

PRESCRIPTION DRUG PROGRAM FORMULARY

Effective January 1, 2025



INFORMATION FOR MEMBERS AND PROVIDERS

This Select Drug Program® Formulary is intended to help members and providers understand prescription drug coverage under the AmeriHealth Administrators Select Drug Program Formulary. We are committed to providing comprehensive prescription drug coverage. To achieve this, we include a formulary feature in your prescription drug benefit. The drugs are approved by the U.S. Food and Drug Administration (FDA). They are also reviewed by our Pharmacy and Therapeutics Committee, a group of doctors and pharmacists from the area. These prescription drugs have been added to the Select Drug Program Formulary for their reported medical effectiveness, safety, and value.

The pharmacy benefits manager monitors all drugs to ensure they are safe and effective.

Please note: Prescription drug benefits vary by group. Therefore, a drug on this formulary does not imply coverage. Drug coverage is based on medical necessity. This formulary guide was current at the time of printing and is subject to change. Please call Customer Service at the number listed on the back of your ID card if you have any questions about your prescription drug benefits. Please discuss any questions or concerns about your drug therapy with your provider or pharmacist.

What is a formulary?

A formulary is a list of prescribed medications or other pharmacy care products, services or supplies chosen for their safety, cost, and effectiveness. Medications are listed by categories or classes and are placed into cost levels known as tiers. It includes both brand and generic prescription medications.

This list is guided by the Pharmacy and Therapeutics Committee. The committee reviews which medications will be covered, how well the drugs work, and overall value. They also make sure there are safe and covered options.

What are tiers?

Tiers are the different cost levels you pay for a medication. Each drug on the formulary is in a tier.

Select Formulary tier structure

Below is a summary of tiers in the general order from lowest to highest level of cost-share. Benefits vary by group, so the inclusion of a drug in this formulary does not guarantee coverage. All cost-share tiers may not be available on all plans.

- Low-Cost Generic (availability varies by benefit)
- Generic
- Preferred Brand
- Non-preferred Drug
- Specialty (availability varies by benefit)

- Generally, if a brand-name drug has a generic equivalent, the brand-name drug is non-preferred while the generic equivalent is covered at the generic level of cost-sharing.

For example: Cipro® is the brand drug and is considered non-preferred; its generic equivalent ciprofloxacin is available at the generic level of cost-sharing.

- Some brand-name drugs without generic equivalents, authorized generic (also referred to as authorized brand alternative) drugs and generic drugs are also considered *non-preferred*. This is because there are other more cost-effective alternatives covered on the formulary to treat the same condition..

Covered generic drugs not listed in the formulary guide are available at the generic level of cost-sharing; covered brand drugs not listed in the formulary guide are available at the non-preferred level of cost-sharing.

The Low-Cost Generic [LCG] Tier offers copays lower than the cost-share for the generic tier, when possible. This applies to certain generic drugs that are typically used to treat chronic conditions such as high blood pressure, high cholesterol, diabetes, heart failure, and depression. Benefits may vary. Not all plans provide this incentive. The drug list is subject to change. When this incentive is not available on a plan, these drugs will be covered at the generic cost-share level.

Specialty Drugs [SP] meet certain criteria, including, but not limited to drugs used to treat rare, complex, or chronic diseases, drugs that have complex storage and/or shipping requirements, and drugs that require comprehensive patient monitoring and/or education. Specialty drugs covered under the pharmacy benefit may be managed by your pharmacy benefit managers Specialty Pharmacy Program. Benefits may vary, and many plans cover specialty drugs on a specialty tier with higher cost-sharing. For cost-sharing purposes, drugs on the specialty tier are not eligible for tier lowering.

Authorized Generics [AG] are brand-name drugs that are marketed without the brand name on its label. An authorized generic may be marketed by the brand-name drug company, or another company with the brand company's permission. These drugs are approved by the FDA. But they are not approved through the abbreviated new drug application (ANDA) process like a standard generic drug. For cost sharing purposes, authorized generics are treated as brand-name drugs and are not eligible for coverage on the generic tier(s). Another name for AGs is Authorized Brand Alternative [ABA]. **For example:** oxycodone ER tablet, an authorized generic of brand OxyContin[®], is listed as non-preferred and is available at the non-preferred level of cost-sharing.

What are Affordable Care Act (ACA) preventive medications?

Certain preventive medications, as described in the Patient Protection and Affordable Care Act and detailed by the U.S. Preventive Services Task Force, are covered without cost-sharing with a prescription when provided by a participating retail or mail-order pharmacy.

The following categories of drugs may be available at no member cost-share with a prescription. Please note that individual benefits may vary. Always refer to your benefits to determine your coverage. This list is subject to change. Refer to the searchable drug lookup tool on your health insurance plan's website to check the status of a specific drug.

Category	Product(s) Available at \$0 at the Pharmacy
Aspirin products (OTC) For women after 12 weeks' gestation who are at high risk for preeclampsia	aspirin 81mg (tab/chewable)
Bowel preparations Bowel preparation for colonoscopy needed for preventive colon cancer screening, for ages 45-75	generic bowel preparation products such as Gavilyte-CTM, Gavilyte-GTM, Gavilyte-NTM, Gavilyte-HTM with bisacodyl, polyethylene glycol (PEG) 3350 oral powder, Trilyte® w/packets
Breast cancer chemo prevention For asymptomatic females age 35 years and older without a prior diagnosis of breast cancer, ductal carcinoma in situ, or lobular carcinoma in situ, who are at high risk for breast cancer and at low risk for adverse effects from breast cancer chemoprevention	tamoxifen 20mg
Contraceptives Includes, but not limited to, oral, injectable, transdermal, diaphragms, cervical caps, intravaginal devices, condoms, and contraceptive film and jelly (in accordance with the women's preventive services provisions of the ACA). Note: IUDs and implantable products are covered under the medical benefit.	<ul style="list-style-type: none"> - Oral: some generics such as Amethia, Cryselle-28, Emoquette, Fayosim, Necon, Ocella, Sprintec, Trivora - Injectable: all generics such as medroxyprogesterone injection - Transdermal: Xulane® patches - Diaphragms - Cervical Caps - Condoms - Contraceptive film - Contraceptive gel/jelly/foam: such as VCF® foam 12.5%, 28%, Options Conceptrol® 4%, Options Gynol® 3%, Phexxi® - Emergency: all generics such as levonorgestrel 1.5mg tab, My Way® 1.5mg tab - Intravaginal devices: etonogestrel-ethinyl estradiol vaginal ring
Fluoride For children ages 6 months to 16 years. Includes generics strengths up to 0.5mg	sodium fluoride 1.1 (0.5f) mg/ml solution sodium fluoride 0.55 (0.25f) mg chewable tab Fluoritab 0.275 (0.125f) mg/drop solution Fluoritab 1.1 (0.5f) mg chewable tab
Folic acid For women planning for or capable of pregnancy. Limited to 0.4 to 0.8mg of folic acid. For women younger than 51 years of age	folic acid 400mcg tab folic acid 800mcg tab folic acid 0.8mg capsule (including generic prenatal vitamins with the above listed folic acid dose)

Category	Product(s) Available at \$0 at the Pharmacy
<p>Tobacco Cessation Medication For adults ages 18+ years, who use tobacco products and want to quit</p>	<p>varenicline tab bupropion SR (generic Zyban®) tablet nicotine polacrilex lozenge nicotine patch 24 hour transdermal Nicotrol® Inhaler Nicotrol® NS Solution</p>
<p>Statins Low-to-moderate dose statin for prevention of cardiovascular disease, recommended for ages 40-75 years without a history of CVD when 1 or more CVD risk factors are present (e.g., dyslipidemia, diabetes, hypertension, or smoking) and a calculated 10-year risk of a cardiovascular event of 10% or greater</p>	<p>lovastatin 10mg lovastatin 20mg lovastatin 40mg</p>
<p>HIV PrEP Preexposure prophylaxis (PrEP) with effective anti-retroviral therapy for persons who are at high risk of HIV acquisition</p>	<p>Emtricitabine-Tenofovir Disoproxil Fumarate Tab 200-300mg Tenofovir 300mg Descovy® 200-25mg</p>
<p>Vaccines To prevent certain illnesses in infants, children, and adults. Include immunizations to prevent Influenza, Pneumococcal, Shingles, and Respiratory Syncytial Virus Infection (RSV)</p>	<p>- Influenza: Afluria®, Fluzone [Quad]®, Fluzone®, Fluarix®, Flumist®, Flublok®, Fluad®, Flucelvax®, Flulaval® - Pneumococcal: Prevnar 13®, Pneumovax 23®, Prevnar 20™, Vaxneuvance®, Capvaxive™* - Shingles: Shingrix®* - RSV: Arexvy™**, Abrysvo™***, Mresvia®**</p> <p>*Note: Applies to members at least 19 years of age. Cost share applies for members 18 years of age.</p> <p>**Note: Applies to members at least 60 years of age.</p> <p>***Note: Applies to members at least 60 years of age or for pregnant individuals at 32 through 36 weeks gestational age.</p>

PROCEDURES THAT SUPPORT SAFE PRESCRIBING

AmeriHealth Administrators utilizes an independent pharmacy benefits management (PBM) company, to manage the administration of its prescription drug programs. As our PBM, they are responsible for providing a network of participating pharmacies, administering pharmacy benefits, and providing customer service to our members and their providers. The effectiveness and safety of drugs and drug-prescribing patterns are monitored by the Pharmacy benefit manager. Several procedures, such as prior authorization, age limits, and quantity limits, have been established to support safe prescribing patterns and to provide optimal clinical outcomes for members.

What is prior authorization?

Prior authorization is a requirement that your provider obtain approval from your health plan for coverage of, or payment for, prescription drugs. AmeriHealth Administrators requires prior authorization of certain covered drugs to confirm that the drug prescribed is medically necessary, clinically appropriate, and is being prescribed according to FDA approved labeled or medically accepted use. The approval criteria were developed and approved by the Pharmacy and Therapeutics Committee, a group of physicians and pharmacists from the area. Using these approved criteria, clinical pharmacists evaluate requests for these drugs based on clinical data, information submitted by the member's provider, and the member's available prescription drug therapy history. The clinical pharmacists' evaluation may include a review of potential drug-drug interactions or contraindications, appropriate dosing and length of therapy, and utilization of other drug therapies, if necessary.

Please note, coverage of certain drugs on the formulary (e.g., weight loss drugs) requires a benefit rider. Please contact the health insurance plan for member eligibility information and benefit details.

Claim dollar limits are placed to require review for clinical appropriateness on prescription claims exceeding a defined dollar limit threshold. The member's provider will need to submit a prior authorization request to any claim exceeding \$10,000.

Without prior authorization, the member's prescription will not be covered at the retail or mail-order pharmacy. The prior authorization review process may take up to two business days once complete information from the provider has been received. Incomplete information may result in a delayed decision. Prior authorization approvals for some drugs may have a limited timeframe, for example six to twelve months. If the prior authorization approval for a drug is limited to a certain timeframe, an expiration date will be given at the time the approval is made. If the provider wants a member to continue the drug therapy as requested after the expiration date, a new prior authorization request will need to be submitted and approved for coverage to continue.

Safety Edits

Safety edits are applied to prescription medications to ensure safe and appropriate use of drugs. They are designed to align with the clinical practice guideline and FDA approved use outlined in the manufacturer package insert. Some of these safety edits will prompt member counseling at the point of sale, while some will require prior authorization review. Safety edits include age limits, quantity limits, morphine milligram equivalent (MME) limits, and concurrent drug utilization review (cDUR). Each safety edit is described below.

Age Limits

Some drugs, such as zafirlukast, are approved by the FDA only for individuals age five and older. If the member's prescription falls outside of the FDA guidelines, it may not be covered unless prior authorization is obtained. In addition, an age limit may be applied when certain drugs are more likely to be used in certain age groups. For example, drugs to treat Alzheimer's disease may require prior authorization for use in young adults. The provider may request coverage for drugs outside of the age limit when medically necessary. The approval criteria for this review were developed and approved by the Pharmacy and Therapeutics Committee. The member should contact the provider to initiate the prior authorization process.

Quantity Limits

Quantity limits are designed to allow a sufficient supply of medication based upon FDA-approved maximum daily doses, standard dosing, and/or length of therapy of a drug. AmeriHealth Administrators has several different types of quantity limits that are explained in detail below. The purpose of these limits is to ensure safe and appropriate utilization. If a member requires more than the limit, the member's provider will need to submit a prior authorization request. Similar to other prior authorization requests, quantity limit override requests for certain drugs may have a limited approval timeframe.

- **Quantity Over Time:** This quantity limit is based on dosing guidelines over a rolling time period. For example, if a drug has a quantity limit over a 30-day time period and a member went to the pharmacy on January 1, 2025, for one of these medications, the plan would have looked back 30 days to December 2, 2024, to see how much medication was dispensed. The purpose of these limits is to prevent the dispensing of excessive quantities. Examples of quantity limits over time are:
 - Etonogestrel-ethinyl estradiol (Nuvaring[®]) = 1 ring per 28 days
 - Ibandronate (Boniva[®]) 150mg = 1 tablet per 30 days
 - Sumatriptan (Imitrex[®]) 50mg = 18 tablets per 30 days
 - Diabetic supplies such as blood glucose test strips = 200 strips per 30 days
 - Sildenafil (Viagra[®]), tadalafil (Cialis[®] 10mg, 20mg) = 8 tablets per 30 days
- **Maximum daily dose:** This quantity limit defines the maximum number of units of the drug allowed per day. Examples of maximum daily dose quantity limits are:
 - Zolpidem (Ambien[®]) = 1 tablet per day
 - Oxycodone/acetaminophen (Percocet[®]) 5/325mg = 12 tablets per day
 - Guanfacine Extended Release 24 Hour = 1 tablet per day
- **Refill too soon:** This limit is in place to encourage appropriate utilization and minimize stockpiling of prescription medications. Based on this edit, a member can receive a refill of a prescription after 75% utilization. Additional refills will be covered once 75% of the supply has been consumed. The following examples illustrate how refill too soon limit works:
 - A 30 days' supply of a prescription filled on 1/1/2025 will be refillable again on or after 1/24/2025
 - A 90 days' supply of a prescription filled on 7/1/2025 will be refillable again on or after 9/7/2025
- **Day Supply Limit:** This limit is based on the day supply and not the quantity. However, quantity limits may apply as well. Day Supply Limits apply to some classes of drugs, such as opioids. If a quantity limit applies, the member will also be limited to the maximum daily dose for that drug. The following are examples of drugs that have a day supply and a quantity limit:
 - Short acting opioids, such as oxycodone/acetaminophen 5mg/325mg
 - Day supply limit = Two 5 days' supplies limit per 60 days for adults, two 3 days' supply limit for children under 18 years of age.
 - Butalbital containing headache agents, such as butalbital/aspirin
 - Day supply limit = 5-day supply per 30 days
 - Quantity Limit = 6 tablets per 1 day
 - Maximum quantity allowed without prior authorization = 30 tablets (6 tablets per day for 5 days)

- Opioid containing cough and cold products, such as hydrocodone/homatropine
 - Day supply limit = Two 5-days' supplies limit per 60 days for adults, and two 3 days' supply limit for children under 18 years of age
 - Quantity Limit = 30ml per 1 day
 - Maximum quantity allowed without prior authorization = 150ml (30ml per day for 5 days)

Morphine Milligram Equivalent (MME) Limit

AmeriHealth Administrators applies additional safety measures to opioid products by limiting the total daily dose. This limit accounts for various opioid products through a measurement called the Morphine Milligram Equivalent (MME) dose. The MME is a number that is used to determine and compare the potency of opioid medications. It helps to identify when additional caution is needed. The daily limit is calculated based on the number of opioid drugs, their potencies and the total daily usage. Prior authorization is required for an opioid dose that exceeds 90 MME per day. MME Limit applies to the opioid products containing the active ingredients listed below:

Active Ingredient			
codeine	dihydrocodeine	fentanyl	hydrocodone
hydromorphone	levorphanol	meperidine	methadone
morphine	Opium	oxycodone	oxymorphone
tapentadol	Tramadol	benzhydrocodone	

Cumulative Stimulant Limit

Central nervous system (CNS) stimulants such as amphetamine and methylphenidate, when used in high doses, are associated with increased risk for cardiac related adverse events such as hypertension and new or worsening psychosis including manic behavior. Cumulative stimulant limit is a safety measure designed to ensure the provider has assessed the members for alternative medication and advised the members about the risks associated with stimulant use. The cumulative stimulant limit works by calculating the total daily stimulant dose by the drug's active ingredient. Stimulant claims that exceed the limit outlined below would require prior authorization.

Active ingredient	Medications impacted (brands and generics)	High cumulative daily dose
Amphetamine	Adzenys [®] ER[ODT], Dyanavel [®] , Evekeo [ODT]	60mg/day
Amphetamine-Dextroamphetamine	Adderall [®] [IR/XR], Mydayis [®]	60mg/day
Dextroamphetamine	Dexedrine [®] , Zenzedi [®] , ProCentra [®] , Xelstrym [®]	60mg/day
Lisdexamfetamine	Vyvanse [®]	70mg/day
Methamphetamine	Desoxyn [®]	60mg/day
Dexmethylphenidate	Focalin [®] [IR/XR]	40mg/day
Methylphenidate	Ritalin [®] [IR/LA], Daytrana [®] , Cotempla [®] , Metadate [®] [ER/CD], Methylin [®] , Quillivant [®] XR, Concerta [®] , Aptensio [®] XR, QuilliChew ER [®] , Jornay PM [™] , Adhansia [®] XR, Relexxii [®]	72mg/day
Serdexmethylphenidate	Azstarys [™]	52.3mg/day

*Prior authorization and other safety edits including quantity limit and age limit continue to apply.

Concurrent Drug Utilization Review (cDUR)

These reviews are built into the pharmacy claim adjudication system to review a member's prescription history for possible drug related problems including drug-drug interactions and drug therapy duplications. Drugs may reject at the Point-of-Sale (POS) and/or generate a message to the dispensing pharmacist when there is a safety concern. The dispensing pharmacist can review the issue with the provider and override the rejection if appropriate for most edits. Examples of cDURs are:

- Drug-drug interaction: sildenafil (Viagra[®]/Revatio[®]) and nitroglycerin in combination may lead to potentially fatal hypotension.
- Drug therapy duplication: Simvastatin and atorvastatin in combination will trigger a message in the claim adjudication system to alert the dispensing pharmacist there is a duplication of statin therapy.

To determine if a covered prescription drug prescribed for you has a prior authorization requirement, an age limit, a quantity limit, or a morphine milligram equivalent (MME) limit, see the plan website at <https://www.ahatpa.com/html//health-care-providers/index.html?/#prescription-drug-info> or call your pharmacy benefit manager at the phone number on the back of your ID card.

How to submit a Prior Authorization?

Here is the process to request a prior authorization/preapproval or override:

1. The provider prescribing the drug can access electronic prior authorization (ePA) platforms such as CoverMyMeds[®] and SureScripts[™] to submit a prior authorization request. Alternatively, the provider can complete a prior authorization fax form or write a letter of medical necessity and submit it to your pharmacy benefit manager by fax at 1-888-671-5285. The forms are available online at: <https://www.ahatpa.com/html//health-care-providers/index.html?/#prescription-drug-info>.
2. The pharmacy benefit manager will review the prior authorization request or letter of medical necessity. If a clinical pharmacist cannot approve the request based on established criteria, a medical director will review the document.
3. A decision is made regarding the request.
 - If approved, the provider will be notified of the approval via fax and/or telephone, and the pharmacy claim adjudication system will be coded with the approval. Note: ePA approval can occur in real time, this means the member can be approved for the drug prior to leaving the provider's office with a prescription. The member may call the Customer Service phone number on his or her ID card to determine if the request is approved.
 - If denied, the prescribing provider will be notified via letter, fax, or telephone. The member is also notified via letter. The appeals process is detailed within the denial letters sent to the member and provider.

Formulary exception requests

Tier exceptions: Providers may request consideration for preferred coverage of a non-preferred drug when there has been a trial of, or contraindication to, at least three formulary alternatives when applicable.

- Requests for a generic medication that is located on the non-preferred drug tier to be lowered to the generic tier will be approved if the exception criteria are met.
- Requests for a brand medication or an authorized generic (also referred to as authorized brand alternative) non-preferred that is located on the non-preferred drug tier to be lowered to the preferred brand tier will be approved if the exception criteria are met.

Please note, restrictions apply to formulary exception requests. Drugs on the generic tier, the preferred brand tier and the specialty tier are not eligible for tier exceptions. Tier exceptions are not available under some plans; please refer to the member benefit booklet for details.

When requesting an exception, the provider should complete the formulary exception request form, providing detail to support the request, and fax the request to 1-888-671-5285. If the formulary exception request is approved for a non-preferred drug, the drug will pay at the appropriate preferred brand or generic level of cost-sharing. If the request is denied, the member and provider will receive a denial letter with the appropriate appeals language.

Appealing a decision

If a request for prior authorization or exception results in a denial, the member, or the provider on the member's behalf (with the member's consent), may file an appeal. Both the member and his or her provider will receive written notification of a denial, which will include the appropriate telephone number and address to direct an appeal. To assist in the appeals process, it is recommended that the provider be involved to provide any additional information on the basis of the appeal.

Prior authorization applies to all formulations of the following specific drugs, including but not limited to, tablet, capsule, and oral suspensions.*+

Abilify [®]	Airsupra [®] AER	ArmonAir [™]	bexagliflozin
Abilify Mycite [®]	Ajovy [®]	RespiClick [®]	bexarotene
Maintenance/Starter	Akeega [™]	Arthrotec [®]	Bimzelx [®] Inj
Pak	Aklief [®]	Arymo [™] ER	Binosto [®]
abiraterone	Aktipak [™]	Asacol [®] HD	Boniva [®]
Abrilada [™]	Ala-Scalp [®]	Asmanex [®]	Bonjesta [®]
Absorica [®]	Alecensa [®]	Asmanex [®] HFA	bosentan
Absorica LD [™]	Alkindi [®] Sprinkle	Atacand [®] (HCT)	Bosulif [®]
Abstral [®]	Allopurinol 200mg Tab	Ativan [®]	Brand prenatal vitamins ¹
Acanya [®]	Alocril [®]	Atorvaliq [®]	Bravelle [®]
Accrufer [®]	Alora [®]	Atralin [®]	Breeze [®] 2 test strips/ glucometer
Accupril [®]	Alphagan [®] P	Aubagio [®]	Brenzavvy [®]
Aciphex [®]	Alphanate [®]	Augtyro [™]	Brexafemme [®]
Actemra [®] SC	Alphanine [®] SD	Austedo [®] [XR]	Breynta [™]
Acticlate [®]	Alprolix [®]	Auvelity [™]	Briviact [®]
Actimmune [®]	Alex [®]	Auvi-Q [®] 0.15mg, 0.3mg	BromSite [®]
Actiq [®]	Altanax [™]	Avapro [®] /Avalide [®]	Bronchitol [®]
Actonel [®]	Altace [®]	Aveed [®]	Brukinsa [™]
Actos [®]	Altoprev [®] ER	Avita [®]	Budesonide-formoterol
Aczone [®]	Altuviio [®]	Avodart [®]	Butal/Apap Tab
Adalimu-AACF Inj	Alunbrig [™]	Axert [®]	25-325mg
Adalimu-AATY Kit	Alvaiz [™]	Axiron [®]	butalbital-acetaminophen
Adalimu-Adaz Inj	Alvesco [®]	Ayvakit [™]	50-300mg
Adalimu-RYVK Inj	Amaryl [®]	azelastine/fluticasone	Buphenyl [®]
Adalimumab-AATY Inj	Ambien [®]	spray	buprenorphine patch
Adalimumab adbm/fkjp	Ambien CR [®]	Azelex [®]	Bupropion ER 450mg
Adalimumab Kit	Amerge [®]	Azopt [®]	Butrans [®]
Adalimumab Kit 40/0.8ml	Amitiza [®]	Azor [®]	Bydureon BCise [®]
Adalimumab-ADBM	Amjevita [™]	Azstarys [™]	Byetta [®]
Crohns/UC/HS Starter	amphetamine ER susp	Azulfidine [®]	Bylvay [™]
Adalimumab-ADBM	amphetamine	Baclofen soln	Bynfezia Pen [™]
Psoriasis/Uveitis Starter	(generic Evekeo)	baclofen sus 25mg/ml	Bystolic [®]
adapalene pad	Ampyra [®]	Banzel [®]	Byvalson [™]
Adbry [™] Inj	Amrix [®]	Bebulin [®]	Cabometyx [™]
Adcirca [®]	Amzeeq [®]	Beconase AQ [®]	Cabtreo [®] Gel
Adderall [®] [XR]	Anaprox [®] DS	Belbuca [™]	Caduet [®]
Addyi [®]	Anafranil [™]	Belsomra [®]	Calcipotriene foam
Adempas [®]	Androderm [®]	Belviq [®] [XR]	Calquence [®]
Adhansia [™] XR	Androgel [®]	BeneFIX [®]	Cambia [®]
Adlarity [®]	Angeliq [®]	Benicar [®]	Camzyos [™]
Adlyxin [®]	Anusol-HC [®] Cream	Benicar HCT [®]	Canasa [®] Supp
Advair Diskus [®]	Aplenzin [™]	Benlysta [®]	Capex [®]
Advate [®]	Apokyn [®]	Benzaclin [®]	Caplyta [™]
Adynovate [®]	apomorphine inj	Benzamycin [®]	Caprelsa [®]
Adzenys [™] XR-ODT	Aptensio XR [®]	Benzamycinpak [®]	Carac [®]
Aerospan [™]	Aptiom [®]	benzphetamine	Carafate [®] Tab/Susp
Afinitor [®]	Arava [®]	Bepreve [®]	Carbaglu [®]
Afrezza [®]	Arazlo [™] lotion	Berinert [®]	Carbatrol [®]
Afstyla [®]	Aricept [®]	Besremi [®]	Cardizem [®]
Agamree [®]	Arikayce [®]	Bethkis [®] Neb	Cardizem [®] CD
AirDuo [®] Digihaler [®]	Arimidex [®]	Betoptic-S [®]	Cardizem [®] LA
AirDuo [®] RespiClick [®]	ArmonAir [™]	Bevespi Aerosphere [™]	
	Digihaler [®]		

Cardura® [XL]
 carglumic
 CaroSpir®
 Cataflam®
 Caverject®
 Cayston™
 Celebrex®
 Celexa®
 Cequa™
 Cerdelga™
 Cholbam®
 Cialis®
 Cibirgo™
 Ciclodan®
 Cimzia®
 Cinryze®
 Citalopram 30mg Cap
 Clarinex®
 Clarinex-D®
 clemastine syrup
 Cleocin®
 Cleocin T®
 Clindagel®
 clindamycin/benzoyl
 peroxide 1%/5%
 clobazam
 Clobex®
 Cloderm®
 clonidine ER 24HR tab
 clovique
 Coagadex®
 Colazal®
 colchicine 0.6mg capsule
 Colcrys®
 Colestid®
 Combigan®
 Cometriq™
 Concerta®
 Conjupri®
 Contrave ER®
 Conzip™
 Copaxone®
 Cordran®
 Coreg®
 Coreg® CR
 Corifact®
 Corlanor®
 Cosentyx™
 Cosopt®
 Cotellic™
 Cotempla XR ODT™
 Coxanto™
 Cozaar®/Hyzaar®
 Cresemba®
 Crestor®
 Crinone® Gel 8%
 Cuprimine®
 Cutivate®
 Cuvrior™
 cyanocobalamin spray
 cyclobenzaprine ER
 Cystadrops®
 Cystaran™
 Cyltezo® Inj
 Daklinza™
 Dapagliflozin pro-
 metformin ER
 Dapagliflozin propanediol
 Dapsone Gel
 Dartisla ODT™
 Daybue™
 Daypro®
 Daytrana™
 Dayvigo™
 DDAVP®
 deferasirox tab/granules
 deferiprone tab
 deflazacort
 Degludec Flextouch
 Delatestryl®
 Delzicol®
 Demerol®
 Depo®-Estradiol Oil
 Desonate®
 Desowen®
 Desoxyn®
 Detrol®
 Detrol® LA
 dexchlorpheniramine soln
 Dexcom® Receiver,
 Sensor, Transmitter
 Dexedrine®
 Dexilant™
 dexlansoprazole
 dexlansoprazole DR
 D.H.E.® 45
 Dhivy®
 Diabetic test strips²
 Dibenzyliline®
 dichlorphenate tab
 Diclegis®
 diclofenac cap 25mg
 Diclofenac cap 35mg
 diclofenac gel 3%
 diclofenac soln 2%
 diethylpropion HCL
 Differin®
 Diflucan® susp/tab
 dihydroergotamine
 Dilaudid®
 Diovan® (HCT)
 Ditropan XL®
 Dojolvi™
 Dolophine®
 Doral®
 Doryx® DR
 Doryx® MPC
 doxepin tablet
 doxycycline DR 40mg
 Doxycycline Hyclate DR
 80mg
 Doxycycline Hyclate Tab
 50mg
 doxylamine-pyridoxine
 Drizalma Sprinkle™
 droxidopa
 Duac®
 Duaklir®
 Duetact®
 Dulera®
 Duobrii™
 Dupixent®
 Duragesic®
 Durlaza®
 Duvyzat™
 Duzallo®
 Dyanavel XR™
 Dymista®
 EC-Naprosyn®
 Ecoza™
 Edarbi™
 Edarbyclor™
 Edex®
 Edluar™
 Effexor XR®
 Effient®
 Elepsia™ XR
 Elidel®
 Elmiron®
 Eloctate™
 Elyxyb™
 Embeda®
 Emflaza™
 Emgality®
 Empaveli™ Inj
 Enbrel®
 Endari™
 Enspryng™
 Entadfi™
 Entocort® EC
 Entresto™
 Entyvio® Inj
 Eohilia™
 Epclusa®
 Epidiolex®
 EpiPen®
 EpiPen® Jr.
 Eprontia™
 Epsolay®
 Erivedge™
 Erleada®
 erlotinib
 Ermeza™
 Ertaczo®
 Esbriet®
 Esgic® cap/tab
 esomeprazole
 esomeprazole granules
 Esperoct®
 Estrace® Cream
 eszopiclone 3mg
 Eucrisa™
 Eulexin®
 Evekeo™
 everolimus
 (generic for Afinitor)
 Eversense® Sensor
 Eversense® Transmitter
 Evista®
 Evoclin® foam
 Evoxac®
 Evrysdi™
 Evzio™
 Exalgo™
 Exelder®
 Exforge® (HCT)
 Exjade®
 Exkivity™
 Extavia®
 Extina®
 Ezetimibe/Atorvastatin
 Ezetimibe/Rosuvastatin
 Ezzalor™ Sprinkle Cap
 Fabhalta®
 Fabior®
 Factive®
 Fanapt™
 Farydak®
 Fasenra®
 febuxostat
 Feiba®
 Felbatol®
 Femring®
 fentanyl citrate-OTFC
 Fentanyl citrate tablet
 fentanyl transdermal
 Fentora®
 Ferriprox®
 Fetzima™
 Filspari™
 Filsuvez®
 Fintepla®
 Fioricet® Cap
 Fioricet® with Codeine
 (continued)

Fiorinal [®] with Codeine	Helixate [®] FS	Iqirvo [®]	Latuda [®]
Firazyr [®]	Hemangeol [®] Soln	Iressa [®]	Lazanda [®]
Flector [®] patch	Hemlibra [®] Soln	Isturisa [®]	ledipasvir-sofosbuvir
Fleqsuvy [™] Susp	Hemmorex-HC [®] Supp	Iwilfin [™]	lenalidomide
Flomax [®]	Hemofil [®] M	Iyuzeh [™]	Lenvima [™]
Flovent [®] Diskus [®]	Hetlioz [™]	Ixinity [®]	Lescol [®] XL
Flovent [®] HFA	Horizant [™]	Jadenu [™] tab/granules	Letairis [®]
Fluticasone HFA AER	Hulio [®] Inj	Jakafi [™]	Leukeran [®]
fluticasone propionate diskus	Humate-P [®]	Jalyn [™]	Levamlodipine
Fluticasone/Salmeterol AER	Humatrope [®]	Jatenzo [®]	Levemir [®]
Flutic/Vilan INH	Humira [®]	Javygtor [™]	Levitra [®]
Focalin [®] XR	Hycamtin [®]	Jaypirca [™]	levothyroxine cap
ForFivo XL [®]	hydrocodone ER	Jesduvroq [®]	Lexapro [®]
Fortamet [®]	hydromorphone ER	Joenja [®]	Lexette [®]
Forteo [™]	Hyftor [™]	Jornay [™] PM	Libervant [™]
Fortesta [™]	Hyrimoz [®]	Jublia [®]	Librax [®]
Fotivda [®]	Hysingla [™]	Juxtapid [™]	Licart [™]
FreeStyle Libre Reader, Sensor, Reader Device	Ibrance [®]	Jylamvo [®]	Lidoderm [®]
FreeStyle test strips/ glucometer	Ibsrela [®]	Jynarque [®]	Likmez [®]
Frova [®]	Ibudone [®]	Kadian [®]	Lipitor [®]
Fruzaqla [®]	icatibant inj	Kalydeco [™]	Liqrev [®]
Fulyzaq [™]	Iclusig [™]	Kapvay [®]	Liraglutide Inj
Fuzeon [®]	Idacio [®] Inj	Katerzia [™]	Litfulo [™]
gabapentin tab	Idelvion [®]	Kazano [®]	Livalo [®]
Gattex [®]	Idhifa [®]	Kenalog [™]	Livmarli [®]
Gavreto [®]	imatinitib mesylate	Keppra [®]	Livtencity [™]
gefitinib	Imbruvica [™]	Kerendia [®]	Locoid [®]
Gelnique [®]	Imcivree [™]	Kerydin [™]	Locoid [®] lipocream
Gemtesa [®]	imiquimod cream/pump	ketoprofen cap	Lodoco [®]
Genotropin [®]	Imitrex [®]	Ketorolac Tromethamine	Lonhala [™] Magnair [™]
Geodon [®]	Impeklo [™]	Keveyis [™]	Lonsurf [®]
Gilenya [®] 0.5mg	Impoyz [™]	Kevzara [®]	Loprox [®]
Gilotrif [™]	Inbrija [®]	Khedezla [®]	Lorbrena [®]
Gimoti [™]	Increlex [®]	Kineret [®]	Loreev XR [™]
Gleevec [®]	Incruse [®] Ellipta [®]	Kisqali [™]	Lortab [®]
Gloperba [®]	Inderal [®] LA	Kitabis [®] Pak Neb	Lorzone [®]
Glucagen [®] Hypokit [®]	indomethacin 20mg	Klisyri [®]	Lotrel [®]
Glucagon Emergency Kit (Lilly)	Ingrezza [™]	Klonopin [®]	Lotronex [®]
Glucotrol [®] XL	Inlyta [®]	Koate [®] -DVI	Lovaza [®]
Gocovri [®]	Innopran [®] XL	Kogenate [®] FS	Lucemyra [™]
Golytely [®]	Iopidine [®]	Kombiglyze [™] XR	Luliconazole
Gonal-f [®]	Inpefa [™]	Konvomep [™]	Lumakras [™]
Gralise [™]	Inqovi [®]	Korlym [™]	Lumryz [®] Pak
Grastek [®]	Inrebic [®]	Koselugo [™]	Lunesta [®]
Gvoke [™] HypoPen [®]	Inspra [®]	Kovaltry [®] Sol	Lupkynis [™]
Gvoke [™] PFS Inj	Istalol [®]	Krazati [®]	Luxiq [®]
Hadlima [™]	insulin aspart	Kristalose [®] Pak	Luzu [®]
Haegarda [®]	insulin aspart protamin	Kuvan [®]	Lybalvi [®]
Halcion [®]	Insulin Degludec	Kynamro [®]	LymePak [™]
Halog [®]	insulin glargine	Kynmobi [™] Mis/Kit	Lynparza [™]
Harvoni [™]	Intermezzo [®]	Kyzatrex [™]	Lyrica [®] Cap
	Intrarosa [®]	Lactulose Pak	Lyrica [®] CR
	Intuniv [™]	Lamictal [®] (ODT)	Lyrica [®] Soln
	Invega [™]	Lansoprazole Solutab	Lytgobi [®]
	Invokamet [®] [XR]	lapatinib	Lyvispah [™]
	Invokana [®]	Lastacaft [®]	Mavenclad [®]

Mavyret™	Nascobal®	Ojemda™	Palforzia™ cap/powder
Maxalt® (MLT)	Nasonex®	Ojjaara™	Pamelor™
Mekinist®	Natesto™	Olpruva™ Pak	Pancreaze®
meloxicam cap	Natpara®	Olumiant®	Pandel®
Meloxicam susp	Nayzilam®	Olux®[E]	Panretin®
Menopur®	Nerlynx™	Omnitrope®	pantoprazole pak
Mestinon®	Nesina®	OmvoH™ Inj	Patanase®
Metadate CD®	Nestabs® One	OneTouch® Glucometers	Paxil® [CR]
metaxolone tab	Neupro®	OneTouch® Test Strips	pazopanib
Metformin 625mg	Neurontin®	Onexton®	Pegasys®
Metformin HCL ER	Nexavar®	Onfi®	Pemazyre™
(OSM)	Nexiclon™ XR	Ongentys®	penicillamine capsule
methadone	Nexium®	Onglyza®	Penlac®
Methadose™ concentrate	Nexletol™	Onmel™	Pennsaid®
[SF]	Nexlizet™	Onureg®	Pentasa® 500mg
Methitest™	Ngenla™ Inj	Onzetra Xsail™	Pepcid®
methylphenidate ER (XR)	Niaspan® ER	Opana®	Percocet®
methyltestosterone	Ninlaro®	Opana ER®	Pertzye®
Micardis® (HCT)	nitisinone	Opsumit®	Pexeva®
Miconazole-zinc oint	Nityr®	Opsynvi®	Pheburane® Mis
mifepristone	Noctiva™	Opzelura™	phendimetrazine tartrate
miglustat	Non Preferred Diabetic	Oracea®	Phoslyra®
Migranal®	Meters	Oralair®	Picato®
Millipred®	Norco®	Orencia® SQ	Piqray®
Minivelle®	Norditropin®	Orenitram™	pirfenidone
Minocin®	Norgesic™	Orfadin®	Plaquenil®
minocycline ER cap	Norgesic™ Forte	Orgovyx™	Plavix®
Mitigare®	Norliqva®	Oriahm®	Plenvu®
Mobic®	Northera™	Orilissa®	Pogo Automatic®
mometasone furoate	Norvasc®	Orkambi™	Mis Monitor
Monoclate-P®	Nourianz™	Orladeyo™	Pogo Automatic®
Monodox®	Novoeight®	orlistat cap	Test Cartridge
Mononine®	Novolin® Relion	Ormalvi™	Pokonza™ Pow 10meq
Monurol®	Novolog® Relion	orphenadrine-asa-caffeine	Pomalyst®
MorphaBond™ ER	Novoseven® RT	Orphengesic® Forte	Ponvory™
morphine ER	Noxafil®	Orserdu™	Pradaxa® Pak
Motegrity™	Nubeqa™	Ortikos™	Praluent®
Motpoly™ XR	Nucala® Soln	Oseni®	Pramosone®
Mounjaro®	Nucynta®	Osmoprep®	Precision Glucometer
Movantik®	Nucynta ER®	Otezla™	Precision XTRA®
MoviPrep®	Nuedexta™	Otrexup™	Test Strips
MS Contin®	Nulibry™	Oxaprozin 300mg cap	Pred Forte®
Mulpleta®	Nulytely®	Oxaydo®	pregabalin ER tab
Muse®	Nuplazid™	Oxbryta™	Pretomanid®
Myalept™	Nurtec™ chw ODT	oxiconazole nitrate	Prevacid®
Mycapssa®	Nutropin® (AQ)	Oxistat®	Prilosec®
Mydayis™	Nuessa™	Oxtellar® XR	Primlev™
Myfembree®	Nuvigil®	oxycodone/	Pristiq™
Mysoline™	Nuwiq®	acetaminophen	ProAir® Digihaler™
Mytesi™	Nuzyra®	oxycodone/APAP tab	Proctocort® Supp 30mg
Nalfon®	Obizur®	oxycodone ER	Procysbi®
Nalocet®	Ocaliva™	Oxycontin®	Profilnine®
Naprelan®	Odactra® SL	oxymorphone ER	Prolate™
Naprosyn®	Odomzo®	Oxytrol® Patch	Prolensa®
naproxen sodium ER	Ofev®	Ozempic®	Promacta®
750mg	Ogsiveo™	Ozobax™	Protonix®

