



2025 Prescription Drug List

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**UnitedHealthcare
& affiliated companies**



Table of contents

Introduction	4
Prescription Drug List overview.....	4
Tier designations	4
Over-the-counter and therapeutically equivalent medications.....	5
Generic medication policy	5
Specialty medications.....	5
Medications requiring prior authorization and other pharmacy programs ..	6
How to obtain prior authorization	6
Analgesics	
Drugs for Pain.....	7
Drugs for Pain and Inflammation.....	8
Anti-Addiction / Substance Abuse Treatment Agents.....	8
Antibacterials	
Drugs for Infections.....	9
Anticoagulants	
Drugs to Treat or Prevent Blood Clots.....	10
Anticonvulsants	
Drugs for Seizures	11
Antidementia Agents	
Drugs for Alzheimer’s Disease and Dementia.....	12
Antidepressants	
Drugs for Depression.....	12
Antiemetics	
Drugs for Nausea and Vomiting.....	13
Antifungals	
Drugs for Fungal Infections.....	14
Antigout Agents	
Drugs for Gout.....	14
Antimigraine Agents	
Drugs for Migraines	14
Antimyasthenic Agents	
Drugs to Treat Myasthenia Gravis	15
Antimycobacterials	
Drugs to Treat Infections	15
Antineoplastics	
Drugs for Cancer	15
Antiparasitics	
Drugs for Parasitic Infections.....	16
Antiparkinson Agents	
Drugs for Parkinson’s Disease.....	17
Antiplatelets	
Drugs for Heart Attack and Stroke Prevention.....	17
Antipsychotics	
Drugs for Mood Disorders.....	17
Antivirals	
Drugs for Viral Infections	18
Anxiolytics	
Drugs for Anxiety.....	19
Bipolar Agents	
Drugs for Mood Disorders.....	19
Cardiovascular Agents	
Drugs for Heart and Circulation Conditions.....	19



Central Nervous System Agents	
Drugs for Attention Deficit Disorder	23
Drugs for Multiple Sclerosis.....	24
Miscellaneous.....	25
Dental and Oral Agents	
Drugs for Mouth and Throat Conditions	25
Dermatological Agents	
Drugs for Skin Conditions.....	26
Diabetes	
Glucose Monitoring and Supplies.....	30
Insulin.....	33
Non-Insulin Agents.....	34
Drugs for Blood Disorders.....	35
Drugs for Sexual Dysfunction.....	36
Electrolytes / Vitamins	36
Gastrointestinal Agents	
Drugs for Acid Reflux and Ulcer.....	38
Drugs for Bowel, Intestine and Stomach Conditions	39
Genetic or Enzyme Disorder	
Drugs for Replacement, Modification, Treatment	40
Genitourinary Agents	
Drugs for Bladder, Genital and Kidney Conditions.....	40
Drugs for Prostate Conditions.....	41
Hormonal Agents	
Hormone Replacement and Birth Control	41
Oral Steroids.....	45
Other.....	46
Testosterone Replacement	46
Thyroid.....	47
Immunological Agents	
Drugs for Immune System Stimulation or Suppression	47
Drugs for Vaccination	50
Infertility Agents	50
Inflammatory Bowel Disease Agents	51
Metabolic Bone Disease Agents	
Drugs for Osteoporosis	51
Other.....	52
Ophthalmic Agents	
Drugs for Eye Allergy, Infection and Inflammation	52
Drugs for Eye Infection and Inflammation.....	53
Drugs for Glaucoma.....	53
Drugs for Miscellaneous Eye Conditions	54
Otic Agents	
Drugs for Ear Conditions.....	54
Respiratory	
Drugs for Anaphylaxis.....	54
Respiratory Tract / Pulmonary Agents	
Drugs for Allergies, Cough, Cold.....	54
Drugs for Asthma and COPD.....	55
Drugs for Cystic Fibrosis	57
Drugs for Pulmonary Fibrosis	57
Drugs for Pulmonary Hypertension	57
Skeletal Muscle Relaxants	
Drugs for Muscle Pain and Spasm	58
Sleep Disorder Agents.....	58
Index	59



2025 Prescription Drug List

Introduction

The UnitedHealthcare Prescription Drug List (PDL)¹ provides a list of the most commonly prescribed medications in various therapeutic classes. This list is intended for use with UnitedHealthcare health plans and affiliated companies' pharmacy benefit plan designs. The PDL applies only to prescription medications dispensed to outpatients and does not include inpatient medications or medications obtained or administered in a physician's office. The PDL does not define benefit coverage. Benefit coverage is decided by the member's pharmacy benefit plan.² This means that there may be medications listed on the PDL that are not covered under a particular member's pharmacy benefit plan.

You may also access PDL information by visiting UHCprovider.com.

Prescription Drug List overview

Tier decisions are made by our PDL Management Committee based on clinical, economic and other factors. The PDL Management Committee is comprised of senior UnitedHealth Group physician and business leaders. The UnitedHealthcare Pharmacy & Therapeutics (P&T) Committee, comprising of physicians and pharmacists, reviews new and existing medications. They then provide clinical guidance to the PDL Management Committee. Guidance is based on similarities and differences compared with other medications that treat the same disease or condition.

The tier placement of a medication on the PDL may change. While medications change tiers infrequently, such changes generally occur up to 3 times per calendar year. Additionally, when a brand-name medication becomes available as a generic, the tier status and coverage of the brand-name medication and its corresponding generic will be evaluated. When a medication changes tiers, your patient may be required to pay more or less for that medication. These changes may occur without prior notice to you or your patient. However, you may visit our website at UHCprovider.com or use the PreCheck MyScript® app for the most up-to-date information for a particular medication. Your patient can also find the most up-to-date tier status and cost^{3,8} information for a medication by visiting our member website at myuhc.com® and/or calling the toll-free member phone number located on their member ID card.

Tier designations

Prescription medications are categorized within 3 tiers on the PDL.⁴ Each tier is assigned a cost,³ which is determined by the member's pharmacy benefit plan. You may refer to the PDL as a guide to select the most appropriate medication with the lowest member cost for your patients.

Drug Tier	Includes	Helpful Tips
Tier 1	\$ Lowest cost Tier 1 medications are your patient's lowest cost option.	Members can maximize their cost savings when you prescribe Tier 1 medications, if you decide they are appropriate for your patient's treatment.
Tier 2	\$\$ Mid-range cost Tier 2 medications are your patient's mid-range cost option.	Consider Tier 2 medications if no Tier 1 medication is appropriate to treat your patient's condition.
Tier 3	\$\$\$ Highest cost Tier 3 medications are your patient's highest cost option.	If your patient is currently taking a medication in Tier 3, you may want to determine if there is an appropriate alternative in Tier 1 or Tier 2.

You and your patient make decisions about health care and medication treatments.

If the member has a "closed" pharmacy benefit (such as a 2-tier pharmacy benefit plan that does not cover medications classified in Tier 3 of this PDL), medications in Tier 3 are generally not covered, except under certain processes consistent with applicable law.



Some members have a Tier 4 prescription plan, and these medications are noted as T4 throughout the document. Members with a Tier 4 prescription plan should refer to their enrollment materials, check the Medication Pricing/Coverage information on our member website or call the toll-free member phone number provided on their member ID card for more information about their benefit plan.

Not all medications are represented in this PDL. Only the most commonly prescribed medications are included.

Over-the-counter and therapeutically equivalent medications

For some conditions, you and your patient may decide that an over-the-counter (OTC) medication is the best treatment. According to UnitedHealthcare benefit design, OTC medications are defined as medications that do not require a prescription by federal or state law to be dispensed. In some instances, OTC medications are listed on the PDL for reference purposes only. OTC medications may cost less than the member’s out-of-pocket expense for prescription medications.

Therapeutically Equivalent means that medications can be expected to produce essentially the same efficacy or adverse event profile. Our benefit designs allow us to exclude a medication if determined to be Therapeutically Equivalent to another covered product or OTC option.

If the patient or physician requests a medication we have excluded based on determination of Therapeutic Equivalent, the patient may be required to pay the entire cost of the medication as it may not be covered under the member’s pharmacy benefit. Please refer to the member’s pharmacy benefit plan.

Symbols

E	May be excluded from coverage or subject to Prior Authorization in Connecticut, New Jersey and New York
H	May be part of health care reform preventive ⁵
H-PA	May be part of health care reform preventive with prior authorization ⁵
MC	Multiple copay
PA	Prior authorization required ⁶
QL	Quantity limit
RS	May be eligible for the Refill and Save Program
SP	Specialty medication
ST	Step therapy ⁷
T4	May be covered on Tier 4 in select benefits

Generic medication policy

Many generic medications are included on the PDL in Tier 1; however, generic medications can be placed into any tier of the PDL. When a generic medication does not offer significant financial savings, it may be placed in the same tier or a higher tier than the brand medication. Generic medications are noted in italic font.

Note that when a brand-name medication becomes available as a generic, that brand-name product may move to a higher tier or be excluded from coverage by the member’s plan. Members may be required to pay more for a prescription when a higher-tier brand-name product is dispensed. The member’s cost share is determined by the pharmacy benefit plan. When generic substitution conflicts with state regulations or restrictions, the pharmacist must obtain approval from the prescribing physician or other health care professional to substitute the generic equivalent.

Specialty medications

Some members may have coverage for self-administered injectable and oral specialty medications through their pharmacy benefit plan. You will find these medications included in the body of this document within the appropriate therapeutic categories. UnitedHealthcare has a specialty pharmacy program that requires most specialty medications to be obtained through a designated specialty pharmacy. These medications are noted by



SP throughout the document. The specialty pharmacy program includes designated specialty pharmacies, each selected based on their clinical expertise for the targeted therapeutic classes, quality of services, and cost. Their pharmacists are trained to help educate patients for these specialty medications, which may help improve treatment adherence.

Participating members should be instructed to call the toll-free member number on their member ID card where a representative will answer questions about our program and then transfer them to a specialty pharmacy based on their particular specialty medication prescription.

Medications requiring prior authorization and other pharmacy programs

Select medications may require prior authorization to be eligible for coverage under the member's pharmacy benefit plan. Such medications are noted with a **PA**. Depending on your patients' benefit and/or medication, a coverage review may apply to determine coverage under the pharmacy benefit. The pharmacy benefit may exclude coverage of medications for certain uses.

Clinical criteria for **PA** medications are available on our website at [UHCprovider.com](https://uhcprovider.com). The criteria reflect UnitedHealthcare's P&T Committee decisions.

Some benefit plans may include our Step Therapy⁷ program. Step Therapy requires prior authorization and offers a "stepwise" approach to therapy for certain high-cost medications and requires that a member first try a more cost-effective medication before another high-cost medication. Step Therapy medications are noted as **ST**.

Quantity limits define the maximum supply of medication per copayment or period of time. Quantity limits are based on several factors that may include FDA-approved dosing guidelines as defined in the product package insert, medical literature, guidelines or supportive data. Quantity limit medications are noted as **QL**.

The Refill and Save Program encourages members to adhere to their treatment regimens by rewarding them with a discounted copayment/coinsurance for refilling their prescription within the defined time period. Eligible medications are noted as **RS**.

How to obtain prior authorization

Use the PreCheck MyScript app on Link. By using the PreCheck MyScript app, you can now run a pharmacy trial claim and get real-time prescription coverage detail for your patients who are UnitedHealthcare benefit plan members. This will allow you to check current prescription coverage and price, including out-of-pocket prescription costs for UnitedHealthcare members at their selected pharmacy, as well as:

- Get information on lower-cost prescription alternatives, if available, to help save members money.
- See which prescriptions currently require prior authorization, or are non-covered or non-preferred.
- Request prior authorization and receive status and results.

The app is now available to all Link users; to access, sign in to [UHCprovider.com](https://uhcprovider.com), then select the Link Marketplace from your Link dashboard and search for the PreCheck MyScript app. Add the app to your dashboard and start using it.

Below are also options to obtain authorization:

- Online: Prior authorizations can also be submitted online by signing in to optumrx.com > Healthcare Professionals > Prior Authorizations.
- By Phone: Call the Optum Rx prior authorization team at **1-800-711-4555**.

¹ In certain documents the Prescription Drug List (PDL) was referred to as the "Preferred Drug List (PDL)." This change in descriptive terms does not affect your patient's benefit coverage.

² Where differences are noted, the benefit plan documents will govern.

³ UnitedHealthcare operates a wide number of benefit programs and products, and some benefit programs may have alternative benefit designs. Physicians should always check the member's specific benefit prior to prescribing medications.

⁴ In certain documents Tier 1 was referred to as "generics;" Tier 2 was referred to as "preferred brands" or "brand-name" on the PDL; and Tier 3 was referred to as "non-preferred brands," "not on the PDL," or "brand-name not on the PDL." These changes in descriptive terms do not affect your patient's benefit coverage.

⁵ Health Care Reform drug lists may vary by plan; your patient can find the most up-to-date tier status and cost information for a particular medication by visiting myuhc.com and/or calling the toll-free member phone number on their member ID card.

⁶ Depending on your patients' benefit and/or medication, notification or medical necessity criteria will be applied to determine if covered under the pharmacy benefit.

⁷ For New Jersey fully insured members, this program is referred to as First Start.

⁸ In accordance with HCR/ACA requirements, providers may request a zero dollar coverage exception review for preventive medications. Please access uhcprovider.com>Drug List and Pharmacy>Additional Resources > Patient Protection and Affordable Care Act \$0 Cost-share Preventive Medications Exemption Requests (Commercial members) or call the toll-free number on the member's health plan ID card.



Drug Name	Drug Tier	Requirements & Limits	Drug Name	Drug Tier	Requirements & Limits
Analgesics - Drugs for Pain			hydrocodone-acetaminophen oral tablet 10-300 mg, 5-300 mg, 7.5-300 mg	E	QL
acetaminophen-codeine	1	QL	hydrocodone-acetaminophen oral tablet 10-325 mg, 5-325 mg, 7.5-325 mg	1	QL
ALLZITAL	E	QL	hydrocodone-ibuprofen	1	QL
apap-caff-dihydrocodeine	4	QL	hydromorphone hcl oral tablet	1	QL
ascomp-codeine	1	QL	lidocaine external ointment 5 %	2	QL
bac	1	QL	lidocaine external patch 5 %	3	PA, QL
BELBUCA	3	PA, QL	lidocaine hcl urethral/mucosal	1	
BUPAP	E	QL	lidocaine-prilocaine external cream	1	
buprenorphine	3	PA, QL	LIDOCAN	E	PA, QL
butalbital-acetaminophen oral tablet 50-300 mg	E	QL	LIDODERM	E	PA, QL
butalbital-acetaminophen oral tablet 50-325 mg	1	QL	LORTAB ORAL ELIXIR 10-300 MG/15ML	4	QL
butalbital-apap-caff-cod oral capsule 50-300-40-30 mg	E	QL	methadone hcl oral tablet	1	PA, QL
butalbital-apap-caff-cod oral capsule 50-325-40-30 mg	1	QL	morphine sulfate (concentrate)	1	QL
butalbital-apap-caffeine oral capsule 50-300-40 mg	3	QL	morphine sulfate er oral tablet extended release	1	PA, QL
butalbital-apap-caffeine oral capsule 50-325-40 mg	1	QL	morphine sulfate oral	1	QL
butalbital-apap-caffeine oral tablet	1	QL	MS CONTIN	E	PA, QL
butalbital-asa-caff-codeine	1	QL	NALOCET	E	QL
butalbital-aspirin-caffeine	1	QL	NUCYNTA	4	QL
butorphanol tartrate nasal	2	QL	NUCYNTA ER	3	PA, QL
BUTRANS	E	PA, QL	OXYCODONE HCL ER	E	PA, QL
DILAUDID ORAL TABLET	E	QL	oxycodone hcl oral capsule	1	QL
endocet	1	QL	oxycodone hcl oral solution	1	QL
ESGIC	4	QL	oxycodone hcl oral tablet 10 mg, 15 mg, 20 mg, 30 mg, 5 mg	1	QL
fentanyl transdermal patch 72 hour 100 mcg/hr, 12 mcg/hr, 25 mcg/hr, 50 mcg/hr, 75 mcg/hr	2	PA, QL	OXYCODONE-ACETAMINOPHEN ORAL TABLET 10-300 MG, 2.5-300 MG, 5-300 MG, 7.5-300 MG	E	QL
fentanyl transdermal patch 72 hour 37.5 mcg/hr, 62.5 mcg/hr, 87.5 mcg/hr	E	PA, QL	oxycodone-acetaminophen oral tablet 10-325 mg, 2.5-325 mg, 5-325 mg, 7.5-325 mg	1	QL
FIORICET	4	QL	OXYCONTIN	E	PA, QL
FIORICET/CODEINE	E	QL	oxymorphone hcl er	3	PA, QL
glydo	1		PERCOCET	E	QL
hydrocodone-acetaminophen oral solution 7.5-325 mg/15ml	2	QL			

Drugs listed as E or ST are subject to Prior Authorization in CT, NJ and NY.



Drug Name	Drug Tier	Requirements & Limits	Drug Name	Drug Tier	Requirements & Limits
premium lidocaine	2	QL	ec-naproxen	1	
PROLATE ORAL TABLET	E	QL	etodolac	2	
ROXICODONE	E	QL	etodolac er	3	
TENCON	3	QL	FELDENE ORAL CAPSULE 10 MG, 20 MG	4	
tramadol hcl (er biphasic) oral tablet extended release 24 hour	2	(generic for Ryzolt), QL	flurbiprofen oral	1	
tramadol hcl er	2	(generic for Ultram ER), QL	ibuprofen oral suspension 100 mg/5ml	E	
tramadol hcl oral tablet 100 mg, 25 mg	E	QL	ibuprofen oral tablet 400 mg, 600 mg, 800 mg	1	
tramadol hcl oral tablet 50 mg	1	QL	indomethacin er	2	
tramadol-acetaminophen	1	QL	indomethacin oral capsule	1	
TREZIX	4	QL	ketorolac tromethamine oral	1	
TRIDACAINE II	E	PA, QL	LODINE	E	
ULTRACET ORAL TABLET 37.5-325 MG	4	QL	LOFENA	E	QL
ULTRAM ORAL TABLET 50 MG	E	QL	mefenamic acid oral	3	
XTAMPZA ER	4	PA, QL	meloxicam oral tablet	1	
ZTLIDO	3	PA, QL	nabumetone oral	1	
Analgesics - Drugs for Pain and Inflammation			NAPROSYN ORAL TABLET	E	
ANAPROX DS	E		naproxen dr	1	
ARTHROTEC	E		naproxen oral tablet	1	
CAMBIA	E	QL	naproxen oral tablet delayed release	1	
CELEBREX	E	QL	naproxen sodium oral tablet 275 mg, 550 mg	2	
celecoxib oral	2	QL	oxaprozin oral tablet	2	
DAYPRO	4		piroxicam oral	2	
diclofenac potassium oral tablet 25 mg	E	QL	RELAFEN DS	E	
diclofenac potassium oral tablet 50 mg	2		sulindac oral	1	
diclofenac potassium(migraine)	E	QL	Anti-Addiction / Substance Abuse Treatment Agents		
diclofenac sodium er	3		acamprosate calcium	1	
diclofenac sodium external gel 1 %	E		buprenorphine hcl sublingual	1	QL
diclofenac sodium oral	1		buprenorphine hcl-naloxone hcl	2	QL
diclofenac-misoprostol	3		bupropion hcl er (smoking det)	1	H
EC-NAPROSYN ORAL TABLET DELAYED RELEASE 375 MG	3		disulfiram oral	1	
EC-NAPROSYN ORAL TABLET DELAYED RELEASE 500 MG	4		KLOXXADO	2	QL
			naloxone hcl injection solution prefilled syringe 2 mg/2ml	1	
			naloxone hcl nasal	1	QL

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Drug Name	Drug Tier	Requirements & Limits	Drug Name	Drug Tier	Requirements & Limits
naltrexone hcl oral	1		CLEOCIN ORAL CAPSULE 150 MG, 300 MG	4	
NARCAN	2	QL (include Narcan OTC)	CLEOCIN ORAL CAPSULE 75 MG	2	
NICOTROL	4	PA, H	CLEOCIN ORAL SOLUTION RECONSTITUTED	4	
REXTOVY	E		CLEOCIN VAGINAL CREAM	4	
SUBOXONE	E	PA, QL	clindamycin hcl oral	1	
varenicline tartrate	3	PA, H	clindamycin palmitate hcl	2	
varenicline tartrate (starter)	3	PA, H	clindamycin phosphate vaginal	2	
varenicline tartrate(continue)	3	PA, H	CLINDESSE	2	
ZIMHI	2	QL	dicloxacillin sodium	1	
ZUBSOLV	2	QL	DIFICID ORAL TABLET	3	QL
Antibacterials - Drugs for Infections			DORYX MPC	E	
ACTICLATE ORAL TABLET 150 MG, 75 MG	E		DORYX ORAL TABLET DELAYED RELEASE 200 MG, 50 MG, 80 MG	E	
amoxicillin	1		doxycycline hyclate oral capsule	2	
amoxicillin-potassium clavulanate	1		doxycycline hyclate oral tablet 100 mg	2	
ampicillin	1		doxycycline hyclate oral tablet 150 mg, 50 mg, 75 mg	E	
AUGMENTIN	E		doxycycline hyclate oral tablet 20 mg	1	
AUGMENTIN ES-600	E		doxycycline hyclate oral tablet delayed release 100 mg, 150 mg, 200 mg, 50 mg, 75 mg	E	
AVIDOXY	4		DOXYCYCLINE HYCLATE ORAL TABLET DELAYED RELEASE 80 MG	E	
azithromycin oral	1		doxycycline monohydrate oral capsule 100 mg, 50 mg	1	
BACTRIM	4		doxycycline monohydrate oral capsule 150 mg, 75 mg	E	
BACTRIM DS	4		doxycycline monohydrate oral suspension reconstituted	3	
cefadroxil	1		doxycycline monohydrate oral tablet	1	
cefdinir	1		E.E.S. GRANULES	3	
cefixime	3		ERYPED 200	3	
cefpodoxime proxetil oral tablet	1		ERYPED 400	4	
cefprozil	1		ERY-TAB	4	
cefuroxime axetil	1				
CENTANY EXTERNAL OINTMENT 2 %	4	QL			
cephalexin	1				
CIPRO ORAL TABLET	4				
ciprofloxacin hcl oral	1				
clarithromycin er	2				
clarithromycin oral suspension reconstituted	2				
clarithromycin oral tablet	1				

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Drug Name	Drug Tier	Requirements & Limits	Drug Name	Drug Tier	Requirements & Limits
erythromycin base oral tablet	1		penicillin v potassium	1	
erythromycin base oral tablet delayed release	3		SEYSARA	E	
erythromycin ethylsuccinate oral suspension reconstituted 200 mg/5ml	1		SILVADENE	4	
erythromycin ethylsuccinate oral suspension reconstituted 400 mg/5ml	3		silver sulfadiazine external	1	
erythromycin oral	3		ssd	1	
FIRVANQ	4		sulfamethoxazole-trimethoprim oral	1	
FLAGYL	4		sulfatrim pediatric	1	
fosfomycin tromethamine	3		TARGADOX	E	
gentamicin sulfate external	1	QL	tetracycline hcl oral capsule	3	
HIPREX	4		tinidazole oral	3	
levofloxacin oral tablet	1		trimethoprim oral	1	
LIKMEZ	4		VANCOCIN	4	
linezolid oral tablet	2		vancomycin hcl oral	1	
MACROBID	4		VANDAZOLE	4	
MACRODANTIN	4		VIBRAMYCIN	4	
methenamine hippurate	1		XACIATO	2	QL
metronidazole oral	1		XENLETA ORAL TABLET 600 MG	3	
metronidazole vaginal	2		XIFAXAN	3	PA, QL
minocycline hcl oral capsule	1		XIMINO ORAL CAPSULE EXTENDED RELEASE 24 HOUR 135 MG, 45 MG, 90 MG	E	PA
minocycline hcl oral tablet	E		ZITHROMAX ORAL	4	
MONDOXYNE NL	4		ZITHROMAX TRI-PAK	4	
MONUROL ORAL PACKET 3 GM	4		ZITHROMAX Z-PAK	4	
moxifloxacin hcl oral	3		ZYVOX ORAL TABLET	E	
mupirocin calcium	3	QL	Anticoagulants - Drugs to Treat or Prevent Blood Clots		
mupirocin external	1	QL	ARIXTRA	E	QL
neomycin sulfate oral	1		dabigatran etexilate mesylate	2	QL
nitrofurantoin macrocrystal	1		ELIQUIS	2	QL
nitrofurantoin monohydrate macrocrystals	1		ELIQUIS DVT/PE STARTER PACK	2	QL
nitrofurantoin oral suspension 25 mg/5ml	3		enoxaparin sodium injection solution prefilled syringe	2	QL
NITROFURANTOIN ORAL SUSPENSION 50 MG/5ML	E		fondaparinux sodium	2	QL
NUVESSA	E		jantoven	1	
NUZYRA ORAL	4	QL	LOVENOX INJECTION SOLUTION PREFILLED SYRINGE	E	QL
			PRADAXA ORAL CAPSULE	2	QL

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Drug Name	Drug Tier	Requirements & Limits	Drug Name	Drug Tier	Requirements & Limits
warfarin sodium oral	1		FYCOMPA ORAL SUSPENSION	4	PA
XARELTO	2	QL	FYCOMPA ORAL TABLET	3	PA
XARELTO STARTER PACK	2	QL			
Anticonvulsants - Drugs for Seizures			gabapentin oral capsule	1	
APTIOM	3	PA	gabapentin oral solution 250 mg/5ml	1	
BANZEL	4	PA	GABAPENTIN ORAL TABLET 25 MG, 50 MG	E	PA
BRIVIACT ORAL SOLUTION	4	PA			
BRIVIACT ORAL TABLET	3	PA	gabapentin oral tablet 600 mg, 800 mg	1	
carbamazepine er oral capsule extended release 12 hour	2		KEPPRA ORAL	4	PA
carbamazepine er oral tablet extended release 12 hour	3		KEPPRA XR	4	PA
carbamazepine oral tablet	1		lacosamide oral	2	
carbamazepine oral tablet chewable	1		LAMICTAL	4	PA
CARBATROL	4		LAMICTAL ODT ORAL TABLET DISPERSIBLE	4	PA
clobazam oral suspension	3	PA	LAMICTAL XR ORAL TABLET EXTENDED RELEASE 24 HOUR	3	PA
clobazam oral tablet	2	PA	lamotrigine er	3	
DEPAKOTE	4	PA	lamotrigine oral tablet	1	
DEPAKOTE ER	4	PA	lamotrigine oral tablet chewable	1	
DEPAKOTE SPRINKLES	4	PA	lamotrigine oral tablet dispersible	3	PA
DIASTAT ACUDIAL RECTAL GEL 10 MG, 20 MG	4	QL	levetiracetam er	2	
diazepam rectal	1	QL	levetiracetam oral	1	
DILANTIN INFATABS	3		MOTPOLY XR	3	PA
DILANTIN ORAL CAPSULE	3		MYSOLINE	2	PA
divalproex sodium er	2		NAYZILAM	3	PA, QL
divalproex sodium oral capsule delayed release sprinkle	2		NEURONTIN	4	PA
divalproex sodium oral tablet delayed release	1		ONFI	4	PA
ELEPSIA XR	E	PA	oxcarbazepine	1	
EPIDIOLEX	3	PA, SP	OXTELLAR XR	E	
epitol	1		phenobarbital oral	1	
ethosuximide oral	1		phenytek	1	
felbamate	1		phenytoin infatabs	1	
FELBATOL	4	PA	phenytoin oral tablet chewable	1	
FELBATOL ORAL SUSPENSION 600 MG/5ML	4	PA	phenytoin sodium extended	1	
FINTEPLA	4	PA	primidone oral tablet 125 mg	1	PA
			primidone oral tablet 250 mg, 50 mg	1	
			QUDEXY XR	E	

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Drug Name	Drug Tier	Requirements & Limits	Drug Name	Drug Tier	Requirements & Limits
roweepra	1		RAZADYNE ER ORAL CAPSULE EXTENDED RELEASE 24 HOUR 16 MG, 24 MG, 8 MG	4	
rufinamide oral suspension	3		rivastigmine	3	
rufinamide oral tablet	3	PA	rivastigmine tartrate	1	
SABRIL ORAL PACKET	E	PA, QL, SP	Antidepressants - Drugs for Depression		
subvenite	1		amitriptyline hcl oral	1	
SYMPAZAN	4	PA	ANAFRANIL	E	
TEGRETOL ORAL TABLET	3		APLENZIN	E	QL
TEGRETOL-XR	4		AUVELITY	4	ST, QL
TOPAMAX	4	PA	bupropion hcl er (sr)	1	
TOPAMAX SPRINKLE	4	PA	bupropion hcl er (xl) oral tablet extended release 24 hour 150 mg, 300 mg	1	
topiramate er	E		BUPROPION HCL ER (XL) ORAL TABLET EXTENDED RELEASE 24 HOUR 450 MG	E	QL
topiramate oral	1		bupropion hcl oral	1	
TRILEPTAL	4	PA	CELEXA	E	
TROKENDI XR	E		citalopram hydrobromide oral solution	1	
valproic acid oral	1		citalopram hydrobromide oral tablet	1	
VALTOCO	3	PA, QL	clomipramine hcl oral	3	
vigabatrin oral packet	2	PA, QL, SP	CYMBALTA	E	
vigadrone oral packet	2	PA, QL, SP	desipramine hcl oral	1	
vigpoder	2	PA, QL, SP	DESVENLAFAXINE ER	E	
VIMPAT ORAL	4	PA	desvenlafaxine succinate er	3	QL
XCOPRI	3	PA	doxepin hcl oral capsule	1	
ZARONTIN	4		doxepin hcl oral concentrate	1	
ZONEGRAN	4	PA	duloxetine hcl oral capsule delayed release particles 20 mg, 30 mg, 60 mg	2	
zonisamide oral	1		duloxetine hcl oral capsule delayed release particles 40 mg	E	
Antidementia Agents - Drugs for Alzheimer's Disease and Dementia			EFFEXOR XR	E	
ARICEPT	E		escitalopram oxalate oral solution	3	
donepezil hcl oral tablet 10 mg, 5 mg	1		escitalopram oxalate oral tablet	1	
donepezil hcl oral tablet 23 mg	2		FETZIMA	4	ST, QL
EXELON	E		fluoxetine hcl oral capsule	1	
galantamine hydrobromide er	1				
memantine hcl er	3				
memantine hcl oral tablet	1				
NAMENDA ORAL TABLET 10 MG, 5 MG	E				
NAMENDA TITRATION PAK	E				
NAMENDA XR	E				

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Drug Name	Drug Tier	Requirements & Limits	Drug Name	Drug Tier	Requirements & Limits
fluoxetine hcl oral capsule delayed release	3	QL	venlafaxine hcl	1	
fluoxetine hcl oral solution	1		venlafaxine hcl er oral capsule extended release 24 hour	1	
fluoxetine hcl oral tablet 10 mg	3	QL	venlafaxine hcl er oral tablet extended release 24 hour	E	QL
fluoxetine hcl oral tablet 20 mg, 60 mg	3		VIIBRYD	E	QL
fluvoxamine maleate	1		VIIBRYD STARTER PACK ORAL KIT 10 & 20 MG	4	
fluvoxamine maleate er	3	QL	vilazodone hcl	3	QL
FORFIVO XL	E	QL	WAINUA	2	PA, QL, SP
imipramine hcl oral	1		WELLBUTRIN SR	E	
LEXAPRO	E		WELLBUTRIN XL	E	
mirtazapine oral	1		ZOLOFT	E	
NORPRAMIN	4		ZURZUVAE	2	PA, QL, SP
nortriptyline hcl oral capsule	1		Antiemetics - Drugs for Nausea and Vomiting		
olanzapine-fluoxetine hcl	2	QL	ANTIVERT ORAL TABLET	E	
PAMELOR	E		aprepitant oral capsule 125 mg, 40 mg, 80 mg	2	QL
PARNATE	4		BONJESTA	E	PA
paroxetine hcl er	3	QL	COMPRO	3	
paroxetine hcl oral tablet	1		DICLEGIS	E	PA
paroxetine mesylate	E	QL	doxylamine-pyridoxine	E	PA
PAXIL CR	E	QL	dronabinol	1	
PAXIL ORAL TABLET	E		EMEND ORAL CAPSULE	E	QL
PRISTIQ	E	QL	GIMOTI	E	QL
protriptyline hcl	1		granisetron hcl oral	2	
PROZAC	E		MARINOL 2.5 MG	4	
REMERON	E		meclizine hcl oral tablet	E	
REMERON SOLTAB ORAL TABLET DISPERSIBLE 15 MG, 30 MG	E		metoclopramide hcl oral solution	1	
SERTRALINE HCL ORAL CAPSULE	E	QL	metoclopramide hcl oral tablet	1	
sertraline hcl oral concentrate	1		ondansetron hcl oral	1	
sertraline hcl oral tablet	1		ondansetron odt oral tablet dispersible 4 mg, 8 mg	1	
SPRAVATO (56 MG DOSE)	4	PA, QL	perphenazine oral	1	
SPRAVATO (84 MG DOSE)	4	PA, QL	prochlorperazine	1	
SYMBYAX	4	QL	prochlorperazine maleate oral	1	
tranlycypromine sulfate	1		promethazine hcl oral	1	
trazodone hcl oral	1		promethazine hcl rectal	1	
TRINTELLIX	4	ST, QL			

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Drug Name	Drug Tier	Requirements & Limits	Drug Name	Drug Tier	Requirements & Limits
PROMETHEGAN	3		posaconazole oral tablet delayed release	2	
REGLAN	4		SPORANOX ORAL CAPSULE	4	QL
scopolamine	3		SPORANOX PULSEPAK ORAL CAPSULE 100 MG	4	QL
TRANSDERM-SCOP	E		SULCONAZOLE NITRATE EXTERNAL CREAM	3	
Antifungals - Drugs for Fungal Infections			terbinafine hcl oral	1	
ciclodan	1		terconazole	1	
ciclopirox external gel	1		TOLSURA	E	
ciclopirox external shampoo	2		VFEND ORAL TABLET 200 MG	4	QL
ciclopirox external solution	1		VFEND ORAL TABLET 50 MG	3	QL
ciclopirox olamine external cream	1		VIVJOA	3	PA, QL
clotrimazole mouth/throat	1		voriconazole oral tablet	1	QL
CRESEMBA ORAL	3		Antigout Agents - Drugs for Gout		
DIFLUCAN	E		allopurinol oral tablet 100 mg, 300 mg	1	
econazole nitrate external	2		ALLOPURINOL ORAL TABLET 200 MG	E	
EXELDERM EXTERNAL CREAM	3		colchicine oral	2	
fluconazole oral	1		colchicine-probenecid	1	
griseofulvin microsize oral	1		febuxostat	3	
griseofulvin ultramicrosize	1		MITIGARE	2	
GYNAZOLE-1	3		probenecid	1	
itraconazole oral capsule	1	QL	ULORIC	E	
JUBLIA	4	PA, ST, QL	ZYLOPRIM ORAL TABLET 100 MG, 300 MG	4	
ketoconazole external cream	1	QL	Antimigraine Agents - Drugs for Migraines		
ketoconazole external shampoo	1		AIMOVIG	2	PA, ST
ketoconazole oral	1		AIMOVIG SUBCUTANEOUS SOLUTION AUTO-INJECTOR 140 MG/ML	2	PA, ST, QL
klayesta	1	QL	AJOVY	E	PA, ST, QL
LOPROX EXTERNAL CREAM 0.77 %	E		almotriptan malate	3	QL
LOPROX EXTERNAL SHAMPOO 1 %	E		AMERGE ORAL TABLET 1 MG, 2.5 MG	E	QL
NOXAFIL ORAL TABLET DELAYED RELEASE	E		eletriptan hydrobromide	2	QL
nyamyc	1	QL	EMGALITY	2	PA, ST, QL
nystatin external	1	QL	FROVA	E	QL
nystatin mouth/throat	1		frovatriptan succinate	3	QL
nystatin oral	1				
nystatin-triamcinolone	2				
nystop	1	QL			

