



We're here to help you save

LucyRx partners with your employer or health plan to ensure you get the medications you need at the best price.



How to use this document

This formulary list helps you determine which medications are covered by your plan and identify lower-cost options, when available.

Use the key below to understand the drug categories:

- p** Preferred generics:
Lowest-cost options, clinically effective.
- np** Non-Preferred generics:
Higher-cost generics, may have lower-cost alternatives.
- P** Preferred brands:
Brand-name drugs with the best value.
- NP** Non-Preferred brands:
Higher-cost brand-name drugs, may have preferred options.
- NC** Non-Covered drugs:
Not covered by your plan; check for alternatives or discuss with your doctor.

To maximize savings, look for **p** or **P** options first. If your medication is **NC**, talk to your doctor about switching to a covered alternative.

Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits
ANTI-INFECTIVE AGENTS					
PENICILLINS					
AMOXICILLIN- amoxicillin (trihydrate) chew tab 125 mg, 250 mg	P				
amoxicillin (trihydrate) cap 250 mg, 500 mg	p				
amoxicillin (trihydrate) for susp 125 mg/5ml, 200 mg/5ml, 250 mg/5ml, 400 mg/5ml	p				
amoxicillin (trihydrate) tab 500 mg, 875 mg	p				
amoxicillin & k clavulanate for susp 200-28.5 mg/5ml, 250-62.5 mg/5ml, 400-57 mg/5ml	p				
amoxicillin & k clavulanate for susp 600-42.9 mg/5ml (Augmentin es-600)	p				
amoxicillin & k clavulanate tab 250-125 mg, 875-125 mg	p				
amoxicillin & k clavulanate tab 500-125 mg (Augmentin)	p				
AMOXICILLIN/CLAVULANATE P- amoxicillin & k clavulanate tab er 12hr 1000-62.5 mg	P				
ampicillin cap 500 mg	p				
AUGMENTIN- amoxicillin & k clavulanate for susp 125-31.25 mg/5ml	P				
AUGMENTIN ES-600- amoxicillin & k clavulanate for susp 600-42.9 mg/5ml	NP				
dicloxacillin sodium cap 250 mg, 500 mg	p				
PENICILLIN V POTASSIUM- penicillin v potassium for soln 125 mg/5ml, 250 mg/5ml	P				

Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits
penicillin v potassium tab 250 mg, 500 mg	p				
CEPHALOSPORINS					
CEFACTOR- cefaclor cap 250 mg, 500 mg	P				
CEFACTOR- cefaclor for susp 250 mg/5ml	NP				
CEFACTOR ER- cefaclor monohydrate tab er 12hr 500 mg	NP				
CEFADROXIL- cefadroxil tab 1 gm	P				
cefadroxil cap 500 mg	p				
cefadroxil for susp 250 mg/5ml, 500 mg/5ml	p				
cefdinir cap 300 mg	p				
cefdinir for susp 125 mg/5ml, 250 mg/5ml	p				
cefixime cap 400 mg (Suprax)	p				
cefixime for susp 100 mg/5ml	p				
cefixime for susp 200 mg/5ml (Suprax)	p				
CEFPODOXIME PROXETIL- cefpodoxime proxetil for susp 50 mg/5ml, 100 mg/5ml	P				
cefpodoxime proxetil tab 100 mg, 200 mg	p				
cefprozil for susp 125 mg/5ml, 250 mg/5ml	p				
cefprozil tab 250 mg, 500 mg	p				
cefuroxime axetil tab 250 mg, 500 mg	p				
cephalexin cap 250 mg, 500 mg	p				
cephalexin cap 750 mg	np				
cephalexin for susp 125 mg/5ml, 250 mg/5ml	p				
cephalexin tab 250 mg, 500 mg	np				

p = Preferred Generics
np = Non-preferred Generics

P = Preferred Brands
NP = Non-preferred Brands

Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits
MACROLIDES					
azithromycin for susp 100 mg/5ml, 200 mg/5ml (Zithromax)	p				
azithromycin tab 250 mg, 500 mg (Zithromax)	p				
azithromycin tab 600 mg	p				
CLARITHROMYCIN- clarithromycin for susp 125 mg/5ml, 250 mg/5ml	P				
clarithromycin tab er 24hr 500 mg	p				
clarithromycin tab 250 mg, 500 mg	p				
DIFICID- fidaxomicin for susp 40 mg/ml	P				
DIFICID- fidaxomicin tab 200 mg	NP				
E.E.S. GRANULES- erythromycin ethylsuccinate for susp 200 mg/5ml	NP				
E.E.S. 400- erythromycin ethylsuccinate tab 400 mg	NP				
ERYPED 400- erythromycin ethylsuccinate for susp 400 mg/5ml	NP				
ERYTHROMYCIN DR- erythromycin w/ delayed release particles cap 250 mg	NP				
erythromycin ethylsuccinate for susp 200 mg/5ml (E.e.s. granules)	np				
erythromycin ethylsuccinate for susp 400 mg/5ml (Eryped 400)	np				
erythromycin tab delayed release 250 mg, 333 mg, 500 mg	np				
erythromycin tab 250 mg, 500 mg	np				
fidaxomicin tab 200 mg (Dificid)	p				
ZITHROMAX- azithromycin for susp 100 mg/5ml, 200 mg/5ml	NP				
ZITHROMAX- azithromycin tab 250 mg, 500 mg	NP				

Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits
ZITHROMAX TRI-PAK- azithromycin tab 500 mg	NP				
ZITHROMAX Z-PAK- azithromycin tab 250 mg	NP				
TETRACYCLINES					
demeclocycline hcl tab 150 mg, 300 mg	p				
DORYX MPC- doxycycline hyclate tab delayed release 60 mg	NP		•		
doxycycline hyclate cap 50 mg	p				
doxycycline hyclate cap 100 mg (Vibramycin)	p				
DOXYCYCLINE HYCLATE DR- doxycycline hyclate tab delayed release 80 mg	NP		•		
doxycycline hyclate tab delayed release 50 mg, 200 mg (Doryx)	np		•		
doxycycline hyclate tab delayed release 75 mg, 100 mg, 150 mg	np		•		
doxycycline hyclate tab 20 mg, 100 mg	p				
doxycycline hyclate tab 50 mg	np		•		
doxycycline hyclate tab 75 mg, 150 mg (Acticlate)	np		•		
doxycycline monohydrate cap 50 mg, 100 mg	p				
doxycycline monohydrate cap 75 mg, 150 mg	np		•		
doxycycline monohydrate for susp 25 mg/5ml (Vibramycin)	np				
doxycycline monohydrate tab 50 mg, 75 mg, 100 mg, 150 mg	p				
minocycline hcl cap 50 mg, 75 mg, 100 mg	p				

p = Preferred Generics
np = Non-preferred Generics

P = Preferred Brands
NP = Non-preferred Brands

Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits
minocycline hcl tab er 24hr 55 mg, 65 mg, 80 mg, 105 mg, 115 mg (Solodyn)	np		•		
minocycline hcl tab 50 mg	np				
minocycline hcl tab 75 mg, 100 mg	np		•		
MINOCYCLINE HYDROCHLORIDE- minocycline hcl tab er 24hr 45 mg, 90 mg, 135 mg	NP		•		
NUZYRA- omadacycline tosylate tab 150 mg (base equivalent)	NP				
SEYSARA- sarecycline hcl tab 60 mg (base equivalent), 100 mg (base equivalent), 150 mg (base equivalent)	NP		•		
tetracycline hcl cap 250 mg, 500 mg	p				
TETRACYCLINE HYDROCHLORID- tetracycline hcl tab 250 mg, 500 mg	NP		•		
FLUOROQUINOLONES					
BAXDELA- delafloxacin meglumine tab 450 mg (base equiv)	NP				
CIPRO- ciprofloxacin for oral susp 250 mg/5ml (5%) (5 gm/100ml)	NP				
CIPRO- ciprofloxacin for oral susp 500 mg/5ml (10%) (10 gm/100ml)	P				
CIPRO- ciprofloxacin hcl tab 250 mg (base equiv), 500 mg (base equiv)	NP				
ciprofloxacin hcl tab 250 mg (base equiv), 500 mg (base equiv) (Cipro)	p				
ciprofloxacin hcl tab 750 mg (base equiv)	p				
levofloxacin oral soln 25 mg/ml	p				
levofloxacin tab 250 mg, 500 mg, 750 mg	p				
moxifloxacin hcl tab 400 mg (base equiv)	np				

Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits
OFLOXACIN- ofloxacin tab 300 mg	NP				
OFLOXACIN- ofloxacin tab 400 mg	P				
AMINOGLYCOSIDES					
ARIKAYCE- amikacin sulfate liposome inhal susp 590 mg/8.4ml (base eq)	NP	•	•		•
BETHKIS- tobramycin nebu soln 300 mg/4ml	NP	•			
HUMATIN- paromomycin sulfate cap 250 mg	P				
KITABIS PAK- tobramycin nebu soln 300 mg/5ml	NP	•			
neomycin sulfate tab 500 mg	p				
TOBI- tobramycin nebu soln 300 mg/5ml	NP	•			
TOBI PODHALER- tobramycin inhal cap 28 mg	NP	•			
TOBRAMYCIN- tobramycin nebu soln 300 mg/5ml	NP	•			
tobramycin nebu soln 300 mg/5ml (Tobi)	p	•			
tobramycin nebu soln 300 mg/4ml (Bethkis)	np	•			
SULFONAMIDES					
sulfadiazine tab 500 mg	p				
ANTIMYCOBACTERIAL AGENTS					
CYCLOSERINE- cycloserine cap 250 mg	NP				
ethambutol hcl tab 100 mg	p				
ethambutol hcl tab 400 mg (Myambutol)	p				
isoniazid syrup 50 mg/5ml	p				
isoniazid tab 100 mg, 300 mg	p				
PRETOMANID- pretomanid tab 200 mg	P				

p = Preferred Generics
np = Non-preferred Generics

P = Preferred Brands
NP = Non-preferred Brands

Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits
PRIFTIN- rifapentine tab 150 mg	P				
pyrazinamide tab 500 mg	p				
rifabutin cap 150 mg (Mycobutin)	p				
rifampin cap 150 mg, 300 mg	p				
SIRTURO- bedaquiline fumarate tab 20 mg (base equiv), 100 mg (base equiv)	P	•			
ANTIFUNGALS					
ANCOBON- flucytosine cap 250 mg, 500 mg	NP				
BREXAFEMME- ibrexafungerp citrate tab 150 mg	NP				
CRESEMBA- isavuconazonium sulfate cap 74.5 mg, 186 mg	NP				
DIFLUCAN- fluconazole for susp 40 mg/ml	NP				
fluconazole for susp 10 mg/ml, 40 mg/ml (Diflucan)	p				
fluconazole tab 50 mg, 100 mg, 150 mg, 200 mg (Diflucan)	p				
flucytosine cap 250 mg, 500 mg (Ancobon)	p				
griseofulvin microsize susp 125 mg/5ml	p				
griseofulvin microsize tab 500 mg	p				
GRISEOFULVIN ULTRAMICROSI- griseofulvin ultramicrosize tab 165 mg	NP				
griseofulvin ultramicrosize tab 125 mg, 250 mg	np				
itraconazole cap 100 mg (Sporanox)	p				
itraconazole oral soln 10 mg/ml (Sporanox)	p				
ketoconazole tab 200 mg	np				

Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits
NOXAFIL- posaconazole for delayed release susp packet 300 mg	P				
NOXAFIL- posaconazole susp 40 mg/ml	NP				
nystatin tab 500000 unit	p				
posaconazole susp 40 mg/ml (Noxafil)	p				
posaconazole tab delayed release 100 mg (Noxafil)	p				
SPORANOX- itraconazole cap 100 mg	NP				
terbinafine hcl tab 250 mg	p				
TOLSURA- itraconazole cap 65 mg	NP				
VFEND- voriconazole for susp 40 mg/ml	NP				
VIVJOA- oteseconazole cap therapy pack 150 mg (12 weeks)	NP				
voriconazole for susp 40 mg/ml (Vfend)	p				
voriconazole tab 50 mg, 200 mg (Vfend)	p				
ANTIVIRALS					
abacavir sulfate soln 20 mg/ml (base equiv) (Ziagen)	p				•
abacavir sulfate tab 300 mg (base equiv) (Ziagen)	p				•
abacavir sulfate-lamivudine tab 600-300 mg (Epzicom)	p				•
acyclovir cap 200 mg	p				
acyclovir susp 200 mg/5ml (Zovirax)	p				
acyclovir tab 400 mg, 800 mg	p				
adefovir dipivoxil tab 10 mg (Hepsera)	p				

p = Preferred Generics
np = Non-preferred Generics

P = Preferred Brands
NP = Non-preferred Brands

Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits	Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits
APRETUDE- cabotegravir im extended release susp 600 mg/3ml	P	•				efavirenz-lamivudine-tenofovir df tab 600-300-300 mg (Symfi)	p				•
APTIVUS- tipranavir cap 250 mg	NP				•	EFAVIRENZ/LAMIVUDINE/TENO-efavirenz-lamivudine-tenofovir df tab 400-300-300 mg	P				•
atazanavir sulfate cap 150 mg (base equiv)	p				•	emtricitabine caps 200 mg (Emtriva)	np				•
atazanavir sulfate cap 200 mg (base equiv), 300 mg (base equiv) (Reyataz)	p				•	emtricitabine-rilpivirine-tenofovir df tab 200-25-300 mg (Complera)	np				•
BARACLUDE- entecavir oral soln 0.05 mg/ml	P					emtricitabine-tenofovir disoproxil fumarate tab 100-150 mg, 133-200 mg, 167-250 mg, 200-300 mg (Truvada)	p				•
BARACLUDE- entecavir tab 0.5 mg, 1 mg	NP					EMTRIVA- emtricitabine caps 200 mg	NP				•
BIKTARVY- bictegravir-emtricitabine-tenofovir af tab 30-120-15 mg, 50-200-25 mg	P				•	EMTRIVA- emtricitabine soln 10 mg/ml	NP				•
CIMDUO- lamivudine-tenofovir disoproxil fumarate tab 300-300 mg	P				•	entecavir tab 0.5 mg, 1 mg (Baraclude)	p				
COMPLERA- emtricitabine-rilpivirine-tenofovir df tab 200-25-300 mg	NP				•	EPCLUSA- sofosbuvir-velpatasvir pellet pack 150-37.5 mg, 200-50 mg	P	•	•		•
darunavir tab 600 mg, 800 mg (Prezista)	p				•	EPCLUSA- sofosbuvir-velpatasvir tab 200-50 mg, 400-100 mg	P	•	•		•
DELSTRIGO- doravirine-lamivudine-tenofovir df tab 100-300-300 mg	P				•	EPIVIR- lamivudine oral soln 10 mg/ml	NP				•
DESCOVY- emtricitabine-tenofovir alafenamide fumarate tab 120-15 mg, 200-25 mg	P				•	EPIVIR- lamivudine tab 150 mg, 300 mg	NP				•
DOVATO- dolutegravir sodium-lamivudine tab 50-300 mg (base eq)	P				•	etravirine tab 100 mg, 200 mg (Intelece)	p				•
EDURANT- rilpivirine hcl tab 25 mg (base equivalent)	NP				•	EVOTAZ- atazanavir sulfate-cobicistat tab 300-150 mg (base equiv)	P				•
EDURANT PED- rilpivirine hcl tab for oral susp 2.5 mg (base equivalent)	NP				•	famciclovir tab 125 mg, 250 mg, 500 mg	p				
efavirenz tab 600 mg (Sustiva)	p				•	fosamprenavir calcium tab 700 mg (base equiv) (Lexiva)	np				•
efavirenz-emtricitabine-tenofovir df tab 600-200-300 mg	p				•	FUZEON- enfuvirtide for inj 90 mg	NP	•			•

p = Preferred Generics
np = Non-preferred Generics

P = Preferred Brands
NP = Non-preferred Brands

Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits	Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits
GENVOYA- elvitegrav-cobic-emtricitab-tenofovir af tab 150-150-200-10 mg	P				•	LIVTENCITY- maribavir tab 200 mg	NP	•			•
HARVONI- ledipasvir-sofosbuvir pellet pack 33.75-150 mg, 45-200 mg	P	•	•		•	lopinavir-ritonavir tab 100-25 mg, 200-50 mg (Kaletra)	p				•
HARVONI- ledipasvir-sofosbuvir tab 45-200 mg, 90-400 mg	P	•	•		•	maraviroc tab 150 mg, 300 mg (Selzentry)	np				•
INTELENCE- etravirine tab 25 mg	P				•	MAVYRET- glecaprevir-pibrentasvir pellet pack 50-20 mg	P	•	•		•
INTELENCE- etravirine tab 100 mg, 200 mg	NP				•	MAVYRET- glecaprevir-pibrentasvir tab 100-40 mg	P	•	•		•
ISENTRESS- raltegravir potassium chew tab 25 mg (base equiv), 100 mg (base equiv)	P				•	NEVIRAPINE- nevirapine susp 50 mg/5ml	P				•
ISENTRESS- raltegravir potassium packet for susp 100 mg (base equiv)	P				•	nevirapine tab er 24hr 400 mg	p				•
ISENTRESS- raltegravir potassium tab 400 mg (base equiv)	P				•	nevirapine tab 200 mg	p				•
ISENTRESS HD- raltegravir potassium tab 600 mg (base equiv)	P				•	NORVIR- ritonavir powder packet 100 mg	P				•
JULUCA- dolutegravir sodium-rilpivirine hcl tab 50-25 mg (base eq)	P				•	NORVIR- ritonavir tab 100 mg	NP				•
KALETRA- lopinavir-ritonavir soln 400-100 mg/5ml (80-20 mg/ml)	P				•	ODEFSEY- emtricitabine-rilpivirine-tenofovir af tab 200-25-25 mg	P				•
KALETRA- lopinavir-ritonavir tab 100-25 mg, 200-50 mg	NP				•	oseltamivir phosphate cap 30 mg (base equiv), 45 mg (base equiv), 75 mg (base equiv) (Tamiflu)	p				•
LAGEVRIO- molnupiravir cap 200 mg	P				•	oseltamivir phosphate for susp 6 mg/ml (base equiv) (Tamiflu)	p				•
lamivudine oral soln 10 mg/ml (Epivir)	p				•	PAXLOVID- nirmatrelvir tab 6 x 150 mg & ritonavir tab 5 x 100 mg pak	P				•
lamivudine tab 100 mg (hbv) (Epivir hbv)	p				•	PAXLOVID- nirmatrelvir tab 10 x 150 mg & ritonavir tab 10 x 100 mg pak	P				•
lamivudine tab 150 mg, 300 mg (Epivir)	p				•	PAXLOVID- nirmatrelvir tab 20 x 150 mg & ritonavir tab 10 x 100 mg pak	P				•
lamivudine-zidovudine tab 150-300 mg (Combivir)	p				•	PEGASYS- peginterferon alfa-2a inj 180 mcg/ml	P	•	•		•
LEDIPASVIR/SOFOSBUVIR- ledipasvir-sofosbuvir tab 90-400 mg	P	•	•		•	PEGASYS- peginterferon alfa-2a soln prefilled syr 180 mcg/0.5ml	P	•	•		•

p = Preferred Generics
np = Non-preferred Generics

P = Preferred Brands
NP = Non-preferred Brands

Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits	Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits
PIFELTRO- doravirine tab 100 mg	NP				•	SOFOSBUVIR/VELPATASVIR- sofosbuvir-velpatasvir tab 400-100 mg	P	•	•		•
PREVYMIS- letermovir pellet pack 20 mg, 120 mg	NP				•	SOVALDI- sofosbuvir pellet pack 150 mg, 200 mg	P	•	•		•
PREVYMIS- letermovir tab 240 mg, 480 mg	NP				•	SOVALDI- sofosbuvir tab 200 mg, 400 mg	P	•	•		•
PREZCOBIX- darunavir-cobicistat tab 675-150 mg, 800-150 mg	P				•	STRIBILD- elvitegrav-cobic-emtricitab- tenofovdf tab 150-150-200-300 mg	NP				•
PREZISTA- darunavir oral susp 100 mg/ml	P				•	SUNLENCA- lenacapavir sodium tab therapy pack 4 x 300 mg, 5 x 300 mg	NP	•			•
PREZISTA- darunavir tab 75 mg, 150 mg	P				•	SUNLENCA- lenacapavir sodium tab 300 mg	NP	•			•
PREZISTA- darunavir tab 600 mg, 800 mg	NP				•	SYMFI- efavirenz-lamivudine-tenofovir df tab 600-300-300 mg	NP				•
RELENZA DISKHALER- zanamivir aerosol powder breath activated 5 mg/act	NP				•	SYMTUZA- darunavir-cobic- emtricitab-tenofov af tab 800-150-200-10 mg	P				•
RETROVIR- zidovudine cap 100 mg	NP				•	TAMIFLU- oseltamivir phosphate cap 30 mg (base equiv), 45 mg (base equiv), 75 mg (base equiv)	NP				•
RETROVIR- zidovudine syrup 10 mg/ ml	NP				•	TAMIFLU- oseltamivir phosphate for susp 6 mg/ml (base equiv)	NP				•
REYATAZ- atazanavir sulfate cap 200 mg (base equiv), 300 mg (base equiv)	NP				•	tenofovir disoproxil fumarate tab 300 mg (Viread)	p				•
REYATAZ- atazanavir sulfate oral powder packet 50 mg (base equiv)	NP				•	TIVICAY- dolutegravir sodium tab 50 mg (base equiv)	P				•
RIBAVIRIN- ribavirin cap 200 mg	P	•				TIVICAY PD- dolutegravir sodium tab for oral susp 5 mg (base equiv)	P				•
RIBAVIRIN- ribavirin tab 200 mg	P	•				TRIUMEQ- abacavir-dolutegravir- lamivudine tab 600-50-300 mg	P				•
ritonavir tab 100 mg (Norvir)	p				•	TRIUMEQ PD- abacavir-dolutegravir- lamivudine tab for oral sus 60-5-30 mg	P				•
RUKOBIA- fostemsavir tromethamine tab er 12hr 600 mg	NP				•	TRUVADA- emtricitabine-tenofovir disoproxil fumarate tab 100-150 mg,	NP				•
SELZENTRY- maraviroc oral soln 20 mg/ml	NP				•						
SELZENTRY- maraviroc tab 150 mg, 300 mg	NP				•						
SITAVIG- acyclovir buccal tab 50 mg	NP										

p = Preferred Generics
np = Non-preferred Generics

P = Preferred Brands
NP = Non-preferred Brands

Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits	Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits
133-200 mg, 167-250 mg, 200-300 mg						zidovudine syrup 10 mg/ml (Retrovir)	p				•
TYBOST- cobicistat tab 150 mg	NP				•	zidovudine tab 300 mg	p				•
valacyclovir hcl tab 500 mg, 1 gm (Valtrex)	p					ANTIMALARIALS					
VALCYTE- valganciclovir hcl for soln 50 mg/ml (base equiv)	NP					ARAKODA- tafenoquine succinate tab 100 mg (base equivalent)	NP				
VALCYTE- valganciclovir hcl tab 450 mg (base equivalent)	NP					atovaquone-proguanil hcl tab 62.5-25 mg, 250-100 mg (Malarone)	p				
valganciclovir hcl for soln 50 mg/ml (base equiv) (Valcyte)	p					CHLOROQUINE PHOSPHATE- chloroquine phosphate tab 250 mg	P				
valganciclovir hcl tab 450 mg (base equivalent) (Valcyte)	p					chloroquine phosphate tab 500 mg	p				
VALTREX- valacyclovir hcl tab 500 mg, 1 gm	NP					COARTEM- artemether-lumefantrine tab 20-120 mg	P				
VEMLIDY- tenofovir alafenamide fumarate tab 25 mg	P					DARAPRIM- pyrimethamine tab 25 mg	NP				
VIRACEPT- nelfinavir mesylate tab 250 mg, 625 mg	NP				•	hydroxychloroquine sulfate tab 100 mg, 300 mg, 400 mg	p				
VIREAD- tenofovir disoproxil fumarate oral powder 40 mg/gm	P				•	hydroxychloroquine sulfate tab 200 mg (Plaquenil)	p				
VIREAD- tenofovir disoproxil fumarate tab 150 mg, 200 mg, 250 mg	P				•	KRINTAFEL- tafenoquine succinate tab 150 mg (base equivalent)	NP				
VIREAD- tenofovir disoproxil fumarate tab 300 mg	NP				•	MALARONE- atovaquone-proguanil hcl tab 62.5-25 mg, 250-100 mg	NP				
VOSEVI- sofosbuvir-velpatasvir-voxilaprevir tab 400-100-100 mg	P	•	•		•	mefloquine hcl tab 250 mg	p				
XOFLUZA- baloxavir marboxil tab therapy pack 1 x 40 mg (40 mg dose), 1 x 80 mg (80 mg dose)	NP				•	PLAQUENIL- hydroxychloroquine sulfate tab 200 mg	NP				
ZEPATIER- elbasvir-grazoprevir tab 50-100 mg	NP	•	•		•	PRIMAQUINE PHOSPHATE- primaquine phosphate tab 26.3 mg (15 mg base)	NP				
ZIAGEN- abacavir sulfate soln 20 mg/ml (base equiv)	NP				•	primaquine phosphate tab 26.3 mg (15 mg base) (Primaquine phosphate)	p				
zidovudine cap 100 mg (Retrovir)	p				•	pyrimethamine tab 25 mg (Daraprim)	p				

p = Preferred Generics
np = Non-preferred Generics

P = Preferred Brands
NP = Non-preferred Brands

Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits
quinine sulfate cap 324 mg (Qualaquin)	np				
SOVUNA- hydroxychloroquine sulfate tab 200 mg, 300 mg	NP				
AMEBICIDES					
SOLOSEC- secnidazole granules packet 2 gm	P				
ANTHELMINTICS					
albendazole tab 200 mg	p				
BENZNIDAZOLE- benznidazole tab 12.5 mg, 100 mg	P				
BILTRICIDE- praziquantel tab 600 mg	NP				
EMVERM- mebendazole chew tab 100 mg	NP				
IVERMECTIN- ivermectin tab 6 mg	NP				
ivermectin tab 3 mg (Stromectol)	p				
praziquantel tab 600 mg (Biltricide)	p				
STROMECTOL- ivermectin tab 3 mg	NP				
ANTI-INFECTIVE AGENTS - MISC.					
atovaquone susp 750 mg/5ml (Mepron)	p				
BACTRIM- sulfamethoxazole-trimethoprim tab 400-80 mg	NP				
BACTRIM DS- sulfamethoxazole-trimethoprim tab 800-160 mg	NP				
CAYSTON- aztreonam lysine for inhal soln 75 mg (base equivalent)	NP	•			
CLEOCIN- clindamycin hcl cap 75 mg, 150 mg, 300 mg	NP				
CLEOCIN PEDIATRIC GRANULE- clindamycin palmitate hcl for soln 75 mg/5ml (base equiv)	NP				
clindamycin hcl cap 75 mg, 150 mg, 300 mg (Cleocin)	p				

Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits
clindamycin palmitate hcl for soln 75 mg/5ml (base equiv) (Cleocin pediatric gr)	p				
dapsone tab 25 mg, 100 mg	p				
FIRVANQ- vancomycin hcl for oral soln 25 mg/ml (base equivalent), 50 mg/ml (base equivalent)	NP				
fosfomycin tromethamine powd pack 3 gm (base equivalent) (Monurol)	np				
HIPREX- methenamine hippurate tab 1 gm	NP				
IMPAVIDO- miltefosine cap 50 mg	P				
LAMPIT- nifurtimox tab 30 mg, 120 mg	NP				
LIKMEZ- metronidazole susp 500 mg/5ml	NP		•		•
linezolid for susp 100 mg/5ml (Zyvox)	p		•		
linezolid tab 600 mg (Zyvox)	p				
MACROBID- nitrofurantoin monohydrate macrocrystalline cap 100 mg	NP				
MACRODANTIN- nitrofurantoin macrocrystalline cap 25 mg, 50 mg, 100 mg	NP				
MEPRON- atovaquone susp 750 mg/5ml	NP				
methenamine hippurate tab 1 gm (Hiprex)	np				
METRONIDAZOLE- metronidazole tab 125 mg	NP				
metronidazole cap 375 mg (Flagyl)	np				
metronidazole tab 250 mg, 500 mg	p				
NEBUPENT- pentamidine isethionate for nebulization soln 300 mg	NP				

p = Preferred Generics
np = Non-preferred Generics

P = Preferred Brands
NP = Non-preferred Brands

Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits
nitazoxanide tab 500 mg (Alinia)	p				•
NITROFURANTOIN- nitrofurantoin susp 50 mg/5ml	NP		•		
nitrofurantoin macrocrystalline cap 25 mg, 50 mg, 100 mg (Macrochantin)	p				
nitrofurantoin monohydrate macrocrystalline cap 100 mg (Macrobid)	p				
nitrofurantoin susp 25 mg/5ml	p		•		
pentamidine isethionate for nebulization soln 300 mg (Nebupent)	p				
SIVEXTRO- tedizolid phosphate tab 200 mg	P				
sulfamethoxazole-trimethoprim susp 200-40 mg/5ml	p				
sulfamethoxazole-trimethoprim tab 400-80 mg (Bactrim)	p				
sulfamethoxazole-trimethoprim tab 800-160 mg (Bactrim ds)	p				
tinidazole tab 250 mg, 500 mg	np				
TRIMETHOPRIM- trimethoprim tab 100 mg	NP				
trimethoprim tab 100 mg	p				
VANCOGIN- vancomycin hcl cap 125 mg (base equivalent), 250 mg (base equivalent)	NP				
vancomycin hcl cap 125 mg (base equivalent), 250 mg (base equivalent) (Vancocin)	p				
vancomycin hcl for oral soln 25 mg/ml (base equivalent) (Firvanq)	np				
vancomycin hcl for oral soln 50 mg/ml (base equivalent) (Vancomycin hydrochlo)	np				

Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits
XIFAXAN- rifaximin tab 200 mg	NP				
XIFAXAN- rifaximin tab 550 mg	P				
ZYVOX- linezolid for susp 100 mg/5ml	NP		•		
BIOLOGICALS					
VACCINES					
ABRYSVO- rsv pre-fusion f a&b vac recomb for im soln 120 mcg/0.5ml	P				
ACTHIB- haemophilus b polysaccharide conjugate vaccine for inj	P				
AFLURIA 2025-2026- influenza virus vaccine split im susp	P				
AFLURIA 2025-2026- influenza virus vaccine split pf susp pref syringe 0.5 ml	P				
AREXVY- rsvpref3 vaccine recomb adjuvanted for im susp 120 mcg/0.5ml	P				
BEXSERO- meningococcal vac b (recomb omv adjuv) inj prefilled syringe	P				
CAPVAXIVE- pneumococcal 21-valent conjugate vaccine soln pref syr 0.5ml	P				
COMIRNATY 2025-26- covid-19 mrna vac tris-pfizer im susp pref syr 30 mcg/0.3ml	P				
COMIRNATY/5-11Y/2025-26- covid-19 mrna vac tris-s 5-11y-pfizer im susp 10 mcg/0.3ml	P				
ENGERIX-B- hepatitis b vaccine (recombinant) susp pref syr 10 mcg/0.5ml, 20 mcg/ml	P				
ENGERIX-B- hepatitis b vaccine (recombinant) susp 20 mcg/ml	P				

p = Preferred Generics
np = Non-preferred Generics

P = Preferred Brands
NP = Non-preferred Brands

Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits
FLUAD 2025-2026- influenza vac type a&b surface ant adj susp pref syr 0.5 ml	P				
FLUARIX 2025-2026- influenza virus vaccine split pf susp pref syringe 0.5 ml	P				
FLUBLOK 2025-2026- influenza virus vacc recombinant ha pf soln pref syr 0.5 ml	P				
FLUCELVAX 2025-2026- influenza virus vac tiss-cult subunit im susp	P				
FLUCELVAX 2025-2026- influenza virus vac tiss-cult subunit susp pref syr 0.5 ml	P				
FLULAVAL 2025-2026- influenza virus vaccine split pf susp pref syringe 0.5 ml	P				
FLUMIST NASAL VACCINE 202- influenza virus vaccine live intranasal liquid	P				
FLUZONE HIGH-DOSE 2025-20- influenza virus vac split high-dose pf susp pref syr 0.5ml	P				
FLUZONE 2025-2026- influenza virus vaccine split im susp	P				
FLUZONE 2025-2026- influenza virus vaccine split pf susp pref syringe 0.5 ml	P				
GARDASIL 9- human papillomavirus (hpv) 9-valent recomb vac im susp	P				
GARDASIL 9- human papillomavirus (hpv) 9-valent recomb vac susp pref syr	P				
HAVRIX- hepatitis a vaccine susp prefilled syr 720 el unit/0.5ml, 1440 el unit/ml	P				

Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits
HEPLISAV-B- hepatitis b vaccine recomb adjuvanted pref syr 20 mcg/0.5ml	P				
HIBERIX- haemophilus b polysaccharide conjugate vac for inj 10 mcg	P				
IMOVAX RABIES (H.D.C.V.)- rabies virus vaccine, hdc for inj susp	NP				
IPOL INACTIVATED IPV- poliovirus vaccine, ipv inj susp	P				
JYNNEOS- smallpox & monkeypox vac, live, non-replicating inj 0.5 ml	P				
M-M-R II- measles-mumps-rubella virus vaccines for inj soln	P				
MENQUADFI- meningococcal (a, c, y, and w-135) tetanus conjugate vaccine	P				
MENVEO- meningococcal (a, c, y, and w-135) oligo conj vac for inj	P				
MENVEO- meningococcal (a, c, y, and w-135) oligo conj vac im soln	P				
MNEXSPIKE COVID-19 VACCIN- covid-19 mrna vaccine-moderna im susp pref syr 10 mcg/0.2ml	P				
MRESVIA- rsv mrna pre-f vaccine im susp pref syr 50 mcg/0.5ml	P				
NUVAXOVID COVID-19 VACCIN- covid-19 subunit vacc-novavax im susp pref syr 5 mcg/0.5ml	P				
PEDVAX HIB- haemophilus b polysaccharide conj vac im susp 7.5 mcg/0.5 ml	P				
PENBRAYA- meningococcal acyw (tet conj)-mening b (rcmb) vacc for inj	P				
PENMENVY- meningococcal acwy (oligo conj)-mening b (rcmb) vacc for inj	P				

p = Preferred Generics
np = Non-preferred Generics

P = Preferred Brands
NP = Non-preferred Brands

Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits	Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits
PNEUMOVAX 23- pneumococcal vaccine polyvalent soln pref syr 25 mcg/0.5ml	P					VAQTA- hepatitis a vaccine susp prefilled syr 25 unit/0.5ml, 50 unit/ml	P				
PREVNAR 20- pneumococcal 20-valent conjugate vaccine sus pref syr 0.5 ml	P					VARIVAX- varicella virus vac live for inj 1350 pfu/0.5ml	P				
PRIORIX- measles-mumps-rubella virus vaccines for subcutaneous susp	P					VAXNEUVANCE- pneumococcal 15-valent conjugate vaccine sus pref syr 0.5 ml	P				
PROQUAD- measles-mumps-rubella-varicella virus vaccines for susp	P					VIVOTIF- typhoid vaccine cap delayed release	NP				
RABAVERT- rabies vaccine, pcec for inj	NP					TOXOIDS					
RECOMBIVAX HB- hepatitis b vaccine (recombinant) susp pref syr 5 mcg/0.5ml, 10 mcg/ml	P					ADACEL- tet tox-diph-acell pertuss ad inj 5-2-15.5 lf-lf-mcg/0.5ml	P				
RECOMBIVAX HB- hepatitis b vaccine (recombinant) susp 5 mcg/0.5ml, 10 mcg/ml, 40 mcg/ml	P					ADACEL- tet-diph-acell pertuss ad pref syr 5-2-15.5 lf-mcg/0.5ml	P				
ROTARIX- rotavirus vaccine, live oral susp	P					BOOSTRIX- tet-diph-acell pertuss ad pref syr 5-2.5-18.5 lf-mcg/0.5ml	P				
ROTATEQ- rotavirus vaccine, live oral pentavalent soln	P					DAPTACEL- diph, acellular pert & tet tox inj 15 lf-23 mcg-5 lf/0.5ml	P				
SHINGRIX- zoster vac recombinant adjuvanted for im inj 50 mcg/0.5ml	P					INFANRIX- diph, acellular pert & tet tox inj 25 lf-58 mcg-10 lf/0.5ml	P				
SPIKEVAX COVID-19 VACCINE- covid-19 mrna vac 6mo-11yr- moderna im susp pfs 25 mcg/0.25ml	P					KINRIX- diph-tetanus-acell pert-polio, ipv vacc susp pref syr 0.5 ml	P				
SPIKEVAX COVID-19 VACCINE- covid-19 mrna vaccine-moderna im susp pref syr 50 mcg/0.5ml	P					PEDIARIX- diph-tet tox-acell pert-hep b-polio ipv vac susp pref syr	P				
TRUMENBA- meningococcal group b vac (recomb) im susp prefilled syr	P					PENTACEL- diph-ac per-tet tox ad-poliov-haemoph b poly vac for im susp	P				
TWINRIX- hep a-hep b vaccine susp pref syr 720-20 elu-mcg/ml	P					QUADRACEL- diph-tetanus tox ad-acell pert & polio virus, ipv vac inj	P				
VAQTA- hepatitis a vaccine inj susp 25 unit/0.5ml, 50 unit/ml	P					QUADRACEL- diph-tetanus-acell pert-polio, ipv vacc susp pref syr 0.5 ml	P				
						TENIVAC- tetanus-diphtheria toxoids (td) inj 5-2 lf/0.5ml	P				
						VAXELIS- diph-tet tox-ac pert ad-polio ipv-hib-hep b rec susp pre syr	P				

p = Preferred Generics
np = Non-preferred Generics

P = Preferred Brands
NP = Non-preferred Brands

Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits
VAXELIS- diph-tet tox-ac pert ad-polio ipv-hib-hepatitis b recomb susp	P				
BIOLOGICALS MISC					
GRASTEK- timothy grass pollen allergen ext sl tab 2800 bau	NP				
ODACTRA- dust mite mixed ext sl tab 12 sq-hdm	NP				
ORALAIR- grass mixed pollen ext sl tab 300 ir (index of reactivity)	NP				
PALFORZIA INITIAL DOSE ES- peanut powder-dnfp starter pack 0.5 & 1 & 1.5 & 3 mg, 0.5 & 1 & 1.5 & 3 & 6 mg	NP	•			
PALFORZIA LEVEL 0- peanut powder-dnfp cap sprinkle pack 1 x 1 mg (1 mg dose)	NP	•			
PALFORZIA LEVEL 1- peanut powder-dnfp cap sprinkle pack 3 x 1 mg (3 mg dose)	NP	•			
PALFORZIA LEVEL 10- peanut powder-dnfp pack 2 x 20 mg & 2 x 100 mg (240 mg dose)	NP	•			
PALFORZIA LEVEL 11 (MAINT- peanut allergen powder-dnfp maintenance packet 300 mg	NP	•			
PALFORZIA LEVEL 11 (TITRA- peanut allergen powder-dnfp titration packet 300 mg	NP	•			
PALFORZIA LEVEL 2- peanut powder-dnfp cap sprinkle pack 6 x 1 mg (6 mg dose)	NP	•			
PALFORZIA LEVEL 3- peanut powder-dnfp pack 2 x 1 mg & 10 mg (12 mg dose)	NP	•			
PALFORZIA LEVEL 4- peanut powder-dnfp cap sprinkle pack 20 mg (20 mg dose)	NP	•			

Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits
PALFORZIA LEVEL 5- peanut powder-dnfp cap sprinkle pack 2 x 20 mg (40 mg dose)	NP	•			
PALFORZIA LEVEL 6- peanut powder-dnfp cap sprinkle pack 4 x 20 mg (80 mg dose)	NP	•			
PALFORZIA LEVEL 7- peanut powder-dnfp pack 20 mg & 100 mg (120 mg dose)	NP	•			
PALFORZIA LEVEL 8- peanut powder-dnfp pack 3 x 20 mg & 100 mg (160 mg dose)	NP	•			
PALFORZIA LEVEL 9- peanut powder-dnfp pack 2 x 100 mg (200 mg dose)	NP	•			
RAGWITEK- short ragweed pollen allergen extract sl tab 12 amb a 1-u	NP				
ANTINEOPLASTIC AGENTS					
ANTINEOPLASTICS					
abiraterone acetate tab 250 mg, 500 mg (Zytiga)	p	•	•		•
ACTIMMUNE- interferon gamma-1b inj 100 mcg/0.5ml (2000000 unit/0.5ml)	P	•			
AFINITOR- everolimus tab 2.5 mg, 5 mg, 7.5 mg, 10 mg	NP	•	•		•
AFINITOR DISPERZ- everolimus tab for oral susp 2 mg, 3 mg, 5 mg	NP	•	•		•
AKEEGA- niraparib tosylate-abiraterone acetate tab 50-500 mg, 100-500 mg	NP	•	•		•
ALECENSA- alectinib hcl cap 150 mg (base equivalent)	P	•	•		•
ALUNBRIG- brigatinib tab initiation therapy pack 90 mg & 180 mg	P	•	•		•
ALUNBRIG- brigatinib tab 30 mg, 90 mg, 180 mg	P	•	•		•

p = Preferred Generics
np = Non-preferred Generics

P = Preferred Brands
NP = Non-preferred Brands

Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits	Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits
anastrozole tab 1 mg (Arimidex)	P					CASODEX- bicalutamide tab 50 mg	NP	•			
ARIMIDEX- anastrozole tab 1 mg	NP					COMETRIQ- cabozantinib s-mal cap 1 x 80 mg & 1 x 20 mg (100 dose) kit	P	•	•		•
AROMASIN- exemestane tab 25 mg	NP					COMETRIQ- cabozantinib s-mal cap 1 x 80 mg & 3 x 20 mg (140 dose) kit	P	•	•		•
AUGTYRO- repotrectinib cap 40 mg, 160 mg	NP	•	•		•	COMETRIQ- cabozantinib s-malate cap 3 x 20 mg (60 mg dose) kit	P	•	•		•
AVMAPKI FAKZYNJA CO-PACK- avutometinib cap 0.8 mg & defactinib tab 200 mg therapy pack	NP	•	•		•	COPIKTRA- duvelisib cap 15 mg, 25 mg	NP	•	•		•
AYVAKIT- avapritinib tab 25 mg, 50 mg, 100 mg, 200 mg, 300 mg	P	•	•		•	COTELLIC- cobimetinib fumarate tab 20 mg (base equivalent)	P	•	•		•
BALVERSA- erdafitinib tab 3 mg, 4 mg, 5 mg	NP	•	•		•	CYCLOPHOSPHAMIDE- cyclophosphamide cap 25 mg, 50 mg	NP	•			
BESREMI- ropeginterferon alfa-2b-njft soln prefilled syr 500 mcg/ml	P	•	•		•	CYCLOPHOSPHAMIDE- cyclophosphamide tab 50 mg	NP	•			
bexarotene cap 75 mg (Targretin)	P	•	•			cyclophosphamide cap 25 mg, 50 mg (Cyclophosphamide)	P	•			
bicalutamide tab 50 mg (Casodex)	P	•				DANZITEN- nilotinib tartrate tab 71 mg (base equivalent), 95 mg (base equivalent)	NP	•	•		•
BOSULIF- bosutinib cap 50 mg, 100 mg	P	•	•		•	dasatinib tab 20 mg, 50 mg, 70 mg, 80 mg, 100 mg, 140 mg (Sprycel)	P	•	•		•
BOSULIF- bosutinib tab 100 mg, 400 mg, 500 mg	P	•	•		•	DAURISMO- glasdegib maleate tab 25 mg (base equivalent), 100 mg (base equivalent)	NP	•	•		•
BRAFTOVI- encorafenib cap 75 mg	NP	•	•		•	ELIGARD- leuprolide acetate (3 month) for subcutaneous inj kit 22.5mg	P	•			
BRUKINSA- zanubrutinib cap 80 mg	P	•	•		•	ELIGARD- leuprolide acetate (4 month) for subcutaneous inj kit 30 mg	P	•			
BRUKINSA- zanubrutinib tab 160 mg	P	•	•		•	ELIGARD- leuprolide acetate (6 month) for subcutaneous inj kit 45 mg	P	•			
CABOMETYX- cabozantinib s-malate tab 20 mg (base equivalent), 40 mg (base equivalent), 60 mg (base equivalent)	P	•	•		•	ELIGARD- leuprolide acetate for subcutaneous inj kit 7.5 mg	P	•			
CALQUENCE- acalabrutinib maleate tab 100 mg	P	•	•		•						
CAMCEVI- leuprolide mesylate (6 month) emulsion prefilled syr 42 mg	NP	•									
capecitabine tab 150 mg, 500 mg (Xeloda)	P	•	•								
CAPRELSA- vandetanib tab 100 mg, 300 mg	P	•	•		•						

p = Preferred Generics
np = Non-preferred Generics

P = Preferred Brands
NP = Non-preferred Brands

Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits
ENSACOVE- ensartinib hcl cap 25 mg (base equivalent), 100 mg (base equivalent)	NP	•	•		•
ERIVEDGE- vismodegib cap 150 mg	P	•	•		•
ERLEADA- apalutamide tab 60 mg, 240 mg	P	•	•		•
erlotinib hcl tab 25 mg (base equivalent), 100 mg (base equivalent), 150 mg (base equivalent) (Tarceva)	p	•	•		•
ETOPOSIDE- etoposide cap 50 mg	P	•			
EULEXIN- flutamide cap 125 mg	NP	•			
everolimus tab for oral susp 2 mg, 3 mg, 5 mg (Afinitor disperz)	p	•	•		•
everolimus tab 2.5 mg, 5 mg, 7.5 mg, 10 mg (Afinitor)	p	•	•		•
exemestane tab 25 mg (Aromasin)	p				
FARESTON- toremifene citrate tab 60 mg (base equivalent)	NP	•			
FEMARA- letrozole tab 2.5 mg	NP				
FIRMAGON- degarelix acetate for inj 80 mg (base equiv), 120 mg/vial (240 mg dose)	P	•			
FOTIVDA- tivozanib hcl cap 0.89 mg (base equivalent), 1.34 mg (base equivalent)	NP	•	•		•
FRUZAQLA- fruquintinib cap 1 mg, 5 mg	NP	•	•		•
GAVRETO- pralsetinib cap 100 mg	NP	•	•		•
gefitinib tab 250 mg (Iressa)	p	•	•		•
GILOTRIF- afatinib dimaleate tab 20 mg (base equivalent), 30 mg (base equivalent), 40 mg (base equivalent)	P	•	•		•

Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits
GLEEVEC- imatinib mesylate tab 100 mg (base equivalent), 400 mg (base equivalent)	NP	•	•		•
GLEOSTINE- lomustine cap 10 mg, 40 mg, 100 mg	P	•			
GOMEKLI- mirdametinib cap 1 mg, 2 mg	NP	•	•		•
GOMEKLI- mirdametinib tab for oral susp 1 mg	NP	•	•		•
HYCANTIN- topotecan hcl cap 0.25 mg (base equiv), 1 mg (base equiv)	P	•	•		
HYDREA- hydroxyurea cap 500 mg	NP	•			
hydroxyurea cap 500 mg (Hydrea)	p	•			
IBRANCE- palbociclib cap 75 mg, 100 mg, 125 mg	P	•	•		•
IBRANCE- palbociclib tab 75 mg, 100 mg, 125 mg	P	•	•		•
IBTROZI- taletrectinib adipate cap 200 mg	NP	•	•		•
ICLUSIG- ponatinib hcl tab 10 mg (base equiv), 15 mg (base equiv), 30 mg (base equiv), 45 mg (base equiv)	P	•	•		•
IDHIFA- enasidenib mesylate tab 50 mg (base equivalent), 100 mg (base equivalent)	NP	•	•		•
imatinib mesylate tab 100 mg (base equivalent), 400 mg (base equivalent) (Gleevec)	p	•	•		•
IMBRUVICA- ibrutinib cap 70 mg, 140 mg	P	•	•		•
IMBRUVICA- ibrutinib oral susp 70 mg/ml	P	•	•		•
IMBRUVICA- ibrutinib tab 140 mg, 280 mg, 420 mg	P	•	•		•

p = Preferred Generics
np = Non-preferred Generics

P = Preferred Brands
NP = Non-preferred Brands

Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits	Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits
IMKELDI- imatinib mesylate oral soln 80 mg/ml (base equivalent)	NP	•	•		•	LENVIMA 12MG DAILY DOSE- lenvatinib cap therapy pack 3 x 4 mg (12 mg daily dose)	P	•	•		•
INLYTA- axitinib tab 1 mg, 5 mg	P	•	•		•	LENVIMA 14 MG DAILY DOSE- lenvatinib cap therapy pack 10 & 4 mg (14 mg daily dose)	P	•	•		•
INQOVI- decitabine-cedazuridine tab 35-100 mg	NP	•	•		•	LENVIMA 18 MG DAILY DOSE- lenvatinib cap ther pack 10 mg & 2 x 4 mg (18 mg daily dose)	P	•	•		•
INREBIC- fedratinib hcl cap 100 mg	NP	•	•		•	LENVIMA 20 MG DAILY DOSE- lenvatinib cap therapy pack 2 x 10 mg (20 mg daily dose)	P	•	•		•
IRESSA- gefitinib tab 250 mg	NP	•	•		•	LENVIMA 24 MG DAILY DOSE- lenvatinib cap ther pack 2 x 10 mg & 4 mg (24 mg daily dose)	P	•	•		•
ITOVEBI- inavolisib tab 3 mg, 9 mg	P	•	•		•	LENVIMA 4 MG DAILY DOSE- lenvatinib cap therapy pack 4 mg (4 mg daily dose)	P	•	•		•
IWILFIN- eflornithine hcl tab 192 mg	NP	•	•		•	LENVIMA 8 MG DAILY DOSE- lenvatinib cap therapy pack 2 x 4 mg (8 mg daily dose)	P	•	•		•
JAKAFI- ruxolitinib phosphate tab 5 mg (base equivalent), 10 mg (base equivalent), 15 mg (base equivalent), 20 mg (base equivalent), 25 mg (base equivalent)	P	•	•		•	letrozole tab 2.5 mg (Femara)	p				
JAYPIRCA- pirtobrutinib tab 50 mg, 100 mg	NP	•	•		•	leucovorin calcium tab 5 mg, 15 mg, 25 mg	p				
JYLAMVO- methotrexate oral soln 2 mg/ml	NP		•		•	leucovorin calcium tab 10 mg	np				
KISQALI- ribociclib succinate tab pack 200 mg daily dose, 400 mg daily dose (200 mg tab), 600 mg daily dose (200 mg tab)	P	•	•		•	LEUKERAN- chlorambucil tab 2 mg	P	•			
KOSELUGO- selumetinib sulfate cap sprinkle 5 mg, 7.5 mg	NP	•	•		•	leuprolide acetate inj kit 1 mg/0.2ml (5 mg/ml)	p	•			
KOSELUGO- selumetinib sulfate cap 10 mg, 25 mg	NP	•	•		•	LONSURF- trifluridine-tipiracil tab 15-6.14 mg, 20-8.19 mg	P	•	•		•
KRAZATI- adagrasib tab 200 mg	NP	•	•		•	LORBRENA- lorlatinib tab 25 mg, 100 mg	NP	•	•		•
lapatinib ditosylate tab 250 mg (base equiv) (Tykerb)	p	•	•		•	LUMAKRAS- sotorasib tab 120 mg, 240 mg, 320 mg	NP	•	•		•
LAZCLUZE- lazertinib mesylate tab 80 mg, 240 mg	NP	•	•		•	LUPRON DEPOT (1-MONTH)- leuprolide acetate for inj kit 3.75 mg, 7.5 mg	P	•			
LENVIMA 10 MG DAILY DOSE- lenvatinib cap therapy pack 10 mg (10 mg daily dose)	P	•	•		•						

p = Preferred Generics
np = Non-preferred Generics

P = Preferred Brands
NP = Non-preferred Brands

Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits	Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits
LUPRON DEPOT (3-MONTH)- leuprolide acetate (3 month) for inj kit 11.25 mg, 22.5 mg	P	•				METHOTREXATE SODIUM- methotrexate sodium inj 50 mg/2ml (25 mg/ml), 250 mg/10ml (25 mg/ml)	P				
LUPRON DEPOT (4-MONTH)- leuprolide acetate (4 month) for inj kit 30 mg	P	•				methotrexate sodium for inj 1 gm	p				
LUPRON DEPOT (6-MONTH)- leuprolide acetate (6 month) for inj kit 45 mg	P	•				methotrexate sodium inj pf 50 mg/2ml (25 mg/ml), 250 mg/10ml (25 mg/ml), 1000 mg/40ml (25 mg/ml)	p				
LYNPARZA- olaparib tab 100 mg, 150 mg	P	•	•		•	methotrexate sodium tab 2.5 mg (base equiv)	p				
LYSODREN- mitotane tab 500 mg	P	•	•			MYLERAN- busulfan tab 2 mg	P	•			
LYTGOBI- futibatinib tab therapy pack 4 mg (12 mg daily dose), 4 mg (16 mg daily dose), 4 mg (20 mg daily dose)	NP	•	•		•	NERLYNX- neratinib maleate tab 40 mg (base equivalent)	NP	•	•		•
MATULANE- procarbazine hcl cap 50 mg	P	•	•			NEXAVAR- sorafenib tosylate tab 200 mg (base equivalent)	NP	•	•		•
megestrol acetate susp 40 mg/ml	p					NILANDRON- nilutamide tab 150 mg	NP	•			
megestrol acetate tab 20 mg, 40 mg	p					NILOTINIB- nilotinib d-tartrate cap 50 mg (base equivalent), 150 mg (base equivalent), 200 mg (base equivalent)	NP		•		•
MEKINIST- trametinib dimethyl sulfoxide for soln 0.05 mg/ml (base eq)	P	•	•		•	nilotinib hcl cap 50 mg (base equivalent), 150 mg (base equivalent), 200 mg (base equivalent) (Tasigna)	p	•	•		•
MEKINIST- trametinib dimethyl sulfoxide tab 0.5 mg (base equivalent), 2 mg (base equivalent)	P	•	•		•	nilutamide tab 150 mg (Nilandron)	p	•			
MEKTOVI- binimetinib tab 15 mg	NP	•	•		•	NINLARO- ixazomib citrate cap 2.3 mg (base equivalent), 3 mg (base equivalent), 4 mg (base equivalent)	P	•	•		•
mercaptopurine susp 2000 mg/100ml (20 mg/ml) (Purixan)	p	•				NUBEQA- darolutamide tab 300 mg	P	•	•		•
mercaptopurine tab 50 mg	p	•				ODOMZO- sonidegib phosphate cap 200 mg (base equivalent)	P	•	•		•
mesna tab 400 mg (Mesnex)	p					OGSIVEO- nirogacestat hydrobromide tab 50 mg, 100 mg, 150 mg	P	•	•		•
MESNEX- mesna tab 400 mg	NP					OJEMDA- tovorafenib for oral susp 25 mg/ml	NP	•	•		•
METHOTREXATE SODIUM- methotrexate sodium inj pf 1000 mg/40ml (25 mg/ml)	NP										

p = Preferred Generics
np = Non-preferred Generics

P = Preferred Brands
NP = Non-preferred Brands

Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits	Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits
OJEMDA- tovorafenib tab 100 mg	NP	•	•		•	ROZLYTREK- entrectinib pellet pack 50 mg	P	•	•		•
OJJAARA- momelotinib dihydrochloride tab 100 mg, 150 mg, 200 mg	NP	•	•		•	RUBRACA- rucaparib camsylate tab 200 mg (base equivalent), 250 mg (base equivalent), 300 mg (base equivalent)	P	•	•		•
ONUREG- azacitidine tab 200 mg, 300 mg	NP	•	•		•	RYDAPT- midostaurin cap 25 mg	P	•	•		•
ORGOVYX- relugolix tab 120 mg	NP	•	•		•	SCEMBLIX- asciminib hcl tab 20 mg, 40 mg, 100 mg	P	•	•		•
ORSERDU- elacestrant hydrochloride tab 86 mg, 345 mg	NP	•	•		•	SOLTAMOX- tamoxifen citrate oral soln 10 mg/5ml (base equivalent)	P				
pazopanib hcl tab 200 mg (base equiv) (Votrient)	p	•	•		•	sorafenib tosylate tab 200 mg (base equivalent) (Nexavar)	p	•	•		•
PEMAZYRE- pemigatinib tab 4.5 mg, 9 mg, 13.5 mg	NP	•	•		•	SPRYCEL- dasatinib tab 20 mg, 50 mg, 70 mg, 80 mg, 100 mg, 140 mg	NP	•	•		•
PIQRAY 200MG DAILY DOSE- alpelisib tab therapy pack 200 mg daily dose	P	•	•		•	STIVARGA- regorafenib tab 40 mg	P	•	•		•
PIQRAY 250MG DAILY DOSE- alpelisib tab pack 250 mg daily dose (200 mg & 50 mg tabs)	P	•	•		•	sunitinib malate cap 12.5 mg (base equivalent), 25 mg (base equivalent), 37.5 mg (base equivalent), 50 mg (base equivalent) (Sutent)	p	•	•		•
PIQRAY 300MG DAILY DOSE- alpelisib tab pack 300 mg daily dose (2x150 mg tab)	P	•	•		•	SUTENT- sunitinib malate cap 12.5 mg (base equivalent), 25 mg (base equivalent), 37.5 mg (base equivalent), 50 mg (base equivalent)	NP	•	•		•
POMALYST- pomalidomide cap 1 mg, 2 mg, 3 mg, 4 mg	P	•	•		•	TABLOID- thioguanine tab 40 mg	P	•			
PURIXAN- mercaptopurine susp 2000 mg/100ml (20 mg/ml)	NP	•				TABRECTA- capmatinib hcl tab 150 mg, 200 mg	P	•	•		•
QINLOCK- ripretinib tab 50 mg	NP	•	•		•	TAFINLAR- dabrafenib mesylate cap 50 mg (base equivalent), 75 mg (base equivalent)	P	•	•		•
RETEVMO- selpercatinib tab 40 mg, 80 mg, 120 mg, 160 mg	P	•	•		•	TAFINLAR- dabrafenib mesylate tab for oral susp 10 mg (base equiv)	P	•	•		•
REVUFORJ- revumenib citrate tab 25 mg, 110 mg, 160 mg	NP	•	•		•	TAGRISSO- osimertinib mesylate tab 40 mg (base equivalent), 80 mg (base equivalent)	P	•	•		•
REZLIDHIA- olutasidenib cap 150 mg	NP	•	•		•						
ROMVIMZA- vimseltinib cap 14 mg, 20 mg, 30 mg	P	•	•		•						
ROZLYTREK- entrectinib cap 100 mg, 200 mg	P	•	•		•						

p = Preferred Generics
np = Non-preferred Generics

P = Preferred Brands
NP = Non-preferred Brands

Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits	Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits
TALZENNA- talazoparib tosylate cap 0.1 mg (base equivalent), 0.25 mg (base equivalent), 0.35 mg (base equivalent), 0.5 mg (base equivalent), 0.75 mg (base equivalent), 1 mg (base equivalent)	P	•	•		•	TURALIO- pexidartinib hcl cap 125 mg (base equivalent)	NP	•	•		•
tamoxifen citrate tab 10 mg (base equivalent), 20 mg (base equivalent)	p					TYKERB- lapatinib ditosylate tab 250 mg (base equiv)	NP	•	•		•
TARCEVA- erlotinib hcl tab 100 mg (base equivalent)	NP	•	•		•	VANFLYTA- quizartinib dihydrochloride tab 17.7 mg, 26.5 mg	NP	•	•		•
TARGRETIN- bexarotene cap 75 mg	NP	•	•			VENCLEXTA- venetoclax tab 10 mg, 50 mg, 100 mg	P	•	•		•
TASIGNA- nilotinib hcl cap 50 mg (base equivalent), 150 mg (base equivalent), 200 mg (base equivalent)	NP	•	•		•	VENCLEXTA STARTING PACK- venetoclax tab therapy starter pack 10 & 50 & 100 mg	P	•	•		•
TAZVERIK- tazemetostat hbr tab 200 mg	P	•	•		•	VERZENIO- abemaciclib tab 50 mg, 100 mg, 150 mg, 200 mg	P	•	•		•
temozolomide cap 5 mg, 20 mg, 100 mg, 140 mg, 180 mg	p	•	•			VITRAKVI- larotrectinib sulfate cap 25 mg (base equivalent), 100 mg (base equivalent)	P	•	•		•
temozolomide cap 250 mg (Temodar)	p	•	•			VITRAKVI- larotrectinib sulfate oral soln 20 mg/ml (base equivalent)	P	•	•		•
TEPMETKO- tepotinib hcl tab 225 mg	NP	•	•		•	VIZIMPRO- dacomitinib tab 15 mg, 30 mg, 45 mg	NP	•	•		•
TIBSOVO- ivosidenib tab 250 mg	P	•	•		•	VONJO- pacritinib citrate cap 100 mg	NP	•	•		•
toremifene citrate tab 60 mg (base equivalent) (Fareston)	p	•				VORANIGO- vorasidenib tab 10 mg, 40 mg	P	•	•		•
tretinoin cap 10 mg	p	•	•			VOTRIENT- pazopanib hcl tab 200 mg (base equiv)	NP	•	•		•
TREXALL- methotrexate sodium tab 5 mg (base equiv), 7.5 mg (base equiv), 10 mg (base equiv), 15 mg (base equiv)	NP					WELIREG- belzutifan tab 40 mg	NP	•	•		•
TRUQAP- capivasertib tab therapy pack 160 mg, 200 mg	NP	•	•		•	XALKORI- crizotinib cap sprinkle 20 mg, 50 mg, 150 mg	P	•	•		•
TRUQAP- capivasertib tab 200 mg	NP	•	•		•	XALKORI- crizotinib cap 200 mg, 250 mg	P	•	•		•
TUKYSA- tucatinib tab 50 mg, 150 mg	NP	•	•		•	XATMEP- methotrexate oral soln 2.5 mg/ml	NP		•		
						XELODA- capecitabine tab 150 mg, 500 mg	NP	•	•		

p = Preferred Generics
np = Non-preferred Generics

P = Preferred Brands
NP = Non-preferred Brands

Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits	Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits
XOSPATA- gilteritinib fumarate tablet 40 mg (base equivalent)	NP	•	•		•	ALKINDI SPRINKLE- hydrocortisone cap sprinkle 1 mg, 5 mg	NP	•	•		
XPOVIO- selinexor tab therapy pack 10 mg (40 mg once weekly), 40 mg (40 mg twice weekly), 40 mg (80 mg once weekly), 50 mg (100 mg once weekly), 60 mg (60 mg once weekly)	NP	•	•		•	budesonide delayed release particles cap 3 mg	p				
XPOVIO 60 MG TWICE WEEKLY- selinexor tab therapy pack 20 mg (60 mg twice weekly)	NP	•	•		•	budesonide tab er 24hr 9 mg (Uceris)	np		•		
XPOVIO 80 MG TWICE WEEKLY- selinexor tab therapy pack 20 mg (80 mg twice weekly)	NP	•	•		•	CORTEF- hydrocortisone tab 5 mg, 10 mg, 20 mg	NP				
XTANDI- enzalutamide cap 40 mg	P	•	•		•	CORTISONE ACETATE- cortisone acetate tab 25 mg	NP				
XTANDI- enzalutamide tab 40 mg, 80 mg	P	•	•		•	deflazacort susp 22.75 mg/ml (Emflaza)	np	•	•		
YONSA- abiraterone acetate micronized tab 125 mg	P	•	•		•	deflazacort tab 6 mg, 18 mg (Emflaza)	np	•	•		•
ZEJULA- niraparib tosylate tab 100 mg (base equivalent), 200 mg (base equivalent), 300 mg (base equivalent)	P	•	•		•	deflazacort tab 30 mg, 36 mg (Emflaza)	np	•	•		
ZELBORAF- vemurafenib tab 240 mg	P	•	•		•	DEXAMETHASONE- dexamethasone soln 0.5 mg/5ml	P				
ZOLINZA- vorinostat cap 100 mg	P	•	•		•	dexamethasone elixir 0.5 mg/5ml	p				
ZYDELIG- idelalisib tab 100 mg, 150 mg	P	•	•		•	DEXAMETHASONE INTENSOL- dexamethasone conc 1 mg/ml	P				
ZYKADIA- ceritinib tab 150 mg	P	•	•		•	dexamethasone tab therapy pack 1.5 mg (21)	np				
ZYTIGA- abiraterone acetate tab 250 mg, 500 mg	NP	•	•		•	dexamethasone tab 0.5 mg, 0.75 mg, 1 mg, 1.5 mg, 2 mg, 4 mg, 6 mg	p				
ENDOCRINE AND METABOLIC DRUGS						DEXAMETHASONE 10-DAY DOSE- dexamethasone tab therapy pack 1.5 mg (35)	NP				
CORTICOSTEROIDS						DEXAMETHASONE 13-DAY DOSE- dexamethasone tab therapy pack 1.5 mg (51)	NP				
AGAMREE- vamorolone oral susp 40 mg/ml	NP	•	•		•	EMFLAZA- deflazacort susp 22.75 mg/ml	NP	•	•		
ALKINDI SPRINKLE- hydrocortisone cap sprinkle 0.5 mg, 2 mg	NP	•				EMFLAZA- deflazacort tab 6 mg, 18 mg	NP	•	•		•

p = Preferred Generics
np = Non-preferred Generics

P = Preferred Brands
NP = Non-preferred Brands

Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits
EMFLAZA- deflazacort tab 30 mg, 36 mg	NP	•	•		
EOHILIA- budesonide oral suspension 2 mg/10ml	NP		•		•
fludrocortisone acetate tab 0.1 mg	p				
HEMADY- dexamethasone tab 20 mg	NP				
hydrocortisone tab 5 mg, 10 mg, 20 mg (Cortef)	p				
KHINDIVI- hydrocortisone oral soln 1 mg/ml	NP	•	•		
MEDROL- methylprednisolone tab 2 mg, 4 mg, 8 mg, 16 mg	NP				
MEDROL DOSEPAK- methylprednisolone tab therapy pack 4 mg (21)	NP				
methylprednisolone tab therapy pack 4 mg (21) (Medrol dosepak)	p				
methylprednisolone tab 4 mg, 8 mg, 16 mg, 32 mg (Medrol)	p				
ORAPRED ODT- prednisolone sod phos orally disintegr tab 10 mg (base eq), 15 mg (base eq), 30 mg (base eq)	NP				
PEDIAPRED- prednisolone sod phosphate oral soln 5 mg/5ml (base equiv)	NP				
prednisolone sod phosphate oral soln 15 mg/5ml (base equiv)	p				
prednisolone sod phosphate oral soln 5 mg/5ml (base equiv) (Pediapred)	p				
prednisolone sod phosphate oral soln 10 mg/5ml (base equiv), 20 mg/5ml (base equiv)	np				
PREDNISOLONE SODIUM PHOSP- prednisolone sod phos orally	NP				

Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits
disintegr tab 10 mg (base eq), 15 mg (base eq), 30 mg (base eq)					
prednisolone sodium phosphate oral soln 25 mg/5ml (base eq)	np				
prednisolone soln 15 mg/5ml	p				
prednisolone tab 5 mg	np				
PREDNISONE- prednisone oral soln 5 mg/5ml	P				
PREDNISONE INTENSOL- prednisone conc 5 mg/ml	NP				
prednisone tab therapy pack 5 mg (21), 5 mg (48), 10 mg (21), 10 mg (48)	p				
prednisone tab 1 mg, 2.5 mg, 5 mg, 10 mg, 20 mg, 50 mg	p				
RAYOS- prednisone tab delayed release 1 mg, 2 mg, 5 mg	NP		•		
TAPERDEX 12-DAY- dexamethasone tab therapy pack 1.5 mg (49)	NP				
TAPERDEX 7-DAY- dexamethasone tab therapy pack 1.5 mg (27)	NP				
TARPEYO- budesonide delayed release cap 4 mg	NP		•		•
UCERIS- budesonide tab er 24hr 9 mg	NP		•		
ANDROGEN-ANABOLIC					
ANDROGEL PUMP- testosterone td gel 20.25 mg/act (1.62%)	NP		•		•
danazol cap 50 mg, 100 mg, 200 mg	p		•		
JATENZO- testosterone undecanoate cap 158 mg, 198 mg, 237 mg	NP		•		•
KYZATREX- testosterone undecanoate cap 150 mg, 200 mg	NP		•		•
METHITEST- methyltestosterone oral tab 10 mg	NP		•		•
methyltestosterone cap 10 mg	np		•		•

p = Preferred Generics
np = Non-preferred Generics

P = Preferred Brands
NP = Non-preferred Brands

Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits	Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits
NATESTO- testosterone nasal gel 5.5 mg/act	NP		•		•	ALORA- estradiol td patch twice weekly 0.025 mg/24hr, 0.075 mg/24hr, 0.1 mg/24hr	NP				•
TESTIM- testosterone td gel 50 mg/5gm (1%)	NP		•		•	ANGELIQ- drospirenone-estradiol tab 0.25-0.5 mg, 0.5-1 mg	NP				
TESTOSTERONE- testosterone td gel 50 mg/5gm (1%), 20.25 mg/1.25gm (1.62%), 10mg/act (2%)	NP		•		•	BIJUVA- estradiol-progesterone cap 0.5-100 mg, 1-100 mg	NP				
testosterone cypionate im inj in oil 100 mg/ml, 200 mg/ml (Depo-testosterone)	p		•		•	CLIMARA- estradiol td patch weekly 0.025 mg/24hr, 0.0375 mg/24hr (37.5 mcg/24hr), 0.05 mg/24hr, 0.06 mg/24hr, 0.075 mg/24hr, 0.1 mg/24hr	NP				•
TESTOSTERONE ENANTHATE- testosterone enanthate im inj in oil 200 mg/ml	P		•		•	CLIMARA PRO- estradiol-levonorgestrel td patch weekly 0.045-0.015 mg/day	P				•
TESTOSTERONE PUMP- testosterone td gel 12.5 mg/act (1%)	NP		•		•	COMBIPATCH- estradiol-norethindrone ace td pttw 0.05-0.14 mg/day, 0.05-0.25 mg/day	NP				•
testosterone td gel 25 mg/2.5gm (1%), 50 mg/5gm (1%) (AndroGel)	p		•		•	DELESTROGEN- estradiol valerate im in oil 10 mg/ml, 20 mg/ml	NP				
testosterone td gel 12.5 mg/act (1%)	p		•		•	DEPO-ESTRADIOL- estradiol cypionate im in oil 5 mg/ml	NP				
testosterone td gel 40.5 mg/2.5gm (1.62%) (AndroGel)	np		•		•	DIVIGEL- estradiol td gel 0.25 mg/0.25gm (0.1%), 0.5 mg/0.5gm (0.1%), 0.75 mg/0.75gm (0.1%), 1 mg/gm (0.1%), 1.25 mg/1.25gm (0.1%)	NP				•
testosterone td gel 20.25 mg/act (1.62%) (AndroGel pump)	p		•		•	DUAVEE- conjugated estrogens-bazedoxifene tab 0.45-20 mg	P				
testosterone td soln 30 mg/act	p		•		•	ELESTRIN- estradiol gel 0.06% (0.52 mg/0.87 gm metered-dose pump)	NP				•
TLANDO- testosterone undecanoate cap 112.5 mg	NP		•		•	estradiol & norethindrone acetate tab 0.5-0.1 mg	p				
VOGELXO- testosterone td gel 50 mg/5gm (1%)	NP		•		•	estradiol & norethindrone acetate tab 1-0.5 mg (Activella)	p				
VOGELXO PUMP- testosterone td gel 12.5 mg/act (1%)	NP		•		•						
XYOSTED- testosterone enanthate solution auto-injector 50 mg/0.5ml, 75 mg/0.5ml, 100 mg/0.5ml	NP		•		•						
ESTROGENS											
ACTIVELLA- estradiol & norethindrone acetate tab 1-0.5 mg	NP										

p = Preferred Generics
np = Non-preferred Generics

P = Preferred Brands
NP = Non-preferred Brands

Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits
estradiol gel 0.06% (0.75 mg/1.25 gm metered-dose pump) (EstroGel)	P				•
estradiol tab 0.5 mg, 1 mg, 2 mg (Estrace)	P				
estradiol td gel 0.25 mg/0.25gm (0.1%), 0.5 mg/0.5gm (0.1%), 0.75 mg/0.75gm (0.1%), 1 mg/gm (0.1%), 1.25 mg/1.25gm (0.1%) (Divigel)	P				•
estradiol td patch twice weekly 0.025 mg/24hr, 0.0375 mg/24hr, 0.05 mg/24hr, 0.075 mg/24hr, 0.1 mg/24hr (Vivelle-dot)	P				•
estradiol td patch weekly 0.025 mg/24hr, 0.0375 mg/24hr (37.5 mcg/24hr), 0.05 mg/24hr, 0.06 mg/24hr, 0.075 mg/24hr, 0.1 mg/24hr (Climara)	P				•
estradiol valerate im in oil 10 mg/ml, 20 mg/ml, 40 mg/ml (Delestrogen)	NP				
ESTROGEL- estradiol gel 0.06% (0.75 mg/1.25 gm metered-dose pump)	NP				•
EVAMIST- estradiol transdermal spray 1.53 mg/spray	NP				•
MENOSTAR- estradiol td patch weekly 14 mcg/24hr	NP				•
MINIVELLE- estradiol td patch twice weekly 0.025 mg/24hr, 0.0375 mg/24hr, 0.05 mg/24hr, 0.075 mg/24hr, 0.1 mg/24hr	NP				•
MYFEMBREE- relugolix-estradiol-norethindrone acetate tab 40-1-0.5 mg	P		•		•

Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits
norethindrone acetate-ethinyl estradiol tab 0.5 mg-2.5 mcg, 1 mg-5 mcg	P				
ORIAHNN- elagolix-estradiol-noreth 300-1-0.5mg & elagolix 300mg cap pack	P		•		•
PREMARIN- estrogens, conjugated tab 0.3 mg, 0.45 mg, 0.625 mg, 0.9 mg, 1.25 mg	P				
PREMPHASE- conj est 0.625(14)/ conj est-medroxypro ac tab 0.625-5mg(14)	P				
PREMPRO- conjugated estrogen-medroxyprogesterone acetate tab 0.3-1.5 mg, 0.45-1.5 mg, 0.625-2.5 mg, 0.625-5 mg	P				
VIVELLE-DOT- estradiol td patch twice weekly 0.025 mg/24hr, 0.0375 mg/24hr, 0.05 mg/24hr, 0.075 mg/24hr, 0.1 mg/24hr	NP				•
CONTRACEPTIVES					
ANNOVERA- segesterone ace-ethinyl estradiol va ring 0.15-0.013 mg/24hr	NP				
AVERI- desogestrel-ethinyl estradiol-fe tab 0.15-0.03 mg	NP				
BALCOLTRA- levonorgestrel-ethinyl estradiol-fe tab 0.1 mg-20 mcg (21)	NP				
BEYAZ- drospirenone-ethinyl estradiol-levomefolate tab 3-0.02-0.451 mg	NP				
DEPO-PROVERA CONTRACEPTIV-medroxyprogesterone acetate im susp prefilled syr 150 mg/ml	NP				
DEPO-PROVERA CONTRACEPTIV-medroxyprogesterone acetate im susp 150 mg/ml	NP				

p = Preferred Generics
np = Non-preferred Generics

P = Preferred Brands
NP = Non-preferred Brands

Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits
DEPO-SUBQ PROVERA 104-medroxyprogesterone acetate susp pref syr 104 mg/0.65ml	NP				
desogest-eth estrad & eth estrad tab 0.15-0.02/0.01 mg(21/5) (Mircette)	p				
desogestrel & ethinyl estradiol tab 0.15 mg-30 mcg	p				
drospirenone-ethinyl estrad-levomefolate tab 3-0.02-0.451 mg (Beyaz)	np				
drospirenone-ethinyl estrad-levomefolate tab 3-0.03-0.451 mg (Safyral)	np				
drospirenone-ethinyl estradiol tab 3-0.02 mg (Yaz)	p				
drospirenone-ethinyl estradiol tab 3-0.03 mg (Yasmin 28)	p				
ELLA- ulipristal acetate tab 30 mg	P				
ethynodiol diacetate & ethinyl estradiol tab 1 mg-35 mcg, 1 mg-50 mcg	p				
FEMLYV- norethindrone ace & ethinyl estradiol tab disint 1 mg-20 mcg	NP				
levonor-eth est tab 0.15-0.02/0.025/0.03 mg & eth est 0.01 mg (Quartette)	np				
levonorg-eth est tab 0.1-0.02mg(84) & eth est tab 0.01mg(7) (Loseasonique)	p				
levonorg-eth est tab 0.15-0.03mg(84) & eth est tab 0.01mg(7) (Seasonique)	p				
levonorgestrel & ethinyl estradiol (91-day) tab 0.15-0.03 mg	p				

Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits
levonorgestrel & ethinyl estradiol tab 0.1 mg-20 mcg, 0.15 mg-30 mcg	p				
levonorgestrel tab 1.5 mg	np				
levonorgestrel-eth estra tab 0.05-30/0.075-40/0.125-30mg-mcg	p				
levonorgestrel-ethinyl estradiol (continuous) tab 90-20 mcg	np				
levonorgestrel-ethinyl estradiol-fe tab 0.1 mg-20 mcg (21) (Balcoltra)	np				
LO LOESTRIN FE- norethin-eth estradiol-fe tab 1 mg-10 mcg (24)/10 mcg (2)	P				
medroxyprogesterone acetate im susp prefilled syr 150 mg/ml (Depo-provera contrac)	p				
medroxyprogesterone acetate im susp 150 mg/ml (Depo-provera contrac)	p				
MIRENA- levonorgestrel iud 20 mcg/day (initial) (52 mg total)	P				
NATAZIA- estradiol valerate-dienogest tab 3 mg /2-2 mg/2-3 mg/1 mg	NP				
NEXTSTELLIS- drospirenone-estetrol tab 3-14.2 mg	NP				
norelgestromin-ethinyl estradiol td ptwk 150-35 mcg/24hr	p				
norethindrone & ethinyl estradiol tab 0.4 mg-35 mcg, 0.5 mg-35 mcg, 1 mg-35 mcg	p				
norethindrone & ethinyl estradiol-fe chew tab 0.4 mg-35 mcg	p				
norethindrone & ethinyl estradiol-fe chew tab 0.8 mg-25 mcg (Generess fe)	np				
norethindrone ac-ethinyl estrad-fe tab 1-20/1-30/1-35 mg-mcg	p				

p = Preferred Generics
np = Non-preferred Generics

P = Preferred Brands
NP = Non-preferred Brands

Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits	Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits
norethindrone ace & ethinyl estradiol tab 1 mg-20 mcg, 1.5 mg-30 mcg	p					TYBLUME- levonorgestrel & ethinyl estradiol chew tab 0.1 mg-20 mcg	P				
norethindrone ace & ethinyl estradiol-fe tab 1 mg-20 mcg, 1.5 mg-30 mcg	p					VELIVET- desogest-ethin est tab 0.1-0.025/0.125-0.025/0.15-0.025mg-mg	P				
norethindrone ace-eth estradiol-fe chew tab 1 mg-20 mcg (24) (Minastrin 24 fe)	np					YASMIN 28- drospirenone-ethinyl estradiol tab 3-0.03 mg	NP				
norethindrone ace-ethinyl estradiol-fe cap 1 mg-20 mcg (24) (Taytulla)	np					YAZ- drospirenone-ethinyl estradiol tab 3-0.02 mg	NP				
norethindrone ace-ethinyl estradiol-fe tab 1 mg-20 mcg (24)	np					PROGESTINS					
norethindrone tab 0.35 mg	p					medroxyprogesterone acetate tab 2.5 mg, 5 mg, 10 mg (Provera)	p				
norethindrone-eth estradiol tab 0.5-35/0.75-35/1-35 mg-mcg, 0.5-35/1-35/0.5-35 mg-mcg	p					MEGESTROL ACETATE- megestrol acetate susp 625 mg/5ml	NP				
norgestimate & ethinyl estradiol tab 0.25 mg-35 mcg	p					norethindrone acetate tab 5 mg (Aygestin)	p				
norgestimate-eth estrad tab 0.18-25/0.215-25/0.25-25 mg-mcg, 0.18-35/0.215-35/0.25-35 mg-mcg	p					progesterone cap 100 mg, 200 mg (Prometrium)	p				
norgestrel & ethinyl estradiol tab 0.3 mg-30 mcg	p					progesterone im in oil 50 mg/ml	np				
NUVARING- etonogestrel-ethinyl estradiol va ring 0.12-0.015 mg/24hr	p					PROMETRIUM- progesterone cap 100 mg, 200 mg	NP				
SAFYRAL- drospirenone-ethinyl estrad-levomefolate tab 3-0.03-0.451 mg	NP					PROVERA- medroxyprogesterone acetate tab 2.5 mg, 5 mg, 10 mg	NP				
SKYLA- levonorgestrel releasing iud 14 mcg/day (13.5 mg total)	P					ANTIDIABETICS					
SLYND- drospirenone tab 4 mg	NP					Antidiabetics					
TAYTULLA- norethindrone ace-ethinyl estradiol-fe cap 1 mg-20 mcg (24)	NP					acarbose tab 25 mg, 50 mg, 100 mg (Precose)	p				
TWIRLA- levonorgestrel-ethinyl estradiol td ptwk 120-30 mcg/24hr	NP					ACTOPLUS MET- pioglitazone hcl-metformin hcl tab 15-850 mg	NP				
						ACTOS- pioglitazone hcl tab 15 mg (base equiv), 30 mg (base equiv), 45 mg (base equiv)	NP				
						ALOGLIPTIN- alogliptin benzoate tab 6.25 mg (base equiv), 12.5 mg (base equiv), 25 mg (base equiv)	NP			•	•

p = Preferred Generics
np = Non-preferred Generics

P = Preferred Brands
NP = Non-preferred Brands

Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits
ALOGLIPTIN/METFORMIN HCL- alogliptin-metformin hcl tab 12.5-500 mg	NP			•	•
ALOGLIPTIN/METFORMIN HYDR- alogliptin-metformin hcl tab 12.5-1000 mg	NP			•	•
ALOGLIPTIN/PIOGLITAZONE- alogliptin-pioglitazone tab 12.5-30 mg, 25-15 mg, 25-30 mg, 25-45 mg	NP			•	•
BAQSIMI ONE PACK- glucagon nasal powder 3 mg/dose	P				
BAQSIMI TWO PACK- glucagon nasal powder 3 mg/dose	P				
BEXAGLIFLOZIN- bexagliflozin tab 20 mg	NP			•	•
BRENZAVVY- bexagliflozin tab 20 mg	NP			•	•
CYCLOSET- bromocriptine mesylate tab 0.8 mg (base equivalent)	NP				
DAPAGLIFLOZIN PROPANEDIOL- dapagliflozin prop-metformin hcl tab er 24hr 5-1000 mg, 10-1000 mg	NP				•
DAPAGLIFLOZIN PROPANEDIOL- dapagliflozin propanediol tab 5 mg (base equivalent), 10 mg (base equivalent)	NP				•
diazoxide susp 50 mg/ml (Proglycem)	p				
DUETACT- pioglitazone hcl- glimepiride tab 30-2 mg, 30-4 mg	NP				
EXENATIDE- exenatide soln pen-injector 5 mcg/0.02ml, 10 mcg/0.04ml	NP		•		•
FARXIGA- dapagliflozin propanediol tab 5 mg (base equivalent), 10 mg (base equivalent)	P				•
GLIMEPIRIDE- glimepiride tab 3 mg	NP				

Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits
glimepiride tab 1 mg, 2 mg, 4 mg (Amaryl)	p				
GLIPIZIDE- glipizide tab 2.5 mg	NP				
glipizide tab er 24hr 2.5 mg, 5 mg, 10 mg (Glucotrol xl)	p				
glipizide tab 5 mg, 10 mg	p				
glipizide-metformin hcl tab 2.5-250 mg, 2.5-500 mg, 5-500 mg	p				
GLUCAGON EMERGENCY KIT FO- glucagon hcl for inj 1 mg	P				
glucagon for inj 1 mg	p				
GLUCOTROL XL- glipizide tab er 24hr 5 mg, 10 mg	NP				
GLYBURIDE MICRONIZED- glyburide micronized tab 1.5 mg, 3 mg, 6 mg	P				
glyburide tab 1.25 mg, 2.5 mg, 5 mg	p				
glyburide-metformin tab 1.25-250 mg, 2.5-500 mg, 5-500 mg	p				
GLYXAMBI- empagliflozin-linagliptin tab 10-5 mg, 25-5 mg	P				•
GVOKE HYPOPEN 1- PACK- glucagon subcutaneous solution auto-injector 0.5 mg/0.1ml, 1 mg/0.2ml	P				
GVOKE HYPOPEN 2- PACK- glucagon subcutaneous solution auto-injector 0.5 mg/0.1ml, 1 mg/0.2ml	P				
GVOKE KIT- glucagon subcutaneous soln 1 mg/0.2ml	P				
GVOKE PFS- glucagon subcutaneous soln pref syringe 1 mg/0.2ml	P				
INVOKAMET- canagliflozin-metformin hcl tab 50-500 mg, 50-1000 mg, 150-500 mg, 150-1000 mg	NP			•	•

p = Preferred Generics
np = Non-preferred Generics

P = Preferred Brands
NP = Non-preferred Brands

Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits
INVOKAMET XR- canagliflozin-metformin hcl tab er 24hr 50-500 mg, 50-1000 mg, 150-500 mg, 150-1000 mg	NP			•	•
INVOKANA- canagliflozin tab 100 mg, 300 mg	NP			•	•
JANUMET- sitagliptin phosphate-metformin hcl tab 50-500 mg, 50-1000 mg	P				•
JANUMET XR- sitagliptin phosphate-metformin hcl tab er 24hr 50-500 mg, 50-1000 mg, 100-1000 mg	P				•
JANUVIA- sitagliptin phosphate tab 25 mg (base equiv), 50 mg (base equiv), 100 mg (base equiv)	P				•
JARDIANCE- empagliflozin tab 10 mg, 25 mg	P				•
JENTADUETO- linagliptin-metformin hcl tab 2.5-500 mg, 2.5-850 mg, 2.5-1000 mg	NP			•	•
JENTADUETO XR- linagliptin-metformin hcl tab er 24hr 2.5-1000 mg, 5-1000 mg	NP			•	•
KORLYM- mifepristone tab 300 mg	NP	•	•		•
liraglutide soln pen-injector 18 mg/3ml (6 mg/ml) (Victoza)	np		•		•
metformin hcl oral soln 500 mg/5ml (Riomet)	np		•		•
metformin hcl tab er 24hr 500 mg, 750 mg	p				•
metformin hcl tab er 24hr osmotic 500 mg, 1000 mg	np			•	•
metformin hcl tab er 24hr modified release 500 mg, 1000 mg (Glumetza)	np			•	•

Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits
metformin hcl tab 500 mg, 850 mg, 1000 mg	p				
METFORMIN HYDROCHLORIDE-metformin hcl tab 625 mg, 750 mg	NP				
mifepristone tab 300 mg (Korlym)	np	•	•		•
MIGLITOL- miglitol tab 25 mg, 50 mg, 100 mg	NP				
MOUNJARO- tirzepatide soln auto-injector 2.5 mg/0.5ml, 5 mg/0.5ml, 7.5 mg/0.5ml, 10 mg/0.5ml, 12.5 mg/0.5ml, 15 mg/0.5ml	P		•		•
nateglinide tab 60 mg, 120 mg	p				
ONGLYZA- saxagliptin hcl tab 5 mg (base equiv)	NP			•	•
OZEMPIC- semaglutide soln pen-inj 0.25 or 0.5 mg/dose (2 mg/3ml), 1 mg/dose (4 mg/3ml), 2 mg/dose (8 mg/3ml)	P		•		•
pioglitazone hcl tab 15 mg (base equiv), 30 mg (base equiv), 45 mg (base equiv) (Actos)	p				
pioglitazone hcl-glimepiride tab 30-2 mg, 30-4 mg (Duetact)	np				
pioglitazone hcl-metformin hcl tab 15-500 mg, 15-850 mg (Actoplus met)	p				
PROGLYCEM- diazoxide susp 50 mg/ml	NP				
repaglinide tab 0.5 mg, 1 mg, 2 mg	p				
RIOMET- metformin hcl oral soln 500 mg/5ml	NP		•		•
RYBELSUS- semaglutide tab 3 mg, 7 mg, 14 mg	P		•		•
saxagliptin hcl tab 2.5 mg (base equiv), 5 mg (base equiv) (Onglyza)	np				•

p = Preferred Generics
np = Non-preferred Generics

P = Preferred Brands
NP = Non-preferred Brands

Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits
saxagliptin-metformin hcl tab er 24hr 2.5-1000 mg, 5-500 mg, 5-1000 mg (Kombiglyze xr)	np				•
SEGLUROMET- ertugliflozin-metformin hcl tab 2.5-500 mg, 2.5-1000 mg, 7.5-500 mg, 7.5-1000 mg	NP			•	•
SITAGLIPTIN- sitagliptin tab 25 mg, 50 mg, 100 mg	NP			•	•
SITAGLIPTIN/METFORMIN HYD- sitagliptin free base-metformin hcl tab er 24hr 50-500 mg, 50-1000 mg, 100-1000 mg	NP			•	•
SITAGLIPTIN/METFORMIN HYD- sitagliptin free base-metformin hcl tab 50-500 mg, 50-1000 mg	NP			•	•
SOLIQUA 100/33- insulin glargine-lixisenatide sol pen-inj 100-33 unit-mcg/ml	P				•
STEGLATRO- ertugliflozin l-pyroglytamic acid tab 5 mg (base equiv), 15 mg (base equiv)	NP			•	•
STEGLUJAN- ertugliflozin-sitagliptin tab 5-100 mg, 15-100 mg	NP			•	•
SYNJARDY- empagliflozin-metformin hcl tab 5-500 mg, 5-1000 mg, 12.5-500 mg, 12.5-1000 mg	P				•
SYNJARDY XR- empagliflozin-metformin hcl tab er 24hr 5-1000 mg, 10-1000 mg, 12.5-1000 mg, 25-1000 mg	P				•
TRADJENTA- linagliptin tab 5 mg	NP			•	•
TRIJARDY XR- empagliflozin-linagliptin-metformin tab er 24hr 12.5-2.5-1000mg	P				•
TRIJARDY XR- empagliflozin-linagliptin-metformin tab er 24hr	P				•

Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits
5-2.5-1000mg, 10-5-1000 mg, 25-5-1000 mg					
TRULICITY- dulaglutide soln auto-injector 0.75 mg/0.5ml, 1.5 mg/0.5ml, 3 mg/0.5ml, 4.5 mg/0.5ml	P		•		•
VICTOZA- liraglutide soln pen-injector 18 mg/3ml (6 mg/ml)	NP		•		•
XIGDUO XR- dapagliflozin prop-metformin hcl tab er 24hr 2.5-1000 mg, 5-500 mg, 5-1000 mg, 10-500 mg, 10-1000 mg	P				•
XULTOPHY 100/3.6- insulin degludec-liraglutide sol pen-inj 100-3.6 unit-mg/ml	P				•
ZEGALOGUE- dasiglucagon hcl subcutaneous soln auto-inj 0.6 mg/0.6ml	P				
ZEGALOGUE- dasiglucagon hcl subcutaneous soln pref syringe 0.6 mg/0.6ml	P				
ZITUVIMET- sitagliptin free base-metformin hcl tab 50-500 mg, 50-1000 mg	NP			•	•
ZITUVIMET XR- sitagliptin free base-metformin hcl tab er 24hr 50-500 mg, 50-1000 mg, 100-1000 mg	NP			•	•
ZITUVIO- sitagliptin tab 25 mg, 50 mg, 100 mg	NP			•	•
Rapid-Acting Insulins					
ADMELOG- insulin lispro inj soln 100 unit/ml	NP		•		•
ADMELOG SOLOSTAR- insulin lispro soln pen-injector 100 unit/ml (1 unit dial)	NP		•		•
APIDRA- insulin glulisine inj 100 unit/ml	NP		•		•

p = Preferred Generics
np = Non-preferred Generics

P = Preferred Brands
NP = Non-preferred Brands

Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits
APIDRA SOLOSTAR- insulin glulisine soln pen-injector inj 100 unit/ml	NP		•		•
FIASP- insulin aspart (with niacinamide) inj 100 unit/ml	P				•
FIASP FLEXTOUCH- insulin aspart (with niacinamide) sol pen-inj 100 unit/ml	P				•
FIASP PENFILL- insulin aspart (with niacinamide) soln cartridge 100 unit/ml	P				•
FIASP PUMPCART- insulin aspart (with niacinamide) soln cartridge 100 unit/ml	NP				•
HUMALOG- insulin lispro inj soln 100 unit/ml	P				•
HUMALOG- insulin lispro soln cartridge 100 unit/ml	P				•
HUMALOG JUNIOR KWIKPEN- insulin lispro soln pen-injector 100 unit/ml (0.5 unit dial)	P				•
HUMALOG KWIKPEN- insulin lispro soln pen-injector 100 unit/ml (1 unit dial), 200 unit/ml	P				•
HUMALOG TEMPO PEN- insulin lispro soln pen-inj w/transmitter port 100 unit/ml	P				•
INSULIN ASPART- insulin aspart inj soln 100 unit/ml	NP		•		•
INSULIN ASPART FLEXPEN- insulin aspart soln pen-injector 100 unit/ml	NP		•		•
INSULIN ASPART PENFILL- insulin aspart soln cartridge 100 unit/ml	NP		•		•
INSULIN LISPRO- insulin lispro inj soln 100 unit/ml	NP		•		•
INSULIN LISPRO JUNIOR KWI- insulin lispro soln pen-injector 100 unit/ml (0.5 unit dial)	NP		•		•

Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits
INSULIN LISPRO KWIKPEN- insulin lispro soln pen-injector 100 unit/ml (1 unit dial)	NP		•		•
LYUMJEV- insulin lispro-aabc inj 100 unit/ml	P				•
LYUMJEV KWIKPEN- insulin lispro-aabc soln pen-injector 200 unit/ml	P				•
LYUMJEV KWIKPEN- insulin lispro-aabc soln pen-inj 100 unit/ml (1 unit dial)	P				•
LYUMJEV TEMPO PEN- insulin lispro-aabc soln pen-inj w/transmit port 100 unit/ml	P				•
MERILOG- insulin aspart-szjj subcutaneous soln 100 unit/ml	NP		•		•
MERILOG SOLOSTAR- insulin aspart-szjj soln pen-injector 100 unit/ml	NP		•		•
NOVOLOG- insulin aspart inj soln 100 unit/ml	P				•
NOVOLOG FLEXPEN- insulin aspart soln pen-injector 100 unit/ml	P				•
NOVOLOG PENFILL- insulin aspart soln cartridge 100 unit/ml	P				•
Short-Acting Insulins					
AFREZZA- insulin regular (human) inh powd 90 x 8 unit & 90 x 12 unit, 60x4 & 60x8 & 60x12 ut/cart	NP		•		•
AFREZZA- insulin regular (human) inhal powd 90 x 4 unit & 90 x 8 unit	NP		•		•
AFREZZA- insulin regular (human) inhalation powder 4 unit/cartridge, 8 unit/cartridge, 12 unit/cartridge	NP		•		•
HUMULIN R- insulin regular (human) inj 100 unit/ml	P				•
HUMULIN R U-500 KWIKPEN- insulin regular (human) soln pen-injector 500 unit/ml	P				•

p = Preferred Generics
 np = Non-preferred Generics

P = Preferred Brands
 NP = Non-preferred Brands

Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits
NOVOLIN R- insulin regular (human) inj 100 unit/ml	P				•
NOVOLIN R FLEXPEN- insulin regular (human) soln pen-injector 100 unit/ml	P				•
Intermediate-Acting Insulins					
HUMALOG MIX 50/50 KWIKPEN- insulin lispro prot & lispro sus pen-inj 100 unit/ml (50-50)	P				•
HUMALOG MIX 75/25- insulin lispro prot & lispro inj 100 unit/ml (75-25)	P				•
HUMALOG MIX 75/25 KWIKPEN- insulin lispro prot & lispro sus pen-inj 100 unit/ml (75-25)	P				•
HUMULIN N- insulin nph (human) (isophane) inj 100 unit/ml	P				•
HUMULIN N KWIKPEN- insulin nph (human) (isophane) susp pen-injector 100 unit/ml	P				•
HUMULIN 70/30- insulin nph isophane & regular human inj 100 unit/ml (70-30)	P				•
HUMULIN 70/30 KWIKPEN- insulin nph & regular susp pen-inj 100 unit/ml (70-30)	P				•
INSULIN ASPART PROTAMINE/- insulin aspart prot & aspart (human) inj 100 unit/ml (70-30)	NP		•		•
INSULIN ASPART PROTAMINE/- insulin aspart prot & aspart sus pen-inj 100 unit/ml (70-30)	NP		•		•
INSULIN LISPRO PROTAMINE/- insulin lispro prot & lispro sus pen-inj 100 unit/ml (75-25)	NP		•		•
NOVOLIN N- insulin nph (human) (isophane) inj 100 unit/ml	P				•

Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits
NOVOLIN N FLEXPEN- insulin nph (human) (isophane) susp pen-injector 100 unit/ml	P				•
NOVOLIN 70/30- insulin nph isophane & regular human inj 100 unit/ml (70-30)	P				•
NOVOLIN 70/30 FLEXPEN- insulin nph & regular susp pen-inj 100 unit/ml (70-30)	P				•
NOVOLOG MIX 70/30- insulin aspart prot & aspart (human) inj 100 unit/ml (70-30)	P				•
NOVOLOG MIX 70/30 PREFILL- insulin aspart prot & aspart sus pen-inj 100 unit/ml (70-30)	P				•
Basal Insulins					
BASAGLAR KWIKPEN- insulin glargine soln pen-injector 100 unit/ml	NP				•
BASAGLAR TEMPO PEN- insulin glargine pen-inj with transmitter port 100 unit/ml	NP				•
INSULIN DEGLUDEC- insulin degludec inj 100 unit/ml	NP		•		•
INSULIN DEGLUDEC FLEXTOU- insulin degludec soln pen-injector 100 unit/ml, 200 unit/ml	NP		•		•
INSULIN GLARGINE MAX SOLO- insulin glargine soln pen-injector 300 unit/ml (2 unit dial)	NP				•
INSULIN GLARGINE SOLOSTAR- insulin glargine soln pen-injector 300 unit/ml (1 unit dial)	NP				•
INSULIN GLARGINE-YFGN- insulin glargine-yfgn inj 100 unit/ml	P				•

p = Preferred Generics
np = Non-preferred Generics

P = Preferred Brands
NP = Non-preferred Brands

Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits
INSULIN GLARGINE-YFGN- insulin glargine-yfgn soln pen-injector 100 unit/ml	P				•
LANTUS- insulin glargine inj 100 unit/ml	NP		•		•
LANTUS SOLOSTAR- insulin glargine soln pen-injector 100 unit/ml	NP		•		•
REZVOGLAR KWIKPEN- insulin glargine-aglr soln pen-injector 100 unit/ml	NP		•		•
SEMGLEE- insulin glargine-yfgn inj 100 unit/ml	P				•
SEMGLEE- insulin glargine-yfgn soln pen-injector 100 unit/ml	P				•
TOUJEO MAX SOLOSTAR- insulin glargine soln pen-injector 300 unit/ml (2 unit dial)	P				•
TOUJEO SOLOSTAR- insulin glargine soln pen-injector 300 unit/ml (1 unit dial)	P				•
TRESIBA- insulin degludec inj 100 unit/ml	P				•
TRESIBA FLEXTOUCH- insulin degludec soln pen-injector 100 unit/ml, 200 unit/ml	P				•
THYROID AGENTS					
ADTHYZA- thyroid tab 15 mg (1/4 grain), 30 mg (1/2 grain), 60 mg (1 grain), 90 mg (1 1/2 grain), 120 mg (2 grain)	NP				
ARMOUR THYROID- thyroid tab 15 mg (1/4 grain), 30 mg (1/2 grain), 60 mg (1 grain), 90 mg (1 1/2 grain), 120 mg (2 grain), 180 mg (3 grain), 240 mg (4 grain), 300 mg (5 grain)	NP				
CYTOMEL- liothyronine sodium tab 5 mcg, 25 mcg, 50 mcg	NP				

Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits
ERMEZA- levothyroxine sodium oral solution 150 mcg/5ml	NP				
LEVOTHYROXINE SODIUM- levothyroxine sodium cap 13 mcg, 25 mcg, 50 mcg, 75 mcg, 88 mcg, 100 mcg, 112 mcg, 125 mcg, 137 mcg, 150 mcg, 175 mcg, 200 mcg	NP				
levothyroxine sodium tab 25 mcg, 50 mcg, 75 mcg, 88 mcg, 100 mcg, 112 mcg, 125 mcg, 137 mcg, 150 mcg, 175 mcg, 200 mcg, 300 mcg (Synthroid)	p				
liothyronine sodium tab 5 mcg, 25 mcg, 50 mcg (Cytomel)	p				
methimazole tab 5 mg, 10 mg	p				
NIVA THYROID- thyroid tab 15 mg (1/4 grain), 30 mg (1/2 grain), 60 mg (1 grain), 90 mg (1 1/2 grain), 120 mg (2 grain)	NP				
NP THYROID 120- thyroid tab 120 mg (2 grain)	NP				
NP THYROID 15- thyroid tab 15 mg (1/4 grain)	NP				
NP THYROID 30- thyroid tab 30 mg (1/2 grain)	NP				
NP THYROID 60- thyroid tab 60 mg (1 grain)	NP				
NP THYROID 90- thyroid tab 90 mg (1 1/2 grain)	NP				
propylthiouracil tab 50 mg	p				
RENTHYROID- thyroid tab 15 mg (1/4 grain), 30 mg (1/2 grain), 60 mg (1 grain), 90 mg (1 1/2 grain), 120 mg (2 grain)	NP				
SYNTHROID- levothyroxine sodium tab 25 mcg, 50 mcg, 75 mcg,	NP				

p = Preferred Generics
np = Non-preferred Generics

P = Preferred Brands
NP = Non-preferred Brands

Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits	Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits
88 mcg, 100 mcg, 112 mcg, 125 mcg, 137 mcg, 150 mcg, 175 mcg, 200 mcg, 300 mcg						ATELVIA- risedronate sodium tab delayed release 35 mg	NP				
THYQUIDITY- levothyroxine sodium oral solution 100 mcg/5ml	NP					betaine powder for oral solution (Cystadane)	p	•			
THYROID- thyroid tab 15 mg (1/4 grain), 30 mg (1/2 grain), 60 mg (1 grain), 90 mg (1 1/2 grain), 120 mg (2 grain)	NP					BINOSTO- alendronate sodium effervescent tab 70 mg	NP				
TIROSINT- levothyroxine sodium cap 13 mcg, 25 mcg, 37.5 mcg, 44 mcg, 50 mcg, 62.5 mcg, 75 mcg, 88 mcg, 100 mcg, 112 mcg, 125 mcg, 137 mcg, 150 mcg, 175 mcg, 200 mcg	NP					BONSITY- teriparatide soln pen-inj 560 mcg/2.24ml	NP	•	•		•
TIROSINT-SOL- levothyroxine sodium oral solution 13 mcg/ml, 25 mcg/ml, 37.5 mcg/ml, 44 mcg/ml, 50 mcg/ml, 62.5 mcg/ml, 75 mcg/ml, 88 mcg/ml, 100 mcg/ml, 112 mcg/ml, 125 mcg/ ml, 137 mcg/ml, 150 mcg/ml, 175 mcg/ml, 200 mcg/ml	NP					BUPHENYL- sodium phenylbutyrate oral powder 3 gm/teaspoonful	NP	•	•		
						BUPHENYL- sodium phenylbutyrate tab 500 mg	NP	•	•		
						cabergoline tab 0.5 mg	p				
						calcitonin (salmon) inj 200 unit/ml (Miacalcin)	np				
						calcitonin (salmon) nasal soln 200 unit/act	p				
						calcitriol cap 0.25 mcg, 0.5 mcg (Rocaltrol)	p				
						calcitriol oral soln 1 mcg/ml (Rocaltrol)	np				
OXYTOCICS						CARBAGLU- carglumic acid soluble tab 200 mg	NP	•	•		
CERVIDIL- dinoprostone vaginal inserts 10 mg	NP					carglumic acid soluble tab 200 mg (Carbaglu)	p	•	•		
methylergonovine maleate tab 0.2 mg	p					CARNITOR- levocarnitine oral soln 1 gm/10ml (10%)	NP				
						CARNITOR- levocarnitine tab 330 mg	NP				
						CARNITOR SF- levocarnitine oral soln 1 gm/10ml (10%)	NP				
ENDOCRINE and METABOLIC AGENTS - MISC.						cetorelix acetate for inj kit 0.25 mg (Cetrotide)	np	•	•		•
ACTHAR- corticotropin inj gel 80 unit/ ml	NP	•	•			CETROTIDE- cetorelix acetate for inj kit 0.25 mg	NP	•	•		•
ACTONEL- risedronate sodium tab 35 mg, 150 mg	NP										
alendronate sodium oral soln 70 mg/75ml	np										
alendronate sodium tab 10 mg, 35 mg	p										
alendronate sodium tab 70 mg (Fosamax)	p										

p = Preferred Generics
np = Non-preferred Generics

P = Preferred Brands
NP = Non-preferred Brands

Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits	Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits
CHORIONIC GONADOTROPIN- chorionic gonadotropin for im inj 10000 unit	NP	•	•		•	FOLLISTIM AQ- follitropin beta inj 300 unit/0.36ml, 600 unit/0.72ml, 900 unit/1.08ml	P	•	•		•
cinacalcet hcl tab 30 mg (base equiv), 60 mg (base equiv), 90 mg (base equiv) (Sensipar)	p	•	•			FORTEO- teriparatide soln pen-inj 560 mcg/2.24ml	NP	•	•		•
clomiphene citrate tab 50 mg	p					FOSAMAX- alendronate sodium tab 70 mg	NP				
CORTROPHIN- corticotropin inj gel 80 unit/ml	NP	•	•			FOSAMAX PLUS D- alendronate sodium-cholecalciferol tab 70-2800 mg-unit, 70-5600 mg-unit	NP				
CRENESSITY- crinecerfont cap 25 mg, 50 mg, 100 mg	NP	•	•		•	GALAFOLD- migalastat hcl cap 123 mg (base equivalent)	NP	•	•		•
CRENESSITY- crinecerfont oral soln 50 mg/ml	NP	•	•		•	GANIRELIX ACETATE- ganirelix acetate soln prefilled syringe 250 mcg/0.5ml	NP	•	•		•
CYSTADANE- betaine powder for oral solution	NP	•				ganirelix acetate soln prefilled syringe 250 mcg/0.5ml (Ganirelix acetate)	p	•	•		•
DDAVP- desmopressin acetate inj 4 mcg/ml	NP					GENOTROPIN- somatropin for subcutaneous inj cartridge 5 mg, 12 mg (36 unit)	P	•	•		
DDAVP- desmopressin acetate preservative free (pf) inj 4 mcg/ml	NP					GENOTROPIN MINIQUICK- somatropin for subcutaneous inj prefilled syr 0.2 mg, 0.4 mg, 0.6 mg, 0.8 mg, 1 mg, 1.2 mg, 1.4 mg, 1.6 mg, 1.8 mg, 2 mg	P	•	•		
DDAVP- desmopressin acetate tab 0.1 mg, 0.2 mg	NP					GONAL-F- follitropin alfa for inj 450 unit	NP	•	•		•
DESMOPRESSIN ACETATE- desmopressin acetate nasal spray soln 0.01%	P					GONAL-F RFF REDIJECT- follitropin alfa subcutaneous soln pen-inj 300 unit/0.48ml, 450 unit/0.72ml, 900 unit/1.44ml	NP	•	•		•
desmopressin acetate inj 4 mcg/ml (Ddavp)	p					HUMATROPE- somatropin for inj cartridge 6 mg (18 unit), 12 mg (36 unit), 24 mg	NP	•	•		
desmopressin acetate nasal spray soln 0.01% (refrigerated)	p					ibandronate sodium tab 150 mg (base equivalent)	p				
desmopressin acetate preservative free (pf) inj 4 mcg/ml (Ddavp)	p										
desmopressin acetate tab 0.1 mg, 0.2 mg (Ddavp)	p										
DOXERCALCIFEROL- doxercalciferol cap 0.5 mcg, 1 mcg, 2.5 mcg	NP										
EVISTA- raloxifene hcl tab 60 mg	NP										

p = Preferred Generics
np = Non-preferred Generics

P = Preferred Brands
NP = Non-preferred Brands

Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits	Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits
IMCIVREE- setmelanotide acetate subcutaneous soln 10 mg/ml	NP	•	•		•	MYCAPSSA- octreotide acetate cap delayed release 20 mg	NP	•	•		•
INCRELEX- mecasermin inj 40 mg/4ml (10 mg/ml)	P	•				NGENLA- somatrogon-ghla solution pen-injector 24 mg/1.2ml (20 mg/ml), 60 mg/1.2ml (50 mg/ml)	NP	•	•		
ISTURISA- osilodrostat phosphate tab 1 mg, 5 mg	NP	•	•		•	nitisinone cap 2 mg, 5 mg, 10 mg, 20 mg (Orfadin)	p	•			
JYNARQUE- tolvaptan tab therapy pack 15 mg, 30 & 15 mg, 45 & 15 mg, 60 & 30 mg, 90 & 30 mg	p	•	•		•	NITYR- nitisinone tab 2 mg, 5 mg, 10 mg	P	•			
JYNARQUE- tolvaptan tab 15 mg, 30 mg	p	•	•		•	NORDITROPIN FLEXPRO- somatropin solution pen-injector 5 mg/1.5ml, 10 mg/1.5ml, 15 mg/1.5ml, 30 mg/3ml	NP	•	•		
KERENDIA- finerenone tab 10 mg, 20 mg	P			•	•	NOVAREL- chorionic gonadotropin for im inj 5000 unit	NP	•	•		•
KUVAN- sapropterin dihydrochloride powder packet 100 mg, 500 mg	NP	•	•			NULIBRY- fosdenopterin hydrobromide for iv soln 9.5 mg	NP	•			
KUVAN- sapropterin dihydrochloride tab 100 mg	NP	•	•			NUTROPIN AQ NUSPIN 10- somatropin solution pen-injector 10 mg/2ml	NP	•	•		
levocarnitine oral soln 1 gm/10ml (10%) (Carnitor)	p					NUTROPIN AQ NUSPIN 20- somatropin solution pen-injector 20 mg/2ml	NP	•	•		
levocarnitine tab 330 mg (Carnitor)	p					NUTROPIN AQ NUSPIN 5- somatropin solution pen-injector 5 mg/2ml	NP	•	•		
LUPRON DEPOT-PED (1-MONTH-leuprolide acetate for inj pediatric kit 7.5 mg, 11.25 mg, 15 mg)	P	•				OCTREOTIDE ACETATE- octreotide acetate subcutaneous soln pref syr 50 mcg/ml, 100 mcg/ml, 500 mcg/ml	P	•	•		•
LUPRON DEPOT-PED (3-MONTH-leuprolide acetate (3 month) for inj pediatric kit 11.25 mg, 30 mg)	P	•				octreotide acetate inj 50 mcg/ml (0.05 mg/ml), 100 mcg/ml (0.1 mg/ml), 500 mcg/ml (0.5 mg/ml) (Sandostatin)	p	•	•		•
LUPRON DEPOT-PED (6-MONTH-leuprolide acet (6 month) for im inj pediatric kit 45 mg)	P	•				octreotide acetate inj 200 mcg/ml (0.2 mg/ml), 1000 mcg/ml (1 mg/ml)	p	•	•		•
MENOPUR- menotropins for subcutaneous inj 75 unit	NP	•	•		•						
MIACALCIN- calcitonin (salmon) inj 200 unit/ml	NP										
MYALEPT- metreleptin for subcutaneous inj 11.3 mg	NP	•	•								

p = Preferred Generics
np = Non-preferred Generics

P = Preferred Brands
NP = Non-preferred Brands

Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits	Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits
OLPRUVA- sodium phenylbutyrate packet for susp 2 gm therapy pack	NP	•	•			PHEBURANE- sodium phenylbutyrate oral pellets 483 mg/gm	NP	•	•		
OLPRUVA- sodium phenylbutyrate packet for susp 3 gm therapy pack	NP	•	•			PREGNYL- chorionic gonadotropin for im inj 10000 unit	P	•	•		•
OLPRUVA- sodium phenylbutyrate packet for susp 4 gm therapy pack	NP	•	•			raltaxifene hcl tab 60 mg (Evista)	p				
OLPRUVA- sodium phenylbutyrate packet for susp 5 gm therapy pack	NP	•	•			RAVICTI- glycerol phenylbutyrate liquid 1.1 gm/ml	NP	•	•		
OLPRUVA- sodium phenylbutyrate packet for susp 6 gm therapy pack	NP	•	•			RAYALDEE- calcifediol cap er 30 mcg	NP				
OLPRUVA- sodium phenylbutyrate packet for susp 6.67 gm therapy pack	NP	•	•			RECORLEV- levoketoconazole tab 150 mg	NP	•	•		•
OMNITROPE- somatropin for inj 5.8 mg	P	•	•			REVCIVI- elapegedemase-lvlr im soln 2.4 mg/1.5ml (1.6 mg/ml)	P	•			
OMNITROPE- somatropin solution cartridge 5 mg/1.5ml, 10 mg/1.5ml	P	•	•			risedronate sodium tab delayed release 35 mg (Atelvia)	np				
OPFOLDA- miglustat (gaa deficiency) cap 65 mg	NP	•	•		•	risedronate sodium tab 5 mg	np				
ORFADIN- nitisinone cap 2 mg, 5 mg, 10 mg, 20 mg	NP	•				risedronate sodium tab 30 mg	p				
ORFADIN- nitisinone susp 4 mg/ml	P	•				risedronate sodium tab 35 mg, 150 mg (Actonel)	p				
ORLISSA- elagolix sodium tab 150 mg (base equiv), 200 mg (base equiv)	P		•		•	ROCALTRON- calcitriol cap 0.25 mcg, 0.5 mcg	NP				
OSPHENA- ospemifene tab 60 mg	NP					ROCALTRON- calcitriol oral soln 1 mcg/ml	NP				
OIDREL- choriogonadotropin alfa soln prefilled syr 250 mcg/0.5ml	P	•	•		•	SAMSCA- tolvaptan tab 15 mg, 30 mg	NP	•			•
PALYNZIQ- pegvaliase-pqpz subcutaneous soln pref syringe 2.5 mg/0.5ml, 10 mg/0.5ml, 20 mg/ml	NP	•	•			SANDOSTATIN- octreotide acetate inj 50 mcg/ml (0.05 mg/ml), 100 mcg/ml (0.1 mg/ml), 500 mcg/ml (0.5 mg/ml)	NP	•	•		•
paricalcitol cap 1 mcg, 2 mcg (Zemlar)	np					sapropterin dihydrochloride powder packet 100 mg, 500 mg (Kuvan)	np	•	•		
paricalcitol cap 4 mcg	np					sapropterin dihydrochloride tab 100 mg (Kuvan)	np	•	•		
						SENSIPAR- cinacalcet hcl tab 30 mg (base equiv), 60 mg (base equiv), 90 mg (base equiv)	NP	•	•		

p = Preferred Generics
np = Non-preferred Generics

P = Preferred Brands
NP = Non-preferred Brands

Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits	Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits
SEROSTIM- somatropin (non-refrigerated) for subcutaneous inj 4 mg, 5 mg, 6 mg	NP	•	•			TRYNGOLZA- olezarsen sod subcut soln auto-inject 80 mg/0.8ml (base eq)	NP	•	•		•
SIGNIFOR- pasireotide diaspartate inj 0.3 mg/ml (base equiv), 0.6 mg/ml (base equiv), 0.9 mg/ml (base equiv)	NP	•				TYMLOS- abaloparatide subcutaneous soln pen-injector 3120 mcg/1.56ml	P	•	•		•
SKYTROFA- lonapegsomatropin-tcgd for subcutaneous inj cartridge 0.7 mg, 1.4 mg, 1.8 mg, 2.1 mg, 2.5 mg, 3 mg, 3.6 mg, 4.3 mg, 5.2 mg, 6.3 mg, 7.6 mg, 9.1 mg, 11 mg	NP	•	•			VEOZAH- fezolinetant tab 45 mg	NP		•		•
SKYTROFA- lonapegsomatropin-tcgd for subcutaneous inj cart 13.3 mg	NP	•	•			VOXZOGO- vosoritide for subcutaneous inj 0.4 mg, 0.56 mg, 1.2 mg	NP	•	•		•
sodium phenylbutyrate oral powder 3 gm/teaspoonful (Buphenyl)	np	•	•			VYKAT XR- diazoxide choline tab er 24hr 25 mg, 75 mg, 150 mg	NP	•	•		•
sodium phenylbutyrate tab 500 mg (Buphenyl)	np	•	•			XPHOZAH- tenapanor hcl tab 20 mg, 30 mg	NP		•		•
SOGROYA- somapacitan-beco solution pen-injector 5 mg/1.5ml, 10 mg/1.5ml, 15 mg/1.5ml	NP	•	•			XURIDEN- uridine triacetate oral granules packet 2 gm	NP	•			
SOMAVERT- pegvisomant for inj 10 mg (as protein), 15 mg (as protein), 20 mg (as protein), 25 mg (as protein), 30 mg (as protein)	NP	•	•		•	YORVIPATH- palopegteriparatide pen-inj 168 mcg/0.56ml (teriparatide eq), 294 mcg/0.98ml (teriparatide eq), 420 mcg/1.4ml (teriparatide eq)	NP	•	•		•
STRENSIQ- asfotase alfa subcutaneous inj 18 mg/0.45ml, 28 mg/0.7ml, 40 mg/ml, 80 mg/0.8ml	P	•	•			ZEMPLAR- paricalcitol cap 1 mcg, 2 mcg	NP				
SYNAREL- nafarelin acetate nasal soln 2 mg/ml (200 mcg/act) (base eq)	NP	•				ZOMACTON- somatropin for inj 10 mg	NP	•	•		
TERIPARATIDE- teriparatide soln pen-inj 560 mcg/2.24ml	NP	•	•		•	ZOMACTON- somatropin for subcutaneous inj 5 mg	NP	•	•		
teriparatide soln pen-inj 560 mcg/2.24ml (Forteo)	p	•	•		•	CARDIOVASCULAR AGENTS					
tolvaptan tab 15 mg, 30 mg (Samsca)	np	•			•	CARDIOTONICS					
						DIGOXIN- digoxin oral soln 0.05 mg/ml	NP		•		
						digoxin oral soln 0.05 mg/ml (Digoxin)	p		•		
						digoxin tab 62.5 mcg (0.0625 mg) (Lanoxin)	np				
						digoxin tab 125 mcg (0.125 mg), 250 mcg (0.25 mg) (Lanoxin)	p				

p = Preferred Generics
np = Non-preferred Generics

P = Preferred Brands
NP = Non-preferred Brands

Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits
LANOXIN- digoxin tab 62.5 mcg (0.0625 mg), 125 mcg (0.125 mg), 250 mcg (0.25 mg)	NP				
ANTIANGINAL AGENTS					
ASPRUZYO SPRINKLE- ranolazine er granules packet 1000 mg	NP		•		•
ISORDIL TITRADOSE- isosorbide dinitrate tab 5 mg	NP				
ISORDIL TITRADOSE- isosorbide dinitrate tab 40 mg	NP		•		
isosorbide dinitrate tab 5 mg (Isordil titradose)	p				
isosorbide dinitrate tab 10 mg, 20 mg, 30 mg	p				
isosorbide dinitrate tab 40 mg (Isordil titradose)	np		•		
ISOSORBIDE MONONITRATE- isosorbide mononitrate tab 10 mg, 20 mg	P				
isosorbide mononitrate tab er 24hr 30 mg, 60 mg, 120 mg	p				
NITRO-BID- nitroglycerin oint 2%	P				
NITRO-DUR- nitroglycerin td patch 24hr 0.1 mg/hr, 0.2 mg/hr, 0.3 mg/hr, 0.4 mg/hr, 0.6 mg/hr, 0.8 mg/hr	NP				
NITRO-TIME- nitroglycerin cap er 2.5 mg, 6.5 mg, 9 mg	NP				
nitroglycerin sl tab 0.3 mg, 0.4 mg, 0.6 mg (Nitrostat)	p				
nitroglycerin td patch 24hr 0.1 mg/hr, 0.2 mg/hr, 0.4 mg/hr, 0.6 mg/hr (Nitro-dur)	p				
nitroglycerin tl soln 0.4 mg/spray (400 mcg/spray) (Nitrolingual pumpspr)	np				

Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits
NITROLINGUAL- nitroglycerin tl soln 0.4 mg/spray (400 mcg/spray)	NP				
NITROSTAT- nitroglycerin sl tab 0.3 mg, 0.4 mg, 0.6 mg	NP				
ranolazine tab er 12hr 500 mg, 1000 mg (Ranexa)	np				
BETA BLOCKERS					
acebutolol hcl cap 200 mg, 400 mg	p				
atenolol tab 25 mg, 50 mg, 100 mg (Tenormin)	p				
BETAPACE- sotalol hcl tab 80 mg, 120 mg, 160 mg	NP				
BETAPACE AF- sotalol hcl (afib/afib) tab 80 mg, 120 mg, 160 mg	NP				
betaxolol hcl tab 10 mg, 20 mg	np				
BISOPROLOL FUMARATE- bisoprolol fumarate tab 2.5 mg	NP				
bisoprolol fumarate tab 5 mg, 10 mg	p				
BYSTOLIC- nebivolol hcl tab 2.5 mg (base equivalent), 5 mg (base equivalent), 10 mg (base equivalent), 20 mg (base equivalent)	NP				
carvedilol phosphate cap er 24hr 10 mg, 20 mg, 40 mg, 80 mg (Coreg cr)	np		•		
carvedilol tab 3.125 mg, 6.25 mg, 12.5 mg, 25 mg (Coreg)	p				
COREG- carvedilol tab 3.125 mg, 6.25 mg, 12.5 mg, 25 mg	NP				
COREG CR- carvedilol phosphate cap er 24hr 10 mg, 20 mg, 40 mg, 80 mg	NP		•		
HEMANGEOL- propranolol hcl oral soln 4.28 mg/ml (3.75 mg/ml base equiv)	P				

p = Preferred Generics
np = Non-preferred Generics

P = Preferred Brands
NP = Non-preferred Brands

Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits	Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits
INDERAL LA- propranolol hcl cap er 24hr 60 mg, 80 mg, 120 mg, 160 mg	NP					nadolol tab 20 mg, 40 mg, 80 mg (Corgard)	p				
INDERAL XL- propranolol hcl sustained-release beads cap er 24hr 80 mg	NP		•			nebivolol hcl tab 2.5 mg (base equivalent), 5 mg (base equivalent), 10 mg (base equivalent), 20 mg (base equivalent) (Bystolic)	np				
INDERAL XL- propranolol hcl sustained-release beads cap er 24hr 120 mg	NP					pindolol tab 5 mg, 10 mg	p				
INNOPRAN XL- propranolol hcl sustained-release beads cap er 24hr 80 mg	NP		•			PROPRANOLOL HCL- propranolol hcl oral soln 40 mg/5ml	P		•		•
INNOPRAN XL- propranolol hcl sustained-release beads cap er 24hr 120 mg	NP					propranolol hcl cap er 24hr 60 mg, 80 mg, 120 mg, 160 mg (Inderal la)	p				
KAPSPARGO SPRINKLE- metoprolol succ cap er 24hr sprinkle 25 mg (tartrate equiv), 50 mg (tartrate equiv), 100 mg (tartrate equiv), 200 mg (tartrate equiv)	NP					propranolol hcl tab 10 mg, 20 mg, 40 mg, 60 mg, 80 mg	p				
labetalol hcl tab 100 mg, 200 mg, 300 mg	p					PROPRANOLOL HYDROCHLORIDE- propranolol hcl oral soln 20 mg/5ml	P		•		•
LABETALOL HYDROCHLORIDE- labetalol hcl tab 400 mg	NP					sotalol hcl (afib/afi) tab 80 mg, 120 mg, 160 mg (Betapace af)	p				
LOPRESSOR- metoprolol tartrate oral soln 10 mg/ml	NP		•		•	sotalol hcl tab 80 mg, 120 mg, 160 mg (Betapace)	p				
LOPRESSOR- metoprolol tartrate tab 50 mg, 100 mg	NP					sotalol hcl tab 240 mg	p				
metoprolol succinate tab er 24hr 25 mg (tartrate equiv), 50 mg (tartrate equiv), 100 mg (tartrate equiv), 200 mg (tartrate equiv) (Toprol xl)	p					SOTYLIZE- sotalol hcl oral solution 5 mg/ml	NP		•		•
metoprolol tartrate tab 25 mg	p					TENORMIN- atenolol tab 25 mg, 50 mg, 100 mg	NP				
metoprolol tartrate tab 37.5 mg, 75 mg	np					timolol maleate tab 5 mg, 10 mg, 20 mg	np				
metoprolol tartrate tab 50 mg, 100 mg (Lopressor)	p					TOPROL XL- metoprolol succinate tab er 24hr 25 mg (tartrate equiv), 50 mg (tartrate equiv), 100 mg (tartrate equiv), 200 mg (tartrate equiv)	NP				
						CALCIUM CHANNEL BLOCKERS					
						amlodipine besylate tab 2.5 mg (base equivalent), 5 mg (base equivalent), 10 mg (base equivalent) (Norvasc)	p				

p = Preferred Generics
np = Non-preferred Generics

P = Preferred Brands
NP = Non-preferred Brands

Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits
CARDIZEM- diltiazem hcl tab 30 mg, 60 mg, 120 mg	NP				
CARDIZEM CD- diltiazem hcl coated beads cap er 24hr 120 mg, 180 mg, 240 mg, 300 mg	NP				
CARDIZEM CD- diltiazem hcl coated beads cap er 24hr 360 mg	NP		•		
CARDIZEM LA- diltiazem hcl tab er 24hr 120 mg, 180 mg, 240 mg, 300 mg, 360 mg, 420 mg	NP				
CONJUPRI- levamlodipine maleate tab 2.5 mg, 5 mg	NP				
diltiazem hcl cap er 12hr 60 mg, 90 mg, 120 mg	np				
diltiazem hcl cap er 24hr 120 mg, 180 mg, 240 mg	p				
diltiazem hcl coated beads cap er 24hr 120 mg, 180 mg, 240 mg, 300 mg (Cardizem cd)	p				
diltiazem hcl coated beads cap er 24hr 360 mg (Cardizem cd)	np		•		
diltiazem hcl extended release beads cap er 24hr 120 mg, 180 mg, 240 mg, 300 mg, 360 mg, 420 mg (Tiazac)	p				
diltiazem hcl tab er 24hr 120 mg, 180 mg, 240 mg, 300 mg, 360 mg, 420 mg (Cardizem la)	np				
diltiazem hcl tab 30 mg, 60 mg, 120 mg (Cardizem)	p				
diltiazem hcl tab 90 mg	p				
felodipine tab er 24hr 2.5 mg, 5 mg, 10 mg	p				
isradipine cap 2.5 mg, 5 mg	np				
KATERZIA- amlodipine benzoate oral susp 1 mg/ml (base equivalent)	NP		•		•

Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits
LEVAMLODIPINE- levamlodipine maleate tab 2.5 mg, 5 mg	NP				
nifedipine hcl cap 20 mg, 30 mg	np				
nifedipine cap 10 mg, 20 mg	np				
nifedipine tab er 24hr 30 mg, 60 mg, 90 mg	p				
nifedipine tab er 24hr osmotic release 30 mg, 60 mg, 90 mg (Procardia xl)	p				
NIMODIPINE- nimodipine oral soln 60 mg/20ml (3 mg/ml)	NP		•		•
nimodipine cap 30 mg	p				
NISOLDIPINE ER- nisoldipine tab er 24hr 20 mg, 25.5 mg, 30 mg, 40 mg	NP				
nisoldipine tab er 24hr 8.5 mg, 17 mg, 34 mg (Sular)	np				
NORLIQVA- amlodipine besylate oral soln 1 mg/ml (base equivalent)	NP		•		•
NORVASC- amlodipine besylate tab 2.5 mg (base equivalent), 5 mg (base equivalent), 10 mg (base equivalent)	NP				
NYMALIZE- nimodipine oral soln 6 mg/ml	NP		•		•
PROCARDIA XL- nifedipine tab er 24hr osmotic release 30 mg, 60 mg, 90 mg	NP				
SULAR- nisoldipine tab er 24hr 8.5 mg, 17 mg, 34 mg	NP				
TIAZAC- diltiazem hcl extended release beads cap er 24hr 120 mg, 180 mg, 240 mg, 300 mg, 360 mg, 420 mg	NP				
verapamil hcl cap er 24hr 120 mg, 180 mg, 240 mg (Verelan)	p				

p = Preferred Generics
np = Non-preferred Generics

P = Preferred Brands
NP = Non-preferred Brands

Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits	Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits
verapamil hcl tab er 120 mg, 180 mg, 240 mg (Calan sr)	p					TIKOSYN- dofetilide cap 125 mcg (0.125 mg), 250 mcg (0.25 mg), 500 mcg (0.5 mg)	NP				
verapamil hcl tab 40 mg, 80 mg, 120 mg	p					ANTIHYPERTENSIVES					
VERAPAMIL HYDROCHLORIDE E-verapamil hcl cap er 24hr 100 mg, 200 mg, 300 mg	NP					ACCUPRIL- quinapril hcl tab 5 mg, 10 mg, 20 mg, 40 mg	NP				
VERAPAMIL HYDROCHLORIDE S-verapamil hcl cap er 24hr 360 mg	NP					ACCURETIC- quinapril-hydrochlorothiazide tab 10-12.5 mg, 20-12.5 mg	NP				
ANTIARRHYTHMICS						aliskiren fumarate tab 150 mg (base equivalent), 300 mg (base equivalent) (Tekturna)	np				
amiodarone hcl tab 100 mg, 200 mg	p					amlodipine besylate-benazepril hcl cap 2.5-10 mg, 5-40 mg	p				
amiodarone hcl tab 400 mg	np					amlodipine besylate-benazepril hcl cap 5-10 mg, 5-20 mg, 10-20 mg, 10-40 mg (Lotrel)	p				
disopyramide phosphate cap 100 mg, 150 mg (Norpace)	p					amlodipine besylate-olmesartan medoxomil tab 5-20 mg, 5-40 mg, 10-20 mg, 10-40 mg (Azor)	np				
dofetilide cap 125 mcg (0.125 mg), 250 mcg (0.25 mg), 500 mcg (0.5 mg) (Tikosyn)	np					amlodipine besylate-valsartan tab 5-160 mg, 5-320 mg, 10-160 mg, 10-320 mg (Exforge)	p				
flecainide acetate tab 50 mg, 100 mg, 150 mg	p					amlodipine-valsartan-hydrochlorothiazide tab 5-160-12.5 mg, 5-160-25 mg, 10-160-12.5 mg, 10-160-25 mg, 10-320-25 mg (Exforge hct)	p				
mexiletine hcl cap 150 mg, 200 mg, 250 mg	p					ARBLI- losartan potassium oral susp 10 mg/ml	NP		•		•
MULTAQ- dronedarone hcl tab 400 mg (base equivalent)	P					ATACAND- candesartan cilexetil tab 4 mg, 8 mg, 16 mg, 32 mg	NP				
NORPACE- disopyramide phosphate cap 100 mg, 150 mg	NP					ATACAND HCT- candesartan cilexetil-hydrochlorothiazide tab 16-12.5 mg, 32-12.5 mg, 32-25 mg	NP				
NORPACE CR- disopyramide phosphate cap er 12hr 100 mg, 150 mg	NP					atenolol & chlorthalidone tab 50-25 mg (Tenoretic 50)	p				
propafenone hcl cap er 12hr 225 mg, 325 mg, 425 mg (Rythmol sr)	p										
propafenone hcl tab 150 mg, 225 mg, 300 mg	p										
quinidine gluconate tab er 324 mg	p										
QUINIDINE SULFATE- quinidine sulfate tab 200 mg, 300 mg	P										

p = Preferred Generics
np = Non-preferred Generics

P = Preferred Brands
NP = Non-preferred Brands

Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits	Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits
atenolol & chlorthalidone tab 100-25 mg (Tenoretic 100)	p					25-15 mg, 25-25 mg, 50-15 mg, 50-25 mg					
AVALIDE- irbesartan-hydrochlorothiazide tab 150-12.5 mg, 300-12.5 mg	NP					CARDURA- doxazosin mesylate tab 1 mg, 2 mg, 4 mg, 8 mg	NP				
AVAPRO- irbesartan tab 150 mg, 300 mg	NP					CATAPRES-TTS-1- clonidine td patch weekly 0.1 mg/24hr	NP				
AZOR- amlodipine besylate-olmesartan medoxomil tab 5-20 mg, 5-40 mg, 10-20 mg, 10-40 mg	NP					CATAPRES-TTS-2- clonidine td patch weekly 0.2 mg/24hr	NP				
benazepril & hydrochlorothiazide tab 5-6.25 mg	p					CATAPRES-TTS-3- clonidine td patch weekly 0.3 mg/24hr	NP				
benazepril & hydrochlorothiazide tab 10-12.5 mg, 20-12.5 mg, 20-25 mg (Lotensin hct)	p					clonidine hcl tab 0.1 mg, 0.2 mg, 0.3 mg	p				
benazepril hcl tab 5 mg	p					CLONIDINE HYDROCHLORIDE E-clonidine tab er 24hr 0.17 mg	NP				
benazepril hcl tab 10 mg, 20 mg, 40 mg (Lotensin)	p					clonidine td patch weekly 0.1 mg/24hr (Catapres-tts-1)	p				
BENICAR- olmesartan medoxomil tab 5 mg, 20 mg, 40 mg	NP					clonidine td patch weekly 0.2 mg/24hr (Catapres-tts-2)	p				
BENICAR HCT- olmesartan medoxomil-hydrochlorothiazide tab 20-12.5 mg, 40-12.5 mg, 40-25 mg	NP					clonidine td patch weekly 0.3 mg/24hr (Catapres-tts-3)	p				
bisoprolol & hydrochlorothiazide tab 2.5-6.25 mg, 5-6.25 mg, 10-6.25 mg (Ziac)	p					COZAAR- losartan potassium tab 25 mg, 50 mg, 100 mg	NP				
candesartan cilexetil tab 4 mg, 8 mg, 16 mg, 32 mg (Atacand)	p					DEMSEER- metyrosine cap 250 mg	NP				
candesartan cilexetil-hydrochlorothiazide tab 16-12.5 mg, 32-12.5 mg, 32-25 mg (Atacand hct)	p					DIBENZYLINE- phenoxybenzamine hcl cap 10 mg	NP				
captopril tab 12.5 mg, 25 mg, 50 mg, 100 mg	p					DIOVAN- valsartan tab 40 mg, 80 mg, 160 mg, 320 mg	NP				
CAPTOPRIL/HYDROCHLOROTHIA-captopril & hydrochlorothiazide tab	NP					DIOVAN HCT- valsartan-hydrochlorothiazide tab 80-12.5 mg, 160-12.5 mg, 160-25 mg, 320-12.5 mg, 320-25 mg	NP				
						doxazosin mesylate tab 1 mg, 2 mg, 4 mg, 8 mg (Cardura)	p				
						EDARBI- azilsartan medoxomil tab 40 mg, 80 mg	NP				

p = Preferred Generics
np = Non-preferred Generics

P = Preferred Brands
NP = Non-preferred Brands

Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits	Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits
EDARBYCLOR- azilsartan medoxomil-chlorthalidone tab 40-12.5 mg, 40-25 mg	NP					irbesartan tab 75 mg, 150 mg, 300 mg (Avapro)	p				
enalapril maleate & hydrochlorothiazide tab 5-12.5 mg	p					irbesartan-hydrochlorothiazide tab 150-12.5 mg, 300-12.5 mg (Avalide)	p				
enalapril maleate & hydrochlorothiazide tab 10-25 mg (Vaseretic)	p					lisinopril & hydrochlorothiazide tab 10-12.5 mg, 20-12.5 mg, 20-25 mg (Zestoretic)	p				
enalapril maleate oral soln 1 mg/ml (Epaned)	np		•		•	lisinopril tab 2.5 mg, 5 mg, 10 mg, 20 mg, 30 mg, 40 mg (Zestril)	p				
enalapril maleate tab 2.5 mg, 5 mg, 10 mg, 20 mg (Vasotec)	p					losartan potassium & hydrochlorothiazide tab 50-12.5 mg, 100-12.5 mg, 100-25 mg (Hyzaar)	p				
EPANED- enalapril maleate oral soln 1 mg/ml	NP		•		•	losartan potassium tab 25 mg, 50 mg, 100 mg (Cozaar)	p				
eplerenone tab 25 mg, 50 mg (Inspra)	p					LOTENSIN- benazepril hcl tab 10 mg, 20 mg, 40 mg	NP				
EXFORGE- amlodipine besylate-valsartan tab 5-160 mg, 5-320 mg, 10-160 mg, 10-320 mg	NP					LOTENSIN HCT- benazepril & hydrochlorothiazide tab 10-12.5 mg, 20-12.5 mg, 20-25 mg	NP				
EXFORGE HCT- amlodipine-valsartan-hydrochlorothiazide tab 5-160-12.5 mg, 5-160-25 mg, 10-160-12.5 mg, 10-160-25 mg, 10-320-25 mg	NP					LOTREL- amlodipine besylate-benazepril hcl cap 5-10 mg, 5-20 mg, 10-20 mg, 10-40 mg	NP				
fosinopril sodium & hydrochlorothiazide tab 10-12.5 mg, 20-12.5 mg	p					METHYLDOPA- methyldopa tab 500 mg	P				
fosinopril sodium tab 10 mg, 20 mg, 40 mg	p					METHYLDOPA- methyldopa tab 500 mg	NP				
guanfacine hcl tab 1 mg, 2 mg	p					methyldopa tab 250 mg	p				
hydralazine hcl tab 10 mg, 25 mg, 50 mg, 100 mg	p					metoprolol & hydrochlorothiazide tab 50-25 mg, 100-25 mg, 100-50 mg	p				
HYZAAR- losartan potassium & hydrochlorothiazide tab 50-12.5 mg, 100-12.5 mg, 100-25 mg	NP					metyrosine cap 250 mg (Demser)	np				
INSPRA- eplerenone tab 25 mg, 50 mg	NP					MICARDIS- telmisartan tab 40 mg, 80 mg	NP				

p = Preferred Generics
np = Non-preferred Generics

P = Preferred Brands
NP = Non-preferred Brands

Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits	Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits
MICARDIS HCT- telmisartan-hydrochlorothiazide tab 40-12.5 mg, 80-12.5 mg, 80-25 mg	NP					ramipril cap 1.25 mg, 2.5 mg, 5 mg, 10 mg (Altace)	p				
minoxidil tab 2.5 mg, 10 mg	p					TEKTURNA- aliskiren fumarate tab 150 mg (base equivalent), 300 mg (base equivalent)	NP				
moexipril hcl tab 7.5 mg, 15 mg	p					telmisartan tab 20 mg, 40 mg, 80 mg (Micardis)	p				
NEXICLON XR- clonidine tab er 24hr 0.17 mg	NP					telmisartan-hydrochlorothiazide tab 40-12.5 mg, 80-12.5 mg, 80-25 mg (Micardis hct)	np				
olmesartan medoxomil tab 5 mg, 20 mg, 40 mg (Benicar)	p					TELMISARTAN/AMLODIPINE- telmisartan-amlodipine tab 40-5 mg, 40-10 mg, 80-5 mg, 80-10 mg	NP				
olmesartan medoxomil-hydrochlorothiazide tab 20-12.5 mg, 40-12.5 mg, 40-25 mg (Benicar hct)	p					TENORETIC 100- atenolol & chlorthalidone tab 100-25 mg	NP				
olmesartan-amlodipine-hydrochlorothiazide tab 20-5-12.5 mg, 40-5-12.5 mg, 40-5-25 mg, 40-10-12.5 mg, 40-10-25 mg (Tribenzor)	np					TENORETIC 50- atenolol & chlorthalidone tab 50-25 mg	NP				
PERINDOPRIL ERBUMINE- perindopril erbumine tab 2 mg, 8 mg	P					terazosin hcl cap 1 mg (base equivalent), 2 mg (base equivalent), 5 mg (base equivalent), 10 mg (base equivalent)	p				
perindopril erbumine tab 4 mg	p					TEZRULY- terazosin hcl oral soln 1 mg/ml (base equivalent)	NP		•		•
phenoxybenzamine hcl cap 10 mg (Dibenzyline)	p					trandolapril tab 1 mg, 2 mg, 4 mg	p				
prazosin hcl cap 1 mg, 2 mg, 5 mg (Minipress)	p					TRANDOLAPRIL/VERAPAMIL HC- trandolapril-verapamil hcl tab er 1-240 mg, 2-180 mg, 2-240 mg, 4-240 mg	NP				
PRESTALIA- perindopril arginine-amlodipine besylate tab 3.5-2.5 mg, 7-5 mg, 14-10 mg	NP					TRIBENZOR- olmesartan-amlodipine-hydrochlorothiazide tab 20-5-12.5 mg, 40-5-12.5 mg, 40-5-25 mg, 40-10-12.5 mg, 40-10-25 mg	NP				
QBRELIS- lisinopril oral soln 1 mg/ml	NP		•		•	TRYVIO- aprocitentan tab 12.5 mg	NP	•	•		•
quinapril hcl tab 5 mg, 10 mg, 20 mg, 40 mg (Accupril)	p					valsartan oral soln 4 mg/ml	np				
quinapril-hydrochlorothiazide tab 10-12.5 mg, 20-12.5 mg (Accuretic)	p										
QUINAPRIL/HYDROCHLOROTHIA-quinapril-hydrochlorothiazide tab 20-25 mg	P										

p = Preferred Generics
np = Non-preferred Generics

P = Preferred Brands
NP = Non-preferred Brands

Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits	Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits
valsartan tab 40 mg, 80 mg, 160 mg, 320 mg (Diovan)	p					DIURIL- chlorothiazide susp 250 mg/5ml	NP		•		•
valsartan-hydrochlorothiazide tab 80-12.5 mg, 160-12.5 mg, 160-25 mg, 320-12.5 mg, 320-25 mg (Diovan hct)	p					DYRENIUM- triamterene cap 50 mg, 100 mg	NP				
VASERETIC- enalapril maleate & hydrochlorothiazide tab 10-25 mg	NP					EDECIN- ethacrynic acid tab 25 mg	NP				
VASOTEC- enalapril maleate tab 2.5 mg, 5 mg, 10 mg, 20 mg	NP					ethacrynic acid tab 25 mg (Edecrin)	np				
VECAMYL- mecamylamine hcl tab 2.5 mg	NP	•				FUROSCIX- furosemide subcutaneous cartridge kit 80 mg/10ml	NP	•	•		•
ZESTORETIC- lisinopril & hydrochlorothiazide tab 10-12.5 mg, 20-12.5 mg, 20-25 mg	NP					FUROSEMIDE- furosemide oral soln 8 mg/ml	NP		•		•
ZESTRIL- lisinopril tab 2.5 mg, 5 mg, 10 mg, 20 mg, 30 mg, 40 mg	NP					furosemide oral soln 10 mg/ml	p				
DIURETICS						furosemide tab 20 mg, 40 mg, 80 mg (Lasix)	p				
acetazolamide cap er 12hr 500 mg	p					HEMICLOR- chlorthalidone tab 12.5 mg	NP				
acetazolamide tab 125 mg, 250 mg	p					hydrochlorothiazide cap 12.5 mg	p				
ALDACTONE- spironolactone tab 25 mg, 50 mg, 100 mg	NP					hydrochlorothiazide tab 12.5 mg, 25 mg, 50 mg	p				
amiloride hcl tab 5 mg	p					indapamide tab 1.25 mg, 2.5 mg	p				
AMILORIDE/HYDROCHLOROTHIA- amiloride & hydrochlorothiazide tab 5-50 mg	P					INZIRQO- hydrochlorothiazide for susp 10 mg/ml	NP		•		•
bumetanide tab 0.5 mg (Bumex)	p					KEYEYIS- dichlorphenamide tab 50 mg	NP		•		
bumetanide tab 1 mg, 2 mg	p					LASIX- furosemide tab 20 mg, 40 mg, 80 mg	NP				
BUMEX- bumetanide tab 0.5 mg	NP					methazolamide tab 25 mg, 50 mg	p				
CAROSPIR- spironolactone susp 25 mg/5ml	NP		•		•	metolazone tab 2.5 mg, 5 mg, 10 mg	p				
chlorthalidone tab 25 mg, 50 mg	p					SOAANZ- torsemide tab 20 mg, 40 mg, 60 mg	NP				
dichlorphenamide tab 50 mg (Keveyis)	np		•			spironolactone & hydrochlorothiazide tab 25-25 mg (Aldactazide)	p				
						spironolactone susp 25 mg/5ml (Carospir)	np		•		•

p = Preferred Generics
np = Non-preferred Generics

P = Preferred Brands
NP = Non-preferred Brands

Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits
spironolactone tab 25 mg, 50 mg, 100 mg (Aldactone)	p				
THALITONE- chlorthalidone tab 15 mg	NP				
torseamide tab 5 mg, 10 mg, 20 mg, 100 mg	p				
triamterene & hydrochlorothiazide cap 37.5-25 mg	p				
triamterene & hydrochlorothiazide tab 37.5-25 mg (Maxzide-25)	p				
triamterene & hydrochlorothiazide tab 75-50 mg (Maxzide)	p				
triamterene cap 50 mg, 100 mg (Dyrenium)	np				
VASOPRESSORS					
AUVI-Q- epinephrine solution auto-injector 0.1 mg/0.1ml, 0.15 mg/0.15ml (1:1000), 0.3 mg/0.3ml (1:1000)	P				
droxidopa cap 100 mg, 200 mg, 300 mg (Northera)	np	•	•		•
EPINEPHRINE- epinephrine solution auto-injector 0.15 mg/0.15ml (1:1000), 0.3 mg/0.3ml (1:1000)	NP				
epinephrine solution auto-injector 0.15 mg/0.3ml (1:2000) (Epipen-jr 2-pak)	p				
epinephrine solution auto-injector 0.3 mg/0.3ml (1:1000) (Epipen 2-pak)	p				
EPIPEN 2-PAK- epinephrine solution auto-injector 0.3 mg/0.3ml (1:1000)	NP				
EPIPEN-JR 2-PAK- epinephrine solution auto-injector 0.15 mg/0.3ml (1:2000)	NP				
midodrine hcl tab 2.5 mg, 5 mg, 10 mg	p				

Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits
NEFFY- epinephrine nasal spray 1 mg/0.1ml, 2 mg/0.1ml	NP				
NORTHERA- droxidopa cap 100 mg, 200 mg, 300 mg	NP	•	•		•
ANTIHYPERLIPIDEMICS					
ALTOPREV- lovastatin tab er 24hr 20 mg, 40 mg, 60 mg	NP			•	•
ATORVALIQ- atorvastatin calcium susp 20 mg/5ml (4mg/ml) (base equiv)	NP			•	•
atorvastatin calcium tab 10 mg (base equivalent), 20 mg (base equivalent), 40 mg (base equivalent), 80 mg (base equivalent) (Lipitor)	p				•
cholestyramine light powder packets 4 gm	np				
cholestyramine light powder 4 gm/dose (Questran light)	p				
cholestyramine powder packets 4 gm (Questran)	np				
cholestyramine powder 4 gm/dose (Questran)	p				
choline fenofibrate cap dr 45 mg (fenofibric acid equiv), 135 mg (fenofibric acid equiv) (Trilipix)	np				
colesevelam hcl packet for susp 3.75 gm (Welchol)	np				
colesevelam hcl tab 625 gm (Welchol)	p				
COLESTID- colestipol hcl granules 5 gm	NP				
COLESTID- colestipol hcl tab 1 gm	NP				
colestipol hcl granule packets 5 gm (Colestid flavored)	p				

p = Preferred Generics
np = Non-preferred Generics

P = Preferred Brands
NP = Non-preferred Brands

Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits	Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits
colestipol hcl granules 5 gm (Colestid flavored)	p					gemfibrozil tab 600 mg (Lopid)	p				
colestipol hcl tab 1 gm (Colestid)	p					JUXTAPID- lomitapide mesylate cap 5 mg (base equiv), 10 mg (base equiv), 20 mg (base equiv), 30 mg (base equiv)	NP	•			
CRESTOR- rosuvastatin calcium tab 5 mg, 10 mg, 20 mg, 40 mg	NP			•	•	LESCOL XL- fluvastatin sodium tab er 24 hr 80 mg (base equivalent)	NP			•	•
EZALLOR SPRINKLE- rosuvastatin calcium sprinkle cap 5 mg (base equivalent), 10 mg (base equivalent), 20 mg (base equivalent), 40 mg (base equivalent)	NP			•	•	LIPITOR- atorvastatin calcium tab 10 mg (base equivalent), 20 mg (base equivalent), 40 mg (base equivalent), 80 mg (base equivalent)	NP			•	•
ezetimibe tab 10 mg (Zetia)	p					LIPOFEN- fenofibrate cap 50 mg, 150 mg	NP				
ezetimibe-simvastatin tab 10-10 mg, 10-20 mg, 10-40 mg, 10-80 mg (Vytorin)	p				•	LIVALO- pitavastatin calcium tab 1 mg, 2 mg, 4 mg	NP			•	•
FENOFIBRATE- fenofibrate cap 50 mg, 150 mg	NP					LOPID- gemfibrozil tab 600 mg	NP				
fenofibrate micronized cap 43 mg, 130 mg	np					lovastatin tab 10 mg, 20 mg, 40 mg	p				•
fenofibrate micronized cap 67 mg, 134 mg, 200 mg	p					LOVAZA- omega-3-acid ethyl esters cap 1 gm	NP				
fenofibrate tab 40 mg, 120 mg (Fenoglide)	np		•			NEXLETOL- bempedoic acid tab 180 mg	P		•		•
fenofibrate tab 48 mg, 145 mg (Tricor)	p					NEXLIZET- bempedoic acid-ezetimibe tab 180-10 mg	P		•		•
fenofibrate tab 54 mg, 160 mg	p					NIACIN- niacin (antihyperlipidemic) tab 500 mg	NP				
FENOFIBRIC ACID- fenofibric acid tab 35 mg, 105 mg	NP					niacin tab er 500 mg (antihyperlipidemic), 750 mg (antihyperlipidemic), 1000 mg (antihyperlipidemic) (Niaspan)	p				
FLOLIPID- simvastatin susp 20 mg/5ml (4 mg/ml), 40 mg/5ml (8 mg/ml)	NP			•	•	NIACOR- niacin (antihyperlipidemic) tab 500 mg	NP				
fluvastatin sodium cap 20 mg (base equivalent), 40 mg (base equivalent)	np				•	omega-3-acid ethyl esters cap 1 gm (Lovaza)	np				
fluvastatin sodium tab er 24 hr 80 mg (base equivalent) (Lescol xl)	np				•	pitavastatin calcium tab 1 mg, 2 mg, 4 mg (Livalo)	np				•

p = Preferred Generics
np = Non-preferred Generics

P = Preferred Brands
NP = Non-preferred Brands

Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits	Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits
PRALUENT- alirocumab subcutaneous solution auto-injector 75 mg/ml, 150 mg/ml	NP		•		•	ZYPITAMAG- pitavastatin magnesium tab 2 mg (base equiv), 4 mg (base equiv)	NP			•	•
pravastatin sodium tab 10 mg, 20 mg, 40 mg, 80 mg	p				•	CARDIOVASCULAR AGENTS - MISC.					
QUESTRAN- cholestyramine powder packets 4 gm	NP					ADCIRCA- tadalafil tab 20 mg (pah)	NP	•	•		•
QUESTRAN- cholestyramine powder 4 gm/dose	NP					ADEMPAS- riociguat tab 0.5 mg, 1 mg, 1.5 mg, 2 mg, 2.5 mg	NP	•	•		•
QUESTRAN LIGHT- cholestyramine light powder 4 gm/dose	NP					ambrisentan tab 5 mg, 10 mg (Letaris)	p	•	•		•
REPATHA- evolocumab subcutaneous soln prefilled syringe 140 mg/ml	P		•		•	amlodipine besylate-atorvastatin calcium tab 2.5-10 mg, 2.5-20 mg, 2.5-40 mg	np				
REPATHA SURECLICK- evolocumab subcutaneous soln auto-injector 140 mg/ml	P		•		•	amlodipine besylate-atorvastatin calcium tab 5-10 mg, 5-20 mg, 5-40 mg, 5-80 mg, 10-10 mg, 10-20 mg, 10-40 mg, 10-80 mg (Caduet)	np				
rosuvastatin calcium tab 5 mg, 10 mg, 20 mg, 40 mg (Crestor)	p				•	ATTRUBY- acoramidis hcl tab pack 356 mg (712 mg twice daily)	P	•	•		•
simvastatin tab 5 mg, 80 mg	p				•	BIDIL- isosorbide dinitrate-hydralazine hcl tab 20-37.5 mg	NP				
simvastatin tab 10 mg, 20 mg, 40 mg (Zocor)	p				•	bosentan tab for oral susp 32 mg (Tracleer)	p	•	•		•
TRICOR- fenofibrate tab 48 mg, 145 mg	NP					bosentan tab 62.5 mg, 125 mg (Tracleer)	p	•	•		•
VASCEPA- icosapent ethyl cap 0.5 gm, 1 gm	p		•		•	CADUET- amlodipine besylate-atorvastatin calcium tab 5-10 mg, 5-20 mg, 5-40 mg, 5-80 mg, 10-10 mg, 10-20 mg, 10-40 mg, 10-80 mg	NP				
VYTORIN- ezetimibe-simvastatin tab 10-10 mg, 10-20 mg, 10-40 mg, 10-80 mg	NP			•	•	CAMZYOS- mavacamten cap 2.5 mg, 5 mg, 10 mg, 15 mg	NP	•	•		•
WELCHOL- colesevelam hcl packet for susp 3.75 gm	NP					CORLANOR- ivabradine hcl oral soln 5 mg/5ml (base equiv)	P		•		•
WELCHOL- colesevelam hcl tab 625 mg	NP					CORLANOR- ivabradine hcl tab 5 mg (base equiv), 7.5 mg (base equiv)	NP		•		•
ZETIA- ezetimibe tab 10 mg	NP										
ZOCOR- simvastatin tab 10 mg, 20 mg, 40 mg	NP			•	•						

p = Preferred Generics
np = Non-preferred Generics

P = Preferred Brands
NP = Non-preferred Brands

Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits	Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits
ENTRESTO- sacubitril-valsartan sprinkle cap 6-6 mg, 15-16 mg	P		•		•	TADLIQ- tadalafil oral susp 20 mg/5ml (pah)	NP	•	•		•
ENTRESTO- sacubitril-valsartan tab 24-26 mg, 49-51 mg, 97-103 mg	NP					TRACLEER- bosentan tab for oral susp 32 mg	P	•	•		•
INPEFA- sotagliflozin tab 200 mg, 400 mg	NP			•	•	TRACLEER- bosentan tab 62.5 mg, 125 mg	NP	•	•		•
isosorbide dinitrate-hydralazine hcl tab 20-37.5 mg (Bidil)	np					TYVASO- treprostinil inhalation solution 0.6 mg/ml	NP	•	•		•
ivabradine hcl tab 5 mg (base equiv), 7.5 mg (base equiv) (Corlanor)	p		•		•	TYVASO DPI MAINTENANCE KI- treprostinil inh powder 16 mcg/ cartridge, 32 mcg/cartridge, 48 mcg/ cartridge, 64 mcg/cartridge	NP	•	•		•
LETAIRIS- ambrisentan tab 5 mg, 10 mg	NP	•	•		•	TYVASO DPI TITRATION KIT- treprostinil inh powd 112 x 16mcg & 112 x 32mcg & 28 x 48mcg	NP	•	•		•
LODOCO- colchicine (cardiovascular) tab 0.5 mg	NP					TYVASO REFILL KIT- treprostinil inhalation solution 0.6 mg/ml	NP	•	•		•
OPSUMIT- macitentan tab 10 mg	P	•	•		•	TYVASO STARTER KIT- treprostinil inhalation solution 0.6 mg/ml	NP	•	•		•
OPSYNVI- macitentan-tadalafil tab 10-20 mg, 10-40 mg	NP	•	•		•	UPTRAVI- selexipag tab 200 mcg, 400 mcg, 600 mcg, 800 mcg, 1000 mcg, 1200 mcg, 1400 mcg, 1600 mcg	P	•	•		•
ORENITRAM- treprostinil diolamine tab er 0.125 mg (base equiv), 0.25 mg (base equiv), 1 mg (base equiv), 2.5 mg (base equiv), 5 mg (base equiv)	NP	•	•			UPTRAVI TITRATION PACK- selexipag tab therapy pack 200 mcg (140) & 800 mcg (60)	P	•	•		•
ORENITRAM TITRATION KIT M- treprostinil tab er titr pk (mo1) 126 x0.125mg & 42 x0.25mg, titr pk (mo2) 126 x0.125mg & 210 x0.25mg, titr pk(mo3)126x0.125mg&42x0.25mg&	NP	•	•		•	VERQUVO- vericiguat tab 2.5 mg, 5 mg, 10 mg	P		•		•
REVATIO- sildenafil citrate tab 20 mg	NP	•	•		•	VYNDAMAX- tafamidis cap 61 mg	P	•	•		•
sacubitril-valsartan tab 24-26 mg, 49-51 mg, 97-103 mg (Entresto)	p					VYNDAQEL- tafamidis meglumine (cardiac) cap 20 mg	P	•	•		•
sildenafil citrate for suspension 10 mg/ml (Revatio)	np	•	•		•	WINREVAIR- sotatercept-csrk for subcutaneous soln kit 45 mg, 60 mg, 2 x 45 mg, 2 x 60 mg	NP	•	•		•
sildenafil citrate tab 20 mg (Revatio)	p	•	•		•	YUTREPIA- treprostinil sodium inhal cap 26.5 mcg, 53 mcg, 79.5 mcg, 106 mcg	NP	•	•		•
tadalafil tab 20 mg (pah) (Adcirca)	p	•	•		•						

p = Preferred Generics
np = Non-preferred Generics

P = Preferred Brands
NP = Non-preferred Brands

Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits
ERECTILE DYSFUNCTION					
avanafil tab 50 mg, 100 mg, 200 mg (Stendra)	np				•
CAVERJECT- alprostadil for inj 20 mcg, 40 mcg	NP				
CAVERJECT IMPULSE- alprostadil for inj kit 10 mcg, 20 mcg	NP				
CIALIS- tadalafil tab 5 mg, 10 mg, 20 mg	NP				•
EDEX- alprostadil for inj kit 10 mcg, 20 mcg, 40 mcg	NP				
sildenafil citrate tab 25 mg, 50 mg, 100 mg (Viagra)	np				•
STENDRA- avanafil tab 50 mg, 100 mg, 200 mg	NP				•
tadalafil tab 2.5 mg, 5 mg, 10 mg, 20 mg (Cialis)	p				•
ildenafil citrate orally disintegrating tab 10 mg	np				•
ildenafil citrate tab 2.5 mg, 5 mg, 10 mg, 20 mg	np				•
VIAGRA- sildenafil citrate tab 25 mg, 50 mg, 100 mg	NP				•
RESPIRATORY AGENTS					
ANTI-HISTAMINES					
CARBINOXAMINE MALEATE- carbinoxamine maleate soln 4 mg/5ml	NP		•		
CARBINOXAMINE MALEATE ER- carbinoxamine maleate extended release susp 4 mg/5ml	NP				
carbinoxamine maleate tab 4 mg	np				
carbinoxamine maleate tab 6 mg	np		•		
CARBZAH- carbinoxamine maleate soln 4 mg/5ml	NP		•		

Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits
cetirizine hcl oral soln 1 mg/ml (5 mg/5ml)	p				
CLARINEX- desloratadine tab 5 mg	NP				
CLEMASTINE FUMARATE- clemastine fumarate syrup 0.67 mg/5ml (0.5 mg/5ml base eq)	NP		•		
CLEMASTINE FUMARATE- clemastine fumarate tab 2.68 mg	NP				
CLEMSZA- clemastine fumarate tab 2.68 mg	NP				
cyproheptadine hcl syrup 2 mg/5ml	p				
cyproheptadine hcl tab 4 mg	p				
DESLORATADINE ODT- desloratadine tab orally disintegrating 2.5 mg, 5 mg	P				
desloratadine tab 5 mg (Clarinet)	p				
DIPHENHYDRAMINE HCL- diphenhydramine hcl elixir 12.5 mg/5ml	NP				
KARBINAL ER- carbinoxamine maleate extended release susp 4 mg/5ml	NP				
levocetirizine dihydrochloride soln 2.5 mg/5ml (0.5 mg/ml)	p				
levocetirizine dihydrochloride tab 5 mg	p				
promethazine hcl oral soln 6.25 mg/5ml	p				
promethazine hcl suppos 12.5 mg, 25 mg	p				
promethazine hcl tab 12.5 mg, 25 mg, 50 mg	p				
PROMETHEGAN- promethazine hcl suppos 50 mg	P				
RYCLORA- dexchlorpheniramine maleate oral soln 2 mg/5ml	NP				

p = Preferred Generics
np = Non-preferred Generics

P = Preferred Brands
NP = Non-preferred Brands

Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits
NASAL AGENTS - SYSTEMIC and TOPICAL					
azelastine hcl nasal spray 0.1% (137 mcg/spray)	p				
azelastine hcl-fluticasone prop nasal spray 137-50 mcg/act (Dymista)	np				
DYMISTA- azelastine hcl-fluticasone prop nasal spray 137-50 mcg/act	NP				
flunisolide nasal soln 25 mcg/act (0.025%)	p				
fluticasone propionate nasal susp 50 mcg/act	p				
ipratropium bromide nasal soln 0.03% (21 mcg/spray), 0.06% (42 mcg/spray)	p				
mometasone furoate nasal susp 50 mcg/act	p				
olopatadine hcl nasal soln 0.6% (Patanase)	np				
OMNARIS- ciclesonide nasal susp 50 mcg/act	NP				
QNASL- beclomethasone dipropionate nasal aerosol 80 mcg/act	NP				
QNASL CHILDRENS- beclomethasone dipropionate nasal aerosol 40 mcg/act	NP				
RYALTRIS- olopatadine hcl-mometasone furoate nasal susp 665-25 mcg/act	NP				
XHANCE- fluticasone propionate nasal exhaler susp 93 mcg/act	NP		•		•
COUGH/COLD/ALLERGY					
acetylcysteine inhal soln 10%, 20%	p				
benzonatate cap 100 mg, 200 mg	np				

Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits
CLARINEX-D 12 HOUR- desloratadine & pseudoephedrine tab er 12hr 2.5-120 mg	NP				
HYCODAN- hydrocodone bitart-homatropine methylbrom soln 5-1.5 mg/5ml	NP				
HYCODAN- hydrocodone bitart-homatropine methylbromide tab 5-1.5 mg	NP				
hydrocodone bitart-homatropine methylbrom soln 5-1.5 mg/5ml (Hycodan)	np				
hydrocodone bitart-homatropine methylbromide tab 5-1.5 mg (Hycodan)	np				
HYDROCODONE POLISTIREX/CH- hydrocod polst-chlorphen polst er susp 10-8 mg/5ml	NP				
HYPERSAL- sodium chloride soln nebu 7%	NP				
promethazine w/ codeine syrup 6.25-10 mg/5ml	np				
promethazine-dm syrup 6.25-15 mg/5ml	np				
pseudoephed-bromphen-dm syrup 30-2-10 mg/5ml	np				
sodium chloride soln nebu 3%	p				
sodium chloride soln nebu 7% (Hypersal)	p				
sodium chloride soln nebu 7% (Hypersal)	np				
TUXARIN ER- codeine phos-chlorpheniramine maleate tab er 12hr 54.3-8 mg	NP				
ANTIASTHMATIC and BRONCHODILATOR AGENTS					
ACCOLATE- zafirlukast tab 10 mg, 20 mg	NP				

p = Preferred Generics
np = Non-preferred Generics

P = Preferred Brands
NP = Non-preferred Brands

Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits	Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits
ADVAIR DISKUS- fluticasone-salmeterol aer powder ba 100-50 mcg/act, 250-50 mcg/act, 500-50 mcg/act	NP			•	•	ASMANEX TWISTHALER 120 MET-mometasone furoate inhal powd 220 mcg/act (breath activated)	P				•
ADVAIR HFA- fluticasone-salmeterol inhal aerosol 45-21 mcg/act, 115-21 mcg/act, 230-21 mcg/act	P				•	ASMANEX TWISTHALER 30 MET-mometasone furoate inhal powd 110 mcg/act (breath activated), 220 mcg/act (breath activated)	P				•
AIRSUPRA- albuterol-budesonide inhalation aerosol 90-80 mcg/act	P				•	ASMANEX TWISTHALER 60 MET-mometasone furoate inhal powd 220 mcg/act (breath activated)	P				•
ALBUTEROL SULFATE HFA- albuterol sulfate inhal aero 108 mcg/act (90mcg base equiv)	NP				•	ATROVENT HFA- ipratropium bromide hfa inhal aerosol 17 mcg/act	P				•
albuterol sulfate inhal aero 108 mcg/act (90mcg base equiv) (Proventil hfa)	p				•	BEVESPI AEROSPHERE- glycopyrrolate-formoterol fumarate aerosol 9-4.8 mcg/act	NP				•
albuterol sulfate soln nebu 0.083% (2.5 mg/3ml), 0.5% (5 mg/ml), 0.63 mg/3ml (base equiv), 1.25 mg/3ml (base equiv)	p					BREO ELLIPTA- fluticasone furoate-vilanterol aero powd ba 50-25 mcg/act, 100-25 mcg/act, 200-25 mcg/act	P				•
albuterol sulfate syrup 2 mg/5ml	p					BREZTRI AEROSPHERE- budesonide-glycopyrrolate-formoterol aers 160-9-4.8 mcg/act	P				•
albuterol sulfate tab 2 mg, 4 mg	p					BROVANA- arformoterol tartrate soln nebu 15 mcg/2ml (base equiv)	NP				
ALVESCO- ciclesonide inhal aerosol 80 mcg/act, 160 mcg/act	NP			•	•	budesonide inhalation susp 0.25 mg/2ml, 0.5 mg/2ml, 1 mg/2ml (Pulmicort)	p				
ANORO ELLIPTA- umeclidinium-vilanterol aero powd ba 62.5-25 mcg/act	P				•	COMBIVENT RESPIMAT- ipratropium-albuterol inhal aerosol soln 20-100 mcg/act	P				•
arformoterol tartrate soln nebu 15 mcg/2ml (base equiv) (Brovana)	np					cromolyn sodium soln nebu 20 mg/2ml	p				
ARNUIITY ELLIPTA- fluticasone furoate aerosol powder breath activ 50 mcg/act, 100 mcg/act, 200 mcg/act	P				•	DALIRESP- roflumilast tab 250 mcg, 500 mcg	NP				
ASMANEX HFA- mometasone furoate inhal aerosol suspension 50 mcg/act, 100 mcg/act, 200 mcg/act	P				•	DUAKLIR PRESSAIR- aclidinium br-formoterol fum aero pow br act 400-12 mcg/act	NP				•

p = Preferred Generics
np = Non-preferred Generics

P = Preferred Brands
NP = Non-preferred Brands

Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits
DULERA- mometasone furoate-formoterol fumarate aerosol 50-5 mcg/act, 100-5 mcg/act, 200-5 mcg/act	P				•
FASENRA PEN- benralizumab subcutaneous soln auto-injector 30 mg/ml	P	•	•		•
FLUTICASONE FUROATE/VILAN-fluticasone furoate-vilanterol aero powd ba 100-25 mcg/act, 200-25 mcg/act	NP				•
FLUTICASONE PROPIONATE DI-fluticasone propionate aer pow ba 50 mcg/act, 100 mcg/act, 250 mcg/act	NP			•	•
FLUTICASONE PROPIONATE HF-fluticasone propionate hfa inhal aero 44 mcg/act	NP			•	•
FLUTICASONE PROPIONATE HF-fluticasone propionate hfa inhal aer 110 mcg/act, 220 mcg/act	NP			•	•
FLUTICASONE PROPIONATE/SA-fluticasone-salmeterol aer powder ba 55-14 mcg/act, 113-14 mcg/act, 232-14 mcg/act	P				•
FLUTICASONE PROPIONATE/SA-fluticasone-salmeterol inhal aerosol 45-21 mcg/act, 115-21 mcg/act, 230-21 mcg/act	NP				•
fluticasone-salmeterol aer powder ba 100-50 mcg/act, 250-50 mcg/act (Advair diskus)	p				•
formoterol fumarate soln nebu 20 mcg/2ml (Perforomist)	np				
INCRUSE ELLIPTA- umeclidinium br aero powd breath act 62.5 mcg/act (base eq)	P				•

Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits
ipratropium bromide inhal soln 0.02%	p				
ipratropium-albuterol nebu soln 0.5-2.5(3) mg/3ml	p				
levalbuterol hcl soln nebu conc 1.25 mg/0.5ml (base equiv) (Xopenex concentrate)	p				
levalbuterol hcl soln nebu 0.31 mg/3ml (base equiv), 0.63 mg/3ml (base equiv), 1.25 mg/3ml (base equiv) (Xopenex)	p				
LEVALBUTEROL TARTRATE HFA-levalbuterol tartrate inhal aerosol 45 mcg/act (base equiv)	NP				•
montelukast sodium chew tab 4 mg (base equiv), 5 mg (base equiv) (Singulair)	p				
montelukast sodium oral granules packet 4 mg (base equiv) (Singulair)	p				
montelukast sodium tab 10 mg (base equiv) (Singulair)	p				
NUCALA- mepolizumab subcutaneous solution auto-injector 100 mg/ml	P	•	•		•
NUCALA- mepolizumab subcutaneous solution pref syringe 40 mg/0.4ml, 100 mg/ml	P	•	•		•
OHTUVAYRE- ensifentrine inhalation susp 3 mg/2.5ml	NP	•	•		•
PERFOROMIST- formoterol fumarate soln nebu 20 mcg/2ml	NP				
PROAIR RESPICLICK- albuterol sulfate aer pow ba 108 mcg/act (90 mcg base equiv)	NP				•

p = Preferred Generics
np = Non-preferred Generics

P = Preferred Brands
NP = Non-preferred Brands

Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits
PULMICORT- budesonide inhalation susp 0.25 mg/2ml, 0.5 mg/2ml, 1 mg/2ml	NP				
PULMICORT FLEXHALER- budesonide inhal aero powd 90 mcg/act (breath activated), 180 mcg/act (breath activated)	NP				•
QVAR REDHALER- beclomethasone diprop hfa breath act inh aer 40 mcg/act, 80 mcg/act	P				•
roflumilast tab 250 mcg, 500 mcg (Daliresp)	np				
SEREVENT DISKUS- salmeterol xinafoate aer pow ba 50 mcg/act (base equiv)	P				•
SINGULAIR- montelukast sodium chew tab 4 mg (base equiv), 5 mg (base equiv)	NP				
SINGULAIR- montelukast sodium oral granules packet 4 mg (base equiv)	NP				
SINGULAIR- montelukast sodium tab 10 mg (base equiv)	NP				
SPIRIVA HANDIHALER- tiotropium bromide inhal cap 18 mcg (base equiv)	NP				•
SPIRIVA RESPIMAT- tiotropium bromide inhal aerosol 1.25 mcg/act, 2.5 mcg/act	P				•
STIOLTO RESPIMAT- tiotropium br-olodaterol inhal aero soln 2.5-2.5 mcg/act	P				•
STRIVERDI RESPIMAT- olodaterol hcl inhal aerosol soln 2.5 mcg/act (base equiv)	NP				•
SYMBICORT- budesonide-formoterol fumarate dihyd aerosol 80-4.5 mcg/act, 160-4.5 mcg/act	p				•

Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits
terbutaline sulfate tab 2.5 mg, 5 mg	p				
TEZSPIRE- tezepelumab-ekko subcutaneous soln auto-inj 210 mg/1.91ml	P	•	•		•
THEO-24- theophylline cap er 24hr 100 mg, 200 mg, 300 mg, 400 mg	NP				
theophylline elixir 80 mg/15ml	np				
theophylline soln 80 mg/15ml	np				
theophylline tab er 12hr 300 mg, 450 mg	p				
theophylline tab er 24hr 400 mg, 600 mg	p				
tiotropium bromide inhal cap 18 mcg (base equiv) (Spiriva handihaler)	np				•
TRELEGY ELLIPTA- fluticasone-umeclidinium-vilanterol aepb 100-62.5-25 mcg/act, 200-62.5-25 mcg/act	P				•
TUDORZA PRESSAIR- aclidinium bromide aerosol powd breath activated 400 mcg/act	NP				•
VENTOLIN HFA- albuterol sulfate inhal aero 108 mcg/act (90mcg base equiv)	P				•
XOLAIR- omalizumab subcutaneous soln auto-injector 75 mg/0.5ml, 150 mg/ml, 300 mg/2ml	P	•	•		
XOLAIR- omalizumab subcutaneous soln prefilled syringe 75 mg/0.5ml, 150 mg/ml, 300 mg/2ml	P	•	•		
XOPENEX HFA- levalbuterol tartrate inhal aerosol 45 mcg/act (base equiv)	NP				•
YUPELRI- revefenacin inhalation solution 175 mcg/3ml	NP				

p = Preferred Generics
np = Non-preferred Generics

P = Preferred Brands
NP = Non-preferred Brands

Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits
zafirlukast tab 10 mg, 20 mg (Accolate)	p				
zileuton tab er 12hr 600 mg	np		•		
RESPIRATORY AGENTS - MISC.					
ALYFTREK- vanzacaftor-tezacaftor-deutivacaftor tab 4-20-50 mg, 10-50-125 mg	P	•	•		•
BRONCHITOL- mannitol inhal cap 40 mg	NP	•			
BRONCHITOL TOLERANCE TEST- mannitol inhal cap 40 mg	NP	•			
ESBRIET- pirfenidone tab 267 mg, 801 mg	NP	•	•		•
GLASSIA- alpha1-proteinase inhibitor (human) inj 1000 mg/50ml	NP	•			
GLASSIA- alpha1-proteinase inhibitor (human) iv soln 4 gm/200ml, 5 gm/250ml	NP	•			
KALYDECO- ivacaftor packet 5.8 mg, 13.4 mg, 25 mg, 50 mg, 75 mg	P	•	•		•
KALYDECO- ivacaftor tab 150 mg	P	•	•		•
OFEV- nintedanib esylate cap 100 mg (base equivalent), 150 mg (base equivalent)	NP	•	•		•
ORKAMBI- lumacaftor-ivacaftor granules packet 75-94 mg, 100-125 mg, 150-188 mg	NP	•	•		•
ORKAMBI- lumacaftor-ivacaftor tab 100-125 mg, 200-125 mg	NP	•	•		•
PIRFENIDONE- pirfenidone tab 534 mg	NP	•	•		•
pirfenidone cap 267 mg (Esbriet)	np	•	•		•
pirfenidone tab 267 mg, 801 mg (Esbriet)	np	•	•		•
PULMOZYME- dornase alfa inhal soln 2.5 mg/2.5ml	P	•			

Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits
SYMDEKO- tezacaftor-ivacaftor 50-75 mg & ivacaftor 75 mg tab tbpk	P	•	•		•
SYMDEKO- tezacaftor-ivacaftor 100-150 mg & ivacaftor 150 mg tab tbpk	P	•	•		•
TRIKAFTA- elexacaf-tezacaf-ivacaf 80-40-60 mg& ivacaf 59.5mg thpk gran	P	•	•		•
TRIKAFTA- elexacaf-tezacaf-ivacaf 100-50-75 mg& ivacaf 75mg thpk gran	P	•	•		•
TRIKAFTA- elexacaf-tezacaf-ivacaf 50-25-37.5 mg & ivacaftor 75 mg tbpk	P	•	•		•
TRIKAFTA- elexacaf-tezacaf-ivacaf 100-50-75 mg & ivacaftor 150 mg tbpk	P	•	•		•
GASTROINTESTINAL AGENTS					
LAXATIVES					
CLENPIQ- sod picosulfate-mg ox-citric ac sol 10 mg-3.5 gm-12 gm/175ml	NP				
GAVILYTE-C- peg 3350-kcl-na bicarb-nacl-na sulfate for soln 240 gm	P				
GOLYTELY- peg 3350-kcl-na bicarb-nacl-na sulfate for soln 236 gm	NP				
lactulose oral crystal packet 10 gm, 20 gm	np				
lactulose solution 10 gm/15ml	p				
MOVIPREP- peg 3350-kcl-nacl-na sulfate-na ascorbate-c for soln 100 gm	NP				
peg 3350-kcl-na bicarb-nacl-na sulfate for soln 236 gm (Golytely)	p				
peg 3350-kcl-nacl-na sulfate-na ascorbate-c for soln 100 gm (Moviprep)	np				

p = Preferred Generics
np = Non-preferred Generics

P = Preferred Brands
NP = Non-preferred Brands

Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits
peg 3350-kcl-sod bicarb-nacl for soln 420 gm	p				
PEG-PREP- bisacodyl tab & peg 3350-kcl-sod bicarb-nacl for soln kit	NP				
PLENVU- peg 3350-kcl-nacl-na sulfate-na ascorbate-c for soln 140 gm	NP				
sod sulfate-pot sulf-mg sulf oral sol 17.5-3.13-1.6 gm/177ml (Suprep bowel prep ki)	np				
SUFLAVE- peg 3350-kcl-nacl-na sulfate-mag sulfate for soln 178.7 gm	NP				
SUPREP BOWEL PREP KIT- sod sulfate-pot sulf-mg sulf oral sol 17.5-3.13-1.6 gm/177ml	NP				
SUTAB- sod sulfate-mg sulfate-pot chloride tab 1479-225-188 mg	NP				
ANTIDIARRHEALS					
diphenoxylate w/ atropine tab 2.5-0.025 mg (Lomotil)	p				
DIPHENOXYLATE/ATROPINE- diphenoxylate w/ atropine liq 2.5-0.025 mg/5ml	P				
LOMOTIL- diphenoxylate w/ atropine tab 2.5-0.025 mg	NP				
loperamide hcl cap 2 mg	p				
MOTOFEN- difenoxin w/ atropine tab 1-0.025 mg	NP				
MYTESI- crofelemer tab delayed release 125 mg	NP				
ULCER DRUGS					
ACIPHEX- rabeprazole sodium ec tab 20 mg	NP			•	•

Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits
bismuth subcit-metronidazole-tetracycline cap 140-125-125 mg (Pylera)	np				
CARAFATE- sucralfate tab 1 gm	NP				
cimetidine hcl soln 300 mg/5ml	p		•	•	
cimetidine tab 200 mg	np				
cimetidine tab 300 mg, 400 mg, 800 mg	p				
CUVPOSA- glycopyrrolate oral soln 1 mg/5ml	NP		•	•	
CYTOTEC- misoprostol tab 100 mcg, 200 mcg	NP				
DEXILANT- dexlansoprazole cap delayed release 30 mg, 60 mg	NP			•	•
dexlansoprazole cap delayed release 30 mg, 60 mg (Dexilant)	np				•
dicyclomine hcl cap 10 mg	p				
dicyclomine hcl oral soln 10 mg/5ml	p				
dicyclomine hcl tab 20 mg	p				
DICYCLOMINE HYDROCHLORIDE- dicyclomine hcl tab 40 mg	NP				
esomeprazole magnesium cap delayed release 20 mg (base eq), 40 mg (base eq) (Nexium)	p				•
esomeprazole magnesium for delayed release susp packet 5 mg, 10 mg, 20 mg, 40 mg (Nexium)	p				•
esomeprazole magnesium for delayed release susp pack 2.5 mg (Nexium)	p				•
famotidine for susp 40 mg/5ml	p		•		•
famotidine tab 20 mg, 40 mg (Pepcid)	p				
GLYCAT- glycopyrrolate tab 1.5 mg	NP				

p = Preferred Generics
np = Non-preferred Generics

P = Preferred Brands
NP = Non-preferred Brands

Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits
GLYCOPYRROLATE- glycopyrrolate tab 1.5 mg	NP				
glycopyrrolate oral soln 1 mg/5ml (Cuvposa)	np		•		•
glycopyrrolate tab 1 mg (Robinul)	p				
glycopyrrolate tab 2 mg (Robinul forte)	p				
KONVOMEPR- omeprazole-sodium bicarbonate for oral susp 2-84 mg/ml	NP			•	•
lansoprazole cap delayed release 15 mg	p				•
lansoprazole cap delayed release 30 mg (Prevacid)	p				•
lansoprazole tab delayed release orally disintegrating 15 mg, 30 mg (Prevacid solutab)	np				•
LANSOPRAZOLE/AMOXICILLIN/- amoxicil cap & clarithro tab & lansopraz cap dr 500 & 500 & 30mg	NP				
methscopolamine bromide tab 2.5 mg, 5 mg	p				
misoprostol tab 100 mcg, 200 mcg (Cytotec)	p				
NEXIUM- esomeprazole magnesium cap delayed release 20 mg (base eq), 40 mg (base eq)	NP			•	•
NEXIUM- esomeprazole magnesium for delayed release susp packet 5 mg, 10 mg, 20 mg, 40 mg	NP			•	•
NEXIUM- esomeprazole magnesium for delayed release susp pack 2.5 mg	NP			•	•
NIZATIDINE- nizatidine cap 300 mg	NP				
nizatidine cap 150 mg	np				

Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits
OMECLAMOX-PAK- amoxicillin cap-clarithro tab w/ omepraz cap dr therapy pack	NP				
omeprazole cap delayed release 10 mg, 20 mg, 40 mg	p				•
omeprazole-sodium bicarbonate cap 20-1100 mg, 40-1100 mg (Zegerid)	np				•
omeprazole-sodium bicarbonate powd pack for susp 20-1680 mg, 40-1680 mg (Zegerid)	np				•
pantoprazole sodium ec tab 20 mg (base equiv), 40 mg (base equiv) (Protonix)	p				•
pantoprazole sodium for delayed release susp packet 40 mg (Protonix)	np				•
PEPCID- famotidine tab 20 mg, 40 mg	NP				
PREVACID- lansoprazole cap delayed release 30 mg	NP			•	•
PREVACID SOLUTAB- lansoprazole tab delayed release orally disintegrating 15 mg, 30 mg	NP			•	•
PRILOSEC- omeprazole magnesium for delayed release susp packet 2.5 mg, 10 mg	NP			•	•
PROTONIX- pantoprazole sodium ec tab 20 mg (base equiv), 40 mg (base equiv)	NP			•	•
PROTONIX- pantoprazole sodium for delayed release susp packet 40 mg	NP			•	•
PYLERA- bismuth subcit-metronidazole-tetracycline cap 140-125-125 mg	NP				
RABEPRAZOLE SODIUM DR SPR- rabeprazole sodium capsule sprinkle dr 10 mg	NP			•	•

p = Preferred Generics
np = Non-preferred Generics

P = Preferred Brands
NP = Non-preferred Brands

Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits	Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits
rabeprazole sodium ec tab 20 mg	np				•	EMEND TRIPACK- aprepitant capsule therapy pack 80 & 125 mg	NP				
sucralfate susp 1 gm/10ml (Carafate)	np		•		•	granisetron hcl tab 1 mg	p				
sucralfate tab 1 gm (Carafate)	p					MARINOL- dronabinol cap 2.5 mg	NP				
TALICIA- amoxicillin-rifabutin-omeprazole cap dr 250-12.5-10 mg	NP					meclizine hcl tab 12.5 mg, 25 mg	p				
VOQUEZNA- vonoprazan fumarate tab 10 mg, 20 mg	NP			•	•	meclizine hcl tab 50 mg	np				
VOQUEZNA DUAL PAK- amoxicillin cap 500 mg & vonoprazan tab 20 mg therapy pack	NP					ONDANSETRON HCL- ondansetron hcl tab 24 mg	P				
VOQUEZNA TRIPLE PAK- amoxicillin cap & clarithromycin tab & vonoprazan tab pack	NP					ondansetron hcl oral soln 4 mg/5ml	p				
ANTIEMETICS						ondansetron hcl tab 4 mg, 8 mg	p				
AKYNZEO- netupitant-palonosetron cap 300-0.5 mg	NP					ONDANSETRON ODT- ondansetron orally disintegrating tab 16 mg	NP				
ANZEMET- dolasetron mesylate tab 50 mg	NP					ondansetron orally disintegrating tab 4 mg, 8 mg	p				
aprepitant capsule therapy pack 80 & 125 mg (Emend tripack)	p					SANCUSO- granisetron td patch 3.1 mg/24hr (contains 34.3 mg)	NP				
aprepitant capsule 40 mg, 125 mg	p					scopolamine td patch 72hr 1 mg/3days (Transderm-scop)	p				
aprepitant capsule 80 mg (Emend)	p					SYNDROS- dronabinol soln 5 mg/ml	NP		•		
BONJESTA- doxylamine-pyridoxine tab er 20-20 mg	NP		•		•	trimethobenzamide hcl cap 300 mg	p				
DICLEGIS- doxylamine-pyridoxine tab delayed release 10-10 mg	NP		•		•	VARUBI- rolapitant hcl tab therapy pack 2 x 90 mg (base equiv)	NP				
doxylamine-pyridoxine tab delayed release 10-10 mg (Diclegis)	np		•		•	DIGESTIVE AIDS					
dronabinol cap 2.5 mg (Marinol)	np					CREON- pancrelipase (lip-prot-amyl) dr cap 3000-9500-15000 unit, 6000-19000-30000 unit, 12000-38000-60000 unit, 24000-76000-120000 unit, 36000-114000-180000 unit	P				
dronabinol cap 5 mg, 10 mg	np					PANCREAZE- pancrelipase (lip-prot-amyl) dr cap 2600-8800-15200 unit, 4200-14200-24600 unit, 10500-35500-61500 unit, 16800-56800-98400 unit, 21000-54700-83900 unit, 37000-97300-149900 unit	NP			•	
EMEND- aprepitant for oral susp 125 mg (125 mg/5ml)	P										
EMEND BIPACK- aprepitant capsule 80 mg	NP										

p = Preferred Generics
np = Non-preferred Generics

P = Preferred Brands
NP = Non-preferred Brands

Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits
PERTZYE- pancrelipase (lip-prot-amyl) dr cap 4000-14375-15125 unit, 8000-28750-30250 unit, 16000-57500-60500 unit, 24000-86250-90750 unit	NP			•	
SUCRAID- sacrosidase soln 8500 unit/ml	NP	•	•		•
VIKACE- pancrelipase (lip-prot-amyl) tab 10440-39150-39150 unit, 20880-78300-78300 unit	NP			•	
ZENPEP- pancrelipase (lip-prot-amyl) dr cap 3000-10000-14000 unit, 5000-17000-24000 unit, 10000-32000-42000 unit, 15000-47000-63000 unit, 20000-63000-84000 unit, 25000-79000-105000 unit, 40000-126000-168000 unit, 60000-189600-252600 unit	P				
GASTROINTESTINAL AGENTS- MISC.					
alose tron hcl tab 0.5 mg (base equiv), 1 mg (base equiv) (Lotronex)	p				
AMITIZA- lubiprostone cap 8 mcg, 24 mcg	NP		•		•
APRISO- mesalamine cap er 24hr 0.375 gm	NP				
AURYXIA- ferric citrate tab 1 gm (210 mg ferric iron)	NP			•	•
AZULFIDINE- sulfasalazine tab 500 mg	NP				
AZULFIDINE EN-TABS- sulfasalazine tab delayed release 500 mg	NP				
balsalazide disodium cap 750 mg (Colazal)	p				
BYLVAY- odeixibat cap 400 mcg, 1200 mcg	NP	•	•		

Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits
BYLVAY (PELLETS)- odeixibat pellets cap sprinkle 200 mcg, 600 mcg	NP	•	•		
calcium acetate (phosphate binder) cap 667 mg (169 mg ca)	p				
calcium acetate (phosphate binder) tab 667 mg	p				
CANASA- mesalamine suppos 1000 mg	NP				
CHENODAL- chenodiol tab 250 mg	P	•			
CHOLBAM- cholic acid cap 50 mg, 250 mg	NP	•			
CIMZIA- certolizumab pegol prefilled syringe kit 200 mg/ml	NP	•	•		•
CIMZIA STARTER KIT- certolizumab pegol prefilled syringe kit 200 mg/ml	NP	•	•		•
COLAZAL- balsalazide disodium cap 750 mg	NP				
cromolyn sodium oral conc 100 mg/5ml (Gastrocrom)	np				
CTEXLI- chenodiol (basds) tab 250 mg	P	•	•		•
DIPENTUM- olsalazine sodium cap 250 mg	NP				
ENTYVIO PEN- vedolizumab soln auto-injector 108 mg/0.68ml	P	•	•		•
FERRIC CITRATE- ferric citrate tab 1 gm (210 mg ferric iron)	NP			•	•
FOSRENOL- lanthanum carbonate chew tab 500 mg (elemental), 750 mg (elemental), 1000 mg (elemental)	NP			•	•
FOSRENOL- lanthanum carbonate oral powder pack 750 mg (elemental), 1000 mg (elemental)	NP			•	•

p = Preferred Generics
np = Non-preferred Generics

P = Preferred Brands
NP = Non-preferred Brands

Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits
GASTROCROM- cromolyn sodium oral conc 100 mg/5ml	NP				
GATTEX- teduglutide (rdna) for inj kit 5 mg	NP	•	•		
GIMOTI- metoclopramide hcl nasal spray 15 mg/act	NP				
IBSRELA- tenapanor hcl tab 50 mg	NP		•		•
IQIRVO- elafibranor tab 80 mg	NP	•	•		•
lactulose (encephalopathy) solution 10 gm/15ml	p				
lanthanum carbonate chew tab 500 mg (elemental), 750 mg (elemental), 1000 mg (elemental) (Fosrenol)	np				•
LIALDA- mesalamine tab delayed release 1.2 gm	NP				
LINZESS- linaclotide cap 72 mcg, 145 mcg, 290 mcg	NP		•		•
LIVDELZI- seladelpar lysine cap 10 mg	NP	•	•		•
LIVMARLI- maralixibat chloride oral soln 9.5 mg/ml, 19 mg/ml	NP	•	•		
LIVMARLI- maralixibat chloride tab 10 mg, 15 mg, 20 mg, 30 mg	NP	•	•		
LOTRONEX- alosetron hcl tab 0.5 mg (base equiv), 1 mg (base equiv)	NP				
lubiprostone cap 8 mcg, 24 mcg (Amitiza)	p		•		•
mesalamine cap dr 400 mg (Delzicol)	p				
mesalamine cap er 24hr 0.375 gm (Apriso)	p				
mesalamine cap er 500 mg (Pentasa)	np				
mesalamine enema 4 gm	p				

Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits
mesalamine suppos 1000 mg (Canasa)	p				
mesalamine tab delayed release 800 mg	p				
mesalamine tab delayed release 1.2 gm (Lialda)	p				
metoclopramide hcl soln 5 mg/5ml (10 mg/10ml) (base equiv)	p				
metoclopramide hcl tab 5 mg (base equivalent), 10 mg (base equivalent) (Reglan)	p				
METOCLOPRAMIDE ODT- metoclopramide hcl orally disintegrating tab 5 mg (base eq)	NP				
MOTEGRITY- prucalopride succinate tab 1 mg (base equivalent), 2 mg (base equivalent)	NP		•		•
MOVANTIK- naloxegol oxalate tab 12.5 mg (base equivalent), 25 mg (base equivalent)	P		•		•
OMVOH- mirikizumab-mrkz subcutaneous auto-inj 100 mg/ml & 200mg/2ml	P	•	•		•
OMVOH- mirikizumab-mrkz subcutaneous pref syr 100 mg/ml & 200mg/2ml	P	•	•		•
OMVOH- mirikizumab-mrkz subcutaneous sol prefill syringe 100 mg/ml	P	•	•		•
OMVOH- mirikizumab-mrkz subcutaneous soln auto-injector 100 mg/ml	P	•	•		•
PENTASA- mesalamine cap er 250 mg, 500 mg	NP				
prucalopride succinate tab 1 mg (base equivalent), 2 mg (base equivalent) (Motegrity)	np		•		•

p = Preferred Generics
np = Non-preferred Generics

P = Preferred Brands
NP = Non-preferred Brands

Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits	Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits
REGLAN- metoclopramide hcl tab 5 mg (base equivalent), 10 mg (base equivalent)	NP					TREMFYA- guselkumab soln auto-injector 200 mg/2ml	P	•	•		•
RELISTOR- methylnaltrexone bromide inj 12 mg/0.6ml (20 mg/ml)	NP		•		•	TREMFYA- guselkumab soln prefilled syringe 200 mg/2ml	P	•	•		•
RELISTOR- methylnaltrexone bromide soln pref syr 8 mg/0.4ml, 12 mg/0.6ml	NP		•		•	TREMFYA INDUCTION PACK FO- guselkumab soln auto-injector 200 mg/2ml	P	•	•		•
RELISTOR- methylnaltrexone bromide tab 150 mg	NP		•		•	TRULANCE- plecanatide tab 3 mg	P		•		•
RELTONE- ursodiol cap 200 mg, 400 mg	NP					URSO FORTE- ursodiol tab 500 mg	NP				
RENVELA- sevelamer carbonate packet 0.8 gm, 2.4 gm	NP			•	•	URSODIOL- ursodiol cap 200 mg, 400 mg	NP				
RENVELA- sevelamer carbonate tab 800 mg	NP			•	•	ursodiol cap 300 mg	p				
REZDIFFRA- resmetirom 60 mg tab	NP	•	•		•	ursodiol tab 250 mg (Urso 250)	p				
REZDIFFRA- resmetirom 80 mg tab	NP	•	•		•	ursodiol tab 500 mg (Urso forte)	p				
REZDIFFRA- resmetirom 100 mg tab	NP	•	•		•	VELPHORO- sucroferic oxyhydroxide chew tab 500 mg	NP			•	•
sevelamer carbonate packet 0.8 gm, 2.4 gm (Renvela)	p				•	VELSIPITY- etrasimod arginine tab 2 mg	NP	•	•		•
sevelamer carbonate tab 800 mg (Renvela)	p				•	VIBERZI- eluxadoline tab 75 mg, 100 mg	P				
sevelamer hcl tab 400 mg	np				•	VOWST- fecal microbiota spores, live-brpk caps	NP	•	•		•
sevelamer hcl tab 800 mg (Renagel)	np				•	XERMELO- telotristat ethyl tab 250 mg (as telotristat etiprate)	NP	•			
SFROWASA- mesalamine sulfite-free (sf) enema 4 gm/60ml	NP					ZYMFENTRA 1-PEN- infliximab-dyyb soln auto-injector kit 120 mg/ml	NP	•	•		•
SKYRIZI- risankizumab-rzaa subcutaneous soln cartridge 180 mg/1.2ml, 360 mg/2.4ml	P	•	•		•	ZYMFENTRA 2-PEN- infliximab-dyyb soln auto-injector kit 120 mg/ml	NP	•	•		•
sulfasalazine tab delayed release 500 mg (Azulfidine en-tabs)	p					ZYMFENTRA 2-SYRINGE- infliximab-dyyb soln prefilled syringe kit 120 mg/ml	NP	•	•		•
sulfasalazine tab 500 mg (Azulfidine)	p					GENITOURINARY AGENTS					
SYMPROIC- naldemedine tosylate tab 0.2 mg (base equivalent)	P		•		•	URINARY ANTISPASMODICS					
						bethanechol chloride tab 5 mg, 10 mg, 25 mg, 50 mg	np				

p = Preferred Generics
np = Non-preferred Generics

P = Preferred Brands
NP = Non-preferred Brands

Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits	Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits
darifenacin hydrobromide tab er 24hr 7.5 mg (base equiv), 15 mg (base equiv)	np				•	VESICARE- solifenacin succinate tab 5 mg, 10 mg	NP			•	•
DETROL- tolterodine tartrate tab 2 mg	NP			•	•	VAGINAL PRODUCTS					
fesoterodine fumarate tab er 24hr 4 mg, 8 mg (Toviaz)	np				•	CLEOCIN- clindamycin phosphate vaginal cream 2%	NP				
GEMTESA- vibegron tab 75 mg	NP			•	•	CLEOCIN- clindamycin phosphate vaginal suppos 100 mg	NP				
mirabegron tab er 24 hr 25 mg, 50 mg (Myrbetriq)	np				•	clindamycin phosphate vaginal cream 2% (Cleocin)	p				
MYRBETRIQ- mirabegron granules for oral extended release susp 8 mg/ml	NP			•	•	CLINDESSE- clindamycin phosphate (one dose) vaginal cream 2%	NP				
MYRBETRIQ- mirabegron tab er 24 hr 25 mg, 50 mg	NP			•	•	CRINONE- progesterone vaginal gel 4%, 8%	NP			•	•
OXYBUTYNIN CHLORIDE- oxybutynin chloride tab 2.5 mg	NP			•	•	ENCARE- nonoxynol-9 vaginal suppos 100 mg	NP				
oxybutynin chloride solution 5 mg/5ml	p				•	ENDOMETRIN- progesterone vaginal insert 100 mg	P				•
oxybutynin chloride tab er 24hr 5 mg, 10 mg (Ditropan xl)	p				•	ESTRACE- estradiol vaginal cream 0.01%	NP				•
oxybutynin chloride tab er 24hr 15 mg	p				•	estradiol vaginal cream 0.01% (Estrace)	p				•
oxybutynin chloride tab 5 mg	p				•	estradiol vaginal tab 10 mcg (Vagifem)	p				
OXYTROL- oxybutynin td patch twice weekly 3.9 mg/24hr	NP			•	•	ESTRING- estradiol vaginal ring 2 mg (7.5 mcg/24hrs)	P				•
solifenacin succinate tab 5 mg, 10 mg (Vesicare)	p				•	FEMRING- estradiol acetate vaginal ring 0.05 mg/24hr, 0.1 mg/24hr	NP				•
tolterodine tartrate cap er 24hr 2 mg, 4 mg (Detrol la)	p				•	GYNAZOLE-1- butoconazole nitrate (one dose) vaginal cream 2%	NP				
tolterodine tartrate tab 1 mg, 2 mg (Detrol)	p				•	IMVEXXY MAINTENANCE PACK- estradiol vaginal insert 4 mcg, 10 mcg	NP				•
TOVIAZ- fesoterodine fumarate tab er 24hr 4 mg, 8 mg	NP			•	•	IMVEXXY STARTER PACK- estradiol vaginal insert starter pack 4 mcg, 10 mcg	NP				•
tropium chloride cap er 24hr 60 mg	np				•						
tropium chloride tab 20 mg	np				•						

p = Preferred Generics
np = Non-preferred Generics

P = Preferred Brands
NP = Non-preferred Brands

Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits
INTRAROSA- prasterone vaginal insert 6.5 mg	NP				
metronidazole vaginal gel 0.75%	p				
MICONAZOLE 3- miconazole nitrate vaginal suppos 200 mg	NP				
NUVESSA- metronidazole vaginal gel 1.3%	NP				
OPTIONS GYNOL II VAGINAL- nonoxynol-9 gel 3%	NP				
PHEXXI- lactic acid-citric acid-potassium bitartrate gel 1.8-1-0.4%	NP				
PREMARIN- estrogens, conjugated vaginal cream 0.625 mg/gm	NP				
terconazole vaginal cream 0.4%, 0.8%	p				
terconazole vaginal suppos 80 mg	p				
TODAY SPONGE- nonoxynol-9 vaginal sponge 1000 mg	NP				
VAGIFEM- estradiol vaginal tab 10 mcg	NP				
VANDAZOLE- metronidazole vaginal gel 0.75%	P				
VCF VAGINAL CONTRACEPTIVE- nonoxynol-9 gel 4%	NP				
VCF VAGINAL CONTRACEPTIVE- nonoxynol-9 film 28%	NP				
VCF VAGINAL CONTRACEPTIVE- nonoxynol-9 foam 12.5%	NP				
XACIATO- clindamycin phosphate vaginal gel 2%	NP				
GENITOURINARY AGENTS - MISC.					
alfuzosin hcl tab er 24hr 10 mg (Uroxatral)	p				
AVODART- dutasteride cap 0.5 mg	NP				

Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits
CARDURA XL- doxazosin mesylate tab er 24 hr 4 mg (base equiv), 8 mg (base equiv)	NP				
CYSTAGON- cysteamine bitartrate cap 50 mg, 150 mg	P	•			
dutasteride cap 0.5 mg (Avodart)	p				
dutasteride-tamsulosin hcl cap 0.5-0.4 mg (Jalyn)	np		•		
ELMIRON- pentosan polysulfate sodium caps 100 mg	NP		•	•	
ENTADFI- finasteride-tadalafil cap 5-5 mg	NP				
FILSPARI- sparsentan tab 200 mg, 400 mg	NP	•	•	•	
finasteride tab 5 mg (Proscar)	p				
JALYN- dutasteride-tamsulosin hcl cap 0.5-0.4 mg	NP		•		
K-PHOS NO 2- potassium & sodium acid phosphates tab 305-700 mg	P				
LITHOSTAT- acetohydroxamic acid tab 250 mg	NP				
potassium citrate tab er 5 meq (540 mg) (Urocit-k 5)	p				
potassium citrate tab er 10 meq (1080 mg) (Urocit-k 10)	p				
potassium citrate tab er 15 meq (1620 mg) (Urocit-k 15)	p				
PROCYSBI- cysteamine bitartrate cap delayed release 25 mg (base equiv), 75 mg (base equiv)	NP	•	•		
PROCYSBI- cysteamine bitartrate delayed release granules packet 75 mg, 300 mg	NP	•	•		
PROSCAR- finasteride tab 5 mg	NP				
RAPAFLO- silodosin cap 4 mg, 8 mg	NP				

p = Preferred Generics
np = Non-preferred Generics

P = Preferred Brands
NP = Non-preferred Brands

Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits	Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits
RIVFLOZA- nedosiran sodium subcutaneous soln pref syr 128 mg/0.8ml, 160 mg/ml	NP	•	•		•	ATIVAN- lorazepam tab 0.5 mg, 1 mg, 2 mg	NP				
RIVFLOZA- nedosiran sodium subcutaneous soln 80 mg/0.5ml	NP	•	•		•	BUCAPSOL- buspirone hcl cap 7.5 mg, 10 mg, 15 mg	NP				
silodosin cap 4 mg, 8 mg (Rapaflo)	p					buspirone hcl tab 5 mg, 10 mg, 15 mg, 30 mg	p				
sodium citrate & citric acid soln 500-334 mg/5ml	p					buspirone hcl tab 7.5 mg	np				
sodium citrate & citric acid soln 500-334 mg/5ml	np					chlordiazepoxide hcl cap 5 mg, 10 mg, 25 mg	np				
tamsulosin hcl cap 0.4 mg (Flomax)	p					clorazepate dipotassium tab 3.75 mg, 15 mg	np				
THIOLA- tiopronin tab 100 mg	NP	•				clorazepate dipotassium tab 7.5 mg (Tranxene t)	np				
THIOLA EC- tiopronin tab delayed release 100 mg, 300 mg	NP	•				diazepam conc 5 mg/ml	np				
tiopronin tab delayed release 100 mg, 300 mg (Thiola ec)	np	•				diazepam oral soln 1 mg/ml	p				
tiopronin tab 100 mg (Thiola)	np	•				diazepam tab 2 mg, 5 mg, 10 mg (Valium)	p				
UROCIT-K 10- potassium citrate tab er 10 meq (1080 mg)	NP					hydroxyzine hcl syrup 10 mg/5ml	p				
UROCIT-K 15- potassium citrate tab er 15 meq (1620 mg)	NP					hydroxyzine hcl tab 10 mg, 25 mg, 50 mg	p				
UROXATRAL- alfuzosin hcl tab er 24hr 10 mg	NP					HYDROXYZINE PAMOATE- hydroxyzine pamoate cap 100 mg	P				
VANRAFIA- atrasentan hcl tab 0.75 mg	NP		•		•	hydroxyzine pamoate cap 25 mg, 50 mg (Vistaril)	p				
CENTRAL NERVOUS SYSTEM DRUGS						lorazepam conc 2 mg/ml	p				
ANTI-ANXIETY AGENTS						lorazepam tab 0.5 mg, 1 mg, 2 mg (Ativan)	p				
ALPRAZOLAM INTENSOL- alprazolam conc 1 mg/ml	NP					LOREEV XR- lorazepam cap er 24hr sprinkle 1 mg, 1.5 mg, 2 mg, 3 mg	NP				
alprazolam orally disintegrating tab 0.25 mg, 0.5 mg, 1 mg, 2 mg	np					oxazepam cap 10 mg, 15 mg, 30 mg	np				
alprazolam tab er 24hr 0.5 mg, 1 mg, 2 mg, 3 mg (Xanax xr)	p					VALIUM- diazepam tab 2 mg, 5 mg, 10 mg	NP				
alprazolam tab 0.25 mg, 0.5 mg, 1 mg, 2 mg (Xanax)	p					XANAX- alprazolam tab 0.25 mg, 0.5 mg, 1 mg, 2 mg	NP				

p = Preferred Generics
np = Non-preferred Generics

P = Preferred Brands
NP = Non-preferred Brands

Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits
XANAX XR- alprazolam tab er 24hr 0.5 mg, 1 mg, 2 mg, 3 mg	NP				
ANTIDEPRESSANTS					
amitriptyline hcl tab 10 mg, 25 mg, 50 mg, 75 mg, 100 mg, 150 mg	p				
ANAFRANIL- clomipramine hcl cap 25 mg, 50 mg, 75 mg	NP				
APLENZIN- bupropion hbr tab er 24hr 174 mg, 348 mg, 522 mg	NP			•	•
AUVELITY- dextromethorphan hbr- bupropion hcl tab er 45-105 mg	NP			•	•
bupropion hcl tab er 12hr 100 mg, 150 mg, 200 mg (Wellbutrin sr)	p				•
bupropion hcl tab er 24hr 150 mg, 300 mg (Wellbutrin xl)	p				•
bupropion hcl tab 75 mg, 100 mg	p				•
BUPROPION HYDROCHLORIDE E- bupropion hcl tab er 24hr 450 mg	NP			•	•
CELEXA- citalopram hydrobromide tab 10 mg (base equiv), 20 mg (base equiv), 40 mg (base equiv)	NP			•	•
CITALOPRAM HYDROBROMIDE- citalopram hydrobromide cap 30 mg	NP			•	•
citalopram hydrobromide oral soln 10 mg/5ml	p				•
citalopram hydrobromide tab 10 mg (base equiv), 20 mg (base equiv), 40 mg (base equiv) (Celexa)	p				•
clomipramine hcl cap 25 mg, 50 mg, 75 mg (Anafranil)	p				
desipramine hcl tab 10 mg, 25 mg (Norpramin)	p				
desipramine hcl tab 50 mg, 75 mg, 100 mg, 150 mg	p				

Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits
DESVENLAFAXINE ER- desvenlafaxine tab er 24hr 50 mg, 100 mg	NP			•	•
desvenlafaxine succinate tab er 24hr 25 mg (base equiv), 50 mg (base equiv), 100 mg (base equiv) (Pristiq)	p				•
doxepin hcl cap 10 mg, 25 mg, 50 mg, 75 mg, 100 mg	p				
doxepin hcl cap 150 mg	np				
doxepin hcl conc 10 mg/ml	p				
DRIZALMA SPRINKLE- duloxetine hcl cap delayed release sprinkle 20 mg (base eq), 30 mg (base eq), 40 mg (base eq), 60 mg (base eq)	NP			•	•
duloxetine hcl enteric coated pellets cap 20 mg (base eq), 30 mg (base eq), 60 mg (base eq) (Cymbalta)	p				•
duloxetine hcl enteric coated pellets cap 40 mg (base eq)	np				•
EFFEXOR XR- venlafaxine hcl cap er 24hr 37.5 mg (base equivalent), 75 mg (base equivalent), 150 mg (base equivalent)	NP			•	•
EMSAM- selegiline td patch 24hr 6 mg/24hr, 9 mg/24hr, 12 mg/24hr	NP				
ESCITALOPRAM OXALATE- escitalopram oxalate cap 15 mg (base equiv)	NP			•	•
escitalopram oxalate soln 5 mg/5ml (base equiv)	p				•
escitalopram oxalate tab 5 mg (base equiv), 10 mg (base equiv), 20 mg (base equiv) (Lexapro)	p				•
FETZIMA- levomilnacipran hcl cap er 24hr 20 mg (base equivalent),	NP			•	•

p = Preferred Generics
np = Non-preferred Generics

P = Preferred Brands
NP = Non-preferred Brands

Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits
40 mg (base equivalent), 80 mg (base equivalent), 120 mg (base equivalent)					
FETZIMA TITRATION PACK- levomilnacipran hcl cap er 24hr 20 & 40 mg therapy pack	NP			•	•
FLUOXETINE DR- fluoxetine hcl cap delayed release 90 mg	NP			•	•
fluoxetine hcl cap 10 mg, 20 mg, 40 mg (Prozac)	p				•
fluoxetine hcl solution 20 mg/5ml	p				•
fluoxetine hcl tab 10 mg, 20 mg	p				•
fluoxetine hcl tab 60 mg (Fluoxetine hydrochlo)	np				•
FLUOXETINE HYDROCHLORIDE- fluoxetine hcl tab 60 mg	NP			•	•
fluvoxamine maleate cap er 24hr 100 mg, 150 mg	np				•
fluvoxamine maleate tab 25 mg, 50 mg, 100 mg	p				•
FORFIVO XL- bupropion hcl tab er 24hr 450 mg	NP			•	•
imipramine hcl tab 10 mg, 25 mg, 50 mg	p				
imipramine pamoate cap 75 mg, 100 mg, 125 mg, 150 mg	np				
LEXAPRO- escitalopram oxalate tab 5 mg (base equiv), 10 mg (base equiv), 20 mg (base equiv)	NP			•	•
MARPLAN- isocarboxazid tab 10 mg	NP				
mirtazapine orally disintegrating tab 15 mg, 30 mg, 45 mg (Remeron soltab)	np				•
mirtazapine tab 7.5 mg, 45 mg	p				•
mirtazapine tab 15 mg, 30 mg (Remeron)	p				•

Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits
NARDIL- phenelzine sulfate tab 15 mg	NP				
NORPRAMIN- desipramine hcl tab 10 mg, 25 mg	NP				
nortriptyline hcl cap 10 mg, 25 mg, 50 mg, 75 mg (Pamelor)	p				
nortriptyline hcl soln 10 mg/5ml	p				
PAMELOR- nortriptyline hcl cap 10 mg, 25 mg, 50 mg, 75 mg	NP				
PARNATE- tranylcypromine sulfate tab 10 mg	NP				
paroxetine hcl tab er 24hr 12.5 mg, 25 mg, 37.5 mg (Paxil cr)	p				•
paroxetine hcl tab 10 mg, 20 mg, 30 mg, 40 mg (Paxil)	p				•
PAROXETINE HYDROCHLORIDE- paroxetine hcl oral susp 10 mg/5ml (base equiv)	NP			•	•
PAXIL- paroxetine hcl tab 10 mg, 20 mg, 30 mg, 40 mg	NP			•	•
PAXIL CR- paroxetine hcl tab er 24hr 12.5 mg, 25 mg, 37.5 mg	NP			•	•
PHENELZINE SULFATE- phenelzine sulfate tab 15 mg	P				
PRISTIQ- desvenlafaxine succinate tab er 24hr 25 mg (base equiv), 50 mg (base equiv), 100 mg (base equiv)	NP			•	•
protriptyline hcl tab 5 mg, 10 mg	np				
RALDESY- trazodone hcl oral soln 50 mg/5ml	NP		•		•
REMERON- mirtazapine tab 15 mg, 30 mg	NP			•	•
REMERON SOLTAB- mirtazapine orally disintegrating tab 15 mg, 30 mg, 45 mg	NP			•	•

p = Preferred Generics
np = Non-preferred Generics

P = Preferred Brands
NP = Non-preferred Brands

Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits
sertraline hcl cap 150 mg, 200 mg (Sertraline hydrochloro)	np				•
sertraline hcl oral concentrate for solution 20 mg/ml (Zoloft)	p				•
sertraline hcl tab 25 mg, 50 mg, 100 mg (Zoloft)	p				•
SERTRALINE HYDROCHLORIDE-sertraline hcl cap 150 mg, 200 mg	NP			•	•
tranylcypromine sulfate tab 10 mg (Parnate)	p				
trazodone hcl tab 50 mg, 100 mg, 150 mg	p				
trazodone hcl tab 300 mg	np				
trimipramine maleate cap 25 mg, 50 mg, 100 mg	np				
TRINTELLIX- vortioxetine hbr tab 5 mg (base equiv), 10 mg (base equiv), 20 mg (base equiv)	NP			•	•
VENLAFAXINE BESYLATE ER-venlafaxine besylate tab er 24hr 112.5 mg	NP			•	•
venlafaxine hcl cap er 24hr 37.5 mg (base equivalent), 75 mg (base equivalent), 150 mg (base equivalent) (Effexor xr)	p				•
venlafaxine hcl tab er 24hr 37.5 mg (base equivalent), 75 mg (base equivalent), 150 mg (base equivalent), 225 mg (base equivalent)	np				•
venlafaxine hcl tab 25 mg (base equivalent), 37.5 mg (base equivalent), 50 mg (base equivalent), 75 mg (base equivalent), 100 mg (base equivalent)	p				•

Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits
VIIBRYD- vilazodone hcl tab 10 mg, 20 mg, 40 mg	NP			•	•
vilazodone hcl tab 10 mg, 20 mg, 40 mg (Viibryd)	np				•
WELLBUTRIN SR- bupropion hcl tab er 12hr 100 mg, 150 mg, 200 mg	NP			•	•
WELLBUTRIN XL- bupropion hcl tab er 24hr 150 mg, 300 mg	NP			•	•
ZOLOFT- sertraline hcl oral concentrate for solution 20 mg/ml	NP			•	•
ZOLOFT- sertraline hcl tab 25 mg, 50 mg, 100 mg	NP			•	•
ZURZUVAE- zuranolone cap 20 mg, 25 mg, 30 mg	P	•			•
ANTIPSYCHOTICS					
ABILIFY- aripiprazole tab 2 mg, 5 mg, 10 mg, 15 mg, 20 mg, 30 mg	NP			•	•
ABILIFY MYCITE MAINTENANC-aripiprazole tab 2 mg with sensor&strips (for pod) maint pak	NP			•	•
ABILIFY MYCITE MAINTENANC-aripiprazole tab 5 mg with sensor&strips (for pod) maint pak	NP			•	•
ABILIFY MYCITE MAINTENANC-aripiprazole tab 10 mg with sensor&strips(for pod) maint pak	NP			•	•
ABILIFY MYCITE MAINTENANC-aripiprazole tab 15 mg with sensor&strips(for pod) maint pak	NP			•	•
ABILIFY MYCITE MAINTENANC-aripiprazole tab 20 mg with sensor&strips(for pod) maint pak	NP			•	•
ABILIFY MYCITE MAINTENANC-aripiprazole tab 30 mg with sensor&strips(for pod) maint pak	NP			•	•

p = Preferred Generics
np = Non-preferred Generics

P = Preferred Brands
NP = Non-preferred Brands

Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits
ABILIFY MYCITE STARTER KI- aripiprazole tab 2 mg with sensor, strips & pod starter pak	NP			•	•
ABILIFY MYCITE STARTER KI- aripiprazole tab 5 mg with sensor, strips & pod starter pak	NP			•	•
ABILIFY MYCITE STARTER KI- aripiprazole tab 10 mg with sensor, strips & pod starter pak	NP			•	•
ABILIFY MYCITE STARTER KI- aripiprazole tab 15 mg with sensor, strips & pod starter pak	NP			•	•
ABILIFY MYCITE STARTER KI- aripiprazole tab 20 mg with sensor, strips & pod starter pak	NP			•	•
ABILIFY MYCITE STARTER KI- aripiprazole tab 30 mg with sensor, strips & pod starter pak	NP			•	•
aripiprazole oral solution 1 mg/ml	np				•
aripiprazole orally disintegrating tab 10 mg, 15 mg	np				•
aripiprazole tab 2 mg, 5 mg, 10 mg, 15 mg, 20 mg, 30 mg (Abilify)	p				•
asenapine maleate sl tab 2.5 mg (base equiv), 5 mg (base equiv), 10 mg (base equiv) (Saphris)	np				•
CAPLYTA- lumateperone tosylate cap 10.5 mg, 21 mg, 42 mg	NP				•
chlorpromazine hcl tab 10 mg, 25 mg, 50 mg, 100 mg, 200 mg	p				
CHLORPROMAZINE HYDROCHLOR- chlorpromazine hcl conc 30 mg/ml, 100 mg/ml	NP				
CLOZAPINE ODT- clozapine orally disintegrating tab 12.5 mg	NP			•	•
clozapine orally disintegrating tab 25 mg, 100 mg, 150 mg, 200 mg	np				•

Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits
clozapine tab 25 mg, 50 mg, 100 mg, 200 mg (Clozaril)	p				•
CLOZARIL- clozapine tab 25 mg, 100 mg	NP			•	•
COBENFY- xanomeline tartrate-trospium chloride cap 50-20 mg, 100-20 mg, 125-30 mg	NP			•	•
COBENFY STARTER PACK- xanomeline-trospium chloride cap pack 50-20 mg & 100-20 mg	NP			•	•
EQUETRO- carbamazepine (mood) cap er 12hr 100 mg, 200 mg, 300 mg	NP				
FANAPT- iloperidone tab 1 mg, 2 mg, 4 mg, 6 mg, 8 mg, 10 mg, 12 mg	NP			•	•
FANAPT TITRATION PACK A- iloperidone tab 1 mg & 2 mg & 4 mg & 6 mg titration pak	NP			•	•
FANAPT TITRATION PACK B- iloperidone tab 1 mg & 2 mg & 6 mg & 8 mg titration pak	NP			•	•
FANAPT TITRATION PACK C- iloperidone tab 1 mg & 2 mg & 6 mg titration pak	NP			•	•
FLUPHENAZINE HCL- fluphenazine hcl oral conc 5 mg/ml	P				
fluphenazine hcl tab 1 mg, 2.5 mg, 5 mg, 10 mg	p				
FLUPHENAZINE HYDROCHLORID- fluphenazine hcl elixir 2.5 mg/5ml	P				
GEODON- ziprasidone hcl cap 20 mg, 40 mg, 60 mg, 80 mg	NP			•	•
haloperidol lactate oral conc 2 mg/ml	p				
haloperidol tab 0.5 mg, 1 mg, 2 mg, 5 mg, 10 mg, 20 mg	p				

p = Preferred Generics
np = Non-preferred Generics

P = Preferred Brands
NP = Non-preferred Brands

Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits	Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits
INVEGA- paliperidone tab er 24hr 3 mg, 6 mg, 9 mg	NP			•	•	OPIPZA- aripiprazole oral film 2 mg, 5 mg, 10 mg	NP			•	•
LATUDA- lurasidone hcl tab 20 mg, 40 mg, 60 mg, 80 mg, 120 mg	NP			•	•	paliperidone tab er 24hr 1.5 mg, 3 mg, 6 mg, 9 mg (Invega)	np				•
LITHIUM CARBONATE- lithium carbonate cap 150 mg	P					perphenazine tab 2 mg, 4 mg, 8 mg, 16 mg	p				
LITHIUM CARBONATE- lithium carbonate cap 300 mg, 600 mg	NP					prochlorperazine maleate tab 5 mg (base equivalent), 10 mg (base equivalent)	p				
lithium carbonate cap 150 mg, 300 mg, 600 mg (Lithium carbonate)	p					prochlorperazine suppos 25 mg	p				
lithium carbonate tab er 300 mg (Lithobid)	p					QUETIAPINE FUMARATE- quetiapine fumarate tab 150 mg	NP			•	•
lithium carbonate tab er 450 mg	p					quetiapine fumarate tab er 24hr 50 mg, 150 mg, 200 mg, 300 mg, 400 mg (Seroquel xr)	p				•
lithium carbonate tab 300 mg	p					quetiapine fumarate tab 25 mg, 50 mg, 100 mg, 200 mg, 300 mg, 400 mg (Seroquel)	p				•
lithium oral solution 8 meq/5ml	p					REXULTI- brexpiprazole tab 0.25 mg, 0.5 mg, 1 mg, 2 mg, 3 mg, 4 mg	P				•
LITHOBID- lithium carbonate tab er 300 mg	NP					RISPERDAL- risperidone soln 1 mg/ ml	NP			•	•
loxapine succinate cap 5 mg, 10 mg, 25 mg, 50 mg	p					RISPERDAL- risperidone tab 0.5 mg, 1 mg, 2 mg, 3 mg, 4 mg	NP			•	•
lurasidone hcl tab 20 mg, 40 mg, 60 mg, 80 mg, 120 mg (Latuda)	p				•	RISPERIDONE ODT- risperidone orally disintegrating tab 0.25 mg	P			•	•
MOLINDONE HYDROCHLORIDE- molindone hcl tab 5 mg, 10 mg, 25 mg	NP					risperidone orally disintegrating tab 0.5 mg, 1 mg, 2 mg, 3 mg, 4 mg	p				•
NUPLAZID- pimavanserin tartrate cap 34 mg (base equivalent)	NP	•	•		•	risperidone soln 1 mg/ml (Risperdal)	p				•
NUPLAZID- pimavanserin tartrate tab 10 mg (base equivalent)	NP	•	•		•	risperidone tab 0.25 mg	p				•
olanzapine orally disintegrating tab 5 mg, 10 mg, 15 mg, 20 mg (Zyprexa zydis)	p				•	risperidone tab 0.5 mg, 1 mg, 2 mg, 3 mg, 4 mg (Risperdal)	p				•
olanzapine tab 2.5 mg, 5 mg, 7.5 mg, 10 mg, 15 mg, 20 mg (Zyprexa)	p				•	SAPHRIS- asenapine maleate sl tab 2.5 mg (base equiv), 5 mg (base equiv), 10 mg (base equiv)	NP			•	•

p = Preferred Generics
np = Non-preferred Generics

P = Preferred Brands
NP = Non-preferred Brands

Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits	Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits
SECUADO- asenapine td patch 24 hr 3.8 mg/24hr, 5.7 mg/24hr, 7.6 mg/24hr	NP			•	•	doxepin hcl (sleep) tab 3 mg (base equiv), 6 mg (base equiv) (Silenor)	np				•
SEROQUEL- quetiapine fumarate tab 25 mg, 50 mg, 100 mg, 200 mg, 300 mg, 400 mg	NP			•	•	EDLUAR- zolpidem tartrate sl tab 5 mg, 10 mg	NP			•	•
SEROQUEL XR- quetiapine fumarate tab er 24hr 50 mg, 150 mg, 200 mg, 300 mg, 400 mg	NP			•	•	estazolam tab 1 mg, 2 mg	p				
thiothixene cap 1 mg, 2 mg, 5 mg, 10 mg	p					eszopiclone tab 1 mg, 2 mg, 3 mg (Lunesta)	p				•
trifluoperazine hcl tab 1 mg (base equivalent), 2 mg (base equivalent), 5 mg (base equivalent), 10 mg (base equivalent)	p					FLURAZEPAM HYDROCHLORIDE- flurazepam hcl cap 15 mg, 30 mg	NP				
VERSACLOZ- clozapine susp 50 mg/ ml	NP			•	•	HETLIOZ- tasimelteon capsule 20 mg	NP	•	•		•
VRAYLAR- cariprazine hcl cap 1.5 mg (base equivalent), 3 mg (base equivalent), 4.5 mg (base equivalent), 6 mg (base equivalent)	P				•	HETLIOZ LQ- tasimelteon oral susp 4 mg/ml	NP	•	•		•
ziprasidone hcl cap 20 mg, 40 mg, 60 mg, 80 mg (Geodon)	p				•	LUNESTA- eszopiclone tab 1 mg, 2 mg, 3 mg	NP			•	•
ZYPREXA- olanzapine tab 2.5 mg, 5 mg, 20 mg	NP			•	•	phenobarbital elixir 20 mg/5ml	p				
HYPNOTICS						phenobarbital tab 15 mg, 16.2 mg, 30 mg, 32.4 mg, 60 mg, 100 mg	p				
AMBIEN- zolpidem tartrate tab 5 mg, 10 mg	NP			•	•	phenobarbital tab 64.8 mg, 97.2 mg	np				
AMBIEN CR- zolpidem tartrate tab er 6.25 mg, 12.5 mg	NP			•	•	QUAZEPAM- quazepam tab 15 mg	NP				
BELSOMRA- suvorexant tab 5 mg, 10 mg, 15 mg, 20 mg	P			•	•	QUVIVIQ- daridorexant hcl tab 25 mg, 50 mg	NP			•	•
DAYVIGO- lemborexant tab 5 mg, 10 mg	NP			•	•	ramelteon tab 8 mg (Rozerem)	np				•
						RESTORIL- temazepam cap 7.5 mg, 15 mg, 22.5 mg, 30 mg	NP				
						ROZEREM- ramelteon tab 8 mg	NP			•	•
						SILENOR- doxepin hcl (sleep) tab 3 mg (base equiv), 6 mg (base equiv)	NP			•	•
						tasimelteon capsule 20 mg (Hetlioz)	np	•	•		•
						temazepam cap 7.5 mg, 22.5 mg (Restoril)	np				
						temazepam cap 15 mg, 30 mg (Restoril)	p				
						zaleplon cap 5 mg, 10 mg	p				•

p = Preferred Generics
np = Non-preferred Generics

P = Preferred Brands
NP = Non-preferred Brands

Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits
ZOLPIDEM TARTRATE- zolpidem tartrate cap 7.5 mg	NP			•	•
ZOLPIDEM TARTRATE- zolpidem tartrate sl tab 1.75 mg, 3.5 mg	NP			•	•
zolpidem tartrate tab er 6.25 mg, 12.5 mg (Ambien cr)	p				•
zolpidem tartrate tab 5 mg, 10 mg (Ambien)	p				•
ADHD/ANTI-NARCOLEPSY/ANTI-OBESITY/ANOREXIANTS					
ADDERALL- amphetamine-dextroamphetamine tab 5 mg, 7.5 mg, 10 mg, 12.5 mg, 15 mg, 20 mg, 30 mg	NP				•
ADDERALL XR- amphetamine-dextroamphetamine cap er 24hr 5 mg, 10 mg, 15 mg, 20 mg, 25 mg, 30 mg	NP				•
ADZENYS XR-ODT- amphetamine tab extended release disintegrating 3.1 mg, 6.3 mg, 9.4 mg, 12.5 mg, 15.7 mg, 18.8 mg	NP				•
AMPHETAMINE ER ODT- amphetamine tab extended release disintegrating 3.1 mg, 6.3 mg, 9.4 mg, 12.5 mg, 15.7 mg, 18.8 mg	NP				•
amphetamine sulfate tab 5 mg, 10 mg (Evekeo)	np				•
amphetamine-dextroamphetamine cap er 24hr 5 mg, 10 mg, 15 mg, 20 mg, 25 mg, 30 mg (Adderall xr)	p				•
amphetamine-dextroamphetamine tab 5 mg, 7.5 mg, 10 mg, 12.5 mg, 15 mg, 20 mg, 30 mg (Adderall)	p				•
amphetamine-dextroamphetamine 3-bead cap er 24hr 12.5 mg, 25 mg, 37.5 mg, 50 mg (Mydayis)	np				•

Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits
APTENSIO XR- methylphenidate hcl cap er 24hr 10 mg (xr), 15 mg (xr), 20 mg (xr), 30 mg (xr), 40 mg (xr), 50 mg (xr), 60 mg (xr)	NP				•
armodafinil tab 50 mg, 150 mg, 200 mg, 250 mg (Nuvigil)	p				•
atomoxetine hcl cap 10 mg (base equiv), 18 mg (base equiv), 25 mg (base equiv), 40 mg (base equiv), 60 mg (base equiv), 80 mg (base equiv), 100 mg (base equiv) (Strattera)	p				•
AZSTARYS- serdexmethylphenidate-dexmethylphenidate cap 26.1-5.2 mg, 39.2-7.8 mg, 52.3-10.4 mg	P				•
caffeine citrate oral soln 60 mg/3ml (10 mg/ml base equiv)	p				•
clonidine hcl tab er 12hr 0.1 mg (Kapvay)	np				•
CONCERTA- methylphenidate hcl tab er osmotic release (osm) 18 mg, 27 mg, 36 mg, 54 mg	NP				•
CONTRAVE- naltrexone hcl-bupropion hcl tab er 12hr 8-90 mg	NP		•		•
COTEMPLA XR-ODT- methylphenidate tab extended release disintegrating 8.6 mg, 17.3 mg, 25.9 mg	NP				•
DAYTRANA- methylphenidate td patch 10 mg/9hr, 15 mg/9hr, 20 mg/9hr, 30 mg/9hr	NP				•
DEXEDRINE- dextroamphetamine sulfate cap er 24hr 10 mg, 15 mg	NP				•
dexmethylphenidate hcl cap er 24 hr 5 mg, 10 mg, 15 mg, 20 mg, 25 mg, 30 mg, 35 mg, 40 mg (Focalin xr)	p				•

p = Preferred Generics
np = Non-preferred Generics

P = Preferred Brands
NP = Non-preferred Brands

Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits	Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits
dexmethylphenidate hcl tab 2.5 mg, 5 mg, 10 mg (Focalin)	p				•	40 mg (pm), 60 mg (pm), 80 mg (pm), 100 mg (pm)					
dextroamphetamine sulfate cap er 24hr 5 mg	p				•	liraglutide (weight mngmt) soln pen-inj 18 mg/3ml (6 mg/ml) (Saxenda)	p		•		•
dextroamphetamine sulfate cap er 24hr 10 mg, 15 mg (Dexedrine)	p				•	lisdexamfetamine dimesylate cap 10 mg, 20 mg, 30 mg, 40 mg, 50 mg, 60 mg, 70 mg (Vyvanse)	p				•
dextroamphetamine sulfate oral solution 5 mg/5ml	np				•	lisdexamfetamine dimesylate chew tab 10 mg, 20 mg, 30 mg, 40 mg, 50 mg, 60 mg (Vyvanse)	p				•
dextroamphetamine sulfate tab 2.5 mg, 7.5 mg, 15 mg, 20 mg, 30 mg	np				•	METADATE CD- methylphenidate hcl cap er 10 mg (cd), 20 mg (cd), 30 mg (cd), 40 mg (cd), 50 mg (cd), 60 mg (cd)	NP				•
dextroamphetamine sulfate tab 5 mg, 10 mg	p				•	methamphetamine hcl tab 5 mg	np				•
DYANAVEL XR- amphetamine extended release susp 2.5 mg/ml	NP				•	METHYLIN- methylphenidate hcl soln 5 mg/5ml, 10 mg/5ml	NP				•
DYANAVEL XR- amphetamine tab extended release 5 mg, 10 mg, 15 mg, 20 mg	NP				•	methylphenidate hcl cap er 10 mg (cd), 20 mg (cd), 30 mg (cd), 40 mg (cd), 50 mg (cd), 60 mg (cd)	np				•
EVEKEO- amphetamine sulfate tab 5 mg, 10 mg	NP				•	methylphenidate hcl cap er 24hr 10 mg (la), 20 mg (la), 30 mg (la), 40 mg (la) (Ritalin la)	np				•
FOCALIN- dexmethylphenidate hcl tab 2.5 mg, 5 mg, 10 mg	NP				•	methylphenidate hcl cap er 24hr 60 mg (la)	np				•
FOCALIN XR- dexmethylphenidate hcl cap er 24 hr 5 mg, 10 mg, 15 mg, 20 mg, 25 mg, 30 mg, 35 mg, 40 mg	NP				•	methylphenidate hcl cap er 24hr 10 mg (xr), 15 mg (xr), 20 mg (xr), 30 mg (xr), 40 mg (xr), 50 mg (xr), 60 mg (xr) (Aptensio xr)	np				•
guanfacine hcl tab er 24hr 1 mg (base equiv), 2 mg (base equiv), 3 mg (base equiv), 4 mg (base equiv) (Intuniv)	p				•	methylphenidate hcl chew tab 2.5 mg, 5 mg, 10 mg	np				•
INTUNIV- guanfacine hcl tab er 24hr 1 mg (base equiv), 2 mg (base equiv), 3 mg (base equiv), 4 mg (base equiv)	NP				•	methylphenidate hcl soln 5 mg/5ml, 10 mg/5ml (Methylin)	np				•
JORNAY PM- methylphenidate hcl cap delayed er 24hr 20 mg (pm),	NP				•	methylphenidate hcl tab er osmotic release (osm) 18 mg, 27 mg, 36 mg, 54 mg (Concerta)	p				•

p = Preferred Generics
np = Non-preferred Generics

P = Preferred Brands
NP = Non-preferred Brands

Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits	Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits
methylphenidate hcl tab er osmotic release (osm) 72 mg	np				•	PROVIGIL- modafinil tab 100 mg, 200 mg	NP				
methylphenidate hcl tab er 10 mg, 20 mg	p				•	QELBREE- viloxazine hcl cap er 24hr 100 mg, 150 mg, 200 mg	NP				•
methylphenidate hcl tab 5 mg, 10 mg, 20 mg (Ritalin)	p				•	QSYMIA- phentermine hcl-topiramate cap er 24hr 3.75-23 mg, 7.5-46 mg, 11.25-69 mg, 15-92 mg	NP		•		•
METHYLPHENIDATE HYDROCHLO-methylphenidate hcl tab er osmotic release (osm) 45 mg, 63 mg	NP				•	QUILLICHEW ER- methylphenidate hcl chew tab extended release 20 mg, 30 mg, 40 mg	NP				•
METHYLPHENIDATE HYDROCHLO-methylphenidate hcl tab er 24hr 18 mg, 27 mg, 36 mg, 54 mg	NP				•	QUILLIVANT XR- methylphenidate hcl for er susp 25 mg/5ml (5 mg/ml)	NP				•
methylphenidate td patch 10 mg/9hr, 15 mg/9hr, 20 mg/9hr, 30 mg/9hr (Daytrana)	np				•	RELEXXII- methylphenidate hcl tab er osmotic release (osm) 18 mg, 27 mg, 36 mg, 45 mg, 54 mg, 63 mg, 72 mg	NP				•
modafinil tab 100 mg, 200 mg (Provigil)	p					RITALIN- methylphenidate hcl tab 5 mg, 10 mg, 20 mg	NP				•
MYDAYIS- amphetamine-dextroamphetamine 3-bead cap er 24hr 12.5 mg, 25 mg, 37.5 mg, 50 mg	NP				•	RITALIN LA- methylphenidate hcl cap er 24hr 10 mg (la), 20 mg (la), 30 mg (la), 40 mg (la)	NP				•
NUVIGIL- armodafinil tab 50 mg, 150 mg, 200 mg, 250 mg	NP					SAXENDA- liraglutide (weight mngmt) soln pen-inj 18 mg/3ml (6 mg/ml)	P		•		•
ONYDA XR- clonidine hcl extended release susp 0.1 mg/ml	NP				•	SUNOSI- solriamfetol hcl tab 75 mg (base equiv), 150 mg (base equiv)	P		•		•
ORLISTAT- orlistat cap 120 mg	NP		•		•	VYVANSE- lisdexamfetamine dimesylate cap 10 mg, 20 mg, 30 mg, 40 mg, 50 mg, 60 mg, 70 mg	NP				•
phentermine hcl cap 15 mg, 30 mg	np		•		•	VYVANSE- lisdexamfetamine dimesylate chew tab 10 mg, 20 mg, 30 mg, 40 mg, 50 mg, 60 mg	NP				•
phentermine hcl cap 37.5 mg (Adipex-p)	np		•		•	WAKIX- pitolisant hcl tab 4.45 mg (base equivalent), 17.8 mg (base equivalent)	NP	•	•		•
phentermine hcl tab 8 mg	np		•		•	WEGOVIY- semaglutide (weight mngmt) soln auto-injector 0.25 mg/0.5ml, 0.5 mg/0.5ml,	P		•		•
phentermine hcl tab 37.5 mg (Adipex-p)	np		•		•						
phentermine hcl-topiramate cap er 24hr 3.75-23 mg, 7.5-46 mg, 11.25-69 mg, 15-92 mg (Qsymia)	np		•		•						

p = Preferred Generics
np = Non-preferred Generics

P = Preferred Brands
NP = Non-preferred Brands

Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits
1 mg/0.5ml, 1.7 mg/0.75ml, 2.4 mg/0.75ml					
XELSTRYM- dextroamphetamine td patch 4.5 mg/9hr, 9 mg/9hr, 13.5 mg/9hr, 18 mg/9hr	NP				•
XENICAL- orlistat cap 120 mg	NP		•		•
ZEPBOUND- tirzepatide (weight mngmt) soln auto-injector 2.5 mg/0.5ml, 5 mg/0.5ml, 7.5 mg/0.5ml, 10 mg/0.5ml, 12.5 mg/0.5ml, 15 mg/0.5ml	P		•		•
PSYCHOTHERAPEUTIC and NEUROLOGICAL AGENTS - MISC.					
acamprosate calcium tab delayed release 333 mg	p				
ADDYI- fibanserin tab 100 mg	NP		•		•
ADLARITY- donepezil hydrochloride td patch weekly 5 mg/day, 10 mg/day	NP		•		•
AMPYRA- dalfampridine tab er 12hr 10 mg	NP	•			
AQNEURSA- levacetylleucine for susp packet 1 gm	NP	•	•		•
ARICEPT- donepezil hydrochloride tab 5 mg, 10 mg, 23 mg	NP				
AUBAGIO- teriflunomide tab 7 mg, 14 mg	NP	•	•		•
AUSTEDO- deutetrabenazine tab 6 mg, 9 mg, 12 mg	NP	•	•		•
AUSTEDO XR- deutetrabenazine tab er 24hr 6 mg, 12 mg, 18 mg, 24 mg, 30 mg, 36 mg, 42 mg, 48 mg	NP	•	•		•
AUSTEDO XR PATIENT TITRAT- deutetrabenazine tab er titration pack 12 & 18 & 24 & 30 mg	NP	•	•		•
AVONEX- interferon beta-1a im prefilled syringe kit 30 mcg/0.5ml	P	•	•		•

Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits
AVONEX PEN- interferon beta-1a im auto-injector kit 30 mcg/0.5ml	P	•	•		•
BAFIERTAM- monomethyl fumarate capsule delayed release 95 mg	NP	•	•		•
BETASERON- interferon beta-1b for inj kit 0.3 mg	P	•	•		•
bupropion hcl (smoking deterrent) tab er 12hr 150 mg	p				
CHANTIX CONTINUING MONTH- varenicline tartrate tab 1 mg (base equiv)	NP				
CHANTIX STARTING MONTH PA- varenicline tartrate tab 11 x 0.5 mg & 42 x 1 mg start pack	NP				
CHLORDIAZEPOXIDE/AMITRIPT- chlordiazepoxide-amitriptyline tab 5-12.5 mg, 10-25 mg	NP				
COPAXONE- glatiramer acetate soln prefilled syringe 20 mg/ml, 40 mg/ml	NP	•	•		•
dalfampridine tab er 12hr 10 mg (Ampyra)	np	•			
dimethyl fumarate capsule delayed release 120 mg, 240 mg (Tecfidera)	p	•			•
dimethyl fumarate capsule dr starter pack 120 mg & 240 mg (Tecfidera starter pa)	p	•			•
disulfiram tab 250 mg, 500 mg	p				
donepezil hydrochloride orally disintegrating tab 5 mg, 10 mg	p				
donepezil hydrochloride tab 5 mg, 10 mg (Aricept)	p				
donepezil hydrochloride tab 23 mg (Aricept)	np				
EXELON- rivastigmine td patch 24hr 4.6 mg/24hr, 9.5 mg/24hr, 13.3 mg/24hr	NP				

p = Preferred Generics
np = Non-preferred Generics

P = Preferred Brands
NP = Non-preferred Brands

Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits	Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits
 fingolimod hcl cap 0.5 mg (base equiv) (Gilenya)	p	•			•	KESIMPTA- ofatumumab soln auto-injector 20 mg/0.4ml	P	•	•		•
FLUOXETINE HYDROCHLORIDE- fluoxetine hcl (p added) tab 10 mg, 20 mg	NP					lofexidine hcl tab 0.18 mg (base equivalent) (Lucemyra)	np				
gabapentin (once-daily) tab 300 mg, 450 mg, 600 mg, 750 mg, 900 mg (Gralise)	np			•	•	LUCEMYRA- lofexidine hcl tab 0.18 mg (base equivalent)	NP				
GALANTAMINE HYDROBROMIDE- galantamine hydrobromide oral soln 4 mg/ml	P					LUMRYZ- sodium oxybate pack for oral er susp 4.5 gm, 6 gm, 7.5 gm, 9 gm	NP	•	•		•
galantamine hydrobromide cap er 24hr 8 mg, 16 mg, 24 mg (Razadyne er)	p					LUMRYZ STARTER PACK- sodium oxybate pack for er susp 4.5 & 6 & 7.5 gm starter pak	NP	•	•		•
galantamine hydrobromide tab 4 mg, 8 mg, 12 mg	p					LYBALVI- olanzapine-samidorpham l-malate tab 5-10 mg, 10-10 mg, 15-10 mg, 20-10 mg	NP			•	•
GILENYA- fingolimod hcl cap 0.25 mg (base equiv), 0.5 mg (base equiv)	NP	•	•		•	LYRICA CR- pregabalin tab er 24hr 82.5 mg, 165 mg, 330 mg	NP			•	•
glatiramer acetate soln prefilled syringe 20 mg/ml, 40 mg/ml (Copaxone)	p	•			•	MAVENCLAD- cladribine tab therapy pack 10 mg (4 tabs), 10 mg (5 tabs), 10 mg (6 tabs), 10 mg (7 tabs), 10 mg (8 tabs), 10 mg (9 tabs), 10 mg (10 tabs)	P	•	•		•
GRALISE- gabapentin (once-daily) tab 300 mg, 450 mg, 600 mg, 750 mg, 900 mg	NP			•	•	MAYZENT- siponimod fumarate tab 0.25 mg (base equiv), 1 mg (base equiv), 2 mg (base equiv)	P	•	•		•
HORIZANT- gabapentin enacarbil tab er 300 mg, 600 mg	NP			•	•	MAYZENT STARTER PACK- siponimod fumarate tab 0.25 mg (7) starter pack	P	•	•		•
INGREZZA- valbenazine tosylate cap therapy pack 40 mg (7) & 80 mg (21)	NP	•	•		•	MAYZENT STARTER PACK- siponimod fumarate tab 0.25 mg (12) starter pack	P	•	•		•
INGREZZA- valbenazine tosylate cap 40 mg (base equiv), 60 mg (base equiv), 80 mg (base equiv)	NP	•	•		•	memantine hcl cap er 24hr 7 mg, 14 mg, 21 mg, 28 mg (Namenda xr)	np				
INGREZZA- valbenazine tosylate capsule sprinkle 40 mg (base equiv), 60 mg (base equiv), 80 mg (base equiv)	NP	•	•		•	memantine hcl oral solution 2 mg/ml	p		•		•

p = Preferred Generics
np = Non-preferred Generics

P = Preferred Brands
NP = Non-preferred Brands

Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits	Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits
memantine hcl tab 5 mg, 10 mg (Namenda)	p					2-10 mg, 2-25 mg, 4-10 mg, 4-25 mg, 4-50 mg					
memantine hcl tab 28 x 5 mg & 21 x 10 mg titration pack (Namenda titration pa)	p					PIMOZIDE- pimozone tab 1 mg, 2 mg	P				
memantine hcl-donepezil hcl cap er 24hr 14-10 mg, 21-10 mg, 28-10 mg (Namzaric)	np					PLEGRIDY- peginterferon beta-1a soln auto-injector 125 mcg/0.5ml	P	•	•		•
MIPLYFFA- arimocloamol citrate cap 47 mg, 62 mg, 93 mg, 124 mg	NP	•	•		•	PLEGRIDY- peginterferon beta-1a soln prefilled syringe 125 mcg/0.5ml	P	•	•		•
NAMENDA TITRATION PAK- memantine hcl tab 28 x 5 mg & 21 x 10 mg titration pack	NP					PLEGRIDY- peginterferon beta-1a im soln prefilled syr 125 mcg/0.5ml	P	•	•		•
NAMZARIC- memantine hcl-donepezil hcl cap er 24hr 7-10 mg, 14-10 mg, 21-10 mg, 28-10 mg	NP					PLEGRIDY STARTER PACK- peginterferon beta-1a soln auto-inj 63 & 94 mcg/0.5ml pack	P	•	•		•
nicotine polacrilex gum 2 mg, 4 mg	np					PLEGRIDY STARTER PACK- peginterferon beta-1a soln pref syr 63 & 94 mcg/0.5ml pack	P	•	•		•
nicotine polacrilex lozenge 2 mg, 4 mg	np					PONVORY- ponesimod tab 20 mg	NP	•	•		•
nicotine td patch 24hr 7 mg/24hr, 14 mg/24hr, 21 mg/24hr	np					PONVORY 14-DAY STARTER PA- ponesimod tab starter pack 2,3,4,5,6,7,8,9 & 10 mg	NP	•	•		•
NICOTINE TRANSDERMAL SYST- nicotine td patch 24 hr kit 21-14-7 mg/24hr	NP					pregabalin tab er 24hr 82.5 mg, 165 mg, 330 mg (Lyrica cr)	np			•	•
NICOTROL NS- nicotine nasal spray 10 mg/ml (0.5 mg/spray)	P					REBIF- interferon beta-1a soln pref syr 22 mcg/0.5ml, 44 mcg/0.5ml	P	•	•		•
NUDEXTA- dextromethorphan hbr-quinidine sulfate cap 20-10 mg	NP		•		•	REBIF REBIDOSE- interferon beta-1a soln auto-inj 22 mcg/0.5ml, 44 mcg/0.5ml	P	•	•		•
olanzapine-fluoxetine hcl cap 3-25 mg, 6-25 mg (Symbyax)	np					REBIF REBIDOSE TITRATION- interferon beta-1a auto-inj 6x8.8 mcg/0.2ml & 6x22 mcg/0.5ml	P	•	•		•
olanzapine-fluoxetine hcl cap 6-50 mg, 12-25 mg, 12-50 mg	np					REBIF TITRATION PACK- interferon beta-1a pref syr 6x8.8 mcg/0.2ml & 6x22 mcg/0.5ml	P	•	•		•
paroxetine mesylate cap 7.5 mg (base equiv)	np					rivastigmine tartrate cap 1.5 mg (base equivalent), 3 mg (base equivalent), 4.5 mg (base equivalent), 6 mg (base equivalent)	p				
PERPHENAZINE/AMITRIPTYLIN- perphenazine-amitriptyline tab	NP										

p = Preferred Generics
np = Non-preferred Generics

P = Preferred Brands
NP = Non-preferred Brands

Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits
rivastigmine td patch 24hr 4.6 mg/24hr, 9.5 mg/24hr, 13.3 mg/24hr (Exelon)	np				
SAVELLA- milnacipran hcl tab 12.5 mg, 25 mg, 50 mg, 100 mg	P			•	•
SAVELLA TITRATION PACK- milnacipran hcl tab 12.5 mg (5) & 25 mg (8) & 50 mg (42) pak	P			•	•
SODIUM OXYBATE- sodium oxybate oral solution 500 mg/ml	NP	•	•		•
SYMBYAX- olanzapine-fluoxetine hcl cap 3-25 mg, 6-25 mg	NP				
TASCENSO ODT- fingolimod lauryl sulfate tablet disintegrating 0.25 mg, 0.5 mg	NP	•	•		•
TECFIDERA- dimethyl fumarate capsule delayed release 120 mg, 240 mg	NP	•	•		•
TECFIDERA STARTER PACK- dimethyl fumarate capsule dr starter pack 120 mg & 240 mg	NP	•	•		•
teriflunomide tab 7 mg, 14 mg (Aubagio)	p	•			•
tetrabenazine tab 12.5 mg, 25 mg (Xenazine)	p	•	•		•
varenicline tartrate tab 0.5 mg (base equiv), 1 mg (base equiv)	p				
varenicline tartrate tab 11 x 0.5 mg & 42 x 1 mg start pack	p				
VUMERITY- diroximel fumarate capsule delayed release 231 mg	P	•	•		•
VYLEESI- bremelanotide acet subcutaneous soln auto-inj 1.75 mg/0.3ml	NP	•	•		•
WAINUA- eplontersen sodium subcutaneous soln auto-inj 45 mg/0.8ml	NP	•	•		•

Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits
XENAZINE- tetrabenazine tab 12.5 mg, 25 mg	NP	•	•		•
XYREM- sodium oxybate oral solution 500 mg/ml	NP	•	•		•
XYWAV- calcium, mag, potassium, & sod oxybates oral soln 500 mg/ml	NP	•	•		•
ZEPOSIA- ozanimod hcl cap 0.92 mg	P	•	•		•
ZEPOSIA STARTER KIT- ozanimod cap pack 4 x 0.23 mg & 3 x 0.46 mg & 21 x 0.92 mg	P	•	•		•
ZEPOSIA 7-DAY STARTER PAC- ozanimod cap pack 4 x 0.23 mg & 3 x 0.46 mg	P	•	•		•
ZUNVEYL- benzgalantamine gluconate tab delayed release 5 mg, 10 mg, 15 mg	NP				
ANALGESICS AND ANESTHETICS					
ANALGESICS - NON-NARCOTIC					
ALLZITAL- butalbital-acetaminophen tab 25-325 mg	NP				•
aspirin chew tab 81 mg	np				
aspirin tab delayed release 81 mg	np				
butalbital-acetaminophen cap 50-300 mg (Butalbital/acetamino)	np				•
butalbital-acetaminophen tab 50-300 mg	np				•
butalbital-acetaminophen tab 50-325 mg	p				•
butalbital-acetaminophen-caffeine cap 50-300-40 mg (Fioricet)	np				•
butalbital-acetaminophen-caffeine cap 50-325-40 mg	np				•
butalbital-acetaminophen-caffeine tab 50-325-40 mg (Esgic)	p				•

p = Preferred Generics
np = Non-preferred Generics

P = Preferred Brands
NP = Non-preferred Brands

Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits
butalbital-aspirin-caffeine cap 50-325-40 mg	p				•
BUTALBITAL/ACETAMINOPHEN/-butalbital-acetaminophen-caffeine soln 50-325-40 mg/15ml	NP				•
diflunisal tab 500 mg	np				
DOLOBID- diflunisal tab 250 mg, 375 mg	NP			•	
FIORICET- butalbital-acetaminophen-caffeine cap 50-300-40 mg	NP				•
JOURNAVX- suzetrigine tab 50 mg	NP				•
TENCON- butalbital-acetaminophen tab 50-325 mg	P				•
ANALGESICS - NARCOTIC					
acetaminophen w/ codeine tab 300-15 mg (Tylenol/codeine)	p				•
acetaminophen w/ codeine tab 300-30 mg, 300-60 mg	p				•
ACETAMINOPHEN/CAFFEINE/DI- acetaminophen-caffeine-dihydrocodeine cap 320.5-30-16 mg	NP				•
ACETAMINOPHEN/CODEINE- acetaminophen w/ codeine soln 120-12 mg/5ml	P				•
BELBUCA- buprenorphine hcl buccal film 75 mcg (base equivalent), 150 mcg (base equivalent), 300 mcg (base equivalent), 450 mcg (base equivalent), 600 mcg (base equivalent), 750 mcg (base equivalent), 900 mcg (base equivalent)	NP		•		•
buprenorphine hcl sl tab 2 mg (base equiv), 8 mg (base equiv)	p				•
buprenorphine hcl-naloxone hcl sl film 2-0.5 mg (base equiv), 4-1 mg	p				•

Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits
(base equiv), 8-2 mg (base equiv), 12-3 mg (base equiv) (Suboxone)					
buprenorphine hcl-naloxone hcl sl tab 2-0.5 mg (base equiv), 8-2 mg (base equiv)	p				•
buprenorphine td patch weekly 5 mcg/hr, 7.5 mcg/hr, 10 mcg/hr, 15 mcg/hr, 20 mcg/hr (Butrans)	np		•		•
butalbital-acetaminophen-caff w/ cod cap 50-300-40-30 mg (Fioricet/codeine)	np				•
butalbital-acetaminophen-caff w/ cod cap 50-325-40-30 mg	np				•
butalbital-aspirin-caff w/ codeine cap 50-325-40-30 mg	p				•
butorphanol tartrate nasal soln 10 mg/ml	np				•
BUTRANS- buprenorphine td patch weekly 5 mcg/hr, 7.5 mcg/hr, 10 mcg/hr, 15 mcg/hr, 20 mcg/hr	NP		•		•
CODEINE SULFATE- codeine sulfate tab 15 mg, 30 mg, 60 mg	NP				•
codeine sulfate tab 30 mg (Codeine sulfate)	p				•
CONZIP- tramadol hcl cap er 24hr biphasic release 100 mg, 200 mg, 300 mg	NP		•		•
DILAUDID- hydromorphone hcl liqd 1 mg/ml	NP				•
DILAUDID- hydromorphone hcl tab 2 mg, 4 mg, 8 mg	NP				•
fentanyl td patch 72hr 12 mcg/hr, 25 mcg/hr, 50 mcg/hr, 75 mcg/hr, 100 mcg/hr	p		•		•
fentanyl td patch 72hr 37.5 mcg/hr, 62.5 mcg/hr, 87.5 mcg/hr	np		•		•

p = Preferred Generics
np = Non-preferred Generics

P = Preferred Brands
NP = Non-preferred Brands

Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits	Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits
HYDROCODONE BITARTRATE ER- hydrocodone bitartrate cap er 12hr 10 mg, 15 mg, 20 mg, 30 mg, 40 mg, 50 mg	NP		•		•	levorphanol tartrate tab 2 mg, 3 mg	np				•
HYDROCODONE BITARTRATE ER- hydrocodone bitartrate tab er 24hr deter 120 mg	NP		•		•	METHADONE HCL- methadone hcl soln 5 mg/5ml	NP				•
hydrocodone bitartrate tab er 24hr deter 20 mg, 30 mg, 40 mg, 60 mg, 80 mg, 100 mg (Hysingla er)	np		•		•	methadone hcl conc 10 mg/ml (Methadose)	p				•
HYDROCODONE BITARTRATE/AC- hydrocodone-acetaminophen soln 10-300 mg/15ml, 10-325 mg/15ml	NP				•	methadone hcl soln 5 mg/5ml, 10 mg/5ml (Methadone hcl)	p				•
HYDROCODONE BITARTRATE/AC- hydrocodone-acetaminophen tab 2.5-325 mg	P				•	methadone hcl tab for oral susp 40 mg	p				•
hydrocodone-acetaminophen soln 7.5-325 mg/15ml	p				•	methadone hcl tab 5 mg, 10 mg	p				•
hydrocodone-acetaminophen tab 10-325 mg, 5-325 mg, 7.5-325 mg	p				•	METHADONE HYDROCHLORIDE- methadone hcl soln 10 mg/5ml	NP				•
hydrocodone-acetaminophen tab 5-300 mg, 7.5-300 mg, 10-300 mg	np				•	METHADOSE- methadone hcl conc 10 mg/ml	NP				•
hydrocodone-ibuprofen tab 7.5-200 mg	p				•	METHADOSE SUGAR-FREE- methadone hcl conc 10 mg/ml	NP				•
HYDROCODONE/IBUPROFEN- hydrocodone-ibuprofen tab 5-200 mg, 10-200 mg	P				•	MORPHINE SULFATE- morphine sulfate oral soln 10 mg/5ml, 20 mg/5ml, 100 mg/5ml (20 mg/ml)	NP				•
hydromorphone hcl liqd 1 mg/ml (Dilaudid)	p				•	MORPHINE SULFATE- morphine sulfate tab 15 mg, 30 mg	NP				•
hydromorphone hcl tab er 24hr 8 mg, 12 mg, 16 mg, 32 mg	np		•		•	MORPHINE SULFATE ER- morphine sulfate beads cap er 24hr 30 mg, 45 mg, 60 mg, 75 mg, 90 mg, 120 mg	NP	•			•
hydromorphone hcl tab 2 mg, 4 mg, 8 mg (Dilaudid)	p				•	MORPHINE SULFATE ER- morphine sulfate cap er 24hr 10 mg, 20 mg, 30 mg, 50 mg, 60 mg, 80 mg, 100 mg	NP	•			•
HYSINGLA ER- hydrocodone bitartrate tab er 24hr deter 20 mg, 30 mg, 40 mg, 60 mg, 80 mg, 100 mg	NP		•		•	morphine sulfate oral soln 10 mg/5ml, 100 mg/5ml (20 mg/ml)	p				•
						morphine sulfate oral soln 20 mg/5ml (Morphine sulfate)	p				•
						morphine sulfate tab er 15 mg, 30 mg, 60 mg, 100 mg, 200 mg (Ms contin)	p	•			•

p = Preferred Generics
np = Non-preferred Generics

P = Preferred Brands
NP = Non-preferred Brands

Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits
morphine sulfate tab 15 mg, 30 mg (Morphine sulfate)	p				•
MS CONTIN- morphine sulfate tab er 15 mg, 30 mg, 60 mg	NP		•		•
NALOCET- oxycodone w/ acetaminophen tab 2.5-300 mg	NP				•
NUCYNTA- tapentadol hcl tab 50 mg, 75 mg, 100 mg	NP				•
NUCYNTA ER- tapentadol hcl tab er 12hr 50 mg, 100 mg, 150 mg, 200 mg, 250 mg	P		•		•
OXYCODONE AND ACETAMINOPH- oxycodone w/ acetaminophen tab 7.5-300 mg	NP				•
oxycodone hcl cap 5 mg	np				•
oxycodone hcl conc 100 mg/5ml (20 mg/ml)	p				•
oxycodone hcl soln 5 mg/5ml	p				•
oxycodone hcl tab 5 mg, 15 mg, 30 mg (Roxicodone)	p				•
oxycodone hcl tab 10 mg, 20 mg	p				•
OXYCODONE HYDROCHLORIDE- oxycodone hcl tab abuse deter 5 mg, 10 mg, 15 mg, 30 mg	NP				•
OXYCODONE HYDROCHLORIDE/A- oxycodone w/ acetaminophen soln 5-325 mg/5ml, 10-300 mg/5ml	NP				•
oxycodone w/ acetaminophen tab 2.5-325 mg (Percocet)	np				•
oxycodone w/ acetaminophen tab 5-325 mg, 7.5-325 mg, 10-325 mg (Percocet)	p				•
OXYCODONE/ACETAMINOPHEN- oxycodone w/ acetaminophen tab 2.5-300 mg, 5-300 mg, 10-300 mg	NP				•

Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits
OXYCONTIN- oxycodone hcl tab er 12hr deter 10 mg, 15 mg, 20 mg, 30 mg, 40 mg, 60 mg, 80 mg	NP		•		•
oxymorphone hcl tab 5 mg, 10 mg	np				•
OXYMORPHONE HYDROCHLORIDE- oxymorphone hcl tab er 12hr 5 mg, 7.5 mg, 10 mg, 15 mg, 20 mg, 30 mg, 40 mg	NP		•		•
PERCOCET- oxycodone w/ acetaminophen tab 2.5-325 mg, 5-325 mg, 7.5-325 mg, 10-325 mg	NP				•
PROLATE- oxycodone w/ acetaminophen soln 10-300 mg/5ml	NP				•
PROLATE- oxycodone w/ acetaminophen tab 5-300 mg, 7.5-300 mg, 10-300 mg	NP				•
ROXICODONE- oxycodone hcl tab 15 mg, 30 mg	NP				•
ROXYBOND- oxycodone hcl tab abuse deter 5 mg, 10 mg, 15 mg, 30 mg	NP				•
SUBOXONE- buprenorphine hcl- naloxone hcl sl film 2-0.5 mg (base equiv), 4-1 mg (base equiv), 8-2 mg (base equiv), 12-3 mg (base equiv)	NP				•
TRAMADOL HCL ER- tramadol hcl cap er 24hr biphasic release 100 mg, 200 mg, 300 mg	NP		•		•
TRAMADOL HCL ER- tramadol hcl tab er 24hr biphasic release 100 mg, 200 mg, 300 mg	NP		•		•
tramadol hcl tab er 24hr 100 mg, 200 mg, 300 mg	p		•		•
tramadol hcl tab 50 mg (Ultram)	p				•
tramadol hcl tab 100 mg	np				•
TRAMADOL HYDROCHLORIDE- tramadol hcl oral soln 5 mg/ml	NP				•

p = Preferred Generics
np = Non-preferred Generics

P = Preferred Brands
NP = Non-preferred Brands

Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits
TRAMADOL HYDROCHLORIDE- tramadol hcl tab 25 mg, 75 mg	NP				•
tramadol-acetaminophen tab 37.5-325 mg (Ultracet)	p				•
TREZIX- acetaminophen-caffeine-dihydrocodeine cap 320.5-30-16 mg	NP				•
XTAMPZA ER- oxycodone cap er 12hr abuse-deterrent 9 mg, 13.5 mg, 18 mg, 27 mg, 36 mg	P		•		•
ZUBSOLV- buprenorphine hcl-naloxone hcl sl tab 0.7-0.18 mg (base eq), 1.4-0.36 mg (base eq), 2.9-0.71 mg (base eq), 5.7-1.4 mg (base eq), 8.6-2.1 mg (base eq), 11.4-2.9 mg (base eq)	NP				•
ANALGESICS - ANTI-INFLAMMATORY					
ABRILADA- adalimumab-afzb prefilled syringe kit 20 mg/0.4ml, 40 mg/0.8ml	NP	•	•		•
ABRILADA 1-PEN KIT- adalimumab-afzb auto-injector kit 40 mg/0.8ml	NP	•	•		•
ABRILADA 2-PEN KIT- adalimumab-afzb auto-injector kit 40 mg/0.8ml	NP	•	•		•
ACTEMRA- tocilizumab subcutaneous soln prefilled syringe 162 mg/0.9ml	NP	•	•		•
ACTEMRA ACTPEN- tocilizumab subcutaneous soln auto-injector 162 mg/0.9ml	NP	•	•		•
ADALIMUMAB-AACF (2 PEN)- adalimumab-aacf auto-injector kit 40 mg/0.8ml	NP	•	•		•
ADALIMUMAB-AACF (2 SYRINGE)- adalimumab-aacf prefilled syringe kit 40 mg/0.8ml	NP	•	•		•
ADALIMUMAB-AACF STARTER P- adalimumab-aacf auto-injector kit 40 mg/0.8ml	NP	•	•		•

Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits
ADALIMUMAB-AATY CD/UC/HS- adalimumab-aaty auto-injector kit 80 mg/0.8ml	P	•	•		•
ADALIMUMAB-AATY 1-PEN KIT- adalimumab-aaty auto-injector kit 40 mg/0.4ml, 80 mg/0.8ml	P	•	•		•
ADALIMUMAB-AATY 2-PEN KIT- adalimumab-aaty auto-injector kit 40 mg/0.4ml	P	•	•		•
ADALIMUMAB-AATY 2-SYRINGE- adalimumab-aaty prefilled syringe kit 20 mg/0.2ml, 40 mg/0.4ml	P	•	•		•
ADALIMUMAB-ADAZ- adalimumab-adaz soln auto-injector 40 mg/0.4ml, 80 mg/0.8ml	P	•	•		•
ADALIMUMAB-ADAZ- adalimumab-adaz soln prefilled syringe 10 mg/0.1ml, 20 mg/0.2ml, 40 mg/0.4ml	P	•	•		•
ADALIMUMAB-ADBM- adalimumab-adbm auto-injector kit 40 mg/0.4ml, 40 mg/0.8ml	NP	•	•		•
ADALIMUMAB-ADBM- adalimumab-adbm prefilled syringe kit 10 mg/0.2ml, 20 mg/0.4ml, 40 mg/0.4ml, 40 mg/0.8ml	NP	•	•		•
ADALIMUMAB-ADBM STARTER P- adalimumab-adbm auto-injector kit 40 mg/0.4ml	NP	•	•		•
ADALIMUMAB-FKJP- adalimumab-fkjp auto-injector kit 40 mg/0.8ml	NP	•	•		•
ADALIMUMAB-FKJP- adalimumab-fkjp prefilled syringe kit 20 mg/0.4ml, 40 mg/0.8ml	NP	•	•		•
ADALIMUMAB-RYVK- adalimumab-ryvk prefilled syringe kit 40 mg/0.4ml	NP	•	•		•

p = Preferred Generics
np = Non-preferred Generics

P = Preferred Brands
NP = Non-preferred Brands

Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits	Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits
ADALIMUMAB-RYVK (1 PEN)- adalimumab-ryvk auto-injector kit 80 mg/0.8ml	NP	•	•		•	CYLTEZO STARTER PACKAGE F- adalimumab-adbm auto-injector kit 40 mg/0.4ml, 40 mg/0.8ml	NP	•	•		•
ADALIMUMAB-RYVK (2 PEN)- adalimumab-ryvk auto-injector kit 40 mg/0.4ml	NP	•	•		•	diclofenac potassium cap 25 mg (Zipsor)	np				
AMJEVITA- adalimumab-atto soln auto-injector 40 mg/0.4ml, 40 mg/0.8ml, 80 mg/0.8ml	NP	•	•		•	diclofenac potassium tab 25 mg	np				
AMJEVITA- adalimumab-atto soln prefilled syringe 10 mg/0.2ml, 20 mg/0.2ml, 20 mg/0.4ml, 40 mg/0.4ml, 40 mg/0.8ml	NP	•	•		•	diclofenac potassium tab 50 mg	p				
ARAVA- leflunomide tab 10 mg, 20 mg	NP					diclofenac sodium tab delayed release 25 mg, 50 mg, 75 mg	p				
ARCALYST- rilonacept for inj 220 mg	NP	•	•		•	diclofenac sodium tab er 24hr 100 mg	np				
ARTHROTEC 50- diclofenac w/ misoprostol tab delayed release 50-0.2 mg	NP			•		diclofenac w/ misoprostol tab delayed release 50-0.2 mg (Arthrotec 50)	np				
ARTHROTEC 75- diclofenac w/ misoprostol tab delayed release 75-0.2 mg	NP			•		diclofenac w/ misoprostol tab delayed release 75-0.2 mg (Arthrotec 75)	np				
CELEBREX- celecoxib cap 50 mg, 100 mg, 200 mg, 400 mg	NP			•		ENBREL- etanercept subcutaneous inj 25 mg/0.5ml	P	•	•		•
celecoxib cap 50 mg, 100 mg, 200 mg, 400 mg (Celebrex)	p					ENBREL- etanercept subcutaneous soln prefilled syringe 25 mg/0.5ml, 50 mg/ml	P	•	•		•
COMBOGESIC- ibuprofen- acetaminophen tab 97.5-325 mg	NP			•		ENBREL MINI- etanercept subcutaneous solution cartridge 50 mg/ml	P	•	•		•
COXANTO- oxaprozin cap 300 mg	NP			•		ENBREL SURECLICK- etanercept subcutaneous solution auto-injector 50 mg/ml	P	•	•		•
CYLTEZO- adalimumab-adbm auto-injector kit 40 mg/0.4ml, 40 mg/0.8ml	NP	•	•		•	etodolac cap 200 mg, 300 mg	p				
CYLTEZO- adalimumab-adbm prefilled syringe kit 10 mg/0.2ml, 20 mg/0.4ml, 40 mg/0.4ml, 40 mg/0.8ml	NP	•	•		•	etodolac tab er 24hr 400 mg, 500 mg, 600 mg	p				
						etodolac tab 400 mg (Lodine)	p				
						etodolac tab 500 mg	p				
						FENOPROFEN CALCIUM- fenopropfen calcium cap 400 mg	NP			•	

p = Preferred Generics
np = Non-preferred Generics

P = Preferred Brands
NP = Non-preferred Brands

Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits
FENOPRON- fenoprofen calcium cap 300 mg	NP			•	
FLURBIPROFEN- flurbiprofen tab 50 mg, 100 mg	NP			•	
HADLIMA- adalimumab-bwwd soln prefilled syringe 40 mg/0.4ml, 40 mg/0.8ml	P	•	•		•
HADLIMA PUSH TOUCH- adalimumab-bwwd soln auto-injector 40 mg/0.4ml, 40 mg/0.8ml	P	•	•		•
HULIO- adalimumab-fkjp auto-injector kit 40 mg/0.8ml	NP	•	•		•
HULIO- adalimumab-fkjp prefilled syringe kit 20 mg/0.4ml, 40 mg/0.8ml	NP	•	•		•
HUMIRA- adalimumab prefilled syringe kit 10 mg/0.1ml, 20 mg/0.2ml, 40 mg/0.8ml, 40 mg/0.4ml	P	•	•		•
HUMIRA PEN- adalimumab auto-injector kit 40 mg/0.8ml, 40 mg/0.4ml, 80 mg/0.8ml	P	•	•		•
HUMIRA PEN-CD/UC/HS START- adalimumab auto-injector kit 80 mg/0.8ml	P	•	•		•
HUMIRA PEN-PS/UV STARTER- adalimumab auto-injector kit 80 mg/0.8ml & 40 mg/0.4ml	P	•	•		•
HYRIMOZ- adalimumab-adaz soln auto-injector 40 mg/0.4ml	NP	•	•		•
HYRIMOZ- adalimumab-adaz soln prefilled syringe 10 mg/0.1ml, 20 mg/0.2ml, 40 mg/0.4ml	NP	•	•		•
HYRIMOZ PEDIATRIC CROHN'S- adalimumab-adaz soln prefilled syr 80 mg/0.8ml & 40 mg/0.4ml	NP	•	•		•

Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits
HYRIMOZ PEDIATRIC CROHNS- adalimumab-adaz soln prefilled syringe 80 mg/0.8ml	NP	•	•		•
HYRIMOZ PLAQUE PSORIASIS- adalimumab-adaz soln auto-injector 80 mg/0.8ml & 40 mg/0.4ml	NP	•	•		•
HYRIMOZ PLAQUE PSORIASIS/- adalimumab-adaz soln auto-injector 80 mg/0.8ml & 40 mg/0.4ml	NP	•	•		•
HYRIMOZ SENSOREADY CD/UC/- adalimumab-adaz soln auto-injector 80 mg/0.8ml	NP	•	•		•
HYRIMOZ SENSOREADY PENS- adalimumab-adaz soln auto-injector 80 mg/0.8ml	NP	•	•		•
IBUPROFEN- ibuprofen tab 300 mg	NP			•	
ibuprofen susp 100 mg/5ml	p				
ibuprofen tab 400 mg, 600 mg, 800 mg	p				
ibuprofen-famotidine tab 800-26.6 mg (Duexis)	np		•		•
INDOCIN- indomethacin susp 25 mg/5ml	NP			•	
indomethacin cap er 75 mg	np				
indomethacin cap 25 mg, 50 mg	p				
indomethacin suppos 50 mg	np		•		•
indomethacin susp 25 mg/5ml (Indocin)	np				
KETOPROFEN- ketoprofen cap 25 mg, 50 mg	NP			•	
KETOPROFEN ER- ketoprofen cap er 24hr 200 mg	NP			•	
ketorolac tromethamine tab 10 mg	np				•
KEVZARA- sarilumab subcutaneous soln prefilled syringe 150 mg/1.14ml, 200 mg/1.14ml	NP	•	•		•

p = Preferred Generics
np = Non-preferred Generics

P = Preferred Brands
NP = Non-preferred Brands

Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits	Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits
KEVZARA- sarilumab subcutaneous solution auto-injector 150 mg/1.14ml, 200 mg/1.14ml	NP	•	•		•	naproxen-esomeprazole magnesium tab dr 375-20 mg, 500-20 mg (Vimovo)	np		•		•
KINERET- anakinra subcutaneous soln prefilled syringe 100 mg/0.67ml	NP	•	•		•	OLUMIANT- baricitinib tab 1 mg, 2 mg, 4 mg	NP	•	•		•
leflunomide tab 10 mg, 20 mg (Arava)	p					ORENCIA- abatacept subcutaneous soln prefilled syringe 50 mg/0.4ml, 87.5 mg/0.7ml, 125 mg/ml	NP	•	•		•
LODINE- etodolac tab 400 mg	NP			•		ORENCIA CLICKJECT- abatacept subcutaneous soln auto-injector 125 mg/ml	NP	•	•		•
LURBIRO- flurbiprofen tab 100 mg	NP			•		OTEZLA- apremilast tab starter therapy pack 4 x 10 mg & 51 x 20 mg, 10 mg & 20 mg & 30 mg	P	•	•		•
MECLOFENAMATE SODIUM- meclufenamate sodium cap 50 mg, 100 mg	NP			•		OTEZLA- apremilast tab 20 mg, 30 mg	P	•	•		•
mefenamic acid cap 250 mg	np					OTEZLA XR- apremilast tab er 24hr 75 mg	P	•	•		•
MELOXICAM- meloxicam susp 7.5 mg/5ml	NP			•		OTEZLA/OTEZLA XR 28 DAY T- apremilast tab start pack 10 mg & 20 mg & 30 mg & (er) 75 mg	P	•	•		•
meloxicam cap 5 mg, 10 mg	np					OXAPROZIN- oxaprozin cap 300 mg	NP			•	
meloxicam tab 7.5 mg, 15 mg	p					oxaprozin tab 600 mg (Daypro)	p				
nabumetone tab 500 mg, 750 mg	p					piroxicam cap 10 mg, 20 mg (Feldene)	p				
NAPRELAN- naproxen sodium tab er 24hr 375 mg (base equiv), 500 mg (base equiv), 750 mg (base equiv)	NP			•		RASUVO- methotrexate soln pf auto-injector 7.5 mg/0.15ml, 10 mg/0.2ml, 12.5 mg/0.25ml, 15 mg/0.3ml, 17.5 mg/0.35ml, 20 mg/0.4ml, 22.5 mg/0.45ml, 25 mg/0.5ml, 30 mg/0.6ml	P				
naproxen sodium tab er 24hr 375 mg (base equiv), 500 mg (base equiv), 750 mg (base equiv) (Naprelan)	np					RELAFEN DS- nabumetone tab 1000 mg	NP			•	
naproxen sodium tab 275 mg	p					RIDAURA- auranofin cap 3 mg	NP				
naproxen sodium tab 550 mg (Anaprox ds)	p					RINVOQ- upadacitinib tab er 24hr 15 mg, 30 mg, 45 mg	P	•	•		•
naproxen susp 125 mg/5ml (Naprosyn)	np										
naproxen tab ec 375 mg, 500 mg (Ec-naprosyn)	np										
naproxen tab 250 mg, 375 mg	p										
naproxen tab 500 mg (Naprosyn)	p										

p = Preferred Generics
np = Non-preferred Generics

P = Preferred Brands
NP = Non-preferred Brands

Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits	Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits
RINVOQ LQ- upadacitinib oral soln 1 mg/ml	P	•	•		•	XELJANZ- tofacitinib citrate oral soln 1 mg/ml (base equivalent)	P	•	•		•
SIMLANDI- adalimumab-ryvk prefilled syringe kit 20 mg/0.2ml, 40 mg/0.4ml	P	•	•		•	XELJANZ- tofacitinib citrate tab 5 mg (base equivalent), 10 mg (base equivalent)	P	•	•		•
SIMLANDI 1-PEN KIT- adalimumab-ryvk auto-injector kit 40 mg/0.4ml, 80 mg/0.8ml	P	•	•		•	XELJANZ XR- tofacitinib citrate tab er 24hr 11 mg (base equivalent), 22 mg (base equivalent)	P	•	•		•
SIMLANDI 2-PEN KIT- adalimumab-ryvk auto-injector kit 40 mg/0.4ml	P	•	•		•	YUFLYMA CD/UC/HS STARTER- adalimumab-aaty auto-injector kit 80 mg/0.8ml	NP	•	•		•
SIMPONI- golimumab subcutaneous soln auto-injector 50 mg/0.5ml	NP	•	•		•	YUFLYMA 1-PEN KIT- adalimumab-aaty auto-injector kit 40 mg/0.4ml, 80 mg/0.8ml	NP	•	•		•
SIMPONI- golimumab subcutaneous soln auto-injector 100 mg/ml	P	•	•		•	YUFLYMA 2-PEN KIT- adalimumab-aaty auto-injector kit 40 mg/0.4ml	NP	•	•		•
SIMPONI- golimumab subcutaneous soln prefilled syringe 50 mg/0.5ml	NP	•	•		•	YUFLYMA 2-SYRINGE KIT- adalimumab-aaty prefilled syringe kit 20 mg/0.2ml, 40 mg/0.4ml	NP	•	•		•
SIMPONI- golimumab subcutaneous soln prefilled syringe 100 mg/ml	P	•	•		•	YUSIMRY- adalimumab-aqvh soln auto-injector 40 mg/0.8ml	NP	•	•		•
SPRIX- ketorolac tromethamine nasal spray 15.75 mg/spray	NP				•	ZIPSOR- diclofenac potassium cap 25 mg	NP			•	
sulindac tab 150 mg, 200 mg	p					MIGRAINE PRODUCTS					
TOLECTIN 600- tolmetin sodium tab 600 mg	NP			•		AIMOVIQ- erenumab-aooe subcutaneous soln auto-injector 70 mg/ml, 140 mg/ml	P		•		•
TOLMETIN SODIUM- tolmetin sodium cap 400 mg	NP			•		AJOVY- fremanezumab-vfrm subcutaneous soln auto-inj 225 mg/1.5ml	P		•		•
TOLMETIN SODIUM- tolmetin sodium tab 600 mg	NP			•		AJOVY- fremanezumab-vfrm subcutaneous soln pref syr 225 mg/1.5ml	P		•		•
TYENNE- tocilizumab-aazg subcutaneous soln auto-inj 162 mg/0.9ml	P	•	•		•	almotriptan malate tab 6.25 mg, 12.5 mg	np			•	•
TYENNE- tocilizumab-aazg subcutaneous soln pref syr 162 mg/0.9ml	P	•	•		•	CAMBIA- diclofenac potassium (migraine) packet 50 mg	NP			•	
VIMOVO- naproxen-esomeprazole magnesium tab dr 500-20 mg	NP		•		•						

p = Preferred Generics
np = Non-preferred Generics

P = Preferred Brands
NP = Non-preferred Brands

Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits	Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits
diclofenac potassium (migraine) packet 50 mg (Cambia)	np					MAXALT-MLT- rizatriptan benzoate oral disintegrating tab 10 mg (base eq)	NP			•	•
dihydroergotamine mesylate inj 1 mg/ml	p					MIGERGOT- ergotamine w/ caffeine suppos 2-100 mg	NP				
dihydroergotamine mesylate nasal spray 4 mg/ml (Migranal)	p		•		•	naratriptan hcl tab 1 mg (base equiv), 2.5 mg (base equiv)	p				•
eletriptan hydrobromide tab 20 mg (base equivalent), 40 mg (base equivalent) (Relpax)	p				•	NURTEC- rimegepant sulfate tab disint 75 mg	P		•		•
ELYXYB- celecoxib oral soln 120 mg/4.8ml (25 mg/ml)	NP		•		•	ONZETRA XSAIL- sumatriptan succinate exhaler powder 11 mg/nosepiece	NP			•	•
EMGALITY- galcanezumab-gnlm subcutaneous soln auto-injector 120 mg/ml	P		•		•	QULIPTA- atogepant tab 10 mg, 30 mg, 60 mg	P		•		•
EMGALITY- galcanezumab-gnlm subcutaneous soln prefilled syr 100 mg/ml, 120 mg/ml	P		•		•	RELPAK- eletriptan hydrobromide tab 20 mg (base equivalent), 40 mg (base equivalent)	NP			•	•
ERGOMAR- ergotamine tartrate sl tab 2 mg	NP					REYVOW- lasmiditan succinate tab 50 mg, 100 mg	P		•		•
ERGOTAMINE TARTRATE/CAFFE-ergotamine w/ caffeine tab 1-100 mg	NP					rizatriptan benzoate oral disintegrating tab 5 mg (base eq)	p				•
FROVA- frovatriptan succinate tab 2.5 mg (base equivalent)	NP			•	•	rizatriptan benzoate oral disintegrating tab 10 mg (base eq) (Maxalt-mlt)	p				•
frovatriptan succinate tab 2.5 mg (base equivalent) (Frova)	np			•	•	rizatriptan benzoate tab 5 mg (base equivalent)	p				•
IMITREX- sumatriptan succinate tab 25 mg, 50 mg, 100 mg	NP			•	•	rizatriptan benzoate tab 10 mg (base equivalent) (Maxalt)	p				•
IMITREX STATDOSE REFILL- sumatriptan succinate solution cartridge 4 mg/0.5ml, 6 mg/0.5ml	NP			•	•	sumatriptan nasal spray 5 mg/act, 20 mg/act (Imitrex)	p				•
IMITREX STATDOSE SYSTEM- sumatriptan succinate solution auto-injector 4 mg/0.5ml, 6 mg/0.5ml	NP			•	•	sumatriptan succinate inj 6 mg/0.5ml	p				•
MAXALT- rizatriptan benzoate tab 10 mg (base equivalent)	NP			•	•	SUMATRIPTAN SUCCINATE REF- sumatriptan succinate solution cartridge 4 mg/0.5ml, 6 mg/0.5ml	NP			•	•

p = Preferred Generics
np = Non-preferred Generics

P = Preferred Brands
NP = Non-preferred Brands

Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits	Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits
sumatriptan succinate solution auto-injector 4 mg/0.5ml, 6 mg/0.5ml (Ilimitrex statdose sys)	p				•	allopurinol tab 200 mg	np		•		
sumatriptan succinate tab 25 mg, 50 mg, 100 mg (Ilimitrex)	p				•	colchicine cap 0.6 mg (Mitigare)	np		•		
sumatriptan-naproxen sodium tab 85-500 mg (Treximet)	np			•	•	colchicine tab 0.6 mg (Colcrys)	p				
SYMBRAVO- meloxicam-rizatriptan tab 20-10 mg	NP			•	•	colchicine w/ probenecid tab 0.5-500 mg	p				
TOSYMRA- sumatriptan nasal spray 10 mg/act	NP			•	•	febuxostat tab 40 mg, 80 mg (Uloric)	np				
TREXIMET- sumatriptan-naproxen sodium tab 85-500 mg	NP			•	•	GLOPERBA- colchicine oral soln 0.6 mg/5ml	NP				
TRUDHESA- dihydroergotamine mesylate hfa nasal aerosol 0.725 mg/act	NP		•		•	MITIGARE- colchicine cap 0.6 mg	NP		•		
UBRELVY- ubrogepant tab 50 mg, 100 mg	P		•		•	probenecid tab 500 mg	p				
ZAVZPRET- zavegepant hcl nasal spray 10 mg/act	NP		•		•	ULORIC- febuxostat tab 40 mg, 80 mg	NP				
ZEMBRACE SYMTOUCH- sumatriptan succinate solution auto-injector 3 mg/0.5ml	NP			•	•	NEUROMUSCULAR DRUGS					
ZOLMITRIPTAN- zolmitriptan nasal spray 2.5 mg/spray unit	NP			•	•	ANTICONVULSANTS					
zolmitriptan nasal spray 5 mg/spray unit (Zomig)	np			•	•	APTIOM- eslicarbazepine acetate tab 200 mg, 400 mg, 600 mg, 800 mg	NP				
zolmitriptan orally disintegrating tab 2.5 mg, 5 mg	np				•	BANZEL- rufinamide susp 40 mg/ml	NP				
zolmitriptan tab 2.5 mg, 5 mg (Zomig)	np				•	BANZEL- rufinamide tab 200 mg, 400 mg	NP				
ZOMIG- zolmitriptan nasal spray 2.5 mg/spray unit, 5 mg/spray unit	NP			•	•	BRIVIACT- brivaracetam oral soln 10 mg/ml	NP				
GOUT AGENTS						BRIVIACT- brivaracetam tab 10 mg, 25 mg, 50 mg, 75 mg, 100 mg	NP				
allopurinol tab 100 mg, 300 mg (Zyloprim)	p					CARBAMAZEPINE- carbamazepine chew tab 200 mg	NP				
						carbamazepine cap er 12hr 100 mg, 200 mg, 300 mg (Carbatrol)	p				
						carbamazepine chew tab 100 mg	p				
						carbamazepine susp 100 mg/5ml (Tegretol)	p				
						carbamazepine tab er 12hr 100 mg, 200 mg, 400 mg (Tegretol-xr)	p				
						carbamazepine tab 200 mg (Tegretol)	p				

p = Preferred Generics
np = Non-preferred Generics

P = Preferred Brands
NP = Non-preferred Brands

Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits	Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits
CARBATROL- carbamazepine cap er 12hr 100 mg, 200 mg, 300 mg	NP					divalproex sodium cap delayed release sprinkle 125 mg (Depakote sprinkles)	p				
CELONTIN- methsuximide cap 300 mg	NP					divalproex sodium tab delayed release 125 mg, 250 mg, 500 mg (Depakote)	p				
clobazam suspension 2.5 mg/ml (Onfi)	np					divalproex sodium tab er 24 hr 250 mg, 500 mg (Depakote er)	p				
clobazam tab 10 mg, 20 mg (Onfi)	np					ELEPSIA XR- levetiracetam tab er 24hr 1000 mg, 1500 mg	NP				
clonazepam orally disintegrating tab 0.125 mg, 0.25 mg, 0.5 mg, 1 mg, 2 mg	np					EPIDIOLEX- cannabidiol soln 100 mg/ml	P	•	•		
clonazepam tab 0.5 mg, 1 mg, 2 mg (Klonopin)	p					EPRONTIA- topiramate oral soln 25 mg/ml	NP				
DEPAKOTE- divalproex sodium tab delayed release 125 mg, 250 mg, 500 mg	NP					eslicarbazepine acetate tab 200 mg, 400 mg, 600 mg, 800 mg (Aptiom)	p				
DEPAKOTE ER- divalproex sodium tab er 24 hr 250 mg, 500 mg	NP					ethosuximide cap 250 mg (Zarontin)	p				
DEPAKOTE SPRINKLES- divalproex sodium cap delayed release sprinkle 125 mg	NP					ethosuximide soln 250 mg/5ml (Zarontin)	p				
DIACOMIT- stiripentol cap 250 mg, 500 mg	NP	•				felbamate susp 600 mg/5ml (Felbatol)	np				
DIACOMIT- stiripentol packet 250 mg, 500 mg	NP	•				felbamate tab 400 mg, 600 mg (Felbatol)	np				
DIAZEPAM RECTAL GEL- diazepam rectal gel delivery system 2.5 mg	NP					FELBATOL- felbamate tab 400 mg, 600 mg	NP				
diazepam rectal gel delivery system 10 mg (Diastat acudial)	p					FINTEPLA- fenfluramine hcl oral soln 2.2 mg/ml	NP	•	•		•
diazepam rectal gel delivery system 20 mg	p					FYCOMPA- perampanel susp 0.5 mg/ml	NP				
DILANTIN- phenytoin sodium extended cap 30 mg, 100 mg	P					FYCOMPA- perampanel tab 2 mg, 4 mg, 6 mg, 8 mg, 10 mg, 12 mg	NP				
DILANTIN INFATABS- phenytoin chew tab 50 mg	NP					gabapentin cap 100 mg, 300 mg, 400 mg (Neurontin)	p				
DILANTIN-125- phenytoin susp 125 mg/5ml	P					gabapentin oral soln 250 mg/5ml (Neurontin)	p				

p = Preferred Generics
np = Non-preferred Generics

P = Preferred Brands
NP = Non-preferred Brands

Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits	Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits
gabapentin tab 600 mg, 800 mg (Neurontin)	p					LAMICTAL STARTER/TAKING V-lamotrigine tab 35 x 25 mg starter kit	NP				
GABARONE- gabapentin tab 100 mg, 400 mg	NP					LAMICTAL XR- lamotrigine tab er 24hr 25 mg, 50 mg, 100 mg, 200 mg, 250 mg, 300 mg	NP				
KEPPRA- levetiracetam oral soln 100 mg/ml	NP					LAMICTAL XR- lamotrigine tab er 24hr 21 x 25 mg & 7 x 50 mg titration kit	NP				
KEPPRA- levetiracetam tab 250 mg, 500 mg, 750 mg, 1000 mg	NP					LAMICTAL XR- lamotrigine tab er 24hr 25 (14) & 50 mg (14) & 100 mg(7) kit	NP				
KEPPRA XR- levetiracetam tab er 24hr 500 mg, 750 mg	NP					LAMICTAL XR- lamotrigine tab er 24hr 50 (14) & 100 mg(14) & 200 mg(7) kit	NP				
KLONOPIN- clonazepam tab 0.5 mg, 1 mg, 2 mg	NP					lamotrigine orally disintegrating tab 25 mg, 50 mg, 100 mg, 200 mg (Lamictal odt)	np				
lacosamide oral solution 10 mg/ml (Vimpat)	p					lamotrigine tab chewable dispersible 5 mg, 25 mg (Lamictal chewable di)	p				
lacosamide tab 50 mg, 100 mg, 150 mg, 200 mg (Vimpat)	p					lamotrigine tab disint 21 x 25 mg & 7 x 50 mg titration kit (Lamictal odt)	np				
LAMICTAL- lamotrigine tab 25 mg, 100 mg, 150 mg, 200 mg	NP					lamotrigine tab disint 42 x 50mg & 14 x 100mg titration kit (Lamictal odt)	np				
LAMICTAL CHEWABLE DISPERS- lamotrigine tab chewable dispersible 5 mg, 25 mg	NP					lamotrigine tab disint 25 (14) & 50 mg (14) & 100 mg (7) kit (Lamictal odt)	np				
LAMICTAL ODT- lamotrigine orally disintegrating tab 25 mg, 50 mg, 100 mg, 200 mg	NP					lamotrigine tab er 24hr 25 mg, 50 mg, 100 mg, 200 mg, 250 mg, 300 mg (Lamictal xr)	np				
LAMICTAL ODT- lamotrigine tab disint 21 x 25 mg & 7 x 50 mg titration kit	NP					lamotrigine tab 25 mg, 100 mg, 150 mg, 200 mg (Lamictal)	p				
LAMICTAL ODT- lamotrigine tab disint 42 x 50mg & 14 x 100mg titration kit	NP					lamotrigine tab 35 x 25 mg starter kit (Lamictal starter/tak)	np				
LAMICTAL ODT- lamotrigine tab disint 25 (14) & 50 mg (14) & 100 mg (7) kit	NP										
LAMICTAL STARTER/NOT TAKI- lamotrigine tab 25 mg (42) & 100 mg (7) starter kit	NP										
LAMICTAL STARTER/TAKING C- lamotrigine tab 84 x 25 mg & 14 x 100 mg starter kit	NP										

p = Preferred Generics
np = Non-preferred Generics

P = Preferred Brands
NP = Non-preferred Brands

Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits
lamotrigine tab 25 mg (42) & 100 mg (7) starter kit (Lamictal starter/not)	np				
lamotrigine tab 84 x 25 mg & 14 x 100 mg starter kit (Lamictal starter/tak)	np				
levetiracetam oral soln 100 mg/ml (Keppra)	p				
levetiracetam tab er 24hr 500 mg, 750 mg (Keppra xr)	p				
levetiracetam tab 250 mg, 500 mg, 750 mg, 1000 mg (Keppra)	p				
LYRICA- pregabalin cap 25 mg, 50 mg, 75 mg, 100 mg, 150 mg, 200 mg, 225 mg, 300 mg	NP			•	•
LYRICA- pregabalin soln 20 mg/ml	NP			•	•
methsuximide cap 300 mg (Celontin)	p				
MOTPOLY XR- lacosamide cap er 24hr 100 mg, 150 mg, 200 mg	NP				
MYSOLINE- primidone tab 50 mg, 250 mg	NP				
NAYZILAM- midazolam nasal spray soln 5 mg/0.1 ml	NP				
NEURONTIN- gabapentin cap 100 mg, 300 mg, 400 mg	NP				
NEURONTIN- gabapentin oral soln 250 mg/5ml	NP				
NEURONTIN- gabapentin tab 600 mg, 800 mg	NP				
ONFI- clobazam suspension 2.5 mg/ml	NP				
ONFI- clobazam tab 10 mg, 20 mg	NP				
oxcarbazepine susp 300 mg/5ml (60 mg/ml) (Trileptal)	p				

Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits
oxcarbazepine tab er 24hr 150 mg, 300 mg, 600 mg (Oxtellar xr)	np				
oxcarbazepine tab 150 mg, 300 mg, 600 mg (Trileptal)	p				
OXTELLAR XR- oxcarbazepine tab er 24hr 150 mg, 300 mg, 600 mg	NP				
perampanel tab 2 mg, 4 mg, 6 mg, 8 mg, 10 mg, 12 mg (Fycompa)	np				
phenytoin chew tab 50 mg (Dilantin infatabs)	p				
phenytoin sodium extended cap 100 mg (Dilantin)	p				
phenytoin sodium extended cap 200 mg, 300 mg (Phenytek)	p				
phenytoin susp 125 mg/5ml (Dilantin-125)	p				
pregabalin cap 25 mg, 50 mg, 75 mg, 100 mg, 150 mg, 200 mg, 225 mg, 300 mg (Lyrica)	p				•
pregabalin soln 20 mg/ml (Lyrica)	p				•
PRIMIDONE- primidone tab 125 mg	NP				
primidone tab 50 mg, 250 mg (Mysoline)	p				
rufinamide susp 40 mg/ml (Banzel)	np				
rufinamide tab 200 mg, 400 mg (Banzel)	p				
SABRIL- vigabatrin powd pack 500 mg	NP	•			
SABRIL- vigabatrin tab 500 mg	NP	•			
SPRITAM- levetiracetam tab disintegrating soluble 250 mg, 500 mg	NP				
SYMPAZAN- clobazam oral film 5 mg, 10 mg, 20 mg	NP				
TEGRETOL- carbamazepine susp 100 mg/5ml	NP				

p = Preferred Generics
np = Non-preferred Generics

P = Preferred Brands
NP = Non-preferred Brands

Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits	Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits
TEGRETOL- carbamazepine tab 200 mg	NP					VALTOCO 15 MG DOSE- diazepam nasal spray ther pack 2 x 7.5 mg/0.1ml (15 mg dose)	NP				
TEGRETOL-XR- carbamazepine tab er 12hr 100 mg, 200 mg, 400 mg	NP					VALTOCO 20 MG DOSE- diazepam nasal spray ther pack 2 x 10 mg/0.1ml (20 mg dose)	NP				
tiagabine hcl tab 2 mg, 4 mg, 12 mg, 16 mg (Gabitril)	np					VALTOCO 5 MG DOSE- diazepam nasal spray 5 mg/0.1 ml	NP				
TOPAMAX- topiramate tab 25 mg, 50 mg, 100 mg, 200 mg	NP					vigabatrin powd pack 500 mg (Sabril)	p	•			
TOPAMAX SPRINKLE- topiramate sprinkle cap 15 mg, 25 mg	NP					vigabatrin tab 500 mg (Sabril)	p	•			
topiramate cap er 24hr sprinkle 25 mg, 50 mg, 100 mg, 150 mg, 200 mg (Qudexy xr)	np		•		•	VIGAFYDE- vigabatrin oral soln 100 mg/ml	NP		•		
topiramate cap er 24hr 25 mg, 50 mg, 100 mg, 200 mg (Trokendi xr)	np		•		•	VIMPAT- lacosamide oral solution 10 mg/ml	NP				
topiramate oral soln 25 mg/ml (Eprontia)	np					VIMPAT- lacosamide tab 50 mg, 100 mg, 150 mg, 200 mg	NP				
topiramate sprinkle cap 15 mg, 25 mg (Topamax sprinkle)	p					XCOPRI- cenobamate tab pack 100 mg & 150 mg tabs (250 mg daily dose)	NP				
topiramate sprinkle cap 50 mg	np					XCOPRI- cenobamate tab pack 150 mg & 200 mg tabs (350 mg daily dose)	NP				
topiramate tab 25 mg, 50 mg, 100 mg, 200 mg (Topamax)	p					XCOPRI- cenobamate tab titration pack 14 x 12.5 mg & 14 x 25 mg, 14 x 50 mg & 14 x 100 mg, 14 x 150 mg & 14 x 200 mg	NP				
TRILEPTAL- oxcarbazepine susp 300 mg/5ml (60 mg/ml)	NP					XCOPRI- cenobamate tab 25 mg, 50 mg, 100 mg, 150 mg, 200 mg	NP				
TRILEPTAL- oxcarbazepine tab 150 mg, 300 mg, 600 mg	NP					ZARONTIN- ethosuximide cap 250 mg	NP				
TROKENDI XR- topiramate cap er 24hr 25 mg, 50 mg, 100 mg, 200 mg	NP		•		•	ZARONTIN- ethosuximide soln 250 mg/5ml	NP				
valproate sodium oral soln 250 mg/5ml (base equiv)	p					ZONEGRAN- zonisamide cap 25 mg, 100 mg	NP				
valproic acid cap 250 mg	p					ZONISADE- zonisamide oral susp 100 mg/5ml (20 mg/ml)	NP				
VALTOCO 10 MG DOSE- diazepam nasal spray 10 mg/0.1 ml	NP										

p = Preferred Generics
np = Non-preferred Generics

P = Preferred Brands
NP = Non-preferred Brands

Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits
zonisamide cap 25 mg, 100 mg (Zonegran)	p				
zonisamide cap 50 mg	p				
ZTALMY- ganaxolone susp 50 mg/ml	NP	•			
ANTIPARKINSON AGENTS					
amantadine hcl cap 100 mg	p				
amantadine hcl soln 50 mg/5ml	p				
amantadine hcl tab 100 mg	np				
APOKYN- apomorphine hcl soln cartridge 30 mg/3ml	NP	•			
apomorphine hcl soln cartridge 30 mg/3ml (Apokyn)	np	•			
AZILECT- rasagiline mesylate tab 0.5 mg (base equiv), 1 mg (base equiv)	NP				
benztropine mesylate tab 0.5 mg, 1 mg, 2 mg	p				
bromocriptine mesylate cap 5 mg (base equivalent) (Parlodel)	np				
bromocriptine mesylate tab 2.5 mg (base equivalent) (Parlodel)	np				
carbidopa & levodopa orally disintegrating tab 10-100 mg, 25-100 mg, 25-250 mg	p				
carbidopa & levodopa tab er 25-100 mg, 50-200 mg	p				
carbidopa & levodopa tab 10-100 mg, 25-100 mg (Sinemet)	p				
carbidopa & levodopa tab 25-250 mg	p				
carbidopa tab 25 mg (Lodosyn)	np				
carbidopa-levodopa-entacapone tabs 12.5-50-200 mg (Stalevo 50)	p				
carbidopa-levodopa-entacapone tabs 18.75-75-200 mg (Stalevo 75)	p				

Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits
carbidopa-levodopa-entacapone tabs 25-100-200 mg (Stalevo 100)	p				
carbidopa-levodopa-entacapone tabs 31.25-125-200 mg (Stalevo 125)	p				
carbidopa-levodopa-entacapone tabs 37.5-150-200 mg (Stalevo 150)	p				
carbidopa-levodopa-entacapone tabs 50-200-200 mg (Stalevo 200)	p				
CREXONT- carbidopa & levodopa cap er 35-140 mg, 52.5-210 mg, 70-280 mg, 87.5-350 mg	NP				
DHIVY- carbidopa & levodopa tab 25-100 mg	NP				
DUOPA- carbidopa-levodopa enteral susp 4.63-20 mg/ml	NP				
entacapone tab 200 mg (Comtan)	p				
GOCOVRI- amantadine hcl cap er 24hr 68.5 mg (base equivalent), 137 mg (base equivalent)	NP	•	•		
INBRIJA- levodopa inhal powder cap 42 mg	P	•			
LODOSYN- carbidopa tab 25 mg	NP				
NEUPRO- rotigotine td patch 24hr 1 mg/24hr, 2 mg/24hr, 3 mg/24hr, 4 mg/24hr, 6 mg/24hr, 8 mg/24hr	NP				
NOURIANZ- istradefylline tab 20 mg, 40 mg	NP	•			
ONAPGO- apomorphine hcl soln cartridge 98 mg/20ml	NP	•			
ONGENTYS- opicapone cap 25 mg	NP				
ONGENTYS- opicapone cap 50 mg	NP		•		
PARLODEL- bromocriptine mesylate cap 5 mg (base equivalent)	NP				

p = Preferred Generics
np = Non-preferred Generics

P = Preferred Brands
NP = Non-preferred Brands

Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits	Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits
PARLODEL- bromocriptine mesylate tab 2.5 mg (base equivalent)	NP					VYALEV- foscarnidopa-foslevodopa subcutaneous inj 12-240 mg/ml	NP	•			
pramipexole dihydrochloride tab er 24hr 0.375 mg, 0.75 mg, 2.25 mg, 3 mg, 3.75 mg, 4.5 mg (Mirapex er)	np					XADAGO- safinamide mesylate tab 50 mg (base equiv), 100 mg (base equiv)	NP				
pramipexole dihydrochloride tab er 24hr 1.5 mg (Mirapex er)	np		•			ZELAPAR- selegiline hcl orally disintegrating tab 1.25 mg	NP				
pramipexole dihydrochloride tab 0.125 mg, 0.25 mg, 0.5 mg, 0.75 mg, 1 mg, 1.5 mg	p					NEUROMUSCULAR AGENTS					
rasagiline mesylate tab 0.5 mg (base equiv), 1 mg (base equiv) (Azilect)	p					DAYBUE- trofinetide oral soln 200 mg/ml	NP	•	•		•
ropinirole hydrochloride tab er 24hr 2 mg (base equivalent), 4 mg (base equivalent), 6 mg (base equivalent), 8 mg (base equivalent), 12 mg (base equivalent)	np					DUVYZAT- givinostat hcl oral susp 8.86 mg/ml	NP	•	•		•
ropinirole hydrochloride tab 0.25 mg, 0.5 mg, 1 mg, 2 mg, 3 mg, 4 mg, 5 mg	p					EVRYSDI- risdiplam for soln 0.75 mg/ml	NP	•	•		•
RYTARY- carbidopa & levodopa cap er 23.75-95 mg, 36.25-145 mg, 48.75-195 mg, 61.25-245 mg	NP					EVRYSDI- risdiplam tab 5 mg	NP	•	•		•
selegiline hcl cap 5 mg	p					RADICAVA ORS- edaravone oral susp 105 mg/5ml	NP	•	•		•
selegiline hcl tab 5 mg	p					RADICAVA ORS STARTER KIT- edaravone oral susp 105 mg/5ml	NP	•	•		•
SINEMET- carbidopa & levodopa tab 10-100 mg, 25-100 mg	NP					riluzole tab 50 mg (Rilutek)	p	•			
TASMAR- tolcapone tab 100 mg	NP					SKYCLARYS- omaveloxolone cap 50 mg	NP	•	•		•
tolcapone tab 100 mg (Tasmar)	np					TIGLUTIK- riluzole susp 50 mg/10ml	NP	•	•		•
TRIHXYPHENIDYL HCL- trihexyphenidyl hcl oral soln 0.4 mg/ml	P					MUSCULOSKELETAL THERAPY AGENTS					
trihexyphenidyl hcl tab 2 mg, 5 mg	p					AMRIX- cyclobenzaprine hcl cap er 24hr 15 mg, 30 mg	NP				
						BACLOFEN- baclofen oral soln 5 mg/5ml	NP		•		•
						baclofen oral soln 10 mg/5ml (Ozobax ds)	np		•		•
						baclofen susp 25 mg/5ml (Fleqsuvy)	np		•		•
						baclofen tab 5 mg, 15 mg	np				
						baclofen tab 10 mg, 20 mg	p				

p = Preferred Generics
np = Non-preferred Generics

P = Preferred Brands
NP = Non-preferred Brands

Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits	Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits
chlorzoxazone tab 250 mg, 375 mg, 750 mg	np					ORPHENGESIC FORTE- orphenadrine w/ aspirin & caffeine tab 50-770-60 mg	NP		•		
chlorzoxazone tab 500 mg	p					OZOBAX DS- baclofen oral soln 10 mg/5ml	NP		•		•
cyclobenzaprine hcl cap er 24hr 15 mg, 30 mg (Amrix)	np					SOHONOS- palovarotene cap 1 mg, 1.5 mg, 2.5 mg, 5 mg, 10 mg	NP	•	•		•
cyclobenzaprine hcl tab 5 mg, 10 mg	p					SYNVISC- hylan g-f 20 intra-articular soln prefilled syr 16 mg/2ml	P				
cyclobenzaprine hcl tab 7.5 mg	np					SYNVISC ONE- hylan g-f 20 intra- articular soln prefilled syr 48 mg/6ml	P				
DANTRIUM- dantrolene sodium cap 25 mg	NP					tizanidine hcl cap 2 mg (base equivalent), 4 mg (base equivalent), 6 mg (base equivalent) (Zanaflex)	np				
dantrolene sodium cap 25 mg (Dantrium)	np					tizanidine hcl tab 2 mg (base equivalent)	p				
dantrolene sodium cap 50 mg, 100 mg	np					tizanidine hcl tab 4 mg (base equivalent) (Zanaflex)	p				
EUFLEXXA- sodium hyaluronate intra-articular soln pref syr 20 mg/2ml	P					ZANAFLEX- tizanidine hcl cap 8 mg (base equivalent)	NP				
FLEQSUVY- baclofen susp 25 mg/5ml	NP		•		•	ZANAFLEX- tizanidine hcl tab 4 mg (base equivalent)	NP				
METAXALONE- metaxalone tab 640 mg	NP		•			ANTIMYASTHENIC AGENTS					
metaxalone tab 400 mg	np		•			FIRDAPSE- amifampridine phosphate tab 10 mg (base equivalent)	NP	•	•		•
metaxalone tab 800 mg	np					MESTINON- pyridostigmine bromide oral soln 60 mg/5ml	NP				
methocarbamol tab 500 mg, 750 mg	p					MESTINON- pyridostigmine bromide tab 60 mg	NP				
methocarbamol tab 1000 mg	np					MESTINON TIMESPAN- pyridostigmine bromide tab er 180 mg	NP				
NORGESIC- orphenadrine w/ aspirin & caffeine tab 25-385-30 mg	NP					PYRIDOSTIGMINE BROMIDE- pyridostigmine bromide tab 30 mg	NP				
NORGESIC FORTE- orphenadrine w/ aspirin & caffeine tab 50-770-60 mg	NP		•								
orphenadrine citrate tab er 12hr 100 mg	p										
ORPHENADRINE/ASPIRIN/CAFF- orphenadrine w/ aspirin & caffeine tab 25-385-30 mg	NP										

p = Preferred Generics
np = Non-preferred Generics

P = Preferred Brands
NP = Non-preferred Brands

Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits
pyridostigmine bromide oral soln 60 mg/5ml (Mestinon)	np				
pyridostigmine bromide tab er 180 mg (Mestinon timespan)	np				
pyridostigmine bromide tab 60 mg (Mestinon)	p				
NUTRITIONAL PRODUCTS					
VITAMINS					
DRISDOL- ergocalciferol cap 1.25 mg (50000 unit)	NP				
ergocalciferol cap 1.25 mg (50000 unit) (Drisdol)	p				
phytonadione tab 5 mg (Mephyton)	p				
MULTIVITAMINS					
ALTRIXA OB- prenatal vit w/ fe fum-methylfolate-fa tab 15-0.4-0.6 mg	NP				
ATABEX EC- prenatal vit w/ dss-iron carbonyl-fa tab dr 29-1 mg	NP				
ATABEX OB- prenatal vit w/ fe bisglycinate chelate-fa tab 29-1 mg	NP				
AZESCO- prenatal vit w/ fe gluconate-fa tab 13-1 mg	NP				
C-NATE DHA- prenatal vit w/ fe fum-fa-omega 3 cap 28-1-200 mg	NP				
CITRANATAL ASSURE- prenatal w/o a w/fecbn-fegl-dss-fa tab & dha cap 300 mg pack	NP				
CITRANATAL 90 DHA- prenatal w/o a w/fecbn-fegl-dss-fa tab 90 & dha cap 300mg pak	NP				
CO-NATAL FA- prenatal vit w/ fe fumarate-fa tab 29-1 mg	NP				
COMPLETE NATAL DHA- prenatal-fe bis-fe prot succ-fa-ca tab & omega 3 cap 200 pk	NP				

Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits
COMPLETENATE- prenatal vit w/ fe fumarate-fa chew tab 29-1 mg	NP				
CONCEPT DHA- prenatal w/fe fum-fe poly -fa-omega 3 cap 53.5-38-1 mg	NP				
CONCEPT OB- prenatal w/o a w/fe fum-fe poly-fa cap 130-92.4-1 mg	NP				
DERMACINRX PRETRATE- prenatal multivitamins & minerals w/ iron & fa tab 1 mg	NP				
ELITE-OB- prenatal vit w/ iron carbonyl-fa tab 50-1.25 mg	NP				
EMBRIVA- prenatal vit w/ fe gluconate-fa tab 13-1 mg	NP				
ENBRACE HR- prenatal vit w/ fe gly cys-fa-omega 3 fatty acids cap	NP				
FOLATEXCEL- prenatal vit w/fe bisglyc chelate-fa tab 20-1mg (1.7mg dfe)	NP				
FOLIVANE-OB- prenatal w/o a w/fe fum-fe poly-fa cap 85-1 mg	NP				
INATAL GT- prenatal vit w/ dss-iron carbonyl-fa tab 90-1 mg	NP				
JENLIVA PRENATAL/POSTNATA- prenatal multivitamins & minerals w/ iron & fa cap 1 mg	NP				
KOSHER PRENATAL PLUS IRON- prenatal vit w/ iron carbonyl-fa tab 30-1 mg	P				
M-NATAL PLUS- prenatal vit w/ fe fumarate-fa tab 27-1 mg	NP				
MATERNACEL- prenatal vit w/fe bisglyc chelate-fa tab 20-1mg (1.7mg dfe)	NP				
MATERVIA- prenatal multivitamins & minerals w/iron & fa cap 0.5 mg	NP				
NATAL PNV- prenatal vit w/ fe gluconate-fa tab 6-0.5 mg	NP				

p = Preferred Generics
np = Non-preferred Generics

P = Preferred Brands
NP = Non-preferred Brands

Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits
NEEVO DHA- prenat w/o a w/fe-fum-methylfol-omegas cap 27-1.13 mg	NP				
NEO-VITAL RX- prenatal multivitamins & minerals w/ iron & fa tab 1 mg	NP				
NEOMATERNA- prenat vit w/fe bisglyc chelate-fa tab 20-1mg (1.7mg dfe)	NP				
NEONATAL COMPLETE- prenatal vit w/ fe fumarate-fa tab 27-1 mg	NP				
NEONATAL PLUS- prenatal vit w/ fe fumarate-fa tab 27-1 mg	NP				
NESTABS- prenatal vit w/o vit a w/ fe bisglycinate-fa tab 32-1 mg	NP				
NESTABS DHA- prenat w/o a w/ fe bisglyc-fa tab 32-1 mg & omega cap pack	NP				
NESTABS ONE- prenat w/o a w/febn-bisg-methylf-dha cap 38-1-225 mg	NP				
NIVA-PLUS- prenatal vit w/ fe fumarate-fa tab 27-1 mg	NP				
OB COMPLETE- prenatal vit w/ iron carbonyl-fa tab 50-1.25 mg	NP				
OB COMPLETE ONE- prenatal w/o a w/febn-fe asp glyc-fa-fish cap 50-1-476 mg	NP				
OB COMPLETE PETITE- prenat w/o a w/febn-feaspglyc-fa-omega cap 35-5-1-200 mg	NP				
OB COMPLETE PREMIER- prenatal vit w/ fe cbn-fe asp glyc-fa tab 30-20-1 mg	NP				
OB COMPLETE/DHA- prenat w/ iron cbn-fe asp glyc-fa-omega cap 30-10-1-200 mg	NP				

Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits
ONE VITE WOMENS PRENATAL- prenatal vit w/ fe fumarate-fa tab 27-1 mg	NP				
PNV PRENATAL PLUS MULTIVI- prenat w/ fe fum-fa tab 27-1 mg & omega 3 cap 312 mg pak	NP				
PNV TABS 20-1- prenat vit w/fe bisglyc chelate-fa tab 20-1mg (1.7mg dfe)	NP				
PNV 27-CA/FE/FA- prenatal vit w/ fe fumarate-fa tab 60-1 mg	NP				
PNV-DHA- prenat w/o a w/ fefum-methfol-fa-dha cap 27-0.6-0.4-300 mg	NP				
PNV-DHA+DOCUSATE- prenatal w/ o vit a w/ fe fum-dss-fa-dha cap 27-1.25-300 mg	NP				
PNV-OMEGA- prenat w/o a w/ fe fumarate-methylfolate-fa-omega 3 cap	NP				
PNV-SELECT- prenatal vit w/ fe fum-methylfolate-fa tab 27-0.6-0.4 mg	NP				
PREGEN DHA- prenatal mv & min w/ fe carbonyl-fa-dha cap 28-1-35 mg	NP				
PREGENNA- prenat vit w/fe bisglyc chelate-fa tab 20-1mg (1.7mg dfe)	NP				
PREMESISRX- prenatal w/ calcium-vit b6-vit b12-fa-ginger tab 1 mg	NP				
PRENA 1 TRUE- prenat w/o a w/fe chel-fa tab 30-1.4 mg & dha cap 300mg pk	NP				
PRENATAL- prenatal vit w/ fe fumarate-fa tab 27-1 mg	NP				
PRENATAL PLUS- prenatal vit w/ fe fumarate-fa tab 27-1 mg	P				

p = Preferred Generics
 np = Non-preferred Generics

P = Preferred Brands
 NP = Non-preferred Brands

Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits	Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits
PRENATAL PLUS VITAMIN AND- prenatal vit w/ fe fumarate-fa tab 27-1 mg	NP					PRENATRIX- prenatal vit w/ fe fumarate-fa tab 27-1 mg	NP				
PRENATAL 19- prenatal vit w/ dss-fe fumarate-fa tab 29-1 mg	P					PRENATRYL- prenatal vit w/ fe fumarate-fa tab 27-1 mg	NP				
PRENATAL 19- prenatal vit w/ fe fumarate-fa chew tab 29-1 mg	P					PRENA1 CHEW- prenatal w/ b2-b6-b12-d3-folic acid chew tab 1.4 mg	NP				
PRENATAL-U- prenatal w/o a vit w/ fe fumarate-fa cap 106.5-1 mg	P					PRENA1 PEARL- prenatal w/oa w/ fefum-na fered-fa-dha cap er 30-1.4-200 mg	NP				
PRENATE- prenatal mv & min w/ l-methylfolate-fa chew tab 0.6-0.4 mg	NP					PROVIDA OB- prenatal w/o a w/fe fum-fe poly-fa cap 20-20-1.25 mg	NP				
PRENATE AM- prenatal w/ calcium-vit b6-vit b12-fa-ginger tab 1 mg	NP					RELNATE DHA- prenatal vit w/ fe fum-fa-omega 3 cap 28-1-200 mg	NP				
PRENATE DHA- prenatal w/o a w/feasp-methfol-fa-dha cap 18-0.6-0.4-300 mg	NP					SE-NATAL 19- prenatal vit w/ dss-fe fumarate-fa tab 29-1 mg	P				
PRENATE ELITE- prenatal w/ fe asp gly-l methylfol-fa tab 20-0.6-0.4 mg	NP					SE-NATAL 19- prenatal vit w/ fe fumarate-fa chew tab 29-1 mg	P				
PRENATE ENHANCE- prenatal w/ o a w/feum-methfol-fa-dha cap 28-0.6-0.4-400 mg	NP					SELECT-OB- prenatal w/ fepolycmplx-methylfol-fa chew tab 29-0.6-0.4 mg	NP				
PRENATE ESSENTIAL- prenatal w/ o a w/feasp-methfol-fa-dha cap 18-0.6-0.4-300 mg	NP					SELECT-OB- prenatal vit w/ fe polysac cmplx-fa chew tab 29-1 mg	NP				
PRENATE MINI- prenatal w/oa w/ fecb-feasp-meth-fa-dha cap 18-0.6-0.4-350 mg	NP					SELECT-OB+DHA- prenatal mv w/ fe poly-fa chw 29-1 mg & dha cap 250 mg pak	NP				
PRENATE PIXIE- prenatal w/o a w/feasp-methfol-fa-dha cap 10-0.6-0.4-200 mg	NP					TARON-C DHA- prenatal w/fe fum-fe poly -fa-omega 3 cap 35-1 mg	NP				
PRENATE RESTORE- prenatal w/ o a w/feum-methfol-fa-dha cap 27-0.6-0.4-400 mg	NP					THRIVITE RX- prenatal vit w/ iron carbonyl-fa tab 29-1 mg	NP				
PRENATOL-M- prenatal vit w/ fe fumarate-fa tab 27-1.2 mg	NP					TRINATAL RX 1- prenatal vit w/ fe fumarate-fa tab 60-1 mg	NP				
						TRINATE- prenatal vit w/ fe fumarate-fa tab 28-1 mg	P				
						TRISTART DHA- prenatal w/o a w/fecbn-methylf-fa-dha cap 31-0.6-0.4-200 mg	NP				

p = Preferred Generics
np = Non-preferred Generics

P = Preferred Brands
NP = Non-preferred Brands

Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits
VINATE DHA RF- prenat w/o a w/fefum-methylfol-omegas cap 27-1.13 mg	NP				
VITAFOL FE+- prenat w/fe poly-methylfol-fa-dha cap 90-0.6-0.4-200 mg	NP				
VITAFOL GUMMIES- prenat vit w/ fe phos-fa-omega chew tab 3.33-0.333-34.8 mg	NP				
VITAFOL ULTRA- prenat w/ fe poly-methylfol-fa-dha cap 29-0.6-0.4-200 mg	NP				
VITAFOL-OB- prenatal vit w/ fe fumarate-fa tab 65-1 mg	NP				
VITAFOL-OB+DHA- prenatal mv w/ fe fum-fa tab 65-1 mg & dha cap 250 mg pack	NP				
VITAFOL-ONE- prenatal mv w/ fe polysac cmplx-fa-dha cap 29-1-200 mg	NP				
VITALARA- prenat vit w/fe bisglyc chelate-fa tab 20-1mg (1.7mg dfe)	NP				
VITATHELY/GINGER- prenatal vit w/ fe fumarate-fa tab 27-1 mg	NP				
VIVA DHA- prenatal vit w/ fe fum-fa-omega 3 cap 28-1-200 mg	NP				
WESCAP-PN DHA- prenat w/o a w/fefum-methfol-fa-dha cap 27-0.6-0.4-300 mg	NP				
WESNATAL DHA COMPLETE- prenat-fe bis-fe prot succ-fa-ca tab & omega 3 cap 200 pk	NP				
WESNATE DHA- prenatal vit w/ fe fum-fa-omega 3 cap 28-1-200 mg	NP				
WESTAB PLUS- prenatal vit w/ fe fumarate-fa tab 27-1 mg	NP				

Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits
WESTGEL DHA- prenat w/o a w/febn-methylf-fa-dha cap 31-0.6-0.4-200 mg	NP				
ZALVIT- prenatal vit w/ fe gluconate-fa tab 13-1 mg	NP				
ZIPHEX- prenatal vit w/ fe gluconate-fa tab 13-1 mg	NP				
MINERALS and ELECTROLYTES					
FLORIVA- sodium fluoride-vitamin d liqd drops 0.25 mg/ml-400 unit/ml	NP				
GALZIN- zinc acetate cap 25 mg (elemental zinc), 50 mg (elemental zinc)	NP				
K-PHOS- potassium phosphate monobasic tab 500 mg	NP				
K-PHOS NEUTRAL- pot phos monobasic w/sod phos di & monobas tab 155-852-130mg	NP				
KLOR-CON 10- potassium chloride tab er 10 meq	P				
KLOR-CON 8- potassium chloride tab er 8 meq (600 mg)	P				
POKONZA- potassium chloride powder packet 10 meq	NP				
pot phos monobasic w/sod phos di & monobas tab 155-852-130mg (K-phos neutral)	p				
potassium chloride cap er 8 meq, 10 meq	p				
POTASSIUM CHLORIDE ER- potassium chloride tab er 15 meq	NP				
potassium chloride microencapsulated crys er tab 10 meq, 20 meq	p				
potassium chloride microencapsulated crys er tab 15 meq	np				

p = Preferred Generics
np = Non-preferred Generics

P = Preferred Brands
NP = Non-preferred Brands

Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits
potassium chloride oral soln 10% (20 meq/15ml), 20% (40 meq/15ml)	P				
potassium chloride powder packet 20 meq	P				
potassium chloride tab er 8 meq (600 mg)	P				
potassium chloride tab er 10 meq (K-tab)	P				
potassium chloride tab er 20 meq (1500 mg) (K-tab)	np				
potassium phosphate monobasic tab 500 mg (K-phos)	P				
SODIUM FLUORIDE- sodium fluoride soln 0.5 mg/ml f (from 1.1 mg/ml naf)	P				
SODIUM FLUORIDE- sodium fluoride tab 0.5 mg f (from 1.1 mg naf), 1 mg f (from 2.2 mg naf)	P				
sodium fluoride chew tab 0.25 mg f (from 0.55 mg naf), 0.5 mg f (from 1.1 mg naf), 1 mg f (from 2.2 mg naf)	P				
NUTRIENTS					
DOJOLVI- triheptanoin oral liquid 100%	NP	•	•		
HEMATOLOGICAL AGENTS					
HEMATOPOIETIC AGENTS					
ACCRUFER- ferric maltol cap 30 mg (fe equiv)	NP		•		•
ALVAIZ- eltrombopag choline tab 9 mg (base equiv), 18 mg (base equiv), 36 mg (base equiv), 54 mg (base equiv)	NP	•	•		•
ARANESP ALBUMIN FREE- darbepoetin alfa soln inj 25 mcg/ml, 40 mcg/ml, 60 mcg/ml, 100 mcg/ml, 200 mcg/ml	P	•	•		

Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits
ARANESP ALBUMIN FREE- darbepoetin alfa soln prefilled syringe 10 mcg/0.4ml, 25 mcg/0.42ml, 40 mcg/0.4ml, 60 mcg/0.3ml, 100 mcg/0.5ml, 150 mcg/0.3ml, 200 mcg/0.4ml, 300 mcg/0.6ml, 500 mcg/ml	P	•	•		
carbonyl iron susp 15 mg/1.25ml (elemental iron)	np				
CERDELGA- eliglustat tartrate cap 84 mg (base equivalent)	P	•	•		•
cyanocobalamin inj 1000 mcg/ml	P				
cyanocobalamin nasal spray 500 mcg/0.1ml (Nascobal)	np				
DOPTELET- avatrombopag maleate tab 20 mg (base equiv)	NP	•	•		•
DOPTELET SPRINKLE- avatrombopag maleate cap sprinkle 10 mg (base equiv)	NP	•	•		•
eltrombopag olamine powder pack for susp 25 mg (base equiv), 12.5 mg (base eq) (Promacta)	np	•	•		•
eltrombopag olamine tab 12.5 mg (base equiv), 25 mg (base equiv), 50 mg (base equiv), 75 mg (base equiv) (Promacta)	np	•	•		•
ENDARI- glutamine (sickle cell) powd pack 5 gm	NP	•	•		
EPOGEN- epoetin alfa inj 2000 unit/ml, 3000 unit/ml, 4000 unit/ml, 10000 unit/ml, 20000 unit/ml	P	•	•		
ferrous sulfate soln 75 mg/ml (15 mg/ml elemental fe), 220 mg/5ml (44 mg/5ml elemental fe), 300 mg/5ml (60 mg/5ml elemental fe)	np				
folic acid cap 0.8 mg	np				

p = Preferred Generics
np = Non-preferred Generics

P = Preferred Brands
NP = Non-preferred Brands

Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits
folic acid tab 400 mcg, 800 mcg	np				
folic acid tab 1 mg	p				
FULPHILA- pegfilgrastim-jmdb soln prefilled syringe 6 mg/0.6ml	P	•	•		
FYLNETRA- pegfilgrastim-pbbk soln prefilled syringe 6 mg/0.6ml	P	•	•		
glutamine (sickle cell) powd pack 5 gm (Endari)	np	•	•		
GRANIX- tbo-filgrastim soln prefilled syringe 300 mcg/0.5ml, 480 mcg/0.8ml	NP	•	•		
GRANIX- tbo-filgrastim subcutaneous inj 300 mcg/ml	NP	•	•		
HYDROXOCOBALAMIN- hydroxocobalamin acetate inj 1000 mcg/ml (base equivalent)	NP				
IRON UP- polysaccharide iron complex liquid 15 mg/0.5ml (fe equiv)	NP				
LEUKINE- sargramostim lyophilized for inj 250 mcg	NP	•	•		
miglustat cap 100 mg (Zavesca)	np	•	•		•
MIRCERA- methoxy peg-epoetin beta soln prefilled syr 30 mcg/0.3ml, 50 mcg/0.3ml, 75 mcg/0.3ml, 100 mcg/0.3ml, 120 mcg/0.3ml, 150 mcg/0.3ml, 200 mcg/0.3ml	NP		•		
MULPLETA- lusutrombopag tab 3 mg	NP	•	•		•
NASCOBAL- cyanocobalamin nasal spray 500 mcg/0.1ml	NP				
NEULASTA- pegfilgrastim soln prefilled syringe 6 mg/0.6ml	NP	•	•		
NEULASTA ONPRO KIT- pegfilgrastim soln prefill syr/infusion dev 6 mg/0.6ml	NP	•	•		

Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits
NEUPOGEN- filgrastim inj 300 mcg/ml, 480 mcg/1.6ml (300 mcg/ml)	NP	•	•		
NEUPOGEN- filgrastim soln prefilled syringe 300 mcg/0.5ml, 480 mcg/0.8ml (600 mcg/ml)	NP	•	•		
NIVESTYM- filgrastim-aafi inj 300 mcg/ml, 480 mcg/1.6ml (300 mcg/ml)	P	•	•		
NIVESTYM- filgrastim-aafi soln prefilled syringe 300 mcg/0.5ml, 480 mcg/0.8ml	P	•	•		
NOVAFERRUM PEDIATRIC DROP- polysaccharide iron complex liquid 15 mg/ml (fe equiv)	NP				
NYPOZI- filgrastim-txid soln prefilled syringe 300 mcg/0.5ml, 480 mcg/0.8ml	NP	•	•		
NYVEPRIA- pegfilgrastim-apgf soln prefilled syringe 6 mg/0.6ml	NP	•	•		
PROCRIT- epoetin alfa inj 2000 unit/ml, 3000 unit/ml, 4000 unit/ml, 10000 unit/ml, 20000 unit/ml, 40000 unit/ml	P	•	•		
PROMACTA- eltrombopag olamine powder pack for susp 25 mg (base equiv), 12.5 mg (base eq)	NP	•	•		•
PROMACTA- eltrombopag olamine tab 12.5 mg (base equiv), 25 mg (base equiv), 50 mg (base equiv), 75 mg (base equiv)	NP	•	•		•
RELEUKO- filgrastim-ayow soln prefilled syringe 300 mcg/0.5ml, 480 mcg/0.8ml	NP	•	•		
RETACRIT- epoetin alfa-epbx inj 2000 unit/ml, 3000 unit/ml, 4000 unit/ml, 10000 unit/ml, 20000 unit/ml, 40000 unit/ml	P	•	•		

p = Preferred Generics
np = Non-preferred Generics

P = Preferred Brands
NP = Non-preferred Brands

Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits	Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits
SIKLOS- hydroxyurea tab 100 mg, 1000 mg	NP	•				ELIQUIS- apixaban tab 2.5 mg, 5 mg	P				•
STIMUFEND- pegfilgrastim-fpgk soln prefilled syringe 6 mg/0.6ml	NP	•	•			ELIQUIS STARTER PACK- apixaban tab starter pack 5 mg	P				•
UDENYCA- pegfilgrastim-cbqv soln auto-injector 6 mg/0.6ml	NP	•	•			enoxaparin sodium inj soln pref syr 30 mg/0.3ml, 40 mg/0.4ml, 60 mg/0.6ml, 80 mg/0.8ml, 100 mg/ml, 120 mg/0.8ml, 150 mg/ml (Lovenox)	p				•
UDENYCA- pegfilgrastim-cbqv soln prefilled syringe 6 mg/0.6ml	NP	•	•			enoxaparin sodium inj 300 mg/3ml (Lovenox)	p				•
UDENYCA ONBODY- pegfilgrastim-cbqv soln prefill syr/infusion dev 6 mg/0.6ml	NP	•	•			fondaparinux sodium subcutaneous inj 2.5 mg/0.5ml, 5 mg/0.4ml, 7.5 mg/0.6ml, 10 mg/0.8ml (Arixtra)	np				•
XOLREMDI- mavorixafor cap 100 mg	NP	•	•		•	FRAGMIN- dalteparin sodium soln prefilled syr 2500 unit/0.2ml, 5000 unit/0.2ml, 7500 unit/0.3ml, 10000 unit/ml, 12500 unit/0.5ml, 15000 unit/0.6ml, 18000 unit/0.72ml	NP				•
XROMI- hydroxyurea oral soln 100 mg/ml	NP	•	•			FRAGMIN- dalteparin sodium subcutaneous soln 10000 unit/4ml, 95000 unit/3.8ml	NP				•
ZARXIO- filgrastim-sndz soln prefilled syringe 300 mcg/0.5ml, 480 mcg/0.8ml	P	•	•			HEPARIN SODIUM- heparin sodium (porcine) pf inj 5000 unit/ml	NP				
ZAVESCA- miglustat cap 100 mg	NP	•	•		•	heparin sodium (porcine) inj 1000 unit/ml, 5000 unit/ml, 10000 unit/ml, 20000 unit/ml	np				
ZIEXTENZO- pegfilgrastim-bmez soln prefilled syringe 6 mg/0.6ml	NP	•	•			heparin sodium (porcine) pf inj 1000 unit/ml, 5000 unit/0.5ml	np				
ANTICOAGULANTS						LOVENOX- enoxaparin sodium inj soln pref syr 30 mg/0.3ml, 40 mg/0.4ml, 60 mg/0.6ml, 80 mg/0.8ml, 100 mg/ml, 120 mg/0.8ml, 150 mg/ml	NP				•
ARIXTRA- fondaparinux sodium subcutaneous inj 2.5 mg/0.5ml, 5 mg/0.4ml, 7.5 mg/0.6ml, 10 mg/0.8ml	NP				•	LOVENOX- enoxaparin sodium inj 300 mg/3ml	NP				•
dabigatran etexilate mesylate cap 75 mg (etexilate base eq), 110 mg (etexilate base eq), 150 mg (etexilate base eq) (Pradaxa)	np				•	PRADAXA- dabigatran etexilate mesylate cap 75 mg (etexilate base	NP				•
ELIQUIS- apixaban cap sprinkle 0.15 mg	P				•						
ELIQUIS- apixaban tab for oral susp pack 3 x 0.5 mg (1.5 mg), 4 x 0.5 mg (2 mg)	P				•						
ELIQUIS- apixaban tab for oral susp 0.5 mg	P				•						

p = Preferred Generics
np = Non-preferred Generics

P = Preferred Brands
NP = Non-preferred Brands

Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits
eq), 110 mg (etexilate base eq), 150 mg (etexilate base eq)					
PRADAXA- dabigatran etexilate mesylate pellet pack 20 mg, 30 mg, 40 mg, 50 mg, 110 mg, 150 mg	NP				•
rivaroxaban for susp 1 mg/ml (Xarelto)	p				•
rivaroxaban tab 2.5 mg (Xarelto)	p				•
SAVAYSA- edoxaban tosylate tab 15 mg (base equivalent), 30 mg (base equivalent), 60 mg (base equivalent)	NP				•
warfarin sodium tab 1 mg, 2 mg, 2.5 mg, 3 mg, 4 mg, 5 mg, 6 mg, 7.5 mg, 10 mg	p				
XARELTO- rivaroxaban for susp 1 mg/ml	P				•
XARELTO- rivaroxaban tab 2.5 mg, 10 mg, 15 mg, 20 mg	P				•
XARELTO STARTER PACK- rivaroxaban tab starter therapy pack 15 mg & 20 mg	P				•
HEMOSTATICS					
aminocaproic acid oral soln 0.25 gm/ml (Amicar)	np				
aminocaproic acid tab 500 mg, 1000 mg (Amicar)	np				
tranexamic acid tab 650 mg (Lysteda)	np				
HEMATOLOGICAL AGENTS - MISC.					
ADVATE- antihemophilic factor recomb (rahf-pfm) for inj 250 unit, 500 unit, 1000 unit, 1500 unit, 2000 unit, 3000 unit, 4000 unit	P	•	•		
ADYNOVATE- antihemophilic factor recomb pegylated for inj 250 unit,	NP	•	•		

Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits
500 unit, 750 unit, 1000 unit, 1500 unit, 2000 unit, 3000 unit					
AFSTYLA- antihemophilic fact rcmb single chain for inj kit 250 unit, 500 unit, 1000 unit, 1500 unit, 2000 unit, 2500 unit, 3000 unit	P	•	•		
AGRYLIN- anagrelide hcl cap 0.5 mg	NP				
ALHEMO- concizumab-mtci soln pen-injector 60mg/1.5ml (40 mg/ml), 150mg/1.5ml (100 mg/ml), 300mg/3ml (100 mg/ml)	NP	•	•		
ALPHANATE- antihemophilic factor/vwf (human) for inj 250 unit, 500 unit, 1000 unit, 1500 unit, 2000 unit	NP	•	•		
ALPHANINE SD- coagulation factor ix for inj 500 unit, 1000 unit, 1500 unit	NP	•	•		
ALPROLIX- coagulation factor ix (recomb) (rfixfc) for inj 250 unit, 500 unit, 1000 unit, 2000 unit, 3000 unit, 4000 unit	NP	•	•		
ALTUVIIIIO- antihemophilic fact rcmb fc-vwf-xten-ehrl for inj 250 unit, 500 unit, 1000 unit, 2000 unit, 3000 unit, 4000 unit	P	•	•		
anagrelide hcl cap 0.5 mg (Agrylin)	p				
anagrelide hcl cap 1 mg	p				
aspirin-dipyridamole cap er 12hr 25-200 mg	np				
BENEFIX- coagulation factor ix (recombinant) for inj kit 250 unit, 500 unit, 1000 unit, 2000 unit, 3000 unit	P	•	•		
BERINERT- c1 esterase inhibitor (human) for iv inj kit 500 unit	NP	•	•		•
BRILINTA- ticagrelor tab 60 mg, 90 mg	NP				

p = Preferred Generics
np = Non-preferred Generics

P = Preferred Brands
NP = Non-preferred Brands

Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits	Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits
CABLIVI- caplacizumab-yhdp for inj kit 11 mg	NP	•			•	HAEGARDA- c1 esterase inhibitor (human) for subcutaneous inj 2000 unit, 3000 unit	P	•	•		•
cilostazol tab 50 mg, 100 mg	p					HEMLIBRA- emicizumab-kxwh subcutaneous soln 12 mg/0.4ml (30 mg/ml)	NP	•	•		
clopidogrel bisulfate tab 75 mg (base equiv) (Plavix)	p					HEMLIBRA- emicizumab-kxwh subcutaneous soln 30 mg/ml, 60 mg/0.4ml (150 mg/ml), 105 mg/0.7ml (150 mg/ml), 150 mg/ml, 300 mg/2ml (150 mg/ml)	NP	•	•		•
COAGADEx- coagulation factor x (human) for inj 250 unit, 500 unit	P	•				HEMOFIL M- antihemophilic factor (human) for inj 250 unit, 500 unit, 1000 unit, 1700 unit	NP	•	•		
CORIFACT- factor xiii concentrate (human) for inj kit 1000-1600 unit	P	•				HUMATE-P- antihemophilic factor/vwf (human) for inj 250-600 unit, 500-1200 unit, 1000-2400 unit	P	•	•		
dipyridamole tab 25 mg, 50 mg, 75 mg	p					HYMPAVZI- marstacimab-hncq subcutaneous soln auto-inj 150 mg/ml	NP	•	•		•
EFFIENT- prasugrel hcl tab 5 mg (base equiv), 10 mg (base equiv)	NP					icatibant acetate subcutaneous soln pref syr 30 mg/3ml (Firazyr)	p	•	•		•
ELOCTATE- antihemophilic factor rcmb (bdd-rfviiiifc) for inj 250 unit, 500 unit, 750 unit, 1000 unit, 1500 unit, 2000 unit, 3000 unit, 4000 unit, 5000 unit, 6000 unit	P	•	•			icatibant acetate subcutaneous soln pref syr 30 mg/3ml (Firazyr)	np	•	•		•
EMPAVELI- pegcetacoplan subcutaneous soln 1080 mg/20ml (54 mg/ml)	P	•	•		•	IDELVION- coagulation factor ix (recomb) (rix-fp) for inj 250 unit, 500 unit, 1000 unit, 2000 unit, 3500 unit	NP	•	•		
ESPEROCT- antihemophilic factor recomb glycopeg-exei for inj 500 unit, 1000 unit, 1500 unit, 2000 unit, 3000 unit, 4000 unit	P	•	•			IXINITY- coagulation factor ix (recombinant) for inj 500 unit, 1000 unit, 1500 unit, 3000 unit	NP	•	•		
FABHALTA- iptacopan hcl cap 200 mg	P	•	•		•	JIVI- antihemophil fact rcmb(bdd-rfviii peg-aucl) for inj 500 unit	P	•	•		
FEIBA- antiinhibitor coagulant complex for iv soln 500 unit, 1000 unit, 2500 unit	P	•				JIVI- antihemophil fact rcmb(bdd-rfviii peg-aucl)for inj 1000 unit, 2000 unit, 3000 unit, 4000 unit	P	•	•		
FIBRYGA- fibrinogen conc (human) inj approximately 1 gm (900-1300 mg)	P	•				KOATE- antihemophilic factor (human) for inj 250 unit, 500 unit, 1000 unit	NP	•	•		
FIBRYGA- fibrinogen concentrate (human) for iv soln 2 gm	P	•									
FIRAZYR- icatibant acetate subcutaneous soln pref syr 30 mg/3ml	NP	•	•		•						

p = Preferred Generics
np = Non-preferred Generics

P = Preferred Brands
NP = Non-preferred Brands

Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits
KOATE-DVI- antihemophilic factor (human) for inj 1000 unit	NP	•	•		
KOGENATE FS- antihemophilic factor recomb (rfviii) for inj kit 250 unit, 500 unit, 1000 unit, 2000 unit, 3000 unit	P	•	•		
KOVALTRY- antihemophilic factor recomb (rahf-pfm) for inj 250 unit, 500 unit, 1000 unit, 2000 unit, 3000 unit	P	•	•		
NOVOEIGHT- antihemophilic fact rcmb (bd trunc-rfviii) for inj 250 unit, 500 unit, 1000 unit, 1500 unit, 2000 unit, 3000 unit	P	•	•		
NOVOSEVEN RT- coagulation factor viia (recomb) for inj 1 mg (1000 mcg), 2 mg (2000 mcg), 5 mg (5000 mcg), 8 mg (8000 mcg)	P	•	•		
NUWIQ- antihemophil fact rcmb (bdd-rfviii,sim) for inj kit 250 unit, 500 unit	NP	•	•		
NUWIQ- antihemophil fact rcmb(bdd-rfviii,sim) for inj kit 1000 unit, 1500 unit, 2000 unit, 2500 unit, 3000 unit, 4000 unit	NP	•	•		
NUWIQ- antihemophilic fact rcmb (bdd-rfviii,sim) for inj 1000 unit, 1500 unit, 2000 unit, 2500 unit, 3000 unit, 4000 unit	NP	•	•		
NUWIQ- antihemophilic factor rcmb (bdd-rfviii,sim) for inj 250 unit, 500 unit	NP	•	•		
OBIZUR- antihemophilic factor (recomb porc) rpfviii for inj 500 unit	P	•			
ORLADEYO- berotralstat hcl cap 110 mg, 150 mg	NP	•	•		•
pentoxifylline tab er 400 mg	p				
PLAVIX- clopidogrel bisulfate tab 75 mg (base equiv)	NP				

Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits
prasugrel hcl tab 5 mg (base equiv), 10 mg (base equiv) (Effient)	p				
PROFILNINE- factor ix complex for inj 500 unit, 1000 unit, 1500 unit	NP	•	•		
PYRUKYND- mitapivat sulfate tab 5 mg, 20 mg, 50 mg	P	•	•		•
PYRUKYND TAPER PACK- mitapivat sulfate tab therapy pack 5 mg, 7 x 20 mg & 7 x 5 mg, 7 x 50 mg & 7 x 20 mg	P	•	•		•
QFITLIA- fitusiran sodium subcutaneous soln auto-inj 50 mg/0.5ml	NP	•	•		•
QFITLIA- fitusiran sodium subcutaneous soln 20 mg/0.2ml	NP	•	•		•
REBINYN- coagulation factor ix recomb glycopegylated for inj 500 unt, 1000 unt, 2000 unt, 3000 unt	NP	•	•		
RECOMBINATE- antihemophilic factor recomb (rfviii) for inj 220-400 unit, 401-800 unit, 801-1240 unit, 1241-1800 unit, 1801-2400 unit	NP	•	•		
RIASTAP- fibrinogen conc (human) inj approximately 1 gm (900-1300 mg)	P	•			
RIXUBIS- coagulation factor ix (recombinant) for inj 250 unit, 500 unit, 1000 unit, 2000 unit, 3000 unit	NP	•	•		
RUCONEST- c1 esterase inhibitor (recombinant) for iv inj 2100 unit	NP	•	•		•
SEVENFACT- coagulation factor viia (recom)-jncw for inj 1 mg (1000 mcg), 2 mg (2000 mcg), 5 mg (5000 mcg)	NP	•	•		
TAKHZYRO- lanadelumab-flyo inj 300 mg/2ml (150 mg/ml)	P	•	•		•

p = Preferred Generics
np = Non-preferred Generics

P = Preferred Brands
NP = Non-preferred Brands

Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits	Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits
TAKHZYRO- lanadelumab-flyo soln pref syringe 150 mg/ml, 300 mg/2ml (150 mg/ml)	P	•	•		•	ZILBRYSQ- zilucoplan sodium subcutaneous soln pref syr 16.6 mg/0.416ml, 23 mg/0.574ml, 32.4 mg/0.81ml	NP	•	•		•
TAVALISSE- fostamatinib disodium tab 100 mg (base equivalent), 150 mg (base equivalent)	NP	•	•		•	ZONTIVITY- vorapaxar sulfate tab 2.08 mg (base equivalent)	NP				
TAVNEOS- avacopan cap 10 mg	NP	•	•		•	TOPICAL PRODUCTS					
ticagrelor tab 60 mg, 90 mg (Brilinta)	p					OPHTHALMIC AGENTS					
TRETTEN- coagulation factor xiii a-subunit for inj 2500 unit	P	•				ACULAR- ketorolac tromethamine ophth soln 0.5%	NP				
VONVENDI- von willebrand factor (recombinant) for inj 650 unit, 1300 unit	P	•	•			ACULAR LS- ketorolac tromethamine ophth soln 0.4%	NP				
VOYDEYA- danicopan tab therapy pack 50 mg & 100 mg	NP	•	•		•	ACUVAIL- ketorolac tromethamine (pf) ophth soln 0.45%	NP				
VOYDEYA- danicopan tab 100 mg	NP	•	•		•	ALOCRIAL- nedocromil sodium ophth soln 2%	NP				
WILATE- antihemophilic factor/vwf (human) for inj 500-500 unit kit	NP	•	•			ALPHAGAN P- brimonidine tartrate ophth soln 0.1%	NP				
WILATE- antihemophilic factor/vwf (human) for inj 1000-1000 unit kit	NP	•	•			ALPHAGAN P- brimonidine tartrate ophth soln 0.15%	NP	•			
XYNTHA- antihemophil fact rcmb (bdd-rfviii,mor) for inj kit 250 unit, 500 unit	NP	•	•			ALREX- loteprednol etabonate ophth susp 0.2%	NP				
XYNTHA- antihemophil fact rcmb(bdd-rfviii,mor) for inj kit 1000 unit, 2000 unit	NP	•	•			APRACLONIDINE- apraclonidine hcl ophth soln 0.5% (base equivalent)	NP				
XYNTHA SOLOFUSE- antihemophil fact rcmb (bdd-rfviii,mor) for inj kit 250 unit, 500 unit	NP	•	•			ATROPINE SULFATE- atropine sulfate ophth soln 1%	NP				
XYNTHA SOLOFUSE- antihemophil fact rcmb(bdd-rfviii,mor) for inj kit 1000 unit, 2000 unit, 3000 unit	NP	•	•			atropine sulfate ophth soln 1% (Atropine sulfate)	p				
YOSPRALA- aspirin-omeprazole tab delayed release 81-40 mg, 325-40 mg	NP		•		•	AZASITE- azithromycin ophth soln 1%	NP				
						azelastine hcl ophth soln 0.05%	p				
						AZOPT- brinzolamide ophth susp 1%	NP	•			
						BACITRACIN- bacitracin ophth oint 500 unit/gm	P				
						bacitracin-polymyxin b ophth oint	p				

p = Preferred Generics
np = Non-preferred Generics

P = Preferred Brands
NP = Non-preferred Brands

Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits
bacitracin-polymyxin-neomycin-hc ophth oint 1%	p				
bepotastine besilate ophth soln 1.5% (Bepreve)	np				
BEPREVE- bepotastine besilate ophth soln 1.5%	NP				
BESIVANCE- besifloxacin hcl ophth susp 0.6% (base equiv)	NP				
BETAXOLOL HCL- betaxolol hcl ophth soln 0.5%	NP				
BETIMOL- timolol ophth soln 0.5%	NP				
BETOPTIC-S- betaxolol hcl ophth susp 0.25%	NP				
bimatoprost ophth soln 0.03%	np				•
brimonidine tartrate ophth soln 0.1% (Alphagan p)	p				
brimonidine tartrate ophth soln 0.15% (Alphagan p)	p		•		
brimonidine tartrate ophth soln 0.2%	p				
brimonidine tartrate-timolol maleate ophth soln 0.2-0.5% (Combigan)	np		•		
brinzolamide ophth susp 1% (Azopt)	np		•		
bromfenac sodium ophth soln 0.07% (base equivalent) (Prolensa)	np				
bromfenac sodium ophth soln 0.075% (base equivalent) (Bromsite)	np				
bromfenac sodium ophth soln 0.09% (base equiv) (once-daily)	np		•		
BROMSITE- bromfenac sodium ophth soln 0.075% (base equivalent)	NP				
CARTEOLOL HCL- carteolol hcl ophth soln 1%	P				

Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits
CEQUA- cyclosporine (ophth) soln 0.09% (pf)	NP		•		•
CILOXAN- ciprofloxacin hcl ophth oint 0.3%	P				
ciprofloxacin hcl ophth soln 0.3% (base equivalent)	p				
CLOBETASOL PROPIONATE- clobetasol propionate ophth susp 0.05%	NP				
COMBIGAN- brimonidine tartrate-timolol maleate ophth soln 0.2-0.5%	NP		•		
COSOPT- dorzolamide hcl-timolol maleate ophth soln 2-0.5%	NP				
COSOPT PF- dorzolamide hcl-timolol maleate pf ophth soln 2-0.5%	NP				
CROMOLYN SODIUM- cromolyn sodium ophth soln 4%	P				
CYCLOGYL- cyclopentolate hcl ophth soln 0.5%, 1%, 2%	NP				
CYCLOMYDRIL- cyclopentolate w/ phenylephrine ophth soln 0.2-1%	NP				
cyclopentolate hcl ophth soln 1% (Cyclogyl)	p				
CYSTADROPS- cysteamine hcl ophth soln 0.37% (base equivalent)	NP		•		
CYSTARAN- cysteamine hcl ophth soln 0.44% (base equivalent)	NP		•		
DEXAMETHASONE SODIUM PHOS- dexamethasone sodium phosphate ophth soln 0.1%	P				
diclofenac sodium ophth soln 0.1%	p				
difluprednate ophth emulsion 0.05% (Durezol)	np				
dorzolamide hcl ophth soln 2% (Trusopt)	p				

p = Preferred Generics
np = Non-preferred Generics

P = Preferred Brands
NP = Non-preferred Brands

Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits
dorzolamide hcl-timolol maleate ophth soln 2-0.5% (Cosopt)	p				
dorzolamide hcl-timolol maleate pf ophth soln 2-0.5% (Cosopt pf)	np				
DUREZOL- difluprednate ophth emulsion 0.05%	NP				
epinastine hcl ophth soln 0.05%	np				
erythromycin ophth oint 5 mg/gm	p				
EYSUVIS- loteprednol etabonate ophth susp 0.25%	NP		•		•
FLAREX- fluorometholone acetate ophth susp 0.1%	NP				
fluorometholone ophth susp 0.1% (Fml liquifilm)	p				
FLURBIPROFEN SODIUM- flurbiprofen sodium ophth soln 0.03%	P				
FML FORTE- fluorometholone ophth susp 0.25%	NP				
FML LIQUIFILM- fluorometholone ophth susp 0.1%	NP				
gatifloxacin ophth soln 0.5% (Zymaxid)	np				
gentamicin sulfate ophth soln 0.3%	p				
ILEVRO- nepafenac ophth susp 0.3%	NP				
INVELTYS- loteprednol etabonate ophth susp 1%	NP				
IOPIDINE- apraclonidine hcl ophth soln 1% (base equivalent)	NP				
ISTALOL- timolol maleate ophth soln 0.5% (once-daily)	NP				
IYUZEH- latanoprost (pf) ophth soln 0.005%	NP				•
ketorolac tromethamine ophth soln 0.4% (Acular Is)	p				

Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits
ketorolac tromethamine ophth soln 0.5% (Acular)	p				
latanoprost ophth soln 0.005% (Xalatan)	p				•
LEVOBUNOLOL HCL- levobunolol hcl ophth soln 0.5%	P				
LEVOFLOXACIN- levofloxacin ophth soln 0.5%, 1.5%	NP				
LOTEMAX- loteprednol etabonate ophth gel 0.5%	NP				
LOTEMAX- loteprednol etabonate ophth oint 0.5%	P				
LOTEMAX- loteprednol etabonate ophth susp 0.5%	NP				
LOTEMAX SM- loteprednol etabonate ophth gel 0.38%	P				
loteprednol etabonate ophth gel 0.5% (Lotemax)	p				
loteprednol etabonate ophth susp 0.2% (Alrex)	np				
loteprednol etabonate ophth susp 0.5% (Lotemax)	p				
LUMIGAN- bimatoprost ophth soln 0.01%	P				•
MAXIDEX- dexamethasone ophth susp 0.1%	NP				
MAXITROL- neomycin-polymyxin-dexamethasone ophth oint 0.1%	NP				
MAXITROL- neomycin-polymyxin-dexamethasone ophth susp 0.1%	NP				
MIEBO- perfluorohexyloctane ophth soln 1.338 gm/ml	NP		•		•
moxifloxacin hcl ophth soln 0.5% (base equiv) (Vigamox)	p				

p = Preferred Generics
np = Non-preferred Generics

P = Preferred Brands
NP = Non-preferred Brands

Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits
MOXIFLOXACIN HYDROCHLORID- moxifloxacin hcl ophth soln 0.5% (base eq) (2 times daily)	NP				
NATACYN- natamycin ophth susp 5%	P				
neomycin-bacitrac zn-polymyx 5(3.5)mg-400unt-10000unt op oin	p				
neomycin-polymyxin- dexamethasone ophth oint 0.1% (Maxitrol)	p				
neomycin-polymyxin- dexamethasone ophth susp 0.1% (Maxitrol)	p				
NEOMYCIN/POLYMYXIN/GRAMIC- neomycin-polymy-gramicid op sol 1.75-10000-0.025mg-unt-mg/ml	P				
NEOMYCIN/POLYMYXIN/HYDROC- neomycin-polymyxin-hc ophth susp	NP				
NEVANAC- nepafenac ophth susp 0.1%	NP				
OCUFLOX- ofloxacin ophth soln 0.3%	NP				
ofloxacin ophth soln 0.3% (Ocuflox)	p				
olopatadine hcl ophth soln 0.2% (base equivalent)	np				
OXERVATE- cenegermin-bkbj ophth soln 0.002% (20 mcg/ml)	NP	•	•		•
pilocarpine hcl ophth soln 1%, 2%, 4%	p				
pilocarpine hcl ophth soln 1.25% (Vuity)	np				•
polymyxin b-trimethoprim ophth soln 10000 unit/ml-0.1% (Polytrim)	p				
PRED FORTE- prednisolone acetate ophth susp 1%	NP				
PRED MILD- prednisolone acetate ophth susp 0.12%	NP				

Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits
prednisolone acetate ophth susp 1% (Pred forte)	p				
PREDNISOLONE SODIUM PHOSP- prednisolone sodium phosphate ophth soln 1%	NP				
PROLENSA- bromfenac sodium ophth soln 0.07% (base equivalent)	NP				
QLOSI- pilocarpine hcl ophth soln 0.4%	NP				•
RESTASIS- cyclosporine (ophth) emulsion 0.05%	p		•		•
RESTASIS MULTIDOSE- cyclosporine (ophth) emulsion 0.05%	NP		•		•
RHOPRESSA- netarsudil dimesylate ophth soln 0.02%	NP				•
ROCKLATAN- netarsudil dimesylate- latanoprost ophth soln 0.02-0.005%	NP				•
SIMBRINZA- brinzolamide- brimonidine tartrate ophth susp 1-0.2%	P				
SULFACETAMIDE SODIUM- sulfacetamide sodium ophth oint 10%	NP				
SULFACETAMIDE SODIUM- sulfacetamide sodium ophth soln 10%	P				
SULFACETAMIDE SODIUM/PRED- sulfacetamide sodium-prednisolone ophth soln 10-0.23(0.25)%	P				
tafluprost preservative free (pf) ophth soln 0.0015% (Zioptan)	np				•
timolol maleate ophth gel forming soln 0.25% (Timoptic-xe)	np				
timolol maleate ophth gel forming soln 0.5% (Timoptic-xe)	np		•		
timolol maleate ophth soln 0.25%, 0.5% (Timoptic)	p				

p = Preferred Generics
np = Non-preferred Generics

P = Preferred Brands
NP = Non-preferred Brands

Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits
timolol maleate ophth soln 0.5% (once-daily) (Istalol)	np				
timolol maleate preservative free ophth soln 0.25% (Timoptic ocudose)	np				
timolol maleate preservative free ophth soln 0.5% (Timoptic ocudose)	np		•		
timolol ophth soln 0.5% (Betimol)	np				
TIMOPTIC OCUDOSE- timolol maleate preservative free ophth soln 0.25%	NP				
TIMOPTIC OCUDOSE- timolol maleate preservative free ophth soln 0.5%	NP		•		
TOBRADEX- tobramycin-dexamethasone ophth oint 0.3-0.1%	NP				
TOBRADEX ST- tobramycin-dexamethasone ophth susp 0.3-0.05%	NP				
tobramycin ophth soln 0.3%	p				
tobramycin-dexamethasone ophth susp 0.3-0.1% (Tobradex)	p				
TOBEX- tobramycin ophth oint 0.3%	NP				
TRAVATAN Z- travoprost ophth soln 0.004% (benzalkonium free) (bak free)	NP				•
travoprost ophth soln 0.004% (benzalkonium free) (bak free) (Travatan z)	np				•
TRIFLURIDINE- trifluridine ophth soln 1%	P				
TYRVAYA- varenicline tartrate nasal soln 0.03 mg/act	NP		•		•
UPNEEQ- oxymetazoline hcl ophth soln 0.1%	NP				

Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits
VERKAZIA- cyclosporine (ophth) emulsion 0.1%	NP		•		•
VEVYE- cyclosporine (ophth) soln 0.1%	NP		•		•
VIGAMOX- moxifloxacin hcl ophth soln 0.5% (base equiv)	NP				
VUITY- pilocarpine hcl ophth soln 1.25%	NP				•
VYZULTA- latanoprostene bunod ophth soln 0.024%	NP				•
XALATAN- latanoprost ophth soln 0.005%	NP				•
XDEMVY- lotilaner ophth soln 0.25%	NP		•		•
XELPROS- latanoprost ophth emulsion 0.005%	NP				•
XIIDRA- lifitegrast ophth soln 5%	NP		•		•
ZERVIATE- cetirizine hcl ophth soln 0.24% (base equiv)	NP				
ZIOPTAN- tafluprost preservative free (pf) ophth soln 0.0015%	NP				•
ZIRGAN- ganciclovir ophth gel 0.15%	NP				
ZYLET- loteprednol etabonate-tobramycin ophth susp 0.5-0.3%	P				
OTIC AGENTS					
acetic acid otic soln 2%	p				
CETRAXAL- ciprofloxacin hcl otic soln 0.2% (base equivalent)	NP				
CIPRO HC- ciprofloxacin-hydrocortisone otic susp 0.2-1%	P				
ciprofloxacin hcl otic soln 0.2% (base equivalent) (Cetraxal)	np				
ciprofloxacin-dexamethasone otic susp 0.3-0.1% (Ciprodex)	p				

p = Preferred Generics
np = Non-preferred Generics

P = Preferred Brands
NP = Non-preferred Brands

Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits	Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits
CIPROFLOXACIN/FLUOCINOLON- ciprofloxacin-fluocinolone acetone (pf) otic soln 0.3-0.025%	NP					FRAICHE 5000 PREVI- sodium fluoride-tribasic calcium phosphate gel 1.1-3%	NP				
CORTISPORIN-TC- neomycin- colistin-hc-thonzonium otic susp 3.3-3-10-0.5 mg/ml	NP					lidocaine hcl viscous soln 2%	p				
DERMOTIC- fluocinolone acetonide (otic) oil 0.01%	NP					NYSTATIN- nystatin susp 100000 unit/ ml	NP				
fluocinolone acetonide (otic) oil 0.01% (Dermotic)	np					nystatin susp 100000 unit/ml	p				
hydrocortisone w/ acetic acid otic soln 1-2%	p					ORAVIG- miconazole buccal tab 50 mg (mouth-throat)	NP				
neomycin-polymyxin-hc otic soln 1%	p					PERIDEX- chlorhexidine gluconate soln 0.12%	NP				
neomycin-polymyxin-hc otic susp 3.5 mg/ml-10000 unit/ml-1%	p					pilocarpine hcl tab 5 mg, 7.5 mg (Salagen)	p				
ofloxacin otic soln 0.3%	p					PREVIDENT FLUORIDE- sodium fluoride gel 1.1% (0.5% f)	NP				
OTOVEL- ciprofloxacin-fluocinolone acetone (pf) otic soln 0.3-0.025%	NP					PREVIDENT RINSE- sodium fluoride rinse 0.2%	NP				
MOUTH/THROAT/DENTAL AGENTS						PREVIDENT 5000 BOOSTER PL- sodium fluoride paste 1.1%	NP				
cevimeline hcl cap 30 mg (Evoxac)	p					PREVIDENT 5000 DRY MOUTH- sodium fluoride gel 1.1% (0.5% f)	NP				
chlorhexidine gluconate soln 0.12% (Peridex)	p					PREVIDENT 5000 ENAMEL PRO- sodium fluoride-potassium nitrate gel 1.1-5%	NP				
clotrimazole troche 10 mg	p					PREVIDENT 5000 KIDS- sodium fluoride paste 1.1%	NP				
DENTA 5000 PLUS SENSITIVE- sodium fluoride-potassium nitrate gel 1.1-5%	NP					PREVIDENT 5000 ORTHO DEFE- sodium fluoride paste 1.1%	NP				
EVOXAC- cevimeline hcl cap 30 mg	NP					PREVIDENT 5000 PLUS- sodium fluoride cream 1.1%	NP				
FLUORIDEX SENSITIVITY REL- sodium fluoride-potassium nitrate gel 1.1-5%	NP					PREVIDENT 5000 SENSITIVE- sodium fluoride-potassium nitrate gel 1.1-5%	NP				
FLUORIMAX 5000 SENSITIVE- sodium fluoride-potassium nitrate gel 1.1-5%	NP					SALAGEN- pilocarpine hcl tab 5 mg, 7.5 mg	NP				

p = Preferred Generics
np = Non-preferred Generics

P = Preferred Brands
NP = Non-preferred Brands

Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits	Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits
sodium fluoride cream 1.1% (Prevident 5000 plus)	p					hydrocortisone acetate suppos 25 mg	p				
sodium fluoride gel 1.1% (0.5% f) (Prevident fluoride)	p					HYDROCORTISONE ACETATE/ PR- hydrocortisone acetate w/ pramoxine perianal cream 1-1%	NP				
sodium fluoride paste 1.1% (Prevident 5000 boost)	np					hydrocortisone enema 100 mg/60ml (Cortenema)	p				
sodium fluoride rinse 0.2% (Prevident rinse)	np					hydrocortisone perianal cream 2.5% (Anusol-hc)	p				
SODIUM FLUORIDE 5000 PPM- sodium fluoride-potassium nitrate gel 1.1-5%	P					nitroglycerin oint 0.4% (Rectiv)	np				
SODIUM FLUORIDE/POTASSIUM- sodium fluoride-potassium nitrate gel 1.1-5%	P					PROCTOCORT- hydrocortisone perianal cream 1%	NP				
stannous fluoride conc 0.63%	np					PROCTOFOAM HC- hydrocortisone acetate w/ pramoxine perianal foam 1-1%	NP				
stannous fluoride gel 0.4%	np					RECTIV- nitroglycerin oint 0.4%	NP				
triamcinolone acetonide dental paste 0.1%	p					UCERIS- budesonide rectal foam 2 mg/act	NP				
ANORECTAL AGENTS						DERMATOLOGICALS					
ANALPRAM HC- hydrocortisone acetate w/ pramoxine perianal cream 1-1%	NP					ABSORICA- isotretinoin cap 10 mg, 20 mg, 25 mg, 30 mg, 35 mg, 40 mg	NP				
ANALPRAM HC- hydrocortisone acetate w/ pramoxine perianal lotn 2.5-1%	NP					ABSORICA LD- isotretinoin micronized cap 8 mg, 16 mg, 24 mg, 32 mg	NP				
ANUSOL-HC- hydrocortisone perianal cream 2.5%	NP					ACANYA- clindamycin phosphate- benzoyl peroxide gel 1.2-2.5%	NP			•	
budesonide rectal foam 2 mg/act (Uceris)	np					acitretin cap 10 mg, 17.5 mg, 25 mg	p				
CORTENEMA- hydrocortisone enema 100 mg/60ml	NP					acyclovir cream 5% (Zovirax)	np				
CORTIFOAM- hydrocortisone acetate perianal foam 10% (90 mg/dose)	P					acyclovir oint 5% (Zovirax)	p				
HYDROCORTISONE- hydrocortisone perianal cream 1%	NP					ACZONE- dapsone gel 5%, 7.5%	NP			•	
						ADAPALENE- adapalene pads 0.1%	NP			•	
						ADAPALENE- adapalene soln 0.1%	NP			•	
						adapalene cream 0.1% (Differin)	p				
						adapalene gel 0.1%	p				
						adapalene gel 0.3% (Differin)	p				

p = Preferred Generics
np = Non-preferred Generics

P = Preferred Brands
NP = Non-preferred Brands

Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits
adapalene-benzoyl peroxide gel 0.1-2.5% (Epiduo)	p				
adapalene-benzoyl peroxide gel 0.3-2.5% (Epiduo forte)	np				
ADBRY- tralokinumab-ldrm subcutaneous soln auto-injector 300 mg/2ml	P	•	•		•
ADBRY- tralokinumab-ldrm subcutaneous soln prefilled syr 150 mg/ml	P	•	•		•
AKLIEF- trifarotene cream 0.005%	NP			•	
ALA-SCALP- hydrocortisone lotion 2%	NP				•
ALCLOMETASONE DIPROPIONAT- alclometasone dipropionate oint 0.05%	P				•
alclometasone dipropionate cream 0.05%	p				•
ALTRENO- tretinoin lotion 0.05%	NP			•	
AMCINONIDE- amcinonide cream 0.1%	NP				•
AMCINONIDE- amcinonide oint 0.1%	NP				•
AMZEEQ- minocycline hcl micronized foam 4%	NP			•	
ARAZLO- tazarotene (acne) lotion 0.045%	NP			•	
ATRALIN- tretinoin gel 0.05%	NP			•	
azelaic acid gel 15% (Finacea)	p				
AZELEX- azelaic acid cream 20%	NP			•	
BENZAMYCIN- benzoyl peroxide-erythromycin gel 5-3%	NP			•	
benzoyl peroxide-erythromycin gel 5-3% (Benzamycin)	np				
BETAMETHASONE DIPROPIONAT- betamethasone dipropionate augmented gel 0.05%	P				•

Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits
betamethasone dipropionate augmented cream 0.05%	p				•
betamethasone dipropionate augmented lotion 0.05%	p				•
betamethasone dipropionate augmented oint 0.05% (Diprolene)	p				•
betamethasone dipropionate cream 0.05%	p				•
betamethasone dipropionate lotion 0.05%	p				•
betamethasone dipropionate oint 0.05%	p				•
BETAMETHASONE VALERATE- betamethasone valerate lotion 0.1% (base equivalent)	P				•
betamethasone valerate aerosol foam 0.12% (Luxiq)	np				•
betamethasone valerate cream 0.1% (base equivalent)	p				•
betamethasone valerate oint 0.1% (base equivalent)	p				•
bexarotene gel 1% (Targretin)	np	•	•		
BIMZELX- bimekizumab-bkzx subcutaneous soln auto-injector 160 mg/ml, 320 mg/2ml	NP	•	•		•
BIMZELX- bimekizumab-bkzx subcutaneous soln prefilled syr 160 mg/ml, 320 mg/2ml	NP	•	•		•
brimonidine tartrate gel 0.33% (base equivalent) (Mirvaso)	np				
BRYHALI- halobetasol propionate lotion 0.01%	NP				•
CABTREO- adapalene-benzoyl peroxide-clindamycin gel 0.15-3.1-1.2%	NP			•	

p = Preferred Generics
np = Non-preferred Generics

P = Preferred Brands
NP = Non-preferred Brands

Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits	Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits
CALCIPOTRIENE- calcipotriene foam 0.005%	NP					clindamycin phosphate gel 1% (twice-daily)	p				
CALCIPOTRIENE- calcipotriene soln 0.005% (50 mcg/ml)	P					clindamycin phosphate lotion 1% (Cleocin-t)	p				
calcipotriene cream 0.005% (Dovonex)	p					clindamycin phosphate soln 1%	p				
calcipotriene oint 0.005%	np					clindamycin phosphate swab 1%	p				
calcipotriene-betamethasone dipropionate oint 0.005-0.064% (Taclonex)	np					clindamycin phosphate-benzoyl peroxide gel 1-5%	np				
calcipotriene-betamethasone dipropionate susp 0.005-0.064% (Taclonex)	np					clindamycin phosphate-benzoyl peroxide gel 1.2-2.5% (Acanya)	np				
CALCITRIOL- calcitriol oint 3 mcg/gm	NP					clindamycin phosphate-benzoyl peroxide gel 1.2-3.75% (Onexton)	np				
CIBINQO- abrocitinib tab 50 mg, 100 mg, 200 mg	P	•	•		•	clindamycin phosphate-tretinoin gel 1.2-0.025% (Ziana)	np				
ciclopirox gel 0.77%	p					CLOBETASOL PROPIONATE- clobetasol propionate cream 0.025%	NP				•
ciclopirox olamine cream 0.77% (base equiv) (Loprox)	p					clobetasol propionate cream 0.05%	p				•
ciclopirox olamine susp 0.77% (base equiv)	p					clobetasol propionate emollient base cream 0.05%	p				•
ciclopirox shampoo 1% (Loprox shampoo)	p					clobetasol propionate emulsion foam 0.05% (Olux-e)	np				•
ciclopirox solution 8% (Penlac Nail Lacquer)	p					clobetasol propionate foam 0.05% (Olux)	p				•
CLEOCIN-T- clindamycin phosphate lotion 1%	NP			•		clobetasol propionate gel 0.05%	p				•
CLINDAGEL- clindamycin phosphate gel 1% (once-daily)	NP			•		clobetasol propionate lotion 0.05% (Clobex)	np				•
clindamycin phosph-benzoyl peroxide (refrig) gel 1.2 (1)-5%	p					clobetasol propionate oint 0.05%	p				•
clindamycin phosphate foam 1% (Evoclin)	np					clobetasol propionate shampoo 0.05% (Clobex)	np				•
clindamycin phosphate gel 1% (once-daily) (Clindagel)	np					clobetasol propionate soln 0.05%	p				•
						clindamycin phosphate spray 0.05% (Clobex)	np				•
						CLOBEX- clobetasol propionate lotion 0.05%	NP				•

p = Preferred Generics
np = Non-preferred Generics

P = Preferred Brands
NP = Non-preferred Brands

Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits	Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits
CLOBEX- clobetasol propionate shampoo 0.05%	NP				•	DERMA-SMOOTH/FS BODY- fluocinolone acetonide oil 0.01% (body oil)	NP				•
CLOBEX- clobetasol propionate spray 0.05%	NP				•	DERMA-SMOOTH/FS SCALP- fluocinolone acetonide oil 0.01% (scalp oil)	NP				•
clo cortolone pivalate cream 0.1% (Cloderm)	np				•	DESONIDE- desonide gel 0.05%	NP				•
CLODERM- clo cortolone pivalate cream 0.1%	NP				•	desonide cream 0.05% (Desowen)	p				•
clotrimazole cream 1%	np					desonide lotion 0.05%	np				•
clotrimazole soln 1%	np					desonide oint 0.05%	p				•
clotrimazole w/ betamethasone cream 1-0.05%	np					DESOXIMETASONE- desoximetasone gel 0.05%	NP				•
CLOTRIMAZOLE/BETAMETHASON- clotrimazole w/ betamethasone lotion 1-0.05%	NP					desoximetasone cream 0.05% (Topicort)	np				•
CONDYLOX- podofilox gel 0.5%	NP		•			desoximetasone cream 0.25% (Topicort)	p				•
CORDRAN- flurandrenolide tape 4 mcg/sqcm	NP				•	desoximetasone oint 0.05% (Topicort)	np				•
COSENTYX- secukinumab subcutaneous pref syr 150 mg/ml (300 mg dose)	P	•	•		•	desoximetasone oint 0.25% (Topicort)	p				•
COSENTYX- secukinumab subcutaneous soln prefilled syringe 75 mg/0.5ml, 150 mg/ml	P	•	•		•	desoximetasone spray 0.25% (Topicort)	np				•
COSENTYX SENSOREADY PEN- secukinumab subcutaneous auto-inj 150 mg/ml (300 mg dose)	P	•	•		•	DICLOFENAC EPOLAMINE- diclofenac epolamine patch 1.3%	NP				•
COSENTYX SENSOREADY PEN- secukinumab subcutaneous soln auto-injector 150 mg/ml	P	•	•		•	diclofenac sodium (actinic keratoses) gel 3%	p		•		•
COSENTYX UNOREADY- secukinumab subcutaneous soln auto-injector 300 mg/2ml	P	•	•		•	diclofenac sodium gel 1% (1.16% diethylamine equiv)	np				•
CROTAN- crotamiton lotion 10%	NP		•			diclofenac sodium soln 1.5%	np				•
dapsone gel 5%, 7.5% (Aczone)	np					diclofenac sodium soln 2% (Pennsaid)	np				•
DENAVIR- penciclovir cream 1%	NP					DIFFERIN- adapalene cream 0.1%	NP				•
						DIFFERIN- adapalene lotion 0.1%	P				•
						DIFFERIN PUMP- adapalene gel 0.3%	NP				•

p = Preferred Generics
np = Non-preferred Generics

P = Preferred Brands
NP = Non-preferred Brands

Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits	Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits
DIFLORASONE DIACETATE- diflorasone diacetate cream 0.05%	NP				•	EPSOLAY- benzoyl peroxide cream 5%	NP			•	
diflorasone diacetate oint 0.05%	np				•	ERTACZO- sertaconazole nitrate cream 2%	NP				
DIPROLENE- betamethasone dipropionate augmented oint 0.05%	NP				•	ERY- erythromycin pads 2%	P			•	
doxepin hcl cream 5% (Prudoxin)	np		•		•	ERYTHROMYCIN- erythromycin gel 2%	P			•	
doxycycline (rosacea) cap delayed release 40 mg (Oracea)	np		•			erythromycin soln 2%	p				
DUOBRII- halobetasol propionate-tazarotene lotion 0.01-0.045%	NP					EUCRISA- crisaborole oint 2%	NP			•	
DUPIXENT- dupilumab subcutaneous soln auto-injector 200 mg/1.14ml, 300 mg/2ml	P	•	•		•	EXELDERM- sulconazole nitrate cream 1%	NP				
DUPIXENT- dupilumab subcutaneous soln prefilled syringe 200 mg/1.14ml, 300 mg/2ml	P	•	•		•	EXELDERM- sulconazole nitrate solution 1%	NP				
EBGLYSS- lebrikizumab-lbkz solution prefilled syringe 250 mg/2ml	P	•	•		•	FABIOR- tazarotene (acne) foam 0.1%	NP			•	
EBGLYSS- lebrikizumab-lbkz subcutaneous soln auto-inject 250 mg/2ml	P	•	•		•	FILSUVEZ- birch triterpenes gel 10%	NP	•	•		
ECONAZOLE NITRATE- econazole nitrate foam 1%	NP					FINACEA- azelaic acid foam 15%	NP			•	
econazole nitrate cream 1%	p					FLECTOR- diclofenac epolamine patch 1.3%	NP				•
ECOZA- econazole nitrate foam 1%	NP					fluocinolone acetonide cream 0.01%	p				•
ELIDEL- pimecrolimus cream 1%	NP			•		fluocinolone acetonide cream 0.025% (Synalar)	np				•
ELIMITE- permethrin cream 5%	NP					fluocinolone acetonide oil 0.01% (body oil) (Derma-smoothe/fs bod)	p				•
EMROSI- minocycline hcl micronized (rosacea) capsule er 24hr 40 mg	NP		•			fluocinolone acetonide oil 0.01% (scalp oil) (Derma-smoothe/fs sca)	p				•
ENSTILAR- calcipotriene- betamethasone dipropionate foam 0.005-0.064%	P					fluocinolone acetonide oint 0.025% (Synalar)	p				•
EPIDUO- adapalene-benzoyl peroxide gel 0.1-2.5%	NP			•		fluocinolone acetonide soln 0.01% (Synalar)	p				•
EPIDUO FORTE- adapalene-benzoyl peroxide gel 0.3-2.5%	NP			•		fluocinonide cream 0.05%	p				•
						fluocinonide cream 0.1% (Vanos)	p				•

p = Preferred Generics
np = Non-preferred Generics

P = Preferred Brands
NP = Non-preferred Brands

Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits
fluocinonide emulsified base cream 0.05%	p				•
fluocinonide gel 0.05%	p				•
fluocinonide oint 0.05%	p				•
fluocinonide soln 0.05%	p				•
FLUOROURACIL- fluorouracil cream 0.5%	NP		•		•
FLUOROURACIL- fluorouracil soln 2%	P				•
fluorouracil cream 5% (Efudex)	p		•		•
fluorouracil soln 5%	p				•
FLURANDRENOLIDE- flurandrenolide lotion 0.05%	NP				•
FLUTICASONE PROPIONATE- fluticasone propionate lotion 0.05%	NP				•
fluticasone propionate cream 0.05%	p				•
fluticasone propionate oint 0.005%	p				•
gentamicin sulfate cream 0.1%	p				•
gentamicin sulfate oint 0.1%	p				•
HALCINONIDE- halcinonide soln 0.1%	NP				•
halcinonide cream 0.1% (Halog)	np				•
halobetasol propionate cream 0.05%	p				•
halobetasol propionate foam 0.05% (Lexette)	np				•
halobetasol propionate oint 0.05%	np				•
HALOG- halcinonide cream 0.1%	NP				•
HYDROCORTISONE- hydrocortisone lotion 2%	NP				•
HYDROCORTISONE- hydrocortisone lotion 2.5%	P				•
HYDROCORTISONE- hydrocortisone soln 2.5%	NP				•

Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits
HYDROCORTISONE ACETATE- hydrocortisone acetate cream 2.5%	NP				•
HYDROCORTISONE BUTYRATE- hydrocortisone butyrate cream 0.1%	NP				•
HYDROCORTISONE BUTYRATE- hydrocortisone butyrate oint 0.1%	NP				•
HYDROCORTISONE BUTYRATE- hydrocortisone butyrate soln 0.1%	NP				•
hydrocortisone butyrate lotion 0.1% (Locoid)	np				•
hydrocortisone cream 1%	np				•
hydrocortisone cream 2.5%	p				•
hydrocortisone oint 1%	np				•
hydrocortisone oint 2.5%	p				•
hydrocortisone valerate cream 0.2%	p				•
hydrocortisone valerate oint 0.2%	np				•
HYFTOR- sirolimus gel 0.2%	NP		•		•
imiquimod cream 3.75% (Zyclara)	np		•		•
imiquimod cream 5%	p				•
IMPOYZ- clobetasol propionate cream 0.025%	NP				•
IMULDOSA- ustekinumab-srlf soln prefilled syringe 45 mg/0.5ml, 90 mg/ml	NP	•	•		•
isotretinoin cap 10 mg, 20 mg, 30 mg, 40 mg (Absorica)	p				•
isotretinoin cap 10 mg, 20 mg, 25 mg, 30 mg, 35 mg, 40 mg (Absorica)	np				•
ivermectin cream 1% (Soolantra)	p				•
JUBLIA- efinaconazole soln 10%	NP				•
ketoconazole cream 2%	p				•
ketoconazole foam 2% (Extina)	np				•

p = Preferred Generics
np = Non-preferred Generics

P = Preferred Brands
NP = Non-preferred Brands

Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits	Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits
ketoconazole shampoo 2%	p					metronidazole lotion 0.75% (Metrolotion)	np				
KLARON- sulfacetamide sodium lotion 10% (acne)	NP			•		MICONAZOLE NITRATE/ZINC O- miconazole-zinc oxide-white petrolatum oint 0.25-15-81.35%	NP				
KLISYRI- tirbanibulin ointment 1%	NP		•		•	MICORT HC- hydrocortisone acetate cream 2.5%	NP				•
lactic acid (ammonium lactate) cream 12%	np					MIRVASO- brimonidine tartrate gel 0.33% (base equivalent)	NP				
lactic acid (ammonium lactate) lotion 12%	np					mometasone furoate cream 0.1%	p				•
LEQSELVI- deuruxolitinib phosphate tab 8 mg (base equiv)	NP	•	•		•	mometasone furoate oint 0.1%	p				•
LEXETTE- halobetasol propionate foam 0.05%	NP				•	mometasone furoate solution 0.1% (lotion)	p				•
LICART- diclofenac epolamine patch 24hr 1.3%	NP				•	mupirocin calcium cream 2%	np				
lidocaine hcl soln 4%	p		•		•	mupirocin oint 2%	p				
lidocaine oint 5%	p		•		•	naftifine hcl cream 2%	np				
lidocaine patch 5% (Lidoderm)	p		•		•	naftifine hcl gel 2% (Naftin)	np				
lidocaine-prilocaine cream 2.5-2.5%	p				•	NAFTIFINE HYDROCHLORIDE- naftifine hcl cream 1%	NP				
LIDODERM- lidocaine patch 5%	NP		•		•	NAFTIN- naftifine hcl gel 2%	NP				
LITFULO- ritlecitinib tosylate cap 50 mg (base equiv)	NP	•	•		•	NATROBA- spinosad susp 0.9%	NP				
LULICONAZOLE- luliconazole cream 1%	NP					NEMLUVIO- nemolizumab-ilot for subcutaneous auto-injector 30 mg	P	•	•		•
LUZU- luliconazole cream 1%	NP					NEO-SYNALAR- neomycin sulfate-fluocinolone acetonide cream 0.5-0.025%	NP				
malathion lotion 0.5% (Ovide)	p					NORITATE- metronidazole cream 1%	NP			•	
METHOXSALEN- methoxsalen rapid cap 10 mg	NP					nystatin cream 100000 unit/gm	p				
METROCREAM- metronidazole cream 0.75%	NP			•		nystatin oint 100000 unit/gm	p				
METROGEL- metronidazole gel 1%	NP			•		nystatin topical powder 100000 unit/gm	p				
metronidazole cream 0.75% (Metrocream)	p					nystatin-triamcinolone cream 100000-0.1 unit/gm-%	p				
metronidazole gel 0.75%	p					nystatin-triamcinolone oint 100000-0.1 unit/gm-%	p				
metronidazole gel 1% (Metrogel)	p										

p = Preferred Generics
np = Non-preferred Generics

P = Preferred Brands
NP = Non-preferred Brands

Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits
ONEXTON- clindamycin phosphate-benzoyl peroxide gel 1.2-3.75%	NP			•	
OPZELURA- ruxolitinib phosphate cream 1.5%	NP		•		•
ORACEA- doxycycline (rosacea) cap delayed release 40 mg	NP		•		
OTULFI- ustekinumab-aausz soln prefilled syringe 45 mg/0.5ml, 90 mg/ml	NP	•	•		•
OTULFI- ustekinumab-aausz subcutaneous soln 45 mg/0.5ml	NP	•	•		•
OVIDE- malathion lotion 0.5%	NP				
oxiconazole nitrate cream 1% (Oxistat)	np				
OXISTAT- oxiconazole nitrate lotion 1%	NP				
PANRETIN- alitretinoin gel 0.1%	NP				
penciclovir cream 1% (Denavir)	np				
PENNSAID- diclofenac sodium soln 2%	NP				•
permethrin cream 5%	p				
pimecrolimus cream 1% (Elidel)	np			•	
PODOFILOX- podofilox soln 0.5%	P				
podofilox gel 0.5% (Condylox)	np		•		
PRUDOXIN- doxepin hcl cream 5%	NP		•		•
PRURADIK- crotamiton lotion 10%	NP		•		
PYZCHIVA- ustekinumab-ttwe soln auto-injector 45 mg/0.5ml, 90 mg/ml	NP	•	•		•
PYZCHIVA- ustekinumab-ttwe soln prefilled syringe 45 mg/0.5ml, 90 mg/ml	NP	•	•		•
PYZCHIVA- ustekinumab-ttwe subcutaneous soln 45 mg/0.5ml	NP	•	•		•
QBREXZA- glycopyrronium tosylate pad 2.4% (base equivalent)	NP		•		•

Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits
RETIN-A- tretinoin cream 0.025%, 0.05%, 0.1%	NP			•	
RETIN-A- tretinoin gel 0.01%, 0.025%	NP			•	
RETIN-A MICRO- tretinoin microsphere gel 0.04%, 0.06%, 0.1%	NP			•	
RETIN-A MICRO PUMP- tretinoin microsphere gel 0.04%, 0.08%, 0.1%	NP			•	
RHOFADE- oxymetazoline hcl cream 1%	NP				
SANTYL- collagenase oint 250 unit/gm	NP				
SELARSDI- ustekinumab-aekn soln prefilled syringe 45 mg/0.5ml, 90 mg/ml	P	•	•		•
selenium sulfide lotion 2.5%	p				
SERNIVO- betamethasone dipropionate spray emulsion 0.05% (base equiv)	NP				•
SILIQ- brodalumab subcutaneous soln prefilled syringe 210 mg/1.5ml	NP	•	•		•
SILVADENE- silver sulfadiazine cream 1%	NP				
silver sulfadiazine cream 1% (Silvadene)	p				
SKYRIZI- risankizumab-rzaa soln prefilled syringe 150 mg/ml	P	•	•		•
SKYRIZI PEN- risankizumab-rzaa soln auto-injector 150 mg/ml	P	•	•		•
SOFDRA- sofipironium bromide gel 12.45%	NP		•		•
SOOLANTRA- ivermectin cream 1%	NP				
SORILUX- calcipotriene foam 0.005%	NP				
SOTYKTU- deucravacitinib tab 6 mg	P	•	•		•

p = Preferred Generics
np = Non-preferred Generics

P = Preferred Brands
NP = Non-preferred Brands

Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits
SPEVIGO- spesolimab-sbzo subcutaneous soln pref syr 150 mg/ml, 300 mg/2ml	NP	•	•		•
SPINOSAD- spinosad susp 0.9%	NP				
STELARA- ustekinumab inj 45 mg/0.5ml	P	•	•		•
STELARA- ustekinumab soln prefilled syringe 45 mg/0.5ml, 90 mg/ml	P	•	•		•
STEQEYMA- ustekinumab-stba soln prefilled syringe 45 mg/0.5ml, 90 mg/ml	P	•	•		•
SULCONAZOLE NITRATE- sulconazole nitrate cream 1%	NP				
SULCONAZOLE NITRATE- sulconazole nitrate solution 1%	NP				
sulfacetamide sodium lotion 10% (acne) (Klaron)	p				
SULFAMYLON- mafenide acetate cream 85 mg/gm	NP				•
SYNALAR- fluocinolone acetonide cream 0.025%	NP				•
SYNALAR- fluocinolone acetonide oint 0.025%	NP				•
TACLONEX- calcipotriene- betamethasone dipropionate susp 0.005-0.064%	NP				
tacrolimus oint 0.03%, 0.1% (Protopic)	p			•	
TALTZ- ixekizumab subcutaneous soln auto-injector 80 mg/ml	NP	•	•		•
TALTZ- ixekizumab subcutaneous soln prefilled syringe 20 mg/0.25ml, 40 mg/0.5ml, 80 mg/ml	NP	•	•		•
TARGRETIN- bexarotene gel 1%	NP	•	•		
tavaborole soln 5% (Kerydin)	np				

Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits
TAZAROTENE- tazarotene (acne) foam 0.1%	NP			•	
tazarotene cream 0.05%, 0.1% (Tazorac)	p				
tazarotene gel 0.05%, 0.1% (Tazorac)	p				
TAZORAC- tazarotene cream 0.05%	NP				
TAZORAC- tazarotene cream 0.1%	NP			•	
TAZORAC- tazarotene gel 0.05%, 0.1%	NP			•	
TEXACORT- hydrocortisone soln 2.5%	NP				•
TOLAK- fluorouracil cream 4%	NP		•		•
TOPICORT- desoximetasone oint 0.05%, 0.25%	NP				•
TOPICORT- desoximetasone spray 0.25%	NP				•
TREMFYA- guselkumab soln pen-injector 100 mg/ml	P	•	•		•
TREMFYA- guselkumab soln prefilled syringe 100 mg/ml	P	•	•		•
TREMFYA PEN- guselkumab soln auto-injector 100 mg/ml	P	•	•		•
tretinoin cream 0.025%, 0.05%, 0.1% (Retin-a)	p				
tretinoin gel 0.01% (Retin-a)	p				
tretinoin gel 0.025% (Retin-a)	np				
tretinoin gel 0.05% (Atralin)	np				
TRETINOIN MICROSPHERE- tretinoin microsphere gel 0.04%, 0.1%	NP			•	
tretinoin microsphere gel 0.08% (Retin-a micro pump)	np				

p = Preferred Generics
np = Non-preferred Generics

P = Preferred Brands
NP = Non-preferred Brands

Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits
TRETINOIN MICROSPHERE PUM- tretinoin microsphere gel 0.04%, 0.1%	NP			•	
TRIAMCINOLONE ACETONIDE- triamcinolone acetonide aerosol soln 0.147 mg/gm	NP				•
triamcinolone acetonide cream 0.025%, 0.1%, 0.5%	p				•
triamcinolone acetonide lotion 0.025%, 0.1%	p				•
triamcinolone acetonide oint 0.025%, 0.1%, 0.5%	p				•
triamcinolone acetonide oint 0.05%	np				•
TWYNEO- tretinoin-benzoyl peroxide cream 0.1-3%	NP			•	
ULTRAVATE- halobetasol propionate lotion 0.05%	NP				•
USTEKINUMAB- ustekinumab inj 45 mg/0.5ml	NP	•	•		•
USTEKINUMAB- ustekinumab soln prefilled syringe 45 mg/0.5ml, 90 mg/ml	NP	•	•		•
USTEKINUMAB-AEKN- ustekinumab-ae kn soln prefilled syringe 45 mg/0.5ml, 90 mg/ml	NP	•	•		•
USTEKINUMAB-TTWE- ustekinumab-ttwe soln prefilled syringe 45 mg/0.5ml, 90 mg/ml	NP	•	•		•
VALCHLOR- mechlorethamine hcl gel 0.016% (base equivalent)	P	•			
VANOS- fluocinonide cream 0.1%	NP				•
VECTICAL- calcitriol oint 3 mcg/gm	NP				
VEREGEN- sinecatechins oint 15%	NP				
VTAMA- tapinarof cream 1%	NP		•		
VUSION- miconazole-zinc oxide-white petrolatum oint 0.25-15-81.35%	NP				

Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits
WEZLANA- ustekinumab-auub inj 45 mg/0.5ml	NP	•	•		•
WEZLANA- ustekinumab-auub soln prefilled syringe 45 mg/0.5ml, 90 mg/ml	NP	•	•		•
WINLEVI- clascoterone cream 1%	NP				
WYNZORA- calcipotriene- betamethasone dipropionate cream 0.005-0.064%	NP				
XERESE- acyclovir-hydrocortisone cream 5-1%	NP				
YESINTEK- ustekinumab-kfce soln prefilled syringe 45 mg/0.5ml, 90 mg/ml	P	•	•		•
YESINTEK- ustekinumab-kfce subcutaneous soln 45 mg/0.5ml	P	•	•		•
ZELSUVMI- berdazimer sodium gel 10.3%	NP		•		•
ZIANA- clindamycin phosphate- tretinoin gel 1.2-0.025%	NP			•	
ZILXI- minocycline hcl micronized foam 1.5%	NP			•	
ZONALON- doxepin hcl cream 5%	NP		•		•
ZORYVE- roflumilast cream 0.05%, 0.15%, 0.3%	NP		•		
ZORYVE- roflumilast foam 0.3%	NP		•		
ZOVIRAX- acyclovir cream 5%	NP				
ZOVIRAX- acyclovir oint 5%	NP				
ZTLIDO- lidocaine patch 1.8% (36 mg)	NP		•		•
ZYCLARA- imiquimod cream 3.75%	NP		•		•
ZYCLARA PUMP- imiquimod cream 2.5%, 3.75%	NP		•		•
MISCELLANEOUS PRODUCTS					
ANTIDOTES					

p = Preferred Generics
np = Non-preferred Generics

P = Preferred Brands
NP = Non-preferred Brands

Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits	Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits
CHEMET- succimer cap 100 mg	P					naltrexone hcl tab 50 mg	p				
deferasirox granules packet 90 mg, 180 mg, 360 mg (Jadenu sprinkle)	np	•				NARCAN- naloxone hcl nasal spray 4 mg/0.1ml	NP				
deferasirox tab for oral susp 125 mg, 250 mg, 500 mg (Exjade)	np	•				OPVEE- nalmefene hcl nasal spray 2.7 mg/0.1ml (base equiv)	P				
deferasirox tab 90 mg, 180 mg, 360 mg (Jadenu)	np	•				RETOVY- naloxone hcl nasal spray 4 mg/0.25ml	P				
deferiprone tab 500 mg, 1000 mg (Ferriprox)	np	•				VISTOGARD- uridine triacetate oral granules packet 10 gm	NP	•			
EXJADE- deferasirox tab for oral susp 125 mg, 250 mg, 500 mg	NP	•				ZIMHI- naloxone hcl soln prefilled syringe 5 mg/0.5ml	NP				
FERRIPROX- deferiprone oral soln 100 mg/ml	NP	•				DIAGNOSTIC PRODUCTS					
FERRIPROX- deferiprone tab 1000 mg	NP	•				ACCU-CHEK AVIVA PLUS- glucose blood test strip	NP			•	•
FERRIPROX TWICE-A-DAY- deferiprone (twice daily) tab 1000 mg	NP	•				ACCU-CHEK COMPACT STRIPS- glucose blood test strip	NP			•	•
JADENU- deferasirox tab 90 mg, 180 mg, 360 mg	NP	•				ACCU-CHEK COMPACT TEST DR- glucose blood test strip	NP			•	•
JADENU SPRINKLE- deferasirox granules packet 90 mg, 180 mg, 360 mg	NP	•				ACCU-CHEK GUIDE- glucose blood test strip	NP			•	•
KLOXXADO- naloxone hcl nasal spray 8 mg/0.1ml	P					ACCU-CHEK GUIDE TEST STRI- glucose blood test strip	NP			•	•
naloxone hcl inj 0.4 mg/ml, 4 mg/10ml	p					ACCU-CHEK SMARTVIEW STRIP- glucose blood test strip	NP			•	•
naloxone hcl nasal spray 4 mg/0.1ml (Narcan)	p					ACCUTREND GLUCOSE- glucose blood test strip	NP			•	•
naloxone hcl soln prefilled syringe 0.4 mg/ml	p					ADVANCE INTUITION TEST ST- glucose blood test strip	NP			•	•
naloxone hcl soln prefilled syringe 2 mg/2ml	np					ADVANCE MICRO-DRAW TEST S- glucose blood test strip	NP			•	•
NALOXONE HYDROCHLORIDE- naloxone hcl soln cartridge 0.4 mg/ml	P					ADVIN COVID-19 ANTIGEN HO-covid-19 at home antigen test kit	NP				
						ADVOCATE REDI-CODE- glucose blood test strip	NP			•	•
						ADVOCATE REDI-CODE+ TEST- glucose blood test strip	NP			•	•

p = Preferred Generics
np = Non-preferred Generics

P = Preferred Brands
NP = Non-preferred Brands

Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits
ADVOCATE TEST STRIPS- glucose blood test strip	NP			•	•
AGAMATRIX AMP NO CODE TES- glucose blood test strip	NP			•	•
AGAMATRIX JAZZ TEST STRIP- glucose blood test strip	NP			•	•
AGAMATRIX PRESTO TEST STR- glucose blood test strip	NP			•	•
ASSURE II- glucose blood test strip	NP			•	•
ASSURE II CHECK STRIP- glucose blood test strip	NP			•	•
ASSURE II TEST STRIPS- glucose blood test strip	NP			•	•
ASSURE PLATINUM TEST STRI- glucose blood test strip	NP			•	•
ASSURE PRISM MULTI TEST S- glucose blood test strip	NP			•	•
ASSURE PRO TEST STRIPS- glucose blood test strip	NP			•	•
ASSURE 3 TEST STRIPS- glucose blood test strip	NP			•	•
ASSURE 4 TEST STRIPS- glucose blood test strip	NP			•	•
AT LAST TEST STRIPS- glucose blood test strip	NP			•	•
BINAXNOW COVID-19 AG CARD- covid-19 at home antigen test kit	NP				
BIOTEL CARE BLOOD GLUCOSE- glucose blood test strip	NP			•	•
BLOOD GLUCOSE TEST STRIPS- glucose blood test strip	NP			•	•
BLULINK GLUCOSE TEST STRI- glucose blood test strip	NP			•	•
CARESENS N BLOOD GLUCOSE- glucose blood test strip	NP			•	•

Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits
CARESENS S BLOOD GLUCOSE- glucose blood test strip	NP				•
CARESTART COVID-19 ANTIGE- covid-19 at home antigen test kit	NP				
CARETOUCH BLOOD GLUCOSE T- glucose blood test strip	NP			•	•
CELLTRION DIATRUST COVID-- covid-19 at home antigen test kit	NP				
CLEARDETECT COVID-19 ANTI- covid-19 at home antigen test kit	NP				
CLEVER CHEK AUTO-CODE TES- glucose blood test strip	NP			•	•
CLEVER CHEK AUTO-CODE VOI- glucose blood test strip	NP			•	•
CLEVER CHEK TEST STRIPS- glucose blood test strip	NP			•	•
CLEVER CHOICE AUTO-CODE P- glucose blood test strip	NP			•	•
CLEVER CHOICE MICRO TEST- glucose blood test strip	NP			•	•
CLEVER CHOICE NO CODING T- glucose blood test strip	NP			•	•
CLEVER CHOICE TALK NO COD- glucose blood test strip	NP			•	•
CLINITEST RAPID COVID-19- covid-19 at home antigen test kit	NP				
CONTOUR BLOOD GLUCOSE TES- glucose blood test strip	P				•
CONTOUR NEXT BLOOD GLUCOS- glucose blood test strip	P				•
CONTOUR PLUS BLOOD GLUCOS- glucose blood test strip	P				•
COOL BLOOD GLUCOSE TEST S- glucose blood test strip	NP			•	•
COVID-19 AG TEST- covid-19 at home antigen test kit	NP				

p = Preferred Generics
np = Non-preferred Generics

P = Preferred Brands
NP = Non-preferred Brands

Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits	Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits
COVID-19 AT-HOME TEST KIT- covid-19 at home antigen test kit	NP					EASY TRAK BLOOD GLUCOSE T- glucose blood test strip	NP			•	•
COVID-19 OTC ANTIGEN TEST- covid-19 at home antigen test kit	NP					EASY TRAK II BLOOD GLUCOS- glucose blood test strip	NP			•	•
CVS ADVANCED GLUCOSE METE- glucose blood test strip	NP			•	•	EASYGLUCO- glucose blood test strip	NP			•	•
CVS COVID-19 AT HOME TEST- covid-19 at home antigen test kit	NP					EASYMAX TEST STRIPS- glucose blood test strip	NP			•	•
CVS GLUCOSE METER TEST ST- glucose blood test strip	NP			•	•	EASYMAX 15 TEST STRIPS- glucose blood test strip	NP			•	•
CVS TRUE METRIX BLOOD GLU- glucose blood test strip	NP			•	•	EASYPRO BLOOD GLUCOSE TES- glucose blood test strip	NP			•	•
DIASTIX- glucose urine test-(glucose oxidase) strip	P					EASYPRO PLUS- glucose blood test strip	NP			•	•
DIASTIX REAGENT STRIPS- glucose urine test-(glucose oxidase) strip	P					ELEMENT COMPACT TEST STRI- glucose blood test strip	NP			•	•
DIATHRIVE BLOOD GLUCOSE T- glucose blood test strip	NP			•	•	ELEMENT TEST STRIPS- glucose blood test strip	NP			•	•
DIATHRIVE+ BLOOD GLUCOSE- glucose blood test strip	NP			•	•	ELLUME COVID-19 HOME TEST- covid-19 at home antigen test kit	NP				
DUO-CARE TEST STRIPS- glucose blood test strip	NP			•	•	EMBRACE BLOOD GLUCOSE TES- glucose blood test strip	NP			•	•
EASY MAX BLOOD GLUCOSE TE- glucose blood test strip	NP			•	•	EMBRACE EVO BLOOD GLUCOSE- glucose blood test strip	NP			•	•
EASY PLUS II BLOOD GLUCOS- glucose blood test strip	NP			•	•	EMBRACE PRO BLOOD GLUCOSE- glucose blood test strip	NP			•	•
EASY STEP TEST STRIPS- glucose blood test strip	NP			•	•	EMBRACE TALK BLOOD GLUCOS- glucose blood test strip	NP			•	•
EASY TALK BLOOD GLUCOSE T- glucose blood test strip	NP			•	•	EMBRACE WAVE BLOOD GLUCOS- glucose blood test strip	NP			•	•
EASY TALK PLUS II BLOOD G- glucose blood test strip	NP			•	•	EQ BLOOD GLUCOSE TEST STR- glucose blood test strip	NP			•	•
EASY TOUCH GLUCOSE TEST S- glucose blood test strip	NP			•	•	EVENCARE BLOOD GLUCOSE TE- glucose blood test strip	NP			•	•
EASY TOUCH HEALTHPRO GLUC- glucose blood test strip	NP			•	•	EVOLUTION AUTOCODE- glucose blood test strip	NP			•	•

p = Preferred Generics
np = Non-preferred Generics

P = Preferred Brands
NP = Non-preferred Brands

Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits	Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits
FASTEP COVID-19 ANTIGEN H-covid-19 at home antigen test kit	NP					GENABIO COVID-19 RAPID SE-covid-19 at home antigen test kit	NP				
FIFTY50 GLUCOSE TEST STRI- glucose blood test strip	NP			•	•	GENULTIMATE TEST STRIPS- glucose blood test strip	NP			•	•
FLOWFLEX COVID-19 ANTIGEN-covid-19 at home antigen test kit	NP					GE100 BLOOD GLUCOSE TEST- glucose blood test strip	NP			•	•
FORA D40/G31 BLOOD GLUCOS- glucose blood test strip	NP			•	•	GHT TEST STRIPS- glucose blood test strip	NP			•	•
FORA GD20 TEST STRIPS- glucose blood test strip	NP			•	•	GLUCO PERFECT 3 TEST STRI- glucose blood test strip	NP			•	•
FORA GD50 BLOOD GLUCOSE T- glucose blood test strip	NP			•	•	GLUCOCARD EXPRESSION BLOO- glucose blood test strip	NP			•	•
FORA GTEL BLOOD GLUCOSE T- glucose blood test strip	NP			•	•	GLUCOCARD SHINE TEST STRI- glucose blood test strip	NP			•	•
FORA G20 BLOOD GLUCOSE TE- glucose blood test strip	NP			•	•	GLUCOCARD VITAL TEST STRI- glucose blood test strip	NP			•	•
FORA TN'G ADVANCE PRO BLO- glucose blood test strip	NP			•	•	GLUCOCARD X-SENSOR- glucose blood test strip	NP			•	•
FORA TN'G/TN'G VOICE BLOO- glucose blood test strip	NP			•	•	GLUCOCARD 01 SENSOR PLUS- glucose blood test strip	NP			•	•
FORA V10 BLOOD GLUCOSE TE- glucose blood test strip	NP			•	•	GLUCOCOM TEST STRIPS- glucose blood test strip	NP			•	•
FORA V30A BLOOD GLUCOSE T- glucose blood test strip	NP			•	•	GLUCONAVII BLOOD GLUCOSE- glucose blood test strip	NP			•	•
FORA 6 CONNECT- glucose blood test strip	NP			•	•	GNP EASY TOUCH GLUCOSE TE- glucose blood test strip	NP			•	•
FORA 6 CONNECT/GTEL BLOOD- glucose blood test strip	NP			•	•	GNP TRUE METRIX SELF MONI- glucose blood test strip	NP			•	•
FORACARE GD40- glucose blood test strip	NP			•	•	GNP TRUETRACK BLOOD GLUCO- glucose blood test strip	NP			•	•
FORACARE PREMIUM V10 TEST- glucose blood test strip	NP			•	•	GNP TRUETRACK SMART SYSTE- glucose blood test strip	NP			•	•
FORACARE TEST N GO TEST S- glucose blood test strip	NP			•	•	GOJJI BLOOD GLUCOSE TEST- glucose blood test strip	NP			•	•
FREESTYLE PRECISION NEO B- glucose blood test strip	P				•	GOTOKNOW COVID-19 ANTIGEN-covid-19 at home antigen test kit	NP				

p = Preferred Generics
np = Non-preferred Generics

P = Preferred Brands
NP = Non-preferred Brands

Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits	Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits
HW EMBRACE PRO BLOOD GLUC- glucose blood test strip	NP			•	•	MM EASY TOUCH GLUCOSE TES- glucose blood test strip	NP			•	•
HW EMBRACE TALK BLOOD GLU- glucose blood test strip	NP			•	•	MYGLUCOHEALTH BLOOD GLUCO- glucose blood test strip	NP			•	•
IGLUCOSE BLOOD GLUCOSE TE- glucose blood test strip	NP			•	•	NEUTEK 2TEK TEST STRIPS- glucose blood test strip	NP			•	•
IHEALTH BLOOD GLUCOSE TES- glucose blood test strip	NP			•	•	NOVA MAX GLUCOSE TEST STR- glucose blood test strip	NP			•	•
IHEALTH COVID-19 ANTIGEN- covid-19 at home antigen test kit	NP					OHC COVID-19 ANTIGEN SELF- covid-19 at home antigen test kit	NP				
IN TOUCH BLOOD GLUCOSE TE- glucose blood test strip	NP			•	•	ON CALL EXPRESS BLOOD GLU- glucose blood test strip	NP			•	•
INDICAID COVID-19 RAPID A- covid-19 at home antigen test kit	NP					ON/GO COVID-19 ANTIGEN SE- covid-19 at home antigen test kit	NP				
INFINITY BLOOD GLUCOSE TE- glucose blood test strip	NP			•	•	ON/GO ONE COVID-19 ANTIGE- covid-19 at home antigen test kit	NP				
INFINITY VOICE- glucose blood test strip	NP			•	•	ONE DROP BLOOD GLUCOSE TE- glucose blood test strip	NP			•	•
INTELISWAB COVID-19 RAPID- covid-19 at home antigen test kit	NP					ONETOUCH ULTRA- glucose blood test strip	NP			•	•
KETO-DIASTIX- urine glucose- ketones test strips	P					ONETOUCH ULTRA BLUE TEST- glucose blood test strip	NP			•	•
KETOSTIX- acetone (urine) test strip	P					ONETOUCH ULTRA TEST STRIP- glucose blood test strip	NP			•	•
KROGER HEALTHPRO GLUCOSE- glucose blood test strip	NP			•	•	ONETOUCH VERIO TEST STRIP- glucose blood test strip	NP			•	•
MEIJER TRUETEST BLOOD GLU- glucose blood test strip	NP			•	•	OPTIUMEZ TEST STRIPS- glucose blood test strip	P				•
MEIJER TRUETRACK BLOOD GL- glucose blood test strip	NP			•	•	PHARMACIST CHOICE AUTOCOD- glucose blood test strip	NP			•	•
MICRODOT TEST STRIPS- glucose blood test strip	NP			•	•	PHARMACIST CHOICE NO CODI- glucose blood test strip	NP			•	•
MICRODOT XTRA TEST STRIPS- glucose blood test strip	NP			•	•	PILOT COVID-19 AT-HOME TE- covid-19 at home antigen test kit	NP				
MM BLULINK GLUCOSE TEST S- glucose blood test strip	NP			•	•	PIP BLOOD GLUCOSE TEST ST- glucose blood test strip	NP			•	•

p = Preferred Generics
np = Non-preferred Generics

P = Preferred Brands
NP = Non-preferred Brands

Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits	Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits
POCKETCHEM EZ BLOOD GLUCO- glucose blood test strip	NP			•	•	RELION PRIME BLOOD GLUCOS- glucose blood test strip	NP			•	•
POGO AUTOMATIC TEST CARTR- glucose blood test automatic cartridge	NP			•	•	RELION TRUE METRIX BLOOD- glucose blood test strip	NP			•	•
PRECISION SOF-TACT TEST S- glucose blood test strip	P				•	RELION ULTIMA BLOOD GLUCO- glucose blood test strip	NP			•	•
PRECISION XTRA BLOOD GLUC- glucose blood test strip	P				•	RIGHTEST GS100 BLOOD GLUC- glucose blood test strip	NP			•	•
PRO VOICE V8/V9 BLOOD GLU- glucose blood test strip	NP			•	•	RIGHTEST GS300 BLOOD GLUC- glucose blood test strip	NP			•	•
PRODIGY NO CODING BLOOD G- glucose blood test strip	NP			•	•	RIGHTEST GS333 BLOOD GLUC- glucose blood test strip	NP			•	•
PTS PANELS EGLU- glucose blood test strip	NP			•	•	RIGHTEST GS550 BLOOD GLUC- glucose blood test strip	NP			•	•
QUICK TOUCH BLOOD GLUCOSE- glucose blood test strip	NP			•	•	RIGHTEST GT333 BLOOD GLUC- glucose blood test strip	NP			•	•
QUICKTEK TEST STRIPS- glucose blood test strip	NP			•	•	SMARTEST BLOOD GLUCOSE TE- glucose blood test strip	NP			•	•
QUICKVUE AT-HOME COVID-19- covid-19 at home antigen test kit	NP					SOLUS V2 AUDIBLE TEST- glucose blood test strip	NP			•	•
QUINTET AC BLOOD GLUCOSE- glucose blood test strip	NP			•	•	SPEEDY SWAB RAPID COVID-1- covid-19 at home antigen test kit	NP				
QUINTET BLOOD GLUCOSE TES- glucose blood test strip	NP			•	•	SUPREME TEST STRIPS- glucose blood test strip	NP			•	•
RAPID SARS-COV-2 ANTIGEN- covid-19 at home antigen test kit	NP					TGT BLOOD GLUCOSE TEST ST- glucose blood test strip	NP			•	•
REFUAH PLUS BLOOD GLUCOSE- glucose blood test strip	NP			•	•	TRUE FOCUS SELF MONITORIN- glucose blood test strip	NP			•	•
RELION CONFIRM/MICRO TEST- glucose blood test strip	NP			•	•	TRUE METRIX BLOOD GLUCOSE- glucose blood test strip	NP			•	•
RELION PLATINUM BLOOD GLU- glucose blood test strip	NP			•	•	TRUE METRIX SELF MONITORI- glucose blood test strip	NP			•	•
RELION PREMIER BLOOD GLUC- glucose blood test strip	NP			•	•	TRUETEST STRIPS- glucose blood test strip	NP			•	•

p = Preferred Generics
np = Non-preferred Generics

P = Preferred Brands
NP = Non-preferred Brands

Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits
TRUETRACK TEST- glucose blood test strip	NP			•	•
UNISTRIP1 GENERIC- glucose blood test strip	NP			•	•
VERASENS BLOOD GLUCOSE TE- glucose blood test strip	NP			•	•
VIVAGUARD INO BLOOD GLUCO- glucose blood test strip	NP			•	•
MEDICAL DEVICES					
ACE AEROSOL CLOUD ENHANCE- respiratory therapy supplies - misc	P				
AEROCHAMBER HOLDING CHAMBER- spacer/aerosol-holding chambers - device	P				
AEROCHAMBER MINI AEROSOL- spacer/aerosol-holding chambers - device	P				
AEROCHAMBER MV- spacer/ aerosol-holding chambers - device	P				
AEROCHAMBER PLUS FLOW VU- spacer/aerosol-holding chambers - device	P				
AEROCHAMBER PLUS FLOW-VU/- spacer/aerosol-holding chambers - device	P				
AEROCHAMBER Z-STAT PLUS V- spacer/aerosol-holding chambers - device	P				
AEROCHAMBER Z-STAT PLUS/F- spacer/aerosol-holding chambers - device	P				
AEROCHAMBER Z-STAT PLUS/L- spacer/aerosol-holding chambers - device	P				
AEROCHAMBER Z-STAT PLUS/M- spacer/aerosol-holding chambers - device	P				

Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits
AEROCHAMBER Z-STAT PLUS/S- spacer/aerosol-holding chambers - device	P				
AEROCHAMBER2GO ANTI-STATI- spacer/aerosol-holding chambers - device	P				
AEROVENT PLUS HOLDING CHAMBER- spacer/aerosol-holding chambers - device	NP				
BREATHE COMFORT ANTI-STAT- spacer/aerosol-holding chambers - device	NP				
BREATHE EASE/LARGE MASK- spacer/aerosol-holding chambers - device	NP				
BREATHE EASE/MEDIUM MASK- spacer/aerosol-holding chambers - device	NP				
BREATHE EASE/SMALL MASK- spacer/aerosol-holding chambers - device	NP				
BREATHERITE VALVED MDI CHAMBER- spacer/aerosol-holding chambers - device	P				
CAYA- diaphragm arc-spring	NP				
CLEVER CHOICE ANTI-STATIC- spacer/aerosol-holding chambers - device	NP				
COMPACT SPACE CHAMBER/ANTI- spacer/aerosol-holding chambers - device	NP				
CONDOMS- condoms - male	NP				
CONTOUR BLOOD GLUCOSE MONITORING- blood glucose monitoring devices	P				
CONTOUR HIGH CONTROL- blood glucose calibration - liquid - high	P				

p = Preferred Generics
np = Non-preferred Generics

P = Preferred Brands
NP = Non-preferred Brands

Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits
CONTOUR LOW CONTROL- blood glucose calibration - liquid - low	P				
CONTOUR NEXT BLOOD GLUCOS- blood glucose monitoring kit w/ device	P				
CONTOUR NEXT CONTROL LEVE- blood glucose calibration - liquid - normal, - low	P				
CONTOUR NEXT EZ BLOOD GLU- blood glucose monitoring kit w/ device	P				
CONTOUR NEXT GEN BLOOD GL- blood glucose monitoring kit w/ device	P				
CONTOUR NEXT LINK BLOOD G- blood glucose monitoring kit w/ device	P				
CONTOUR NEXT LINK WIRELES- blood glucose monitoring kit w/ device	P				
CONTOUR NEXT ONE BLOOD GL- blood glucose monitoring kit w/ device	P				
CONTOUR NEXT ONE BLOOD GL- blood glucose monitoring kit	P				
CONTOUR NORMAL CONTROL- blood glucose calibration - liquid - normal	P				
CONTOUR PLUS BLUE BLOOD G- blood glucose monitoring kit w/ device	P				
CONTOUR PLUS CONTROL SOLU- blood glucose calibration - liquid	P				
DEXCOM G6 RECEIVER- continuous glucose system receiver	P			•	•

Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits
DEXCOM G6 SENSOR- continuous glucose system sensor	P			•	•
DEXCOM G6 TRANSMITTER- continuous glucose system transmitter	P			•	•
DEXCOM G7 RECEIVER- continuous glucose system receiver	P			•	•
DEXCOM G7 SENSOR- continuous glucose system sensor	P			•	•
DEXCOM G7 15 DAY SENSOR- continuous glucose system sensor	P			•	•
EASIVENT- spacer/aerosol-holding chambers - device	P				
EASIVENT/MASK-LARGE- spacer/ aerosol-holding chambers - device	P				
EASIVENT/MASK-MEDIUM- spacer/ aerosol-holding chambers - device	P				
EASIVENT/MASK-SMALL- spacer/ aerosol-holding chambers - device	P				
EQ SPACE CHAMBER ANTI-STA- spacer/aerosol-holding chambers - device	NP				
FC2 FEMALE CONDOM- condoms - female	NP				
FEMCAP- cervical cap 22 mm, 26 mm, 30 mm	NP				
FLEXICHAMBER- spacer/aerosol- holding chambers - device	NP				
FLEXICHAMBER ADULT MASK/S- spacer/aerosol-holding chamber supplies - masks	NP				
FLEXICHAMBER CHILD MASK/L- spacer/aerosol-holding chamber supplies - masks	NP				
FLEXICHAMBER CHILD MASK/S- spacer/aerosol-holding chamber supplies - masks	NP				

p = Preferred Generics
np = Non-preferred Generics

P = Preferred Brands
NP = Non-preferred Brands

Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits	Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits
FREESTYLE LIBRE 14 DAY/RE-continuous glucose system receiver	P			•	•	INSULIN PEN NEEDLES – VARIOUS	NP				
FREESTYLE LIBRE 14 DAY/SE-continuous glucose system sensor	P			•	•	INSULIN SYRINGES – VARIOUS	P				
FREESTYLE LIBRE 2 PLUS/SE-continuous glucose system sensor	P			•	•	INSULIN SYRINGES – VARIOUS	NP				
FREESTYLE LIBRE 2/READER/-continuous glucose system receiver	P			•	•	LANCETS – VARIOUS	P				
FREESTYLE LIBRE 2/SENSOR/-continuous glucose system sensor	P			•	•	LANCETS – VARIOUS	NP				
FREESTYLE LIBRE 3 PLUS/SE-continuous glucose system sensor	P			•	•	MEDISENSE GLUCOSE KETONE-blood glucose calibration - liquid	P				
FREESTYLE LIBRE 3/READER/-continuous glucose system receiver	P			•	•	MEDISENSE HIGH/MID/LOW CO-blood glucose calibration - liquid	P				
FREESTYLE LIBRE 3/SENSOR/-continuous glucose system sensor	P			•	•	MICROCHAMBER- spacer/aerosol-holding chambers - device	P				
FREESTYLE LIBRE/READER/FL-continuous glucose system receiver	P			•	•	MICROSPACER- spacer/aerosol-holding chambers - device	P				
FREESTYLE PRECISION NEO B-blood glucose monitoring kit w/ device	P					MISC NEEDLES AND SYRINGES – VARIOUS	NP				
ILET INSULIN INFUSION KIT- insulin infusion pump supplies	P		•		•	OMNIFLEX DIAPHRAGM-diaphragms	NP				
ILET INSULIN PUMP- insulin infusion pump - device	P		•		•	OMNIPOD DASH INTRO KIT (G-insulin infusion disposable pump kit	P		•		•
ILET STARTER KIT - CONTACT-insulin infusion pump supplies	P		•		•	OMNIPOD DASH PODS (GEN 4)-insulin infusion disposable pump reservoir	P		•		•
ILET STARTER KIT - INSET- insulin infusion pump supplies	P		•		•	OMNIPOD 5 DEXCOM G7G6 INT-insulin infusion disposable pump kit	P		•		•
INSPIREASE DRUG DELIVERY-spacer/aerosol-holding chambers - device	P					OMNIPOD 5 DEXCOM G7G6 POD-insulin infusion disposable pump reservoir	P		•		•
INSPIREASE RESERVOIR BAGS-spacer/aerosol-holding chamber supplies - bags	P					OMNIPOD 5 LIBRE2 PLUS G6-insulin infusion disposable pump kit	P		•		•
INSULIN PEN NEEDLES – VARIOUS	P					OMNIPOD 5 LIBRE2 PLUS G6-insulin infusion disposable pump reservoir	P		•		•
						OPTICHAMBER- spacer/aerosol-holding chambers - device	P				
						OPTICHAMBER- spacer/aerosol-holding chambers - device	NP				

p = Preferred Generics
np = Non-preferred Generics

P = Preferred Brands
NP = Non-preferred Brands

Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits
OPTICHAMBER DIAMOND- spacer/aerosol-holding chambers - device	P				
OPTICHAMBER DIAMOND/LARGE-spacer/aerosol-holding chambers - device	P				
OPTICHAMBER DIAMOND/MEDIU-spacer/aerosol-holding chambers - device	P				
OPTICHAMBER DIAMOND/SMALL-spacer/aerosol-holding chambers - device	P				
PANDA MASK LARGE- spacer/aerosol-holding chamber supplies - masks	NP				
PANDA MASK MEDIUM- spacer/aerosol-holding chamber supplies - masks	NP				
PANDA MASK SMALL- spacer/aerosol-holding chamber supplies - masks	NP				
PARI VORTEX MASK/PEDIATRI-spacer/aerosol-holding chamber supplies - masks	NP				
PEDIATRIC PANDA MASK- spacer/aerosol-holding chamber supplies - masks	NP				
POCKET CHAMBER- spacer/aerosol-holding chambers - device	P				
POCKET SPACER- spacer/aerosol-holding chambers - device	P				
PRECISION GLUCOSE KETONE-blood glucose calibration - liquid	P				
PRO COMFORT INHALER SPACE-spacer/aerosol-holding chambers - device	NP				

Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits
PROCARE SPACER CHAMBER W/-spacer/aerosol-holding chambers - device	NP				
PROCHAMBER VALVED HOLDING-spacer/aerosol-holding chambers - device	NP				
PURE COMFORT INHALER SPAC-spacer/aerosol-holding chambers - device	NP				
RITEFLO- spacer/aerosol-holding chambers - device	P				
SILICONE MASK FOR BREATHE-respiratory therapy supplies - misc	P				
SILICONE MASK FOR BREATHR-respiratory therapy supplies - misc	P				
TWIIST REFILL KIT- insulin infusion disposable pump reservoir kit	P		•	•	
TWIIST REFILL KIT/INFUSIO- insulin infusion disposable pump reservoir/infus set kit	P		•	•	
TWIIST STARTER KIT- insulin infusion disposable pump kit	P		•	•	
VORTEX NON ELECTROSTATIC-spacer/aerosol-holding chambers - device	P				
VORTEX VALVED CHAMBER/PED-spacer/aerosol-holding chambers - device	P				
WIDE-SEAL SILICONE DIAPHR-diaphragm wide seal 60 mm, 65 mm, 70 mm, 75 mm, 80 mm, 85 mm, 90 mm, 95 mm	NP				
ASSORTED CLASSES					
ASTAGRAF XL- tacrolimus cap er 24hr 0.5 mg, 1 mg, 5 mg	NP				
azathioprine tab 50 mg (Imuran)	p				
azathioprine tab 75 mg, 100 mg	np				

p = Preferred Generics
np = Non-preferred Generics

P = Preferred Brands
NP = Non-preferred Brands

Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits	Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits
BENLYSTA- belimumab subcutaneous solution auto-injector 200 mg/ml	NP	•	•		•	lenalidomide cap 5 mg, 10 mg, 15 mg, 20 mg, 25 mg (Revlimid)	p	•	•		•
BENLYSTA- belimumab subcutaneous solution prefilled syringe 200 mg/ml	NP	•	•		•	LOKELMA- sodium zirconium cyclosilicate for susp packet 5 gm, 10 gm	P				
CELLCEPT- mycophenolate mofetil cap 250 mg	NP					LUMINOPIA- digital therapy application - visual	NP				
CELLCEPT- mycophenolate mofetil for oral susp 200 mg/ml	NP					LUPKYNIS- voclosporin cap 7.9 mg	NP	•	•		•
CELLCEPT- mycophenolate mofetil tab 500 mg	NP					mycophenolate mofetil cap 250 mg (Cellcept)	p				
CUPRIMINE- penicillamine cap 250 mg	NP	•		•		mycophenolate mofetil for oral susp 200 mg/ml (Cellcept)	p				
CUVRIOR- trientine tetrahydrochloride tab 300 mg	NP	•	•			mycophenolate mofetil tab 500 mg (Cellcept)	p				
cyclosporine cap 25 mg, 100 mg (Sandimmune)	p					mycophenolate sodium tab dr 180 mg (mycophenolic acid equiv), 360 mg (mycophenolic acid equiv) (Myfortic)	p				
cyclosporine modified cap 25 mg, 100 mg (Neoral)	p					MYFORTIC- mycophenolate sodium tab dr 180 mg (mycophenolic acid equiv), 360 mg (mycophenolic acid equiv)	NP				
cyclosporine modified cap 50 mg	p					MYHIBBIN- mycophenolate mofetil oral susp 200 mg/ml	P				
cyclosporine modified oral soln 100 mg/ml (Neoral)	p					NEORAL- cyclosporine modified cap 25 mg, 100 mg	NP				
DEPEN TITRATABS- penicillamine tab 250 mg	NP	•		•		NEORAL- cyclosporine modified oral soln 100 mg/ml	NP				
ENSPRYNG- satralizumab-mwge subcutaneous soln pref syringe 120 mg/ml	NP	•	•		•	penicillamine cap 250 mg (Cuprimine)	np	•		•	
ENVARUSUS XR- tacrolimus tab er 24hr 0.75 mg, 1 mg, 4 mg	NP					penicillamine tab 250 mg (Depen titratabs)	p	•			
everolimus tab 0.25 mg, 0.5 mg, 0.75 mg, 1 mg (Zortress)	p					PROGRAF- tacrolimus cap 0.5 mg, 1 mg, 5 mg	NP				
IMURAN- azathioprine tab 50 mg	NP					PROGRAF- tacrolimus packet for susp 0.2 mg, 1 mg	NP				
JOENJA- leniolisib phosphate tab 70 mg	NP	•	•		•						
lenalidomide caps 2.5 mg (Revlimid)	p	•	•		•						

p = Preferred Generics
np = Non-preferred Generics

P = Preferred Brands
NP = Non-preferred Brands

Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits
REVLIMID- lenalidomide caps 2.5 mg	NP	•	•		•
REVLIMID- lenalidomide cap 5 mg, 10 mg, 15 mg, 20 mg, 25 mg	NP	•	•		•
REZUROCK- belumosudil mesylate tab 200 mg	NP	•	•		•
SANDIMMUNE- cyclosporine cap 25 mg, 100 mg	NP				
sirolimus oral soln 1 mg/ml (Rapamune)	p				
sirolimus tab 0.5 mg, 1 mg, 2 mg (Rapamune)	p				
sodium polystyrene sulfonate powder	p				
sodium polystyrene sulfonate susp 15 gm/60ml	p				
SPS- sodium polystyrene sulfonate rectal susp 30 gm/120ml	P				
SYPRINE- trientine hcl cap 250 mg	NP	•			
tacrolimus cap 0.5 mg, 1 mg, 5 mg (Prograf)	p				
THALOMID- thalidomide cap 50 mg, 100 mg	P	•	•		•
trientine hcl cap 250 mg (Syprine)	np	•			
TRIENTINE HYDROCHLORIDE- trientine hcl cap 500 mg	NP	•			
VELTASSA- patiomer sorbitex calcium for susp packet 1 gm (base eq), 8.4 gm (base eq), 16.8 gm (base eq), 25.2 gm (base eq)	P				
VIJOICE- alpelisib (pros) oral granules packet 50 mg	NP	•	•		•
VIJOICE- alpelisib (pros) pak 250 mg daily dose (200 mg & 50 mg tabs)	NP	•	•		•
VIJOICE- alpelisib (pros) tab therapy pack 50 mg daily dose, 125 mg daily dose	NP	•	•		•

Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits
VYVGART HYTRULO- efgartigimod alf-hyalur-qvfc pref syr 1000-10000 mg-unit/5ml	NP	•	•		•
ZOKINVY- lonafarnib cap 50 mg, 75 mg	P	•	•		•
ZORTRESS- everolimus tab 0.25 mg, 0.5 mg, 0.75 mg, 1 mg	NP				

p = Preferred Generics
np = Non-preferred Generics

P = Preferred Brands
NP = Non-preferred Brands

INDEX

A

abacavir sulfate-lamivudine tab 600-300 mg (Epzicom).....	4	ACULAR.....	104
abacavir sulfate soln 20 mg/ml (base equiv) (Ziagen).....	4	ACULAR LS.....	104
abacavir sulfate tab 300 mg (base equiv) (Ziagen).....	4	ACUVAIL.....	104
ABILIFY.....	66	acyclovir cap 200 mg.....	4
ABILIFY MYCITE MAINTENANC.....	66	acyclovir cream 5% (Zovirax).....	110
ABILIFY MYCITE STARTER KI.....	67	acyclovir oint 5% (Zovirax).....	110
abiraterone acetate tab 250 mg, 500 mg (Zytiga).....	13	acyclovir susp 200 mg/5ml (Zovirax).....	4
ABRILADA.....	80	acyclovir tab 400 mg, 800 mg.....	4
ABRILADA 1-PEN KIT.....	80	ACZONE.....	110
ABRILADA 2-PEN KIT.....	80	ADACEL.....	12
ABRYSVO.....	10	ADALIMUMAB-AACF (2 PEN).....	80
ABSORICA.....	110	ADALIMUMAB-AACF STARTER P.....	80
ABSORICA LD.....	110	ADALIMUMAB-AACF (2 SYRING).....	80
acamprosate calcium tab delayed release 333 mg.....	73	ADALIMUMAB-AATY CD/UC/HS.....	80
ACANYA.....	110	ADALIMUMAB-AATY 1-PEN KIT.....	80
acarbose tab 25 mg, 50 mg, 100 mg (Precose).....	25	ADALIMUMAB-AATY 2-PEN KIT.....	80
ACCOLATE.....	50	ADALIMUMAB-AATY 2-SYRINGE.....	80
ACCRUFER.....	98	ADALIMUMAB-ADAZ.....	80
ACCU-CHEK AVIVA PLUS.....	120	ADALIMUMAB-ADB.....	80
ACCU-CHEK COMPACT STRIPS.....	120	ADALIMUMAB-ADB STARTER P.....	80
ACCU-CHEK COMPACT TEST DR.....	120	ADALIMUMAB-FKJP.....	80
ACCU-CHEK GUIDE.....	120	ADALIMUMAB-RYVK.....	80
ACCU-CHEK GUIDE TEST STRI.....	120	ADALIMUMAB-RYVK (1 PEN).....	81
ACCU-CHEK SMARTVIEW STRIP.....	120	ADALIMUMAB-RYVK (2 PEN).....	81
ACCUPRIL.....	40	ADAPALENE.....	110
ACCURETIC.....	40	adapalene-benzoyl peroxide gel 0.1-2.5% (Epiduo).....	111
ACCUTREND GLUCOSE.....	120	adapalene-benzoyl peroxide gel 0.3-2.5% (Epiduo forte).....	111
ACE AEROSOL CLOUD ENHANCE.....	126	adapalene cream 0.1% (Differin).....	110
acebutolol hcl cap 200 mg, 400 mg.....	37	adapalene gel 0.1%.....	110
ACETAMINOPHEN/CAFFEINE/DI.....	77	adapalene gel 0.3% (Differin).....	110
ACETAMINOPHEN/CODEINE.....	77	ADBRY.....	111
acetaminophen w/ codeine tab 300-30 mg, 300-60 mg.....	77	ADCIRCA.....	47
acetaminophen w/ codeine tab 300-15 mg (Tylenol/codeine).....	77	ADDERALL.....	70
acetazolamide cap er 12hr 500 mg.....	44	ADDERALL XR.....	70
acetazolamide tab 125 mg, 250 mg.....	44	ADDYI.....	73
acetic acid otic soln 2%.....	108	adefovir dipivoxil tab 10 mg (Hepsera).....	4
acetylcysteine inhal soln 10%, 20%.....	50	ADEMPAS.....	47
ACIPHEX.....	55	ADLARITY.....	73
acitretin cap 10 mg, 17.5 mg, 25 mg.....	110	ADMELOG.....	28
ACTEMRA.....	80	ADMELOG SOLOSTAR.....	28
ACTEMRA ACTPEN.....	80	ADTHYZA.....	31
ACTHAR.....	32	ADVAIR DISKUS.....	51
ACTHIB.....	10	ADVAIR HFA.....	51
ACTIMMUNE.....	13	ADVANCE INTUITION TEST ST.....	120
ACTIVELLA.....	22	ADVANCE MICRO-DRAW TEST S.....	120
ACTONEL.....	32	ADVATE.....	101
ACTOPLUS MET.....	25	ADVIN COVID-19 ANTIGEN HO.....	120
ACTOS.....	25	ADVOCATE REDI-CODE.....	120
		ADVOCATE REDI-CODE+ TEST.....	120
		ADVOCATE TEST STRIPS.....	121
		ADYNOVATE.....	101
		ADZENYS XR-ODT.....	70
		AEROCHAMBER2GO ANTI-STATI.....	126
		AEROCHAMBER HOLDING CHAMB.....	126
		AEROCHAMBER MINI AEROSOL.....	126

AEROCHAMBER MV.....	126	alose tron hcl tab 0.5 mg (base equiv), 1 mg (base equiv) (Lotronex).....	58
AEROCHAMBER PLUS FLOW VU.....	126	ALPHAGAN P.....	104
AEROCHAMBER PLUS FLOW-VU/.....	126	ALPHANATE.....	101
AEROCHAMBER Z-STAT PLUS/F.....	126	ALPHANINE SD.....	101
AEROCHAMBER Z-STAT PLUS/L.....	126	ALPRAZOLAM INTENSOL.....	63
AEROCHAMBER Z-STAT PLUS/M.....	126	alprazolam orally disintegrating tab 0.25 mg, 0.5 mg, 1 mg, 2 mg.....	63
AEROCHAMBER Z-STAT PLUS/S.....	126	alprazolam tab er 24hr 0.5 mg, 1 mg, 2 mg, 3 mg (Xanax xr).....	63
AEROCHAMBER Z-STAT PLUS V.....	126	alprazolam tab 0.25 mg, 0.5 mg, 1 mg, 2 mg (Xanax).....	63
AEROVENT PLUS HOLDING CHA.....	126	ALPROLIX.....	101
AFINITOR.....	13	ALREX.....	104
AFINITOR DISPERZ.....	13	ALTOPREV.....	45
AFLURIA 2025-2026.....	10	ALTRENO.....	111
AFREZZA.....	29	ALTRIXA OB.....	94
AFSTYLA.....	101	ALTUVIIIO.....	101
AGAMATRIX AMP NO CODE TES.....	121	ALUNBRIG.....	13
AGAMATRIX JAZZ TEST STRIP.....	121	ALVAIZ.....	98
AGAMATRIX PRESTO TEST STR.....	121	ALVESCO.....	51
AGAMREE.....	20	ALYFTREK.....	54
AGRYLIN.....	101	amantadine hcl cap 100 mg.....	91
AIMOVI G.....	84	amantadine hcl soln 50 mg/5ml.....	91
AIRSUPRA.....	51	amantadine hcl tab 100 mg.....	91
AJOVY.....	84	AMBIEN.....	69
AKEEGA.....	13	AMBIEN CR.....	69
AKLIEF.....	111	ambrisentan tab 5 mg, 10 mg (Letairis).....	47
AKYNZEO.....	57	AMCINONIDE.....	111
ALA-SCALP.....	111	AMILORIDE/HYDROCHLOROTHIA.....	44
albendazole tab 200 mg.....	9	amiloride hcl tab 5 mg.....	44
ALBUTEROL SULFATE HFA.....	51	aminocaproic acid oral soln 0.25 gm/ml (Amicar).....	101
albuterol sulfate inhal aero 108 mcg/act (90mcg base equiv) (Proventil hfa).....	51	aminocaproic acid tab 500 mg, 1000 mg (Amicar).....	101
albuterol sulfate soln nebu 0.083% (2.5 mg/3ml), 0.5% (5 mg/ml), 0.63 mg/3ml (base equiv), 1.25 mg/3ml (base equiv).....	51	amiodarone hcl tab 400 mg.....	40
albuterol sulfate syrup 2 mg/5ml.....	51	amiodarone hcl tab 100 mg, 200 mg.....	40
albuterol sulfate tab 2 mg, 4 mg.....	51	AMITIZA.....	58
ALCLOMETASONE DIPROPIONAT.....	111	amitriptyline hcl tab 10 mg, 25 mg, 50 mg, 75 mg, 100 mg, 150 mg.....	64
alclometasone dipropionate cream 0.05%.....	111	AMJEVITA.....	81
ALDACTONE.....	44	amlodipine besylate-atorvastatin calcium tab 2.5-10 mg, 2.5-20 mg, 2.5-40 mg.....	47
ALECENSA.....	13	amlodipine besylate-atorvastatin calcium tab 5-10 mg, 5-20 mg, 5-40 mg, 5-80 mg, 10-10 mg, 10-20 mg, 10-40 mg, 10-80 mg (Caduet).....	47
alendronate sodium oral soln 70 mg/75ml.....	32	amlodipine besylate-benazepril hcl cap 2.5-10 mg, 5-40 mg.....	40
alendronate sodium tab 10 mg, 35 mg.....	32	amlodipine besylate-benazepril hcl cap 5-10 mg, 5-20 mg, 10-20 mg, 10-40 mg (Lotrel).....	40
alendronate sodium tab 70 mg (Fosamax).....	32	amlodipine besylate-olmesartan medoxomil tab 5-20 mg, 5-40 mg, 10-20 mg, 10-40 mg (Azor).....	40
alfuzosin hcl tab er 24hr 10 mg (Uroxatral).....	62	amlodipine besylate tab 2.5 mg (base equivalent), 5 mg (base equivalent), 10 mg (base equivalent) (Norvasc).....	38
ALHEMO.....	101	amlodipine besylate-valsartan tab 5-160 mg, 5-320 mg, 10-160 mg, 10-320 mg (Exforge).....	40
aliskiren fumarate tab 150 mg (base equivalent), 300 mg (base equivalent) (Tekturna).....	40		
ALKINDI SPRINKLE.....	20		
allopurinol tab 200 mg.....	86		
allopurinol tab 100 mg, 300 mg (Zyloprim).....	86		
ALLZITAL.....	76		
almotriptan malate tab 6.25 mg, 12.5 mg.....	84		
ALOCRI L.....	104		
ALOGLIPTIN.....	25		
ALOGLIPTIN/METFORMIN HCL.....	26		
ALOGLIPTIN/METFORMIN HYDR.....	26		
ALOGLIPTIN/PIOGLITAZONE.....	26		
ALORA.....	22		

amlodipine-valsartan-hydrochlorothiazide tab 5-160-12.5 mg, 5-160-25 mg, 10-160-12.5 mg, 10-160-25 mg, 10-320-25 mg (Exforge hct)	40	APTIVUS.....	5
AMOXICILLIN.....	1	AQNEURSA.....	73
AMOXICILLIN/CLAVULANATE P.....	1	ARAKODA.....	8
amoxicillin & k clavulanate for susp 200-28.5 mg/5ml, 250-62.5 mg/5ml, 400-57 mg/5ml	1	ARANESP ALBUMIN FREE.....	98
amoxicillin & k clavulanate for susp 600-42.9 mg/5ml (Augmentin es-600)	1	ARAVA.....	81
amoxicillin & k clavulanate tab 250-125 mg, 875-125 mg	1	ARAZLO.....	111
amoxicillin & k clavulanate tab 500-125 mg (Augmentin)	1	ARBLI.....	40
amoxicillin (trihydrate) cap 250 mg, 500 mg	1	ARCALYST.....	81
amoxicillin (trihydrate) for susp 125 mg/5ml, 200 mg/5ml, 250 mg/5ml, 400 mg/5ml	1	AREXVY.....	10
amoxicillin (trihydrate) tab 500 mg, 875 mg	1	arformoterol tartrate soln nebu 15 mcg/2ml (base equiv) (Brovana)	51
amphetamine-dextroamphetamine 3-bead cap er 24hr 12.5 mg, 25 mg, 37.5 mg, 50 mg (Mydayis)	70	ARICEPT.....	73
amphetamine-dextroamphetamine cap er 24hr 5 mg, 10 mg, 15 mg, 20 mg, 25 mg, 30 mg (Adderall xr)	70	ARIKAYCE.....	3
amphetamine-dextroamphetamine tab 5 mg, 7.5 mg, 10 mg, 12.5 mg, 15 mg, 20 mg, 30 mg (Adderall)	70	ARIMIDEX.....	14
AMPHETAMINE ER ODT.....	70	aripiprazole orally disintegrating tab 10 mg, 15 mg	67
amphetamine sulfate tab 5 mg, 10 mg (Evekeo)	70	aripiprazole oral solution 1 mg/ml	67
ampicillin cap 500 mg	1	aripiprazole tab 2 mg, 5 mg, 10 mg, 15 mg, 20 mg, 30 mg (Abilify)	67
AMPYRA.....	73	ARIXTRA.....	100
AMRIX.....	92	armodafinil tab 50 mg, 150 mg, 200 mg, 250 mg (Nuvigil)	70
AMZEEQ.....	111	ARMOUR THYROID.....	31
ANAFRANIL.....	64	ARNUITY ELLIPTA.....	51
anagrelide hcl cap 1 mg	101	AROMASIN.....	14
anagrelide hcl cap 0.5 mg (Agrylin)	101	ARTHROTEC 50.....	81
ANALPRAM HC.....	110	ARTHROTEC 75.....	81
anastrozole tab 1 mg (Arimidex)	14	asenapine maleate sl tab 2.5 mg (base equiv), 5 mg (base equiv), 10 mg (base equiv) (Saphris)	67
ANCOBON.....	4	ASMANEX HFA.....	51
ANDROGEL PUMP.....	21	ASMANEX TWISTHALER 120 ME.....	51
ANGELIQ.....	22	ASMANEX TWISTHALER 30 MET.....	51
ANNOVERA.....	23	ASMANEX TWISTHALER 60 MET.....	51
ANORO ELLIPTA.....	51	aspirin chew tab 81 mg	76
ANUSOL-HC.....	110	aspirin-dipyridamole cap er 12hr 25-200 mg	101
ANZEMET.....	57	aspirin tab delayed release 81 mg	76
APIDRA.....	28	ASPRUZYO SPRINKLE.....	37
APIDRA SOLOSTAR.....	29	ASSURE II.....	121
ALENZIN.....	64	ASSURE II CHECK STRIP.....	121
APOKYN.....	91	ASSURE II TEST STRIPS.....	121
apomorphine hcl soln cartridge 30 mg/3ml (Apokyn)	91	ASSURE PLATINUM TEST STRI.....	121
APRACLONIDINE.....	104	ASSURE PRISM MULTI TEST S.....	121
aprepitant capsule 40 mg, 125 mg	57	ASSURE PRO TEST STRIPS.....	121
aprepitant capsule 80 mg (Emend)	57	ASSURE 3 TEST STRIPS.....	121
aprepitant capsule therapy pack 80 & 125 mg (Emend tripack)	57	ASSURE 4 TEST STRIPS.....	121
APRETUDE.....	5	ASTAGRAF XL.....	129
APRISO.....	58	ATABEX EC.....	94
APTENSIO XR.....	70	ATABEX OB.....	94
APTIOM.....	86	ATACAND.....	40
		ATACAND HCT.....	40
		atazanavir sulfate cap 150 mg (base equiv)	5
		atazanavir sulfate cap 200 mg (base equiv), 300 mg (base equiv) (Reyataz)	5
		ATELVIA.....	32
		atenolol & chlorthalidone tab 50-25 mg (Tenoretic 50)	40

atenolol & chlorthalidone tab 100-25 mg (Tenoretic 100).....	41	AZSTARYS	70
atenolol tab 25 mg, 50 mg, 100 mg (Tenormin)	37	AZULFIDINE	58
ATIVAN	63	AZULFIDINE EN-TABS	58
AT LAST TEST STRIPS.....	121	B	
atomoxetine hcl cap 10 mg (base equiv), 18 mg (base equiv), 25 mg (base equiv), 40 mg (base equiv), 60 mg (base equiv), 80 mg (base equiv), 100 mg (base equiv) (Strattera).....	70	BACITRACIN	104
ATORVALIQ	45	bacitracin-polymyxin b ophth oint	104
atorvastatin calcium tab 10 mg (base equivalent), 20 mg (base equivalent), 40 mg (base equivalent), 80 mg (base equivalent) (Lipitor)	45	bacitracin-polymyxin-neomycin-hc ophth oint 1%.....	105
atovaquone-proguanil hcl tab 62.5-25 mg, 250-100 mg (Malarone)	8	BACLOFEN.....	92
atovaquone susp 750 mg/5ml (Mepron)	9	baclofen oral soln 10 mg/5ml (Ozobax ds).....	92
ATRALIN	111	baclofen susp 25 mg/5ml (Fleqsuvy)	92
ATROPINE SULFATE	104	baclofen tab 5 mg, 15 mg	92
atropine sulfate ophth soln 1% (Atropine sulfate)	104	baclofen tab 10 mg, 20 mg	92
ATROVENT HFA.....	51	BACTRIM	9
ATTRUBY	47	BACTRIM DS.....	9
AUBAGIO.....	73	BAFIERTAM.....	73
AUGMENTIN	1	BALCOLTRA.....	23
AUGMENTIN ES-600.....	1	balsalazide disodium cap 750 mg (Colazal).....	58
AUGTYRO	14	BALVERSA	14
AURYXIA	58	BANZEL.....	86
AUSTEDO	73	BAQSIMI ONE PACK.....	26
AUSTEDO XR	73	BAQSIMI TWO PACK	26
AUSTEDO XR PATIENT TITRAT	73	BARACLUDGE.....	5
AUVELITY.....	64	BASAGLAR KWIKPEN.....	30
AUVI-Q.....	45	BASAGLAR TEMPO PEN	30
AVALIDE.....	41	BAXDELA.....	3
avanafil tab 50 mg, 100 mg, 200 mg (Stendra).....	49	BELBUCA.....	77
AVAPRO	41	BELSOMRA	69
AVERI.....	23	benazepril & hydrochlorothiazide tab 5-6.25 mg.....	41
AVMAPKI FAKZYNJA CO-PACK.....	14	benazepril & hydrochlorothiazide tab 10-12.5 mg, 20-12.5 mg, 20-25 mg (Lotensin hct).....	41
AVODART	62	benazepril hcl tab 5 mg.....	41
AVONEX	73	benazepril hcl tab 10 mg, 20 mg, 40 mg (Lotensin).....	41
AVONEX PEN.....	73	BENEFIX	101
AYVAKIT	14	BENICAR.....	41
AZASITE	104	BENICAR HCT.....	41
azathioprine tab 75 mg, 100 mg.....	129	BENLYSTA	130
azathioprine tab 50 mg (Imuran)	129	BENZAMYCIN	111
azelaic acid gel 15% (Finacea).....	111	BENZNIDAZOLE.....	9
azelastine hcl-fluticasone prop nasal spray 137-50 mcg/act (Dymista)	50	benzonatate cap 100 mg, 200 mg	50
azelastine hcl nasal spray 0.1% (137 mcg/spray).....	50	benzoyl peroxide-erythromycin gel 5-3% (Benzamycin).....	111
azelastine hcl ophth soln 0.05%.....	104	benztropine mesylate tab 0.5 mg, 1 mg, 2 mg	91
AZELEX	111	bepotastine besilate ophth soln 1.5% (Bepreve)	105
AZESCO	94	BEPREVE	105
AZILECT	91	BERINERT	101
azithromycin for susp 100 mg/5ml, 200 mg/5ml (Zithromax)	2	BESIVANCE.....	105
azithromycin tab 600 mg.....	2	BESREMI	14
azithromycin tab 250 mg, 500 mg (Zithromax)	2	betaine powder for oral solution (Cystadane)	32
AZOPT	104	BETAMETHASONE DIPROPIONAT	111
AZOR.....	41	betamethasone dipropionate augmented cream 0.05%	111
		betamethasone dipropionate augmented lotion 0.05%	111
		betamethasone dipropionate augmented oint 0.05% (Diprolene).....	111

betamethasone dipropionate cream 0.05%.....	111	BREO ELLIPTA.....	51
betamethasone dipropionate lotion 0.05%.....	111	BREXAFEMME.....	4
betamethasone dipropionate oint 0.05%.....	111	BREZTRI AEROSPHERE.....	51
BETAMETHASONE VALERATE.....	111	BRILINTA.....	101
betamethasone valerate aerosol foam 0.12% (Luxiq).....	111	brimonidine tartrate gel 0.33% (base equivalent) (Mirvaso).....	111
betamethasone valerate cream 0.1% (base equivalent).....	111	brimonidine tartrate ophth soln 0.2%.....	105
betamethasone valerate oint 0.1% (base equivalent).....	111	brimonidine tartrate ophth soln 0.1% (Alphagan p).....	105
BETAPACE.....	37	brimonidine tartrate ophth soln 0.15% (Alphagan p).....	105
BETAPACE AF.....	37	brimonidine tartrate-timolol maleate ophth soln 0.2-0.5% (Combigan).....	105
BETASERON.....	73	brinzolamide ophth susp 1% (Azopt).....	105
BETAXOLOL HCL.....	105	BRIVIACT.....	86
betaxolol hcl tab 10 mg, 20 mg.....	37	bromfenac sodium ophth soln 0.075% (base equivalent) (Bromsite).....	105
bethanechol chloride tab 5 mg, 10 mg, 25 mg, 50 mg.....	60	bromfenac sodium ophth soln 0.07% (base equivalent) (Prolensa).....	105
BETHKIS.....	3	bromfenac sodium ophth soln 0.09% (base equiv) (once-daily).....	105
BETIMOL.....	105	bromocriptine mesylate cap 5 mg (base equivalent) (Parlodel).....	91
BETOPTIC-S.....	105	bromocriptine mesylate tab 2.5 mg (base equivalent) (Parlodel).....	91
BEVESPI AEROSPHERE.....	51	BROMSITE.....	105
BEXAGLIFLOZIN.....	26	BRONCHITOL.....	54
bexarotene cap 75 mg (Targretin).....	14	BRONCHITOL TOLERANCE TEST.....	54
bexarotene gel 1% (Targretin).....	111	BROVANA.....	51
BEXSERO.....	10	BRUKINSA.....	14
BEYAZ.....	23	BRYHALI.....	111
bicalutamide tab 50 mg (Casodex).....	14	BUCAPSOL.....	63
BIDIL.....	47	budesonide delayed release particles cap 3 mg.....	20
BIJUVA.....	22	budesonide inhalation susp 0.25 mg/2ml, 0.5 mg/2ml, 1 mg/2ml (Pulmicort).....	51
BIKTARVY.....	5	budesonide rectal foam 2 mg/act (Uceris).....	110
BILTRICIDE.....	9	budesonide tab er 24hr 9 mg (Uceris).....	20
bimatoprost ophth soln 0.03%.....	105	bumetanide tab 1 mg, 2 mg.....	44
BIMZELX.....	111	bumetanide tab 0.5 mg (Bumex).....	44
BINAXNOW COVID-19 AG CARD.....	121	BUMEX.....	44
BINOSTO.....	32	BUPHENYL.....	32
BIOTEL CARE BLOOD GLUCOSE.....	121	buprenorphine hcl-naloxone hcl sl film 2-0.5 mg (base equiv), 4-1 mg (base equiv), 8-2 mg (base equiv), 12-3 mg (base equiv) (Suboxone).....	77
bismuth subcit-metronidazole-tetracycline cap 140-125-125 mg (Pylera).....	55	buprenorphine hcl-naloxone hcl sl tab 2-0.5 mg (base equiv), 8-2 mg (base equiv).....	77
bisoprolol & hydrochlorothiazide tab 2.5-6.25 mg, 5-6.25 mg, 10-6.25 mg (Ziac).....	41	buprenorphine hcl sl tab 2 mg (base equiv), 8 mg (base equiv).....	77
BISOPROLOL FUMARATE.....	37	buprenorphine td patch weekly 5 mcg/hr, 7.5 mcg/hr, 10 mcg/hr, 15 mcg/hr, 20 mcg/hr (Butrans).....	77
bisoprolol fumarate tab 5 mg, 10 mg.....	37	bupropion hcl (smoking deterrent) tab er 12hr 150 mg.....	73
BLOOD GLUCOSE TEST STRIPS.....	121	bupropion hcl tab er 12hr 100 mg, 150 mg, 200 mg (Wellbutrin sr).....	64
BLULINK GLUCOSE TEST STRI.....	121	bupropion hcl tab er 24hr 150 mg, 300 mg (Wellbutrin xl).....	64
BONJESTA.....	57	bupropion hcl tab 75 mg, 100 mg.....	64
BONSITY.....	32		
BOOSTRIX.....	12		
bosentan tab for oral susp 32 mg (Tracleer).....	47		
bosentan tab 62.5 mg, 125 mg (Tracleer).....	47		
BOSULIF.....	14		
BRAFTOVI.....	14		
BREATHE COMFORT ANTI-STAT.....	126		
BREATHE EASE/LARGE MASK.....	126		
BREATHE EASE/MEDIUM MASK.....	126		
BREATHE EASE/SMALL MASK.....	126		
BREATHERITE VALVED MDI CH.....	126		
BRENZAVVY.....	26		

BUPROPION HYDROCHLORIDE E.....	64	candesartan cilexetil tab 4 mg, 8 mg, 16 mg, 32 mg	
bupirone hcl tab 7.5 mg.....	63	(Atacand).....	41
bupirone hcl tab 5 mg, 10 mg, 15 mg, 30 mg.....	63	capecitabine tab 150 mg, 500 mg (Xeloda).....	14
BUTALBITAL/ACETAMINOPHEN/.....	77	CAPLYTA.....	67
butalbit-al-acetaminophen-caffeine cap 50-325-40		CAPRELSA.....	14
mg.....	76	CAPTOPRIL/HYDROCHLOROTHIA.....	41
butalbit-al-acetaminophen-caffeine cap 50-300-40 mg		captopril tab 12.5 mg, 25 mg, 50 mg, 100 mg.....	41
(Fioricet).....	76	CAPVAXIVE.....	10
butalbit-al-acetaminophen-caffeine tab 50-325-40 mg		CARAFATE.....	55
(Esgic).....	76	CARBAGLU.....	32
butalbit-al-acetaminophen-caff w/ cod cap		CARBAMAZEPINE.....	86
50-325-40-30 mg.....	77	carbamazepine cap er 12hr 100 mg, 200 mg, 300 mg	
butalbit-al-acetaminophen-caff w/ cod cap		(Carbatrol).....	86
50-300-40-30 mg (Fioricet/codeine).....	77	carbamazepine chew tab 100 mg.....	86
butalbit-al-acetaminophen cap 50-300 mg (Butalbit-al/		carbamazepine susp 100 mg/5ml (Tegretol).....	86
acetamino).....	76	carbamazepine tab er 12hr 100 mg, 200 mg, 400 mg	
butalbit-al-acetaminophen tab 50-300 mg.....	76	(Tegretol-xr).....	86
butalbit-al-acetaminophen tab 50-325 mg.....	76	carbamazepine tab 200 mg (Tegretol).....	86
butalbit-al-aspirin-caffeine cap 50-325-40 mg.....	77	CARBATROL.....	87
butalbit-al-aspirin-caff w/ codeine cap 50-325-40-30		carbidopa & levodopa orally disintegrating tab 10-100	
mg.....	77	mg, 25-100 mg, 25-250 mg.....	91
butorphanol tartrate nasal soln 10 mg/ml.....	77	carbidopa & levodopa tab er 25-100 mg, 50-200	
BUTRANS.....	77	mg.....	91
BYLVAY.....	58	carbidopa & levodopa tab 25-250 mg.....	91
BYLVAY (PELLETS).....	58	carbidopa & levodopa tab 10-100 mg, 25-100 mg	
BYSTOLIC.....	37	(Sinemet).....	91
C		carbidopa-levodopa-entacapone tabs 12.5-50-200 mg	
cabergoline tab 0.5 mg.....	32	(Stalevo 50).....	91
CABLIVI.....	102	carbidopa-levodopa-entacapone tabs 18.75-75-200	
CABOMETYX.....	14	mg (Stalevo 75).....	91
CABTREEO.....	111	carbidopa-levodopa-entacapone tabs 25-100-200 mg	
CADUET.....	47	(Stalevo 100).....	91
caffeine citrate oral soln 60 mg/3ml (10 mg/ml base		carbidopa-levodopa-entacapone tabs 31.25-125-200	
equiv).....	70	mg (Stalevo 125).....	91
CALCIPOTRIENE.....	112	carbidopa-levodopa-entacapone tabs 37.5-150-200	
calcipotriene-betamethasone dipropionate oint		mg (Stalevo 150).....	91
0.005-0.064% (Taclonex).....	112	carbidopa-levodopa-entacapone tabs 50-200-200 mg	
calcipotriene-betamethasone dipropionate susp		(Stalevo 200).....	91
0.005-0.064% (Taclonex).....	112	carbidopa tab 25 mg (Lodosyn).....	91
calcipotriene cream 0.005% (Dovonex).....	112	CARBINOXAMINE MALEATE.....	49
calcipotriene oint 0.005%.....	112	CARBINOXAMINE MALEATE ER.....	49
calcitonin (salmon) inj 200 unit/ml (Miacalcin).....	32	carbinoxamine maleate tab 4 mg.....	49
calcitonin (salmon) nasal soln 200 unit/act.....	32	carbinoxamine maleate tab 6 mg.....	49
CALCITRIOL.....	112	carbonyl iron susp 15 mg/1.25ml (elemental iron).....	98
calcitriol cap 0.25 mcg, 0.5 mcg (Rocaltrol).....	32	CARBZAH.....	49
calcitriol oral soln 1 mcg/ml (Rocaltrol).....	32	CARDIZEM.....	39
calcium acetate (phosphate binder) cap 667 mg (169		CARDIZEM CD.....	39
mg ca).....	58	CARDIZEM LA.....	39
calcium acetate (phosphate binder) tab 667 mg.....	58	CARDURA.....	41
CALQUENCE.....	14	CARDURA XL.....	62
CAMBIA.....	84	CARESENS N BLOOD GLUCOSE.....	121
CAMCEVI.....	14	CARESENS S BLOOD GLUCOSE.....	121
CAMZYOS.....	47	CARESTART COVID-19 ANTIGE.....	121
CANASA.....	58	CARETOUCH BLOOD GLUCOSE T.....	121
candesartan cilexetil-hydrochlorothiazide tab 16-12.5		carglumic acid soluble tab 200 mg (Carbaglu).....	32
mg, 32-12.5 mg, 32-25 mg (Atacand hct).....	41	CARNITOR.....	32
		CARNITOR SF.....	32

CAROSPIR.....	44	chlorpromazine hcl tab 10 mg, 25 mg, 50 mg, 100 mg, 200 mg.....	67
CARTEOLOL HCL.....	105	CHLORPROMAZINE HYDROCHLOR.....	67
carvedilol phosphate cap er 24hr 10 mg, 20 mg, 40 mg, 80 mg (Coreg cr).....	37	chlorthalidone tab 25 mg, 50 mg.....	44
carvedilol tab 3.125 mg, 6.25 mg, 12.5 mg, 25 mg (Coreg).....	37	chlorzoxazone tab 500 mg.....	93
CASODEX.....	14	chlorzoxazone tab 250 mg, 375 mg, 750 mg.....	93
CATAPRES-TTS-1.....	41	CHOLBAM.....	58
CATAPRES-TTS-2.....	41	cholestyramine light powder 4 gm/dose (Questran light).....	45
CATAPRES-TTS-3.....	41	cholestyramine light powder packets 4 gm.....	45
CAVERJECT.....	49	cholestyramine powder 4 gm/dose (Questran).....	45
CAVERJECT IMPULSE.....	49	cholestyramine powder packets 4 gm (Questran).....	45
CAYA.....	126	choline fenofibrate cap dr 45 mg (fenofibric acid equiv), 135 mg (fenofibric acid equiv) (Trilipix).....	45
CAYSTON.....	9	CHORIONIC GONADOTROPIN.....	33
CEFACTOR.....	1	CIALIS.....	49
CEFACTOR ER.....	1	CIBINQO.....	112
CEFADROXIL.....	1	ciclopirox gel 0.77%.....	112
cefadroxil cap 500 mg.....	1	ciclopirox olamine cream 0.77% (base equiv) (Loprox).....	112
cefadroxil for susp 250 mg/5ml, 500 mg/5ml.....	1	ciclopirox olamine susp 0.77% (base equiv).....	112
cefdinir cap 300 mg.....	1	ciclopirox shampoo 1% (Loprox shampoo).....	112
cefdinir for susp 125 mg/5ml, 250 mg/5ml.....	1	ciclopirox solution 8% (Penlac Nail Lacquer).....	112
cefixime cap 400 mg (Suprax).....	1	cilostazol tab 50 mg, 100 mg.....	102
cefixime for susp 100 mg/5ml.....	1	CILOXAN.....	105
cefixime for susp 200 mg/5ml (Suprax).....	1	CIMDUO.....	5
CEFPODOXIME PROXETIL.....	1	cimetidine hcl soln 300 mg/5ml.....	55
cefpodoxime proxetil tab 100 mg, 200 mg.....	1	cimetidine tab 200 mg.....	55
cefprozil for susp 125 mg/5ml, 250 mg/5ml.....	1	cimetidine tab 300 mg, 400 mg, 800 mg.....	55
cefprozil tab 250 mg, 500 mg.....	1	CIMZIA.....	58
cefuroxime axetil tab 250 mg, 500 mg.....	1	CIMZIA STARTER KIT.....	58
CELEBREX.....	81	cinacalcet hcl tab 30 mg (base equiv), 60 mg (base equiv), 90 mg (base equiv) (Sensipar).....	33
celecoxib cap 50 mg, 100 mg, 200 mg, 400 mg (Celebrex).....	81	CIPRO.....	3
CELEXA.....	64	CIPROFLOXACIN/FLUOCINOLON.....	109
CELLCEPT.....	130	ciprofloxacin-dexamethasone otic susp 0.3-0.1% (Ciprodex).....	108
CELLTRION DIATRUST COVID-.....	121	ciprofloxacin hcl ophth soln 0.3% (base equivalent).....	105
CELONTIN.....	87	ciprofloxacin hcl otic soln 0.2% (base equivalent) (Cetraxal).....	108
cephalexin cap 750 mg.....	1	ciprofloxacin hcl tab 750 mg (base equiv).....	3
cephalexin cap 250 mg, 500 mg.....	1	ciprofloxacin hcl tab 250 mg (base equiv), 500 mg (base equiv) (Cipro).....	3
cephalexin for susp 125 mg/5ml, 250 mg/5ml.....	1	CIPRO HC.....	108
cephalexin tab 250 mg, 500 mg.....	1	CITALOPRAM HYDROBROMIDE.....	64
CEQUA.....	105	citalopram hydrobromide oral soln 10 mg/5ml.....	64
CERDELGA.....	98	citalopram hydrobromide tab 10 mg (base equiv), 20 mg (base equiv), 40 mg (base equiv) (Celexa).....	64
CERVIDIL.....	32	CITRANATAL ASSURE.....	94
cetirizine hcl oral soln 1 mg/ml (5 mg/5ml).....	49	CITRANATAL 90 DHA.....	94
CETRAXAL.....	108	CLARINEX.....	49
cetorelix acetate for inj kit 0.25 mg (Cetrotide).....	32	CLARINEX-D 12 HOUR.....	50
CETROTIDE.....	32	CLARITHROMYCIN.....	2
cevimeline hcl cap 30 mg (Evoxac).....	109	clarithromycin tab er 24hr 500 mg.....	2
CHANTIX CONTINUING MONTH.....	73	clarithromycin tab 250 mg, 500 mg.....	2
CHANTIX STARTING MONTH PA.....	73	CLEARDETECT COVID-19 ANTI.....	121
CHEMET.....	120		
CHENODAL.....	58		
CHLORDIAZEPOXIDE/AMITRIPT.....	73		
chlordiazepoxide hcl cap 5 mg, 10 mg, 25 mg.....	63		
chlorhexidine gluconate soln 0.12% (Peridex).....	109		
CHLOROQUINE PHOSPHATE.....	8		
chloroquine phosphate tab 500 mg.....	8		

CLEMASTINE FUMARATE.....	49	CLOBEX.....	112
CLEMSZA.....	49	clocortolone pivalate cream 0.1% (Cloderm).....	113
CLENPIQ.....	54	CLODERM.....	113
CLEOCIN.....	9	clomiphene citrate tab 50 mg.....	33
CLEOCIN PEDIATRIC GRANULE.....	9	clomipramine hcl cap 25 mg, 50 mg, 75 mg	
CLEOCIN-T.....	112	(Anafranil).....	64
CLEVER CHEK AUTO-CODE TES.....	121	clonazepam orally disintegrating tab 0.125 mg, 0.25	
CLEVER CHEK AUTO-CODE VOI.....	121	mg, 0.5 mg, 1 mg, 2 mg.....	87
CLEVER CHEK TEST STRIPS.....	121	clonazepam tab 0.5 mg, 1 mg, 2 mg (Klonopin).....	87
CLEVER CHOICE ANTI-STATIC.....	126	clonidine hcl tab er 12hr 0.1 mg (Kapvay).....	70
CLEVER CHOICE AUTO-CODE P.....	121	clonidine hcl tab 0.1 mg, 0.2 mg, 0.3 mg.....	41
CLEVER CHOICE MICRO TEST.....	121	CLONIDINE HYDROCHLORIDE E.....	41
CLEVER CHOICE NO CODING T.....	121	clonidine td patch weekly 0.1 mg/24hr (Catapres-	
CLEVER CHOICE TALK NO COD.....	121	tts-1).....	41
CLIMARA.....	22	clonidine td patch weekly 0.2 mg/24hr (Catapres-	
CLIMARA PRO.....	22	tts-2).....	41
CLINDAGEL.....	112	clonidine td patch weekly 0.3 mg/24hr (Catapres-	
clindamycin hcl cap 75 mg, 150 mg, 300 mg		tts-3).....	41
(Cleocin).....	9	clodigogrel bisulfate tab 75 mg (base equiv)	
clindamycin palmitate hcl for soln 75 mg/5ml (base		(Plavix).....	102
equiv) (Cleocin pediatric gr).....	9	clorazepate dipotassium tab 3.75 mg, 15 mg.....	63
clindamycin phosphate-benzoyl peroxide gel		clorazepate dipotassium tab 7.5 mg (Tranxene t).....	63
1-5%.....	112	CLOTRIMAZOLE/BETAMETHASON.....	113
clindamycin phosphate-benzoyl peroxide gel 1.2-2.5%		clotrimazole cream 1%.....	113
(Acanya).....	112	clotrimazole soln 1%.....	113
clindamycin phosphate-benzoyl peroxide gel		clotrimazole troche 10 mg.....	109
1.2-3.75% (Onexton).....	112	clotrimazole w/ betamethasone cream 1-0.05%.....	113
clindamycin phosphate foam 1% (Evoclin).....	112	CLOZAPINE ODT.....	67
clindamycin phosphate gel 1% (once-daily)		clozapine orally disintegrating tab 25 mg, 100 mg, 150	
(Clindagel).....	112	mg, 200 mg.....	67
clindamycin phosphate gel 1% (twice-daily).....	112	clozapine tab 25 mg, 50 mg, 100 mg, 200 mg	
clindamycin phosphate lotion 1% (Cleocin-t).....	112	(Clozaril).....	67
clindamycin phosphate soln 1%.....	112	CLOZARIL.....	67
clindamycin phosphate swab 1%.....	112	C-NATE DHA.....	94
clindamycin phosphate-tretinoin gel 1.2-0.025%		COAGADEX.....	102
(Ziana).....	112	COARTEM.....	8
clindamycin phosphate vaginal cream 2%		COBENFY.....	67
(Cleocin).....	61	COBENFY STARTER PACK.....	67
clindamycin phosph-benzoyl peroxide (refrig) gel 1.2		CODEINE SULFATE.....	77
(1)-5%.....	112	codeine sulfate tab 30 mg (Codeine sulfate).....	77
CLINDESSE.....	61	COLAZAL.....	58
CLINITEST RAPID COVID-19.....	121	colchicine cap 0.6 mg (Mitigare).....	86
clobazam suspension 2.5 mg/ml (Onfi).....	87	colchicine tab 0.6 mg (Colcrys).....	86
clobazam tab 10 mg, 20 mg (Onfi).....	87	colchicine w/ probenecid tab 0.5-500 mg.....	86
CLOBETASOL PROPIONATE.....	105	colesevelam hcl packet for susp 3.75 gm	
clobetasol propionate cream 0.05%.....	112	(Welchol).....	45
clobetasol propionate emollient base cream		colesevelam hcl tab 625 mg (Welchol).....	45
0.05%.....	112	COLESTID.....	45
clobetasol propionate emulsion foam 0.05% (Olux-		colestipol hcl granule packets 5 gm (Colestid	
e).....	112	flavored).....	45
clobetasol propionate foam 0.05% (Olux).....	112	colestipol hcl granules 5 gm (Colestid flavored).....	46
clobetasol propionate gel 0.05%.....	112	colestipol hcl tab 1 gm (Colestid).....	46
clobetasol propionate lotion 0.05% (Clobex).....	112	COMBIGAN.....	105
clobetasol propionate oint 0.05%.....	112	COMBIPATCH.....	22
clobetasol propionate shampoo 0.05% (Clobex).....	112	COMBIVENT RESPIMAT.....	51
clobetasol propionate soln 0.05%.....	112	COMBOGESIC.....	81
clobetasol propionate spray 0.05% (Clobex).....	112	COMETRIQ.....	14

COMIRNATY 2025-26.....	10	CREON.....	57
COMIRNATY/5-11Y/2025-26	10	CRESEMBA.....	4
COMPACT SPACE CHAMBER/ANT	126	CRESTOR.....	46
COMPLERA	5	CREXONT.....	91
COMPLETE NATAL DHA.....	94	CRINONE.....	61
COMPLETENATE	94	CROMOLYN SODIUM.....	105
CO-NATAL FA.....	94	cromolyn sodium oral conc 100 mg/5ml	
CONCEPT DHA.....	94	(Gastrocrom).....	58
CONCEPT OB.....	94	cromolyn sodium soln nebu 20 mg/2ml	51
CONCERTA	70	CROTAN.....	113
CONDOMS.....	126	CTEXTI.....	58
CONDYLOX.....	113	CUPRIMINE.....	130
CONJUPRI.....	39	CUVPOSA.....	55
CONTOUR BLOOD GLUCOSE MON.....	126	CUVRIOR.....	130
CONTOUR BLOOD GLUCOSE TES.....	121	CVS ADVANCED GLUCOSE METE	122
CONTOUR HIGH CONTROL.....	126	CVS COVID-19 AT HOME TEST.....	122
CONTOUR LOW CONTROL.....	127	CVS GLUCOSE METER TEST ST	122
CONTOUR NEXT BLOOD GLUCOS.....	121	CVS TRUE METRIX BLOOD GLU.....	122
CONTOUR NEXT CONTROL LEVE.....	127	cyanocobalamin inj 1000 mcg/ml.....	98
CONTOUR NEXT EZ BLOOD GLU.....	127	cyanocobalamin nasal spray 500 mcg/0.1ml	
CONTOUR NEXT GEN BLOOD GL.....	127	(Nascobal).....	98
CONTOUR NEXT LINK BLOOD G.....	127	cyclobenzaprine hcl cap er 24hr 15 mg, 30 mg	
CONTOUR NEXT LINK WIRELES.....	127	(Amrix).....	93
CONTOUR NEXT ONE BLOOD GL.....	127	cyclobenzaprine hcl tab 7.5 mg.....	93
CONTOUR NORMAL CONTROL.....	127	cyclobenzaprine hcl tab 5 mg, 10 mg	93
CONTOUR PLUS BLOOD GLUCOS.....	121	CYCLOGYL.....	105
CONTOUR PLUS BLUE BLOOD G.....	127	CYCLOMYDRIL.....	105
CONTOUR PLUS CONTROL SOLU.....	127	cyclopentolate hcl ophth soln 1% (Cyclogyl).....	105
CONTRAVE.....	70	CYCLOPHOSPHAMIDE.....	14
CONZIP.....	77	cyclophosphamide cap 25 mg, 50 mg	
COOL BLOOD GLUCOSE TEST S.....	121	(Cyclophosphamide).....	14
COPAXONE.....	73	CYCLOSERINE.....	3
COPIKTRA.....	14	CYCLOSET.....	26
CORDRAN.....	113	cyclosporine cap 25 mg, 100 mg (Sandimmune).....	130
COREG.....	37	cyclosporine modified cap 50 mg.....	130
COREG CR.....	37	cyclosporine modified cap 25 mg, 100 mg	
CORIFACT.....	102	(Neoral).....	130
CORLANOR.....	47	cyclosporine modified oral soln 100 mg/ml	
CORTEF.....	20	(Neoral).....	130
CORTENEMA.....	110	CYLTEZO.....	81
CORTIFOAM.....	110	CYLTEZO STARTER PACKAGE F.....	81
CORTISONE ACETATE.....	20	cyproheptadine hcl syrup 2 mg/5ml.....	49
CORTISPORIN-TC.....	109	cyproheptadine hcl tab 4 mg.....	49
CORTROPHIN.....	33	CYSTADANE.....	33
COSENTYX.....	113	CYSTADROPS.....	105
COSENTYX SENSOREADY PEN.....	113	CYSTAGON.....	62
COSENTYX UNOREADY.....	113	CYSTARAN.....	105
COSOPT.....	105	CYTOMEL.....	31
COSOPT PF.....	105	CYTOTEC.....	55
COTELLIC.....	14	D	
COTEMPLA XR-ODT.....	70	dabigatran etexilate mesylate cap 75 mg (etexilate	
COVID-19 AG TEST.....	121	base eq), 110 mg (etexilate base eq), 150 mg	
COVID-19 AT-HOME TEST KIT.....	122	(etexilate base eq) (Pradaxa).....	100
COVID-19 OTC ANTIGEN TEST.....	122	dalfampridine tab er 12hr 10 mg (Ampyra).....	73
COXANTO.....	81	DALIRESP.....	51
COZAAR.....	41	danazol cap 50 mg, 100 mg, 200 mg.....	21
CRENESSITY.....	33		

