

Effective July 2025

# 2025 Drug Formulary

For large employer groups with a 5-tier in-network pharmacy benefit

PEBB SoundChoice

PEBB Value

Summit PPO

Access PPO

Core HMO

KP Plus

# 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](http://www.kp.org/wa/formulary). Non-formulary drugs are not covered unless approved by the health plan as a coverage exception. The prescriber must contact Kaiser Permanente to determine the medical necessity of the non-formulary medication. An alternative formulary medication will be recommended when clinically appropriate. If a coverage exception is not approved, the patient is responsible for the full price of the drug.

***Prior authorization and step therapy 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](http://www.kp.org/wa/formulary) webpage.

### **Covered Diabetic Supplies**

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

- Preferred blood glucose strips:
  - One Touch Verio
  - One Touch Ultra
  - Prodigy – prior authorization required
  - Contour Next – prior authorization required
  - Freestyle – prior authorization required
- Disposable insulin syringes and needles
- Lancing devices and lancets

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

### **Mail Order Pharmacy Service**

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

To begin using mail order, ask your prescriber to send your prescription directly to the Mail Order Pharmacy. To transfer an existing prescription from a retail pharmacy, contact the Mail Order Pharmacy.

**Address:** Kaiser Permanente Mail Order Pharmacy  
PO Box 34383  
Seattle, WA 98124-1383

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

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

### **Specialty Drugs**

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

### **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. If your plan offers ACA benefits, all prescribed FDA approved contraceptive methods from the Kaiser Permanente formulary list will be covered in full when obtained in-network. For plans with out-of-network (OON) benefits, contraceptives will be subject to the OON cost-share. The list of the preventative medications covered in full is available on the [www.kp.org/wa/formulary](http://www.kp.org/wa/formulary) webpage.

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

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

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

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

## **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](http://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](http://www.kp.org/wa/formulary).**

## Kaiser Foundation Health Plan of Washington

### Table of Contents

<b>Analgesics - Drugs for Pain and Inflammation .....</b>	11
<b>Analgesics - Drugs for Pain .....</b>	12
<b>Anesthetics.....</b>	14
<b>Anti-Addiction / Substance Abuse Treatment Agents.....</b>	15
<b>Antibacterials .....</b>	16
<b>Anticoagulants .....</b>	18
<b>Anticonvulsants - Drugs for Seizures .....</b>	18
<b>Antidementia Agents - Drugs for Alzheimer's Disease and Dementia .....</b>	20
<b>Antidepressants.....</b>	20
<b>Antiemetics - Drugs for Nausea and Vomiting.....</b>	22
<b>Antifungals .....</b>	23
<b>Antigout Agents .....</b>	24
<b>Antimigraine Agents - Drugs for Migraines.....</b>	24
<b>Antimigraine Agents.....</b>	24
<b>Antimyasthenic Agents .....</b>	25
<b>Antimycobacterials .....</b>	25
<b>Antineoplastics - Drugs for Cancer.....</b>	25
<b>Antiparasitics .....</b>	28
<b>Antiparkinson Agents .....</b>	28
<b>Antiplatelets .....</b>	29
<b>Antipsychotics - Drugs for Mood Disorders .....</b>	29
<b>Antivirals .....</b>	30
<b>Anxiolytics - Drugs for Anxiety .....</b>	32
<b>Bipolar Agents - Drugs for Mood Disorders .....</b>	33
<b>Blood Products and Modifiers - Drugs for Blood Disorders .....</b>	33
<b>Cardiovascular Agents - Drugs for Heart and Circulation Conditions .....</b>	34
<b>Central Nervous System Agents - Drugs for Attention Deficit Disorder.....</b>	39
<b>Central Nervous System Agents - Drugs for Multiple Sclerosis.....</b>	40
<b>Central Nervous System Agents - Miscellaneous.....</b>	41
<b>Central Nervous System Agents .....</b>	41
<b>Dental and Oral Agents - Drugs for Mouth and Throat Conditions.....</b>	41
<b>Dermatological Agents - Drugs for Skin Conditions.....</b>	41
<b>Diabetes - Antidiabetic Agents .....</b>	47
<b>Diabetes - Glucose Monitoring .....</b>	48
<b>Diabetes - Glycemic Agents .....</b>	50

<b>Diabetes - Insulins</b>	50
<b>Electrolytes / Minerals / Metals / Vitamins</b>	52
<b>Gastrointestinal Agents - Drugs for Acid Reflux and Ulcer</b>	53
<b>Gastrointestinal Agents - Drugs for Bowel, Intestine and Stomach Conditions</b>	54
<b>Genetic or Enzyme Disorder - Drugs for Replacement, Modification, Treatment</b>	55
<b>Genitourinary Agents - Drugs for Bladder, Genital and Kidney Conditions</b>	56
<b>Genitourinary Agents - Drugs for Prostate Conditions</b>	57
<b>Hormonal Agents - Adrenal</b>	57
<b>Hormonal Agents - Men's Health</b>	59
<b>Hormonal Agents - Pituitary</b>	59
<b>Hormonal Agents - Prostaglandins</b>	60
<b>Hormonal Agents - Selective Estrogen Receptor Modifying Agents</b>	60
<b>Hormonal Agents - Sex Hormones and Birth Control</b>	60
<b>Hormonal Agents - Thyroid</b>	65
<b>Immunological Agents - Drugs for Immune System Stimulation or Suppression</b>	65
<b>Immunological Agents - Drugs for Vaccination</b>	68
<b>Inflammatory Bowel Disease Agents</b>	69
<b>Metabolic Bone Disease Agents - Drugs for Osteoporosis</b>	70
<b>Metabolic Bone Disease Agents - Other</b>	70
<b>Miscellaneous Therapeutic Agents</b>	70
<b>Ophthalmic Agents - Drugs for Eye Allergy, Infection and Inflammation</b>	73
<b>Ophthalmic Agents - Drugs for Glaucoma</b>	75
<b>Ophthalmic Agents - Drugs for Miscellaneous Eye Conditions</b>	76
<b>Otic Agents - Drugs for Ear Conditions</b>	77
<b>Respiratory Tract / Pulmonary Agents - Drugs for Allergies, Cough, Cold</b>	77
<b>Respiratory Tract / Pulmonary Agents - Drugs for Asthma and Other Lung Conditions</b>	78
<b>Respiratory Tract / Pulmonary Agents - Drugs for Cystic Fibrosis</b>	80
<b>Respiratory Tract / Pulmonary Agents - Drugs for Pulmonary Hypertension</b>	81
<b>Skeletal Muscle Relaxants - Drugs for Muscle Pain and Spasm</b>	81
<b>Sleep Disorder Agents</b>	82
<b>Index of Drugs</b>	83

Drug Name	Drug Tier	Notes	Drug Name	Drug Tier	Notes
Analgesics - Drugs for Pain and Inflammation			ibuprofen oral suspension 100 mg/5ml, 200 mg/10ml	3	
ANAPROX DS	3		ibuprofen oral tablet 400 mg, 600 mg, 800 mg	1	
ARTHROTEC	3		ibuprofen-famotidine	5	PA; QL
CELEBREX	3		INDOCIN	3	
celecoxib oral	1		indomethacin er	1	
COMBOGESIC ORAL	3		indomethacin oral capsule	1	
COXANTO	5	PA; QL	indomethacin oral suspension	3	
DAYPRO	3		indomethacin rectal suppository 50 mg	3	
DICLOFENAC PATCH 1.3%	3		ketoprofen er	3	
diclofenac potassium oral capsule	3	PA	ketoprofen oral	3	
diclofenac potassium oral tablet 25 mg	5	PA; QL	ketorolac tromethamine injection solution 15 mg/ml	1	
diclofenac potassium oral tablet 50 mg	1		KETOROLAC TROMETHAMINE INTRAMUSCULAR SOLUTION 30 MG/ML	3	
diclofenac sodium er	1		ketorolac tromethamine intramuscular solution 60 mg/2ml	1	
diclofenac sodium external solution 1.5 %	3		ketorolac tromethamine oral	3	
diclofenac sodium external solution 2 %	3	PA	ketorolac tromethamine solution 30 mg/ml injection	1	
diclofenac sodium oral	1		KETOROLAC TROMETHAMINE SOLUTION 30 MG/ML INJECTION	3	
diclofenac-misoprostol	3		KIPROFEN	3	
DICLOFONO	3		LICART	3	
diflunisal oral	1		LODINE	3	
DOLOBID ORAL TABLET 250 MG	3	PA	LOFENA	5	PA; QL
DOLOBID ORAL TABLET 375 MG	5	PA; QL	LURBIPR	3	
DUEXIS	5	PA; QL	meclofenamate sodium oral	1	
EC-NAPROSYN	3		mefenamic acid oral	3	
ec-naproxen	3		meloxicam oral capsule	3	
ELYXYB	5	PA; QL			
etodolac	1				
etodolac er	3				
fenoprofen calcium oral	3				
FENOPRON	3				
FLECTOR	3				
flurbiprofen oral	1				

Effective Date: 07/01/2025

Drug Name	Drug Tier	Notes	Drug Name	Drug Tier	Notes
MELOXICAM ORAL SUSPENSION	3		acetaminophen-codeine	1	QL
meloxicam oral tablet	1		ALLZITAL	3	
nabumetone oral	1		APADAZ	3	QL
NAPRELAN ORAL TABLET EXTENDED RELEASE 24 HOUR 375 MG, 500 MG	3		apap-caff-dihydrocodeine	3	QL
NAPRELAN ORAL TABLET EXTENDED RELEASE 24 HOUR 750 MG	3	PA	ascomp-codeine	3	QL
NAPROSYN	3		bac (butalbital-acetamin-caff)	1	
naproxen dr	3		BELBUCA	3	PA; QL
naproxen oral suspension	1		BENZHYDROCODONE-ACETAMINOPHEN	3	QL
naproxen oral tablet	1		buprenorphine	3	PA; QL
naproxen oral tablet delayed release	3		butalbital-acetaminophen	3	
naproxen sodium er	3		butalbital-apap-caff-cod	3	QL
naproxen sodium oral tablet 275 mg, 550 mg	1		butalbital-apap-caffeine oral capsule	3	
naproxen-esomeprazole mg	5	PA; QL	butalbital-apap-caffeine oral tablet	1	
OXaprozin Oral Capsule	5	PA; QL	butalbital-asa-caff-codeine	3	QL
oxaprozin oral tablet	3		butalbital-aspirin-caffeine	1	
PENNSAID	3	PA	butorphanol tartrate nasal	3	QL
piroxicam oral	1		BUTRANS	3	PA; QL
RELAFEN DS	3	PA	codeine sulfate	1	QL
salsalate oral	1		CONZIP	3	PA; QL
SPRIX	3		DILAUDID ORAL	3	QL
sulindac oral	1		endocet	1	QL
TOLECTIN 600	3		fentanyl transdermal patch 72 hour 100 mcg/hr, 12 mcg/hr, 25 mcg/hr, 50 mcg/hr, 75 mcg/hr	1	PA; QL
tolmetin sodium oral capsule	1		fentanyl transdermal patch 72 hour 37.5 mcg/hr, 62.5 mcg/hr, 87.5 mcg/hr	3	PA; QL
tolmetin sodium oral tablet	3		FIORICET	3	
VIMOVO	5	PA; QL	FIORICET/CODEINE	3	QL
ZIPSOR	3	PA	hydrocodone bitartrate er	3	PA; QL
ZYNRELEF	3		hydrocodone-acetaminophen oral solution 10-325 mg/15ml	3	QL

### Analgesics - Drugs for Pain

Effective Date: 07/01/2025

Drug Name	Drug Tier	Notes	Drug Name	Drug Tier	Notes
hydrocodone-acetaminophen oral solution 2.5-108 mg/5ml, 5-217 mg/10ml, 7.5-325 mg/15ml	1	QL	NUCYNTA	3	PA; QL
			NUCYNTA ER	3	PA; QL
			oxycodone hcl oral capsule	3	QL
hydrocodone-acetaminophen oral tablet 10-300 mg, 2.5-325 mg, 5-300 mg, 7.5-300 mg	3	QL	oxycodone hcl oral concentrate	1	QL
			oxycodone hcl oral solution	1	QL
hydrocodone-acetaminophen oral tablet 10-325 mg, 5-325 mg, 7.5-325 mg	1	QL	oxycodone hcl oral tablet	1	QL
hydrocodone-ibuprofen	3	QL	OXYCODONE HCL ORAL TABLET ABUSE-DETERRENT	5	PA; QL
hydromorphone hcl er	3	PA; QL	OXYCODONE-ACETAMINOPHEN ORAL SOLUTION 10-300 MG/5ML	5	PA; QL
hydromorphone hcl oral	1	QL			
hydromorphone hcl rectal	1	QL	OXYCODONE-ACETAMINOPHEN ORAL SOLUTION 5-325 MG/5ML	2	QL
HYSINGLA ER	3	PA; QL			
JOURNAVX	3	PA	OXYCODONE-ACETAMINOPHEN ORAL TABLET 10-300 MG, 2.5-300 MG, 5-300 MG, 7.5-300 MG	3	QL
levorphanol tartrate oral	1	PA; QL	METHADOSE ORAL CONCENTRATE 10 MG/ML		
meperidine hcl oral tablet	3	QL	oxycodone-acetaminophen oral tablet 10-325 mg, 2.5-325 mg, 5-325 mg, 7.5-325 mg	1	QL
methadone hcl intensol	1	QL	OXYCONTIN	2	ST; QL
methadone hcl oral	1	QL	oxymorphone hcl	3	QL
METHADOSE SUGAR-FREE	3	QL	oxymorphone hcl er	3	PA; QL
morphine sulfate (concentrate) oral solution 100 mg/5ml	1	QL	pentazocine-naloxone hcl	3	QL
morphine sulfate er beads	3	ST; QL	PERCO CET	3	QL
morphine sulfate er oral capsule extended release 24 hour	3	PA; QL	PROLATE ORAL SOLUTION	5	PA; QL
morphine sulfate er oral tablet extended release			PROLATE ORAL TABLET	3	QL
morphine sulfate oral	1	QL	ROXICODONE	3	QL
morphine sulfate rectal	1	QL	ROXYBOND	5	PA; QL
MS CONTIN	3	ST; QL	tencon	3	
NALOCET	3	QL			

Drug Name	Drug Tier	Notes	Drug Name	Drug Tier	Notes
TRAMADOL HCL (ER BIPHASIC) ORAL CAPSULE EXTENDED RELEASE 24 HOUR	3	PA; QL	lidocaine hcl (pf) injection solution 1 %, 2 %	1	
tramadol hcl (er biphasic) oral tablet extended release 24 hour	3	PA; QL	lidocaine hcl external cream 3 %	3	
tramadol hcl er	3	PA; QL	LIDOCAINE HCL EXTERNAL CREAM 4.12 %	3	
TRAMADOL HCL ORAL SOLUTION	5	PA; QL	lidocaine hcl external lotion	3	PA
tramadol hcl oral tablet 100 mg, 50 mg	1	QL	lidocaine hcl external solution	3	
tramadol hcl oral tablet 25 mg, 75 mg	3	PA; QL	lidocaine hcl injection solution 0.5 %	1	
tramadol-acetaminophen	1	QL	LIDOCAINE HCL INJECTION SOLUTION	3	
TREZIX	3	QL	PREFILLED SYRINGE 10 MG/ML, 200 MG/10ML		
XTAMPZA ER	5	PA; QL	lidocaine hcl solution 1 % injection	1	
<b>Anesthetics</b>					
AGONEAZE	3		LIDOCAINE HCL SOLUTION 1 %	3	
ANODYNE LPT	3		INJECTION		
ASTERO	3		lidocaine hcl solution 2 % injection	1	
BRUSELIX EXTERNAL CREAM	3		LIDOCAINE HCL SOLUTION 2 %	3	
COCAINE HCL NASAL	3		INJECTION		
CRYODOSE TA	3		lidocaine hcl solution prefilled syringe 100 mg/5ml injection	3	
DERMACINRX LIDO GEL	3				
EHA	3				
ethyl chloride	3		LIDOCAINE HCL SOLUTION PREFILLED	3	
GEBAUERS PAIN EASE	3		SYRINGE 100 MG/5ML		
GEBAUERS SPRAY AND STRETCH	3		INJECTION		
glydo	1		lidocaine hcl urethral/mucosal	1	
LDO PLUS	3		lidocaine-epinephrine solution 1 %-1:100000	3	
LEVATIO	3		injection		
LIDO BDK	3		LIDOCAINE-		
lidocaine external ointment 5 %	3		EPINEPHRINE SOLUTION 1 %-1:100000	3	
lidocaine external patch 5 %	1		INJECTION		
lidocaine hcl (pf) injection solution 0.5 %, 1.5 %	3		lidocaine-prilocaine	1	
			LIDOCAN	3	

Effective Date: 07/01/2025

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

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

Effective Date: 07/01/2025

Drug Name	Drug Tier	Notes	Drug Name	Drug Tier	Notes
demecloxycycline hcl	3		linezolid oral	1	QL
dicloxacillin sodium	1		MACROBID	3	
DIFICID	5	PA; QL	MACRODANTIN	3	
DORYX MPC	5	PA; QL	methenamine hippurate	1	
doxycycline hyclate oral capsule	1		methenamine mandelate oral	3	
doxycycline hyclate oral tablet	1		metronidazole oral capsule	3	
doxycycline hyclate oral tablet delayed release 100 mg, 150 mg, 200 mg, 50 mg, 75 mg	3		metronidazole oral tablet 125 mg	3	PA
DOXYCYCLINE HYCLATE ORAL TABLET DELAYED RELEASE 80 MG	3		metronidazole oral tablet 250 mg, 500 mg	1	
doxycycline monohydrate oral capsule	1		metronidazole vaginal	1	
doxycycline monohydrate oral suspension reconstituted	3		minocycline hcl er	3	PA
doxycycline monohydrate oral tablet	1		minocycline hcl oral capsule	1	
E.E.S. 400	3		minocycline hcl oral tablet	3	
E.E.S. GRANULES	3		monodoxine nl	1	
ERYPED 400	3		moxifloxacin hcl oral	1	
erythromycin base oral	3		mupirocin cream	1	
erythromycin ethylsuccinate oral suspension reconstituted	1		mupirocin ointment	1	
erythromycin oral	3		neomycin sulfate oral	1	
FIRVANQ	2		neomycin-polymyxin b gu	3	
fosfomycin tromethamine	3		nitrofurantoin macrocrystal	1	
gentamicin sulfate external	1		nitrofurantoin monohydrate macrocrystals	1	
HIPREX	3		nitrofurantoin oral suspension 25 mg/5ml, 50 mg/10ml	1	
HUMATIN	3		NITROFURANTOIN ORAL SUSPENSION 50 MG/5ML	5	PA; QL
levofloxacin oral	1		NUVESSA	3	
LIKMEZ	3	PA	NUZYRA ORAL	5	QL
LINCOCIN	3		ofloxacin oral	3	
lincomycin hcl injection	3		penicillin v potassium	1	
			SEYSARA	5	PA; QL
			SILVADENE	3	
			silver nitrate external	3	

Effective Date: 07/01/2025

Drug Name	Drug Tier	Notes	Drug Name	Drug Tier	Notes
silver sulfadiazine external	1		fondaparinux sodium	4	QL
SIVEXTRO ORAL	4	QL	FRAGMIN SUBCUTANEOUS SOLUTION 10000 UNIT/4ML	3	
SOLOSEC	3				
ssd	1		FRAGMIN SUBCUTANEOUS SOLUTION 95000 UNIT/3.8ML	3	PA
streptomycin sulfate intramuscular	3				
sulfadiazine oral	3		FRAGMIN SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	3	
sulfamethoxazole-trimethoprim oral	1				
SULFAMYLON	3		heparin sodium (porcine) injection solution 1000 unit/ml, 10000 unit/ml, 5000 unit/ml	1	
sulfatrim pediatric	1				
TARGADOX	3		heparin sodium (porcine) pf	1	
tazicef injection	1		jantoven	1	
tetracycline hcl oral capsule	1		LOVENOX	3	
TETRACYCLINE HCL ORAL TABLET	3		PRADAXA ORAL CAPSULE	3	
tinidazole oral	3		VANCOCIN	5	PA; QL
trimethoprim oral	1		vancomycin hcl oral capsule	1	QL
			PRADAXA ORAL PACKET	5	PA; QL
			REGIOCIT	3	
vancomycin hcl oral solution reconstituted	1		rivaroxaban	1	PA
VANDAZOLE	3		SAVAYSA	3	PA
XACIATO	3		warfarin sodium oral	1	
XIFAXAN	5	PA; QL	XARELTO ORAL SUSPENSION RECONSTITUTED	5	PA; QL
ZITHROMAX ORAL	3		ZITHROMAX TRI-PAK	3	
ZITHROMAX Z-PAK	3		ZITHROMAX Z-PAK	2	PA
ZYVOX ORAL	5	PA; QL	ZYVOX ORAL	1	PA
<b>Anticoagulants</b>			XARELTO ORAL TABLET 2.5 MG	1	PA
ARIXTRA	5	PA; QL	XARELTO STARTER PACK	2	PA
dabigatran etexilate mesylate	1		<b>Anticonvulsants - Drugs for Seizures</b>		
ELIQUIS	3	PA	APTIOM	5	PA; QL
ELIQUIS DVT/PE STARTER PACK	3	PA	BANZEL	5	QL
enoxaparin sodium	1		BRIVIACT ORAL	5	PA; QL
			carbamazepine er	1	

Effective Date: 07/01/2025

Drug Name	Drug Tier	Notes	Drug Name	Drug Tier	Notes
carbamazepine oral	1		LAMICTAL ODT	3	PA
CARBATROL	3		LAMICTAL STARTER	3	PA
CELONTIN	3		LAMICTAL XR	3	PA
clobazam oral suspension 2.5 mg/ml	1		lamotrigine er	3	
clobazam oral tablet	1		lamotrigine oral kit	3	
DEPAKOTE	3		lamotrigine oral tablet chewable	1	
DEPAKOTE ER	3		lamotrigine oral tablet dispersible	3	
DEPAKOTE SPRINKLES	3		lamotrigine starter kit-blue	3	
DIACOMIT	5	PA; QL	lamotrigine starter kit-green	3	
diazepam rectal	1	QL	lamotrigine starter kit-orange	3	
DILANTIN INFATABS	3		levetiracetam er	1	
DILANTIN ORAL CAPSULE 100 MG	3		levetiracetam oral solution	1	
DILANTIN ORAL CAPSULE 30 MG	2		levetiracetam oral tablet	1	
DILANTIN-125	3		LEVETIRACETAM ORAL TABLET DISINTEGRATING SOLUBLE	3	
divalproex sodium er	1		methsuximide	2	
divalproex sodium oral	1		MOTPOLY XR	5	PA; QL
ELEPSIA XR	5	PA; QL	MY SOLINE	5	PA
EPIDIOLEX	5	PA; QL	NAYZILAM	2	PA; QL
epitol	1		NEURONTIN	3	
EPRONTIA	3	PA	ONFI	5	PA; QL
eslicarbazepine acetate	5	PA; QL	oxcarbazepine	1	
ethosuximide oral	1		oxcarbazepine er	3	
felbamate	3	QL	OXTELLAR XR	3	
FELBATOL	5	PA; QL	pentobarbital sodium injection	3	
FINTEPLA	5	PA; QL	phenobarbital oral	1	
FYCOMPA	3	PA; QL	phenobarbital sodium injection solution 130 mg/ml	1	
gabapentin oral capsule	1		phenytek	3	
gabapentin oral solution	1		phenytoin infatabs	1	
gabapentin oral tablet 600 mg, 800 mg	1		phenytoin oral	1	
GABARONE	5	PA; QL			
KEPPRA ORAL	3	PA			
KEPPRA XR	3	PA			
lacosamide oral	1				
LAMICTAL	3	PA			

Drug Name	Drug Tier	Notes	Drug Name	Drug Tier	Notes
phenytoin sodium extended oral capsule 100 mg	1		VIMPAT ORAL	3	
phenytoin sodium extended oral capsule 200 mg, 300 mg	3		XCOPRI	5	PA; QL
phenytoin sodium injection	1		ZARONTIN	3	
primidone oral tablet 125 mg	3	PA; QL	ZONEGRAN	3	
primidone oral tablet 250 mg, 50 mg	1		ZONISADE	3	PA
roweepra	1		zonisamide oral	1	
rufinamide	5	QL	ZTALMY	5	PA; QL
SABRIL	5	PA; QL	<b>Antidementia Agents - Drugs for Alzheimer's Disease and Dementia</b>		
SPRITAM	3		ADLARITY	3	PA
subvenite	1		ARICEPT	3	
subvenite starter kit-blue	3		donepezil hcl	1	
subvenite starter kit-green	3		EXELON	3	
subvenite starter kit-orange	3		galantamine hydrobromide	1	
SYMPAZAN	5	QL	galantamine hydrobromide er	1	
TEGRETOL	3		memantine hcl er	3	PA
TEGRETOL-XR	3		memantine hcl oral solution	3	
tiagabine hcl	3		memantine hcl oral tablet 10 mg, 5 mg	1	
TOPAMAX	3	PA	memantine hcl oral tablet 28 x 5 mg & 21 x 10 mg	3	
TOPAMAX SPRINKLE	3		memantine hcl-donepezil hcl	3	
topiramate er	3	PA	NAMENDA TITRATION PAK	3	
topiramate oral	1		NAMZARIC	3	
TRILEPTAL	3		rivastigmine	3	
TROKENDI XR	3	PA	rivastigmine tartrate	1	
valproic acid oral	1		ZUNVEYL	3	PA
VALTOCO 10 MG DOSE	2	PA; QL	<b>Antidepressants</b>		
VALTOCO 15 MG DOSE	2	PA; QL	amitriptyline hcl oral	1	
VALTOCO 20 MG DOSE	2	PA; QL	amoxapine	1	
VALTOCO 5 MG DOSE	2	PA; QL	ANAFRANIL	3	
vigabatrin	5	PA; QL	APLENZIN	3	
VIGADRONE	5	PA; QL	AUVELITY	5	PA; QL
VIGAFYDE	5	PA; QL	bupropion hcl er (sr)	1	
vigpoder	5	PA; QL			

Effective Date: 07/01/2025

Drug Name	Drug Tier	Notes	Drug Name	Drug Tier	Notes
bupropion hcl er (xl) oral tablet extended release 24 hour 150 mg, 300 mg	1		fluoxetine hcl oral capsule	1	
BUPROPION HCL ER (XL) ORAL TABLET EXTENDED RELEASE 24 HOUR 450 MG	3	PA	fluoxetine hcl oral capsule delayed release	3	
bupropion hcl oral	1		fluoxetine hcl oral solution	1	
CELEXA	3		fluoxetine hcl oral tablet	1	
chlordiazepoxide-amitriptyline	3	QL	fluvoxamine maleate	1	
CITALOPRAM HYDROBROMIDE ORAL CAPSULE	3	PA	fluvoxamine maleate er	3	
citalopram hydrobromide oral solution	1		FORFIVO XL	3	PA
citalopram hydrobromide oral tablet	1		imipramine hcl oral	1	
clomipramine hcl oral	1		imipramine pamoate	3	
CYMBALTA	3		LEXAPRO	3	
desipramine hcl oral	1		MARPLAN	3	
DESVENLAFAKINE ER (authorized generic Khdezla)	3	PA	mirtazapine oral	1	
desvenlafaxine succinate er	1		NARDIL	3	
doxepin hcl oral capsule	1		nefazodone hcl	3	
doxepin hcl oral concentrate	1		NORPRAMIN	3	
DRIZALMA SPRINKLE	3		nortriptyline hcl oral	1	
duloxetine hcl oral capsule delayed release particles 20 mg, 30 mg, 60 mg	1		olanzapine-fluoxetine hcl	3	
duloxetine hcl oral capsule delayed release particles 40 mg	3		PAMELOR	3	
EFFEXOR XR	3		PARNATE	3	
EMSAM	5		paroxetine hcl	1	
escitalopram oxalate oral	1		paroxetine hcl er	1	
FETZIMA	3	PA	paroxetine mesylate	3	
FETZIMA TITRATION	3	PA	PAXIL	3	
fluoxetine hcl (pmdd)	3		PAXIL CR	3	
			perphenazine-amitriptyline	1	
			phenelzine sulfate oral	1	
			PRISTIQ	3	
			protriptyline hcl	1	
			PROZAC	3	
			RALDESY	5	PA; QL
			REMERON	3	
			REMERON SOLTAB	3	
			SERTRALINE HCL ORAL CAPSULE	3	
			sertraline hcl oral concentrate	1	

Effective Date: 07/01/2025

Drug Name	Drug Tier	Notes	Drug Name	Drug Tier	Notes
sertraline hcl oral tablet	1		dronabinol	1	
SPRAVATO (56 MG DOSE)	5	PA; QL	EMEND BIPACK	3	
SPRAVATO (84 MG DOSE)	5	PA; QL	EMEND ORAL	3	
SYMBYAX	3		EMEND TRIPACK	3	
tranylcypromine sulfate	1		GIMOTI	5	PA
trazodone hcl oral	1		granisetron hcl oral	1	
trimipramine maleate oral	3		MARINOL	3	
TRINTELLIX	3	PA; QL	meclizine hcl oral tablet 12.5 mg, 25 mg	3	
VENLAFAKINE BESYLATE ER	3		metoclopramide hcl injection	1	
venlafaxine hcl	1		metoclopramide hcl oral solution	1	
venlafaxine hcl er oral capsule extended release 24 hour	1		metoclopramide hcl oral tablet	1	
venlafaxine hcl er oral tablet extended release 24 hour	3		metoclopramide hcl oral tablet dispersible	3	
VIIBRYD	3	PA	ondansetron hcl +rfid	1	
vilazodone hcl	3	PA	ondansetron hcl injection	1	
WELLBUTRIN SR	3		ondansetron hcl oral	1	
WELLBUTRIN XL	3		ondansetron odt oral tablet dispersible 16 mg	3	PA
ZOLOFT	3		ondansetron odt oral tablet dispersible 4 mg, 8 mg	1	
ZURZUVAE	5	PA; QL	perphenazine oral	1	
<b>Antiemetics - Drugs for Nausea and Vomiting</b>			PHENERGAN	3	
AKYNZEO ORAL	3		prochlorperazine	1	
ANZEMET	3		prochlorperazine edisylate injection	1	
aprepitant oral	1		prochlorperazine maleate oral	1	
aprepitant oral capsule 125 mg, 80 & 125 mg, 80 mg	1		promethazine hcl injection	3	
aprepitant oral capsule 40 mg	3		promethazine hcl oral	1	
BONJESTA	3	PA	promethazine hcl rectal	1	
compro	1		promethegan	1	
DICLEGIS	3	PA	REGLAN	3	
dimenhydrinate injection	1		SANCUSO	3	PA
doxylamine-pyridoxine	3	PA	scopolamine	3	
			SYNDROS	3	

Effective Date: 07/01/2025

Drug Name	Drug Tier	Notes	Drug Name	Drug Tier	Notes
TIGAN	3	PA	ketoconazole external shampoo	1	
trimethobenzamide hcl oral	3	PA	ketoconazole oral	1	
VARUBI (180 MG DOSE)	3	PA; QL	ketodan	3	
<b>Antifungals</b>			klayesta	1	
ANCOBON	5	PA; QL	LULICONAZOLE	3	
BREXAFEMME	3	PA; QL	LUZU	3	
ciclodan	1		miconazole 3	3	
ciclopirox external	1		MICONAZOLE-ZINC OXIDE-PETROLAT	3	
ciclopirox olamine external	1		naftifine hcl	3	
clotrimazole external	3		NAFTIN	3	
clotrimazole mouth/throat	1		NOXAFL ORAL PACKET	3	
clotrimazole- betamethasone	1		NOXAFL ORAL SUSPENSION	5	PA; QL
CRESEMBA ORAL	4	PA; QL	NOXAFL ORAL TABLET DELAYED RELEASE	5	PA
DIFLUCAN ORAL SUSPENSION RECONSTITUTED	3		nyamyc	1	
DIFLUCAN ORAL TABLET 100 MG	3		nystatin external	1	
econazole nitrate external	3		nystatin mouth/throat	1	
ECOZA	3		nystatin oral	1	
ERTACZO	3		nystatin-triamcinolone	1	
EXELDERM	3		nystop	1	
exoderm external lotion	3		ORAVIG	3	
fluconazole oral	1		oxiconazole nitrate	3	
flucytosine oral	4	QL	OXISTAT	3	
griseofulvin microsize oral	1		posaconazole oral suspension	5	PA; QL
griseofulvin ultramicrosize oral tablet 125 mg, 250 mg	1		posaconazole oral tablet delayed release	5	PA
griseofulvin ultramicrosize oral tablet 165 mg	5	PA; QL	SPORANOX	3	PA
GYNAZOLE-1	3		tavaborole	3	PA
itraconazole oral	1	PA	terbinafine hcl oral	1	
JUBLIA	3	PA	terconazole vaginal cream	1	
ketoconazole external cream	1		terconazole vaginal suppository	3	
ketoconazole external foam	3		TOLSURA	3	PA
			VFEND	5	PA

Effective Date: 07/01/2025

Drug Name	Drug Tier	Notes	Drug Name	Drug Tier	Notes
VIVJOA	5	PA; QL	ERGOMAR	2	
voriconazole oral	1		ergotamine-caffeine	1	
VUSION	3		FROVA	3	PA
<b>Antigout Agents</b>			frovatriptan succinate	3	PA
allopurinol oral tablet 100 mg, 300 mg	1		IMITREX	3	
allopurinol oral tablet 200 mg	3	PA	IMITREX STATDOSE REFILL	3	
colchicine oral	1		IMITREX STATDOSE SYSTEM	3	
colchicine-probenecid	1		MAXALT	3	
febuxostat	1		MAXALT-MLT	3	
GLOPERBA	3		MIGERGOT	2	
MITIGARE	3		naratriptan hcl	1	
probenecid	1		NURTEC	3	PA; QL
ULORIC	3		QULIPTA	5	PA; QL
<b>Antimigraine Agents - Drugs for Migraines</b>			RELPAX	3	
SYMBRAVO	3	PA	REYVOW	3	PA; QL
<b>Antimigraine Agents</b>			rizatriptan benzoate	1	
AIMOVIG SUBCUTANEOUS SOLUTION AUTO- INJECTOR 140 MG/ML, 70 MG/ML	3	PA	sumatriptan nasal	1	
			sumatriptan succinate oral	1	
			sumatriptan succinate refill subcutaneous solution cartridge	1	
AJOVY	3	PA	sumatriptan succinate subcutaneous	1	
almotriptan malate	3	PA	sumatriptan-naproxen sodium	3	PA
CAMBIA	3	PA	TOSYMRA	3	
diclofenac potassium(migraine)	3	PA	TREXIMET	3	PA
dihydroergotamine mesylate injection	1	QL	TRUDHESA	3	PA
dihydroergotamine mesylate nasal	4		UBRELVY	3	PA; QL
eletiptan hydrobromide	1		ZAVZPRET	5	PA; QL
EMGALITY SUBCUTANEOUS SOLUTION AUTO- INJECTOR 120 MG/ML	3	PA	ZEMBRACE SYMTOUCH	3	
			ZOLMITRIPTAN NASAL SOLUTION 2.5 MG	3	
EMGALITY SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 100 MG/ML, 120 MG/ML	3	PA; QL	zolmitriptan nasal solution 5 mg	3	
			zolmitriptan oral	1	
			ZOMIG	3	

Effective Date: 07/01/2025

Drug Name	Drug Tier	Notes	Drug Name	Drug Tier	Notes
<b>Antimyasthenic Agents</b>			AVMAPKI FAKZYNJA CO-PACK	3	PA; QL
MESTINON ORAL SOLUTION	2		AYVAKIT	3	PA; QL
MESTINON ORAL TABLET	3		BALVERSA	3	PA; QL
MESTINON ORAL TABLET EXTENDED RELEASE	3		BESREMI	3	PA; QL
pyridostigmine bromide er	1		bexarotene	3	PA; QL
pyridostigmine bromide oral	1		bicalutamide	1	
VYVGART HYTRULO SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	5	PA; QL	BOSULIF	3	PA; QL
<b>Antimycobacterials</b>			BRAFTOVI	3	PA; QL
cycloserine oral	3		BRUKINSA	2	PA; QL
dapsone oral	1		CABOMETYX	3	PA; QL
ethambutol hcl oral	1		CALQUENCE	2	PA; QL
isoniazid oral	1		capecitabine	1	QL
PRETOMANID	3		CAPRELSA	3	PA; QL
PRIFTIN	2		CASODEX	3	
pyrazinamide oral	1		COMETRIQ	3	PA; QL
rifabutin	1		COPIKTRA	3	PA; QL
rifampin oral	1		COTELLIC	2	PA; QL
SIRTURO	5	PA; QL	cyclophosphamide oral capsule	1	
TRECATOR	3		CYCLOPHOSPHAMIDE ORAL TABLET	3	
<b>Antineoplastics - Drugs for Cancer</b>			DANZITEN	3	PA; QL
abiraterone acetate	1	QL	dasatinib	1	PA; QL
ABIRTEGA	3	PA; QL	DAURISMO	3	PA; QL
AFINITOR	3	PA; QL	DROXIA	2	
AFINITOR DISPERZ	3	PA; QL	ERIVEDGE	3	PA; QL
AKEEGA	3	PA; QL	ERLEADA	3	PA; QL
ALECensa	3	PA; QL	erlotinib hcl	1	PA; QL
ALUNBRIG	3	PA; QL	etoposide oral	1	QL
anastrozole oral	1		EULEXIN	3	QL
ARIMIDEX	3		everolimus oral tablet 10 mg, 2.5 mg, 5 mg, 7.5 mg	1	PA; QL
AROMASIN	3		everolimus oral tablet soluble	1	PA; QL
AUGTYRO	3	PA; QL	exemestane	1	
			FARESTON	3	PA
			FEMARA	3	
			FOTIVDA	3	PA; QL