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Drug Name	Drug Tier	Requirements & Limits	Drug Name	Drug Tier	Requirements & Limits
IMITREX NASAL SOLUTION 20 MG/ACT, 5 MG/ACT	4	QL	pyridostigmine bromide oral tablet 60 mg	1	
IMITREX ORAL	E	QL	Antimycobacterials - Drugs to Treat Infections		
IMITREX STATDOSE REFILL	E	QL	dapsone oral	2	
IMITREX STATDOSE SYSTEM	E	QL	ethambutol hcl oral	1	
MAXALT	E	QL	isoniazid oral tablet	1	
MAXALT-MLT	E	QL	MYAMBUTOL	4	
naratriptan hcl	1	QL	MYCOBUTIN	4	
NURTEC ODT	2	PA, ST, QL	rifabutin	1	
QULIPTA	2	PA, ST, QL	rifampin oral	1	
RELPAK	E	QL	Antineoplastics - Drugs for Cancer		
REYVOW	4	PA, ST, QL	abiraterone acetate oral tablet 250 mg	2	PA, QL, SP
rizatriptan benzoate	1	QL	abiraterone acetate oral tablet 500 mg	E	PA, QL, SP
sumatriptan nasal	2	QL	AFINITOR	E	PA, QL, SP
sumatriptan succinate oral	1	QL	ALECENSA	2	PA, QL
sumatriptan succinate refill subcutaneous solution cartridge	1	QL	ALUNBRIG	2	PA, QL, SP
sumatriptan succinate subcutaneous	1	QL	anastrozole oral	1	H-PA
sumatriptan-naproxen sodium	E	QL	ARIMIDEX	E	
TOSYMRA	E	QL	AROMASIN	E	
TREXIMET	E	QL	AUGTYRO	2	PA, QL, SP
TRUDHESA	E	PA, QL	bicalutamide	1	
UBRELVY	2	PA, ST, QL	BOSULIF ORAL TABLET	2	PA, ST, QL, SP
ZAVZPRET	4	PA, ST, QL	BRUKINSA	3	PA, ST, QL, SP
ZEMBRACE SYMTOUCH	E	QL	CABOMETYX	2	PA, QL, SP
zolmitriptan nasal	E	QL	CALQUENCE	2	PA, QL, SP
zolmitriptan oral tablet	2	QL	CALQUENCE ORAL CAPSULE 100 MG	2	PA, QL, SP
zolmitriptan oral tablet dispersible	3	QL	capecitabine	1	QL, SP
ZOMIG NASAL	2	QL	CASODEX	4	
Antimyasthenic Agents - Drugs to Treat Myasthenia Gravis			COTELLIC	2	PA, QL, SP
MESTINON ORAL TABLET	E		cyclophosphamide oral capsule	2	
MESTINON ORAL TABLET EXTENDED RELEASE	E		ERIVEDGE	2	PA, QL, SP
pyridostigmine bromide er	1		ERLEADA ORAL TABLET 240 MG	2	PA, QL
pyridostigmine bromide oral tablet 30 mg	E		ERLEADA ORAL TABLET 60 MG	2	PA, QL, SP
			everolimus oral tablet 10 mg, 2.5 mg, 5 mg, 7.5 mg	2	PA, QL, SP
			exemestane	2	H-PA

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Drug Name	Drug Tier	Requirements & Limits	Drug Name	Drug Tier	Requirements & Limits
EXKIVITY ORAL CAPSULE 40 MG	4	PA, QL, SP	ORGOVYX	3	PA, QL, SP
FEMARA	E		pazopanib hcl	3	PA, QL, SP
GAVRETO	4	PA, QL, SP	PIQRAY	2	PA, QL, SP
GLEEVEC	E	PA, QL, SP	POMALYST	3	PA, QL, SP
HYDREA	4		RETEVMO ORAL CAPSULE 40 MG	4	PA, QL, SP
hydroxyurea oral	1		RETEVMO ORAL CAPSULE 80 MG	4	PA, SP
IBRANCE	2	PA, QL, SP	REVLIMID	2	PA, QL, SP
ICLUSIG ORAL TABLET 10 MG, 30 MG	3	PA, QL	ROZLYTREK ORAL CAPSULE	2	PA, QL, SP
ICLUSIG ORAL TABLET 15 MG, 45 MG	3	PA, QL, SP	ROZLYTREK ORAL PACKET	2	PA, SP
IDHIFA	2	PA, QL, SP	SPRYCEL	4	PA, ST, QL, SP
imatinib mesylate	1	PA, QL, SP	STIVARGA	2	PA, QL, SP
IMBRUVICA ORAL CAPSULE	2	PA, QL, SP	TABRECTA	4	PA, QL, SP
IMBRUVICA ORAL TABLET 140 MG, 280 MG	E	PA, QL, SP	TAFINLAR ORAL CAPSULE	4	PA, ST, QL, SP
IMBRUVICA ORAL TABLET 420 MG	2	PA, QL, SP	TAGRISSO	3	PA, QL, SP
INLYTA	3	PA, QL, SP	tamoxifen citrate oral tablet 10 mg	1	
JAKAFI	2	PA, QL, SP	tamoxifen citrate oral tablet 20 mg	1	H-PA
KISQALI ORAL TABLET THERAPY PACK 200 MG	4	PA, ST, QL, SP	TASIGNA	2	PA, ST, QL, SP
KOSELUGO	3	PA, QL, SP	TEMODAR ORAL CAPSULE 250 MG	E	PA, SP
lenalidomide	2	PA, QL, SP	temozolomide	1	PA, SP
LENVIMA ORAL CAPSULE THERAPY PACK 10 & 4 MG, 10 MG, 10 MG & 2 X 4 MG, 2 X 10 MG, 2 X 10 MG & 4 MG, 2 X 4 MG, 3 X 4 MG, 4 MG	3	PA, QL, SP	TRUQAP	2	PA, QL, SP
letrozole oral	1	H-PA	VENCLEXTA	2	PA, QL, SP
leucovorin calcium oral	1		VERZENIO	2	PA, QL, SP
LONSURF	4	PA, QL, SP	VITRAKVI	2	PA, QL, SP
LUMAKRAS	4	PA, QL, SP	VOTRIENT	E	PA, QL, SP
LYNPARZA	2	PA, QL, SP	XELODA	E	QL, SP
MEKINIST ORAL TABLET	4	PA, ST, QL, SP	XTANDI	2	PA, QL, SP
mercaptopurine oral	1		ZEJULA ORAL CAPSULE 100 MG	2	PA, QL, SP
NERLYNX	2	PA, QL, SP	ZELBORAF	2	PA, QL, SP
NINLARO	2	PA, QL, SP	ZYTIGA	E	PA, QL, SP
NUBEQA	2	PA, QL, SP	Antiparasitics - Drugs for Parasitic Infections		
ODOMZO	2	PA, QL, SP	albendazole oral	3	PA, QL
			ALINIA ORAL TABLET	E	QL
			ARAKODA	4	QL
			atovaquone	2	

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Drug Name	Drug Tier	Requirements & Limits	Drug Name	Drug Tier	Requirements & Limits
atovaquone-proguanil hcl	2		STALEVO 100 ORAL TABLET 25-100-200 MG	4	
hydroxychloroquine sulfate oral	1		STALEVO 125 ORAL TABLET 31.25-125-200 MG	4	
ivermectin oral	1	PA, QL	STALEVO 150	4	
KRINTAFEL	1	QL	STALEVO 200 ORAL TABLET 50-200-200 MG	4	
MALARONE	4		STALEVO 50 ORAL TABLET 12.5-50-200 MG	4	
mefloquine hcl	1		STALEVO 75 ORAL TABLET 18.75-75-200 MG	4	
MEPRON	E		trihexyphenidyl hcl oral tablet	1	
nitazoxanide oral	2	QL	Antiplatelets - Drugs for Heart Attack and Stroke Prevention		
permethrin external	1		BRILINTA	4	QL
PLAQUENIL	E		cilostazol	1	
SOVUNA	E		clopidogrel bisulfate oral	1	
STROMEKTOL	4	PA, QL	EFFIENT	E	
Antiparkinson Agents - Drugs for Parkinson's Disease			PLAVIX	E	
amantadine hcl oral	1		prasugrel hcl	3	
AZILECT	E		Antipsychotics - Drugs for Mood Disorders		
benztropine mesylate oral	1		ABILIFY	E	
bromocriptine mesylate oral tablet	1		aripiprazole oral solution	3	
carbidopa-levodopa er	1		aripiprazole oral tablet	2	
carbidopa-levodopa oral tablet	1		asenapine maleate	3	QL
carbidopa-levodopa-entacapone	1		CAPLYTA	4	PA, ST, QL
COMTAN ORAL TABLET 200 MG	4		chlorpromazine hcl oral tablet	1	QL
DHIVY	E		clozapine oral tablet	1	
entacapone	1		CLOZARIL	4	
INBRIJA	3	PA, QL, SP	fluphenazine hcl oral tablet	1	
MIRAPEX ER	E		GEODON ORAL	E	
NEUPRO	3		haloperidol oral	1	
NOURIANZ	3	PA, QL	INVEGA	E	QL
PARLODEL ORAL TABLET	E		LATUDA	E	QL
pramipexole dihydrochloride	1		loxapine succinate	1	
pramipexole dihydrochloride er	E		lurasidone hcl	2	QL
rasagiline mesylate oral	3		LYBALVI	E	PA, QL
ropinirole hcl	1		NUPLAZID ORAL CAPSULE	4	PA
ropinirole hcl er	E		olanzapine oral tablet	1	
RYTARY	E				
SINEMET	4				

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Drug Name	Drug Tier	Requirements & Limits	Drug Name	Drug Tier	Requirements & Limits
olanzapine oral tablet dispersible	2		EPZICOM	E	QL
paliperidone er	3	QL	etravirine	2	
pimozide	2		famciclovir oral tablet 125 mg, 500 mg	2	
quetiapine fumarate	1		famciclovir oral tablet 250 mg	2	QL
quetiapine fumarate er	2		GENVOYA	4	QL
REXULTI	4	QL	HARVONI ORAL TABLET	2	PA, ST, QL, SP
RISPERDAL	E		INTELENCE ORAL TABLET 100 MG, 200 MG	4	
risperidone	1		INTELENCE ORAL TABLET 25 MG	2	
SAPHRIS	E	QL	ISENTRESS HD	2	
SEROQUEL	E		ISENTRESS ORAL TABLET	2	
SEROQUEL XR	E		JULUCA	2	QL
UZEDY SUBCUTANEOUS SUSPENSION PREFILLED SYRINGE 100 MG/0.28ML	E		LAGEVRIO	2	QL
VRAYLAR	4	QL	LEDIPASVIR-SOFOSBUVIR	2	PA, ST, QL, SP
ziprasidone hcl	2		MAVYRET	2	PA, QL, SP
ZYPREXA ORAL	E		NORVIR ORAL TABLET	E	
ZYPREXA ZYDIS	E		ODEFSEY	4	QL
Antivirals - Drugs for Viral Infections			oseltamivir phosphate oral capsule	2	
abacavir sulfate-lamivudine	2	QL	oseltamivir phosphate oral suspension reconstituted	2	QL
acyclovir external cream	E	QL	PAXLOVID (150/100)	2	QL
acyclovir external ointment	3	QL	PAXLOVID (300/100)	2	QL
acyclovir oral	1		PIFELTRO	3	
BARACLUDE ORAL TABLET	E		PREVYMIS ORAL	2	PA
BIKTARVY	4	QL	PREZCOBIX	2	
CIMDUO	2	QL	PREZISTA ORAL TABLET 150 MG, 75 MG	2	
COMPLERA	4	QL	PREZISTA ORAL TABLET 600 MG, 800 MG	E	
darunavir	1		ritonavir	2	
DELSTRIGO	2	QL	RUKOBIA	4	PA
DESCOVY	4	QL, H	SITAVIG	E	QL
DOVATO	2	QL	SOFOSBUVIR-VELPATASVIR	2	PA, QL, SP
efavirenz-emtricitab-tenofo df	2	QL	STRIBILD	4	QL
emtricitabine-tenofovir df oral tablet 100-150 mg, 133-200 mg, 167-250 mg	1	QL	SYMFI	2	QL
emtricitabine-tenofovir df oral tablet 200-300 mg	1	QL, H	SYMFI LO	2	QL
entecavir	1		SYMTUZA	E	QL
EPCLUSA ORAL TABLET	2	PA, QL, SP			

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Drug Name	Drug Tier	Requirements & Limits	Drug Name	Drug Tier	Requirements & Limits
TAMIFLU ORAL CAPSULE	E		KLONOPIN	E	
TAMIFLU ORAL SUSPENSION RECONSTITUTED	E	QL	lorazepam intensol	1	
tenofovir disoproxil fumarate	1	H-PA	lorazepam oral concentrate 2 mg/ml	1	
TIVICAY	3		lorazepam oral tablet	1	
TRIUMEQ	2	QL	oxazepam	1	
TRUVADA ORAL TABLET 100-150 MG, 133-200 MG, 167-250 MG	4	QL	triazolam	1	
TRUVADA ORAL TABLET 200-300 MG	E	QL	VALIUM	E	
valacyclovir hcl oral	1	QL	VISTARIL	4	
VALCYTE ORAL TABLET	E		XANAX	E	
valganciclovir hcl oral tablet	1		XANAX XR	E	
VALTREX	E	QL	Bipolar Agents - Drugs for Mood Disorders		
VEMLIDY	E	PA	EQUETRO	3	
VIREAD ORAL TABLET 150 MG, 200 MG, 250 MG	2		lithium carbonate er	1	
VIREAD ORAL TABLET 300 MG	E		lithium carbonate oral	1	
VOSEVI	2	PA, QL, SP	LITHOBID	4	PA
XOFLUZA (40 MG DOSE)	3	QL	Cardiovascular Agents - Drugs for Heart and Circulation Conditions		
XOFLUZA (80 MG DOSE)	3	QL	ACCUPRIL	E	
ZIRGAN	3		acebutolol hcl oral	1	
ZOVIRAX EXTERNAL	E	QL	acetazolamide er	1	
ZOVIRAX ORAL SUSPENSION 200 MG/5ML	4		acetazolamide oral	1	
Anxiolytics - Drugs for Anxiety			ALDACTAZIDE ORAL TABLET 25-25 MG	4	
alprazolam er	1		ALDACTAZIDE ORAL TABLET 50-50 MG	2	
alprazolam oral	1		ALDACTONE	E	
alprazolam xr	1		aliskiren fumarate	3	
ATIVAN ORAL	E		ALTACE	E	
buspirone hcl oral	1		amiloride hcl oral	1	
chlordiazepoxide hcl	1		amiloride-hydrochlorothiazide	1	
clonazepam oral	1		amiodarone hcl oral	1	
clorazepate dipotassium	1		amlodipine besylate oral	1	
diazepam oral solution	1		amlodipine besylate-benazepril hcl	1	
diazepam oral tablet	1		amlodipine besylate-valsartan	2	
HALCION	4		amlodipine-atorvastatin oral tablet 10-10 mg, 10-20 mg, 10-40 mg, 10-80 mg, 5-10 mg, 5-20 mg, 5-40 mg, 5-80 mg	E	
hydroxyzine hcl oral	1				
hydroxyzine pamoate oral	1				

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Drug Name	Drug Tier	Requirements & Limits	Drug Name	Drug Tier	Requirements & Limits
amlodipine-atorvastatin oral tablet 2.5-10 mg, 2.5-20 mg, 2.5-40 mg	E	QL	CARDIZEM CD	E	
amlodipine-olmesartan	E		CARDIZEM LA	E	
amlodipine-valsartan-hctz	E		CARDURA	4	
ANTARA ORAL CAPSULE 30 MG	E		cartia xt	2	
ATACAND	E		carvedilol	1	
ATACAND HCT	E		carvedilol phosphate er	E	
atenolol oral	1		CATAPRES-TTS-1	E	
atenolol-chlorthalidone	1		CATAPRES-TTS-2	E	
ATORVALIQ	4	PA	CATAPRES-TTS-3	E	
atorvastatin calcium oral tablet 10 mg, 20 mg	1	H-PA	chlorthalidone	1	
atorvastatin calcium oral tablet 40 mg, 80 mg	1		cholestyramine light	1	
AVALIDE	E		cholestyramine oral	1	
AVAPRO	E		clonidine hcl oral	1	
AZOR	E		clonidine patch weekly 0.1 mg/24hr transdermal	3	
benazepril hcl oral	1		clonidine patch weekly 0.1 mg/24hr transdermal	3	(Patch)
benazepril-hydrochlorothiazide	1		clonidine patch weekly 0.2 mg/24hr transdermal	3	
BENICAR	E		clonidine patch weekly 0.2 mg/24hr transdermal	3	(Patch)
BENICAR HCT	E		clonidine patch weekly 0.3 mg/24hr transdermal	3	
BETAPACE	E		clonidine patch weekly 0.3 mg/24hr transdermal	3	(Patch)
BETAPACE AF	4		colesevelam hcl oral tablet	2	
betaxolol hcl oral	1		COLESTID ORAL TABLET	4	
BIDIL	E		colestipol hcl oral tablet	1	
bisoprolol fumarate oral	1		COREG	E	
bisoprolol-hydrochlorothiazide	1		COREG CR	E	
bumetanide oral	1		CORGARD	4	
BUMEX	3		CORLANOR	3	PA, QL
BYSTOLIC	E		COZAAR	E	
CADUET	E		CRESTOR	E	
CALAN SR ORAL TABLET EXTENDED RELEASE 120 MG, 180 MG, 240 MG	4		digitek oral tablet 125 mcg, 250 mcg	1	
CAMZYOS	4	PA, QL, SP	digox	1	
candesartan cilexetil	3		digoxin oral tablet	1	
candesartan cilexetil-hctz	3		diltiazem hcl er beads	2	
captopril oral	1		diltiazem hcl er coated beads	2	
CARDIZEM	E				

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Drug Name	Drug Tier	Requirements & Limits	Drug Name	Drug Tier	Requirements & Limits
diltiazem hcl er oral capsule extended release 12 hour	1		fosinopril sodium	1	
diltiazem hcl er oral capsule extended release 24 hour	1		fosinopril sodium-hctz	1	
diltiazem hcl er oral tablet extended release 24 hour	2		FUROSCIX	4	PA, QL
diltiazem hcl oral	1		furosemide oral	1	
dilt-xr	1		gemfibrozil oral	1	
DIOVAN	E		guanfacine hcl	1	
DIOVAN HCT	E		HEMANGEOL	3	
dofetilide	2		hydralazine hcl oral	1	
doxazosin mesylate oral	1		hydrochlorothiazide oral	1	
DYRENIUM	E		HYZAAR	E	
EDARBI	E		icosapent ethyl	E	PA
EDARBYCLOR	E		indapamide	1	
enalapril maleate oral solution	3	PA	INDERAL LA	E	
enalapril maleate oral tablet	1		INSpra	E	
enalapril-hydrochlorothiazide	1		irbesartan	1	
ENTRESTO ORAL TABLET	4	PA, QL	irbesartan-hydrochlorothiazide	1	
EPANED	4	PA	ISORDIL TITRADOSE	E	
eplerenone	2		isosorb dinitrate-hydralazine	2	
EXFORGE	E		isosorbide dinitrate oral tablet 10 mg, 20 mg, 30 mg, 5 mg	1	
EXFORGE HCT	E		isosorbide dinitrate oral tablet 40 mg	E	
ezetimibe	2		isosorbide mononitrate	1	
ezetimibe-simvastatin	3		isosorbide mononitrate er	1	
felodipine er	1		ivabradine	3	PA, QL
fenofibrate micronized	2		KAPSPARGO SPRINKLE	4	
fenofibrate oral capsule 134 mg, 200 mg, 67 mg	2		KERENDIA	4	PA, QL
fenofibrate oral capsule 150 mg, 50 mg	E		labetalol hcl oral	1	
fenofibrate oral tablet 120 mg, 40 mg	E		LANOXIN ORAL TABLET 125 MCG, 250 MCG	3	
fenofibrate oral tablet 145 mg, 160 mg, 48 mg, 54 mg	2		LANOXIN ORAL TABLET 62.5 MCG	4	
fenofibric acid oral capsule delayed release	3		LASIX	4	
FENOGLIDE	E		LIPITOR	E	
flecainide acetate	1		LIPOFEN	E	
fluvastatin sodium	1		lisinopril oral	1	
			lisinopril-hydrochlorothiazide	1	
			LIVALO	E	ST
			LODOCO	4	QL

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Drug Name	Drug Tier	Requirements & Limits	Drug Name	Drug Tier	Requirements & Limits
LOPID	4		NIASPAN ORAL TABLET EXTENDED RELEASE 1000 MG, 500 MG, 750 MG	E	
LOPRESSOR	4		nifedipine er	1	
losartan potassium oral	1		nifedipine er osmotic release	1	
losartan potassium-hctz	1		nifedipine oral	1	
LOTENSIN	4		nisoldipine er	2	
LOTENSIN HCT	4		NITRO-BID	2	
LOTREL	E		NITRO-DUR	3	
lovastatin oral	1	H	nitroglycerin rectal	3	QL
LOVAZA	E		nitroglycerin sublingual	1	
matzim la	2		nitroglycerin transdermal	1	
MAXZIDE ORAL TABLET 75-50 MG	4		NITROSTAT	4	
MAXZIDE-25 ORAL TABLET 37.5-25 MG	4		NORLIQVA	4	PA
metolazone	1		NORVASC	E	
metoprolol succinate er oral tablet extended release 24 hour 100 mg, 200 mg, 50 mg	2		olmesartan medoxomil oral	2	
metoprolol succinate er oral tablet extended release 24 hour 25 mg	1		olmesartan medoxomil-hctz	2	
metoprolol tartrate oral tablet 100 mg, 25 mg, 50 mg	1		olmesartan-amlodipine-hctz	E	
metoprolol tartrate oral tablet 37.5 mg, 75 mg	E		omega-3-acid ethyl esters	2	
metoprolol-hydrochlorothiazide	1		PACERONE ORAL TABLET 100 MG, 400 MG	3	
mexiletine hcl oral	1		PACERONE ORAL TABLET 200 MG	4	
MICARDIS	E		pentoxifylline er	1	
MICARDIS HCT	E		perindopril erbumine	2	
midodrine hcl	1		pindolol	1	
MINIPRESS ORAL CAPSULE 1 MG, 2 MG, 5 MG	4		pitavastatin calcium	E	ST
minoxidil oral	1		PRALUENT	E	PA, ST, QL
moexipril hcl	1		pravastatin sodium	1	
MULTAQ	4	PA	prazosin hcl oral	1	
nadolol oral	1		prevalite	1	
nebivolol hcl	E		PROCARDIA XL	E	
NEXLETOL	2	PA, ST, QL	propafenone hcl	1	
NEXLIZET	2	PA, ST, QL	propafenone hcl er	3	
niacin er (antihyperlipidemic)	2		propranolol hcl er	2	
			propranolol hcl oral	1	
			QUESTRAN	4	
			QUESTRAN LIGHT	4	
			quinapril hcl	1	

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ramipril	1		VASCEPA	E	PA
ranolazine er	2		VASERETIC	E	
RECTIV	4	QL	VASOTEC	E	
REPATHA	2	PA, ST, QL	verapamil hcl er oral capsule extended release 24 hour 100 mg, 200 mg, 300 mg	3	
REPATHA PUSHTRONEX SYSTEM	2	PA, ST, QL	verapamil hcl er oral capsule extended release 24 hour 120 mg, 180 mg, 240 mg, 360 mg	1	
REPATHA SURECLICK	2	PA, ST, QL	verapamil hcl er oral tablet extended release	1	
rosuvastatin calcium oral	2		verapamil hcl oral	1	
RYTHMOL SR ORAL CAPSULE EXTENDED RELEASE 12 HOUR 225 MG, 325 MG, 425 MG	E		VERELAN	4	
simvastatin oral tablet 10 mg, 20 mg, 40 mg, 5 mg	1	H-PA	VERELAN PM	4	
simvastatin oral tablet 80 mg	1		VERQUVO	4	PA, QL
SOAANZ	E	QL	VYTORIN	E	
sotalol hcl (af)	1		WELCHOL ORAL TABLET	E	
sotalol hcl oral	1		ZESTORETIC	E	
spironolactone oral tablet	1		ZESTRIL	4	
spironolactone-hctz	1		ZETIA	E	
SULAR	4		ZIAC ORAL TABLET 10-6.25 MG, 2.5-6.25 MG	3	
TEKTURNA	3		ZIAC ORAL TABLET 5-6.25 MG	4	
telmisartan	2		ZOCOR	E	
telmisartan-hctz	2		Central Nervous System Agents - Drugs for Attention Deficit Disorder		
TENORETIC 100	E		ADDERALL	E	
TENORETIC 50	E		ADDERALL XR	E	QL
TENORMIN	E		ADHANZIA XR ORAL CAPSULE EXTENDED RELEASE 24 HOUR 25 MG, 35 MG, 45 MG, 55 MG, 70 MG, 85 MG	E	QL
THALITONE	E		ADZENYS XR-ODT	E	QL
tiadylt er	2		amphetamine sulfate	2	
TIAZAC	4		amphetamine-dextroamphetamine	1	
TIKOSYN	4		amphetamine-dextroamphetamine er	2	QL
TOPROL XL	E		amphet-dextroamphet 3-bead er	E	QL
torse mide	1		APTENSIO XR	E	QL
trandolapril	1				
triamterene oral	3				
triamterene-hctz	1				
TRIBENZOR	E				
TRICOR	E				
TRILIPIX	E				
valsartan oral tablet	2				
valsartan-hydrochlorothiazide	1				

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atomoxetine hcl	3	QL	METHYLPHENIDATE HCL ER (OSM) ORAL TABLET EXTENDED RELEASE 45 MG, 63 MG	E	QL
AZSTARYS	3	ST, QL	methylphenidate hcl er (osm) oral tablet extended release 72 mg	E	QL
clonidine hcl er oral tablet extended release 12 hour	3		methylphenidate hcl er (xr)	E	QL
CONCERTA	E	QL	methylphenidate hcl er oral tablet extended release	2	QL
COTEMPLA XR-ODT	E	QL	methylphenidate hcl er oral tablet extended release 24 hour	E	QL
DAYTRANA	E	QL	methylphenidate hcl oral solution	1	
DEXEDRINE	E	QL	methylphenidate hcl oral tablet	1	
dexmethylphenidate hcl	1		methylphenidate hcl oral tablet chewable	3	
dexmethylphenidate hcl er	2	QL	MYDAYIS	E	QL
dextroamphetamine sulfate er oral capsule extended release 24 hour 10 mg, 5 mg	2	QL	QELBREE	E	PA, QL
dextroamphetamine sulfate er oral capsule extended release 24 hour 15 mg	3	QL	QUILLICHEW ER	E	QL
dextroamphetamine sulfate oral tablet 10 mg, 5 mg	2		QUILLIVANT XR	E	QL
dextroamphetamine sulfate oral tablet 15 mg, 2.5 mg, 20 mg, 30 mg, 7.5 mg	E		RELEXXII	E	QL
DYANAVAL XR	E	QL	RITALIN	E	
EVEKEO	E		RITALIN LA	E	QL
FOCALIN	4		STRATTERA	E	QL
FOCALIN XR	E	QL	VYVANSE	E	QL
guanfacine hcl er	2		ZENZEDI	E	
INTUNIV	E		Central Nervous System Agents - Drugs for Multiple Sclerosis		
JORNAY PM	3	ST, QL	AMPYRA	E	PA, QL, SP
lisdexamfetamine dimesylate	3	QL	AUBAGIO	E	PA, QL, SP
METHYLIN	4		AVONEX PEN	2	PA, QL, SP
methylphenidate	E	QL	AVONEX PREFILLED	2	PA, QL, SP
methylphenidate hcl er (cd)	2	QL	BAFIERTAM	2	PA, QL, SP
methylphenidate hcl er (la) oral capsule extended release 24 hour 10 mg, 20 mg, 30 mg, 40 mg	2	QL	BETASERON	2	PA, QL, SP
methylphenidate hcl er (la) oral capsule extended release 24 hour 60 mg	2		COPAXONE	E	PA, QL, SP
methylphenidate hcl er (osm) oral tablet extended release 18 mg, 27 mg, 36 mg, 54 mg	2	QL	dalfampridine er	2	PA, QL, SP
			dimethyl fumarate oral	1	PA, QL, SP
			EXTAVIA	E	PA, ST, QL, SP
			fingolimod hcl	1	PA, QL, SP
			GILENYA ORAL CAPSULE 0.25 MG	4	PA, QL, SP

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GILENYA ORAL CAPSULE 0.5 MG	E	PA, QL, SP	INGREZZA ORAL CAPSULE SPRINKLE	2	SP
glatiramer acetate	2	PA, QL, SP	INGREZZA ORAL CAPSULE THERAPY PACK	2	PA, QL, SP
glatopa	2	PA, QL, SP	LYRICA ORAL CAPSULE	4	PA
KESIMPTA	2	PA, QL, SP	NUDEXTA	2	PA, QL
MAVENCLAD	3	PA, ST, QL, SP	pregabalin oral capsule	2	
MAYZENT ORAL TABLET 0.25 MG, 2 MG	3	PA, QL, SP	RADICAVA ORS	3	PA, QL, SP
MAYZENT ORAL TABLET 1 MG	4	PA, QL, SP	RADICAVA ORS STARTER KIT	3	PA, QL, SP
MAYZENT STARTER PACK ORAL TABLET THERAPY PACK 12 X 0.25 MG	3	PA, QL, SP	RELYVRIO	4	PA, QL, SP
MAYZENT STARTER PACK ORAL TABLET THERAPY PACK 7 X 0.25 MG	4	PA, QL, SP	riluzole	1	SP
PLEGRIDY INTRAMUSCULAR	3	PA, QL	SAVELLA	4	QL
PLEGRIDY STARTER PACK	3	PA, QL, SP	TEGLUTIK	3	PA
PLEGRIDY SUBCUTANEOUS	3	PA, QL, SP	VEOZAH	4	PA, QL
REBIF	E	PA, QL, SP	ZEPOSIA	3	PA, ST, QL, SP
REBIF TITRATION PACK	E	PA, QL, SP	ZEPOSIA 7-DAY STARTER PACK	3	PA, ST, QL, SP
TECFIDERA ORAL CAPSULE DELAYED RELEASE	E	PA, QL, SP	ZEPOSIA STARTER KIT	3	PA, ST, SP
teriflunomide	2	PA, QL, SP	Dental and Oral Agents - Drugs for Mouth and Throat Conditions		
VUMERITY	E	PA, ST, QL, SP	cevimeline hcl	1	
Central Nervous System Agents - Miscellaneous			chlorhexidine gluconate mouth/throat	1	
AUSTEDO	2	PA, QL, SP	CLINPRO 5000	3	
AUSTEDO XR ORAL TABLET EXTENDED RELEASE 24 HOUR 12 MG, 24 MG, 6 MG	2	PA, QL, SP	DENTA 5000 PLUS	4	
AUSTEDO XR ORAL TABLET EXTENDED RELEASE 24 HOUR 30 MG, 36 MG, 42 MG, 48 MG	2	PA, SP	DENTAGEL	4	
AUSTEDO XR PATIENT TITRATION	2	PA, QL, SP	EVOXAC	E	
gabapentin (once-daily)	E	QL	FLUORIDEX	3	
GRALISE ORAL TABLET	E	QL	FLUORIDEX ENHANCED WHITENING	3	
HORIZANT	E	QL	FLUORIMAX 5000	3	
INGREZZA ORAL CAPSULE 40 MG, 80 MG	2	PA, QL, SP	JUST RIGHT 5000	3	
INGREZZA ORAL CAPSULE 60 MG	2	PA, QL	KOURZEQ	3	
			lidocaine hcl mouth/throat	1	
			lidocaine viscous hcl	1	
			ORALONE	3	
			PERIDEX	4	
			periogard	1	
			pilocarpine hcl oral	1	

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PREVIDENT 5000 BOOSTER PLUS	3		AVAR-E GREEN	3	
PREVIDENT 5000 DRY MOUTH	4		AVAR-E LS	3	
PREVIDENT 5000 KIDS	3		AVITA EXTERNAL CREAM 0.025 %	E	PA, QL
PREVIDENT 5000 ORTHO DEFENSE	3		AVITA EXTERNAL GEL 0.025 %	E	PA
PREVIDENT 5000 PLUS	4		azelaic acid external	3	
PREVIDENT DENTAL	4		AZELEX	3	QL
SALAGEN	4		BENZAMYCIN	2	QL
sf	1		benzoyl peroxide-erythromycin	1	QL
sf 5000 plus	1		betamethasone dipropionate aug external cream	1	
sodium fluoride 5000 plus	1		betamethasone dipropionate aug external lotion	3	
sodium fluoride 5000 ppm	1		betamethasone dipropionate aug external ointment	3	
sodium fluoride 5000 ppm dental gel 1.1 %	1		betamethasone dipropionate external cream	2	
sodium fluoride dental	1		betamethasone dipropionate external lotion	1	
triamcinolone acetonide mouth/throat	1		betamethasone dipropionate external ointment	2	
Dermatological Agents - Drugs for Skin Conditions			betamethasone dipropionate external ointment	1	
ABSORICA	E	PA	betamethasone valerate external cream	1	
ACANYA	E	QL	betamethasone valerate external lotion	1	
accutane	2		betamethasone valerate external ointment	1	
acitretin	1		brimonidine tartrate external	3	PA, QL
ACZONE	E	QL	calcipotriene external cream	2	QL
adapalene external gel	E	PA, QL	calcipotriene external ointment	2	
adapalene-benzoyl peroxide external gel 0.1-2.5 %	3	QL	calcipotriene external solution	1	QL
adapalene-benzoyl peroxide external gel 0.3-2.5 %	E	QL	calcipotriene-betameth diprop external suspension	E	QL
AKLIEF	4	PA, QL	CALCITRENE	3	
ala-cort	E		CARAC	E	
alclometasone dipropionate	1		CIBINQO	2	PA, QL, SP
ALTRENO	E	PA, QL	ciclopirox olamine external suspension	1	
amnestem	2		claravis	2	
AMZEEQ	4	QL	CLEOCIN-T	4	
ARAZLO	E	PA, QL	clindacin	3	
ATRALIN	E	PA, QL			
AVAR CLEANSER	4				
AVAR LS CLEANSER	E				
AVAR-E EMOLLIENT	3				

