



# Your 2026 Prescription Drug List

## Traditional 4-Tier

Effective September 1, 2026



**United  
Healthcare**

This Prescription Drug List (PDL) is accurate as of September 1, 2026 and is subject to change after this date. This PDL is a list of the most commonly prescribed medications and applies to members of our UnitedHealthcare, River Valley, Optimum Choice, Inc., Global Solutions, Student Resources, New Jersey Oxford and UnitedHealthOne medical plans when sold in your market with a pharmacy benefit subject to the Traditional 4-Tier PDL. Your estimated coverage and copayment/coinsurance may vary based on the benefit plan you choose and the effective date of the plan.

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# Understanding your Prescription Drug List (PDL)

## What is a PDL?

This document is a list of the most commonly prescribed medications. It includes both brand-name and generic prescription medications approved by the Food and Drug Administration (FDA). Medications are listed by common categories or classes and placed in tiers that represent the cost you pay out-of-pocket. Then, they are listed in alphabetical order.

## How do I use my PDL?

You and your doctor can check the PDL to help you select the most cost-effective prescription medications. This guide tells you if a medication is generic or a brand-name, and if there are coverage requirements or limits that apply. Bring this list with you when you see your doctor. If your medication is not listed here, please visit your plan's member website or call the toll-free phone number on your member ID card.

## What are tiers?

Tiers are the different cost levels you pay for a medication. Your plan sets a cost for each tier. This is how much you will pay when you fill a prescription. See page 5 for more information.

## When does the PDL change?

PDL changes typically occur 2-3 times per year. However, changes that have a positive impact for you – such as coverage for new medications or cost savings – may occur at any time. You can log in to your plan's member website listed on your member ID card at any time to check your medication coverage and lower-cost options.

## Why are some medications excluded from coverage?

We review treatments based on their total value, including how well they work, how safe they are, their cost and whether options are available to treat the same or similar medical conditions. Certain medications may not be covered or be subject to prior authorization (sometimes referred to as precertification)<sup>1</sup> if your plan covers other lower-cost medications. For example, there may be a lower-cost covered option or an over-the-counter medication that works the same way.<sup>2</sup> In some cases, the same product can be made by 2 or more drug companies, but greatly vary in cost. In these instances, only the lower-cost product may be covered.

You should review your benefit plan documents to confirm if any medications are excluded from your plan. You can log in to your plan's member website listed on your member ID card at any time to check your medication coverage. Talk to your doctor to see if there are lower-cost options or over-the-counter medications available.

## Who decides which medications are covered?

The UnitedHealthcare® Pharmacy and Therapeutics Committee, which includes both internal and external doctors and pharmacists, meets regularly to provide clinical reviews of all medications. Using this information, senior UnitedHealth Group® doctors and business leaders meet to evaluate overall health care value. They also set coverage and tier status for all medications.

## About this PDL

Where differences exist between this PDL and your benefit plan documents, the benefit plan documents rule. **This PDL is not a full list of medications, and not all medications listed may be covered by your plan.**

1. Depending on your benefit, you may have notification or medical necessity requirements for select medications.
2. For New Jersey plans, a prescription drug product that is therapeutically equal to an over-the-counter drug may be covered if it is determined to be medically necessary.



# Medication tips

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

Generic medications contain the same active ingredients (what makes the medication work) as brand-name medications, but they often cost less. Once the patent for a brand-name medication ends, the FDA can approve a generic version with the same active ingredients. These types of medications are known as generic medications. Sometimes, the same company that makes a brand-name medication also makes the generic version.

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

If your doctor gives you a prescription for a brand-name medication, ask if a generic or lower-cost option is available and could be right for you. Generic medications are usually your lowest-cost option, but not always. For some plans, if a brand-name drug is filled, and a generic is available, your cost-share may be the copayment PLUS the cost difference between the brand-name drug and the generic.

## What if I am taking a specialty medication?

Specialty medications are high-cost and are used to treat rare or complex conditions that require extra care and support. For most plans, these medications are managed through a specialty pharmacy. Take advantage of personalized support designed to help you get the most out of your treatment plan. To learn more, visit your plan's website or call the toll-free number on your member ID card.

Please note, not all specialty medications are listed here. If you're taking a specialty medication that is on a higher tier, call the toll-free phone number on your member ID card to talk with a pharmacist about finding lower-cost options.

# Reading your PDL

The PDL gives you choices. This allows you and your doctor to decide your best course of treatment. In this PDL, brand-name medications are shown in UPPERCASE. Generics are in lowercase.

## Tier information

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

Drug Tier	Includes	Helpful Tips
Tier 1	\$ <b>Lower-cost</b> Medications that provide the highest overall value. Mostly generic drugs. Some brand-name drugs may also be included.	Use Tier 1 drugs for the lowest out-of-pocket costs.
Tiers 2 and 3	\$\$ <b>Mid-range cost</b> Medications that provide good overall value. Mainly preferred brand-name drugs.	Use Tier 2 or Tier 3 drugs, instead of Tier 4, to help lower your out-of-pocket costs.
Tier 4	\$\$\$ <b>Highest-cost</b> Medications that provide the lowest overall value.	Many Tier 4 drugs have lower-cost options in Tiers 1, 2 or 3. Ask your doctor if they could work for you.

## Over-the-counter (OTC) medications

An OTC medication may be the right option for some conditions. Talk to your doctor about available OTC options. Even though these medications may not be covered by your pharmacy benefit, they may cost less than a prescription medication.



# Reading your PDL (continued)

## Drug list information

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

<b>E</b>	<b>May be excluded from coverage. May be subject to prior authorization for fully insured benefit plans governed by state law in New Jersey</b> – There may be over-the-counter (OTC) or lower-cost covered options available.
<b>H</b>	<b>Health Care Reform Preventive</b> – This medication is part of a health care reform preventive benefit and is generally available at no cost to you.
<b>H-PA</b>	<b>Health Care Reform Preventive with prior authorization</b> – May be part of health care reform preventive benefit and available at no cost to you if prior authorization criteria are met.
<b>PA</b>	<b>Prior authorization (sometimes referred to as precertification)</b> <sup>3</sup> – Requires your doctor to provide information about why you are taking a medication before your plan can decide how it may be covered.
<b>QL</b>	<b>Quantity limits</b> <sup>4</sup> – The largest quantity of medication covered per copayment or in a defined period of time.
<b>RS</b>	<b>Refill and Save Program</b> <sup>4</sup> – Save money on your copayment when you refill your prescription on time as prescribed. Program eligibility may vary.
<b>SP</b>	<b>Specialty medication</b> – Specialty medications treat complex or rare conditions and may require special storage and handling. You may have to get these medications from a specialty pharmacy.
<b>ST</b>	<b>Step therapy (referred to as First Start in New Jersey)</b> – Requires prior authorization and may require you to try one or more other medications before the medication you are requesting may be covered. <sup>4</sup>

## Coverage details

Some drug classes in this PDL have other important coverage details. Review this list to see if drug classes that apply to you are noted. Please review your plan documents for coverage and cost-share.

- **Central nervous system: sedatives/hypnotics**  
Coverage is set by your prescription drug benefit plan.
- **Diabetes: blood glucose monitoring, insulin, non-insulin**  
Diabetic supplies and prescription medications may be subject to different cost-share amounts for New Jersey Oxford plans. Please see your Summary of Benefits and Coverage (SBC) for details.
- **Diabetes: continuous glucose monitors, sensors**  
Coverage is set by your prescription drug benefit plan. Diabetic self-management items, including continuous glucose monitors, may be covered under your pharmacy and/or medical plan.
- **Endocrine: growth hormone**  
Coverage is set by your prescription drug benefit plan.

3. For certain Student Resources plans, applies to specialty medications and topical retinoids only.

4. Not applicable to certain Student Resources plans.



# Reading your PDL (continued)

- **Infertility**

Coverage is set by your prescription drug benefit plan. Prior authorization (sometimes referred to as precertification) may be required for New Jersey Oxford plans or where a state mandates infertility drug coverage.

- **Medications for sexual dysfunction**

Coverage is set by your prescription drug benefit plan.

- **Termination of pregnancy**

Coverage under the prescription drug benefit is set by your medical benefit plan. Please review your plan documents for benefit coverage, exclusions and cost-sharing. Find out more by calling the number on your member ID card.

## Questions

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



Call the toll-free phone number on your member ID card



Visit your plan's member website listed on your member ID card to:

- View your pharmacy benefit and coverage information, including prescription history
- View medication interactions and side effects
- Locate a participating retail pharmacy by ZIP code
- Look up possible lower-cost medication alternatives
- Compare medication pricing and options

And, if home delivery services are included in your pharmacy benefit, you can also:

- Refill prescriptions
- Check the status of your order
- Set up reminders for refills
- Manage your account

Drug name	Drug tier	Requirements & limits
<b>Analgesics - Drugs for pain</b>		
acetaminophen-codeine oral tablet	1	QL
apap-caff-dihydrocodeine	1	QL
ascomp-codeine	1	QL
bac (butalbital-acetamin-caff)	1	QL
BELBUCA	3	PA, QL
buprenorphine	1	PA, QL
butalbital-acetaminophen oral tablet 50-325 mg	1	
butalbital-apap-caff-cod oral capsule 50-325-40-30 mg	1	QL
butalbital-apap-caffeine	1	QL
butalbital-asa-caff-codeine	1	QL
butalbital-aspirin-caffeine	1	
butorphanol tartrate nasal	1	QL
endocet	1	QL
fentanyl transdermal patch 72 hour 100 mcg/hr, 12 mcg/hr, 25 mcg/hr, 50 mcg/hr, 75 mcg/hr	1	PA, QL
glydo	1	
hydrocodone-acetaminophen oral solution 10-300 mg/15ml, 10-325 mg/15ml, 7.5-325 mg/15ml	1	QL
hydrocodone-acetaminophen oral tablet 10-325 mg, 2.5-325 mg, 5-325 mg, 7.5-325 mg	1	QL
hydromorphone hcl oral tablet	1	QL
JOURNAVX	4	QL
lidocaine external ointment 5 %	1	QL
lidocaine external patch 5 %	1	PA, QL
lidocaine hcl urethral/mucosal	1	
lidocaine-prilocaine external cream	1	
morphine sulfate er oral tablet extended release	1	PA, QL
morphine sulfate oral tablet	1	QL
NUCYNTA	4	QL

Drug name	Drug tier	Requirements & limits
NUCYNTA ER	3	PA, QL
oxycodone hcl oral capsule	1	QL
oxycodone hcl oral solution	1	QL
oxycodone hcl oral tablet	1	QL
oxycodone-acetaminophen oral tablet 10-325 mg, 2.5-325 mg, 5-325 mg, 7.5-325 mg	1	QL
premium lidocaine external ointment 5 %	1	QL
tramadol hcl (er biphasic) oral tablet extended release 24 hour	1	(generic for Ryzolt), QL
tramadol hcl er tablet extended release	1	(generic for Ultram ER), QL
tramadol hcl oral tablet 50 mg	1	QL
tramadol-acetaminophen	1	QL
XTAMPZA ER	4	PA, QL
ZTLIDO	3	PA, QL

#### Analgesics - Drugs for pain and inflammation

aspirin 81 oral tablet delayed release	E	H
BAYER LOW DOSE ORAL TABLET CHEWABLE	E	H
celecoxib oral	1	
diclofenac potassium oral tablet 50 mg	1	
diclofenac sodium er	1	
diclofenac sodium oral	1	
diclofenac-misoprostol	1	
ec-naproxen	1	
etodolac	1	
etodolac er	1	
flurbiprofen oral	1	
hydrocodone-ibuprofen	1	QL
ibuprofen oral tablet 400 mg, 600 mg, 800 mg	1	
indomethacin er	1	
indomethacin oral capsule	1	
ketorolac tromethamine oral	1	
mefenamic acid oral	1	

See page 5-7 for coverage details.



Drug name	Drug tier	Requirements & limits
meloxicam oral tablet	1	
morphine sulfate (concentrate) oral solution 100 mg/5ml, 20 mg/ml	1	QL
morphine sulfate oral solution	1	QL
nabumetone oral	1	
naproxen dr	1	
naproxen oral tablet	1	
naproxen oral tablet delayed release	1	
naproxen sodium oral tablet 275 mg, 550 mg	1	
oxaprozin oral tablet	1	
piroxicam oral	1	
sulindac oral	1	
<b>Anti-addiction / Substance abuse treatment agents</b>		
acamprosate calcium	1	
buprenorphine hcl sublingual	1	QL
buprenorphine hcl-naloxone hcl sublingual film	1	QL
buprenorphine hcl-naloxone hcl sublingual tablet sublingual	1	QL
bupropion hcl er (smoking det)	1	H
disulfiram oral	1	
eq nicotine step 3	1	H
ft naloxone hcl	1	QL
gnp naloxone hcl	1	QL
habitrol	1	H
KLOXXADO	1	QL
naloxone hcl nasal	1	QL
naltrexone hcl oral	1	QL
NARCAN	1	QL (includes Narcan OTC)
NICODERM CQ	4	H
NICORETTE MOUTH/THROAT GUM	4	H
NICORETTE STARTER KIT	4	H
nicotine	1	H
nicotine mini	1	H

Drug name	Drug tier	Requirements & limits
nicotine mouth/throat gum	1	H
nicotine polacrilex	1	H
nicotine polacrilex mini	1	H
nicotine step 1	1	H
nicotine step 2	1	H
nicotine step 3	1	H
nicotine transdermal patch 24 hour	1	H
OPVEE	1	QL
REXTOVY	1	QL
THRIVE	4	H
varenicline	1	H
ZIMHI INJECTION SOLUTION PREFILLED SYRINGE 5 MG/0.5ML	2	QL
ZUBSOLV	1	QL
<b>Antibacterials - Drugs for infections</b>		
amoxicillin	1	
amoxicillin-potassium clavulanate	1	
ampicillin	1	
azithromycin oral	1	
BLUJEPA	4	QL
cefadroxil	1	
cefdinir	1	
cefixime oral capsule	1	
cefpodoxime proxetil oral tablet	1	
cefprozil	1	
cefuroxime axetil	1	
cephalexin	1	
ciprofloxacin hcl oral	1	
clarithromycin oral	1	
clindamycin hcl oral	1	
clindamycin palmitate hcl	1	
clindamycin phosphate vaginal	1	
CLINDESSE	2	
dicloxacillin sodium	1	
doxycycline hyclate oral capsule	1	

See page 5-7 for coverage details.



Drug name	Drug tier	Requirements & limits
doxycycline hyclate oral tablet 100 mg, 20 mg	1	
doxycycline monohydrate oral capsule 100 mg, 50 mg	1	
doxycycline monohydrate oral suspension reconstituted	1	
doxycycline monohydrate oral tablet	1	
erythromycin base oral tablet	1	
erythromycin ethylsuccinate oral suspension reconstituted	1	
fidaxomicin	1	QL
fosfomycin tromethamine	1	
gentamicin sulfate external	1	QL
levofloxacin oral tablet	1	
LIKMEZ	4	
linezolid oral tablet	1	
methenamine hippurate	1	
metronidazole oral tablet 250 mg, 500 mg	1	
metronidazole vaginal	1	
minocycline hcl oral capsule	1	
moxifloxacin hcl oral	1	
mupirocin cream	1	QL
mupirocin ointment	1	QL
neomycin sulfate oral	1	
nitrofurantoin macrocrystal	1	
nitrofurantoin monohydrate macrocrystals	1	
nitrofurantoin oral suspension 25 mg/5ml	1	
NUZYRA ORAL	4	QL
penicillin v potassium	1	
silver sulfadiazine external	1	
ssd	1	
sulfamethoxazole-trimethoprim oral suspension 200-40 mg/5ml	1	
sulfamethoxazole-trimethoprim oral tablet	1	
sulfatrim pediatric	1	

Drug name	Drug tier	Requirements & limits
tetracycline hcl oral capsule	1	
tinidazole oral	1	
trimethoprim oral	1	
vancomycin hcl oral capsule	1	
VANDAZOLE	4	
XACIATO	2	QL
XEPI EXTERNAL CREAM 1 %	3	QL
XIFAXAN	3	PA, QL
<b>Anticoagulants - Drugs to treat or prevent blood clots</b>		
dabigatran etexilate mesylate	1	QL
ELIQUIS	2	QL
enoxaparin sodium injection solution prefilled syringe	1	QL
jantoven	1	
rivaroxaban oral tablet	1	QL
warfarin sodium oral	1	
XARELTO	2	QL
<b>Anticonvulsants - Drugs for seizures</b>		
APTIOM	4	PA
BRIVIACT ORAL SOLUTION	4	PA
BRIVIACT ORAL TABLET	3	PA
carbamazepine er	1	
carbamazepine oral tablet	1	
carbamazepine oral tablet chewable	1	
CARBATROL	4	
clobazam oral suspension 2.5 mg/ml	1	PA
clobazam oral tablet	1	PA
DEPAKOTE	4	PA
DEPAKOTE ER	4	PA
DEPAKOTE SPRINKLES	4	PA
diazepam rectal	1	QL
DILANTIN	3	
divalproex sodium er	1	
divalproex sodium oral	1	
EPIDIOLEX	3	PA, SP

See page 5-7 for coverage details.



Drug name	Drug tier	Requirements & limits
epitol oral tablet 200 mg	1	
eslicarbazepine acetate	1	PA
ethosuximide oral	1	
felbamate oral tablet	1	
FYCOMPA ORAL SUSPENSION	4	PA
FYCOMPA ORAL TABLET	3	PA
gabapentin oral capsule	1	
gabapentin oral solution 250 mg/5ml	1	
gabapentin oral tablet 600 mg, 800 mg	1	
KEPPRA ORAL	4	PA
KEPPRA XR	4	PA
lacosamide oral solution 10 mg/ml, 100 mg/10ml, 50 mg/5ml	1	
lacosamide oral tablet	1	
LAMICTAL ORAL TABLET	4	PA
LAMICTAL XR ORAL TABLET EXTENDED RELEASE 24 HOUR	3	PA
lamotrigine er	1	
lamotrigine oral tablet	1	
lamotrigine oral tablet chewable	1	
lamotrigine oral tablet dispersible	1	PA
levetiracetam er	1	
levetiracetam oral solution	1	
levetiracetam oral tablet	1	
LIBERVANT BUCCAL FILM 10 MG, 15 MG, 5 MG, 7.5 MG	3	PA, QL
MOTPOLY XR	3	PA
NAYZILAM	3	PA, QL
ONFI	4	PA
oxcarbazepine	1	
perampanel oral tablet	1	PA
phenobarbital oral elixir 20 mg/5ml	1	
phenobarbital oral tablet	1	
phenytek	1	
phenytoin sodium extended	1	

Drug name	Drug tier	Requirements & limits
primidone oral tablet 125 mg	1	PA
primidone oral tablet 250 mg, 50 mg	1	
roweepra	1	
rufinamide oral suspension 40 mg/ml	1	
rufinamide oral tablet	1	PA
subvenite oral tablet	1	
SYMPAZAN	4	PA
TEGRETOL ORAL TABLET	4	
TEGRETOL-XR	4	
TOPAMAX	4	PA
TOPAMAX SPRINKLE	4	PA
topiramate oral capsule sprinkle	1	
topiramate oral tablet	1	
TRILEPTAL	4	PA
valproic acid oral capsule	1	
valproic acid oral solution 250 mg/5ml	1	
VALTOCO	3	PA, QL
VIMPAT ORAL	4	PA
XCOPRI	3	PA
ZONEGRAN	4	PA
ZONISADE	4	PA
zonisamide oral	1	

#### Antidementia agents - Drugs for Alzheimer's disease and dementia

donepezil hcl oral tablet	1	
memantine hcl er	1	
memantine hcl oral tablet	1	
rivastigmine	1	
rivastigmine tartrate	1	

#### Antidepressants - Drugs for depression

amitriptyline hcl oral	1	
AUVELITY	4	ST, QL
bupropion hcl er (sr)	1	
bupropion hcl oral	1	

See page 5-7 for coverage details.