Drug Name	Drug Tier	Notes	Drug Name	Drug Tier	Notes
FRUZAQLA	3	PA; QL	LENVIMA ORAL CAPSULE THERAPY		
GAVRETO	3	PA; QL	PACK 10 & 4 MG, 10 MG, 10 MG & 2 X 4 MG, 2 X 10 MG, 2 X 10 MG & 4 MG, 2 X 4 MG, 3 X 4 MG, 4 MG	3	PA; QL
gefitinib	2	PA; QL			
GILOTRIF	2	PA; QL			
GLEEVEC	3	QL			
GLEOSTINE	2		letrozole oral	1	
GOMEKLI	5	PA; QL	leucovorin calcium injection solution 100 mg/10ml		
HYCAMTIN ORAL	3	QL		3	
HYDREA	3				
hydroxyurea oral	1		leucovorin calcium oral	1	
IBRANCE	3	PA; QL	LEUKERAN	2	
ICLUSIG	3	PA; QL	LONSURF	3	PA; QL
IDHIFA	3	PA; QL	LORBRENA	3	PA; QL
imatinib mesylate	1	QL	LUMAKRAS	3	PA; QL
IMBRUVICA ORAL CAPSULE	2	PA; QL	LYNPARZA	3	PA; QL
IMBRUVICA ORAL SUSPENSION	3	PA; QL	LYSODREN	3	PA; QL
IMBRUVICA ORAL TABLET 140 MG, 420 MG	2	PA; QL	LYTGOBI (12 MG DAILY DOSE)	3	PA; QL
IMBRUVICA ORAL TABLET 280 MG	3	PA; QL	LYTGOBI (16 MG DAILY DOSE)	3	PA; QL
IMKELDI	3	PA; QL	LYTGOBI (20 MG DAILY DOSE)	3	PA; QL
INLYTA	3	PA; QL	MATULANE	2	QL
INQOVI	3	PA; QL	MEKINIST	2	PA; QL
INREBIC	3	PA; QL	MEKTOVI	3	PA; QL
IRESSA	3	PA; QL	mercaptopurine oral suspension	3	PA
ITOVEBI	3	PA; QL	mercaptopurine oral tablet	1	
JAKAFI	3	PA; QL	mesna	1	
JAYPIRCA	3	PA; QL	MESNEX ORAL	2	
KISQALI (200 MG DOSE)	3	PA; QL	MYLERAN	2	QL
KISQALI (400 MG DOSE)	3	PA; QL	NERLYNX	3	PA; QL
KISQALI (600 MG DOSE)	3	PA; QL	NEXAVAR	3	PA; QL
KOSELUGO	5	PA; QL	NILANDRON	3	PA
KRAZATI	3	PA; QL	nilotinib hcl	3	PA; QL
lapatinib ditosylate	1	PA; QL	nilutamide	3	PA
LAZCLUZE	3	PA; QL	NINLARO	3	PA; QL
lenalidomide	1	PA; QL	NUBEQA	2	PA; QL
			ODOMZO	3	PA; QL

Drug Name	Drug Tier	Notes	Drug Name	Drug Tier	Notes
OGSIVEO	3	PA; QL	TAZVERIK	3	PA; QL
OJEMDA	3	PA; QL	temozolomide	1	QL
OJJAARA	3	PA; QL	TEPMETKO	3	PA; QL
ONUREG	3	PA; QL	THALOMID	2	PA; QL
ORGOVYX	3	PA; QL	TIBSOVO	3	PA; QL
ORSERDU	3	PA; QL	toremifene citrate	3	PA
PANRETIN	3	PA; QL	torpenz	1	PA; QL
pazopanib hcl	1	PA; QL	tretinoin oral	1	QL
PEMAZYRE	3	PA; QL	TRUQAP	3	PA; QL
PIQRAY	3	PA; QL	TUKYSA	3	PA; QL
POMALYST	3	PA; QL	TURALIO	3	PA; QL
PURIXAN	3	PA	TYKERB	3	PA; QL
QINLOCK	3	PA; QL	VALCHLOR	5	PA; QL
RETEVMO	3	PA; QL	VANFLYTA	3	PA; QL
REVLIMID	3	PA; QL	VENCLEXTA	2	PA; QL
REVUFORJ	3	PA; QL	VENCLEXTA STARTING PACK	2	PA; QL
REZLIDHIA	3	PA; QL	VERZENIO	3	PA; QL
ROMVIMZA	3	PA; QL	VIJOICE	5	PA; QL
ROZLYTREK	2	PA; QL	VITRAKVI	3	PA; QL
RUBRACA	3	PA; QL	VIZIMPRO	3	PA; QL
RYDAPT	2	PA; QL	VONJO	3	PA; QL
SCEMBLIX	3	PA; QL	VORANIGO	3	PA; QL
SIKLOS	5	PA; QL	VOTRIENT	3	PA; QL
SOLTAMOX	3		WELIREG	3	PA; QL
sorafenib tosylate	1	PA; QL	XALKORI	3	PA; QL
SPRYCEL	3	PA; QL	XELODA	3	PA; QL
STIVARGA	2	PA; QL	XOSPATA	3	PA; QL
sunitinib malate	1	PA; QL	XPOVIO (100 MG ONCE WEEKLY)	3	PA; QL
SUTENT	3	PA; QL	XPOVIO (40 MG ONCE WEEKLY)	3	PA; QL
TABLOID	2		XPOVIO (40 MG TWICE WEEKLY)	3	PA; QL
TABRECTA	3	PA; QL	XPOVIO (60 MG ONCE WEEKLY)	3	PA; QL
TAFINLAR	2	PA; QL	XPOVIO (60 MG TWICE WEEKLY)	3	PA; QL
TAGRISSO	2	PA; QL	XPOVIO (80 MG ONCE WEEKLY)	3	PA; QL
TALZENNA	3	PA; QL	XPOVIO (80 MG TWICE WEEKLY)	3	PA; QL
tamoxifen citrate oral	1		XPOVIO (80 MG TWICE WEEKLY)	3	PA; QL
TARCEVA	3	PA; QL	XPOVIO (80 MG TWICE WEEKLY)	3	PA; QL
TARGETRETIN	3	PA; QL	XPOVIO (80 MG ONCE WEEKLY)	3	PA; QL
TASIGNA	3	PA; QL			

Drug Name	Drug Tier	Notes	Drug Name	Drug Tier	Notes
XPOVIO (80 MG TWICE WEEKLY)	3	PA; QL	permethrin external	1	
XROMI	5	PA; QL	PLAQUENIL	3	
XTANDI ORAL CAPSULE	2	PA; QL	praziquantel oral	1	
XTANDI ORAL TABLET	3	PA; QL	primaquine phosphate	1	
YONSA	3	PA; QL	pyrimethamine oral	4	PA; QL
ZEJULA	3	PA; QL	QUALAQUIN ORAL CAPSULE 324 MG	3	
ZELBORAF	2	PA; QL	quinine sulfate	1	
ZOLINZA	3	PA; QL	SOVUNA	3	
ZYDELIG	2	PA; QL	spinosad	3	
ZYKADIA	3	PA; QL	STROMECTOL	3	PA
ZYTIGA	3	PA; QL	<b>Antiparkinson Agents</b>		
<b>Antiparasitics</b>			amantadine hcl oral	1	
albendazole oral	1		APOKYN	5	PA; QL
atovaquone	4	QL	apomorphine hcl subcutaneous	5	PA; QL
BENZNIDAZOLE	3	QL	AZILECT	3	PA
BILTRICIDE	2		benztropine mesylate	1	
chloroquine phosphate oral	1		bromocriptine mesylate oral	1	
COARTEM	3		carbidopa oral	1	
CROTAN	2		carbidopa-levodopa er	1	
DARAPRIM	5	PA; QL	carbidopa-levodopa oral tablet	1	
ELIMITE	3		carbidopa-levodopa oral tablet dispersible 10-100 mg, 25-100 mg	1	
EMVERM	3		carbidopa-levodopa oral tablet dispersible 25-250 mg	3	
hydroxychloroquine sulfate oral	1		carbidopa-levodopa-entacapone	1	
IMPAVIDO	5	PA; QL	CREXONT	3	PA
ivermectin oral	3	PA	DHIVY	3	PA
KRINTAFEL	2		DUOPA	4	PA; QL
LAMPIT	3		entacapone	1	
malathion	3		GOCOVRI	5	PA; QL
MEPRON	5	PA; QL	INBRIJA	5	PA; QL
NATROBA	3		LODOSYN	3	
NEBUPENT	3		NEUPRO	3	
nitazoxanide oral	2				
OVIDE	3				
PENTAM	3				
pentamidine isethionate	3				

Effective Date: 07/01/2025

Drug Name	Drug Tier	Notes	Drug Name	Drug Tier	Notes
NOURIANZ	5	PA; QL	ABILIFY MYCITE STARTER KIT	5	PA; QL
ONGENTYS	3	PA; QL	aripiprazole oral solution	1	
PARLODEL	3		aripiprazole oral tablet	1	
pramipexole dihydrochloride	1		aripiprazole oral tablet dispersible	3	
pramipexole dihydrochloride er	3		ARISTADA	4	
rasagiline mesylate oral	1	PA	ARISTADA INITIO	4	
ropinirole hcl	1		asenapine maleate	3	PA
ropinirole hcl er	1		CAPLYTA	5	PA; QL
RYTARY	3	PA	chlorpromazine hcl injection	1	
selegiline hcl oral	1		chlorpromazine hcl oral concentrate	3	
SINEMET	3		chlorpromazine hcl oral tablet	1	
TASMAR	5	PA; QL	clozapine oral tablet	1	
tolcapone	5	QL	clozapine oral tablet dispersible	3	
trihexyphenidyl hcl	1		CLOZARIL	3	
XADAGO	3	PA	COBENFY	5	PA; QL
ZELAPAR	5	QL	COBENFY STARTER PACK	5	PA; QL
<b>Antiplatelets</b>			ERZOFRI	4	
aspirin-dipyridamole er	1		FANAPT	3	PA; QL
BRILINTA	3	PA	FANAPT TITRATION PACK	3	PA; QL
CABLIVI	5	PA; QL	fluphenazine decanoate injection	1	
cilostazol	1		fluphenazine hcl	1	
clopidogrel bisulfate oral	1		GEODON	3	
dipyridamole oral	1		HALDOL DECANOATE	3	
EFFIENT	3		haloperidol decanoate intramuscular	1	
PLAVIX	3		haloperidol lactate injection	1	
prasugrel hcl	1		haloperidol lactate oral concentrate 2 mg/ml	1	
ticagrelor	1		haloperidol oral	1	
YOSPRALA	3		INVEGA	3	
ZONTIVITY	3		INVEGA HAFYERA	4	
<b>Antipsychotics - Drugs for Mood Disorders</b>					
ABILIFY	3				
ABILIFY ASIMTUFI	4				
ABILIFY MAINTENA	4				
ABILIFY MYCITE MAINTENANCE KIT	5	PA; QL			

Effective Date: 07/01/2025

Drug Name	Drug Tier	Notes	Drug Name	Drug Tier	Notes
INVEGA SUSTENNA	4		RISPERDAL CONSTA SUSPENSION RECONSTITUTED ER 37.5 MG INTRAMUSCULAR	2	
INVEGA TRINZA	4				
LATUDA	5	PA			
loxpipine succinate	1				
lurasidone hcl	1		RISPERDAL CONSTA SUSPENSION RECONSTITUTED ER 50 MG INTRAMUSCULAR	1	
LYBALVI	5	PA; QL			
molindone hcl	3				
NUPLAZID	5	PA; QL	RISPERDAL CONSTA SUSPENSION RECONSTITUTED ER 50 MG INTRAMUSCULAR	2	
olanzapine	1				
OPIPZA	5	PA; QL			
paliperidone er	1		risperidone microspheres er	1	
PERSERIS	4		risperidone oral solution	1	
pimozide	1		risperidone oral tablet	1	
quetiapine fumarate	1		risperidone oral tablet dispersible	3	
quetiapine fumarate er	1				
REXULTI	3	PA; QL	RYKINDO	4	
RISPERDAL	3		SAPHRIS	3	PA
RISPERDAL CONSTA SUSPENSION RECONSTITUTED ER 12.5 MG INTRAMUSCULAR	1		SECUADO	3	PA
RISPERDAL CONSTA SUSPENSION RECONSTITUTED ER 12.5 MG INTRAMUSCULAR	2		SEROQUEL	3	
RISPERDAL CONSTA SUSPENSION RECONSTITUTED ER 12.5 MG INTRAMUSCULAR	2		SEROQUEL XR	3	
RISPERDAL CONSTA SUSPENSION RECONSTITUTED ER 25 MG INTRAMUSCULAR	1		thioridazine hcl oral	1	
RISPERDAL CONSTA SUSPENSION RECONSTITUTED ER 25 MG INTRAMUSCULAR	1		thiothixene	1	
RISPERDAL CONSTA SUSPENSION RECONSTITUTED ER 25 MG INTRAMUSCULAR	2		trifluoperazine hcl	1	
RISPERDAL CONSTA SUSPENSION RECONSTITUTED ER 25 MG INTRAMUSCULAR	2		UZEDY	4	
RISPERDAL CONSTA SUSPENSION RECONSTITUTED ER 25 MG INTRAMUSCULAR	1		VERSACLOZ	3	
RISPERDAL CONSTA SUSPENSION RECONSTITUTED ER 25 MG INTRAMUSCULAR	2		VRAYLAR	5	PA; QL
RISPERDAL CONSTA SUSPENSION RECONSTITUTED ER 25 MG INTRAMUSCULAR	2		ziprasidone hcl	1	
RISPERDAL CONSTA SUSPENSION RECONSTITUTED ER 25 MG INTRAMUSCULAR	2		ziprasidone mesylate	3	
RISPERDAL CONSTA SUSPENSION RECONSTITUTED ER 25 MG INTRAMUSCULAR	2		ZYPREXA	3	
			<b>Antivirals</b>		
RISPERDAL CONSTA SUSPENSION RECONSTITUTED ER 37.5 MG INTRAMUSCULAR	1		abacavir sulfate	1	
RISPERDAL CONSTA SUSPENSION RECONSTITUTED ER 37.5 MG INTRAMUSCULAR	1		abacavir sulfate-lamivudine	1	
RISPERDAL CONSTA SUSPENSION RECONSTITUTED ER 37.5 MG INTRAMUSCULAR	1		acyclovir external cream	3	
RISPERDAL CONSTA SUSPENSION RECONSTITUTED ER 37.5 MG INTRAMUSCULAR	1		acyclovir external ointment	1	
RISPERDAL CONSTA SUSPENSION RECONSTITUTED ER 37.5 MG INTRAMUSCULAR	1		acyclovir oral	1	

Drug Name	Drug Tier	Notes	Drug Name	Drug Tier	Notes
adefovir dipivoxil	1	QL	HARVONI	5	PA; QL
APTIVUS	4		INTELENCE ORAL TABLET 100 MG, 200 MG	3	
atazanavir sulfate	1				
BARACLUDE ORAL SOLUTION	4	QL	INTELENCE ORAL TABLET 25 MG	2	
BARACLUDE ORAL TABLET	5	PA; QL	ISENTRESS HD	2	
BIKTARVY	4		ISENTRESS ORAL PACKET	3	
CIMDUO	4		ISENTRESS ORAL TABLET	2	
COMPLERA	4	PA			
darunavir	1		ISENTRESS ORAL TABLET CHEWABLE	2	
DELSTRIGO	5	PA	JULUCA	4	
DENAVIR	3				
DESCOVY	4		KALETRA ORAL SOLUTION	2	
DOVATO	4		KALETRA ORAL TABLET	3	
EDURANT	2		LAGEVRIO	2	QL
EDURANT PED	5	PA; QL	lamivudine	1	
efavirenz	1		lamivudine-zidovudine	1	
efavirenz-emtricitab-tenofo df	1		LEDIPASVIR-SOFOSBUVIR	5	PA; QL
efavirenz-lamivudine-tenofovir	1		LIVTENCITY	5	PA; QL
emtricitabine	1		lopinavir-ritonavir	1	
emtricitabine-tenofovir df	1		maraviroc	4	
emtricitab-rilpivir-tenofov df	4	PA	MAVYRET	5	PA; QL
EMTRIVA ORAL CAPSULE	3	PA	nevirapine er	1	
EMTRIVA ORAL SOLUTION	2		nevirapine oral suspension	3	
entecavir	1		nevirapine oral tablet	1	
EPCLUSA	4	QL	NORVIR ORAL PACKET	2	
EPIVIR	3		NORVIR ORAL TABLET	3	
etravirine	1		ODEFSEY	4	
EVOTAZ	5		oseltamivir phosphate oral	1	
famciclovir oral	1		PAXLOVID	2	QL
fosamprenavir calcium	4		PAXLOVID (150/100)	2	QL
FUZEON	5		PAXLOVID (300/100)	2	QL
GENVOYA	4		PEGASYS	4	QL
			penciclovir	3	

Effective Date: 07/01/2025

Drug Name	Drug Tier	Notes	Drug Name	Drug Tier	Notes
PIFELTRO	5	PA	TRUVADA	5	
PREVYMIS ORAL	4	PA; QL	TYBOST	2	PA
PREZCOBIX	2		valacyclovir hcl oral	1	
PREZISTA ORAL SUSPENSION	2		VALCYTE	5	PA; QL
PREZISTA ORAL TABLET 150 MG, 75 MG	2		valganciclovir hcl	4	QL
PREZISTA ORAL TABLET 600 MG, 800 MG	3		VALTREX	3	
RELENZA DISKHALER	2		VEMLIDY	5	PA; QL
RETROVIR ORAL	3		VIRACEPT	2	
REYATAZ ORAL CAPSULE	5	PA	VIREAD ORAL POWDER	2	
REYATAZ ORAL PACKET	2		VIREAD ORAL TABLET 150 MG, 200 MG, 250 MG	2	
ribavirin inhalation	3		VIREAD ORAL TABLET 300 MG	3	PA
ribavirin oral	1	QL	VOSEVI	4	PA; QL
rimantadine hcl	1		XERESE	3	
ritonavir	1		XOFLUZA (40 MG DOSE)	3	
RUKOBIA	5	PA	XOFLUZA (80 MG DOSE)	3	
SELZENTRY ORAL SOLUTION	4		ZEPATIER	5	PA; QL
SELZENTRY ORAL TABLET	5		ZIAGEN	3	
SITAVIG	3		zidovudine	1	
SOFOSBUVIR-VELPATASVIR	4	QL	ZOVIRAX	3	
SOVALDI	5	PA; QL	Anxiolytics - Drugs for Anxiety		
STRIBILD	4	PA	alprazolam er	1	QL
SUNLENCA ORAL	5	PA	alprazolam intensol	3	QL
SYMFI	1		alprazolam oral tablet	1	QL
SYMTUZA	4		alprazolam oral tablet dispersible	3	QL
TAMIFLU	2		alprazolam xr	1	QL
tenofovir disoproxil fumarate	1		ATIVAN INJECTION SOLUTION 2 MG/ML	3	QL
TIVICAY	2		ATIVAN ORAL	3	QL
TIVICAY PD	2		BUCAPSOL	3	
TRIUMEQ	4		buspirone hcl oral	1	
TRIUMEQ PD	4		chlordiazepoxide hcl	1	QL
			clonazepam oral	1	QL
			clorazepate dipotassium	1	QL

Effective Date: 07/01/2025

Drug Name	Drug Tier	Notes	Drug Name	Drug Tier	Notes
diazepam injection solution 10 mg/2ml	1	QL	EQUETRO	3	
diazepam intensol	3	QL	lithium	1	
diazepam oral concentrate	3	QL	lithium carbonate er	1	
diazepam oral solution	1	QL	lithium carbonate oral	1	
diazepam oral tablet	1	QL	LITHOBID	3	
diazepam solution 5 mg/ml injection	1	QL	<b>Blood Products and Modifiers - Drugs for Blood Disorders</b>		
DIAZEPAM SOLUTION 5 MG/ML INJECTION	3	QL	AGRYLIN	3	
estazolam	3	QL	ALHEMO	5	PA; QL
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 injection solution 2 mg/ml	1	QL	DOPTELET	5	PA; QL
lorazepam intensol	1	QL	eltrombopag olamine	5	PA; QL
lorazepam oral concentrate 2 mg/ml	1	QL	EPOGEN	2	PA
lorazepam oral tablet	1	QL	FABHALTA	5	PA; QL
LOREEV XR	3	QL	FULPHILA	5	PA; QL
meprobamate	3		FYLNETRA	5	PA; QL
midazolam hcl (pf) injection solution 10 mg/2ml, 5 mg/ml	1	QL	GRANIX	4	QL
midazolam hcl injection solution 10 mg/2ml, 5 mg/ml	1	QL	HEMLIBRA	4	PA; QL
MIDAZOLAM HCL INJECTION SOLUTION 2 MG/2ML, 5 MG/5ML	3	QL	HYMPAVZI	5	PA; QL
midazolam hcl oral	3	QL	LEUKINE	2	
oxazepam	1	QL	MIRCERA	3	PA
quazepam	3	QL	MULPLETA	5	PA; QL
triazolam	1	QL	NEULASTA	5	PA; QL
VALIUM	3	QL	NEULASTA ONPRO	5	PA; QL
XANAX	3	QL	NEUPOGEN	5	PA; QL
XANAX XR	3	QL	NIVESTYM	4	PA; QL
<b>Bipolar Agents - Drugs for Mood Disorders</b>			NYPOZI	5	PA; QL
			NYVEPRIA	5	PA; QL
			PROCRIT	2	PA
			PROMACTA	5	PA; QL
			PYRUKYND	5	PA; QL
			PYRUKYND TAPER PACK	5	PA; QL
			QFITLIA	5	PA; QL
			RELEUKO	5	PA; QL

Effective Date: 07/01/2025

Drug Name	Drug Tier	Notes	Drug Name	Drug Tier	Notes
RETACRIT	3	PA	ATORVALIQ	3	PA
STIMUFEND	5	PA; QL	atorvastatin calcium oral	1	
TAVALISSE	5	PA; QL	ATTRUBY	5	PA; QL
tranexamic acid oral	1	QL	AVALIDE	3	
UDENYCA	5	PA; QL	AVAPRO	3	
VAFSEO	5	PA; QL	AZOR	3	
VOYDEYA	5	PA; QL	benazepril hcl oral	1	
XOLREMDI	5	PA; QL	benazepril-hydrochlorothiazide	1	
ZARXIO	4	PA; QL	BENICAR	3	
ZIEXTENZO	5	PA; QL	BENICAR HCT	3	
<b>Cardiovascular Agents - Drugs for Heart and Circulation Conditions</b>			BETAPACE	3	
ACCUPRIL	3		BETAPACE AF	3	
ACCURETIC	3		betaxolol hcl oral	1	
acebutolol hcl oral	1		BIDIL	3	
acetazolamide sodium	3		bisoprolol fumarate oral tablet 10 mg, 5 mg	1	
ALDACTONE	3		bisoprolol fumarate oral tablet 2.5 mg	3	
aliskiren fumarate	3	PA	bisoprolol-hydrochlorothiazide	1	
alprostadil injection	1		bumetanide oral	1	
ALTACE	3		BUMEX	3	
ALTOPREV	3		BYSTOLIC	3	
amiloride hcl oral	1		CADUET	3	
amiloride-hydrochlorothiazide	1		CAMZYOS	5	PA; QL
amiodarone hcl oral	1		candesartan cilexetil	3	
amlodipine besylate oral	1		candesartan cilexetil-hctz	3	
amlodipine besylate-benazepril hcl	1		captopril oral	1	
amlodipine besylate-valsartan	3	PA	captopril-hydrochlorothiazide	1	
amlodipine-atorvastatin	3		CARDIZEM	3	
amlodipine-olmesartan	1		CARDIZEM CD	3	
amlodipine-valsartan-hctz	3		CARDIZEM LA	3	
ASPRUZYO SPRINKLE	3	PA	CARDURA	3	
ATACAND	3		CAROSPIR	3	
ATACAND HCT	3		cartia xt	1	
atenolol oral	1		carvedilol	1	
atenolol-chlorthalidone	1				

Drug Name	Drug Tier	Notes	Drug Name	Drug Tier	Notes
carvedilol phosphate er	3		diltiazem hcl oral	1	
CATAPRES-TTS-1	3		dilt-xr	1	
CATAPRES-TTS-2	3		DIOVAN	3	
CATAPRES-TTS-3	3		DIOVAN HCT	3	
chlorthalidone	1		disopyramide phosphate	1	
cholestyramine light	1		DIURIL	2	
cholestyramine oral	1		dofetilide	1	
clonidine	1		doxazosin mesylate oral	1	
CLONIDINE ER	3		droxidopa	5	PA; QL
clonidine hcl oral	1		DYRENIUM	3	
colesevelam hcl	3		EDARBI	3	PA
COLESTID	3		EDARBYCLOR	3	PA
colestipol hcl	1		EDECIN	3	PA
CONJUPRI	3	PA	enalapril maleate oral solution	3	
COREG	3		enalapril maleate oral tablet	1	
COREG CR	3				
CORLANOR	3	PA	enalapril-hydrochlorothiazide	1	
COZAAR	3				
CRESTOR	3		ENTRESTO ORAL CAPSULE SPRINKLE	3	PA
DEMSER	3		ENTRESTO ORAL TABLET	2	PA; QL
DIBENZYLINE	5	PA; QL			
digoxin injection	1		EPANED	3	
digoxin oral solution	1		epinephrine injection solution 10 mg/10ml	1	
digoxin oral tablet 125 mcg, 250 mcg	1		epinephrine pf	1	
digoxin oral tablet 62.5 mcg	3		epinephrine solution 1 mg/ml injection	1	
diltiazem hcl er beads (generic Tiazac)	1		EPINEPHRINE SOLUTION 1 MG/ML INJECTION	3	
diltiazem hcl er coated beads (generic Cardizem CD)	1		eplerenone	1	
diltiazem hcl er oral capsule extended release 12 hour	1		ethacrynic acid	1	PA
diltiazem hcl er oral capsule extended release 24 hour	1		EXFORGE	3	PA
diltiazem hcl er oral tablet extended release 24 hour	3		EXFORGE HCT	3	PA
			EZALLOR SPRINKLE	3	
			ezetimibe	1	
			ezetimibe-simvastatin	1	
			felodipine er	1	

Effective Date: 07/01/2025

Drug Name	Drug Tier	Notes	Drug Name	Drug Tier	Notes
fenofibrate micronized	1		irbesartan-hydrochlorothiazide	1	
fenofibrate oral capsule 134 mg, 200 mg, 67 mg	1		ISORDIL TITRADOSE	3	
fenofibrate oral capsule 150 mg, 50 mg	3		isosorb dinitrate-hydralazine	3	
fenofibrate oral tablet 120 mg, 145 mg, 40 mg, 48 mg	3		isosorbide dinitrate	1	
fenofibrate oral tablet 160 mg, 54 mg	1		isosorbide mononitrate	1	
fenofibric acid	1		isosorbide mononitrate er	1	
flecainide acetate	1		isradipine	1	
FLOLIPID	3		ivabradine hcl	3	PA
fluvastatin sodium	3		JUXTAPID	5	PA; QL
fluvastatin sodium er	3		KAPSPARGO SPRINKLE	3	
fosinopril sodium	1		KATERZIA	3	
fosinopril sodium-hctz	1		labetalol hcl oral tablet 100 mg, 200 mg, 300 mg	1	
furosemide oral	1		labetalol hcl oral tablet 400 mg	3	
furosemide solution 10 mg/ml injection	1		LANOXIN	3	
FUROSEMIDE SOLUTION 10 MG/ML INJECTION	3		LANOXIN PEDIATRIC	3	
gemfibrozil oral	1		LASIX	3	
guanfacine hcl	1		LESCOL XL	3	
HEMANGEOL	3	PA	LEVAMLODIPINE MALEATE	3	PA
HEMICLOR	3		LIPITOR	3	
hydralazine hcl oral	1		LIPOFEN	3	
hydrochlorothiazide oral	1		lisinopril oral	1	
HYZAAR	3		lisinopril-hydrochlorothiazide	1	
icosapent ethyl	3	PA	LIVALO	3	
indapamide	1		LODOC	3	PA
INDERAL LA	3		LOPID	3	
INDERAL XL	3		LOPRESSOR	3	
INNOPRAN XL	3		losartan potassium oral	1	
INPEFA	3	PA	losartan potassium-hctz	1	
INSPRA	3		LOTENSIN	3	
INZIRQO	3	PA	LOTENSIN HCT	3	
irbesartan	1		LOTREL	3	
			lovastatin oral	1	

Drug Name	Drug Tier	Notes	Drug Name	Drug Tier	Notes
LOVAZA	3		NITRO-DUR		
matzim la	3		TRANSDERMAL PATCH		
methyldopa oral tablet 250 mg	1		24 HOUR 0.1 MG/HR, 0.2 MG/HR, 0.4 MG/HR, 0.6 MG/HR	3	
methyldopa oral tablet 500 mg	3		NITRO-DUR		
metolazone	1		TRANSDERMAL PATCH		
metoprolol succinate er	1		24 HOUR 0.3 MG/HR, 0.8 MG/HR	2	
metoprolol tartrate oral	1		nitroglycerin rectal	1	
metoprolol-hydrochlorothiazide	1		nitroglycerin sublingual	1	
metyrosine	3		nitroglycerin transdermal	1	
mexiletine hcl oral	1		nitroglycerin translingual	3	
MICARDIS	3		NITROLINGUAL	3	
MICARDIS HCT	3		NITROSTAT	3	
midodrine hcl	1		nitro-time oral capsule extended release 9 mg	1	
minoxidil oral	1		NORLIQVA	3	PA
moexipril hcl	1		NORPACE	3	
MULTAQ	3		NORPACE CR	2	
nadolol oral	1		NORTHERA	5	PA; QL
nebivolol hcl	1		NORVASC	3	
NEXICLON XR	3		NYMALIZE	5	QL
NEXLETOL	3	PA	olmesartan medoxomil oral	1	
NEXLIZET	3	PA	olmesartan medoxomil-hctz	1	
niacin (antihyperlipidemic)	3		olmesartan-amlodipine-hctz	1	
niacin er (antihyperlipidemic)	3		omega-3-acid ethyl esters	3	
niacor	3		pacerone	1	
nicardipine hcl oral	1		papaverine hcl injection	1	
nifedipine er	1		pentoxifylline er	1	
nifedipine er osmotic release	1		perindopril erbumine	1	
nifedipine oral	1		phenoxybenzamine hcl oral	4	QL
nimodipine oral capsule	1		phentolamine mesylate injection	1	
NIMODIPINE ORAL SOLUTION	5	QL	pindolol	1	
nisoldipine er	3		pitavastatin calcium	3	
NITRO-BID	2		PRALUENT	5	PA; QL

Effective Date: 07/01/2025

Drug Name	Drug Tier	Notes	Drug Name	Drug Tier	Notes
pravastatin sodium	1		TEKTURNA	3	PA
prazosin hcl oral	1		telmisartan	1	
PRESTALIA	3		telmisartan-amlodipine	3	
prevalite	1		telmisartan-hctz	3	
procainamide hcl injection	1		TENORETIC 100	3	
PROCARDIA XL	3		TENORETIC 50	3	
propafenone hcl	1		TENORMIN	3	
propafenone hcl er	1		THALITONE	3	
propranolol hcl er	1		tiadylt er	1	
propranolol hcl oral	1		TIAZAC	3	
PROSTIN VR	3		TIKOSYN	3	
QBRELIS	3		timolol maleate oral	1	
QUESTRAN	3		TOPROL XL	3	
QUESTRAN LIGHT	3		torsemide	1	
quinapril hcl	1		trandolapril	1	
quinapril-hydrochlorothiazide	1		trandolapril-verapamil hcl er	3	
quinidine gluconate er	1		triامترنے oral	1	
quinidine sulfate	1		triامترنے-hctz	1	
ramipril	1		TRIBENZOR	3	
ranolazine er	1		TRICOR	3	
RECTIV	3		TRYNGOLZA	5	PA; QL
REPATHA	3	PA	TRYVIO	3	PA
REPATHA PUSHTRONEX SYSTEM	3	PA	VALSARTAN ORAL SOLUTION	5	PA; QL
REPATHA SURECLICK	3	PA	valsartan oral tablet	1	
rosuvastatin calcium oral	1		valsartan-hydrochlorothiazide	1	
simvastatin oral	1		VASCEPA	3	PA
SOAANZ	3	PA	VASERETIC	3	
sotalol hcl (af)	1		VASOTEC	3	
sotalol hcl oral	1		VECAMYL	5	QL
SOTYLIZE	3		verapamil hcl er oral capsule extended release 24 hour 100 mg, 200 mg, 300 mg	3	
spironolactone oral suspension	3				
spironolactone oral tablet	1				
spironolactone-hctz	1				
SULAR	3				

Drug Name	Drug Tier	Notes	Drug Name	Drug Tier	Notes
verapamil hcl er oral capsule extended release 24 hour 120 mg, 180 mg, 240 mg, 360 mg	1		dexamphetamine hcl er	1	QL
verapamil hcl er oral tablet extended release	1		dextroamphetamine sulfate er	1	
verapamil hcl oral	1		dextroamphetamine sulfate oral solution	3	
VERELAN	3		dextroamphetamine sulfate oral tablet 10 mg, 5 mg	1	
VERQUVO	3	PA	dextroamphetamine sulfate oral tablet 15 mg, 2.5 mg, 20 mg, 30 mg, 7.5 mg	3	
VYNDAMAX	5	PA; QL			
VYNDAQEL	5	PA; QL			
VYTORIN	3				
WELCHOL	3		DYANAVEL XR	3	PA
ZESTORETIC	3		EVEKEO	3	PA
ZESTRIL	3		FOCALIN	3	
ZETIA	3		FOCALIN XR	3	QL
ZOCOR	3		guanfacine hcl er	1	
ZYPITAMAG	3		INTUNIV	3	
<b>Central Nervous System Agents - Drugs for Attention Deficit Disorder</b>			JORNAY PM	3	PA; QL
			lisdexamfetamine dimesylate	3	PA; QL
ADDERALL	2		METADATE CD	3	
ADDERALL XR	2		methamphetamine hcl	3	
ADZENYS XR-ODT	3	PA	METHYLIN	3	
amphetamine sulfate	3	PA	methylphenidate (generic Aptensio XR)	3	PA; QL
amphetamine-dextroamphetamine	1		methylphenidate hcl er (cd) (generic Metadate)	1	
amphetamine-dextroamphetamine er	1		methylphenidate hcl er (la) oral capsule extended release 24 hour 10 mg (generic Ritalin LA)	3	PA; QL
amphet-dextroamphet 3-bead er	3	PA; QL			
APTENSIO XR	3	PA; QL			
atomoxetine hcl	1		methylphenidate hcl er (la) oral capsule extended release 24 hour 20 mg, 30 mg, 40 mg, 60 mg (generic Ritalin LA, generic Methylin LA)	1	QL
AZSTARYS	3	PA			
clonidine hcl er	1				
CONCERTA	2				
COTEMPLA XR-ODT	3	PA; QL			
DAYTRANA	3	PA; QL	methylphenidate hcl er (osm) oral tablet extended release 18 mg, 27 mg, 36 mg, 54 mg, 72 mg (generic Concerta)	1	
DEXEDRINE	3				
dexamphetamine hcl	1				

Effective Date: 07/01/2025

Drug Name	Drug Tier	Notes	Drug Name	Drug Tier	Notes
METHYLPHENIDATE HCL ER (OSM) ORAL TABLET EXTENDED RELEASE 45 MG, 63 MG (authorized generic Relexxii ER)	3		VYVANSE	3	PA; QL
			XELSTRYM	3	PA
			zenzedi oral tablet 10 mg, 5 mg	1	
			ZENZEDI ORAL TABLET 15 MG, 2.5 MG, 20 MG, 30 MG, 7.5 MG	3	
methylphenidate hcl er (xr) (generic Aptensio XR)	3	PA; QL	<b>Central Nervous System Agents - Drugs for Multiple Sclerosis</b>		
methylphenidate hcl er oral tablet extended release (generic Methylin)	1		AMPYRA	5	PA; QL
methylphenidate hcl er oral tablet extended release 24 hour (generic Methylin)	1	QL	AUBAGIO	5	PA; QL
methylphenidate hcl oral solution (generic Methylin)	3		AVONEX PEN	4	PA; QL
			AVONEX PREFILLED	4	PA; QL
			BAFIERTAM	5	PA; QL
			BETASERON	4	QL
			COPAXONE	5	PA; QL
methylphenidate hcl oral tablet (generic Ritalin)	1		dalfampridine er	1	
methylphenidate hcl oral tablet chewable (generic Methylin)	3		dimethyl fumarate oral	1	
			dimethyl fumarate starter pack	1	
MYDAYIS	3	PA; QL	fingolimod hcl	1	QL
ONYDA XR	3	PA	GILENYA ORAL CAPSULE 0.25 MG	4	PA; QL
PROCENTRA	3		GILENYA ORAL CAPSULE 0.5 MG	5	PA; QL
QELBREE	3	PA	glatiramer acetate	4	QL
QUILLICHEW ER	3	PA	glatopa	4	QL
QUILLIVANT XR	3	PA; QL	KESIMPTA	5	PA; QL
RELEXXII ORAL TABLET EXTENDED RELEASE 18 MG, 27 MG, 36 MG, 45 MG, 54 MG, 63 MG	3	PA	MAVENCLAD	5	PA; QL
relexxii oral tablet extended release 72 mg	1	PA	MAYZENT	5	PA; QL
RITALIN	3		MAYZENT STARTER PACK	5	PA; QL
RITALIN LA ORAL CAPSULE EXTENDED RELEASE 24 HOUR 10 MG	3	PA; QL	PLEGRIDY	5	PA; QL
RITALIN LA ORAL CAPSULE EXTENDED RELEASE 24 HOUR 20 MG, 30 MG, 40 MG	3	QL	PLEGRIDY STARTER PACK	5	PA; QL
			PONVORY	5	PA; QL
			PONVORY STARTER PACK	5	PA; QL
			REBIF	4	PA; QL
STRATTERA	3		REBIF REBIDOSE	4	PA; QL