Protopic [®]	Rinvoq [™]	Sodium Oxybate Sol	Tasigna [®]
Proventil [®] HFA	Risperdal [®]	sodium phenylbutyrate	tasimelteon
Provigil [®]	Ritalin [®] LA	sofosbuvir-velpatasvir	tavaborole soln 5%
Prozac [®]	Ritalin [®] Tab	Sogroya [®]	Tavneos [®]
Pulmicort Respules [®]	Rixubis [™]	Sohonos [™]	tazarotene AER
Pyrukynd [®]	Roszet [®]	Solaraze [®] Gel	Tazorac [®]
Qdolo [®]	Roxicodone [®]	Solodyn [®]	Tazverik [™]
Qelbree [™]	RoxyBond [™]	Solosec [®] Gra	Tecfidera [®]
Qinlock [™]	Rozerem [®]	Somavert [®]	Technivie [™]
Qnasl [™]	Rozlytrek [™]	Sonata [®]	Tegretol [®] [XR]
Qsymia [®] ER	Rubraca [®]	sorafenib	Tekturna [®] (HCT)
Qtern [®]	Ruconest [®]	Sorilux [®]	Temodar [®] Oral
Qudexy [®] XR	rufinamide	Sotyktu [™]	temozolomide
Questran [®] Light	Rukobia [®]	Sovaldi [™]	Tenoretic [®]
Questran [®] Packet/Powder	Ruzurgi [®]	Sovuna [™]	Tenormin [®]
Qulipta [™]	Ryaltris [®] Spray	Spevigo [®]	Tepmetko [®]
QuilliChew ER [™]	Rybelsus [®]	Spritam [®] OD	Teriparatide [®] inj
Quillivant XR [™]	Ryclora [™]	Sprix [®]	Testim [®]
Quviviq [™]	Rydapt [®]	Sprycel [®]	Tetracycline tab
Qvar RediHaler [®]	Rytary [™]	Staxyn [™]	Texacort [®]
rabeprazole	Rythmol SR [®]	Steglatro [™]	Tezspire [®] Inj
Radicava ORS [®]	Sabril [®]	Steglujan [™]	Thalomid [®]
Ragwitek [™]	Saizen [®]	Stelara [®]	Thyquidity [™]
Rapaflo [®]	sajazir inj	Stendra [™]	Timoptic [®]
Rasuvo [™]	Samsca [™]	Stivarga [®]	Tiotropium bromide cap 18mcg
Ravicti [™]	Sancuso [®]	Strattera [™]	Tirosint [®]
Rayaldee [®]	Saphris [®]	Strensiq [™]	Tivorbex [®]
Rayos [®]	sapropterin pow/tab	Striant [®]	Tlando [™]
Rebif [®] Rebidose [®]	Saxenda [®]	Subsys [®]	Tobi [®] Neb
Rebinyn [®]	Secuado [®]	Sucraid [®]	tolvaptan
Recombinate [™]	Seglentis [®]	sulconazole	Topamax [®] Sprinkle
Recorlev [®]	Segluromet [®]	sumatriptan/naproxen	Topamax [®] tab
RediTrex [®]	Semglee [™]	sunitinib	Topicort [®]
Regimex [®]	Sensipar [®]	Sunosi [™]	topiramate ER sprinkle
Regranex [®]	Sernivo [™]	Sutent [®]	Tosymra [™]
Relafen [™]	Seroquel [®] [XR]	Sylatron [™]	Toviaz [™]
Relafen [™] MDS	Serostim [®]	Symbyax [™]	Tracleer [®]
Relexxii [®]	Sertraline Caps	Symdeko [®]	tramadol soln 5mg/ml
ReliOn [®]	Sevenfact [®]	Symlin [®]	Tremfya [™]
Relistor [®]	Signifor [®]	Sympazan [™] Film	Tresiba [®]
Relpax [®]	sildenafil	Synalar [®]	tretinoin caps
Reltone [™]	Silenor [®]	Syprine [®]	Tretten [®]
Relyvrio [™] Pak	Siliq [™]	Tabrecta [™]	Treximet [™]
Repatha [™]	Simlandi [®]	tadalafil (generic Adcirca)	triamcinolone 0.05% ointment
Rescula [®]	Simponi [™]	Tadliq [®]	Trianex [®]
Restoril [®]	Singulair [®]	Tafinlar [®]	Tribenzor [®]
Retevmo [™]	Sirturo [™]	Tagrisso [™]	Tridacaine [™]
Retin-A [®] (Micro)	Sitagliptin	Takhzyro [®]	trientine
Revatio [™]	Sitagliptin-Metformin	Taltz Autoinjector [®]	Trikafta [®]
Revlimid [®]	Sivextro [™]	Talzenna [®]	Trikafta [®] Pak
Reyvow [™]	Skelaxin [®]	Tanzeum [™]	Trileptal [®] tab/susp
Rezdiffra [™]	Skyclarys [™]	Tarceva [®]	Trilipix [®]
Rezlidhia [™]	Skyrizi [™]	Targadox [™]	Trintellix [®]
Rezurock [™]	Skytrofa [®]	Targetin [®]	Tritocin [™]
Riastap [®]	Soanz [®]	Tarpeyo [™]	
Rivfloza [™]		Tascenso ODT [™]	

Trokendi [®] XR	Veozah [®]	Winlevi [®]	Zeposia [®]
Trudhesa [™]	Verdeso [®]	Winrevair [™]	Zerviate [™]
Trulance [™]	Veregen [®]	Xadago [™]	Zestril [®]
Trulicity [®]	Verelan [®] ER, PM	Xalkori [®]	Zetia [®]
Truqap [™]	Verkazia [®]	Xanax [®] [XR]	Ziana [®]
Truseltiq [™]	Verquvo [®]	Xcopri [®] pak/tab	Zilbrysq [®]
Tudorza [®] Pressair [®]	Verzenio [™]	Xdemvy [®]	zileuton ER tab
Tukysa [™]	Vesicare [®]	Xeljanz [®] [XR]	Zilxi [™]
Turalio [™]	Vevye [®]	Xelpros [™]	Zioptan [™]
Twyneo [®]	Viagra [®]	Xelstrym [™]	Zipsor [™]
Twynsta [®]	Viberzi [™]	Xenazine [™]	Zituvio [™]
Tyenne [®]	Vibramycin [®]	Xenical [®]	Zmax [™]
Tykerb [®]	Victoza [®]	Xerese [®]	Zocor [®]
Tylenol [®] w/Codeine	Viekira Pak [™]	Xermelo [™]	Zohydro [®] ER
Tymlos [™]	vigabatrin tab/packet	Xhance [™] MIS 93mcg	Zokinvy [®]
Tyvaso [®]	vigadrone	Xifaxan [®]	Zolinza [®]
Ubrelvy [™]	Viibryd [®]	Xiidra [™]	zolmitriptan spray
Uceris [®]	Vijoice [®]	Ximino ER [™]	Zolofit [®]
Ukoniq [®]	Vivelle Dot [®]	Xodol [®]	Zolpidem 10mg
Uloric [®]	Vivjoa [®]	Xolair [®]	Zolpidem Cap
Ultracet [®]	Vivlodex [™]	Xolegel [®]	Zolpidem ER 12.5mg
Ultram [®]	Vogelxo [®]	Xolremdi [™]	Zolpidem SL 3.5mg
Ultravate [®]	Voltaren XR [®]	Xopenex HFA [®]	Zomacton [™]
Upneeq [®]	Vonjo [™]	Xopenex [®] Soln	Zomig [®] (ZMT)
Uptravi [®]	Vonvendi [®]	Xphozah [®]	Zomig Nasal Spray
Uroxatral [®]	Voquezna [®] Tabs	Xpovio [™] Pak	Zonegran [®]
Urso [®] [Forte]	Vosevi [™]	Xtampza [®] XR	Zonisade [®]
Ursodiol cap	Votrient [™]	Xtandi [®]	Zorbtive [®]
Utibron [™] Neohaler	Vowst [®]	Xultophy [®]	Zorvolex [®]
Vagifem [®]	Voxzogo [™]	Xuriden [™]	Zoryve [®]
Valchlor [™]	Voydeya [™]	Xyntha [®]	Ztalmy [®]
Valium [®]	Vtama [®]	Xyrem [®]	Ztlido [™]
Valsartan Soln	Vuity [™]	Xywav [™]	Zurampic [®]
Valtoco [®]	Vusion [®]	yargesa	Zyclara [™] cream/pump
Valtrex [™]	Vyleesi [™]	Yuflyma [®] Pen/Syr	Zydelig [®]
Vandazole [®]	Vyndamax [®]	Yupelri [®]	Zyflo [®] Tab
Vanflyta [®]	Vyndaqel [®]	Yusimry [™]	Zykadia [®]
varденаfil [ODT]	Vytorin [™]	Zanaflex [®]	Zyloprim [®]
Vascepa [®]	Vyvanse [®]	Zavesca [®]	Zymfentra [™]
Vasotec [®]	Vyzulta [™]	Zavzpret [™] Nasal Soln	Zypitamag [™]
Vecamyl [™]	Wainua [™]	Zebutal [®]	Zyprexa [®]
Velphoro [®]	Wakix [®]	Zejula [™]	Zyprexa [®] Zydis [®]
Velsipity [™]	Wegovy [™] Inj	Zelboraf [®]	Zytiga [™]
Veltin [™]	Welchol [®]	Zelnorm [®]	Zyvox [®]
Venclexta [®]	Welireg [™]	Zembrace Symtouch [™]	
Venlafaxine Tab 112.5mg	Wellbutrin [®] SR	Zenedi [®]	
Ventavis [®]	Wellbutrin [®] XL	Zepatier [™]	
Ventolin [®] HFA	Wilate [®]	Zepbound [™]	

¹ All brand prenatal vitamins require prior authorization.

² All diabetic test strips require prior authorization except for Contour[®].

* Compound products with total cost equal to or greater than \$75 per prescription

+ Prescription claims exceeding the dollar limit threshold of \$10,000 per claim

Reading the formulary drug list

How can I tell if a drug is generic or brand?

The formulary gives you choices so you and your doctor can decide your best course of treatment. In this formulary, brand-name medications start with an uppercase letter and are written in bold. Generic medications are shown in lowercase and in italic.

Brand name Drug	Starts with UPPERCASE in Bold	Ex: Augmentin
<i>Generic drug</i>	<i>Lowercase italic</i>	<i>Ex: avidoxy</i>

Tier information

Tiers are the different cost levels you pay for a medication. Each drug on the formulary is in a tier. Below is a reference guide to use as you review your formulary to see the abbreviation for each drug tier on the formulary list.

Drug Tier	Abbreviation
Generic	G
Non-preferred drug	NPD
Specialty drug	SP
Low-cost generic	LCG
Preferred brand	PB
\$0 Preventive drug	ACA

Drug list requirements and/or limits

Some medications are noted with letters next to them to help you see which drugs may have coverage requirements and/or limits. Below is a reference guide to use as you review your formulary to see the abbreviation for each requirement/limit on the formulary list.

Requirements/Limits	Abbreviation
Prior Authorization	PA
Quantity Limits Apply	QL
Age Limit	AL
Limited Distribution Drug	LDD
Day Supply Limit	5DS
Requires Rider	R
Quantity Over Time	Q/T
Morphine Milligram Equivalent	MME

DRUG NAME +	DRUG TIER	REQUIREMENTS/ LIMITS
ANTIBIOTICS & OTHER DRUGS USED FOR INFECTION		
<i>abacavir sulfate tab, soln</i>	G	
<i>abacavir sulfate/ lamivudine</i>	G	
<i>abacavir/ lamivudine/ zidovudine</i>	G	
Acticlate	NPD	AL, PA
<i>acyclovir</i>	G	
<i>acyclovir 5% cream</i>	G	QL
<i>adefovir dipivoxil</i>	G	
Aemcolo DR	NPD	QL
<i>albendazole</i>	G	
Alinia	NPD	QL
Altabax	NPD	PA
<i>amoxicillin</i>	LCG	
Amoxicillin 775mg	PB	
<i>amoxicillin/ clavulanate</i>	G	
<i>amoxicillin/ clavulanate extended-release</i>	G	
<i>ampicillin</i>	G	
Amzeeq	NPD	PA
Ancobon	NPD	
Arakoda	NPD	
Arikayce	NPD, SP	PA
<i>atazanavir</i>	G	
<i>atovaquone</i>	G	
<i>atovaquone/ proguanil</i>	G	
Atripla	NPD	
Augmentin	NPD	
Augmentin XR	NPD	
Avelox	NPD	
<i>avidoxy</i>	G	

DRUG NAME +	DRUG TIER	REQUIREMENTS/ LIMITS
<i>azithromycin</i>	G	
Bactrim, Bactrim DS	NPD	
Baraclude	NPD	
Baxdela	NPD	QL
Benznidazole	NPD	
Bethkis Neb	NPD, SP	PA
Biaxin	NPD	
Biktarvy	NPD	
Biltricide	NPD	
Brexafemme	NPD	PA, QL
<i>cefaclor</i>	G	
<i>cefaclor ER</i>	G	
<i>cefadroxil</i>	G	
<i>cefdinir</i>	G	
<i>cefixime susp/cap</i>	G	
<i>ceftibuten</i>	G	
Ceftin	NPD	
<i>cefuroxime axetil</i>	G	
<i>cephalexin</i>	G	
<i>chlorhexidine gluconate soln</i>	LCG	
<i>chloroquine phosphate</i>	G	
Cimduo	NPD	
Cipro	NPD	
Cipro XR	NPD	
<i>ciprofloxacin</i>	LCG	
<i>ciprofloxacin ER tabs</i>	G	
<i>clarithromycin</i>	G	
<i>clarithromycin ER</i>	G	
Cleocin	NPD	PA
Clindesse Cream	NPD	
<i>clotrimazole troches</i>	G	
Combivir	NPD	

Bold type = Brand Name Drug *Lower case italic* = Generic drug

PA = Prior Authorization **QL** = Quantity Limits Apply **SP** = Specialty Drug **AL** = Age Limit **LCG** = Low Cost Generic

LDD = Limited Distribution Drug **SDS** = Day Supply Limit **R** = Requires Rider **G** = Generic **Q/T** = Quantity Over Time

PB = Preferred Brand **NPD** = Non Preferred Drug **ACA** = \$0 Preventative Drug **MME** = Morphine Milligram Equivalent

+ = Claim Dollar Limit

DRUG NAME +	DRUG TIER	REQUIREMENTS/LIMITS
Complera	PB	
Cresemba	NPD	PA, QL, Q/T
Crixivan	PB	
Daklinza	NPD, SP	PA, QL, Q/T
<i>dapsone tab</i>	G	
Daraprim Tab	NPD, SP	
<i>darunavir</i>	G	
Daxbia	NPD	
Delstrigo	NPD	
<i>demeclocycline</i>	G	
Depen Titrant	PB, SP	
Descovy	NPD	
<i>dicloxacillin</i>	G	
<i>didanosine</i>	G	
Dificid tab/susp	NPD	QL
Diffucan tab/susp	NPD	PA
Doryx 50mg DR tablet	NPD	PA
Doryx 200mg DR tablet	NPD	PA, QL
Doryx MPC Tab 60mg	NPD	PA
Dovato	NPD	
Doxycycline DR 40mg	NPD	PA
<i>doxycycline hyclate cap 50mg, 100mg</i>	LCG	
Doxycycline hyclate DR 80mg	NPD	PA
Doxycycline hyclate tab 75mg, 150mg	NPD	AL
Doxycycline hyclate tab 50mg	NPD	PA
Doxycycline hyclate tab DR 50mg, 100mg	NPD	

DRUG NAME +	DRUG TIER	REQUIREMENTS/LIMITS
Doxycycline hyclate tab DR 75mg, 150mg	NPD	AL
Doxycycline hyclate tab DR 200mg	NPD	QL, QT
<i>doxycycline monohydrate 50mg, 75mg, 100mg tab</i>	G	
<i>doxycycline monohydrate cap 50mg, 100mg</i>	G	
Doxycycline monohydrate cap 75mg, 150mg	NPD	AL
Doxycycline monohydrate tab 150mg	NPD	AL
Edurant	PB	
E.E.S.	NPD	
<i>efavirenz</i>	G	
<i>efavirenz-emtricitabine-tenofovir tab</i>	G	
<i>efavirenz-lamivudine-tenofovir tab</i>	G	
Egaten 250mg tablet	NPD	
<i>emtricitabine cap</i>	G	
<i>emtricitabine-tenofovir disoproxil fumarate tab 100-150mg, 133-200mg, 167-250mg</i>	G	
<i>emtricitabine-tenofovir disoproxil fumarate tab 200-300mg</i>	G, ACA	QL
Emtriva	NPD	

Bold type = Brand Name Drug *Lower case italic* = Generic drug

PA = Prior Authorization **QL** = Quantity Limits Apply **SP** = Specialty Drug **AL** = Age Limit **LCG** = Low Cost Generic

LDD = Limited Distribution Drug **5DS** = Day Supply Limit **R** = Requires Rider **G** = Generic **Q/T** = Quantity Over Time

PB = Preferred Brand **NPD** = Non Preferred Drug **ACA** = \$0 Preventative Drug **MME** = Morphine Milligram Equivalent

+ = Claim Dollar Limit

DRUG NAME +	DRUG TIER	REQUIREMENTS/ LIMITS
Emverm	NPD	QL
<i>entecavir</i>	G	
Epclusa	PB, SP	PA, QL, Q/T
Epivir HBV Soln	NPD	
Epivir HBV Tab	NPD	
Epivir Tab	NPD	
Epzicom	NPD	
EryPed	NPD	
Ery-Tab	NPD	
Erythrocin	NPD	
<i>erythromycin delayed release</i>	G	
<i>erythromycin ethylsuccinate</i>	G	
<i>erythromycin stearate</i>	G	
<i>ethambutol</i>	G	
<i>etravirine</i>	G	
<i>famciclovir</i>	G	
Firvanq Soln	NPD	AL
Flagyl	NPD	
<i>fluconazole suspension</i>	G	
<i>fluconazole tabs</i>	LCG	
<i>flucytosine</i>	G	
Flumadine	NPD	
<i>fosamprenavir calcium tab</i>	G	
<i>fosfomycin pow</i>	G	
Fuzeon	NPD	PA
<i>griseofulvin microsize</i>	G	
<i>griseofulvin ultramicrosize</i>	G	
Gris-PEG	NPD	
Harvoni	PB, SP	PA, QL, Q/T
Hepsera	NPD	
Hiprex	NPD	
Humatin	NPD	

DRUG NAME +	DRUG TIER	REQUIREMENTS/ LIMITS
<i>hydroxychloroquine</i>	G	
Impavido	NPD	Q/T
Intelence	NPD	
Invirase	PB	
Isentress	PB	
<i>isoniazid</i>	G	
<i>itraconazole</i>	G	
<i>ivermectin</i>	G	
Juluca	NPD	
Kaletra Tabs/ Soln	NPD	
Kalydeco Tabs/ Pack	NPD, SP	PA, LDD
Keflex	NPD	
<i>ketoconazole tab</i>	G	
Krintafel	NPD	
Lamisil Tabs	NPD	
<i>lamivudine tab 100mg, 150mg, 300mg</i>	G	
<i>lamivudine/ zidovudine</i>	G	
Lampit tab	NPD	
Ledipasvir-sofosbuvir tablet 90-400mg	NPD, SP	PA, QL
Levaquin	NPD	
<i>levofloxacin tab</i>	LCG	
Lexiva	NPD	
Likmez Susp	NPD	PA
<i>linezolid</i>	G	QL
Livtency	NPD	PA, QL
<i>lopinavir/ ritonavir</i>	G	
Luliconazole cream	NPD	PA
Lymepak	NPD	PA
Macrodantin	NPD	
Malarone	NPD	

Bold type = Brand Name Drug *Lower case italic* = Generic drug

PA = Prior Authorization **QL** = Quantity Limits Apply **SP** = Specialty Drug **AL** = Age Limit **LCG** = Low Cost Generic

LDD = Limited Distribution Drug **SDS** = Day Supply Limit **R** = Requires Rider **G** = Generic **Q/T** = Quantity Over Time

PB = Preferred Brand **NPD** = Non Preferred Drug **ACA** = \$0 Preventative Drug **MME** = Morphine Milligram Equivalent

+ = Claim Dollar Limit

DRUG NAME +	DRUG TIER	REQUIREMENTS/ LIMITS
<i>maraviroc tab</i>	G	
Mavyret	PB, SP	PA, QL, Q/T
<i>mefloquine</i>	G	
Mepron	NPD	
<i>methenamine hippurate</i>	G	
<i>metronidazole</i>	LCG	
Minocin	NPD	PA
<i>minocycline caps</i>	G	
Minocycline ER cap 135mg, 45mg, and 90mg	NPD	Q/T, PA
<i>minocycline ER tablet</i>	G	Q/T
<i>minocycline tablet</i>	G	
Minolira	NPD	PA, Q/T
<i>moderiba</i>	G, SP	
Molnupiravir 200mg	NPD	QL, AL
Mondoxyne NL 75mg cap	NPD	AL, Q/T
Monurol Pak Granules	NPD	PA
Moxatag	NPD	
<i>moxifloxacin hcl</i>	G	
Myambutol	NPD	
Mycobutin	NPD	
Mytesi	NPD	PA
Nebupent INH	NPD	
<i>nevirapine</i>	G	
<i>nevirapine ER</i>	G	
<i>nitazoxanide</i>	G	QL
<i>nitrofurantoin macrocrystals</i>	LCG	
Nitrofurantoin susp	NPD	AL
Norvir powder	PB	
Norvir tablet	NPD	
Noxafil	NPD	PA, QL

DRUG NAME +	DRUG TIER	REQUIREMENTS/ LIMITS
Nuversa gel	NPD	PA
Nuzyra	NPD	PA, QL
Onmel	NPD	PA
Oracea	NPD	PA
Orkambi tablet/ packet	NPD, SP	PA, LDD
<i>oseltamivir caps/ soln</i>	G	QL
Paxlovid Tab	PB	QL
Pegasys	NPD, SP	PA
PegIntron	NPD, SP	
<i>penicillin v potassium solution</i>	G	
<i>penicillin v potassium tablet</i>	LCG	
<i>pentamidine INH</i>	G	
Pifeltro	NPD	
Plaquenil	NPD	PA
<i>posaconazole</i>	G	QL
<i>potassium iodide soln</i>	G	
<i>praziquantel</i>	G	
Pretomanid	NPD	PA
Prevymis	NPD, SP	
Prezista	NPD	
<i>pyrimethamin</i>	G, SP	
Qualaquin	NPD	QL
<i>quinine sulfate</i>	G	QL
Relenza	NPD	QL, AL
Retrovir	NPD	
Reyataz	NPD	
Rezurock	NPD, SP	PA, QL
<i>ribasphere ribapak 200mg & 400mg/ 400mg & 600mg</i>	G, SP	
<i>rifabutin</i>	G	
Rifadin	NPD	
<i>rifampin</i>	G	

Bold type = Brand Name Drug *Lower case italic* = Generic drug

PA = Prior Authorization **QL** = Quantity Limits Apply **SP** = Specialty Drug **AL** = Age Limit **LCG** = Low Cost Generic

LDD = Limited Distribution Drug **5DS** = Day Supply Limit **R** = Requires Rider **G** = Generic **Q/T** = Quantity Over Time

PB = Preferred Brand **NPD** = Non Preferred Drug **ACA** = \$0 Preventative Drug **MME** = Morphine Milligram Equivalent

+ = Claim Dollar Limit

DRUG NAME +	DRUG TIER	REQUIREMENTS/ LIMITS
<i>rimantadine</i>	G	
<i>ritonavir</i>	G	
Rivfloza Inj	NPD, SP	PA, QL
Rukobia	NPD	PA
Selzentry	NPD	
Seysara	NPD	Q/T, PA
Sirturo	NPD	PA
Sitavig	NPD	QL
Sivextro	NPD	PA, QL
Sklice Lot 0.5%	NPD	
Skyclarys cap	NPD, SP	PA
Sofosbuvir-velpatasvir tablet 400-100mg	NPD, SP	PA, QL
Sohonos	NPD, SP	PA
Solodyn	NPD	PA, QL, Q/T
Solosec GRA	NPD	PA
Sovaldi	NPD, SP	PA, QL, Q/T
Sovuna Tab	NPD	PA
Sporanox	NPD	
SSKI Solution	NPD	
<i>stavudine</i>	G	
Stribild	PB	
Stromectol	NPD	
<i>sulfamethoxazole/tmp</i>	LCG	
Sunlenca	NPD	
Suprax Susp 100mg/5ml, 200mg/5ml	NPD	
Sustiva	NPD	
Symfi	NPD	
Symfi-Lo	NPD	
Symtuza	NPD	
Talicia	NPD	
Tamiflu	NPD	QL
Targadox	NPD	PA
Technivie	NPD, SP	PA, QL, Q/T

DRUG NAME +	DRUG TIER	REQUIREMENTS/ LIMITS
Temixys	NPD	
<i>tenofovir</i>	G	
<i>terbinafine tabs</i>	G	
Tetracycline tab	NPD	PA
Tindamax	NPD	
<i>tinidazole</i>	G	
Tivicay PD	NPD	
Tobi Neb Solution	NPD, SP	PA
Tobi Podhaler Cap	NPD, SP	
Tolsura	NPD	
Trikafta	NPD, SP	PA
Trikafta Pak	NPD, SP	PA
Triumeq	PB	
Trizivir	NPD	
Truvada	NPD	
<i>valacyclovir tab</i>	G	
Valcyte Soln	NPD	AL
Valcyte Tab	NPD	
<i>valganciclovir soln</i>	G	AL
<i>valganciclovir tab</i>	G	
Valtrex	NPD	PA
<i>vancomycin</i>	G	
<i>vancomycin soln</i>	G	AL
Vemlidy	NPD	
Vfend	NPD	
Vibramycin	NPD	PA
Videx EC	NPD	
Viekira Pak	NPD, SP	PA, QL, Q/T
Viekira XR	NPD, SP	PA, QL, Q/T
Viramune	NPD	
Viramune XR	NPD	
Viread	NPD	
Vivjoa	NPD	PA, QL
Vocabria	NPD	

Bold type = Brand Name Drug *Lower case italic* = Generic drug

PA = Prior Authorization **QL** = Quantity Limits Apply **SP** = Specialty Drug **AL** = Age Limit **LCG** = Low Cost Generic

LDD = Limited Distribution Drug **SDS** = Day Supply Limit **R** = Requires Rider **G** = Generic **Q/T** = Quantity Over Time

PB = Preferred Brand **NPD** = Non Preferred Drug **ACA** = \$0 Preventative Drug **MME** = Morphine Milligram Equivalent

+ = Claim Dollar Limit

DRUG NAME +	DRUG TIER	REQUIREMENTS/ LIMITS
<i>voriconazole</i>	G	
Vosevi	PB, SP	PA, QL, Q/T
Xenleta	NPD	QL
Xepi Cream 1%	NPD	PA
Xifaxan 200mg	NPD	QL
Xifaxan 550mg	NPD	PA, QL, Q/T
Ximino ER	NPD	PA, Q/T
Xofluza Tab	NPD	QL
Xofluza therapy pack	NPD	Q/T
Zepatier	NPD	PA, QL, Q/T
Zerit	NPD	
Ziagen	NPD	
<i>zidovudine</i>	G	
Zithromax	NPD	
Zmax	NPD	PA
Zovirax	NPD	
Zyvox	NPD	PA, QL

CANCER & ORGAN TRANSPLANT DRUGS

<i>abiraterone</i>	G, SP	PA
Afinitor	NPD, SP	PA, QL
Akeega	NPD, SP	PA, QL
Alecensa	NPD, SP	PA
Alkeran	NPD, SP	
Alunbrig tab/pak	NPD, SP	PA, QL
<i>anastrozole</i>	G	
Arimidex	NPD	PA
Aromasin	NPD	
Augtyro	NPD, SP	PA
Ayvakit	NPD, SP	PA, QL
Azasan	NPD	
<i>azathioprine</i>	G	
Balversa	NPD, SP	PA
Benlysta	NPD, SP	PA
Besremi	NPD, SP	PA
<i>bexarotene</i>	G, SP	PA

DRUG NAME +	DRUG TIER	REQUIREMENTS/ LIMITS
<i>bexarotene gel</i>	G, SP	PA
<i>bicalutamide</i>	G	
Bosulif	NPD, SP	PA
Braftovi	NPD, SP	PA
Brukinsa	NPD, SP	PA
Cabometyx	PB, SP	PA
Calquence	NPD, SP	PA
<i>capecitabine</i>	G, SP	
Caprelsa	NPD, SP	PA, QL
Casodex	NPD	
Cellcept	NPD	
Cometriq	NPD, SP	PA
Copiktra	NPD, SP	PA
Cotellic	NPD, SP	PA, LDD
<i>cyclophosphamide caps</i>	G	
Cyclophosphamide tabs	NPD	
<i>cyclosporine</i>	G	
Cytosan	NPD, SP	
<i>danazol</i>	G	
Danocrine	NPD	
Daurismo	NPD, SP	PA
Deltasone	NPD	
Emcyt	NPD	
Erivedge	NPD, SP	PA
Erleada	NPD, SP	PA
<i>erlotinib</i>	G, SP	PA, QL
<i>etoposide</i>	G, SP	
Eulexin	NPD	PA
<i>everolimus (generic for Afinitor)</i>	G, SP	PA, QL
<i>everolimus (generic for Zortress)</i>	G	
<i>exemestane</i>	G	
Exkivity	NPD, SP	PA
Fareston tab	NPD	

Bold type = Brand Name Drug *Lower case italic* = Generic drug

PA = Prior Authorization **QL** = Quantity Limits Apply **SP** = Specialty Drug **AL** = Age Limit **LCG** = Low Cost Generic

LDD = Limited Distribution Drug **5DS** = Day Supply Limit **R** = Requires Rider **G** = Generic **Q/T** = Quantity Over Time

PB = Preferred Brand **NPD** = Non Preferred Drug **ACA** = \$0 Preventative Drug **MME** = Morphine Milligram Equivalent

+ = Claim Dollar Limit

DRUG NAME +	DRUG TIER	REQUIREMENTS/ LIMITS
Farydak	NPD, SP	PA, LDD
Femara	NPD	
<i>flutamide</i>	G	
Fotivda	NPD, SP	PA
Fruzaqla	NPD, SP	PA
Gavreto	NPD, SP	PA
<i>gefitinib</i>	G, SP	PA
Gilotrif	NPD, SP	PA, QL
Gleevec	NPD, SP	PA
Gleostine	NPD, SP	
Hexalen	NPD	
Hycamtin	NPD, SP	PA
Hydrea	NPD	
<i>hydroxyurea</i>	G	
Hyftor Gel 0.2%	NPD	PA
Ibrance	NPD, SP	PA, LDD
Iclusig	NPD, SP	PA, QL
Idhifa	NPD, SP	PA, QL
<i>imatinib mesylate</i>	G, SP	PA
Imbruvica	NPD, SP	PA, QL
Imuran	NPD	
Inlyta	NPD, SP	PA
Inqovi tab	NPD, SP	PA
Inrebic	NPD, SP	PA
Iressa tab	NPD, SP	PA
Iwilfin	NPD, SP	PA
Jaypirca tab	NPD, SP	PA, QL
Jylamvo Soln	NPD	PA
Kisqali	NPD, SP	PA, LDD
Koselugo	NPD, SP	PA
Krazati	NPD, SP	PA
<i>lapatinib</i>	G, SP	PA
<i>lenalidomide</i>	G, SP	PA
Lenvima	NPD, SP	PA, LDD
<i>letrozole</i>	G	
<i>leucovorin calcium</i>	G	
Leukeran	PB, SP	PA

DRUG NAME +	DRUG TIER	REQUIREMENTS/ LIMITS
<i>leuprolide</i>	G, SP	
Lonsurf	NPD, SP	PA
Lorbrena	NPD, SP	PA
Lumakras	NPD, SP	PA
Lupkynis	NPD, SP	PA, QL
Lynparza	PB, SP	PA
Lysodren	NPD	
Lytgobi	NPD, SP	PA
Matulane	PB, SP	
Mavenclad pak	NPD, SP	PA
Megace	NPD	
<i>megestrol</i>	G	
<i>megestrol acetate</i>	G	
Mekinist	NPD, SP	PA
Mektovi	NPD, SP	PA
<i>melphalan</i>	G, SP	
<i>mercaptopurine</i>	G	
Mesnex	NPD, SP	
<i>methotrexate tab</i>	G	
<i>mycophenolate</i>	G	
<i>mycophenolic acid</i>	G	
Myfortic	NPD	
Myhibbin Sus	NPD	
Myleran	NPD	
Neoral	NPD	
Nerlynx	NPD, SP	PA
Nexavar	NPD, SP	PA
Nilandron	NPD, SP	
<i>nilutamide</i>	G, SP	
Ninlaro	NPD, SP	PA
Nubeqa	NPD, SP	PA
Odomzo	NPD, SP	PA
Ogsiveo	NPD, SP	PA
Ojemda Tab/Sus	NPD, SP	PA
Ojjaara	NPD, SP	PA, QL
Onureg	NPD, SP	PA
Orgovyx	NPD, SP	PA

Bold type = Brand Name Drug *Lower case italic* = Generic drug

PA = Prior Authorization **QL** = Quantity Limits Apply **SP** = Specialty Drug **AL** = Age Limit **LCG** = Low Cost Generic

LDD = Limited Distribution Drug **SDS** = Day Supply Limit **R** = Requires Rider **G** = Generic **Q/T** = Quantity Over Time

PB = Preferred Brand **NPD** = Non Preferred Drug **ACA** = \$0 Preventative Drug **MME** = Morphine Milligram Equivalent

+ = Claim Dollar Limit

DRUG NAME +	DRUG TIER	REQUIREMENTS/ LIMITS
Orserdu tab	NPD, SP	PA
Ortikos ER Cap	NPD	PA
<i>pazopanib</i>	G, SP	PA
Pemazyre	NPD, SP	PA, QL
Piqray	NPD, SP	PA
Pomalyst	NPD, SP	PA
<i>prednisone</i>	LCG	
<i>prednisone therapy pack/ solution/ concentrate</i>	G	
Prograf cap/ packets	NPD	
Protopic	NPD	PA
Purixan	NPD, SP	
Qinlock tab	NPD, SP	PA
Rapamune 1mg/ml Sol	NPD	
Rapamune tab	NPD	
RediTrex Inj	NPD	PA
Retevmo cap	NPD, SP	PA
Revlimid	NPD, SP	PA
Rezlidhia	NPD, SP	PA
Rozlytrek	NPD, SP	PA
Rubraca	PB, SP	PA
Rydapt	NPD, SP	PA
Sandimmune, Neoral	NPD	
Scemblix	NPD, SP	PA, QL
Siklos	NPD	
<i>sirolimus tab/soln</i>	G	
<i>sorafenib</i>	G, SP	PA
Sprycel	NPD, SP	PA
Stivarga	PB, SP	PA
<i>sunitinib</i>	G, SP	PA
Sutent	NPD, SP	PA
Tabloid	NPD	
Tabrecta tab	NPD, SP	PA
<i>tacrolimus</i>	G	

DRUG NAME +	DRUG TIER	REQUIREMENTS/ LIMITS
Tafinlar	NPD, SP	PA
Tagrisso	NPD, SP	PA, QL
Talzenna	NPD, SP	PA, QL
<i>tamoxifen 10mg</i>	G	
Tarceva	NPD, SP	PA, QL
Targretin cap	NPD, SP	PA
Tasigna	NPD, SP	PA
Tazverik 200mg	NPD, SP	PA
Temodar	NPD, SP	PA
<i>temozolomide</i>	G, SP	PA
Tepmetko	NPD, SP	PA
Thalomid	NPD, SP	PA
<i>thioguanine</i>	G	
Tibsovo	NPD, SP	PA
<i>toremifene tab</i>	G	
<i>tretinoin caps</i>	G, SP	PA
Trexall tab	NPD	
Truqap	NPD, SP	PA
Truseltiq	NPD, SP	PA
Tukysa	NPD, SP	PA
Turalio	NPD, SP	PA
Tykerb	NPD, SP	PA
Ukoniq	NPD, SP	PA
Valchlor	NPD, SP	PA
Vanflyta	NPD, SP	PA
Venclexta	NPD, SP	PA
Verzenio	NPD, SP	PA
Vitrakvi	NPD, SP	PA
Vizimpro	NPD, SP	PA
Vonjo	NPD, SP	PA
Votrient	NPD, SP	PA
Welireg	NPD, SP	PA
Xalkori	NPD, SP	PA
Xatmep	NPD	AL
Xeloda	NPD, SP	
Xospata	NPD, SP	PA
Xpovio Pak	NPD, SP	PA

Bold type = Brand Name Drug *Lower case italic* = Generic drug

PA = Prior Authorization **QL** = Quantity Limits Apply **SP** = Specialty Drug **AL** = Age Limit **LCG** = Low Cost Generic

LDD = Limited Distribution Drug **5DS** = Day Supply Limit **R** = Requires Rider **G** = Generic **Q/T** = Quantity Over Time

PB = Preferred Brand **NPD** = Non Preferred Drug **ACA** = \$0 Preventative Drug **MME** = Morphine Milligram Equivalent

+ = Claim Dollar Limit

DRUG NAME +	DRUG TIER	REQUIREMENTS/ LIMITS
Xtandi	NPD, SP	PA, LDD
Yonsa	NPD, SP	PA
Zejula	PB, SP	PA, QL, LDD
Zelboraf	NPD, SP	PA, LDD
Zolinza	NPD, SP	PA, LDD
Zortress	NPD	
Zydelig	NPD, SP	PA, LDD
Zykadia	NPD, SP	PA, LDD
Zytiga	NPD, SP	PA, LDD

PAIN, NERVOUS SYSTEM, & PSYCH

Abilify	NPD	PA
Abilify Mycite	NPD	PA
Abilify Mycite Tab Maintenance/ Starter Pak	NPD	PA
Abstral	NPD	PA, QL, MME
<i>acamprosate DR tab 333mg</i>	G	
<i>acetaminophen/ codeine</i>	LCG	AL, QL, 5DS, MME
Actiq	NPD	PA, QL, MME
Adderall	NPD	PA, QL
Adderall XR	NPD	PA, QL
Adhansia XR Capsule	NPD	PA, QL
Adipex-P	NPD	R
Adlarity Dis	NPD	PA, AL
Adzenys ER Susp	NPD	PA, QL
Adzenys XR ODT	NPD	PA, QL
Aimovig	PB	PA
Ajovy	PB	PA
Allzital 25-325mg	NPD	PA, QL, 5DS
<i>almotriptan maleate</i>	G	QL, AL
<i>alprazolam</i>	LCG	AL

DRUG NAME +	DRUG TIER	REQUIREMENTS/ LIMITS
<i>alprazolam ER</i>	G	AL
<i>amantadine</i>	G	
Ambien	NPD	PA, QL
Ambien CR	NPD	PA, QL
Amerge	NPD	PA, QL, AL
<i>amitriptyline hcl</i>	G	
<i>amoxapine</i>	G	
<i>amphetamine aspartate/ amphetamine sulfate/dextro-amphetamine</i>	G	QL
<i>amphetamine aspartate/ amphetamine sulfate/dextro-amphetamine ER</i>	G	QL
Amphetamine ER suspension	NPD	PA, QL
<i>amphetamine tablet</i>	G	QL
<i>amphetamine tablet (generic Evekeo)</i>	G	PA, QL
<i>amphet/dextr cap er</i>	G	QL
Anafranil	NPD	PA
Antabuse	NPD	
Apadaz	NPD	PA, QL, 5DS, MME
Aplenzin	NPD	PA
Apokyn Solution Cartridge 30mg/3ml	NPD, SP	PA
<i>apomorphine inj 30mg/3ml</i>	G, SP	PA
Apo-Varenicline	NPD, ACA	QL
Aptensio XR	NPD	PA, QL
Aptiom	NPD	PA
Aricept	NPD	PA, AL
<i>aripiprazole</i>	G	
<i>armodafinil</i>	G	

