

Effective March 2026

2026 Drug Formulary

For large employer groups with a 4-tier in-network pharmacy benefit

Access PPO

SEBB

Core

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, drugs for weight loss, and drugs used for cosmetic purposes. Please consult your Benefit Booklet for limitations and exclusions, and plan specific benefit coverage.

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. 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, step therapy and nonformulary 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.

Step Therapy (ST)

Step therapy requires you to try certain preferred drugs before receiving coverage for the drug you were prescribed. Step therapy is added by the P&T Committee. Step therapy automatically looks at your prescription history when you fill the drug you were prescribed. If you have tried the preferred drugs required by step therapy, the drug you were prescribed will automatically be covered. To request step therapy exceptions, you or your prescriber must contact Kaiser Permanente. Drugs requiring step therapy are indicated with a “ST” 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 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.

Copay and Coinsurance Caps

State mandated copay and coinsurance caps for eligible plans apply to the following products: insulin, ciclesonide inhaled corticosteroid, fluticasone/salmeterol inhaled corticosteroid combination (generic Advair Diskus), and epinephrine autoinjector 0.3 mg and 0.15 mg (generic and Auvi-Q). Please call Member Service if you have questions about your coverage for these drugs.

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. ACA preventive coverage in full may not apply if your plan is grandfathered or able to opt out. 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 ACA preventative medications that may be covered in full for applicable scenarios is available on the www.kp.org/wa/formulary webpage and is indicated with “++” next to the drug name in this document. ACA statin coverage in full is an age specific benefit only for members 40-75 years old. ACA HIV pre-exposure prophylaxis coverage is an indication specific benefit specific only for PrEP.

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).

Medical Benefit Injectable Drugs

Some drugs are given in a non-hospital setting such as home infusion, a medical office, a physician's office, or an infusion suite. These drugs are covered under the medical benefit but may require prior authorization or a non-hospital setting. The list of medical benefit injectable drugs is available on the www.kp.org/wa/formulary webpage.

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.

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			diclofenac potassium oral capsule	3	PA
ARTHROTEC	3		diclofenac potassium oral tablet 50 mg	1	
aspirin 81		++	diclofenac sodium er	1	
aspirin adult low dose		++	diclofenac sodium external solution 1.5 %	1	
aspirin adult low strength		++	diclofenac sodium external solution 2 %	3	PA
aspirin childrens		++	diclofenac sodium oral	1	
aspirin ec adult low dose		++	diclofenac-misoprostol	3	
aspirin ec adult low strength oral tablet delayed release 81 mg		++	diflunisal oral	1	
aspirin ec low dose		++	DOLOBID ORAL TABLET 250 MG	3	PA
aspirin ec low strength		++	ECOTRIN		++
aspirin ec oral tablet delayed release 325 mg		++	ECOTRIN ARTHRTIS PAIN		++
aspirin low dose		++	ECOTRIN LOW STRENGTH		++
aspirin oral		++	eq adult aspirin low strength oral tablet delayed release 81 mg		++
aspirin regimen		++	eq aspirin		++
BAYER ADVANCED ASPIRIN REG ST		++	eq aspirin adult low dose		++
BAYER ASPIRIN		++	eq aspirin low dose		++
BAYER ASPIRIN EC LOW DOSE		++	eq aspirin low dose oral tablet 81 mg		++
BAYER LOW DOSE		++	eql aspirin ec		++
CELEBREX	3		eql aspirin low dose		++
celecoxib oral	1		eql childrens aspirin oral tablet chewable 81 mg		++
childrens aspirin		++	etodolac	1	
COMBOGESIC ORAL	3		etodolac er	3	
cvs aspirin		++	fenoprofen calcium oral	3	
cvs aspirin adult low dose		++	FENOPRON	3	
cvs aspirin adult low strength		++	FLECTOR	3	
cvs aspirin ec		++	flurbiprofen oral	1	
cvs aspirin low dose		++	ft aspirin		++
cvs aspirin low strength		++	ft aspirin low dose		++
cvs genuine aspirin		++	ft enteric coated aspirin		++
DICLOFENAC PATCH 1.3%	3				

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Drug Name	Drug Tier	Notes	Drug Name	Drug Tier	Notes
genuine aspirin		++	ketorolac tromethamine solution 30 mg/ml injection	1	
gnp adult aspirin low strength		++	KETOROLAC TROMETHAMINE SOLUTION 30 MG/ML INJECTION	3	
gnp aspirin		++	kls aspirin low dose		++
gnp aspirin low dose		++	kp aspirin		++
goodsense aspirin		++	LICART	3	
goodsense aspirin adult low st oral tablet chewable 81 mg		++	LODINE	3	
goodsense aspirin low dose		++	LURBIRO	3	
h-e-b aspirin		++	meclofenamate sodium oral	1	
ibuprofen oral suspension 100 mg/5ml, 200 mg/10ml	3		medi-first aspirin		++
ibuprofen oral tablet 300 mg	3	PA	medique aspirin		++
ibuprofen oral tablet 400 mg, 600 mg, 800 mg	1		mefenamic acid oral	3	
INDOCIN	3		meijer aspirin ec		++
indomethacin er	1		meloxicam oral capsule	3	
indomethacin oral capsule	1		MELOXICAM ORAL SUSPENSION	3	
indomethacin oral suspension	3		meloxicam oral tablet	1	
indomethacin rectal suppository 50 mg	3		mm aspirin		++
ketoprofen er	3		nabumetone oral	1	
ketoprofen oral	3		NAPRELAN ORAL TABLET EXTENDED RELEASE 24 HOUR 375 MG, 500 MG	3	
ketorolac tromethamine +rfid	1		NAPRELAN ORAL TABLET EXTENDED RELEASE 24 HOUR 750 MG	3	PA
ketorolac tromethamine injection solution 15 mg/ml	1		naproxen dr	3	
KETOROLAC TROMETHAMINE INTRAMUSCULAR SOLUTION 30 MG/ML	3		naproxen oral suspension	1	
ketorolac tromethamine intramuscular solution 60 mg/2ml	1		naproxen oral tablet	1	
ketorolac tromethamine oral	3		naproxen oral tablet delayed release	3	
			naproxen sodium er	3	
			naproxen sodium oral tablet 275 mg, 550 mg	1	
			ORUDIS	3	

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Drug Name	Drug Tier	Notes	Drug Name	Drug Tier	Notes
oxaprozin oral tablet	3		butalbital-apap-caffeine oral tablet	1	
piroxicam oral	1		butalbital-asa-caff-codeine	3	QL
qc aspirin		++	butalbital-aspirin-caffeine	1	
qc aspirin low dose		++	butorphanol tartrate nasal	3	QL
qc childrens aspirin		++	BUTRANS	3	PA; QL
qc enteric aspirin		++	codeine sulfate	1	QL
RELAFEN DS	3	PA	CONZIP	3	PA; QL
salsalate oral	1		DILAUDID ORAL	3	QL
sb aspirin		++	diskets	1	QL
sb aspirin ec		++	endocet	1	QL
sb childrens aspirin		++	fentanyl transdermal patch 72 hour 100 mcg/hr, 12 mcg/hr, 25 mcg/hr, 50 mcg/hr, 75 mcg/hr	1	PA; QL
sb low dose asa ec		++	fentanyl transdermal patch 72 hour 37.5 mcg/hr, 62.5 mcg/hr, 87.5 mcg/hr	3	PA; QL
sm aspirin ec		++	FIORICET	3	
SPRIX	3		hydrocodone bitartrate er	3	PA; QL
ST JOSEPH ASPIRIN		++	hydrocodone-acetaminophen oral solution 10-300 mg/15ml, 10-325 mg/15ml	3	QL
ST JOSEPH LOW DOSE		++	hydrocodone-acetaminophen oral solution 2.5-108 mg/5ml, 5-217 mg/10ml, 7.5-325 mg/15ml	1	QL
sulindac oral	1		hydrocodone-acetaminophen oral tablet 10-300 mg, 2.5-325 mg, 5-300 mg, 7.5-300 mg	3	QL
TOLECTIN 600	3		hydrocodone-acetaminophen oral tablet 10-325 mg, 5-325 mg, 7.5-325 mg	1	QL
tolmetin sodium oral capsule	1		hydrocodone-ibuprofen	3	QL
tolmetin sodium oral tablet	3		hydromorphone hcl er	3	PA; QL
ZIPSOR	3	PA	hydromorphone hcl oral	1	QL
ZYBIC	3		hydromorphone hcl rectal	1	QL
ZYNRELEF	3				
Analgesics - Drugs for Pain					
acetaminophen-codeine	1	QL			
ALLZITAL	3				
apap-caff-dihydrocodeine	3	QL			
ascomp-codeine	3	QL			
bac (butalbital-acetamin-caff)	1				
BELBUCA	3	PA; QL			
buprenorphine	3	PA; QL			
butalbital-acetaminophen	3				
butalbital-apap-caff-cod	3	QL			
butalbital-apap-caffeine oral capsule	3				

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Drug Name	Drug Tier	Notes	Drug Name	Drug Tier	Notes
HYSINGLA ER	3	PA; QL	OXYCODONE-ACETAMINOPHEN ORAL TABLET 10-300 MG, 2.5-300 MG, 5-300 MG, 7.5-300 MG	3	QL
JOURNAVX	3	PA; QL	oxycodone-acetaminophen oral tablet 10-325 mg, 2.5-325 mg, 5-325 mg, 7.5-325 mg	1	QL
levorphanol tartrate oral	1	PA; QL	OXYCONTIN	2	ST; QL
meperidine hcl oral tablet	3	QL	oxymorphone hcl	3	QL
methadone hcl intensol	1	QL	oxymorphone hcl er	3	PA; QL
methadone hcl oral	1	QL	pentazocine-naloxone hcl	3	QL
METHADOSE ORAL CONCENTRATE 10 MG/ML	3	QL	PERCOCET	3	QL
methadose oral tablet soluble	1	QL	PROLATE ORAL TABLET	3	QL
METHADOSE SUGAR-FREE	3	QL	ROXICODONE	3	QL
morphine sulfate (concentrate) oral solution 100 mg/5ml	1	QL	tencon	3	
morphine sulfate er beads	3	ST; QL	TRAMADOL HCL (ER BIPHASIC) ORAL CAPSULE EXTENDED RELEASE 24 HOUR	3	PA; QL
morphine sulfate er oral capsule extended release 24 hour	3	PA; QL	tramadol hcl (er biphasic) oral tablet extended release 24 hour	3	PA; QL
morphine sulfate er oral tablet extended release	1	ST; QL	tramadol hcl er	3	PA; QL
morphine sulfate oral	1	QL	tramadol hcl oral tablet 100 mg, 50 mg	1	QL
morphine sulfate rectal	1	QL	tramadol hcl oral tablet 25 mg, 75 mg	3	PA; QL
MS CONTIN	3	ST; QL	tramadol-acetaminophen	1	QL
NALOCET	3	QL	TREZIX	3	QL
NUCYNTA	3	PA; QL	xyvona oral tablet 2 mg	1	PA; QL
NUCYNTA ER	3	PA; QL	Anesthetics		
oxycodone hcl oral capsule	3	QL	AGONEAZE	3	
oxycodone hcl oral concentrate	1	QL	ANODYNE LPT	3	
oxycodone hcl oral solution	1	QL	ASTERO	3	
oxycodone hcl oral tablet	1	QL	BRUSELIX EXTERNAL CREAM	3	
OXYCODONE-ACETAMINOPHEN ORAL SOLUTION 5-325 MG/5ML	2	QL	COCAINE HCL NASAL	3	
			CRYODOSE TA	3	
			DERMACINRX LIDOGEL	3	

Drug Name	Drug Tier	Notes	Drug Name	Drug Tier	Notes
DIABECIN HR	3		LIDOCAINE HCL SOLUTION PREFILLED SYRINGE 100 MG/5ML INJECTION	3	
EHA	3		lidocaine hcl urethral/mucosal	1	
ethyl chloride	3		lidocaine-epinephrine solution 1 %-1:100000 injection	3	
GEBAUERS PAIN EASE	3		LIDOCAINE-EPINEPHRINE SOLUTION 1 %-1:100000 INJECTION	3	
GEBAUERS SPRAY AND STRETCH	3		lidocaine-prilocaine	1	
glydo	1		LIDOCAN	3	
LDO PLUS	3		LIDODERM	3	
LIDO BDK	3		LIDOMAR	3	
lidocaine external ointment 5 %	3		LIDOPIN EXTERNAL CREAM 3 %	3	
lidocaine external patch 5 %	1		LIDOREX	3	
lidocaine hcl (pf) injection solution 0.5 %, 1.5 %	3		LIDORX	3	PA
lidocaine hcl (pf) injection solution 1 %, 2 %	1		LIDO-SORB	3	PA
lidocaine hcl external cream 3 %	3		LIDOTHOL EXTERNAL PATCH	3	
LIDOCAINE HCL EXTERNAL CREAM 4.12 %	3		LIDOTRAL EXTERNAL CREAM	3	
lidocaine hcl external solution	3		LIDOTRAL EXTERNAL LIQUID	3	
lidocaine hcl injection solution 0.5 %	1		LIDOTRAN	3	
LIDOCAINE HCL INJECTION SOLUTION PREFILLED SYRINGE 10 MG/ML, 200 MG/10ML	3		LIVIXIL PAK	3	
lidocaine hcl solution 1 % injection	1		LYDEXA	3	
LIDOCAINE HCL SOLUTION 1 % INJECTION	3		NEUROZYL	3	
lidocaine hcl solution 2 % injection	1		NUMBRINO	3	
LIDOCAINE HCL SOLUTION 2 % INJECTION	3		PRILOVIX	3	
lidocaine hcl solution prefilled syringe 100 mg/5ml injection	3		PRILOVIX PLUS	3	
			PROXIVOL	3	
			RELADOR PAK	3	
			RELADOR PAK PLUS	3	
			SOOTHEE	3	
			TRIDACAINE II	3	
			TRIDACAINE III	3	

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Drug Name	Drug Tier	Notes	Drug Name	Drug Tier	Notes
XYLOCAINE	3		ft nicotine mouth/throat	2	++
XYLOCAINE MPF +RFID	3		ft nicotine transdermal	1	++
XYLOCAINE/EPINEPHRI NE INJECTION SOLUTION 1 %-1:100000	3		gnp nicotine mini	2	++
XYLOCAINE-MPF	3		gnp nicotine mouth/throat	2	++
XYLOCAINE-MPF +RFID	3		gnp nicotine polacrilex	2	++
ZERUVIA	3		gnp nicotine transdermal	1	++
ZIONODIL	3	PA	goodsense nicotine	2	++
ZIONODIL 100	3	PA	goodsense nicotine policrilex	2	++
ZTLIDO	3		habitrol	1	++
Anti-Addiction / Substance Abuse Treatment Agents			KLOXXADO	3	
acamprosate calcium	1		kls quit2	2	++
buprenorphine hcl sublingual	1	QL	kls quit4	2	++
buprenorphine hcl- naloxone hcl	1	QL	naloxone hcl injection	1	
bupropion hcl er (smoking det)	1	++	naloxone hcl nasal	1	
CHANTIX	2	++	naltrexone hcl oral	1	
CHANTIX CONTINUING MONTH PAK	2	++	NICODERM CQ	1	++
CHANTIX STARTING MONTH PAK	2	++	NICORETTE	2	++
COMMIT MOUTH/THROAT LOZENGE 2 MG, 4 MG	2	++	NICORETTE MINI	2	++
cvs nicotine mouth/throat	2	++	NICORETTE STARTER KIT	2	++
cvs nicotine polacrilex	2	++	nicotine	1	++
cvs nicotine transdermal	1	++	nicotine mini	2	++
disulfiram oral	1		nicotine polacrilex mini	2	++
eq nicotine mouth/throat	2	++	nicotine polacrilex mouth/throat	2	++
eq nicotine mouth/throat gum 2 mg, 4 mg	2	++	nicotine step 1	1	++
eq nicotine polacrilex	2	++	nicotine step 2	1	++
eq nicotine step 3	1	++	nicotine step 3	1	++
eq nicotine transdermal	1	++	NICOTROL NS		++
folding paddle walker	1	++	OPVEE	3	PA
ft naloxone hcl	1		qc nicotine transdermal system	1	++
ft nicotine mini	2	++	REXTOVY	3	
			SUBOXONE	3	QL
			THRIVE	2	++
			varenicline tartrate	1	++
			varenicline tartrate (starter)	1	++

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Drug Name	Drug Tier	Notes	Drug Name	Drug Tier	Notes
varenicline tartrate(continue)	1	++	ceftriaxone sodium injection solution reconstituted 1 gm, 2 gm, 250 mg, 500 mg	1	
VIVITROL	4	QL			
ZUBSOLV	3	QL	cefuroxime axetil	1	
Antibacterials			cephalexin oral capsule 250 mg, 500 mg	1	
amoxicillin	1		cephalexin oral capsule 750 mg	3	
amoxicillin-potassium clavulanate	1		cephalexin oral suspension reconstituted	1	
amoxicillin-potassium clavulanate er	3		cephalexin oral tablet	3	
ampicillin	1		CIPRO	3	
ampicillin sodium injection solution reconstituted 1 gm, 250 mg, 500 mg	1		ciprofloxacin hcl oral	1	
ARIKAYCE	3		clarithromycin er	3	
AUGMENTIN	3		clarithromycin oral	1	
AUGMENTIN ES-600	3		CLEOCIN	3	
avidoxy	1		CLEOCIN PHOSPHATE INJECTION SOLUTION 300 MG/2ML	3	
azithromycin oral	1		clindamycin hcl oral	1	
BACTRIM	3		clindamycin palmitate hcl	1	
BACTRIM DS	3		clindamycin phosphate injection solution 300 mg/2ml	1	
BICILLIN L-A	2		clindamycin phosphate vaginal	1	
cefaclor	3		CLINDESSE	3	
cefaclor er	3		colistimethate sodium (cba)	3	
cefadroxil	1		COLY-MYCIN M	3	
cefazolin sodium injection solution reconstituted 1 gm	1		demeclocycline hcl	3	
cefdinir	1		dicloxacillin sodium	1	
cefepime hcl injection	3		doxycycline hyclate oral capsule	1	
cefixime oral capsule	1		doxycycline hyclate oral tablet	1	
cefixime oral suspension reconstituted	1		doxycycline hyclate oral tablet delayed release 100 mg, 150 mg, 200 mg, 50 mg, 75 mg	3	
CEFIXIME ORAL TABLET	2				
cefpodoxime proxetil	3				
cefprozil	1				
ceftazidime injection solution reconstituted 1 gm	1				

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Drug Name	Drug Tier	Notes	Drug Name	Drug Tier	Notes
DOXYCYCLINE HYCLATE ORAL TABLET DELAYED RELEASE 80 MG	3		metronidazole vaginal	1	
doxycycline monohydrate oral capsule	1		minocycline hcl er	3	PA
doxycycline monohydrate oral suspension reconstituted	3		minocycline hcl oral capsule	1	
doxycycline monohydrate oral tablet	1		minocycline hcl oral tablet	3	
E.E.S. 400	3		mondoxyne nl	1	
E.E.S. GRANULES	3		moxifloxacin hcl oral	1	
ERYPED 400	3		mupirocin cream	1	
erythromycin base oral	3		mupirocin ointment	1	
erythromycin ethylsuccinate oral suspension reconstituted	1		neomycin sulfate oral	1	
erythromycin oral	3		neomycin-polymyxin b gu	3	
FIRVANQ	2		nitrofurantoin macrocrystal	1	
fosfomycin tromethamine	3		nitrofurantoin monohydrate macrocrystals	1	
gentamicin sulfate external	1		nitrofurantoin oral suspension 25 mg/5ml	1	
HIPREX	3		NUVESSA	3	
HUMATIN	3		ofloxacin oral	3	
levofloxacin oral	1		penicillin v potassium	1	
LIKMEZ	3	PA	PIVYA	3	
LINCOCIN	3		SILVADENE	3	
lincomycin hcl injection	3		silver nitrate external	3	
linezolid oral	1	QL	silver sulfadiazine external	1	
MACROBID	3		SIVEXTRO ORAL	4	QL
MACRODANTIN	3		SOLOSEC	3	
methenamine hippurate	1		ssd	1	
methenamine mandelate oral	3		streptomycin sulfate intramuscular	3	
metronidazole oral capsule	3		sulfadiazine oral	3	
metronidazole oral tablet 125 mg	3	PA	sulfamethoxazole-trimethoprim oral	1	
metronidazole oral tablet 250 mg, 500 mg	1		SULFAMYLON	3	
			sulfatrim pediatric	1	
			TARGADOX	3	
			tazicef injection	1	