Effective Date: 07/01/2025

Drug Name	Drug Tier	Notes	Drug Name	Drug Tier	Notes
REBIF REBIDOSE TITRATION PACK	4	PA; QL	SAVELLA TITRATION PACK	3	PA
REBIF TITRATION PACK	4	PA; QL	TEGLUTIK	5	QL
TASCENO ODT	5	PA; QL	tetrabenazine	5	PA; QL
TECFIDERA	5	PA; QL	TIGLUTIK	5	QL
teriflunomide	1	QL	WAINUA	5	PA; QL
VUMERITY	5	PA; QL	XENAZINE	5	PA; QL
ZEPOSIA	5	PA; QL	ZEPBOUND	3	PA; QL
ZEPOSIA 7-DAY STARTER PACK	5	PA; QL	<b>Central Nervous System Agents</b>		
ZEPOSIA STARTER KIT	5	PA; QL	SKYCLARYS	5	PA; QL
<b>Central Nervous System Agents - Miscellaneous</b>			<b>Dental and Oral Agents - Drugs for Mouth and Throat Conditions</b>		
AUSTEDO	5	PA; QL	cevimeline hcl	3	
AUSTEDO XR	5	PA; QL	chlorhexidine gluconate mouth/throat	1	
AUSTEDO XR PATIENT TITRATION	5	PA; QL	DEBACTEROL	3	
caffeine citrate oral	1		EVOXAC	3	
CAFFEINE-SODIUM BENZOATE	3		FIRST-MOUTHWASH BLM	3	
DAYBUE	5	PA; QL	kourzeq	1	
gabapentin (once-daily)	3		lidocaine hcl mouth/throat	3	
GRALISE	3		lidocaine viscous hcl	1	
HORIZANT	3		oralone	1	
IMCIVREE	5	PA; QL	periogard	1	
INGREZZA	5	PA; QL	pilocarpine hcl oral	1	
LYRICA	3	QL	SALAGEN	3	
LYRICA CR	3	PA	triamcinolone acetonide mouth/throat	1	
NUDEXTA	3	PA	<b>Dermatological Agents - Drugs for Skin Conditions</b>		
phentermine-topiramate er	3	PA	ABSORICA	3	
pregabalin er	3	PA	ABSORICA LD	3	
pregabalin oral	1	QL	ACANYA	3	
QSYMIA	3	PA	accutane	1	
RADICAVA ORS	5	PA; QL	ACIOXIA	3	
RADICAVA ORS STARTER KIT	5	PA; QL	acitretin	1	QL
riluzole	1	QL	ACZONE	3	
SAVELLA	3	PA	adapalene external cream	1	
			adapalene external gel	1	

Effective Date: 07/01/2025

Drug Name	Drug Tier	Notes	Drug Name	Drug Tier	Notes
ADAPALENE EXTERNAL PAD	3		BENZOYL PEROXIDE EXTERNAL GEL 6.5 %, 8 %	3	
ADAPALENE EXTERNAL SOLUTION	3		BENZOYL PEROXIDE FORTE- HC	3	
adapalene-benzoyl peroxide external gel 0.1-2.5 %	1		benzoyl peroxide-erythromycin	1	
adapalene-benzoyl peroxide external gel 0.3-2.5 %	3		betamethasone dipropionate aug	1	
ADAPALENE-BENZOYL PEROXIDE EXTERNAL PAD	3	PA	betamethasone dipropionate external	1	
ADBRY	5	PA; QL	betamethasone valerate external	1	
ADVANCED ALLERGY COLLECTION	3		bp 10-1	3	
AKLIEF	3	PA	brimonidine tartrate external	3	
ALA SCALP	3		BRYHALI	3	
ala-cort	3		CABTREO	3	PA
alclometasone dipropionate	1		calcipotriene external cream	1	
ALTRENO	3		CALCIPOTRIENE EXTERNAL FOAM	3	
amcinonide	3		calcipotriene external ointment	1	
AMELUZ	2	QL	calcipotriene external solution	1	
ammonium lactate external	3		calcipotriene-betameth diprop	3	
amnesteem	1		calcitrene	1	
AMZEEQ	3		calcitriol external	1	
ARAZLO	3		cem-urea	3	
arzol silver nit applicators	3		CTRALIN	5	PA; QL
AVAR LS CLEANSER	3		claravis	1	
AVAR-E EMOLlient	3		CLEOCIN-T	3	
azelaic acid external	1		clindacin	3	
AZELEX	2		clindacin etz external swab	1	
BENZAMYCIN	3		clindacin-p	1	
BENZOYL PEROX-HYDROCORTISONE	3		CLINDAGEL	3	
			clindamycin phos (once-daily)	1	

Drug Name	Drug Tier	Notes	Drug Name	Drug Tier	Notes
clindamycin phos (twice-daily)	1		CLODERM	3	
clindamycin phos-benzoyl perox external gel 1.2-2.5 %, 1.2-3.75 %	3		CONDYLOX	3	
clindamycin phos-benzoyl perox external gel 1-5 %, 1.2-5 %	1		CORDRAN	2	
clindamycin phosphate external foam	3		dapsone external	3	
clindamycin phosphate external lotion	1		DERMACINRX UREA	3	
clindamycin phosphate external solution	1		DERMA-SMOOTH/FS BODY	3	
clindamycin phosphate external swab	1		DERMA-SMOOTH/FS SCALP	3	
clindamycin-tretinoin	3		desonide external cream	1	
clobetasol propionate e	1		desonide external gel	3	
clobetasol propionate emulsion	3		desonide external lotion	1	
CLOBETASOL PROPIONATE EXTERNAL CREAM 0.025 %	3	PA	desonide external ointment	1	
clobetasol propionate external cream 0.05 %	1		DESOWEN	3	
clobetasol propionate external foam	1		desoximetasone external cream	1	
clobetasol propionate external gel	1		desoximetasone external gel	1	
clobetasol propionate external liquid	1		desoximetasone external liquid	3	
clobetasol propionate external lotion	1		desoximetasone external ointment	1	
clobetasol propionate external ointment	1		diclofenac sodium external gel 3 %	3	
clobetasol propionate external shampoo	3		DIFFERIN EXTERNAL CREAM	3	
clobetasol propionate external solution	1		DIFFERIN EXTERNAL GEL 0.3 %	3	
CLOBEX	3		DIFFERIN EXTERNAL LOTION	2	
CLOBEX SPRAY	3		diflorasone diacetate	3	
clocortolone pivalate	3		DIPROLENE	3	
clodan	3		doxepin hcl external	3	
			doxycycline	3	PA
			DRYSOL	2	
			DUPIXENT	5	PA; QL
			DYCLOPRO	3	
			EBGLYSS	5	PA; QL
			ELIDEL	3	

Effective Date: 07/01/2025

Drug Name	Drug Tier	Notes	Drug Name	Drug Tier	Notes
EMROSI	5	PA; QL	HYDRO 40	3	
ENSTILAR	3		hydrocortisone ace-pramoxine external cream 2.5-1 %	1	
EPIDUO	3		hydrocortisone butyrate external cream	1	
EPIDUO FORTE	3		hydrocortisone butyrate external lotion	3	
EPIFOAM	3		hydrocortisone butyrate external ointment	1	
EPSOLAY	3	PA	hydrocortisone butyrate external solution	1	
ery pad 2%	3		hydrocortisone external cream 1 %	3	
ERYGEL	3		hydrocortisone external lotion 2 %	1	
erythromycin external	1		hydrocortisone external lotion 2.5 %	1	
EUCRISA	3	PA; QL	hydrocortisone external ointment 1 %, 2.5 %	3	
FABIOR	3		HYDROCORTISONE EXTERNAL SOLUTION	3	
FINACEA EXTERNAL FOAM	2		hydrocortisone valerate	1	
fluocinolone acetonide body	1		HYFTOR	5	PA; QL
fluocinolone acetonide external	1		imiquimod external cream 3.75 %	3	
fluocinolone acetonide scalp	1		imiquimod external cream 5 %	1	
fluocinonide emulsified base	1		imiquimod pump	3	
fluocinonide external	1		IMPOYZ	3	PA
fluorouracil external	1		isotretinoin oral	1	
flurandrenolide	3		ivermectin external cream	3	
fluticasone propionate external cream	1		KERALYT EXTERNAL GEL 6 %	3	
fluticasone propionate external lotion	3		KERALYT EXTERNAL SHAMPOO	3	
fluticasone propionate external ointment	1		KLARON	3	
halcinonide external cream	3		KLISYRI (250 MG)	5	PA; QL
HALCINONIDE EXTERNAL SOLUTION	3		KLISYRI (350 MG)	5	PA; QL
halobetasol propionate external cream	1		lactic acid e	3	
halobetasol propionate external foam	3				
halobetasol propionate external ointment	1				
HALOG	3				

Effective Date: 07/01/2025

Drug Name	Drug Tier	Notes	Drug Name	Drug Tier	Notes
LEVULAN KERASTICK	2	QL	PLEXION CLEANSER	3	
LEXETTE	3		PLEXION CLEANSING CLOTH	3	
LIDOCaine-HYDROCORTISONE ACE EXTERNAL	3		PODOCON-25	3	
			podofilox external	1	
LITFULO	5	PA; QL	PRAMOSONE EXTERNAL CREAM	2	
methoxsalen rapid	4	QL	PRAMOSONE EXTERNAL LOTION	2	
METROCREAM	3		PRUDOXIN	3	
METROGEL	3		PYROGALLIC ACID	3	
METROLOTION	3		QBREXZA	3	PA; QL
metronidazole external cream	1		RESORCINOL-SULFUR	3	
metronidazole external gel 0.75 %	1		RETIN-A	1	
metronidazole external gel 1 %	3		RETIN-A MICRO GEL 0.04 %, 0.1 %	1	
metronidazole external lotion	3		RETIN-A MICRO PUMP EXTERNAL GEL 0.04 %, 0.1 %	1	
MIRVASO	3		RETIN-A MICRO PUMP EXTERNAL GEL 0.06 %, 0.08 %	3	
mometasone furoate external	1		RHOFADE	3	
NEMLUVIO	5	PA; QL	salicylic acid external foam	3	
NEO-SYNALAR	3		salicylic acid external gel	3	
neuac	1		salicylic acid external shampoo	3	
NORITATE	3		salicylic acid external solution	3	
NUCORT	3		salicylic acid wart remover	3	
ONEXTON	3		SALIMEZ	3	
OPZELURA	5	PA; QL	SALIMEZ FORTE	3	
ORACEA	3	PA	SALVAX	3	
OVACE PLUS EXTERNAL CREAM	3		SALYCIM	3	
OVACE PLUS EXTERNAL SHAMPOO	3		SANTYL	2	
OVACE PLUS WASH	3		selenium sulfide external lotion	1	
OVACE WASH	3		selenium sulfide external shampoo 2.25 %	3	
pimecrolimus cream 1 % external	1				
PIMECROLIMUS CREAM 1 % EXTERNAL	1				
PLEXION	3				

Drug Name	Drug Tier	Notes	Drug Name	Drug Tier	Notes
SERNIVO	3		tacrolimus external	1	
sodium sulfacetamide external shampoo 10 %	1		tazarotene external cream	1	
sodium sulfacetamide wash	3		TAZAROTENE EXTERNAL FOAM	3	
SOFDRA	3	PA	tazarotene external gel	1	
SOOLANTRA	3		TAZORAC EXTERNAL CREAM 0.05 %	1	
SORILUX	3		TAZORAC EXTERNAL CREAM 0.1 %	3	
sss 10-5 external cream	3		TAZORAC EXTERNAL GEL	3	
SSS 10-5 EXTERNAL FOAM	3		TELIORA	3	
sulfacetamide sodium (acne)	1		TEXACORT	3	
sulfacetamide sodium (cleans)	3		TOLAK	3	PA
sulfacetamide sodium external	3		TOPICORT	3	
sulfacetamide sodium-sulfur external cream	3		TOPICORT SPRAY	3	
sulfacetamide sodium-sulfur external liquid 10-2 %, 9-4 %, 9-4.5 %, 9.8-4.8 %	3		tovet	3	
sulfacetamide sodium-sulfur external liquid 10-5 %	1		tretinoin external cream	1	
sulfacetamide sodium-sulfur external lotion 10-5 %	1		tretinoin external gel 0.01 %, 0.025 %	1	
sulfacetamide sodium-sulfur external lotion 9.8-4.8 %	3		tretinoin external gel 0.05 %	3	
sulfacetamide sodium-sulfur external suspension 10-5 %, 8-4 %	3		tretinoin microsphere external gel 0.04 %, 0.1 %	1	
sulfacetamide sod-sulfur wash	3		tretinoin microsphere external gel 0.08 %	3	
sulfacleanse 8/4	3		tretinoin microsphere pump external gel 0.04 %, 0.1 %	1	
sulfamez wash	3		tretinoin microsphere pump external gel 0.08 %	3	
SUMADAN WASH	3		triamcinolone acetonide external aerosol solution	3	
SUMAXIN	3		triamcinolone acetonide external cream	1	
synalar	1		triamcinolone acetonide external lotion	1	
TACLONEX	3		triamcinolone acetonide external ointment 0.025 %, 0.1 %, 0.5 %	1	
			triamcinolone acetonide external ointment 0.05 %	3	

Effective Date: 07/01/2025

Drug Name	Drug Tier	Notes	Drug Name	Drug Tier	Notes
triamcinolone in absorbase	3		ALOGLIPTIN BENZOATE	3	PA
triderm	1		ALOGLIPTIN-METFORMIN HCL	3	PA
TWYNEO	3	PA	ALOGLIPTIN-PIOGLITAZONE	3	PA
ULTRAVATE	3		BEXAGLIFLOZIN	3	PA
UMECTA MOUSSE	3		BRENZAVVY	3	PA
URAMAXIN	3		CYCLOSET	3	PA
urea external cream 39 %, 41 %, 45 %, 47 %	3		DAPAGLIFLOZIN PRO-METFORMIN ER	3	PA; QL
urea external cream 40 %	1		DAPAGLIFLOZIN PROPANEDIOL	3	PA; QL
UREA EXTERNAL FOAM	3		DUETACT	3	
urea nail	3		EXENATIDE	3	PA; QL
uredeb	3		FARXIGA	3	PA; QL
uremez-40	1		glimepiride	1	
URESOL	3		glipizide er	1	
VANOS	3		glipizide oral tablet 10 mg, 5 mg	1	
VANOXIDE-HC	3		glipizide oral tablet 2.5 mg	3	PA
VECTICAL	1		glipizide-metformin hcl	1	
VEREGEN	3		GLUCOTROL XL	3	
VIRASAL	3		glyburide micronized	3	
VTAMA	5	PA; QL	glyburide oral	1	
WINLEVI	3	PA	glyburide-metformin	3	
WYNZORA	5	PA; QL	GLYXAMBI	3	PA; QL
XALIX	3		INVOKAMET	3	PA; QL
xurea	3		INVOKAMET XR	3	PA; QL
ZACLIR CLEANSING	3		INVOKANA	3	PA; QL
zenatane	1		JANUMET	3	PA
ZIANA	3		JANUMET XR	3	PA
ZITHRANOL	3		JANUVIA	3	PA
ZONALON	3		JARDIANCE	2	QL
ZORYVE	3	PA	JENTADUETO	3	PA
ZYCLARA	3		JENTADUETO XR	3	PA
ZYCLARA PUMP	3		liraglutide	1	PA; QL
<b>Diabetes - Antidiabetic Agents</b>			metformin hcl er	1	
acarbose oral	1		metformin hcl er (mod)	3	PA
ACTOPLUS MET	3		ACTOS	3	

Effective Date: 07/01/2025

Drug Name	Drug Tier	Notes	Drug Name	Drug Tier	Notes	
metformin hcl er (osm) oral tablet extended release 24 hour 1000 mg	3	PA	TRADJENTA	3	PA	
metformin hcl er (osm) oral tablet extended release 24 hour 500 mg	3		TRIJARDY XR	3	PA; QL	
metformin hcl oral solution	1		TRULICITY	3	PA; QL	
metformin hcl oral tablet 1000 mg, 500 mg, 850 mg	1		VICTOZA	3	PA; QL	
metformin hcl oral tablet 625 mg, 750 mg	5	PA; QL	XIGDUO XR	3	PA; QL	
miglitol	3	PA	XULTOPHY	3	PA; QL	
MOUNJARO	3	PA; QL	ZITUVIMET	3	PA	
nateglinide	3		ZITUVIMET XR	3	PA	
ONGLYZA	3	PA	ZITUVIO	3	PA	
OZEMPIC	2	PA; QL	<b>Diabetes - Glucose Monitoring</b>			
pioglitazone hcl	3		ACCU-CHEK FASTCLIX LANCET KIT	1		
pioglitazone hcl-glimepiride	3		ACCU-CHEK GUIDE CONTROL	1		
pioglitazone hcl-metformin hcl	3		ACCU-CHEK GUIDE TEST	1	PA; QL	
repaglinide	3		ACCU-CHEK SMARTVIEW CONTROL	1		
RIOMET	3		ACCU-CHEK SOFTCLIX LANCET DEVICE KIT	1		
RYBELSUS	3	PA; QL	ADVOCATE SAFETY LANCETS 21G	1		
saxagliptin hcl	3	PA	ADVOCATE SAFETY LANCETS 23G	1		
saxagliptin-metformin er	3	PA	ADVOCATE SAFETY LANCETS 28G	1		
SEGLUROMET	3	PA; QL	AGAMATRIX CONTROL LEVEL 2	1		
SITAGLIPT BASE-METFORM HCL ER	3	PA	AGAMATRIX CONTROL LEVEL 4	1		
SITAGLIPTIN	2		AUTOLET II CLINISAFE	1		
SITAGLIPTIN BASE-METFORMIN HCL	3	PA	AUTOLET LANCING DEVICE	1		
SOLIQUA	3	PA; QL	AUTOLET LITE LANCING DEVICE	1		
STEGLATRO	3	PA; QL	BLULINK CONTROL HIGH & LOW	1		
STEGLUJAN	3	PA; QL	CARESENS CONTROL SOLUTION A/B	1		
SYMLINPEN 120	3		CARESENS LANCETS 30G	1		
SYMLINPEN 60	3					
SYNJARDY	3	PA; QL				
SYNJARDY XR	3	PA; QL				

Effective Date: 07/01/2025

Drug Name	Drug Tier	Notes	Drug Name	Drug Tier	Notes
CARETOUCH CONTROL SOL LEVEL 2	1		EASYMAX 15 LEVEL 2-3 CONTROL	1	
CARETOUCH LANCING/EJECTOR	1		EASYMAX CONTROL	1	
CHEMSTRIP 10 MD	2		GLUCOSE CONTROL SOLUTIONS	1	
CHEMSTRIP 10/SG	2		EMBRACE LANCING DEVICE/EJECTOR	1	
CHEMSTRIP 2 GP	2		EMBRACE TALK GLUCOSE CONTROL	1	
CHEMSTRIP 5 OB	2		FREESTYLE TEST	1	PA; QL
CHEMSTRIP 7	2		GENTEEL LANCING KIT (BLUE)	1	
CHEMSTRIP 9	2		GOJJI CONTROL	1	
CHOSEN LANCETS 30G	1		GOJJI LANCING DEVICE/CLEAR CAP	1	
CHOSEN LANCING DEVICE	1		IHEALTH CONTROL SOLUTION	1	
CHOSEN SAFETY LANCETS 28G	1		IHEALTH LANCING DEVICE	1	
CLEVER CHOICE COMFORT EZ	1		LANCETS	1	
COMFORT TOUCH TWIST LANCET 30G	1		LANCETS 28G THIN	1	
CONTOUR CONTROL SOLUTION	1		LANCETS SUPER THIN	1	
CONTOUR NEXT CONTROL SOLUTION	1		MICROLET NEXT LANCING DEVICE	1	
CONTOUR NEXT GEN TEST STRIPS	1	PA; QL	MOBILE LANCETS 30G	1	
DIASTIX REAGENT	3		ONETOUCH DELICA PLUS LANCING	1	
DIATHRIVE GLUCOSE CONTROL SOLN	1		ONETOUCH DELICA SAFETY LANCING	1	
DIATHRIVE LANCING DEVICE	1		ONETOUCH ULTRA 2 KIT W/DEVICE	1	
DROPLET GENTEEL LANCING DEVICE	1		ONETOUCH ULTRA BLUE TEST	1	QL
DROPSAFE ACTI-LANCE 23G	1		ONETOUCH ULTRA IN VITRO LIQUID	1	
EASY TALK PLUS II CONTROL	1		ONETOUCH ULTRA IN VITRO STRIP	1	QL
EASY TOUCH HEALTHPRO HIGH/LOW	1		ONETOUCH ULTRA TEST STRIPS	1	QL
EASY TOUCH LANCING DEVICE	1		ONETOUCH VERIO FLEX SYSTEM KIT	1	
EASY TRAK II CONTROL	1		ONETOUCH VERIO IN VITRO LIQUID HIGH	1	

Effective Date: 07/01/2025

Drug Name	Drug Tier	Notes	Drug Name	Drug Tier	Notes
ONETOUCH VERIO TEST STRIPS	1	QL	GVOKE KIT	5	PA; QL
ONETOUCH VERIO REFLECT KIT W/DEVICE	1		GVOKE PFS	5	QL
PERFECT POINT SAFETY LANCETS	1		PROGLYCEM	3	
			ZEGALOGUE	3	PA
			<b>Diabetes - Insulins</b>		
PIP GLUCOSE CONTROL SOLUTION	1		ADMELOG	3	
TECHLITE LANCETS 26G	1		ADMELOG SOLOSTAR	3	
TRUE METRIX LEVEL 1	1		AFREZZA	3	PA
TRUE METRIX LEVEL 2	1		APIDRA SOLOSTAR	3	
TRUE METRIX LEVEL 3	1		APIDRA VIAL	3	
UNISTRIP CONTROL IN VITRO SOLUTION LOW	1		AQ INSULIN SYRINGE	1	
VERIFINE SAFE LANCET MINI 21G	1		BASAGLAR KWIKPEN	3	PA
VERIFINE SAFE LANCET MINI 23G	1		BASAGLAR TEMPO PEN	3	PA
VERIFINE SAFE LANCET MINI 28G	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 30G	1		VIVAGUARD INO CONTROL SOLUTION	1	
VIVAGUARD LANCETS 30G	1		VIVAGUARD LANCING DEVICE	1	
VIVAGUARD SAFETY LANCETS 28G	1		VIVAGUARD SAFETY LANCETS 28G	1	
<b>Diabetes - Glycemic Agents</b>			EMBECTA INS SYR U/F 1/2 UNIT	1	
BAQSIMI ONE PACK	2		EMBECTA INSULIN SYR ULTRAFINE	1	
BAQSIMI TWO PACK	2		EMBECTA INSULIN SYRINGE	1	
diazoxide oral	2		EMBECTA INSULIN SYRINGE U-100	1	
glucagon emergency kit	1		EMBECTA INSULIN SYRINGE U-500	1	
GLUCAGON EMERGENCY KIT	3		GVOKE HYPOOPEN 1-PACK	5	QL
GVOKE HYPOOPEN 1-PACK	5	QL	FIASP	3	
GVOKE HYPOOPEN 2-PACK	5	QL	FIASP FLEXTOUCH	3	
			FIASP PENFILL	3	

Effective Date: 07/01/2025

Drug Name	Drug Tier	Notes	Drug Name	Drug Tier	Notes
FIASP PUMPCART	3		INSULIN LISPRO	2	
HUMALOG	2		INSULIN LISPRO (1 UNIT DIAL)	2	
HUMALOG KWIKPEN	2		INSULIN LISPRO JUNIOR KWIKPEN	3	
HUMALOG MIX 50/50 KWIKPEN	3		INSULIN LISPRO PROT & LISPRO	3	
HUMALOG MIX 75/25 KWIKPEN	3		INSULIN SYRINGES 27G X 1/2" 0.5 ML, 27G X 1/2" 1 ML, 27G X 5/8" 1 ML,		
HUMALOG TEMPO PEN	3	PA	28G X 1/2" 0.5 ML, 28G X 1/2" 1 ML, 29G X 1/2" 0.3		
HUMALOG U-100 JUNIOR KWIKPEN	2		ML, 29G X 1/2" 0.5 ML, 29G X 1/2" 1 ML, 29G X 5/16" 0.5 ML, 30G X 1/2" 0.3 ML,		
HUMULIN 70/30 KWIKPEN	2		30G X 1/2" 0.5 ML, 30G X 1/2" 1 ML, 30G X 5/16" 0.5		
HUMULIN 70/30 VIAL	2		ML, 30G X 5/16" 1 ML, 31G X 1/4" 0.3 ML, 31G X 1/4" 0.5 ML, 31G X 15/64" 0.3 ML,		
HUMULIN N KWIKPEN	2		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	1	
HUMULIN N VIAL	2		ML, 31G X 15/64" 1 ML, 31G X 15/64" 0.3 ML, 31G X 15/64" 0.5		
HUMULIN R U-500 KWIKPEN	1	PA	ML, 31G X 15/64" 0.5 ML, 31G X 15/64" 0.5 ML, 31G X 15/64" 0.5		
HUMULIN R U-500 VIAL	1	PA	ML, 31G X 15/64" 0.5 ML, 31G X 15/64" 0.5 ML, 31G X 15/64" 0.5		
HUMULIN R VIAL	1		ML, 31G X 15/64" 0.5 ML, 31G X 15/64" 0.5 ML, 31G X 15/64" 0.5		
INSULIN ASP PROT & ASP FLEXPEN	3		ML, 31G X 15/64" 0.5 ML, 31G X 15/64" 0.5 ML, 31G X 15/64" 0.5		
INSULIN ASPART	3		LANTUS SOLOSTAR	3	PA
INSULIN ASPART FLEXPEN	3		LANTUS U-100 VIAL	3	PA
INSULIN ASPART PENFILL	3		LYUMJEV KWIKPEN	3	PA
INSULIN ASPART PROT & ASPART	3		LYUMJEV TEMPO PEN	3	PA
INSULIN DEGLUDEC	2	PA	LYUMJEV VIAL	3	PA
INSULIN DEGLUDEC FLEXTOUCH	2	PA	NOVOLIN 70/30 FLEXPEN	3	PA
INSULIN GLARGINE MAX SOLOSTAR	3	PA	NOVOLIN 70/30 FLEXPEN RELION	3	PA
INSULIN GLARGINE SOLOSTAR SUBCUTANEOUS SOLUTION PEN-INJECTOR 300 UNIT/ML	3	PA	NOVOLIN 70/30 RELION	3	PA
INSULIN GLARGINE-YFGN	1		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

Effective Date: 07/01/2025

Drug Name	Drug Tier	Notes	Drug Name	Drug Tier	Notes
NOVOLIN R FLEXPEN RELION	3	PA	CUVRIOR cyanocobalamin injection solution 1000 mcg/ml	5 1	PA; QL
NOVOLIN R RELION	3	PA	cytra k crystals	1	
NOVOLIN R VIAL	3	PA	deferasirox granules	4	QL
NOVOLOG 70/30 FLEXPEN RELION	3		deferasirox oral packet	4	QL
NOVOLOG FLEXPEN	3		deferasirox oral tablet	1	
NOVOLOG FLEXPEN RELION	3		deferasirox oral tablet soluble	1	
NOVOLOG MIX 70/30 FLEXPEN	3		deferiprone	5	PA; QL
NOVOLOG MIX 70/30 RELION	3		DRISDOL	3	
NOVOLOG MIX 70/30 VIAL	3		EFFER-K ORAL TABLET EFFERVESCENT 10 MEQ, 20 MEQ	3	
NOVOLOG PENFILL	3		effer-k oral tablet effervescent 25 meq	3	
NOVOLOG RELION	3		ergocalciferol oral capsule	1	
NOVOLOG U-100 VIAL	3		EXJADE	5	PA; QL
REZVOGLAR KWIKPEN	3	PA	FERRIPROX ORAL SOLUTION	3	PA; QL
SEMGLEE (YFGN)	3	PA	FERRIPROX ORAL TABLET	5	PA; QL
TOUJEO MAX SOLOSTAR	3	PA	FERRIPROX TWICE-A-DAY	5	PA; QL
TRESIBA	3	PA	folic acid injection	1	
TRESIBA FLEXTOUCH	3	PA	folic acid oral tablet 1 mg	1	
ULTIGUARD SAFEPACK SYR/NEEDLE	1		FOLVITE-D	3	
VERIFINE INSULIN SYRINGE	1		iodine strong	3	
<b>Electrolytes / Minerals / Metals / Vitamins</b>			JADENU	5	PA; QL
ACCRUFER	3	PA	JADENU SPRINKLE	5	PA; QL
ARGYLE STERILE SALINE	1		JYNARQUE	5	PA; QL
argyle sterile water	3		KIONEX	3	
CARBAGLU	5	PA; QL	klor-con	1	
carglumic acid	5	PA; QL	klor-con 10	1	
CARNITOR ORAL	3		klor-con m10	1	
CARNITOR SF	3		klor-con m15	2	
CHEMET	3		klor-con m20	1	
curity sterile saline	1		klor-con/ef	3	
			K-PHOS	3	

Drug Name	Drug Tier	Notes	Drug Name	Drug Tier	Notes
K-PHOS NO 2	3		SODIUM CHLORIDE INJECTION SOLUTION 0.9 %	3	
K-PHOS-NEUTRAL	3		sodium chloride irrigation	1	
K-PRIME	3		sodium fluoride oral solution	1	
levocarnitine oral solution	1		sodium fluoride oral tablet	1	
levocarnitine oral tablet	1		sodium fluoride oral tablet 1.1 (0.5 f) mg	1	
levocarnitine sf	1		sodium fluoride oral tablet 2.2 (1 f) mg	3	
LOKELMA	3	PA	sodium fluoride oral tablet chewable	1	
ORACIT	2		sodium fluoride oral tablet chewable	1	
ORAL CITRATE	2		sps (sodium polystyrene sulf)	1	
phospha 250 neutral	1		sterile water for irrigation	3	
phosphorous	1		SYPRINE	5	PA; QL
phospho-trin 250 neutral	1		tolvaptan	5	PA; QL
PHOSPHO-TRIN K500	3		tricitrates	1	
PHOXILLUM B22K4/0	3		trientine hcl	5	PA; QL
PHOXILLUM BK4/2.5	3		UROCIT-K 10	3	
phytonadione injection	1		UROCIT-K 15	3	
phytonadione oral	1		VELTASSA	3	PA
POKONZA	5	PA; QL	vitamin d (ergocalciferol) oral capsule 1.25 mg (50000 ut), 50000 unit	1	
pot & sod cit-cit ac	1		vitamin k1 injection	1	
potassium chloride crys er oral tablet extended release 10 meq, 20 meq	1		water for irrigation, sterile	3	
potassium chloride crys er oral tablet extended release 15 meq	2		wes-phos 250 neutral	1	
potassium chloride er oral capsule extended release	1		<b>Gastrointestinal Agents - Drugs for Acid Reflux and Ulcer</b>		
potassium chloride er oral tablet extended release 10 meq, 20 meq, 8 meq	1		ACIPHEX	3	PA
potassium chloride er oral tablet extended release 15 meq	3		CARAFATE	3	
potassium chloride oral	1		cimetidine hcl	1	
potassium citrate er	1		cimetidine oral	1	
potassium citrate-citric acid	1		CYTOTEC	3	
SAMSCA	5	PA; QL	DEXILANT	3	PA
sod citrate-citric acid	1		dexlansoprazole	3	PA
sodium chloride (pf)	1		esomeprazole magnesium oral packet	3	PA

Effective Date: 07/01/2025

Drug Name	Drug Tier	Notes	Drug Name	Drug Tier	Notes
famotidine oral suspension reconstituted	1		belladonna alkaloids-opium	1	QL
famotidine oral tablet 20 mg, 40 mg	1		bis subcit-metronid-tetracyc	3	PA
FIRST-LANSOPRAZOLE	3		bismuth/metronidaz/tetracyclin	3	PA
FIRST-OMEPRAZOLE	3		CHENODAL	5	QL
KONVOMEP	3	PA	chlordiazepoxide-clidinium	1	QL
lansoprazole oral capsule delayed release	1		CLENPPIQ	3	
lansoprazole oral tablet delayed release dispersible	3	PA	constulose	1	
misoprostol oral	1		cromolyn sodium oral	3	
NEXIUM ORAL PACKET	3	PA	CTEXLI	5	QL
nizatidine	3		CUVPOSA	3	
omeprazole oral capsule delayed release	1		dicyclomine hcl intramuscular	3	
OMEPRAZOLE+SYRSPE ND SF ALKA	3		dicyclomine hcl oral capsule	1	
omeprazole-sodium bicarbonate oral packet	3	PA	dicyclomine hcl oral solution 10 mg/5ml	1	
pantoprazole sodium oral packet	3		dicyclomine hcl oral tablet	1	
pantoprazole sodium oral tablet delayed release	1		diphenoxylate-atropine	1	
PEPCID	3		enulose	1	
PREVACID	3		GASTROCROM	3	
PREVACID SOLUTAB	3	PA	GATTEX	5	PA; QL
PRILOSEC	3		gavilyte-c	1	
PROTONIX ORAL	3		gavilyte-g	1	
rabeprazole sodium oral tablet delayed release	1	ST	gavilyte-n with flavor pack	1	
sucralfate oral	1		generlac	1	
VOQUEZNA	3	PA; QL	GLYCATE	3	
<b>Gastrointestinal Agents - Drugs for Bowel, Intestine and Stomach Conditions</b>			glycopyrrolate injection solution	1	
alosetron hcl	5	QL	glycopyrrolate oral solution	3	
AMITIZA	3	PA; QL	glycopyrrolate oral tablet 1 mg, 2 mg	1	
amoxicill-clarithro-lansopraz	3		GLYCOPYRROLATE ORAL TABLET 1.5 MG	3	
ANASPAZ	3		GOLYTELY	3	
			HELDAC THERAPY	2	

Effective Date: 07/01/2025

Drug Name	Drug Tier	Notes	Drug Name	Drug Tier	Notes
hyoscyamine sulfate er	1		oscimin	1	
hyoscyamine sulfate injection	3		peg 3350-kcl-na bicarb-nacl	1	
hyoscyamine sulfate oral	1		peg-3350/electrolytes	1	
hyoscyamine sulfate sublingual	1		peg-3350/electrolytes/ascorbic acid	3	
hyosyne	1		peg-kcl-nacl-nasulf-na asc-c	3	
IBSRELA	5	PA; QL	PEG-PREP	3	
IQIRVO	5	PA; QL	PLENUVU	3	
KRISTALOSE	3		prucalopride succinate	3	PA; QL
lactulose encephalopathy	1		PYLERA	3	PA
lactulose oral packet	3		RELISTOR ORAL	3	PA; QL
lactulose oral solution	1		RELISTOR SUBCUTANEOUS	2	PA
LEVIBID	3		RELTONE	5	PA; QL
LEVSIN	3		REZDIFRA	5	PA; QL
LIBRAX	3	QL	SEROSTIM	5	PA; QL
LINZESS ORAL CAPSULE 145 MCG, 290 MCG	3	PA; QL	SUFLAVE	3	
LINZESS ORAL CAPSULE 72 MCG	3	PA	SUPREP BOWEL PREP KIT	3	
LIVDELZI	5	PA; QL	SUTAB	3	
LOMOTIL	3		SYMPROIC	3	PA; QL
loperamide hcl oral capsule	1		TALICIA	3	
LOTRONEX	5	PA; QL	TRULANCE	3	PA; QL
lubiprostone	3	PA; QL	URSO FORTE	3	
methscopolamine bromide oral	3		URSODIOL ORAL CAPSULE 200 MG, 400 MG	5	PA; QL
MOTEGRITY	3	PA; QL	ursodiol oral capsule 300 mg	1	
MOTOFEN	3		ursodiol oral tablet	1	
MOVANTIK	3	PA; QL	VIBERZI	3	PA
MOVIPREP	3		VOQUEZNA DUAL PAK	3	PA; QL
MYTESI	3		VOQUEZNA TRIPLE PAK	3	PA; QL
na sulfate-k sulfate-mg sulf	3		VOWST	5	PA; QL
nulev	1		XERMELO	5	PA; QL
OMECLAMOX-PAK	3		<b>Genetic or Enzyme Disorder - Drugs for Replacement, Modification, Treatment</b>		
opium	1	QL			

Effective Date: 07/01/2025

Drug Name	Drug Tier	Notes	Drug Name	Drug Tier	Notes	
betaine	3		VOXZOGO	5	PA; QL	
BUPHENYL	5	PA; QL	yargesa	5	PA; QL	
CERDELGA	4	PA; QL	ZAVESCA	5	PA; QL	
CHOLBAM	5	PA; QL	ZENPEP	2		
CREON	2		<b>Genitourinary Agents - Drugs for Bladder, Genital and Kidney Conditions</b>			
CRYSVITA	5	PA; QL	acetic acid irrigation	1		
CYSTADANE	3		AURYXIA	3	PA; QL	
CYSTAGON	2	PA	bethanechol chloride oral	1		
DUVYZAT	5	PA; QL	calcium acetate (phos binder)	1		
EVRYSDI	5	PA; QL	calcium acetate oral tablet 667 mg	1		
GALAFOLD	5	PA; QL	CERVIDIL	2		
JAVYGTOR	5	PA; QL	CUPRIMINE	5	PA; QL	
KUVAN	5	PA; QL	darifenacin hydrobromide er	1		
miglustat	5	PA; QL	DEPEN TITRATABS	5	PA; QL	
MYALEPT	5	PA; QL	DETROL	3		
nitisinone	5	PA; QL	ELMIRON	2		
NITYR	5	PA; QL	ENTADFI	3	PA	
OCALIVA	5	PA; QL	FEM PH	3		
OLPRUVA (2 GM DOSE)	5	PA; QL	FERRIC CITRATE	3	PA; QL	
OLPRUVA (3 GM DOSE)	5	PA; QL	fesoterodine fumarate er	3	PA	
OLPRUVA (4 GM DOSE)	5	PA; QL	FILSPARI	5	PA; QL	
OLPRUVA (5 GM DOSE)	5	PA; QL	flavoxate hcl	1		
OLPRUVA (6 GM DOSE)	5	PA; QL	FOSRENOL	5	PA; QL	
OLPRUVA (6.67 GM DOSE)	5	PA; QL	GEMTESA	3	PA	
OPFOLDA	3	PA	INTRAROSA	3	PA; QL	
ORFADIN	5	PA; QL	lanthanum carbonate	5	PA; QL	
PANCREAZE	3		LITHOSTAT	3		
PERTZYE	3		MB CAPS	3		
PHEBURANE	5	PA; QL	me/naphos(mb/hyo1	3		
PROCYSB1	5	PA; QL	mirabegron er	1		
RAVICTI	5	PA; QL	MYRBETRIQ	3		
sapropterin dihydrochloride	5	PA; QL	oxybutynin chloride er	1		
sodium phenylbutyrate oral	5	QL	oxybutynin chloride oral tablet 2.5 mg	3		
STRENSIQ	5	PA; QL				
SUCRAID	5	PA; QL				
VIOKACE	3					