Bold type = Brand Name Drug *Lower case italic* = Generic drug

PA = Prior Authorization **QL** = Quantity Limits Apply **SP** = Specialty Drug **AL** = Age Limit **LCG** = Low Cost Generic

LDD = Limited Distribution Drug **5DS** = Day Supply Limit **R** = Requires Rider **G** = Generic **Q/T** = Quantity Over Time

PB = Preferred Brand **NPD** = Non Preferred Drug **ACA** = \$0 Preventative Drug **MME** = Morphine Milligram Equivalent

+ = Claim Dollar Limit

DRUG NAME +	DRUG TIER	REQUIREMENTS/ LIMITS
Arymo ER	NPD	PA, QL, MME
<i>asenapine tab sub</i>	G	
Ativan	NPD	PA, AL
<i>atomoxetine</i>	G	QL
Aubagio	NPD, SP	PA
Austedo [XR]	NPD, SP	PA
Auvelity	NPD	PA
Avonex	PB, SP	QL
Axert	NPD	PA, QL, AL
Azilect	NPD	
Azstarys	PB	PA, QL
Banzel	NPD	PA
Banzel Susp	NPD	PA
Belbuca	PB	PA, QL, MME
Belsomra	NPD	PA, QL
Belviiq [XR]	NPD	PA, R
<i>benzphetamine</i>	G	R, PA
Benzhydro-codone-acetaminophen	NPD	PA, QL, 5DS, MME
<i>benztropine</i>	LCG	
Betaseron	PB, SP	QL
Brisdelle	NPD	
Briviact	NPD	PA
Briviact soln	NPD	PA, AL
<i>bromocriptine mesylate</i>	G	
Bunavail	NPD	QL
<i>buprenorphine hcl/naloxone hcl</i>	G	QL
<i>buprenorphine patch</i>	G	PA, QL, MME
<i>buprenorphine SL</i>	G	QL
<i>bupropion</i>	G	
<i>bupropion ER 150mg</i>	G	QL
Bupropion ER 450mg	NPD	PA

DRUG NAME +	DRUG TIER	REQUIREMENTS/ LIMITS
<i>bupropion SR</i>	G	
<i>bupropion XL</i>	G	
Buspar	NPD	
<i>bupirone</i>	G	
Butal/Apap Tab 25-325mg	NPD	PA, QL, 5DS
Butalbital-acetaminophen 50-300mg	NPD	PA, QL, 5DS
<i>butalbital/apap/caffeine</i>	G	QL, 5DS
<i>butalbital/apap/caffeine/codeine</i>	G	QL, 5DS, AL, MME
<i>butalbital/aspirin/caffeine/codeine</i>	G	QL, 5DS, AL, MME
<i>butorphanol tartrate nasal</i>	G	QL, 5DS, AL, MME
Butrans	NPD	PA, QL, MME
Cafergot	NPD	
Cambia Packet	NPD	PA
Capcof Syrup	NPD	QL, 5DS, AL, MME
Caplyta	NPD	PA
<i>carbamazepine</i>	G	
<i>carbamazepine susp</i>	G	AL
<i>carbamazepine XR</i>	G	
Carbatrol	NPD	PA
<i>carbidopa</i>	G	
<i>carbidopa/levodopa</i>	G	
<i>carbidopa/levodopa ER</i>	G	
<i>carbidopa/levodopa ODT</i>	G	
<i>carbidopa/levodopa/entacapone</i>	G	
<i>carisoprodol-aspirin-codeine</i>	G	QL, 5DS, AL, MME

Bold type = Brand Name Drug *Lower case italic* = Generic drug

PA = Prior Authorization **QL** = Quantity Limits Apply **SP** = Specialty Drug **AL** = Age Limit **LCG** = Low Cost Generic

LDD = Limited Distribution Drug **5DS** = Day Supply Limit **R** = Requires Rider **G** = Generic **Q/T** = Quantity Over Time

PB = Preferred Brand **NPD** = Non Preferred Drug **ACA** = \$0 Preventative Drug **MME** = Morphine Milligram Equivalent

+ = Claim Dollar Limit

DRUG NAME +	DRUG TIER	REQUIREMENTS/ LIMITS
Cataflam	NPD	PA
Celexa	NPD	PA
Celontin	NPD	
Chantix	NPD	QL
<i>chlordiazepoxide</i>	LCG	AL
<i>chlorpromazine HCl</i>	G	
<i>citalopram</i>	LCG	
Citalopram 30mg Cap	NPD	PA
<i>clobazam</i>	G	PA
<i>clobazam susp</i>	G	PA, AL
<i>clomipramine HCl</i>	G	
<i>clonazepam</i>	G	
<i>clorazepate dipotassium</i>	G	AL
<i>clozapine</i>	G	
<i>clozapine ODT</i>	G	
Clozaril	NPD	
<i>codeine tabs</i>	G	QL, 5DS, AL, MME
<i>coditussin AC liquid</i>	G	QL, AL, 5DS, MME
Comtan	NPD	
Concerta	NPD	PA, QL
Contrave ER	NPD	PA, R
Conzip	NPD	PA, AL, QL, MME
Copaxone	NPD, SP	PA, QL
Cotempla XR ODT	NPD	PA, QL
Coxanto	NPD	PA
Cymbalta	NPD	PA
Dantrium	NPD	
Dantrolene	NPD	
Daybue Soln	NPD, SP	PA
Daypro	NPD	PA
Daytrana	NPD	PA, QL
Dayvigo	NPD	PA, QL
Demerol	NPD	PA, QL, 5DS, MME

DRUG NAME +	DRUG TIER	REQUIREMENTS/ LIMITS
Depakene	NPD	
Depakote	NPD	
Depakote ER	NPD	
Depakote Sprinkle Caps	NPD	
<i>desipramine</i>	G	
Desoxyn	NPD	PA, QL
Desvenlafaxine ER 24 HR	PB	
Dexedrine	NPD	PA, QL
<i>dexmethylphenidate ER</i>	G	QL
<i>dexmethylphenidate hcl</i>	G	QL
<i>dextroamphetamine</i>	G	QL
<i>dextroamphetamine ER</i>	G	QL
D.H.E.45	NPD	PA
Dhivy	NPD	PA
Diacomit	NPD, SP	PA
Diastat	NPD	
<i>diazepam rectal gel</i>	G	
<i>diazepam solution</i>	G	
<i>diazepam tabs</i>	LCG	
<i>diclofenac cap 25mg</i>	G	PA, QL
Diclofenac cap 35mg	NPD	PA
<i>diclofenac potassium</i>	G	
<i>diclofenac powder</i>	G	
<i>diclofenac sodium</i>	G	
<i>diclofenac sodium gel 1%</i>	G	
<i>diethylpropion</i>	G	R, PA
<i>diflunisal</i>	G	

Bold type = Brand Name Drug *Lower case italic* = Generic drug

PA = Prior Authorization **QL** = Quantity Limits Apply **SP** = Specialty Drug **AL** = Age Limit **LCG** = Low Cost Generic

LDD = Limited Distribution Drug **5DS** = Day Supply Limit **R** = Requires Rider **G** = Generic **Q/T** = Quantity Over Time

PB = Preferred Brand **NPD** = Non Preferred Drug **ACA** = \$0 Preventative Drug **MME** = Morphine Milligram Equivalent

+ = Claim Dollar Limit

DRUG NAME +	DRUG TIER	REQUIREMENTS/ LIMITS
<i>dihydrocodein/APAP/caff</i>	G	QL, 5DS, AL, MME
<i>dihydrocodeine/aspirin/caffeine</i>	G	QL, 5DS, AL, MME
<i>dihydroergo-tamine inj</i>	G	PA
<i>dihydroergo-tamine nasal spray</i>	G	PA
Dilantin chewable tablets	PB	
Dilaudid	NPD	PA, QL, 5DS, MME
<i>dimethyl fumarate DR cap</i>	G, SP	
<i>disulfiram</i>	G	
<i>divalproex sodium</i>	G	
<i>divalproex sodium ER</i>	G	
<i>divalproex sprinkle cap</i>	G	
Dolophine	NPD	PA, QL, MME
<i>donepezil hydrochloride</i>	LCG	AL
Doral	NPD	PA, AL
<i>doxepin capsule</i>	G	
<i>doxepin HCL con 10mg/ml</i>	G	
<i>doxepin tablet</i>	G	PA
Drizalma Sprinkle	NPD	PA
<i>duloxetine</i>	G	
Duragesic patch	NPD	PA, QL, MME
Dyanavel XR	NPD	PA, QL
Effexor XR	NPD	PA
Eldepryl	NPD	
Elepsia XR	NPD	PA
<i>eletriptan</i>	G	QL, AL
Embeda	NPD	PA, QL, MME

DRUG NAME +	DRUG TIER	REQUIREMENTS/ LIMITS
Emgality (300mg Dose) Prefilled Pen 100mg/ml	PB	PA, QL
Emgality Prefilled Pen/ Auto-Injector 120mg/ml	NPD	PA
<i>endocet</i>	LCG	5DS, QL, MME
<i>entacapone</i>	G	
Epidiolex Soln	NPD, SP	PA
Eprontia	NPD	PA
<i>ergotamine tartrate/caffeine</i>	G	
<i>escitalopram</i>	LCG	
Esgic cap/tab	NPD	PA, QL, 5DS
<i>estazolam</i>	G	QL, AL
<i>eszopiclone</i>	G	PA, QL (3mg only)
<i>ethosuximide</i>	G	
<i>etodolac</i>	G	
Evekeo [ODT]	NPD	PA, QL
Evzio	NPD	PA, QL
Exalgo	NPD	PA, QL, MME
Exelon	NPD	AL
Exservan Mis	NPD	
Extavia	NPD, SP	PA
Fanapt	NPD	PA
Fazaclo	NPD	
<i>felbamate</i>	G	
Felbatol	NPD	PA
Feldene	NPD	
Fenoprofen calcium	NPD	PA
<i>fentanyl citrate OTFC</i>	G	PA, QL, MME
Fentanyl citrate tablet	NPD	PA, QL, MME
<i>fentanyl transdermal</i>	G	PA, QL, MME
Fentora	NPD	PA, QL, MME
Fetzima	NPD	PA

Bold type = Brand Name Drug *Lower case italic* = Generic drug

PA = Prior Authorization **QL** = Quantity Limits Apply **SP** = Specialty Drug **AL** = Age Limit **LCG** = Low Cost Generic

LDD = Limited Distribution Drug **5DS** = Day Supply Limit **R** = Requires Rider **G** = Generic **Q/T** = Quantity Over Time

PB = Preferred Brand **NPD** = Non Preferred Drug **ACA** = \$0 Preventative Drug **MME** = Morphine Milligram Equivalent

+ = Claim Dollar Limit

DRUG NAME +	DRUG TIER	REQUIREMENTS/ LIMITS
<i> fingolimod </i>	G, SP	
Fintepla sol	NPD, SP	PA
Fioricet Cap	NPD	PA, QL, 5DS
Fioricet with codeine	NPD	QL, AL, 5DS, PA, MME
Fiorinal with codeine	NPD	QL, AL, 5DS, PA, MME
<i> fluoxetine </i>	G	QL (Weekly Only)
<i> fluoxetine 10mg, 20mg, 40mg </i>	G	
<i> fluoxetine soln </i>	G	AL
<i> fluphenazine </i>	G	
<i> flurazepam </i>	G	QL, AL
<i> flurbiprofen </i>	G	
<i> fluvoxamine </i>	G	
<i> fluvoxamine ER </i>	G	
Focalin	NPD	QL
Focalin XR	NPD	PA, QL
ForFivo XL	NPD	PA
Frova	NPD	PA, QL, AL
Frovatriptan succinate	NPD	QL, AL
Fycompa	NPD	
<i> gabapentin </i>	G	
<i> gabapentin soln </i>	G	AL
<i> gabapentin tab </i>	G	PA
Gabitril	NPD	
<i> galantamine </i>	G	AL
<i> galantamine ER </i>	G	AL
Geodon	NPD	PA
Gilenya 0.5mg	NPD, SP	PA
Gilenya 0.25mg	NPD, SP	
<i> glatiramer acetate </i>	G, SP	QL
<i> glatopa </i>	G, SP	QL
Gocovri	NPD	PA
Gralise Mis	NPD	PA
<i> guaifenesin-codeine soln 10mg/5ml </i>	LCG	QL, AL, 5DS, MME

DRUG NAME +	DRUG TIER	REQUIREMENTS/ LIMITS
<i> guanfacine ER </i>	G	QL
Halcion	NPD	PA, QL, AL
<i> haloperidol </i>	G	
Hetlioz Cap	NPD, SP	PA, QL
Hetlioz LQ Susp	NPD, SP	PA
Horizant	NPD	PA
<i> hydrocodone ER </i>	G	PA, QL, MME
<i> hydrocodone/acetaminophen </i>	LCG	QL, 5DS, AL, MME
<i> hydrocodone-homatropine tab </i>	G	QL, 5DS, AL, MME
<i> hydromorphone ER </i>	G	PA, QL, MME
<i> hydromorphone IR </i>	G	QL, 5DS, MME
Hysingla ER	NPD	PA, QL, MME
Ibudone	NPD	QL, AL, 5DS, PA, MME
<i> ibuprofen/hydrocodone </i>	G	QL, 5DS, MME, AL
Imcivree Inj 10mg/ml	NPD, SP	PA
<i> imipramine </i>	G	
Imitrex	NPD	AL
Inbrija	NPD, SP	PA
Indocin Suppository	NPD	
Indocin susp	NPD	AL
Ingrezza	NPD, SP	PA
Intermezzo	NPD	PA, QL
Intuniv	NPD	PA, QL
Invega ER tablet	NPD	PA
<i> isometheptene/dichloralphenazone/apap </i>	G	
Jakafi	NPD, SP	PA, QL, LDD
Jornay PM Capsule	NPD	PA, QL
Kadian ER	NPD	PA, QL, MME
Kapvay	NPD	PA, QL

Bold type = Brand Name Drug *Lower case italic* = Generic drug

PA = Prior Authorization **QL** = Quantity Limits Apply **SP** = Specialty Drug **AL** = Age Limit **LCG** = Low Cost Generic

LDD = Limited Distribution Drug **5DS** = Day Supply Limit **R** = Requires Rider **G** = Generic **Q/T** = Quantity Over Time

PB = Preferred Brand **NPD** = Non Preferred Drug **ACA** = \$0 Preventative Drug **MME** = Morphine Milligram Equivalent

+ = Claim Dollar Limit

DRUG NAME +	DRUG TIER	REQUIREMENTS/ LIMITS
Keppra	NPD	PA
Keppra XR	NPD	PA
<i>ketoprofen</i>	G	
<i>ketorolac</i>	G	
Khedeza	NPD	PA
Klonopin	NPD	PA
Kloxxado Liq	PB	QL
Kynmobi Kit Titration	NPD, SP	PA
Kynmobi Mis	NPD, SP	PA, QL
<i>lacosamide</i>	G	
Lamictal	NPD	PA
Lamictal ODT	NPD	PA
Lamictal XR	NPD	PA
<i>lamotrigine</i>	G	
<i>lamotrigine ER</i>	G	
<i>lamotrigine ODT</i>	G	
<i>lamotrigine ODT kit</i>	G	
Latuda	NPD	PA
Lazanda	NPD	PA, QL, MME
<i>levetiracetam</i>	LCG	
<i>levetiracetam ER</i>	G	
<i>levorphanol</i>	G	QL, 5DS, MME
Lexapro	NPD	PA
Libervant Mis	NPD	PA, QL
Librax	NPD	PA
Licart Dis 1.3%	NPD	PA, QL
<i>lisdexamfetamine cap/chew</i>	G	QL
<i>lithium carbonate</i>	G	
<i>lithium carbonate ER</i>	G	
Lithobid	NPD	
Lodine	NPD	
Lodosyn	NPD	
Lomaira	NPD	R
<i>lorazepam</i>	LCG	AL

DRUG NAME +	DRUG TIER	REQUIREMENTS/ LIMITS
<i>lorazepam concentrate</i>	G	AL
Loreev XR	NPD	PA
Lortab	NPD	QL, 5DS, AL, PA
<i>lortab elixir</i>	LCG	QL, MME
<i>loxapine</i>	G	
Lucemyra	NPD	PA, QL, Q/T
Lumryz Pak	NPD, SP	PA, QL
Lunesta	NPD	PA, QL
<i>lurasidone tab</i>	G	
Lybalvi	NPD	PA
Lyrica Cap	NPD	PA
Lyrica CR	NPD	PA
Lyrica soln	NPD	PA, AL
<i>maprotiline</i>	G	
Maxalt, Maxalt-MLT	NPD	AL, QL
Mayzent tablet, starter pak	NPD, SP	
m-clear wc soln	NPD	AL, QL, 5DS, MME
<i>meclofenamate</i>	G	
<i>memantine</i>	G	AL
<i>memantine ER</i>	G	AL
<i>meperidine HCL</i>	G	QL, 5DS, MME
<i>meprobamate</i>	G	
Mestinon syrup	NPD	PA, AL
Mestinon [ER] Tab	NPD	PA
Metadate CD	NPD	PA, QL, MME
<i>methadone</i>	G	PA, QL, MME
<i>methadone HCL concentrate</i>	LCG	PA, QL
<i>methadone HCL sol</i>	LCG	PA, QL
Methadose concentrate [SF]	NPD	PA, QL, MME
Methamphetamine	NPD	QL
<i>methocarbamol 500mg, 750mg</i>	LCG	

Bold type = Brand Name Drug *Lower case italic* = Generic drug

PA = Prior Authorization **QL** = Quantity Limits Apply **SP** = Specialty Drug **AL** = Age Limit **LCG** = Low Cost Generic

LDD = Limited Distribution Drug **5DS** = Day Supply Limit **R** = Requires Rider **G** = Generic **Q/T** = Quantity Over Time

PB = Preferred Brand **NPD** = Non Preferred Drug **ACA** = \$0 Preventative Drug **MME** = Morphine Milligram Equivalent

+ = Claim Dollar Limit

DRUG NAME +	DRUG TIER	REQUIREMENTS/ LIMITS
<i>methsuximide</i>	G	
Methylin	NPD	QL
<i>methylphenidate</i>	G	QL
<i>methylphenidate ER</i>	G	QL
<i>methylphenidate ER (CD)</i>	G	QL
<i>methylphenidate ER (LA)</i>	G	QL
Methlyphenidate ER (XR)	NPD	PA, QL
<i>methylphenidate pad</i>	G	QL
Midrin	NPD	
Migranal	NPD	PA
Mirapex	NPD	
Mirapex ER	NPD	
<i>mirtazapine</i>	G	
<i>modafinil</i>	G	
<i>molindone hcl</i>	G	
MorphaBond ER	NPD	PA, QL, MME
<i>morphine IR</i>	G	QL, 5DS, MME
<i>morphine sulfate ER</i>	G	PA, QL, MME
<i>morphine suppositories</i>	G	QL, 5DS, MME
Motpoly XR	NPD	PA
MS Contin	NPD	PA, QL, MME
Mydayis	NPD	PA, QL
Mysoline	NPD	PA
<i>nabumetone</i>	G	
Nalfon	NPD	PA
Nalocet	NPD	PA, QL, 5DS, MME
Naloxone Injection 2mg	NPD	QL
<i>naloxone spray</i>	G	QL
<i>naltrexone 50mg</i>	G	
Namenda [XR]	NPD	AL
Namzaric	NPD	AL

DRUG NAME +	DRUG TIER	REQUIREMENTS/ LIMITS
<i>naratriptan</i>	G	QL, AL
Narcan 4mg/ actuation spray	PB	QL
Nardil	NPD	
Nayzilam	NPD	PA, QL
<i>nefazodone</i>	G	
Neupro Patch	NPD	PA
Neurontin	NPD	PA
Neurontin soln	NPD	PA, AL
<i>ninjacof-XG liquid</i>	G	QL, AL, 5DS, MME
Norpramin	NPD	
<i>nortriptyline</i>	G	
<i>nortriptyline soln</i>	G	AL
Nourianz	NPD	PA
Nucynta	NPD	QL, 5DS, MME
Nucynta ER	NPD	PA, QL, MME
Nuplazid	NPD	PA
Nurtec chw 75mg ODT	PB	PA, QL, AL
Nuvigil	NPD	PA
<i>olanzapine</i>	G	
<i>olanzapine ODT</i>	LCG	
<i>olanzapine/ fluoxetine hcl</i>	G	
Onfi	NPD	PA
Onfi Susp	NPD	PA, AL
Ongentys	NPD	PA
Onzetra Xsail	NPD	PA, QL, AL
Opana	NPD	QL, 5DS, PA, MME
Opana ER	NPD	PA, QL, MME
Opvee Spray	NPD	QL
Orap	NPD	
Osmolex ER	NPD	
Oxaprozin 300mg cap	NPD	PA
<i>oxaprozin 600mg tab</i>	G	
Oxaydo	NPD	PA, QL, 5DS, MME

Bold type = Brand Name Drug *Lower case italic* = Generic drug

PA = Prior Authorization **QL** = Quantity Limits Apply **SP** = Specialty Drug **AL** = Age Limit **LCG** = Low Cost Generic

LDD = Limited Distribution Drug **5DS** = Day Supply Limit **R** = Requires Rider **G** = Generic **Q/T** = Quantity Over Time

PB = Preferred Brand **NPD** = Non Preferred Drug **ACA** = \$0 Preventative Drug **MME** = Morphine Milligram Equivalent

+ = Claim Dollar Limit

DRUG NAME +	DRUG TIER	REQUIREMENTS/LIMITS
<i>oxazepam</i>	G	AL
<i>oxcarbazepine susp</i>	G	AL
<i>oxcarbazepine tab</i>	G	
Oxtellar XR	NPD	PA
Oxycodone ER tablet	NPD	PA, QL, MME
<i>oxycodone IR</i>	G	QL, 5DS, MME
<i>oxycodone/acetaminophen</i>	LCG	QL, 5DS, MME
Oxycodone/acetaminophen	NPD	PA, QL, 5DS, MME
Oxycodone/APAP 2.5-300mg, 5-300mg, 10-300mg tab	NPD	PA, QL, 5DS, MME
<i>oxycodone/aspirin</i>	G	QL, 5DS, MME
<i>oxycodone/ibuprofen</i>	G	QL, 5DS, MME
OxyContin	NPD	PA, QL, MME
<i>oxymorphone ER</i>	G	PA, QL, MME
<i>oxymorphone IR</i>	G	QL, 5DS, MME
<i>paliperidone er tablet</i>	G	
Pamelor	NPD	PA
Parlodel	NPD	
Parnate	NPD	
<i>paroxetine</i>	G	
<i>paroxetine ER</i>	G	
Paxil CR	NPD	PA
Paxil Tab/Susp	NPD	PA
<i>pentazocine-naloxone</i>	G	QL, 5DS, MME
Percocet	NPD	QL, 5DS, PA, MME
<i>perphenazine</i>	G	
Pexeva	NPD	PA
<i>phendimetrazine tartrate</i>	G	PA, R

DRUG NAME +	DRUG TIER	REQUIREMENTS/LIMITS
<i>phenelzine</i>	G	
<i>phenobarbital</i>	G	
<i>phentermine hcl</i>	LCG	R
Phenytek	NPD	
<i>phenytoin</i>	G	
<i>pimozide</i>	G	
<i>piroxicam</i>	G	
Plegridy	PB, SP	QL
Ponvory	NPD, SP	PA
<i>pramipexole</i>	LCG	
<i>pramipexole ER</i>	G	
<i>pregabalin cap</i>	G	
<i>pregabalin ER tab</i>	G	PA
<i>pregabalin soln</i>	G	AL
<i>primidone</i>	G	
Primlev	NPD	PA, QL, 5DS, MME
Pristiq	NPD	PA
Procentra 1mg/ml	NPD	QL
Prolate Sol 10/300mg	NPD	PA, QL, 5DS, MME
Prolate tab	NPD	PA, QL, 5DS, MME
<i>promethegan supp</i>	G	
Provigil	NPD	PA
Prozac	NPD	PA
<i>pyridostigmine</i>	G	
<i>pyridostigmine soln</i>	G	AL
Qdolo Soln 5mg/ml	NPD	PA, QL, AL
Qelbree	NPD	PA, QL
Qmiiz ODT	NPD	PA
Qsymia ER	NPD	PA, R
<i>quazepam</i>	G	QL, AL
Qudexy XR	NPD	PA
<i>quetiapine fumarate [ER]</i>	G	

Bold type = Brand Name Drug *Lower case italic* = Generic drug

PA = Prior Authorization **QL** = Quantity Limits Apply **SP** = Specialty Drug **AL** = Age Limit **LCG** = Low Cost Generic

LDD = Limited Distribution Drug **5DS** = Day Supply Limit **R** = Requires Rider **G** = Generic **Q/T** = Quantity Over Time

PB = Preferred Brand **NPD** = Non Preferred Drug **ACA** = \$0 Preventative Drug **MME** = Morphine Milligram Equivalent

+ = Claim Dollar Limit

DRUG NAME +	DRUG TIER	REQUIREMENTS/ LIMITS
Quillichew ER	NPD	PA, QL
Quillivant XR	NPD	PA, QL
Qulipta	PB	PA, QL
Quviviq	NPD	PA, QL
Radicava ORS Susp	PB, SP	PA
<i>ramelteon</i>	G	QL
<i>rasagiline</i>	G	
Razadyne	NPD	AL
Razadyne ER	NPD	AL
Rebif Rebidose	NPD, SP	PA, QL
Regimex	NPD	PA, R
Relafen	NPD	PA
Relafen DS	NPD	PA
Relexxii	NPD	PA, QL
Relpax	NPD	PA, QL, AL
Relyvrio Pak	NPD, SP	PA
Remeron	NPD	
Remeron SolTab	NPD	
Requip	NPD	
Requip XL	NPD	
Restoril	NPD	PA, AL
Rextovy Spray	NPD	QL
Rexulti	NPD	
Reyvow	NPD	PA, QL, AL
Rilutek	NPD	
<i>riluzole</i>	G	
Risperdal	NPD	PA
<i>risperidone</i>	LCG	
Ritalin LA	NPD	PA, QL
Ritalin Tab	NPD	PA, QL
<i>rivastigmine</i>	G	AL
<i>rizatriptan benzoate</i>	G	QL, AL
Robaxin	NPD	
<i>ropinirole</i>	G	
<i>ropinirole ER</i>	G	

DRUG NAME +	DRUG TIER	REQUIREMENTS/ LIMITS
Roxicodone	NPD	QL, 5DS, PA, MME
Roxybond	NPD	QL, 5DS, PA, MME
Rozerem	NPD	PA, QL
<i>rufinamide susp 40mg/ml</i>	G	PA
<i>rufinamide tab</i>	G	PA
Rytary	NPD	PA
Sabril	NPD, SP	PA
Saphris	NPD	PA
Saxenda	NPD	PA, R, QL
Secuado Patch	NPD	PA
Seglentis 56-44mg Tab	NPD	PA, QL
<i>selegiline HCl</i>	G	
Seroquel	NPD	PA
Seroquel XR	NPD	PA
<i>sertraline</i>	LCG	
Sertraline Caps 150mg, 200mg	NPD	PA
Silenor	NPD	PA
Sinemet	NPD	
Sinemet CR	NPD	
Sodium Oxybate Sol (Hikma)	NPD, SP	PA, QL
Sonata	NPD	PA, QL
Spritam Oral Disintegrating Tab	NPD	PA
Sprix Nasal Spray	NPD	PA, QL
Stalevo	NPD	
Strattera	NPD	PA, QL
Suboxone Sublingual Film	NPD	QL
Subsys	NPD	PA, QL, MME
<i>sulindac</i>	G	
<i>sumatriptan</i>	G	QL, AL
<i>sumatriptan/naproxen</i>	G	PA, QL
Sunosi	PB	PA

Bold type = Brand Name Drug *Lower case italic* = Generic drug

PA = Prior Authorization **QL** = Quantity Limits Apply **SP** = Specialty Drug **AL** = Age Limit **LCG** = Low Cost Generic

LDD = Limited Distribution Drug **5DS** = Day Supply Limit **R** = Requires Rider **G** = Generic **Q/T** = Quantity Over Time

PB = Preferred Brand **NPD** = Non Preferred Drug **ACA** = \$0 Preventative Drug **MME** = Morphine Milligram Equivalent

+ = Claim Dollar Limit

DRUG NAME +	DRUG TIER	REQUIREMENTS/ LIMITS
Sylatron	NPD, SP	PA
Symbyax	NPD	PA
Sympazan Film	NPD	PA
Tascenso ODT	NPD, SP	PA
<i>tasimelteon</i>	G, SP	PA, QL
Tasmar	NPD	
Tecfidera	NPD, SP	PA, LDD
Tegretol susp	NPD	PA, AL
Tegretol [XR]	NPD	PA
<i>temazepam</i>	G	QL, AL
<i>teriflunomid</i>	G, SP	
<i>tetrabenazine</i>	G, SP	PA
<i>thioridazine</i>	G	
<i>thiothixene</i>	G	
<i>tiagabine hcl</i>	G	
Tiglutik Susp	PB	
Tivorbex	NPD	PA
Tofranil	NPD	
<i>tolcapone</i>	G	
<i>tolmetin sodium</i>	G	
Topamax	NPD	PA
Topamax Sprinkle Capsules	NPD	PA
<i>topiramate</i>	G	
<i>topiramate ER cap</i>	G	
<i>topiramate sprinkle cap</i>	G	PA
Tosymra Nasal Solution	NPD	PA, QL, AL
<i>tramadol</i>	LCG	QL, AL, MME
Tramadol ER cap	NPD	QL, AL, MME
<i>tramadol ER (biphasic) tablet</i>	G	QL, AL, MME
<i>tramadol ER tablet</i>	G	QL, AL, MME
Tramadol soln 5mg/ml	NPD	PA, QL, AL, MME

DRUG NAME +	DRUG TIER	REQUIREMENTS/ LIMITS
<i>tramadol/acetaminophen</i>	G	QL, AL, MME
Tranxene T	NPD	AL
<i>tranycypromine sulfate</i>	G	
<i>trazodone</i>	G	
Treximet	NPD	PA, QL, AL
Trezix	NPD	
<i>triazolam</i>	G	QL, AL
<i>trifluoperazine</i>	G	
<i>trihexyphenidyl</i>	LCG	
Trileptal Susp	NPD	PA, AL
Trileptal Tab	NPD	PA
<i>trimipramine</i>	G	
Trintellix	NPD	PA
Trokendi XR	NPD	PA
Trudhesa AER	NPD	PA, QL
<i>trymine CG liquid</i>	G	AL, QL, 5DS, MME
Tylenol w/ Codeine	NPD	AL, QL, 5DS, PA, MME
Ubrelyvy	PB	PA, QL, AL
Ultracet	NPD	QL, AL, PA, MME
Ultram	NPD	QL, AL, PA, MME
Valium	NPD	PA
<i>valproic acid</i>	G	
Valtoco	NPD	PA, QL
Vanatol S/LQ	NPD	PA, QL, 5DS
<i>varenicline</i>	G, ACA	QL
<i>varenicline pak</i>	G, ACA	
<i>venlafaxine</i>	G	
<i>venlafaxine ER</i>	G	
Venlafaxine Tab 112.5mg	NPD	PA
Veozah	NPD	PA
<i>vigabatrin</i>	G, SP	PA
<i>vigadrone</i>	G, SP	PA
Vimpat tab, soln	NPD	

Bold type = Brand Name Drug *Lower case italic* = Generic drug

PA = Prior Authorization **QL** = Quantity Limits Apply **SP** = Specialty Drug **AL** = Age Limit **LCG** = Low Cost Generic

LDD = Limited Distribution Drug **5DS** = Day Supply Limit **R** = Requires Rider **G** = Generic **Q/T** = Quantity Over Time

PB = Preferred Brand **NPD** = Non Preferred Drug **ACA** = \$0 Preventative Drug **MME** = Morphine Milligram Equivalent

+ = Claim Dollar Limit

DRUG NAME +	DRUG TIER	REQUIREMENTS/ LIMITS
Virtussin AC w/ ALC liquid	NPD	QL, 5DS, MME
Vivlodex	NPD	PA
Vraylar	NPD	
Vyvanse	NPD	PA, QL
Wainua Inj	NPD, SP	PA, QL
Wakix	NPD, SP	PA, QL
Wellbutrin SR	NPD	PA
Wellbutrin XL	NPD	PA
Xadago	NPD	PA
Xanax	NPD	PA, AL
Xanax XR	NPD	PA, AL
Xcopri pak/tab	NPD	PA
Xelstrym Pad	NPD	PA, QL
Xenazine	NPD	
Xodol, Norco	NPD	QL, 5DS, PA, AL, MME
Xtampza ER	PB	PA, QL, MME
Xyrem	NPD, SP	PA, QL
Xywav Soln	NPD, SP	PA, QL
<i>zaleplon</i>	G	QL
Zarontin	NPD	
Zavzpret Nasal Soln	NPD	PA, QL, AL
Zebutal Cap 50-325-40mg	NPD	PA, QL, 5DS
Zembrace Symtouch	NPD	PA, QL
Zenzedi	NPD	PA, QL
Zimhi Soln	NPD	QL
<i>ziprasidone</i>	G	
Zohydro ER	NPD	PA, QL, MME
<i>zolmitriptan</i>	G	QL, AL
<i>zolmitriptan spray</i>	G	PA, QL, AL
Zoloft	NPD	PA
<i>zolpidem tartrate</i>	LCG	PA, QL (10mg only)
Zolpidem Tartrate Cap	NPD	PA, QL

DRUG NAME +	DRUG TIER	REQUIREMENTS/ LIMITS
<i>zolpidem tartrate ER</i>	G	PA, QL (12.5mg only)
<i>zolpidem tartrate SL</i>	G	PA, QL (3.5mg only)
Zomig	NPD	PA, QL, AL
Zonegran	NPD	PA
Zonisade Susp	NPD	PA
<i>zonisamide</i>	G	
Zorvolex	NPD	PA
Ztalmy Susp	NPD, SP	PA
Zubsolv	PB	QL
Zurzuvae	NPD	QL
Zyban	NPD	QL
Zyprexa	NPD	PA
Zyprexa Zydis	NPD	PA

HEART, BLOOD PRESSURE, & CHOLESTEROL

Accupril	NPD	PA
Accuretic	NPD	
<i>acebutolol</i>	G	
<i>acetazolamide</i>	G	
<i>acetazolamide ER</i>	G	
Actimmune	NPD, SP	PA
Adalat CC	NPD	
Adcirca	NPD, SP	PA
Adempas	PB, SP	PA
Advate	PB, SP	PA
Adynovate	NPD, SP	PA
Afstyla	NPD, SP	PA
Aggrenox	NPD	
Agrylin	NPD	
Aldactazide	NPD	
Aldactone	NPD	
<i>aliskiren</i>	G	
Alphanate	PB, SP	PA
Alphanine	NPD, SP	PA
Alprolix	NPD, SP	PA, LDD

Bold type = Brand Name Drug *Lower case italic* = Generic drug

PA = Prior Authorization **QL** = Quantity Limits Apply **SP** = Specialty Drug **AL** = Age Limit **LCG** = Low Cost Generic

LDD = Limited Distribution Drug **5DS** = Day Supply Limit **R** = Requires Rider **G** = Generic **Q/T** = Quantity Over Time

PB = Preferred Brand **NPD** = Non Preferred Drug **ACA** = \$0 Preventative Drug **MME** = Morphine Milligram Equivalent

+ = Claim Dollar Limit

DRUG NAME +	DRUG TIER	REQUIREMENTS/ LIMITS
Altace	NPD	PA
Altoprev ER	NPD	PA
Altuviio Inj	NPD, SP	PA
<i>ambrisentan</i>	G, SP	PA
Amicar	NPD	
<i>amiloride</i>	G	
<i>amiloride/HCTZ</i>	G	
<i>aminocaproic acid</i>	G	
<i>amiodarone</i>	G	
<i>amlodipine</i>	LCG	
<i>amlodipine besylate/ olmesartan</i>	G	
<i>amlodipine/ benazepril</i>	G	
<i>amlodipine/ valsartan</i>	G	
<i>amlodipine/ valsartan/HCTZ</i>	G	
<i>anagrelide</i>	G	
Antara	NPD	
Arixtra	NPD	
<i>aspirin-dipyridamole er</i>	G	
Aspruzyo Spr Gra	NPD	
Atacand	NPD	PA
Atacand HCT	NPD	PA
<i>atenolol</i>	LCG	
<i>atenolol/ chlorthalidone</i>	G	
Atorvaliq Susp	NPD	PA
<i>atorvastatin</i>	G	
<i>atorvastatin/ amlodipine</i>	G	
Avalide	NPD	PA
Avapro	NPD	PA
Azor	NPD	PA
Bebulin	NPD, SP	PA

DRUG NAME +	DRUG TIER	REQUIREMENTS/ LIMITS
<i>benazepril</i>	G	
<i>benazepril/HCTZ</i>	G	
BeneFIX	PB, SP	PA
Benicar	NPD	PA
Benicar HCT	NPD	PA
Betapace AF	NPD	
<i>betaxolol</i>	G	
Bevyxxa	NPD	QL
Bidil	NPD	
<i>bisoprolol</i>	G	
<i>bisoprolol/HCTZ</i>	G	
<i>bumetanide</i>	G	
Bystolic	NPD	PA
Byvalson	NPD	PA
Caduet	NPD	PA
Calan	NPD	
Calan SR	NPD	
Camzyos	NPD, SP	QL, PA
<i>candesartan</i>	G	
<i>candesartan/ hydrochlorothiazide</i>	G	
<i>captopril</i>	G	
<i>captopril/HCTZ</i>	G	
Cardizem	NPD	PA
Cardizem CD	NPD	PA
Cardizem LA	NPD	PA
Cardura	NPD	PA
Carospir	NPD	PA
<i>cartia XT</i>	G	
<i>carvedilol</i>	G	
<i>carvedilol ER</i>	G	
Catapres tablets	NPD	
Catapres-TTS	NPD	
<i>chlorothiazide</i>	G	
<i>chlorthalidone</i>	G	
<i>cholestyramine</i>	G	

Bold type = Brand Name Drug *Lower case italic* = Generic drug

PA = Prior Authorization **QL** = Quantity Limits Apply **SP** = Specialty Drug **AL** = Age Limit **LCG** = Low Cost Generic

LDD = Limited Distribution Drug **5DS** = Day Supply Limit **R** = Requires Rider **G** = Generic **Q/T** = Quantity Over Time

PB = Preferred Brand **NPD** = Non Preferred Drug **ACA** = \$0 Preventative Drug **MME** = Morphine Milligram Equivalent

+ = Claim Dollar Limit

DRUG NAME +	DRUG TIER	REQUIREMENTS/ LIMITS
<i>cholestyramine light</i>	G	
<i>cilostazol</i>	G	
<i>clonidine ER 12 HR tab</i>	G	QL
Clonidine ER 24HR tab	NPD	PA
<i>clonidine IR tablet</i>	LCG	
<i>clonidine patches</i>	G	
<i>clopidogrel</i>	G	
Coagadex	NPD, SP	PA
<i>colesevelam</i>	G	
Colestid	NPD	PA
<i>colestipol HCl</i>	G	
Conjupri	NPD	PA
Coreg	NPD	PA
Coreg CR	NPD	PA
Corgard	NPD	
Corifact	NPD	PA
Corlanor	NPD	PA
Corzide	NPD	
Coumadin	PB	
Cozaar	NPD	PA
Crestor	NPD	PA
<i>dabigatran cap</i>	G	
Demadex	NPD	
Dibenzylidine	NPD	PA
<i>digitek</i>	G	
<i>digox</i>	G	
<i>digoxin</i>	G	
<i>dilt-CD</i>	G	
<i>diltiazem HCl</i>	G	
<i>diltiazem HCl CD</i>	G	
<i>diltiazem HCl ER</i>	G	
<i>diltiazem HCl LA</i>	G	
<i>diltiazem HCl SR</i>	G	
<i>diltzac ER</i>	G	
Diovan	NPD	PA