DANTRIUM.....	93	desmopressin acetate tab 0.1 mg, 0.2 mg (Ddavn).....	33
dantrolene sodium cap 50 mg, 100 mg.....	93	desogest-eth estrad & eth estrad tab 0.15-0.02/0.01	
dantrolene sodium cap 25 mg (Dantrium).....	93	mg(21/5) (Mircette).....	24
DANZITEN.....	14	desogestrel & ethinyl estradiol tab 0.15 mg-30	
DAPAGLIFLOZIN PROPANEDIOL.....	26	mcg.....	24
dapsone gel 5%, 7.5% (Aczone).....	113	DESONIDE.....	113
dapsone tab 25 mg, 100 mg.....	9	desonide cream 0.05% (Desowen).....	113
DAPTACEL.....	12	desonide lotion 0.05%.....	113
DARAPRIM.....	8	desonide oint 0.05%.....	113
darifenacin hydrobromide tab er 24hr 7.5 mg (base		DESOXIMETASONE.....	113
equiv), 15 mg (base equiv).....	61	desoximetasone cream 0.05% (Topicort).....	113
darunavir tab 600 mg, 800 mg (Prezista).....	5	desoximetasone cream 0.25% (Topicort).....	113
dasatinib tab 20 mg, 50 mg, 70 mg, 80 mg, 100 mg,		desoximetasone oint 0.05% (Topicort).....	113
140 mg (Sprycel).....	14	desoximetasone oint 0.25% (Topicort).....	113
DAURISMO.....	14	desoximetasone spray 0.25% (Topicort).....	113
DAYBUE.....	92	DESVENLAFAXINE ER.....	64
DAYTRANA.....	70	desvenlafaxine succinate tab er 24hr 25 mg (base	
DAYVIGO.....	69	equiv), 50 mg (base equiv), 100 mg (base equiv)	
DDAVP.....	33	(Pristiq).....	64
deferasirox granules packet 90 mg, 180 mg, 360 mg		DETROL.....	61
(Jadenu sprinkle).....	120	DEXAMETHASONE.....	20
deferasirox tab for oral susp 125 mg, 250 mg, 500 mg		DEXAMETHASONE 10-DAY DOSE.....	20
(Exjade).....	120	DEXAMETHASONE 13-DAY DOSE.....	20
deferasirox tab 90 mg, 180 mg, 360 mg (Jadenu).....	120	dexamethasone elixir 0.5 mg/5ml.....	20
deferiprone tab 500 mg, 1000 mg (Ferriprox).....	120	DEXAMETHASONE INTENSOL.....	20
deflazacort susp 22.75 mg/ml (Emflaza).....	20	DEXAMETHASONE SODIUM PHOS.....	105
deflazacort tab 6 mg, 18 mg (Emflaza).....	20	dexamethasone tab 0.5 mg, 0.75 mg, 1 mg, 1.5 mg, 2	
deflazacort tab 30 mg, 36 mg (Emflaza).....	20	mg, 4 mg, 6 mg.....	20
DELESTROGEN.....	22	dexamethasone tab therapy pack 1.5 mg (21).....	20
DELSTRIGO.....	5	DEXCOM G7 15 DAY SENSOR.....	127
demeclocycline hcl tab 150 mg, 300 mg.....	2	DEXCOM G6 RECEIVER.....	127
DEMSEER.....	41	DEXCOM G7 RECEIVER.....	127
DENAVIR.....	113	DEXCOM G6 SENSOR.....	127
DENTA 5000 PLUS SENSITIVE.....	109	DEXCOM G7 SENSOR.....	127
DEPAKOTE.....	87	DEXCOM G6 TRANSMITTER.....	127
DEPAKOTE ER.....	87	DEXEDRINE.....	70
DEPAKOTE SPRINKLES.....	87	DEXILANT.....	55
DEPEN TITRATABS.....	130	dexlansoprazole cap delayed release 30 mg, 60 mg	
DEPO-ESTRADIOL.....	22	(Dexilant).....	55
DEPO-PROVERA CONTRACEPTIV.....	23	dexmethylphenidate hcl cap er 24 hr 5 mg, 10 mg, 15	
DEPO-SUBQ PROVERA 104.....	24	mg, 20 mg, 25 mg, 30 mg, 35 mg, 40 mg (Focalin	
DERMACINRX PRETRATE.....	94	xr).....	70
DERMA-SMOOTH/FS BODY.....	113	dexmethylphenidate hcl tab 2.5 mg, 5 mg, 10 mg	
DERMA-SMOOTH/FS SCALP.....	113	(Focalin).....	71
DERMOTIC.....	109	dextroamphetamine sulfate cap er 24hr 5 mg.....	71
DESCOVY.....	5	dextroamphetamine sulfate cap er 24hr 10 mg, 15 mg	
desipramine hcl tab 50 mg, 75 mg, 100 mg, 150		(Dexedrine).....	71
mg.....	64	dextroamphetamine sulfate oral solution 5	
desipramine hcl tab 10 mg, 25 mg (Norpramin).....	64	mg/5ml.....	71
DESLORATADINE ODT.....	49	dextroamphetamine sulfate tab 5 mg, 10 mg.....	71
desloratadine tab 5 mg (Clarinet).....	49	dextroamphetamine sulfate tab 2.5 mg, 7.5 mg, 15 mg,	
DESMOPRESSIN ACETATE.....	33	20 mg, 30 mg.....	71
desmopressin acetate inj 4 mcg/ml (Ddavn).....	33	DHIVY.....	91
desmopressin acetate nasal spray soln 0.01%		DIACOMIT.....	87
(refrigerated).....	33	DIASTIX.....	122
desmopressin acetate preservative free (pf) inj 4 mcg/		DIASTIX REAGENT STRIPS.....	122
ml (Ddavn).....	33	DIATHRIVE+ BLOOD GLUCOSE.....	122

DIATHRIVE BLOOD GLUCOSE T	122	diltiazem hcl cap er 24hr 120 mg, 180 mg, 240 mg	39
diazepam conc 5 mg/ml.....	63	diltiazem hcl coated beads cap er 24hr 120 mg, 180 mg, 240 mg, 300 mg (Cardizem cd)	39
diazepam oral soln 1 mg/ml	63	diltiazem hcl coated beads cap er 24hr 360 mg (Cardizem cd)	39
DIAZEPAM RECTAL GEL	87	diltiazem hcl extended release beads cap er 24hr 120 mg, 180 mg, 240 mg, 300 mg, 360 mg, 420 mg (Tiazac)	39
diazepam rectal gel delivery system 20 mg	87	diltiazem hcl tab er 24hr 120 mg, 180 mg, 240 mg, 300 mg, 360 mg, 420 mg (Cardizem la)	39
diazepam rectal gel delivery system 10 mg (Diastat acudial)	87	diltiazem hcl tab 90 mg	39
diazepam tab 2 mg, 5 mg, 10 mg (Valium).....	63	diltiazem hcl tab 30 mg, 60 mg, 120 mg (Cardizem)	39
diazoxide susp 50 mg/ml (Proglycem).....	26	dimethyl fumarate capsule delayed release 120 mg, 240 mg (Tecfidera)	73
DIBENZYLIN.....	41	dimethyl fumarate capsule dr starter pack 120 mg & 240 mg (Tecfidera starter pa)	73
dichlorphenamide tab 50 mg (Keveyis)	44	DIOVAN.....	41
DICLEGIS	57	DIOVAN HCT	41
DICLOFENAC EPOLAMINE	113	DIPENTUM	58
diclofenac potassium cap 25 mg (Zipsor)	81	DIPHENHYDRAMINE HCL.....	49
diclofenac potassium (migraine) packet 50 mg (Cambia)	85	DIPHENOXYLATE/ATROPINE	55
diclofenac potassium tab 25 mg.....	81	diphenoxylate w/ atropine tab 2.5-0.025 mg (Lomotil).....	55
diclofenac potassium tab 50 mg.....	81	DIPROLENE	114
diclofenac sodium (actinic keratoses) gel 3%.....	113	dipyridamole tab 25 mg, 50 mg, 75 mg.....	102
diclofenac sodium gel 1% (1.16% diethylamine equiv)	113	disopyramide phosphate cap 100 mg, 150 mg (Norpace).....	40
diclofenac sodium ophth soln 0.1%	105	disulfiram tab 250 mg, 500 mg.....	73
diclofenac sodium soln 1.5%	113	DIURIL	44
diclofenac sodium soln 2% (Pennsaid)	113	divalproex sodium cap delayed release sprinkle 125 mg (Depakote sprinkles)	87
diclofenac sodium tab delayed release 25 mg, 50 mg, 75 mg.....	81	divalproex sodium tab delayed release 125 mg, 250 mg, 500 mg (Depakote).....	87
diclofenac sodium tab er 24hr 100 mg.....	81	divalproex sodium tab er 24 hr 250 mg, 500 mg (Depakote er).....	87
diclofenac w/ misoprostol tab delayed release 50-0.2 mg (Arthrotec 50).....	81	DIVIGEL.....	22
diclofenac w/ misoprostol tab delayed release 75-0.2 mg (Arthrotec 75).....	81	dofetilide cap 125 mcg (0.125 mg), 250 mcg (0.25 mg), 500 mcg (0.5 mg) (Tikosyn)	40
dicloxacillin sodium cap 250 mg, 500 mg.....	1	DOJOLVI	98
dicyclomine hcl cap 10 mg.....	55	DOLOBID	77
dicyclomine hcl oral soln 10 mg/5ml	55	donepezil hydrochloride orally disintegrating tab 5 mg, 10 mg.....	73
dicyclomine hcl tab 20 mg.....	55	donepezil hydrochloride tab 5 mg, 10 mg (Aricept)	73
DICYCLOMINE HYDROCHLORIDE.....	55	donepezil hydrochloride tab 23 mg (Aricept)	73
DIFFERIN	113	DOPTOLET	98
DIFFERIN PUMP	113	DOPTOLET SPRINKLE.....	98
DIFICID	2	DORYX MPC.....	2
DIFLORASONE DIACETATE	114	dorzolamide hcl ophth soln 2% (Trusopt)	105
diflorasone diacetate oint 0.05%.....	114	dorzolamide hcl-timolol maleate ophth soln 2-0.5% (Cosopt)	106
DIFLUCAN.....	4	dorzolamide hcl-timolol maleate pf ophth soln 2-0.5% (Cosopt pf).....	106
diflunisal tab 500 mg.....	77	DOVATO	5
difluprednate ophth emulsion 0.05% (Durezol)	105	doxazosin mesylate tab 1 mg, 2 mg, 4 mg, 8 mg (Cardura).....	41
DIGOXIN.....	36		
digoxin oral soln 0.05 mg/ml (Digoxin).....	36		
digoxin tab 125 mcg (0.125 mg), 250 mcg (0.25 mg) (Lanoxin)	36		
digoxin tab 62.5 mcg (0.0625 mg) (Lanoxin)	36		
dihydroergotamine mesylate inj 1 mg/ml.....	85		
dihydroergotamine mesylate nasal spray 4 mg/ml (Migranal)	85		
DILANTIN.....	87		
DILANTIN-125.....	87		
DILANTIN INFATABS.....	87		
DILAUDID	77		
diltiazem hcl cap er 12hr 60 mg, 90 mg, 120 mg.....	39		

doxepin hcl cap 150 mg	64	DYANAVEL XR	71
doxepin hcl cap 10 mg, 25 mg, 50 mg, 75 mg, 100 mg	64	DYMISTA	50
doxepin hcl conc 10 mg/ml	64	DYRENIUM	44
doxepin hcl cream 5% (Prudoxin)	114	E	
doxepin hcl (sleep) tab 3 mg (base equiv), 6 mg (base equiv) (Silenor)	69	EASIVENT	127
DOXERCALCIFEROL	33	EASIVENT/MASK-LARGE	127
doxycycline hyclate cap 50 mg	2	EASIVENT/MASK-MEDIUM	127
doxycycline hyclate cap 100 mg (Vibramycin)	2	EASIVENT/MASK-SMALL	127
DOXYCYCLINE HYCLATE DR	2	EASYGLUCO	122
doxycycline hyclate tab delayed release 75 mg, 100 mg, 150 mg	2	EASY MAX BLOOD GLUCOSE TE	122
doxycycline hyclate tab delayed release 50 mg, 200 mg (Doryx)	2	EASYMAX TEST STRIPS	122
doxycycline hyclate tab 50 mg	2	EASYMAX 15 TEST STRIPS	122
doxycycline hyclate tab 20 mg, 100 mg	2	EASY PLUS II BLOOD GLUCOS	122
doxycycline hyclate tab 75 mg, 150 mg (Acticlate)	2	EASYPRO BLOOD GLUCOSE TES	122
doxycycline monohydrate cap 50 mg, 100 mg	2	EASYPRO PLUS	122
doxycycline monohydrate cap 75 mg, 150 mg	2	EASY STEP TEST STRIPS	122
doxycycline monohydrate for susp 25 mg/5ml (Vibramycin)	2	EASY TALK BLOOD GLUCOSE T	122
doxycycline monohydrate tab 50 mg, 75 mg, 100 mg, 150 mg	2	EASY TALK PLUS II BLOOD G	122
doxycycline (rosacea) cap delayed release 40 mg (Oracea)	114	EASY TOUCH GLUCOSE TEST S	122
doxylamine-pyridoxine tab delayed release 10-10 mg (Diclegis)	57	EASY TOUCH HEALTHPRO GLUC	122
DRISDOL	94	EASY TRAK BLOOD GLUCOSE T	122
DRIZALMA SPRINKLE	64	EASY TRAK II BLOOD GLUCOS	122
dronabinol cap 5 mg, 10 mg	57	EBGLYSS	114
dronabinol cap 2.5 mg (Marinol)	57	ECONAZOLE NITRATE	114
drospirenone-ethinyl estradiol tab 3-0.03 mg (Yasmin 28)	24	econazole nitrate cream 1%	114
drospirenone-ethinyl estradiol tab 3-0.02 mg (Yaz)	24	ECOZA	114
drospirenone-ethinyl estrad-levomefolate tab 3-0.02-0.451 mg (Beyaz)	24	EDARBI	41
drospirenone-ethinyl estrad-levomefolate tab 3-0.03-0.451 mg (Safyral)	24	EDARBYCLOR	42
droxidopa cap 100 mg, 200 mg, 300 mg (Northera)	45	EDECIN	44
DUAKLIR PRESSAIR	51	EDEX	49
DUAVEE	22	EDLUAR	69
DUETACT	26	EDURANT	5
DULERA	52	EDURANT PED	5
duloxetine hcl enteric coated pellets cap 40 mg (base eq)	64	E.E.S. 400	2
duloxetine hcl enteric coated pellets cap 20 mg (base eq), 30 mg (base eq), 60 mg (base eq) (Cymbalta)	64	E.E.S. GRANULES	2
DUOBRII	114	EFAVIRENZ/LAMIVUDINE/TENO	5
DUO-CARE TEST STRIPS	122	efavirenz-emtricitabine-tenofovir df tab 600-200-300 mg	5
DUOPA	91	efavirenz-lamivudine-tenofovir df tab 600-300-300 mg (Symfi)	5
DUPIXENT	114	efavirenz tab 600 mg (Sustiva)	5
DUREZOL	106	EFFEXOR XR	64
dutasteride cap 0.5 mg (Avodart)	62	EFFIENT	102
dutasteride-tamsulosin hcl cap 0.5-0.4 mg (Jalyn)	62	ELEMENT COMPACT TEST STRI	122
DUVYZAT	92	ELEMENT TEST STRIPS	122
		ELEPSIA XR	87
		ELESTRIN	22
		eletriptan hydrobromide tab 20 mg (base equivalent), 40 mg (base equivalent) (Relpax)	85
		ELIDEL	114
		ELIGARD	14
		ELIMITE	114
		ELIQUIS	100
		ELIQUIS STARTER PACK	100
		ELITE-OB	94
		ELLA	24

ELLUME COVID-19 HOME TEST	122	ENTYVIO PEN.....	58
ELMIRON.....	62	ENVARBUS XR	130
ELOCTATE.....	102	EOHILIA.....	21
eltrombopag olamine powder pack for susp 25 mg		EPANED.....	42
(base equiv), 12.5 mg (base eq) (Promacta)	98	EPCLUSA.....	5
eltrombopag olamine tab 12.5 mg (base equiv), 25		EPIDIOLEX	87
mg (base equiv), 50 mg (base equiv), 75 mg (base		EPIDUO.....	114
equiv) (Promacta).....	98	EPIDUO FORTE.....	114
ELYXYB	85	epinastine hcl ophth soln 0.05%.....	106
EMBRACE BLOOD GLUCOSE TES	122	EPINEPHRINE	45
EMBRACE EVO BLOOD GLUCOSE.....	122	epinephrine solution auto-injector 0.15 mg/0.3ml	
EMBRACE PRO BLOOD GLUCOSE.....	122	(1:2000) (Epipen-jr 2-pak).....	45
EMBRACE TALK BLOOD GLUCOS	122	epinephrine solution auto-injector 0.3 mg/0.3ml	
EMBRACE WAVE BLOOD GLUCOS.....	122	(1:1000) (Epipen 2-pak).....	45
EMBRIVA.....	94	EPIPEN-JR 2-PAK.....	45
EMEND	57	EPIPEN 2-PAK	45
EMEND BIPACK.....	57	EPIVIR.....	5
EMEND TRIPACK	57	eplerenone tab 25 mg, 50 mg (Inspra)	42
EMFLAZA	20	EPOGEN.....	98
EMGALITY.....	85	EPRONTIA.....	87
EMPAVELI.....	102	EPSOLAY.....	114
EMROSI.....	114	EQ BLOOD GLUCOSE TEST STR.....	122
EMSAM.....	64	EQ SPACE CHAMBER ANTI-STA.....	127
emtricitabine caps 200 mg (Emtriva).....	5	EQUETRO.....	67
emtricitabine-rilpivirine-tenofovir df tab 200-25-300		ergocalciferol cap 1.25 mg (50000 unit) (Drisdol).....	94
mg (Complera).....	5	ERGOMAR.....	85
emtricitabine-tenofovir disoproxil fumarate tab		ERGOTAMINE TARTRATE/CAFFE	85
100-150 mg, 133-200 mg, 167-250 mg, 200-300 mg		ERIVEDGE.....	15
(Truvada).....	5	ERLEADA.....	15
EMTRIVA.....	5	erlotinib hcl tab 25 mg (base equivalent), 100	
EMVERM.....	9	mg (base equivalent), 150 mg (base equivalent)	
enalapril maleate & hydrochlorothiazide tab 5-12.5		(Tarceva).....	15
mg.....	42	ERMEZA.....	31
enalapril maleate & hydrochlorothiazide tab 10-25 mg		ERTACZO	114
(Vaseretic).....	42	ERY.....	114
enalapril maleate oral soln 1 mg/ml (Epaned).....	42	ERYPED 400.....	2
enalapril maleate tab 2.5 mg, 5 mg, 10 mg, 20 mg		ERYTHROMYCIN	114
(Vasotec).....	42	ERYTHROMYCIN DR	2
ENBRACE HR.....	94	erythromycin ethylsuccinate for susp 200 mg/5ml	
ENBREL.....	81	(E.e.s. granules).....	2
ENBREL MINI.....	81	erythromycin ethylsuccinate for susp 400 mg/5ml	
ENBREL SURECLICK	81	(Eryped 400).....	2
ENCARE	61	erythromycin ophth oint 5 mg/gm.....	106
ENDARI.....	98	erythromycin soln 2%.....	114
ENDOMETRIN	61	erythromycin tab delayed release 250 mg, 333 mg,	
ENGERIX-B.....	10	500 mg.....	2
enoxaparin sodium inj 300 mg/3ml (Lovenox).....	100	erythromycin tab 250 mg, 500 mg.....	2
enoxaparin sodium inj soln pref syr 30 mg/0.3ml, 40		ESBRIET	54
mg/0.4ml, 60 mg/0.6ml, 80 mg/0.8ml, 100 mg/ml, 120		ESCITALOPRAM OXALATE	64
mg/0.8ml, 150 mg/ml (Lovenox).....	100	escitalopram oxalate soln 5 mg/5ml (base equiv).....	64
ENSACOVE.....	15	escitalopram oxalate tab 5 mg (base equiv), 10 mg	
ENSPRYNG	130	(base equiv), 20 mg (base equiv) (Lexapro).....	64
ENSTILAR	114	eslicarbazepine acetate tab 200 mg, 400 mg, 600 mg,	
entacapone tab 200 mg (Comtan).....	91	800 mg (Aptiom).....	87
ENTADFI.....	62	esomeprazole magnesium cap delayed release 20 mg	
entecavir tab 0.5 mg, 1 mg (Baraclude).....	5	(base eq), 40 mg (base eq) (Nexium).....	55
ENTRESTO	48		

esomeprazole magnesium for delayed release susp packet 5 mg, 10 mg, 20 mg, 40 mg (Nexium).....	55	EVOXAC.....	109
esomeprazole magnesium for delayed release susp pack 2.5 mg (Nexium).....	55	EVRYSDI.....	92
ESPEROCT.....	102	EXELDERM.....	114
estazolam tab 1 mg, 2 mg.....	69	EXELON.....	73
ESTRACE.....	61	exemestane tab 25 mg (Aromasin).....	15
estradiol & norethindrone acetate tab 0.5-0.1 mg.....	22	EXENATIDE.....	26
estradiol & norethindrone acetate tab 1-0.5 mg (Activella).....	22	EXFORGE.....	42
estradiol gel 0.06% (0.75 mg/1.25 gm metered-dose pump) (Estrogel).....	23	EXFORGE HCT.....	42
estradiol tab 0.5 mg, 1 mg, 2 mg (Estrace).....	23	EXJADE.....	120
estradiol td gel 0.25 mg/0.25gm (0.1%), 0.5 mg/0.5gm (0.1%), 0.75 mg/0.75gm (0.1%), 1 mg/gm (0.1%), 1.25 mg/1.25gm (0.1%) (Divigel).....	23	EYSUVIS.....	106
estradiol td patch twice weekly 0.025 mg/24hr, 0.0375 mg/24hr, 0.05 mg/24hr, 0.075 mg/24hr, 0.1 mg/24hr (Vivelle-dot).....	23	EZALLOR SPRINKLE.....	46
estradiol td patch weekly 0.025 mg/24hr, 0.0375 mg/24hr (37.5 mcg/24hr), 0.05 mg/24hr, 0.06 mg/24hr, 0.075 mg/24hr, 0.1 mg/24hr (Climara).....	23	ezetimibe-simvastatin tab 10-10 mg, 10-20 mg, 10-40 mg, 10-80 mg (Vytorin).....	46
estradiol vaginal cream 0.01% (Estrace).....	61	ezetimibe tab 10 mg (Zetia).....	46
estradiol vaginal tab 10 mcg (Vagifem).....	61	F	
estradiol valerate im in oil 10 mg/ml, 20 mg/ml, 40 mg/ ml (Delestrogen).....	23	FABHALTA.....	102
ESTRING.....	61	FABIOR.....	114
ESTROGEL.....	23	famciclovir tab 125 mg, 250 mg, 500 mg.....	5
eszopiclone tab 1 mg, 2 mg, 3 mg (Lunesta).....	69	famotidine for susp 40 mg/5ml.....	55
ethacrynic acid tab 25 mg (Edecrin).....	44	famotidine tab 20 mg, 40 mg (Pepcid).....	55
ethambutol hcl tab 100 mg.....	3	FANAPT.....	67
ethambutol hcl tab 400 mg (Myambutol).....	3	FANAPT TITRATION PACK A.....	67
ethosuximide cap 250 mg (Zarontin).....	87	FANAPT TITRATION PACK B.....	67
ethosuximide soln 250 mg/5ml (Zarontin).....	87	FANAPT TITRATION PACK C.....	67
ethynodiol diacetate & ethinyl estradiol tab 1 mg-35 mcg, 1 mg-50 mcg.....	24	FARESTON.....	15
etodolac cap 200 mg, 300 mg.....	81	FARXIGA.....	26
etodolac tab er 24hr 400 mg, 500 mg, 600 mg.....	81	FASENRA PEN.....	52
etodolac tab 500 mg.....	81	FASTEP COVID-19 ANTIGEN H.....	123
etodolac tab 400 mg (Lodine).....	81	FC2 FEMALE CONDOM.....	127
ETOPOSIDE.....	15	febuxostat tab 40 mg, 80 mg (Uloric).....	86
etravirine tab 100 mg, 200 mg (Intelence).....	5	FEIBA.....	102
EUCRISA.....	114	felbamate susp 600 mg/5ml (Felbatol).....	87
EUFLEXXA.....	93	felbamate tab 400 mg, 600 mg (Felbatol).....	87
EULEXIN.....	15	FELBATOL.....	87
EVAMIST.....	23	felodipine tab er 24hr 2.5 mg, 5 mg, 10 mg.....	39
EVEKEO.....	71	FEMARA.....	15
EVENCARE BLOOD GLUCOSE TE.....	122	FEMCAP.....	127
everolimus tab for oral susp 2 mg, 3 mg, 5 mg (Afinitor disperz).....	15	FEMLYV.....	24
everolimus tab 2.5 mg, 5 mg, 7.5 mg, 10 mg (Afinitor).....	15	FEMRING.....	61
everolimus tab 0.25 mg, 0.5 mg, 0.75 mg, 1 mg (Zortress).....	130	FENOFIBRATE.....	46
EVISTA.....	33	fenofibrate micronized cap 43 mg, 130 mg.....	46
EVOLUTION AUTOCODE.....	122	fenofibrate micronized cap 67 mg, 134 mg, 200 mg.....	46
EVOTAZ.....	5	fenofibrate tab 54 mg, 160 mg.....	46
		fenofibrate tab 40 mg, 120 mg (Fenoglide).....	46
		fenofibrate tab 48 mg, 145 mg (Tricor).....	46
		FENOFIBRIC ACID.....	46
		FENOPROFEN CALCIUM.....	81
		FENOPRON.....	82
		fenofibrate tab 54 mg, 160 mg.....	46
		fenofibrate tab 40 mg, 120 mg (Fenoglide).....	46
		fenofibrate tab 48 mg, 145 mg (Tricor).....	46
		FENOFIBRIC ACID.....	46
		FENOPROFEN CALCIUM.....	81
		FENOPRON.....	82
		fenofibrate tab 54 mg, 160 mg.....	46
		fenofibrate tab 40 mg, 120 mg (Fenoglide).....	46
		fenofibrate tab 48 mg, 145 mg (Tricor).....	46
		FENOFIBRIC ACID.....	46
		FENOPROFEN CALCIUM.....	81
		FENOPRON.....	82
		fenofibrate tab 54 mg, 160 mg.....	46
		fenofibrate tab 40 mg, 120 mg (Fenoglide).....	46
		fenofibrate tab 48 mg, 145 mg (Tricor).....	46
		FENOFIBRIC ACID.....	46
		FENOPROFEN CALCIUM.....	81
		FENOPRON.....	82
		fenofibrate tab 54 mg, 160 mg.....	46
		fenofibrate tab 40 mg, 120 mg (Fenoglide).....	46
		fenofibrate tab 48 mg, 145 mg (Tricor).....	46
		FENOFIBRIC ACID.....	46
		FENOPROFEN CALCIUM.....	81
		FENOPRON.....	82
		fenofibrate tab 54 mg, 160 mg.....	46
		fenofibrate tab 40 mg, 120 mg (Fenoglide).....	46
		fenofibrate tab 48 mg, 145 mg (Tricor).....	46
		FENOFIBRIC ACID.....	46
		FENOPROFEN CALCIUM.....	81
		FENOPRON.....	82
		fenofibrate tab 54 mg, 160 mg.....	46
		fenofibrate tab 40 mg, 120 mg (Fenoglide).....	46
		fenofibrate tab 48 mg, 145 mg (Tricor).....	46
		FENOFIBRIC ACID.....	46
		FENOPROFEN CALCIUM.....	81
		FENOPRON.....	82
		fenofibrate tab 54 mg, 160 mg.....	46
		fenofibrate tab 40 mg, 120 mg (Fenoglide).....	46
		fenofibrate tab 48 mg, 145 mg (Tricor).....	46
		FENOFIBRIC ACID.....	46
		FENOPROFEN CALCIUM.....	81
		FENOPRON.....	82
		fenofibrate tab 54 mg, 160 mg.....	46
		fenofibrate tab 40 mg, 120 mg (Fenoglide).....	46
		fenofibrate tab 48 mg, 145 mg (Tricor).....	46
		FENOFIBRIC ACID.....	46
		FENOPROFEN CALCIUM.....	81
		FENOPRON.....	82
		fenofibrate tab 54 mg, 160 mg.....	46
		fenofibrate tab 40 mg, 120 mg (Fenoglide).....	46
		fenofibrate tab 48 mg, 145 mg (Tricor).....	46
		FENOFIBRIC ACID.....	46
		FENOPROFEN CALCIUM.....	81
		FENOPRON.....	82
		fenofibrate tab 54 mg, 160 mg.....	46
		fenofibrate tab 40 mg, 120 mg (Fenoglide).....	46
		fenofibrate tab 48 mg, 145 mg (Tricor).....	46
		FENOFIBRIC ACID.....	46
		FENOPROFEN CALCIUM.....	81
		FENOPRON.....	82
		fenofibrate tab 54 mg, 160 mg.....	46
		fenofibrate tab 40 mg, 120 mg (Fenoglide).....	46
		fenofibrate tab 48 mg, 145 mg (Tricor).....	46
		FENOFIBRIC ACID.....	46
		FENOPROFEN CALCIUM.....	81
		FENOPRON.....	82
		fenofibrate tab 54 mg, 160 mg.....	46
		fenofibrate tab 40 mg, 120 mg (Fenoglide).....	46
		fenofibrate tab 48 mg, 145 mg (Tricor).....	46
		FENOFIBRIC ACID.....	46
		FENOPROFEN CALCIUM.....	81
		FENOPRON.....	82
		fenofibrate tab 54 mg, 160 mg.....	46
		fenofibrate tab 40 mg, 120 mg (Fenoglide).....	46
		fenofibrate tab 48 mg, 145 mg (Tricor).....	46
		FENOFIBRIC ACID.....	46
		FENOPROFEN CALCIUM.....	81
		FENOPRON.....	82
		fenofibrate tab 54 mg, 160 mg.....	46
		fenofibrate tab 40 mg, 120 mg (Fenoglide).....	46
		fenofibrate tab 48 mg, 145 mg (Tricor).....	46
		FENOFIBRIC ACID.....	46
		FENOPROFEN CALCIUM.....	81
		FENOPRON.....	82
		fenofibrate tab 54 mg, 160 mg.....	46
		fenofibrate tab 40 mg, 120 mg (Fenoglide).....	46
		fenofibrate tab 48 mg, 145 mg (Tricor).....	46
		FENOFIBRIC ACID.....	46
		FENOPROFEN CALCIUM.....	81
		FENOPRON.....	82
		fenofibrate tab 54 mg, 160 mg.....	46
		fenofibrate tab 40 mg, 120 mg (Fenoglide).....	46
		fenofibrate tab 48 mg, 145 mg (Tricor).....	46
		FENOFIBRIC ACID.....	46
		FENOPROFEN CALCIUM.....	81
		FENOPRON.....	82
		fenofibrate tab 54 mg, 160 mg.....	46
		fenofibrate tab 40 mg, 120 mg (Fenoglide).....	46
		fenofibrate tab 48 mg, 145 mg (Tricor).....	46
		FENOFIBRIC ACID.....	46
		FENOPROFEN CALCIUM.....	81
		FENOPRON.....	82
		fenofibrate tab 54 mg, 160 mg.....	46
		fenofibrate tab 40 mg, 120 mg (Fenoglide).....	46
		fenofibrate tab 48 mg, 145 mg (Tricor).....	46
		FENOFIBRIC ACID.....	46
		FENOPROFEN CALCIUM.....	81
		FENOPRON.....	82
		fenofibrate tab 54 mg, 160 mg.....	46
		fenofibrate tab 40 mg, 120 mg (Fenoglide).....	46
		fenofibrate tab 48 mg, 145 mg (Tricor).....	46
		FENOFIBRIC ACID.....	46
		FENOPROFEN CALCIUM.....	81
		FENOPRON.....	82
		fenofibrate tab 54 mg, 160 mg.....	46
		fenofibrate tab 40 mg, 120 mg (Fenoglide).....	46
		fenofibrate tab 48 mg, 145 mg (Tricor).....	46
		FENOFIBRIC ACID.....	46
		FENOPROFEN CALCIUM.....	81
		FENOPRON.....	82
		fenofibrate tab 54 mg, 160 mg.....	46
		fenofibrate tab 40 mg, 120 mg (Fenoglide).....	46
		fenofibrate tab 48 mg, 145 mg (Tricor).....	46
		FENOFIBRIC ACID.....	46
		FENOPROFEN CALCIUM.....	81
		FENOPRON.....	82
		fenofibrate tab 54 mg, 160 mg.....	46
		fenofibrate tab 40 mg, 120 mg (Fenoglide).....	46
		fenofibrate tab 48 mg, 145 mg (Tricor).....	46
		FENOFIBRIC ACID.....	46
		FENOPROFEN CALCIUM.....	81
		FENOPRON.....	82
		fenofibrate tab 54 mg, 160 mg.....	46
		fenofibrate tab 40 mg, 120 mg (Fenoglide).....	46
		fenofibrate tab 48 mg, 145 mg (Tricor).....	46
		FENOFIBRIC ACID.....	46
		FENOPROFEN CALCIUM.....	81
		FENOPRON.....	82
		fenofibrate tab 54 mg, 160 mg.....	46
		fenofibrate tab 40 mg, 120 mg (Fenoglide).....	46
		fenofibrate tab 48 mg, 145 mg (Tricor).....	46
		FENOFIBRIC ACID.....	46
		FENOPROFEN CALCIUM.....	81
		FENOPRON.....	82
		fenofibrate tab 54 mg, 160 mg.....	46
		fenofibrate tab 40 mg, 120 mg (Fenoglide).....	46
		fenofibrate tab 48 mg, 145 mg (Tricor).....	46
		FENOFIBRIC ACID.....	46
		FENOPROFEN CALCIUM.....	81
		FENOPRON.....	82
		fenofibrate tab 54 mg, 160 mg.....	46
		fenofibrate tab 40 mg, 120 mg (Fenoglide).....	46
		fenofibrate tab 48 mg, 145 mg (Tricor).....	46
		FENOFIBRIC ACID.....	46
		FENOPROFEN CALCIUM.....	81
		FENOPRON.....	82
		fenofibrate tab 54 mg, 160 mg.....	46
		fenofibrate tab 40 mg, 120 mg (Fenoglide).....	46
		fenofibrate tab 48 mg, 145 mg (Tricor).....	46
		FENOFIBRIC ACID.....	46
		FENOPROFEN CALCIUM.....	81
		FENOPRON.....	82
		fenofibrate tab 54 mg, 160 mg.....	46
		fenofibrate tab 40 mg, 120 mg (Fenoglide).....	46
		fenofibrate tab 48 mg, 145 mg (Tricor).....	46
		FENOFIBRIC ACID.....	46
		FENOPROFEN CALCIUM.....	81
		FENOPRON.....	82
		fenofibrate tab 54 mg, 160 mg.....	46
		fenofibrate tab 40 mg, 120 mg (Fenoglide).....	46
		fenofibrate tab 48 mg, 145 mg (Tricor).....	46
		FENOFIBRIC ACID.....	46
		FENOPROFEN CALCIUM.....	81
		FENOPRON.....	82
		fenofibrate tab 54 mg, 160 mg.....	46
		fenofibrate tab 40 mg, 120 mg (Fenoglide).....	46
		fenofibrate tab 48 mg, 145 mg (Tricor).....	46
		FENOFIBRIC ACID.....	46
		FENOPROFEN CALCIUM.....	81
		FENOPRON.....	82
		fenofibrate tab 54 mg, 160 mg.....	46
		fenofibrate tab 40 mg, 120 mg (Fenoglide).....	46
		fenofibrate tab 48 mg, 145 mg (Tricor).....	46
		FENOFIBRIC ACID.....	46
		FENOPROFEN CALCIUM.....	81
		FENOPRON.....	82
		fenofibrate tab 54 mg, 160 mg.....	46
		fenofibrate tab 40 mg, 120 mg (Fenoglide).....	46
		fenofibrate tab 48 mg, 145 mg (Tricor).....	46
		FENOFIBRIC ACID.....	46
		FENOPROFEN CALCIUM.....	81
		FENOPRON.....	82
		fenofibrate tab 54 mg	

ferrous sulfate soln 75 mg/ml (15 mg/ml elemental fe), 220 mg/5ml (44 mg/5ml elemental fe), 300 mg/5ml (60 mg/5ml elemental fe).....	98	fluocinolone acetate soln 0.01% (Synalar)	114
fesoterodine fumarate tab er 24hr 4 mg, 8 mg (Toviaz).....	61	fluocinolone cream 0.05%	114
FETZIMA.....	64	fluocinolone cream 0.1% (Vanos).....	114
FETZIMA TITRATION PACK.....	65	fluocinolone emulsified base cream 0.05%	115
FIASP.....	29	fluocinolone gel 0.05%	115
FIASP FLEXTOUCH.....	29	fluocinolone oint 0.05%.....	115
FIASP PENFILL.....	29	fluocinolone soln 0.05%.....	115
FIASP PUMPCART.....	29	FLUORIDEX SENSITIVITY REL.....	109
FIBRYGA.....	102	FLUORIMAX 5000 SENSITIVE.....	109
fidaxomicin tab 200 mg (Difcid).....	2	fluorometholone ophth susp 0.1% (Fml liquifilm)	106
FIFTY50 GLUCOSE TEST STRI.....	123	FLUOROURACIL.....	115
FILSPARI.....	62	fluorouracil cream 5% (Efudex).....	115
FILSUVEZ.....	114	fluorouracil soln 5%.....	115
FINACEA.....	114	FLUOXETINE DR.....	65
finasteride tab 5 mg (Proscar).....	62	fluoxetine hcl cap 10 mg, 20 mg, 40 mg (Prozac).....	65
fingolimod hcl cap 0.5 mg (base equiv) (Gilenya).....	74	fluoxetine hcl solution 20 mg/5ml.....	65
FINTEPLA.....	87	fluoxetine hcl tab 10 mg, 20 mg.....	65
FIORICET.....	77	fluoxetine hcl tab 60 mg (Fluoxetine hydrochlo)	65
FIRAZYR.....	102	FLUOXETINE HYDROCHLORIDE.....	65
FIRDAPSE.....	93	FLUPHENAZINE HCL.....	67
FIRMAGON.....	15	fluphenazine hcl tab 1 mg, 2.5 mg, 5 mg, 10 mg	67
FIRVANQ.....	9	FLUPHENAZINE HYDROCHLORID.....	67
FLAREX.....	106	FLURANDRENOLIDE.....	115
flecainide acetate tab 50 mg, 100 mg, 150 mg.....	40	FLURAZEPAM HYDROCHLORIDE.....	69
FLECTOR.....	114	FLURBIPROFEN.....	82
FLEQSUVY.....	93	FLURBIPROFEN SODIUM.....	106
FLEXICHAMBER.....	127	FLUTICASONE FUROATE/VILAN.....	52
FLEXICHAMBER ADULT MASK/S.....	127	FLUTICASONE PROPIONATE.....	115
FLEXICHAMBER CHILD MASK/L.....	127	FLUTICASONE PROPIONATE/SA.....	52
FLEXICHAMBER CHILD MASK/S.....	127	fluticasone propionate cream 0.05%	115
FLOLIPID.....	46	FLUTICASONE PROPIONATE DI.....	52
FLORIVA.....	97	FLUTICASONE PROPIONATE HF.....	52
FLOWFLEX COVID-19 ANTIGEN.....	123	fluticasone propionate nasal susp 50 mcg/act.....	50
FLUAD 2025-2026.....	11	fluticasone propionate oint 0.005%.....	115
FLUARIX 2025-2026.....	11	fluticasone-salmeterol aer powder ba 100-50 mcg/act, 250-50 mcg/act, 500-50 mcg/act (Advair diskus)	52
FLUBLOK 2025-2026.....	11	fluvastatin sodium cap 20 mg (base equivalent), 40 mg (base equivalent).....	46
FLUCELVAX 2025-2026.....	11	fluvastatin sodium tab er 24 hr 80 mg (base equivalent) (Lescol xl).....	46
fluconazole for susp 10 mg/ml, 40 mg/ml (Diflucan).....	4	fluvoxamine maleate cap er 24hr 100 mg, 150 mg.....	65
fluconazole tab 50 mg, 100 mg, 150 mg, 200 mg (Diflucan).....	4	fluvoxamine maleate tab 25 mg, 50 mg, 100 mg.....	65
flucytosine cap 250 mg, 500 mg (Ancobon).....	4	FLUZONE 2025-2026.....	11
fludrocortisone acetate tab 0.1 mg.....	21	FLUZONE HIGH-DOSE 2025-20.....	11
FLULAVAL 2025-2026.....	11	FML FORTE.....	106
FLUMIST NASAL VACCINE 202.....	11	FML LIQUIFILM.....	106
flunisolide nasal soln 25 mcg/act (0.025%).....	50	FOCALIN.....	71
fluocinolone acetate cream 0.01%.....	114	FOCALIN XR.....	71
fluocinolone acetate cream 0.025% (Synalar).....	114	FOLATEXCEL.....	94
fluocinolone acetate oil 0.01% (body oil) (Derma- smoother/fs bod).....	114	folic acid cap 0.8 mg.....	98
fluocinolone acetate oil 0.01% (scalp oil) (Derma- smoother/fs sca).....	114	folic acid tab 400 mcg, 800 mcg.....	99
fluocinolone acetate oint 0.025% (Synalar).....	114	folic acid tab 1 mg.....	99
fluocinolone acetate (otic) oil 0.01% (Dermotic).....	109	FOLIVANE-OB.....	94
		FOLLISTIM AQ.....	33
		fondaparinux sodium subcutaneous inj 2.5 mg/0.5ml, 5 mg/0.4ml, 7.5 mg/0.6ml, 10 mg/0.8ml (Arixtra).....	100
		FORACARE GD40.....	123

FORACARE PREMIUM V10 TEST.....	123	gabapentin (once-daily) tab 300 mg, 450 mg, 600 mg,	
FORACARE TEST N GO TEST S.....	123	750 mg, 900 mg (Gralise).....	74
FORA 6 CONNECT.....	123	gabapentin oral soln 250 mg/5ml (Neurontin).....	87
FORA 6 CONNECT/GTEL BLOOD.....	123	gabapentin tab 600 mg, 800 mg (Neurontin).....	88
FORA D40/G31 BLOOD GLUCOS.....	123	GABARONE.....	88
FORA G20 BLOOD GLUCOSE TE.....	123	GALAFOLD.....	33
FORA GD50 BLOOD GLUCOSE T.....	123	GALANTAMINE HYDROBROMIDE.....	74
FORA GD20 TEST STRIPS.....	123	galantamine hydrobromide cap er 24hr 8 mg, 16 mg,	
FORA GTEL BLOOD GLUCOSE T.....	123	24 mg (Razadyne er).....	74
FORA TN'G/TN'G VOICE BLOO.....	123	galantamine hydrobromide tab 4 mg, 8 mg, 12 mg.....	74
FORA TN'G ADVANCE PRO BLO.....	123	GALZIN.....	97
FORA V30A BLOOD GLUCOSE T.....	123	GANIRELIX ACETATE.....	33
FORA V10 BLOOD GLUCOSE TE.....	123	ganirelix acetate soln prefilled syringe 250 mcg/0.5ml	
FORFIVO XL.....	65	(Ganirelix acetate).....	33
formoterol fumarate soln nebu 20 mcg/2ml		GARDASIL 9.....	11
(Perforomist).....	52	GASTROCROM.....	59
FORTEO.....	33	gatifloxacin ophth soln 0.5% (Zymaxid).....	106
FOSAMAX.....	33	GATTEX.....	59
FOSAMAX PLUS D.....	33	GAVILYTE-C.....	54
fosamprenavir calcium tab 700 mg (base equiv)		GAVRETO.....	15
(Lexiva).....	5	GE100 BLOOD GLUCOSE TEST.....	123
fosfomycin tromethamine powd pack 3 gm (base		gefitinib tab 250 mg (Iressa).....	15
equivalent) (Monurol).....	9	gemfibrozil tab 600 mg (Lopid).....	46
fosinopril sodium & hydrochlorothiazide tab 10-12.5		GEMTESA.....	61
mg, 20-12.5 mg.....	42	GENABIO COVID-19 RAPID SE.....	123
fosinopril sodium tab 10 mg, 20 mg, 40 mg.....	42	GENOTROPIN.....	33
FOSRENOL.....	58	GENOTROPIN MINIQUICK.....	33
FOTIVDA.....	15	gentamicin sulfate cream 0.1%.....	115
FRAGMIN.....	100	gentamicin sulfate oint 0.1%.....	115
FRAICHE 5000 PREVI.....	109	gentamicin sulfate ophth soln 0.3%.....	106
FREESTYLE LIBRE 2/READER/.....	128	GENULTIMATE TEST STRIPS.....	123
FREESTYLE LIBRE 3/READER/.....	128	GENVOYA.....	6
FREESTYLE LIBRE/READER/FL.....	128	GEODON.....	67
FREESTYLE LIBRE 2/SENSOR/.....	128	GHT TEST STRIPS.....	123
FREESTYLE LIBRE 3/SENSOR/.....	128	GILENYA.....	74
FREESTYLE LIBRE 14 DAY/RE.....	128	GILOTRIF.....	15
FREESTYLE LIBRE 14 DAY/SE.....	128	GIMOTI.....	59
FREESTYLE LIBRE 2 PLUS/SE.....	128	GLASSIA.....	54
FREESTYLE LIBRE 3 PLUS/SE.....	128	glatiramer acetate soln prefilled syringe 20 mg/ml, 40	
FREESTYLE PRECISION NEO B.....	123	mg/ml (Copaxone).....	74
FROVA.....	85	GLEEVEC.....	15
frovatriptan succinate tab 2.5 mg (base equivalent)		GLEOSTINE.....	15
(Frova).....	85	GLIMEPIRIDE.....	26
FRUZAQLA.....	15	glimepiride tab 1 mg, 2 mg, 4 mg (Amaryl).....	26
FULPHILA.....	99	GLIPIZIDE.....	26
FUROSCIX.....	44	glipizide-metformin hcl tab 2.5-250 mg, 2.5-500 mg,	
FUROSEMIDE.....	44	5-500 mg.....	26
furosemide oral soln 10 mg/ml.....	44	glipizide tab er 24hr 2.5 mg, 5 mg, 10 mg (Glucotrol	
furosemide tab 20 mg, 40 mg, 80 mg (Lasix).....	44	xl).....	26
FUZEON.....	5	glipizide tab 5 mg, 10 mg.....	26
FYCOMPA.....	87	GLOPERBA.....	86
FYLNETRA.....	99	GLUCAGON EMERGENCY KIT FO.....	26
G		glucagon for inj 1 mg.....	26
gabapentin cap 100 mg, 300 mg, 400 mg		GLUCOCARD EXPRESSION BLOO.....	123
(Neurontin).....	87	GLUCOCARD 01 SENSOR PLUS.....	123
		GLUCOCARD SHINE TEST STRI.....	123
		GLUCOCARD VITAL TEST STRI.....	123

GLUCOCARD X-SENSOR.....	123	haloperidol tab 0.5 mg, 1 mg, 2 mg, 5 mg, 10 mg, 20 mg.....	67
GLUCOCOM TEST STRIPS.....	123	HARVONI.....	6
GLUCONAVII BLOOD GLUCOSE.....	123	HAVRIX.....	11
GLUCO PERFECT 3 TEST STRI.....	123	HEMADY.....	21
GLUCOTROL XL.....	26	HEMANGEOL.....	37
glutamine (sickle cell) powd pack 5 gm (Endari).....	99	HEMICLOR.....	44
glyburide-metformin tab 1.25-250 mg, 2.5-500 mg, 5-500 mg.....	26	HEMLIBRA.....	102
GLYBURIDE MICRONIZED.....	26	HEMOFIL M.....	102
glyburide tab 1.25 mg, 2.5 mg, 5 mg.....	26	HEPARIN SODIUM.....	100
GLYCATE.....	55	heparin sodium (porcine) inj 1000 unit/ml, 5000 unit/ml, 10000 unit/ml, 20000 unit/ml.....	100
GLYCOPYRROLATE.....	56	heparin sodium (porcine) pf inj 1000 unit/ml, 5000 unit/0.5ml.....	100
glycopyrrolate oral soln 1 mg/5ml (Cuvposa).....	56	HEPLISAV-B.....	11
glycopyrrolate tab 1 mg (Robinul).....	56	HETLIOZ.....	69
glycopyrrolate tab 2 mg (Robinul forte).....	56	HETLIOZ LQ.....	69
GLYXAMBI.....	26	HIBERIX.....	11
GNP EASY TOUCH GLUCOSE TE.....	123	HIPREX.....	9
GNP TRUE METRIX SELF MONI.....	123	HORIZANT.....	74
GNP TRUETRACK BLOOD GLUCO.....	123	HULIO.....	82
GNP TRUETRACK SMART SYSTE.....	123	HUMALOG.....	29
GOCOVRI.....	91	HUMALOG JUNIOR KWIKPEN.....	29
GOJJI BLOOD GLUCOSE TEST.....	123	HUMALOG KWIKPEN.....	29
GOLYTELY.....	54	HUMALOG MIX 75/25.....	30
GOMEKLI.....	15	HUMALOG MIX 50/50 KWIKPEN.....	30
GONAL-F.....	33	HUMALOG MIX 75/25 KWIKPEN.....	30
GONAL-F RFF REDIJECT.....	33	HUMALOG TEMPO PEN.....	29
GOTOKNOW COVID-19 ANTIGEN.....	123	HUMATE-P.....	102
GRALISE.....	74	HUMATIN.....	3
granisetron hcl tab 1 mg.....	57	HUMATROPE.....	33
GRANIX.....	99	HUMIRA.....	82
GRASTEK.....	13	HUMIRA PEN.....	82
griseofulvin microsize susp 125 mg/5ml.....	4	HUMIRA PEN-CD/UC/HS START.....	82
griseofulvin microsize tab 500 mg.....	4	HUMIRA PEN-PS/UV STARTER.....	82
GRISEOFULVIN ULTRAMICROSI.....	4	HUMULIN 70/30.....	30
griseofulvin ultramicrosize tab 125 mg, 250 mg.....	4	HUMULIN 70/30 KWIKPEN.....	30
guanfacine hcl tab er 24hr 1 mg (base equiv), 2 mg (base equiv), 3 mg (base equiv), 4 mg (base equiv) (Intuniv).....	71	HUMULIN N.....	30
guanfacine hcl tab 1 mg, 2 mg.....	42	HUMULIN N KWIKPEN.....	30
GVOKE HYPOPEN 1-PACK.....	26	HUMULIN R.....	29
GVOKE HYPOPEN 2-PACK.....	26	HUMULIN R U-500 KWIKPEN.....	29
GVOKE KIT.....	26	HW EMBRACE PRO BLOOD GLUC.....	124
GVOKE PFS.....	26	HW EMBRACE TALK BLOOD GLU.....	124
GYNAZOLE-1.....	61	HYCANTIN.....	15
H		HYCODAN.....	50
HADLIMA.....	82	hydralazine hcl tab 10 mg, 25 mg, 50 mg, 100 mg.....	42
HADLIMA PUSH TOUCH.....	82	HYDREA.....	15
HAEGARDA.....	102	hydrochlorothiazide cap 12.5 mg.....	44
HALCINONIDE.....	115	hydrochlorothiazide tab 12.5 mg, 25 mg, 50 mg.....	44
halcinonide cream 0.1% (Halog).....	115	HYDROCODONE/IBUPROFEN.....	78
halobetasol propionate cream 0.05%.....	115	hydrocodone-acetaminophen soln 7.5-325 mg/15ml.....	78
halobetasol propionate foam 0.05% (Lexette).....	115	hydrocodone-acetaminophen tab 10-325 mg, 5-325 mg, 7.5-325 mg.....	78
halobetasol propionate oint 0.05%.....	115	hydrocodone-acetaminophen tab 5-300 mg, 7.5-300 mg, 10-300 mg.....	78
HALOG.....	115		
haloperidol lactate oral conc 2 mg/ml.....	67		

hydrocodone bitart-homatropine methylbromide tab 5-1.5 mg (Hycodan).....	50	IBSRELA	59
hydrocodone bitart-homatropine methylbrom soln 5-1.5 mg/5ml (Hycodan).....	50	IBTROZI.....	15
HYDROCODONE BITARTRATE/AC.....	78	IBUPROFEN.....	82
HYDROCODONE BITARTRATE ER.....	78	ibuprofen-famotidine tab 800-26.6 mg (Duexis).....	82
hydrocodone bitartrate tab er 24hr deter 20 mg, 30 mg, 40 mg, 60 mg, 80 mg, 100 mg (Hysingla er).....	78	ibuprofen susp 100 mg/5ml.....	82
hydrocodone-ibuprofen tab 7.5-200 mg.....	78	ibuprofen tab 400 mg, 600 mg, 800 mg.....	82
HYDROCODONE POLISTIREX/CH.....	50	icatibant acetate subcutaneous soln pref syr 30 mg/3ml (Firazyr).....	102
HYDROCORTISONE.....	110	ICLUSIG.....	15
HYDROCORTISONE ACETATE.....	115	IDELVION.....	102
HYDROCORTISONE ACETATE/PR.....	110	IDHIFA.....	15
hydrocortisone acetate suppos 25 mg.....	110	IGLUCOSE BLOOD GLUCOSE TE.....	124
HYDROCORTISONE BUTYRATE.....	115	IHEALTH BLOOD GLUCOSE TES.....	124
hydrocortisone butyrate lotion 0.1% (Locoid).....	115	IHEALTH COVID-19 ANTIGEN.....	124
hydrocortisone cream 1%.....	115	ILET INSULIN INFUSION KIT.....	128
hydrocortisone cream 2.5%.....	115	ILET INSULIN PUMP.....	128
hydrocortisone enema 100 mg/60ml (Cortenema).....	110	ILET STARTER KIT - CONTAC.....	128
hydrocortisone oint 1%.....	115	ILET STARTER KIT - INSET.....	128
hydrocortisone oint 2.5%.....	115	ILEVRO.....	106
hydrocortisone perianal cream 2.5% (Anusol-hc).....	110	imatinib mesylate tab 100 mg (base equivalent), 400 mg (base equivalent) (Gleevec).....	15
hydrocortisone tab 5 mg, 10 mg, 20 mg (Cortef).....	21	IMBRUVICA.....	15
hydrocortisone valerate cream 0.2%.....	115	IMCIVREE.....	34
hydrocortisone valerate oint 0.2%.....	115	imipramine hcl tab 10 mg, 25 mg, 50 mg.....	65
hydrocortisone w/ acetic acid otic soln 1-2%.....	109	imipramine pamoate cap 75 mg, 100 mg, 125 mg, 150 mg.....	65
hydromorphone hcl liqd 1 mg/ml (Dilaudid).....	78	imiquimod cream 5%.....	115
hydromorphone hcl tab er 24hr 8 mg, 12 mg, 16 mg, 32 mg.....	78	imiquimod cream 3.75% (Zyclara).....	115
hydromorphone hcl tab 2 mg, 4 mg, 8 mg (Dilaudid).....	78	IMITREX.....	85
HYDROXOCOBALAMIN.....	99	IMITREX STATDOSE REFILL.....	85
hydroxychloroquine sulfate tab 100 mg, 300 mg, 400 mg.....	8	IMITREX STATDOSE SYSTEM.....	85
hydroxychloroquine sulfate tab 200 mg (Plaquenil).....	8	IMKELDI.....	16
hydroxyurea cap 500 mg (Hydrea).....	15	IMOVAX RABIES (H.D.C.V.).....	11
hydroxyzine hcl syrup 10 mg/5ml.....	63	IMPAVIDO.....	9
hydroxyzine hcl tab 10 mg, 25 mg, 50 mg.....	63	IMPOYZ.....	115
HYDROXYZINE PAMOATE.....	63	IMULDOSA.....	115
hydroxyzine pamoate cap 25 mg, 50 mg (Vistaril).....	63	IMURAN.....	130
HYFTOR.....	115	IMVEXXY MAINTENANCE PACK.....	61
HYMPAVZI.....	102	IMVEXXY STARTER PACK.....	61
HYPERSAL.....	50	INATAL GT.....	94
HYRIMOZ.....	82	INBRIJA.....	91
HYRIMOZ PEDIATRIC CROHN'S.....	82	INCRELEX.....	34
HYRIMOZ PEDIATRIC CROHNS.....	82	INCRUSE ELLIPTA.....	52
HYRIMOZ PLAQUE PSORIASIS.....	82	indapamide tab 1.25 mg, 2.5 mg.....	44
HYRIMOZ PLAQUE PSORIASIS/.....	82	INDERAL LA.....	38
HYRIMOZ SENSOREADY CD/UC/.....	82	INDERAL XL.....	38
HYRIMOZ SENSOREADY PENS.....	82	INDICAID COVID-19 RAPID A.....	124
HYSINGLA ER.....	78	INDOCIN.....	82
HYZAAR.....	42	indomethacin cap er 75 mg.....	82
I		indomethacin cap 25 mg, 50 mg.....	82
ibandronate sodium tab 150 mg (base equivalent).....	33	indomethacin suppos 50 mg.....	82
IBRANCE.....	15	indomethacin susp 25 mg/5ml (Indocin).....	82
		INFANRIX.....	12
		INFINITY BLOOD GLUCOSE TE.....	124
		INFINITY VOICE.....	124
		INGREZZA.....	74
		INLYTA.....	16

INNOPRAN XL.....	38	isosorbide mononitrate tab er 24hr 30 mg, 60 mg, 120 mg.....	37
INPEFA.....	48	isotretinoin cap 10 mg, 20 mg, 25 mg, 30 mg, 35 mg, 40 mg (Absorica).....	115
INQOVI.....	16	isotretinoin cap 10 mg, 20 mg, 30 mg, 40 mg (Absorica).....	115
INREBIC.....	16	isradipine cap 2.5 mg, 5 mg.....	39
INSPIREASE DRUG DELIVERY.....	128	ISTALOL.....	106
INSPIREASE RESERVOIR BAGS.....	128	ISTURISA.....	34
INSPRA.....	42	ITOVEBI.....	16
INSULIN ASPART.....	29	itraconazole cap 100 mg (Sporanox).....	4
INSULIN ASPART FLEXPEN.....	29	itraconazole oral soln 10 mg/ml (Sporanox).....	4
INSULIN ASPART PENFILL.....	29	ivabradine hcl tab 5 mg (base equiv), 7.5 mg (base equiv) (Corlanor).....	48
INSULIN ASPART PROTAMINE/.....	30	IVERMECTIN.....	9
INSULIN DEGLUDEC.....	30	ivermectin cream 1% (Soolantra).....	115
INSULIN DEGLUDEC FLEXTUOC.....	30	ivermectin tab 3 mg (Stromectol).....	9
INSULIN GLARGINE MAX SOLO.....	30	IWILFIN.....	16
INSULIN GLARGINE SOLOSTAR.....	30	IXINITY.....	102
INSULIN GLARGINE-YFGN.....	30	IYUZEH.....	106
INSULIN LISPRO.....	29	J	
INSULIN LISPRO JUNIOR KWI.....	29	JADENU.....	120
INSULIN LISPRO KWIKPEN.....	29	JADENU SPRINKLE.....	120
INSULIN LISPRO PROTAMINE/.....	30	JAKAFI.....	16
INSULIN PEN NEEDLES – VARIOUS.....	128	JALYN.....	62
INSULIN SYRINGES – VARIOUS.....	128	JANUMET.....	27
INTELENCE.....	6	JANUMET XR.....	27
INTELISWAB COVID-19 RAPID.....	124	JANUVIA.....	27
IN TOUCH BLOOD GLUCOSE TE.....	124	JARDIANCE.....	27
INTRAROSA.....	62	JATENZO.....	21
INTUNIV.....	71	JAYPIRCA.....	16
INVEGA.....	68	JENLIVA PRENATAL/POSTNATA.....	94
INVELTYS.....	106	JENTADUETO.....	27
INVOKAMET.....	26	JENTADUETO XR.....	27
INVOKAMET XR.....	27	JIVI.....	102
INVOKANA.....	27	JOENJA.....	130
INZIRQO.....	44	JORNAY PM.....	71
IOPIDINE.....	106	JOURNAVX.....	77
IPOL INACTIVATED IPV.....	11	JUBLIA.....	115
ipratropium-albuterol nebu soln 0.5-2.5(3) mg/3ml.....	52	JULUCA.....	6
ipratropium bromide inhal soln 0.02%.....	52	JUXTAPID.....	46
ipratropium bromide nasal soln 0.03% (21 mcg/spray), 0.06% (42 mcg/spray).....	50	JYLAMVO.....	16
IQIRVO.....	59	JYNARQUE.....	34
irbesartan-hydrochlorothiazide tab 150-12.5 mg, 300-12.5 mg (Avalide).....	42	JYNNEOS.....	11
irbesartan tab 75 mg, 150 mg, 300 mg (Avapro).....	42	K	
IRESSA.....	16	KALETRA.....	6
IRON UP.....	99	KALYDECO.....	54
ISENTRESS.....	6	KAPSPARGO SPRINKLE.....	38
ISENTRESS HD.....	6	KARBINAL ER.....	49
isoniazid syrup 50 mg/5ml.....	3	KATERZIA.....	39
isoniazid tab 100 mg, 300 mg.....	3	KEPPRA.....	88
ISORDIL TITRADOSE.....	37	KEPPRA XR.....	88
isosorbide dinitrate-hydralazine hcl tab 20-37.5 mg (Bidil).....	48	KERENDIA.....	34
isosorbide dinitrate tab 10 mg, 20 mg, 30 mg.....	37	KESIMPTA.....	74
isosorbide dinitrate tab 5 mg (Isordil titradose).....	37	ketoconazole cream 2%.....	115
isosorbide dinitrate tab 40 mg (Isordil titradose).....	37		
ISOSORBIDE MONONITRATE.....	37		

ketoconazole foam 2% (Extina)	115	LAMICTAL STARTER/NOT TAKI	88
ketoconazole shampoo 2%	116	LAMICTAL STARTER/TAKING C	88
ketoconazole tab 200 mg	4	LAMICTAL STARTER/TAKING V	88
KETO-DIASTIX	124	LAMICTAL XR	88
KETOPROFEN	82	lamivudine oral soln 10 mg/ml (Epivir)	6
KETOPROFEN ER	82	lamivudine tab 150 mg, 300 mg (Epivir)	6
ketorolac tromethamine ophth soln 0.5% (Acular)	106	lamivudine tab 100 mg (hbv) (Epivir hbv)	6
ketorolac tromethamine ophth soln 0.4% (Acular Is)	106	lamivudine-zidovudine tab 150-300 mg (Combivir)	6
ketorolac tromethamine tab 10 mg	82	lamotrigine orally disintegrating tab 25 mg, 50 mg, 100 mg, 200 mg (Lamictal odt)	88
KETOSTIX	124	lamotrigine tab chewable dispersible 5 mg, 25 mg (Lamictal chewable di)	88
KEVEYIS	44	lamotrigine tab disint 25 (14) & 50 mg (14) & 100 mg (7) kit (Lamictal odt)	88
KEVZARA	82	lamotrigine tab disint 21 x 25 mg & 7 x 50 mg titration kit (Lamictal odt)	88
KHINDIVI	21	lamotrigine tab disint 42 x 50mg & 14 x 100mg titration kit (Lamictal odt)	88
KINERET	83	lamotrigine tab er 24hr 25 mg, 50 mg, 100 mg, 200 mg, 250 mg, 300 mg (Lamictal xr)	88
KINRIX	12	lamotrigine tab 25 mg, 100 mg, 150 mg, 200 mg (Lamictal)	88
KISQALI	16	lamotrigine tab 25 mg (42) & 100 mg (7) starter kit (Lamictal starter/not)	89
KITABIS PAK	3	lamotrigine tab 84 x 25 mg & 14 x 100 mg starter kit (Lamictal starter/tak)	89
KLARON	116	lamotrigine tab 35 x 25 mg starter kit (Lamictal starter/tak)	88
KLISYRI	116	LAMPIT	9
KLONOPIN	88	LANCETS – VARIOUS	128
KLOR-CON 8	97	LANOXIN	37
KLOR-CON 10	97	LANSOPRAZOLE/AMOXICILLIN/	56
KLOXXADO	120	lansoprazole cap delayed release 15 mg	56
KOATE	102	lansoprazole cap delayed release 30 mg (Prevacid)	56
KOATE-DVI	103	lansoprazole tab delayed release orally disintegrating 15 mg, 30 mg (Prevacid solutab)	56
KOGENATE FS	103	lanthanum carbonate chew tab 500 mg (elemental), 750 mg (elemental), 1000 mg (elemental) (Fosrenol)	59
KONVOMEF	56	LANTUS	31
KORLYM	27	LANTUS SOLOSTAR	31
KOSELUGO	16	lapatinib ditosylate tab 250 mg (base equiv) (Tykerb)	16
KOSHER PRENATAL PLUS IRON	94	LASIX	44
KOVALTRY	103	latanoprost ophth soln 0.005% (Xalatan)	106
K-PHOS	97	LATUDA	68
K-PHOS NEUTRAL	97	LAZCLUZE	16
K-PHOS NO 2	62	LEDIPASVIR/SOFOSBUVIR	6
KRAZATI	16	leflunomide tab 10 mg, 20 mg (Arava)	83
KRINTAFEL	8	lenalidomide cap 5 mg, 10 mg, 15 mg, 20 mg, 25 mg (Revlimid)	130
KROGER HEALTHPRO GLUCOSE	124	lenalidomide caps 2.5 mg (Revlimid)	130
KUVAN	34	LENVIMA 4 MG DAILY DOSE	16
KYZATREX	21	LENVIMA 8 MG DAILY DOSE	16
		LENVIMA 10 MG DAILY DOSE	16
		LENVIMA 12MG DAILY DOSE	16
L			
labetalol hcl tab 100 mg, 200 mg, 300 mg	38		
LABETALOL HYDROCHLORIDE	38		
lacosamide oral solution 10 mg/ml (Vimpat)	88		
lacosamide tab 50 mg, 100 mg, 150 mg, 200 mg (Vimpat)	88		
lactic acid (ammonium lactate) cream 12%	116		
lactic acid (ammonium lactate) lotion 12%	116		
lactulose (encephalopathy) solution 10 gm/15ml	59		
lactulose oral crystal packet 10 gm, 20 gm	54		
lactulose solution 10 gm/15ml	54		
LAGEVRIO	6		
LAMICTAL	88		
LAMICTAL CHEWABLE DISPERS	88		
LAMICTAL ODT	88		

LENVIMA 14 MG DAILY DOSE.....	16	LEXETTE.....	116
LENVIMA 18 MG DAILY DOSE.....	16	LIALDA.....	59
LENVIMA 20 MG DAILY DOSE.....	16	LICART.....	116
LENVIMA 24 MG DAILY DOSE.....	16	lidocaine hcl soln 4%.....	116
LEQSELVI.....	116	lidocaine hcl viscous soln 2%.....	109
LESCOL XL.....	46	lidocaine oint 5%.....	116
LETAIRIS.....	48	lidocaine patch 5% (Lidoderm).....	116
letrozole tab 2.5 mg (Femara).....	16	lidocaine-prilocaine cream 2.5-2.5%.....	116
leucovorin calcium tab 10 mg.....	16	LIDODERM.....	116
leucovorin calcium tab 5 mg, 15 mg, 25 mg.....	16	LIKMEZ.....	9
LEUKERAN.....	16	linezolid for susp 100 mg/5ml (Zyvox).....	9
LEUKINE.....	99	linezolid tab 600 mg (Zyvox).....	9
leuprolide acetate inj kit 1 mg/0.2ml (5 mg/ml).....	16	LINZESS.....	59
levalbuterol hcl soln nebu conc 1.25 mg/0.5ml (base equiv) (Xopenex concentrate).....	52	liothyronine sodium tab 5 mcg, 25 mcg, 50 mcg (Cytomel).....	31
levalbuterol hcl soln nebu 0.31 mg/3ml (base equiv), 0.63 mg/3ml (base equiv), 1.25 mg/3ml (base equiv) (Xopenex).....	52	LIPITOR.....	46
LEVALBUTEROL TARTRATE HFA.....	52	LIPOFEN.....	46
LEVAMLODIPINE.....	39	liraglutide soln pen-injector 18 mg/3ml (6 mg/ml) (Victoza).....	27
levetiracetam oral soln 100 mg/ml (Keppra).....	89	liraglutide (weight mngmt) soln pen-inj 18 mg/3ml (6 mg/ml) (Saxenda).....	71
levetiracetam tab er 24hr 500 mg, 750 mg (Keppra xr).....	89	lisdexamphetamine dimesylate cap 10 mg, 20 mg, 30 mg, 40 mg, 50 mg, 60 mg, 70 mg (Vyvanse).....	71
levetiracetam tab 250 mg, 500 mg, 750 mg, 1000 mg (Keppra).....	89	lisdexamphetamine dimesylate chew tab 10 mg, 20 mg, 30 mg, 40 mg, 50 mg, 60 mg (Vyvanse).....	71
LEVOBUNOLOL HCL.....	106	lisinopril & hydrochlorothiazide tab 10-12.5 mg, 20-12.5 mg, 20-25 mg (Zestoretic).....	42
levocarnitine oral soln 1 gm/10ml (10%) (Carnitor).....	34	lisinopril tab 2.5 mg, 5 mg, 10 mg, 20 mg, 30 mg, 40 mg (Zestril).....	42
levocarnitine tab 330 mg (Carnitor).....	34	LITFULO.....	116
levocetirizine dihydrochloride soln 2.5 mg/5ml (0.5 mg/ml).....	49	LITHIUM CARBONATE.....	68
levocetirizine dihydrochloride tab 5 mg.....	49	lithium carbonate cap 150 mg, 300 mg, 600 mg (Lithium carbonate).....	68
LEVOFLOXACIN.....	106	lithium carbonate tab er 450 mg.....	68
levofloxacin oral soln 25 mg/ml.....	3	lithium carbonate tab er 300 mg (Lithobid).....	68
levofloxacin tab 250 mg, 500 mg, 750 mg.....	3	lithium carbonate tab 300 mg.....	68
levonor-eth est tab 0.15-0.02/0.025/0.03 mg & eth est 0.01 mg (Quartette).....	24	lithium oral solution 8 meq/5ml.....	68
levonorgestrel & ethinyl estradiol (91-day) tab 0.15-0.03 mg.....	24	LITHOBID.....	68
levonorgestrel & ethinyl estradiol tab 0.1 mg-20 mcg, 0.15 mg-30 mcg.....	24	LITHOSTAT.....	62
levonorgestrel-eth estra tab 0.05-30/0.075-40/0.125-30mg-mcg.....	24	LIVALO.....	46
levonorgestrel-ethinyl estradiol (continuous) tab 90-20 mcg.....	24	LIVDELZI.....	59
levonorgestrel-ethinyl estradiol-fe tab 0.1 mg-20 mcg (21) (Balcoltra).....	24	LIVMARLI.....	59
levonorgestrel tab 1.5 mg.....	24	LIVTENCITY.....	6
levonorg-eth est tab 0.1-0.02mg(84) & eth est tab 0.01mg(7) (Loseasonique).....	24	LODINE.....	83
levonorg-eth est tab 0.15-0.03mg(84) & eth est tab 0.01mg(7) (Seasonique).....	24	LODOCO.....	48
levorphanol tartrate tab 2 mg, 3 mg.....	78	LODOSYN.....	91
LEVOTHYROXINE SODIUM.....	31	lofexidine hcl tab 0.18 mg (base equivalent) (Lucemyra).....	74
levothyroxine sodium tab 25 mcg, 50 mcg, 75 mcg, 88 mcg, 100 mcg, 112 mcg, 125 mcg, 137 mcg, 150 mcg, 175 mcg, 200 mcg, 300 mcg (Synthroid).....	31	LOKELMA.....	130
LEXAPRO.....	65	LO LOESTRIN FE.....	24
		LOMOTIL.....	55
		LONSURF.....	16
		loperamide hcl cap 2 mg.....	55
		LOPID.....	46
		lopinavir-ritonavir tab 100-25 mg, 200-50 mg (Kaletra).....	6
		LOPRESSOR.....	38

lorazepam conc 2 mg/ml	63	MALARONE	8
lorazepam tab 0.5 mg, 1 mg, 2 mg (Ativan)	63	malathion lotion 0.5% (Ovide)	116
LORBRENA	16	maraviroc tab 150 mg, 300 mg (Selzentry)	6
LOREEV XR	63	MARINOL	57
losartan potassium & hydrochlorothiazide tab 50-12.5 mg, 100-12.5 mg, 100-25 mg (Hyzaar)	42	MARPLAN	65
losartan potassium tab 25 mg, 50 mg, 100 mg (Cozaar)	42	MATERNACEL	94
LOTEMAX	106	MATERVIA	94
LOTEMAX SM	106	MATULANE	17
LOTENSIN	42	MAVENCLAD	74
LOTENSIN HCT	42	MAVYRET	6
loteprednol etabonate ophth gel 0.5% (Lotemax)	106	MAXALT	85
loteprednol etabonate ophth susp 0.2% (Alrex)	106	MAXALT-MLT	85
loteprednol etabonate ophth susp 0.5% (Lotemax)	106	MAXIDEX	106
LOTREL	42	MAXITROL	106
LOTRONEX	59	MAYZENT	74
lovastatin tab 10 mg, 20 mg, 40 mg	46	MAYZENT STARTER PACK	74
LOVAZA	46	meclizine hcl tab 50 mg	57
LOVENOX	100	meclizine hcl tab 12.5 mg, 25 mg	57
loxapine succinate cap 5 mg, 10 mg, 25 mg, 50 mg	68	MECLOFENAMATE SODIUM	83
lubiprostone cap 8 mcg, 24 mcg (Amitiza)	59	MEDISENSE GLUCOSE KETONE	128
LUCEMYRA	74	MEDISENSE HIGH/MID/LOW CO	128
LULICONAZOLE	116	MEDROL	21
LUMAKRAS	16	MEDROL DOSEPAK	21
LUMIGAN	106	medroxyprogesterone acetate im susp 150 mg/ml (Depo-provera contrac)	24
LUMINOPIA	130	medroxyprogesterone acetate im susp prefilled syr 150 mg/ml (Depo-provera contrac)	24
LUMRYZ	74	medroxyprogesterone acetate tab 2.5 mg, 5 mg, 10 mg (Provera)	25
LUMRYZ STARTER PACK	74	mefenamic acid cap 250 mg	83
LUNESTA	69	mefloquine hcl tab 250 mg	8
LUPKYNIS	130	MEGESTROL ACETATE	25
LUPRON DEPOT (1-MONTH)	16	megestrol acetate susp 40 mg/ml	17
LUPRON DEPOT (3-MONTH)	17	megestrol acetate tab 20 mg, 40 mg	17
LUPRON DEPOT (4-MONTH)	17	MEIJER TRUETEST BLOOD GLU	124
LUPRON DEPOT (6-MONTH)	17	MEIJER TRUETRACK BLOOD GL	124
LUPRON DEPOT-PED (1-MONTH)	34	MEKINIST	17
LUPRON DEPOT-PED (3-MONTH)	34	MEKTOVI	17
LUPRON DEPOT-PED (6-MONTH)	34	MELOXICAM	83
lurasidone hcl tab 20 mg, 40 mg, 60 mg, 80 mg, 120 mg (Latuda)	68	meloxicam cap 5 mg, 10 mg	83
LURBIRO	83	meloxicam tab 7.5 mg, 15 mg	83
LUZU	116	memantine hcl cap er 24hr 7 mg, 14 mg, 21 mg, 28 mg (Namenda xr)	74
LYBALVI	74	memantine hcl-donepezil hcl cap er 24hr 14-10 mg, 21-10 mg, 28-10 mg (Namzaric)	75
LYNPARZA	17	memantine hcl oral solution 2 mg/ml	74
LYRICA	89	memantine hcl tab 5 mg, 10 mg (Namenda)	75
LYRICA CR	74	memantine hcl tab 28 x 5 mg & 21 x 10 mg titration pack (Namenda titration pa)	75
LYSODREN	17	MENOPUR	34
LYTGOBI	17	MENOSTAR	23
LYUMJEV	29	MENQUADFI	11
LYUMJEV KWIKPEN	29	MENVEO	11
LYUMJEV TEMPO PEN	29	MEPRON	9
M		mercaptapurine susp 2000 mg/100ml (20 mg/ml) (Purixan)	17
MACROBID	9	mercaptapurine tab 50 mg	17
MACRODANTIN	9		

MERILOG	29	methylphenidate hcl cap er 24hr 10 mg (xr), 15 mg (xr), 20 mg (xr), 30 mg (xr), 40 mg (xr), 50 mg (xr), 60 mg (xr) (Aptensio xr)	71
MERILOG SOLOSTAR	29	methylphenidate hcl cap er 10 mg (cd), 20 mg (cd), 30 mg (cd), 40 mg (cd), 50 mg (cd), 60 mg (cd)	71
mesalamine cap dr 400 mg (Delzicol)	59	methylphenidate hcl chew tab 2.5 mg, 5 mg, 10 mg	71
mesalamine cap er 24hr 0.375 gm (Apriso)	59	methylphenidate hcl soln 5 mg/5ml, 10 mg/5ml (Methylin)	71
mesalamine cap er 500 mg (Pentasa)	59	methylphenidate hcl tab er 10 mg, 20 mg	72
mesalamine enema 4 gm	59	methylphenidate hcl tab er osmotic release (osm) 72 mg	72
mesalamine suppos 1000 mg (Canasa)	59	methylphenidate hcl tab er osmotic release (osm) 18 mg, 27 mg, 36 mg, 54 mg (Concerta)	71
mesalamine tab delayed release 1.2 gm (Lialda)	59	methylphenidate hcl tab 5 mg, 10 mg, 20 mg (Ritalin)	72
mesalamine tab delayed release 800 mg	59	METHYLPHENIDATE HYDROCHLO	72
mesna tab 400 mg (Mesnex)	17	methylphenidate td patch 10 mg/9hr, 15 mg/9hr, 20 mg/9hr, 30 mg/9hr (Daytrana)	72
MESNEX	17	methylprednisolone tab 4 mg, 8 mg, 16 mg, 32 mg (Medrol)	21
MESTINON	93	methylprednisolone tab therapy pack 4 mg (21) (Medrol dosepak)	21
MESTINON TIMESPAN	93	methyltestosterone cap 10 mg	21
METADATE CD	71	metoclopramide hcl soln 5 mg/5ml (10 mg/10ml) (base equiv)	59
METAXALONE	93	metoclopramide hcl tab 5 mg (base equivalent), 10 mg (base equivalent) (Reglan)	59
metaxalone tab 400 mg	93	METOCLOPRAMIDE ODT	59
metaxalone tab 800 mg	93	metolazone tab 2.5 mg, 5 mg, 10 mg	44
metformin hcl oral soln 500 mg/5ml (Riomet)	27	metoprolol & hydrochlorothiazide tab 50-25 mg, 100-25 mg, 100-50 mg	42
metformin hcl tab er 24hr 500 mg, 750 mg	27	metoprolol succinate tab er 24hr 25 mg (tartrate equiv), 50 mg (tartrate equiv), 100 mg (tartrate equiv), 200 mg (tartrate equiv) (Toprol xl)	38
metformin hcl tab er 24hr modified release 500 mg, 1000 mg (Glumetza)	27	metoprolol tartrate tab 25 mg	38
metformin hcl tab er 24hr osmotic 500 mg, 1000 mg	27	metoprolol tartrate tab 37.5 mg, 75 mg	38
metformin hcl tab 500 mg, 850 mg, 1000 mg	27	metoprolol tartrate tab 50 mg, 100 mg (Lopressor)	38
METFORMIN HYDROCHLORIDE	27	METROCREAM	116
METHADONE HCL	78	METROGEL	116
methadone hcl conc 10 mg/ml (Methadose)	78	METRONIDAZOLE	9
methadone hcl soln 5 mg/5ml, 10 mg/5ml (Methadone hcl)	78	metronidazole cap 375 mg (Flagyl)	9
methadone hcl tab for oral susp 40 mg	78	metronidazole cream 0.75% (Metrocream)	116
methadone hcl tab 5 mg, 10 mg	78	metronidazole gel 0.75%	116
METHADONE HYDROCHLORIDE	78	metronidazole gel 1% (Metrogel)	116
METHADOSE	78	metronidazole lotion 0.75% (Metrolotion)	116
METHADOSE SUGAR-FREE	78	metronidazole tab 250 mg, 500 mg	9
methamphetamine hcl tab 5 mg	71	metronidazole vaginal gel 0.75%	62
methazolamide tab 25 mg, 50 mg	44	metyrosine cap 250 mg (Demser)	42
methenamine hippurate tab 1 gm (Hiprex)	9	mexiletine hcl cap 150 mg, 200 mg, 250 mg	40
methimazole tab 5 mg, 10 mg	31	MIACALCIN	34
METHITEST	21	MICARDIS	42
methocarbamol tab 1000 mg	93	MICARDIS HCT	43
methocarbamol tab 500 mg, 750 mg	93	MICONAZOLE 3	62
METHOTREXATE SODIUM	17	MICONAZOLE NITRATE/ZINC O	116
methotrexate sodium for inj 1 gm	17	MICORT HC	116
methotrexate sodium inj pf 50 mg/2ml (25 mg/ml), 250 mg/10ml (25 mg/ml), 1000 mg/40ml (25 mg/ml)	17	MICROCHAMBER	128
methotrexate sodium tab 2.5 mg (base equiv)	17		
METHOXSALEN	116		
methscopolamine bromide tab 2.5 mg, 5 mg	56		
methsuximide cap 300 mg (Celontin)	89		
METHYLDOPA	42		
methyldopa tab 250 mg	42		
methylergonovine maleate tab 0.2 mg	32		
METHYLIN	71		
methylphenidate hcl cap er 24hr 60 mg (la)	71		
methylphenidate hcl cap er 24hr 10 mg (la), 20 mg (la), 30 mg (la), 40 mg (la) (Ritalin la)	71		

