



# Your 2023 Prescription Drug List

## Essential 4-Tier

Effective January 1, 2023



**United  
Healthcare**

This Prescription Drug List (PDL) is accurate as of January 1, 2023 and is subject to change after this date. This PDL applies to members of our UnitedHealthcare, All Savers, Golden Rule, Neighborhood Health Plan and River Valley medical plans with a pharmacy benefit subject to the Essential 4-Tier PDL. Your estimated coverage and copayment/coinsurance may vary based on the benefit plan you choose and the effective date of the plan.

# Table of contents

Understanding your Prescription Drug List (PDL) .....	4
Medication tips .....	5
Reading your PDL .....	6
Questions .....	7
Analgesics	
Drugs for Pain .....	8
Drugs for Pain and Inflammation .....	9
Anti-Addiction / Substance Abuse Treatment Agents .....	10
Antibacterials	
Drugs for Infections .....	10
Anticoagulants	
Drugs to Treat or Prevent Blood Clots .....	11
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 .....	13
Antigout Agents	
Drugs for Gout .....	13
Antimigraine Agents	
Drugs for Migraines .....	14
Antineoplastics	
Drugs for Cancer .....	14
Antiparasitics	
Drugs for Parasitic Infections .....	14
Antiparkinson Agents	
Drugs for Parkinson’s Disease .....	14
Antiplatelets	
Drugs for Heart Attack and Stroke Prevention .....	15
Antipsychotics	
Drugs for Mood Disorders .....	15
Antivirals	
Drugs for Viral Infections .....	15
Anxiolytics	
Drugs for Anxiety .....	16
Bipolar Agents	
Drugs for Mood Disorders .....	16
Cardiovascular Agents	
Drugs for Heart and Circulation Conditions .....	16
Central Nervous System Agents	
Drugs for Attention Deficit Disorder .....	19
Drugs for Multiple Sclerosis .....	19
Miscellaneous .....	20
Dental and Oral Agents	
Drugs for Mouth and Throat Conditions .....	20



Dermatological Agents	
Drugs for Skin Conditions . . . . .	20
Diabetes	
Glucose Monitoring and Supplies . . . . .	23
Insulin . . . . .	25
Non-Insulin Agents . . . . .	26
Drugs for Blood Disorders . . . . .	27
Drugs for Sexual Dysfunction. . . . .	27
Electrolytes / Vitamins . . . . .	27
Gastrointestinal Agents	
Drugs for Acid Reflux and Ulcer. . . . .	28
Drugs for Bowel, Intestine and Stomach Conditions . . . . .	28
Genetic or Enzyme Disorder	
Drugs for Replacement, Modification, Treatment . . . . .	29
Genitourinary Agents	
Drugs for Bladder, Genital and Kidney Conditions. . . . .	29
Drugs for Prostate Conditions . . . . .	29
Hormonal Agents	
Hormone Replacement and Birth Control . . . . .	29
Oral Steroids . . . . .	32
Other . . . . .	33
Testosterone Replacement. . . . .	33
Thyroid . . . . .	33
Immunological Agents	
Drugs for Immune System Stimulation or Suppression. . . . .	33
Infertility Agents. . . . .	35
Inflammatory Bowel Disease Agents. . . . .	35
Metabolic Bone Disease Agents	
Drugs for Osteoporosis. . . . .	35
Ophthalmic Agents	
Drugs for Eye Allergy, Infection and Inflammation . . . . .	35
Drugs for Glaucoma . . . . .	36
Drugs for Miscellaneous Eye Conditions . . . . .	37
Otic Agents	
Drugs for Ear Conditions. . . . .	37
Respiratory	
Drugs for Anaphylaxis . . . . .	37
Respiratory Tract / Pulmonary Agents	
Drugs for Allergies, Cough, Cold . . . . .	37
Drugs for Asthma and COPD . . . . .	37
Drugs for Cystic Fibrosis. . . . .	39
Drugs for Pulmonary Hypertension . . . . .	39
Skeletal Muscle Relaxants	
Drugs for Muscle Pain and Spasm. . . . .	39
Sleep Disorder Agents . . . . .	39
Index. . . . .	40



# Understanding your Prescription Drug List (PDL)

## What is a PDL?

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

## How do I use my PDL?

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

## What are tiers?

Tiers are the different cost levels you pay for a medication. Each tier is assigned a cost, set by your employer or benefit plan. This is how much you will pay when you fill a prescription. See page 6 for more information.

## When does the PDL change?

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

## Why are some medications excluded from coverage?

We review medications based on their total value, including effectiveness and safety, how much they cost, and the availability of alternative medications to treat the same or similar medical conditions. Certain medications may be excluded from coverage or be subject to prior authorization (sometimes referred to as precertification) if similar alternatives are available at a lower cost. Examples include medications that work the same way, but one is much more expensive than the other, or options that are available without a prescription (also referred to as over-the-counter medications). There are also some instances where the same product can be made by 2 or more manufacturers, but greatly vary in cost. In these instances, only the lower-cost product may be covered.

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

## Who decides which medications are covered?

Thousands of medications are already available and more come to the market regularly. Often, several medications are available to treat the same condition. The UnitedHealthcare® Pharmacy and Therapeutics Committee, which includes both internal and external doctors and pharmacists, meets regularly to provide clinical reviews of all medications. Using this information, the PDL Management Committee, which includes senior UnitedHealth Group® doctors and business leaders, meets to evaluate overall health care value. They also set coverage and tier status for all medications.

## About this PDL

Where differences exist between this PDL and your benefit plan documents, the benefit plan documents rule. This PDL is not a complete list of medications, and not all medications listed may be covered by your plan. Please look at the benefit plan documents provided by your employer or health plan to see which medications are covered under your plan.

# Medication tips

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

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

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

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

## What if I am taking a specialty medication?

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

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

## Over-the-counter (OTC) medications

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

# Reading your PDL

The PDL gives you choices so you and your doctor can decide your best course of treatment. In this PDL, brand-name medications are shown in UPPERCASE and generic medications in lowercase.

## Tier information

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

In the chart below, overall value indicates medications' effectiveness and safety, cost and the availability of alternative medications to treat the same or similar medical condition(s).

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

## Drug list information

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

<b>H</b>	<b>Health Care Reform Preventive</b> —This medication is part of a health care reform preventive benefit and may be available at no additional cost to you.
<b>H-PA</b>	<b>Health Care Reform Preventive with Prior Authorization</b> —May be part of health care reform preventive and available at no additional cost to you if prior authorization criteria is met.
<b>NF</b>	<b>Non-Formulary</b> Non-formulary drugs are not covered by your insurance provider, however may be filled at a Tier 4 cost share if certain criteria is met.
<b>PA</b>	<b>Prior Authorization</b> —Requires your doctor to provide information about why you are taking a medication to determine how it may be covered by your plan.
<b>QL</b>	<b>Quantity Limits</b> —Specifies the largest quantity of medication covered per copayment or in a defined period of time.
<b>SP</b>	<b>Specialty Medication</b> —Specialty medications treat complex or rare conditions and may require special storage and handling. You may be required to obtain these medications from a specialty pharmacy.
<b>ST</b>	<b>Step Therapy (referred to as First Start in New Jersey)</b> —Requires prior authorization and may require you to try one or more other medications before the medication you are requesting may be covered.

# Reading your PDL (continued)

## Coverage details

Some drug classes in this PDL have additional/important coverage details. Review this list to see if drug classes that apply to you are noted.

- **Diabetes: continuous glucose monitors, sensors**

Coverage is set by the consumer's prescription drug benefit plan. Please consult plan documents regarding benefit coverage and cost-share. Diabetic self-management items, including continuous glucose monitors, may be covered under the consumer pharmacy and/or medical plan depending on the benefit.

- **Endocrine: growth hormone**

Coverage is set by the consumer's prescription drug benefit plan. Please consult plan documents regarding benefit coverage and cost-share.

- **Infertility**

Coverage is set by the consumer's prescription drug benefit plan. Please consult plan documents regarding benefit coverage and cost-share. This is not a covered benefit for Neighborhood Health Plan.

- **Medications for sexual dysfunction**

Coverage is set by the consumer's prescription drug benefit plan. Please consult plan documents regarding benefit coverage and cost-share.

## Questions

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



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



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

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

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

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



Drug Name	Drug Tier	Requirements & Limits
<b>Analgesics - Drugs for Pain</b>		
acetaminophen-codeine	1	
acetaminophen-codeine #2	1	
acetaminophen-codeine #3	1	
acetaminophen-codeine #4	1	
apap-caff-dihydrocodeine	NF	QL
bac	1	QL
BELBUCA	NF	PA, QL
butalbital-apap-caffeine oral capsule 50-300-40 mg	3	QL
butalbital-apap-caffeine oral capsule 50-325-40 mg	1	QL
butalbital-apap-caffeine oral tablet	1	QL
CONZIP	NF	QL
DILAUDID ORAL	NF	
DUROLANE	NF	
endocet	1	
ESGIC	4	QL
EUFLEXXA	NF	
fentanyl transdermal patch 72 hour 100 mcg/hr, 12 mcg/hr, 25 mcg/hr, 50 mcg/hr, 75 mcg/hr	2	PA, QL
fentanyl transdermal patch 72 hour 37.5 mcg/hr, 62.5 mcg/hr, 87.5 mcg/hr	NF	PA, ST, QL
FIORICET	4	QL
GELSYN-3	NF	
GEN7T EXTERNAL PATCH	NF	
HYALGAN INTRA-ARTICULAR SOLUTION PREFILLED SYRINGE	NF	
hydrocodone bitartrate er oral capsule extended release 12 hour	3	PA, ST, QL
hydrocodone bitartrate er oral tablet er 24 hour abuse-deterrent	3	PA, ST, QL
hydrocodone-acetaminophen oral solution 7.5-325 mg/15ml	2	
hydrocodone-acetaminophen oral tablet 10-300 mg, 5-300 mg, 7.5-300 mg	NF	
hydrocodone-acetaminophen oral tablet 10-325 mg, 5-325 mg, 7.5-325 mg	1	
hydromorphone hcl er	3	PA, ST, QL

Drug Name	Drug Tier	Requirements & Limits
hydromorphone hcl oral	1	
hydromorphone hcl rectal	1	
HYSINGLA ER	NF	PA, ST, QL
lidocaine external ointment 5 %	2	QL
lidocaine external patch 5 %	3	PA, QL
lidocaine-prilocaine external cream	1	
LIDODERM	NF	PA, QL
LORTAB	4	
morphine sulfate (concentrate) oral solution 100 mg/5ml, 20 mg/ml	1	
morphine sulfate er oral capsule extended release 24 hour	3	PA, ST, QL
morphine sulfate er oral tablet extended release	1	PA, QL
morphine sulfate oral	1	
morphine sulfate rectal	1	
MS CONTIN	NF	PA, ST, QL
NALOCET	NF	QL
NUCYNTA	4	QL
NUCYNTA ER	3	PA, QL
OXAYDO	NF	QL
OXYCODONE HCL ER	NF	PA, ST, QL
oxycodone hcl oral capsule	1	
oxycodone hcl oral concentrate 100 mg/5ml	1	
oxycodone hcl oral solution	1	
oxycodone hcl oral tablet 10 mg, 15 mg, 20 mg, 30 mg	1	
oxycodone hcl oral tablet 5 mg	1	QL
OXYCODONE-ACETAMINOPHEN ORAL SOLUTION	NF	
OXYCODONE-ACETAMINOPHEN ORAL TABLET 10-300 MG, 5-300 MG, 7.5-300 MG	NF	
oxycodone-acetaminophen oral tablet 10-325 mg, 2.5-325 mg, 5-325 mg, 7.5-325 mg	1	
OXYCODONE-ACETAMINOPHEN ORAL TABLET 2.5-300 MG	NF	QL
OXYCONTIN	NF	PA, ST, QL
PERCOCET	NF	
premium lidocaine	2	QL

See page 6, 7 for coverage details. Drugs listed as ST are subject to Prior Authorization in CT, NJ and NY (referred to as First Start in New Jersey).





Drug Name	Drug Tier	Requirements & Limits
PROLATE	NF	
QDOLO	NF	PA, QL
ROXICODONE ORAL TABLET 15 MG, 30 MG	NF	
ROXICODONE ORAL TABLET 5 MG	NF	QL
ROXYBOND ORAL TABLET ABUSE-DETERRENT 15 MG, 30 MG	NF	QL
ROXYBOND ORAL TABLET ABUSE-DETERRENT 5 MG	NF	
SUBSYS	NF	PA, QL
SUPARTZ FX	NF	
SYNOJOYNT	NF	
tramadol hcl er (biphasic)	2	(generic for Ryzolt), QL
TRAMADOL HCL ER ORAL CAPSULE EXTENDED RELEASE 24 HOUR	NF	(generic for Conzip), QL
tramadol hcl er oral tablet extended release 24 hour	2	(generic for Ultram ER), QL
TRAMADOL HCL ORAL SOLUTION	NF	PA, QL
tramadol hcl oral tablet 100 mg	NF	
tramadol hcl oral tablet 50 mg	1	
TREZIX	NF	QL
TRILURON	NF	
ULTRAM	NF	
VTOL LQ	2	PA, QL
XTAMPZA ER	4	PA, QL
ZEBUTAL	4	QL
ZTLIDO	3	PA, QL
<b>Analgesics - Drugs for Pain and Inflammation</b>		
ANAPROX DS	NF	
CATAFLAM	NF	
CELEBREX	NF	QL
celecoxib oral	2	QL
diclofenac potassium oral capsule	NF	
diclofenac potassium oral tablet 25 mg	NF	
diclofenac potassium oral tablet 50 mg	2	
diclofenac sodium er	3	
diclofenac sodium external gel 1 %	NF	

Drug Name	Drug Tier	Requirements & Limits
diclofenac sodium external solution	NF	
diclofenac sodium oral	1	
EC-NAPROSYN ORAL TABLET DELAYED RELEASE 375 MG	3	
EC-NAPROSYN ORAL TABLET DELAYED RELEASE 500 MG	4	
ec-naproxen	1	
ENOVARX-DICLOFENAC SODIUM	NF	
etodolac	2	
etodolac er	3	
ibuprofen oral suspension 100 mg/5ml	NF	
ibuprofen oral tablet 400 mg, 600 mg, 800 mg	1	
INDOCIN ORAL	NF	PA
INDOCIN RECTAL	3	PA
indomethacin er	2	
INDOMETHACIN ORAL CAPSULE 20 MG	NF	
indomethacin oral capsule 25 mg, 50 mg	1	
KETOROLAC TROMETHAMINE NASAL	NF	ST, QL
ketorolac tromethamine oral	1	
LODINE	NF	
LOFENA	NF	
meloxicam oral capsule	NF	QL
MELOXICAM ORAL SUSPENSION	4	
meloxicam oral tablet	1	
nabumetone oral	1	
NAPRELAN	NF	
NAPROSYN ORAL SUSPENSION	NF	PA
NAPROSYN ORAL TABLET	NF	
naproxen oral suspension	NF	PA
naproxen oral tablet	1	
naproxen oral tablet delayed release	1	
naproxen sodium er oral tablet extended release 24 hour 375 mg, 500 mg	NF	
NAPROXEN SODIUM ER ORAL TABLET EXTENDED RELEASE 24 HOUR 750 MG	NF	

See page 6, 7 for coverage details. Drugs listed as ST are subject to Prior Authorization in CT, NJ and NY (referred to as First Start in New Jersey).



