



Focus Formulary

Drug Name

Tier Designation
Specialty
Prior Authorization
Step Therapy
Dispensing Limits

ANTI-INFECTIVE AGENTS					
PENICILLINS					
AMOXICILLIN- amoxicillin (trihydrate) chew tab 125 mg, 250 mg	NP				
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, 400-57 mg/5ml	p				
amoxicillin & k clavulanate for susp 250-62.5 mg/5ml (Augmentin)	np				
amoxicillin & k clavulanate for susp 600-42.9 mg/5ml (Augmentin es-600)	np				
amoxicillin & k clavulanate tab 250-125 mg	np				
amoxicillin & k clavulanate tab 500-125 mg (Augmentin)	p				
amoxicillin & k clavulanate tab 875-125 mg	p				
AMOXICILLIN/CLAVULANATE P- amoxicillin & k clavulanate chew tab 200-28.5 mg, 400-57 mg	NP				
AMOXICILLIN/CLAVULANATE P- amoxicillin & k clavulanate tab er 12hr 1000-62.5 mg	NP				
ampicillin cap 500 mg	np				
AUGMENTIN- amoxicillin & k clavulanate for susp 125-31.25 mg/5ml	NP				
dicloxacillin sodium cap 250 mg, 500 mg	np				

Drug Name

Tier Designation
Specialty
Prior Authorization
Step Therapy
Dispensing Limits

PENICILLIN V POTASSIUM- penicillin v potassium for soln 125 mg/5ml, 250 mg/5ml	NP				
penicillin v potassium tab 250 mg, 500 mg	p				
CEPHALOSPORINS					
CEFACLOR- cefaclor cap 250 mg, 500 mg	NP				
CEFACLOR- cefaclor for susp 250 mg/5ml	NP				
CEFACLOR ER- cefaclor monohydrate tab er 12hr 500 mg	NP				
CEFADROXIL- cefadroxil tab 1 gm	NP				
cefadroxil cap 500 mg	p				
cefadroxil for susp 250 mg/5ml, 500 mg/5ml	np				
cefdinir cap 300 mg	p				
cefdinir for susp 125 mg/5ml, 250 mg/5ml	np				
cefixime cap 400 mg (Suprax)	np				
cefixime for susp 100 mg/5ml, 200 mg/5ml (Suprax)	np				
cefpodoxime proxetil for susp 50 mg/5ml, 100 mg/5ml	np				
cefpodoxime proxetil tab 100 mg, 200 mg	np				
cefprozil for susp 125 mg/5ml, 250 mg/5ml	np				
cefprozil tab 250 mg, 500 mg	np				
cefuroxime axetil tab 250 mg	p				
cefuroxime axetil tab 500 mg	np				
CEPHALEXIN- cephalixin tab 250 mg, 500 mg	NP				
cephalexin cap 250 mg, 500 mg (Keflex)	p				

p = Preferred Generics
np = Non-preferred Generics

P = Preferred Brands
NP = Non-preferred Brands

NC = Non covered drugs

Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits
cephalexin cap 750 mg (Keflex)	np				
cephalexin for susp 125 mg/5ml	p				
cephalexin for susp 250 mg/5ml	np				
MACROLIDES					
AZITHROMYCIN- azithromycin powd pack for susp 1 gm	P				
azithromycin for susp 100 mg/5ml (Zithromax)	np				
azithromycin for susp 200 mg/5ml (Zithromax)	p				
azithromycin tab 250 mg, 500 mg (Zithromax)	p				
azithromycin tab 600 mg	np				
CLARITHROMYCIN- clarithromycin for susp 125 mg/5ml, 250 mg/5ml	NP				
clarithromycin tab er 24hr 500 mg	np				
clarithromycin tab 250 mg, 500 mg	np				
DIFICID- fidaxomicin for susp 40 mg/ml	P				
DIFICID- fidaxomicin tab 200 mg	P				
E.E.S. 400- erythromycin ethylsuccinate tab 400 mg	NP				
ERYTHROCIN STEARATE- erythromycin stearate tab 250 mg	P				
ERYTHROMYCIN- erythromycin w/ delayed release particles cap 250 mg	NP				
ERYTHROMYCIN ETHYLSUCCINA- erythromycin ethylsuccinate tab 400 mg	NP				
erythromycin ethylsuccinate for susp 200 mg/5ml (E.e.s. granules)	np				
erythromycin ethylsuccinate for susp 400 mg/5ml (Eryped 400)	np				

Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits
erythromycin tab delayed release 250 mg, 333 mg, 500 mg	np				
erythromycin tab 250 mg, 500 mg	np				
ZITHROMAX- azithromycin powd pack for susp 1 gm	NP				
TETRACYCLINES					
demeclocycline hcl tab 150 mg, 300 mg	np				
DORYX MPC- doxycycline hyclate tab delayed release 60 mg	NC				
doxycycline hyclate cap 50 mg	np				
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, 100 mg	p				
doxycycline monohydrate tab 75 mg, 150 mg	np				

p = Preferred Generics
np = Non-preferred Generics

P = Preferred Brands
NP = Non-preferred Brands

NC = Non covered drugs

Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits
minocycline hcl cap 50 mg	p				
minocycline hcl cap 75 mg, 100 mg	np				
minocycline hcl tab er 24hr 45 mg, 90 mg, 135 mg	np				
minocycline hcl tab er 24hr 55 mg, 65 mg, 80 mg, 105 mg, 115 mg (Solodyn)	np				
minocycline hcl tab 50 mg, 75 mg, 100 mg	np				
MINOLIRA- minocycline hcl tab er 24hr biphasic release 105 mg, 135 mg	NC				
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)	NC				
tetracycline hcl cap 250 mg, 500 mg	np				
TETRACYCLINE HYDROCHLORID- tetracycline hcl tab 250 mg, 500 mg	NC				
FLUOROQUINOLONES					
BAXDELA- delafloxacin meglumine tab 450 mg (base equiv)	NP				
CIPRO- ciprofloxacin for oral susp 250 mg/5ml (5%) (5 gm/100ml), 500 mg/5ml (10%) (10 gm/100ml)	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	np				
levofloxacin tab 250 mg, 500 mg, 750 mg	p				

Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits
moxifloxacin hcl tab 400 mg (base equiv)	np				
OFLOXACIN- ofloxacin tab 300 mg	P				
ofloxacin tab 400 mg	np				
AMINOGLYCOSIDES					
ARIKAYCE- amikacin sulfate liposome inhal susp 590 mg/8.4ml (base eq)	NP	•	•		•
HUMATIN- paromomycin sulfate cap 250 mg	P				
KITABIS PAK- tobramycin nebu soln 300 mg/5ml	NP	•			
neomycin sulfate tab 500 mg	p				
TOBI PODHALER- tobramycin inhal cap 28 mg	NP	•			
TOBRAMYCIN- tobramycin nebu soln 300 mg/5ml	NP	•			
tobramycin nebu soln 300 mg/5ml (Tobi)	np	•			
tobramycin nebu soln 300 mg/4ml (Bethkis)	np	•			
SULFONAMIDES					
SULFADIAZINE- sulfadiazine tab 500 mg	NP				
ANTIMYCOBACTERIAL AGENTS					
cycloserine cap 250 mg	np				
ethambutol hcl tab 100 mg	np				
ethambutol hcl tab 400 mg (Myambutol)	np				
ISONIAZID- isoniazid tab 100 mg	NP				
isoniazid syrup 50 mg/5ml	np				
isoniazid tab 300 mg	p				
PRETOMANID- pretomanid tab 200 mg	NP				
PRIFTIN- rifapentine tab 150 mg	P				

p = Preferred Generics
np = Non-preferred Generics

P = Preferred Brands
NP = Non-preferred Brands

NC = Non covered drugs

Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits
pyrazinamide tab 500 mg	np				
rifabutin cap 150 mg (Mycobutin)	np				
rifampin cap 150 mg, 300 mg	np				
SIRTURO- bedaquiline fumarate tab 20 mg (base equiv), 100 mg (base equiv)	NP	•			
TRECTOR- ethionamide tab 250 mg	NP				
ANTIFUNGALS					
BREXAFEMME- ibrexafungerp citrate tab 150 mg	NP		•		•
CRESEMBA- isavuconazonium sulfate cap 74.5 mg (isavuconazole 40 mg), 186 mg (isavuconazole 100 mg)	NP		•		
fluconazole for susp 10 mg/ml, 40 mg/ml (Diflucan)	np				
fluconazole tab 50 mg, 100 mg, 150 mg, 200 mg (Diflucan)	p				
flucytosine cap 250 mg, 500 mg (Ancobon)	np				
griseofulvin microsize susp 125 mg/5ml	np				
griseofulvin microsize tab 500 mg	np				
griseofulvin ultramicrosize tab 125 mg, 250 mg	np				
itraconazole cap 100 mg (Sporanox)	np				
itraconazole oral soln 10 mg/ml (Sporanox)	np				
ketoconazole tab 200 mg	np				
NOXAFIL- posaconazole for delayed release susp packet 300 mg	P		•		
nystatin tab 500000 unit	np				
posaconazole susp 40 mg/ml (Noxafil)	np		•		

Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits
posaconazole tab delayed release 100 mg (Noxafil)	np		•		
terbinafine hcl tab 250 mg	p				
TOLSURA- itraconazole cap 65 mg	NP				
VIVJOA- oteseconazole cap therapy pack 150 mg (12 weeks)	NP		•		•
voriconazole for susp 40 mg/ml (Vfend)	np		•		
voriconazole tab 50 mg, 200 mg (Vfend)	np		•		
ANTIVIRALS					
abacavir sulfate soln 20 mg/ml (base equiv) (Ziagen)	np				•
abacavir sulfate tab 300 mg (base equiv) (Ziagen)	np				•
abacavir sulfate-lamivudine tab 600-300 mg (Epzicom)	np				•
acyclovir cap 200 mg	p				
acyclovir susp 200 mg/5ml (Zovirax)	np				
acyclovir tab 400 mg, 800 mg	p				
adefovir dipivoxil tab 10 mg (Hepsera)	np				
APTIVUS- tipranavir cap 250 mg	NP				•
atazanavir sulfate cap 150 mg (base equiv), 200 mg (base equiv), 300 mg (base equiv) (Reyataz)	np				•
BARACLUDE- entecavir oral soln 0.05 mg/ml	P				
BIKTARVY- bicitgravir-emtricitabine-tenofovir af tab 30-120-15 mg, 50-200-25 mg	P				•
CIMDUO- lamivudine-tenofovir disoproxil fumarate tab 300-300 mg	P				•

p = Preferred Generics
np = Non-preferred Generics

P = Preferred Brands
NP = Non-preferred Brands

NC = Non covered drugs

Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits
COMPLERA- emtricitabine-rilpivirine-tenofovir df tab 200-25-300 mg	NP				•
darunavir tab 600 mg, 800 mg (Prezista)	np				•
DELSTRIGO- doravirine-lamivudine-tenofovir df tab 100-300-300 mg	P				•
DESCOVY- emtricitabine-tenofovir alafenamide fumarate tab 120-15 mg, 200-25 mg	P				•
DOVATO- dolutegravir sodium-lamivudine tab 50-300 mg (base eq)	P				•
EDURANT- rilpivirine hcl tab 25 mg (base equivalent)	NP				•
EFAVIRENZ- efavirenz cap 50 mg, 200 mg	NP				•
efavirenz tab 600 mg (Sustiva)	np				•
efavirenz-emtricitabine-tenofovir df tab 600-200-300 mg (Atripla)	np				•
efavirenz-lamivudine-tenofovir df tab 400-300-300 mg (Symfi lo)	np				•
efavirenz-lamivudine-tenofovir df tab 600-300-300 mg (Symfi)	np				•
emtricitabine caps 200 mg (Emtriva)	np				•
emtricitabine-tenofovir disoproxil fumarate tab 100-150 mg, 133-200 mg, 167-250 mg, 200-300 mg (Truvada)	np				•
EMTRIVA- emtricitabine soln 10 mg/ml	NP				•
entecavir tab 0.5 mg, 1 mg (Baraclude)	np				•
EPCLUSA- sofosbuvir-velpatasvir pellet pack 150-37.5 mg, 200-50 mg	P	•	•		•
EPCLUSA- sofosbuvir-velpatasvir tab 200-50 mg, 400-100 mg	P	•	•		•

Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits
etravirine tab 100 mg, 200 mg (Intelece)	np				•
EVOTAZ- atazanavir sulfate-cobicistat tab 300-150 mg (base equiv)	P				•
famciclovir tab 125 mg, 250 mg, 500 mg	np				•
fosamprenavir calcium tab 700 mg (base equiv) (Lexiva)	np				•
FUZEON- enfuvirtide for inj 90 mg	NP	•			•
GENVOYA- elvitegrav-cobic-emtricitab-tenofov af tab 150-150-200-10 mg	P				•
HARVONI- ledipasvir-sofosbuvir pellet pack 33.75-150 mg, 45-200 mg	P	•	•		•
HARVONI- ledipasvir-sofosbuvir tab 45-200 mg, 90-400 mg	P	•	•		•
INTELENCE- etravirine tab 25 mg	P				•
ISENTRESS- raltegravir potassium chew tab 25 mg (base equiv), 100 mg (base equiv)	P				•
ISENTRESS- raltegravir potassium packet for susp 100 mg (base equiv)	P				•
ISENTRESS- raltegravir potassium tab 400 mg (base equiv)	P				•
ISENTRESS HD- raltegravir potassium tab 600 mg (base equiv)	P				•
JULUCA- dolutegravir sodium-rilpivirine hcl tab 50-25 mg (base eq)	P				•
LAGEVRIO- molnupiravir cap 200 mg	NP				•
lamivudine oral soln 10 mg/ml (Epivir)	np				•
lamivudine tab 100 mg (hbv) (Epivir hbv)	np				•
lamivudine tab 150 mg, 300 mg (Epivir)	np				•

p = Preferred Generics
np = Non-preferred Generics

P = Preferred Brands
NP = Non-preferred Brands

NC = Non covered drugs

Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits	Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits
lamivudine-zidovudine tab 150-300 mg (Combivir)	np				•	PEGASYS- peginterferon alfa-2a inj 180 mcg/ml	P	•	•		
LEDIPASVIR/SOFOSBUVIR- ledipasvir-sofosbuvir tab 90-400 mg	NC					PEGASYS- peginterferon alfa-2a soln prefilled syr 180 mcg/0.5ml	P	•	•		
LIVTENCITY- maribavir tab 200 mg	NP	•			•	PIFELTRO- doravirine tab 100 mg	NP				•
lopinavir-ritonavir soln 400-100 mg/5ml (80-20 mg/ml) (Kaletra)	np				•	PREVMIS- letermovir tab 240 mg, 480 mg	NP				•
lopinavir-ritonavir tab 100-25 mg, 200-50 mg (Kaletra)	np				•	PREZCOBIX- darunavir-cobicistat tab 800-150 mg	P				•
maraviroc tab 150 mg, 300 mg (Selzentry)	np				•	PREZISTA- darunavir oral susp 100 mg/ml	P				•
MAVYRET- glecaprevir-pibrentasvir pellet pack 50-20 mg	P	•	•		•	PREZISTA- darunavir tab 75 mg, 150 mg	P				•
MAVYRET- glecaprevir-pibrentasvir tab 100-40 mg	P	•	•		•	RELENZA DISKHALER- zanamivir aerosol powder breath activated 5 mg/act	NP				•
NEVIRAPINE- nevirapine susp 50 mg/5ml	NP				•	REYATAZ- atazanavir sulfate oral powder packet 50 mg (base equiv)	NP				•
nevirapine tab er 24hr 400 mg (Viramune xr)	np				•	RIBAVIRIN- ribavirin cap 200 mg	NP	•			
nevirapine tab 200 mg	p				•	RIBAVIRIN- ribavirin tab 200 mg	NP	•			
NORVIR- ritonavir powder packet 100 mg	NP				•	RIMANTADINE HYDROCHLORIDE- rimantadine hydrochloride tab 100 mg	NC				
ODEFSEY- emtricitabine- rilpivirine- tenofovir af tab 200-25-25 mg	P				•	ritonavir tab 100 mg (Norvir)	np				•
oseltamivir phosphate cap 30 mg (base equiv), 45 mg (base equiv), 75 mg (base equiv) (Tamiflu)	np				•	RUKOBIA- fostemsavir tromethamine tab er 12hr 600 mg	NP				•
oseltamivir phosphate for susp 6 mg/ml (base equiv) (Tamiflu)	np				•	SELZENTRY- maraviroc oral soln 20 mg/ml	NP				•
PAXLOVID- nirmatrelvir tab 10 x 150 mg & ritonavir tab 10 x 100 mg pak	P				•	SITAVIG- acyclovir buccal tab 50 mg	NP				
PAXLOVID- nirmatrelvir tab 20 x 150 mg & ritonavir tab 10 x 100 mg pak	P				•	SOFOSBUVIR/VELPATASVIR- sofosbuvir-velpatasvir tab 400-100 mg	NC				
						SOVALDI- sofosbuvir pellet pack 150 mg, 200 mg	P	•	•		•
						SOVALDI- sofosbuvir tab 200 mg, 400 mg	P	•	•		•

p = Preferred Generics
np = Non-preferred Generics

P = Preferred Brands
NP = Non-preferred Brands

NC = Non covered drugs

Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits
STRIBILD- elvitegrav-cobic-emtricitab-tenofovd f tab 150-150-200-300 mg	NP				•
SUNLENCA- lenacapavir sodium tab therapy pack 4 x 300 mg, 5 x 300 mg	NP	•			•
SYMTUZA- darunavir-cobic-emtricitab-tenofov af tab 800-150-200-10 mg	P				•
tenofovir disoproxil fumarate tab 300 mg (Viread)	np				•
TIVICAY- dolutegravir sodium tab 50 mg (base equiv)	P				•
TIVICAY PD- dolutegravir sodium tab for oral susp 5 mg (base equiv)	P				•
TRIUMEQ- abacavir-dolutegravir-lamivudine tab 600-50-300 mg	P				•
TRIUMEQ PD- abacavir-dolutegravir-lamivudine tab for oral sus 60-5-30 mg	P				•
TYBOST- cobicistat tab 150 mg	NP				•
valacyclovir hcl tab 500 mg (Valtrex)	p				
valacyclovir hcl tab 1 gm (Valtrex)	np				
valganciclovir hcl for soln 50 mg/ml (base equiv) (Valcyte)	np				
valganciclovir hcl tab 450 mg (base equivalent) (Valcyte)	np				
VEMLIDY- tenofovir alafenamide fumarate tab 25 mg	P				
VIRACEPT- nelfinavir mesylate tab 250 mg, 625 mg	NP				•
VIREAD- tenofovir disoproxil fumarate oral powder 40 mg/gm	P				•
VIREAD- tenofovir disoproxil fumarate tab 150 mg, 200 mg, 250 mg	P				•

Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits
VOSEVI- sofosbuvir-velpatasvir-voxilaprevir tab 400-100-100 mg	P	•	•		•
XOFLUZA- baloxavir marboxil tab therapy pack 1 x 40 mg (40 mg dose), 1 x 80 mg (80 mg dose)	NP				•
ZEPATIER- elbasvir-grazoprevir tab 50-100 mg	NC				
zidovudine cap 100 mg (Retrovir)	np				•
zidovudine syrup 10 mg/ml (Retrovir)	np				•
zidovudine tab 300 mg	np				•
ANTIMALARIALS					
ARAKODA- tafenoquine succinate tab 100 mg (base equivalent)	NP				
atovaquone-proguanil hcl tab 62.5-25 mg, 250-100 mg (Malarone)	np				
chloroquine phosphate tab 250 mg, 500 mg	np				
COARTEM- artemether-lumefantrine tab 20-120 mg	NP				
hydroxychloroquine sulfate tab 100 mg, 300 mg, 400 mg	np				
hydroxychloroquine sulfate tab 200 mg (Plaquenil)	np				
KRINTAFEL- tafenoquine succinate tab 150 mg (base equivalent)	NP				
mefloquine hcl tab 250 mg	np				
primaquine phosphate tab 26.3 mg (15 mg base) (Primaquine phosphate)	np				
pyrimethamine tab 25 mg (Daraprim)	np				
quinine sulfate cap 324 mg (Qualaquin)	np				

p = Preferred Generics
np = Non-preferred Generics

P = Preferred Brands
NP = Non-preferred Brands

NC = Non covered drugs

Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits
SOVUNA- hydroxychloroquine sulfate tab 200 mg, 300 mg	NP				
AMEBICIDES					
SOLOSEC- secnidazole granules packet 2 gm	P				
ANTHELMINTICS					
albendazole tab 200 mg (Albenza)	np				
BENZNIDAZOLE- benznidazole tab 12.5 mg, 100 mg	P				
EMVERM- mebendazole chew tab 100 mg	NP				
ivermectin tab 3 mg (Stromectol)	np				
praziquantel tab 600 mg (Biltricide)	np				
ANTI-INFECTIVE AGENTS - MISC.					
AEMCOLO- rifamycin sodium tab delayed release 194 mg (base equiv)	NP				
ALINIA- nitazoxanide for susp 100 mg/5ml	P				•
atovaquone susp 750 mg/5ml (Mepron)	np				
CAYSTON- aztreonam lysine for inhal soln 75 mg (base equivalent)	NP	•			
clindamycin hcl cap 75 mg, 150 mg, 300 mg (Cleocin)	p				
clindamycin palmitate hcl for soln 75 mg/5ml (base equiv) (Cleocin pediatric gr)	np				
dapsone tab 25 mg, 100 mg	np				
fosfomycin tromethamine powd pack 3 gm (base equivalent) (Monurol)	np				
IMPAVIDO- miltefosine cap 50 mg	P				
LAMPIT- nifurtimox tab 30 mg, 120 mg	NP				

Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits
LIKMEZ- metronidazole susp 500 mg/5ml	NC				
linezolid for susp 100 mg/5ml (Zyvox)	np		•		
linezolid tab 600 mg (Zyvox)	np				
methenamine hippurate tab 1 gm (Hiprex)	np				
metronidazole cap 375 mg (Flagyl)	np				
metronidazole tab 250 mg	p				
metronidazole tab 500 mg (Flagyl)	p				
nitazoxanide tab 500 mg (Alinia)	np				•
NITROFURANTOIN- nitrofurantoin susp 50 mg/5ml	NP		•		
nitrofurantoin macrocrystalline cap 25 mg, 50 mg, 100 mg (Macrochantin)	np				
nitrofurantoin monohydrate macrocrystalline cap 100 mg (Macrobid)	p				
nitrofurantoin susp 25 mg/5ml	np		•		
pentamidine isethionate for nebulization soln 300 mg (Nebupent)	np				
SIVEXTRO- tedizolid phosphate tab 200 mg	NP				
sulfamethoxazole-trimethoprim susp 200-40 mg/5ml	np				
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 tab 100 mg	p				
vancomycin hcl cap 125 mg (base equivalent) (Vancocin hcl)	np				

p = Preferred Generics
np = Non-preferred Generics

P = Preferred Brands
NP = Non-preferred Brands

NC = Non covered drugs

Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits
vancomycin hcl cap 250 mg (base equivalent) (Vancocin)	np				
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				
XIFAXAN- rifaximin tab 200 mg	NP				
XIFAXAN- rifaximin tab 550 mg	P				
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 QUADRIVALENT 2023- influenza virus vac split quadrivalent susp pref syr 0.5ml	P				
AFLURIA QUADRIVALENT 2023- influenza virus vaccine split quadrivalent im inj	P				
AFLURIA 2024-2025- influenza virus vaccine split im susp	P				
AFLURIA 2024-2025- 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				

Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits
COMIRNATY 2023-24- covid-19 mrna vac tris-pfizer im susp pref syr 30 mcg/0.3ml	P				
COMIRNATY 2023-24- covid-19 mrna vac tris-sucrose-pfizer im susp 30 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				
FLUAD QUADRIVALENT 2023-2- influenza vac type a&b surface ant adj quad pref syr 0.5 ml	P				
FLUAD 2024-2025- influenza vac type a&b surface ant adj susp pref syr 0.5 ml	P				
FLUARIX 2024-2025- influenza virus vaccine split pf susp pref syringe 0.5 ml	P				
FLUCELVAX QUADRIVALENT 20- influenza vac tiss-cult subunt quad susp pref syr 0.5 ml	P				
FLUCELVAX QUADRIVALENT 20- influenza vac tissue-cultured subunit quadrivalent im susp	P				
FLUCELVAX 2024-2025- influenza virus vac tiss-cult subunit im susp	P				
FLUCELVAX 2024-2025- influenza virus vac tiss-cult subunit susp pref syr 0.5 ml	P				
FLULAVAL 2024-2025- influenza virus vaccine split pf susp pref syringe 0.5 ml	P				
FLUMIST QUADRIVALENT- influenza virus vaccine live quadrivalent intranasal susp	P				

p = Preferred Generics
np = Non-preferred Generics

P = Preferred Brands
NP = Non-preferred Brands

NC = Non covered drugs

Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits
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 inj susp 720 el unit/0.5ml, 1440 el unit/ml	P				
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	P				
IPOL INACTIVATED IPV- poliovirus vaccine, ipv injection	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				
MODERNA COVID-19 VACCINE- covid-19 mrna vaccine 6mo-11yr- moderna im susp 25 mcg/0.25ml	P				
MRESVIA- rsv mrna pre-f vaccine im susp pref syr 50 mcg/0.5ml	P				
NOVAVAX COVID-19 VACCINE/- covid-19 subunit prot recom adjuv vac-novavax im 5 mcg/0.5ml	P				

Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits
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				
PFIZER-BIONTECH COVID-19- covid-19 mrna vac tris-s 5-11y-pfizer im susp 10 mcg/0.3ml	P				
PFIZER-BIONTECH COVID-19- covid-19 mrna vac tris-s 6mo-4y- pfizer im susp 3 mcg/0.3ml	P				
PNEUMOVAX 23- pneumococcal vaccine polyvalent inj 25 mcg/0.5ml	P				
PNEUMOVAX 23/1 DOSE- pneumococcal vaccine polyvalent inj 25 mcg/0.5ml	P				
PREHEVBRIO- hepatitis b vaccine 3- antigen (recombinant) susp 10 mcg/ml	P				
PREVNAR 20- pneumococcal 20- valent conjugate vaccine sus pref syr 0.5 ml	P				
PRIORIX- measles-mumps-rubella virus vaccines for subcutaneous susp	P				
PROQUAD- measles-mumps-rubella- varicella virus vaccines for susp	P				
RABAVERT- rabies vaccine, pcec for inj	P				
RECOMBIVAX HB- hepatitis b vaccine (recombinant) susp pref syr 5 mcg/0.5ml, 10 mcg/ml	P				
RECOMBIVAX HB- hepatitis b vaccine (recombinant) susp 5 mcg/0.5ml, 10 mcg/ml, 40 mcg/ml	P				
ROTARIX- rotavirus vaccine, live oral susp	P				

p = Preferred Generics
np = Non-preferred Generics

P = Preferred Brands
NP = Non-preferred Brands

NC = Non covered drugs

Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits
ROTATEQ- rotavirus vaccine, live oral pentavalent soln	P				
SHINGRIX- zoster vac recombinant adjuvanted for im inj 50 mcg/0.5ml	P				
SPIKEVAX COVID-19 VACCINE- covid-19 mrna vaccine-moderna im susp pref syr 50 mcg/0.5ml	P				
SPIKEVAX COVID-19 VACCINE- covid-19 (sars-cov-2)mrna vacc-moderna im susp 50 mcg/0.5ml	P				
TRUMENBA- meningococcal group b vac (recomb) im susp prefilled syr	P				
TWINRIX- hep a-hep b vaccine susp pref syr 720-20 elu-mcg/ml	P				
VAQTA- hepatitis a vaccine inj susp 25 unit/0.5ml, 50 unit/ml	P				
VARIVAX- varicella virus vac live for subcutaneous inj 1350 pfu/0.5ml	P				
VAXNEUVANCE- pneumococcal 15-valent conjugate vaccine sus pref syr 0.5 ml	P				
VIVOTIF- typhoid vaccine cap delayed release	NP				
TOXOIDS					
ADACEL- tet tox-diph-acell pertuss ad inj 5-2-15.5 lf-lf-mcg/0.5ml	P				
BOOSTRIX- tet tox-diph-acell pertuss ad inj 5-2.5-18.5 lf-lf-mcg/0.5ml	P				
BOOSTRIX- tet-diph-acell pertuss ad pref syr 5-2.5-18.5 lf-mcg/0.5ml	P				
DAPTACEL- diph, acellular pert & tet tox inj 15 lf-23 mcg-5 lf/0.5ml	P				
INFANRIX- diph, acellular pert & tet tox inj 25 lf-58 mcg-10 lf/0.5ml	P				
KINRIX- diph-tetanus-acell pert-polio, ipv vacc susp pref syr 0.5 ml	P				

Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits
PEDIARIX- diph-tet tox-acell pert-hep b-polio ipv vac susp pref syr	P				
PENTACEL- diph-ac per-tet tox ad-poliov-haemoph b poly vac for im susp	P				
QUADRACEL- diph-tetanus tox ad-acell pert & polio virus, ipv vac inj	P				
QUADRACEL- diph-tetanus-acell pert-polio, ipv vacc susp pref syr 0.5 ml	P				
TDVAX- tetanus-diphtheria toxoids (td) inj 2-2 lf/0.5ml	P				
TENIVAC- tetanus-diphtheria toxoids (td) inj 5-2 lfu	P				
VAXELIS- diph-tet tox-ac pert ad-polio ipv-hib-hep b rec susp pre syr	P				
VAXELIS- diph-tet tox-ac pert ad-polio ipv-hib-hepatitis b recmb 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 & 6 mg	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	•	•		•

p = Preferred Generics
np = Non-preferred Generics

P = Preferred Brands
NP = Non-preferred Brands

NC = Non covered drugs

Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits
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	•	•		•
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)	np	•	•		•
ACTIMMUNE- interferon gamma-1b inj 100 mcg/0.5ml (2000000 unit/0.5ml)	P	•			

Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits
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	•	•		•
anastrozole tab 1 mg (Arimidex)	p				
AUGTYRO- repotrectinib cap 40 mg	NP	•	•		•
AYVAKIT- avapritinib tab 25 mg, 50 mg, 100 mg, 200 mg, 300 mg	P	•	•		•
BALVERSA- erdafitinib tab 3 mg, 4 mg, 5 mg	NP	•	•		•
BESREMI- ropeginterferon alfa-2b-njft soln prefilled syr 500 mcg/ml	NP	•	•		•
bexarotene cap 75 mg (Targretin)	np	•	•		
bicalutamide tab 50 mg (Casodex)	p	•			
BOSULIF- bosutinib cap 50 mg, 100 mg	P	•	•		•
BOSULIF- bosutinib tab 100 mg, 400 mg, 500 mg	P	•	•		•
BRAFTOVI- encorafenib cap 75 mg	NP	•	•		•
BRUKINSA- zanubrutinib cap 80 mg	P	•	•		•
CABOMETYX- cabozantinib s-malate tab 20 mg (base equivalent), 40 mg (base equivalent), 60 mg (base equivalent)	P	•	•		•
CALQUENCE- acalabrutinib maleate tab 100 mg	P	•	•		•
CAMCEVI- leuprolide mesylate (6 month) emulsion prefilled syr 42 mg	NC				
capecitabine tab 150 mg, 500 mg (Xeloda)	np	•	•		

p = Preferred Generics
np = Non-preferred Generics

P = Preferred Brands
NP = Non-preferred Brands

NC = Non covered drugs

Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits	Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits
CAPRELSA- vandetanib tab 100 mg, 300 mg	P	•	•		•	erlotinib hcl tab 25 mg (base equivalent), 100 mg (base equivalent), 150 mg (base equivalent) (Tarceva)	np	•	•		•
COMETRIQ- cabozantinib s-mal cap 1 x 80 mg & 1 x 20 mg (100 dose) kit	P	•	•		•	ETOPOSIDE- etoposide cap 50 mg	P	•			
COMETRIQ- cabozantinib s-mal cap 1 x 80 mg & 3 x 20 mg (140 dose) kit	P	•	•		•	EULEXIN- flutamide cap 125 mg	NP	•			
COMETRIQ- cabozantinib s-malate cap 3 x 20 mg (60 mg dose) kit	P	•	•		•	everolimus tab for oral susp 2 mg, 3 mg, 5 mg (Afinitor disperz)	np	•	•		•
COPIKTRA- duvelisib cap 15 mg, 25 mg	NP	•	•		•	everolimus tab 2.5 mg, 5 mg, 7.5 mg, 10 mg (Afinitor)	np	•	•		•
COTELLIC- cobimetinib fumarate tab 20 mg (base equivalent)	P	•	•		•	exemestane tab 25 mg (Aromasin)	np				
CYCLOPHOSPHAMIDE- cyclophosphamide tab 25 mg, 50 mg	P	•				FOTIVDA- tivozanib hcl cap 0.89 mg (base equivalent), 1.34 mg (base equivalent)	NP	•	•		•
cyclophosphamide cap 25 mg, 50 mg (Cyclophosphamide)	np	•				FRUZAQLA- fruquintinib cap 1 mg, 5 mg	NP	•	•		•
DAURISMO- glasdegib maleate tab 25 mg (base equivalent), 100 mg (base equivalent)	NP	•	•		•	GAVRETO- pralsetinib cap 100 mg	NP	•	•		•
ELIGARD- leuprolide acetate (3 month) for subcutaneous inj kit 22.5mg	NP	•				gefitinib tab 250 mg (Iressa)	np	•	•		•
ELIGARD- leuprolide acetate (4 month) for subcutaneous inj kit 30 mg	NP	•				GILOTRIF- afatinib dimaleate tab 20 mg (base equivalent), 30 mg (base equivalent), 40 mg (base equivalent)	P	•	•		•
ELIGARD- leuprolide acetate (6 month) for subcutaneous inj kit 45 mg	NP	•				GLEOSTINE- lomustine cap 10 mg, 40 mg, 100 mg	P	•			
ELIGARD- leuprolide acetate for subcutaneous inj kit 7.5 mg	NP	•				HYCANTIN- topotecan hcl cap 0.25 mg (base equiv), 1 mg (base equiv)	P	•	•		
EMCYT- estramustine phosphate sodium cap 140 mg	P	•				hydroxyurea cap 500 mg (Hydrea)	np	•			
ERIVEDGE- vismodegib cap 150 mg	P	•	•		•	IBRANCE- palbociclib cap 75 mg, 100 mg, 125 mg	P	•	•		•
ERLEADA- apalutamide tab 60 mg, 240 mg	P	•	•		•	IBRANCE- palbociclib tab 75 mg, 100 mg, 125 mg	P	•	•		•
						ICLUSIG- ponatinib hcl tab 10 mg (base equiv), 15 mg (base equiv), 30 mg (base equiv), 45 mg (base equiv)	P	•	•		•

p = Preferred Generics
np = Non-preferred Generics

P = Preferred Brands
NP = Non-preferred Brands

NC = Non covered drugs

Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits	Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits
IDHIFA- enasidenib mesylate tab 50 mg (base equivalent), 100 mg (base equivalent)	NP	•	•		•	LENVIMA 10 MG DAILY DOSE- lenvatinib cap therapy pack 10 mg (10 mg daily dose)	P	•	•		•
imatinib mesylate tab 100 mg (base equivalent), 400 mg (base equivalent) (Gleevec)	np	•	•		•	LENVIMA 12MG DAILY DOSE- lenvatinib cap therapy pack 3 x 4 mg (12 mg daily dose)	P	•	•		•
IMBRUVICA- ibrutinib cap 70 mg, 140 mg	P	•	•		•	LENVIMA 14 MG DAILY DOSE- lenvatinib cap therapy pack 10 & 4 mg (14 mg daily dose)	P	•	•		•
IMBRUVICA- ibrutinib oral susp 70 mg/ml	P	•	•		•	LENVIMA 18 MG DAILY DOSE- lenvatinib cap ther pack 10 mg & 2 x 4 mg (18 mg daily dose)	P	•	•		•
IMBRUVICA- ibrutinib tab 140 mg, 280 mg, 420 mg	P	•	•		•	LENVIMA 20 MG DAILY DOSE- lenvatinib cap therapy pack 2 x 10 mg (20 mg daily dose)	P	•	•		•
INLYTA- axitinib tab 1 mg, 5 mg	P	•	•		•	LENVIMA 24 MG DAILY DOSE- lenvatinib cap ther pack 2 x 10 mg & 4 mg (24 mg daily dose)	P	•	•		•
INQOVI- decitabine-cedazuridine tab 35-100 mg	NP	•	•		•	LENVIMA 4 MG DAILY DOSE- lenvatinib cap therapy pack 4 mg (4 mg daily dose)	P	•	•		•
INREBIC- fedratinib hcl cap 100 mg	NP	•	•		•	LENVIMA 8 MG DAILY DOSE- lenvatinib cap therapy pack 2 x 4 mg (8 mg daily dose)	P	•	•		•
IWILFIN- eflornithine hcl tab 192 mg	NP	•	•		•	letrozole tab 2.5 mg (Femara)	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	•	•		•	leucovorin calcium tab 5 mg, 10 mg, 15 mg, 25 mg	np				
JAYPIRCA- pirtobrutinib tab 50 mg, 100 mg	NP	•	•		•	LEUKERAN- chlorambucil tab 2 mg	P	•			
JYLAMVO- methotrexate oral soln 2 mg/ml	NP		•		•	LEUPROLIDE ACETATE- leuprolide acetate (3 month) for inj 22.5 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	•	•		•	leuprolide acetate inj kit 1 mg/0.2ml (5 mg/ml)	np	•			
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)	np	•	•		•						

p = Preferred Generics
np = Non-preferred Generics

P = Preferred Brands
NP = Non-preferred Brands

NC = Non covered drugs

Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits
LUMAKRAS- sotorasib tab 120 mg, 320 mg	NP	•	•		•
LUPRON DEPOT (1-MONTH)- leuprolide acetate for inj kit 3.75 mg, 7.5 mg	P	•			
LUPRON DEPOT (3-MONTH)- leuprolide acetate (3 month) for inj kit 11.25 mg, 22.5 mg	P	•			
LUPRON DEPOT (4-MONTH)- leuprolide acetate (4 month) for inj kit 30 mg	P	•			
LUPRON DEPOT (6-MONTH)- leuprolide acetate (6 month) for inj kit 45 mg	P	•			
LYNPARZA- olaparib tab 100 mg, 150 mg	P	•	•		•
LYSODREN- mitotane tab 500 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	•	•		•
MATULANE- procarbazine hcl cap 50 mg	P	•	•		
megestrol acetate susp 40 mg/ml	np				
megestrol acetate tab 20 mg, 40 mg	p				
MEKINIST- trametinib dimethyl sulfoxide for soln 0.05 mg/ml (base eq)	P	•	•		•
MEKINIST- trametinib dimethyl sulfoxide tab 0.5 mg (base equivalent), 2 mg (base equivalent)	P	•	•		•
MEKTOVI- binimetinib tab 15 mg	NP	•	•		•
mercaptopurine tab 50 mg	np	•			
MESNEX- mesna tab 400 mg	P				

Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits
METHOTREXATE SODIUM- methotrexate sodium inj 250 mg/10ml (25 mg/ml)	NP				
methotrexate sodium for inj 1 gm	np				
methotrexate sodium inj pf 50 mg/2ml (25 mg/ml), 250 mg/10ml (25 mg/ml)	p				
methotrexate sodium inj pf 1000 mg/40ml (25 mg/ml)	np				
methotrexate sodium inj 50 mg/2ml (25 mg/ml)	p				
methotrexate sodium tab 2.5 mg (base equiv)	p				
MYLERAN- busulfan tab 2 mg	P	•			
NERLYNX- neratinib maleate tab 40 mg (base equivalent)	NP	•	•		•
nilutamide tab 150 mg (Nilandron)	np	•			
NINLARO- ixazomib citrate cap 2.3 mg (base equivalent), 3 mg (base equivalent), 4 mg (base equivalent)	P	•	•		•
NUBEQA- darolutamide tab 300 mg	P	•	•		•
ODOMZO- sonidegib phosphate cap 200 mg (base equivalent)	P	•	•		•
OGSIVEO- nirogacestat hydrobromide tab 50 mg, 100 mg, 150 mg	NP	•	•		•
OJJAARA- momelotinib dihydrochloride tab 100 mg, 150 mg, 200 mg	NP	•	•		•
ONUREG- azacitidine tab 200 mg, 300 mg	NP	•	•		•
ORGOVYX- relugolix tab 120 mg	NP	•	•		•
ORSERDU- elacestrant hydrochloride tab 86 mg, 345 mg	NP	•	•		•
pazopanib hcl tab 200 mg (base equiv) (Votrient)	np	•	•		•

p = Preferred Generics
np = Non-preferred Generics

P = Preferred Brands
NP = Non-preferred Brands

NC = Non covered drugs

Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits	Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits
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	P	•	•		•
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)	np	•	•		•
PIQRAY 300MG DAILY DOSE- alpelisib tab pack 300 mg daily dose (2x150 mg tab)	P	•	•		•	TABLOID- thioguanine tab 40 mg	P	•			
POMALYST- pomalidomide cap 1 mg, 2 mg, 3 mg, 4 mg	P	•	•		•	TABRECTA- capmatinib hcl tab 150 mg, 200 mg	P	•	•		•
PURIXAN- mercaptopurine susp 2000 mg/100ml (20 mg/ml)	P	•				TAFINLAR- dabrafenib mesylate cap 50 mg (base equivalent), 75 mg (base equivalent)	P	•	•		•
QINLOCK- ripretinib tab 50 mg	NP	•	•		•	TAFINLAR- dabrafenib mesylate tab for oral susp 10 mg (base equiv)	P	•	•		•
RETEVMO- selpercatinib cap 40 mg, 80 mg	P	•	•		•	TAGRISSO- osimertinib mesylate tab 40 mg (base equivalent), 80 mg (base equivalent)	P	•	•		•
REZLIDHIA- olutasidenib cap 150 mg	NP	•	•		•	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	•	•		•
ROZLYTREK- entrectinib cap 100 mg, 200 mg	P	•	•		•	tamoxifen citrate tab 10 mg (base equivalent), 20 mg (base equivalent)	p				
ROZLYTREK- entrectinib pellet pack 50 mg	P	•	•		•	TASIGNA- nilotinib hcl cap 50 mg (base equivalent), 150 mg (base equivalent), 200 mg (base equivalent)	P	•	•		•
RUBRACA- rucaparib camsylate tab 200 mg (base equivalent), 250 mg (base equivalent), 300 mg (base equivalent)	P	•	•		•	TAZVERIK- tazemetostat hbr tab 200 mg	NP	•	•		•
RYDAPT- midostaurin cap 25 mg	P	•	•		•	temozolomide cap 5 mg, 20 mg, 100 mg, 140 mg, 180 mg, 250 mg (Temodar)	np	•	•		
SCSEMBLIX- asciminib hcl tab 20 mg, 40 mg, 100 mg	NP	•	•		•						
SOLTAMOX- tamoxifen citrate oral soln 10 mg/5ml (base equivalent)	P										
sorafenib tosylate tab 200 mg (base equivalent) (Nexavar)	np	•	•		•						

p = Preferred Generics
np = Non-preferred Generics

P = Preferred Brands
NP = Non-preferred Brands

NC = Non covered drugs

Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits	Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits
TEPMETKO- tepotinib hcl tab 225 mg	NP	•	•		•	XALKORI- crizotinib cap 200 mg, 250 mg	P	•	•		•
TIBSOVO- ivosidenib tab 250 mg	P	•	•		•	XATMEP- methotrexate oral soln 2.5 mg/ml	NP		•		
toremifene citrate tab 60 mg (base equivalent) (Fareston)	np	•				XOSPATA- gilteritinib fumarate tablet 40 mg (base equivalent)	NP	•	•		•
tretinoin cap 10 mg	np	•	•			XPOVIO- selinexor tab therapy pack 40 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	•	•		•
TREXALL- methotrexate sodium tab 5 mg (base equiv), 7.5 mg (base equiv), 10 mg (base equiv), 15 mg (base equiv)	NP					XPOVIO 60 MG TWICE WEEKLY- selinexor tab therapy pack 20 mg (60 mg twice weekly)	NP	•	•		•
TRUQAP- capivasertib tab 160 mg, 200 mg	NP	•	•		•	XPOVIO 80 MG TWICE WEEKLY- selinexor tab therapy pack 20 mg (80 mg twice weekly)	NP	•	•		•
TUKYSA- tucatinib tab 50 mg, 150 mg	NP	•	•		•	XTANDI- enzalutamide cap 40 mg	P	•	•		•
TURALIO- pexidartinib hcl cap 125 mg (base equivalent)	NP	•	•		•	XTANDI- enzalutamide tab 40 mg, 80 mg	P	•	•		•
VANFLYTA- quizartinib dihydrochloride tab 17.7 mg, 26.5 mg	NP	•	•		•	YONSA- abiraterone acetate micronized tab 125 mg	P	•	•		•
VENCLEXTA- venetoclax tab 10 mg, 50 mg, 100 mg	P	•	•		•	ZEJULA- niraparib tosylate tab 100 mg (base equivalent), 200 mg (base equivalent), 300 mg (base equivalent)	P	•	•		•
VENCLEXTA STARTING PACK- venetoclax tab therapy starter pack 10 & 50 & 100 mg	P	•	•		•	ZELBORAF- vemurafenib tab 240 mg	P	•	•		•
VERZENIO- abemaciclib tab 50 mg, 100 mg, 150 mg, 200 mg	P	•	•		•	ZOLINZA- vorinostat cap 100 mg	P	•	•		•
VITRAKVI- larotrectinib sulfate cap 25 mg (base equivalent), 100 mg (base equivalent)	P	•	•		•	ZYDELIG- idelalisib tab 100 mg, 150 mg	P	•	•		•
VITRAKVI- larotrectinib sulfate oral soln 20 mg/ml (base equivalent)	P	•	•		•	ZYKADIA- ceritinib tab 150 mg	P	•	•		•
VIZIMPRO- dacomitinib tab 15 mg, 30 mg, 45 mg	NP	•	•		•	ENDOCRINE AND METABOLIC DRUGS					
VONJO- pacritinib citrate cap 100 mg	NP	•	•		•	CORTICOSTEROIDS					
WELIREG- belzutifan tab 40 mg	NP	•	•		•	AGAMREE- vamorolone oral susp 40 mg/ml	NP	•	•		•
XALKORI- crizotinib cap sprinkle 20 mg, 50 mg, 150 mg	P	•	•		•						

p = Preferred Generics
np = Non-preferred Generics

P = Preferred Brands
NP = Non-preferred Brands

NC = Non covered drugs

Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits
ALKINDI SPRINKLE- hydrocortisone cap sprinkle 0.5 mg, 1 mg, 2 mg, 5 mg	NP	•			
budesonide delayed release particles cap 3 mg (Entocort ec)	np				
budesonide tab er 24hr 9 mg (Uceris)	np				
CORTISONE ACETATE- cortisone acetate tab 25 mg	NP				
deflazacort susp 22.75 mg/ml (Emflaza)	np	•	•		
deflazacort tab 6 mg, 18 mg (Emflaza)	np	•	•		•
deflazacort tab 30 mg, 36 mg (Emflaza)	np	•	•		
DEXABLISS- dexamethasone tab therapy pack 1.5 mg (39)	NP				
DEXAMETHASONE- dexamethasone soln 0.5 mg/5ml	NP				
dexamethasone elixir 0.5 mg/5ml	np				
DEXAMETHASONE INTENSOL- dexamethasone conc 1 mg/ml	NP				
dexamethasone tab therapy pack 1.5 mg (21)	np				
dexamethasone tab 0.5 mg, 0.75 mg, 1 mg, 2 mg	np				
dexamethasone tab 1.5 mg, 4 mg, 6 mg	p				
DEXAMETHASONE 10-DAY DOSE- dexamethasone tab therapy pack 1.5 mg (35)	NP				
DEXAMETHASONE 13-DAY DOSE- dexamethasone tab therapy pack 1.5 mg (51)	NP				
EMFLAZA- deflazacort susp 22.75 mg/ml	NP	•	•		

Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits
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)	np				
MEDROL- methylprednisolone tab 2 mg	NP				
methylprednisolone tab therapy pack 4 mg (21) (Medrol dosepak)	p				
methylprednisolone tab 4 mg, 16 mg, 32 mg (Medrol)	p				
methylprednisolone tab 8 mg (Medrol)	np				
ORAPRED ODT- prednisolone sod phos orally disintegr tab 10 mg (base eq), 15 mg (base eq), 30 mg (base eq)	NP				
prednisolone sod phosph oral soln 6.7 mg/5ml (5 mg/5ml base) (Pediapred)	np				
prednisolone sod phosphate oral soln 15 mg/5ml (base equiv)	p				
prednisolone sod phosphate oral soln 10 mg/5ml (base equiv), 20 mg/5ml (base equiv)	np				
PREDNISOLONE SODIUM PHOSP- prednisolone sod phos orally disintegr tab 10 mg (base eq), 15 mg (base eq), 30 mg (base eq)	NP				
prednisolone sodium phosphate oral soln 25 mg/5ml (base eq)	np				
prednisolone soln 15 mg/5ml	np				
prednisolone tab 5 mg	np				
PREDNISON- prednisone oral soln 5 mg/5ml	P				

p = Preferred Generics
np = Non-preferred Generics

P = Preferred Brands
NP = Non-preferred Brands

NC = Non covered drugs

Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits
PREDNISONE INTENSOL- prednisone conc 5 mg/ml	NP				
prednisone tab therapy pack 5 mg (21), 5 mg (48), 10 mg (21)	p				
prednisone tab therapy pack 10 mg (48)	np				
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		•		•
ANDROGEN-ANABOLIC					
ANDRODERM- testosterone td patch 24hr 2 mg/24hr, 4 mg/24hr	NP		•		•
danazol cap 50 mg, 100 mg, 200 mg	np		•		
JATENZO- testosterone undecanoate cap 158 mg, 198 mg, 237 mg	NP		•		•
KYZATREX- testosterone undecanoate cap 100 mg, 150 mg, 200 mg	NP		•		•
METHITEST- methyltestosterone oral tab 10 mg	NP		•		•
methyltestosterone cap 10 mg	np		•		•
NATESTO- testosterone nasal gel 5.5 mg/act	NP		•		•
TESTOSTERONE- testosterone td gel 50 mg/5gm (1%)	NP		•		•
TESTOSTERONE- testosterone td gel 10mg/act (2%)	np		•		•
testosterone cypionate im inj in oil 100 mg/ml	p		•		•

Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits
testosterone cypionate im inj in oil 200 mg/ml (Depo-testosterone)	np		•		•
TESTOSTERONE ENANTHATE- testosterone enanthate im inj in oil 200 mg/ml	NP		•		•
TESTOSTERONE PUMP- testosterone td gel 12.5 mg/act (1%)	NP		•		•
testosterone td gel 25 mg/2.5gm (1%), 50 mg/5gm (1%), 20.25 mg/1.25gm (1.62%), 40.5 mg/2.5gm (1.62%) (AndroGel)	np		•		•
testosterone td gel 12.5 mg/act (1%)	np		•		•
testosterone td gel 20.25 mg/act (1.62%) (AndroGel pump)	np		•		•
testosterone td soln 30 mg/act	np		•		•
TLANDO- testosterone undecanoate cap 112.5 mg	NP		•		•
VOGELXO- testosterone td gel 50 mg/5gm (1%)	NP		•		•
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					
ALORA- estradiol td patch twice weekly 0.025 mg/24hr, 0.075 mg/24hr	NP				•
ANGELIQ- drospirenone-estradiol tab 0.25-0.5 mg, 0.5-1 mg	NP				
BIJUVA- estradiol-progesterone cap 0.5-100 mg, 1-100 mg	NC				
CLIMARA PRO- estradiol-levonorgestrel td patch weekly 0.045-0.015 mg/day	P				•

p = Preferred Generics
np = Non-preferred Generics

P = Preferred Brands
NP = Non-preferred Brands

NC = Non covered drugs

Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits
COMBIPATCH- estradiol-norethindrone ace td pttw 0.05-0.14 mg/day, 0.05-0.25 mg/day	NP				•
DEPO-ESTRADIOL- estradiol cypionate im in oil 5 mg/ml	NP				
DUAVEE- conjugated estrogens-bazedoxifene tab 0.45-20 mg	P				
ELESTRIN- estradiol gel 0.06% (0.52 mg/0.87 gm metered-dose pump)	NP				•
estradiol & norethindrone acetate tab 0.5-0.1 mg	np				
estradiol & norethindrone acetate tab 1-0.5 mg (Activella)	np				
estradiol gel 0.06% (0.75 mg/1.25 gm metered-dose pump) (EstroGel)	np				•
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)	np				•
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)	np				•
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)	np				•
estradiol valerate im in oil 10 mg/ml, 20 mg/ml, 40 mg/ml (Delestrogen)	np				
EVAMIST- estradiol transdermal spray 1.53 mg/spray	NP				•

Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits
MENEST- esterified estrogens tab 0.3 mg, 0.625 mg, 1.25 mg, 2.5 mg	NP				
MENOSTAR- estradiol td patch weekly 14 mcg/24hr	NP				•
MYFEMBREE- relugolix-estradiol-norethindrone acetate tab 40-1-0.5 mg	P		•		•
norethindrone acetate-ethinyl estradiol tab 0.5 mg-2.5 mcg (Femhrt low dose)	np				
norethindrone acetate-ethinyl estradiol tab 1 mg-5 mcg	np				
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				
CONTRACEPTIVES					
ANNOVERA- segesterone ace-ethinyl estradiol va ring 0.15-0.013 mg/24hr	NC				
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)	p				
desogestrel & ethinyl estradiol tab 0.15 mg-30 mcg	p				

p = Preferred Generics
np = Non-preferred Generics

P = Preferred Brands
NP = Non-preferred Brands

NC = Non covered drugs

Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits
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)	np				
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	p				
ethynodiol diacetate & ethinyl estradiol tab 1 mg-50 mcg	np				
etonogestrel-ethinyl estradiol va ring 0.12-0.015 mg/24hr (Nuvaring)	NC				
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)	np				
levonorg-eth est tab 0.15-0.03mg(84) & eth est tab 0.01mg(7) (Seasonique)	np				
levonorgestrel & ethinyl estradiol (91-day) tab 0.15-0.03 mg	np				
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				

Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits
levonorgestrel-ethinyl estradiol-fe tab 0.1 mg-20 mcg (21) (Balcoltra)	NC				
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				
NATAZIA- estradiol valerate-dienogest tab 3 mg /2-2 mg/2-3 mg/1 mg	NP				
NEXTSTELLIS- drospirenone-estetrol tab 3-14.2 mg	NC				
norelgestromin-ethinyl estradiol td ptwk 150-35 mcg/24hr	np				
norethindrone & ethinyl estradiol tab 0.4 mg-35 mcg, 0.5 mg-35 mcg	np				
norethindrone & ethinyl estradiol tab 1 mg-35 mcg	p				
norethindrone & ethinyl estradiol-fe chew tab 0.4 mg-35 mcg	np				
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 (Estrostep fe)	np				
norethindrone ace & ethinyl estradiol tab 1 mg-20 mcg	p				
norethindrone ace & ethinyl estradiol tab 1.5 mg-30 mcg	np				
norethindrone ace & ethinyl estradiol-fe tab 1 mg-20 mcg, 1.5 mg-30 mcg	p				

p = Preferred Generics
np = Non-preferred Generics

P = Preferred Brands
NP = Non-preferred Brands

NC = Non covered drugs

Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits
norethindrone ace-eth estradiol-fe chew tab 1 mg-20 mcg (24) (Minastrin 24 fe)	np				
norethindrone ace-ethinyl estradiol-fe cap 1 mg-20 mcg (24) (Taytulla)	np				
norethindrone ace-ethinyl estradiol-fe tab 1 mg-20 mcg (24)	np				
norethindrone tab 0.35 mg (Ortho micronor)	p				
norethindrone-eth estradiol tab 0.5-35/0.75-35/1-35 mg-mcg	p				
norethindrone-eth estradiol tab 0.5-35/1-35/0.5-35 mg-mcg	np				
norgestimate & ethinyl estradiol tab 0.25 mg-35 mcg	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				
norgestrel & ethinyl estradiol tab 0.3 mg-30 mcg	p				
NUVARING- etonogestrel-ethinyl estradiol va ring 0.12-0.015 mg/24hr	np				
SLYND- drospirenone tab 4 mg	NC				
TWIRLA- levonorgestrel-ethinyl estradiol td ptwk 120-30 mcg/24hr	NC				
TYBLUME- levonorgestrel & ethinyl estradiol chew tab 0.1 mg-20 mcg	NP				
VELIVET- desogest-ethin est tab 0.1-0.025/0.125-0.025/0.15-0.025mg-mg	NP				
PROGESTINS					
medroxyprogesterone acetate tab 2.5 mg, 5 mg, 10 mg (Provera)	p				
MEGESTROL ACETATE- megestrol acetate susp 625 mg/5ml	np				

Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits
norethindrone acetate tab 5 mg (Aygestin)	np				
progesterone cap 100 mg, 200 mg (Prometrium)	np				
progesterone im in oil 50 mg/ml	np				
ANTIDIABETICS					
Antidiabetics					
acarbose tab 25 mg, 50 mg, 100 mg (Precose)	np				
ALOGLIPTIN- alogliptin benzoate tab 6.25 mg (base equiv), 12.5 mg (base equiv), 25 mg (base equiv)	NC				
ALOGLIPTIN/METFORMIN HCL- alogliptin-metformin hcl tab 12.5-500 mg	NC				
ALOGLIPTIN/METFORMIN HYDR- alogliptin-metformin hcl tab 12.5-1000 mg	NC				
ALOGLIPTIN/PIOGLITAZONE- alogliptin-pioglitazone tab 12.5-30 mg, 25-15 mg, 25-30 mg, 25-45 mg	NC				
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	NC				
BRENZAVVY- bexagliflozin tab 20 mg	NC				
BYDUREON BCISE- exenatide extended release susp auto-injector 2 mg/0.85ml	NP		•		•
BYETTA- exenatide soln pen-injector 5 mcg/0.02ml, 10 mcg/0.04ml	NC				
CYCLOSET- bromocriptine mesylate tab 0.8 mg (base equivalent)	NP				

p = Preferred Generics
np = Non-preferred Generics

P = Preferred Brands
NP = Non-preferred Brands

NC = Non covered drugs

Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits	Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits
DAPAGLIFLOZIN PROPANEDIOL-dapagliflozin prop-metformin hcl tab er 24hr 5-1000 mg, 10-1000 mg	NC					GVOKE HYPOPEN 2-PACK- glucagon subcutaneous solution auto-injector 0.5 mg/0.1ml, 1 mg/0.2ml	P				
DAPAGLIFLOZIN PROPANEDIOL-dapagliflozin propanediol tab 5 mg (base equivalent), 10 mg (base equivalent)	NC					GVOKE KIT- glucagon subcutaneous soln 1 mg/0.2ml	P				
diazoxide susp 50 mg/ml (Proglycem)	np					GVOKE PFS- glucagon subcutaneous soln pref syringe 1 mg/0.2ml	P				
FARXIGA- dapagliflozin propanediol tab 5 mg (base equivalent), 10 mg (base equivalent)	P				•	INVOKAMET- canagliflozin-metformin hcl tab 50-500 mg, 50-1000 mg, 150-500 mg, 150-1000 mg	NC				
glimepiride tab 1 mg, 2 mg, 4 mg (Amaryl)	p					INVOKAMET XR- canagliflozin-metformin hcl tab er 24hr 50-500 mg, 50-1000 mg, 150-500 mg, 150-1000 mg	NC				
GLIPIZIDE- glipizide tab 2.5 mg	NP					INVOKANA- canagliflozin tab 100 mg, 300 mg	NC				
glipizide tab er 24hr 2.5 mg, 5 mg, 10 mg (Glucotrol xl)	p					JANUMET- sitagliptin-metformin hcl tab 50-500 mg, 50-1000 mg	P				•
glipizide tab 5 mg, 10 mg (Glucotrol)	p					JANUMET XR- sitagliptin-metformin hcl tab er 24hr 50-500 mg, 50-1000 mg, 100-1000 mg	P				•
glipizide-metformin hcl tab 2.5-250 mg, 2.5-500 mg, 5-500 mg	np					JANUVIA- sitagliptin phosphate tab 25 mg (base equiv), 50 mg (base equiv), 100 mg (base equiv)	P				•
GLUCAGON EMERGENCY KIT FO- glucagon (rdna) for inj kit 1 mg	NP					JARDIANCE- empagliflozin tab 10 mg, 25 mg	P				•
GLUCAGON EMERGENCY KIT FO- glucagon hcl for inj 1 mg	P					JENTADUETO- linagliptin-metformin hcl tab 2.5-500 mg, 2.5-850 mg, 2.5-1000 mg	NC				
GLYBURIDE MICRONIZED- glyburide micronized tab 1.5 mg, 3 mg, 6 mg	NP					JENTADUETO XR- linagliptin-metformin hcl tab er 24hr 2.5-1000 mg, 5-1000 mg	NC				
glyburide tab 1.25 mg, 2.5 mg, 5 mg	p					metformin hcl oral soln 500 mg/5ml (Riomet)	np		•		•
glyburide-metformin tab 1.25-250 mg, 2.5-500 mg, 5-500 mg	p					metformin hcl tab er 24hr 500 mg, 750 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										

p = Preferred Generics
np = Non-preferred Generics

P = Preferred Brands
NP = Non-preferred Brands

NC = Non covered drugs

Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits
metformin hcl tab er 24hr osmotic 500 mg, 1000 mg (Fortamet)	np			•	•
metformin hcl tab er 24hr modified release 500 mg, 1000 mg (Glumetza)	np			•	•
metformin hcl tab 500 mg, 850 mg, 1000 mg	p				
METFORMIN HYDROCHLORIDE- metformin hcl tab 625 mg	NP				
mifepristone tab 300 mg (Korlym)	np	•	•		•
MIGLITOL- miglitol tab 25 mg, 50 mg, 100 mg	NP				
MOUNJARO- tirzepatide soln pen-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 (Starlix)	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)	np				
QTERN- dapagliflozin-saxagliptin tab 5-5 mg, 10-5 mg	NC				
repaglinide tab 0.5 mg, 1 mg, 2 mg	np				
RYBELSUS- semaglutide tab 3 mg, 7 mg, 14 mg	P		•		•

Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits
saxagliptin hcl tab 2.5 mg (base equiv), 5 mg (base equiv) (Onglyza)	NC				
saxagliptin-metformin hcl tab er 24hr 2.5-1000 mg, 5-500 mg, 5-1000 mg (Kombiglyze xr)	NC				
SEGLUROMET- ertugliflozin-metformin hcl tab 2.5-500 mg, 2.5-1000 mg, 7.5-500 mg, 7.5-1000 mg	NC				
SITAGLIPTIN- sitagliptin tab 25 mg, 50 mg, 100 mg	NC				
SOLIQUA 100/33- insulin glargine-lixisenatide sol pen-inj 100-33 unit-mcg/ml	P			•	•
STEGLATRO- ertugliflozin l-pyroglutamic acid tab 5 mg (base equiv), 15 mg (base equiv)	NC				
STEGLUJAN- ertugliflozin-sitagliptin tab 5-100 mg, 15-100 mg	NC				
SYMLINPEN 120- pramlintide acetate pen-inj 2700 mcg/2.7ml (1000 mcg/ml)	NC				
SYMLINPEN 60- pramlintide acetate pen-inj 1500 mcg/1.5ml (1000 mcg/ml)	NC				
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	NC				
TRIJARDY XR- empagliflozin-linagliptin-metformin tab er 24hr 12.5-2.5-1000mg	P				•

p = Preferred Generics
np = Non-preferred Generics

P = Preferred Brands
NP = Non-preferred Brands

NC = Non covered drugs

Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits
TRIJARDY XR- empagliflozin-linagliptin-metformin tab er 24hr 5-2.5-1000mg, 10-5-1000 mg, 25-5-1000 mg	P				•
TRULICITY- dulaglutide soln pen-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)	NC				
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				
ZITUVIO- sitagliptin tab 25 mg, 50 mg, 100 mg	NC				
Rapid-Acting Insulins					
ADMELOG- insulin lispro inj soln 100 unit/ml	NC				
ADMELOG SOLOSTAR- insulin lispro soln pen-injector 100 unit/ml (1 unit dial)	NC				
APIDRA- insulin glulisine inj 100 unit/ml	NC				
APIDRA SOLOSTAR- insulin glulisine soln pen-injector inj 100 unit/ml	NC				
FIASP- insulin aspart (with niacinamide) inj 100 unit/ml	P				•

Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits
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				•
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	NC				
INSULIN ASPART FLEXPEN- insulin aspart soln pen-injector 100 unit/ml	NC				
INSULIN ASPART PENFILL- insulin aspart soln cartridge 100 unit/ml	NC				
INSULIN LISPRO- insulin lispro inj soln 100 unit/ml	NC				
INSULIN LISPRO JUNIOR KWI- insulin lispro soln pen-injector 100 unit/ml (0.5 unit dial)	NC				
INSULIN LISPRO KWIKPEN- insulin lispro soln pen-injector 100 unit/ml (1 unit dial)	NC				
LYUMJEV- insulin lispro-aabc inj 100 unit/ml	P				•
LYUMJEV KWIKPEN- insulin lispro-aabc soln pen-injector 200 unit/ml	P				•

p = Preferred Generics
np = Non-preferred Generics

P = Preferred Brands
NP = Non-preferred Brands

NC = Non covered drugs

Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits
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				•
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	NC				
AFREZZA- insulin regular (human) inhal powd 90 x 4 unit & 90 x 8 unit	NC				
AFREZZA- insulin regular (human) inhalation powder 4 unit/cartridge, 8 unit/cartridge, 12 unit/cartridge	NC				
HUMULIN R- insulin regular (human) inj 100 unit/ml	P				•
HUMULIN R U-500 (CONCENTR- insulin regular (human) inj 500 unit/ml	P				•
HUMULIN R U-500 KWIKPEN- insulin regular (human) soln pen-injector 500 unit/ml	P				•
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					

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

p = Preferred Generics
np = Non-preferred Generics

P = Preferred Brands
NP = Non-preferred Brands

NC = Non covered drugs

Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits
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	NC				
BASAGLAR TEMPO PEN- insulin glargine pen-inj with transmitter port 100 unit/ml	NC				
INSULIN DEGLUDEC- insulin degludec inj 100 unit/ml	NC				
INSULIN DEGLUDEC FLEXTOUC- insulin degludec soln pen-injector 100 unit/ml, 200 unit/ml	NC				
INSULIN GLARGINE MAX SOLO- insulin glargine soln pen-injector 300 unit/ml (2 unit dial)	NC				
INSULIN GLARGINE SOLOSTAR- insulin glargine soln pen-injector 300 unit/ml (1 unit dial)	NC				
INSULIN GLARGINE-YFGN- insulin glargine-yfgn inj 100 unit/ml	NC				
INSULIN GLARGINE-YFGN- insulin glargine-yfgn soln pen-injector 100 unit/ml	NC				
LANTUS- insulin glargine inj 100 unit/ml	NC				

Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits
LANTUS SOLOSTAR- insulin glargine soln pen-injector 100 unit/ml	NC				
LEVEMIR- insulin detemir inj 100 unit/ml	P				•
LEVEMIR FLEXPEN- insulin detemir soln pen-injector 100 unit/ml	P				•
REZVOGLAR KWIKPEN- insulin glargine-aglr soln pen-injector 100 unit/ml	NC				
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), 16.25 mg, 30 mg (1/2 grain), 32.5 mg, 60 mg (1 grain), 65 mg, 90 mg (1 1/2 grain), 97.5 mg, 120 mg (2 grain), 130 mg	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				

p = Preferred Generics
np = Non-preferred Generics

P = Preferred Brands
NP = Non-preferred Brands

NC = Non covered drugs

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)	np				
methimazole tab 5 mg, 10 mg (Tapazole)	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	np				
SYNTHROID- 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	P				

Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits
THYQUIDITY- levothyroxine sodium oral solution 100 mcg/5ml	NP				
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				
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				
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				
OXYTOCICS					
CERVIDIL- dinoprostone vaginal inserts 10 mg	NP				
methylergonovine maleate tab 0.2 mg	np				
ENDOCRINE and METABOLIC AGENTS - MISC.					
ACTHAR- corticotropin inj gel 80 unit/ml	NP	•	•		
ACTHAR GEL- corticotropin subcutaneous gel auto-injector 40 unit/0.5ml, 80 unit/ml	NP	•	•		
ALENDRONATE SODIUM- alendronate sodium tab 5 mg	NP				
alendronate sodium oral soln 70 mg/75ml	np				
alendronate sodium tab 10 mg, 35 mg	p				

p = Preferred Generics
np = Non-preferred Generics

P = Preferred Brands
NP = Non-preferred Brands

NC = Non covered drugs

Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits
alendronate sodium tab 70 mg (Fosamax)	p				
betaine powder for oral solution (Cystadane)	np	•			
BINOSTO- alendronate sodium effervescent tab 70 mg	NP				
cabergoline tab 0.5 mg	np				
calcitonin (salmon) inj 200 unit/ml (Miacalcin)	np				
calcitonin (salmon) nasal soln 200 unit/act	np				
calcitriol cap 0.25 mcg (Rocaltrol)	p				
calcitriol cap 0.5 mcg (Rocaltrol)	np				
calcitriol oral soln 1 mcg/ml (Rocaltrol)	np				
carglumic acid soluble tab 200 mg (Carbaglu)	np	•	•		
cetrotirelix acetate for inj kit 0.25 mg (Cetrotide)	NC				
CHORIONIC GONADOTROPIN- chorionic gonadotropin for im inj 10000 unit	NC				
cinacalcet hcl tab 30 mg (base equiv), 60 mg (base equiv), 90 mg (base equiv) (Sensipar)	np	•			
CLOMID- clomiphene citrate tab 50 mg	P				
CORTROPHIN- corticotropin inj gel 80 unit/ml	NC				
desmopressin acetate inj 4 mcg/ml (Ddavp)	np				
desmopressin acetate nasal spray soln 0.01% (Ddavp)	np				
desmopressin acetate nasal spray soln 0.01% (refrigerated)	np				

Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits
desmopressin acetate preservative free (pf) inj 4 mcg/ml (Ddavp)	np				
desmopressin acetate tab 0.1 mg, 0.2 mg (Ddavp)	np				
doxercalciferol cap 0.5 mcg, 1 mcg, 2.5 mcg	np				
EGRIFTA SV- tesamorelin acetate for inj 2 mg (base equiv)	NC				
FOLLISTIM AQ- follitropin beta inj 300 unit/0.36ml, 600 unit/0.72ml, 900 unit/1.08ml	P	•	•		•
FOSAMAX PLUS D- alendronate sodium-cholecalciferol tab 70-2800 mg-unit, 70-5600 mg-unit	NP				
GALAFOLD- migalastat hcl cap 123 mg (base equivalent)	NP	•	•		•
ganirelix acetate soln prefilled syringe 250 mcg/0.5ml (Ganirelix acetate)	np	•	•		•
GENOTROPIN- somatropin for subcutaneous inj cartridge 5 mg, 12 mg (36 unit)	P	•	•		
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	•	•		
GONAL-F- follitropin alfa for inj 450 unit, 1050 unit	NC				
GONAL-F RFF- follitropin alfa for subcutaneous inj 75 unit	NC				
GONAL-F RFF REDIJECT- follitropin alfa subcutaneous soln pen-inj 300 unit/0.5ml, 450 unit/0.75ml, 900 unit/1.5ml	NC				

p = Preferred Generics
np = Non-preferred Generics

P = Preferred Brands
NP = Non-preferred Brands

NC = Non covered drugs

Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits	Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits
HUMATROPE- somatropin for inj cartridge 6 mg (18 unit), 12 mg (36 unit), 24 mg	NC					nitisinone cap 2 mg, 5 mg, 10 mg, 20 mg (Orfadin)	np	•			
ibandronate sodium tab 150 mg (base equivalent) (Boniva)	p					NITYR- nitisinone tab 2 mg, 5 mg, 10 mg	P	•			
INCRELEX- mecasermin inj 40 mg/4ml (10 mg/ml)	P	•				NOCDURNA- desmopressin acetate sublingual tab 27.7 mcg, 55.3 mcg	NP				
ISTURISA- osilodrostat phosphate tab 1 mg, 5 mg	NP	•	•		•	NORDITROPIN FLEXPRO- somatropin solution pen-injector 5 mg/1.5ml, 10 mg/1.5ml, 15 mg/1.5ml, 30 mg/3ml	NC				
JYNARQUE- tolvaptan tab therapy pack 15 mg, 30 & 15 mg, 45 & 15 mg, 60 & 30 mg, 90 & 30 mg	NP	•	•		•	NOVAREL- chorionic gonadotropin for im inj 5000 unit	NC				
JYNARQUE- tolvaptan tab 15 mg, 30 mg	NP	•	•		•	NULIBRY- fosdenopterin hydrobromide for iv soln 9.5 mg	NP	•			
KERENDIA- finerenone tab 10 mg, 20 mg	NC					NUTROPIN AQ NUSPIN 10- somatropin solution pen-injector 10 mg/2ml	NC				
levocarnitine oral soln 1 gm/10ml (10%) (Carnitor)	np					NUTROPIN AQ NUSPIN 20- somatropin solution pen-injector 20 mg/2ml	NC				
levocarnitine tab 330 mg (Carnitor)	np					NUTROPIN AQ NUSPIN 5- somatropin solution pen-injector 5 mg/2ml	NC				
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	NP	•			
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)	np	•			
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)	np	•			
MENOPUR- menopins for subcutaneous inj 75 unit	NP	•	•		•	OLPRUVA- sodium phenylbutyrate packet for susp 2 gm therapy pack	NC				
MYALEPT- metreleptin for subcutaneous inj 11.3 mg	NP	•	•			OLPRUVA- sodium phenylbutyrate packet for susp 3 gm therapy pack	NC				
MYCAPSSA- octreotide acetate cap delayed release 20 mg	NP	•									
NGENLA- somatrogon-ghla solution pen-injector 24 mg/1.2ml (20 mg/ml), 60 mg/1.2ml (50 mg/ml)	NC										

p = Preferred Generics
np = Non-preferred Generics

P = Preferred Brands
NP = Non-preferred Brands

NC = Non covered drugs

Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits
OLPRUVA- sodium phenylbutyrate packet for susp 4 gm therapy pack	NC				
OLPRUVA- sodium phenylbutyrate packet for susp 5 gm therapy pack	NC				
OLPRUVA- sodium phenylbutyrate packet for susp 6 gm therapy pack	NC				
OLPRUVA- sodium phenylbutyrate packet for susp 6.67 gm therapy pack	NC				
OMNITROPE- somatropin for inj 5.8 mg	P	•	•		
OMNITROPE- somatropin solution cartridge 5 mg/1.5ml, 10 mg/1.5ml	P	•	•		
OPFOLDA- miglustat (gaa deficiency) cap 65 mg	NP	•	•		•
ORFADIN- nitisinone susp 4 mg/ml	P	•			
ORLISSA- elagolix sodium tab 150 mg (base equiv), 200 mg (base equiv)	P		•		•
OSPHENA- ospemifene tab 60 mg	NP				
OVIDREL- choriogonadotropin alfa inj 250 mcg/0.5ml	P	•	•		•
PALYNZIQ- pegvaliase-pqpz subcutaneous soln pref syringe 2.5 mg/0.5ml, 10 mg/0.5ml, 20 mg/ml	NP	•	•		
paricalcitol cap 1 mcg, 2 mcg (Zemplar)	np				
paricalcitol cap 4 mcg	np				
PHEBURANE- sodium phenylbutyrate oral pellets 483 mg/gm	NP	•	•		
PREGNYL- chorionic gonadotropin for im inj 10000 unit	P	•	•		•
PREGNYL W/DILUENT BENZYL-chorionic gonadotropin for im inj 10000 unit	P	•	•		•

Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits
raloxifene hcl tab 60 mg (Evista)	np				
RAVICTI- glycerol phenylbutyrate liquid 1.1 gm/ml	NP	•	•		
RAYALDEE- calcifediol cap er 30 mcg	NP				
RECORLEV- levoketoconazole tab 150 mg	NP	•	•		•
REVCOVI- elapegademase-lvlr im soln 2.4 mg/1.5ml (1.6 mg/ml)	P	•			
risedronate sodium tab delayed release 35 mg (Atelvia)	np				
risedronate sodium tab 5 mg, 30 mg	np				
risedronate sodium tab 35 mg, 150 mg (Actonel)	np				
SAIZEN- somatropin (non-refrigerated) for inj 5 mg	NC				
sapropterin dihydrochloride powder packet 100 mg, 500 mg (Kuvan)	np	•	•		
sapropterin dihydrochloride tab 100 mg (Kuvan)	np	•	•		
SEROSTIM- somatropin (non-refrigerated) for subcutaneous inj 4 mg, 5 mg, 6 mg	NC				
SIGNIFOR- pasireotide diaspartate inj 0.3 mg/ml (base equiv), 0.6 mg/ml (base equiv), 0.9 mg/ml (base equiv)	NP	•			
SKYTROFA- lonapegsomatropin-tcgd for subcutaneous inj cartridge 3 mg, 3.6 mg, 4.3 mg, 5.2 mg, 6.3 mg, 7.6 mg, 9.1 mg, 11 mg	NP	•	•		
SKYTROFA- lonapegsomatropin-tcgd for subcutaneous inj cart 13.3 mg	NP	•	•		
sodium phenylbutyrate oral powder 3 gm/teaspoonful (Buphenyl)	np	•	•		

p = Preferred Generics
np = Non-preferred Generics

P = Preferred Brands
NP = Non-preferred Brands

NC = Non covered drugs

Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits
sodium phenylbutyrate tab 500 mg (Buphenyl)	np	•	•		
SOGROYA- somapacitan-beco solution pen-injector 5 mg/1.5ml, 10 mg/1.5ml, 15 mg/1.5ml	NC				
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	•			
STRENSIQ- asfotase alfa subcutaneous inj 18 mg/0.45ml, 28 mg/0.7ml, 40 mg/ml, 80 mg/0.8ml	P	•	•		
SYNAREL- nafarelin acetate nasal soln 2 mg/ml (200 mcg/act) (base eq)	NP	•			
TERIPARATIDE- teriparatide (recombinant) soln pen-inj 620 mcg/2.48ml	NC				
teriparatide (recombinant) soln pen-inj 600 mcg/2.4ml (Forteo)	np	•	•		•
tolvaptan tab 15 mg, 30 mg (Samsca)	np	•			•
TYMLOS- abaloparatide subcutaneous soln pen-injector 3120 mcg/1.56ml	P	•	•		•
VEOZAH- fezolinetant tab 45 mg	NC				
VOXZOGO- vosoritide for subcutaneous inj 0.4 mg, 0.56 mg, 1.2 mg	NP	•	•		•
XPHOZAH- tenapanor hcl tab 20 mg, 30 mg	NC				
XURIDEN- uridine triacetate oral granules packet 2 gm	NP	•			
ZOMACTON- somatropin for inj 10 mg	NC				
ZOMACTON- somatropin for subcutaneous inj 5 mg	NC				

CARDIOVASCULAR AGENTS

Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits
CARDIOTONICS					
DIGOXIN- digoxin oral soln 0.05 mg/ml	NP		•		
digoxin oral soln 0.05 mg/ml (Digoxin)	np		•		
digoxin tab 62.5 mcg (0.0625 mg) (Lanoxin)	np				
digoxin tab 125 mcg (0.125 mg), 250 mcg (0.25 mg) (Lanoxin)	p				
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 500 mg, 1000 mg	NP		•		•
isosorbide dinitrate tab 5 mg, 40 mg (Isordil titradose)	np				
isosorbide dinitrate tab 10 mg, 20 mg, 30 mg	np				
ISOSORBIDE MONONITRATE- isosorbide mononitrate tab 10 mg, 20 mg	NP				
isosorbide mononitrate tab er 24hr 30 mg, 60 mg, 120 mg	p				
NITRO-BID- nitroglycerin oint 2%	NP				
NITRO-DUR- nitroglycerin td patch 24hr 0.3 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, 0.6 mg (Nitrostat)	np				
nitroglycerin sl tab 0.4 mg (Nitrostat)	p				

p = Preferred Generics
np = Non-preferred Generics

P = Preferred Brands
NP = Non-preferred Brands

NC = Non covered drugs

Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits
nitroglycerin td patch 24hr 0.1 mg/hr, 0.2 mg/hr, 0.4 mg/hr, 0.6 mg/hr (Nitro-dur)	np				
nitroglycerin tl soln 0.4 mg/spray (400 mcg/spray) (Nitrolingual pumpspr)	np				
ranolazine tab er 12hr 500 mg, 1000 mg (Ranexa)	np				
BETA BLOCKERS					
acebutolol hcl cap 200 mg, 400 mg	np				
atenolol tab 25 mg, 50 mg, 100 mg (Tenormin)	p				
betaxolol hcl tab 10 mg, 20 mg	np				
bisoprolol fumarate tab 5 mg	p				
bisoprolol fumarate tab 10 mg	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				
HEMANGEOL- propranolol hcl oral soln 4.28 mg/ml (3.75 mg/ml base equiv)	P				
INDERAL XL- propranolol hcl sustained-release beads cap er 24hr 80 mg, 120 mg	NP				
INNOPRAN XL- propranolol hcl sustained-release beads cap er 24hr 80 mg, 120 mg	NP				
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				
labetalol hcl tab 100 mg	p				
labetalol hcl tab 200 mg, 300 mg	np				

Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits
metoprolol succinate tab er 24hr 25 mg (tartrate equiv), 50 mg (tartrate equiv), 100 mg (tartrate equiv) (Toprol xl)	p				
metoprolol succinate tab er 24hr 200 mg (tartrate equiv) (Toprol xl)	np				
metoprolol tartrate tab 25 mg, 37.5 mg, 75 mg	p				
metoprolol tartrate tab 50 mg, 100 mg (Lopressor)	p				
nadolol tab 20 mg, 40 mg, 80 mg (Corgard)	np				
nebivolol hcl tab 2.5 mg (base equivalent), 5 mg (base equivalent), 10 mg (base equivalent), 20 mg (base equivalent) (Bystolic)	np				
pindolol tab 5 mg, 10 mg	np				
PROPRANOLOL HCL- propranolol hcl oral soln 40 mg/5ml	P		•		•
propranolol hcl cap er 24hr 60 mg, 80 mg, 120 mg, 160 mg (Inderal la)	np				
propranolol hcl oral soln 20 mg/5ml	p		•		•
propranolol hcl tab 10 mg, 20 mg, 40 mg	p				
propranolol hcl tab 60 mg, 80 mg	np				
sotalol hcl (afib/af) tab 80 mg (Betapace af)	p				
sotalol hcl (afib/af) tab 120 mg, 160 mg (Betapace af)	np				
sotalol hcl tab 80 mg, 120 mg (Betapace)	p				
sotalol hcl tab 160 mg (Betapace)	np				
sotalol hcl tab 240 mg	np				
SOTYLIZE- sotalol hcl oral solution 5 mg/ml	NP		•		•

p = Preferred Generics
np = Non-preferred Generics

P = Preferred Brands
NP = Non-preferred Brands

NC = Non covered drugs

Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits
timolol maleate tab 5 mg, 10 mg, 20 mg	np				
CALCIUM CHANNEL BLOCKERS					
amlodipine besylate tab 2.5 mg (base equivalent), 5 mg (base equivalent), 10 mg (base equivalent) (Norvasc)	p				
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	p				
diltiazem hcl cap er 24hr 180 mg, 240 mg	np				
diltiazem hcl coated beads cap er 24hr 120 mg, 180 mg, 240 mg (Cardizem cd)	p				
diltiazem hcl coated beads cap er 24hr 300 mg, 360 mg (Cardizem cd)	np				
diltiazem hcl extended release beads cap er 24hr 120 mg, 180 mg (Tiazac)	p				
diltiazem hcl extended release beads cap er 24hr 240 mg, 300 mg, 360 mg, 420 mg (Tiazac)	np				
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 (Cardizem)	p				
diltiazem hcl tab 90 mg	np				
diltiazem hcl tab 120 mg (Cardizem)	np				
felodipine tab er 24hr 2.5 mg, 5 mg, 10 mg	p				
isradipine cap 2.5 mg, 5 mg	np				

Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits
KATERZIA- amlodipine benzoate oral susp 1 mg/ml (base equivalent)	NP		•		•
LEVAMLODIPINE- levamlodipine maleate tab 2.5 mg, 5 mg	NP				
nicardipine hcl cap 20 mg, 30 mg	np				
nifedipine cap 10 mg (Procardia)	np				
nifedipine cap 20 mg	np				
nifedipine tab er 24hr 30 mg	p				
nifedipine tab er 24hr 60 mg, 90 mg	np				
nifedipine tab er 24hr osmotic release 30 mg (Procardia xl)	p				
nifedipine tab er 24hr osmotic release 60 mg, 90 mg (Procardia xl)	np				
nimodipine cap 30 mg	np				
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		•		•
NYMALIZE- nimodipine oral soln 6 mg/ml	NP		•		•
verapamil hcl cap er 24hr 120 mg, 180 mg, 240 mg (Verelan)	np				
VERAPAMIL HCL ER- verapamil hcl cap er 24hr 100 mg, 300 mg	NP				
VERAPAMIL HCL SR- verapamil hcl cap er 24hr 360 mg	NP				
verapamil hcl tab er 120 mg, 180 mg, 240 mg (Calan sr)	p				
verapamil hcl tab 40 mg, 80 mg, 120 mg	p				

p = Preferred Generics
np = Non-preferred Generics

P = Preferred Brands
NP = Non-preferred Brands

NC = Non covered drugs

Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits
VERAPAMIL HYDROCHLORIDE E-verapamil hcl cap er 24hr 100 mg, 200 mg	NP				
VERELAN PM- verapamil hcl cap er 24hr 100 mg, 200 mg, 300 mg	NP				
ANTIARRHYTHMICS					
amiodarone hcl tab 100 mg, 400 mg	np				
amiodarone hcl tab 200 mg	p				
disopyramide phosphate cap 100 mg, 150 mg (Norpace)	np				
dofetilide cap 125 mcg (0.125 mg), 250 mcg (0.25 mg), 500 mcg (0.5 mg) (Tikosyn)	np				
flecainide acetate tab 50 mg, 100 mg, 150 mg	np				
mexiletine hcl cap 150 mg, 200 mg, 250 mg	np				
MULTAQ- dronedarone hcl tab 400 mg (base equivalent)	P				
NORPACE- disopyramide phosphate cap 100 mg, 150 mg	NP				
NORPACE CR- disopyramide phosphate cap er 12hr 100 mg, 150 mg	NP				
propafenone hcl cap er 12hr 225 mg, 325 mg, 425 mg (Rythmol sr)	np				
propafenone hcl tab 150 mg	p				
propafenone hcl tab 225 mg, 300 mg	np				
quinidine gluconate tab er 324 mg	np				
QUINIDINE SULFATE- quinidine sulfate tab 200 mg, 300 mg	NP				
ANTIHYPERTENSIVES					

Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits
aliskiren fumarate tab 150 mg (base equivalent), 300 mg (base equivalent) (Tekturna)	np				
amlodipine besylate-benazepril hcl cap 2.5-10 mg, 5-40 mg	p				
amlodipine besylate-benazepril hcl cap 5-10 mg, 5-20 mg, 10-20 mg, 10-40 mg (Lotrel)	p				
amlodipine besylate-olmesartan medoxomil tab 5-20 mg, 5-40 mg, 10-20 mg, 10-40 mg (Azor)	np				
amlodipine besylate-valsartan tab 5-160 mg, 5-320 mg, 10-160 mg, 10-320 mg (Exforge)	np				
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)	np				
atenolol & chlorthalidone tab 50-25 mg (Tenoretic 50)	p				
atenolol & chlorthalidone tab 100-25 mg (Tenoretic 100)	np				
benazepril & hydrochlorothiazide tab 5-6.25 mg	np				
benazepril & hydrochlorothiazide tab 10-12.5 mg, 20-12.5 mg, 20-25 mg (Lotensin hct)	np				
benazepril hcl tab 5 mg	p				
benazepril hcl tab 10 mg, 20 mg, 40 mg (Lotensin)	p				
bisoprolol & hydrochlorothiazide tab 2.5-6.25 mg, 10-6.25 mg	p				
bisoprolol & hydrochlorothiazide tab 5-6.25 mg (Ziac)	p				
candesartan cilexetil tab 4 mg, 8 mg, 16 mg, 32 mg (Atacand)	np				

p = Preferred Generics
np = Non-preferred Generics

P = Preferred Brands
NP = Non-preferred Brands

NC = Non covered drugs

Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits	Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits
candesartan cilexetil-hydrochlorothiazide tab 16-12.5 mg, 32-12.5 mg, 32-25 mg (Atacand hct)	np					eplerenone tab 25 mg, 50 mg (Inspra)	np				
captopril tab 12.5 mg, 25 mg, 50 mg, 100 mg	np					fosinopril sodium & hydrochlorothiazide tab 10-12.5 mg, 20-12.5 mg	np				
CAPTOPRIL/HYDROCHLOROTHIA-captopril & hydrochlorothiazide tab 25-15 mg, 25-25 mg, 50-15 mg, 50-25 mg	NP					fosinopril sodium tab 10 mg, 20 mg, 40 mg	p				
clonidine hcl tab 0.1 mg, 0.2 mg, 0.3 mg (Catapres)	p					guanfacine hcl tab 1 mg, 2 mg	np				
CLONIDINE HYDROCHLORIDE E-clonidine hcl tab er 24hr 0.17 mg (base equivalent)	NP					hydralazine hcl tab 10 mg, 25 mg, 50 mg, 100 mg	p				
clonidine td patch weekly 0.1 mg/24hr (Catapres-tts-1)	np					irbesartan tab 75 mg, 150 mg, 300 mg (Avapro)	p				
clonidine td patch weekly 0.2 mg/24hr (Catapres-tts-2)	np					irbesartan-hydrochlorothiazide tab 150-12.5 mg, 300-12.5 mg (Avalide)	p				
clonidine td patch weekly 0.3 mg/24hr (Catapres-tts-3)	np					lisinopril & hydrochlorothiazide tab 10-12.5 mg, 20-12.5 mg, 20-25 mg (Zestoretic)	p				
doxazosin mesylate tab 1 mg, 2 mg, 4 mg, 8 mg (Cardura)	p					lisinopril tab 2.5 mg, 5 mg, 30 mg, 40 mg (Zestril)	p				
EDARBI- azilsartan medoxomil tab 40 mg, 80 mg	NP					lisinopril tab 10 mg, 20 mg (Prinivil)	p				
EDARBYCLOR- azilsartan medoxomil-chlorthalidone tab 40-12.5 mg, 40-25 mg	NP					losartan potassium & hydrochlorothiazide tab 50-12.5 mg, 100-12.5 mg, 100-25 mg (Hyzaar)	p				
enalapril maleate & hydrochlorothiazide tab 5-12.5 mg	p					losartan potassium tab 25 mg, 50 mg, 100 mg (Cozaar)	p				
enalapril maleate & hydrochlorothiazide tab 10-25 mg (Vaseretic)	p					METHYLDOPA- methyl dopa tab 250 mg, 500 mg	NP				
enalapril maleate oral soln 1 mg/ml (Epaned)	np		•		•	metoprolol & hydrochlorothiazide tab 50-25 mg (Lopressor hct)	np				
enalapril maleate tab 2.5 mg, 5 mg, 10 mg, 20 mg (Vasotec)	p					metoprolol & hydrochlorothiazide tab 100-25 mg, 100-50 mg	np				
						metyrosine cap 250 mg (Demser)	np				
						minoxidil tab 2.5 mg, 10 mg	p				
						moexipril hcl tab 7.5 mg, 15 mg	np				

p = Preferred Generics
np = Non-preferred Generics

P = Preferred Brands
NP = Non-preferred Brands

NC = Non covered drugs

Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits	Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits
NEXICLON XR- clonidine hcl tab er 24hr 0.17 mg (base equivalent)	NP					telmisartan tab 40 mg, 80 mg (Micardis)	np				
olmesartan medoxomil tab 5 mg, 20 mg, 40 mg (Benicar)	p					telmisartan-hydrochlorothiazide tab 40-12.5 mg, 80-12.5 mg, 80-25 mg (Micardis hct)	np				
olmesartan medoxomil-hydrochlorothiazide tab 20-12.5 mg, 40-12.5 mg, 40-25 mg (Benicar hct)	p					TELMISARTAN/AMLODIPINE- telmisartan-amlodipine tab 40-5 mg, 40-10 mg, 80-5 mg, 80-10 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					terazosin hcl cap 1 mg (base equivalent), 2 mg (base equivalent), 5 mg (base equivalent), 10 mg (base equivalent)	p				
PERINDOPRIL ERBUMINE- perindopril erbumine tab 2 mg, 8 mg	NP					trandolapril tab 1 mg, 2 mg, 4 mg	p				
perindopril erbumine tab 4 mg	np					TRANDOLAPRIL/VERAPAMIL HC- trandolapril-verapamil hcl tab er 1-240 mg, 2-180 mg, 2-240 mg, 4-240 mg	NP				
phenoxybenzamine hcl cap 10 mg (Dibenzyline)	np					VALSARTAN- valsartan oral soln 4 mg/ml	NP				
prazosin hcl cap 1 mg (Minipress)	p					valsartan tab 40 mg, 80 mg, 160 mg, 320 mg (Diovan)	p				
prazosin hcl cap 2 mg, 5 mg (Minipress)	np					valsartan-hydrochlorothiazide tab 80-12.5 mg, 160-12.5 mg, 160-25 mg, 320-12.5 mg, 320-25 mg (Diovan hct)	np				
PRESTALIA- perindopril arginine-amlodipine besylate tab 3.5-2.5 mg, 7-5 mg, 14-10 mg	NP					VECAMYL- mecamylamine hcl tab 2.5 mg	NP	•			
QBRELIS- lisinopril oral soln 1 mg/ml	NP		•		•	DIURETICS					
quinapril hcl tab 5 mg, 10 mg, 20 mg, 40 mg (Accupril)	p					acetazolamide cap er 12hr 500 mg	np				
quinapril-hydrochlorothiazide tab 10-12.5 mg, 20-12.5 mg (Accuretic)	np					acetazolamide tab 125 mg, 250 mg	np				
QUINAPRIL/HYDROCHLOROTHIA-quinapril-hydrochlorothiazide tab 20-25 mg	np					amiloride hcl tab 5 mg	p				
ramipril cap 1.25 mg, 2.5 mg, 5 mg, 10 mg (Altace)	p					AMILORIDE/HYDROCHLOROTHIA-amiloride & hydrochlorothiazide tab 5-50 mg	NP				
telmisartan tab 20 mg (Micardis)	p					bumetanide tab 0.5 mg (Bumex)	p				

p = Preferred Generics
np = Non-preferred Generics

P = Preferred Brands
NP = Non-preferred Brands

NC = Non covered drugs

Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits
bumetanide tab 1 mg, 2 mg (Bumex)	np				
chlorthalidone tab 25 mg, 50 mg	p				
dichlorphenamide tab 50 mg (Keveyis)	np				
DIURIL- chlorothiazide susp 250 mg/5ml	NP		•		•
ethacrynic acid tab 25 mg (Edecrin)	np				
FUROSCIX- furosemide subcutaneous cartridge kit 80 mg/10ml	NP	•	•		•
FUROSEMIDE- furosemide oral soln 8 mg/ml	NP		•		•
furosemide oral soln 10 mg/ml	p				
furosemide tab 20 mg, 40 mg, 80 mg (Lasix)	p				
hydrochlorothiazide cap 12.5 mg	p				
hydrochlorothiazide tab 12.5 mg, 25 mg, 50 mg	p				
indapamide tab 1.25 mg, 2.5 mg	p				
methazolamide tab 25 mg, 50 mg	np				
metolazone tab 2.5 mg, 5 mg, 10 mg	np				
SOAANZ- torsemide tab 20 mg, 40 mg, 60 mg	NP				
spironolactone & hydrochlorothiazide tab 25-25 mg (Aldactazide)	np				
spironolactone susp 25 mg/5ml (Carospir)	np		•		•
spironolactone tab 25 mg, 50 mg, 100 mg (Aldactone)	p				
THALITONE- chlorthalidone tab 15 mg	NP				
torsemide tab 5 mg, 10 mg, 20 mg, 100 mg	p				

Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits
triamterene & hydrochlorothiazide cap 37.5-25 mg (Dyazide)	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)	NC				
epinephrine solution auto-injector 0.15 mg/0.3ml (1:2000) (Epipen-jr 2-pak)	np				
epinephrine solution auto-injector 0.3 mg/0.3ml (1:1000) (Epipen 2-pak)	np				
midodrine hcl tab 2.5 mg, 5 mg, 10 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)	NC				
atorvastatin calcium tab 10 mg (base equivalent), 20 mg (base equivalent), 40 mg (base equivalent), 80 mg (base equivalent) (Lipitor)	p				

p = Preferred Generics
np = Non-preferred Generics

P = Preferred Brands
NP = Non-preferred Brands

NC = Non covered drugs

Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits
cholestyramine light powder packets 4 gm	np				
cholestyramine light powder 4 gm/dose (Questran light)	np				
cholestyramine powder packets 4 gm (Questran)	np				
cholestyramine powder 4 gm/dose (Questran)	np				
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 mg (Welchol)	np				
colestipol hcl granule packets 5 gm (Colestid flavored)	np				
colestipol hcl granules 5 gm (Colestid flavored)	np				
colestipol hcl tab 1 gm (Colestid)	np				
EZALLOR SPRINKLE- rosuvastatin calcium sprinkle cap 5 mg (base equivalent), 10 mg (base equivalent), 20 mg (base equivalent), 40 mg (base equivalent)	NC				
ezetimibe tab 10 mg (Zetia)	p				
ezetimibe-simvastatin tab 10-10 mg, 10-20 mg, 10-40 mg, 10-80 mg (Vytorin)	np				
FENOFIBRATE- fenofibrate cap 50 mg, 150 mg	NP				
fenofibrate micronized cap 43 mg, 130 mg, 200 mg	np				
fenofibrate micronized cap 67 mg, 134 mg	p				

Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits
fenofibrate tab 40 mg, 120 mg (Fenoglide)	np				
fenofibrate tab 48 mg, 145 mg (Tricor)	p				
fenofibrate tab 54 mg, 160 mg	p				
FENOFIBRIC ACID- fenofibric acid tab 35 mg, 105 mg	NP				
FIBRICOR- fenofibric acid tab 35 mg, 105 mg	NP				
FLOLIPID- simvastatin susp 20 mg/5ml (4 mg/ml), 40 mg/5ml (8 mg/ml)	NP				
fluvastatin sodium cap 20 mg (base equivalent), 40 mg (base equivalent)	np				
fluvastatin sodium tab er 24 hr 80 mg (base equivalent) (Lescol xl)	np				
gemfibrozil tab 600 mg (Lopid)	p				
icosapent ethyl cap 0.5 gm, 1 gm (Vascepa)	NC				
JUXTAPID- lomitapide mesylate cap 5 mg (base equiv), 10 mg (base equiv), 20 mg (base equiv), 30 mg (base equiv)	NP	•	•	•	
LIPOFEN- fenofibrate cap 50 mg, 150 mg	NP				
lovastatin tab 10 mg, 20 mg, 40 mg	p				
NEXLETOL- bempedoic acid tab 180 mg	P		•	•	
NEXLIZET- bempedoic acid-ezetimibe tab 180-10 mg	P		•	•	
NIACIN- niacin (antihyperlipidemic) tab 500 mg	NP				
niacin tab er 500 mg (antihyperlipidemic), 750 mg	np				

p = Preferred Generics
np = Non-preferred Generics

P = Preferred Brands
NP = Non-preferred Brands

NC = Non covered drugs

Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits
(antihyperlipidemic), 1000 mg (antihyperlipidemic) (Niaspan)					
NIACOR- niacin (antihyperlipidemic) tab 500 mg	NP				
omega-3-acid ethyl esters cap 1 gm (Lovaza)	NC				
pitavastatin calcium tab 1 mg, 2 mg, 4 mg (Livalo)	np				
PRALUENT- alirocumab subcutaneous solution auto-injector 75 mg/ml, 150 mg/ml	NC				
pravastatin sodium tab 10 mg, 80 mg	p				
pravastatin sodium tab 20 mg, 40 mg (Pravachol)	p				
REPATHA- evolocumab subcutaneous soln prefilled syringe 140 mg/ml	P		•		•
REPATHA PUSHTRONEX SYSTEM- evolocumab subcutaneous soln cartridge/infusor 420 mg/3.5ml	P		•		•
REPATHA SURECLICK- evolocumab subcutaneous soln auto-injector 140 mg/ml	P		•		•
rosuvastatin calcium tab 5 mg, 10 mg, 20 mg, 40 mg (Crestor)	p				
simvastatin tab 5 mg	p				
simvastatin tab 10 mg, 20 mg, 40 mg, 80 mg (Zocor)	p				
VASCEPA- icosapent ethyl cap 0.5 gm, 1 gm	np				
ZYPITAMAG- pitavastatin magnesium tab 2 mg (base equiv), 4 mg (base equiv)	NC				
CARDIOVASCULAR AGENTS - MISC.					
ADEMPAS- riociguat tab 0.5 mg, 1 mg, 1.5 mg, 2 mg, 2.5 mg	NP	•	•		•

Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits
ambrisentan tab 5 mg, 10 mg (Letairis)	np	•	•		•
amlodipine besylate-atorvastatin calcium tab 2.5-10 mg, 2.5-20 mg, 2.5-40 mg	np				
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				
bosentan tab 62.5 mg, 125 mg (Tracleer)	np	•	•		•
CAMZYOS- mavacamten cap 2.5 mg, 5 mg, 10 mg, 15 mg	NP	•	•		•
CORLANOR- ivabradine hcl oral soln 5 mg/5ml (base equiv)	P		•		•
CORLANOR- ivabradine hcl tab 5 mg (base equiv), 7.5 mg (base equiv)	P		•		•
ENTRESTO- sacubitril-valsartan sprinkle cap 6-6 mg, 15-16 mg	P				
ENTRESTO- sacubitril-valsartan tab 24-26 mg, 49-51 mg, 97-103 mg	P				
INPEFA- sotagliflozin tab 200 mg, 400 mg	NC				
isosorbide dinitrate-hydralazine hcl tab 20-37.5 mg (Bidil)	np				
LIQREV- sildenafil citrate oral susp 10 mg/ml	NC				
LODOCO- colchicine (cardiovascular) tab 0.5 mg	NP				
OPSUMIT- macitentan tab 10 mg	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	•	•		•

p = Preferred Generics
np = Non-preferred Generics

P = Preferred Brands
NP = Non-preferred Brands

NC = Non covered drugs

Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits	Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits
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&8	NP	•	•		•	VERQUVO- vericiguat tab 2.5 mg, 5 mg, 10 mg	P		•		•
sildenafil citrate for suspension 10 mg/ml (Revatio)	np	•	•		•	VYNDAMAX- tafamidis cap 61 mg	P	•	•		•
sildenafil citrate tab 20 mg (Revatio)	np	•	•		•	VYNDAQEL- tafamidis meglumine (cardiac) cap 20 mg	P	•	•		•
tadalafil tab 20 mg (pah) (Adcirca)	np	•	•		•	ERECTILE DYSFUNCTION					
TADLIQ- tadalafil oral susp 20 mg/5ml (pah)	NC					CAVERJECT- alprostadil for inj 20 mcg, 40 mcg	NP				
TRACLEER- bosentan tab for oral susp 32 mg	P	•	•		•	CAVERJECT IMPULSE- alprostadil for inj kit 10 mcg, 20 mcg	NP				
TYVASO- treprostinil inhalation solution 0.6 mg/ml	NP	•	•		•	EDEX- alprostadil for inj kit 10 mcg, 20 mcg, 40 mcg	NP				
TYVASO DPI MAINTENANCE KI- treprostinil inh powder 16 mcg/ cartridge, 32 mcg/cartridge, 48 mcg/ cartridge, 64 mcg/cartridge	NC					sildenafil citrate tab 25 mg, 50 mg, 100 mg (Viagra)	p				•
TYVASO DPI TITRATION KIT- treprostinil inh powd 112 x 16mcg & 112 x 32mcg & 28 x 48mcg	NC					STENDRA- avanafil tab 50 mg, 100 mg, 200 mg	NP				•
TYVASO REFILL- treprostinil inhalation solution 0.6 mg/ml	NP	•	•		•	tadalafil tab 2.5 mg, 5 mg, 10 mg, 20 mg (Cialis)	p				•
TYVASO STARTER- treprostinil inhalation solution 0.6 mg/ml	NP	•	•		•	ildenafil citrate tab 25 mg, 50 mg, 100 mg (Viagra)	np				•
UPTRAVI- selexipag tab 200 mcg, 400 mcg, 600 mcg, 800 mcg, 1000 mcg, 1200 mcg, 1400 mcg, 1600 mcg	P	•	•		•	verdenafil hcl orally disintegrating tab 10 mg (Staxyn)	np				•
UPTRAVI TITRATION PACK- selexipag tab therapy pack 200 mcg (140) & 800 mcg (60)	P	•	•		•	verdenafil hcl tab 2.5 mg, 5 mg	np				•
VENTAVIS- iloprost inhalation solution 10 mcg/ml, 20 mcg/ml	NP	•	•		•	verdenafil hcl tab 10 mg, 20 mg (Levitra)	np				•
						RESPIRATORY AGENTS					
						ANTI-HISTAMINES					
						CARBINOXAMINE MALEATE- carbinoxamine maleate soln 4 mg/5ml	NP				
						CARBINOXAMINE MALEATE- carbinoxamine maleate tab 6 mg	NP				
						carbinoxamine maleate tab 4 mg	np				
						cetirizine hcl oral soln 1 mg/ml (5 mg/5ml)	np				
						CLEMASTINE FUMARATE- clemastine fumarate tab 2.68 mg	NP				

p = Preferred Generics
np = Non-preferred Generics

P = Preferred Brands
NP = Non-preferred Brands

NC = Non covered drugs

Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits	Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits
clemastine fumarate syrup 0.67 mg/5ml (0.5 mg/5ml base eq)	np					azelastine hcl-fluticasone prop nasal spray 137-50 mcg/act (Dymista)	np				•
cyproheptadine hcl syrup 2 mg/5ml	p					flunisolide nasal soln 25 mcg/act (0.025%)	np				•
cyproheptadine hcl tab 4 mg	p					fluticasone propionate nasal susp 50 mcg/act	p				•
DESLORATADINE ODT- desloratadine tab orally disintegrating 2.5 mg, 5 mg	NP					ipratropium bromide nasal soln 0.03% (21 mcg/spray), 0.06% (42 mcg/spray)	np				•
desloratadine tab 5 mg (Clarinet)	np					mometasone furoate nasal susp 50 mcg/act (Nasonex)	np				•
DIPHENHYDRAMINE HCL- diphenhydramine hcl elixir 12.5 mg/5ml	NP					olopatadine hcl nasal soln 0.6% (Patanase)	np				•
KARBINAL ER- carbinoxamine maleate extended release susp 4 mg/5ml	NP					OMNARIS- ciclesonide nasal susp 50 mcg/act	NP				•
levocetirizine dihydrochloride soln 2.5 mg/5ml (0.5 mg/ml)	np					QNASL- beclomethasone dipropionate nasal aerosol 80 mcg/ act	NP				•
levocetirizine dihydrochloride tab 5 mg	np					QNASL CHILDRENS- beclomethasone dipropionate nasal aerosol 40 mcg/act	NP				•
promethazine hcl oral soln 6.25 mg/5ml	p					RYALTRIS- olopatadine hcl- mometasone furoate nasal susp 665-25 mcg/act	NP				•
promethazine hcl suppos 12.5 mg, 25 mg	np					XHANCE- fluticasone propionate nasal exhaler susp 93 mcg/act	NP		•		•
promethazine hcl tab 12.5 mg, 25 mg, 50 mg	p					ZETONNA- ciclesonide nasal aerosol soln 37 mcg/act (50 mcg/valve)	NP				•
PROMETHEGAN- promethazine hcl suppos 50 mg	NP					COUGH/COLD/ALLERGY					
RYCLORA- dexchlorpheniramine maleate oral soln 2 mg/5ml	NP					acetylcysteine inhal soln 10%, 20%	np				
RYVENT- carbinoxamine maleate tab 6 mg	NP					benzonatate cap 100 mg (Tessalon perles)	p				
NASAL AGENTS - SYSTEMIC and TOPICAL						benzonatate cap 150 mg	np				
azelastine hcl nasal spray 0.1% (137 mcg/spray)	p				•	benzonatate cap 200 mg	p				
azelastine hcl nasal spray 0.15% (205.5 mcg/spray)	np				•						

p = Preferred Generics
np = Non-preferred Generics

P = Preferred Brands
NP = Non-preferred Brands

NC = Non covered drugs

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				
hydrocodone bitart-homatropine methylbrom soln 5-1.5 mg/5ml (Hycodan)	p				
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				
PROMETHAZINE VC- promethazine & phenylephrine syrup 6.25-5 mg/5ml	NP				
promethazine w/ codeine syrup 6.25-10 mg/5ml	p				
promethazine-dm syrup 6.25-15 mg/5ml	p				
pseudoephed-bromphen-dm syrup 30-2-10 mg/5ml	np				
sodium chloride soln nebu 3%	p				
sodium chloride soln nebu 7% (Hyper-sal)	p				
TUXARIN ER- codeine phos- chlorpheniramine maleate tab er 12hr 54.3-8 mg	NP				
ANTIASTHMATIC and BRONCHODILATOR AGENTS					
ADVAIR HFA- fluticasone-salmeterol inhal aerosol 45-21 mcg/act, 115-21 mcg/act, 230-21 mcg/act	P				•
AIRDUO RESPICLICK 113/14- fluticasone-salmeterol aer powder ba 113-14 mcg/act	NC				
AIRDUO RESPICLICK 232/14- fluticasone-salmeterol aer powder ba 232-14 mcg/act	NC				

Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits
AIRDUO RESPICLICK 55/14- fluticasone-salmeterol aer powder ba 55-14 mcg/act	NC				
AIRSUPRA- albuterol-budesonide inhalation aerosol 90-80 mcg/act	NC				
ALBUTEROL SULFATE HFA- albuterol sulfate inhal aero 108 mcg/ act (90mcg base equiv)	NC				
albuterol sulfate inhal aero 108 mcg/act (90mcg base equiv) (Proventil hfa)	np				•
albuterol sulfate soln nebu 0.083% (2.5 mg/3ml)	p				
albuterol sulfate soln nebu 0.5% (5 mg/ml), 0.63 mg/3ml (base equiv), 1.25 mg/3ml (base equiv)	np				
albuterol sulfate syrup 2 mg/5ml	p				
albuterol sulfate tab 2 mg, 4 mg	np				
ALVESCO- ciclesonide inhal aerosol 80 mcg/act, 160 mcg/act	NC				
ANORO ELLIPTA- umeclidinium- vilanterol aero powd ba 62.5-25 mcg/act	P				•
arformoterol tartrate soln nebu 15 mcg/2ml (base equiv) (Brovana)	np				
ARNUITY ELLIPTA- fluticasone furoate aerosol powder breath activ 50 mcg/act, 100 mcg/act, 200 mcg/ act	P				•
ASMANEX HFA- mometasone furoate inhal aerosol suspension 50 mcg/ act, 100 mcg/act, 200 mcg/act	P				•
ASMANEX TWISTHALER 120 ME- mometasone furoate inhal powd 220 mcg/act (breath activated)	P				•

p = Preferred Generics
np = Non-preferred Generics

P = Preferred Brands
NP = Non-preferred Brands

NC = Non covered drugs

Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits	Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits
ASMANEX TWISTHALER 30 MET-mometasone furoate inhal powd 110 mcg/act (breath activated), 220 mcg/act (breath activated)	P				•	FASENRA PEN- benralizumab subcutaneous soln auto-injector 30 mg/ml	P	•	•		•
ASMANEX TWISTHALER 60 MET-mometasone furoate inhal powd 220 mcg/act (breath activated)	P				•	FLUTICASONE FUROATE/VILAN-fluticasone furoate-vilanterol aero powd ba 100-25 mcg/act, 200-25 mcg/act	NC				
ATROVENT HFA- ipratropium bromide hfa inhal aerosol 17 mcg/act	NP				•	FLUTICASONE PROPIONATE DI-fluticasone propionate aer pow ba 50 mcg/act, 100 mcg/act, 250 mcg/act	NC				
BEVESPI AEROSPHERE- glycopyrrolate-formoterol fumarate aerosol 9-4.8 mcg/act	NC					FLUTICASONE PROPIONATE HF-fluticasone propionate hfa inhal aero 44 mcg/act	NC				
BREO ELLIPTA- fluticasone furoate-vilanterol aero powd ba 50-25 mcg/act, 100-25 mcg/act, 200-25 mcg/act	P				•	FLUTICASONE PROPIONATE HF-fluticasone propionate hfa inhal aer 110 mcg/act, 220 mcg/act	NC				
BREZTRI AEROSPHERE-budesonide-glycopyrrolate-formoterol aers 160-9-4.8 mcg/act	P				•	FLUTICASONE PROPIONATE/SA-fluticasone-salmeterol aer powder ba 55-14 mcg/act, 113-14 mcg/act, 232-14 mcg/act	np				•
budesonide inhalation susp 0.25 mg/2ml, 0.5 mg/2ml, 1 mg/2ml (Pulmicort)	np					FLUTICASONE PROPIONATE/SA-fluticasone-salmeterol inhal aerosol 45-21 mcg/act, 115-21 mcg/act, 230-21 mcg/act	NC				
budesonide-formoterol fumarate dihyd aerosol 80-4.5 mcg/act, 160-4.5 mcg/act (Symbicort)	np				•	fluticasone-salmeterol aer powder ba 100-50 mcg/act, 250-50 mcg/act, 500-50 mcg/act (Advair diskus)	np				•
COMBIVENT RESPIMAT-ipratropium-albuterol inhal aerosol soln 20-100 mcg/act	P				•	formoterol fumarate soln nebu 20 mcg/2ml (Perforomist)	NC				
cromolyn sodium soln nebu 20 mg/2ml	np					INCRUSE ELLIPTA- umeclidinium br aero powd breath act 62.5 mcg/act (base eq)	P				•
DUAKLIR PRESSAIR- aclidinium br-formoterol fum aero pow br act 400-12 mcg/act	NC					ipratropium bromide inhal soln 0.02%	p				
DULERA- mometasone furoate-formoterol fumarate aerosol 50-5 mcg/act, 100-5 mcg/act, 200-5 mcg/act	P				•	ipratropium-albuterol nebu soln 0.5-2.5(3) mg/3ml	np				

p = Preferred Generics
np = Non-preferred Generics

P = Preferred Brands
NP = Non-preferred Brands

NC = Non covered drugs

Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits
levalbuterol hcl soln nebu conc 1.25 mg/0.5ml (base equiv) (Xopenex concentrate)	np				
levalbuterol hcl soln nebu 0.31 mg/3ml (base equiv), 0.63 mg/3ml (base equiv), 1.25 mg/3ml (base equiv) (Xopenex)	np				
LEVALBUTEROL TARTRATE HFA- levalbuterol tartrate inhal aerosol 45 mcg/act (base equiv)	NC				
montelukast sodium chew tab 4 mg (base equiv), 5 mg (base equiv) (Singulair)	p				
montelukast sodium oral granules packet 4 mg (base equiv) (Singulair)	np				
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	•	•		•
PROAIR RESPICLICK- albuterol sulfate aer pow ba 108 mcg/act (90 mcg base equiv)	NC				
PULMICORT FLEXHALER- budesonide inhal aero powd 90 mcg/act (breath activated), 180 mcg/act (breath activated)	NC				
QVAR REDHALER- beclomethasone diprop hfa breath act inh aer 40 mcg/act, 80 mcg/act	P				•
roflumilast tab 250 mcg, 500 mcg (Daliresp)	np				

Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits
SEREVENT DISKUS- salmeterol xinafoate aer pow ba 50 mcg/act (base equiv)	P				•
SPIRIVA HANDHALER- tiotropium bromide monohydrate inhal cap 18 mcg (base equiv)	np				•
SPIRIVA RESPIMAT- tiotropium bromide monohydrate 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)	P				•
terbutaline sulfate tab 2.5 mg, 5 mg	np				
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 ER- theophylline tab er 12hr 100 mg, 200 mg	NP				
theophylline soln 80 mg/15ml	np				
theophylline tab er 12hr 300 mg, 450 mg	np				
theophylline tab er 24hr 400 mg, 600 mg	np				
tiotropium bromide monohydrate inhal cap 18 mcg (base equiv) (Spiriva handihaler)	NC				
TRELEGY ELLIPTA- fluticasone-umeclidinium-vilanterol aepb 100-62.5-25 mcg/act, 200-62.5-25 mcg/act	P				•

p = Preferred Generics
np = Non-preferred Generics

P = Preferred Brands
NP = Non-preferred Brands

NC = Non covered drugs

Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits
TUDORZA PRESSAIR- acclidinium bromide aerosol powd breath activated 400 mcg/act	NC				
VENTOLIN HFA- albuterol sulfate inhal aero 108 mcg/act (90mcg base equiv)	np				•
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)	NC				
YUPELRI- revefenacin inhalation solution 175 mcg/3ml	NC				
zafirlukast tab 10 mg, 20 mg (Accolate)	np				
zileuton tab er 12hr 600 mg	np				
ZYFLO- zileuton tab 600 mg	NP				
RESPIRATORY AGENTS - MISC.					
BRONCHITOL- mannitol inhal cap 40 mg	NP	•			
BRONCHITOL TOLERANCE TEST- mannitol inhal cap 40 mg	NP	•			
GLASSIA- alpha1-proteinase inhibitor (human) inj 1000 mg/50ml	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	•	•		•

Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits
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	•			
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	NC				
GAVILYTE-C- peg 3350-kcl-na bicarb-nacl-na sulfate for soln 240 gm	NP				

p = Preferred Generics
np = Non-preferred Generics

P = Preferred Brands
NP = Non-preferred Brands

NC = Non covered drugs

Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits
KRISTALOSE- lactulose oral crystal packet 10 gm, 20 gm	NP				
LACTULOSE- lactulose oral crystal packet 10 gm	NP				
lactulose solution 10 gm/15ml	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)	NC				
peg 3350-kcl-sod bicarb-nacl for soln 420 gm	np				
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	NC				
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	NC				
SUTAB- sod sulfate-mg sulfate-pot chloride tab 1479-225-188 mg	NP				
ANTIDIARRHEALS					
diphenoxylate w/ atropine tab 2.5-0.025 mg (Lomotil)	np				
DIPHENOXYLATE/ATROPINE- diphenoxylate w/ atropine liq 2.5-0.025 mg/5ml	NP				
loperamide hcl cap 2 mg	np				
MOTOFEN- difenoxin w/ atropine tab 1-0.025 mg	NP				
MYTESI- crofelemer tab delayed release 125 mg	NP				

Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits
ULCER DRUGS					
bismuth subcit-metronidazole-tetracycline cap 140-125-125 mg (Pylera)	NC				
chlordiazepoxide hcl-clidinium bromide cap 5-2.5 mg (Librax)	NC				
CIMETIDINE HYDROCHLORIDE- cimetidine hcl soln 300 mg/5ml	NP		•	•	
cimetidine tab 200 mg, 300 mg, 400 mg, 800 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	np				
dicyclomine hcl tab 20 mg	p				
esomeprazole magnesium cap delayed release 20 mg (base eq), 40 mg (base eq) (Nexium)	np				•
esomeprazole magnesium for delayed release susp packet 10 mg, 20 mg, 40 mg (Nexium)	np				•
famotidine for susp 40 mg/5ml	np		•	•	
famotidine tab 20 mg (Pepcid)	np				
famotidine tab 40 mg (Pepcid)	p				
GLYCATÉ- glycopyrrolate tab 1.5 mg	NP				
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	np				
HELIDAC THERAPY- metronidaz tab-tetracyc cap-bis subsal chew tab therapy pack	NC				

p = Preferred Generics
np = Non-preferred Generics

P = Preferred Brands
NP = Non-preferred Brands

NC = Non covered drugs

Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits	Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits
KONVOMEP- omeprazole-sodium bicarbonate for oral susp 2-84 mg/ml	NP				•	pantoprazole sodium ec tab 20 mg (base equiv), 40 mg (base equiv) (Protonix)	p				•
lansoprazole cap delayed release 15 mg, 30 mg (Prevacid)	np				•	pantoprazole sodium for delayed release susp packet 40 mg (Protonix)	np				•
lansoprazole tab delayed release orally disintegrating 15 mg, 30 mg (Prevacid solutab)	np				•	PRILOSEC- omeprazole magnesium for delayed release susp packet 2.5 mg, 10 mg	NP				•
LANSOPRAZOLE/AMOXICILLIN/-amoxicil cap & clarithro tab & lansopraz cap dr 500 & 500 & 30mg	NP					RABEPRAZOLE SODIUM DR SPR- rabeprazole sodium capsule sprinkle dr 10 mg	NP				•
LIBRAX- chlordiazepoxide hcl- clidinium bromide cap 5-2.5 mg	NC					rabeprazole sodium ec tab 20 mg (Aciphex)	np				•
methscopolamine bromide tab 2.5 mg, 5 mg	np					sucralfate susp 1 gm/10ml (Carafate)	np		•		•
misoprostol tab 100 mcg, 200 mcg (Cytotec)	p					sucralfate tab 1 gm (Carafate)	np				
NEXIUM- esomeprazole magnesium for delayed release susp packet 5 mg	P				•	TALICIA- amoxicillin-rifabutin- omeprazole cap dr 250-12.5-10 mg	P				
NEXIUM- esomeprazole magnesium for delayed release susp pack 2.5 mg	P				•	VOQUEZNA- vonoprazan fumarate tab 10 mg, 20 mg	NP				•
NIZATIDINE- nizatidine cap 150 mg, 300 mg	NP					VOQUEZNA DUAL PAK- amoxicillin cap 500 mg & vonoprazan tab 20 mg therapy pack	NC				
OMECLAMOX-PAK- amoxicillin cap- clarithro tab w/ omepraz cap dr therapy pack	NC					VOQUEZNA TRIPLE PAK- amoxicillin cap & clarithromycin tab & vonoprazan tab pack	NC				
omeprazole cap delayed release 10 mg, 20 mg, 40 mg	p				•	ANTIEMETICS					
omeprazole-sodium bicarbonate cap 20-1100 mg, 40-1100 mg (Zegerid)	np				•	AKYNZEO- netupitant-palonosetron cap 300-0.5 mg	NC				
omeprazole-sodium bicarbonate powd pack for susp 20-1680 mg, 40-1680 mg (Zegerid)	np				•	ANTIVERT- meclizine hcl tab 50 mg	NP				
						ANZEMET- dolasetron mesylate tab 50 mg	NP				•
						aprepitant capsule therapy pack 80 & 125 mg (Emend tripack)	np				•
						aprepitant capsule 40 mg (Emend)	np				

p = Preferred Generics
np = Non-preferred Generics

P = Preferred Brands
NP = Non-preferred Brands

NC = Non covered drugs

Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits
aprepitant capsule 80 mg (Emend)	np				•
aprepitant capsule 125 mg	np				•
BONJESTA- doxylamine-pyridoxine tab er 20-20 mg	NP				
doxylamine-pyridoxine tab delayed release 10-10 mg (Diclegis)	np				
dronabinol cap 2.5 mg, 5 mg, 10 mg (Marinol)	np				
EMEND- aprepitant for oral susp 125 mg (125 mg/5ml)	P				•
granisetron hcl tab 1 mg	np				•
meclizine hcl tab 12.5 mg, 25 mg	np				
MECLIZINE HYDROCHLORIDE- meclizine hcl tab 50 mg	NP				
ONDANSETRON HCL- ondansetron hcl tab 24 mg	NP				•
ondansetron hcl oral soln 4 mg/5ml	p				•
ondansetron hcl tab 4 mg (Zofran)	p				•
ondansetron hcl tab 8 mg	p				•
ONDANSETRON ODT- ondansetron orally disintegrating tab 16 mg	NP				•
ondansetron orally disintegrating tab 4 mg, 8 mg	p				•
SANCUSO- granisetron td patch 3.1 mg/24hr (contains 34.3 mg)	NP				•
scopolamine td patch 72hr 1 mg/3days (Transderm-scop)	np				
SYNDROS- dronabinol soln 5 mg/ml	NP		•		
trimethobenzamide hcl cap 300 mg (Tigan)	np				
VARUBI- rolapitant hcl tab therapy pack 2 x 90 mg (base equiv)	P				•
DIGESTIVE AIDS					
CREON- pancrelipase (lip-prot-amyl) dr cap 3000-9500-15000	P				

Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits
unit, 6000-19000-30000 unit, 12000-38000-60000 unit, 24000-76000-120000 unit, 36000-114000-180000 unit					
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	NC				
PERTZYE- pancrelipase (lip-prot-amyl) dr cap 4000-14375-15125 unit, 8000-28750-30250 unit, 16000-57500-60500 unit, 24000-86250-90750 unit	NC				
SUCRAID- sacrosidase soln 8500 unit/ml	NP	•	•		•
VIOKACE- pancrelipase (lip-prot-amyl) tab 10440-39150-39150 unit, 20880-78300-78300 unit	NC				
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.					
alosetron hcl tab 0.5 mg (base equiv), 1 mg (base equiv) (Lotronex)	np				
AURYXIA- ferric citrate tab 1 gm (210 mg ferric iron)	NP				
balsalazide disodium cap 750 mg (Colazal)	np				

p = Preferred Generics
np = Non-preferred Generics

P = Preferred Brands
NP = Non-preferred Brands

NC = Non covered drugs

Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits
BYLVAY- odevoxibat cap 400 mcg, 1200 mcg	NP	•	•		
BYLVAY (PELLETS)- odevoxibat pellets cap sprinkle 200 mcg, 600 mcg	NP	•	•		
calcium acetate (phosphate binder) cap 667 mg (169 mg ca)	np				
calcium acetate (phosphate binder) tab 667 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 6 x 200 mg/ml	NP	•	•		•
cromolyn sodium oral conc 100 mg/5ml (Gastrocrom)	np				
DIPENTUM- olsalazine sodium cap 250 mg	NP				
ENTYVIO- vedolizumab soln pen-injector 108 mg/0.68ml	NP	•	•		•
FOSRENOL- lanthanum carbonate oral powder pack 750 mg (elemental), 1000 mg (elemental)	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	NC				
lactulose (encephalopathy) solution 10 gm/15ml	p				
lanthanum carbonate chew tab 500 mg (elemental), 750 mg	np				

Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits
(elemental), 1000 mg (elemental) (Fosrenol)					
LINZESS- linaclotide cap 72 mcg, 145 mcg, 290 mcg	P				
LIVMARLI- maralixibat chloride oral soln 9.5 mg/ml	NP	•	•		
lubiprostone cap 8 mcg, 24 mcg (Amitiza)	NC				
mesalamine cap dr 400 mg (Delzicol)	np				
mesalamine cap er 24hr 0.375 gm (Apriso)	np				
mesalamine cap er 500 mg (Pentasa)	np				
MESALAMINE DR- mesalamine tab delayed release 800 mg	NP				
mesalamine enema 4 gm	np				
mesalamine suppos 1000 mg (Canasa)	np				
mesalamine tab delayed release 1.2 gm (Lialda)	np				
metoclopramide hcl soln 5 mg/5ml (10 mg/10ml) (base equiv)	np				
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)	NC				
MOVANTIK- naloxegol oxalate tab 12.5 mg (base equivalent), 25 mg (base equivalent)	P				
OCALIVA- obeticholic acid tab 5 mg, 10 mg	NP	•	•		•

p = Preferred Generics
np = Non-preferred Generics

P = Preferred Brands
NP = Non-preferred Brands

NC = Non covered drugs

Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits
OMVOH- mirikizumab-mrkz subcutaneous sol prefill syringe 100 mg/ml	NC				
OMVOH- mirikizumab-mrkz subcutaneous soln auto-injector 100 mg/ml	NC				
PENTASA- mesalamine cap er 250 mg	NP				
RELISTOR- methylnaltrexone bromide inj 8 mg/0.4ml (20 mg/ml), 12 mg/0.6ml (20 mg/ml)	NC				
RELISTOR- methylnaltrexone bromide tab 150 mg	NC				
RELTONE- ursodiol cap 200 mg, 400 mg	NP				
sevelamer carbonate packet 0.8 gm, 2.4 gm (Renvela)	np				
sevelamer carbonate tab 800 mg (Renvela)	np				
sevelamer hcl tab 400 mg	np				
sevelamer hcl tab 800 mg (Renagel)	np				
SFROWASA- mesalamine sulfite-free (sf) enema 4 gm/60ml	NP				
SKYRIZI- risankizumab-rzaa subcutaneous soln cartridge 180 mg/1.2ml, 360 mg/2.4ml	P	•	•		•
sulfasalazine tab delayed release 500 mg (Azulfidine en-tabs)	np				
sulfasalazine tab 500 mg (Azulfidine)	np				
SYMPROIC- naldemedine tosylate tab 0.2 mg (base equivalent)	P				
TRULANCE- plecanatide tab 3 mg	P				
URSODIOL- ursodiol cap 200 mg, 400 mg	NP				
ursodiol cap 300 mg (Actigall)	np				

Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits
ursodiol tab 250 mg (Urso 250)	np				
ursodiol tab 500 mg (Urso forte)	np				
VELPHORO- sucroferric oxyhydroxide chew tab 500 mg	P				
VELSIPITY- etrasimod arginine tab 2 mg	NC				
VIBERZI- eluxadoline tab 75 mg, 100 mg	P				
VOWST- fecal microbiota spores, live-brpk caps	NP	•	•		•
XERMELO- telotristat ethyl tab 250 mg (as telotristat etiprate)	NP	•			
ZYMFENTRA 1-PEN- infliximab-dyyb soln auto-injector kit 120 mg/ml	NC				
ZYMFENTRA 2-PEN- infliximab-dyyb soln auto-injector kit 120 mg/ml	NC				
ZYMFENTRA 2-SYRINGE- infliximab-dyyb soln prefilled syringe kit 120 mg/ml	NC				
GENITOURINARY AGENTS					
URINARY ANTISPASMODICS					
bethanechol chloride tab 5 mg, 10 mg, 25 mg, 50 mg	np				
darifenacin hydrobromide tab er 24hr 7.5 mg (base equiv) (Enablex)	NC				
darifenacin hydrobromide tab er 24hr 15 mg (base equiv)	NC				
fesoterodine fumarate tab er 24hr 4 mg, 8 mg (Toviaz)	NC				
flavoxate hcl tab 100 mg	NC				
GELNIQUE- oxybutynin chloride td gel 10%	NC				
GEMTESA- vibegron tab 75 mg	NP				

p = Preferred Generics
np = Non-preferred Generics

P = Preferred Brands
NP = Non-preferred Brands

NC = Non covered drugs

Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits	Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits
MYRBETRIQ- mirabegron granules for oral extended release susp 8 mg/ml	P					ENCARE- nonoxynol-9 vaginal suppos 100 mg	P				
MYRBETRIQ- mirabegron tab er 24 hr 25 mg, 50 mg	P					ENDOMETRIN- progesterone vaginal insert 100 mg	P				•
OXYBUTYNIN CHLORIDE- oxybutynin chloride tab 2.5 mg	NC					estradiol vaginal cream 0.1 mg/gm (Estrace)	np				•
oxybutynin chloride solution 5 mg/5ml	p					estradiol vaginal tab 10 mcg (Vagifem)	np				
oxybutynin chloride tab er 24hr 5 mg, 10 mg (Ditropan xl)	p					ESTRING- estradiol vaginal ring 2 mg (7.5 mcg/24hrs)	P				•
oxybutynin chloride tab er 24hr 15 mg	p					FEMRING- estradiol acetate vaginal ring 0.05 mg/24hr, 0.1 mg/24hr	NC				
oxybutynin chloride tab 5 mg	p					GNAZOLE-1- butoconazole nitrate (one dose) vaginal cream 2%	NP				
OXYTROL- oxybutynin td patch twice weekly 3.9 mg/24hr	NP					IMVEXXY MAINTENANCE PACK- estradiol vaginal insert 4 mcg, 10 mcg	NC				
solifenacin succinate tab 5 mg, 10 mg (Vesicare)	p					IMVEXXY STARTER PACK- estradiol vaginal insert starter pack 4 mcg, 10 mcg	NC				
tolterodine tartrate cap er 24hr 2 mg, 4 mg (Detrol la)	np					INTRAROSA- prasterone vaginal insert 6.5 mg	NP				
tolterodine tartrate tab 1 mg, 2 mg (Detrol)	np					metronidazole vaginal gel 0.75%	np				
tropium chloride cap er 24hr 60 mg	np					MICONAZOLE 3- miconazole nitrate vaginal suppos 200 mg	NP				
tropium chloride tab 20 mg	np					NUVESSA- metronidazole vaginal gel 1.3%	NP				
VESICARE LS- solifenacin succinate susp 5 mg/5ml (1 mg/ml)	NC					OPTIONS GYNOL II VAGINAL- nonoxynol-9 gel 3%	P				
VAGINAL PRODUCTS						PHEXXI- lactic acid-citric acid-potassium bitartrate gel 1.8-1-0.4%	NP				
CLEOCIN- clindamycin phosphate vaginal suppos 100 mg	NC					PREMARIN- estrogens, conjugated vaginal cream 0.625 mg/gm	P				
clindamycin phosphate vaginal cream 2% (Cleocin)	np					terconazole vaginal cream 0.4%, 0.8%	np				
CLINDESSE- clindamycin phosphate (one dose) vaginal cream 2%	NP					terconazole vaginal suppos 80 mg	np				
CRINONE- progesterone vaginal gel 4%, 8%	NC										

p = Preferred Generics
np = Non-preferred Generics

P = Preferred Brands
NP = Non-preferred Brands

NC = Non covered drugs

Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits
TODAY SPONGE- nonoxynol-9 vaginal sponge 1000 mg	P				
VANDAZOLE- metronidazole vaginal gel 0.75%	NP				
VCF VAGINAL CONTRACEPTIVE- nonoxynol-9 gel 4%	NP				
VCF VAGINAL CONTRACEPTIVE- nonoxynol-9 film 28%	P				
VCF VAGINAL CONTRACEPTIVE- nonoxynol-9 foam 12.5%	P				
XACIATO- clindamycin phosphate vaginal gel 2%	NC				
GENITOURINARY AGENTS - MISC.					
alfuzosin hcl tab er 24hr 10 mg (Uroxatral)	p				
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				
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)	np				

Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits
potassium citrate tab er 10 meq (1080 mg) (Urocit-k 10)	np				
potassium citrate tab er 15 meq (1620 mg) (Urocit-k 15)	np				
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	•	•		
RIVFLOZA- nedosiran sodium subcutaneous soln pref syr 128 mg/0.8ml, 160 mg/ml	NC				
RIVFLOZA- nedosiran sodium subcutaneous soln 80 mg/0.5ml	NC				
silodosin cap 4 mg, 8 mg (Rapaflo)	np				
sodium citrate & citric acid soln 500-334 mg/5ml	np				
tamsulosin hcl cap 0.4 mg (Flomax)	p				
THIOLA EC- tiopronin tab delayed release 100 mg, 300 mg	NP				
tiopronin tab delayed release 100 mg, 300 mg (Thiola ec)	np				
tiopronin tab 100 mg (Thiola)	np				
CENTRAL NERVOUS SYSTEM DRUGS					
ANTI-ANXIETY AGENTS					
ALPRAZOLAM INTENSOL- alprazolam conc 1 mg/ml	NP				
alprazolam orally disintegrating tab 0.25 mg, 0.5 mg, 1 mg, 2 mg	np				
alprazolam tab er 24hr 0.5 mg, 1 mg, 2 mg, 3 mg (Xanax xr)	p				
alprazolam tab 0.25 mg, 0.5 mg, 1 mg, 2 mg (Xanax)	p				
bupirone hcl tab 5 mg, 10 mg, 15 mg	p				

p = Preferred Generics
np = Non-preferred Generics

P = Preferred Brands
NP = Non-preferred Brands

NC = Non covered drugs

Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits	Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits
bupirone hcl tab 7.5 mg, 30 mg	np					AUVELITY- dextromethorphan hbr- bupropion hcl tab er 45-105 mg	NC				
chlordiazepoxide hcl cap 5 mg, 10 mg, 25 mg	p					bupropion hcl tab er 12hr 100 mg, 150 mg, 200 mg (Wellbutrin sr)	p				•
clorazepate dipotassium tab 3.75 mg, 15 mg	np					bupropion hcl tab er 24hr 150 mg, 300 mg (Wellbutrin xl)	p				•
clorazepate dipotassium tab 7.5 mg (Tranxene t)	np					bupropion hcl tab 75 mg, 100 mg	p				•
diazepam conc 5 mg/ml	np					BUPROPION HYDROCHLORIDE E- bupropion hcl tab er 24hr 450 mg	NC				
diazepam oral soln 1 mg/ml	p					CITALOPRAM HYDROBROMIDE- citalopram hydrobromide cap 30 mg	NP			•	•
diazepam tab 2 mg, 5 mg, 10 mg (Valium)	p					citalopram hydrobromide oral soln 10 mg/5ml	np				•
hydroxyzine hcl syrup 10 mg/5ml	np					citalopram hydrobromide tab 10 mg (base equiv), 20 mg (base equiv), 40 mg (base equiv) (Celexa)	p				•
hydroxyzine hcl tab 10 mg, 25 mg, 50 mg	p					clomipramine hcl cap 25 mg, 50 mg, 75 mg (Anafranil)	np				
HYDROXYZINE PAMOATE- hydroxyzine pamoate cap 100 mg	NP					desipramine hcl tab 10 mg, 25 mg (Norpramin)	np				
hydroxyzine pamoate cap 25 mg, 50 mg (Vistaril)	p					desipramine hcl tab 50 mg, 75 mg, 100 mg, 150 mg	np				
lorazepam conc 2 mg/ml	np					DESVENLAFAXINE ER- desvenlafaxine tab er 24hr 50 mg, 100 mg	NP			•	•
lorazepam tab 0.5 mg, 1 mg, 2 mg (Ativan)	p					desvenlafaxine succinate tab er 24hr 25 mg (base equiv), 50 mg (base equiv), 100 mg (base equiv) (Pristiq)	np				•
LOREEV XR- lorazepam cap er 24hr sprinkle 1 mg, 1.5 mg, 2 mg, 3 mg	NP					doxepin hcl cap 10 mg, 25 mg	p				
meprobamate tab 200 mg, 400 mg	NC					doxepin hcl cap 50 mg, 75 mg, 100 mg, 150 mg	np				
oxazepam cap 10 mg, 15 mg, 30 mg	np					doxepin hcl conc 10 mg/ml	p				
ANTIDEPRESSANTS						DRIZALMA SPRINKLE- duloxetine hcl cap delayed release sprinkle 20 mg	NC				
amitriptyline hcl tab 10 mg, 25 mg, 50 mg, 75 mg	p										
amitriptyline hcl tab 100 mg, 150 mg	np										
amoxapine tab 25 mg, 50 mg, 100 mg, 150 mg	NC										
APLENZIN- bupropion hbr tab er 24hr 174 mg, 348 mg, 522 mg	NC										

p = Preferred Generics
np = Non-preferred Generics

P = Preferred Brands
NP = Non-preferred Brands

NC = Non covered drugs

Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits
(base eq), 30 mg (base eq), 40 mg (base eq), 60 mg (base eq)					
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				•
EMSAM- selegiline td patch 24hr 6 mg/24hr, 9 mg/24hr, 12 mg/24hr	NP				
escitalopram oxalate soln 5 mg/5ml (base equiv)	np				•
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), 40 mg (base equivalent), 80 mg (base equivalent), 120 mg (base equivalent)	NP			•	•
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	np				•
fluoxetine hcl tab 10 mg, 20 mg	np				•
fluoxetine hcl tab 60 mg (Fluoxetine hydrochlo)	np				•
fluvoxamine maleate cap er 24hr 100 mg, 150 mg	np				•
fluvoxamine maleate tab 25 mg, 50 mg, 100 mg	np				•
FORFIVO XL- bupropion hcl tab er 24hr 450 mg	NC				

Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits
imipramine hcl tab 10 mg, 25 mg, 50 mg	p				
imipramine pamoate cap 75 mg, 100 mg, 125 mg, 150 mg	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	np				•
mirtazapine tab 15 mg, 30 mg (Remeron)	p				•
mirtazapine tab 45 mg	p				•
NARDIL- phenelzine sulfate tab 15 mg	NP				
NEFAZODONE HYDROCHLORIDE- nefazodone hcl tab 50 mg, 100 mg, 150 mg, 200 mg, 250 mg	NC				
nortriptyline hcl cap 10 mg, 25 mg, 50 mg, 75 mg (Pamelor)	p				
nortriptyline hcl soln 10 mg/5ml	np				
paroxetine hcl oral susp 10 mg/5ml (base equiv) (Paxil)	np				•
paroxetine hcl tab er 24hr 12.5 mg, 25 mg, 37.5 mg (Paxil cr)	np				•
paroxetine hcl tab 10 mg, 20 mg, 30 mg, 40 mg (Paxil)	p				•
PHENELZINE SULFATE- phenelzine sulfate tab 15 mg	NP				
protriptyline hcl tab 5 mg, 10 mg	np				
sertraline hcl oral concentrate for solution 20 mg/ml (Zoloft)	np				•
sertraline hcl tab 25 mg, 50 mg, 100 mg (Zoloft)	p				•
SERTRALINE HYDROCHLORIDE- sertraline hcl cap 150 mg, 200 mg	NP			•	•

p = Preferred Generics
np = Non-preferred Generics

P = Preferred Brands
NP = Non-preferred Brands

NC = Non covered drugs

Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits
tranylcypromine sulfate tab 10 mg (Parnate)	np				
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	NC				
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				•
vilazodone hcl tab 10 mg, 20 mg, 40 mg (Viibryd)	np				•
ZURZUVAE- zuranolone cap 20 mg, 25 mg, 30 mg	P	•			•
ANTIPSYCHOTICS					
ABILIFY MYCITE MAINTENANC-aripiprazole tab 2 mg with sensor&strips (for pod) maint pak	NC				

Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits
ABILIFY MYCITE MAINTENANC-aripiprazole tab 5 mg with sensor&strips (for pod) maint pak	NC				
ABILIFY MYCITE MAINTENANC-aripiprazole tab 10 mg with sensor&strips(for pod) maint pak	NC				
ABILIFY MYCITE MAINTENANC-aripiprazole tab 15 mg with sensor&strips(for pod) maint pak	NC				
ABILIFY MYCITE MAINTENANC-aripiprazole tab 20 mg with sensor&strips(for pod) maint pak	NC				
ABILIFY MYCITE MAINTENANC-aripiprazole tab 30 mg with sensor&strips(for pod) maint pak	NC				
ABILIFY MYCITE STARTER KI-aripiprazole tab 2 mg with sensor, strips & pod starter pak	NC				
ABILIFY MYCITE STARTER KI-aripiprazole tab 5 mg with sensor, strips & pod starter pak	NC				
ABILIFY MYCITE STARTER KI-aripiprazole tab 10 mg with sensor, strips & pod starter pak	NC				
ABILIFY MYCITE STARTER KI-aripiprazole tab 15 mg with sensor, strips & pod starter pak	NC				
ABILIFY MYCITE STARTER KI-aripiprazole tab 20 mg with sensor, strips & pod starter pak	NC				
ABILIFY MYCITE STARTER KI-aripiprazole tab 30 mg with sensor, strips & pod starter pak	NC				
aripiprazole oral solution 1 mg/ml	np				•
aripiprazole orally disintegrating tab 10 mg, 15 mg	np				•

p = Preferred Generics
np = Non-preferred Generics

P = Preferred Brands
NP = Non-preferred Brands

NC = Non covered drugs

Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits
aripiprazole tab 2 mg, 5 mg, 10 mg, 15 mg (Abilify)	p				•
aripiprazole tab 20 mg, 30 mg (Abilify)	np				•
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	NC				
chlorpromazine hcl tab 10 mg, 25 mg, 50 mg, 100 mg, 200 mg	np				
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				•
clozapine tab 25 mg (Clozaril)	p				•
clozapine tab 50 mg, 100 mg, 200 mg (Clozaril)	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- iloperidone tab 1 mg & 2 mg & 4 mg & 6 mg titration pak	NP			•	•
FLUPHENAZINE HCL- fluphenazine hcl oral conc 5 mg/ml	NP				
fluphenazine hcl tab 1 mg, 2.5 mg, 5 mg, 10 mg	np				
FLUPHENAZINE HYDROCHLORID- fluphenazine hcl elixir 2.5 mg/5ml	NP				

Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits
haloperidol lactate oral conc 2 mg/ml	np				
haloperidol tab 0.5 mg, 1 mg	p				
haloperidol tab 2 mg, 5 mg, 10 mg, 20 mg	np				
LITHIUM CARBONATE- lithium carbonate cap 150 mg, 300 mg, 600 mg	NP				
lithium carbonate cap 150 mg, 600 mg (Lithium carbonate)	p				
lithium carbonate cap 300 mg	p				
lithium carbonate tab er 300 mg (Lithobid)	p				
lithium carbonate tab er 450 mg	p				
lithium carbonate tab 300 mg	p				
lithium oral solution 8 meq/5ml	np				
LITHOBID- lithium carbonate tab er 300 mg	NP				
loxapine succinate cap 5 mg, 10 mg, 25 mg, 50 mg	np				
lurasidone hcl tab 20 mg, 40 mg, 60 mg, 80 mg, 120 mg (Latuda)	np				•
MOLINDONE HYDROCHLORIDE- molindone hcl tab 5 mg, 10 mg, 25 mg	NP				
NUPLAZID- pimavanserin tartrate cap 34 mg (base equivalent)	NP	•	•		•
NUPLAZID- pimavanserin tartrate tab 10 mg (base equivalent)	NP	•	•		•
olanzapine orally disintegrating tab 5 mg, 10 mg, 15 mg, 20 mg (Zyprexa zydis)	np				•
olanzapine tab 2.5 mg, 5 mg, 7.5 mg, 10 mg, 15 mg, 20 mg (Zyprexa)	p				•

p = Preferred Generics
np = Non-preferred Generics

P = Preferred Brands
NP = Non-preferred Brands

NC = Non covered drugs

Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits	Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits
paliperidone tab er 24hr 1.5 mg, 3 mg, 6 mg, 9 mg (Invega)	np				•	thiothixene cap 1 mg, 2 mg, 5 mg, 10 mg	np				
perphenazine tab 2 mg, 4 mg, 8 mg, 16 mg	np					trifluoperazine hcl tab 1 mg (base equivalent), 2 mg (base equivalent), 5 mg (base equivalent), 10 mg (base equivalent)	np				
prochlorperazine maleate tab 5 mg (base equivalent)	p					VERSACLOZ- clozapine susp 50 mg/ml	NP			•	•
prochlorperazine maleate tab 10 mg (base equivalent)	np					VRAYLAR- cariprazine hcl cap 1.5 mg (base equivalent), 3 mg (base equivalent), 4.5 mg (base equivalent), 6 mg (base equivalent)	NP			•	•
prochlorperazine suppos 25 mg	np					ziprasidone hcl cap 20 mg, 40 mg, 60 mg, 80 mg (Geodon)	np				•
QUETIAPINE FUMARATE- quetiapine fumarate tab 150 mg	NP			•	•	HYPNOTICS					
quetiapine fumarate tab er 24hr 50 mg, 200 mg, 300 mg, 400 mg (Seroquel xr)	np				•	BELSOMRA- suvorexant tab 5 mg, 10 mg, 15 mg, 20 mg	P			•	•
quetiapine fumarate tab er 24hr 150 mg (Seroquel xr)	p				•	DAYVIGO- lemborexant tab 5 mg, 10 mg	NC				
quetiapine fumarate tab 25 mg, 50 mg, 100 mg, 200 mg, 300 mg, 400 mg (Seroquel)	p				•	DORAL- quazepam tab 15 mg	NP				
REXULTI- brexpiprazole tab 0.25 mg, 0.5 mg, 1 mg, 2 mg, 3 mg, 4 mg	P			•	•	doxepin hcl (sleep) tab 3 mg (base equiv), 6 mg (base equiv) (Silenor)	NC				
RISPERIDONE ODT- risperidone orally disintegrating tab 0.25 mg	NP			•	•	EDLUAR- zolpidem tartrate sl tab 5 mg, 10 mg	NP			•	•
risperidone orally disintegrating tab 0.5 mg, 1 mg, 2 mg, 3 mg, 4 mg	np				•	estazolam tab 1 mg, 2 mg	np				
risperidone soln 1 mg/ml (Rispedal)	np				•	eszopiclone tab 1 mg, 2 mg, 3 mg (Lunesta)	p				•
risperidone tab 0.25 mg	p				•	FLURAZEPAM HYDROCHLORIDE- flurazepam hcl cap 15 mg, 30 mg	NP				
risperidone tab 0.5 mg, 1 mg, 2 mg, 3 mg, 4 mg (Rispedal)	p				•	HALCION- triazolam tab 0.25 mg	NC				
SECUADO- asenapine td patch 24 hr 3.8 mg/24hr, 5.7 mg/24hr, 7.6 mg/24hr	NP			•	•	HETLIOZ LQ- tasimelteon oral susp 4 mg/ml	NP	•	•		•
thioridazine hcl tab 10 mg, 25 mg, 50 mg, 100 mg	NC					phenobarbital elixir 20 mg/5ml	np				

p = Preferred Generics
np = Non-preferred Generics

P = Preferred Brands
NP = Non-preferred Brands

NC = Non covered drugs

Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits
phenobarbital tab 15 mg, 30 mg, 60 mg, 100 mg	p				
phenobarbital tab 16.2 mg, 32.4 mg, 64.8 mg, 97.2 mg	np				
QUAZEPAM- quazepam tab 15 mg	NP				
QUVIVIQ- daridorexant hcl tab 25 mg, 50 mg	NC				
ramelteon tab 8 mg (Rozerem)	NC				
tasimelteon capsule 20 mg (Hetlioz)	np	•	•		•
temazepam cap 7.5 mg, 22.5 mg (Restoril)	np				
temazepam cap 15 mg, 30 mg (Restoril)	p				
triazolam tab 0.125 mg	NC				
triazolam tab 0.25 mg (Halcion)	NC				
zaleplon cap 5 mg, 10 mg	p				•
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)	np				•
zolpidem tartrate tab 5 mg, 10 mg (Ambien)	p				•
ADHD/ANTI-NARCOLEPSY/ANTI-OBESITY/ANOREXIANTS					
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	NC				
amphetamine sulfate tab 5 mg, 10 mg (Evekeo)	NC				
amphetamine-dextroamphetamine cap er 24hr 5 mg, 10 mg, 15 mg, 20 mg, 25 mg, 30 mg (Adderall xr)	np				•

Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits
amphetamine-dextroamphetamine tab 5 mg (Adderall)	p				•
amphetamine-dextroamphetamine tab 7.5 mg, 10 mg, 12.5 mg, 15 mg, 20 mg, 30 mg (Adderall)	np				•
amphetamine-dextroamphetamine 3-bead cap er 24hr 12.5 mg, 25 mg, 37.5 mg, 50 mg (Mydayis)	NC				
armodafinil tab 50 mg (Nuvigil)	p				
armodafinil tab 150 mg, 200 mg, 250 mg (Nuvigil)	np				
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)	np				•
AZSTARYS- serdexmethylphenidate-dexmethylphenidate cap 26.1-5.2 mg, 39.2-7.8 mg, 52.3-10.4 mg	P				•
benzphetamine hcl tab 50 mg	NC				
caffeine citrate oral soln 60 mg/3ml (10 mg/ml base equiv)	np				
clonidine hcl tab er 12hr 0.1 mg (Kapvay)	np				•
CONTRAVE- naltrexone hcl-bupropion hcl tab er 12hr 8-90 mg	NC				
COTEMPLA XR-ODT- methylphenidate tab extended release disintegrating 8.6 mg, 17.3 mg, 25.9 mg	NC				
dexmethylphenidate hcl cap er 24 hr 5 mg, 10 mg, 15 mg, 20 mg, 25 mg, 30 mg, 35 mg, 40 mg (Focalin xr)	np				•

p = Preferred Generics
np = Non-preferred Generics

P = Preferred Brands
NP = Non-preferred Brands

NC = Non covered drugs

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 (Focalin)	p				•	lisdexamfetamine dimesylate chew tab 10 mg, 20 mg, 30 mg, 40 mg, 50 mg, 60 mg (Vyvanse)	np				•
dexmethylphenidate hcl tab 10 mg (Focalin)	np				•	LOMAIRA- phentermine hcl tab 8 mg	NP		•		•
dextroamphetamine sulfate cap er 24hr 5 mg, 10 mg, 15 mg (Dexedrine)	np				•	methamphetamine hcl tab 5 mg (Desoxyn)	np				•
dextroamphetamine sulfate oral solution 5 mg/5ml	np				•	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 2.5 mg, 7.5 mg, 15 mg, 20 mg, 30 mg	NC					methylphenidate hcl cap er 24hr 10 mg (la), 20 mg (la), 30 mg (la), 40 mg (la) (Ritalin la)	np				•
dextroamphetamine sulfate tab 5 mg, 10 mg	np				•	methylphenidate hcl cap er 24hr 60 mg (la)	NC				
DIETHYLPROPION HCL ER- diethylpropion hcl tab er 24hr 75 mg	NC					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)	NC				
diethylpropion hcl tab 25 mg	NC					methylphenidate hcl chew tab 2.5 mg, 5 mg, 10 mg	np				•
DIETHYLPROPION HYDROCHLOR- diethylpropion hcl tab er 24hr 75 mg	NC					methylphenidate hcl soln 5 mg/5ml, 10 mg/5ml (Methylin)	np				•
DYANAVEL XR- amphetamine chew tab extended release 5 mg, 10 mg, 15 mg, 20 mg	NC					methylphenidate hcl tab er osmotic release (osm) 18 mg, 27 mg, 36 mg, 54 mg (Concerta)	np				•
DYANAVEL XR- amphetamine extended release susp 2.5 mg/ml	NC					methylphenidate hcl tab er 10 mg, 20 mg	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 tab 5 mg, 10 mg (Ritalin)	p				•
IMCIVREE- setmelanotide acetate subcutaneous soln 10 mg/ml	NP	•	•		•	methylphenidate hcl tab 20 mg (Ritalin)	np				•
JORNAY PM- methylphenidate hcl cap delayed er 24hr 20 mg (pm), 40 mg (pm), 60 mg (pm), 80 mg (pm), 100 mg (pm)	P				•	METHYLPHENIDATE HYDROCHLO- methylphenidate hcl tab er osmotic release (osm) 45 mg, 63 mg, 72 mg	NC				
lisdexamfetamine dimesylate cap 10 mg, 20 mg, 30 mg, 40 mg, 50 mg, 60 mg, 70 mg (Vyvanse)	np				•	METHYLPHENIDATE HYDROCHLO- methylphenidate hcl tab er 24hr 18 mg, 27 mg, 36 mg, 54 mg	NP				•

p = Preferred Generics
np = Non-preferred Generics

P = Preferred Brands
NP = Non-preferred Brands

NC = Non covered drugs

Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits
methylphenidate td patch 10 mg/9hr, 15 mg/9hr, 20 mg/9hr, 30 mg/9hr (Daytrana)	NC				
modafinil tab 100 mg, 200 mg (Provigil)	np				
ORLISTAT- orlistat cap 120 mg	NP		•		•
PHENDIMETRAZINE TARTRATE- phendimetrazine tartrate cap er 24hr 105 mg	NC				
phendimetrazine tartrate tab 35 mg	NC				
phentermine hcl cap 15 mg, 30 mg	p		•		•
phentermine hcl cap 37.5 mg (Adipex-p)	p		•		•
phentermine hcl tab 37.5 mg (Adipex-p)	p		•		•
QELBREE- viloxazine hcl cap er 24hr 100 mg, 150 mg, 200 mg	NC				
QSYMIA- phentermine hcl-topiramate cap er 24hr 3.75-23 mg, 7.5-46 mg, 11.25-69 mg, 15-92 mg	NP		•		•
QUILLICHEW ER- methylphenidate hcl chew tab extended release 20 mg, 30 mg, 40 mg	P				•
QUILLIVANT XR- methylphenidate hcl for er susp 25 mg/5ml (5 mg/ml)	P				•
RELEXXII- methylphenidate hcl tab er osmotic release (osm) 18 mg, 27 mg, 36 mg, 45 mg, 54 mg, 63 mg, 72 mg	NC				
SAXENDA- liraglutide (weight mngmt) soln pen-inj 18 mg/3ml (6 mg/ml)	NP		•		•
SUNOSI- solriamfetol hcl tab 75 mg (base equiv), 150 mg (base equiv)	P		•		•
WAKIX- pitolisant hcl tab 4.45 mg (base equivalent), 17.8 mg (base equivalent)	NC				

Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits
WEGOVY- semaglutide (weight mngmt) soln auto-injector 0.25 mg/0.5ml, 0.5 mg/0.5ml, 1 mg/0.5ml, 1.7 mg/0.75ml, 2.4 mg/0.75ml	NP		•		•
XELSTRYM- dextroamphetamine td patch 4.5 mg/9hr, 9 mg/9hr, 13.5 mg/9hr, 18 mg/9hr	NC				
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	NP		•		•
PSYCHOTHERAPEUTIC and NEUROLOGICAL AGENTS - MISC.					
acamprosate calcium tab delayed release 333 mg	np				
ADDYI- flibanserin tab 100 mg	NP		•		•
ADLARITY- donepezil hydrochloride td patch weekly 5 mg/day, 10 mg/day	NP		•		•
ADUHELM- aducanumab-avwa iv soln 170 mg/1.7ml (100 mg/ml), 300 mg/3ml (100 mg/ml)	NC				
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	•	•		•
AVONEX PEN- interferon beta-1a im auto-injector kit 30 mcg/0.5ml	P	•	•		•

p = Preferred Generics
np = Non-preferred Generics

P = Preferred Brands
NP = Non-preferred Brands

NC = Non covered drugs

Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits	Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits
BAFIERTAM- monomethyl fumarate capsule delayed release 95 mg	NC					GALANTAMINE HYDROBROMIDE- galantamine hydrobromide oral soln 4 mg/ml	NP				
BETASERON- interferon beta-1b for inj kit 0.3 mg	P	•	•		•	galantamine hydrobromide cap er 24hr 8 mg, 16 mg, 24 mg (Razadyne er)	np				
bupropion hcl (smoking deterrent) tab er 12hr 150 mg	np					galantamine hydrobromide tab 4 mg, 8 mg, 12 mg	np				
CHLORDIAZEPOXIDE/AMITRIPT- chlordiazepoxide-amitriptyline tab 5-12.5 mg, 10-25 mg	NP					GILENYA- fingolimod hcl cap 0.25 mg (base equiv)	NP	•	•		•
dalfampridine tab er 12hr 10 mg (Ampyra)	np	•	•		•	glatiramer acetate soln prefilled syringe 20 mg/ml, 40 mg/ml (Copaxone)	np	•			•
dimethyl fumarate capsule delayed release 120 mg, 240 mg (Tecfidera)	np	•			•	GRALISE- gabapentin (once-daily) tab 450 mg, 750 mg, 900 mg	NP			•	•
dimethyl fumarate capsule dr starter pack 120 mg & 240 mg (Tecfidera starter pa)	np	•			•	HORIZANT- gabapentin enacarbil tab er 300 mg, 600 mg	NP			•	•
disulfiram tab 250 mg, 500 mg (Antabuse)	np					INGREZZA- valbenazine tosylate cap therapy pack 40 mg (7) & 80 mg (21)	NP	•	•		•
donepezil hydrochloride orally disintegrating tab 5 mg, 10 mg	p					INGREZZA- valbenazine tosylate cap 40 mg (base equiv), 60 mg (base equiv), 80 mg (base equiv)	NP	•	•		•
donepezil hydrochloride tab 5 mg, 10 mg (Aricept)	p					INGREZZA- valbenazine tosylate capsule sprinkle 40 mg (base equiv), 60 mg (base equiv), 80 mg (base equiv)	NP	•	•		•
donepezil hydrochloride tab 23 mg (Aricept)	np					KESIMPTA- ofatumumab soln auto-injector 20 mg/0.4ml	P	•	•		•
ERGOLOID MESYLATES- ergoloid mesylates tab 1 mg	NC					LEQEMBI- lecanemab-irmb iv soln 200 mg/2ml (100 mg/ml), 500 mg/5ml (100 mg/ml)	NC				
EXTAVIA- interferon beta-1b for inj kit 0.3 mg	NC					LUCEMYRA- lofexidine hcl tab 0.18 mg (base equivalent)	NP				
fingolimod hcl cap 0.5 mg (base equiv) (Gilenya)	np	•			•	LUMRYZ- sodium oxybate pack for oral er susp 4.5 gm, 6 gm, 7.5 gm, 9 gm	NP	•	•		•
FLUOXETINE HYDROCHLORIDE- fluoxetine hcl (pmd) tab 10 mg, 20 mg	NP										
gabapentin (once-daily) tab 300 mg, 600 mg (Gralise)	np			•	•						

p = Preferred Generics
np = Non-preferred Generics

P = Preferred Brands
NP = Non-preferred Brands

NC = Non covered drugs

Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits
LYBALVI- olanzapine-samidorphan l-malate tab 5-10 mg, 10-10 mg, 15-10 mg, 20-10 mg	NC				
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	•	•		•
MAYZENT- siponimod fumarate tab 0.25 mg (base equiv), 1 mg (base equiv), 2 mg (base equiv)	P	•	•		•
MAYZENT STARTER PACK- siponimod fumarate tab 0.25 mg (7) starter pack	P	•	•		•
MAYZENT STARTER PACK- siponimod fumarate tab 0.25 mg (12) starter pack	P	•	•		•
memantine hcl cap er 24hr 7 mg, 14 mg, 21 mg, 28 mg (Namenda xr)	np				
memantine hcl oral solution 2 mg/ml	np		•		•
memantine hcl tab 5 mg, 10 mg (Namenda)	p				
memantine hcl tab 28 x 5 mg & 21 x 10 mg titration pack (Namenda titration pa)	np				
NAMZARIC- memantine hcl-donepezil hcl cap er 24hr 7-10 mg, 14-10 mg, 21-10 mg, 28-10 mg	NP				
NAMZARIC- memantine-donepezil cap er 24hr 7 & 14 & 21 & 28-10 mg pack	NP				
nicotine polacrilex gum 2 mg, 4 mg	np				
nicotine polacrilex lozenge 2 mg, 4 mg	np				

Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits
nicotine td patch 24hr 7 mg/24hr, 14 mg/24hr, 21 mg/24hr	np				
NICOTINE TRANSDERMAL SYST- nicotine td patch 24 hr kit 21-14-7 mg/24hr	P				
NICOTROL INHALER- nicotine inhaler system 10 mg (4 mg delivered)	P				
NICOTROL NS- nicotine nasal spray 10 mg/ml (0.5 mg/spray)	P				
NUDEXTA- dextromethorphan hbr-quinidine sulfate cap 20-10 mg	P				
olanzapine-fluoxetine hcl cap 3-25 mg, 6-25 mg, 6-50 mg, 12-50 mg (Symbyax)	np				
olanzapine-fluoxetine hcl cap 12-25 mg	np				
paroxetine mesylate cap 7.5 mg (base equiv) (Brisdelle)	np				
PERPHENAZINE/AMITRIPTYLIN- perphenazine-amitriptyline tab 2-10 mg, 2-25 mg, 4-10 mg, 4-25 mg, 4-50 mg	NP				
PIMOZIDE- pimozone tab 1 mg, 2 mg	NP				
PLEGRIDY- peginterferon beta-1a soln pen-injector 125 mcg/0.5ml	P	•	•		•
PLEGRIDY- peginterferon beta-1a soln prefilled syringe 125 mcg/0.5ml	P	•	•		•
PLEGRIDY- peginterferon beta-1a im soln prefilled syr 125 mcg/0.5ml	P	•	•		•
PLEGRIDY STARTER PACK- peginterferon beta-1a soln pen-inj 63 & 94 mcg/0.5ml pack	P	•	•		•
PLEGRIDY STARTER PACK- peginterferon beta-1a soln pref syr 63 & 94 mcg/0.5ml pack	P	•	•		•
PONVORY- ponesimod tab 20 mg	NC				

p = Preferred Generics
np = Non-preferred Generics

P = Preferred Brands
NP = Non-preferred Brands

NC = Non covered drugs

Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits	Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits
PONVORY 14-DAY STARTER PA- ponesimod tab starter pack 2,3,4,5,6,7,8,9 & 10 mg	NC					TEGSEDI- inotersen sod subcutaneous pref syr 284 mg/1.5ml (base eq)	NP	•	•		•
pregabalin tab er 24hr 82.5 mg, 165 mg, 330 mg (Lyrica cr)	NC					teriflunomide tab 7 mg, 14 mg (Aubagio)	np	•			•
REBIF- interferon beta-1a soln pref syr 22 mcg/0.5ml, 44 mcg/0.5ml	P	•	•		•	tetrabenazine tab 12.5 mg, 25 mg (Xenazine)	np	•	•		•
REBIF REBIDOSE- interferon beta-1a soln auto-inj 22 mcg/0.5ml, 44 mcg/0.5ml	P	•	•		•	varenicline tartrate tab 0.5 mg (base equiv), 1 mg (base equiv)	np				
REBIF REBIDOSE TITRATION- interferon beta-1a auto-inj 6x8.8 mcg/0.2ml & 6x22 mcg/0.5ml	P	•	•		•	varenicline tartrate tab 11 x 0.5 mg & 42 x 1 mg start pack	np				
REBIF TITRATION PACK- interferon beta-1a pref syr 6x8.8 mcg/0.2ml & 6x22 mcg/0.5ml	P	•	•		•	VUMERITY- diroximel fumarate capsule delayed release 231 mg	P	•	•		•
rivastigmine tartrate cap 1.5 mg (base equivalent), 3 mg (base equivalent), 4.5 mg (base equivalent), 6 mg (base equivalent)	np					VYLEESI- bremelanotide acet subcutaneous soln auto-inj 1.75 mg/0.3ml	NP	•	•		•
rivastigmine td patch 24hr 4.6 mg/24hr, 9.5 mg/24hr, 13.3 mg/24hr (Exelon)	np					WAINUA- eplontersen sodium subcutaneous soln auto-inj 45 mg/0.8ml	NP	•	•		•
SAVELLA- milnacipran hcl tab 12.5 mg, 25 mg, 50 mg, 100 mg	NP				•	XYREM- sodium oxybate oral solution 500 mg/ml	NC				
SAVELLA TITRATION PACK- milnacipran hcl tab 12.5 mg (5) & 25 mg (8) & 50 mg (42) pak	NP				•	XYWAV- calcium, mag, potassium, & sod oxybates oral soln 500 mg/ml	NP	•	•		•
SODIUM OXYBATE- sodium oxybate oral solution 500 mg/ml	NC					ZEPOSIA- ozanimod hcl cap 0.92 mg	P	•	•		•
SODIUM OXYBATE- sodium oxybate oral solution 500 mg/ml	NP	•	•		•	ZEPOSIA STARTER KIT- ozanimod cap pack 4 x 0.23 mg & 3 x 0.46 mg & 21 x 0.92 mg	P	•	•		•
TASCENSO ODT- fingolimod lauryl sulfate tablet disintegrating 0.25 mg, 0.5 mg	NC					ZEPOSIA 7-DAY STARTER PAC- ozanimod cap pack 4 x 0.23 mg & 3 x 0.46 mg	P	•	•		•
ANALGESICS AND ANESTHETICS											
ANALGESICS - NON-NARCOTIC											
						ALLZITAL- butalbital-acetaminophen tab 25-325 mg	NP				•
						aspirin chew tab 81 mg	p				
						aspirin tab delayed release 81 mg	p				

p = Preferred Generics
np = Non-preferred Generics

P = Preferred Brands
NP = Non-preferred Brands

NC = Non covered drugs

Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits
butalbital-acetaminophen cap 50-300 mg (Butalbital/acetamino)	np				•
butalbital-acetaminophen tab 50-300 mg, 50-325 mg	np				•
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)	np				•
butalbital-aspirin-caffeine cap 50-325-40 mg (Fiorinal)	np				•
diflunisal tab 500 mg	np				•
TENCON- butalbital-acetaminophen tab 50-325 mg	NP				•
ANALGESICS - NARCOTIC					
acetaminophen w/ codeine tab 300-15 mg (Tylenol/codeine)	p				•
acetaminophen w/ codeine tab 300-30 mg	p				•
acetaminophen w/ codeine tab 300-60 mg	np				•
ACETAMINOPHEN/CAFFEINE/ DI- acetaminophen-caffeine-dihydrocodeine cap 320.5-30-16 mg	NP				•
ACETAMINOPHEN/CODEINE- acetaminophen w/ codeine soln 120-12 mg/5ml	NP				•
APADAZ- benzhydrocodone hcl-acetaminophen tab 4.08-325 mg, 6.12-325 mg, 8.16-325 mg	NP				•
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	P		•		•

Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits
(base equivalent), 900 mcg (base equivalent)					
BENZHYDROCODONE/ ACETAMINO- benzhydrocodone hcl-acetaminophen tab 4.08-325 mg, 6.12-325 mg, 8.16-325 mg	NP				•
buprenorphine hcl sl tab 2 mg (base equiv), 8 mg (base equiv)	np				•
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)	np				•
buprenorphine hcl-naloxone hcl sl tab 2-0.5 mg (base equiv), 8-2 mg (base equiv)	np				•
buprenorphine td patch weekly 5 mcg/hr, 7.5 mcg/hr, 10 mcg/hr, 15 mcg/hr, 20 mcg/hr (Butrans)	NC				
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 (Fiorinal/ codeine #3)	np				•
butorphanol tartrate nasal soln 10 mg/ml	np				•
CODEINE SULFATE- codeine sulfate tab 15 mg, 60 mg	NP				•
codeine sulfate tab 30 mg (Codeine sulfate)	np				•
CONZIP- tramadol hcl cap er 24hr biphasic release 100 mg, 200 mg, 300 mg	NP		•		•
FENTANYL CITRATE- fentanyl citrate buccal tab 100 mcg (base equiv),	NP		•		•

p = Preferred Generics
np = Non-preferred Generics

P = Preferred Brands
NP = Non-preferred Brands

NC = Non covered drugs

Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits	Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits
200 mcg (base equiv), 400 mcg (base equiv), 600 mcg (base equiv), 800 mcg (base equiv)						hydromorphone hcl liqd 1 mg/ml (Dilaudid)	np				•
fentanyl citrate lozenge on a handle 200 mcg, 400 mcg, 600 mcg, 800 mcg, 1200 mcg, 1600 mcg (Actiq)	np		•		•	hydromorphone hcl tab er 24hr 8 mg, 12 mg, 16 mg, 32 mg	np		•		•
fentanyl td patch 72hr 12 mcg/hr, 25 mcg/hr, 50 mcg/hr, 75 mcg/hr, 100 mcg/hr (Duragesic)	np		•		•	hydromorphone hcl tab 2 mg, 4 mg (Dilaudid)	p				•
fentanyl td patch 72hr 37.5 mcg/hr, 62.5 mcg/hr, 87.5 mcg/hr	np		•		•	hydromorphone hcl tab 8 mg (Dilaudid)	np				•
FENTORA- fentanyl citrate buccal tab 100 mcg (base equiv), 200 mcg (base equiv), 400 mcg (base equiv), 600 mcg (base equiv), 800 mcg (base equiv)	NP		•		•	LEVORPHANOL TARTRATE- levorphanol tartrate tab 3 mg	NP				•
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	np				•
hydrocodone bitartrate tab er 24hr deter 20 mg, 30 mg, 40 mg, 60 mg, 80 mg, 100 mg, 120 mg (Hysingla er)	np		•		•	MEPERIDINE HCL- meperidine hcl oral soln 50 mg/5ml	NC				
hydrocodone-acetaminophen soln 7.5-325 mg/15ml	np				•	meperidine hcl tab 50 mg	NC				
hydrocodone-acetaminophen tab 10-325 mg	p				•	methadone hcl conc 10 mg/ml (Methadose)	np				•
hydrocodone-acetaminophen tab 5-300 mg, 7.5-300 mg, 10-300 mg	np				•	methadone hcl soln 5 mg/5ml, 10 mg/5ml (Methadone hcl)	np				•
hydrocodone-acetaminophen tab 5-325 mg, 7.5-325 mg (Norco)	p				•	methadone hcl tab for oral susp 40 mg	np				•
hydrocodone-ibuprofen tab 7.5-200 mg	np				•	methadone hcl tab 5 mg, 10 mg (Dolophine)	p				•
HYDROCODONE/IBUPROFEN- hydrocodone-ibuprofen tab 5-200 mg, 10-200 mg	NP				•	MORPHINE SULFATE- morphine sulfate oral soln 20 mg/5ml	NP				•
						MORPHINE SULFATE- morphine sulfate tab 15 mg, 30 mg	P				•
						MORPHINE SULFATE ER- morphine sulfate beads cap er 24hr 30 mg, 45 mg, 60 mg, 75 mg, 90 mg, 120 mg	NP		•		•
						MORPHINE SULFATE ER- morphine sulfate cap er 24hr 10 mg, 20 mg, 30 mg, 50 mg, 60 mg, 80 mg, 100 mg	NP		•		•
						morphine sulfate oral soln 10 mg/5ml	p				•

p = Preferred Generics
np = Non-preferred Generics

P = Preferred Brands
NP = Non-preferred Brands

NC = Non covered drugs

Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits
morphine sulfate oral soln 100 mg/5ml (20 mg/ml)	np				•
morphine sulfate tab er 15 mg (Ms contin)	p		•		•
morphine sulfate tab er 30 mg, 60 mg, 100 mg, 200 mg (Ms contin)	np		•		•
morphine sulfate tab 15 mg, 30 mg (Morphine sulfate)	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)	np				•
oxycodone hcl soln 5 mg/5ml	np				•
oxycodone hcl tab 5 mg (Roxicodone)	p				•
oxycodone hcl tab 10 mg	p				•
oxycodone hcl tab 15 mg, 30 mg (Roxicodone)	np				•
oxycodone hcl tab 20 mg	np				•
OXYCODONE HYDROCHLORIDE E- oxycodone hcl tab er 12hr deter 10 mg, 20 mg, 40 mg	NC				
OXYCODONE HYDROCHLORIDE/A-oxycodone w/ acetaminophen soln 5-325 mg/5ml, 10-300 mg/5ml	NP				•

Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits
oxycodone w/ acetaminophen tab 2.5-325 mg, 7.5-325 mg, 10-325 mg (Percocet)	np				•
oxycodone w/ acetaminophen tab 5-325 mg (Percocet)	p				•
OXYCODONE/ACETAMINOPHEN-oxycodone w/ acetaminophen tab 2.5-300 mg, 5-300 mg, 10-300 mg	NP				•
OXYCONTIN- oxycodone hcl tab er 12hr deter 10 mg, 15 mg, 20 mg, 30 mg, 40 mg, 60 mg, 80 mg	NC				
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		•		•
pentazocine w/ naloxone hcl tab 50-0.5 mg	NC				
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				•
QDOLO- tramadol hcl oral soln 5 mg/ml	NP				•
ROXYBOND- oxycodone hcl tab abuse deter 5 mg, 15 mg, 30 mg	NP				•
SEGLENTIS- celecoxib-tramadol hcl tab 56-44 mg	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	np		•		•

p = Preferred Generics
np = Non-preferred Generics

P = Preferred Brands
NP = Non-preferred Brands

NC = Non covered drugs

Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits	Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits
tramadol hcl tab 50 mg (Ultram)	p				•	ADALIMUMAB-ADAZ- adalimumab-adaz soln prefilled syringe 40 mg/0.4ml	NC				
tramadol hcl tab 100 mg	np				•	ADALIMUMAB-ADBM- adalimumab-adbm auto-injector kit 40 mg/0.8ml	NC				
TRAMADOL HYDROCHLORIDE- tramadol hcl oral soln 5 mg/ml	NP				•	ADALIMUMAB-ADBM- adalimumab-adbm prefilled syringe kit 10 mg/0.2ml, 20 mg/0.4ml, 40 mg/0.8ml	NC				
TRAMADOL HYDROCHLORIDE- tramadol hcl tab 25 mg	NP				•	ADALIMUMAB-ADBM CROHNS/UC- adalimumab-adbm auto-injector kit 40 mg/0.8ml	NC				
tramadol-acetaminophen tab 37.5-325 mg (Ultracet)	p				•	ADALIMUMAB-ADBM PSORIASIS- adalimumab-adbm auto-injector kit 40 mg/0.8ml	NC				
TREZIX- acetaminophen-caffeine-dihydrocodeine cap 320.5-30-16 mg	NP				•	ADALIMUMAB-FKJP- adalimumab-fkjp auto-injector kit 40 mg/0.8ml	NC				
XTAMPZA ER- oxycodone cap er 12hr abuse-deterrent 9 mg, 13.5 mg, 18 mg, 27 mg, 36 mg	P		•		•	ADALIMUMAB-FKJP- adalimumab-fkjp prefilled syringe kit 20 mg/0.4ml, 40 mg/0.8ml	NC				
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				•	AMJEVITA- adalimumab-atto soln auto-injector 40 mg/0.4ml, 40 mg/0.8ml, 80 mg/0.8ml	NC				
ANALGESICS - ANTI-INFLAMMATORY						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	NC				
ABRILADA- adalimumab-afzb prefilled syringe kit 20 mg/0.4ml, 40 mg/0.8ml	NC					ARCALYST- riloncept for inj 220 mg	NP	•	•		•
ABRILADA 1-PEN KIT- adalimumab-afzb auto-injector kit 40 mg/0.8ml	NC					celecoxib cap 50 mg, 100 mg, 200 mg (Celebrex)	p				
ABRILADA 2-PEN KIT- adalimumab-afzb auto-injector kit 40 mg/0.8ml	NC					celecoxib cap 400 mg (Celebrex)	np				
ACTEMRA- tocilizumab subcutaneous soln prefilled syringe 162 mg/0.9ml	P	•	•		•	COXANTO- oxaprozin cap 300 mg	NP				
ACTEMRA ACTPEN- tocilizumab subcutaneous soln auto-injector 162 mg/0.9ml	P	•	•		•	CYLTEZO- adalimumab-adbm auto-injector kit 40 mg/0.4ml, 40 mg/0.8ml	P	•	•		•
ADALIMUMAB-AACF (2 PEN)- adalimumab-aacf auto-injector kit 40 mg/0.8ml	NC					CYLTEZO- adalimumab-adbm prefilled syringe kit 10 mg/0.2ml,	P	•	•		•
ADALIMUMAB-ADAZ- adalimumab-adaz soln auto-injector 40 mg/0.4ml	NC										

p = Preferred Generics
np = Non-preferred Generics

P = Preferred Brands
NP = Non-preferred Brands

NC = Non covered drugs

Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits
20 mg/0.4ml, 40 mg/0.4ml, 40 mg/0.8ml					
CYLTEZO STARTER PACKAGE F- adalimumab-adbm auto-injector kit 40 mg/0.4ml, 40 mg/0.8ml	P	•	•		•
diclofenac potassium cap 25 mg (Zipsor)	np				
diclofenac potassium tab 25 mg, 50 mg	np				
diclofenac sodium tab delayed release 25 mg	np				
diclofenac sodium tab delayed release 50 mg, 75 mg	p				
diclofenac sodium tab er 24hr 100 mg	np				
diclofenac w/ misoprostol tab delayed release 50-0.2 mg (Arthrotec 50)	np				
diclofenac w/ misoprostol tab delayed release 75-0.2 mg (Arthrotec 75)	np				
ENBREL- etanercept subcutaneous inj 25 mg/0.5ml	P	•	•		•
ENBREL- etanercept subcutaneous soln prefilled syringe 25 mg/0.5ml, 50 mg/ml	P	•	•		•
ENBREL MINI- etanercept subcutaneous solution cartridge 50 mg/ml	P	•	•		•
ENBREL SURECLICK- etanercept subcutaneous solution auto-injector 50 mg/ml	P	•	•		•
etodolac cap 200 mg, 300 mg	np				
etodolac tab er 24hr 400 mg, 500 mg, 600 mg	np				
etodolac tab 400 mg (Lodine)	np				
etodolac tab 500 mg	np				

Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits
FENOPROFEN CALCIUM- fenoprofen calcium cap 200 mg	NP				
fenoprofen calcium cap 400 mg (Nalfon)	np				
fenoprofen calcium tab 600 mg (Nalfon)	np				
FLURBIPROFEN- flurbiprofen tab 50 mg	NP				
flurbiprofen tab 100 mg	p				
HADLIMA- adalimumab-bwwd soln prefilled syringe 40 mg/0.4ml, 40 mg/0.8ml	NC				
HADLIMA PUSHTOUCH- adalimumab-bwwd soln auto-injector 40 mg/0.4ml, 40 mg/0.8ml	NC				
HULIO- adalimumab-fkjp auto-injector kit 40 mg/0.8ml	NC				
HULIO- adalimumab-fkjp prefilled syringe kit 20 mg/0.4ml, 40 mg/0.8ml	NC				
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 pen-injector kit 40 mg/0.8ml, 40 mg/0.4ml, 80 mg/0.8ml	P	•	•		•
HUMIRA PEN-CD/UC/HS START- adalimumab pen-injector kit 80 mg/0.8ml	P	•	•		•
HUMIRA PEN-PS/UV STARTER- adalimumab pen-injector kit 80 mg/0.8ml & 40 mg/0.4ml	P	•	•		•
HYRIMOZ- adalimumab-adaz soln auto-injector 40 mg/0.4ml, 40 mg/0.8ml, 80 mg/0.8ml	NC				

p = Preferred Generics
np = Non-preferred Generics

P = Preferred Brands
NP = Non-preferred Brands

NC = Non covered drugs

Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits	Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits
HYRIMOZ- adalimumab-adaz soln prefilled syringe 10 mg/0.1ml, 20 mg/0.2ml, 40 mg/0.4ml, 40 mg/0.8ml	NC					KETOPROFEN- ketoprofen cap 25 mg, 50 mg	NP				
HYRIMOZ CROHN'S DISEASE A- adalimumab-adaz soln auto-injector 80 mg/0.8ml	NC					KETOPROFEN ER- ketoprofen cap er 24hr 200 mg	NP				
HYRIMOZ PEDIATRIC CROHN'S- adalimumab-adaz soln prefilled syr 80 mg/0.8ml & 40 mg/0.4ml	NC					ketorolac tromethamine tab 10 mg	p				•
HYRIMOZ PEDIATRIC CROHNS- adalimumab-adaz soln prefilled syringe 80 mg/0.8ml	NC					KEVZARA- sarilumab subcutaneous soln prefilled syringe 150 mg/1.14ml, 200 mg/1.14ml	NP	•	•		•
HYRIMOZ PLAQUE PSORIASIS- adalimumab-adaz soln auto-injector 80 mg/0.8ml & 40 mg/0.4ml	NC					KEVZARA- sarilumab subcutaneous solution auto-injector 150 mg/1.14ml, 200 mg/1.14ml	NP	•	•		•
HYRIMOZ SENSOREADY PENS- adalimumab-adaz soln auto-injector 80 mg/0.8ml	NC					KINERET- anakinra subcutaneous soln prefilled syringe 100 mg/0.67ml	NC				
ibuprofen susp 100 mg/5ml	np					KIPROFEN- ketoprofen cap 25 mg	NP				
ibuprofen tab 400 mg, 600 mg, 800 mg	p					leflunomide tab 10 mg, 20 mg (Arava)	np				
ibuprofen-famotidine tab 800-26.6 mg (Duexis)	np					MECLOFENAMATE SODIUM- meclofenamate sodium cap 50 mg, 100 mg	NP				
IDACIO (2 PEN)- adalimumab-aacf auto-injector kit 40 mg/0.8ml	NC					mefenamic acid cap 250 mg	np				
IDACIO (2 SYRINGE)- adalimumab-aacf prefilled syringe kit 40 mg/0.8ml	NC					MELOXICAM- meloxicam susp 7.5 mg/5ml	NP				
IDACIO STARTER PACKAGE FO- adalimumab-aacf auto-injector kit 40 mg/0.8ml	NC					meloxicam cap 5 mg, 10 mg	np				
indomethacin cap er 75 mg	np					meloxicam tab 7.5 mg, 15 mg (Mobic)	p				
indomethacin cap 25 mg, 50 mg	p					nabumetone tab 500 mg	p				
indomethacin suppos 50 mg	np		•		•	nabumetone tab 750 mg	np				
indomethacin susp 25 mg/5ml (Indocin)	np					naproxen sodium tab er 24hr 375 mg (base equiv), 500 mg (base equiv), 750 mg (base equiv) (Naprelan)	np				
						naproxen sodium tab 275 mg, 550 mg	np				
						naproxen susp 125 mg/5ml (Naprosyn)	np				

p = Preferred Generics
np = Non-preferred Generics

P = Preferred Brands
NP = Non-preferred Brands

NC = Non covered drugs

Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits
naproxen tab ec 375 mg, 500 mg (Ec-naprosyn)	np				
naproxen tab 250 mg, 375 mg, 500 mg	p				
naproxen-esomeprazole magnesium tab dr 375-20 mg, 500-20 mg (Vimovo)	np				
OLUMIANT- baricitinib tab 1 mg, 2 mg, 4 mg	NP	•	•		•
ORENCIA- abatacept subcutaneous soln prefilled syringe 50 mg/0.4ml, 87.5 mg/0.7ml, 125 mg/ml	NP	•	•		•
ORENCIA CLICKJECT- abatacept subcutaneous soln auto-injector 125 mg/ml	NP	•	•		•
OTEZLA- apremilast tab starter therapy pack 10 mg & 20 mg & 30 mg	P	•	•		•
OTEZLA- apremilast tab 30 mg	P	•	•		•
OTREXUP- methotrexate soln pf auto-injector 10 mg/0.4ml, 12.5 mg/0.4ml, 15 mg/0.4ml, 17.5 mg/0.4ml, 20 mg/0.4ml, 22.5 mg/0.4ml, 25 mg/0.4ml	P			•	
OXAPROZIN- oxaprozin cap 300 mg	NP				
oxaprozin tab 600 mg (Daypro)	np				
piroxicam cap 10 mg, 20 mg (Feldene)	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	NC				
RELAFEN DS- nabumetone tab 1000 mg	NP				
RIDAURA- auranofin cap 3 mg	NP				

Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits
RINVOQ- upadacitinib tab er 24hr 15 mg, 30 mg, 45 mg	P	•	•		•
RINVOQ LQ- upadacitinib oral soln 1 mg/ml	P	•	•		•
SIMLANDI 1-PEN KIT- adalimumab-ryvk auto-injector kit 40 mg/0.4ml	NC				
SIMLANDI 2-PEN KIT- adalimumab-ryvk auto-injector kit 40 mg/0.4ml	NC				
SIMPONI- golimumab subcutaneous soln auto-injector 50 mg/0.5ml	NC				
SIMPONI- golimumab subcutaneous soln auto-injector 100 mg/ml	P	•	•		•
SIMPONI- golimumab subcutaneous soln prefilled syringe 50 mg/0.5ml	NC				
SIMPONI- golimumab subcutaneous soln prefilled syringe 100 mg/ml	P	•	•		•
SPRIX- ketorolac tromethamine nasal spray 15.75 mg/spray	NP				•
sulindac tab 150 mg, 200 mg	p				
TOLECTIN 600- tolmetin sodium tab 600 mg	NP				
TOLMETIN SODIUM- tolmetin sodium cap 400 mg	NP				
XELJANZ- tofacitinib citrate oral soln 1 mg/ml (base equivalent)	P	•	•		•
XELJANZ- tofacitinib citrate tab 5 mg (base equivalent), 10 mg (base equivalent)	P	•	•		•
XELJANZ XR- tofacitinib citrate tab er 24hr 11 mg (base equivalent), 22 mg (base equivalent)	P	•	•		•
YUFLYMA CD/UC/HS STARTER- adalimumab-aaty auto-injector kit 80 mg/0.8ml	NC				

p = Preferred Generics
np = Non-preferred Generics

P = Preferred Brands
NP = Non-preferred Brands

NC = Non covered drugs

Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits
YUFLYMA 1-PEN KIT- adalimumab-aaty auto-injector kit 40 mg/0.4ml, 80 mg/0.8ml	NC				
YUFLYMA 2-PEN KIT- adalimumab-aaty auto-injector kit 40 mg/0.4ml	NC				
YUFLYMA 2-SYRINGE KIT- adalimumab-aaty prefilled syringe kit 20 mg/0.2ml, 40 mg/0.4ml	NC				
YUSIMRY- adalimumab-aqvh soln pen-injector 40 mg/0.8ml	NC				
MIGRAINE PRODUCTS					
AIMOVIG- erenumab-aoee subcutaneous soln auto-injector 70 mg/ml, 140 mg/ml	P		•		•
AJOVY- fremanezumab-vfrm subcutaneous soln auto-inj 225 mg/1.5ml	P		•		•
AJOVY- fremanezumab-vfrm subcutaneous soln pref syr 225 mg/1.5ml	P		•		•
almotriptan malate tab 6.25 mg, 12.5 mg	np			•	•
diclofenac potassium (migraine) packet 50 mg (Cambia)	np				
dihydroergotamine mesylate inj 1 mg/ml (D.h.e. 45)	np			•	•
dihydroergotamine mesylate nasal spray 4 mg/ml (Migranal)	np		•		•
eletriptan hydrobromide tab 20 mg (base equivalent), 40 mg (base equivalent) (Relpax)	np				•
ELYXYB- celecoxib oral soln 120 mg/4.8ml (25 mg/ml)	NP		•		•
EMGALITY- galcanezumab-gnlm subcutaneous soln auto-injector 120 mg/ml	P		•		•

Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits
EMGALITY- galcanezumab-gnlm subcutaneous soln prefilled syr 100 mg/ml, 120 mg/ml	P		•		•
ERGOMAR- ergotamine tartrate sl tab 2 mg	NP			•	•
ERGOTAMINE TARTRATE/CAFFE-ergotamine w/ caffeine tab 1-100 mg	NP			•	•
frovatriptan succinate tab 2.5 mg (base equivalent) (Frova)	np			•	•
IMITREX STATDOSE REFILL- sumatriptan succinate solution cartridge 4 mg/0.5ml, 6 mg/0.5ml	NP			•	•
MIGERGOT- ergotamine w/ caffeine suppos 2-100 mg	NP			•	•
naratriptan hcl tab 1 mg (base equiv), 2.5 mg (base equiv) (Amerge)	np				•
NURTEC- rimegepant sulfate tab disint 75 mg	P		•		•
ONZETRA XSAIL- sumatriptan succinate exhaler powder 11 mg/ nosepiece	NP			•	•
QULIPTA- atogepant tab 10 mg, 30 mg, 60 mg	P		•		•
REYVOW- lasmiditan succinate tab 50 mg, 100 mg	P		•		•
rizatriptan benzoate oral disintegrating tab 5 mg (base eq)	p				•
rizatriptan benzoate oral disintegrating tab 10 mg (base eq) (Maxalt-mlt)	p				•
rizatriptan benzoate tab 5 mg (base equivalent)	p				•
rizatriptan benzoate tab 10 mg (base equivalent) (Maxalt)	p				•
sumatriptan nasal spray 5 mg/act, 20 mg/act (Imitrex)	np				•

p = Preferred Generics
np = Non-preferred Generics

P = Preferred Brands
NP = Non-preferred Brands

NC = Non covered drugs

Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits
sumatriptan succinate inj 6 mg/0.5ml (Imitrex)	np				•
SUMATRIPTAN SUCCINATE REF-sumatriptan succinate solution cartridge 4 mg/0.5ml, 6 mg/0.5ml	NP			•	•
sumatriptan succinate solution auto-injector 4 mg/0.5ml, 6 mg/0.5ml (Imitrex statdose sys)	np				•
sumatriptan succinate tab 25 mg, 50 mg, 100 mg (Imitrex)	p				•
sumatriptan-naproxen sodium tab 85-500 mg (Treximet)	np			•	•
TOSYMRA- sumatriptan nasal spray 10 mg/act	NP			•	•
TRUDHESA- dihydroergotamine mesylate hfa nasal aerosol 0.725 mg/act	NC				
UBRELVY- ubrogepant tab 50 mg, 100 mg	P		•		•
ZAVZPRET- zavegepant hcl nasal spray 10 mg/act	NC				
ZEMBRACE SYMTOUCH- sumatriptan succinate solution auto-injector 3 mg/0.5ml	NP			•	•
zolmitriptan nasal spray 5 mg/spray unit (Zomig)	np			•	•
zolmitriptan orally disintegrating tab 2.5 mg, 5 mg (Zomig zmt)	np				•
zolmitriptan tab 2.5 mg, 5 mg (Zomig)	np				•
GOUT AGENTS					
ALLOPURINOL- allopurinol tab 200 mg	NP				
allopurinol tab 100 mg, 300 mg (Zyloprim)	p				
colchicine cap 0.6 mg (Mitigare)	np				

Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits
colchicine tab 0.6 mg (Colcrys)	np				
colchicine w/ probenecid tab 0.5-500 mg	np				
febuxostat tab 40 mg, 80 mg (Uloric)	np				
GLOPERBA- colchicine oral soln 0.6 mg/5ml	NP				
probenecid tab 500 mg	np				
NEUROMUSCULAR DRUGS					
ANTICONVULSANTS					
APTIOM- eslicarbazepine acetate tab 200 mg, 400 mg, 600 mg, 800 mg	P				
BRIVIACT- brivaracetam oral soln 10 mg/ml	NP				
BRIVIACT- brivaracetam tab 10 mg, 25 mg, 50 mg, 75 mg, 100 mg	NP				
carbamazepine cap er 12hr 100 mg, 200 mg, 300 mg (Carbatrol)	np				
carbamazepine chew tab 100 mg	np				
carbamazepine susp 100 mg/5ml (Tegretol)	np				
carbamazepine tab er 12hr 100 mg, 200 mg, 400 mg (Tegretol-xr)	np				
carbamazepine tab 200 mg (Tegretol)	np				
CARBATROL- carbamazepine cap er 12hr 100 mg, 200 mg, 300 mg	NP				
clobazam suspension 2.5 mg/ml (Onfi)	np				
clobazam tab 10 mg, 20 mg (Onfi)	np				
clonazepam orally disintegrating tab 0.125 mg, 0.25 mg, 0.5 mg, 1 mg, 2 mg	np				
clonazepam tab 0.5 mg, 1 mg, 2 mg (Klonopin)	p				

p = Preferred Generics
np = Non-preferred Generics

P = Preferred Brands
NP = Non-preferred Brands

NC = Non covered drugs

Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits	Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits
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					FINTEPLA- fenfluramine hcl oral soln 2.2 mg/ml	NP	•	•		•
diazepam rectal gel delivery system 10 mg (Diastat acudial)	np					FYCOMPA- perampanel susp 0.5 mg/ml	NP				
diazepam rectal gel delivery system 20 mg	np					FYCOMPA- perampanel tab 2 mg, 4 mg, 6 mg, 8 mg, 10 mg, 12 mg	NP				
DILANTIN- phenytoin sodium extended cap 30 mg	P					gabapentin cap 100 mg, 300 mg, 400 mg (Neurontin)	p				
DILANTIN- phenytoin sodium extended cap 100 mg	NP					gabapentin oral soln 250 mg/5ml (Neurontin)	np				
DILANTIN INFATABS- phenytoin chew tab 50 mg	NP					gabapentin tab 600 mg, 800 mg (Neurontin)	p				
DILANTIN-125- phenytoin susp 125 mg/5ml	NP					lacosamide oral solution 10 mg/ml (Vimpat)	np				
divalproex sodium cap delayed release sprinkle 125 mg (Depakote sprinkles)	np					lacosamide tab 50 mg, 100 mg, 150 mg, 200 mg (Vimpat)	np				
divalproex sodium tab delayed release 125 mg, 250 mg, 500 mg (Depakote)	p					LAMICTAL XR- lamotrigine tab er 24hr 21 x 25 mg & 7 x 50 mg titration kit	NP				
divalproex sodium tab er 24 hr 250 mg, 500 mg (Depakote er)	np					LAMICTAL XR- lamotrigine tab er 24hr 25 (14) & 50 mg (14) & 100 mg(7) kit	NP				
ELEPSIA XR- levetiracetam tab er 24hr 1000 mg, 1500 mg	NC					LAMICTAL XR- lamotrigine tab er 24hr 50 (14) & 100 mg(14) & 200 mg(7) kit	NP				
EPIDIOLEX- cannabidiol soln 100 mg/ml	P	•	•			lamotrigine orally disintegrating tab 25 mg, 50 mg, 100 mg, 200 mg (Lamictal odt)	np				
EPRONTIA- topiramate oral soln 25 mg/ml	NC					lamotrigine tab chewable dispersible 5 mg, 25 mg (Lamictal chewable di)	np				
ethosuximide cap 250 mg (Zarontin)	np					lamotrigine tab disint 21 x 25 mg & 7 x 50 mg titration kit (Lamictal odt)	np				
ethosuximide soln 250 mg/5ml (Zarontin)	np										

p = Preferred Generics
np = Non-preferred Generics

P = Preferred Brands
NP = Non-preferred Brands

NC = Non covered drugs

Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits
lamotrigine tab disint 42 x 50mg & 14 x 100mg titration kit (Lamictal odt)	np				
lamotrigine tab disint 25 (14) & 50 mg (14) & 100 mg (7) kit (Lamictal odt)	np				
lamotrigine tab er 24hr 25 mg, 50 mg, 100 mg, 200 mg, 250 mg, 300 mg (Lamictal xr)	np				
lamotrigine tab 25 mg, 100 mg, 150 mg, 200 mg (Lamictal)	p				
lamotrigine tab 35 x 25 mg starter kit (Lamictal starter/tak)	np				
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)	np				
levetiracetam tab er 24hr 500 mg, 750 mg (Keppra xr)	np				
levetiracetam tab 250 mg, 500 mg (Keppra)	p				
levetiracetam tab 750 mg, 1000 mg (Keppra)	np				
methsuximide cap 300 mg (Celontin)	np				
MOTPOLY XR- lacosamide cap er 24hr 100 mg, 150 mg, 200 mg	NC				
MYSOLINE- primidone tab 50 mg, 250 mg	NP				
NAYZILAM- midazolam nasal spray soln 5 mg/0.1 ml	NP				•
oxcarbazepine susp 300 mg/5ml (60 mg/ml) (Trileptal)	np				

Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits
oxcarbazepine tab 150 mg (Trileptal)	p				
oxcarbazepine tab 300 mg, 600 mg (Trileptal)	np				
OXTELLAR XR- oxcarbazepine tab er 24hr 150 mg, 300 mg, 600 mg	NP				
phenytoin chew tab 50 mg (Dilantin infatabs)	np				
phenytoin sodium extended cap 100 mg (Dilantin)	np				
phenytoin sodium extended cap 200 mg, 300 mg (Phenytek)	np				
phenytoin susp 125 mg/5ml (Dilantin-125)	np				
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)	np				•
PRIMIDONE- primidone tab 125 mg	NP				
primidone tab 50 mg (Mysoline)	p				
primidone tab 250 mg (Mysoline)	np				
rufinamide susp 40 mg/ml (Banzel)	np				
rufinamide tab 200 mg, 400 mg (Banzel)	np				
SPRITAM- levetiracetam tab disintegrating soluble 250 mg, 500 mg, 750 mg, 1000 mg	NP				
SYMPAZAN- clobazam oral film 5 mg, 10 mg, 20 mg	NP				
TEGRETOL- carbamazepine susp 100 mg/5ml	NP				
TEGRETOL- carbamazepine tab 200 mg	NP				
TEGRETOL-XR- carbamazepine tab er 12hr 100 mg, 200 mg, 400 mg	NP				

p = Preferred Generics
np = Non-preferred Generics

P = Preferred Brands
NP = Non-preferred Brands

NC = Non covered drugs

Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits
tiagabine hcl tab 2 mg, 4 mg, 12 mg, 16 mg (Gabitril)	np				
topiramate cap er 24hr sprinkle 25 mg, 50 mg, 100 mg, 150 mg, 200 mg (Qudexy xr)	np		•		•
topiramate cap er 24hr 25 mg, 50 mg, 100 mg, 200 mg (Trokendi xr)	np		•		•
topiramate sprinkle cap 15 mg, 25 mg (Topamax sprinkle)	np				
topiramate tab 25 mg, 50 mg, 100 mg, 200 mg (Topamax)	p				
valproate sodium oral soln 250 mg/5ml (base equiv)	np				
valproic acid cap 250 mg	np				
VALTOCO 10 MG DOSE- diazepam nasal spray 10 mg/0.1 ml	NP				•
VALTOCO 15 MG DOSE- diazepam nasal spray ther pack 2 x 7.5 mg/0.1ml (15 mg dose)	NP				•
VALTOCO 20 MG DOSE- diazepam nasal spray ther pack 2 x 10 mg/0.1ml (20 mg dose)	NP				•
VALTOCO 5 MG DOSE- diazepam nasal spray 5 mg/0.1 ml	NP				•
vigabatrin powd pack 500 mg (Sabril)	np	•			
vigabatrin tab 500 mg (Sabril)	np	•			
XCOPRI- cenobamate tab pack 100 mg & 150 mg tabs (250 mg daily dose)	NP				
XCOPRI- cenobamate tab pack 150 mg & 200 mg tabs (350 mg daily dose)	NP				
XCOPRI- cenobamate tab titration pack 14 x 12.5 mg & 14 x 25 mg,	NP				

Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits
14 x 50 mg & 14 x 100 mg, 14 x 150 mg & 14 x 200 mg					
XCOPRI- cenobamate tab 25 mg, 50 mg, 100 mg, 150 mg, 200 mg	NP				
ZARONTIN- ethosuximide cap 250 mg	NP				
ZARONTIN- ethosuximide soln 250 mg/5ml	NP				
ZONISADE- zonisamide oral susp 100 mg/5ml (20 mg/ml)	NC				
zonisamide cap 25 mg (Zonegran)	p				
zonisamide cap 50 mg	p				
zonisamide cap 100 mg (Zonegran)	np				
ZTALMY- ganaxolone susp 50 mg/ml	NP	•			
ANTIPARKINSON AGENTS					
amantadine hcl cap 100 mg	np				
amantadine hcl soln 50 mg/5ml	np				
amantadine hcl tab 100 mg	np				
APOKYN- apomorphine hcl soln cartridge 30 mg/3ml	NP	•			
apomorphine hcl soln cartridge 30 mg/3ml (Apokyn)	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 tab er 25-100 mg, 50-200 mg	np				
carbidopa & levodopa tab 10-100 mg (Sinemet)	p				
carbidopa & levodopa tab 25-100 mg, 25-250 mg (Sinemet)	np				
carbidopa tab 25 mg (Lodosyn)	np				

p = Preferred Generics
np = Non-preferred Generics

P = Preferred Brands
NP = Non-preferred Brands

NC = Non covered drugs

Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits
carbidopa-levodopa-entacapone tabs 12.5-50-200 mg (Stalevo 50)	np				
carbidopa-levodopa-entacapone tabs 18.75-75-200 mg (Stalevo 75)	np				
carbidopa-levodopa-entacapone tabs 25-100-200 mg (Stalevo 100)	np				
carbidopa-levodopa-entacapone tabs 31.25-125-200 mg (Stalevo 125)	np				
carbidopa-levodopa-entacapone tabs 37.5-150-200 mg (Stalevo 150)	np				
carbidopa-levodopa-entacapone tabs 50-200-200 mg (Stalevo 200)	np				
CARBIDOPA/LEVODOPA ODT- carbidopa & levodopa orally disintegrating tab 10-100 mg, 25-100 mg, 25-250 mg	NP				
DHIVY- carbidopa & levodopa tab 25-100 mg	NC				
DUOPA- carbidopa-levodopa enteral susp 4.63-20 mg/ml	NP				
entacapone tab 200 mg (Comtan)	np				
GOCOVRI- amantadine hcl cap er 24hr 68.5 mg (base equivalent), 137 mg (base equivalent)	NP	•	•		•
INBRIJA- levodopa inhal powder cap 42 mg	P	•			
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	•			
ONGENTYS- opicapone cap 25 mg, 50 mg	NP				

Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits
OSMOLEX ER- amantadine hcl tab er 24hr 129 mg (base equivalent), 193 mg (base equivalent)	NP		•		•
pramipexole dihydrochloride tab er 24hr 0.375 mg, 0.75 mg, 1.5 mg, 2.25 mg, 3 mg, 3.75 mg, 4.5 mg (Mirapex er)	np				
pramipexole dihydrochloride tab 0.125 mg, 0.5 mg, 0.75 mg, 1 mg (Mirapex)	p				
pramipexole dihydrochloride tab 0.25 mg, 1.5 mg	p				
rasagiline mesylate tab 0.5 mg (base equiv), 1 mg (base equiv) (Azilect)	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				
ropinirole hydrochloride tab 0.25 mg, 0.5 mg, 1 mg, 2 mg, 3 mg, 4 mg, 5 mg	p				
RYTARY- carbidopa & levodopa cap er 23.75-95 mg, 36.25-145 mg, 48.75-195 mg, 61.25-245 mg	NP				
selegiline hcl cap 5 mg	np				
selegiline hcl tab 5 mg	np				
tolcapone tab 100 mg (Tasmar)	np				
TRIHEXYPHENIDYL HCL- trihexyphenidyl hcl oral soln 0.4 mg/ml	NP				
trihexyphenidyl hcl tab 2 mg, 5 mg	p				
XADAGO- safinamide mesylate tab 50 mg (base equiv), 100 mg (base equiv)	NP				

p = Preferred Generics
np = Non-preferred Generics

P = Preferred Brands
NP = Non-preferred Brands

NC = Non covered drugs

Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits
ZELAPAR- selegiline hcl orally disintegrating tab 1.25 mg	NP				
NEUROMUSCULAR AGENTS					
AMONDYS 45- casimersen iv soln 100 mg/2ml (50 mg/ml)	NC				
DAYBUE- trofinetide oral soln 200 mg/ml	NP	•	•		•
ELEVIDYS 10.0-10.4 KG- delandistrogene moxeparovec-rokl iv susp 10 x 10 ml kit	NC				
ELEVIDYS 10.5-11.4 KG- delandistrogene moxeparovec-rokl iv susp 11 x 10 ml kit	NC				
ELEVIDYS 11.5-12.4 KG- delandistrogene moxeparovec-rokl iv susp 12 x 10 ml kit	NC				
ELEVIDYS 12.5-13.4 KG- delandistrogene moxeparovec-rokl iv susp 13 x 10 ml kit	NC				
ELEVIDYS 13.5-14.4 KG- delandistrogene moxeparovec-rokl iv susp 14 x 10 ml kit	NC				
ELEVIDYS 14.5-15.4 KG- delandistrogene moxeparovec-rokl iv susp 15 x 10 ml kit	NC				
ELEVIDYS 15.5-16.4 KG- delandistrogene moxeparovec-rokl iv susp 16 x 10 ml kit	NC				
ELEVIDYS 16.5-17.4 KG- delandistrogene moxeparovec-rokl iv susp 17 x 10 ml kit	NC				
ELEVIDYS 17.5-18.4 KG- delandistrogene moxeparovec-rokl iv susp 18 x 10 ml kit	NC				
ELEVIDYS 18.5-19.4 KG- delandistrogene moxeparovec-rokl iv susp 19 x 10 ml kit	NC				

Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits
ELEVIDYS 19.5-20.4 KG- delandistrogene moxeparovec-rokl iv susp 20 x 10 ml kit	NC				
ELEVIDYS 20.5-21.4 KG- delandistrogene moxeparovec-rokl iv susp 21 x 10 ml kit	NC				
ELEVIDYS 21.5-22.4 KG- delandistrogene moxeparovec-rokl iv susp 22 x 10 ml kit	NC				
ELEVIDYS 22.5-23.4 KG- delandistrogene moxeparovec-rokl iv susp 23 x 10 ml kit	NC				
ELEVIDYS 23.5-24.4 KG- delandistrogene moxeparovec-rokl iv susp 24 x 10 ml kit	NC				
ELEVIDYS 24.5-25.4 KG- delandistrogene moxeparovec-rokl iv susp 25 x 10 ml kit	NC				
ELEVIDYS 25.5-26.4 KG- delandistrogene moxeparovec-rokl iv susp 26 x 10 ml kit	NC				
ELEVIDYS 26.5-27.4 KG- delandistrogene moxeparovec-rokl iv susp 27 x 10 ml kit	NC				
ELEVIDYS 27.5-28.4 KG- delandistrogene moxeparovec-rokl iv susp 28 x 10 ml kit	NC				
ELEVIDYS 28.5-29.4 KG- delandistrogene moxeparovec-rokl iv susp 29 x 10 ml kit	NC				
ELEVIDYS 29.5-30.4 KG- delandistrogene moxeparovec-rokl iv susp 30 x 10 ml kit	NC				
ELEVIDYS 30.5-31.4 KG- delandistrogene moxeparovec-rokl iv susp 31 x 10 ml kit	NC				

p = Preferred Generics
np = Non-preferred Generics

P = Preferred Brands
NP = Non-preferred Brands

NC = Non covered drugs

Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits
ELEVIDYS 31.5-32.4 KG- delandistrogene moxeparovec-rokl iv susp 32 x 10 ml kit	NC				
ELEVIDYS 32.5-33.4 KG- delandistrogene moxeparovec-rokl iv susp 33 x 10 ml kit	NC				
ELEVIDYS 33.5-34.4 KG- delandistrogene moxeparovec-rokl iv susp 34 x 10 ml kit	NC				
ELEVIDYS 34.5-35.4 KG- delandistrogene moxeparovec-rokl iv susp 35 x 10 ml kit	NC				
ELEVIDYS 35.5-36.4 KG- delandistrogene moxeparovec-rokl iv susp 36 x 10 ml kit	NC				
ELEVIDYS 36.5-37.4 KG- delandistrogene moxeparovec-rokl iv susp 37 x 10 ml kit	NC				
ELEVIDYS 37.5-38.4 KG- delandistrogene moxeparovec-rokl iv susp 38 x 10 ml kit	NC				
ELEVIDYS 38.5-39.4 KG- delandistrogene moxeparovec-rokl iv susp 39 x 10 ml kit	NC				
ELEVIDYS 39.5-40.4 KG- delandistrogene moxeparovec-rokl iv susp 40 x 10 ml kit	NC				
ELEVIDYS 40.5-41.4 KG- delandistrogene moxeparovec-rokl iv susp 41 x 10 ml kit	NC				
ELEVIDYS 41.5-42.4 KG- delandistrogene moxeparovec-rokl iv susp 42 x 10 ml kit	NC				
ELEVIDYS 42.5-43.4 KG- delandistrogene moxeparovec-rokl iv susp 43 x 10 ml kit	NC				

Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits
ELEVIDYS 43.5-44.4 KG- delandistrogene moxeparovec-rokl iv susp 44 x 10 ml kit	NC				
ELEVIDYS 44.5-45.4 KG- delandistrogene moxeparovec-rokl iv susp 45 x 10 ml kit	NC				
ELEVIDYS 45.5-46.4 KG- delandistrogene moxeparovec-rokl iv susp 46 x 10 ml kit	NC				
ELEVIDYS 46.5-47.4 KG- delandistrogene moxeparovec-rokl iv susp 47 x 10 ml kit	NC				
ELEVIDYS 47.5-48.4 KG- delandistrogene moxeparovec-rokl iv susp 48 x 10 ml kit	NC				
ELEVIDYS 48.5-49.4 KG- delandistrogene moxeparovec-rokl iv susp 49 x 10 ml kit	NC				
ELEVIDYS 49.5-50.4 KG- delandistrogene moxeparovec-rokl iv susp 50 x 10 ml kit	NC				
ELEVIDYS 50.5-51.4 KG- delandistrogene moxeparovec-rokl iv susp 51 x 10 ml kit	NC				
ELEVIDYS 51.5-52.4 KG- delandistrogene moxeparovec-rokl iv susp 52 x 10 ml kit	NC				
ELEVIDYS 52.5-53.4 KG- delandistrogene moxeparovec-rokl iv susp 53 x 10 ml kit	NC				
ELEVIDYS 53.5-54.4 KG- delandistrogene moxeparovec-rokl iv susp 54 x 10 ml kit	NC				
ELEVIDYS 54.5-55.4 KG- delandistrogene moxeparovec-rokl iv susp 55 x 10 ml kit	NC				

p = Preferred Generics
np = Non-preferred Generics

P = Preferred Brands
NP = Non-preferred Brands

NC = Non covered drugs

Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits	Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits
ELEVIDYS 55.5-56.4 KG- delandistrogene moxeparovec-rokl iv susp 56 x 10 ml kit	NC					ELEVIDYS 67.5-68.4 KG- delandistrogene moxeparovec-rokl iv susp 68 x 10 ml kit	NC				
ELEVIDYS 56.5-57.4 KG- delandistrogene moxeparovec-rokl iv susp 57 x 10 ml kit	NC					ELEVIDYS 68.5-69.4 KG- delandistrogene moxeparovec-rokl iv susp 69 x 10 ml kit	NC				
ELEVIDYS 57.5-58.4 KG- delandistrogene moxeparovec-rokl iv susp 58 x 10 ml kit	NC					ELEVIDYS 69.5 KG PLUS- delandistrogene moxeparovec-rokl iv susp 70 x 10 ml kit	NC				
ELEVIDYS 58.5-59.4 KG- delandistrogene moxeparovec-rokl iv susp 59 x 10 ml kit	NC					EVRYSDI- risdiplam for soln 0.75 mg/ ml	NP	•	•		•
ELEVIDYS 59.5-60.4 KG- delandistrogene moxeparovec-rokl iv susp 60 x 10 ml kit	NC					EXONDYS 51- eteplirsen iv soln 100 mg/2ml (50 mg/ml), 500 mg/10ml (50 mg/ml)	NC				
ELEVIDYS 60.5-61.4 KG- delandistrogene moxeparovec-rokl iv susp 61 x 10 ml kit	NC					EXSERVAN- riluzole oral film 50 mg	NP	•	•		•
ELEVIDYS 61.5-62.4 KG- delandistrogene moxeparovec-rokl iv susp 62 x 10 ml kit	NC					RADICAVA ORS- edaravone oral susp 105 mg/5ml	NP	•	•		•
ELEVIDYS 62.5-63.4 KG- delandistrogene moxeparovec-rokl iv susp 63 x 10 ml kit	NC					RADICAVA ORS STARTER KIT- edaravone oral susp 105 mg/5ml	NP	•	•		•
ELEVIDYS 63.5-64.4 KG- delandistrogene moxeparovec-rokl iv susp 64 x 10 ml kit	NC					RELYVRIO- sodium phenylbutyrate- taurursodiol powd pack 3-1 gm	NC				
ELEVIDYS 64.5-65.4 KG- delandistrogene moxeparovec-rokl iv susp 65 x 10 ml kit	NC					riluzole tab 50 mg (Rilutek)	np	•			
ELEVIDYS 65.5-66.4 KG- delandistrogene moxeparovec-rokl iv susp 66 x 10 ml kit	NC					SKYCLARYS- omeveloxolone cap 50 mg	NP	•	•		•
ELEVIDYS 66.5-67.4 KG- delandistrogene moxeparovec-rokl iv susp 67 x 10 ml kit	NC					VILTEPSO- viltolarsen iv soln 250 mg/5ml (50 mg/ml)	NC				
						VYONDYS 53- golodirsen iv soln 100 mg/2ml (50 mg/ml)	NC				
						MUSCULOSKELETAL THERAPY AGENTS					
						BACLOFEN- baclofen oral soln 5 mg/5ml, 10 mg/5ml	NP		•		•
						BACLOFEN- baclofen tab 15 mg	NP				
						baclofen susp 25 mg/5ml (Fleqsuvy)	np		•		•
						baclofen tab 5 mg	np				
						baclofen tab 10 mg, 20 mg	p				

p = Preferred Generics
np = Non-preferred Generics

P = Preferred Brands
NP = Non-preferred Brands

NC = Non covered drugs

Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits
carisoprodol tab 250 mg, 350 mg (Soma)	NC				
chlorzoxazone tab 250 mg, 375 mg, 500 mg, 750 mg	np				
cyclobenzaprine hcl cap er 24hr 15 mg, 30 mg (Amrix)	np				
cyclobenzaprine hcl tab 5 mg, 10 mg	p				
cyclobenzaprine hcl tab 7.5 mg (Fexmid)	np				
dantrolene sodium cap 25 mg, 50 mg (Dantrium)	np				
dantrolene sodium cap 100 mg	np				
LYVISPAH- baclofen granules packet 5 mg, 10 mg, 20 mg	NP		•		•
metaxalone tab 400 mg	np				
metaxalone tab 800 mg (Skelaxin)	np				
methocarbamol tab 500 mg	p				
methocarbamol tab 750 mg (Robaxin-750)	p				
orphenadrine citrate tab er 12hr 100 mg	np				
orphenadrine w/ aspirin & caffeine tab 25-385-30 mg	np				
orphenadrine w/ aspirin & caffeine tab 50-770-60 mg (Norgesic forte)	np				
OZOBAX DS- baclofen oral soln 10 mg/5ml	NP		•		•
SOHONOS- palovarotene cap 1 mg, 1.5 mg, 2.5 mg, 5 mg, 10 mg	NP	•			
SOMA- carisoprodol tab 250 mg, 350 mg	NC				
tizanidine hcl cap 2 mg (base equivalent), 4 mg (base equivalent), 6 mg (base equivalent) (Zanaflex)	np				

Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits
tizanidine hcl tab 2 mg (base equivalent)	p				
tizanidine hcl tab 4 mg (base equivalent) (Zanaflex)	p				
ANTIMYASTHENIC AGENTS					
FIRDAPSE- amifampridine phosphate tab 10 mg (base equivalent)	NP	•	•		•
PYRIDOSTIGMINE BROMIDE- pyridostigmine bromide tab 30 mg	NP				
pyridostigmine bromide oral soln 60 mg/5ml (Mestinon)	np				
pyridostigmine bromide tab er 180 mg (Mestinon timespan)	np				
pyridostigmine bromide tab 60 mg (Mestinon)	np				
NUTRITIONAL PRODUCTS					
VITAMINS					
ergocalciferol cap 1.25 mg (50000 unit) (Drisdol)	p				
phytonadione tab 5 mg (Mephyton)	np				
MULTIVITAMINS					
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- prenat w/o a w/fecbn-fegl-dss-fa tab & dha cap 300 mg pack	NP				
CITRANATAL B-CALM- prenat w/o a w/fecbn-feglu-fa tab 20-1 mg & vit b6 tab pak	NP				

p = Preferred Generics
np = Non-preferred Generics

P = Preferred Brands
NP = Non-preferred Brands

NC = Non covered drugs

Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits
CITRANATAL HARMONY- prenatal w/ o a w/fe fum-fe cbn-dss-fa-dha cap 27-1-260 mg	NP				
CITRANATAL MEDLEY- prenatal w/ o a w/fe fum-fe cbn-fa-dha cap 27-1-200 mg	NP				
CITRANATAL 90 DHA- prenatal w/o a w/febn-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				
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				
ENBRACE HR- prenatal vit w/ fe gly cys-fa-omega 3 fatty acids cap	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	NP				

Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits
M-NATAL PLUS- prenatal vit w/ fe fumarate-fa tab 27-1 mg	NP				
NATACHEW- prenatal vit w/ fe fum-fe bisglycin-fa chew tab 28-1 mg	NP				
NATAL PNV- prenatal vit w/ fe gluconate-fa tab 6-0.5 mg	NP				
NATALVIT- prenatal vit w/ fe fumarate-fa tab 75-1 mg	NP				
NEEVO DHA- prenatal w/o a w/fefum-methylfol-omegas cap 27-1.13 mg	NP				
NEONATAL COMPLETE- prenatal vit w/ fe fumarate-fa tab 27-1 mg, 29-1 mg	NP				
NEONATAL FE- prenatal vitamin w/ iron-folic acid tab 90-1 mg	NP				
NEONATAL PLUS- prenatal vit w/ fe fumarate-fa tab 27-1 mg	NP				
NEONATAL 19- prenatal vitamin-folic acid tab 1 mg	NP				
NEONATAL/DHA- prenatal mv w/ fe fum-fa tab 29-1 mg & dha cap 200 mg pack	NP				
NESTABS- prenatal vit w/o vit a w/ fe bisglycinate-fa tab 32-1 mg	NP				
NESTABS DHA- prenatal w/o a w/ fe bisglyc-fa tab 32-1 mg & omega cap pack	NP				
NESTABS ONE- prenatal 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				

p = Preferred Generics
np = Non-preferred Generics

P = Preferred Brands
NP = Non-preferred Brands

NC = Non covered drugs

Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits
OB COMPLETE PETITE- prenat w/o a w/fecbn-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				
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-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				

Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits
PRENA 1 TRUE- prenat w/o a w/fe chel-fa tab 30-1.4 mg & dha cap 300mg pk	NP				
PRENAISSANCE- prenatal w/o vit a w/ fe fum-dss-fa-dha cap 29-1.25-325 mg	NP				
PRENAISSANCE PLUS- prenatal w/o a w/fe cbn-dss-fa-dha cap 28-1-250 mg	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				
PRENATAL PLUS VITAMIN AND- 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				
PRENATAL 19- prenatal vit w/ fe fumarate-fa chew tab 29-1 mg	P				
PRENATAL-U- prenatal w/o a vit w/ fe fumarate-fa cap 106.5-1 mg	P				
PRENATE- prenat mv & min w/ l- methylfolate-fa chew tab 0.6-0.4 mg	NP				
PRENATE AM- prenatal w/ calcium-vit b6-vit b12-fa-ginger tab 1 mg	NP				
PRENATE DHA- prenat w/o a w/feaspg-methfol-fa-dha cap 18-0.6-0.4-300 mg	NP				
PRENATE ELITE- prenatal w/ fe asp gly-l methylfol-fa tab 20-0.6-0.4 mg	NP				
PRENATE ENHANCE- prenat w/ o a w/fefum-methfol-fa-dha cap 28-0.6-0.4-400 mg	NP				

p = Preferred Generics
np = Non-preferred Generics

P = Preferred Brands
NP = Non-preferred Brands

NC = Non covered drugs

Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits	Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits
PRENATE ESSENTIAL- prenatal w/ o a w/feaspg-methfol-fa-dha cap 18-0.6-0.4-300 mg	NP					RELNATE DHA- prenatal vit w/ fe fum-fa-omega 3 cap 28-1-200 mg	NP				
PRENATE MINI- prenatal w/oa w/ fecb-feasp-meth-fa-dha cap 18-0.6-0.4-350 mg	NP					SE-NATAL 19- prenatal vit w/ dss-fe fumarate-fa tab 29-1 mg	P				
PRENATE PIXIE- prenatal w/o a w/feaspg-methfol-fa-dha cap 10-0.6-0.4-200 mg	NP					SE-NATAL 19- prenatal vit w/ fe fumarate-fa chew tab 29-1 mg	P				
PRENATE RESTORE- prenatal w/ o a w/feum-methfol-fa-dha cap 27-0.6-0.4-400 mg	NP					SELECT-OB- prenatal w/ fepolycmplx-methylfol-fa chew tab 29-0.6-0.4 mg	NP				
PRENATOL-M- prenatal vit w/ fe fumarate-fa tab 27-1.2 mg	NP					SELECT-OB- prenatal vit w/ fe polysac cmplx-fa chew tab 29-1 mg	NP				
PRENATRIX- prenatal vit w/ fe fumarate-fa tab 27-1 mg	NP					SELECT-OB+DHA- prenatal mv w/ fe poly-fa chw 29-1 mg & dha cap 250 mg pak	NP				
PRENATRYL- prenatal vit w/ fe fumarate-fa tab 27-1 mg	NP					TARON-C DHA- prenatal w/fe fum-fe poly -fa-omega 3 cap 35-1 mg	NP				
PRENATVITE COMPLETE- prenatal multivitamins & minerals w/ iron & fa tab 1 mg	NP					THRIVITE RX- prenatal vit w/ iron carbonyl-fa tab 29-1 mg	NP				
PRENATVITE PLUS- prenatal multivitamins & minerals w/ iron & fa tab 1 mg	NP					TRICARE- prenatal vit w/ fe fumarate-fa tab 27-1 mg	NP				
PRENATVITE RX- prenatal multivitamins & minerals w/iron & fa tab 0.8 mg	NP					TRINATAL RX 1- prenatal vit w/ fe fumarate-fa tab 60-1 mg	NP				
PRENA1 CHEW- prenatal w/ b2-b6-b12-d3-folic acid chew tab 1.4 mg	NP					TRINATE- prenatal vit w/ fe fumarate-fa tab 28-1 mg	P				
PRENA1 PEARL- prenatal w/oa w/ fefum-na fered-fa-dha cap er 30-1.4-200 mg	NP					TRISTART DHA- prenatal w/o a w/fecbn-methylf-fa-dha cap 31-0.6-0.4-200 mg	NP				
PRIMACARE- prenatal w/o a w/ feasp-methlf-fa-omeg cap 30-0.75-0.25-470mg	NP					VINATE DHA RF- prenatal w/o a w/feum-methylfol-omegas cap 27-1.13 mg	NP				
PROVIDA OB- prenatal w/o a w/fe fum-fe poly-fa cap 20-20-1.25 mg	NP					VINATE II- prenatal vit w/ fe bisglycinate chelate-fa tab 29-1 mg	P				
						VINATE ONE- prenatal vit w/ fe fumarate-fa tab 60-1 mg	P				
						VITAFOL FE+- prenatal w/fe poly-methylfol-fa-dha cap 90-0.6-0.4-200 mg	NP				

p = Preferred Generics
np = Non-preferred Generics

P = Preferred Brands
NP = Non-preferred Brands

NC = Non covered drugs

Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits
VITAFOL GUMMIES- prenatal vit w/ fe phos-fa-omega chew tab 3.33-0.333-34.8 mg	NP				
VITAFOL STRIPS- prenatal w/ b6-b12-cholecalciferol-folic acid film 1 mg	NP				
VITAFOL ULTRA- prenatal w/ fe poly-methylfol-fa-dha cap 29-0.6-0.4-200 mg	NP				
VITAFOL-NANO- prenatal w/o a w/ fefum-l methylfol-fa tab 18-0.6-0.4 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				
VITAMEDMD ONE RX/QUATREFO- prenatal w/o a w/fefum-methfol-fa-dha cap 30-0.6-0.4-200 mg	NP				
VITAMEDMD REDICHEW RX- prenatal w/ b2-b6-b12-d3-folic acid chew tab 1.4 mg	NP				
VITAPEARL- prenatal w/oa w/fefum-na fered-fa-dha cap er 30-1.4-200 mg	NP				
VITATHELY/GINGER- prenatal vit w/ fe fumarate-fa tab 27-1 mg	NP				
VITATRUE- prenatal w/o a w/fe chel-fa tab 30-1.4 mg & dha cap 300mg pk	NP				
VIVA DHA- prenatal vit w/ fe fum-fa-omega 3 cap 28-1-200 mg	NP				
WESCAP-C DHA- prenatal w/fe fum-fe poly -fa-omega 3 cap 53.5-38-1 mg	NP				

Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits
WESCAP-PN DHA- prenatal w/o a w/fefum-methfol-fa-dha cap 27-0.6-0.4-300 mg	NP				
WESNATAL DHA COMPLETE- prenatal-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				
WESTGEL DHA- prenatal 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				
POKONZA- potassium chloride powder packet 10 meq	NP				
pot phos monobasic w/sod phos di & monobas tab 155-852-130mg (K-phos neutral)	np				
potassium chloride cap er 8 meq, 10 meq	p				
POTASSIUM CHLORIDE ER- potassium chloride tab er 8 meq (600 mg)	P				
potassium chloride microencapsulated crys er tab 10 meq, 20 meq	p				

p = Preferred Generics
np = Non-preferred Generics

P = Preferred Brands
NP = Non-preferred Brands

NC = Non covered drugs

Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits
potassium chloride microencapsulated crys er tab 15 meq	np				
potassium chloride oral soln 10% (20 meq/15ml), 20% (40 meq/15ml)	np				
potassium chloride powder packet 20 meq	np				
potassium chloride tab er 8 meq (600 mg)	p				
potassium chloride tab er 10 meq, 20 meq (1500 mg) (K-tab)	p				
potassium phosphate monobasic tab 500 mg (K-phos)	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				
sodium fluoride soln 0.5 mg/ml f (from 1.1 mg/ml 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)	NC				
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)	P	•	•		•
DROXIA- hydroxyurea cap 200 mg, 300 mg, 400 mg	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	NC				
ferrous sulfate soln 75 mg/ml (15 mg/ml elemental fe), 220 mg/5ml (44 mg/5ml elemental fe)	p				
ferrous sulfate soln 300 mg/5ml (60 mg/5ml elemental fe)	np				
folic acid cap 0.8 mg	p				
folic acid tab 400 mcg, 800 mcg, 1 mg	p				
FULPHILA- pegfilgrastim-jmdb soln prefilled syringe 6 mg/0.6ml	P	•			
FYLNETRA- pegfilgrastim-pbbk soln prefilled syringe 6 mg/0.6ml	NC				

p = Preferred Generics
np = Non-preferred Generics

P = Preferred Brands
NP = Non-preferred Brands

NC = Non covered drugs

Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits
GRANIX- tbo-filgrastim soln prefilled syringe 300 mcg/0.5ml, 480 mcg/0.8ml	NC				
GRANIX- tbo-filgrastim subcutaneous inj 300 mcg/ml, 480 mcg/1.6ml (300 mcg/ml)	NC				
HYDROXOCOBALAMIN- hydroxocobalamin acetate inj 1000 mcg/ml (base equivalent)	NP				
IRON UP- polysaccharide iron complex liquid 15 mg/0.5ml (fe equiv)	P				
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	P	•	•		•
NEULASTA- pegfilgrastim soln prefilled syringe 6 mg/0.6ml	NC				
NEULASTA ONPRO KIT- pegfilgrastim soln prefilled syringe kit 6 mg/0.6ml	NC				
NEUPOGEN- filgrastim inj 300 mcg/ml, 480 mcg/1.6ml (300 mcg/ml)	NC				
NEUPOGEN- filgrastim soln prefilled syringe 300 mcg/0.5ml, 480 mcg/0.8ml (600 mcg/ml)	NC				
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	•			

Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits
NOVAFERRUM PEDIATRIC DROP- polysaccharide iron complex liquid 15 mg/ml (fe equiv)	P				
NYVEPRIA- pegfilgrastim-apgf soln prefilled syringe 6 mg/0.6ml	P	•			
OXBRYTA- voxelotor tab for oral susp 300 mg	NP	•	•		•
OXBRYTA- voxelotor tab 300 mg, 500 mg	NP	•	•		•
PROCRIT- epoetin alfa inj 2000 unit/ml, 3000 unit/ml, 4000 unit/ml, 10000 unit/ml, 20000 unit/ml, 40000 unit/ml	NC				
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	NC				
RETACRIT- epoetin alfa-epbx inj 2000 unit/ml, 3000 unit/ml, 4000 unit/ml, 10000 unit/ml, 20000 unit/ml, 40000 unit/ml	P	•	•		
SIKLOS- hydroxyurea tab 100 mg, 1000 mg	NP	•			
STIMUFEND- pegfilgrastim-fpgk soln prefilled syringe 6 mg/0.6ml	NC				
UDENYCA- pegfilgrastim-cbqv soln auto-injector 6 mg/0.6ml	NC				
UDENYCA- pegfilgrastim-cbqv soln prefilled syringe 6 mg/0.6ml	NC				

p = Preferred Generics
np = Non-preferred Generics

P = Preferred Brands
NP = Non-preferred Brands

NC = Non covered drugs

Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits	Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits
UDENYCA ONBODY- pegfilgrastim-cbqv soln prefill syr/infusion dev 6 mg/0.6ml	NC					heparin sodium (porcine) inj 1000 unit/ml, 5000 unit/ml, 10000 unit/ml, 20000 unit/ml	np				
ZARXIO- filgrastim-sndz soln pre-filled syringe 300 mcg/0.5ml, 480 mcg/0.8ml	P	•				heparin sodium (porcine) pf inj 1000 unit/ml, 5000 unit/0.5ml	np				
ZIEXTENZO- pegfilgrastim-bmez soln pre-filled syringe 6 mg/0.6ml	NC					PRADAXA- dabigatran etexilate mesylate pellet pack 20 mg, 30 mg, 40 mg, 50 mg, 110 mg, 150 mg	NP				•
ANTICOAGULANTS											
dabigatran etexilate mesylate cap 75 mg (etexilate base eq), 110 mg (etexilate base eq), 150 mg (etexilate base eq) (Pradaxa)	np				•	SAVAYSA- edoxaban tosylate tab 15 mg (base equivalent), 30 mg (base equivalent), 60 mg (base equivalent)	NC				
ELIQUIS- apixaban tab 2.5 mg, 5 mg	P				•	warfarin sodium tab 1 mg, 2 mg, 2.5 mg, 3 mg, 4 mg, 5 mg, 6 mg, 7.5 mg, 10 mg	p				
ELIQUIS STARTER PACK- apixaban tab starter pack 5 mg	P				•	XARELTO- rivaroxaban for susp 1 mg/ml	P				•
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)	np				•	XARELTO- rivaroxaban tab 2.5 mg, 10 mg, 15 mg, 20 mg	P				•
enoxaparin sodium inj 300 mg/3ml (Lovenox)	np				•	XARELTO STARTER PACK- rivaroxaban tab starter therapy pack 15 mg & 20 mg	P				•
fondaparinux sodium subcutaneous inj 2.5 mg/0.5ml, 5 mg/0.4ml, 7.5 mg/0.6ml, 10 mg/0.8ml (Arixtra)	np				•	HEMOSTATICS					
FRAGMIN- dalteparin sodium soln pre-filled 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				•	aminocaproic acid oral soln 0.25 gm/ml (Amicar)	np				
FRAGMIN- dalteparin sodium subcutaneous soln 10000 unit/4ml, 95000 unit/3.8ml	NP				•	aminocaproic acid tab 500 mg, 1000 mg (Amicar)	np				
HEPARIN SODIUM- heparin sodium (porcine) pf inj 5000 unit/ml	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,	P	•	•		

p = Preferred Generics
np = Non-preferred Generics

P = Preferred Brands
NP = Non-preferred Brands

NC = Non covered drugs

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	•	•		
ALPHANATE- antihemophilic factor/vwf (human) for inj 250 unit, 500 unit, 1000 unit, 1500 unit, 2000 unit	P	•	•		
ALPHANINE SD- coagulation factor ix for inj 500 unit, 1000 unit, 1500 unit	P	•	•		
ALPROLIX- coagulation factor ix (recomb) (rfixfc) for inj 250 unit, 500 unit, 1000 unit, 2000 unit, 3000 unit, 4000 unit	P	•	•		
ALTUVIIIIO- antihemophilic fact rcmb fc-vwf-xten-ehtl for inj 250 unit, 500 unit, 1000 unit, 2000 unit, 3000 unit, 4000 unit	P	•	•		
anagrelide hcl cap 0.5 mg (Agrylin)	np				
anagrelide hcl cap 1 mg	np				
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	P				
CABLIVI- caplacizumab-yhdp for inj kit 11 mg	NP	•			•
cilostazol tab 50 mg, 100 mg	p				
clopidogrel bisulfate tab 75 mg (base equiv) (Plavix)	p				

Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits
COAGADEX- coagulation factor x (human) for inj 250 unit, 500 unit	P	•			
CORIFACT- factor xiii concentrate (human) for inj kit 1000-1600 unit	P	•			
dipyridamole tab 25 mg, 50 mg, 75 mg	np				
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	•	•		
EMPAVELI- pegcetacoplan subcutaneous soln 1080 mg/20ml (54 mg/ml)	P	•	•		•
ESPEROCT- antihemophilic factor recomb glycopeg-exei for inj 500 unit, 1000 unit, 1500 unit, 2000 unit, 3000 unit	P	•	•		
FABHALTA- iptacopan hcl cap 200 mg	NC				
FEIBA- antiinhibitor coagulant complex for iv soln 500 unit, 1000 unit, 2500 unit	P	•			
FIBRYGA- fibrinogen conc (human) inj approximately 1 gm (900-1300 mg)	P	•			
HAEGARDA- c1 esterase inhibitor (human) for subcutaneous inj 2000 unit, 3000 unit	P	•	•		•
HEMLIBRA- emicizumab-kxwh subcutaneous soln 12 mg/0.4ml (30 mg/ml)	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)	P	•	•		•
HEMOFIL M- antihemophilic factor (human) for inj 250 unit, 500 unit, 1000 unit, 1700 unit	P	•	•		

p = Preferred Generics
np = Non-preferred Generics

P = Preferred Brands
NP = Non-preferred Brands

NC = Non covered drugs

Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits
HUMATE-P- antihemophilic factor/vwf (human) for inj 250-600 unit, 500-1200 unit, 1000-2400 unit	P	•	•		
icatibant acetate subcutaneous soln pref syr 30 mg/3ml (Firazyr)	np	•	•		•
IDELVION- coagulation factor ix (recomb) (rix-fp) for inj 250 unit, 500 unit, 1000 unit, 2000 unit, 3500 unit	P	•	•		
IXINITY- coagulation factor ix (recombinant) for inj 250 unit, 500 unit, 1000 unit, 1500 unit, 2000 unit, 3000 unit	P	•	•		
JIVI- antihemophil fact rcmb(bdd-rfviii peg-aucl) for inj 500 unit	P	•	•		
JIVI- antihemophil fact rcmb(bdd-rfviii peg-aucl)for inj 1000 unit, 2000 unit, 3000 unit	P	•	•		
KOATE- antihemophilic factor (human) for inj 250 unit, 500 unit, 1000 unit	P	•	•		
KOATE-DVI- antihemophilic factor (human) for inj 500 unit, 1000 unit	P	•	•		
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	P	•	•		

Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits
NUWIQ- antihemophil fact rcmb(bdd-rfviii,sim) for inj kit 1000 unit, 1500 unit, 2000 unit, 2500 unit, 3000 unit, 4000 unit	P	•	•		
NUWIQ- antihemophilic fact rcmb (bdd-rfviii,sim) for inj 1000 unit, 1500 unit, 2000 unit, 2500 unit, 3000 unit, 4000 unit	P	•	•		
NUWIQ- antihemophilic factor rcmb (bdd-rfviii,sim) for inj 250 unit, 500 unit	P	•	•		
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	np				
prasugrel hcl tab 5 mg (base equiv), 10 mg (base equiv) (Effient)	np				
PROFILNINE- factor ix complex for inj 500 unit, 1000 unit, 1500 unit	P	•	•		
PYRUKYND- mitapivat sulfate tab 5 mg, 20 mg, 50 mg	NP	•	•		•
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	NP	•	•		•
REBINYN- coagulation factor ix recomb glycopegylated for inj 500 unt, 1000 unt, 2000 unt, 3000 unt	P	•	•		
RECOMBINATE- antihemophilic factor recomb (rfviii) for inj 220-400 unit, 401-800 unit, 801-1240 unit, 1241-1800 unit, 1801-2400 unit	P	•	•		
RIASTAP- fibrinogen conc (human) inj approximately 1 gm (900-1300 mg)	P	•			

p = Preferred Generics
np = Non-preferred Generics

P = Preferred Brands
NP = Non-preferred Brands

NC = Non covered drugs

Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits
RIXUBIS- coagulation factor ix (recombinant) for inj 250 unit, 500 unit, 1000 unit, 2000 unit, 3000 unit	P	•	•		
RUCONEST- c1 esterase inhibitor (recombinant) for iv inj 2100 unit	NP	•	•		•
SEVENFACT- coagulation factor viia (recom)-jncw for inj 1 mg (1000 mcg), 5 mg (5000 mcg)	NP	•	•		
TAKHZYRO- lanadelumab-flyo inj 300 mg/2ml (150 mg/ml)	P	•	•		•
TAKHZYRO- lanadelumab-flyo soln pref syringe 150 mg/ml, 300 mg/2ml (150 mg/ml)	P	•	•		•
TAVALISSE- fostamatinib disodium tab 100 mg (base equivalent), 150 mg (base equivalent)	NP	•	•		•
TAVNEOS- avacopan cap 10 mg	NC				
TRETTEN- coagulation factor xiii a-subunit for inj 2500 unit	P	•			
VONVENDI- von willebrand factor (recombinant) for inj 650 unit, 1300 unit	P	•	•		
WILATE- antihemophilic factor/vwf (human) for inj 500-500 unit kit	P	•	•		
WILATE- antihemophilic factor/vwf (human) for inj 1000-1000 unit kit	P	•	•		
XYNTHA- antihemophil fact rcmb (bdd-rfviii,mor) for inj kit 250 unit, 500 unit	P	•	•		
XYNTHA- antihemophil fact rcmb(bdd-rfviii,mor) for inj kit 1000 unit, 2000 unit	P	•	•		
XYNTHA SOLOFUSE- antihemophil fact rcmb (bdd-rfviii,mor) for inj kit 250 unit, 500 unit	P	•	•		

Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits
XYNTHA SOLOFUSE- antihemophil fact rcmb(bdd-rfviii,mor) for inj kit 1000 unit, 2000 unit, 3000 unit	P	•	•		
YOSPRALA- aspirin-omeprazole tab delayed release 81-40 mg, 325-40 mg	NP				
ZILBRYSQ- zilucoplan sodium subcutaneous soln pref syr 16.6 mg/0.416ml, 23 mg/0.574ml, 32.4 mg/0.81ml	NC				
ZONTIVITY- vorapaxar sulfate tab 2.08 mg (base equivalent)	NP				
TOPICAL PRODUCTS					
OPHTHALMIC AGENTS					
ACUVAIL- ketorolac tromethamine (pf) ophth soln 0.45%	NC				
ALOCRIAL- nedocromil sodium ophth soln 2%	NP				
ALOMIDE- Iodoxamide tromethamine ophth soln 0.1%	NP				
APRACLONIDINE- apraclonidine hcl ophth soln 0.5% (base equivalent)	NP				
ATROPINE SULFATE- atropine sulfate ophth soln 1%	NP				
atropine sulfate ophth soln 1% (Atropine sulfate)	np				
AZASITE- azithromycin ophth soln 1%	NC				
azelastine hcl ophth soln 0.05%	p				
BACITRACIN- bacitracin ophth oint 500 unit/gm	P				
bacitracin-polymyxin b ophth oint	p				
bacitracin-polymyxin-neomycin-hc ophth oint 1%	np				
bepotastine besilate ophth soln 1.5% (Bepreve)	np				

p = Preferred Generics
np = Non-preferred Generics

P = Preferred Brands
NP = Non-preferred Brands

NC = Non covered drugs

Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits
BESIVANCE- besifloxacin hcl ophth susp 0.6% (base equiv)	P				
BETAXOLOL HCL- betaxolol hcl ophth soln 0.5%	NP				
BETIMOL- timolol ophth soln 0.25%, 0.5%	NP				
BETOPTIC-S- betaxolol hcl ophth susp 0.25%	NP				
bimatoprost ophth soln 0.03%	NC				
brimonidine tartrate ophth soln 0.1% (Alphagan p)	NC				
brimonidine tartrate ophth soln 0.15% (Alphagan p)	np				
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)	NC				
bromfenac sodium ophth soln 0.075% (base equivalent) (Bromsite)	np				
bromfenac sodium ophth soln 0.09% (base equiv) (once-daily)	np				
CARTEOLOL HCL- carteolol hcl ophth soln 1%	NP				
CEQUA- cyclosporine (ophth) soln 0.09% (pf)	NC				
CILOXAN- ciprofloxacin hcl ophth oint 0.3%	NC				
ciprofloxacin hcl ophth soln 0.3% (base equivalent) (Ciloxan)	p				

Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits
CROMOLYN SODIUM- cromolyn sodium ophth soln 4%	NP				
CYCLOGYL- cyclopentolate hcl ophth soln 0.5%, 2%	NP				
CYCLOMYDRIL- cyclopentolate w/ phenylephrine ophth soln 0.2-1%	NP				
cyclopentolate hcl ophth soln 1% (Cyclogyl)	p				
cyclosporine (ophth) emulsion 0.05% (Restasis multidose)	NC				
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)	NC				
dorzolamide hcl ophth soln 2% (Trusopt)	p				
dorzolamide hcl-timolol maleate ophth soln 2-0.5% (Cosopt)	p				
dorzolamide hcl-timolol maleate pf ophth soln 2-0.5% (Cosopt pf)	np				
epinastine hcl ophth soln 0.05%	np				
ERYTHROMYCIN- erythromycin ophth oint 5 mg/gm	P				
erythromycin ophth oint 5 mg/gm	p				
EYSUVIS- loteprednol etabonate ophth susp 0.25%	P				
FLAREX- fluorometholone acetate ophth susp 0.1%	NP				
fluorometholone ophth susp 0.1% (Fml liquifilm)	np				

p = Preferred Generics
np = Non-preferred Generics

P = Preferred Brands
NP = Non-preferred Brands

NC = Non covered drugs

Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits
FLURBIPROFEN SODIUM- flurbiprofen sodium ophth soln 0.03%	NP				
FML FORTE- fluorometholone ophth susp 0.25%	NC				
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%	NC				
IOPIDINE- apraclonidine hcl ophth soln 1% (base equivalent)	NC				
IYUZEH- latanoprost (pf) ophth soln 0.005%	NC				
ketorolac tromethamine ophth soln 0.4% (Acular Is)	np				
ketorolac tromethamine ophth soln 0.5% (Acular)	p				
LACRISERT- artificial tear ophth insert	NC				
latanoprost ophth soln 0.005% (Xalatan)	p				•
LEVOBUNOLOL HCL- levobunolol hcl ophth soln 0.5%	NP				
LEVOFLOXACIN- levofloxacin ophth soln 1.5%	NP				
LOTEMAX- loteprednol etabonate ophth oint 0.5%	P				
LOTEMAX SM- loteprednol etabonate ophth gel 0.38%	P				
loteprednol etabonate ophth gel 0.5% (Lotemax)	np				
loteprednol etabonate ophth susp 0.2% (Alrex)	np				
loteprednol etabonate ophth susp 0.5% (Lotemax)	np				

Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits
LUMIGAN- bimatoprost ophth soln 0.01%	P				•
MAXIDEX- dexamethasone ophth susp 0.1%	NP				
MIEBO- perfluorohexyloctane ophth soln 1.338 gm/ml	NC				
MITOSOL- mitomycin for ophth soln kit 0.2 mg	NC				
moxifloxacin hcl ophth soln 0.5% (base equiv) (Vigamox)	np				
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	np				
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	NP				
NEOMYCIN/POLYMYXIN/HYDROC- neomycin-polymyxin-hc ophth susp	NP				
NEVANAC- nepafenac ophth susp 0.1%	NC				
ofloxacin ophth soln 0.3% (Ocuflox)	p				
olopatadine hcl ophth soln 0.1% (base equivalent), 0.2% (base equivalent)	np				
OXERVATE- cenegermin-bkbj ophth soln 0.002% (20 mcg/ml)	NP	•	•		•

p = Preferred Generics
np = Non-preferred Generics

P = Preferred Brands
NP = Non-preferred Brands

NC = Non covered drugs

Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits
phenylephrine hcl ophth soln 2.5%, 10%	np				
PHOSPHOLINE IODIDE-echothiophate iodide ophth for soln 0.125%	NC				
pilocarpine hcl ophth soln 1%, 2%, 4% (Isopto carpine)	np				
polymyxin b-trimethoprim ophth soln 10000 unit/ml-0.1% (Polytrim)	p				
PRED FORTE- prednisolone acetate ophth susp 1%	NC				
PRED MILD- prednisolone acetate ophth susp 0.12%	NC				
PREDNISOLONE ACETATE- prednisolone acetate ophth susp 1%	P				
PREDNISOLONE SODIUM PHOSP- prednisolone sodium phosphate ophth soln 1%	NP				
RESTASIS- 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 ophth soln 10% (Bleph-10)	np				
SULFACETAMIDE SODIUM/PRED-sulfacetamide sodium-prednisolone ophth soln 10-0.23(0.25)%	NP				
tafluprost preservative free (pf) ophth soln 0.0015% (Zioptan)	NC				

Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits
tetracaine hcl ophth soln 0.5%	np				
timolol maleate ophth gel forming soln 0.25%, 0.5% (Timoptic-xe)	np				
timolol maleate ophth soln 0.25%, 0.5% (Timoptic)	p				
timolol maleate ophth soln 0.5% (once-daily) (Istalol)	np				
timolol maleate preservative free ophth soln 0.25%, 0.5% (Timoptic ocudose)	np				
TOBRADEX- tobramycin-dexamethasone ophth oint 0.3-0.1%	NC				
TOBRADEX ST- tobramycin-dexamethasone ophth susp 0.3-0.05%	NP				
tobramycin ophth soln 0.3% (Tobrex)	p				
tobramycin-dexamethasone ophth susp 0.3-0.1% (Tobradex)	np				
TOBEX- tobramycin ophth oint 0.3%	NC				
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				
VERKAZIA- cyclosporine (ophth) emulsion 0.1%	NP				
VEVYE- cyclosporine (ophth) soln 0.1%	NC				
VUITY- pilocarpine hcl ophth soln 1.25%	NP				•

p = Preferred Generics
np = Non-preferred Generics

P = Preferred Brands
NP = Non-preferred Brands

NC = Non covered drugs

Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits
VYZULTA- latanoprostene bunod ophth soln 0.024%	NP				•
XDEMVY- lotilaner ophth soln 0.25%	NP			•	•
XELPROS- latanoprost ophth emulsion 0.005%	NC				
XIIDRA- lifitegrast ophth soln 5%	NC				
ZERVIAE- cetirizine hcl ophth soln 0.24% (base equiv)	NP				
ZIRGAN- ganciclovir ophth gel 0.15%	NC				
ZYLET- loteprednol etabonate-tobramycin ophth susp 0.5-0.3%	NP				
OTIC AGENTS					
acetic acid otic soln 2%	np				
CETRAXAL- ciprofloxacin hcl otic soln 0.2% (base equivalent)	NP				
CIPRO HC- ciprofloxacin-hydrocortisone otic susp 0.2-1%	NP				
CIPROFLOXACIN- ciprofloxacin hcl otic soln 0.2% (base equivalent)	NP				
ciprofloxacin-dexamethasone otic susp 0.3-0.1% (Ciprodex)	np				
CIPROFLOXACIN/FLUOCINOLON- ciprofloxacin-fluocinolone acetone (pf) otic soln 0.3-0.025%	NP				
CORTISPORIN-TC- neomycin-colistin-hc-thonzonium otic susp 3.3-3-10-0.5 mg/ml	NP				
fluocinolone acetonide (otic) oil 0.01% (Dermotic)	np				
hydrocortisone w/ acetic acid otic soln 1-2%	np				
neomycin-polymyxin-hc otic soln 1%	np				
neomycin-polymyxin-hc otic susp 3.5 mg/ml-10000 unit/ml-1%	np				

Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits
ofloxacin otic soln 0.3%	np				
OTOVEL- ciprofloxacin-fluocinolone acetone (pf) otic soln 0.3-0.025%	NP				
MOUTH/THROAT/DENTAL AGENTS					
cevimeline hcl cap 30 mg (Evoxac)	np				
chlorhexidine gluconate soln 0.12% (Peridex)	p				
clotrimazole troche 10 mg	np				
DENTA 5000 PLUS SENSITIVE- sodium fluoride-potassium nitrate paste 1.1-5%	NP				
FLUORIDEX SENSITIVITY REL- sodium fluoride-potassium nitrate paste 1.1-5%	NP				
FLUORIMAX 5000 SENSITIVE- sodium fluoride-potassium nitrate paste 1.1-5%	NP				
FRAICHE 5000 PREVI- sodium fluoride-tribasic calcium phosphate gel 1.1-3%	NP				
FRAICHE 5000 SENSITIVE- sodium fluoride-potassium nitrate gel 1.1-4.5%	NP				
lidocaine hcl viscous soln 2%	p				
nystatin susp 100000 unit/ml	p				
ORAVIG- miconazole buccal tab 50 mg (mouth-throat)	NP				
pilocarpine hcl tab 5 mg, 7.5 mg (Salagen)	np				
PREVIDENT RINSE- sodium fluoride rinse 0.2%	NP				
sodium fluoride cream 1.1% (Prevident 5000 plus)	p				
sodium fluoride gel 1.1% (0.5% f) (Prevident fluoride)	p				

p = Preferred Generics
np = Non-preferred Generics

P = Preferred Brands
NP = Non-preferred Brands

NC = Non covered drugs

Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits
sodium fluoride paste 1.1% (Prevident 5000 boost)	p				
sodium fluoride-potassium nitrate gel 1.1-5% (Prevident 5000 sensi)	p				
stannous fluoride conc 0.63%	np				
stannous fluoride gel 0.4%	np				
triamcinolone acetonide dental paste 0.1%	np				
ANORECTAL AGENTS					
ANALPRAM-HC- hydrocortisone acetate w/ pramoxine perianal cream 1-1%	NP				
ANALPRAM-HC- hydrocortisone acetate w/ pramoxine perianal lotn 2.5-1%	NP				
budesonide rectal foam 2 mg/act (Uceris)	np				
CORTIFOAM- hydrocortisone acetate perianal foam 10% (90 mg/dose)	P				
hydrocortisone acetate suppos 25 mg	np				
HYDROCORTISONE ACETATE/ PR- hydrocortisone acetate w/ pramoxine perianal cream 1-1%	NP				
hydrocortisone enema 100 mg/60ml (Cortenema)	np				
hydrocortisone perianal cream 1% (Proctocort)	np				•
hydrocortisone perianal cream 2.5% (Anusol-hc)	np				
nitroglycerin oint 0.4% (Rectiv)	np				
PROCTOFOAM HC- hydrocortisone acetate w/ pramoxine perianal foam 1-1%	NP				
DERMATOLOGICALS					

Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits
ABSORICA LD- isotretinoin micronized cap 8 mg, 16 mg, 24 mg, 32 mg	P				
acitretin cap 10 mg, 25 mg (Soriatane)	np				
acitretin cap 17.5 mg	np				
acyclovir cream 5% (Zovirax)	np				
acyclovir oint 5% (Zovirax)	np				
ADAPALENE- adapalene pads 0.1%	NP		•		
ADAPALENE- adapalene soln 0.1%	NP		•		
adapalene cream 0.1% (Differin)	np		•		
adapalene gel 0.1%	np		•		
adapalene gel 0.3% (Differin)	np		•		
adapalene-benzoyl peroxide gel 0.1-2.5% (Epiduo)	np		•		
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 dipropionate cream 0.05%	np				•
alclometasone dipropionate oint 0.05%	np				•
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				

p = Preferred Generics
np = Non-preferred Generics

P = Preferred Brands
NP = Non-preferred Brands

NC = Non covered drugs

Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits
APEXICON E- diflorasone diacetate emollient base cream 0.05%	NP				•
ARAZLO- tazarotene (acne) lotion 0.045%	NC				
azelaic acid gel 15% (Finacea)	np				
AZELEX- azelaic acid cream 20%	NP				
benzoyl peroxide-erythromycin gel 5-3% (Benzamycin)	np				
BETAMETHASONE DIPROPIONAT- betamethasone dipropionate augmented gel 0.05%	NP				•
betamethasone dipropionate augmented cream 0.05% (Diprolene af)	p				•
betamethasone dipropionate augmented lotion 0.05%	np				•
betamethasone dipropionate augmented oint 0.05% (Diprolene)	np				•
betamethasone dipropionate cream 0.05%	np				•
betamethasone dipropionate lotion 0.05%	np				•
betamethasone dipropionate oint 0.05%	np				•
betamethasone valerate aerosol foam 0.12% (Luxiq)	np				•
betamethasone valerate cream 0.1% (base equivalent)	np				•
betamethasone valerate lotion 0.1% (base equivalent)	np				•
betamethasone valerate oint 0.1% (base equivalent)	np				•
bexarotene gel 1% (Targretin)	np	•	•		
BIMZELX- bimekizumab-bkzx subcutaneous soln auto-injector 160 mg/ml	NC				

Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits
BIMZELX- bimekizumab-bkzx subcutaneous soln prefilled syr 160 mg/ml	NC				
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		•		
CALCIPOTRIENE- calcipotriene foam 0.005%	NP				
CALCIPOTRIENE- calcipotriene soln 0.005% (50 mcg/ml)	np				
calcipotriene cream 0.005% (Dovonex)	np				
calcipotriene oint 0.005%	np				
calcipotriene-betamethasone dipropionate oint 0.005-0.064% (Taclonex)	NC				
calcipotriene-betamethasone dipropionate susp 0.005-0.064% (Taclonex)	NC				
CALCITRIOL- calcitriol oint 3 mcg/gm	NP				
CARAC- fluorouracil cream 0.5%	P				•
CIBINQO- abrocitinib tab 50 mg, 100 mg, 200 mg	P	•	•		•
ciclopirox gel 0.77%	np				
ciclopirox olamine cream 0.77% (base equiv) (Loprox)	np				
ciclopirox olamine susp 0.77% (base equiv) (Loprox)	np				
ciclopirox shampoo 1% (Loprox shampoo)	np				
ciclopirox solution 8% (Penlac Nail Lacquer)	np				

p = Preferred Generics
np = Non-preferred Generics

P = Preferred Brands
NP = Non-preferred Brands

NC = Non covered drugs

Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits	Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits
clindamycin phosph-benzoyl peroxide (refrig) gel 1.2 (1)-5%	np					clobetasol propionate spray 0.05% (Clobex)	np				•
clindamycin phosphate foam 1% (Evoclin)	np					clocortolone pivalate cream 0.1% (Cloderm)	np				•
clindamycin phosphate gel 1%	np					clotrimazole cream 1%	np				
clindamycin phosphate gel 1% (Clindagel)	NC					clotrimazole soln 1%	np				
clindamycin phosphate lotion 1% (Cleocin-t)	np					clotrimazole w/ betamethasone cream 1-0.05%	p				
clindamycin phosphate soln 1%	np					CLOTRIMAZOLE/BETAMETHASON-clotrimazole w/ betamethasone lotion 1-0.05%	np				
clindamycin phosphate swab 1%	np					CORDRAN- flurandrenolide tape 4 mcg/sqcm	NP				•
clindamycin phosphate-benzoyl peroxide gel 1-5% (Benzaclin)	np					COSENTYX- secukinumab subcutaneous pref syr 150 mg/ml (300 mg dose)	P	•	•		•
clindamycin phosphate-benzoyl peroxide gel 1.2-2.5% (Acanya)	np					COSENTYX- secukinumab subcutaneous soln prefilled syringe 75 mg/0.5ml, 150 mg/ml	P	•	•		•
clindamycin phosphate-benzoyl peroxide gel 1.2-3.75% (Onexton)	np					COSENTYX SENSOREADY PEN-secukinumab subcutaneous auto-inj 150 mg/ml (300 mg dose)	P	•	•		•
clindamycin phosphate-tretinoin gel 1.2-0.025% (Ziana)	np					COSENTYX SENSOREADY PEN-secukinumab subcutaneous soln auto-injector 150 mg/ml	P	•	•		•
clobetasol propionate cream 0.05% (Temovate)	np				•	COSENTYX UNOREADY-secukinumab subcutaneous soln auto-injector 300 mg/2ml	P	•	•		•
clobetasol propionate emollient base cream 0.05%	np				•	CROTAN- crotamiton lotion 10%	NP				
clobetasol propionate emulsion foam 0.05% (Olux-e)	np				•	dapsone gel 5%, 7.5% (Aczone)	np				
clobetasol propionate foam 0.05% (Olux)	np				•	DESONIDE- desonide gel 0.05%	NP				•
clobetasol propionate gel 0.05%	np				•	desonide cream 0.05% (Desowen)	np				•
clobetasol propionate lotion 0.05% (Clobex)	np				•	desonide lotion 0.05%	np				•
clobetasol propionate oint 0.05% (Temovate)	np				•	desonide oint 0.05%	np				•
clobetasol propionate shampoo 0.05% (Clobex)	np				•	desoximetasone cream 0.05%, 0.25% (Topicort)	np				•
clobetasol propionate soln 0.05%	np				•						

p = Preferred Generics
np = Non-preferred Generics

P = Preferred Brands
NP = Non-preferred Brands

NC = Non covered drugs

Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits
desoximetasone gel 0.05% (Topicort)	np				•
desoximetasone oint 0.05%, 0.25% (Topicort)	np				•
desoximetasone spray 0.25% (Topicort)	np				•
DICLOFENAC EPOLAMINE- diclofenac epolamine patch 1.3%	NP				•
diclofenac sodium (actinic keratoses) gel 3%	np				
diclofenac sodium gel 1% (1.16% diethylamine equiv)	np				•
diclofenac sodium soln 1.5%	np				•
diclofenac sodium soln 2% (Pennsaid)	np				•
DIFFERIN- adapalene lotion 0.1%	NP		•		
DIFLORASONE DIACETATE- diflorasone diacetate cream 0.05%	NP				•
diflorasone diacetate oint 0.05%	np				•
doxepin hcl cream 5% (Prudoxin)	np		•		•
doxycycline (rosacea) cap delayed release 40 mg (Oracea)	np				
DUOBRII- halobetasol propionate- tazarotene lotion 0.01-0.045%	NP				
DUPIXENT- dupilumab subcutaneous soln pen-injector 200 mg/1.14ml, 300 mg/2ml	P	•	•		•
DUPIXENT- dupilumab subcutaneous soln prefilled syringe 200 mg/1.14ml, 300 mg/2ml	P	•	•		•
econazole nitrate cream 1%	np				
ECOZA- econazole nitrate foam 1%	NP				
ENSTILAR- calcipotriene- betamethasone dipropionate foam 0.005-0.064%	P				

Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits
EPIFOAM- pramoxine-hc aerosol foam 1-1%	NC				
EPSOLAY- benzoyl peroxide cream 5%	NC				
ERTACZO- sertaconazole nitrate cream 2%	NP				
ERY- erythromycin pads 2%	NP				
erythromycin gel 2% (Erygel)	np				
erythromycin soln 2%	np				
EUCRISA- crisaborole oint 2%	P				
EXELDERM- sulconazole nitrate cream 1%	NP				
EXELDERM- sulconazole nitrate solution 1%	NP				
FABIOR- tazarotene (acne) foam 0.1%	NC				
FILSUVEZ- birch triterpenes gel 10%	NP	•	•		
FINACEA- azelaic acid foam 15%	NC				
FLECTOR- diclofenac epolamine patch 1.3%	NP				•
fluocinolone acetonide cream 0.01%	np				•
fluocinolone acetonide cream 0.025% (Synalar)	np				•
fluocinolone acetonide oil 0.01% (body oil) (Derma-smoothe/fs bod)	np				•
fluocinolone acetonide oil 0.01% (scalp oil) (Derma-smoothe/fs sca)	np				•
fluocinolone acetone oint 0.025% (Synalar)	np				•
fluocinolone acetone soln 0.01% (Synalar)	np				•

p = Preferred Generics
np = Non-preferred Generics

P = Preferred Brands
NP = Non-preferred Brands

NC = Non covered drugs

Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits	Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits
FLUOCINONIDE- fluocinonide gel 0.05%	np				•	HYDROCORTISONE- hydrocortisone lotion 2%	np				•
fluocinonide cream 0.05%	np				•	HYDROCORTISONE- hydrocortisone lotion 2.5%	p				•
fluocinonide cream 0.1% (Vanos)	np				•	HYDROCORTISONE BUTYRATE- hydrocortisone butyrate cream 0.1%	NP				•
fluocinonide emulsified base cream 0.05%	np				•	HYDROCORTISONE BUTYRATE- hydrocortisone butyrate soln 0.1%	NP				•
fluocinonide oint 0.05%	np				•	hydrocortisone butyrate lotion 0.1% (Locoid)	np				•
fluocinonide soln 0.05%	np				•	hydrocortisone butyrate oint 0.1%	np				•
FLUOROURACIL- fluorouracil cream 0.5%	NP					hydrocortisone cream 1%	np				•
FLUOROURACIL- fluorouracil soln 2%	NP					hydrocortisone cream 2.5%	p				•
fluorouracil cream 5% (Efudex)	np					hydrocortisone oint 1%	np				•
fluorouracil soln 5%	np					hydrocortisone oint 2.5%	p				•
FLURANDRENOLIDE- flurandrenolide cream 0.05%	NP				•	hydrocortisone valerate cream 0.2%	np				•
FLURANDRENOLIDE- flurandrenolide lotion 0.05%	NP				•	hydrocortisone valerate oint 0.2%	np				•
flurandrenolide lotion 0.05% (Cordran)	np				•	HYFTOR- sirolimus gel 0.2%	NP		•		•
FLUTICASONE PROPIONATE- fluticasone propionate lotion 0.05%	NP				•	imiquimod cream 3.75% (Zyclara)	np				
fluticasone propionate cream 0.05%	p				•	imiquimod cream 5% (Aldara)	np				
fluticasone propionate oint 0.005%	np				•	IMPOYZ- clobetasol propionate cream 0.025%	NP				•
gentamicin sulfate cream 0.1%	np					isotretinoin cap 10 mg, 20 mg, 25 mg, 30 mg, 35 mg, 40 mg (Absorica)	np				
gentamicin sulfate oint 0.1%	np					ivermectin cream 1%	NC				
halcinonide cream 0.1% (Halog)	np				•	JUBLIA- efinaconazole soln 10%	P				
halobetasol propionate cream 0.05%	np				•	ketoconazole cream 2%	np				
halobetasol propionate foam 0.05% (Lexette)	np				•	ketoconazole foam 2% (Extina)	np				
halobetasol propionate oint 0.05%	np				•	ketoconazole shampoo 2%	p				
HALOG- halcinonide oint 0.1%	NP				•	KLISYRI- tirbanibulin ointment 1%	NP				
HALOG- halcinonide soln 0.1%	NP				•	lactic acid (ammonium lactate) cream 12%	np				

p = Preferred Generics
np = Non-preferred Generics

P = Preferred Brands
NP = Non-preferred Brands

NC = Non covered drugs

Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits
lactic acid (ammonium lactate) lotion 12%	np				
LICART- diclofenac epolamine patch 24hr 1.3%	NP				•
lidocaine hcl soln 4%	np		•		•
lidocaine oint 5%	np		•		•
lidocaine patch 5% (Lidoderm)	np		•		•
lidocaine-prilocaine cream 2.5-2.5%	np				•
LITFULO- ritlecitinib tosylate cap 50 mg (base equiv)	NC				
LOCOID LIPOCREAM- hydrocortisone butyrate hydrophilic lipo base cream 0.1%	NP				•
LULICONAZOLE- luliconazole cream 1%	NP				
LUZU- luliconazole cream 1%	NP				
MAFENIDE ACETATE- mafenide acetate packet for topical soln 5% (50 gm)	np				
malathion lotion 0.5% (Ovide)	np				
METHOXSALEN- methoxsalen rapid cap 10 mg	NP				
metronidazole cream 0.75% (Metrocream)	np				
metronidazole gel 0.75%	np				
metronidazole gel 1% (Metrogel)	np				
metronidazole lotion 0.75% (Metrolotion)	np				
MICONAZOLE NITRATE/ZINC O- miconazole-zinc oxide-white petrolatum oint 0.25-15-81.35%	NP				
mometasone furoate cream 0.1%	np				•
mometasone furoate oint 0.1%	p				•
mometasone furoate solution 0.1% (lotion)	np				•

Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits
mupirocin calcium cream 2%	np				
mupirocin oint 2%	p				
NAFTIFINE HCL- naftifine hcl cream 1%	NP				
naftifine hcl cream 2% (Naftin)	np				
naftifine hcl gel 2% (Naftin)	np				
NATROBA- spinosad susp 0.9%	NP				
NEO-SYNALAR- neomycin sulfate-fluocinolone acetonide cream 0.5-0.025%	NP				
NORITATE- metronidazole cream 1%	NC				
nystatin cream 100000 unit/gm	p				
nystatin oint 100000 unit/gm	p				
nystatin topical powder 100000 unit/gm	np				
nystatin-triamcinolone cream 100000-0.1 unit/gm-%	np				
nystatin-triamcinolone oint 100000-0.1 unit/gm-%	np				
OPZELURA- ruxolitinib phosphate cream 1.5%	NP		•		•
ORACEA- doxycycline (rosacea) cap delayed release 40 mg	P				
oxiconazole nitrate cream 1% (Oxistat)	np				
OXISTAT- oxiconazole nitrate lotion 1%	NP				
PANDEL- hydrocortisone probutate cream 0.1%	NP				•
PANRETIN- alitretinoin gel 0.1%	NP				
penciclovir cream 1% (Denavir)	np				
permethrin cream 5% (Elimite)	np				
pimecrolimus cream 1% (Elidel)	np				

p = Preferred Generics
np = Non-preferred Generics

P = Preferred Brands
NP = Non-preferred Brands

NC = Non covered drugs

Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits	Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits
PLIAGLIS- lidocaine-tetracaine cream 7-7%	NP		•		•	STELARA- ustekinumab soln prefilled syringe 45 mg/0.5ml, 90 mg/ml	P	•	•		•
PODOFILOX- podofilox soln 0.5%	NP					SULCONAZOLE NITRATE- sulconazole nitrate cream 1%	NP				
podofilox gel 0.5% (Condylox)	np					SULCONAZOLE NITRATE- sulconazole nitrate solution 1%	NP				
PRAMOSONE- pramoxine-hc cream 1-1%	NC					sulfacetamide sodium lotion 10% (acne) (Klaron)	np				
PRAMOSONE- pramoxine-hc lotion 1-1%, 1-2.5%	NC					SULFAMYLON- mafenide acetate cream 85 mg/gm	NP				
QBREXZA- glycopyrronium tosylate pad 2.4% (base equivalent)	NP		•		•	tacrolimus oint 0.03%, 0.1% (Protopic)	np				
REGRANEX- becaplermin gel 0.01%	NP					TALTZ- ixekizumab subcutaneous soln auto-injector 80 mg/ml	NC				
RETIN-A MICRO- tretinoin microsphere gel 0.06%	NC					TALTZ- ixekizumab subcutaneous soln prefilled syringe 80 mg/ml	NC				
RHOFADE- oxymetazoline hcl cream 1%	NC					tavaborole soln 5% (Kerydin)	NC				
SANTYL- collagenase oint 250 unit/gm	NP					TAZAROTENE- tazarotene (acne) foam 0.1%	NC				
selenium sulfide lotion 2.5%	p					tazarotene cream 0.1% (Tazorac)	np		•		
SERNIVO- betamethasone dipropionate spray emulsion 0.05% (base equiv)	NP				•	tazarotene gel 0.05%, 0.1% (Tazorac)	np		•		
SILIQ- brodalumab subcutaneous soln prefilled syringe 210 mg/1.5ml	NC					TAZORAC- tazarotene cream 0.05%	P				
silver sulfadiazine cream 1% (Silvadene)	p					TEXACORT- hydrocortisone soln 2.5%	NP				•
SKYRIZI- risankizumab-rzaa soln prefilled syringe 150 mg/ml	P	•	•		•	TOLAK- fluorouracil cream 4%	NC				
SKYRIZI PEN- risankizumab-rzaa soln auto-injector 150 mg/ml	P	•	•		•	TREMFYA- guselkumab soln pen-injector 100 mg/ml	P	•	•		•
SOOLANTRA- ivermectin cream 1%	np					TREMFYA- guselkumab soln prefilled syringe 100 mg/ml	P	•	•		•
SORILUX- calcipotriene foam 0.005%	NP					tretinoin cream 0.025%, 0.05%, 0.1% (Retin-a)	np		•		
SOTYKTU- deucravacitinib tab 6 mg	NP	•	•		•	tretinoin gel 0.01%, 0.025% (Retin-a)	np		•		
SPINOSAD- spinosad susp 0.9%	NP					tretinoin gel 0.05% (Atralin)	np		•		
STELARA- ustekinumab inj 45 mg/0.5ml	P	•	•		•						

p = Preferred Generics
np = Non-preferred Generics

P = Preferred Brands
NP = Non-preferred Brands

NC = Non covered drugs

Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits
tretinoin microsphere gel 0.04%, 0.1% (Retin-a micro)	np		•		
tretinoin microsphere gel 0.08% (Retin-a micro pump)	NC				
triamcinolone acetonide aerosol soln 0.147 mg/gm (Kenalog)	np				•
triamcinolone acetonide cream 0.025%, 0.1%, 0.5%	p				•
triamcinolone acetonide lotion 0.025%, 0.1%	np				•
triamcinolone acetonide oint 0.025%, 0.1%, 0.5%	p				•
triamcinolone acetonide oint 0.05%	np				•
TWYNEO- tretinoin-benzoyl peroxide cream 0.1-3%	NC				
ULTRAVATE- halobetasol propionate lotion 0.05%	NP				•
VALCHLOR- mechlorethamine hcl gel 0.016% (base equivalent)	P	•			
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				
WINLEVI- clascoterone cream 1%	NP				
WYNZORA- calcipotriene-betamethasone dipropionate cream 0.005-0.064%	NC				
XERESE- acyclovir-hydrocortisone cream 5-1%	NP				
ZILXI- minocycline hcl micronized foam 1.5%	P				
ZORYVE- roflumilast cream 0.3%	NC				
ZORYVE- roflumilast foam 0.3%	NC				

Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits
ZTLIDO- lidocaine patch 1.8% (36 mg)	NP		•		•
ZYCLARA PUMP- imiquimod cream 2.5%	NP				
MISCELLANEOUS PRODUCTS					
ANTIDOTES					
CHEMET- succimer cap 100 mg	P				
deferasirox granules packet 90 mg, 180 mg, 360 mg (Jadenu sprinkle)	np	•			
deferasirox tab for oral susp 125 mg, 250 mg, 500 mg (Exjade)	np	•			
deferasirox tab 90 mg, 180 mg, 360 mg (Jadenu)	np	•			
deferiprone tab 500 mg, 1000 mg (Ferriprox)	np	•			
FERRIPROX- deferiprone oral soln 100 mg/ml	NP	•			
FERRIPROX TWICE-A-DAY- deferiprone (twice daily) tab 1000 mg	NP	•			
KLOXXADO- naloxone hcl nasal spray 8 mg/0.1ml	P				
naloxone hcl inj 0.4 mg/ml, 4 mg/10ml	np				
naloxone hcl nasal spray 4 mg/0.1ml (Narcan)	np				
naloxone hcl soln prefilled syringe 2 mg/2ml	np				
NALOXONE HYDROCHLORIDE- naloxone hcl soln cartridge 0.4 mg/ml	NP				
NALOXONE HYDROCHLORIDE- naloxone hcl soln prefilled syringe 0.4 mg/ml	P				
naltrexone hcl tab 50 mg	np				

p = Preferred Generics
np = Non-preferred Generics

P = Preferred Brands
NP = Non-preferred Brands

NC = Non covered drugs

Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits	Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits
OPVEE- nalmefene hcl nasal spray 2.7 mg/0.1ml (base equiv)	P					AGAMATRIX JAZZ TEST STRIP- glucose blood test strip	NC				
VISTOGARD- uridine triacetate oral granules packet 10 gm	NP	•				AGAMATRIX KEYNOTE TEST ST- glucose blood test strip	NC				
ZIMHI- naloxone hcl soln prefilled syringe 5 mg/0.5ml	NP					AGAMATRIX PRESTO TEST STR- glucose blood test strip	NC				
DIAGNOSTIC PRODUCTS						ASSURE II- glucose blood test strip	NC				
ACCU-CHEK AVIVA PLUS- glucose blood test strip	NC					ASSURE II CHECK STRIP- glucose blood test strip	NC				
ACCU-CHEK COMPACT STRIPS- glucose blood test strip	NC					ASSURE II TEST STRIPS- glucose blood test strip	NC				
ACCU-CHEK COMPACT TEST DR- glucose blood test strip	NC					ASSURE PLATINUM TEST STRI- glucose blood test strip	NC				
ACCU-CHEK GUIDE- glucose blood test strip	NC					ASSURE PRISM MULTI TEST S- glucose blood test strip	NC				
ACCU-CHEK GUIDE TEST STRI- glucose blood test strip	NC					ASSURE PRO TEST STRIPS- glucose blood test strip	NC				
ACCU-CHEK SMARTVIEW STRIP- glucose blood test strip	NC					ASSURE 3 TEST STRIPS- glucose blood test strip	NC				
ACCUTREND GLUCOSE- glucose blood test strip	NC					ASSURE 4 TEST STRIPS- glucose blood test strip	NC				
ADVANCE INTUITION TEST ST- glucose blood test strip	NC					AT LAST TEST STRIPS- glucose blood test strip	NC				
ADVANCE MICRO-DRAW TEST S- glucose blood test strip	NC					BINAXNOW COVID-19 AG CARD- covid-19 at home antigen test kit	NP				
ADVIN COVID-19 ANTIGEN HO- covid-19 at home antigen test kit	NP					BIOTEL CARE BLOOD GLUCOSE- glucose blood test strip	NC				
ADVOCATE REDI-CODE- glucose blood test strip	NC					BLOOD GLUCOSE TEST STRIPS- glucose blood test strip	NC				
ADVOCATE REDI-CODE+ TEST- glucose blood test strip	NC					BLULINK GLUCOSE TEST STRI- glucose blood test strip	NC				
ADVOCATE TEST STRIPS- glucose blood test strip	NC					CAREONE BLOOD GLUCOSE TES- glucose blood test strip	NC				
AGAMATRIX AMP NO CODE TES- glucose blood test strip	NC					CARESENS N BLOOD GLUCOSE- glucose blood test strip	NC				

p = Preferred Generics
np = Non-preferred Generics

P = Preferred Brands
NP = Non-preferred Brands

NC = Non covered drugs

Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits
CARESTART COVID-19 ANTIGE-covid-19 at home antigen test kit	NP				
CARETOUCH BLOOD GLUCOSE T- glucose blood test strip	NC				
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	NC				
CLEVER CHEK AUTO-CODE VOI- glucose blood test strip	NC				
CLEVER CHEK TEST STRIPS- glucose blood test strip	NC				
CLEVER CHOICE AUTO-CODE P- glucose blood test strip	NC				
CLEVER CHOICE MICRO TEST- glucose blood test strip	NC				
CLEVER CHOICE NO CODING T- glucose blood test strip	NC				
CLEVER CHOICE TALK NO COD- glucose blood test strip	NC				
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				•
COOL BLOOD GLUCOSE TEST S- glucose blood test strip	NC				
COVID-19 AG TEST- covid-19 at home antigen test kit	NP				
COVID-19 AT-HOME TEST KIT-covid-19 at home antigen test kit	NP				
COVID-19 OTC ANTIGEN TEST-covid-19 at home antigen test kit	NP				

Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits
CVS ADVANCED GLUCOSE METE- glucose blood test strip	NC				
CVS COVID-19 AT HOME TEST-covid-19 at home antigen test kit	NP				
CVS GLUCOSE METER TEST ST- glucose blood test strip	NC				
DIATHRIVE BLOOD GLUCOSE T- glucose blood test strip	NC				
DIATHRIVE+ BLOOD GLUCOSE- glucose blood test strip	NC				
DIATRUE PLUS BLOOD GLUCOS- glucose blood test strip	NC				
DUO-CARE TEST STRIPS- glucose blood test strip	NC				
EASY MAX BLOOD GLUCOSE TE- glucose blood test strip	NC				
EASY PLUS II BLOOD GLUCOS- glucose blood test strip	NC				
EASY STEP TEST STRIPS- glucose blood test strip	NC				
EASY TALK BLOOD GLUCOSE T- glucose blood test strip	NC				
EASY TALK PLUS II BLOOD G- glucose blood test strip	NC				
EASY TOUCH GLUCOSE TEST S- glucose blood test strip	NC				
EASY TOUCH HEALTHPRO GLUC- glucose blood test strip	NC				
EASY TRAK BLOOD GLUCOSE T- glucose blood test strip	NC				
EASY TRAK II BLOOD GLUCOS- glucose blood test strip	NC				
EASYGLUCO- glucose blood test strip	NC				
EASYMAX TEST STRIPS- glucose blood test strip	NC				

p = Preferred Generics
np = Non-preferred Generics

P = Preferred Brands
NP = Non-preferred Brands

NC = Non covered drugs

Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits	Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits
EASYMAX 15 TEST STRIPS- glucose blood test strip	NC					FORA D15G BLOOD GLUCOSE T- glucose blood test strip	NC				
EASYPRO BLOOD GLUCOSE TES- glucose blood test strip	NC					FORA D20 BLOOD GLUCOSE TE- glucose blood test strip	NC				
EASYPRO PLUS- glucose blood test strip	NC					FORA D40/G31 BLOOD GLUCOS- glucose blood test strip	NC				
ELEMENT COMPACT TEST STRI- glucose blood test strip	NC					FORA GD20 TEST STRIPS- glucose blood test strip	NC				
ELEMENT TEST STRIPS- glucose blood test strip	NC					FORA GD50 BLOOD GLUCOSE T- glucose blood test strip	NC				
ELLUME COVID-19 HOME TEST- covid-19 at home antigen test kit	NP					FORA GTEL BLOOD GLUCOSE T- glucose blood test strip	NC				
EMBRACE BLOOD GLUCOSE TES- glucose blood test strip	NC					FORA G20 BLOOD GLUCOSE TE- glucose blood test strip	NC				
EMBRACE EVO BLOOD GLUCOSE- glucose blood test strip	NC					FORA G30/PREMIUM V10 BLOO- glucose blood test strip	NC				
EMBRACE PRO BLOOD GLUCOSE- glucose blood test strip	NC					FORA TN'G ADVANCE PRO BLO- glucose blood test strip	NC				
EMBRACE TALK BLOOD GLUCOS- glucose blood test strip	NC					FORA TN'G/TN'G VOICE BLOO- glucose blood test strip	NC				
EMBRACE WAVE BLOOD GLUCOS- glucose blood test strip	NC					FORA V10 BLOOD GLUCOSE TE- glucose blood test strip	NC				
EQ BLOOD GLUCOSE TEST STR- glucose blood test strip	NC					FORA V12 BLOOD GLUCOSE TE- glucose blood test strip	NC				
EVENCARE BLOOD GLUCOSE TE- glucose blood test strip	NC					FORA V20 BLOOD GLUCOSE TE- glucose blood test strip	NC				
EVOLUTION AUTOCODE- glucose blood test strip	NC					FORA V30A BLOOD GLUCOSE T- glucose blood test strip	NC				
FASTEP COVID-19 ANTIGEN H- covid-19 at home antigen test kit	NP					FORA 6 CONNECT- glucose blood test strip	NC				
FIFTY50 GLUCOSE TEST STRI- glucose blood test strip	NC					FORA 6 CONNECT/GTEL BLOOD- glucose blood test strip	NC				
FLOWFLEX COVID-19 ANTIGEN- covid-19 at home antigen test kit	NP					FORACARE GD40- glucose blood test strip	NC				
FORA BLOOD GLUCOSE TEST S- glucose blood test strip	NC					FORACARE PREMIUM V10 TEST- glucose blood test strip	NC				

p = Preferred Generics
np = Non-preferred Generics

P = Preferred Brands
NP = Non-preferred Brands

NC = Non covered drugs

Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits
FORACARE TEST N GO TEST S- glucose blood test strip	NC				
FREESTYLE INSULINX BLOOD- glucose blood test strip	NC				
FREESTYLE LITE TEST STRIP- glucose blood test strip	NC				
FREESTYLE PRECISION NEO B- glucose blood test strip	NC				
FREESTYLE TEST STRIPS- glucose blood test strip	NC				
GENABIO COVID-19 RAPID SE- covid-19 at home antigen test kit	NP				
GENULTIMATE TEST STRIPS- glucose blood test strip	NC				
GE100 BLOOD GLUCOSE TEST- glucose blood test strip	NC				
GHT TEST STRIPS- glucose blood test strip	NC				
GLUCO PERFECT 3 TEST STRI- glucose blood test strip	NC				
GLUCOCARD EXPRESSION BLOO- glucose blood test strip	NC				
GLUCOCARD SHINE TEST STRI- glucose blood test strip	NC				
GLUCOCARD VITAL TEST STRI- glucose blood test strip	NC				
GLUCOCARD X-SENSOR- glucose blood test strip	NC				
GLUCOCARD 01 SENSOR PLUS- glucose blood test strip	NC				
GLUCOCOM TEST STRIPS- glucose blood test strip	NC				
GLUCONAVII BLOOD GLUCOSE- glucose blood test strip	NC				
GLUCOSE METER TEST STRIPS- glucose blood test strip	NC				

Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits
GNP EASY TOUCH GLUCOSE TE- glucose blood test strip	NC				
GNP TRUE METRIX SELF MONI- glucose blood test strip	NC				
GNP TRUETRACK BLOOD GLUCO- glucose blood test strip	NC				
GNP TRUETRACK SMART SYSTE- glucose blood test strip	NC				
GOJJI BLOOD GLUCOSE TEST- glucose blood test strip	NC				
GOODSENSE PREMIUM BLOOD G- glucose blood test strip	NC				
GOTOKNOW COVID-19 ANTIGEN- covid-19 at home antigen test kit	NP				
HW EMBRACE PRO BLOOD GLUC- glucose blood test strip	NC				
HW EMBRACE TALK BLOOD GLU- glucose blood test strip	NC				
IGLUCOSE BLOOD GLUCOSE TE- glucose blood test strip	NC				
IHEALTH COVID-19 ANTIGEN- covid-19 at home antigen test kit	NP				
IN TOUCH BLOOD GLUCOSE TE- glucose blood test strip	NC				
INDICAID COVID-19 RAPID A- covid-19 at home antigen test kit	NP				
INFINITY BLOOD GLUCOSE TE- glucose blood test strip	NC				
INFINITY VOICE- glucose blood test strip	NC				
INTELISWAB COVID-19 RAPID- covid-19 at home antigen test kit	NP				
KROGER BLOOD GLUCOSE TEST- glucose blood test strip	NC				
KROGER HEALTHPRO GLUCOSE- glucose blood test strip	NC				

p = Preferred Generics
np = Non-preferred Generics

P = Preferred Brands
NP = Non-preferred Brands

NC = Non covered drugs

Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits	Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits
KROGER PREMIUM BLOOD GLUC- glucose blood test strip	NC					ONE DROP BLOOD GLUCOSE TE- glucose blood test strip	NC				
LIBERTY NEXT GENERATION B- glucose blood test strip	NC					ONETOUCH ULTRA- glucose blood test strip	P				•
LIBERTY TEST STRIPS- glucose blood test strip	NC					ONETOUCH ULTRA TEST STRIP- glucose blood test strip	P				•
MEIJER BLOOD GLUCOSE TEST- glucose blood test strip	NC					ONETOUCH VERIO TEST STRIP- glucose blood test strip	P				•
MEIJER ESSENTIAL BLOOD GL- glucose blood test strip	NC					OPTIUMEZ TEST STRIPS- glucose blood test strip	NC				
MEIJER TRUETEST BLOOD GLU- glucose blood test strip	NC					PHARMACIST CHOICE AUTOCOD- glucose blood test strip	NC				
MEIJER TRUETRACK BLOOD GL- glucose blood test strip	NC					PHARMACIST CHOICE NO CODI- glucose blood test strip	NC				
MICRODOT TEST STRIPS- glucose blood test strip	NC					PILOT COVID-19 AT-HOME TE- covid-19 at home antigen test kit	NP				
MICRODOT XTRA TEST STRIPS- glucose blood test strip	NC					PIP BLOOD GLUCOSE TEST ST- glucose blood test strip	NC				
MM BLULINK GLUCOSE TEST S- glucose blood test strip	NC					POCKETCHEM EZ BLOOD GLUCO- glucose blood test strip	NC				
MM EASY TOUCH GLUCOSE TES- glucose blood test strip	NC					POGO AUTOMATIC TEST CARTR- glucose blood test automatic cartridge	NC				
MYGLUCOHEALTH BLOOD GLUCO- glucose blood test strip	NC					PRECISION SOF-TACT TEST S- glucose blood test strip	NC				
NEUTEK 2TEK TEST STRIPS- glucose blood test strip	NC					PRECISION XTRA BLOOD GLUC- glucose blood test strip	NC				
NOVA MAX GLUCOSE TEST STR- glucose blood test strip	NC					PREMIUM BLOOD GLUCOSE TES- glucose blood test strip	NC				
OHC COVID-19 ANTIGEN SELF- covid-19 at home antigen test kit	NP					PRO VOICE V8/V9 BLOOD GLU- glucose blood test strip	NC				
ON CALL EXPRESS BLOOD GLU- glucose blood test strip	NC					PRODIGY NO CODING BLOOD G- glucose blood test strip	NC				
ON/GO COVID-19 ANTIGEN SE- covid-19 at home antigen test kit	NP					PTS PANELS EGLU- glucose blood test strip	NC				
ON/GO ONE COVID-19 ANTIGE- covid-19 at home antigen test kit	NP										

p = Preferred Generics
np = Non-preferred Generics

P = Preferred Brands
NP = Non-preferred Brands

NC = Non covered drugs

Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits
QUICKTEK TEST STRIPS- glucose blood test strip	NC				
QUICKVUE AT-HOME COVID-19- covid-19 at home antigen test kit	NP				
QUINTET AC BLOOD GLUCOSE- glucose blood test strip	NC				
QUINTET BLOOD GLUCOSE TES- glucose blood test strip	NC				
RAPID SARS-COV-2 ANTIGEN- covid-19 at home antigen test kit	NP				
REFUAH PLUS BLOOD GLUCOSE- glucose blood test strip	NC				
RELION CONFIRM/MICRO TEST- glucose blood test strip	NC				
RELION PREMIER BLOOD GLUC- glucose blood test strip	NC				
RELION PRIME BLOOD GLUCOS- glucose blood test strip	NC				
RELION TRUE METRIX BLOOD- glucose blood test strip	NC				
RELION ULTIMA BLOOD GLUCO- glucose blood test strip	NC				
REXALL BLOOD GLUCOSE TEST- glucose blood test strip	NC				
RIGHTEST GS100 BLOOD GLUC- glucose blood test strip	NC				
RIGHTEST GS300 BLOOD GLUC- glucose blood test strip	NC				
RIGHTEST GS333 BLOOD GLUC- glucose blood test strip	NC				
RIGHTEST GS550 BLOOD GLUC- glucose blood test strip	NC				
RIGHTEST GT333 BLOOD GLUC- glucose blood test strip	NC				
SMART SENSE PREMIUM BLOOD- glucose blood test strip	NC				

Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits
SMART SENSE VALUE BLOOD G- glucose blood test strip	NC				
SMARTEST BLOOD GLUCOSE TE- glucose blood test strip	NC				
SOLUS V2 AUDIBLE TEST- glucose blood test strip	NC				
SPEEDY SWAB RAPID COVID-1- covid-19 at home antigen test kit	NP				
SUPREME TEST STRIPS- glucose blood test strip	NC				
TGT BLOOD GLUCOSE TEST ST- glucose blood test strip	NC				
TRUE FOCUS SELF MONITORIN- glucose blood test strip	NC				
TRUE METRIX BLOOD GLUCOSE- glucose blood test strip	NC				
TRUE METRIX SELF MONITORI- glucose blood test strip	NC				
TRUETEST STRIPS- glucose blood test strip	NC				
TRUETRACK BLOOD GLUCOSE T- glucose blood test strip	NC				
TRUETRACK TEST- glucose blood test strip	NC				
UNISTRIP1 GENERIC- glucose blood test strip	NC				
VERASENS BLOOD GLUCOSE TE- glucose blood test strip	NC				
VIVAGUARD INO BLOOD GLUCO- glucose blood test strip	NC				
MEDICAL DEVICES					
AEROCHAMBER HOLDING CHAMB- spacer/aerosol-holding chambers - device	P				

p = Preferred Generics
np = Non-preferred Generics

P = Preferred Brands
NP = Non-preferred Brands

NC = Non covered drugs

Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits
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 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				
AEROCHAMBER Z-STAT PLUS/S-spacer/aerosol-holding chambers - device	P				
AEROVENT PLUS HOLDING CHA-spacer/aerosol-holding chambers - device	P				
BREATHE COMFORT ANTI-STAT-spacer/aerosol-holding chambers - device	P				
BREATHE EASE/LARGE MASK-spacer/aerosol-holding chambers - device	P				

Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits
BREATHE EASE/MEDIUM MASK-spacer/aerosol-holding chambers - device	P				
BREATHE EASE/SMALL MASK-spacer/aerosol-holding chambers - device	P				
BREATHERITE VALVED MDI CH-spacer/aerosol-holding chambers - device	P				
CAYA- diaphragm arc-spring	P				
CLEVER CHOICE ANTI-STATIC-spacer/aerosol-holding chambers - device	P				
COMPACT SPACE CHAMBER/ANT-spacer/aerosol-holding chambers - device	P				
CONDOMS MALE - VARIOUS-condoms - male	P				
CONTOUR HIGH CONTROL-blood glucose calibration - liquid - high	P				
CONTOUR LOW CONTROL-blood glucose calibration - liquid - low	P				
CONTOUR NEXT CONTROL LEVE-blood glucose calibration - liquid - normal, - low	P				
CONTOUR NORMAL CONTROL-blood glucose calibration - liquid - normal	P				
DEXCOM G6 RECEIVER-continuous glucose system receiver	P			•	•
DEXCOM G6 SENSOR-continuous glucose system sensor	P			•	•
DEXCOM G6 TRANSMITTER-continuous glucose system transmitter	P			•	•

p = Preferred Generics
np = Non-preferred Generics

P = Preferred Brands
NP = Non-preferred Brands

NC = Non covered drugs

Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits
DEXCOM G7 RECEIVER- continuous glucose system receiver	P			•	•
DEXCOM G7 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	P				
FC2 FEMALE CONDOM- condoms - female	P				
FEMCAP- cervical cap 22 mm, 26 mm, 30 mm	P				
FLEXICHAMBER- spacer/aerosol-holding chambers - device	P				
FLEXICHAMBER ADULT MASK/S- spacer/aerosol-holding chamber supplies - masks	P				
FLEXICHAMBER CHILD MASK/L- spacer/aerosol-holding chamber supplies - masks	P				
FLEXICHAMBER CHILD MASK/S- spacer/aerosol-holding chamber supplies - masks	P				
FREESTYLE LIBRE 14 DAY/RE- continuous glucose system receiver	NC				
FREESTYLE LIBRE 14 DAY/SE- continuous glucose system sensor	NC				
FREESTYLE LIBRE 2/READER- continuous glucose system receiver	NC				

Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits
FREESTYLE LIBRE 2/SENSOR- continuous glucose system sensor	NC				
FREESTYLE LIBRE 3 PLUS/SE- continuous glucose system sensor	NC				
FREESTYLE LIBRE 3/READER- continuous glucose system receiver	NC				
FREESTYLE LIBRE 3/SENSOR- continuous glucose system sensor	NC				
FREESTYLE LIBRE/READER/FL- continuous glucose system receiver	NC				
INSPIREASE DRUG DELIVERY- spacer/aerosol-holding chambers - device	P				
INSPIREASE RESERVOIR BAGS- spacer/aerosol-holding chamber supplies - bags	P				
INSULIN PEN NEEDLES - VARIOUS	P				
INSULIN SYRINGES - VARIOUS	P				
LANCETS - VARIOUS	P				
MASK VORTEX/CHILD/FROG- spacer/aerosol-holding chamber supplies - masks	P				
MASK VORTEX/TODDLER/LADY- spacer/aerosol-holding chamber supplies - masks	P				
MICROCHAMBER- spacer/aerosol-holding chambers - device	P				
MICROSPACER- spacer/aerosol-holding chambers - device	P				
MISC NEEDLES AND SYRINGES - VARIOUS- needles & syringes	P				
OMNIFLEX DIAPHRAGM- diaphragms	P				
OMNIPOD DASH INTRO KIT (G- insulin infusion disposable pump kit	P		•		•

p = Preferred Generics
np = Non-preferred Generics

P = Preferred Brands
NP = Non-preferred Brands

NC = Non covered drugs

Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits	Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits
OMNIPOD DASH PODS (GEN 4)-insulin infusion disposable pump reservoir	P		•		•	PANDA MASK SMALL- spacer/aerosol-holding chamber supplies - masks	P				
OMNIPOD 5 G6 INTRO KIT (G-insulin infusion disposable pump kit	P		•		•	PEDIATRIC PANDA MASK- spacer/aerosol-holding chamber supplies - masks	P				
OMNIPOD 5 G6 PODS (GEN 5)-insulin infusion disposable pump reservoir	P		•		•	POCKET CHAMBER- spacer/aerosol-holding chambers - device	P				
ONETOUCH ULTRA CONTROL- blood glucose calibration - liquid	P					POCKET SPACER- spacer/aerosol-holding chambers - device	P				
ONETOUCH ULTRA CONTROL SO- blood glucose calibration - liquid	P					PRO COMFORT INHALER SPACE- spacer/aerosol-holding chambers - device	P				
ONETOUCH VERIO LEVEL 3 CO- blood glucose calibration - liquid	P					PROCARE SPACER CHAMBER W/- spacer/aerosol-holding chambers - device	P				
ONETOUCH VERIO LEVEL 4 CO- blood glucose calibration - liquid - high	P					PROCHAMBER VALVED HOLDING- spacer/aerosol-holding chambers - device	P				
OPTICHAMBER- spacer/aerosol-holding chambers - device	P					PURE COMFORT INHALER SPAC- spacer/aerosol-holding chambers - device	P				
OPTICHAMBER DIAMOND- spacer/aerosol-holding chambers - device	P					RITEFLO- spacer/aerosol-holding chambers - device	P				
OPTICHAMBER DIAMOND/LARGE- spacer/aerosol-holding chambers - device	P					VORTEX HOLDING CHAMBER/MA- spacer/aerosol-holding chambers - device	P				
OPTICHAMBER DIAMOND/MEDIU- spacer/aerosol-holding chambers - device	P					VORTEX VALVED HOLDING CHA- spacer/aerosol-holding chambers - device	P				
OPTICHAMBER DIAMOND/SMALL- 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	P				
PANDA MASK LARGE- spacer/aerosol-holding chamber supplies - masks	P					ASSORTED CLASSES					
PANDA MASK MEDIUM- spacer/aerosol-holding chamber supplies - masks	P					ASTAGRAF XL- tacrolimus cap er 24hr 0.5 mg, 1 mg, 5 mg	NP				

p = Preferred Generics
np = Non-preferred Generics

P = Preferred Brands
NP = Non-preferred Brands

NC = Non covered drugs

Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits
azathioprine tab 50 mg (Imuran)	np				
azathioprine tab 75 mg, 100 mg	np				
BENLYSTA- belimumab subcutaneous solution auto-injector 200 mg/ml	NP	•	•		•
BENLYSTA- belimumab subcutaneous solution prefilled syringe 200 mg/ml	NP	•	•		•
CELLCEPT- mycophenolate mofetil cap 250 mg	NP				
CELLCEPT- mycophenolate mofetil for oral susp 200 mg/ml	NP				
CELLCEPT- mycophenolate mofetil tab 500 mg	NP				
CUVRIOR- trientine tetrahydrochloride tab 300 mg	NP	•			
cyclosporine cap 25 mg, 100 mg (Sandimmune)	np				
cyclosporine modified cap 25 mg, 100 mg (Neoral)	np				
cyclosporine modified cap 50 mg	np				
cyclosporine modified oral soln 100 mg/ml (Neoral)	np				
ENSPRYNG- satralizumab-mwge subcutaneous soln pref syringe 120 mg/ml	NP	•	•		•
ENVARUSUS XR- tacrolimus tab er 24hr 0.75 mg, 1 mg, 4 mg	NP				
everolimus tab 0.25 mg, 0.5 mg, 0.75 mg, 1 mg (Zortress)	np				
IMURAN- azathioprine tab 50 mg	NP				
JOENJA- leniolisib phosphate tab 70 mg	NP	•	•		•
lenalidomide caps 2.5 mg (Revlimid)	np	•	•		•
lenalidomide cap 5 mg, 10 mg, 15 mg, 20 mg, 25 mg (Revlimid)	np	•	•		•

Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits
LOKELMA- sodium zirconium cyclosilicate for susp packet 5 gm, 10 gm	P				
LUPKYNIS- voclosporin cap 7.9 mg	NP	•	•		•
mycophenolate mofetil cap 250 mg (Cellcept)	np				
mycophenolate mofetil for oral susp 200 mg/ml (Cellcept)	np				
mycophenolate mofetil tab 500 mg (Cellcept)	np				
mycophenolate sodium tab dr 180 mg (mycophenolic acid equiv), 360 mg (mycophenolic acid equiv) (Myfortic)	np				
MYFORTIC- mycophenolate sodium tab dr 180 mg (mycophenolic acid equiv), 360 mg (mycophenolic acid equiv)	NP				
NEORAL- cyclosporine modified cap 25 mg, 100 mg	NP				
NEORAL- cyclosporine modified oral soln 100 mg/ml	NP				
penicillamine cap 250 mg (Cuprimine)	np	•			
penicillamine tab 250 mg (Depen titratabs)	np	•			
PROGRAF- tacrolimus cap 0.5 mg, 1 mg, 5 mg	NP				
PROGRAF- tacrolimus packet for susp 0.2 mg, 1 mg	NP				
RAPAMUNE- sirolimus oral soln 1 mg/ml	NP				
RAPAMUNE- sirolimus tab 0.5 mg, 1 mg, 2 mg	NP				
RESET- digital therapy application - substance use disorder	P				•

p = Preferred Generics
np = Non-preferred Generics

P = Preferred Brands
NP = Non-preferred Brands

NC = Non covered drugs

Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits
RESET NON-MONETARY CM- digital therapy application - substance use disorder	P				•
RESET-O- digital therapy application - substance use disorder	P				•
RESET-O NON-MONETARY CM- digital therapy application - substance use disorder	P				•
REVLIMID- lenalidomide caps 2.5 mg	P	•	•		•
REVLIMID- lenalidomide cap 5 mg, 10 mg, 15 mg, 20 mg, 25 mg	P	•	•		•
REZUROCK- belumosudil mesylate tab 200 mg	NP	•	•		•
SANDIMMUNE- cyclosporine cap 25 mg, 100 mg	NP				
sirolimus oral soln 1 mg/ml (Rapamune)	np				
sirolimus tab 0.5 mg, 1 mg, 2 mg (Rapamune)	np				
sodium polystyrene sulfonate oral susp 15 gm/60ml	np				
sodium polystyrene sulfonate powder	np				
tacrolimus cap 0.5 mg, 1 mg, 5 mg (Prograf)	np				
THALOMID- thalidomide cap 50 mg, 100 mg	P	•	•		•
trientine hcl cap 250 mg (Syprine)	np	•			
TRIENTINE HYDROCHLORIDE- trientine hcl cap 500 mg	NP	•			
VELTASSA- patiromer sorbitex calcium for susp packet 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	•	•		•

Drug Name	Tier Designation	Specialty	Prior Authorization	Step Therapy	Dispensing Limits
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	•	•		•
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

NC = Non covered drugs

INDEX	
A	
abacavir sulfate-lamivudine tab 600-300 mg (Epzicom).....	4
abacavir sulfate soln 20 mg/ml (base equiv) (Ziagen).....	4
abacavir sulfate tab 300 mg (base equiv) (Ziagen).....	4
ABILIFY MYCITE MAINTENANC.....	56
ABILIFY MYCITE STARTER KI.....	56
abiraterone acetate tab 250 mg, 500 mg (Zytiga).....	12
ABRILADA.....	68
ABRILADA 1-PEN KIT.....	68
ABRILADA 2-PEN KIT.....	68
ABRYSVO.....	9
ABSORICA LD.....	96
acamprosate calcium tab delayed release 333 mg.....	61
acarbose tab 25 mg, 50 mg, 100 mg (Precose).....	22
ACCRUFER.....	86
ACCU-CHEK AVIVA PLUS.....	104
ACCU-CHEK COMPACT STRIPS.....	104
ACCU-CHEK COMPACT TEST DR.....	104
ACCU-CHEK GUIDE.....	104
ACCU-CHEK GUIDE TEST STRI.....	104
ACCU-CHEK SMARTVIEW STRIP.....	104
ACCU-TREND GLUCOSE.....	104
acebutolol hcl cap 200 mg, 400 mg.....	33
ACETAMINOPHEN/CAFFEINE/DI.....	65
ACETAMINOPHEN/CODEINE.....	65
acetaminophen w/ codeine tab 300-30 mg.....	65
acetaminophen w/ codeine tab 300-60 mg.....	65
acetaminophen w/ codeine tab 300-15 mg (Tylenol/ codeine).....	65
acetazolamide cap er 12hr 500 mg.....	37
acetazolamide tab 125 mg, 250 mg.....	37
acetic acid otic soln 2%.....	95
acetylcysteine inhal soln 10%, 20%.....	42
acitretin cap 17.5 mg.....	96
acitretin cap 10 mg, 25 mg (Soriatane).....	96
ACTEMRA.....	68
ACTEMRA ACTPEN.....	68
ACTHAR.....	28
ACTHAR GEL.....	28
ACTHIB.....	9
ACTIMMUNE.....	12
ACUVAIL.....	91
acyclovir cap 200 mg.....	4
acyclovir cream 5% (Zovirax).....	96
acyclovir oint 5% (Zovirax).....	96
acyclovir susp 200 mg/5ml (Zovirax).....	4
acyclovir tab 400 mg, 800 mg.....	4
ADACEL.....	11
ADALIMUMAB-AACF (2 PEN).....	68
ADALIMUMAB-ADAZ.....	68
ADALIMUMAB-ADBM.....	68
ADALIMUMAB-ADBM CROHNS/UC.....	68
ADALIMUMAB-ADBM PSORIASIS.....	68
ADALIMUMAB-FKJP.....	68
ADAPALENE.....	96
adapalene-benzoyl peroxide gel 0.1-2.5% (Epiduo).....	96
adapalene-benzoyl peroxide gel 0.3-2.5% (Epiduo forte).....	96
adapalene cream 0.1% (Differin).....	96
adapalene gel 0.1%.....	96
adapalene gel 0.3% (Differin).....	96
ADBRY.....	96
ADDYI.....	61
adefovir dipivoxil tab 10 mg (Hepsera).....	4
ADEMPAS.....	40
ADLARITY.....	61
ADMELOG.....	25
ADMELOG SOLOSTAR.....	25
ADTHYZA.....	27
ADUHELM.....	61
ADVAIR HFA.....	43
ADVANCE INTUITION TEST ST.....	104
ADVANCE MICRO-DRAW TEST S.....	104
ADVATE.....	88
ADVIN COVID-19 ANTIGEN HO.....	104
ADVOCATE REDI-CODE.....	104
ADVOCATE REDI-CODE+ TEST.....	104
ADVOCATE TEST STRIPS.....	104
ADYNOVATE.....	88
ADZENYS XR-ODT.....	59
AEMCOLO.....	8
AEROCHAMBER HOLDING CHAMB.....	109
AEROCHAMBER MINI AEROSOL.....	110
AEROCHAMBER MV.....	110
AEROCHAMBER PLUS FLOW-VU.....	110
AEROCHAMBER PLUS FLOW VU.....	110
AEROCHAMBER PLUS FLOW-VU/.....	110
AEROCHAMBER Z-STAT PLUS/F.....	110
AEROCHAMBER Z-STAT PLUS/L.....	110
AEROCHAMBER Z-STAT PLUS/M.....	110
AEROCHAMBER Z-STAT PLUS/S.....	110
AEROCHAMBER Z-STAT PLUS V.....	110
AEROVENT PLUS HOLDING CHA.....	110
AFLURIA 2024-2025.....	9
AFLURIA QUADRIVALENT 2023.....	9
AFREZZA.....	26
AFSTYLA.....	89
AGAMATRIX AMP NO CODE TES.....	104
AGAMATRIX JAZZ TEST STRIP.....	104
AGAMATRIX KEYNOTE TEST ST.....	104
AGAMATRIX PRESTO TEST STR.....	104
AGAMREE.....	17
AIMOVIG.....	72
AIRDUO RESPICLICK 113/14.....	43
AIRDUO RESPICLICK 232/14.....	43
AIRDUO RESPICLICK 55/14.....	43
AIRSUPRA.....	43

