



# 2026 Select Formulary

**For the most current list of covered medications or if you have questions:**



Call the number on your member ID card.



Visit your plan's website on your member ID card or log on to the Optum Rx app to:

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

# Understanding your formulary

## 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.

To create the list, Optum Rx® is guided by the Pharmacy and Therapeutics Committee. This group of doctors and pharmacists reviews which medications will be covered, how well the drugs work, and overall value. They also make sure there are safe and covered options.

## How do I use my formulary?

You and your doctor can use the formulary to help you choose the most cost-effective prescription medications. This guide tells you if a medication is generic or brand, and if special rules apply. If your medication is not listed here, please visit your plan's website or call the number on your member ID card.

## What are tiers?

Tiers are the different cost levels you pay for a medication. Each tier is assigned a cost, set by your employer or plan sponsor.

## When does the formulary change?

- Medications may move to a lower tier at any time.
- Medications may move to a higher tier when a generic equal becomes available.
- Medications may move to a higher tier or be excluded from coverage on January 1 or July 1 of each year.

If a medication changes tiers, you may have to pay a different amount for that medication.

## Why are some medications excluded from coverage?

A medication may be excluded from coverage under your pharmacy benefit when it works the same as or is similar to another prescription or over-the-counter (OTC) medication.

## What if my doctor wants me to keep taking my excluded medication?

You, your authorized representative, or your doctor can start a request for coverage by calling the number on your member ID card. Your doctor will need to submit information for the review. If approved, you may keep filling your prescription for the excluded medication, but you may pay a higher cost. If not approved, you may pay the full cost of the prescription.



### About this formulary

Where differences exist between this list and your benefit plan, the benefit plan documents rule. This is not a complete list of your covered medications. Please review your benefit plan documents for full details. Not all formulary alternatives listed in this document may be appropriate for your specific condition. Please talk to your doctor.

# Medication tips

## What is the difference between brand-name and generic medications?

Generic medications contain the same active ingredients (offer the same effect) as brand-name medications, but they often cost less. In some situations, brand-name medications could be lower in cost.

## What if my doctor writes a brand-name prescription?

If your doctor gives you a prescription for a brand-name medication, ask if a lower-cost option could be right for you.

## What if I am taking a specialty medication?

Specialty medications are used to treat complex conditions and are generally higher in cost. Please note, not all specialty medications are listed in the formulary. Call the number on the back of your member ID card to learn more about where you can fill your specialty prescriptions.



## Over-the-counter medications (OTC)

Talk to your doctor about OTC options. Even though OTC medications may not be covered by your pharmacy benefit, they may cost less than a prescription medication.

# Reading your formulary

The formulary gives you choices so you and your doctor can decide your best course of treatment. In this formulary, brand-name medications are shown in UPPERCASE (for example, CLOBEX). Generic medications are shown in lowercase (for example, clobetasol).

## Tier information

Using lower tier or preferred medications can help you lower your out-of-pocket cost. Your plan may have multiple or no tiers. Please note: If you have a high-deductible plan, the tier cost levels will apply once you meet your deductible.

Drug tier	Includes	Helpful tips
<b>Tier 1</b>	\$ <b>Lower-cost</b> generics and some brand name	Use tier 1 drugs for the lowest out-of-pocket costs.
<b>Tier 2</b>	\$\$ <b>Mid-range cost</b> preferred brand name	Use tier 2 drugs instead of tier 3 to help reduce your out-of-pocket costs.
<b>Tier 3</b>	\$\$\$ <b>Higher-cost</b> brand name and some generics	Many tier 3 drugs have lower-cost options in tier 1 or 2. Ask your doctor if they could work for you.

## Drug list information

In this drug list, some medications are noted with letters next to them to help you see which ones may have coverage requirements or limits. Your benefit plan decides how these medications may be covered.

<b>PA</b>	<b>Prior authorization</b> - Your doctor is required to give Optum Rx more information to determine coverage.
<b>QL</b>	<b>Quantity limit</b> - Medication may be limited to a certain quantity.
<b>SP</b>	<b>Specialty medication</b> - Medication is designated as specialty.
<b>ST</b>	<b>Step therapy</b> - Must try lower-cost medication(s) before a higher-cost medication can be covered
<b>3P</b>	Tier 3 preferred
<b>++</b>	<b>Benefit design options</b> - Coverage is determined by your prescription medication benefit plan.

## Select Formulary

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Drug Name	Drug Tier	Notes
<b>Analgesics - Drugs for Pain</b>		
acetaminophen-codeine oral tablet	1	QL
apap-caff-dihydrocodeine	1	QL
bac (butalbital-acetamin-caff)	1	
BELBUCA	2	PA; QL
butalbital-apap-caffeine oral capsule	1	
butalbital-apap-caffeine oral tablet	1	
endocet	1	QL
hydrocodone-acetaminophen	1	QL
hydromorphone hcl oral tablet	1	QL
HYSINGLA ER	2	PA; QL
JOURNAVX	3	QL
morphine sulfate er oral tablet extended release	1	PA; QL
NUCYNTA	3	QL
oxycodone hcl oral solution	1	QL
oxycodone hcl oral tablet	1	QL
oxycodone-acetaminophen oral tablet 10-325 mg, 2.5-325 mg, 5-325 mg, 7.5-325 mg	1	QL
OXYCONTIN	2	PA; QL
ROXYBOND	3	QL
tramadol hcl oral tablet	1	QL
XTAMPZA ER	2	PA; QL

Drug Name	Drug Tier	Notes
<b>Analgesics - Drugs for Pain and Inflammation</b>		
celecoxib oral	1	QL
diclofenac potassium oral tablet	1	
diclofenac sodium oral	1	
ELYXYB	3	PA; QL
ibuprofen oral suspension 100 mg/5ml, 200 mg/10ml	1	
ibuprofen oral tablet 400 mg, 600 mg, 800 mg	1	
indomethacin oral capsule	1	
ketorolac tromethamine oral	1	QL
meloxicam oral tablet	1	
nabumetone oral	1	
NAPRELAN	3	
naproxen oral tablet	1	
<b>Anesthetics</b>		
lidocaine external ointment 5 %	1	
lidocaine external patch 5 %	1	
lidocaine-prilocaine external cream	1	
ZTLIDO	3	ST
<b>Anti-Addiction / Substance Abuse Treatment Agents</b>		
BRIXADI	3	SP
BRIXADI (WEEKLY)	3	SP
buprenorphine hcl sublingual	1	
buprenorphine hcl-naloxone hcl	1	

For more information regarding the tiers and designations in this drug list, please see the *Reading your formulary* section of this booklet.

Drug Name	Drug Tier	Notes
KLOXXADO	2	
naltrexone hcl oral	1	
OPVEE	2	
REXTOVY	2	
SUBLOCADE	3	SP
varenicline tartrate	1	++; QL
ZIMHI	3	
ZUBSOLV	2	
<b>Antibacterials</b>		
amoxicillin oral capsule	1	
amoxicillin oral suspension reconstituted	1	
amoxicillin oral tablet	1	
amoxicillin-potassium clavulanate	1	
azithromycin oral	1	
cefadroxil oral capsule	1	
cefdinir	1	
cefepodoxime proxetil oral tablet	1	
cefuroxime axetil	1	
cephalexin	1	
ciprofloxacin hcl oral	1	
clarithromycin oral tablet	1	
clindamycin hcl oral	1	
clindamycin phosphate vaginal	1	
CLINDESSE	3	
DIFICID	3	
doxycycline hyclate oral capsule	1	
doxycycline hyclate oral tablet	1	

Drug Name	Drug Tier	Notes
doxycycline monohydrate oral capsule	1	
doxycycline monohydrate oral tablet	1	
levofloxacin oral tablet	1	
metronidazole oral tablet	1	
metronidazole vaginal	1	
minocycline hcl oral capsule	1	
moxifloxacin hcl oral	1	
mupirocin ointment	1	
nitrofurantoin macrocrystal	1	
nitrofurantoin monohydrate macrocrystals	1	
NUZYRA ORAL	3	QL
penicillin v potassium oral tablet	1	
SEYSARA	3	ST
sulfamethoxazole-trimethoprim oral	1	
sulfatrim pediatric	1	
XACIATO	3	
<b>Anticoagulants</b>		
ELIQUIS	2	QL
ELIQUIS DVT/PE STARTER PACK	2	QL
enoxaparin sodium injection solution prefilled syringe	1	
jantoven	1	
warfarin sodium oral	1	
XARELTO	2	QL
XARELTO STARTER PACK	2	QL

For more information regarding the tiers and designations in this drug list, please see the *Reading your formulary* section of this booklet.

Drug Name	Drug Tier	Notes
<b>Anticonvulsants - Drugs for Seizures</b>		
BRIVIACT INTRAVENOUS	3	
BRIVIACT ORAL	3	ST
divalproex sodium er	1	
divalproex sodium oral tablet delayed release	1	
EPIDIOLEX	3	PA; SP
FYCOMPA	3	
gabapentin oral capsule	1	
gabapentin oral tablet 600 mg, 800 mg	1	
lacosamide oral tablet	1	
lamotrigine er	1	
lamotrigine oral tablet	1	
levetiracetam er	1	
levetiracetam intravenous	1	
levetiracetam oral solution	1	
levetiracetam oral tablet	1	
MOTPOLY XR	3	ST
NAYZILAM	3	QL
oxcarbazepine	1	
primidone oral	1	
roweepra	1	
subvenite	1	
SYMPAZAN	3	PA
TOPAMAX	3	ST
TOPAMAX SPRINKLE	3	ST
topiramate oral tablet	1	
VALTOCO 10 MG DOSE	3	QL

Drug Name	Drug Tier	Notes
VALTOCO 15 MG DOSE	3	QL
VALTOCO 20 MG DOSE	3	QL
VALTOCO 5 MG DOSE	3	QL
XCOPRI	3	ST
ZONEGRAN	3	ST
zonisamide oral	1	
<b>Antidementia Agents - Drugs for Alzheimer's Disease and Dementia</b>		
donepezil hcl oral tablet	1	
memantine hcl oral tablet	1	
<b>Antidepressants</b>		
amitriptyline hcl oral	1	
AUVELITY	3	ST; QL
bupropion hcl er (sr)	1	QL
bupropion hcl er (xl) oral tablet extended release 24 hour 150 mg, 300 mg	1	QL
bupropion hcl oral	1	
citalopram hydrobromide oral tablet	1	
desvenlafaxine succinate er	1	QL
doxepin hcl oral capsule	1	
duloxetine hcl oral	1	QL
escitalopram oxalate oral tablet	1	
fluoxetine hcl oral capsule	1	
fluoxetine hcl oral solution	1	

For more information regarding the tiers and designations in this drug list, please see the *Reading your formulary* section of this booklet.

Drug Name	Drug Tier	Notes
fluoxetine hcl oral tablet	1	
fluvoxamine maleate	1	
mirtazapine oral tablet	1	
nortriptyline hcl oral capsule	1	
paroxetine hcl oral tablet	1	
sertraline hcl oral tablet	1	
SPRAVATO (56 MG DOSE)	3	PA; SP
SPRAVATO (84 MG DOSE)	3	PA; SP
trazodone hcl oral	1	
TRINTELLIX	3	ST; QL
venlafaxine hcl	1	
venlafaxine hcl er oral capsule extended release 24 hour	1	QL
venlafaxine hcl er oral tablet extended release 24 hour	1	
vilazodone hcl	1	QL
ZURZUVAE	3	PA; QL
<b>Antiemetics - Drugs for Nausea and Vomiting</b>		
meclizine hcl oral tablet	1	++
metoclopramide hcl oral tablet	1	
ondansetron hcl +rfid	1	
ondansetron hcl injection solution	1	
ondansetron hcl oral solution	1	QL
ondansetron hcl oral tablet 24 mg	1	QL
ondansetron hcl oral tablet 4 mg, 8 mg	1	
ondansetron odt	1	

Drug Name	Drug Tier	Notes
prochlorperazine maleate oral	1	
promethazine hcl injection	1	
promethazine hcl oral solution	1	
promethazine hcl oral tablet	1	
scopolamine	1	
VARUBI (180 MG DOSE)	3	QL
<b>Antifungals</b>		
ciclodan	1	++
ciclopirox external solution	1	++
clotrimazole external cream	1	
clotrimazole mouth/throat	1	
clotrimazole-betamethasone external cream	1	
CRESEMBA INTRAVENOUS	3	
CRESEMBA ORAL	3	PA
fluconazole oral tablet	1	
GYNAZOLE-1	3	
JUBLIA	3	PA; ++
ketoconazole external cream	1	
ketoconazole external shampoo	1	
klayesta	1	
nyamyc	1	
nystatin external	1	
nystatin mouth/throat	1	
nystop	1	
terbinafine hcl oral	1	QL

For more information regarding the tiers and designations in this drug list, please see the *Reading your formulary* section of this booklet.

Drug Name	Drug Tier	Notes
terconazole vaginal cream	1	
VIVJOA	3	PA
<b>Antigout Agents</b>		
allopurinol oral	1	
colchicine oral tablet	1	
<b>Antimigraine Agents</b>		
AIMOVIG SUBCUTANEOUS SOLUTION AUTO-INJECTOR 140 MG/ML, 70 MG/ML	2	PA; QL
AJOVY	3	PA; QL
eletriptan hydrobromide	1	QL
EMGALITY	2	PA; QL
naratriptan hcl	1	QL
NURTEC	2	PA; QL
QULIPTA	2	PA; QL
rizatriptan benzoate	1	QL
sumatriptan succinate oral	1	QL
sumatriptan succinate subcutaneous solution auto-injector	1	QL
UBRELVY	2	PA; QL
ZAVZPRET	3	PA; QL
<b>Antimyasthenic Agents</b>		
VYVGART	3	PA; SP
VYVGART HYTRULO SUBCUTANEOUS SOLUTION	3	PA; SP
VYVGART HYTRULO SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	3	PA; SP; QL
<b>Antineoplastics - Drugs for Cancer</b>		
abiraterone acetate	1	PA; SP

Drug Name	Drug Tier	Notes
ALECENSA	2	PA; SP
ALUNBRIG	2	PA; SP; QL
anastrozole oral	1	
ANKTIVA	3	PA; SP
AUGTYRO	3	PA; SP
BESREMI	3	PA; SP
CABOMETYX ORAL TABLET 20 MG	2	PA; SP; QL
CABOMETYX ORAL TABLET 40 MG, 60 MG	2	PA; SP
CALQUENCE	3	PA; SP
capecitabine	1	SP
COTELLIC	3	PA; SP
DANZITEN	3	PA; SP
ERIVEDGE	3	PA; SP
ERLEADA	3	PA; SP
GAVRETO	3	PA; SP
ICLUSIG ORAL TABLET 10 MG, 15 MG	3	PA; SP; QL
ICLUSIG ORAL TABLET 30 MG, 45 MG	3	PA; SP
IDHIFA	3	PA; SP; QL
IMBRUVICA ORAL CAPSULE	3	PA; SP; QL
IMBRUVICA ORAL SUSPENSION	3	PA; SP
IMBRUVICA ORAL TABLET 420 MG	3	PA; SP; QL
IMKELDI	3	PA; SP
KANJINTI	2	PA; SP
KISQALI (200 MG DOSE)	3	PA; SP
KISQALI (400 MG DOSE)	3	PA; SP

For more information regarding the tiers and designations in this drug list, please see the *Reading your formulary* section of this booklet.