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Drug Name	Drug Tier	Notes	Drug Name	Drug Tier	Notes
tetracycline hcl oral capsule	1		heparin sodium (porcine) pf	1	
TETRACYCLINE HCL ORAL TABLET	3		jantoven	1	
tinidazole oral	3		LOVENOX	3	
trimethoprim oral	1		PRADAXA ORAL CAPSULE	3	
vancomycin hcl oral capsule	1	QL	REGIOCIT	3	
vancomycin hcl oral solution reconstituted	1		rivaroxaban oral tablet	1	PA
VANDAZOLE	3		SAVAYSA	3	PA
XACIATO	3		warfarin sodium oral	1	
ZITHROMAX ORAL	3		XARELTO ORAL TABLET 10 MG, 15 MG, 20 MG	2	PA
ZITHROMAX TRI-PAK	3		XARELTO ORAL TABLET 2.5 MG	3	PA
ZITHROMAX Z-PAK	3		XARELTO STARTER PACK	2	PA
Anticoagulants			Anticonvulsants - Drugs for Seizures		
dabigatran etexilate mesylate	1		carbamazepine er	1	
ELIQUIS	3	PA	carbamazepine oral	1	
ELIQUIS (1.5 MG PACK)	3	PA	CARBATROL	1	
ELIQUIS (2 MG PACK)	3	PA	CELONTIN	3	
ELIQUIS DVT/PE STARTER PACK	3	PA	clobazam oral suspension 2.5 mg/ml	1	
enoxaparin sodium	1		clobazam oral tablet	1	
fondaparinux sodium	4	QL	DEPAKOTE	3	
FRAGMIN SUBCUTANEOUS SOLUTION 10000 UNIT/4ML	3		DEPAKOTE ER	3	
FRAGMIN SUBCUTANEOUS SOLUTION 95000 UNIT/3.8ML	3	PA	DEPAKOTE SPRINKLES	3	
FRAGMIN SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	3		diazepam rectal	1	QL
heparin sodium (porcine) +rfid	1		DILANTIN INFATABS	3	
heparin sodium (porcine) injection solution 1000 unit/ml, 10000 unit/ml, 5000 unit/ml	1		DILANTIN ORAL CAPSULE 100 MG	3	
			DILANTIN ORAL CAPSULE 30 MG	2	
			DILANTIN-125	3	
			divalproex sodium er	1	
			divalproex sodium oral	1	
			EPRONTIA	3	PA
			ethosuximide oral	1	
			felbamate	3	QL

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Drug Name	Drug Tier	Notes	Drug Name	Drug Tier	Notes
FYCOMPA	3	PA; QL	pentobarbital sodium injection	3	
gabapentin oral capsule	1		perampanel	3	PA; QL
gabapentin oral solution	1		phenobarbital oral	1	
gabapentin oral tablet 600 mg, 800 mg	1		phenobarbital sodium injection solution 130 mg/ml	1	
KEPPRA ORAL SOLUTION	3		phenytek oral capsule 200 mg	1	
KEPPRA ORAL TABLET	3	PA	phenytek oral capsule 300 mg	3	
KEPPRA XR	3	PA	phenytoin infatabs	1	
lacosamide oral	1		phenytoin oral suspension 125 mg/5ml	1	
LAMICTAL	3	PA	phenytoin oral tablet chewable	1	
LAMICTAL ODT	3	PA	phenytoin sodium extended oral capsule 100 mg, 200 mg	1	
LAMICTAL STARTER	3	PA	phenytoin sodium extended oral capsule 300 mg	3	
LAMICTAL XR	3	PA	phenytoin sodium injection	1	
lamotrigine er	3		primidone oral tablet 125 mg	3	PA; QL
lamotrigine oral kit	3		primidone oral tablet 250 mg, 50 mg	1	
lamotrigine oral tablet	1		roweepra	1	
lamotrigine oral tablet chewable	1		SPRITAM	3	
lamotrigine oral tablet dispersible	3		SUBVENITE ORAL SUSPENSION	3	PA
lamotrigine starter kit-blue	3		subvenite oral tablet	1	
lamotrigine starter kit-green	3		subvenite starter kit-blue	3	
lamotrigine starter kit-orange	3		subvenite starter kit-green	3	
levetiracetam er	1		subvenite starter kit-orange	3	
levetiracetam oral solution	1		TEGRETOL	3	
levetiracetam oral tablet	1		TEGRETOL-XR	3	
LEVETIRACETAM ORAL TABLET DISINTEGRATING SOLUBLE	3		tiagabine hcl	3	
methsuximide	2		TOPAMAX	3	PA
NAYZILAM	2	PA; QL	TOPAMAX SPRINKLE	3	
NEURONTIN	3				
oxcarbazepine	1				
oxcarbazepine er	3				
OXTELLAR XR	3				

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Drug Name	Drug Tier	Notes	Drug Name	Drug Tier	Notes
topiramate er	3	PA	amitriptyline hcl oral	1	
topiramate oral capsule sprinkle	1		amoxapine	1	
topiramate oral solution	3	PA	ANAFRANIL	3	
topiramate oral tablet	1		APLENZIN	3	
TRILEPTAL	3		bupropion hcl er (sr)	1	
TROKENDI XR	3	PA	bupropion hcl er (xl) oral tablet extended release 24 hour 150 mg, 300 mg	1	
valproic acid oral	1		BUPROPION HCL ER (XL) ORAL TABLET EXTENDED RELEASE 24 HOUR 450 MG	3	PA
VALTOCO 10 MG DOSE	2	PA; QL	bupropion hcl oral	1	
VALTOCO 15 MG DOSE	2	PA; QL	CELEXA	3	
VALTOCO 20 MG DOSE	2	PA; QL	chlordiazepoxide-amitriptyline	3	QL
VALTOCO 5 MG DOSE	2	PA; QL	CITALOPRAM HYDROBROMIDE ORAL CAPSULE	3	PA
VIMPAT ORAL	3		citalopram hydrobromide oral solution	1	
ZARONTIN	3		citalopram hydrobromide oral tablet	1	
ZONEGRAN	3		clomipramine hcl oral	1	
ZONISADE	3	PA	desipramine hcl oral	1	
zonisamide oral	1		DESVENLAFAXINE ER (authorized generic Khedezla)	3	PA
Antidementia Agents - Drugs for Alzheimer's Disease and Dementia			desvenlafaxine succinate er	1	
ARICEPT	3		doxepin hcl oral capsule	1	
donepezil hcl	1		doxepin hcl oral concentrate	1	
EXELON	3		DRIZALMA SPRINKLE	3	
galantamine hydrobromide	1		duloxetine hcl oral capsule delayed release particles 20 mg, 30 mg, 60 mg	1	
galantamine hydrobromide er	1		duloxetine hcl oral capsule delayed release particles 40 mg	3	
memantine hcl er	1		EFFEXOR XR	3	
memantine hcl oral solution	3				
memantine hcl oral tablet 10 mg, 5 mg	1				
memantine hcl oral tablet 28 x 5 mg & 21 x 10 mg	3				
memantine hcl-donepezil hcl er	3				
NAMZARIC	3				
rivastigmine	3				
rivastigmine tartrate	1				
ZUNVEYL	3	PA			
Antidepressants					

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Drug Name	Drug Tier	Notes	Drug Name	Drug Tier	Notes
ESCITALOPRAM OXALATE ORAL CAPSULE	3	PA	protriptyline hcl	1	
escitalopram oxalate oral solution	1		REMERON	3	
escitalopram oxalate oral tablet	1		REMERON SOLTAB	3	
FETZIMA	3	PA	sertraline hcl capsule 150 mg oral	3	
FETZIMA TITRATION	3	PA	SERTRALINE HCL CAPSULE 150 MG ORAL	3	
fluoxetine hcl (pmdd)	3		sertraline hcl capsule 200 mg oral	3	
fluoxetine hcl oral capsule	1		SERTRALINE HCL CAPSULE 200 MG ORAL	3	
fluoxetine hcl oral capsule delayed release	3		sertraline hcl oral concentrate	1	
fluoxetine hcl oral solution	1		sertraline hcl oral tablet	1	
fluoxetine hcl oral tablet	1		tranylcypromine sulfate	1	
fluvoxamine maleate	1		trazodone hcl oral	1	
fluvoxamine maleate er	3		trimipramine maleate oral	3	
imipramine hcl oral	1		TRINTELLIX	3	PA; QL
imipramine pamoate	3		VENLAFAXINE BESYLATE ER	3	
LEXAPRO	3		venlafaxine hcl	1	
MARPLAN	3		venlafaxine hcl er oral capsule extended release 24 hour	1	
mirtazapine oral	1		venlafaxine hcl er oral tablet extended release 24 hour	3	
NARDIL	3		VIIBRYD	3	PA
nefazodone hcl	3		vilazodone hcl	3	PA
NORPRAMIN	3		WELLBUTRIN SR	3	
nortriptyline hcl oral	1		WELLBUTRIN XL	3	
olanzapine-fluoxetine hcl	3		ZOLOFT	3	
PAMELOR	3		Antiemetics - Drugs for Nausea and Vomiting		
PARNATE	3		AKYNZEO ORAL	3	
paroxetine hcl	1		ANZEMET	3	
paroxetine hcl er	1		aprepitant oral capsule 125 mg, 80 & 125 mg, 80 mg	1	
paroxetine mesylate	3		aprepitant oral capsule 40 mg	3	
PAXIL	3				
PAXIL CR	3				
perphenazine-amitriptyline	1				
phenelzine sulfate oral	1				
PRISTIQ	3				

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Drug Name	Drug Tier	Notes	Drug Name	Drug Tier	Notes
BONJESTA	3	PA	promethazine hcl oral	1	
compro	1		promethazine hcl rectal	1	
DICLEGIS	3	PA	promethegan	1	
dimenhydrinate injection	1		REGLAN	3	
doxylamine-pyridoxine	3	PA	SANCUSO	3	PA
dronabinol	1		scopolamine	3	
EMEND BIPACK	3		SYNDROS	3	
EMEND ORAL	3		TIGAN	3	PA
EMEND TRIPACK	3		TRANSDERM SCOP	3	
granisetron hcl oral	1		trimethobenzamide hcl oral	3	PA
MARINOL	3		VARUBI (180 MG DOSE)	3	PA; QL
meclizine hcl oral tablet 12.5 mg, 25 mg	3		Antifungals		
metoclopramide hcl +rfid	1		ciclodan	1	
metoclopramide hcl injection	1		ciclopirox external	1	
metoclopramide hcl oral solution	1		ciclopirox olamine external	1	
metoclopramide hcl oral tablet	1		clotrimazole external	3	
metoclopramide hcl oral tablet dispersible	3		clotrimazole mouth/throat	1	
ondansetron hcl +rfid	1		clotrimazole- betamethasone	1	
ondansetron hcl injection	1		CRESEMBA ORAL	4	PA; QL
ondansetron hcl oral solution 4 mg/5ml	1		DIFLUCAN ORAL SUSPENSION RECONSTITUTED	3	
ondansetron hcl oral tablet	1		econazole nitrate external cream	3	
ondansetron odt oral tablet dispersible 16 mg	3	PA	ECONAZOLE NITRATE EXTERNAL FOAM	3	
ondansetron odt oral tablet dispersible 4 mg, 8 mg	1		ECOZA	3	
perphenazine oral	1		ERTACZO	3	
PHENERGAN	3		EXELDERM	3	
prochlorperazine	1		exoderm external lotion	3	
prochlorperazine edisylate injection	1		fluconazole oral	1	
prochlorperazine maleate oral	1		flucytosine oral	4	QL
promethazine hcl injection	3		griseofulvin microsize oral	1	
			griseofulvin ultramicrosize oral tablet 125 mg, 250 mg	1	
			GNAZOLE-1	3	

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Drug Name	Drug Tier	Notes	Drug Name	Drug Tier	Notes
itraconazole oral	1		Antigout Agents		
JUBLIA	3	PA	allopurinol oral tablet 100 mg, 300 mg	1	
ketoconazole external cream	1		allopurinol oral tablet 200 mg	3	PA
ketoconazole external foam	3		colchicine oral	1	
ketoconazole external shampoo	1		colchicine-probenecid	1	
ketoconazole oral	1		febuxostat	1	
ketodan	3		GLOPERBA	3	
klayesta	1		MITIGARE	3	
LULICONAZOLE	3		probenecid	1	
LUZU	3		ULORIC	3	
MICONATATE	3		Antimigraine Agents		
miconazole 3	3		AIMOVI SUBCUTANEOUS SOLUTION AUTO- INJECTOR 140 MG/ML, 70 MG/ML	3	PA
MICONAZOLE-ZINC OXIDE-PETROLAT	3		AJOVY	2	PA
naftifine hcl	3		almotriptan malate	3	PA
NAFTIN	3		BREKIYA	3	PA
NOXAFIL ORAL PACKET	3		CAMBIA	3	PA
nyamyc	1		diclofenac potassium(migraine)	3	PA
nystatin external	1		dihydroergotamine mesylate injection	1	QL
nystatin mouth/throat	1		dihydroergotamine mesylate nasal	4	
nystatin oral	1		eletriptan hydrobromide	1	
nystatin-triamcinolone	1		EMGALITY SUBCUTANEOUS SOLUTION AUTO- INJECTOR 120 MG/ML	3	PA
nystop	1		EMGALITY SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 100 MG/ML, 120 MG/ML	3	PA; QL
ORAVIG	3		ERGOMAR	2	
oxiconazole nitrate	3		ergotamine-caffeine	1	
OXISTAT	3		FROVA	3	PA
SPORANOX	3		frovatriptan succinate	3	PA
tavaborole	3	PA			
terbinafine hcl oral	1				
terconazole vaginal cream	1				
terconazole vaginal suppository	3				
voriconazole oral	1				
VUSION	3				

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Drug Name	Drug Tier	Notes	Drug Name	Drug Tier	Notes
IMITREX	3		pyridostigmine bromide er		
IMITREX STATDOSE REFILL	3		oral tablet extended release	1	
IMITREX STATDOSE SYSTEM	3		pyridostigmine bromide oral	1	
MAXALT	3		Antimycobacterials		
MAXALT-MLT	3		cycloserine oral	3	
MIGERGOT	2		dapsone oral	1	
naratriptan hcl	1		ethambutol hcl oral	1	
NURTEC	3	PA; QL	isoniazid oral	1	
RELPAK	3		PRETOMANID	3	
rizatriptan benzoate	1		PRIFTIN	2	
sumatriptan nasal	1		pyrazinamide oral	1	
sumatriptan succinate oral	1		rifabutin	1	
sumatriptan succinate subcutaneous	1		rifampin oral	1	
sumatriptan-naproxen sodium	3	PA	Antineoplastics - Drugs for Cancer		
SYMBRAVO	3	PA	abiraterone acetate	1	QL
TOSYMRA	3		abirtega	1	QL
TREXIMET	3	PA	AFINITOR	3	PA; QL
TRUDHESA	3	PA	AFINITOR DISPERZ	3	PA; QL
UBRELVY	3	PA; QL	AKEEGA	3	PA; QL
ZEMBRACE SYMTOUCH	3		ALECENSA	3	PA; QL
ZOLMITRIPTAN NASAL SOLUTION 2.5 MG	3		ALUNBRIG	3	PA; QL
zolmitriptan nasal solution 5 mg	3		anastrozole oral	1	++
zolmitriptan oral	1		ARIMIDEX	3	
ZOMIG	3		AROMASIN	3	
Antimyasthenic Agents			AUGTYRO	3	PA; QL
MESTINON ORAL SOLUTION	2		AVMAPKI FAKZYNJA CO-PACK	3	PA; QL
MESTINON ORAL TABLET	3		AYVAKIT	3	PA; QL
MESTINON ORAL TABLET EXTENDED RELEASE	3		BALVERSA	3	PA; QL
			BESREMI	3	PA; QL
			bexarotene	3	PA; QL
			bicalutamide	1	
			BOSULIF	3	PA; QL
			BRAFTOVI	3	PA; QL
			BRUKINSA	2	PA; QL
			CABOMETYX	3	PA; QL
			CALQUENCE	2	PA; QL

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Drug Name	Drug Tier	Notes	Drug Name	Drug Tier	Notes
capecitabine	1	QL	IBTROZI	3	PA; QL
CAPRELSA	3	PA; QL	ICLUSIG	3	PA; QL
CASODEX	3		IDHIFA	3	PA; QL
COMETRIQ	3	PA; QL	imatinib mesylate oral	1	QL
COPIKTRA	3	PA; QL	IMBRUVICA ORAL CAPSULE	2	PA; QL
COTELLIC	2	PA; QL	IMBRUVICA ORAL SUSPENSION	3	PA; QL
cyclophosphamide oral capsule	1		IMBRUVICA ORAL TABLET 140 MG, 420 MG	2	PA; QL
CYCLOPHOSPHAMIDE ORAL TABLET	3		IMBRUVICA ORAL TABLET 280 MG	3	PA; QL
DANZITEN	3	PA; QL	IMKELDI	3	PA; QL
dasatinib	1	PA; QL	INLURIYO	3	PA; QL
DAURISMO	3	PA; QL	INLYTA	3	PA; QL
DROXIA	2		INQOVI	3	PA; QL
ENSACOVE	3	PA; QL	INREBIC	3	PA; QL
ERIVEDGE	3	PA; QL	IRESSA	3	PA; QL
ERLEADA	3	PA; QL	ITOVEBI	3	PA; QL
erlotinib hcl	1	PA; QL	JAKAFI	3	PA; QL
etoposide oral	1	QL	JAYPIRCA	3	PA; QL
EULEXIN	3	QL	KISQALI (200 MG DOSE)	3	PA; QL
everolimus oral tablet 10 mg, 2.5 mg, 5 mg, 7.5 mg	1	PA; QL	KISQALI (400 MG DOSE)	3	PA; QL
everolimus oral tablet soluble	1	PA; QL	KISQALI (600 MG DOSE)	3	PA; QL
exemestane	1	++	KOMZIFTI	3	PA; QL
FARESTON	3	PA	KRAZATI	3	PA; QL
FEMARA	3		lapatinib ditosylate	1	PA; QL
FOTIVDA	3	PA; QL	LAZCLUZE	3	PA; QL
FRUZAQLA	3	PA; QL	lederle leucovorin	1	
GAVRETO	3	PA; QL	lenalidomide	1	PA; QL
gefitinib	2	PA; QL	LENVIMA ORAL CAPSULE THERAPY PACK 10 & 4 MG, 10 MG, 10 MG & 2 X 4 MG, 2 X 10 MG, 2 X 10 MG & 4 MG, 2 X 4 MG, 3 X 4 MG, 4 MG	3	PA; QL
GILOTRIF	2	PA; QL	letrozole oral	1	
GLEEVEC	3	PA; QL	leucovorin calcium injection solution 100 mg/10ml	3	
GLEOSTINE	2				
HERNEXEOS	3	PA; QL			
HYCAMTIN ORAL	3	QL			
HYDREA	3				
hydroxyurea oral	1				
IBRANCE	3	PA; QL			

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Drug Name	Drug Tier	Notes	Drug Name	Drug Tier	Notes
leucovorin calcium oral	1		OPDIVO QVANTIG SUBCUTANEOUS SOLUTION 300-5000 MG -UT/2.5ML	3	
LEUKERAN	2				
lomustine	1		ORGOVYX	3	PA; QL
LONSURF	3	PA; QL	ORSERDU	3	PA; QL
LORBRENA	3	PA; QL	PANRETIN	3	PA; QL
LUMAKRAS	3	PA; QL	pazopanib hcl	1	PA; QL
LUNSUMIO VELO	3		PEMAZYRE	3	PA; QL
LYNPARZA	3	PA; QL	PHYRAGO ORAL TABLET 100 MG, 140 MG, 20 MG, 50 MG, 70 MG	3	PA; QL
LYSODREN	3	PA; QL	PHYRAGO ORAL TABLET 80 MG	2	PA; QL
LYTGOBI (12 MG DAILY DOSE)	3	PA; QL	PIQRAY	3	PA; QL
LYTGOBI (16 MG DAILY DOSE)	3	PA; QL	POMALYST	3	PA; QL
LYTGOBI (20 MG DAILY DOSE)	3	PA; QL	PURIXAN	3	PA
MATULANE	2	QL	QINLOCK	3	PA; QL
MEKINIST	2	PA; QL	RETEVMO	3	PA; QL
MEKTOVI	3	PA; QL	REVLIMID	3	PA; QL
mercaptopurine oral suspension	3	PA	REVUFORJ	3	PA; QL
mercaptopurine oral tablet	1		REZLIDHIA	3	PA; QL
mesna	1		ROMVIMZA	3	PA; QL
MESNEX ORAL	2		ROZLYTREK	2	PA; QL
MODEYSO	3	PA; QL	RUBRACA	3	PA; QL
MYLERAN	2	QL	RYDAPT	2	PA; QL
NERLYNX	3	PA; QL	SCSEMBLIX	3	PA; QL
NEXAVAR	3	PA; QL	SOLTAMOX	3	
NILOTINIB D-TARTRATE	3	PA; QL	sorafenib tosylate	1	PA; QL
nilotinib hcl	3	PA; QL	SPRYCEL	3	PA; QL
nilutamide	3	PA	STIVARGA	2	PA; QL
NINLARO	3	PA; QL	sunitinib malate	1	PA; QL
NUBEQA	2	PA; QL	SUTENT	3	PA; QL
ODOMZO	3	PA; QL	TABLOID	2	
OGSIVEO	3	PA; QL	TABRECTA	3	PA; QL
OJEMDA	3	PA; QL	TAFINLAR	2	PA; QL
OJJAARA	3	PA; QL	TAGRISSE	2	PA; QL
ONUREG	3	PA; QL	TALZENNA	3	PA; QL
			tamoxifen citrate oral	1	++

