Effective Date: 11/01/2024

Drug Name	Drug Tier	Notes	Drug Name	Drug Tier	Notes
tencon	3		lidocaine hcl (pf) injection solution 0.5 %, 1.5 %	3	
TRAMADOL HCL (ER BIPHASIC) ORAL CAPSULE EXTENDED RELEASE 24 HOUR	3	PA; QL	lidocaine hcl (pf) injection solution 1 %, 2 %	1	
tramadol hcl (er biphasic) oral tablet extended release 24 hour	3	PA; QL	lidocaine hcl external cream 3 %	3	
tramadol hcl er	3	PA; QL	LIDOCAINE HCL EXTERNAL CREAM 4.12 %	3	
TRAMADOL HCL ORAL SOLUTION	5	PA; QL	lidocaine hcl external lotion	3	PA
tramadol hcl oral tablet 100 mg, 50 mg	1	QL	lidocaine hcl external solution	3	
tramadol hcl oral tablet 25 mg	3	PA; QL	lidocaine hcl injection solution 0.5 %	1	
tramadol-acetaminophen	1	QL	LIDOCAINE HCL INJECTION SOLUTION		
TREZIX	3	QL	PREFILLED SYRINGE 10 MG/ML, 100 MG/5ML,	3	
XTAMPZA ER	5	PA; QL	200 MG/10ML		
<b>Anesthetics</b>					
AGONEAZE	3		LIDOCAINE HCL SOLUTION 1 %	3	
ANODYNE LPT	3		INJECTION		
ASTERO	3		lidocaine hcl solution 1 % injection	1	
BRUSELIX EXTERNAL CREAM	3		LIDOCAINE HCL SOLUTION 2 %	3	
COCAINE HCL NASAL	3		INJECTION		
CRYODOSE TA	3		lidocaine hcl solution 2 % injection	1	
DERMACINRX LIDOGEL	3		lidocaine hcl urethral/mucosal	1	
EHA	3		LIDOCAINE-EPINEPHRINE (PF)		
ethyl chloride	3		INJECTION SOLUTION 1 %-1:100000	3	
GEBAUERS PAIN EASE	3				
GEBAUERS SPRAY AND STRETCH	3		glydo	1	
			lidocaine-epinephrine injection solution 1 %-1:100000	3	
GOPRELTO	3		lidocaine-prilocaine	1	
LDO PLUS	3		LIDOCAN	3	
LEVATIO	3		LIDODERM	3	
LIDO BDK	3		LIDOMAR	3	
lidocaine external ointment 5 %	3		lidopin external cream 3 %	3	
lidocaine external patch 5 %	1				

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Drug Name	Drug Tier	Notes	Drug Name	Drug Tier	Notes
LIDOREX	3		ZTLIDO	3	
LIDORX	3	PA	<b>Anti-Addiction / Substance Abuse Treatment Agents</b>		
LIDO-SORB	3	PA	acamprosate calcium	1	
LIDOTHOL EXTERNAL PATCH	3		buprenorphine hcl sublingual	1	QL
LIDOTRAL EXTERNAL CREAM	3		buprenorphine hcl-naloxone hcl	1	QL
LIDOTRAL EXTERNAL LIQUID	3		bupropion hcl er (smoking det)	1	
LIDOTRAN	3		disulfiram oral	1	
LIVIXIL PAK	3		ft nicotine mini	2	
LYDEXA	3		ft nicotine mouth/throat	2	
NEUROZYL	3		goodsense nicotine mouth/throat gum 2 mg	2	
NUMBRINO	3		goodsense nicotine mouth/throat lozenge 4 mg	2	
premium lidocaine	3		habitrol	1	
PRILOVIX	3		KLOXXADO	3	
PRILOVIX LITE	3		lofexidine hcl	5	PA; QL
PRILOVIX LITE PLUS	3		LUCEMYRA	5	PA; QL
PRILOVIX PLUS	3		naloxone hcl injection	1	
prilovix ultralite	1		naloxone hcl nasal	1	
prilovix ultralite plus	1		naltrexone hcl oral	1	
PROXIVOL	3		NARCAN	2	
RELADOR PAK	3		NICORETTE MINI	2	
RELADOR PAK PLUS	3		NICORETTE MOUTH/THROAT GUM 2 MG	2	
SOOTHEE	3		NICORETTE MOUTH/THROAT LOZENGE	2	
TETRACAINE HCL INJECTION	3		nicotine mini	2	
TRIDACAINE II	3		nicotine polacrilex mini	2	
TRIDACAINE III	3		nicotine polacrilex mouth/throat	2	
TRILOCAINE	3		nicotine step 1	1	
XYLOCAINE	3		nicotine step 2	1	
XYLOCAINE/EPINEPHRINE INJECTION SOLUTION 1 %-1:100000	3		nicotine step 3	1	
XYLOCAINE-MPF	3				
ZERUVIA	3				
ZIONODIL	3	PA			
ZIONODIL 100	3	PA			

Drug Name	Drug Tier	Notes	Drug Name	Drug Tier	Notes
nicotine transdermal kit	1		cefazolin sodium injection solution reconstituted 1 gm	1	
nicotine transdermal patch 24 hour 21 mg/24hr	1		cefdinir	1	
OPVEE	3	PA	cefepime hcl injection	3	
REXTOVY	3		cefixime	1	
SUBOXONE	3	QL	cefpodoxime proxetil	3	
varenicline tartrate	1		cefprozil	1	
varenicline tartrate (starter)	1		ceftazidime injection solution reconstituted 1 gm	1	
varenicline tartrate(continue)	1		ceftriaxone sodium injection solution reconstituted 1 gm, 2 gm, 250 mg, 500 mg	1	
VIVITROL	4	QL	cefuroxime axetil	1	
ZIMHI	3		cephalexin oral capsule 250 mg, 500 mg	1	
ZUBSOLV	3	QL	cephalexin oral capsule 750 mg	3	
<b>Antibacterials</b>			cephalexin oral suspension reconstituted	1	
AEMCOLO	3	PA	cephalexin oral tablet	3	
amoxicillin	1		CIPRO	3	
amoxicillin-potassium clavulanate	1		ciprofloxacin hcl oral	1	
amoxicillin-potassium clavulanate er	3		clarithromycin er	3	
ampicillin	1		clarithromycin oral	1	
ampicillin sodium injection solution reconstituted 1 gm, 125 mg, 250 mg, 500 mg	1		CLEOCIN	3	
ARIKAYCE	3		CLEOCIN PHOSPHATE INJECTION SOLUTION 300 MG/2ML	3	
AUGMENTIN	3		clindamycin hcl oral	1	
AUGMENTIN ES-600	3		clindamycin palmitate hcl	1	
avidoxy	1		clindamycin phosphate vaginal	1	
azithromycin oral	1		CLINDESSE	3	
BACTRIM	3		colistimethate sodium (cba)	3	
BACTRIM DS	3		COLY-MYCIN M	3	
BAXDELA ORAL	5	QL	demeclacycline hcl	3	
BICILLIN L-A	2		dicloxacillin sodium	1	
cefaclor	3				
cefaclor er	3				
cefadroxil	1				

Drug Name	Drug Tier	Notes	Drug Name	Drug Tier	Notes
DIFICID	5	PA; QL	LINCOCIN	3	
DORYX MPC	5	PA; QL	lincomycin hcl injection	3	
doxycycline hyclate oral capsule	1		linezolid oral	1	QL
doxycycline hyclate oral tablet	1		MACROBID	3	
doxycycline hyclate oral tablet delayed release 100 mg, 150 mg, 200 mg, 50 mg, 75 mg	3		MACRODANTIN	3	
DOXYCYCLINE HYCLATE ORAL TABLET DELAYED RELEASE 80 MG	3		mafenide acetate external	3	
doxycycline monohydrate oral capsule	1		methenamine hippurate	1	
doxycycline monohydrate oral suspension reconstituted	3		methenamine mandelate oral	3	
doxycycline monohydrate oral tablet	1		metronidazole oral capsule	3	
E.E.S. 400	3		metronidazole oral tablet	1	
E.E.S. GRANULES	3		metronidazole vaginal	1	
ERYPED 200	3		minocycline hcl er	3	PA
ERYPED 400	3		minocycline hcl oral capsule	1	
ERY-TAB	3		minocycline hcl oral tablet	3	
erythromycin base oral	3		MINOLIRA	3	PA
erythromycin ethylsuccinate oral suspension reconstituted	1		monodoxine nl	1	
erythromycin ethylsuccinate oral tablet	3		moxifloxacin hcl oral	1	
erythromycin oral	3		mupirocin cream	1	
FIRVANQ	2		mupirocin ointment	1	
FLAGYL	3		neomycin sulfate oral	1	
fosfomycin tromethamine	3		neomycin-polymyxin b gu	3	
gentamicin sulfate external	1		nitrofurantoin macrocrystal	1	
HIPREX	3		nitrofurantoin monohydrate macrocrystals	1	
HUMATIN	3		nitrofurantoin oral suspension 25 mg/5ml, 50 mg/10ml	1	
levofloxacin oral	1		NITROFURANTOIN ORAL SUSPENSION 50 MG/5ML	5	PA; QL
LIKMEZ	3	PA	NUVESSA	3	
			NUZYRA ORAL	5	QL
			ofloxacin oral	3	
			penicillin v potassium	1	
			SEYSARA	5	PA; QL

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Drug Name	Drug Tier	Notes	Drug Name	Drug Tier	Notes
SILVADENE	3		dabigatran etexilate mesylate	1	
silver nitrate external	3		ELIQUIS	3	PA
silver sulfadiazine external	1		ELIQUIS DVT/PE STARTER PACK	3	PA
SIVEXTRO ORAL	4	QL	enoxaparin sodium	1	
SOLOSEC	3		fondaparinux sodium	4	QL
ssd	1		FRAGMIN SUBCUTANEOUS SOLUTION 10000 UNIT/4ML		
streptomycin sulfate intramuscular	3		FRAGMIN SUBCUTANEOUS SOLUTION 95000 UNIT/3.8ML	3	
sulfadiazine oral	3		FRAGMIN SUBCUTANEOUS SOLUTION PREFILLED SYRINGE		
sulfamethoxazole-trimethoprim oral	1		heparin sodium (porcine) injection solution 1000 unit/ml, 10000 unit/ml, 5000 unit/ml	1	
SULFAMYLYON	3		heparin sodium (porcine) pf	1	
sulfatrim pediatric	1		jantoven	1	
TARGADOX	3		LOVENOX	1	
tazicef injection	1		PRADAXA ORAL CAPSULE	1	
tetracycline hcl oral capsule	1		PRADAXA ORAL PACKET	5	PA; QL
TETRACYCLINE HCL ORAL TABLET	3		REGIOCIT	3	
tinidazole oral	3		SAVAYSA	3	PA
trimethoprim oral	1		warfarin sodium oral	1	
VANCOCIN	5	PA; QL	XARELTO ORAL SUSPENSION RECONSTITUTED	5	PA; QL
vancomycin hcl oral capsule	1	QL	XARELTO ORAL TABLET	2	PA
vancomycin hcl oral solution reconstituted	1		XARELTO STARTER PACK	2	PA
VANDAZOLE	3		<b>Anticonvulsants - Drugs for Seizures</b>		
VIBRAMYCIN	3		APTIOM	5	PA; QL
XACIATO	3		BANZEL	5	QL
XIFAXAN	5	PA; QL			
ZITHROMAX ORAL	3				
ZITHROMAX TRI-PAK	3				
ZITHROMAX Z-PAK	3				
ZYVOX ORAL SUSPENSION RECONSTITUTED	5	QL			
ZYVOX ORAL TABLET	5	PA; QL			
<b>Anticoagulants</b>					
ARIXTRA	5	PA; QL			

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Drug Name	Drug Tier	Notes	Drug Name	Drug Tier	Notes
BRIVIACT ORAL	5	PA; QL	LAMICTAL ODT	3	PA
carbamazepine er	1		LAMICTAL STARTER	3	PA
carbamazepine oral	1		LAMICTAL XR	3	PA
CARBATROL	3		lamotrigine er	3	
CELONTIN	3		lamotrigine oral kit	3	
clobazam	1		lamotrigine oral tablet	1	
DEPAKOTE	3		lamotrigine oral tablet chewable	1	
DEPAKOTE ER	3		lamotrigine oral tablet dispersible	3	
DEPAKOTE SPRINKLES	3		lamotrigine starter kit-blue	3	
DIACOMIT	5	PA; QL	lamotrigine starter kit-green	3	
diazepam rectal	1	QL	lamotrigine starter kit-orange	3	
DILANTIN INFATABS	3		levetiracetam er	1	
DILANTIN ORAL CAPSULE 100 MG	3		levetiracetam oral	1	
DILANTIN ORAL CAPSULE 30 MG	2		LIBERVANT	3	PA; QL
DILANTIN ORAL SUSPENSION	3		methsuximide	2	
DILANTIN-125	3		MOTPOLY XR	5	PA; QL
divalproex sodium er	1		MYSOLINE	5	PA; QL
divalproex sodium oral	1		NAYZILAM	2	PA; QL
ELEPSIA XR	5	PA; QL	NEURONTIN	3	
EPIDIOLEX	5	PA; QL	ONFI	5	PA; QL
epitol	1		oxcarbazepine	1	
EPRONTIA	3	PA	oxcarbazepine er	3	
ethosuximide oral	1		OXTELLAR XR	3	
felbamate	3	QL	pentobarbital sodium injection	3	
FELBATOL	5	PA; QL	phenobarbital oral	1	
FINTEPLA	5	PA; QL	phenobarbital sodium injection solution 130 mg/ml	1	
FYCOMPA	3	PA; QL	phenytek	3	
gabapentin oral capsule	1		phenytoin infatabs	1	
gabapentin oral solution	1		phenytoin oral	1	
gabapentin oral tablet 600 mg, 800 mg	1		phenytoin sodium extended oral capsule 100 mg	1	
KEPPRA ORAL	3				
KEPPRA XR	3				
lacosamide oral	1				
LAMICTAL	3	PA			

Drug Name	Drug Tier	Notes	Drug Name	Drug Tier	Notes	
phenytoin sodium extended oral capsule 200 mg, 300 mg	3		ZONISADE	3	PA	
phenytoin sodium injection	1		zonisamide oral	1		
primidone oral tablet 125 mg	3	PA; QL	ZTALMY	5	PA; QL	
primidone oral tablet 250 mg, 50 mg	1	QL	<b>Antidementia Agents - Drugs for Alzheimer's Disease and Dementia</b>			
QUDEXY XR	3	PA	ADLARITY	3	PA	
roweepra	1		ARICEPT	3		
rufinamide	5	QL	donepezil hcl	1		
SABRIL	5	PA; QL	EXELON	3		
SPRITAM	3		galantamine hydrobromide	1		
subvenite	1		galantamine hydrobromide er	1		
subvenite starter kit-blue	3		memantine hcl er	3	PA	
subvenite starter kit-green	3		memantine hcl oral solution	3		
subvenite starter kit-orange	3		memantine hcl oral tablet 10 mg, 5 mg	1		
SYMPAZAN	5	QL	memantine hcl oral tablet 28 x 5 mg & 21 x 10 mg	3		
TEGRETOL	3		NAMENDA TITRATION PAK	3		
TEGRETOL-XR	3		NAMENDA XR	3	PA	
tiagabine hcl	3		NAMZARIC	3		
TOPAMAX	3		rivastigmine	3		
TOPAMAX SPRINKLE	3		rivastigmine tartrate	1		
topiramate er	3	PA	<b>Antidepressants</b>			
topiramate oral	1		amitriptyline hcl oral	1		
TRILEPTAL	3		amoxapine	1		
TROKENDI XR	3	PA	ANAFRANIL	3		
valproic acid oral	1		APLENZIN	3		
VALTOCO	2	PA; QL	AUVELITY	5	PA; QL	
vigabatrin	5	PA; QL	bupropion hcl er (sr)	1		
vigadron	5	PA; QL	bupropion hcl er (xl) oral tablet extended release	1		
VIGAFYDE	5	PA; QL	24 hour 150 mg, 300 mg			
vigpoder	5	PA; QL	BUPROPION HCL ER (XL) ORAL TABLET EXTENDED RELEASE 24 HOUR 450 MG	3	PA	
VIMPAT ORAL	3		bupropion hcl oral	1		
XCOPRI	5	PA; QL				
ZARONTIN	3					
ZONEGRAN	3					

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Drug Name	Drug Tier	Notes	Drug Name	Drug Tier	Notes
CELEXA	3		fluvoxamine maleate er	3	
chlordiazepoxide-amitriptyline	3	QL	FORFIVO XL	3	PA
CITALOPRAM HYDROBROMIDE ORAL CAPSULE	3	PA	imipramine hcl oral	1	
citalopram hydrobromide oral solution	1		imipramine pamoate	3	
citalopram hydrobromide oral tablet	1		LEXAPRO	3	
clomipramine hcl oral	1		MARPLAN	3	
CYMBALTA	3		mirtazapine oral	1	
desipramine hcl oral	1		NARDIL	3	
DESVENLAFAKINE ER (authorized generic Khedezla)	3	PA	nefazodone hcl	3	
desvenlafaxine succinate er	1		NORPRAMIN	3	
doxepin hcl oral capsule	1		nortriptyline hcl oral	1	
doxepin hcl oral concentrate	1		olanzapine-fluoxetine hcl	3	
DRIZALMA SPRINKLE	3		PAMELOR	3	
duloxetine hcl oral capsule delayed release particles 20 mg, 30 mg, 60 mg	1		PARNATE	3	
duloxetine hcl oral capsule delayed release particles 40 mg	3		paroxetine hcl	1	
EFFEXOR XR	3		paroxetine hcl er	1	
EMSAM	5		paroxetine mesylate	3	
escitalopram oxalate oral	1		PAXIL	3	
FETZIMA	3	PA	PAXIL CR	3	
FETZIMA TITRATION	3	PA	perphenazine-amitriptyline	1	
fluoxetine hcl (pmdd)	3		phenelzine sulfate oral	1	
fluoxetine hcl oral capsule	1		PRISTIQ	3	
fluoxetine hcl oral capsule delayed release	3		protriptyline hcl	1	
fluoxetine hcl oral solution	1		PROZAC	3	
fluoxetine hcl oral tablet	1		REMERON	3	
fluvoxamine maleate	1		REMERON SOLTAB	3	
			SERTRALINE HCL ORAL CAPSULE	3	
			sertraline hcl oral concentrate	1	
			sertraline hcl oral tablet	1	
			SPRAVATO (56 MG DOSE)	5	PA; QL
			SPRAVATO (84 MG DOSE)	5	PA; QL
			SYMBYAX	3	
			tranylcypromine sulfate	1	

Drug Name	Drug Tier	Notes	Drug Name	Drug Tier	Notes
trazodone hcl oral	1		meclizine hcl oral tablet 12.5 mg, 25 mg	3	
trimipramine maleate oral	3		metoclopramide hcl injection	1	
TRINTELLIX	3	PA; QL	metoclopramide hcl oral solution	1	
VENLAFAKINE BESYLADE ER	3		metoclopramide hcl oral tablet	1	
venlafaxine hcl	1		metoclopramide hcl oral tablet dispersible	3	
venlafaxine hcl er oral capsule extended release 24 hour	1		ondansetron hcl injection	1	
venlafaxine hcl er oral tablet extended release 24 hour	3		ondansetron hcl oral	1	
VIIBRYD	3	PA	ondansetron odt oral tablet dispersible 16 mg	3	PA
vilazodone hcl	3	PA	ondansetron odt oral tablet dispersible 4 mg, 8 mg	1	
WELLBUTRIN SR	3		perphenazine oral	1	
WELLBUTRIN XL	3		ZURZUVAE	5	PA; QL
ZOLOFT	3		PHENERGAN	3	
<b>Antiemetics - Drugs for Nausea and Vomiting</b>			prochlorperazine	1	
AKYNZEO ORAL	3		prochlorperazine edisylate injection	1	
ANZEMET	3		prochlorperazine maleate oral	1	
aprepitant oral	1		promethazine hcl injection	3	
aprepitant oral capsule 125 mg, 80 & 125 mg, 80 mg	1		promethazine hcl oral	1	
aprepitant oral capsule 40 mg	3		promethazine hcl rectal	1	
BONJESTA	3	PA	promethegan	1	
compro	1		REGLAN	3	
DICLEGIS	3	PA	SANCUSO	3	PA
dimenhydrinate injection	1		scopolamine	3	
doxylamine-pyridoxine	3	PA	SYNDROS	3	
dronabinol	1		TIGAN	3	PA
EMEND ORAL	3		TRANSDERM-SCOP	3	
EMEND TRI-PACK	3		trimethobenzamide hcl oral	3	PA
GIMOTI	5	PA	VARUBI (180 MG DOSE)	3	PA; QL
granisetron hcl oral	1		<b>Antifungals</b>		
MARINOL	3		ANCOBON	5	PA; QL
			BREXAFEMME	3	PA