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Drug Name	Drug Tier	Requirements & Limits	Drug Name	Drug Tier	Requirements & Limits
clindacin etz external swab	1		CORDRAN	3	QL
clindacin-p	1		dapsone external	3	QL
CLINDAGEL	E	QL	DAZOMON	E	PA
clindamycin phos-benzoyl perox external gel 1.2-5 %	3	QL	DERMACINRX UREA	E	
clindamycin phos-benzoyl perox external gel 1-5 %, 1.2-2.5 %, 1.2-3.75 %	E	QL	DERMA-SMOOTH/FS BODY	4	QL
clindamycin phosphate external foam	3		DERMA-SMOOTH/FS SCALP	4	
clindamycin phosphate external lotion	3		desonide external cream	2	QL
clindamycin phosphate external solution	1		desonide external lotion	3	QL
clindamycin phosphate external swab	1		desonide external ointment	2	QL
clindamycin phosphate gel 1 % external	2	QL	DESOWEN	3	QL
clindamycin phosphate gel 1 % external	E	(generic for Clindagel), QL	desoximetasone external cream	1	QL
clindamycin phosphate gel 1 % external	2	(generic for Cleocin-T), QL	desoximetasone external ointment	3	QL
clindamycin-tretinoin	E	QL	diclofenac sodium external gel 3 %	2	PA, QL
clobetasol propionate e	2	QL	DIFFERIN EXTERNAL GEL 0.3 %	E	PA, QL
clobetasol propionate external cream	2	QL	DIPROLENE	4	
clobetasol propionate external foam	E	QL	DOVONEX EXTERNAL CREAM 0.005 %	E	QL
clobetasol propionate external gel	2	QL	doxycycline	E	
clobetasol propionate external liquid	1	QL	DRYSOL	4	
clobetasol propionate external ointment	2	QL	DUPIXENT SUBCUTANEOUS SOLUTION PEN-INJECTOR	2	PA, QL, SP
clobetasol propionate external shampoo	E	QL	DUPIXENT SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 100 MG/0.67ML	2	PA, QL
clobetasol propionate external solution	1	QL	DUPIXENT SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 200 MG/1.14ML, 300 MG/2ML	2	PA, QL, SP
CLOBEX EXTERNAL SHAMPOO	E	QL	EFUDEX	4	
CLOBEX SPRAY	E	QL	ELIDEL	E	QL
clodan	E	QL	ENSTILAR	4	QL
clotrimazole external cream	E		EPIDUO	E	QL
clotrimazole-betamethasone	1		EPIDUO FORTE	E	QL
			ERYGEL	3	
			erythromycin external	1	
			EUCRISA	3	ST, QL
			EVOClin EXTERNAL FOAM 1 %	4	
			FABIOR	E	PA, QL

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FINACEA EXTERNAL FOAM	4		hydrocortisone valerate external ointment	3	QL
FINACEA EXTERNAL GEL	E		HYDROXYM EXTERNAL CREAM	E	
fluocinolone acetonide body	3	QL	imiquimod external cream 3.75 %	E	QL
fluocinolone acetonide external cream	3	QL	imiquimod external cream 5 %	1	
fluocinolone acetonide external ointment	2	QL	imiquimod pump	E	QL
fluocinolone acetonide external solution	3	QL	IMPOYZ	E	QL
fluocinolone acetonide scalp	3		isotretinoin oral capsule 10 mg, 20 mg, 30 mg, 40 mg	2	
fluocinonide external cream 0.05 %	1		isotretinoin oral capsule 25 mg, 35 mg	E	PA
fluocinonide external cream 0.1 %	E	QL	ivermectin external cream	E	QL
fluocinonide external gel	1		KLARON	4	
fluocinonide external ointment	1		KLISYRI	4	ST, QL
fluocinonide external solution	1		LOPROX EXTERNAL SUSPENSION 0.77 %	E	
FLUOROURACIL EXTERNAL CREAM 0.5 %	E		METROCREAM	4	
fluorouracil external cream 5 %	1		METROGEL	E	
fluticasone propionate external cream	1		METROLOTION	4	
fluticasone propionate external ointment	1		metronidazole external cream	1	
halobetasol propionate external cream	2	QL	metronidazole external gel 0.75 %	1	
halobetasol propionate external ointment	2	QL	metronidazole external gel 1 %	E	
hydrocortisone ace-pramoxine external cream 2.5-1 %	1		metronidazole external lotion	1	
hydrocortisone butyrate external cream	1		MIRVASO	2	PA, QL
hydrocortisone external cream 1 %	E		mometasone furoate external	1	
hydrocortisone external cream 2.5 %	1		naftifine hcl external gel	E	
hydrocortisone external lotion 2 %, 2.5 %	1		NAFTIN	E	
hydrocortisone external ointment 1 %, 2.5 %	1		NATROBA	E	
hydrocortisone lotion 2%	3		neuac	3	QL
hydrocortisone valerate external cream	2	QL	NORITATE	E	
			OLUX EXTERNAL FOAM 0.05 %	E	QL
			ONEXTON	E	QL
			OPZELURA	4	PA, QL, SP
			ORACEA	E	
			OVACE PLUS WASH EXTERNAL LIQUID	4	
			OVACE WASH	4	
			PANRETIN	3	

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pimecrolimus	3	QL	SYNALAR EXTERNAL SOLUTION 0.01 %	E	QL
PLEXION CLEANSER	E		TACLONEX EXTERNAL OINTMENT 0.005-0.064 %	E	QL
PLEXION EXTERNAL CREAM	E		TACLONEX EXTERNAL SUSPENSION	3	QL
podofilox external solution	1		tacrolimus external	2	QL
PRAMOSONE EXTERNAL CREAM	2		tazarotene external cream	3	PA, QL
RETIN-A	E	PA, QL	TAZAROTENE EXTERNAL FOAM	E	PA, QL
RETIN-A MICRO GEL 0.04 %, 0.1 %	E	PA, QL	TAZORAC EXTERNAL CREAM	4	PA, QL
RETIN-A MICRO PUMP	E	PA, QL	TEMOVATE EXTERNAL CREAM 0.05 %	4	QL
RHOFADE	4	PA, QL	TOLAK	E	
rosadan external cream 0.75 %	1		TOPICORT EXTERNAL CREAM	4	QL
rosadan external gel 0.75 %	1		TOPICORT EXTERNAL OINTMENT	4	QL
SANTYL	3	QL	tretinoin external cream	3	QL
selenium sulfide external lotion	1		tretinoin external gel 0.01 %, 0.025 %	E	QL
sodium sulfacetamide wash	1		tretinoin external gel 0.05 %	E	PA, QL
SOOLANTRA	4	QL	tretinoin microsphere	E	PA, QL
spinosad	3		tretinoin microsphere pump	E	PA, QL
sss 10-5 external cream	1		triamcinolone acetonide external cream 0.025 %, 0.1 %	1	
sulfacetamide sodium (acne)	1		triamcinolone acetonide external cream 0.5 %	1	QL
sulfacetamide sodium external	1		triamcinolone acetonide external lotion	1	
sulfacetamide sodium-sulfur external cream 10-2 %, 10-5 %	1		triamcinolone acetonide external ointment 0.025 %, 0.1 %, 0.5 %	1	
sulfacetamide sodium-sulfur external cream 9.8-4.8 %	E		triamcinolone acetonide external ointment 0.05 %	E	
sulfacetamide sodium-sulfur external liquid 10-2 %, 9-4.5 %, 9.8-4.8 %	E		triamcinolone in absorbase	E	
sulfacetamide sodium-sulfur external liquid 10-5 %, 9-4 %	1		TRIANEX EXTERNAL OINTMENT 0.05 %	E	
sulfacetamide sodium-sulfur external suspension 10-5 %	1		triderm	1	QL
sulfacetamide sodium-sulfur external suspension 8-4 %	E		TRIDESILON EXTERNAL CREAM 0.05 %	3	QL
sulfacetamide sod-sulfur wash external liquid 9-4 %	1		tritocin external ointment 0.05 %	E	
sulfacetamide sod-sulfur wash external liquid 9-4.5 %	E		TWYNEO	E	QL
SULFACLEANSE 8/4	E				
SUMADAN WASH	E				
SYNALAR	E	QL			

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urea external cream 20 %, 40 %, 45 %	1		AQINJECT PEN NEEDLE	2	QL
urea external cream 41 %, 47 %	E		BD AUTOSHIELD DUO PEN NEEDLES	2	QL
UREMEZ-40	3		BD ECLIPSE NEEDLE 18G X 1-1/2" , 25G X 5/8" , 27G X 1/2"	2	
VANOS	E	QL	BD ECLIPSE NEEDLE 23G X 1" (OTC)	2	
VELTIN EXTERNAL GEL 1.2-0.025 %	E	QL	BD ECLIPSE NEEDLE 23G X 1" (RX)	2	
VTAMA	4	PA, QL	BD ECLIPSE SHIELDED NEEDLE	2	
WINLEVI	E	PA, QL	BD SAFETYGLIDE SHIELDED NEEDLE 21G X 1-1/2"	2	
zenatane	2		BD SHARPS COLLECTOR	3	
ZIANA	E	QL	BD ULTRA-FINE insulin syringes	2	QL
ZILXI	4	PA, ST, QL	BD ULTRA-FINE PEN NEEDLES	2	QL
ZORYVE	4	PA, QL	BD ULTRA-FINE U-500 insulin syringes	2	QL
ZYCLARA	E	QL	BD ULTRA-FINE VEO insulin syringes	2	QL
ZYCLARA PUMP	E	QL	BIGFOOT UNITY PROGRAM	E	
Diabetes - Glucose Monitoring and Supplies			BIOTEL CARE TEST STRIPS	E	QL
ACCU-CHEK AVIVA PLUS TEST STRIPS	E	QL	BLOOD GLUCOSE TEST STRIPS	E	QL
ACCU-CHEK FASTCLIX LANCET DEVICE KIT	1		BLOOD GLUCOSE TEST STRIPS 333	E	QL
ACCU-CHEK FASTCLIX LANCETS	1		CAREPOINT POLY HUB NEEDLE 18G X 1" , 20G X 1" , 21G X 1" , 22G X 1" , 23G X 1" , 25G X 1" , 25G X 5/8"	2	
ACCU-CHEK GUIDE KIT W/ DEVICE	3		CAREPOINT POLY HUB NEEDLE 22G X 1-1/2"	2	
ACCU-CHEK GUIDE ME METER	1		CAREPOINT SAFETY 1ST NEEDLE	2	
ACCU-CHEK GUIDE TEST STRIPS	3	QL	CARETOUCH MONITOR SYSTEM	E	
ACCU-CHEK MULTICLIX LANCET DEVICE KIT	1		CARETOUCH TEST	E	QL
ACCU-CHEK MULTICLIX LANCETS	1		CEQUR SIMPLICITY 2U	3	ST
ACCU-CHEK SMARTVIEW TEST STRIPS	E	QL	CONTOUR MONITOR KIT W/ DEVICE	E	
ACCU-CHEK SOFT TOUCH LANCETS	1		CONTOUR NEXT EZ KIT W/ DEVICE	E	
ACCU-CHEK SOFTCLIX LANCET	1		CONTOUR NEXT GEN MONITOR KIT	E	
ACCU-CHEK SOFTCLIX LANCET DEVICE KIT	1		CONTOUR NEXT GEN TEST STRIPS	2	QL
ACCUTREND GLUCOSE	E	QL			
ALCOHOL PREP PADS PAD	3				
AQ INSULIN SYRINGE	2	QL			

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Drug Name	Drug Tier	Requirements & Limits	Drug Name	Drug Tier	Requirements & Limits
CONTOUR NEXT GEN TEST STRIPS	2	QL	EVERSENSE E3 SMART TRANSMITTER	E	PA
CONTOUR NEXT LINK KIT W/ DEVICE	E		EVERSENSE SENSOR/HOLDER	E	PA
CONTOUR NEXT LINK KIT W/ DEVICE	E	(Contour Next Link 24)	EVERSENSE SMART TRANSMITTER	E	PA
CONTOUR NEXT MONITOR KIT W/DEVICE	2		FORA 6 CONNECT/GTEL TEST	E	QL
CONTOUR NEXT ONE DEVICE	E		FORTISCARE G1 TEST STRIP IN VITRO STRIP	E	QL
CONTOUR NEXT ONE KIT	2		FORTISCARE TEST IN VITRO STRIP	E	QL
CONTOUR TEST STRIPS	E	QL	FREESTYLE LIBRE 14 DAY READER	3	PA, QL
CVS ADVANCED GLUCOSE TEST	E	QL	FREESTYLE LIBRE 14 DAY SENSOR	3	PA, QL
CVS GLUCOSE METER TEST STRIPS	E	QL	FREESTYLE LIBRE 2 READER	3	PA, QL
D-CARE BLOOD GLUCOSE	E	QL	FREESTYLE LIBRE 2 SENSOR	3	PA, QL
D-CARE GLUCOMETER	E		FREESTYLE LIBRE 3 PLUS SENSOR	3	PA
DEXCOM G6 RECEIVER	3	PA, QL	FREESTYLE LIBRE 3 READER	3	PA
DEXCOM G6 SENSOR	3	PA, QL	FREESTYLE LIBRE 3 SENSOR	3	PA, QL
DEXCOM G6 TRANSMITTER	3	PA, QL	FREESTYLE LIBRE READER	3	PA, QL
DEXCOM G7 RECEIVER	3	PA, QL	FREESTYLE PRECISION NEO SYSTEM	E	
DEXCOM G7 SENSOR	3	PA, QL	FREESTYLE PRECISION NEO TEST	E	QL
DROPSAFE SAFETY SYRINGE/ NEEDLE	2	QL	FREESTYLE TEST	E	QL
EASY MAX BLOOD GLUCOSE TEST	E	QL	GLUCOCARD EXPRESSION TEST	E	QL
EASY MAX T1 GLUCOSE SYSTEM	E		GLUCOCARD SHINE TEST	E	QL
EASY TOUCH HEALTHPRO GLUCOSE	E		GLUCOCARD VITAL TEST	E	QL
EASY TOUCH TEST	E	QL	GUARDIAN 4 GLUCOSE SENSOR	3	PA
EASYGLUCO	E		GUARDIAN 4 TRANSMITTER	3	PA
EASYMAX 15 TEST	E	QL	GUARDIAN CONNECT TRANSMITTER	3	PA, QL
EASYMAX NG BLOOD GLUCOSE KIT	E		GUARDIAN LINK 3 TRANSMITTER	3	PA, QL
EMBRACE BLOOD GLUCOSE TEST	E	QL	GUARDIAN REAL-TIME REPLACE PED	3	PA
EMBRACE WAVE BLOOD GLUCOSE IN VITRO	E	QL	GUARDIAN SENSOR (3)	3	PA, QL
ENLITE GLUCOSE SENSOR	3	PA	GUARDIAN SENSOR 3	3	PA, QL
EQ BLOOD GLUCOSE TEST	E	QL	GVOKE HYPOPEN 1-PACK	2	QL
EVERSENSE E3 SENSOR/ HOLDER	E	PA	GVOKE HYPOPEN 2-PACK	2	QL

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GVOKE KIT	2		MM BLOOD GLUCOSE SYSTEM	E	
GVOKE PFS	2	QL	MM BLOOD GLUCOSE SYSTEM REFILL	E	
HEALTHPRO BLOOD GLUCOSE MONITO	E		MM BLULINK GLUCOSE TEST	E	QL
INPEN 100-BLUE-LILLY-HUMALOG DEVICE	3		MM EASY TOUCH GLUCOSE METER	E	
INPEN 100-BLUE-LILLY-HUMALOG DEVICE	3	ST	MONOJECT HYPODERMIC NEEDLE 18G X 1"	2	
INPEN 100-BLUE-NOVOLOG-FIASP DEVICE	3		NEUTEK 2TEK TEST	E	QL
INPEN 100-BLUE-NOVOLOG-FIASP DEVICE	3	ST	NOVOFINE AUTOCOVER PEN NEEDLE 30G X 8 MM	2	QL
INPEN 100-GREY-LILLY-HUMALOG DEVICE	3		NOVOFINE PEN NEEDLE	2	QL
INPEN 100-GREY-LILLY-HUMALOG DEVICE	3	ST	NOVOFINE PLUS PEN NEEDLE	2	QL
INPEN 100-GREY-NOVOLOG-FIASP DEVICE	3		NOVOPEN ECHO	3	
INPEN 100-GREY-NOVOLOG-FIASP DEVICE	3	ST	NOVOTWIST PEN NEEDLE	2	QL
INPEN 100-GREY-NOVOLOG-FIASP DEVICE	3		OMNIPOD 5 G6 INTRO (GEN 5)	2	PA, QL
INPEN 100-GREY-NOVOLOG-FIASP DEVICE	3	ST	OMNIPOD 5 G6 PODS (GEN 5)	2	PA, QL
INPEN 100-PINK-LILLY-HUMALOG DEVICE	3		OMNIPOD 5 G7 INTRO (GEN 5) KIT	2	PA
INPEN 100-PINK-LILLY-HUMALOG DEVICE	3	ST	OMNIPOD 5 G7 PODS (GEN 5)	2	PA
INPEN 100-PINK-NOVOLOG-FIASP DEVICE	3		ON CALL EXPRESS BLOOD GLUCOSE	E	QL
INPEN 100-PINK-NOVOLOG-FIASP DEVICE	3	ST	ON CALL EXPRESS MONITORING SYS	E	
INSULIN PEN NEEDLES 29G X 12MM , 30G X 5 MM , 31G X 5 MM , 31G X 8 MM , 32G X 4 MM	2	QL	ONETOUCH DELICA PLUS LANCETS	1	
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	ONETOUCH ULTRA 2 KIT W/ DEVICE	1	
LANCETS	1		ONETOUCH ULTRA TEST	1	QL
MICRODOT TEST	E	QL	ONETOUCH ULTRA TEST STRIPS	1	QL
MINILINK REAL-TIME TRANSMITTER	3	PA	ONETOUCH ULTRASOFT LANCETS	1	
MINIMED 630G GUARDIAN PRESS	3	PA	ONETOUCH VERIO FLEX SYSTEM KIT	1	
			ONETOUCH VERIO IQ SYSTEM KIT W/DEVICE	1	
			ONETOUCH VERIO REFLECT KIT W/DEVICE	1	
			ONETOUCH VERIO TEST STRIPS	1	QL
			OPTIUMEZ TEST	E	QL
			PARADIGM REAL-TIME TRANSMITTER	3	PA

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PIP BLOOD GLUCOSE TEST STRIP	E	QL	Diabetes - Insulin		
PRECISION XTRA	E		ADMELOG	E	QL
PRECISION XTRA BLOOD GLUCOSE	E	QL	ADMELOG SOLOSTAR	E	QL
PREMIUM BLOOD GLUCOSE TEST	E	QL	AFREZZA	E	PA, QL
PTS PANELS EGLU TEST	E	QL	BASAGLAR KWIKPEN	E	QL
QUINTET AC BLOOD GLUCOSE TEST	E	QL	BASAGLAR TEMPO PEN	E	
QUINTET BLOOD GLUCOSE TEST	E	QL	FIASP	E	ST, QL
RELION TRUE MET AIR GLUC METER	E		FIASP FLEXTOUCH	E	ST, QL
RELION TRUE METRIX TEST STRIPS	E	QL	HUMALOG INJECTION	E	QL
RELION ULTIMA GLUCOSE SYSTEM	E		HUMALOG KWIKPEN	2	QL
RELION ULTIMA TEST	E	QL	HUMALOG MIX 50/50 KWIKPEN	2	QL
RIGHTEST GT333 GLUCOSE TEST	E	QL	HUMALOG MIX 50/50 VIAL	1	QL
SHARPS CONTAINER	3		HUMALOG MIX 75/25 KWIKPEN	2	QL
TECHLITE INSULIN SYRINGES	2	(ARKRAY), QL	HUMALOG MIX 75/25 VIAL	1	QL
TECHLITE PEN NEEDLES	2	(ARKRAY), QL	HUMALOG SUBCUTANEOUS	2	QL
TEMPO REFILL	E		HUMALOG TEMPO PEN	E	QL
TEMPO WELCOME	E		HUMALOG U-100 JUNIOR KWIKPEN	2	QL
TRUE FOCUS BLOOD GLUCOSE STRIP	E	QL	HUMULIN 70/30 KWIKPEN	2	QL
TRUE METRIX AIR GLUCOSE METER KIT	E		HUMULIN 70/30 VIAL	1	QL
TRUE METRIX BLOOD GLUCOSE TEST	E	QL	HUMULIN N KWIKPEN	2	QL
TRUE METRIX GO GLUCOSE METER	E		HUMULIN N VIAL	1	QL
TRUE METRIX METER KIT	E		HUMULIN R U-500 KWIKPEN	2	QL
TRUE METRIX PRO BLOOD GLUCOSE	E	QL	HUMULIN R U-500 VIAL	1	QL
TRUE TRACK TEST	E	QL	HUMULIN R VIAL	1	QL
UNISTRIPI1 GENERIC	E	QL	INSULIN ASPART	E	ST, QL
VIVAGUARD INO GLUCOSE METER KIT	E		INSULIN ASPART FLEXPEN	E	ST, QL
VIVAGUARD INO TEST STRIPS	E	QL	INSULIN DEGLUDEC FLEXTOUCH	E	QL
			INSULIN GLARGINE	E	QL
			INSULIN GLARGINE MAX SOLOSTAR	E	QL
			INSULIN GLARGINE SOLOSTAR	E	QL
			INSULIN GLARGINE-YFGN SUBCUTANEOUS SOLUTION PEN-INJECTOR	E	
			INSULIN LISPRO	1	QL
			INSULIN LISPRO (1 UNIT DIAL)	2	(Insulin Lispro Kwikpen), QL

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INSULIN LISPRO JUNIOR KWIKPEN	2	QL	ADLYXIN STARTER PACK SUBCUTANEOUS PEN-INJECTOR KIT 10 & 20 MCG/0.2ML	4	
INSULIN LISPRO PROT & LISPRO	2	QL	ADLYXIN SUBCUTANEOUS SOLUTION PEN-INJECTOR 20 MCG/0.2ML	4	
LANTUS SOLOSTAR	1	QL	ALOGLIPTIN BENZOATE	2	QL
LANTUS U-100 VIAL	1	QL	ALOGLIPTIN-METFORMIN HCL	2	QL
LEVEMIR FLEXPEN	E	PA, QL	AMARYL ORAL TABLET 1 MG, 2 MG, 4 MG	E	
LEVEMIR U-100 FLEXTOUCH SUBCUTANEOUS SOLUTION PEN-INJECTOR 100 UNIT/ML	E	PA, QL	BAQSIMI ONE PACK	2	QL
LYUMJEV KWIKPEN	2	QL	BAQSIMI TWO PACK	2	QL
LYUMJEV TEMPO PEN	E	QL	BYDUREON BCISE AUTOINJECTOR	2	PA, QL
LYUMJEV VIAL	1	QL	BYETTA 10 MCG PEN	2	PA, QL
NOVOLIN 70/30 FLEXPEN	E	ST, QL	BYETTA 5 MCG PEN	2	PA, QL
NOVOLIN 70/30 FLEXPEN RELION	E	ST, QL	CYCLOSET	3	
NOVOLIN 70/30 RELION	E	ST, QL	DAPAGLIFLOZIN PRO-METFORMIN ER	E	ST, QL
NOVOLIN 70/30 VIAL	E	ST, QL	DAPAGLIFLOZIN PROPANEDIOL	E	ST, QL
NOVOLIN N FLEXPEN	E	ST, QL	FARXIGA	E	ST, QL
NOVOLIN N FLEXPEN RELION	E	ST, QL	glimepiride	1	
NOVOLIN N RELION	E	ST, QL	glipizide er	1	
NOVOLIN N VIAL	E	ST, QL	glipizide oral tablet 10 mg, 5 mg	1	
NOVOLIN R FLEXPEN	E	ST, QL	glipizide oral tablet 2.5 mg	E	
NOVOLIN R FLEXPEN RELION	E	ST, QL	glipizide xl	1	
NOVOLIN R RELION	E	ST, QL	glipizide-metformin hcl	2	
NOVOLIN R VIAL	E	ST, QL	GLUCAGON EMERGENCY KIT	2	QL (manufactured by Fresenius)
NOVOLOG FLEXPEN	E	ST, QL	glucagon emergency kit 1 mg injection	2	QL
NOVOLOG FLEXPEN RELION	E	ST, QL	GLUCAGON EMERGENCY KIT 1 MG INJECTION	E	QL
NOVOLOG RELION	E	ST, QL	GLUCOTROL XL	4	
NOVOLOG U-100 VIAL	E	ST, QL	GLUMETZA	E	PA
SEMGLEE (YFGN) SUBCUTANEOUS SOLUTION PEN-INJECTOR	E		glyburide micronized	1	
TOUJEO MAX SOLOSTAR	2	QL	glyburide oral	1	
TOUJEO SOLOSTAR	2	QL	glyburide-metformin	1	
TRESIBA FLEXTOUCH	E	QL	GLYNASE ORAL TABLET 1.5 MG	3	
Diabetes - Non-Insulin Agents					
acarbose oral	1				
ACTOPLUS MET	4	QL			
ACTOS	E	QL			

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GLYNASE ORAL TABLET 3 MG, 6 MG	4		SOLQUA	2	QL
GLYXAMBI	2	ST, QL	STEGLATRO	E	ST, QL
INVOKAMET XR	E	ST, QL	SYMLINPEN 120	3	QL
INVOKANA	E	ST, QL	SYMLINPEN 60	3	QL
JANUMET	E	ST, QL	SYNJARDY	2	QL
JANUMET XR	E	ST, QL	SYNJARDY XR	2	QL
JANUVIA	E	ST, QL	TRADJENTA	2	QL
JARDIANCE	2	QL	TRIJARDY XR	2	QL
JENTADUETO	2	QL	TRULICITY	2	PA, QL
JENTADUETO XR	2	QL	XIGDUO XR	E	ST, QL
KOMBIGLYZE XR ORAL TABLET EXTENDED RELEASE 24 HOUR 2.5-1000 MG, 5-1000 MG, 5-500 MG	E	QL	ZEGALOGUE SUBCUTANEOUS SOLUTION AUTO-INJECTOR	2	QL
LIRAGLUTIDE PEN-INJECTOR 18MG/3ML	2	PA, (2 Pak), QL	Drugs for Blood Disorders		
LIRAGLUTIDE PEN-INJECTOR 18MG/3ML	3	PA, (3 Pak), QL	ADVATE	2	SP
metformin hcl er	1		ADYNOVATE	4	PA, SP
metformin hcl er (mod)	E	PA	AFSTYLA INTRAVENOUS KIT 1000 UNIT, 2000 UNIT, 250 UNIT, 3000 UNIT, 500 UNIT	4	PA
metformin hcl er (osm)	E	PA	AFSTYLA INTRAVENOUS KIT 1500 UNIT, 2500 UNIT	4	PA, SP
metformin hcl oral solution	3		AGRYLIN	E	
metformin hcl oral tablet 1000 mg, 500 mg, 850 mg	1		ALPHANATE	2	SP
metformin hcl oral tablet 625 mg	E		ALPROLIX	3	SP
MOUNJARO	2	PA, QL	ALTUVIIIO	4	PA, SP
nateglinide	2	QL	ALVAIZ	4	PA, SP
ONGLYZA	E	QL	anagrelide hcl	1	
OZEMPIC	2	PA, QL	ARANESP (ALBUMIN FREE)	2	QL, SP
pioglitazone hcl	1	QL	aspirin-dipyridamole er	3	
pioglitazone hcl-metformin hcl	2	QL	DOPTELET	4	PA, QL, SP
PRECOSE ORAL TABLET 100 MG, 25 MG, 50 MG	4		ELOCTATE	4	PA, SP
repaglinide	2	QL	FABHALTA	2	PA, QL, SP
RIOMET	E		HEMLIBRA SUBCUTANEOUS SOLUTION 105 MG/0.7ML, 150 MG/ML, 30 MG/ML, 300 MG/2ML, 60 MG/0.4ML	2	PA, SP
RYBELSUS	2	PA, QL	HEMLIBRA SUBCUTANEOUS SOLUTION 12 MG/0.4ML	E	PA, SP
saxagliptin hcl	2	QL	HEMOFIL M	2	SP
saxagliptin-metformin er	2	QL	heparin sodium (porcine) injection solution	1	

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heparin sodium (porcine) pf	1		varafenafil hcl oral tablet	3	QL
HUMATE-P	2	SP	VIAGRA	E	QL
IDELVION	3	SP	VYLEESI	4	PA, QL
KOATE	2	SP	Electrolytes / Vitamins		
KOATE-DVI	2	SP	adc/f (0.5mg/ml)	1	
KOGENATE FS	2	SP	calcium acetate (phos binder) oral tablet	1	
KOVALTRY	2	SP	calcium acetate oral tablet 667 mg	1	
MULPLETA	4	PA, QL, SP	CARNITOR ORAL SOLUTION	4	
NEULASTA	2		CARNITOR SF	4	
NOVOEIGHT	2	SP	CITRANATAL 90 DHA	3	
NUWIQ INTRAVENOUS KIT 1000 UNIT, 2000 UNIT, 250 UNIT, 2500 UNIT, 3000 UNIT, 4000 UNIT, 500 UNIT	2	SP	CITRANATAL ASSURE	3	
NUWIQ INTRAVENOUS KIT 1500 UNIT	2		CITRANATAL DHA ORAL 27-1 & 250 MG	4	
PROMACTA ORAL TABLET	E	PA, SP	COMPLETENATE	3	
RECOMBINATE	2	SP	CO-NATAL FA	2	
RETACRIT INJECTION SOLUTION 10000 UNIT/ML, 2000 UNIT/ML, 3000 UNIT/ML, 4000 UNIT/ML, 40000 UNIT/ML	2	QL, SP	CONCEPT DHA	4	
RETACRIT INJECTION SOLUTION 20000 UNIT/ML	2		cyanocobalamin injection solution 1000 mcg/ml	1	
TAVALISSE	4	PA, QL, SP	CYANOCOBALAMIN INJECTION SOLUTION 2000 MCG/ML	3	
tranexamic acid oral	2	QL	cyanocobalamin nasal	3	
UDENYCA SUBCUTANEOUS SOLUTION AUTO-INJECTOR	2		DAVIMET-FLUORIDE	E	
WILATE	2		deferasirox oral tablet	2	PA, SP
ZARXIO	2		DODEX	4	
Drugs for Sexual Dysfunction			DRISDOL	4	
ADDYI	4	PA, QL	EFFER-K ORAL TABLET EFFERVESCENT 10 MEQ, 20 MEQ	2	
CIALIS	E	QL	ELITE-OB	3	
IMVEXXY MAINTENANCE PACK	2	QL	ergocalciferol oral capsule	1	
IMVEXXY STARTER PACK	2	QL	FLORIVA PLUS	E	
INTRAROSA	4	PA, QL	fluoritab oral solution 0.275 (0.125 f) mg/drop	1	H
OSPHEA	3	PA, QL	folic acid oral tablet 1 mg	1	
sildenafil citrate oral tablet 100 mg, 25 mg, 50 mg	2	QL	JADENU	E	PA, SP
STENDRA	4	PA, QL	klor-con	1	
tadalafil oral	2	QL	klor-con 10	1	
			klor-con m10	1	

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klor-con m15	1		NATALVIT	2	
klor-con m20	1		NEONATAL COMPLETE	3	
kosher prenatal plus iron	1		NEONATAL PLUS	3	
K-PHOS-NEUTRAL	2		NIVA-PLUS	3	
K-TAB	3		OB COMPLETE	3	
levocarnitine oral solution	1		ONE VITE WOMENS PLUS	3	
levocarnitine sf	1		ORACIT	2	
LOKELMA	3	PA, QL	ORAL CITRATE	2	
M-NATAL PLUS	3		PHOSPHA 250 NEUTRAL	2	
multivitamin w/fluoride tablet chewable 0.25 mg oral	1		phosphorous	1	
multivitamin w/fluoride tablet chewable 0.25 mg oral	E		phospho-trin 250 neutral	1	
multivitamin w/fluoride tablet chewable 0.5 mg oral	1		pnv-dha	3	
multivitamin w/fluoride tablet chewable 0.5 mg oral	E		POKONZA	E	
multivitamin w/fluoride tablet chewable 1 mg oral	1		POLY-VI-FLOR	E	
multivitamin w/fluoride tablet chewable 1 mg oral	E		potassium chloride crys er	1	
multivitamin w/fluoride tablet chewable 1 mg oral	E		potassium chloride er	1	
multi-vitamin/fluoride	1		potassium chloride oral	1	
multivitamin/fluoride tablet chewable 0.25 mg oral (rx)	1		potassium citrate er	1	
MULTIVITAMIN/FLUORIDE TABLET CHEWABLE 0.25 MG ORAL (RX)	3		potassium citrate-citric acid	1	
multivitamin/fluoride tablet chewable 0.5 mg oral (rx)	1		PRENA1 PEARL	3	
MULTIVITAMIN/FLUORIDE TABLET CHEWABLE 0.5 MG ORAL (RX)	3		prenatal 19 oral tablet 29-1 mg	1	
multivitamin/fluoride tablet chewable 1 mg oral (rx)	1		prenatal 19 oral tablet chewable	1	
MULTIVITAMIN/FLUORIDE TABLET CHEWABLE 1 MG ORAL (RX)	3		prenatal oral tablet 27-1 mg	1	
MULTI-VIT-FLOR	E		prenatal plus	1	
nafrinse drops oral solution 0.275 (0.125 f) mg/drop	1	H	prenatal plus vitamin/mineral	1	
NAFRINSE ORAL TABLET CHEWABLE 2.2 (1 F) MG	1	H	PRENATE DHA	3	
NASCOBAL	3		PRENATE ENHANCE	3	
			PRENATE ESSENTIAL	3	
			PRENATE MINI	3	
			PRENATE PIXIE	3	
			PRENATE RESTORE	3	
			PRENATOL-M	E	
			PRENATRIX	E	
			PRENATRYL	E	
			PREVIDENT 5000 ENAMEL PROTECT	3	
			PREVIDENT 5000 SENSITIVE	3	
			PREVIDENT MOUTH/THROAT	3	

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QUFLORA PEDIATRIC	3		VITAPEARL	3	
SE-NATAL 19	3		VITATHELY WITH GINGER	3	
sevelamer hcl	E		WESCAP-C DHA	4	
sod citrate-citric acid oral solution 500-334 mg/5ml	1		WESCAP-PN DHA	4	
sodium fluoride 5000 enamel dental gel 1.1-5 %	1		wes-phos 250 neutral	1	
sodium fluoride 5000 sensitive dental gel 1.1-5 %	1		WESTAB PLUS	E	
sodium fluoride mouth/throat solution 0.2 %	1		ZATEAN-PN DHA ORAL CAPSULE 27-0.6-0.4-300 MG	4	
sodium fluoride oral solution	1	H	Gastrointestinal Agents - Drugs for Acid Reflux and Ulcer		
sodium fluoride oral tablet chewable	1	H	ACIPHEX	E	QL
SPS	3		bis subcit-metronid-tetracyc	3	QL
TARON-C DHA	4		bismuth/metronidaz/tetracyclin	3	QL
THRIVITE RX	3		CARAFATE	E	
TRICARE	3		cimetidine oral	1	
TRINATAL RX 1	3		CYTOTEC	4	
TRINATE	3		DEXILANT	E	QL
tri-vite/fluoride	1		dexlansoprazole	E	QL
UROCIT-K 10	4		esomeprazole magnesium oral capsule delayed release	E	QL
UROCIT-K 15	4		esomeprazole magnesium oral packet	3	PA, ST, QL
UROCIT-K 5	4		famotidine oral suspension reconstituted	1	
VELTASSA	3	PA, QL	famotidine oral tablet 20 mg, 40 mg	E	
VINATE ONE	3		lansoprazole oral capsule delayed release	E	QL
virt-c dha oral capsule 53.5-38-1 mg	1		lansoprazole oral tablet delayed release dispersible	3	PA, ST, QL
virt-pn dha oral capsule 27-0.6-0.4-300 mg	3		misoprostol oral	1	
VITAFOL FE+	3		NEXIUM ORAL CAPSULE DELAYED RELEASE	E	QL
VITAFOL GUMMIES	3		NEXIUM ORAL PACKET	4	PA, ST, QL
VITAFOL ULTRA	3		OMECLAMOX-PAK	3	QL
VITAFOL-OB	3		omeprazole oral capsule delayed release	1	
VITAMEDMD ONE RX/ QUATREFOLIC	3		pantoprazole sodium oral tablet delayed release	1	
vitamin d (ergocalciferol) oral capsule 1.25 mg (50000 ut), 50000 unit	1		PEPCID	E	
vitamins acd-fluoride	1				