Drug name	Drug tier	Requirements & limits	Drug name	Drug tier	Requirements & limits
citalopram hydrobromide oral solution 10 mg/5ml	1		dronabinol	1	
citalopram hydrobromide oral tablet	1		granisetron hcl oral	1	
clomipramine hcl oral	1		metoclopramide hcl oral solution	1	
desipramine hcl oral	1		metoclopramide hcl oral tablet	1	
desvenlafaxine succinate er	1		ondansetron hcl oral solution 4 mg/5ml	1	
doxepin hcl oral capsule	1		ondansetron hcl oral tablet	1	
doxepin hcl oral concentrate	1		ondansetron odt oral tablet dispersible 4 mg, 8 mg	1	
duloxetine hcl oral capsule delayed release particles 20 mg, 30 mg, 60 mg	1		perphenazine oral	1	
escitalopram oxalate oral solution	1		prochlorperazine maleate oral	1	
escitalopram oxalate oral tablet	1		promethazine hcl oral	1	
FETZIMA	4	ST, QL	promethazine hcl rectal	1	
fluoxetine hcl oral capsule	1		scopolamine	1	
fluoxetine hcl oral solution	1		<b>Antifungals - Drugs for fungal infections</b>		
fluoxetine hcl oral tablet	1		cicloclodan	1	
flvoxamine maleate	1		ciclopirox external	1	
flvoxamine maleate er	1		ciclopirox olamine external cream	1	
imipramine hcl oral	1		clotrimazole mouth/throat	1	
mirtazapine oral	1		CRESEMBA ORAL	3	
nortriptyline hcl oral capsule	1		econazole nitrate external cream	1	
olanzapine-fluoxetine hcl	1	QL	fluconazole oral	1	
paroxetine hcl er	1		griseofulvin microsize oral	1	
paroxetine hcl oral tablet	1		GNAZOLE-1	3	
RALDESY	4	PA	itraconazole oral capsule	1	QL
sertraline hcl oral tablet	1		JUBLIA	4	PA, ST, QL
trazodone hcl oral	1		ketoconazole external cream	1	QL
TRINTELLIX	4	ST, QL	ketoconazole external shampoo	1	
venlafaxine hcl	1		ketoconazole oral	1	
venlafaxine hcl er oral capsule extended release 24 hour	1		klayesta	1	QL
vilazodone hcl	1		nyamyc	1	QL
ZURZUVAE	2	PA, QL, SP	nystatin external	1	QL
<b>Antiemetics - Drugs for nausea and vomiting</b>			nystatin mouth/throat	1	
aprepitant oral capsule 125 mg, 40 mg, 80 mg	1	QL	nystatin oral	1	
			nystatin-triamcinolone	1	

See page 5-7 for coverage details.



Drug name	Drug tier	Requirements & limits
nystop	1	QL
posaconazole oral tablet delayed release	1	
terbinafine hcl oral	1	
terconazole	1	
VIVJOA	3	PA, QL
voriconazole oral tablet	1	QL

#### Antigout agents - Drugs for gout

allopurinol oral tablet 100 mg, 300 mg	1	
colchicine oral	1	
colchicine-probenecid	1	
febuxostat	1	
MITIGARE	2	
probenecid	1	

#### Antimigraine agents - Drugs for migraines

AIMOVIG SUBCUTANEOUS SOLUTION AUTO-INJECTOR 140 MG/ML, 70 MG/ML	2	PA, ST, QL
almotriptan malate	1	QL
eletriptan hydrobromide	1	QL
EMGALITY	2	PA, ST, QL
frovatriptan succinate	1	QL
naratriptan hcl	1	QL
NURTEC	2	PA, ST, QL
QULIPTA	2	PA, ST, QL
REYVOW	4	PA, ST, QL
rizatriptan benzoate oral tablet dispersible	1	QL
sumatriptan nasal	1	QL
sumatriptan succinate oral	1	QL
sumatriptan succinate subcutaneous	1	QL
UBRELVY	2	PA, ST, QL
ZAVZPRET	4	PA, ST, QL
zolmitriptan oral	1	QL
ZOMIG NASAL SOLUTION 2.5 MG	3	QL
ZOMIG NASAL SOLUTION 5 MG	1	QL

Drug name	Drug tier	Requirements & limits
<b>Antimychasthenic agents - Drugs to treat myasthenia gravis</b>		
pyridostigmine bromide er oral tablet extended release	1	
pyridostigmine bromide oral tablet 60 mg	1	

#### Antimycobacterials - Drugs to treat infections

dapsone oral	1	
ethambutol hcl oral	1	
isoniazid oral tablet	1	
rifabutin	1	
rifampin oral	1	

#### Antineoplastics - Drugs for cancer

ALECENSA	2	PA, QL, SP
ALUNBRIG	2	PA, QL, SP
anastrozole oral	1	H-PA
AUGTYRO	2	PA, QL, SP
BESREMI	4	PA, QL, SP
bicalutamide	1	
CABOMETYX	2	PA, QL, SP
CALQUENCE	2	PA, QL, SP
COTELLIC	2	PA, QL, SP
cyclophosphamide oral capsule	1	
ENSACOVE	2	PA, QL, SP
ERIVEDGE	2	PA, QL, SP
ERLEADA	2	PA, QL, SP
exemestane	1	H-PA
GAVRETO	4	PA, QL, SP
hydroxyurea oral	1	
ICLUSIG	3	PA, QL, SP
IDHIFA	2	PA, QL, SP
IMKELDI	4	PA, QL, SP
KISQALI	2	PA, QL, SP
KOSELUGO ORAL CAPSULE	3	PA, QL, SP
lederle leucovorin	1	
LENVIMA	2	PA, QL, SP
letrozole oral	1	H-PA
leucovorin calcium oral	1	

See page 5-7 for coverage details.



Drug name	Drug tier	Requirements & limits
LUMAKRAS	4	PA, QL, SP
LYNPARZA	2	PA, QL, SP
mercaptopurine oral tablet	1	
NUBEQA	2	PA, QL, SP
ODOMZO	2	PA, QL, SP
ORGOVYX	3	PA, QL, SP
PIQRAY	2	PA, QL, SP
RETEVMO	4	PA, QL, SP
ROZLYTREK	2	PA, QL, SP
RYDAPT	2	PA, QL, SP
SCEMBLIX	4	PA, QL, SP
STIVARGA	2	PA, QL, SP
TABRECTA	4	PA, QL, SP
TAGRISO	3	PA, QL, SP
tamoxifen citrate oral tablet 10 mg	1	
tamoxifen citrate oral tablet 20 mg	1	H-PA
TEPMETKO	4	PA, QL, SP
TRUQAP	2	PA, QL, SP
VERZENIO	2	PA, QL, SP
VITRAKVI	2	PA, QL, SP
XTANDI	2	PA, QL, SP
ZEJULA	2	PA, QL, SP
ZELBORAF	2	PA, QL, SP

#### Antiparasitics - Drugs for parasitic infections

albendazole oral	1	QL
ARAKODA	4	QL
atovaquone	1	
atovaquone-proguanil hcl	1	
hydroxychloroquine sulfate oral	1	
ivermectin oral tablet 3 mg	1	PA, QL
ivermectin oral tablet 6 mg	1	PA
mefloquine hcl	1	
nitazoxanide oral	1	QL
permethrin external	1	
spinosad	1	

Drug name	Drug tier	Requirements & limits
<b>Antiparkinson agents - Drugs for Parkinson's disease</b>		
amantadine hcl oral capsule	1	
amantadine hcl oral solution 50 mg/5ml	1	
amantadine hcl oral tablet	1	
benztropine mesylate oral	1	
bromocriptine mesylate oral tablet	1	
carbidopa-levodopa er oral tablet extended release	1	
carbidopa-levodopa oral tablet	1	
CREXONT	4	ST
entacapone	1	
INBRIJA	3	PA, QL, SP
NEUPRO	3	
pramipexole dihydrochloride	1	
rasagiline mesylate oral	1	
ropinirole hcl	1	
trihexyphenidyl hcl oral tablet	1	

#### Antiplatelets - Drugs for heart attack and stroke prevention

cilostazol	1	
clopidogrel bisulfate oral	1	
prasugrel hcl	1	
ticagrelor	1	QL

#### Antipsychotics - Drugs for mood disorders

aripiprazole oral solution	1	
aripiprazole oral tablet	1	
asenapine maleate	1	QL
CAPLYTA	4	PA, ST, QL
chlorpromazine hcl oral tablet	1	QL
clozapine oral tablet	1	
FANAPT	4	QL
fluphenazine hcl oral tablet	1	
haloperidol oral	1	
lurasidone hcl	1	QL
olanzapine oral	1	
paliperidone er	1	QL

See page 5-7 for coverage details.



Drug name	Drug tier	Requirements & limits
quetiapine fumarate	1	
quetiapine fumarate er	1	
REXULTI	4	QL
risperidone	1	
VRAYLAR	4	QL
VRAYLAR	4	QL
ziprasidone hcl	1	
<b>Antivirals - Drugs for viral infections</b>		
acyclovir external ointment	1	QL
acyclovir oral capsule	1	
acyclovir oral suspension 200 mg/5ml	1	
acyclovir oral tablet	1	
BIKTARVY	4	QL
CIMDUO	2	QL
darunavir	1	
DELSTRIGO	2	QL
DESCOVY ORAL TABLET 120-15 MG	4	QL
DESCOVY ORAL TABLET 200-25 MG	4	QL, H
DOVATO	2	QL
emtricitabine-tenofovir df oral tablet 100-150 mg, 133-200 mg, 167-250 mg	1	QL
emtricitabine-tenofovir df oral tablet 200-300 mg	1	QL, H
entecavir	1	
EPCLUSA	2	PA, QL, SP
famciclovir oral	1	
GENVOYA	4	QL
HARVONI	2	PA, ST, QL, SP
ISENTRESS HD	2	
ISENTRESS ORAL TABLET	2	
JULUCA	2	QL
LAGEVRIO	2	QL
LEDIPASVIR-SOFOSBUVIR	2	PA, ST, QL, SP
MAVYRET	2	PA, QL, SP
ODEFSEY	4	QL

Drug name	Drug tier	Requirements & limits
oseltamivir phosphate oral	1	
PAXLOVID	2	QL
PIFELTRO	3	
PREVYMIS ORAL TABLET	2	PA
PREZCOBIX	2	
ritonavir	1	
SOFOSBUVIR-VELPATASVIR	2	PA, QL, SP
SYMFI	2	QL
tenofovir disoproxil fumarate	1	H-PA
TIVICAY	3	
TRIUMEQ	2	QL
TRUVADA ORAL TABLET 100-150 MG, 133-200 MG, 167-250 MG	4	QL
valacyclovir hcl oral	1	QL
valganciclovir hcl oral tablet	1	
VOSEVI	2	PA, QL, SP
XOFLUZA	3	QL
<b>Anxiolytics - Drugs for anxiety</b>		
alprazolam er	1	
alprazolam oral	1	
alprazolam xr	1	
buspirone hcl oral	1	
chlordiazepoxide hcl	1	
clonazepam oral	1	
clorazepate dipotassium	1	
diazepam oral solution	1	
diazepam oral tablet	1	
estazolam	1	
hydroxyzine hcl oral syrup 10 mg/5ml	1	
hydroxyzine hcl oral tablet	1	
hydroxyzine pamoate oral	1	
lorazepam intensol	1	
lorazepam oral concentrate 2 mg/ml	1	
lorazepam oral tablet	1	
triazolam	1	

See page 5-7 for coverage details.



Drug name	Drug tier	Requirements & limits
<b>Bipolar agents - Drugs for mood disorders</b>		
lithium carbonate er	1	
lithium carbonate oral	1	
<b>Cardiovascular agents - Drugs for heart and circulation conditions</b>		
acebutolol hcl oral	1	
acetazolamide er	1	
acetazolamide oral	1	
aliskiren fumarate	1	
amiloride hcl oral	1	
amiloride-hydrochlorothiazide	1	
amiodarone hcl oral	1	
amlodipine besylate oral	1	
amlodipine besylate-benazepril hcl	1	
amlodipine besylate-valsartan	1	
ARBLI	4	PA
atenolol oral	1	
atenolol-chlorthalidone	1	
ATORVALIQ	4	PA
atorvastatin calcium oral tablet 10 mg, 20 mg	1	H-PA
atorvastatin calcium oral tablet 40 mg, 80 mg	1	
benazepril hcl oral	1	
benazepril-hydrochlorothiazide	1	
bisoprolol fumarate oral	1	
bisoprolol-hydrochlorothiazide	1	
bumetanide oral	1	
candesartan cilexetil	1	
candesartan cilexetil-hctz	1	
captopril oral	1	
cartia xt	1	
carvedilol	1	
chlorthalidone	1	
cholestyramine light	1	
cholestyramine oral	1	
clonidine hcl oral	1	

Drug name	Drug tier	Requirements & limits
clonidine patch weekly	1	
colesevelam hcl oral tablet	1	
colestipol hcl oral tablet	1	
CORLANOR ORAL TABLET	3	PA, QL
digoxin oral tablet	1	
diltiazem hcl er	1	
diltiazem hcl er beads	1	
diltiazem hcl er coated beads	1	
diltiazem hcl oral	1	
dilt-xr	1	
dofetilide	1	
doxazosin mesylate oral	1	
enalapril maleate oral solution	1	PA
enalapril maleate oral tablet	1	
enalapril-hydrochlorothiazide	1	
eplerenone	1	
ezetimibe	1	
ezetimibe-simvastatin	1	
felodipine er	1	
fenofibrate micronized	1	
fenofibrate oral capsule 134 mg, 200 mg, 67 mg	1	
fenofibrate oral tablet 145 mg, 160 mg, 48 mg, 54 mg	1	
fenofibric acid oral capsule delayed release	1	
flecainide acetate	1	
fluvastatin sodium	1	
fosinopril sodium	1	
furosemide oral	1	
gemfibrozil oral	1	
guanfacine hcl	1	
HEMANGEOL	3	
hydralazine hcl oral	1	
hydrochlorothiazide oral	1	
indapamide	1	
INZIRQO	4	PA
irbesartan	1	

See page 5-7 for coverage details.



Drug name	Drug tier	Requirements & limits	Drug name	Drug tier	Requirements & limits
irbesartan-hydrochlorothiazide	1		nitroglycerin transdermal	1	
isosorb dinitrate-hydralazine	1		NORLIQVA	4	PA
isosorbide dinitrate oral tablet 10 mg, 20 mg, 30 mg, 5 mg	1		olmesartan medoxomil oral	1	
isosorbide mononitrate er	1		olmesartan medoxomil-hctz	1	
ivabradine hcl	1	PA, QL	omega-3-acid ethyl esters	1	
KAPSPARGO SPRINKLE	4		pentoxifylline er	1	
KERENDIA	4	PA, QL	perindopril erbumine	1	
labetalol hcl oral	1		pindolol	1	
lisinopril oral	1		pravastatin sodium	1	
lisinopril-hydrochlorothiazide	1		prazosin hcl oral	1	
LODOCO	4	QL	prevalite	1	
LOPRESSOR ORAL SOLUTION	4	PA	propafenone hcl	1	
losartan potassium oral	1		propafenone hcl er	1	
losartan potassium-hctz	1		propranolol hcl er	1	
lovastatin oral	1	H	propranolol hcl oral	1	
matzim la	1		ramipril	1	
metolazone	1		ranolazine er	1	
metoprolol succinate er	1		REPATHA	2	QL
metoprolol tartrate oral tablet 100 mg, 25 mg, 50 mg	1		REPATHA PUSHTRONEX SYSTEM SUBCUTANEOUS SOLUTION CARTRIDGE 420 MG/3.5ML	2	QL
metoprolol-hydrochlorothiazide	1		REPATHA SURECLICK	2	QL
mexiletine hcl oral	1		rosuvastatin calcium oral	1	
midodrine hcl	1		sacubitril-valsartan	1	PA, QL
minoxidil oral	1		simvastatin oral tablet 10 mg, 20 mg, 40 mg, 5 mg	1	H-PA
MULTAQ	4	PA	simvastatin oral tablet 80 mg	1	
nadolol oral	1		sotalol hcl (af)	1	
nebivolol hcl	1		sotalol hcl oral	1	
NEXLETOL	2	PA, ST, QL	spironolactone oral suspension	1	PA
NEXLIZET	2	PA, ST, QL	spironolactone oral tablet	1	
niacin er (antihyperlipidemic)	1		spironolactone-hctz	1	
nifedipine er	1		taztia xt oral capsule extended release 24 hour 120 mg, 180 mg, 240 mg, 300 mg, 360 mg	1	
nifedipine er osmotic release	1		TEKTURNA	3	
nifedipine oral	1		telmisartan	1	
NITRO-BID	2		telmisartan-hctz	1	
nitroglycerin rectal	1	QL			
nitroglycerin sublingual	1				

See page 5-7 for coverage details.



Drug name	Drug tier	Requirements & limits
tiadylt er	1	
toremide	1	
trandolapril	1	
triamterene oral	1	
triamterene-hctz	1	
valsartan oral tablet	1	
valsartan-hydrochlorothiazide	1	
verapamil hcl er	1	
verapamil hcl oral	1	
VERQUVO	4	PA, QL
VYNDAQEL	2	PA, QL, SP
<b>Central nervous system agents - Drugs for attention deficit disorder</b>		
amphetamine sulfate	1	
amphetamine-dextroamphetamine	1	
amphetamine-dextroamphetamine er	1	QL
amphet-dextroamphet 3-bead er	1	QL
atomoxetine hcl	1	QL
AZSTARYS	3	ST, QL
clonidine hcl er	1	
dexmethylphenidate hcl	1	
dexmethylphenidate hcl er	1	QL
dextroamphetamine sulfate er	1	QL
dextroamphetamine sulfate oral solution	1	
FOCALIN	4	
guanfacine hcl er	1	
JORNAY PM	3	ST, QL
lisdexamfetamine dimesylate	1	QL
methylphenidate hcl er (cd)	1	QL
methylphenidate hcl er (la)	1	QL
methylphenidate hcl er (osm) oral tablet extended release 18 mg, 27 mg, 36 mg, 54 mg	1	QL
methylphenidate hcl er oral tablet extended release	1	QL

Drug name	Drug tier	Requirements & limits
methylphenidate hcl oral	1	
ONYDA XR	3	QL
XELSTRYM	3	PA, QL
<b>Central nervous system agents - Drugs for multiple sclerosis</b>		
AVONEX	2	PA, QL, SP
BAFIERTAM	2	PA, QL, SP
BETASERON	2	PA, QL, SP
KESIMPTA	2	PA, QL, SP
MAVENCLAD	3	PA, ST, QL, SP
MAYZENT	3	PA, QL, SP
PLEGRIDY	3	PA, QL, SP
PLEGRIDY INTRAMUSCULAR	3	PA, QL, SP
<b>Central nervous system agents - Miscellaneous</b>		
AUSTEDO	2	PA, QL, SP
AUSTEDO XR	2	PA, QL, SP
INGREZZA	2	PA, QL, SP
INGREZZA SPRINKLE	2	PA, QL, SP
LYRICA ORAL CAPSULE	4	PA
NUEDEXTA	2	PA, QL
pregabalin oral capsule	1	
RADICAVA ORS	3	PA, QL, SP
RADICAVA ORS STARTER KIT	3	PA, QL, SP
SAVELLA	4	QL
TEGLUTIK	3	PA, SP
TIGLUTIK	3	PA, SP
VEOZAH	4	PA, QL
ZEPOSIA	3	PA, ST, QL, SP
<b>Dental and oral agents - Drugs for mouth and throat conditions</b>		
cevimeline hcl	1	
chlorhexidine gluconate mouth/throat	1	
CLINPRO 5000	3	
DENTA 5000 PLUS	4	
DENTAGEL	4	
FLUORIDEX	3	

See page 5-7 for coverage details.