Effective Date: 07/01/2025

Drug Name	Drug Tier	Notes	Drug Name	Drug Tier	Notes
oxybutynin chloride oral tablet 5 mg	1		uro-mp	3	
oxybutynin chloride solution 5 mg/5ml oral	1		VANRAFIA	5	PA; QL
OXYBUTYNIN CHLORIDE SOLUTION 5 MG/5ML ORAL	3	PA	VELPHORO	5	PA; QL
OXYTROL	3	PA	VENXXIVA	5	PA; QL
penicillamine oral	4	PA; QL	VESICARE	3	
PENTOSAN POLYSULFATE SODIUM ORAL	2		VESICARE LS	3	
phenazopyridine hcl oral tablet 100 mg, 200 mg	1		vilamit mb	3	
PREPIDIL	2		VILEVEV MB	3	
PYRIDIUM	3		<b>Genitourinary Agents - Drugs for Prostate Conditions</b>		
RENACIDIN	3		alfuzosin hcl er	1	
RENEVELA	3		AVODART	3	
RIMSO-50	3		CARDURA XL	3	
RIVFLOZA	5	PA; QL	dutasteride oral	1	
sevelamer carbonate	1		dutasteride-tamsulosin hcl	3	
sevelamer hcl	1	PA	finasteride oral tablet 5 mg	1	
solifenacin succinate	1		JALYN	3	
THIOLA	5	PA; QL	PROSCAR	3	
THIOLA EC	5	PA; QL	RAPAFLO	3	
tiopronin oral tablet	5	QL	silodosin	1	
tiopronin oral tablet delayed release	5	PA; QL	tamsulosin hcl	1	
tolterodine tartrate	1		terazosin hcl	1	
tolterodine tartrate er	1		TEZRULY	3	PA
TOVIAZ	3	PA	UROXATRAL	3	
trospium chloride	1		<b>Hormonal Agents - Adrenal</b>		
trospium chloride er	1		AGAMREE	5	PA; QL
urelle	3		ALKINDI SPRINKLE	5	PA; QL
uretron d/s	3		BETAMETHASONE SODIUM PHOSPHATE INJECTION	3	
URIBEL	3		CORTEF	3	
URIMAR-T	3		CORTISONE ACETATE ORAL	3	
URNEVA	3		deflazacort	5	PA; QL
UROGESIC-BLUE	3		DEPO-MEDROL INJECTION SUSPENSION 20 MG/ML	2	

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

Effective Date: 07/01/2025

Drug Name	Drug Tier	Notes	Drug Name	Drug Tier	Notes
SOLU-CORTEF INJECTION SOLUTION RECONSTITUTED 100 MG	1		testosterone enanthate intramuscular	1	
SOLU-CORTEF INJECTION SOLUTION RECONSTITUTED 1000 MG, 250 MG, 500 MG	2		testosterone transdermal gel 1.62 %, 12.5 mg/act (1%), 20.25 mg/act (1.62%), 25 mg/2.5gm (1%), 50 mg/5gm (1%)	1	QL
SOLU-MEDROL (PF) INJECTION SOLUTION RECONSTITUTED 125 MG	3		testosterone transdermal gel 10 mg/act (2%), 20.25 mg/1.25gm (1.62%), 40.5 mg/2.5gm (1.62%)	3	PA; QL
TAPERDEX 12-DAY	3		testosterone transdermal solution	3	PA; QL
TAPERDEX 6-DAY	3		TLANDO	3	PA
TAPERDEX 7-DAY	3		UNDECATREX	3	PA
TRIAMCINOLONE ACETONIDE INJECTION SUSPENSION 50 MG/ML	3		VOGELXO	3	QL
triamcinolone acetonide suspension 40 mg/ml injection	3		VOGELXO PUMP	3	QL
TRIAMCINOLONE ACETONIDE SUSPENSION 40 MG/ML INJECTION	3		XYOSTED	3	PA
TRIAMCINOLONE DIACETATE INJECTION	3		<b>Hormonal Agents - Pituitary</b>		
ANDROGEL PUMP	3	QL	ACTHAR	4	PA; QL
danazol oral	1		ACTHAR GEL	4	PA; QL
DEPO-TESTOSTERONE (brand testosterone cypionate intramuscular)	1		cabergoline	1	
JATENZO	3	PA	CORTROPHIN	4	PA; QL
KYZATREX	3	PA	CORTROPHIN GEL	4	PA; QL
METHITEST	3	PA	CRENESSITY	5	PA; QL
methyltestosterone oral	3	PA	DDAVP	3	
NATESTO	3	PA; QL	DDAVP PF	3	
TESTIM	3	QL	desmopressin ace spray refriger	1	
TESTONE CIK	3		desmopressin acetate injection	1	
TESTOSTERONE CYPIONATE INJECTION	1		DESMOPRESSIN ACETATE NASAL	2	
testosterone cypionate intramuscular	1		desmopressin acetate oral	1	
			desmopressin acetate pf	1	
			desmopressin acetate spray	1	
			EGRIFTA SV	5	QL
			ELIGARD	2	
			FENSOLVI (6 MONTH)	3	
			GENOTROPIN	5	PA; QL

Effective Date: 07/01/2025

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

Effective Date: 07/01/2025

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

Effective Date: 07/01/2025

Drug Name	Drug Tier	Notes	Drug Name	Drug Tier	Notes
estradiol transdermal patch weekly	1		incassia	1	
estradiol vaginal	1		introvale	1	
estradiol valerate intramuscular	1		isibloom	1	
estradiol-norethindrone acet	1		jaimiess	1	
estratest f.s.	3		jasmiel	1	
ESTRATEST H.S.	3		jencycla	1	
ESTRING	2		jinteli	3	
ESTROGEL	3		jolessa	1	
ethynodiol diac-eth estradiol	1		joyeaux	3	
etonogestrel-ethinyl estradiol	1		juleber	1	
EVAMIST	3		junel 1.5/30	1	
falmina	1		junel 1/20	1	
feirza 1.5/30	1		junel fe 1.5/30	1	
feirza 1/20	1		junel fe 1/20	1	
FEMLYV	3		kaitlib fe	3	
FEMRING	2		kalliga	1	
finzala	3		kariva	1	
FIRST-PROGESTERONE VGS	3		kelnor 1/35	1	
fyavolv	3		kelnor 1/50	1	
gallifrey	1		kurvelo	1	
gemmily	3		larin 1.5/30	1	
hailey 1.5/30	1		larin 1/20	1	
hailey 24 fe	1		larin 24 fe	1	
hailey fe 1.5/30	1		layolis fe	3	
hailey fe 1/20	1		leena	1	
haloette	1		lessina	1	
heather	1		levonest	1	
her style	1		levonorgest-eth estrad 91-day oral tablet 0.1- 0.02 & 0.01 mg, 0.15-0.03 mg	1	
iclevia	1		levonorgest-eth estradiol- iron	3	
IMVEXXY MAINTENANCE PACK	3		levonorgestrel	1	
IMVEXXY STARTER PACK	3				

Effective Date: 07/01/2025

Drug Name	Drug Tier	Notes	Drug Name	Drug Tier	Notes
levonorgestrel-ethinyl estrad oral tablet 0.1-20 mg-mcg, 0.15-30 mg-mcg	1		microgestin fe 1.5/30	1	
levonorgestrel-ethinyl estrad oral tablet 90-20 mcg	3		microgestin fe 1/20	1	
levonorg-eth estrad triphasic	1		mili	1	
levora 0.15/30 (28)	1		mimvey	1	
LILETTA (52 MG)	3		MINIVELLE	3	
LO LOESTRIN FE	3		minzoya	3	
LOESTRIN 1.5/30 (21)	3		MIRENA (52 MG)	2	
LOESTRIN 1/20 (21)	3		MIUDELLA INTRAUTERINE COPPER	3	
LOESTRIN FE 1.5/30	3		mono-linyah	1	
LOESTRIN FE 1/20	3		my choice	1	
lojaimiess	1		my way	1	
loryna	1		MYFEMBREE	5	PA; QL
low-ogestrel	1		NATAZIA	3	
lo-zumandimine	1		necon 0.5/35 (28)	1	
lutera	1		new day	1	
lyleq	1		NEXTSTELLIS	3	
lyllana	1		nikki	1	
lyza	1		nora-be	1	
marlissa	1		norelgestromin-eth estradiol	1	
medroxyprogesterone acetate	1		norethin ace-eth estrad-fe oral capsule	3	
megestrol acetate oral suspension 40 mg/ml, 400 mg/10ml, 800 mg/20ml	1		norethin ace-eth estrad-fe oral tablet	1	
megestrol acetate oral suspension 625 mg/5ml	3		norethin ace-eth estrad-fe oral tablet chewable	3	
megestrol acetate oral tablet	1		norethindrone acetate oral	1	
MENEST	3		norethindrone acet-ethinyl est	1	
MENOSTAR	3		norethindrone oral	1	
merzee	3		norethindrone-eth estradiol	3	
mibelas 24 fe	3		norgestimate-eth estradiol oral tablet 0.25-35 mg-mcg	1	
microgestin 1.5/30	1		norgestimate-ethinyl estradiol triphasic	1	
microgestin 1/20	1				

Effective Date: 07/01/2025

Drug Name	Drug Tier	Notes	Drug Name	Drug Tier	Notes
norlyroc	1		simpesse	1	
nortrel 0.5/35 (28)	1		SKYLA	2	
nortrel 1/35 (21)	1		SLYND	3	
nortrel 1/35 (28)	1		sprintec 28	1	
nortrel 7/7/7	1		sronyx	1	
NUVARING	3		syeda	1	
nylia 1/35	1		take action	1	
nylia 7/7/7	1		tarina 24 fe	1	
ocella	1		tarina fe 1/20 eq	1	
opcicon one-step	1		taysofy	3	
OPILL	1		TAYTULLA CAPSULE 1-20 MG-MCG(24) ORAL	3	
option 2	1		TAYTULLA CAPSULE 1-20 MG-MCG(24) ORAL	3	
ORIAHNN	5	PA; QL	TAYTULLA CAPSULE 1-20 MG-MCG(24) ORAL	3	PA
PARAGARD INTRAUTERINE COPPER	2		tilia fe	3	
philith	1		tri-estarrylla	1	
pimtrea	1		tri-legest fe	3	
PLAN B ONE-STEP	3		tri-linyah	1	
portia-28	1		tri-lo-estarrylla	1	
PREMARIN ORAL	3	PA	tri-lo-marzia	1	
PREMARIN VAGINAL	2		tri-lo-mili	1	
PREMPHASE	3		tri-lo-sprintec	1	
PREMPRO	3		trivora (28)	1	
progesterone intramuscular	1		tri-vylibra	1	
progesterone oral	1		tri-vylibra lo	1	
PROMETRIUM	3		turqoz	1	
PROVERA	3		TWIRLA	3	
react	1		tyblume	1	
reclipsen	1		VAGIFEM	3	
rivelsa	3		valtya 1/50	1	
rosyrah	3		velivet	1	
SAFYRAL	3		vestura	1	
setlakin	1		vienva	1	
sharobel	1		viorele	1	
simliya	1		VIVELLE-DOT	3	

Effective Date: 07/01/2025

Drug Name	Drug Tier	Notes	Drug Name	Drug Tier	Notes	
volnea	1		TIROSINT-SOL	3		
vyfemla	1		unithroid	3		
vylibra	1		<b>Immunological Agents - Drugs for Immune System Stimulation or Suppression</b>			
wera	1		ABRILADA (1 PEN)	5	PA; QL	
wymzya fe	3		ABRILADA (2 PEN)	5	PA; QL	
xarah fe	3		ABRILADA (2 SYRINGE)	5	PA; QL	
xelria fe	3		ACTEMRA ACTPEN	5	PA; QL	
xulane	1		ACTEMRA SUBCUTANEOUS	5	PA; QL	
YASMIN 28	3		ACTIMMUNE	5	QL	
YAZ	3		ADALIMUMAB-AACF (2 PEN)	5	PA; QL	
yuvafem	1		ADALIMUMAB-AACF (2 SYRINGE)	5	PA; QL	
zafemy	1		ADALIMUMAB-AATY (1 PEN)	5	PA; QL	
zovia 1/35 (28)	1		ADALIMUMAB-AATY (2 SYRINGE)	5	PA; QL	
zumandimine	1		ADALIMUMAB-AACF(CD/UC/HS STRT)	5	PA; QL	
<b>Hormonal Agents - Thyroid</b>						
ADTHYZA	3		ADALIMUMAB-AACF(PS/UV STARTER)	5	PA; QL	
ARMOUR THYROID	3		ADALIMUMAB-AATY (1 PEN)	5	PA; QL	
CYTOMEL	3		ADALIMUMAB-AATY (2 PEN)	5	PA; QL	
ERMEZA	3	PA	ADALIMUMAB-AATY (2 SYRINGE)	5	PA; QL	
euthyrox	3		ADALIMUMAB-AATY CD/UC/HS START	5	PA; QL	
levo-t	3		ADALIMUMAB-ADAZ	5	PA; QL	
LEVOTHYROXINE SODIUM ORAL CAPSULE	3		ADALIMUMAB-ADBM (2 PEN)	5	PA; QL	
levothyroxine sodium oral tablet	1		ADALIMUMAB-ADBM (2 SYRINGE)	5	PA; QL	
levoxyl	3		ADALIMUMAB-FKJP (2 PEN)	5	PA; QL	
liothyronine sodium oral	1		ADALIMUMAB-FKJP (2 SYRINGE)	5	PA; QL	
methimazole oral	1		ADALIMUMAB-ADBM(PS/UV STARTER)	5	PA; QL	
NIVA THYROID	3		ADALIMUMAB-ADBM(CD/UC/HS STRT)	5	PA; QL	
NP THYROID	3		ADALIMUMAB-ADBM(PS/UV STARTER)	5	PA; QL	
propylthiouracil oral	1		ADALIMUMAB-RYVK (2 PEN)	5	PA; QL	
RENTHYROID	3					
SYNTHROID	3					
THYQUIDITY	3					
THYROID ORAL	3					
TIROSINT	3					

Drug Name	Drug Tier	Notes	Drug Name	Drug Tier	Notes
ADALIMUMAB-RYVK (2 SYRINGE)	5	PA; QL	cyclosporine modified	1	
			cyclosporine oral	1	
AMJEVITA	2	PA	CYLTEZO (2 PEN)	5	PA; QL
AMJEVITA-PED 10KG TO <15KG			CYLTEZO (2 SYRINGE)	5	PA; QL
SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 10MG/0.2ML	2	PA	CYLTEZO-CD/UC/HS STARTER	5	PA; QL
AMJEVITA-PED 15KG TO <30KG	2	PA	CYLTEZO-PSORIASIS/UV STARTER	5	PA; QL
ANTIVENIN LATRODECTUS MACTANS	3		ENBREL	4	PA; QL
ARAVA	3		ENBREL MINI	4	PA; QL
ARCALYST	5	PA; QL	ENBREL SURECLICK	4	PA; QL
ASTAGRAF XL	3		ENSPRYNG	5	PA; QL
AURANOFIN	4	PA; QL	ENTYVIO PEN	5	PA; QL
AZASAN	3		ENVARSUS XR	2	
azathioprine oral tablet 100 mg, 75 mg	3		everolimus oral tablet 0.25 mg, 0.5 mg, 0.75 mg, 1 mg	5	QL
azathioprine oral tablet 50 mg	1		FIRAZYR	5	PA; QL
BENLYSTA SUBCUTANEOUS	5	PA; QL	gengraf	1	
BERINERT	4	PA; QL	HADLIMA	5	PA; QL
BIMZELX	5	PA; QL	HADLIMA PUSHTOUCH	5	PA; QL
CELLCEPT	3		HAEGARDA	5	PA; QL
CIMZIA	5	PA; QL	HEPAGAM B	3	
CIMZIA (2 SYRINGE)	5	PA; QL	HIZENTRA	4	PA; QL
CIMZIA-STARTER	5	PA; QL	HULIO (2 PEN)	5	PA; QL
CINRYZE	5	PA; QL	HULIO (2 SYRINGE)	5	PA; QL
COSENTYX (300 MG DOSE)	4	PA; QL	HUMIRA (1 PEN)	5	PA; QL
COSENTYX 150 MG/ML SUBCUTANEOUS	4	PA; QL	HUMIRA (2 PEN)	5	PA; QL
COSENTYX SENSOREADY (300 MG)	4	PA; QL	HUMIRA (2 SYRINGE)	5	PA; QL
COSENTYX SENSOREADY PEN	4	PA; QL	HUMIRA-CD/UC/HS STARTER	5	PA; QL
COSENTYX UNOREADY	4	PA; QL	HUMIRA-PSORIASIS/UVEIT STARTER	5	PA; QL
CUTAQUIG	5	PA; QL	HYPERTET	3	
CUVITRU	4	PA; QL	HYPERRAB	3	
			HYPERVIA	4	PA; QL
			HYRIMOZ	5	PA; QL

Effective Date: 07/01/2025

Drug Name	Drug Tier	Notes	Drug Name	Drug Tier	Notes
HYRIMOZ-CROHNS/UC STARTER	5	PA; QL	OTREXUP SUBCUTANEOUS SOLUTION AUTO-INJECTOR 10 MG/0.4ML, 12.5 MG/0.4ML, 15 MG/0.4ML, 17.5 MG/0.4ML, 22.5 MG/0.4ML, 25 MG/0.4ML	3	PA
HYRIMOZ-PED<40KG CROHN STARTER	5	PA; QL			
HYRIMOZ-PED>/=40KG CROHN START	5	PA; QL			
HYRIMOZ-PLAQ PSOR/UVEIT START	5	PA; QL	OTREXUP SUBCUTANEOUS SOLUTION AUTO-INJECTOR 20 MG/0.4ML	3	
HYRIMOZ-PLAQUE PSORIASIS START	5	PA; QL			
icatibant acetate	4	PA; QL	OTULFI SUBCUTANEOUS	5	PA; QL
IMOGRAB RABIES-HT	3		PROGRAF ORAL	3	
IMURAN	3		PYZCHIVA SUBCUTANEOUS	5	PA; QL
JOENJA	5	PA; QL	RASUVO	2	
JYLAMVO	3	PA	REZUROCK	5	PA; QL
KEDRAB	3		RHOPHYLAC	3	
KEVZARA	5	PA; QL	RIDAURA	4	PA; QL
KINERET	5	PA; QL	RINVOQ	5	PA; QL
leflunomide oral	1		RINVOQ LQ	5	PA; QL
LUPKYNIS	5	PA; QL	RUCONEST	5	PA; QL
methotrexate sodium	1		sajazir	4	PA; QL
methotrexate sodium (pf)	1		SANDIMMUNE ORAL	3	
mycophenolate mofetil oral	1		SELARSIDI SUBCUTANEOUS	5	PA; QL
mycophenolate sodium	1		SILIQ	5	PA; QL
mycophenolic acid	1		SIMLANDI (1 PEN)	5	PA; QL
MYFORTIC	3		SIMLANDI (1 SYRINGE)	5	PA; QL
MYHIBBIN	5	PA; QL	SIMLANDI (2 PEN)	5	PA; QL
NABI-HB	2		SIMLANDI (2 SYRINGE)	5	PA; QL
NEORAL	3		SIMPONI	5	PA; QL
OLUMIANT	5	PA; QL	sirolimus oral	1	
OMVOH (300 MG DOSE)	5	PA; QL	SKYRIZI PEN	4	PA; QL
OMVOH SUBCUTANEOUS	5	PA; QL	SKYRIZI SUBCUTANEOUS	4	PA; QL
ORENCIA CLICKJECT	4	PA; QL	SOTYKTU	5	PA; QL
ORENCIA SUBCUTANEOUS	4	PA; QL	SPEVIGO SUBCUTANEOUS	5	PA; QL
ORLADEYO	5	PA; QL			
OTEZLA	4	PA; QL			

Drug Name	Drug Tier	Notes	Drug Name	Drug Tier	Notes
STELARA SUBCUTANEOUS	5	PA; QL	ZYMFENTRA (2 SYRINGE)	5	PA; QL
STEQEYMA SUBCUTANEOUS	5	PA; QL	<b>Immunological Agents - Drugs for Vaccination</b>		
tacrolimus oral	1		ABRYSVO	2	
TAKHZYRO	5	PA; QL	ACTHIB	2	
TALTZ	5	PA; QL	ADACEL	2	
TREMFYA CROHNS INDUCTION	4	PA; QL	AFLURIA	1	
TREMFYA ONE-PRESS	4	PA; QL	AFLURIA PRESERVATIVE FREE	1	
TREMFYA PEN	4	PA; QL	AREXVY	2	
TREMFYA SUBCUTANEOUS	4	PA; QL	AUDENZ	2	
TREXALL	3		BEXSERO	2	
TYENNE SUBCUTANEOUS	5	PA; QL	BIOTHRAX	3	
USTEKINUMAB SUBCUTANEOUS	5	PA; QL	BOOSTRIX	2	
USTEKINUMAB-AEKN	5	PA	CAPVAXIVE	2	
USTEKINUMAB-TTWE SUBCUTANEOUS	5	PA	COMIRNATY	2	
VARIZIG	3		DAPTACEL	2	
VELSIPITY	5	PA; QL	ENERIX-B	2	
WEZLANA SUBCUTANEOUS	5	PA; QL	FLUAD	1	
XATMEP	3	PA; QL	FLUARIX	1	
XELJANZ	4	PA; QL	FLUBLOK	1	
XELJANZ XR	4	PA; QL	FLUCELVAX	1	
XEMBIFY	5	PA; QL	FLULALVAL	1	
YESINTEK SUBCUTANEOUS	2	PA	FLUMIST	1	
YUFLYMA (1 PEN)	5	PA; QL	FLUZONE HIGH-DOSE	1	
YUFLYMA (2 PEN)	5	PA; QL	FLUZONE		
YUFLYMA (2 SYRINGE)	5	PA; QL	INTRAMUSCULAR SUSPENSION	1	
YUFLYMA-CD/UC/HS STARTER	5	PA; QL	PREFILLED SYRINGE		
YUSIMRY	5	PA; QL	GARDASIL 9	2	
ZORTRESS	5	QL	HAVRIX	2	
ZYMFENTRA (1 PEN)	5	PA; QL	HEPLISAV-B	2	
ZYMFENTRA (2 PEN)	5	PA; QL	HIBERIX	2	
			INFANRIX	2	
			IPOL	2	
			KINRIX	2	
			MENQUADFI	2	

Drug Name	Drug Tier	Notes	Drug Name	Drug Tier	Notes
MENVEO	2		anusol-hc rectal	3	
M-M-R II	2		APRISO	1	
MODERNA COVID-19 VAC 6M-11Y	2		AZULFIDINE	3	
			AZULFIDINE EN-TABS	3	
MRESVIA	2		balsalazide disodium	1	
NOVAVAX COVID-19 VACCINE	2		budesonide er	5	PA; QL
PEDIARIX	2		budesonide oral (generic Entocort)	1	
PEDVAX HIB	2		budesonide rectal	3	
PENBRAYA	2		CANASA	3	
PENTACEL	2		COLAZAL	3	
PFIZER COVID-19 VAC-TRIS 5-11Y	2		CORTENEMA	3	
PFIZER COVID-19 VAC-TRIS 6M-4Y	2		CORTIFOAM	2	
			DIPENTUM	5	PA; QL
PNEUMOVAX 23	2		EOHILIA	5	PA; QL
PREVNAR 20	2		HEMMOREX-HC RECTAL SUPPOSITORY	3	
PRIORIX	2		30 MG		
PROQUAD	2		HEMMOREX-HC SUPPOSITORY 25 MG	3	
QUADRACEL	2		RECTAL		
RECOMBIVAX HB	2		hemmorex-hc suppository 25 mg rectal	3	
ROTARIX	2		hydrocortisone (perianal) external cream 1 %	3	
ROTATEQ	2		hydrocortisone (perianal) external cream 2.5 %	1	
SHINGRIX	2		TENIVAC		
SPIKEVAX	2		hydrocortisone ace-pramoxine external cream 1-1 %	3	
TRUMENBA	2		VAXTA INTRAMUSCULAR SUSPENSION 50 UNIT/ML	2	
TWINRIX	2		hydrocortisone acetate rectal	3	
			hydrocortisone rectal	1	
VARIVAX	2		LIALDA	3	
VAXELIS	2		lidocaine-hydrocort (perianal)	3	
VAXNEUVANCE	2		VAXNEUVANCE	2	
<b>Inflammatory Bowel Disease Agents</b>			LIDOCAINE-HYDROCORTISONE ACE RECTAL GEL	3	
ANALPRAM-HC	3		lidocaine-hydrocortisone ace rectal kit 3-0.5 %	3	
ANUCORT-HC	3		LIDOCORT	3	
ANUSOL-HC EXTERNAL	3				

Effective Date: 07/01/2025

Drug Name	Drug Tier	Notes	Drug Name	Drug Tier	Notes
mesalamine er oral capsule 0.375 gm	1		ibandronate sodium oral	1	
mesalamine oral capsule delayed release 400 mg	1	ST	MIACALCIN	3	
mesalamine oral tablet delayed release 1.2 gm	1		risedronate sodium oral tablet	1	
mesalamine oral tablet delayed release 800 mg	3	PA	risedronate sodium oral tablet delayed release	3	
mesalamine rectal	1		teriparatide subcutaneous solution pen-injector 560 mcg/2.24ml	5	PA; QL
mesalamine-cleanser	3		TERIPARATIDE SUBCUTANEOUS SOLUTION PEN-INJECTOR 620 MCG/2.48ML	5	PA; QL
PENTASA ORAL CAPSULE EXTENDED RELEASE 250 MG	2	PA	TYMLOS	5	PA
PENTASA ORAL CAPSULE EXTENDED RELEASE 500 MG	1	PA	<b>Metabolic Bone Disease Agents - Other</b>		
PROCORT	3		calcitriol oral	1	
PROCTOCORT	3		cinacalcet hcl	1	
PROCTOFOAM HC	2		doxercalciferol oral	3	
procto-med hc	1		paricalcitol oral	3	
proctosol hc	1		RAYALDEE	3	PA
proctozone-hc	1		ROCALTROL	3	
ROWASA	3		SENSIPAR	3	
SFROWASA	3		ZEMPLAR ORAL	3	
sulfasalazine oral	1		<b>Miscellaneous Therapeutic Agents</b>		
TARPEYO	5	PA; QL	AEROCHAMBER HOLDING CHAMBER	2	
UCERIS ORAL	5	PA; QL	AEROCHAMBER MINI CHAMBER	2	
UCERIS RECTAL	3		AEROCHAMBER MV	2	
<b>Metabolic Bone Disease Agents - Drugs for Osteoporosis</b>			AEROCHAMBER PLS FLOVU MTHPIECE	2	
ACTONEL	3		AEROCHAMBER PLUS FLO-VU INTERM	2	
alendronate sodium	1		AEROCHAMBER PLUS FLO-VU LARGE DEVICE	2	
ATELVIA	3		AEROCHAMBER PLUS FLO-VU MEDIUM DEVICE	2	
BINOSTO	3		AEROCHAMBER PLUS FLO-VU SMALL DEVICE	2	
calcitonin (salmon) injection	3				
calcitonin (salmon) nasal	1				
FORTEO	5	PA; QL			
FOSAMAX	3				
FOSAMAX PLUS D	3				

Effective Date: 07/01/2025

Drug Name	Drug Tier	Notes	Drug Name	Drug Tier	Notes
AEROCHAMBER PLUS FLOW VU	2		BREATHE COMFORT CHAMBER/ADULT	2	
AEROCHAMBER W/FLOWSIGNAL	2		BREATHE COMFORT CHAMBER/CHILD	2	
ALCOHOL PREP PADS PAD , 70 %	1		BREATHE EASE LARGE	2	
ALCOHOL PREP PADS SHEET 70 %	1		BREATHE EASE MEDIUM	2	
AQINJECT PEN NEEDLE	1		BREATHE EASE SMALL	2	
AQNEURSA	5	PA; QL	BREATHERITE VALVED MDI CHAMBER	2	
ASSURE ID DUO PRO PEN NEEDLES	1		BYLVAY	5	PA; QL
ASSURE ID PRO PEN NEEDLES	1		BYLVAY (PELLETS)	5	PA; QL
AUM ALCOHOL PREP PADS	1		CAYA	2	
AUM INSULIN SAFETY PEN NEEDLE 31G X 4 MM	1		CLEVER CHOICE HOLDING CHAMBER	2	
AUM MINI INSULIN PEN NEEDLE	1		COMFORT EZ PRO PEN NEEDLES	1	
AUM PEN NEEDLE 32G X 5 MM , 33G X 4 MM , 33G X 5 MM , 33G X 6 MM	1		COMPACT SPACE CHAMBER	2	
AUM READYGARD DUO PEN NEEDLE	1		COMPACT SPACE CHAMBER/LG MASK	2	
AUM SAFETY PEN NEEDLE	1		COMPACT SPACE CHAMBER/MED MASK	2	
BD AUTOSHIELD DUO PEN NEEDLES	1		COMPACT SPACE CHAMBER/SM MASK	2	
BD PEN NEEDLE MICRO ULTRAFINE	1		CYTOTINE ORAL POWDER	3	
BD PEN NEEDLE MINI ULTRAFINE	1		deferoxamine mesylate injection solution reconstituted 500 mg	1	
BD PEN NEEDLE NANO ULTRAFINE	1		DESFERAL	3	
BD PEN NEEDLE ORIG ULTRAFINE	1		DOJOLVI	5	PA; QL
BD PEN NEEDLE SHORT ULTRAFINE	1		DROPSAFE ALCOHOL PREP	1	
BD ULTRA-FINE PEN NEEDLES	1		EASIVENT	2	
			EDETA CALCIUM DISODIUM INJECTION	3	
			EMBECTA AUTOSHIELD DUO	1	
			EMBECTA PEN NEEDLE NANO	1	
			EMBECTA PEN NEEDLE NANO 2 GEN	1	

Effective Date: 07/01/2025

Drug Name	Drug Tier	Notes	Drug Name	Drug Tier	Notes
EMBECTA PEN NEEDLE ULTRAFINE	1		MIPLYFFA	5	PA; QL
EMBRACE PEN NEEDLES 30G X 5 MM , 30G X 8 MM , 31G X 6 MM , 31G X 8 MM , 32G X 4 MM	1		NOVOFINE PEN NEEDLE	1	
ENDARI	5	PA; QL	NOVOFINE PLUS PEN NEEDLE	1	
FEMCAP	2		NOZIN NASAL SANITIZER	1	
FIRDAPSE	5	PA; QL	ODACTRA	3	PA
FLEXICHAMBER	2		OMNIPOD 5 DEXCOM INTRO KIT	3	PA
FLEXICHAMBER ADULT MASK/SMALL	2		OMNIPOD 5 DEXCOM PODS	3	PA
FLEXICHAMBER CHILD MASK/LARGE	2		OMNIPOD 5 LIBRE INTRO KIT	3	PA
FLEXICHAMBER CHILD MASK/SMALL	2		OMNIPOD 5 LIBRE PODS	3	PA
GLUCAGON HCL (DIAGNOSTIC)	2		OMNIPOD DASH INTRO KIT	3	PA
GOODSENSE ALCOHOL SWABS	1		OMNIPOD DASH PDM (GEN 4)	3	PA
GRASTEK	3	PA	OMNIPOD DASH PODS	3	PA
INCONTROL ULTICARE PEN NEEDLES	1		OMNIPOD POD PALS	3	PA
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		OPTICHAMBER DIAMOND	2	
IWILFIN	3	PA; QL	OPTICHAMBER DIAMOND-LG MASK	2	
KERENDIA	3	PA; QL	OPTICHAMBER DIAMOND-MD MASK	2	
I-glutamine oral packet	5	PA; QL	OPTICHAMBER DIAMOND-SM MASK	2	
LIVMARLI	5	PA; QL	ORALAIR	3	PA
methergine	1		ORALAIR ADULT STARTER PACK	3	PA
methylergonovine maleate	1		ORALAIR CHILDRENS STARTER PACK	3	PA
MICROCHAMBER DEVICE	2		PALFORZIA	5	PA; QL
			PALFORZIA (1 MG DAILY DOSE)	5	PA; QL
			PALFORZIA INITIAL DOSE 1-3YRS	5	PA; QL

Effective Date: 07/01/2025

Drug Name	Drug Tier	Notes	Drug Name	Drug Tier	Notes
PALFORZIA INITIAL DOSE 4-17YRS	5	PA; QL	UNIFINE OTC PEN NEEDLES	1	
PANDA MASK LARGE	2		UNIFINE PROTECT PEN NEEDLE	1	
PANDA MASK MEDIUM	2		VEOZAH	3	PA; QL
PANDA MASK SMALL	2		VERIFINE INSULIN PEN NEEDLE	1	
PARI VORTEX ADULT MASK	2		VERIFINE PLUS PEN NEEDLE	1	
PARI VORTEX PEDIATRIC MASK	2		V-GO 20	3	PA
PEDIATRIC PANDA MASK	2		V-GO 30	3	PA
PEN NEEDLE/5-BEVEL TIP	1		V-GO 40	3	PA
PENTIPS GENERIC PEN NEEDLES 32G X 6 MM	1		VISTOGARD	5	PA; QL
PHEXXI	3		VORTEX VALVE CHAMBER-PEDI MASK	2	
PIP PEN NEEDLES 32G X 4MM	1		VORTEX VALVED HOLDING CHAMBER	2	
pocket spacer	2		WIDE-SEAL DIAPHRAGM 60	2	
PRO COMFORT SPACER ADULT	2		WIDE-SEAL DIAPHRAGM 65	2	
PRO COMFORT SPACER CHILD	2		WIDE-SEAL DIAPHRAGM 70	2	
PRO COMFORT SPACER INFANT	2		WIDE-SEAL DIAPHRAGM 75	2	
PROCARE SPACER/ADULT MASK	2		WIDE-SEAL DIAPHRAGM 80	2	
PROCARE SPACER/CHILD MASK	2		WIDE-SEAL DIAPHRAGM 85	2	
PURE COMFORT SAFETY PEN NEEDLE	1		WIDE-SEAL DIAPHRAGM 90	2	
PURE COMFORT SPACER CHAMBER	2		WIDE-SEAL DIAPHRAGM 95	2	
QUICK TOUCH INSULIN PEN NEEDLE	1		XPHOZAH	5	PA; QL
RAGWITEK	3	PA	YORVIPATH	5	PA; QL
RAYA SURE PEN NEEDLE	1		ZILBRYSQ	5	PA; QL
SAFETY PEN NEEDLES	1		ZOKINVY	5	PA; QL
SOHONOS	5	PA; QL	<b>Ophthalmic Agents - Drugs for Eye Allergy, Infection and Inflammation</b>		
TAVNEOS	5	PA; QL	ACULAR	2	
TRUE COMFORT SAFETY PEN NEEDLE	1		ACULAR LS	3	

Effective Date: 07/01/2025

Drug Name	Drug Tier	Notes	Drug Name	Drug Tier	Notes
ACUVAIL	3		INVELTYS	3	
ALOCRIL	3		ketorolac tromethamine ophthalmic	1	
ALREX	3		KLARITY-A	3	
AZASITE	3		KLARITY-L	3	
azelastine hcl ophthalmic	1		levofloxacin ophthalmic	3	
bacitracin ophthalmic	1		LOTEMAX	3	
bepotastine besilate	3		LOTEMAX SM	3	
BEPREVE	3		loteprednol etabonate	3	
BESIVANCE	3		MAXIDEX	3	
BETADINE OPHTHALMIC PREP	3		MAXITROL	3	
bromfenac sodium (once-daily)	3		moxifloxacin hcl (2x day)	1	
bromfenac sodium ophthalmic	3		moxifloxacin hcl ophthalmic	1	
BROMSITE	3		NATACYN	2	
CILOXAN	2		neomycin-polymyxin-dexameth	1	
ciprofloxacin hcl ophthalmic	1		neomycin-polymyxin-hc ophthalmic	3	
cromolyn sodium ophthalmic	1		NEVANAC	3	
dexamethasone sodium phosphate ophthalmic	1		OCUFLOX	3	
diclofenac sodium ophthalmic	1		ofloxacin ophthalmic	1	
difluprednate	1		olopatadine hcl ophthalmic solution 0.2 %	3	
DUREZOL	3		POVIDONE-IODINE OPHTHALMIC	3	
epinastine hcl	3		PRED FORTE	3	
erythromycin ophthalmic	1		PRED MILD	2	
EYSUVIS	3	PA	PREDNISOL ACE-MOXIFLOX-BROMFEN	3	
FLAREX	3		prednisolone acetate ophthalmic	1	
fluorometholone	1		prednisolone acetate p-f	1	
flurbiprofen sodium	1		PREDNISOLONE ACETATE-NEPafenac	3	
FML FORTE	2		PREDNISOLONE ACET-MOXIFLOXACIN	3	
FML LIQUIFILM	3		prednisolone sodium phosphate ophthalmic	3	
gatifloxacin ophthalmic	1		ILEVRO	3	

