



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
Tier 1	\$ Lower-cost generics and some brand name	Use tier 1 drugs for the lowest out-of-pocket costs.
Tier 2	\$\$ Mid-range cost preferred brand name	Use tier 2 drugs instead of tier 3 to help reduce your out-of-pocket costs.
Tier 3	\$\$\$ Higher-cost 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.

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

Select Formulary

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Drug Name	Drug Tier	Notes
Analgesics - Drugs for Pain		
acetaminophen-codeine oral tablet	1	QL
apap-caff-dihydrocodeine	1	QL
bac (butalbital-acetamin-caff)	1	
BELBUCA	2	PA; QL
butalbital-apap-cafeine	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 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
Analgesics - Drugs for Pain and Inflammation		
celecoxib oral	1	QL
diclofenac potassium oral tablet	1	
diclofenac sodium external gel 1 %	1	QL

Drug Name	Drug Tier	Notes
diclofenac sodium oral	1	
ELYXYB	3	PA; QL
ibuprofen oral suspension 100 mg/5ml, 200 mg/10ml	1	
ibuprofen oral tablet 300 mg, 400 mg, 600 mg, 800 mg	1	
indomethacin oral capsule	1	
ketorolac tromethamine +rfd	1	
ketorolac tromethamine injection solution 15 mg/ml	1	
ketorolac tromethamine intramuscular solution 60 mg/2ml	1	
ketorolac tromethamine oral	1	QL
ketorolac tromethamine solution 30 mg/ml injection	1	
KETOROLAC TROMETHAMINE SOLUTION 30 MG/ML INJECTION	3	
meloxicam oral tablet	1	
nabumetone oral	1	
NAPRELAN	3	
naproxen oral tablet	1	
Anesthetics		
EXPAREL	3	
lidocaine external ointment 5 %	1	
lidocaine external patch 5 %	1	
lidocaine-prilocaine external cream	1	
ZTLIDO	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
Anti-Addiction / Substance Abuse Treatment Agents		
BRIXADI	3	SP
BRIXADI (WEEKLY)	3	SP
buprenorphine hcl sublingual	1	
buprenorphine hcl-naloxone hcl	1	
bupropion hcl er (smoking det)	1	++; QL
KLOXXADO	2	
naloxone hcl nasal	1	
naltrexone hcl oral	1	
OPVEE	2	
REXTOVY	2	
SUBLOCADE	3	SP
varenicline tartrate	1	++; QL
VIVITROL	3	SP
ZUBSOLV	2	
Antibacterials		
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	
cefpodoxime proxetil oral tablet	1	
cefuroxime axetil	1	
cephalexin	1	
ciprofloxacin hcl oral	1	
clindamycin hcl oral	1	

Drug Name	Drug Tier	Notes
CLINDESSE	3	
DIFICID ORAL SUSPENSION RECONSTITUTED	3	
doxycycline hyclate oral capsule	1	
doxycycline hyclate oral tablet	1	
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 cream	1	
mupirocin ointment	1	
nitrofurantoin macrocrystal	1	
nitrofurantoin monohydrate macrocrystals	1	
NUZYRA ORAL	3	QL
ORLYNVAH	3	PA; QL
penicillin v potassium	1	
SEYSARA	3	ST
silver sulfadiazine external	1	
sulfamethoxazole-trimethoprim oral	1	
sulfatrim pediatric	1	
XACIATO	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
Anticoagulants		
ELIQUIS	2	QL
ELIQUIS (1.5 MG PACK)	2	QL
ELIQUIS (2 MG PACK)	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
Anticonvulsants - Drugs for Seizures		
BRIVIACT INTRAVENOUS	3	
BRIVIACT ORAL	3	ST
divalproex sodium er	1	
divalproex sodium oral	1	
EPIDIOLEX	3	PA; SP
FYCOMPA	3	
gabapentin oral capsule	1	
gabapentin oral solution	1	
gabapentin oral tablet 600 mg, 800 mg	1	
lacosamide intravenous	1	
lacosamide oral solution 10 mg/ml, 100 mg/10ml, 50 mg/5ml	1	
lacosamide oral tablet	1	
lamotrigine er	1	
lamotrigine oral tablet	1	

Drug Name	Drug Tier	Notes
lamotrigine oral tablet chewable	1	
levetiracetam intravenous	1	
levetiracetam oral solution	1	
levetiracetam oral tablet	1	
MOTPOLY XR	3	ST
NAYZILAM	3	QL
oxcarbazepine	1	
roweepra	1	
subvenite oral tablet	1	
SYMPAZAN	3	PA
TOPAMAX	3	ST
TOPAMAX SPRINKLE	3	ST
topiramate oral capsule sprinkle	1	
topiramate oral tablet	1	
VALTOCO 10 MG DOSE	3	QL
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	
Antidementia Agents - Drugs for Alzheimer's Disease and Dementia		
memantine hcl oral tablet	1	
Antidepressants		
amitriptyline 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
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 ER	3	ST; QL
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 tablet	1	
fluvoxamine maleate	1	
mirtazapine oral tablet	1	
nortriptyline hcl oral capsule	1	
paroxetine hcl oral tablet	1	
sertraline hcl oral concentrate	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	

Drug Name	Drug Tier	Notes
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
Antiemetics - Drugs for Nausea and Vomiting		
meclizine hcl oral tablet	1	++
metoclopramide hcl oral tablet	1	
ondansetron hcl oral tablet 24 mg	1	QL
ondansetron hcl oral tablet 4 mg, 8 mg	1	
ondansetron odt	1	
prochlorperazine maleate oral	1	
promethazine hcl injection	1	
promethazine hcl oral	1	
promethazine hcl rectal	1	
scopolamine	1	
VARUBI (180 MG DOSE)	3	QL
Antifungals		
ciclodan	1	++
ciclopirox external solution	1	++
clotrimazole external	1	
clotrimazole mouth/throat	1	
clotrimazole- betamethasone	1	
CRESEMBA INTRAVENOUS	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
CRESEMBA ORAL	3	PA
fluconazole oral	1	
GYNAZOLE-1	3	
JUBLIA	3	PA; ++
ketoconazole external cream	1	
ketoconazole external shampoo	1	
ketoconazole oral	1	
klayesta	1	
nyamyc	1	
nystatin external	1	
nystatin mouth/throat	1	
nystatin oral	1	
nystop	1	
terbinafine hcl oral	1	QL
terconazole vaginal cream	1	
VIVJOA	3	PA
Antigout Agents		
allopurinol oral	1	
colchicine oral	1	
Antimigraine Agents		
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

Drug Name	Drug Tier	Notes
sumatriptan succinate subcutaneous solution auto-injector	1	QL
UBRELVY	2	PA; QL
ZAVZPRET	3	PA; QL
Antimyasthenic Agents		
VYVGART	3	PA; SP
VYVGART HYTRULO SUBCUTANEOUS SOLUTION	3	PA; SP
VYVGART HYTRULO SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	3	PA; SP; QL
Antineoplastics - Drugs for Cancer		
abiraterone acetate	1	PA; SP
abirtega	1	PA; SP
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
ENSACOVE	2	PA; SP
ERIVEDGE	3	PA; SP
ERLEADA	3	PA; SP
GAVRETO	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
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
IMKELDI	3	PA; SP
KANJINTI	2	PA; SP
KISQALI (200 MG DOSE)	3	PA; SP
KISQALI (400 MG DOSE)	3	PA; SP
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

Drug Name	Drug Tier	Notes
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
TAGRISSE ORAL TABLET 40 MG	3	PA; SP; QL
TAGRISSE ORAL TABLET 80 MG	3	PA; SP
tamoxifen citrate oral	1	
TEPMETKO	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
Antiparasitics		
ARAKODA	3	
EMVERM	2	QL
hydroxychloroquine sulfate 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
Antiparkinson Agents		
carbidopa-levodopa oral tablet	1	
CREXONT	3	ST
INBRIJA	3	PA; SP
NEUPRO	3	
ONGENTYS	3	ST
pramipexole dihydrochloride	1	
ropinirole hcl	1	
Antiplatelets		
clopidogrel bisulfate oral	1	
prasugrel hcl	1	
ticagrelor	1	
Antipsychotics - Drugs for Mood Disorders		
ABILIFY ASIMTUFII	3	++
ABILIFY MAINTENA	3	++
aripiprazole oral solution	1	QL
aripiprazole oral tablet	1	QL
ARISTADA	3	++
ARISTADA INITIO	3	++
CAPLYTA	3	ST; QL
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

Drug Name	Drug Tier	Notes
risperidone oral solution	1	QL
risperidone oral tablet	1	QL
RYKINDO	3	++
UZEDY	3	++
VRAYLAR	3	QL
Antivirals		
acyclovir external ointment	1	QL
acyclovir oral	1	
APRETUDE	2	
BIKTARVY	3	
CABENUVA	2	
CIMDUO	2	
DELSTRIGO	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
PIFELTRO	2	
PREZCOBIX	2	
SYMTUZA	3	
TRIUMEQ	2	
valacyclovir 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
VOSEVI	2	PA; SP; QL
XOFLUZA (40 MG DOSE)	3	QL
XOFLUZA (80 MG DOSE)	3	QL
Anxiolytics - Drugs for Anxiety		
alprazolam oral tablet	1	QL
buspirone hcl oral	1	
clonazepam oral tablet	1	QL
diazepam oral tablet	1	
hydroxyzine hcl oral syrup 10 mg/5ml	1	
hydroxyzine hcl oral tablet	1	
hydroxyzine pamoate oral	1	
lorazepam oral tablet	1	QL
triazolam	1	QL
Bipolar Agents - Drugs for Mood Disorders		
lithium carbonate er	1	
lithium carbonate oral	1	
Blood Products and Modifiers - Drugs for Blood Disorders		
ADVATE	2	SP
ADYNOVATE	3	SP
AFSTYLA	3	SP
ALHEMO	3	SP
ALPROLIX	3	SP
ALTUVIIIO	3	SP
ARANESP (ALBUMIN FREE)	2	PA; SP
BENEFIX	2	SP
DOPTELET	3	PA; SP
DOPTELET SPRINKLE	3	PA; SP; QL