Drug Name	Drug Tier	Notes	Drug Name	Drug Tier	Notes
ciclodan	1		MICONAZOLE-ZINC OXIDE-PETROLAT	3	
ciclopirox external	1		naftifine hcl	3	
ciclopirox olamine external	1		NAFTIN	3	
clotrimazole external	3		NOXAFL ORAL PACKET	3	
clotrimazole mouth/throat	1		NOXAFL ORAL SUSPENSION	5	PA; QL
clotrimazole-betamethasone	1		NOXAFL ORAL TABLET DELAYED RELEASE	5	PA
CRESEMBA ORAL	4	PA; QL	nyamyc	1	
DIFLUCAN ORAL SUSPENSION RECONSTITUTED	3		nystatin external	1	
DIFLUCAN ORAL TABLET 100 MG, 200 MG	3		nystatin mouth/throat	1	
econazole nitrate external	3		nystatin oral	1	
ECOZA	3		nystatin-triamcinolone	1	
ERTACZO	3		nystop	1	
EXELDERM	3		ORAVIG	3	
exoderm	3		oxiconazole nitrate	3	
fluconazole oral	1		OXISTAT	3	
flucytosine oral	4	QL	posaconazole oral suspension	5	PA; QL
griseofulvin microsize oral	1		posaconazole oral tablet delayed release	5	PA
griseofulvin ultramicrosize	1		SPORANOX	3	PA
GYNIAZOLE-1	3		tavaborole	3	PA
itraconazole oral	1	PA	terbinafine hcl oral	1	
JUBLIA	3	PA	terconazole vaginal cream	1	
ketoconazole external cream	1		terconazole vaginal suppository	3	
ketoconazole external foam	3		TOLSURA	3	PA
ketoconazole external shampoo	1		VFEND	5	PA
ketoconazole oral	1		VIVJOA	5	PA; QL
ketodan	3		voriconazole oral	1	
klayesta	1		VUSION	3	
LULICONAZOLE	3		<b>Antigout Agents</b>		
LUZU	3		allopurinol oral tablet 100 mg, 300 mg	1	
miconazole 3	3		allopurinol oral tablet 200 mg	3	PA
			colchicine oral	1	

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Drug Name	Drug Tier	Notes	Drug Name	Drug Tier	Notes
colchicine-probenecid	1		MIGERGOT	2	
febuxostat	1		MIGRALAN	5	PA
GLOPERBA	3		naratriptan hcl	1	
MITIGARE	3		NURTEC	3	PA; QL
probenecid	1		QULIPTA	5	PA; QL
ULORIC	3		RELPAX	3	
<b>Antimigraine Agents</b>			REYVOW	3	PA; QL
AIMOVIG	3	PA	rizatriptan benzoate	1	
SUBCUTANEOUS SOLUTION AUTO- INJECTOR 140 MG/ML, 70 MG/ML			sumatriptan nasal	1	
			sumatriptan succinate oral	1	
AJOVY			sumatriptan succinate refill subcutaneous solution cartridge	1	
almotriptan malate	3	PA			
CAMBIA	3	PA	sumatriptan succinate subcutaneous	1	
diclofenac potassium(migraine)	3	PA	sumatriptan-naproxen sodium	3	PA
dihydroergotamine mesylate injection	1	QL	TOSYMRA	3	
dihydroergotamine mesylate nasal	4		TREXIMET	3	PA
eletriptan hydrobromide	1		TRUDHESA	3	PA
EMGALITY	3	PA	UBRELVY	3	PA; QL
SUBCUTANEOUS SOLUTION AUTO- INJECTOR 120 MG/ML			ZAVZPRET	5	PA; QL
			ZEMBRACE SYMTOUCH	3	
EMGALITY			ZOLMITRIPTAN NASAL SOLUTION 2.5 MG	3	
SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 100 MG/ML, 120 MG/ML	3	PA; QL	zolmitriptan nasal solution 5 mg	3	
zolmitriptan oral			zolmitriptan oral	1	
ERGOMAR	2		ZOMIG	3	
ergotamine-caffeine	1		<b>Antimyasthenic Agents</b>		
FROVA	3	PA	MESTINON ORAL SOLUTION	2	
frovatriptan succinate	3	PA	MESTINON ORAL TABLET	3	
IMITREX	3		MESTINON ORAL TABLET EXTENDED RELEASE	3	
IMITREX STATDOSE REFILL	3		pyridostigmine bromide er	1	
IMITREX STATDOSE SYSTEM	3		pyridostigmine bromide oral	1	
MAXALT	3				
MAXALT-MLT	3				

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Drug Name	Drug Tier	Notes	Drug Name	Drug Tier	Notes
<b>Antimycobacterials</b>			COMETRIQ	3	PA; QL
cycloserine oral	3		COPIKTRA	3	PA; QL
dapsone oral	1		COTELLIC	2	PA; QL
ethambutol hcl oral	1		cyclophosphamide oral capsule	1	
isoniazid oral	1		CYCLOPHOSPHAMIDE ORAL TABLET	3	
MYCOBUTIN	3		dasatinib	1	PA; QL
PRETOMANID	3		DAURISMO	3	PA; QL
PRIFTIN	2		DROXIA	2	
pyrazinamide oral	1		EMCYT ORAL CAPSULE 140 MG	3	QL
rifabutin	1		ERIVEDGE	3	PA; QL
rifampin oral	1		ERLEADA	3	PA; QL
SIRTURO	5	PA; QL	erlotinib hcl	1	PA; QL
TRECATOR	3		etoposide oral	1	QL
<b>Antineoplastics - Drugs for Cancer</b>			EULEXIN	3	QL
abiraterone acetate	1	QL	everolimus oral tablet 10 mg, 2.5 mg, 5 mg, 7.5 mg	1	PA; QL
AFINITOR	3	PA; QL	everolimus oral tablet soluble	1	PA; QL
AFINITOR DISPERZ	2	PA; QL	exemestane	1	
AKEEGA	3	PA; QL	FARESTON	3	PA
ALECensa	3	PA; QL	FEMARA	3	
ALUNBRIG	3	PA; QL	FOTIVDA	3	PA; QL
anastrozole oral	1		FRUZAQLA	3	PA; QL
ARIMIDEX	3		GAVRETO	3	PA; QL
AROMASIN	3		gefitinib	2	PA; QL
AUGTYRO	3	PA; QL	GILOTrif	2	PA; QL
AYVAKIT	3	PA; QL	GLEEVEC	3	PA; QL
BALVERSA	3	PA; QL	GLEOSTINE	2	
BESREMI	3	PA; QL	HYCAMTIN ORAL	3	QL
bexarotene	3	PA; QL	HYDREA	3	
bicalutamide	1		hydroxyurea oral	1	
BOSULIF	3	PA; QL	IBRANCE	3	PA; QL
BRAFTOVI	3	PA; QL	ICLUSIG	3	PA; QL
BRUKINSA	2	PA; QL	IDHIFA	3	PA; QL
CABOMETYX	3	PA; QL	imatinib mesylate	1	QL
CALQUENCE	2	PA; QL	IMBRUVICA ORAL CAPSULE	2	PA; QL
capecitabine	1	QL			
CAPRELSA	3	PA; QL			
CASODEX	3				

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Drug Name	Drug Tier	Notes	Drug Name	Drug Tier	Notes
IMBRUICA ORAL SUSPENSION	3	PA; QL	LYTGOBI (16 MG DAILY DOSE)	3	PA; QL
IMBRUICA ORAL TABLET 140 MG, 420 MG	2	PA; QL	LYTGOBI (20 MG DAILY DOSE)	3	PA; QL
IMBRUICA ORAL TABLET 280 MG	3	PA; QL	MATULANE	2	QL
INLYTA	3	PA; QL	MEKINIST	2	PA; QL
INQOVI	3	PA; QL	MEKTOVI	3	PA; QL
INREBIC	3	PA; QL	mercaptopurine oral	1	
IRESSA	3	PA; QL	mesna	1	
JAKAFI	3	PA; QL	MESNEX ORAL	2	
JAYPIRCA	3	PA; QL	MYLERAN	2	QL
KISQALI (200 MG DOSE)	3	PA; QL	NERLYNX	3	PA; QL
KISQALI (400 MG DOSE)	3	PA; QL	NEXAVAR	3	PA; QL
KISQALI (600 MG DOSE)	3	PA; QL	NILANDRON	3	PA
KOSELUGO	5	PA; QL	nilutamide	3	PA
KRAZATI	3	PA; QL	NINLARO	3	PA; QL
Iapatinib ditosylate	1	PA; QL	NUBEQA	3	PA; QL
LAZCLUZE	3	PA; QL	ODOMZO	3	PA; QL
lenalidomide	1	PA; QL	OGSIVEO	3	PA; QL
LENVIMA ORAL CAPSULE THERAPY	3	PA; QL	OJEMDA	3	PA; QL
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			OJJAARA	3	PA; QL
letrozole oral			ONUREG	3	PA; QL
leucovorin calcium injection solution 100 mg/10ml			ORGOVYX	3	PA; QL
leucovorin calcium oral			ORSERDU	3	PA; QL
LEUKERAN			PANRETIN	3	PA; QL
LONSURF	3	PA; QL	pazopanib hcl	1	PA; QL
LORBRENA	3	PA; QL	PEMAZYRE	3	PA; QL
LUMAKRAS	3	PA; QL	PIQRAY	3	PA; QL
LYNPARZA	3	PA; QL	POMALYST	3	PA; QL
LYSODREN	3	PA; QL	PURIXAN	3	PA
LYTGOBI (12 MG DAILY DOSE)	3	PA; QL	QINLOCK	3	PA; QL
			RETEVMO	3	PA; QL
			REVLIMID	3	PA; QL
			REZLIDHIA	3	PA; QL
			ROZLYTREK	2	PA; QL
			RUBRACA	3	PA; QL
			RYDAPT	2	PA; QL
			SCEMBLIX	3	PA; QL
			SIKLOS	5	PA; QL

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Drug Name	Drug Tier	Notes	Drug Name	Drug Tier	Notes
SOLTAMOX	3		WELIREG	3	PA; QL
sorafenib tosylate	1	PA; QL	XALKORI	3	PA; QL
SPRYCEL	2	PA; QL	XELODA	3	PA; QL
STIVARGA	2	PA; QL	XOSPATA	3	PA; QL
sunitinib malate	1	PA; QL	XPOVIO (100 MG ONCE WEEKLY)	3	PA; QL
SUTENT	3	PA; QL	XPOVIO (40 MG ONCE WEEKLY)	3	PA; QL
TABLOID	2		XPOVIO (40 MG TWICE WEEKLY)	3	PA; QL
TABRECTA	3	PA; QL	XPOVIO (40 MG TWICE WEEKLY)	3	PA; QL
TAFINLAR	2	PA; QL	XPOVIO (60 MG ONCE WEEKLY)	3	PA; QL
TAGRISSO	2	PA; QL	XPOVIO (60 MG TWICE WEEKLY)	3	PA; QL
TALZENNA	3	PA; QL	XPOVIO (80 MG ONCE WEEKLY)	3	PA; QL
tamoxifen citrate oral	1		XPOVIO (80 MG TWICE WEEKLY)	3	PA; QL
TARCEVA	3	PA; QL	XPOVIO (100 MG ONCE WEEKLY)	3	PA; QL
TARGETIN	3	PA; QL	XPOVIO (100 MG TWICE WEEKLY)	3	PA; QL
TASIGNA	3	PA; QL	XPOVIO (100 MG TWICE WEEKLY)	3	PA; QL
TAZVERIK	3	PA; QL	XPOVIO (100 MG TWICE WEEKLY)	3	PA; QL
temozolomide	1	QL	XTANDI ORAL CAPSULE	2	PA; QL
TEPMETKO	3	PA; QL	XTANDI ORAL TABLET	3	PA; QL
THALOMID	2	PA; QL	YONSA	3	PA; QL
TIBSOVO	3	PA; QL	ZEJULA	3	PA; QL
toremifene citrate	3	PA	ZELBORAF	2	PA; QL
torpenz	1	PA; QL	ZOLINZA	3	PA; QL
tretinoin oral	1	QL	ZYDELIG	2	PA; QL
TRUQAP ORAL TABLET	3	PA; QL	ZYKADIA	3	PA; QL
TUKYSA	3	PA; QL	ZYTIGA	3	PA; QL
TURALIO	3	PA; QL	<b>Antiparasitics</b>		
TYKERB	3	PA; QL	albendazole oral	1	
VALCHLOR	5	PA; QL	atovaquone	4	QL
VANFLYTA	3	PA; QL	BENZNIDAZOLE	3	QL
VENCLEXTA	2	PA; QL	BILTRICIDE	3	
VENCLEXTA STARTING PACK	2	PA; QL	chloroquine phosphate oral	1	
VERZENIO	3	PA; QL	COARTEM	3	
VIJOICE	5	PA; QL	CROTAN	2	
VITRAKVI	3	PA; QL	DARAPRIM	5	PA; QL
VIZIMPRO	3	PA; QL	EMVERM	3	
VONJO	3	PA; QL	hydroxychloroquine sulfate oral	1	
VORANIGO	3	PA; QL			
VOTRIENT	3	PA; QL			

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Drug Name	Drug Tier	Notes	Drug Name	Drug Tier	Notes
IMPAVIDO	5	PA; QL	carbidopa-levodopa oral tablet dispersible 25-250 mg	3	
ivermectin oral	3	PA			
KRINTAFEL	2		carbidopa-levodopa-entacapone	1	
LAMPIT	3		CREXONT	3	PA
malathion	3		DHIVY	3	PA
MEPRON	5	PA; QL	DUOPA	4	PA; QL
NATROBA	3		entacapone	1	
NEBUPENT	3		GOCOVRI	5	PA; QL
nitazoxanide oral	2		INBRIJA	5	PA; QL
OVIDE	3		LODOSYN	3	
PENTAM	3		MIRAPEX ER	3	
pentamidine isethionate	3		NEUPRO	3	
permethrin external	1		NOURIANZ	5	PA; QL
PLAQUENIL	3		ONGENTYS	3	PA; QL
praziquantel oral	1		OSMOLEX ER	3	PA
primaquine phosphate	1		PARLODEL	3	
pyrimethamine oral	4	PA; QL	pramipexole dihydrochloride	1	
QUALAQUN	3		quinine sulfate		
SOVUNA	3		pramipexole dihydrochloride er	3	
spinosad	3		rasagiline mesylate oral	1	PA
STROMECTOL	3	PA	ropinirole hcl	1	
<b>Antiparkinson Agents</b>			ropinirole hcl er	1	
amantadine hcl oral	1		RYTARY	3	PA
APOKYN	5	PA; QL	selegiline hcl oral	1	
apomorphine hcl subcutaneous	5	PA; QL	SINEMET	3	
AZILECT	3	PA	TASMAR	5	PA; QL
benztropine mesylate	1		tolcapone	5	QL
bromocriptine mesylate oral	1		trihexyphenidyl hcl	1	
carbidopa oral	1		XADAGO	3	PA
carbidopa-levodopa er	1		ZELAPAR	5	QL
carbidopa-levodopa oral tablet	1		<b>Antiplatelets</b>		
carbidopa-levodopa oral tablet dispersible 10-100 mg, 25-100 mg	1		aspirin-dipyridamole er	1	
			BRILINTA	2	
			CABLIVI	5	PA; QL
			cilostazol	1	
			clopidogrel bisulfate oral	1	

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Drug Name	Drug Tier	Notes	Drug Name	Drug Tier	Notes
dipyridamole oral	1		haloperidol decanoate intramuscular	1	
EFFIENT	3		haloperidol lactate injection	1	
PLAVIX	3		haloperidol lactate oral concentrate 2 mg/ml	1	
prasugrel hcl	1		haloperidol oral	1	
YOSPRALA	3		INVEGA	3	
ZONTIVITY	3		INVEGA HAFYERA	4	
<b>Antipsychotics - Drugs for Mood Disorders</b>			INVEGA SUSTENNA	4	
ABILIFY	3		INVEGA TRINZA	4	
ABILIFY ASIMTUFII	4		LATUDA	5	PA
ABILIFY MAINTENA	4		loxapine succinate	1	
ABILIFY MYCITE MAINTENANCE KIT	5	PA; QL	lurasidone hcl	1	
ABILIFY MYCITE STARTER KIT	5	PA; QL	LYBALVI	5	PA; QL
aripiprazole oral solution	1		molindone hcl	3	
aripiprazole oral tablet	1		NUPLAZID	5	PA; QL
aripiprazole oral tablet dispersible	3		olanzapine	1	
ARISTADA	4		paliperidone er	1	
ARISTADA INITIO	4		PERSERIS	4	
asenapine maleate	3	PA	pimozide	1	
CAPLYTA	5	PA; QL	quetiapine fumarate	1	
chlorpromazine hcl injection	1		quetiapine fumarate er	1	
chlorpromazine hcl oral concentrate	3		REXULTI	3	PA; QL
chlorpromazine hcl oral tablet	1		RISPERDAL	3	
clozapine oral tablet	1		RISPERDAL CONSTA SUSPENSION RECONSTITUTED ER 12.5 MG INTRAMUSCULAR	1	
clozapine oral tablet dispersible	3		RISPERDAL CONSTA SUSPENSION RECONSTITUTED ER 12.5 MG INTRAMUSCULAR	2	
CLOZARIL	3		RISPERDAL CONSTA SUSPENSION RECONSTITUTED ER 12.5 MG INTRAMUSCULAR	2	
FANAPT	3	PA	RISPERDAL CONSTA SUSPENSION RECONSTITUTED ER 25 MG INTRAMUSCULAR	1	
FANAPT TITRATION PACK	3	PA			
fluphenazine decanoate injection	1				
fluphenazine hcl	1				
GEODON	3				
HALDOL DECANOATE	3				

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Drug Name	Drug Tier	Notes	Drug Name	Drug Tier	Notes
RISPERDAL CONSTA SUSPENSION RECONSTITUTED ER 25 MG INTRAMUSCULAR	2		ZYPREXA ZYDIS	3	
RISPERDAL CONSTA SUSPENSION RECONSTITUTED ER 37.5 MG INTRAMUSCULAR	1		<b>Antivirals</b>		
RISPERDAL CONSTA SUSPENSION RECONSTITUTED ER 37.5 MG INTRAMUSCULAR	2		abacavir sulfate	1	
RISPERDAL CONSTA SUSPENSION RECONSTITUTED ER 50 MG INTRAMUSCULAR	1		abacavir sulfate-lamivudine	1	
RISPERDAL CONSTA SUSPENSION RECONSTITUTED ER 50 MG INTRAMUSCULAR	2		acyclovir external cream	3	
RISPERDAL CONSTA SUSPENSION RECONSTITUTED ER 50 MG INTRAMUSCULAR	1		acyclovir external ointment	1	
RISPERDAL CONSTA SUSPENSION RECONSTITUTED ER 50 MG INTRAMUSCULAR	2		acyclovir oral	1	
RISPERDAL CONSTA SUSPENSION RECONSTITUTED ER 50 MG INTRAMUSCULAR	1		adefovir dipivoxil	1	QL
RISPERDAL CONSTA SUSPENSION RECONSTITUTED ER 50 MG INTRAMUSCULAR	2		APTIVUS	4	
risperidone microspheres er	1		atazanavir sulfate	1	
risperidone oral solution	1		BARACLUDE ORAL SOLUTION	4	QL
risperidone oral tablet	1		BARACLUDE ORAL TABLET	5	PA; QL
risperidone oral tablet dispersible	3		BIKTARVY	4	
RYKINDO	4		CIMDUO	4	
SAPHRIS	3	PA	COMPLERA	4	PA
SECUADO	3	PA	darunavir	1	
SEROQUEL	3		DELSTRIGO	5	PA
SEROQUEL XR	3		DENAVIR	3	
thioridazine hcl oral	1		DESCOVY	4	PA
thiothixene	1		DOVATO	4	
trifluoperazine hcl	1		EDURANT	2	
UZEDY	4		efavirenz	1	
VERSACLOZ	3		efavirenz-emtricitab-tenofo df	1	
VRAYLAR	5	PA; QL	efavirenz-lamivudine-tenofovir	1	
ziprasidone hcl	1		emtricitabine	1	
ziprasidone mesylate	3		emtricitabine-tenofovir df	1	
ZYPREXA	3		EMTRIVA ORAL CAPSULE	3	PA
ZYPREXA RELPREVV	2		EMTRIVA ORAL SOLUTION	2	
			entecavir	1	
			EPCLUSA	4	QL
			EPIVIR	3	

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Drug Name	Drug Tier	Notes	Drug Name	Drug Tier	Notes
etravirine	1		PAXLOVID (300/100)	2	QL
EVOTAZ	5		PEGASYS	4	QL
famciclovir oral	1		penciclovir	3	
fosamprenavir calcium	4		PIFELTRO	5	PA
FUZEON	5		PREVYMIS ORAL	4	PA; QL
GENVOYA	4		PREZCOBIX	2	
HARVONI	5	PA; QL	PREZISTA ORAL SUSPENSION	2	
INTELENCE ORAL TABLET 100 MG, 200 MG	3		PREZISTA ORAL TABLET 150 MG, 75 MG	2	
INTELENCE ORAL TABLET 25 MG	2		PREZISTA ORAL TABLET 600 MG, 800 MG	3	
ISENTRESS HD	2		RELENZA DISKHALER	2	
ISENTRESS ORAL PACKET	3		RETROVIR ORAL	3	
ISENTRESS ORAL TABLET	2		REYATAZ ORAL CAPSULE	5	PA
ISENTRESS ORAL TABLET CHEWABLE	2		REYATAZ ORAL PACKET	2	
JULUCA	4		ribavirin inhalation	3	
KALETRA	3		ribavirin oral	1	QL
LAGEVRIO	2	QL	rimantadine hcl	1	
lamivudine	1		ritonavir	1	
lamivudine-zidovudine	1		RUKOBIA	5	PA
LEDIPASVIR-SOFOSBUVIR	5	PA; QL	SELZENTRY ORAL SOLUTION	4	
LIVTENCITY	5	PA; QL	SELZENTRY ORAL TABLET	5	
lopinavir-ritonavir	1		SITAVIG	3	
maraviroc	4		SOFOSBUVIR-VELPATASVIR	4	
MAVYRET	5	PA; QL	SOVALDI	5	PA; QL
nevirapine er	1		STRIBILD	4	PA
nevirapine oral suspension	3		SUNLENCA ORAL	5	PA
nevirapine oral tablet	1		SYMFI	1	
NORVIR ORAL PACKET	2		SYMFI LO	1	
NORVIR ORAL TABLET	3		SYMTUZA	4	
ODEFSEY	4		TAMIFLU	2	
oseltamivir phosphate oral	1		tenofovir disoproxil fumarate	1	
PAXLOVID (150/100)	2	QL			