Drug Name	Drug Tier	Requirements & Limits
naproxen sodium oral tablet 275 mg, 550 mg	2	
PENNSAID	NF	
RELAFEN	NF	
RELAFEN DS	NF	
SPRIX	NF	ST, QL
TIVORBEX	NF	
ZIPSOR	NF	

#### Anti-Addiction / Substance Abuse Treatment Agents

buprenorphine hcl sublingual	1	QL
buprenorphine hcl-naloxone hcl	2	QL
KLOXXADO	2	QL
naloxone hcl injection	1	
naloxone hcl nasal	1	QL
naltrexone hcl oral	1	
NARCAN	2	QL
SUBOXONE	NF	PA, QL
varenicline tartrate	3	PA, H
ZIMHI	2	QL
ZUBSOLV	2	QL

#### Antibacterials - Drugs for Infections

ACTICLATE	NF	
amoxicillin	1	
amoxicillin-potassium clavulanate	1	
amoxicillin-potassium clavulanate er	NF	
AUGMENTIN	NF	
AUGMENTIN ES-600	NF	
avidoxy	1	
azithromycin oral	1	
BACTRIM	4	
BACTRIM DS	4	
cefadroxil	1	
cefдинир	1	
cefuroxime axetil	1	
CENTANY	4	QL
CENTANY AT	NF	
cephalexin	1	
CIPRO ORAL TABLET	4	
ciprofloxacin hcl oral	1	
clarithromycin er	2	

Drug Name	Drug Tier	Requirements & Limits
clarithromycin oral suspension reconstituted	2	
clarithromycin oral tablet	1	
CLEOCIN ORAL CAPSULE 150 MG, 300 MG	4	
CLEOCIN ORAL CAPSULE 75 MG	2	
clindamycin hcl oral	1	
CLINDESSE	2	
coremino	NF	PA
DIFICID	4	QL
DORYX	NF	
DORYX MPC	NF	
doxycycline hyclate oral capsule	2	
doxycycline hyclate oral tablet 100 mg	2	
doxycycline hyclate oral tablet 150 mg, 50 mg, 75 mg	NF	
doxycycline hyclate oral tablet 20 mg	1	
doxycycline hyclate oral tablet delayed release 100 mg, 150 mg, 200 mg, 50 mg, 75 mg	NF	
DOXYCYCLINE HYCLATE ORAL TABLET DELAYED RELEASE 80 MG	NF	
doxycycline monohydrate oral capsule 100 mg, 50 mg	1	
doxycycline monohydrate oral capsule 150 mg, 75 mg	NF	
doxycycline monohydrate oral suspension reconstituted	3	
doxycycline monohydrate oral tablet	1	
FLAGYL	NF	
levofloxacin oral	1	
LYMEPAK	NF	
metronidazole oral	1	
metronidazole vaginal	2	
MINOCYCLINE HCL ER ORAL CAPSULE EXTENDED RELEASE 24 HOUR	NF	PA
minocycline hcl er oral tablet extended release 24 hour	NF	PA
minocycline hcl oral capsule	1	

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Drug Name	Drug Tier	Requirements & Limits
minocycline hcl oral tablet	NF	
MINOLIRA	NF	PA
mondoxyme nl	1	
mupirocin calcium	3	QL
mupirocin external	1	QL
nitrofurantoin macrocrystal	1	
nitrofurantoin monohydrate macrocrystals	1	
NUVESSA	NF	
NUZYRA ORAL	4	QL
penicillin v potassium	1	
SOLODYN	NF	PA
sulfamethoxazole-trimethoprim oral	1	
sulfatrim pediatric	1	
TARGADOX	NF	
vandazole	4	
VIBRAMYCIN ORAL CAPSULE	4	
VIBRAMYCIN ORAL SUSPENSION RECONSTITUTED	4	
XENLETA ORAL	4	
XEPI	3	QL
XIMINO	NF	PA
ZITHROMAX ORAL	4	
ZITHROMAX TRI-PAK	4	
ZITHROMAX Z-PAK	4	
<b>Anticoagulants - Drugs to Treat or Prevent Blood Clots</b>		
dabigatran etexilate mesylate	1	QL
ELIQUIS	2	QL
ELIQUIS DVT/PE STARTER PACK	2	QL
enoxaparin sodium	2	QL
jantoven	1	
LOVENOX	NF	QL
PRADAXA	2	QL
warfarin sodium oral	1	
XARELTO	2	QL
XARELTO STARTER PACK	2	QL
<b>Anticonvulsants - Drugs for Seizures</b>		
BRIVIACT ORAL TABLET	NF	PA
carbamazepine er oral capsule extended release 12 hour	2	

Drug Name	Drug Tier	Requirements & Limits
carbamazepine er oral tablet extended release 12 hour	3	
carbamazepine oral	1	
CARBATROL	NF	
DEPAKOTE	4	PA
DEPAKOTE ER	4	PA
DEPAKOTE SPRINKLES	4	PA
divalproex sodium er	2	
divalproex sodium oral capsule delayed release sprinkle	2	
divalproex sodium oral tablet delayed release	1	
ELEPSIA XR	NF	PA
epitol	1	
EPRONTIA	NF	PA
gabapentin oral capsule	1	
gabapentin oral solution 250 mg/5ml	1	
GABAPENTIN ORAL TABLET 25 MG, 50 MG	NF	PA, ST
gabapentin oral tablet 600 mg, 800 mg	1	
KEPPRA ORAL	NF	PA
KEPPRA XR	NF	PA
lacosamide oral solution	3	PA
lacosamide oral tablet	NF	PA
LAMICTAL	NF	PA
LAMICTAL ODT ORAL KIT 21 X 25 MG & 7 X 50 MG, 42 X 50 MG & 14X100 MG	3	PA
LAMICTAL ODT ORAL KIT 25 & 50 & 100 MG	4	PA
LAMICTAL ODT ORAL TABLET DISPERSIBLE	4	PA
LAMICTAL STARTER	NF	PA
LAMICTAL XR	NF	PA
lamotrigine er	NF	PA
lamotrigine oral kit	NF	PA, ST
lamotrigine oral tablet	1	
lamotrigine oral tablet chewable	1	
lamotrigine oral tablet dispersible	NF	PA, ST
lamotrigine starter kit-blue	1	

See page 6, 7 for coverage details. Drugs listed as ST are subject to Prior Authorization in CT, NJ and NY (referred to as First Start in New Jersey).



Drug Name	Drug Tier	Requirements & Limits
lamotrigine starter kit-green	1	
lamotrigine starter kit-orange	1	
levetiracetam er	2	
levetiracetam oral	1	
NAYZILAM	3	PA, QL
NEURONTIN	NF	PA
oxcarbazepine	1	
OXTELLAR XR	NF	
QUDEXY XR	NF	
roweepra	1	
SPRITAM	NF	
subvenite	1	
subvenite starter kit-blue	1	
subvenite starter kit-green	1	
subvenite starter kit-orange	1	
TEGRETOL	NF	
TEGRETOL-XR	NF	
TOPAMAX	NF	PA
TOPAMAX SPRINKLE	NF	PA
topiramate er	NF	ST
topiramate oral	1	
TRILEPTAL	NF	PA
TROKENDI XR	NF	
VALTOCO NASAL LIQUID 10 MG/0.1ML, 5 MG/0.1ML	3	PA, QL
VIMPAT ORAL SOLUTION	4	PA
VIMPAT ORAL TABLET	NF	PA
XCOPRI ORAL TABLET 100 MG, 150 MG, 200 MG, 50 MG	NF	PA
ZONEGRAN	NF	PA
zonisamide oral	1	
<b>Antidementia Agents - Drugs for Alzheimer's Disease and Dementia</b>		
ADLARITY	NF	
ARICEPT	NF	
donepezil hcl oral tablet 10 mg, 5 mg	1	
donepezil hcl oral tablet 23 mg	NF	
donepezil hcl oral tablet dispersible	1	

Drug Name	Drug Tier	Requirements & Limits
<b>Antidepressants - Drugs for Depression</b>		
amitriptyline hcl oral	1	
bupropion hcl er (sr)	1	
bupropion hcl er (xl) oral tablet extended release 24 hour 150 mg, 300 mg	1	
BUPROPION HCL ER (XL) ORAL TABLET EXTENDED RELEASE 24 HOUR 450 MG	NF	QL
bupropion hcl oral	1	
CELEXA	NF	
CITALOPRAM HYDROBROMIDE ORAL CAPSULE	NF	
citalopram hydrobromide oral solution	1	
citalopram hydrobromide oral tablet	1	
CYMBALTA	NF	QL, RS
desvenlafaxine succinate er	3	QL
doxepin hcl oral capsule	1	
doxepin hcl oral concentrate	1	
DRIZALMA SPRINKLE	4	PA, QL
duloxetine hcl oral capsule delayed release particles 20 mg, 30 mg, 60 mg	2	QL, RS
duloxetine hcl oral capsule delayed release particles 40 mg	NF	RS
EFFEXOR XR	NF	
escitalopram oxalate oral solution	3	
escitalopram oxalate oral tablet	1	
fluoxetine hcl oral capsule	1	
fluoxetine hcl oral capsule delayed release	3	QL
fluoxetine hcl oral solution	1	
fluoxetine hcl oral tablet 10 mg	3	QL
fluoxetine hcl oral tablet 20 mg	3	
fluoxetine hcl oral tablet 60 mg	NF	
fluvoxamine maleate	1	
fluvoxamine maleate er	4	QL
FORFIVO XL	NF	QL
LEXAPRO	NF	
mirtazapine oral	1	

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Drug Name	Drug Tier	Requirements & Limits
nortriptyline hcl oral	1	
PAMELOR	NF	
paroxetine hcl er	3	QL
paroxetine hcl oral suspension	3	
paroxetine hcl oral tablet	1	
PAXIL CR	NF	QL
PAXIL ORAL SUSPENSION	4	
PAXIL ORAL TABLET	NF	
PRISTIQ	NF	QL
PROZAC	NF	
REMERON	NF	
REMERON SOLTAB ORAL TABLET DISPERSIBLE 15 MG, 30 MG	NF	
SERTRALINE HCL ORAL CAPSULE	NF	QL
sertraline hcl oral concentrate	1	
sertraline hcl oral tablet	1	
trazodone hcl oral	1	
TRINTELLIX	NF	ST, QL
venlafaxine hcl	1	
venlafaxine hcl er oral capsule extended release 24 hour	1	
venlafaxine hcl er oral tablet extended release 24 hour	NF	QL
VIIBRYD	NF	QL
VIIBRYD STARTER PACK	4	
vilazodone hcl	3	QL
WELLBUTRIN SR	NF	
WELLBUTRIN XL	NF	
ZOLOFT	NF	
<b>Antiemetics - Drugs for Nausea and Vomiting</b>		
BONJESTA	NF	PA
DICLEGIS	NF	PA
doxylamine-pyridoxine	NF	PA
GIMOTI	NF	QL
metoclopramide hcl oral solution	1	
metoclopramide hcl oral tablet	1	
metoclopramide hcl oral tablet dispersible	NF	
ondansetron hcl oral	1	
ondansetron odt	1	
prochlorperazine maleate oral	1	

Drug Name	Drug Tier	Requirements & Limits
promethazine hcl oral tablet	1	
promethazine hcl rectal	1	
promethegan	1	
REGLAN	4	
scopolamine	3	
TRANSDERM-SCOP	NF	
<b>Antifungals - Drugs for Fungal Infections</b>		
ciclodan	1	
ciclopirox external gel	1	
ciclopirox external shampoo	2	
ciclopirox external solution	1	
ciclopirox treatment	NF	
CRESEMBA ORAL	3	
DIFLUCAN	NF	
EXTINA	4	ST
fluconazole oral	1	
GYNAZOLE-1	3	
ketoconazole external cream	1	QL
ketoconazole external foam	3	ST
ketoconazole external shampoo	1	
ketodan external foam	3	ST
LOPROX EXTERNAL SHAMPOO	NF	
nyamyc	1	QL
nystatin external	1	QL
nystatin mouth/throat	1	
nystop	1	QL
terbinafine hcl oral	1	QL
terconazole	1	
XOLEGEL	NF	
<b>Antigout Agents - Drugs for Gout</b>		
allopurinol oral	1	
COLCHICINE ORAL CAPSULE	NF	
colchicine oral tablet	NF	
COLCRYS	NF	
febuxostat	4	ST, QL
GLOPERBA	4	PA
MITIGARE	2	
ULORIC	NF	ST, QL
ZYLOPRIM	4	

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Drug Name	Drug Tier	Requirements & Limits
<b>Antimigraine Agents - Drugs for Migraines</b>		
AIMOVIG	3	PA, ST
AIMOVIG SUBCUTANEOUS SOLUTION AUTO-INJECTOR 140 MG/ML	3	PA, ST, QL
AMERGE ORAL TABLET 1 MG, 2.5 MG	NF	QL
eletriptan hydrobromide	3	QL
EMGALITY	3	PA, ST, QL
EMGALITY (300 MG DOSE)	3	PA, ST, QL
IMITREX ORAL	NF	QL
IMITREX STATDOSE REFILL	NF	QL
IMITREX STATDOSE SYSTEM	NF	QL
MAXALT	NF	QL
naratriptan hcl	1	QL
ONZETRA XSAIL	NF	QL
RELPAK	NF	QL
rizatriptan benzoate	1	QL
sumatriptan succinate oral	1	QL
sumatriptan succinate refill subcutaneous solution cartridge	1	QL
sumatriptan succinate subcutaneous	1	QL
UBRELVY	3	PA, ST, QL
ZEMBRACE SYMTOUCH	NF	QL
ZOLMITRIPTAN NASAL SOLUTION 2.5 MG	NF	QL
ZOMIG NASAL SOLUTION 2.5 MG	3	QL
ZOMIG NASAL SOLUTION 5 MG	2	QL
<b>Antineoplastics - Drugs for Cancer</b>		
ALECENSA	3	PA, QL, SP
ALUNBRIG	3	PA, QL, SP
anastrozole oral	1	H-PA
ARIMIDEX	NF	
bexarotene external	NF	QL, SP
bexarotene oral	NF	SP
CALQUENCE	3	PA, QL, SP
capecitabine	2	QL, SP
ERIVEDGE	3	PA, QL, SP
ERLEADA	3	PA, QL, SP
EXKIVITY	4	PA, QL, SP

Drug Name	Drug Tier	Requirements & Limits
FEMARA	NF	
fluorouracil external solution	1	
GAVRETO	4	PA, QL, SP
IBRANCE	3	PA, QL, SP
ICLUSIG ORAL TABLET	4	PA, QL, SP
IDHIFA	3	PA, QL, SP
IMBRUVICA ORAL TABLET	3	PA, QL, SP
KOSELUGO	3	PA, QL, SP
lenalidomide	3	PA, QL, SP
letrozole oral	1	H-PA
LYNPARZA	3	PA, QL, SP
mercaptopurine oral	1	
NUBEQA	3	PA, QL, SP
ODOMZO	3	PA, QL, SP
ORGOVYX	4	PA, QL, SP
PURIXAN	4	PA, SP
REVLIMID	3	PA, QL, SP
SOLTAMOX	NF	
STIVARGA	3	PA, QL, SP
tamoxifen citrate oral tablet 10 mg	1	
tamoxifen citrate oral tablet 20 mg	1	H-PA
TARGRETIN EXTERNAL	4	QL, SP
TARGRETIN ORAL	3	SP
TASIGNA	3	PA, ST, QL, SP
VERZENIO	3	PA, QL, SP
VITRAKVI	3	PA, QL, SP
XELODA	NF	QL, SP
ZEJULA	3	PA, QL, SP
<b>Antiparasitics - Drugs for Parasitic Infections</b>		
ARAKODA	4	QL
atovaquone-proguanil hcl	2	
hydroxychloroquine sulfate oral	1	
ivermectin oral	1	PA, QL
KRINTAFEL	1	QL
MALARONE	4	
permethrin external	1	
PLAQUENIL	NF	
<b>Antiparkinson Agents - Drugs for Parkinson's Disease</b>		
carbidopa-levodopa	1	
carbidopa-levodopa er	1	

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Drug Name	Drug Tier	Requirements & Limits
DHIVY	NF	
DUOPA	4	PA
INBRIJA	3	PA, QL, SP
KYNMOBI	4	PA, QL, SP
MIRAPEX ER	NF	
NOURIANZ	NF	PA, QL
pramipexole dihydrochloride	1	
pramipexole dihydrochloride er	NF	
ropinirole hcl	1	
ropinirole hcl er	NF	
RYTARY	NF	
SINEMET	4	
<b>Antiplatelets - Drugs for Heart Attack and Stroke Prevention</b>		
BRILINTA	4	QL
clopidogrel bisulfate oral	1	
PLAVIX	NF	
ZONTIVITY	4	QL
<b>Antipsychotics - Drugs for Mood Disorders</b>		
ABILIFY	NF	QL
aripiprazole oral solution	4	
aripiprazole oral tablet	2	QL
aripiprazole oral tablet dispersible	NF	QL
asenapine maleate	NF	QL
GEODON ORAL	NF	QL
LATUDA	NF	QL
olanzapine oral tablet	1	QL
olanzapine oral tablet dispersible	2	QL
quetiapine fumarate	1	
quetiapine fumarate er	3	QL
REXULTI	NF	PA, ST, QL
RISPERDAL	NF	
risperidone	1	
SAPHRIS	NF	QL
SEROQUEL	NF	
SEROQUEL XR	NF	QL
VRAYLAR ORAL CAPSULE	NF	QL
ziprasidone hcl	2	QL
ZYPREXA ORAL	NF	QL
ZYPREXA ZYDIS	NF	QL

Drug Name	Drug Tier	Requirements & Limits
<b>Antivirals - Drugs for Viral Infections</b>		
acyclovir oral	1	
BARACLUDE ORAL SOLUTION	3	SP
BARACLUDE ORAL TABLET	NF	SP
BIKTARVY	4	QL
CIMDUO	2	QL
DESCOVY	NF	PA, ST, QL
DOVATO	2	QL
efavirenz-emtricitab-tenofovir	2	QL
efavirenz-lamivudine-tenofovir	2	QL
emtricitabine-tenofovir df oral tablet 100-150 mg, 133-200 mg, 167-250 mg	1	QL
emtricitabine-tenofovir df oral tablet 200-300 mg	1	QL, H
entecavir	3	SP
EPCLUSA ORAL PACKET	3	PA, QL, SP
EPCLUSA ORAL TABLET	3	PA, QL, SP
GENVOYA	4	QL
HARVONI	3	PA, ST, QL, SP
ISENTRESS	2	
ISENTRESS	2	
ISENTRESS HD	2	
JULUCA	3	QL
LEDIPASVIR-SOFOSBUVIR	3	PA, ST, QL, SP
MAVYRET	3	PA, QL, SP
NORVIR ORAL PACKET	2	
NORVIR ORAL SOLUTION	2	
NORVIR ORAL TABLET	NF	
ODEFSEY	4	QL
oseltamivir phosphate oral capsule	2	
oseltamivir phosphate oral suspension reconstituted	2	QL
PREZCOBIX	2	
ritonavir	2	
RUKOBIA	4	PA
SITAVIG	NF	QL
SOFOSBUVIR-VELPATASVIR	3	PA, QL, SP
STRIBILD	4	QL
SYMFI	2	QL
SYMFI LO	2	QL

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Drug Name	Drug Tier	Requirements & Limits
TAMIFLU ORAL CAPSULE	NF	
TAMIFLU ORAL SUSPENSION RECONSTITUTED	NF	QL
tenofovir disoproxil fumarate	2	H
TIVICAY	3	
TIVICAY PD	3	
TRIUMEQ	2	QL
TRIUMEQ PD	2	QL
TRUVADA ORAL TABLET 100-150 MG, 133-200 MG, 167-250 MG	4	QL
TRUVADA ORAL TABLET 200-300 MG	NF	QL
valacyclovir hcl oral	1	QL
VALTREX	NF	QL
VEMLIDY	NF	PA, ST, SP
VIREAD ORAL POWDER	3	
VIREAD ORAL TABLET 150 MG, 200 MG, 250 MG	2	
VIREAD ORAL TABLET 300 MG	NF	
VOSEVI	3	PA, QL, SP
XOFLUZA (40 MG DOSE)	3	QL
XOFLUZA (80 MG DOSE)	3	QL
ZEPATIER	3	PA, QL, SP
ZOVIRAX ORAL	4	
<b>Anxiolytics - Drugs for Anxiety</b>		
alprazolam er	1	
alprazolam intensol	1	
alprazolam oral	1	
alprazolam xr	1	
ATIVAN ORAL	NF	
bupirone hcl oral	1	
clonazepam oral	1	
diazepam intensol	1	
diazepam oral	1	
HALCION	4	
hydroxyzine hcl oral	1	
hydroxyzine pamoate oral	1	
KLONOPIN	NF	
lorazepam intensol	1	