Drug Name	Drug Tier	Notes
ELOCTATE	3	SP
EMPAVELI	3	PA; SP
ESPEROCT	3	SP
FABHALTA	3	PA; SP; QL
HYMPAVZI	3	SP
IDELVION	3	SP
JIVI	3	SP
KOATE	2	SP
KOVALTRY	2	SP
NEULASTA ONPRO	3	PA; SP
NEULASTA SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	3	PA; SP
NIVESTYM	2	PA; SP
NOVOEIGHT	2	SP
NUWIQ	2	SP
PROCRT	2	PA; SP
REBINYN	3	SP
RECOMBINATE	2	SP
RETACRIT	2	PA; SP
TAVALISSE	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
Cardiovascular Agents - Drugs for Heart and Circulation Conditions		
amiodarone 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
amlodipine besylate oral	1	
amlodipine besylate-benazepril hcl	1	
amlodipine besylate-valsartan	1	
amlodipine-olmesartan	1	
ARB LI	3	PA
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	
carvedilol	1	
chlorthalidone	1	
clonidine hcl oral	1	
colestipol hcl oral tablet	1	
diltiazem hcl er beads	1	
diltiazem hcl er coated beads	1	
diltiazem hcl er oral capsule extended release 24 hour	1	
diltiazem hcl er oral tablet extended release 24 hour	1	
dilt-xr	1	
doxazosin mesylate oral	1	
EDARBYCLOR	3	ST
enalapril maleate oral tablet	1	

Drug Name	Drug Tier	Notes
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	
lisinopril oral	1	
lisinopril-hydrochlorothiazide	1	
LIVALO	3	ST
LOPRESSOR ORAL SOLUTION	3	PA
losartan potassium oral	1	
losartan potassium-hctz	1	
lovastatin oral	1	
matzim la	1	
metoprolol succinate er	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
metoprolol tartrate oral tablet 100 mg, 25 mg, 37.5 mg, 50 mg, 75 mg	1	
midodrine hcl	1	
minoxidil oral	1	
MULTAQ	3	
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	QL
REPATHA SURECLICK	2	QL
rosuvastatin calcium oral	1	
sacubitril-valsartan	1	QL
simvastatin oral	1	
SOAANZ	3	PA
spironolactone oral tablet	1	

Drug Name	Drug Tier	Notes
TEKTURNA	2	
telmisartan	1	
tiadylt er	1	
torseamide	1	
triamterene-hctz	1	
TRYNGOLZA	3	PA; SP; QL
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
Central Nervous System Agents - Drugs for Attention Deficit Disorder		
ADDERALL XR	3	ST; QL
amphetamine-dextroamphetamine	1	QL
amphetamine-dextroamphetamine er	1	QL
amphet-dextroamphet 3-bead er	1	QL
atomoxetine hcl	1	QL
AZSTARYS	2	ST; QL
clonidine hcl er	1	
dexmethylphenidate hcl	1	QL
dexmethylphenidate hcl er	1	QL
DYANAVEL XR	3	ST; QL
guanfacine hcl er	1	
JORNAY PM	3	ST; QL
lisdexamphetamine dimesylate	1	QL
methylphenidate hcl er	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
methlyphenidate hcl er (cd)	1	QL
methlyphenidate hcl er (la)	1	QL
methlyphenidate hcl er (osm) oral tablet extended release 18 mg, 27 mg, 36 mg, 54 mg, 72 mg	1	QL
methlyphenidate hcl er (xr)	1	QL
methlyphenidate hcl oral	1	QL
MYDAYIS	3	ST; QL
QELBREE	3	ST; QL
RELEXXII	3	ST; QL
VYVANSE ORAL CAPSULE	3	ST; QL
Central Nervous System Agents - Drugs for Multiple Sclerosis		
AVONEX PEN	2	PA; SP; QL
AVONEX PREFILLED	2	PA; SP; QL
BAFIERTAM	2	PA; SP; QL
BETASERON	2	PA; SP; QL
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

Drug Name	Drug Tier	Notes
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
Central Nervous System Agents - Miscellaneous		
AUSTEDO	3	PA; SP; QL
AUSTEDO XR	3	PA; SP; QL
AUSTEDO XR PATIENT TITRATION	3	PA; SP; QL
GRALISE	3	ST; QL
INGREZZA	3	PA; SP; QL
phentermine hcl oral	1	++
pregabalin oral capsule	1	QL
QSYMIA	2	PA; ++
RADICAVA ORS	2	PA; SP
RADICAVA ORS STARTER KIT	2	PA; SP
SAXENDA	2	PA; ++; QL
TEGLUTIK	2	ST; QL
VYLEESI	3	PA; ++; QL
WAINUA	3	PA; SP; QL
WEGOVY	2	PA; ++; QL
ZEPBOUND SUBCUTANEOUS SOLUTION AUTO-INJECTOR	2	PA; ++; QL
Dental and Oral Agents - Drugs for Mouth and Throat Conditions		
chlorhexidine gluconate mouth/throat	1	
lidocaine hcl mouth/throat	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
lidocaine viscous hcl	1	
periogard	1	
Dermatological Agents - Drugs for Skin Conditions		
ABSORICA	3	PA
ABSORICA LD	3	PA
accutane	1	
ADBRY	2	PA; SP; QL
AKLIEF	3	PA
ala-cort	1	
amnesteam	1	
AMZEEQ	3	
ANZUPGO	3	PA; QL
azelaic acid external	1	
betamethasone dipropionate external	1	
CIBINQO	2	PA; SP; QL
claravis	1	
clindacin etz external swab	1	
clindacin-p	1	
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	

Drug Name	Drug Tier	Notes
clobetasol propionate external foam	1	
clobetasol propionate external gel	1	
clobetasol propionate external ointment	1	
clobetasol propionate external shampoo	1	
clobetasol propionate external solution	1	
clodan	1	
diclofenac sodium external gel 3 %	1	QL
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	
fluocinonide external cream	1	
fluocinonide external ointment	1	
fluocinonide external solution	1	
fluorouracil external cream 5 %	1	
fluticasone propionate external cream	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

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
imiquimod external cream 5 %	1	
imiquimod pump	1	ST
isotretinoin oral	1	
KLISYRI (250 MG)	3	ST
KLISYRI (350 MG)	3	ST
LEQSELVI	3	PA; SP; QL
LITFULO	3	PA; SP; QL
metronidazole external	1	
MIRVASO	2	
mometasone furoate external	1	
NEMLUVIO	2	PA; SP; QL
ONEXTON	3	ST
OPZELURA	2	ST; QL
QBREXZA	3	QL
RETIN-A MICRO PUMP	3	PA; ++
SANTYL	3	QL
SOFDRA	3	QL
SOOLANTRA	3	
TACLONEX	3	QL
tacrolimus external	1	QL
tretinoin external	1	++
triamcinolone acetanide external cream	1	
triamcinolone acetanide external ointment	1	
triamcinolone in absorbbase	1	
triderm	1	
VTAMA	2	ST
VYJUVEK	3	PA; SP; QL
WINLEVI	3	PA
WYNZORA	3	QL
YCANTH	3	PA

Drug Name	Drug Tier	Notes
ZELSUVMI	3	PA
zenatane	1	
ZILXI	3	ST
ZORYVE EXTERNAL CREAM 0.15 %, 0.3 %	2	ST
ZORYVE EXTERNAL FOAM	2	ST
Diabetes - Antidiabetic Agents		
DAPAGLIFLOZIN PROPANEDIOL	3	PA
FARXIGA	2	
glimepiride	1	
glipizide er	1	
glipizide ir	1	
GLYXAMBI	2	
JANUMET	2	
JANUMET XR	2	
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	

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
TRIJARDY XR ORAL TABLET EXTENDED RELEASE 24 HOUR 12.5-2.5-1000 MG, 25-5-1000 MG, 5-2.5-1000 MG	2	
TRULICITY	2	PA; QL
XIGDUO XR	2	
Diabetes - Glucose Monitoring		
ACCU-CHEK FASTCLIX LANCET KIT	2	++
ACCU-CHEK SOFTCLIX LANCET DEVICE KIT	2	++
CEQUR 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	++
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; ++

Drug Name	Drug Tier	Notes
DEXCOM G7 15 DAY SENSOR	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; ++
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

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
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 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	++
INPEN 100-GREY-NOVOLOG-FIASP	3	++
INPEN 100-PINK-LILLY-HUMALOG	3	++
INPEN 100-PINK-NOVOLOG-FIASP	3	++
MINIMED INSTINCT GLUC SENSOR	3	PA; ++
PRECISION XTRA BLOOD GLUCOSE STRIPS	2	++; QL
SIMPLERA SENSOR	3	PA; ++
SIMPLERA SYNC SENSOR	3	PA; ++

Drug Name	Drug Tier	Notes
SIMPLERA SYSTEM	3	PA; ++
Diabetes - Glycemic Agents		
BAQSIMI ONE PACK	2	++
BAQSIMI TWO PACK	2	++
GLUCAGON EMERGENCY KIT	2	Made by Fresenius Kabi; ++
GVOKE HYPOPEN 1-PACK	2	++
GVOKE HYPOPEN 2-PACK	2	++
GVOKE KIT	2	++
GVOKE PFS	2	++
Diabetes - Insulins		
ADMELOG	1	++
ADMELOG SOLOSTAR	1	++
APIDRA SOLOSTAR	1	++
APIDRA VIAL	1	++
BASAGLAR KWIKPEN	1	++
BASAGLAR TEMPO PEN SUBCUTANEOUS SOLUTION PEN-INJECTOR 100 UNIT/ML	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	++
BD VEO INSULIN SYR ULTRAFINE 31G X 15/64" 1 ML	2	++
FIASP	1	++
FIASP FLEXTOUCH	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
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 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; ++
INSULIN LISPRO	1	++
INSULIN LISPRO (1 UNIT DIAL)	1	++
INSULIN LISPRO JUNIOR KWIKPEN	1	++
INSULIN LISPRO PROT & LISPRO	1	++