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Drug Name	Drug Tier	Notes	Drug Name	Drug Tier	Notes
TIVICAY	2		buspirone hcl oral	1	
TIVICAY PD	2		chlordiazepoxide hcl	1	QL
TRIUMEQ	4		clonazepam oral	1	QL
TRIUMEQ PD	4		clorazepate dipotassium	1	QL
TRUVADA	5		diazepam injection solution 10 mg/2ml	1	QL
TYBOST	2	PA	diazepam intensol	3	QL
valacyclovir hcl oral	1		diazepam oral concentrate	3	QL
VALCYTE	5	PA; QL	diazepam oral solution	1	QL
valganciclovir hcl	4	QL	diazepam oral tablet	1	QL
VALTREX	3		diazepam solution 5 mg/ml injection	1	QL
VEMLIDY	5	PA; QL	DIAZEPAM SOLUTION 5 MG/ML INJECTION	3	QL
VIRACEPT	2		DORAL	3	QL
VIRAZOLE	3		estazolam	3	QL
VIREAD ORAL POWDER	2		HALCION	3	QL
VIREAD ORAL TABLET 150 MG, 200 MG, 250 MG	2		hydroxyzine hcl oral	1	
VIREAD ORAL TABLET 300 MG	3	PA	hydroxyzine pamoate oral	1	
VOSEVI	4	PA; QL	KLONOPIN	3	QL
XERESE	3		lorazepam injection solution 2 mg/ml	1	QL
XOFLUZA (40 MG DOSE)	3		lorazepam intensol	1	QL
XOFLUZA (80 MG DOSE)	3		lorazepam oral concentrate 2 mg/ml	1	QL
ZEPATIER	5	PA; QL	lorazepam oral tablet	1	QL
ZIAGEN	3		LOREEV XR	3	QL
zidovudine	1		meprobamate	3	
ZOVIRAX	3		midazolam hcl (pf) injection solution 10 mg/2ml, 5 mg/ml	1	QL
<b>Anxiolytics - Drugs for Anxiety</b>					
alprazolam er	1	QL	midazolam hcl injection solution 10 mg/2ml, 5 mg/ml	1	QL
alprazolam intensol	3	QL	midazolam hcl oral	3	QL
alprazolam oral tablet	1	QL	oxazepam	1	QL
alprazolam oral tablet dispersible	3	QL	quazepam	3	QL
alprazolam xr	1	QL	triazolam	1	QL
ATIVAN INJECTION SOLUTION 2 MG/ML	3	QL	VALIUM	3	QL
ATIVAN ORAL	3	QL	VISTARIL	3	

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Drug Name	Drug Tier	Notes	Drug Name	Drug Tier	Notes
XANAX	3	QL	STIMUFEND	5	PA; QL
XANAX XR	3	QL	TAVALISSE	5	PA; QL
<b>Bipolar Agents - Drugs for Mood Disorders</b>			tranexamic acid oral	1	QL
EQUETRO	3		UDENYCA	5	PA; QL
lithium	1		VAFSEO	5	PA; QL
lithium carbonate er	1		VOYDEYA	5	PA; QL
lithium carbonate oral	1		XOLREMDI	5	PA; QL
LITHOBID	3		ZARXIO	4	PA; QL
<b>Blood Products and Modifiers - Drugs for Blood Disorders</b>			ZIEXTENZO	5	PA; QL
<b>Cardiovascular Agents - Drugs for Heart and Circulation Conditions</b>					
AGRYLIN	3		ACCUPRIL	3	
ALVAIZ	4	PA; QL	ACCURETIC	3	
aminocaproic acid oral	3		acebutolol hcl oral	1	
anagrelide hcl	1		acetazolamide sodium	3	
ARANESP (ALBUMIN FREE)	3	PA	ALDACTONE	3	
DOPTELET	5	PA; QL	aliskiren fumarate	3	PA
EPOGEN	2	PA	ALTACE	3	
FABHALTA	5	PA; QL	ALTOPREV	3	
FULPHILA	5	PA; QL	amiloride hcl oral	1	
FYLNETRA	5	PA; QL	amiloride-hydrochlorothiazide	1	
GRANIX	4	QL			
HEMLIBRA	4	PA; QL	amiodarone hcl oral	1	
JESDUVROQ	3	PA	amlodipine besylate oral	1	
LEUKINE	2		amlodipine besylate-benazepril hcl	1	
MIRCERA	3	PA			
MULPLETA	5	PA; QL	amlodipine besylate-valsartan	3	PA
NEULASTA	5	PA; QL	amlodipine-atorvastatin	3	
NEULASTA ONPRO	5	PA; QL	amlodipine-olmesartan	1	
NEUPOGEN	5	PA; QL	amlodipine-valsartan-hctz	3	
NIVESTYM	4	PA; QL	ASPRUZY SPRINKLE	3	PA
NYVEPRIA	5	PA; QL	ATACAND	3	
PROCRT	2	PA	ATACAND HCT	3	
PROMACTA	5	PA; QL	atenolol oral	1	
PYRUKYND	5	PA; QL	atenolol-chlorthalidone	1	
PYRUKYND TAPER PACK	5	PA; QL	ATORVALIQ	3	PA
RELEUKO	5	PA; QL	atorvastatin calcium oral	1	
RETACRIT	3	PA			

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Drug Name	Drug Tier	Notes	Drug Name	Drug Tier	Notes
AVALIDE	3		cholestyramine light	1	
AVAPRO	3		cholestyramine oral	1	
AZOR	3		clonidine	1	
benazepril hcl oral	1		CLONIDINE ER	3	
benazepril-hydrochlorothiazide	1		clonidine hcl oral	1	
			colesevelam hcl	3	
BENICAR	3		COLESTID	3	
BENICAR HCT	3		colestipol hcl	1	
BETAPACE	3		CONJUPRI	3	PA
BETAPACE AF	3		COREG	3	
betaxolol hcl oral	1		COREG CR	3	
BIDIL	3		CORLANOR	3	PA
bisoprolol fumarate oral	1		COZAAR	3	
bisoprolol-hydrochlorothiazide	1		CRESTOR	3	
bumetanide oral	1		DEMSER	3	
BUMEX	3		DIBENZYLINE	5	PA; QL
BYSTOLIC	3		digoxin injection	1	
CADUET	3		digoxin oral solution	1	
CAMZYOS	5	PA; QL	digoxin oral tablet 125 mcg, 250 mcg	1	
candesartan cilexetil	3		digoxin oral tablet 62.5 mcg	3	
candesartan cilexetil-hctz	3		diltiazem hcl er beads (generic Tiazac)	1	
captopril oral	1		diltiazem hcl er coated beads (generic Cardizem CD)	1	
captopril-hydrochlorothiazide	1		diltiazem hcl er oral capsule extended release 12 hour	1	
CARDIZEM	3		diltiazem hcl er oral capsule extended release 24 hour	1	
CARDIZEM CD	3		diltiazem hcl er oral tablet extended release 24 hour	3	
CARDIZEM LA	3		diltiazem hcl oral	1	
CARDURA	3		dilt-xr	1	
CAROSPIR	3		DIOVAN	3	
cartia xt	1		DIOVAN HCT	3	
carvedilol	1		disopyramide phosphate	1	
carvedilol phosphate er	3				
CATAPRES-TTS-1	3				
CATAPRES-TTS-2	3				
CATAPRES-TTS-3	3				
chlorthalidone	1				

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Drug Name	Drug Tier	Notes	Drug Name	Drug Tier	Notes
DIURIL	2		fenofibrate oral tablet 120 mg, 145 mg, 40 mg, 48 mg	3	
dofetilide	1				
doxazosin mesylate oral	1		fenofibrate oral tablet 160 mg, 54 mg	1	
droxidopa	5	PA; QL			
DYRENIUM	3		fenofibric acid	1	
EDARBI	3	PA	FENOGLIDE	3	
EDARBYCLOR	3	PA	FIBRICOR	3	
EDECRIN	3	PA	flecainide acetate	1	
enalapril maleate oral solution	3		FLOLIPID	3	
enalapril maleate oral tablet	1		fluvastatin sodium	3	
enalapril-hydrochlorothiazide	1		fluvastatin sodium er	3	
ENTRESTO ORAL CAPSULE SPRINKLE	3	PA	fosinopril sodium	1	
ENTRESTO ORAL TABLET	2	PA; QL	fosinopril sodium-hctz	1	
EPANED	3		furosemide injection	1	
epinephrine injection solution 10 mg/10ml	1		furosemide oral	1	
epinephrine pf	1		gemfibrozil oral	1	
epinephrine solution 1 mg/ml injection	1		guanfacine hcl	1	
EPINEPHRINE SOLUTION 1 MG/ML INJECTION	3		HEMANGEOL	3	PA
eplerenone	1		hydralazine hcl oral	1	
ethacrynic acid	1	PA	hydrochlorothiazide oral	1	
EXFORGE	3	PA	HYZAAR	3	
EXFORGE HCT	3	PA	icosapent ethyl	3	PA
EZALLOR SPRINKLE	3		indapamide	1	
ezetimibe	1		INDERAL LA	3	
ezetimibe-simvastatin	1		INDERAL XL	3	
felodipine er	1		INNOPRAN XL	3	
fenofibrate micronized	1		INPEFA	3	PA
fenofibrate oral capsule 134 mg, 200 mg, 67 mg	1		INSPRA	3	
fenofibrate oral capsule 150 mg, 50 mg	3		irbesartan	1	
			irbesartan-hydrochlorothiazide	1	
			ISORDIL TITRADOSE	3	
			isosorb dinitrate-hydralazine	3	
			isosorbide dinitrate	1	
			isosorbide mononitrate	1	
			isosorbide mononitrate er	1	

Drug Name	Drug Tier	Notes	Drug Name	Drug Tier	Notes
isradipine	1		MICARDIS	3	
ivabradine hcl	3	PA	MICARDIS HCT	3	
JUXTAPID	5	PA; QL	midodrine hcl	1	
KAPSPARGO SPRINKLE	3		minoxidil oral	1	
KATERZIA	3		moexipril hcl	1	
labetalol hcl oral	1		MULTAQ	3	
LANOXIN	3		nadolol oral	1	
LANOXIN PEDIATRIC	3		nebivolol hcl	1	
LASIX	3		NEXICLON XR	3	
LESCOL XL	3		NEXLETOL	3	PA
LEVAMLODIPINE MALEATE	3	PA	NEXLIZET	3	PA
LIPITOR	3		niacin (antihyperlipidemic)	3	
LIPOFEN	3		niacin er (antihyperlipidemic)	3	
lisinopril oral	1		niacor	3	
lisinopril-hydrochlorothiazide	1		nicardipine hcl oral	1	
LIVALO	3		nifedipine er	1	
LODOC	3	PA	nifedipine er osmotic release	1	
LOPID	3		nifedipine oral	1	
LOPRESSOR	3		nimodipine oral	1	
losartan potassium oral	1		nisoldipine er	3	
losartan potassium-hctz	1		NITRO-BID	2	
LOTENSIN	3		NITRO-DUR		
LOTENSIN HCT	3		TRANSDERMAL PATCH 24 HOUR 0.1 MG/HR, 0.2	3	
LOTREL	3		MG/HR, 0.4 MG/HR, 0.6 MG/HR		
lovastatin oral	1		NITRO-DUR		
LOVAZA	3		TRANSDERMAL PATCH 24 HOUR 0.3 MG/HR, 0.8 MG/HR	2	
matzim la	3				
METHYLDOPA	3				
metolazone	1		nitroglycerin rectal	1	
metoprolol succinate er	1		nitroglycerin sublingual	1	
metoprolol tartrate oral	1		nitroglycerin transdermal	1	
metoprolol-hydrochlorothiazide	1		nitroglycerin translingual	3	
metyrosine	3		NITROLINGUAL	3	
mexiletine hcl oral	1		NITROSTAT	3	
			nitro-time oral capsule extended release 9 mg	1	

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Drug Name	Drug Tier	Notes	Drug Name	Drug Tier	Notes
NORLIQVA	3	PA	QUESTRAN	3	
NORPACE	3		QUESTRAN LIGHT	3	
NORPACE CR	2		quinapril hcl	1	
NORTHERA	5	PA; QL	quinapril-hydrochlorothiazide	1	
NORVASC	3		quinidine gluconate er	1	
NYMALIZE	5	QL	quinidine sulfate	1	
olmesartan medoxomil oral	1		ramipril	1	
olmesartan medoxomil-hctz	1		ranolazine er	1	
olmesartan-amlodipine-hctz	1		RECTIV	3	
omega-3-acid ethyl esters	3		REPATHA	3	PA
pacerone oral tablet 100 mg, 200 mg	1		PUSHTRONEX SYSTEM	3	PA
PACERONE ORAL TABLET 400 MG	3		REPATHA SURECLICK	3	PA
papaverine hcl injection	1		rosuvastatin calcium oral	1	
pentoxifylline er	1		simvastatin oral	1	
perindopril erbumine	1		SOAANZ	3	PA
phenoxybenzamine hcl oral	4	QL	sotalol hcl (af)	1	
phentolamine mesylate injection	1		sotalol hcl oral	1	
pindolol	1		SOTYLIZE	3	
pitavastatin calcium	3		spironolactone oral suspension	3	
PRALUENT	5	PA; QL	spironolactone oral tablet	1	
pravastatin sodium	1		spironolactone-hctz	1	
prazosin hcl oral	1		SULAR	3	
PRESTALIA	3		TEKTURNA	3	PA
prevalite	1		telmisartan	1	
procainamide hcl injection	1		telmisartan-amlodipine	3	
PROCARDIA XL	3		telmisartan-hctz	3	
propafenone hcl	1		TENORETIC 100	3	
propafenone hcl er	1		TENORETIC 50	3	
propranolol hcl er	1		TENORMIN	3	
propranolol hcl oral	1		THALITONE	3	
PROSTIN VR	3		tiadylt er	1	
QBRELIS	3		TIAZAC	3	
			TIKOSYN	3	
			timolol maleate oral	1	

Drug Name	Drug Tier	Notes	Drug Name	Drug Tier	Notes
TOPROL XL	3		ZETIA	3	
torsemide	1		ZOCOR	3	
trandolapril	1		ZYPITAMAG	3	
trandolapril-verapamil hcl er	3		<b>Central Nervous System Agents - Drugs for Attention Deficit Disorder</b>		
triamterene oral	1		ADDERALL	2	
triamterene-hctz	1		ADDERALL XR	2	
TRIBENZOR	3		ADZENYS XR-ODT	3	PA
TRICOR	3		amphetamine sulfate	3	PA
TRILIPIX	3		amphetamine-dextroamphetamine	1	
TRYVIO	3		amphetamine-dextroamphetamine er	1	
VALSARTAN ORAL SOLUTION	5	PA; QL	amphet-dextroamphet 3-bead er	3	PA; QL
valsartan oral tablet	1		APTENSIO XR	3	PA; QL
valsartan-hydrochlorothiazide	1		atomoxetine hcl	1	
VASCEPA	3	PA	AZSTARYS	3	PA
VASERETIC	3		clonidine hcl er	1	
VASOTEC	3		CONCERTA	2	
VECAMYL	5	QL	COTEMPLA XR-ODT	3	PA; QL
verapamil hcl er oral capsule extended release 24 hour 100 mg, 200 mg, 300 mg	3		DAYTRANA	3	PA; QL
verapamil hcl er oral capsule extended release 24 hour 120 mg, 180 mg, 240 mg, 360 mg	1		DESOXYN	3	
verapamil hcl er oral tablet extended release	1		DEXEDRINE	3	
verapamil hcl oral	1		dexmethylphenidate hcl	1	
VERELAN	3		dexmethylphenidate hcl er	1	QL
VERELAN PM	3		dextroamphetamine sulfate er	1	
VERQUVO	3	PA	dextroamphetamine sulfate oral solution	3	
VYNDAMAX	5	PA; QL	dextroamphetamine sulfate oral tablet 10 mg, 5 mg	1	
VYNDAQEL	5	PA; QL	dextroamphetamine sulfate oral tablet 15 mg, 2.5 mg, 20 mg, 30 mg, 7.5 mg	3	
VYTORIN	3		DYANAVEL XR	3	PA
WELCHOL	3		EVEKEO	3	PA
ZESTORETIC	3		FOCALIN	3	
ZESTRIL	3				

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Drug Name	Drug Tier	Notes	Drug Name	Drug Tier	Notes
FOCALIN XR	3	QL	methylphenidate hcl oral tablet (generic Ritalin)	1	
guanfacine hcl er	1				
INTUNIV	3		methylphenidate hcl oral tablet chewable (generic Methylin)	3	
JORNAY PM	3	PA; QL			
lisdexamfetamine dimesylate	3	PA; QL	MYDAYIS	3	PA; QL
METADATE CD	3		ONYDA XR	3	PA
methamphetamine hcl	3		PROCENTRA	3	
METHYLIN	3		QELBREE	3	PA
methylphenidate (generic Aptensio XR)	3	PA; QL	QUILLICHEW ER	3	PA
methylphenidate hcl er (cd) (generic Metadate)	1		QUILLIVANT XR	3	PA; QL
methylphenidate hcl er (la) oral capsule extended release 24 hour 10 mg (generic Ritalin LA)	3	PA; QL	RELEXXII ORAL TABLET EXTENDED RELEASE 18 MG, 27 MG, 36 MG, 45 MG, 54 MG, 63 MG	3	
methylphenidate hcl er (la) oral capsule extended release 24 hour 20 mg, 30 mg, 40 mg, 60 mg (generic Ritalin LA, generic Methylin LA)	1	QL	relexxii oral tablet extended release 72 mg	1	
methylphenidate hcl er (osm) oral tablet extended release 18 mg, 27 mg, 36 mg, 54 mg, 72 mg (generic Concerta)	1		RITALIN	3	
METHYLPHENIDATE HCL ER (OSM) ORAL TABLET EXTENDED RELEASE 45 MG, 63 MG (authorized generic Relexxii ER)	3		RITALIN LA ORAL CAPSULE EXTENDED RELEASE 24 HOUR 10 MG	3	PA; QL
methylphenidate hcl er (xr) (generic Aptensio XR)	3	PA; QL	RITALIN LA ORAL CAPSULE EXTENDED RELEASE 24 HOUR 20 MG, 30 MG, 40 MG	3	QL
methylphenidate hcl er oral tablet extended release (generic Methylin)	1		STRATTERA	3	
methylphenidate hcl er oral tablet extended release 24 hour (generic Methylin)	1	QL	VYVANSE	3	PA; QL
methylphenidate hcl oral solution (generic Methylin)	3		XELSTRYM	3	PA
<b>Central Nervous System Agents - Drugs for Multiple Sclerosis</b>					
			AMPYRA	5	PA; QL
			AUBAGIO	5	PA; QL
			AVONEX PEN	4	PA; QL
			AVONEX PREFILLED	4	PA; QL
			BAFIERTAM	5	PA; QL
			BETASERON	4	QL
			COPAXONE	5	PA; QL

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Drug Name	Drug Tier	Notes	Drug Name	Drug Tier	Notes
dalfampridine er	1		AUSTEDO XR PATIENT TITRATION	5	PA; QL
dimethyl fumarate oral	1		caffeine citrate oral	1	
dimethyl fumarate starter pack	1		CAFFEINE-SODIUM BENZOATE	3	
EXTAVIA	5	QL	DAYBUE	5	PA; QL
fingolimod hcl	1	QL	EXSERVAN	5	PA; QL
GILENYA ORAL CAPSULE 0.25 MG	4	PA; QL	gabapentin (once-daily)	3	
GILENYA ORAL CAPSULE 0.5 MG	5	PA; QL	GRALISE	3	
glatiramer acetate	4	QL	HORIZANT	3	
glatopa	4	QL	IMCIVREE	5	PA; QL
KESIMPTA	5	PA; QL	INGREZZA	5	PA; QL
MAVENCLAD	5	PA; QL	LYRICA	3	QL
MAYZENT	5	PA; QL	LYRICA CR	3	PA
MAYZENT STARTER PACK	5	PA; QL	NUEDEXTA	3	PA
OCREVUS ZUNOVO	3		pregabalin er	3	PA
PLEGRIDY	5	PA; QL	pregabalin oral	1	QL
PLEGRIDY STARTER PACK	5	PA; QL	RADICAVA ORS	5	PA; QL
PONVORY	5	PA; QL	RADICAVA ORS STARTER KIT	5	PA; QL
PONVORY STARTER PACK	5	PA; QL	RELYVRIOTM	5	PA; QL
REBIF	4	PA; QL	riluzole	1	QL
REBIF REBIDOSE	4	PA; QL	SAVELLA	3	PA
REBIF REBIDOSE TITRATION PACK	4	PA; QL	SAVELLA TITRATION PACK	3	PA
REBIF TITRATION PACK	4	PA; QL	TEGLUTIK	5	QL
TASCENO ODT	5	PA; QL	TEGSEDI	5	PA; QL
TECFIDERA	5	PA; QL	tetrabenazine	5	PA; QL
teriflunomide	1	QL	WAINUA	5	PA; QL
VUMERTY	5	PA; QL	XENAZINE	5	PA; QL
ZEPOSIA	5	PA; QL	<b>Central Nervous System Agents</b>		
ZEPOSIA 7-DAY STARTER PACK	5	PA; QL	SKYCLARYSTM	5	PA; QL
ZEPOSIA STARTER KIT	5	PA; QL	<b>Dental and Oral Agents - Drugs for Mouth and Throat Conditions</b>		
<b>Central Nervous System Agents - Miscellaneous</b>			cevimeline hcl	3	
AUSTEDO	5	PA; QL	chlorhexidine gluconate mouth/throat	1	
AUSTEDO XR	5	PA; QL	DEBACTEROL	3	
EVOXAC				3	