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Drug Name	Drug Tier	Requirements & Limits	Drug Name	Drug Tier	Requirements & Limits
PREVACID	E	QL	GLYCOPYRROLATE ORAL TABLET 1.5 MG	E	
PREVACID SOLUTAB	E	PA, ST, QL	GOLYTELY - effective 1/15/25	1	QL, H
PROTONIX ORAL TABLET DELAYED RELEASE	E		hyoscyamine sulfate er	1	
PYLERA	4	QL	hyoscyamine sulfate oral tablet	1	
rabeprazole sodium oral tablet delayed release	2	QL	hyoscyamine sulfate oral tablet dispersible	1	
sucralfate oral suspension	3		hyoscyamine sulfate sublingual	1	
sucralfate oral tablet	1		KRISTALOSE	3	
VOQUEZNA	4	PA, QL	lactulose encephalopathy oral solution 10 gm/15ml	1	
VOQUEZNA DUAL PAK	4	ST, QL	lactulose oral packet	E	
VOQUEZNA TRIPLE PAK	4	ST, QL	lactulose oral solution	1	
Gastrointestinal Agents - Drugs for Bowel, Intestine and Stomach Conditions			LEVBIID	4	
alosetron hcl	2	PA, QL	LEVSIN	4	
AMITIZA	4	PA, QL	LEVSIN/SL	4	
ANASPAZ	2		LIBRAX	E	
chlordiazepoxide-clidinium	4		LINZESS	2	PA, QL
CLENPIQ	3	QL	LOMOTIL	4	
constulose	1		loperamide hcl oral capsule	E	
cromolyn sodium oral	1		LOTRONEX	E	PA, QL
CUVPOSA	4		lubiprostone	2	PA, QL
dicyclomine hcl oral	1		methscopolamine bromide oral	1	
diphenoxylate-atropine oral tablet	1		MOTEGRITY	3	PA, QL
ED-SPAZ ORAL TABLET DISPERSIBLE 0.125 MG	3		MOVANTIK	E	PA, QL
enulose	1		MOVIPREP	4	QL
FIRST-LANSOPRAZOLE	3	PA	na sulfate-k sulfate-mg sulf	3	QL
FIRST-OMEPRAZOLE	3	PA	NULEV	4	
GASTROCROM	E		OCALIVA	4	PA, ST, QL, SP
gavilyte-c	1	H	OMEPRAZOLE+SYRSPEND SF ALKA	3	PA
gavilyte-g	1	QL, H	opium	1	
gavilyte-n with flavor pack	1	QL, H	OSCIMIN	4	
generlac	1		peg 3350-kcl-na bicarb-nacl	1	QL, H
GLYCATE	E		peg-3350/electrolytes	1	QL, H
glycopyrrolate oral solution	3		peg-3350/electrolytes/ascorbat	3	QL
glycopyrrolate oral tablet 1 mg, 2 mg	1		peg-kcl-nacl-nasulf-na asc-c	3	QL
			PLENVU	3	QL

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Drug Name	Drug Tier	Requirements & Limits	Drug Name	Drug Tier	Requirements & Limits
RELTONE	E		ZENPEP ORAL CAPSULE DELAYED RELEASE PARTICLES 10000-32000 UNIT, 15000- 47000 UNIT, 20000-63000 UNIT, 25000-79000 UNIT, 3000-10000 UNIT, 40000- 126000 UNIT, 5000-24000 UNIT	2	
ROBINUL	E				
ROBINUL-FORTE	E				
SUFLAVE	3	QL			
SUPREP BOWEL PREP KIT	3	QL			
SUTAB	3				
SYMPROIC	2	PA, QL	ZENPEP ORAL CAPSULE DELAYED RELEASE PARTICLES 60000-189600 UNIT	E	
TRULANCE	E	PA, ST, QL			
URSO 250	E		Genitourinary Agents - Drugs for Bladder, Genital and Kidney Conditions		
URSO FORTE	E		AURYXIA	E	
URSODIOL ORAL CAPSULE 200 MG, 400 MG	E		bethanechol chloride oral	1	
ursodiol oral capsule 300 mg	1		calcium acetate (phos binder) oral capsule	1	
ursodiol oral tablet	1		CAVERJECT IMPULSE	3	QL
VIBERZI	3	PA, QL	darifenacin hydrobromide er	E	
Genetic or Enzyme Disorder - Drugs for Replacement, Modification, Treatment			DETROL	E	
CARNITOR ORAL TABLET	4		DETROL LA	E	
CERDELGA	2	PA, SP	DITROPAN XL ORAL TABLET EXTENDED RELEASE 24 HOUR 10 MG, 5 MG	E	
CREON	2		EDEX	3	QL
DEPEN TITRATABS	2	SP	ELMIRON	4	ST
EVRYSDI	2	PA, QL, SP	fesoterodine fumarate er	E	
JAVYGTOR ORAL PACKET	E	PA, QL, SP	GEMTESA	E	
JYNARQUE ORAL TABLET THERAPY PACK 15 MG, 45 & 15 MG, 60 & 30 MG, 90 & 30 MG	2	PA, QL, SP	me/naphos/mb/hyo1	1	
JYNARQUE ORAL TABLET THERAPY PACK 30 & 15 MG	2	PA, QL	mirabegron er	3	PA, ST
KUVAN ORAL PACKET	E	PA, QL, SP	MYRBETRIQ ORAL TABLET EXTENDED RELEASE 24 HOUR	E	
levocarnitine oral tablet	1		oxybutynin chloride er	2	
ORFADIN	2	PA, SP	oxybutynin chloride oral tablet 2.5 mg	3	
PANCREAZE	3	ST	oxybutynin chloride oral tablet 5 mg	1	
PERTZYE	4	ST	phenazo oral tablet 200 mg	1	
sapropterin dihydrochloride oral packet	2	PA, QL, SP	phenazopyridine hcl oral tablet 100 mg, 200 mg	1	
STRENSIQ	2	PA, QL, SP	PYRIDIUM	3	
SUCRAID	2	PA, SP	RENVELA ORAL TABLET	E	
TEGSEDI	2	PA, QL, SP			
VYNDAMAX	2	PA, QL, SP			

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Drug Name	Drug Tier	Requirements & Limits	Drug Name	Drug Tier	Requirements & Limits
sevelamer carbonate oral tablet	2		amethia oral tablet 0.15-0.03 & 0.01 mg	3	
solifenacin succinate	2		amethyst	3	
THIOLA	4	SP	ANGELIQ	3	
THIOLA EC	4	SP	ANNOVERA	3	QL
tiopronin oral tablet delayed release	3	SP	apri	1	H
tolterodine tartrate	3		aranelle	1	H
tolterodine tartrate er	E		ashlyna	3	
TOVIAZ	E		aubra eq	1	H
tropium chloride	3		aubra oral tablet 0.1-20 mg-mcg	1	H
tropium chloride er	E		aurovela 1.5/30	1	H
UROGESIC-BLUE	2		aurovela 1/20	1	H
VELPHORO	4	ST	aurovela 24 fe	1	H
VESICARE	E		aurovela fe 1.5/30	1	H
Genitourinary Agents - Drugs for Prostate Conditions			aurovela fe 1/20	1	H
alfuzosin hcl er	1		aviane	1	H
AVODART	E		AYGESTIN ORAL TABLET 5 MG	4	
dutasteride oral	2		ayuna	1	H
dutasteride-tamsulosin hcl	E		azurette	2	
finasteride oral tablet 5 mg	1		BALCOLTRA	E	
FLOMAX	E		balziva	1	H
JALYN ORAL CAPSULE 0.5-0.4 MG	E		BEYAZ	E	
PROSCAR	E		BIJUVA	3	
RAPAFLO	E		blisovi 24 fe	1	H
silodosin	3		blisovi fe 1.5/30	1	H
tamsulosin hcl	1		blisovi fe 1/20	1	H
terazosin hcl	1		briellyn	1	H
UROXATRAL	E		camila	1	H
Hormonal Agents - Hormone Replacement and Birth Control			camrese	3	
ACTIVELLA	4		camrese lo	3	
afirmelle	1	H	caziant oral tablet 0.1/0.125/0.15 -0.025 mg	1	H
ALORA	3	QL	charlotte 24 fe	1	H
altavera	1	H	chateal eq	1	H
alyacen 1/35	1	H	chateal oral tablet 0.15-30 mg-mcg	1	H
alyacen 7/7/7	1	H	CLIMARA	E	QL
			CLIMARA PRO	3	QL

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COMBIPATCH	3	QL	enskyce	1	H
COVARYX	2		errin	1	H
COVARYX HS	3		est estrogens-methyltest	1	
cryselle-28	1	H	est estrogens-methyltest ds	1	
cyred eq	1	H	est estrogens-methyltest hs	1	
cyred oral tablet 0.15-30 mg-mcg	1	H	estarylla	1	H
dasetta 1/35	1	H	ESTRACE	E	
dasetta 7/7/7	1	H	estradiol oral	1	
daysee	3		estradiol patch twice weekly 0.025 mg/24hr transdermal	2	(generic for Minivelle), QL
deblitane	1	H	estradiol patch twice weekly 0.025 mg/24hr transdermal	2	(generic for Vivelle-Dot), QL
DELESTROGEN	4		estradiol patch twice weekly 0.025 mg/24hr transdermal	4	QL
delyla	1	H	estradiol patch twice weekly 0.0375 mg/24hr transdermal	2	(generic for Minivelle), QL
DEPO-ESTRADIOL	3		estradiol patch twice weekly 0.0375 mg/24hr transdermal	2	(generic for Vivelle-Dot), QL
DEPO-PROVERA	4	QL	estradiol patch twice weekly 0.0375 mg/24hr transdermal	4	QL
DEPO-SUBQ PROVERA 104 - effective 1/15/25	1	QL, H	estradiol patch twice weekly 0.05 mg/24hr transdermal	2	(generic for Minivelle), QL
desogestrel-ethinyl estradiol oral tablet 0.15-0.02/0.01 mg (21/5)	2		estradiol patch twice weekly 0.05 mg/24hr transdermal	2	(generic for Vivelle-Dot), QL
desogestrel-ethinyl estradiol oral tablet 0.15-30 mg-mcg	1	H	estradiol patch twice weekly 0.05 mg/24hr transdermal	4	QL
DIVIGEL	3		estradiol patch twice weekly 0.075 mg/24hr transdermal	2	(generic for Minivelle), QL
dolishale	3		estradiol patch twice weekly 0.075 mg/24hr transdermal	2	(generic for Vivelle-Dot), QL
dotti	2	QL	estradiol patch twice weekly 0.075 mg/24hr transdermal	4	QL
drospiren-eth estrad-levomefol - effective 1/15/25	1	H	estradiol patch twice weekly 0.1 mg/24hr transdermal	2	(generic for Minivelle), QL
drospirenone-ethinyl estradiol	3		estradiol patch twice weekly 0.1 mg/24hr transdermal	2	(generic for Vivelle-Dot), QL
DUAVEE	3	QL	estradiol patch twice weekly 0.1 mg/24hr transdermal	4	QL
EEMT	2				
EEMT HS	3				
ELESTRIN	3				
elinest	1	H			
ELLA	1	QL, H			
eluryng	1	H			
emoquette oral tablet 0.15-30 mg-mcg	1	H			
emzahh	1	H			
enilloring	1	H			
enpresse-28	1	H			

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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	3		jinteli	3	
estradiol transdermal gel 0.75 mg/1.25 gm (0.06%)	3	QL	jolessa	2	H
estradiol transdermal patch weekly	1	(generic for Climara), QL	joyeaux	E	
estradiol vaginal cream	3		juleber	1	H
estradiol vaginal tablet	2		junel 1.5/30	1	H
estradiol valerate intramuscular	1		junel 1/20	1	H
estradiol-norethindrone acet	2		junel fe 1.5/30	1	H
ESTRING	2	QL	junel fe 1/20	1	H
ESTROGEL	3	QL	junel fe 24	1	H
ethynodiol diac-eth estradiol	1	H	kaitlib fe	E	
etonogestrel-ethinyl estradiol	1	H	kalliga	1	H
EVAMIST	2		kariva	2	
falmina	1	H	kelnor 1/35	1	H
fayosim oral tablet 42-21-21-7 days	E		kelnor 1/50	1	H
FEMRING	3	QL	kurvelo	1	H
finzala	1	H	larin 1.5/30	1	H
fyavolv	3		larin 1/20	1	H
gemmily	E		larin 24 fe	1	H
GENERESS FE ORAL TABLET CHEWABLE 0.8-25 MG-MCG	E		larin fe 1.5/30	1	H
hailey 1.5/30	1	H	larin fe 1/20	1	H
hailey 24 fe	1	H	larissia oral tablet 0.1-20 mg-mcg	1	H
hailey fe 1.5/30	1	H	layolis fe	E	
hailey fe 1/20	1	H	leena	1	H
haloette	1	H	lessina	1	H
heather	1	H	levonest	1	H
iclevia	2	H	levonorgest-eth est & eth est	1	
incassia	1	H	levonorgest-eth estrad 91-day oral tablet 0.1-0.02 & 0.01 mg, 0.15-0.03 & 0.01 mg	3	
introvale	2	H	levonorgest-eth estrad 91-day oral tablet 0.15-0.03 mg	2	H
isibloom	1	H	levonorgest-eth estradiol-iron	E	
jaimiess	3		levonorgestrel-ethinyl estrad oral tablet 0.1-20 mg-mcg, 0.15-30 mg-mcg	1	H
jasmiel	3		levonorgestrel-ethinyl estrad oral tablet 90-20 mcg	3	
jencycla	1	H	levonorg-eth estrad triphasic	1	H
			levora 0.15/30 (28)	1	H

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Drug Name	Drug Tier	Requirements & Limits	Drug Name	Drug Tier	Requirements & Limits
lillow oral tablet 0.15-30 mg-mcg	1	H	NATAZIA	1	
LO LOESTRIN FE	1	H	necon 0.5/35 (28)	1	H
LOESTRIN 1.5/30 (21)	E		NEXTSTELLIS	E	
LOESTRIN 1/20 (21)	E		nikki	3	
LOESTRIN FE 1.5/30	E		nora-be	1	H
LOESTRIN FE 1/20	E		norelgestromin-eth estradiol	3	H
lojaimiess	3		norethin ace-eth estrad-fe oral capsule	E	
loryna	3		norethin ace-eth estrad-fe oral tablet	1	H
LOSEASONIQUE ORAL TABLET 0.1-0.02 & 0.01 MG	4		norethin ace-eth estrad-fe oral tablet chewable	1	H
low-ogestrel	1	H	norethindrone acetate oral	1	
lo-zumandimine	3		norethindrone acet-ethinyl est	1	H
lutera	1	H	norethindrone oral	1	H
lyleq	1	H	norethindrone-eth estradiol	2	(generic for FemHRT/ FemHRT 1/5)
lyllana	2	QL	norethindron-ethinyl estrad-fe	1	H
lyza	1	H	norethin-eth estradiol-fe oral tablet chewable 0.4-35 mg-mcg	1	H
marlissa	1	H	norethin-eth estradiol-fe oral tablet chewable 0.8-25 mg-mcg - effective 1/15/25	1	H
medroxyprogesterone acetate intramuscular	1	QL, H	norgestimate-eth estradiol	1	H
medroxyprogesterone acetate oral	1		norgestimate-ethinyl estradiol triphasic oral tablet 0.18/0.215/0.25 mg-25 mcg	2	
megestrol acetate oral tablet	1		norgestimate-ethinyl estradiol triphasic oral tablet 0.18/0.215/0.25 mg-35 mcg	1	H
MENOSTAR	3	QL	norlyda	1	H
merzee	E		norlyroc	1	H
mibelas 24 fe	1	H	nortrel 0.5/35 (28)	1	H
microgestin 1.5/30	1	H	nortrel 1/35 (21)	1	H
microgestin 1/20	1	H	nortrel 1/35 (28)	1	H
microgestin 24 fe	1	H	nortrel 7/7/7	1	H
microgestin fe 1.5/30	1	H	NUVARING	E	
microgestin fe 1/20	1	H	nylia 1/35	1	H
mili	1	H	nylia 7/7/7	1	H
mimvey	2		nymyo	1	H
MINASTRIN 24 FE ORAL TABLET CHEWABLE 1-20 MG-MCG(24)	E				
MINIVELLE	E	QL			
MIRCETTE ORAL TABLET 0.15-0.02/0.01 MG (21/5)	E				
mono-lynyah	1	H			
MYFEMBREE	2	PA, QL			

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ocella	3		tri-linyah	1	H
PHEXXI	E	PA	tri-lo-estarylla	2	
philith	1	H	tri-lo-marzia	2	
pimtrea	2		tri-lo-mili	2	
portia-28	1	H	tri-lo-sprintec	2	
PREMARIN ORAL	3		tri-mili	1	H
PREMARIN VAGINAL	3		tri-nymyo	1	H
PREMPHASE	3		tri-sprintec	1	H
PREMPRO	3		trivora (28)	1	H
previfem oral tablet 0.25-35 mg-mcg	1	H	tri-vylibra	1	H
progesterone intramuscular	1		tri-vylibra lo	2	
progesterone oral	2		tulana oral tablet 0.35 mg	1	H
PROMETRIUM	E		turqoz	1	H
PROVERA	4		TWIRLA	E	
QUARTETTE ORAL TABLET 42-21-21-7 DAYS	E		TYBLUME	1	
reclipsen	1	H	tydemy	E	
rivelsa	E		VAGIFEM	E	
SAFYRAL	E		velivet	1	H
SEASONIQUE ORAL TABLET 0.15-0.03 & 0.01 MG	E		vestura	3	
setlakin	2	H	vienva	1	H
sharobel	1	H	viorele	2	
simliya	2		VIVELLE-DOT	E	QL
simpesse	3		volnea	2	
SLYND	4	PA, ST	vyfemla	1	H
sprintec 28	1	H	vylibra	1	H
sronyx	1	H	wera	1	H
syeda	3		wymzya fe	3	
tarina 24 fe	1	H	xulane	3	H
tarina fe 1/20 eq	1	H	YASMIN 28	2	
tarina fe 1/20 oral tablet 1-20 mg-mcg	1	H	YAZ	2	
taysofy	E		yuvaferm	2	
TAYTULLA	E		zafemy	3	H
tilia fe	3		zovia 1/35 (28)	1	H
tri-estarylla	1	H	zumandimine	3	
tri-legest fe	3		Hormonal Agents - Oral Steroids		
			CORTEF	4	
			DEXABLISS	E	
			dexamethasone intensol	1	

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dexamethasone oral elixir	1		lanreotide acetate solution 120 mg/0.5ml subcutaneous	1	SP
dexamethasone oral solution	1		lanreotide acetate solution 120 mg/0.5ml subcutaneous	E	SP
dexamethasone oral tablet	1		leuprolide acetate injection	1	PA
dexamethasone oral tablet therapy pack	3		megestrol acetate oral suspension 40 mg/ml	1	
DXEVO 11-DAY ORAL TABLET THERAPY PACK 1.5 MG	E		METHERGINE	4	QL
fludrocortisone acetate oral	1		methylergonovine maleate oral	1	QL
HEMADY	E		NGENLA	4	PA, QL, SP
HIDEX 6-DAY	E		NOC DURNA	3	PA, QL
hydrocortisone oral	1		NORDITROPIN FLEXPPO	2	PA, QL, SP
MEDROL ORAL TABLET 16 MG, 4 MG, 8 MG	4		NUTROPIN AQ NUSPIN	E	PA, QL, SP
MEDROL ORAL TABLET 2 MG	2		OMNITROPE	2	PA, QL, SP
MEDROL ORAL TABLET THERAPY PACK	4		ORIAHNN	2	PA, QL
methylprednisolone oral	1		ORILISSA	2	PA, QL
ORAPRED ODT	4		SKYTROFA	4	PA, QL, SP
PEDIAPRED	2		SOMATULINE DEPOT	4	SP
prednisolone oral solution	1		Hormonal Agents - Testosterone Replacement		
prednisolone sodium phosphate oral solution 10 mg/5ml, 25 mg/5ml, 6.7 (5 base) mg/5ml	E		ANDRODERM	2	PA, QL
prednisolone sodium phosphate oral solution 15 mg/5ml	1		ANDROGEL PUMP	E	PA, QL
prednisolone sodium phosphate oral solution 20 mg/5ml	E	QL	ANDROGEL TRANSDERMAL GEL 20.25 MG/1.25GM (1.62%), 25 MG/2.5GM (1%), 40.5 MG/2.5GM (1.62%), 50 MG/5GM (1%)	E	PA, QL
prednisolone sodium phosphate oral tablet dispersible	1		DEPO-TESTOSTERONE INTRAMUSCULAR SOLUTION 100 MG/ML	3	
prednisone oral	1		DEPO-TESTOSTERONE INTRAMUSCULAR SOLUTION 200 MG/ML	4	
TAPERDEX 12-DAY	3		JATENZO	E	QL
TAPERDEX 6-DAY ORAL TABLET THERAPY PACK 1.5 MG	4		KYZATREX	4	PA, QL
TAPERDEX 6-DAY ORAL TABLET THERAPY PACK 1.5 MG (21)	3		NATESTO	E	PA, QL
TAPERDEX 7-DAY	3		TESTIM	2	PA, QL
Hormonal Agents - Other			TESTOSTERONE CYPIONATE INJECTION	E	
cabergoline	2		testosterone cypionate intramuscular	1	
DDAVP ORAL	E		testosterone enanthate intramuscular	1	
desmopressin acetate oral	1				
desmopressin acetate spray	1				

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testosterone gel 20.25 mg/act (1.62%) transdermal	2	PA, QL	Immunological Agents - Drugs for Immune System Stimulation or Suppression		
testosterone gel 20.25 mg/act (1.62%) transdermal	E	PA, QL	ABRILADA (1 PEN)	E	PA, SP
testosterone transdermal gel 1.62 %	2	PA, QL	ABRILADA (2 PEN)	E	PA, QL, SP
testosterone transdermal gel 10 mg/act (2%), 12.5 mg/act (1%), 20.25 mg/1.25gm (1.62%), 25 mg/2.5gm (1%), 40.5 mg/2.5gm (1.62%), 50 mg/5gm (1%)	E	PA, QL	ABRILADA (2 SYRINGE)	E	PA, QL, SP
testosterone transdermal solution	E	PA, QL	ACTEMRA ACTPEN	3	PA, ST, QL, SP
TLANDO	E	PA, QL	ACTEMRA SUBCUTANEOUS	3	PA, ST, QL, SP
VOGELXO	E	PA, QL	ADALIMUMAB-AACF (2 PEN)	E	PA, SP
VOGELXO PUMP	E	PA, QL	ADALIMUMAB-AATY (1 PEN) SUBCUTANEOUS AUTO-INJECTOR KIT 40 MG/0.4ML	E	PA, QL, SP
XYOSTED	E	PA, QL	ADALIMUMAB-AATY (1 PEN) SUBCUTANEOUS AUTO-INJECTOR KIT 80 MG/0.8ML	E	PA, SP
Hormonal Agents - Thyroid			ADALIMUMAB-AATY (2 PEN)	E	PA, QL, SP
ADTHYZA	E		ADALIMUMAB-AATY (2 SYRINGE)	E	PA, (manufactured by Celltrion), QL, SP
ARMOUR THYROID	3		ADALIMUMAB-ADAZ	2	(manufactured by Sandoz),PA,QL, SP
CYTOMEL	E		ADALIMUMAB-ADBM	E	PA, QL, SP
ERMEZA	2	PA	ADALIMUMAB-FKJP	E	PA, QL, SP
euthyrox	1		ADALIMUMAB-RYVK (2 PEN)	E	PA, SP
levo-t	1		ADBRY SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	2	PA, QL, SP
LEVOTHYROXINE SODIUM ORAL CAPSULE	E		AMJEVITA FOR NUVAILA	2	PA, QL, SP
levothyroxine sodium oral tablet	1		ARAVA	E	
levoxyl	2		AZASAN	4	
liothyronine sodium oral	2		azathioprine oral tablet 100 mg, 75 mg	3	
methimazole oral	1		azathioprine oral tablet 50 mg	1	
NIVA THYROID	3		BENLYSTA SUBCUTANEOUS SOLUTION AUTO-INJECTOR	2	PA, QL, SP
np thyroid	1		BIMZELX	3	PA, ST, QL, SP
propylthiouracil oral	1		CELLCEPT	E	
SYNTHROID	E		CIMZIA	E	PA
THYQUIDITY	E	PA	CIMZIA (2 SYRINGE)	2	PA, QL, SP
thyroid oral	1		CIMZIA STARTER KIT	2	PA, QL, SP
TIROSINT	E				
TIROSINT-SOL	2	PA			
unithroid	1				

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Drug Name	Drug Tier	Requirements & Limits	Drug Name	Drug Tier	Requirements & Limits
CINRYZE	E	PA, QL, SP	gengraf oral capsule	1	
COSENTYX SENSOREADY	2	PA, QL, SP	GRASTEK	4	PA, QL
COSENTYX SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	2	PA, QL, SP	HADLIMA	E	PA, QL, SP
COSENTYX UNOREADY	2	PA, QL, SP	HAEGARDA	2	PA, QL, SP
cyclosporine modified oral capsule	1		HULIO (2 PEN)	E	PA, QL, SP
cyclosporine oral	1		HULIO (2 SYRINGE)	E	PA, QL, SP
CYLTEZO (2 PEN) SUBCUTANEOUS AUTO-INJECTOR KIT 40 MG/0.4ML	E	PA, QL, SP	HUMIRA (2 PEN) PEN-INJECTOR KIT 40 MG/0.4ML SUBCUTANEOUS	2	PA, QL, SP
CYLTEZO (2 PEN) SUBCUTANEOUS AUTO-INJECTOR KIT 40 MG/0.8ML	E	PA, QL, SP	HUMIRA (2 PEN) PEN-INJECTOR KIT 80 MG/0.8ML SUBCUTANEOUS	2	PA, QL, SP
CYLTEZO (2 SYRINGE) SUBCUTANEOUS PREFILLED SYRINGE KIT 10 MG/0.2ML, 20 MG/0.4ML, 40 MG/0.8ML	E	PA, QL, SP	HUMIRA (2 PEN) SUBCUTANEOUS PEN-INJECTOR KIT 40 MG/0.8ML	2	PA, QL, SP
CYLTEZO (2 SYRINGE) SUBCUTANEOUS PREFILLED SYRINGE KIT 40 MG/0.4ML	E	PA, QL, SP	HUMIRA (2 SYRINGE) PREFILLED SYRINGE KIT 10 MG/0.1ML SUBCUTANEOUS	2	PA, QL, SP
CYLTEZO-CD/UC/HS STARTER SUBCUTANEOUS AUTO-INJECTOR KIT 40 MG/0.4ML	E	PA, QL, SP	HUMIRA (2 SYRINGE) PREFILLED SYRINGE KIT 20 MG/0.2ML SUBCUTANEOUS	2	PA, QL, SP
CYLTEZO-CD/UC/HS STARTER SUBCUTANEOUS AUTO-INJECTOR KIT 40 MG/0.8ML	E	PA, QL, SP	HUMIRA (2 SYRINGE) PREFILLED SYRINGE KIT 40 MG/0.4ML SUBCUTANEOUS	2	PA, QL, SP
CYLTEZO-PSORIASIS/UV STARTER SUBCUTANEOUS AUTO-INJECTOR KIT 40 MG/0.4ML	E	PA, QL, SP	HUMIRA (2 SYRINGE) SUBCUTANEOUS PREFILLED SYRINGE KIT 40 MG/0.8ML	2	PA, QL, SP
CYLTEZO-PSORIASIS/UV STARTER SUBCUTANEOUS AUTO-INJECTOR KIT 40 MG/0.8ML	E	PA, QL, SP	HUMIRA-CD/UC/HS STARTER	2	PA, QL, SP
EMPAVELI	2	PA, QL, SP	HUMIRA-PED<40KG CROHNS STARTER	2	PA, QL, SP
ENBREL	2	PA, QL, SP	HUMIRA-PED>=40KG CROHNS START	2	PA, QL, SP
ENBREL MINI	2	PA, QL, SP	HUMIRA-PED>=40KG UC STARTER	2	PA, QL, SP
ENBREL SURECLICK	2	PA, QL, SP	HUMIRA-PS/UV/ADOL HS STARTER SUBCUTANEOUS PEN-INJECTOR KIT 40 MG/0.8ML	2	PA, QL, SP
ENTYVIO	2	PA, QL, SP	HUMIRA-PSORIASIS/UEIT STARTER	2	PA, QL, SP
ENVARUSUS XR	E		HYFTOR	4	PA, QL
everolimus oral tablet 0.25 mg, 0.5 mg, 0.75 mg, 1 mg	3		HYRIMOZ SUBCUTANEOUS SOLUTION AUTO-INJECTOR 40 MG/0.4ML	E	PA, QL, SP

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HYRIMOZ SUBCUTANEOUS SOLUTION AUTO-INJECTOR 40 MG/0.8ML, 80 MG/0.8ML	E	PA, SP	OLUMIANT ORAL TABLET 2 MG	3	PA, ST, QL, SP
HYRIMOZ SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 10 MG/0.1 ML, 20 MG/0.2ML, 40 MG/0.4ML	E	PA, QL, SP	OMVOH SUBCUTANEOUS SOLUTION AUTO-INJECTOR	2	PA, QL, SP
HYRIMOZ SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 40 MG/0.8ML	E	PA, SP	ORENCIA CLICKJECT	3	PA, ST, QL, SP
HYRIMOZ-CROHNS/UC STARTER	E	PA, QL, SP	ORENCIA SUBCUTANEOUS	3	PA, ST, QL, SP
HYRIMOZ-PED<40KG CROHN STARTER	E	PA, QL, SP	OTEZLA	2	PA, QL, SP
HYRIMOZ-PED>=40KG CROHN START	E	PA, QL, SP	OTREXUP	E	QL
HYRIMOZ-PLAQUE PSORIASIS START	E	PA, QL, SP	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, SP
IDACIO (2 PEN)	E	PA, QL, SP	PROGRAF ORAL CAPSULE	4	
IDACIO (2 SYRINGE)	E	PA, QL, SP	RAPAMUNE ORAL SOLUTION	4	
IDACIO-CROHNS/UC STARTER	E	PA, QL, SP	RAPAMUNE ORAL TABLET	E	
IDACIO-PSORIASIS STARTER	E	PA, QL, SP	RASUVO	2	QL
IMURAN	E		RINVOQ	2	PA, QL, SP
JYLAMVO	4	PA	RUCONEST	4	PA, QL, SP
KEVZARA SUBCUTANEOUS SOLUTION AUTO-INJECTOR	4	PA, ST, QL, SP	SANDIMMUNE ORAL	E	
KINERET	3	PA, ST, QL, SP	SIMLANDI (1 PEN)	E	PA, QL, SP
leflunomide oral	1		SIMLANDI (2 PEN)	E	PA, QL, SP
LITFULO	3	PA, QL, SP	SIMPONI	2	PA, QL, SP
LUPKYNIS	4	PA, QL, SP	sirolimus oral solution	2	
methotrexate sodium (pf)	1		sirolimus oral tablet	1	
methotrexate sodium injection solution	1		SKYRIZI PEN	2	PA, QL, SP
methotrexate sodium oral	1		SKYRIZI SUBCUTANEOUS	2	PA, QL, SP
mycophenolate mofetil oral	1		SOTYKTU	2	PA, QL, SP
mycophenolate sodium	2		STELARA SUBCUTANEOUS	2	PA, QL, SP
mycophenolic acid	2		tacrolimus oral	1	
MYFORTIC	E		TAKHZYRO	2	PA, QL, SP
NEORAL ORAL CAPSULE	E		TALTZ	E	PA, ST, QL, SP
OLUMIANT ORAL TABLET 1 MG, 4 MG	3	PA, ST, QL	TREMFYA	2	PA, QL, SP
			TREXALL	2	
			XELJANZ	2	PA, QL, SP
			XELJANZ XR ORAL TABLET EXTENDED RELEASE 24 HOUR 11 MG	2	PA, QL, SP
			XELJANZ XR ORAL TABLET EXTENDED RELEASE 24 HOUR 22 MG	2	PA, QL

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XOLAIR SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	2	PA, QL, SP	GARDASIL 9 INTRAMUSCULAR SUSPENSION PREFILLED SYRINGE	3	H
YUFLYMA (1 PEN) SUBCUTANEOUS AUTO-INJECTOR KIT 40 MG/0.4ML	E	PA, QL, SP	HAVRIX	3	H
YUFLYMA (1 PEN) SUBCUTANEOUS AUTO-INJECTOR KIT 80 MG/0.8ML	E	PA, SP	HEPLISAV-B	3	H
YUFLYMA (2 PEN)	E	PA, QL, SP	IPOL	2	H
YUFLYMA (2 SYRINGE)	E	PA, QL, SP	MENQUADFI	3	H
YUFLYMA-CD/UC/HS STARTER	E	PA, SP	MENVEO INTRAMUSCULAR SOLUTION RECONSTITUTED	3	H
YUSIMRY	E	PA, QL, SP	M-M-R II	2	H
ZORTRESS	E		MODERNA COVID-19 VAC 6M-11Y	3	H
Immunological Agents - Drugs for Vaccination			NOVAVAX COVID-19 VACCINE	3	H
ADACEL	3	H	PFIZER COVID-19 VAC-TRIS 5-11Y	3	H
AFLURIA QUADRIVALENT INTRAMUSCULAR SUSPENSION PREFILLED SYRINGE	3	H	PFIZER COVID-19 VAC-TRIS 6M-4Y	3	H
BEXSERO	3	H	PNEUMOVAX 23	2	H
BOOSTRIX	2	H	PREVNAR 20	3	H
COMIRNATY INTRAMUSCULAR SUSPENSION	3	H	RECOMBIVAX HB	2	H
ENGERIX-B	2	H	SHINGRIX	3	H
FLUAD QUADRIVALENT	3	H	SPIKEVAX INTRAMUSCULAR SUSPENSION	3	H
FLUARIX QUADRIVALENT INTRAMUSCULAR SUSPENSION PREFILLED SYRINGE 0.5 ML	3	H	TENIVAC	3	H
FLUBLOK QUADRIVALENT INTRAMUSCULAR SOLUTION PREFILLED SYRINGE 0.5 ML	3	H	TRUMENBA	3	H
FLUCELVAX QUADRIVALENT INTRAMUSCULAR SUSPENSION PREFILLED SYRINGE	3	H	TWINRIX	3	H
FLULAVAL QUADRIVALENT INTRAMUSCULAR SUSPENSION PREFILLED SYRINGE 0.5 ML	3	H	VAQTA	2	H
FLUZONE HIGH-DOSE QUADRIVALENT INTRAMUSCULAR SUSPENSION PREFILLED SYRINGE 0.7 ML	3	H	VARIVAX	3	H
FLUZONE QUADRIVALENT INTRAMUSCULAR SUSPENSION PREFILLED SYRINGE 0.5 ML	3	H	Infertility Agents		
			cetorelix acetate	3	PA, ST, QL, SP
			CETROTIDE	4	PA, ST, QL, SP
			CHORIONIC GONADOTROPIN INTRAMUSCULAR	3	SP
			CLOMID	2	
			clomiphene citrate oral tablet 50 mg	1	
			ENDOMETRIN	2	
			FOLLISTIM AQ	2	QL, SP
			FYREMADEL	3	QL, SP
			ganirelix acetate	3	QL, SP