Drug Name	Drug Tier	Requirements & Limits
lorazepam oral concentrate 2 mg/ml	1	
lorazepam oral tablet	1	
LOREEV XR	NF	
triazolam	1	
VALIUM	NF	
VISTARIL	4	
XANAX	NF	
XANAX XR	NF	
<b>Bipolar Agents - Drugs for Mood Disorders</b>		
lithium carbonate er	1	
lithium carbonate oral	1	
LITHOBID	4	PA
<b>Cardiovascular Agents - Drugs for Heart and Circulation Conditions</b>		
ACCUPRIL	NF	
acetazolamide er	1	
acetazolamide oral	1	
ALDACTONE	NF	
aliskiren fumarate	NF	
ALTACE	NF	
ALTOPREV	NF	
amiodarone hcl oral	1	
amlodipine besylate oral	1	
amlodipine besylate-benazepril hcl	1	
amlodipine besylate-valsartan	2	
ASPRUZO SPRINKLE	NF	
atenolol oral	1	
atenolol-chlorthalidone	1	
atorvastatin calcium oral tablet 10 mg, 20 mg	1	QL, H-PA
atorvastatin calcium oral tablet 40 mg, 80 mg	1	QL
AVALIDE	NF	
AVAPRO	NF	
benazepril hcl oral	1	
benazepril-hydrochlorothiazide	1	
BENICAR	NF	
BENICAR HCT	NF	
BETAPACE	NF	

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Drug Name	Drug Tier	Requirements & Limits
BIDIL	2	
bisoprolol fumarate oral	1	
bisoprolol-hydrochlorothiazide	1	
BYSTOLIC	NF	
CALAN SR	4	
CARDIZEM	NF	
CARDIZEM CD	NF	
CARDIZEM LA	NF	
CARDURA	4	
CAROSPIR	4	PA
cartia xt	2	
carvedilol	1	
chlorthalidone	1	
clonidine hcl oral	1	
colesevelam hcl	2	
COREG	NF	
CORGARD	4	
CORLANOR	3	PA, QL
COZAAR	NF	
CRESTOR	NF	QL
diltiazem hcl er	1	
diltiazem hcl er coated beads	2	
diltiazem hcl oral	1	
dilt-xr	1	
DIOVAN	NF	
DIOVAN HCT	NF	
doxazosin mesylate oral	1	
EDARBI	3	
EDARBYCLOR	3	
enalapril maleate oral solution	3	PA
enalapril maleate oral tablet	1	
ENTRESTO	4	PA, QL
EPANED	4	PA
EXFORGE	NF	
EZALLOR SPRINKLE	3	PA
ezetimibe	2	
ezetimibe-simvastatin	NF	
fenofibrate oral capsule 150 mg, 50 mg	NF	

Drug Name	Drug Tier	Requirements & Limits
fenofibrate oral tablet 120 mg, 40 mg, 48 mg	NF	
fenofibrate oral tablet 145 mg, 160 mg, 54 mg	2	
FENOGLIDE	NF	
flecainide acetate	1	
FLOLIPID	4	PA
furosemide oral	1	
gemfibrozil oral	1	
GONITRO	NF	QL
guanfacine hcl	1	
HEMANGEOL	NF	
hydralazine hcl oral	1	
hydrochlorothiazide oral	1	
HYZAAR	NF	
icosapent ethyl	NF	PA
INDERAL LA	NF	
irbesartan	1	
irbesartan-hydrochlorothiazide	1	
isosorb dinitrate-hydralazine	2	
isosorbide mononitrate	1	
isosorbide mononitrate er	1	
KAPSPARGO SPRINKLE	4	
labetalol hcl oral	1	
LASIX	4	
LIPITOR	NF	QL
LIPOFEN	NF	
lisinopril oral	1	
lisinopril-hydrochlorothiazide	1	
LOPID	4	
LOPRESSOR	4	
losartan potassium oral	1	
losartan potassium-hctz	1	
LOTENSIN	4	
LOTENSIN HCT	4	
LOTREL	NF	
lovastatin oral	1	H
LOVAZA	NF	
matzim la	2	
MAXZIDE	4	

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Drug Name	Drug Tier	Requirements & Limits
MAXZIDE-25	4	
metoprolol succinate er oral tablet extended release 24 hour 100 mg, 200 mg, 50 mg	2	
metoprolol succinate er oral tablet extended release 24 hour 25 mg	1	
metoprolol tartrate oral tablet 100 mg, 25 mg, 50 mg	1	
metoprolol tartrate oral tablet 37.5 mg, 75 mg	NF	
MICARDIS	NF	
MINIPRESS	4	
MULTAQ	NF	PA
nadolol oral	1	
nebivolol hcl	NF	
NEXICLON XR	NF	
NEXLETOL	2	PA, ST, QL
NEXLIZET	2	PA, ST, QL
niacin (antihyperlipidemic)	NF	
niacin er (antihyperlipidemic)	3	
niacor	NF	
NIASPAN	NF	
nifedipine er	1	
nifedipine er osmotic release	1	
nifedipine oral	1	
NITRO-BID	2	
NITRO-DUR	3	
nitroglycerin sublingual	1	
nitroglycerin transdermal	1	
nitroglycerin translingual	NF	QL
NITROLINGUAL	NF	QL
NITROMIST	4	QL
NITROSTAT	4	
NITRO-TIME	3	
NORLIQVA	NF	
NORVASC	NF	
olmesartan medoxomil oral	2	
olmesartan medoxomil-hctz	2	
omega-3-acid ethyl esters	2	
PACERONE ORAL TABLET 100 MG, 400 MG	3	

Drug Name	Drug Tier	Requirements & Limits
PACERONE ORAL TABLET 200 MG	4	
PRALUENT	NF	PA, ST, QL
pravastatin sodium	1	
prazosin hcl oral	1	
PROCARDIA XL	NF	
propranolol hcl er	2	
propranolol hcl oral	1	
QBRELIS	4	PA
quinapril hcl	1	
ramipril	1	
RANEXA	NF	
ranolazine er	2	
REPATHA	2	PA, ST, QL
REPATHA PUSHTRONEX SYSTEM	2	PA, ST, QL
REPATHA SURECLICK	2	PA, ST, QL
rosuvastatin calcium	2	QL
simvastatin oral tablet 10 mg, 20 mg, 40 mg, 5 mg	1	H-PA
simvastatin oral tablet 80 mg	1	
SOAANZ	NF	QL
sotalol hcl oral	1	
SOTYLIZE	4	PA
spironolactone oral	1	
TEKTURNA	NF	
TEKTURNA HCT	NF	
telmisartan	2	
telmisartan-hctz	2	
TENORETIC 100	NF	
TENORETIC 50	NF	
TENORMIN	NF	
THALITONE	NF	
TOPROL XL	NF	
torseamide	1	
triamterene-hctz	1	
TRICOR	NF	
VALSARTAN ORAL SOLUTION	NF	
valsartan oral tablet	2	
valsartan-hydrochlorothiazide	1	
VASCEPA	NF	PA
VASOTEC	NF	

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Drug Name	Drug Tier	Requirements & Limits
verapamil hcl er oral capsule extended release 24 hour 100 mg, 200 mg, 300 mg	3	
verapamil hcl er oral capsule extended release 24 hour 120 mg, 180 mg, 240 mg, 360 mg	1	
verapamil hcl er oral tablet extended release	1	
verapamil hcl oral	1	
VERELAN	4	
VERELAN PM	4	
VERQUVO	NF	PA, QL
VYTORIN	NF	
WELCHOL	NF	
ZESTORETIC	NF	
ZESTRIL	NF	
ZETIA	NF	
ZIAC ORAL TABLET 10-6.25 MG, 2.5-6.25 MG	3	
ZIAC ORAL TABLET 5-6.25 MG	4	
ZOCOR	NF	
<b>Central Nervous System Agents - Drugs for Attention Deficit Disorder</b>		
ADDERALL	NF	
ADDERALL XR	2	QL
ADHANSIA XR	NF	QL
amphetamine-dextroamphetamine	1	
amphetamine-dextroamphetamine er	NF	QL
APTENSIO XR	NF	QL
atomoxetine hcl	4	QL
CONCERTA	2	QL
DEXEDRINE	NF	QL
dexmethylphenidate hcl	1	
dexmethylphenidate hcl er	3	QL
dextroamphetamine sulfate er	3	QL
dextroamphetamine sulfate oral solution	1	
dextroamphetamine sulfate oral tablet 10 mg, 5 mg	3	
dextroamphetamine sulfate oral tablet 15 mg, 20 mg, 30 mg	NF	

Drug Name	Drug Tier	Requirements & Limits
FOCALIN	NF	
FOCALIN XR	NF	QL
guanfacine hcl er	2	QL
INTUNIV	NF	QL
JORNAY PM	NF	QL
METHYLIN	NF	
methylphenidate hcl er (cd)	2	QL
methylphenidate hcl er (la) oral capsule extended release 24 hour 10 mg, 20 mg, 30 mg, 40 mg	2	QL
methylphenidate hcl er (la) oral capsule extended release 24 hour 60 mg	2	
methylphenidate hcl er (osm)	NF	QL
methylphenidate hcl er (xr)	NF	QL
methylphenidate hcl er oral tablet extended release	4	QL
methylphenidate hcl er oral tablet extended release 24 hour	NF	QL
methylphenidate hcl oral solution	1	
methylphenidate hcl oral tablet	1	
methylphenidate hcl oral tablet chewable	3	
MYDAYIS	NF	QL
PROCENTRA	NF	
QUILLICHEW ER	NF	QL
QUILLIVANT XR	NF	QL
relexxii	NF	QL
RITALIN	NF	
RITALIN LA	NF	QL
STRATTERA	NF	QL
VYVANSE	NF	QL
ZENZEDI	NF	
<b>Central Nervous System Agents - Drugs for Multiple Sclerosis</b>		
AMPYRA	NF	PA, QL, SP
AUBAGIO	4	PA, QL, SP
AVONEX PEN	3	PA, QL, SP
AVONEX PREFILLED	3	PA, QL, SP
BAFIERTAM	3	PA, QL, SP
BETASERON	3	PA, QL, SP

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Drug Name	Drug Tier	Requirements & Limits
COPAXONE	NF	PA, QL, SP
dalfampridine er	3	PA, QL, SP
EXTAVIA	NF	PA, ST, QL, SP
GILENYA	4	PA, QL, SP
glatiramer acetate	3	PA, QL, SP
glatopa	3	PA, QL, SP
KESIMPTA	3	PA, QL, SP
MAVENCLAD	4	PA, ST, QL, SP
PLEGRIDY INTRAMUSCULAR	4	PA, QL, SP
PLEGRIDY STARTER PACK	4	PA, QL, SP
PLEGRIDY SUBCUTANEOUS	4	PA, QL, SP
REBIF	NF	PA, QL, SP
REBIF REBIDOSE	NF	PA, QL, SP
REBIF REBIDOSE TITRATION PACK	NF	PA, QL, SP
REBIF TITRATION PACK	NF	PA, QL, SP
<b>Central Nervous System Agents - Miscellaneous</b>		
AUSTEDO	3	PA, QL, SP
EXSERVAN	NF	PA, SP
LYRICA	NF	PA, QL
LYRICA CR	NF	ST, QL
NUEDEXTA	2	PA, QL
pregabalin er	NF	ST, QL
pregabalin oral capsule	2	QL
pregabalin oral solution	NF	QL
RILUTEK	NF	SP
riluzole	1	SP
TIGLUTIK	4	PA
ZEPOSIA	4	PA, ST, QL, SP
ZEPOSIA 7-DAY STARTER PACK	4	PA, ST, QL, SP
ZEPOSIA STARTER KIT	4	PA, ST, QL, SP
<b>Dental and Oral Agents - Drugs for Mouth and Throat Conditions</b>		
cavarest	1	
chlorhexidine gluconate mouth/throat	1	
CLINPRO 5000	3	
DENTA 5000 PLUS	4	
DENTAGEL	4	
FLUORIDEX	3	

Drug Name	Drug Tier	Requirements & Limits
FLUORIDEX ENHANCED WHITENING	3	
FLUORIMAX 5000	3	
JUST RIGHT 5000	3	
lidocaine hcl mouth/throat	1	
lidocaine viscous hcl	1	
NAFRINSE DAILY/NEUTRAL	2	
NAFRINSE WEEKLY	4	
PERIDEX	4	
periogard	1	
PREVIDENT 5000 BOOSTER PLUS	3	
PREVIDENT 5000 DRY MOUTH	4	
PREVIDENT 5000 ORTHO DEFENSE	3	
PREVIDENT 5000 PLUS	4	
PREVIDENT DENTAL	4	
PREVIDENT MOUTH/THROAT	3	
sf	1	
sf 5000 plus	1	
sodium fluoride 5000 plus	1	
sodium fluoride 5000 ppm	1	
sodium fluoride dental	1	
sodium fluoride mouth/throat	1	
<b>Dermatological Agents - Drugs for Skin Conditions</b>		
ABSORICA	NF	PA
accutane	NF	
ACZONE	NF	QL
ALA SCALP	4	
ala-cort external cream 1 %	NF	
ala-cort external cream 2.5 %	1	
ALTRENO	NF	PA, QL
amnestem	NF	
AMZEEQ	NF	PA, QL
ATRALIN	NF	PA, QL
AVAR CLEANSER	4	
AVAR LS CLEANSER	NF	
AVAR-E EMOLLIENT	NF	
AVAR-E GREEN	NF	
AVAR-E LS	NF	
AVITA	NF	PA, QL

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Drug Name	Drug Tier	Requirements & Limits
azelaic acid external	3	
betamethasone dipropionate aug external cream	1	
betamethasone dipropionate aug external gel	1	
betamethasone dipropionate aug external lotion	3	
betamethasone dipropionate aug external ointment	3	
betamethasone dipropionate external cream	2	
betamethasone dipropionate external lotion	1	
betamethasone dipropionate external ointment	2	
bp 10-1	NF	
calcipotriene-betameth diprop	NF	QL
calcitriol external	1	QL
CAPEX	2	
CARAC	NF	
CIBINQO	3	PA, QL, SP
claravis	2	
CLEOCIN-T	NF	
clindacin etz external swab	1	
clindacin-p	1	
CLINDAGEL	NF	QL
clindamycin phos-benzoyl perox external gel 1.2-5 %	3	QL
clindamycin phosphate external foam	3	
clindamycin phosphate external lotion	3	
clindamycin phosphate external solution	1	
clindamycin phosphate external swab	1	
clindamycin phosphate gel 1 % external	NF	QL
clindamycin phosphate gel 1 % external	3	QL
clobetasol propionate external cream	2	QL
clobetasol propionate external foam	NF	QL

Drug Name	Drug Tier	Requirements & Limits
clobetasol propionate external gel	2	QL
clobetasol propionate external liquid	1	QL
clobetasol propionate external lotion	NF	QL
clobetasol propionate external ointment	2	QL
clobetasol propionate external shampoo	NF	QL
clobetasol propionate external solution	1	QL
CLOBEX	NF	QL
CLOBEX SPRAY	NF	QL
clodan external shampoo	NF	QL
clotrimazole-betamethasone external cream	1	QL
clotrimazole-betamethasone external lotion	1	
dapsone external	NF	QL
DERMA-SMOOTH/FS BODY	4	QL
DERMA-SMOOTH/FS SCALP	4	
desonide external cream	3	QL
desonide external gel	NF	ST, QL
desonide external lotion	3	QL
desonide external ointment	3	QL
DESOWEN	3	QL
desrx	NF	ST, QL
DIPROLENE	4	
DUPIXENT SUBCUTANEOUS SOLUTION PEN-INJECTOR	3	PA, QL, SP
DUPIXENT SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 100 MG/0.67ML	3	PA, QL, SP
DUPIXENT SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 200 MG/1.14ML, 300 MG/2ML	3	PA, QL, SP
EFUDEX	4	
ENSTILAR	4	QL
EUCRISA	3	ST, QL
EVOCLIN	NF	
FINACEA	4	
fluocinolone acetonide body	3	QL

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Drug Name	Drug Tier	Requirements & Limits
fluocinolone acetonide external cream	3	QL
fluocinolone acetonide external ointment	2	QL
fluocinolone acetonide external solution	3	QL
fluocinolone acetonide scalp	3	
fluocinonide external cream 0.05 %	1	
fluocinonide external cream 0.1 %	NF	QL
fluocinonide external gel	1	
fluocinonide external ointment	1	
fluocinonide external solution	1	
FLUOROPLEX EXTERNAL CREAM 1 %	4	
FLUOROURACIL EXTERNAL CREAM 0.5 %	NF	
fluorouracil external cream 5 %	1	
hydrocortisone external cream 1 %	NF	
hydrocortisone external cream 2.5 %	1	
hydrocortisone external lotion 2.5 %	1	
hydrocortisone external ointment 1 %, 2.5 %	1	
imiquimod external cream 3.75 %	NF	QL
imiquimod external cream 5 %	1	
imiquimod pump	NF	QL
IMPEKLO	NF	QL
IMPOYZ	NF	QL
isotretinoin capsule 10 mg oral	NF	PA
isotretinoin capsule 10 mg oral	2	
isotretinoin capsule 20 mg oral	NF	PA
isotretinoin capsule 20 mg oral	2	
isotretinoin capsule 30 mg oral	NF	PA
isotretinoin capsule 30 mg oral	2	
isotretinoin capsule 40 mg oral	NF	PA
isotretinoin capsule 40 mg oral	2	
isotretinoin oral capsule 25 mg, 35 mg	NF	PA
KENALOG EXTERNAL	NF	QL
KLISYRI	4	ST, QL
METROCREAM	4	
METROGEL	NF	