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Drug Name	Drug Tier	Notes	Drug Name	Drug Tier	Notes
FIRST-MOUTHWASH BLM	3		alclometasone dipropionate	1	
kourzeq	1		ALTRENO	3	
lidocaine hcl mouth/throat	3		amcinonide	3	
lidocaine viscous hcl	1		AMELUZ	2	QL
oralone	1		ammonium lactate external	3	
periogard	1		amnesteem	1	
pilocarpine hcl oral	1		AMZEEQ	3	
SALAGEN	3		APEXICON E	3	
triamcinolone acetonide mouth/throat	1		ARAZLO	3	
<b>Dermatological Agents - Drugs for Skin Conditions</b>			arzol silver nit applicators	3	
ABSORICA	3		ATRALIN	3	
ABSORICA LD	3		avar cleanser	1	
ACANYA	3		AVAR LS CLEANSER	3	
accutane	1		AVAR-E EMOLlient	3	
ACIOXIA	3		azelaic acid external	1	
acitretin	1	QL	AZELEX	2	
ACZONE	3		BENZAMYCIN	3	
adapalene external cream	1		BENZOYL PEROX- HYDROCORTISONE	3	
adapalene external gel	1		BENZOYL PEROXIDE EXTERNAL GEL 6.5 %, 8 %	3	
ADAPALENE EXTERNAL PAD	3		BENZOYL PEROXIDE FORTE- HC	3	
ADAPALENE EXTERNAL SOLUTION	3		benzoyl peroxide- erythromycin	1	
adapalene-benzoyl peroxide external gel 0.1- 2.5 %	1		betamethasone dipropionate aug	1	
adapalene-benzoyl peroxide external gel 0.3- 2.5 %	3		betamethasone dipropionate external	1	
ADAPALENE-BENZOYL PEROXIDE EXTERNAL PAD	3	PA	betamethasone valerate external	1	
ADBRY	5	PA; QL	bp 10-1	3	
ADVANCED ALLERGY COLLECTION	3		brimonidine tartrate external	3	
AKLIEF	3	PA	BRYHALI	3	
ALA SCALP	3		CABTREO	3	PA
ala-cort	3		calcipotriene external cream	1	

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Drug Name	Drug Tier	Notes	Drug Name	Drug Tier	Notes
CALCIPOTRIENE EXTERNAL FOAM	3		clobetasol propionate external foam	1	
calcipotriene external ointment	1		clobetasol propionate external gel	1	
calcipotriene external solution	1		clobetasol propionate external liquid	1	
calcipotriene-betameth diprop	3		clobetasol propionate external lotion	1	
calcitrene	1		clobetasol propionate external ointment	1	
calcitriol external	1		clobetasol propionate external shampoo	3	
CARAC	3	PA	clobetasol propionate external solution	1	
cem-urea	3		claravis	1	CLOBEX
CIBINQO	5	PA; QL	CLEOCIN-T	3	CLOBEX SPRAY
clindacin	3		clindacin etz external swab	1	clocortolone pivalate
clindacin etz external swab	1		clindacin-p	1	clodan
clindagel	3		CLINDAGEL	3	CLODERM
clindamycin phos-benzoyl perox external gel 1.2-2.5 %, 1.2-3.75 %	3		clindamycin phos-benzoyl perox external gel 1-5 %, 1.2-5 %	1	CONDYLOX
clindamycin phos-benzoyl perox external gel 1-5 %, 1.2-5 %	1		clindamycin phosphate external foam	3	CORDRAN
clindamycin phosphate external foam	3		clindamycin phosphate external gel	1	dapsone external
clindamycin phosphate external gel	1		clindamycin phosphate external lotion	1	DERMACINRX UREA
clindamycin phosphate external lotion	1		clindamycin phosphate external solution	1	DERMA-SMOOTH/FS BODY
clindamycin phosphate external solution	1		clindamycin phosphate external swab	1	DERMA-SMOOTH/FS SCALP
clindamycin-tretinoin	3		clindamycin-tretinoin	3	desonide external cream
clobetasol propionate e	1		clobetasol propionate e	1	desonide external gel
clobetasol propionate emulsion	3		clobetasol propionate emulsion	1	desonide external lotion
clobetasol propionate external cream	1		clobetasol propionate external ointment	1	desonide external ointment

Drug Name	Drug Tier	Notes	Drug Name	Drug Tier	Notes
diclofenac sodium external gel 3 %	3		flurandrenolide	3	
DIFFERIN EXTERNAL CREAM	3		fluticasone propionate external cream	1	
DIFFERIN EXTERNAL GEL 0.3 %	3		fluticasone propionate external lotion	3	
DIFFERIN EXTERNAL LOTION	2		fluticasone propionate external ointment	1	
diflorasone diacetate	3		halcinonide	3	
DIPROLENE	3		halobetasol propionate external cream	1	
doxepin hcl external	3		halobetasol propionate external foam	3	
doxycycline	3	PA	halobetasol propionate external ointment	1	
DRYSOL	2		HALOG	3	
DUPIXENT	5	PA; QL	HYDRO 40	3	
DYCLOPRO	3		hydrocortisone ace-pramoxine external cream 2.5-1 %	1	
EBGLYSS	5	PA; QL	hydrocortisone butyrate external cream	1	
EFUDEX	3		hydrocortisone butyrate external lotion	3	
ELIDEL	3		hydrocortisone butyrate external ointment	1	
ENSTILAR	3		hydrocortisone butyrate external solution	1	
EPIDUO	3		hydrocortisone external cream 1 %	3	
EPIDUO FORTE	3		hydrocortisone external cream 2.5 %	1	
EPIFOAM	3		hydrocortisone external lotion 2 %	3	
EPSOLAY	3	PA	hydrocortisone external ointment	1	
ery pad 2%	3		hydrocortisone external solution	1	
ERYGEL	3		hydrocortisone external valerate	5	PA; QL
erythromycin external	1		HYFTOR		
EUCRISA	3	PA; QL	imiquimod external cream 3.75 %	3	
FABIOR	3		imiquimod external cream 5 %	1	
FINACEA EXTERNAL FOAM	2				
fluocinolone acetonide body	1				
fluocinolone acetonide external	1				
fluocinolone acetonide scalp	1				
fluocinonide emulsified base	1				
fluocinonide external	1				
fluorouracil external	1				

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Drug Name	Drug Tier	Notes	Drug Name	Drug Tier	Notes
imiquimod pump	3		NUCORT	3	
IMPOYZ	3	PA	ONEXTON	3	
isotretinoin oral	1		OPZELURA	5	PA; QL
ivermectin external cream	3		ORACEA	3	PA
KENALOG	3		OVACE PLUS EXTERNAL CREAM	3	
KERALYT EXTERNAL GEL 6 %	3		OVACE PLUS EXTERNAL SHAMPOO	3	
KERALYT EXTERNAL SHAMPOO	3		OVACE PLUS WASH	3	
KLARON	3		OVACE WASH	3	
KLISYRI	5	PA; QL	PANDEL	3	
lactic acid e	3		pimecrolimus cream 1 % external	1	
lactic acid external	3		PIMECROLIMUS CREAM 1 % EXTERNAL	1	
LEVULAN KERASTICK	2	QL	PLEXION	3	
LEXETTE	3		PLEXION CLEANSER	3	
LIDOCAINE-HYDROCORTISONE ACE EXTERNAL	3		PLEXION CLEANSING CLOTH	3	
LITFULO	5	PA; QL	PODOCON-25	3	
LOCOID	3		podofilox external	1	
LOCOID LIPOCREAM	3		PRAMOSONE EXTERNAL CREAM	2	
methoxsalen rapid	4	QL	PRAMOSONE EXTERNAL LOTION	2	
METROCREAM	3		PRUDOXIN	3	
METROGEL	3		PYROGALLIC ACID	3	
METROLOTION	3		QBREXZA	3	PA; QL
metronidazole external cream	1		RESORCINOL-SULFUR	3	
metronidazole external gel 0.75 %	1		RETIN-A	1	
metronidazole external gel 1 %	3		RETIN-A MICRO GEL 0.04 %, 0.1 %	1	
metronidazole external lotion	3		RETIN-A MICRO PUMP EXTERNAL GEL 0.04 %, 0.1 %	1	
MIRVASO	3		RETIN-A MICRO PUMP EXTERNAL GEL 0.06 %, 0.08 %	3	
mometasone furoate external	1		RHOFADE	3	
NEMLUVIO	5	PA; QL	salicylic acid external foam	3	
NEO-SYNALAR	3		NORITATE	3	
neuac	1				

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Drug Name	Drug Tier	Notes	Drug Name	Drug Tier	Notes
salicylic acid external gel	3		sulfacetamide sodium-sulfur external liquid 10-5 %	1	
salicylic acid external shampoo	3		sulfacetamide sodium-sulfur external lotion 10-5 %	1	
salicylic acid external solution	3		sulfacetamide sodium-sulfur external lotion 9.8-4.8 %	3	
salicylic acid wart remover	3		sulfacetamide sodium-sulfur external pad	3	
SALIMEZ	3		sulfacetamide sodium-sulfur external suspension 10-5 %, 8-4 %	3	
SALIMEZ FORTE	3		SANTYL	2	sulfacetamide sod-sulfur wash
SALVAX	3		selenium sulfide external lotion	1	sulfacetamide-sulfur in urea
SALYCIM	3		selenium sulfide external shampoo 2.25 %	3	sulfacleanse 8/4
SALYNTRA	3		SERNIVO	3	sulfamez wash
SANTYL	2		sodium sulfacetamide external shampoo 10 %	1	SUMADAN WASH
selenium sulfide external lotion	1		sodium sulfacetamide wash	3	SUMAXIN
selenium sulfide external shampoo 2.25 %	3		SOFDRA	3	synalar
SERNIVO	3		SOOLANTRA	3	TACLONEX
sodium sulfacetamide external shampoo 10 %	1		SORILUX	3	tacrolimus external
sodium sulfacetamide wash	3		sss 10-5 external cream	3	tazarotene external cream
SOFDRA	3	PA	SSS 10-5 EXTERNAL FOAM	3	TAZAROTENE EXTERNAL FOAM
SOOLANTRA	3		sulfacetamide sodium (acne)	1	tazarotene external gel
SORILUX	3		sulfacetamide sodium (acne)	1	TAZORAC EXTERNAL CREAM 0.05 %
sss 10-5 external cream	3		sulfacetamide sodium (cleans)	3	TAZORAC EXTERNAL CREAM 0.1 %
SSS 10-5 EXTERNAL FOAM	3		sulfacetamide sodium external	3	TAZORAC EXTERNAL GEL
sulfacetamide sodium-sulfur external cream	3		sulfacetamide sodium-sulfur external cream	3	TEXACORT
sulfacetamide sodium-sulfur external liquid 10-2 %, 9-4 %, 9-4.5 %, 9-8-4.8 %	3		TOPICORT	3	TOLAK
			TOPICORT SPRAY	3	PA
			tovet	3	
			tretinoin external cream	1	

Drug Name	Drug Tier	Notes	Drug Name	Drug Tier	Notes
tretinoin external gel 0.01 %, 0.025 %	1		VANOXIDE-HC	3	
tretinoin external gel 0.05 %	3		VECTICAL	1	
tretinoin microsphere external gel 0.04 %, 0.1 %	1		VEREGEN	3	
tretinoin microsphere external gel 0.08 %	3		VIRASAL	3	
tretinoin microsphere pump external gel 0.04 %, 0.1 %	1		VTAMA	5	PA; QL
tretinoin microsphere pump external gel 0.08 %	3		WINLEVI	3	PA
triamicinolone acetonide external aerosol solution	3		WYNZORA	5	PA; QL
triamicinolone acetonide external cream	1		XALIX	3	
triamicinolone acetonide external lotion	1		xurea	3	
triamicinolone acetonide external ointment 0.025 %, 0.1 %, 0.5 %	1		ZACLIR CLEANSING	3	
triamicinolone acetonide external ointment 0.05 %	3		zenatane	1	
triderm	1		ZIANA	3	
TWYNEO	3	PA	ZITHRANOL	3	
ULTRAVATE	3		ZONALON	3	
UMECTA MOUSSE	3		ZORYVE	3	PA
URAMAXIN	3		ZYCLARA	3	
urea external cream 39 %, 41 %, 45 %, 47 %	3		ZYCLARA PUMP	3	
urea external cream 40 %	1		<b>Diabetes - Antidiabetic Agents</b>		
UREA EXTERNAL FOAM	3		acarbose oral	1	
urea hydrating	3		ACTOPLUS MET	3	
urea nail	3		ACTOS	3	
uredeb	3		ALOGIPTIN BENZOATE	3	PA
uremez-40	1		ALOGIPTIN-METFORMIN HCL	3	PA
URESOL	3		ALOGIPTIN-PIOGLITAZONE	3	PA
VANOS	3		BEXAGLIFLOZIN	3	PA
			BRENZAVVY	3	PA
			BYDUREON BCISE AUTOINJECTOR	3	PA; QL
			BYETTA 10 MCG PEN	3	PA; QL
			BYETTA 5 MCG PEN	3	PA; QL
			CYCLOSET ORAL TABLET 0.8 MG	3	PA
			DAPAGLIFLOZIN PRO-METFORMIN ER	3	PA; QL
			DAPAGLIFLOZIN PROPANEDIOL	3	PA; QL
			DUETACT	3	

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Drug Name	Drug Tier	Notes	Drug Name	Drug Tier	Notes
FARXIGA	3	PA; QL	MOUNJARO	5	PA; QL
glimepiride	1		nateglinide	3	
glipizide er	1		ONGLYZA	3	PA
glipizide oral tablet 10 mg, 5 mg	1		OZEMPIC	2	PA; QL
glipizide oral tablet 2.5 mg	3	PA	pioglitazone hcl	3	
glipizide xl	1		pioglitazone hcl- glimepiride	3	
glipizide-metformin hcl	1		pioglitazone hcl- metformin hcl	3	
GLUCOTROL XL	3		QTERN	3	PA; QL
GLUMETZA	3	PA	repaglinide	3	
glyburide micronized	3		RIOMET	3	
glyburide oral	1		RYBELSUS	3	PA; QL
glyburide-metformin	3		saxagliptin hcl	3	PA
GLYXAMBI	3	PA; QL	saxagliptin-metformin er	3	PA
INVOKAMET	3	PA; QL	SEGLUROMET	3	PA; QL
INVOKAMET XR	3	PA; QL	SITAGLIPTIN BASE- METFORMIN HCL	3	PA
INVOKANA	3	PA; QL	SITAGLIPTIN TABLET 100 MG ORAL	2	PA
JANUMET	3	PA	SITAGLIPTIN TABLET 100 MG ORAL	3	PA
JANUMET XR	3	PA	SITAGLIPTIN TABLET 25 MG ORAL	2	PA
JANUVIA	3	PA	SITAGLIPTIN TABLET 25 MG ORAL	3	PA
JARDIANCE	2	QL	SITAGLIPTIN TABLET 25 MG ORAL	2	PA
JENTADUETO	3	PA	SITAGLIPTIN TABLET 25 MG ORAL	3	PA
JENTADUETO XR	3	PA	SITAGLIPTIN TABLET 25 MG ORAL	2	PA
LIRAGLUTIDE	2	PA; QL	SITAGLIPTIN TABLET 50 MG ORAL	2	PA
metformin hcl er	1		SITAGLIPTIN TABLET 50 MG ORAL	3	PA
metformin hcl er (mod)	3	PA	SITAGLIPTIN TABLET 50 MG ORAL	3	PA
metformin hcl er (osm) oral tablet extended release 24 hour 1000 mg	3	PA	SOLIQUA	3	PA; QL
metformin hcl er (osm) oral tablet extended release 24 hour 500 mg	3		STEGLATRO	3	PA; QL
metformin hcl oral solution	1		STEGLUJAN	3	PA; QL
metformin hcl oral tablet 1000 mg, 500 mg, 850 mg	1		SYMLINPEN 120	3	
metformin hcl oral tablet 625 mg	5	PA; QL	SYMLINPEN 60	3	
miglitol	3	PA	SYNJARDY	3	PA; QL
			SYNJARDY XR	3	PA; QL
			TRADJENTA	3	PA
			TRIJARDY XR	3	PA; QL
			TRULICITY	3	PA; QL

Drug Name	Drug Tier	Notes	Drug Name	Drug Tier	Notes
VICTOZA	2	PA; QL	CHOSEN LANCING DEVICE	1	
XIGDUO XR	3	PA; QL	CHOSEN SAFETY LANCETS 28G	1	
XULTOPHY	3	PA; QL	CLEVER CHOICE COMFORT EZ	1	
ZITUVIO	3	PA	COMFORT TOUCH TWIST LANCET 30G	1	
<b>Diabetes - Glucose Monitoring</b>			CONTOUR CONTROL SOLUTION	1	
ACCU-CHEK FASTCLIX LANCET KIT	1		CONTOUR NEXT CONTROL SOLUTION	1	
ACCU-CHEK GUIDE CONTROL	1		CONTOUR NEXT GEN TEST STRIPS	1	PA; QL
ACCU-CHEK GUIDE TEST STRIPS	1	PA; QL	DASTIX REAGENT	3	
ACCU-CHEK SMARTVIEW CONTROL	1		DIATHRIVE GLUCOSE CONTROL SOLN	1	
ACCU-CHEK SOFTCLIX LANCET DEVICE KIT	1		DIATHRIVE LANCING DEVICE	1	
AGAMATRIX CONTROL LEVEL 2	1		DROPLET GENTEL LANCING DEVICE	1	
AGAMATRIX CONTROL LEVEL 4	1		EASY TALK PLUS II CONTROL	1	
AUTOLET II CLINISAFE	1		EASY TOUCH LANCING DEVICE	1	
AUTOLET LANCING DEVICE	1		BLULINK CONTROL HIGH & LOW	1	
CARESENS CONTROL SOLUTION A/B	1		EASY TRAK II CONTROL	1	
CARESENS LANCETS 30G	1		EASymax 15 LEVEL 2-3 CONTROL	1	
CARETOUCH CONTROL SOL LEVEL 2	1		EASymax CONTROL	1	
CARETOUCH LANCING/EJECTOR	1		GLUCOSE CONTROL SOLUTIONS	1	
CHEMSTRIP 10 MD	2		EMBRACE LANCING DEVICE/EJECTOR	1	
CHEMSTRIP 10/SG	2		EMBRACE TALK GLUCOSE CONTROL	1	
CHEMSTRIP 2 GP	2		FREESTYLE TEST	1	PA; QL
CHEMSTRIP 5 OB	2		GENTEL LANCING KIT (BLUE)	1	
CHEMSTRIP 7	2		GOJJI CONTROL	1	
CHEMSTRIP 9	2		GOJJI LANCING DEVICE/CLEAR CAP	1	
CHOSEN LANCETS 30G	1		IHEALTH CONTROL SOLUTION	1	