Drug Name	Drug Tier	Notes
KISQALI (600 MG DOSE)	3	PA; SP
KOSELUGO	3	PA; SP
lenalidomide	1	PA; SP
letrozole oral	1	
LUMAKRAS	3	PA; SP
LYNPARZA	2	PA; SP
MEKINIST	3	PA; SP
MVASI	2	PA; SP
NUBEQA	3	PA; SP
ODOMZO	3	PA; SP
ORGOVYX	3	PA; SP
PANRETIN	3	
PHESGO	2	PA; SP
PIQRAY	3	PA; SP
POMALYST ORAL CAPSULE 1 MG, 2 MG	3	PA; SP; QL
POMALYST ORAL CAPSULE 3 MG, 4 MG	3	PA; SP
RETEVMO ORAL TABLET 120 MG, 160 MG	3	PA; SP
RETEVMO ORAL TABLET 40 MG, 80 MG	3	PA; SP; QL
REVLIMID	2	PA; SP
ROZLYTREK	3	PA; SP
RUXIENCE	2	PA; SP
RYDAPT	3	PA; SP
SCEMBLIX ORAL TABLET 100 MG	3	PA; SP
SCEMBLIX ORAL TABLET 20 MG, 40 MG	3	PA; SP; QL
STIVARGA	2	PA; SP
TABRECTA	3	PA; SP
TAFINLAR	3	PA; SP

Drug Name	Drug Tier	Notes
TAGRISSO ORAL TABLET 40 MG	3	PA; SP; QL
TAGRISSO ORAL TABLET 80 MG	3	PA; SP
tamoxifen citrate oral	1	
TASIGNA	3	PA; SP
TRAZIMERA	2	PA; SP
TRUQAP	3	PA; SP
VERZENIO	3	PA; SP
VITRAKVI	3	PA; SP
XTANDI	3	PA; SP
ZEJULA ORAL TABLET 100 MG	2	PA; SP; QL
ZEJULA ORAL TABLET 200 MG, 300 MG	2	PA; SP
ZELBORAF	3	PA; SP
ZIRABEV	2	PA; SP
<b>Antiparasitics</b>		
ARAKODA	3	
atovaquone-proguanil hcl	1	
EMVERM	2	
hydroxychloroquine sulfate oral	1	
<b>Antiparkinson Agents</b>		
benztropine mesylate oral	1	
carbidopa-levodopa oral tablet	1	
CREXONT	3	ST
NEUPRO	3	
ONGENTYS	3	ST
pramipexole dihydrochloride	1	
ropinirole hcl	1	
RYTARY	3	ST

For more information regarding the tiers and designations in this drug list, please see the *Reading your formulary* section of this booklet.

Drug Name	Drug Tier	Notes
<b>Antiplatelets</b>		
BRILINTA	3	ST
clopidogrel bisulfate oral	1	
prasugrel hcl	1	
TAVALISSE	3	PA; SP
<b>Antipsychotics - Drugs for Mood Disorders</b>		
ABILIFY ASIMTUFII	3	++
ABILIFY MAINTENA	3	++
aripiprazole oral tablet	1	QL
ARISTADA	3	++
ARISTADA INITIO	3	++
ERZOFRI	3	++
INVEGA HAFYERA	3	ST; ++
INVEGA SUSTENNA	3	++
INVEGA TRINZA	3	++
lurasidone hcl	1	QL
LYBALVI	3	ST; QL
olanzapine oral tablet	1	QL
quetiapine fumarate	1	QL
quetiapine fumarate er	1	QL
REXULTI	3	QL
risperidone oral tablet	1	QL
RYKINDO	3	++
UZEDY	3	++
VRAYLAR	3	QL
ziprasidone hcl	1	QL
<b>Antivirals</b>		
acyclovir external ointment	1	QL
acyclovir oral capsule	1	
acyclovir oral tablet	1	
BIKTARVY	3	
CABENUVA	2	

Drug Name	Drug Tier	Notes
CIMDUO	2	
DESCOVY ORAL TABLET 120-15 MG	3	
DESCOVY ORAL TABLET 200-25 MG	3	PA
DOVATO	2	
emtricitabine-tenofovir df	1	
EPCLUSA	2	PA; SP; QL
HARVONI	2	PA; SP; QL
JULUCA	2	
MAVYRET	2	PA; SP; QL
oseltamivir phosphate oral	1	QL
PAXLOVID (150/100)	2	QL
PAXLOVID (300/100 & 150/100)	2	QL
PAXLOVID (300/100)	2	QL
PREZCOBIX ORAL TABLET 800-150 MG	2	
SYMFI	2	
SYMTUZA	3	
TRIUMEQ	2	
valacyclovir hcl oral	1	QL
VOSEVI	2	PA; SP; QL
XOFLUZA (40 MG DOSE)	3	QL
XOFLUZA (80 MG DOSE)	3	QL
<b>Anxiolytics - Drugs for Anxiety</b>		
alprazolam oral tablet	1	QL
buspirone hcl oral	1	
clonazepam oral	1	QL
diazepam oral tablet	1	
hydroxyzine hcl oral	1	

For more information regarding the tiers and designations in this drug list, please see the *Reading your formulary* section of this booklet.

Drug Name	Drug Tier	Notes
hydroxyzine pamoate oral	1	
lorazepam oral tablet	1	QL
triazolam	1	QL
<b>Bipolar Agents - Drugs for Mood Disorders</b>		
lithium carbonate er	1	
lithium carbonate oral	1	
<b>Blood Products and Modifiers - Drugs for Blood Disorders</b>		
ADVATE	2	SP
ADYNOVATE	3	SP
AFSTYLA	3	SP
ALPROLIX	3	SP
ALTUVIIO	3	SP
ARANESP (ALBUMIN FREE)	2	PA; SP
BENEFIX	2	SP
DOPTELET	3	PA; SP
ELOCTATE	3	SP
EMPAVELI	3	PA; SP
ESPEROCT	3	SP
FABHALTA	3	PA; SP; QL
IDELVION	3	SP
JIVI	3	SP
KOATE	2	SP
KOGENATE FS	2	SP
KOVALTRY	2	SP
NEULASTA	3	PA; SP
NEULASTA ONPRO	3	PA; SP
NIVESTYM	2	PA; SP
NOVOEIGHT	2	SP
NUWIQ	2	SP
PROCRIT	2	PA; SP

Drug Name	Drug Tier	Notes
PROMACTA	3	PA; SP
REBINYN	3	SP
RECOMBINATE	2	SP
RETACRIT	2	PA; SP
SOLIRIS	3	PA; SP
tranexamic acid oral	1	
UDENYCA	3	PA; SP
UDENYCA ONBODY	3	PA; SP
ULTOMIRIS	3	PA; SP
VOYDEYA	3	PA; SP; QL
WILATE	2	SP
XYNTHA	2	SP
XYNTHA SOLOFUSE	2	SP
ZARXIO	2	PA; SP
<b>Cardiovascular Agents - Drugs for Heart and Circulation Conditions</b>		
amiodarone hcl oral	1	
amlodipine besylate oral	1	
amlodipine besylate-benazepril hcl	1	
amlodipine besylate-valsartan	1	
amlodipine-olmesartan	1	
atenolol oral	1	
ATORVALIQ	3	PA
atorvastatin calcium oral	1	
benazepril hcl oral	1	
bisoprolol fumarate oral	1	
bisoprolol-hydrochlorothiazide	1	
bumetanide oral	1	
candesartan cilexetil	1	
cartia xt	1	

For more information regarding the tiers and designations in this drug list, please see the *Reading your formulary* section of this booklet.

Drug Name	Drug Tier	Notes
carvedilol	1	
chlorthalidone	1	
clonidine hcl oral	1	
colestipol hcl oral tablet	1	
diltiazem hcl er coated beads	1	
doxazosin mesylate oral	1	
EDARBI	3	ST
EDARBYCLOR	3	ST
enalapril maleate oral tablet	1	
ENTRESTO ORAL CAPSULE SPRINKLE	2	QL
ENTRESTO ORAL TABLET	3	ST; QL
ezetimibe	1	
fenofibrate micronized	1	
fenofibrate oral capsule 134 mg, 200 mg, 67 mg	1	
fenofibrate oral tablet	1	
flecainide acetate	1	
FUROSCIX	3	PA
furosemide oral tablet	1	
gemfibrozil oral	1	
guanfacine hcl	1	
HEMANGEOL	3	PA
hydralazine hcl oral	1	
hydrochlorothiazide oral	1	
icosapent ethyl	1	PA
irbesartan	1	
irbesartan-hydrochlorothiazide	1	
isosorbide mononitrate er	1	
labetalol hcl oral	1	

Drug Name	Drug Tier	Notes
lisinopril oral	1	
lisinopril-hydrochlorothiazide	1	
LIVALO	3	ST
losartan potassium oral	1	
losartan potassium-hctz	1	
lovastatin oral	1	
metoprolol succinate er	1	
metoprolol tartrate oral	1	
midodrine hcl	1	
minoxidil oral	1	
MULTAQ	3	
nadolol oral	1	
nebivolol hcl	1	
NEXLETOL	2	PA; QL
NEXLIZET	2	PA; QL
nifedipine er	1	
nifedipine er osmotic release	1	
nitroglycerin sublingual	1	
NORLIQVA	3	PA
olmesartan medoxomil oral	1	
olmesartan medoxomil-hctz	1	
omega-3-acid ethyl esters	1	
pravastatin sodium	1	
prazosin hcl oral	1	
propranolol hcl er	1	
propranolol hcl oral tablet	1	
ramipril	1	
ranolazine er	1	
REPATHA	2	ST; QL

For more information regarding the tiers and designations in this drug list, please see the *Reading your formulary* section of this booklet.

Drug Name	Drug Tier	Notes
REPATHA PUSHTRONEX SYSTEM SUBCUTANEOUS SOLUTION CARTRIDGE 420 MG/3.5ML	2	ST; QL
REPATHA SURECLICK	2	ST; QL
rosuvastatin calcium oral	1	
simvastatin oral	1	
SOANZ	3	PA
spironolactone oral tablet	1	
TEKTURNA	2	
telmisartan	1	
toremide	1	
triamterene-hctz	1	
valsartan oral tablet	1	
valsartan- hydrochlorothiazide	1	
VASCEPA	2	PA
verapamil hcl er oral tablet extended release	1	
VERQUVO	3	PA; QL
VYNDAMAX	3	PA; SP; QL
VYNDAQEL	3	PA; SP; QL
<b>Central Nervous System Agents - Drugs for Attention Deficit Disorder</b>		
amphetamine- dextroamphetamine	1	QL
amphetamine- dextroamphetamine er	1	QL
amphet-dextroamphet 3-bead er	1	QL
atomoxetine hcl	1	QL

Drug Name	Drug Tier	Notes
AZSTARYS	2	ST; QL
clonidine hcl er	1	
dexmethylphenidate hcl	1	QL
dexmethylphenidate hcl er	1	QL
dextroamphetamine sulfate oral tablet	1	QL
DYANAVEL XR	3	ST; QL
guanfacine hcl er	1	
JORNAY PM	3	ST; QL
lisdexamfetamine dimesylate	1	QL
methylphenidate hcl er	1	QL
methylphenidate hcl er (cd)	1	QL
methylphenidate hcl er (la)	1	QL
methylphenidate hcl er (osm) oral tablet extended release 18 mg, 27 mg, 36 mg, 54 mg, 72 mg	1	QL
methylphenidate hcl er (xr)	1	QL
methylphenidate hcl oral tablet	1	QL
MYDAYIS	3	ST; QL
QELBREE	3	ST; QL
RELEXXII	3	ST; QL
VYVANSE ORAL CAPSULE	3	ST; QL
<b>Central Nervous System Agents - Drugs for Multiple Sclerosis</b>		
AVONEX PEN	2	PA; SP; QL
AVONEX PREFILLED	2	PA; SP; QL
BAFIERTAM	2	PA; SP; QL
BETASERON	2	PA; SP; QL

For more information regarding the tiers and designations in this drug list, please see the *Reading your formulary* section of this booklet.