Drug Name	Drug Tier	Notes
LANTUS SOLOSTAR	1	++
LANTUS U-100 VIAL	1	++
LYUMJEV KWIKPEN	1	++
LYUMJEV VIAL	1	++
MERILOG	1	++
MERILOG SOLOSTAR	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	++
TRESIBA FLEXTOUCH SUBCUTANEOUS SOLUTION PEN-INJECTOR 100 UNIT/ML	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
Electrolytes / Minerals / Metals / Vitamins		
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 crystal	1	
potassium chloride er	1	
potassium citrate er	1	
tolvaptan	1	PA; Made by Lupin.; SP; QL
tolvaptan (hyponatremia)	1	PA; SP; QL
VELTASSA	3	
vitamin d (ergocalciferol) oral capsule 1.25 mg (50000 ut)	1	++
Gastrointestinal Agents - Drugs for Acid Reflux and Ulcer		
esomeprazole magnesium	1	++; QL

Drug Name	Drug Tier	Notes
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
sucralfate oral	1	
Gastrointestinal Agents - Drugs for Bowel, Intestine and Stomach Conditions		
CLENPIQ	3	
constulose	1	
dicyclomine hcl oral capsule	1	
dicyclomine hcl oral tablet	1	
diphenoxylate-atropine oral tablet	1	
enulose	1	
gavilyte-c	1	
gavilyte-g	1	
generlac	1	
glycopyrrolate oral tablet 1 mg, 2 mg	1	QL
IQIRVO	3	PA; SP; QL
lactulose encephalopathy	1	
lactulose oral solution	1	
LINZESS	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
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/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	
Genetic or Enzyme Disorder - Drugs for Replacement, Modification, Treatment		
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

Drug Name	Drug Tier	Notes
Genitourinary Agents - Drugs for Bladder, Genital and Kidney Conditions		
FILSPARI	3	PA; SP; QL
mirabegron er	1	
MYRBETRIQ	2	
OXLUMO	3	PA; SP
oxybutynin chloride er	1	
oxybutynin chloride oral tablet	1	
PYRIDIUM	3	
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
VANRAFIA	3	PA; SP; QL
Genitourinary Agents - Drugs for Prostate Conditions		
alfuzosin hcl er	1	
dutasteride oral	1	
finasteride oral tablet 5 mg	1	
tamsulosin hcl	1	
TEZRULY	3	PA
Hormonal Agents - Adrenal		
dexamethasone oral elixir	1	
dexamethasone oral solution	1	
dexamethasone oral tablet	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
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	
ZILRETTA	3	
Hormonal Agents - Men's Health		
KYZATREX	3	PA; QL
testosterone cypionate intramuscular	1	PA; QL
testosterone transdermal gel	1	PA; QL
XYOSTED	3	PA; QL
Hormonal Agents - Pituitary		
ACTHAR	2	PA; SP
ACTHAR GEL	2	PA; SP
cabergoline	1	
CORTROPHIN	2	PA; SP
CORTROPHIN GEL	2	PA; SP
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

Drug Name	Drug Tier	Notes
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
NGENLA	3	PA; ++; SP
NORDITROPIN FLEXPPO	2	PA; ++; SP
NUTROPIN AQ NUSPIN 10	3	PA; ++; SP
NUTROPIN AQ NUSPIN 20 SUBCUTANEOUS SOLUTION PEN-INJECTOR 20 MG/2ML	3	PA; ++; SP
NUTROPIN AQ NUSPIN 5 SUBCUTANEOUS SOLUTION PEN-INJECTOR 5 MG/2ML	3	PA; ++; SP
OMNITROPE	2	PA; ++; SP
ORILISSA	2	PA; QL
OVIDREL	3	PA; ++; SP
SKYTROFA	3	PA; ++; SP
SOGROYA	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
SOMATULINE DEPOT SUBCUTANEOUS SOLUTION 60 MG/0.2ML, 90 MG/0.3ML	3	PA; SP
TRIPTODUR	2	PA; SP; QL
Hormonal Agents - Selective Estrogen Receptor Modifying Agents		
OSPHENA	3	
Hormonal Agents - Sex Hormones and Birth Control		
afirmelle	1	++
altavera	1	++
ANNOVERA	3	++; QL
apri	1	++
aubra 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	++
AVERI	3	++
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	
cryselle	1	++
cyred eq	1	++

Drug Name	Drug Tier	Notes
deblitane	1	++
delyla	1	++
DIVIGEL	3	
dotti	1	
drospirenone-ethinyl estradiol	1	++
DUAVEE	2	
ELESTRIN	3	
elimest	1	++
eluryng	1	++
emzahh	1	++
ENDOMETRIN	2	++
enilloring	1	++
enskyce	1	++
errin	1	++
estarylla	1	++
estradiol oral	1	
estradiol transdermal	1	
estradiol vaginal	1	
etonogestrel-ethinyl estradiol	1	++
EVAMIST	3	
falmina	1	++
feirza 1.5/30	1	++
feirza 1/20	1	++
fyavolv	1	
gallifrey	1	
hailey 1.5/30	1	++
hailey 24 fe	1	++
hailey fe 1.5/30	1	++
hailey fe 1/20	1	++
haloette vaginal ring 0.12-0.015 mg/24hr	1	++
heather	1	++
IMVEXXY MAINTENANCE PACK	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
IMVEXXY STARTER PACK	2	
incassia	1	++
isibloom	1	++
jasmiel	1	++
jencycla	1	++
jinteli	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	++
LO LOESTRIN FE	3	++
loryna	1	++
low-ogestrel	1	++
lo-zumandimine	1	++
luizza 1.5/30	1	++
luizza 1/20	1	++
lutra	1	++
lyleq	1	++
lyllana	1	
lyza	1	++

Drug Name	Drug Tier	Notes
marlissa	1	++
medroxyprogesterone acetate intramuscular	1	++; QL
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	++
MIRENA (52 MG) INTRAUTERINE INTRAUTERINE DEVICE 20 MCG/DAY	3	++
mono-lynyah	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	++
norethindrone-eth estradiol	1	
norgestimate-eth estradiol oral tablet 0.25-35 mg-mcg	1	++
norgestimate-ethinyl estradiol triphasic	1	++
norlyroc	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
ORIAHNN	2	PA; QL
orquidea	1	++
portia-28	1	++
PREMARIN VAGINAL	2	
PREMPHASE	2	
PREMPRO	2	
progesterone intramuscular	1	
progesterone oral	1	
reclipsen	1	++
sharobel	1	++
SKYLA	3	++
SLYND	3	ST; ++
sprintec 28	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	++
turqoz	1	++
vestura	1	++
vienva	1	++
vylibra	1	++
xulane	1	++
yuvaferm	1	
zafemy	1	++
zumandimine	1	++

Drug Name	Drug Tier	Notes
Hormonal Agents - Thyroid		
ARMOUR THYROID	3	
EVEXITHROID	3	
levo-t	1	
levothyroxine sodium oral tablet	1	
levoxyl	1	
liomny	1	
liothyronine sodium oral	1	
methimazole oral	1	
NIVA THYROID	3	
RENTHYROID	3	
SYNTHROID	3	
TIROSINT	3	
TIROSINT-SOL	3	
unithroid	1	
Immunological Agents - Drugs for Immune System Stimulation or Suppression		
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
ANDEMBRY	3	PA; SP; QL
AVSOLA	2	PA; SP
AVTOZMA INTRAVENOUS	3	PA; 3P; SP
AVTOZMA SUBCUTANEOUS	3	PA; 3P; SP; QL
azathioprine oral	1	
BENLYSTA	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
BIMZELX	3	PA; 3P; SP; QL
BIVIGAM	3	PA; SP
CIMZIA	2	PA; SP; QL
CIMZIA (1 SYRINGE)	2	PA; SP; QL
CIMZIA (2 SYRINGE)	2	PA; SP; QL
CIMZIA-STARTER	2	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
DAWNZERA	3	PA; SP; QL
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-CD/UC/HS STARTER	3	PA; SP; QL
HUMIRA-PSORIASIS/UEVIT STARTER	3	PA; SP; QL
INFLECTRA	2	PA; SP
JYLAMVO	3	PA
leflunomide oral	1	
LUPKYNIS	3	PA; SP; QL
methotrexate sodium (pf)	1	
methotrexate sodium injection solution	1	

Drug Name	Drug Tier	Notes
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 ORAL CAPSULE	3	PA; SP; QL
OTEZLA	2	PA; SP; QL
OTEZLA XR	2	PA; SP; QL
OTEZLA/OTEZLA XR INITIATION PK	2	PA; SP; QL
PANZYGA	3	PA; SP
PRIVIGEN	3	PA; SP
RASUVO	2	PA; QL
RHAPSIDO	2	PA; SP; 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

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
SKYRIZI SUBCUTANEOUS	2	PA; SP; QL
SOTYKTU	2	PA; SP; QL
STELARA	3	PA; SP; QL
tacrolimus oral	1	
TAKHZYRO	3	PA; SP; QL
TAKHZYRO SUBCUTANEOUS SOLUTION 300 MG/2ML	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
Inflammatory Bowel Disease Agents		
APRISO	2	
budesonide oral	1	
CORTIFOAM	3	
DIPENTUM	3	
hydrocortisone (perianal)	1	
mesalamine er oral capsule 0.375 gm	1	