Drug Name	Drug Tier	Notes	Drug Name	Drug Tier	Notes
IHEALTH LANCING DEVICE	1		VERIFINE SAFE LANCET MINI 30G	1	
LANCETS	1		VIVAGUARD INO CONTROL SOLUTION	1	
LANCETS SUPER THIN	1		VIVAGUARD LANCETS 30G	1	
MICROLET NEXT LANCING DEVICE	1		VIVAGUARD LANCING DEVICE	1	
ONETOUCH DELICA PLUS LANCING	1		VIVAGUARD SAFETY LANCETS 28G	1	
ONETOUCH DELICA SAFETY LANCING	1		<b>Diabetes - Glycemic Agents</b>		
ONETOUCH ULTRA 2 KIT W/DEVICE	1		BAQSIMI ONE PACK	2	
ONETOUCH ULTRA IN VITRO LIQUID	1		BAQSIMI TWO PACK	2	
ONETOUCH ULTRA IN VITRO STRIP	1	QL	diazoxide oral	2	
ONETOUCH ULTRA TEST STRIPS	1	QL	glucagon emergency kit	1	
ONETOUCH VERIO FLEX SYSTEM KIT	1		GLUCAGON EMERGENCY KIT	3	
ONETOUCH VERIO IN VITRO LIQUID HIGH	1		GVOKE HYOPEN 1-PACK	5	QL
ONETOUCH VERIO TEST STRIPS	1	QL	GVOKE HYOPEN 2-PACK	5	QL
ONETOUCH VERIO REFLECT KIT W/DEVICE	1		GVOKE KIT	5	PA; QL
PERFECT POINT SAFETY LANCETS	1		GVOKE PFS	5	QL
PIP GLUCOSE CONTROL SOLUTION	1		PROGLYCEM	3	
TECHLITE LANCETS 26G	1		ZEGALOGUE	3	PA
<b>Diabetes - Insulins</b>					
TRUE METRIX LEVEL 1	1		ADMELOG	3	
TRUE METRIX LEVEL 2	1		ADMELOG SOLOSTAR	3	
TRUE METRIX LEVEL 3	1		AFREZZA	3	PA
UNISTRIP CONTROL IN VITRO SOLUTION LOW	1		APIDRA SOLOSTAR	3	
VERIFINE SAFE LANCET MINI 21G	1		APIDRA VIAL	3	
VERIFINE SAFE LANCET MINI 23G	1		AQ INSULIN SYRINGE	1	
VERIFINE SAFE LANCET MINI 28G	1		BASAGLAR KWIKPEN	3	PA
			BASAGLAR TEMPO PEN	3	PA
			BD ULTRA-FINE INSULIN SYRINGES	1	
			DROPSAFE SAFETY SYRINGE/NEEDLE	1	
			FIASP	3	
			FIASP FLEXTOUCH	3	

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Drug Name	Drug Tier	Notes	Drug Name	Drug Tier	Notes
FIASP PENFILL	3		INSULIN GLARGINE SOLOSTAR SUBCUTANEOUS SOLUTION PEN-INJECTOR 300 UNIT/ML	3	PA
FIASP PUMPCART	3				
HUMALOG	2				
HUMALOG KWIKPEN	2				
HUMALOG MIX 50/50 KWIKPEN	3		INSULIN GLARGINE-YFGN	1	
HUMALOG MIX 50/50 VIAL	3		INSULIN LISPRO	2	
HUMALOG MIX 75/25 KWIKPEN	3		INSULIN LISPRO (1 UNIT DIAL)	2	
HUMALOG MIX 75/25 VIAL	3		INSULIN LISPRO JUNIOR KWIKPEN	3	
HUMALOG TEMPO PEN	3	PA	INSULIN LISPRO PROT & LISPRO	3	
HUMALOG U-100 JUNIOR KWIKPEN	2		INSULIN SYRINGES 27G X 1/2" 0.5 ML, 27G X 1/2" 1 ML, 27G X 5/8" 1 ML,		
HUMULIN 70/30 KWIKPEN	1		28G X 1/2" 0.5 ML, 28G X 1/2" 1 ML, 29G X 1/2" 0.3		
HUMULIN 70/30 VIAL	1		ML, 29G X 1/2" 0.5 ML,		
HUMULIN N KWIKPEN	1		29G X 1/2" 1 ML, 30G X 1/2" 0.3 ML, 30G X 1/2"		
HUMULIN N VIAL	1		0.5 ML, 30G X 1/2" 1 ML,	1	
HUMULIN R U-500 KWIKPEN	1	PA	30G X 5/16" 0.3 ML, 30G X 5/16" 0.5 ML, 30G X 5/16" 1 ML, 31G X 15/64"		
HUMULIN R U-500 VIAL	1	PA	0.3 ML, 31G X 15/64" 0.5		
HUMULIN R VIAL	1		ML, 31G X 15/64" 1 ML,		
INSULIN ASP PROT & ASP FLEXPEN	3		31G X 5/16" 0.3 ML, 31G X 5/16" 0.5 ML, 31G X 5/16" 1 ML		
INSULIN ASPART	3		LANTUS SOLOSTAR	3	PA
INSULIN ASPART FLEXPEN	3		LANTUS U-100 VIAL	3	PA
INSULIN ASPART PENFILL	3		LEVEMIR FLEXPEN	2	PA
INSULIN ASPART PROT & ASPART	3		LEVEMIR U-100 VIAL	2	PA
INSULIN DEGLUDEC	2	PA	LYUMJEV KWIKPEN	3	PA
INSULIN DEGLUDEC FLEXTOUCH	2	PA	LYUMJEV TEMPO PEN	3	PA
INSULIN GLARGINE MAX SOLOSTAR	3	PA	LYUMJEV VIAL	3	PA
			NOVOLIN 70/30 FLEXPEN	3	PA
			NOVOLIN 70/30 FLEXPEN RELION	3	PA
			NOVOLIN 70/30 RELION	3	PA
			NOVOLIN 70/30 VIAL	3	PA
			NOVOLIN N FLEXPEN	3	PA

Drug Name	Drug Tier	Notes	Drug Name	Drug Tier	Notes
NOVOLIN N FLEXPEN RELION	3	PA	CARNITOR ORAL	3	
NOVOLIN N RELION	3	PA	CARNITOR SF	3	
NOVOLIN N VIAL	3	PA	CHEMET	3	
NOVOLIN R FLEXPEN	3	PA	curity sterile saline	1	
NOVOLIN R FLEXPEN RELION	3	PA	CUVRIOR	5	PA; QL
NOVOLIN R RELION	3	PA	cyanocobalamin injection solution 1000 mcg/ml	1	
NOVOLIN R VIAL	3	PA	cytra k crystals	1	
NOVOLOG 70/30 FLEXPEN RELION	3		deferasirox granules	4	QL
NOVOLOG FLEXPEN	3		deferasirox oral packet	4	QL
NOVOLOG FLEXPEN RELION	3		deferasirox oral tablet	1	
NOVOLOG MIX 70/30 FLEXPEN	3		deferasirox oral tablet soluble	1	
NOVOLOG MIX 70/30 RELION	3		deferiprone	5	PA; QL
NOVOLOG MIX 70/30 VIAL	3		DODEX	3	
NOVOLOG PENFILL	3		DRISDOL	3	
NOVOLOG RELION	3		EFFER-K ORAL TABLET		
NOVOLOG U-100 VIAL	3		EFFERVESCENT 10 MEQ, 20 MEQ	3	
REZVOGLAR KWIKPEN	3	PA	ergocalciferol oral capsule	1	
SEMGLEE (YFGN)	3	PA	EXJADE	5	PA; QL
TOUJEO MAX SOLOSTAR	3	PA	FERRIPROX ORAL SOLUTION	3	PA; QL
TOUJEO SOLOSTAR	3	PA	FERRIPROX ORAL TABLET	5	PA; QL
TRESIBA	3	PA	FERRIPROX TWICE-A-DAY	5	PA; QL
TRESIBA FLEXTOUCH	3	PA	folic acid injection	1	
ULTIGUARD SAFEPACK SYR/NEEDLE	1		folic acid oral tablet 1 mg	1	
VERIFINE INSULIN SYRINGE	1		FOLVITE-D	3	
<b>Electrolytes / Minerals / Metals / Vitamins</b>			iodine strong oral	3	
ACCRUFER	3	PA	JADENU	5	PA; QL
ARGYLE STERILE SALINE	1		JADENU SPRINKLE	5	PA; QL
argyle sterile water	3		JYNARQUE	5	PA; QL
CARBAGLU	5	PA; QL	KIONEX	3	
carglumic acid	5	PA; QL	klor-con	1	
			klor-con 10	1	

Drug Name	Drug Tier	Notes	Drug Name	Drug Tier	Notes
klor-con m10	1		potassium chloride oral	1	
klor-con m15	2		potassium citrate er	1	
klor-con m20	1		potassium citrate-citric acid	1	
klor-con/ef	3		SAMSCA	5	PA; QL
K-PHOS	3		sod citrate-citric acid	1	
K-PHOS NO 2	3		sodium chloride (pf)	1	
K-PHOS-NEUTRAL	3		sodium chloride irrigation	1	
k-prime	3		sodium fluoride oral solution	1	
K-TAB	3		sodium fluoride oral tablet 1.1 (0.5 f) mg	1	
levocarnitine oral solution	1		sodium fluoride oral tablet 2.2 (1 f) mg	3	
levocarnitine oral tablet	1		sodium fluoride oral tablet chewable	1	
levocarnitine sf	1		sodium polystyrene sulfonate	1	
LOKELMA	3	PA	sps (sodium polystyrene sulf)	1	
ORACIT	2		sterile water for irrigation	3	
ORAL CITRATE	2		SYPRINE	5	PA; QL
phospha 250 neutral	1		tolvaptan	5	PA; QL
phosphorous	1		tricitrates	1	
phospho-trin 250 neutral	1		trientine hcl	5	PA; QL
PHOSPHO-TRIN K500	3		UROCIT-K 10	3	
PHOXILLUM B22K4/0	3		UROCIT-K 15	3	
PHOXILLUM BK4/2.5	3		VELTASSA	3	PA
phytonadione injection	1		vitamin d (ergocalciferol) oral capsule 1.25 mg (50000 ut), 50000 unit	1	
phytonadione oral	1		vitamin k1 injection	1	
POKONZA	5	PA; QL	water for irrigation, sterile	3	
pot & sod cit-cit ac	1		wes-phos 250 neutral	1	
potassium chloride crys er oral tablet extended release 10 meq, 20 meq	1		<b>Gastrointestinal Agents - Drugs for Acid Reflux and Ulcer</b>		
potassium chloride crys er oral tablet extended release 15 meq	2		ACIPHEX	3	PA
potassium chloride er oral capsule extended release	1		CARAFATE	3	
potassium chloride er oral tablet extended release 10 meq, 20 meq, 8 meq	1		cimetidine hcl	1	
potassium chloride er oral tablet extended release 15 meq	3		cimetidine oral	1	

Drug Name	Drug Tier	Notes	Drug Name	Drug Tier	Notes
CYTOTEC	3		Gastrointestinal Agents - Drugs for Bowel, Intestine and Stomach Conditions		
DEXILANT	3	PA	alosetron hcl	5	QL
dexlansoprazole	3	PA	AMITIZA	3	PA; QL
esomeprazole magnesium oral packet	3	PA	amoxicill-clarithro-lansopraz	3	
famotidine oral suspension reconstituted	1		ANASPAZ	3	
famotidine oral tablet 20 mg, 40 mg	1		belladonna alkaloids-opium	1	QL
FIRST-LANSOPRAZOLE	3		BENTYL	3	
FIRST-OMEPRAZOLE	3		bis subcit-metronid-tetracyc	3	PA
KONVOMEP	3	PA	bismuth/metronidaz/tetracyclin	3	PA
lansoprazole oral capsule delayed release	1		CHENODAL	5	QL
lansoprazole oral tablet delayed release dispersible	3	PA	chlordiazepoxide-clidinium	1	QL
misoprostol oral	1		CLENPIQ	3	
NEXIUM ORAL PACKET	3	PA	constulose	1	
nizatidine	3		cromolyn sodium oral	3	
omeprazole oral capsule delayed release	1		CUVPOSA	3	
OMEPRAZOLE+SYRSPE ND SF ALKA	3		dicyclomine hcl intramuscular	3	
omeprazole-sodium bicarbonate oral packet	3	PA	dicyclomine hcl oral	1	
pantoprazole sodium oral packet	3		diphenoxylate-atropine	1	
pantoprazole sodium oral tablet delayed release	1		enulose	1	
PEPCID	3		GASTROCROM	3	
PREVACID	3		GATTEX	5	PA; QL
PREVACID SOLUTAB	3	PA	gavilyte-c	1	
PRILOSEC	3		gavilyte-g	1	
PROTONIX ORAL	3		gavilyte-n with flavor pack	1	
rabeprazole sodium oral tablet delayed release	1	PA	generlac	1	
sucralfate oral	1		GLYCATE	3	
VOQUEZNA	3	PA	glycopyrrolate injection solution	1	
ZEGERID ORAL PACKET	3	PA	glycopyrrolate oral solution	3	
			glycopyrrolate oral tablet 1 mg, 2 mg	1	

Drug Name	Drug Tier	Notes	Drug Name	Drug Tier	Notes
GLYCOPYRROLATE ORAL TABLET 1.5 MG	3		na sulfate-k sulfate-mg sulf	3	
GOLYTELY	3		nulev	1	
HELIDAC THERAPY	2		OMECLAMOX-PAK	3	
hyoscyamine sulfate er	1		opium	1	QL
hyoscyamine sulfate injection	3		oscimin	1	
hyoscyamine sulfate oral	1		peg 3350-kcl-na bicarb-nacl	1	
hyoscyamine sulfate sublingual	1		peg-3350/electrolytes	1	
hyosyne	1		peg-		
IBSRELA	5	PA; QL	3350/electrolytes/ascorba t	3	
IQIRVO	5	PA; QL	peg-kcl-nacl-nasulf-na asc-c	3	
KRISTALOSE	3		PEG-PREP	3	
lactulose encephalopathy oral solution 10 gm/15ml	1		PLENVU	3	
lactulose oral packet	3		PYLERA	3	PA
lactulose oral solution	1		RELISTOR ORAL	3	PA; QL
LEVIBID	3		RELISTOR SUBCUTANEOUS	2	PA
LEVSIN	3		RELTONE	5	PA; QL
LEVSIN/SL	3		REZDIFFRA	5	PA; QL
LIBRAX	3	QL	ROBINUL	3	
LINZESS ORAL CAPSULE 145 MCG, 290 MCG	3	PA; QL	ROBINUL-FORTE	3	
LINZESS ORAL CAPSULE 72 MCG	3	PA	SEROSTIM	5	PA; QL
LIVDELZI	5	PA; QL	SUFLAVE	3	
LOMOTIL	3		SUPREP BOWEL PREP KIT	3	
loperamide hcl oral capsule	1		SUTAB	3	
LOTRONEX	5	PA; QL	SYMPROIC	3	PA; QL
lubiprostone	3	PA; QL	TALICIA	3	
methscopolamine bromide oral	3		TRULANCE	3	PA; QL
MOTEGRITY	3	PA; QL	URSO FORTE	3	
MOTOFEN	3		URSODIOL ORAL CAPSULE 200 MG, 400 MG	5	PA; QL
MOVANTIK	3	PA; QL	ursodiol oral capsule 300 mg	1	
MOVIPREP	3		ursodiol oral tablet	1	
MYTESI	3		VIBERZI	3	PA

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Drug Name	Drug Tier	Notes	Drug Name	Drug Tier	Notes	
VOQUEZNA DUAL PAK	3	PA	sapropterin dihydrochloride	5	PA; QL	
VOQUEZNA TRIPLE PAK	3	PA	sodium phenylbutyrate oral	5	QL	
VOWST	5	PA; QL	STRENSIQ	5	PA; QL	
XERMELO	5	PA; QL	SUCRAID	5	PA; QL	
<b>Genetic or Enzyme Disorder - Drugs for Replacement, Modification, Treatment</b>			VIOKACE	3		
betaine	3		VOXZOGO	5	PA; QL	
BUPHENYL	5	PA; QL	yargesa	5	PA; QL	
CERDELGA	4	PA; QL	ZAVESCA	5	PA; QL	
CHOLBAM	5	PA; QL	ZENPEP	2		
CREON	2		<b>Genitourinary Agents - Drugs for Bladder, Genital and Kidney Conditions</b>			
CRYSVITA	5	PA; QL	acetic acid irrigation	1		
CYSTADANE	3		AURYXIA	3	PA; QL	
CYSTAGON	2	PA	bethanechol chloride oral	1		
DUVYZAT	5	PA; QL	calcium acetate (phos binder)	1		
EVRYSDI	5	PA; QL	calcium acetate oral tablet 667 mg	1		
GALAFOLD	5	PA; QL	CERVIDIL	2		
JAVYGTOR	5	PA; QL	CUPRIMINE	5	PA; QL	
KUVAN	5	PA; QL	darifenacin hydrobromide er	1		
miglustat	5	PA; QL	DEPEN TITRATABS	5	PA; QL	
MYALEPT	5	PA; QL	DETROL	3		
nitisinone	5	PA; QL	DETROL LA	3		
NITYR	5	PA; QL	ELMIRON	2		
OCALIVA	5	PA; QL	ENTADFI	3	PA	
OLPRUVA (2 GM DOSE)	5	PA; QL	FEM PH	3		
OLPRUVA (3 GM DOSE)	5	PA; QL	fesoterodine fumarate er	3	PA	
OLPRUVA (4 GM DOSE)	5	PA; QL	FILSPARI	5	PA; QL	
OLPRUVA (5 GM DOSE)	5	PA; QL	flavoxate hcl	1		
OLPRUVA (6 GM DOSE)	5	PA; QL	FOSRENOL	5	PA; QL	
OLPRUVA (6.67 GM DOSE)	5	PA; QL	GELNIQUE	3	PA	
OPFOLDA	3	PA	GEMTESA	3	PA	
ORFADIN	5	PA; QL	INTRAROSA	3	PA; QL	
PANCREAZE	3		lanthanum carbonate	5	QL	
PERTZYE	3		LITHOSTAT	3		
PHEBURANE	5	PA; QL				
PROCYSBI	5	PA; QL				
RAVICTI	5	PA; QL				

Drug Name	Drug Tier	Notes	Drug Name	Drug Tier	Notes
me/naphos(mb/hyo1	3		uretron d/s	3	
mirabegron er	1		URIBEL	3	
MYRBETRIQ	3		URIMAR-T	3	
oxybutynin chloride er	1		urin ds	3	
oxybutynin chloride oral tablet 2.5 mg	3		URNEVA	3	
oxybutynin chloride oral tablet 5 mg	1		UROGESIC-BLUE	3	
oxybutynin chloride solution 5 mg/5ml oral	1		uro-mp	3	
OXYBUTYNIN CHLORIDE SOLUTION 5 MG/5ML ORAL	3	PA	VELPHORO	5	PA; QL
OXYTROL	3	PA	VESICARE	3	
penicillamine oral	4	PA; QL	VESICARE LS	3	
PENTOSAN POLYSULFATE SODIUM ORAL	2		vilamit mb	3	
phenazo oral tablet 200 mg	1		VILEVEV MB	3	
phenazopyridine hcl oral tablet 100 mg, 200 mg	1		Genitourinary Agents - Drugs for Prostate Conditions		
PREPIDIL	2		alfuzosin hcl er	1	
PYRIDIUM	3		AVODART	3	
RENACIDIN	3		CARDURA XL	3	
RENVELA	3		dutasteride oral	1	
RIMSO-50	3		dutasteride-tamsulosin hcl	3	
RIVFLOZA	5	PA; QL	finasteride oral tablet 5 mg	1	
sevelamer carbonate	1		FLOMAX	3	
sevelamer hcl	1	PA	PROSCAR	3	
solifenacin succinate	1		RAPAFLO	3	
THIOLA	5	PA; QL	silodosin	1	
THIOLA EC	5	PA; QL	tamsulosin hcl	1	
tiopronin	5	PA; QL	terazosin hcl	1	
tolterodine tartrate	1		UROXATRAL	3	
tolterodine tartrate er	1		Hormonal Agents - Adrenal		
TOVIAZ	3	PA	AGAMREE	5	PA; QL
trospium chloride	1		ALKINDI SPRINKLE	5	PA; QL
trospium chloride er	1		BETAMETHASONE SODIUM PHOSPHATE INJECTION	3	
urelle	3		BLT-25	3	
			CORTEF	3	
			CORTISONE ACETATE ORAL	3	

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Drug Name	Drug Tier	Notes	Drug Name	Drug Tier	Notes
deflazacort	5	PA; QL	dexamethasone sodium phosphate solution 4 mg/ml injection	1	
DEPO-MEDROL INJECTION SUSPENSION 20 MG/ML	2		DEXONTO 0.4%	3	
DEPO-MEDROL INJECTION SUSPENSION 40 MG/ML, 80 MG/ML	3		EMFLAZA	5	PA; QL
DEXABLISS	3		fludrocortisone acetate oral	1	
DEXAMETHASONE (LA)	3		HEMADY	3	PA
DEXAMETHASONE ACETATE INJECTION	3		HIDEX 6-DAY	3	
dexamethasone intensol	2		hydrocortisone oral	1	
dexamethasone oral elixir	1		KENALOG-10	3	
dexamethasone oral solution	1		KENALOG-40	3	
dexamethasone oral tablet	1		MEDROL ORAL TABLET 16 MG, 4 MG, 8 MG	3	
dexamethasone oral tablet therapy pack	3		MEDROL ORAL TABLET 2 MG	2	
dexamethasone sod phos +rfid	1		MEDROL ORAL TABLET THERAPY PACK	3	
dexamethasone sod phosphate pf injection solution	1		METHYLPREDNISOLONE ACE-LIDO	3	
dexamethasone sodium phosphate injection solution 100 mg/10ml, 120 mg/30ml, 20 mg/5ml	1		METHYLPREDNISOLONE ACETATE INJECTION SUSPENSION 40 MG/ML, 80 MG/ML	3	
dexamethasone sodium phosphate injection solution prefilled syringe	1		methylprednisolone oral	1	
DEXAMETHASONE SODIUM PHOSPHATE SOLUTION 10 MG/ML INJECTION	3		methylprednisolone sodium succ injection solution reconstituted 125 mg	1	
dexamethasone sodium phosphate solution 10 mg/ml injection	1		ORAPRED ODT	3	
DEXAMETHASONE SODIUM PHOSPHATE SOLUTION 4 MG/ML INJECTION	3		PEDIAFRED	3	
			prednisolone oral solution	1	
			prednisolone oral tablet	3	
			prednisolone sodium phosphate oral solution 10 mg/5ml, 20 mg/5ml	3	
			prednisolone sodium phosphate oral solution 15 mg/5ml, 25 mg/5ml, 6.7 (5 base) mg/5ml	1	
			prednisolone sodium phosphate oral tablet dispersible	3	