Drug Name	Drug Tier	Notes
dalfampridine er	1	PA; SP; QL
dimethyl fumarate oral	1	PA; SP; QL
KESIMPTA	2	PA; SP; QL
MAVENCLAD	3	PA; SP; QL
MAYZENT	3	PA; SP; QL
MAYZENT STARTER PACK	3	PA; SP; QL
REBIF	3	PA; SP; QL
REBIF REBIDOSE	3	PA; SP; QL
REBIF REBIDOSE TITRATION PACK	3	PA; SP; QL
REBIF TITRATION PACK	3	PA; SP; QL
VUMERITY	2	PA; SP; QL
ZEPOSIA	3	PA; SP; QL
ZEPOSIA 7-DAY STARTER PACK	3	PA; SP; QL
ZEPOSIA STARTER KIT	3	PA; SP; QL
<b>Central Nervous System Agents - Miscellaneous</b>		
AUSTEDO	3	PA; SP; QL
AUSTEDO XR	3	PA; SP; QL
AUSTEDO XR PATIENT TITRATION	3	PA; SP; QL
GRALISE	3	ST; QL
HORIZANT	3	PA; QL
INGREZZA	3	PA; SP; QL
phentermine hcl oral capsule	1	++
phentermine hcl oral tablet 37.5 mg	1	++
pregabalin oral capsule	1	QL
QSYMIA	2	PA; ++
RADICAVA ORS	2	PA; SP
RADICAVA ORS STARTER KIT	2	PA; SP

Drug Name	Drug Tier	Notes
SAXENDA	2	PA; ++; QL
TEGLUTIK	2	PA; QL
VYLEESI	3	PA; ++; QL
WAINUA	3	PA; SP; QL
WEGOVY	2	PA; ++; QL
ZEPBOUND SUBCUTANEOUS SOLUTION AUTO-INJECTOR	2	PA; ++; QL
<b>Dental and Oral Agents - Drugs for Mouth and Throat Conditions</b>		
chlorhexidine gluconate mouth/throat	1	
lidocaine hcl mouth/throat	1	
lidocaine viscous hcl	1	
periogard	1	
<b>Dermatological Agents - Drugs for Skin Conditions</b>		
ABSORICA	3	PA
ABSORICA LD	3	PA
acutane	1	
ADBRY	2	PA; SP; QL
AKLIEF	3	PA
ala-cort	1	
amnestem	1	
AMZEEQ	3	
azelaic acid external	1	
betamethasone dipropionate external	1	
CIBINQO	2	PA; SP; QL
claravis	1	
clindacin etz external swab	1	
clindacin-p	1	

For more information regarding the tiers and designations in this drug list, please see the *Reading your formulary* section of this booklet.

Drug Name	Drug Tier	Notes
clindamycin phos (once-daily)	1	
clindamycin phos (twice-daily)	1	
clindamycin phos-benzoyl perox external gel 1-5 %, 1.2-2.5 %, 1.2-3.75 %	1	
clindamycin phosphate external lotion	1	
clindamycin phosphate external solution	1	
clindamycin phosphate external swab	1	
clobetasol propionate external cream 0.05 %	1	
clobetasol propionate external foam	1	
clobetasol propionate external ointment	1	
clobetasol propionate external shampoo	1	
clobetasol propionate external solution	1	
clodan	1	
desonide external cream	1	
desonide external ointment	1	
DUPIXENT	2	PA; SP; QL
EBGLYSS	2	PA; SP; QL
ENSTILAR	3	QL
EPIDUO FORTE	3	
EUCRISA	2	ST
FINACEA EXTERNAL FOAM	3	
finasteride oral tablet 1 mg	1	

Drug Name	Drug Tier	Notes
fluocinonide external cream	1	
fluocinonide external ointment	1	
fluocinonide external solution	1	
fluorouracil external cream 5 %	1	
hydrocortisone external cream 1 %, 2.5 %	1	
hydrocortisone external ointment 1 %, 2.5 %	1	
HYFTOR	3	PA
imiquimod external cream 3.75 %	1	ST
imiquimod external cream 5 %	1	
imiquimod pump	1	ST
isotretinoin oral	1	
KLISYRI (250 MG)	3	ST
KLISYRI (350 MG)	3	ST
LITFULO	3	PA; SP; QL
metronidazole external cream	1	
metronidazole external gel	1	
MIRVASO	2	
mometasone furoate external	1	
NEMLUVIO	2	PA; SP; QL
ONEXTON	3	ST
OPZELURA	2	ST; QL
pimecrolimus	1	ST; QL
QBREXZA	3	QL
RETIN-A MICRO PUMP EXTERNAL GEL 0.06 %, 0.08 %	3	PA; ++
SANTYL	3	QL

For more information regarding the tiers and designations in this drug list, please see the *Reading your formulary* section of this booklet.

Drug Name	Drug Tier	Notes
SOFDRA	3	QL
SOOLANTRA	3	
TACLONEX	3	QL
tacrolimus external	1	QL
tretinoin external	1	++
triamcinolone acetonide external cream	1	
triamcinolone acetonide external lotion	1	
triamcinolone acetonide external ointment	1	
triamcinolone in absorbbase	1	
triderm	1	
TWYNEO	3	
VTAMA	2	ST
WINLEVI	3	PA
WYNZORA	3	QL
YCANTH	3	PA
zenatane	1	
ZILXI	3	ST
ZORYVE EXTERNAL CREAM	2	ST
<b>Diabetes - Antidiabetic Agents</b>		
DAPAGLIFLOZIN PRO-METFORMIN ER	3	PA
DAPAGLIFLOZIN PROPANEDIOL	3	PA
FARXIGA	2	
glimepiride	1	
glipizide er	1	
glipizide ir	1	
glyburide oral	1	
GLYXAMBI	2	
JANUMET	2	
JANUMET XR	2	

Drug Name	Drug Tier	Notes
JANUVIA	2	
JARDIANCE	2	
JENTADUETO	2	
JENTADUETO XR	2	
metformin hcl er	1	
metformin hcl er (mod)	1	PA
metformin hcl er (osm)	1	
metformin hcl oral tablet	1	
MOUNJARO	2	PA; QL
OZEMPIC	2	PA; QL
pioglitazone hcl	1	
RYBELSUS	2	PA; QL
SOLIQUA	2	
SYNJARDY	2	
SYNJARDY XR	2	
TRADJENTA	2	
TRIJARDY XR	2	
TRULICITY	2	PA; QL
XIGDUO XR	2	
<b>Diabetes - Glucose Monitoring</b>		
ACCU-CHEK FASTCLIX LANCET KIT	2	++
ACCU-CHEK SOFTCLIX LANCET DEVICE KIT	2	++
CEQR SIMPLICITY 2U 10PK	2	++
CONTOUR NEXT EZ KIT W/DEVICE	2	++
CONTOUR NEXT GEN MONITOR KIT W/DEVICE	2	++
CONTOUR NEXT MONITOR KIT W/DEVICE	2	++

For more information regarding the tiers and designations in this drug list, please see the *Reading your formulary* section of this booklet.

Drug Name	Drug Tier	Notes
CONTOUR NEXT ONE KIT	2	++
CONTOUR NEXT GEN TEST STRIPS	2	++; QL
CONTOUR PLUS BLUE KIT W/DEVICE	2	++
CONTOUR PLUS TEST STRIP	2	++; QL
CONTOUR TEST STRIPS	2	++; QL
DEXCOM G6 RECEIVER	2	PA; ++
DEXCOM G6 SENSOR	2	PA; ++
DEXCOM G6 TRANSMITTER	2	PA; ++
DEXCOM G7 RECEIVER	2	PA; ++
DEXCOM G7 SENSOR	2	PA; ++
ENLITE GLUCOSE SENSOR	3	PA; ++
EVERSENSE 365 SENSOR/HOLDER	3	PA; ++
EVERSENSE 365 SMART TRANSMIT	3	PA; ++
EVERSENSE SENSOR/HOLDER	3	PA; ++
EVERSENSE SMART TRANSMITTER	3	PA; ++
FREESTYLE FREEDOM LITE KIT W/DEVICE	2	++
FREESTYLE INSULINX TEST STRIPS	2	++; QL
FREESTYLE LIBRE 14 DAY READER	2	PA; ++
FREESTYLE LIBRE 14 DAY SENSOR	2	PA; ++
FREESTYLE LIBRE 2 PLUS SENSOR	2	PA; ++

Drug Name	Drug Tier	Notes
FREESTYLE LIBRE 2 READER	2	PA; ++
FREESTYLE LIBRE 2 SENSOR	2	PA; ++
FREESTYLE LIBRE 3 PLUS SENSOR	2	PA; ++
FREESTYLE LIBRE 3 READER	2	PA; ++
FREESTYLE LIBRE 3 SENSOR	2	PA; ++
FREESTYLE LITE TEST STRIPS	2	++; QL
FREESTYLE PRECISION NEO SYSTEM	2	++
FREESTYLE PRECISION NEO TEST STRIPS	2	++; QL
FREESTYLE TEST STRIPS	2	++; QL
GUARDIAN 4 GLUCOSE SENSOR	3	PA; ++
GUARDIAN 4 TRANSMITTER	3	PA; ++
GUARDIAN LINK 3 TRANSMITTER	3	PA; ++
GUARDIAN REAL-TIME CHARGER	3	++
GUARDIAN REAL-TIME REPLACE PED	3	PA; ++
GUARDIAN REAL-TIME TEST PLUG	3	++
GUARDIAN SENSOR 3	3	PA; ++
INPEN 100-BLUE-LILLY-HUMALOG	3	++
INPEN 100-BLUE-NOVOLOG-FIASP	3	++
INPEN 100-GREY-LILLY-HUMALOG	3	++

For more information regarding the tiers and designations in this drug list, please see the *Reading your formulary* section of this booklet.

Drug Name	Drug Tier	Notes
INPEN 100-GREY-NOVOLOG-FIASP	3	++
INPEN 100-PINK-LILLY-HUMALOG	3	++
INPEN 100-PINK-NOVOLOG-FIASP	3	++
PRECISION XTRA BLOOD GLUCOSE STRIPS	2	++; QL
SIMPLERA SENSOR	3	PA; ++
SIMPLERA SYNC SENSOR	3	PA; ++
SIMPLERA SYSTEM	3	PA; ++
<b>Diabetes - Glycemic Agents</b>		
BAQSIMI ONE PACK	2	++
BAQSIMI TWO PACK	2	++
GLUCAGON EMERGENCY KIT INJECTION SOLUTION RECONSTITUTED	2	Made by Fresenius; ++
ZEGALOGUE	2	++
<b>Diabetes - Insulins</b>		
ADMELOG	1	++
ADMELOG SOLOSTAR	1	++
APIDRA SOLOSTAR	1	++
APIDRA VIAL	1	++
BASAGLAR KWIKPEN	1	++
BASAGLAR TEMPO PEN	3	ST; ++
BD ULTRA-FINE INSULIN SYRINGES 30G X 1/2" 0.3 ML, 30G X 1/2" 0.5 ML, 30G X 1/2" 1 ML, 31G X 5/16" 0.3 ML, 31G X 5/16" 0.5 ML, 31G X 5/16" 1 ML	2	++

Drug Name	Drug Tier	Notes
BD VEO INSULIN SYR ULTRAFINE 31G X 15/64" 1 ML	2	++
FIASP	1	++
FIASP FLEXTOUCH	1	++
FIASP PENFILL	1	++
FIASP PUMPCART	1	++
HUMALOG	1	++
HUMALOG KWIKPEN	1	++
HUMALOG MIX 50/50 KWIKPEN	1	++
HUMALOG MIX 75/25 KWIKPEN	1	++
HUMALOG MIX 75/25 VIAL	1	++
HUMALOG TEMPO PEN	3	ST; ++
HUMALOG U-100 JUNIOR KWIKPEN	1	++
HUMULIN 70/30 KWIKPEN	1	++
HUMULIN 70/30 VIAL	1	++
HUMULIN N KWIKPEN	1	++
HUMULIN N VIAL	1	++
HUMULIN R U-500 KWIKPEN	1	++
HUMULIN R U-500 VIAL	1	++
HUMULIN R VIAL	1	++
INSULIN ASPART	1	PA; ++
INSULIN ASPART FLEXPEN	1	PA; ++
INSULIN DEGLUDEC FLEXTOUCH	3	PA; ++
INSULIN GLARGINE MAX SOLOSTAR	3	PA; ++
INSULIN GLARGINE SOLOSTAR	3	PA; ++

For more information regarding the tiers and designations in this drug list, please see the *Reading your formulary* section of this booklet.

Drug Name	Drug Tier	Notes
INSULIN LISPRO	1	++
INSULIN LISPRO (1 UNIT DIAL)	1	++
INSULIN LISPRO JUNIOR KWIKPEN	1	++
INSULIN LISPRO PROT & LISPRO	1	++
LANTUS SOLOSTAR	1	++
LANTUS U-100 VIAL	1	++
LYUMJEV KWIKPEN	1	++
LYUMJEV VIAL	1	++
NOVOLIN 70/30 FLEXPEN	1	++
NOVOLIN 70/30 FLEXPEN RELION	1	++
NOVOLIN 70/30 VIAL	1	++
NOVOLIN N FLEXPEN	1	++
NOVOLIN N FLEXPEN RELION	1	++
NOVOLIN N VIAL	1	++
NOVOLIN R FLEXPEN	1	++
NOVOLIN R FLEXPEN RELION	1	++
NOVOLIN R VIAL	1	++
NOVOLOG FLEXPEN	1	++
NOVOLOG MIX 70/30 FLEXPEN	1	++
NOVOLOG MIX 70/30 VIAL	1	++
NOVOLOG PENFILL	1	++
NOVOLOG U-100 VIAL	1	++
REZVOGLAR KWIKPEN	1	++
TOUJEO MAX SOLOSTAR	1	++
TOUJEO SOLOSTAR	1	++
TRESIBA	1	++

Drug Name	Drug Tier	Notes
TRESIBA FLEXTOUCH	1	++
<b>Electrolytes / Minerals / Metals / Vitamins</b>		
ACCRUFER	3	ST
cyanocobalamin injection solution 1000 mcg/ml	1	++
cyanocobalamin nasal	1	++
ergocalciferol oral capsule	1	++
folic acid oral tablet 1 mg	1	++
JYNARQUE	3	PA; SP; QL
klor-con 10	1	
klor-con m10	1	
klor-con m15	1	
klor-con m20	1	
klor-con oral tablet extended release	1	
LOKELMA	3	
NASCOBAL	3	++
potassium chloride cryster	1	
potassium chloride er	1	
potassium citrate er	1	
tolvaptan oral tablet therapy pack	1	PA; Made by Lupin.; SP; QL
tolvaptan tablet 15 mg oral	1	PA; SP; QL
tolvaptan tablet 15 mg oral	1	PA; Made by Lupin.; SP; QL
tolvaptan tablet 30 mg oral	1	PA; SP; QL
tolvaptan tablet 30 mg oral	1	PA; Made by Lupin.; SP; QL
VELTASSA	3	

For more information regarding the tiers and designations in this drug list, please see the *Reading your formulary* section of this booklet.