DRUG NAME +	DRUG TIER	REQUIREMENTS/ LIMITS
Diovan HCT	NPD	PA
<i>dipyridamole</i>	G	
<i>disopyramide</i>	G	
<i>dofetilide</i>	G	
<i>doxazosin mesylate</i>	G	
<i>droxidopa</i>	G, SP	PA
Durlaza	NPD	PA
Dutoprol	NPD	
Dyazide	NPD	
Dyrenium	NPD	
Edarbi	NPD	PA
Edarbyclor	NPD	PA
Edecrin	NPD	
Effient	NPD	PA
Eliquis	PB	
Eloctate	NPD, SP	PA
Elyxyb Sol	NPD	PA, QL
<i>enalapril</i>	G	
<i>enalapril/HCTZ</i>	G	
<i>enalapril solution</i>	G	AL
<i>enoxaparin</i>	G	
Entadfi	NPD	PA, QL
Entresto	PB	QL
Epaned Sol 1mg/ml	NPD	AL
<i>eplerenone</i>	G	
<i>eprosartan</i>	G	PA
Esperoct	NPD, SP	PA
<i>ethacrynic acid</i>	G	
Exforge	NPD	PA
Exforge HCT	NPD	PA
Ezzalor Sprinkle Cap	NPD	PA
<i>ezetimibe</i>	G	
Ezetimibe/ Atorvastatin	NPD	PA
Ezetimibe/ Rosuvastatin	NPD	PA

Bold type = Brand Name Drug *Lower case italic* = Generic drug

PA = Prior Authorization **QL** = Quantity Limits Apply **SP** = Specialty Drug **AL** = Age Limit **LCG** = Low Cost Generic

LDD = Limited Distribution Drug **SDS** = Day Supply Limit **R** = Requires Rider **G** = Generic **Q/T** = Quantity Over Time

PB = Preferred Brand **NPD** = Non Preferred Drug **ACA** = \$0 Preventative Drug **MME** = Morphine Milligram Equivalent

+ = Claim Dollar Limit

DRUG NAME +	DRUG TIER	REQUIREMENTS/ LIMITS
<i>ezetimibe/simvastatin</i>	G	
Feiba	NPD, SP	PA
<i>felodipine ER</i>	G	
<i>fenofibrate</i>	G	
Fenofibrate Micronized	NPD	
<i>fenofibrate nanocrystallized</i>	G	
<i>fenofibric acid</i>	G	
Fenoglide	NPD	
Fibricor	NPD	
<i>flecainide</i>	G	
Flolipid susp	NPD	AL
<i>fluvastatin sodium</i>	G	
<i>fondaparinux</i>	G	
<i>fosinopril</i>	G	
<i>fosinopril/HCTZ</i>	G	
Fragmin	NPD	
Furoscix Kit 80mg/10ml	NPD	
<i>furosemide solution</i>	LCG	
<i>furosemide tabs</i>	LCG	
<i>gemfibrozil</i>	G	
<i>guanfacine</i>	G	
Helixate FS	NPD, SP	PA
Hemangeol Soln	NPD	PA
Hemlibra Soln	NPD, SP	PA
Hemofil M	NPD, SP	PA
Humate-P	PB, SP	PA
<i>hydralazine</i>	G	
<i>hydrochlorothiazide</i>	LCG	
Hyzaar	NPD	PA
<i>icosapent cap</i>	G	
<i>indapamide</i>	G	
Inderal LA	NPD	PA

DRUG NAME +	DRUG TIER	REQUIREMENTS/ LIMITS
InnoPran XL	NPD	PA
Inpefa	NPD	PA
Inspra	NPD	PA
<i>irbesartan</i>	G	
<i>irbesartan hydrochlorothiazide</i>	G	
Isordil Titradose Tabs	NPD	
<i>isosorb dinitrate-hydralazine</i>	G	
<i>isosorbide dinitrate</i>	G	
<i>isosorbide dinitrate ER</i>	G	
<i>isosorbide mononitrate</i>	G	
<i>isosorbide mononitrate ER</i>	G	
<i>isradipine</i>	G	
Ixinity	NPD, SP	PA
<i>jantoven</i>	G	
Jesduvroq	NPD, SP	PA
Jivi	NPD, SP	PA
Juxtapid	NPD, SP	PA
Kaspargo	NPD	PA
Katerzia Susp	NPD	PA, AL
Kerendia	NPD	PA
Koate-DVI	PB, SP	PA
Kogenate FS	PB, SP	PA
Kovaltry Sol	PB, SP	PA
Kynamro	NPD, SP	PA
<i>labetalol HCl</i>	G	
Lanoxin	NPD	
Lasix	NPD	
Lescol XL	NPD	PA
Letairis	NPD, SP	PA
Levamlodipine	NPD	PA
Lipitor	NPD	PA
Lipofen	NPD	

Bold type = Brand Name Drug *Lower case italic* = Generic drug

PA = Prior Authorization **QL** = Quantity Limits Apply **SP** = Specialty Drug **AL** = Age Limit **LCG** = Low Cost Generic

LDD = Limited Distribution Drug **SDS** = Day Supply Limit **R** = Requires Rider **G** = Generic **Q/T** = Quantity Over Time

PB = Preferred Brand **NPD** = Non Preferred Drug **ACA** = \$0 Preventative Drug **MME** = Morphine Milligram Equivalent

+ = Claim Dollar Limit

DRUG NAME +	DRUG TIER	REQUIREMENTS/ LIMITS
Liqrev Susp	NPD, SP	PA
<i>lisinopril</i>	LCG	
<i>lisinopril/HCTZ</i>	LCG	
Livalo	NPD	PA
Lopid	NPD	
Lopressor HCT	NPD	
<i>losartan</i>	G	
<i>losartan-HCTZ</i>	G	
Lotensin	NPD	
Lotrel	NPD	PA
<i>lovastatin</i>	G	
Lovaza	NPD	PA
Lovenox	NPD	
Maxzide	NPD	
<i>methyl dopa</i>	G	
<i>metolazone</i>	G	
<i>metoprolol succinate</i>	G	
<i>metoprolol tartrate</i>	LCG	
<i>metoprolol tartrate/HCT</i>	G	
Mevacor	NPD	
<i>mexiletine HCl</i>	G	
Micardis	NPD	PA
Micardis HCT	NPD	PA
Microzide	NPD	
Minipress	NPD	
<i>minitran</i>	G	
<i>minoxidil</i>	G	
<i>moexipril</i>	G	
<i>moexipril/HCTZ</i>	G	
Monoclate-P	NPD, SP	PA
Mononine	PB, SP	PA
Mulpleta	NPD, SP	PA
Multaq	PB	
<i>nadolol</i>	G	

DRUG NAME +	DRUG TIER	REQUIREMENTS/ LIMITS
<i>nadolol-bendroflume thiazide</i>	G	
<i>nebivolol</i>	G	
Nexiclon XR	NPD	PA
Nexletol	PB	PA
Nexlizet	PB	PA
<i>niacin ER</i>	G	
Niaspan ER	NPD	PA
<i>nicardipine</i>	G	
<i>nifedical XL</i>	G	
<i>nifedipine</i>	G	
<i>nifedipine ER</i>	G	
<i>nimodipine</i>	G	
<i>nisoldipine ER</i>	G	
Nitro-Bid	PB	
Nitro-Dur	NPD	
<i>nitro-time cap</i>	G	
Nitro-Time CR Cap	NPD	
<i>nitroglycerin ER</i>	LCG	
<i>nitroglycerin oint 0.4%</i>	G	
<i>nitroglycerin patches</i>	G	
<i>nitroglycerin SL</i>	G	
<i>nitroglycerin spray</i>	G	
Nitrolingual Spray	NPD	
Nitromist	NPD	
Nitrostat SL	NPD	
Nocdurna SL	NPD	
Norliqva Soln	NPD	PA, AL
Norpace	NPD	
Northera	NPD, SP	PA
Norvasc	NPD	PA
Novoeight	PB, SP	PA
NovoSeven RT	NPD, SP	PA

Bold type = Brand Name Drug *Lower case italic* = Generic drug

PA = Prior Authorization **QL** = Quantity Limits Apply **SP** = Specialty Drug **AL** = Age Limit **LCG** = Low Cost Generic

LDD = Limited Distribution Drug **5DS** = Day Supply Limit **R** = Requires Rider **G** = Generic **Q/T** = Quantity Over Time

PB = Preferred Brand **NPD** = Non Preferred Drug **ACA** = \$0 Preventative Drug **MME** = Morphine Milligram Equivalent

+ = Claim Dollar Limit

DRUG NAME +	DRUG TIER	REQUIREMENTS/ LIMITS
Nuwiq	PB, SP	PA
Nymalize Sol	NPD	
Obizur	NPD	PA
<i>olmesartan medoxomil</i>	G	
<i>olmesartan/ amlodipine/hctz</i>	G	
<i>olmesartan/hctz</i>	G	
<i>omega-3 acid ethyl esters</i>	G	
Opsumit	PB, SP	PA
Opsynvi	NPD, SP	PA
Orenitram	NPD, SP	PA
Ormalvi Tab	NPD, SP	PA
<i>pacerone</i>	G	
<i>pentoxifylline ER</i>	G	
<i>perindopril</i>	G	
Persantine	NPD	
<i>phenoxybenz-amine hcl</i>	G	PA
<i>pindolol ER</i>	G	
<i>pitavastatin</i>	G	
Plavix	NPD	PA
Pradaxa	NPD	
Pradaxa Pak	NPD	PA
Praluent	NPD	PA
<i>prasugrel</i>	G	
Pravachol	NPD	
<i>pravastatin</i>	G	
<i>prazosin</i>	G	
<i>prevalite</i>	G	
Prinivil	NPD	PA
Procardia	NPD	
Procardia XL	NPD	
Profilnine	NPD, SP	PA
Promacta	NPD, SP	PA
<i>propafenone</i>	G	
<i>propafenone ER</i>	G	

DRUG NAME +	DRUG TIER	REQUIREMENTS/ LIMITS
<i>propranolol</i>	G	
<i>propranolol ER</i>	G	
<i>propranolol/ HCTZ</i>	G	
Qbrelis	NPD	AL
Questran Light	NPD	PA
Questran Packet/Powder	NPD	PA
<i>quinapril</i>	LCG	
<i>quinapril/HCTZ</i>	G	
<i>ramipril</i>	G	
Ranexa	NPD	
<i>ranolazine tab ER</i>	G	
Rebinyn Soln	NPD, SP	PA
Recombinate	PB, SP	PA
Rectiv Oint	NPD	
Repatha	PB	PA
Revatio	NPD, SP	PA
Riastap	NPD	PA
Rixubis	NPD, SP	PA
<i>rosuvastatin</i>	G	
Roszet	NPD	PA
Rythmol	NPD	
Rythmol SR	NPD	PA
Samsca	NPD, SP	PA, LDD
Sevenfact Inj	NPD, SP	PA
<i>sildenafil citrate 20mg tab, 10mg/ml susp</i>	G, SP	PA
<i>sildenafil citrate 25mg, 50mg, 100mg</i>	LCG	QL
<i>simvastatin</i>	LCG	
Simvastatin susp	NPD	AL
Soanz	NPD	PA
<i>sotalol HCl</i>	G	
Sotylize soln	NPD	
<i>spironolactone</i>	G	

Bold type = Brand Name Drug *Lower case italic* = Generic drug

PA = Prior Authorization **QL** = Quantity Limits Apply **SP** = Specialty Drug **AL** = Age Limit **LCG** = Low Cost Generic

LDD = Limited Distribution Drug **SDS** = Day Supply Limit **R** = Requires Rider **G** = Generic **Q/T** = Quantity Over Time

PB = Preferred Brand **NPD** = Non Preferred Drug **ACA** = \$0 Preventative Drug **MME** = Morphine Milligram Equivalent

+ = Claim Dollar Limit

DRUG NAME +	DRUG TIER	REQUIREMENTS/LIMITS
<i>spironolactone/HCTZ</i>	G	
Stimate	NPD	
Sular	NPD	
<i>tadalafil (generic Adcirca)</i>	G, SP	PA
<i>tadalafil (generic Cialis)</i>	G	QL
Tadliq Susp	NPD, SP	PA
Tarka	NPD	
<i>taztia XT</i>	G	
Tekturna/Tekturna HCT	NPD	PA
<i>telmisartan</i>	G	
<i>telmisartan-amlodipine</i>	G	
<i>telmisartan/hydrochlorothiazide</i>	G	
Tenoretic	NPD	PA
Tenormin	NPD	PA
Thalitone	NPD	
<i>tiadylt ER</i>	G	
Tiazac	NPD	
<i>ticlopidine HCl</i>	G	
Tikosyn	NPD	
<i>timolol maleate tab</i>	G	
<i>tolvaptan 15mg, 30mg tab</i>	G, SP	PA
Toprol XL	NPD	
<i>torse mide</i>	G	
Tracleer	PB, SP	PA, LDD
<i>trandolapril</i>	G	
<i>trandolapril/verapamil ER</i>	G	
Tretten	NPD, SP	PA
<i>triamterene/HCTZ</i>	LCG	
<i>triamterene cap</i>	G	

DRUG NAME +	DRUG TIER	REQUIREMENTS/LIMITS
Tribenzor	NPD	PA
Tricor	NPD	
Trilipix	NPD	PA
Twynsta	NPD	PA
Tyvaso	NPD, SP	PA
Upravi	NPD, SP	PA
<i>valsartan</i>	G	
<i>valsartan/hydrochlorothiazide</i>	G	
Valsartan Soln	NPD	PA, AL
Vascepa	NPD	PA
Vaseretic	NPD	
Vasotec	NPD	PA
<i>vecamyl</i>	G	PA
Ventavis	NPD, SP	PA
<i>verapamil HCl</i>	G	
<i>verapamil HCl ER</i>	G	
Verelan ER, PM	NPD	PA
Verquvo	NPD	PA, QL
Vijoice	NPD, SP	PA, QL
Vonvendi	NPD, SP	PA
Voxzogo	NPD, SP	PA
Vyndaqel, Vyndamax	NPD, SP	PA
Vytorin	NPD	PA
<i>warfarin</i>	G	
Welchol	NPD	PA
Wilate	PB, SP	PA
Xarelto	PB	
Xolremdi	NPD, SP	PA, QL
Xyntha	PB, SP	PA
Zestoretic	NPD	
Zestril	NPD	PA
Zetia	NPD	PA
Ziac	NPD	
Zocor	NPD	PA
Zypitamag	NPD	PA

Bold type = Brand Name Drug *Lower case italic* = Generic drug

PA = Prior Authorization **QL** = Quantity Limits Apply **SP** = Specialty Drug **AL** = Age Limit **LCG** = Low Cost Generic

LDD = Limited Distribution Drug **SDS** = Day Supply Limit **R** = Requires Rider **G** = Generic **Q/T** = Quantity Over Time

PB = Preferred Brand **NPD** = Non Preferred Drug **ACA** = \$0 Preventative Drug **MME** = Morphine Milligram Equivalent

+ = Claim Dollar Limit

DRUG NAME +	DRUG TIER	REQUIREMENTS/ LIMITS
SKIN MEDICATIONS		
Absorica	NPD	PA
Absorica LD	NPD	PA
Acanya	NPD	PA
<i>accutane cap</i>	G	
<i>acitretin</i>	G	
<i>acyclovir cream/ oint</i>	LCG	
Aczone	NPD	PA, AL
Adapalene 0.1% lotion	NPD	AL
<i>adapalene 0.1% soln</i>	G	AL
<i>adapalene 0.3% gel</i>	G	AL
<i>adapalene cream</i>	G	AL
<i>adapalene-benzoyl-peroxide gel</i>	G	AL
Adapalene pad 0.1%	NPD	PA, AL
Adbry Inj 150mg/ml	PB, SP	PA
Aklief Cream 0.005%	NPD	PA, AL
Aktipak	NPD	PA
<i>ala-cort cream</i>	LCG	
Ala-Scalp Lotion	NPD	PA
<i>alclometasone cream, ointment</i>	G	
Aldara	NPD	
Altreno 0.05% lotion	NPD	PA, AL
<i>amcinonide</i>	G	
<i>anthralin</i>	G	
ApexiCon E	NPD	PA
Arazlo lotion 0.045%	NPD	PA, AL
Atralin	NPD	PA, AL
<i>avita</i>	G	AL

DRUG NAME +	DRUG TIER	REQUIREMENTS/ LIMITS
<i>azelaic acid gel 15%</i>	G	
Azelex	NPD	PA
Benzaclin	NPD	PA
Benzamycin gel	NPD	PA
Benzamycinpak	NPD	PA
<i>benzoyl peroxide/ erythromycin</i>	G	
<i>beseer lotion 0.05%</i>	G	
<i>betamethasone dipropionate</i>	G	
<i>betamethasone valerate</i>	G	
<i>betamethasone/ clotrimazole</i>	G	
Bimzelx Inj	NPD, SP	PA
<i>brimonidine gel 0.33%</i>	G	
Bryhali lotion 0.01%	NPD	PA
Cabtreo Gel	NPD	PA
<i>calcipotriene cream</i>	G	
Calcipotriene foam	NPD	PA
<i>calcipotriene-betamethasone dp oint</i>	G	
<i>calcipotriene-betamethasone dp susp</i>	G	
<i>calcitriol ointment</i>	G	
Capex	NPD	PA
Carac	NPD	PA
Centany 2% oint	NPD	
Cibinquo Tab	PB, SP	PA
<i>ciclopirox 0.77% cream</i>	G	

Bold type = Brand Name Drug *Lower case italic* = Generic drug

PA = Prior Authorization **QL** = Quantity Limits Apply **SP** = Specialty Drug **AL** = Age Limit **LCG** = Low Cost Generic

LDD = Limited Distribution Drug **5DS** = Day Supply Limit **R** = Requires Rider **G** = Generic **Q/T** = Quantity Over Time

PB = Preferred Brand **NPD** = Non Preferred Drug **ACA** = \$0 Preventative Drug **MME** = Morphine Milligram Equivalent

+ = Claim Dollar Limit

DRUG NAME +	DRUG TIER	REQUIREMENTS/ LIMITS
<i>ciclopirox 8% solution</i>	G	
<i>ciclopirox cream, gel, shampoo, suspension</i>	G	
Cleocin T	NPD	PA
Clindagel	NPD	PA
<i>clindamycin, clindamycin-benzoyl peroxide gel [w/pump]</i>	G	
Clindamycin/benzoyl peroxide 1-5%	NPD	PA
<i>clindamycin HCL cap</i>	LCG	
<i>clindamycin phosphate sol 1%</i>	LCG	
<i>clindamycin/tretinoin gel</i>	G	AL
<i>clind/benz gel 1.2-3.75%</i>	G	
<i>clobetasol cream, ointment, solution</i>	G	
Clobex	NPD	PA
Clocortolone pivalate	NPD	PA
<i>clodan</i>	G	
Cloderm	NPD	PA
Condylox	NPD	
Cordran	NPD	PA
Cosentyx	NPD, SP	PA
Crotan Lotion	NPD	
Cutivate	NPD	PA
Dapsone Gel	NPD	PA, AL
Denavir	NPD	QL
Derma-Smoother FS	NPD	PA
Dermatop	NPD	
Desonate	NPD	PA

DRUG NAME +	DRUG TIER	REQUIREMENTS/ LIMITS
<i>desonide gel 0.05%</i>	G	
Desowen	NPD	PA
<i>desoximetasone cream, gel, ointment</i>	G	
<i>diclofenac 3% gel</i>	G	PA
Differin 0.1% cream	NPD	PA, AL
Differin 0.1% lotion	NPD	PA, AL
Differin 0.3% gel	NPD	PA, AL
Diflorasone diacetate	NPD	PA
Diprolene, Diprolene AF	NPD	
Dovonex cream	NPD	
<i>doxepin cream 5%</i>	G	QL
Duac	NPD	PA
Duobrii Lotion	NPD	PA
Dupixent	PB, SP	PA
<i>econazole</i>	G	
Ecoza	NPD	PA
Efudex cream	NPD, SP	
Elidel	NPD	PA
Elimite	NPD	
Elocon	NPD	
Enstilar	NPD	
Epiduo	NPD	AL
Epiduo Forte gel	NPD	AL
Epsolay Cream	NPD	PA
Ertaczo	NPD	PA
Erygel	NPD	
<i>erythromycin gel, soln, swabs</i>	G	
Eucrisa	PB	PA
Eurax Lotion	NPD	

Bold type = Brand Name Drug *Lower case italic* = Generic drug

PA = Prior Authorization **QL** = Quantity Limits Apply **SP** = Specialty Drug **AL** = Age Limit **LCG** = Low Cost Generic

LDD = Limited Distribution Drug **SDS** = Day Supply Limit **R** = Requires Rider **G** = Generic **Q/T** = Quantity Over Time

PB = Preferred Brand **NPD** = Non Preferred Drug **ACA** = \$0 Preventative Drug **MME** = Morphine Milligram Equivalent

+ = Claim Dollar Limit

DRUG NAME +	DRUG TIER	REQUIREMENTS/ LIMITS
Evoclin	NPD	PA
Exelderm	NPD	PA
Extina	NPD	PA
Fabior	NPD	PA, AL
Fasenra	PB, SP	PA
Filsuvez Gel 10%	NPD, SP	PA, QL
Finacea	NPD	PA
<i>fluocinolone acetonide cream, sol, oil</i>	G	
<i>fluocinonide gel</i>	G	
<i>fluocinonide ointment</i>	G	
Fluorouracil cream 0.5%	PB	
<i>fluorouracil solution 2%</i>	G, SP	
Flurandrenolide cream, lozn, oint	NPD	PA
<i>fluticasone propionate cream, lozn, oint.</i>	G	
<i>gentamicin topical cream, ointment</i>	G	
<i>halcinonide cream 0.1%</i>	G	
<i>halobetasol AER 0.05%</i>	G	
<i>halobetasol propionate</i>	G	
Halobetasol propionate foam 0.05%	NPD	PA
Halog	NPD	PA
<i>hydrocortisone 2.5%</i>	G	
<i>hydrocortisone butyrate 0.1%</i>	G	
<i>hydrocortisone lot 0.1%</i>	LCG	
<i>hydrocortisone butyrate/emoll</i>	G	

DRUG NAME +	DRUG TIER	REQUIREMENTS/ LIMITS
<i>hydrocortisone supp</i>	G	
<i>hydrocortisone valerate 0.2%</i>	G	
<i>hydrocortisone/lidocaine HCl</i>	G	
<i>imiquimod cream</i>	G	PA
Imiquimod Cream 3.75% Pump	NPD	PA
Impeklo Lotion 0.05%	NPD	PA
Impoyz Cream 0.025%	NPD	PA
<i>isotretinoin</i>	G	
Jublia	NPD	PA
Kenalog Spray	NPD	PA
Kerydin	NPD	PA
<i>ketoconazole cream</i>	G	
<i>ketoconazole shampoo</i>	G	
Klisyri Oint 1%	NPD	PA
Klaron	NPD	
Lexette Foam 0.05%	NPD	PA
<i>lidocaine patch 5%</i>	G	
<i>lidocaine solution, gel, ointment</i>	G	
Lidoderm	NPD	PA
Litfulo	NPD, SP	PA
Locoid	NPD	PA
Locoid Lipocream	NPD	PA
Loprox	NPD	PA
Lotrisone	NPD	
Luxiq	NPD	PA
Luzu	NPD	PA
<i>malathion lotion</i>	G	

Bold type = Brand Name Drug *Lower case italic* = Generic drug

PA = Prior Authorization **QL** = Quantity Limits Apply **SP** = Specialty Drug **AL** = Age Limit **LCG** = Low Cost Generic

LDD = Limited Distribution Drug **SDS** = Day Supply Limit **R** = Requires Rider **G** = Generic **Q/T** = Quantity Over Time

PB = Preferred Brand **NPD** = Non Preferred Drug **ACA** = \$0 Preventative Drug **MME** = Morphine Milligram Equivalent

+ = Claim Dollar Limit

DRUG NAME +	DRUG TIER	REQUIREMENTS/ LIMITS
<i>methoxsalen</i>	G	
MetroCream	NPD	
MetroGel	NPD	
MetroLotion	NPD	
<i>metronidazole cream, lotion, gel</i>	G	
Miconazole-zinc ointment	NPD	PA
Mirvaso	PB	
<i>mometasone cream, ointment, solution</i>	LCG	
<i>mupirocin cream, ointment</i>	G	
<i>naftifine cream, gel</i>	G	
Naftin	NPD	
Natroba	NPD	
Nizoral shampoo	NPD	
Noritrate	NPD	PA
<i>nystatin/ triamcinolone cream, ointment</i>	LCG	
<i>nystatin suspension</i>	G	
Olux [E]	NPD	PA
Onexton	NPD	PA
Opzelura Cream	PB	PA, QL
Ovide	NPD	
Oxiconazole nitrate	NPD	PA
Oxistat	NPD	PA
Oxsoralen Ultra	NPD	
Pandel	NPD	PA
Panretin Gel	NPD	PA
<i>penciclovir cream</i>	G	QL
Penlac	NPD	PA
<i>permethrin</i>	G	

DRUG NAME +	DRUG TIER	REQUIREMENTS/ LIMITS
<i>pimecrolimus cre 1%</i>	G	
<i>podofilox soln/ gel</i>	G	
Pramosone cream/lotion	NPD	PA
<i>prednicarbate ointment</i>	G	
<i>prilocaine/ lidocaine</i>	G	
Proctocort Supp 30mg	NPD	PA
Proctofoam HC	PB	
Prudoxin cream 5%	NPD	QL
Qbrexza Pad 2.4%	NPD	PA, QL
Retin-A	NPD	PA, AL
Retin-A Micro	NPD	PA, AL
Rhofade 1% cream	NPD	PA
<i>selenium sulfide shampoo/lotion</i>	G	
Sernivo	NPD	PA
Siliq	NPD, SP	PA
Silvadene	NPD	
<i>silver sulfadiazine</i>	LCG	
Skyrizi Inj	PB, SP	PA
<i>sodium sulfacetamide suspension</i>	G	
Solaraze	NPD	PA
Soolantra	PB	
Soriatane	NPD	
Sorilux Foam	NPD	PA
Spevigo Inj	NPD, SP	PA
<i>spinosad</i>	G	
<i>SSD cream</i>	LCG	
Sulconazole cream/solution	NPD	PA

Bold type = Brand Name Drug *Lower case italic* = Generic drug

PA = Prior Authorization **QL** = Quantity Limits Apply **SP** = Specialty Drug **AL** = Age Limit **LCG** = Low Cost Generic

LDD = Limited Distribution Drug **SDS** = Day Supply Limit **R** = Requires Rider **G** = Generic **Q/T** = Quantity Over Time

PB = Preferred Brand **NPD** = Non Preferred Drug **ACA** = \$0 Preventative Drug **MME** = Morphine Milligram Equivalent

+ = Claim Dollar Limit

DRUG NAME +	DRUG TIER	REQUIREMENTS/ LIMITS
Sulfamylon	NPD	
Synalar	NPD	PA
Taclonex	NPD	
Taltz Autoinjector	NPD, SP	PA
Targretin gel	NPD, SP	PA
<i>tavorole soln 5%</i>	G	PA
Tazarotene AER 0.1%	NPD	PA, AL
<i>tazarotene gel</i>	G	AL
Tazorac cream/gel	NPD	PA, QL
Temovate	NPD	
Texacort soln	NPD	PA
Topicort	NPD	PA
Tremfya	PB, SP	PA
<i>tretinoin gel, cream</i>	G	AL
Tretinoin microspheres gel	NPD	AL
<i>triamcinolone acetonide</i>	LCG	
Triamcinolone oint 0.05%	NPD	PA
Trianex	NPD	PA
Tridacaine/ Tridacaine II Pad 5%	NPD	PA, QL
<i>triderm cream</i>	LCG	
Tritocin oint 0.05%	NPD	PA
Twyneo 0.1-3% Cream	NPD	PA, AL
Tyenne	NPD, SP	PA
Ultravate	NPD	PA
Vectical	NPD	
Veltin	NPD	PA, AL
Verdeso	NPD	PA
Veregen Oint	NPD	PA, QL

DRUG NAME +	DRUG TIER	REQUIREMENTS/ LIMITS
Vtama Cream	NPD	PA
Vusion	NPD	PA
Winlevi Cream 1%	NPD	PA
Wynzora Cream	NPD	
Xaciato Gel	NPD	
Xerese Cream	NPD	PA
Xolegel	NPD	PA
Ziana	NPD	PA, AL
Zilxi Aer	NPD	PA
Zonalon cream 5%	NPD	QL
Zoryve Cream/Foam	NPD	PA
Zovirax cream	NPD	QL
Zovirax oint	NPD	
Ztlido Patch	NPD	PA, QL
Zyclara Cream	NPD	PA
Zyclara Pump	NPD	PA

EAR, NOSE, THROAT MEDICATIONS

<i>acetasol HC, acetic acid HC otic</i>	G	
<i>azelastine</i>	G	
Bactroban nasal oint	PB	
Cetraxal	NPD	
<i>cevimeline hcl</i>	G	
Ciprodex	NPD	
<i>ciprofloxacin</i>	G	
<i>ciprofloxacin-dexamethasone otic susp</i>	G	
Ciprofloxacin-fluocinolone PF otic soln	NPD	
<i>cortane B otic drops</i>	G	
Dermotic	NPD	

Bold type = Brand Name Drug *Lower case italic* = Generic drug

PA = Prior Authorization **QL** = Quantity Limits Apply **SP** = Specialty Drug **AL** = Age Limit **LCG** = Low Cost Generic

LDD = Limited Distribution Drug **SDS** = Day Supply Limit **R** = Requires Rider **G** = Generic **Q/T** = Quantity Over Time

PB = Preferred Brand **NPD** = Non Preferred Drug **ACA** = \$0 Preventative Drug **MME** = Morphine Milligram Equivalent

+ = Claim Dollar Limit

DRUG NAME +	DRUG TIER	REQUIREMENTS/ LIMITS
Evoxac	NPD	PA
<i>fluocinolone acetonide oil</i>	G	
<i>mometasone furoate nasal spray</i>	G	PA
Nasonex	NPD	PA
<i>neomycin/ polymyxin/ hydrocortisone</i>	LCG	
<i>ofloxacin otic</i>	LCG	
<i>olopatadine</i>	G	
Omnaris	NPD	
Patanase	NPD	PA
<i>pilocarpine HCl</i>	G	
Qnasl	NPD	PA
<i>ribavirin</i>	G, SP	
Ryaltris Spray 665-25mcg/act	NPD	PA
Salagen	NPD	
Virazole	NPD, SP	
Vuity	NPD	PA
Xhance	NPD	PA
Zetonna	NPD	

DIABETES, THYROID, STEROIDS, & OTHER MISCELLANEOUS HORMONES

<i>acarbose</i>	G	
Actos	NPD	PA
Adthyza tab	NPD	
Adlyxin	NPD	PA
Admelog	PB	QL
Afrezza	NPD	PA
Alkindi Sprinkle Cap	NPD	PA
Alogliptin benz/ metformin hcl	PB	
Alogliptin benz/ pioglitazone	PB	
Alogliptin benzoate	PB	
Amaryl	NPD	PA

DRUG NAME +	DRUG TIER	REQUIREMENTS/ LIMITS
Androderm patch	NPD	PA
Androgel 1.62% Packet, Pump	NPD	PA
Androgel 1%	NPD	PA
Apidra	PB	QL
Armour Thyroid	NPD	
Aveed Soln 750mg/3ml Intramuscular	NPD	PA
Axiron	NPD	PA
Bafiertam DR Cap	PB, SP	
Baqsimi	PB	
Basaglar	PB	QL
<i>betaine powder</i>	G, SP	
Bexagliflozin	NPD	PA
Breeze2 Glucometer	PB	PA, QL
Breeze2 Test Strips	NPD	PA, QL
Brenzavvy	NPD	PA
Bydureon	PB	PA, QL
Byetta	PB	PA, QL
Bynfezia Pen	NPD, SP	PA
<i>calcitriol capsules</i>	G	
Carnitor	NPD	
Cetrotide Kit	NPD, SP	R
<i>cinacalcet</i>	G	
Contour Glucometer	PB	QL
Contour Next Test Strips	PB	QL
Contour Test Strips	PB	QL
Cortef	NPD	
Cortisone tab	NPD	
Cytomel	NPD	
<i>danazol</i>	G	

Bold type = Brand Name Drug *Lower case italic* = Generic drug

PA = Prior Authorization **QL** = Quantity Limits Apply **SP** = Specialty Drug **AL** = Age Limit **LCG** = Low Cost Generic

LDD = Limited Distribution Drug **SDS** = Day Supply Limit **R** = Requires Rider **G** = Generic **Q/T** = Quantity Over Time

PB = Preferred Brand **NPD** = Non Preferred Drug **ACA** = \$0 Preventative Drug **MME** = Morphine Milligram Equivalent

+ = Claim Dollar Limit

DRUG NAME +	DRUG TIER	REQUIREMENTS/ LIMITS
Dapagliflozin pro-metformin ER tablet 24 hour 10-1000mg, 5-1000mg	NPD	PA
Dapagliflozin propanediol tablet 10mg, 5mg	NPD	PA
DDAVP	NPD	PA
<i>deflazacort tab/sus</i>	G, SP	PA
Degludec Flextouch Inj	NPD	PA, QL
Delatestryl	NPD	PA
Delestrogen Oil Intramuscular	NPD	
Demser	NPD	
Depo-Estradiol Oil 5mg/ml Intramuscular	NPD	PA
Depo-Testosterone Solution 100mg/ml, 200mg/ml	NPD	
<i>desmopressin acetate</i>	G	
Desmopressin Nasal Soln	NPD	
Dexabliss tab 1.5mg	NPD	
<i>dexamethasone</i>	LCG	
<i>dexamethasone tablet 6-day, 10-day, 13-day</i>	G	
Dexcom Continuous Glucose Monitor Receiver	PB	PA, QL

DRUG NAME +	DRUG TIER	REQUIREMENTS/ LIMITS
Dexcom Continuous Glucose Monitor Transmitter	PB	PA, QL
Dexcom Continuous Glucose Monitor G7, G6, G5, G4 Sensors	PB	PA, QL
Dexpak pak 10-day, 13-day	NPD	
<i>diazoxide suspension 50mg/ml</i>	G	
<i>doxercalciferol</i>	G	
Duetact	NPD	PA
Dxevo 11-day Pak 1.5mg	NPD	
Emflaza	NPD, SP	PA
Enspryng Inj	NPD, SP	PA
Eohilia Sus	NPD	PA, QL
Ermeza Soln	NPD	PA
<i>euthyrox</i>	G	
Eversense E3 Sensor	NPD	PA, QL
Eversense E3 Transmitter	NPD	PA, QL
Evrysdi Soln	NPD, SP	PA
Farxiga	PB	
Fiasp	PB	QL
<i>fludrocortisone acetate</i>	G	
Fortamet	NPD	PA
Forteo	NPD, SP	PA, Q/T
Fortesta	NPD	PA
Freestyle Glucometer	PB	PA, QL
Freestyle InsuLinx Test Strips	NPD	PA, QL

Bold type = Brand Name Drug *Lower case italic* = Generic drug

PA = Prior Authorization **QL** = Quantity Limits Apply **SP** = Specialty Drug **AL** = Age Limit **LCG** = Low Cost Generic

LDD = Limited Distribution Drug **SDS** = Day Supply Limit **R** = Requires Rider **G** = Generic **Q/T** = Quantity Over Time

PB = Preferred Brand **NPD** = Non Preferred Drug **ACA** = \$0 Preventative Drug **MME** = Morphine Milligram Equivalent

+ = Claim Dollar Limit

DRUG NAME +	DRUG TIER	REQUIREMENTS/ LIMITS
FreeStyle Libre Reader, Sensor, Reader Device	NPD	PA, QL
Freestyle Lite Test Strips	NPD	PA, QL
Freestyle Test Strips	NPD	PA, QL
Genotropin	NPD, SP	PA
<i>glimepiride</i>	G	
<i>glipizide ER</i>	G	
<i>glipizide tab</i>	LCG	
<i>glipizide XL</i>	G	
Glucagen Inj Hypokit	NPD	PA
<i>glucagon emergency kit (generic)</i>	G	
Glucagon Emergency Kit (Lilly)	NPD	PA
Glucophage	NPD	
Glucophage XR	NPD	
Glucotrol XL	NPD	PA
Glucovance	NPD	
<i>glyburide</i>	G	
<i>glyburide micronized</i>	G	
Glynase	NPD	
Glyset	NPD	
Glyxambi	PB	
Gvoke HypoPen	NPD	PA
Gvoke PFS inj	NPD	PA
Hectorol	NPD	
Hemady	NPD	
Humalog	PB	QL
Humatrope	NPD, SP	PA
Humulin	PB	QL
Humulin R U-500 (Concentrated and KwikPen)	PB	QL

DRUG NAME +	DRUG TIER	REQUIREMENTS/ LIMITS
<i>hydrocortisone</i>	G	
Increlex	NPD, SP	PA, LDD
Insulin aspart inj	NPD	PA, QL
Insulin aspart protamin inj flexpen	NPD	PA, QL
Insulin Degludec Inj	NPD	PA, QL
Insulin Glargine	NPD	PA, QL
Insulin lispro 100 units/ml	PB	QL
Insulin lispro inj junior	PB	QL
Insulin lispro inj protamin	PB	QL
Invokamet [XR]	NPD	PA
Invokana	NPD	PA
Janumet	PB	
Janumet XR	PB	
Januvia	PB	
Jardiance	PB	
Jatenzo	NPD	PA
Jentadueto tablet	PB	
Jentadueto XR	PB	
Kazano tablet	NPD	PA
Kesimpta Inj	PB, SP	
Kombiglyze XR	NPD	PA
Korlym tablet	NPD, SP	PA
Kyzatrex	NPD	PA
Lantus	PB	QL
Levemir	NPD	PA, QL, AL
<i>levocarnitine</i>	LCG	
Levothyroxine cap	NPD	PA
<i>levothyroxine tab</i>	G	
<i>levo-T tab</i>	G	
<i>levoxyl</i>	G	

Bold type = Brand Name Drug *Lower case italic* = Generic drug

PA = Prior Authorization **QL** = Quantity Limits Apply **SP** = Specialty Drug **AL** = Age Limit **LCG** = Low Cost Generic
LDD = Limited Distribution Drug **5DS** = Day Supply Limit **R** = Requires Rider **G** = Generic **Q/T** = Quantity Over Time
PB = Preferred Brand **NPD** = Non Preferred Drug **ACA** = \$0 Preventative Drug **MME** = Morphine Milligram Equivalent
+ = Claim Dollar Limit

DRUG NAME +	DRUG TIER	REQUIREMENTS/ LIMITS
Lilly Glucagon Emergency Kit	NPD	PA
<i>liothyronine</i>	G	
Liraglutide Inj	PB	PA, QL
Lyumjev Inj/ Pen	PB	QL
Medtronic Continuous Glucose Monitor Receiver	NPD	PA, QL
Medtronic Continuous Glucose Monitor Guardian Transmitter	NPD	PA, QL
Medtronic Continuous Glucose Monitor Enlite, MiniMed Guardian Sensors	NPD	PA, QL
Medrol	NPD	
<i>metformin</i>	LCG	
Metformin 625mg	NPD	PA
<i>metformin ER (generic for Glucophage XR)</i>	G	
<i>metformin HCL 500mg/5ml soln</i>	G	AL
Metformin HCL ER (OSM)	NPD	PA
<i>metformin/ glyburide</i>	G	
<i>methimazole</i>	G	
Methitest Tab	NPD	PA
<i>methylpred-nisolone</i>	G	
<i>methylpred-nisolone therapy pak</i>	G	