Drug Name	Drug Tier	Notes	Drug Name	Drug Tier	Notes
prednisone intensol	3		testosterone enanthate intramuscular	1	
prednisone oral	1				
RAYOS	3	PA	testosterone transdermal gel 1.62 %, 12.5 mg/act (1%), 20.25 mg/act (1.62%), 25 mg/2.5gm (1%), 50 mg/5gm (1%)	1	QL
SOLU-CORTEF	2				
SOLU-MEDROL (PF) INJECTION SOLUTION RECONSTITUTED 125 MG	3		testosterone transdermal gel 10 mg/act (2%), 20.25 mg/1.25gm (1.62%), 40.5 mg/2.5gm (1.62%)	3	PA; QL
TAPERDEX 12-DAY	3				
TAPERDEX 6-DAY	3		testosterone transdermal solution	3	PA; QL
TAPERDEX 7-DAY	3				
TRIAMCINOLONE ACETONIDE INJECTION SUSPENSION 50 MG/ML	3		TLANDO	3	PA
triamcinolone acetonide suspension 40 mg/ml injection	3		VOGELXO	3	QL
TRIAMCINOLONE ACETONIDE SUSPENSION 40 MG/ML INJECTION	3		VOGELXO PUMP	3	QL
TRIAMCINOLONE DIACETATE INJECTION	3		XYOSTED	3	PA
<b>Hormonal Agents - Pituitary</b>					
ACTHAR	4				
ACTHAR GEL	4				
cabergoline	1				
CORTROPHIN	4				
DDAVP	3				
DDAVP PF	3				
<b>Hormonal Agents - Men's Health</b>					
ANDRODERM TRANSDERMAL PATCH 24 HOUR 2 MG/24HR, 4 MG/24HR	3	PA; QL	desmopressin ace spray refrig	1	
ANDROGEL PUMP	3	QL	desmopressin acetate injection	1	
danazol oral	1		DESMOPRESSIN ACETATE NASAL	2	
DEPO-TESTOSTERONE (brand testosterone cypionate intramuscular)	1		desmopressin acetate oral	1	
JATENZO	3	PA	desmopressin acetate pf	1	
KYZATREX	3	PA	desmopressin acetate spray	1	
METHITEST	3	PA	EGRIFTA SV	5	QL
methyltestosterone oral	3	PA	ELIGARD	2	
NATESTO	3	PA; QL	FENSOLVI (6 MONTH)	3	
TESTIM	3	QL	GENOTROPIN	5	PA; QL
TESTONE CIK	3		GENOTROPIN MINIQUICK	5	PA; QL
testosterone cypionate intramuscular	1		HUMATROPE	5	PA; QL

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Drug Name	Drug Tier	Notes	Drug Name	Drug Tier	Notes
INCRELEX	5	PA; QL	SIGNIFOR	5	PA; QL
ISTURISA	5	PA; QL	SKYTROFA	5	PA; QL
Ianreotide acetate	5	PA; QL	SOGROYA	5	PA; QL
leuprolide acetate injection	1		SOMATULINE DEPOT	5	PA; QL
LUPRON DEPOT (1-MONTH)	2		SOMAVERT	5	PA; QL
LUPRON DEPOT (3-MONTH)	2		SYNAREL	3	QL
LUPRON DEPOT (4-MONTH) INTRAMUSCULAR KIT 30MG	2		ZOMACTON	5	PA; QL
LUPRON DEPOT (6-MONTH) INTRAMUSCULAR KIT 45MG	2		<b>Hormonal Agents - Prostaglandins</b>		
LUPRON DEPOT-PED (1-MONTH)	2		KORLYM	5	PA; QL
LUPRON DEPOT-PED (3-MONTH)	2		MIFEPREX	1	
MYCAPSSA	5	PA; QL	mifepristone oral tablet 200 mg	1	
NGENLA	5	PA; QL	mifepristone oral tablet 300 mg	5	PA; QL
NOCDURNA	3	PA	<b>Hormonal Agents - Selective Estrogen Receptor Modifying Agents</b>		
NORDITROPIN FLEXPRO	5	PA; QL	EVISTA	3	
NUTROPIN AQ NUSPIN 10	5	PA; QL	OSPHENA	3	PA
NUTROPIN AQ NUSPIN 20	5	PA; QL	raloxifene hcl	1	
NUTROPIN AQ NUSPIN 5	5	PA; QL	<b>Hormonal Agents - Sex Hormones and Birth Control</b>		
octreotide acetate injection	1		ACTIVELLA	3	
octreotide acetate subcutaneous	1		afirmelle	1	
OMNITROPE	4	PA; QL	aftera	1	
ORILISSA	5	PA; QL	AFTERPILL	1	
RECORLEV	5	PA; QL	ALORA	3	
SAIZEN	5	PA; QL	altavera	1	
SANDOSTATIN	3	PA	alyacen 1/35	1	
SANDOSTATIN LAR DEPOT	2	QL	alyacen 7/7/7	1	
			amethyst	3	
			ANGELIQ	3	
			ANNOVERA	3	
			apri	1	
			aranelle	1	
			ashlynna	1	
			aubra eq	1	
			aurovela 1.5/30	1	
			aurovela 1/20	1	

Drug Name	Drug Tier	Notes	Drug Name	Drug Tier	Notes
aurovela 24 fe	1		DEPO-SUBQ PROVERA 104	3	
aurovela fe 1.5/30	1		desogestrel-ethinyl estradiol	1	
aurovela fe 1/20	1		DIVIGEL	3	
aviane	1		dolishale	3	
ayuna	1		dotti	1	
azurette	1		drospirene-eth estrad-levomefol	3	
BALCOLTRA	3		drospirenone-ethinyl estradiol	1	
balziva	1		DUAVEE	3	
BEYAZ	3		econtra one-step	1	
BIJUVA	3		eemt	3	
blisovi 24 fe	1		eemt hs	3	
blisovi fe 1.5/30	1		ELESTRIN	3	
blisovi fe 1/20	1		elinest	1	
brielllyn	1		ELLA	2	
camila	1		eluryng	1	
camrese	1		emzahh	1	
camrese lo	1		ENDOMETRIN	3	
charlotte 24 fe	3		enilloring	1	
chateal eq	1		enpresse-28	1	
CLIMARA	1		enskyce	1	
CLIMARA PRO	3		errin	1	
COMBIPATCH	3		est estrogens-methyltest ds	3	
covaryx	3		est estrogens-methyltest hs	3	
covaryx hs	3		estarrylla	1	
CRINONE	3		ESTRACE	3	
cryselle-28	1		estradiol oral	1	
curae	1		estradiol transdermal gel	3	
cyred eq	1		estradiol transdermal patch twice weekly	1	
dasetta 1/35	1		estradiol transdermal patch weekly	1	
dasetta 7/7/7	1		estradiol vaginal	1	
daysee	1				
deblitane	1				
DELESTROGEN	2				
delyla	1				
DEPO-ESTRADIOL	2				
DEPO-PROVERA	3				

Drug Name	Drug Tier	Notes	Drug Name	Drug Tier	Notes
estradiol valerate intramuscular	1		jinteli	3	
estradiol-norethindrone acet	1		jolessa	1	
estrestest f.s.	3		joyeaux	3	
ESTRING	2		juleber	1	
ESTROGEL	3		junel 1.5/30	1	
ethynodiol diac-eth estradiol	1		junel 1/20	1	
etonogestrel-ethinyl estradiol	1		junel fe 1.5/30	1	
EVAMIST	3		junel fe 1/20	1	
falmina	1		junel fe 24	1	
FEMLYV	3		kaitlib fe	3	
FEMRING	2		kalliga	1	
finzala	3		kariva	1	
FIRST-PROGESTERONE VGS	3		kelnor 1/35	1	
fyavolv	3		kelnor 1/50	1	
gallifrey	1		kurvelo	1	
gemmily	3		larin 1.5/30	1	
hailey 1.5/30	1		larin 1/20	1	
hailey 24 fe	1		larin 24 fe	1	
hailey fe 1.5/30	1		larin fe 1.5/30	1	
hailey fe 1/20	1		larin fe 1/20	1	
haloette	1		layolis fe	3	
heather	1		leena	1	
her style	1		lessina	1	
iclevia	1		levonest	1	
IMVEXXY MAINTENANCE PACK	3		levonorgest-eth est & eth est	3	
IMVEXXY STARTER PACK	3		levonorgest-eth estrad 91-day	1	
incassia	1		levonorgest-eth estradiol-iron	3	
introvale	1		levonorgestrel	1	
isibloom	1		levonorgestrel-ethinyl estrad oral tablet 0.1-20 mg-mcg, 0.15-30 mg-mcg	1	
jaimiess	1		levonorgestrel-ethinyl estrad oral tablet 90-20 mcg	3	
jasmiel	1		levonorg-eth estrad triphasic	1	
jencycla	1				

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Drug Name	Drug Tier	Notes	Drug Name	Drug Tier	Notes
levora 0.15/30 (28)	1		mono-linyah	1	
LILETTA (52 MG)	3		my choice	1	
LO LOESTRIN FE	3		my way	1	
LOESTRIN 1.5/30 (21)	3		MYFEMBREE	5	PA; QL
LOESTRIN 1/20 (21)	3		NATAZIA	3	
LOESTRIN FE 1.5/30	3		necon 0.5/35 (28)	1	
LOESTRIN FE 1/20	3		new day	1	
lojaimiess	1		NEXTSTELLIS	3	
loryna	1		nikki	1	
low-ogestrel	1		nora-be	1	
lo-zumandimine	1		norelgestromin-eth estradiol	1	
lutera	1		norethrin ace-eth estrad-fe oral capsule	3	
lyleq	1		norethrin ace-eth estrad-fe oral tablet	1	
lyllana	1		norethrin ace-eth estrad-fe oral tablet chewable	3	
lyza	1		norethindrone acetate oral	1	
marlissa	1		norethindrone acetate oral	1	
medroxyprogesterone acetate	1		norethindrone acet-ethinyl est	1	
megestrol acetate oral suspension 40 mg/ml, 400 mg/10ml, 800 mg/20ml	1		norethindrone oral	1	
megestrol acetate oral suspension 625 mg/5ml	3		norethindrone-eth estradiol	3	
megestrol acetate oral tablet	1		norethindron-ethinyl estrad-fe	3	
MENEST	3		norethrin-eth estradiol-fe	3	
MENOSTAR	3		norgestimate-eth estradiol	1	
merzee	3		norgestimate-ethinyl estradiol triphasic	1	
mibelas 24 fe	3		norlyroc	1	
microgestin 1.5/30	1		nortrel 0.5/35 (28)	1	
microgestin 1/20	1		nortrel 1/35 (21)	1	
microgestin fe 1.5/30	1		nortrel 1/35 (28)	1	
microgestin fe 1/20	1		nortrel 7/7/7	1	
mili	1		NUVARING	3	
mimvey	1		nylia 1/35	1	
MINIVELLE	3		nylia 7/7/7	1	
MIRENA (52 MG)	2				

Drug Name	Drug Tier	Notes	Drug Name	Drug Tier	Notes
ocella	1		taysofy	3	
opcicon one-step	1		TAYTULLA CAPSULE 1-20 MG-MCG(24) ORAL	3	
OPILL	1		TAYTULLA CAPSULE 1-20 MG-MCG(24) ORAL	3	PA
option 2	1		TAYTULLA CAPSULE 1-20 MG-MCG(24) ORAL	3	PA
ORIAHNN	5	PA; QL	tilia fe	3	
PARAGARD INTRAUTERINE COPPER	2		tri-estarylla	1	
			tri-legest fe	3	
philith	1		tri-linyah	1	
pimtreia	1		tri-lo-estarylla	1	
PLAN B ONE-STEP	3		tri-lo-marzia	1	
portia-28	1		tri-lo-mili	1	
PREMARIN ORAL	3	PA	tri-lo-sprintec	1	
PREMARIN VAGINAL	2		tri-mili	1	
PREMPHASE	3		tri-sprintec	1	
PREMPRO	3		trivora (28)	1	
progesterone intramuscular	1		tri-vylibra	1	
			tri-vylibra lo	1	
progesterone oral	1		turqoz	1	
PROMETRIUM	3		TWIRLA	3	
PROVERA	3		tyblume	1	
react	1		tydemy	3	
reclipsen	1		VAGIFEM	3	
rivilsa	3		velivet	1	
SAFYRAL	3		vestura	1	
setlakin	1		vienna	1	
sharobel	1		viorele	1	
simliya	1		VIVELLE-DOT	3	
simpesse	1		volnea	1	
SKYLA	2		vyfemla	1	
SLYND	3		vylibra	1	
sprintec 28	1		wera	1	
sronyx	1		wymzya fe	3	
syeda	1		xulane	1	
take action	1		YASMIN 28	3	
tarina 24 fe	1		YAZ	3	
tarina fe 1/20 eq	1		yuvafem	1	

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Drug Name	Drug Tier	Notes	Drug Name	Drug Tier	Notes
zafemy	1		ADALIMUMAB-AACF (2 SYRINGE)	5	PA; QL
zovia 1/35 (28)	1		adalimumab-aacf(cd/uc/hs strt)	5	PA; QL
zumandimine	1		adalimumab-aacf(ps/uv starter)	5	PA; QL
<b>Hormonal Agents - Thyroid</b>					
ADTHYZA	3		ADALIMUMAB-AATY (1 PEN)	5	PA; QL
ARMOUR THYROID	3		ADALIMUMAB-AATY (2 PEN)	5	PA; QL
CYTOMEL	3		ADALIMUMAB-AATY (2 SYRINGE)	5	PA; QL
ERMEZA	3	PA	ADALIMUMAB-ADAZ	5	PA; QL
euthyrox	3		ADALIMUMAB-ADBM (2 PEN)	5	PA; QL
levo-t	3		ADALIMUMAB-ADBM (2 SYRINGE)	5	PA; QL
LEVOTHYROXINE SODIUM ORAL CAPSULE	3		ADALIMUMAB-FKJP (2 PEN)	5	PA; QL
levothyroxine sodium oral tablet	1		ADALIMUMAB-FKJP (2 SYRINGE)	5	PA; QL
levoxyl	3		ADALIMUMAB-ADBM(CD/UC/HS STRT)	5	PA; QL
liothyronine sodium oral	1		ADALIMUMAB-ADBM(PS/UV STARTER)	5	PA; QL
methimazole oral	1		ADALIMUMAB-RYVK (2 PEN)	5	PA; QL
NIVA THYROID	3		ADALIMUMAB-RYVK (2 SYRINGE)	5	PA; QL
NP THYROID	3		AMJEVITA	2	PA; QL
propylthiouracil oral	1		AMJEVITA-PED 10KG TO <15KG SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 10MG/0.2ML	2	PA; QL
SYNTHROID	3		AMJEVITA-PED 15KG TO <30KG	2	PA; QL
THYQUIDITY	3		ANTIVENIN LATRODECTUS MACTANS	3	
THYROID ORAL	3		ARAVA	3	
TIROSINT	3		ARCALYST	5	PA; QL
TIROSINT-SOL	3		ASTAGRAF XL	3	
unithroid	3		AZASAN	3	
<b>Immunological Agents - Drugs for Immune System Stimulation or Suppression</b>					
ABRILADA (1 PEN)	5	PA; QL	ADALIMUMAB-AACF (2 PEN)	5	PA; QL
ABRILADA (2 PEN)	5	PA; QL	ADALIMUMAB-AATY (1 PEN)	5	PA; QL
ABRILADA (2 SYRINGE)	5	PA; QL	ADALIMUMAB-ADAZ	5	PA; QL
ACTEMRA ACTPEN	5	PA; QL	ADALIMUMAB-ADBM (2 PEN)	5	PA; QL
ACTEMRA SUBCUTANEOUS	5	PA; QL	ADALIMUMAB-FKJP (2 PEN)	5	PA; QL
ACTIMMUNE	5	QL	ADALIMUMAB-FKJP (2 SYRINGE)	5	PA; QL
ADALIMUMAB-AACF (2 PEN)	5	PA; QL	AMJEVITA	2	PA; QL

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Drug Name	Drug Tier	Notes	Drug Name	Drug Tier	Notes
azathioprine oral tablet 100 mg, 75 mg	3		everolimus oral tablet 0.25 mg, 0.5 mg, 0.75 mg, 1 mg	5	QL
azathioprine oral tablet 50 mg	1		FIRAZYR	5	PA; QL
BENLYSTA SUBCUTANEOUS	5	PA; QL	gengraf	1	
BERINERT	4	PA; QL	HADLIMA	5	PA; QL
BIMZELX	5	PA; QL	HADLIMA PUSHTOUCH	5	PA; QL
CELLCEPT	3		HAEGARDA	5	PA; QL
CIMZIA	5	PA; QL	HEPAGAM B	3	
CIMZIA (2 SYRINGE)	5	PA; QL	HIZENTRA	4	PA; QL
CIMZIA-STARTER	5	PA; QL	HULIO (2 PEN)	5	PA; QL
CINRYZE	5	PA; QL	HULIO (2 SYRINGE)	5	PA; QL
COSENTYX (300 MG DOSE)	4	PA; QL	HUMIRA (2 PEN)	4	PA; QL
COSENTYX 150 MG/ML SUBCUTANEOUS	4	PA; QL	HUMIRA-CD/UC/HS STARTER	4	PA; QL
COSENTYX SENSOREADY (300 MG)	4	PA; QL	HUMIRA- PSORIASIS/UVEIT STARTER	4	PA; QL
COSENTYX SENSOREADY PEN	4	PA; QL	HYPERHEP B	2	
COSENTYX UNOREADY	4	PA; QL	HYPERRAB	3	
CUTAQUIG	5	PA; QL	HYPERTET	3	
CUVITRU	4	PA; QL	HYQVIA	4	PA; QL
cyclosporine modified	1		HYRIMOZ	5	PA; QL
cyclosporine oral	1		HYRIMOZ-CROHNS/UC STARTER	5	PA; QL
CYLTEZO (2 PEN)	5	PA; QL	HYRIMOZ-PED<40KG CROHN STARTER	5	PA; QL
CYLTEZO (2 SYRINGE)	5	PA; QL	HYRIMOZ-PED>/=40KG CROHN START	5	PA; QL
CYLTEZO-CD/UC/HS STARTER	5	PA; QL	HYRIMOZ-PLAQ PSOR/UVEIT START	5	PA; QL
CYLTEZO- PSORIASIS/UV STARTER	5	PA; QL	HYRIMOZ-PLAQUE PSORIASIS START	5	PA; QL
ENBREL	4	PA; QL	icatibant acetate	4	PA; QL
ENBREL MINI	4	PA; QL	IDACIO (2 PEN)	5	PA; QL
ENBREL SURECLICK	4	PA; QL	IDACIO (2 SYRINGE)	5	PA; QL
ENSPRYNG	5	PA; QL	IDACIO-CROHNS/UC STARTER	5	PA; QL
ENTYVIO SUBCUTANEOUS	5	PA; QL	IDACIO-PSORIASIS STARTER	5	PA; QL
ENVARSUS XR	2				
			IDACIO-PSORIASIS STARTER	5	PA; QL

Drug Name	Drug Tier	Notes	Drug Name	Drug Tier	Notes
IMOGRAB RABIES-HT	3		RASUVO	2	
IMURAN	3		REZUROCK	5	PA; QL
JOENJA	5	PA; QL	RHOPHYLAC	3	
JYLAMVO	3	PA	RIDAURA	4	QL
KEDRAB	3		RINVOQ	5	PA; QL
KEVZARA	5	PA; QL	RINVOQ LQ	5	PA; QL
KINERET	5	PA; QL	RUCONEST	5	PA; QL
leflunomide oral	1		sajazir	4	PA; QL
LUPKYNIS	5	PA; QL	SANDIMMUNE ORAL	3	
methotrexate sodium	1		SILIQ	5	PA; QL
methotrexate sodium (pf)	1		SIMLANDI (1 PEN)	5	PA; QL
mycophenolate mofetil oral	1		SIMLANDI (2 PEN)	5	PA; QL
mycophenolate sodium	1		SIMPONI	5	PA; QL
mycophenolic acid	1		sirolimus oral	1	
MYFORTIC	3		SKYRIZI SUBCUTANEOUS	4	PA; QL
MYHIBBIN	5	PA; QL	SOTYKTU	5	PA; QL
NABI-HB	2		SPEVIGO SUBCUTANEOUS	5	PA; QL
NEORAL	3		STELARA SUBCUTANEOUS	4	PA; QL
OLUMIANT	5	PA; QL	tacrolimus oral	1	
OMVOH SUBCUTANEOUS	5	PA; QL	TAKHZYRO	5	PA; QL
ORENCIA CLICKJECT	4	PA; QL	TALTZ	5	PA; QL
ORENCIA SUBCUTANEOUS	4	PA; QL	TREMFYA SUBCUTANEOUS	4	PA; QL
ORLADEYO	5	PA; QL	TREXALL	3	
OTEZLA	4	PA; QL	TYENNE SUBCUTANEOUS	5	PA; QL
OTREXUP SUBCUTANEOUS SOLUTION AUTO-INJECTOR 10 MG/0.4ML, 12.5 MG/0.4ML, 15 MG/0.4ML, 17.5 MG/0.4ML, 22.5 MG/0.4ML, 25 MG/0.4ML	3	PA	VARIZIG	3	
OTREXUP SUBCUTANEOUS SOLUTION AUTO-INJECTOR 20 MG/0.4ML	3		VELSIPITY	5	PA; QL
PROGRAF ORAL	3		XATMEP	3	PA; QL
RAPAMUNE	3		XELJANZ	4	PA; QL
			XELJANZ XR	4	PA; QL
			XEMBIFY	5	PA; QL
			YUFLYMA (1 PEN)	5	PA; QL
			YUFLYMA (2 PEN)	5	PA; QL
			YUFLYMA (2 SYRINGE)	5	PA; QL