AJOVY.....	72	amantadine hcl tab 100 mg.....	76
AKEEGA.....	12	ambrisentan tab 5 mg, 10 mg (Letairis).....	40
AKLIEF.....	96	AMCINONIDE.....	96
AKYNZEO.....	48	AMILORIDE/HYDROCHLOROTHIA.....	37
ALA-SCALP.....	96	amiloride hcl tab 5 mg.....	37
albendazole tab 200 mg (Albenza).....	8	aminocaproic acid oral soln 0.25 gm/ml (Amicar).....	88
ALBUTEROL SULFATE HFA.....	43	aminocaproic acid tab 500 mg, 1000 mg (Amicar).....	88
albuterol sulfate inhal aero 108 mcg/act (90mcg base equiv) (Proventil hfa).....	43	amiodarone hcl tab 200 mg.....	35
albuterol sulfate soln nebu 0.083% (2.5 mg/3ml).....	43	amiodarone hcl tab 100 mg, 400 mg.....	35
albuterol sulfate soln nebu 0.5% (5 mg/ml), 0.63 mg/3ml (base equiv), 1.25 mg/3ml (base equiv).....	43	amitriptyline hcl tab 100 mg, 150 mg.....	54
albuterol sulfate syrup 2 mg/5ml.....	43	amitriptyline hcl tab 10 mg, 25 mg, 50 mg, 75 mg.....	54
albuterol sulfate tab 2 mg, 4 mg.....	43	AMJEVITA.....	68
alclometasone dipropionate cream 0.05%.....	96	amlodipine besylate-atorvastatin calcium tab 2.5-10 mg, 2.5-20 mg, 2.5-40 mg.....	40
alclometasone dipropionate oint 0.05%.....	96	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).....	40
ALECENSA.....	12	amlodipine besylate-benazepril hcl cap 2.5-10 mg, 5-40 mg.....	35
ALENDRONATE SODIUM.....	28	amlodipine besylate-benazepril hcl cap 5-10 mg, 5-20 mg, 10-20 mg, 10-40 mg (Lotrel).....	35
alendronate sodium oral soln 70 mg/75ml.....	28	amlodipine besylate-olmesartan medoxomil tab 5-20 mg, 5-40 mg, 10-20 mg, 10-40 mg (Azor).....	35
alendronate sodium tab 10 mg, 35 mg.....	28	amlodipine besylate tab 2.5 mg (base equivalent), 5 mg (base equivalent), 10 mg (base equivalent) (Norvasc).....	34
alendronate sodium tab 70 mg (Fosamax).....	29	amlodipine besylate-valsartan tab 5-160 mg, 5-320 mg, 10-160 mg, 10-320 mg (Exforge).....	35
alfuzosin hcl tab er 24hr 10 mg (Uroxatral).....	53	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).....	35
ALINIA.....	8	AMONDYS 45.....	78
aliskiren fumarate tab 150 mg (base equivalent), 300 mg (base equivalent) (Tekturna).....	35	amoxapine tab 25 mg, 50 mg, 100 mg, 150 mg.....	54
ALKINDI SPRINKLE.....	18	AMOXICILLIN.....	1
ALLOPURINOL.....	73	AMOXICILLIN/CLAVULANATE P.....	1
allopurinol tab 100 mg, 300 mg (Zyloprim).....	73	amoxicillin & k clavulanate for susp 200-28.5 mg/5ml, 400-57 mg/5ml.....	1
ALLZITAL.....	64	amoxicillin & k clavulanate for susp 250-62.5 mg/5ml (Augmentin).....	1
almotriptan malate tab 6.25 mg, 12.5 mg.....	72	amoxicillin & k clavulanate for susp 600-42.9 mg/5ml (Augmentin es-600).....	1
ALOCRI.....	91	amoxicillin & k clavulanate tab 250-125 mg.....	1
ALOGLIPTIN.....	22	amoxicillin & k clavulanate tab 875-125 mg.....	1
ALOGLIPTIN/METFORMIN HCL.....	22	amoxicillin & k clavulanate tab 500-125 mg (Augmentin).....	1
ALOGLIPTIN/METFORMIN HYDR.....	22	amoxicillin (trihydrate) cap 250 mg, 500 mg.....	1
ALOGLIPTIN/PIOGLITAZONE.....	22	amoxicillin (trihydrate) for susp 125 mg/5ml, 200 mg/5ml, 250 mg/5ml, 400 mg/5ml.....	1
ALOMIDE.....	91	amoxicillin (trihydrate) tab 500 mg, 875 mg.....	1
ALORA.....	19	amphetamine-dextroamphetamine 3-bead cap er 24hr 12.5 mg, 25 mg, 37.5 mg, 50 mg (Mydayis).....	59
alosepron hcl tab 0.5 mg (base equiv), 1 mg (base equiv) (Lotronex).....	49	amphetamine-dextroamphetamine cap er 24hr 5 mg, 10 mg, 15 mg, 20 mg, 25 mg, 30 mg (Adderall xr).....	59
ALPHANATE.....	89	amphetamine-dextroamphetamine tab 7.5 mg, 10 mg, 12.5 mg, 15 mg, 20 mg, 30 mg (Adderall).....	59
ALPHANINE SD.....	89		
ALPRAZOLAM INTENSOL.....	53		
alprazolam orally disintegrating tab 0.25 mg, 0.5 mg, 1 mg, 2 mg.....	53		
alprazolam tab er 24hr 0.5 mg, 1 mg, 2 mg, 3 mg (Xanax xr).....	53		
alprazolam tab 0.25 mg, 0.5 mg, 1 mg, 2 mg (Xanax).....	53		
ALPROLIX.....	89		
ALTOPREV.....	38		
ALTRENO.....	96		
ALTUVIIIIO.....	89		
ALUNBRIG.....	12		
ALVAIZ.....	86		
ALVESCO.....	43		
amantadine hcl cap 100 mg.....	76		
amantadine hcl soln 50 mg/5ml.....	76		

amphetamine-dextroamphetamine tab 5 mg (Adderall).....	59	aspirin tab delayed release 81 mg.....	64
amphetamine sulfate tab 5 mg, 10 mg (Evekeo).....	59	ASPRUZYO SPRINKLE.....	32
ampicillin cap 500 mg.....	1	ASSURE II.....	104
AMZEEQ.....	96	ASSURE II CHECK STRIP.....	104
anagrelide hcl cap 1 mg.....	89	ASSURE II TEST STRIPS.....	104
anagrelide hcl cap 0.5 mg (Agylin).....	89	ASSURE PLATINUM TEST STRIP.....	104
ANALPRAM-HC.....	96	ASSURE PRISM MULTI TEST STRIP.....	104
anastrozole tab 1 mg (Arimidex).....	12	ASSURE PRO TEST STRIPS.....	104
ANDRODERM.....	19	ASSURE 3 TEST STRIPS.....	104
ANGELIQ.....	19	ASSURE 4 TEST STRIPS.....	104
ANNOVERA.....	20	ASTAGRAF XL.....	112
ANORO ELLIPTA.....	43	ATABEX EC.....	81
ANTIVERT.....	48	ATABEX OB.....	81
ANZEMET.....	48	atazanavir sulfate cap 150 mg (base equiv), 200 mg (base equiv), 300 mg (base equiv) (Reyataz).....	4
APADAZ.....	65	atenolol & chlorthalidone tab 50-25 mg (Tenoretic 50).....	35
APEXICON E.....	97	atenolol & chlorthalidone tab 100-25 mg (Tenoretic 100).....	35
APIDRA.....	25	atenolol tab 25 mg, 50 mg, 100 mg (Tenormin).....	33
APIDRA SOLOSTAR.....	25	AT LAST TEST STRIPS.....	104
APLENZIN.....	54	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).....	59
APOKYN.....	76	ATORVALIQ.....	38
apomorphine hcl soln cartridge 30 mg/3ml (Apokyn).....	76	atorvastatin calcium tab 10 mg (base equivalent), 20 mg (base equivalent), 40 mg (base equivalent), 80 mg (base equivalent) (Lipitor).....	38
APRACLONIDINE.....	91	atovaquone-proguanil hcl tab 62.5-25 mg, 250-100 mg (Malarone).....	7
aprepitant capsule 125 mg.....	49	atovaquone susp 750 mg/5ml (Mepron).....	8
aprepitant capsule 40 mg (Emend).....	48	ATROPINE SULFATE.....	91
aprepitant capsule 80 mg (Emend).....	49	atropine sulfate ophth soln 1% (Atropine sulfate).....	91
aprepitant capsule therapy pack 80 & 125 mg (Emend tripack).....	48	ATROVENT HFA.....	44
APTIOM.....	73	AUGMENTIN.....	1
APTIVUS.....	4	AUGTYRO.....	12
ARAKODA.....	7	AURYXIA.....	49
ARANESP ALBUMIN FREE.....	86	AUSTEDO.....	61
ARAZLO.....	97	AUSTEDO XR.....	61
ARCALYST.....	68	AUSTEDO XR PATIENT TITRAT.....	61
AREXVY.....	9	AUVELITY.....	54
arformoterol tartrate soln nebu 15 mcg/2ml (base equiv) (Brovana).....	43	AUVI-Q.....	38
ARIKAYCE.....	3	AVONEX.....	61
aripiprazole orally disintegrating tab 10 mg, 15 mg.....	56	AVONEX PEN.....	61
aripiprazole oral solution 1 mg/ml.....	56	AYVAKIT.....	12
aripiprazole tab 2 mg, 5 mg, 10 mg, 15 mg (Abilify).....	57	AZASITE.....	91
aripiprazole tab 20 mg, 30 mg (Abilify).....	57	azathioprine tab 75 mg, 100 mg.....	113
armodafinil tab 150 mg, 200 mg, 250 mg (Nuvigil).....	59	azathioprine tab 50 mg (Imuran).....	113
armodafinil tab 50 mg (Nuvigil).....	59	azelaic acid gel 15% (Finacea).....	97
ARMOUR THYROID.....	27	azelastine hcl-fluticasone prop nasal spray 137-50 mcg/act (Dymista).....	42
ARNUITY ELLIPTA.....	43	azelastine hcl nasal spray 0.1% (137 mcg/spray).....	42
asenapine maleate sl tab 2.5 mg (base equiv), 5 mg (base equiv), 10 mg (base equiv) (Saphris).....	57	azelastine hcl nasal spray 0.15% (205.5 mcg/spray).....	42
ASMANEX HFA.....	43	azelastine hcl ophth soln 0.05%.....	91
ASMANEX TWISTHALER 120 ME.....	43	AZELEX.....	97
ASMANEX TWISTHALER 30 MET.....	44		
ASMANEX TWISTHALER 60 MET.....	44		
aspirin chew tab 81 mg.....	64		
aspirin-dipyridamole cap er 12hr 25-200 mg.....	89		

AZESCO.....	81	betamethasone dipropionate oint 0.05%.....	97
AZITHROMYCIN.....	2	betamethasone valerate aerosol foam 0.12% (Luxiq).....	97
azithromycin for susp 100 mg/5ml (Zithromax).....	2	betamethasone valerate cream 0.1% (base equivalent).....	97
azithromycin for susp 200 mg/5ml (Zithromax).....	2	betamethasone valerate lotion 0.1% (base equivalent).....	97
azithromycin tab 600 mg.....	2	betamethasone valerate oint 0.1% (base equivalent).....	97
azithromycin tab 250 mg, 500 mg (Zithromax).....	2	BETASERON.....	62
AZSTARYS.....	59	BETAXOLOL HCL.....	92
B		betaxolol hcl tab 10 mg, 20 mg.....	33
BACITRACIN.....	91	bethanechol chloride tab 5 mg, 10 mg, 25 mg, 50 mg.....	51
bacitracin-polymyxin b ophth oint.....	91	BETIMOL.....	92
bacitracin-polymyxin-neomycin-hc ophth oint 1%.....	91	BETOPTIC-S.....	92
BACLOFEN.....	80	BEVESPI AEROSPHERE.....	44
baclofen susp 25 mg/5ml (Fleqsuvy).....	80	BEXAGLIFLOZIN.....	22
baclofen tab 5 mg.....	80	bexarotene cap 75 mg (Targretin).....	12
baclofen tab 10 mg, 20 mg.....	80	bexarotene gel 1% (Targretin).....	97
BAFIERTAM.....	62	BEXSERO.....	9
balsalazide disodium cap 750 mg (Colazal).....	49	bicalutamide tab 50 mg (Casodex).....	12
BALVERSA.....	12	BIJUVA.....	19
BAQSIMI ONE PACK.....	22	BIKTARVY.....	4
BAQSIMI TWO PACK.....	22	bimatoprost ophth soln 0.03%.....	92
BARACLUDGE.....	4	BIMZELX.....	97
BASAGLAR KWIKPEN.....	27	BINAXNOW COVID-19 AG CARD.....	104
BASAGLAR TEMPO PEN.....	27	BINOSTO.....	29
BAXDELA.....	3	BIOTEL CARE BLOOD GLUCOSE.....	104
BELBUCA.....	65	bismuth subcit-metronidazole-tetracycline cap 140-125-125 mg (Pylera).....	47
BELSOMRA.....	58	bisoprolol & hydrochlorothiazide tab 2.5-6.25 mg, 10-6.25 mg.....	35
benazepril & hydrochlorothiazide tab 5-6.25 mg.....	35	bisoprolol & hydrochlorothiazide tab 5-6.25 mg (Ziac).....	35
benazepril & hydrochlorothiazide tab 10-12.5 mg, 20-12.5 mg, 20-25 mg (Lotensin hct).....	35	bisoprolol fumarate tab 5 mg.....	33
benazepril hcl tab 5 mg.....	35	bisoprolol fumarate tab 10 mg.....	33
benazepril hcl tab 10 mg, 20 mg, 40 mg (Lotensin).....	35	BLOOD GLUCOSE TEST STRIPS.....	104
BENEFIX.....	89	BLULINK GLUCOSE TEST STRI.....	104
BENLYSTA.....	113	BONJESTA.....	49
BENZHYDROCODONE/ACETAMINO.....	65	BOOSTRIX.....	11
BENZNIDAZOLE.....	8	bosentan tab 62.5 mg, 125 mg (Tracleer).....	40
benzonatate cap 150 mg.....	42	BOSULIF.....	12
benzonatate cap 200 mg.....	42	BRAFTOVI.....	12
benzonatate cap 100 mg (Tessalon perles).....	42	BREATHE COMFORT ANTI-STAT.....	110
benzoyl peroxide-erythromycin gel 5-3% (Benzamycin).....	97	BREATHE EASE/LARGE MASK.....	110
benzphetamine hcl tab 50 mg.....	59	BREATHE EASE/MEDIUM MASK.....	110
benztropine mesylate tab 0.5 mg, 1 mg, 2 mg.....	76	BREATHE EASE/SMALL MASK.....	110
bepotastine besilate ophth soln 1.5% (Bepreve).....	91	BREATHERITE VALVED MDI CH.....	110
BERINERT.....	89	BRENZAVVY.....	22
BESIVANCE.....	92	BREO ELLIPTA.....	44
BESREMI.....	12	BREXAFEMME.....	4
betaine powder for oral solution (Cystadane).....	29	BREZTRI AEROSPHERE.....	44
BETAMETHASONE DIPROPIONAT.....	97	BRILINTA.....	89
betamethasone dipropionate augmented cream 0.05% (Diprolene af).....	97	brimonidine tartrate gel 0.33% (base equivalent) (Mirvaso).....	97
betamethasone dipropionate augmented lotion 0.05%.....	97	brimonidine tartrate ophth soln 0.2%.....	92
betamethasone dipropionate augmented oint 0.05% (Diprolene).....	97		
betamethasone dipropionate cream 0.05%.....	97		
betamethasone dipropionate lotion 0.05%.....	97		

brimonidine tartrate ophth soln 0.1% (Alphagan p).....	92	butalbital-acetaminophen-caff w/ cod cap 50-325-40-30 mg.....	65
brimonidine tartrate ophth soln 0.15% (Alphagan p).....	92	butalbital-acetaminophen-caff w/ cod cap 50-300-40-30 mg (Fioricet/codeine).....	65
brimonidine tartrate-timolol maleate ophth soln 0.2-0.5% (Combigan).....	92	butalbital-acetaminophen cap 50-300 mg (Butalbital/acetamino).....	65
brinzolamide ophth susp 1% (Azopt).....	92	butalbital-acetaminophen tab 50-300 mg, 50-325 mg.....	65
BRIVIACT.....	73	butalbital-aspirin-caffeine cap 50-325-40 mg (Fiorinal).....	65
bromfenac sodium ophth soln 0.075% (base equivalent) (Bromsite).....	92	butalbital-aspirin-caff w/ codeine cap 50-325-40-30 mg (Fiorinal/codeine #3).....	65
bromfenac sodium ophth soln 0.07% (base equivalent) (Prolensa).....	92	butorphanol tartrate nasal soln 10 mg/ml.....	65
bromfenac sodium ophth soln 0.09% (base equiv) (once-daily).....	92	BYDUREON BCISE.....	22
bromocriptine mesylate cap 5 mg (base equivalent) (Parlodel).....	76	BYETTA.....	22
bromocriptine mesylate tab 2.5 mg (base equivalent) (Parlodel).....	76	BYLVAY.....	50
BRONCHITOL.....	46	BYLVAY (PELLETS).....	50
BRONCHITOL TOLERANCE TEST.....	46	C	
BRUKINSA.....	12	cabergoline tab 0.5 mg.....	29
BRYHALI.....	97	CABLIVI.....	89
budesonide delayed release particles cap 3 mg (Entocort ec).....	18	CABOMETYX.....	12
budesonide-formoterol fumarate dihyd aerosol 80-4.5 mcg/act, 160-4.5 mcg/act (Symbicort).....	44	CABTREEO.....	97
budesonide inhalation susp 0.25 mg/2ml, 0.5 mg/2ml, 1 mg/2ml (Pulmicort).....	44	caffeine citrate oral soln 60 mg/3ml (10 mg/ml base equiv).....	59
budesonide rectal foam 2 mg/act (Uceris).....	96	CALCIPOTRIENE.....	97
budesonide tab er 24hr 9 mg (Uceris).....	18	calcipotriene-betamethasone dipropionate oint 0.005-0.064% (Taclonex).....	97
bumetanide tab 1 mg, 2 mg (Bumex).....	38	calcipotriene-betamethasone dipropionate susp 0.005-0.064% (Taclonex).....	97
bumetanide tab 0.5 mg (Bumex).....	37	calcipotriene cream 0.005% (Dovonex).....	97
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).....	65	calcipotriene oint 0.005%.....	97
buprenorphine hcl-naloxone hcl sl tab 2-0.5 mg (base equiv), 8-2 mg (base equiv).....	65	calcitonin (salmon) inj 200 unit/ml (Miacalcin).....	29
buprenorphine hcl sl tab 2 mg (base equiv), 8 mg (base equiv).....	65	calcitonin (salmon) nasal soln 200 unit/act.....	29
buprenorphine td patch weekly 5 mcg/hr, 7.5 mcg/hr, 10 mcg/hr, 15 mcg/hr, 20 mcg/hr (Butrans).....	65	CALCITRIOL.....	97
bupropion hcl (smoking deterrent) tab er 12hr 150 mg.....	62	calcitriol cap 0.25 mcg (Rocaltrol).....	29
bupropion hcl tab er 12hr 100 mg, 150 mg, 200 mg (Wellbutrin sr).....	54	calcitriol cap 0.5 mcg (Rocaltrol).....	29
bupropion hcl tab er 24hr 150 mg, 300 mg (Wellbutrin xl).....	54	calcitriol oral soln 1 mcg/ml (Rocaltrol).....	29
bupropion hcl tab 75 mg, 100 mg.....	54	calcium acetate (phosphate binder) cap 667 mg (169 mg ca).....	50
BUPROPION HYDROCHLORIDE E.....	54	calcium acetate (phosphate binder) tab 667 mg.....	50
buspirone hcl tab 7.5 mg, 30 mg.....	54	CALQUENCE.....	12
buspirone hcl tab 5 mg, 10 mg, 15 mg.....	53	CAMCEVI.....	12
butalbital-acetaminophen-caffeine cap 50-325-40 mg.....	65	CAMZYOS.....	40
butalbital-acetaminophen-caffeine cap 50-300-40 mg (Fioricet).....	65	candesartan cilexetil-hydrochlorothiazide tab 16-12.5 mg, 32-12.5 mg, 32-25 mg (Atacand hct).....	36
butalbital-acetaminophen-caffeine tab 50-325-40 mg (Esgic).....	65	candesartan cilexetil tab 4 mg, 8 mg, 16 mg, 32 mg (Atacand).....	35
		capecitabine tab 150 mg, 500 mg (Xeloda).....	12
		CAPLYTA.....	57
		CAPRELSA.....	13
		CAPTOPRIL/HYDROCHLOROTHIA.....	36
		captopril tab 12.5 mg, 25 mg, 50 mg, 100 mg.....	36
		CAPVAXIVE.....	9
		CARAC.....	97
		carbamazepine cap er 12hr 100 mg, 200 mg, 300 mg (Carbatrol).....	73

carbamazepine chew tab 100 mg.....	73	cefprozil for susp 125 mg/5ml, 250 mg/5ml.....	1
carbamazepine susp 100 mg/5ml (Tegretol).....	73	cefprozil tab 250 mg, 500 mg.....	1
carbamazepine tab er 12hr 100 mg, 200 mg, 400 mg (Tegretol-xr).....	73	cefuroxime axetil tab 250 mg.....	1
carbamazepine tab 200 mg (Tegretol).....	73	cefuroxime axetil tab 500 mg.....	1
CARBATROL.....	73	celecoxib cap 50 mg, 100 mg, 200 mg (Celebrex).....	68
CARBIDOPA/LEVODOPA ODT.....	77	celecoxib cap 400 mg (Celebrex).....	68
carbidopa & levodopa tab er 25-100 mg, 50-200 mg.....	76	CELLCEPT.....	113
carbidopa & levodopa tab 25-100 mg, 25-250 mg (Sinemet).....	76	CELLTRION DIATRUST COVID-.....	105
carbidopa & levodopa tab 10-100 mg (Sinemet).....	76	CEPHALEXIN.....	1
carbidopa-levodopa-entacapone tabs 12.5-50-200 mg (Stalevo 50).....	77	cephalexin cap 250 mg, 500 mg (Keflex).....	1
carbidopa-levodopa-entacapone tabs 18.75-75-200 mg (Stalevo 75).....	77	cephalexin cap 750 mg (Keflex).....	2
carbidopa-levodopa-entacapone tabs 25-100-200 mg (Stalevo 100).....	77	cephalexin for susp 125 mg/5ml.....	2
carbidopa-levodopa-entacapone tabs 31.25-125-200 mg (Stalevo 125).....	77	cephalexin for susp 250 mg/5ml.....	2
carbidopa-levodopa-entacapone tabs 37.5-150-200 mg (Stalevo 150).....	77	CEQUA.....	92
carbidopa-levodopa-entacapone tabs 50-200-200 mg (Stalevo 200).....	77	CERDELGA.....	86
carbidopa tab 25 mg (Lodosyn).....	76	CERVIDIL.....	28
CARBINOXAMINE MALEATE.....	41	cetirizine hcl oral soln 1 mg/ml (5 mg/5ml).....	41
carbinoxamine maleate tab 4 mg.....	41	CETRAXAL.....	95
carbonyl iron susp 15 mg/1.25ml (elemental iron).....	86	cetorelix acetate for inj kit 0.25 mg (Cetrotide).....	29
CARDURA XL.....	53	cevimeline hcl cap 30 mg (Evovac).....	95
CAREONE BLOOD GLUCOSE TES.....	104	CHEMET.....	103
CARESENS N BLOOD GLUCOSE.....	104	CHENODAL.....	50
CARESTART COVID-19 ANTIGE.....	105	CHLORDIAZEPOXIDE/AMITRIPT.....	62
CARETOUCH BLOOD GLUCOSE T.....	105	chlordiazepoxide hcl cap 5 mg, 10 mg, 25 mg.....	54
carglumic acid soluble tab 200 mg (Carbaglu).....	29	chlordiazepoxide hcl-clidinium bromide cap 5-2.5 mg (Librax).....	47
carisoprodol tab 250 mg, 350 mg (Soma).....	81	chlorhexidine gluconate soln 0.12% (Peridex).....	95
CARTEOLOL HCL.....	92	chloroquine phosphate tab 250 mg, 500 mg.....	7
carvedilol phosphate cap er 24hr 10 mg, 20 mg, 40 mg, 80 mg (Coreg cr).....	33	chlorpromazine hcl tab 10 mg, 25 mg, 50 mg, 100 mg, 200 mg.....	57
carvedilol tab 3.125 mg, 6.25 mg, 12.5 mg, 25 mg (Coreg).....	33	CHLORPROMAZINE HYDROCHLOR.....	57
CAVERJECT.....	41	chlorthalidone tab 25 mg, 50 mg.....	38
CAVERJECT IMPULSE.....	41	chlorzoxazone tab 250 mg, 375 mg, 500 mg, 750 mg.....	81
CAYA.....	110	CHOLBAM.....	50
CAYSTON.....	8	cholestyramine light powder 4 gm/dose (Questran light).....	39
CEFACLOR.....	1	cholestyramine light powder packets 4 gm.....	39
CEFACLOR ER.....	1	cholestyramine powder 4 gm/dose (Questran).....	39
CEFADROXIL.....	1	cholestyramine powder packets 4 gm (Questran).....	39
cefadroxil cap 500 mg.....	1	choline fenofibrate cap dr 45 mg (fenofibric acid equiv), 135 mg (fenofibric acid equiv) (Trilipix).....	39
cefadroxil for susp 250 mg/5ml, 500 mg/5ml.....	1	CHORIONIC GONADOTROPIN.....	29
cefdinir cap 300 mg.....	1	CIBINQO.....	97
cefdinir for susp 125 mg/5ml, 250 mg/5ml.....	1	ciclopirox gel 0.77%.....	97
cefixime cap 400 mg (Suprax).....	1	ciclopirox olamine cream 0.77% (base equiv) (Loprox).....	97
cefixime for susp 100 mg/5ml, 200 mg/5ml (Suprax).....	1	ciclopirox olamine susp 0.77% (base equiv) (Loprox).....	97
cefpodoxime proxetil for susp 50 mg/5ml, 100 mg/5ml.....	1	ciclopirox shampoo 1% (Loprox shampoo).....	97
cefpodoxime proxetil tab 100 mg, 200 mg.....	1	ciclopirox solution 8% (Penlac Nail Lacquer).....	97
		cilostazol tab 50 mg, 100 mg.....	89
		CILOXAN.....	92
		CIMDUO.....	4
		CIMETIDINE HYDROCHLORIDE.....	47
		cimetidine tab 200 mg, 300 mg, 400 mg, 800 mg.....	47
		CIMZIA.....	50

CIMZIA STARTER KIT.....	50	clindamycin phosphate swab 1%.....	98
cinacalcet hcl tab 30 mg (base equiv), 60 mg (base equiv), 90 mg (base equiv) (Sensipar).....	29	clindamycin phosphate-tretinoin gel 1.2-0.025% (Ziana).....	98
CIPRO.....	3	clindamycin phosphate vaginal cream 2% (Cleocin).....	52
CIPROFLOXACIN.....	95	clindamycin phosph-benzoyl peroxide (refrig) gel 1.2 (1)-5%.....	98
CIPROFLOXACIN/FLUOCINOLON.....	95	CLINDESSE.....	52
ciprofloxacin-dexamethasone otic susp 0.3-0.1% (Ciprodex).....	95	CLINITEST RAPID COVID-19.....	105
ciprofloxacin hcl ophth soln 0.3% (base equivalent) (Ciloxan).....	92	clobazam suspension 2.5 mg/ml (Onfi).....	73
ciprofloxacin hcl tab 750 mg (base equiv).....	3	clobazam tab 10 mg, 20 mg (Onfi).....	73
ciprofloxacin hcl tab 250 mg (base equiv), 500 mg (base equiv) (Cipro).....	3	clobetasol propionate cream 0.05% (Temovate).....	98
CIPRO HC.....	95	clobetasol propionate emollient base cream 0.05%.....	98
CITALOPRAM HYDROBROMIDE.....	54	clobetasol propionate emulsion foam 0.05% (Oluxe).....	98
citalopram hydrobromide oral soln 10 mg/5ml.....	54	clobetasol propionate foam 0.05% (Olux).....	98
citalopram hydrobromide tab 10 mg (base equiv), 20 mg (base equiv), 40 mg (base equiv) (Celexa).....	54	clobetasol propionate gel 0.05%.....	98
CITRANATAL ASSURE.....	81	clobetasol propionate lotion 0.05% (Clobex).....	98
CITRANATAL B-CALM.....	81	clobetasol propionate oint 0.05% (Temovate).....	98
CITRANATAL 90 DHA.....	82	clobetasol propionate shampoo 0.05% (Clobex).....	98
CITRANATAL HARMONY.....	82	clobetasol propionate soln 0.05%.....	98
CITRANATAL MEDLEY.....	82	clobetasol propionate spray 0.05% (Clobex).....	98
CLARINEX-D 12 HOUR.....	43	clocortolone pivalate cream 0.1% (Cloderm).....	98
CLARITHROMYCIN.....	2	CLOMID.....	29
clarithromycin tab er 24hr 500 mg.....	2	clomipramine hcl cap 25 mg, 50 mg, 75 mg (Anafranil).....	54
clarithromycin tab 250 mg, 500 mg.....	2	clonazepam orally disintegrating tab 0.125 mg, 0.25 mg, 0.5 mg, 1 mg, 2 mg.....	73
CLEARDETECT COVID-19 ANTI.....	105	clonazepam tab 0.5 mg, 1 mg, 2 mg (Klonopin).....	73
CLEMASTINE FUMARATE.....	41	clonidine hcl tab er 12hr 0.1 mg (Kapvay).....	59
clemastine fumarate syrup 0.67 mg/5ml (0.5 mg/5ml base eq).....	42	clonidine hcl tab 0.1 mg, 0.2 mg, 0.3 mg (Catapres).....	36
CLENPIQ.....	46	CLONIDINE HYDROCHLORIDE E.....	36
CLEOCIN.....	52	clonidine td patch weekly 0.1 mg/24hr (Catapres-tts-1).....	36
CLEVER CHEK AUTO-CODE TES.....	105	clonidine td patch weekly 0.2 mg/24hr (Catapres-tts-2).....	36
CLEVER CHEK AUTO-CODE VOI.....	105	clonidine td patch weekly 0.3 mg/24hr (Catapres-tts-3).....	36
CLEVER CHEK TEST STRIPS.....	105	clopidogrel bisulfate tab 75 mg (base equiv) (Plavix).....	89
CLEVER CHOICE ANTI-STATIC.....	110	clorazepate dipotassium tab 3.75 mg, 15 mg.....	54
CLEVER CHOICE AUTO-CODE P.....	105	clorazepate dipotassium tab 7.5 mg (Tranxene t).....	54
CLEVER CHOICE MICRO TEST.....	105	CLOTRIMAZOLE/BETAMETHASON.....	98
CLEVER CHOICE NO CODING T.....	105	clotrimazole cream 1%.....	98
CLEVER CHOICE TALK NO COD.....	105	clotrimazole soln 1%.....	98
CLIMARA PRO.....	19	clotrimazole troche 10 mg.....	95
clindamycin hcl cap 75 mg, 150 mg, 300 mg (Cleocin).....	8	clotrimazole w/ betamethasone cream 1-0.05%.....	98
clindamycin palmitate hcl for soln 75 mg/5ml (base equiv) (Cleocin pediatric gr).....	8	CLOZAPINE ODT.....	57
clindamycin phosphate-benzoyl peroxide gel 1.2-2.5% (Acanya).....	98	clozapine orally disintegrating tab 25 mg, 100 mg, 150 mg, 200 mg.....	57
clindamycin phosphate-benzoyl peroxide gel 1-5% (Benzaclin).....	98	clozapine tab 50 mg, 100 mg, 200 mg (Clozaril).....	57
clindamycin phosphate-benzoyl peroxide gel 1.2-3.75% (Onexton).....	98	clozapine tab 25 mg (Clozaril).....	57
clindamycin phosphate foam 1% (Evoclin).....	98	C-NATE DHA.....	81
clindamycin phosphate gel 1%.....	98	COAGADEX.....	89
clindamycin phosphate gel 1% (Clindagel).....	98	COARTEM.....	7
clindamycin phosphate lotion 1% (Cleocin-t).....	98		
clindamycin phosphate soln 1%.....	98		

CODEINE SULFATE.....	65	cromolyn sodium soln nebu 20 mg/2ml.....	44
codeine sulfate tab 30 mg (Codeine sulfate).....	65	CROTAN.....	98
colchicine cap 0.6 mg (Mitigare).....	73	CUVRIOR.....	113
colchicine tab 0.6 mg (Colcrys).....	73	CVS ADVANCED GLUCOSE METE.....	105
colchicine w/ probenecid tab 0.5-500 mg.....	73	CVS COVID-19 AT HOME TEST.....	105
colesevelam hcl packet for susp 3.75 gm (Welchol).....	39	CVS GLUCOSE METER TEST ST.....	105
colesevelam hcl tab 625 mg (Welchol).....	39	cyanocobalamin inj 1000 mcg/ml.....	86
colestipol hcl granule packets 5 gm (Colestid flavored).....	39	cyanocobalamin nasal spray 500 mcg/0.1ml (Nascobal).....	86
colestipol hcl granules 5 gm (Colestid flavored).....	39	cyclobenzaprine hcl cap er 24hr 15 mg, 30 mg (Amrix).....	81
colestipol hcl tab 1 gm (Colestid).....	39	cyclobenzaprine hcl tab 5 mg, 10 mg.....	81
COMBIPATCH.....	20	cyclobenzaprine hcl tab 7.5 mg (Fexmid).....	81
COMBIVENT RESPIMAT.....	44	CYCLOGYL.....	92
COMETRIQ.....	13	CYCLOMYDRIL.....	92
COMIRNATY 2023-24.....	9	cyclopentolate hcl ophth soln 1% (Cyclogyl).....	92
COMPACT SPACE CHAMBER/ANT.....	110	CYCLOPHOSPHAMIDE.....	13
COMPLERA.....	5	cyclophosphamide cap 25 mg, 50 mg (Cyclophosphamide).....	13
COMPLETE NATAL DHA.....	82	cycloserine cap 250 mg.....	3
COMPLETENATE.....	82	CYCLOSET.....	22
CO-NATAL FA.....	82	cyclosporine cap 25 mg, 100 mg (Sandimmune).....	113
CONCEPT DHA.....	82	cyclosporine modified cap 50 mg.....	113
CONCEPT OB.....	82	cyclosporine modified cap 25 mg, 100 mg (Neoral).....	113
CONDOMS.....	110	cyclosporine modified oral soln 100 mg/ml (Neoral).....	113
CONJUPRI.....	34	cyclosporine (ophth) emulsion 0.05% (Restasis multidose).....	92
CONTOUR BLOOD GLUCOSE TES.....	105	CYLTEZO.....	68
CONTOUR HIGH CONTROL.....	110	CYLTEZO STARTER PACKAGE F.....	69
CONTOUR LOW CONTROL.....	110	cyproheptadine hcl syrup 2 mg/5ml.....	42
CONTOUR NEXT BLOOD GLUCOS.....	105	cyproheptadine hcl tab 4 mg.....	42
CONTOUR NEXT CONTROL LEVE.....	110	CYSTADROPS.....	92
CONTOUR NORMAL CONTROL.....	110	CYSTAGON.....	53
CONTRACE.....	59	CYSTARAN.....	92
CONZIP.....	65	D	
COOL BLOOD GLUCOSE TEST S.....	105	dabigatran etexilate mesylate cap 75 mg (etexilate base eq), 110 mg (etexilate base eq), 150 mg (etexilate base eq) (Pradaxa).....	88
COPIKTRA.....	13	dalfampridine tab er 12hr 10 mg (Ampyra).....	62
CORDRAN.....	98	danazol cap 50 mg, 100 mg, 200 mg.....	19
CORIFACT.....	89	dantrolene sodium cap 100 mg.....	81
CORLANOR.....	40	dantrolene sodium cap 25 mg, 50 mg (Dantrium).....	81
CORTIFOAM.....	96	DAPAGLIFLOZIN PROPANEDIOL.....	23
CORTISONE ACETATE.....	18	dapsone gel 5%, 7.5% (Aczone).....	98
CORTISPORIN-TC.....	95	dapsone tab 25 mg, 100 mg.....	8
CORTROPHIN.....	29	DAPTACEL.....	11
COSENTYX.....	98	darifenacin hydrobromide tab er 24hr 15 mg (base equiv).....	51
COSENTYX SENSOREADY PEN.....	98	darifenacin hydrobromide tab er 24hr 7.5 mg (base equiv) (Enablex).....	51
COSENTYX UNOREADY.....	98	darunavir tab 600 mg, 800 mg (Prezista).....	5
COTELLIC.....	13	DAURISMO.....	13
COTEMPLA XR-ODT.....	59	DAYBUE.....	78
COVID-19 AG TEST.....	105	DAYVIGO.....	58
COVID-19 AT-HOME TEST KIT.....	105		
COVID-19 OTC ANTIGEN TEST.....	105		
COXANTO.....	68		
CREON.....	49		
CRESEMBA.....	4		
CRINONE.....	52		
CROMOLYN SODIUM.....	92		
cromolyn sodium oral conc 100 mg/5ml (Gastrocrom).....	50		

deferasirox granules packet 90 mg, 180 mg, 360 mg (Jadenu sprinkle).....	103	DEXCOM G6 SENSOR.....	110
deferasirox tab for oral susp 125 mg, 250 mg, 500 mg (Exjade).....	103	DEXCOM G7 SENSOR.....	111
deferasirox tab 90 mg, 180 mg, 360 mg (Jadenu).....	103	DEXCOM G6 TRANSMITTER.....	110
deferiprone tab 500 mg, 1000 mg (Ferriprox).....	103	dexlansoprazole cap delayed release 30 mg, 60 mg (Dexilant).....	47
deflazacort susp 22.75 mg/ml (Emflaza).....	18	dexmethylphenidate hcl cap er 24 hr 5 mg, 10 mg, 15 mg, 20 mg, 25 mg, 30 mg, 35 mg, 40 mg (Focalin xr).....	59
deflazacort tab 6 mg, 18 mg (Emflaza).....	18	dexmethylphenidate hcl tab 2.5 mg, 5 mg (Focalin).....	60
deflazacort tab 30 mg, 36 mg (Emflaza).....	18	dexmethylphenidate hcl tab 10 mg (Focalin).....	60
DELSTRIGO.....	5	dextroamphetamine sulfate cap er 24hr 5 mg, 10 mg, 15 mg (Dexedrine).....	60
demeclocycline hcl tab 150 mg, 300 mg.....	2	dextroamphetamine sulfate oral solution 5 mg/5ml.....	60
DENTA 5000 PLUS SENSITIVE.....	95	dextroamphetamine sulfate tab 5 mg, 10 mg.....	60
DEPO-ESTRADIOL.....	20	dextroamphetamine sulfate tab 2.5 mg, 7.5 mg, 15 mg, 20 mg, 30 mg.....	60
DEPO-SUBQ PROVERA 104.....	20	DHIVY.....	77
DERMACINRX PRETRATE.....	82	DIACOMIT.....	74
DESCOVY.....	5	DIATHRIVE+ BLOOD GLUCOSE.....	105
desipramine hcl tab 50 mg, 75 mg, 100 mg, 150 mg.....	54	DIATHRIVE BLOOD GLUCOSE T.....	105
desipramine hcl tab 10 mg, 25 mg (Norpramin).....	54	DIATRUE PLUS BLOOD GLUCOS.....	105
DESLORATADINE ODT.....	42	diazepam conc 5 mg/ml.....	54
desloratadine tab 5 mg (Clarinet).....	42	diazepam oral soln 1 mg/ml.....	54
desmopressin acetate inj 4 mcg/ml (Ddavn).....	29	DIAZEPAM RECTAL GEL.....	74
desmopressin acetate nasal spray soln 0.01% (Ddavn).....	29	diazepam rectal gel delivery system 20 mg.....	74
desmopressin acetate nasal spray soln 0.01% (refrigerated).....	29	diazepam rectal gel delivery system 10 mg (Diastat acudial).....	74
desmopressin acetate preservative free (pf) inj 4 mcg/ ml (Ddavn).....	29	diazepam tab 2 mg, 5 mg, 10 mg (Valium).....	54
desmopressin acetate tab 0.1 mg, 0.2 mg (Ddavn).....	29	diazoxide susp 50 mg/ml (Proglycem).....	23
desogest-eth estrad & eth estrad tab 0.15-0.02/0.01 mg(21/5).....	20	dichlorphenamide tab 50 mg (Keveyis).....	38
desogestrel & ethinyl estradiol tab 0.15 mg-30 mcg.....	20	DICLOFENAC EPOLAMINE.....	99
DESONIDE.....	98	diclofenac potassium cap 25 mg (Zipsor).....	69
desonide cream 0.05% (Desowen).....	98	diclofenac potassium (migraine) packet 50 mg (Cambia).....	72
desonide lotion 0.05%.....	98	diclofenac potassium tab 25 mg, 50 mg.....	69
desonide oint 0.05%.....	98	diclofenac sodium (actinic keratoses) gel 3%.....	99
desoximetasone cream 0.05%, 0.25% (Topicort).....	98	diclofenac sodium gel 1% (1.16% diethylamine equiv).....	99
desoximetasone gel 0.05% (Topicort).....	99	diclofenac sodium ophth soln 0.1%.....	92
desoximetasone oint 0.05%, 0.25% (Topicort).....	99	diclofenac sodium soln 1.5%.....	99
desoximetasone spray 0.25% (Topicort).....	99	diclofenac sodium soln 2% (Pennsaid).....	99
DESVENLAFAXINE ER.....	54	diclofenac sodium tab delayed release 25 mg.....	69
desvenlafaxine succinate tab er 24hr 25 mg (base equiv), 50 mg (base equiv), 100 mg (base equiv) (Pristiq).....	54	diclofenac sodium tab delayed release 50 mg, 75 mg.....	69
DEXABLISS.....	18	diclofenac sodium tab er 24hr 100 mg.....	69
DEXAMETHASONE.....	18	diclofenac w/ misoprostol tab delayed release 50-0.2 mg (Arthrotec 50).....	69
DEXAMETHASONE 10-DAY DOSE.....	18	diclofenac w/ misoprostol tab delayed release 75-0.2 mg (Arthrotec 75).....	69
DEXAMETHASONE 13-DAY DOSE.....	18	dicloxacin sodium cap 250 mg, 500 mg.....	1
dexamethasone elixir 0.5 mg/5ml.....	18	dicyclomine hcl cap 10 mg.....	47
DEXAMETHASONE INTENSOL.....	18	dicyclomine hcl oral soln 10 mg/5ml.....	47
DEXAMETHASONE SODIUM PHOS.....	92	dicyclomine hcl tab 20 mg.....	47
dexamethasone tab 1.5 mg, 4 mg, 6 mg.....	18	DIETHYLPROPION HCL ER.....	60
dexamethasone tab 0.5 mg, 0.75 mg, 1 mg, 2 mg.....	18	diethylpropion hcl tab 25 mg.....	60
dexamethasone tab therapy pack 1.5 mg (21).....	18		
DEXCOM G6 RECEIVER.....	110		
DEXCOM G7 RECEIVER.....	111		

DIETHYLPROPION HYDROCHLOR.....	60	DOJOLVI.....	86
DIFFERIN.....	99	donepezil hydrochloride orally disintegrating tab 5 mg, 10 mg.....	62
DIFICID.....	2	donepezil hydrochloride tab 5 mg, 10 mg (Aricept).....	62
DIFLORASONE DIACETATE.....	99	donepezil hydrochloride tab 23 mg (Aricept).....	62
diflorasone diacetate oint 0.05%.....	99	DOPTELET.....	86
diflunisal tab 500 mg.....	65	DORAL.....	58
difluprednate ophth emulsion 0.05% (Durezol).....	92	DORYX MPC.....	2
DIGOXIN.....	32	dorzolamide hcl ophth soln 2% (Trusopt).....	92
digoxin oral soln 0.05 mg/ml (Digoxin).....	32	dorzolamide hcl-timolol maleate ophth soln 2-0.5% (Cosopt).....	92
digoxin tab 125 mcg (0.125 mg), 250 mcg (0.25 mg) (Lanoxin).....	32	dorzolamide hcl-timolol maleate pf ophth soln 2-0.5% (Cosopt pf).....	92
digoxin tab 62.5 mcg (0.0625 mg) (Lanoxin).....	32	DOVATO.....	5
dihydroergotamine mesylate inj 1 mg/ml (D.h.e. 45).....	72	doxazosin mesylate tab 1 mg, 2 mg, 4 mg, 8 mg (Cardura).....	36
dihydroergotamine mesylate nasal spray 4 mg/ml (Migranal).....	72	doxepin hcl cap 10 mg, 25 mg.....	54
DILANTIN.....	74	doxepin hcl cap 50 mg, 75 mg, 100 mg, 150 mg.....	54
DILANTIN-125.....	74	doxepin hcl conc 10 mg/ml.....	54
DILANTIN INFATABS.....	74	doxepin hcl cream 5% (Prudoxin).....	99
diltiazem hcl cap er 24hr 120 mg.....	34	doxepin hcl (sleep) tab 3 mg (base equiv), 6 mg (base equiv) (Silenor).....	58
diltiazem hcl cap er 24hr 180 mg, 240 mg.....	34	doxercalciferol cap 0.5 mcg, 1 mcg, 2.5 mcg.....	29
diltiazem hcl cap er 12hr 60 mg, 90 mg, 120 mg.....	34	doxycycline hyclate cap 50 mg.....	2
diltiazem hcl coated beads cap er 24hr 120 mg, 180 mg, 240 mg (Cardizem cd).....	34	doxycycline hyclate cap 100 mg (Vibramycin).....	2
diltiazem hcl coated beads cap er 24hr 300 mg, 360 mg (Cardizem cd).....	34	DOXYCYCLINE HYCLATE DR.....	2
diltiazem hcl extended release beads cap er 24hr 240 mg, 300 mg, 360 mg, 420 mg (Tiazac).....	34	doxycycline hyclate tab delayed release 75 mg, 100 mg, 150 mg.....	2
diltiazem hcl extended release beads cap er 24hr 120 mg, 180 mg (Tiazac).....	34	doxycycline hyclate tab delayed release 50 mg, 200 mg (Doryx).....	2
diltiazem hcl tab er 24hr 120 mg, 180 mg, 240 mg, 300 mg, 360 mg, 420 mg (Cardizem la).....	34	doxycycline hyclate tab 50 mg.....	2
diltiazem hcl tab 90 mg.....	34	doxycycline hyclate tab 20 mg, 100 mg.....	2
diltiazem hcl tab 30 mg, 60 mg (Cardizem).....	34	doxycycline hyclate tab 75 mg, 150 mg (Acticlate).....	2
diltiazem hcl tab 120 mg (Cardizem).....	34	doxycycline monohydrate cap 50 mg, 100 mg.....	2
dimethyl fumarate capsule delayed release 120 mg, 240 mg (Tecfidera).....	62	doxycycline monohydrate cap 75 mg, 150 mg.....	2
dimethyl fumarate capsule dr starter pack 120 mg & 240 mg (Tecfidera starter pa).....	62	doxycycline monohydrate for susp 25 mg/5ml (Vibramycin).....	2
DIPENTUM.....	50	doxycycline monohydrate tab 50 mg, 100 mg.....	2
DIPHENHYDRAMINE HCL.....	42	doxycycline monohydrate tab 75 mg, 150 mg.....	2
DIPHENOXYLATE/ATROPINE.....	47	doxycycline (rosacea) cap delayed release 40 mg (Oracea).....	99
diphenoxylate w/ atropine tab 2.5-0.025 mg (Lomotil).....	47	doxylamine-pyridoxine tab delayed release 10-10 mg (Diclegis).....	49
dipyridamole tab 25 mg, 50 mg, 75 mg.....	89	DRIZALMA SPRINKLE.....	54
disopyramide phosphate cap 100 mg, 150 mg (Norpace).....	35	dronabinol cap 2.5 mg, 5 mg, 10 mg (Marinol).....	49
disulfiram tab 250 mg, 500 mg (Antabuse).....	62	drosiprenone-ethinyl estradiol tab 3-0.03 mg (Yasmin 28).....	21
DIURIL.....	38	drosiprenone-ethinyl estradiol tab 3-0.02 mg (Yaz).....	21
divalproex sodium cap delayed release sprinkle 125 mg (Depakote sprinkles).....	74	drosiprenone-ethinyl estrad-levomefolate tab 3-0.02-0.451 mg (Beyaz).....	21
divalproex sodium tab delayed release 125 mg, 250 mg, 500 mg (Depakote).....	74	drosiprenone-ethinyl estrad-levomefolate tab 3-0.03-0.451 mg (Safyral).....	21
divalproex sodium tab er 24 hr 250 mg, 500 mg (Depakote er).....	74	DROXIA.....	86
dofetilide cap 125 mcg (0.125 mg), 250 mcg (0.25 mg), 500 mcg (0.5 mg) (Tikosyn).....	35	droxidopa cap 100 mg, 200 mg, 300 mg (Northera).....	38
		DUAKLIR PRESSAIR.....	44
		DUAVEE.....	20

DULERA.....	44	ELEVIDYS 10.5-11.4 KG.....	78
duloxetine hcl enteric coated pellets cap 40 mg (base eq).....	55	ELEVIDYS 11.5-12.4 KG.....	78
duloxetine hcl enteric coated pellets cap 20 mg (base eq), 30 mg (base eq), 60 mg (base eq) (Cymbalta).....	55	ELEVIDYS 12.5-13.4 KG.....	78
DUOBRII.....	99	ELEVIDYS 13.5-14.4 KG.....	78
DUO-CARE TEST STRIPS.....	105	ELEVIDYS 14.5-15.4 KG.....	78
DUOPA.....	77	ELEVIDYS 15.5-16.4 KG.....	78
DUPIXENT.....	99	ELEVIDYS 16.5-17.4 KG.....	78
dutasteride cap 0.5 mg (Avodart).....	53	ELEVIDYS 17.5-18.4 KG.....	78
dutasteride-tamsulosin hcl cap 0.5-0.4 mg (Jalyn).....	53	ELEVIDYS 18.5-19.4 KG.....	78
DYANAVEL XR.....	60	ELEVIDYS 19.5-20.4 KG.....	78
E		ELEVIDYS 20.5-21.4 KG.....	78
EASIVENT.....	111	ELEVIDYS 21.5-22.4 KG.....	78
EASIVENT/MASK-LARGE.....	111	ELEVIDYS 22.5-23.4 KG.....	78
EASIVENT/MASK-MEDIUM.....	111	ELEVIDYS 23.5-24.4 KG.....	78
EASIVENT/MASK-SMALL.....	111	ELEVIDYS 24.5-25.4 KG.....	78
EASYGLUCO.....	105	ELEVIDYS 25.5-26.4 KG.....	78
EASY MAX BLOOD GLUCOSE TE.....	105	ELEVIDYS 26.5-27.4 KG.....	78
EASYMAX TEST STRIPS.....	105	ELEVIDYS 27.5-28.4 KG.....	78
EASYMAX 15 TEST STRIPS.....	106	ELEVIDYS 28.5-29.4 KG.....	78
EASY PLUS II BLOOD GLUCOS.....	105	ELEVIDYS 29.5-30.4 KG.....	78
EASYPRO BLOOD GLUCOSE TES.....	106	ELEVIDYS 30.5-31.4 KG.....	78
EASYPRO PLUS.....	106	ELEVIDYS 31.5-32.4 KG.....	79
EASY STEP TEST STRIPS.....	105	ELEVIDYS 32.5-33.4 KG.....	79
EASY TALK BLOOD GLUCOSE T.....	105	ELEVIDYS 33.5-34.4 KG.....	79
EASY TALK PLUS II BLOOD G.....	105	ELEVIDYS 34.5-35.4 KG.....	79
EASY TOUCH GLUCOSE TEST S.....	105	ELEVIDYS 35.5-36.4 KG.....	79
EASY TOUCH HEALTHPRO GLUC.....	105	ELEVIDYS 36.5-37.4 KG.....	79
EASY TRAK BLOOD GLUCOSE T.....	105	ELEVIDYS 37.5-38.4 KG.....	79
EASY TRAK II BLOOD GLUCOS.....	105	ELEVIDYS 38.5-39.4 KG.....	79
econazole nitrate cream 1%.....	99	ELEVIDYS 39.5-40.4 KG.....	79
ECOZA.....	99	ELEVIDYS 40.5-41.4 KG.....	79
EDARBI.....	36	ELEVIDYS 41.5-42.4 KG.....	79
EDARBYCLOR.....	36	ELEVIDYS 42.5-43.4 KG.....	79
EDEX.....	41	ELEVIDYS 43.5-44.4 KG.....	79
EDLUAR.....	58	ELEVIDYS 44.5-45.4 KG.....	79
EDURANT.....	5	ELEVIDYS 45.5-46.4 KG.....	79
E.E.S. 400.....	2	ELEVIDYS 46.5-47.4 KG.....	79
EFAVIRENZ.....	5	ELEVIDYS 47.5-48.4 KG.....	79
efavirenz-emtricitabine-tenofovir df tab 600-200-300 mg (Atripla).....	5	ELEVIDYS 48.5-49.4 KG.....	79
efavirenz-lamivudine-tenofovir df tab 600-300-300 mg (Symfi).....	5	ELEVIDYS 49.5-50.4 KG.....	79
efavirenz-lamivudine-tenofovir df tab 400-300-300 mg (Symfi lo).....	5	ELEVIDYS 50.5-51.4 KG.....	79
efavirenz tab 600 mg (Sustiva).....	5	ELEVIDYS 51.5-52.4 KG.....	79
EGRIFTA SV.....	29	ELEVIDYS 52.5-53.4 KG.....	79
ELEMENT COMPACT TEST STRI.....	106	ELEVIDYS 53.5-54.4 KG.....	79
ELEMENT TEST STRIPS.....	106	ELEVIDYS 54.5-55.4 KG.....	80
ELEPSIA XR.....	74	ELEVIDYS 55.5-56.4 KG.....	80
ELESTRIN.....	20	ELEVIDYS 56.5-57.4 KG.....	80
eletriptan hydrobromide tab 20 mg (base equivalent), 40 mg (base equivalent) (Relpax).....	72	ELEVIDYS 57.5-58.4 KG.....	80
ELEVIDYS 10.0-10.4 KG.....	78	ELEVIDYS 58.5-59.4 KG.....	80
		ELEVIDYS 59.5-60.4 KG.....	80
		ELEVIDYS 60.5-61.4 KG.....	80
		ELEVIDYS 61.5-62.4 KG.....	80
		ELEVIDYS 62.5-63.4 KG.....	80
		ELEVIDYS 63.5-64.4 KG.....	80
		ELEVIDYS 64.5-65.4 KG.....	80
		ELEVIDYS 65.5-66.4 KG.....	80
		ELEVIDYS 66.5-67.4 KG.....	80

ELEVIDYS 67.5-68.4 KG.....	80	EPCLUSA.....	5
ELEVIDYS 68.5-69.4 KG.....	80	EPIDIOLEX.....	74
ELEVIDYS 69.5 KG PLUS.....	80	EPIFOAM.....	99
ELIGARD.....	13	epinastine hcl ophth soln 0.05%.....	92
ELIQUIS.....	88	EPINEPHRINE.....	38
ELIQUIS STARTER PACK.....	88	epinephrine solution auto-injector 0.15 mg/0.3ml	
ELITE-OB.....	82	(1:2000) (Epipen-jr 2-pak).....	38
ELLA.....	21	epinephrine solution auto-injector 0.3 mg/0.3ml	
ELLUME COVID-19 HOME TEST.....	106	(1:1000) (Epipen 2-pak).....	38
ELMIRON.....	53	eplerenone tab 25 mg, 50 mg (Inspra).....	36
ELOCTATE.....	89	EPOGEN.....	86
ELYXYB.....	72	EPRONTIA.....	74
EMBRACE BLOOD GLUCOSE TES.....	106	EPSOLAY.....	99
EMBRACE EVO BLOOD GLUCOSE.....	106	EQ BLOOD GLUCOSE TEST STR.....	106
EMBRACE PRO BLOOD GLUCOSE.....	106	EQ SPACE CHAMBER ANTI-STA.....	111
EMBRACE TALK BLOOD GLUCOS.....	106	EQUETRO.....	57
EMBRACE WAVE BLOOD GLUCOS.....	106	ergocalciferol cap 1.25 mg (50000 unit) (Drisdol).....	81
EMCYT.....	13	ERGOLOID MESYLATES.....	62
EMEND.....	49	ERGOMAR.....	72
EMFLAZA.....	18	ERGOTAMINE TARTRATE/CAFFE.....	72
EMGALITY.....	72	ERIVEDGE.....	13
EMPAVELI.....	89	ERLEADA.....	13
EMSAM.....	55	erlotinib hcl tab 25 mg (base equivalent), 100	
emtricitabine caps 200 mg (Emtriva).....	5	mg (base equivalent), 150 mg (base equivalent)	
emtricitabine-tenofovir disoproxil fumarate tab		(Tarceva).....	13
100-150 mg, 133-200 mg, 167-250 mg, 200-300 mg		ERMEZA.....	28
(Truvada).....	5	ERTACZO.....	99
EMTRIVA.....	5	ERY.....	99
EMVERM.....	8	ERYTHROCIN STEARATE.....	2
enalapril maleate & hydrochlorothiazide tab 5-12.5		ERYTHROMYCIN.....	2
mg.....	36	ERYTHROMYCIN ETHYLSUCCINA.....	2
enalapril maleate & hydrochlorothiazide tab 10-25 mg		erythromycin ethylsuccinate for susp 200 mg/5ml	
(Vaseretic).....	36	(E.e.s. granules).....	2
enalapril maleate oral soln 1 mg/ml (Epaned).....	36	erythromycin ethylsuccinate for susp 400 mg/5ml	
enalapril maleate tab 2.5 mg, 5 mg, 10 mg, 20 mg		(Eryped 400).....	2
(Vasotec).....	36	erythromycin gel 2% (Erygel).....	99
ENBRACE HR.....	82	erythromycin ophth oint 5 mg/gm.....	92
ENBREL.....	69	erythromycin soln 2%.....	99
ENBREL MINI.....	69	erythromycin tab delayed release 250 mg, 333 mg,	
ENBREL SURECLICK.....	69	500 mg.....	2
ENCARE.....	52	erythromycin tab 250 mg, 500 mg.....	2
ENDARI.....	86	escitalopram oxalate soln 5 mg/5ml (base equiv).....	55
ENDOMETRIN.....	52	escitalopram oxalate tab 5 mg (base equiv), 10 mg	
ENGERIX-B.....	9	(base equiv), 20 mg (base equiv) (Lexapro).....	55
enoxaparin sodium inj 300 mg/3ml (Lovenox).....	88	esomeprazole magnesium cap delayed release 20 mg	
enoxaparin sodium inj soln pref syr 30 mg/0.3ml, 40		(base eq), 40 mg (base eq) (Nexium).....	47
mg/0.4ml, 60 mg/0.6ml, 80 mg/0.8ml, 100 mg/ml, 120		esomeprazole magnesium for delayed release susp	
mg/0.8ml, 150 mg/ml (Lovenox).....	88	packet 10 mg, 20 mg, 40 mg (Nexium).....	47
ENSPRYNG.....	113	ESPEROCT.....	89
ENSTILAR.....	99	estazolam tab 1 mg, 2 mg.....	58
entacapone tab 200 mg (Comtan).....	77	estradiol & norethindrone acetate tab 0.5-0.1 mg.....	20
ENTADFI.....	53	estradiol & norethindrone acetate tab 1-0.5 mg	
entecavir tab 0.5 mg, 1 mg (Baraclude).....	5	(Activella).....	20
ENTRESTO.....	40	estradiol gel 0.06% (0.75 mg/1.25 gm metered-dose	
ENTYVIO.....	50	pump) (Estrogel).....	20
ENVARUSUS XR.....	113	estradiol tab 0.5 mg, 1 mg, 2 mg (Estrace).....	20
EOHILIA.....	18		