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Drug Name	Drug Tier	Notes	Drug Name	Drug Tier	Notes
TARGRETIN	3	PA; QL	XTANDI ORAL	2	PA; QL
TASIGNA	3	PA; QL			
TAZVERIK	3	PA; QL	YONSA	3	PA; QL
temozolomide	1	QL	ZEJULA	3	PA; QL
TEPMETKO	3	PA; QL	ZELBORAF	2	PA; QL
THALOMID	2	PA; QL	ZOLINZA	3	PA; QL
TIBSOVO	3	PA; QL	ZYDELIG	2	PA; QL
toremifene citrate	3	PA	ZYKADIA	3	PA; QL
torpenz	1	PA; QL	ZYTIGA	3	PA; QL
tretinoin oral	1	QL	Antiparasitics		
TRUQAP	3	PA; QL	albendazole oral	1	
TUKYSA	3	PA; QL	atovaquone	4	QL
TURALIO	3	PA; QL	BENZNIDAZOLE	3	QL
TYKERB	3	PA; QL	BILTRICIDE	2	
VANFLYTA	3	PA; QL	chloroquine phosphate oral	1	
VENCLEXTA	2	PA; QL	COARTEM	3	
VENCLEXTA STARTING PACK	2	PA; QL	CROTAN	2	
VERZENIO	3	PA; QL	EMVERM	3	
VITRAKVI	3	PA; QL	hydroxychloroquine sulfate oral	1	
VIZIMPRO	3	PA; QL	ivermectin oral	3	PA
VONJO	3	PA; QL	KRINTAFEL	2	
VORANIGO	3	PA; QL	LAMPIT	3	
VOTRIENT	3	PA; QL	malathion	3	
WELIREG	3	PA; QL	NATROBA	3	
XALKORI	3	PA; QL	NEBUPENT	3	
XOSPATA	3	PA; QL	nitazoxanide oral	2	
XPOVIO (100 MG ONCE WEEKLY)	3	PA; QL	OVIDE	3	
XPOVIO (40 MG ONCE WEEKLY)	3	PA; QL	PENTAM	3	
XPOVIO (40 MG TWICE WEEKLY)	3	PA; QL	pentamidine isethionate	3	
XPOVIO (60 MG ONCE WEEKLY)	3	PA; QL	permethrin external	1	
XPOVIO (60 MG TWICE WEEKLY)	3	PA; QL	PLAQUENIL	3	
XPOVIO (80 MG ONCE WEEKLY)	3	PA; QL	praziquantel oral	1	
XPOVIO (80 MG TWICE WEEKLY)	3	PA; QL	primaquine phosphate	1	
			PRURADIK	2	
			pyrimethamine oral	4	PA; QL
			quinine sulfate	1	

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Drug Name	Drug Tier	Notes	Drug Name	Drug Tier	Notes
SOVUNA	3		pramipexole dihydrochloride er	3	
spinosad	3		rasagiline mesylate oral	1	
STROMEKTOL	3	PA	ropinirole hcl	1	
Antiparkinson Agents			ropinirole hcl er	1	
amantadine hcl oral capsule	1		RYTARY	3	PA
amantadine hcl oral solution 50 mg/5ml	1		selegiline hcl oral	1	
amantadine hcl oral tablet	1		SINEMET	3	
AZILECT	3	PA	trihexyphenidyl hcl	1	
benztropine mesylate	1		XADAGO	3	PA
bromocriptine mesylate oral	1		Antiplatelets		
carbidopa oral	1		aspirin-dipyridamole er	1	
CARBIDOPA-LEVODOPA ER ORAL CAPSULE EXTENDED RELEASE	3	PA	BRILINTA	3	PA
carbidopa-levodopa er oral tablet extended release	1		cilostazol	1	
carbidopa-levodopa oral tablet	1		clopidogrel bisulfate oral	1	
carbidopa-levodopa oral tablet dispersible 10-100 mg, 25-100 mg	1		dipyridamole oral	1	
carbidopa-levodopa oral tablet dispersible 25-250 mg	3		EFFIENT	3	
carbidopa-levodopa-entacapone	1		PLAVIX	3	
CREXONT	3	PA	prasugrel hcl	1	
DHIVY	3	PA	ticagrelor	1	
DUOPA	4	PA; QL	YOSPRALA	3	
entacapone	1		ZONTIVITY	3	
LODOSYN	3		Antipsychotics - Drugs for Mood Disorders		
NEUPRO	3		ABILIFY	3	
ONGENTYS	3	PA; QL	ABILIFY ASIMTUFII	4	
PARLODEL	3		ABILIFY MAINTENA	4	
pramipexole dihydrochloride	1		aripiprazole oral solution	1	
			aripiprazole oral tablet	1	
			aripiprazole oral tablet dispersible	3	
			ARISTADA	4	
			ARISTADA INITIO	4	
			asenapine maleate	3	PA
			chlorpromazine hcl injection	1	
			chlorpromazine hcl oral concentrate	3	

Drug Name	Drug Tier	Notes	Drug Name	Drug Tier	Notes
chlorpromazine hcl oral tablet	1		RISPERDAL CONSTA SUSPENSION		
clozapine oral tablet	1		RECONSTITUTED ER 12.5 MG	1	
clozapine oral tablet dispersible	3		INTRAMUSCULAR		
CLOZARIL	3		RISPERDAL CONSTA SUSPENSION		
ERZOFRI	4		RECONSTITUTED ER 12.5 MG	2	
FANAPT	3	PA; QL	INTRAMUSCULAR		
FANAPT TITRATION PACK A	3	PA; QL	RISPERDAL CONSTA SUSPENSION		
FANAPT TITRATION PACK B	3	PA; QL	RECONSTITUTED ER 25 MG INTRAMUSCULAR	1	
FANAPT TITRATION PACK C	3	PA; QL	RISPERDAL CONSTA SUSPENSION		
fluphenazine decanoate injection	1		RECONSTITUTED ER 25 MG INTRAMUSCULAR	2	
fluphenazine hcl	1		RISPERDAL CONSTA SUSPENSION		
GEODON	3		RECONSTITUTED ER 37.5 MG	1	
haloperidol decanoate intramuscular	1		INTRAMUSCULAR		
haloperidol lactate injection	1		RISPERDAL CONSTA SUSPENSION		
haloperidol lactate oral concentrate 2 mg/ml	1		RECONSTITUTED ER 37.5 MG	2	
haloperidol oral	1		INTRAMUSCULAR		
INVEGA	3		RISPERDAL CONSTA SUSPENSION		
INVEGA HAFYERA	4		RECONSTITUTED ER 50 MG INTRAMUSCULAR	1	
INVEGA SUSTENNA	4		RISPERDAL CONSTA SUSPENSION		
INVEGA TRINZA	4		RECONSTITUTED ER 50 MG INTRAMUSCULAR	2	
loxapine succinate	1		risperidone microspheres er	1	
lurasidone hcl	1		risperidone oral solution	1	
molindone hcl	3		risperidone oral tablet	1	
olanzapine	1		risperidone oral tablet dispersible	3	
paliperidone er	1		RYKINDO	4	
PERSERIS	4		SAPHRIS	3	PA
pimozide	1		SECUADO	3	PA
quetiapine fumarate	1		SEROQUEL	3	
quetiapine fumarate er	1				
REXULTI	3	PA; QL			
RISPERDAL	3				

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Drug Name	Drug Tier	Notes	Drug Name	Drug Tier	Notes
SEROQUEL XR	3		emtricitabine	1	
thioridazine hcl oral	1		emtricitabine-tenofovir df oral tablet 100-150 mg, 133-200 mg, 167-250 mg	1	
thiothixene	1		emtricitabine-tenofovir df oral tablet 200-300 mg	1	++
trifluoperazine hcl	1		emtricitab- rilpivir-tenofov df	4	PA
UZEDY	4		EMTRIVA ORAL CAPSULE	3	PA
VERSACLOZ	3		EMTRIVA ORAL SOLUTION	2	
ziprasidone hcl	1		entecavir	1	
ziprasidone mesylate	3		EPCLUSA	4	QL
ZYPREXA	3		EPIVIR	3	
ZYPREXA RELPREVV	2		etravirine	1	
Antivirals			famciclovir oral	1	
abacavir sulfate	1		fosamprenavir calcium	4	
abacavir sulfate-lamivudine	1		GENVOYA	4	
acyclovir external cream	3		INTELENCE ORAL TABLET 100 MG, 200 MG	3	
acyclovir external ointment	1		INTELENCE ORAL TABLET 25 MG	2	
acyclovir oral	1		ISENTRESS HD	2	
adefovir dipivoxil	1	QL	ISENTRESS ORAL PACKET	3	
APTIVUS	4		ISENTRESS ORAL TABLET	2	
atazanavir sulfate	1		ISENTRESS ORAL TABLET CHEWABLE	2	
BARACLUDE ORAL SOLUTION	4	QL	JULUCA	4	
BIKTARVY	4		KALETRA ORAL SOLUTION	2	
CIMDUO	4		KALETRA ORAL TABLET	3	
darunavir	1		LAGEVRIO	2	QL
DENAVIR	3		lamivudine	1	
DESCOVY ORAL TABLET 120-15 MG	4		lamivudine-zidovudine	1	
DESCOVY ORAL TABLET 200-25 MG	4	++	lopinavir-ritonavir	1	
DOVATO	4		maraviroc	4	
EDURANT	2		nevirapine er	1	
EDURANT PED	4	PA			
efavirenz	1				
efavirenz-emtricitab-tenofo df	1				
efavirenz-lamivudine-tenofovir	1				

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Drug Name	Drug Tier	Notes	Drug Name	Drug Tier	Notes
nevirapine oral suspension	3		TAMIFLU	2	
nevirapine oral tablet	1		tenofovir disoproxil fumarate	1	
NORVIR ORAL PACKET	2		TIVICAY	2	
NORVIR ORAL TABLET	3		TIVICAY PD	2	
ODEFSEY	4		TRIUMEQ	4	
oseltamivir phosphate oral	1		TRIUMEQ PD	4	
PAXLOVID (150/100)	2	QL	TYBOST	2	PA
PAXLOVID (300/100 & 150/100)	2	QL	valacyclovir hcl oral	1	
PAXLOVID (300/100)	2	QL	valganciclovir hcl	4	QL
PEGASYS	4	QL	VALTREX	3	
penciclovir	3		VIRACEPT	2	
PREVYMIS ORAL	4	PA; QL	VIREAD ORAL POWDER	2	
PREZCOBIX	2		VIREAD ORAL TABLET 150 MG, 200 MG, 250 MG	2	
PREZISTA ORAL SUSPENSION	2		VIREAD ORAL TABLET 300 MG	3	PA
PREZISTA ORAL TABLET 150 MG, 75 MG	2		VOSEVI	4	PA; QL
PREZISTA ORAL TABLET 600 MG, 800 MG	3		XERESE	3	
RELENZA DISKHALER	2		XOFLUZA (40 MG DOSE)	3	
RETROVIR ORAL	3		XOFLUZA (80 MG DOSE)	3	
REYATAZ ORAL PACKET	2		YEZTUGO ORAL	4	
ribavirin inhalation	3		ZIAGEN	3	
ribavirin oral	1	QL	zidovudine	1	
rimantadine hcl	1		ZOVIRAX	3	
ritonavir	1		Anxiolytics - Drugs for Anxiety		
SELZENTRY ORAL SOLUTION	4		alprazolam er	1	QL
SOFOSBUVIR-VELPATASVIR	4	QL	alprazolam intensol	3	QL
STRIBILD	4	PA	alprazolam oral tablet	1	QL
SUNLENCA ORAL TABLET	4		alprazolam oral tablet dispersible	3	QL
SYMFI	3		alprazolam xr	1	QL
SYMTUZA	4		ATIVAN INJECTION SOLUTION 2 MG/ML	3	QL
			ATIVAN ORAL	3	QL
			buspirone hcl oral	1	
			chlordiazepoxide hcl	1	QL

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clonazepam oral	1	QL	XANAX	3	QL
clorazepate dipotassium	1	QL	XANAX XR	3	QL
diazepam injection solution 10 mg/2ml	1	QL	Bipolar Agents - Drugs for Mood Disorders		
diazepam intensol	3	QL	EQUETRO	3	
diazepam oral concentrate	3	QL	lithium	1	
diazepam oral solution	1	QL	lithium carbonate er	1	
diazepam oral tablet	1	QL	lithium carbonate oral	1	
diazepam solution 5 mg/ml injection	1	QL	LITHOBID	3	
DIAZEPAM SOLUTION 5 MG/ML INJECTION	3	QL	Blood Products and Modifiers - Drugs for Blood Disorders		
estazolam	3	QL	AGRYLIN	3	
HALCION	3	QL	ALVAIZ	4	PA; QL
hydroxyzine hcl oral	1		aminocaproic acid oral	3	
hydroxyzine pamoate oral	1		anagrelide hcl	1	
KLONOPIN	3	QL	ARANESP (ALBUMIN FREE)	3	PA
lorazepam intensol	1	QL	EPOGEN	2	PA
lorazepam oral concentrate 2 mg/ml	1	QL	GRANIX	4	QL
lorazepam oral tablet	1	QL	HEMLIBRA	4	PA; QL
lorazepam solution 2 mg/ml injection	1	QL	LEUKINE	2	
LORAZEPAM SOLUTION 2 MG/ML INJECTION	3	QL	MIRCERA	3	PA
LOREEV XR	3	QL	NIVESTYM	4	PA; QL
meprobamate	3		PROCRIT	2	PA
midazolam hcl (pf) injection solution 10 mg/2ml, 5 mg/ml	1	QL	RETACRIT	3	PA
midazolam hcl injection solution 10 mg/2ml, 5 mg/ml	1	QL	tranexamic acid oral	1	QL
MIDAZOLAM HCL INJECTION SOLUTION 2 MG/2ML, 5 MG/5ML	3	QL	ZARXIO	4	PA; QL
midazolam hcl oral	3	QL	Cardiovascular Agents - Drugs for Heart and Circulation Conditions		
oxazepam	1	QL	acebutolol hcl oral	1	
quazepam	3	QL	acetazolamide sodium	3	
triazolam	1	QL	ALDACTONE	3	
VALIUM	3	QL	aliskiren fumarate	3	PA
			alprostadil injection	1	
			amiloride hcl oral	1	
			amiloride-hydrochlorothiazide	1	
			amiodarone hcl oral	1	
			amlodipine besylate oral	1	

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Drug Name	Drug Tier	Notes	Drug Name	Drug Tier	Notes
amlodipine besylate-benazepril hcl	1		candesartan cilexetil	1	
amlodipine besylate-valsartan	1		candesartan cilexetil-hctz	3	
amlodipine-atorvastatin	3		captopril oral	1	
amlodipine-olmesartan	1		captopril-hydrochlorothiazide	1	
amlodipine-valsartan-hctz	3		CARDIZEM	3	
ARB LI	3	PA	CARDIZEM CD	3	
ATACAND	3		CARDIZEM LA	3	
ATACAND HCT	3		CARDURA	3	
atenolol oral	1		CAROSPIR	3	
atenolol-chlorthalidone	1		cartia xt	1	
ATORVALIQ	3	PA	carvedilol	1	
atorvastatin calcium oral tablet 10 mg, 20 mg	1	++	carvedilol phosphate er	3	
atorvastatin calcium oral tablet 40 mg, 80 mg	1		CATAPRES-TTS-1	3	
AVALIDE	3		CATAPRES-TTS-2	3	
AVAPRO	3		CATAPRES-TTS-3	3	
AZOR	3		chlorthalidone	1	
benazepril hcl oral	1		cholestyramine light	1	
benazepril-hydrochlorothiazide	1		cholestyramine oral	1	
BENICAR	3		clonidine	1	
BENICAR HCT	3		CLONIDINE ER	3	
BETAPACE	3		clonidine hcl oral	1	
BETAPACE AF	3		colesevelam hcl	3	
betaxolol hcl oral	1		COLESTID	3	
BIDIL	3		colestipol hcl	1	
bisoprolol fumarate oral tablet 10 mg, 5 mg	1		CONJUPRI	3	PA
bisoprolol fumarate oral tablet 2.5 mg	3		COREG	3	
bisoprolol-hydrochlorothiazide	1		COREG CR	3	
bumetanide oral	1		CORLANOR	3	PA
BUMEX	3		COZAAR	3	
BYSTOLIC	3		CRESTOR	3	
CADUET	3		DEMSER ORAL CAPSULE 250 MG	3	
			digoxin injection	1	
			digoxin oral solution	1	
			digoxin oral tablet 125 mcg, 250 mcg	1	

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Drug Name	Drug Tier	Notes	Drug Name	Drug Tier	Notes
digoxin oral tablet 62.5 mcg	3		eplerenone	1	
diltiazem hcl er beads (generic Tiazac)	1		ethacrynic acid	1	PA
diltiazem hcl er coated beads (generic Cardizem CD)	1		EXFORGE	3	
diltiazem hcl er oral capsule extended release 12 hour	1		EXFORGE HCT	3	PA
diltiazem hcl er oral capsule extended release 24 hour	1		EZALLOR SPRINKLE	3	
diltiazem hcl er oral tablet extended release 24 hour	3		ezetimibe	1	
dilt-xr	1		ezetimibe-simvastatin	1	
DIOVAN	3		felodipine er	1	
DIOVAN HCT	3		fenofibrate micronized	1	
disopyramide phosphate	1		fenofibrate oral capsule 134 mg, 200 mg, 67 mg	1	
DIURIL	2		fenofibrate oral capsule 150 mg, 50 mg	3	
dofetilide	1		fenofibrate oral tablet 120 mg, 145 mg, 40 mg, 48 mg	3	
doxazosin mesylate oral	1		fenofibrate oral tablet 160 mg, 54 mg	1	
DYRENIUM	3		fenofibric acid	1	
EDARBI	3	PA	flecainide acetate	1	
EDARBYCLOR	3	PA	FLOLIPID	3	
EDECIN	3	PA	fluvastatin sodium	3	++
enalapril maleate oral solution	3		fluvastatin sodium er	3	
enalapril maleate oral tablet	1		fosinopril sodium	1	
enalapril-hydrochlorothiazide	1		fosinopril sodium-hctz	1	
ENBUMYST	3	PA	furosemide oral	1	
ENTRESTO ORAL CAPSULE SPRINKLE	3	PA	furosemide solution 10 mg/ml injection	1	
ENTRESTO ORAL TABLET	3	PA; QL	FUROSEMIDE SOLUTION 10 MG/ML INJECTION	3	
EPANED	3		gemfibrozil oral	1	
epinephrine injection solution	1		guanfacine hcl	1	
epinephrine pf	1		HEMANGEOL	3	PA
			HEMICLOR	3	
			hydralazine hcl oral	1	
			hydrochlorothiazide oral	1	
			HYZAAR	3	
			icosapent ethyl	3	PA

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Drug Name	Drug Tier	Notes	Drug Name	Drug Tier	Notes
indapamide	1		LOPID	3	
INDERAL LA	3		LOPRESSOR ORAL SOLUTION	3	PA
INDERAL XL	3		LOPRESSOR ORAL TABLET 100 MG, 50 MG	3	
INNOPRAN XL	3		LOPRESSOR ORAL TABLET 12.5 MG	3	PA
INPEFA	3	PA	losartan potassium oral	1	
INSPRA ORAL TABLET 25 MG	3		losartan potassium-hctz	1	
INZIRQO	3	PA	LOTENSIN	3	
irbesartan	1		LOTENSIN HCT	3	
irbesartan-hydrochlorothiazide	1		LOTREL	3	
ISORDIL TITRADOSE	3		lovastatin oral	1	++
isosorb dinitrate-hydralazine	3		LOVAZA	3	
isosorbide dinitrate	1		matzim la	3	
isosorbide mononitrate	1		methyldopa oral tablet 250 mg	1	
isosorbide mononitrate er	1		methyldopa oral tablet 500 mg	3	
isradipine	1		metolazone	1	
ivabradine hcl	3	PA	metoprolol succinate er	1	
JAVADIN	3	PA	metoprolol tartrate oral tablet 100 mg, 25 mg, 37.5 mg, 50 mg, 75 mg	1	
KAPSPARGO SPRINKLE	3		METOPROLOL TARTRATE ORAL TABLET 12.5 MG	3	PA
KATERZIA	3		metoprolol-hydrochlorothiazide	1	
labetalol hcl oral tablet 100 mg, 200 mg, 300 mg	1		metyrosine	3	
labetalol hcl oral tablet 400 mg	3		mexiletine hcl oral	1	
LANOXIN	3		MICARDIS	3	
LANOXIN PEDIATRIC	3		MICARDIS HCT	3	
LASIX	3		midodrine hcl	1	
LESCOL XL	3		minoxidil oral	1	
LEVAMLODIPINE MALEATE	3	PA	moexipril hcl	1	
LIPITOR	3		MULTAQ	3	
LIPOFEN	3		MYQORZO	3	
lisinopril oral	1		nadolol oral	1	
lisinopril-hydrochlorothiazide	1		nebivolol hcl	1	
LIVALO	3				
LODOCO	3	PA			