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Drug Name	Drug Tier	Notes	Drug Name	Drug Tier	Notes
YUFLYMA-CD/UC/HS STARTER	5	PA; QL	INFANRIX	2	
YUSIMRY	5	PA; QL	IPOPOL	2	
ZORTRESS	5	QL	KINRIX	2	
ZYMFENTRA (1 PEN)	5	PA; QL	MENQUADFI	2	
ZYMFENTRA (2 PEN)	5	PA; QL	MENVEO	2	
ZYMFENTRA (2 SYRINGE)	5	PA; QL	M-M-R II	2	
<b>Immunological Agents - Drugs for Vaccination</b>			MODERNA COVID-19 VAC 6M-11Y	2	
			MRESVIA	2	
ABRYSVO	2		NOVAVAX COVID-19 VACCINE	2	
ACTHIB	2		PEDIARIX	2	
ADACEL	2		PEDVAX HIB	2	
AFLURIA	1		PENBRAYA	2	
AFLURIA PRESERVATIVE FREE	1		PENTACEL	2	
AREXVY	2		PFIZER COVID-19 VAC-TRIS 5-11Y	2	
BEXSERO	2		PFIZER COVID-19 VAC-TRIS 6M-4Y	2	
BIOTHRAX	3		PNEUMOVAX 23	2	
BOOSTRIX	2		PREHEVBRIOD	2	
CAPVAXIVE	2		PREVNAR 20	2	
COMIRNATY	2		PRIORIX	2	
DAPTACEL	2		PROQUAD	2	
ENGERIX-B	2		QUADRACEL	2	
FLUAD	1		RECOMBIVAX HB	2	
FLUARIX	1		ROTARIX	2	
FLUBLOK	1		ROTATEQ	2	
FLUCELVAX	1		SHINGRIX	2	
FLULALVAL	1		SPIKEVAX	2	
FLUMIST	1		TDVAX	2	
FLUZONE HIGH-DOSE	1		TENIVAC	2	
FLUZONE INTRAMUSCULAR SUSPENSION PREFILLED SYRINGE	1		TETANUS-DIPHTHERIA TOXOIDS TD	2	
GARDASIL 9	2		TRUMENBA	2	
HAVRIX	2		TWINRIX	3	
HEPLISAV-B	2				
HIBERIX	2				

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Drug Name	Drug Tier	Notes	Drug Name	Drug Tier	Notes
VAQTA			hydrocortisone rectal	1	
INTRAMUSCULAR SUSPENSION 50 UNIT/ML	2		LIALDA	3	
VARIVAX	2		lidocaine-hydrocort (perianal)	3	
VAXELIS	2		LIDOCAINE-HYDROCORTISONE ACE RECTAL GEL	3	
VAXNEUVANCE	2		lidocaine-hydrocortisone ace rectal kit 3-0.5 %, 3-1 %	3	
<b>Inflammatory Bowel Disease Agents</b>			LIDOCORT	3	
ANALPRAM-HC	3		mesalamine er oral capsule 500 mg	1	PA
anucort-hc	3		mesalamine er oral capsule 0.375 gm	1	
ANUSOL-HC EXTERNAL	3		mesalamine oral capsule delayed release 400 mg	1	PA
anusol-hc rectal	3		mesalamine oral tablet delayed release 1.2 gm	1	
APRISO	1		mesalamine oral tablet delayed release 800 mg	3	PA
AZULFIDINE	3		mesalamine rectal	1	
AZULFIDINE EN-TABS	3		mesalamine-cleanser	3	
balsalazide disodium	1		PENTASA ORAL CAPSULE EXTENDED RELEASE 250 MG	2	PA
budesonide er	5	PA; QL	PENTASA ORAL CAPSULE EXTENDED RELEASE 500 MG	1	PA
budesonide oral (generic Entocort)	1		PROCORT	3	
budesonide rectal	3		PROCTOCORT	3	
CANASA	3		PROCTOFOAM HC	2	
COLAZAL	3		procto-med hc	1	
CORTENEMA	3		proctosol hc	1	
CORTIFOAM	2		proctozone-hc	1	
DELZICOL	3	PA	ROWASA	3	
DIPENTUM	5	PA; QL	SFROWASA	3	
EOHILIA	5	PA; QL	sulfasalazine oral	1	
hemmorex-hc rectal suppository 25 mg	3		TARPEYO	5	PA; QL
HEMMOREX-HC RECTAL SUPPOSITORY 30 MG	3		UCERIS ORAL	5	PA; QL
hydrocortisone (perianal) external cream 1 %	3		UCERIS RECTAL	3	
hydrocortisone (perianal) external cream 2.5 %	1				
hydrocortisone ace-pramoxine external cream 1-1 %	3				
hydrocortisone acetate rectal	3				

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Drug Name	Drug Tier	Notes	Drug Name	Drug Tier	Notes
<b>Metabolic Bone Disease Agents - Drugs for Osteoporosis</b>			AEROCHAMBER MINI CHAMBER	2	
ACTONEL	3		AEROCHAMBER MV	2	
alendronate sodium	1		AEROCHAMBER PLS FLOVU MTHPIECE	2	
ATELVIA	3		AEROCHAMBER PLUS FLO-VU INTERM	2	
BINOSTO	3		AEROCHAMBER PLUS FLO-VU LARGE DEVICE	2	
calcitonin (salmon) injection	3		AEROCHAMBER PLUS FLO-VU MEDIUM DEVICE	2	
calcitonin (salmon) nasal	1		AEROCHAMBER PLUS FLO-VU SMALL DEVICE	2	
FORTEO	5	PA; QL	AEROCHAMBER PLUS FLOW VU	2	
FOSAMAX	3		AEROCHAMBER W/FLOWSIGNAL	2	
FOSAMAX PLUS D	3		ALCOHOL PREP PADS PAD , 70 %	1	
ibandronate sodium oral	1		ALCOHOL PREP PADS SHEET 70 %	1	
MIACALCIN	3		AQINJECT PEN NEEDLE	1	
risedronate sodium oral tablet	1		ASSURE ID DUO PRO PEN NEEDLES	1	
risedronate sodium oral tablet delayed release	3		ASSURE ID PRO PEN NEEDLES	1	
teriparatide subcutaneous solution pen-injector 600 mcg/2.4ml	5	PA; QL	AUM ALCOHOL PREP PADS	1	
TERIPARATIDE SUBCUTANEOUS SOLUTION PEN-INJECTOR 620 MCG/2.48ML	5	PA; QL	AUM INSULIN SAFETY PEN NEEDLE 31G X 4 MM	1	
TYMLOS	5	PA	AUM MINI INSULIN PEN NEEDLE	1	
<b>Metabolic Bone Disease Agents - Other</b>			AUM PEN NEEDLE 32G X 5 MM , 33G X 4 MM , 33G X 5 MM , 33G X 6 MM	1	
calcitriol oral	1		AUM READYGARD DUO PEN NEEDLE	1	
cinacalcet hcl	1		AUM SAFETY PEN NEEDLE	1	
doxercalciferol oral	3		BD AUTOSHIELD DUO PEN NEEDLES	1	
paricalcitol oral	3				
RAYALDEE	3	PA			
ROCALTROL	3				
SENSIPAR	3				
ZEMPLAR ORAL	3				
<b>Miscellaneous Therapeutic Agents</b>					
AEROCHAMBER HOLDING CHAMBER	2				

Drug Name	Drug Tier	Notes	Drug Name	Drug Tier	Notes
BD ULTRA-FINE PEN NEEDLES	1		EMBRACE PEN NEEDLES 30G X 5 MM , 30G X 8 MM , 31G X 6 MM , 31G X 8 MM , 32G X 4 MM	1	
BREATHE COMFORT CHAMBER/ADULT	2		ENDARI	5	PA; QL
BREATHE COMFORT CHAMBER/CHILD	2		ergoloid mesylates oral	3	
BREATHE EASE LARGE	2		FEMCAP	2	
BREATHE EASE MEDIUM	2		FIRDAPSE	5	PA; QL
BREATHE EASE SMALL	2		FLEXICHAMBER	2	
BREATHERITE VALVED MDI CHAMBER	2		FLEXICHAMBER ADULT MASK/SMALL	2	
BYLVAY	5	PA; QL	FLEXICHAMBER CHILD MASK/LARGE	2	
BYLVAY (PELLETS)	5	PA; QL	FLEXICHAMBER CHILD MASK/SMALL	2	
CAYA	2		GLUCAGON HCL (DIAGNOSTIC)	2	
CLEVER CHOICE HOLDING CHAMBER	2		GRASTEK	3	PA
COMFORT EZ PRO PEN NEEDLES	1		INCONTROL ULTICARE PEN NEEDLES	1	
COMPACT SPACE CHAMBER	2		INSULIN PEN NEEDLES 29G X 12.7MM , 29G X 12MM , 29G X 5MM , 29G X 8MM , 30G X 5 MM , 30G X 8 MM , 31G X 4 MM , 31G X 5 MM , 31G X 6 MM , 31G X 8 MM , 32G X 4 MM , 32G X 5 MM , 32G X 6 MM , 32G X 8 MM , 33G X 4 MM , 33G X 5 MM , 33G X 6 MM	1	
COMPACT SPACE CHAMBER/LG MASK	2		IWILFIN	3	PA; QL
COMPACT SPACE CHAMBER/MED MASK	2		KERENDIA	3	PA; QL
COMPACT SPACE CHAMBER/SM MASK	2		l-glutamine oral packet	5	PA; QL
CYTOTINE ORAL POWDER	3		LIVMARLI	5	PA; QL
deferoxamine mesylate injection solution reconstituted 500 mg	1		methergine	1	
DESFERAL	3		methylergonovine maleate	1	
DOJOLVI	5	PA; QL	MICROCHAMBER DEVICE	2	
DROPSAFE ALCOHOL PREP	1		MIPLYFFA	3	
EASIVENT	2				
EDETAIE CALCIUM DISODIUM INJECTION	3				

Drug Name	Drug Tier	Notes	Drug Name	Drug Tier	Notes
NOVOFINE PEN NEEDLE	1		PANDA MASK SMALL	2	
NOVOFINE PLUS PEN NEEDLE	1		PARI VORTEX ADULT MASK	2	
NOZIN NASAL SANITIZER	1		PEDIATRIC PANDA MASK	2	
NOZIN NASAL SANITIZER POPSWAB	1		PHEXXI	3	
ODACTRA	3	PA	PIP PEN NEEDLES 32G X 4MM	1	
OMNIPOD 5 DEXG7G6 INTRO GEN 5	3	PA	pocket spacer	2	
OMNIPOD 5 DEXG7G6 PODS GEN 5	3	PA	PRO COMFORT SPACER ADULT	2	
OMNIPOD 5 LIBRE2 PLUS G6	3	PA	PRO COMFORT SPACER CHILD	2	
OMNIPOD 5 LIBRE2 PLUS G6 PODS	3	PA	PRO COMFORT SPACER INFANT	2	
OMNIPOD CLASSIC PODS (GEN 3)	3	PA	PROCARE SPACER/ADULT MASK	2	
OMNIPOD DASH INTRO (GEN 4)	3	PA	PROCARE SPACER/CHILD MASK	2	
OMNIPOD DASH PDM (GEN 4)	3	PA	PURE COMFORT SAFETY PEN NEEDLE	1	
OMNIPOD DASH PODS (GEN 4)	3	PA	PURE COMFORT SPACER CHAMBER	2	
OMNIPOD GO	3	PA	RAGWITEK	3	PA
OMNIPOD POD PALS	3	PA	RAYA SURE PEN NEEDLE	1	
OPTICHAMBER DIAMOND	2		SAFETY PEN NEEDLES	1	
OPTICHAMBER DIAMOND-LG MASK	2		SOHONOS	5	PA; QL
OPTICHAMBER DIAMOND-MD MASK	2		TAVNEOS	5	PA; QL
OPTICHAMBER DIAMOND-SM MASK	2		UNIFINE PROTECT PEN NEEDLE	1	
ORALAIR	3	PA	UREAPRO	3	
ORALAIR ADULT STARTER PACK	3	PA	VEOZAH	3	PA; QL
ORALAIR CHILDRENS STARTER PACK	3	PA	VERIFINE INSULIN PEN NEEDLE	1	
PALFORZIA	5	PA; QL	VERIFINE PLUS PEN NEEDLE	1	
PANDA MASK LARGE	2		V-GO 20	3	PA
PANDA MASK MEDIUM	2		V-GO 30	3	PA
			V-GO 40	3	PA
			VISTOGARD	5	PA; QL

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Drug Name	Drug Tier	Notes	Drug Name	Drug Tier	Notes
VORTEX VALVED HOLDING CHAMBER	2		bromfenac sodium ophthalmic	3	
WIDE-SEAL DIAPHRAGM 60	2		BROMSITE	3	
WIDE-SEAL DIAPHRAGM 65	2		CILOXAN	2	
WIDE-SEAL DIAPHRAGM 70	2		ciprofloxacin hcl ophthalmic	1	
WIDE-SEAL DIAPHRAGM 75	2		cromolyn sodium ophthalmic	1	
WIDE-SEAL DIAPHRAGM 80	2		dexamethasone sodium phosphate ophthalmic	1	
WIDE-SEAL DIAPHRAGM 85	2		diclofenac sodium ophthalmic	1	
WIDE-SEAL DIAPHRAGM 90	2		difluprednate	1	
WIDE-SEAL DIAPHRAGM 95	2		DUREZOL	3	
XPHOZAH	5	PA; QL	epinastine hcl	3	
YORVIPATH	5	PA; QL	erythromycin ophthalmic	1	
ZILBRYSQ	5	PA; QL	EYSUVIS	3	PA
ZOKINVY	5	PA; QL	FLAREX	3	
<b>Ophthalmic Agents - Drugs for Eye Allergy, Infection and Inflammation</b>			fluorometholone	1	
ACULAR	2		flurbiprofen sodium	1	
ACULAR LS	3		FML FORTE	2	
ACUVAIL	3		FML LIQUIFILM	3	
ALOCRIL	3		gatifloxacin ophthalmic	1	
ALOMIDE	2		gentamicin sulfate ophthalmic	1	
ALREX	3		ILEVRO	3	
AZASITE	3		INVELTYS	3	
azelastine hcl ophthalmic	1		ketorolac tromethamine ophthalmic	1	
bacitracin ophthalmic	1		KLARITY-A	3	
bepotastine besilate	3		KLARITY-L	3	
BEPREVE	3		levofloxacin ophthalmic	3	
BESIVANCE	3		LOTEMAX	3	
BETADINE OPHTHALMIC PREP	3		LOTEMAX SM	3	
bromfenac sodium (once-daily)	3		Ioteprednol etabonate	3	
			MAXIDEX	3	
			MAXITROL OPHTHALMIC OINTMENT	3	

Drug Name	Drug Tier	Notes	Drug Name	Drug Tier	Notes
MAXITROL OPHTHALMIC SUSPENSION 0.1 %	3		PREDNISOLON- MOXIFLOX- KETOROLAC	3	
moxifloxacin hcl (2x day)	1		PREDNISOLON- MOXIFLOX-NEPAFENAC	3	
moxifloxacin hcl ophthalmic	1		PROLENSA	3	
NATACYN	2		sulfacetamide sodium ophthalmic	1	
neomycin-polymyxin- dexameth ophthalmic ointment	1		TOBRADEX	2	
neomycin-polymyxin- dexameth ophthalmic suspension 3.5-10000-0.1	1		TOBRADEX ST	3	
neomycin-polymyxin-hc ophthalmic	3		tobramycin ophthalmic	1	
neomycin-polymyxin-hc ophthalmic	3		tobramycin- dexamethasone	1	
NEVANAC	3		TOBREX	2	
OCUFLOX	3		trifluridine	1	
ofloxacin ophthalmic	1		UPNEEQ	3	PA
olopatadine hcl ophthalmic solution 0.2 %	3		VIGAMOX	2	
POVIDONE-IODINE OPHTHALMIC	3		XDEMVY	5	PA; QL
PRED FORTE	3		ZERVIASTE	3	
PRED MILD	2		ZIRGAN	3	
PREDNISOL ACE- MOXIFLOX-BROMFEN	3		<b>Ophthalmic Agents - Drugs for Glaucoma</b>		
prednisolone acetate ophthalmic	1		acetazolamide er	1	
prednisolone acetate p-f	1		acetazolamide oral	1	
PREDNISOLONE ACETATE-NEPAFENAC	3		ALPHAGAN P	3	
PREDNISOLONE ACET- MOXIFLOXACIN	3		apraclonidine hcl	3	
prednisolone sodium phosphate ophthalmic	3		AZOPT	3	
PREDNISOLON- GATIFLOX- BROMFENAC	3		betaxolol hcl ophthalmic	1	
PREDNISOLON- MOXIFLOX- BROMFENAC	3		BETIMOL	3	
			BETOPTIC-S	2	
			bimatoprost ophthalmic	1	
			brimonidine tartrate ophthalmic solution 0.1 %, 0.15 %	3	
			brimonidine tartrate ophthalmic solution 0.2 %	1	
			brimonidine tartrate- timolol	3	

Drug Name	Drug Tier	Notes	Drug Name	Drug Tier	Notes
BRIMONIDINE-DORZOLAMIDE OPHTHALMIC SOLUTION 0.15-2 %	3		timolol maleate ophthalmic	1	
brinzolamide	1		timolol maleate pf	3	
carteolol hcl	1		TIMOLOL-BRIMON-DORZOL-LATANOPR	3	
COMBIGAN	3		TIMOLOL-BRIMONIDINE-DORZOLAMID	3	
COSOPT	3		OPHTHALMIC SOLUTION 0.5-0.15-2 %		
COSOPT PF	3		SOLUTION 0.5-0.15-2 %		
dichlorphenamide	5	PA; QL	TIMOLOL-DORZOLAMID-LATANOPROST	3	
DORZOLAMIDE HCL SOLUTION 2 % OPHTHALMIC	3		TIMOPTIC OCUDOSE	3	
dorzolamide hcl solution 2 % ophthalmic	1		TRAVATAN Z	3	
dorzolamide hcl-timolol mal	1		travoprost (bak free)	1	
dorzolamide hcl-timolol mal pf	3		VUITY	3	PA
IOPIDINE	3		VYZULTA	3	PA
ISTALOL	3		XALATAN	3	
IFYUZEH	3		XELPROS	3	
KEVEYIS	5	PA; QL	ZIOPTAN	3	
latanoprost ophthalmic	1		<b>Ophthalmic Agents - Drugs for Miscellaneous Eye Conditions</b>		
LATANOPROST-TIMOLOL MALEATE	3		ACUICYN	3	
levobunolol hcl	1		AKTEN	3	
LUMIGAN	2		ALCAINE	3	
methazolamide oral	1		altacaine	3	
ORMALVI	5	PA; QL	altafrin	1	
PHOSPHOLINE IODIDE	3		atropine sulfate ophthalmic ointment	1	
pilocarpine hcl ophthalmic	1		ATROPINE SULFATE OPHTHALMIC SOLUTION 0.01 %	1	
RHOPRESSA	3	PA	atropine sulfate ophthalmic solution 1 %	1	
ROCKLATAN	3	PA	AVENOVA	3	
SIMBRINZA	3		bacitracin-polymyxin b	1	
tafluprost (pf)	3		bacitracin-neomycin-polymyxin-hc	1	
timolol maleate (once-daily)	3				
timolol maleate ocudose	3				