Drug name	Drug tier	Requirements & limits	Drug name	Drug tier	Requirements & limits
FLUORIDEX ENHANCED WHITENING	3		AMZEEQ	4	QL
FLUORIMAX 5000	3		ANZUPGO	4	PA, QL, SP
FRAICHE 5000 DENTAL DENTAL GEL 1.1 %	4		AVAR CLEANSER	4	
JUST RIGHT 5000	3		azelaic acid external	1	
lidocaine hcl mouth/throat	1		AZELEX	3	QL
lidocaine viscous hcl	1		benzoyl peroxide-erythromycin	1	QL
perlogard	1		betamethasone dipropionate aug external cream	1	
pilocarpine hcl oral	1		betamethasone dipropionate aug external lotion	1	
PREVIDENT 5000 BOOSTER PLUS	3		betamethasone dipropionate aug external ointment	1	
PREVIDENT 5000 DRY MOUTH	4		betamethasone dipropionate external	1	
PREVIDENT 5000 KIDS	3		betamethasone valerate external cream	1	
PREVIDENT 5000 ORTHO DEFENSE	3		betamethasone valerate external lotion	1	
PREVIDENT 5000 PLUS	4		betamethasone valerate external ointment	1	
PREVIDENT DENTAL	4		brimonidine tartrate external	1	PA, QL
PREVIDENT MOUTH/THROAT	3		calcipotriene external cream	1	QL
sf 5000 plus	1		calcipotriene external ointment	1	
sf gel 1.1%	1		calcipotriene external solution	1	QL
sodium fluoride 5000 plus	1		CIBINQO	2	PA, QL, SP
sodium fluoride 5000 ppm	1		ciclopirox olamine external suspension	1	
sodium fluoride 5000 ppm dental cream 1.1 %	1		claravis	1	
sodium fluoride dental	1		clindacin	1	
sodium fluoride mouth/throat	1		clindacin etz external swab	1	
triamcinolone acetonide mouth/throat	1		clindacin-p	1	
<b>Dermatological agents - Drugs for skin conditions</b>					
accutane	1		clindamycin phos (twice-daily) gel 1 % external	1	(generic for Cleocin-T), QL
acitretin	1		clindamycin phos-benzoyl perox external gel 1.2-5 %	1	QL
adapalene-benzoyl peroxide external gel 0.1-2.5 %	1	QL	clindamycin phos-benzoyl perox gel 1-5 % external	1	QL
ADBRY	2	PA, QL, SP	clindamycin phosphate external	1	
AKLIEF	4	PA, QL	clobetasol prop emollient base	1	QL
alclometasone dipropionate external cream	1		clobetasol propionate e	1	QL
amnestem	1				

See page 5-7 for coverage details.



Drug name	Drug tier	Requirements & limits	Drug name	Drug tier	Requirements & limits
clobetasol propionate external cream 0.05 %	1	QL	fluticasone propionate external cream	1	
clobetasol propionate external gel	1	QL	fluticasone propionate external ointment	1	
clobetasol propionate external liquid	1	QL	halobetasol propionate external cream	1	QL
clobetasol propionate external ointment	1	QL	halobetasol propionate external ointment	1	QL
clobetasol propionate external solution	1	QL	hydrocortisone external cream 2.5 %	1	
clotrimazole-betamethasone	1		hydrocortisone external lotion 2.5 %	1	
dapsone external	1	QL	hydrocortisone external ointment 1 %, 2.5 %	1	
DERMA-SMOOTH/FS BODY	4	QL	hydrocortisone valerate external cream	1	QL
DERMA-SMOOTH/FS SCALP	4		imiquimod external cream 5 %	1	
desonide external cream	1	QL	isotretinoin oral capsule 10 mg, 20 mg, 30 mg, 40 mg	1	
desonide external lotion	1	QL	KLISYRI	4	ST, QL
desonide external ointment	1	QL	metronidazole external cream	1	
desoximetasone external cream	1	QL	metronidazole external gel 0.75 %	1	
desoximetasone external ointment	1	QL	metronidazole external lotion	1	
diclofenac sodium external gel 3 %	1	PA, QL	MIRVASO	2	PA, QL
DRYSOL	4		mometasone furoate external	1	
DUPIXENT	2	PA, QL, SP	NEMLUVIO	2	PA, QL, SP
EBGLYSS	2	PA, QL, SP	neuac	1	QL
ENSTILAR	4	QL	OPZELURA	4	PA, QL, SP
erythromycin external	1		PANRETIN	3	
EUCRISA	3	ST, QL	pimecrolimus	1	QL
FINACEA EXTERNAL FOAM	4		podofilox external solution	1	
fluocinolone acetonide body	1	QL	RHOFADE	4	PA, QL
fluocinolone acetonide external	1	QL	SANTYL	3	QL
fluocinolone acetonide scalp	1		selenium sulfide external lotion	1	
fluocinonide external cream 0.05 %	1		sodium sulfacetamide wash	1	
fluocinonide external gel	1		SOOLANTRA	1	QL
fluocinonide external ointment	1		STARJEMZA SUBCUTANEOUS	2	PA, QL, SP
fluocinonide external solution	1		STEQEYMA SUBCUTANEOUS	2	PA, QL, SP
fluorouracil external cream 5 %	1		sulfacetamide sodium (acne)	1	

See page 5-7 for coverage details.



Drug name	Drug tier	Requirements & limits	Drug name	Drug tier	Requirements & limits
sulfacetamide sodium external	1		ACCU-CHEK SOFTCLIX LANCET DEVICE KIT	1	
sulfacetamide sodium-sulfur external liquid 10-5 %, 9-4 %	1		AQ INSULIN SYRINGE	2	QL
sulfacetamide sodium-sulfur external suspension 10-5 %	1		AQINJECT PEN NEEDLE	2	QL
sulfacetamide sod-sulfur wash external liquid 9-4 %	1		BD AUTOSHIELD DUO PEN NEEDLES	2	QL
TACLONEX	1		BD BLUNT FILL NEEDLE	2	
tacrolimus external	1	QL	BD BLUNT FILL NEEDLE W/ FILTER	2	
TREMFYA	2	PA, QL, SP	BD ECLIPSE NEEDLE 18G X 1-1/2" , 25G X 5/8" , 27G X 1/2"	2	
tretinoin external cream	1	QL	BD ECLIPSE NEEDLE 23G X 1" (OTC)	2	
triamcinolone acetonide external cream 0.025 %, 0.1 %	1		BD ECLIPSE NEEDLE 23G X 1" (RX)	2	
triamcinolone acetonide external cream 0.5 %	1	QL	BD ECLIPSE SHIELDED NEEDLE	2	
triamcinolone acetonide external lotion	1		BD PEN NEEDLE ULTRAFINE	2	QL
triamcinolone acetonide external ointment 0.025 %, 0.1 %, 0.5 %	1		BD SAFETYGLIDE NEEDLE 23G X 1-1/2"	2	
triderm	1	QL	BD SAFETYGLIDE SHIELDED NEEDLE 21G X 1-1/2"	2	
urea external cream 20 %, 40 %, 45 %	1		BD ULTRA-FINE INSULIN SYRINGES	2	QL
VTAMA	4	PA, QL	BD ULTRA-FINE PEN NEEDLES	2	QL
WEZLANA SUBCUTANEOUS	2	PA, QL, SP	CAREPOINT POLY HUB NEEDLE 18G X 1" , 21G X 1" , 22G X 1" , 23G X 1" , 25G X 1" , 25G X 5/8"	2	
ZELSUVMI	4	QL	CAREPOINT POLY HUB NEEDLE 22G X 1-1/2"	2	
zenatane	1		CAREPOINT PRECISION POLY HUB	2	
ZILXI	4	PA, ST, QL	CAREPOINT SAFETY 1ST NEEDLE	2	
ZORYVE	4	PA, QL	CEQUR SIMPLICITY 2U 8PK	3	ST
<b>Diabetes - Glucose monitoring and supplies</b>			CONTOUR NEXT EZ KIT W/ DEVICE	1	
ACCU-CHEK FASTCLIX LANCET	1		CONTOUR NEXT GEN MONITOR KIT W/DEVICE	1	
ACCU-CHEK FASTCLIX LANCET DEVICE KIT	1		CONTOUR NEXT GEN TEST STRIPS	1	QL
ACCU-CHEK GUIDE	2		CONTOUR NEXT MONITOR KIT W/DEVICE	1	
ACCU-CHEK GUIDE KIT W/ DEVICE	2				
ACCU-CHEK GUIDE TEST STRIPS	2	QL			
ACCU-CHEK SOFTCLIX LANCET	1				

See page 5-7 for coverage details.



Drug name	Drug tier	Requirements & limits	Drug name	Drug tier	Requirements & limits
CONTOUR NEXT ONE KIT	1		MONOJECT HYPODERMIC NEEDLE 18G X 1"	2	
CONTOUR PLUS BLUE KIT W/ DEVICE	1		NOVOFINE AUTOCOVER PEN NEEDLE 30G X 8 MM	2	QL
CONTOUR PLUS TEST STRIP	1	QL	NOVOFINE PEN NEEDLE	2	QL
DEXCOM G6 RECEIVER	3	PA, QL	NOVOFINE PLUS PEN NEEDLE	2	QL
DEXCOM G6 SENSOR	3	PA, QL	NOVOPEN ECHO	3	
DEXCOM G6 TRANSMITTER	3	PA, QL	OMNIPOD 5 DEXCOM INTRO KIT	2	PA, QL
DEXCOM G7 RECEIVER	3	PA, QL	OMNIPOD 5 DEXCOM PODS	2	PA, QL
DEXCOM G7 SENSOR	3	PA, QL	OMNIPOD 5 G7 INTRO (GEN 5) KIT	2	PA, QL
DROPSAFE SAFETY SYRINGE/ NEEDLE	2	QL	OMNIPOD 5 G7 PODS (GEN 5)	2	PA, QL
DROPSAFE SICURA	2		OMNIPOD 5 LIBRE PODS	2	PA
EMBECTA INSULIN SYRINGE	2	QL	OMNIPOD 5 LIBRE2 G6 INTRO GEN5	2	PA, QL
FREESTYLE LIBRE 14 DAY READER	3	PA, QL	RELION GLUCOSE TEST STRIPS	4	QL
FREESTYLE LIBRE 14 DAY SENSOR	3	PA, QL	TECHLITE INSULIN SYRINGES (Arkray)	2	QL
FREESTYLE LIBRE 2 PLUS SENSOR	3	PA, QL	TECHLITE PEN NEEDLES	2	QL
FREESTYLE LIBRE 2 READER	3	PA, QL	TECHLITE PLUS PEN NEEDLES	2	QL
FREESTYLE LIBRE 2 SENSOR	3	PA, QL	TWIIST REFILL KIT/INFUSION SET	2	PA, QL
FREESTYLE LIBRE 3 PLUS SENSOR	3	PA, QL	TWIIST STARTER KIT	2	PA, QL
FREESTYLE LIBRE 3 READER	3	PA, QL	VERISAFE SAFETY STERILE NEEDLE	2	
FREESTYLE LIBRE 3 SENSOR	3	PA, QL			
GVOKE HYPOPEN	2	QL	<b>Diabetes - Insulin</b>		
GVOKE KIT	2	QL	HUMALOG CARTRIDGE	2	QL
GVOKE PFS	2	QL	HUMALOG KWIKPEN	2	QL
INPEN	3	ST	HUMALOG MIX 50/50 KWIKPEN	2	QL
INSULIN PEN NEEDLES 29G X 12MM , 30G X 5 MM , 31G X 5 MM, 31G X 6 MM , 31G X 8 MM, 32G X 4 MM	2	QL	HUMALOG MIX 50/50 VIAL SUBCUTANEOUS SUSPENSION (50-50) 100 UNIT/ML	1	QL
INSULIN SYRINGES 27G X 1/2" 0.5 ML, 27G X 1/2" 1 ML, 28G X 1/2" 0.5 ML, 28G X 1/2" 1 ML, 29G X 1/2" 0.5 ML, 29G X 1/2" 1 ML, 30G X 1/2" 1 ML, 30G X 5/16" 0.5 ML, 31G X 5/16" 0.5 ML, 31G X 5/16" 1 ML	2	QL	HUMALOG MIX 75/25 KWIKPEN	2	QL
LANCETS	1		HUMALOG MIX 75/25 VIAL	1	QL
			HUMALOG U-100 JUNIOR KWIKPEN	2	QL
			HUMULIN 70/30 KWIKPEN	2	QL
			HUMULIN 70/30 VIAL	1	QL
			HUMULIN N KWIKPEN	2	QL

See page 5-7 for coverage details.



Drug name	Drug tier	Requirements & limits	Drug name	Drug tier	Requirements & limits
HUMULIN N VIAL	1	QL	glipizide oral tablet 10 mg, 5 mg	1	
HUMULIN R U-500 KWIKPEN	2	QL	glipizide xl oral tablet extended release 24 hour 10 mg, 2.5 mg, 5 mg	1	
HUMULIN R U-500 VIAL SUBCUTANEOUS SOLUTION 500 UNIT/ML	1	QL	glipizide-metformin hcl	1	
HUMULIN R VIAL	1	QL	GLUCAGON EMERGENCY KIT	2	
INSULIN LISPRO	1	QL	glucagon emergency kit injection solution reconstituted 1 mg	1	
INSULIN LISPRO (1 UNIT DIAL)	2	(Insulin Lispro Kwikpen), QL	glyburide	1	
INSULIN LISPRO JUNIOR KWIKPEN	2	QL	glyburide-metformin	1	
INSULIN LISPRO PROT & LISPRO	2	QL	GLYXAMBI	2	ST, QL
LANTUS SOLOSTAR	1	QL	JARDIANCE	2	QL
LANTUS U-100 VIAL	1	QL	JENTADUETO	2	QL
LYUMJEV KWIKPEN	2	QL	JENTADUETO XR	2	QL
LYUMJEV VIAL	1	QL	liraglutide	1	PA, QL
NOVOLIN R FLEXPEN RELION SOLUTION PEN-INJECTOR 100 UNIT/ML INJECTION	2	ST, QL	metformin hcl er	1	
NOVOLIN R FLEXPEN SOLUTION PEN-INJECTOR 100 UNIT/ML INJECTION	2	ST, QL	metformin hcl oral solution	1	
TOUJEO MAX SOLOSTAR	2	QL	metformin hcl oral tablet 1000 mg, 500 mg, 850 mg	1	
TOUJEO SOLOSTAR	2	QL	MOUNJARO	2	PA, QL
<b>Diabetes - Non-insulin agents</b>			nateglinide	1	QL
acarbose oral	1		OZEMPIC	2	PA, QL
ALOGLIPTIN BENZOATE	2	QL	pioglitazone hcl	1	QL
ALOGLIPTIN-METFORMIN HCL	2	QL	pioglitazone hcl-metformin hcl	1	QL
BAQSIMI ONE PACK	2	QL	repaglinide	1	QL
BAQSIMI TWO PACK	2	QL	RYBELSUS	2	PA, QL
BYDUREON BCISE AUTOINJECTOR SUBCUTANEOUS AUTO-INJECTOR 2 MG/0.85ML	2	PA, QL	saxagliptin hcl	1	QL
BYETTA 5 MCG PEN SUBCUTANEOUS SOLUTION PEN-INJECTOR 5 MCG/0.02ML	2	PA, QL	saxagliptin-metformin er	1	QL
glimepiride oral tablet 1 mg, 2 mg, 4 mg	1		SOLIQUA	2	QL
glipizide er	1		SYMLINPEN 120 SUBCUTANEOUS SOLUTION PEN-INJECTOR 2700 MCG/2.7ML	3	QL
			SYMLINPEN 60 SUBCUTANEOUS SOLUTION PEN-INJECTOR 1500 MCG/1.5ML	3	QL
			SYNJARDY	2	QL
			SYNJARDY XR	2	QL
			TRADJENTA	2	QL

See page 5-7 for coverage details.



Drug name	Drug tier	Requirements & limits
TRIJARDY XR	2	QL
TRULICITY	2	PA, QL
ZEGALOGUE	2	QL
<b>Drugs for blood disorders</b>		
ADVATE	2	SP
ADYNOVATE	4	SP
AFSTYLA	4	SP
ALPROLIX	3	SP
ALTUVIIIIO	4	SP
ALVAIZ	4	PA, SP
anagrelide hcl	1	
ARANESP (ALBUMIN FREE) INJECTION SOLUTION 25 MCG/ML	2	QL, SP
BENEFIX	2	SP
DOPTELET	4	PA, QL, SP
ELOCTATE	4	SP
FABHALTA	2	PA, QL, SP
heparin sodium (porcine) +rfid	1	
heparin sodium (porcine) injection solution	1	
heparin sodium (porcine) pf	1	
HYMPAVZI	2	PA, QL, SP
IDELVION	3	SP
KOGENATE FS	2	SP
KOVALTRY	2	SP
NEULASTA	2	SP
NIVESTYM	2	SP
NOVOEIGHT	2	SP
NUWIQ INTRAVENOUS KIT	2	SP
RECOMBINATE	2	SP
RETACRIT	2	QL, SP
TAVALISSE	4	PA, QL, SP
tranexamic acid oral	1	QL
UDENYCA	2	SP
VOYDEYA ORAL TABLET THERAPY PACK	2	PA, QL, SP
WILATE	2	SP

Drug name	Drug tier	Requirements & limits
ZARXIO	2	SP
<b>Drugs for sexual dysfunction</b>		
ADDYI	4	PA, QL
IMVEXXY	2	QL
INTRAROSA	4	PA, QL
OSPHENA	3	PA, QL
sildenafil citrate oral tablet 100 mg, 25 mg, 50 mg	1	QL
tadalafil oral	1	QL
vardenafil hcl oral tablet	1	QL
VYLEESI	4	PA, QL
<b>Electrolytes / Vitamins</b>		
CO-NATAL FA	2	
cyanocobalamin injection solution 1000 mcg/ml	1	
cyanocobalamin nasal	1	
DENTA 5000 PLUS SENSITIVE	3	
EFFER-K ORAL TABLET EFFERVESCENT 10 MEQ, 20 MEQ	2	
ergocalciferol oral capsule	1	
FLUORIMAX 5000 SENSITIVE	3	
folic acid oral tablet 1 mg	1	
folic acid oral tablet 400 mcg, 800 mcg	E	H
klor-con	1	
klor-con 10	1	
klor-con m10	1	
klor-con m15	1	
klor-con m20	1	
K-PHOS-NEUTRAL	2	
levocarnitine oral solution	1	
levocarnitine sf	1	
LOKELMA	3	PA, QL
MATRONEX	3	
M-NATAL PLUS	3	
multivitamin w/fluoride tablet chewable 0.25 mg oral	1	
multivitamin w/fluoride tablet chewable 0.5 mg oral	1	

See page 5-7 for coverage details.