Drug Name	Drug Tier	Requirements & Limits
METROLOTION	4	
metronidazole external cream	1	
metronidazole external gel 0.75 %	1	
metronidazole external gel 1 %	NF	
metronidazole external lotion	1	
MIRVASO	4	PA, QL
mometasone furoate external	1	
myorisan	NF	
neuac external gel	3	QL
NORITATE	NF	
OLUX	NF	QL
pimecrolimus	3	ST, QL
PLEXION	NF	
PLEXION CLEANSER	NF	
PLEXION CLEANSING CLOTH	NF	
RETIN-A	NF	PA, QL
RHOFADE	4	PA, QL
rosadan external cream	1	
rosadan external gel	1	
SANTYL	4	QL
SERNIVO	NF	QL
SOOLANTRA	4	QL
sss 10-5	1	
sulfacetamide sodium-sulfur external cream 10-2 %, 10-5 %	1	
sulfacetamide sodium-sulfur external cream 9.8-4.8 %	NF	
sulfacetamide sodium-sulfur external liquid 10-2 %, 9.8-4.8 %	NF	
sulfacetamide sodium-sulfur external liquid 10-5 %, 9-4 %, 9-4.5 %	1	
sulfacetamide sodium-sulfur external lotion 10-5 %	1	
sulfacetamide sodium-sulfur external lotion 9.8-4.8 %	NF	
sulfacetamide sodium-sulfur external pad	NF	
sulfacetamide sodium-sulfur external suspension 10-5 %	1	
sulfacetamide sodium-sulfur external suspension 8-4 %	NF	

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Drug Name	Drug Tier	Requirements & Limits
sulfacetamide sod-sulfur wash	1	
SULFACLEANSE 8/4	NF	
sulfamez wash	NF	
SUMADAN WASH	NF	
SUMAXIN	NF	
SYNALAR	NF	QL
TACLONEX	NF	QL
tacrolimus external	2	ST, QL
tazarotene external cream	NF	PA, QL
TAZORAC	NF	PA, QL
TEXACORT	2	
tretinoin external cream	3	QL
tretinoin external gel 0.01 %	NF	QL
tretinoin external gel 0.05 %	NF	PA, QL
tretinoin gel 0.025 % external	NF	
tretinoin gel 0.025 % external	NF	QL
triamcinolone acetonide external aerosol solution	2	QL
triamcinolone acetonide external cream 0.025 %, 0.1 %	1	
triamcinolone acetonide external cream 0.5 %	1	QL
triamcinolone acetonide external lotion	1	
triamcinolone acetonide external ointment 0.025 %, 0.1 %, 0.5 %	1	
triamcinolone acetonide external ointment 0.05 %	NF	
triamcinolone in absorbase	NF	
TRIANEX	NF	
triderm external cream 0.1 %	1	
triderm external cream 0.5 %	1	QL
TRIDESILON	3	QL
tritocin	NF	
VANOS	NF	QL
VECTICAL	NF	QL
VERDESO	NF	QL
WYNZORA	NF	QL
zenatane	NF	
ZILXI	NF	PA, ST, QL
ZYCLARA	NF	QL
ZYCLARA PUMP	NF	QL

Drug Name	Drug Tier	Requirements & Limits
<b>Diabetes - Glucose Monitoring and Supplies</b>		
ACCU-CHEK AVIVA PLUS TEST STRIPS	NF	QL
ACCU-CHEK FASTCLIX LANCET KIT	1	
ACCU-CHEK FASTCLIX LANCETS	1	
ACCU-CHEK GUIDE KIT W/DEVICE	3	(Accu-Chek Guide Me)
ACCU-CHEK GUIDE TEST STRIPS	3	QL
ACCU-CHEK SAFE-T PRO LANCETS	1	
ACCU-CHEK SMARTVIEW TEST STRIPS	NF	QL
ACCU-CHEK SOFTCLIX LANCET DEVICE KIT	1	
ACCU-CHEK SOFTCLIX LANCETS	1	
ACCUTREND GLUCOSE	NF	QL
bd autoshield duo pen needles	2	
bd ultra-fine insulin syringes	2	
bd ultra-fine pen needles	2	
BLOOD GLUCOSE TEST STRIPS	NF	QL
CARETOUCH MONITOR SYSTEM	NF	
CARETOUCH TEST	NF	QL
CHEMSTRIP BG LOG BOOK	1	
CONTOUR MONITOR DEVICE	NF	
CONTOUR MONITOR KIT W/DEVICE	NF	
CONTOUR NEXT EZ KIT W/DEVICE	2	
CONTOUR NEXT GEN MONITOR	2	
CONTOUR NEXT LINK KIT W/DEVICE	2	
CONTOUR NEXT LINK KIT W/DEVICE	2	(Contour Next Link 24 )
CONTOUR NEXT MONITOR KIT W/DEVICE	2	
CONTOUR NEXT ONE DEVICE	NF	
CONTOUR NEXT ONE KIT	2	
CONTOUR NEXT TEST STRIPS	2	QL
CONTOUR TEST STRIPS	NF	QL
CVS ADVANCED GLUCOSE TEST STRIPS	NF	QL
CVS GLUCOSE METER TEST STRIPS	NF	QL

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Drug Name	Drug Tier	Requirements & Limits
D-CARE BLOOD GLUCOSE	NF	QL
D-CARE GLUCOMETER	NF	
DEXCOM G4 MOBILE RECEIVER	3	PA, QL
DEXCOM G4 SENSOR	3	PA, QL
DEXCOM G4 TRANSMITTER	3	PA, QL
DEXCOM G5 MOBILE RECEIVER	3	PA, QL
DEXCOM G5 SENSOR	3	PA, QL
DEXCOM G5 TRANSMITTER	3	PA, QL
DEXCOM G6 RECEIVER	3	PA, QL
DEXCOM G6 SENSOR	3	PA, QL
DEXCOM G6 TRANSMITTER	3	PA, QL
EASY TOUCH TEST	NF	QL
EASYMAX 15 TEST	NF	QL
EASYMAX NG BLOOD GLUCOSE	NF	
EASYMAX V BLOOD GLUCOSE	NF	
ENLITE GLUCOSE SENSOR	3	PA
EQ BLOOD GLUCOSE TEST	NF	QL
FORTISCARE G1 TEST STRIP	NF	QL
FORTISCARE T1 GLUCOSE SYSTEM	NF	
FORTISCARE TEST	NF	QL
FREESTYLE LIBRE 14 DAY READER	3	PA
FREESTYLE LIBRE 14 DAY SENSOR	3	PA
FREESTYLE LIBRE 2 READER	3	PA
FREESTYLE LIBRE 2 SENSOR	3	PA
FREESTYLE LIBRE 3 SENSOR	3	PA
FREESTYLE LIBRE READER	3	PA, QL
FREESTYLE PRECISION NEO SYSTEM	NF	
FREESTYLE PRECISION NEO TEST	NF	QL
GENTLE-LET PLATFORMS	3	
GLUCOCARD EXPRESSION TEST	NF	QL
GLUCOCARD SHINE TEST	NF	QL
GLUCOCARD VITAL TEST	NF	QL
GUARDIAN LINK 3 TRANSMITTER	3	PA
GUARDIAN REAL-TIME REPLACE PED	3	PA
GUARDIAN SENSOR (3)	3	PA

Drug Name	Drug Tier	Requirements & Limits
IN TOUCH	1	
INSULIN PEN NEEDLES	2	
LANCETS	3	
MICRODOT TEST	NF	QL
MINILINK REAL-TIME TRANSMITTER	3	PA
MM EASY TOUCH GLUCOSE METER	NF	
NEUTEK 2TEK TEST	NF	QL
NOVOFINE AUTOCOVER PEN NEEDLE	2	
NOVOFINE PEN NEEDLE	2	
NOVOFINE PLUS PEN NEEDLE	2	
OMNIPOD 5 G5 INTRO KIT (Gen 5)	2	PA, QL
OMNIPOD 5 G6 PODS (Gen 5)	2	PA, QL
ONETOUCH CLUB LANCETS FINE PT	1	
ONETOUCH DELICA LANCETS 30G	1	
ONETOUCH DELICA LANCETS 33G	1	
ONETOUCH DELICA PLUS LANCET30G	1	(Onetouch Delica Plus Lancets)
ONETOUCH DELICA PLUS LANCET33G	1	(Onetouch Delica Plus Lancets)
ONETOUCH FINEPOINT LANCETS	1	
ONETOUCH SOLUTIONS STARTER KIT	NF	
ONETOUCH SURESOFT LANCING DEV	1	
ONETOUCH ULTRA 2 KIT W/DEVICE	1	
ONETOUCH ULTRA MINI KIT W/DEVICE	1	
ONETOUCH ULTRA TEST STRIPS	1	QL
ONETOUCH ULTRASOFT LANCETS	1	(Onetouch Ultrasoft Plus lancets)
ONETOUCH VERIO FLEX SYSTEM	1	
ONETOUCH VERIO IQ SYSTEM	1	
ONETOUCH VERIO KIT W/DEVICE	1	

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Drug Name	Drug Tier	Requirements & Limits
ONETOUGH VERIO REFLECT KIT W/DEVICE	1	
ONETOUGH VERIO TEST STRIPS	1	QL
OPTIUMEZ TEST	NF	QL
PARADIGM REAL-TIME TRANSMITTER	3	PA
PENLET II BLOOD SAMPLER	1	
PENLET II REPLACEMENT CAP	3	
PRECISION XTRA	NF	
PRECISION XTRA BLOOD GLUCOSE	NF	QL
PREMIUM BLOOD GLUCOSE TEST	NF	QL
PSS SELECT PLATFORMS	3	
QUINTET AC BLOOD GLUCOSE	NF	
QUINTET AC BLOOD GLUCOSE TEST	NF	QL
QUINTET BLOOD GLUCOSE SYSTEM	NF	
QUINTET BLOOD GLUCOSE TEST	NF	QL
RELION TRUE MET AIR GLUC METER	NF	
RELION TRUE METRIX TEST STRIPS	NF	QL
RELION ULTIMA GLUCOSE SYSTEM	NF	
RELION ULTIMA TEST	NF	QL
SURESTEP PRO LINEARITY	1	
TRUE FOCUS BLOOD GLUCOSE STRIP	NF	QL
TRUE METRIX AIR GLUCOSE METER	NF	
TRUE METRIX BLOOD GLUCOSE TEST	NF	QL
TRUE METRIX GO GLUCOSE METER	NF	
TRUE METRIX METER KIT	NF	
TRUE METRIX PRO BLOOD GLUCOSE	NF	QL
TRUETRACK BLOOD GLUCOSE DEVICE	NF	
TRUETRACK TEST	NF	QL
UNISTRIP1 GENERIC	NF	QL

Drug Name	Drug Tier	Requirements & Limits
<b>Diabetes - Insulin</b>		
ADMELOG	NF	QL
ADMELOG SOLOSTAR	NF	QL
AFREZZA	NF	PA, QL
BASAGLAR KWIKPEN	NF	QL
HUMALOG	2	QL
HUMALOG KWIKPEN	2	QL
HUMALOG MIX 50/50 KWIKPEN	2	QL
HUMALOG MIX 50/50 VIAL	2	QL
HUMALOG MIX 75/25 KWIKPEN	2	QL
HUMALOG MIX 75/25 VIAL	2	QL
HUMALOG U-100 JUNIOR KWIKPEN	2	QL
HUMULIN 70/30 KWIKPEN	2	QL
HUMULIN 70/30 VIAL	2	QL
HUMULIN N KWIKPEN	2	QL
HUMULIN N VIAL	2	QL
HUMULIN R U-500 KWIKPEN	2	QL
HUMULIN R U-500 VIAL	2	QL
HUMULIN R VIAL	2	QL
INSULIN ASPART	NF	ST, QL
INSULIN ASPART FLEXPEN	NF	ST, QL
INSULIN ASPART PENFILL	NF	ST, QL
INSULIN GLARGINE	NF	QL
INSULIN GLARGINE SOLOSTAR	NF	QL
INSULIN LISPRO	NF	QL
INSULIN LISPRO (1 UNIT DIAL)	NF	QL
INSULIN LISPRO JUNIOR KWIKPEN	NF	QL
INSULIN LISPRO PROT & LISPRO	NF	QL
LANTUS SOLOSTAR	2	QL
LANTUS U-100 VIAL	2	QL
LEVEMIR U-100 FLEXTOUCH	NF	PA, QL
LEVEMIR U-100 VIAL	NF	PA, ST, QL
LYUMJEV KWIKPEN	2	QL
LYUMJEV VIAL	2	QL
NOVOLIN 70/30 FLEXPEN	NF	ST, QL
NOVOLIN 70/30 FLEXPEN RELION	NF	ST, QL
NOVOLIN 70/30 RELION	NF	ST, QL
NOVOLIN 70/30 VIAL	NF	ST, QL

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Drug Name	Drug Tier	Requirements & Limits
NOVOLIN N FLEXPEN	NF	ST, QL
NOVOLIN N FLEXPEN RELION	NF	ST, QL
NOVOLIN N RELION	NF	ST, QL
NOVOLIN N VIAL	NF	ST, QL
NOVOLIN R FLEXPEN	NF	ST, QL
NOVOLIN R FLEXPEN RELION	NF	ST, QL
NOVOLIN R RELION	NF	ST, QL
NOVOLIN R VIAL	NF	ST, QL
NOVOLOG FLEXPEN	NF	ST, QL
NOVOLOG FLEXPEN RELION	NF	ST, QL
NOVOLOG PENFILL	NF	ST, QL
NOVOLOG RELION	NF	ST, QL
NOVOLOG U-100 VIAL	NF	ST, QL
TOUJEO MAX SOLOSTAR	3	QL
TOUJEO SOLOSTAR	3	QL
TRESIBA	NF	QL
TRESIBA FLEXTOUCH	NF	QL
<b>Diabetes - Non-Insulin Agents</b>		
ACTOS	NF	QL
ADLYXIN	NF	PA, ST, QL
ADLYXIN STARTER PACK	NF	PA, ST, QL
ALOGLIPTIN BENZOATE	NF	QL
ALOGLIPTIN-METFORMIN HCL	NF	QL
ALOGLIPTIN-PIOGLITAZONE	NF	QL
AMARYL	NF	
BAQSIMI ONE PACK	2	QL
BAQSIMI TWO PACK	2	QL
BYDUREON BCISE AUTOINJECTOR	3	PA, ST, QL
BYETTA 10 MCG PEN	3	PA, ST, QL
BYETTA 5 MCG PEN	3	PA, ST, QL
FARXIGA	NF	ST, QL
glimepiride	1	
glipizide er	1	
glipizide ir	1	
glipizide xl	1	
glucagon emergency kit 1 mg injection 1 mg	2	QL
GLUCAGON EMERGENCY KIT 1 MG INJECTION 1 MG	NF	QL

Drug Name	Drug Tier	Requirements & Limits
GLUCOTROL XL	4	
GLUMETZA	NF	PA
glyburide oral	1	
glyburide-metformin	1	
GLYXAMBI	2	ST, QL
JANUVIA	NF	ST, QL
JARDIANCE	2	ST, QL
JENTADUETO	2	QL
JENTADUETO XR	2	QL
KAZANO	2	QL
KOMBIGLYZE XR	2	QL
metformin hcl er	1	
metformin hcl er (mod)	NF	PA
metformin hcl er (osm)	NF	PA
metformin hcl oral solution	3	
metformin hcl oral tablet 1000 mg, 500 mg, 850 mg	1	
metformin hcl oral tablet 625 mg	NF	
MOUNJARO	3	PA, ST, QL
NESINA	2	QL
ONGLYZA	2	QL
OSENI	2	QL
OZEMPIC SUBCUTANEOUS SOLUTION PEN-INJECTOR 2 MG/1.5ML, 4 MG/3ML	3	PA, ST, QL
OZEMPIC SUBCUTANEOUS SOLUTION PEN-INJECTOR 8 MG/3ML	3	PA, ST
pioglitazone hcl	1	QL
RIOMET	NF	
RYBELSUS	3	PA, ST, QL
SOLIQUA	2	QL
SYMLINPEN 120	NF	QL
SYMLINPEN 60	NF	QL
SYNJARDY	2	QL
SYNJARDY XR	2	QL
TRADJENTA	2	QL
TRIJARDY XR	2	QL
TRULICITY	3	PA, ST, QL
VICTOZA SOLUTION PEN-INJECTOR 18 MG/3ML SUBCUTANEOUS	3	PA, ST, (2 Pak), QL

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Drug Name	Drug Tier	Requirements & Limits
VICTOZA SOLUTION PEN-INJECTOR 18 MG/3ML SUBCUTANEOUS	3	PA, ST, (3 Pak), QL
ZEGALOGUE SUBCUTANEOUS SOLUTION AUTO-INJECTOR	2	QL
<b>Drugs for Blood Disorders</b>		
ADVATE	3	SP
ADYNOVATE	4	PA, SP
AFSTYLA INTRAVENOUS KIT	4	PA, SP
ALPHANATE	3	SP
ARANESP (ALBUMIN FREE)	3	QL, SP
DOPTELET	4	PA, ST, QL, SP
ELOCTATE	NF	PA, SP
EMPAVELI	3	PA, QL, SP
HEMOFIL M	3	SP
HUMATE-P	3	SP
JIVI	4	PA, SP
KOATE	3	SP
KOATE-DVI	3	SP
KOGENATE FS	3	SP
KOVALTRY	3	SP
MULPLETA	3	PA, QL, SP
NEULASTA	4	SP
NOVOEIGHT	3	SP
NUWIQ INTRAVENOUS KIT	3	SP
NUWIQ INTRAVENOUS SOLUTION RECONSTITUTED	3	SP
RECOMBINATE	3	SP
RETACRIT INJECTION SOLUTION	3	QL, SP
TAVALISSE	4	PA, QL, SP
WILATE	3	SP
ZARXIO	3	SP
ZIEXTENZO	4	SP
<b>Drugs for Sexual Dysfunction</b>		
ADDYI	4	PA, QL
CIALIS	NF	QL
IMVEXXY MAINTENANCE PACK	2	QL
IMVEXXY STARTER PACK	2	QL
INTRAROSA	NF	PA, QL
OSPHENA	3	PA, QL