Drug Name	Drug Tier	Notes
mesalamine oral	1	
PROCTOFOAM HC	2	
procto-med hc	1	
UCERIS RECTAL	3	
Metabolic Bone Disease Agents		
OSENVELT	2	PA; SP
Metabolic Bone Disease Agents - Drugs for Osteoporosis		
alendronate sodium oral tablet 10 mg	1	
alendronate sodium oral tablet 35 mg, 70 mg	1	QL
BONSITY	2	PA; SP
STOBOCLO	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
Metabolic Bone Disease Agents - Other		
calcitriol oral capsule	1	
RAYALDEE	3	
Miscellaneous Therapeutic Agents		
AQINJECT PEN NEEDLE	2	++
BD PEN NEEDLE MICRO ULTRAFINE	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
BD PEN NEEDLE MINI ULTRAFINE	2	++
BD PEN NEEDLE NANO ULTRAFINE	2	++
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; ++; QL
DYSPORT	2	PA
ENDARI	3	PA
EUFLEXXA	2	PA; ++; QL
GELSYN-3	2	PA; ++; QL
GIVLAARI	3	PA; SP
ILET CONTACT DETACH 23" 6MM	3	++
ILET INFUSION-INSET 23" 6MM	3	++
ILET INFUSION-INSET 32" 6MM	3	++
ILET INSULIN PUMP	3	++
ILET STARTER - CONTACT DETACH	3	++
ILET STARTER KIT - INSET 23"	3	++
ILET STARTER KIT - INSET 32"	3	++
INSULIN PEN NEEDLES 29G X 12MM , 30G X 5 MM , 31G X 5 MM , 31G X 6 MM , 31G X 8 MM , 32G X 4 MM	2	++
KERENDIA	3	PA; QL
MYOBLOC	2	PA

Drug Name	Drug Tier	Notes
NOVOFINE PEN NEEDLE	2	++
NOVOFINE PLUS PEN NEEDLE	2	++
OMNIPOD 5 DEXCOM INTRO KIT	2	++
OMNIPOD 5 DEXCOM PODS	2	++
OMNIPOD 5 LIBRE2 G6 INTRO GEN5	2	++
OMNIPOD 5 LIBRE PODS	2	++
OMNIPOD DASH INTRO KIT	2	++
OMNIPOD DASH PODS	2	++
T:SLIM X2 3ML CARTRIDGE	3	++
T:SLIM X2 BASAL-IQ PUMP DEVICE	3	++
T:SLIM X2 CONTROL-IQ 7.7 PUMP DEVICE	3	++
T:SLIM X2 CONTROL-IQ 7.8 PUMP DEVICE	3	++
T:SLIM X2 INSULIN PMP BASAL6.4 DEVICE	3	++
T:SLIM X2 INSULIN PUMP	3	++
T:SLIM X2/BASAL-IQ/ACC/INSTR	3	++
T:SLIM X2/CONTROL-IQ/ACC/INSTR	3	++
TANDEM MOBI AUTOSOFT 30 KIT	3	++
TANDEM MOBI AUTOSOFT XC KIT	3	++
TANDEM MOBI AUTOSOFT30 14PK23"	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
TANDEM MOBI AUTOSOFTXC 14PK23"	3	++
TANDEM MOBI AUTOSOFTXC 14PK5"	3	++
TANDEM MOBI TRUSTEEL SUPP KIT	3	++
TANDEM T:SLIM ASFT 30 PK10 23"	3	++
TANDEM T:SLIM ASFT 30 PK14 23"	3	++
TANDEM T:SLIM ASFT XC PK10 23"	3	++
TANDEM T:SLIM ASFT XC PK14 23"	3	++
TANDEM T:SLIM TRUSTL PK10 23"	3	++
TWIST REFILL KIT	2	++
TWIST REFILL KIT/INFUSION SET	2	++
TWIST STARTER KIT	2	++
VEOZAH	3	PA; QL
XEOMIN	2	PA
YORVIPATH	3	PA; SP; QL
Ophthalmic Agents - Drugs for Eye Allergy, Infection and Inflammation		
AZASITE	3	
azelastine hcl ophthalmic	1	
BESIVANCE	3	
ciprofloxacin hcl ophthalmic	1	
diclofenac sodium ophthalmic	1	
erythromycin ophthalmic	1	
EYSUVIS	3	PA; QL

Drug Name	Drug Tier	Notes
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	
TOBRADEX ST	3	
tobramycin-dexamethasone	1	
Ophthalmic Agents - Drugs for Glaucoma		
ALPHAGAN P OPHTHALMIC SOLUTION 0.15 %	2	
BETIMOL	3	
brimonidine tartrate ophthalmic	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 ocudose	1	
timolol maleate ophthalmic 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
timolol maleate pf	1	
ZIOPTAN	3	QL
Ophthalmic Agents - Drugs for Miscellaneous Eye Conditions		
CEQUA	3	PA; QL
cyclosporine ophthalmic emulsion 0.05 %	1	PA; QL
MIEBO	2	PA; QL
polymyxin b- trimethoprim	1	
RESTASIS	2	PA; QL
RESTASIS MULTIDOSE	2	PA; QL
TRYPTYR	2	PA; QL
TYRVAYA	3	PA; QL
VERKAZIA	3	PA; QL
XIIDRA	2	PA; QL
ZYLET	3	
Otic Agents - Drugs for Ear Conditions		
ciprofloxacin- dexamethasone	1	
neomycin-polymyxin-hc otic	1	
ofloxacin otic	1	
Respiratory Tract / Pulmonary Agents - Drugs for Allergies, Cough, Cold		
azelastine hcl nasal	1	QL
azelastine-fluticasone	1	QL
benzonatate	1	
cetirizine hcl oral solution	1	++
cyproheptadine hcl oral	1	

Drug Name	Drug Tier	Notes
fluticasone propionate nasal	1	++
ipratropium bromide nasal	1	
levocetirizine dihydrochloride oral tablet	1	++
mometasone furoate nasal	1	++; QL
OMNARIS	3	++; QL
promethazine-dm	1	
pseudoephedrine- bromphen-dm	1	
QNASL	3	++; QL
QNASL CHILDRENS	3	++; QL
XHANCE	3	ST; ++; QL
Respiratory Tract / Pulmonary Agents - Drugs for Asthma and Other Lung Conditions		
ADVAIR HFA	1	QL
AIRSUPRA	2	QL
albuterol sulfate hfa	1	QL
albuterol sulfate inhalation	1	QL
ANORO ELLIPTA	2	QL
ARNUITY ELLIPTA	2	QL
ATROVENT HFA	3	QL
AUVI-Q	3	
BREO ELLIPTA	1	QL
breyana	1	QL
BREZTRI AEROSPHERE	2	QL
budesonide inhalation	1	QL
budesonide-formoterol fumarate	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
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
FLUTICASONE FUROATE ELLIPTA	3	PA; QL
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
FLUTICASONE-SALMETEROL INHALATION AEROSOL POWDER BREATH ACTIVATED 113-14 MCG/ACT, 232-14 MCG/ACT, 55-14 MCG/ACT	3	ST; QL
ipratropium bromide inhalation	1	QL
ipratropium-albuterol	1	QL
montelukast sodium oral	1	
NEFFY	3	

Drug Name	Drug Tier	Notes
NUCALA	2	PA; SP; QL
OFEV	3	PA; SP; QL
PERFOROMIST	3	QL
PROAIR RESPICLICK	3	QL
QVAR REDIHALER	2	QL
SEREVENT DISKUS	2	QL
SPIRIVA RESPIMAT	2	QL
STIOLTO RESPIMAT	2	QL
STRIVERDI RESPIMAT	2	QL
SYMBICORT	3	ST; QL
TEZSPIRE	2	PA; SP; QL
tiotropium bromide	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 INHALATION SOLUTION 175 MCG/3ML	3	QL
Respiratory Tract / Pulmonary Agents - Drugs for Cystic Fibrosis		
BRONCHITOL	3	PA; SP; QL
PULMOZYME	2	PA; SP
TOBI PODHALER	3	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
TRIKAFTA	3	PA; SP; QL
Respiratory Tract / Pulmonary Agents - Drugs for Pulmonary Hypertension		
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
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

Drug Name	Drug Tier	Notes
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
YUTREPIA	3	PA; SP; QL
Skeletal Muscle Relaxants - Drugs for Muscle Pain and Spasm		
baclofen oral tablet	1	
carisoprodol oral	1	
cyclobenzaprine hcl oral	1	
methocarbamol oral	1	
tizanidine hcl oral capsule 2 mg, 4 mg, 6 mg	1	
tizanidine hcl oral tablet	1	
Sleep Disorder Agents		
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	1	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

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
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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AIMOVIG	11	aripiprazole	13	ULTRAFINE	31
AIRSUPRA	33	ARISTADA	13	BD PEN NEEDLE SHORT	
AJOVY	11	ARISTADA INITIO	13	ULTRAFINE	31
AKLIEF	18	armodafinil	35	BD ULTRA-FINE INSULIN	
ala-cort	18	ARMOUR THYROID	28	SYRINGES	21
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albuterol sulfate hfa	33	atenolol	15	NEEDLES	31
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alendronate sodium	30	ATORVALIQ	15	ULTRAFINE	21
alfuzosin hcl er	24	atorvastatin calcium	15	BELBUCA	7
ALHEMO	14	ATROVENT HFA	33	BELSOMRA	35
allopurinol	11	aubra eq	26	benazepril hcl	15
ALPHAGAN P	32	AUGTYRO	11	BENEFIX	14
alprazolam	14	aurovela 1.5/30	26	BENLYSTA	28
ALPROLIX	14	aurovela 1/20	26	benzonatate	33
altavera	26	aurovela 24 fe	26	BESIVANCE	32
ALTUVIIIO	14	aurovela fe 1.5/30	26	BESREMI	11
ALUNBRIG	11	aurovela fe 1/20	26	betamethasone dipropionate	18
amiodarone hcl	14	AUSTEDO	17	BETASERON	17
amitriptyline hcl	9	AUSTEDO XR	17	BETIMOL	32
AMJEVITA	28	AUSTEDO XR PATIENT		BIJUVA	26
amlodipine besylate	15	TITRATION	17	BIKTARVY	13
amlodipine besylate-benazepril		AUVELITY	10	BIMZELX	29
hcl	15	AUVI-Q	33	bisoprolol fumarate	15
amlodipine besylate-valsartan	15	AVERI	26	bisoprolol-hydrochlorothiazide	15