Effective Date: 07/01/2025

Drug Name	Drug Tier	Notes	Drug Name	Drug Tier	Notes
PREDNISOLON-GATIFLOX-BROMFENAC	3		brimonidine tartrate ophthalmic solution 0.2 %	1	
PREDNISOLON-MOXIFLOX-BROMFENAC	3		brimonidine tartrate-timolol	3	
PREDNISOLON-MOXIFLOX-KETOROLAC	3		BRIMONIDINE-DORZOLAMIDE OPHTHALMIC SOLUTION 0.15-2 %	3	
PREDNISOLON-MOXIFLOX-NEPAFENAC	3		brinzolamide	1	
PROLENSA	3		carteolol hcl	1	
sulfacetamide sodium ophthalmic	1		COMBIGAN	3	
TOBRADEX	2		COSOPT	3	
TOBRADEX ST	3		COSOPT PF	3	
tobramycin ophthalmic	1		DORZOLAMIDE HCL SOLUTION 2 % OPHTHALMIC	3	
tobramycin-dexamethasone	1		dichlorphenamide	5	PA; QL
TOBREX	2		dorzolamide hcl solution 2 % ophthalmic	1	
trifluridine	1		dorzolamide hcl-timolol mal	1	
UPNEEQ	3	PA	dorzolamide hcl-timolol mal pf	3	
VIGAMOX	2		IOPIDINE	3	
XDEMVY	5	PA; QL	ISTALOL	3	
ZERVIATE	3		IYUZEH	3	
ZIRGAN	3		KEVEYIS	5	PA; QL
<b>Ophthalmic Agents - Drugs for Glaucoma</b>					
acetazolamide er	1		latanoprost ophthalmic	1	
acetazolamide oral	1		LATANOPROST-TIMOLOL MALEATE	3	
ALPHAGAN P	3		levobunolol hcl	1	
apraclonidine hcl	3		LUMIGAN	2	
AZOPT	3		methazolamide oral	1	
betaxolol hcl ophthalmic	1		ORMALVI	5	PA; QL
BETIMOL	3		PHOSPHOLINE IODIDE	3	
BETOPTIC-S	2		pilocarpine hcl ophthalmic	1	
bimatoprost ophthalmic	1		QLOSI	3	PA
brimonidine tartrate ophthalmic solution 0.1 %, 0.15 %	3		RHOPRESSA	3	PA
			ROCKLATAN	3	PA
			SIMBRINZA	3	

Drug Name	Drug Tier	Notes	Drug Name	Drug Tier	Notes
tafluprost (pf)	3		bacitra-neomycin-polymyxin-hc	1	
timolol hemihydrate	3		CEQUA	2	PA
timolol maleate (once-daily)	3		CYCLOGYL OPHTHALMIC SOLUTION 0.5 %	2	
timolol maleate ocudose	3		CYCLOGYL OPHTHALMIC SOLUTION 1 %, 2 %	3	
timolol maleate ophthalmic	1		CYCLOMYDRIL	3	
timolol maleate pf	3		cyclopentolate hcl ophthalmic	1	
TIMOLOL-BRIMON-DORZOL-LATANOPR	3		cyclosporine ophthalmic	1	PA
TIMOLOL-BRIMONIDINE-DORZOLAMID OPHTHALMIC SOLUTION 0.5-0.15-2 %	3		CYSTADROPS	5	PA; QL
TIMOLOL-DORZOLAMID-LATANOPROST	3		CYSTARAN	5	PA; QL
TIMOPTIC OCUDOSE	3		GELFILM OPHTHALMIC	3	
TRAVATAN Z	3		homatropaire	1	
travoprost (bak free)	1		KLARITY-C DROPS	5	PA; QL
VUITY	3	PA	MIEBO	5	PA; QL
VYZULTA	3	PA	neomycin-bacitracin zn-polymyx	3	
XALATAN	3		neo-polycin hc	1	
XELPROS	3		OXERVATE	5	PA; QL
ZIOPTAN	3		phenylephrine hcl ophthalmic	1	
<b>Ophthalmic Agents - Drugs for Miscellaneous Eye Conditions</b>			polycin	1	
ACUICYN	3		polymyxin b-trimethoprim	1	
AKTEN	3		PREDNISOLONE-BROMFENAC	3	
ALCAINE	3		PREDNISOLONE-GATIFLOXACIN	3	
altacaine	3		ATROPINE SULFATE OPHTHALMIC SOLUTION 0.01 %	1	
altafrin	1		PREDNISOLONE-MOXIFLOXACIN	3	
atropine sulfate ophthalmic solution 1 %	1		proparacaine hcl ophthalmic	3	
AVENOVA	3		RESTASIS	3	PA
bacitracin-polymyxin b	1		RESTASIS MULTIDOSE	3	PA
			sulfacetamide-prednisolone	1	

Effective Date: 07/01/2025

Drug Name	Drug Tier	Notes	Drug Name	Drug Tier	Notes
tetracaine hcl ophthalmic	3		BROMPHENIRAMINE MALEATE INTRAMUSCULAR	3	
TROPICAMIDE-CYCLOPENTOLATE-PE	3		bromphen-pseudoeph-dm	3	
TROPICAMIDE-PHENYLEPHRINE	3		carboxamine maleate	1	
TROPIC-PROPARACA-PE-KETOROLAC	3		CARBINOXAMINE MALEATE ER	3	
TYRVAYA	3	PA	cetirizine hcl oral solution	3	
VERKAZIA	5	PA; QL	CLARINEX	3	
VEVYE	5	PA; QL	CLARINEX-D 12 HOUR	3	
XIIDRA	2	PA	clemastine fumarate oral	1	
ZYLET	3		CLEMASZ	3	
<b>Otic Agents - Drugs for Ear Conditions</b>			CUROSURF	3	
acetic acid otic	1		ciproheptadine hcl oral	1	
CETRAXAL	3		desloratadine	1	
CIPRO HC	2		diphenhydramine hcl injection	1	
ciprofloxacin hcl otic	3		diphenhydramine hcl oral elixir	3	
ciprofloxacin-dexamethasone	1		DYMISTA	3	
CIPROFLOXACIN-FLUOCINOLONE PF	3		epinephrine hcl (nasal)	3	
CORTISPORIN-TC	3		flunisolide nasal	1	
DERMOTIC	3		guaifenesin-codeine	2	QL
fluocinolone acetonide otic	1		HYCODAN	3	
hydrocortisone-acetic acid	3		hydrocodone poli-chlorphe poli er	3	
neomycin-polymyxin-hc otic	1		hydrocodone bit-homatrop mbr	1	
ofloxacin otic	1		hydromet	1	
OTOVEL	3		HYPERSAL	3	
PRAMOTIC	3		INFASURF	3	
<b>Respiratory Tract / Pulmonary Agents - Drugs for Allergies, Cough, Cold</b>			ipratropium bromide nasal	1	
ADRENALIN NASAL	3		KARBINAL ER	3	
azelastine hcl nasal	1		levocetirizine dihydrochloride oral	1	
azelastine-fluticasone	3		maxi-tuss ac	2	QL
benzonatate oral capsule 100 mg, 200 mg	1		MICLARA LQ	3	
benzonatate oral capsule 150 mg	3		mometasone furoate nasal	3	PA

Effective Date: 07/01/2025

Drug Name	Drug Tier	Notes	Drug Name	Drug Tier	Notes
nebusal inhalation nebulization solution 3 %	1		AIRDUO RESPICLICK 232/14	3	PA
NEBUSAL INHALATION NEBULIZATION SOLUTION 6 %	3		AIRDUO RESPICLICK 55/14	3	PA
olopatadine hcl nasal	1		AIRSUPRA	3	PA
OMNARIS	3	PA	albuterol sulfate hfa aerosol solution 108 (90 base) mcg/act inhalation	1	QL
potassium iodide (expectorant)	2		albuterol sulfate hfa aerosol solution 108 (90 base) mcg/act inhalation	3	QL
promethazine-codeine oral solution	3	PA	ALBUTEROL SULFATE HFA AEROSOL		
promethazine-dm	1		SOLUTION 108 (90 BASE) MCG/ACT INHALATION	1	QL
promethazine-phenylephrine	1				
pseudoephedrine-bromphen-dm	3		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	
pulmosal	1				
QNASL	3	PA	RYALTRIS	3	PA
QNASL CHILDRENS	3	PA	RYCLORA	3	PA
ryvent	1				
sodium chloride inhalation nebulization solution 0.9 %, 3 %, 7 %	1		albuterol sulfate NEBULIZATION SOLUTION (5 MG/ML) 0.5% INHALATION	3	
sodium chloride inhalation nebulization solution 10 %	3		ALBUTEROL SULFATE		
SSKI	2		NEBULIZATION		
SURVANTA	2		SOLUTION (5 MG/ML)		
TUXARIN ER	3	QL	0.5% INHALATION		
XHANCE	3	PA	albuterol sulfate oral	1	
<b>Respiratory Tract / Pulmonary Agents - Drugs for Asthma and Other Lung Conditions</b>			ALVESCO	2	
ACCOLATE	3		ANORO ELLIPTA	3	PA
acetylcysteine inhalation	1		arformoterol tartrate	3	PA
ADVAIR DISKUS	3		ARNUYITY ELLIPTA	3	PA
ADVAIR HFA	2		ASMANEX (120 METERED DOSES)	2	ST
AIRDUO RESPICLICK 113/14	3	PA	ASMANEX (14 METERED DOSES)	2	ST
			ASMANEX (30 METERED DOSES)	2	ST
			ASMANEX (60 METERED DOSES)	2	ST
			ASMANEX HFA	2	ST
			ATROVENT HFA	2	

Drug Name	Drug Tier	Notes	Drug Name	Drug Tier	Notes
AUVI-Q INJECTION SOLUTION AUTO- INJECTOR 0.1 MG/0.1ML	2		FLUTICASONE PROPIONATE DISKUS	2	PA
AUVI-Q INJECTION SOLUTION AUTO- INJECTOR 0.15 MG/0.15ML, 0.3 MG/0.3ML	1		FLUTICASONE PROPIONATE HFA INHALATION AEROSOL 110 MCG/ACT, 220 MCG/ACT	2	PA
BEVESPI AEROSPHERE	3	PA	FLUTICASONE PROPIONATE HFA INHALATION AEROSOL	2	
BREO ELLIPTA	3	PA	44 MCG/ACT		
breyna	1	PA; QL	FLUTICASONE- SALMETEROL	2	
BREZTRI AEROSPHERE	3	PA	INHALATION AEROSOL		
BROVANA	3	PA	fluticasone-salmeterol		
budesonide inhalation	1		inhalation aerosol powder		
budesonide-formoterol fumarate	1	PA; QL	breath activated 100-50 mcg/act, 250-50 mcg/act, 500-50 mcg/act	1	
COMBIVENT RESPIMAT	2		FLUTICASONE- SALMETEROL		
cromolyn sodium inhalation	1		INHALATION AEROSOL		
DALIRESP	3		POWDER BREATH		
DUAKLIR PRESSAIR	3	PA	ACTIVATED 113-14	3	PA
DULERA	3	PA; QL	MCG/ACT, 232-14		
elioxophyllin	1		MCG/ACT, 55-14		
epinephrine injection solution auto-injector	1		MCG/ACT		
EPINEPHRINE INJECTION SOLUTION PREFILLED SYRINGE 0.3 MG/0.3ML	3		formoterol fumarate inhalation	3	
EPINEPHRINE PROFESSIONAL	3		INCRUSE ELLIPTA	3	PA
EPINEPHRINESNAP	3		ipratropium bromide inhalation	1	
EPINEPHRINESNAP- EMS	3		ipratropium-albuterol	1	
EPINEPHRINESNAP-V	3		isoproterenol hcl injection	3	
EPIPEN 2-PAK	3		levalbuterol hcl inhalation	3	
EPIPEN JR 2-PAK	3		LEVALBUTEROL HFA INHALATION AEROSOL	3	QL
ESBRIET	5	PA; QL	45 MCG/ACT		
FASENRA PEN	5	PA; QL	montelukast sodium oral	1	
FLUTICASONE FUROATE-VILANTEROL	3	PA	NEFFY	3	PA
			NUCALA SUBCUTANEOUS SOLUTION AUTO- INJECTOR	5	PA; QL

Drug Name	Drug Tier	Notes	Drug Name	Drug Tier	Notes
NUCALA SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	5	PA; QL	TUDORZA PRESSAIR	3	
OFEV	4	PA; QL	UMECLIDINIUM- VILANTEROL	3	PA
OHTUVAYRE	5	PA; QL	VENTOLIN HFA	3	QL
PERFOROMIST	3		wixela inhub	1	
pirfenidone	4	PA; QL	XOLAIR SUBCUTANEOUS SOLUTION AUTO- INJECTOR	5	PA; QL
PROAIR RESPICLICK	3	QL	XOLAIR SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	5	PA; QL
PULMICORT FLEXHALER	3	PA	XOPENEX HFA	3	
PULMICORT SUSPENSION	3		YUPELRI	3	PA
QVAR REDIHALER	3	PA	zafirlukast	3	
roflumilast	3		zileuton er	5	PA; QL
SEREVENT DISKUS	2	ST	ZYFLO	5	PA; QL
SINGULAIR	3		<b>Respiratory Tract / Pulmonary Agents - Drugs for Cystic Fibrosis</b>		
SPIRIVA HANDIHALER	1		ALYFTREK	4	PA; QL
SPIRIVA RESPIMAT INHALATION AEROSOL SOLUTION 1.25 MCG/ACT	2	ST	BETHKIS	5	PA; QL
SPIRIVA RESPIMAT INHALATION AEROSOL SOLUTION 2.5 MCG/ACT	2		BRONCHITOL	5	PA; QL
STIOLTO RESPIMAT	2		BRONCHITOL TOLERANCE TEST	5	PA; QL
STRIVERDI RESPIMAT	2	PA	CAYSTON	5	PA; QL
SYMBICORT	3	PA; QL	KALYDECO	5	PA; QL
terbutaline sulfate injection	3		KITABIS PAK (W/ NEBULIZER)	5	PA; QL
terbutaline sulfate oral	1		ORKAMBI	5	PA; QL
TEZSPIRE SUBCUTANEOUS SOLUTION AUTO- INJECTOR	5	PA; QL	PULMOZYME	2	QL
THEO-24	3		SYMDEKO	5	PA; QL
theophylline er	1		TOBI NEBULIZER	5	PA; QL
theophylline oral	1		TOBI PODHALER	5	PA; QL
tiotropium bromide monohydrate	1		tobramycin inhalation nebulization solution 300 mg/4ml	5	PA; QL
TRELEGY ELLIPTA	3	PA	tobramycin nebulization solution 300 mg/5ml inhalation	4	PA; QL

Effective Date: 07/01/2025

Drug Name	Drug Tier	Notes	Drug Name	Drug Tier	Notes
TOBRAMYCIN NEBULIZATION SOLUTION 300 MG/5ML INHALATION	5	PA; QL	WINREVAIR	5	PA; QL
TRIKAFTA	4	PA; QL	YUTREPIA	3	
<b>Respiratory Tract / Pulmonary Agents - Drugs for Pulmonary Hypertension</b>			<b>Skeletal Muscle Relaxants - Drugs for Muscle Pain and Spasm</b>		
ADCIRCA	5	PA; QL	AMRIX	3	PA; QL
ADEMPAS	5	PA; QL	BACLOFEN ORAL SOLUTION 10 MG/5ML	3	
alyq	1		baclofen oral solution 5 mg/5ml	3	
ambrisentan	1	PA; QL	baclofen oral suspension	3	PA
bosentan	1	PA; QL	baclofen oral tablet 10 mg, 20 mg, 5 mg	1	
LETAIRIS	5	PA; QL	baclofen oral tablet 15 mg	3	
OPSUMIT	4	PA; QL	carisoprodol oral	3	PA; QL
OPSYNVI	5	PA; QL	chlorzoxazone oral tablet 250 mg	1	
ORENITRAM	5	PA; QL	chlorzoxazone oral tablet 375 mg, 500 mg, 750 mg	1	QL
ORENITRAM MONTH 1	5	PA; QL	cyclobenzaprine hcl er	3	PA; QL
ORENITRAM MONTH 2	5	PA; QL	cyclobenzaprine hcl oral tablet 10 mg, 5 mg	1	QL
ORENITRAM MONTH 3	5	PA; QL	cyclobenzaprine hcl oral tablet 7.5 mg	3	QL
REVATIO ORAL	5	PA	DANTRIUM ORAL	3	
sildenafil citrate oral suspension reconstituted	4	PA; QL	dantrolene sodium oral	1	
sildenafil citrate oral tablet 20 mg	4	PA	FLEQSUVY	3	PA
tadalafil (generic Adcirca)	1		metaxalone oral tablet 400 mg, 800 mg	3	QL
TADLIQ	5	PA; QL	metaxalone oral tablet 640 mg	3	PA; QL
TRACLEER 62.5 MG, 125 MG	3	PA; QL	methocarbamol injection	1	
TRACLEER 32 MG	5	PA; QL	methocarbamol oral tablet 1000 mg	5	PA; QL
TYVASO	2	PA; QL	methocarbamol oral tablet 500 mg, 750 mg	1	QL
TYVASO DPI INSTITUTIONAL KIT	5	PA; QL	NORGESIC	3	
TYVASO DPI MAINTENANCE KIT	5	PA; QL	NORGESIC FORTE	3	QL
TYVASO DPI TITRATION KIT	5	PA; QL	orphenadrine citrate er	1	QL
TYVASO REFILL KIT	2	PA; QL	orphenadrine citrate injection	3	
TYVASO STARTER KIT	2	PA; QL	orphenadrine-aspirin-caffeine	3	
UPTRAVI ORAL	4	PA; QL			
UPTRAVI TITRATION	4	PA; QL			
VENTAVIS	4	PA; QL			

Effective Date: 07/01/2025

Drug Name	Drug Tier	Notes	Drug Name	Drug Tier	Notes
ORPHENGESIC FORTE	3	QL	modafinil oral	1	
OZOBAX DS	3		NUVIGIL	3	
ROBAXIN	3		PROVIGIL	3	
SOMA	3	PA; QL	QUVIVIQ	3	PA; QL
TANLOR	5	PA; QL	ramelteon	3	
tizanidine hcl oral capsule	3		RESTORIL	3	QL
tizanidine hcl oral tablet	1		ROZEREM	3	
ZANAFLEX	3		SILENOR	3	
<b>Sleep Disorder Agents</b>			SODIUM OXYBATE	5	PA; QL
AMBIEN	3	QL	SUNOSI	5	PA; QL
AMBIEN CR	3	QL	tasimelteon	5	PA; QL
armodafinil	1		temazepam oral capsule 15 mg, 30 mg, 7.5 mg	1	QL
BELSOMRA	3	PA	temazepam oral capsule 22.5 mg	3	QL
DAYVIGO	3	PA; QL	WAKIX	5	PA; QL
doxepin hcl oral tablet	3		XYREM	5	PA; QL
EDLUAR	3	QL	XYWAV	5	PA; QL
eszopiclone	1	QL	zaleplon	1	QL
flurazepam hcl	1	QL	zolpidem tartrate er	3	QL
HETLIOZ	5	PA; QL	ZOLPIDEM TARTRATE ORAL CAPSULE	3	PA; QL
HETLIOZ LQ	5	PA; QL	zolpidem tartrate oral tablet	1	QL
LUMRYZ	5	PA; QL	zolpidem tartrate 10 mg	1	PA; QL
LUMRYZ STARTER PACK	5	PA; QL			
LUNESTA	3	QL			

## Index of Drugs

### A

abacavir sulfate ..... 30  
 abacavir sulfate-lamivudine ..... 30  
 ABILIFY ..... 29  
 ABILIFY ASIMTUFII ..... 29  
 ABILIFY MAINTENA ..... 29  
 ABILIFY MYCITE MAINTENANCE KIT ... 29  
 ABILIFY MYCITE STARTER KIT ..... 29  
 abiraterone acetate ..... 25  
 ABIRTEGA ..... 25  
 ABRILADA (1 PEN) ..... 65  
 ABRILADA (2 PEN) ..... 65  
 ABRILADA (2 SYRINGE) 65  
 ABRYSVO ..... 68  
 ABSORICA ..... 41  
 ABSORICA LD ..... 41  
 acamprosate calcium ..... 15  
 ACANYA ..... 41  
 acarbose ..... 47  
 ACCOLATE ..... 78  
 ACCRUFER ..... 52  
 ACCU-CHEK FASTCLIX LANCET KIT ..... 48  
 ACCU-CHEK GUIDE CONTROL ..... 48  
 ACCU-CHEK GUIDE TEST ..... 48  
 ACCU-CHEK SMARTVIEW CONTROL ..... 48  
 ACCU-CHEK SOFTCLIX LANCET DEVICE KIT. 48  
 ACCUPRIL ..... 34  
 ACCURETIC ..... 34  
 accutane ..... 41  
 acebutolol hcl ..... 34  
 acetaminophen-codeine . 12  
 acetazolamide ..... 75  
 acetazolamide er ..... 75  
 acetazolamide sodium.... 34  
 acetic acid ..... 56, 77  
 acetylcysteine ..... 78  
 ACIOXIA ..... 41  
 ACIPHEX ..... 53  
 acitretin ..... 41  
 ACTEMRA ..... 65  
 ACTEMRA ACTPEN ..... 65  
 ACTHAR ..... 59  
 ACTHAR GEL ..... 59  
 ACTHIB ..... 68  
 ACTIMMUNE ..... 65

ACTIVELLA ..... 60  
 ACTONEL ..... 70  
 ACTOPLUS MET ..... 47  
 ACTOS ..... 47  
 ACUICYN ..... 76  
 ACULAR ..... 73  
 ACULAR LS ..... 73  
 ACUVAIL ..... 73  
 acyclovir ..... 30  
 ACZONE ..... 41  
 ADACEL ..... 68  
 ADALIMUMAB-AACF (2 PEN) ..... 65  
 ADALIMUMAB-AACF (2 SYRINGE) ..... 65  
 ADALIMUMAB- AACF(CD/UC/HS STRT) ..... 65  
 ADALIMUMAB- AACF(PS/UV STARTER) ..... 65  
 ADALIMUMAB-AATY (1 PEN) ..... 65  
 ADALIMUMAB-AATY (2 PEN) ..... 65  
 ADALIMUMAB-AATY (2 SYRINGE) ..... 65  
 ADALIMUMAB-AATY CD/UC/HS START ..... 65  
 ADALIMUMAB-ADAZ ..... 65  
 ADALIMUMAB-ADBM (2 PEN) ..... 65  
 ADALIMUMAB-ADBM (2 SYRINGE) ..... 65  
 ADALIMUMAB- ADBM(CD/UC/HS STRT) ..... 65  
 ADALIMUMAB- ADBM(PS/UV STARTER) ..... 65  
 ADALIMUMAB-FKJP (2 PEN) ..... 65  
 ADALIMUMAB-FKJP (2 SYRINGE) ..... 65  
 ADALIMUMAB-RYVK (2 PEN) ..... 65  
 ADALIMUMAB-RYVK (2 SYRINGE) ..... 65  
 adapalene ..... 41  
 ADAPALENE ..... 41  
 adapalene-benzoyl peroxide ..... 41, 42

ADAPALENE-BENZOYL PEROXIDE ..... 42  
 ADBRY ..... 42  
 ADCIRCA ..... 80  
 ADDERALL ..... 39  
 ADDERALL XR ..... 39  
 adefovir dipivoxil ..... 31  
 ADEMPAS ..... 80  
 ADLARITY ..... 20  
 ADMELOG ..... 50  
 ADMELOG SOLOSTAR ..... 50  
 ADRENALIN ..... 77  
 ADTHYZA ..... 65  
 ADVAIR DISKUS ..... 78  
 ADVAIR HFA ..... 78  
 ADVANCED ALLERGY COLLECTION ..... 42  
 ADVOCATE SAFETY LANCETS 21G ..... 48  
 ADVOCATE SAFETY LANCETS 23G ..... 48  
 ADVOCATE SAFETY LANCETS 28G ..... 48  
 ADZENYS XR-ODT ..... 39  
 AEROCHAMBER HOLDING CHAMBER ..... 70  
 AEROCHAMBER MINI CHAMBER ..... 70  
 AEROCHAMBER MV ..... 70  
 AEROCHAMBER PLS FLOVU MTHPIECE ..... 70  
 AEROCHAMBER PLUS FLO-VU INTERM ..... 70  
 AEROCHAMBER PLUS FLO-VU LARGE ..... 70  
 AEROCHAMBER PLUS FLO-VU MEDIUM ..... 70  
 AEROCHAMBER PLUS FLO-VU SMALL ..... 70  
 AEROCHAMBER PLUS FLOW VU ..... 70  
 AEROCHAMBER W/FLOWSIGNAL ..... 70  
 AFINITOR ..... 25  
 AFINITOR DISPERZ ..... 25  
 afirmelle ..... 60  
 AFLURIA ..... 68  
 AFLURIA PRESERVATIVE FREE ..... 68  
 AFREZZA ..... 50  
 aftera ..... 60  
 AFTERPILL ..... 60

AGAMATRIX CONTROL	
LEVEL 2.....	48
AGAMATRIX CONTROL	
LEVEL 4.....	48
AGAMREE.....	57
AGONEAZE.....	14
AGRYLIN.....	33
AIMOVIG.....	24
AIRDUO RESPICLICK	
113/14.....	78
AIRDUO RESPICLICK	
232/14.....	78
AIRDUO RESPICLICK	
55/14.....	78
AIRSUPRA.....	78
AJOVY.....	24
AKEEGA.....	25
AKLIEF.....	42
AKTEN.....	76
AKYNZEO.....	22
ALA SCALP.....	42
ala-cort.....	42
albendazole.....	28
albuterol sulfate.....	78
ALBUTEROL SULFATE .	78
albuterol sulfate hfa.....	78
ALBUTEROL SULFATE	
HFA .....	78
ALCAINE.....	76
alclometasone dipropionate	
.....	42
ALCOHOL PREP PADS .	70
ALDACTONE.....	34
ALECENSA.....	25
alendronate sodium.....	70
alfuzosin hcl er.....	57
ALHEMO.....	33
aliskiren fumarate.....	34
ALKINDI SPRINKLE.....	57
allopurinol .....	24
ALLZITAL .....	12
almotriptan malate.....	24
ALOCRIL.....	73
ALOGLIPTIN BENZOATE	
.....	47
ALOGLIPTIN-METFORMIN	
HCL .....	47
ALOGLIPTIN-	
PIOGLITAZONE.....	47
ALORA.....	60
alosetron hcl .....	54
ALPHAGAN P.....	75
alprazolam.....	32
alprazolam er.....	32
alprazolam intensol .....	32
alprazolam xr .....	32
alprostadil .....	34
ALREX .....	73
altacaine.....	76
ALTACE .....	34
altafrin .....	76
altavera .....	60
ALTOPREV .....	34
ALTRENO.....	42
ALUNBRIG .....	25
ALVAIZ.....	33
ALVESCO.....	78
alyacen 1/35 .....	60
alyacen 7/7/7 .....	60
ALYFTREK .....	80
alyq .....	80
amantadine hcl.....	28
AMBIEN.....	81
AMBIEN CR.....	81
ambrisentan.....	80
amcinonide .....	42
AMELUZ.....	42
amethyst.....	60
amiloride hcl.....	34
amiloride-	
hydrochlorothiazide .....	34
aminocaproic acid .....	33
amiodarone hcl .....	34
AMITIZA.....	54
amitriptyline hcl .....	20
AMJEVITA.....	65
AMJEVITA-PED 10KG TO	
<15KG	
SUBCUTANEOUS	
SOLUTION PREFILLED	
SYRINGE 10MG/0.2ML	
.....	65
AMJEVITA-PED 15KG TO	
<30KG .....	66
amlodipine besylate.....	34
amlodipine besylate-	
benazepril hcl.....	34
amlodipine besylate-	
valsartan .....	34
amlodipine-atorvastatin .....	34
amlodipine-olmesartan .....	34
amlodipine-valsartan-hctz	34
ammonium lactate.....	42
amnesteem .....	42
amoxapine .....	20
amoxicill-clarithro-lansopraz	
.....	54
amoxicillin .....	16
amoxicillin-potassium	
clavulanate.....	16
amoxicillin-potassium	
clavulanate er.....	16
amphetamine sulfate .....	39
amphetamine-	
dextroamphetamine .....	39
amphetamine-	
dextroamphetamine er .....	39
amphet-dextroamphet 3-	
bead er .....	39
ampicillin.....	16
ampicillin sodium.....	16
AMPYRA .....	40
AMRIX.....	81
AMZEEQ .....	42
ANAFRANIL.....	20
anagrelide hcl .....	33
ANALPRAM-HC.....	69
ANAPROX DS .....	11
ANASPAZ .....	54
anastrozole .....	25
ANCOBON .....	23
ANDROGEL PUMP.....	59
ANGELIQ .....	60
ANNOVERA .....	60
ANODYNE LPT.....	14
ANORO ELLIPTA.....	78
ANTIVENIN	
LATRODECTUS	
MACTANS .....	66
ANUCORT-HC.....	69
anusol-hc.....	69
ANUSOL-HC.....	69
ANZEMET .....	22
APADAZ .....	12
apap-caff-dihydrocodeine	12
APIDRA SOLOSTAR .....	50
APIDRA VIAL.....	50
APLENZIN .....	20
APOKYN .....	28
apomorphine hcl .....	28
apraclonidine hcl .....	75
aprepitant .....	22
api .....	60
APRISO .....	69
APTENSIO XR.....	39
APTIOM .....	18
APTIVUS .....	31
AQ INSULIN SYRINGE .....	50
AQINJECT PEN NEEDLE	
.....	70
AQNEURSA .....	70
aranelle .....	60
ARANESP (ALBUMIN	
FREE).....	33
ARAVA .....	66

ARAZLO .....	42	ATTRUBY.....	34
ARCALYST .....	66	AUBAGIO .....	40
AREXVY .....	68	aubra eq .....	60
arformoterol tartrate.....	78	AUDENZ.....	68
ARGYLE STERILE SALINE .....	52	AUGMENTIN .....	16
argyle sterile water .....	52	AUGMENTIN ES-600.....	16
ARICEPT .....	20	AUGTYRO.....	25
ARIKAYCE.....	16	AUM ALCOHOL PREP PADS.....	71
ARIMIDEX .....	25	AUM INSULIN SAFETY PEN NEEDLE .....	71
aripiprazole .....	29	AUM MINI INSULIN PEN NEEDLE .....	71
ARISTADA.....	29	AUM PEN NEEDLE.....	71
ARISTADA INITIO.....	29	AUM READYGARD DUO PEN NEEDLE .....	71
ARIXTA.....	18	AUM SAFETY PEN NEEDLE .....	71
armodafinil .....	81	AURANOFIN.....	66
ARMOUR THYROID .....	65	aurovela 1.5/30 .....	60
ARNUITY ELLIPTA .....	78	aurovela 1/20.....	60
AROMASIN.....	25	aurovela 24 fe .....	60
ARTHROTEC.....	11	aurovela fe 1.5/30 .....	61
arzol silver nit applicators	42	aurovela fe 1/20 .....	61
ascomp-codeine .....	12	AURYXIA.....	56
asenapine maleate .....	29	AUSTEDO .....	41
ashlyna .....	60	AUSTEDO XR .....	41
ASMANEX (120 METERED DOSES).....	78	AUSTEDO XR PATIENT TITRATION .....	41
ASMANEX (14 METERED DOSES).....	78	AUTOLET II CLINISAFE ..	48
ASMANEX (30 METERED DOSES).....	78	AUTOLET LANCING DEVICE .....	48
ASMANEX HFA .....	78	AUTOLET LITE LANCING DEVICE .....	48
aspirin-dipyridamole er ...	29	AUVELITY .....	20
ASPRUZYD SPRINKLE .	34	AUVI-Q.....	78
ASSURE ID DUO PRO PEN NEEDLES .....	71	AVALIDE .....	34
ASSURE ID PRO PEN NEEDLES .....	71	AVAPRO .....	34
ASTAGRAF XL .....	66	avar cleanser .....	42
ASTERO.....	14	AVAR LS CLEANSER .....	42
ATACAND .....	34	AVAR-E EMOLLIENT .....	42
ATACAND HCT.....	34	AVENOVA .....	76
atazanavir sulfate .....	31	aviane.....	61
ATELVIA.....	70	avidoxy .....	16
atenolol.....	34	AVMAPKI FAKZYNJA CO- PACK.....	25
atenolol-chlorthalidone....	34	AVODART .....	57
ATIVAN .....	32	AVONEX PEN .....	40
atomoxetine hcl.....	39	AVONEX PREFILLED .....	40
ATORVALIQ .....	34	ayuna .....	61
atorvastatin calcium.....	34	AYVAKIT .....	25
atovaquone.....	28	AZASAN.....	66
ATRALIN .....	42	AZASITE .....	73
atropine sulfate .....	76	azathioprine .....	66
ATROPISE SULFATE....	76	azelaic acid.....	42
ATROVENT HFA .....	78	azelastine hcl .....	73, 77
		azelastine-fluticasone .....	77
		AZELEX.....	42
		AZILECT.....	28
		azithromycin .....	16
		AZOPT .....	75
		AZOR .....	34
		AZSTARYS .....	39
		AZULFIDINE .....	69
		AZULFIDINE EN-TABS ..	69
		azurette .....	61
		<b>B</b>	
		bac (butalbital-acetamin- caff) .....	12
		bacitracin .....	73
		bacitracin-polymyxin b ..	76
		bacitra-neomycin- polymyxin-hc .....	76
		baclofen.....	81
		BACLOFEN .....	81
		BACTRIM .....	16
		BACTRIM DS .....	16
		BAFIERTAM .....	40
		BALCOLTRA .....	61
		balsalazide disodium .....	69
		BALVERSA .....	25
		balziva .....	61
		BANZEL .....	18
		BAQSIMI ONE PACK .....	50
		BAQSIMI TWO PACK .....	50
		BARACLUDE .....	31
		BASAGLAR KWIKPEN .....	50
		BASAGLAR TEMPO PEN .....	50
		BAXDELA .....	16
		BD AUTOSHIELD DUO PEN NEEDLES .....	71
		BD PEN NEEDLE MICRO ULTRAFINE .....	71
		BD PEN NEEDLE MINI ULTRAFINE .....	71
		BD PEN NEEDLE NANO ULTRAFINE .....	71
		BD PEN NEEDLE ORIG ULTRAFINE .....	71
		BD PEN NEEDLE SHORT ULTRAFINE .....	71
		BD ULTRA-FINE INSULIN SYRINGES .....	50
		BD ULTRA-FINE PEN NEEDLES .....	71
		BD VEO INSULIN SYR ULTRAFINE .....	50
		BELBUCA .....	12

belladonna alkaloids-opium ..... 54  
 BELSOMRA ..... 82  
 benazepril hcl ..... 34  
 benazepril-  
     hydrochlorothiazide.... 34  
 BENICAR..... 34  
 BENICAR HCT ..... 34  
 BENLYSTA..... 66  
 BENZAMYCIN ..... 42  
 BENZHYDROCODONE-  
     ACETAMINOPHEN .... 12  
 BENZNIDAZOLE..... 28  
 benzonataate ..... 77  
 BENZOYL PEROX-  
     HYDROCORTISONE.. 42  
 BENZOYL PEROXIDE ... 42  
 BENZOYL PEROXIDE  
     FORTE- HC..... 42  
 benzoyl peroxide-  
     erythromycin..... 42  
 benztropine mesylate .... 28  
 bepotastine besilate ..... 73  
 BEPREVE..... 73  
 BERINERT..... 66  
 BESIVANCE ..... 73  
 BESREMI ..... 25  
 BETADINE OPHTHALMIC  
     PREP ..... 74  
 betaine..... 55  
 betamethasone  
     dipropionate ..... 42  
 betamethasone  
     dipropionate aug..... 42  
 BETAMETHASONE  
     SODIUM PHOSPHATE57  
 betamethasone valerate . 42  
 BETAPACE..... 34  
 BETAPACE AF ..... 34  
 BETASERON..... 40  
 betaxolol hcl..... 34, 75  
 bethanechol chloride ..... 56  
 BETHKIS ..... 80  
 BETIMOL..... 75  
 BETOPTIC-S ..... 75  
 BEVESPI AEROSPHERE78  
 BEXAGLIFLOZIN ..... 47  
 bexarotene..... 25  
 BEXSERO ..... 68  
 BEYAZ..... 61  
 bicalutamide..... 25  
 BICILLIN L-A..... 16  
 BIDIL ..... 34  
 BIJUVA..... 61  
 BIKTARVY..... 31

BILTRICIDE ..... 28  
 bimatoprost..... 75  
 BIMZELX ..... 66  
 BINOSTO ..... 70  
 BIOTHRAX ..... 68  
 bis subcit-metronid-tetracyc  
     ..... 54  
 bismuth/metronidaz/tetracyc  
     lin ..... 54  
 bisoprolol fumarate..... 34  
 bisoprolol-  
     hydrochlorothiazide .... 34  
 blisovi 24 fe..... 61  
 blisovi fe 1.5/30 ..... 61  
 blisovi fe 1/20..... 61  
 BLULINK CONTROL HIGH  
     & LOW..... 48  
 BONJESTA..... 22  
 BOOSTRIX ..... 68  
 bosentan..... 80  
 BOSULIF ..... 25  
 bp 10-1 ..... 42  
 BRAFTOVI..... 25  
 BREATHE COMFORT  
     CHAMBER/ADULT ..... 71  
 BREATHE COMFORT  
     CHAMBER/CHILD..... 71  
 BREATHE EASE LARGE 71  
 BREATHE EASE MEDIUM  
     ..... 71  
 BREATHE EASE SMALL 71  
 BREATHERITE VALVED  
     MDI CHAMBER..... 71  
 BRENAVY ..... 47  
 BREO ELLIPTA ..... 78  
 BREXA FEMME..... 23  
 breyna ..... 78  
 BREZTRI AEROSPHERE78  
 briellyn..... 61  
 BRILINTA ..... 29  
 brimonidine tartrate ...42, 75  
 brimonidine tartrate-timolol  
     ..... 75  
 BRIMONIDINE-  
     DORZOLAMIDE ..... 75  
 brinzolamide ..... 75  
 BRIVIACT ..... 18  
 bromfenac sodium..... 74  
 bromfenac sodium (once-  
     daily)..... 74  
 bromocriptine mesylate ...28  
 BROMPHENIRAMINE  
     MALEATE ..... 77  
 bromphen-pseudoeph-dm77  
 BROMSITE ..... 74