Drug Name	Drug Tier	Requirements & Limits
sildenafil citrate oral tablet 100 mg, 25 mg, 50 mg	2	QL
STENDRA	4	PA, QL
tadalafil oral	2	QL
VIAGRA	NF	QL
VYLEESI	4	PA, QL
<b>Electrolytes / Vitamins</b>		
cyanocobalamin injection solution 1000 mcg/ml	1	
CYANOCOBALAMIN INJECTION SOLUTION 2000 MCG/ML	3	
DODEX	4	
DRISDOL	4	
ERGOCAL	3	
ergocalciferol oral capsule	1	
FLORIVA PLUS	3	
folic acid oral tablet 1 mg	1	
klor-con	1	
klor-con 10	1	
klor-con m10	1	
klor-con m15	3	
klor-con m20	1	
K-TAB	3	
LOKELMA	3	PA, QL
multi-vitamin/fluoride	1	
multivitamin/fluoride tablet chewable 0.25 mg oral (rx)	1	
MULTIVITAMIN/FLUORIDE TABLET CHEWABLE 0.25 MG ORAL (RX)	3	
multivitamin/fluoride tablet chewable 0.5 mg oral	1	
MULTIVITAMIN/FLUORIDE TABLET CHEWABLE 0.5 MG ORAL	3	
multivitamin/fluoride tablet chewable 1 mg oral	1	
MULTIVITAMIN/FLUORIDE TABLET CHEWABLE 1 MG ORAL	3	
MULTI-VIT-FLOR	3	
NASCOBAL	4	
POLY-VI-FLOR	3	

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Drug Name	Drug Tier	Requirements & Limits
potassium chloride crys er oral tablet extended release 10 meq, 20 meq	1	
potassium chloride crys er oral tablet extended release 15 meq	3	
potassium chloride er	1	
potassium chloride oral packet	1	
potassium chloride oral solution 20 meq/15ml (10%), 40 meq/15ml (20%)	1	
potassium citrate er	1	
PRENA1 PEARL	3	
QUFLORA PEDIATRIC	3	
UROCIT-K 10	4	
UROCIT-K 15	4	
UROCIT-K 5	4	
VELTASSA	3	PA, QL
vitamin d (ergocalciferol) oral capsule 1.25 mg (50000 ut), 50000 unit	1	
VITAPEARL	3	
<b>Gastrointestinal Agents - Drugs for Acid Reflux and Ulcer</b>		
ACIPHEX	NF	QL
CARAFATE	NF	
CYTOTEC	4	
DEXILANT	NF	QL
DEXLANSOPRAZOLE	NF	QL
famotidine oral suspension reconstituted	1	
FIRST-OMEPRAZOLE	3	PA
misoprostol oral	1	
OMECLAMOX-PAK	4	QL
omeprazole oral capsule delayed release	1	
OMEPRAZOLE+SYRSPEND SF ALKA	3	PA
pantoprazole sodium oral packet	NF	
pantoprazole sodium oral tablet delayed release	1	
PROTONIX ORAL	NF	
PYLERA	NF	QL
RABEPRAZOLE SODIUM ORAL CAPSULE SPRINKLE	NF	QL

Drug Name	Drug Tier	Requirements & Limits
rabeprazole sodium oral tablet delayed release	2	QL
sucralfate oral suspension	3	
sucralfate oral tablet	1	
<b>Gastrointestinal Agents - Drugs for Bowel, Intestine and Stomach Conditions</b>		
ANASPAZ	2	
CLENPIQ	3	
dicyclomine hcl oral	1	
diphenoxylate-atropine	1	
ED-SPAZ	3	
gavilyte-c	1	H
gavilyte-g	1	QL, H
glycopyrrolate oral tablet 1 mg, 2 mg	1	
GOLYTELY	4	QL
hyoscyamine sulfate er	1	
hyoscyamine sulfate oral	1	
hyoscyamine sulfate sl	1	
hyoscyamine sulfate sublingual	1	
hyosyne	1	
LEVBID	4	
LEVSIN ORAL	4	
LEVSIN/SL	4	
LINZESS	2	PA, QL
LOMOTIL	4	
MOTEGRITY	3	PA, QL
MOVIPREP	3	QL
NA SULFATE-K SULFATE-MG SULF	3	QL
NULEV	4	
OSCIMIN	4	
peg-3350/electrolytes	1	QL, H
peg-3350/electrolytes/ascorbat	3	QL
peg-kcl-nacl-nasulf-na asc-c	3	QL
PLENVU	3	QL
RELTONE	NF	
SUPREP BOWEL PREP KIT	3	QL
SYMPROIC	2	PA, QL
URSO 250	NF	
URSO FORTE	NF	

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Drug Name	Drug Tier	Requirements & Limits
URSODIOL ORAL CAPSULE 200 MG, 400 MG	NF	
ursodiol oral capsule 300 mg	1	
ursodiol oral tablet	1	
VIBERZI	4	PA, QL
ZELNORM	3	PA, ST, QL

#### Genetic or Enzyme Disorder - Drugs for Replacement, Modification, Treatment

CERDELGA	3	PA, SP
CREON	2	
CUPRIMINE	NF	SP
DEPEN TITRATABS	3	SP
ENDARI	4	PA, QL
nitisinone	NF	PA, SP
NITYR	NF	PA
ORFADIN	3	PA, SP
PANCREAZE	NF	ST
penicillamine oral capsule	NF	SP
penicillamine oral tablet	2	SP
PERTZYE	4	ST
STRENSIQ	3	PA, QL, SP
SYPRINE	NF	PA, SP
TEGSEDI	3	PA, QL, SP
trientine hcl	4	PA, SP
VIOKACE	4	ST
ZENPEP	2	

#### Genitourinary Agents - Drugs for Bladder, Genital and Kidney Conditions

AURYXIA	NF	
DITROPAN XL	NF	
fesoterodine fumarate er	NF	
GELNIQUE	NF	
oxybutynin chloride er	2	
oxybutynin chloride oral	1	
phenazo oral tablet 200 mg	1	
phenazopyridine hcl oral tablet 100 mg, 200 mg	1	
PYRIDIUM	3	
THIOLA	4	SP
THIOLA EC	4	SP
TOVIAZ	NF	

Drug Name	Drug Tier	Requirements & Limits
VELPHORO	2	

#### Genitourinary Agents - Drugs for Prostate Conditions

alfuzosin hcl er	1	
finasteride oral tablet 5 mg	1	
FLOMAX	NF	
PROSCAR	NF	
tamsulosin hcl	1	
terazosin hcl	1	
UROXATRAL	NF	

#### Hormonal Agents - Hormone Replacement and Birth Control

afirmelle	1	H
ALORA	3	QL
altavera	1	H
alyacen 1/35	1	H
amethia	3	
ANNOVERA	3	QL
apri	1	H
ashlyna	3	
aubra	1	H
aubra eq	1	H
aurovela 1.5/30	1	H
aurovela 1/20	1	H
aurovela 24 fe	1	H
aurovela fe 1.5/30	1	H
aurovela fe 1/20	1	H
aviane	1	H
AYGESTIN	4	
ayuna	1	H
azurette	2	
balziva	1	H
BEYAZ	NF	
BIJUVA	3	
blisovi 24 fe	1	H
blisovi fe 1.5/30	1	H
blisovi fe 1/20	1	H
briellyn	1	H
camila	1	H
camrese	3	
camrese lo	NF	

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Drug Name	Drug Tier	Requirements & Limits
chateal	1	H
chateal eq	1	H
CLIMARA	NF	QL
CLIMARA PRO	3	QL
cryselle-28	1	H
cyred	1	H
cyred eq	1	H
dasetta 1/35	1	H
daysee	3	
deblitane	1	H
delyla	1	H
DEPO-PROVERA INTRAMUSCULAR SUSPENSION	4	QL
DEPO-PROVERA INTRAMUSCULAR SUSPENSION PREFILLED SYRINGE	4	QL
DEPO-SUBQ PROVERA 104	2	QL
desogestrel-ethinyl estradiol oral tablet 0.15-0.02/0.01 mg (21/5)	2	
desogestrel-ethinyl estradiol oral tablet 0.15-30 mg-mcg	1	H
DIVIGEL	3	
dotti	2	QL
drospiren-eth estrad-levomefol	NF	
drospirenone-ethinyl estradiol	NF	
DUAVEE	NF	QL
ELESTRIN	3	
elinest	1	H
eluryng	1	H
emoquette	1	H
enskyce	1	H
errin	1	H
estarylla	1	H
ESTRACE	NF	
estradiol oral	1	
estradiol patch twice weekly 0.025 mg/24hr transdermal	2	(generic for Minivelle), QL
estradiol patch twice weekly 0.025 mg/24hr transdermal	2	(generic for Vivelle-Dot), QL
estradiol patch twice weekly 0.0375 mg/24hr transdermal	2	(generic for Minivelle), QL

Drug Name	Drug Tier	Requirements & Limits
estradiol patch twice weekly 0.0375 mg/24hr transdermal	2	(generic for Vivelle-Dot), QL
estradiol patch twice weekly 0.05 mg/24hr transdermal	2	(generic for Minivelle), QL
estradiol patch twice weekly 0.05 mg/24hr transdermal	2	(generic for Vivelle-Dot), QL
estradiol patch twice weekly 0.075 mg/24hr transdermal	2	(generic for Minivelle), QL
estradiol patch twice weekly 0.075 mg/24hr transdermal	2	(generic for Vivelle-Dot), QL
estradiol patch twice weekly 0.1 mg/24hr transdermal	2	(generic for Minivelle), QL
estradiol patch twice weekly 0.1 mg/24hr transdermal	2	(generic for Vivelle-Dot), QL
estradiol transdermal patch weekly	1	(generic for Climara), QL
estradiol vaginal cream	4	
estradiol vaginal tablet	2	
ESTRING	2	QL
ESTROGEL	3	QL
etonogestrel-ethinyl estradiol	1	H
EVAMIST	2	
falmina	1	H
fayosim	NF	
femynor	1	H
gemmily	NF	
hailey 1.5/30	1	H
hailey 24 fe	1	H
hailey fe 1.5/30	1	H
hailey fe 1/20	1	H
heather	1	H
iclevia	2	H
incassia	1	H
introvale	2	H
isibloom	1	H
jaimiess	3	
jasmiel	NF	
jencycla	1	H
jolessa	2	H
juleber	1	H
junel 1.5/30	1	H

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Drug Name	Drug Tier	Requirements & Limits
junel 1/20	1	H
junel fe 1.5/30	1	H
junel fe 1/20	1	H
junel fe 24	1	H
kalliga	1	H
kariva	2	
kurvelo	1	H
larin 1.5/30	1	H
larin 1/20	1	H
larin 24 fe	1	H
larin fe 1.5/30	1	H
larin fe 1/20	1	H
larissia	1	H
lessina	1	H
levonorgest-eth est & eth est	NF	
levonorgest-eth estrad 91-day oral tablet 0.1-0.02 & 0.01 mg	NF	
levonorgest-eth estrad 91-day oral tablet 0.15-0.03 & 0.01 mg	3	
levonorgest-eth estrad 91-day oral tablet 0.15-0.03 mg	2	H
levonorgestrel-ethinyl estrad oral tablet 0.1-20 mg-mcg, 0.15-30 mg-mcg	1	H
levora 0.15/30 (28)	1	H
LO LOESTRIN FE	1	H
LOESTRIN 1.5/30 (21)	NF	
LOESTRIN 1/20 (21)	NF	
LOESTRIN FE 1.5/30	NF	
LOESTRIN FE 1/20	NF	
lojaimiess	NF	
loryna	NF	
LOSEASONIQUE	NF	
low-ogestrel	1	H
lo-zumandimine	NF	
lutra	1	H
lyleq	1	H
lyllana	4	QL
lyza	1	H
marlissa	1	H
medroxyprogesterone acetate intramuscular suspension	1	QL, H

Drug Name	Drug Tier	Requirements & Limits
medroxyprogesterone acetate intramuscular suspension prefilled syringe	1	H
medroxyprogesterone acetate oral	1	
MENOSTAR	3	QL
merzee	NF	
microgestin 1.5/30	1	H
microgestin 1/20	1	H
microgestin 24 fe	1	H
microgestin fe 1.5/30	1	H
microgestin fe 1/20	1	H
mili	1	H
MINASTRIN 24 FE	NF	
MINIVELLE	NF	QL
MIRCETTE	NF	
mono-lynyah	1	H
MYFEMBREE	2	PA, QL
NATAZIA	2	
necon 0.5/35 (28)	1	H
nikki	NF	
nora-be	1	H
norethin ace-eth estrad-fe oral capsule	NF	
norethin ace-eth estrad-fe oral tablet	1	H
norethindrone acetate oral	1	
norethindrone acet-ethinyl est	1	H
norethindrone oral	1	H
norgestimate-eth estradiol	1	H
norgestimate-ethinyl estradiol triphasic oral tablet 0.18/0.215/0.25 mg-25 mcg	2	
norgestimate-ethinyl estradiol triphasic oral tablet 0.18/0.215/0.25 mg-35 mcg	1	H
norlyroc	1	H
nortrel 0.5/35 (28)	1	H
nortrel 1/35 (21)	1	H
nortrel 1/35 (28)	1	H
NUVARING	NF	
nylia 1/35	1	H
nymyo	1	H

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Drug Name	Drug Tier	Requirements & Limits
ocella	NF	
philith	1	H
pimtree	2	
pirmella 1/35	1	H
portia-28	1	H
PREMARIN ORAL	NF	
PREMARIN VAGINAL	3	
PREMPHASE	3	
PREMPRO	NF	
progesterone oral	2	
PROVERA	4	
QUARTETTE	NF	
reclipsen	1	H
rivelsa	NF	
SAFYRAL	NF	
SEASONIQUE	NF	
setlakin	2	H
sharobel	1	H
simliya	2	
simpesse	3	
sprintec 28	1	H
sronyx	1	H
syeda	NF	
tarina 24 fe	1	H
tarina fe 1/20	1	H
tarina fe 1/20 eq	1	H
taysofy	NF	
TAYTULLA	NF	
tri femynor	1	H
tri-estarylla	1	H
tri-linyah	1	H
tri-lo-estarylla	2	
tri-lo-marzia	2	
tri-lo-mili	2	
tri-lo-sprintec	2	
tri-mili	1	H
tri-nymyo	1	H
tri-sprintec	1	H
tri-vylibra	1	H
tri-vylibra lo	2	

Drug Name	Drug Tier	Requirements & Limits
tyblume	1	H
tydemy	NF	
VAGIFEM	NF	
vestura	NF	
vienva	1	H
viorele	2	
VIVELLE-DOT	NF	QL
volnea	2	
vyfemla	1	H
vylibra	1	H
wera	1	H
xulane	3	H
YASMIN 28	2	
YAZ	2	
yuvaferm	2	
zafemy	3	H
zumandimine	NF	
<b>Hormonal Agents - Oral Steroids</b>		
ALKINDI SPRINKLE	NF	PA
CORTEF	4	
DEXABLISS	NF	
dexamethasone intensol	1	
dexamethasone oral elixir	1	
dexamethasone oral solution	1	
dexamethasone oral tablet	1	
dexamethasone oral tablet therapy pack	3	
DXEVO 11-DAY	NF	
HEMADY	NF	
HIDEX 6-DAY	NF	
hydrocortisone oral	1	
MEDROL ORAL TABLET 16 MG, 4 MG, 8 MG	4	
MEDROL ORAL TABLET 2 MG	2	
MEDROL ORAL TABLET 32 MG	3	
MEDROL ORAL TABLET THERAPY PACK	4	
methylprednisolone oral	1	
MILLIPRED	2	
ORAPRED ODT	4	

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Drug Name	Drug Tier	Requirements & Limits
PEDIAPRED	2	
prednisolone oral	1	
prednisolone sodium phosphate oral solution 10 mg/5ml, 25 mg/5ml, 6.7 (5 base) mg/5ml	NF	
prednisolone sodium phosphate oral solution 15 mg/5ml	1	
prednisolone sodium phosphate oral solution 20 mg/5ml	NF	QL
prednisolone sodium phosphate oral tablet dispersible	1	
prednisone intensol	1	
prednisone oral	1	
RAYOS	NF	
TAPERDEX 12-DAY	3	
TAPERDEX 6-DAY	4	
TAPERDEX 7-DAY	3	
ZCORT 7-DAY	NF	
<b>Hormonal Agents - Other</b>		
cabergoline	2	
DDAVP	NF	
DDAVP PF	NF	
desmopressin acetate injection	1	
DESMOPRESSIN ACETATE NASAL	NF	
desmopressin acetate oral	1	
desmopressin acetate pf	1	
GENOTROPIN	NF	PA, QL, SP
GENOTROPIN MINIQUICK	NF	PA, QL, SP
HUMATROPE	NF	PA, QL, SP
LANREOTIDE ACETATE	NF	SP
NOCDURNA	3	PA, QL
NORDITROPIN FLEXPPO	3	PA, QL, SP
NUTROPIN AQ NUSPIN 10	3	PA, QL, SP
NUTROPIN AQ NUSPIN 20	3	PA, QL, SP
NUTROPIN AQ NUSPIN 5	3	PA, QL, SP
OMNITROPE	NF	PA, QL, SP
ORIAHNN	2	PA, QL
ORLISSA	2	PA, QL
SOMATULINE DEPOT	NF	SP
STIMATE	NF	
ZOMACTON	NF	PA, QL, SP