BIVIGAM.....	29	chlorthalidone.....	15	COSENTYX SENSOREADY	
blisovi 24 fe.....	26	CIBINQO.....	18	(300 MG).....	29
blisovi fe 1.5/30.....	26	ciclodan.....	10	COSENTYX SENSOREADY	
blisovi fe 1/20.....	26	ciclopirox.....	10	PEN.....	29
BONSITY.....	30	CIMDUO.....	13	COSENTYX UNOREADY.....	29
BREO ELLIPTA.....	33	CIMZIA.....	29	COTELLIC.....	11
breyana.....	33	CIMZIA (1 SYRINGE).....	29	CREON.....	24
BREZTRI AEROSPHERE.....	33	CIMZIA (2 SYRINGE).....	29	CRESEMBA.....	10, 11
brimonidine tartrate.....	32	CIMZIA-STARTER.....	29	CREXONT.....	13
BRIVIACT.....	9	ciprofloxacin hcl.....	8, 32	cryselle.....	26
BRIXADI.....	8	ciprofloxacin-dexamethasone...	33	CUTAQUIG.....	29
BRIXADI (WEEKLY).....	8	citalopram hydrobromide.....	10	cyanocobalamin.....	23
BRONCHITOL.....	34	claravis.....	18	cyclobenzaprine hcl.....	35
budesonide.....	30, 33	CLENPIQ.....	23	cyclosporine.....	33
budesonide-formoterol		CLIMARA PRO.....	26	cyproheptadine hcl.....	33
fumarate.....	33	clindacin etz.....	18	cyred eq.....	26
bumetanide.....	15	clindacin-p.....	18	dalfampridine er.....	17
buprenorphine hcl.....	8	clindamycin hcl.....	8	DANZITEN.....	11
buprenorphine hcl-naloxone		clindamycin phos (once-daily) ...	18	DAPAGLIFLOZIN	
hcl.....	8	clindamycin phos (twice-daily) ..	18	PROPANEDIOL.....	19
bupropion hcl.....	10	clindamycin phosphate.....	18	DAWNZERA.....	29
bupropion hcl er (smoking det) ...	8	clindamycin phosphate-		deblitane.....	26
bupropion hcl er (sr).....	10	benzoyl peroxide.....	18	DELSTRIGO.....	13
bupropion hcl er (xl).....	10	CLINDESSE.....	8	delyla.....	26
buspirone hcl.....	14	clobetasol propionate.....	18	DESCOVY.....	13
butalbital-apap-cafeine.....	7	clodan.....	18	desmopressin acetate.....	25
BYLVAY.....	31	clonazepam.....	14	DESVENLAFAXINE ER.....	10
BYLVAY (PELLETS).....	31	clonidine hcl.....	15	desvenlafaxine succinate er.....	10
CABENUVA.....	13	clonidine hcl er.....	16	dexamethasone.....	24
cabergoline.....	25	clopidogrel bisulfate.....	13	DEXCOM G6 RECEIVER.....	20
CABOMETYX.....	11	clotrimazole.....	10	DEXCOM G6 SENSOR.....	20
calcitriol.....	30	clotrimazole-betamethasone.....	10	DEXCOM G6 TRANSMITTER..	20
CALQUENCE.....	11	colchicine.....	11	DEXCOM G7 15 DAY	
camila.....	26	colestipol hcl.....	15	SENSOR.....	20
candesartan cilexetil.....	15	COMBIVENT RESPIMAT.....	34	DEXCOM G7 RECEIVER.....	20
capecitabine.....	11	constulose.....	23	DEXCOM G7 SENSOR.....	20
CAPLYTA.....	13	CONTOUR NEXT EZ KIT		dexmethylphenidate hcl.....	16
carbidopa-levodopa.....	13	W/DEVICE.....	20	dexmethylphenidate hcl er.....	16
carisoprodol.....	35	CONTOUR NEXT GEN		diazepam.....	14
cartia xt.....	15	MONITOR KIT W/DEVICE.....	20	diclofenac potassium.....	7
carvedilol.....	15	CONTOUR NEXT GEN TEST		diclofenac sodium.....	7, 18, 32
cefadroxil.....	8	STRIPS.....	20	dicyclomine hcl.....	23
cefdinir.....	8	CONTOUR NEXT MONITOR		DIFICID.....	8
cefpodoxime proxetil.....	8	KIT W/DEVICE.....	20	diltiazem hcl er.....	15
cefuroxime axetil.....	8	CONTOUR NEXT ONE KIT.....	20	diltiazem hcl er beads.....	15
celecoxib.....	7	CONTOUR PLUS BLUE KIT		diltiazem hcl er coated beads...	15
cephalexin.....	8	W/DEVICE.....	20	dilt-xr.....	15
CEQUA.....	33	CONTOUR PLUS TEST		dimethyl fumarate.....	17
CEQUR SIMPLICITY 2U 10PK.	20	STRIP.....	20	DIPENTUM.....	30
CERDELGA.....	24	CONTOUR TEST STRIPS.....	20	diphenoxylate-atropine.....	23
cetirizine hcl.....	33	CORTIFOAM.....	30	divalproex sodium.....	9
chateal eq.....	26	CORTROPHIN.....	25	divalproex sodium er.....	9
chlorhexidine gluconate.....	17	CORTROPHIN GEL.....	25	DIVIGEL.....	26

DOPTELET	14	EPIDIOLEX.....	9	fludrocortisone acetate.....	25
DOPTELET SPRINKLE	14	EPIDUO FORTE.....	18	fluocinonide.....	18
dorzolamide hcl-timolol mal.....	32	epinephrine.....	34	fluorouracil.....	18
dorzolamide hcl-timolol mal pf..	32	EIPEN JR 2-PAK.....	34	fluoxetine hcl.....	10
dotti.....	26	ergocalciferol.....	23	FLUTICASONE FUROATE	
DOVATO.....	13	ERIVEDGE.....	11	ELLIPTA.....	34
doxazosin mesylate.....	15	ERLEADA.....	11	FLUTICASONE FUROATE-	
doxepin hcl.....	10, 35	errin.....	26	VILANTEROL.....	34
doxycycline hyclate.....	8	erythromycin.....	32	fluticasone propionate.....	18, 33
doxycycline monohydrate.....	8	ERZOFRI.....	13	FLUTICASONE PROPIONATE	
drospirenone-ethinyl estradiol...	26	escitalopram oxalate.....	10	HFA.....	34
DUAVEE.....	26	esomeprazole magnesium.....	23	FLUTICASONE-	
duloxetine hcl.....	10	ESPEROCT.....	14	SALMETEROL.....	34
DUPIXENT.....	18	estarylla.....	26	fluticasone-salmeterol.....	34
DUROLANE.....	31	estradiol.....	26	fluvoxamine maleate.....	10
dutasteride.....	24	eszopiclone.....	35	folic acid.....	23
DYANAVEL XR.....	16	etonogestrel-ethinyl estradiol....	26	FOLLISTIM AQ.....	25
DYSPORT.....	31	EUCRISA.....	18	FREESTYLE FREEDOM LITE	
EBGLYSS.....	18	EUFLEXXA.....	31	KIT W/DEVICE.....	20
EDARBYCLOR.....	15	EVAMIST.....	26	FREESTYLE INSULINX TEST	
ELESTRIN.....	26	EVERSENSE 365		STRIPS.....	20
eletriptan hydrobromide.....	11	SENSOR/HOLDER.....	20	FREESTYLE LIBRE 14 DAY	
elinest.....	26	EVERSENSE 365 SMART		READER.....	20
ELIQUIS.....	9	TRANSMIT.....	20	FREESTYLE LIBRE 14 DAY	
ELIQUIS (1.5 MG PACK).....	9	EVERSENSE		SENSOR.....	20
ELIQUIS (2 MG PACK).....	9	SENSOR/HOLDER.....	20	FREESTYLE LIBRE 2 PLUS	
ELIQUIS DVT/PE STARTER		EVERSENSE SMART		SENSOR.....	20
PACK.....	9	TRANSMITTER.....	20	FREESTYLE LIBRE 2	
ELOCTATE.....	14	EVEXITHROID.....	28	READER.....	20
eluryng.....	26	EXPAREL.....	7	FREESTYLE LIBRE 2	
ELYXYB.....	7	EYSUVIS.....	32	SENSOR.....	20
EMGALITY.....	11	ezetimibe.....	15	FREESTYLE LIBRE 3 PLUS	
EMPAVELI.....	14	FABHALTA.....	14	SENSOR.....	20
emtricitabine-tenofovir df.....	13	FABRAZYME.....	24	FREESTYLE LIBRE 3	
EMVERM.....	12	falmina.....	26	READER.....	20
emzahh.....	26	famotidine.....	23	FREESTYLE LIBRE 3	
enalapril maleate.....	15	FARXIGA.....	19	SENSOR.....	20
ENBREL.....	29	FASENRA.....	34	FREESTYLE LITE TEST	
ENBREL MINI.....	29	FASENRA PEN.....	34	STRIPS.....	20
ENBREL SURECLICK.....	29	feirza 1.5/30.....	26	FREESTYLE PRECISION	
ENDARI.....	31	feirza 1/20.....	26	NEO SYSTEM.....	21
endocet.....	7	fenofibrate.....	15	FREESTYLE PRECISION	
ENDOMETRIN.....	26	fenofibrate micronized.....	15	NEO TEST STRIPS.....	21
enilloring.....	26	FIASP.....	21	FREESTYLE TEST STRIPS.....	21
ENLITE GLUCOSE SENSOR...	20	FIASP FLEXTOUCH.....	21	FUROSCIX.....	15
enoxaparin sodium.....	9	FIASP PENFILL.....	22	furosemide.....	15
ENSACOVE.....	11	FIASP PUMPCART.....	22	fyavolv.....	26
enskyce.....	26	FILSPARI.....	24	FYCOMPA.....	9
ENSTILAR.....	18	FINACEA.....	18	gabapentin.....	9
ENTRESTO.....	15	finasteride.....	18, 24	gallifrey.....	26
ENTYVIO PEN.....	29	FLAREX.....	32	ganirelix acetate.....	25
enulose.....	23	flecainide acetate.....	15	gavilyte-c.....	23
EPCLUSA.....	13	fluconazole.....	11	gavilyte-g.....	23