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Drug Name	Drug Tier	Notes	Drug Name	Drug Tier	Notes
NEXICLON XR	3		olmesartan-amlodipine-hctz	1	
NEXLETOL	3	PA	omega-3-acid ethyl esters	3	
NEXLIZET	3	PA	pacerone	1	
niacin (antihyperlipidemic)	3		papaverine hcl injection	1	
niacin er (antihyperlipidemic)	3		pentoxifylline er	1	
niacor	3		perindopril erbumine	1	
nicardipine hcl oral	1		phenoxybenzamine hcl oral	4	QL
nifedipine er	1		phentolamine mesylate injection	1	
nifedipine er osmotic release	1		pindolol	1	
nifedipine oral	1		pitavastatin calcium	3	
nimodipine oral capsule	1		pravastatin sodium	1	++
nisoldipine er	3		prazosin hcl oral	1	
NITRO-BID	2		PRESTALIA	3	
NITRO-DUR TRANSDERMAL PATCH 24 HOUR 0.1 MG/HR, 0.2 MG/HR, 0.4 MG/HR, 0.6 MG/HR	3		prevalite	1	
NITRO-DUR TRANSDERMAL PATCH 24 HOUR 0.3 MG/HR, 0.8 MG/HR	2		procainamide hcl injection	1	
nitroglycerin rectal	1		PROCARDIA XL	3	
nitroglycerin sublingual	1		propafenone hcl	1	
nitroglycerin transdermal	1		propafenone hcl er	1	
nitroglycerin translingual	3		propranolol hcl er	1	
NITROLINGUAL	3		propranolol hcl oral	1	
NITROSTAT	3		PROSTIN VR	3	
nitro-time oral capsule extended release 9 mg	1		QBRELIS	3	
NORLIQVA	3	PA	QUESTRAN	3	
NORPACE	3		QUESTRAN LIGHT	3	
NORPACE CR	2		quinapril hcl	1	
NORVASC	3		quinapril-hydrochlorothiazide	1	
olmesartan medoxomil oral	1		quinidine gluconate er	1	
olmesartan medoxomil-hctz	1		quinidine sulfate	1	
			ramipril	1	
			ranolazine er	1	
			RECTIV	3	
			REPATHA	3	PA
			REPATHA SURECLICK	3	PA

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Drug Name	Drug Tier	Notes	Drug Name	Drug Tier	Notes
rosuvastatin calcium oral tablet 10 mg, 5 mg	1	++	TRIBENZOR	3	
rosuvastatin calcium oral tablet 20 mg, 40 mg	1		TRICOR	3	
sacubitril-valsartan	1	QL	TRYVIO	3	PA
SDAMLO	3		valsartan oral solution	3	PA
simvastatin oral tablet 10 mg, 20 mg, 40 mg, 5 mg	1	++	valsartan oral tablet	1	
simvastatin oral tablet 80 mg	1		valsartan-hydrochlorothiazide	1	
SOANZ	3	PA	VASCEPA	3	PA
sotalol hcl (af)	1		VASERETIC	3	
sotalol hcl oral	1		VASOTEC	3	
SOTYLIZE	3		verapamil hcl er oral capsule extended release 24 hour 100 mg, 200 mg, 300 mg	3	
spironolactone oral suspension	3		verapamil hcl er oral capsule extended release 24 hour 120 mg, 180 mg, 240 mg, 360 mg	1	
spironolactone oral tablet	1		verapamil hcl er oral tablet extended release	1	
spironolactone-hctz	1		verapamil hcl oral	1	
SULAR	3		VERQUVO	3	PA
TEKTURNA	3	PA	VYTORIN	3	
telmisartan	1		WELCHOL	3	
telmisartan-amlodipine	3		ZESTORETIC	3	
telmisartan-hctz	3		ZESTRIL	3	
TENORETIC 100	3		ZETIA	3	
TENORETIC 50	3		ZOCOR	3	
TENORMIN	3		ZYPITAMAG	3	
THALITONE	3		Central Nervous System Agents - Drugs for Attention Deficit Disorder		
tiadylt er	1		ADDERALL	2	
TIAZAC	3		ADDERALL XR	2	
TIKOSYN	3		ADZENYS XR-ODT	3	PA
timolol maleate oral	1		amphetamine er	3	PA
TOPROL XL	3		amphetamine sulfate	3	PA
torseamide	1		amphetamine-dextroamphetamine	1	
trandolapril	1		amphetamine-dextroamphetamine er	1	
trandolapril-verapamil hcl er	3				
triamterene oral	1				
triamterene-hctz	1				

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Drug Name	Drug Tier	Notes	Drug Name	Drug Tier	Notes
amphet-dextroamphet 3-bead er	3	PA; QL	methylphenidate hcl er (la) (generic Ritalin LA, generic Methylin LA)	1	QL
APTENSIO XR	3	PA; QL			
atomoxetine hcl	1		methylphenidate hcl er (osm) oral tablet extended release 18 mg, 27 mg, 36 mg, 54 mg, 72 mg (generic Concerta)	1	
AZSTARYS	3	PA			
clonidine hcl er	1				
CONCERTA	2				
COTEMPLA XR-ODT	3	PA; QL	METHYLPHENIDATE HCL ER (OSM) ORAL TABLET EXTENDED RELEASE 45 MG, 63 MG (authorized generic Relexxii ER)	3	
DAYTRANA	3	PA; QL			
DEXEDRINE	3				
dexmethylphenidate hcl	1				
dexmethylphenidate hcl er	1	QL	methylphenidate hcl er (xr) (generic Aptensio XR)	3	PA; QL
dextroamphetamine sulfate er	1		methylphenidate hcl er oral tablet extended release (generic Methylin)	1	
dextroamphetamine sulfate oral solution	3				
dextroamphetamine sulfate oral tablet 10 mg, 5 mg	1		methylphenidate hcl er oral tablet extended release 24 hour (generic Methylin)	1	QL
dextroamphetamine sulfate oral tablet 15 mg, 2.5 mg, 20 mg, 30 mg, 7.5 mg	3		methylphenidate hcl oral solution (generic Methylin)	3	
DYANAVEL XR	3	PA	methylphenidate hcl oral tablet (generic Ritalin)	1	
EVEKEO	3	PA	methylphenidate hcl oral tablet chewable (generic Methylin)	3	
FOCALIN	3				
FOCALIN XR	3	QL	MYDAYIS	3	PA; QL
guanfacine hcl er	1		ONYDA XR	3	PA
INTUNIV	3		PROCENTRA	3	
JORNAY PM	3	PA; QL	QELBREE	3	PA
lisdexamfetamine dimesylate	3	PA; QL	QUILLICHEW ER	3	PA
METADATE CD	3		QUILLIVANT XR	3	PA; QL
methamphetamine hcl	3		RELEXXII ORAL TABLET EXTENDED RELEASE 18 MG, 27 MG, 36 MG, 45 MG, 54 MG, 63 MG	3	PA
METHYLIN	3				
methylphenidate (generic Aptensio XR)	3	PA; QL	relexxii oral tablet extended release 72 mg	1	PA
methylphenidate hcl er (cd) (generic Metadate)	1		RITALIN	3	

Drug Name	Drug Tier	Notes	Drug Name	Drug Tier	Notes
RITALIN LA ORAL CAPSULE EXTENDED RELEASE 24 HOUR 10 MG	3	PA; QL	HORIZANT	3	
RITALIN LA ORAL CAPSULE EXTENDED RELEASE 24 HOUR 20 MG, 30 MG, 40 MG	3	QL	LYRICA	3	QL
VYVANSE	3	PA; QL	LYRICA CR	3	PA
XELSTRYM	3	PA	NUEDEXTA	3	PA
zenzedi oral tablet 10 mg, 5 mg	1		phentermine-topiramate er	3	PA
ZENZEDI ORAL TABLET 15 MG, 2.5 MG, 20 MG, 30 MG, 7.5 MG	3		pregabalin er	3	PA
Central Nervous System Agents - Drugs for Multiple Sclerosis			pregabalin oral	1	QL
AVONEX PEN	4	PA; QL	QSYMIA	3	PA
AVONEX PREFILLED	4	PA; QL	riluzole	1	QL
BETASERON	4	QL	SAVELLA	3	PA
dalfampridine er	1		SAVELLA TITRATION PACK	3	PA
dimethyl fumarate oral	1		ZEPBOUND	3	PA; QL
dimethyl fumarate starter pack	1		Dental and Oral Agents - Drugs for Mouth and Throat Conditions		
fingolimod hcl	1	QL	cevimeline hcl	3	
GILENYA ORAL CAPSULE 0.25 MG	4	PA; QL	chlorhexidine gluconate mouth/throat	1	
glatiramer acetate	4	QL	DEBACTEROL	3	
glatopa	4	QL	EVOXAC	3	
REBIF	4	PA; QL	FIRST-MOUTHWASH BLM	3	
REBIF REBIDOSE	4	PA; QL	kourzeq	1	
REBIF REBIDOSE TITRATION PACK	4	PA; QL	lidocaine hcl mouth/throat	3	
REBIF TITRATION PACK	4	PA; QL	lidocaine viscous hcl	1	
teriflunomide	1	QL	oralone	1	
Central Nervous System Agents - Miscellaneous			periogard	1	
caffeine citrate oral	1		pilocarpine hcl oral	1	
CAFFEINE-SODIUM BENZOATE	3		SALAGEN	3	
gabapentin (once-daily)	3		triamcinolone acetonide mouth/throat	1	
GRALISE	3		Dermatological Agents - Drugs for Skin Conditions		
			ABSORICA	3	
			ABSORICA LD	3	
			ACANYA	3	
			accutane	1	
			ACIOXIA	3	

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Drug Name	Drug Tier	Notes	Drug Name	Drug Tier	Notes
acitretin	1	QL	betamethasone dipropionate external	1	
ACZONE	3		betamethasone valerate external	1	
adapalene external cream	1		bp 10-1	3	
adapalene external gel	1		brimonidine tartrate external	3	
ADAPALENE EXTERNAL PAD	3		BRYHALI	3	
ADAPALENE EXTERNAL SOLUTION	3		CABTREO	3	PA
adapalene-benzoyl peroxide external gel	1		calcipotriene external cream	1	
ADAPALENE-BENZOYL PEROXIDE EXTERNAL PAD	3	PA	CALCIPOTRIENE EXTERNAL FOAM	3	
ADVANCED ALLERGY COLLECTION	3		calcipotriene external ointment	1	
AKLIEF	3	PA	calcipotriene external solution	1	
ALA SCALP	3		calcipotriene-betameth diprop	3	
ala-cort	3		calcitrene	1	
alclometasone dipropionate	1		calcitriol external	1	
ALTRENO	3		cem-urea	3	
amcinonide	3		claravis	1	
AMELUZ	2	QL	CLEOCIN-T	3	
ammonium lactate external	3		clindacin	3	
amnesteem	1		clindacin etz external swab	1	
AMZEEQ	3		clindacin-p	1	
ARAZLO	3		CLINDAGEL	3	
arzol silver nit applicators	3		clindamycin phos (once-daily)	1	
ATRALIN	3		clindamycin phos (twice-daily)	1	
avar cleanser	1		clindamycin phos-benzoyl perox external gel 1.2-2.5 %, 1.2-3.75 %	3	
AVAR LS CLEANSER	3		clindamycin phos-benzoyl perox external gel 1-5 %, 1.2-5 %	1	
AVAR-E EMOLLIENT	3		clindamycin phosphate external foam	3	
azelaic acid external	1				
AZELEX	2				
BENZAMYCIN	3				
benzoyl peroxide-erythromycin	1				
betamethasone dipropionate aug	1				

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Drug Name	Drug Tier	Notes	Drug Name	Drug Tier	Notes
clindamycin phosphate external lotion	1		DERMA-SMOOTH/FS BODY	3	
clindamycin phosphate external solution	1		DERMA-SMOOTH/FS SCALP	3	
clindamycin phosphate external swab	1		desonide external cream	1	
clindamycin-tretinoin	3		desonide external gel	3	
clobetasol prop emollient base	1		desonide external lotion	1	
clobetasol propionate e	1		desonide external ointment	1	
clobetasol propionate emulsion	3		desoximetasone external cream	1	
CLOBETASOL PROPIONATE EXTERNAL CREAM 0.025 %	3	PA	desoximetasone external gel	1	
clobetasol propionate external cream 0.05 %	1		desoximetasone external liquid	3	
clobetasol propionate external foam	1		desoximetasone external ointment	1	
clobetasol propionate external gel	1		diclofenac sodium external gel 3 %	1	
clobetasol propionate external liquid	1		DIFFERIN EXTERNAL CREAM	3	
clobetasol propionate external lotion	1		DIFFERIN EXTERNAL GEL 0.3 %	3	
clobetasol propionate external ointment	1		diflorasone diacetate	3	
clobetasol propionate external shampoo	1		DIPROLENE	3	
clobetasol propionate external solution	1		doxepin hcl external	3	
CLOBEX	3		doxycycline ER (generic Oracea)	3	PA
CLOBEX SPRAY	3		DRYSOL	2	
clocortolone pivalate	3		DYCLOPRO	3	
clodan	1		ENSTILAR	3	
CONDYLOX	3		EPIDUO	3	
CORDRAN	2		EPIDUO FORTE	3	
dapsone external	3		EPIFOAM	3	
DERMACINRX UREA	3		EPSOLAY	3	PA
DERMACURE	3		ERY PAD 2%	3	
			erythromycin external	1	
			EUCRISA	3	PA; QL
			FABIOR	3	
			FINACEA EXTERNAL FOAM	2	

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Drug Name	Drug Tier	Notes	Drug Name	Drug Tier	Notes
fluocinolone acetonide body	1		hydrocortisone butyrate external solution	1	
fluocinolone acetonide external	1		hydrocortisone external cream 1 %	3	
fluocinolone acetonide scalp	1		hydrocortisone external cream 2.5 %	1	
fluocinonide emulsified base	1		hydrocortisone external lotion 2 %	3	
fluocinonide external	1		hydrocortisone external lotion 2.5 %	1	
FLUOROURACIL EXTERNAL CREAM 0.5 %	3	PA	hydrocortisone external ointment 1 %, 2.5 %	1	
fluorouracil external cream 5 %	1		HYDROCORTISONE EXTERNAL SOLUTION	3	
fluorouracil external solution	1		hydrocortisone valerate	1	
flurandrenolide	3		imiquimod external cream 3.75 %	3	
fluticasone propionate external cream	1		imiquimod external cream 5 %	1	
fluticasone propionate external lotion	3		imiquimod pump	3	
fluticasone propionate external ointment	1		IMPOYZ	3	PA
halcinonide	3		isotretinoin oral	1	
halobetasol propionate external cream	1		ivermectin external cream	3	
halobetasol propionate external foam	3		KERALYT EXTERNAL GEL 6 %	3	
halobetasol propionate external ointment	1		KERALYT EXTERNAL SHAMPOO	3	
HALOG	3		KLARON	3	
HYDRO 40	3		lactic acid e	3	
hydrocortisone ace-pramoxine external cream 2.5-1 %	1		LEVULAN KERASTICK	2	QL
HYDROCORTISONE ACETATE EXTERNAL CREAM 2.5 %	3		LEXETTE	3	
hydrocortisone butyrate external cream	1		methoxsalen rapid	4	QL
hydrocortisone butyrate external lotion	3		METROCREAM	3	
hydrocortisone butyrate external ointment	1		METROGEL	3	
			metronidazole external cream	1	
			metronidazole external gel 0.75 %	1	
			metronidazole external gel 1 %	3	
			metronidazole external lotion	3	

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Drug Name	Drug Tier	Notes	Drug Name	Drug Tier	Notes
MICORT HC	3		salicylic acid external solution	3	
MIRVASO	3		salicylic acid wart remover	3	
mometasone furoate external	1		SALVAX	3	
NEO-SYNALAR	3		SALYCIM	3	
neuac	1		SANTYL	2	
NORITATE	3		selenium sulfide external lotion	1	
NUCORT	3		selenium sulfide external shampoo 2.25 %	3	
ONEXTON	3		SERNIVO	3	
ORACEA	3	PA	sodium sulfacetamide external shampoo 10 %	1	
OVACE PLUS	3		sodium sulfacetamide wash	3	
OVACE PLUS WASH	3		SOFDRA	3	PA
OVACE WASH	3		SOOLANTRA	3	
pimecrolimus cream 1 % external	1		SORILUX	3	
PIMECROLIMUS CREAM 1 % EXTERNAL	1		sss 10-5	3	
PLEXION	3		sulfacetamide sodium (acne)	1	
PLEXION CLEANSER	3		sulfacetamide sodium (cleans)	3	
PLEXION CLEANSING CLOTH	3		sulfacetamide sodium external	3	
PODOCON-25	3		sulfacetamide sodium-sulfur external cream	3	
podofilox external	1		sulfacetamide sodium-sulfur external emulsion	3	
PRAMOSONE EXTERNAL CREAM	2		sulfacetamide sodium-sulfur external liquid 10-2 %, 9-4 %, 9-4.5 %, 9.8-4.8 %	3	
PRAMOSONE EXTERNAL LOTION	2		sulfacetamide sodium-sulfur external liquid 10-5 %	1	
PRUDOXIN	3		sulfacetamide sodium-sulfur external lotion 10-5 %	1	
PYROGALLIC ACID	3		sulfacetamide sodium-sulfur external lotion 9.8-4.8 %	3	
QBREXZA	3	PA; QL			
RETIN-A	1				
RETIN-A MICRO EXTERNAL GEL 0.04 %, 0.1 %	3				
RETIN-A MICRO PUMP	3				
RHOFADE	3				
salicylic acid external gel 6 %	3				
salicylic acid external shampoo	3				

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Drug Name	Drug Tier	Notes	Drug Name	Drug Tier	Notes
sulfacetamide sodium-sulfur external suspension 10-5 %, 8-4 %	3		TRETINOIN MICROSPHERE PUMP EXTERNAL GEL 0.04 %, 0.1 %	1	
sulfacetamide sod-sulfur wash	3		tretinoin microsphere pump external gel 0.08 %	3	
sulfacetamide-sulfur in urea	1		triamcinolone acetonide external aerosol solution	3	
sulfaceanse 8/4	3		triamcinolone acetonide external cream	1	
SUMAXIN	3		triamcinolone acetonide external lotion	1	
synalar	1		triamcinolone acetonide external ointment 0.025 %, 0.1 %, 0.5 %	1	
TACLONEX	3		triamcinolone acetonide external ointment 0.05 %	3	
tacrolimus external	1		triamcinolone in absorbbase	3	
tazarotene external cream	1		triderm	1	
TAZAROTENE EXTERNAL FOAM	3		TWYNEO	3	PA
tazarotene external gel	1		ULTRAVATE	3	
TAZORAC EXTERNAL CREAM 0.05 %	1		URAMAXIN	3	
TAZORAC EXTERNAL CREAM 0.1 %	3		urea external cream 39 %, 41 %	3	
TAZORAC EXTERNAL GEL	3		urea external cream 40 %	1	
TELIORA	3		VANOS	3	
TEXACORT	3		VANOXIDE-HC	3	
TOLAK	3	PA	VECTICAL	1	
TOPICORT	3		VEREGEN	3	
TOPICORT SPRAY	3		VIRASAL	3	
tovet	3		WINLEVI	3	PA
tretinoin external cream	1		XALIX	3	
tretinoin external gel 0.01 %, 0.025 %	1		xurea	3	
tretinoin external gel 0.05 %	3		ZACLIR CLEANSING	3	
TRETINOIN MICROSPHERE EXTERNAL GEL 0.04 %, 0.1 %	1		zenatane	1	
tretinoin microsphere external gel 0.08 %	3		ZIANA	3	
			ZITHRANOL	3	
			ZONALON	3	
			ZORYVE	3	PA
			ZYCLARA	3	