Drug Name	Drug Tier	Requirements & Limits
<b>Hormonal Agents - Testosterone Replacement</b>		
ANDRODERM	2	PA, QL
ANDROGEL PUMP	NF	PA, QL
ANDROGEL TRANSDERMAL GEL 25 MG/2.5GM (1%), 40.5 MG/2.5GM (1.62%), 50 MG/5GM (1%)	NF	PA, QL
DEPO-TESTOSTERONE INTRAMUSCULAR SOLUTION 100 MG/ML	3	
DEPO-TESTOSTERONE INTRAMUSCULAR SOLUTION 200 MG/ML	4	
FORTESTA	NF	PA, QL
NATESTO	NF	PA, QL
TESTIM	2	PA, QL
testosterone cypionate intramuscular	1	
testosterone transdermal	NF	PA, QL
VOGELXO	NF	PA, QL
VOGELXO PUMP	NF	PA, QL
<b>Hormonal Agents - Thyroid</b>		
ARMOUR THYROID	3	
CYTOMEL	NF	
euthyrox	1	
levo-t	1	
LEVOTHYROXINE SODIUM ORAL CAPSULE	NF	
levothyroxine sodium oral tablet	1	
levoxyl	2	
liothyronine sodium oral	2	
methimazole oral	1	
np thyroid	1	
SYNTHROID	NF	
THYQUIDITY	NF	PA
TIROSINT	NF	
TIROSINT-SOL	NF	PA
unithroid	1	
<b>Immunological Agents - Drugs for Immune System Stimulation or Suppression</b>		
ACTEMRA ACTPEN	4	PA, ST, QL, SP
ACTEMRA SUBCUTANEOUS	4	PA, ST, QL, SP

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Drug Name	Drug Tier	Requirements & Limits
ADBRY	3	PA, SP
ASTAGRAF XL	NF	
AZASAN	4	
azathioprine oral tablet 100 mg, 75 mg	3	
azathioprine oral tablet 50 mg	1	
BERINERT	4	PA, ST, QL, SP
CELLCEPT	NF	
CIMZIA	NF	PA, SP
CIMZIA PREFILLED KIT	3	PA, QL, SP
CIMZIA STARTER KIT	3	PA, QL, SP
CINRYZE	NF	PA, QL, SP
COSENTYX (300 MG DOSE)	4	PA, ST, QL, SP
COSENTYX 150 MG/ML SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 150 MG/ML	4	PA, ST, QL, SP
COSENTYX 150 MG/ML SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 75 MG/0.5ML	4	PA, ST, QL, SP
COSENTYX SENSOREADY (300 MG)	4	PA, ST, QL, SP
COSENTYX SENSOREADY PEN	4	PA, ST, QL, SP
cyclosporine modified	1	
ENBREL MINI	NF	PA, ST, QL, SP
ENBREL SUBCUTANEOUS SOLUTION	NF	PA, ST, QL, SP
ENBREL SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	NF	PA, ST, QL, SP
ENBREL SURECLICK	NF	PA, ST, QL, SP
ENVARUS XR	NF	
FIRAZYR	NF	PA, QL, SP
gengraf	1	
HAEGARDA	3	PA, QL, SP
HUMIRA	3	PA, QL, SP
HUMIRA PEDIATRIC CROHNS START	3	PA, QL, SP
HUMIRA PEN	3	PA, QL, SP
HUMIRA PEN-CD/UC/HS STARTER	3	PA, QL, SP
HUMIRA PEN-PEDIATRIC UC START	3	PA, QL, SP
HUMIRA PEN-PS/UV/ADOL HS START	3	PA, QL, SP

Drug Name	Drug Tier	Requirements & Limits
HUMIRA PEN-PSOR/UEVIT STARTER	3	PA, QL, SP
icatibant acetate	3	PA, QL, SP
IMURAN	NF	
MAYZENT STARTER PACK	4	PA, QL, SP
methotrexate oral	1	
methotrexate sodium	1	
methotrexate sodium (pf)	1	
mycophenolate mofetil oral	1	
mycophenolate sodium	3	
MYFORTIC	NF	
NEORAL	NF	
OLUMIANT ORAL TABLET 1 MG	3	PA, QL, SP
OLUMIANT ORAL TABLET 2 MG	3	PA, QL, SP
OLUMIANT ORAL TABLET 4 MG	NF	PA, SP
ORENCIA CLICKJECT	4	PA, ST, QL, SP
ORENCIA SUBCUTANEOUS	4	PA, ST, QL, SP
OTEZLA	3	PA, QL, SP
OTREXUP	NF	QL
PROGRAF ORAL CAPSULE	4	
PROGRAF ORAL PACKET	4	PA
RAPAMUNE ORAL SOLUTION	4	
RAPAMUNE ORAL TABLET	NF	
RASUVO	2	QL
REDITREX	NF	QL
RINVOQ	3	PA, QL, SP
RUCONEST	4	PA, QL, SP
sajazir	NF	PA, QL, SP
SIMPONI	3	PA, QL, SP
sirolimus oral solution	3	
sirolimus oral tablet	1	
SKYRIZI SUBCUTANEOUS SOLUTION CARTRIDGE	NF	
SKYRIZI SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	3	PA, QL, SP
STELARA SUBCUTANEOUS SOLUTION	NF	PA, QL, SP
STELARA SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	3	PA, QL, SP
tacrolimus oral	1	
TAKHZYRO	3	PA, QL, SP

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Drug Name	Drug Tier	Requirements & Limits
TREMFYA	3	PA, QL, SP
TREXALL	2	
XELJANZ	3	PA, QL, SP
XELJANZ XR ORAL TABLET EXTENDED RELEASE 24 HOUR 11 MG	3	PA, QL, SP
XELJANZ XR ORAL TABLET EXTENDED RELEASE 24 HOUR 22 MG	3	PA, QL, SP
XOLAIR SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	3	PA, QL, SP
<b>Infertility Agents</b>		
CHORIONIC GONADOTROPIN INTRAMUSCULAR	NF	SP
CRINONE	4	ST
ENDOMETRIN	2	
FOLLISTIM AQ	2	SP
fyremadel	3	QL, SP
ganirelix acetate solution prefilled syringe 250 mcg/0.5ml subcutaneous	2	(Merck/ Organon), QL, SP
ganirelix acetate solution prefilled syringe 250 mcg/0.5ml subcutaneous	4	(Ferring), QL, SP
NOVAREL	3	SP
PREGNYL	1	SP
<b>Inflammatory Bowel Disease Agents</b>		
ANALPRAM HC	4	
ANALPRAM HC SINGLES	4	
ANALPRAM-HC EXTERNAL CREAM	4	
ANALPRAM-HC EXTERNAL LOTION	3	
APRISO	2	
ASACOL HD	NF	
AZULFIDINE	NF	
AZULFIDINE EN-TABS	NF	
budesonide er	NF	
budesonide oral	2	
CANASA	NF	
CORTIFOAM	2	
DELZICOL	NF	
DIPENTUM	NF	

Drug Name	Drug Tier	Requirements & Limits
hydrocortisone ace-pramoxine external cream 1-1 %	1	
hydrocort-pramoxine (perianal)	1	
LIALDA	NF	
mesalamine er oral capsule	NF	
mesalamine oral	NF	
mesalamine rectal enema	1	
mesalamine rectal suppository	2	QL
ORTIKOS	NF	
PENTASA	NF	
PROCORT	NF	
PROCTOFOAM HC	2	
SFROWASA	NF	
sulfasalazine oral	1	
TARPEYO	NF	PA, QL, SP
UCERIS ORAL	NF	
UCERIS RECTAL	2	
<b>Metabolic Bone Disease Agents - Drugs for Osteoporosis</b>		
alendronate sodium	1	
BINOSTO	NF	QL
BONIVA ORAL TABLET 150 MG	NF	
calcitriol oral	1	
FORTEO	NF	PA, ST, SP
FOSAMAX	4	
ibandronate sodium oral	2	
ROCALTROL	NF	
TERIPARATIDE (RECOMBINANT)	NF	PA, SP
TYMLOS	NF	PA, SP
<b>Ophthalmic Agents - Drugs for Eye Allergy, Infection and Inflammation</b>		
ACULAR	4	
ACULAR LS	4	
ACUVAIL	NF	
ALREX	4	QL
AZASITE	3	
azelastine hcl ophthalmic	1	
BESIVANCE	3	
CILOXAN	3	
ciprofloxacin hcl ophthalmic	1	
erythromycin ophthalmic	1	H-PA
EYSUVIS	4	QL

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Drug Name	Drug Tier	Requirements & Limits
ILEVRO	NF	
INVELTYS	3	
ketorolac tromethamine ophthalmic	1	
KLARITY-A	NF	
LOTEMAX OPHTHALMIC GEL	NF	
LOTEMAX OPHTHALMIC OINTMENT	3	
LOTEMAX OPHTHALMIC SUSPENSION	NF	QL
LOTEMAX SM	3	QL
loteprednol etabonate ophthalmic gel	NF	
loteprednol etabonate ophthalmic suspension	3	QL
MAXITROL	4	
moxifloxacin hcl (2x day)	3	
moxifloxacin hcl ophthalmic solution	3	
neomycin-polymyxin-dexameth ophthalmic ointment	1	
neomycin-polymyxin-dexameth ophthalmic suspension 3.5-10000-0.1	1	
NEVANAC	4	
OCUFLOX	4	
ofloxacin ophthalmic	1	
olopatadine hcl ophthalmic solution 0.1 %	3	
olopatadine hcl ophthalmic solution 0.2 %	NF	
polymyxin b-trimethoprim	1	
POLYTRIM	4	
PRED FORTE	NF	
PRED MILD	3	
prednisolone acetate ophthalmic	1	
TOBRADEX OPHTHALMIC OINTMENT	3	
TOBRADEX OPHTHALMIC SUSPENSION	4	
TOBRADEX ST	NF	
tobramycin ophthalmic	1	QL
tobramycin-dexamethasone	2	
TOBREX	3	QL

Drug Name	Drug Tier	Requirements & Limits
VIGAMOX	NF	
ZYLET	3	
<b>Ophthalmic Agents - Drugs for Glaucoma</b>		
ALPHAGAN P OPHTHALMIC SOLUTION 0.1 %	2	QL
ALPHAGAN P OPHTHALMIC SOLUTION 0.15 %	4	QL
AZOPT	NF	QL
BETIMOL	2	QL
bimatoprost ophthalmic	NF	QL
brimonidine tartrate ophthalmic solution 0.15 %	2	QL
brimonidine tartrate ophthalmic solution 0.2 %	1	
brimonidine tartrate-timolol	NF	QL
brinzolamide	2	QL
COMBIGAN	2	QL
COSOPT	4	
COSOPT PF	NF	QL
dorzolamide hcl-timolol mal	2	
dorzolamide hcl-timolol mal pf	NF	QL
ISTALOL	4	
latanoprost ophthalmic	1	
LUMIGAN	2	
RHOPRESSA	3	QL
ROCKLATAN	3	QL
timolol maleate (once-daily)	3	
timolol maleate ocudose	2	
timolol maleate ophthalmic	1	
timolol maleate pf	2	
TIMOPTIC	4	
TIMOPTIC OCUDOSE OPHTHALMIC SOLUTION 0.25 %	2	
TIMOPTIC OCUDOSE OPHTHALMIC SOLUTION 0.5 %	4	
TIMOPTIC-XE	4	
TRAVATAN Z	NF	QL
travoprost (bak free)	NF	QL
VYZULTA	NF	ST, QL
XALATAN	NF	
XELPROS	3	QL

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Drug Name	Drug Tier	Requirements & Limits
<b>Ophthalmic Agents - Drugs for Miscellaneous Eye Conditions</b>		
CEQUA	NF	PA, QL
CYCLOSPORINE IN KLARITY	NF	PA
cyclosporine ophthalmic	NF	PA, QL
FLAREX	2	
RESTASIS	NF	PA, QL
RESTASIS MULTIDOSE	NF	PA, QL
TYRVAYA	NF	PA, QL
VERKAZIA	NF	PA, QL
XIIDRA	NF	PA, QL
<b>Otic Agents - Drugs for Ear Conditions</b>		
CIPRODEX	NF	ST
ciprofloxacin-dexamethasone	NF	ST
neomycin-polymyxin-hc otic	1	
ofloxacin otic	2	
<b>Respiratory - Drugs for Anaphylaxis</b>		
AUVI-Q	2	QL
epinephrine injection solution auto-injector 0.15 mg/0.15ml	1	(generic for Adrenaclick), QL
epinephrine solution auto-injector 0.15 mg/0.3ml injection	1	(generic for EpiPen-Single Pack), QL
epinephrine solution auto-injector 0.15 mg/0.3ml injection	1	(generic for EpiPen), QL
epinephrine solution auto-injector 0.3 mg/0.3ml injection	1	(generic for EpiPen-Single Pack), QL
epinephrine solution auto-injector 0.3 mg/0.3ml injection	1	(generic for Adrenaclick), QL
epinephrine solution auto-injector 0.3 mg/0.3ml injection	1	QL
epinephrine solution auto-injector 0.3 mg/0.3ml injection	1	(generic for EpiPen), QL
EPIPEN 2-PAK	NF	QL
EPIPEN JR 2-PAK	NF	QL
SYMJEPI	2	QL
<b>Respiratory Tract / Pulmonary Agents - Drugs for Allergies, Cough, Cold</b>		
azelastine hcl nasal solution 0.1 %, 137 mcg/spray	3	
azelastine hcl nasal solution 0.15 %	NF	

Drug Name	Drug Tier	Requirements & Limits
benzonatate oral capsule 100 mg, 200 mg	1	
benzonatate oral capsule 150 mg	NF	
cyproheptadine hcl oral	1	
fluticasone propionate nasal	2	QL
hydrocodone polst-chlorphen polst er susp	NF	PA, QL
ipratropium bromide nasal	1	
levocetirizine dihydrochloride oral solution	3	
levocetirizine dihydrochloride oral tablet	1	
OMNARIS	NF	QL
promethazine hcl oral solution	1	
promethazine hcl oral syrup	1	
promethazine-codeine	1	PA, QL
promethazine-dm	1	
pseudoephedrine-bromphen-dm	1	
XHANCE	NF	QL
ZETONNA	3	QL
<b>Respiratory Tract / Pulmonary Agents - Drugs for Asthma and COPD</b>		
ADVAIR DISKUS	3	QL, RS
ADVAIR HFA	3	QL, RS
AEROCHAMBER PLUS FLO-VU	3	
AEROCHAMBER PLUS FLO-VU LARGE	3	
AEROCHAMBER PLUS FLO-VU SMALL	3	
AEROCHAMBER PLUS FLO-VU W/MASK	3	
AIRDUO DIGIHALER	NF	QL
AIRDUO RESPICLICK 113/14	NF	QL
AIRDUO RESPICLICK 232/14	NF	QL
AIRDUO RESPICLICK 55/14	NF	QL
albuterol sulfate hfa aerosol solution 108 (90 base) mcg/act inhalation	2	QL
albuterol sulfate hfa aerosol solution 108 (90 base) mcg/act inhalation	2	(ProAir HFA or Proventil HFA), QL
ALBUTEROL SULFATE HFA AEROSOL SOLUTION 108 (90 BASE) MCG/ACT INHALATION	NF	(Ventolin HFA), QL

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Drug Name	Drug Tier	Requirements & Limits
albuterol sulfate inhalation	1	
albuterol sulfate oral syrup	1	
albuterol sulfate oral tablet	3	PA
ALVESCO	NF	QL
ANORO ELLIPTA	3	QL
ARMONAIR DIGIHALER	NF	QL
ARNUITY ELLIPTA	2	QL
ASMANEX (120 METERED DOSES)	NF	QL
ASMANEX (14 METERED DOSES)	NF	QL
ASMANEX (30 METERED DOSES)	NF	QL
ASMANEX (60 METERED DOSES)	NF	QL
ASMANEX HFA	NF	QL
ATROVENT HFA	3	QL
BEVESPI AEROSPHERE	2	QL
BREO ELLIPTA	3	QL, RS
BREZTRI AEROSPHERE	3	QL, RS
budesonide inhalation	2	QL
BUDESONIDE-FORMOTEROL FUMARATE	NF	QL, RS
COMBIVENT RESPIMAT	4	QL
EASIVENT	3	
EASIVENT MASK LARGE	3	
EASIVENT MASK MEDIUM	3	
EASIVENT MASK SMALL	3	
FASENRA PEN	4	PA, QL
FLEXICHAMBER	3	
FLOVENT DISKUS	2	QL
FLOVENT HFA	2	QL
FLUTICASONE FUROATE-VILANTEROL	NF	QL, RS
FLUTICASONE PROPIONATE HFA	NF	QL
fluticasone-salmeterol inhalation aerosol powder breath activated 100-50 mcg/act, 250-50 mcg/act, 500-50 mcg/act	NF	QL, RS
FLUTICASONE-SALMETEROL INHALATION AEROSOL POWDER BREATH ACTIVATED 113-14 MCG/ACT, 232-14 MCG/ACT, 55-14 MCG/ACT	2	QL
formoterol fumarate inhalation	NF	QL
INCRUSE ELLIPTA	NF	QL