Drug name	Drug tier	Requirements & limits	Drug name	Drug tier	Requirements & limits
multivitamin w/fluoride tablet chewable 1 mg oral	1		sodium fluoride oral tablet chewable	1	H
multi-vitamin/fluoride	1		TRICARE ORAL TABLET	3	
multivitamin/fluoride oral tablet chewable	1		TRINATAL RX 1	3	
NASCOBAL	3		TRINATE	3	
NEONATAL COMPLETE	3		tri-vite/fluoride	1	
NEONATAL PLUS	3		VELTASSA	3	PA, QL
NIVA-PLUS	3		VITAFOL FE+	3	
ONE VITE WOMENS PLUS	3		VITAFOL ULTRA	3	
PHOSPHA 250 NEUTRAL	2		VITAFOL-OB	3	
phosphorous	1		VITAMEDMD ONE RX/ QUATREFOLIC ORAL CAPSULE 30-0.6-0.4-200 MG	3	
phospho-trin 250 neutral	1		vitamin d (ergocalciferol) oral capsule 1.25 mg (50000 ut), 50000 unit	1	
pnv 27-ca/fe/fa	1		VITATHELY WITH GINGER	3	
pnv-dha	1		WESCAP-PN DHA	4	
potassium chloride crys er	1		<b>Gastrointestinal agents - Drugs for acid reflux and ulcer</b>		
potassium chloride er	1		bis subcit-metronid-tetracyc	1	QL
potassium chloride oral packet 20 meq	1		bismuth/metronidaz/tetracyclin	1	QL
potassium chloride oral solution	1		cimetidine oral	1	
potassium citrate er	1		esomeprazole magnesium oral packet	1	PA, ST, QL
potassium citrate-citric acid	1		famotidine oral suspension reconstituted	1	
prenatal oral tablet 27-1 mg	1		lansoprazole oral tablet delayed release dispersible	1	PA, ST, QL
prenatal plus	1		misoprostol oral	1	
prenatal plus vitamin/mineral	1		omeprazole oral capsule delayed release	1	
PRENATE ENHANCE	3		pantoprazole sodium oral tablet delayed release	1	
PRENATE MINI	3		PYLERA	4	QL
PRENATE RESTORE	3		rabeprazole sodium oral tablet delayed release	1	QL
PREVIDENT 5000 ENAMEL PROTECT	3		sucralfate oral	1	
PREVIDENT 5000 SENSITIVE	3		VOQUEZNA	4	PA, QL
SE-NATAL 19 ORAL TABLET	3		VOQUEZNA DUAL PAK	4	ST, QL
sod citrate-citric acid oral solution 500-334 mg/5ml	1				
sod fluoride-potassium nitrate	1				
sodium fluoride 5000 enamel	1				
sodium fluoride 5000 sensitive	1				
sodium fluoride oral solution 1.1 (0.5 f) mg/ml	1	H			

See page 5-7 for coverage details.



Drug name	Drug tier	Requirements & limits
VOQUEZNA TRIPLE PAK	4	ST, QL
<b>Gastrointestinal agents - Drugs for bowel, intestine and stomach conditions</b>		
bisacodyl oral tablet delayed release 5 mg	E	H
BYLVAY	4	PA, QL, SP
BYLVAY (PELLETS)	4	PA, QL, SP
chlordiazepoxide-clidinium	1	
clearlax	E	H
CLENPIQ	3	QL
constulose	1	
cromolyn sodium oral	1	
dicyclomine hcl oral capsule	1	
dicyclomine hcl oral solution 10 mg/5ml	1	
dicyclomine hcl oral tablet 20 mg	1	
diphenoxylate-atropine oral tablet	1	
enulose	1	
gavilax oral powder	E	H
gavilyte-c	1	H
gavilyte-g	1	QL, H
gavilyte-n with flavor pack	1	QL, H
generlac	1	
gentlelax oral powder 17 gm/scoop	E	H
glycolax	E	H
glycopyrrolate oral solution	1	
glycopyrrolate oral tablet 1 mg, 2 mg	1	
hyoscyamine sulfate er	1	
hyoscyamine sulfate oral tablet	1	
hyoscyamine sulfate oral tablet dispersible	1	
hyoscyamine sulfate sl	1	
hyoscyamine sulfate sublingual	1	
IQIRVO	4	PA, ST, QL, SP
KRISTALOSE	3	

Drug name	Drug tier	Requirements & limits
lactulose encephalopathy	1	
lactulose oral packet 20 gm	1	
lactulose oral solution	1	
LEVSIN/SL	4	
LINZESS	2	PA, QL
LIVDELZI	4	PA, ST, QL, SP
lubiprostone	1	PA, QL
magnesium citrate oral solution	E	H
MOVIPREP	4	QL
na sulfate-k sulfate-mg sulf	1	QL
OSCIMIN SUBLINGUAL	4	
peg 3350-kcl-na bicarb-nacl	1	QL, H
peg-3350/electrolytes	1	QL, H
peg-3350/electrolytes/ascorbat	1	QL
peg-kcl-nacl-nasulf-na asc-c	1	QL
PLENVU	3	QL
polyethylene glycol 3350 oral powder	E	H
prucalopride succinate	1	PA, QL
REZDIFFRA	4	PA, QL
SUFLAVE	3	QL
SUPREP BOWEL PREP KIT	3	QL
SUTAB	3	
SYMPROIC	2	PA, QL
ursodiol oral capsule 300 mg	1	
ursodiol oral tablet	1	
VIBERZI	3	PA, QL
<b>Genetic or enzyme disorder - Drugs for replacement, modification, treatment</b>		
ATTRUBY	2	PA, QL, SP
CREON	2	
EVRYSDI	2	PA, QL, SP
levocarnitine oral tablet	1	
ORFADIN ORAL CAPSULE	1	PA, SP
ORFADIN ORAL SUSPENSION	2	PA, SP
PANCREAZE	3	ST
PERTZYE	4	ST

See page 5-7 for coverage details.



Drug name	Drug tier	Requirements & limits
STRENSIQ	2	PA, QL, SP
VYNDAMAX	2	PA, QL, SP
XPHOZAH	4	PA, QL
ZENPEP	2	

#### Genitourinary agents - Drugs for bladder, genital and kidney conditions

bethanechol chloride oral	1	
calcium acetate (phos binder) oral capsule	1	
CAVERJECT IMPULSE	3	QL
EDEX (2 CARTRIDGE)	3	QL
EDEX (6 CARTRIDGE)	3	QL
ELMIRON	4	ST
me/naphos/mb/hyo1	1	
mirabegron er	1	ST
oxybutynin chloride er	1	
oxybutynin chloride oral	1	
phenazo oral tablet 200 mg	1	
phenazopyridine hcl oral tablet 100 mg, 200 mg	1	
PYRIDIDIUM	3	
sevelamer carbonate oral tablet	1	
solifenacin succinate	1	
tolterodine tartrate	1	
tropium chloride	1	
UROGESIC-BLUE	2	
VANRAFIA	4	PA, QL, SP
VELPHORO	4	ST

#### Genitourinary agents - Drugs for prostate conditions

alfuzosin hcl er	1	
dutasteride oral	1	
finasteride oral tablet 5 mg	1	
silodosin	1	
tamsulosin hcl	1	
terazosin hcl	1	
TEZRULY	4	PA

Drug name	Drug tier	Requirements & limits
<b>Hormonal agents - Hormone replacement and birth control</b>		
abigale	1	
abigale lo	1	
afirmelle	1	H
aftera	1	H
altavera	1	H
alyacen 1/35	1	H
alyacen 7/7/7	1	H
amabelz oral tablet 0.5-0.1 mg	1	
amethyst	1	H
ANNOVERA	3	QL
apri	1	H
aranelle	1	H
ashlyna	1	H
aubra eq	1	H
aurovela 1.5/30	1	H
aurovela 1/20	1	H
aurovela 24 fe	1	H
aurovela fe 1.5/30	1	H
aurovela fe 1/20	1	H
aviane	1	H
ayuna	1	H
azurette	1	H
balziva	1	H
BIJUVA	3	
blisovi 24 fe	1	H
blisovi fe 1.5/30	1	H
blisovi fe 1/20	1	H
briellyn	1	H
camila	1	H
camrese	1	H
camrese lo	1	H
charlotte 24 fe	1	H
chateal eq	1	H
CLIMARA PRO	3	QL
COMBIPATCH	3	QL

See page 5-7 for coverage details.



Drug name	Drug tier	Requirements & limits	Drug name	Drug tier	Requirements & limits
cryselle	1	H	estradiol patch twice weekly	1	QL
cryselle-28	1	H	estradiol transdermal gel 0.25 mg/0.25gm, 0.5 mg/0.5gm, 0.75 mg/0.75gm, 1 mg/gm, 1.25 mg/1.25gm	1	
curae oral tablet 1.5 mg	1	H	estradiol transdermal gel 0.75 mg/1.25 gm (0.06%)	1	QL
cyred eq	1	H	estradiol transdermal patch weekly	1	(generic for Climara), QL
dasetta 1/35 (28)	1	H	estradiol vaginal	1	
dasetta 7/7/7	1	H	estradiol valerate intramuscular	1	
daysee	1	H	estradiol-norethindrone acet	1	
deblitane	1	H	estratest f.s. oral tablet 1.25-2.5 mg	1	
delyla	1	H	ESTRING	2	QL
DEPO-ESTRADIOL	3		estrogens conjugated	1	
DEPO-PROVERA INTRAMUSCULAR SUSPENSION PREFILLED SYRINGE	4	QL	ethynodiol diac-eth estradiol	1	H
DEPO-SUBQ PROVERA 104	1	QL, H	etonogestrel-ethinyl estradiol	1	H
desogestrel-ethinyl estradiol	1	H	EVAMIST	2	
DIVIGEL	3		falmina	1	H
dolishale	1	H	feirza 1.5/30	1	H
dotti	1	QL	feirza 1/20	1	H
drospiren-eth estrad-levomefol oral tablet 3-0.03-0.451 mg	1	H	FEMRING	3	QL
drospirenone-ethinyl estradiol	1	H	finzala	1	H
DUAVEE	3	QL	fyavolv	1	
econtra one-step	1	H	galbriela	1	H
ELESTRIN	3		gallifrey	1	
elinest	1	H	hailey 1.5/30	1	H
ELLA	1	QL, H	hailey 24 fe	1	H
eluryng	1	H	hailey fe 1.5/30	1	H
emzahn	1	H	hailey fe 1/20	1	H
enilloring	1	H	haloette vaginal ring 0.12-0.015 mg/24hr	1	H
enpresse-28 oral tablet 50-30/75-40/ 125-30 mcg	1	H	heather	1	H
enskyce	1	H	her style	1	H
errin	1	H	iclevia	1	H
est estrogens-methyltest	1		incassia	1	H
est estrogens-methyltest ds	1		introvale	1	H
est estrogens-methyltest hs	1		isibloom	1	H
estarylla	1	H			
estradiol oral	1				

See page 5-7 for coverage details.



Drug name	Drug tier	Requirements & limits	Drug name	Drug tier	Requirements & limits
jaimiess	1	H	lojaimiess	1	H
jasmiel	1	H	loryna	1	H
jencycla	1	H	low-ogestrel	1	H
jinteli	1		lo-zumandimine	1	H
jolessa	1	H	luizza 1.5/30	1	H
joyeaux	1	H	luizza 1/20	1	H
juleber	1	H	lutera	1	H
junel 1.5/30	1	H	lyleq	1	H
junel 1/20	1	H	lyllana	1	QL
junel fe 1.5/30	1	H	lyza	1	H
junel fe 1/20	1	H	marlissa	1	H
junel fe 24	1	H	medroxyprogesterone acetate intramuscular	1	QL, H
kaitlib fe	1	H	medroxyprogesterone acetate oral	1	
kalliga	1	H	megestrol acetate oral tablet	1	
kariva	1	H	meleya	1	H
kelnor 1/35	1	H	MENOSTAR	3	QL
kelnor 1/50 oral tablet 1-50 mg-mcg	1	H	mibelas 24 fe	1	H
kurvelo	1	H	microgestin 1.5/30	1	H
larin 1.5/30	1	H	microgestin 1/20	1	H
larin 1/20	1	H	microgestin fe 1.5/30	1	H
larin 24 fe	1	H	microgestin fe 1/20	1	H
larin fe 1.5/30	1	H	mili	1	H
larin fe 1/20	1	H	mimvey	1	
layolis fe oral tablet chewable 0.8-25 mg-mcg	1	H	minzoya	1	H
leena oral tablet 0.5/1/0.5-35 mg-mcg	1	H	mono-lynyah	1	H
lessina	1	H	my choice	1	H
levonest	1	H	my way	1	H
levonorgest-eth est & eth est	1	H	MYFEMBREE	2	PA, QL
levonorgest-eth estrad 91-day	1	H	NATAZIA	1	
levonorgest-eth estradiol-iron	1	H	necon 0.5/35 (28)	1	H
levonorgestrel	1	H	new day	1	H
levonorgestrel-ethinyl estrad	1	H	nikki	1	H
levonorg-eth estrad triphasic	1	H	nora-be	1	H
levora 0.15/30 (28)	1	H	norelgestromin-eth estradiol	1	H
LO LOESTRIN FE	1	H	norethin ace-eth estrad-fe oral tablet	1	H

See page 5-7 for coverage details.



Drug name	Drug tier	Requirements & limits	Drug name	Drug tier	Requirements & limits
norethin ace-eth estrad-fe oral tablet chewable	1	H	rivelsa	1	H
norethindrone acetate oral	1		rosyrah	1	H
norethindrone acet-ethinyl est	1	H	setlakin	1	H
norethindrone oral	1	H	sharobel	1	H
norethindrone-eth estradiol	1		shewise	1	H
norethindron-ethinyl estrad-fe oral tablet 1-20/1-30/1-35 mg-mcg	1	H	simliya	1	H
norethin-eth estradiol-fe	1	H	simpesse	1	H
norgestimate-eth estradiol oral tablet 0.25-35 mg-mcg	1	H	SLYND	4	PA, ST
norgestimate-ethinyl estradiol triphasic	1	H	sprintec 28	1	H
norlyroc	1	H	sronyx	1	H
nortrel 0.5/35 (28)	1	H	syeda	1	H
nortrel 1/35 (21)	1	H	take action	1	H
nortrel 1/35 (28)	1	H	tarina 24 fe	1	H
nortrel 7/7/7	1	H	tarina fe 1/20 eq	1	H
nylia 1/35	1	H	tilia fe	1	H
nylia 7/7/7	1	H	tri-estarylla	1	H
ocella oral tablet 3-0.03 mg	1	H	tri-legest fe	1	H
opcicon one-step	1	H	tri-linyah	1	H
OPILL	1	H	tri-lo-estarylla	1	H
option 2	1	H	tri-lo-marzia	1	H
orquidea	1	H	tri-lo-mili	1	H
philith	1	H	tri-lo-sprintec	1	H
pimtrea	1	H	tri-mili	1	H
PLAN B ONE-STEP	1	H	tri-sprintec	1	H
portia-28	1	H	trivora (28)	1	H
PREMARIN ORAL	3		tri-vylibra	1	H
PREMARIN VAGINAL	3		tri-vylibra lo	1	H
PREMPHASE	3		turqoz	1	H
PREMPRO	3		TYBLUME	1	H
progesterone intramuscular	1		tydemy	1	H
progesterone oral	1		valtya 1/35	1	H
react oral tablet 1.5 mg	1	H	valtya 1/50	1	H
reclipsen	1	H	velivet	1	H
			vestura	1	H
			vienva	1	H
			viorele	1	H
			volnea	1	H

See page 5-7 for coverage details.



Drug name	Drug tier	Requirements & limits
vyfemla	1	H
vylibra	1	H
wera	1	H
wymzya fe	1	H
xarah fe	1	H
xelria fe	1	H
xulane	1	H
YASMIN 28	3	
YAZ	3	
yuvafem	1	
zafemy	1	H
zovia 1/35 (28)	1	H
zumandimine	1	H
<b>Hormonal agents - Oral steroids</b>		
CORTEF	4	
dexamethasone intensol	1	
dexamethasone oral elixir	1	
dexamethasone oral solution	1	
dexamethasone oral tablet	1	
fludrocortisone acetate oral	1	
hydrocortisone oral	1	
MEDROL ORAL TABLET THERAPY PACK	4	
methylprednisolone oral	1	
prednisolone oral solution	1	
prednisolone sodium phosphate oral solution 15 mg/5ml	1	
prednisone oral solution	1	
prednisone oral tablet	1	
prednisone oral tablet therapy pack	1	
<b>Hormonal agents - Other</b>		
cabergoline	1	
desmopressin acetate oral	1	
desmopressin acetate spray	1	
megestrol acetate oral suspension 40 mg/ml	1	
NGENLA	4	PA, QL, SP

Drug name	Drug tier	Requirements & limits
NORDITROPIN FLEXPRO	2	PA, QL, SP
OMNITROPE	2	PA, QL, SP
ORIAHNN	2	PA, QL
ORLISSA	2	PA, QL
SKYTROFA	4	PA, QL, SP
<b>Hormonal agents - Testosterone replacement</b>		
KYZATREX	4	PA, QL
TESTIM	1	PA, QL
testosterone cypionate intramuscular	1	
testosterone enanthate intramuscular	1	
testosterone gel 12.5 mg/act (1%) transdermal	1	PA, QL
testosterone gel 20.25 mg/act (1.62%) transdermal	1	PA, QL
testosterone transdermal gel 1.62 %	1	PA, QL
<b>Hormonal agents - Thyroid</b>		
ARMOUR THYROID	3	
ERMEZA ORAL SOLUTION 150 MCG/5ML	2	PA
euthyrox oral tablet 100 mcg, 112 mcg, 125 mcg, 137 mcg, 150 mcg, 175 mcg, 200 mcg, 25 mcg, 50 mcg, 75 mcg, 88 mcg	1	
EVEXITHROID ORAL TABLET 120 MG, 15 MG, 180 MG, 30 MG, 60 MG, 90 MG	3	
levo-t	1	
levothyroxine sodium oral tablet	1	
levoxyl	1	
liomny	1	
liothyronine sodium oral	1	
methimazole oral	1	
NIVA THYROID	3	
np thyroid	1	
propylthiouracil oral	1	

See page 5-7 for coverage details.