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Drug Name	Drug Tier	Notes	Drug Name	Drug Tier	Notes
ZYCLARA PUMP	3		JANUVIA	3	PA
Diabetes - Antidiabetic Agents			JARDIANCE	2	QL
acarbose oral	1		JENTADUETO	3	PA
ACTOPLUS MET	3		JENTADUETO XR	3	PA
ACTOS	3		liraglutide	1	PA; QL
ALOGLIPTIN BENZOATE	3	PA	metformin hcl er	1	
ALOGLIPTIN-METFORMIN HCL	3	PA	metformin hcl er (mod)	3	PA
ALOGLIPTIN-PIOGLITAZONE	3	PA	metformin hcl er (osm) oral tablet extended release 24 hour 1000 mg	3	PA
BEXAGLIFLOZIN	3	PA	metformin hcl er (osm) oral tablet extended release 24 hour 500 mg	3	
BRENZAVVY	3	PA	metformin hcl oral solution	1	
CYCLOSET	3	PA	metformin hcl oral tablet 1000 mg, 500 mg, 850 mg	1	
DAPAGLIFLOZIN PRO-METFORMIN ER	3	PA; QL	miglitol	3	PA
DAPAGLIFLOZIN PROPANEDIOL	3	QL	MOUNJARO	3	PA; QL
DUETACT	3		nateglinide	1	
EXENATIDE	3	PA; QL	ONGLYZA	3	PA
FARXIGA	3	QL	OZEMPIC	2	PA; QL
glimepiride oral tablet 1 mg, 2 mg, 4 mg	1		pioglitazone hcl	1	
glimepiride oral tablet 3 mg	3	PA	pioglitazone hcl-glimepiride	3	
glipizide er	1		pioglitazone hcl-metformin hcl	3	
glipizide oral tablet 10 mg, 5 mg	1		repaglinide	1	
glipizide oral tablet 2.5 mg	3	PA	RIOMET	3	
glipizide-metformin hcl	1		RYBELSUS	3	PA; QL
GLUCOTROL XL	3		saxagliptin hcl	3	PA
glyburide	1		saxagliptin-metformin er	3	PA
glyburide micronized oral tablet 1.5 mg, 3 mg, 6 mg	3		SEGLUROMET	3	PA; QL
glyburide-metformin	3		SITAGLIPT BASE-METFORM HCL ER	3	PA
GLYXAMBI	3	PA; QL	SITAGLIPTIN	2	
INVOKAMET	3	PA; QL	SITAGLIPTIN BASE-METFORMIN HCL	3	PA
INVOKAMET XR	3	PA; QL	SOLIQUA	3	PA; QL
INVOKANA	3	PA; QL	STEGLATRO	3	PA; QL
JANUMET	3	PA			
JANUMET XR	3	PA			

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Drug Name	Drug Tier	Notes	Drug Name	Drug Tier	Notes
STEGLUJAN	3	PA; QL	AUTOLET LITE	1	
SYNJARDY	3	PA; QL	LANCING DEVICE		
SYNJARDY XR	3	PA; QL	BLULINK CONTROL	1	
TRADJENTA	3	PA	HIGH & LOW		
TRIJARDY XR	3	PA; QL	CARESENS CONTROL	1	
TRULICITY	3	PA; QL	SOLUTION A/B		
VICTOZA	3	PA; QL	CARESENS LANCETS	1	
XIGDUO XR	3	PA; QL	30G		
XULTOPHY	3	PA; QL	CARESENS S CONTROL	1	
ZITUVIMET	3	PA	SOLN A/B		
ZITUVIMET XR	3	PA	CARETOUCH CONTROL	1	
ZITUVIO	3	PA	SOL LEVEL 2		
Diabetes - Glucose Monitoring			CARETOUCH	1	
			LANCING/EJECTOR		
			CHEMSTRIP 10 MD	2	
			CHEMSTRIP 10/SG	2	
ACCU-CHEK FASTCLIX	1		CHEMSTRIP 2 GP	2	
LANCET KIT			CHEMSTRIP 5 OB	2	
ACCU-CHEK GUIDE	1		CHEMSTRIP 7	2	
CONTROL			CHEMSTRIP 9	2	
ACCU-CHEK GUIDE	1	PA; QL	CHOSEN LANCETS 30G	1	
TEST STRIPS			CHOSEN LANCING	1	
ACCU-CHEK	1		DEVICE		
SMARTVIEW CONTROL			CHOSEN SAFETY	1	
ACCU-CHEK SOFTCLIX	1		LANCETS 28G		
LANCET DEVICE KIT			CLEVER CHOICE	1	
ADVANTAGE SAFETY	1		COMFORT EZ		
LANCETS 28G			COMFORT TOUCH	1	
ADVOCATE SAFETY	1		TWIST LANCET 30G		
LANCETS 21G			CONTOUR CONTROL	1	
ADVOCATE SAFETY	1		SOLUTION		
LANCETS 23G			CONTOUR NEXT	1	
ADVOCATE SAFETY	1		CONTROL SOLUTION		
LANCETS 28G			CONTOUR NEXT GEN	1	PA; QL
AGAMATRIX CONTROL	1		TEST STRIPS		
LEVEL 2			CONTOUR PLUS	1	
AGAMATRIX CONTROL	1		CONTROL SOLUTION		
LEVEL 4			DIASTIX REAGENT	3	
ASSURE CONTROL	1		DIATHRIVE GLUCOSE	1	
SOLUTION 2/3			CONTROL SOLN		
AUTOLET II CLINISAFE	1		DIATHRIVE LANCING	1	
AUTOLET LANCING	1		DEVICE		
DEVICE					

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Drug Name	Drug Tier	Notes	Drug Name	Drug Tier	Notes
DROPLET GENTEEL LANCING DEVICE	1		MICROLET NEXT LANCING DEVICE	1	
DROPSAFE ACTI-LANCE 23G	1		MOBILE LANCETS 30G	1	
DROPSAFE MEDLANCE LANCET 30G	1		ONETOUCH DELICA PLUS LANCING	1	
EASY TALK PLUS II CONTROL	1		ONETOUCH DELICA SAFETY LANCING	1	
EASY TOUCH HEALTHPRO HIGH/LOW	1		ONETOUCH ULTRA 2 KIT W/DEVICE	1	
EASY TOUCH LANCING DEVICE	1		ONETOUCH ULTRA BLUE TEST	1	QL
EASY TRAK II CONTROL	1		ONETOUCH ULTRA IN VITRO LIQUID	1	
EASYMAX 15 LEVEL 2-3 CONTROL	1		ONETOUCH ULTRA IN VITRO STRIP	1	QL
EASYMAX CONTROL	1		ONETOUCH ULTRA TEST STRIPS	1	QL
GLUCOSE CONTROL SOLUTIONS	1		ONETOUCH VERIO FLEX SYSTEM KIT	1	
EMBRACE LANCING DEVICE/EJECTOR	1		ONETOUCH VERIO IN VITRO LIQUID HIGH	1	
EMBRACE TALK GLUCOSE CONTROL	1		ONETOUCH VERIO TEST STRIPS	1	QL
FONDCIRCLE CONTROL SOLUTION	1		ONETOUCH VERIO REFLECT KIT W/DEVICE	1	
FONDCIRCLE LANCING DEVICE	1		PERFECT POINT SAFETY LANCETS	1	
FONDCIRCLE SINGLE USE LANCETS	1		PIP GLUCOSE CONTROL SOLUTION	1	
FREESTYLE TEST STRIPS	1	PA; QL	PRODIGY NO CODING BLOOD GLUC IN VITRO	1	PA; QL
GENTEEL LANCING KIT (BLUE)	1		SENSILANCE SAFETY LANCETS 21G	1	
GOJJI CONTROL	1		SENSILANCE SAFETY LANCETS 26G	1	
GOJJI LANCING DEVICE/CLEAR CAP	1		SENSILANCE SAFETY LANCETS 28G	1	
IHEALTH CONTROL SOLUTION	1		TECHLITE LANCETS 26G	1	
IHEALTH LANCING DEVICE	1		TRUE METRIX LEVEL 1	1	
LANCETS	1		TRUE METRIX LEVEL 2	1	
LANCETS 28G THIN	1		TRUE METRIX LEVEL 3	1	
LANCETS SUPER THIN	1				

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Drug Name	Drug Tier	Notes	Drug Name	Drug Tier	Notes
UNISTRIP CONTROL IN VITRO SOLUTION LOW	1		BD ULTRA-FINE INSULIN SYRINGES 27G X 1/2" 1 ML, 29G X 1/2" 0.3 ML, 29G X 1/2" 0.5 ML, 29G X 1/2" 1 ML, 30G X 1/2" 0.3 ML, 30G X 1/2" 0.5 ML, 30G X 1/2" 1 ML, 31G X 15/64" 0.3 ML, 31G X 5/16" 0.3 ML, 31G X 5/16" 0.5 ML, 31G X 5/16" 1 ML, 31G X 6MM 0.5 ML	1	
VERIFINE SAFE LANCET MINI 21G	1				
VERIFINE SAFE LANCET MINI 23G	1				
VERIFINE SAFE LANCET MINI 28G	1				
VERIFINE SAFE LANCET MINI 30G	1				
VIVAGUARD INO CONTROL SOLUTION	1		BD VEO INSULIN SYR ULTRAFINE	1	
VIVAGUARD LANCETS 30G	1		DROPSAFE SAFETY SYRINGE/NEEDLE	1	
VIVAGUARD LANCING DEVICE	1		EMBECTA INS SYR U/F 1/2 UNIT	1	
VIVAGUARD SAFETY LANCETS 28G	1		EMBECTA INSULIN SYR ULTRAFINE	1	
Diabetes - Glycemic Agents			EMBECTA INSULIN SYRINGE	1	
BAQSIMI ONE PACK	2		EMBECTA INSULIN SYRINGE U-100	1	
BAQSIMI TWO PACK	2		EMBECTA INSULIN SYRINGE U-500	1	
diazoxide oral	2		FIASP	3	
glucagon emergency kit injection solution reconstituted 1 mg	1		FIASP FLEXTOUCH	3	
GLUCAGON EMERGENCY KIT	2		FIASP PENFILL	3	
PROGLYCEM	3		FIASP PUMPCART	3	
Diabetes - Insulins			HUMALOG	2	
ADMELOG	3		HUMALOG KWIKPEN	2	
ADMELOG SOLOSTAR	3		HUMALOG MIX 50/50 KWIKPEN	3	
AFREZZA	3	PA	HUMALOG MIX 75/25 KWIKPEN	3	
APIDRA SOLOSTAR	3		HUMALOG MIX 75/25 VIAL	3	
APIDRA VIAL	3		HUMALOG U-100 JUNIOR KWIKPEN	2	
AQ INSULIN SYRINGE	1		HUMULIN 70/30 KWIKPEN	2	
BASAGLAR KWIKPEN	3	PA	HUMULIN 70/30 VIAL	2	
			HUMULIN N KWIKPEN	2	

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

Drug Name	Drug Tier	Notes	Drug Name	Drug Tier	Notes
NOVOLOG FLEXPEN	3		cvs prenatal		++
NOVOLOG FLEXPEN RELION	3		cvs prenatal gummy oral tablet chewable 0.4-113.5 mg		++
NOVOLOG MIX 70/30 FLEXPEN	3		cvs prenatal multi+dha		++
NOVOLOG MIX 70/30 RELION	3		cvs prenatal multivitamin		++
NOVOLOG MIX 70/30 VIAL	3		cvs slow release dried iron		++
NOVOLOG PENFILL	3		slow release iron		++
NOVOLOG RELION	3		cyanocobalamin injection solution 1000 mcg/ml	1	
NOVOLOG U-100 VIAL	3		cytra k crystals	1	
REZVOGLAR KWIKPEN	2		deferasirox granules	4	QL
SEMGLEE (YFGN)	3	PA	deferasirox oral packet	4	QL
TOUJEO MAX SOLOSTAR	3	PA	deferasirox oral tablet	1	
TOUJEO SOLOSTAR	3	PA	deferasirox oral tablet soluble	1	
TRESIBA	2	PA	DRISDOL	3	
TRESIBA FLEXTOUCH	2	PA	EFFER-K ORAL TABLET EFFERVESCENT 10 MEQ, 20 MEQ	3	
ULTIGUARD SAFEPAK SYR/NEEDLE	1		effer-k oral tablet effervescent 25 meq	3	
VERIFINE INSULIN SYRINGE	1		ENFAMIL EXPECTA		++
Electrolytes / Minerals / Metals / Vitamins			eq slow-release iron		++
ACCRUFER	3	PA	eql carbonyl iron		++
ARGYLE STERILE SALINE	1		eql iron supplement therapy		++
argyle sterile water	3		eql prenatal formula		++
ATABEX		++	eql slow release iron		++
BPROTECTED PEDIA IRON		++	ergocalciferol oral capsule	1	
CARNITOR ORAL	3		EZFE 200		++
CARNITOR SF	3		fa-8		++
CENTRUM SPECIALIST PRENATAL		++	FEOSOL		++
CHEMET	3		FEOSOL NATURAL RELEASE		++
classic prenatal		++	ferate		++
curity sterile saline	1		FERGON		++
cvs folic acid		++	FER-IN-SOL		++
cvs iron		++	ferosul		++

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Drug Name	Drug Tier	Notes	Drug Name	Drug Tier	Notes
ferretts		++	ICAR		++
ferretts chewable iron		++	iferex 150		++
ferretts ips oral solution		++	iodine strong	3	
ferrex 150 capsule 150 mg oral		++	iron (ferrous sulfat		++
FERREX 150 CAPSULE 150 MG ORAL		++	iron 27		++
FERRIC X-150		++	iron chews pediatric		++
FERRIMIN 150		++	iron high-potency		++
FERRIPROX ORAL SOLUTION	3	PA; QL	iron infant & toddler		++
ferrocite		++	iron infant/toddler		++
ferrotabs		++	iron oral tablet		++
ferrous fumarate oral		++	iron slow release		++
ferrous gluconate oral		++	iron supplement		++
ferrous sulfate er		++	IRON UP		++
ferrous sulfate oral		++	KIONEX	3	
fe-vite iron		++	klor-con	1	
folate		++	klor-con 10	1	
folic acid injection	1		klor-con m10	1	
folic acid oral capsule 0.8 mg		++	klor-con m15	2	
folic acid oral tablet 1 mg	1		klor-con m20	1	
folic acid oral tablet 400 mcg, 800 mcg		++	kp ferrous gluconate		++
FOLVITE-D	3		kp ferrous sulfate		++
ft folic acid		++	kp folic acid oral tablet 800 mcg		++
ft iron		++	kp prenatal multivitamins		++
ft iron slow release		++	K-PHOS	3	
ft prenatal		++	K-PHOS NO 2	3	
gnp folic acid		++	K-PHOS-NEUTRAL	3	
gnp iron		++	levocarnitine oral solution	1	
gnp prenatal		++	levocarnitine oral tablet	1	
gnp prenatal/folic acid		++	levocarnitine sf	1	
goodsense iron		++	LOKELMA	3	PA
HEALTHY MAMA BE WELL ROUNDED		++	MASONATAL		++
high potency iron oral capsule		++	meijer ferrous sulfat		++
			multi prenatal		++
			nat-rul iron		++
			NEONATAL PRENATAL		++

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Drug Name	Drug Tier	Notes	Drug Name	Drug Tier	Notes
NEONATAL VITAMIN		++	potassium chloride er oral tablet extended release 15 meq	3	
NOVAFERRUM 50		++	potassium chloride oral packet 20 meq	1	
NOVAFERRUM PEDIATRIC DROPS		++	potassium chloride oral solution	1	
NU-IRON		++	potassium citrate er	1	
ONE VITE FERROUS SULFATE		++	potassium citrate-citric acid	1	
ONE VITE WOMENS		++	prenatal (w/iron & fa)		++
ONE-A-DAY WOMENS PRENATAL 1 ORAL CAPSULE 28-0.8-235 MG		++	prenatal complete oral tablet		++
ORACIT	2		prenatal formula		++
ORAL CITRATE ORAL SOLUTION 490-640 MG/5ML	2		prenatal forte		++
pc pediatric iron drops		++	prenatal multi +dha oral capsule 27-0.8-228 mg, 27-0.8-250 mg		++
phospha 250 neutral	1		prenatal multivit plus folate		++
phosphorous	1		PRENATAL MULTIVITAMIN + DHA		++
phospho-trin 250 neutral	1		prenatal multivitamin plus dha		++
PHOSPHO-TRIN K500	3		prenatal one daily		++
PHOXILLUM B22K4/0	3		prenatal oral tablet 27-0.8 mg, 28-0.8 mg		++
PHOXILLUM BK4/2.5	3		prenatal vitamin and mineral		++
phytonadione injection	1		prenatal vitamins		++
phytonadione oral	1		prenatal/iron		++
poly-iron 150		++	PROFE		++
polysaccharide iron complex		++	PROFERRIN ES		++
polysaccharide-iron complex		++	qc ferrous sulfate		++
pot & sod cit-cit ac	1		qc folic acid		++
potassium chloride crys er oral tablet extended release 10 meq, 20 meq	1		qc prenatal		++
potassium chloride crys er oral tablet extended release 15 meq	2		SIMILAC PRENATAL EARLY SHIELD		++
potassium chloride er oral capsule extended release	1		SLOW FE		++
potassium chloride er oral tablet extended release 10 meq, 20 meq, 8 meq	1		slow iron		++
			slow release iron		++

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Drug Name	Drug Tier	Notes	Drug Name	Drug Tier	Notes
sod citrate-citric acid	1		Gastrointestinal Agents - Drugs for Acid Reflux and Ulcer		
sodium chloride (pf)	1		ACIPHEX	3	PA
SODIUM CHLORIDE INJECTION SOLUTION 0.9 %	3		CARAFATE	3	
sodium chloride irrigation	1		cimetidine hcl	1	
sodium citrate-citric acid	1		cimetidine oral	1	
sodium fluoride oral solution 0.5 mg/ml		++	CYTOTEC	3	
sodium fluoride oral solution 1.1 (0.5 f) mg/ml	1	++	DEXILANT	3	PA
sodium fluoride oral tablet 1.1 (0.5 f) mg	1	++	dexlansoprazole	3	PA
sodium fluoride oral tablet 2.2 (1 f) mg	3	++	esomeprazole magnesium oral packet	3	PA
sodium fluoride oral tablet chewable	1	++	famotidine oral suspension reconstituted	1	
sodium polystyrene sulfonate	1		famotidine oral tablet 20 mg, 40 mg	1	
sps (sodium polystyrene sulf)	1		FIRST-LANSOPRAZOLE	3	
sterile water for irrigation	3		KONVOMEF	3	PA
STUART ONE		++	lansoprazole oral capsule delayed release	1	
sv iron		++	lansoprazole oral tablet delayed release dispersible	3	PA
tricitrates	1		misoprostol oral	1	
TRUE FERROUS SULFATE		++	NEXIUM ORAL PACKET	3	PA
TRUE FOLIC ACID ORAL TABLET 400 MCG		++	nizatidine	3	
UROCIT-K 10	3		omeprazole oral capsule delayed release	1	
UROCIT-K 15	3		omeprazole-sodium bicarbonate oral packet	3	PA
VELTASSA	3	PA	pantoprazole sodium oral packet	3	
vitamin d (ergocalciferol) oral capsule 1.25 mg (50000 ut)	1		pantoprazole sodium oral tablet delayed release	1	
vitamin k1 injection	1		PEPCID	3	
water for irrigation, sterile	3		PREVACID	3	
wee care		++	PREVACID SOLUTAB	3	PA
yl folic acid		++	PRILOSEC	3	
ZYCUBO	3		PROTONIX ORAL	3	
			rabeprazole sodium oral tablet delayed release	1	ST
			RANITIDINE HCL	3	

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Drug Name	Drug Tier	Notes	Drug Name	Drug Tier	Notes
sucralfate oral	1		GASTROCROM	3	
VOQUEZNA	3	PA; QL	gavilax oral powder		++
Gastrointestinal Agents - Drugs for Bowel, Intestine and Stomach Conditions			gavilyte-c	1	++
AMITIZA	3	PA; QL	gavilyte-g	1	++
amoxicill-clarithro-lansopraz	3		gavilyte-n with flavor pack	1	++
belladonna alkaloids-opium	1	QL	generlac	1	
bis subcit-metronid-tetracyc	3	PA	GLYCATE	3	
bismuth/metronidaz/tetracyclin	3	PA	glycolax		++
chlordiazepoxide-clidinium	1	QL	glycopyrrolate injection solution	1	
citrate of magnesia		++	glycopyrrolate oral solution	3	
citroma		++	glycopyrrolate oral tablet 1 mg, 2 mg	1	
clearlax		++	GLYCOPYRROLATE ORAL TABLET 1.5 MG	3	
CLENPIQ	3		gnp clearlax oral powder		++
constulose	1		gnp magnesium citrate		++
cromolyn sodium oral	3		GOLYTELY	3	
CUVPOSA	3		goodsense clearlax		++
cvs magnesium citrate		++	goodsense magnesium citrate		++
cvs purelax oral powder		++	hyoscyamine sulfate er	1	
dicyclomine hcl intramuscular	3		hyoscyamine sulfate injection	3	
dicyclomine hcl oral capsule	1		hyoscyamine sulfate oral	1	
dicyclomine hcl oral solution 10 mg/5ml	1		hyoscyamine sulfate sl	1	
dicyclomine hcl oral tablet 20 mg	1		hyoscyamine sulfate sublingual	1	
diphenoxylate-atropine	1		hyosyne	1	
enulose	1		kls laxaclear		++
eq clearlax		++	KRISTALOSE	3	
eq magnesium citrate		++	lactulose encephalopathy	1	
eql clearlax		++	lactulose oral packet	3	
eql magnesium citrate		++	lactulose oral solution	1	
ft clearlax		++	LEVBIID	3	
ft magnesium citrate		++	LEVSIN	3	
		++	LEVSIN/SL	3	
		++	LIBRAX	3	QL