Drug Name	Drug Tier	Requirements & Limits
INSPIRACHAMBER/LARGE	3	
INSPIRACHAMBER/MEDIUM	3	
INSPIRACHAMBER/MOUTHPIECE	3	
INSPIRACHAMBER/SMALL	3	
INSPIREASE	3	
ipratropium-albuterol	2	
LEVALBUTEROL HFA INHALATION AEROSOL 45 MCG/ACT	NF	QL
montelukast sodium oral packet	2	
montelukast sodium oral tablet	1	
montelukast sodium oral tablet chewable	1	
NUCALA SUBCUTANEOUS SOLUTION AUTO-INJECTOR	4	PA, QL, SP
NUCALA SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	4	PA, QL, SP
PERFOROMIST	NF	QL
PROAIR HFA	NF	QL
PROAIR RESPICLICK	NF	QL
PROVENTIL HFA	NF	QL
PULMICORT FLEXHALER	2	QL
PULMICORT SUSPENSION	NF	QL
QVAR REDIHALER	NF	QL
SEREVENT DISKUS	2	QL
SINGULAIR ORAL PACKET	3	
SINGULAIR ORAL TABLET	NF	
SINGULAIR ORAL TABLET CHEWABLE	NF	
SPIRIVA HANDIHALER	2	QL
SPIRIVA RESPIMAT	2	QL
STIOLTO RESPIMAT	2	QL
STRIVERDI RESPIMAT	2	QL
SYMBICORT	3	QL, RS
TRELEGY ELLIPTA	3	QL, RS
VENTOLIN HFA	NF	QL
VORTEX VALVED HOLDING CHAMBER	2	
wixela inhub	NF	QL, RS
XOPENEX HFA	NF	QL
YUPELRI	4	PA, QL

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Drug Name	Drug Tier	Requirements & Limits
<b>Respiratory Tract / Pulmonary Agents - Drugs for Cystic Fibrosis</b>		
BETHKIS	NF	PA, QL, SP
BRONCHITOL	4	PA, ST, QL, SP
BRONCHITOL TOLERANCE TEST	4	PA, ST, QL, SP
KITABIS PAK	NF	PA, QL, SP
PULMOZYME	3	PA, QL, SP
TOBI NEBULIZER	NF	PA, QL, SP
TOBI PODHALER	NF	PA, QL, SP
tobramycin inhalation nebulization solution 300 mg/4ml	3	PA, QL, SP
tobramycin nebulization solution 300 mg/5ml inhalation	NF	PA, QL, SP
TOBRAMYCIN NEBULIZATION SOLUTION 300 MG/5ML INHALATION	NF	PA, QL, SP
<b>Respiratory Tract / Pulmonary Agents - Drugs for Pulmonary Hypertension</b>		
ADEMPAS	3	PA, QL, SP
bosentan	3	PA, QL, SP
OPSUMIT	3	PA, QL, SP
REMODULIN	NF	PA
TRACLEER 32 MG	2	PA, QL, SP
TRACLEER 62.5 MG, 125 MG	3	PA, QL, SP
treprostinil	NF	PA
TYVASO DPI MAINTENANCE KIT	NF	PA,SP
TYVASO DPI TITRATION KIT	NF	PA, SP
TYVASO INHALATION POWDER	NF	PA, SP
TYVASO INHALATION SOLUTION	3	PA, SP
TYVASO REFILL	3	PA, SP
TYVASO STARTER	3	PA, SP
<b>Skeletal Muscle Relaxants - Drugs for Muscle Pain and Spasm</b>		
AMRIX	NF	
BACLOFEN ORAL SOLUTION	4	PA
baclofen oral tablet	1	
carisoprodol oral tablet 250 mg	NF	
carisoprodol oral tablet 350 mg	1	
cyclobenzaprine hcl er	NF	
cyclobenzaprine hcl oral tablet 10 mg, 5 mg	1	

Drug Name	Drug Tier	Requirements & Limits
cyclobenzaprine hcl oral tablet 7.5 mg	NF	
FEXMID	NF	
FLEQSUVY	4	PA
LYVISPAH	NF	
metaxalone	3	
methocarbamol oral	1	
OZOBAX	4	PA
SOMA	NF	
tizanidine hcl oral capsule	3	
tizanidine hcl oral tablet	1	
VANADOM	NF	
ZANAFLEX	4	
<b>Sleep Disorder Agents</b>		
AMBIEN	NF	QL
AMBIEN CR	NF	QL
BELSOMRA	NF	ST, QL
DAYVIGO	NF	ST, QL
EDLUAR	NF	QL
eszopiclone	2	QL
LUNESTA	NF	QL
modafinil	2	PA, QL
PROVIGIL	NF	PA, QL
RESTORIL	4	
SUNOSI	3	PA, QL
temazepam	1	
WAKIX	4	PA, QL, SP
XYREM	NF	PA, QL, SP
XYWAV	NF	PA, QL, SP
zolpidem tartrate er	3	QL
zolpidem tartrate oral	1	QL
zolpidem tartrate sublingual	NF	QL
ZOLPIMIST	4	ST, QL

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# Index

## A

ABILIFY . . . . .	15	ADVAIR DISKUS . . . . .	37	alprazolam intensol . . . . .	16
ABSORICA . . . . .	20	ADVAIR HFA . . . . .	37	alprazolam oral . . . . .	16
ACCU-CHEK AVIVA PLUS TEST STRIPS . . . . .	23	ADVATE . . . . .	27	alprazolam xr . . . . .	16
ACCU-CHEK FASTCLIX LANCET KIT . . . . .	23	ADYNOVATE . . . . .	27	ALREX . . . . .	35
ACCU-CHEK FASTCLIX LANCETS . . . . .	23	AEROCHAMBER PLUS FLO-VU . . . . .	37	ALTACE . . . . .	16
ACCU-CHEK GUIDE KIT W/DEVICE . . . . .	23	AEROCHAMBER PLUS FLO-VU LARGE . . . . .	37	altavera . . . . .	29
ACCU-CHEK GUIDE TEST STRIPS . . . . .	23	AEROCHAMBER PLUS FLO-VU SMALL . . . . .	37	ALTOPREV . . . . .	16
ACCU-CHEK SAFE-T PRO LANCETS . . . . .	23	AEROCHAMBER PLUS FLO-VU W/MASK . . . . .	37	ALTRENO . . . . .	20
ACCU-CHEK SMARTVIEW TEST STRIPS . . . . .	23	afirmelle . . . . .	29	ALUNBRIG . . . . .	14
ACCU-CHEK SOFTCLIX LANCET DEVICE KIT . . . . .	23	AFREZZA . . . . .	25	ALVESCO . . . . .	38
ACCU-CHEK SOFTCLIX LANCETS . . . . .	23	AFSTYLA INTRAVENOUS KIT . . . . .	27	alyacen 1/35 . . . . .	29
ACCUPRIL . . . . .	16	AIMOVIG . . . . .	14	AMARYL . . . . .	26
accutane . . . . .	20	AIMOVIG SUBCUTANEOUS SOLUTION AUTO-INJECTOR 140 MG/ML . . . . .	14	AMBIEN . . . . .	39
ACCUTREND GLUCOSE . . . . .	23	AIRDUO DIGIHALER . . . . .	37	AMBIEN CR . . . . .	39
acetaminophen-codeine . . . . .	8	AIRDUO RESPICLICK 113/14 . . . . .	37	AMERGE ORAL TABLET 1 MG, 2.5 MG . . . . .	14
acetaminophen-codeine #2 . . . . .	8	AIRDUO RESPICLICK 232/14 . . . . .	37	amethia . . . . .	29
acetaminophen-codeine #3 . . . . .	8	AIRDUO RESPICLICK 55/14 . . . . .	37	amiodarone hcl oral . . . . .	16
acetaminophen-codeine #4 . . . . .	8	ALA SCALP . . . . .	20	amitriptyline hcl oral . . . . .	12
acetazolamide er . . . . .	16	ala-cort external cream 1 % . . . . .	20	amlodipine besylate oral . . . . .	16
acetazolamide oral . . . . .	16	ala-cort external cream 2.5 % . . . . .	20	amlodipine besylate-benazepril hcl . . . . .	16
ACIPHEX . . . . .	28	albuterol sulfate hfa aerosol solution 108 (90 base) mcg/act inhalation . . . . .	37	amlodipine besylate-valsartan . . . . .	16
ACTEMRA ACTPEN . . . . .	33	albuterol sulfate inhalation . . . . .	38	amnestem . . . . .	20
ACTEMRA SUBCUTANEOUS . . . . .	33	albuterol sulfate oral syrup . . . . .	38	amoxicillin . . . . .	10
ACTICLATE . . . . .	10	albuterol sulfate oral tablet . . . . .	38	amoxicillin-potassium clavulanate . . . . .	10
ACTOS . . . . .	26	ALDACTONE . . . . .	16	amoxicillin-potassium clavulanate er . . . . .	10
ACULAR . . . . .	35	ALECENSA . . . . .	14	amphetamine-dextroamphetamine . . . . .	19
ACULAR LS . . . . .	35	alendronate sodium . . . . .	35	amphetamine-dextroamphetamine er . . . . .	19
ACUVAIL . . . . .	35	alfuzosin hcl er . . . . .	29	AMPYRA . . . . .	19
acyclovir oral . . . . .	15	aliskiren fumarate . . . . .	16	AMRIX . . . . .	39
ACZONE . . . . .	20	ALKINDI SPRINKLE . . . . .	32	AMZEEQ . . . . .	20
ADBRY . . . . .	34	allopurinol oral . . . . .	13	ANALPRAM HC . . . . .	35
ADDERALL . . . . .	19	ALOGLIPTIN BENZOATE . . . . .	26	ANALPRAM HC SINGLES . . . . .	35
ADDERALL XR . . . . .	19	ALOGLIPTIN-METFORMIN HCL . . . . .	26	ANALPRAM-HC EXTERNAL CREAM . . . . .	35
ADDYI . . . . .	27	ALOGLIPTIN-PIOGLITAZONE . . . . .	26	ANALPRAM-HC EXTERNAL LOTION . . . . .	35
ADEMPAS . . . . .	39	ALORA . . . . .	29	ANAPROX DS . . . . .	9
ADHANSIA XR . . . . .	19	ALPHAGAN P OPHTHALMIC SOLUTION 0.1 % . . . . .	36	ANASPAZ . . . . .	28
ADLARITY . . . . .	12	ALPHAGAN P OPHTHALMIC SOLUTION 0.15 % . . . . .	36	anastrozole oral . . . . .	14
ADLYXIN . . . . .	26	ALPHANATE . . . . .	27	ANDRODERM . . . . .	33
ADLYXIN STARTER PACK . . . . .	26	alprazolam er . . . . .	16	ANDROGEL PUMP . . . . .	33
ADMELOG . . . . .	25			ANDROGEL TRANSDERMAL GEL 25 MG/2.5GM (1%), 40.5 MG/2.5GM (1.62%), 50 MG/5GM (1%) . . . . .	33
ADMELOG SOLOSTAR . . . . .	25			ANNOVERA . . . . .	29





ANORO ELLIPTA . . . . .	38	AVALIDE . . . . .	16	benazepril-hydrochlorothiazide . . . . .	16	
apap-caff-dihydrocodeine . . . . .	8	AVAPRO . . . . .	16	BENICAR . . . . .	16	
apri . . . . .	29	AVAR CLEANSER . . . . .	20	BENICAR HCT . . . . .	16	
APRISO . . . . .	35	AVAR LS CLEANSER . . . . .	20	benzonatate oral capsule 100 mg, 200 mg . . . . .	37	
APTENSIO XR . . . . .	19	AVAR-E EMOLLIENT . . . . .	20	benzonatate oral capsule 150 mg . . . . .	37	
ARAKODA . . . . .	14	AVAR-E GREEN . . . . .	20	BERINERT . . . . .	34	
ARANESP (ALBUMIN FREE) . . . . .	27	AVAR-E LS . . . . .	20	BESIVANCE . . . . .	35	
ARICEPT . . . . .	12	aviane . . . . .	29	betamethasone dipropionate aug external cream . . . . .	21	
ARIMIDEX . . . . .	14	avidoxy . . . . .	10	betamethasone dipropionate aug external gel . . . . .	21	
aripiprazole oral solution . . . . .	15	AVITA . . . . .	20	betamethasone dipropionate aug external lotion . . . . .	21	
aripiprazole oral tablet . . . . .	15	AVONEX PEN . . . . .	19	betamethasone dipropionate aug external ointment . . . . .	21	
aripiprazole oral tablet dispersible . . . . .	15	AVONEX PREFILLED . . . . .	19	betamethasone dipropionate external cream . . . . .	21	
ARMONAIR DIGIHALER . . . . .	38	AYGESTIN . . . . .	29	betamethasone dipropionate external lotion . . . . .	21	
ARMOUR THYROID . . . . .	33	ayuna . . . . .	29	betamethasone dipropionate external ointment . . . . .	21	
ARNUITY ELLIPTA . . . . .	38	AZASAN . . . . .	34	betamethasone dipropionate external cream . . . . .	21	
ASACOL HD . . . . .	35	AZASITE . . . . .	35	betamethasone dipropionate external lotion . . . . .	21	
asenapine maleate . . . . .	15	azathioprine oral tablet 100 mg, 75 mg . . . . .	34	BETAPACE . . . . .	16	
ashlyna . . . . .	29	azathioprine oral tablet 50 mg . . . . .	34	BETASERON . . . . .	19	
ASMANEX (120 METERED DOSES) . . . . .	38	azelaic acid external . . . . .	21	BETHKIS . . . . .	39	
ASMANEX (14 METERED DOSES) . . . . .	38	azelastine hcl nasal solution 0.1 %, 137 mcg/spray . . . . .	37	BETIMOL . . . . .	36	
ASMANEX (30 METERED DOSES) . . . . .	38	azelastine hcl nasal solution 0.15 % . . . . .	37	BEVESPI AEROSPHERE . . . . .	38	
ASMANEX (60 METERED DOSES) . . . . .	38	azelastine hcl ophthalmic . . . . .	35	bexarotene external . . . . .	14	
ASMANEX HFA . . . . .	38	azithromycin oral . . . . .	10	bexarotene oral . . . . .	14	
ASPRUZYO SPRINKLE . . . . .	16	AZOPT . . . . .	36	BEYAZ . . . . .	29	
ASTAGRAF XL . . . . .	34	AZULFIDINE . . . . .	35	BIDIL . . . . .	17	
atenolol oral . . . . .	16	AZULFIDINE EN-TABS . . . . .	35	BIJUVA . . . . .	29	
atenolol-chlorthalidone . . . . .	16	azurette . . . . .	29	BIKTARVY . . . . .	15	
ATIVAN ORAL . . . . .	16			bimatoprost ophthalmic . . . . .	36	
atomoxetine hcl . . . . .	19	<b>B</b>			BINOSTO . . . . .	35
atorvastatin calcium oral tablet 10 mg, 20 mg . . . . .	16	bac . . . . .	8	bisoprolol fumarate oral . . . . .	17	
atorvastatin calcium oral tablet 40 mg, 80 mg . . . . .	16	BACLOFEN ORAL SOLUTION . . . . .	39	bisoprolol-hydrochlorothiazide . . . . .	17	
atovaquone-proguanil hcl . . . . .	14	baclofen oral tablet . . . . .	39	blisovi 24 fe . . . . .	29	
ATRALIN . . . . .	20	BACTRIM . . . . .	10	blisovi fe 1/20 . . . . .	29	
ATROVENT HFA . . . . .	38	BACTRIM DS . . . . .	10	blisovi fe 1.5/30 . . . . .	29	
AUBAGIO . . . . .	19	BAFIERTAM . . . . .	19	BLOOD GLUCOSE TEST STRIPS . . . . .	23	
aubra . . . . .	29	balziva . . . . .	29	BONIVA ORAL TABLET 150 MG . . . . .	35	
aubra eq . . . . .	29	BAQSIMI ONE PACK . . . . .	26	BONJESTA . . . . .	13	
AUGMENTIN . . . . .	10	BAQSIMI TWO PACK . . . . .	26	bosentan . . . . .	39	
AUGMENTIN ES-600 . . . . .	10	BARACLUDE ORAL SOLUTION . . . . .	15	bp 10-1 . . . . .	21	
aurovela 1/20 . . . . .	29	BARACLUDE ORAL TABLET . . . . .	15	BREO ELLIPTA . . . . .	38	
aurovela 1.5/30 . . . . .	29	BASAGLAR KWIKPEN . . . . .	25	BREZTRI AEROSPHERE . . . . .	38	
aurovela 24 fe . . . . .	29	bd autoshield duo pen needles . . . . .	23	briellyn . . . . .	29	
aurovela fe 1/20 . . . . .	29	bd ultra-fine insulin syringes . . . . .	23	BRILINTA . . . . .	15	
aurovela fe 1.5/30 . . . . .	29	bd ultra-fine pen needles . . . . .	23	brimonidine tartrate ophthalmic solution 0.15 % . . . . .	36	
AURYXIA . . . . .	29	BELBUCA . . . . .	8			
AUSTEDO . . . . .	20	BELSOMRA . . . . .	39			
AUVI-Q . . . . .	37	benazepril hcl oral . . . . .	16			