DRUG NAME +	DRUG TIER	REQUIREMENTS/ LIMITS
<i>methyltest-osterone</i>	G	PA
<i>metyrosine</i>	G	
<i>mifepristone</i>	G, SP	PA
<i>miglitol</i>	G	
Millipred	NPD	PA
Mounjaro Inj	PB	PA, QL
Myalept	NPD, SP	PA
Mycapssa cap nateglinide	NPD, SP	PA
<i>nateglinide</i>	G	
Natesto	NPD	PA
Natpara	NPD, SP	PA
Nature-Throid	NPD	
Nesina tablet	NPD	PA
Ngenla Inj	NPD, SP	PA
Noctiva Emulsion	NPD	
Non Preferred Diabetic Meters	PB	PA, QL
Norditropin	PB, SP	PA
Novolin	PB	QL
Novolin R	PB	QL
Novolin Relion	NPD	PA, QL
Novolog	PB	QL
Novolog Relion	NPD	PA, QL
<i>NP thyroid</i>	G	
Nutropin AQ	PB, SP	PA
Omnipod 5 Pack	PB	
Omnipod Dash System	PB	
Omnipod Dash 5 Pack	PB	
Omnipod Go Kit	PB	
Omnipod Starter Kit	PB	
Omnitrope	PB, SP	PA
One Touch Glucometers	PB	PA, QL

Bold type = Brand Name Drug *Lower case italic* = Generic drug

PA = Prior Authorization **QL** = Quantity Limits Apply **SP** = Specialty Drug **AL** = Age Limit **LCG** = Low Cost Generic

LDD = Limited Distribution Drug **SDS** = Day Supply Limit **R** = Requires Rider **G** = Generic **Q/T** = Quantity Over Time

PB = Preferred Brand **NPD** = Non Preferred Drug **ACA** = \$0 Preventative Drug **MME** = Morphine Milligram Equivalent

+ = Claim Dollar Limit

DRUG NAME +	DRUG TIER	REQUIREMENTS/ LIMITS
One Touch Test Strips	NPD	PA, QL
Onglyza	NPD	PA
Orapred ODT	NPD	
Orilissa	PB	PA, QL
Oseni	NPD	PA
Oxandrin	NPD	
<i>oxandrolone</i>	G	QL
Ozempic	PB	PA, QL
<i>paricalcitol</i>	G	
Pediapred Sol	NPD	
<i>pioglitazone</i>	G	
<i>pioglitazone/ glimepiride</i>	G	
Pogo Automatic Mis Monitor	PB	PA, QL
Pogo Automatic Test Cartridge	NPD	PA, QL
Prandin	NPD	
Precision Glucometer	PB	PA, QL
Precision XTRA Test Strips	NPD	PA, QL
Precose	NPD	
<i>prednisolone</i>	G	
Prelone	NPD	
Procysbi	NPD, SP	PA
Proglycem Susp	NPD	
<i>propylthiouracil</i>	G	
Qtern	NPD	PA
Rayos	NPD	PA
Regranex gel	NPD	PA
<i>repaglinide</i>	G	
Rezdiffra Tab	NPD	PA, QL
Rezvoglar Inj	PB	QL
Riomet [ER] solution/ suspension 500mg/5ml	NPD	AL

DRUG NAME +	DRUG TIER	REQUIREMENTS/ LIMITS
Rocaltrol capsules	NPD	
Rybelsus	PB	PA, QL
Saizen	NPD, SP	PA
<i>saxagliptin</i>	G	
<i>saxagliptin-metformin</i>	G	
Segluromet	NPD	PA
Semglee Inj 100U/ml	NPD	PA, QL
Sensipar	NPD	PA
Serostim	NPD, SP	PA, LDD
Signifor	NPD, SP	PA
Sitagliptin	NPD	PA
Sitagliptin-Metformin	NPD	PA
Skytrofa	NPD, SP	PA
Sogroya Inj	NPD, SP	PA
Soliqua	PB	
Somavert	NPD, SP	PA
Starlix	NPD	
Steglatro	NPD	PA
Steglujan	NPD	PA
Striant buccal system	NPD	PA
Symlin	PB	PA
Synjardy	PB	
Synjardy XR	PB	
Synthroid	NPD	
Tanzeum	NPD	PA
Tapazole	NPD	
Teriparatide 620mcg/2.48ml inj	PB, SP	PA, Q/T
Testim Gel	NPD	PA
<i>testosterone cypionate solution 100mg/ml, 200mg/ml intramuscular</i>	G	

Bold type = Brand Name Drug *Lower case italic* = Generic drug

PA = Prior Authorization **QL** = Quantity Limits Apply **SP** = Specialty Drug **AL** = Age Limit **LCG** = Low Cost Generic

LDD = Limited Distribution Drug **SDS** = Day Supply Limit **R** = Requires Rider **G** = Generic **Q/T** = Quantity Over Time

PB = Preferred Brand **NPD** = Non Preferred Drug **ACA** = \$0 Preventative Drug **MME** = Morphine Milligram Equivalent

+ = Claim Dollar Limit

DRUG NAME +	DRUG TIER	REQUIREMENTS/ LIMITS
Testosterone Cypionate Solution 200mg/ml Injection	NPD	
<i>testosterone enanthate inj 200mg/ml</i>	G	
<i>testosterone gel 10mg/act (2%)</i>	G	
<i>testosterone gel 1%, 1.62%</i>	G	
<i>testosterone solution 30mg/act</i>	G	
Thyquidity Soln	NPD	PA, AL
Tirosint	NPD	PA
Tlando	NPD	PA
<i>tolbutamide</i>	G	
Toujeo Solostar	PB	QL
Tradjenta tablet	PB	
Tresiba	NPD	PA, QL, AL
Trijardy XR	PB	
Trulicity	PB	PA, QL
Tymlos	PB, SP	PA, Q/T
Uceris	NPD	PA
<i>unithroid</i>	G	
Veripred soln 20mg/5ml	NPD	
Victoza	NPD	PA, QL
Vogelxo	NPD	PA
Wegovy Inj	NPD	PA, R, QL
Westroid	NPD	
WP Thyroid	NPD	
Xigduo XR	PB	
Xultophy	NPD	PA
Xyosted Soln	NPD	PA
Zcort 7-day tab	NPD	
Zegalogue Inj	PB	
Zemplar	NPD	
Zepbound Inj	NPD	PA, R, QL

DRUG NAME +	DRUG TIER	REQUIREMENTS/ LIMITS
Zituvio	NPD	PA
Zomacton	NPD, SP	PA
STOMACH, ULCER, & BOWEL MEDS		
Abrilada Inj	NPD, SP	PA, QL
Aciphex	NPD	PA, QL
Aciphex Sprinkle	NPD	PA, QL, AL
Actigall	NPD	
Agamree Susp	NPD, SP	PA
Amitiza	NPD	PA
Amoxicill-clarithro-lansoprazole	NPD	
Ampyra	NPD, SP	PA, QL
Anusol-HC cream	NPD	PA
<i>aprepitant</i>	G	QL
Asacol HD	NPD	PA
Azulfidine	NPD	PA
<i>balsalazide</i>	G	
Bentyl	NPD	
Bismth/metr/cap tetracycline	NPD	
Bonjesta	NPD	PA
<i>budesonide ER tab</i>	G	
Bylvay	PB, SP	PA
Canasa supp	NPD	PA
Carafate tabs/susp	NPD	PA
Chenodal	NPD, SP	
<i>chlordiazepoxide/clidinium</i>	G	
Cholbam	NPD, SP	PA
<i>cimetidine</i>	G	
Clenpiq Soln	NPD	
Colazal	NPD	PA
Colocort	NPD	
Creon	PB	

Bold type = Brand Name Drug *Lower case italic* = Generic drug

PA = Prior Authorization **QL** = Quantity Limits Apply **SP** = Specialty Drug **AL** = Age Limit **LCG** = Low Cost Generic

LDD = Limited Distribution Drug **SDS** = Day Supply Limit **R** = Requires Rider **G** = Generic **Q/T** = Quantity Over Time

PB = Preferred Brand **NPD** = Non Preferred Drug **ACA** = \$0 Preventative Drug **MME** = Morphine Milligram Equivalent

+ = Claim Dollar Limit

DRUG NAME +	DRUG TIER	REQUIREMENTS/ LIMITS
<i>cromolyn sodium solution</i>	LCG	
Cytotec	NPD	
Delzicol	NPD	PA
Dexilant	NPD	PA, QL
<i>dexlansoprazole</i>	G	PA, QL
<i>dexlansoprazole DR cap</i>	G	PA, QL
Diclegis	NPD	PA
<i>dicyclomine</i>	G	
<i>diphenoxylate HCl/atropine</i>	G	
<i>doxylamine-pyridoxine</i>	G	PA
<i>dronabinol</i>	G	
Emend	NPD	QL
Emverm	NPD	QL
Endari powder	NPD	PA
Entocort EC	NPD	PA
<i>esomeprazole</i>	G	PA, QL
<i>esomeprazole granules</i>	G	PA, QL
Esomeprazole strontium	NPD	PA, QL
<i>famotidine 40mg tab, suspension</i>	G	
Gastrocrom	NPD	
Gattex	NPD, SP	PA
Gimoti Spray	NPD	PA, Q/T
Golytely solution reconstituted 227.1gm	NPD	PA
Golytely solution reconstituted 236gm	NPD	PA, QL
<i>granisetron</i>	G	
Hemmorex-HC Supp	NPD	PA
<i>hydrocortisone cream</i>	LCG	

DRUG NAME +	DRUG TIER	REQUIREMENTS/ LIMITS
<i>hydrocortisone retention enema</i>	G	
Ibsrela	NPD	PA
Iqirvo	NPD, SP	PA
Konvomep Soln	NPD	QL, PA
Kristalose Pak	NPD	PA
Lactulose pak	NPD	PA
<i>lactulose soln</i>	G	
<i>lansoprazole cap</i>	G	QL
<i>lansoprazole solutab</i>	G	PA, QL
Lialda	NPD	
Linzess	PB	
Livmarli Sol	NPD, SP	PA
Lomotil	NPD	
<i>loperamide</i>	G	
<i>lubiprostone cap</i>	G	
Marinol	NPD	
<i>meclizine</i>	LCG	
<i>mesalamine</i>	G	
<i>mesalamine DR</i>	G	
<i>mesalamine rectal susp</i>	G	
<i>metoclopramide</i>	G	
Metoclopramide odt	NPD	
<i>misoprostol</i>	LCG	
Motegrity tab	NPD	PA
Movantik	NPD	PA
MoviPrep Solution Reconstituted 100gm Oral	NPD	PA
Nexium capsule	NPD	PA, QL
Nexium packets	NPD	PA, QL, AL
<i>nizatidine cap</i>	G	
<i>nizatidine solution</i>	G	
Nulytely	NPD	PA, QL

Bold type = Brand Name Drug *Lower case italic* = Generic drug

PA = Prior Authorization **QL** = Quantity Limits Apply **SP** = Specialty Drug **AL** = Age Limit **LCG** = Low Cost Generic

LDD = Limited Distribution Drug **5DS** = Day Supply Limit **R** = Requires Rider **G** = Generic **Q/T** = Quantity Over Time

PB = Preferred Brand **NPD** = Non Preferred Drug **ACA** = \$0 Preventative Drug **MME** = Morphine Milligram Equivalent

+ = Claim Dollar Limit

DRUG NAME +	DRUG TIER	REQUIREMENTS/ LIMITS
Olpruva Pak	NPD, SP	PA
Omeclamox-Pak	NPD	
<i>omeprazole</i>	G	QL
<i>ondansetron HCl</i>	LCG	
Orlistat Cap	NPD	PA, R
Osmoprep tab	NPD	PA
Pancreaze	NPD	PA
<i>pancrelipase EC/SA</i>	G	
<i>pantoprazole</i>	G	QL
<i>pantoprazole pak</i>	G	PA, QL
<i>peg-kcl-nacl-nasulf-na asc-c soln reconstituted</i>	G	
<i>PEG 3350 & electrolytes</i>	G	
Peg-Prep	NPD	QL
Pentasa 250mg	NPD	QL
Pentasa 500mg	NPD	PA
Pepcid tabs, suspension	NPD	PA
Pertzye	NPD	PA
Pheburane Mis 483/gm	NPD, SP	PA
Plenvu Soln	NPD	PA
Prevacid caps	NPD	PA, QL
Prevacid SoluTab	NPD	PA, QL
Prilosec packets	NPD	PA, QL
<i>prochlorperazine suppository</i>	G	
<i>prochlorperazine tabs</i>	G	
Protonix	NPD	PA, QL
Protonix packets	NPD	PA, QL
Pylera	NPD	
<i>rabeprazole DR tab 20mg</i>	G	QL

DRUG NAME +	DRUG TIER	REQUIREMENTS/ LIMITS
Rabeprazole Sprinkle Cap 10mg	NPD	PA, QL
<i>ranitidine 300mg</i>	G	
Ravicti	NPD, SP	PA
Recorlev 150mg Tab	NPD, SP	PA, QL
Reglan	NPD	
Relistor	NPD	PA
Reltone	NPD	PA
Sancuso Patch	NPD	PA
<i>scopolamine patch</i>	G	
SFRowasa enema	NPD	
<i>sodium/potassium sol magnesium</i>	G	
<i>sucralfate tabs</i>	G	
Suflave Sol	NPD	QL
<i>sulfasalazine</i>	G	
Suprep Bowel Prep Kit	NPD	
Sutab	NPD	
Symproic	PB	
Syndros	NPD	
Tarpeyo	NPD	PA, QL
Tigan	NPD	
Transderm-Scop patch	NPD	
<i>trimetho-benzamide</i>	G	
Trulance	NPD	PA
Urso 250 Tab	NPD	PA
Urso Forte Tab	NPD	PA
Ursodiol Cap	NPD	PA
<i>ursodiol tab</i>	G	
Varubi	NPD	
Viberzi	NPD	PA
Viokace	NPD	PA

Bold type = Brand Name Drug *Lower case italic* = Generic drug

PA = Prior Authorization **QL** = Quantity Limits Apply **SP** = Specialty Drug **AL** = Age Limit **LCG** = Low Cost Generic

LDD = Limited Distribution Drug **SDS** = Day Supply Limit **R** = Requires Rider **G** = Generic **Q/T** = Quantity Over Time

PB = Preferred Brand **NPD** = Non Preferred Drug **ACA** = \$0 Preventative Drug **MME** = Morphine Milligram Equivalent

+ = Claim Dollar Limit

DRUG NAME +	DRUG TIER	REQUIREMENTS/ LIMITS
Voquezna Pak	NPD	
Voquezna Tabs	NPD	PA, QL
Xenical	NPD	PA, R
Xermelo	NPD	PA
Zantac	NPD	
Zegerid packets	NPD	PA, QL
Zelnorm	NPD	PA
Zenpep	PB	
Zofran	NPD	
Zorbtive	NPD, SP	PA
Zuplenz	NPD	
Zymfentra Inj	NPD, SP	PA

BONE, JOINT, & MUSCLE

Actemra SC	NPD, SP	PA
Actonel	NPD	PA, QL
Adalimu-AACF Inj 40/0.8ml	PB, SP	PA, QL
Adalimu-AATY Kit	NPD, SP	PA, QL
Adalimu-Adaz Inj 40/0.4ml (Sandoz)	NPD, SP	PA, QL
Adalimu-RYVK Inj	NPD, SP	PA, QL
Adalimumab adbm	NPD, SP	PA, QL
Adalimumab fkjp	NPD, SP	PA, QL
Adalimumab-ADB M Crohns/UC/HS Starter	NPD, SP	PA, QL
Adalimumab-ADB M Psoriasis/Uveitis Starter	NPD, SP	PA, QL
Adalimumab - A Kit 40/0.8ml	PB, SP	PA, QL
Adalimumab Kit 10/0.2ml, 20/0.4ml, 40/0.8ml	PB, SP	PA, QL

DRUG NAME +	DRUG TIER	REQUIREMENTS/ LIMITS
<i>alendronate</i>	LCG	QL
<i>allopurinol</i>	G	
Allopurinol 200mg Tab	NPD	PA
<i>alosetron hcl</i>	G	
Amjevita Inj	NPD, SP	PA, QL
Amrix	NPD	PA
Anaprox DS	NPD	PA
Arava	NPD	PA
Arcalyst	NPD, SP	PA
Arthrotec	NPD	PA
Atelvia	NPD	QL
<i>baclofen</i>	G	
Baclofen soln	NPD	PA
<i>baclofen sus 25mg/ml</i>	G	PA, QL
Binosto	NPD	PA, QL
Boniva	NPD	PA, QL
<i>calcitonin-salmon inj</i>	G	
<i>calcitonin-salmon (rDNA origin) nasal spray</i>	G	
<i>carisoprodol</i>	G	
Celebrex	NPD	PA
<i>celecoxib</i>	G	
<i>chlorzoxazone 375mg, 500mg, 750mg</i>	G	
Cimzia	PB, SP	PA
Colchicine Cap 0.6mg	NPD	PA
<i>colchicine 0.6mg tab</i>	G	
<i>colchicine/probenecid</i>	G	
Colcryl	NPD	PA
Cuprimine	NPD, SP	PA
Cuvposa	NPD	

Bold type = Brand Name Drug *Lower case italic* = Generic drug

PA = Prior Authorization **QL** = Quantity Limits Apply **SP** = Specialty Drug **AL** = Age Limit **LCG** = Low Cost Generic

LDD = Limited Distribution Drug **SDS** = Day Supply Limit **R** = Requires Rider **G** = Generic **Q/T** = Quantity Over Time

PB = Preferred Brand **NPD** = Non Preferred Drug **ACA** = \$0 Preventative Drug **MME** = Morphine Milligram Equivalent

+ = Claim Dollar Limit

DRUG NAME +	DRUG TIER	REQUIREMENTS/LIMITS
Cuvrior	NPD, SP	PA
<i>cyclobenzaprine</i>	LCG	
Cyclobenzaprine ER	NPD	PA
Cyltezo Inj	NPD, SP	PA, QL
Dantrium	NPD	
<i>dantrolene</i>	G	
Dartisla ODT	NPD	PA, QL
Diclofenac epolamine transdermal 1.3%	NPD	PA, QL
<i>diclofenac potassium</i>	G	
<i>diclofenac sodium DR</i>	G	
<i>diclofenac sodium ER</i>	G	
<i>diclofenac sodium soln 1.5%</i>	G	
<i>diclofenac soln 2%</i>	G	PA
<i>diclofenac/misoprostol</i>	G	
EC-Naprosyn	NPD	PA
Enbrel	PB, SP	PA
Entyvio Inj	NPD, SP	PA
<i>etidronate disodium</i>	G	
<i>etodolac</i>	G	
<i>febuxostat</i>	G	PA
Feldene	NPD	
Fenoprofen calcium	NPD	PA
Fenortho	NPD	PA
<i>fesoterodine tab ER</i>	G	
Fexmid	NPD	
Flector Patch	NPD	PA, QL
Fleqsuvy Susp 25mg/5ml	NPD	PA, QL

DRUG NAME +	DRUG TIER	REQUIREMENTS/LIMITS
<i>flurbiprofen</i>	G	
Fosamax	NPD	QL
Fosamax Plus D	NPD	QL
Gloperba Soln	NPD	PA
<i>glycopyrrolate oral solution 1mg/5ml</i>	G	
<i>glycopyrrolate tab</i>	G	
Hadlima Inj	NPD, SP	PA, QL
Hulio Inj	NPD, SP	PA, QL
Humira (2 Pen) Pen-Injector Kit 40mg/0.4ml, 80mg/0.8ml	NPD, SP	PA, QL
Humira (2 Syringe) Prefilled Syringe Kit 10mg/0.1ml, 20mg/0.2ml	PB, SP	PA, QL
Humira (2 Syringe) Prefilled Syringe Kit 40mg/0.4ml	NPD, SP	PA, QL
Humira Prefilled Syringe Kit 40MG/0.8ML	NPD, SP	PA, QL
Humira-CD/UC/HS Starter Pen-Injector Kit	NPD, SP	PA, QL
Humira-Ped UC Starter Pen-Injector Kit	NPD, SP	PA, QL
Humira-Psoriasis/Uveit Starter Pen-Injector Kit	NPD, SP	PA, QL
Humira-Ps/UV/Adol HS Starter Pen-Injector Kit	NPD, SP	PA, QL
Hyrimoz Auto-Injector/ Prefilled Syringe	NPD, SP	PA

Bold type = Brand Name Drug *Lower case italic* = Generic drug

PA = Prior Authorization **QL** = Quantity Limits Apply **SP** = Specialty Drug **AL** = Age Limit **LCG** = Low Cost Generic

LDD = Limited Distribution Drug **SDS** = Day Supply Limit **R** = Requires Rider **G** = Generic **Q/T** = Quantity Over Time

PB = Preferred Brand **NPD** = Non Preferred Drug **ACA** = \$0 Preventative Drug **MME** = Morphine Milligram Equivalent

+ = Claim Dollar Limit

DRUG NAME +	DRUG TIER	REQUIREMENTS/ LIMITS
<i>ibandronate</i>	G	QL
<i>ibuprofen</i>	LCG	
Idacio Inj	NPD, SP	PA, QL
<i>indomethacin</i>	G	
Indomethacin 20mg capsule	NPD	PA
<i>indomethacin SR</i>	G	
<i>indomethacin sus 25mg/5ml</i>	G	AL
Joenja	NPD, SP	PA
Ketoprofen 25mg cap	NPD	PA
<i>ketoprofen ER</i>	G	
<i>ketorolac</i>	G	
Ketorolac sol tromethamine	NPD	PA, QL
Kevzara	NPD, SP	PA
Kineret	NPD, SP	PA
<i>leflunomide</i>	G	
Lodoco	NPD	PA
Lorzone	NPD	PA
Lotronex	NPD	PA
Lyvispah Gra	NPD	PA
<i>meclofenamate</i>	G	
<i>meloxicam cap</i>	G	PA
Meloxicam susp	NPD	PA
<i>meloxicam tab</i>	LCG	
Metaxalone	NPD	PA
Miacalcin	NPD	
Mitigare	NPD	PA
Mobic	NPD	PA
<i>nabumetone</i>	G	
Nalfon	NPD	PA
Naprelan	NPD	PA
Naprosyn	NPD	PA
Naprosyn susp	NPD	AL
<i>naproxen sodium</i>	G	
<i>naproxen sodium DR</i>	G	

DRUG NAME +	DRUG TIER	REQUIREMENTS/ LIMITS
<i>naproxen sodium ER</i>	G	
<i>naproxen sodium ER 750mg</i>	G	PA
<i>naproxen sodium susp</i>	G	AL
Norgesic Forte Tab	NPD	PA
Norgesic Tab	NPD	PA
Olumiant	NPD, SP	PA
OmvoH Inj	NPD, SP	PA
Orencia	NPD, SP	PA
Orphenadrine-asa-caffeine	NPD	PA
<i>orphenadrine ER</i>	G	
Orphengesic Forte Tab	NPD	PA
Otezla	PB, SP	PA
Otrexup	NPD	PA
<i>oxaprozin</i>	G	
Ozobax Soln	NPD	PA
Pennsaid	NPD	PA
<i>piroxicam</i>	G	
<i>probenecid</i>	G	
<i>raloxifene hcl</i>	G	
Rasuvo	PB	PA
<i>risedronate</i>	G	QL
<i>risedronate DR</i>	G	QL
Robaxin	NPD	
<i>salsalate tab</i>	G	
<i>silodosin</i>	G	
Simlandi Kit/Inj	NPD, SP	PA, QL
Simponi	PB, SP	PA
Skelaxin	NPD	PA
Soma	NPD	PA
Sotyktu	NPD, SP	PA
Stelara	PB	PA
<i>sulindac</i>	G	
<i>tizanidine</i>	G	

Bold type = Brand Name Drug *Lower case italic* = Generic drug

PA = Prior Authorization **QL** = Quantity Limits Apply **SP** = Specialty Drug **AL** = Age Limit **LCG** = Low Cost Generic

LDD = Limited Distribution Drug **5DS** = Day Supply Limit **R** = Requires Rider **G** = Generic **Q/T** = Quantity Over Time

PB = Preferred Brand **NPD** = Non Preferred Drug **ACA** = \$0 Preventative Drug **MME** = Morphine Milligram Equivalent

+ = Claim Dollar Limit

DRUG NAME +	DRUG TIER	REQUIREMENTS/LIMITS
<i>tolmetin</i>	G	
Toviaz	NPD	PA
Uloric	NPD	PA
Velsipity	NPD, SP	PA
Viibryd	NPD	PA
<i>vilazodone</i>	G	
Voltaren Gel	NPD	
Xeljanz [XR]	PB, SP	PA
Yuflyma 2pen Kit 40/0.4ml	NPD, SP	PA, QL
Yuflyma 2Syr Kit 40/0.4ml	NPD, SP	PA, QL
Yuflyma Kit 20/0.2ml	NPD, SP	PA, QL
Yusimry Soln	NPD, SP	PA, QL
Zanaflex	NPD	PA
Zeposia	NPD, SP	PA
Zipsor	NPD	PA, QL
Zurampic 200mg	NPD	PA
Zyloprim	NPD	PA

FEMALE, HORMONE REPLACEMENT, & BIRTH CONTROL

The Injectable Fertility Agents in this section are covered only under certain benefits programs. Please check your handbook to determine coverage.

Activella	NPD	
Addyi	NPD	PA
Alora	NPD	PA
Angeliq	NPD	PA
Annovera Mis	NPD	QL
<i>aurovela 24 FE 1/20</i>	G	
Aygestin	NPD	
Balcoltra	NPD	
Beyaz	NPD	
Bijuva cap	NPD	
<i>blisovi 24 FE 1/20</i>	G	

DRUG NAME +	DRUG TIER	REQUIREMENTS/LIMITS
Bravelle	NPD, SP	PA, QL, R
Brevicon	NPD	
Cenestin	PB	
<i>cetorelix inj</i>	G, SP	
<i>cetorelix kit</i>	G, SP	
<i>charlotte 24 chew FE 1/20</i>	G	
Cleocin vaginal	NPD	PA
Climara patch	PB	
<i>clomiphene citrate</i>	G	
Crinone Gel 4%	NPD	
Crinone Gel 8%	NPD	PA
Cyclessa	NPD	
Depo SubqQ Provera	NPD	QL
Depo-Provera	NPD	QL
Desogen	NPD	
<i>desogestrel-ethinyl estradiol</i>	G	
Diflucan	NPD	PA
Divigel	NPD	
<i>drospirenone-ethinyl estradiol</i>	ACA	
<i>eluryng mis</i>	ACA	QL
Endometrin Insert 100mcg Vaginal	PB	
Estrace Cream	NPD	PA
Estrace Tab	NPD	
<i>estradiol</i>	G	
<i>estradiol cream 0.1%</i>	G	
<i>estradiol transdermal</i>	G	
Estring	PB	
EstroGel Gel	NPD	
<i>estropipate</i>	G	
Estrostep FE	NPD	
Evista	NPD	PA

Bold type = Brand Name Drug *Lower case italic* = Generic drug

PA = Prior Authorization **QL** = Quantity Limits Apply **SP** = Specialty Drug **AL** = Age Limit **LCG** = Low Cost Generic

LDD = Limited Distribution Drug **SDS** = Day Supply Limit **R** = Requires Rider **G** = Generic **Q/T** = Quantity Over Time

PB = Preferred Brand **NPD** = Non Preferred Drug **ACA** = \$0 Preventative Drug **MME** = Morphine Milligram Equivalent

+ = Claim Dollar Limit

DRUG NAME +	DRUG TIER	REQUIREMENTS/ LIMITS
<i>fayosim tab</i>	G	
Femcon FE	NPD	
FemHRT	NPD	
Femring	NPD	PA
<i>finzala chew FE 1/20</i>	G	
Follistim AQ	PB, SP	QL, R
Gemmily cap 1/20	ACA	
Generess FE	NPD	
Gonal-f	NPD, SP	PA, QL, R
<i>hailey 1.5/30</i>	ACA	
<i>hailey 24 FE 1/20</i>	G	
Imvexxy	PB	
Intrarosa	NPD	PA
<i>joyeaux</i>	G	
<i>junel FE 24 tab</i>	G	
<i>kaitlib FE chew</i>	G	
<i>layolis FE chew</i>	G	
<i>leena tab</i>	G	
<i>levonorgestrel-ethinyl estradiol</i>	G	
<i>levonorgestrel/my way/next dose</i>	ACA	
Loestrin	NPD	
Lo Loestrin FE	PB	
Loseasonique	NPD	
<i>lyllana Dis</i>	G	
Lysteda	NPD	
<i>medroxyprogesterone acetate suspension IM</i>	ACA	QL
<i>medroxyprogesterone acetate tab</i>	LCG	
<i>melodetta chew 24 FE</i>	G	
Menest	NPD	
Menopur	NPD, SP	PA, QL, R

DRUG NAME +	DRUG TIER	REQUIREMENTS/ LIMITS
Metrogel vaginal	NPD	
<i>metronidazole</i>	LCG	
<i>metronidazole vaginal gel</i>	G	
<i>mibelas 24 chew FE</i>	G	
<i>microgestin 24 FE 1/20</i>	G	
Minastrin 24 FE	NPD	
Minivelle	NPD	PA
Mircette	NPD	
Myfembree	PB	PA
Natazia	NPD	
Nextstellis	NPD	
<i>nore/eth/fer chew 0.4mg-35mcg</i>	G	
<i>norethin-ethynil-fer cap 1/20</i>	G	
<i>norethindrone</i>	G	
<i>norethindrone acetate</i>	G	
<i>norethindrone-ethinyl estradiol</i>	ACA	
<i>norethindrone-mestranol</i>	ACA	
<i>norgestimate-ethinyl estradiol</i>	ACA	
<i>norgestrel-ethinyl estradiol</i>	ACA	
Nuvaring	NPD	QL
OB Complete	NPD	PA
Oriahnn cap	PB	PA
Ortho Micronor	NPD	
Ortho Novum	NPD	
Ortho Tri-Cyclen	NPD	
Ortho Tri-Cyclen Lo	NPD	
Ortho Cyclen	NPD	
Ovidrel	PB, SP	R

Bold type = Brand Name Drug *Lower case italic* = Generic drug

PA = Prior Authorization **QL** = Quantity Limits Apply **SP** = Specialty Drug **AL** = Age Limit **LCG** = Low Cost Generic

LDD = Limited Distribution Drug **5DS** = Day Supply Limit **R** = Requires Rider **G** = Generic **Q/T** = Quantity Over Time

PB = Preferred Brand **NPD** = Non Preferred Drug **ACA** = \$0 Preventative Drug **MME** = Morphine Milligram Equivalent

+ = Claim Dollar Limit

DRUG NAME +	DRUG TIER	REQUIREMENTS/LIMITS
Plan B One-Step	NPD	QL
Premarin	PB	
Premarin vaginal cream	PB	
Premphase	PB	
Prempro	PB	
<i>progesterone, micronized</i>	G	
Prometrium	NPD	
Provera	NPD	
Quartette	NPD	
<i>raloxifene</i>	G	
Safyral	NPD	
Seasonique	NPD	
Slynd	NPD	
Synarel	NPD	
<i>tarina 24 FE tab</i>	G	
Taytulla	NPD	
<i>terconazole cream</i>	G	
<i>tilia FE tab</i>	G	
<i>tri-legest FE</i>	G	
Tri-norinyl	NPD	
Twirla Dis	NPD	QL
Tyblume	NPD	
<i>tydemi tab</i>	G	
Vagifem	NPD	PA
Vandazole	NPD	PA
VCF Vaginal Gel 4%	NPD	
Vivelle Dot	NPD	PA
Vyleesi	NPD	PA, QL
<i>wymzya Fe tablet chewable</i>	G	
<i>xulane</i>	ACA	QL
Yasmin	NPD	
YAZ	NPD	
<i>yuvafem</i>	G	
Zafemy DIS	ACA	QL

DRUG NAME +	DRUG TIER	REQUIREMENTS/LIMITS
EYE MEDICATIONS		
Acular/Acular LS	NPD	
Alcaine	NPD	
Alocril Soln	NPD	PA
Alphagan P soln	NPD	PA
Alrex	NPD	PA
<i>apraclonidine</i>	G	
<i>atropine sulfate</i>	G	
<i>azelastine HCL drops</i>	G	
Azopt	NPD	PA
<i>bacitracin ophth</i>	G	
<i>bacitracin/polymyxin B ophth oint</i>	G	
<i>bepotastine</i>	G	
Bepreve	NPD	PA
Besivance	PB	
Betagan	NPD	
<i>betaxolol</i>	G	
Betimol	NPD	
Betoptic S	NPD	PA
<i>bimatoprost</i>	G	
Bleph 10	NPD	
Blephamide S.O.P. ointment	NPD	
<i>brimonidine sol 0.1%</i>	G	
<i>brimonidine tartrate</i>	G	
<i>brimonidine/timolol soln 0.2-0.5%</i>	G	
<i>brinzolamide sus 1%</i>	G	
<i>bromfenac drops</i>	G	
Bromsite sol 0.075%	NPD	PA
<i>carteolol</i>	G	

Bold type = Brand Name Drug *Lower case italic* = Generic drug

PA = Prior Authorization **QL** = Quantity Limits Apply **SP** = Specialty Drug **AL** = Age Limit **LCG** = Low Cost Generic

LDD = Limited Distribution Drug **SDS** = Day Supply Limit **R** = Requires Rider **G** = Generic **Q/T** = Quantity Over Time

PB = Preferred Brand **NPD** = Non Preferred Drug **ACA** = \$0 Preventative Drug **MME** = Morphine Milligram Equivalent

+ = Claim Dollar Limit

DRUG NAME +	DRUG TIER	REQUIREMENTS/ LIMITS
Cequa Sol 0.09%	NPD	PA, QL
Ciloxan Sol	NPD	
<i>ciprofloxacin</i>	G	
Combigan soln 0.2-0.5%	NPD	PA
Cosopt	NPD	PA
Cosopt PF	NPD	PA
<i>cromolyn ophth</i>	G	
Cyclogyl	NPD	
<i>cyclopentolate HCl</i>	G	
<i>cyclosporine emulsion</i>	G	QL
Cystadrops Soln	NPD, SP	PA, QL
<i>dexamethasone ophth</i>	G	
Diamox Sequels	NPD	
<i>diclofenac soln 0.1% ophth</i>	G	
<i>difluprednate emu</i>	G	
<i>dorzolamide HCl 2%</i>	G	
<i>dorzolamide-timolol</i>	G	
Durezol Emu	NPD	
Elestat	NPD	
<i>epinastine HCl</i>	G	
<i>erythromycin etyhylsuccinate susp</i>	G	
<i>erythromycin ophth oint</i>	G	
Eysuvis Ophth	NPD	
<i>fluorometholone</i>	G	
<i>furbiprofen</i>	G	
FML Liquifilm suspension	NPD	
Gentak Oint 0.3% OP	NPD	

DRUG NAME +	DRUG TIER	REQUIREMENTS/ LIMITS
<i>gentamicin ophth</i>	G	
<i>homatropine ophthalmic</i>	LCG	
Homatropaire sol 5% OP	NPD	
Ilevro Susp 0.3%	NPD	PA
Inveltys Susp 1%	NPD	
Iopidine	NPD	PA
Isopto Carpine	NPD	
Istalol Drops	NPD	PA
Iyuzeh Drops 0.005%	NPD	PA
<i>ketorolac ophth soln</i>	G	
Lastacraft	NPD	PA
<i>latanoprost</i>	G	
<i>levobunolol</i>	G	
<i>levofloxacin ophth soln</i>	G	
Lotemax [SM]	NPD	
<i>loteprednol susp</i>	G	
Lumigan	PB	
Maxitrol	NPD	
<i>methazolamide</i>	G	
Miebo Drops	PB	QL
Moxeza	NPD	
<i>moxifloxacin ophthalmic soln</i>	G	
Mydriacyl	NPD	
<i>neomycin/ polymyxin B/ dexamethasone</i>	G	
Neosporin soln	NPD	
Nevanac Susp 0.1%	NPD	PA
Ocufen	NPD	
Ocuflox	NPD	
<i>ofloxacin</i>	G	
<i>olopatadine hcl</i>	G	
Omnipred	NPD	

Bold type = Brand Name Drug *Lower case italic* = Generic drug

PA = Prior Authorization **QL** = Quantity Limits Apply **SP** = Specialty Drug **AL** = Age Limit **LCG** = Low Cost Generic

LDD = Limited Distribution Drug **SDS** = Day Supply Limit **R** = Requires Rider **G** = Generic **Q/T** = Quantity Over Time

PB = Preferred Brand **NPD** = Non Preferred Drug **ACA** = \$0 Preventative Drug **MME** = Morphine Milligram Equivalent

+ = Claim Dollar Limit

DRUG NAME +	DRUG TIER	REQUIREMENTS/ LIMITS
Oxervate soln 200mcg/ml	NPD, SP	PA, QL
Patanol	NPD	
Phospholine Iodide	PB	
<i>pilocarpine</i>	G	
<i>polymyxin B/neo/bacitracin</i>	G	
<i>polymyxin B/neo/gramicidin</i>	G	
<i>polymyxin B/trimethoprim soln</i>	G	
Polytrim	NPD	
Pred-Forte	NPD	PA
<i>prednisolone acetate</i>	G	
<i>prednisolone sodium phosphate</i>	G	
<i>prednisolone/sodium sulfacetamide</i>	G	
Prolensa sol 0.07%	NPD	PA
<i>proparacaine</i>	G	
Rescula	NPD	PA
Restasis Emulsion 0.05% Ophthalmic	NPD	QL
Restasis Multidose	PB	QL
Rhopressa Soln 0.02%	NPD	
Rocklatan Soln 0.02-0.005%	NPD	
Simbrinza Susp 1-0.2%	PB	PA
<i>sulfacetamide</i>	G	
<i>tafluprost soln</i>	G	
<i>timolol ophth</i>	G	
Timoptic	NPD	PA

DRUG NAME +	DRUG TIER	REQUIREMENTS/ LIMITS
Timoptic XE	NPD	
Tobradex	NPD	
<i>tobramycin-dexamethasone</i>	G	
<i>tobramycin ophthalmic</i>	LCG	
Tobrex	NPD	
Travatan Z	NPD	
<i>travoprost</i>	G	
<i>trifluridine</i>	G	
<i>trimethoprim sulfate/polymyxin B</i>	G	
<i>trimethoprim tab</i>	G	
<i>tropicamide</i>	LCG	
Trusopt	NPD	
Tyrvaya Sol	NPD	QL
Upneeq Soln	NPD	PA
Verkazia Emu 0.1%	NPD	PA, QL
Vevye Drop 0.1%	NPD	PA, QL
Vigamox	NPD	
Viroptic	NPD	
Vyzulta Soln 0.024% OP	NPD	PA
Xalatan	NPD	
Xdemvy Drops 0.25%	NPD	PA, QL
Xelpros Emulsion 0.005%	NPD	PA
Xiidra	PB	QL
Zerviate Drops 0.24%	NPD	PA
Zioptan	NPD	PA
Zymaxid	NPD	
ALLERGY, COUGH & COLD, LUNG MEDS		
Accolate	NPD	AL
<i>acetylcysteine</i>	G	

Bold type = Brand Name Drug *Lower case italic* = Generic drug

PA = Prior Authorization **QL** = Quantity Limits Apply **SP** = Specialty Drug **AL** = Age Limit **LCG** = Low Cost Generic

LDD = Limited Distribution Drug **SDS** = Day Supply Limit **R** = Requires Rider **G** = Generic **Q/T** = Quantity Over Time

PB = Preferred Brand **NPD** = Non Preferred Drug **ACA** = \$0 Preventative Drug **MME** = Morphine Milligram Equivalent

+ = Claim Dollar Limit

DRUG NAME +	DRUG TIER	REQUIREMENTS/ LIMITS
Advair Diskus	NPD	PA
Advair HFA	PB	
Aerospan	NPD	PA
AirDuo Digihaler	NPD	PA
AirDuo RespiClick	NPD	PA
Airsupra AER	NPD	PA
<i>albuterol sulfate er</i>	G	
<i>albuterol sulfate nebulizer soln, syrup, tab</i>	G	
Alvesco	NPD	PA
Anoro Ellipta	PB	
<i>arformoterol neb 15/2ml</i>	G	
ArmonAir Digihaler	NPD	PA
ArmonAir RespiClick	NPD	PA
Arnuity Ellipta	PB	
Asmanex	NPD	PA
Asmanex HFA	NPD	PA
Atrovent HFA	PB	
Auvi-Q 0.1mg	NPD	QL, AL
Auvi-Q 0.15mg and 0.3mg	NPD	PA, QL
<i>azelastine nasal spray</i>	G	
<i>azelastine/ fluticasone spray 137-50</i>	G	PA
Beconase AQ	NPD	PA
<i>benzonatate</i>	LCG	
Bevespi Aerosphere	NPD	PA
<i>bosentan</i>	G, SP	PA
Breo Ellipta	PB	
Breyna AER	NPD	PA