BRONCHITOL ..... 80  
 BRONCHITOL  
     TOLERANCE TEST.... 80  
 BROVANA..... 79  
 BRUKINSA ..... 25  
 BRUSELIX..... 14  
 BRYHALI ..... 42  
 BUCAPSOL ..... 32  
 budesonide ..... 69, 79  
 budesonide er ..... 69  
 budesonide-formoterol  
     fumarate ..... 79  
 bumetanide..... 34  
 BUMEX ..... 34  
 BUPHENYL ..... 55  
 buprenorphine..... 12  
 buprenorphine hcl ..... 15  
 buprenorphine hcl-haloxone  
     hcl..... 15  
 bupropion hcl ..... 21  
 bupropion hcl er (smoking  
     det) ..... 15  
 bupropion hcl er (sr) ..... 20  
 bupropion hcl er (xl)..... 21  
 BUPROPION HCL ER (XL)  
     ..... 21  
 buspirone hcl ..... 32  
 butalbital-acetaminophen.12  
 butalbital-apap-caff-cod ...12  
 butalbital-apap-caffeine ...12  
 butalbital-asa-caff-codeine  
     ..... 12  
 butalbital-aspirin-caffeine.12  
 butorphanol tartrate..... 12  
 BUTRANS ..... 12  
 BYLVAY ..... 71  
 BYLVAY (PELLETS) ..... 71  
 BYSTOLIC..... 34  
**C**  
 cabergoline ..... 59  
 CABLIVI..... 29  
 CABOMETYX ..... 25  
 CABTREO ..... 42  
 CADUET..... 34  
 caffeine citrate ..... 41  
 CAFFEINE-SODIUM  
     BENZOATE..... 41  
 calcipotriene ..... 42  
 CALCIPOTRIENE ..... 42  
 calcipotriene-betameth  
     diprop ..... 42  
 calcitonin (salmon) ..... 70  
 calcitrene ..... 42  
 calcitriol ..... 42, 70  
 calcium acetate ..... 56

calcium acetate (phos binder) .....	56
CALQUENCE.....	25
CAMBIA.....	24
camila.....	61
camrese.....	61
camrese lo .....	61
CAMZYOS.....	34
CANASA.....	69
candesartan cilexetil.....	34
candesartan cilexetil-hctz	34
capecitabine.....	25
CAPLYTA .....	29
CAPRELSA.....	25
captopril.....	34
captopril- hydrochlorothiazide.....	34
CAPVAXIVE .....	68
CARAFATE.....	53
CARBAGLU.....	52
carbamazepine .....	19
carbamazepine er .....	18
CARBATROL.....	19
carbidopa.....	28
carbidopa-levodopa.....	28
carbidopa-levodopa er....	28
carbidopa-levodopa- entacapone .....	28
carbinoxamine maleate...	77
CARBINOXAMINE MALEATE ER .....	77
CARDIZEM.....	34
CARDIZEM CD .....	34
CARDIZEM LA.....	34
CARDURA.....	34
CARDURA XL.....	57
CARESENS CONTROL SOLUTION A/B .....	48
CARESENS LANCETS 30G .....	48
CARETOUCH CONTROL SOL LEVEL 2.....	48
CARETOUCH LANCING/EJECTOR..	48
carglumic acid.....	52
carisoprodol .....	81
CARNITOR.....	52
CARNITOR SF.....	52
CAROSPIR.....	34
carteolol hcl.....	75
cartia xt.....	34
carvedilol .....	34
carvedilol phosphate er...	35
CASODEX.....	25
CATAPRES-TTS-1.....	35
CATAPRES-TTS-2.....	35
CATAPRES-TTS-3.....	35
CAYA .....	71
CAYSTON.....	80
cefaclor.....	16
cefaclor er.....	16
cefadroxil .....	16
cefazolin sodium .....	16
cefdinir.....	16
cefeprazole hcl .....	16
cefixime .....	16
cefpodoxime proxetil .....	16
cefprozil.....	16
ceftazidime .....	16
ceftriaxone sodium .....	16
cefuroxime axetil .....	16
CELEBREX .....	11
celecoxib .....	11
CELEXA.....	21
CELLCEPT.....	66
CELONTIN.....	19
cem-urea .....	42
cephalexin .....	16
CEQUA .....	76
CERDELGA.....	55
CERVIDIL.....	56
cetirizine hcl.....	77
CETRAXAL.....	77
cevimeline hcl .....	41
charlotte 24 fe .....	61
chateal eq.....	61
CHEMET .....	52
CHEMSTRIP 10 MD.....	48
CHEMSTRIP 10/SG.....	48
CHEMSTRIP 2 GP.....	48
CHEMSTRIP 5 OB.....	48
CHEMSTRIP 7.....	48
CHEMSTRIP 9.....	49
CHENODAL.....	54
chlordiazepoxide hcl.....	32
chlordiazepoxide- amitriptyline.....	21
chlordiazepoxide-clidinium .....	54
chlorhexidine gluconate .....	41
chloroquine phosphate .....	28
chlorpromazine hcl .....	29
chlorthalidone .....	35
chlorzoxazone.....	81
CHOLBAM.....	55
cholestyramine .....	35
cholestyramine light.....	35
CHOSEN LANCETS 30G	49
CHOSEN LANCING DEVICE .....	49
CHOSEN SAFETY	
LANCETS 28G.....	49
CIBINQO .....	42
ciclodan .....	23
ciclopirox .....	23
ciclopirox olamine.....	23
cilostazol .....	29
CILOXAN.....	74
CIMDUO.....	31
cimetidine .....	53
cimetidine hcl .....	53
CIMZIA.....	66
CIMZIA (2 SYRINGE).....	66
CIMZIA-STARTER .....	66
cinacalcet hcl .....	70
CINRYZE.....	66
CIPRO.....	16
CIPRO HC.....	77
ciprofloxacin hcl .....	16, 74, 77
ciprofloxacin- dexamethasone .....	77
CIPROFLOXACIN- FLUOCINOLONE PF... <td>77</td>	77
citalopram hydrobromide	.21
CITALOPRAM HYDROBROMIDE.....	21
claravis .....	42
CLARINEX.....	77
CLARINEX-D 12 HOUR .....	77
clarithromycin .....	16
clarithromycin er .....	16
clemastine fumarate .....	77
CLEMASZ.....	77
CLENPIQ.....	54
CLEOCIN .....	16
CLEOCIN PHOSPHATE..	16
CLEOCIN-T .....	42
CLEVER CHOICE COMFORT EZ .....	49
CLEVER CHOICE HOLDING CHAMBER..	71
CLIMARA .....	61
CLIMARA PRO .....	61
clindacin .....	42
clindacin etz .....	42
clindacin-p .....	42
CLINDAGEL .....	42
clindamycin hcl.....	16
clindamycin palmitate hcl.	16
clindamycin phos (once- daily) .....	42
clindamycin phos (twice- daily) .....	42
clindamycin phosphate...	16,
42, 43	

clindamycin phosphate-	
benzoyl peroxide .....	42
clindamycin-tretinoin.....	43
CLINDESSE .....	16
clobazam .....	19
clobetasol propionate ....	43
CLOBETASOL	
PROPIONATE.....	43
clobetasol propionate e.....	43
clobetasol propionate	
emulsion .....	43
CLOBEX.....	43
CLOBEX SPRAY .....	43
clocortolone pivalate.....	43
clodan.....	43
CLODERM.....	43
clomipramine hcl .....	21
clonazepam .....	32
clonidine .....	35
CLONIDINE ER.....	35
clonidine hcl .....	35
clonidine hcl er .....	39
clopидогrel bisulfate.....	29
clorazepate dipotassium .	32
clotrimazole.....	23
clotrimazole-betamethasone	
.....	23
clozapine .....	29
CLOZARIL .....	29
COARTEM.....	28
COBENFY .....	29
COBENFY STARTER	
PACK.....	29
COCAINE HCL .....	14
codeine sulfate.....	12
COLAZAL .....	69
colchicine.....	24
colchicine-probenecid .....	24
colesevelam hcl.....	35
COLESTID.....	35
colestipol hcl .....	35
colistimethate sodium (cba)	
.....	16
COLY-MYCIN M.....	16
COMBIGAN .....	75
COMBIPATCH .....	61
COMBIVENT RESPIMAT	79
COMBOGESIC .....	11
COMETRIQ .....	25
COMFORT EZ PRO PEN	
NEEDLES .....	71
COMFORT TOUCH TWIST	
LANCET 30G .....	49
COMIRNATY .....	68
COMPACT SPACE	
CHAMBER.....	71
COMPACT SPACE	
CHAMBER/LG MASK..	71
COMPACT SPACE	
CHAMBER/MED MASK	
.....	71
COMPACT SPACE	
CHAMBER/SM MASK .	71
COMPLERA.....	31
compro .....	22
CONCERTA.....	39
CONDYLOX.....	43
CONJUPRI .....	35
constulose .....	54
CONTOUR CONTROL	
SOLUTION.....	49
CONTOUR NEXT	
CONTROL SOLUTION	49
CONTOUR NEXT GEN	
TEST STRIPS .....	49
CONZIP .....	12
COPAXONE .....	40
COPIKTRA .....	25
CORDRAN .....	43
COREG .....	35
COREG CR .....	35
CORLANOR .....	35
CORTEF.....	57
CORTENEMA .....	69
CORTIFOAM .....	69
CORTISONE ACETATE..	57
CORTISPORIN-TC .....	77
CORTROPHIN .....	59
CORTROPHIN GEL .....	59
COSENTYX (300 MG	
DOSE).....	66
COSENTYX 150 MG/ML	66
COSENTYX	
SENSOREADY (300 MG)	
.....	66
COSENTYX	
SENSOREADY PEN ..	66
COSENTYX UNOREADY	66
COSOPT .....	75
COSOPT PF .....	75
COTELLIC .....	25
COTEMPLA XR-ODT .....	39
covaryx .....	61
covaryx hs .....	61
COXANTO.....	11
COZAAR .....	35
CRENESSITY .....	59
CREON .....	55
CRESEMBA.....	23
CRESTOR.....	35
CREXONT .....	28
CRINONE .....	61
cromolyn sodium.	54, 74, 79
CROTAN .....	28
CRYODOSE TA.....	14
cryselle-28 .....	61
CRYSVITA.....	55
CTEXLI.....	54
CUPRIMINE.....	56
curity sterile saline.....	52
CUROSURF .....	77
CUTAQUIG.....	66
CUVITRU .....	66
CUVPOSA .....	54
CUVRIOR .....	52
cyanocobalamin .....	52
cyclobenzaprine hcl .....	81
cyclobenzaprine hcl er .....	81
CYCLOGYL .....	76
CYCLOMYDRIL .....	76
cyclopentolate hcl .....	76
cyclophosphamide .....	25
CYCLOPHOSPHAMIDE .....	25
cycloserine .....	25
CYCLOSET .....	47
cyclosporine .....	66, 76
cyclosporine modified .....	66
CYLTEZO (2 PEN) .....	66
CYLTEZO (2 SYRINGE) .....	66
CYLTEZO-CD/UC/HS	
STARTER .....	66
CYLTEZO-PSORIASIS/UV	
STARTER .....	66
CYMBALTA .....	21
cyproheptadine hcl .....	77
cyred eq .....	61
CYSTADANE .....	56
CYSTADROPS .....	76
CYSTAGON .....	56
CYSTARAN .....	76
CYTOMEL .....	65
CYTOTEC .....	53
CYTOTINE .....	71
cytra k crystals .....	52
<b>D</b>	
dabigatran etexilate	
mesylate .....	18
dalfampridine er .....	40
DALIRESP .....	79
danazol .....	59
DANTRIUM .....	81
dantrolene sodium .....	81
DANZITEN .....	25

**DAPAGLIFLOZIN PRO-**  
 METFORMIN ER..... 47  
**DAPAGLIFLOZIN**  
 PROPANEDIOL ..... 47  
 dapsoe..... 25, 43  
**DAPTACEL**..... 68  
**DARAPRIM**..... 28  
 darifenacin hydrobromide er  
       ..... 56  
 darunavir..... 31  
 dasatinib ..... 25  
 dasetta 1/35 (28)..... 61  
 dasetta 7/7/7 ..... 61  
**DAURISMO** ..... 25  
**DAYBUE** ..... 41  
**DAYPRO** ..... 11  
 daysee..... 61  
**DAYTRANA** ..... 39  
**DAYVIGO** ..... 82  
**DDAVP** ..... 59  
**DDAVP PF** ..... 59  
**DEBACTEROL** ..... 41  
 debilitane..... 61  
 deferasirox..... 52  
 deferasirox granules ..... 52  
 deferiprone ..... 52  
 deferoxamine mesylate... 71  
 deflazacort ..... 57  
**DELESTROGEN** ..... 61  
**DELSTRIGO** ..... 31  
 delyla..... 61  
 demeclocycline hcl ..... 17  
**DEM SER** ..... 35  
**DENAVIR** ..... 31  
**DEPAKOTE** ..... 19  
**DEPAKOTE ER** ..... 19  
**DEPAKOTE SPRINKLES** 19  
**DEPEN TITRATABS** ..... 56  
**DEPO-ESTRADIOL** ..... 61  
**DEPO-MEDROL** ..... 57  
**DEPO-PROVERA** ..... 61  
**DEPO-SUBQ PROVERA**  
     104 ..... 61  
**DEPO-TESTOSTERONE** 59  
**DERMACINRX LIDO GEL** 14  
**DERMACINRX UREA** .... 43  
**DERMA-SMOOTH/FS**  
     BODY ..... 43  
**DERMA-SMOOTH/FS**  
     SCALP ..... 43  
**DERMOTIC** ..... 77  
**DESCO VY** ..... 31  
**DESFERAL** ..... 71  
 desipramine hcl..... 21  
 desloratadine ..... 77

desmopressin ace spray  
     refrig ..... 59  
 desmopressin acetate ..... 59  
**DESMOPRESSIN**  
     ACETATE ..... 59  
 desmopressin acetate pf ..... 59  
 desmopressin acetate spray  
       ..... 59  
 desogestrel-ethynodiol estradiol  
       ..... 61  
 desonide..... 43  
**DESOWEN** ..... 43  
 desoximetasone ..... 43  
**DESVENLA FAXINE ER** ..21  
 desvenlafaxine succinate er  
       ..... 21  
**DETROL** ..... 56  
 dexamethasone ..... 57, 58  
**DEXAMETHASONE (LA)** 57  
**DEXAMETHASONE**  
     ACETATE ..... 57  
 dexamethasone intensol..57  
 dexamethasone sod phos  
     +rfd ..... 58  
 dexamethasone sod  
     phosphate pf ..... 58  
 dexamethasone sodium  
     phosphate ..... 58, 74  
**DEXAMETHASONE**  
     SODIUM PHOSPHATE58  
**DEXEDRINE** ..... 39  
**DEXILANT** ..... 53  
 dexlansoprazole ..... 53  
 dexmethylphenidate hcl...39  
 dexmethylphenidate hcl er  
       ..... 39  
**DEXONTO 0.4%** ..... 58  
 dextroamphetamine sulfate  
       ..... 39  
 dextroamphetamine sulfate  
     er ..... 39  
**DHV Y** ..... 28  
**DIACOMIT** ..... 19  
**DIASTIX REAGENT** ..... 49  
**DIATHRIVE GLUCOSE**  
     CONTROL SOLN ..... 49  
**DIATHRIVE LANCING**  
     DEVICE ..... 49  
 diazepam..... 19, 33  
**DIAZEPAM** ..... 33  
 diazepam intensol ..... 33  
 diazoxide ..... 50  
**DIBENZYLINE** ..... 35  
 dichlorphenamide..... 75  
**DICLEGIS** ..... 22

**DICLOFENAC PATCH**  
     1.3% ..... 11  
 diclofenac potassium ..... 11  
 diclofenac  
     potassium(migraine)....24  
 diclofenac sodium 11, 43, 74  
 diclofenac sodium er .....11  
 diclofenac-misoprostol .....11  
**DICLOFONO** ..... 11  
 dicloxacillin sodium ..... 17  
 dicyclomine hcl ..... 54  
**DIFFERIN** ..... 43  
**DIFICID** ..... 17  
 diflorasone diacetate ..... 43  
**DIFLUCAN** ..... 23  
 diflunisal ..... 11  
 difluprednate ..... 74  
 digoxin ..... 35  
 dihydroergotamine mesylate  
       ..... 24  
**DILANTIN** ..... 19  
**DILANTIN INFATABS** ..... 19  
**DILANTIN-125** ..... 19  
**DILAUDID** ..... 12  
 diltiazem hcl ..... 35  
 diltiazem hcl er ..... 35  
 diltiazem hcl er beads ..... 35  
 diltiazem hcl er coated  
     beads ..... 35  
 dilt-xr ..... 35  
 dimenhydrinate ..... 22  
 dimethyl fumarate ..... 40  
 dimethyl fumarate starter  
     pack ..... 40  
**DIOVAN** ..... 35  
**DIOVAN HCT** ..... 35  
**DIPENTUM** ..... 69  
 diphenhydramine hcl ..... 77  
 diphenoxylate-atropine ..... 54  
**DIPROLENE** ..... 43  
 dipyridamole ..... 29  
 disopyramide phosphate..35  
 disulfiram ..... 15  
**DIURIL** ..... 35  
 divalproex sodium ..... 19  
 divalproex sodium er ..... 19  
**DIVIGEL** ..... 61  
 dofetilide ..... 35  
**DOJOLVI** ..... 71  
 dolishale ..... 61  
**DOLOBID** ..... 11  
 donepezil hcl ..... 20  
**DOPTELET** ..... 33  
**DORYX MPC** ..... 17  
 dorzolamide hcl ..... 75

DORZOLAMIDE HCL.....	75
dorzolamide hcl-timolol mal .....	75
dorzolamide hcl-timolol mal pf.....	75
dotti.....	61
DOVATO.....	31
doxazosin mesylate.....	35
doxepin hcl .....	21, 43, 82
doxercalciferol.....	70
doxycycline.....	43
doxycycline hydiate .....	17
DOXYCYCLINE HYCLATE .....	17
doxycycline monohydrate	17
doxylamine-pyridoxine....	22
DRISDOL.....	52
DRIZALMA SPRINKLE... ..	21
dronabinol.....	22
DROPLET GENTEL LANCING DEVICE .....	49
DROPSAFE ACTI-LANCE 23G.....	49
DROPSAFE ALCOHOL PREP .....	71
DROPSAFE SAFETY SYRINGE/NEEDLE .....	50
drospirenone-ethynodiol .....	61
drospirenone-ethynodiol .....	61
DROXIA.....	25
droxidopa.....	35
DRYSOL.....	43
DUAKLIR PRESSAIR.....	79
DUAVEE.....	61
DUETACT.....	47
DUEXIS.....	11
DULERA.....	79
duloxetine hcl.....	21
DUOPA.....	28
DUPIXENT.....	43
DUREZOL.....	74
dutasteride.....	57
dutasteride-tamsulosin hcl .....	57
DUVYZAT.....	56
DYANAVEL XR.....	39
DYCLOPRO.....	43
DYMISTA.....	77
DYRENIUM.....	35
<b>E</b>	
E.E.S. 400 .....	17
E.E.S. GRANULES .....	17
EASIVENT .....	71

EASY TALK PLUS II CONTROL .....	49
EASY TOUCH HEALTHPRO HIGH/LOW .....	49
EASY TOUCH LANCING DEVICE .....	49
EASY TRAK II CONTROL .....	49
EASYMAX 15 LEVEL 2-3 CONTROL .....	49
EASYMAX CONTROL.....	49
EBGLYSS.....	43
EC-NAPROSYN.....	11
ec-naproxen.....	11
econazole nitrate.....	23
econtra one-step .....	61
ECOZA.....	23
EDARBI.....	35
EDARBYCLOR .....	35
EDECIN .....	35
EDETA CALCIUM DISODIUM.....	71
EDLUAR.....	82
EDURANT .....	31
EDURANT PED .....	31
eemt .....	61
eemt hs .....	61
efavirenz.....	31
efavirenz-emtricitab-tenofovir df .....	31
efavirenz-lamivudine-tenofovir .....	31
effer-k.....	52
EFFER-K.....	52
EFFEXOR XR.....	21
EFFIENT .....	29
EGRIFTA SV .....	59
EHA.....	14
ELEPSIA XR.....	19
ELESTRIN .....	61
eletriptan hydrobromide .....	24
ELIDEL .....	43
ELIGARD.....	59
ELIMITE .....	28
elinest.....	61
ELIQUIS .....	18
ELIQUIS DVT/PE STARTER PACK.....	18
elixophyllin .....	79
ELLA .....	61
ELMIRON .....	56
eltrombopag olamine.....	33
eluryng .....	61
ELYXYB .....	11

EMBECTA AUTOSHIELD DUO .....	71
EMBECTA INS SYR U/F 1/2 UNIT .....	50
EMBECTA INSULIN SYR ULTRAFINE .....	50
EMBECTA INSULIN SYRINGE.....	50
EMBECTA INSULIN SYRINGE U-100 .....	50
EMBECTA INSULIN SYRINGE U-500 .....	50
EMBECTA PEN NEEDLE NANO .....	71
EMBECTA PEN NEEDLE NANO 2 GEN.....	71
EMBECTA PEN NEEDLE ULTRAFINE .....	71
EMBRACE LANCING DEVICE/EJECTOR .....	49
EMBRACE PEN NEEDLES .....	71
EMBRACE TALK GLUCOSE CONTROL.....	49
EMEND .....	22
EMEND BIPACK .....	22
EMEND TRIPACK .....	22
EMFLAZA .....	58
EMGALITY .....	24
EMROSI .....	43
EMSAM .....	21
emtricitabine .....	31
emtricitabine-tenofovir df .....	31
emtricitabril-pivirtenofovir df .....	31
EMTRIVA .....	31
EMVERM .....	28
emzahh .....	61
enalapril maleate .....	35
enalapril-hydrochlorothiazide .....	35
ENBREL .....	66
ENBREL MINI .....	66
ENBREL SURECLICK .....	66
ENDARI .....	71
endocet .....	12
ENDOMETRIN .....	61
ENGERIX-B .....	68
enilloring .....	61
enoxaparin sodium .....	18
empresse-28 .....	61
enskyce .....	61
ENSPRYNG .....	66
ENSTILAR .....	43
entacapone .....	28

ENTADFI .....	56
entecavir.....	31
ENTRESTO .....	35
ENTYVIO PEN.....	66
enulose.....	54
ENVARSUS XR .....	66
EOHILIA .....	69
EPANED.....	35
EPCLUSA.....	31
EPIDIOLEX.....	19
EPIDUO.....	43
EPIDUO FORTE .....	43
EPIFOAM .....	43
epinastine hcl.....	74
epinephrine .....	35, 79
EPINEPHRINE.....	35, 79
epinephrine hcl (nasal) ...	77
epinephrine pf .....	35
EPINEPHRINE PROFESSIONAL.....	79
EPINEPHRINESNAP .....	79
EPINEPHRINESNAP-EMS .....	79
EPINEPHRINESNAP-V..	79
EPIPEN 2-PAK .....	79
EPIPEN JR 2-PAK .....	79
epitol.....	19
EPIVIR.....	31
eplerenone.....	35
EPOGEN .....	33
EPRONTIA .....	19
EPSOLAY.....	43
EQUETRO.....	33
ergocalciferol .....	52
ERGOMAR .....	24
ergotamine-caffeine.....	24
ERIVEDGE .....	25
ERLEADA.....	25
erlotinib hcl .....	25
ERMEZA.....	65
errin .....	61
ERTACZO .....	23
ery pad 2% .....	43
ERYGEL.....	44
ERYPED 400 .....	17
erythromycin .....	17, 44, 74
erythromycin base.....	17
erythromycin ethylsuccinate .....	17
ERZOFRI.....	29
ESBRIET .....	79
escitalopram oxalate.....	21
eslicarbazepine acetate..	19
esomeprazole magnesium .....	53
est estrogens-methyltest ..	61
est estrogens-methyltest ds .....	61
est estrogens-methyltest hs .....	61
estarrylla.....	61
estazolam .....	33
ESTRACE.....	61
estradiol.....	61
estradiol valerate.....	61
estradiol-norethindrone acet .....	62
estratest f.s.....	62
ESTRATEST H.S.....	62
ESTRING .....	62
ESTROGEL.....	62
eszopiclone.....	82
ethacrynic acid.....	35
ethambutol hcl .....	25
ethosuximide.....	19
ethyl chloride.....	14
ethynodiol diac-eth estradiol .....	62
etodolac.....	11
etodolac er.....	11
etonogestrel-ethinyl estradiol .....	62
etoposide.....	25
etravirine.....	31
EUCRISA .....	44
EULEXIN.....	25
euthyrox.....	65
EVAMIST.....	62
EVEKEO.....	39
everolimus .....	25, 66
EVISTA .....	60
EVOTAZ.....	31
EVOXAC .....	41
EVRYSDI.....	56
EXELDERM.....	23
EXELON.....	20
exemestane .....	25
EXENATIDE .....	47
EXFORGE .....	35
EXFORGE HCT .....	35
EXJADE .....	52
exoderm .....	23
EYSUVIS.....	74
EZALLOR SPRINKLE .....	35
ezetimibe .....	35
ezetimibe-simvastatin .....	35
F	
FABHALTA .....	33
FABIOR.....	44
falmina.....	62
famciclovir.....	31
farmotidine .....	53
FANAPT .....	29
FANAPT TITRATION PACK .....	29
FARESTON .....	25
FARXIGA.....	47
FASENRA PEN.....	79
febuxostat .....	24
feirza 1.5/30.....	62
feirza 1/20.....	62
felbamate.....	19
FELBATOL .....	19
felodipine er .....	35
FEM PH.....	56
FEMARA .....	25
FEMCAP .....	71
FEMLYV .....	62
FEMRING .....	62
fenofibrate .....	36
fenofibrate micronized .....	35
fenofibric acid.....	36
fenoprofen calcium .....	11
FENOPRON .....	11
FENSOLVI (6 MONTH) .....	59
fentanyl.....	12
FERRIC CITRATE .....	56
FERRIPROX .....	52
FERRIPROX TWICE-A-DAY .....	52
fesoterodine fumarate er .....	56
FETZIMA .....	21
FETZIMA TITRATION .....	21
FIASP .....	50
FIASP FLEXTOUCH .....	50
FIASP PENFILL .....	50
FIASP PUMPCART .....	50
FILSPARI .....	56
FINACEA .....	44
finasteride .....	57
fingolimod hcl .....	40
FINTEPLA .....	19
finzala.....	62
FIORICET .....	12
FIORICET/CODEINE .....	12
FIRAZYR .....	66
FIRDAPSE .....	71
FIRST-LANSOPRAZOLE	53
FIRST-MOUTHWASH BLM .....	41
FIRST-OMEPRAZOLE .....	53
FIRST-PROGESTERONE VGS .....	62
FIRVANQ .....	17
FLAREX .....	74

flavoxate hcl..... 56  
 flecainide acetate ..... 36  
 FLECTOR..... 11  
 FLEQSUUVY..... 81  
 FLEXICHAMBER ..... 71  
 FLEXICHAMBER ADULT  
     MASK/SMALL ..... 72  
 FLEXICHAMBER CHILD  
     MASK/LARGE..... 72  
 FLEXICHAMBER CHILD  
     MASK/SMALL ..... 72  
 FLOLIPID..... 36  
 FLUAD..... 68  
 FLUARIX ..... 68  
 FLUBLOK ..... 68  
 FLUCELVAX..... 68  
 fluconazole ..... 23  
 flucytosine..... 23  
 fludrocortisone acetate ... 58  
 FLULALVAL..... 68  
 FLUMIST ..... 68  
 flunisolide..... 77  
 fluocinolone acetonide... 44,  
     77  
 fluocinolone acetonide body  
     ..... 44  
 fluocinolone acetonide scalp  
     ..... 44  
 fluocinonide..... 44  
 fluocinonide emulsified base  
     ..... 44  
 fluorometholone ..... 74  
 fluorouracil ..... 44  
 fluoxetine hcl..... 21  
 fluoxetine hcl (pmdd).... 21  
 fluphenazine decanoate.. 29  
 fluphenazine hcl ..... 29  
 flurandrenolide ..... 44  
 flurazepam hcl..... 82  
 flurbiprofen..... 11  
 flurbiprofen sodium..... 74  
 FLUTICASONE EUROATE-  
     VILANEROL..... 79  
 fluticasone propionate ... 44  
 FLUTICASONE  
     PROPIONATE DISKUS  
     ..... 79  
 FLUTICASONE  
     PROPIONATE HFA.... 79  
 fluticasone-salmeterol.... 79  
 FLUTICASONE-  
     SALMETEROL ..... 79  
 fluvastatin sodium ..... 36  
 fluvastatin sodium er..... 36  
 fluvoxamine maleate..... 21

fluvoxamine maleate er ...21  
 FLUZONE.....68  
 FLUZONE HIGH-DOSE...68  
 FML FORTE .....74  
 FML LIQUIFILM .....74  
 FOCALIN.....39  
 FOCALIN XR .....39  
 folic acid .....52  
 FOLVITE-D .....52  
 fondaparinux sodium.....18  
 FORFIVO XL .....21  
 formoterol fumarate.....79  
 FORTEO .....70  
 FOSAMAX.....70  
 FOSAMAX PLUS D....70  
 fosamprenavir calcium....31  
 fosfomycin tromethamine.17  
 fosinopril sodium .....36  
 fosinopril sodium-hctz....36  
 FOSRENOL .....56  
 FOTIVDA.....25  
 FRAGMIN.....18  
 FREESTYLE TEST .....49  
 FROVA.....24  
 frovatriptan succinate ....24  
 FRUZAQLA .....26  
 ft naloxone hcl.....15  
 ft nicotine .....15  
 ft nicotine mini.....15  
 FULPHILA .....33  
 furosemide.....36  
 FUROSEMIDE .....36  
 FUZEON.....31  
 fyavolv .....62  
 FYCOMPA.....19  
 FYLNETRA.....33  
**G**  
 gabapentin.....19  
 gabapentin (once-daily)...41  
 GABARONE .....19  
 GALAFOLD .....56  
 galantamine hydrobromide  
     .....20  
 galantamine hydrobromide  
     er.....20  
 gallifrey .....62  
 GARDASIL 9.....68  
 GASTROCROM.....54  
 gatifloxacin.....74  
 GATTEX.....54  
 gavilyte-c .....54  
 gavilyte-g.....54  
 gavilyte-n with flavor pack54  
 GAVRETO.....26  
 GEBAUERS PAIN EASE.14

GEBAUERS SPRAY AND  
     STRETCH.....14  
 gefitinib.....26  
 GELFILM .....76  
 gemfibrozil .....36  
 gemmily.....62  
 GEMTESA .....56  
 generlac.....54  
 gengraf.....66  
 GENOTROPIN .....59  
 GENOTROPIN MINIQUICK  
     .....59  
 gentamicin sulfate ....17, 74  
 GENTEEL LANCING KIT  
     (BLUE).....49  
 GENVOYA.....31  
 GEODON .....29  
 GILENYA.....40  
 GILOTrif .....26  
 GIMOTI .....22  
 glatiramer acetate .....40  
 glatopa .....40  
 GLEEVEC .....26  
 GLEOSTINE .....26  
 glimepiride .....47  
 glipizide er .....47  
 glipizide ir .....47  
 glipizide-metformin hcl....47  
 GLOPERBA.....24  
 glucagon emergency kit...50  
 GLUCAGON EMERGENCY  
     KIT.....50  
 GLUCAGON HCL  
     (DIAGNOSTIC).....72  
 GLUCOSE CONTROL  
     SOLUTIONS .....49  
 GLUCOTROL XL .....47  
 glyburide.....47  
 glyburide micronized .....47  
 glyburide-metformin.....47  
 GLYCATE .....54  
 glycyrrolate .....54  
 GLYCOPYRROLATE .....54  
 glydo .....14  
 GLYXAMBI .....47  
 GOCOVRI .....28  
 GOJJI CONTROL .....49  
 GOJJI LANCING  
     DEVICE/CLEAR CAP ..49  
 GOLYTEL.....54  
 GOMEKLI .....26  
 GOODSENSE ALCOHOL  
     SWABS.....72  
 goodsense nicotine .....15  
 GRALISE.....41

granisetron hcl .....	22
GRANIX.....	33
GRASTEK .....	72
griseofulvin microsize .....	23
griseofulvin ultramicrosize	23
guaiifenesin-codeine .....	77
guanfacine hcl.....	36
guanfacine hcl er.....	39
GVOKE HYPOOPEN 1-PACK .....	50
GVOKE HYPOOPEN 2-PACK .....	50
GVOKE KIT .....	50
GVOKE PFS .....	50
GYNAZOLE-1 .....	23
<b>H</b>	
habitrol.....	15
HADLIMA.....	66
HADLIMA PUSHTOUCH	66
HAEGARDA.....	66
hailey 1.5/30 .....	62
hailey 24 fe .....	62
hailey fe 1.5/30.....	62
hailey fe 1/20 .....	62
halcinonide .....	44
HALCINONIDE .....	44
HALCION.....	33
HALDOL DECANOATE ..	29
halobetasol propionate ..	44
haloette.....	62
HALOG.....	44
haloperidol .....	29
haloperidol decanoate ..	29
haloperidol lactate .....	29
HARVONI .....	31
HAVRIX.....	68
heather .....	62
HELDAC THERAPY .....	54
HEMADY .....	58
HEMANGEOL.....	36
HEMICLOR.....	36
HEMLIBRA .....	33
hemmorex-hc.....	69
HEMMOREX-HC.....	69
HEPAGAM B .....	66
heparin sodium (porcine) .....	18
heparin sodium (porcine) pf .....	18
HEPLISAV-B.....	68
her style.....	62
HETLIOZ .....	82
HETLIOZ LQ.....	82
HIBERIX.....	68
HIDEX 6-DAY .....	58
HIPREX.....	17

HIZENTRA.....	66
homatropaire.....	76
HORIZANT .....	41
HULIO (2 PEN) .....	66
HULIO (2 SYRINGE).....	66
HUMALOG .....	50
HUMALOG KWIKPEN.....	50
HUMALOG MIX 50/50 KWIKPEN .....	50
HUMALOG MIX 75/25 KWIKPEN .....	50
HUMALOG MIX 75/25 VIAL .....	50
HUMALOG TEMPO PEN 50 .....	50
HUMALOG U-100 JUNIOR KWIKPEN .....	51
HUMATIN .....	17
HUMATROPE .....	59
HUMIRA (1 PEN) .....	66
HUMIRA (2 PEN) .....	66
HUMIRA (2 SYRINGE).....	66
HUMIRA-CD/UC/HS STARTER .....	66
HUMIRA- PSORIASIS/UVEIT STARTER .....	66
HUMULIN 70/30 KWIKPEN .....	51
HUMULIN 70/30 VIAL .....	51
HUMULIN N KWIKPEN .....	51
HUMULIN N VIAL .....	51
HUMULIN R U-500 KWIKPEN .....	51
HUMULIN R U-500 VIAL .....	51
HUMULIN R VIAL .....	51
HYCAMTIN .....	26
HYCODAN.....	77
hydralazine hcl .....	36
HYDREA .....	26
HYDRO 40.....	44
hydrochlorothiazide .....	36
hydrocod poli-chlorphe poli er .....	77
hydrocodone bitartrate er.12 .....	12
hydrocodone bit-homatrop mbr .....	77
hydrocodone- acetaminophen.....	12, 13
hydrocodone-ibuprofen....	13
hydrocortisone ....	44, 58, 69
HYDROCORTISONE .....	44
hydrocortisone (perianal).69 .....	69
hydrocortisone ace- pramoxine .....	44, 69
hydrocortisone acetate ....	69
hydrocortisone butyrate .....	44
hydrocortisone sod suc (pf) .....	58
hydrocortisone valerate .....	44
hydrocortisone-acetic acid .....	77
hydromet .....	77
hydromorphone hcl .....	13
hydromorphone hcl er.....	13
hydroxychloroquine sulfate .....	28
hydroxyurea.....	26
hydroxyzine hcl .....	33
hydroxyzine pamoate .....	33
HYFTOR.....	44
HYMPAVZI .....	33
hyoscyamine sulfate .....	54
hyoscyamine sulfate er....	54
hyosyne .....	54
HYPERHEP B.....	66
HYPERRAB .....	66
HYPERSAL .....	77
HYPERTET .....	66
HYQVIA.....	66
HYRIMOZ .....	66
HYRIMOZ-CROHNS/UC STARTER .....	66
HYRIMOZ-PED<40KG CROHN STARTER.....	66
HYRIMOZ-PED>/=40KG CROHN START .....	66
HYRIMOZ-PLAQ PSOR/UVEIT START ..	67
HYRIMOZ-PLAQUE PSORIASIS START .....	67
HYSINGLA ER.....	13
HYZAAR.....	36
<b>I</b>	
ibandronate sodium .....	70
IBRANCE .....	26
IBSRELA .....	55
ibuprofen .....	11
ibuprofen-famotidine .....	11
icatibant acetate .....	67
iclevia .....	62
ICLUSIG .....	26
icosapent ethyl .....	36
IDHIFA .....	26
IHEALTH CONTROL SOLUTION .....	49
IHEALTH LANCING DEVICE .....	49
ILEVRO .....	74
imatinib mesylate .....	26
IMBRUVICA.....	26