Drug Name	Drug Tier	Notes
vitamin d (ergocalciferol) oral capsule 1.25 mg (50000 ut), 50000 unit	1	++
<b>Gastrointestinal Agents - Drugs for Acid Reflux and Ulcer</b>		
dexlansoprazole	1	++; QL
esomeprazole magnesium oral capsule delayed release	1	++; QL
famotidine oral suspension reconstituted	1	++
famotidine oral tablet 20 mg, 40 mg	1	++
lansoprazole oral capsule delayed release	1	++; QL
misoprostol oral	1	
omeprazole oral capsule delayed release	1	QL
pantoprazole sodium oral tablet delayed release	1	QL
rabeprazole sodium oral tablet delayed release	1	++; QL
sucralfate oral	1	
<b>Gastrointestinal Agents - Drugs for Bowel, Intestine and Stomach Conditions</b>		
CLENPIQ	3	
constulose	1	
dicyclomine hcl oral capsule	1	
dicyclomine hcl oral tablet 20 mg	1	

Drug Name	Drug Tier	Notes
diphenoxylate-atropine oral tablet	1	
gavilyte-c	1	
gavilyte-g	1	
gavilyte-n with flavor pack	1	
glycopyrrolate oral tablet 1 mg, 2 mg	1	QL
IQIRVO	3	PA; SP; QL
lactulose oral solution	1	
LINZESS	2	ST; QL
LIVDELZI	3	PA; SP; QL
loperamide hcl oral capsule	1	
lubiprostone	1	QL
MOVANTIK	2	ST; QL
na sulfate-k sulfate-mg sulf	1	
peg 3350-kcl-na bicarb-nacl	1	
peg-3350/electrolytes	1	
PYLERA	2	
REBYOTA	3	PA; SP
SUFLAVE	3	
SUPREP BOWEL PREP KIT	3	
SUTAB	3	
SYMPROIC	2	ST; QL
TALICIA	2	
VIBERZI	3	PA; QL
VOQUEZNA DUAL PAK	2	
VOQUEZNA TRIPLE PAK	2	

For more information regarding the tiers and designations in this drug list, please see the *Reading your formulary* section of this booklet.

Drug Name	Drug Tier	Notes
<b>Genetic or Enzyme Disorder - Drugs for Replacement, Modification, Treatment</b>		
CERDELGA	3	PA; SP
CREON	2	
FABRAZYME	2	PA; SP
ORFADIN	3	PA; SP
PANCREAZE	3	ST
PERTZYE	3	ST
PHEBURANE	3	PA; SP
STRENSIQ	2	PA; SP
ZENPEP	2	
ZOLGENSMA	3	PA; SP
<b>Genitourinary Agents - Drugs for Bladder, Genital and Kidney Conditions</b>		
AURYXIA	3	
mirabegron er	1	
MYRBETRIQ	2	
OXLUMO	3	PA; SP
oxybutynin chloride er	1	
oxybutynin chloride oral tablet	1	
phenazopyridine hcl oral tablet 100 mg, 200 mg	1	
sildenafil citrate oral tablet 100 mg, 25 mg, 50 mg	1	++; QL
solifenacin succinate	1	
tadalafil oral	1	++; QL
THIOLA	3	SP
THIOLA EC	3	SP
tolterodine tartrate er	1	
VANRAFIA	3	PA; SP; QL

Drug Name	Drug Tier	Notes
<b>Genitourinary Agents - Drugs for Prostate Conditions</b>		
alfuzosin hcl er	1	
dutasteride oral	1	
finasteride oral tablet 5 mg	1	
tamsulosin hcl	1	
<b>Hormonal Agents - Adrenal</b>		
dexamethasone oral tablet	1	
fludrocortisone acetate oral	1	
hydrocortisone oral	1	
methylprednisolone oral	1	
prednisolone oral solution	1	
prednisolone sodium phosphate oral solution	1	
prednisone oral tablet	1	
prednisone oral tablet therapy pack	1	
<b>Hormonal Agents - Men's Health</b>		
testosterone cypionate intramuscular	1	PA; QL
testosterone transdermal gel	1	PA; QL
XYOSTED	3	PA; QL
<b>Hormonal Agents - Pituitary</b>		
ACTHAR	2	PA; SP
ACTHAR GEL	2	PA; SP
cabergoline	1	
CORTROPHIN	2	PA; SP
CORTROPHIN GEL	2	PA; SP

For more information regarding the tiers and designations in this drug list, please see the *Reading your formulary* section of this booklet.

Drug Name	Drug Tier	Notes
desmopressin acetate oral	1	
FOLLISTIM AQ	2	PA; ++; SP
ganirelix acetate	1	PA; Made by Organon; ++; SP
LUPRON DEPOT (1-MONTH) INTRAMUSCULAR KIT 7.5 MG	2	PA; SP
LUPRON DEPOT (3-MONTH) INTRAMUSCULAR KIT 22.5 MG	2	PA; SP
LUPRON DEPOT (4-MONTH) INTRAMUSCULAR KIT 30MG	2	PA; SP
LUPRON DEPOT (6-MONTH) INTRAMUSCULAR KIT 45MG	2	PA; SP
LUPRON DEPOT-PED (1-MONTH)	2	PA; SP; QL
LUPRON DEPOT-PED (3-MONTH)	2	PA; SP; QL
LUPRON DEPOT-PED (6-MONTH)	2	PA; SP; QL
MENOPUR	3	PA; ++; SP
NGENLA	3	PA; ++; SP
NORDITROPIN FLEXPRO	2	PA; ++; SP
NUTROPIN AQ NUSPIN 10	3	PA; ++; SP
NUTROPIN AQ NUSPIN 20	3	PA; ++; SP
NUTROPIN AQ NUSPIN 5	3	PA; ++; SP
OMNITROPE	2	PA; ++; SP
ORILISSA	2	PA; QL

Drug Name	Drug Tier	Notes
OVIDREL	3	PA; ++; SP
SKYTROFA	3	PA; ++; SP
SOMATULINE DEPOT SUBCUTANEOUS SOLUTION 60 MG/0.2ML, 90 MG/0.3ML	3	PA; SP
TRIPTODUR	2	PA; SP; QL
<b>Hormonal Agents - Selective Estrogen Receptor Modifying Agents</b>		
OSPHENA	3	
<b>Hormonal Agents - Sex Hormones and Birth Control</b>		
afirmelle	1	++
altavera	1	++
ANNOVERA	3	++; QL
apri	1	++
abra eq	1	++
aurovela 1.5/30	1	++
aurovela 1/20	1	++
aurovela 24 fe	1	++
aurovela fe 1.5/30	1	++
aurovela fe 1/20	1	++
aviane	1	++
ayuna	1	++
BALCOLTRA	3	++
BIJUVA	3	
blisovi 24 fe	1	++
blisovi fe 1.5/30	1	++
blisovi fe 1/20	1	++
camila	1	++
chateal eq	1	++
CLIMARA PRO	2	
cyred eq	1	++

For more information regarding the tiers and designations in this drug list, please see the *Reading your formulary* section of this booklet.

Drug Name	Drug Tier	Notes
deblitane	1	++
delyla	1	++
DIVIGEL	3	
dotti	1	
drospirenone-ethinyl estradiol	1	++
DUAVEE	2	
ELESTRIN	3	
eluryng	1	++
emzahh	1	++
ENDOMETRIN	2	++
enilloring	1	++
enskyce	1	++
errin	1	++
estarylla	1	++
estradiol oral	1	
estradiol transdermal	1	
estradiol vaginal	1	
estradiol-norethindrone acet	1	
etonogestrel-ethinyl estradiol	1	++
EVAMIST	3	
falmina	1	++
feirza 1.5/30	1	++
feirza 1/20	1	++
gallifrey	1	
hailey 1.5/30	1	++
hailey 24 fe	1	++
hailey fe 1.5/30	1	++
hailey fe 1/20	1	++
haloette	1	++
heather	1	++
IMVEXXY MAINTENANCE PACK	2	

Drug Name	Drug Tier	Notes
IMVEXXY STARTER PACK	2	
incassia	1	++
isibloom	1	++
jasmiel	1	++
jencycla	1	++
juleber	1	++
junel 1.5/30	1	++
junel 1/20	1	++
junel fe 1.5/30	1	++
junel fe 1/20	1	++
junel fe 24	1	++
kalliga	1	++
kurvelo	1	++
KYLEENA	3	++
larin 1.5/30	1	++
larin 1/20	1	++
larin 24 fe	1	++
larin fe 1.5/30	1	++
larin fe 1/20	1	++
lessina	1	++
levonorgestrel-ethinyl estrad oral tablet 0.1-20 mg-mcg, 0.15-30 mg-mcg	1	++
levora 0.15/30 (28)	1	++
LO LOESTRIN FE	3	++
loryna	1	++
lo-zumandimine	1	++
luteru	1	++
lyleq	1	++
lyllana	1	
lyza	1	++
marlissa	1	++
medroxyprogesterone acetate intramuscular	1	++; QL

For more information regarding the tiers and designations in this drug list, please see the *Reading your formulary* section of this booklet.

Drug Name	Drug Tier	Notes
medroxyprogesterone acetate oral	1	
meleya	1	++
microgestin 1.5/30	1	++
microgestin 1/20	1	++
microgestin fe 1.5/30	1	++
microgestin fe 1/20	1	++
mili	1	++
mimvey	1	
MIRENA (52 MG)	3	++
mono-linyah	1	++
MYFEMBREE	2	PA; QL
NATAZIA	2	++
NEXTSTELLIS	3	++
nikki	1	++
nora-be	1	++
norelgestromin-eth estradiol	1	++
norethin ace-eth estrad-fe oral tablet	1	++
norethindrone acetate oral	1	
norethindrone acet-ethinyl est	1	++
norethindrone oral	1	++
norgestimate-eth estradiol oral tablet 0.25-35 mg-mcg	1	++
norgestimate-ethinyl estradiol triphasic	1	++
norlyroc	1	++
ocella	1	++
ORIAHNN	2	PA; QL
portia-28	1	++
PREMARIN ORAL	2	
PREMARIN VAGINAL	2	
PREMPHASE	2	

Drug Name	Drug Tier	Notes
PREMPRO	2	
progesterone intramuscular	1	
progesterone oral	1	
reclipsen	1	++
sharobel	1	++
SKYLA	3	++
SLYND	3	ST; ++
sprintec 28	1	++
sronyx	1	++
syeda	1	++
tarina 24 fe	1	++
tarina fe 1/20 eq	1	++
tri-estarylla	1	++
tri-linyah	1	++
tri-lo-estarylla	1	++
tri-lo-marzia	1	++
tri-lo-mili	1	++
tri-lo-sprintec	1	++
tri-mili	1	++
tri-sprintec	1	++
tri-vylibra	1	++
tri-vylibra lo	1	++
vestura	1	++
vienva	1	++
vylibra	1	++
xulane	1	++
yuvaferm	1	
zafemy	1	++
zumandimine	1	++
<b>Hormonal Agents - Thyroid</b>		
ADTHYZA	3	
ARMOUR THYROID	3	
ERMEZA	3	

For more information regarding the tiers and designations in this drug list, please see the *Reading your formulary* section of this booklet.

Drug Name	Drug Tier	Notes
euthyrox oral tablet 100 mcg, 112 mcg, 125 mcg, 137 mcg, 150 mcg, 175 mcg, 200 mcg, 25 mcg, 50 mcg, 75 mcg, 88 mcg	1	
levo-t	1	
levothyroxine sodium oral tablet	1	
levoxyl	1	
liothyronine sodium oral	1	
methimazole oral	1	
NIVA THYROID	3	
RENTHYROID	3	
SYNTHROID	3	
TIROSINT	3	
TIROSINT-SOL	3	
unithroid	1	
<b>Immunological Agents - Drugs for Immune System Stimulation or Suppression</b>		
ACTEMRA ACTPEN	3	PA; 3P; SP; QL
ACTEMRA INTRAVENOUS	3	PA; 3P; SP
ACTEMRA SUBCUTANEOUS	3	PA; 3P; SP; QL
AMJEVITA	2	PA; SP; QL
AVSOLA	2	PA; SP
azathioprine oral	1	
BENLYSTA	3	PA; SP
BIMZELX	3	PA; SP; QL
BIVIGAM	3	PA; SP
CIMZIA	2	PA; SP; QL
CIMZIA (2 SYRINGE)	2	PA; SP; QL
CIMZIA-STARTER	2	PA; SP; QL

Drug Name	Drug Tier	Notes
COSENTYX (300 MG DOSE)	3	PA; SP; QL
COSENTYX 150 MG/ML INTRAVENOUS SOLUTION 125 MG/5ML	3	PA; SP
COSENTYX 150 MG/ML SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 150 MG/ML, 75 MG/0.5ML	3	PA; SP; QL
COSENTYX SENSOREADY (300 MG)	3	PA; SP; QL
COSENTYX SENSOREADY PEN	3	PA; SP; QL
COSENTYX UNOREADY	3	PA; SP; QL
CUTAQUIG	3	PA; SP
ENBREL	2	PA; SP; QL
ENBREL MINI	2	PA; SP; QL
ENBREL SURECLICK	2	PA; SP; QL
ENTYVIO PEN	3	PA; SP; QL
HAEGARDA	3	PA; SP; QL
HIZENTRA	3	PA; SP
HUMIRA (1 PEN)	3	PA; SP; QL
HUMIRA (2 PEN)	3	PA; SP; QL
HUMIRA (2 SYRINGE)	3	PA; SP; QL
HUMIRA-CD/UC/HS STARTER	3	PA; SP; QL
HUMIRA-PSORIASIS/VEIT STARTER	3	PA; SP; QL
INFLECTRA	2	PA; SP
JYLAMVO	3	PA
leflunomide oral	1	

For more information regarding the tiers and designations in this drug list, please see the *Reading your formulary* section of this booklet.