DRUG NAME +	DRUG TIER	REQUIREMENTS/ LIMITS
Breztri Aerosphere	PB	
<i>bromfed DM</i>	G	
Bronchitol Cap	NPD, SP	PA
Brovana Neb	NPD	
<i>budesonide susp.</i>	G	
Budesonide-formoterol	NPD	PA
<i>carbinoxamine</i>	G	
Carbinoxamin ER Sus	NPD	
Cayston	NPD, SP	PA
<i>cheratussin AC</i>	G	5DS, QL, AL, MME
<i>cheratussin DAC</i>	G	5DS, QL, AL, MME
Clarinox	NPD	PA
Clarinox-D	NPD	PA, AL
Clemastine syrup	NPD	PA
<i>clemastine tab</i>	NPD	
Combivent Respimat	PB	
<i>cromolyn inhalation soln</i>	G	
<i>cyproheptadine</i>	LCG	
<i>dalfampridin ER</i>	G, SP	PA, QL
Daliresp	NPD	
<i>desrx gel 0.05%</i>	G	
Dexchlorpheniramine soln	NPD	PA
Duaklir	NPD	PA
Dulera	NPD	PA
Dymista	NPD	PA
Elixophyllin Elixir	NPD	
Epinephrine pen 0.15mg	PB	QL
<i>epinephrine pen 0.3mg</i>	G	QL
EpiPen	NPD	PA, QL
EpiPen Jr.	NPD	PA, QL

Bold type = Brand Name Drug *Lower case italic* = Generic drug

PA = Prior Authorization **QL** = Quantity Limits Apply **SP** = Specialty Drug **AL** = Age Limit **LCG** = Low Cost Generic

LDD = Limited Distribution Drug **5DS** = Day Supply Limit **R** = Requires Rider **G** = Generic **Q/T** = Quantity Over Time

PB = Preferred Brand **NPD** = Non Preferred Drug **ACA** = \$0 Preventative Drug **MME** = Morphine Milligram Equivalent

+ = Claim Dollar Limit

DRUG NAME +	DRUG TIER	REQUIREMENTS/ LIMITS
Esbriet	NPD, SP	PA, LDD
Filspari tab	NPD, SP	QL, PA
Flovent Diskus	NPD	PA
Flovent HFA	NPD	PA (Bypass PA for members 5 years of age and under)
<i>flutisolidide</i>	G	
Flutic/Vilan INH	NPD	PA
Fluticasone HFA AER	NPD	PA (Bypass PA for members 5 years of age and under)
Fluticasone propionate diskus	NPD	PA
<i>fluticasone propionate nasal susp</i>	G	
Fluticasone/ Salmeterol AER	NPD	PA
<i>fluticasone-salmeterol AER powder</i>	G	
<i>formoterol neb 20/2ml</i>	G	
Grastek	NPD	PA
Hycodan Sol 5-1.5mg/5ml	NPD	QL, AL, MME
Hycodan Tab 5-1.5mg	NPD	QL, MME
Hycufenix	NPD	QL, 5DS
<i>hydrocodon-cpm-phenylephrine</i>	G	QL, 5DS, AL, MME
<i>hydrocod-cpm-pseudoephedrine</i>	G	QL, 5DS, AL, MME
<i>hydrocodone bit/homatrop syrup</i>	G	QL, 5DS, AL, MME
<i>hydrocodone-chlorpheniramine susp</i>	G	QL, 5DS, AL, MME
<i>hydromet</i>	G	QL, 5DS, AL, MME

DRUG NAME +	DRUG TIER	REQUIREMENTS/ LIMITS
<i>hydroxyzine HCL syrup</i>	G	
<i>hydroxyzine HCL tabs</i>	LCG	
<i>hydroxyzine pamoate</i>	G	
HyperSal	NPD	
Incruse Ellipta	NPD	PA
<i>ipratropium-albuterol</i>	G	
<i>ipratropium inhalation soln</i>	G	
<i>ipratropium nasal spray</i>	G	
Isturisa	NPD, SP	QL, PA
Javygtor Pak	NPD, SP	PA
Kitabis Pak	NPD, SP	PA, LDD
Kuvan	NPD, SP	PA
<i>levalbuterol neb</i>	G	
Levalbuterol tartrate HFA	NPD	QL
Lonhala Magnair Soln	NPD	PA
<i>metaproterenol</i>	G	
<i>montelukast sodium</i>	G	
Nucala Soln	PB, SP	PA
Obredon	NPD	QL, 5DS, AL, MME
Odactra SL	NPD	PA
Ofev	NPD, SP	PA
Oralair	NPD	PA
Palforzia cap/ powder	NPD	PA
Perforomist Neb	NPD	
<i>pirfenidone</i>	G, SP	PA
ProAir Digihaler	NPD	PA, QL
ProAir HFA	NPD	QL
ProAir RespiClick	NPD	QL

Bold type = Brand Name Drug *Lower case italic* = Generic drug

PA = Prior Authorization **QL** = Quantity Limits Apply **SP** = Specialty Drug **AL** = Age Limit **LCG** = Low Cost Generic

LDD = Limited Distribution Drug **5DS** = Day Supply Limit **R** = Requires Rider **G** = Generic **Q/T** = Quantity Over Time

PB = Preferred Brand **NPD** = Non Preferred Drug **ACA** = \$0 Preventative Drug **MME** = Morphine Milligram Equivalent

+ = Claim Dollar Limit

DRUG NAME +	DRUG TIER	REQUIREMENTS/ LIMITS	DRUG NAME +	DRUG TIER	REQUIREMENTS/ LIMITS
<i>promethazine</i>	LCG		Tezspire Inj	PB, SP	PA
<i>promethazine/ codeine</i>	LCG	QL, 5DS, AL, MME	Theo-24	PB	
<i>promethazine/ dextromethorphan</i>	G		<i>theochron</i>	G	
<i>promethazine/ phenylephrine</i>	G		<i>theophylline soln</i>	G	
Proventil HFA	NPD	PA, QL	<i>theophylline extended release</i>	G	
Pulmicort Flexhaler	PB		Thiola [EC]	NPD, SP	
Pulmicort Respules	NPD	PA	<i>tiopronin</i>	G, SP	
Pulmozyme	PB, SP		Tiotropium bromide cap 18mcg	NPD	PA
Qvar	NPD	PA	Tracleer	NPD, SP	PA
Ragwitek	NPD	PA	Trelegy Ellipta	PB	
Rebetol	NPD, SP		Tudorza Pressair	NPD	PA
Rezira	NPD	QL, 5DS, AL, MME	Tussicap	NPD	QL, 5DS, AL, MME
<i>roflumilast</i>	G		Tuxarin ER tabs	NPD	QL, 5DS, AL, MME
Ryclora	NPD	PA	Tuzistra XR	NPD	QL, 5DS, AL, MME
Ryvent	NPD		Utibron Neohaler	NPD	PA
<i>sapropterin pow/ tab</i>	G, SP	PA	Ventolin HFA	NPD	PA, QL
Seebri	NPD	PA	Vistaril	NPD	
Semprex-D	NPD	QL	Vituz	NPD	QL, 5DS, AL, MME
Serevent Diskus	PB		VoSpire ER	NPD	
Singulair	NPD	PA	Winrevair Inj	NPD, SP	PA
<i>sodium chloride inhalation</i>	G		<i>wixela inhub aer</i>	G	
Spiriva	PB		Xhance	NPD	PA
Stiolto Respimat	PB		Xolair Inj	PB, SP	PA
Striverdi Respimat Aer Solution	PB		Xopenex Nebulization Soln	NPD	PA
Symbicort	PB		Xopenex HFA	NPD	PA, QL
Symdeko	NPD, SP	PA	Yupelri Soln	NPD	PA
Symjepi Inj	NPD	QL	Z-Tuss AC	NPD	QL, 5DS, AL, MME
<i>terbutaline sulfate tabs</i>	G		<i>zafirlukast</i>	G	AL
Tessalon Perles	NPD		<i>zileuton ER 600mg</i>	G	PA
			Zutripro	NPD	QL, 5DS, AL, MME
			Zyflo 600mg tab	NPD	PA
			Zyflo CR 600mg	NPD	AL

Bold type = Brand Name Drug *Lower case italic* = Generic drug

PA = Prior Authorization **QL** = Quantity Limits Apply **SP** = Specialty Drug **AL** = Age Limit **LCG** = Low Cost Generic

LDD = Limited Distribution Drug **5DS** = Day Supply Limit **R** = Requires Rider **G** = Generic **Q/T** = Quantity Over Time

PB = Preferred Brand **NPD** = Non Preferred Drug **ACA** = \$0 Preventative Drug **MME** = Morphine Milligram Equivalent

+ = Claim Dollar Limit

DRUG NAME +	DRUG TIER	REQUIREMENTS/LIMITS
URINARY & PROSTATE MEDS		
Accrufer	NPD	PA
<i>alfuzosin</i>	G	
Anaspaz	NPD	
Avodart	NPD	PA, AL
<i>bethanechol</i>	G	
Cardura	NPD	PA
Caverject	PB	PA, QL
Cialis	NPD	PA, QL
<i>darifenacin ER</i>	G	
Detrol	NPD	PA
Detrol LA	NPD	PA
Ditropan XL	NPD	PA
<i>doxazosin mesylate</i>	G	
<i>dutasteride</i>	G	AL
<i>dutasteride/tamsulosin hcl</i>	G	
Duvyzat Sus	NPD, SP	PA
Edex	NPD	PA, QL
ED-Spaz	NPD	
Elmiron	NPD	PA
Enablex	NPD	
<i>finasteride</i>	G	AL
<i>flavoxate</i>	G	
Flomax	NPD	PA
Gelnique Gel	NPD	PA
Gemtesa	NPD	PA
<i>hyoscyamine</i>	LCG	
<i>hyosyne</i>	LCG	
IFE-PG 20	NPD	PA, QL
Jalyn	NPD	PA
Levbid	NPD	
Levitra	NPD	PA, QL
Levsin	NPD	
<i>mirabegron</i>	G	
Muse	PB	PA, QL
Myrbetriq	PB	

DRUG NAME +	DRUG TIER	REQUIREMENTS/LIMITS
Nulev	NPD	
<i>oscimin</i>	LCG	
<i>oxybutynin tab [ER]</i>	G	
<i>oxybutynin sol</i>	G	
<i>oxybutynin syrup</i>	LCG	
Oxytrol Patch	NPD	PA
<i>phenazopyridine</i>	LCG	
<i>potassium citrate ER</i>	G	
Proscar	NPD	AL
Pyridium	NPD	
Rapaflo	NPD	PA
<i>solifenacin</i>	G	
Staxyn	NPD	PA, QL
Stendra	NPD	PA, QL
Symax	NPD	
<i>tamsulosin</i>	G	
<i>terazosin</i>	G	
<i>tolterodine tartrate</i>	G	
<i>tolterodine tartrate LA</i>	G	
<i>trospium chloride</i>	G	
Urecholine	NPD	
Urocit-K	NPD	
Uroxatral	NPD	PA
<i>varденаfil</i>	G	PA, QL
<i>varденаfil ODT</i>	G	PA, QL
Vesicare	NPD	PA
Viagra	NPD	PA, QL

VITAMINS & ELECTROLYTES

Auryxia	NPD	
Brand Prenatal Vitamins	NPD	PA
Buphenyl	NPD, SP	PA
Calciferol	NPD	

Bold type = Brand Name Drug *Lower case italic* = Generic drug

PA = Prior Authorization **QL** = Quantity Limits Apply **SP** = Specialty Drug **AL** = Age Limit **LCG** = Low Cost Generic

LDD = Limited Distribution Drug **SDS** = Day Supply Limit **R** = Requires Rider **G** = Generic **Q/T** = Quantity Over Time

PB = Preferred Brand **NPD** = Non Preferred Drug **ACA** = \$0 Preventative Drug **MME** = Morphine Milligram Equivalent

+ = Claim Dollar Limit

DRUG NAME +	DRUG TIER	REQUIREMENTS/ LIMITS
<i>cyanocobalamin nasal spray</i>	G	PA
Dailyvite w/Zinc & NephlexRx	NPD	
Dojolvi Liq	NPD	PA
Duzallo	NPD	PA
<i>ergocalciferol</i>	G	
<i>fluoritab chew tab</i>	LCG	
Fosrenol	NPD	
Jynarque	NPD, SP	PA
K-Phos	NPD	
K-Tab	NPD	
<i>klor-Con</i>	G	
<i>lanthanum chewable tab</i>	G	
Lokelma PAK	NPD	
Mephyton	NPD	
<i>multivitamin with fluoride drops, tabs</i>	G	
Nascobal	NPD	PA
Nebusal Nebulization Solution	NPD	
Nestabs One	NPD	PA
Phospho-trin tab K500	NPD	
<i>phytonadione tab</i>	G	
<i>potassium bicarbonate/ potassium citrate effervescent</i>	G	
<i>potassium chloride</i>	G	
Pulmosal Nebulization Solution	NPD	
Quflora	NPD	
Royaldee	NPD	PA
<i>sodium fluoride chew tab</i>	G	

DRUG NAME +	DRUG TIER	REQUIREMENTS/ LIMITS
<i>sodium phenylbutyrate tab</i>	G, SP	PA
SPS Suspension 15GM/60ml	NPD	
Tri-Vi-Flor, Poly-Vi-Flor with and without iron	NPD	

DIAGNOSTICS & MISCELLANEOUS AGENTS

Alvaiz Tab	NPD, SP	PA
Berinert	NPD, SP	PA
Cablivi Kit	NPD, SP	QL
<i>calcium acetate</i>	G	
Carbaglu	NPD, SP	PA
<i>carglumic</i>	G, SP	PA
Cerdelga	NPD, SP	PA
Chemet	PB	
Chorionic gonadotropin	NPD, SP	
Cinryze	NPD, SP	PA
<i>clovique</i>	G, SP	PA
Cystadane	NPD, SP	
Cystagon	NPD, SP	PA
<i>deferasirox tab/ granules</i>	G	PA
<i>deferiprone tab</i>	G	PA
D-Penammine 125mg tablet	NPD, SP	
<i>dichlorphenate tab</i>	G, SP	PA
Doptelet	NPD, SP	PA
Empaveli Inj	NPD, SP	PA
Exjade	NPD	PA
Fabhalta	NPD, SP	PA
Ferriprox	NPD	PA
Firazyr	NPD, SP	PA, QL
Firdapse	NPD, SP	PA
Galafold	NPD, SP	PA, QL

Bold type = Brand Name Drug *Lower case italic* = Generic drug

PA = Prior Authorization **QL** = Quantity Limits Apply **SP** = Specialty Drug **AL** = Age Limit **LCG** = Low Cost Generic

LDD = Limited Distribution Drug **SDS** = Day Supply Limit **R** = Requires Rider **G** = Generic **Q/T** = Quantity Over Time

PB = Preferred Brand **NPD** = Non Preferred Drug **ACA** = \$0 Preventative Drug **MME** = Morphine Milligram Equivalent

+ = Claim Dollar Limit

DRUG NAME +	DRUG TIER	REQUIREMENTS/ LIMITS
<i>ganirelix acetate soln</i>	G, SP	R
Haegarda	NPD, SP	PA
<i>icatibant inj</i>	G, SP	PA
Idelvion	NPD, SP	PA
Jadenu tab/ granules	NPD	PA
Keveyis	NPD, SP	PA
Kionex Sus	NPD	
Metopirone	NPD	
<i>midodrine HCl</i>	G	
<i>miglustat</i>	G, SP	PA
<i>nitisinone</i>	G, SP	PA
Nityr	NPD, SP	PA
Novarel 5000 units	NPD, SP	
Novarel 10000 units	PB, SP	
Nulibry Inj	NPD, SP	PA
Ocaliva	NPD, SP	PA
Opfolda	NPD, SP	
Orfadin	NPD, SP	PA
Orladeyo	NPD, SP	PA
Oxbryta	NPD, SP	PA
Palynziq	NPD, SP	PA
<i>penicillamine capsule</i>	G, SP	PA
<i>penicillamine tablet</i>	G, SP	
PhosLo	NPD	
Phoslyra	NPD	PA
<i>phospha</i>	G	
Pokonza Pow	NPD	PA
Potaba	NPD	
<i>pregnyl</i>	G, SP	
Pyrukynd	NPD, SP	PA
Renagel	NPD	
Renvela	NPD	
Ridaura	NPD, SP	

DRUG NAME +	DRUG TIER	REQUIREMENTS/ LIMITS
Rinvoq	PB, SP	PA
Ruconest	NPD, SP	PA
Ruzurgi	NPD, SP	PA
<i>sajazir inj</i>	G, SP	PA, QL
<i>sevelamer carbonate</i>	G	
Strensiq	NPD, SP	PA
Sucraid Solution 8500 unit/ml	NPD, SP	PA
Syprine	NPD, SP	PA
Takhzyro Inj	NPD, SP	PA
Tavalisse	NPD, SP	PA
Tavneos	NPD, SP	PA
Tegsedi	NPD, SP	PA
<i>trientine</i>	G, SP	PA
Velphoro	NPD	PA
V-GO	PB	
Vowst	NPD	PA, QL
Voydeya	NPD, SP	PA
Vumerity	PB, SP	
Xphozah	NPD, SP	PA
Xuriden	NPD, SP	PA
<i>yargesa</i>	G, SP	PA
Zavesca	NPD, SP	PA
Zilbrysq Inj	NPD, SP	PA
Zokinvy	NPD, SP	PA

Bold type = Brand Name Drug *Lower case italic* = Generic drug

PA = Prior Authorization **QL** = Quantity Limits Apply **SP** = Specialty Drug **AL** = Age Limit **LCG** = Low Cost Generic

LDD = Limited Distribution Drug **SDS** = Day Supply Limit **R** = Requires Rider **G** = Generic **Q/T** = Quantity Over Time

PB = Preferred Brand **NPD** = Non Preferred Drug **ACA** = \$0 Preventative Drug **MME** = Morphine Milligram Equivalent

+ = Claim Dollar Limit

Nondiscrimination Notice and Notice of Availability of Auxiliary Aids and Services

AmeriHealth Administrators complies with applicable Federal civil rights laws and does not discriminate on the basis of race, color, national origin, age, disability, or sex. AmeriHealth Administrators does not exclude people or treat them differently because of race, color, national origin, age, disability, or sex.

AmeriHealth Administrators:

- Provides free aids and services to people with disabilities to communicate effectively with us and written information in other formats, such as large print
- Provides free language services to people whose primary language is not English and information written in other languages

If you need these services, contact our Civil Rights Coordinator.

If you believe that AmeriHealth Administrators has failed to provide these services or discriminated in another way on the basis of race, color, national origin, age, disability, or sex, you can file a grievance with our Civil Rights Coordinator.

There are four ways to file a grievance directly with AmeriHealth Administrators:

- by mail: AmeriHealth Administrators, ATTN: Civil Rights Coordinator, 1900 Market Street, Philadelphia, PA 19103;
- by phone: 800-480-5032 (TTY 711);
- by fax: 215-761-0920; or
- by email: **AHACivilRightsCoordinator@ahatpa.com**.

If you need help filing a grievance, our Civil Rights Coordinator is available to help you.

You can also file a civil rights complaint with the U.S. Department of Health and Human Services, Office for Civil Rights electronically through the Office for Civil Rights Complaint Portal, available at <https://ocrportal.hhs.gov/ocr/portal/lobby.jsf> or by mail or phone at: U.S. Department of Health and Human Services, 200 Independence Avenue SW, Room 509F, HHH Building, Washington, DC 20201, 1-800-368-1019, 800-537-7697 (TDD). Complaint forms are available at <http://www.hhs.gov/ocr/office/file/index.html>.

Language Access Services

ATTENTION: If you speak English, language assistance services, free of charge, are available to you. Call the number on your ID card (TTY: 711).

ATENCIÓN: si habla español, tiene a su disposición servicios gratuitos de asistencia lingüística. Llame al número que aparece en su tarjeta de identificación (TTY: 711).

注意: 如果您使用简体中文, 您可以免费获得语言协助服务。请致电您ID卡上的电话号码。

LƯU Ý: Nếu quý vị nói tiếng Việt, có dịch vụ trợ giúp ngôn ngữ miễn phí dành cho quý vị. Xin gọi số điện thoại trên thẻ ID của quý vị.

ВНИМАНИЕ: Если вы говорите по-русски, вам предлагаются бесплатные услуги переводчика. Позвоните по телефону на вашем удостоверении.

Wann du [Deutsch (Pennsylvania German / Dutch)] schwetzsch, kannsch du mitaus Koschte ebber gricke, ass dihr helft mit die englisch Schprooch. Ruf die Nummer uff dei ID-Card uff.

알림: 한국어 통역서비스가 필요한 분은 귀하의 ID 카드에 나와있는 번호로 전화하십시오. 통역서비스를 무료로 받으실 수 있습니다.

ATTENZIONE: se parla italiano, sono disponibili per lei servizi di assistenza linguistica gratuiti. Contatti il numero che vede sulla sua carta d'identità.

انتباه: إذا كنت تتحدث العربية فإن خدمات المساعدة اللغوية متوفرة لك مجاناً. اتصل على الرقم الموجود على بطاقة التعريف الخاصة بك.

ATTENTION: Si vous parlez français, des services d'assistance linguistique gratuits sont à votre disposition. Appelez le numéro indiqué sur votre carte d'identité.

HINWEIS: Wenn Sie Deutsch sprechen, steht Ihnen über Language Assistance Services ein Dolmetscher kostenlos zur Verfügung. Wenden Sie sich an die Nummer auf Ihrer ID-Karte.

ધ્યાન આપો : જો તમે ગુજરાતી બોલી શકતા હો, તો તમારા માટે ભાષા સહાય સેવાઓ, વિના મૂલ્યે, ઉપલબ્ધ છે. તમારા ID કાર્ડ પરના નંબર પર કોલ કરો.

UWAGA: jeśli mówisz po polsku, możesz skorzystać z bezpłatnej pomocy językowej. Zadzwoń pod numer podany na Twojej karcie identyfikacyjnej.

ATANSYON: Si ou pale kreyòl ayisyen, gen asistans ak lang disponib pou ou gratis. Rele nimewo ki sou do kat idantifikasyon ou a.

ចំណាំ៖ ប្រសិនបើអ្នកនិយាយភាសា មន-ខ្មែរ ប្រទេសខ្មែរ សេវាជំនួយភាសាដែលឥតគិតថ្លៃមានសម្រាប់អ្នក។ សូមទូរស័ព្ទមកលេខនៅលើកាតសំគាល់ខ្លួនរបស់អ្នក។

ATENÇÃO: se você fala português, serviços de assistência a idioma estão disponíveis gratuitamente para você. Ligue para o número no seu cartão de identificação.

BAA ÁKONÍNÍZIN: Diné bizaad bee yáníłti'go, ata' hane' bee áká i'ilyeed t'áá jíík'e bee ná ahóót'i'. Naaltsoos bee nééhózingo nanitinígíí bik'ehgo hane'í bikáá'ígíí bich'í'í hólne'.

PAUNAWA: Kung nagsasalita ka ng Tagalog, makakakuha ka ng mga serbisyo ng tulong para sa wika nang walang bayad. Tawagan ang numero sa ID card ninyo.

注意：日本語をお話しになる場合は、言語支援サービスを無料でご利用いただけます。IDカードの番号にお電話ください。

توجه: اگر به زبان فارسی صحبت می کنید، خدمات کمک در زمینه زبان، به رایگان در اختیار شما می باشد. با شماره نوشته شده روی کارت عضویت خود تماس بگیرید.

Index

A

- abacavir sulfate tab, soln, **17**
- abacavir sulfate/lamivudine, **17**
- abacavir/lamivudine/zidovudine, **17**
- Abilify, **25**
- Abilify Mycite, **25**
- Abilify Mycite Tab
 - Maintenance/Starter Pak, **25**
- abiraterone, **22**
- Abrilada Inj, **52**
- Absorica, **42**
- Absorica LD, **42**
- Abstral, **25**
- acamprosate DR tab 333mg, **25**
- Acanya, **42**
- acarbose, **47**
- Accolate, **62**
- Accrufer, **66**
- Accupril, **35**
- Accuretic, **35**
- acutane cap, **42**
- acebutolol, **35**
- acetaminophen/codeine, **25**
- acetazolamide ER, **35**
- acetazolamide, **35**
- acetazolamide ER, **35**
- acetylcysteine, **62**
- Aciphex, **52**
- Aciphex Sprinkle, **52**
- acitretin, **42**
- Actemra SC, **55**
- Acticlate, **17**
- Actigall, **52**
- Actimmune, **35**
- Actiq, **25**
- Activella, **58**
- Actonel, **55**
- Actos, **47**
- Acular/Acular LS, **60**
- acyclovir, **17, 42**
- acyclovir 5% cream, **17**
- acyclovir cream/oint, **42**
- Aczone, **42**
- Adalat CC, **35**
- Adalimu-AACF Inj 40/0.8ml, **55**
- Adalimu-AATY Kit, **55**
- Adalimu-Adaz Inj 40/0.4ml (Sandoz), **55**
- Adalimu-RYVK Inj, **55**
- Adalimumab - A Kit 40/0.8ml, **55**
- Adalimumab adbm, **55**
- Adalimumab fkjp, **55**
- Adalimumab Kit 10/0.2ml, 20/0.4ml, 40/0.8ml, **55**
- Adalimumab-ADBM Crohns/UC/HS Starter, **55**
- Adalimumab-ADBM Psoriasis/Uveitis Starter, **55**
- Adapalene 0.1% lotion, **42**
- adapalene 0.1% soln, **42**
- adapalene 0.3% gel, **42**
- adapalene cream, **42**
- Adapalene pad 0.1%, **42**
- adapalene-benzoyl-peroxide gel, **42**
- Adbry Inj 150mg/ml, **42**
- Adcirca, **35, 41**
- Adderall, **25**
- Adderall XR, **25**
- Addyi, **58**
- adefovir dipivoxil, **17**
- Adempas, **35**
- Adhansia XR Capsule, **25**
- Adipex-P, **25**
- Adlarity Dis, **25**

- Adlyxin, **47**
Admelog, **47**
Adthyza tab, **47**
Advair Diskus, **63**
Advair HFA, **63**
Advate, **35**
Adynovate, **35**
Adzenys ER Susp, **25**
Adzenys XR ODT, **25**
Aemcolo DR, **17**
Aerospan, **63**
Afinitor, **22**
Afrezza, **47**
Afstyla, **35**
Agamree Susp, **52**
Aggrenox, **35**
Agrylin, **35**
Aimovig, **25**
AirDuo Digihaler, **63**
AirDuo RespiClick, **63**
Airsupra AER, **63**
Ajovy, **25**
Akeega, **22**
Aklief Cream 0.005%, **42**
Aktipak, **42**
ala-cort cream, **42**
Ala-Scalp Lotion, **42**
albendazole, **17**
albuterol sulfate er, **63**
albuterol sulfate nebulizer soln, syrup, tab, **63**
Alcaine, **60**
alclometasone cream, ointment, **42**
Aldactazide, **35**
Aldactone, **35**
Aldara, **42**
Alecensa, **22**
alendronate, **55**
alfuzosin, **66**
Alinia, **17**
aliskiren, **35**
Alkeran, **22**
Alkindi Sprinkle Cap, **47**
allopurinol, **55**
Allopurinol 200mg Tab, **55**
Allzital 25-325mg, **25**
almotriptan maleate, **25**
Alocril Soln, **60**
Alogliptin benz/metformin hcl, **47**
Alogliptin benz/pioglitazone, **47**
Alogliptin benzoate, **47**
Alora, **58**
alose tron hcl, **55**
Alphagan P soln, **60**
Alphanate, **35**
Alphanine, **35**
alprazolam, **25**
alprazolam ER, **25**
Alprolix, **35**
Alrex, **60**
Altabax, **17**
Altace, **36**
Altoprev ER, **36**
Altreno 0.05% lotion, **42**
Altuviii Inj, **36**
Alunbrig tab/pak, **22**
Alvaiz Tab, **67**
Alvesco, **63**
amantadine, **25**
Amaryl, **47**
Ambien, **25**
Ambien CR, **25**
ambrisentan, **36**
amcinonide, **42**
Amerge, **25**
Amicar, **36**
amiloride, **36**
amiloride/HCTZ, **36**
aminocaproic acid, **36**
amiodarone, **36**
Amitiza, **52**
amitriptyline hcl, **25**
Amjevita Inj, **55**

- amlodipine, **36, 40**
 amlodipine besylate/olmesartan, **36**
 amlodipine/benazepril, **36**
 amlodipine/valsartan, **36**
 amlodipine/valsartan/HCTZ, **36**
 amoxapine, **25**
 Amoxicill-clarithro-lansoprazole, **52**
 amoxicillin, **17**
 Amoxicillin 775mg, **17**
 amoxicillin/clavulanate, **17**
 amoxicillin/clavulanate extended-release, **17**
 amphet/dextr cap er, **25**
 amphetamine aspartate/amphetamine
 sulfate/dextroamphetamine, **25**
 amphetamine aspartate/amphetamine
 sulfate/dextroamphetamine ER, **25**
 amphetamine ER, **25**
 Amphetamine ER suspension, **25**
 amphetamine tablet, **25**
 amphetamine tablet (generic Evekeo), **25**
 ampicillin, **17**
 Ampyra, **52**
 Amrix, **55**
 Amzeeq, **17**
 Anafranil, **25**
 anagrelide, **36**
 Anaprox DS, **55**
 Anaspaz, **66**
 anastrozole, **22**
 Ancobon, **17**
 Androderm patch, **47**
 Androgel 1%, **47**
 Androgel 1.62% Packet, Pump, **47**
 Angeliq, **58**
 Annovera Mis, **58**
 Anoro Ellipta, **63**
 Antabuse, **25**
 Antara, **36**
 anthralin, **42**
 Anusol-HC cream, **52**
 Apadaz, **25**
 ApexiCon E, **42**
 Apidra, **47**
 Aplenzin, **25**
 Apo-Varenicline, **25**
 Apokyn Solution Cartridge 30mg/3ml, **25**
 apomorphine inj 30mg/3ml, **25**
 apraclonidine, **60**
 aprepitant, **52**
 Aptensio XR, **25**
 Aptiom, **25**
 Arakoda, **17**
 Arava, **55**
 Arazlo lotion 0.045%, **42**
 Arcalyst, **55**
 arformoterol neb 15/2ml, **63**
 Aricept, **25**
 Arikayce, **17**
 Arimidex, **22**
 aripiprazole, **25**
 Arixtra, **36**
 armodafinil, **25**
 ArmonAir Digihaler, **63**
 ArmonAir RespiClick, **63**
 Armour Thyroid, **47**
 Arnuity Ellipta, **63**
 Aromasin, **22**
 Arthrotec, **55**
 Arymo ER, **26**
 Asacol HD, **52**
 asenapine tab sub, **26**
 Asmanex, **63**
 Asmanex HFA, **63**
 aspirin-dipyridamole er, **36**
 Aspruzyo Spr Gra, **36**
 Atacand, **36**
 Atacand HCT, **36**
 atazanavir, **17**
 Atelvia, **55**
 atenolol, **36**
 atenolol/chlorthalidone, **36**
 Ativan, **26**

atomoxetine, **26**
Atorvaliq Susp, **36**
atorvastatin, **36–37**
atorvastatin/amlodipine, **26**
atovaquone, **17**
atovaquone/proguanil, **17**
Atralin, **42**
Atripla, **17**
atropine sulfate, **60**
Atrovent HFA, **63**
Aubagio, **26**
Augmentin, **17**
Augmentin XR, **17**
Augtyro, **22**
aurovela 24 FE 1/20, **58**
Auryxia, **66**
Austedo [XR], **26**
Auvelity, **26**
Auvi-Q 0.1mg, **63**
Auvi-Q 0.15mg and 0.3mg, **63**
Avalide, **36**
Avapro, **36**
Aveed Soln 750mg/3ml Intramuscular, **47**
Avelox, **17**
avidoxy, **17**
avita, **42**
Avodart, **66**
Avonex, **26**
Axert, **26**
Axiron, **47**
Aygestin, **58**
Ayvakit, **22**
Azasan, **22**
azathioprine, **22**
azelaic acid gel 15%, **42**
azelastine, **46, 60, 63**
azelastine HCL drops, **60**
azelastine nasal spray, **63**
azelastine/fluticasone spray 137-50, **63**
Azelex, **42**
Azilect, **26**

azithromycin, **17**
Azopt, **60**
Azor, **36**
Azstarys, **26**
Azulfidine, **52**

B

bacitracin ophth, **60**
bacitracin/polymyxin B ophth oint, **60**
baclofen, **55**
Baclofen soln, **55**
baclofen sus 25mg/ml, **55**
Bactrim, Bactrim DS, **17**
Bactroban nasal oint, **46**
Bafiertam DR Cap, **47**
Balcoltra, **58**
balsalazide, **52**
Balversa, **22**
Banzel, **26**
Banzel Susp, **26**
Baqsimi, **47**
Baraclude, **17**
Basaglar, **47**
Baxdela, **17**
Bebulin, **36**
Beconase AQ, **63**
Belbuca, **26**
Belsomra, **26**
Belviq [XR], **26**
benazepril, **36**
benazepril/HCTZ, **36**
BeneFIX, **36**
Benicar, **36**
Benicar HCT, **36**
Benlysta, **22**
Bentyl, **52**
Benzaclin, **42**
Benzamycin gel, **42**
Benzamycinpak, **42**

- Benzhydrocodone-acetaminophen, **26**
Benznidazole, **17**
benzonatate, **63**
benzoyl peroxide/erythromycin, **42**
benzphetamine, **26**
benztropine, **26**
bepotastine, **60**
Bepreve, **60**
Berinert, **67**
beser lotion 0.05%, **42**
Besivance, **60**
Besremi, **22**
Betagan, **60**
betaine powder, **47**
betamethasone dipropionate, **42**
betamethasone valerate, **42**
betamethasone/clotrimazole, **42**
Betapace AF, **36**
Betaseron, **26**
betaxolol, **36, 60**
bethanechol, **66**
Bethkis Neb, **17**
Betimol, **60**
Betoptic S, **60**
Bevespi Aerosphere, **63**
Bevyxxa, **36**
Bexagliflozin, **47**
bexarotene, **22**
bexarotene gel, **22**
Beyaz, **58**
Biaxin, **17**
bicalutamide, **22**
Bidil, **36**
Bijuva cap, **58**
Biktarvy, **17**
Biltricide, **17**
bimatoprost, **60**
Bimzelx Inj, **42**
Binosto, **55**
Bismth/metr/cap tetracycline, **52**
bisoprolol, **36**
bisoprolol/HCTZ, **36**
Bleph 10, **60**
Blephamide S.O.P. ointment, **60**
blisovi 24 FE 1/20, **58**
Boniva, **55**
Bonjesta, **52**
bosentan, **63**
Bosulif, **22**
Braftovi, **22**
Brand Prenatal Vitamins, **66**
Bravelle, **58**
Breeze2 Glucometer, **47**
Breeze2 Test Strips, **47**
Brenzavvy, **47**
Breo Ellipta, **63**
Brevicon, **58**
Brexafemme, **17**
Breyna AER, **63**
Breztri Aerosphere, **63**
brimonidine gel 0.33%, **42**
brimonidine sol 0.1%, **60**
brimonidine tartrate, **60**
brimonidine/timolol soln 0.2-0.5%, **60**
brinzolamide sus 1%, **60**
Brisdelle, **26**
Briviact, **26**
Briviact soln, **26**
bromfed DM, **63**
bromfenac drops, **60**
bromocriptine mesylate, **26**
Bromsite sol 0.075%, **60**
Bronchitol Cap, **63**
Brovana Neb, **63**
Brukinsa, **22**
Bryhali lotion 0.01%, **42**
budesonide ER tab, **52**
budesonide susp., **63**
Budesonide-formoterol, **63**
bumetanide, **36**
Bunavail, **26**
Buphenyl, **66**

buprenorphine hcl/naloxone hcl, **26**
 buprenorphine patch, **26**
 buprenorphine SL, **26**
 bupropion, **26**
 bupropion ER 150mg, **26**
 Bupropion ER 450mg, **26**
 bupropion SR, **26**
 bupropion XL, **26**
 Buspar, **26**
 buspirone, **26**
 Butal/Apap Tab 25-325mg, **26**
 Butalbital-acetaminophen 50-300mg, **26**
 butalbital/apap/caffeine, **26**
 butalbital/apap/caffeine/codeine, **26**
 butalbital/aspirin/caffeine/codeine, **26**
 butorphanol tartrate nasal, **26**
 Butrans, **26**
 Bydureon, **47**
 Byetta, **47**
 Bylvay, **52**
 Bynfezia Pen, **47**
 Bystolic, **36**
 Byvalson, **36**

C

Cablivi Kit, **67**
 Cabometyx, **22**
 Cabtreo Gel, **42**
 Caduet, **36**
 Cafergot, **26**
 Calan, **36**
 Calan SR, **36**
 Calciferol, **66**
 calcipotriene cream, **42**
 Calcipotriene foam, **42**
 calcipotriene-betamethasone dp oint, **42**
 calcipotriene-betamethasone dp susp, **42**
 calcitonin-salmon (rDNA origin) nasal spray, **55**
 calcitonin-salmon inj, **55**

calcitriol capsules, **47**
 calcitriol ointment, **42**
 calcium acetate, **67**
 Calquence, **22**
 Cambia Packet, **26**
 Camzyos, **36**
 Canasa supp, **52**
 candesartan, **36**
 candesartan/hydrochlorothiazide, **36**
 Capcof Syrup, **26**
 capecitabine, **22**
 Capex, **42**
 Caplyta, **26**
 Caprelsa, **22**
 captopril, **36**
 captopril/HCTZ, **36**
 Carac, **42**
 Carafate tabs/susp, **52**
 Carbaglu, **67**
 carbamazepine, **26**
 carbamazepine susp, **26**
 carbamazepine XR, **26**
 Carbatrol, **26**
 carbidopa, **26**
 carbidopa/levodopa, **26**
 carbidopa/levodopa ER, **26**
 carbidopa/levodopa ODT, **26**
 carbidopa/levodopa/entacapone, **26**
 Carbinoxamin ER Sus, **63**
 carbinoxamine, **63**
 Cardizem, **36**
 Cardizem CD, **36**
 Cardizem LA, **36**
 Cardura, **36, 66**
 carglumic, **67**
 carisoprodol, **55**
 carisoprodol-aspirin-codeine, **26**
 Carnitor, **47**
 Carospir, **36**
 carteolol, **60**
 cartia XT, **36**

- carvedilol, **36**
carvedilol ER, **36**
Casodex, **22**
Cataflam, **27**
Catapres tablets, **36**
Catapres-TTS, **36**
Caverject, **66**
Cayston, **63**
cefaclor, **17**
cefaclor ER, **17**
cefadroxil, **17**
cefdinir, **17**
cefixime susp/cap, **17**
ceftibuten, **17**
Ceftin, **17**
cefuroxime axetil, **17**
Celebrex, **55**
celecoxib, **55**
Celexa, **27**
Cellcept, **22**
Celontin, **27**
Cenestin, **58**
Centany 2% oint, **42**
cephalexin, **17**
Cequa Sol 0.09%, **61**
Cerdelga, **67**
Cetraxal, **46**
cetorelix inj, **58**
cetorelix kit, **58**
Cetrotide Kit, **47**
cevimeline hcl, **46**
Chantix, **27**
charlotte 24 chew FE 1/20, **58**
Chemet, **67**
Chenodal, **52**
cheratussin AC, **63**
cheratussin DAC, **63**
chlordiazepoxide, **27, 52**
chlordiazepoxide/clidinium, **52**
chlorhexidine gluconate soln, **17**
chloroquine phosphate, **17**
chlorothiazide, **36**
chlorpromazine HCl, **27**
chlorthalidone, **36**
chlorzoxazone 375mg, 500mg, 750mg, **55**
Cholbam, **52**
cholestyramine, **36–37**
cholestyramine light, **37**
Chorionic gonadotropin, **67**
Cialis, **41, 66**
Cibinqo Tab, **42**
ciclopirox 0.77% cream, **42**
ciclopirox 8% solution, **43**
ciclopirox cream, gel, shampoo, suspension, **43**
cilostazol, **37**
Ciloxan Sol, **61**
Cimduo, **17**
cimetidine, **52**
Cimzia, **55**
cinacalcet, **47**
Cinryze, **67**
Cipro, **17**
Cipro XR, **17**
Ciprodex, **46**
ciprofloxacin, **17, 46, 61**
ciprofloxacin ER tabs, **17**
ciprofloxacin-dexamethasone otic susp, **46**
Ciprofloxacin-fluocinolone PF otic soln, **46**
citalopram, **27**
Citalopram 30mg Cap, **27**
Clarinox, **63**
Clarinox-D, **63**
clarithromycin, **17**
clarithromycin ER, **17**
Clemastine syrup, **63**
clemastine tab, **63**
Clenpiq Soln, **52**
Cleocin, **17, 43, 58**
Cleocin T, **43**
Cleocin vaginal, **58**
Climara patch, **58**
clind/benz gel 1.2-3.75%, **43**