GAVRETO.....	11	HUMIRA-CD/UC/HS		INPEN 100-BLUE-NOVOLOG-	
GELSYN-3.....	31	STARTER.....	29	FIASP.....	21
gemfibrozil.....	15	HUMIRA-PSORIASIS/UEIT		INPEN 100-GREY-LILLY-	
generlac.....	23	STARTER.....	29	HUMALOG.....	21
GIVLAARI.....	31	HUMULIN 70/30 KWIKPEN.....	22	INPEN 100-GREY-	
glimepiride.....	19	HUMULIN 70/30 VIAL.....	22	NOVOLOG-FIASP.....	21
glipizide er.....	19	HUMULIN N KWIKPEN.....	22	INPEN 100-PINK-LILLY-	
glipizide ir.....	19	HUMULIN N VIAL.....	22	HUMALOG.....	21
GLUCAGON EMERGENCY		HUMULIN R U-500 KWIKPEN..	22	INPEN 100-PINK-NOVOLOG-	
KIT.....	21	HUMULIN R VIAL.....	22	FIASP.....	21
glycopyrrolate.....	23	hydralazine hcl.....	15	INSULIN ASPART.....	22
GLYXAMBI.....	19	hydrochlorothiazide.....	15	INSULIN ASPART FLEXPEN...	22
GRALISE.....	17	hydrocodone-acetaminophen.....	7	INSULIN DEGLUDEC	
guanfacine hcl.....	15	hydrocortisone.....	18, 25	FLEXTOUCH.....	22
guanfacine hcl er.....	16	hydrocortisone (perianal).....	30	INSULIN GLARGINE MAX	
GUARDIAN 4 GLUCOSE		hydromorphone hcl.....	7	SOLOSTAR.....	22
SENSOR.....	21	hydroxychloroquine sulfate.....	12	INSULIN GLARGINE	
GUARDIAN 4 TRANSMITTER.	21	hydroxyzine hcl.....	14	SOLOSTAR.....	22
GUARDIAN LINK 3		hydroxyzine pamoate.....	14	INSULIN LISPRO.....	22
TRANSMITTER.....	21	HYFTOR.....	18	INSULIN LISPRO (1 UNIT	
GUARDIAN REAL-TIME		HYMPAVZI.....	14	DIAL).....	22
CHARGER.....	21	HYSINGLA ER.....	7	INSULIN LISPRO JUNIOR	
GUARDIAN REAL-TIME TEST		ibuprofen.....	7	KWIKPEN.....	22
PLUG.....	21	ICLUSIG.....	12	INSULIN LISPRO PROT &	
GUARDIAN SENSOR 3.....	21	icosapent ethyl.....	15	LISPRO.....	22
GVOKE HYPOPEN 1-PACK.....	21	IDELVION.....	14	INSULIN PEN NEEDLES.....	31
GVOKE HYPOPEN 2-PACK.....	21	IDHIFA.....	12	INVEGA HAFYERA.....	13
GVOKE KIT.....	21	ILET CONTACT DETACH 23"		INVEGA SUSTENNA.....	13
GVOKE PFS.....	21	6MM.....	31	INVEGA TRINZA.....	13
GYNAZOLE-1.....	11	ILET INFUSION-INSET 23"		INVELTYS.....	32
HAEGARDA.....	29	6MM.....	31	ipratropium bromide.....	33, 34
hailey 1.5/30.....	26	ILET INFUSION-INSET 32"		ipratropium-albuterol.....	34
hailey 24 fe.....	26	6MM.....	31	IQIRVO.....	23
hailey fe 1.5/30.....	26	ILET INSULIN PUMP.....	31	irbesartan.....	15
hailey fe 1/20.....	26	ILET STARTER - CONTACT		irbesartan-hydrochlorothiazide..	15
haloette.....	26	DETACH.....	31	isibloom.....	27
HARVONI.....	13	ILET STARTER KIT - INSET		isosorbide mononitrate er.....	15
heather.....	26	23".....	31	isotretinoin.....	19
HEMANGEOL.....	15	ILET STARTER KIT - INSET		jantoven.....	9
HIZENTRA.....	29	32".....	31	JANUMET.....	19
HUMALOG.....	22	imiquimod.....	18, 19	JANUMET XR.....	19
HUMALOG KWIKPEN.....	22	imiquimod pump.....	19	JANUVIA.....	19
HUMALOG MIX 50/50		IMKELDI.....	12	JARDIANCE.....	19
KWIKPEN.....	22	IMVEXXY MAINTENANCE		jasmiel.....	27
HUMALOG MIX 75/25		PACK.....	26	jencycla.....	27
KWIKPEN.....	22	IMVEXXY STARTER PACK.....	27	JENTADUETO.....	19
HUMALOG MIX 75/25 VIAL.....	22	INBRIJA.....	13	JENTADUETO XR.....	19
HUMALOG TEMPO PEN.....	22	incassia.....	27	jinteli.....	27
HUMALOG U-100 JUNIOR		indomethacin.....	7	JIVI.....	14
KWIKPEN.....	22	INFLECTRA.....	29	JORNAY PM.....	16
HUMIRA (1 PEN).....	29	INGREZZA.....	17	JOURNAVX.....	7
HUMIRA (2 PEN).....	29	INPEN 100-BLUE-LILLY-		JUBLIA.....	11
		HUMALOG.....	21	juleber.....	27

JULUCA.....	13	lessina.....	27	LUPRON DEPOT-PED (3-MONTH).....	25
junel 1.5/30.....	27	letrozole.....	12	LUPRON DEPOT-PED (6-MONTH).....	25
junel 1/20.....	27	levetiracetam.....	9	lurasidone hcl.....	13
junel fe 1.5/30.....	27	levocetirizine dihydrochloride....	33	luteria.....	27
junel fe 1/20.....	27	levofloxacin.....	8	LYBALVI.....	13
junel fe 24.....	27	levonorgestrel-ethinyl estrad.....	27	lyleq.....	27
JYLAMVO.....	29	levo-t.....	28	lyllana.....	27
JYNARQUE.....	23	levothyroxine sodium.....	28	LYNPARZA.....	12
kalliga.....	27	levoxyl.....	28	LYUMJEV KWIKPEN.....	22
KANJINTI.....	12	lidocaine.....	7	LYUMJEV VIAL.....	22
KERENDIA.....	31	lidocaine hcl.....	17	lyza.....	27
KESIMPTA.....	17	lidocaine viscous hcl.....	18	marlissa.....	27
ketoconazole.....	11	lidocaine-prilocaine.....	7	matzim la.....	15
ketorolac tromethamine.....	7, 32	LINZESS.....	23	MAVENCLAD.....	17
KETOROLAC.....		liomny.....	28	MAVYRET.....	13
TROMETHAMINE.....	7	liothyronine sodium.....	28	MAYZENT.....	17
ketorolac tromethamine +rfid.....	7	lisdexamfetamine dimesylate....	16	MAYZENT STARTER PACK....	17
KISQALI (200 MG DOSE).....	12	lisinopril.....	15	meclizine hcl.....	10
KISQALI (400 MG DOSE).....	12	lisinopril-hydrochlorothiazide....	15	medroxyprogesterone acetate..	27
KISQALI (600 MG DOSE).....	12	LITFULO.....	19	MEKINIST.....	12
klayesta.....	11	lithium carbonate.....	14	meleya.....	27
KLISYRI (250 MG).....	19	lithium carbonate er.....	14	meloxicam.....	7
KLISYRI (350 MG).....	19	LIVALO.....	15	memantine hcl.....	9
klor-con.....	23	LIVDELZI.....	24	MERIOLOG.....	22
klor-con 10.....	23	LO LOESTRIN FE.....	27	MERIOLOG SOLOSTAR.....	22
klor-con m10.....	23	LOKELMA.....	23	mesalamine.....	30
klor-con m15.....	23	loperamide hcl.....	24	mesalamine er oral capsule	
klor-con m20.....	23	LOPRESSOR.....	15	0.375 gm.....	30
KLOXXADO.....	8	lorazepam.....	14	metformin hcl er.....	19
KOATE.....	14	loryna.....	27	metformin hcl er (mod).....	19
KOSELUGO.....	12	losartan potassium.....	15	metformin hcl er (osm).....	19
KOVALTRY.....	14	losartan potassium-hctz.....	15	metformin hcl ir.....	19
kurvelo.....	27	LOTEMAX SM.....	32	methimazole.....	28
KYLEENA.....	27	lovastatin.....	15	methocarbamol.....	35
KYZATREX.....	25	low-ogestrel.....	27	methotrexate sodium.....	29
labetalol hcl.....	15	lo-zumandimine.....	27	methotrexate sodium (pf).....	29
lacosamide.....	9	lubiprostone.....	24	methylphenidate hcl.....	17
lactulose.....	23	luizza 1.5/30.....	27	methylphenidate hcl er.....	16
lactulose encephalopathy.....	23	luizza 1/20.....	27	methylphenidate hcl er (cd).....	17
lamotrigine.....	9	LUMAKRAS.....	12	methylphenidate hcl er (la).....	17
lamotrigine er.....	9	LUMIGAN.....	32	methylphenidate hcl er (osm)....	17
lansoprazole.....	23	LUMRYZ.....	35	methylphenidate hcl er (xr).....	17
LANTUS SOLOSTAR.....	22	LUMRYZ STARTER PACK.....	35	methylprednisolone.....	25
LANTUS U-100 VIAL.....	22	LUPKYNIS.....	29	metoclopramide hcl.....	10
larin 1.5/30.....	27	LUPRON DEPOT (1-MONTH).....	25	metoprolol succinate er.....	15
larin 1/20.....	27	LUPRON DEPOT (3-MONTH).....	25	metoprolol tartrate.....	16
larin 24 fe.....	27	LUPRON DEPOT (4-MONTH).....		metronidazole.....	8, 19
larin fe 1.5/30.....	27	INTRAMUSCULAR KIT 30MG.....	25	microgestin 1.5/30.....	27
larin fe 1/20.....	27	LUPRON DEPOT (6-MONTH).....		microgestin 1/20.....	27
latanoprost.....	32	INTRAMUSCULAR KIT 45MG.....	25	microgestin fe 1.5/30.....	27
leflunomide.....	29	LUPRON DEPOT-PED (1-MONTH).....	25	microgestin fe 1/20.....	27
lenalidomide.....	12				
LEQSELVI.....	19				