MICRODOT TEST STRIPS	124	MOTTEGRITY.....	59
MICRODOT XTRA TEST STRIPS	124	MOTOFEN	55
MICROSPACER	128	MOTPOLY XR.....	89
midodrine hcl tab 2.5 mg, 5 mg, 10 mg.....	45	MOUNJARO.....	27
MIEBO.....	106	MOVANTIK	59
mifepristone tab 300 mg (Korlym)	27	MOVIPREP	54
MIGERGOT	85	moxifloxacin hcl ophth soln 0.5% (base equiv)	
MIGLITOL	27	(Vigamox).....	106
miglustat cap 100 mg (Zavesca)	99	moxifloxacin hcl tab 400 mg (base equiv)	3
MINIVELLE	23	MOXIFLOXACIN HYDROCHLORID.....	107
minocycline hcl cap 50 mg, 75 mg, 100 mg.....	2	MRESVIA.....	11
minocycline hcl tab er 24hr 55 mg, 65 mg, 80 mg, 105 mg, 115 mg (Solodyn).....	3	MS CONTIN	79
minocycline hcl tab 50 mg.....	3	MULPLETA	99
minocycline hcl tab 75 mg, 100 mg	3	MULTAQ.....	40
MINOCYCLINE HYDROCHLORIDE.....	3	mupirocin calcium cream 2%.....	116
minoxidil tab 2.5 mg, 10 mg	43	mupirocin oint 2%.....	116
MIPLYFFA	75	MYALEPT.....	34
mirabegron tab er 24 hr 25 mg, 50 mg (Myrbetriq)	61	MYCAPSSA	34
MIRCERA	99	mycophenolate mofetil cap 250 mg (Cellcept).....	130
MIRENA	24	mycophenolate mofetil for oral susp 200 mg/ml (Cellcept).....	130
mirtazapine orally disintegrating tab 15 mg, 30 mg, 45 mg (Remeron soltab).....	65	mycophenolate mofetil tab 500 mg (Cellcept).....	130
mirtazapine tab 7.5 mg, 45 mg	65	mycophenolate sodium tab dr 180 mg (mycophenolic acid equiv), 360 mg (mycophenolic acid equiv) (Myfortic).....	130
mirtazapine tab 15 mg, 30 mg (Remeron).....	65	MYDAYIS	72
MIRVASO	116	MYFEMBREE	23
MISC NEEDLES AND SYRINGES – VARIOUS.....	128	MYFORTIC	130
misoprostol tab 100 mcg, 200 mcg (Cytotec)	56	MYGLUCOHEALTH BLOOD GLUCO	124
MITIGARE.....	86	MYHIBBIN.....	130
MM BLULINK GLUCOSE TEST S.....	124	MYLERAN.....	17
MM EASY TOUCH GLUCOSE TES	124	MYRBETRIQ.....	61
M-M-R II	11	MYSOLINE.....	89
M-NATAL PLUS.....	94	MYTESI	55
MNEXSPIKE COVID-19 VACCIN.....	11	N	
modafinil tab 100 mg, 200 mg (Provigil).....	72	nabumetone tab 500 mg, 750 mg.....	83
moexipril hcl tab 7.5 mg, 15 mg.....	43	nadolol tab 20 mg, 40 mg, 80 mg (Corgard)	38
MOLINDONE HYDROCHLORIDE	68	naftifine hcl cream 2%.....	116
mometasone furoate cream 0.1%	116	naftifine hcl gel 2% (Naftin).....	116
mometasone furoate nasal susp 50 mcg/act	50	NAFTIFINE HYDROCHLORIDE.....	116
mometasone furoate oint 0.1%.....	116	NAFTIN.....	116
mometasone furoate solution 0.1% (lotion)	116	NALOCET	79
montelukast sodium chew tab 4 mg (base equiv), 5 mg (base equiv) (Singulair).....	52	naloxone hcl inj 0.4 mg/ml, 4 mg/10ml.....	120
montelukast sodium oral granules packet 4 mg (base equiv) (Singulair)	52	naloxone hcl nasal spray 4 mg/0.1ml (Narcan).....	120
montelukast sodium tab 10 mg (base equiv) (Singulair).....	52	naloxone hcl soln prefilled syringe 0.4 mg/ml.....	120
MORPHINE SULFATE.....	78	naloxone hcl soln prefilled syringe 2 mg/2ml	120
MORPHINE SULFATE ER.....	78	NALOXONE HYDROCHLORIDE.....	120
morphine sulfate oral soln 10 mg/5ml, 100 mg/5ml (20 mg/ml)	78	naltrexone hcl tab 50 mg.....	120
morphine sulfate oral soln 20 mg/5ml (Morphine sulfate).....	78	NAMENDA TITRATION PAK	75
morphine sulfate tab er 15 mg, 30 mg, 60 mg, 100 mg, 200 mg (Ms contin).....	78	NAMZARIC	75
morphine sulfate tab 15 mg, 30 mg (Morphine sulfate).....	79	NAPRELAN.....	83
		naproxen-esomeprazole magnesium tab dr 375-20 mg, 500-20 mg (Vimovo).....	83
		naproxen sodium tab er 24hr 375 mg (base equiv), 500 mg (base equiv), 750 mg (base equiv) (Naprelan).....	83

naproxen sodium tab 275 mg	83	NEXAVAR	17
naproxen sodium tab 550 mg (Anaprox ds)	83	NEXICLON XR	43
naproxen susp 125 mg/5ml (Naprosyn)	83	NEXIUM	56
naproxen tab ec 375 mg, 500 mg (Ec-naprosyn)	83	NEXLETOL	46
naproxen tab 250 mg, 375 mg	83	NEXLIZET	46
naproxen tab 500 mg (Naprosyn)	83	NEXTSTELLIS	24
naratriptan hcl tab 1 mg (base equiv), 2.5 mg (base equiv)	85	NGENLA	34
NARCAN	120	NIACIN	46
NARDIL	65	niacin tab er 500 mg (antihyperlipidemic), 750 mg (antihyperlipidemic), 1000 mg (antihyperlipidemic) (Niaspan)	46
NASCOBAL	99	NIACOR	46
NATACYN	107	nicardipine hcl cap 20 mg, 30 mg	39
NATAL PNV	94	nicotine polacrilex gum 2 mg, 4 mg	75
NATAZIA	24	nicotine polacrilex lozenge 2 mg, 4 mg	75
nateglinide tab 60 mg, 120 mg	27	nicotine td patch 24hr 7 mg/24hr, 14 mg/24hr, 21 mg/24hr	75
NATESTO	22	NICOTINE TRANSDERMAL SYST	75
NATROBA	116	NICOTROL NS	75
NAYZILAM	89	nifedipine cap 10 mg, 20 mg	39
nebiivolol hcl tab 2.5 mg (base equivalent), 5 mg (base equivalent), 10 mg (base equivalent), 20 mg (base equivalent) (Bystolic)	38	nifedipine tab er 24hr 30 mg, 60 mg, 90 mg	39
NEBUPENT	9	nifedipine tab er 24hr osmotic release 30 mg, 60 mg, 90 mg (Procardia xl)	39
NEEVO DHA	95	NILANDRON	17
NEFFY	45	NILOTINIB	17
NEMLUVIO	116	nilotinib hcl cap 50 mg (base equivalent), 150 mg (base equivalent), 200 mg (base equivalent) (Tasigna)	17
NEOMATERNA	95	nilutamide tab 150 mg (Nilandron)	17
NEOMYCIN/POLYMYXIN/GRAMIC	107	NIMODIPINE	39
NEOMYCIN/POLYMYXIN/HYDROC	107	nimodipine cap 30 mg	39
neomycin-bacitrac zn-polymyx 5(3.5)mg-400unt-10000unt op oin	107	NINLARO	17
neomycin-polymyxin-dexamethasone ophth oint 0.1% (Maxitrol)	107	NISOLDIPINE ER	39
neomycin-polymyxin-dexamethasone ophth susp 0.1% (Maxitrol)	107	nisoldipine tab er 24hr 8.5 mg, 17 mg, 34 mg (Sular)	39
neomycin-polymyxin-hc otic soln 1%	109	nitazoxanide tab 500 mg (Alinia)	10
neomycin-polymyxin-hc otic susp 3.5 mg/ml-10000 unit/ml-1%	109	nitisinone cap 2 mg, 5 mg, 10 mg, 20 mg (Orfadin)	34
neomycin sulfate tab 500 mg	3	NITRO-BID	37
NEONATAL COMPLETE	95	NITRO-DUR	37
NEONATAL PLUS	95	NITROFURANTOIN	10
NEORAL	130	nitrofurantoin macrocrystalline cap 25 mg, 50 mg, 100 mg (Macrochantin)	10
NEO-SYNALAR	116	nitrofurantoin monohydrate macrocrystalline cap 100 mg (Macrobid)	10
NEO-VITAL RX	95	nitrofurantoin susp 25 mg/5ml	10
NERLYNX	17	nitroglycerin oint 0.4% (Rectiv)	110
NESTABS	95	nitroglycerin sl tab 0.3 mg, 0.4 mg, 0.6 mg (Nitrostat)	37
NESTABS DHA	95	nitroglycerin td patch 24hr 0.1 mg/hr, 0.2 mg/hr, 0.4 mg/hr, 0.6 mg/hr (Nitro-dur)	37
NESTABS ONE	95	nitroglycerin tl soln 0.4 mg/spray (400 mcg/spray) (Nitrolingual pumpspr)	37
NEULASTA	99	NITROLINGUAL	37
NEULASTA ONPRO KIT	99	NITROSTAT	37
NEUPOGEN	99	NITRO-TIME	37
NEUPRO	91	NITYR	34
NEURONTIN	89	NIVA-PLUS	95
NEUTEK 2TEK TEST STRIPS	124		
NEVANAC	107		
NEVIRAPINE	6		
nevirapine tab er 24hr 400 mg	6		
nevirapine tab 200 mg	6		

NIVA THYROID	31	NOVOLIN N FLEXPEN	30
NIVESTYM	99	NOVOLIN R.....	30
NIZATIDINE.....	56	NOVOLIN R FLEXPEN	30
nizatidine cap 150 mg.....	56	NOVOLOG.....	29
NORDITROPIN FLEXPRO.....	34	NOVOLOG FLEXPEN	29
norelgestromin-ethinyl estradiol td ptwk 150-35 mcg/24hr	24	NOVOLOG MIX 70/30.....	30
norethindrone & ethinyl estradiol-fe chew tab 0.4 mg-35 mcg.....	24	NOVOLOG MIX 70/30 PREFILL.....	30
norethindrone & ethinyl estradiol-fe chew tab 0.8 mg-25 mcg (Generess fe).....	24	NOVOLOG PENFILL	29
norethindrone & ethinyl estradiol tab 0.4 mg-35 mcg, 0.5 mg-35 mcg, 1 mg-35 mcg	24	NOVOSEVEN RT.....	103
norethindrone ace & ethinyl estradiol-fe tab 1 mg-20 mcg, 1.5 mg-30 mcg.....	25	NOXAFIL	4
norethindrone ace & ethinyl estradiol tab 1 mg-20 mcg, 1.5 mg-30 mcg.....	25	NP THYROID 15.....	31
norethindrone ace-eth estradiol-fe chew tab 1 mg-20 mcg (24) (Minastrin 24 fe).....	25	NP THYROID 30.....	31
norethindrone ace-ethinyl estradiol-fe cap 1 mg-20 mcg (24) (Taytulla).....	25	NP THYROID 60.....	31
norethindrone ace-ethinyl estradiol-fe tab 1 mg-20 mcg (24).....	25	NP THYROID 90.....	31
norethindrone acetate-ethinyl estradiol tab 0.5 mg-2.5 mcg, 1 mg-5 mcg.....	23	NP THYROID 120.....	31
norethindrone acetate tab 5 mg (Aygestin).....	25	NUBEQA	17
norethindrone ac-ethinyl estrad-fe tab 1-20/1-30/1-35 mg-mcg.....	24	NUCALA	52
norethindrone-eth estradiol tab 0.5-35/0.75-35/1-35 mg-mcg, 0.5-35/1-35/0.5-35 mg-mcg	25	NUCYNTA.....	79
norethindrone tab 0.35 mg.....	25	NUCYNTA ER.....	79
NORGESIC.....	93	NUDEXTA.....	75
NORGESIC FORTE.....	93	NULIBRY.....	34
norgestimate & ethinyl estradiol tab 0.25 mg-35 mcg.....	25	NUPLAZID.....	68
norgestimate-eth estrad tab 0.18-25/0.215-25/0.25-25 mg-mcg, 0.18-35/0.215-35/0.25-35 mg-mcg	25	NURTEC.....	85
norgestrel & ethinyl estradiol tab 0.3 mg-30 mcg.....	25	NUTROPIN AQ NUSPIN 5.....	34
NORITATE.....	116	NUTROPIN AQ NUSPIN 10.....	34
NORLIQVA.....	39	NUTROPIN AQ NUSPIN 20.....	34
NORPACE.....	40	NUVARING	25
NORPACE CR.....	40	NUVAXOVID COVID-19 VACCIN.....	11
NORPRAMIN	65	NUVESSA	62
NORTHERA	45	NUVIGIL	72
nortriptyline hcl cap 10 mg, 25 mg, 50 mg, 75 mg (Pamelor).....	65	NUWIQ	103
nortriptyline hcl soln 10 mg/5ml.....	65	NUZYRA.....	3
NORVASC.....	39	NYMALIZE	39
NORVIR.....	6	NYPOZI	99
NOURIANZ.....	91	NYSTATIN.....	109
NOVAFERRUM PEDIATRIC DROP	99	nystatin cream 100000 unit/gm	116
NOVA MAX GLUCOSE TEST STR.....	124	nystatin oint 100000 unit/gm.....	116
NOVAREL.....	34	nystatin susp 100000 unit/ml.....	109
NOVOEIGHT.....	103	nystatin tab 500000 unit.....	4
NOVOLIN 70/30.....	30	nystatin topical powder 100000 unit/gm.....	116
NOVOLIN 70/30 FLEXPEN.....	30	nystatin-triamcinolone cream 100000-0.1 unit/gm- %.....	116
NOVOLIN N.....	30	nystatin-triamcinolone oint 100000-0.1 unit/gm- %.....	116
		NYVEPRIA	99
		O	
		OB COMPLETE	95
		OB COMPLETE/DHA.....	95
		OB COMPLETE ONE.....	95
		OB COMPLETE PETITE	95
		OB COMPLETE PREMIER	95
		OBIZUR.....	103
		OCTREOTIDE ACETATE	34
		octreotide acetate inj 200 mcg/ml (0.2 mg/ml), 1000 mcg/ml (1 mg/ml).....	34

octreotide acetate inj 50 mcg/ml (0.05 mg/ml), 100 mcg/ml (0.1 mg/ml), 500 mcg/ml (0.5 mg/ml) (Sandostatin).....	34	ONDANSETRON HCL.....	57
OCUFLOX.....	107	ondansetron hcl oral soln 4 mg/5ml.....	57
ODACTRA.....	13	ondansetron hcl tab 4 mg, 8 mg.....	57
ODEFSEY.....	6	ONDANSETRON ODT.....	57
ODOMZO.....	17	ondansetron orally disintegrating tab 4 mg, 8 mg.....	57
OFEV.....	54	ONE DROP BLOOD GLUCOSE TE.....	124
OFLOXACIN.....	3	ONETOUCH ULTRA.....	124
ofloxacin ophth soln 0.3% (Ocuflox).....	107	ONETOUCH ULTRA BLUE TEST.....	124
ofloxacin otic soln 0.3%.....	109	ONETOUCH ULTRA TEST STRIP.....	124
OGSIVEO.....	17	ONETOUCH VERIO TEST STRIP.....	124
OHC COVID-19 ANTIGEN SELF.....	124	ONE VITE WOMENS PRENATAL.....	95
OHTUVAYRE.....	52	ONEXTON.....	117
OJEMDA.....	17	ONFI.....	89
OJJAARA.....	18	ONGENTYS.....	91
olanzapine-fluoxetine hcl cap 6-50 mg, 12-25 mg, 12-50 mg.....	75	ONGLYZA.....	27
olanzapine-fluoxetine hcl cap 3-25 mg, 6-25 mg (Symbyax).....	75	ONUREG.....	18
olanzapine orally disintegrating tab 5 mg, 10 mg, 15 mg, 20 mg (Zyprexa zydis).....	68	ONYDA XR.....	72
olanzapine tab 2.5 mg, 5 mg, 7.5 mg, 10 mg, 15 mg, 20 mg (Zyprexa).....	68	ONZETRA XSAIL.....	85
olmesartan-amlodipine-hydrochlorothiazide tab 20-5-12.5 mg, 40-5-12.5 mg, 40 5-25 mg, 40-10-12.5 mg, 40-10-25 mg (Tribenzor).....	43	OPFOLDA.....	35
olmesartan medoxomil-hydrochlorothiazide tab 20-12.5 mg, 40-12.5 mg, 40-25 mg (Benicar hct).....	43	OPIPZA.....	68
olmesartan medoxomil tab 5 mg, 20 mg, 40 mg (Benicar).....	43	OPSUMIT.....	48
olopatadine hcl nasal soln 0.6% (Patanase).....	50	OPSYNVI.....	48
olopatadine hcl ophth soln 0.2% (base equivalent).....	107	OPTICHAMBER.....	128
OLPRUVA.....	35	OPTICHAMBER DIAMOND.....	129
OLUMIANT.....	83	OPTICHAMBER DIAMOND/LARGE.....	129
OMECLAMOX-PAK.....	56	OPTICHAMBER DIAMOND/MEDIU.....	129
omega-3-acid ethyl esters cap 1 gm (Lovaza).....	46	OPTICHAMBER DIAMOND/SMALL.....	129
omeprazole cap delayed release 10 mg, 20 mg, 40 mg.....	56	OPTIONS GYNOL II VAGINAL.....	62
omeprazole-sodium bicarbonate cap 20-1100 mg, 40-1100 mg (Zegerid).....	56	OPTIUMEZ TEST STRIPS.....	124
omeprazole-sodium bicarbonate powd pack for susp 20-1680 mg, 40-1680 mg (Zegerid).....	56	OPVEE.....	120
OMNARIS.....	50	OPZELURA.....	117
OMNIFLEX DIAPHRAGM.....	128	ORACEA.....	117
OMNIPOD DASH INTRO KIT (G.....	128	ORALAIR.....	13
OMNIPOD DASH PODS (GEN 4).....	128	ORAPRED ODT.....	21
OMNIPOD 5 DEXCOM G7G6 INT.....	128	ORAVIG.....	109
OMNIPOD 5 DEXCOM G7G6 POD.....	128	ORENCIA.....	83
OMNIPOD 5 LIBRE2 PLUS G6.....	128	ORENCIA CLICKJECT.....	83
OMNITROPE.....	35	ORENITRAM.....	48
OMVOH.....	59	ORENITRAM TITRATION KIT M.....	48
ON/GO COVID-19 ANTIGEN SE.....	124	ORFADIN.....	35
ON/GO ONE COVID-19 ANTIGE.....	124	ORGOVYX.....	18
ONAPGO.....	91	ORIAHNN.....	23
ON CALL EXPRESS BLOOD GLU.....	124	ORLISSA.....	35
		ORKAMBI.....	54
		ORLADEYO.....	103
		ORLISTAT.....	72
		ORPHENADRINE/ASPIRIN/CAFF.....	93
		orphenadrine citrate tab er 12hr 100 mg.....	93
		ORPHENGESIC FORTE.....	93
		ORSERDU.....	18
		oseltamivir phosphate cap 30 mg (base equiv), 45 mg (base equiv), 75 mg (base equiv) (Tamiflu).....	6
		oseltamivir phosphate for susp 6 mg/ml (base equiv) (Tamiflu).....	6
		OSPHERA.....	35
		OTEZLA.....	83
		OTEZLA/OTEZLA XR 28 DAY T.....	83

OTEZLA XR.....	83	PALFORZIA LEVEL 10.....	13
OTOVEL.....	109	PALFORZIA LEVEL 11 (MAINT.....	13
OTULFI.....	117	PALFORZIA LEVEL 11 (TITRA.....	13
OVIDE.....	117	paliperidone tab er 24hr 1.5 mg, 3 mg, 6 mg, 9 mg	
OVIDREL.....	35	(Invega)	68
OXAPROZIN.....	83	PALYNZIQ.....	35
oxaprozin tab 600 mg (Daypro)	83	PAMELOR.....	65
oxazepam cap 10 mg, 15 mg, 30 mg	63	PANCREAZE.....	57
oxcarbazepine susp 300 mg/5ml (60 mg/ml)		PANDA MASK LARGE.....	129
(Trileptal)	89	PANDA MASK MEDIUM.....	129
oxcarbazepine tab er 24hr 150 mg, 300 mg, 600 mg		PANDA MASK SMALL.....	129
(Oxtellar xr)	89	PANRETIN.....	117
oxcarbazepine tab 150 mg, 300 mg, 600 mg		pantoprazole sodium ec tab 20 mg (base equiv), 40	
(Trileptal)	89	mg (base equiv) (Protonix)	56
OXERVATE.....	107	pantoprazole sodium for delayed release susp packet	
oxiconazole nitrate cream 1% (Oxistat)	117	40 mg (Protonix)	56
OXISTAT.....	117	paricalcitol cap 4 mcg	35
OXTELLAR XR.....	89	paricalcitol cap 1 mcg, 2 mcg (Zemlar)	35
OXYBUTYNIN CHLORIDE.....	61	PARI VORTEX MASK/PEDIATRI.....	129
oxybutynin chloride solution 5 mg/5ml	61	PARLODEL.....	91
oxybutynin chloride tab er 24hr 15 mg	61	PARNATE.....	65
oxybutynin chloride tab er 24hr 5 mg, 10 mg (Ditropan		paroxetine hcl tab er 24hr 12.5 mg, 25 mg, 37.5 mg	
xl)	61	(Paxil cr)	65
oxybutynin chloride tab 5 mg	61	paroxetine hcl tab 10 mg, 20 mg, 30 mg, 40 mg	
OXYCODONE/ACETAMINOPHEN.....	79	(Paxil)	65
OXYCODONE AND ACETAMINOPH.....	79	PAROXETINE HYDROCHLORIDE.....	65
oxycodone hcl cap 5 mg	79	paroxetine mesylate cap 7.5 mg (base equiv)	75
oxycodone hcl conc 100 mg/5ml (20 mg/ml)	79	PAXIL.....	65
oxycodone hcl soln 5 mg/5ml	79	PAXIL CR.....	65
oxycodone hcl tab 10 mg, 20 mg	79	PAXLOVID.....	6
oxycodone hcl tab 5 mg, 15 mg, 30 mg		pazopanib hcl tab 200 mg (base equiv) (Votrient)	18
(Roxicodone)	79	PEDIAPRED.....	21
OXYCODONE HYDROCHLORIDE.....	79	PEDIARIX.....	12
OXYCODONE HYDROCHLORIDE/A.....	79	PEDIATRIC PANDA MASK.....	129
oxycodone w/ acetaminophen tab 5-325 mg, 7.5-325		PEDVAX HIB.....	11
mg, 10-325 mg (Percocet)	79	PEGASYS.....	6
oxycodone w/ acetaminophen tab 2.5-325 mg		peg 3350-kcl-na bicarb-nacl-na sulfate for soln 236	
(Percocet)	79	gm (Golytely)	54
OXYCONTIN.....	79	peg 3350-kcl-nacl-na sulfate-na ascorbate-c for soln	
oxymorphone hcl tab 5 mg, 10 mg	79	100 gm (Moviprep)	54
OXYMORPHONE HYDROCHLORIDE.....	79	peg 3350-kcl-sod bicarb-nacl for soln 420 gm	55
OXYTROL.....	61	PEG-PREP.....	55
OZEMPIC.....	27	PEMAZYRE.....	18
OZOBAX DS.....	93	PENBRAYA.....	11
P		penciclovir cream 1% (Denavir)	117
PALFORZIA INITIAL DOSE ES.....	13	penicillamine cap 250 mg (Cuprimine)	130
PALFORZIA LEVEL 0.....	13	penicillamine tab 250 mg (Depen titratabs)	130
PALFORZIA LEVEL 1.....	13	PENICILLIN V POTASSIUM.....	1
PALFORZIA LEVEL 2.....	13	penicillin v potassium tab 250 mg, 500 mg	1
PALFORZIA LEVEL 3.....	13	PENMENVY.....	11
PALFORZIA LEVEL 4.....	13	PENNSAID.....	117
PALFORZIA LEVEL 5.....	13	PENTACEL.....	12
PALFORZIA LEVEL 6.....	13	pentamidine isethionate for nebulization soln 300 mg	
PALFORZIA LEVEL 7.....	13	(Nebupent)	10
PALFORZIA LEVEL 8.....	13	PENTASA.....	59
PALFORZIA LEVEL 9.....	13	pentoxifylline tab er 400 mg	103
		PEPCID.....	56

perampanel tab 2 mg, 4 mg, 6 mg, 8 mg, 10 mg, 12 mg (Fycompa)	89	PLAVIX	103
PERCOCET.....	79	PLEGRIDY	75
PERFOROMIST.....	52	PLEGRIDY STARTER PACK.....	75
PERIDEX.....	109	PLENVU.....	55
PERINDOPRIL ERBUMINE.....	43	PNEUMOVAX 23.....	12
perindopril erbumine tab 4 mg	43	PNV 27-CA/FE/FA.....	95
permethrin cream 5%	117	PNV-DHA.....	95
PERPHENAZINE/AMITRIPTYLIN.....	75	PNV-DHA+DOCUSATE.....	95
perphenazine tab 2 mg, 4 mg, 8 mg, 16 mg	68	PNV-OMEGA.....	95
PERTZYE.....	58	PNV PRENATAL PLUS MULTIVI.....	95
PHARMACIST CHOICE AUTOCOD.....	124	PNV-SELECT.....	95
PHARMACIST CHOICE NO CODI.....	124	PNV TABS 20-1.....	95
PHEBURANE.....	35	POCKET CHAMBER.....	129
PHENELZINE SULFATE.....	65	POCKETCHEM EZ BLOOD GLUCO.....	125
phenobarbital elixir 20 mg/5ml	69	POCKET SPACER.....	129
phenobarbital tab 64.8 mg, 97.2 mg	69	PODOFILOX.....	117
phenobarbital tab 15 mg, 16.2 mg, 30 mg, 32.4 mg, 60 mg, 100 mg	69	podofilox gel 0.5% (Condylox)	117
phenoxybenzamine hcl cap 10 mg (Dibenzyline)	43	POGO AUTOMATIC TEST CARTR.....	125
phentermine hcl cap 15 mg, 30 mg	72	POKONZA.....	97
phentermine hcl cap 37.5 mg (Adipex-p)	72	polymyxin b-trimethoprim ophth soln 10000 unit/ml-0.1% (Polytrim)	107
phentermine hcl tab 8 mg	72	POMALYST.....	18
phentermine hcl tab 37.5 mg (Adipex-p)	72	PONVORY.....	75
phentermine hcl-topiramate cap er 24hr 3.75-23 mg, 7.5-46 mg, 11.25-69 mg, 15-92 mg (Qsymia)	72	PONVORY 14-DAY STARTER PA.....	75
phenytoin chew tab 50 mg (Dilantin infatabs)	89	posaconazole susp 40 mg/ml (Noxafil)	4
phenytoin sodium extended cap 200 mg, 300 mg (Phenytek)	89	posaconazole tab delayed release 100 mg (Noxafil)	4
phenytoin sodium extended cap 100 mg (Dilantin)	89	potassium chloride cap er 8 meq, 10 meq	97
phenytoin susp 125 mg/5ml (Dilantin-125)	89	POTASSIUM CHLORIDE ER.....	97
PHEXXI.....	62	potassium chloride microencapsulated crys er tab 15 meq	97
phytonadione tab 5 mg (Mephyton)	94	potassium chloride microencapsulated crys er tab 10 meq, 20 meq	97
PIFELTRO.....	7	potassium chloride oral soln 10% (20 meq/15ml), 20% (40 meq/15ml)	98
pilocarpine hcl ophth soln 1%, 2%, 4%	107	potassium chloride powder packet 20 meq	98
pilocarpine hcl ophth soln 1.25% (Vuity)	107	potassium chloride tab er 10 meq (K-tab)	98
pilocarpine hcl tab 5 mg, 7.5 mg (Salagen)	109	potassium chloride tab er 8 meq (600 mg)	98
PILOT COVID-19 AT-HOME TE.....	124	potassium chloride tab er 20 meq (1500 mg) (K-tab)	98
pimecrolimus cream 1% (Elidel)	117	potassium citrate tab er 5 meq (540 mg) (Urocit-k 5)	62
PIMOZIDE.....	75	potassium citrate tab er 10 meq (1080 mg) (Urocit-k 10)	62
pindolol tab 5 mg, 10 mg	38	potassium citrate tab er 15 meq (1620 mg) (Urocit-k 15)	62
pioglitazone hcl-glimepiride tab 30-2 mg, 30-4 mg (Duetact)	27	potassium phosphate monobasic tab 500 mg (K-phos)	98
pioglitazone hcl-metformin hcl tab 15-500 mg, 15-850 mg (Actoplus met)	27	pot phos monobasic w/sod phos di & monobas tab 155-852-130mg (K-phos neutral)	97
pioglitazone hcl tab 15 mg (base equiv), 30 mg (base equiv), 45 mg (base equiv) (Actos)	27	PRADAXA.....	100
PIP BLOOD GLUCOSE TEST ST.....	124	PRALUENT.....	47
PIQRAY 200MG DAILY DOSE.....	18	pramipexole dihydrochloride tab er 24hr 0.375 mg, 0.75 mg, 2.25 mg, 3 mg, 3.75 mg, 4.5 mg (Mirapex er)	92
PIQRAY 250MG DAILY DOSE.....	18	pramipexole dihydrochloride tab er 24hr 1.5 mg (Mirapex er)	92
PIQRAY 300MG DAILY DOSE.....	18		
PIRFENIDONE.....	54		
pirfenidone cap 267 mg (Esbriet)	54		
pirfenidone tab 267 mg, 801 mg (Esbriet)	54		
piroxicam cap 10 mg, 20 mg (Feldene)	83		
pitavastatin calcium tab 1 mg, 2 mg, 4 mg (Livalo)	46		
PLAQUENIL.....	8		

pramipexole dihydrochloride tab 0.125 mg, 0.25 mg, 0.5 mg, 0.75 mg, 1 mg, 1.5 mg	92	PRENATE PIXIE	96
prasugrel hcl tab 5 mg (base equiv), 10 mg (base equiv) (Effient)	103	PRENATE RESTORE	96
pravastatin sodium tab 10 mg, 20 mg, 40 mg, 80 mg	47	PRENATOL-M	96
praziquantel tab 600 mg (Biltricide)	9	PRENATRIX	96
prazosin hcl cap 1 mg, 2 mg, 5 mg (Minipress)	43	PRENA 1 TRUE	95
PRECISION GLUCOSE KETONE	129	PRENATRYL	96
PRECISION SOF-TACT TEST S	125	PRESTALIA	43
PRECISION XTRA BLOOD GLUC	125	PRETOMANID	3
PRED FORTE	107	PREVACID	56
PRED MILD	107	PREVACID SOLUTAB	56
prednisolone acetate ophth susp 1% (Pred forte)	107	PREVIDENT 5000 BOOSTER PL	109
PREDNISOLONE SODIUM PHOSP	21	PREVIDENT 5000 DRY MOUTH	109
prednisolone sodium phosphate oral soln 25 mg/5ml (base eq)	21	PREVIDENT 5000 ENAMEL PRO	109
prednisolone sod phosphate oral soln 15 mg/5ml (base equiv)	21	PREVIDENT FLUORIDE	109
prednisolone sod phosphate oral soln 10 mg/5ml (base equiv), 20 mg/5ml (base equiv)	21	PREVIDENT 5000 KIDS	109
prednisolone sod phosphate oral soln 5 mg/5ml (base equiv) (Pediapred)	21	PREVIDENT 5000 ORTHO DEFE	109
prednisolone soln 15 mg/5ml	21	PREVIDENT 5000 PLUS	109
prednisolone tab 5 mg	21	PREVIDENT RINSE	109
PREDNISON	21	PREVIDENT 5000 SENSITIVE	109
PREDNISON INTENSOL	21	PREVNAR 20	12
prednisone tab 1 mg, 2.5 mg, 5 mg, 10 mg, 20 mg, 50 mg	21	PREVYMIS	7
prednisone tab therapy pack 5 mg (21), 5 mg (48), 10 mg (21), 10 mg (48)	21	PREZCOBIX	7
pregabalin cap 25 mg, 50 mg, 75 mg, 100 mg, 150 mg, 200 mg, 225 mg, 300 mg (Lyrica)	89	PREZISTA	7
pregabalin soln 20 mg/ml (Lyrica)	89	PRIFTIN	4
pregabalin tab er 24hr 82.5 mg, 165 mg, 330 mg (Lyrica cr)	75	PRILOSEC	56
PREGEN DHA	95	PRIMAQUINE PHOSPHATE	8
PREGENNA	95	primaquine phosphate tab 26.3 mg (15 mg base) (Primaquine phosphate)	8
PREGNYL	35	PRIMIDONE	89
PREMARIN	23	primidone tab 50 mg, 250 mg (Mysoline)	89
PREMESISRX	95	PRIORIX	12
PREMPHASE	23	PRISTIQ	65
PREMPRO	23	PROAIR RESPICLICK	52
PRENA1 CHEW	96	probenecid tab 500 mg	86
PRENA1 PEARL	96	PROCARDIA XL	39
PRENATAL	95	PROCARE SPACER CHAMBER W/	129
PRENATAL 19	96	PROCHAMBER VALVED HOLDING	129
PRENATAL PLUS	95	prochlorperazine maleate tab 5 mg (base equivalent), 10 mg (base equivalent)	68
PRENATAL PLUS VITAMIN AND	96	prochlorperazine suppos 25 mg	68
PRENATAL-U	96	PRO COMFORT INHALER SPACE	129
PRENATE	96	PROCRIT	99
PRENATE AM	96	PROCTOCORT	110
PRENATE DHA	96	PROCTOFOAM HC	110
PRENATE ELITE	96	PROCYSBI	62
PRENATE ENHANCE	96	PRODIGY NO CODING BLOOD G	125
PRENATE ESSENTIAL	96	PROFILNINE	103
PRENATE MINI	96	progesterone cap 100 mg, 200 mg (Prometrium)	25
		progesterone im in oil 50 mg/ml	25
		PROGLYCEM	27
		PROGRAF	130
		PROLATE	79
		PROLENSA	107
		PROMACTA	99
		promethazine-dm syrup 6.25-15 mg/5ml	50
		promethazine hcl oral soln 6.25 mg/5ml	49
		promethazine hcl suppos 12.5 mg, 25 mg	49

promethazine hcl tab 12.5 mg, 25 mg, 50 mg	49	QUADRACEL	12
promethazine w/ codeine syrup 6.25-10 mg/5ml	50	QUAZEPAM	69
PROMETHEGAN	49	QUESTRAN	47
PROMETRIUM	25	QUESTRAN LIGHT	47
propafenone hcl cap er 12hr 225 mg, 325 mg, 425 mg (Rythmol sr)	40	QUETIAPINE FUMARATE	68
propafenone hcl tab 150 mg, 225 mg, 300 mg	40	quetiapine fumarate tab er 24hr 50 mg, 150 mg, 200 mg, 300 mg, 400 mg (Seroquel xr)	68
PROPRANOLOL HCL	38	quetiapine fumarate tab 25 mg, 50 mg, 100 mg, 200 mg, 300 mg, 400 mg (Seroquel)	68
propranolol hcl cap er 24hr 60 mg, 80 mg, 120 mg, 160 mg (Inderal la)	38	QUICKTEK TEST STRIPS	125
propranolol hcl tab 10 mg, 20 mg, 40 mg, 60 mg, 80 mg	38	QUICK TOUCH BLOOD GLUCOSE	125
PROPRANOLOL HYDROCHLORIDE	38	QUICKVUE AT-HOME COVID-19	125
propylthiouracil tab 50 mg	31	QUILLICHEW ER	72
PROQUAD	12	QUILLIVANT XR	72
PROSCAR	62	QUINAPRIL/HYDROCHLOROTHIA	43
PROTONIX	56	quinapril hcl tab 5 mg, 10 mg, 20 mg, 40 mg (Accupril)	43
protriptyline hcl tab 5 mg, 10 mg	65	quinapril-hydrochlorothiazide tab 10-12.5 mg, 20-12.5 mg (Accuretic)	43
PROVERA	25	quinidine gluconate tab er 324 mg	40
PROVIDA OB	96	QUINIDINE SULFATE	40
PROVIGIL	72	quinine sulfate cap 324 mg (Qualaquin)	9
PRO VOICE V8/V9 BLOOD GLU	125	QUINTET AC BLOOD GLUCOSE	125
prucalopride succinate tab 1 mg (base equivalent), 2 mg (base equivalent) (Motegrity)	59	QUINTET BLOOD GLUCOSE TES	125
PRUDOXIN	117	QULIPTA	85
PRURADIK	117	QUVIVIQ	69
pseudoephed-bromphen-dm syrup 30-2-10 mg/5ml	50	QVAR REDIHALER	53
PTS PANELS EGLU	125	R	
PULMICORT	53	RABAVERT	12
PULMICORT FLEXHALER	53	RABEPRAZOLE SODIUM DR SPR	56
PULMOZYME	54	rabeprazole sodium ec tab 20 mg	57
PURE COMFORT INHALER SPAC	129	RADICAVA ORS	92
PURIXAN	18	RADICAVA ORS STARTER KIT	92
PYLERA	56	RAGWITEK	13
pyrazinamide tab 500 mg	4	RALDESY	65
PYRIDOSTIGMINE BROMIDE	93	raloxifene hcl tab 60 mg (Evista)	35
pyridostigmine bromide oral soln 60 mg/5ml (Mestinon)	94	ramelteon tab 8 mg (Rozerem)	69
pyridostigmine bromide tab er 180 mg (Mestinon timespan)	94	ramipril cap 1.25 mg, 2.5 mg, 5 mg, 10 mg (Altace)	43
pyridostigmine bromide tab 60 mg (Mestinon)	94	ranolazine tab er 12hr 500 mg, 1000 mg (Ranexa)	37
pyrimethamine tab 25 mg (Daraprim)	8	RAPAFLO	62
PYRUKYND	103	RAPID SARS-COV-2 ANTIGEN	125
PYRUKYND TAPER PACK	103	rasagiline mesylate tab 0.5 mg (base equiv), 1 mg (base equiv) (Azilect)	92
PYZCHIVA	117	RASUVO	83
Q		RAVICTI	35
QBRELIS	43	RAYALDEE	35
QBREXZA	117	RAYOS	21
QELBREE	72	REBIF	75
QFITLIA	103	REBIF REBIDOSE	75
QINLOCK	18	REBIF REBIDOSE TITRATION	75
QLOSI	107	REBIF TITRATION PACK	75
QNASL	50	REBINYN	103
QNASL CHILDRENS	50	RECOMBINATE	103
QSYMIA	72	RECOMBIVAX HB	12
		RECORLEV	35
		RECTIV	110

REFUAH PLUS BLOOD GLUCOSE	125	RINVOQ	83
REGLAN	60	RINVOQ LQ	84
RELAFEN DS	83	RIOMET	27
RELENZA DISKHALER	7	risedronate sodium tab delayed release 35 mg	
RELEUKO	99	(Atelvia)	35
RELEXXII	72	risedronate sodium tab 5 mg	35
RELION CONFIRM/MICRO TEST	125	risedronate sodium tab 30 mg	35
RELION PLATINUM BLOOD GLU	125	risedronate sodium tab 35 mg, 150 mg (Actonel)	35
RELION PREMIER BLOOD GLUC	125	RISPERDAL	68
RELION PRIME BLOOD GLUCOS	125	RISPERIDONE ODT	68
RELION TRUE METRIX BLOOD	125	risperidone orally disintegrating tab 0.5 mg, 1 mg, 2	
RELION ULTIMA BLOOD GLUCO	125	mg, 3 mg, 4 mg	68
RELISTOR	60	risperidone soln 1 mg/ml (Risperdal)	68
RELNATE DHA	96	risperidone tab 0.25 mg	68
RELPAK	85	risperidone tab 0.5 mg, 1 mg, 2 mg, 3 mg, 4 mg	
RELTONE	60	(Risperdal)	68
REMERON	65	RITALIN	72
REMERON SOLTAB	65	RITALIN LA	72
RENTHYROID	31	RITEFLO	129
REVELA	60	ritonavir tab 100 mg (Norvir)	7
repaglinide tab 0.5 mg, 1 mg, 2 mg	27	rivaroxaban for susp 1 mg/ml (Xarelto)	101
REPATHA	47	rivaroxaban tab 2.5 mg (Xarelto)	101
REPATHA SURECLICK	47	rivastigmine tartrate cap 1.5 mg (base equivalent), 3	
RESTASIS	107	mg (base equivalent), 4.5 mg (base equivalent), 6	
RESTASIS MULTIDOSE	107	mg (base equivalent)	75
RESTORIL	69	rivastigmine td patch 24hr 4.6 mg/24hr, 9.5 mg/24hr,	
RETACRIT	99	13.3 mg/24hr (Exelon)	76
RETEVMO	18	RIVFLOZA	63
RETIN-A	117	RIXUBIS	103
RETIN-A MICRO	117	rizatriptan benzoate oral disintegrating tab 5 mg (base	
RETIN-A MICRO PUMP	117	eq)	85
RETROVIR	7	rizatriptan benzoate oral disintegrating tab 10 mg	
REVATIO	48	(base eq) (Maxalt-mlt)	85
REVCIVI	35	rizatriptan benzoate tab 5 mg (base equivalent)	85
REVLIMID	131	rizatriptan benzoate tab 10 mg (base equivalent)	
REVUFORJ	18	(Maxalt)	85
REXTOVY	120	ROCALTROL	35
REXULTI	68	ROCKLATAN	107
REYATAZ	7	roflumilast tab 250 mcg, 500 mcg (Daliresp)	53
REYVOW	85	ROMVIMZA	18
REZDIFFRA	60	ropinirole hydrochloride tab er 24hr 2 mg (base	
REZLIDHIA	18	equivalent), 4 mg (base equivalent), 6 mg (base	
REZUROCK	131	equivalent), 8 mg (base equivalent), 12 mg (base	
REZVOGLAR KWIKPEN	31	equivalent)	92
RHOFADE	117	ropinirole hydrochloride tab 0.25 mg, 0.5 mg, 1 mg, 2	
RHOPRESSA	107	mg, 3 mg, 4 mg, 5 mg	92
RIASTAP	103	rosuvastatin calcium tab 5 mg, 10 mg, 20 mg, 40 mg	
RIBAVIRIN	7	(Crestor)	47
RIDAURA	83	ROTARIX	12
rifabutin cap 150 mg (Mycobutin)	4	ROTATEQ	12
rifampin cap 150 mg, 300 mg	4	ROXICODONE	79
RIGHTEST GS100 BLOOD GLUC	125	ROXYBOND	79
RIGHTEST GS300 BLOOD GLUC	125	ROZEREM	69
RIGHTEST GS333 BLOOD GLUC	125	ROZLYTREK	18
RIGHTEST GS550 BLOOD GLUC	125	RUBRACA	18
RIGHTEST GT333 BLOOD GLUC	125	RUCONEST	103
riluzole tab 50 mg (Rilutek)	92	rufinamide susp 40 mg/ml (Banzel)	89

rufinamide tab 200 mg, 400 mg (Banzel).....	89	sevelamer carbonate packet 0.8 gm, 2.4 gm (Renvela).....	60
RUKOBIA.....	7	sevelamer carbonate tab 800 mg (Renvela).....	60
RYALTRIS.....	50	sevelamer hcl tab 400 mg.....	60
RYBELSUS.....	27	sevelamer hcl tab 800 mg (Renagel).....	60
RYCLORA.....	49	SEVENFACT.....	103
RYDAPT.....	18	SEYSARA.....	3
RYTARY.....	92	SFROWASA.....	60
S		SHINGRIX.....	12
SABRIL.....	89	SIGNIFOR.....	36
sacubitril-valsartan tab 24-26 mg, 49-51 mg, 97-103 mg (Entresto).....	48	SIKLOS.....	100
SAFYRAL.....	25	sildenafil citrate for suspension 10 mg/ml (Revatio).....	48
SALAGEN.....	109	sildenafil citrate tab 25 mg, 50 mg, 100 mg (Viagra).....	49
SAMSCA.....	35	sildenafil citrate tab 20 mg (Revatio).....	48
SANCUSO.....	57	SILENOR.....	69
SANDIMMUNE.....	131	SILICONE MASK FOR BREATHE.....	129
SANDOSTATIN.....	35	SILICONE MASK FOR BREATHR.....	129
SANTYL.....	117	SILIQ.....	117
SAPHRIS.....	68	silodosin cap 4 mg, 8 mg (Rapaflo).....	63
sapropterin dihydrochloride powder packet 100 mg, 500 mg (Kuvan).....	35	SILVADENE.....	117
sapropterin dihydrochloride tab 100 mg (Kuvan).....	35	silver sulfadiazine cream 1% (Silvadene).....	117
SAVAYSA.....	101	SIMBRINZA.....	107
SAVELLA.....	76	SIMLANDI.....	84
SAVELLA TITRATION PACK.....	76	SIMLANDI 1-PEN KIT.....	84
saxagliptin hcl tab 2.5 mg (base equiv), 5 mg (base equiv) (Onglyza).....	27	SIMLANDI 2-PEN KIT.....	84
saxagliptin-metformin hcl tab er 24hr 2.5-1000 mg, 5-500 mg, 5-1000 mg (Kombiglyze xr).....	28	SIMPONI.....	84
SAXENDA.....	72	simvastatin tab 5 mg, 80 mg.....	47
SCSEMBLIX.....	18	simvastatin tab 10 mg, 20 mg, 40 mg (Zocor).....	47
scopolamine td patch 72hr 1 mg/3days (Transderm- scop).....	57	SINEMET.....	92
SECUADO.....	69	SINGULAIR.....	53
SEGLUROMET.....	28	sirolimus oral soln 1 mg/ml (Rapamune).....	131
SELARSDI.....	117	sirolimus tab 0.5 mg, 1 mg, 2 mg (Rapamune).....	131
SELECT-OB.....	96	SIRTURO.....	4
SELECT-OB+DHA.....	96	SITAGLIPTIN.....	28
selegiline hcl cap 5 mg.....	92	SITAGLIPTIN/METFORMIN HYD.....	28
selegiline hcl tab 5 mg.....	92	SITAVIG.....	7
selenium sulfide lotion 2.5%.....	117	SIVEXTRO.....	10
SELZENTRY.....	7	SKYCLARYS.....	92
SEMGLEE.....	31	SKYLA.....	25
SE-NATAL 19.....	96	SKYRIZI.....	60
SENSIPAR.....	35	SKYRIZI PEN.....	117
SEREVENT DISKUS.....	53	SKYTROFA.....	36
SERNIVO.....	117	SLYND.....	25
SEROQUEL.....	69	SMARTEST BLOOD GLUCOSE TE.....	125
SEROQUEL XR.....	69	SOANZ.....	44
SEROSTIM.....	36	sodium chloride soln nebu 3%.....	50
sertraline hcl cap 150 mg, 200 mg (Sertraline hydrochlo).....	66	sodium chloride soln nebu 7% (Hypersal).....	50
sertraline hcl oral concentrate for solution 20 mg/ml (Zoloft).....	66	sodium citrate & citric acid soln 500-334 mg/5ml.....	63
sertraline hcl tab 25 mg, 50 mg, 100 mg (Zoloft).....	66	SODIUM FLUORIDE.....	98
SERTRALINE HYDROCHLORIDE.....	66	SODIUM FLUORIDE/POTASSIUM.....	110
		sodium fluoride chew tab 0.25 mg f (from 0.55 mg naf), 0.5 mg f (from 1.1 mg naf), 1 mg f (from 2.2 mg naf).....	98
		sodium fluoride cream 1.1% (Prevident 5000 plus).....	110

sodium fluoride gel 1.1% (0.5% f) (Prevident fluoride).....	110	STENDRA.....	49
sodium fluoride paste 1.1% (Prevident 5000 boost).....	110	STEQEYMA.....	118
SODIUM FLUORIDE 5000 PPM.....	110	STIMUFEND.....	100
sodium fluoride rinse 0.2% (Prevident rinse).....	110	STIOLTO RESPIMAT.....	53
SODIUM OXYBATE.....	76	STIVARGA.....	18
sodium phenylbutyrate oral powder 3 gm/teaspoonful (Buphenyl).....	36	STRENSIQ.....	36
sodium phenylbutyrate tab 500 mg (Buphenyl).....	36	STRIBILD.....	7
sodium polystyrene sulfonate powder.....	131	STRIVERDI RESPIMAT.....	53
sodium polystyrene sulfonate susp 15 gm/60ml.....	131	STROMECTOL.....	9
sod sulfate-pot sulf-mg sulf oral sol 17.5-3.13-1.6 gm/177ml (Suprep bowel prep ki).....	55	SUBOXONE.....	79
SOFDRA.....	117	SUCRAID.....	58
SOFOSBUVIR/VELPATASVIR.....	7	sucralfate susp 1 gm/10ml (Carafate).....	57
SOGROYA.....	36	sucralfate tab 1 gm (Carafate).....	57
SOHONOS.....	93	SUFLAVE.....	55
solifenacin succinate tab 5 mg, 10 mg (Vesicare).....	61	SULAR.....	39
SOLIQUA 100/33.....	28	SULCONAZOLE NITRATE.....	118
SOLOSEC.....	9	SULFACETAMIDE SODIUM.....	107
SOLTAMOX.....	18	SULFACETAMIDE SODIUM/PRED.....	107
SOLUS V2 AUDIBLE TEST.....	125	sulfacetamide sodium lotion 10% (acne) (Klaron).....	118
SOMAVERT.....	36	sulfadiazine tab 500 mg.....	3
SOOLANTRA.....	117	sulfamethoxazole-trimethoprim susp 200-40 mg/5ml.....	10
sorafenib tosylate tab 200 mg (base equivalent) (Nexavar).....	18	sulfamethoxazole-trimethoprim tab 400-80 mg (Bactrim).....	10
SORILUX.....	117	sulfamethoxazole-trimethoprim tab 800-160 mg (Bactrim ds).....	10
sotalol hcl (afib/afi) tab 80 mg, 120 mg, 160 mg (Betapace af).....	38	SULFAMYLON.....	118
sotalol hcl tab 240 mg.....	38	sulfasalazine tab delayed release 500 mg (Azulfidine en-tabs).....	60
sotalol hcl tab 80 mg, 120 mg, 160 mg (Betapace).....	38	sulfasalazine tab 500 mg (Azulfidine).....	60
SOTYKTU.....	117	sulindac tab 150 mg, 200 mg.....	84
SOTYLIZE.....	38	sumatriptan-naproxen sodium tab 85-500 mg (Treximet).....	86
SOVALDI.....	7	sumatriptan nasal spray 5 mg/act, 20 mg/act (Imitrex).....	85
SOVUNA.....	9	sumatriptan succinate inj 6 mg/0.5ml.....	85
SPEEDY SWAB RAPID COVID-1.....	125	SUMATRIPTAN SUCCINATE REF.....	85
SPEVIGO.....	118	sumatriptan succinate solution auto-injector 4 mg/0.5ml, 6 mg/0.5ml (Imitrex statdose sys).....	86
SPIKEVAX COVID-19 VACCINE.....	12	sumatriptan succinate tab 25 mg, 50 mg, 100 mg (Imitrex).....	86
SPINOSAD.....	118	sunitinib malate cap 12.5 mg (base equivalent), 25 mg (base equivalent), 37.5 mg (base equivalent), 50 mg (base equivalent) (Sutent).....	18
SPIRIVA HANDIHALER.....	53	SUNLENCA.....	7
SPIRIVA RESPIMAT.....	53	SUNOSI.....	72
spironolactone & hydrochlorothiazide tab 25-25 mg (Aldactazide).....	44	SUPREME TEST STRIPS.....	125
spironolactone susp 25 mg/5ml (Carospir).....	44	SUPREP BOWEL PREP KIT.....	55
spironolactone tab 25 mg, 50 mg, 100 mg (Aldactone).....	45	SUTAB.....	55
SPORANOX.....	4	SUTENT.....	18
SPRITAM.....	89	SYMBICORT.....	53
SPRIX.....	84	SYMBRAVO.....	86
SPRYCEL.....	18	SYMBYAX.....	76
SPS.....	131	SYMDEKO.....	54
stannous fluoride conc 0.63%.....	110	SYMFI.....	7
stannous fluoride gel 0.4%.....	110	SYMPAZAN.....	89
STEGLATRO.....	28	SYMPROIC.....	60
STEGLUJAN.....	28		
STELARA.....	118		

SYMTUZA.....	7	telmisartan-hydrochlorothiazide tab 40-12.5 mg, 80-12.5 mg, 80-25 mg (Micardis hct).....	43
SYNALAR.....	118	telmisartan tab 20 mg, 40 mg, 80 mg (Micardis).....	43
SYNAREL.....	36	temazepam cap 7.5 mg, 22.5 mg (Restoril).....	69
SYNDROS.....	57	temazepam cap 15 mg, 30 mg (Restoril).....	69
SYNJARDY.....	28	temozolomide cap 5 mg, 20 mg, 100 mg, 140 mg, 180 mg.....	19
SYNJARDY XR.....	28	temozolomide cap 250 mg (Temodar).....	19
SYNTHROID.....	31	TENCON.....	77
SYNVISC.....	93	TENIVAC.....	12
SYNVISC ONE.....	93	tenofovir disoproxil fumarate tab 300 mg (Viread).....	7
SYPRINE.....	131	TENORETIC 50.....	43
T		TENORETIC 100.....	43
TABLOID.....	18	TENORMIN.....	38
TABRECTA.....	18	TEPMETKO.....	19
TACLONEX.....	118	terazosin hcl cap 1 mg (base equivalent), 2 mg (base equivalent), 5 mg (base equivalent), 10 mg (base equivalent).....	43
tacrolimus cap 0.5 mg, 1 mg, 5 mg (Prograf).....	131	terbinafine hcl tab 250 mg.....	4
tacrolimus oint 0.03%, 0.1% (Protopic).....	118	terbutaline sulfate tab 2.5 mg, 5 mg.....	53
tadalafil tab 2.5 mg, 5 mg, 10 mg, 20 mg (Cialis).....	49	terconazole vaginal cream 0.4%, 0.8%.....	62
tadalafil tab 20 mg (pah) (Adcirca).....	48	terconazole vaginal suppos 80 mg.....	62
TADLIQ.....	48	teriflunomide tab 7 mg, 14 mg (Aubagio).....	76
TAFINLAR.....	18	TERIPARATIDE.....	36
tafluprost preservative free (pf) ophth soln 0.0015% (Zioptan).....	107	teriparatide soln pen-inj 560 mcg/2.24ml (Forteo).....	36
TAGRISSO.....	18	TESTIM.....	22
TAKHZYRO.....	103	TESTOSTERONE.....	22
TALICIA.....	57	testosterone cypionate im inj in oil 100 mg/ml, 200 mg/ml (Depo-testosterone).....	22
TALTZ.....	118	TESTOSTERONE ENANTHATE.....	22
TALZENNA.....	19	TESTOSTERONE PUMP.....	22
TAMIFLU.....	7	testosterone td gel 12.5 mg/act (1%).....	22
tamoxifen citrate tab 10 mg (base equivalent), 20 mg (base equivalent).....	19	testosterone td gel 20.25 mg/act (1.62%) (AndroGel pump).....	22
tamsulosin hcl cap 0.4 mg (Flomax).....	63	testosterone td gel 25 mg/2.5gm (1%), 50 mg/5gm (1%) (AndroGel).....	22
TAPERDEX 7-DAY.....	21	testosterone td gel 40.5 mg/2.5gm (1.62%) (AndroGel).....	22
TAPERDEX 12-DAY.....	21	testosterone td soln 30 mg/act.....	22
TARCEVA.....	19	tetrabenazine tab 12.5 mg, 25 mg (Xenazine).....	76
TARGRETIN.....	19	tetracycline hcl cap 250 mg, 500 mg.....	3
TARON-C DHA.....	96	TETRACYCLINE HYDROCHLORID.....	3
TARPEYO.....	21	TEXACORT.....	118
TASCENSO ODT.....	76	TEZRULY.....	43
TASIGNA.....	19	TEZSPIRE.....	53
tasimelteon capsule 20 mg (Hetlioz).....	69	TGT BLOOD GLUCOSE TEST ST.....	125
TASMAR.....	92	THALITONE.....	45
tavaborole soln 5% (Kerydin).....	118	THALOMID.....	131
TAVALISSE.....	104	THEO-24.....	53
TAVNEOS.....	104	theophylline elixir 80 mg/15ml.....	53
TAYTULLA.....	25	theophylline soln 80 mg/15ml.....	53
TAZAROTENE.....	118	theophylline tab er 12hr 300 mg, 450 mg.....	53
tazarotene cream 0.05%, 0.1% (Tazorac).....	118	theophylline tab er 24hr 400 mg, 600 mg.....	53
tazarotene gel 0.05%, 0.1% (Tazorac).....	118	THIOLA.....	63
TAZORAC.....	118	THIOLA EC.....	63
TAZVERIK.....	19	thiothixene cap 1 mg, 2 mg, 5 mg, 10 mg.....	69
TECFIDERA.....	76	THRIVITE RX.....	96
TECFIDERA STARTER PACK.....	76		
TEGRETOL.....	89		
TEGRETOL-XR.....	90		
TEKURNA.....	43		
TELMISARTAN/AMLODIPINE.....	43		

THYQUIDITY.....	32	tolterodine tartrate cap er 24hr 2 mg, 4 mg (Detrol la).....	61
THYROID.....	32	tolterodine tartrate tab 1 mg, 2 mg (Detrol).....	61
tiagabine hcl tab 2 mg, 4 mg, 12 mg, 16 mg (Gabitril).....	90	tolvaptan tab 15 mg, 30 mg (Samsca).....	36
TIAZAC.....	39	TOPAMAX.....	90
TIBSOVO.....	19	TOPAMAX SPRINKLE.....	90
ticagrelor tab 60 mg, 90 mg (Brilinta).....	104	TOPICORT.....	118
TIGLUTIK.....	92	topiramate cap er 24hr 25 mg, 50 mg, 100 mg, 200 mg (Trokendi xr).....	90
TIKOSYN.....	40	topiramate cap er 24hr sprinkle 25 mg, 50 mg, 100 mg, 150 mg, 200 mg (Qudexy xr).....	90
timolol maleate ophth gel forming soln 0.25% (Timoptic-xe).....	107	topiramate oral soln 25 mg/ml (Eprontia).....	90
timolol maleate ophth gel forming soln 0.5% (Timoptic-xe).....	107	topiramate sprinkle cap 50 mg.....	90
timolol maleate ophth soln 0.25%, 0.5% (Timoptic).....	107	topiramate sprinkle cap 15 mg, 25 mg (Topamax sprinkle).....	90
timolol maleate ophth soln 0.5% (once-daily) (Istalol).....	108	topiramate tab 25 mg, 50 mg, 100 mg, 200 mg (Topamax).....	90
timolol maleate preservative free ophth soln 0.25% (Timoptic ocudose).....	108	TOPROL XL.....	38
timolol maleate preservative free ophth soln 0.5% (Timoptic ocudose).....	108	toremifene citrate tab 60 mg (base equivalent) (Fareston).....	19
timolol maleate tab 5 mg, 10 mg, 20 mg.....	38	torsemide tab 5 mg, 10 mg, 20 mg, 100 mg.....	45
timolol ophth soln 0.5% (Betimol).....	108	TOSYMRA.....	86
TIMOPTIC OCUDOSE.....	108	TOUJEO MAX SOLOSTAR.....	31
tinidazole tab 250 mg, 500 mg.....	10	TOUJEO SOLOSTAR.....	31
tiopronin tab delayed release 100 mg, 300 mg (Thiola ec).....	63	TOVIAZ.....	61
tiopronin tab 100 mg (Thiola).....	63	TRACLEER.....	48
tiotropium bromide inhal cap 18 mcg (base equiv) (Spiriva handihaler).....	53	TRADJENTA.....	28
TIROSINT.....	32	tramadol-acetaminophen tab 37.5-325 mg (Ultracet).....	80
TIROSINT-SOL.....	32	TRAMADOL HCL ER.....	79
TIVICAY.....	7	tramadol hcl tab er 24hr 100 mg, 200 mg, 300 mg.....	79
TIVICAY PD.....	7	tramadol hcl tab 100 mg.....	79
tizanidine hcl cap 2 mg (base equivalent), 4 mg (base equivalent), 6 mg (base equivalent) (Zanaflex).....	93	tramadol hcl tab 50 mg (Ultram).....	79
tizanidine hcl tab 2 mg (base equivalent).....	93	TRAMADOL HYDROCHLORIDE.....	79
tizanidine hcl tab 4 mg (base equivalent) (Zanaflex).....	93	TRANDOLAPRIL/VERAPAMIL HC.....	43
TLANDO.....	22	trandolapril tab 1 mg, 2 mg, 4 mg.....	43
TOBI.....	3	tranexamic acid tab 650 mg (Lysteda).....	101
TOBI PODHALER.....	3	tranylcypromine sulfate tab 10 mg (Parnate).....	66
TOBRADEX.....	108	TRAVATAN Z.....	108
TOBRADEX ST.....	108	travoprost ophth soln 0.004% (benzalkonium free) (bak free) (Travatan z).....	108
TOBRAMYCIN.....	3	trazodone hcl tab 300 mg.....	66
tobramycin-dexamethasone ophth susp 0.3-0.1% (Tobradex).....	108	trazodone hcl tab 50 mg, 100 mg, 150 mg.....	66
tobramycin nebu soln 300 mg/4ml (Bethkis).....	3	TRELEGY ELLIPTA.....	53
tobramycin nebu soln 300 mg/5ml (Tobi).....	3	TREMFYA.....	60
tobramycin ophth soln 0.3%.....	108	TREMFYA INDUCTION PACK FO.....	60
TOBREX.....	108	TREMFYA PEN.....	118
TODAY SPONGE.....	62	TRESIBA.....	31
TOLAK.....	118	TRESIBA FLEXTOUCH.....	31
tolcapone tab 100 mg (Tasmar).....	92	tretinoin cap 10 mg.....	19
TOLECTIN 600.....	84	tretinoin cream 0.025%, 0.05%, 0.1% (Retin-a).....	118
TOLMETIN SODIUM.....	84	tretinoin gel 0.05% (Atralin).....	118
TOLSURA.....	4	tretinoin gel 0.01% (Retin-a).....	118
		tretinoin gel 0.025% (Retin-a).....	118
		TRETINOIN MICROSPHERE.....	118
		tretinoin microsphere gel 0.08% (Retin-a micro pump).....	118

TRETINOIN MICROSPHERE PUM.....	119	TRYVIO	43
TRETTEN	104	TUDORZA PRESSAIR	53
TREXALL	19	TUKYSA	19
TREXIMET.....	86	TURALIO	19
TREZIX.....	80	TUXARIN ER	50
TRIAMCINOLONE ACETONIDE.....	119	TWIIST REFILL KIT.....	129
triamcinolone acetonide cream 0.025%, 0.1%,		TWIIST REFILL KIT/INFUSIO	129
0.5%.....	119	TWIIST STARTER KIT	129
triamcinolone acetonide dental paste 0.1%.....	110	TWINRIX	12
triamcinolone acetonide lotion 0.025%, 0.1%	119	TWIRLA	25
triamcinolone acetonide oint 0.05%	119	TWYNEO.....	119
triamcinolone acetonide oint 0.025%, 0.1%, 0.5%.....	119	TYBLUME	25
triamterene & hydrochlorothiazide cap 37.5-25		TYBOST	8
mg	45	TYENNE	84
triamterene & hydrochlorothiazide tab 37.5-25 mg		TYKERB	19
(Maxzide-25)	45	TYMLOS.....	36
triamterene & hydrochlorothiazide tab 75-50 mg		TYRVAYA.....	108
(Maxzide)	45	TYVASO	48
triamterene cap 50 mg, 100 mg (Dyrenium)	45	TYVASO DPI MAINTENANCE KI	48
TRIBENZOR.....	43	TYVASO DPI TITRATION KIT	48
TRICOR	47	TYVASO REFILL KIT	48
trientine hcl cap 250 mg (Syprine).....	131	TYVASO STARTER KIT.....	48
TRIENTINE HYDROCHLORIDE.....	131		
trifluoperazine hcl tab 1 mg (base equivalent), 2 mg		U	
(base equivalent), 5 mg (base equivalent), 10 mg		UBRELVY.....	86
(base equivalent)	69	UCERIS	21
TRIFLURIDINE.....	108	UDENYCA.....	100
TRIHENXYPHENIDYL HCL.....	92	UDENYCA ONBODY.....	100
trihexyphenidyl hcl tab 2 mg, 5 mg	92	ULORIC	86
TRIJARDY XR.....	28	ULTRAVATE.....	119
TRIKAFTA.....	54	UNISTRIP1 GENERIC.....	126
TRILEPTAL.....	90	UPNEEQ	108
trimethobenzamide hcl cap 300 mg	57	UPTRAVI.....	48
TRIMETHOPRIM	10	UPTRAVI TITRATION PACK.....	48
trimethoprim tab 100 mg	10	UROCIT-K 10.....	63
trimipramine maleate cap 25 mg, 50 mg, 100 mg	66	UROCIT-K 15.....	63
TRINATAL RX 1.....	96	UROXATRAL	63
TRINATE.....	96	URSODIOL	60
TRINTELLIX	66	ursodiol cap 300 mg	60
TRISTART DHA.....	96	ursodiol tab 250 mg (Urso 250).....	60
TRIUMEQ	7	ursodiol tab 500 mg (Urso forte)	60
TRIUMEQ PD.....	7	URSO FORTE.....	60
TROKENDI XR.....	90	USTEKINUMAB.....	119
tropium chloride cap er 24hr 60 mg.....	61	USTEKINUMAB-AEKN	119
tropium chloride tab 20 mg.....	61	USTEKINUMAB-TTWE	119
TRUDHESA.....	86		
TRUE FOCUS SELF MONITORIN	125	V	
TRUE METRIX BLOOD GLUCOSE	125	VAGIFEM	62
TRUE METRIX SELF MONITORI.....	125	valacyclovir hcl tab 500 mg, 1 gm (Valtrex).....	8
TRUETEST STRIPS.....	125	VALCHLOR.....	119
TRUETRACK TEST.....	126	VALCYTE	8
TRULANCE	60	valganciclovir hcl for soln 50 mg/ml (base equiv)	
TRULICITY	28	(Valcyte).....	8
TRUMENBA	12	valganciclovir hcl tab 450 mg (base equivalent)	
TRUQAP	19	(Valcyte).....	8
TRUVADA.....	7	VALIUM	63
TRYNGOLZA	36		

valproate sodium oral soln 250 mg/5ml (base equiv).....	90	venlafaxine hcl tab 25 mg (base equivalent), 37.5 mg (base equivalent), 50 mg (base equivalent), 75 mg (base equivalent), 100 mg (base equivalent).....	66
valproic acid cap 250 mg.....	90	VENTOLIN HFA.....	53
valsartan-hydrochlorothiazide tab 80-12.5 mg, 160-12.5 mg, 160-25 mg, 320-12.5 mg, 320-25 mg (Diovan hct).....	44	VEOZAH.....	36
valsartan oral soln 4 mg/ml.....	43	verapamil hcl cap er 24hr 120 mg, 180 mg, 240 mg (Verelan).....	39
valsartan tab 40 mg, 80 mg, 160 mg, 320 mg (Diovan).....	44	verapamil hcl tab er 120 mg, 180 mg, 240 mg (Calan sr).....	40
VALTOCO 5 MG DOSE.....	90	verapamil hcl tab 40 mg, 80 mg, 120 mg.....	40
VALTOCO 10 MG DOSE.....	90	VERAPAMIL HYDROCHLORIDE E.....	40
VALTOCO 15 MG DOSE.....	90	VERAPAMIL HYDROCHLORIDE S.....	40
VALTOCO 20 MG DOSE.....	90	VERASENS BLOOD GLUCOSE TE.....	126
VALTRES.....	8	VEREGEN.....	119
VANCOGIN.....	10	VERKAZIA.....	108
vancomycin hcl cap 125 mg (base equivalent), 250 mg (base equivalent) (Vancocin).....	10	VERQUVO.....	48
vancomycin hcl for oral soln 25 mg/ml (base equivalent) (Firvanq).....	10	VERSACLOZ.....	69
vancomycin hcl for oral soln 50 mg/ml (base equivalent) (Vancomycin hydrochlo).....	10	VERZENIO.....	19
VANDAZOLE.....	62	VESICARE.....	61
VANFLYTA.....	19	VEVYE.....	108
VANOS.....	119	VFEND.....	4
VANRAFIA.....	63	VIAGRA.....	49
VAQTA.....	12	VIBERZI.....	60
vardenafil hcl orally disintegrating tab 10 mg.....	49	VICTOZA.....	28
vardenafil hcl tab 2.5 mg, 5 mg, 10 mg, 20 mg.....	49	vigabatrin powd pack 500 mg (Sabril).....	90
varenicline tartrate tab 0.5 mg (base equiv), 1 mg (base equiv).....	76	vigabatrin tab 500 mg (Sabril).....	90
varenicline tartrate tab 11 x 0.5 mg & 42 x 1 mg start pack.....	76	VIGAFYDE.....	90
VARIVAX.....	12	VIGAMOX.....	108
VARUBI.....	57	VIIBRYD.....	66
VASCEPA.....	47	VIJOICE.....	131
VASERETIC.....	44	vilazodone hcl tab 10 mg, 20 mg, 40 mg (Viibryd).....	66
VASOTEC.....	44	VIMOVO.....	84
VAXELIS.....	12	VIMPAT.....	90
VAXNEUVANCE.....	12	VINATE DHA RF.....	97
VCF VAGINAL CONTRACEPTIVE.....	62	VIOKACE.....	58
VECAMYL.....	44	VIRACEPT.....	8
VECTICAL.....	119	VIREAD.....	8
VELIVET.....	25	VISTOGARD.....	120
VELPHORO.....	60	VITAFOL FE+.....	97
VELSIPITY.....	60	VITAFOL GUMMIES.....	97
VELTASSA.....	131	VITAFOL-OB.....	97
VEMLIDY.....	8	VITAFOL-OB+DHA.....	97
VENCLEXTA.....	19	VITAFOL-ONE.....	97
VENCLEXTA STARTING PACK.....	19	VITAFOL ULTRA.....	97
VENLAFAXINE BESYLATE ER.....	66	VITALARA.....	97
venlafaxine hcl cap er 24hr 37.5 mg (base equivalent), 75 mg (base equivalent), 150 mg (base equivalent) (Effexor xr).....	66	VITATHELY/GINGER.....	97
venlafaxine hcl tab er 24hr 37.5 mg (base equivalent), 75 mg (base equivalent), 150 mg (base equivalent), 225 mg (base equivalent).....	66	VITRAKVI.....	19
		VIVA DHA.....	97
		VIVAGUARD INO BLOOD GLUCO.....	126
		VIVELLE-DOT.....	23
		VIVJOA.....	4
		VIVOTIF.....	12
		VIZIMPRO.....	19
		VOGELXO.....	22
		VOGELXO PUMP.....	22
		VONJO.....	19
		VONVENDI.....	104

VOQUEZNA	57	XARELTO	101
VOQUEZNA DUAL PAK.....	57	XARELTO STARTER PACK.....	101
VOQUEZNA TRIPLE PAK	57	XATMEP	19
VORANIGO	19	XCOPRI	90
voriconazole for susp 40 mg/ml (Vfend)	4	XDEMVY	108
voriconazole tab 50 mg, 200 mg (Vfend).....	4	XELJANZ.....	84
VORTEX NON ELECTROSTATIC.....	129	XELJANZ XR	84
VORTEX VALVED CHAMBER/PED	129	XELODA	19
VOSEVI.....	8	XELPROS	108
VOTRIENT.....	19	XELSTRYM.....	73
VOWST	60	XENAZINE	76
VOXZOGO.....	36	XENICAL	73
VOYDEYA	104	XERESE	119
VRAYLAR	69	XERMELO.....	60
VTAMA.....	119	XHANCE.....	50
VUITY	108	XIFAXAN	10
VUMERITY	76	XIGDUO XR.....	28
VUSION	119	XIIDRA.....	108
VYALEV	92	XOFLUZA.....	8
VYKAT XR.....	36	XOLAIR.....	53
VYLEESI	76	XOLREMDI	100
VYNDAMAX	48	XOPENEX HFA	53
VYNDAQEL	48	XOSPATA	20
VYTORIN	47	XPHOZAH	36
VYVANSE.....	72	XPOVIO.....	20
VYVGART HYTRULO.....	131	XPOVIO 60 MG TWICE WEEKLY	20
VYZULTA.....	108	XPOVIO 80 MG TWICE WEEKLY	20
W		XROMI	100
WAINUA.....	76	XTAMPZA ER	80
WAKIX.....	72	XTANDI.....	20
warfarin sodium tab 1 mg, 2 mg, 2.5 mg, 3 mg, 4 mg, 5		XULTOPHY 100/3.6	28
mg, 6 mg, 7.5 mg, 10 mg.....	101	XURIDEN	36
WEGOVY.....	72	XYNTHA	104
WELCHOL	47	XYNTHA SOLOFUSE.....	104
WELIREG	19	XYOSTED	22
WELLBUTRIN SR.....	66	XYREM	76
WELLBUTRIN XL.....	66	XYWAV.....	76
WESCAP-PN DHA	97	Y	
WESNATAL DHA COMPLETE	97	YASMIN 28.....	25
WESNATE DHA	97	YAZ	25
WESTAB PLUS	97	YESINTEK.....	119
WESTGEL DHA.....	97	YONSA	20
WEZLANA	119	YORVIPATH	36
WIDE-SEAL SILICONE DIAPHR.....	129	YOSPRALA.....	104
WILATE.....	104	YUFLYMA CD/UC/HS STARTER.....	84
WINLEVI	119	YUFLYMA 1-PEN KIT.....	84
WINREVAIR	48	YUFLYMA 2-PEN KIT.....	84
WYNZORA	119	YUFLYMA 2-SYRINGE KIT	84
X		YUPELRI	53
XACIATO	62	YUSIMRY	84
XADAGO.....	92	YUTREPIA	48
XALATAN.....	108	Z	
XALKORI	19	zafirlukast tab 10 mg, 20 mg (Accolate)	54
XANAX.....	63	zaleplon cap 5 mg, 10 mg	69
XANAX XR.....	64	ZALVIT.....	97

ZANAFLEX.....	93	ZOMIG.....	86
ZARONTIN.....	90	ZONALON.....	119
ZARXIO.....	100	ZONEGRAN.....	90
ZAVESCA.....	100	ZONISADE.....	90
ZAVZPRET.....	86	zonisamide cap 50 mg.....	91
ZEGALOGUE.....	28	zonisamide cap 25 mg, 100 mg (Zonegran).....	91
ZEJULA.....	20	ZONTIVITY.....	104
ZELAPAR.....	92	ZORTRESS.....	131
ZELBORAF.....	20	ZORYVE.....	119
ZELSUVMI.....	119	ZOVIRAX.....	119
ZEMBRACE SYMTOUCH.....	86	ZTALMY.....	91
ZEMPLAR.....	36	ZTLIDO.....	119
ZENPEP.....	58	ZUBSOLV.....	80
ZEPATIER.....	8	ZUNVEYL.....	76
ZEPBOUND.....	73	ZURZUVAE.....	66
ZEPOSIA.....	76	ZYCLARA.....	119
ZEPOSIA 7-DAY STARTER PAC.....	76	ZYCLARA PUMP.....	119
ZEPOSIA STARTER KIT.....	76	ZYDELIG.....	20
ZERVIAE.....	108	ZYKADIA.....	20
ZESTORETIC.....	44	ZYLET.....	108
ZESTRIL.....	44	ZYMFENTRA 1-PEN.....	60
ZETIA.....	47	ZYMFENTRA 2-PEN.....	60
ZIAGEN.....	8	ZYMFENTRA 2-SYRINGE.....	60
ZIANA.....	119	ZYPITAMAG.....	47
zidovudine cap 100 mg (Retrovir).....	8	ZYPREXA.....	69
zidovudine syrup 10 mg/ml (Retrovir).....	8	ZYTIGA.....	20
zidovudine tab 300 mg.....	8	ZYVOX.....	10
ZIEXTENZO.....	100		
ZILBRYSQ.....	104		
zileuton tab er 12hr 600 mg.....	54		
ZILXI.....	119		
ZIMHI.....	120		
ZIOPTAN.....	108		
ZIPHEX.....	97		
ziprasidone hcl cap 20 mg, 40 mg, 60 mg, 80 mg			
(Geodon).....	69		
ZIPSOR.....	84		
ZIRGAN.....	108		
ZITHROMAX.....	2		
ZITHROMAX TRI-PAK.....	2		
ZITHROMAX Z-PAK.....	2		
ZITUVIMET.....	28		
ZITUVIMET XR.....	28		
ZITUVIO.....	28		
ZOCOR.....	47		
ZOKINVY.....	131		
ZOLINZA.....	20		
ZOLMITRIPTAN.....	86		
zolmitriptan nasal spray 5 mg/spray unit (Zomig).....	86		
zolmitriptan orally disintegrating tab 2.5 mg, 5 mg.....	86		
zolmitriptan tab 2.5 mg, 5 mg (Zomig).....	86		
ZOLOFT.....	66		
ZOLPIDEM TARTRATE.....	70		
zolpidem tartrate tab er 6.25 mg, 12.5 mg (Ambien			
cr).....	70		
zolpidem tartrate tab 5 mg, 10 mg (Ambien).....	70		
ZOMACTON.....	36		