Drug Name	Drug Tier	Notes
LUPKYNIS	3	PA; SP; QL
methotrexate sodium (pf)	1	
methotrexate sodium injection solution	1	
methotrexate sodium oral	1	
mycophenolate mofetil oral capsule	1	
mycophenolate mofetil oral tablet	1	
mycophenolate sodium	1	
mycophenolic acid	1	
MYHIBBIN	3	
OLUMIANT	3	PA; SP; QL
OMVOH	2	PA; SP; QL
OMVOH (300 MG DOSE)	2	PA; SP; QL
ORENCIA CLICKJECT	3	PA; 3P; SP; QL
ORENCIA INTRAVENOUS	3	PA; 3P; SP
ORENCIA SUBCUTANEOUS	3	PA; 3P; SP; QL
ORLADEYO	3	PA; SP; QL
OTEZLA	2	PA; SP; QL
PANZYGA	3	PA; SP
PRIVIGEN	3	PA; SP
RASUVO	2	PA; QL
RINVOQ	2	PA; SP; QL
RINVOQ LQ	2	PA; SP; QL
RUCONEST	3	PA; SP; QL
SIMPONI	2	PA; SP; QL
SIMPONI ARIA	2	PA; SP
SKYRIZI INTRAVENOUS	2	PA; SP
SKYRIZI PEN	2	PA; SP; QL

Drug Name	Drug Tier	Notes
SKYRIZI SUBCUTANEOUS	2	PA; SP; QL
SOTYKTU	2	PA; SP; QL
STELARA INTRAVENOUS	3	PA; SP
STELARA SUBCUTANEOUS	3	PA; SP; QL
tacrolimus oral	1	
TAKHZYRO	3	PA; SP; QL
TALTZ	2	PA; SP; QL
TREMFYA INTRAVENOUS	2	PA; SP
TREMFYA SUBCUTANEOUS	2	PA; SP; QL
TREXALL	3	
VELSIPITY	2	PA; SP; QL
WEZLANA INTRAVENOUS	2	PA; SP
WEZLANA SUBCUTANEOUS	2	PA; SP; QL
XELJANZ	2	PA; SP; QL
XELJANZ XR	2	PA; SP; QL
XEMBIFY	3	PA; SP
YESINTEK INTRAVENOUS	2	PA; SP
YESINTEK SUBCUTANEOUS	2	PA; SP; QL
<b>Inflammatory Bowel Disease Agents</b>		
APRISO	2	
budesonide oral	1	
CORTIFOAM	3	
DIPENTUM	3	
hydrocortisone (perianal)	1	
mesalamine er oral capsule 0.375 gm	1	

For more information regarding the tiers and designations in this drug list, please see the *Reading your formulary* section of this booklet.

Drug Name	Drug Tier	Notes
mesalamine oral tablet delayed release	1	
PROCTOFOAM HC	2	
procto-med hc	1	
sulfasalazine oral	1	
UCERIS RECTAL	3	
<b>Metabolic Bone Disease Agents - Drugs for Osteoporosis</b>		
alendronate sodium oral tablet 10 mg	1	
alendronate sodium oral tablet 35 mg, 70 mg	1	QL
BONSITY	2	PA; SP
PROLIA	2	PA; SP; QL
teriparatide solution pen-injector 560 mcg/2.24ml subcutaneous	1	PA; SP
TERIPARATIDE SOLUTION PEN-INJECTOR 560 MCG/2.24ML SUBCUTANEOUS	2	PA; Made by Alvogen; SP
TYMLOS	2	PA; SP
<b>Metabolic Bone Disease Agents - Other</b>		
calcitriol oral capsule	1	
RAYALDEE	3	
<b>Miscellaneous Therapeutic Agents</b>		
BD PEN NEEDLE MICRO ULTRAFINE	2	++
BD PEN NEEDLE MINI ULTRAFINE	2	++
BD PEN NEEDLE NANO ULTRAFINE	2	++

Drug Name	Drug Tier	Notes
BD PEN NEEDLE ORIG ULTRAFINE	2	++
BD PEN NEEDLE SHORT ULTRAFINE	2	++
BD ULTRA-FINE PEN NEEDLES	2	++
BYLVAY	3	PA; SP
BYLVAY (PELLETS)	3	PA; SP
DUROLANE	2	PA; ++
DYSPORT	2	PA
ENDARI	3	PA
EUFLEXXA	2	PA; ++
GELSYN-3	2	PA; ++
GIVLAARI	3	PA; SP
ILET CONTACT DETACH 23" 6MM	3	++
ILET INFUSION-INSET 23" 6MM	3	++
ILET INFUSION-INSET 32" 6MM	3	++
ILET STARTER - CONTACT DETACH	3	++
ILET STARTER KIT - INSET 23"	3	++
ILET STARTER KIT - INSET 32"	3	++
KERENDIA ORAL TABLET 10 MG, 20 MG	3	PA; QL
MYOBLOC	2	PA
NOVOFINE PEN NEEDLE	2	++
NOVOFINE PLUS PEN NEEDLE	2	++
OMNIPOD 5 DEXCOM INTRO KIT	2	++
OMNIPOD 5 DEXCOM PODS	2	++

For more information regarding the tiers and designations in this drug list, please see the *Reading your formulary* section of this booklet.

Drug Name	Drug Tier	Notes
OMNIPOD 5 LIBRE PODS	2	++
OMNIPOD DASH INTRO KIT	2	++
OMNIPOD DASH PODS	2	++
TWIIST REFILL KIT	2	++
TWIIST REFILL KIT/INFUSION SET	2	++
TWIIST STARTER KIT	2	++
VEOZAH	3	PA; QL
XEOMIN	2	PA
YORVIPATH	3	PA; SP; QL
<b>Ophthalmic Agents - Drugs for Eye Allergy, Infection and Inflammation</b>		
AZASITE	3	
azelastine hcl ophthalmic	1	
BESIVANCE	3	
ciprofloxacin hcl ophthalmic	1	
erythromycin ophthalmic	1	
EYSUVIS	3	PA; QL
FLAREX	3	
INVELTYS	3	
ketorolac tromethamine ophthalmic	1	
LOTEMAX SM	3	
moxifloxacin hcl ophthalmic	1	
neomycin-polymyxin-dexameth	1	
ofloxacin ophthalmic	1	
prednisolone acetate ophthalmic	1	

Drug Name	Drug Tier	Notes
TOBRADEX ST	3	
tobramycin ophthalmic	1	
tobramycin-dexamethasone	1	
<b>Ophthalmic Agents - Drugs for Glaucoma</b>		
acetazolamide oral	1	
ALPHAGAN P OPHTHALMIC SOLUTION 0.15 %	2	
BETIMOL	3	
brimonidine tartrate ophthalmic	1	
brimonidine tartrate-timolol	1	
dorzolamide hcl-timolol mal	1	
dorzolamide hcl-timolol mal pf	1	
latanoprost ophthalmic	1	
LUMIGAN	2	QL
RHOPRESSA	3	QL
ROCKLATAN	3	QL
SIMBRINZA	2	
timolol maleate (once-daily)	1	
timolol maleate ocludose	1	
timolol maleate ophthalmic solution	1	
timolol maleate pf	1	
ZIOPTAN	3	QL
<b>Ophthalmic Agents - Drugs for Miscellaneous Eye Conditions</b>		
CEQUA	3	PA; QL
cyclosporine ophthalmic	1	PA; QL

For more information regarding the tiers and designations in this drug list, please see the *Reading your formulary* section of this booklet.

Drug Name	Drug Tier	Notes
MIEBO	2	PA; QL
polymyxin b-trimethoprim	1	
RESTASIS	2	PA; QL
RESTASIS MULTIDOSE	2	PA; QL
TYRVAYA	3	PA; QL
VERKAZIA	3	PA; QL
XIIDRA	2	PA; QL
ZYLET	3	
<b>Otic Agents - Drugs for Ear Conditions</b>		
ciprofloxacin-dexamethasone	1	
neomycin-polymyxin-hc otic	1	
ofloxacin otic	1	
<b>Respiratory Tract / Pulmonary Agents - Drugs for Allergies, Cough, Cold</b>		
azelastine hcl nasal	1	QL
azelastine-fluticasone	1	QL
benzonatate	1	
bromphen-pseudoeph-dm	1	
cetirizine hcl oral solution	1	++
cyproheptadine hcl oral tablet	1	
fluticasone propionate nasal	1	++
ipratropium bromide nasal	1	
levocetirizine dihydrochloride oral tablet	1	++
mometasone furoate nasal	1	++; QL

Drug Name	Drug Tier	Notes
OMNARIS	3	++; QL
promethazine-dm	1	
pseudoephedrine-bromphen-dm	1	
QNASL	3	++; QL
QNASL CHILDRENS	3	++; QL
RYALTRIS	3	QL
XHANCE	3	ST; ++; QL
<b>Respiratory Tract / Pulmonary Agents - Drugs for Asthma and Other Lung Conditions</b>		
ADVAIR HFA	1	QL
AIRSUPRA	2	QL
albuterol sulfate hfa	1	QL
albuterol sulfate inhalation	1	QL
ALVESCO	3	ST; QL
ANORO ELLIPTA	2	QL
ARNUITY ELLIPTA	2	QL
ATROVENT HFA	3	QL
AUVI-Q	3	
BREO ELLIPTA	1	QL
breyna	1	QL
BREZTRI AEROSPHERE	2	QL
budesonide inhalation	1	QL
budesonide-formoterol fumarate	1	QL
COMBIVENT RESPIMAT	2	QL
epinephrine injection solution auto-injector	1	
EPIPEN JR 2-PAK	3	ST
FASENRA	2	PA; SP; QL
FASENRA PEN	2	PA; SP; QL

For more information regarding the tiers and designations in this drug list, please see the *Reading your formulary* section of this booklet.

Drug Name	Drug Tier	Notes
FLUTICASONE FUROATE-VILANTEROL	3	PA; QL
FLUTICASONE PROPIONATE HFA	3	ST; QL
FLUTICASONE-SALMETEROL INHALATION AEROSOL 45-21 MCG/ACT, 115-21 MCG/ACT, 230-21 MCG/ACT	3	PA; QL
fluticasone-salmeterol inhalation aerosol powder breath activated 100-50 mcg/act, 250-50 mcg/act, 500-50 mcg/act	1	ST; QL
ipratropium-albuterol	1	QL
montelukast sodium oral tablet	1	
montelukast sodium oral tablet chewable	1	
NEFFY	3	
NUCALA	2	PA; SP; QL
OFEV	3	PA; SP
PERFOROMIST	3	QL
PROAIR RESPICLICK	3	QL
QVAR REDIHALER	2	QL
SEREVENT DISKUS	2	QL
SPIRIVA HANDIHALER	3	ST; QL
SPIRIVA RESPIMAT	2	QL
STIOLTO RESPIMAT	2	QL
STRIVERDI RESPIMAT	2	QL
SYMBICORT	3	ST; QL
TEZSPIRE	2	PA; SP; QL

Drug Name	Drug Tier	Notes
tiotropium bromide monohydrate	1	QL
TRELEGY ELLIPTA	2	QL
VENTOLIN HFA	3	QL
wixela inhub	1	ST; QL
XOLAIR SUBCUTANEOUS SOLUTION AUTO-INJECTOR	2	PA; SP; QL
XOLAIR SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	2	PA; SP; QL
XOLAIR SUBCUTANEOUS SOLUTION RECONSTITUTED	2	PA; SP
XOPENEX HFA	3	QL
YUPELRI	3	QL
<b>Respiratory Tract / Pulmonary Agents - Drugs for Cystic Fibrosis</b>		
BRONCHITOL	3	PA; SP; QL
PULMOZYME	2	PA; SP
TOBI PODHALER	3	SP; QL
TRIKAFTA	3	PA; SP; QL
<b>Respiratory Tract / Pulmonary Agents - Drugs for Pulmonary Hypertension</b>		
ADEMPAS	2	PA; SP; QL
OPSUMIT	2	PA; SP; QL
ORENITRAM	3	PA; SP
ORENITRAM MONTH 1	3	PA; SP; QL
ORENITRAM MONTH 2	3	PA; SP; QL
ORENITRAM MONTH 3	3	PA; SP; QL

For more information regarding the tiers and designations in this drug list, please see the *Reading your formulary* section of this booklet.

Drug Name	Drug Tier	Notes
sildenafil citrate oral suspension reconstituted	1	PA; SP; QL
sildenafil citrate oral tablet 20 mg	1	PA; SP; QL
TADLIQ	3	PA; SP; QL
treprostinil solution 100 mg/20ml injection	1	PA; SP
treprostinil solution 100 mg/20ml injection	1	PA; Made by Sandoz; SP
treprostinil solution 20 mg/20ml injection	1	PA; SP
treprostinil solution 20 mg/20ml injection	1	PA; Made by Sandoz; SP
treprostinil solution 200 mg/20ml injection	1	PA; SP
treprostinil solution 200 mg/20ml injection	1	PA; Made by Sandoz; SP
treprostinil solution 50 mg/20ml injection	1	PA; SP
treprostinil solution 50 mg/20ml injection	1	PA; Made by Sandoz; SP
TYVASO	3	PA; SP; QL
TYVASO DPI INSTITUTIONAL KIT	3	PA; SP; QL
TYVASO DPI MAINTENANCE KIT	3	PA; SP; QL
TYVASO DPI TITRATION KIT	3	PA; SP; QL
TYVASO REFILL KIT	3	PA; SP; QL
TYVASO STARTER KIT	3	PA; SP; QL
<b>Skeletal Muscle Relaxants - Drugs for Muscle Pain and Spasm</b>		
baclofen oral tablet	1	
carisoprodol oral	1	
cyclobenzaprine hcl oral	1	

Drug Name	Drug Tier	Notes
methocarbamol oral	1	
tizanidine hcl oral	1	
<b>Sleep Disorder Agents</b>		
armodafinil	1	PA; QL
BELSOMRA	3	QL
doxepin hcl oral tablet	1	QL
eszopiclone	1	QL
LUMRYZ	3	PA; SP; QL
LUMRYZ STARTER PACK	3	PA; SP; QL
modafinil oral	1	PA; QL
SODIUM OXYBATE	3	PA; Made by Hikma; SP; QL
SUNOSI	2	PA; QL
temazepam	1	QL
WAKIX	3	PA; SP; QL
XYWAV	3	PA; SP; QL
zolpidem tartrate er	1	QL
zolpidem tartrate oral tablet	1	QL

For more information regarding the tiers and designations in this drug list, please see the *Reading your formulary* section of this booklet.