midodrine hcl.....	16	NEXTSTELLIS.....	27	NUTROPIN AQ NUSPIN 5.....	25
MIEBO.....	33	NGENLA.....	25	NUWIQ.....	14
mili.....	27	nifedipine er.....	16	NUZYRA.....	8
MINIMED INSTINCT GLUC SENSOR.....	21	nifedipine er osmotic release....	16	nyamyc.....	11
minocycline hcl.....	8	nikki.....	27	nystatin.....	11
minoxidil.....	16	nitrofurantoin macrocrystal.....	8	nystop.....	11
mirabegron er.....	24	nitrofurantoin monohydrate.....		ODOMZO.....	12
MIRENA (52 MG).....	27	macrocrystals.....	8	OFEV.....	34
mirtazapine.....	10	nitroglycerin.....	16	ofloxacin.....	32, 33
MIRVASO.....	19	NIVA THYROID.....	28	olanzapine.....	13
misoprostol.....	23	NIVESTYM.....	14	olmesartan medoxomil.....	16
modafinil.....	35	nora-be.....	27	olmesartan medoxomil-hctz.....	16
mometasone furoate.....	19, 33	NORDITROPIN FLEXPPO.....	25	OLUMIANT.....	29
mono-linyah.....	27	norelgestromin-eth estradiol.....	27	omega-3-acid ethyl esters.....	16
montelukast sodium.....	34	norethin ace-eth estrad-fe.....	27	omeprazole.....	23
morphine sulfate er.....	7	norethindrone.....	27	OMNARIS.....	33
MOTPOLY XR.....	9	norethindrone acetate.....	27	OMNIPOD 5 DEXCOM INTRO KIT.....	31
MOUNJARO.....	19	norethindrone acet-ethinyl est...27		OMNIPOD 5 DEXCOM PODS...31	
MOVANTIK.....	24	norethindrone-eth estradiol.....	27	OMNIPOD 5 LIBRE PODS.....	31
moxifloxacin hcl.....	8, 32	norgestimate-eth estradiol.....	27	OMNIPOD 5 LIBRE2 G6 INTRO GEN5.....	31
MULTAQ.....	16	norgestimate-ethinyl estradiol triphasic.....	27	OMNIPOD DASH INTRO KIT...31	
mupirocin.....	8	NORLIQVA.....	16	OMNIPOD DASH PODS.....	31
mupirocin cream.....	8	norlyroc.....	27	OMNITROPE.....	25
MVASI.....	12	nortriptyline hcl.....	10	OMVOH.....	29
mycophenolate mofetil.....	29	NOVOEIGHT.....	14	OMVOH (300 MG DOSE).....	29
mycophenolate sodium.....	29	NOVOFINE PEN NEEDLE.....	31	ondansetron hcl.....	10
mycophenolic acid.....	29	NOVOFINE PLUS PEN NEEDLE.....	31	ondansetron odt.....	10
MYDAYIS.....	17	NOVOLIN 70/30 FLEXPEN.....	22	ONEXTON.....	19
MYFEMBREE.....	27	NOVOLIN 70/30 FLEXPEN.....		ONGENTYS.....	13
MYHIBBIN.....	29	RELION.....	22	OPSUMIT.....	35
MYOBLOC.....	31	NOVOLIN 70/30 VIAL.....	22	OPVEE.....	8
MYRBETRIQ.....	24	NOVOLIN N FLEXPEN.....	22	OPZELURA.....	19
na sulfate-k sulfate-mg sulf.....	24	NOVOLIN N FLEXPEN.....		ORENCIA.....	29
nabumetone.....	7	RELION.....	22	ORENCIA CLICKJECT.....	29
naloxone hcl.....	8	NOVOLIN N VIAL.....	22	ORENITRAM.....	35
naltrexone hcl.....	8	NOVOLIN R FLEXPEN.....	22	ORENITRAM MONTH 1.....	35
NAPRELAN.....	7	NOVOLIN R FLEXPEN.....		ORENITRAM MONTH 2.....	35
naproxen.....	7	RELION.....	22	ORENITRAM MONTH 3.....	35
naratriptan hcl.....	11	NOVOLIN R VIAL.....	22	ORFADIN.....	24
NASCOBAL.....	23	NOVOLOG FLEXPEN.....	22	ORGOVYX.....	12
NATAZIA.....	27	NOVOLOG MIX 70/30 FLEXPEN.....	22	ORIAHNN.....	28
NAYZILAM.....	9	NOVOLOG MIX 70/30 VIAL.....	22	ORILISSA.....	25
nebivolol hcl.....	16	NOVOLOG PENFILL.....	22	ORLADEYO.....	29
NEFFY.....	34	NOVOLOG U-100 VIAL.....	22	ORLYNVAH.....	8
NEMLUVIO.....	19	NUBEQA.....	12	orquidea.....	28
neomycin-polymyxin-dexameth.....	32	NUCALA.....	34	oseltamivir phosphate.....	13
neomycin-polymyxin-hc.....	33	NUCYNTA.....	7	OSENVELT.....	30
NEULASTA.....	14	NURTEC.....	11	OSPHENA.....	26
NEULASTA ONPRO.....	14	NUTROPIN AQ NUSPIN 10.....	25	OTEZLA.....	29
NEUPRO.....	13	NUTROPIN AQ NUSPIN 20.....	25	OTEZLA XR.....	29
NEXLETOL.....	16				
NEXLIZET.....	16				

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INITIATION PK.....	29	PROAIR RESPIClick.....	34	RHAPSIDO.....	29
OVIDREL.....	25	prochlorperazine maleate.....	10	RHOPRESSA.....	32
oxcarbazepine.....	9	PROCrit.....	14	RINVOQ.....	29
OXLUMO.....	24	PROCTOFOAM HC.....	30	RINVOQ LQ.....	29
oxybutynin chloride.....	24	procto-med hc.....	30	risperidone.....	13
oxybutynin chloride er.....	24	progesterone.....	28	rizatriptan benzoate.....	11
oxycodone hcl.....	7	promethazine hcl.....	10	ROCKLATAN.....	32
oxycodone-acetaminophen.....	7	promethazine-dm.....	33	ropinirole hcl.....	13
OXYCONTIN.....	7	propranolol hcl.....	16	rosuvastatin calcium.....	16
OZEMPIC.....	19	propranolol hcl er.....	16	roweepra.....	9
PANCREAZE.....	24	pseudoephedrine-bromphen- dm.....	33	ROXYBOND.....	7
PANRETIN.....	12	PULMOZYME.....	34	ROZLYTREK.....	12
pantoprazole sodium.....	23	PYLERA.....	24	RUCONEST.....	29
PANZYGA.....	29	PYRIDium.....	24	RUXIENCE.....	12
paroxetine hcl.....	10	QBreXZA.....	19	RYBELSUS.....	19
PAXLOVID (150/100).....	13	QELBREE.....	17	RYDAPT.....	12
PAXLOVID (300/100 & 150/100).....	13	QNAsL.....	33	RYKINDO.....	13
PAXLOVID (300/100).....	13	QNAsL CHILDRENS.....	33	sacubitril-valsartan.....	16
peg-3350/electrolytes.....	24	QSYMIA.....	17	SANTYL.....	19
penicillin v potassium.....	8	quetiapine fumarate.....	13	SAXENDA.....	17
PERFOROMIST.....	34	quetiapine fumarate er.....	13	SCEMBLIX.....	12
periogard.....	18	QULIPTA.....	11	scopolamine.....	10
PERTZYE.....	24	QVAR REDiHALER.....	34	SEREVENT DISKUS.....	34
PHEBURANE.....	24	RADICAVA ORS.....	17	sertraline hcl.....	10
phentermine hcl.....	17	RADICAVA ORS STARTER KIT.....	17	SEYSARA.....	8
PHESGO.....	12	ramipril.....	16	sharobel.....	28
PIFELTRO.....	13	ranolazine er.....	16	sildenafil citrate.....	24, 35
pioglitazone hcl.....	19	RASUVO.....	29	silver sulfadiazine.....	8
PIQRAY.....	12	RAYALDEE.....	30	SIMBRINZA.....	32
polymyxin b-trimethoprim.....	33	REBIF.....	17	SIMPLERA SENSOR.....	21
POMALYST.....	12	REBIF REBIDOSE.....	17	SIMPLERA SYNC SENSOR.....	21
portia-28.....	28	REBIF REBIDOSE TITRATION PACK.....	17	SIMPLERA SYSTEM.....	21
potassium chloride crys er.....	23	REBIF TITRATION PACK.....	17	SIMPONI.....	29
potassium chloride er.....	23	REBINYN.....	14	SIMPONI ARIA.....	29
potassium citrate er.....	23	REBYOTA.....	24	simvastatin.....	16
pramipexole dihydrochloride.....	13	reclipsen.....	28	SKYLA.....	28
prasugrel hcl.....	13	RECOMBinate.....	14	SKYRIZI.....	29, 30
pravastatin sodium.....	16	RELEXxII.....	17	SKYRIZI PEN.....	29
prazosin hcl.....	16	RENTHYROID.....	28	SKYTROFA.....	25
PRECISION XTRA BLOOD GLUCOSE STRIPS.....	21	REPATHA.....	16	SLYND.....	28
prednisolone.....	25	REPATHA SURECLICK.....	16	SOAANZ.....	16
prednisolone acetate.....	32	RESTASIS.....	33	SODIUM OXYBATE.....	35
prednisolone sodium phosphate.....	25	RESTASIS MULTIDOSE.....	33	SOFDRA.....	19
prednisone.....	25	RETACRIT.....	14	SOGROYA.....	25
pregabalin.....	17	RETEVMO.....	12	solifenacin succinate.....	24
PREMARIN.....	28	RETIN-A MICRO PUMP.....	19	SOLIQUA.....	19
PREMPHASE.....	28	REVLIMID.....	12	SOMATULINE DEPOT.....	26
PREMPRO.....	28	REXTOVY.....	8	SOOLANTRA.....	19
PREZCOBIX.....	13	REXULTI.....	13	SOTYKTU.....	30
				SPIRIVA RESPIMAT.....	34
				spironolactone.....	16
				SPRAVATO (56 MG DOSE).....	10