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ganirelix acetate solution prefilled syringe 250 mcg/0.5ml subcutaneous	4	(manufactured by Ferring), QL, SP	hydrocortisone ace-pramoxine external cream 1-1 %	1	
ganirelix acetate solution prefilled syringe 250 mcg/0.5ml subcutaneous	2	(manufactured by Merck/ Organon), QL, SP	hydrocortisone acetate rectal	2	
GONAL-F	4	ST, SP	hydrocortisone rectal	1	
GONAL-F RFF	4	ST, SP	hydrocort-pramoxine (perianal)	1	
GONAL-F RFF REDIJECT	4	ST, SP	LIALDA	E	
MENOPUR	4	QL, SP	mesalamine er	E	
NOVAREL	3	SP	mesalamine oral tablet delayed release 1.2 gm	2	
OVIDREL	4	SP	mesalamine oral tablet delayed release 800 mg	E	
PREGNYL	3	SP	mesalamine rectal enema	1	
Inflammatory Bowel Disease Agents			mesalamine rectal suppository	2	QL
ANALPRAM HC	4		mesalamine-cleanser	1	QL
ANALPRAM-HC EXTERNAL CREAM	4		PENTASA	E	
ANUCORT-HC	2		PROCORT	E	
ANUSOL-HC EXTERNAL	4		PROCTOCORT	E	
ANUSOL-HC RECTAL	E		PROCTOFOAM HC	2	
APRISO	1		procto-med hc	1	
ASACOL HD ORAL TABLET DELAYED RELEASE 800 MG	E		PROCTOSOL HC	4	
AZULFIDINE	4		PROCTOZONE-HC	3	
AZULFIDINE EN-TABS	4		ROWASA	4	QL
balsalazide disodium	1		SFROWASA	4	
budesonide er	E		sulfasalazine oral	1	
budesonide oral	2		UCERIS ORAL	3	
budesonide rectal	2		UCERIS RECTAL	E	
CANASA	E		Metabolic Bone Disease Agents - Drugs for Osteoporosis		
COLAZAL	E		ACTONEL	E	QL
CORTENEMA	4		alendronate sodium oral tablet	1	
CORTIFOAM	2		calcitonin (salmon) injection	3	
DIPENTUM	3		calcitonin (salmon) nasal	2	
HEMMOREX-HC	E		EVISTA	E	
hydrocortisone (perianal) external cream 1 %	E		FORTEO	E	PA, ST, SP
hydrocortisone (perianal) external cream 2.5 %	1		FOSAMAX	4	
			ibandronate sodium oral	2	
			MIACALCIN	3	
			raloxifene hcl	2	H

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risedronate sodium oral tablet 150 mg, 35 mg	3	QL	dexamethasone sodium phosphate ophthalmic	1	
risedronate sodium oral tablet 30 mg, 5 mg	3		diclofenac sodium ophthalmic	1	
teriparatide	E	PA, ST, SP	erythromycin ophthalmic	1	H-PA
teriparatide (recombinant) subcutaneous solution pen-injector 600 mcg/2.4ml	E	PA, ST, SP	EYSUVIS	4	QL
TERIPARATIDE (RECOMBINANT) SUBCUTANEOUS SOLUTION PEN-INJECTOR 620 MCG/2.48ML	3	PA, SP	FLAREX	2	
TYMLOS	3	PA, SP	fluorometholone	1	
Metabolic Bone Disease Agents - Other			FML FORTE	3	
calcitriol oral	1		FML LIQUIFILM	4	
cinacalcet hcl	3	PA	gatifloxacin ophthalmic	3	
paricalcitol oral	1		gentamicin sulfate ophthalmic	1	QL
ROCALTROL	4		ILEVRO	E	
SENSIPAR	E	PA	INVELTYS	3	
ZEMPLAR ORAL	4		ketorolac tromethamine ophthalmic	1	
Ophthalmic Agents - Drugs for Eye Allergy, Infection and Inflammation			KLARITY-A	E	
ACULAR	4		LOTEMAX OPHTHALMIC GEL	E	
ACULAR LS	4		LOTEMAX OPHTHALMIC OINTMENT	3	
ACUVAIL	E		LOTEMAX OPHTHALMIC SUSPENSION	E	QL
ak-poly-bac ophthalmic ointment 500-10000 unit/gm	1		LOTEMAX SM	3	QL
ALREX	4	QL	loteprednol etabonate ophthalmic gel	E	
AZASITE	3		loteprednol etabonate ophthalmic suspension	3	QL
azelastine hcl ophthalmic	1		MAXITROL	4	
bacitracin-polymyxin b	1		moxifloxacin hcl (2x day)	3	
BESIVANCE	3		moxifloxacin hcl ophthalmic	3	
BLEPH-10 OPHTHALMIC SOLUTION 10 %	3		neomycin-polymyxin-dexameth ophthalmic ointment	1	
bromfenac sodium (once-daily)	3		neomycin-polymyxin-dexameth ophthalmic suspension 3.5-10000-0.1	1	
bromfenac sodium ophthalmic solution 0.07 %	E		NEVANAC	4	
bromfenac sodium ophthalmic solution 0.075 %	E	QL	OCUFLOX	4	
BROMSITE	E	QL	ofloxacin ophthalmic	1	
ciprofloxacin hcl ophthalmic	1		olopatadine hcl ophthalmic solution 0.1 %	3	
			olopatadine hcl ophthalmic solution 0.2 %	E	

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POLYCIN	3		brimonidine tartrate ophthalmic solution 0.15 %	2	QL
polymyxin b-trimethoprim	1		brimonidine tartrate ophthalmic solution 0.2 %	1	
PRED FORTE	E		brimonidine tartrate-timolol	E	QL
PRED MILD	3		brinzolamide	2	QL
prednisolone acetate ophthalmic	1		COMBIGAN	2	QL
PREDNISOLONE ACETATE P-F	E		COSOPT	4	
PROLENSA	E		COSOPT PF	E	QL
sulfacetamide sodium ophthalmic solution	1		DORZOLAMIDE HCL SOLUTION 2 % OPHTHALMIC	4	
TOBRADEX OPHTHALMIC OINTMENT	3		dorzolamide hcl solution 2 % ophthalmic	1	
TOBRADEX OPHTHALMIC SUSPENSION 0.3-0.1 %	4		dorzolamide hcl-timolol mal	2	
TOBRADEX ST	E		dorzolamide hcl-timolol mal pf	E	QL
tobramycin ophthalmic	1	QL	ISTALOL	4	
tobramycin-dexamethasone	2		IYUZEH	E	QL
VIGAMOX	E		latanoprost ophthalmic	1	
XDEMY	4	PA, QL	LUMIGAN	2	
ZYLET	3		methazolamide oral	1	
ZYMAXID OPHTHALMIC SOLUTION 0.5 %	4		pilocarpine hcl ophthalmic	1	
Ophthalmic Agents - Drugs for Eye Infection and Inflammation			RHOPRESSA	3	QL
bacitracin ophthalmic	1		ROCKLATAN	3	QL
neomycin-bacitracin zn-polymyx	1		SIMBRINZA	E	QL
neomycin-polymyxin-hc ophthalmic	1		tafluprost (pf)	3	ST, QL
NEO-POLYCIN	3		timolol maleate (once-daily)	3	
sulfacetamide-prednisolone	1		timolol maleate ocudose	2	
Ophthalmic Agents - Drugs for Glaucoma			timolol maleate ophthalmic	1	
ALPHAGAN P OPHTHALMIC SOLUTION 0.1 %	2	QL	timolol maleate pf	2	
ALPHAGAN P OPHTHALMIC SOLUTION 0.15 %	4	QL	TIMOPTIC OCUDOSE	4	
AZOPT	E	QL	TIMOPTIC OPHTHALMIC SOLUTION 0.25 %, 0.5 %	4	
BETIMOL	2	QL	TIMOPTIC-XE OPHTHALMIC GEL FORMING SOLUTION 0.25 %, 0.5 %	4	
bimatoprost ophthalmic	2	QL	TRAVATAN Z	E	ST, QL
brimonidine tartrate ophthalmic solution 0.1 %	E	QL	travoprost (bak free)	3	QL
			TRUSOPT OPHTHALMIC SOLUTION 2 %	4	
			VYZULTA	E	ST, QL

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XALATAN	E		epinephrine solution auto-injector 0.15 mg/0.15ml injection	1	(generic for Adrenaclick), QL
ZIOPTAN	3	ST, QL	epinephrine solution auto-injector 0.15 mg/0.15ml injection	1	QL
Ophthalmic Agents - Drugs for Miscellaneous Eye Conditions			epinephrine solution auto-injector 0.15 mg/0.3ml injection	1	(generic for EpiPen-JR-Single Pack), QL
atropine sulfate ophthalmic solution 1 %	1		epinephrine solution auto-injector 0.15 mg/0.3ml injection	1	(generic for EpiPen-JR), QL
CEQUA	E	PA, QL	epinephrine solution auto-injector 0.3 mg/0.3ml injection	1	(generic for Adrenaclick), QL
cromolyn sodium ophthalmic	1		epinephrine solution auto-injector 0.3 mg/0.3ml injection	1	(generic for EpiPen-Single Pack), QL
CYCLOGYL	4		epinephrine solution auto-injector 0.3 mg/0.3ml injection	1	QL
cyclopentolate hcl ophthalmic	1		epinephrine solution auto-injector 0.3 mg/0.3ml injection	1	(generic for EpiPen), QL
cyclosporine ophthalmic	E	PA, QL	EPIPEN 2-PAK	E	QL
difluprednate	3		EPIPEN JR 2-PAK	E	QL
DUREZOL	4		Respiratory Tract / Pulmonary Agents - Drugs for Allergies, Cough, Cold		
ISOPTO ATROPINE OPTHALMIC SOLUTION 1 %	3		azelastine hcl nasal solution 0.1 %, 137 mcg/spray	3	
KLARITY-C DROPS	E	PA	azelastine hcl nasal solution 0.15 %	E	
MIEBO	4	PA, QL	azelastine-fluticasone	E	QL
RESTASIS	4	PA, QL	benzonatate oral capsule 100 mg, 200 mg	1	
RESTASIS MULTIDOSE	E	PA, QL	benzonatate oral capsule 150 mg	E	
TYRVAYA	4	PA, QL	BROMFED DM	3	
VERKAZIA	4	PA, QL	carbinoxamine maleate oral tablet 4 mg	1	
VEVYE	E	PA, QL	carbinoxamine maleate oral tablet 6 mg	E	
XIIDRA	4	PA, QL	cetirizine hcl oral solution	E	
Otic Agents - Drugs for Ear Conditions			CLARINEX	E	
acetic acid otic	1		cyproheptadine hcl oral	1	
CETRAXAL	3		desloratadine oral tablet	E	
CIPRO HC	3				
CIPRODEX OTIC SUSPENSION 0.3-0.1 %	E				
ciprofloxacin hcl otic	1				
ciprofloxacin-dexamethasone	3				
DERMOTIC	4				
flac	1				
fluocinolone acetonide otic	1				
hydrocortisone-acetic acid	1				
neomycin-polymyxin-hc otic	1				
ofloxacin otic	2				
Respiratory - Drugs for Anaphylaxis					
AUVI-Q	2	QL			

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DYMISTA	E	QL	AEROCHAMBER PLUS FLO-VU INTERM	3	
flunisolide nasal	3		AEROCHAMBER PLUS FLO-VU LARGE	3	
fluticasone propionate nasal	2	QL	AEROCHAMBER PLUS FLO-VU MEDIUM DEVICE	3	
HYCODAN ORAL SOLUTION	E	PA, QL	AEROCHAMBER PLUS FLO-VU SMALL	3	
hydrocod poli-chlorphe poli er	3	PA, QL	AEROCHAMBER PLUS FLO-VU W/MASK	3	
hydrocodone bit-homatrop mbr oral solution	1	PA, QL	AIRDUO RESPICLICK 113/14	E	QL
hydromet	1	PA, QL	AIRDUO RESPICLICK 232/14	E	QL
HYPERSAL	2		AIRDUO RESPICLICK 55/14	E	QL
ipratropium bromide nasal	1		AIRSUPRA	3	QL
levocetirizine dihydrochloride oral solution	3		albuterol sulfate hfa aerosol solution 108 (90 base) mcg/act inhalation	2	QL
levocetirizine dihydrochloride oral tablet	1		albuterol sulfate hfa aerosol solution 108 (90 base) mcg/act inhalation	2	(generic for ProAir HFA or Proventil HFA), QL
mometasone furoate nasal	3	QL	albuterol sulfate hfa aerosol solution 108 (90 base) mcg/act inhalation	2	(generic ProAir HFA or Proventil HFA), QL
NEBUSAL INHALATION NEBULIZATION SOLUTION 3 %	3		ALBUTEROL SULFATE HFA AEROSOL SOLUTION 108 (90 BASE) MCG/ACT INHALATION	E	(generic for Ventolin HFA), QL
ODACTRA	4	PA, QL	albuterol sulfate inhalation nebulization solution (2.5 mg/3ml) 0.083%, 0.63 mg/3ml, 1.25 mg/3ml, 2.5 mg/0.5ml	1	
olopatadine hcl nasal	3		ALBUTEROL SULFATE NEBULIZATION SOLUTION (5 MG/ML) 0.5% INHALATION	3	
PATANASE NASAL SOLUTION 0.6 %	E		ALBUTEROL SULFATE NEBULIZATION SOLUTION (5 MG/ML) 0.5% INHALATION	E	
promethazine-codeine	1	PA, QL	albuterol sulfate nebulization solution (5 mg/ml) 0.5% inhalation	1	
promethazine-dm	1		albuterol sulfate oral syrup	1	
pseudoephedrine-bromphen-dm	1		ALVESCO	E	QL
PULMOSAL	2		ANORO ELLIPTA	3	QL
ryvent	E				
sodium chloride inhalation	1				
XHANCE	E	QL, ST			
ZETONNA	3	QL			
Respiratory Tract / Pulmonary Agents - Drugs for Asthma and COPD					
ACCOLATE	4				
ADVAIR DISKUS	E	QL			
ADVAIR HFA	3	QL, RS			
AEROCHAMBER HOLDING CHAMBER	3				
AEROCHAMBER PLS FLOVU MTHPIECE	3				
AEROCHAMBER PLUS FLO-VU	3				

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arformoterol tartrate	3	QL	FLUTICASONE-SALMETEROL INHALATION AEROSOL	E	QL, RS
ARNUITY ELLIPTA	1	QL	fluticasone-salmeterol inhalation aerosol powder breath activated 100-50 mcg/act, 250-50 mcg/act, 500-50 mcg/act	3	QL, RS
ASMANEX (120 METERED DOSES)	E	QL	FLUTICASONE-SALMETEROL INHALATION AEROSOL POWDER BREATH ACTIVATED 113-14 MCG/ACT, 232-14 MCG/ACT, 55-14 MCG/ACT	3	QL
ASMANEX (14 METERED DOSES)	E	QL	formoterol fumarate inhalation	3	QL
ASMANEX (30 METERED DOSES)	E	QL	INSPIREASE	3	
ASMANEX (60 METERED DOSES)	E	QL	ipratropium bromide inhalation	1	
ASMANEX HFA	E	QL	ipratropium-albuterol	2	
ATROVENT HFA	3	QL	levalbuterol hcl inhalation	3	QL
BEVESPI AEROSPHERE	2	QL	LEVALBUTEROL HFA INHALATION AEROSOL 45 MCG/ACT	3	QL
BREO ELLIPTA	3	QL, RS	MICROCHAMBER	3	
brey-na	E	QL, RS	montelukast sodium oral packet	2	
BREZTRI AEROSPHERE	3	QL, RS	montelukast sodium oral tablet	1	
BROVANA	4	QL	montelukast sodium oral tablet chewable	1	
budesonide inhalation	2	QL	NUCALA SUBCUTANEOUS SOLUTION AUTO-INJECTOR	4	PA, QL, SP
budesonide-formoterol fumarate	E	QL, RS	NUCALA SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 100 MG/ML	4	PA, QL, SP
COMBIVENT RESPIMAT	3	QL	NUCALA SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 40 MG/0.4ML	4	PA, QL
DALIRESP	4	PA, QL	PERFOROMIST	4	QL
DULERA	E	ST, QL	PROCHAMBER VHC	3	
EASIVENT	3		PROVENTIL HFA	E	QL
EASIVENT MASK LARGE	3		PULMICORT FLEXHALER	E	QL
EASIVENT MASK MEDIUM	3		PULMICORT SUSPENSION	E	QL
EASIVENT MASK SMALL	3		QNASL	E	QL
FASENRA PEN	4	PA, QL	QNASL CHILDRENS	E	QL
FLEXICHAMBER	3		QVAR REDIBALER	1	QL
FLOVENT DISKUS INHALATION AEROSOL POWDER BREATH ACTIVATED 100 MCG/ACT, 250 MCG/ACT, 50 MCG/ACT	E	QL	roflumilast	3	PA, QL
FLOVENT HFA INHALATION AEROSOL 110 MCG/ACT, 220 MCG/ACT, 44 MCG/ACT	E	QL			
FLUTICASONE FUROATE-VILANTEROL	E	QL, RS			
FLUTICASONE PROPIONATE DISKUS	E	QL			
FLUTICASONE PROPIONATE HFA	E	QL			

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Drug Name	Drug Tier	Requirements & Limits	Drug Name	Drug Tier	Requirements & Limits
SEREVENT DISKUS	2	QL	TOBI NEBULIZER	E	PA, QL, SP
SINGULAIR ORAL PACKET	3		TOBI PODHALER	3	PA, QL, SP
SINGULAIR ORAL TABLET	E		tobramycin inhalation nebulization solution 300 mg/4ml	2	PA, QL, SP
SINGULAIR ORAL TABLET CHEWABLE	E		tobramycin nebulization solution 300 mg/5ml inhalation	E	PA, QL, SP
SPIRIVA HANDIHALER	2	QL	tobramycin nebulization solution 300 mg/5ml inhalation	E	PA, (generic for Tob), QL, SP
SPIRIVA RESPIMAT	2	QL	TOBRAMYCIN NEBULIZATION SOLUTION 300 MG/5ML INHALATION	E	PA, QL, SP
STIOLTO RESPIMAT	2	QL	TRIKAFTA ORAL TABLET THERAPY PACK	2	PA, QL, SP
STRIVERDI RESPIMAT	2	QL	Respiratory Tract / Pulmonary Agents - Drugs for Pulmonary Fibrosis		
SYMBICORT	3	QL, RS	ESBRIET ORAL TABLET	E	PA, QL, SP
TEZSPIRE SUBCUTANEOUS SOLUTION AUTO-INJECTOR	4	PA, QL, SP	OFEV	4	PA, QL, SP
theophylline er	1		pirfenidone oral tablet 267 mg, 801 mg	2	PA, QL, SP
tiotropium bromide monohydrate	E	QL	pirfenidone oral tablet 534 mg	2	PA, QL
TRELEGY ELLIPTA	3	QL, RS	Respiratory Tract / Pulmonary Agents - Drugs for Pulmonary Hypertension		
VENTOLIN HFA	E	QL	ADCIRCA	E	PA, QL, SP
VORTEX HOLD CHMBR/MASK/CHILD	2		ADEMPAS	2	PA, QL, SP
VORTEX HOLD CHMBR/MASK/TODDLER	2		alyq	2	PA, QL, SP
VORTEX VALVED HOLDING CHAMBER	2		ambrisentan	2	PA, QL, SP
wixela inhub	3	QL, RS	LETAIRIS	E	PA, QL, SP
XOPENEX CONCENTRATE INHALATION NEBULIZATION SOLUTION 1.25 MG/0.5ML	E	QL	OPSUMIT	2	PA, QL, SP
XOPENEX HFA	3	QL	ORENITRAM	4	PA, QL, SP
XOPENEX INHALATION NEBULIZATION SOLUTION 0.31 MG/3ML, 0.63 MG/3ML, 1.25 MG/3ML	E	QL	REMODULIN	E	PA
YUPELRI	4	PA, QL	REVATIO ORAL TABLET	E	QL, SP
zafirlukast	1		sildenafil citrate oral tablet 20 mg	1	QL
Respiratory Tract / Pulmonary Agents - Drugs for Cystic Fibrosis			tadalafil (pah)	2	PA, QL, SP
BETHKIS	E	PA, QL, SP	TADLIQ	3	PA, QL, SP
BRONCHITOL	3	PA, ST, QL, SP	TRACLEER 62.5 MG, 125 MG	2	PA, QL, SP
BRONCHITOL TOLERANCE TEST	3	PA, ST, QL, SP	treprostinil	E	PA
KITABIS PAK	E	PA, QL, SP	TYVASO	2	PA
PULMOZYME	2	PA, QL, SP	TYVASO DPI INSTITUTIONAL KIT	2	PA, QL, SP

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Drug Name	Drug Tier	Requirements & Limits	Drug Name	Drug Tier	Requirements & Limits
TYVASO DPI MAINTENANCE KIT	2	PA, QL, SP	DAYVIGO	4	ST, QL
TYVASO DPI TITRATION KIT	2	PA, QL, SP	doxepin hcl oral tablet	E	QL
TYVASO REFILL	2	PA	estazolam	1	
TYVASO STARTER	2	PA	eszopiclone	2	
UPTRAVI ORAL	4	PA, QL	LUMRYZ	4	PA, QL, SP
Skeletal Muscle Relaxants - Drugs for Muscle Pain and Spasm			LUNESTA	E	
baclofen oral tablet 10 mg, 20 mg, 5 mg	1		modafinil oral	2	QL
baclofen oral tablet 15 mg	E		NUVIGIL	E	QL
carisoprodol oral tablet 250 mg	E		PROVIGIL	E	QL
carisoprodol oral tablet 350 mg	1		QUVIVIQ	E	ST, QL
chlorzoxazone oral tablet 250 mg, 375 mg, 750 mg	E		ramelteon	3	ST, QL
chlorzoxazone oral tablet 500 mg	1		RESTORIL	4	
cyclobenzaprine hcl oral tablet 10 mg, 5 mg	1		ROZEREM	E	ST, QL
cyclobenzaprine hcl oral tablet 7.5 mg	E		SILENOR	E	QL
DANTRIUM ORAL	4		SODIUM OXYBATE SOLUTION 500 MG/ML ORAL	4	PA, (manufactured by Hikma), QL, SP
dantrolene sodium oral	1		SODIUM OXYBATE SOLUTION 500 MG/ML ORAL	E	PA, (manufactured by Amneal), QL, SP
FEXMID	E		SUNOSI	2	PA, QL
LORZONE	E		temazepam	1	
metaxalone	3		WAKIX	4	PA, QL, SP
methocarbamol oral tablet 1000 mg	E		XYREM	E	PA, QL, SP
methocarbamol oral tablet 500 mg, 750 mg	1		XYWAV	4	PA, QL, SP
orphenadrine citrate er	2		zaleplon	1	
SOMA	E		zolpidem tartrate er	2	
tizanidine hcl oral capsule	3		zolpidem tartrate oral tablet	1	
tizanidine hcl oral tablet	1				
ZANAFLEX	4				
Sleep Disorder Agents					
AMBIEN	E				
AMBIEN CR	E				
armodafinil	2	QL			
BELSOMRA	4	ST, QL			

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Index

A

abacavir sulfate-lamivudine.....	18
ABILIFY	17
abiraterone acetate oral tablet 250 mg.....	15
abiraterone acetate oral tablet 500 mg.....	15
ABRILADA (1 PEN).....	47
ABRILADA (2 PEN).....	47
ABRILADA (2 SYRINGE).....	47
ABSORICA	26
acamprosate calcium	8
ACANYA	26
acarbose oral	34
ACCOLATE.....	55
ACCU-CHEK AVIVA PLUS TEST STRIPS	30
ACCU-CHEK FASTCLIX LANCET DEVICE KIT	30
ACCU-CHEK FASTCLIX LANCETS.....	30
ACCU-CHEK GUIDE KIT W/ DEVICE.....	30
ACCU-CHEK GUIDE ME METER..	30
ACCU-CHEK GUIDE TEST STRIPS	30
ACCU-CHEK MULTICLIX LANCET DEVICE KIT	30
ACCU-CHEK MULTICLIX LANCETS.....	30
ACCU-CHEK SMARTVIEW TEST STRIPS	30
ACCU-CHEK SOFT TOUCH LANCETS.....	30
ACCU-CHEK SOFTCLIX LANCET	30
ACCU-CHEK SOFTCLIX LANCET DEVICE KIT	30
ACCUPRIL.....	19
accutane	26
ACCUTREND GLUCOSE	30
acebutolol hcl oral.....	19

acetaminophen-codeine.....	7
acetazolamide er	19
acetazolamide oral	19
acetic acid otic.....	54
ACIPHEX	38
acitretin	26
ACTEMRA ACTPEN	47
ACTEMRA SUBCUTANEOUS.....	47
ACTICLATE ORAL TABLET 150 MG, 75 MG.....	9
ACTIVELLA	41
ACTONEL	51
ACTOPLUS MET.....	34
ACTOS.....	34
ACULAR.....	52
ACULAR LS.....	52
ACUVAIL	52
acyclovir external cream	18
acyclovir external ointment.....	18
acyclovir oral.....	18
ACZONE.....	26
ADACEL	50
ADALIMUMAB-AACF (2 PEN)	47
ADALIMUMAB-AATY (1 PEN) SUBCUTANEOUS AUTO- INJECTOR KIT 40 MG/0.4ML	47
ADALIMUMAB-AATY (1 PEN) SUBCUTANEOUS AUTO- INJECTOR KIT 80 MG/0.8ML	47
ADALIMUMAB-AATY (2 PEN).....	47
ADALIMUMAB-AATY (2 SYRINGE).....	47
ADALIMUMAB-ADAZ	47
ADALIMUMAB-ADBM	47
ADALIMUMAB-FKJP.....	47
ADALIMUMAB-RYVK (2 PEN)	47
adapalene external gel	26
adapalene-benzoyl peroxide external gel 0.1-2.5 %	26
adapalene-benzoyl peroxide external gel 0.3-2.5 %.....	26

ADBRY SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	47
adc/f (0.5mg/ml)	36
ADCIRCA.....	57
ADDERALL.....	23
ADDERALL XR	23
ADDYI	36
ADEMPAS	57
ADHANSIA XR ORAL CAPSULE EXTENDED RELEASE 24 HOUR 25 MG, 35 MG, 45 MG, 55 MG, 70 MG, 85 MG.....	23
ADLYXIN STARTER PACK SUBCUTANEOUS PEN- INJECTOR KIT 10 & 20 MCG/0.2ML.....	34
ADLYXIN SUBCUTANEOUS SOLUTION PEN-INJECTOR 20 MCG/0.2ML.....	34
ADMELOG.....	33
ADMELOG SOLOSTAR.....	33
ADTHYZA.....	47
ADVAIR DISKUS.....	55
ADVAIR HFA.....	55
ADVATE.....	35
ADYNOVATE	35
ADZENYS XR-ODT	23
AEROCHAMBER HOLDING CHAMBER	55
AEROCHAMBER PLS FLOVU MTHPIECE	55
AEROCHAMBER PLUS FLO-VU... ..	55
AEROCHAMBER PLUS FLO-VU INTERM	55
AEROCHAMBER PLUS FLO-VU LARGE.....	55
AEROCHAMBER PLUS FLO-VU MEDIUM DEVICE	55
AEROCHAMBER PLUS FLO-VU SMALL.....	55
AEROCHAMBER PLUS FLO-VU W/MASK.....	55
AFINITOR	15



afirmelle.....	41	alfuzosin hcl er.....	41	amiloride hcl oral	19
AFLURIA QUADRIVALENT INTRAMUSCULAR SUSPENSION PREFILLED SYRINGE.....	50	ALINIA ORAL TABLET	16	amiloride-hydrochlorothiazide ..	19
AFREZZA.....	33	aliskiren fumarate	19	amiodarone hcl oral	19
AFSTYLA INTRAVENOUS KIT 1000 UNIT, 2000 UNIT, 250 UNIT, 3000 UNIT, 500 UNIT.....	35	allopurinol oral tablet 100 mg, 300 mg.....	14	AMITIZA	39
AFSTYLA INTRAVENOUS KIT 1500 UNIT, 2500 UNIT	35	ALLOPURINOL ORAL TABLET 200 MG.....	14	amitriptyline hcl oral	12
AGRYLIN	35	ALLZITAL	7	AMJEVITA FOR NUVAILA	47
AIMOVIG.....	14	almotriptan malate	14	amlodipine besylate oral	19
AIMOVIG SUBCUTANEOUS SOLUTION AUTO-INJECTOR 140 MG/ML	14	ALOGLIPTIN BENZOATE	34	amlodipine besylate-benazepril hcl	19
AIRDUO RESPICLICK 113/14.....	55	ALOGLIPTIN-METFORMIN HCL.....	34	amlodipine besylate-valsartan...	19
AIRDUO RESPICLICK 232/14 ...	55	ALORA.....	41	amlodipine-atorvastatin oral tablet 10-10 mg, 10-20 mg, 10-40 mg, 10-80 mg, 5-10 mg, 5-20 mg, 5-40 mg, 5-80 mg.....	19
AIRDUO RESPICLICK 55/14.....	55	alosetron hcl	39	amlodipine-atorvastatin oral tablet 2.5-10 mg, 2.5-20 mg, 2.5-40 mg	20
AIRSUPRA.....	55	ALPHAGAN P OPHTHALMIC SOLUTION 0.1 %	53	amlodipine-olmesartan	20
AJOVY.....	14	ALPHAGAN P OPHTHALMIC SOLUTION 0.15 %.....	53	amlodipine-valsartan-hctz.....	20
ak-poly-bac ophthalmic ointment 500-10000 unit/gm ...	52	ALPHANATE.....	35	amnestem	26
AKLIEF	26	alprazolam er	19	amoxicillin.....	9
ala-cort.....	26	alprazolam oral	19	amoxicillin-potassium clavulanate.....	9
albendazole oral	16	alprazolam xr	19	amphet-dextroamphet 3-bead er	23
albuterol sulfate hfa aerosol solution 108 (90 base) mcg/act inhalation	55	ALPROLIX.....	35	amphetamine sulfate.....	23
albuterol sulfate inhalation nebulization solution (2.5 mg/3ml) 0.083%, 0.63 mg/3ml, 1.25 mg/3ml, 2.5 mg/0.5ml	55	ALREX.....	52	amphetamine- dextroamphetamine	23
ALBUTEROL SULFATE NEBULIZATION SOLUTION (5 MG/ML) 0.5% INHALATION ...	55	ALTACE.....	19	amphetamine- dextroamphetamine er	23
albuterol sulfate oral syrup.....	55	altavera.....	41	ampicillin.....	9
alclometasone dipropionate.....	26	ALTRENO.....	26	AMPYRA.....	24
ALCOHOL PREP PADS PAD.....	30	ALTUVIIIO	35	AMZEEQ.....	26
ALDACTAZIDE ORAL TABLET 25-25 MG.....	19	ALUNBRIG	15	ANAFRANIL.....	12
ALDACTAZIDE ORAL TABLET 50-50 MG	19	ALVAIZ	35	anagrelide hcl.....	35
ALDACTONE	19	ALVESCO.....	55	ANALPRAM HC.....	51
ALECENSA	15	alyacen 1/35	41	ANALPRAM-HC EXTERNAL CREAM	51
alendronate sodium oral tablet..	51	alyacen 7/7/7	41	ANAPROX DS.....	8
		alyq.....	57	ANASPAZ.....	39
		amantadine hcl oral	17	anastrozole oral.....	15
		AMARYL ORAL TABLET 1 MG, 2 MG, 4 MG.....	34	ANDRODERM	46
		AMBIEN	58	ANDROGEL PUMP	46
		AMBIEN CR.....	58		
		ambrisentan	57		
		AMERGE ORAL TABLET 1 MG, 2.5 MG.....	14		
		amethia oral tablet 0.15-0.03 & 0.01 mg	41		
		amethyst.....	41		



ANDROGEL TRANSDERMAL GEL 20.25 MG/1.25GM (1.62%), 25 MG/2.5GM (1%), 40.5 MG/2.5GM (1.62%), 50 MG/ 5GM (1%).....	46	asenapine maleate	17	AUSTEDO XR ORAL TABLET EXTENDED RELEASE 24 HOUR 12 MG, 24 MG, 6 MG	25
ANGELIQ.....	41	ashlyna	41	AUSTEDO XR ORAL TABLET EXTENDED RELEASE 24 HOUR 30 MG, 36 MG, 42 MG, 48 MG	25
ANNOVERA	41	ASMANEX (120 METERED DOSES).....	56	AUSTEDO XR PATIENT TITRATION.....	25
ANORO ELLIPTA.....	55	ASMANEX (14 METERED DOSES).....	56	AUVELITY	12
ANTARA ORAL CAPSULE 30 MG .20		ASMANEX (30 METERED DOSES).....	56	AUVI-Q	54
ANTIVERT ORAL TABLET.....	13	ASMANEX (60 METERED DOSES).....	56	AVALIDE	20
ANUCORT-HC.....	51	ASMANEX HFA	56	AVAPRO	20
ANUSOL-HC EXTERNAL	51	aspirin-dipyridamole er	35	AVAR CLEANSER.....	26
ANUSOL-HC RECTAL	51	ATACAND.....	20	AVAR LS CLEANSER	26
apap-caff-dihydrocodeine	7	ATACAND HCT	20	AVAR-E EMOLLIENT.....	26
APLENZIN.....	12	atenolol oral.....	20	AVAR-E GREEN.....	26
aprepitant oral capsule 125 mg, 40 mg, 80 mg	13	atenolol-chlorthalidone.....	20	AVAR-E LS.....	26
apri	41	ATIVAN ORAL.....	19	aviane	41
APRISO.....	51	atomoxetine hcl	24	AVIDOXY	9
APTENSIO XR	23	ATORVALIQ	20	AVITA EXTERNAL CREAM 0.025 %.....	26
APTIOM	11	atorvastatin calcium oral tablet 10 mg, 20 mg.....	20	AVITA EXTERNAL GEL 0.025 %..	26
AQ INSULIN SYRINGE.....	30	atorvastatin calcium oral tablet 40 mg, 80 mg	20	AVODART	41
AQINJECT PEN NEEDLE.....	30	atovaquone	16	AVONEX PEN.....	24
ARAKODA	16	atovaquone-proguanil hcl.....	17	AVONEX PREFILLED.....	24
aranelle.....	41	ATRALIN	26	AYGESTIN ORAL TABLET 5 MG ..	41
ARANESP (ALBUMIN FREE)	35	atropine sulfate ophthalmic solution 1 %.....	54	ayuna.....	41
ARAVA.....	47	ATROVENT HFA	56	AZASAN	47
ARAZLO	26	AUBAGIO.....	24	AZASITE.....	52
arformoterol tartrate.....	56	aubra eq.....	41	azathioprine oral tablet 100 mg, 75 mg.....	47
ARICEPT	12	aubra oral tablet 0.1-20 mg-mcg	41	azathioprine oral tablet 50 mg...	47
ARIMIDEX.....	15	AUGMENTIN	9	azelaic acid external.....	26
aripiprazole oral solution.....	17	AUGMENTIN ES-600.....	9	azelastine hcl nasal solution 0.1 %, 137 mcg/spray	54
aripiprazole oral tablet	17	AUGTYRO	15	azelastine hcl nasal solution 0.15 %.....	54
ARIXTRA	10	aurovela 1/20	41	azelastine hcl ophthalmic	52
armodafinil.....	58	aurovela 1.5/30	41	azelastine-fluticasone.....	54
ARMOUR THYROID	47	aurovela 24 fe	41	AZELEX.....	26
ARNUITY ELLIPTA.....	56	aurovela fe 1/20.....	41	AZILECT.....	17
AROMASIN.....	15	aurovela fe 1.5/30	41	azithromycin oral	9
ARTHROTEC	8	AURYXIA	40	AZOPT.....	53
ASACOL HD ORAL TABLET DELAYED RELEASE 800 MG	51	AUSTEDO	25	AZOR	20
ascomp-codeine.....	7				