IMCIVREE .....	41	INSULIN GLARGINE .....	72
imipramine hcl.....	21	SOLOSTAR .....	51
imipramine pamoate.....	21	INSULIN GLARGINE-YFGN .....	51
imiquimod .....	44	INSULIN LISPRO .....	51
imiquimod pump.....	44	INSULIN LISPRO (1 UNIT DIAL) .....	51
IMITREX.....	24	INSULIN LISPRO JUNIOR .....	51
IMITREX STATDOSE REFILL .....	24	KWIKPEN .....	51
IMITREX STATDOSE SYSTEM .....	24	INSULIN LISPRO PROT & LISPRO .....	51
IMKELDI .....	26	INSULIN PEN NEEDLES .....	72
IMOGRAM RABIES-HT ....	67	INSULIN SYRINGES .....	51
IMPAVIDO .....	28	INTELENCE .....	31
IMPOYZ.....	44	INTRAROSA .....	56
IMURAN .....	67	introvale .....	62
IMVEXXY MAINTENANCE PACK.....	62	INTUNIV .....	39
IMVEXXY STARTER PACK .....	62	INVEGA .....	29
INBRIJA.....	28	INVEGA HAFYERA .....	29
incassia .....	62	INVEGA SUSTENNA .....	30
INCONTROL ULTICARE PEN NEEDLES .....	72	INVEGA TRINZA .....	30
INCRELEX.....	59	INVELTYS .....	74
INCRUSE ELLIPTA.....	79	INVOKAMET .....	47
indapamide .....	36	INVOKAMET XR .....	47
INDERAL LA.....	36	INVOKANA .....	47
INDERAL XL.....	36	INZIRQO .....	36
INDOCIN .....	11	iodine strong .....	52
indomethacin .....	11	IOPIDINE .....	75
indomethacin er.....	11	IPOL .....	68
INFANRIX.....	68	ipratropium bromide .....	77, 79
INFASURF.....	77	ipratropium-albuterol .....	79
INGREZZA.....	41	IQIRVO .....	55
INLYTA.....	26	irbesartan .....	36
INNOPRAN XL.....	36	irbesartan- hydrochlorothiazide .....	36
INPEFA .....	36	IRESSA .....	26
INQOVI.....	26	ISENTRESS .....	31
INREBIC.....	26	ISENTRESS HD .....	31
INSPRA.....	36	isibloom .....	62
INSULIN ASP PROT & ASP FLEXPEN.....	51	isoniazid .....	25
INSULIN ASPART .....	51	isoproterenol hcl.....	79
INSULIN ASPART FLEXPEN.....	51	ISORDIL TITRADOSE .....	36
INSULIN ASPART PENFILL .....	51	isosorb dinitrate-hydralazine .....	36
INSULIN ASPART PROT & ASPART .....	51	isosorbide dinitrate .....	36
INSULIN DEGLUDEC .....	51	isosorbide mononitrate .....	36
INSULIN DEGLUDEC FLEXTOUCH .....	51	isosorbide mononitrate er .....	36
INSULIN GLARGINE MAX SOLOSTAR.....	51	isotretinoin .....	44
		isradipine .....	36
		ISTALOL .....	75
		ISTURISA .....	59
		ITOVEBI .....	26
		itraconazole .....	23
		ivabradine hcl.....	36
		ivermectin .....	28, 44
		J	
		JADENU .....	52
		JADENU SPRINKLE .....	52
		jaimiess .....	62
		JAKAFI .....	26
		JALYN .....	57
		jantoven .....	18
		JANUMET .....	47
		JANUMET XR .....	47
		JANUVIA .....	47
		JARDIANC .....	47
		jasmiel .....	62
		JATENZO .....	59
		JAVYGTOR .....	56
		JAYPIRCA .....	26
		jencycla .....	62
		JENTADUETO .....	47
		JENTADUETO XR .....	47
		jinteli .....	62
		JOENJA .....	67
		jolessa .....	62
		JORNAY PM .....	39
		JOURNAVX .....	13
		joyeaux .....	62
		JUBLIA .....	23
		juleber .....	62
		JULUCA .....	31
		junel 1.5/30 .....	62
		junel 1/20 .....	62
		junel fe 1.5/30 .....	62
		junel fe 1/20 .....	62
		junel fe 24 .....	62
		JUXTAPID .....	36
		JYLAMVO .....	67
		JYNARQUE .....	52
		K	
		kaitlib fe .....	62
		KALETRA .....	31
		kalliga .....	62
		KALYDECO .....	80
		KAPSPARGO SPRINKLE .....	36
		KARBINAL ER .....	77
		kariva .....	62
		KATERZIA .....	36
		KEDRAB .....	67
		kelnor 1/35 .....	62
		kelnor 1/50 .....	62
		KENALOG-10 .....	58
		KENALOG-40 .....	58
		KEPPRA .....	19
		KEPPRA XR .....	19
		KERALYT .....	44
		KERENDIA .....	72

KESIMPTA.....	40
ketoconazole.....	23
ketodan.....	23
ketoprofen.....	11
ketoprofen er.....	11
ketorolac tromethamine .	11,
74	
KETOROLAC	
TROMETHAMINE .....	11
KEVEYIS .....	75
KEVZARA.....	67
KHINDIVI .....	58
KINERET.....	67
KINRIX .....	68
KIONEX.....	52
KIPROFEN .....	11
KISQALI (200 MG DOSE).....	26
KISQALI (400 MG DOSE).....	26
KISQALI (600 MG DOSE).....	26
KITABIS PAK (W/ NEBULIZER).....	80
KLARITY-A .....	74
KLARITY-C DROPS.....	76
KLARITY-L.....	74
KLARON.....	44
klayesta .....	23
KLISYRI (250 MG) .....	44
KLISYRI (350 MG) .....	44
KLONOPIN .....	33
klor-con.....	52
klor-con 10.....	52
klor-con m10.....	52
klor-con m15.....	52
klor-con m20.....	52
klor-con/ef.....	52
KLOXXADO .....	15
KONVOMEП .....	53
KORLYM .....	60
KOSELUGO.....	26
kourzeq.....	41
K-PHOS .....	52
K-PHOS NO 2.....	52
K-PHOS-NEUTRAL.....	52
K-PRIME.....	52
KRAZATI .....	26
KRINTAFEL.....	28
KRISTALOSE .....	55
kurvelo.....	62
KUVAN .....	56
KYZATREX.....	59
<b>L</b>	
labetalol hcl.....	36
lacosamide .....	19
lactic acid e.....	44
lactulose .....	55

lactulose encephalopathy .....	55
LAGEVRIO .....	31
LAMICTAL .....	19
LAMICTAL ODT .....	19
LAMICTAL STARTER .....	19
LAMICTAL XR .....	19
lamivudine .....	31
lamivudine-zidovudine .....	31
lamotrigine .....	19
lamotrigine er .....	19
lamotrigine starter kit-blue .....	19
lamotrigine starter kit-green .....	19
lamotrigine starter kit-orange .....	19
LAMPIT .....	28
LANCETS .....	49
LANCETS 28G THIN.....	49
LANCETS SUPER THIN .....	49
LANOXIN.....	36
LANOXIN PEDIATRIC.....	36
lanreotide acetate.....	59
lansoprazole .....	54
lanthanum carbonate.....	56
LANTUS SOLOSTAR .....	51
LANTUS U-100 VIAL .....	51
lapatinib ditosylate.....	26
larin 1.5/30.....	62
larin 1/20.....	62
larin 24 fe.....	62
larin fe 1.5/30 .....	62
larin fe 1/20 .....	62
LASIX.....	36
latanoprost .....	75
LATANOPROST-TIMOLOL MALEATE .....	75
LATUDA .....	30
layolis fe .....	62
LAZCLUZE .....	26
LDO PLUS.....	14
LEDIPASVIR- SOFOSBUVIR.....	31
leena .....	62
leflunomide .....	67
lenalidomide .....	26
LENVIMA.....	26
LESCOL XL .....	36
lessina.....	62
LETAIRIS .....	80
letrozole.....	26
leucovorin calcium.....	26
LEUKERAN .....	26
LEUKINE .....	33
leuprolide acetate.....	60
levalbuterol hcl .....	79

LEVALBUTEROL HFA .....	79
<b>LEVAMLODIPINE</b>	
MALEATE .....	36
LEVATIO .....	14
LEVIBID .....	55
levetiracetam .....	19
LEVETIRACETAM .....	19
levetiracetam er .....	19
levobunolol hcl .....	75
levocarnitine .....	52
levocarnitine sf .....	52
levocetirizine dihydrochloride .....	77
levofloxacin.....	17, 74
levonest .....	62
levonorgest-eth estrad 91-day .....	62
levonorgest-eth estradiol-iron .....	62
levonorgestrel .....	62
levonorgestrel-ethinyl estrad .....	62
levonorg-eth estrad triphasic .....	63
levora 0.15/30 (28) .....	63
levorphanol tartrate .....	13
levo-t .....	65
levothyroxine sodium .....	65
<b>LEVOTHYROXINE</b>	
SODIUM .....	65
levoxyl .....	65
LEVSIN .....	55
LEVSIN/SL .....	55
LEVULAN KERASTICK .....	44
LEXAPRO .....	21
LEXETTE .....	44
l-glutamine .....	72
LIALDA .....	69
LIBRAX .....	55
LICART .....	11
LIDO BDK .....	14
lidocaine .....	14
lidocaine hcl .....	14, 41
LIDOCAINE HCL .....	14
lidocaine hcl (pf) .....	14
lidocaine hcl urethral/mucosal .....	14
lidocaine viscous hcl .....	41
lidocaine-epinephrine .....	14
LIDOCAINE-EPINEPHRINE .....	14
lidocaine-hydrocort (perianal) .....	69
lidocaine-hydrocortisone ace .....	69

LIDOCAINE-HYDROCORTISONE	55
ACE	44, 69
lidocaine-prilocaine	14
LIDOCAN	14
LIDOCORT	69
LIDODERM	15
LIDOMAR	15
LIDOPIN	15
LIDOREX	15
LIDORX	15
LIDO-SORB	15
LIDOTHOL	15
LIDOTRAL	15
LIDOTRAN	15
LIKMEZ	17
LILETTA (52 MG)	63
LINCOCIN	17
lincomycin hcl	17
linezolid	17
LINZESS	55
liothyronine sodium	65
LIPITOR	36
LIPOFEN	36
liraglutide	47
lisdexamphetamine dimesylate	39
lisinopril	36
lisinopril-hydrochlorothiazide	36
LITFULO	44
lithium	33
lithium carbonate	33
lithium carbonate er	33
LITHOBID	33
LITHOSTAT	56
LIVALO	36
LIVDELZI	55
LIVIXIL PAK	15
LIVMARLI	72
LIVTENCITY	31
LO LOESTRIN FE	63
LODINE	11
LODOCO	36
LODOSYN	28
LOESTRIN 1.5/30 (21)	63
LOESTRIN 1/20 (21)	63
LOESTRIN FE 1.5/30	63
LOESTRIN FE 1/20	63
LOFENA	11
lofexidine hcl	15
lojaimiess	63
LOKELMA	52
LOMOTIL	55
LONSURF	26
loperamide hcl	55
LOPID	36
lopinavir-ritonavir	31
LOPRESSOR	36
lorazepam	33
lorazepam intensol	33
LORBRENA	26
LOREEV XR	33
loryna	63
losartan potassium	36
losartan potassium-hctz	36
LOTEMAX	74
LOTEMAX SM	74
LOTENSIN	36
LOTENSIN HCT	36
loteprednol etabonate	74
LOTREL	36
LOTRONEX	55
lovastatin	36
LOVAZA	36
LOVENOX	18
low-ogestrel	63
loxapine succinate	30
lo-zumandimine	63
lubiprostone	55
LUCEMYRA	15
LULICONAZOLE	23
LUMAKRAS	26
LUMIGAN	75
LUMRYZ	82
LUMRYZ STARTER PACK	82
LUNESTA	82
LUPKYNIS	67
LUPRON DEPOT (1-MONTH)	60
LUPRON DEPOT (3-MONTH)	60
LUPRON DEPOT (4-MONTH)	60
INTRAMUSCULAR KIT 30MG	60
LUPRON DEPOT (6-MONTH)	60
INTRAMUSCULAR KIT 45MG	60
LUPRON DEPOT-PED (1-MONTH)	60
LUPRON DEPOT-PED (3-MONTH)	60
Iurasidone hcl	30
LURBIPR	11
lutera	63
LUZU	23
LYBALVI	30
LYDEXA	15
lyeq	63
lyllana	63
LYNPARZA	26
LYRICA	41
LYRICA CR	41
LYSODREN	26
LYTGOBI (12 MG DAILY DOSE)	26
LYTGOBI (16 MG DAILY DOSE)	26
LYTGOBI (20 MG DAILY DOSE)	26
LYUMJEV KWIKPEN	51
LYUMJEV TEMPO PEN	51
LYUMJEV VIAL	51
lyza	63
<b>M</b>	
MACROBID	17
MACRODANTIN	17
malathion	28
maraviroc	31
MARINOL	22
marlissa	63
MARPLAN	21
MATULANE	26
matzim la	36
MAVENCLAD	40
MAVYRET	31
MAXALT	24
MAXALT-MLT	24
MAXIDEX	74
MAXITROL	74
maxi-tuss ac	77
MAYZENT	40
MAYZENT STARTER PACK	40
MB CAPS	56
me/naphos/mb/hyo1	56
meclizine hcl	22
meclofenamate sodium	11
MEDROL	58
medroxyprogesterone acetate	63
mefenamic acid	11
megestrol acetate	63
MEKINIST	26
MEKTOVI	26
meloxicam	11, 12
MELOXICAM	12
memantine hcl	20
memantine hcl er	20
memantine hcl-donepezil hcl	20
MENEST	63

MENOSTAR .....	63
MENQUADFI .....	68
MENVEO .....	68
meperidine hcl.....	13
meprobamate.....	33
MEPRON.....	28
mercaptopurine .....	26
merzee .....	63
mesalamine .....	69
mesalamine er oral capsule 0.375 gm.....	69
mesalamine-cleanser .....	70
mesna .....	26
MESNEX .....	26
MESTINON.....	25
METADATE CD .....	39
metaxalone .....	81
metformin hcl er .....	47
metformin hcl er (mod)....	47
metformin hcl er (osm)....	47
metformin hcl ir .....	47, 48
methadone hcl .....	13
methadone hcl intensol... <td>13</td>	13
methadose.....	13
METHADOSE .....	13
METHADOSE SUGAR- FREE .....	13
methamphetamine hcl ....	39
methazolamide.....	75
methenamine hippurate..	17
methenamine mandelate	17
methergine.....	72
methimazole .....	65
METHITEST .....	59
methocarbamol .....	81
methotrexate sodium .....	67
methotrexate sodium (pf)	67
methoxsalen rapid.....	44
methscopolamine bromide .....	55
methsuximide.....	19
methyldopa .....	37
methylergonovine maleate .....	72
METHYLIN.....	39
methylphenidate.....	39
methylphenidate hcl .....	40
methylphenidate hcl er... <td>40</td>	40
methylphenidate hcl er (cd) .....	39
methylphenidate hcl er (la) .....	39
methylphenidate hcl er (osm) .....	39
METHYLPHENIDATE HCL ER (OSM) .....	39
methylphenidate hcl er (xr) .....	40
methylprednisolone .....	58
METHYLPREDNISOLONE ACE-LIDO .....	58
METHYLPREDNISOLONE ACETATE .....	58
methylprednisolone sodium succ.....	58
methyltestosterone.....	59
metoclopramide hcl .....	22
metolazone .....	37
metoprolol succinate er ...	37
metoprolol tartrate.....	37
metoprolol- hydrochlorothiazide .....	37
METROCREAM .....	44
METROGEL.....	45
METROLOTION.....	45
metronidazole .....	17, 45
metyrosine .....	37
mexiletine hcl .....	37
MIACALCIN .....	70
mibelas 24 fe .....	63
MICARDIS .....	37
MICARDIS HCT .....	37
MICLARA LQ .....	77
miconazole 3.....	23
MICONAZOLE-ZINC OXIDE-PETROLAT .....	23
MICROCHAMBER .....	72
microgestin 1.5/30.....	63
microgestin 1/20.....	63
microgestin fe 1.5/30.....	63
microgestin fe 1/20.....	63
MICROLET NEXT LANCING DEVICE .....	49
midazolam hcl.....	33
MIDAZOLAM HCL.....	33
midazolam hcl (pf).....	33
midodrine hcl .....	37
MIEBO.....	76
MIFEPREX .....	60
mifepristone .....	60
MIGERGOT .....	24
miglitol.....	48
miglustat.....	56
mili .....	63
mimvey .....	63
MINIVELLE .....	63
minocycline hcl.....	17
minocycline hcl er.....	17
minoxidil .....	37
minzoya.....	63
MIPLYFFA.....	72
mirabegron er .....	56
MIRCERA.....	33
MIRENA (52 MG).....	63
mirtazapine .....	21
MIRVASO.....	45
misoprostol .....	54
MITIGARE .....	24
MIUDELLA INTRAUTERINE COPPER.....	63
M-M-R II .....	68
MOBILE LANCETS 30G..	49
modafinil .....	82
MODERNA COVID-19 VAC 6M-11Y .....	68
moexipril hcl.....	37
molindone hcl.....	30
mometasone furoate .	45, 77
monodoxine nl .....	17
mono-linyah .....	63
montelukast sodium .....	79
morphine sulfate .....	13
morphine sulfate (concentrate).....	13
morphine sulfate er .....	13
morphine sulfate er beads .....	13
MOTEGRITY .....	55
MOTOFEN.....	55
MOTPOLY XR .....	19
MOUNJARO .....	48
MOVANTIK.....	55
MOVIPREP .....	55
moxifloxacin hcl.....	17, 74
moxifloxacin hcl (2x day)	.74
MRESVIA .....	68
MS CONTIN.....	13
MULPLETA .....	33
MULTAQ .....	37
mupirocin .....	17
mupirocin cream .....	17
my choice .....	63
my way .....	63
MYALEPT .....	56
MYCAPSSA .....	60
mycophenolate mofetil....	67
mycophenolate sodium....	67
mycophenolic acid.....	67
MYDAYIS .....	40
MYFEMBREE .....	63
MYFORTIC .....	67
MYHIBBIN .....	67
MYLERAN .....	26

MYRBETRIQ .....	56
mysoline .....	19
MYTESI.....	55
<b>N</b>	
na sulfate-k sulfate-mg sulf .....	55
NABI-HB.....	67
nabumetone.....	12
nadol.....	37
naftifine hcl .....	23
NAFTIN .....	23
NALOCET.....	13
naloxone hcl.....	15
naltrexone hcl.....	15
NAMENDA TITRATION PAK .....	20
NAMZARIC.....	20
NAPRELAN .....	12
NAPROSYN.....	12
naproxen.....	12
naproxen dr.....	12
naproxen sodium.....	12
naproxen sodium er.....	12
naproxen-esomeprazole mg .....	12
naratriptan hcl .....	24
NARCAN .....	15
NARDIL .....	21
NATACYN .....	74
NATAZIA .....	63
nateglinide .....	48
NATESTO.....	59
NATROBA .....	28
NAYZILAM.....	19
nebivolol hcl.....	37
NEBUPENT .....	28
nebusal.....	77
NEBUSAL.....	77
necon 0.5/35 (28).....	63
nefazodone hcl.....	21
NEFFY.....	79
NEMLUVIO.....	45
neomycin sulfate .....	17
neomycin-bacitracin zn- polymyx.....	76
neomycin-polymyxin b gu 17	
neomycin-polymyxin- dexameth.....	74
neomycin-polymyxin- gramicidin.....	76
neomycin-polymyxin-hc ..	74,
77	
NEO-POLYCIN .....	76
neo-polycin hc.....	76
NEORAL.....	67

NEO-SYNALAR .....	45
NERLYNX.....	26
neuac .....	45
NEULASTA.....	33
NEULASTA ONPRO .....	33
NEUPOGEN .....	33
NEUPRO.....	28
NEURONTIN .....	19
NEUROZYL.....	15
NEVANAC .....	74
nevirapine .....	31
nevirapine er.....	31
new day .....	63
NEXAVAR .....	26
NEXICLON XR.....	37
NEXIUM .....	54
NEXLETOL.....	37
NEXLIZET .....	37
NEXTSTELLIS .....	63
NGENLA.....	60
niacin (antihyperlipidemic) .....	37
niacin er (antihyperlipidemic) .....	37
niacor .....	37
nicardipine hcl.....	37
NICORETTE .....	15
NICORETTE MINI.....	15
nicotine .....	16
nicotine mini.....	15
nicotine polacrilex .....	15
nicotine polacrilex mini .....	15
nicotine step 1.....	15
nicotine step 2.....	16
nicotine step 3.....	16
nifedipine .....	37
nifedipine er .....	37
nifedipine er osmotic release.....	37
nikki.....	63
NILANDRON.....	26
nilotinib hcl.....	26
nilutamide .....	26
nimodipine .....	37
NIMODIPINE .....	37
NINLARO .....	26
nisoldipine er.....	37
nitazoxanide .....	28
nitisinone .....	56
NITRO-BID .....	37
NITRO-DUR.....	37
nitrofurantoin.....	17
NITROFURANTOIN .....	17
nitrofurantoin macrocrystal .....	17

nitrofurantoin monohydrate macrocrystals .....	17
nitroglycerin .....	37
NITROLINGUAL .....	37
NITROSTAT .....	37
nitro-time .....	37
NITYR .....	56
NIVA THYROID .....	65
NIVESTYM .....	33
nizatidine .....	54
nora-be .....	63
NORDITROPIN FLEXPRO .....	60
norelgestromin-eth estradiol .....	63
norethin ace-eth estrad-fe63	
norethindrone .....	63
norethindrone acetate.....	63
norethindrone acet-ethinyl est .....	63
norethindrone-eth estradiol .....	63
norgestimate-eth estradiol .....	63
norgestimate-ethinyl estradiol triphasic .....	63
NORITATE .....	45
NORLIQVA .....	37
norlyroc .....	63
NORPACE .....	37
NORPACE CR .....	37
NORPRAMIN .....	21
NORTHERA.....	37
nortrel 0.5/35 (28).....	63
nortrel 1/35 (21) .....	63
nortrel 1/35 (28) .....	63
nortrel 7/7/7 .....	63
nortriptyline hcl.....	21
NORVASC .....	37
NORVIR .....	31
NOURIANZ .....	29
NOVAVAX COVID-19 VACCINE .....	68
NOVOFINE PEN NEEDLE .....	72
NOVOFINE PLUS PEN NEEDLE .....	72
NOVOLIN 70/30 FLEXPEN .....	51
NOVOLIN 70/30 FLEXPEN RELION .....	51
NOVOLIN 70/30 RELION	51
NOVOLIN 70/30 VIAL.....	51

NOVOLIN N FLEXPEN...	51	nystatin.....	23	OMNIPOD POD PALS ....	72																																																																														
NOVOLIN N FLEXPEN		nystatin-triamcinolone.....	23	OMNITROPE .....	60																																																																														
RELION .....	51	nystop.....	23	OMVOH.....	67																																																																														
NOVOLIN N RELION .....	51	NYVEPRIA .....	33	OMVOH (300 MG DOSE)67																																																																															
NOVOLIN N VIAL.....	51	<b>O</b>		ondansetron hcl .....	22																																																																														
NOVOLIN R FLEXPEN...	51	OCALIVA.....	56	ondansetron hcl +fid.....	22																																																																														
NOVOLIN R FLEXPEN		ocella.....	64	ondansetron odt.....	22																																																																														
RELION .....	51	octreotide acetate.....	60	ONETOUCH DELICA PLUS																																																																															
NOVOLIN R RELION .....	51	OCUFLOX.....	74	LANCING.....	49																																																																														
NOVOLIN R VIAL.....	51	ODACTRA.....	72	ONETOUCH DELICA																																																																															
NOVOLOG 70/30		ODEFSEY .....	31	SAFETY LANCING.....	49																																																																														
FLEXPEN RELION.....	51	ODOMZO .....	26	ONETOUCH ULTRA 2 KIT																																																																															
NOVOLOG FLEXPEN....	51	OFEV .....	79	W/DEVICE .....	49																																																																														
NOVOLOG FLEXPEN		ofloxacin.....	17, 74, 77	ONETOUCH ULTRA BLUE																																																																															
RELION .....	52	OGSIVEO.....	27	TEST .....	49																																																																														
NOVOLOG MIX 70/30		OHTUVAYRE .....	79	ONETOUCH ULTRA TEST																																																																															
FLEXPEN.....	52	OJEMDA .....	27	STRIPS.....	49																																																																														
NOVOLOG MIX 70/30		OJJAARA .....	27	ONETOUCH VERIO FLEX																																																																															
RELION .....	52	olanzapine .....	30	SYSTEM .....	49																																																																														
NOVOLOG MIX 70/30 VIAL		olanzapine-fluoxetine hcl .....	21	ONETOUCH VERIO KIT																																																																															
.....	52	olmesartan medoxomil .....	37	W/DEVICE .....	49																																																																														
NOVOLOG PENFILL.....	52	olmesartan medoxomil-hctz		ONETOUCH VERIO																																																																															
NOVOLOG RELION.....	52	.....	37	REFLECT KIT																																																																															
NOVOLOG U-100 VIAL..	52	olmesartanamlodipine-hctz		W/DEVICE .....	49																																																																														
NOXAFILE.....	23	.....	37	ONEXTON.....	45																																																																														
NOZIN NASAL SANITIZER		olopatadine hcl.....	74, 77	ONFI .....	19																																																																														
.....	72	OLPRUVA (2 GM DOSE)56		ONGENTYS.....	29																																																																														
NOZIN NASAL SANITIZER		OLPRUVA (3 GM DOSE)56		ONGLYZA .....	48																																																																														
POPSWAB.....	72	OLPRUVA (4 GM DOSE)56		ONUREG.....	27																																																																														
NP THYROID.....	65	OLPRUVA (5 GM DOSE)56		ONYDA XR.....	40																																																																														
NUBEQA .....	26	OLPRUVA (6 GM DOSE)56		opcicon one-step.....	64																																																																														
NUCALA.....	79	OLPRUVA (6.67 GM		OPFOLDA .....	56																																																																														
NUCORT .....	45	DOSE).....	56	OPILL.....	64																																																																														
NUCYNTA .....	13	OLUMIANT .....	67	OPIPZA .....	30																																																																														
NUCYNTA ER.....	13	OMECLAMOX-PAK.....	55	opium .....	55																																																																														
NUEDEXTA .....	41	omega-3-acid ethyl esters	37	OPSUMIT .....	80																																																																														
nulev.....	55	omeprazole.....	54	OPSYNVI .....	80																																																																														
NUMBRINO .....	15	OMEPRAZOLE+SYRSPEN		OPTICHAMBER DIAMOND																																																																															
NUPLAZID.....	30	D SF ALKA.....	54	.....	72																																																																														
NURTEC.....	24	omeprazole-sodium		OPTICHAMBER																																																																															
NUTROPIN AQ NUSPIN 10		bicarbonate .....	54	DIAMOND-LG MASK...72																																																																															
.....	60	OMNARIS.....	77	NUTROPIN AQ NUSPIN 20		OMNIPOD 5 DEXCOM		OPTICHAMBER		.....	60	INTRO KIT .....	72	DIAMOND-MD MASK..72	NUTROPIN AQ NUSPIN 5		OMNIPOD 5 DEXCOM		.....	60	PODS .....	72	OPTICHAMBER		NUVARING.....	64	OMNIPOD 5 LIBRE INTRO		DIAMOND-SM MASK ..72	NUVESSA .....	17	KIT.....	72	option 2 .....	64	NUVIGIL.....	82	OMNIPOD 5 LIBRE PODS		OPVEE.....	16	NUZYRA.....	17	.....	72	OPZELURA .....	45	nyamyc .....	23	OMNIPOD DASH INTRO		ORACEA .....	45	nylia 1/35 .....	64	KIT.....	72	ORACIT.....	53	nylia 7/7/7 .....	64	OMNIPOD DASH PDM		ORAL CITRATE .....	53	NYMALIZE.....	37	(GEN 4) .....	72	ORALAIR.....	72	NYPOZI .....	33	OMNIPOD DASH PODS	72	ORALAIR ADULT						STARTER PACK.....	72
NUTROPIN AQ NUSPIN 20		OMNIPOD 5 DEXCOM		OPTICHAMBER																																																																															
.....	60	INTRO KIT .....	72	DIAMOND-MD MASK..72																																																																															
NUTROPIN AQ NUSPIN 5		OMNIPOD 5 DEXCOM		.....	60	PODS .....	72	OPTICHAMBER		NUVARING.....	64	OMNIPOD 5 LIBRE INTRO		DIAMOND-SM MASK ..72	NUVESSA .....	17	KIT.....	72	option 2 .....	64	NUVIGIL.....	82	OMNIPOD 5 LIBRE PODS		OPVEE.....	16	NUZYRA.....	17	.....	72	OPZELURA .....	45	nyamyc .....	23	OMNIPOD DASH INTRO		ORACEA .....	45	nylia 1/35 .....	64	KIT.....	72	ORACIT.....	53	nylia 7/7/7 .....	64	OMNIPOD DASH PDM		ORAL CITRATE .....	53	NYMALIZE.....	37	(GEN 4) .....	72	ORALAIR.....	72	NYPOZI .....	33	OMNIPOD DASH PODS	72	ORALAIR ADULT						STARTER PACK.....	72															
.....	60	PODS .....	72	OPTICHAMBER																																																																															
NUVARING.....	64	OMNIPOD 5 LIBRE INTRO		DIAMOND-SM MASK ..72																																																																															
NUVESSA .....	17	KIT.....	72	option 2 .....	64																																																																														
NUVIGIL.....	82	OMNIPOD 5 LIBRE PODS		OPVEE.....	16																																																																														
NUZYRA.....	17	.....	72	OPZELURA .....	45																																																																														
nyamyc .....	23	OMNIPOD DASH INTRO		ORACEA .....	45																																																																														
nylia 1/35 .....	64	KIT.....	72	ORACIT.....	53																																																																														
nylia 7/7/7 .....	64	OMNIPOD DASH PDM		ORAL CITRATE .....	53																																																																														
NYMALIZE.....	37	(GEN 4) .....	72	ORALAIR.....	72																																																																														
NYPOZI .....	33	OMNIPOD DASH PODS	72	ORALAIR ADULT																																																																															
				STARTER PACK.....	72																																																																														

ORALAIR CHILDRENS	
STARTER PACK	72
oralone	41
ORAPRED ODT	58
ORAVIG	23
ORENCIA	67
ORENCIA CLICKJECT	67
ORENITRAM	81
ORENITRAM MONTH 1	81
ORENITRAM MONTH 2	81
ORENITRAM MONTH 3	81
ORFADIN	56
ORGOVYX	27
ORIAHNN	64
ORLISSA	60
ORKAMBI	80
ORLADEYO	67
ORMALVI	75
orphenadrine citrate	81
orphenadrine citrate er	81
orphenadrine-aspirin- caffeine	81
ORPHENESIC FORTE	81
ORSERDU	27
oscimin	55
oseltamivir phosphate	31
OSPHENA	60
OTEZLA	67
OTOVEL	77
OTREXUP	67
OTULFI	67
OVACE PLUS	45
OVACE PLUS WASH	45
OVACE WASH	45
OVIDE	28
oxaprozin	12
OXAPROZIN	12
oxazepam	33
oxcarbazepine	19
oxcarbazepine er	19
OXERVATE	76
oxiconazole nitrate	23
OXISTAT	23
OXTELLAR XR	19
oxybutynin chloride	56
OXYBUTYNIN CHLORIDE	56
oxybutynin chloride er	56
oxycodone hcl	13
OXYCODONE HCL	13
oxycodone-acetaminophen	13
OXYCODONE- ACETAMINOPHEN	13
OXYCONTIN	13

oxymorphone hcl	13
oxymorphone hcl er	13
OXYTROL	56
OZEMPIC	48
OZOBAX DS	81
<b>P</b>	
pacerone	37
PALFORZIA	72
PALFORZIA (1 MG DAILY DOSE)	72
PALFORZIA INITIAL DOSE 1-3YRS	72
PALFORZIA INITIAL DOSE 4-17YRS	72
paliperidone er	30
PAMELOR	21
PANCREAZE	56
PANDA MASK LARGE	72
PANDA MASK MEDIUM	72
PANDA MASK SMALL	72
PANRETIN	27
pantoprazole sodium	54
papaverine hcl	37
<b>PARAGARD</b>	
INTRAUTERINE COPPER	64
<b>PARI VORTEX ADULT</b>	
MASK	72
<b>PARI VORTEX PEDIATRIC</b>	
MASK	72
paricalcitol	70
PARLODEL	29
PARNATE	21
paroxetine hcl	21
paroxetine hcl er	21
paroxetine mesylate	21
PAXIL	21
PAXIL CR	21
PAXLOVID	31
PAXLOVID (150/100)	31
PAXLOVID (300/100)	31
pazopanib hcl	27
PEDIAVPRED	58
PEDIARIX	68
<b>PEDIATRIC PANDA MASK</b>	
	72
PEDVAX HIB	69
peg 3350-kcl-na bicarb-nacl	55
peg-3350/electrolytes	55
peg- 3350/electrolytes/ascorba t	55
PEGASYS	31
<b>peg-kcl-nacl-nasulf-na asc-c</b>	
	55
PEG-PREP	55
PEMAZYRE	27
<b>PEN NEEDLE/5-BEVEL TIP</b>	
	73
PENBRAYA	69
penciclovir	31
penicillamine	57
penicillin v potassium	17
PENNSAID	12
PENTACEL	69
PENTAM	28
pentamidine isethionate	28
PENTASA	70
pentazocine-naloxone hcl	13
<b>PENTIPS GENERIC PEN     NEEDLES</b>	
	73
pentobarbital sodium	19
<b>PENTOSAN</b>	
<b>POLYSULFATE SODIUM</b>	
	57
pentoxifylline er	37
PEPCID	54
PERCOCET	13
<b>PERFECT POINT SAFETY</b>	
<b>LANCETS</b>	
	49
PERFOROMIST	79
perindopril erbumine	37
periogard	41
permethrin	28
perphenazine	22
perphenazine-amitriptyline	21
PERSERIS	30
PERTZYE	56
<b>PFIZER COVID-19 VAC-     TRIS 5-11Y</b>	
	69
<b>PFIZER COVID-19 VAC-     TRIS 6M-4Y</b>	
	69
PHEBURANE	56
phenazopyridine hcl	57
phenelzine sulfate	21
PHENERGAN	22
phenobarbital	19
phenobarbital sodium	19
phenoxybenzamine hcl	37
phentermine-topiramate er	41
phentolamine mesylate	37
phenylephrine hcl	76
phenytex	19
phenytoin	19
phenytoin infatabs	19
phenytoin sodium	20

phenytoin sodium extended ..... 20  
 PHEXXI ..... 73  
 philith ..... 64  
 phospha 250 neutral ..... 53  
 PHOSPHOLINE IODIDE ..... 75  
 phosphorous ..... 53  
 phospho-trin 250 neutral ..... 53  
 PHOSPHO-TRIN K500 ..... 53  
 PHOXILLUM B22K4/0 ..... 53  
 PHOXILLUM BK4/2.5 ..... 53  
 phytonadione ..... 53  
 PIFELTRO ..... 32  
 pilocarpine hcl ..... 41, 75  
 pimecrolimus ..... 45  
 PIMECROLIMUS ..... 45  
 pimozide ..... 30  
 pimtreia ..... 64  
 pindolol ..... 37  
 pioglitazone hcl ..... 48  
 pioglitazone hcl-glimepiride ..... 48  
 pioglitazone hcl-metformin hcl ..... 48  
 PIP GLUCOSE CONTROL SOLUTION ..... 49  
 PIP PEN NEEDLES 32G X 4MM ..... 73  
 PIQRAY ..... 27  
 pirfenidone ..... 79  
 piroxicam ..... 12  
 pitavastatin calcium ..... 37  
 PLAN B ONE-STEP ..... 64  
 PLAQUENIL ..... 28  
 PLAVIX ..... 29  
 PLEGIRDY ..... 40  
 PLEGIRDY STARTER PACK ..... 40  
 PLENNU ..... 55  
 PLEXION ..... 45  
 PLEXION CLEANSER ..... 45  
 PLEXION CLEANSING CLOTH ..... 45  
 PNEUMOVAX 23 ..... 69  
 pocket spacer ..... 73  
 PODOCON-25 ..... 45  
 podofilox ..... 45  
 POKONZA ..... 53  
 polycin ..... 76  
 polymyxin b-trimethoprim ..... 76  
 POMALYST ..... 27  
 PONVORY ..... 40  
 PONVORY STARTER PACK ..... 40  
 portia-28 ..... 64

posaconazole ..... 23  
 pot & sod cit-cit ac ..... 53  
 potassium chloride ..... 53  
 potassium chloride crys er ..... 53  
 potassium chloride er ..... 53  
 potassium citrate er ..... 53  
 potassium citrate-citic acid ..... 53  
 potassium iodide (expectorant) ..... 77  
 POVIDONE-IODINE ..... 74  
 PRADAXA ..... 18  
 PRALUENT ..... 37  
 pramipexole dihydrochloride ..... 29  
 pramipexole dihydrochloride er ..... 29  
 PRAMOSONE ..... 45  
 PRAMOTIC ..... 77  
 prasugrel hcl ..... 29  
 pravastatin sodium ..... 38  
 praziquantel ..... 28  
 prazosin hcl ..... 38  
 PRED FORTE ..... 74  
 PRED MILD ..... 74  
 PREDNISOL ACE-MOXIFLOX-BROMFEN ..... 74  
 prednisolone ..... 58  
 prednisolone acetate ..... 74  
 prednisolone acetate p-f ..... 74  
 PREDNISOLONE ACETATE-NEPAFENAC ..... 74  
 PREDNISOLONE ACET-MOXIFLOXACIN ..... 74  
 prednisolone sodium phosphate ..... 58, 74  
 PREDNISOLONE-BROMFENAC ..... 76  
 PREDNISOLONE-GATIFLOXACIN ..... 76  
 PREDNISOLONE-MOXIFLOXACIN ..... 76  
 PREDNISOLON-GATIFLOX-BROMFENAC ..... 74  
 PREDNISOLON-MOXIFLO-BROMFENAC ..... 74  
 PREDNISOLON-MOXIFLO-KETOROLAC ..... 74