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amlodipine besylate-benazepril		AVONEX PEN .....	16	blisovi 24 fe .....	25
hcl .....	14	AVONEX PREFILLED .....	16	blisovi fe 1.5/30 .....	25
amlodipine besylate-valsartan ..	14	AVSOLA .....	28	blisovi fe 1/20 .....	25

BONSITY.....	30	ciclopirox.....	10	COSENTYX SENSOREADY	
BREO ELLIPTA.....	32	CIMDUO.....	13	(300 MG).....	28
breynd.....	32	CIMZIA.....	28	COSENTYX SENSOREADY	
BREZTRI AEROSPHERE.....	32	CIMZIA (2 SYRINGE).....	28	PEN.....	28
BRILINTA.....	13	CIMZIA-STARTER.....	28	COSENTYX UNOREADY.....	28
brimonidine tartrate.....	31	ciprofloxacin hcl.....	8, 31	COTELLIC.....	11
brimonidine tartrate-timolol.....	31	ciprofloxacin-dexamethasone... ..	32	CREON.....	24
BRIVIACT.....	9	citalopram hydrobromide.....	9	CRESEMBA.....	10
BRIXADI.....	7	claravis.....	17	CREXONT.....	12
BRIXADI (WEEKLY).....	7	clarithromycin.....	8	CUTAQUIG.....	28
bromphen-pseudoeph-dm.....	32	CLENPIQ.....	23	cyanocobalamin.....	22
BRONCHITOL.....	33	CLIMARA PRO.....	25	cyclobenzaprine hcl.....	34
budesonide.....	29, 32	clindacin etz.....	17	cyclosporine.....	31
budesonide-formoterol		clindacin-p.....	17	cyproheptadine hcl.....	32
fumarate.....	32	clindamycin hcl.....	8	cyred eq.....	25
bumetanide.....	14	clindamycin phos (once-daily)... ..	18	dalfampridine er.....	17
buprenorphine hcl.....	7	clindamycin phos (twice-daily).. ..	18	DANZITEN.....	11
buprenorphine hcl-naloxone		clindamycin phosphate.....	8, 18	DAPAGLIFLOZIN PRO-	
hcl.....	7	clindamycin phosphate-		METFORMIN ER.....	19
bupropion hcl.....	9	benzoyl peroxide.....	18	DAPAGLIFLOZIN	
bupropion hcl er (sr).....	9	CLINDESSE.....	8	PROPANEDIOL.....	19
bupropion hcl er (xl).....	9	clobetasol propionate.....	18	deblitane.....	26
buspirone hcl.....	13	clodan.....	18	delyla.....	26
butalbital-apap-caffeine.....	7	clonazepam.....	13	DESCOVY.....	13
BYLVAY.....	30	clonidine hcl.....	15	desmopressin acetate.....	25
BYLVAY (PELLETS).....	30	clonidine hcl er.....	16	desonide.....	18
CABENUVA.....	13	clopidogrel bisulfate.....	13	desvenlafaxine succinate er.....	9
cabergoline.....	24	clotrimazole.....	10	dexamethasone.....	24
CABOMETYX.....	11	clotrimazole-betamethasone.....	10	DEXCOM G6 RECEIVER.....	20
calcitriol.....	30	colchicine.....	11	DEXCOM G6 SENSOR.....	20
CALQUENCE.....	11	colestipol hcl.....	15	DEXCOM G6 TRANSMITTER..	20
camila.....	25	COMBIVENT RESPIMAT.....	32	DEXCOM G7 RECEIVER.....	20
candesartan cilexetil.....	14	constulose.....	23	DEXCOM G7 SENSOR.....	20
capecitabine.....	11	CONTOUR NEXT EZ KIT		dexlansoprazole.....	23
carbidopa-levodopa.....	12	W/DEVICE.....	19	dexmethylphenidate hcl.....	16
carisoprodol.....	34	CONTOUR NEXT GEN		dexmethylphenidate hcl er.....	16
cartia xt.....	14	MONITOR KIT W/DEVICE.....	19	dextroamphetamine sulfate.....	16
carvedilol.....	15	CONTOUR NEXT GEN TEST		diazepam.....	13
cefadroxil.....	8	STRIPS.....	20	diclofenac potassium.....	7
cefdinir.....	8	CONTOUR NEXT MONITOR		diclofenac sodium.....	7
cefepodoxime proxetil.....	8	KIT W/DEVICE.....	19	dicyclomine hcl.....	23
cefuroxime axetil.....	8	CONTOUR NEXT ONE KIT.....	20	DIFICID.....	8
celecoxib.....	7	CONTOUR PLUS BLUE KIT		diltiazem hcl er coated beads... ..	15
cephalexin.....	8	W/DEVICE.....	20	dimethyl fumarate.....	17
CEQUA.....	31	CONTOUR PLUS TEST		DIPENTUM.....	29
CEQR SIMPLICITY 2U 10PK.....	19	STRIP.....	20	diphenoxylate-atropine.....	23
CERDELGA.....	24	CONTOUR TEST STRIPS.....	20	divalproex sodium.....	9
cetirizine hcl.....	32	CORTIFOAM.....	29	divalproex sodium er.....	9
chateal eq.....	25	CORTROPHIN.....	24	DIVIGEL.....	26
chlorhexidine gluconate.....	17	CORTROPHIN GEL.....	24	donepezil hcl.....	9
chlorthalidone.....	15	COSENTYX (300 MG DOSE)... ..	28	DOPTELET.....	14
CIBINQO.....	17	COSENTYX 150 MG/ML.....	28	dorzolamide hcl-timolol mal.....	31
ciclodan.....	10			dorzolamide hcl-timolol mal pf..	31

dotti.....	26	errin.....	26	FLUTICASONE PROPIONATE	
DOVATO.....	13	erythromycin.....	31	HFA.....	33
doxazosin mesylate.....	15	ERZOFRI.....	13	FLUTICASONE-	
doxepin hcl.....	9, 34	escitalopram oxalate.....	9	SALMETEROL.....	33
doxycycline hyclate.....	8	esomeprazole magnesium.....	23	fluticasone-salmeterol.....	33
doxycycline monohydrate.....	8	ESPEROCT.....	14	fluvoxamine maleate.....	10
drospirenone-ethinyl estradiol...	26	estarylla.....	26	folic acid.....	22
DUAVEE.....	26	estradiol.....	26	FOLLISTIM AQ.....	25
duloxetine hcl.....	9	estradiol-norethindrone acet.....	26	FREESTYLE FREEDOM LITE	
DUPIXENT.....	18	eszopiclone.....	34	KIT W/DEVICE.....	20
DUROLANE.....	30	etonogestrel-ethinyl estradiol...	26	FREESTYLE INSULINX TEST	
dutasteride.....	24	EUCRISA.....	18	STRIPS.....	20
DYANAVEL XR.....	16	EUFLEXXA.....	30	FREESTYLE LIBRE 14 DAY	
DYSPORT.....	30	euthyrox.....	28	READER.....	20
EBGLYSS.....	18	EVAMIST.....	26	FREESTYLE LIBRE 14 DAY	
EDARBI.....	15	EVERSENSE 365		SENSOR.....	20
EDARBYCLOR.....	15	SENSOR/HOLDER.....	20	FREESTYLE LIBRE 2 PLUS	
ELESTRIN.....	26	EVERSENSE 365 SMART		SENSOR.....	20
eletriptan hydrobromide.....	11	TRANSMIT.....	20	FREESTYLE LIBRE 2	
ELIQUIS.....	8	EVERSENSE		READER.....	20
ELIQUIS DVT/PE STARTER		SENSOR/HOLDER.....	20	FREESTYLE LIBRE 2	
PACK.....	8	EVERSENSE SMART		SENSOR.....	20
ELOCTATE.....	14	TRANSMITTER.....	20	FREESTYLE LIBRE 3 PLUS	
eluryng.....	26	EYSUVIS.....	31	SENSOR.....	20
ELYXYB.....	7	ezetimibe.....	15	FREESTYLE LIBRE 3	
EMGALITY.....	11	FABHALTA.....	14	READER.....	20
EMPAVELI.....	14	FABRAZYME.....	24	FREESTYLE LIBRE 3	
emtricitabine-tenofovir df.....	13	falmina.....	26	SENSOR.....	20
EMVERM.....	12	famotidine.....	23	FREESTYLE LITE TEST	
emzahn.....	26	FARXIGA.....	19	STRIPS.....	20
enalapril maleate.....	15	FASENRA.....	32	FREESTYLE PRECISION	
ENBREL.....	28	FASENRA PEN.....	32	NEO SYSTEM.....	20
ENBREL MINI.....	28	feirza 1.5/30.....	26	FREESTYLE PRECISION	
ENBREL SURECLICK.....	28	feirza 1/20.....	26	NEO TEST STRIPS.....	20
ENDARI.....	30	fenofibrate.....	15	FREESTYLE TEST STRIPS.....	20
endocet.....	7	fenofibrate micronized.....	15	FUROSCIX.....	15
ENDOMETRIN.....	26	FIASP.....	21	furosemide.....	15
enilloring.....	26	FIASP FLEXTOUCH.....	21	FYCOMPA.....	9
ENLITE GLUCOSE SENSOR...	20	FIASP PENFILL.....	21	gabapentin.....	9
enoxaparin sodium.....	8	FIASP PUMPCART.....	21	gallifrey.....	26
enskyce.....	26	FINACEA.....	18	ganirelix acetate.....	25
ENSTILAR.....	18	finasteride.....	18, 24	gavilyte-c.....	23
ENTRESTO.....	15	FLAREX.....	31	gavilyte-g.....	23
ENTYVIO PEN.....	28	flecainide acetate.....	15	gavilyte-n with flavor pack.....	23
EPCLUSA.....	13	fluconazole.....	10	GAVRETO.....	11
EPIDIOLEX.....	9	fludrocortisone acetate.....	24	GELSYN-3.....	30
EPIDUO FORTE.....	18	fluocinonide.....	18	gemfibrozil.....	15
epinephrine.....	32	fluorouracil.....	18	GIVLAARI.....	30
EPIPEN JR 2-PAK.....	32	fluoxetine hcl.....	9, 10	glimepiride.....	19
ergocalciferol.....	22	FLUTICASONE FUROATE-		glipizide er.....	19
ERIVEDGE.....	11	VILANTEROL.....	33	glipizide ir.....	19
ERLEADA.....	11	fluticasone propionate.....	32	GLUCAGON EMERGENCY	
ERMEZA.....	27			KIT.....	21

glyburide.....	19	HUMULIN R VIAL.....	21	INSULIN ASPART FLEXPEN... 21
glycopyrrolate.....	23	hydralazine hcl.....	15	INSULIN DEGLUDEC
GLYXAMBI.....	19	hydrochlorothiazide.....	15	FLEXTOUCH.....
GRALISE.....	17	hydrocodone-acetaminophen.....	7	INSULIN GLARGINE MAX
guanfacine hcl.....	15	hydrocortisone.....	18, 24	SOLOSTAR.....
guanfacine hcl er.....	16	hydrocortisone (perianal).....	29	INSULIN GLARGINE
GUARDIAN 4 GLUCOSE		hydromorphone hcl.....	7	SOLOSTAR.....
SENSOR.....	20	hydroxychloroquine sulfate.....	12	INSULIN LISPRO.....
GUARDIAN 4 TRANSMITTER.....	20	hydroxyzine hcl.....	13	INSULIN LISPRO (1 UNIT
GUARDIAN LINK 3		hydroxyzine pamoate.....	14	DIAL).....
TRANSMITTER.....	20	HYFTOR.....	18	INSULIN LISPRO JUNIOR
GUARDIAN REAL-TIME		HYSINGLA ER.....	7	KWIKPEN.....
CHARGER.....	20	ibuprofen.....	7	INSULIN LISPRO PROT &
GUARDIAN REAL-TIME		ICLUSIG.....	11	LISPRO.....
REPLACE PED.....	20	icosapent ethyl.....	15	INVEGA HAFYERA.....
GUARDIAN REAL-TIME TEST		IDELVION.....	14	INVEGA SUSTENNA.....
PLUG.....	20	IDHIFA.....	11	INVEGA TRINZA.....
GUARDIAN SENSOR 3.....	20	ILET CONTACT DETACH 23"		INVELTYS.....
GYNAZOLE-1.....	10	6MM.....	30	ipratropium bromide.....
HAEGARDA.....	28	ILET INFUSION-INSET 23"		ipratropium-albuterol.....
hailey 1.5/30.....	26	6MM.....	30	IQIRVO.....
hailey 24 fe.....	26	ILET INFUSION-INSET 32"		irbesartan.....
hailey fe 1.5/30.....	26	6MM.....	30	irbesartan-hydrochlorothiazide..
hailey fe 1/20.....	26	ILET STARTER - CONTACT		isibloom.....
haloette.....	26	DETACH.....	30	isosorbide mononitrate er.....
HARVONI.....	13	ILET STARTER KIT - INSET		isotretinoin.....
heather.....	26	23".....	30	jantoven.....
HEMANGEOL.....	15	ILET STARTER KIT - INSET		JANUMET.....
HIZENTRA.....	28	32".....	30	JANUMET XR.....
HORIZANT.....	17	IMBRUVICA.....	11	JANUVIA.....
HUMALOG.....	21	imiquimod.....	18	JARDIANCE.....
HUMALOG KWIKPEN.....	21	imiquimod pump.....	18	jasmiel.....
HUMALOG MIX 50/50		IMKELDI.....	11	jencycla.....
KWIKPEN.....	21	IMVEXXY MAINTENANCE		JENTADUETO.....
HUMALOG MIX 75/25		PACK.....	26	JENTADUETO XR.....
KWIKPEN.....	21	IMVEXXY STARTER PACK.....	26	JIVI.....
HUMALOG MIX 75/25 VIAL.....	21	incassia.....	26	JORNAY PM.....
HUMALOG TEMPO PEN.....	21	indomethacin.....	7	JOURNAVX.....
HUMALOG U-100 JUNIOR		INFLECTRA.....	28	JUBLIA.....
KWIKPEN.....	21	INGREZZA.....	17	juleber.....
HUMIRA (1 PEN).....	28	INPEN 100-BLUE-LILLY-		JULUCA.....
HUMIRA (2 PEN).....	28	HUMALOG.....	20	junel 1.5/30.....
HUMIRA (2 SYRINGE).....	28	INPEN 100-BLUE-NOVOLOG-		junel 1/20.....
HUMIRA-CD/UC/HS		FIASP.....	20	junel fe 1.5/30.....
STARTER.....	28	INPEN 100-GREY-LILLY-		junel fe 1/20.....
HUMIRA-PSORIASIS/UVEIT		HUMALOG.....	20	junel fe 24.....
STARTER.....	28	INPEN 100-GREY-		JYLAMVO.....
HUMULIN 70/30 KWIKPEN.....	21	NOVOLOG-FIASP.....	21	JYNARQUE.....
HUMULIN 70/30 VIAL.....	21	INPEN 100-PINK-LILLY-		kalliga.....
HUMULIN N KWIKPEN.....	21	HUMALOG.....	21	KANJINTI.....
HUMULIN N VIAL.....	21	INPEN 100-PINK-NOVOLOG-		KERENDIA.....
HUMULIN R U-500 KWIKPEN.....	21	FIASP.....	21	KESIMPTA.....
HUMULIN R U-500 VIAL.....	21	INSULIN ASPART.....	21	ketoconazole.....