AZSTARYS.....	24
AZULFIDINE	51
AZULFIDINE EN-TABS.....	51
azurette	41

B

bac	7
bacitracin ophthalmic.....	53
bacitracin-polymyxin b.....	52
baclofen oral tablet 10 mg, 20 mg, 5 mg.....	58
baclofen oral tablet 15 mg	58
BACTRIM.....	9
BACTRIM DS	9
BAFIERTAM	24
BALCOLTRA.....	41
balsalazide disodium	51
balziva	41
BANZEL	11
BAQSIMI ONE PACK	34
BAQSIMI TWO PACK.....	34
BARACLUDE ORAL TABLET	18
BASAGLAR KWIKPEN.....	33
BASAGLAR TEMPO PEN	33
BD AUTOSHIELD DUO PEN NEEDLES.....	30
BD ECLIPSE NEEDLE 18G X 1-1/2", 25G X 5/8", 27G X 1/2"	30
BD ECLIPSE NEEDLE 23G X 1" (OTC).....	30
BD ECLIPSE NEEDLE 23G X 1" (RX).....	30
BD ECLIPSE SHIELDED NEEDLE.....	30
BD SAFETYGLIDE SHIELDED NEEDLE 21G X 1-1/2".....	30
BD SHARPS COLLECTOR.....	30
BD ULTRA-FINE insulin syringes	30
BD ULTRA-FINE PEN NEEDLES	30
BD ULTRA-FINE U-500 insulin syringes	30
BD ULTRA-FINE VEO insulin syringes	30
BELBUCA.....	7

BELSOMRA.....	58
benazepril hcl oral	20
benazepril-hydrochlorothiazide	20
BENICAR	20
BENICAR HCT.....	20
BENLYSTA SUBCUTANEOUS SOLUTION AUTO-INJECTOR	47
BENZAMYCIN	26
benzonatate oral capsule 100 mg, 200 mg	54
benzonatate oral capsule 150 mg	54
benzoyl peroxide-erythromycin	26
benztropine mesylate oral	17
BESIVANCE	52
betamethasone dipropionate aug external cream.....	26
betamethasone dipropionate aug external lotion.....	26
betamethasone dipropionate aug external ointment.....	26
betamethasone dipropionate external cream.....	26
betamethasone dipropionate external lotion	26
betamethasone dipropionate external ointment	26
betamethasone valerate external cream.....	26
betamethasone valerate external lotion	26
betamethasone valerate external ointment	26
BETAPACE.....	20
BETAPACE AF	20
BETASERON.....	24
betaxolol hcl oral	20
bethanechol chloride oral.....	40
BETHKIS	57
BETIMOL.....	53
BEVESPI AEROSPHERE.....	56
BEXSERO.....	50
BEYAZ	41
bicalutamide.....	15
BIDIL	20

BIGFOOT UNITY PROGRAM	30
BIJUVA	41
BIKTARVY	18
bimatoprost ophthalmic	53
BIMZELX	47
BIOTEL CARE TEST STRIPS	30
bis subcit-metronid-tetracyc	38
bismuth/metronidaz/ tetracyclin.....	38
bisoprolol fumarate oral.....	20
bisoprolol-hydrochlorothiazide	20
BLEPH-10 OPHTHALMIC SOLUTION 10 %.....	52
blisovi 24 fe	41
blisovi fe 1/20	41
blisovi fe 1.5/30	41
BLOOD GLUCOSE TEST STRIPS	30
BLOOD GLUCOSE TEST STRIPS 333	30
BONJESTA	13
BOOSTRIX	50
BOSULIF ORAL TABLET	15
BREO ELLIPTA	56
breyna.....	56
BREZTRI AEROSPHERE.....	56
briellyn	41
BRILINTA	17
brimonidine tartrate external....	26
brimonidine tartrate ophthalmic solution 0.1 %	53
brimonidine tartrate ophthalmic solution 0.15 %.....	53
brimonidine tartrate ophthalmic solution 0.2 %	53
brimonidine tartrate-timolol.....	53
brinzolamide	53
BRIVIACT ORAL SOLUTION	11
BRIVIACT ORAL TABLET	11
BROMFED DM.....	54
bromfenac sodium (once-daily)	52
bromfenac sodium ophthalmic solution 0.07 %.....	52
bromfenac sodium ophthalmic solution 0.075 %	52



bromocriptine mesylate oral tablet.....	17	butalbital-asa-caff-codeine.....	7	CAPLYTA	17
BROMSITE	52	butalbital-aspirin-caffeine.....	7	captopril oral.....	20
BRONCHITOL.....	57	butorphanol tartrate nasal.....	7	CARAC	26
BRONCHITOL TOLERANCE TEST.....	57	BUTRANS	7	CARAFATE.....	38
BROVANA	56	BYDUREON BCISE AUTOINJECTOR	34	carbamazepine er oral capsule extended release 12 hour	11
BRUKINSA.....	15	BYETTA 10 MCG PEN	34	carbamazepine er oral tablet extended release 12 hour	11
budesonide er	51	BYETTA 5 MCG PEN.....	34	carbamazepine oral tablet	11
budesonide inhalation.....	56	BYSTOLIC.....	20	carbamazepine oral tablet chewable.....	11
budesonide oral	51			CARBATROL.....	11
budesonide rectal	51	cabergoline	46	carbidopa-levodopa er.....	17
budesonide-formoterol fumarate	56	CABOMETYX.....	15	carbidopa-levodopa oral tablet..	17
bumetanide oral	20	CADUET.....	20	carbidopa-levodopa-entacapone	17
BUMEX	20	CALAN SR ORAL TABLET EXTENDED RELEASE 120 MG, 180 MG, 240 MG	20	carbinoxamine maleate oral tablet 4 mg.....	54
BUPAP	7	calcipotriene external cream	26	carbinoxamine maleate oral tablet 6 mg.....	54
buprenorphine.....	7, 8	calcipotriene external ointment .	26	CARDIZEM	20
buprenorphine hcl sublingual	8	calcipotriene external solution ..	26	CARDIZEM CD	20
buprenorphine hcl-naloxone hcl..	8	calcipotriene-betameth diprop external suspension	26	CARDIZEM LA.....	20
bupropion hcl er (smoking det) ...	8	calcitonin (salmon) injection.....	51	CARDURA	20
bupropion hcl er (sr)	12	calcitonin (salmon) nasal	51	CAREPOINT POLY HUB NEEDLE 18G X 1", 20G X 1", 21G X 1", 22G X 1", 23G X 1", 25G X 1", 25G X 5/8".....	30
bupropion hcl er (xl) oral tablet extended release 24 hour 150 mg, 300 mg	12	CALCITRENE.....	26	CAREPOINT POLY HUB NEEDLE 22G X 1-1/2"	30
BUPROPION HCL ER (XL) ORAL TABLET EXTENDED RELEASE 24 HOUR 450 MG	12	calcitriol oral	52	CAREPOINT SAFETY 1ST NEEDLE	30
bupropion hcl oral	12	calcium acetate (phos binder) oral capsule	40	CARETOUCH MONITOR SYSTEM	30
bupirone hcl oral.....	19	calcium acetate (phos binder) oral tablet.....	36	CARETOUCH TEST.....	30
butalbital-acetaminophen oral tablet 50-300 mg.....	7	calcium acetate oral tablet 667 mg	36	carisoprodol oral tablet 250 mg .	58
butalbital-acetaminophen oral tablet 50-325 mg	7	CALQUENCE	15	carisoprodol oral tablet 350 mg .	58
butalbital-apap-caff-cod oral capsule 50-300-40-30 mg.....	7	CALQUENCE ORAL CAPSULE 100 MG.....	15	CARNITOR ORAL SOLUTION	36
butalbital-apap-caff-cod oral capsule 50-325-40-30 mg	7	CAMBIA	8	CARNITOR ORAL TABLET	40
butalbital-apap-cafeine oral capsule 50-300-40 mg.....	7	camila	41	CARNITOR SF.....	36
butalbital-apap-cafeine oral capsule 50-325-40 mg	7	camrese.....	41	cartia xt	20
butalbital-apap-cafeine oral tablet.....	7	camrese lo	41	carvedilol.....	20
		CAMZYOS.....	20	carvedilol phosphate er	20
		CANASA.....	51	CASODEX	15
		candesartan cilexetil	20	CATAPRES-TTS-1.....	20
		candesartan cilexetil-hctz	20		
		capecitabine.....	15		



CATAPRES-TTS-2	20	CHORIONIC GONADOTROPIN INTRAMUSCULAR	50	CLEOCIN ORAL CAPSULE 150 MG, 300 MG	9
CATAPRES-TTS-3	20	CIALIS	36	CLEOCIN ORAL CAPSULE 75 MG. 9	
CAVERJECT IMPULSE	40	CIBINQO	26	CLEOCIN ORAL SOLUTION RECONSTITUTED	9
caziant oral tablet 0.1/0.125/ 0.15 -0.025 mg	41	ciclodan	14	CLEOCIN VAGINAL CREAM	9
cefadroxil	9	ciclopirox external gel	14	CLEOCIN-T.	26, 27
cefdinir	9	ciclopirox external shampoo	14	CLIMARA.	41, 43
cefixime	9	ciclopirox external solution	14	CLIMARA PRO	41
cefpodoxime proxetil oral tablet .	9	ciclopirox olamine external cream	14	clindacin	26, 27
cefprozil	9	ciclopirox olamine external suspension	26	clindacin etz external swab	27
cefuroxime axetil	9	cilostazol	17	clindacin-p	27
CELEBREX	8	CIMDUO	18	CLINDAGEL	27
celecoxib oral	8	cimetidine oral	38	clindamycin hcl oral	9
CELEXA	12	CIMZIA	47	clindamycin palmitate hcl	9
CELLCEPT	47	CIMZIA (2 SYRINGE)	47	clindamycin phos-benzoyl perox external gel 1-5 %, 1.2-2.5 %, 1.2-3.75 %	27
CENTANY EXTERNAL OINTMENT 2 %	9	CIMZIA STARTER KIT	47	clindamycin phos-benzoyl perox external gel 1.2-5 %	27
cephalexin	9	cinacalcet hcl	52	clindamycin phosphate external foam	27
CEQUA	54	CINRYZE	48	clindamycin phosphate external lotion	27
CEQUR SIMPLICITY 2U	30	CIPRO HC	54	clindamycin phosphate external solution	27
CERDELGA	40	CIPRO ORAL TABLET	9	clindamycin phosphate external swab	27
cetirizine hcl oral solution	54	CIPRODEX OTIC SUSPENSION 0.3-0.1 %	54	clindamycin phosphate gel 1 % external	27
CETRAXAL	54	ciprofloxacin hcl ophthalmic	52	clindamycin phosphate vaginal ...	9
cetrorelix acetate	50	ciprofloxacin hcl oral	9	clindamycin-tretinoin	27
CETROTIDE	50	ciprofloxacin hcl otic	54	CLINDESSE	9
cevimeline hcl	25	ciprofloxacin-dexamethasone ...	54	CLINPRO 5000	25
charlotte 24 fe	41	citalopram hydrobromide oral solution	12	clobazam oral suspension	11
chateal eq	41	citalopram hydrobromide oral tablet	12	clobazam oral tablet	11
chateal oral tablet 0.15-30 mg- mcg	41	CITRANATAL 90 DHA	36	clobetasol propionate e	27
chlordiazepoxide hcl	19	CITRANATAL ASSURE	36	clobetasol propionate external cream	27
chlordiazepoxide-clidinium	39	CITRANATAL DHA ORAL 27-1 & 250 MG	36	clobetasol propionate external foam	27
chlorhexidine gluconate mouth/ throat	25	claravis	26	clobetasol propionate external gel	27
chlorpromazine hcl oral tablet ...	17	CLARINEX	54	clobetasol propionate external liquid	27
chlorthalidone	20	clarithromycin er	9		
chlorzoxazone oral tablet 250 mg, 375 mg, 750 mg	58	clarithromycin oral suspension reconstituted	9		
chlorzoxazone oral tablet 500 mg	58	clarithromycin oral tablet	9		
cholestyramine light	20	CLENPIQ	39		
cholestyramine oral	20				

clobetasol propionate external ointment.....	27	COMPLETENATE	36	CRESTOR.....	20
clobetasol propionate external shampoo.....	27	COMPRO	13	cromolyn sodium ophthalmic....	54
clobetasol propionate external solution	27	COMTAN ORAL TABLET 200 MG.	17	cromolyn sodium oral	39
CLOBEX EXTERNAL SHAMPOO..	27	CONCEPT DHA.....	36	cryselle-28	42
CLOBEX SPRAY	27	CONCERTA.....	24	CUVPOSA	39
clodan.....	27	constulose	39	CVS ADVANCED GLUCOSE TEST.....	31
CLOMID.....	50	CONTOUR MONITOR KIT W/ DEVICE.....	30	CVS GLUCOSE METER TEST STRIPS	31
clomiphene citrate oral tablet 50 mg	50	CONTOUR NEXT EZ KIT W/ DEVICE.....	30	cyanocobalamin injection solution 1000 mcg/ml.....	36
clomipramine hcl oral	12	CONTOUR NEXT GEN MONITOR KIT.....	30	CYANOCOBALAMIN INJECTION SOLUTION 2000 MCG/ML.....	36
clonazepam oral	19	CONTOUR NEXT GEN TEST STRIPS	30, 31	cyanocobalamin nasal.....	36
clonidine hcl er oral tablet extended release 12 hour	24	CONTOUR NEXT LINK KIT W/ DEVICE.....	31	cyclobenzaprine hcl oral tablet 10 mg, 5 mg	58
clonidine hcl oral.....	20	CONTOUR NEXT MONITOR KIT W/DEVICE	31	cyclobenzaprine hcl oral tablet 7.5 mg	58
clonidine patch weekly 0.1 mg/24hr transdermal	20	CONTOUR NEXT ONE DEVICE...	31	CYCLOGYL.....	54
clonidine patch weekly 0.2 mg/24hr transdermal	20	CONTOUR NEXT ONE KIT.....	31	cyclopentolate hcl ophthalmic ..	54
clonidine patch weekly 0.3 mg/24hr transdermal	20	CONTOUR TEST STRIPS.....	31	cyclophosphamide oral capsule .	15
clonidine patch weekly 0.3 mg/24hr transdermal	20	COPAXONE	24	CYCLOSET	34
clonidine patch weekly 0.3 mg/24hr transdermal	20	CORDRAN.....	27	cyclosporine modified oral capsule.....	48
clonidine patch weekly 0.3 mg/24hr transdermal	20	COREG	20	cyclosporine ophthalmic.....	54
clonidine patch weekly 0.3 mg/24hr transdermal	20	COREG CR	20	cyclosporine oral	48
clonidine patch weekly 0.3 mg/24hr transdermal	20	CORGARD.....	20	CYLTEZO (2 PEN) SUBCUTANEOUS AUTO-INJECTOR KIT 40 MG/0.4ML	48
clonidine patch weekly 0.3 mg/24hr transdermal	20	CORLANOR.....	20	CYLTEZO (2 PEN) SUBCUTANEOUS AUTO-INJECTOR KIT 40 MG/0.8ML	48
clonidine patch weekly 0.3 mg/24hr transdermal	20	CORTEF	45	CYLTEZO (2 SYRINGE) SUBCUTANEOUS PREFILLED SYRINGE KIT 10 MG/0.2ML, 20 MG/0.4ML, 40 MG/0.8ML	48
clonidine patch weekly 0.3 mg/24hr transdermal	20	CORTENEMA.....	51	CYLTEZO (2 SYRINGE) SUBCUTANEOUS PREFILLED SYRINGE KIT 40 MG/0.4ML.....	48
clonidine patch weekly 0.3 mg/24hr transdermal	20	CORTIFOAM	51	CYLTEZO-CD/UC/HS STARTER SUBCUTANEOUS AUTO-INJECTOR KIT 40 MG/0.4ML	48
clonidine patch weekly 0.3 mg/24hr transdermal	20	COSENTYX SENSOREADY.....	48	CYLTEZO-CD/UC/HS STARTER SUBCUTANEOUS AUTO-INJECTOR KIT 40 MG/0.8ML	48
clonidine patch weekly 0.3 mg/24hr transdermal	20	COSENTYX SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	48		
clonidine patch weekly 0.3 mg/24hr transdermal	20	COSENTYX UNOREADY	48		
clonidine patch weekly 0.3 mg/24hr transdermal	20	COSOPT.....	53		
clonidine patch weekly 0.3 mg/24hr transdermal	20	COSOPT PF	53		
clonidine patch weekly 0.3 mg/24hr transdermal	20	COTELLIC.....	15		
clonidine patch weekly 0.3 mg/24hr transdermal	20	COTEMPLA XR-ODT	24		
clonidine patch weekly 0.3 mg/24hr transdermal	20	COVARYX	42		
clonidine patch weekly 0.3 mg/24hr transdermal	20	COVARYX HS.....	42		
clonidine patch weekly 0.3 mg/24hr transdermal	20	COZAAR.....	20		
clonidine patch weekly 0.3 mg/24hr transdermal	20	CREON	40		
clonidine patch weekly 0.3 mg/24hr transdermal	20	CRESEMBA ORAL.....	14		



CYLTEZO-PSORIASIS/UV STARTER SUBCUTANEOUS AUTO-INJECTOR KIT 40 MG/0.4ML.....	48
CYLTEZO-PSORIASIS/UV STARTER SUBCUTANEOUS AUTO-INJECTOR KIT 40 MG/0.8ML.....	48
CYMBALTA	12
cyproheptadine hcl oral.....	54
cyred eq.....	42
cyred oral tablet 0.15-30 mg-mcg.....	42
CYTOMEL.....	47
CYTOTEC.....	38

D

D-CARE BLOOD GLUCOSE.....	31
D-CARE GLUCOMETER	31
dabigatran etexilate mesylate ...	10
dalfampridine er.....	24
DALIRESP	56
DANTRIUM ORAL.....	58
dantrolene sodium oral.....	58
DAPAGLIFLOZIN PRO- METFORMIN ER.....	34
DAPAGLIFLOZIN PROPANEDIOL.....	34
dapsone external	27
dapsone oral.....	15
darifenacin hydrobromide er....	40
darunavir.....	18
dasetta 1/35	42
dasetta 7/7/7	42
DAVIMET-FLUORIDE.....	36
DAYPRO	8
daysee.....	42
DAYTRANA.....	24
DAYVIGO.....	58
DAZOMON	27
DDAVP ORAL.....	46
deblitane.....	42
deferasirox oral tablet.....	36

DELESTROGEN	42
DELSTRIGO.....	18
delyla.....	42
DENTA 5000 PLUS.....	25
DENTAGEL	25
DEPAKOTE	11
DEPAKOTE ER.....	11
DEPAKOTE SPRINKLES.....	11
DEPEN TITRATABS.....	40
DEPO-ESTRADIOL	42
DEPO-PROVERA.....	42
DEPO-SUBQ PROVERA 104 - effective 1/15/25	42
DEPO-TESTOSTERONE INTRAMUSCULAR SOLUTION 100 MG/ML	46
DEPO-TESTOSTERONE INTRAMUSCULAR SOLUTION 200 MG/ML.....	46
DERMA-SMOOTH/FS BODY ...	27
DERMA-SMOOTH/FS SCALP ...	27
DERMACINRX UREA.....	27
DERMOTIC.....	54
DESCOVY	18
desipramine hcl oral.....	12
desloratadine oral tablet.....	54
desmopressin acetate oral.....	46
desmopressin acetate spray	46
desogestrel-ethinyl estradiol oral tablet 0.15-0.02/0.01 mg (21/5).....	42
desogestrel-ethinyl estradiol oral tablet 0.15-30 mg-mcg.....	42
desonide external cream.....	27
desonide external lotion	27
desonide external ointment	27
DESOWEN.....	27
desoximetasone external cream	27
desoximetasone external ointment.....	27
DESVENLAFAXINE ER.....	12
desvenlafaxine succinate er	12
DETROL.....	40
DETROL LA	40

DEXABLISS	45
dexamethasone intensol.....	45
dexamethasone oral elixir.....	46
dexamethasone oral solution	46
dexamethasone oral tablet	46
dexamethasone oral tablet therapy pack.....	46
dexamethasone sodium phosphate ophthalmic	52
DEXCOM G6 RECEIVER	31
DEXCOM G6 SENSOR	31
DEXCOM G6 TRANSMITTER	31
DEXCOM G7 RECEIVER	31
DEXCOM G7 SENSOR	31
DEXEDRINE.....	24
DEXILANT	38
dexlansoprazole	38
dexmethylphenidate hcl	24
dexmethylphenidate hcl er	24
dextroamphetamine sulfate er oral capsule extended release 24 hour 10 mg, 5 mg	24
dextroamphetamine sulfate er oral capsule extended release 24 hour 15 mg.....	24
dextroamphetamine sulfate oral tablet 10 mg, 5 mg.....	24
dextroamphetamine sulfate oral tablet 15 mg, 2.5 mg, 20 mg, 30 mg, 7.5 mg	24
DHIVY.....	17
DIASTAT ACUDIAL RECTAL GEL 10 MG, 20 MG	11
diazepam oral solution	19
diazepam oral tablet.....	19
diazepam rectal.....	11
DICLEGIS	13
diclofenac potassium oral tablet 25 mg.....	8
diclofenac potassium oral tablet 50 mg	8
diclofenac potassium(migraine) ..	8
diclofenac sodium er	8
diclofenac sodium external gel 1 %	8



diclofenac sodium external gel 3 %.....	27	DIVIGEL.....	42	doxylamine-pyridoxine.....	13
diclofenac sodium ophthalmic...52		DODEX.....	36	DRISDOL.....	36
diclofenac sodium oral.....	8	dofetilide.....	21	dronabinol.....	13
diclofenac-misoprostol.....	8	dolishale.....	42	DROPSAFE SAFETY SYRINGE/ NEEDLE.....	31
dicloxacillin sodium.....	9	donepezil hcl oral tablet 10 mg, 5 mg.....	12	drospiren-eth estrad-levomefol - effective 1/15/25.....	42
dicyclomine hcl oral.....	39	donepezil hcl oral tablet 23 mg ..	12	drospirenone-ethinyl estradiol ..	42
DIFFERIN EXTERNAL GEL 0.3 %..27		DOPTelet.....	35	DRYSOL.....	27
DIFICID ORAL TABLET.....	9	DORYX MPC.....	9	DUAVEE.....	42
DIFLUCAN.....	14	DORYX ORAL TABLET DELAYED RELEASE 200 MG, 50 MG, 80 MG. 9		DULERA.....	56
difluprednate.....	54	DORZOLAMIDE HCL SOLUTION 2 % OPHTHALMIC.....	53	duloxetine hcl oral capsule delayed release particles 20 mg, 30 mg, 60 mg.....	12
digitek oral tablet 125 mcg, 250 mcg.....	20	dorzolamide hcl-timolol mal.....	53	duloxetine hcl oral capsule delayed release particles 40 mg ..	12
digox.....	20	dorzolamide hcl-timolol mal pf ..	53	DUPIXENT SUBCUTANEOUS SOLUTION PEN-INJECTOR.....	27
digoxin oral tablet.....	20	dotti.....	42	DUPIXENT SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 100 MG/0.67ML.....	27
DILANTIN INFATABS.....	11	DOVATO.....	18	DUPIXENT SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 200 MG/1.14ML, 300 MG/2ML.....	27
DILANTIN ORAL CAPSULE.....	11	DOVONEX EXTERNAL CREAM 0.005 %.....	27	DUREZOL.....	54
DILAUDID ORAL TABLET.....	7	doxazosin mesylate oral.....	21	dutasteride oral.....	41
dilt-xr.....	21	doxepin hcl oral capsule.....	12	dutasteride-tamsulosin hcl.....	41
diltiazem hcl er beads.....	20	doxepin hcl oral concentrate	12	DXEVO 11-DAY ORAL TABLET THERAPY PACK 1.5 MG.....	46
diltiazem hcl er coated beads....	20	doxepin hcl oral tablet.....	58	DYANA VEL XR.....	24
diltiazem hcl er oral capsule extended release 12 hour.....	21	doxycycline.....	9, 27	DYMISTA.....	55
diltiazem hcl er oral capsule extended release 24 hour.....	21	doxycycline hyclate oral capsule..	9	DYRENIUM.....	21
diltiazem hcl er oral tablet extended release 24 hour.....	21	doxycycline hyclate oral tablet 100 mg.....	9		
diltiazem hcl oral.....	21	doxycycline hyclate oral tablet 150 mg, 50 mg, 75 mg.....	9		
dimethyl fumarate oral.....	24	doxycycline hyclate oral tablet 20 mg.....	9		
DIOVAN.....	21	doxycycline hyclate oral tablet delayed release 100 mg, 150 mg, 200 mg, 50 mg, 75 mg.....	9		
DIOVAN HCT.....	21	DOXYCYCLINE HYCLATE ORAL TABLET DELAYED RELEASE 80 MG.....	9		
DIPENTUM.....	51	doxycycline monohydrate oral capsule 100 mg, 50 mg.....	9		
diphenoxylate-atropine oral tablet.....	39	doxycycline monohydrate oral capsule 150 mg, 75 mg.....	9		
DIPROLENE.....	27	doxycycline monohydrate oral suspension reconstituted.....	9		
disulfiram oral.....	8	doxycycline monohydrate oral tablet.....	9		
DITROPAN XL ORAL TABLET EXTENDED RELEASE 24 HOUR 10 MG, 5 MG.....	40				
divalproex sodium er.....	11				
divalproex sodium oral capsule delayed release sprinkle.....	11				
divalproex sodium oral tablet delayed release.....	11				

E

E.E.S. GRANULES.....	9
EASIVENT.....	56
EASIVENT MASK LARGE.....	56
EASIVENT MASK MEDIUM.....	56
EASIVENT MASK SMALL.....	56
EASY MAX BLOOD GLUCOSE TEST.....	31
EASY MAX T1 GLUCOSE SYSTEM.....	31
EASY TOUCH HEALTHPRO GLUCOSE.....	31



EASY TOUCH TEST	31	EMGALITY	14	EPIPEN 2-PAK.....	54
EASYGLUCO	31	emoquette oral tablet		EPIPEN JR 2-PAK	54
EASYMAX 15 TEST	31	0.15-30 mg-mcg	42	epitol	11
EASYMAX NG BLOOD GLUCOSE		EMPAVELI.....	48	eplerenone.....	21
KIT.....	31	emtricitabine-tenofovir df oral		EPZICOM.....	18
EC-NAPROSYN ORAL TABLET		tablet 100-150 mg, 133-200 mg,		EQ BLOOD GLUCOSE TEST	31
DELAYED RELEASE 375 MG.....	8	167-250 mg	18	EQUETRO	19
EC-NAPROSYN ORAL TABLET		emtricitabine-tenofovir df oral		ergocalciferol oral capsule... 36, 38	
DELAYED RELEASE 500 MG	8	tablet 200-300 mg	18	ERIVEDGE	15
ec-naproxen	8	emzahn.....	42	ERLEADA ORAL TABLET	
econazole nitrate external	14	enalapril maleate oral solution... 21		240 MG.....	15
ED-SPAZ ORAL TABLET		enalapril maleate oral tablet	21	ERLEADA ORAL TABLET 60 MG.. 15	
DISPERSIBLE 0.125 MG	39	enalapril-hydrochlorothiazide ... 21		ERMEZA.....	47
EDARBI.....	21	ENBREL	48	errin	42
EDARBYCLOR.....	21	ENBREL MINI	48	ERY-TAB	9
EDEX	40	ENBREL SURECLICK.....	48	ERYGEL.....	27
EEMT	42	endocet.....	7	ERYPED 200.....	9
EEMT HS.....	42	ENDOMETRIN	50	ERYPED 400	9
efavirenz-emtricitab-tenofo df .. 18		ENGERIX-B.....	50	erythromycin base oral tablet ... 10	
EFFER-K ORAL TABLET		enillorig	42	erythromycin base oral tablet	
EFFERVESCENT 10 MEQ,		ENLITE GLUCOSE SENSOR	31	delayed release	10
20 MEQ.....	36	enoxaparin sodium injection		erythromycin ethylsuccinate	
EFFEXOR XR	12	solution prefilled syringe.....	10	oral suspension reconstituted	
EFFIENT.....	17	enpresse-28.....	42	200 mg/5ml	10
EFUDEX	27	enskyce	42	erythromycin ethylsuccinate	
ELEPSIA XR	11	ENSTILAR.....	27	oral suspension reconstituted	
ELESTRIN	42	entacapone.....	17	400 mg/5ml	10
eletriptan hydrobromide	14	entecavir	18	erythromycin external.....	27
ELIDEL	27	ENTRESTO ORAL TABLET	21	erythromycin ophthalmic.....	52
elinest.....	42	ENTYVIO.....	48	erythromycin oral.....	10
ELIQUIS.....	10	enulose.....	39	ESBRIET ORAL TABLET	57
ELIQUIS DVT/PE STARTER		ENVARBUS XR.....	48	escitalopram oxalate oral	
PACK	10	EPANED	21	solution	12
ELITE-OB	36	EPCLUSA ORAL TABLET.....	18	escitalopram oxalate oral tablet . 12	
ELLA.....	42	EPIDIOLEX.....	11	ESGIC	7
ELMIRON.....	40	EPIDUO	27	esomeprazole magnesium oral	
ELOCTATE.....	35	EPIDUO FORTE	27	capsule delayed release.....	38
eluryng.....	42	epinephrine solution auto-		esomeprazole magnesium oral	
EMBRACE BLOOD GLUCOSE		injector 0.15 mg/0.15ml		packet.....	38
TEST.....	31	injection.....	54	est estrogens-methyltest	42
EMBRACE WAVE BLOOD		epinephrine solution auto-		est estrogens-methyltest ds..... 42	
GLUCOSE IN VITRO	31	injector 0.15 mg/0.3ml		est estrogens-methyltest hs..... 42	
EMEND ORAL CAPSULE.....	13	injection.....	54	estarylla.....	42
		epinephrine solution auto-		estazolam	58
		injector 0.3 mg/0.3ml injection .. 54			



gabapentin oral capsule.....	11	glipizide oral tablet 2.5 mg	34	GUARDIAN REAL-TIME REPLACE PED.....	31
gabapentin oral solution 250 mg/5ml.....	11	glipizide xl.....	34	GUARDIAN SENSOR (3)	31
GABAPENTIN ORAL TABLET 25 MG, 50 MG.....	11	glipizide-metformin hcl	34	GUARDIAN SENSOR 3	31
gabapentin oral tablet 600 mg, 800 mg.....	11	GLUCAGON EMERGENCY KIT ...	34	GVOKE HYPOPEN 1-PACK.....	31
galantamine hydrobromide er ...	12	glucagon emergency kit 1 mg injection.....	34	GVOKE HYPOPEN 2-PACK.....	31
ganirelix acetate.....	50, 51	GLUCOCARD EXPRESSION TEST.....	31	GVOKE KIT.....	32
ganirelix acetate solution prefilled syringe 250 mcg/0.5ml subcutaneous.....	51	GLUCOCARD SHINE TEST	31	GVOKE PFS.....	32
GARDASIL 9 INTRAMUSCULAR SUSPENSION PREFILLED SYRINGE.....	50	GLUCOCARD VITAL TEST.....	31	GYNAZOLE-1.....	14
GASTROCROM.....	39	GLUCOTROL XL	34		
gatifloxacin ophthalmic.....	52	GLUMETZA	34	H	
gavilyte-c	39	glyburide micronized.....	34	HADLIMA	48
gavilyte-g	39	glyburide oral	34	HAEGARDA.....	48
gavilyte-n with flavor pack	39	glyburide-metformin.....	34	hailey 1.5/30	43
GAVRETO	16	GLYCATÉ	39	hailey 24 fe	43
gemfibrozil oral.....	21	glycopyrrolate oral solution.....	39	hailey fe 1/20.....	43
gemmily.....	43	glycopyrrolate oral tablet 1 mg, 2 mg	39	hailey fe 1.5/30.....	43
GEMTESA	40	GLYCOPYRROLATE ORAL TABLET 1.5 MG.....	39	HALCION.....	19
GENERESS FE ORAL TABLET CHEWABLE 0.8-25 MG-MCG....	43	glydo	7	halobetasol propionate external cream	28
generlac.....	39	GLYNASE ORAL TABLET 1.5 MG .	34	halobetasol propionate external ointment	28
gengraf oral capsule.....	48	GLYNASE ORAL TABLET 3 MG, 6 MG.....	35	haloette	43
gentamicin sulfate external.....	10	GLYXAMBI	35	haloperidol oral	17
gentamicin sulfate ophthalmic ..	52	GOLYTELY - effective 1/15/25 ...	39	HARVONI ORAL TABLET	18
GENVOYA	18	GONAL-F	51	HAVRIX.....	50
GEODON ORAL.....	17	GONAL-F RFF	51	HEALTHPRO BLOOD GLUCOSE MONITO.....	32
GILENYA ORAL CAPSULE 0.25 MG	24	GONAL-F RFF REDIRECT	51	heather.....	43
GILENYA ORAL CAPSULE 0.5 MG.....	25	GRALISE ORAL TABLET	25	HEMADY.....	46
GIMOTI	13	granisetron hcl oral.....	13	HEMANGEOL	21
glatiramer acetate.....	25	GRASTEK.....	48	HEMLIBRA SUBCUTANEOUS SOLUTION 105 MG/0.7ML, 150 MG/ML, 30 MG/ML, 300 MG/2ML, 60 MG/0.4ML	35
glatopa.....	25	griseofulvin microsize oral	14	HEMLIBRA SUBCUTANEOUS SOLUTION 12 MG/0.4ML.....	35
GLEEVEC.....	16	griseofulvin ultramicrosize.....	14	HEMMOREX-HC	51
glimepiride.....	34	guanfacine hcl	21, 24	HEMOFIL M	35
glipizide er	34	guanfacine hcl er	24	heparin sodium (porcine) injection solution	35
glipizide oral tablet 10 mg, 5 mg.....	34	GUARDIAN 4 GLUCOSE SENSOR.....	31	heparin sodium (porcine) pf	36
		GUARDIAN 4 TRANSMITTER.....	31	HEPLISAV-B.....	50
		GUARDIAN CONNECT TRANSMITTER.....	31	HIDEX 6-DAY.....	46
		GUARDIAN LINK 3 TRANSMITTER.....	31		