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).....	20
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).....	20
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).....	20
estradiol vaginal cream 0.1 mg/gm (Estrace).....	52
estradiol vaginal tab 10 mcg (Vagifem).....	52
estradiol valerate im in oil 10 mg/ml, 20 mg/ml, 40 mg/ml (Delestrogen).....	20
ESTRING.....	52
eszopiclone tab 1 mg, 2 mg, 3 mg (Lunesta).....	58
ethacrynic acid tab 25 mg (Edecrin).....	38
ethambutol hcl tab 100 mg.....	3
ethambutol hcl tab 400 mg (Myambutol).....	3
ethosuximide cap 250 mg (Zarontin).....	74
ethosuximide soln 250 mg/5ml (Zarontin).....	74
ethynodiol diacetate & ethinyl estradiol tab 1 mg-35 mcg.....	21
ethynodiol diacetate & ethinyl estradiol tab 1 mg-50 mcg.....	21
etodolac cap 200 mg, 300 mg.....	69
etodolac tab er 24hr 400 mg, 500 mg, 600 mg.....	69
etodolac tab 500 mg.....	69
etodolac tab 400 mg (Lodine).....	69
etonogestrel-ethinyl estradiol va ring 0.12-0.015 mg/24hr (Nuvaring).....	21
ETOPOSIDE.....	13
etravirine tab 100 mg, 200 mg (Intelence).....	5
EUCRISA.....	99
EULEXIN.....	13
EVAMIST.....	20
EVENCARE BLOOD GLUCOSE TE.....	106
everolimus tab for oral susp 2 mg, 3 mg, 5 mg (Afinitor disperz).....	13
everolimus tab 2.5 mg, 5 mg, 7.5 mg, 10 mg (Afinitor).....	13
everolimus tab 0.25 mg, 0.5 mg, 0.75 mg, 1 mg (Zortress).....	113
EVOLUTION AUTOCODE.....	106
EVOTAZ.....	5
EVRYSDI.....	80
EXELDERM.....	99
exemestane tab 25 mg (Aromasin).....	13
EXONDYS 51.....	80
EXSERVAN.....	80
EXTAVIA.....	62
EYSUVIS.....	92
EZALLOR SPRINKLE.....	39
ezetimibe-simvastatin tab 10-10 mg, 10-20 mg, 10-40 mg, 10-80 mg (Vytorin).....	39
ezetimibe tab 10 mg (Zetia).....	39

F

FABHALTA.....	89
FABIOR.....	99
famciclovir tab 125 mg, 250 mg, 500 mg.....	5
famotidine for susp 40 mg/5ml.....	47
famotidine tab 20 mg (Pepcid).....	47
famotidine tab 40 mg (Pepcid).....	47
FANAPT.....	57
FANAPT TITRATION PACK.....	57
FARXIGA.....	23
FASENRA PEN.....	44
FASTEP COVID-19 ANTIGEN H.....	106
FC2 FEMALE CONDOM.....	111
febuxostat tab 40 mg, 80 mg (Uloric).....	73
FEIBA.....	89
felbamate susp 600 mg/5ml (Felbatol).....	74
felbamate tab 400 mg, 600 mg (Felbatol).....	74
felodipine tab er 24hr 2.5 mg, 5 mg, 10 mg.....	34
FEMCAP.....	111
FEMRING.....	52
FENOFIBRATE.....	39
fenofibrate micronized cap 67 mg, 134 mg.....	39
fenofibrate micronized cap 43 mg, 130 mg, 200 mg.....	39
fenofibrate tab 54 mg, 160 mg.....	39
fenofibrate tab 40 mg, 120 mg (Fenoglide).....	39
fenofibrate tab 48 mg, 145 mg (Tricor).....	39
FENOFIBRIC ACID.....	39
FENOPROFEN CALCIUM.....	69
fenoprofen calcium cap 400 mg (Nalfon).....	69
fenoprofen calcium tab 600 mg (Nalfon).....	69
FENTANYL CITRATE.....	65
fantanyl citrate lozenge on a handle 200 mcg, 400 mcg, 600 mcg, 800 mcg, 1200 mcg, 1600 mcg (Actiq).....	66
fantanyl td patch 72hr 37.5 mcg/hr, 62.5 mcg/hr, 87.5 mcg/hr.....	66
fantanyl td patch 72hr 12 mcg/hr, 25 mcg/hr, 50 mcg/hr, 75 mcg/hr, 100 mcg/hr (Duragesic).....	66
FENTORA.....	66
FERRIPROX.....	103
FERRIPROX TWICE-A-DAY.....	103
ferrous sulfate soln 300 mg/5ml (60 mg/5ml elemental fe).....	86
ferrous sulfate soln 75 mg/ml (15 mg/ml elemental fe), 220 mg/5ml (44 mg/5ml elemental fe).....	86
fesoterodine fumarate tab er 24hr 4 mg, 8 mg (Toviaz).....	51
FETZIMA.....	55
FETZIMA TITRATION PACK.....	55
FIASP.....	25
FIASP FLEXTOUCH.....	25
FIASP PENFILL.....	25
FIBRICOR.....	39
FIBRYGA.....	89
FIFTY50 GLUCOSE TEST STRI.....	106

FILSPARI.....	53	FLUOXETINE HYDROCHLORIDE.....	62
FILSUVEZ.....	99	FLUPHENAZINE HCL.....	57
FINACEA.....	99	fluphenazine hcl tab 1 mg, 2.5 mg, 5 mg, 10 mg.....	57
finasteride tab 5 mg (Proscar).....	53	FLUPHENAZINE HYDROCHLORID.....	57
 fingolimod hcl cap 0.5 mg (base equiv) (Gilenya).....	62	FLURANDRENOLIDE.....	100
FINTEPLA.....	74	flurandrenolide lotion 0.05% (Cordran).....	100
FIRDAPSE.....	81	FLURAZEPAM HYDROCHLORIDE.....	58
FLAREX.....	92	FLURBIPROFEN.....	69
flavoxate hcl tab 100 mg.....	51	FLURBIPROFEN SODIUM.....	93
flecainide acetate tab 50 mg, 100 mg, 150 mg.....	35	flurbiprofen tab 100 mg.....	69
FLECTOR.....	99	FLUTICASONE FUROATE/VILAN.....	44
FLEXICHAMBER.....	111	FLUTICASONE PROPIONATE.....	100
FLEXICHAMBER ADULT MASK/S.....	111	FLUTICASONE PROPIONATE/SA.....	44
FLEXICHAMBER CHILD MASK/L.....	111	fluticasone propionate cream 0.05%.....	100
FLEXICHAMBER CHILD MASK/S.....	111	FLUTICASONE PROPIONATE DI.....	44
FLOLIPID.....	39	FLUTICASONE PROPIONATE HF.....	44
FLORIVA.....	85	fluticasone propionate nasal susp 50 mcg/act.....	42
FLOWFLEX COVID-19 ANTIGEN.....	106	fluticasone propionate oint 0.005%.....	100
FLUAD 2024-2025.....	9	fluticasone-salmeterol aer powder ba 100-50 mcg/act,	44
FLUAD QUADRIVALENT 2023-2.....	9	250-50 mcg/act, 500-50 mcg/act (Advair diskus).....	44
FLUARIX 2024-2025.....	9	fluvastatin sodium cap 20 mg (base equivalent), 40	39
FLUCELVAX 2024-2025.....	9	mg (base equivalent).....	39
FLUCELVAX QUADRIVALENT 20.....	9	fluvastatin sodium tab er 24 hr 80 mg (base	39
fluconazole for susp 10 mg/ml, 40 mg/ml (Diflucan).....	4	equivalent) (Lescol xl).....	39
fluconazole tab 50 mg, 100 mg, 150 mg, 200 mg	4	fluvoxamine maleate cap er 24hr 100 mg, 150 mg.....	55
(Diflucan).....	4	fluvoxamine maleate tab 25 mg, 50 mg, 100 mg.....	55
flucytosine cap 250 mg, 500 mg (Ancobon).....	4	FML FORTE.....	93
fludrocortisone acetate tab 0.1 mg.....	18	folic acid cap 0.8 mg.....	86
FLULAVAL 2024-2025.....	9	folic acid tab 400 mcg, 800 mcg, 1 mg.....	86
FLUMIST QUADRIVALENT.....	9	FOLIVANE-OB.....	82
flunisolide nasal soln 25 mcg/act (0.025%).....	42	FOLLISTIM AQ.....	29
fluocinolone acetonide cream 0.01%.....	99	fondaparinux sodium subcutaneous inj 2.5 mg/0.5ml,	88
fluocinolone acetonide cream 0.025% (Synalar).....	99	5 mg/0.4ml, 7.5 mg/0.6ml, 10 mg/0.8ml (Arixtra).....	88
fluocinolone acetonide oil 0.01% (body oil) (Derma-	99	FORA BLOOD GLUCOSE TEST S.....	106
smoothe/fs bod).....	99	FORACARE GD40.....	106
fluocinolone acetonide oil 0.01% (scalp oil) (Derma-	99	FORACARE PREMIUM V10 TEST.....	106
smoothe/fs sca).....	99	FORACARE TEST N GO TEST S.....	107
fluocinolone acetonide oint 0.025% (Synalar).....	99	FORA 6 CONNECT.....	106
fluocinolone acetonide (otic) oil 0.01% (Dermotic).....	95	FORA 6 CONNECT/GTEL BLOOD.....	106
fluocinolone acetonide soln 0.01% (Synalar).....	99	FORA D40/G31 BLOOD GLUCOS.....	106
FLUOCINONIDE.....	100	FORA D20 BLOOD GLUCOSE TE.....	106
fluocinonide cream 0.05%.....	100	FORA D15G BLOOD GLUCOSE T.....	106
fluocinonide cream 0.1% (Vanos).....	100	FORA G30/PREMIUM V10 BLOO.....	106
fluocinonide emulsified base cream 0.05%.....	100	FORA G20 BLOOD GLUCOSE TE.....	106
fluocinonide oint 0.05%.....	100	FORA GD50 BLOOD GLUCOSE T.....	106
fluocinonide soln 0.05%.....	100	FORA GD20 TEST STRIPS.....	106
FLUORIDEX SENSITIVITY REL.....	95	FORA GTEL BLOOD GLUCOSE T.....	106
FLUORIMAX 5000 SENSITIVE.....	95	FORA TN'G/TN'G VOICE BLOO.....	106
fluorometholone ophth susp 0.1% (Fml liquifilm).....	92	FORA TN'G ADVANCE PRO BLO.....	106
FLUOROURACIL.....	100	FORA V30A BLOOD GLUCOSE T.....	106
fluorouracil cream 5% (Efudex).....	100	FORA V10 BLOOD GLUCOSE TE.....	106
fluorouracil soln 5%.....	100	FORA V12 BLOOD GLUCOSE TE.....	106
FLUOXETINE DR.....	55	FORA V20 BLOOD GLUCOSE TE.....	106
fluoxetine hcl cap 10 mg, 20 mg, 40 mg (Prozac).....	55	FORFIVO XL.....	55
fluoxetine hcl solution 20 mg/5ml.....	55	formoterol fumarate soln nebu 20 mcg/2ml	44
fluoxetine hcl tab 10 mg, 20 mg.....	55	(Perforomist).....	44
fluoxetine hcl tab 60 mg (Fluoxetine hydrochlo).....	55	FOSAMAX PLUS D.....	29

fosamprenavir calcium tab 700 mg (base equiv) (Lexiva).....	5	gefitinib tab 250 mg (Iressa)	13
fosfomycin tromethamine powd pack 3 gm (base equivalent) (Monurol).....	8	GELNIQUE.....	51
fosinopril sodium & hydrochlorothiazide tab 10-12.5 mg, 20-12.5 mg	36	gemfibrozil tab 600 mg (Lopid)	39
fosinopril sodium tab 10 mg, 20 mg, 40 mg	36	GEMTESA.....	51
FOSRENOL.....	50	GENABIO COVID-19 RAPID SE.....	107
FOTIVDA.....	13	GENOTROPIN.....	29
FRAGMIN.....	88	GENOTROPIN MINIQUICK.....	29
FRAICHE 5000 PREVI.....	95	gentamicin sulfate cream 0.1%	100
FRAICHE 5000 SENSITIVE.....	95	gentamicin sulfate oint 0.1%	100
FREESTYLE INSULINX BLOOD.....	107	gentamicin sulfate ophth soln 0.3%	93
FREESTYLE LIBRE 2/READER/.....	111	GENULTIMATE TEST STRIPS.....	107
FREESTYLE LIBRE 3/READER/.....	111	GENVOYA.....	5
FREESTYLE LIBRE/READER/FL.....	111	GHT TEST STRIPS.....	107
FREESTYLE LIBRE 2/SENSOR/.....	111	GILENYA.....	62
FREESTYLE LIBRE 3/SENSOR/.....	111	GILOTRIF.....	13
FREESTYLE LIBRE 14 DAY/RE.....	111	GIMOTI.....	50
FREESTYLE LIBRE 14 DAY/SE.....	111	GLASSIA.....	46
FREESTYLE LIBRE 3 PLUS/SE.....	111	glatiramer acetate soln prefilled syringe 20 mg/ml, 40 mg/ml (Copaxone)	62
FREESTYLE LITE TEST STRIP.....	107	GLEOSTINE.....	13
FREESTYLE PRECISION NEO B.....	107	glimepiride tab 1 mg, 2 mg, 4 mg (Amaryl)	23
FREESTYLE TEST STRIPS.....	107	GLIPIZIDE.....	23
frovatriptan succinate tab 2.5 mg (base equivalent) (Frova).....	72	glipizide-metformin hcl tab 2.5-250 mg, 2.5-500 mg, 5-500 mg	23
FRUZAQLA.....	13	glipizide tab er 24hr 2.5 mg, 5 mg, 10 mg (Glucotrol xl)	23
FULPHILA.....	86	glipizide tab 5 mg, 10 mg (Glucotrol)	23
FUROSCIX.....	38	GLOPERBA.....	73
FUROSEMIDE.....	38	GLUCAGON EMERGENCY KIT FO.....	23
furosemide oral soln 10 mg/ml	38	GLUCOCARD EXPRESSION BLOO.....	107
furosemide tab 20 mg, 40 mg, 80 mg (Lasix)	38	GLUCOCARD 01 SENSOR PLUS.....	107
FUZEON.....	5	GLUCOCARD SHINE TEST STRI.....	107
FYCOMPA.....	74	GLUCOCARD VITAL TEST STRI.....	107
FYLNETRA.....	86	GLUCOCARD X-SENSOR.....	107
G		GLUCOCOM TEST STRIPS.....	107
gabapentin cap 100 mg, 300 mg, 400 mg (Neurontin).....	74	GLUCONAVII BLOOD GLUCOSE.....	107
gabapentin (once-daily) tab 300 mg, 600 mg (Gralise).....	62	GLUCO PERFECT 3 TEST STRI.....	107
gabapentin oral soln 250 mg/5ml (Neurontin)	74	GLUCOSE METER TEST STRIPS.....	107
gabapentin tab 600 mg, 800 mg (Neurontin)	74	glyburide-metformin tab 1.25-250 mg, 2.5-500 mg, 5-500 mg	23
GALAFOLD.....	29	GLYBURIDE MICRONIZED.....	23
GALANTAMINE HYDROBROMIDE.....	62	glyburide tab 1.25 mg, 2.5 mg, 5 mg	23
galantamine hydrobromide cap er 24hr 8 mg, 16 mg, 24 mg (Razadyne er)	62	GLYCATE.....	47
galantamine hydrobromide tab 4 mg, 8 mg, 12 mg	62	GLYCOPYRROLATE.....	47
GALZIN.....	85	glycopyrrolate oral soln 1 mg/5ml (Cuvposa)	47
ganirelix acetate soln prefilled syringe 250 mcg/0.5ml (Ganirelix acetate).....	29	glycopyrrolate tab 2 mg	47
GARDASIL 9.....	10	glycopyrrolate tab 1 mg (Robinul)	47
gatifloxacin ophth soln 0.5% (Zymaxid)	93	GLYXAMBI.....	23
GATTEX.....	50	GNP EASY TOUCH GLUCOSE TE.....	107
GAVILYTE-C.....	46	GNP TRUE METRIX SELF MONI.....	107
GAVRETO.....	13	GNP TRUETRACK BLOOD GLUCO.....	107
GE100 BLOOD GLUCOSE TEST.....	107	GNP TRUETRACK SMART SYSTE.....	107
		GOCOVRI.....	77
		GOJJI BLOOD GLUCOSE TEST.....	107
		GONAL-F.....	29
		GONAL-F RFF.....	29
		GONAL-F RFF REDIJECT.....	29

GOODSENSE PREMIUM BLOOD G.....	107	HUMATE-P.....	90
GOTOKNOW COVID-19 ANTIGEN.....	107	HUMATIN.....	3
GRALISE.....	62	HUMATROPE.....	30
granisetron hcl tab 1 mg.....	49	HUMIRA.....	69
GRANIX.....	87	HUMIRA PEN.....	69
GRASTEK.....	11	HUMIRA PEN-CD/UC/HS START.....	69
griseofulvin microsize susp 125 mg/5ml.....	4	HUMIRA PEN-PS/UV STARTER.....	69
griseofulvin microsize tab 500 mg.....	4	HUMULIN 70/30.....	26
griseofulvin ultramicrosize tab 125 mg, 250 mg.....	4	HUMULIN 70/30 KWIKPEN.....	26
guanfacine hcl tab er 24hr 1 mg (base equiv), 2 mg		HUMULIN N.....	26
(base equiv), 3 mg (base equiv), 4 mg (base equiv)		HUMULIN N KWIKPEN.....	26
(Intuniv).....	60	HUMULIN R.....	26
guanfacine hcl tab 1 mg, 2 mg.....	36	HUMULIN R U-500 (CONCENTR.....	26
GVOKE HYOPEN 1-PACK.....	23	HUMULIN R U-500 KWIKPEN.....	26
GVOKE HYOPEN 2-PACK.....	23	HW EMBRACE PRO BLOOD GLUC.....	107
GVOKE KIT.....	23	HW EMBRACE TALK BLOOD GLU.....	107
GVOKE PFS.....	23	HYCANTIN.....	13
GYNAZOLE-1.....	52	hydralazine hcl tab 10 mg, 25 mg, 50 mg, 100 mg.....	36
H		hydrochlorothiazide cap 12.5 mg.....	38
HADLIMA.....	69	hydrochlorothiazide tab 12.5 mg, 25 mg, 50 mg.....	38
HADLIMA PUSH TOUCH.....	69	HYDROCODONE/IBUPROFEN.....	66
HAEGARDA.....	89	hydrocodone-acetaminophen soln 7.5-325	
halcinonide cream 0.1% (Halog).....	100	mg/15ml.....	66
HALCION.....	58	hydrocodone-acetaminophen tab 10-325 mg.....	66
halobetasol propionate cream 0.05%.....	100	hydrocodone-acetaminophen tab 5-300 mg, 7.5-300	
halobetasol propionate foam 0.05% (Lexette).....	100	mg, 10-300 mg.....	66
halobetasol propionate oint 0.05%.....	100	hydrocodone-acetaminophen tab 5-325 mg, 7.5-325	
HALOG.....	100	mg (Norco).....	66
haloperidol lactate oral conc 2 mg/ml.....	57	hydrocodone bitart-homatropine methylbromide tab	
haloperidol tab 0.5 mg, 1 mg.....	57	5-1.5 mg (Hycodan).....	43
haloperidol tab 2 mg, 5 mg, 10 mg, 20 mg.....	57	hydrocodone bitart-homatropine methylbrom soln	
HARVONI.....	5	5-1.5 mg/5ml (Hycodan).....	43
HAVRIX.....	10	HYDROCODONE BITARTRATE ER.....	66
HELIDAC THERAPY.....	47	hydrocodone bitartrate tab er 24hr deter 20 mg, 30	
HEMADY.....	18	mg, 40 mg, 60 mg, 80 mg, 100 mg, 120 mg (Hysingla	
HEMANGEOL.....	33	er).....	66
HEMLIBRA.....	89	hydrocodone-ibuprofen tab 7.5-200 mg.....	66
HEMOFIL M.....	89	HYDROCODONE POLISTIREX/CH.....	43
HEPARIN SODIUM.....	88	HYDROCORTISONE.....	100
heparin sodium (porcine) inj 1000 unit/ml, 5000 unit/		HYDROCORTISONE ACETATE/PR.....	96
ml, 10000 unit/ml, 20000 unit/ml.....	88	hydrocortisone acetate suppos 25 mg.....	96
heparin sodium (porcine) pf inj 1000 unit/ml, 5000		HYDROCORTISONE BUTYRATE.....	100
unit/0.5ml.....	88	hydrocortisone butyrate lotion 0.1% (Locoid).....	100
HEPLISAV-B.....	10	hydrocortisone butyrate oint 0.1%.....	100
HETLIOZ LQ.....	58	hydrocortisone cream 1%.....	100
HIBERIX.....	10	hydrocortisone cream 2.5%.....	100
HORIZANT.....	62	hydrocortisone enema 100 mg/60ml (Cortenema).....	96
HULIO.....	69	hydrocortisone oint 1%.....	100
HUMALOG.....	25	hydrocortisone oint 2.5%.....	100
HUMALOG JUNIOR KWIKPEN.....	25	hydrocortisone perianal cream 2.5% (Anusol-hc).....	96
HUMALOG KWIKPEN.....	25	hydrocortisone perianal cream 1% (Proctocort).....	96
HUMALOG MIX 50/50.....	26	hydrocortisone tab 5 mg, 10 mg, 20 mg (Cortef).....	18
HUMALOG MIX 75/25.....	26	hydrocortisone valerate cream 0.2%.....	100
HUMALOG MIX 50/50 KWIKPEN.....	26	hydrocortisone valerate oint 0.2%.....	100
HUMALOG MIX 75/25 KWIKPEN.....	26	hydrocortisone w/ acetic acid otic soln 1-2%.....	95
HUMALOG TEMPO PEN.....	25	hydromorphone hcl liqd 1 mg/ml (Dilaudid).....	66

hydromorphone hcl tab er 24hr 8 mg, 12 mg, 16 mg, 32 mg.....	66	INATAL GT.....	82
hydromorphone hcl tab 2 mg, 4 mg (Dilaudid).....	66	INBRIJA.....	77
hydromorphone hcl tab 8 mg (Dilaudid).....	66	INCRELEX.....	30
HYDROXOCOBALAMIN.....	87	INCRUSE ELLIPTA.....	44
hydroxychloroquine sulfate tab 100 mg, 300 mg, 400 mg.....	7	indapamide tab 1.25 mg, 2.5 mg.....	38
hydroxychloroquine sulfate tab 200 mg (Plaquenil).....	7	INDERAL XL.....	33
hydroxyurea cap 500 mg (Hydrea).....	13	INDICAID COVID-19 RAPID A.....	107
hydroxyzine hcl syrup 10 mg/5ml.....	54	indomethacin cap er 75 mg.....	70
hydroxyzine hcl tab 10 mg, 25 mg, 50 mg.....	54	indomethacin cap 25 mg, 50 mg.....	70
HYDROXYZINE PAMOATE.....	54	indomethacin suppos 50 mg.....	70
hydroxyzine pamoate cap 25 mg, 50 mg (Vistaril).....	54	indomethacin susp 25 mg/5ml (Indocin).....	70
HYFTOR.....	100	INFANRIX.....	11
HYRIMOZ.....	69	INFINITY BLOOD GLUCOSE TE.....	107
HYRIMOZ CROHN'S DISEASE A.....	70	INFINITY VOICE.....	107
HYRIMOZ PEDIATRIC CROHN'S.....	70	INGREZZA.....	62
HYRIMOZ PEDIATRIC CROHN'S.....	70	INLYTA.....	14
HYRIMOZ PLAQUE PSORIASIS.....	70	INNOPRAN XL.....	33
HYRIMOZ SENSOREADY PENS.....	70	INPEFA.....	40
I		INQOVI.....	14
ibandronate sodium tab 150 mg (base equivalent) (Boniva).....	30	INREBIC.....	14
IBRANCE.....	13	INSPIREASE DRUG DELIVERY.....	111
IBSRELA.....	50	INSPIREASE RESERVOIR BAGS.....	111
ibuprofen-famotidine tab 800-26.6 mg (Duexis).....	70	INSULIN ASPART.....	25
ibuprofen susp 100 mg/5ml.....	70	INSULIN ASPART FLEXPEN.....	25
ibuprofen tab 400 mg, 600 mg, 800 mg.....	70	INSULIN ASPART PENFILL.....	25
icatibant acetate subcutaneous soln pref syr 30 mg/3ml (Firazyr).....	90	INSULIN ASPART PROTAMINE/.....	26
ICLUSIG.....	13	INSULIN DEGLUDEC.....	27
icosapent ethyl cap 0.5 gm, 1 gm (Vascepa).....	39	INSULIN DEGLUDEC FLEXTOUC.....	27
IDACIO (2 PEN).....	70	INSULIN GLARGINE MAX SOLO.....	27
IDACIO STARTER PACKAGE FO.....	70	INSULIN GLARGINE SOLOSTAR.....	27
IDACIO (2 SYRINGE).....	70	INSULIN GLARGINE-YFGN.....	27
IDELVION.....	90	INSULIN LISPRO.....	25
IDHIFA.....	14	INSULIN LISPRO JUNIOR KWI.....	25
IGLUCOSE BLOOD GLUCOSE TE.....	107	INSULIN LISPRO KWIKPEN.....	25
IHEALTH COVID-19 ANTIGEN.....	107	INSULIN LISPRO PROTAMINE/.....	26
ILEVRO.....	93	INSULIN PEN NEEDLES - VARIOUS.....	111
imatinib mesylate tab 100 mg (base equivalent), 400 mg (base equivalent) (Gleevec).....	14	INSULIN SYRINGES - VARIOUS.....	111
IMBRUVICA.....	14	INTELENCE.....	5
IMCIVREE.....	60	INTELISWAB COVID-19 RAPID.....	107
imipramine hcl tab 10 mg, 25 mg, 50 mg.....	55	IN TOUCH BLOOD GLUCOSE TE.....	107
imipramine pamoate cap 75 mg, 100 mg, 125 mg, 150 mg.....	55	INTRAROSA.....	52
imiquimod cream 5% (Aldara).....	100	INVELTYS.....	93
imiquimod cream 3.75% (Zyclara).....	100	INVOKAMET.....	23
IMITREX STATDOSE REFILL.....	72	INVOKAMET XR.....	23
IMOVAX RABIES (H.D.C.V.).....	10	INVOKANA.....	23
IMPAVIDO.....	8	IOPIDINE.....	93
IMPOYZ.....	100	IPOL INACTIVATED IPV.....	10
IMURAN.....	113	ipratropium-albuterol nebu soln 0.5-2.5(3) mg/3ml.....	44
IMVEXXY MAINTENANCE PACK.....	52	ipratropium bromide inhal soln 0.02%.....	44
IMVEXXY STARTER PACK.....	52	ipratropium bromide nasal soln 0.03% (21 mcg/spray), 0.06% (42 mcg/spray).....	42
		irbesartan-hydrochlorothiazide tab 150-12.5 mg, 300-12.5 mg (Avalide).....	36
		irbesartan tab 75 mg, 150 mg, 300 mg (Avapro).....	36
		IRON UP.....	87
		ISENTRESS.....	5
		ISENTRESS HD.....	5

ISONIAZID.....	3	ketorolac tromethamine ophth soln 0.5% (Acular).....	93
isoniazid syrup 50 mg/5ml.....	3	ketorolac tromethamine ophth soln 0.4% (Acular	
isoniazid tab 300 mg.....	3	Is).....	93
isosorbide dinitrate-hydralazine hcl tab 20-37.5 mg		ketorolac tromethamine tab 10 mg.....	70
(Bidil).....	40	KEVZARA.....	70
isosorbide dinitrate tab 10 mg, 20 mg, 30 mg.....	32	KINERET.....	70
isosorbide dinitrate tab 5 mg, 40 mg (Isordil		KINRIX.....	11
titradose).....	32	KIPROFEN.....	70
ISOSORBIDE MONONITRATE.....	32	KISQALI.....	14
isosorbide mononitrate tab er 24hr 30 mg, 60 mg, 120		KITABIS PAK.....	3
mg.....	32	KLISYRI.....	100
isotretinoin cap 10 mg, 20 mg, 25 mg, 30 mg, 35 mg,		KLOXXADO.....	103
40 mg (Absorica).....	100	KOATE.....	90
isradipine cap 2.5 mg, 5 mg.....	34	KOATE-DVI.....	90
ISTURISA.....	30	KOGENATE FS.....	90
itraconazole cap 100 mg (Sporanox).....	4	KONVOMEF.....	48
itraconazole oral soln 10 mg/ml (Sporanox).....	4	KOSELUGO.....	14
ivermectin cream 1%.....	100	KOSHER PRENATAL PLUS IRON.....	82
ivermectin tab 3 mg (Stromectol).....	8	KOVALTRY.....	90
IWILFIN.....	14	K-PHOS NO 2.....	53
IXINITY.....	90	KRAZATI.....	14
IYUZEH.....	93	KRINTAFEL.....	7
J		KRISTALOSE.....	47
JAKAFI.....	14	KROGER BLOOD GLUCOSE TEST.....	107
JANUMET.....	23	KROGER HEALTHPRO GLUCOSE.....	107
JANUMET XR.....	23	KROGER PREMIUM BLOOD GLUC.....	108
JANUVIA.....	23	KYZATREX.....	19
JARDIANCE.....	23	L	
JATENZO.....	19	labetalol hcl tab 100 mg.....	33
JAYPIRCA.....	14	labetalol hcl tab 200 mg, 300 mg.....	33
JENLIVA PRENATAL/POSTNATA.....	82	lacosamide oral solution 10 mg/ml (Vimpat).....	74
JENTADUETO.....	23	lacosamide tab 50 mg, 100 mg, 150 mg, 200 mg	
JENTADUETO XR.....	23	(Vimpat).....	74
JIVI.....	90	LACRISERT.....	93
JOENJA.....	113	lactic acid (ammonium lactate) cream 12%.....	100
JORNAY PM.....	60	lactic acid (ammonium lactate) lotion 12%.....	101
JUBLIA.....	100	LACTULOSE.....	47
JULUCA.....	5	lactulose (encephalopathy) solution 10 gm/15ml.....	50
JUXTAPID.....	39	lactulose solution 10 gm/15ml.....	47
JYLAMVO.....	14	LAGEVRIO.....	5
JYNARQUE.....	30	LAMICTAL XR.....	74
JYNNEOS.....	10	lamivudine oral soln 10 mg/ml (Epivir).....	5
K		lamivudine tab 150 mg, 300 mg (Epivir).....	5
KALYDECO.....	46	lamivudine tab 100 mg (hbv) (Epivir hbv).....	5
KAPSPARGO SPRINKLE.....	33	lamivudine-zidovudine tab 150-300 mg (Combivir).....	6
KARBINAL ER.....	42	lamotrigine orally disintegrating tab 25 mg, 50 mg,	
KATERZIA.....	34	100 mg, 200 mg (Lamictal odt).....	74
KERENDIA.....	30	lamotrigine tab chewable dispersible 5 mg, 25 mg	
KESIMPTA.....	62	(Lamictal chewable di).....	74
ketoconazole cream 2%.....	100	lamotrigine tab disint 25 (14) & 50 mg (14) & 100 mg	
ketoconazole foam 2% (Extina).....	100	(7) kit (Lamictal odt).....	75
ketoconazole shampoo 2%.....	100	lamotrigine tab disint 21 x 25 mg & 7 x 50 mg titration	
ketoconazole tab 200 mg.....	4	kit (Lamictal odt).....	74
KETOPROFEN.....	70	lamotrigine tab disint 42 x 50mg & 14 x 100mg	
KETOPROFEN ER.....	70	titration kit (Lamictal odt).....	75

lamotrigine tab er 24hr 25 mg, 50 mg, 100 mg, 200 mg, 250 mg, 300 mg (Lamictal xr).....	75	levetiracetam tab er 24hr 500 mg, 750 mg (Keppra xr).....	75
lamotrigine tab 25 mg, 100 mg, 150 mg, 200 mg (Lamictal).....	75	levetiracetam tab 250 mg, 500 mg (Keppra).....	75
lamotrigine tab 25 mg (42) & 100 mg (7) starter kit (Lamictal starter/not).....	75	levetiracetam tab 750 mg, 1000 mg (Keppra).....	75
lamotrigine tab 84 x 25 mg & 14 x 100 mg starter kit (Lamictal starter/tak).....	75	LEVOBUNOLOL HCL.....	93
lamotrigine tab 35 x 25 mg starter kit (Lamictal starter/tak).....	75	levocarnitine oral soln 1 gm/10ml (10%) (Carnitor).....	30
LAMPIT.....	8	levocarnitine tab 330 mg (Carnitor).....	30
LANCETS - VARIOUS.....	111	levocetirizine dihydrochloride soln 2.5 mg/5ml (0.5 mg/ml).....	42
LANOXIN.....	32	levocetirizine dihydrochloride tab 5 mg.....	42
LANSOPRAZOLE/AMOXICILLIN/.....	48	LEVOFLOXACIN.....	93
lansoprazole cap delayed release 15 mg, 30 mg (Prevacid).....	48	levofloxacin oral soln 25 mg/ml.....	3
lansoprazole tab delayed release orally disintegrating 15 mg, 30 mg (Prevacid solutab).....	48	levofloxacin tab 250 mg, 500 mg, 750 mg.....	3
lanthanum carbonate chew tab 500 mg (elemental), 750 mg (elemental), 1000 mg (elemental) (Fosrenol).....	50	levonor-eth est tab 0.15-0.02/0.025/0.03 mg & eth est 0.01 mg (Quartette).....	21
LANTUS.....	27	levonorgestrel & ethinyl estradiol (91-day) tab 0.15-0.03 mg.....	21
LANTUS SOLOSTAR.....	27	levonorgestrel & ethinyl estradiol tab 0.1 mg-20 mcg, 0.15 mg-30 mcg.....	21
lapatinib ditosylate tab 250 mg (base equiv) (Tykerb).....	14	levonorgestrel-eth estra tab 0.05-30/0.075-40/0.125-30mg-mcg.....	21
latanoprost ophth soln 0.005% (Xalatan).....	93	levonorgestrel-ethinyl estradiol (continuous) tab 90-20 mcg.....	21
LEDIPASVIR/SOFOSBUVIR.....	6	levonorgestrel-ethinyl estradiol-fe tab 0.1 mg-20 mcg (21) (Balcoltra).....	21
leflunomide tab 10 mg, 20 mg (Arava).....	70	levonorgestrel tab 1.5 mg.....	21
lenalidomide cap 5 mg, 10 mg, 15 mg, 20 mg, 25 mg (Revlimid).....	113	levonorg-eth est tab 0.1-0.02mg(84) & eth est tab 0.01mg(7) (Loseasonique).....	21
lenalidomide caps 2.5 mg (Revlimid).....	113	levonorg-eth est tab 0.15-0.03mg(84) & eth est tab 0.01mg(7) (Seasonique).....	21
LENVIMA 4 MG DAILY DOSE.....	14	LEVORPHANOL TARTRATE.....	66
LENVIMA 8 MG DAILY DOSE.....	14	levorphanol tartrate tab 2 mg.....	66
LENVIMA 10 MG DAILY DOSE.....	14	LEVOTHYROXINE SODIUM.....	28
LENVIMA 12MG DAILY DOSE.....	14	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).....	28
LENVIMA 14 MG DAILY DOSE.....	14	LIBERTY NEXT GENERATION B.....	108
LENVIMA 18 MG DAILY DOSE.....	14	LIBERTY TEST STRIPS.....	108
LENVIMA 20 MG DAILY DOSE.....	14	LIBRAX.....	48
LENVIMA 24 MG DAILY DOSE.....	14	LICART.....	101
LEQEMBI.....	62	lidocaine hcl soln 4%.....	101
letrozole tab 2.5 mg (Femara).....	14	lidocaine hcl viscous soln 2%.....	95
leucovorin calcium tab 5 mg, 10 mg, 15 mg, 25 mg.....	14	lidocaine oint 5%.....	101
LEUKERAN.....	14	lidocaine patch 5% (Lidoderm).....	101
LEUKINE.....	87	lidocaine-prilocaine cream 2.5-2.5%.....	101
LEUPROLIDE ACETATE.....	14	LIKMEZ.....	8
leuprolide acetate inj kit 1 mg/0.2ml (5 mg/ml).....	14	linezolid for susp 100 mg/5ml (Zyvox).....	8
levalbuterol hcl soln nebu conc 1.25 mg/0.5ml (base equiv) (Xopenex concentrate).....	45	linezolid tab 600 mg (Zyvox).....	8
levalbuterol hcl soln nebu 0.31 mg/3ml (base equiv), 0.63 mg/3ml (base equiv), 1.25 mg/3ml (base equiv) (Xopenex).....	45	LINZESS.....	50
LEVALBUTEROL TARTRATE HFA.....	45	liothyronine sodium tab 5 mcg, 25 mcg, 50 mcg (Cytomel).....	28
LEVAMLODIPINE.....	34	LIPOFEN.....	39
LEVEMIR.....	27	LIQREV.....	40
LEVEMIR FLEXPEN.....	27	lisdexamfetamine dimesylate cap 10 mg, 20 mg, 30 mg, 40 mg, 50 mg, 60 mg, 70 mg (Vyvanse).....	60
levetiracetam oral soln 100 mg/ml (Keppra).....	75	lisdexamfetamine dimesylate chew tab 10 mg, 20 mg, 30 mg, 40 mg, 50 mg, 60 mg (Vyvanse).....	60

lisinopril & hydrochlorothiazide tab 10-12.5 mg, 20-12.5 mg, 20-25 mg (Zestoretic).....	36	LUPRON DEPOT-PED (3-MONTH).....	30
lisinopril tab 2.5 mg, 5 mg, 30 mg, 40 mg (Zestril).....	36	LUPRON DEPOT-PED (6-MONTH).....	30
lisinopril tab 10 mg, 20 mg (Prinivil).....	36	lurasidone hcl tab 20 mg, 40 mg, 60 mg, 80 mg, 120 mg (Latuda).....	57
LITFULO.....	101	LUZU.....	101
LITHIUM CARBONATE.....	57	LYBALVI.....	63
lithium carbonate cap 300 mg.....	57	LYNPARZA.....	15
lithium carbonate cap 150 mg, 600 mg (Lithium carbonate).....	57	LYSODREN.....	15
lithium carbonate tab er 450 mg.....	57	LYTGOBI.....	15
lithium carbonate tab er 300 mg (Lithobid).....	57	LYUMJEV.....	25
lithium carbonate tab 300 mg.....	57	LYUMJEV KWIKPEN.....	25
lithium oral solution 8 meq/5ml.....	57	LYUMJEV TEMPO PEN.....	26
LITHOBID.....	57	LYVISPAH.....	81
LITHOSTAT.....	53	M	
LIVMARLI.....	50	MAFENIDE ACETATE.....	101
LIVTENCITY.....	6	malathion lotion 0.5% (Ovide).....	101
LOCOID LIPOCREAM.....	101	maraviroc tab 150 mg, 300 mg (Selzentry).....	6
LODOCO.....	40	MARPLAN.....	55
LOKELMA.....	113	MASK VORTEX/CHILD/FROG.....	111
LO LOESTRIN FE.....	21	MASK VORTEX/TODDLER/LADY.....	111
LOMAIRA.....	60	MATULANE.....	15
LONSURF.....	14	MAVENCLAD.....	63
loperamide hcl cap 2 mg.....	47	MAVYRET.....	6
lopinavir-ritonavir soln 400-100 mg/5ml (80-20 mg/ml) (Kaletra).....	6	MAXIDEX.....	93
lopinavir-ritonavir tab 100-25 mg, 200-50 mg (Kaletra).....	6	MAYZENT.....	63
lorazepam conc 2 mg/ml.....	54	MAYZENT STARTER PACK.....	63
lorazepam tab 0.5 mg, 1 mg, 2 mg (Ativan).....	54	meclizine hcl tab 12.5 mg, 25 mg.....	49
LORBRENA.....	14	MECLIZINE HYDROCHLORIDE.....	49
LOREEV XR.....	54	MECLOFENAMATE SODIUM.....	70
losartan potassium & hydrochlorothiazide tab 50-12.5 mg, 100-12.5 mg, 100-25 mg (Hyzaar).....	36	MEDROL.....	18
losartan potassium tab 25 mg, 50 mg, 100 mg (Cozaar).....	36	medroxyprogesterone acetate im susp 150 mg/ml (Depo-provera contrac).....	21
LOTEMAX.....	93	medroxyprogesterone acetate im susp prefilled syr 150 mg/ml (Depo-provera contrac).....	21
LOTEMAX SM.....	93	medroxyprogesterone acetate tab 2.5 mg, 5 mg, 10 mg (Provera).....	22
loteprednol etabonate ophth gel 0.5% (Lotemax).....	93	mefenamic acid cap 250 mg.....	70
loteprednol etabonate ophth susp 0.2% (Alrex).....	93	mefloquine hcl tab 250 mg.....	7
loteprednol etabonate ophth susp 0.5% (Lotemax).....	93	MEGESTROL ACETATE.....	22
lovastatin tab 10 mg, 20 mg, 40 mg.....	39	megestrol acetate susp 40 mg/ml.....	15
loxapine succinate cap 5 mg, 10 mg, 25 mg, 50 mg.....	57	megestrol acetate tab 20 mg, 40 mg.....	15
lubiprostone cap 8 mcg, 24 mcg (Amitiza).....	50	MEIJER BLOOD GLUCOSE TEST.....	108
LUCEMYRA.....	62	MEIJER ESSENTIAL BLOOD GL.....	108
LULICONAZOLE.....	101	MEIJER TRUETEST BLOOD GLU.....	108
LUMAKRAS.....	15	MEIJER TRUETRACK BLOOD GL.....	108
LUMIGAN.....	93	MEKINIST.....	15
LUMRYZ.....	62	MEKTOVI.....	15
LUPKYNIS.....	113	MELOXICAM.....	70
LUPRON DEPOT (1-MONTH).....	15	meloxicam cap 5 mg, 10 mg.....	70
LUPRON DEPOT (3-MONTH).....	15	meloxicam tab 7.5 mg, 15 mg (Mobic).....	70
LUPRON DEPOT (4-MONTH).....	15	memantine hcl cap er 24hr 7 mg, 14 mg, 21 mg, 28 mg (Namenda xr).....	63
LUPRON DEPOT (6-MONTH).....	15	memantine hcl oral solution 2 mg/ml.....	63
LUPRON DEPOT-PED (1-MONTH).....	30	memantine hcl tab 5 mg, 10 mg (Namenda).....	63
		memantine hcl tab 28 x 5 mg & 21 x 10 mg titration pack (Namenda titration pa).....	63

MENEST.....	20	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).....	60
MENOPUR.....	30	methylphenidate hcl cap er 10 mg (cd), 20 mg (cd), 30 mg (cd), 40 mg (cd), 50 mg (cd), 60 mg (cd).....	60
MENOSTAR.....	20	methylphenidate hcl chew tab 2.5 mg, 5 mg, 10 mg.....	60
MENQUADFI.....	10	methylphenidate hcl soln 5 mg/5ml, 10 mg/5ml (Methylin).....	60
MENVEO.....	10	methylphenidate hcl tab er 10 mg, 20 mg.....	60
MEPERIDINE HCL.....	66	methylphenidate hcl tab er osmotic release (osm) 18 mg, 27 mg, 36 mg, 54 mg (Concerta).....	60
meperidine hcl tab 50 mg.....	66	methylphenidate hcl tab 5 mg, 10 mg (Ritalin).....	60
meprobamate tab 200 mg, 400 mg.....	54	methylphenidate hcl tab 20 mg (Ritalin).....	60
mercaptapurine tab 50 mg.....	15	METHYLPHENIDATE HYDROCHLO.....	60
mesalamine cap dr 400 mg (Delzicol).....	50	methylphenidate td patch 10 mg/9hr, 15 mg/9hr, 20 mg/9hr, 30 mg/9hr (Daytrana).....	61
mesalamine cap er 24hr 0.375 gm (Apriso).....	50	methylprednisolone tab 4 mg, 16 mg, 32 mg (Medrol).....	18
mesalamine cap er 500 mg (Pentasa).....	50	methylprednisolone tab 8 mg (Medrol).....	18
MESALAMINE DR.....	50	methylprednisolone tab therapy pack 4 mg (21) (Medrol dosepak).....	18
mesalamine enema 4 gm.....	50	methyltestosterone cap 10 mg.....	19
mesalamine suppos 1000 mg (Canasa).....	50	metoclopramide hcl soln 5 mg/5ml (10 mg/10ml) (base equiv).....	50
mesalamine tab delayed release 1.2 gm (Lialda).....	50	metoclopramide hcl tab 5 mg (base equivalent), 10 mg (base equivalent) (Reglan).....	50
MESNEX.....	15	METOCLOPRAMIDE ODT.....	50
metaxalone tab 400 mg.....	81	metolazone tab 2.5 mg, 5 mg, 10 mg.....	38
metaxalone tab 800 mg (Skelaxin).....	81	metoprolol & hydrochlorothiazide tab 100-25 mg, 100-50 mg.....	36
metformin hcl oral soln 500 mg/5ml (Riomet).....	23	metoprolol & hydrochlorothiazide tab 50-25 mg (Lopressor hct).....	36
metformin hcl tab er 24hr 500 mg, 750 mg.....	23	metoprolol succinate tab er 24hr 25 mg (tartrate equiv), 50 mg (tartrate equiv), 100 mg (tartrate equiv) (Toprol xl).....	33
metformin hcl tab er 24hr modified release 500 mg, 1000 mg (Glumetza).....	24	metoprolol succinate tab er 24hr 200 mg (tartrate equiv) (Toprol xl).....	33
metformin hcl tab er 24hr osmotic 500 mg, 1000 mg (Fortamet).....	24	metoprolol tartrate tab 25 mg, 37.5 mg, 75 mg.....	33
metformin hcl tab 500 mg, 850 mg, 1000 mg.....	24	metoprolol tartrate tab 50 mg, 100 mg (Lopressor).....	33
METFORMIN HYDROCHLORIDE.....	24	metronidazole cap 375 mg (Flagyl).....	8
methadone hcl conc 10 mg/ml (Methadose).....	66	metronidazole cream 0.75% (Metrocream).....	101
methadone hcl soln 5 mg/5ml, 10 mg/5ml (Methadone hcl).....	66	metronidazole gel 0.75%.....	101
methadone hcl tab for oral susp 40 mg.....	66	metronidazole gel 1% (Metrogel).....	101
methadone hcl tab 5 mg, 10 mg (Dolophine).....	66	metronidazole lotion 0.75% (Metrolotion).....	101
methamphetamine hcl tab 5 mg (Desoxyn).....	60	metronidazole tab 250 mg.....	8
methazolamide tab 25 mg, 50 mg.....	38	metronidazole tab 500 mg (Flagyl).....	8
methenamine hippurate tab 1 gm (Hiprex).....	8	metronidazole vaginal gel 0.75%.....	52
methimazole tab 5 mg, 10 mg (Tapazole).....	28	metyrosine cap 250 mg (Demser).....	36
METHITEST.....	19	mexiletine hcl cap 150 mg, 200 mg, 250 mg.....	35
methocarbamol tab 500 mg.....	81	MICONAZOLE 3.....	52
methocarbamol tab 750 mg (Robaxin-750).....	81	MICONAZOLE NITRATE/ZINC O.....	101
METHOTREXATE SODIUM.....	15	MICROCHAMBER.....	111
methotrexate sodium for inj 1 gm.....	15	MICRODOT TEST STRIPS.....	108
methotrexate sodium inj 50 mg/2ml (25 mg/ml).....	15	MICRODOT XTRA TEST STRIPS.....	108
methotrexate sodium inj pf 1000 mg/40ml (25 mg/ml).....	15	MICROSPACER.....	111
methotrexate sodium inj pf 50 mg/2ml (25 mg/ml), 250 mg/10ml (25 mg/ml).....	15	midodrine hcl tab 2.5 mg, 5 mg, 10 mg.....	38
methotrexate sodium tab 2.5 mg (base equiv).....	15		
METHOXSALEN.....	101		
methscopolamine bromide tab 2.5 mg, 5 mg.....	48		
methsuximide cap 300 mg (Celontin).....	75		
METHYLDOPA.....	36		
methylergonovine maleate tab 0.2 mg.....	28		
methylphenidate hcl cap er 24hr 60 mg (la).....	60		
methylphenidate hcl cap er 24hr 10 mg (la), 20 mg (la), 30 mg (la), 40 mg (la) (Ritalin la).....	60		

MIEBO.....	93	moxifloxacin hcl tab 400 mg (base equiv).....	3
mifepristone tab 300 mg (Korlym).....	24	MOXIFLOXACIN HYDROCHLORID.....	93
MIGERGOT.....	72	MRESVIA.....	10
MIGLITOL.....	24	MULPLETA.....	87
miglustat cap 100 mg (Zavesca).....	87	MULTAQ.....	35
minocycline hcl cap 50 mg.....	3	mupirocin calcium cream 2%.....	101
minocycline hcl cap 75 mg, 100 mg.....	3	mupirocin oint 2%.....	101
minocycline hcl tab er 24hr 45 mg, 90 mg, 135 mg.....	3	MYALEPT.....	30
minocycline hcl tab er 24hr 55 mg, 65 mg, 80 mg, 105 mg, 115 mg (Solodyn).....	3	MYCAPSSA.....	30
minocycline hcl tab 50 mg, 75 mg, 100 mg.....	3	mycophenolate mofetil cap 250 mg (Cellcept).....	113
MINOLIRA.....	3	mycophenolate mofetil for oral susp 200 mg/ml (Cellcept).....	113
minoxidil tab 2.5 mg, 10 mg.....	36	mycophenolate mofetil tab 500 mg (Cellcept).....	113
MIRCERA.....	87	mycophenolate sodium tab dr 180 mg (mycophenolic acid equiv), 360 mg (mycophenolic acid equiv) (Myfortic).....	113
mirtazapine orally disintegrating tab 15 mg, 30 mg, 45 mg (Remeron soltab).....	55	MYFEMBREE.....	20
mirtazapine tab 7.5 mg.....	55	MYFORTIC.....	113
mirtazapine tab 45 mg.....	55	MYGLUCOHEALTH BLOOD GLUCO.....	108
mirtazapine tab 15 mg, 30 mg (Remeron).....	55	MYLERAN.....	15
MISC NEEDLES AND SYRINGES - VARIOUS.....	111	MYRBETRIQ.....	52
misoprostol tab 100 mcg, 200 mcg (Cytotec).....	48	MYSOLINE.....	75
MITOSOL.....	93	MYTESI.....	47
MM BLULINK GLUCOSE TEST S.....	108	N	
MM EASY TOUCH GLUCOSE TES.....	108	nabumetone tab 500 mg.....	70
M-M-R II.....	10	nabumetone tab 750 mg.....	70
M-NATAL PLUS.....	82	nadolol tab 20 mg, 40 mg, 80 mg (Corgard).....	33
modafinil tab 100 mg, 200 mg (Provigil).....	61	NAFTIFINE HCL.....	101
MODERNA COVID-19 VACCINE.....	10	naftifine hcl cream 2% (Naftin).....	101
moexipril hcl tab 7.5 mg, 15 mg.....	36	naftifine hcl gel 2% (Naftin).....	101
MOLINDONE HYDROCHLORIDE.....	57	NALOCET.....	67
mometasone furoate cream 0.1%.....	101	naloxone hcl inj 0.4 mg/ml, 4 mg/10ml.....	103
mometasone furoate nasal susp 50 mcg/act (Nasonex).....	42	naloxone hcl nasal spray 4 mg/0.1ml (Narcan).....	103
mometasone furoate oint 0.1%.....	101	naloxone hcl soln prefilled syringe 2 mg/2ml.....	103
mometasone furoate solution 0.1% (lotion).....	101	NALOXONE HYDROCHLORIDE.....	103
montelukast sodium chew tab 4 mg (base equiv), 5 mg (base equiv) (Singulair).....	45	naltrexone hcl tab 50 mg.....	103
montelukast sodium oral granules packet 4 mg (base equiv) (Singulair).....	45	NAMZARIC.....	63
montelukast sodium tab 10 mg (base equiv) (Singulair).....	45	naproxen-esomeprazole magnesium tab dr 375-20 mg, 500-20 mg (Vimovo).....	71
MORPHINE SULFATE.....	66	naproxen sodium tab er 24hr 375 mg (base equiv), 500 mg (base equiv), 750 mg (base equiv) (Naprelan).....	70
MORPHINE SULFATE ER.....	66	naproxen sodium tab 275 mg, 550 mg.....	70
morphine sulfate oral soln 10 mg/5ml.....	66	naproxen susp 125 mg/5ml (Naprosyn).....	70
morphine sulfate oral soln 100 mg/5ml (20 mg/ml).....	67	naproxen tab ec 375 mg, 500 mg (Ec-naprosyn).....	71
morphine sulfate tab er 30 mg, 60 mg, 100 mg, 200 mg (Ms contin).....	67	naproxen tab 250 mg, 375 mg, 500 mg.....	71
morphine sulfate tab er 15 mg (Ms contin).....	67	naratriptan hcl tab 1 mg (base equiv), 2.5 mg (base equiv) (Amerge).....	72
morphine sulfate tab 15 mg, 30 mg (Morphine sulfate).....	67	NARDIL.....	55
MOTEGRITY.....	50	NATACHEW.....	82
MOTOFEN.....	47	NATACYN.....	93
MOTPOLY XR.....	75	NATAL PNV.....	82
MOUNJARO.....	24	NATALVIT.....	82
MOVANTIK.....	50	NATAZIA.....	21
moxifloxacin hcl ophth soln 0.5% (base equiv) (Vigamox).....	93	nateglinide tab 60 mg, 120 mg (Starlix).....	24
		NATESTO.....	19

NATROBA.....	101	NICOTROL NS.....	63
NAYZILAM.....	75	nifedipine cap 20 mg.....	34
nebivolol hcl tab 2.5 mg (base equivalent), 5 mg (base equivalent), 10 mg (base equivalent), 20 mg (base equivalent) (Bystolic).....	33	nifedipine cap 10 mg (Procardia).....	34
NEEVO DHA.....	82	nifedipine tab er 24hr 30 mg.....	34
NEFAZODONE HYDROCHLORIDE.....	55	nifedipine tab er 24hr 60 mg, 90 mg.....	34
NEOMYCIN/POLYMYXIN/GRAMIC.....	93	nifedipine tab er 24hr osmotic release 60 mg, 90 mg (Procardia xl).....	34
NEOMYCIN/POLYMYXIN/HYDROC.....	93	nifedipine tab er 24hr osmotic release 30 mg (Procardia xl).....	34
neomycin-bacitrac zn-polymyx 5(3.5)mg-400unt-10000unt op oin.....	93	nilutamide tab 150 mg (Nilandron).....	15
neomycin-polymyxin-dexamethasone ophth oint 0.1% (Maxitrol).....	93	nimodipine cap 30 mg.....	34
neomycin-polymyxin-dexamethasone ophth susp 0.1% (Maxitrol).....	93	NINLARO.....	15
neomycin-polymyxin-hc otic soln 1%.....	95	NISOLDIPINE ER.....	34
neomycin-polymyxin-hc otic susp 3.5 mg/ml-10000 unit/ml-1%.....	95	nisoldipine tab er 24hr 8.5 mg, 17 mg, 34 mg (Sular).....	34
neomycin sulfate tab 500 mg.....	3	nitazoxanide tab 500 mg (Alinia).....	8
NEONATAL 19.....	82	nitisinone cap 2 mg, 5 mg, 10 mg, 20 mg (Orfadin)....	30
NEONATAL/DHA.....	82	NITRO-BID.....	32
NEONATAL COMPLETE.....	82	NITRO-DUR.....	32
NEONATAL FE.....	82	NITROFURANTOIN.....	8
NEONATAL PLUS.....	82	nitrofurantoin macrocrystalline cap 25 mg, 50 mg, 100 mg (Macrochantin).....	8
NEORAL.....	113	nitrofurantoin monohydrate macrocrystalline cap 100 mg (Macrobid).....	8
NEO-SYNALAR.....	101	nitrofurantoin susp 25 mg/5ml.....	8
NERLYNX.....	15	nitroglycerin oint 0.4% (Rectiv).....	96
NESTABS.....	82	nitroglycerin sl tab 0.3 mg, 0.6 mg (Nitrostat).....	32
NESTABS DHA.....	82	nitroglycerin sl tab 0.4 mg (Nitrostat).....	32
NESTABS ONE.....	82	nitroglycerin td patch 24hr 0.1 mg/hr, 0.2 mg/hr, 0.4 mg/hr, 0.6 mg/hr (Nitro-dur).....	33
NEULASTA.....	87	nitroglycerin tl soln 0.4 mg/spray (400 mcg/spray) (Nitrolingual pumpspr).....	33
NEULASTA ONPRO KIT.....	87	NITRO-TIME.....	32
NEUPOGEN.....	87	NITYR.....	30
NEUPRO.....	77	NIVA-PLUS.....	82
NEUTEK 2TEK TEST STRIPS.....	108	NIVA THYROID.....	28
NEVANAC.....	93	NIVESTYM.....	87
NEVIRAPINE.....	6	NIZATIDINE.....	48
nevirapine tab er 24hr 400 mg (Viramune xr).....	6	NOCDURNA.....	30
nevirapine tab 200 mg.....	6	NORDITROPIN FLEXPRO.....	30
NEXICLON XR.....	37	norelgestromin-ethinyl estradiol td ptwk 150-35 mcg/24hr.....	21
NEXIUM.....	48	norethindrone & ethinyl estradiol-fe chew tab 0.4 mg-35 mcg.....	21
NEXLETOL.....	39	norethindrone & ethinyl estradiol-fe chew tab 0.8 mg-25 mcg (Generess fe).....	21
NEXLIZET.....	39	norethindrone & ethinyl estradiol tab 1 mg-35 mcg.....	21
NEXTSTELLIS.....	21	norethindrone & ethinyl estradiol tab 0.4 mg-35 mcg, 0.5 mg-35 mcg.....	21
NGENLA.....	30	norethindrone ace & ethinyl estradiol-fe tab 1 mg-20 mcg, 1.5 mg-30 mcg.....	21
NIACIN.....	39	norethindrone ace & ethinyl estradiol tab 1 mg-20 mcg.....	21
niacin tab er 500 mg (antihyperlipidemic), 750 mg (antihyperlipidemic), 1000 mg (antihyperlipidemic) (Niaspan).....	39	norethindrone ace & ethinyl estradiol tab 1.5 mg-30 mcg.....	21
NIACOR.....	40		
nicardipine hcl cap 20 mg, 30 mg.....	34		
nicotine polacrilex gum 2 mg, 4 mg.....	63		
nicotine polacrilex lozenge 2 mg, 4 mg.....	63		
nicotine td patch 24hr 7 mg/24hr, 14 mg/24hr, 21 mg/24hr.....	63		
NICOTINE TRANSDERMAL SYST.....	63		
NICOTROL INHALER.....	63		

norethindrone ace-eth estradiol-fe chew tab 1 mg-20 mcg (24) (Minastrin 24 fe).....	22	NUCYNTA.....	67
norethindrone ace-ethinyl estradiol-fe cap 1 mg-20 mcg (24) (Taytulla).....	22	NUCYNTA ER.....	67
norethindrone ace-ethinyl estradiol-fe tab 1 mg-20 mcg (24).....	22	NUEDEXTA.....	63
norethindrone acetate-ethinyl estradiol tab 1 mg-5 mcg.....	20	NULIBRY.....	30
norethindrone acetate-ethinyl estradiol tab 0.5 mg-2.5 mcg (Femhrt low dose).....	20	NUPLAZID.....	57
norethindrone acetate tab 5 mg (Aygestin).....	22	NURTEC.....	72
norethindrone ac-ethinyl estrad-fe tab 1-20/1-30/1-35 mg-mcg (Estrostep fe).....	21	NUTROPIN AQ NUSPIN 5.....	30
norethindrone-eth estradiol tab 0.5-35/0.75-35/1-35 mg-mcg.....	22	NUTROPIN AQ NUSPIN 10.....	30
norethindrone-eth estradiol tab 0.5-35/1-35/0.5-35 mg-mcg.....	22	NUTROPIN AQ NUSPIN 20.....	30
norethindrone tab 0.35 mg (Ortho micronor).....	22	NUVARING.....	22
norgestimate & ethinyl estradiol tab 0.25 mg-35 mcg.....	22	NUVESSA.....	52
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.....	22	NUWIQ.....	90
norgestrel & ethinyl estradiol tab 0.3 mg-30 mcg.....	22	NUZYRA.....	3
NORITATE.....	101	NYMALIZE.....	34
NORLIQVA.....	34	nystatin cream 100000 unit/gm.....	101
NORPACE.....	35	nystatin oint 100000 unit/gm.....	101
NORPACE CR.....	35	nystatin susp 100000 unit/ml.....	95
nortriptyline hcl cap 10 mg, 25 mg, 50 mg, 75 mg (Pamelor).....	55	nystatin tab 500000 unit.....	4
nortriptyline hcl soln 10 mg/5ml.....	55	nystatin topical powder 100000 unit/gm.....	101
NORVIR.....	6	nystatin-triamcinolone cream 100000-0.1 unit/gm-%.....	101
NOURIANZ.....	77	nystatin-triamcinolone oint 100000-0.1 unit/gm-%.....	101
NOVAFERRUM PEDIATRIC DROP.....	87	NYVEPRIA.....	87
NOVA MAX GLUCOSE TEST STR.....	108	O	
NOVAREL.....	30	OB COMPLETE.....	82
NOVAVAX COVID-19 VACCINE/.....	10	OB COMPLETE/DHA.....	83
NOVOEIGHT.....	90	OB COMPLETE ONE.....	82
NOVOLIN 70/30.....	27	OB COMPLETE PETITE.....	83
NOVOLIN 70/30 FLEXPEN.....	27	OB COMPLETE PREMIER.....	83
NOVOLIN N.....	26	OBIZUR.....	90
NOVOLIN N FLEXPEN.....	26	OCALIVA.....	50
NOVOLIN R.....	26	OCTREOTIDE ACETATE.....	30
NOVOLIN R FLEXPEN.....	26	octreotide acetate inj 200 mcg/ml (0.2 mg/ml), 1000 mcg/ml (1 mg/ml).....	30
NOVOLOG.....	26	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).....	30
NOVOLOG FLEXPEN.....	26	ODACTRA.....	11
NOVOLOG MIX 70/30.....	27	ODEFSEY.....	6
NOVOLOG MIX 70/30 PREFILL.....	27	ODOMZO.....	15
NOVOLOG PENFILL.....	26	OFEV.....	46
NOVOSEVEN RT.....	90	OFLOXACIN.....	3
NOXAFIL.....	4	ofloxacin ophth soln 0.3% (Ocuflox).....	93
NP THYROID 15.....	28	ofloxacin otic soln 0.3%.....	95
NP THYROID 30.....	28	ofloxacin tab 400 mg.....	3
NP THYROID 60.....	28	OGSIVEO.....	15
NP THYROID 90.....	28	OHC COVID-19 ANTIGEN SELF.....	108
NP THYROID 120.....	28	OJJAARA.....	15
NUBEQA.....	15	olanzapine-fluoxetine hcl cap 12-25 mg.....	63
NUCALA.....	45	olanzapine-fluoxetine hcl cap 3-25 mg, 6-25 mg, 6-50 mg, 12-50 mg (Symbyax).....	63
		olanzapine orally disintegrating tab 5 mg, 10 mg, 15 mg, 20 mg (Zyprexa zydis).....	57
		olanzapine tab 2.5 mg, 5 mg, 7.5 mg, 10 mg, 15 mg, 20 mg (Zyprexa).....	57