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Drug Name	Drug Tier	Notes	Drug Name	Drug Tier	Notes
LINZESS ORAL CAPSULE 145 MCG, 290 MCG	3	PA; QL	polyethylene glycol 3350-grx oral powder		++
LINZESS ORAL CAPSULE 72 MCG	3	PA	prucalopride succinate	3	PA; QL
LOMOTIL	3		PYLERA	3	PA
loperamide hcl oral capsule	1		qc magnesium citrate		++
lubiprostone	3	PA; QL	RELISTOR ORAL	3	PA; QL
magnesium citrate oral solution		++	RELISTOR SUBCUTANEOUS	2	PA
methscopolamine bromide oral	3		sb magnesium citrate		++
mm clearlax		++	sb polyethylene glycol 3350		++
MOTEGRITY	3	PA; QL	smooth lax oral powder		++
MOTOFEN	3		SUFLAVE	3	
MOVANTIK	3	PA; QL	SUPREP BOWEL PREP KIT	3	
MOVIPREP	3		SUTAB	3	
MYTESI	3		SYMPROIC	3	PA; QL
na sulfate-k sulfate-mg sulf solution 17.5-3.13-1.6 gm/177ml oral	1		TALICIA	3	
na sulfate-k sulfate-mg sulf solution 17.5-3.13-1.6 gm/177ml oral	3		TRULANCE	3	PA; QL
nulev	1		URSO FORTE	3	
opium	1	QL	ursodiol oral capsule 300 mg	1	
oscimin	1		ursodiol oral tablet	1	
peg 3350 oral powder		++	VIBERZI	3	PA
peg 3350-kcl-na bicarb-nacl	1	++	VOQUEZNA DUAL PAK	3	PA; QL
peg-3350/electrolytes	1	++	VOQUEZNA TRIPLE PAK	3	PA; QL
peg-3350/electrolytes/ascorbate	3		Genetic or Enzyme Disorder - Drugs for Replacement, Modification, Treatment		
peg-kcl-nacl-nasulf-na asc-c	3		betaine	3	
PEG-PREP	3		CERDELGA	4	PA; QL
PLENVU	3		CREON	2	
polyethylene glycol 3350 oral powder		++	CYSTADANE	3	
			CYSTAGON	2	PA
			OPFOLDA	3	PA
			PANCREAZE	3	
			PERTZYE	3	
			VIKACE	3	
			ZENPEP	2	

Drug Name	Drug Tier	Notes	Drug Name	Drug Tier	Notes
Genitourinary Agents - Drugs for Bladder, Genital and Kidney Conditions			phenazopyridine hcl oral tablet 100 mg, 200 mg	1	
acetic acid irrigation	1		PREPIDIL	2	
AURYXIA	3	PA; QL	PYRIDIUM	3	
bethanechol chloride oral	1		RENACIDIN	3	
calcium acetate (phos binder)	1		REVELA	3	
calcium acetate oral tablet 667 mg	1		RIMSO-50	3	
CERVIDIL	2		sevelamer carbonate	1	
CIALIS ORAL TABLET 5 MG	3	PA	sevelamer hcl	1	PA
darifenacin hydrobromide er	1		solifenacin succinate	1	
ELMIRON	2		tadalafil oral tablet 2.5 mg, 5 mg	1	PA
FEM PH	3		tolterodine tartrate	1	
FERRIC CITRATE	3	PA; QL	tolterodine tartrate er	1	
fesoterodine fumarate er	3	PA	TOVIAZ	3	PA
flavoxate hcl	1		tropium chloride	1	
GEMTESA	3	PA	tropium chloride er	1	
INTRAROSA	3	PA; QL	urelle	3	
LITHOSTAT	3		uretron d/s	3	
MB CAPS	3		URIBEL	3	
me/naphos/mb/hyo1	3		URIMAR-T	3	
mirabegron er	1		UROGESIC-BLUE	3	
MYRBETRIQ	3		uro-mp	3	
oxybutynin chloride er	1		VESICARE	3	
oxybutynin chloride oral tablet 2.5 mg	3		vilamit mb	3	
oxybutynin chloride oral tablet 5 mg	1		VILEVEV MB	3	
oxybutynin chloride solution 5 mg/5ml oral	1		Genitourinary Agents - Drugs for Prostate Conditions		
OXYBUTYNIN CHLORIDE SOLUTION 5 MG/5ML ORAL	3	PA	alfuzosin hcl er	1	
OXYTROL	3	PA	AVODART	3	
penicillamine oral	4	PA; QL	CARDURA XL	3	
PENTOSAN POLYSULFATE SODIUM ORAL	2		dutasteride oral	1	
			dutasteride-tamsulosin hcl	3	
			ENTADFI	3	PA
			finasteride oral tablet 5 mg	1	
			JALYN	3	
			PROSCAR	3	

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Drug Name	Drug Tier	Notes	Drug Name	Drug Tier	Notes
RAPAFLO	3		DEXAMETHASONE SODIUM PHOSPHATE SOLUTION 10 MG/ML INJECTION	3	
silodosin	1		dexamethasone sodium phosphate solution 10 mg/ml injection	1	
tamsulosin hcl	1		DEXAMETHASONE SODIUM PHOSPHATE SOLUTION 4 MG/ML INJECTION	3	
terazosin hcl	1		dexamethasone sodium phosphate solution 4 mg/ml injection	1	
TEZRULY	3	PA	DEXONTO 0.4%	3	
UROXATRAL	3		fludrocortisone acetate oral	1	
Hormonal Agents - Adrenal			HEMADY	3	PA
BETAMETHASONE SODIUM PHOSPHATE INJECTION	3		HIDEX 6-DAY	3	
CORTEF	3		hydrocortisone oral	1	
CORTISONE ACETATE ORAL	3		hydrocortisone sod suc (pf)	1	
DEPO-MEDROL INJECTION SUSPENSION 20 MG/ML	2		IONTOSONE 0.4%	3	
DEPO-MEDROL INJECTION SUSPENSION 40 MG/ML, 80 MG/ML	3		KENALOG-10	3	
DEXAMETHASONE (LA)	3		KENALOG-40	3	
DEXAMETHASONE ACETATE INJECTION	3		KHINDIVI	3	PA
dexamethasone intensol	2		MEDROL ORAL TABLET 16 MG, 4 MG, 8 MG	3	
dexamethasone oral elixir	1		MEDROL ORAL TABLET 2 MG	2	
dexamethasone oral solution	1		MEDROL ORAL TABLET THERAPY PACK	3	
dexamethasone oral tablet	1		METHYLPREDNISOLONE ACE-LIDO	3	
dexamethasone oral tablet therapy pack	3		METHYLPREDNISOLONE ACETATE INJECTION SUSPENSION 40 MG/ML, 80 MG/ML	3	
dexamethasone sod phos +rfid	1		methylprednisolone oral	1	
dexamethasone sod phosphate pf	1		methylprednisolone sodium succ injection solution reconstituted 125 mg	1	
dexamethasone sodium phosphate injection solution 100 mg/10ml, 120 mg/30ml, 20 mg/5ml	1		ORAPRED ODT	3	
dexamethasone sodium phosphate injection solution pre-filled syringe 4 mg/ml	1				

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Drug Name	Drug Tier	Notes	Drug Name	Drug Tier	Notes
prednisolone oral solution	1		TRIAMCINOLONE ACETONIDE SUSPENSION 40 MG/ML INJECTION	3	
prednisolone oral tablet	3		TRIAMCINOLONE DIACETATE INJECTION	3	
prednisolone sodium phosphate oral solution 10 mg/5ml, 20 mg/5ml	3		Hormonal Agents - Men's Health		
prednisolone sodium phosphate oral solution 15 mg/5ml, 25 mg/5ml, 5 mg/5ml	1		ANDROGEL PUMP	3	QL
prednisolone sodium phosphate oral tablet dispersible	3		danazol oral	1	
prednisone intensol	3		DEPO-TESTOSTERONE (brand testosterone cypionate intramuscular)	1	
prednisone oral solution	1		JATENZO	3	PA
prednisone oral tablet	1		KYZATREX	3	PA
PREDNISONE ORAL TABLET DELAYED RELEASE	3	PA	METHITEST	3	PA
prednisone oral tablet therapy pack	1		methyltestosterone oral	3	PA
SOLU-CORTEF INJECTION SOLUTION RECONSTITUTED 100 MG	1		NATESTO	3	PA; QL
SOLU-CORTEF INJECTION SOLUTION RECONSTITUTED 1000 MG, 250 MG, 500 MG	2		TESTIM	3	QL
SOLU-MEDROL (PF) INJECTION SOLUTION RECONSTITUTED 125 MG	3		TESTONE CIK	3	
TAPERDEX 12-DAY	3		TESTOSTERONE CYPIONATE INJECTION	1	
TAPERDEX 6-DAY	3		testosterone cypionate intramuscular	1	
TAPERDEX 7-DAY	3		testosterone enanthate intramuscular	1	
triamcinolone acetonide injection suspension 10 mg/ml	3		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
TRIAMCINOLONE ACETONIDE INJECTION SUSPENSION 50 MG/ML	3		testosterone transdermal gel 20.25 mg/1.25gm (1.62%), 40.5 mg/2.5gm (1.62%)	3	PA; QL
triamcinolone acetonide suspension 40 mg/ml injection	3		testosterone transdermal solution	3	PA; QL
			TLANDO	3	PA
			VOGELXO	3	QL
			VOGELXO PUMP	3	QL
			XYOSTED	3	PA
			Hormonal Agents - Pituitary		
			ACTHAR	4	PA; QL
			ACTHAR GEL	4	PA; QL

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Drug Name	Drug Tier	Notes	Drug Name	Drug Tier	Notes
cabergoline	1		OMNITROPE	4	PA; QL
CORTROPHIN	4	PA; QL	OXYTOCIN INJECTION	3	
CORTROPHIN GEL	4	PA; QL	SANDOSTATIN	3	PA
DDAVP	3		SANDOSTATIN LAR DEPOT	2	QL
DDAVP PF	3		SYNAREL	3	QL
desmopressin ace spray refrig	1		VABRINTY SUBCUTANEOUS KIT 30 MG	2	
desmopressin acetate injection	1		Hormonal Agents - Prostaglandins		
DESMOPRESSIN ACETATE NASAL	2		MIFEPREX	1	
desmopressin acetate oral	1		mifepristone oral tablet 200 mg	1	
desmopressin acetate pf	1		Hormonal Agents - Selective Estrogen Receptor Modifying Agents		
desmopressin acetate spray	1		EVISTA	3	
ELIGARD	2		OSPHEHA	3	PA
leuprolide acetate injection	1		raloxifene hcl	1	++
LUPRON DEPOT (1- MONTH)	2		Hormonal Agents - Sex Hormones and Birth Control		
LUPRON DEPOT (3- MONTH)	2		abigale	1	
LUPRON DEPOT (4- MONTH) INTRAMUSCULAR KIT 30MG	2		abigale lo	1	
LUPRON DEPOT (6- MONTH) INTRAMUSCULAR KIT 45MG	2		ACTIVELLA	3	
LUPRON DEPOT-PED (1-MONTH)	2		afirmelle	1	++
LUPRON DEPOT-PED (3-MONTH)	2		aftera	1	++
octreotide acetate injection	1		AFTERPILL	1	
octreotide acetate intramuscular kit 10 mg	2	QL	ALORA	3	
octreotide acetate intramuscular kit 20 mg, 30 mg	1	QL	altavera	1	++
octreotide acetate subcutaneous	1		alyacen 1/35	1	++
			alyacen 7/7/7	1	++
			amethyst	1	++
			ANGELIQ	3	
			ANNOVERA	3	++
			apri	1	++
			aranelle	1	++
			ashlyna	1	++
			aubra eq	1	++
			aurovela 1.5/30	1	++
			aurovela 1/20	1	++

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

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Drug Name	Drug Tier	Notes	Drug Name	Drug Tier	Notes
ESTRATEST H.S.	3		joyeaux	3	++
ESTRING	2		juleber	1	++
ESTROGEL	3		junel 1.5/30	1	++
estrogens conjugated	3	PA	junel 1/20	1	++
ethynodiol diac-eth estradiol	1	++	junel fe 1.5/30	1	++
etonogestrel-ethinyl estradiol	1	++	junel fe 1/20	1	++
EVAMIST	3		junel fe 24	1	++
falmina	1	++	kaitlib fe	3	++
feirza 1.5/30	1	++	kalliga	1	++
feirza 1/20	1	++	kariva	1	++
FEMLYV	3	++	kelnor 1/35	1	++
FEMRING	2		kurvelo	1	++
finzala	3	++	KYLEENA		++
fyavolv	3		larin 1.5/30	1	++
galbriela	3	++	larin 1/20	1	++
gallifrey	1		larin 24 fe	1	++
gemmily	3	++	larin fe 1.5/30	1	++
hailey 1.5/30	1	++	larin fe 1/20	1	++
hailey 24 fe	1	++	lessina	1	++
hailey fe 1.5/30	1	++	levonest	1	++
hailey fe 1/20	1	++	levonorgest-eth est & eth est	3	++
haloette	1	++	levonorgest-eth estrad 91-day oral tablet 0.1-0.02 & 0.01 mg, 0.15-0.03 mg	1	++
heather	1	++	levonorgest-eth estradiol-iron	3	++
her style	1	++	levonorgestrel	1	++
iclevia	1	++	levonorgestrel-ethinyl estrad	1	++
IMVEXXY MAINTENANCE PACK	3		levonorg-eth estrad triphasic	1	++
IMVEXXY STARTER PACK	3		LILETTA (52 MG)	3	++
incassia	1	++	LO LOESTRIN FE	3	++
introvale	1	++	LOESTRIN 1.5/30 (21)	3	
isibloom	1	++	LOESTRIN 1/20 (21)	3	
jaimiess	1	++	LOESTRIN FE 1.5/30	3	
jasmiel	1	++	LOESTRIN FE 1/20	3	
jencycla	1	++	lojaimiess	1	++
jinteli	3				
jolessa	1	++			

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Drug Name	Drug Tier	Notes	Drug Name	Drug Tier	Notes
loryna	1	++	necon 0.5/35 (28)	1	++
low-ogestrel	1	++	new day	1	++
lo-zumandimine	1	++	NEXPLANON		++
luizza 1.5/30	1	++	NEXTSTELLIS	3	++
luizza 1/20	1	++	nikki	1	++
luteria	1	++	nora-be	1	++
lyleq	1	++	norelgestromin-eth estradiol	1	++
lyllana	1		norethin ace-eth estrad-fe oral capsule	3	++
lyza	1	++	norethin ace-eth estrad-fe oral tablet	1	++
marlissa	1	++	norethin ace-eth estrad-fe oral tablet chewable	3	++
medroxyprogesterone acetate intramuscular	1	++	norethin ace-eth estrad-fe oral tablet	1	++
medroxyprogesterone acetate oral	1		norethindrone acetate oral	1	
megestrol acetate oral suspension 40 mg/ml, 400 mg/10ml, 800 mg/20ml	1		norethindrone acet-ethinyl est	1	++
megestrol acetate oral suspension 625 mg/5ml	3		norethindrone oral	1	++
megestrol acetate oral tablet	1		norethindrone-eth estradiol	3	
meleya	1	++	norethin-eth estradiol-fe	3	++
MENOSTAR	3		norgestimate-eth estradiol oral tablet 0.25-35 mg-mcg	1	++
mibelas 24 fe	3	++	norgestimate-ethinyl estradiol triphasic	1	++
microgestin 1.5/30	1	++	norlyroc	1	++
microgestin 1/20	1	++	nortrel 0.5/35 (28)	1	++
microgestin fe 1.5/30	1	++	nortrel 1/35 (21)	1	++
microgestin fe 1/20	1	++	nortrel 1/35 (28)	1	++
mili	1	++	nortrel 7/7/7	1	++
mimvey	1		NUVARING	3	
MINIVELLE	3		nylia 1/35	1	++
minzoya	3	++	nylia 7/7/7	1	++
MIRENA (52 MG)	2	++	opcicon one-step	1	++
MIUDELLA INTRAUTERINE COPPER	3	++	OPILL	1	++
mono-linyah	1	++	option 2	1	++
my choice	1	++	orquidea	1	++
my way	1	++	PARAGARD INTRAUTERINE COPPER	2	++
NATAZIA	3	++			

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Drug Name	Drug Tier	Notes	Drug Name	Drug Tier	Notes
philith	1	++	tri-lynyah	1	++
pimtrea	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		tri-vylibra	1	++
progesterone intramuscular	1		tri-vylibra lo	1	++
progesterone oral	1		turqoz	1	++
progesterone vaginal	3		TWIRLA	3	++
PROMETRIUM	3		tyblume	1	++
PROVERA	3		tydemy	3	++
reclipsen	1	++	VAGIFEM	3	
rivelsa	3	++	valtya 1/35	1	++
rosyrah	3	++	valtya 1/50	1	++
SAFYRAL	3		velivet	1	++
setlakin	1	++	vestura	1	++
sharobel	1	++	vienva	1	++
shewise	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	++	xarah fe	3	++
take action	1	++	xelria fe	3	++
tarina 24 fe	1	++	xulane	1	++
tarina fe 1/20 eq	1	++	YASMIN 28	3	
taysofy	3	++	YAZ	3	
TAYTULLA CAPSULE 1-20 MG-MCG(24) ORAL	3		yuvaferm	1	
TAYTULLA CAPSULE 1-20 MG-MCG(24) ORAL	3	PA	zafemy	1	++
tilia fe	3	++	zovia 1/35 (28)	1	++
tri-estarylla	1	++	zumandimine	1	++
tri-legest fe	3	++	Hormonal Agents - Thyroid		
			ARMOUR THYROID	3	
			CYTOMEL	3	

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Drug Name	Drug Tier	Notes	Drug Name	Drug Tier	Notes
EVEXITHROID ORAL TABLET 120 MG, 15 MG, 180 MG, 30 MG, 60 MG, 90 MG	3		AZASAN	3	
levo-t	3		azathioprine oral tablet 100 mg, 75 mg	3	
LEVOTHYROXINE SODIUM ORAL CAPSULE	3		azathioprine oral tablet 50 mg	1	
levothyroxine sodium oral tablet	1		BERINERT	4	PA; QL
levoxyl	3		CELLCEPT	3	
liomny	1		COSENTYX (300 MG DOSE)	4	PA; QL
liothyronine sodium oral	1		COSENTYX 150 MG/ML SUBCUTANEOUS	4	PA; QL
methimazole oral	1		COSENTYX SENSOREADY (300 MG)	4	PA; QL
NIVA THYROID	3		COSENTYX SENSOREADY PEN	4	PA; QL
NP THYROID	3		COSENTYX UNOREADY	4	PA; QL
propylthiouracil oral	1		CUVITRU	4	PA; QL
RENTHYROID ORAL TABLET 120 MG, 15 MG, 30 MG, 60 MG, 90 MG	3		cyclosporine modified	1	
SYNTHROID	3		cyclosporine oral	1	
THYQUIDITY	3		ENVARBUS XR	2	
THYROID ORAL	3		gengraf	1	
TIROSINT	3		HEPAGAM B	3	
TIROSINT-SOL	3		HIZENTRA	4	PA; QL
unithroid	3		HYPERHEP B	2	
Immunological Agents - Drugs for Immune System Stimulation or Suppression			HYPERRAB	3	
AMJEVITA	2	PA	HYPERTET	3	
AMJEVITA-PED 10KG TO <15KG SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 10MG/0.2ML	2	PA	HYQVIA	4	PA; QL
AMJEVITA-PED 15KG TO <30KG	2	PA	icatibant acetate	4	PA; QL
ANTIVENIN LATRODECTUS MACTANS	3		IMURAN	3	
ARAVA	3		JYLAMVO	3	PA
ASTAGRAF XL	3		KEDRAB	3	
AURANOFIN	4	PA; QL	leflunomide oral	1	
			methotrexate sodium	1	
			methotrexate sodium (pf)	1	
			mycophenolate mofetil oral	1	
			mycophenolate sodium	1	
			mycophenolic acid	1	
			MYFORTIC	3	