Drug name	Drug tier	Requirements & limits
RENTHYROID ORAL TABLET 120 MG, 15 MG, 30 MG, 60 MG, 90 MG	3	
thyroid oral	1	
TIROSINT	E	
TIROSINT-SOL	2	PA
unithroid	1	
<b>Immunological agents - Drugs for immune system stimulation or suppression</b>		
ACTEMRA ACTPEN	3	PA, ST, QL, SP
ACTEMRA SUBCUTANEOUS	3	PA, ST, QL, SP
ADALIMUMAB-ADAZ	2	PA, (manufactured by Sandoz), QL, SP
AMJEVITA	2	PA, QL, SP
AMJEVITA-PED 15KG TO <30KG	2	PA, SP
ANDEMBRY	2	PA, QL, SP
azathioprine oral	1	
BIMZELX	3	PA, ST, QL, SP
CIMZIA	2	PA, QL, SP
COSENTYX	2	PA, QL, SP
cyclosporine modified oral capsule	1	
cyclosporine oral	1	
EMPAVELI	2	PA, QL, SP
ENBREL	2	PA, QL, SP
ENTYVIO PEN	2	PA, (SUBCUTANEOUS), QL, SP
everolimus oral tablet 0.25 mg, 0.5 mg, 0.75 mg, 1 mg	1	
gengraf	1	
HAEGARDA	2	PA, QL, SP
HUMIRA*	E	PA, QL, SP
HYFTOR	4	PA, QL
JYLAMVO	4	PA
leflunomide oral	1	
LITFULO	3	PA, QL, SP
LUPKYNIS	4	PA, QL, SP

Drug name	Drug tier	Requirements & limits
methotrexate sodium (pf)	1	
methotrexate sodium injection solution	1	
methotrexate sodium oral	1	
mycophenolate mofetil oral	1	
mycophenolate sodium	1	
mycophenolic acid	1	
MYHIBBIN	1	
OLUMIANT	3	PA, ST, QL, SP
OMVOH SUBCUTANEOUS	2	PA, QL, SP
ORENCIA CLICKJECT	3	PA, ST, QL, SP
OTEZLA	2	PA, QL, SP
PROGRAF ORAL CAPSULE	4	
RASUVO	2	QL
RINVOQ	2	PA, QL, SP
RUCONEST	4	PA, QL, SP
SIMPONI	2	PA, QL, SP
sirolimus oral tablet	1	
SKYRIZI	2	PA, QL, SP
SOTYKTU	2	PA, QL, SP
tacrolimus oral	1	
TAKHZYRO	2	PA, QL, SP
TREXALL	2	
VYVGART HYTRULO SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	4	PA, QL, SP
XELJANZ	2	PA, QL, SP
XELJANZ XR	2	PA, QL, SP
XOLAIR SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	2	PA, QL, SP
YESINTEK SUBCUTANEOUS	2	PA, QL, SP
<b>Immunological agents - Drugs for vaccination</b>		
ABRYSVO	3	H
ADACEL	3	H
AFLURIA PRESERVATIVE FREE	3	H
AREXVY	3	H
BEXSERO	3	H
BOOSTRIX	2	H

See page 5-7 for coverage details.

\* Members currently on therapy may be allowed to continue.



Drug name	Drug tier	Requirements & limits
BOOSTRIX INTRAMUSCULAR SUSPENSION 5-2.5-18.5 LF-MCG/0.5	2	H
CAPVAXIVE	3	H
COMIRNATY	3	H
COMIRNATY 5-11 YEARS	3	H
ENGERIX-B	2	H
FLUAD	3	H
FLUARIX	3	H
FLUCELVAX INTRAMUSCULAR SUSPENSION PREFILLED SYRINGE	3	H
FLULAVAL	3	H
FLUMIST	3	H
FLUZONE HIGH-DOSE	3	H
FLUZONE INTRAMUSCULAR SUSPENSION PREFILLED SYRINGE	3	H
GARDASIL 9 INTRAMUSCULAR SUSPENSION PREFILLED SYRINGE	3	H
HAVRIX	3	H
HEPLISAV-B	3	H
IPOL	2	H
MENQUADFI	3	H
MENVEO	3	H
M-M-R II	2	H
MNEXSPIKE	3	H
PNEUMOVAX 23	2	H
PREVNAR 20	3	H
PRIORIX	3	H
RECOMBIVAX HB	2	H
SHINGRIX INTRAMUSCULAR SUSPENSION RECONSTITUTED	3	H
SPIKEVAX	3	H
SPIKEVAX 6M-11Y	3	H
TRUMENBA	3	H
TWINRIX	3	H

Drug name	Drug tier	Requirements & limits
VAQTA INTRAMUSCULAR SUSPENSION PREFILLED SYRINGE	2	H
VARIVAX	3	H
<b>Infertility agents</b>		
CETROTIDE	4	PA, ST, QL, SP
CHORIONIC GONADOTROPIN INTRAMUSCULAR	3	SP
CLOMID	2	
clomiphene citrate oral	1	
ENDOMETRIN	2	
FOLLISTIM AQ	2	QL, SP
FYREMADEL	3	QL, SP
ganirelix acetate solution prefilled syringe 250 mcg/0.5ml subcutaneous	1	QL, SP
ganirelix acetate solution prefilled syringe 250 mcg/0.5ml subcutaneous	1	(manufactured by Merck/ Organon), QL, SP
GONAL-F	4	ST, SP
MENOPUR	4	QL, SP
NOVAREL	3	SP
OVIDREL	4	SP
PREGNYL	3	SP
progesterone vaginal	1	
<b>Inflammatory bowel disease agents</b>		
ANUCORT-HC	2	
APRISO	1	
balsalazide disodium	1	
budesonide oral	1	
budesonide rectal	1	
CORTIFOAM	2	
DIPENTUM	3	
HEMMOREX-HC RECTAL SUPPOSITORY 25 MG	3	
hydrocortisone (perianal) external cream 2.5 %	1	
hydrocortisone ace-pramoxine external cream 1-1 %	1	

See page 5-7 for coverage details.



Drug name	Drug tier	Requirements & limits
hydrocortisone acetate rectal	1	
hydrocort-pramoxine (perianal)	1	
mesalamine oral capsule delayed release 400 mg	1	
mesalamine oral tablet delayed release 1.2 gm	1	
mesalamine rectal	1	QL
PROCTOFOAM HC	2	
procto-med hc	1	
sulfasalazine oral	1	
UCERIS ORAL	1	
<b>Metabolic bone disease agents - Drugs for osteoporosis</b>		
alendronate sodium oral tablet	1	
BONSITY	3	PA, SP
calcitonin (salmon)	1	
ibandronate sodium oral	1	
raloxifene hcl	1	H-PA
risedronate sodium oral tablet	1	
TERIPARATIDE	3	PA, SP
TYMLOS	3	PA, SP
<b>Metabolic bone disease agents - Other</b>		
calcitriol oral capsule	1	
cinacalcet hcl	1	
YORVIPATH	4	PA, QL, SP
<b>Ophthalmic agents - Drugs for eye allergy, infection and inflammation</b>		
ALREX	4	QL
AZASITE	3	
azelastine hcl ophthalmic	1	
bacitracin-polymyxin b	1	
BESIVANCE	3	
bromfenac sodium (once-daily)	1	
ciprofloxacin hcl ophthalmic	1	
dexamethasone sodium phosphate ophthalmic	1	
diclofenac sodium ophthalmic	1	
epinastine hcl	1	QL

Drug name	Drug tier	Requirements & limits
erythromycin ophthalmic	1	H-PA
EYSUVIS	4	QL
FLAREX	2	
FML FORTE	3	
FML LIQUIFILM	4	
gatifloxacin ophthalmic	1	
gentamicin sulfate ophthalmic	1	QL
INVELTYS	3	
ketorolac tromethamine ophthalmic	1	
LOTEMAX OPHTHALMIC OINTMENT	3	
LOTEMAX SM	3	QL
loteprednol etabonate ophthalmic suspension	1	QL
moxifloxacin hcl (2x day)	1	
moxifloxacin hcl ophthalmic	1	
neomycin-polymyxin-dexameth	1	
NEVANAC	4	
ofloxacin ophthalmic	1	
polymyxin b-trimethoprim	1	
PRED MILD	3	
prednisolone acetate ophthalmic	1	
sulfacetamide sodium ophthalmic	1	
TOBRADEX	3	
tobramycin ophthalmic	1	QL
tobramycin-dexamethasone	1	
XDEMZY	4	PA, QL
ZIRGAN	3	
ZYLET	3	
<b>Ophthalmic agents - Drugs for glaucoma</b>		
ALPHAGAN P OPHTHALMIC SOLUTION 0.1 %	1	QL
ALPHAGAN P OPHTHALMIC SOLUTION 0.15 %	4	QL
BETIMOL OPHTHALMIC SOLUTION 0.25 %	2	QL

See page 5-7 for coverage details.



Drug name	Drug tier	Requirements & limits
BETIMOL OPHTHALMIC SOLUTION 0.5 %	4	QL
bimatoprost ophthalmic solution 0.03 %	1	QL
brimonidine tartrate ophthalmic solution 0.15 %	1	QL
brimonidine tartrate ophthalmic solution 0.2 %	1	
brinzolamide	1	QL
COMBIGAN	1	QL
dorzolamide hcl ophthalmic	1	
dorzolamide hcl-timolol mal	1	
ISTALOL	4	
latanoprost ophthalmic	1	
LUMIGAN	2	QL
methazolamide oral	1	
pilocarpine hcl ophthalmic solution 1 %, 2 %, 4 %	1	
RHOPRESSA	3	QL
ROCKLATAN	3	QL
tafluprost (pf)	1	ST, QL
timolol hemihydrate	1	QL
timolol maleate (once-daily)	1	
timolol maleate ocudose	1	
timolol maleate ophthalmic	1	
timolol maleate pf	1	
TIMOPTIC OCUDOSE	4	
travoprost (bak free)	1	QL
ZIOPTAN	3	ST, QL
<b>Ophthalmic agents - Drugs for miscellaneous eye conditions</b>		
atropine sulfate ophthalmic solution 1 %	1	
cromolyn sodium ophthalmic	1	
cyclopentolate hcl ophthalmic	1	
difluprednate	1	
MIEBO	4	PA, QL
RESTASIS	1	PA, QL
TRYPTYR	4	PA, QL

Drug name	Drug tier	Requirements & limits
TYRVAYA	4	PA, QL
VERKAZIA	4	PA, QL
XIIDRA	4	PA, QL
<b>Otic agents - Drugs for ear conditions</b>		
acetic acid otic	1	
CIPRO HC	4	
ciprofloxacin hcl otic	1	
ciprofloxacin-dexamethasone	1	
flac otic oil 0.01 %	1	
fluocinolone acetonide otic	1	
hydrocortisone-acetic acid	1	
neomycin-polymyxin-hc otic	1	
ofloxacin otic	1	
<b>Respiratory - Drugs for anaphylaxis</b>		
AUVI-Q	2	QL
epinephrine solution auto-injector 0.15 mg/0.15ml injection	1	(generic for Adrenaclick), QL
epinephrine solution auto-injector 0.15 mg/0.3ml injection	1	(generic for EpiPen-JR), QL
epinephrine solution auto-injector 0.3 mg/0.3ml injection	1	(generic for Adrenaclick), QL
epinephrine solution auto-injector 0.3 mg/0.3ml injection	1	(generic for EpiPen), QL
NEFFY	4	QL
<b>Respiratory tract / pulmonary agents - Drugs for allergies, cough, cold</b>		
azelastine hcl nasal solution 0.1 %, 137 mcg/spray	1	
benzonatate oral capsule 100 mg, 200 mg	1	
carbinoxamine maleate oral tablet 4 mg	1	
cyproheptadine hcl oral	1	
flunisolide nasal	1	
fluticasone propionate nasal	1	
g tussin ac	1	
guaifenesin-codeine	1	
hydrocod poli-chlorphe poli er	1	PA, QL

See page 5-7 for coverage details.



Drug name	Drug tier	Requirements & limits
hydrocodone bit-homatrop mbr oral solution	1	PA, QL
hydromet	1	PA, QL
HYPERSAL	2	
ipratropium bromide nasal	1	
levocetirizine dihydrochloride oral	1	
maxi-tuss ac	1	
mometasone furoate nasal	1	QL
NEBUSAL INHALATION NEBULIZATION SOLUTION 3 %	3	
ODACTRA	4	PA, QL
olopatadine hcl nasal	1	
PALFORZIA (1 MG DAILY DOSE)	3	PA
PALFORZIA INITIAL DOSE 1-3YRS	3	PA, QL
PALFORZIA INITIAL DOSE 4-17YRS	3	PA, QL
PALFORZIA ORAL 0.5 & 1 & 1.5 & 3 & 6 MG, 2 X 1 MG & 10 MG, 2 X 100 MG, 2 X 20 MG, 2 X 20 MG & 2 X 100 MG, 20 MG, 20 MG & 100 MG, 3 X 1 MG, 3 X 20 MG & 100 MG, 4 X 20 MG, 6 X 1 MG	3	PA, QL
promethazine-codeine	1	PA, QL
promethazine-dm	1	
pseudoephedrine-bromphen-dm	1	
PULMOSAL	2	
RHAPSIDO	2	PA, QL, SP
sodium chloride inhalation	1	
<b>Respiratory tract / Pulmonary agents - Drugs for asthma and COPD</b>		
acetylcysteine inhalation	1	
ADVAIR HFA	3	QL, RS
AEROCHAMBER HOLDING CHAMBER	2	
AEROCHAMBER PLS FLOVU MTHPIECE	2	
AEROCHAMBER PLUS FLO-VU DEVICE	2	

Drug name	Drug tier	Requirements & limits
AEROCHAMBER PLUS FLO-VU INTERM	2	
AEROCHAMBER2GO ANTI-STATIC	2	
AIRSUPRA	3	QL
albuterol sulfate hfa aerosol solution 108 (90 base) mcg/act inhalation	1	(generic for Ventolin HFA), QL
albuterol sulfate hfa aerosol solution 108 (90 base) mcg/act inhalation	1	(generic ProAir HFA or Proventil HFA), QL
albuterol sulfate inhalation	1	
albuterol sulfate oral syrup 2 mg/5ml	1	
ANORO ELLIPTA	3	QL
ARNUITY ELLIPTA	1	QL
ATROVENT HFA	3	QL
BEVESPI AEROSPHERE	2	QL
BREATHE COMFORT CHAMBER/ADULT	2	
BREATHE COMFORT CHAMBER/CHILD	2	
BREO ELLIPTA	3	QL, RS
BREZTRI AEROSPHERE	3	QL, RS
budesonide inhalation	1	QL
COMBIVENT RESPIMAT	3	QL
EASIVENT	2	
EASIVENT MASK LARGE	2	
EASIVENT MASK MEDIUM	2	
EASIVENT MASK SMALL	2	
FASENRA PEN	4	PA, QL, SP
FLEXICHAMBER	2	
fluticasone-salmeterol inhalation aerosol powder breath activated 100-50 mcg/act, 250-50 mcg/act, 500-50 mcg/act	1	QL
FLUTICASONE-SALMETEROL INHALATION AEROSOL POWDER BREATH ACTIVATED 113-14 MCG/ACT, 232-14 MCG/ACT, 55-14 MCG/ACT	3	QL

See page 5-7 for coverage details.



Drug name	Drug tier	Requirements & limits
GRASTEK	4	PA, QL
INSPIREASE	2	
ipratropium bromide inhalation	1	
ipratropium-albuterol	1	
levalbuterol hcl inhalation	1	QL
LEVALBUTEROL HFA INHALATION AEROSOL 45 MCG/ACT	3	QL
MICROCHAMBER	2	
montelukast sodium oral	1	
NUCALA	4	PA, QL, SP
PERFORMIST	4	QL
PROCHAMBER VHC	2	
QVAR REDIHALER	1	QL
roflumilast	1	QL
SEREVENT DISKUS	2	QL
SPIRIVA HANDIHALER	1	QL
SPIRIVA RESPIMAT	2	QL
STIOLTO RESPIMAT	2	QL
STRIVERDI RESPIMAT	2	QL
SYMBICORT	1	QL, RS
TEZSPIRE SUBCUTANEOUS SOLUTION AUTO-INJECTOR	4	PA, QL, SP
theophylline er oral tablet extended release 12 hour	1	
TRELEGY ELLIPTA	3	QL, RS
VORTEX HOLD CHMBR/MASK/CHILD DEVICE	2	
VORTEX HOLD CHMBR/MASK/TODDLER DEVICE	2	
VORTEX VALVE CHAMBER-PEDI MASK	2	
VORTEX VALVED HOLDING CHAMBER	2	
wixela inhub	1	QL
XOLAIR SUBCUTANEOUS SOLUTION AUTO-INJECTOR	2	PA, QL, SP
XOPENEX HFA	3	QL
YUPELRI	4	PA, QL

Drug name	Drug tier	Requirements & limits
zafirlukast	1	
<b>Respiratory tract / Pulmonary agents - Drugs for cystic fibrosis</b>		
BRONCHITOL	3	PA, ST, QL, SP
PULMOZYME	2	PA, QL, SP
TOBI PODHALER	3	PA, QL, SP
<b>Respiratory tract / Pulmonary agents - Drugs for pulmonary fibrosis</b>		
JASCAYD	4	PA, SP
OFEV	4	PA, QL, SP
<b>Respiratory tract / Pulmonary agents - Drugs for pulmonary hypertension</b>		
ADEMPAS	2	PA, QL, SP
OPSUMIT	2	PA, QL, SP
TADLIQ	3	PA, QL, SP
TYVASO	2	PA, SP
TYVASO DPI	2	PA, QL, SP
<b>Skeletal muscle relaxants - Drugs for muscle pain and spasm</b>		
baclofen oral suspension	1	PA
baclofen oral tablet 10 mg, 20 mg, 5 mg	1	
carisoprodol oral tablet 350 mg	1	
chlorzoxazone oral tablet 500 mg	1	
cyclobenzaprine hcl oral tablet 10 mg, 5 mg	1	
dantrolene sodium oral	1	
metaxalone oral tablet 400 mg, 800 mg	1	
methocarbamol oral tablet 500 mg, 750 mg	1	
orphenadrine citrate er	1	
tizanidine hcl oral capsule 2 mg, 4 mg, 6 mg	1	
tizanidine hcl oral tablet	1	
<b>Sleep disorder agents</b>		
armodafinil	1	QL
BELSOMRA	4	QL
eszopiclone	1	

See page 5-7 for coverage details.