ketorolac tromethamine.....	7, 31	lisinopril.....	15	meleya.....	27
KISQALI (200 MG DOSE).....	11	lisinopril-hydrochlorothiazide.....	15	meloxicam.....	7
KISQALI (400 MG DOSE).....	11	LITFULO.....	18	memantine hcl.....	9
KISQALI (600 MG DOSE).....	12	lithium carbonate.....	14	MENOPUR.....	25
klayesta.....	10	lithium carbonate er.....	14	mesalamine.....	30
KLISYRI (250 MG).....	18	LIVALO.....	15	mesalamine er oral capsule	
KLISYRI (350 MG).....	18	LIVDELZI.....	23	0.375 gm.....	29
klor-con.....	22	LO LOESTRIN FE.....	26	metformin hcl er.....	19
klor-con 10.....	22	LOKELMA.....	22	metformin hcl er (mod).....	19
klor-con m10.....	22	loperamide hcl.....	23	metformin hcl er (osm).....	19
klor-con m15.....	22	lorazepam.....	14	metformin hcl ir.....	19
klor-con m20.....	22	loryna.....	26	methimazole.....	28
KLOXXADO.....	8	losartan potassium.....	15	methocarbamol.....	34
KOATE.....	14	losartan potassium-hctz.....	15	methotrexate sodium.....	29
KOGENATE FS.....	14	LOTEMAX SM.....	31	methotrexate sodium (pf).....	29
KOSELUGO.....	12	lovastatin.....	15	methylphenidate hcl.....	16
KOVALTRY.....	14	lo-zumandimine.....	26	methylphenidate hcl er.....	16
kurvelo.....	26	lubiprostone.....	23	methylphenidate hcl er (cd).....	16
KYLEENA.....	26	LUMAKRAS.....	12	methylphenidate hcl er (la).....	16
labetalol hcl.....	15	LUMIGAN.....	31	methylphenidate hcl er (osm)....	16
lacosamide.....	9	LUMRYZ.....	34	methylphenidate hcl er (xr).....	16
lactulose.....	23	LUMRYZ STARTER PACK.....	34	methylprednisolone.....	24
lamotrigine.....	9	LUPKYNIS.....	29	metoclopramide hcl.....	10
lamotrigine er.....	9	LUPRON DEPOT (1-MONTH)..	25	metoprolol succinate er.....	15
lansoprazole.....	23	LUPRON DEPOT (3-MONTH)..	25	metoprolol tartrate.....	15
LANTUS SOLOSTAR.....	22	LUPRON DEPOT (4-MONTH)		metronidazole.....	8, 18
LANTUS U-100 VIAL.....	22	INTRAMUSCULAR KIT 30MG..	25	microgestin 1.5/30.....	27
larin 1.5/30.....	26	LUPRON DEPOT (6-MONTH)		microgestin 1/20.....	27
larin 1/20.....	26	INTRAMUSCULAR KIT 45MG..	25	microgestin fe 1.5/30.....	27
larin 24 fe.....	26	LUPRON DEPOT-PED (1-		microgestin fe 1/20.....	27
larin fe 1.5/30.....	26	MONTH).....	25	midodrine hcl.....	15
larin fe 1/20.....	26	LUPRON DEPOT-PED (3-		MIEBO.....	32
latanoprost.....	31	MONTH).....	25	mili.....	27
leflunomide.....	28	LUPRON DEPOT-PED (6-		mimvey.....	27
lenalidomide.....	12	MONTH).....	25	minocycline hcl.....	8
lessina.....	26	lurasidone hcl.....	13	minoxidil.....	15
letrozole.....	12	lutera.....	26	mirabegron er.....	24
levetiracetam.....	9	LYBALVI.....	13	MIRENA (52 MG).....	27
levetiracetam er.....	9	lyleq.....	26	mirtazapine.....	10
levocetirizine dihydrochloride....	32	lyllana.....	26	MIRVASO.....	18
levofloxacin.....	8	LYNPARZA.....	12	misoprostol.....	23
levonorgestrel-ethinyl estrad.....	26	LYUMJEV KWIKPEN.....	22	modafinil.....	34
levora 0.15/30 (28).....	26	LYUMJEV VIAL.....	22	mometasone furoate.....	18, 32
levo-t.....	28	lyza.....	26	mono-linyah.....	27
levothyroxine sodium.....	28	marlissa.....	26	montelukast sodium.....	33
levoxyl.....	28	MAVENCLAD.....	17	morphine sulfate er.....	7
lidocaine.....	7	MAVYRET.....	13	MOTPOLY XR.....	9
lidocaine hcl.....	17	MAYZENT.....	17	MOUNJARO.....	19
lidocaine viscous hcl.....	17	MAYZENT STARTER PACK....	17	MOVANTIK.....	23
lidocaine-prilocaine.....	7	meclizine hcl.....	10	moxifloxacin hcl.....	8, 31
LINZESS.....	23	medroxyprogesterone acetate		MULTAQ.....	15
liothyronine sodium.....	28	.....	26, 27	mupirocin.....	8
lisdexamfetamine dimesylate....	16	MEKINIST.....	12	MVASI.....	12

mycophenolate mofetil.....	29	NOVOFINE PEN NEEDLE.....	30	ondansetron hcl.....	10
mycophenolate sodium.....	29	NOVOFINE PLUS PEN		ondansetron hcl +rfid.....	10
mycophenolic acid.....	29	NEEDLE.....	30	ondansetron odt.....	10
MYDAYIS.....	16	NOVOLIN 70/30 FLEXPEN.....	22	ONEXTON.....	18
MYFEMBREE.....	27	NOVOLIN 70/30 FLEXPEN		ONGENTYS.....	12
MYHIBBIN.....	29	RELION.....	22	OPSUMIT.....	33
MYOBLOC.....	30	NOVOLIN 70/30 VIAL.....	22	OPVEE.....	8
MYRBETRIQ.....	24	NOVOLIN N FLEXPEN.....	22	OPZELURA.....	18
na sulfate-k sulfate-mg sulf.....	23	NOVOLIN N FLEXPEN		ORENCIA.....	29
nabumetone.....	7	RELION.....	22	ORENCIA CLICKJECT.....	29
nadolol.....	15	NOVOLIN N VIAL.....	22	ORENITRAM.....	33
naltrexone hcl.....	8	NOVOLIN R FLEXPEN.....	22	ORENITRAM MONTH 1.....	33
NAPRELAN.....	7	NOVOLIN R FLEXPEN		ORENITRAM MONTH 2.....	33
naproxen.....	7	RELION.....	22	ORENITRAM MONTH 3.....	33
naratriptan hcl.....	11	NOVOLIN R VIAL.....	22	ORFADIN.....	24
NASCOBAL.....	22	NOVOLOG FLEXPEN.....	22	ORGOVYX.....	12
NATAZIA.....	27	NOVOLOG MIX 70/30		ORIAHNN.....	27
NAYZILAM.....	9	FLEXPEN.....	22	ORLISSA.....	25
nebivolol hcl.....	15	NOVOLOG MIX 70/30 VIAL.....	22	ORLADEYO.....	29
NEFFY.....	33	NOVOLOG PENFILL.....	22	oseltamivir phosphate.....	13
NEMLUVIO.....	18	NOVOLOG U-100 VIAL.....	22	OSPHERA.....	25
neomycin-polymyxin-dexameth	31	NUBEQA.....	12	OTEZLA.....	29
neomycin-polymyxin-hc.....	32	NUCALA.....	33	OVIDREL.....	25
NEULASTA.....	14	NUCYNTA.....	7	oxcarbazepine.....	9
NEULASTA ONPRO.....	14	NURTEC.....	11	OXLUMO.....	24
NEUPRO.....	12	NUTROPIN AQ NUSPIN 10.....	25	oxybutynin chloride.....	24
NEXLETOL.....	15	NUTROPIN AQ NUSPIN 20.....	25	oxybutynin chloride er.....	24
NEXLIZET.....	15	NUTROPIN AQ NUSPIN 5.....	25	oxycodone hcl.....	7
NEXTSTELLIS.....	27	NUWIQ.....	14	oxycodone-acetaminophen.....	7
NGENLA.....	25	NUZYRA.....	8	OXYCONTIN.....	7
nifedipine er.....	15	nyamyc.....	10	OZEMPIC.....	19
nifedipine er osmotic release....	15	nystatin.....	10	PANCREAZE.....	24
nikki.....	27	nystop.....	10	PANRETIN.....	12
nitrofurantoin macrocrystal.....	8	ocella.....	27	pantoprazole sodium.....	23
nitrofurantoin monohydrate		ODOMZO.....	12	PANZYGA.....	29
macrocrystals.....	8	OFEV.....	33	paroxetine hcl.....	10
nitroglycerin.....	15	ofloxacin.....	31, 32	PAXLOVID (150/100).....	13
NIVA THYROID.....	28	olanzapine.....	13	PAXLOVID (300/100 &	
NIVESTYM.....	14	olmesartan medoxomil.....	15	150/100).....	13
nora-be.....	27	olmesartan medoxomil-hctz.....	15	PAXLOVID (300/100).....	13
NORDITROPIN FLEXPRO.....	25	OLUMIANT.....	29	peg 3350-kcl-na bicarb-nacl.....	23
norelgestromin-eth estradiol.....	27	omega-3-acid ethyl esters.....	15	peg-3350/electrolytes.....	23
norethin ace-eth estrad-fe.....	27	omeprazole.....	23	penicillin v potassium.....	8
norethindrone.....	27	OMNARIS.....	32	PERFOROMIST.....	33
norethindrone acetate.....	27	OMNIPOD 5 DEXCOM INTRO		perio gard.....	17
norethindrone acet-ethinyl est...27		KIT.....	30	PERTZYE.....	24
norgestimate-eth estradiol.....	27	OMNIPOD 5 DEXCOM PODS..	30	PHEBURANE.....	24
norgestimate-ethinyl estradiol		OMNIPOD 5 LIBRE PODS.....	31	phenazopyridine hcl.....	24
triphasic.....	27	OMNIPOD DASH INTRO KIT...31		phentermine hcl.....	17
NORLIQVA.....	15	OMNIPOD DASH PODS.....	31	PHESGO.....	12
norlyroc.....	27	OMNITROPE.....	25	pimecrolimus.....	18
nortriptyline hcl.....	10	OMVOH.....	29	pioglitazone hcl.....	19
NOVOEIGHT.....	14	OMVOH (300 MG DOSE).....	29	PIQRAY.....	12

polymyxin b-trimethoprim.....	32	ramipril.....	15	sharobel.....	27
POMALYST.....	12	ranolazine er.....	15	sildenafil citrate.....	24, 34
portia-28.....	27	RASUVO.....	29	SIMBRINZA.....	31
potassium chloride crys er.....	22	RAYALDEE.....	30	SIMPLERA SENSOR.....	21
potassium chloride er.....	22	REBIF.....	17	SIMPLERA SYNC SENSOR.....	21
potassium citrate er.....	22	REBIF REBIDOSE.....	17	SIMPLERA SYSTEM.....	21
pramipexole dihydrochloride.....	12	REBIF REBIDOSE.....		SIMPONI.....	29
prasugrel hcl.....	13	TITRATION PACK.....	17	SIMPONI ARIA.....	29
pravastatin sodium.....	15	REBIF TITRATION PACK.....	17	simvastatin.....	16
prazosin hcl.....	15	REBINYN.....	14	SKYLA.....	27
PRECISION XTRA BLOOD		REBYOTA.....	23	SKYRIZI.....	29
GLUCOSE STRIPS.....	21	reclipsen.....	27	SKYRIZI PEN.....	29
prednisolone.....	24	RECOMBINATE.....	14	SKYTROFA.....	25
prednisolone acetate.....	31	RELEXXII.....	16	SLYND.....	27
prednisolone sodium		RENTHYROID.....	28	SOAAZ.....	16
phosphate.....	24	REPATHA.....	15	SODIUM OXYBATE.....	34
prednisone.....	24	REPATHA PUSHTRONEX		SOFDRA.....	19
pregabalin.....	17	SYSTEM.....	16	solifenacin succinate.....	24
PREMARIN.....	27	REPATHA SURECLICK.....	16	SOLIQUA.....	19
PREMPHASE.....	27	RESTASIS.....	32	SOLIRIS.....	14
PREMPRO.....	27	RESTASIS MULTIDOSE.....	32	SOMATULINE DEPOT.....	25
PREZCOBIX.....	13	RETACRIT.....	14	SOOLANTRA.....	19
primidone.....	9	RETEVMO.....	12	SOTYKTU.....	29
PRIVIGEN.....	29	RETIN-A MICRO PUMP.....	18	SPIRIVA HANDIHALER.....	33
PROAIR RESPICLICK.....	33	REVLIMID.....	12	SPIRIVA RESPIMAT.....	33
prochlorperazine maleate.....	10	REXTOVY.....	8	spironolactone.....	16
PROCRIT.....	14	REXULTI.....	13	SPRAVATO (56 MG DOSE).....	10
PROCTOFOAM HC.....	30	REZVOGLAR KWIKPEN.....	22	SPRAVATO (84 MG DOSE).....	10
procto-med hc.....	30	RHOPRESSA.....	31	sprintec 28.....	27
progesterone.....	27	RINVOQ.....	29	sronyx.....	27
PROLIA.....	30	RINVOQ LQ.....	29	STELARA.....	29
PROMACTA.....	14	risperidone.....	13	STIOLTO RESPIMAT.....	33
promethazine hcl.....	10	rizatriptan benzoate.....	11	STIVARGA.....	12
promethazine-dm.....	32	ROCKLATAN.....	31	STRENSIQ.....	24
propranolol hcl.....	15	ropinirole hcl.....	12	STRIVERDI RESPIMAT.....	33
propranolol hcl er.....	15	rosuvastatin calcium.....	16	SUBLOCADE.....	8
pseudoephedrine-bromphen-		roweepra.....	9	subvenite.....	9
dm.....	32	ROXYBOND.....	7	sucralfate.....	23
PULMOZYME.....	33	ROZLYTREK.....	12	SUFLAVE.....	23
PYLERA.....	23	RUCONEST.....	29	sulfamethoxazole-trimethoprim... 8	
QBREXZA.....	18	RUXIENCE.....	12	sulfasalazine.....	30
QELBREE.....	16	RYALTRIS.....	32	sulfatrim pediatric.....	8
QNASL.....	32	RYBELSUS.....	19	sumatriptan succinate.....	11
QNASL CHILDRENS.....	32	RYDAPT.....	12	SUNOSI.....	34
QSYMIA.....	17	RYKINDO.....	13	SUPREP BOWEL PREP KIT... 23	
quetiapine fumarate.....	13	RYTARY.....	12	SUTAB.....	23
quetiapine fumarate er.....	13	SANTYL.....	18	syeda.....	27
QULIPTA.....	11	SAXENDA.....	17	SYMBICORT.....	33
QVAR REDIHALER.....	33	SCEMBLIX.....	12	SYMFI.....	13
rabeprazole sodium.....	23	scopolamine.....	10	SYMPAZAN.....	9
RADICAVA ORS.....	17	SEREVENT DISKUS.....	33	SYMPROIC.....	23
RADICAVA ORS STARTER		sertraline hcl.....	10	SYMTUZA.....	13
KIT.....	17	SEYSARA.....	8	SYNJARDY.....	19