HIPREX.....	10	HUMIRA-PS/UV/ADOL HS STARTER SUBCUTANEOUS PEN- INJECTOR KIT 40 MG/0.8ML	48	hydrocortisone external ointment 1 %, 2.5 %	28
HORIZANT	25	HUMIRA-PSORIASIS/UEVIT STARTER	48	hydrocortisone lotion 2%.....	28
HULIO (2 PEN)	48	HUMULIN 70/30 KWIKPEN	33	hydrocortisone oral.....	46
HULIO (2 SYRINGE)	48	HUMULIN 70/30 VIAL.....	33	hydrocortisone rectal	51
HUMALOG INJECTION.....	33	HUMULIN N KWIKPEN	33	hydrocortisone valerate external cream	28
HUMALOG KWIKPEN	33	HUMULIN N VIAL.....	33	hydrocortisone valerate external ointment	28
HUMALOG MIX 50/50 KWIKPEN.....	33	HUMULIN R U-500 KWIKPEN	33	hydrocortisone-acetic acid	54
HUMALOG MIX 50/50 VIAL.....	33	HUMULIN R U-500 VIAL	33	hydromet.....	55
HUMALOG MIX 75/25 KWIKPEN .	33	HUMULIN R VIAL	33	hydromorphone hcl oral tablet ...	7
HUMALOG MIX 75/25 VIAL	33	HYCODAN ORAL SOLUTION.....	55	hydroxychloroquine sulfate oral .	17
HUMALOG SUBCUTANEOUS.....	33	hydralazine hcl oral	21	HYDROXYM EXTERNAL CREAM .	28
HUMALOG TEMPO PEN	33	HYDREA.....	16	hydroxyurea oral.....	16
HUMALOG U-100 JUNIOR KWIKPEN.....	33	hydrochlorothiazide oral	21	hydroxyzine hcl oral	19
HUMATE-P	36	hydrocod poli-chlorphe poli er...	55	hydroxyzine pamoate oral.....	19
HUMIRA (2 PEN) PEN- INJECTOR KIT 40 MG/0.4ML SUBCUTANEOUS.....	48	hydrocodone bit-homatrop mbr oral solution.....	55	HYFTOR	48
HUMIRA (2 PEN) PEN- INJECTOR KIT 80 MG/0.8ML SUBCUTANEOUS.....	48	hydrocodone-acetaminophen oral solution 7.5-325 mg/15ml	7	hyoscyamine sulfate er.....	39
HUMIRA (2 PEN) SUBCUTANEOUS PEN- INJECTOR KIT 40 MG/0.8ML	48	hydrocodone-acetaminophen oral tablet 10-300 mg, 5-300 mg, 7.5-300 mg.....	7	hyoscyamine sulfate oral tablet .	39
HUMIRA (2 SYRINGE) PREFILLED SYRINGE KIT 10 MG/0.1ML SUBCUTANEOUS ..	48	hydrocodone-acetaminophen oral tablet 10-325 mg, 5-325 mg, 7.5-325 mg	7	hyoscyamine sulfate oral tablet dispersible	39
HUMIRA (2 SYRINGE) PREFILLED SYRINGE KIT 20 MG/0.2ML SUBCUTANEOUS..	48	hydrocodone-ibuprofen.....	7	hyoscyamine sulfate sublingual .	39
HUMIRA (2 SYRINGE) PREFILLED SYRINGE KIT 40 MG/0.4ML SUBCUTANEOUS .	48	hydrocort-pramoxine (perianal) .	51	HYPERSAL	55
HUMIRA (2 SYRINGE) SUBCUTANEOUS PREFILLED SYRINGE KIT 40 MG/0.8ML.....	48	hydrocortisone (perianal) external cream 1 %.....	51	HYRIMOZ SUBCUTANEOUS SOLUTION AUTO-INJECTOR 40 MG/0.4ML.....	48
HUMIRA-CD/UC/HS STARTER ...	48	hydrocortisone (perianal) external cream 2.5 %.....	51	HYRIMOZ SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 10 MG/0.1 ML, 20 MG/0.2ML, 40 MG/0.4ML.....	49
HUMIRA-PED<40KG CROHNS STARTER	48	hydrocortisone ace-pramoxine external cream 1-1 %.....	51	HYRIMOZ SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 40 MG/0.8ML	49
HUMIRA-PED>=40KG CROHNS START	48	hydrocortisone ace-pramoxine external cream 2.5-1 %.....	28	HYRIMOZ-CROHNS/UC STARTER	49
HUMIRA-PED>=40KG UC STARTER	48	hydrocortisone acetate rectal ...	51	HYRIMOZ-PED<40KG CROHN STARTER	49
		hydrocortisone butyrate external cream.....	28	HYRIMOZ-PED>=40KG CROHN START	49
		hydrocortisone external cream 1 %	28	HYRIMOZ-PLAQUE PSORIASIS START	49
		hydrocortisone external cream 2.5 %	28	HYZAAR	21
		hydrocortisone external lotion 2 %, 2.5 %	28		

I

ibandronate sodium oral	51	indapamide	21	INSULIN PEN NEEDLES 29G X 12MM , 30G X 5 MM , 31G X 5 MM , 31G X 8 MM , 32G X 4 MM	32
IBRANCE.....	16	INDERAL LA	21	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	32
ibuprofen oral suspension 100 mg/5ml.....	8	indomethacin er	8	INTELENCE ORAL TABLET 100 MG, 200 MG	18
ibuprofen oral tablet 400 mg, 600 mg, 800 mg.....	8	indomethacin oral capsule.....	8	INTELENCE ORAL TABLET 25 MG	18
iclevia	43	INGREZZA ORAL CAPSULE 40 MG, 80 MG	25	INTRAROSA.....	36
ICLUSIG ORAL TABLET 10 MG, 30 MG	16	INGREZZA ORAL CAPSULE 60 MG	25	introvale.....	43
ICLUSIG ORAL TABLET 15 MG, 45 MG	16	INGREZZA ORAL CAPSULE SPRINKLE.....	25	INTUNIV	24
icosapent ethyl	21	INGREZZA ORAL CAPSULE THERAPY PACK	25	INVEGA	17
IDACIO (2 PEN)	49	INLYTA	16	INVELTYS	52
IDACIO (2 SYRINGE)	49	INPEN 100-BLUE-LILLY-HUMALOG DEVICE.....	32	INVOKAMET XR.....	35
IDACIO-CROHNS/UC STARTER..	49	INPEN 100-BLUE-NOVOLOG-FIASP DEVICE	32	INVOKANA.....	35
IDACIO-PSORIASIS STARTER....	49	INPEN 100-GREY-LILLY-HUMALOG DEVICE.....	32	IPOL.....	50
IDELVION	36	INPEN 100-GREY-NOVOLOG-FIASP DEVICE	32	ipratropium bromide inhalation .	56
IDHIFA	16	INPEN 100-PINK-LILLY-HUMALOG DEVICE.....	32	ipratropium bromide nasal.....	55
ILEVRO.....	52	INPEN 100-PINK-NOVOLOG-FIASP DEVICE	32	ipratropium-albuterol	56
imatinib mesylate.....	16	INSPIREASE.....	56	irbesartan	21
IMBRUVICA ORAL CAPSULE.....	16	INSPIRA.....	21	irbesartan-hydrochlorothiazide..	21
IMBRUVICA ORAL TABLET 140 MG, 280 MG	16	INSULIN ASPART	33	ISENTRESS HD.....	18
IMBRUVICA ORAL TABLET 420 MG.....	16	INSULIN ASPART FLEXPEN	33	ISENTRESS ORAL TABLET	18
imipramine hcl oral	13	INSULIN DEGLUDEC FLEXTOUCH	33	isibloom.....	43
imiquimod external cream 3.75 %.....	28	INSULIN GLARGINE.....	33	isoniazid oral tablet.....	15
imiquimod external cream 5 %...	28	INSULIN GLARGINE MAX SOLOSTAR	33	ISOPTO ATROPINE OPHTHALMIC SOLUTION 1 %....	54
imiquimod pump	28	INSULIN GLARGINE SOLOSTAR.	33	ISORDIL TITRADOSE.....	21
IMITREX NASAL SOLUTION 20 MG/ACT, 5 MG/ACT.....	15	INSULIN GLARGINE-YFGN SUBCUTANEOUS SOLUTION PEN-INJECTOR.....	33	isosorb dinitrate-hydralazine	21
IMITREX ORAL.....	15	INSULIN LISPRO	33, 34	isosorbide dinitrate oral tablet 10 mg, 20 mg, 30 mg, 5 mg.....	21
IMITREX STATDOSE REFILL	15	INSULIN LISPRO (1 UNIT DIAL) .	33	isosorbide dinitrate oral tablet 40 mg	21
IMITREX STATDOSE SYSTEM	15	INSULIN LISPRO JUNIOR KWIKPEN.....	34	isosorbide mononitrate	21
IMPOYZ	28	INSULIN LISPRO PROT & LISPRO.....	34	isosorbide mononitrate er	21
IMURAN.....	49			isotretinoin oral capsule 10 mg, 20 mg, 30 mg, 40 mg.....	28
IMVEXXY MAINTENANCE PACK .	36			isotretinoin oral capsule 25 mg, 35 mg.....	28
IMVEXXY STARTER PACK.....	36				
INBRIJA.....	17				
incassia.....	43				

ISTALOL.....	53
itraconazole oral capsule.....	14
ivabradine.....	21
ivermectin external cream.....	28
ivermectin oral.....	17
IYUZEH.....	53

J

JADENU.....	36
jaimiess.....	43
JAKAFI.....	16
JALYN ORAL CAPSULE 0.5-0.4 MG.....	41
jantoven.....	10
JANUMET.....	35
JANUMET XR.....	35
JANUVIA.....	35
JARDIANCE.....	35
jasmiel.....	43
JATENZO.....	46
JAVYGTOR ORAL PACKET.....	40
jencycla.....	43
JENTADUETO.....	35
JENTADUETO XR.....	35
jinteli.....	43
jolessa.....	43
JORNAY PM.....	24
joyeaux.....	43
JUBLIA.....	14
juleber.....	43
JULUCA.....	18
junel 1/20.....	43
junel 1.5/30.....	43
junel fe 1/20.....	43
junel fe 1.5/30.....	43
junel fe 24.....	43
JUST RIGHT 5000.....	25
JYLAMVO.....	49
JYNARQUE ORAL TABLET THERAPY PACK 15 MG, 45 & 15 MG, 60 & 30 MG, 90 & 30 MG.....	40

JYNARQUE ORAL TABLET THERAPY PACK 30 & 15 MG.....	40
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K

K-PHOS-NEUTRAL.....	37
K-TAB.....	37
kaitlib fe.....	43
kalliga.....	43
KAPSPARGO SPRINKLE.....	21
kariva.....	43
kelnor 1/35.....	43
kelnor 1/50.....	43
KEPPRA ORAL.....	11
KEPPRA XR.....	11
KERENDIA.....	21
KESIMPTA.....	25
ketoconazole external cream....	14
ketoconazole external shampoo.	14
ketoconazole oral.....	14
ketorolac tromethamine ophthalmic.....	52
ketorolac tromethamine oral.....	8
KEVZARA SUBCUTANEOUS SOLUTION AUTO-INJECTOR....	49
KINERET.....	49
KISQALI ORAL TABLET THERAPY PACK 200 MG.....	16
KITABIS PAK.....	57
KLARITY-A.....	52
KLARITY-C DROPS.....	54
KLARON.....	28
klayesta.....	14
KLISYRI.....	28
KLONOPIN.....	19
klor-con.....	36, 37
klor-con 10.....	36
klor-con m10.....	36
klor-con m15.....	37
klor-con m20.....	37
KLOXXADO.....	8
KOATE.....	36
KOATE-DVI.....	36
KOGENATE FS.....	36

KOMBIGLYZE XR ORAL TABLET EXTENDED RELEASE 24 HOUR 2.5-1000 MG, 5-1000 MG, 5-500 MG.....	35
KOSELUGO.....	16
kosher prenatal plus iron.....	37
KOURZEQ.....	25
KOVALTRY.....	36
KRINTAFEL.....	17
KRISTALOSE.....	39
kurvelo.....	43
KUVAN ORAL PACKET.....	40
KYZATREX.....	46

L

labetalol hcl oral.....	21
lacosamide oral.....	11
lactulose encephalopathy oral solution 10 gm/15ml.....	39
lactulose oral packet.....	39
lactulose oral solution.....	39
LAGEVRIO.....	18
LAMICTAL.....	11
LAMICTAL ODT ORAL TABLET DISPERSIBLE.....	11
LAMICTAL XR ORAL TABLET EXTENDED RELEASE 24 HOUR..	11
lamotrigine er.....	11
lamotrigine oral tablet.....	11
lamotrigine oral tablet chewable.....	11
lamotrigine oral tablet dispersible.....	11
LANCETS.....	30, 32
LANOXIN ORAL TABLET 125 MCG, 250 MCG.....	21
LANOXIN ORAL TABLET 62.5 MCG.....	21
lanreotide acetate solution 120 mg/0.5ml subcutaneous....	46
lansoprazole oral capsule delayed release.....	38
lansoprazole oral tablet delayed release dispersible.....	38
LANTUS SOLOSTAR.....	34



LANTUS U-100 VIAL.....	34	levocetirizine dihydrochloride oral tablet.....	55	LIPOFEN	21
larin 1/20	43	levofloxacin oral tablet	10	LIRAGLUTIDE PEN-INJECTOR 18MG/3ML.....	35
larin 1.5/30	43	levonest.....	43	lisdexamfetamine dimesylate....	24
larin 24 fe.....	43	levonorg-eth estrad triphasic....	43	lisinopril oral	21
larin fe 1/20	43	levonorgest-eth est & eth est	43	lisinopril-hydrochlorothiazide....	21
larin fe 1.5/30	43	levonorgest-eth estrad 91-day oral tablet 0.1-0.02 & 0.01 mg, 0.15-0.03 & 0.01 mg	43	LITFULO	49
larissia oral tablet 0.1-20 mg-mcg	43	levonorgest-eth estrad 91-day oral tablet 0.15-0.03 mg.....	43	lithium carbonate er.....	19
LASIX.....	21	levonorgest-eth estradiol-iron...	43	lithium carbonate oral	19
latanoprost ophthalmic	53	levonorgestrel-ethinyl estrad oral tablet 0.1-20 mg-mcg, 0.15-30 mg-mcg.....	43	LITHOBID	19
LATUDA	17	levonorgestrel-ethinyl estrad oral tablet 90-20 mcg	43	LIVALO.....	21
layolis fe	43	levora 0.15/30 (28)	43	LO LOESTRIN FE.....	44
LEDIPASVIR-SOFOSBUVIR.....	18	LEVOTHYROXINE SODIUM ORAL CAPSULE.....	47	lo-zumandimine	44
leena	43	levothyroxine sodium oral tablet.....	47	LODINE	8
leflunomide oral	49	levoxyl.....	47	LODOCO	21
lenalidomide.....	16	LEVSIN.....	39	LOESTRIN 1/20 (21)	44
LENVIMA ORAL CAPSULE THERAPY PACK 10 & 4 MG, 10 MG, 10 MG & 2 X 4 MG, 2 X 10 MG, 2 X 10 MG & 4 MG, 2 X 4 MG, 3 X 4 MG, 4 MG	16	LEVSIN/SL	39	LOESTRIN 1.5/30 (21)	44
lessina	43	LEXAPRO.....	13	LOESTRIN FE 1/20.....	44
LETAIRIS.....	57	LIALDA.....	51	LOESTRIN FE 1.5/30.....	44
letrozole oral.....	16	LIBRAX.....	39	LOFENA	8
leucovorin calcium oral.....	16	lidocaine external ointment 5 % ..	7	lojaimiess	44
leuprolide acetate injection.....	46	lidocaine external patch 5 %	7	LOKELMA	37
levabuterol hcl inhalation.....	56	lidocaine hcl mouth/throat	25	LOMOTIL.....	39
LEVALBUTEROL HFA INHALATION AEROSOL 45 MCG/ACT.....	56	lidocaine hcl urethral/mucosal ...	7	LONSURF	16
LEVBID.....	39	lidocaine viscous hcl.....	25	loperamide hcl oral capsule.....	39
LEVEMIR FLEXPEN	34	lidocaine-prilocaine external cream	7	LOPID	22
LEVEMIR U-100 FLEXTOUCH SUBCUTANEOUS SOLUTION PEN-INJECTOR 100 UNIT/ML....	34	LIDOCAN	7	LOPRESSOR.....	22
levetiracetam er	11	LIDODERM.....	7	LOPROX EXTERNAL CREAM 0.77 %	14
levetiracetam oral	11	LIKMEZ.....	10	LOPROX EXTERNAL SHAMPOO 1 %.....	14
levo-t	47	lillow oral tablet 0.15-30 mg-mcg	44	LOPROX EXTERNAL SUSPENSION 0.77 %.....	28
levocarnitine oral solution.....	37	linezolid oral tablet	10	lorazepam intensol	19
levocarnitine oral tablet.....	40	LINZESS.....	39	lorazepam oral concentrate 2 mg/ml	19
levocarnitine sf	37	liothyronine sodium oral	47	lorazepam oral tablet.....	19
levocetirizine dihydrochloride oral solution.....	55	LIPITOR.....	21	LORTAB ORAL ELIXIR 10-300 MG/15ML.....	7

LOSEASONIQUE ORAL TABLET 0.1-0.02 & 0.01 MG.....	44	M-NATAL PLUS.....	37	MENOPUR.....	51
LOTEMAX OPHTHALMIC GEL....	52	MACROBID.....	10	MENOSTAR.....	44
LOTEMAX OPHTHALMIC OINTMENT.....	52	MACRODANTIN.....	10	MENQUADFI.....	50
LOTEMAX OPHTHALMIC SUSPENSION.....	52	MALARONE.....	17	MENVEO INTRAMUSCULAR SOLUTION RECONSTITUTED....	50
LOTEMAX SM.....	52	MARINOL 2.5 MG.....	13	MEPRON.....	17
LOTENSIN.....	22	marlissa.....	44	mercaptopurine oral.....	16
LOTENSIN HCT.....	22	matzim la.....	22	merzee.....	44
loteprednol etabonate ophthalmic gel.....	52	MAVENCLAD.....	25	mesalamine er.....	51
loteprednol etabonate ophthalmic suspension.....	52	MAVYRET.....	18	mesalamine oral tablet delayed release 1.2 gm.....	51
LOTREL.....	22	MAXALT.....	15	mesalamine oral tablet delayed release 800 mg.....	51
LOTRONEX.....	39	MAXALT-MLT.....	15	mesalamine rectal enema.....	51
lovastatin oral.....	22	MAXITROL.....	52	mesalamine rectal suppository..	51
LOVAZA.....	22	MAXZIDE ORAL TABLET 75-50 MG.....	22	mesalamine-cleanser.....	51
LOVENOX INJECTION SOLUTION PREFILLED SYRINGE.....	10	MAXZIDE-25 ORAL TABLET 37.5-25 MG.....	22	MESTINON ORAL TABLET.....	15
low-ogestrel.....	44	MAYZENT ORAL TABLET 0.25 MG, 2 MG.....	25	MESTINON ORAL TABLET EXTENDED RELEASE.....	15
loxapine succinate.....	17	MAYZENT ORAL TABLET 1 MG...	25	metaxalone.....	58
lubiprostone.....	39	MAYZENT STARTER PACK ORAL TABLET THERAPY PACK 12 X 0.25 MG.....	25	metformin hcl er.....	35
LUMAKRAS.....	16	MAYZENT STARTER PACK ORAL TABLET THERAPY PACK 7 X 0.25 MG.....	25	metformin hcl er (mod).....	35
LUMIGAN.....	53	me/naphos/mb/hyo1.....	40	metformin hcl er (osm).....	35
LUMRYZ.....	58	meclizine hcl oral tablet.....	13	metformin hcl oral solution.....	35
LUNESTA.....	58	MEDROL ORAL TABLET 16 MG, 4 MG, 8 MG.....	46	metformin hcl oral tablet 1000 mg, 500 mg, 850 mg.....	35
LUPKYNIS.....	49	MEDROL ORAL TABLET 2 MG....	46	metformin hcl oral tablet 625 mg.....	35
lurasidone hcl.....	17	MEDROL ORAL TABLET THERAPY PACK.....	46	methadone hcl oral tablet.....	7
lutera.....	44	medroxyprogesterone acetate intramuscular.....	44	methazolamide oral.....	53
LYBALVI.....	17	medroxyprogesterone acetate oral.....	44	methenamine hippurate.....	10
lyleq.....	44	mefenamic acid oral.....	8	METHERGINE.....	46
lyllana.....	44	mefloquine hcl.....	17	methimazole oral.....	47
LYNPARZA.....	16	megestrol acetate oral suspension 40 mg/ml.....	46	methocarbamol oral tablet 1000 mg.....	58
LYRICA ORAL CAPSULE.....	25	megestrol acetate oral tablet....	44	methocarbamol oral tablet 500 mg, 750 mg.....	58
LYUMJEV KWIKPEN.....	34	MEKINIST ORAL TABLET.....	16	methotrexate sodium (pf).....	49
LYUMJEV TEMPO PEN.....	34	meloxicam oral tablet.....	8	methotrexate sodium injection solution.....	49
LYUMJEV VIAL.....	34	memantine hcl er.....	12	methotrexate sodium oral.....	49
lyza.....	44	memantine hcl oral tablet.....	12	methscopolamine bromide oral..	39
M				methylergonovine maleate oral..	46
M-M-R II.....	50			METHYLIN.....	24



methylphenidate	24	metronidazole external cream...	28	MM BLOOD GLUCOSE SYSTEM ..	32
methylphenidate hcl er (cd).....	24	metronidazole external gel		MM BLOOD GLUCOSE SYSTEM	
methylphenidate hcl er (la) oral		0.75 %	28	REFILL	32
capsule extended release 24		metronidazole external gel 1 %...	28	MM BLULINK GLUCOSE TEST ...	32
hour 10 mg, 20 mg, 30 mg,		metronidazole external lotion ...	28	MM EASY TOUCH GLUCOSE	
40 mg	24	metronidazole oral	10	METER.....	32
methylphenidate hcl er (la) oral		metronidazole vaginal.....	10	modafinil oral	58
capsule extended release 24		mexiletine hcl oral	22	MODERNA COVID-19 VAC	
hour 60 mg.....	24	MIACALCIN.....	51	6M-11Y	50
methylphenidate hcl er (osm)		mibelas 24 fe.....	44	moexipril hcl	22
oral tablet extended release		MICARDIS.....	22	mometasone furoate external... 28	
18 mg, 27 mg, 36 mg, 54 mg	24	MICARDIS HCT	22	mometasone furoate nasal	55
METHYLPHENIDATE HCL ER		MICROCHAMBER.....	56	MONDOXYNE NL	10
(OSM) ORAL TABLET EXTENDED		MICRODOT TEST	32	mono-lynyah	44
RELEASE 45 MG, 63 MG	24	microgestin 1/20	44	MONOJECT HYPODERMIC	
methylphenidate hcl er (osm)		microgestin 1.5/30	44	NEEDLE 18G X 1".....	32
oral tablet extended release		microgestin 24 fe.....	44	montelukast sodium oral	
72 mg.....	24	microgestin fe 1/20.....	44	packet.....	56
methylphenidate hcl er (xr)	24	microgestin fe 1.5/30.....	44	montelukast sodium oral tablet .56	
methylphenidate hcl er oral		midodrine hcl	22	montelukast sodium oral tablet	
tablet extended release.....	24	MIEBO.....	54	chewable.....	56
methylphenidate hcl er oral		mili	44	MONUROL ORAL PACKET 3 GM .10	
tablet extended release 24 hour .24		mimvey.....	44	morphine sulfate (concentrate)... 7	
methylphenidate hcl oral		MINASTRIN 24 FE ORAL TABLET		morphine sulfate er oral tablet	
solution	24	CHEWABLE 1-20 MG-MCG(24)... 44		extended release	7
methylphenidate hcl oral tablet .24		MINILINK REAL-TIME		morphine sulfate oral.....	7
methylphenidate hcl oral tablet		TRANSMITTER.....	32	MOTEGRITY	39
chewable.....	24	MINIMED 630G GUARDIAN		MOTPOLY XR.....	11
methylprednisolone oral	46	PRESS	32	MOUNJARO.....	35
metoclopramide hcl oral		MINIPRESS ORAL CAPSULE		MOVANTIK.....	39
solution	13	1 MG, 2 MG, 5 MG	22	MOVIPREP	39
metoclopramide hcl oral tablet.. 13		MINIVELLE	42, 44	moxifloxacin hcl (2x day).....	52
metolazone	22	minocycline hcl oral capsule	10	moxifloxacin hcl ophthalmic.....	52
metoprolol succinate er oral		minocycline hcl oral tablet.....	10	moxifloxacin hcl oral	10
tablet extended release 24 hour		minoxidil oral	22	MS CONTIN.....	7
100 mg, 200 mg, 50 mg	22	mirabegron er.....	40	MULPLETA	36
metoprolol succinate er oral		MIRAPEX ER	17	MULTAQ.....	22
tablet extended release 24 hour		MIRCETTE ORAL TABLET		MULTI-VIT-FLOR	37
25 mg.....	22	0.15-0.02/0.01 MG (21/5)	44	multi-vitamin/fluoride	37
metoprolol tartrate oral tablet		mirtazapine oral	13	multivitamin w/fluoride tablet	
100 mg, 25 mg, 50 mg.....	22	MIRVASO.....	28	chewable 0.25 mg oral	37
metoprolol tartrate oral tablet		misoprostol oral	38	multivitamin w/fluoride tablet	
37.5 mg, 75 mg.....	22	MITIGARE.....	14	chewable 0.5 mg oral.....	37
metoprolol-hydrochlorothiazide. 22					
METROCREAM.....	28				
METROGEL	28				
METROLOTION.....	28				

multivitamin w/fluoride tablet chewable 1 mg oral	37
multivitamin/fluoride tablet chewable 0.25 mg oral (rx)	37
multivitamin/fluoride tablet chewable 0.5 mg oral (rx).....	37
multivitamin/fluoride tablet chewable 1 mg oral (rx).....	37
mupirocin calcium.....	10
mupirocin external	10
MYAMBUTOL.....	15
MYCOBUTIN	15
mycophenolate mofetil oral	49
mycophenolate sodium	49
mycophenolic acid	49
MYDAYIS.....	24
MYFEMBREE	44
MYFORTIC	49
MYRBETRIQ ORAL TABLET EXTENDED RELEASE 24 HOUR ..	40
MYSOLINE	11

N

na sulfate-k sulfate-mg sulf.	39
nabumetone oral	8
nadolol oral	22
nafrinse drops oral solution 0.275 (0.125 f) mg/drop	37
NAFRINSE ORAL TABLET CHEWABLE 2.2 (1 F) MG	37
naftifine hcl external gel	28
NAFTIN	28
NALOCET	7
naloxone hcl injection solution prefilled syringe 2 mg/2ml	8
naloxone hcl nasal	8
naltrexone hcl oral.....	9
NAMENDA ORAL TABLET 10 MG, 5 MG.....	12
NAMENDA TITRATION PAK	12
NAMENDA XR	12
NAPROSYN ORAL TABLET	8
naproxen dr	8

naproxen oral tablet.....	8
naproxen oral tablet delayed release	8
naproxen sodium oral tablet 275 mg, 550 mg.....	8
naratriptan hcl.....	15
NARCAN.....	9
NASCOBAL.....	37
NATALVIT	37
NATAZIA	44
nateglinide.....	35
NATESTO.....	46
NATROBA	28
NAYZILAM	11
nebivolol hcl	22
NEBUSAL INHALATION NEBULIZATION SOLUTION 3 % ..	55
necon 0.5/35 (28).....	44
NEO-POLYCIN	53
neomycin sulfate oral	10
neomycin-bacitracin zn- polymyx.....	53
neomycin-polymyxin-dexameth ophthalmic ointment.....	52
neomycin-polymyxin-dexameth ophthalmic suspension 3.5-10000-0.1.....	52
neomycin-polymyxin-hc ophthalmic.....	53
neomycin-polymyxin-hc otic	54
NEONATAL COMPLETE.....	37
NEONATAL PLUS.....	37
NEORAL ORAL CAPSULE.....	49
NERLYNX.....	16
neuac.....	28
NEULASTA	36
NEUPRO.....	17
NEURONTIN	11
NEUTEK 2TEK TEST.....	32
NEVANAC	52
NEXIUM ORAL CAPSULE DELAYED RELEASE.....	38
NEXIUM ORAL PACKET	38
NEXLETOL	22

NEXLIZET	22
NEXTSTELLIS.....	44
NGENLA.....	46
niacin er (antihyperlipidemic)	22
NIASPAN ORAL TABLET EXTENDED RELEASE 1000 MG, 500 MG, 750 MG.....	22
NICOTROL	9
nifedipine er	22
nifedipine er osmotic release	22
nifedipine oral	22
nikki	44
NINLARO.....	16
nisoldipine er.....	22
nitazoxanide oral	17
NITRO-BID.....	22
NITRO-DUR.....	22
nitrofurantoin macrocrystal	10
nitrofurantoin monohydrate macrocrystals.....	10
nitrofurantoin oral suspension 25 mg/5ml	10
NITROFURANTOIN ORAL SUSPENSION 50 MG/5ML	10
nitroglycerin rectal	22
nitroglycerin sublingual	22
nitroglycerin transdermal.....	22
NITROSTAT	22
NIVA THYROID.....	47
NIVA-PLUS.....	37
NOC DURNA.....	46
nora-be.....	44
NORDITROPIN FLEXPPO	46
norelgestromin-eth estradiol....	44
norethin ace-eth estrad-fe oral capsule.....	44
norethin ace-eth estrad-fe oral tablet.....	44
norethin ace-eth estrad-fe oral tablet chewable.....	44
norethin-eth estradiol-fe oral tablet chewable 0.4-35 mg-mcg.	44



norethin-eth estradiol-fe oral tablet chewable 0.8-25 mg-mcg - effective 1/15/25.....	44
norethindron-ethinyl estrad-fe ..	44
norethindrone acet-ethinyl est ..	44
norethindrone acetate oral	44
norethindrone oral	44
norethindrone-eth estradiol	44
norgestimate-eth estradiol	44
norgestimate-ethinyl estradiol triphasic oral tablet 0.18/0.215/0.25 mg-25 mcg.....	44
norgestimate-ethinyl estradiol triphasic oral tablet 0.18/0.215/0.25 mg-35 mcg.....	44
NORITATE.....	28
NORLIQVA	22
norlyda	44
norlyroc	44
NORPRAMIN.....	13
nortrel 0.5/35 (28).....	44
nortrel 1/35 (21)	44
nortrel 1/35 (28).....	44
nortrel 7/7/7	44
nortriptyline hcl oral capsule.....	13
NORVASC	22
NORVIR ORAL TABLET	18
NOURIANZ.....	17
NOVAREL	51
NOVAVAX COVID-19 VACCINE...50	
NOVOEIGHT	36
NOVOFINE AUTOCOVER PEN NEEDLE 30G X 8 MM	32
NOVOFINE PEN NEEDLE.....	32
NOVOFINE PLUS PEN NEEDLE ..	32
NOVOLIN 70/30 FLEXPEN	34
NOVOLIN 70/30 FLEXPEN RELION.....	34
NOVOLIN 70/30 RELION	34
NOVOLIN 70/30 VIAL.....	34
NOVOLIN N FLEXPEN	34
NOVOLIN N FLEXPEN RELION ..	34
NOVOLIN N RELION.....	34

NOVOLIN N VIAL.....	34
NOVOLIN R FLEXPEN	34
NOVOLIN R FLEXPEN RELION...34	
NOVOLIN R RELION.....	34
NOVOLIN R VIAL	34
NOVOLOG FLEXPEN	34
NOVOLOG FLEXPEN RELION....34	
NOVOLOG RELION.....	34
NOVOLOG U-100 VIAL	34
NOVOPEN ECHO.....	32
NOVOTWIST PEN NEEDLE	32
NOXAFIL ORAL TABLET DELAYED RELEASE.....	14
np thyroid	47
NUBEQA.....	16
NUCALA SUBCUTANEOUS SOLUTION AUTO-INJECTOR	56
NUCALA SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 100 MG/ML	56
NUCALA SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 40 MG/0.4ML	56
NUCYNTA	7
NUCYNTA ER.....	7
NUEDEXTA.....	25
NULEV.....	39
NUPLAZID ORAL CAPSULE.....	17
NURTEC ODT	15
NUTROPIN AQ NUSPIN.....	46
NUVARING.....	44
NUVESSA.....	10
NUVIGIL	58
NUWIQ INTRAVENOUS KIT 1000 UNIT, 2000 UNIT, 250 UNIT, 2500 UNIT, 3000 UNIT, 4000 UNIT, 500 UNIT	36
NUWIQ INTRAVENOUS KIT 1500 UNIT.....	36
NUZYRA ORAL.....	10
nyamyc.....	14
nylia 1/35.....	44
nylia 7/7/7.....	44
nymyo.....	44

nystatin external.....	14
nystatin mouth/throat	14
nystatin oral.....	14
nystatin-triamcinolone.....	14
nystop.....	14

O

OB COMPLETE.....	37
OCALIVA.....	39
ocella.....	45
OCUFLOX	52
ODACTRA	55
ODEFSEY.....	18
ODOMZO.....	16
OFEV	57
ofloxacin ophthalmic.....	52
ofloxacin otic	54
olanzapine oral tablet	17, 18
olanzapine oral tablet dispersible	18
olanzapine-fluoxetine hcl	13
olmesartan medoxomil oral.....	22
olmesartan medoxomil-hctz....	22
olmesartan-amlodipine-hctz	22
olopatadine hcl nasal.....	55
olopatadine hcl ophthalmic solution 0.1 %	52
olopatadine hcl ophthalmic solution 0.2 %	52
OLUMIANT ORAL TABLET 1 MG, 4 MG.....	49
OLUMIANT ORAL TABLET 2 MG .	49
OLUX EXTERNAL FOAM 0.05 % ..	28
OMECLAMOX-PAK.....	38
omega-3-acid ethyl esters	22
omeprazole oral capsule delayed release	38
OMEPRAZOLE+SYRSPEND SF ALKA	39
OMNIPOD 5 G6 INTRO (GEN 5) ..	32
OMNIPOD 5 G6 PODS (GEN 5)....	32
OMNIPOD 5 G7 INTRO (GEN 5) KIT.....	32

OMNIPOD 5 G7 PODS (GEN 5)...	32	ORGOVYX.....	16	PACERONE ORAL TABLET 200 MG.....	22
OMNITROPE.....	46	ORIAHNN.....	46	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.....	49
OMVOH SUBCUTANEOUS SOLUTION AUTO-INJECTOR	49	ORILISSA.....	46	paliperidone er.....	18
ON CALL EXPRESS BLOOD GLUCOSE.....	32	orphenadrine citrate er.....	58	PAMELOR.....	13
ON CALL EXPRESS MONITORING SYS.....	32	OSCIMIN.....	39	PANCREAZE.....	40
ondansetron hcl oral.....	13	oseltamivir phosphate oral capsule.....	18	PANRETIN.....	28
ondansetron odt oral tablet dispersible 4 mg, 8 mg.....	13	oseltamivir phosphate oral suspension reconstituted.....	18	pantoprazole sodium oral tablet delayed release.....	38
ONE VITE WOMENS PLUS.....	37	OSPHERA.....	36	PARADIGM REAL-TIME TRANSMITTER.....	32
ONETOUCH DELICA PLUS LANCETS.....	32	OTEZLA.....	49	paricalcitol oral.....	52
ONETOUCH ULTRA 2 KIT W/ DEVICE.....	32	OTREXUP.....	49	PARLODEL ORAL TABLET.....	17
ONETOUCH ULTRA TEST.....	32	OVACE PLUS WASH EXTERNAL LIQUID.....	28	PARNATE.....	13
ONETOUCH ULTRA TEST STRIPS	32	OVACE WASH.....	28	paroxetine hcl er.....	13
ONETOUCH ULTRASOFT LANCETS.....	32	OVIDREL.....	51	paroxetine hcl oral tablet.....	13
ONETOUCH VERIO FLEX SYSTEM KIT.....	32	oxaprozin oral tablet.....	8	paroxetine mesylate.....	13
ONETOUCH VERIO IQ SYSTEM KIT W/DEVICE.....	32	oxazepam.....	19	PATANASE NASAL SOLUTION 0.6 %.....	55
ONETOUCH VERIO REFLECT KIT W/DEVICE.....	32	oxcarbazepine.....	11	PAXIL CR.....	13
ONETOUCH VERIO TEST STRIPS.....	32	OXTELLAR XR.....	11	PAXIL ORAL TABLET.....	13
ONEXTON.....	28	oxybutynin chloride er.....	40	PAXLOVID (150/100).....	18
ONFI.....	11	oxybutynin chloride oral tablet 2.5 mg.....	40	PAXLOVID (300/100).....	18
ONGLYZA.....	35	oxybutynin chloride oral tablet 5 mg.....	40	pazopanib hcl.....	16
opium.....	39	OXYCODONE HCL ER.....	7	PEDIAPRED.....	46
OPSUMIT.....	57	oxycodone hcl oral capsule.....	7	peg 3350-kcl-na bicarb-nacl.....	39
OPTIUMEZ TEST.....	32	oxycodone hcl oral solution.....	7	peg-3350/electrolytes.....	39
OPZELURA.....	28	oxycodone hcl oral tablet 10 mg, 15 mg, 20 mg, 30 mg, 5 mg.....	7	peg-3350/electrolytes/ ascorbat.....	39
ORACEA.....	28	OXYCODONE- ACETAMINOPHEN ORAL TABLET 10-300 MG, 2.5-300 MG, 5-300 MG, 7.5-300 MG.....	7	peg-kcl-nacl-nasulf-na asc-c.....	39
ORACIT.....	37	oxycodone-acetaminophen oral tablet 10-325 mg, 2.5-325 mg, 5-325 mg, 7.5-325 mg.....	7	penicillin v potassium.....	10
ORAL CITRATE.....	37	OXYCONTIN.....	7	PENTASA.....	51
ORALONE.....	25	oxymorphone hcl er.....	7	pentoxifylline er.....	22
ORAPRED ODT.....	46	OZEMPIC.....	35	PEPCID.....	38
ORENCIA CLICKJECT.....	49			PERCOCET.....	7
ORENCIA SUBCUTANEOUS.....	49			PERFOROMIST.....	56
ORENITRAM.....	57			PERIDEX.....	25
ORFADIN.....	40			perindopril erbumine.....	22
				perigard.....	25