Drug Name	Drug Tier	Notes	Drug Name	Drug Tier	Notes	
BEVACIZUMAB INTRAVITREAL SOLUTION PREFILLED SYRINGE 2.75 MG/0.11ML	3		RESTASIS MULTIDOSE sulfacetamide- prednisolone	3 1	PA	
CEQUA	2	PA	tetracaine hcl ophthalmic	3		
CYCLOGYL OPHTHALMIC SOLUTION 0.5 %	2		TROPICAMIDE- CYCLOPENTOLATE-PE	3		
CYCLOGYL OPHTHALMIC SOLUTION 1 %, 2 %	3		TROPICAMIDE- PHENYLEPHRINE	3		
CYCLOMYDRIL	3		TROPIC-PROPARACA- PE-KETOROLAC	3		
cyclopentolate hcl ophthalmic	1		TYRVAYA	3	PA	
cyclosporine ophthalmic	1	PA	VERKAZIA	5	PA; QL	
CYSTADROPS	5	PA; QL	VEVYE	5	PA; QL	
CYSTARAN	5	PA; QL	XIIDRA	2	PA	
GELFILM OPHTHALMIC	3		ZYLET	3		
homatropaire	1		<b>Otic Agents - Drugs for Ear Conditions</b>			
KLARITY-C DROPS	5	PA; QL	acetic acid otic	1		
MIEBO	5	PA; QL	CETRAXAL	3		
neomycin-bacitracin zn- polymyx	3		CIPRO HC	2		
neomycin-polymyxin- gramicidin	1		ciprofloxacin hcl otic	3		
neo-polycin	3		ciprofloxacin- dexamethasone	1		
neo-polycin hc	1		CIPROFLOXACIN- FLUOCINOLONE PF	3		
OXERVATE	5	PA; QL	CORTISPORIN-TC	3		
phenylephrine hcl ophthalmic	1		DERMOTIC	3		
polycin	1		flac	1		
polymyxin b-trimethoprim	1		fluocinolone acetonide otic	1		
PREDNISOLONE- BROMFENAC	3		hydrocortisone-acetic acid	3		
PREDNISOLONE- GATIFLOXACIN	3		neomycin-polymyxin-hc otic	1		
PREDNISOLONE- MOXIFLOXACIN	3		ofloxacin otic	1		
proparacaine hcl ophthalmic	3		OTOVEL	3		
RESTASIS	3	PA	PRAMOTIC	3		
<b>Respiratory Tract / Pulmonary Agents - Drugs for Allergies, Cough, Cold</b>						
			ADRENALIN NASAL	3		
			azelastine hcl nasal	1		
			azelastine-fluticasone	3		

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Drug Name	Drug Tier	Notes	Drug Name	Drug Tier	Notes
benzonatate oral capsule 100 mg, 200 mg	1		mometasone furoate nasal	3	PA
benzonatate oral capsule 150 mg	3		nebusal inhalation nebulization solution 3 %	1	
BROMPHENIRAMINE MALEATE INTRAMUSCULAR	3		NEBUSAL INHALATION NEBULIZATION SOLUTION 6 %	3	
carbinoxamine maleate	1		olopatadine hcl nasal	1	
CARBINOXAMINE MALEATE ER	3		OMNARIS	3	PA
cetirizine hcl oral solution	3		potassium iodide oral	2	
CLARINEX	3		promethazine vc	1	
CLARINEX-D 12 HOUR	3		promethazine-codeine oral solution	3	PA
clemastine fumarate oral	1		promethazine-dm	1	
CUROSURF	3		promethazine-phenylephrine	1	
cyproheptadine hcl oral	1		pseudoephedrine-bromphen-dm	3	
desloratadine	1		pulmosal	1	
diphenhydramine hcl injection	1		QNASL	3	PA
diphenhydramine hcl oral elixir	3		QNASL CHILDRENS	3	PA
DYMISTA	3		RYALTRIS	3	PA
epinephrine hcl (nasal)	3		RYCLORA	3	
flunisolide nasal	1		ryvent	1	
guaifenesin-codeine	2	QL	sodium chloride inhalation nebulization solution 0.9 %, 3 %, 7 %	1	
HYCODAN	3		sodium chloride inhalation nebulization solution 10 %	3	
hydrocod poli-chlorphe poli er	3		SSKI	2	
hydrocodone bit-homatrop mbr	1		SURVANTA	2	
hydromet	1		TUXARIN ER	3	QL
HYPERSAL	3		XHANCE	3	PA
INFASURF	3		<b>Respiratory Tract / Pulmonary Agents - Drugs for Asthma and Other Lung Conditions</b>		
ipratropium bromide nasal	1		ACCOLATE	3	
KARBINAL ER	3		acetylcysteine inhalation	1	
levocetirizine dihydrochloride oral	1		ADVAIR DISKUS	3	
maxi-tuss ac	2	QL	ADVAIR HFA	2	
MICLARA LQ	3				

Drug Name	Drug Tier	Notes	Drug Name	Drug Tier	Notes
AIRDUO RESPICLICK 113/14	3	PA	AUVI-Q	3	
AIRDUO RESPICLICK 232/14	3	PA	BEVESPI AEROSPHERE	3	PA
AIRDUO RESPICLICK 55/14	3	PA	BREO ELLIPTA	3	PA
AIRSUPRA	3	PA	breyna	1	PA; QL
albuterol sulfate hfa aerosol solution 108 (90 base) mcg/act inhalation	1	QL	BREZTRI AEROSPHERE	3	PA
albuterol sulfate hfa aerosol solution 108 (90 base) mcg/act inhalation	3	QL	BROVANA	3	PA
ALBUTEROL SULFATE HFA AEROSOL SOLUTION 108 (90 BASE) MCG/ACT INHALATION	1	QL	budesonide inhalation	1	
albuterol sulfate inhalation nebulization solution (2.5 mg/3ml) 0.083%, 0.63 mg/3ml, 1.25 mg/3ml, 2.5 mg/0.5ml	1		budesonide-formoterol fumarate	1	PA; QL
albuterol sulfate nebulization solution (5 mg/ml) 0.5% inhalation	1		COMBIVENT RESPIMAT	2	
ALBUTEROL SULFATE NEBULIZATION SOLUTION (5 MG/ML) 0.5% INHALATION	3		cromolyn sodium inhalation	1	
albuterol sulfate oral	1		DALIRESP	3	
ALVESCO	2		DUAKLIR PRESSAIR	3	PA
ANORO ELLIPTA	3	PA	DULERA	3	PA; QL
arformoterol tartrate	3	PA	elixophyllin	1	
ARNUTITY ELLIPTA	3	PA	epinephrine injection solution auto-injector	1	
ASMANEX (120 METERED DOSES)	2	PA	EPINEPHRINE PROFESSIONAL	3	
ASMANEX (14 METERED DOSES)	2	PA	EPINEPHRINESNAP	3	
ASMANEX (30 METERED DOSES)	2	PA	EPINEPHRINESNAP-EMS	3	
ASMANEX (60 METERED DOSES)	2	PA	EPINEPHRINESNAP-V	3	
ASMANEX HFA	2	PA	EPIPEN 2-PAK	3	
ATROVENT HFA	2		EPIPEN JR 2-PAK	3	

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Drug Name	Drug Tier	Notes	Drug Name	Drug Tier	Notes
FLUTICASONE PROPIONATE HFA INHALATION AEROSOL 44 MCG/ACT	2		PROAIR RESPICLICK	3	QL
FLUTICASONE-SALMETEROL INHALATION AEROSOL	2		PROVENTIL HFA INHALATION AEROSOL SOLUTION 108 (90 BASE) MCG/ACT	3	QL
fluticasone-salmeterol inhalation aerosol powder breath activated 100-50 mcg/act, 250-50 mcg/act, 500-50 mcg/act	1		PULMICORT FLEXHALER	3	PA
FLUTICASONE-SALMETEROL INHALATION AEROSOL POWDER BREATH ACTIVATED 113-14 MCG/ACT, 232-14 MCG/ACT, 55-14 MCG/ACT	3	PA	PULMICORT SUSPENSION	3	
formoterol fumarate inhalation	3		QVAR REDIHALER	3	PA
INCRUSE ELLIPTA	3	PA	roflumilast	3	
ipratropium bromide inhalation	1		SEREVENT DISKUS	2	PA
ipratropium-albuterol	1		SINGULAIR	3	
isoproterenol hcl injection	3		SPIRIVA HANDIHALER	1	
levalbuterol hcl inhalation	3		SPIRIVA RESPIMAT INHALATION AEROSOL SOLUTION 1.25 MCG/ACT	2	PA
LEVALBUTEROL HFA INHALATION AEROSOL 45 MCG/ACT	3	QL	SPIRIVA RESPIMAT INHALATION AEROSOL SOLUTION 2.5 MCG/ACT	2	
montelukast sodium oral	1		STIOLTO RESPIMAT	2	
NEFFY	3	PA	STRIVERDI RESPIMAT	2	PA
NUCALA SUBCUTANEOUS SOLUTION AUTO-INJECTOR	5	PA; QL	SYMBICORT	3	PA; QL
NUCALA SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	5	PA; QL	terbutaline sulfate injection	3	
OFEV	4	PA; QL	terbutaline sulfate oral	1	
OHTUVAYRE	5	PA; QL	TEZSPIRE SUBCUTANEOUS SOLUTION AUTO-INJECTOR	5	PA; QL
PERFOROMIST	3		THEO-24	3	
pirfenidone	4	PA; QL	theophylline er	1	
			theophylline oral	1	
			tiotropium bromide monohydrate	1	
			TRELEGY ELLIPTA	3	PA
			TUDORZA PRESSAIR	3	
			VENTOLIN HFA	3	QL
			wixela inhub	1	

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Drug Name	Drug Tier	Notes	Drug Name	Drug Tier	Notes
XOLAIR SUBCUTANEOUS SOLUTION AUTO- INJECTOR	5	PA; QL	alyq	1	
			ambrisentan	1	PA; QL
			bosentan	1	PA; QL
XOLAIR SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	5	PA; QL	LETAIRIS	5	PA; QL
			OPSUMIT	4	PA; QL
			OPSYNVI	5	PA; QL
XOPENEX HFA	3		ORENITRAM	5	PA; QL
YUPELRI	3	PA	ORENITRAM MONTH 1	5	PA; QL
zafirlukast	3		ORENITRAM MONTH 2	5	PA; QL
zileuton er	5	PA; QL	ORENITRAM MONTH 3	5	PA; QL
ZYFLO	5	PA; QL	REVATIO ORAL	5	PA
<b>Respiratory Tract / Pulmonary Agents - Drugs for Cystic Fibrosis</b>			sildenafil citrate oral suspension reconstituted	4	PA; QL
BETHKIS	5	PA; QL	sildenafil citrate oral tablet 20 mg	4	PA
BRONCHITOL	5	PA; QL	tadalafil (pah)	1	
BRONCHITOL TOLERANCE TEST	5	PA; QL	TADLIQ	5	PA; QL
CAYSTON	5	PA; QL	TRACLEER 62.5 MG, 125 MG	3	PA; QL
KALYDECO	5	PA; QL	TRACLEER 32 MG	5	PA; QL
KITABIS PAK	5	PA; QL	TYVASO	2	PA; QL
ORKAMBI	5	PA; QL	TYVASO DPI INSTITUTIONAL KIT	5	PA; QL
PULMOZYME	2		TYVASO DPI MAINTENANCE KIT	5	PA; QL
SYMDEKO	5	PA; QL	TYVASO DPI TITRATION KIT	5	PA; QL
TOBI NEBULIZER	5	PA; QL	TYVASO REFILL KIT	2	PA; QL
TOBI PODHALER	5	PA; QL	TYVASO STARTER KIT	2	PA; QL
tobramycin inhalation nebulization solution 300 mg/4ml	5	PA; QL	UPTRAVI ORAL	4	PA; QL
tobramycin nebulization solution 300 mg/5ml inhalation	4	PA; QL	UPTRAVI TITRATION	4	PA; QL
TOBRAMYCIN NEBULIZATION SOLUTION 300 MG/5ML INHALATION	5	PA; QL	VENTAVIS	4	PA; QL
			WINREVAIR	5	PA; QL
<b>Respiratory Tract / Pulmonary Agents - Drugs for Pulmonary Hypertension</b>			<b>Skeletal Muscle Relaxants - Drugs for Muscle Pain and Spasm</b>		
TRIKAFTA	5	PA; QL	AMRIX	3	PA; QL
			BACLOFEN ORAL SOLUTION	3	
ADCIRCA	5	PA; QL	baclofen oral suspension	3	PA
ADEMPAS	5	PA; QL	baclofen oral tablet 10 mg, 20 mg, 5 mg	1	

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Drug Name	Drug Tier	Notes	Drug Name	Drug Tier	Notes
baclofen oral tablet 15 mg	3		Sleep Disorder Agents		
carisoprodol oral	3	PA; QL	AMBIEN	3	QL
chlorzoxazone oral tablet 250 mg	1		AMBIEN CR	3	QL
chlorzoxazone oral tablet 375 mg, 500 mg, 750 mg	1	QL	armodafinil	1	
cyclobenzaprine hcl er	3	PA; QL	BELSOMRA	3	PA
cyclobenzaprine hcl oral tablet 10 mg, 5 mg	1	QL	DAYVIGO	3	PA; QL
cyclobenzaprine hcl oral tablet 7.5 mg	3	QL	doxepin hcl oral tablet	3	
DANTRIUM ORAL	3		EDLUAR	3	QL
dantrolene sodium oral	1		eszopiclone	1	QL
FEXMID	3	QL	flurazepam hcl	1	QL
FLEQSVUY	3	PA	HETLIOZ	5	PA; QL
LORZONE ORAL TABLET 375 MG, 750 MG	3	QL	HETLIOZ LQ	5	PA; QL
LYVISPAH	5	QL	LUMRYZ	5	PA; QL
metaxalone	3	QL	LUNESTA	3	QL
methocarbamol injection	1		modafinil oral	1	
methocarbamol oral tablet 1000 mg	5	PA; QL	NUVIGIL	3	
methocarbamol oral tablet 500 mg, 750 mg	1	QL	PROVIGIL	3	
NORGESIC	3		QUVIVIQ	3	PA; QL
NORGESIC FORTE	3	QL	ramelteon	3	
orphenadrine citrate er	1	QL	RESTORIL	3	QL
orphenadrine citrate injection	3		ROZEREM	3	
orphenadrine-aspirin-caffeine	3		SILENOR	3	
ORPHENGESIC FORTE	3	QL	SODIUM OXYBATE	5	PA; QL
OZOBAX DS	3		SUNOSI	5	PA; QL
ROBAXIN	3		tasimelteon	5	PA; QL
SOMA	3	PA; QL	temazepam oral capsule 15 mg, 30 mg, 7.5 mg	1	QL
TANLOR	5	PA; QL	temazepam oral capsule 22.5 mg	3	QL
tizanidine hcl oral capsule	3		WAKIX	5	PA; QL
tizanidine hcl oral tablet	1		XYREM	5	PA; QL
ZANAFLEX	3		XYWAV	5	PA; QL
			zaleplon	1	QL
			zolpidem tartrate er	3	QL
			ZOLPIDEM TARTRATE ORAL CAPSULE	3	PA; QL
			zolpidem tartrate oral tablet	1	QL

Drug Name	Drug Tier	Notes	Drug Name	Drug Tier	Notes
zolpidem tartrate sublingual	3	QL	QSYMIA	3	PA
<b>Weight Management</b>			SAXENDA	3	PA
CONTRAVE	3	PA	WEGOVY	3	PA
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		ZYMFENTRA (1 PEN)....	66
		ZYMFENTRA (2 PEN)....	66
		ZYMFENTRA (2 SYRINGE)	
		.....	66
		ZYNRELEF .....	12
		ZYPITAMAG .....	38
		ZYPREXA .....	30
		ZYPREXA RELPREVV....	30
		ZYPREXA ZYDIS.....	30
		ZYTIGA .....	27
		ZYVOX.....	18

# Notice of Nondiscrimination

Kaiser Foundation Health Plan of Washington and Kaiser Foundation Health Plan of Washington Options, Inc. (“Kaiser Permanente”) comply with applicable Federal and Washington state civil rights laws and do not discriminate, exclude people, or treat them differently on the basis of race, color, national origin, age, disability, sex, sexual orientation, gender identity, or any other basis protected by applicable federal, state, or local law. We also:

- Provide free aids and services to people with disabilities to communicate effectively with us, such as:
  - Qualified sign language interpreters
  - Written information in other formats (large print, audio, accessible electronic formats, and other formats)
  - Assistive devices (magnifiers, Pocket Talkers, and other aids)
- Provide free language services to people whose primary language is not English, such as:
  - Qualified interpreters
  - Information written in other languages

If you need these services, contact Member Services at **1-888-901-4636 (TTY 711)**.

If you believe that Kaiser Permanente has failed to provide these services or discriminated in another way on the basis of race, color, national origin, age, disability, sex, sexual orientation, or gender identity, you can file a grievance with our Civil Rights Coordinator by writing to P.O. Box 35191, Mail Stop: RCR-A3S-03, Seattle, WA 98124-5191 or calling Member Services at the number listed above. You can file a grievance by mail, phone, or online at **kp.org/wa/feedback**. If you need help filing a grievance, our Civil Rights Coordinator is available to help you.

You can also file a civil rights complaint with:

- The U.S. Department of Health and Human Services, Office for Civil Rights electronically through the Office for Civil Rights Complaint Portal, available at **https://ocrportal.hhs.gov/ocr/portal/lobby.jsf**, or by mail or phone at: U.S. Department of Health and Human Services, 200 Independence Avenue SW., Room 509F, HHH Building, Washington, DC 20201, **1-800-368-1019, 800-537-7697 (TDD)**  
Complaint forms are available at **http://www.hhs.gov/ocr/office/file/index.html**
- The Washington State Office of the Insurance Commissioner, electronically through the Office of the Insurance Commissioner Complaint portal available at **https://www.insurance.wa.gov/file-complaint-or-check-your-complaint-status**, or by phone at **800-562-6900, 360-586-0241 (TDD)**. Complaint forms are available at **https://fortress.wa.gov/oic/onlineservices/cc/pub/complaintinformation.aspx**

# Multi-language Interpreter Services

**English: ATTENTION:** If you speak a language other than English, language assistance services, free of charge, are available to you. Call **1-888-901-4636 (TTY 711)**.

**Español (Spanish): ATENCIÓN:** Si habla español, tiene disponibles servicios de ayuda con el idioma sin cargo. Llame al **1-888-901-4636 (TTY 711)**.

**中文 (Chinese) :** 注意：如果您說中文，您可以免費獲得語言援助服務。請致電 **1-888-901-4636 (TTY 711)**。

**Tiếng Việt (Vietnamese): CHÚ Ý:** Nếu quý vị nói tiếng Việt, quý vị có thể sử dụng dịch vụ hỗ trợ ngôn ngữ miễn phí của chúng tôi. Xin gọi số **1-888-901-4636 (TTY 711)**.

**한국어 (Korean):** 참고: 한국어를 사용하시는 경우, 언어 지원 서비스를 무료로 제공해 드립니다. **1-888-901-4636 (TTY 711)** 번으로 문의하십시오.

**Русский (Russian): ВНИМАНИЕ!** Если вы говорите по-русски, вам доступны бесплатные услуги переводчика. Звоните по номеру **1-888-901-4636 (TTY 711)**.

**Tagalog: PAUNAWA:** Kung nagsasalita ka ng Tagalog, maaari kang gumamit ng mga serbisyo ng tulong sa wika nang walang bayad. Tumawag sa **1-888-901-4636 (TTY 711)**.

**Українська (Ukrainian): УВАГА!** Якщо ви розмовляєте українською мовою, вам доступні безкоштовні послуги перекладу. Телефонуйте за номером **1-888-901-4636 (TTY 711)**.

**ភាសាខ្មែរ (Khmer):** សូមយកចិត្តទុកដាក់៖ ប្រសិនបើអ្នកនឹងយាយភាសាខ្មែរ សេវាកម្មផ្លូវយ៉ាងដំឡើងភាសាដោយមិនគឺតិចឡើងទេ មានសម្រាប់អ្នក។ ទូរស័ព្ទខ្លួនលើលេខ **1-888-901-4636 (TTY 711)**។

**日本語 (Japanese): 注意事項：**無料の日本語での言語サポートをご利用いただけます。  
**1-888-901-4636 (TTY 711)**まで、お電話にてご連絡ください。

**አማርኛ (Amharic):** መግለጫ፣ የሚገኘውን ቅጽ አማርኛ ክሮን የተርጋም እንደ አገልግሎቶች፣ በነፃ ለእርስዎ ይቀበሉ፡፡  
ወደ **1-888-901-4636 (TTY 711)** ይደረግሉ፡፡

**Oromiffa (Oromo): XIYYEFFANNAA:** Afaan dubbattu Oroomiffa yoo ta'e, tajaajila gargaarsa afaanii, kanfaltiidhaan ala, ni argama. **1-888-901-4636 (TTY 711)** irraatti bilbilaa.

**ਪੰਜਾਬੀ (Punjabi): ਧਿਆਨ ਦਿਓ:** ਜੇ ਤੁਸੀਂ ਪੰਜਾਬੀ ਬੋਲਦੇ ਹੋ, ਤਾਂ ਭਾਸ਼ਾ ਸਹਾਇਤਾ ਸੇਵਾਵਾਂ ਤੁਹਾਡੇ ਲਈ ਮੁਫ਼ਤ ਉਪਲਬਧ ਹਨ।  
**1-888-901-4636 (TTY 711)** ਤੇ ਕਾਲ ਕਰੋ।

**العربية (Arabic):** انتبه: إذا كنت تتحدث اللغة العربية، فإن خدمات المساعدة اللغوية، متوفرة لك، مجاناً.  
اتصل بالرقم **1-888-901-4636 (TTY 711)**

**Deutsch (German): ACHTUNG:** Wenn Sie Deutsch sprechen, stehen Ihnen kostenlos sprachliche Hilfsdienstleistungen zur Verfügung. Rufnummer: **1-888-901-4636 (TTY 711)**.

**ລາວ (Lao): ໄປດ້ວຍ:** ຖ້າວ່າທ່ານເວັ້ນພາວັກວາ,  
ແມ່ນຈະມີການບໍລິການຂ່ວຍເຫຼືອດ້ານພາກໄດ້ລຶ່ມແລ້ວໃຫ້ຕ່າງໆທ່ານ. ໃຫ້ **1-888-901-4636 (TTY 711)**.