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Drug Name	Drug Tier	Notes	Drug Name	Drug Tier	Notes
NABI-HB	2		BEXSERO	2	++
NEORAL	3		BIOTHRAX	3	
OMVOH SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 200 MG/2ML	3		BOOSTRIX	2	++
PROGRAF ORAL	3		CAPVAXIVE	2	++
RASUVO	2		COMIRNATY	2	++
RHOPHYLAC	3		COMIRNATY 5-11 YEARS	2	++
RIDAURA	4	PA; QL	DAPTACEL	2	++
sajazir	4	PA; QL	ENGERIX-B	2	++
SANDIMMUNE ORAL	3		FLUAD	1	++
sirolimus oral	1		FLUARIX	1	++
SKYRIZI PEN	4	PA; QL	FLUBLOK	1	++
SKYRIZI SUBCUTANEOUS	4	PA; QL	FLUCELVAX	1	++
tacrolimus oral	1		FLULAVAL	1	++
TREMFYA ONE-PRESS	4	PA; QL	FLUMIST	1	++
TREMFYA PEN	4	PA; QL	FLUZONE	1	++
TREMFYA SUBCUTANEOUS	4	PA; QL	FLUZONE HIGH-DOSE	1	++
TREMFYA-CD/UC INDUCTION	4	PA; QL	GARDASIL 9	2	++
TREXALL	3		HAVRIX	2	++
VARIZIG	3		HEPLISAV-B	2	++
XATMEP	3	PA; QL	HIBERIX	2	++
XELJANZ	4	PA; QL	INFANRIX	2	++
XELJANZ XR	4	PA; QL	IPOL	2	++
YESINTEK SUBCUTANEOUS	2	PA	KINRIX	2	++
Immunological Agents - Drugs for Vaccination			MENQUADFI	2	++
ABRYSVO	2	++	MENVEO	2	++
ACTHIB	2	++	M-M-R II	2	++
ADACEL	2	++	MNEXSPIKE	2	++
AFLURIA	1	++	MRESVIA	2	++
AFLURIA PRESERVATIVE FREE	1	++	NUVAXOVID COVID-19 VACCINE	2	++
AREXVY	2	++	PEDIARIX	2	++
AUDENZ	2	++	PEDVAX HIB	2	++
			PENBRAYA	2	++
			PENMENVY	3	++
			PENTACEL	2	++
			PNEUMOVAX 23	2	++
			PREVNAR 20	2	++
			PRIORIX	2	++

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Drug Name	Drug Tier	Notes	Drug Name	Drug Tier	Notes
PROQUAD	2	++	ANALPRAM HC EXTERNAL LOTION	3	
QUADRACEL	2	++	ANUCORT-HC	3	
RECOMBIVAX HB	2	++	ANUSOL-HC EXTERNAL	3	
ROTARIX	2	++	anusol-hc rectal	3	
ROTATEQ	2	++	APRISO	3	
SHINGRIX INTRAMUSCULAR SUSPENSION PREFILLED SYRINGE	3	++	AZULFIDINE	3	
SHINGRIX INTRAMUSCULAR SUSPENSION RECONSTITUTED	2	++	AZULFIDINE EN-TABS	3	
SPIKEVAX	2	++	balsalazide disodium	1	
SPIKEVAX 6M-11Y	2	++	budesonide oral (generic Entocort)	1	
TENIVAC	2	++	budesonide rectal	3	
TRUMENBA	2	++	CANASA	3	
TWINRIX	2	++	CORTENEMA	3	
VAQTA INTRAMUSCULAR SUSPENSION 25 UNIT/0.5ML		++	CORTIFOAM	2	
VAQTA INTRAMUSCULAR SUSPENSION 50 UNIT/ML	2	++	HEMMOREX-HC RECTAL SUPPOSITORY 30 MG	3	
VAQTA INTRAMUSCULAR SUSPENSION PREFILLED SYRINGE 25 UNIT/0.5ML		++	HEMMOREX-HC SUPPOSITORY 25 MG RECTAL	3	
VAQTA INTRAMUSCULAR SUSPENSION PREFILLED SYRINGE 50 UNIT/ML	2	++	hemmorex-hc suppository 25 mg rectal	3	
VARIVAX	2	++	hydrocortisone (perianal) external cream 1 %	3	
VAXELIS	2	++	hydrocortisone (perianal) external cream 2.5 %	1	
VAXNEUVANCE	2	++	hydrocortisone ace-pramoxine external cream 1-1 %	3	
Inflammatory Bowel Disease Agents			hydrocortisone acetate rectal	3	
ANALPRAM HC EXTERNAL CREAM 1-1 %	3		hydrocortisone rectal	1	
			LIALDA	3	
			lidocaine-hydrocort (perianal)	3	
			LIDOCAINE-HYDROCORTISONE ACE RECTAL GEL	3	
			lidocaine-hydrocortisone ace rectal kit 1-3 %, 3-0.5 %	3	

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Drug Name	Drug Tier	Notes	Drug Name	Drug Tier	Notes
LIDOCORT	3		ibandronate sodium oral	1	
mesalamine er oral capsule 500 mg	1	PA	MIACALCIN	3	
mesalamine er oral capsule 0.375 gm	1		risedronate sodium oral tablet	1	
mesalamine oral capsule delayed release 400 mg	1	ST	risedronate sodium oral tablet delayed release	3	
mesalamine oral tablet delayed release 1.2 gm	1		Metabolic Bone Disease Agents - Other		
mesalamine oral tablet delayed release 800 mg	3	PA	calcitriol oral	1	
mesalamine rectal	1		cinacalcet hcl	1	
mesalamine-cleanser	3		doxercalciferol oral	3	
PENTASA ORAL CAPSULE EXTENDED RELEASE 250 MG	2	PA	paricalcitol oral	3	
PENTASA ORAL CAPSULE EXTENDED RELEASE 500 MG	1	PA	RAYALDEE	3	PA
PROCORT	3		ROCALTROL	3	
PROCTOCORT	3		SENSIPAR	3	
PROCTOFOAM HC	2		ZEMPLAR ORAL	3	
procto-med hc	1		Miscellaneous Therapeutic Agents		
proctosol hc	1		AEROCHAMBER HOLDING CHAMBER	2	
proctozone-hc	1		AEROCHAMBER MINI CHAMBER	2	
ROWASA	3		AEROCHAMBER MV	2	
SFROWASA	3		AEROCHAMBER PLS FLOVU MTHPIECE	2	
sulfasalazine oral	1		AEROCHAMBER PLUS FLO-VU INTERM	2	
UCERIS RECTAL	3		AEROCHAMBER PLUS FLO-VU LARGE DEVICE	2	
Metabolic Bone Disease Agents - Drugs for Osteoporosis			AEROCHAMBER PLUS FLO-VU MEDIUM DEVICE	2	
ACTONEL	3		AEROCHAMBER PLUS FLO-VU SMALL DEVICE	2	
alendronate sodium	1		AEROCHAMBER PLUS FLOW VU	2	
ATELVIA	3		AEROCHAMBER2GO ANTI-STATIC	2	
BINOSTO	3		AIMSCO LUBRICATED		++
calcitonin (salmon) injection	3		ALCOHOL PREP PADS PAD , 70 %	1	
calcitonin (salmon) nasal	1		ALCOHOL PREP PADS SHEET 70 %	1	
FOSAMAX	3				
FOSAMAX PLUS D	3				

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Drug Name	Drug Tier	Notes	Drug Name	Drug Tier	Notes
AQINJECT PEN NEEDLE	1		CAYA	2	++
ASSURE ID DUO PRO PEN NEEDLES	1		CLEVER CHOICE HOLDING CHAMBER	2	
ASSURE ID PRO PEN NEEDLES	1		COMFORT EZ PRO PEN NEEDLES	1	
AUM ALCOHOL PREP PADS	1		COMPACT SPACE CHAMBER	2	
AUM INSULIN SAFETY PEN NEEDLE 31G X 4 MM	1		COMPACT SPACE CHAMBER/LG MASK	2	
AUM MINI INSULIN PEN NEEDLE	1		COMPACT SPACE CHAMBER/MED MASK	2	
AUM PEN NEEDLE 32G X 5 MM , 33G X 4 MM , 33G X 5 MM , 33G X 6 MM	1		COMPACT SPACE CHAMBER/SM MASK	2	
AUM READYGARD DUO PEN NEEDLE	1		CONDOMS		++
AUM SAFETY PEN NEEDLE	1		CYTOTINE ORAL POWDER	3	
BD AUTOSHIELD DUO PEN NEEDLES	1		deferoxamine mesylate injection solution reconstituted 500 mg	1	
BD PEN NEEDLE MICRO ULTRAFINE	1		DESFERAL	3	
BD PEN NEEDLE MINI ULTRAFINE	1		DROPSAFE ALCOHOL PREP	1	
BD PEN NEEDLE NANO ULTRAFINE	1		DROPSAFE AUTOPROTECT DUO	1	
BD PEN NEEDLE ORIG ULTRAFINE	1		DUREX EXTRA SENSITIVE THIN		++
BD PEN NEEDLE SHORT ULTRAFINE	1		DUREX REALFEEL		++
BD ULTRA-FINE PEN NEEDLES	1		DUREX TROPICAL		++
BREATHE COMFORT CHAMBER/ADULT	2		EASIVENT	2	
BREATHE COMFORT CHAMBER/CHILD	2		EDETATE CALCIUM DISODIUM INJECTION	3	
BREATHE EASE LARGE	2		EMBECTA AUTOSHIELD DUO	1	
BREATHE EASE MEDIUM	2		EMBECTA PEN NEEDLE NANO	1	
BREATHE EASE SMALL	2		EMBECTA PEN NEEDLE NANO 2 GEN	1	
BREATHERITE VALVED MDI CHAMBER	2		EMBECTA PEN NEEDLE ULTRAFINE	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	

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Drug Name	Drug Tier	Notes	Drug Name	Drug Tier	Notes
ENCARE		++	KIMONO MICRO THIN PLUS		++
FANTASY LUBRICATED		++	KIMONO PLUS		++
FANTASY LUBRICATED/SPERMICIDE		++	KIMONO PS		++
FC2 FEMALE CONDOM		++	KIMONO PS PLUS		++
FEMCAP	2	++	KIMONO SENSATION		++
FLEXICHAMBER	2		KIMONO SENSATION PLUS		++
FLEXICHAMBER ADULT MASK/SMALL	2		KIMONO SPECIAL		++
FLEXICHAMBER CHILD MASK/LARGE	2		LYNKUET	3	PA
FLEXICHAMBER CHILD MASK/SMALL	2		MAXX		++
GLUCAGON HCL (DIAGNOSTIC)	2		MAXX PLUS		++
GOODSENSE ALCOHOL SWABS	1		methergine	1	
GRASTEK	3	PA	methylergonovine maleate	1	
INCONTROL ULTICARE PEN NEEDLES	1		MICROCHAMBER DEVICE	2	
INSULIN PEN NEEDLES 29G X 10MM , 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		MODD1 PATIENT WELCOME KIT	3	PA
INSUPEN32G EXTR3ME	1		NOVOFINE PEN NEEDLE	1	
IWILFIN	3	PA; QL	NOVOFINE PLUS PEN NEEDLE	1	
KAMELEON LUBRICATED		++	NOZIN NASAL SANITIZER	1	
KERENDIA	3	PA; QL	NOZIN NASAL SANITIZER POPSWAB	1	
KIMONO		++	ODACTRA	3	PA
KIMONO COLORS		++	OMNIFLEX DIAPHRAGM	3	++
KIMONO MAXX-LARGE FLARE		++	OMNIPOD 5 DEXCOM INTRO KIT	3	PA
KIMONO MICRO THIN		++	OMNIPOD 5 DEXCOM PODS	3	PA
			OMNIPOD 5 LIBRE2 G6 INTRO GEN5	3	PA
			OMNIPOD 5 LIBRE PODS	3	PA
			OMNIPOD DASH INTRO KIT	3	PA
			OMNIPOD DASH PDM (GEN 4)	3	PA
			OMNIPOD DASH PODS	3	PA

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Drug Name	Drug Tier	Notes	Drug Name	Drug Tier	Notes
OMNIPOD POD PALS	3	PA	PURE COMFORT SAFETY PEN NEEDLE	1	
OPTICHAMBER DIAMOND	2		PURE COMFORT SPACER CHAMBER	2	
OPTICHAMBER DIAMOND-LG MASK	2		QUICK TOUCH INSULIN PEN NEEDLE	1	
OPTICHAMBER DIAMOND-MD MASK	2		RAGWITEK	3	PA
OPTICHAMBER DIAMOND-SM MASK	2		RAYA SURE PEN NEEDLE	1	
OPTIONS GYNOL II CONTRACEPTIVE		++	REALITY LATEX CONDOMS		++
ORALAIR	3	PA	REALITY LATEX/ULTRA TEXTURED		++
ORALAIR ADULT STARTER PACK	3	PA	REALITY LATEX/ULTRA THIN		++
ORALAIR CHILDRENS STARTER PACK	3	PA	SAFETY PEN NEEDLES	1	
PANDA MASK LARGE	2		TECHLITE PLUS PEN NEEDLES	1	
PANDA MASK MEDIUM	2		TODAY SPONGE		++
PANDA MASK SMALL	2		TROJAN BARESKIN		++
PARI VORTEX ADULT MASK	2		TROJAN ENZ		++
PARI VORTEX PEDIATRIC MASK	2		TROJAN MAGNUM		++
PEDIATRIC PANDA MASK	2		TROJAN ULTRA RIBBED LUBRICATED		++
PEN NEEDLE/5-BEVEL TIP	1		TROJAN ULTRA THIN		++
PENTIPS GENERIC PEN NEEDLES 32G X 6 MM	1		TROJAN ULTRA THIN/SPERMICIDAL		++
PHEXX	3	++	TROJAN-ENZ LUBRICATED		++
PIP PEN NEEDLES 32G X 4MM	1		TROJAN-ENZ/SPERMICIDAL		++
pocket spacer	2		TRUE COMFORT SAFETY PEN NEEDLE	1	
PRO COMFORT SPACER ADULT	2		TRUE COVER		++
PRO COMFORT SPACER CHILD	2		TRUSTEX COLOR CONDOMS + LUBE		++
PRO COMFORT SPACER INFANT	2		TRUSTEX LUB/RIBBED/STUDDERED		++
PROCARE SPACER/ADULT MASK	2		TRUSTEX LUB/SPERMICIDE EX ST		++
PROCARE SPACER/CHILD MASK	2		TRUSTEX LUB/SPERMICIDE XL		++

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Drug Name	Drug Tier	Notes	Drug Name	Drug Tier	Notes
TRUSTEX LUBRICATED		++	WIDE-SEAL DIAPHRAGM 70	2	++
TRUSTEX LUBRICATED EX LARGE		++	WIDE-SEAL DIAPHRAGM 75	2	++
TRUSTEX LUBRICATED EXTRA ST		++	WIDE-SEAL DIAPHRAGM 80	2	++
TRUSTEX LUBRICATED/SPERMICIDE		++	WIDE-SEAL DIAPHRAGM 85	2	++
TRUSTEX NATURAL CONDOMS + LUBE		++	WIDE-SEAL DIAPHRAGM 90	2	++
TRUSTEX NON-LUBRICATED		++	WIDE-SEAL DIAPHRAGM 95	2	++
TRUSTEX RIA LUB/SPERMICIDE		++	Ophthalmic Agents - Drugs for Eye Allergy, Infection and Inflammation		
TRUSTEX RIA LUBRICATED		++	ACULAR	2	
TRUSTEX RIA NON-LUBRICATED		++	ACULAR LS	3	
TRUSTEX- NONOXYNOL-9/RIB/STUD		++	ACUVAIL	3	
UNIFINE OTC PEN NEEDLES	1		ALOCRIAL	3	
UNIFINE PROTECT PEN NEEDLE	1		ALREX	3	
VCF VAGINAL CONTRACEPTIVE		++	AZASITE	3	
VEOZAH	3	PA; QL	azelastine hcl ophthalmic	1	
VERIFINE INSULIN PEN NEEDLE	1		bacitracin ophthalmic	1	
VERIFINE PLUS PEN NEEDLE	1		bepotastine besilate	3	
V-GO 20	3	PA	BEPREVE	3	
V-GO 30	3	PA	BESIFLOXACIN HCL	3	
V-GO 40	3	PA	BESIVANCE	3	
VORTEX VALVE CHAMBER-PEDI MASK	2		BETADINE OPHTHALMIC PREP	3	
VORTEX VALVED HOLDING CHAMBER	2		bromfenac sodium (once-daily)	3	
WIDE-SEAL DIAPHRAGM 60	2	++	bromfenac sodium ophthalmic	3	
WIDE-SEAL DIAPHRAGM 65	2	++	BROMSITE	3	
			CILOXAN	2	
			ciprofloxacin hcl ophthalmic	1	
			cromolyn sodium ophthalmic	1	
			dexamethasone sodium phosphate ophthalmic	1	

Drug Name	Drug Tier	Notes	Drug Name	Drug Tier	Notes
diclofenac sodium ophthalmic	1		olopatadine hcl ophthalmic solution 0.2 %	3	
difluprednate	1		POVIDONE-IODINE OPHTHALMIC	3	
DUREZOL	3		PRED FORTE	3	
epinastine hcl	3		PRED MILD	2	
erythromycin ophthalmic	1		PREDNISOL ACE-MOXIFLOX-BROMFEN	3	
EYSUVIS	3	PA	prednisolone acetate ophthalmic	1	
FLAREX	3		prednisolone acetate p-f	1	
fluorometholone	1		PREDNISOLONE ACETATE-NEPAFENAC	3	
flurbiprofen sodium	1		PREDNISOLONE ACET-MOXIFLOXACIN	3	
FML FORTE	2		prednisolone sodium phosphate ophthalmic	3	
FML LIQUIFILM	3		PREDNISOLON-GATIFLOX-BROMFENAC	3	
gatifloxacin ophthalmic	1		PREDNISOLON-MOXIFLOX-BROMFENAC	3	
gentamicin sulfate ophthalmic	1		PREDNISOLON-MOXIFLOX-KETOROLAC	3	
ILEVRO	3		PREDNISOLON-MOXIFLOX-NEPAFENAC	3	
INVELTYS	3		PROLENSA	3	
ketorolac tromethamine ophthalmic	1		sulfacetamide sodium ophthalmic	1	
KLARITY-A	3		TOBRADEX	2	
KLARITY-L	3		TOBRADEX ST	3	
levofloxacin ophthalmic	3		tobramycin ophthalmic	1	
LOTEMAX	3		tobramycin-dexamethasone	1	
LOTEMAX SM	3		TOBEX	2	
loteprednol etabonate	3		trifluridine	1	
MAXIDEX	3		UPNEEQ	3	PA
MAXITROL	3		VIGAMOX	2	
moxifloxacin hcl (2x day)	1		ZERVIAE	3	
moxifloxacin hcl ophthalmic	1		ZIRGAN	3	
NATACYN	2				
neomycin-polymyxin-dexameth	1				
neomycin-polymyxin-hc ophthalmic	3				
NEVANAC	3				
OCUFLOX	3				
ofloxacin ophthalmic	1				

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Drug Name	Drug Tier	Notes	Drug Name	Drug Tier	Notes
Ophthalmic Agents - Drugs for Glaucoma			levobunolol hcl	1	
acetazolamide er	1		LUMIGAN	2	
acetazolamide oral	1		methazolamide oral	1	
ALPHAGAN P	3		OMLONTI	3	PA
apraclonidine hcl	3		PHOSPHOLINE IODIDE	3	
AZOPT	3		pilocarpine hcl ophthalmic solution 1 %, 2 %, 4 %	1	
betaxolol hcl ophthalmic	1		pilocarpine hcl ophthalmic solution 1.25 %	3	PA
BETIMOL	3		QLOSI	3	PA
BETOPTIC-S	2		RHOPRESSA	3	PA
bimatoprost ophthalmic	1		ROCKLATAN	3	PA
brimonidine tartrate ophthalmic solution 0.1 %, 0.15 %	3		SIMBRINZA	3	
brimonidine tartrate ophthalmic solution 0.2 %	1		tafluprost (pf)	3	
brimonidine tartrate-timolol	1		timolol hemihydrate	3	
BRIMONIDINE-DORZOLAMIDE OPTHALMIC SOLUTION 0.15-2 %	3		timolol maleate (once-daily)	1	
brinzolamide	1		timolol maleate ocudose	3	
carteolol hcl	1		timolol maleate ophthalmic	1	
COMBIGAN	3		timolol maleate pf	3	
COSOPT	3		TIMOLOL-BRIMON-DORZOL-LATANOPR	3	
COSOPT PF	3		TIMOLOL-BRIMONIDINE-DORZOLAMID OPTHALMIC SOLUTION 0.5-0.15-2 %	3	
DORZOLAMIDE HCL SOLUTION 2 % OPTHALMIC	3		TIMOLOL-DORZOLAMID-LATANOPROST	3	
dorzolamide hcl solution 2 % ophthalmic	1		TIMOPTIC OCUDOSE	3	
dorzolamide hcl-timolol mal	1		TRAVATAN Z	3	
dorzolamide hcl-timolol mal pf	3		travoprost (bak free)	1	
IOPIDINE	3		VUITY	3	PA
ISTALOL	3		VYZULTA	3	PA
IYUZEH	3		XALATAN	3	
latanoprost ophthalmic	1		XELPROS	3	
LATANOPROST-TIMOLOL MALEATE	3		ZIOPTAN	3	
			Ophthalmic Agents - Drugs for Miscellaneous Eye Conditions		