Drug name	Drug tier	Requirements & limits
LUMRYZ	4	PA, QL, SP
modafinil oral	1	QL
ramelteon	1	QL
sodium oxybate	1	PA, (Manufactured by Hikma), QL, SP
SUNOSI	2	PA, QL
temazepam	1	
WAKIX	4	PA, QL, SP
XYWAV	4	PA, QL, SP
zaleplon	1	
zolpidem tartrate er	1	
zolpidem tartrate oral tablet	1	

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aripiprazole oral solution .....	14	azathioprine oral .....	32	benzoyl peroxide-erythromycin...	19
aripiprazole oral tablet.....	14	azelaic acid external .....	19	benztropine mesylate oral.....	14
armodafinil .....	37	azelastine hcl nasal solution 0.1 %, 137 mcg/spray.....	35	BESIVANCE.....	34
ARMOUR THYROID.....	31	azelastine hcl ophthalmic.....	34	BESREMI.....	13
ARNUITY ELLIPTA .....	36	AZELEX.....	19	betamethasone dipropionate aug external cream .....	19
ascomp-codeine .....	8	azithromycin oral.....	9	betamethasone dipropionate aug external lotion .....	19
asenapine maleate.....	14	AZSTARYS .....	18	betamethasone dipropionate aug external ointment.....	19
ashlyna.....	27	azurette.....	27	betamethasone dipropionate external.....	19
aspirin 81 oral tablet delayed release .....	8	<b>B</b>			
atenolol oral .....	16	bac (butalbital-acetamin-caff)....	8		
atenolol-chlorthalidone .....	16	bacitracin-polymyxin b .....	34		
atomoxetine hcl.....	18	baclofen oral suspension .....	37		
ATORVALIQ.....	16	baclofen oral tablet 10 mg, 20 mg, 5 mg .....	37		
atorvastatin calcium oral tablet 10 mg, 20 mg .....	16	BAFIERTAM.....	18		
atorvastatin calcium oral tablet 40 mg, 80 mg.....	16	balsalazide disodium.....	33		
		balziva .....	27		

betamethasone valerate external cream	19
betamethasone valerate external lotion	19
betamethasone valerate external ointment	19
BETASERON	18
bethanechol chloride oral	27
BETIMOL OPHTHALMIC SOLUTION 0.25 %	34
BETIMOL OPHTHALMIC SOLUTION 0.5 %	35
BEVESPI AEROSPHERE	36
BEXSERO	32
bicalutamide	13
BIJUVA	27
BIKTARVY	15
bimatoprost ophthalmic solution 0.03 %	35
BIMZELX	32
bisubcit-metronid-tetracyc	25
bisacodyl oral tablet delayed release 5 mg	26
bismuth/metronidaz/tetracyclin	25
bisoprolol fumarate oral	16
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BREZTRI AEROSPHERE	36
briellyn	27
brimonidine tartrate external	19

brimonidine tartrate ophthalmic solution 0.15 %	35
brimonidine tartrate ophthalmic solution 0.2 %	35
brinzolamide	35
BRIVIACT ORAL SOLUTION	10
BRIVIACT ORAL TABLET	10
bromfenac sodium (once-daily)	34
bromocriptine mesylate oral tablet	14
BRONCHITOL	37
budesonide inhalation	36
budesonide oral	33
budesonide rectal	33
bumetanide oral	16
buprenorphine	8, 9
buprenorphine hcl sublingual	9
buprenorphine hcl-naloxone hcl sublingual film	9
buprenorphine hcl-naloxone hcl sublingual tablet sublingual	9
bupropion hcl er (smoking det)	9
bupropion hcl er (sr)	11
bupropion hcl oral	11
bupirone hcl oral	15
butalbital-acetaminophen oral tablet 50-325 mg	8
butalbital-apap-caff-cod oral capsule 50-325-40-30 mg	8
butalbital-apap-caffeine	8
butalbital-asa-caff-codeine	8
butalbital-aspirin-caffeine	8
butorphanol tartrate nasal	8
BYDUREON BCISE AUTOINJECTOR SUBCUTANEOUS AUTO-INJECTOR 2 MG/0.85ML	23
BYETTA 5 MCG PEN SUBCUTANEOUS SOLUTION PEN-INJECTOR 5 MCG/0.02ML	23
BYLVAY	26
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cabergoline	31
CABOMETYX	13
calcipotriene external cream	19
calcipotriene external ointment	19
calcipotriene external solution	19
calcitonin (salmon)	34
calcitriol oral capsule	34
calcium acetate (phos binder) oral capsule	27
CALQUENCE	13
camila	27
camrese	27
camrese lo	27
candesartan cilexetil	16
candesartan cilexetil-hctz	16
CAPLYTA	14
captopril oral	16
CAPVAXIVE	33
carbamazepine er	10
carbamazepine oral tablet	10
carbamazepine oral tablet chewable	10
CARBATROL	10
carbidopa-levodopa er oral tablet extended release	14
carbidopa-levodopa oral tablet	14
carbinoxamine maleate oral tablet 4 mg	35
CAREPOINT POLY HUB NEEDLE 18G X 1", 21G X 1", 22G X 1", 23G X 1", 25G X 1", 25G X 5/8"	21
CAREPOINT POLY HUB NEEDLE 22G X 1-1/2"	21
CAREPOINT PRECISION POLY HUB	21
CAREPOINT SAFETY 1ST NEEDLE	21
carisoprodol oral tablet 350 mg	37
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cefdinir .....	9	citalopram hydrobromide oral		clonidine hcl er .....	18
cefixime oral capsule .....	9	solution 10 mg/5ml .....	12	clonidine hcl oral .....	16
cefpodoxime proxetil oral tablet...	9	citalopram hydrobromide oral		clonidine patch weekly.....	16
cefprozil .....	9	tablet .....	12	clopidogrel bisulfate oral .....	14
cefuroxime axetil.....	9	claravis.....	19	clorazepate dipotassium .....	15
celecoxib oral .....	8	clarithromycin oral.....	9	clotrimazole mouth/throat.....	12
cephalexin.....	9	clearlax .....	26	clotrimazole-betamethasone ....	20
CEQUR SIMPLICITY 2U 8PK .....	21	CLENPIQ .....	26	clozapine oral tablet .....	14
CETROTIDE .....	33	CLIMARA PRO.....	27	CO-NATAL FA.....	24
cevimeline hcl.....	18	clindacin.....	19	colchicine oral.....	13
charlotte 24 fe.....	27	clindacin etz external swab.....	19	colchicine-probenecid.....	13
chateal eq .....	27	clindacin-p .....	19	colesevelam hcl oral tablet .....	16
chlordiazepoxide hcl.....	15	clindamycin hcl oral.....	9	colestipol hcl oral tablet .....	16
chlordiazepoxide-clidinium .....	26	clindamycin palmitate hcl .....	9	COMBIGAN.....	35
chlorhexidine gluconate mouth/ throat.....	18	clindamycin phos (twice-daily)		COMBIPATCH .....	27
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chlorthalidone.....	16	clindamycin phos-benzoyl perox		COMIRNATY.....	33
chlorzoxazone oral tablet		external gel 1.2-5 %.....	19	COMIRNATY 5-11 YEARS.....	33
500 mg .....	37	clindamycin phos-benzoyl perox		constulose.....	26
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cholestyramine oral.....	16	clindamycin phosphate external ..	19	CONTOUR NEXT GEN MONITOR KIT W/DEVICE .....	21
CHORIONIC GONADOTROPIN		clindamycin phosphate vaginal.....	9	CONTOUR NEXT GEN TEST	
INTRAMUSCULAR.....	33	CLINDESSE.....	9	STRIPS.....	21
CIBINQO .....	19	CLINPRO 5000.....	18	CONTOUR NEXT MONITOR KIT W/DEVICE.....	21
ciclodan .....	12	clobazam oral suspension		CONTOUR NEXT ONE KIT .....	22
ciclopirox external .....	12	2.5 mg/ml.....	10	CONTOUR PLUS BLUE KIT W/ DEVICE .....	22
ciclopirox olamine external		clobazam oral tablet.....	10	CONTOUR PLUS TEST STRIP.....	22
cream.....	12	clobetasol prop emollient base ...	19	CORLANOR ORAL TABLET .....	16
ciclopirox olamine external		clobetasol propionate e .....	19	CORTEF.....	31
suspension .....	19	clobetasol propionate external		CORTIFOAM.....	33
cilostazol .....	14	cream 0.05 %.....	20	COSENTYX .....	32
CIMDUO.....	15	clobetasol propionate external		COTELLIC .....	13
cimetidine oral .....	25	gel.....	20	CREON.....	26
CIMZIA .....	32	clobetasol propionate external		CRESEMBA ORAL .....	12
cinacalcet hcl.....	34	liquid.....	20	CREXONT.....	14
CIPRO HC.....	35	clobetasol propionate external		cromolyn sodium ophthalmic ....	35
ciprofloxacin hcl ophthalmic .....	34	ointment.....	20		
ciprofloxacin hcl oral.....	9	clobetasol propionate external			
ciprofloxacin hcl otic.....	35	solution.....	20		
		CLOMID .....	33		
		clomiphene citrate oral.....	33		
		clomipramine hcl oral.....	12		



cromolyn sodium oral.....	26	DERMA-SMOOTHIE/FS SCALP.....	20	diclofenac-misoprostol.....	8
cryselle.....	28	DESCOVY ORAL TABLET		dicloxacillin sodium.....	9
cryselle-28.....	28	120-15 MG.....	15	dicyclomine hcl oral capsule.....	26
curae oral tablet 1.5 mg.....	28	DESCOVY ORAL TABLET		dicyclomine hcl oral solution	
cyanocobalamin injection		200-25 MG.....	15	10 mg/5ml.....	26
solution 1000 mcg/ml.....	24	desipramine hcl oral.....	12	dicyclomine hcl oral tablet	
cyanocobalamin nasal.....	24	desmopressin acetate oral.....	31	20 mg.....	26
cyclobenzaprine hcl oral tablet		desmopressin acetate spray.....	31	difluprednate.....	35
10 mg, 5 mg.....	37	desogestrel-ethinyl estradiol.....	28	digoxin oral tablet.....	16
cyclopentolate hcl ophthalmic.....	35	desonide external cream.....	20	DILANTIN.....	10
cyclophosphamide oral capsule.....	13	desonide external lotion.....	20	dilt-xr.....	16
cyclosporine modified oral		desonide external ointment.....	20	diltiazem hcl er.....	16
capsule.....	32	desoximetasone external cream.....	20	diltiazem hcl er beads.....	16
cyclosporine oral.....	32	desoximetasone external		diltiazem hcl er coated beads.....	16
cyproheptadine hcl oral.....	35	ointment.....	20	diltiazem hcl oral.....	16
cyred eq.....	28	desvenlafaxine succinate er.....	12	DIPENTUM.....	33
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dabigatran etexilate mesylate.....	10	dexamethasone intensol.....	31	diphenoxylate-atropine oral	
dantrolene sodium oral.....	37	dexamethasone oral elixir.....	31	tablet.....	26
dapsone external.....	20	dexamethasone oral solution.....	31	disulfiram oral.....	9
dapsone oral.....	13	dexamethasone oral tablet.....	31	divalproex sodium er.....	10
darunavir.....	15	dexamethasone sodium		divalproex sodium oral.....	10
dasetta 1/35 (28).....	28	phosphate ophthalmic.....	34	DIVIGEL.....	28
dasetta 7/7/7.....	28	DEXCOM G6 RECEIVER.....	22	dofetilide.....	16
daysee.....	28	DEXCOM G6 SENSOR.....	22	dolishale.....	28
deblitane.....	28	DEXCOM G6 TRANSMITTER.....	22	donepezil hcl oral tablet.....	11
DELSTRIGO.....	15	DEXCOM G7 RECEIVER.....	22	DOPTELET.....	24
delyla.....	28	DEXCOM G7 SENSOR.....	22	dorzolamide hcl ophthalmic.....	35
DENTA 5000 PLUS.....	18, 24	dexmethylphenidate hcl.....	18	dorzolamide hcl-timolol mal.....	35
DENTA 5000 PLUS SENSITIVE.....	24	dexmethylphenidate hcl er.....	18	dotti.....	28
DENTAGEL.....	18	dextroamphetamine sulfate er.....	18	DOVATO.....	15
DEPAKOTE.....	10	dextroamphetamine sulfate oral		doxazosin mesylate oral.....	16
DEPAKOTE ER.....	10	solution.....	18	doxepin hcl oral capsule.....	12
DEPAKOTE SPRINKLES.....	10	diazepam oral solution.....	15	doxepin hcl oral concentrate.....	12
DEPO-ESTRADIOL.....	28	diazepam oral tablet.....	15	doxycycline hyclate oral capsule.....	9
DEPO-PROVERA		diazepam rectal.....	10	doxycycline hyclate oral tablet	
INTRAMUSCULAR SUSPENSION		diclofenac potassium oral tablet		100 mg, 20 mg.....	10
PREFILLED SYRINGE.....	28	50 mg.....	8	doxycycline monohydrate oral	
DEPO-SUBQ PROVERA 104.....	28	diclofenac sodium er.....	8	capsule 100 mg, 50 mg.....	10
DERMA-SMOOTHIE/FS BODY.....	20	diclofenac sodium external gel		doxycycline monohydrate oral	
		3%.....	20	suspension reconstituted.....	10
		diclofenac sodium ophthalmic.....	34	doxycycline monohydrate oral	
		diclofenac sodium oral.....	8	tablet.....	10



dronabinol.....	12	emtricitabine-tenofovir df oral tablet 200-300 mg.....	15	erythromycin ethylsuccinate oral suspension reconstituted.....	10
DROPSAFE SAFETY SYRINGE/ NEEDLE.....	22	emzahn.....	28	erythromycin external.....	20
DROPSAFE SICURA.....	22	enalapril maleate oral solution....	16	erythromycin ophthalmic.....	34
drosipren-eth estrad-levomefol oral tablet 3-0.03-0.451 mg.....	28	enalapril maleate oral tablet.....	16	escitalopram oxalate oral solution.....	12
drosiprenone-ethinyl estradiol....	28	enalapril-hydrochlorothiazide.....	16	escitalopram oxalate oral tablet...	12
DRYSOL.....	20	ENBREL.....	32	eslicarbazepine acetate.....	11
DUAVEE.....	28	endocet.....	8	esomeprazole magnesium oral packet.....	25
duloxetine hcl oral capsule delayed release particles 20 mg, 30 mg, 60 mg.....	12	ENDOMETRIN.....	33	est estrogens-methyltest.....	28
DUPIXENT.....	20	ENGERIX-B.....	33	est estrogens-methyltest ds.....	28
dutasteride oral.....	27	enilloring.....	28	est estrogens-methyltest hs.....	28
<b>E</b>					
EASIVENT.....	36	enoxaparin sodium injection solution prefilled syringe.....	10	estarylla.....	28
EASIVENT MASK LARGE.....	36	enpresse-28 oral tablet 50-30/75-40/ 125-30 mcg.....	28	estazolam.....	15
EASIVENT MASK MEDIUM.....	36	ENSACOVE.....	13	estradiol oral.....	28, 30
EASIVENT MASK SMALL.....	36	enskyce.....	28	estradiol patch twice weekly.....	28
EBGLYSS.....	20	ENSTILAR.....	20	estradiol transdermal gel 0.25 mg/0.25gm, 0.5 mg/0.5gm, 0.75 mg/0.75gm, 1 mg/gm, 1.25 mg/1.25gm.....	28
ec-naproxen.....	8	entacapone.....	14	estradiol transdermal gel 0.75 mg/1.25 gm (0.06%).....	28
econazole nitrate external cream..	12	entecavir.....	15	estradiol transdermal patch weekly.....	28
econtra one-step.....	28	ENTYVIO PEN.....	32	estradiol vaginal.....	28
EDEX (2 CARTRIDGE).....	27	enulose.....	26	estradiol valerate intramuscular...	28
EDEX (6 CARTRIDGE).....	27	EPCLUSA.....	15	estradiol-norethindrone acet.....	28
EFFER-K ORAL TABLET		EPIDIOLEX.....	10	estrategest f.s. oral tablet 1.25-2.5 mg.....	28
EFFERVESCENT 10 MEQ, 20 MEQ..	24	epinastine hcl.....	34	ESTRING.....	28
ELESTRIN.....	28	epinephrine solution auto- injector 0.15 mg/0.15ml injection..	35	estrogens conjugated.....	28
eletriptan hydrobromide.....	13	epinephrine solution auto- injector 0.15 mg/0.3ml injection..	35	eszopiclone.....	37
elinest.....	28	epinephrine solution auto- injector 0.3 mg/0.3ml injection...	35	ethambutol hcl oral.....	13
ELIQUIS.....	10	epitol oral tablet 200 mg.....	11	ethosuximide oral.....	11
ELLA.....	28	eplerenone.....	16	ethynodiol diac-eth estradiol....	28
ELMIRON.....	27	eq nicotine step 3.....	9	etodolac.....	8
ELOCTATE.....	24	ergocalciferol oral capsule.....	24, 25	etodolac er.....	8
eluryng.....	28	ERIVEDGE.....	13	etonogestrel-ethinyl estradiol....	28
EMBECTA INSULIN SYRINGE.....	22	ERLEADA.....	13	EUCRISA.....	20
EMGALITY.....	13	ERMEZA ORAL SOLUTION 150 MCG/5ML.....	31		
EMPAVELI.....	32	errin.....	28		
emtricitabine-tenofovir df oral tablet 100-150 mg, 133-200 mg, 167-250 mg.....	15	erythromycin base oral tablet.....	10		



euthyrox oral tablet 100 mcg, 112 mcg, 125 mcg, 137 mcg, 150 mcg, 175 mcg, 200 mcg, 25 mcg, 50 mcg, 75 mcg, 88 mcg	31	finasteride oral tablet 5 mg	27	fluticasone-salmeterol inhalation aerosol powder breath activated 100-50 mcg/ act, 250-50 mcg/act, 500-50 mcg/act	36
EVAMIST	28	finzala	28	FLUTICASONE-SALMETEROL INHALATION AEROSOL POWDER BREATH ACTIVATED 113-14 MCG/ACT, 232-14 MCG/ ACT, 55-14 MCG/ACT	36
everolimus oral tablet 0.25 mg, 0.5 mg, 0.75 mg, 1 mg	32	flac otic oil 0.01 %	35	fluvastatin sodium	16
EVEXITHROID ORAL TABLET 120 MG, 15 MG, 180 MG, 30 MG, 60 MG, 90 MG	31	FLAREX	34	fluvoxamine maleate	12
EVRYSDI	26	flecainide acetate	16	fluvoxamine maleate er	12
exemestane	13	FLEXICHAMBER	36	FLUZONE HIGH-DOSE	33
EYSUVIS	34	FLUAD	33	FLUZONE INTRAMUSCULAR SUSPENSION PREFILLED SYRINGE	33
ezetimibe	16	FLUARIX	33	FML FORTE	34
ezetimibe-simvastatin	16	FLUCELVAX INTRAMUSCULAR SUSPENSION PREFILLED SYRINGE	33	FML LIQUIFILM	34
<b>F</b>		fluconazole oral	12	FOCALIN	18
FABHALTA	24	fludrocortisone acetate oral	31	folic acid oral tablet 1 mg	24
falmina	28	FLULAVAL	33	folic acid oral tablet 400 mcg, 800 mcg	24
famciclovir oral	15	FLUMIST	33	FOLLISTIM AQ	33
famotidine oral suspension reconstituted	25	flunisolide nasal	35	fosfomycin tromethamine	10
FANAPT	14	fluocinolone acetonide body	20	fosinopril sodium	16
FASENRA PEN	36	fluocinolone acetonide external	20	FRAICHE 5000 DENTAL DENTAL GEL 1.1 %	19
febuxostat	13	fluocinolone acetonide otic	35	FREESTYLE LIBRE 14 DAY READER	22
feirza 1/20	28	fluocinolone acetonide scalp	20	FREESTYLE LIBRE 14 DAY SENSOR	22
feirza 1.5/30	28	fluocinonide external cream 0.05 %	20	FREESTYLE LIBRE 2 PLUS SENSOR	22
felbamate oral tablet	11	fluocinonide external gel	20	FREESTYLE LIBRE 2 PLUS SENSOR	22
felodipine er	16	fluocinonide external ointment	20	FREESTYLE LIBRE 2 READER	22
FEMRING	28	fluocinonide external solution	20	FREESTYLE LIBRE 2 SENSOR	22
fenofibrate micronized	16	FLUORIDEX	18, 19	FREESTYLE LIBRE 3 PLUS SENSOR	22
fenofibrate oral capsule 134 mg, 200 mg, 67 mg	16	FLUORIDEX ENHANCED WHITENING	19	FREESTYLE LIBRE 3 READER	22
fenofibrate oral tablet 145 mg, 160 mg, 48 mg, 54 mg	16	FLUORIMAX 5000	19, 24	FREESTYLE LIBRE 3 SENSOR	22
fenofibric acid oral capsule delayed release	16	FLUORIMAX 5000 SENSITIVE	24	frovatriptan succinate	13
fentanyl transdermal patch 72 hour 100 mcg/hr, 12 mcg/hr, 25 mcg/hr, 50 mcg/hr, 75 mcg/hr	8	fluorouracil external cream 5 %	20	ft naloxone hcl	9
FETZIMA	12	fluoxetine hcl oral capsule	12	furosemide oral	16
fidaxomicin	10	fluoxetine hcl oral solution	12	fyavolv	28
FINACEA EXTERNAL FOAM	20	fluoxetine hcl oral tablet	12		
		fluphenazine hcl oral tablet	14		
		flurbiprofen oral	8		
		fluticasone propionate external cream	20		
		fluticasone propionate external ointment	20		
		fluticasone propionate nasal	35		