- Clindagel, **43**
 clindamycin HCL cap, **43**
 clindamycin phosphate sol 1%, **43**
 clindamycin, clindamycin-benzoyl peroxide gel
 [w/pump], **43**
 Clindamycin/ benzoyl peroxide 1-5%, **43**
 clindamycin/tretinoin gel, **43**
 Clindesse Cream, **17**
 clobazam, **27**
 clobazam susp, **27**
 clobetasol cream, ointment, solution, **43**
 Clobex, **43**
 Clocortolone pivalate, **43**
 clodan, **43**
 Cloderm, **43**
 clomiphene citrate, **58**
 clomipramine HCl, **27**
 clonazepam, **27**
 clonidine ER 12 HR tab, **37**
 Clonidine ER 24HR tab, **37**
 clonidine IR tablet, **37**
 clonidine patches, **37**
 clopidogrel, **37**
 clorazepate dipotassium, **27**
 clotrimazole troches, **17**
 clovique, **67**
 clozapine, **27**
 clozapine ODT, **27**
 Clozaril, **27**
 Coagadex, **37**
 codeine tabs, **27**
 coditussin AC liquid, **27**
 Colazal, **52**
 colchicine 0.6mg tab, **55**
 Colchicine Cap 0.6mg, **55**
 colchicine/probenecid, **55**
 Colcrys, **55**
 colesevelam, **37**
 Colestid, **37**
 colestipol HCl, **37**
 Colocort, **52**
 Combigan soln 0.2-0.5%, **61**
 Combivent Respimat, **63**
 Combivir, **17**
 Cometriq, **22**
 Complera, **18**
 Comtan, **27**
 Concerta, **27**
 Condylox, **43**
 Conjupri, **37**
 Contour Glucometer, **47**
 Contour Next Test Strips, **47**
 Contour Test Strips, **47**
 Contrave ER, **27**
 Conzip, **27**
 Copaxone, **27**
 Copiktra, **22**
 Cordran, **43**
 Coreg, **37**
 Coreg CR, **37**
 Corgard, **37**
 Corifact, **37**
 Corlanor, **37**
 cortane B otic drops, **46**
 Cortef, **47**
 Cortisone tab, **47**
 Corzide, **37**
 Cosentyx, **43**
 Cosopt, **61**
 Cosopt PF, **61**
 Cotellic, **22**
 Cotempla XR ODT, **27**
 Coumadin, **37**
 Coxanto, **27**
 Cozaar, **37**
 Creon, **52**
 Cresemba, **18**
 Crestor, **37**
 Crinone Gel 4%, **58**
 Crinone Gel 8%, **58**
 Crixivan, **18**
 cromolyn inhalation soln, **63**

cromolyn ophth, **61**
 cromolyn sodium solution, **53**
 Crotan Lotion, **43**
 Cuprimine, **55**
 Cutivate, **43**
 Cuvposa, **55**
 Cuvrior, **56**
 cyanocobalamin nasal spray, **67**
 Cyclessa, **58**
 cyclobenzaprine, **56**
 Cyclobenzaprine ER, **56**
 Cyclogyl, **61**
 cyclopentolate HCl, **61**
 cyclophosphamide caps, **22**
 Cyclophosphamide tabs, **22**
 cyclosporine, **22, 61**
 cyclosporine emulsion, **61**
 Cyltezo Inj, **56**
 Cymbalta, **27**
 cyproheptadine, **63**
 Cystadane, **67**
 Cystadrops Soln, **61**
 Cystagon, **67**
 Cytomel, **47**
 Cytotec, **53**
 Cytoxan, **22**

D

D-Penammine 125mg tablet, **67**
 D.H.E.45, **27**
 dabigatran cap, **37**
 Dailyvite w/Zinc & NephlexRx, **67**
 Daklinza, **18**
 dalfampridin ER, **63**
 Daliresp, **63**
 danazol, **22, 47**
 Danocrine, **22**
 Dantrium, **27, 56**
 Dantrolene, **27, 56**

dantrolene, **27, 56**
 Dapagliflozin pro-metformin ER tablet 24 hour
 10-1000mg, 5-1000mg, **48**
 Dapagliflozin propanediol tablet 10mg, 5mg,
48
 Dapsone Gel, **43**
 dapsone tab, **18**
 Daraprim Tab, **18**
 darifenacin ER, **66**
 Dartisla ODT, **56**
 darunavir, **18**
 Daurismo, **22**
 Daxbia, **18**
 Daybue Soln, **27**
 Daypro, **27**
 Daytrana, **27**
 Dayvigo, **27**
 DDAVP, **48**
 deferasirox tab/granules, **67**
 deferiprone tab, **67**
 deflazacort tab/sus, **48**
 Degludec Flextouch Inj, **48**
 Delatestryl, **48**
 Delestrogen Oil Intramuscular, **48**
 Delstrigo, **18**
 Deltasone, **22**
 Delzicol, **53**
 Demadex, **37**
 demeclocycline, **18**
 Demerol, **27**
 Demser, **48**
 Denavir, **43**
 Depakene, **27**
 Depakote, **27**
 Depakote ER, **27**
 Depakote Sprinkle Caps, **27**
 Depen Titrated, **18**
 Depo SubqQ Provera, **58**
 Depo-Estradiol Oil 5mg/ml Intramuscular, **48**
 Depo-Provera, **58**

- Depo-Testosterone Solution 100mg/ml,
200mg/ml, **48**
- Derma-Smoothe FS, **43**
- Dermatop, **43**
- Dermotic, **46**
- Descovy, **18**
- desipramine, **27**
- desmopressin acetate, **48**
- Desmopressin Nasal Soln, **48**
- Desogen, **58**
- desogestrel-ethinyl estradiol, **58**
- Desonate, **43**
- desonide gel 0.05%, **43**
- Desowen, **43**
- desoximetasone cream, gel, ointment, **43**
- Desoxyn, **27**
- desrx gel 0.05%, **63**
- Desvenlafaxine ER 24 HR, **27**
- Detrol, **66**
- Detrol LA, **66**
- Dexabliss tab 1.5mg, **48**
- dexamethasone, **48, 61–62**
- dexamethasone ophth, **61**
- dexamethasone tablet 6-day, 10-day, 13-day,
48
- Dexchlorpheniramine soln, **63**
- Dexcom Continuous Glucose Monitor G7, G6,
G5, G4 Sensors, **48**
- Dexcom Continuous Glucose Monitor Receiver,
48
- Dexcom Continuous Glucose Monitor
Transmitter, **48**
- Dexedrine, **27**
- Dexilant, **53**
- dexlansoprazole, **53**
- dexlansoprazole DR cap, **53**
- dexmethylphenidate ER, **27**
- dexmethylphenidate hcl, **27**
- Dexpak pak 10-day, 13-day, **48**
- dextroamphetamine, **25, 27**
- dextroamphetamine ER, **27**
- Dhivy, **27**
- Diacomit, **27**
- Diamox Sequels, **61**
- Diastat, **27**
- diazepam rectal gel, **27**
- diazepam solution, **27**
- diazepam tabs, **27**
- diazoxide suspension 50mg/ml, **48**
- Dibenzylidene, **37**
- dichlorphenate tab, **67**
- Diclegis, **53**
- diclofenac 3% gel, **43**
- diclofenac cap 25mg, **27**
- Diclofenac cap 35mg, **27**
- Diclofenac epolamine transdermal 1.3%, **56**
- diclofenac potassium, **27, 56**
- diclofenac powder, **27**
- diclofenac sodium, **27, 56**
- diclofenac sodium DR, **56**
- diclofenac sodium ER, **56**
- diclofenac sodium gel 1%, **27**
- diclofenac sodium soln 1.5%, **56**
- diclofenac soln 0.1% ophth, **61**
- diclofenac soln 2%, **56**
- diclofenac/misoprostol, **56**
- dicloxacillin, **18**
- dicyclomine, **53**
- didanosine, **18**
- diethylpropion, **27**
- Differin 0.1% cream, **43**
- Differin 0.1% lotion, **43**
- Differin 0.3% gel, **43**
- Dificid tab/susp, **18**
- Diflorasone diacetate, **43**
- Diflucan, **18, 58**
- Diflucan tab/susp, **18**
- diflunisal, **27**
- difluprednate emu, **61**
- digitek, **37**
- digox, **37**
- digoxin, **37**

- dihydrocodein/APAP/caff, **28**
dihydrocodeine/aspirin/caffeine, **28**
dihydroergotamine inj, **28**
dihydroergotamine nasal spray, **28**
Dilantin chewable tablets, **28**
Dilaudid, **28**
dilt-CD, **37**
diltiazem HCl, **37**
diltiazem HCl CD, **37**
diltiazem HCl ER, **37**
diltiazem HCl LA, **37**
diltiazem HCl SR, **37**
diltzac ER, **37**
dimethyl fumarate DR cap, **28**
Diovan, **37**
Diovan HCT, **37**
diphenoxylate HCl/atropine, **53**
Diprolene, Diprolene AF, **43**
dipyridamole, **37**
disopyramide, **37**
disulfiram, **28**
Ditropan XL, **66**
divalproex sodium, **28**
divalproex sodium ER, **28**
divalproex sprinkle cap, **28**
Divigel, **58**
dofetilide, **37**
Dojolvi Liq, **67**
Dolophine, **28**
donepezil hydrochloride, **28**
Doptelet, **67**
Doral, **28**
Doryx 50mg DR tablet, **18**
Doryx 200mg DR tablet, **18**
Doryx MPC Tab 60mg, **18**
dorzolamide HCl 2%, **61**
dorzolamide-timolol, **61**
Dovato, **18**
Dovonex cream, **43**
doxazosin mesylate, **37, 66**
doxepin capsule, **28**
doxepin cream 5%, **43**
doxepin HCl con 10mg/ml, **28**
doxepin tablet, **28**
doxercalciferol, **48**
Doxycycline DR 40mg, **18**
doxycycline hyclate cap 50mg, 100mg, **18**
Doxycycline hyclate DR 80mg, **18**
Doxycycline hyclate tab 50mg, **18**
Doxycycline hyclate tab 75mg, 150mg, **18**
Doxycycline hyclate tab DR 50mg, 100mg, **18**
Doxycycline hyclate tab DR 75mg, 150mg, **18**
Doxycycline hyclate tab DR 200mg, **18**
doxycycline monohydrate 50mg, 75mg, 100mg
tab, **18**
doxycycline monohydrate cap 50mg, 100mg,
18
Doxycycline monohydrate cap 75mg, 150mg,
18
Doxycycline monohydrate tab 150mg, **18**
doxylamine-pyridoxine, **53**
Drizalma Sprinkle, **28**
dronabinol, **53**
drospirenone-ethinyl estradiol, **58**
droxidopa, **37**
Duac, **43**
Duaklir, **63**
Duetact, **48**
Dulera, **63**
duloxetine, **28**
Duobrii Lotion, **43**
Dupixent, **43**
Duragesic patch, **28**
Durezol Emu, **61**
Durlaza, **37**
dutasteride, **66**
dutasteride/tamsulosin hcl, **66**
Dutoprol, **37**
Duvyzat Sus, **66**
Duzallo, **67**
Dxevo 11-day Pak 1.5mg, **48**
Dyanavel XR, **28**

Dyazide, **37**
 Dymista, **63**
 Dyrenium, **37**

E

E.E.S., **18**
 EC-Naprosyn, **56**
 econazole, **43**
 Ecoza, **43**
 ED-Spaz, **66**
 Edarbi, **37**
 Edarbyclor, **37**
 Edecrin, **37**
 Edex, **66**
 Edurant, **18**
 efavirenz, **18**
 efavirenz-emtricitab-tenofovir tab, **18**
 efavirenz-lamivudine-tenofovir tab, **18**
 Effexor XR, **28**
 Effient, **37**
 Efudex cream, **43**
 Egaten 250mg tablet, **18**
 Eldepryl, **28**
 Elepsia XR, **28**
 Elestat, **61**
 eletriptan, **28**
 Elidel, **43**
 Elimite, **43**
 Eliquis, **37**
 Elixophyllin Elixir, **63**
 Elmiron, **66**
 Elocon, **43**
 Eloctate, **37**
 eluryng mis, **58**
 Elyxyb Sol, **37**
 Embeda, **28**
 Emcyt, **22**
 Emend, **53**
 Emflaza, **48**

Emgality (300mg Dose) Prefilled Pen 100mg/ml,
28
 Emgality Prefilled Pen/Auto-Injector 120mg/ml,
28
 Empaveli Inj, **67**
 emtricitabine cap, **18**
 emtricitabine-tenofovir disoproxil fumarate tab
 100-150mg, 133-200mg, 167-250mg, **18**
 emtricitabine-tenofovir disoproxil fumarate tab
 200-300mg, **18**
 Emtriva, **18**
 Emverm, **19, 53**
 Enablex, **66**
 enalapril, **37**
 enalapril solution, **37**
 enalapril/HCTZ, **37**
 Enbrel, **56**
 Endari powder, **53**
 endocet, **28**
 Endometrin Insert 100mcg Vaginal, **58**
 enoxaparin, **37**
 Enspryng Inj, **48**
 Enstilar, **43**
 entacapone, **26, 28**
 Entadfi, **37**
 entecavir, **19**
 Entocort EC, **53**
 Entresto, **37**
 Entyvio Inj, **56**
 Eohilia Sus, **48**
 Epaned Sol 1mg/ml, **37**
 Epclusa, **19**
 Epidiolex Soln, **28**
 Epiduo, **43**
 Epiduo Forte gel, **43**
 epinastine HCl, **61**
 epinephrine pen 0.3mg, **63**
 Epinephrine pen 0.15mg, **63**
 EpiPen, **63**
 EpiPen Jr., **63**
 Epivir HBV Soln, **19**

- Epivir HBV Tab, **19**
Epivir Tab, **19**
eplerenone, **37**
Eprontia, **28**
eprosartan, **37**
Epsolay Cream, **43**
Epzicom, **19**
ergocalciferol, **67**
ergotamine tartrate/caffeine, **28**
Erivedge, **22**
Erleada, **22**
erlotinib, **22**
Ermeza Soln, **48**
Ertaczo, **43**
Ery-Tab, **19**
Erygel, **43**
EryPed, **19**
Erythrocin, **19**
erythromycin delayed release, **19**
erythromycin ethylsuccinate, **19**
erythromycin etyhylsuccinate susp, **61**
erythromycin gel, soln, swabs, **43**
erythromycin ophth oint, **61**
erythromycin stearate, **19**
Esbriet, **64**
escitalopram, **28**
Esgic cap/tab, **28**
esomeprazole, **53**
esomeprazole granules, **53**
Esomeprazole strontium, **53**
Esperoct, **37**
estazolam, **28**
Estrace Cream, **58**
Estrace Tab, **58**
estradiol, **48, 58–59**
estradiol cream 0.1%, **58**
estradiol transdermal, **58**
Estring, **58**
Estrogel Gel, **58**
estropipate, **58**
Estrostep FE, **58**
eszopiclone, **28**
ethacrynic acid, **37**
ethambutol, **19**
ethosuximide, **28**
etidronate disodium, **56**
etodolac, **28, 56**
etoposide, **22**
etravirine, **19**
Eucrisa, **43**
Eulexin, **22**
Eurax Lotion, **43**
euthyrox, **48**
Evekeo [ODT], **28**
everolimus (generic for Afinitor), **22**
everolimus (generic for Zortress), **22**
Eversense E3 Sensor, **48**
Eversense E3 Transmitter, **48**
Evista, **58**
Evoclin, **44**
Evoxac, **47**
Evrysdi Soln, **48**
Evzio, **28**
Exalgo, **28**
Exelderm, **44**
Exelon, **28**
exemestane, **22**
Exforge, **37**
Exforge HCT, **37**
Exjade, **67**
Exkivity, **22**
Exservan Mis, **28**
Extavia, **28**
Extina, **44**
Eysuvis Ophth, **61**
ezetimibe, **37–38**
Ezetimibe/Atorvastatin, **37**
Ezetimibe/Rosuvastatin, **37**
ezetimibe/simvastatin, **38**
Ezzalor Sprinkle Cap, **37**

F

- Fabhalta, **67**
Fabior, **44**
famciclovir, **19**
famotidine 40mg tab, suspension, **53**
Fanapt, **28**
Fareston tab, **22**
Farxiga, **48**
Farydak, **23**
Fasenra, **44**
fayosim tab, **59**
Fazaclo, **28**
febuxostat, **56**
Feiba, **38**
felbamate, **28**
Felbatol, **28**
Feldene, **28, 56**
felodipine ER, **38**
Femara, **23**
Femcon FE, **59**
FemHRT, **59**
Femring, **59**
fenofibrate, **38**
Fenofibrate Micronized, **38**
fenofibrate nanocrystallized, **38**
fenofibric acid, **38**
Fenoglide, **38**
Fenoprofen calcium, **28, 56**
Fenortho, **56**
fentanyl citrate OTFC, **28**
Fentanyl citrate tablet, **28**
fentanyl transdermal, **28**
Fentora, **28**
Ferriprox, **67**
fesoterodine tab ER, **56**
Fetzima, **28**
Fexmid, **56**
Fiasp, **48**
Fibricor, **38**
Filspari tab, **64**
Filsuvez Gel 10%, **44**
Finacea, **44**
finasteride, **66**
fingolimod, **29**
Fintepla sol, **29**
finzala chew FE 1/20, **59**
Fioricet Cap, **29**
Fioricet with codeine, **29**
Fiorinal with codeine, **29**
Firazyr, **67**
Firdapse, **67**
Firvanq Soln, **19**
Flagyl, **19**
flavoxate, **66**
flecainide, **38**
Flector Patch, **56**
Fleqsuvy Susp 25mg/5ml, **56**
Flolipid susp, **38**
Flomax, **66**
Flovent Diskus, **64**
Flovent HFA, **64**
fluconazole suspension, **19**
fluconazole tabs, **19**
flucytosine, **19**
fludrocortisone acetate, **48**
Flumadine, **19**
flunisolide, **64**
fluocinolone acetonide cream, sol, oil, **44**
fluocinolone acetonide oil, **47**
fluocinonide gel, **44**
fluocinonide ointment, **44**
fluoritab chew tab, **67**
fluorometholone, **61**
Fluorouracil cream 0.5%, **44**
fluorouracil solution 2%, **44**
fluoxetine, **29, 31**
fluoxetine 10mg, 20mg, 40mg, **29**
fluoxetine soln, **29**
fluphenazine, **29**
Flurandrenolide cream, lotn, oint, **44**

flurazepam, **29**
 flurbiprofen, **29, 56, 61**
 flutamide, **23**
 Flutic/Vilan INH, **64**
 Fluticasone HFA AER, **64**
 fluticasone propionate cream, lotn, oint., **44**
 Fluticasone propionate diskus, **64**
 fluticasone propionate nasal susp, **64**
 fluticasone-salmeterol AER powder, **64**
 Fluticasone/Salmeterol AER, **64**
 fluvastatin sodium, **38**
 fluvoxamine, **29**
 fluvoxamine ER, **29**
 FML Liquifilm suspension, **61**
 Focalin, **29**
 Focalin XR, **29**
 Follistim AQ, **59**
 fondaparinux, **38**
 ForFivo XL, **29**
 formoterol neb 20/2ml, **64**
 Fortamet, **48**
 Forteo, **48**
 Fortesta, **48**
 Fosamax, **56**
 Fosamax Plus D, **56**
 fosamprenavir calcium tab, **19**
 fosfomycin pow, **19**
 fosinopril, **38**
 fosinopril/HCTZ, **38**
 Fosrenol, **67**
 Fotivda, **23**
 Fragmin, **38**
 Freestyle Glucometer, **48**
 Freestyle InsuLinx Test Strips, **48**
 FreeStyle Libre Reader, Sensor, Reader Device,
49
 Freestyle Lite Test Strips, **49**
 Freestyle Test Strips, **49**
 Frova, **29**
 Frovatriptan succinate, **29**
 Fruzaqla, **23**

Furoscix Kit 80mg/10ml, **38**
 furosemide solution, **38**
 furosemide tabs, **38**
 Fuzeon, **19**
 Fycompa, **29**

G

gabapentin, **29**
 gabapentin soln, **29**
 gabapentin tab, **29**
 Gabitril, **29**
 Galafold, **67**
 galantamine, **29**
 galantamine ER, **29**
 ganirelix acetate soln, **68**
 Gastrocrom, **53**
 Gattex, **53**
 Gavreto, **23**
 gefitinib, **23**
 Gelnique Gel, **66**
 gemfibrozil, **38**
 Gemmily cap 1/20, **59**
 Gemtesa, **66**
 Generess FE, **59**
 Genotropin, **49**
 Gentak Oint 0.3% OP, **61**
 gentamicin ophth, **61**
 gentamicin topical cream, ointment, **44**
 Geodon, **29**
 Gilenya 0.5mg, **29**
 Gilenya 0.25mg, **29**
 Gilotrif, **23**
 Gimoti Spray, **53**
 glatiramer acetate, **29**
 glatopa, **29**
 Gleevec, **23**
 Gleostine, **23**
 glimepiride, **49, 51**
 glipizide ER, **49**

glipizide tab, **49**
 glipizide XL, **49**
 Gloperba Soln, **56**
 Glucagen Inj Hypokit, **49**
 glucagon emergency kit (generic), **49**
 Glucagon Emergency Kit (Lilly), **49**
 Glucophage, **49–50**
 Glucophage XR, **49–50**
 Glucotrol XL, **49**
 Glucovance, **49**
 glyburide, **49–50**
 glyburide micronized, **49**
 glycopyrrolate oral solution 1mg/5ml, **56**
 glycopyrrolate tab, **56**
 Glynase, **49**
 Glyset, **49**
 Glyxambi, **49**
 Gocovri, **29**
 Golytely solution reconstituted 227.1gm, **53**
 Golytely solution reconstituted 236gm, **53**
 Gonal-f, **59**
 Gralise Mis, **29**
 granisetron, **53**
 Grastek, **64**
 Gris-PEG, **19**
 griseofulvin microsize, **19**
 griseofulvin ultramicrosize, **19**
 guaifenesin-codeine soln 10mg/5ml, **29**
 guanfacine, **29, 38**
 guanfacine ER, **29**
 Gvoke HypoPen, **49**
 Gvoke PFS inj, **49**

H

Hadlima Inj, **56**
 Haegarda, **68**
 hailey 1.5/30, **59**
 hailey 24 FE 1/20, **59**
 halcinonide cream 0.1%, **44**

Halcion, **29**
 halobetasol AER 0.05%, **44**
 halobetasol propionate, **44**
 Halobetasol propionate foam 0.05%, **44**
 Halog, **44**
 haloperidol, **29**
 Harvoni, **19**
 Hectorol, **49**
 Helixate FS, **38**
 Hemady, **49**
 Hemangeol Soln, **38**
 Hemlibra Soln, **38**
 Hemmorex-HC Supp, **53**
 Hemofil M, **38**
 Hepsera, **19**
 Hetlioz Cap, **29**
 Hetlioz LQ Susp, **29**
 Hexalen, **23**
 Hiprex, **19**
 Homatropaire sol 5% OP, **61**
 homatropine ophthalmic, **61**
 Horizant, **29**
 Hulio Inj, **56**
 Humalog, **49**
 Humate-P, **38**
 Humatin, **19**
 Humatrope, **49**
 Humira (2 Pen) Pen-Injector Kit 40mg/0.4ml,
 80mg/0.8ml, **56**
 Humira (2 Syringe) Prefilled Syringe Kit
 10mg/0.1ml, 20mg/0.2ml, **56**
 Humira (2 Syringe) Prefilled Syringe Kit
 40mg/04ml, **56**
 Humira Prefilled Syringe Kit 40MG/0.8ML, **56**
 Humira-CD/UC/HS Starter Pen-Injector Kit, **56**
 Humira-Ped UC Starter Pen-Injector Kit, **56**
 Humira-Ps/UV/Adol HS Starter Pen-Injector Kit,
56
 Humira-Psoriasis/Uveit Starter Pen-Injector Kit,
56
 Humulin, **49**

Humulin R U-500 (Concentrated and KwikPen),
49

Hycamtin, **23**

Hycodan Sol 5-1.5mg/5ml, **64**

Hycodan Tab 5-1.5mg, **64**

Hycofenix, **64**

hydralazine, **38**

Hydrea, **23**

hydrochlorothiazide, **36, 38, 41**

hydrocod-cpm-pseudoephedrine, **64**

hydrocodon-cpm-phenylephrine, **64**

hydrocodone bit/homatrop syrup, **64**

hydrocodone ER, **29**

hydrocodone-chlorpheniramine susp, **64**

hydrocodone-homatropine tab, **29**

hydrocodone/acetaminophen, **29**

hydrocortisone, **44, 47, 49, 53**

hydrocortisone 2.5%, **44**

hydrocortisone butyrate 0.1%, **44**

hydrocortisone butyrate/emoll, **44**

hydrocortisone cream, **53**

hydrocortisone lot 0.1%, **44**

hydrocortisone retention enema, **53**

hydrocortisone supp, **44**

hydrocortisone valerate 0.2%, **44**

hydrocortisone/lidocaine HCl, **44**

hydromet, **64**

hydromorphone ER, **29**

hydromorphone IR, **29**

hydroxychloroquine, **19**

hydroxyurea, **23**

hydroxyzine HCL syrup, **64**

hydroxyzine HCl tabs, **64**

hydroxyzine pamoate, **64**

Hyftor Gel 0.2%, **23**

hyoscyamine, **66**

hyosyne, **66**

HyperSal, **64**

Hyrimoz Auto-Injector/Prefilled Syringe, **56**

Hysingla ER, **29**

Hyzaar, **38**

I

ibandronate, **57**

Ibrance, **23**

Ibsrela, **53**

Ibudone, **29**

ibuprofen, **29, 32, 57**

ibuprofen/hydrocodone, **29**

icatibant inj, **68**

Iclusig, **23**

icosapent cap, **38**

Idacio Inj, **57**

Idelvion, **68**

Idhifa, **23**

IFE-PG 20, **66**

Ilevro Susp 0.3%, **61**

imatinib mesylate, **23**

Imbruvica, **23**

Imcivree Inj 10mg/ml, **29**

imipramine, **29**

imiquimod cream, **44**

Imiquimod Cream 3.75% Pump, **44**

Imitrex, **29**

Impavido, **19**

Impeklo Lotion 0.05%, **44**

Impoyz Cream 0.025%, **44**

Imuran, **23**

Imvexxy, **59**

Inbrija, **29**

Increlex, **49**

Incruse Ellipta, **64**

indapamide, **38**

Inderal LA, **38**

Indocin Suppository, **29**

Indocin susp, **29**

indomethacin, **57**

Indomethacin 20mg capsule, **57**

indomethacin SR, **57**

indomethacin sus 25mg/5ml, **57**

Ingrezza, **29**

Inlyta, **23**
 InnoPran XL, **38**
 Inpefa, **38**
 Inqovi tab, **23**
 Inrebic, **23**
 Inspra, **38**
 Insulin aspart inj, **49**
 Insulin aspart protamin inj flexpen, **49**
 Insulin Degludec Inj, **49**
 Insulin Glargine, **49**
 Insulin lispro 100 units/ml, **49**
 Insulin lispro inj junior, **49**
 Insulin lispro inj protamin, **49**
 Intelence, **19**
 Intermezzo, **29**
 Intrarosa, **59**
 Intuniv, **29**
 Invega ER tablet, **29**
 Inveltys Susp 1%, **61**
 Invirase, **19**
 Invokamet [XR], **49**
 Invokana, **49**
 Iopidine, **61**
 ipratropium inhalation soln, **64**
 ipratropium nasal spray, **64**
 ipratropium-albuterol, **64**
 Iqirvo, **53**
 irbesartan, **38**
 irbesartan hydrochlorothiazide, **38**
 Iressa tab, **23**
 Isentress, **19**
 isometheptene/dichloralphenazone/apap, **29**
 isoniazid, **19**
 Isopto Carpine, **61**
 Isordil Titradosse Tabs, **38**
 isosorb dinitrate-hydralazine, **38**
 isosorbide dinitrate, **38**
 isosorbide dinitrate ER, **38**
 isosorbide mononitrate, **38**
 isosorbide mononitrate ER, **38**
 isotretinoin, **44**

isradipine, **38**
 Istalol Drops, **61**
 Isturisa, **64**
 itraconazole, **19**
 ivermectin, **19**
 Iwilfin, **23**
 Ixinity, **38**
 Iyuzeh Drops 0.005%, **61**

J

Jadenu tab/granules, **68**
 Jakafi, **29**
 Jalyn, **66**
 jantoven, **38**
 Janumet, **49**
 Janumet XR, **49**
 Januvia, **49**
 Jardiance, **49**
 Jatenzo, **49**
 Javygtor Pak, **64**
 Jaypirca tab, **23**
 Jentaduetto tablet, **49**
 Jentaduetto XR, **49**
 Jesduvroq, **38**
 Jivi, **38**
 Joenja, **57**
 Jornay PM Capsule, **29**
 joyeaux, **59**
 Jublia, **44**
 Juluca, **19**
 junel FE 24 tab, **59**
 Juxtapid, **38**
 Jylamvo Soln, **23**
 Jynarque, **67**

K

K-Phos, **67**
 K-Tab, **67**
 Kadian ER, **29**
 kaitlib FE chew, **59**
 Kaletra Tabs/Soln, **19**
 Kalydeco Tabs/Pack, **19**
 Kapsargo, **38**
 Kapvay, **29**
 Katerzia Susp, **38**
 Kazano tablet, **49**
 Keflex, **19**
 Kenalog Spray, **44**
 Keppra, **30**
 Keppra XR, **30**
 Kerendia, **38**
 Kerydin, **44**
 Kesimpta Inj, **49**
 ketoconazole cream, **44**
 ketoconazole shampoo, **44**
 ketoconazole tab, **19**
 ketoprofen, **30, 57**
 Ketoprofen 25mg cap, **57**
 ketoprofen ER, **57**
 ketorolac, **30, 57, 61**
 ketorolac oph soln, **61**
 Ketorolac sol tromethamine, **57**
 Keveyis, **68**
 Kevzara, **57**
 Khedezla, **30**
 Kineret, **57**
 Kionex Sus, **68**
 Kisqali, **23**
 Kitabis Pak, **64**
 Klaron, **44**
 Klisyri Oint 1%, **44**
 Klonopin, **30**
 klor-Con, **67**
 Kloxxado Liq, **30**
 Koate-DVI, **38**
 Kogenate FS, **38**
 Kombiglyze XR, **49**

Konvomep Soln, **53**
 Korlym tablet, **49**
 Koselugo, **23**
 Kovaltry Sol, **38**
 Krazati, **23**
 Krintafel, **19**
 Kristalose Pak, **53**
 Kuvan, **64**
 Kynamro, **38**
 Kynmobi Kit Titration, **30**
 Kynmobi Mis, **30**
 Kyzatrex, **49**

L

labetalol HCl, **38**
 lacosamide, **30**
 Lactulose pak, **53**
 lactulose soln, **53**
 Lamictal, **30**
 Lamictal ODT, **30**
 Lamictal XR, **30**
 Lamisil Tabs, **19**
 lamivudine tab 100mg, 150mg, 300mg, **19**
 lamivudine/zidovudine, **19**
 lamotrigine, **30**
 lamotrigine ER, **30**
 lamotrigine ODT, **30**
 lamotrigine ODT kit, **30**
 Lampit tab, **19**
 Lanoxin, **38**
 lansoprazole cap, **53**
 lansoprazole solutab, **53**
 lanthanum chewable tab, **67**
 Lantus, **49**
 lapatinib, **23**
 Lasix, **38**
 Lastacraft, **61**
 latanoprost, **61**
 Latuda, **30**

- layolis FE chew, **59**
Lazanda, **30**
Ledipasvir-sofosbuvir tablet 90-400mg, **19**
leena tab, **59**
leflunomide, **57**
lenalidomide, **23**
Lenvima, **23**
Lescol XL, **38**
Letairis, **38**
letrozole, **23**
leucovorin calcium, **23**
Leukeran, **23**
leuprolide, **23**
levabuterol neb, **64**
Levalbuterol tartrate HFA, **64**
Levamlodipine, **38**
Levaquin, **19**
Levbid, **66**
Levemir, **49**
levetiracetam, **30**
levetiracetam ER, **30**
Levitra, **66**
levo-T tab, **49**
levobunolol, **61**
levocarnitine, **49**
levofloxacin ophth soln, **61**
levofloxacin tab, **19**
levonorgestrel-ethinyl estradiol, **59**
levonorgestrel/my way/next dose, **59**
levorphanol, **30**
Levothyroxine cap, **49**
levothyroxine tab, **49**
levoxyl, **49**
Levsin, **66**
Lexapro, **30**
Lexette Foam 0.05%, **44**
Lexiva, **19**
Lialda, **53**
Libervant Mis, **30**
Librax, **30**
Licart Dis 1.3%, **30**
lidocaine patch 5%, **44**
lidocaine solution, gel, ointment, **44**
Lidoderm, **44**
Likmez Susp, **19**
Lilly Glucagon Emergency Kit, **50**
linezolid, **19**
Linzess, **53**
lithyronine, **50**
Lipitor, **38**
Lipofen, **38**
Liqrev Susp, **39**
Liraglutide Inj, **50**
lisdexamfetamine cap/chew, **30**
lisinopril, **39**
lisinopril/HCTZ, **39**
Litfulo, **44**
lithium carbonate, **30**
lithium carbonate ER, **30**
Lithobid, **30**
Livalo, **39**
Livmarli Sol, **53**
Liventcity, **19**
Lo Loestrin FE, **59**
Locoid, **44**
Locoid Lipocream, **44**
Lodine, **30**
Lodoco, **57**
Lodosyn, **30**
Loestrin, **59**
Lokelma PAK, **67**
Lomaira, **30**
Lomotil, **53**
Lonhala Magnair Soln, **64**
Lonsurf, **23**
loperamide, **53**
Lopid, **39**
lopinavir/ritonavir, **19**
Lopressor HCT, **39**
Loprox, **44**
lorazepam concentrate, **30**
lorazepam, **30**

Lorbrena, **23**
Loreev XR, **30**
Lortab, **30**
lortab elixir, **30**
Lorzone, **57**
losartan, **39**
losartan-HCTZ, **39**
Loseasonique, **59**
Lotemax [SM], **61**
Lotensin, **39**
loteprednol susp, **61**
Lotrel, **39**
Lotrisone, **44**
Lotronex, **57**
lovastatin, **39**
Lovaza, **39**
Lovenox, **39**
loxapine, **30**
lubiprostone cap, **53**
Lucemyra, **30**
Luliconazole cream, **19**
Lumakras, **23**
Lumigan, **61**
Lumryz Pak, **30**
Lunesta, **30**
Lupkynis, **23**
lurasidone tab, **30**
Luxiq, **44**
Luzu, **44**
Lybalvi, **30**
lyllana Dis, **59**
Lymepak, **19**
Lynparza, **23**
Lyrica Cap, **30**
Lyrica CR, **30**
Lyrica soln, **30**
Lysodren, **23**
Lysteda, **59**
Lytgobi, **23**
Lyumjev Inj/Pen, **50**
Lyvispah Gra, **57**

M

m-clear wc soln, **30**
Macrochantin, **19**
Malarone, **19**
malathion lotion, **44**
maprotiline, **30**
maraviroc tab, **20**
Marinol, **53**
Matulane, **23**
Mavenclad pak, **23**
Mavyret, **20**
Maxalt, Maxalt-MLT, **30**
Maxitrol, **61**
Maxzide, **39**
Mayzent tablet, starter pak, **30**
meclizine, **53**
meclofenamate, **30, 57**
Medrol, **50**
medroxyprogesterone acetate suspension IM, **59**
medroxyprogesterone acetate tab, **59**
Medtronic Continuous Glucose Monitor Enlite, MiniMed Guardian Sensors, **50**
Medtronic Continuous Glucose Monitor Guardian Transmitter, **50**
Medtronic Continuous Glucose Monitor Receiver, **50**
mefloquine, **20**
Megace, **23**
megestrol, **23**
megestrol acetate, **23**
Mekinist, **23**
Mektovi, **23**
melodetta chew 24 FE, **59**
meloxicam cap, **57**
Meloxicam susp, **57**
meloxicam tab, **57**
melphalan, **23**
memantine, **30**

- memantine ER, **30**
Menest, **59**
Menopur, **59**
meperidine HCl, **30**
Mephyton, **67**
meprobamate, **30**
Mepron, **20**
mercaptopurine, **23**
mesalamine, **53**
mesalamine DR, **53**
mesalamine rectal susp, **53**
Mesnex, **23**
Mestinon [ER] Tab, **30**
Mestinon syrup, **30**
Metadate CD, **30**
metaproterenol, **64**
Metaxalone, **57**
metformin, **47–48, 50**
Metformin 625mg, **50**
metformin ER (generic for Glucophage XR), **50**
metformin HCL 500mg/5ml soln, **50**
Metformin HCL ER (OSM), **50**
metformin/glyburide, **50**
methadone, **30**
methadone HCL concentrate, **30**
methadone HCL sol, **30**
Methadose concentrate [SF], **30**
Methamphetamine, **30**
methazolamide, **61**
methenamine hippurate, **20**
methimazole, **50**
Methitest Tab, **50**
Methylphenidate ER (XR), **31**
methocarbamol 500mg, 750mg, **30**
methotrexate tab, **23**
methoxsalen, **45**
methsuximide, **31**
methyldopa, **39**
Methylin, **31**
methylphenidate, **31**
methylphenidate ER, **31**
methylphenidate ER (CD), **31**
methylphenidate ER (LA), **31**
methylphenidate pad, **31**
methylprednisolone, **50**
methylprednisolone therapy pak, **50**
methyltestosterone, **50**
metoclopramide, **53**
Metoclopramide odt, **53**
metolazone, **39**
Metopirone, **68**
metoprolol succinate, **39**
metoprolol tartrate, **39**
metoprolol tartrate/HCT, **39**
MetroCream, **45**
MetroGel, **45, 59**
Metrogel vaginal, **59**
MetroLotion, **45**
metronidazole, **20, 45, 59**
metronidazole cream, lotion, gel, **45**
metronidazole vaginal gel, **59**
metyrosine, **50**
Mevacor, **39**
mexiletine HCl, **39**
Miacalcin, **57**
mibelas 24 chew FE, **59**
Micardis, **39**
Micardis HCT, **39**
Miconazole-zinc ointment, **45**
microgestin 24 FE 1/20, **59**
Microzide, **39**
midodrine HCl, **68**
Midrin, **31**
Miebo Drops, **61**
mifepristone, **50**
miglitol, **50**
miglustat, **68**
Migranal, **31**
Millipred, **50**
Minastrin 24 FE, **59**
Minipress, **39**
minitran, **39**