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Drug Name	Drug Tier	Notes	Drug Name	Drug Tier	Notes
ACUICYN	3		proparacaine hcl ophthalmic	3	
AKTEN	3		RESTASIS	3	PA
ALCAINE	3		RESTASIS MULTIDOSE	3	PA
altacaine	1		sulfacetamide-prednisolone	1	
altafrin	1		tetracaine hcl ophthalmic	1	
ATROPINE SULFATE OPHTHALMIC SOLUTION 0.01 %	1		TROPICAMIDE-CYCLOPENTOLATE-PE	3	
atropine sulfate ophthalmic solution 1 %	1		TROPICAMIDE-PHENYLEPHRINE	3	
AVENOVA	3		TROPIC-PROPARACA-PE-KETOROLAC	3	
bacitracin-polymyxin b	1		TRYPTYR	3	PA
bacitra-neomycin-polymyxin-hc	1		TYRVAYA	3	PA
CEQUA	2	PA	VIZZ	3	PA
CYCLOGYL OPHTHALMIC SOLUTION 0.5 %	2		XIIDRA	2	PA
CYCLOGYL OPHTHALMIC SOLUTION 1 %, 2 %	3		ZYLET	3	
CYCLOMYDRIL	3		Otic Agents - Drugs for Ear Conditions		
cyclopentolate hcl ophthalmic	1		acetic acid otic	1	
cyclosporine ophthalmic	1	PA	CETRAXAL	3	
GELFILM OPHTHALMIC	3		CIPRO HC	2	
homatropaire	1		ciprofloxacin hcl otic	3	
loteprednol-tobramycin	3		ciprofloxacin-dexamethasone	1	
neomycin-bacitracin zn-polymyx	1		CIPROFLOXACIN-FLUOCINOLONE PF	3	
neomycin-polymyxin-gramicidin	1		ciprofloxacin-hydrocortisone	1	
phenylephrine hcl ophthalmic	1		CORTISPORIN-TC	3	
polymyxin b-trimethoprim	1		DERMOTIC	3	
PREDNISOLONE-BROMFENAC	3		fluocinolone acetonide otic	1	
PREDNISOLONE-GATIFLOXACIN	3		hydrocortisone-acetic acid	3	
PREDNISOLONE-MOXIFLOXACIN	3		neomycin-polymyxin-hc otic	1	
			ofloxacin otic	1	
			OTOVEL	3	
			PRAMOTIC	3	
			Respiratory Tract / Pulmonary Agents - Drugs for Allergies, Cough, Cold		

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Drug Name	Drug Tier	Notes	Drug Name	Drug Tier	Notes
ADRENALIN NASAL	3		HYPERSAL	3	
azelastine hcl nasal	1		INFASURF	3	
azelastine-fluticasone	3		ipratropium bromide nasal	1	
benzonatate	1		KARBINAL ER	3	
BROMPHENIRAMINE MALEATE INTRAMUSCULAR	3		levocetirizine dihydrochloride oral	1	
CARBINOXAMINE MALEATE ER	3		maxi-tuss ac	2	QL
carbinoxamine maleate oral solution	3		MICLARA LQ	3	
carbinoxamine maleate oral tablet	1		mometasone furoate nasal	3	PA
CARBZAH	3		nebusal inhalation nebulization solution 3 %	1	
cetirizine hcl oral solution	3		NEBUSAL INHALATION NEBULIZATION SOLUTION 6 %	3	
CLARINEX	3		olopatadine hcl nasal	1	
CLARINEX-D 12 HOUR	3		OMNARIS	3	PA
clemastine fumarate oral	1		potassium iodide (expectorant)	2	
CLEMSZA	3		promethazine-codeine	3	PA
CORPHENA	3		promethazine-dm	1	
CUROSURF	3		promethazine- phenylephrine	1	
cyproheptadine hcl oral	1		pseudoephedrine- bromphen-dm	3	
DESLORATADINE ORAL SOLUTION	3		pulmosal	1	
desloratadine oral tablet	1		QNASL	3	PA
desloratadine oral tablet dispersible	1		QNASL CHILDRENS	3	PA
diphenhydramine hcl injection	1		RYALTRIS NASAL SUSPENSION 665-25 MCG/ACT	3	PA
diphenhydramine hcl oral elixir	3		RYCLORA	3	
DYMISTA	3		ryvent	1	
flunisolide nasal	1		sodium chloride inhalation nebulization solution 0.9 %, 3 %, 7 %	1	
guaifenesin-codeine	2	QL	sodium chloride inhalation nebulization solution 10 %	3	
HYCODAN	3		SSKI	2	
hydrocod poli-chlorphe poli er	3		SURVANTA	2	
hydrocodone bit- homatrop mbr	1		TUXARIN ER	3	QL
hydromet	1				

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Drug Name	Drug Tier	Notes	Drug Name	Drug Tier	Notes
XHANCE	3	PA	AUVI-Q INJECTION SOLUTION AUTO-INJECTOR 0.1 MG/0.1ML	2	
Respiratory Tract / Pulmonary Agents - Drugs for Asthma and Other Lung Conditions			AUVI-Q INJECTION SOLUTION AUTO-INJECTOR 0.15 MG/0.15ML, 0.3 MG/0.3ML	1	
ACCOLATE	3		BEVESPI AEROSPHERE	3	PA
acetylcysteine inhalation	1		BREO ELLIPTA	3	PA
ADVAIR DISKUS	3		breyna	1	QL
ADVAIR HFA	2		BREZTRI AEROSPHERE	3	PA
AIRSUPRA	3	PA	budesonide inhalation	1	
albuterol sulfate hfa aerosol solution 108 (90 base) mcg/act inhalation	1	QL	budesonide-formoterol fumarate	1	QL
ALBUTEROL SULFATE HFA AEROSOL SOLUTION 108 (90 BASE) MCG/ACT INHALATION	1	QL	COMBIVENT RESPIMAT	2	
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		cromolyn sodium inhalation	1	
albuterol sulfate nebulization solution (5 mg/ml) 0.5% inhalation	1		DALIRESP	3	
ALBUTEROL SULFATE NEBULIZATION SOLUTION (5 MG/ML) 0.5% INHALATION	3		DUAKLIR PRESSAIR	3	PA
albuterol sulfate oral	1		DULERA	3	PA; QL
ALVESCO	2		elixophyllin	1	
ANORO ELLIPTA	3	PA	epinephrine injection solution auto-injector	1	
arformoterol tartrate	3	PA	EPINEPHRINE INJECTION SOLUTION PREFILLED SYRINGE 0.3 MG/0.3ML	3	
ARNUIITY ELLIPTA	3	PA	EPINEPHRINE PROFESSIONAL	3	
ASMANEX (120 METERED DOSES)	2	ST	EPINEPHRINESNAP	3	
ASMANEX (14 METERED DOSES)	2	ST	EPINEPHRINESNAP-EMS	3	
ASMANEX (30 METERED DOSES)	2	ST	EPINEPHRINESNAP-V	3	
ASMANEX (60 METERED DOSES)	2	ST	EPIPEN 2-PAK	3	
ASMANEX HFA	2	ST	EPIPEN JR 2-PAK	3	
ATROVENT HFA	2		FLUTICASONE FUROATE ELLIPTA	3	PA
			FLUTICASONE FUROATE-VILANTEROL	3	PA
			FLUTICASONE PROPIONATE DISKUS	2	PA

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Drug Name	Drug Tier	Notes	Drug Name	Drug Tier	Notes
FLUTICASONE PROPIONATE HFA INHALATION AEROSOL 110 MCG/ACT, 220 MCG/ACT	2	PA	PULMICORT FLEXHALER	3	PA
FLUTICASONE PROPIONATE HFA INHALATION AEROSOL 44 MCG/ACT	2		PULMICORT SUSPENSION	3	
FLUTICASONE- SALMETEROL INHALATION AEROSOL 45-21 MCG/ACT, 115-21 MCG/ACT, 230-21 MCG/ACT	2		QVAR REDIHALER	3	PA
fluticasone-salmeterol inhalation aerosol powder breath activated 100-50 mcg/act, 250-50 mcg/act, 500-50 mcg/act	1		roflumilast	3	
FLUTICASONE- SALMETEROL INHALATION AEROSOL POWDER BREATH ACTIVATED 113-14 MCG/ACT, 232-14 MCG/ACT, 55-14 MCG/ACT	3	PA	SEREVENT DISKUS	2	ST
formoterol fumarate inhalation	3		SINGULAIR	3	
INCRUSE ELLIPTA	3	PA	SPIRIVA HANDIHALER	1	
ipratropium bromide inhalation	1		SPIRIVA RESPIMAT INHALATION AEROSOL SOLUTION 1.25 MCG/ACT	2	ST
ipratropium-albuterol	1		SPIRIVA RESPIMAT INHALATION AEROSOL SOLUTION 2.5 MCG/ACT	2	
isoproterenol hcl injection	3		STIOLTO RESPIMAT	2	
levalbuterol hcl inhalation	3		STRIVERDI RESPIMAT	2	PA
LEVALBUTEROL HFA INHALATION AEROSOL 45 MCG/ACT	3	QL	SYMBICORT	3	QL
montelukast sodium oral	1		terbutaline sulfate injection	3	
NEFFY	3	PA	terbutaline sulfate oral	1	
OFEV	4	PA; QL	THEO-24	3	
PERFOROMIST	3		theophylline er	1	
pirfenidone	4	PA; QL	theophylline oral	1	
PROAIR RESPICLICK	3	QL	tiotropium bromide	1	
			TRELEGY ELLIPTA	3	PA
			TUDORZA PRESSAIR	3	
			UMECLIDINIUM- VILANTEROL	3	PA
			VENTOLIN HFA	3	QL
			wixela inhub	1	
			XOPENEX HFA	3	
			YUPELRI	3	PA
			zafirlukast	3	
			Respiratory Tract / Pulmonary Agents - Drugs for Cystic Fibrosis		
			ALYFTREK	4	PA; QL
			PULMOZYME	2	QL

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Drug Name	Drug Tier	Notes	Drug Name	Drug Tier	Notes
tobramycin nebulization solution 300 mg/5ml inhalation	4	PA; QL	DANTRIUM ORAL	3	
TRIKAFTA	4	PA; QL	dantrolene sodium oral	1	
Respiratory Tract / Pulmonary Agents - Drugs for Pulmonary Hypertension			FEXMID	3	QL
alyq	1		FLEQSUVY	3	PA
ambrisentan	1	PA; QL	metaxalone oral tablet 400 mg, 800 mg	3	QL
bosentan oral tablet	1	PA; QL	metaxalone oral tablet 640 mg	3	PA; QL
OPSUMIT	4	PA; QL	methocarbamol injection	1	
sildenafil citrate oral suspension reconstituted	4	PA; QL	methocarbamol oral tablet 500 mg, 750 mg	1	QL
sildenafil citrate oral tablet 20 mg	4	PA	NORGESIC	3	
tadalafil (generic Adcirca)	1		NORGESIC FORTE	3	QL
TRACLEER 62.5 MG, 125 MG	3	PA; QL	orphenadrine citrate er	1	QL
TYVASO	2	PA; QL	orphenadrine citrate injection	3	
TYVASO REFILL KIT	2	PA; QL	orphenadrine-aspirin-caffeine	3	
TYVASO STARTER KIT	2	PA; QL	ORPHENGESIC FORTE	3	QL
UPTRAVI ORAL	4	PA; QL	OZOBAX DS	3	
UPTRAVI TITRATION	4	PA; QL	ROBAXIN	3	
YUTREPIA	4	PA; QL	SOMA	3	PA; QL
Skeletal Muscle Relaxants - Drugs for Muscle Pain and Spasm			tizanidine hcl oral capsule 2 mg, 4 mg, 6 mg	1	
AMRIX	3	PA; QL	tizanidine hcl oral tablet	1	
baclofen oral solution	3		ZANAFLEX ORAL TABLET	3	
baclofen oral suspension	3	PA	Sleep Disorder Agents		
baclofen oral tablet 10 mg, 20 mg, 5 mg	1		AMBIEN CR	3	QL
baclofen oral tablet 15 mg	3		AMBIEN ORAL TABLET 10 MG	3	PA; QL
carisoprodol oral	3	PA; QL	AMBIEN ORAL TABLET 5 MG	3	QL
chlorzoxazone oral tablet 250 mg	1		armodafinil	1	
chlorzoxazone oral tablet 375 mg, 500 mg, 750 mg	1	QL	BELSOMRA	3	PA
cyclobenzaprine hcl er	3	PA; QL	DAYVIGO	3	PA; QL
cyclobenzaprine hcl oral tablet 10 mg, 5 mg	1	QL	doxepin hcl oral tablet	3	
cyclobenzaprine hcl oral tablet 7.5 mg	3	QL	EDLUAR	3	QL
			eszopiclone	1	QL
			flurazepam hcl	1	QL

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Drug Name	Drug Tier	Notes	Drug Name	Drug Tier	Notes
LUNESTA	3	QL	temazepam oral capsule 22.5 mg	3	QL
modafinil oral	1		zaleplon	1	QL
NUVIGIL	3		zolpidem tartrate er	3	QL
PROVIGIL	3		ZOLPIDEM TARTRATE ORAL CAPSULE	3	PA; QL
QUVIVIQ	3	PA; QL	zolpidem tartrate oral tablet 10 mg	1	PA; QL
ramelteon	3		zolpidem tartrate oral tablet 5 mg	1	QL
RESTORIL	3	QL	zolpidem tartrate sublingual	3	QL
ROZEREM	3				
SILENOR	3				
temazepam oral capsule 15 mg, 30 mg, 7.5 mg	1	QL			

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Nondiscrimination Notice

Kaiser Foundation Health Plan of Washington and Kaiser Foundation Health Plan of Washington Options, Inc. (“Kaiser Permanente”) complies with applicable Federal and Washington state civil rights laws and does not discriminate on the basis of race, color, national origin, age, disability, sex, sexual orientation, or gender identity. Kaiser Permanente does not exclude people or treat them less favorably because of race, color, national origin (including limited English proficiency and primary language), age, disability, sex, sex characteristics (including intersex traits), pregnancy (or related conditions), sex stereotypes, sexual orientation, or gender identity. We also:

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

If you need reasonable modifications, appropriate auxiliary aids and services, or language assistance 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 (including limited English proficiency and primary language), age, disability, sex, sex characteristics (including intersex traits), pregnancy (or related conditions), sex stereotypes, sexual orientation, or gender identity, you can file a grievance with our Civil Rights Coordinator at P.O. Box 35191, Mail Stop: RCR-A1N-22, Seattle, WA 98124-5191 or by calling **1-888-901-4636** (TTY **711**). You can file a grievance in person or 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.

The notice of nondiscrimination is available at <https://healthy.kaiserpermanente.org/washington/language-assistance/nondiscrimination-notice>

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>

Help in your language

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

Español (Spanish) ATENCIÓN: Si habla español, tiene a su disposición servicios de asistencia lingüística que incluyen ayudas y servicios auxiliares adecuados y gratuitos. Llame al **1-888-901-4636 (TTY 711)**.

中文 (Chinese) 注意事項: 如果您說中文，您可獲得免費語言協助服務，包括適當的輔助器材和服務。致電 **1-888-901-4636 (TTY 711)**。

Tiếng Việt (Vietnamese) CHÚ Ý: Nếu bạn nói tiếng Việt, bạn có thể sử dụng các dịch vụ hỗ trợ ngôn ngữ miễn phí, bao gồm các dịch vụ và phương tiện hỗ trợ phù hợp. Xin gọi **1-888-901-4636 (TTY 711)**.

한국어 (Korean) 주의: 한국어를 구사하실 경우, 필요한 보조 기기 및 서비스가 포함된 언어 지원 서비스가 무료로 제공됩니다. **1-888-901-4636**로 전화해 주세요(TTY 711).

Русский (Russian) ВНИМАНИЕ! Если вы говорите по-русски, вам доступны бесплатные услуги языковой поддержки, включая соответствующие вспомогательные средства и услуги. Позвоните по номеру **1-888-901-4636 (TTY 711)**.

Tagalog (Tagalog) PAALALA: Kung nagsasalita ka ng Tagalog, available sa iyo ang serbisyo ng tulong sa wika kabilang ang mga naaangkop na karagdagang tulong at serbisyo, nang walang bayad. Tumawag sa **1-888-901-4636 (TTY 711)**.

Українська (Ukrainian) УВАГА! Якщо ви володієте українською мовою, вам доступні безкоштовні послуги з мовної допомоги, включно із відповідною додатковою допомогою та послугами. Зателефонуйте за номером **1-888-901-4636 (TTY 711)**.

ខ្មែរ (Khmer) យកចិត្តទុកដាក់: បើអ្នកនិយាយខ្មែរ សេវាជំនួយភាសា រួមទាំងជំនួយនិងសេវាសម្របសម្រួលដោយឥតគិតថ្លៃ មានចំពោះអ្នក។ ហៅ **1-888-901-4636 (TTY 711)**។

日本語 (Japanese) 注意: 日本語を話す場合、適切な補助機器やサービスを含む言語支援サービスが無料で提供されます。 **1-888-901-4636**までお電話ください(TTY 711)。

አማርኛ (Amharic) ትኩረት: አማርኛ የሚናገሩ ከሆነ ተገቢ የሆኑ ረዳት ሙርጫዎችን እና አገልግሎቶችን ጨምሮ የቋንቋ እርዳታ አገልግሎቶች በነጻ ይገኛሉ። በ **1-888-901-4636** ይደውሉ (TTY 711)።

Afaan Oromoo (Oromo) XIYYEEFFANNOO: Yoo Afaan Oromo dubbattu ta'e, Tajaajila gargaarsa afaanii, gargaarsota dabalataa fi tajaajiloota barbaachisoo kaffaltii irraa bilisa ta'an, isiniif ni jira. **1-888-901-4636** irratti bilbilaa (TTY 711).

ਪੰਜਾਬੀ (Punjabi) ਧਿਆਨ ਦਿਓ: ਜੇ ਤੁਸੀਂ ਪੰਜਾਬੀ ਬੋਲਦੇ ਹੋ, ਤਾਂ ਤੁਹਾਡੇ ਲਈ ਮੁਫਤ ਉਪਲਬਧ ਭਾਸ਼ਾ ਸਹਾਇਤਾ ਸੇਵਾਵਾਂ, ਜਿਨ੍ਹਾਂ ਵਿੱਚ ਯੋਗ ਸਹਾਇਕ ਸਹਾਇਤਾਵਾਂ ਅਤੇ ਸੇਵਾਵਾਂ ਸ਼ਾਮਲ ਹਨ। ਕਾਲ ਕਰੋ **1-888-901-4636 (TTY 711)**.

العربية (Arabic) تنبيه: إذا كنت تتحدث بالعبوية متوفر لك خدمات للمساعدة على التوجيه بمفاتيح من وسائل للمساعدة والخدمات التيسيرية بالمرحلتان بتأطير الوقت **1-888-901-4636 (TTY 711)**.

Deutsch (German) ACHTUNG: Wenn Sie Deutsch sprechen, steht Ihnen die Sprachassistentz mit entsprechenden Hilfsmitteln und Dienstleistungen kostenfrei zur Verfügung. Rufen Sie **1-888-901-4636** an (TTY 711).

ລາວ (Laotian) ເອົາໃຈໃສ່: ຖ້າທ່ານເວົ້າພາສາລາວ, ການບໍລິການຊ່ວຍເຫຼືອດ້ານພາສາ ວວມທັງອຸປະກອນ ແລະ ການບໍລິການຊ່ວຍເຫຼືອທີ່ເໝາະສົມ ຈະມີໃຫ້ທ່ານໂດຍບໍ່ເສຍຄ່າ. ໂທ **1-888-901-4636 (TTY 711)**.

International Symbol for ASL (American Sign Language):