FYCOMPA ORAL SUSPENSION	11
FYCOMPA ORAL TABLET	11
FYREMADEL	33

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g tussin ac	35
gabapentin oral capsule	11
gabapentin oral solution 250 mg/5ml	11
gabapentin oral tablet 600 mg, 800 mg	11
galbriela	28
gallifrey	28
ganirelix acetate solution prefilled syringe 250 mcg/0.5ml subcutaneous	33
GARDASIL 9 INTRAMUSCULAR SUSPENSION PREFILLED SYRINGE	33
gatifloxacin ophthalmic	34
gavilax oral powder	26
gavilyte-c	26
gavilyte-g	26
gavilyte-n with flavor pack	26
GAVRETO	13
gemfibrozil oral	16
generlac	26
gengraf	32
gentamicin sulfate external	10
gentamicin sulfate ophthalmic	34
gentlelax oral powder 17 gm/ scoop	26
GENVOYA	15
glimepiride oral tablet 1 mg, 2 mg, 4 mg	23
glipizide er	23
glipizide oral tablet 10 mg, 5 mg	23
glipizide xl oral tablet extended release 24 hour 10 mg, 2.5 mg, 5 mg	23
glipizide-metformin hcl	23
GLUCAGON EMERGENCY KIT	23

glucagon emergency kit injection solution reconstituted 1 mg	23
glyburide	23
glyburide-metformin	23
glycolax	26
glycopyrrolate oral solution	26
glycopyrrolate oral tablet 1 mg, 2 mg	26
glydo	8
GLYXAMBI	23
gnp naloxone hcl	9
GONAL-F	33
granisetron hcl oral	12
GRASTEK	37
griseofulvin microsize oral	12
guaifenesin-codeine	35
guanfacine hcl	16, 18
guanfacine hcl er	18
GVOKE HYPOPEN	22
GVOKE KIT	22
GVOKE PFS	22
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HAEGARDA	32
hailey 1.5/30	28
hailey 24 fe	28
hailey fe 1/20	28
hailey fe 1.5/30	28
halobetasol propionate external cream	20
halobetasol propionate external ointment	20
haloette vaginal ring 0.12-0.015 mg/24hr	28
haloperidol oral	14
HARVONI	15
HAVRIX	33
heather	28
HEMANGEOL	16

HEMMOREX-HC RECTAL SUPPOSITORY 25 MG	33
heparin sodium (porcine) +rfid	24
heparin sodium (porcine) injection solution	24
heparin sodium (porcine) pf	24
HEPLISAV-B	33
her style	28
HUMALOG CARTRIDGE	22
HUMALOG KWIKPEN	22
HUMALOG MIX 50/50 KWIKPEN	22
HUMALOG MIX 50/50 VIAL SUBCUTANEOUS SUSPENSION (50-50) 100 UNIT/ML	22
HUMALOG MIX 75/25 KWIKPEN	22
HUMALOG MIX 75/25 VIAL	22
HUMALOG U-100 JUNIOR KWIKPEN	22
HUMIRA*	32
HUMULIN 70/30 KWIKPEN	22
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HUMULIN N KWIKPEN	22
HUMULIN N VIAL	23
HUMULIN R U-500 KWIKPEN	23
HUMULIN R U-500 VIAL SUBCUTANEOUS SOLUTION 500 UNIT/ML	23
HUMULIN R VIAL	23
hydralazine hcl oral	16
hydrochlorothiazide oral	16
hydrocod poli-chlorphe poli er	35
hydrocodone bit-homatrop mbr oral solution	36
hydrocodone-acetaminophen oral solution 10-300 mg/15ml, 10-325 mg/15ml, 7.5-325 mg/15ml	8
hydrocodone-acetaminophen oral tablet 10-325 mg, 2.5-325 mg, 5-325 mg, 7.5-325 mg	8
hydrocodone-ibuprofen	8
hydrocort-pramoxine (perianal)	34
hydrocortisone (perianal) external cream 2.5 %	33





kariva .....	29	lamotrigine er .....	11	levonorgest-eth est & eth est. ....	29
kelnor 1/35 .....	29	lamotrigine oral tablet .....	11	levonorgest-eth estrad 91-day ...	29
kelnor 1/50 oral tablet		lamotrigine oral tablet chewable. .	11	levonorgest-eth estradiol-iron ...	29
1-50 mg-mcg .....	29	lamotrigine oral tablet		levonorgestrel .....	29
KEPPRA ORAL .....	11	dispersible .....	11	levonorgestrel-ethinyl estrad ....	29
KEPPRA XR .....	11	LANCETS .....	22	levora 0.15/30 (28) .....	29
KERENDIA .....	17	lansoprazole oral tablet delayed		levothyroxine sodium oral tablet .	31
KESIMPTA .....	18	release dispersible .....	25	levoxyl .....	31
ketoconazole external cream .....	12	LANTUS SOLOSTAR .....	23	LEVSIN/SL .....	26
ketoconazole external shampoo .	12	LANTUS U-100 VIAL .....	23	LIBERVANT BUCCAL FILM	
ketoconazole oral .....	12	larin 1/20. ....	29	10 MG, 15 MG, 5 MG, 7.5 MG. ....	11
ketorolac tromethamine		larin 1.5/30 .....	29	lidocaine external ointment 5 % ..	8
ophthalmic .....	34	larin 24 fe .....	29	lidocaine external patch 5 % .....	8
ketorolac tromethamine oral .....	8	larin fe 1/20 .....	29	lidocaine hcl mouth/throat .....	19
KISQALI .....	13	larin fe 1.5/30 .....	29	lidocaine hcl urethral/mucosal .....	8
klayesta .....	12	latanoprost ophthalmic .....	35	lidocaine viscous hcl .....	19
KLISYRI .....	20	layolis fe oral tablet chewable		lidocaine-prilocaine external	
klor-con .....	24	0.8-25 mg-mcg .....	29	cream .....	8
klor-con 10 .....	24	lederle leucovorin .....	13	LIKMEZ .....	10
klor-con m10 .....	24	LEDIPASVIR-SOFOSBUVIR .....	15	linezolid oral tablet .....	10
klor-con m15 .....	24	leena oral tablet 0.5/1/		LINZESS .....	26
klor-con m20 .....	24	0.5-35 mg-mcg .....	29	liomny .....	31
KLOXXADO .....	9	leflunomide oral .....	32	liothyronine sodium oral .....	31
KOGENATE FS .....	24	LENVIMA .....	13	liraglutide .....	23
KOSELUGO ORAL CAPSULE .....	13	lessina .....	29	lisdexamfetamine dimesylate ....	18
KOVALTRY .....	24	letrozole oral .....	13	lisinopril oral .....	17
KRISTALOSE .....	26	leucovorin calcium oral .....	13	lisinopril-hydrochlorothiazide ....	17
kurvelo .....	29	levabuterol hcl inhalation .....	37	LITFULO .....	32
KYZATREX .....	31	LEVALBUTEROL HFA		lithium carbonate er .....	16
		INHALATION AEROSOL		lithium carbonate oral .....	16
		45 MCG/ACT .....	37	LIVDELZI .....	26
		levetiracetam er .....	11	LO LOESTRIN FE .....	29
		levetiracetam oral solution .....	11	lo-zumandimine .....	29
		levetiracetam oral tablet .....	11	LODOCO .....	17
		levo-t. ....	31	lojaimiess .....	29
		levocarnitine oral solution .....	24	LOKELMA .....	24
		levocarnitine oral tablet .....	26	LOPRESSOR ORAL SOLUTION ...	17
		levocarnitine sf .....	24	lorazepam intensol .....	15
		levocetirizine dihydrochloride ora	36	lorazepam oral concentrate	
		levofloxacin oral tablet .....	10	2 mg/ml .....	15
		levonest .....	29	lorazepam oral tablet .....	15
		levonorg-eth estrad triphasic ....	29		

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labetalol hcl oral .....	17	levetiracetam oral solution .....	11	LO LOESTRIN FE .....	29
lacosamide oral solution 10 mg/		levetiracetam oral tablet .....	11	lo-zumandimine .....	29
ml, 100 mg/10ml, 50 mg/5ml. ....	11	levo-t. ....	31	LODOCO .....	17
lacosamide oral tablet .....	11	levocarnitine oral solution .....	24	lojaimiess .....	29
lactulose encephalopathy .....	26	levocarnitine oral tablet .....	26	LOKELMA .....	24
lactulose oral packet 20 gm .....	26	levocarnitine sf .....	24	LOPRESSOR ORAL SOLUTION ...	17
lactulose oral solution .....	26	levocetirizine dihydrochloride ora	36	lorazepam intensol .....	15
LAGEVRIO .....	15	levofloxacin oral tablet .....	10	lorazepam oral concentrate	
LAMICTAL ORAL TABLET .....	11	levonest .....	29	2 mg/ml .....	15
LAMICTAL XR ORAL TABLET		levonorg-eth estrad triphasic ....	29	lorazepam oral tablet .....	15
EXTENDED RELEASE 24 HOUR. ....	11				



loryna.....	29	medroxyprogesterone acetate intramuscular .....	29	methylphenidate hcl er oral tablet extended release .....	18
losartan potassium oral.....	17	medroxyprogesterone acetate oral.....	29	methylphenidate hcl oral .....	18
losartan potassium-hctz.....	17	mefenamic acid oral .....	8	methylprednisolone oral.....	31
LOTEMAX OPHTHALMIC OINTMENT .....	34	mefloquine hcl .....	14	metoclopramide hcl oral solution.....	12
LOTEMAX SM.....	34	megestrol acetate oral suspension 40 mg/ml.....	31	metoclopramide hcl oral tablet ...	12
loteprednol etabonate ophthalmic suspension .....	34	megestrol acetate oral tablet .....	29	metolazone.....	17
lovastatin oral .....	17	meleya .....	29	metoprolol succinate er .....	17
low-ogestrel.....	29	meloxicam oral tablet.....	9	metoprolol tartrate oral tablet 100 mg, 25 mg, 50 mg .....	17
lubiprostone.....	26	memantine hcl er .....	11	metoprolol-hydrochlorothiazide ..	17
luizza 1/20 .....	29	memantine hcl oral tablet .....	11	metronidazole external cream ...	20
luizza 1.5/30 .....	29	MENOPUR .....	33	metronidazole external gel 0.75 %.....	20
LUMAKRAS .....	14	MENOSTAR.....	29	metronidazole external lotion ....	20
LUMIGAN.....	35	MENQUADFI .....	33	metronidazole oral tablet 250 mg, 500 mg.....	10
LUMRYZ .....	38	MENVEO.....	33	metronidazole vaginal .....	10
LUPKYNIS .....	32	mercaptopurine oral tablet.....	14	mexiletine hcl oral.....	17
lurasidone hcl .....	14	mesalamine oral capsule delayed release 400 mg .....	34	mibelas 24 fe .....	29
lutera .....	29	mesalamine oral tablet delayed release 1.2 gm .....	34	MICROCHAMBER .....	37
lyleq.....	29	mesalamine rectal .....	34	microgestin 1/20.....	29
lyllana.....	29	metaxalone oral tablet 400 mg, 800 mg .....	37	microgestin 1.5/30.....	29
LYNPARZA .....	14	metformin hcl er .....	23	microgestin fe 1/20.....	29
LYRICA ORAL CAPSULE .....	18	metformin hcl oral solution.....	23	microgestin fe 1.5/30 .....	29
LYUMJEV KWIKPEN.....	23	metformin hcl oral tablet 1000 mg, 500 mg, 850 mg.....	23	midodrine hcl.....	17
LYUMJEV VIAL.....	23	methazolamide oral.....	35	MIEBO .....	35
lyza.....	29	methenamine hippurate.....	10	mili .....	29
<b>M</b>		methimazole oral.....	31	mimvey .....	29
M-M-R II.....	33	methocarbamol oral tablet 500 mg, 750 mg.....	37	minocycline hcl oral capsule.....	10
M-NATAL PLUS .....	24	methotrexate sodium (pf).....	32	minoxidil oral .....	17
magnesium citrate oral solution ..	26	methotrexate sodium injection solution.....	32	minzoya.....	29
marlissa.....	29	methotrexate sodium oral.....	32	mirabegron er .....	27
MATRONEX.....	24	methylphenidate hcl er (cd) .....	18	mirtazapine oral.....	12
matzim la .....	17	methylphenidate hcl er (la).....	18	MIRVASO .....	20
MAVENCLAD .....	18	methylphenidate hcl er (osm) oral tablet extended release 18 mg, 27 mg, 36 mg, 54 mg .....	18	misoprostol oral.....	25
MAVYRET.....	15			MITIGARE .....	13
maxi-tuss ac.....	36			MNEXSPIKE .....	33
MAYZENT .....	18			modafinil oral.....	38
me/naphos/mb/hyo1 .....	27			mometasone furoate external ...	20
MEDROL ORAL TABLET THERAPY PACK.....	31				

mometasone furoate nasal.....	36	naloxone hcl nasal.....	9	nicotine polacrilex.....	9
mono-lynyah.....	29	naltrexone hcl oral.....	9	nicotine polacrilex mini.....	9
MONOJECT HYPODERMIC		naproxen dr.....	9	nicotine step 1.....	9
NEEDLE 18G X 1”.....	22	naproxen oral tablet.....	9	nicotine step 2.....	9
montelukast sodium oral.....	37	naproxen oral tablet delayed		nicotine step 3.....	9
morphine sulfate (concentrate)		release.....	9	nicotine transdermal patch	
oral solution 100 mg/5ml,		naproxen sodium oral tablet		24 hour.....	9
20 mg/ml.....	9	275 mg, 550 mg.....	9	nifedipine er.....	17
morphine sulfate er oral tablet		naratriptan hcl.....	13	nifedipine er osmotic release.....	17
extended release.....	8	NARCAN.....	9	nifedipine oral.....	17
morphine sulfate oral solution.....	9	NASCOBAL.....	25	nikki.....	29
morphine sulfate oral tablet.....	8	NATAZIA.....	29	nitazoxanide oral.....	14
MOTPOLY XR.....	11	nateglinide.....	23	NITRO-BID.....	17
MOUNJARO.....	23	NAYZILAM.....	11	nitrofurantoin macrocrystal.....	10
MOVIPREP.....	26	nebevoolol hcl.....	17	nitrofurantoin monohydrate	
moxifloxacin hcl (2x day).....	34	NEBUSAL INHALATION		macrocrystals.....	10
moxifloxacin hcl ophthalmic.....	34	NEBULIZATION SOLUTION 3 % ..	36	nitrofurantoin oral suspension	
moxifloxacin hcl oral.....	10	necon 0.5/35 (28).....	29	25 mg/5ml.....	10
MULTAQ.....	17	NEFFY.....	35	nitroglycerin rectal.....	17
multi-vitamin/fluoride.....	25	NEMLUVIO.....	20	nitroglycerin sublingual.....	17
multivitamin w/fluoride tablet		neomycin sulfate oral.....	10	nitroglycerin transdermal.....	17
chewable 0.25 mg oral.....	24	neomycin-polymyxin-dexameth.....	34	NIVA THYROID.....	31
multivitamin w/fluoride tablet		neomycin-polymyxin-hc otic.....	35	NIVA-PLUS.....	25
chewable 0.5 mg oral.....	24	NEONATAL COMPLETE.....	25	NIVESTYM.....	24
multivitamin w/fluoride tablet		NEONATAL PLUS.....	25	nora-be.....	29
chewable 1 mg oral.....	25	neuac.....	20	NORDITROPIN FLEXPRO.....	31
multivitamin/fluoride oral tablet		NEULASTA.....	24	norelgestromin-eth estradiol.....	29
chewable.....	25	NEUPRO.....	14	norethin ace-eth estrad-fe oral	
mupirocin cream.....	10	NEVANAC.....	34	tablet.....	29, 30
mupirocin ointment.....	10	new day.....	29	norethin ace-eth estrad-fe oral	
my choice.....	29	NEXLETOL.....	17	tablet chewable.....	30
my way.....	29	NEXLIZET.....	17	norethin-eth estradiol-fe.....	30
mycophenolate mofetil oral.....	32	NGENLA.....	31	norethindron-ethinyl estrad-fe	
mycophenolate sodium.....	32	niacin er (antihyperlipidemic).....	17	oral tablet 1-20/1-30/	
mycophenolic acid.....	32	NICODERM CQ.....	9	1-35 mg-mcg.....	30
MYFEMBREE.....	29	NICORETTE MOUTH/THROAT		norethindrone acet-ethinyl est... 30	
MYHIBBIN.....	32	GUM.....	9	norethindrone acetate oral.....	30
<b>N</b>					
na sulfate-k sulfate-mg sulf.....	26	NICORETTE STARTER KIT.....	9	norethindrone oral.....	30
nabumetone oral.....	9	nicotine.....	9	norethindrone-eth estradiol.....	30
nadolol oral.....	17	nicotine mini.....	9	norgestimate-eth estradiol oral	
		nicotine mouth/throat gum.....	9	tablet 0.25-35 mg-mcg.....	30
				norgestimate-ethinyl estradiol	
				triphasic.....	30