Minivelle, **59**
 Minocin, **20**
 minocycline caps, **20**
 Minocycline ER cap 135mg, 45mg, and 90mg,
20
 minocycline ER tablet, **20**
 minocycline tablet, **20**
 Minolira, **20**
 minoxidil, **39**
 mirabegron, **66**
 Mirapex, **31**
 Mirapex ER, **31**
 Mircette, **59**
 mirtazapine, **31**
 Mirvaso, **45**
 misoprostol, **53, 56**
 Mitigare, **57**
 Mobic, **57**
 modafinil, **31**
 moderiba, **20**
 moexipril, **39**
 moexipril/HCTZ, **39**
 molindone hcl, **31**
 Molnupiravir 200mg, **20**
 mometasone cream, ointment, solution, **45**
 mometasone furoate nasal spray, **47**
 Mondoxyne NL 75mg cap, **20**
 Monoclate-P, **39**
 Mononine, **39**
 montelukast sodium, **64**
 Monurol Pak Granules, **20**
 MorphaBond ER, **31**
 morphine IR, **31**
 morphine sulfate ER, **31**
 morphine suppositories, **31**
 Motegrity tab, **53**
 Motpoly XR, **31**
 Mounjaro Inj, **50**
 Movantik, **53**
 MoviPrep Solution Reconstituted 100gm Oral,
53

Moxatag, **20**
 Moxeza, **61**
 moxifloxacin hcl, **20**
 moxifloxacin ophthalmic soln, **61**
 MS Contin, **31**
 Mulpleta, **39**
 Multaq, **39**
 multivitamin with fluoride drops, tabs, **67**
 mupirocin cream, ointment, **45**
 Muse, **66**
 Myalept, **50**
 Myambutol, **20**
 Mycapssa cap, **50**
 Mycobutin, **20**
 mycophenolate, **23**
 mycophenolic acid, **23**
 Mydayis, **31**
 Mydriacyl, **61**
 Myfembree, **59**
 Myfortic, **23**
 Myhibbin Sus, **23**
 Myleran, **23**
 Myrbetriq, **66**
 Mysoline, **31**
 Mytesi, **20**

N

nabumetone, **31, 57**
 nadolol, **39**
 nadolol-bendroflumethiazide, **39**
 naftifine cream, gel, **45**
 Naftin, **45**
 Nalfon, **31, 57**
 Nalocet, **31**
 Naloxone Injection 2mg, **31**
 naloxone spray, **31**
 naltrexone 50mg, **31**
 Namenda [XR], **31**
 Namzaric, **31**

- Naprelan, **57**
Naprosyn, **56–57**
Naprosyn susp, **57**
naproxen sodium, **57**
naproxen sodium DR, **57**
naproxen sodium ER, **57**
naproxen sodium ER 750mg, **57**
naproxen sodium susp, **57**
naratriptan, **31**
Narcan 4mg/actuation spray, **31**
Nardil, **31**
Nascobal, **67**
Nasonex, **47**
Natazia, **59**
nateglinide, **50**
Natesto, **50**
Natpara, **50**
Natroba, **45**
Nature-Throid, **50**
Nayzilam, **31**
nebivolol, **39**
Nebupent INH, **20**
Nebusal Nebulization Solution, **67**
nefazodone, **31**
neomycin/polymyxin B/dexamethasone, **61**
neomycin/polymyxin/hydrocortisone, **47**
Neoral, **23–24**
Neosporin soln, **61**
Nerlynx, **23**
Nesina tablet, **50**
Nestabs One, **67**
Neupro Patch, **31**
Neurontin, **31**
Neurontin soln, **31**
Nevanac Susp 0.1%, **61**
nevirapine, **20**
nevirapine ER, **20**
Nexavar, **23**
Nexiclon XR, **39**
Nexium capsule, **53**
Nexium packets, **53**
Nexletol, **39**
Nexlizet, **39**
Nextstellis, **59**
Ngenla Inj, **50**
niacin ER, **39**
Niaspan ER, **39**
nicardipine, **39**
nifedical XL, **39**
nifedipine, **39**
nifedipine ER, **39**
Nilandron, **23**
nilutamide, **23**
nimodipine, **39**
ninjacof-XG liquid, **31**
Ninlaro, **23**
nisoldipine ER, **39**
nitazoxanide, **20**
nitisinone, **68**
Nitro-Bid, **39**
Nitro-Dur, **39**
nitro-time cap, **39**
Nitro-Time CR Cap, **39**
nitrofurantoin macrocrystals, **20**
Nitrofurantoin susp, **20**
nitroglycerin ER, **39**
nitroglycerin oint 0.4%, **39**
nitroglycerin patches, **39**
nitroglycerin SL, **39**
nitroglycerin spray, **39**
Nitrolingual Spray, **39**
Nitromist, **39**
Nitrostat SL, **39**
Nityr, **68**
nizatidine cap, **53**
nizatidine solution, **53**
Nizoral shampoo, **45**
Nocdurna SL, **39**
Noctiva Emulsion, **50**
Non Preferred Diabetic Meters, **50**
Norditropin, **50**
nore/eth/fer chew 0.4mg-35mcg, **59**

norethin-ethynil-fer cap 1/20, **59**
 norethindrone, **59**
 norethindrone acetate, **59**
 norethindrone-ethinyl estradiol, **59**
 norethindrone-mestranol, **59**
 Norgesic Forte Tab, **57**
 Norgesic Tab, **57**
 norgestimate-ethinyl estradiol, **59**
 norgestrel-ethinyl estradiol, **59**
 Noritate, **45**
 Norliqva Soln, **39**
 Norpace, **39**
 Norpramin, **31**
 Northera, **39**
 nortriptyline, **31**
 nortriptyline soln, **31**
 Norvasc, **39**
 Norvir powder, **20**
 Norvir tablet, **20**
 Nourianz, **31**
 Novarel 5000 units, **68**
 Novarel 10000 units, **68**
 Novoeight, **39**
 Novolin, **50**
 Novolin R, **50**
 Novolin Relion, **50**
 Novolog, **50**
 Novolog Relion, **50**
 NovoSeven RT, **39**
 Noxafil, **20**
 NP thyroid, **50**
 Nubeqa, **23**
 Nucala Soln, **64**
 Nucynta, **31**
 Nucynta ER, **31**
 Nulev, **66**
 Nulibry Inj, **68**
 Nulytely, **53**
 Nuplazid, **31**
 Nurtec chw 75mg ODT, **31**
 Nutropin AQ, **50**

Nuvaring, **59**
 Nuvessa gel, **20**
 Nuvigil, **31**
 Nuwiq, **40**
 Nuzyra, **20**
 Nymalize Sol, **40**
 nystatin suspension, **45**
 nystatin/triamcinolone cream, ointment, **45**

O

OB Complete, **59**
 Obizur, **40**
 Obredon, **64**
 Ocaliva, **68**
 Ocufer, **61**
 Ocuflor, **61**
 Odactra SL, **64**
 Odomzo, **23**
 Ofev, **64**
 ofloxacin, **47, 61**
 ofloxacin otic, **47**
 Ogsiveo, **23**
 Ojemda Tab/Sus, **23**
 Ojjaara, **23**
 olanzapine, **31**
 olanzapine ODT, **31**
 olanzapine/fluoxetine hcl, **31**
 olmesartan medoxomil, **40**
 olmesartan/amlodipine/hctz, **40**
 olmesartan/hctz, **40**
 olopatadine, **47, 61**
 olopatadine hcl, **61**
 Olpruva Pak, **54**
 Olumiant, **57**
 Olux [E], **45**
 Omeclamox-Pak, **54**
 omega-3 acid ethyl esters, **40**
 omeprazole, **54**
 Omnaris, **47**

- Omnipod 5 Pack, **50**
Omnipod Dash 5 Pack, **50**
Omnipod Dash System, **50**
Omnipod Go Kit, **50**
Omnipod Starter Kit, **50**
Omnipred, **61**
Omnitrope, **50**
OmvoH Inj, **57**
ondansetron HCl, **54**
One Touch Glucometers, **50**
One Touch Test Strips, **51**
Onexton, **45**
Onfi, **31**
Onfi Susp, **31**
Ongentys, **31**
Onglyza, **51**
Onmel, **20**
Onureg, **23**
Onzetra Xsail, **31**
Opana, **31**
Opana ER, **31**
Opfolda, **68**
Opsumit, **40**
Opsynvi, **40**
Opvee Spray, **31**
Opzelura Cream, **45**
Oracea, **20**
Oralair, **64**
Orap, **31**
Orapred ODT, **51**
Orencia, **57**
Orenitram, **40**
Orfadin, **68**
Orgovyx, **23**
OriaHnn cap, **59**
Orilissa, **51**
Orkambi tablet/packet, **20**
Orladeyo, **68**
Orlistat Cap, **54**
Ormalvi Tab, **40**
orphenadrine ER, **57**
Orphenadrine-asa-caffeine, **57**
Orphengesic Forte Tab, **57**
Orserdu tab, **24**
Ortho Cyclen, **59**
Ortho Micronor, **59**
Ortho Novum, **59**
Ortho Tri-Cyclen, **59**
Ortho Tri-Cyclen Lo, **59**
Ortikos ER Cap, **24**
oscimin, **66**
oseltamivir caps/soln, **20**
Oseni, **51**
Osmolex ER, **31**
Osmoprep tab, **54**
Otezla, **57**
Otrexup, **57**
Ovide, **45**
Ovidrel, **59**
Oxandrin, **51**
oxandrolone, **51**
oxaprozin, **31, 57**
Oxaprozin 300mg cap, **31**
oxaprozin 600mg tab, **31**
Oxaydo, **31**
oxazepam, **32**
Oxbryta, **68**
oxcarbazepine susp, **32**
oxcarbazepine tab, **32**
Oxervate soln 200mcg/ml, **62**
Oxiconazole nitrate, **45**
Oxistat, **45**
Oxsoralen Ultra, **45**
Oxtellar XR, **32**
oxybutynin sol, **66**
oxybutynin syrup, **66**
oxybutynin tab [ER], **66**
Oxycodone ER tablet, **32**
oxycodone IR, **32**
Oxycodone/acetaminophen, **32**
oxycodone/acetaminophen, **32**

Oxycodone/APAP 2.5-300mg, 5-300mg,
 10-300mg tab, **32**
 oxycodone/aspirin, **32**
 oxycodone/ibuprofen, **32**
 OxyContin, **32**
 oxymorphone ER, **32**
 oxymorphone IR, **32**
 Oxytrol Patch, **66**
 Ozempic, **51**
 Ozobax Soln, **57**

P

pacerone, **40**
 Palforzia cap/powder, **64**
 paliperidone er tablet, **32**
 Palynziq, **68**
 Pamelor, **32**
 Pancreaze, **54**
 pancrelipase EC/SA, **54**
 Pandel, **45**
 Panretin Gel, **45**
 pantoprazole, **54**
 pantoprazole pak, **54**
 paricalcitol, **51**
 Parlodel, **32**
 Parnate, **32**
 paroxetine, **32**
 paroxetine ER, **32**
 Patanase, **47**
 Patanol, **62**
 Paxil CR, **32**
 Paxil Tab/Susp, **32**
 Paxlovid Tab, **20**
 pazopanib, **24**
 Pediapred Sol, **51**
 PEG 3350 & electrolytes, **54**
 peg-kcl-nacl-nasulf-na asc-c soln reconstituted,
54
 Peg-Prep, **54**

Pegasys, **20**
 PegIntron, **20**
 Pemazyre, **24**
 penciclovir cream, **45**
 penicillamine capsule, **68**
 penicillamine tablet, **68**
 penicillin v potassium solution, **20**
 penicillin v potassium tablet, **20**
 Penlac, **45**
 Pennsaid, **57**
 pentamidine INH, **20**
 Pentasa 250mg, **54**
 Pentasa 500mg, **54**
 pentazocine-naloxone, **32**
 pentoxifylline ER, **40**
 Pepcid tabs, suspension, **54**
 Percocet, **32**
 Perforomist Neb, **64**
 perindopril, **40**
 permethrin, **45**
 perphenazine, **32**
 Persantine, **40**
 Pertzye, **54**
 Pexeva, **32**
 Pheburane Mis 483/gm, **54**
 phenazopyridine, **66**
 phendimetrazine tartrate, **32**
 phenelzine, **32**
 phenobarbital, **32**
 phenoxybenzamine hcl, **40**
 phentermine hcl, **32**
 Phenytek, **32**
 phenytoin, **32**
 PhosLo, **68**
 Phoslyra, **68**
 phospho, **68**
 Phospho-trin tab K500, **67**
 Phospholine Iodide, **62**
 phytonadione tab, **67**
 Pifeltro, **20**
 pilocarpine, **47, 62**

- pilocarpine HCl, **47**
pimecrolimus cre 1%, **45**
pimozide, **32**
pindolol ER, **40**
pioglitazone, **47, 51**
pioglitazone/glimepiride, **51**
Piqray, **24**
pirfenidone, **64**
piroxicam, **32, 57**
pitavastatin, **40**
Plan B One-Step, **60**
Plaquenil, **20**
Plavix, **40**
Plegridy, **32**
Plenvu Soln, **54**
podofilox soln/gel, **45**
Pogo Automatic Mis Monitor, **51**
Pogo Automatic Test Cartridge, **51**
Pokonza Pow, **68**
polymyxin B/neo/bacitracin, **62**
polymyxin B/neo/gramicidin, **62**
polymyxin B/trimethoprim soln, **62**
Polytrim, **62**
Pomalyst, **24**
Ponvory, **32**
posaconazole, **20**
Potaba, **68**
potassium bicarbonate/potassium citrate
 effervescent, **67**
potassium chloride, **67**
potassium citrate ER, **66**
potassium iodide soln, **20**
Pradaxa, **40**
Pradaxa Pak, **40**
Praluent, **40**
pramipexole, **32**
pramipexole ER, **32**
Pramosone cream/lotion, **45**
Prandin, **51**
prasugrel, **40**
Pravachol, **40**
pravastatin, **40**
praziquantel, **20**
prazosin, **40**
Precision Glucometer, **51**
Precision XTRA Test Strips, **51**
Precose, **51**
Pred-Forte, **62**
prednicarbate ointment, **45**
prednisolone, **51, 62**
prednisolone acetate, **62**
prednisolone sodium phosphate, **62**
prednisolone/sodium sulfacetamide, **62**
prednisone, **24**
prednisone therapy pack/solution/concentrate,
 24
pregabalin cap, **32**
pregabalin ER tab, **32**
pregabalin soln, **32**
pregnyl, **68**
Prelone, **51**
Premarin, **60**
Premarin vaginal cream, **60**
Premphase, **60**
Prempro, **60**
Pretomanid, **20**
Prevacid caps, **54**
Prevacid SoluTab, **54**
prevalite, **40**
Prevymis, **20**
Prezista, **20**
prilocaine/lidocaine, **45**
Prilosec packets, **54**
primidone, **32**
Primlev, **32**
Prinivil, **40**
Pristiq, **32**
ProAir Digihaler, **64**
ProAir HFA, **64**
ProAir RespiClick, **64**
probenecid, **55, 57**
Procardia, **40**

Procardia XL, **40**
Procentra 1mg/ml, **32**
prochlorperazine suppository, **54**
prochlorperazine tabs, **54**
Proctocort Supp 30mg, **45**
Proctofoam HC, **45**
Procysbi, **51**
Profilnine, **40**
progesterone, micronized, **60**
Proglycem Susp, **51**
Prograf cap/packets, **24**
Prolate Sol 10/300mg, **32**
Prolate tab, **32**
Prolensa sol 0.07%, **62**
Promacta, **40**
promethazine, **65**
promethazine/codeine, **65**
promethazine/dextromethorphan, **65**
promethazine/phenylephrine, **65**
promethegan supp, **32**
Prometrium, **60**
propafenone, **40**
propafenone ER, **40**
proparacaine, **62**
propranolol, **40**
propranolol ER, **40**
propranolol/HCTZ, **40**
propylthiouracil, **51**
Proscar, **66**
Protonix, **54**
Protonix packets, **54**
Protopic, **24**
Proventil HFA, **65**
Provera, **58, 60**
Provigil, **32**
Prozac, **32**
Prudoxin cream 5%, **45**
Pulmicort Flexhaler, **65**
Pulmicort Respules, **65**
Pulmosal Nebulization Solution, **67**
Pulmozyme, **65**

Purixan, **24**
Pylera, **54**
Pyridium, **66**
pyridostigmine, **32**
pyridostigmine soln, **32**
pyrimethamin, **20**
Pyrukynd, **68**

Q

Qbrexelis, **40**
Qbrexza Pad 2.4%, **45**
Qdolo Soln 5mg/ml, **32**
Qelbree, **32**
Qinlock tab, **24**
Qmiiz ODT, **32**
Qnasl, **47**
Qsymia ER, **32**
Qtern, **51**
Quaaluan, **20**
Quartette, **60**
quazepam, **32**
Qudexy XR, **32**
Questran Light, **40**
Questran Packet/Powder, **40**
quetiapine fumarate [ER], **32**
Qufloxa, **67**
Quillichew ER, **33**
Quillivant XR, **33**
quinapril, **40**
quinapril/HCTZ, **40**
quinine sulfate, **20**
Qulipta, **33**
Quviviq, **33**
Qvar, **65**

R

- rabeprazole DR tab 20mg, **54**
Rabeprazole Sprinkle Cap 10mg, **54**
Radicava ORS Susp, **33**
Ragwitek, **65**
raloxifene, **57, 60**
raloxifene hcl, **57**
ramelteon, **33**
ramipril, **40**
Ranexa, **40**
ranitidine 300mg, **54**
ranolazine tab ER, **40**
Rapaflo, **66**
Rapamune 1mg/ml Sol, **24**
Rapamune tab, **24**
rasagiline, **33**
Rasuvo, **57**
Ravicti, **54**
Rayaldee, **67**
Rayos, **51**
Razadyne, **33**
Razadyne ER, **33**
Rebetol, **65**
Rebif Rebidose, **33**
Rebinyn Soln, **40**
Recombinate, **40**
Recorlev 150mg Tab, **54**
Rectiv Oint, **40**
RediTrex Inj, **24**
Regimex, **33**
Reglan, **54**
Regranex gel, **51**
Relafen, **33**
Relafen DS, **33**
Relenza, **20**
Relexxii, **33**
Relistor, **54**
Relpax, **33**
Reltone, **54**
Relyvrio Pak, **33**
Remeron, **33**
Remeron SolTab, **33**
Renagel, **68**
Renvela, **68**
repaglinide, **51**
Repatha, **40**
Requip, **33**
Requip XL, **33**
Rescula, **62**
Restasis Emulsion 0.05% Ophthalmic, **62**
Restasis Multidose, **62**
Restoril, **33**
Retevmo cap, **24**
Retin-A, **45**
Retin-A Micro, **45**
Retrovir, **20**
Revatio, **40**
Revlimid, **24**
Rextovy Spray, **33**
Rexulti, **33**
Reyataz, **20**
Reyvow, **33**
Rezdiffra Tab, **51**
Rezira, **65**
Rezlidhia, **24**
Rezurock, **20**
Rezvoglar Inj, **51**
Rhofade 1% cream, **45**
Rhopressa Soln 0.02%, **62**
Riastap, **40**
ribasphere ribapak 200mg & 400mg/400mg &
600mg, **20**
ribavirin, **47**
Ridaura, **68**
rifabutin, **20**
Rifadin, **20**
rifampin, **20**
Rilutek, **33**
riluzole, **33**
rimantadine, **21**
Rinvoq, **68**
Riomet [ER] solution/suspension 500mg/5ml,
51

risedronate, **57**
risedronate DR, **57**
Risperdal, **33**
risperidone, **33**
Ritalin LA, **33**
Ritalin Tab, **33**
ritonavir, **19, 21**
rivastigmine, **33**
Rivfloza Inj, **21**
Rixubis, **40**
rizatriptan benzoate, **33**
Robaxin, **33, 57**
Rocaltrol capsules, **51**
Rocklatan Soln 0.02-0.005%, **62**
roflumilast, **65**
ropinirole, **33**
ropinirole ER, **33**
rosuvastatin, **37, 40**
Roszet, **40**
Roxicodone, **33**
Roxybond, **33**
Rozerem, **33**
Rozlytrek, **24**
Rubraca, **24**
Ruconest, **68**
rufinamide susp 40mg/ml, **33**
rufinamide tab, **33**
Rukobia, **21**
Ruzurgi, **68**
Ryaltris Spray 665-25mcg/act, **47**
Rybelsus, **51**
Ryclora, **65**
Rydapt, **24**
Rytary, **33**
Rythmol, **40**
Rythmol SR, **40**
Ryvent, **65**

S

Sabril, **33**
Safyral, **60**
Saizen, **51**
sajazir inj, **68**
Salagen, **47**
salsalate tab, **57**
Samsca, **40**
Sancuso Patch, **54**
Sandimmune, Neoral, **24**
Saphris, **33**
sapropterin pow/tab, **65**
saxagliptin, **51**
saxagliptin-metformin, **51**
Saxenda, **33**
Scemblix, **24**
scopolamine patch, **54**
Seasonique, **60**
Secuado Patch, **33**
Seebri, **65**
Seglentis 56-44mg Tab, **33**
Segluromet, **51**
selegiline HCl, **33**
selenium sulfide shampoo/lotion, **45**
Selzentry, **21**
Semglee Inj 100U/ml, **51**
Semprex-D, **65**
Sensipar, **51**
Serevent Diskus, **65**
Sernivo, **45**
Seroquel, **33**
Seroquel XR, **33**
Serostim, **51**
sertraline, **33**
Sertraline Caps 150mg, 200mg, **33**
sevelamer carbonate, **68**
Sevenfact Inj, **40**
Seysara, **21**
SFRowasa enema, **54**

- Signifor, **51**
Siklos, **24**
sildenafil citrate 20mg tab, 10mg/ml susp, **40**
sildenafil citrate 25mg, 50mg, 100mg, **40**
Silenor, **33**
Siliq, **45**
silodosin, **57**
Silvadene, **45**
silver sulfadiazine, **45**
Simbrinza Susp 1-0.2%, **62**
Simlandi Kit/Inj, **57**
Simponi, **57**
simvastatin, **38, 40**
Simvastatin susp, **40**
Sinemet, **33**
Sinemet CR, **33**
Singulair, **65**
sirolimus tab/soln, **24**
Sirturo, **21**
Sitagliptin, **51**
Sitagliptin-Metformin, **51**
Sitavig, **21**
Sivextro, **21**
Skelaxin, **57**
Sklice Lot 0.5%, **21**
Skyclarys cap, **21**
Skyrizi Inj, **45**
Skytrofa, **51**
Slynd, **60**
Soaanz, **40**
sodium chloride inhalation, **65**
sodium fluoride chew tab, **67**
Sodium Oxybate Sol (Hikma), **33**
sodium phenylbutyrate tab, **67**
sodium sulfacetamide suspension, **45**
sodium/potassium sol magnesium, **54**
Sofosbuvir-velpatasvir tablet 400-100mg, **21**
Sogroya Inj, **51**
Sohonos, **21**
Solaraze, **45**
solifenacin, **66**
Soliqua, **51**
Solodyn, **21**
Solosec GRA, **21**
Soma, **57**
Somavert, **51**
Sonata, **33**
Soolantra, **45**
sorafenib, **24**
Soriatane, **45**
Sorilux Foam, **45**
sotalol HCl, **40**
Sotyktu, **57**
Sotylize soln, **40**
Sovaldi, **21**
Sovuna Tab, **21**
Spevigo Inj, **45**
spinosad, **45**
Spiriva, **65**
spironolactone, **40–41**
spironolactone/HCTZ, **41**
Sporanox, **21**
Spritam Oral Disintegrating Tab, **33**
Sprix Nasal Spray, **33**
Sprycel, **24**
SPS Suspension 15GM/60ml, **67**
SSD cream, **45**
SSKI Solution, **21**
Stalevo, **33**
Starlix, **51**
stavudine, **21**
Staxyn, **66**
Steglatro, **51**
Steglujan, **51**
Stelara, **57**
Stendra, **66**
Stimate, **41**
Stiolto Respimat, **65**
Stivarga, **24**
Strattera, **33**
Strensiq, **68**
Striant buccal system, **51**

Stribild, **21**
Striverdi Respimat Aer Solution, **65**
Stromectol, **21**
Suboxone Sublingual Film, **33**
Subsys, **33**
Sucraid Solution 8500 unit/ml, **68**
sucralfate tabs, **54**
Suflave Sol, **54**
Sular, **41**
Sulconazole cream/solution, **45**
sulfacetamide, **45, 62**
sulfamethoxazole/tmp, **21**
Sulfamylon, **46**
sulfasalazine, **54**
sulindac, **33, 57**
sumatriptan, **33**
sumatriptan/naproxen, **33**
sunitinib, **24**
Sunlenca, **21**
Sunosi, **33**
Suprax Susp 100mg/5ml, 200mg/5ml, **21**
Suprep Bowel Prep Kit, **54**
Sustiva, **21**
Sutab, **54**
Sutent, **24**
Sylatron, **34**
Symax, **66**
Symbicort, **65**
Symbyax, **34**
Symdeko, **65**
Symfi, **21**
Symfi-Lo, **21**
Symjepi Inj, **65**
Symlin, **51**
Sympazan Film, **34**
Symproic, **54**
Symtuza, **21**
Synalar, **46**
Synarel, **60**
Syndros, **54**
Synjardy, **51**

Synjardy XR, **51**
Synthroid, **51**
Syprine, **68**

T

Tabloid, **24**
Tabrecta tab, **24**
Taclonex, **46**
tacrolimus, **24**
tadalafil (generic Adcirca), **41**
tadalafil (generic Cialis), **41**
Tadliq Susp, **41**
Tafinlar, **24**
tafluprost soln, **62**
Tagrisso, **24**
Takhzyro Inj, **68**
Talicia, **21**
Taltz Autoinjector, **46**
Talzenna, **24**
Tamiflu, **21**
tamoxifen 10mg, **24**
tamsulosin, **66**
Tanzeum, **51**
Tapazole, **51**
Tarceva, **24**
Targadox, **21**
Targretin cap, **24**
Targretin gel, **46**
tarina 24 FE tab, **60**
Tarka, **41**
Tarpeyo, **54**
Tascenso ODT, **34**
Tasigna, **24**
tasimelteon, **34**
Tasmar, **34**
tavaborole soln 5%, **46**
Tavalisse, **68**
Tavneos, **68**
Taytulla, **60**

- Tazarotene AER 0.1%, **46**
tazarotene gel, **46**
Tazorac cream/gel, **46**
taztia XT, **41**
Tazverik 200mg, **24**
Tecfidera, **34**
Technivie, **21**
Tegretol [XR], **34**
Tegretol susp, **34**
Tegsedi, **68**
Tekturna/Tekturna HCT, **41**
telmisartan, **41**
telmisartan-amlodipine, **41**
telmisartan/hydrochlorothiazide, **41**
temazepam, **34**
Temixys, **21**
Temodar, **24**
Temovate, **46**
temozolomide, **24**
tenofovir, **21**
Tenoretic, **41**
Tenormin, **41**
Tepmetko, **24**
terazosin, **66**
terbinafine tabs, **21**
terbutaline sulfate tabs, **65**
terconazole cream, **60**
teriflunomid, **34**
Teriparatide 620mcg/2.48ml inj, **51**
Tessalon Perles, **65**
Testim Gel, **51**
testosterone cypionate solution 100mg/ml,
200mg/ml intramuscular, **51**
Testosterone Cypionate Solution 200mg/ml
Injection, **52**
testosterone enanthate inj 200mg/ml, **52**
testosterone gel 1%, 1.62%, **52**
testosterone gel 10mg/act (2%), **52**
testosterone solution 30mg/act, **52**
tetrabenazine, **34**
Tetracycline tab, **21**
Texacort soln, **46**
Tezspire Inj, **65**
Thalitone, **41**
Thalomid, **24**
Theo-24, **65**
theochron, **65**
theophylline extended release, **65**
theophylline soln, **65**
thioguanine, **24**
Thiola [EC], **65**
thioridazine, **34**
thiothixene, **34**
Thyquidity Soln, **52**
tiadylt ER, **41**
tiagabine hcl, **34**
Tiazac, **41**
Tibsovo, **24**
ticlopidine HCl, **41**
Tigan, **54**
Tiglutik Susp, **34**
Tikosyn, **41**
tilia FE tab, **60**
timolol maleate tab, **41**
timolol ophth, **62**
Timoptic, **62**
Timoptic XE, **62**
Tindamax, **21**
tinidazole, **21**
tiopronin, **65**
Tiotropium bromide cap 18mcg, **65**
Tirosint, **52**
Tivicay PD, **21**
Tivorbex, **34**
tizanidine, **57**
Tlando, **52**
Tobi Neb Solution, **21**
Tobi Podhaler Cap, **21**
Tobradex, **62**
tobramycin ophthalmic, **62**
tobramycin-dexamethasone, **62**
Tobrex, **62**

- Tofranil, **34**
tolbutamide, **52**
tolcapone, **34**
tolmetin, **34, 58**
tolmetin sodium, **34**
Tolsura, **21**
tolterodine tartrate, **66**
tolterodine tartrate LA, **66**
tolvaptan 15mg, 30mg tab, **41**
Topamax, **34**
Topamax Sprinkle Capsules, **34**
Topicort, **46**
topiramate, **34**
topiramate ER cap, **34**
topiramate sprinkle cap, **34**
Toprol XL, **41**
toremifene tab, **24**
torsemide, **41**
Tosymra Nasal Solution, **34**
Toujeo Solostar, **52**
Toviaz, **58**
Tracleer, **41, 65**
Tradjenta tablet, **52**
tramadol, **34**
tramadol ER (biphasic) tablet, **34**
Tramadol ER cap, **34**
tramadol ER tablet, **34**
Tramadol soln 5mg/ml, **34**
tramadol/acetaminophen, **34**
trandolapril, **41**
trandolapril/verapamil ER, **41**
Transderm-Scop patch, **54**
Tranxene T, **34**
tranycypromine sulfate, **34**
Travatan Z, **62**
travoprost, **62**
trazodone, **34**
Trelegy Ellipta, **65**
Tremfya, **46**
Tresiba, **52**
tretinoin caps, **24**
tretinoin gel, cream, **46**
Tretinoin microspheres gel, **46**
Tretten, **41**
Trexall tab, **24**
Treximet, **34**
Trezix, **34**
tri-legest FE, **60**
Tri-norinyl, **60**
Tri-Vi-Flor, Poly-Vi-Flor with and without iron, **67**
triamcinolone acetone, **46**
Triamcinolone oint 0.05%, **46**
triamterene cap, **41**
triamterene/HCTZ, **41**
Trianex, **46**
triazolam, **34**
Tribenzor, **41**
Tricor, **41**
Tridacaine/Tridacaine II Pad 5%, **46**
triderm cream, **46**
trientine, **68**
trifluoperazine, **34**
trifluridine, **62**
trihexyphenidyl, **34**
Trijardy XR, **52**
Trikafta, **21**
Trikafta Pak, **21**
Trileptal Susp, **34**
Trileptal Tab, **34**
Trilipix, **41**
trimethobenzamide, **54**
trimethoprim sulfate/polymyxin B, **62**
trimethoprim tab, **62**
trimipramine, **34**
Trintellix, **34**
Tritocin oint 0.05%, **46**
Triumeq, **21**
Trizivir, **21**
Trokendi XR, **34**
tropicamide, **62**
trospium chloride, **66**

Trudhesa AER, **34**
 Trulance, **54**
 Trulicity, **52**
 Truqap, **24**
 Truseltiq, **24**
 Trusopt, **62**
 Truvada, **21**
 trymine CG liquid, **34**
 Tudorza Pressair, **65**
 Tukysa, **24**
 Turalio, **24**
 Tussicap, **65**
 Tuxarin ER tabs, **65**
 Tuzistra XR, **65**
 Twirla Dis, **60**
 Twyneo 0.1-3% Cream, **46**
 Twynsta, **41**
 Tyblume, **60**
 tydemi tab, **60**
 Tyenne, **46**
 Tykerb, **24**
 Tylenol w/Codeine, **34**
 Tymlos, **52**
 Tyrvaya Sol, **62**
 Tyvaso, **41**

U

Ubrelvy, **34**
 Uceris, **52**
 Ukoniq, **24**
 Uloric, **58**
 Ultracet, **34**
 Ultram, **34**
 Ultravate, **46**
 unithroid, **52**
 Upneeq Soln, **62**
 Upravi, **41**
 Urecholine, **66**
 Urocit-K, **66**

Uroxatral, **66**
 Urso 250 Tab, **54**
 Urso Forte Tab, **54**
 Ursodiol Cap, **54**
 ursodiol tab, **54**
 Utibron Neohaler, **65**

V

V-GO, **68**
 Vagifem, **60**
 valacyclovir tab, **21**
 Valchlor, **24**
 Valcyte Soln, **21**
 Valcyte Tab, **21**
 valganciclovir soln, **21**
 valganciclovir tab, **21**
 Valium, **34**
 valproic acid, **34**
 valsartan, **36, 41**
 Valsartan Soln, **41**
 valsartan/hydrochlorothiazide, **41**
 Valtoco, **34**
 Valtrex, **21**
 Vanatol S/LQ, **34**
 vancomycin, **21**
 vancomycin soln, **21**
 Vandazole, **60**
 Vanflyta, **24**
 vardenafil, **66**
 vardenafil ODT, **66**
 varenicline, **25, 34**
 varenicline pak, **34**
 Varubi, **54**
 Vascepa, **41**
 Vaseretic, **41**
 Vasotec, **41**
 VCF Vaginal Gel 4%, **60**
 vecamyl, **41**
 Vectical, **46**

Velphoro, **68**
 Velsipity, **58**
 Veltin, **46**
 Vemlidy, **21**
 Venclexta, **24**
 venlafaxine, **34**
 venlafaxine ER, **34**
 Venlafaxine Tab 112.5mg, **34**
 Ventavis, **41**
 Ventolin HFA, **65**
 Veozah, **34**
 verapamil HCl, **41**
 verapamil HCl ER, **41**
 Verdeso, **46**
 Veregen Oint, **46**
 Verelan ER, PM, **41**
 Veripred soln 20mg/5ml, **52**
 Verkazia Emu 0.1%, **62**
 Verquvo, **41**
 Verzenio, **24**
 Vesicare, **66**
 Vevye Drop 0.1%, **62**
 Vfend, **21**
 Viagra, **66**
 Viberzi, **54**
 Vibramycin, **21**
 Victoza, **52**
 Videx EC, **21**
 Viekira Pak, **21**
 Viekira XR, **21**
 vigabatrin, **34**
 vigadrone, **34**
 Vigamox, **62**
 Viibryd, **58**
 Vijoice, **41**
 vilazodone, **58**
 Vimpat tab, soln, **34**
 Viokace, **54**
 Viramune, **21**
 Viramune XR, **21**
 Virazole, **47**

Viread, **21**
 Viroptic, **62**
 Virtussin AC w/ALC liquid, **35**
 Vistaril, **65**
 Vitrakvi, **24**
 Vituz, **65**
 Vivelle Dot, **60**
 Vivjoa, **21**
 Vivlodex, **35**
 Vizimpro, **24**
 Vocabria, **21**
 Vogelxo, **52**
 Voltaren Gel, **58**
 Vonjo, **24**
 Vonvendi, **41**
 Voquezna Pak, **55**
 Voquezna Tabs, **55**
 voriconazole, **22**
 Vosevi, **22**
 VoSpire ER, **65**
 Votrient, **24**
 Vowst, **68**
 Voxzogo, **41**
 Voydeya, **68**
 Vraylar, **35**
 Vtama Cream, **46**
 Vuity, **47**
 Vumerity, **68**
 Vusion, **46**
 Vyleesi, **60**
 Vyndaqel, Vyndamax, **41**
 Vytorin, **41**
 Vyvanse, **35**
 Vyzulta Soln 0.024% OP, **62**

W

Wainua Inj, **35**
 Wakix, **35**
 warfarin, **41**

Wegovy Inj, **52**
 Welchol, **41**
 Welireg, **24**
 Wellbutrin SR, **35**
 Wellbutrin XL, **35**
 Westhroid, **52**
 Wilate, **41**
 Winlevi Cream 1%, **46**
 Winrevair Inj, **65**
 wixela inhub aer, **65**
 WP Thyroid, **52**
 wymzya Fe tablet chewable, **60**
 Wynzora Cream, **46**

X

Xaciatto Gel, **46**
 Xadago, **35**
 Xalatan, **62**
 Xalkori, **24**
 Xanax, **35**
 Xanax XR, **35**
 Xarelto, **41**
 Xatmep, **24**
 Xcopri pak/tab, **35**
 Xdemvy Drops 0.25%, **62**
 Xeljanz [XR], **58**
 Xeloda, **24**
 Xelpros Emulsion 0.005%, **62**
 Xelstrym Pad, **35**
 Xenazine, **35**
 Xenical, **55**
 Xenleta, **22**
 Xepi Cream 1%, **22**
 Xerese Cream, **46**
 Xermelo, **55**
 Xhance, **47, 65**
 Xifaxan 200mg, **22**
 Xifaxan 550mg, **22**
 Xigduo XR, **52**

Xiidra, **62**
 Ximino ER, **22**
 Xodol, Norco, **35**
 Xofluza Tab, **22**
 Xofluza therapy pack, **22**
 Xolair Inj, **65**
 Xolegel, **46**
 Xolremdi, **41**
 Xopenex HFA, **65**
 Xopenex Nebulization Soln, **65**
 Xospata, **24**
 Xphozah, **68**
 Xpovio Pak, **24**
 Xtampza ER, **35**
 Xtandi, **25**
 xulane, **60**
 Xultophy, **52**
 Xuriden, **68**
 Xyntha, **41**
 Xyosted Soln, **52**
 Xyrem, **35**
 Xywav Soln, **35**

Y

yargesa, **68**
 Yasmin, **60**
 YAZ, **60**
 Yonsa, **25**
 Yuflyma 2pen Kit 40/0.4ml, **58**
 Yuflyma 2Syr Kit 40/0.4ml, **58**
 Yuflyma Kit 20/0.2ml, **58**
 Yupelri Soln, **65**
 Yusimry Soln, **58**
 yuvafem, **60**

Z

- Z-Tuss AC, **65**
Zafemy DIS, **60**
zafirlukast, **65**
zaleplon, **35**
Zanaflex, **58**
Zantac, **55**
Zarontin, **35**
Zavesca, **68**
Zavzpret Nasal Soln, **35**
Zcort 7-day tab, **52**
Zebutal Cap 50-325-40mg, **35**
Zegalogue Inj, **52**
Zegerid packets, **55**
Zejula, **25**
Zelboraf, **25**
Zelnorm, **55**
Zembrace Symtouch, **35**
Zemplar, **52**
Zenpep, **55**
Zenzedi, **35**
Zepatier, **22**
Zepbound Inj, **52**
Zeposia, **58**
Zerit, **22**
Zerviate Drops 0.24%, **62**
Zestoretic, **41**
Zestril, **41**
Zetia, **41**
Zetonna, **47**
Ziac, **41**
Ziagen, **22**
Ziana, **46**
zidovudine, **17, 19, 22**
Zilbrysq Inj, **68**
zileuton ER 600mg, **65**
Zilxi Aer, **46**
Zimhi Soln, **35**
Zioptan, **62**
ziprasidone, **35**
Zipsor, **58**
Zithromax, **22**
Zituvio, **52**
Zmax, **22**
Zocor, **41**
Zofran, **55**
Zohydro ER, **35**
Zokinvy, **68**
Zolinza, **25**
zolmitriptan, **35**
zolmitriptan spray, **35**
Zoloft, **35**
zolpidem tartrate, **35**
Zolpidem Tartrate Cap, **35**
zolpidem tartrate ER, **35**
zolpidem tartrate SL, **35**
Zomacton, **52**
Zomig, **35**
Zonalon cream 5%, **46**
Zonegran, **35**
Zonisade Susp, **35**
zonisamide, **35**
Zorbtive, **55**
Zortress, **22, 25**
Zorvolex, **35**
Zoryve Cream/Foam, **46**
Zovirax, **22, 46**
Zovirax cream, **46**
Zovirax oint, **46**
Ztalmy Susp, **35**
Ztlido Patch, **46**
Zubsolv, **35**
Zuplenz, **55**
Zurampic 200mg, **58**
Zurzuvae, **35**
Zutripro, **65**
Zyban, **35**
Zyclara Cream, **46**
Zyclara Pump, **46**
Zydelig, **25**
Zyflo 600mg tab, **65**
Zyflo CR 600mg, **65**
Zykadia, **25**

Zyloprim, **58**
Zymaxid, **62**
Zymfentra Inj, **55**
Zypitamag, **41**
Zyprexa, **35**
Zyprexa Zydis, **35**
Zytiga, **25**
Zyvox, **22**

© 2021 AmeriHealth Administrators, Inc. All rights reserved.