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).....	37	OPTIUMEZ TEST STRIPS.....	108
olmesartan medoxomil-hydrochlorothiazide tab 20-12.5 mg, 40-12.5 mg, 40-25 mg (Benicar hct).....	37	OPVEE.....	104
olmesartan medoxomil tab 5 mg, 20 mg, 40 mg (Benicar).....	37	OPZELURA.....	101
olopatadine hcl nasal soln 0.6% (Patanase).....	42	ORACEA.....	101
olopatadine hcl ophth soln 0.1% (base equivalent), 0.2% (base equivalent).....	93	ORALAIR.....	11
OLPRUVA.....	30	ORAPRED ODT.....	18
OLUMIANT.....	71	ORAVIG.....	95
OMECLAMOX-PAK.....	48	ORENCIA.....	71
omega-3-acid ethyl esters cap 1 gm (Lovaza).....	40	ORENCIA CLICKJECT.....	71
omeprazole cap delayed release 10 mg, 20 mg, 40 mg.....	48	ORENITRAM.....	40
omeprazole-sodium bicarbonate cap 20-1100 mg, 40-1100 mg (Zegerid).....	48	ORENITRAM TITRATION KIT M.....	41
omeprazole-sodium bicarbonate powd pack for susp 20-1680 mg, 40-1680 mg (Zegerid).....	48	ORFADIN.....	31
OMNARIS.....	42	ORGOVYX.....	15
OMNIFLEX DIAPHRAGM.....	111	ORIAHNN.....	20
OMNIPOD DASH INTRO KIT (G.....	111	ORLISSA.....	31
OMNIPOD DASH PODS (GEN 4).....	112	ORKAMBI.....	46
OMNIPOD 5 G6 INTRO KIT (G.....	112	ORLADEYO.....	90
OMNIPOD 5 G6 PODS (GEN 5).....	112	ORLISTAT.....	61
OMNITROPE.....	31	orphenadrine citrate tab er 12hr 100 mg.....	81
OMVOH.....	51	orphenadrine w/ aspirin & caffeine tab 25-385-30 mg.....	81
ON/GO COVID-19 ANTIGEN SE.....	108	orphenadrine w/ aspirin & caffeine tab 50-770-60 mg (Norgesic forte).....	81
ON/GO ONE COVID-19 ANTIGE.....	108	ORSERDU.....	15
ON CALL EXPRESS BLOOD GLU.....	108	oseltamivir phosphate cap 30 mg (base equiv), 45 mg (base equiv), 75 mg (base equiv) (Tamiflu).....	6
ONDANSETRON HCL.....	49	oseltamivir phosphate for susp 6 mg/ml (base equiv) (Tamiflu).....	6
ondansetron hcl oral soln 4 mg/5ml.....	49	OSMOLEX ER.....	77
ondansetron hcl tab 8 mg.....	49	OSPHENA.....	31
ondansetron hcl tab 4 mg (Zofran).....	49	OTEZLA.....	71
ONDANSETRON ODT.....	49	OTOVEL.....	95
ondansetron orally disintegrating tab 4 mg, 8 mg.....	49	OTREXUP.....	71
ONE DROP BLOOD GLUCOSE TE.....	108	OVIDREL.....	31
ONETOUCH ULTRA.....	108	OXAPROZIN.....	71
ONETOUCH ULTRA CONTROL.....	112	oxaprozin tab 600 mg (Daypro).....	71
ONETOUCH ULTRA CONTROL SO.....	112	oxazepam cap 10 mg, 15 mg, 30 mg.....	54
ONETOUCH ULTRA TEST STRIP.....	108	OXBRYTA.....	87
ONETOUCH VERIO LEVEL 3 CO.....	112	oxcarbazepine susp 300 mg/5ml (60 mg/ml) (Trileptal).....	75
ONETOUCH VERIO LEVEL 4 CO.....	112	oxcarbazepine tab 300 mg, 600 mg (Trileptal).....	75
ONETOUCH VERIO TEST STRIP.....	108	oxcarbazepine tab 150 mg (Trileptal).....	75
ONE VITE WOMENS PRENATAL.....	83	OXERVATE.....	93
ONGENTYS.....	77	oxiconazole nitrate cream 1% (Oxistat).....	101
ONUREG.....	15	OXISTAT.....	101
ONZETRA XSAIL.....	72	OXTELLAR XR.....	75
OPFOLDA.....	31	OXYBUTYNIN CHLORIDE.....	52
OPSUMIT.....	40	oxybutynin chloride solution 5 mg/5ml.....	52
OPTICHAMBER.....	112	oxybutynin chloride tab er 24hr 15 mg.....	52
OPTICHAMBER DIAMOND.....	112	oxybutynin chloride tab er 24hr 5 mg, 10 mg (Ditropan xl).....	52
OPTICHAMBER DIAMOND/LARGE.....	112	oxybutynin chloride tab 5 mg.....	52
OPTICHAMBER DIAMOND/MEDIU.....	112	OXYCODONE/ACETAMINOPHEN.....	67
OPTICHAMBER DIAMOND/SMALL.....	112	OXYCODONE AND ACETAMINOPH.....	67
OPTIONS GYNOL II VAGINAL.....	52	oxycodone hcl cap 5 mg.....	67
		oxycodone hcl conc 100 mg/5ml (20 mg/ml).....	67
		oxycodone hcl soln 5 mg/5ml.....	67

oxycodone hcl tab 10 mg.....	67	PEDIATRIC PANDA MASK.....	112
oxycodone hcl tab 20 mg.....	67	PEDVAX HIB.....	10
oxycodone hcl tab 15 mg, 30 mg (Roxicodone).....	67	PEGASYS.....	6
oxycodone hcl tab 5 mg (Roxicodone).....	67	peg 3350-kcl-na bicarb-nacl-na sulfate for soln 236 gm (Golytely).....	47
OXYCODONE HYDROCHLORIDE/A.....	67	peg 3350-kcl-nacl-na sulfate-na ascorbate-c for soln 100 gm (Moviprep).....	47
OXYCODONE HYDROCHLORIDE E.....	67	peg 3350-kcl-sod bicarb-nacl for soln 420 gm.....	47
oxycodone w/ acetaminophen tab 2.5-325 mg, 7.5-325 mg, 10-325 mg (Percocet).....	67	PEG-PREP.....	47
oxycodone w/ acetaminophen tab 5-325 mg (Percocet).....	67	PEMAZYRE.....	16
OXYCONTIN.....	67	PENBRAYA.....	10
oxymorphone hcl tab 5 mg, 10 mg.....	67	penciclovir cream 1% (Denavir).....	101
OXYMORPHONE HYDROCHLORIDE.....	67	penicillamine cap 250 mg (Cuprimine).....	113
OXYTROL.....	52	penicillamine tab 250 mg (Depen titratabs).....	113
OZEMPIC.....	24	PENICILLIN V POTASSIUM.....	1
OZOBAX DS.....	81	penicillin v potassium tab 250 mg, 500 mg.....	1
P		PENTACEL.....	11
PALFORZIA INITIAL DOSE ES.....	11	pentamidine isethionate for nebulization soln 300 mg (Nebupent).....	8
PALFORZIA LEVEL 1.....	11	PENTASA.....	51
PALFORZIA LEVEL 2.....	12	pentazocine w/ naloxone hcl tab 50-0.5 mg.....	67
PALFORZIA LEVEL 3.....	12	pentoxifylline tab er 400 mg.....	90
PALFORZIA LEVEL 4.....	12	PERINDOPRIL ERBUMINE.....	37
PALFORZIA LEVEL 5.....	12	perindopril erbumine tab 4 mg.....	37
PALFORZIA LEVEL 6.....	12	permethrin cream 5% (Elimite).....	101
PALFORZIA LEVEL 7.....	12	PERPHENAZINE/AMITRIPTYLIN.....	63
PALFORZIA LEVEL 8.....	12	perphenazine tab 2 mg, 4 mg, 8 mg, 16 mg.....	58
PALFORZIA LEVEL 9.....	12	PERTZYE.....	49
PALFORZIA LEVEL 10.....	11	PFIZER-BIONTECH COVID-19.....	10
PALFORZIA LEVEL 11 (MAINT.....	11	PHARMACIST CHOICE AUTOCOD.....	108
PALFORZIA LEVEL 11 (TITRA.....	12	PHARMACIST CHOICE NO CODI.....	108
paliperidone tab er 24hr 1.5 mg, 3 mg, 6 mg, 9 mg (Invega).....	58	PHEBURANE.....	31
PALYNZIQ.....	31	PHENDIMETRAZINE TARTRATE.....	61
PANCREAZE.....	49	phendimetrazine tartrate tab 35 mg.....	61
PANDA MASK LARGE.....	112	PHENELZINE SULFATE.....	55
PANDA MASK MEDIUM.....	112	phenobarbital elixir 20 mg/5ml.....	58
PANDA MASK SMALL.....	112	phenobarbital tab 15 mg, 30 mg, 60 mg, 100 mg.....	59
PANDEL.....	101	phenobarbital tab 16.2 mg, 32.4 mg, 64.8 mg, 97.2 mg.....	59
PANRETIN.....	101	phenoxybenzamine hcl cap 10 mg (Dibenzyliline).....	37
pantoprazole sodium ec tab 20 mg (base equiv), 40 mg (base equiv) (Protonix).....	48	phentermine hcl cap 15 mg, 30 mg.....	61
pantoprazole sodium for delayed release susp packet 40 mg (Protonix).....	48	phentermine hcl cap 37.5 mg (Adipex-p).....	61
paricalcitol cap 4 mcg.....	31	phentermine hcl tab 37.5 mg (Adipex-p).....	61
paricalcitol cap 1 mcg, 2 mcg (Zemplar).....	31	phenylephrine hcl ophth soln 2.5%, 10%.....	94
paroxetine hcl oral susp 10 mg/5ml (base equiv) (Paxil).....	55	phenytoin chew tab 50 mg (Dilantin infatabs).....	75
paroxetine hcl tab er 24hr 12.5 mg, 25 mg, 37.5 mg (Paxil cr).....	55	phenytoin sodium extended cap 200 mg, 300 mg (Phenytek).....	75
paroxetine hcl tab 10 mg, 20 mg, 30 mg, 40 mg (Paxil).....	55	phenytoin sodium extended cap 100 mg (Dilantin).....	75
paroxetine mesylate cap 7.5 mg (base equiv) (Brisdelle).....	63	phenytoin susp 125 mg/5ml (Dilantin-125).....	75
PAXLOVID.....	6	PHEXXI.....	52
pazopanib hcl tab 200 mg (base equiv) (Votrient).....	15	PHOSPHOLINE IODIDE.....	94
PEDIARIX.....	11	phytonadione tab 5 mg (Mephyton).....	81
		PIFELTRO.....	6
		pilocarpine hcl ophth soln 1%, 2%, 4% (Isopto carpine).....	94
		pilocarpine hcl tab 5 mg, 7.5 mg (Salagen).....	95
		PILOT COVID-19 AT-HOME TE.....	108

pimecrolimus cream 1% (Elidel).....	101	potassium citrate tab er 5 meq (540 mg) (Urocit-k 5).....	53
PIMOZIDE.....	63	potassium citrate tab er 10 meq (1080 mg) (Urocit-k 10).....	53
pindolol tab 5 mg, 10 mg.....	33	potassium citrate tab er 15 meq (1620 mg) (Urocit-k 15).....	53
pioglitazone hcl-glimepiride tab 30-2 mg, 30-4 mg (Duetact).....	24	potassium phosphate monobasic tab 500 mg (K-phos).....	86
pioglitazone hcl-metformin hcl tab 15-500 mg, 15-850 mg (Actoplus met).....	24	pot phos monobasic w/sod phos di & monobas tab 155-852-130mg (K-phos neutral).....	85
pioglitazone hcl tab 15 mg (base equiv), 30 mg (base equiv), 45 mg (base equiv) (Actos).....	24	PRADAXA.....	88
PIP BLOOD GLUCOSE TEST ST.....	108	PRALUENT.....	40
PIQRAY 200MG DAILY DOSE.....	16	pramipexole dihydrochloride tab er 24hr 0.375 mg, 0.75 mg, 1.5 mg, 2.25 mg, 3 mg, 3.75 mg, 4.5 mg (Mirapex er).....	77
PIQRAY 250MG DAILY DOSE.....	16	pramipexole dihydrochloride tab 0.25 mg, 1.5 mg.....	77
PIQRAY 300MG DAILY DOSE.....	16	pramipexole dihydrochloride tab 0.125 mg, 0.5 mg, 0.75 mg, 1 mg (Mirapex).....	77
PIRFENIDONE.....	46	PRAMOSONE.....	102
pirfenidone cap 267 mg (Esbriet).....	46	prasugrel hcl tab 5 mg (base equiv), 10 mg (base equiv) (Effient).....	90
pirfenidone tab 267 mg, 801 mg (Esbriet).....	46	pravastatin sodium tab 10 mg, 80 mg.....	40
piroxicam cap 10 mg, 20 mg (Feldene).....	71	pravastatin sodium tab 20 mg, 40 mg (Pravachol).....	40
pitavastatin calcium tab 1 mg, 2 mg, 4 mg (Livalo).....	40	praziquantel tab 600 mg (Biltricide).....	8
PLEGRIDY.....	63	prazosin hcl cap 2 mg, 5 mg (Minipress).....	37
PLEGRIDY STARTER PACK.....	63	prazosin hcl cap 1 mg (Minipress).....	37
PLENVU.....	47	PRECISION SOF-TACT TEST S.....	108
PLIAGLIS.....	102	PRECISION XTRA BLOOD GLUC.....	108
PNEUMOVAX 23.....	10	PRED FORTE.....	94
PNEUMOVAX 23/1 DOSE.....	10	PRED MILD.....	94
PNV-DHA.....	83	PREDNISOLONE ACETATE.....	94
PNV-DHA+DOCUSATE.....	83	PREDNISOLONE SODIUM PHOSP.....	18
PNV-OMEGA.....	83	prednisolone sodium phosphate oral soln 25 mg/5ml (base eq).....	18
PNV PRENATAL PLUS MULTIVI.....	83	prednisolone sod phosphate oral soln 15 mg/5ml (base equiv).....	18
PNV-SELECT.....	83	prednisolone sod phosphate oral soln 10 mg/5ml (base equiv), 20 mg/5ml (base equiv).....	18
PNV TABS 20-1.....	83	prednisolone sod phosph oral soln 6.7 mg/5ml (5 mg/5ml base) (Pediapred).....	18
POCKET CHAMBER.....	112	prednisolone soln 15 mg/5ml.....	18
POCKETCHEM EZ BLOOD GLUCO.....	108	prednisolone tab 5 mg.....	18
POCKET SPACER.....	112	PREDNISONE.....	18
PODOFILOX.....	102	PREDNISONE INTENSOL.....	19
podofilox gel 0.5% (Condylox).....	102	prednisone tab 1 mg, 2.5 mg, 5 mg, 10 mg, 20 mg, 50 mg.....	19
POGO AUTOMATIC TEST CARTR.....	108	prednisone tab therapy pack 10 mg (48).....	19
POKONZA.....	85	prednisone tab therapy pack 5 mg (21), 5 mg (48), 10 mg (21).....	19
polymyxin b-trimethoprim ophth soln 10000 unit/ml-0.1% (Polytrim).....	94	pregabalin cap 25 mg, 50 mg, 75 mg, 100 mg, 150 mg, 200 mg, 225 mg, 300 mg (Lyrica).....	75
POMALYST.....	16	pregabalin soln 20 mg/ml (Lyrica).....	75
PONVORY.....	63	pregabalin tab er 24hr 82.5 mg, 165 mg, 330 mg (Lyrica cr).....	64
PONVORY 14-DAY STARTER PA.....	64	PREGEN DHA.....	83
posaconazole susp 40 mg/ml (Noxafil).....	4	PREGENNA.....	83
posaconazole tab delayed release 100 mg (Noxafil).....	4	PREGNYL.....	31
potassium chloride cap er 8 meq, 10 meq.....	85		
POTASSIUM CHLORIDE ER.....	85		
potassium chloride microencapsulated crys er tab 15 meq.....	86		
potassium chloride microencapsulated crys er tab 10 meq, 20 meq.....	85		
potassium chloride oral soln 10% (20 meq/15ml), 20% (40 meq/15ml).....	86		
potassium chloride powder packet 20 meq.....	86		
potassium chloride tab er 10 meq, 20 meq (1500 mg) (K-tab).....	86		
potassium chloride tab er 8 meq (600 mg).....	86		

PREGNYL W/DILUENT BENZYL.....	31	PRO COMFORT INHALER SPACE.....	112
PREHEVBRIO.....	10	PROCRIT.....	87
PREMARIN.....	20	PROCTOFOAM HC.....	96
PREMESISRX.....	83	PROCYSBI.....	53
PREMIUM BLOOD GLUCOSE TES.....	108	PRODIGY NO CODING BLOOD G.....	108
PREMPHASE.....	20	PROFILNINE.....	90
PREMPRO.....	20	progesterone cap 100 mg, 200 mg (Prometrium).....	22
PRENA1 CHEW.....	84	progesterone im in oil 50 mg/ml.....	22
PRENAISSANCE.....	83	PROGRAF.....	113
PRENAISSANCE PLUS.....	83	PROLATE.....	67
PRENA1 PEARL.....	84	PROMACTA.....	87
PRENATAL.....	83	promethazine-dm syrup 6.25-15 mg/5ml.....	43
PRENATAL 19.....	83	promethazine hcl oral soln 6.25 mg/5ml.....	42
PRENATAL PLUS.....	83	promethazine hcl suppos 12.5 mg, 25 mg.....	42
PRENATAL PLUS VITAMIN AND.....	83	promethazine hcl tab 12.5 mg, 25 mg, 50 mg.....	42
PRENATAL-U.....	83	PROMETHAZINE VC.....	43
PRENATE.....	83	promethazine w/ codeine syrup 6.25-10 mg/5ml.....	43
PRENATE AM.....	83	PROMETHEGAN.....	42
PRENATE DHA.....	83	propafenone hcl cap er 12hr 225 mg, 325 mg, 425 mg	
PRENATE ELITE.....	83	(Rythmol sr).....	35
PRENATE ENHANCE.....	83	propafenone hcl tab 150 mg.....	35
PRENATE ESSENTIAL.....	84	propafenone hcl tab 225 mg, 300 mg.....	35
PRENATE MINI.....	84	PROPRANOLOL HCL.....	33
PRENATE PIXIE.....	84	propranolol hcl cap er 24hr 60 mg, 80 mg, 120 mg,	
PRENATE RESTORE.....	84	160 mg (Inderal la).....	33
PRENATOL-M.....	84	propranolol hcl oral soln 20 mg/5ml.....	33
PRENATRIX.....	84	propranolol hcl tab 60 mg, 80 mg.....	33
PRENA 1 TRUE.....	83	propranolol hcl tab 10 mg, 20 mg, 40 mg.....	33
PRENATRYL.....	84	propylthiouracil tab 50 mg.....	28
PRENATVITE COMPLETE.....	84	PROQUAD.....	10
PRENATVITE PLUS.....	84	protriptyline hcl tab 5 mg, 10 mg.....	55
PRENATVITE RX.....	84	PROVIDA OB.....	84
PRESTALIA.....	37	PRO VOICE V8/V9 BLOOD GLU.....	108
PRETOMANID.....	3	pseudoephed-bromphen-dm syrup 30-2-10	
PREVIDENT RINSE.....	95	mg/5ml.....	43
PREVNAR 20.....	10	PTS PANELS EGLU.....	108
PREVYMIS.....	6	PULMICORT FLEXHALER.....	45
PREZCOBIX.....	6	PULMOZYME.....	46
PREZISTA.....	6	PURE COMFORT INHALER SPAC.....	112
PRIFTIN.....	3	PURIXAN.....	16
PRILOSEC.....	48	pyrazinamide tab 500 mg.....	4
PRIMACARE.....	84	PYRIDOSTIGMINE BROMIDE.....	81
primaquine phosphate tab 26.3 mg (15 mg base)		pyridostigmine bromide oral soln 60 mg/5ml	
(Primaquine phosphate).....	7	(Mestinon).....	81
PRIMIDONE.....	75	pyridostigmine bromide tab er 180 mg (Mestinon	
primidone tab 50 mg (Mysoline).....	75	timespan).....	81
primidone tab 250 mg (Mysoline).....	75	pyridostigmine bromide tab 60 mg (Mestinon).....	81
PRIORIX.....	10	pyrimethamine tab 25 mg (Daraprim).....	7
PROAIR RESPICLICK.....	45	PYRUKYND.....	90
probenecid tab 500 mg.....	73	PYRUKYND TAPER PACK.....	90
PROCARE SPACER CHAMBER W/.....	112	Q	
PROCHAMBER VALVED HOLDING.....	112	QBRELIS.....	37
prochlorperazine maleate tab 5 mg (base		QBREXZA.....	102
equivalent).....	58	QDOLO.....	67
prochlorperazine maleate tab 10 mg (base		QELBREE.....	61
equivalent).....	58	QINLOCK.....	16
prochlorperazine suppos 25 mg.....	58		

QNASL.....	42	RECORLEV.....	31
QNASL CHILDRENS.....	42	REFUAH PLUS BLOOD GLUCOSE.....	109
QSYMIA.....	61	REGRANEX.....	102
QTERN.....	24	RELAFEN DS.....	71
QUADRACEL.....	11	RELENZA DISKHALER.....	6
QUAZEPAM.....	59	RELEUKO.....	87
QUETIAPINE FUMARATE.....	58	RELEXXII.....	61
quetiapine fumarate tab er 24hr 50 mg, 200 mg, 300 mg, 400 mg (Seroquel xr).....	58	RELION CONFIRM/MICRO TEST.....	109
quetiapine fumarate tab er 24hr 150 mg (Seroquel xr).....	58	RELION PREMIER BLOOD GLUC.....	109
quetiapine fumarate tab 25 mg, 50 mg, 100 mg, 200 mg, 300 mg, 400 mg (Seroquel).....	58	RELION PRIME BLOOD GLUCOS.....	109
QUICKTEK TEST STRIPS.....	109	RELION TRUE METRIX BLOOD.....	109
QUICKVUE AT-HOME COVID-19.....	109	RELION ULTIMA BLOOD GLUCO.....	109
QUILLICHEW ER.....	61	RELISTOR.....	51
QUILLIVANT XR.....	61	RELNATE DHA.....	84
QUINAPRIL/HYDROCHLOROTHIA.....	37	RELTONE.....	51
quinapril hcl tab 5 mg, 10 mg, 20 mg, 40 mg (Accupril).....	37	RELYVRIO.....	80
quinapril-hydrochlorothiazide tab 10-12.5 mg, 20-12.5 mg (Accuretic).....	37	repaglinide tab 0.5 mg, 1 mg, 2 mg.....	24
quinidine gluconate tab er 324 mg.....	35	REPATHA.....	40
QUINIDINE SULFATE.....	35	REPATHA PUSHTRONEX SYSTEM.....	40
quinine sulfate cap 324 mg (Qualaquin).....	7	REPATHA SURECLICK.....	40
QUINTET AC BLOOD GLUCOSE.....	109	RESET.....	113
QUINTET BLOOD GLUCOSE TES.....	109	RESET NON-MONETARY CM.....	114
QULIPTA.....	72	RESET-O.....	114
QUVIVIQ.....	59	RESET-O NON-MONETARY CM.....	114
QVAR REDHALER.....	45	RESTASIS.....	94
R		RETACRIT.....	87
RABAVERT.....	10	RETEVMO.....	16
RABEPRAZOLE SODIUM DR SPR.....	48	RETIN-A MICRO.....	102
rabeprazole sodium ec tab 20 mg (Aciphex).....	48	REVCOVI.....	31
RADICAVA ORS.....	80	REVLIMID.....	114
RADICAVA ORS STARTER KIT.....	80	REXALL BLOOD GLUCOSE TEST.....	109
RAGWITEK.....	12	REXULTI.....	58
raloxifene hcl tab 60 mg (Evista).....	31	REYATAZ.....	6
ramelteon tab 8 mg (Rozerem).....	59	REYVOW.....	72
ramipril cap 1.25 mg, 2.5 mg, 5 mg, 10 mg (Altace).....	37	REZLIDHIA.....	16
RAPAMUNE.....	113	REZUROCK.....	114
RAPID SARS-COV-2 ANTIGEN.....	109	REZVOGLAR KWIKPEN.....	27
rasagiline mesylate tab 0.5 mg (base equiv), 1 mg (base equiv) (Azilect).....	77	RHOFADE.....	102
RASUVO.....	71	RHOPRESSA.....	94
RAVICTI.....	31	RIASTAP.....	90
RAYALDEE.....	31	RIBAVIRIN.....	6
RAYOS.....	19	RIDAURA.....	71
REBIF.....	64	rifabutin cap 150 mg (Mycobutin).....	4
REBIF REBIDOSE.....	64	rifampin cap 150 mg, 300 mg.....	4
REBIF REBIDOSE TITRATION.....	64	RIGHTEST GS100 BLOOD GLUC.....	109
REBIF TITRATION PACK.....	64	RIGHTEST GS300 BLOOD GLUC.....	109
REBINYN.....	90	RIGHTEST GS333 BLOOD GLUC.....	109
RECOMBINATE.....	90	RIGHTEST GS550 BLOOD GLUC.....	109
RECOMBIVAX HB.....	10	RIGHTEST GT333 BLOOD GLUC.....	109
		riluzole tab 50 mg (Rilutek).....	80
		RIMANTADINE HYDROCHLORIDE.....	6
		RINVOQ.....	71
		RINVOQ LQ.....	71
		risedronate sodium tab delayed release 35 mg (Atelvia).....	31
		risedronate sodium tab 5 mg, 30 mg.....	31
		risedronate sodium tab 35 mg, 150 mg (Actonel).....	31

RISPERIDONE ODT.....	58	SAVAYSA.....	88
risperidone orally disintegrating tab 0.5 mg, 1 mg, 2 mg, 3 mg, 4 mg.....	58	SAVELLA.....	64
risperidone soln 1 mg/ml (Risperdal).....	58	SAVELLA TITRATION PACK.....	64
risperidone tab 0.25 mg.....	58	saxagliptin hcl tab 2.5 mg (base equiv), 5 mg (base equiv) (Onglyza).....	24
risperidone tab 0.5 mg, 1 mg, 2 mg, 3 mg, 4 mg (Risperdal).....	58	saxagliptin-metformin hcl tab er 24hr 2.5-1000 mg, 5-500 mg, 5-1000 mg (Kombiglyze xr).....	24
RITEFLO.....	112	SAXENDA.....	61
ritonavir tab 100 mg (Norvir).....	6	SCEMBLIX.....	16
rivastigmine tartrate cap 1.5 mg (base equivalent), 3 mg (base equivalent), 4.5 mg (base equivalent), 6 mg (base equivalent).....	64	scopolamine td patch 72hr 1 mg/3days (Transderm-scop).....	49
rivastigmine td patch 24hr 4.6 mg/24hr, 9.5 mg/24hr, 13.3 mg/24hr (Exelon).....	64	SECUADO.....	58
RIVFLOZA.....	53	SEGLENTIS.....	67
RIXUBIS.....	91	SEGLUROMET.....	24
rizatriptan benzoate oral disintegrating tab 5 mg (base eq).....	72	SELECT-OB.....	84
rizatriptan benzoate oral disintegrating tab 10 mg (base eq) (Maxalt-mlt).....	72	SELECT-OB+DHA.....	84
rizatriptan benzoate tab 5 mg (base equivalent).....	72	selegiline hcl cap 5 mg.....	77
rizatriptan benzoate tab 10 mg (base equivalent) (Maxalt).....	72	selegiline hcl tab 5 mg.....	77
ROCKLATAN.....	94	selenium sulfide lotion 2.5%.....	102
roflumilast tab 250 mcg, 500 mcg (Daliresp).....	45	SELZENTRY.....	6
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).....	77	SEMGLEE.....	27
ropinirole hydrochloride tab 0.25 mg, 0.5 mg, 1 mg, 2 mg, 3 mg, 4 mg, 5 mg.....	77	SE-NATAL 19.....	84
rosuvastatin calcium tab 5 mg, 10 mg, 20 mg, 40 mg (Crestor).....	40	SEREVENT DISKUS.....	45
ROTARIX.....	10	SERNIVO.....	102
ROTATEQ.....	11	SEROSTIM.....	31
ROXYBOND.....	67	sertraline hcl oral concentrate for solution 20 mg/ml (Zoloft).....	55
ROZLYTREK.....	16	sertraline hcl tab 25 mg, 50 mg, 100 mg (Zoloft).....	55
RUBRACA.....	16	SERTRALINE HYDROCHLORIDE.....	55
RUCONEST.....	91	sevelamer carbonate packet 0.8 gm, 2.4 gm (Renvela).....	51
rufinamide susp 40 mg/ml (Banzel).....	75	sevelamer carbonate tab 800 mg (Renvela).....	51
rufinamide tab 200 mg, 400 mg (Banzel).....	75	sevelamer hcl tab 400 mg.....	51
RUKOBIA.....	6	sevelamer hcl tab 800 mg (Renagel).....	51
RYALTRIS.....	42	SEVENFACT.....	91
RYBELSUS.....	24	SEYSARA.....	3
RYCLORA.....	42	SFROWASA.....	51
RYDAPT.....	16	SHINGRIX.....	11
RYTARY.....	77	SIGNIFOR.....	31
RYVENT.....	42	SIKLOS.....	87
S		sildenafil citrate for suspension 10 mg/ml (Revatio).....	41
SAIZEN.....	31	sildenafil citrate tab 25 mg, 50 mg, 100 mg (Viagra).....	41
SANCUSO.....	49	sildenafil citrate tab 20 mg (Revatio).....	41
SANDIMMUNE.....	114	SILIQ.....	102
SANTYL.....	102	silodosin cap 4 mg, 8 mg (Rapaflo).....	53
sapropterin dihydrochloride powder packet 100 mg, 500 mg (Kuvan).....	31	silver sulfadiazine cream 1% (Silvadene).....	102
sapropterin dihydrochloride tab 100 mg (Kuvan).....	31	SIMBRINZA.....	94
		SIMLANDI 1-PEN KIT.....	71
		SIMLANDI 2-PEN KIT.....	71
		SIMPONI.....	71
		simvastatin tab 5 mg.....	40
		simvastatin tab 10 mg, 20 mg, 40 mg, 80 mg (Zocor).....	40
		sirolimus oral soln 1 mg/ml (Rapamune).....	114
		sirolimus tab 0.5 mg, 1 mg, 2 mg (Rapamune).....	114

SIRTURO.....	4	sotalol hcl tab 160 mg (Betapace).....	33
SITAGLIPTIN.....	24	SOTYKTU.....	102
SITAVIG.....	6	SOTYLIZE.....	33
SIVEXTRO.....	8	SOVALDI.....	6
SKYCLARYS.....	80	SOVUNA.....	8
SKYRIZI.....	51	SPEEDY SWAB RAPID COVID-1.....	109
SKYRIZI PEN.....	102	SPIKEVAX COVID-19 VACCINE.....	11
SKYTROFA.....	31	SPINOSAD.....	102
SLYND.....	22	SPIRIVA HANDIHALER.....	45
SMARTEST BLOOD GLUCOSE TE.....	109	SPIRIVA RESPIMAT.....	45
SMART SENSE PREMIUM BLOOD.....	109	spironolactone & hydrochlorothiazide tab 25-25 mg	
SMART SENSE VALUE BLOOD G.....	109	(Aldactaze).....	38
SOANZ.....	38	spironolactone susp 25 mg/5ml (Carospir).....	38
sodium chloride soln nebu 3%.....	43	spironolactone tab 25 mg, 50 mg, 100 mg	
sodium chloride soln nebu 7% (Hyper-sal).....	43	(Aldactone).....	38
sodium citrate & citric acid soln 500-334 mg/5ml.....	53	SPRITAM.....	75
SODIUM FLUORIDE.....	86	SPRIX.....	71
sodium fluoride chew tab 0.25 mg f (from 0.55 mg		SPRYCEL.....	16
naf), 0.5 mg f (from 1.1 mg naf), 1 mg f (from 2.2 mg		stannous fluoride conc 0.63%.....	96
naf).....	86	stannous fluoride gel 0.4%.....	96
sodium fluoride cream 1.1% (Prevident 5000 plus)....	95	STEGLATRO.....	24
sodium fluoride gel 1.1% (0.5% f) (Prevident		STEGLUJAN.....	24
fluoride).....	95	STELARA.....	102
sodium fluoride paste 1.1% (Prevident 5000		STENDRA.....	41
boost).....	96	STIMUFEND.....	87
sodium fluoride-potassium nitrate gel 1.1-5%		STIOLTO RESPIMAT.....	45
(Prevident 5000 sensi).....	96	STIVARGA.....	16
sodium fluoride soln 0.5 mg/ml f (from 1.1 mg/ml		STRENSIQ.....	32
naf).....	86	STRIBILD.....	7
SODIUM OXYBATE.....	64	STRIVERDI RESPIMAT.....	45
sodium phenylbutyrate oral powder 3 gm/teaspoonful		SUCRAID.....	49
(Buphenyl).....	31	sucalfate susp 1 gm/10ml (Carafate).....	48
sodium phenylbutyrate tab 500 mg (Buphenyl).....	32	sucalfate tab 1 gm (Carafate).....	48
sodium polystyrene sulfonate oral susp 15		SUFLAVE.....	47
gm/60ml.....	114	SULCONAZOLE NITRATE.....	102
sodium polystyrene sulfonate powder.....	114	SULFACETAMIDE SODIUM.....	94
sod sulfate-pot sulf-mg sulf oral sol 17.5-3.13-1.6		SULFACETAMIDE SODIUM/PRED.....	94
gm/177ml (Suprep bowel prep ki).....	47	sulfacetamide sodium lotion 10% (acne) (Klaron)....	102
SOFOSBUVIR/VELPATASVIR.....	6	sulfacetamide sodium ophth soln 10% (Bleph-10).....	94
SOGROYA.....	32	SULFADIAZINE.....	3
SOHONOS.....	81	sulfamethoxazole-trimethoprim susp 200-40	
solifenacin succinate tab 5 mg, 10 mg (Vesicare).....	52	mg/5ml.....	8
SOLIQUA 100/33.....	24	sulfamethoxazole-trimethoprim tab 400-80 mg	
SOLOSEC.....	8	(Bactrim).....	8
SOLTAMOX.....	16	sulfamethoxazole-trimethoprim tab 800-160 mg	
SOLUS V2 AUDIBLE TEST.....	109	(Bactrim ds).....	8
SOMA.....	81	SULFAMYLON.....	102
SOMAVERT.....	32	sulfasalazine tab delayed release 500 mg (Azulfidine	
SOOLANTRA.....	102	en-tabs).....	51
sorafenib tosylate tab 200 mg (base equivalent)		sulfasalazine tab 500 mg (Azulfidine).....	51
(Nexavar).....	16	sulindac tab 150 mg, 200 mg.....	71
SORILUX.....	102	sumatriptan-naproxen sodium tab 85-500 mg	
sotalol hcl (afib/af) tab 120 mg, 160 mg (Betapace		(Treximet).....	73
af).....	33	sumatriptan nasal spray 5 mg/act, 20 mg/act	
sotalol hcl (afib/af) tab 80 mg (Betapace af).....	33	(Imitrex).....	72
sotalol hcl tab 240 mg.....	33	sumatriptan succinate inj 6 mg/0.5ml (Imitrex).....	73
sotalol hcl tab 80 mg, 120 mg (Betapace).....	33	SUMATRIPTAN SUCCINATE REF.....	73

sumatriptan succinate solution auto-injector 4 mg/0.5ml, 6 mg/0.5ml (Ilimitrex statdose sys).....	73
sumatriptan succinate tab 25 mg, 50 mg, 100 mg (Ilimitrex).....	73
sunitinib malate cap 12.5 mg (base equivalent), 25 mg (base equivalent), 37.5 mg (base equivalent), 50 mg (base equivalent) (Sutent).....	16
SUNLENCA.....	7
SUNOSI.....	61
SUPREME TEST STRIPS.....	109
SUTAB.....	47
SYMDEKO.....	46
SYMLINPEN 60.....	24
SYMLINPEN 120.....	24
SYMPAZAN.....	75
SYMPROIC.....	51
SYMTUZA.....	7
SYNAREL.....	32
SYNDROS.....	49
SYNJARDY.....	24
SYNJARDY XR.....	24
SYNTHROID.....	28
T	
TABLOID.....	16
TABRECTA.....	16
tacrolimus cap 0.5 mg, 1 mg, 5 mg (Prograf).....	114
tacrolimus oint 0.03%, 0.1% (Protopic).....	102
tadalafil tab 2.5 mg, 5 mg, 10 mg, 20 mg (Cialis).....	41
tadalafil tab 20 mg (pah) (Adcirca).....	41
TADLIQ.....	41
TAFINLAR.....	16
tafluprost preservative free (pf) ophth soln 0.0015% (Zioptan).....	94
TAGRISSE.....	16
TAKHZYRO.....	91
TALICIA.....	48
TALTZ.....	102
TALZENNA.....	16
tamoxifen citrate tab 10 mg (base equivalent), 20 mg (base equivalent).....	16
tamsulosin hcl cap 0.4 mg (Flomax).....	53
TAPERDEX 7-DAY.....	19
TAPERDEX 12-DAY.....	19
TARON-C DHA.....	84
TARPEYO.....	19
TASCENSO ODT.....	64
TASIGNA.....	16
tasimelteon capsule 20 mg (Hetlioz).....	59
tavorole soln 5% (Kerydin).....	102
TAVALISSE.....	91
TAVNEOS.....	91
TAZAROTENE.....	102
tazarotene cream 0.1% (Tazorac).....	102
tazarotene gel 0.05%, 0.1% (Tazorac).....	102
TAZORAC.....	102
TAZVERIK.....	16
TDVAX.....	11
TEGRETOL.....	75
TEGRETOL-XR.....	75
TEGSEDI.....	64
TELMISARTAN/AMLODIPINE.....	37
telmisartan-hydrochlorothiazide tab 40-12.5 mg, 80-12.5 mg, 80-25 mg (Micardis hct).....	37
telmisartan tab 40 mg, 80 mg (Micardis).....	37
telmisartan tab 20 mg (Micardis).....	37
temazepam cap 7.5 mg, 22.5 mg (Restoril).....	59
temazepam cap 15 mg, 30 mg (Restoril).....	59
temozolomide cap 5 mg, 20 mg, 100 mg, 140 mg, 180 mg, 250 mg (Temodar).....	16
TENCON.....	65
TENIVAC.....	11
tenofovir disoproxil fumarate tab 300 mg (Viread).....	7
TEPMETKO.....	17
terazosin hcl cap 1 mg (base equivalent), 2 mg (base equivalent), 5 mg (base equivalent), 10 mg (base equivalent).....	37
terbinafine hcl tab 250 mg.....	4
terbutaline sulfate tab 2.5 mg, 5 mg.....	45
terconazole vaginal cream 0.4%, 0.8%.....	52
terconazole vaginal suppos 80 mg.....	52
teriflunomide tab 7 mg, 14 mg (Aubagio).....	64
TERIPARATIDE.....	32
teriparatide (recombinant) soln pen-inj 600 mcg/2.4ml (Forteo).....	32
TESTOSTERONE.....	19
testosterone cypionate im inj in oil 100 mg/ml.....	19
testosterone cypionate im inj in oil 200 mg/ml (Depo-testosterone).....	19
TESTOSTERONE ENANTHATE.....	19
TESTOSTERONE PUMP.....	19
testosterone td gel 12.5 mg/act (1%).....	19
testosterone td gel 20.25 mg/act (1.62%) (Androgel pump).....	19
testosterone td gel 25 mg/2.5gm (1%), 50 mg/5gm (1%), 20.25 mg/1.25gm (1.62%), 40.5 mg/2.5gm (1.62%) (Androgel).....	19
testosterone td soln 30 mg/act.....	19
tetrabenazine tab 12.5 mg, 25 mg (Xenazine).....	64
tetracaine hcl ophth soln 0.5%.....	94
tetracycline hcl cap 250 mg, 500 mg.....	3
TETRACYCLINE HYDROCHLORID.....	3
TEXACORT.....	102
TEZSPIRE.....	45
TGT BLOOD GLUCOSE TEST ST.....	109
THALITONE.....	38
THALOMID.....	114
THEO-24.....	45
theophylline elixir 80 mg/15ml.....	45
THEOPHYLLINE ER.....	45
theophylline soln 80 mg/15ml.....	45
theophylline tab er 12hr 300 mg, 450 mg.....	45
theophylline tab er 24hr 400 mg, 600 mg.....	45
THIOLA EC.....	53

thioridazine hcl tab 10 mg, 25 mg, 50 mg, 100 mg.....	58	topiramate sprinkle cap 15 mg, 25 mg (Topamax sprinkle).....	76
thiothixene cap 1 mg, 2 mg, 5 mg, 10 mg.....	58	topiramate tab 25 mg, 50 mg, 100 mg, 200 mg (Topamax).....	76
THRIVITE RX.....	84	toremifene citrate tab 60 mg (base equivalent) (Fareston).....	17
THYQUIDITY.....	28	torsemide tab 5 mg, 10 mg, 20 mg, 100 mg.....	38
THYROID.....	28	TOSYMRA.....	73
tiagabine hcl tab 2 mg, 4 mg, 12 mg, 16 mg (Gabitril).....	76	TOUJEO MAX SOLOSTAR.....	27
TIBSOVO.....	17	TOUJEO SOLOSTAR.....	27
timolol maleate ophth gel forming soln 0.25%, 0.5% (Timoptic-xe).....	94	TRACLEER.....	41
timolol maleate ophth soln 0.25%, 0.5% (Timoptic).....	94	TRADJENTA.....	24
timolol maleate ophth soln 0.5% (once-daily) (Istalol).....	94	tramadol-acetaminophen tab 37.5-325 mg (Ultracet).....	68
timolol maleate preservative free ophth soln 0.25%, 0.5% (Timoptic ocudose).....	94	TRAMADOL HCL ER.....	67
timolol maleate tab 5 mg, 10 mg, 20 mg.....	34	tramadol hcl tab er 24hr 100 mg, 200 mg, 300 mg.....	67
tinidazole tab 250 mg, 500 mg.....	8	tramadol hcl tab 100 mg.....	68
tiopronin tab delayed release 100 mg, 300 mg (Thiola ec).....	53	tramadol hcl tab 50 mg (Ultram).....	68
tiopronin tab 100 mg (Thiola).....	53	TRAMADOL HYDROCHLORIDE.....	68
tiotropium bromide monohydrate inhal cap 18 mcg (base equiv) (Spiriva handihaler).....	45	TRANDOLAPRIL/VERAPAMIL HC.....	37
TIROSINT.....	28	trandolapril tab 1 mg, 2 mg, 4 mg.....	37
TIROSINT-SOL.....	28	tranexamic acid tab 650 mg (Lysteda).....	88
TIVICAY.....	7	tranylcypromine sulfate tab 10 mg (Parnate).....	56
TIVICAY PD.....	7	travoprost ophth soln 0.004% (benzalkonium free) (bak free) (Travatan z).....	94
tizanidine hcl cap 2 mg (base equivalent), 4 mg (base equivalent), 6 mg (base equivalent) (Zanaflex).....	81	trazodone hcl tab 300 mg.....	56
tizanidine hcl tab 2 mg (base equivalent).....	81	trazodone hcl tab 50 mg, 100 mg, 150 mg.....	56
tizanidine hcl tab 4 mg (base equivalent) (Zanaflex).....	81	TRECTOR.....	4
TLANDO.....	19	TRELEGY ELLIPTA.....	45
TOBI PODHALER.....	3	TREMFYA.....	102
TOBRADEX.....	94	TRESIBA.....	27
TOBRADEX ST.....	94	TRESIBA FLEXTOUCH.....	27
TOBRAMYCIN.....	3	tretinoin cap 10 mg.....	17
tobramycin-dexamethasone ophth susp 0.3-0.1% (Tobradex).....	94	tretinoin cream 0.025%, 0.05%, 0.1% (Retin-a).....	102
tobramycin nebu soln 300 mg/4ml (Bethkis).....	3	tretinoin gel 0.01%, 0.025% (Retin-a).....	102
tobramycin nebu soln 300 mg/5ml (Tobi).....	3	tretinoin gel 0.05% (Atralin).....	102
tobramycin ophth soln 0.3% (Tobrex).....	94	tretinoin microsphere gel 0.04%, 0.1% (Retin-a micro).....	103
TOBEX.....	94	tretinoin microsphere gel 0.08% (Retin-a micro pump).....	103
TODAY SPONGE.....	53	TRETEN.....	91
TOLAK.....	102	TREXALL.....	17
tolcapone tab 100 mg (Tasmar).....	77	TREZIX.....	68
TOLECTIN 600.....	71	triamcinolone acetonide aerosol soln 0.147 mg/gm (Kenalog).....	103
TOLMETIN SODIUM.....	71	triamcinolone acetonide cream 0.025%, 0.1%, 0.5%.....	103
TOLSURA.....	4	triamcinolone acetonide dental paste 0.1%.....	96
tolterodine tartrate cap er 24hr 2 mg, 4 mg (Detrol la).....	52	triamcinolone acetonide lotion 0.025%, 0.1%.....	103
tolterodine tartrate tab 1 mg, 2 mg (Detrol).....	52	triamcinolone acetonide oint 0.05%.....	103
tolvaptan tab 15 mg, 30 mg (Samsca).....	32	triamcinolone acetonide oint 0.025%, 0.1%, 0.5%.....	103
topiramate cap er 24hr 25 mg, 50 mg, 100 mg, 200 mg (Trokendi xr).....	76	triamterene & hydrochlorothiazide cap 37.5-25 mg (Dyazide).....	38
topiramate cap er 24hr sprinkle 25 mg, 50 mg, 100 mg, 150 mg, 200 mg (Qudexy xr).....	76	triamterene & hydrochlorothiazide tab 37.5-25 mg (Maxzide-25).....	38
		triamterene & hydrochlorothiazide tab 75-50 mg (Maxzide).....	38

triamterene cap 50 mg, 100 mg (Dyrenium)	38	ULTRAVATE.....	103
triazolam tab 0.125 mg	59	UNISTRIP1 GENERIC.....	109
triazolam tab 0.25 mg (Halcion)	59	UPNEEQ.....	94
TRICARE.....	84	UPTRAVI.....	41
trientine hcl cap 250 mg (Syprine)	114	UPTRAVI TITRATION PACK.....	41
TRIENTINE HYDROCHLORIDE.....	114	URSODIOL.....	51
trifluoperazine hcl tab 1 mg (base equivalent), 2 mg (base equivalent), 5 mg (base equivalent), 10 mg (base equivalent)	58	ursodiol cap 300 mg (Actigall)	51
TRIFLURIDINE.....	94	ursodiol tab 250 mg (Urso 250)	51
TRIHXYPHENIDYL HCL.....	77	ursodiol tab 500 mg (Urso forte)	51
trihexyphenidyl hcl tab 2 mg, 5 mg	77	V	
TRIJARDY XR.....	24	valacyclovir hcl tab 1 gm (Valtrex)	7
TRIKAFTA.....	46	valacyclovir hcl tab 500 mg (Valtrex)	7
trimethobenzamide hcl cap 300 mg (Tigan)	49	VALCHLOR.....	103
trimethoprim tab 100 mg	8	valganciclovir hcl for soln 50 mg/ml (base equiv) (Valcyte)	7
trimipramine maleate cap 25 mg, 50 mg, 100 mg	56	valganciclovir hcl tab 450 mg (base equivalent) (Valcyte)	7
TRINATAL RX 1.....	84	valproate sodium oral soln 250 mg/5ml (base equiv)	76
TRINATE.....	84	valproic acid cap 250 mg	76
TRINTELLIX.....	56	VALSARTAN.....	37
TRISTART DHA.....	84	valsartan-hydrochlorothiazide tab 80-12.5 mg, 160-12.5 mg, 160-25 mg, 320-12.5 mg, 320-25 mg (Diovan hct)	37
TRIUMEQ.....	7	valsartan tab 40 mg, 80 mg, 160 mg, 320 mg (Diovan)	37
TRIUMEQ PD.....	7	VALTOCO 5 MG DOSE.....	76
tropium chloride cap er 24hr 60 mg	52	VALTOCO 10 MG DOSE.....	76
tropium chloride tab 20 mg	52	VALTOCO 15 MG DOSE.....	76
TRUDHESA.....	73	VALTOCO 20 MG DOSE.....	76
TRUE FOCUS SELF MONITORIN.....	109	vancomycin hcl cap 250 mg (base equivalent) (Vancocin)	9
TRUE METRIX BLOOD GLUCOSE.....	109	vancomycin hcl cap 125 mg (base equivalent) (Vancocin hcl)	8
TRUE METRIX SELF MONITORI.....	109	vancomycin hcl for oral soln 25 mg/ml (base equivalent) (Firvanq)	9
TRUETEST STRIPS.....	109	vancomycin hcl for oral soln 50 mg/ml (base equivalent) (Vancomycin hydrochlo)	9
TRUETRACK BLOOD GLUCOSE T.....	109	VANDAZOLE.....	53
TRUETRACK TEST.....	109	VANFLYTA.....	17
TRULANCE.....	51	VAQTA.....	11
TRULICITY.....	25	vardenafil hcl orally disintegrating tab 10 mg (Staxyn)	41
TRUMENBA.....	11	vardenafil hcl tab 2.5 mg, 5 mg	41
TRUQAP.....	17	vardenafil hcl tab 10 mg, 20 mg (Levitra)	41
TUDORZA PRESSAIR.....	46	varenicline tartrate tab 0.5 mg (base equiv), 1 mg (base equiv)	64
TUKYSA.....	17	varenicline tartrate tab 11 x 0.5 mg & 42 x 1 mg start pack	64
TURALIO.....	17	VARIVAX.....	11
TUXARIN ER.....	43	VARUBI.....	49
TWINRIX.....	11	VASCEPA.....	40
TWIRLA.....	22	VAXELIS.....	11
TWYNEO.....	103	VAXNEUVANCE.....	11
TYBLUME.....	22	VCF VAGINAL CONTRACEPTIVE.....	53
TYBOST.....	7	VECAMYL.....	37
TYMLOS.....	32		
TYRVAYA.....	94		
TYVASO.....	41		
TYVASO DPI MAINTENANCE KI.....	41		
TYVASO DPI TITRATION KIT.....	41		
TYVASO REFILL.....	41		
TYVASO STARTER.....	41		
U			
UBRELVY.....	73		
UDENYCA.....	87		
UDENYCA ONBODY.....	88		

VECTICAL.....	103	VITAFOL-ONE.....	85
VELIVET.....	22	VITAFOL STRIPS.....	85
VELPHORO.....	51	VITAFOL ULTRA.....	85
VELSIPITY.....	51	VITAMEDMD ONE RX/QUATREFO.....	85
VELTASSA.....	114	VITAMEDMD REDICHEW RX.....	85
VEMLIDY.....	7	VITAPEARL.....	85
VENCLEXTA.....	17	VITATHELY/GINGER.....	85
VENCLEXTA STARTING PACK.....	17	VITATRUE.....	85
VENLAFAXINE BESYLATE ER.....	56	VITRAKVI.....	17
venlafaxine hcl cap er 24hr 37.5 mg (base equivalent), 75 mg (base equivalent), 150 mg (base equivalent) (Effexor xr).....	56	VIVA DHA.....	85
venlafaxine hcl tab er 24hr 37.5 mg (base equivalent), 75 mg (base equivalent), 150 mg (base equivalent), 225 mg (base equivalent).....	56	VIVAGUARD INO BLOOD GLUCO.....	109
venlafaxine hcl tab 25 mg (base equivalent), 37.5 mg (base equivalent), 50 mg (base equivalent), 75 mg (base equivalent), 100 mg (base equivalent).....	56	VIVJOA.....	4
VENTAVIS.....	41	VIVOTIF.....	11
VENTOLIN HFA.....	46	VIZIMPRO.....	17
VEOZAH.....	32	VOGELXO.....	19
verapamil hcl cap er 24hr 120 mg, 180 mg, 240 mg (Verelan).....	34	VOGELXO PUMP.....	19
VERAPAMIL HCL ER.....	34	VONJO.....	17
VERAPAMIL HCL SR.....	34	VONVENDI.....	91
verapamil hcl tab er 120 mg, 180 mg, 240 mg (Calan sr).....	34	VOQUEZNA.....	48
verapamil hcl tab 40 mg, 80 mg, 120 mg.....	34	VOQUEZNA DUAL PAK.....	48
VERAPAMIL HYDROCHLORIDE E.....	35	VOQUEZNA TRIPLE PAK.....	48
VERASENS BLOOD GLUCOSE TE.....	109	voriconazole for susp 40 mg/ml (Vfend).....	4
VEREGEN.....	103	voriconazole tab 50 mg, 200 mg (Vfend).....	4
VERELAN PM.....	35	VORTEX HOLDING CHAMBER/MA.....	112
VERKAZIA.....	94	VORTEX VALVED HOLDING CHA.....	112
VERQUVO.....	41	VOSEVI.....	7
VERSACLOZ.....	58	VOWST.....	51
VERZENIO.....	17	VOXZOGO.....	32
VESICARE LS.....	52	VRAYLAR.....	58
VEVYE.....	94	VTAMA.....	103
VIBERZI.....	51	VUITY.....	94
VICTOZA.....	25	VUMERITY.....	64
vigabatrin powd pack 500 mg (Sabril).....	76	VUSION.....	103
vigabatrin tab 500 mg (Sabril).....	76	VYLEESI.....	64
VIJOICE.....	114	VYNDAMAX.....	41
vilazodone hcl tab 10 mg, 20 mg, 40 mg (Viibryd).....	56	VYNDAQEL.....	41
VILTEPSO.....	80	VYONDYS 53.....	80
VINATE DHA RF.....	84	VYZULTA.....	95
VINATE II.....	84	W	
VINATE ONE.....	84	WAINUA.....	64
VIOKACE.....	49	WAKIX.....	61
VIRACEPT.....	7	warfarin sodium tab 1 mg, 2 mg, 2.5 mg, 3 mg, 4 mg, 5 mg, 6 mg, 7.5 mg, 10 mg.....	88
VIREAD.....	7	WEGOVY.....	61
VISTOGARD.....	104	WELIREG.....	17
VITAFOL FE+.....	84	WESCAP-C DHA.....	85
VITAFOL GUMMIES.....	85	WESCAP-PN DHA.....	85
VITAFOL-NANO.....	85	WESNATAL DHA COMPLETE.....	85
VITAFOL-OB.....	85	WESNATE DHA.....	85
VITAFOL-OB+DHA.....	85	WESTAB PLUS.....	85
		WESTGEL DHA.....	85
		WIDE-SEAL SILICONE DIAPHR.....	112
		WILATE.....	91
		WINLEVI.....	103
		WYNZORA.....	103

X

XACIATO.....	53
XADAGO.....	77
XALKORI.....	17
XARELTO.....	88
XARELTO STARTER PACK.....	88
XATMEP.....	17
XCOPRI.....	76
XDEMVY.....	95
XELJANZ.....	71
XELJANZ XR.....	71
XELPROS.....	95
XELSTRYM.....	61
XENICAL.....	61
XERESE.....	103
XERMELO.....	51
XHANCE.....	42
XIFAXAN.....	9
XIGDUO XR.....	25
XIIDRA.....	95
XOFLUZA.....	7
XOLAIR.....	46
XOPENEX HFA.....	46
XOSPATA.....	17
XPHOZAH.....	32
XPOVIO.....	17
XPOVIO 60 MG TWICE WEEKLY.....	17
XPOVIO 80 MG TWICE WEEKLY.....	17
XTAMPZA ER.....	68
XTANDI.....	17
XULTOPHY 100/3.6.....	25
XURIDEN.....	32
XYNTHA.....	91
XYNTHA SOLOFUSE.....	91
XYOSTED.....	19
XYREM.....	64
XYWAV.....	64

Y

YONSA.....	17
YOSPRALA.....	91
YUFLYMA CD/UC/HS STARTER.....	71
YUFLYMA 1-PEN KIT.....	72
YUFLYMA 2-PEN KIT.....	72
YUFLYMA 2-SYRINGE KIT.....	72
YUPELRI.....	46
YUSIMRY.....	72

Z

zafirlukast tab 10 mg, 20 mg (Accolate).....	46
zaleplon cap 5 mg, 10 mg.....	59
ZALVIT.....	85
ZARONTIN.....	76
ZARXIO.....	88
ZAVZPRET.....	73
ZEGALOGUE.....	25

ZEJULA.....	17
ZELAPAR.....	78
ZELBORAF.....	17
ZEMBRACE SYMTOUCH.....	73
ZENPEP.....	49
ZEPATIER.....	7
ZEPBOUND.....	61
ZEPOSIA.....	64
ZEPOSIA 7-DAY STARTER PAC.....	64
ZEPOSIA STARTER KIT.....	64
ZERVIATE.....	95
ZETONNA.....	42
zidovudine cap 100 mg (Retrovir).....	7
zidovudine syrup 10 mg/ml (Retrovir).....	7
zidovudine tab 300 mg.....	7
ZIEXTENZO.....	88
ZILBRYSQ.....	91
zileuton tab er 12hr 600 mg.....	46
ZILXI.....	103
ZIMHI.....	104
ZIPHEX.....	85
ziprasidone hcl cap 20 mg, 40 mg, 60 mg, 80 mg (Geodon).....	58
ZIRGAN.....	95
ZITHROMAX.....	2
ZITUVIO.....	25
ZOKINVY.....	114
ZOLINZA.....	17
zolmitriptan nasal spray 5 mg/spray unit (Zomig).....	73
zolmitriptan orally disintegrating tab 2.5 mg, 5 mg (Zomig zmt).....	73
zolmitriptan tab 2.5 mg, 5 mg (Zomig).....	73
ZOLPIDEM TARTRATE.....	59
zolpidem tartrate tab er 6.25 mg, 12.5 mg (Ambien cr).....	59
zolpidem tartrate tab 5 mg, 10 mg (Ambien).....	59
ZOMACTON.....	32
ZONISADE.....	76
zonisamide cap 50 mg.....	76
zonisamide cap 25 mg (Zonegran).....	76
zonisamide cap 100 mg (Zonegran).....	76
ZONTIVITY.....	91
ZORTRESS.....	114
ZORYVE.....	103
ZTALMY.....	76
ZTLIDO.....	103
ZUBSOLV.....	68
ZURZUVAE.....	56
ZYCLARA PUMP.....	103
ZYDELIG.....	17
ZYFLO.....	46
ZYKADIA.....	17
ZYLET.....	95
ZYMFENTRA 1-PEN.....	51
ZYMFENTRA 2-PEN.....	51
ZYMFENTRA 2-SYRINGE.....	51
ZYPITAMAG.....	40