PREDNISOLON-MOXIFLOX-NEPAFENAC ..... 74  
 prednisone ..... 58  
 prednisone intensol ..... 58  
 pregabalin ..... 41  
 pregabalin er ..... 41  
 PREMARIN ..... 64  
 premium lidocaine ..... 15  
 PREMPHASE ..... 64  
 PREMPRO ..... 64  
 PREPIDIL ..... 57  
 PRESTALIA ..... 38  
 PRETOMANID ..... 25  
 PREVACID ..... 54  
 PREVACID SOLUTAB ..... 54  
 prevalite ..... 38  
 PREVNAR 20 ..... 69  
 PREVYMIS ..... 32  
 PREZCOBIX ..... 32  
 PREZISTA ..... 32  
 PRIFTIN ..... 25  
 PRILOSEC ..... 54  
 PRILOVIX ..... 15  
 PRILOVIX PLUS ..... 15  
 primaquine phosphate ..... 28  
 primidone ..... 20  
 PRIORIX ..... 69  
 PRISTIQ ..... 21  
 PRO COMFORT SPACER ADULT ..... 73  
 PRO COMFORT SPACER CHILD ..... 73  
 PRO COMFORT SPACER INFANT ..... 73  
 PROAIR RESPICLICK ..... 79  
 probenecid ..... 24  
 procainamide hcl ..... 38  
 PROCARDIA XL ..... 38  
 PROCARE SPACER/ADULT MASK ..... 73  
 PROCARE SPACER/CHILD MASK ..... 73  
 PROCENTRA ..... 40  
 prochlorperazine ..... 22  
 prochlorperazine edisylate ..... 22  
 prochlorperazine maleate ..... 22  
 PROCORT ..... 70  
 PROCRIT ..... 33  
 PROCTOCORT ..... 70  
 PROCTOFOAM HC ..... 70  
 procto-med hc ..... 70  
 proctosol hc ..... 70

proctozone-hc ..... 70  
 PROCYSBI ..... 56  
 progesterone ..... 64  
 PROGLYCEM ..... 50  
 PROGRAF ..... 67  
 PROLATE ..... 13  
 PROLENSA ..... 74  
 PROMACTA ..... 33  
 promethazine hcl ..... 22  
 promethazine-codeine ..... 77  
 promethazine-dm ..... 77  
 promethazine-  
     phenylephrine ..... 78  
 promethegan ..... 22  
 PROMETRIUM ..... 64  
 propafenone hcl ..... 38  
 propafenone hcl er ..... 38  
 proparacaine hcl ..... 76  
 propranolol hcl ..... 38  
 propranolol hcl er ..... 38  
 propylthiouracil ..... 65  
 PROQUAD ..... 69  
 PROSCAR ..... 57  
 PROSTIN VR ..... 38  
 PROTONIX ..... 54  
 protriptyline hcl ..... 21  
 PROVERA ..... 64  
 PROVIGIL ..... 82  
 PROXIVOL ..... 15  
 PROZAC ..... 21  
 prucalopride succinate ..... 55  
 PRUDOXIN ..... 45  
 pseudoephedrine-  
     bromphen-dm ..... 78  
 PULMICORT FLEXHALER ..... 79  
 PULMICORT  
     SUSPENSION ..... 79  
 pulmosal ..... 78  
 PULMOZYME ..... 80  
 PURE COMFORT SAFETY  
     PEN NEEDLE ..... 73  
 PURE COMFORT SPACER  
     CHAMBER ..... 73  
 PURIXAN ..... 27  
 PYLERA ..... 55  
 pyrazinamide ..... 25  
 PYRIDIUM ..... 57  
 pyridostigmine bromide ..... 25  
 pyridostigmine bromide er25  
 pyrimethamine ..... 28  
 PYROGALLIC ACID ..... 45  
 PYRUKYND ..... 33  
 PYRUKYND TAPER PACK ..... 33

PYZCHIVA ..... 67  
**Q**  
 QBRELIS ..... 38  
 QBREXA ..... 45  
 QELBREE ..... 40  
 QFITLIA ..... 33  
 QINLOCK ..... 27  
 QLOSI ..... 75  
 QNASL ..... 78  
 QNASL CHILDRENS ..... 78  
 QSYMIA ..... 41  
 QUADRACEL ..... 69  
 QUALAQUIN ..... 28  
 quazepam ..... 33  
 QUESTRAN ..... 38  
 QUESTRAN LIGHT ..... 38  
 quetiapine fumarate ..... 30  
 quetiapine fumarate er ..... 30  
 QUICK TOUCH INSULIN  
     PEN NEEDLE ..... 73  
 QUILLCHEW ER ..... 40  
 QUILLIVANT XR ..... 40  
 quinapril hcl ..... 38  
 quinapril-  
     hydrochlorothiazide ..... 38  
 quinidine gluconate er ..... 38  
 quinidine sulfate ..... 38  
 quinine sulfate ..... 28  
 QULIPTA ..... 24  
 QUVIQI ..... 82  
 QVAR REDIHALER ..... 79  
**R**  
 rabeprazole sodium ..... 54  
 RADICAVA ORS ..... 41  
 RADICAVA ORS STARTER  
     KIT ..... 41  
 RAGWITEK ..... 73  
 RALDESY ..... 21  
 raloxifene hcl ..... 60  
 ramelteon ..... 82  
 ramipril ..... 38  
 ranolazine er ..... 38  
 RAPAFLO ..... 57  
 rasagiline mesylate ..... 29  
 RASUVO ..... 67  
 RAVICTI ..... 56  
 RAYA SURE PEN NEEDLE ..... 73  
 RAYALDEE ..... 70  
 RAYOS ..... 58  
 react ..... 64  
 REBIF ..... 40  
 REBIF REBIDOSE ..... 40  
 REBIF REBIDOSE  
     TITRATION PACK ..... 40

REBIF TITRATION PACK40  
 reclipsen ..... 64  
 RECOMBIVAX HB ..... 69  
 RECORLEV ..... 60  
 RECTIV ..... 38  
 REGIOCIT ..... 18  
 REGLAN ..... 22  
 RELADOR PAK ..... 15  
 RELADOR PAK PLUS ..... 15  
 RELAFEN DS ..... 12  
 RELENZA DISKHALER ..... 32  
 RELEUKO ..... 33  
 relexxii ..... 40  
 RELEXXII ..... 40  
 RELISTOR ..... 55  
 RELPAX ..... 24  
 RELTONE ..... 55  
 REMERON ..... 21  
 REMERON SOLTAB ..... 21  
 RENACIDIN ..... 57  
 RENTHYROID ..... 65  
 RENVELA ..... 57  
 repaglinide ..... 48  
 REPATHA ..... 38  
 REPATHA PUSHTRONEX  
     SYSTEM ..... 38  
 REPATHA SURECLICK ..... 38  
 RESORCINOL-SULFUR ..... 45  
 RESTASIS ..... 76  
 RESTASIS MULTIDOSE ..... 76  
 RESTORIL ..... 82  
 RETACRIT ..... 34  
 RETEVMO ..... 27  
 RETIN-A ..... 45  
 RETIN-A MICRO GEL 0.04  
     %, 0.1 % ..... 45  
 RETIN-A MICRO PUMP ..... 45  
 RETROVIR ..... 32  
 REVATIO ..... 81  
 REVIMID ..... 27  
 REVUFORJ ..... 27  
 REXTOVY ..... 16  
 REXULTI ..... 30  
 REYATAZ ..... 32  
 REYVOW ..... 24  
 REZDIFRA ..... 55  
 REZLIDHIA ..... 27  
 REZUROCK ..... 67  
 REZVOGLAR KWIKPEN ..... 52  
 RHOFADE ..... 45  
 RHOPHYLAC ..... 67  
 RHOPRESSA ..... 75  
 ribavirin ..... 32  
 RIDAURA ..... 67  
 rifabutin ..... 25

rifampin.....	25	SALAGEN.....	41	SILVADENE.....	17
riluzole.....	41	salicylic acid.....	45	silver nitrate .....	17
rimantadine hcl.....	32	salicylic acid wart remover .....	45	silver sulfadiazine.....	18
RIMSO-50.....	57	SALIMEZ.....	45	SIMBRINZA.....	75
RINVOQ .....	67	SALIMEZ FORTE.....	45	SIMLANDI (1 PEN).....	67
RINVOQ LQ.....	67	salsalate .....	12	SIMLANDI (1 SYRINGE).....	67
RIOMET .....	48	SALVAX .....	45	SIMLANDI (2 PEN).....	67
risedronate sodium.....	70	SALYCIM.....	45	SIMLANDI (2 SYRINGE).....	67
RISPERDAL .....	30	SAMSCA .....	53	simliya .....	64
RISPERDAL CONSTA ..	30	SANCUSO.....	22	simpesse .....	64
risperidone.....	30	SANDIMMUNE .....	67	SIMPONI .....	67
risperidone microspheres er .....	30	SANDOSTATIN .....	60	simvastatin.....	38
RITALIN.....	40	SANDOSTATIN LAR .....	60	SINEMET .....	29
RITALIN LA.....	40	DEPOT .....	60	SINGULAIR .....	80
ritonavir.....	32	SANTYL .....	45	sirolimus .....	67
rivaroxaban.....	18	SAPHRIS.....	30	SIRTURO .....	25
rivastigmine.....	20	sapropterin dihydrochloride .....	56	SITAGLIPT BASE-METFORM HCL ER .....	48
rivastigmine tartrate.....	20	SAVAYSA.....	18	SITAGLIPTIN .....	48
rivelsa.....	64	SAVELLA .....	41	SITAGLIPTIN BASE-METFORMIN HCL .....	48
RIVFLOZA.....	57	SAVELLA TITRATION .....	41	SITAVIG .....	32
rizatriptan benzoate.....	24	PACK.....	41	SIVEXTRO .....	18
ROBAXIN .....	81	saxagliptin hcl .....	48	SKYCLARYS .....	41
ROCALTROL.....	70	saxagliptin-metformin er .....	48	SKYLA.....	64
ROCKLATAN.....	75	SCEMBLIX .....	27	SKYRIZI .....	67
roflumilast .....	80	scopolamine .....	22	SKYRIZI PEN .....	67
ROMVIMZA .....	27	SECUADO.....	30	SKYTROFA .....	60
ropinirole hcl .....	29	SEGLUROMET.....	48	SLYND .....	64
ropinirole hcl er .....	29	SELARSDI.....	67	SOAANZ.....	38
rosuvastatin calcium.....	38	selegiline hcl .....	29	sod citrate-citric acid .....	53
rosyrah .....	64	selenium sulfide .....	45	sodium chloride.....	53, 78
ROTARIX.....	69	SELZENTRY.....	32	SODIUM CHLORIDE .....	53
ROTATEQ .....	69	SEMGLEE (YFGN).....	52	sodium chloride (pf).....	53
ROWASA.....	70	SENSIPAR .....	70	sodium fluoride.....	53
roweepra.....	20	SEREVENT DISKUS.....	80	SODIUM OXYBATE .....	82
ROXICODONE .....	13	SERNIVO .....	45	sodium phenylbutyrate .....	56
ROXYBOND .....	13	SEROQUEL .....	30	sodium polystyrene sulfonate .....	53
ROZEREM.....	82	SEROQUEL XR .....	30	sodium sulfacetamide .....	45
ROZLYTREK .....	27	SEROSTIM .....	55	sodium sulfacetamide wash .....	45
RUBRACA.....	27	sertraline hcl .....	21	SOFDRA .....	45
RUCONEST.....	67	SERTRALINE HCL.....	21	SOFOSBUVIR-VELPATASVIR .....	32
rufinamide.....	20	setlakin .....	64	SOGROYA .....	60
RUKOBIA .....	32	sevelamer carbonate .....	57	SOHONOS .....	73
RYALTRIS.....	78	sevelamer hcl .....	57	solifenacin succinate .....	57
RYBELSUS.....	48	SEYSARA.....	17	SOLIQUA .....	48
RYCLORA .....	78	SFROWASA .....	70	SOLOSEC .....	18
RYDAPT .....	27	sharobel.....	64	SOLTAMOX .....	27
RYKINDO .....	30	SHINGRIX .....	69	SOLU-CORTEF .....	58
RYTARY .....	29	SIGNIFOR .....	60	SOLU-MEDROL (PF) .....	59
ryvent .....	78	SIKLOS .....	27	SOMA.....	81
<b>S</b>		sildenafil citrate .....	81	SOMATULINE DEPOT .....	60
SABRIL.....	20	SILENOR.....	82		
SAFETY PEN NEEDLES	73	SILIQ.....	67		
SAFYRAL .....	64	silodosin .....	57		
sajazir.....	67				

SOMAVERT.....	60	SUCRAID .....	56	SYNJARDY .....	48
SOOLANTRA.....	45	sucralfate.....	54	SYNJARDY XR.....	48
SOOTHEE .....	15	SUFLAVE .....	55	SYNTHROID.....	65
sorafenib tosylate .....	27	SULAR .....	38	SYPRINE.....	53
SORILUX.....	45	sulfacetamide sodium		<b>T</b>	
sotalol hcl.....	38	46, 75		TABLOID.....	27
sotalol hcl (af).....	38	sulfacetamide sodium		TABRECTA .....	27
SOTYKTU.....	67	(acne) .....	46	TACLONEX .....	46
SOTYLIZE .....	38	sulfacetamide sodium		tacrolimus .....	46, 67
SOVALDI.....	32	(cleans).....	46	tadalafil (pah).....	81
SOVUNA .....	28	sulfacetamide sodium-sulfur		TADLIQ .....	81
SPEVIGO .....	67	46		TAFINLAR .....	27
SPIKEVAX.....	69	sulfacetamide sod-sulfur		tafluprost (pf).....	75
spinossad .....	28	wash.....	46	TAGRISSO .....	27
SPIRIVA HANDIHALER .	80	sulfacetamide-prednisolone		take action .....	64
SPIRIVA RESPIMAT .....	80	76	TAKHYRO .....	67	
spironolactone.....	38	sulfacleanse 8/4 .....	46	TALICIA.....	55
spironolactone-hctz .....	38	sulfadiazine.....	18	TALTZ .....	67
SPORANOX .....	23	sulfamethoxazole-		TALZENNA .....	27
SPRAVATO (56 MG DOSE)		trimethoprim .....	18	TAMIFLU .....	32
.....	22	sulfamez wash .....	46	tamoxifen citrate.....	27
SPRAVATO (84 MG DOSE)		SULFAMYLYON.....	18	tamsulosin hcl .....	57
.....	22	sulfasalazine.....	70	TANLOR.....	81
sprintec 28 .....	64	sulfatrim pediatric.....	18	TAPERDEX 12-DAY .....	59
SPRITAM.....	20	sulindac .....	12	TAPERDEX 6-DAY .....	59
SPRIX .....	12	SUMADAN WASH .....	46	TAPERDEX 7-DAY .....	59
SPRYCEL.....	27	sumatriptan .....	24	TARCEVA.....	27
sps (sodium polystyrene		sumatriptan succinate.....	24	TARGADOX.....	18
sulf).....	53	sumatriptan succinate refill		TARGRETIN.....	27
sronyx.....	64	subcutaneous solution		tarina 24 fe.....	64
ssd .....	18	cartridge.....	24	tarina fe 1/20 eq .....	64
SSKI.....	78	sumatriptan-naproxen		TARPEYO .....	70
sss 10-5.....	45	sodium.....	24	TASCENSO ODT .....	40
SSS 10-5.....	46	SUMAXIN .....	46	TASIGNA.....	27
STEGLATRO .....	48	sunitinib malate .....	27	tasimelteon .....	82
STEGLUJAN.....	48	SUNLENCA .....	32	TASMAR .....	29
STELARA .....	67	SUNOSI.....	82	tavaborole.....	23
STEQEYMA.....	67	SUPREP BOWEL PREP		TAVALISSE .....	34
sterile water for irrigation.	53	KIT.....	55	TAVNEOS .....	73
STIMUFEND.....	34	SURVANTA .....	78	taysofy.....	64
STIOLTO RESPIMAT .....	80	SUTAB .....	55	TAYTULLA .....	64
STIVARGA.....	27	SUTENT .....	27	tazarotene.....	46
STRATTERA .....	40	syeda .....	64	TAZAROTENE .....	46
STRENSIQ .....	56	SYMBICORT .....	80	tazicef.....	18
streptomycin sulfate .....	18	SYMBRAVO .....	24	TAZORAC .....	46
STRIBILD .....	32	SYMBYAX .....	22	TAZVERIK .....	27
STRIVERDI RESPIMAT .....	80	SYMDEKO.....	80	TECFIDERA .....	40
STROMECTOL.....	28	SYMF1 .....	32	TECHLITE LANCESTS 26G	
SUBOXONE .....	16	SYMLINPEN 120 .....	48	.....	49
subvenite .....	20	SYMLINPEN 60 .....	48	TEGLUTIK .....	41
subvenite starter kit-blue.	20	SYMPAZAN .....	20	TEGRETOL .....	20
subvenite starter kit-green		SYMPROIC .....	55	TEGRETOL-XR .....	20
.....	20	SYMTUZA .....	32	TEKTURNNA .....	38
subvenite starter kit-orange		synalar.....	46	TELIORA .....	46
.....	20	SYNAREL.....	60	telmisartan .....	38
		SYNDROS.....	22		

telmisartan-amlodipine.... 38  
 telmisartan-hctz..... 38  
 temazepam..... 82  
 temozolomide..... 27  
 tencon ..... 13  
 TENIVAC ..... 69  
 tenofovir disoproxil fumarate  
       ..... 32  
 TENORETIC 100 ..... 38  
 TENORETIC 50 ..... 38  
 TENORMIN..... 38  
 TEPMETKO ..... 27  
 terazosin hcl..... 57  
 terbinafine hcl..... 23  
 terbutaline sulfate..... 80  
 terconazole ..... 23  
 teriflunomide ..... 40  
 teriparatide..... 70  
 TERIPARATIDE ..... 70  
 TESTIM ..... 59  
 TESTONE CIK ..... 59  
 testosterone ..... 59  
 testosterone cypionate.... 59  
 TESTOSTERONE  
     CYPIONATE ..... 59  
 testosterone enanthate... 59  
 tetrabenazine ..... 41  
 tetracaine hcl ..... 76  
 tetracycline hcl ..... 18  
 TETRACYCLINE HCL.... 18  
 TEXACORT ..... 46  
 TEZRULY ..... 57  
 TEZSPIRE ..... 80  
 THALITONE..... 38  
 THALOMID ..... 27  
 THEO-24 ..... 80  
 theophylline..... 80  
 theophylline er..... 80  
 THIOLA ..... 57  
 THIOLA EC..... 57  
 thioridazine hcl ..... 30  
 thiothixene ..... 30  
 THYQUIDITY ..... 65  
 THYROID ..... 65  
 tiadylt er..... 38  
 tiagabine hcl..... 20  
 TIAZAC..... 38  
 TIBSOVO..... 27  
 ticagrelor..... 29  
 TIGAN ..... 22  
 TIGLUTIK ..... 41  
 TIKOSYN..... 38  
 tilia fe..... 64  
 timolol hemihydrate ..... 75  
 timolol maleate..... 38, 75

timolol maleate (once-daily)  
       ..... 75  
 timolol maleate ocudoose ..75  
 timolol maleate pf..... 75  
 TIMOLOL-BRIMON-  
     DORZOL-LATANOPR .75  
 TIMOLOL-BRIMONIDINE-  
     DORZOLAMID .....76  
 TIMOLOL-DORZOLAMID-  
     LATANOPROST..... 76  
 TIMOPTIC OCUDOSE ....76  
 tinidazole ..... 18  
 tiopronin..... 57  
 tiotropium bromide  
     monohydrate ..... 80  
 TIROSINT..... 65  
 TIROSINT-SOL..... 65  
 TIVICAY ..... 32  
 TIVICAY PD..... 32  
 tizanidine hcl..... 81  
 TLANDO..... 59  
 TOBI NEBULIZER..... 80  
 TOBI PODHALER..... 80  
 TOBRADEX ..... 75  
 TOBRADEX ST..... 75  
 tobramycin..... 75, 80  
 TOBRAMYCIN..... 80  
 tobramycin-dexamethasone  
       ..... 75  
 TOBREX..... 75  
 TOLAK ..... 46  
 tolcapone..... 29  
 TOLECTIN 600..... 12  
 tolmetin sodium..... 12  
 TOLSURA..... 23  
 tolterodine tartrate..... 57  
 tolterodine tartrate er..... 57  
 tolvaptan..... 53  
 TOPAMAX..... 20  
 TOPAMAX SPRINKLE ...20  
 TOPICORT ..... 46  
 TOPICORT SPRAY..... 46  
 topiramate..... 20  
 topiramate er..... 20  
 TOPROL XL..... 38  
 toremifene citrate ..... 27  
 torpenz ..... 27  
 torsemide..... 38  
 TOSYMRA..... 24  
 TOUJEO MAX SOLOSTAR  
       ..... 52  
 TOUJEO SOLOSTAR ....52  
 tovet ..... 46  
 TOVIAZ ..... 57  
 TRACLEER ..... 81

TRADJENTA..... 48  
 tramadol hcl (er biphasic) 14  
 TRAMADOL HCL (ER  
     BIPHASIC)..... 14  
 tramadol hcl er..... 14  
 tramadol hcl ir ..... 14  
 TRAMADOL HCL IR..... 14  
 tramadol-acetaminophen.14  
 trandolapril..... 38  
 trandolapril-verapamil hcl er  
       ..... 38  
 tranexamic acid..... 34  
 tranylcypromine sulfate....22  
 TRAVATAN Z ..... 76  
 travoprost (bak free)..... 76  
 trazodone hcl ..... 22  
 TRECATOR..... 25  
 TRELEGY ELLIPTA .....80  
 TREMFYA ..... 68  
 TREMFYA CROHNS  
     INDUCTION ..... 68  
 TREMFYA ONE-PRESS .68  
 TREMFYA PEN ..... 68  
 TRESIBA..... 52  
 TRESIBA FLEXTOUCH...52  
 tretinoin ..... 27, 46  
 tretinoin microsphere.....46  
 tretinoin microsphere pump  
       ..... 46  
 TREXALL ..... 68  
 TREXIMET ..... 24  
 TREZIX ..... 14  
 triamcinolone acetonide..41,  
     46, 59  
 TRIAMCINOLONE  
     ACETONIDE ..... 59  
 TRIAMCINOLONE  
     DIACETATE ..... 59  
 triamcinolone in absorbase  
       ..... 46  
 triamterene ..... 38  
 triamterene-hctz ..... 38  
 triazolam..... 33  
 TRIBENZOR ..... 38  
 tricitrates..... 53  
 TRICOR..... 38  
 TRIDACAINE II ..... 15  
 TRIDACAINE III ..... 15  
 triderm ..... 46  
 trientine hcl ..... 53  
 tri-estarrylla..... 64  
 trifluoperazine hcl..... 30  
 trifluridine..... 75  
 trihexyphenidyl hcl..... 29  
 TRIJARDY XR ..... 48

TRIKAFTA .....	80	TYMLOS.....	70	UZEDY .....	30
tri-legest fe.....	64	TYRVAYA.....	76	V	
TRILEPTAL.....	20	TYVASO.....	81	VAFSEO.....	34
tri-linyah.....	64	TYVASO DPI INSTITUTIONAL KIT ...	81	VAGIFEM .....	64
TRILOCAINE .....	15	TYVASO DPI MAINTENANCE KIT ....	81	valacyclovir hcl.....	32
tri-lo-estarrylla.....	64	TYVASO DPI TITRATION KIT.....	81	VALCHLOR .....	27
tri-lo-marzia.....	64	TYVASO REFILL KIT .....	81	VALCYTE .....	32
tri-lo-mili.....	64	TYVASO STARTER KIT..	81	valganciclovir hcl.....	32
tri-lo-sprintec.....	64	<b>U</b>		VALIUM.....	33
trimethobenzamide hcl... trimethoprim.....	23	UBRELVY.....	24	valproic acid.....	20
tri-mili.....	64	UCERIS.....	70	valsartan.....	38
trimipramine maleate....	22	UDENYCA.....	34	VALSARTAN .....	38
TRINTELLIX .....	22	ULORIC.....	24	valsartan- hydrochlorothiazide .....	38
tri-sprintec.....	64	ULTIGUARD SAFEPACK SYR/NEEDLE .....	52	VALTOCO 10 MG DOSE.	20
TRIUMEQ.....	32	ULTRAVATE.....	46	VALTOCO 15 MG DOSE.	20
TRIUMEQ PD .....	32	UMECLIDINIUM- VILANTEROL.....	80	VALTOCO 20 MG DOSE.	20
trivora (28).....	64	UMECTA MOUSSE.....	46	VALTOCO 5 MG DOSE...	20
tri-vylibra.....	64	UNDECATREX.....	59	VALTREX .....	32
tri-vylibra lo .....	64	UNIFINE OTC PEN NEEDLES .....	73	valtya 1/50 .....	64
TROKENDI XR .....	20	UNIFINE PROTECT PEN NEEDLE .....	73	VANCOCIN.....	18
TROPICAMIDE- CYCLOPENTOLATE-PE .....	76	UNISTRIP CONTROL .....	50	vancomycin hcl .....	18
TROPICAMIDE- PHENYLEPHRINE .....	76	unithroid.....	65	VANDAZOLE .....	18
TROPIC-PROPARACA-PE- KETOROLAC .....	76	UPNEEQ .....	75	VANFLYTA .....	27
trospium chloride.....	57	UPTRAVI.....	81	VANOS.....	47
trospium chloride er.....	57	UPTRAVI TITRATION .....	81	VANOXIDE-HC .....	47
TRUDHESA.....	24	URAMAXIN.....	46	VANRAFIA.....	57
TRUE COMFORT SAFETY PEN NEEDLE .....	73	urea.....	47	VAQTA .....	69
TRUE METRIX LEVEL 1	50	UREA .....	47	varenicline tartrate.....	16
TRUE METRIX LEVEL 2	50	urea nail.....	47	varenicline tartrate (starter) .....	16
TRUE METRIX LEVEL 3	50	uredeb .....	47	varenicline tartrate(continue).....	16
TRULANCE .....	55	urelle .....	57	VARIVAX.....	69
TRULICITY .....	48	uremez-40 .....	47	VARIZIG .....	68
TRUMENBA.....	69	URESOL.....	47	VARUBI (180 MG DOSE)	23
TRUQAP.....	27	uretron d/s .....	57	VASCEPA.....	38
TRUVADA .....	32	URIBEL .....	57	VASERETIC .....	38
TRYNGOLZA.....	38	URIMAR-T.....	57	VASOTEC .....	38
TRYVIO.....	38	URNEVA .....	57	VAXELIS .....	69
TUDORZA PRESSAIR... TUKYSA.....	80	UROCIT-K 10 .....	53	VAXNEUVANCE .....	69
TURALIO.....	27	UROCIT-K 15 .....	53	VECAMYL .....	38
turqoz .....	64	UROGESIC-BLUE .....	57	VECTICAL .....	47
TUXARIN ER.....	78	uro-mp.....	57	velvet.....	64
TWINRIX .....	69	UROXATRAL.....	57	VELPHORO .....	57
TWIRLA.....	64	URSO FORTE .....	55	VELSIPITY .....	68
TWYNEO.....	46	ursodiol.....	55	VELTASSA .....	53
tyblume.....	64	USTEKINUMAB .....	68	VEMLIDY .....	32
TYBOST .....	32	USTEKINUMAB-AEKN....	68	VENCLEXTA .....	27
TYENNE.....	68	USTEKINUMAB-TTWE ..	68	VENCLEXTA STARTING PACK.....	27
TYKERB .....	27			VENLAFAXINE BESYLATE ER .....	22
				venlafaxine hcl .....	22
				venlafaxine hcl er .....	22

VENTAVIS.....	81	vitamin d (ergocalciferol).....	53	WELIREG.....	27
VENTOLIN HFA.....	80	vitamin k1 .....	53	WELLBUTRIN SR.....	22
VENXXIVA.....	57	VITRAKVI.....	27	WELLBUTRIN XL.....	22
VEOZAH.....	73	VIVAGUARD INO CONTROL SOLUTION	50	wera .....	64
verapamil hcl.....	39	VIVAGUARD LANCESTS 30G .....	50	wes-phos 250 neutral .....	53
verapamil hcl er.....	38, 39	VIVAGUARD LANCING DEVICE .....	50	WEZLANA.....	68
VEREGEN.....	47	VIVAGUARD SAFETY LANCETS 28G.....	50	WIDE-SEAL DIAPHRAGM 60 .....	73
VERELAN.....	39	VIVELLE-DOT .....	64	WIDE-SEAL DIAPHRAGM 65 .....	73
VERIFINE INSULIN PEN NEEDLE .....	73	VIVITROL.....	16	WIDE-SEAL DIAPHRAGM 70 .....	73
VERIFINE INSULIN SYRINGE.....	52	VIVJOA.....	24	WIDE-SEAL DIAPHRAGM 75 .....	73
VERIFINE PLUS PEN NEEDLE .....	73	VIZIMPRO.....	27	WIDE-SEAL DIAPHRAGM 80 .....	73
VERIFINE SAFE LANCET MINI 21G .....	50	VOGELXO.....	59	WIDE-SEAL DIAPHRAGM 85 .....	73
VERIFINE SAFE LANCET MINI 23G .....	50	VOGELXO PUMP .....	59	WIDE-SEAL DIAPHRAGM 90 .....	73
VERIFINE SAFE LANCET MINI 28G .....	50	volhea.....	64	WIDE-SEAL DIAPHRAGM 95 .....	73
VERIFINE SAFE LANCET MINI 30G .....	50	VONJO.....	27	WINLEVI.....	47
VERKAZIA.....	76	VOQUEZNA.....	54	WINREVAIR.....	81
VERQUVO.....	39	VOQUEZNA DUAL PAK..	55	wixela inhub.....	80
VERSACLOZ.....	30	VOQUEZNA TRIPLE PAK .....	55	wymzya fe.....	64
VERZENIO.....	27	VORANIGO.....	27	WYNZORA.....	47
VESICARE.....	57	voriconazole .....	24	<b>X</b>	
VESICARE LS .....	57	VORTEX VALVE CHAMBER-PEDI MASK .....	73	XACIATO.....	18
vestura.....	64	VORTEX VALVED HOLDING CHAMBER..	73	XADAGO.....	29
VEVYEE .....	76	VOSEVI.....	32	XALATAN.....	76
VFEND .....	23	VOTRIENT .....	27	XALIX.....	47
V-GO 20 .....	73	VOWST .....	55	XALKORI.....	27
V-GO 30 .....	73	VOXZOGO .....	56	XANAX.....	33
V-GO 40 .....	73	VOYDEYA.....	34	XANAX XR .....	33
VIBERZI .....	55	VRAYLAR.....	30	xarah fe .....	65
VICTOZA.....	48	VTAMA.....	47	XARELTO.....	18
vienna.....	64	VUITY.....	76	XARELTO STARTER PACK .....	18
vigabatrin .....	20	VUMERTY .....	40	XATMEP.....	68
VIGADRONE .....	20	VUSION.....	24	XCOPRI.....	20
VIGAFYDE.....	20	vyfemla.....	64	XDEMVF.....	75
VIGAMOX.....	75	VYKAT XR.....	73	XELJANZ.....	68
vigpoder.....	20	vylibra.....	64	XELJANZ XR.....	68
VIIBRYD .....	22	VYNDAMAX.....	39	XELODA.....	27
VIJOICE .....	27	VYNDAQEL .....	39	XELPROS.....	76
vilamit mb .....	57	VYTORIN .....	39	xelria fe.....	65
vilazodone hcl .....	22	VYVANSE.....	40	XELSTRYM.....	40
VILEVEV MB .....	57	VYVGART HYTRULO .....	25	XEMBIFY.....	68
VIMOVO .....	12	VYZULTA .....	76	XENAZINE.....	41
VIMPAT .....	20	<b>W</b>		XERESE.....	32
VIOKACE.....	56	WAINUA.....	41	XERMELO.....	55
viorele.....	64	WAKIX.....	82	XHANCE .....	78
VIRACEPT.....	32	warfarin sodium.....	18	XIFAXAN.....	18
VIRASAL .....	47	water for irrigation, sterile	53	XIGDUO XR.....	48
VIREAD.....	32	WELCHOL.....	39		
VISTOGARD.....	73				

XIIDRA .....	76	YUFLYMA-CD/UC/HS STARTER.....	68	ZIPSOR.....	12
XOFLUZA (40 MG DOSE) .....	32	YUPELRI.....	80	ZIRGAN.....	75
XOFLUZA (80 MG DOSE) .....	32	YUSIMRY.....	68	ZITHRANOL.....	47
XOLAIR .....	80	YUTREPIA.....	81	ZITHROMAX.....	18
XOLREMDI.....	34	yuvafem.....	65	ZITHROMAX TRI-PAK .....	18
XOPENEX HFA.....	80	<b>Z</b>		ZITHROMAX Z-PAK.....	18
XOSPATA.....	27	ZACLIR CLEANSING .....	47	ZITUVIMET.....	48
XPHOZAH .....	73	zafemy.....	65	ZITUVIMET XR.....	48
XPOVIO (100 MG ONCE WEEKLY).....	27	zaflirlukast .....	80	ZITUVIO .....	48
XPOVIO (40 MG ONCE WEEKLY).....	27	zaleplon.....	82	ZOCOR .....	39
XPOVIO (40 MG TWICE WEEKLY).....	27	ZANAFLEX.....	81	ZOKINVY.....	73
XPOVIO (60 MG ONCE WEEKLY).....	27	ZARONTIN.....	20	ZOLINZA .....	28
XPOVIO (60 MG TWICE WEEKLY).....	27	ZARXIO.....	34	zolmitriptan .....	24
XPOVIO (80 MG ONCE WEEKLY).....	27	ZAVESCA.....	56	ZOLMITRIPTAN.....	24
XPOVIO (80 MG TWICE WEEKLY).....	28	ZAVZPRET.....	24	ZOLOFT .....	22
XROMI.....	28	ZEGALOGUE .....	50	zolpidem tartrate .....	82
XTAMPZA ER.....	14	ZEJULA.....	28	ZOLPIDEM TARTRATE ..	82
XTANDI .....	28	ZELAPAR.....	29	zolpidem tartrate er .....	82
xulane.....	65	ZELBORAF.....	28	ZOMACTON .....	60
XULTOPHY .....	48	ZEMBRACE SYMTOUCH .....	24	ZOMIG .....	24
xurea .....	47	ZEMPLAR.....	70	ZONALON .....	47
XYLOCAINE .....	15	zenatane.....	47	ZONEGRAN .....	20
XYLOCAINE MPF +RFID 15		ZENPEP .....	56	ZONISADE .....	20
XYLOCAINE/EPINEPHRIN E.....	15	zenzedi.....	40	zonisamide .....	20
XYLOCAINE-MPF .....	15	ZENZEDI.....	40	ZONTIVITY .....	29
XYLOCAINE-MPF +RFID 15		ZEPATIER.....	32	ZORTRESS .....	68
XYOSTED .....	59	ZEPBOUND.....	41	ZORYVE.....	47
XYREM.....	82	ZEPOSIA.....	41	zovia 1/35 (28).....	65
XYWAV .....	82	ZEPOSIA 7-DAY STARTER PACK.....	41	ZOVIRAX.....	32
<b>Y</b>		ZEPOSIA STARTER KIT .41		ZTALMY .....	20
yargesa.....	56	ZERUVIA.....	15	ZTLIDO .....	15
YASMIN 28.....	65	ZERVIASTE .....	75	ZUBSOLV .....	16
YAZ .....	65	ZESTORETIC .....	39	zumandimine .....	65
YESINTEK.....	68	ZESTRIL.....	39	ZUNVEYL .....	20
YONSA.....	28	ZETIA.....	39	ZURZUVAE .....	22
YORVIPATH.....	73	ZIAGEN.....	32	ZYCLARA .....	47
YOSPRALA .....	29	ZIANA.....	47	ZYCLARA PUMP .....	47
YUFLYMA (1 PEN).....	68	zidovudine .....	32	ZYDELIG .....	28
YUFLYMA (2 PEN).....	68	ZIEXTENZO.....	34	ZYFLO .....	80
YUFLYMA (2 SYRINGE) 68		ZILBRYSQ.....	73	ZYKADIA .....	28
		zileuton er.....	80	ZYLET .....	77
		ZIMHI .....	16	ZYMFENTRA (1 PEN)....	68
		ZIONODIL.....	15	ZYMFENTRA (2 PEN)....	68
		ZIONODIL 100.....	15	ZYMFENTRA (2 SYRINGE) .....	68
		ZIOPTAN.....	76	ZYNRELEF .....	12
		ziprasidone hcl.....	30	ZYPITAMAG .....	39
		ziprasidone mesylate.....	30	ZYPREXA .....	30
				ZYTIGA .....	28
				ZYVOX.....	18

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  - 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

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- 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

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የተደረገው እናይቻል አገልግሎቶች በነፃ ይገልጻል፡፡ በ 1-888-901-4636 ይደውሉ (TTY 711)፡**

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

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ບໍລິການຈ່ວຍເຫຼືອທີ່ເຫັນໄສ ລະວົມໃຫ້ທ່ານໄດ້ຢູ່ເນັ້ນ. ໂທ **1-888-901-4636 (TTY 711)**.

**International Symbol for ASL  
(American Sign Language):**