P



permethrin external	17	PLENVU	39	prednisolone sodium phosphate oral solution 20 mg/5ml.....	46
perphenazine oral	13	PLEXION CLEANSER	29	prednisolone sodium phosphate oral tablet dispersible	46
PERTZYE	40	PLEXION EXTERNAL CREAM ...	29	prednisone oral	46
PFIZER COVID-19 VAC- TRIS 5-11Y.....	50	PNEUMOVAX 23	50	pregabalin oral capsule.....	25
PFIZER COVID-19 VAC-TRIS 6M-4Y	50	pnv-dha	37	PREGNYL.....	51
phenazo oral tablet 200 mg.....	40	podofilox external solution	29	PREMARIN ORAL	45
phenazopyridine hcl oral tablet 100 mg, 200 mg	40	POKONZA.....	37	PREMARIN VAGINAL	45
phenobarbital oral.....	11	POLY-VI-FLOR.....	37	PREMIUM BLOOD GLUCOSE TEST.....	33
phenytek.....	11	POLYCIN	53	premium lidocaine.....	8
phenytoin infatabs	11	polymyxin b-trimethoprim.....	53	PREMPHASE	45
phenytoin oral tablet chewable..	11	POMALYST	16	PREMPRO	45
phenytoin sodium extended	11	portia-28.....	45	PRENA1 PEARL.....	37
PHEXXI.....	45	posaconazole oral tablet delayed release	14	prenatal 19 oral tablet 29-1 mg ..	37
philith	45	potassium chloride crys er	37	prenatal 19 oral tablet chewable.	37
PHOSPHA 250 NEUTRAL	37	potassium chloride er	37	prenatal oral tablet 27-1 mg.....	37
phospho-trin 250 neutral	37	potassium chloride oral	37	prenatal plus	37
phosphorous.....	37	potassium citrate er.....	37	prenatal plus vitamin/mineral....	37
PIFELTRO	18	potassium citrate-citric acid	37	PRENATE DHA.....	37
pilocarpine hcl ophthalmic.....	53	PRADAXA ORAL CAPSULE.....	10	PRENATE ENHANCE.....	37
pilocarpine hcl oral	25	PRALUENT	22	PRENATE ESSENTIAL.....	37
pimecrolimus	29	pramipexole dihydrochloride	17	PRENATE MINI.....	37
pimozide	18	pramipexole dihydrochloride er .	17	PRENATE PIXIE	37
pimtrex.....	45	PRAMOSONE EXTERNAL CREAM	29	PRENATE RESTORE	37
pindolol	22	prasugrel hcl.....	17	PRENATOL-M.....	37
pioglitazone hcl.....	35	pravastatin sodium	22	PRENATRIX	37
pioglitazone hcl-metformin hcl..	35	prazosin hcl oral	22	PRENATRYL	37
PIP BLOOD GLUCOSE TEST STRIP.....	33	PRECISION XTRA.....	33	PREVACID.....	39
PIQRAY.....	16	PRECISION XTRA BLOOD GLUCOSE	33	PREVACID SOLUTAB.....	39
pirfenidone oral tablet 267 mg, 801 mg	57	PRECOSE ORAL TABLET 100 MG, 25 MG, 50 MG	35	prevalite.....	22
pirfenidone oral tablet 534 mg ..	57	PRED FORTE	53	PREVIDENT 5000 BOOSTER PLUS.....	26
piroxicam oral.....	8	PRED MILD.....	53	PREVIDENT 5000 DRY MOUTH ..	26
pitavastatin calcium.....	22	prednisolone acetate ophthalmic.....	53	PREVIDENT 5000 ENAMEL PROTECT.....	37
PLAQUENIL.....	17	PREDNISOLONE ACETATE P-F...	53	PREVIDENT 5000 KIDS	26
PLAVIX.....	17	prednisolone oral solution	46	PREVIDENT 5000 ORTHO DEFENSE.....	26
PLEGRIDY INTRAMUSCULAR....	25	prednisolone sodium phosphate oral solution 10 mg/5ml, 25 mg/5ml, 6.7 (5 base) mg/5ml.	46	PREVIDENT 5000 PLUS	26
PLEGRIDY STARTER PACK.....	25	prednisolone sodium phosphate oral solution 15 mg/5ml	46	PREVIDENT 5000 SENSITIVE ...	37
PLEGRIDY SUBCUTANEOUS	25			PREVIDENT DENTAL	26



PREVIDENT MOUTH/THROAT ...37	PROSCAR 41	QUVIVIQ.....58
previfem oral tablet 0.25-35 mg-mcg.....45	PROTONIX ORAL TABLET DELAYED RELEASE.....39	QVAR REDIHALER56
PREVNAR 2050	protriptyline hcl..... 13	
PREVYMIS ORAL 18	PROVENTIL HFA 55, 56	R
PREZCOBIX 18	PROVERA.....42, 45	rabeprazole sodium oral tablet delayed release39
PREZISTA ORAL TABLET 150 MG, 75 MG18	PROVIGIL58	RADICAVA ORS25
PREZISTA ORAL TABLET 600 MG, 800 MG 18	PROZAC 13	RADICAVA ORS STARTER KIT25
primidone oral tablet 125 mg 11	pseudoephedrine- bromphen-dm55	raloxifene hcl 51
primidone oral tablet 250 mg, 50 mg 11	PTS PANELS EGLU TEST.....33	ramelteon.....58
PRISTIQ13	PULMICORT FLEXHALER56	ramipril 23
probenecid.....14	PULMICORT SUSPENSION.....56	ranolazine er23
PROCARDIA XL22	PULMOSAL.....55	RAPAFLO.....41
PROCHAMBER VHC.....56	PULMOZYME.....57	RAPAMUNE ORAL SOLUTION ...49
prochlorperazine 13	PYLERA.....39	RAPAMUNE ORAL TABLET49
prochlorperazine maleate oral... 13	PYRIDIUM.....40	rasagiline mesylate oral 17
PROCORT 51	pyridostigmine bromide er..... 15	RASUVO.....49
procto-med hc.....51	pyridostigmine bromide oral tablet 30 mg 15	RAZADYNE ER ORAL CAPSULE EXTENDED RELEASE 24 HOUR 16 MG, 24 MG, 8 MG 12
PROCTOCORT 51	pyridostigmine bromide oral tablet 60 mg 15	REBIF.....25
PROCTOFOAM HC.....51		REBIF TITRATION PACK.....25
PROCTOSOL HC 51	Q	reclipsen45
PROCTOZONE-HC.....51	QELBREE.....24	RECOMBINATE36
progesterone intramuscular45	QNASL56	RECOMBIVAX HB50
progesterone oral45	QNASL CHILDRENS56	RECTIV.....23
PROGRAF ORAL CAPSULE49	QUARTETTE ORAL TABLET 42-21-21-7 DAYS.....45	REGLAN.....14
PROLATE ORAL TABLET..... 8	QUDEXY XR..... 11	RELAFEN DS 8
PROLENSA53	QUESTRAN.....22	RELEXXII.....24
PROMACTA ORAL TABLET36	QUESTRAN LIGHT.....22	RELION TRUE MET AIR GLUC METER.....33
promethazine hcl oral 13	quetiapine fumarate 18	RELION TRUE METRIX TEST STRIPS33
promethazine hcl rectal..... 13	quetiapine fumarate er..... 18	RELION ULTIMA GLUCOSE SYSTEM33
promethazine-codeine.....55	QUFLORA PEDIATRIC.....38	RELION ULTIMA TEST.....33
promethazine-dm55	QUILLICHEW ER.....24	RELPAK.....15
PROMETHEGAN14	QUILLIVANT XR24	RELTONE.....40
PROMETRIUM45	quinapril hcl.....22	RELYVRIO.....25
propafenone hcl22	QUINTET AC BLOOD GLUCOSE TEST.....33	REMERON.....13
propafenone hcl er22	QUINTET BLOOD GLUCOSE TEST.....33	REMERON SOLTAB ORAL TABLET DISPERSIBLE 15 MG, 30 MG 13
propranolol hcl er.....22	QULIPTA 15	REMODULIN57
propranolol hcl oral.....22		
propylthiouracil oral47		



REVELA ORAL TABLET	40	RITALIN	24	sapropterin dihydrochloride oral packet.....	40
repaglinide	35	RITALIN LA	24	SAVELLA	25
REPATHA	23	ritonavir	18	saxagliptin hcl	35
REPATHA PUSHTRONEX SYSTEM	23	rivastigmine.....	12	saxagliptin-metformin er	35
REPATHA SURECLICK	23	rivastigmine tartrate	12	scopolamine	14
RESTASIS.....	54	rivelsa	45	SE-NATAL 19	38
RESTASIS MULTIDOSE	54	rizatriptan benzoate.....	15	SEASONIQUE ORAL TABLET 0.15-0.03 & 0.01 MG.....	45
RESTORIL.....	58	ROBINUL.....	40	selenium sulfide external lotion ..	29
RETACRIT INJECTION SOLUTION 10000 UNIT/ML, 2000 UNIT/ML, 3000 UNIT/ML, 4000 UNIT/ML, 40000 UNIT/ML.....	36	ROBINUL-FORTE.....	40	SEMGLEE (YFGN) SUBCUTANEOUS SOLUTION PEN-INJECTOR.....	34
RETACRIT INJECTION SOLUTION 20000 UNIT/ML	36	ROCALTROL	52	SENSIPAR	52
RETEVMO ORAL CAPSULE 40 MG	16	ROCKLATAN	53	SEREVENT DISKUS	57
RETEVMO ORAL CAPSULE 80 MG	16	roflumilast	56	SEROQUEL.....	18
RETIN-A.....	29	ropinirole hcl.....	17	SEROQUEL XR	18
RETIN-A MICRO GEL 0.04 %, 0.1 %.....	29	ropinirole hcl er.....	17	SERTRALINE HCL ORAL CAPSULE.....	13
RETIN-A MICRO PUMP	29	rosadan external cream 0.75 % ..	29	sertraline hcl oral concentrate...	13
REVATIO ORAL TABLET	57	rosadan external gel 0.75 %	29	sertraline hcl oral tablet.....	13
REVLIMID.....	16	rosuvastatin calcium oral	23	setlakin	45
REXTOVY.....	9	ROWASA.....	51	sevelamer carbonate oral tablet .	41
REXULTI.....	18	roweepra	12	sevelamer hcl	38
REYVOW	15	ROXICODONE	8	SEYSARA.....	10
RHOFADE	29	ROZEREM	58	sf	26, 36, 37, 39
RHOPRESSA.....	53	ROZLYTREK ORAL CAPSULE.....	16	sf 5000 plus.....	26
rifabutin.....	15	ROZLYTREK ORAL PACKET.....	16	SFROWASA.....	51
rifampin oral	15	RUCONEST.....	49	sharobel.....	45
RIGHTEST GT333 GLUCOSE TEST.....	33	rufinamide oral suspension	12	SHARPS CONTAINER.....	33
riluzole	25	rufinamide oral tablet	12	SHINGRIX.....	50
RINVOQ	49	RUKOBIA.....	18	sildenafil citrate oral tablet 100 mg, 25 mg, 50 mg	36
RIOMET	35	RYBELSUS.....	35	sildenafil citrate oral tablet 20 mg	57
risedronate sodium oral tablet 150 mg, 35 mg	52	RYTARY.....	17	SILENOR.....	58
risedronate sodium oral tablet 30 mg, 5 mg.....	52	RYTHMOL SR ORAL CAPSULE EXTENDED RELEASE 12 HOUR 225 MG, 325 MG, 425 MG.....	23	silodosin.....	41
RISPERDAL	18	ryvent	55	SILVADENE.....	10
risperidone.....	18			silver sulfadiazine external	10
				SIMBRINZA	53
				SIMLANDI (1 PEN).....	49
				SIMLANDI (2 PEN).....	49
				simliya.....	45

S



simpesse	45	SOOLANTRA	29	STROMEKTOL	17
SIMPONI	49	sotalol hcl (af)	23	SUBOXONE	9
simvastatin oral tablet 10 mg, 20 mg, 40 mg, 5 mg	23	sotalol hcl oral	23	subvenite	12
simvastatin oral tablet 80 mg	23	SOTYKTU	49	SUCRAID	40
SINEMET	17	SOVUNA	17	sucalfate oral suspension	39
SINGULAIR ORAL PACKET	57	SPIKEVAX INTRAMUSCULAR SUSPENSION	50	sucalfate oral tablet	39
SINGULAIR ORAL TABLET	57	spinosad	29	SUFLAVE	40
SINGULAIR ORAL TABLET CHEWABLE	57	SPIRIVA HANDIHALER	57	SULAR	23
sirolimus oral solution	49	SPIRIVA RESPIMAT	57	SULCONAZOLE NITRATE EXTERNAL CREAM	14
sirolimus oral tablet	49	spironolactone oral tablet	23	sulfacetamide sod-sulfur wash external liquid 9-4 %	29
SITAVIG	18	spironolactone-hctz	23	sulfacetamide sod-sulfur wash external liquid 9-4.5 %	29
SKYRIZI PEN	49	SPORANOX ORAL CAPSULE	14	sulfacetamide sodium (acne)	29
SKYRIZI SUBCUTANEOUS	49	SPORANOX PULSEPAK ORAL CAPSULE 100 MG	14	sulfacetamide sodium external	29
SKYTROFA	46	SPRAVATO (56 MG DOSE)	13	sulfacetamide sodium ophthalmic solution	53
SLYND	45	SPRAVATO (84 MG DOSE)	13	sulfacetamide sodium-sulfur external cream 10-2 %, 10-5 %	29
SOAANZ	23	sprintec 28	45	sulfacetamide sodium-sulfur external cream 9.8-4.8 %	29
sod citrate-citric acid oral solution 500-334 mg/5ml	38	SPRYCEL	16	sulfacetamide sodium-sulfur external liquid 10-2 %, 9-4.5 %, 9.8-4.8 %	29
sodium chloride inhalation	55	SPS	38	sulfacetamide sodium-sulfur external liquid 10-5 %, 9-4 %	29
sodium fluoride 5000 enamel dental gel 1.1-5 %	38	sronyx	45	sulfacetamide sodium-sulfur external suspension 10-5 %	29
sodium fluoride 5000 plus	26	ssd	10	sulfacetamide sodium-sulfur external suspension 8-4 %	29
sodium fluoride 5000 ppm	26	sss 10-5 external cream	29	sulfacetamide-prednisolone	53
sodium fluoride 5000 ppm dental gel 1.1 %	26	STALEVO 100 ORAL TABLET 25-100-200 MG	17	SULFACLEANSE 8/4	29
sodium fluoride 5000 sensitive dental gel 1.1-5 %	38	STALEVO 125 ORAL TABLET 31.25-125-200 MG	17	sulfamethoxazole-trimethoprim oral	10
sodium fluoride dental	26	STALEVO 150	17	sulfasalazine oral	51
sodium fluoride mouth/throat solution 0.2 %	38	STALEVO 200 ORAL TABLET 50-200-200 MG	17	sulfatrim pediatric	10
sodium fluoride oral solution	38	STALEVO 50 ORAL TABLET 12.5-50-200 MG	17	sulindac oral	8
sodium fluoride oral tablet chewable	38	STALEVO 75 ORAL TABLET 18.75-75-200 MG	17	SUMADAN WASH	29
SODIUM OXYBATE SOLUTION 500 MG/ML ORAL	58	STEGLATRO	35	sumatriptan nasal	15
sodium sulfacetamide wash	29	STELARA SUBCUTANEOUS	49	sumatriptan succinate oral	15
SOFOSBUVIR-VELPATASVIR	18	STENDRA	36	sumatriptan succinate refill subcutaneous solution cartridge	15
solifenacin succinate	41	STIOLTO RESPIMAT	57		
SOLIQUA	35	STIVARGA	16		
SOMA	58	STRATTERA	24		
SOMATULINE DEPOT	46	STRENSIQ	40		
		STRIBILD	18		
		STRIVERDI RESPIMAT	57		

sumatriptan succinate subcutaneous.....	15
sumatriptan-naproxen sodium ..	15
SUNOSI	58
SUPREP BOWEL PREP KIT.....	40
SUTAB	40
syeda	45
SYMBICORT.....	57
SYMBYAX.....	13
SYMFI	18
SYMFI LO	18
SYMLINPEN 120	35
SYMLINPEN 60	35
SYMPAZAN.....	12
SYMPROIC	40
SYMTUZA	18
SYNALAR.....	29
SYNALAR EXTERNAL SOLUTION 0.01 %.....	29
SYNJARDY	35
SYNJARDY XR.....	35
SYNTHROID.....	47

T

TABRECTA.....	16
TACLONEX EXTERNAL OINTMENT 0.005-0.064 %.....	29
TACLONEX EXTERNAL SUSPENSION	29
tacrolimus external.....	29
tacrolimus oral.....	49
tadalafil (pah).....	57
tadalafil oral.....	36
TADLIQ.....	57
TAFINLAR ORAL CAPSULE.....	16
tafluprost (pf).....	53
TAGRISSO.....	16
TAKHZYRO	49
TALTZ.....	49
TAMIFLU ORAL CAPSULE.....	19
TAMIFLU ORAL SUSPENSION RECONSTITUTED.....	19

tamoxifen citrate oral tablet 10 mg.....	16
tamoxifen citrate oral tablet 20 mg	16
tamsulosin hcl	41
TAPERDEX 12-DAY	46
TAPERDEX 6-DAY ORAL TABLET THERAPY PACK 1.5 MG	46
TAPERDEX 6-DAY ORAL TABLET THERAPY PACK 1.5 MG (21)	46
TAPERDEX 7-DAY	46
TARGADOX.....	10
tarina 24 fe	45
tarina fe 1/20 eq	45
tarina fe 1/20 oral tablet 1-20 mg-mcg.....	45
TARON-C DHA	38
TASIGNA	16
TAVALISSE	36
taysofy	45
TAYTULLA.....	45
tazarotene external cream.....	29
TAZAROTENE EXTERNAL FOAM.....	29
TAZORAC EXTERNAL CREAM.....	29
TECFIDERA ORAL CAPSULE DELAYED RELEASE.....	25
TECHLITE INSULIN SYRINGES ..	33
TECHLITE PEN NEEDLES.....	33
TEGLUTIK.....	25
TEGRETOL ORAL TABLET	12
TEGRETOL-XR.....	12
TEGSEDI	40
TEKTURNA	23
telmisartan.....	23
telmisartan-hctz.....	23
temazepam	58
TEMODAR ORAL CAPSULE 250 MG	16
TEMOVATE EXTERNAL CREAM 0.05 %	29
temozolomide	16
TEMPO REFILL.....	33
TEMPO WELCOME.....	33
TENCON	8

TENIVAC	50
tenofovir disoproxil fumarate....	19
TENORETIC 100	23
TENORETIC 50	23
TENORMIN.....	23
terazosin hcl	41
terbinafine hcl oral	14
terconazole	14
teriflunomide	25
teriparatide	52
teriparatide (recombinant) subcutaneous solution pen- injector 600 mcg/2.4ml.....	52
TERIPARATIDE (RECOMBINANT) SUBCUTANEOUS SOLUTION PEN-INJECTOR 620 MCG/ 2.48ML	52
TESTIM.....	46
TESTOSTERONE CYPIONATE INJECTION	46
testosterone cypionate intramuscular.....	46
testosterone enanthate intramuscular.....	46
testosterone gel 20.25 mg/act (1.62%) transdermal	47
testosterone transdermal gel 10 mg/act (2%), 12.5 mg/act (1%), 20.25 mg/1.25gm (1.62%), 25 mg/2.5gm (1%), 40.5 mg/2.5gm (1.62%), 50 mg/5gm (1%).....	47
testosterone transdermal gel 1.62 %.....	47
testosterone transdermal solution	47
tetracycline hcl oral capsule	10
TEZSPIRE SUBCUTANEOUS SOLUTION AUTO-INJECTOR	57
THALITONE.....	23
theophylline er.....	57
THIOLA.....	41
THIOLA EC.....	41
THRIVITE RX.....	38
THYQUIDITY	47



thyroid oral.....	47	tolterodine tartrate er.....	41	TREZIX	8
tiadylt er.....	23	TOPAMAX	12	tri-estarylla	45
TIAZAC.....	23	TOPAMAX SPRINKLE	12	tri-legest fe	45
TIKOSYN	23	TOPICORT EXTERNAL CREAM...	29	tri-linyah.....	45
tilia fe.....	45	TOPICORT EXTERNAL		tri-lo-estarylla	45
timolol maleate (once-daily)	53	OINTMENT.....	29	tri-lo-marzia	45
timolol maleate ocudose.....	53	topiramate er	12	tri-lo-mili	45
timolol maleate ophthalmic.....	53	topiramate oral	12	tri-lo-sprintec.....	45
timolol maleate pf.....	53	TOPROL XL.....	23	tri-mili	45
TIMOPTIC OCUDOSE	53	torsemide.....	23	tri-nymyo.....	45
TIMOPTIC OPHTHALMIC		TOSYMRA	15	tri-sprintec.....	45
SOLUTION 0.25 %, 0.5 %.....	53	TOUJEO MAX SOLOSTAR	34	tri-vite/fluoride	38
TIMOPTIC-XE OPHTHALMIC		TOUJEO SOLOSTAR	34	tri-vylibra.....	45
GEL FORMING SOLUTION		TOVIAZ.....	41	tri-vylibra lo	45
0.25 %, 0.5 %.....	53	TRACLEER 62.5 MG, 125 MG	57	triamcinolone acetone external cream 0.025 %, 0.1 %....	29
tinidazole oral.....	10	TRADJENTA.....	35	triamcinolone acetone external cream 0.5 %	29
tiopronin oral tablet delayed release	41	tramadol hcl (er biphasic) oral tablet extended release 24 hour..	8	triamcinolone acetone external lotion	29
tiotropium bromide monohydrate	57	tramadol hcl er.....	8	triamcinolone acetone external lotion	29
TIROSINT	47	tramadol hcl oral tablet 100 mg, 25 mg.....	8	triamcinolone acetone external ointment 0.025 %, 0.1 %, 0.5 %.....	29
TIROSINT-SOL.....	47	tramadol hcl oral tablet 50 mg....	8	triamcinolone acetone external ointment 0.05 %.....	29
TIVICAY	19	tramadol-acetaminophen	8	triamcinolone acetone mouth/throat.....	26
tizanidine hcl oral capsule.....	58	trandolapril	23	triamcinolone in absorbbase	29
tizanidine hcl oral tablet.....	58	tranexamic acid oral.....	36	triamterene oral	23
TLANDO.....	47	TRANSDERM-SCOP.....	14	triamterene-hctz	23
TOBI NEBULIZER	57	tranylcypromine sulfate.....	13	TRIANEX EXTERNAL OINTMENT 0.05 %	29
TOBI PODHALER.....	57	TRAVATAN Z.....	53	triazolam.....	19
TOBRADEX OPHTHALMIC		travoprost (bak free)	53	TRIBENZOR	23
OINTMENT.....	53	trazodone hcl oral	13	TRICARE	38
TOBRADEX OPHTHALMIC		TRELEGY ELLIPTA.....	57	TRICOR.....	23
SUSPENSION 0.3-0.1 %.....	53	TREMFYA.....	49	TRIDACAINE II.....	8
TOBRADEX ST	53	treprostinil	57	triderm	29
tobramycin inhalation nebulization solution 300 mg/4ml.....	57	TRESIBA FLEXTOUCH.....	34	TRIDESILON EXTERNAL CREAM 0.05 %	29
tobramycin nebulization solution 300 mg/5ml inhalation ..	57	tretinoin external cream	29	trihexyphenidyl hcl oral tablet ...	17
tobramycin ophthalmic	53	tretinoin external gel 0.01 %, 0.025 %.....	29	TRIJARDY XR.....	35
tobramycin-dexamethasone.....	53	tretinoin external gel 0.05 %	29		
TOLAK.....	29	tretinoin microsphere	29		
TOLSURA.....	14	tretinoin microsphere pump.....	29		
tolterodine tartrate.....	41	TREXALL.....	49		
		TREXIMET.....	15		

verapamil hcl er oral capsule extended release 24 hour 100 mg, 200 mg, 300 mg.....	23
verapamil hcl er oral capsule extended release 24 hour 120 mg, 180 mg, 240 mg, 360 mg.....	23
verapamil hcl er oral tablet extended release	23
verapamil hcl oral	23
VERELAN.....	23
VERELAN PM.....	23
VERKAZIA.....	54
VERQUVO	23
VERZENIO.....	16
VESICARE	41
vestura	45
VEVYE.....	54
VFEND ORAL TABLET 200 MG ...	14
VFEND ORAL TABLET 50 MG ...	14
VIAGRA	36
VIBERZI	40
VIBRAMYCIN	10
vienna	45
vigabatrin oral packet	12
vigadrone oral packet	12
VIGAMOX	53
vigpoder	12
VIIBRYD	13
VIIBRYD STARTER PACK ORAL KIT 10 & 20 MG.....	13
vilazodone hcl.....	13
VIMPAT ORAL.....	12
VINATE ONE	38
viorele	45
VIREAD ORAL TABLET 150 MG, 200 MG, 250 MG.....	19
VIREAD ORAL TABLET 300 MG ..	19
virt-c dha oral capsule 53.5-38-1 mg.....	38
virt-pn dha oral capsule 27-0.6-0.4-300 mg	38
VISTARIL.....	19

VITAFOL FE+.....	38
VITAFOL GUMMIES	38
VITAFOL ULTRA	38
VITAFOL-OB	38
VITAMEDMD ONE RX/ QUATREFOLIC.....	38
vitamin d (ergocalciferol) oral capsule 1.25 mg (50000 ut), 50000 unit.....	38
vitamins acd-fluoride.....	38
VITAPEARL.....	38
VITATHELY WITH GINGER	38
VITRAKVI	16
VIVAGUARD INO GLUCOSE METER KIT	33
VIVAGUARD INO TEST STRIPS...	33
VIVELLE-DOT	42, 45
VIVJOA.....	14
VOGELXO	47
VOGELXO PUMP.....	47
volnea	45
VOQUEZNA	39
VOQUEZNA DUAL PAK	39
VOQUEZNA TRIPLE PAK.....	39
voriconazole oral tablet	14
VORTEX HOLD CHMBR/MASK/ CHILD	57
VORTEX HOLD CHMBR/MASK/ TODDLER	57
VORTEX VALVED HOLDING CHAMBER.....	57
VOSEVI.....	19
VOTRIENT.....	16
VRAYLAR.....	18
VTAMA	30
VUMERITY	25
vyfemla	45
VYLEESI.....	36
vylibra	45
VYNDAMAX.....	40
VYTORIN.....	23
VYVANSE.....	24
VYZULTA	53

W

WAINUA.....	13
WAKIX.....	58
warfarin sodium oral.....	11
WELCHOL ORAL TABLET.....	23
WELLBUTRIN SR.....	13
WELLBUTRIN XL.....	13
wera	45
wes-phos 250 neutral.....	38
WESCAP-C DHA	38
WESCAP-PN DHA.....	38
WESTAB PLUS.....	38
WILATE.....	36
WINLEVI	30
wixela inhub.....	57
wymzya fe.....	45

X

XACIATO	10
XALATAN.....	54
XANAX	19
XANAX XR.....	19
XARELTO.....	11
XARELTO STARTER PACK.....	11
XCOPRI.....	12
XDEMVY.....	53
XELJANZ.....	49
XELJANZ XR ORAL TABLET EXTENDED RELEASE 24 HOUR 11 MG.....	49
XELJANZ XR ORAL TABLET EXTENDED RELEASE 24 HOUR 22 MG	49
XELODA.....	16
XENLETA ORAL TABLET 600 MG	10
XHANCE.....	55
XIFAXAN	10
XIGDUO XR	35
XIIDRA	54
XIMINO ORAL CAPSULE EXTENDED RELEASE 24 HOUR 135 MG, 45 MG, 90 MG	10

XOFLUZA (40 MG DOSE)	19
XOFLUZA (80 MG DOSE)	19
XOLAIR SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	50
XOPENEX CONCENTRATE INHALATION NEBULIZATION SOLUTION 1.25 MG/0.5ML	57
XOPENEX HFA	57
XOPENEX INHALATION NEBULIZATION SOLUTION 0.31 MG/3ML, 0.63 MG/3ML, 1.25 MG/3ML	57
XTAMPZA ER	8
XTANDI	16
xulane	45
XYOSTED	47
XYREM	58
XYWAV	58

Y

YASMIN 28	45
YAZ	45
YUFLYMA (1 PEN) SUBCUTANEOUS AUTO- INJECTOR KIT 40 MG/0.4ML	50
YUFLYMA (1 PEN) SUBCUTANEOUS AUTO- INJECTOR KIT 80 MG/0.8ML	50
YUFLYMA (2 PEN)	50
YUFLYMA (2 SYRINGE)	50
YUFLYMA-CD/UC/HS STARTER ..	50
YUPELRI	57
YUSIMRY	50
yuvaferm	45

Z

zafemy	45
zafirlukast	57
zaleplon	58
ZANAFLEX	58
ZARONTIN	12
ZARXIO	36

ZATEAN-PN DHA ORAL CAPSULE 27-0.6-0.4-300 MG	38
ZAVZPRET	15
ZEGALOGUE SUBCUTANEOUS SOLUTION AUTO-INJECTOR	35
ZEJULA ORAL CAPSULE 100 MG	16
ZELBORAF	16
ZEMBRACE SYMTOUCH	15
ZEMPLAR ORAL	52
zenatane	30
ZENPEP ORAL CAPSULE DELAYED RELEASE PARTICLES 10000-32000 UNIT, 15000- 47000 UNIT, 20000-63000 UNIT, 25000-79000 UNIT, 3000-10000 UNIT, 40000- 126000 UNIT, 5000-24000 UNIT	40
ZENPEP ORAL CAPSULE DELAYED RELEASE PARTICLES 60000-189600 UNIT	40
ZENZEDI	24
ZEPOSIA	25
ZEPOSIA 7-DAY STARTER PACK ..	25
ZEPOSIA STARTER KIT	25
ZESTORETIC	23
ZESTRIL	23
ZETIA	23
ZETONNA	55
ZIAC ORAL TABLET 10-6.25 MG, 2.5-6.25 MG	23
ZIAC ORAL TABLET 5-6.25 MG ..	23
ZIANA	30
ZILXI	30
ZIMHI	9
ZIOPTAN	54
ziprasidone hcl	18
ZIRGAN	19
ZITHROMAX ORAL	10
ZITHROMAX TRI-PAK	10
ZITHROMAX Z-PAK	10
ZOCOR	23
zolmitriptan nasal	15

zolmitriptan oral tablet	15
zolmitriptan oral tablet dispersible	15
ZOLOFT	13
zolpidem tartrate er	58
zolpidem tartrate oral tablet	58
ZOMIG NASAL	15
ZONEGRAN	12
zonisamide oral	12
ZORTRESS	50
ZORYVE	30
zovia 1/35 (28)	45
ZOVIRAX EXTERNAL	19
ZOVIRAX ORAL SUSPENSION 200 MG/5ML	19
ZTLIDO	8
ZUBSOLV	9
zumandimine	45
ZURZUVAE	13
ZYCLARA	30
ZYCLARA PUMP	30
ZYLET	53
ZYLOPRIM ORAL TABLET 100 MG, 300 MG	14
ZYMAXID OPHTHALMIC SOLUTION 0.5 %	53
ZYPREXA ORAL	18
ZYPREXA ZYDIS	18
ZYTIGA	16
ZYVOX ORAL TABLET	10

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Room 509F, HHH Building
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ATENCIÓN: Si habla **español (Spanish)**, hay servicios de asistencia de idiomas, sin cargo, a su disposición. Llame al número de teléfono gratuito que aparece en su tarjeta de identificación.

請注意：如果您說中文 (**Chinese**)，我們免費為您提供語言協助服務。請撥打會員卡所列的免付費會員電話號碼。

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UWAGA: Jeżeli mówisz po **polsku (Polish)**, udostępniliśmy darmowe usługi tłumacza. Prosimy zadzwonić pod bezpłatny numer telefonu podany na karcie identyfikacyjnej.

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ACHTUNG: Falls Sie **Deutsch (German)** sprechen, stehen Ihnen kostenlos sprachliche Hilfsdienstleistungen zur Verfügung. Bitte rufen Sie die gebührenfreie Rufnummer auf der Rückseite Ihres Mitgliedsausweises an.

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توجه: اگر زبان شما فارسی (**Farsi**) است، خدمات امداد زبانی به طور رایگان در اختیار شما می باشد. لطفاً با شماره تلفن رایگانی که روی کارت شناسایی شما قید شده تماس بگیرید.

ध्यान दें: यदि आप **हिंदी (Hindi)** बोलते हैं, आपको भाषा सहायता सेवाएं, निःशुल्क उपलब्ध हैं। कृपया अपने पहचान पत्र पर सूचीबद्ध टोल-फ्री फोन नंबर पर कॉल करें।

CEEB TOOM: Yog koj hais Lus **Hmoob (Hmong)**, muaj kev pab txhais lus pub dawb rau koj. Thov hu rau tus xovtooj hu deb dawb uas teev muaj nyob rau ntawm koj daim yuaj cim qhia tus kheej.

ចំណាប់អារម្មណ៍: បើសិនអ្នកនិយាយ**កម្ពុជាខ្មែរ (Khmer)**សេវាជំនួយភាសាដោយឥតគិតថ្លៃ គឺមានសំរាប់អ្នក។ សូមទូរស័ព្ទទៅលេខឥតគិតថ្លៃ ដែលមាននៅលើអត្តសញ្ញាណប័ណ្ណរបស់អ្នក។

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OGOW: Haddii aad ku hadasho **Soomaali (Somali)**, adeegyada taageerada luqadda, oo bilaash ah, ayaad heli kartaa. Fadlan wac lambarka telefonka khadka bilaashka ee ku yaalla kaarkaaga aqoonsiga.