SYNJARDY XR.....	19	tramadol hcl ir.....	7	unithroid.....	28
SYNTHROID.....	28	tranexamic acid.....	14	UZEDY.....	13
TABRECTA.....	12	TRAZIMERA.....	12	valacyclovir hcl.....	13
TACLONEX.....	19	trazodone hcl.....	10	valsartan.....	16
tacrolimus.....	19, 29	TRELEGY ELLIPTA.....	33	valsartan-hydrochlorothiazide...	16
tadalafil.....	24	TREMFYA.....	29	VALTOCO 10 MG DOSE.....	9
TADLIQ.....	34	treprostinil.....	34	VALTOCO 15 MG DOSE.....	9
TAFINLAR.....	12	TRESIBA.....	22	VALTOCO 20 MG DOSE.....	9
TAGRISSE.....	12	TRESIBA FLEXTOUCH.....	22	VALTOCO 5 MG DOSE.....	9
TAKHZYRO.....	29	tretinoin.....	19	VANRAFIA.....	24
TALICIA.....	23	TREXALL.....	29	varenicline tartrate.....	8
TALTZ.....	29	triamcinolone acetonide.....	19	VARUBI (180 MG DOSE).....	10
tamoxifen citrate.....	12	triamcinolone in absorbbase.....	19	VASCEPA.....	16
tamsulosin hcl.....	24	triamterene-hctz.....	16	VELSIPITY.....	29
tarina 24 fe.....	27	triazolam.....	14	VELTASSA.....	22
tarina fe 1/20 eq.....	27	triderm.....	19	venlafaxine hcl.....	10
TASIGNA.....	12	tri-estarylla.....	27	venlafaxine hcl er.....	10
TAVALISSE.....	13	TRIJARDY XR.....	19	VENTOLIN HFA.....	33
TEGLUTIK.....	17	TRIKAFTA.....	33	VEOZAH.....	31
TEKTURNA.....	16	tri-linyah.....	27	verapamil hcl er.....	16
telmisartan.....	16	tri-lo-estarylla.....	27	VERKAZIA.....	32
temazepam.....	34	tri-lo-marzia.....	27	VERQUVO.....	16
terbinafine hcl.....	10	tri-lo-mili.....	27	VERZENIO.....	12
terconazole.....	11	tri-lo-sprintec.....	27	vestura.....	27
teriparatide.....	30	tri-mili.....	27	VIBERZI.....	23
TERIPARATIDE.....	30	TRINTELLIX.....	10	vienva.....	27
testosterone.....	24	TRIPTODUR.....	25	vilazodone hcl.....	10
testosterone cypionate.....	24	tri-sprintec.....	27	vitamin d (ergocalciferol).....	23
TEZSPIRE.....	33	TRIUMEQ.....	13	VITRAKVI.....	12
THIOLA.....	24	tri-vylibra.....	27	VIVJOA.....	11
THIOLA EC.....	24	tri-vylibra lo.....	27	VOQUEZNA DUAL PAK.....	23
timolol maleate.....	31	TRULICITY.....	19	VOQUEZNA TRIPLE PAK.....	23
timolol maleate (once-daily).....	31	TRUQAP.....	12	VOSEVI.....	13
timolol maleate ocudose.....	31	TWIIST REFILL KIT.....	31	VOYDEYA.....	14
timolol maleate pf.....	31	TWIIST REFILL		VRAYLAR.....	13
tiotropium bromide		KIT/INFUSION SET.....	31	VTAMA.....	19
monohydrate.....	33	TWIIST STARTER KIT.....	31	VUMERITY.....	17
TIROSINT.....	28	TWYNEO.....	19	VYLEESI.....	17
TIROSINT-SOL.....	28	TYMLOS.....	30	vylibra.....	27
tizanidine hcl.....	34	TYRVAYA.....	32	VYNDAMAX.....	16
TOBI PODHALER.....	33	TYVASO.....	34	VYNDAQEL.....	16
TOBRADEX ST.....	31	TYVASO DPI INSTITUTIONAL		VYVANSE.....	16
tobramycin.....	31	KIT.....	34	VYVGART.....	11
tobramycin-dexamethasone.....	31	TYVASO DPI MAINTENANCE		VYVGART HYTRULO.....	11
tolterodine tartrate er.....	24	KIT.....	34	WAINUA.....	17
tolvaptan.....	22	TYVASO DPI TITRATION KIT..	34	WAKIX.....	34
TOPAMAX.....	9	TYVASO REFILL KIT.....	34	warfarin sodium.....	8
TOPAMAX SPRINKLE.....	9	TYVASO STARTER KIT.....	34	WEGOVI.....	17
topiramate.....	9	UBRELVY.....	11	WEZLANA.....	29
torse mide.....	16	UCERIS.....	30	WILATE.....	14
TOUJEO MAX SOLOSTAR.....	22	UDENYCA.....	14	WINLEVI.....	19
TOUJEO SOLOSTAR.....	22	UDENYCA ONBODY.....	14	wixela inhub.....	33
TRADJENTA.....	19	ULTOMIRIS.....	14	WYNZORA.....	19

XACIATO.....	8	zumandimine.....	27
XARELTO.....	8	ZURZUVAE.....	10
XARELTO STARTER PACK.....	8	ZYLET.....	32
XCOPRI.....	9		
XELJANZ.....	29		
XELJANZ XR.....	29		
XEMBIFY.....	29		
XEOMIN.....	31		
XHANCE.....	32		
XIGDUO XR.....	19		
XIIDRA.....	32		
XOFLUZA (40 MG DOSE).....	13		
XOFLUZA (80 MG DOSE).....	13		
XOLAIR.....	33		
XOPENEX HFA.....	33		
XTAMPZA ER.....	7		
XTANDI.....	12		
xulane.....	27		
XYNTHA.....	14		
XYNTHA SOLOFUSE.....	14		
XYOSTED.....	24		
XYWAV.....	34		
YCANTH.....	19		
YESINTEK.....	29		
YORVIPATH.....	31		
YUPELRI.....	33		
yuvafem.....	27		
zafemy.....	27		
ZARXIO.....	14		
ZAVZPRET.....	11		
ZEGALOGUE.....	21		
ZEJULA.....	12		
ZELBORAF.....	12		
zenatane.....	19		
ZENPEP.....	24		
ZEPBOUND.....	17		
ZEPOSIA.....	17		
ZEPOSIA 7-DAY STARTER PACK.....	17		
ZEPOSIA STARTER KIT.....	17		
ZILXI.....	19		
ZIMHI.....	8		
ZIOPTAN.....	31		
ziprasidone hcl.....	13		
ZIRABEV.....	12		
ZOLGENSMA.....	24		
zolpidem tartrate.....	34		
zolpidem tartrate er.....	34		
ZONEGRAN.....	9		
zonisamide.....	9		
ZORYVE.....	19		
ZTLIDO.....	7		
ZUBSOLV.....	8		

**NOTICE OF AVAILABILITY OF LANGUAGE ASSISTANCE SERVICES AND ALTERNATE FORMATS**

**ATTENTION:** If you speak **English**, free language assistance services and free communications in other formats, such as large print, are available to you. Call the toll-free number on your member identification card.

**ATENCIÓN:** Si habla **español (Spanish)**, hay servicios de asistencia de idiomas y comunicaciones en otros formatos como letra grande, sin cargo, a su disposición. Llame al número gratuito que figura en su tarjeta de identificación de miembro.

**ملاحظة:** إذا كنت تتحدث اللغة العربية **(Arabic)**، ستتوفر لك خدمات المساعدة اللغوية المجانية والمراسلات المجانية بتنسيقات أخرى، مثل الطباعة بأحرف كبيرة. اتصل بالرقم المجاني المدون على بطاقة تعريف العضو خاصتك.

**ចំណាំ:** ប្រសិនបើអ្នកនិយាយភាសាខ្មែរ **(Khmer)** សេវាជំនួយភាសាភាគតិចតិច និងការទំនាក់ទំនង ភាគតិចតិចក្នុងទម្រង់ផ្សេងទៀត ដូចជាពុម្ពអក្សរធំ មានសម្រាប់អ្នក។ ទូរសព្ទមកលេខភាគតិចតិចនៅលើប័ណ្ណសម្គាល់សមាជិករបស់អ្នក។

**请注意：**如果您说中文 **(Chinese)**，我们可以为您提供免费语言协助服务以及大字印刷本等其他格式的免费通信。请致电您的会员身份卡上的免付费电话号码。

**請注意：**如果您說中文 **(Chinese)**，您可以獲得免費語言協助服務和大字體等其他格式的免費通訊。請致電您的會員身份卡上的免付費電話號碼。

**ATTENTION :** Si vous parlez **français (French)**, des services d'assistance linguistique et des communications dans d'autres formats, notamment en gros caractères, sont mis à votre disposition gratuitement. Appelez le numéro gratuit figurant sur votre carte de membre.

**ATANSYON:** Si w pale **Kreyòl Ayisyen (Haitian Creole)**, gen sèvis lang gratis ak kominikasyon nan lòt fòm lo disponib, tankou sa ki enprime ak gwo lèt. Rele nimewo gratis ki sou kat idantifikasyon manm ou an.

**ACHTUNG:** Falls Sie **Deutsch (German)** sprechen, stehen Ihnen kostenlose Sprachassistentendienste und kostenlose Kommunikation in anderen Formaten, wie zum große Schrift, zur Verfügung. Rufen Sie die gebührenfreie Nummer auf Ihrer Mitgliedskarte an.

**Hindi:** यदि आप हिंदी **(Hindi)** बोलते हैं, तो आपके लिए मुफ्त भाषा सहायता सेवाएँ और अन्य प्रारूपों में मुफ्त संचार, जैसे की बड़े प्रिंट, उपलब्ध हैं। अपने सदस्य पहचान पत्र पर दिए गए टोल-फ्री नंबर पर कॉल करें।

**LUS TSEEM CEEB:** Yog tias koj hais **lus Hmoob (Hmong)**, cov kev pab cuam lus pub dawb thiab kev sib txuas lus dawb hauv lwm hom ntawv, xws li luam ntawv loj, muaj rau koj. Thov hu rau tus xov tooj hu dawb ntawm koj daim npav ID.

**PANANGIKASO:** No agsasaoka iti **Ilocano (Ilocano)**, magun-odmo dagiti libre a serbisio ti tulong iti pagsasao ken libre a komunikasion iti dadduma a pormat, kas iti dadakkel a letra. Tawagan ti awan-bayadna a numero a masarakan iti kard a pakabigbigam kas miembro.

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**BAA'ÁKONÍNÍZIN:** Diné (**Navajo**) saad bee yáníłtí'go, t'áá jíik'eh saad bee áka'e'eyeed bee áka'anída'wo'í dóó bee ahił hane'í nááná łahgo át'éego bee hadadilyaa, díí nitsaago bee ak'eda'ashchínígíí, náhóló. Bee atah nil'íní ninaaltsoos nítł'izí bee nééhoziní baąh t'áá jíik'eh bee hane'í námboo bee hodíłnih

**توجه:** اگر به زبان فارسی (**Farsi**) صحبت می‌کنید، خدمات رایگان کمک زبانی و ارتباطات رایگان در قالب‌های دیگر، مانند چاپ بزرگ، در دسترس شما هستند. با شماره رایگان مندرج روی کارت شناسایی عضویت‌تان تماس بگیرید.

**UWAGA:** Dla osób mówiących po **polsku (Polish)** dostępne są bezpłatne usługi pomocy językowej i bezpłatne komunikaty w innych formatach, takich jak duży druk. Prosimy zadzwonić pod bezpłatny numer podany na karcie identyfikacyjnej.

**ATENÇÃO:** se você fala **português (Portuguese)**, tem à sua disposição serviços gratuitos de assistência linguística e comunicações gratuitas em outros formatos, como caracteres grandes. Ligue para o número gratuito que se encontra no seu cartão de identificação de membro.

**ВНИМАНИЕ:** Если вы говорите на **русском языке (Russian)**, вам доступны бесплатные услуги языковой поддержки и бесплатные материалы в других форматах, например, напечатанные крупным шрифтом. Звоните по бесплатному номеру телефона, указанному на вашей идентификационной карте участника.

**FIIRO GAAR AH:** Haddii aad ku hadasho **Soomaali (Somali)**, adeegyada taageerada luqadda bilaashka ah iyo isgaarsiino bilaash ah oo qaabab kale ah, sida far waaweyn, ayaa diyaar kuu ah. Ka wac lambarka wicitaanka bilaashka ah kaarkaaga aqoonsiga xubinta.

**PAUNAWA:** Kung nagsasalita ka ng **Tagalog (Tagalog)**, may makukuha kang mga libreng serbisyo ng tulong sa wika at libreng komunikasyon sa ibang mga format, tulad ng malalaking print. Tawagan ang walang bayad na numero na nasa iyong ID card ng miyembro.

**LƯU Ý:** Nếu quý vị nói Tiếng **Việt (Vietnamese)**, quý vị sẽ được cung cấp các dịch vụ hỗ trợ ngôn ngữ miễn phí và các phương tiện trao đổi liên lạc miễn phí ở các định dạng khác, chẳng hạn như bản in chữ lớn. Gọi đến số điện thoại miễn phí có trên thẻ nhận dạng thành viên của quý vị.



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