SPRAVATO (84 MG DOSE).....	10	TANDEM MOBI AUTOSOFT		TOPAMAX.....	9
sprintec 28.....	28	XC KIT.....	31	TOPAMAX SPRINKLE.....	9
STELARA.....	30	TANDEM MOBI		topiramate.....	9
STIOLTO RESPIMAT.....	34	AUTOSOFT30 14PK23".....	31	torsemide.....	16
STIVARGA.....	12	TANDEM MOBI		TOUJEO MAX SOLOSTAR.....	22
STOBOCLO.....	30	AUTOSOFTXC 14PK23".....	32	TOUJEO SOLOSTAR.....	22
STRENSIQ.....	24	TANDEM MOBI		TRADJENTA.....	19
STRIVERDI RESPIMAT.....	34	AUTOSOFTXC 14PK5".....	32	tramadol hcl ir.....	7
SUBLOCADE.....	8	TANDEM MOBI TRUSTEEL		tranexamic acid.....	14
subvenite.....	9	SUPP KIT.....	32	TRAZIMERA.....	12
sucralfate.....	23	TANDEM T/SLIM ASFT 30		trazodone hcl.....	10
SUFLAVE.....	24	PK10 23".....	32	TRELEGY ELLIPTA.....	34
sulfamethoxazole-trimethoprim...8		TANDEM T/SLIM ASFT 30		TREMFYA.....	30
sulfatrim pediatric.....	8	PK14 23".....	32	treprostinil.....	35
sumatriptan succinate.....	11	TANDEM T/SLIM ASFT XC		TRESIBA.....	22
SUNOSI.....	35	PK10 23".....	32	TRESIBA FLEXTOUCH.....	22
SUPREP BOWEL PREP KIT....	24	TANDEM T/SLIM ASFT XC		tretinoin.....	19
SUTAB.....	24	PK14 23".....	32	TREXALL.....	30
syeda.....	28	TANDEM T/SLIM TRUSTL		triamcinolone acetone.....	19
SYMBICORT.....	34	PK10 23".....	32	triamcinolone in absorbbase.....	19
SYMPAZAN.....	9	tarina 24 fe.....	28	triamterene-hctz.....	16
SYMPROIC.....	24	tarina fe 1/20 eq.....	28	triazolam.....	14
SYMTUZA.....	13	TAVALISSE.....	14	triderm.....	19
SYNJARDY.....	19	TEGLUTIK.....	17	tri-estarylla.....	28
SYNJARDY XR.....	19	TEKTURN.....	16	TRIJARDY XR.....	20
SYNTHROID.....	28	telmisartan.....	16	TRIKAFTA.....	35
T/SLIM X2 3ML CARTRIDGE...31		temazepam.....	35	tri-linyah.....	28
T/SLIM X2 BASAL-IQ PUMP...31		TEPMETKO.....	12	tri-lo-estarylla.....	28
T/SLIM X2 CONTROL-IQ 7.7		terbinafine hcl.....	11	tri-lo-marzia.....	28
PUMP.....	31	terconazole.....	11	tri-lo-mili.....	28
T/SLIM X2 CONTROL-IQ 7.8		teriparatide.....	30	tri-lo-sprintec.....	28
PUMP.....	31	TERIPARATIDE.....	30	tri-mili.....	28
T/SLIM X2 INSULIN PMP		testosterone.....	25	TRINTELLIX.....	10
BASAL6.4.....	31	testosterone cypionate.....	25	TRIPTODUR.....	26
T/SLIM X2 INSULIN PUMP.....	31	TEZRULY.....	24	tri-sprintec.....	28
T/SLIM X2/BASAL-		TEZSPIRE.....	34	TRIUMEQ.....	13
IQ/ACC/INSTR.....	31	THIOLA.....	24	tri-vylibra.....	28
T/SLIM X2/CONTROL-		THIOLA EC.....	24	tri-vylibra lo.....	28
IQ/ACC/INSTR.....	31	tiadylt er.....	16	TRULICITY.....	20
TABRECTA.....	12	ticagrelor.....	13	TRUQAP.....	12
TACLONEX.....	19	timolol maleate.....	32	TRYNGOLZA.....	16
tacrolimus.....	19, 30	timolol maleate (once-daily).....	32	TRYPTYR.....	33
tadalafil.....	24	timolol maleate ocudose.....	32	turqoz.....	28
TADLIQ.....	35	timolol maleate pf.....	33	TWIIST REFILL KIT.....	32
TAFINLAR.....	12	tiotropium bromide.....	34	TWIIST REFILL	
TAGRISSO.....	12	TIROSINT.....	28	KIT/INFUSION SET.....	32
TAKHZYRO.....	30	TIROSINT-SOL.....	28	TWIIST STARTER KIT.....	32
TALICIA.....	24	tizanidine hcl.....	35	TYMLOS.....	30
TALTZ.....	30	TOBI PODHALER.....	34	TYRVAYA.....	33
tamoxifen citrate.....	12	TOBRADEX ST.....	32	TYVASO.....	35
tamsulosin hcl.....	24	tobramycin-dexamethasone.....	32	TYVASO DPI INSTITUTIONAL	
TANDEM MOBI AUTOSOFT		tolvaptan.....	23	KIT.....	35
30 KIT.....	31	tolvaptan (hyponatremia).....	23		

TYVASO DPI MAINTENANCE KIT	35	VYVGART	11	ZILXI	19
TYVASO DPI TITRATION KIT ..	35	VYVGART HYTRULO	11	ZIOPTAN	33
TYVASO REFILL KIT	35	WAINUA	17	ZIRABEV	12
TYVASO STARTER KIT	35	WAKIX	35	ZOLGENSMA	24
UBRELVY	11	warfarin sodium	9	zolpidem tartrate	36
UCERIS	30	WEGOVY	17	zolpidem tartrate er	35
UDENYCA	14	WEZLANA	30	ZONEGRAN	9
UDENYCA ONBODY	14	WILATE	14	zonisamide	9
ULTOMIRIS	14	WINLEVI	19	ZORYVE	19
unithroid	28	wixela inhub	34	ZTLIDO	7
UZEDY	13	WYNZORA	19	ZUBSOLV	8
valacyclovir hcl	13	XACIATO	8	zumandimine	28
valsartan	16	XARELTO	9	ZURZUVAE	10
valsartan-hydrochlorothiazide ...	16	XARELTO STARTER PACK	9	ZYLET	33
VALTOCO 10 MG DOSE	9	XCOPRI	9		
VALTOCO 15 MG DOSE	9	XELJANZ	30		
VALTOCO 20 MG DOSE	9	XELJANZ XR	30		
VALTOCO 5 MG DOSE	9	XEMBIFY	30		
VANRAFIA	24	XEOMIN	32		
varenicline tartrate	8	XHANCE	33		
VARUBI (180 MG DOSE)	10	XIGDUO XR	20		
VASCEPA	16	XIIDRA	33		
VELSIPITY	30	XOFLUZA (40 MG DOSE)	14		
VELTASSA	23	XOFLUZA (80 MG DOSE)	14		
venlafaxine hcl	10	XOLAIR	34		
venlafaxine hcl er	10	XOPENEX HFA	34		
VENTOLIN HFA	34	XTAMPZA ER	7		
VEOZAH	32	XTANDI	12		
verapamil hcl er	16	xulane	28		
VERKAZIA	33	XYNTHA	14		
VERQUVO	16	XYNTHA SOLOFUSE	14		
VERZENIO	12	XYOSTED	25		
vestura	28	XYWAV	35		
VIBERZI	24	YCANTH	19		
vienva	28	YESINTEK	30		
vilazodone hcl	10	YORVIPATH	32		
vitamin d (ergocalciferol)	23	YUPELRI	34		
VITRAKVI	12	YUTREPIA	35		
VIVITROL	8	yuvaferm	28		
VIVJOA	11	zafemy	28		
VOQUEZNA DUAL PAK	24	ZARXIO	14		
VOQUEZNA TRIPLE PAK	24	ZAVZPRET	11		
VOSEVI	14	ZEJULA	12		
VOYDEYA	14	ZELBORAF	12		
VRAYLAR	13	ZELSUVMI	19		
VTAMA	19	zenatane	19		
VUMERITY	17	ZENPEP	24		
VYJUVEK	19	ZEPBOUND	17		
VYLEESI	17	ZEPOSIA	17		
vylibra	28	ZEPOSIA 7-DAY STARTER PACK	17		
VYNDAMAX	16	ZEPOSIA STARTER KIT	17		
VYVANSE	17	ZILRETTA	25		

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)** សេវាជំនួយភាសាភាគតិចត្រូវ និងការទំនាក់ទំនងភាគតិចត្រូវផ្តល់ឱ្យអ្នកដោយឥតគិតថ្លៃ ដូចជាព័ត៌មានអក្សរធំ មានសម្រាប់អ្នក។ ទូរសព្ទមកលេខភាគតិចត្រូវនៅលើប័ណ្ណសម្គាល់សមាជិករបស់អ្នក។

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 Sprachassistenzen 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.

ATTENZIONE: Se parla **italiano (Italian)** può usufruire di servizi di assistenza linguistica gratuiti e comunicazioni gratuite in altri formati, come ad esempio la stampa a caratteri grandi. Chiami il numero verde riportato sul Suo tesserino identificativo.

注意事項：日本語（**Japanese**）を話される場合、無料の言語支援サービスや、拡大文字など他の形式での無料コミュニケーションをご利用いただけます。[]にお電話ください。

알림사항: 한국어(**Korean**)를 사용하시는 경우 무료 언어 지원 서비스와 대형 활자체 등 다른 형식으로 된 의사 소통 매체를 이용하실 수 있습니다. 회원 ID 카드에 나와 있는 무료 전화번호로 전화해 주십시오.

BAA'ÁKONÍNÍZIN: Diné (**Navajo**) saad bee yáníłt'í go, t'áá jíik'eh saad bee áka'e'eyeed bee áka'anída'wo'í dóó bee ahíł 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.