peg-3350/electrolytes/ascorbat. .26	podofilox external solution . . . . . 20	prevalite . . . . . 17
peg-kcl-nacl-nasulf-na asc-c . . . . . 26	polyethylene glycol 3350 oral powder. . . . . 26	PREVIDENT 5000 BOOSTER PLUS . . . . . 19
penicillin v potassium . . . . . 10	polymyxin b-trimethoprim . . . . . 34	PREVIDENT 5000 DRY MOUTH . . . 19
pentoxifylline er . . . . . 17	portia-28 . . . . . 30	PREVIDENT 5000 ENAMEL PROTECT . . . . . 25
perampanel oral tablet . . . . . 11	posaconazole oral tablet delayed release. . . . . 13	PREVIDENT 5000 KIDS . . . . . 19
PERFOROMIST . . . . . 37	potassium chloride crys er. . . . . 25	PREVIDENT 5000 ORTHO DEFENSE . . . . . 19
perindopril erbumine . . . . . 17	potassium chloride er . . . . . 25	PREVIDENT 5000 PLUS. . . . . 19
periogard . . . . . 19	potassium chloride oral packet 20 meq. . . . . 25	PREVIDENT 5000 SENSITIVE . . . 25
permethrin external . . . . . 14	potassium chloride oral solution . . 25	PREVIDENT DENTAL . . . . . 19
perphenazine oral. . . . . 12	potassium citrate er. . . . . 25	PREVIDENT MOUTH/THROAT . . . 19
PERTZYE. . . . . 26	potassium citrate-citric acid . . . . 25	PREVNAR 20. . . . . 33
phenazo oral tablet 200 mg . . . . . 27	pramipexole dihydrochloride. . . . 14	PREVYMIS ORAL TABLET. . . . . 15
phenazopyridine hcl oral tablet 100 mg, 200 mg . . . . . 27	prasugrel hcl. . . . . 14	PREZCOBIX. . . . . 15
phenobarbital oral elixir 20 mg/5ml. . . . . 11	pravastatin sodium. . . . . 17	primidone oral tablet 125 mg. . . . 11
phenobarbital oral tablet . . . . . 11	prazosin hcl oral. . . . . 17	primidone oral tablet 250 mg, 50 mg . . . . . 11
phenytek . . . . . 11	PRED MILD . . . . . 34	PRIORIX . . . . . 33
phenytoin sodium extended . . . . 11	prednisolone acetate ophthalmic . . . . . 34	probenecid . . . . . 13
philith. . . . . 30	prednisolone oral solution. . . . . 31	PROCHAMBER VHC . . . . . 37
PHOSPHA 250 NEUTRAL. . . . . 25	prednisolone sodium phosphate oral solution 15 mg/5ml. . . . . 31	prochlorperazine maleate oral . . . 12
phospho-trin 250 neutral . . . . . 25	prednisone oral solution . . . . . 31	procto-med hc . . . . . 34
phosphorous . . . . . 25	prednisone oral tablet . . . . . 31	PROCTOFOAM HC . . . . . 34
PIFELTRO. . . . . 15	prednisone oral tablet therapy pack. . . . . 31	progesterone intramuscular. . . . . 30
pilocarpine hcl ophthalmic solution 1 %, 2 %, 4 %. . . . . 35	pregabalin oral capsule . . . . . 18	progesterone oral . . . . . 30
pilocarpine hcl oral. . . . . 19	PREGNYL . . . . . 33	progesterone vaginal . . . . . 33
pimecrolimus. . . . . 20	PREMARIN ORAL. . . . . 30	PROGRAF ORAL CAPSULE . . . . . 32
pimtree . . . . . 30	PREMARIN VAGINAL. . . . . 30	promethazine hcl oral. . . . . 12
pindolol. . . . . 17	premium lidocaine external ointment 5 % . . . . . 8	promethazine hcl rectal . . . . . 12
pioglitazone hcl . . . . . 23	PREMPHASE . . . . . 30	promethazine-codeine . . . . . 36
pioglitazone hcl-metformin hcl . . 23	PREMPRO. . . . . 30	promethazine-dm. . . . . 36
PIQRAY . . . . . 14	prenatal oral tablet 27-1 mg . . . . 25	propafenone hcl. . . . . 17
piroxicam oral . . . . . 9	prenatal plus . . . . . 25	propafenone hcl er. . . . . 17
PLAN B ONE-STEP . . . . . 30	prenatal plus vitamin/mineral . . . 25	propranolol hcl er . . . . . 17
PLEGRIDY . . . . . 18	PRENATE ENHANCE. . . . . 25	propranolol hcl oral . . . . . 17
PLEGRIDY INTRAMUSCULAR . . . . 18	PRENATE MINI . . . . . 25	propylthiouracil oral . . . . . 31
PLENVU. . . . . 26	PRENATE RESTORE . . . . . 25	prucalopride succinate . . . . . 26
PNEUMOVAX 23 . . . . . 33		pseudoephedrine-bromphen-dm. . . . . 36
pnv 27-ca/fe/fa. . . . . 25		
pnv-dha. . . . . 25		



PULMOSAL .....	36	RETACRIT.....	24	SCSEMBLIX.....	14
PULMOZYME .....	37	RETEVMO.....	14	scopolamine.....	12
PYLERA .....	25	REXTOVY .....	9	SE-NATAL 19 ORAL TABLET.....	25
PYRIDIDIUM .....	27	REXULTI .....	15	selenium sulfide external lotion ..	20
pyridostigmine bromide er oral tablet extended release .....	13	REYVOW.....	13	SEREVENT DISKUS.....	37
pyridostigmine bromide oral tablet 60 mg.....	13	REZDIFFRA.....	26	sertraline hcl oral tablet .....	12
<b>Q</b>					
quetiapine fumarate .....	15	RHAPSIDO.....	36	setlakin .....	30
quetiapine fumarate er .....	15	RHOFADE.....	20	sevelamer carbonate oral tablet ..	27
QULIPTA.....	13	RHOPRESSA.....	35	sf 5000 plus .....	19
QVAR REDIHALER.....	37	rifabutin .....	13	sf gel 1.1%.....	19
<b>R</b>					
rabeprazole sodium oral tablet delayed release.....	25	rifampin oral.....	13	sharobel .....	30
RADICAVA ORS.....	18	RINVOQ .....	32	shewise .....	30
RADICAVA ORS STARTER KIT.....	18	risedronate sodium oral tablet ...	34	SHINGRIX INTRAMUSCULAR SUSPENSION RECONSTITUTED ..	33
RALDESY .....	12	risperidone .....	15	sildenafil citrate oral tablet 100 mg, 25 mg, 50 mg .....	24
raloxifene hcl .....	34	ritonavir.....	15	silodosin .....	27
ramelteon .....	38	rivaroxaban oral tablet.....	10	silver sulfadiazine external.....	10
ramipril .....	17	rivastigmine .....	11	simliya .....	30
ranolazine er.....	17	rivastigmine tartrate.....	11	simpesse.....	30
rasagiline mesylate oral.....	14	rivelsa .....	30	SIMPONI.....	32
RASUVO .....	32	rizatriptan benzoate oral tablet dispersible.....	13	simvastatin oral tablet 10 mg, 20 mg, 40 mg, 5 mg .....	17
react oral tablet 1.5 mg .....	30	ROCKLATAN.....	35	simvastatin oral tablet 80 mg ....	17
reclipsen.....	30	roflumilast.....	37	sirolimus oral tablet.....	32
RECOMBINATE.....	24	ropinirole hcl .....	14	SKYRIZI.....	32
RECOMBIVAX HB.....	33	rosuvastatin calcium oral.....	17	SKYTROFA.....	31
RELION GLUCOSE TEST STRIPS ..	22	rosyrah.....	30	SLYND .....	30
RENTHYROID ORAL TABLET 120 MG, 15 MG, 30 MG, 60 MG, 90 MG.....	32	roweepra .....	11	sod citrate-citric acid oral solution 500-334 mg/5ml .....	25
repaglinide .....	23	ROZLYTREK.....	14	sod fluoride-potassium nitrate ...	25
REPATHA.....	17	RUCONEST .....	32	sodium chloride inhalation .....	36
REPATHA PUSHTRONEX SYSTEM SUBCUTANEOUS SOLUTION CARTRIDGE 420 MG/3.5ML .....	17	rufinamide oral suspension 40 mg/ml.....	11	sodium fluoride 5000 enamel.....	25
REPATHA SURECLICK.....	17	rufinamide oral tablet.....	11	sodium fluoride 5000 plus.....	19
RESTASIS .....	35	RYBELSUS .....	23	sodium fluoride 5000 ppm .....	19
<b>S</b>					
		RYDAPT.....	14	sodium fluoride 5000 ppm dental cream 1.1 %.....	19
		<b>S</b>			
		sacubitril-valsartan .....	17	sodium fluoride 5000 sensitive ...	25
		SANTYL.....	20	sodium fluoride dental.....	19
		SAVELLA.....	18	sodium fluoride mouth/throat ....	19
		saxagliptin hcl.....	23	sodium fluoride oral solution 1.1 (0.5 f) mg/ml.....	25
		saxagliptin-metformin er.....	23		





THRIVE .....	9	trazodone hcl oral .....	12	trosipium chloride .....	27
thyroid oral .....	32	TRELEGY ELLIPTA .....	37	TRULICITY .....	24
tiadylt er .....	18	TREMFYA .....	21	TRUMENBA .....	33
ticagrelor .....	14	tretinoin external cream .....	21	TRUQAP .....	14
TIGLUTIK .....	18	TREXALL .....	32	TRUVADA ORAL TABLET 100-150 MG, 133-200 MG, 167-250 MG .....	15
tilia fe .....	30	tri-estarylla .....	30	TRYPTYR .....	35
timolol hemihydrate .....	35	tri-legest fe .....	30	turqoz .....	30
timolol maleate (once-daily) .....	35	tri-linyuh .....	30	TWIIST REFILL KIT/INFUSION SET .....	22
timolol maleate ocudose .....	35	tri-lo-estarylla .....	30	TWIIST STARTER KIT .....	22
timolol maleate ophthalmic .....	35	tri-lo-marzia .....	30	TWINRIX .....	33
timolol maleate pf .....	35	tri-lo-mili .....	30	TYBLUME .....	30
TIMOPTIC OCUDOSE .....	35	tri-lo-sprintec .....	30	tydemy .....	30
tinidazole oral .....	10	tri-mili .....	30	TYMLOS .....	34
TIROSINT .....	32	tri-sprintec .....	30	TYRVAYA .....	35
TIROSINT-SOL .....	32	tri-vite/fluoride .....	25	TYVASO .....	37
TIVICAY .....	15	tri-vylibra .....	30	TYVASO DPI .....	37
tizanidine hcl oral capsule 2 mg, 4 mg, 6 mg .....	37	tri-vylibra lo .....	30		
tizanidine hcl oral tablet .....	37	triamcinolone acetonide external cream 0.025 %, 0.1 % .....	21	<b>U</b>	
TOBI PODHALER .....	37	triamcinolone acetonide external cream 0.5 % .....	21	UBRELVY .....	13
TOBRADEX .....	34	triamcinolone acetonide external lotion .....	21	UCERIS ORAL .....	34
tobramycin ophthalmic .....	34	triamcinolone acetonide external ointment 0.025 %, 0.1 %, 0.5 % .....	21	UDENYCA .....	24
tobramycin-dexamethasone .....	34	triamcinolone acetonide mouth/ throat .....	19	unithroid .....	32
tolterodine tartrate .....	27	triamterene oral .....	18	urea external cream 20 %, 40 %, 45 % .....	21
TOPAMAX .....	11	triamterene-hctz .....	18	UROGESIC-BLUE .....	27
TOPAMAX SPRINKLE .....	11	triazolam .....	15	ursodiol oral capsule 300 mg .....	26
topiramate oral capsule sprinkle ..	11	TRICARE ORAL TABLET .....	25	ursodiol oral tablet .....	26
topiramate oral tablet .....	11	triderm .....	21		
torse mide .....	18	trihexyphenidyl hcl oral tablet .....	14	<b>V</b>	
TOUJEO MAX SOLOSTAR .....	23	TRIJARDY XR .....	24	valacyclovir hcl oral .....	15
TOUJEO SOLOSTAR .....	23	TRILEPTAL .....	11	valganciclovir hcl oral tablet .....	15
TRADJENTA .....	23	trimethoprim oral .....	10	valproic acid oral capsule .....	11
tramadol hcl (er biphasic) oral tablet extended release 24 hour ...	8	TRINATAL RX1 .....	25	valproic acid oral solution 250 mg/5ml .....	11
tramadol hcl er tablet extended release .....	8	TRINATE .....	25	valsartan oral tablet .....	18
tramadol hcl oral tablet 50 mg .....	8	TRINTELLIX .....	12	valsartan-hydrochlorothiazide ...	18
tramadol-acetaminophen .....	8	TRIUMEQ .....	15	VALTOCO .....	11
trandolapril .....	18	trivora (28) .....	30	valtya 1/35 .....	30
tranexamic acid oral .....	24			valtya 1/50 .....	30
travoprost (bak free) .....	35				



vancomycin hcl oral capsule.....	10	VOQUEZNA.....	25, 26	XELJANZ.....	32
VANDAZOLE.....	10	VOQUEZNA DUAL PAK.....	25	XELJANZ XR.....	32
VANRAFIA.....	27	VOQUEZNA TRIPLE PAK.....	26	xelria fe.....	31
VAQTA INTRAMUSCULAR SUSPENSION PREFILLED SYRINGE.....	33	voriconazole oral tablet.....	13	XELSTRYM.....	18
vardenafil hcl oral tablet.....	24	VORTEX HOLD CHMBR/MASK/ CHILD DEVICE.....	37	XEPI EXTERNAL CREAM 1 %.....	10
varenicline.....	9	VORTEX HOLD CHMBR/MASK/ TODDLER DEVICE.....	37	XIFAXAN.....	10
VARIVAX.....	33	VORTEX VALVE CHAMBER-PEDI MASK.....	37	XIIDRA.....	35
velivet.....	30	VORTEX VALVED HOLDING CHAMBER.....	37	XOFLUZA.....	15
VELPHORO.....	27	VOSEVI.....	15	XOLAIR SUBCUTANEOUS SOLUTION AUTO-INJECTOR.....	37
VELTASSA.....	25	VOYDEYA ORAL TABLET THERAPY PACK.....	24	XOLAIR SUBCUTANEOUS SOLUTION PREFILLED SYRINGE.....	32
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**ATTENTION:** Free language assistance services and free communications in other formats, such as large print, are available to you. Call the toll-free number on your member identification card. (TTY 711).

**ማሳሰቢያ:- አማርኛ (Amharic)** የሚናገሩ ከሆነ፣ ነፃ የቋንቋ እገዛ አገልግሎቶች እና ነፃ ተግባሮች እንደ ትልቅ እትም ባሉ ሌሎች ቅርፀቶች ለእርስዎ ይገኛሉ። በአባልነት መታወቂያ ካርድዎ ላይ ያለውን ነፃ የስልክ ቁጥር ይደውሉ።

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

**দেখুন:** আপনি যদি **বাংলায় (Bengali-Bangala)** কথা বলেন, তাহলে বিনামূল্যে ভাষা সহায়তা পরিষেবা এবং বড় মুদ্রণের মতো অন্যান্য ফরম্যাটে যোগাযোগগুলি আপনার জন্য বিনামূল্যে উপলব্ধ। আপনার সদস্যের পরিচয়পত্রের কার্ডের টোল-ফ্রি নম্বরে কল করুন

**ចំណាំ:** ប្រសិនបើអ្នកនិយាយភាសាខ្មែរ (Cambodian-Mon-Khmer) សេវាជំនួយភាសាភីតិក្ត្រ និងការទំនាក់ទំនងភីតិក្ត្រក្នុងទម្រង់ផ្សេងទៀត ដូចជាពុម្ពអក្សរធំ មានសម្រាប់អ្នក។ ចូរសព្វមកលេខភីតិក្ត្រនៅលើប័ណ្ណសម្គាល់សមាជិករបស់អ្នក។

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

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

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

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

**ΠΡΟΣΟΧΗ:** Εάν μιλάτε ελληνικά (Greek), υπάρχουν διαθέσιμες δωρεάν υπηρεσίες γλωσσικής βοήθειας και δωρεάν επικοινωνία σε άλλες μορφοποιήσεις, όπως μεγάλα γράμματα. Καλέστε τον αριθμό χωρίς χρέωση στην κάρτα μέλους σας.

**ध्यान आपो:** જો તમે ગુજરાતી (Gujarati) બોલતા હો તો વિના મૂલ્યે ભાષાકીય મદદરૂપ સેવાઓ અને અન્ય ફોર્મેટમાં વિના મૂલ્યે સંચાર, જેમ કે મોટી પ્રિન્ટ, તમારા માટે ઉપલબ્ધ છે. તમારા સભ્ય ઓળખ કાર્ડ પરના ટોલ-ફ્રી નંબર પર કોલ કરો.

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

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

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

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

**注意事項：**日本語 (Japanese) を話される場合、無料の言語支援サービスや、拡大文字などの形式での無料のコミュニケーションをご利用いただけます。会員証に記載されているフリーダイヤルにお電話ください。

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

**ໝາຍເຫດ:** ຖ້າຫາກທ່ານເວົ້າພາສາລາວ (Lao), ທ່ານສາມາດໃຊ້ບໍລິການຊ່ວຍເຫຼືອດ້ານພາສາພາສີ ແລະ ການສື່ສານໃນຮູບແບບອື່ນໆພາສີ, ເຊັ່ນ: ການພິມຕົວອັກສອນຂະໜາດໃຫຍ່. ໂທຫາເບີໂທພາສີຢູ່ທີ່ບັດປະຈຳຕົວສະມາຊິກຂອງທ່ານ.

**ध्यान दिनुहोस्:** यदि तपाईंले नेपाली (Nepali) बोल्नुहुन्छ भने, निःशुल्क भाषा सहायता सेवाहरू र अन्य ढाँचाहरूमा निःशुल्क संचारहरू, जस्तै ठूलो छाप, तपाईंका लागि उपलब्ध छन्। आफ्नो सदस्य पहिचान कार्डमा रहेको टोल फ्री नम्बरमा कल गर्नुहोस्।

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

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

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

**ਧਿਆਨ ਦਿਓ:** ਜੇ ਤੁਸੀਂ **ਪੰਜਾਬੀ (Punjabi)** ਬੋਲਦੇ ਹੋ, ਤਾਂ ਤੁਹਾਡੇ ਲਈ ਮੁਫਤ ਭਾਸ਼ਾ ਸਹਾਇਤਾ ਸੇਵਾਵਾਂ ਅਤੇ ਹੋਰ ਫਾਰਮੈਟਾਂ, ਜਿਵੇਂ ਕਿ ਵੱਡੇ ਪ੍ਰਿੰਟ, ਵਿੱਚ ਮੁਫਤ ਸੰਚਾਰ ਉਪਲਬਧ ਹਨ। ਆਪਣੇ ਮੈਂਬਰ ਪਛਾਣ ਕਾਰਡ 'ਤੇ ਟੋਲ-ਫ੍ਰੀ ਨੰਬਰ 'ਤੇ ਕਾਲ ਕਰੋ।

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

**ATENCIÓN:** Si habla **español (Spanish)**, hay servicios de asistencia de idiomas y comunicaciones en otros formatos como letra grande, sin cargo, a su disposición. Llame al número gratuito que figura en su tarjeta de identificación de miembro. (TTY 711).

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

**โปรดทราบ** หากคุณพูดภาษาไทย (Thai) ได้

คุณสามารถใช้บริการช่วยเหลือด้านภาษาฟรีและการสื่อสารในรูปแบบอื่น ๆ ฟรี เช่น

การพิมพ์ด้วยตัวอักษรขนาดใหญ่ โทรไปยังหมายเลขโทรฟรีสำหรับสมาชิกตามบัตรประจำตัวของคุณ

**ЗВЕРНІТЬ УВАГУ!** Якщо ви розмовляєте **українською (Ukrainian)**, ви можете безоплатно користуватися послугами мовної підтримки, а також безоплатно отримувати інформаційні матеріали в інших форматах, як от набрані великим шрифтом. Телефонуйте на безкоштовний номер телефону, зазначений на вашій ідентифікаційній картці учасника.

توجہ دیں: اگر آپ اردو (Urdu) زبان بولتے ہیں تو زبان کی معاون خدمات اور دیگر فارمیٹس میں مواصلات، جیسے بڑے پرنٹ، آپ کے لیے مفت دستیاب ہیں۔ اپنے ممبر شناختی کارڈ پر دیئے گئے ٹول فری نمبر پر کال کریں۔

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

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