brimonidine tartrate ophthalmic solution 0.2 % . . . . .	36	carbamazepine er oral capsule extended release 12 hour . . . . .	11	CIMZIA . . . . .	34
brimonidine tartrate-timolol . . . . .	36	carbamazepine er oral tablet extended release 12 hour . . . . .	11	CIMZIA PREFILLED KIT . . . . .	34
brinzolamide . . . . .	36	carbamazepine oral . . . . .	11	CIMZIA STARTER KIT . . . . .	34
BRIVIACT ORAL TABLET . . . . .	11	CARBATROL . . . . .	11	CINRYZE . . . . .	34
BRONCHITOL . . . . .	39	carbidopa-levodopa . . . . .	14	CIPRO ORAL TABLET . . . . .	10
BRONCHITOL TOLERANCE TEST . . . . .	39	carbidopa-levodopa er . . . . .	14	CIPRODEX . . . . .	37
budesonide er . . . . .	35	CARDIZEM . . . . .	17	ciprofloxacin hcl ophthalmic . . . . .	35
budesonide inhalation . . . . .	38	CARDIZEM CD . . . . .	17	ciprofloxacin hcl oral . . . . .	10
budesonide oral . . . . .	35	CARDIZEM LA . . . . .	17	ciprofloxacin-dexamethasone . . . . .	37
BUDESONIDE-FORMOTEROL FUMARATE . . . . .	38	CARDURA . . . . .	17	CITALOPRAM HYDROBROMIDE ORAL CAPSULE . . . . .	12
buprenorphine hcl sublingual . . . . .	10	CARETOUCH MONITOR SYSTEM . . . . .	23	citalopram hydrobromide oral solution . . . . .	12
buprenorphine hcl-naloxone hcl . . . . .	10	CARETOUCH TEST . . . . .	23	citalopram hydrobromide oral tablet . . . . .	12
bupropion hcl er (sr) . . . . .	12	carisoprodol oral tablet 250 mg . . . . .	39	claravis . . . . .	21
bupropion hcl er (xl) oral tablet extended release 24 hour 150 mg, 300 mg . . . . .	12	carisoprodol oral tablet 350 mg . . . . .	39	clarithromycin er . . . . .	10
BUPROPION HCL ER (XL) ORAL TABLET EXTENDED RELEASE 24 HOUR 450 MG . . . . .	12	CAROSPIR . . . . .	17	clarithromycin oral suspension reconstituted . . . . .	10
bupropion hcl oral . . . . .	12	cartia xt . . . . .	17	clarithromycin oral tablet . . . . .	10
buspiron hcl oral . . . . .	16	carvedilol . . . . .	17	CLENPIQ . . . . .	28
butalbital-apap-caffeine oral capsule 50-300-40 mg . . . . .	8	CATAFLAM . . . . .	9	CLEOCIN ORAL CAPSULE 150 MG, 300 MG . . . . .	10
butalbital-apap-caffeine oral capsule 50-325-40 mg . . . . .	8	cavarest . . . . .	20	CLEOCIN ORAL CAPSULE 75 MG . . . . .	10
butalbital-apap-caffeine oral tablet . . . . .	8	cefadroxil . . . . .	10	CLEOCIN-T . . . . .	21
BYDUREON BCISE AUTOINJECTOR . . . . .	26	cefdinir . . . . .	10	CLIMARA . . . . .	30
BYETTA 10 MCG PEN . . . . .	26	cefuroxime axetil . . . . .	10	CLIMARA PRO . . . . .	30
BYETTA 5 MCG PEN . . . . .	26	CELEBREX . . . . .	9	clindacin etz external swab . . . . .	21
BYSTOLIC . . . . .	17	celecoxib oral . . . . .	9	clindacin-p . . . . .	21
		CELEXA . . . . .	12	CLINDAGEL . . . . .	21
		CELLCEPT . . . . .	34	clindamycin hcl oral . . . . .	10
		CENTANY . . . . .	10	clindamycin phos-benzoyl perox external gel 1.2-5 % . . . . .	21
		CENTANY AT . . . . .	10	clindamycin phosphate external foam . . . . .	21
		cephalexin . . . . .	10	clindamycin phosphate external lotion . . . . .	21
		CEQUA . . . . .	37	clindamycin phosphate external solution . . . . .	21
		CERDELGA . . . . .	29	clindamycin phosphate external swab . . . . .	21
		chateal . . . . .	30	clindamycin phosphate gel 1 % external . . . . .	21
		chateal eq . . . . .	30	CLINDESSE . . . . .	10
		CHEMSTRIP BG LOG BOOK . . . . .	23	CLINPRO 5000 . . . . .	20
		chlorhexidine gluconate mouth/throat . . . . .	20	clobetasol propionate external cream . . . . .	21
		chlorthalidone . . . . .	17	clobetasol propionate external foam . . . . .	21
		CHORIONIC GONADOTROPIN INTRAMUSCULAR . . . . .	35	clobetasol propionate external gel . . . . .	21
		CIALIS . . . . .	27	clobetasol propionate external liquid . . . . .	21
		CIBINQO . . . . .	21		
		ciclodan . . . . .	13		
		ciclopirox external gel . . . . .	13		
		ciclopirox external shampoo . . . . .	13		
		ciclopirox external solution . . . . .	13		
		ciclopirox treatment . . . . .	13		
		CILOXAN . . . . .	35		
		CIMDUO . . . . .	15		

## C

cabergoline . . . . .	33
CALAN SR . . . . .	17
calcipotriene-betameth diprop . . . . .	21
calcitriol external . . . . .	21
calcitriol oral . . . . .	35
CALQUENCE . . . . .	14
camila . . . . .	29
camrese . . . . .	29
camrese lo . . . . .	29
CANASA . . . . .	35
capecitabine . . . . .	14
CAPEX . . . . .	21
CARAC . . . . .	21
CARAFATE . . . . .	28



clobetasol propionate external lotion . . . . .	21
clobetasol propionate external ointment . . . . .	21
clobetasol propionate external shampoo . . . . .	21
clobetasol propionate external solution . . . . .	21
CLOBEX . . . . .	21
CLOBEX SPRAY . . . . .	21
clodan external shampoo . . . . .	21
clonazepam oral . . . . .	16
clonidine hcl oral . . . . .	17
clopidogrel bisulfate oral . . . . .	15
clotrimazole-betamethasone external cream . . . . .	21
clotrimazole-betamethasone external lotion . . . . .	21
[Co-Brand Logo] *****	
COLCHICINE ORAL CAPSULE . . . . .	13
colchicine oral tablet . . . . .	13
COLCRYS . . . . .	13
colesevelam hcl . . . . .	17
COMBIGAN . . . . .	36
COMBIVENT RESPIMAT . . . . .	38
CONCERTA . . . . .	19
CONTOUR MONITOR DEVICE . . . . .	23
CONTOUR MONITOR KIT W/DEVICE . . . . .	23
CONTOUR NEXT EZ KIT W/DEVICE . . . . .	23
CONTOUR NEXT GEN MONITOR. . . . .	23
CONTOUR NEXT LINK KIT W/DEVICE . . . . .	23
CONTOUR NEXT MONITOR KIT W/DEVICE . . . . .	23
CONTOUR NEXT ONE DEVICE. . . . .	23
CONTOUR NEXT ONE KIT. . . . .	23
CONTOUR NEXT TEST STRIPS . . . . .	23
CONTOUR TEST STRIPS . . . . .	23
CONZIP . . . . .	8, 9
COPAXONE . . . . .	20
COREG . . . . .	17
coremino . . . . .	10
CORGARD . . . . .	17
CORLANOR. . . . .	17
CORTEF . . . . .	32
CORTIFOAM . . . . .	35
COSENTYX (300 MG DOSE) . . . . .	34

COSENTYX 150 MG/ML SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 150 MG/ML . . . . .	34
COSENTYX 150 MG/ML SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 75 MG/0.5ML . . . . .	34
COSENTYX SENSOREADY (300 MG). . . . .	34
COSENTYX SENSOREADY PEN. . . . .	34
COSOPT. . . . .	36
COSOPT PF . . . . .	36
COZAAR . . . . .	17
CREON . . . . .	29
CRESEMBA ORAL . . . . .	13
CRESTOR. . . . .	17
CRINONE . . . . .	35
cryselle-28 . . . . .	30
CUPRIMINE . . . . .	29
CVS ADVANCED GLUCOSE TEST . . . . .	23
CVS GLUCOSE METER TEST STRIPS . . . . .	23
cyanocobalamin injection solution 1000 mcg/ml . . . . .	27
CYANOCOBALAMIN INJECTION SOLUTION 2000 MCG/ML . . . . .	27
cyclobenzaprine hcl er . . . . .	39
cyclobenzaprine hcl oral tablet 10 mg, 5 mg . . . . .	39
cyclobenzaprine hcl oral tablet 7.5 mg. . . . .	39
CYCLOSPORINE IN KLARITY . . . . .	37
cyclosporine modified . . . . .	34
cyclosporine ophthalmic. . . . .	37
CYMBALTA. . . . .	12
cyproheptadine hcl oral . . . . .	37
cyred. . . . .	30
cyred eq . . . . .	30
CYTOMEL . . . . .	33
CYTOTEC. . . . .	28

**D**

D-CARE BLOOD GLUCOSE. . . . .	24
D-CARE GLUCOMETER. . . . .	24
dabigatran etexilate mesylate . . . . .	11
dalfampridine er. . . . .	20
dapsone external. . . . .	21
dasetta 1/35. . . . .	30
daysee . . . . .	30
DAYVIGO . . . . .	39

DDAVP . . . . .	33
DDAVP PF . . . . .	33
deblitane. . . . .	30
delyla . . . . .	30
DELZICOL . . . . .	35
DENTA 5000 PLUS . . . . .	20
DENTAGEL. . . . .	20
DEPAKOTE. . . . .	11
DEPAKOTE ER. . . . .	11
DEPAKOTE SPRINKLES. . . . .	11
DEPEN TITRATABS. . . . .	29
DEPO-PROVERA INTRAMUSCULAR SUSPENSION . . . . .	30
DEPO-PROVERA INTRAMUSCULAR SUSPENSION PREFILLED SYRINGE. . . . .	30
DEPO-SUBQ PROVERA 104 . . . . .	30
DEPO-TESTOSTERONE INTRAMUSCULAR SOLUTION 100 MG/ML . . . . .	33
DEPO-TESTOSTERONE INTRAMUSCULAR SOLUTION 200 MG/ML . . . . .	33
DERMA-SMOOTH/FS BODY. . . . .	21
DERMA-SMOOTH/FS SCALP . . . . .	21
DESCOVY. . . . .	15
desmopressin acetate injection. . . . .	33
DESMOPRESSIN ACETATE NASAL . . . . .	33
desmopressin acetate oral. . . . .	33
desmopressin acetate pf . . . . .	33
desogestrel-ethinyl estradiol oral tablet 0.15-0.02/0.01 mg (21/5) . . . . .	30
desogestrel-ethinyl estradiol oral tablet 0.15-30 mg-mcg . . . . .	30
desonide external cream . . . . .	21
desonide external gel . . . . .	21
desonide external lotion . . . . .	21
desonide external ointment . . . . .	21
DESOWEN . . . . .	21
desrx. . . . .	21
desvenlafaxine succinate er. . . . .	12
DEXABLISS . . . . .	32
dexamethasone intensol. . . . .	32
dexamethasone oral elixir. . . . .	32
dexamethasone oral solution. . . . .	32
dexamethasone oral tablet. . . . .	32
dexamethasone oral tablet therapy pack . . . . .	32
DEXCOM G4 MOBILE RECEIVER . . . . .	24
DEXCOM G4 SENSOR . . . . .	24
DEXCOM G4 TRANSMITTER . . . . .	24



DEXCOM G5 MOBILE RECEIVER . . . . .	24	DIVIGEL . . . . .	30	DUPIXENT SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 100 MG/0.67ML . . . . .	21
DEXCOM G5 SENSOR . . . . .	24	DODEX . . . . .	27	DUPIXENT SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 200 MG/1.14ML, 300 MG/2ML . . . . .	21
DEXCOM G5 TRANSMITTER . . . . .	24	donepezil hcl oral tablet 10 mg, 5 mg . . . . .	12	DUROLANE . . . . .	8
DEXCOM G6 RECEIVER . . . . .	24	donepezil hcl oral tablet 23 mg . . . . .	12	DXEVO 11-DAY . . . . .	32
DEXCOM G6 SENSOR . . . . .	24	donepezil hcl oral tablet dispersible . . . . .	12		
DEXCOM G6 TRANSMITTER . . . . .	24	DOPTelet . . . . .	27		
DEXEDRINE . . . . .	19	DORYX . . . . .	10		
DEXILANT . . . . .	28	DORYX MPC . . . . .	10		
DEXLANSOPRAZOLE . . . . .	28	dorzolamide hcl-timolol mal . . . . .	36		
dexmethylphenidate hcl . . . . .	19	dorzolamide hcl-timolol mal pf . . . . .	36		
dexmethylphenidate hcl er . . . . .	19	dotti . . . . .	30		
dextroamphetamine sulfate er . . . . .	19	DOVATO . . . . .	15		
dextroamphetamine sulfate oral solution . . . . .	19	doxazosin mesylate oral . . . . .	17		
dextroamphetamine sulfate oral tablet 10 mg, 5 mg . . . . .	19	doxepin hcl oral capsule . . . . .	12		
dextroamphetamine sulfate oral tablet 15 mg, 20 mg, 30 mg . . . . .	19	doxepin hcl oral concentrate . . . . .	12		
DHIVY . . . . .	15	doxycycline hyclate oral capsule . . . . .	10		
diazepam intensol . . . . .	16	doxycycline hyclate oral tablet 100 mg . . . . .	10		
diazepam oral . . . . .	16	doxycycline hyclate oral tablet 150 mg, 50 mg, 75 mg . . . . .	10		
DICLEGIS . . . . .	13	doxycycline hyclate oral tablet 20 mg . . . . .	10		
diclofenac potassium oral capsule . . . . .	9	doxycycline hyclate oral tablet delayed release 100 mg, 150 mg, 200 mg, 50 mg, 75 mg . . . . .	10		
diclofenac potassium oral tablet 25 mg . . . . .	9	DOXYCYCLINE HYCLATE ORAL TABLET DELAYED RELEASE 80 MG . . . . .	10		
diclofenac potassium oral tablet 50 mg . . . . .	9	doxycycline monohydrate oral capsule 100 mg, 50 mg . . . . .	10		
diclofenac sodium er . . . . .	9	doxycycline monohydrate oral capsule 150 mg, 75 mg . . . . .	10		
diclofenac sodium external gel 1 % . . . . .	9	doxycycline monohydrate oral suspension reconstituted . . . . .	10		
diclofenac sodium external solution . . . . .	9	doxycycline monohydrate oral tablet . . . . .	10		
diclofenac sodium oral . . . . .	9	doxylamine-pyridoxine . . . . .	13		
dicyclomine hcl oral . . . . .	28	DRISDOL . . . . .	27		
DIFICID . . . . .	10	DRIZALMA SPRINKLE . . . . .	12		
DIFLUCAN . . . . .	13	drosipren-eth estrad-levomefol . . . . .	30		
DILAUDID ORAL . . . . .	8	drosiprenone-ethinyl estradiol . . . . .	30		
dilt-xr . . . . .	17	DUAVEE . . . . .	30		
diltiazem hcl er . . . . .	17	duloxetine hcl oral capsule delayed release particles 20 mg, 30 mg, 60 mg . . . . .	12		
diltiazem hcl er coated beads . . . . .	17	duloxetine hcl oral capsule delayed release particles 40 mg . . . . .	12		
diltiazem hcl oral . . . . .	17	DUOPA . . . . .	15		
DIOVAN . . . . .	17	DUPIXENT SUBCUTANEOUS SOLUTION PEN-INJECTOR . . . . .	21		
DIOVAN HCT . . . . .	17				
DIPENTUM . . . . .	35				
diphenoxylate-atropine . . . . .	28				
DIPROLENE . . . . .	21				
DITROPAN XL . . . . .	29				
divalproex sodium er . . . . .	11				
divalproex sodium oral capsule delayed release sprinkle . . . . .	11				
divalproex sodium oral tablet delayed release . . . . .	11				

## E

EASIVENT . . . . .	38
EASIVENT MASK LARGE . . . . .	38
EASIVENT MASK MEDIUM . . . . .	38
EASIVENT MASK SMALL . . . . .	38
EASY TOUCH TEST . . . . .	24
EASYMAX 15 TEST . . . . .	24
EASYMAX NG BLOOD GLUCOSE . . . . .	24
EASYMAX V BLOOD GLUCOSE . . . . .	24
EC-NAPROSYN ORAL TABLET DELAYED RELEASE 375 MG . . . . .	9
EC-NAPROSYN ORAL TABLET DELAYED RELEASE 500 MG . . . . .	9
ec-naproxen . . . . .	9
ED-SPAZ . . . . .	28
EDARBI . . . . .	17
EDARBYCLOR . . . . .	17
EDLUAR . . . . .	39
efavirenz-emtricitab-tenofovir . . . . .	15
efavirenz-lamivudine-tenofovir . . . . .	15
EFFEXOR XR . . . . .	12
EFUDEX . . . . .	21
ELEPSIA XR . . . . .	11
ELESTRIN . . . . .	30
eletriptan hydrobromide . . . . .	14
elinest . . . . .	30
ELIQUIS . . . . .	11
ELIQUIS DVT/PE STARTER PACK . . . . .	11
ELOCTATE . . . . .	27
eluryng . . . . .	30
EMGALITY . . . . .	14
EMGALITY (300 MG DOSE) . . . . .	14
emoquette . . . . .	30
EMPAVELI . . . . .	27
emtricitabine-tenofovir df oral tablet 100-150 mg, 133-200 mg, 167-250 mg . . . . .	15
emtricitabine-tenofovir df oral tablet 200-300 mg . . . . .	15
enalapril maleate oral solution . . . . .	17
enalapril maleate oral tablet . . . . .	17



ENBREL MINI . . . . .	34	estradiol patch twice weekly 0.1 mg/24hr transdermal . . . . .	30	FEXMID . . . . .	39	
ENBREL SUBCUTANEOUS SOLUTION . . . . .	34	estradiol transdermal patch weekly . .	30	FINACEA . . . . .	21	
ENBREL SUBCUTANEOUS SOLUTION PREFILLED SYRINGE . .	34	estradiol vaginal cream . . . . .	30	finasteride oral tablet 5 mg . . . . .	29	
ENBREL SURECLICK . . . . .	34	estradiol vaginal tablet . . . . .	30	FIORICET . . . . .	8	
ENDARI . . . . .	29	ESTRING . . . . .	30	FIRAZYR . . . . .	34	
endocet . . . . .	8	ESTROGEL . . . . .	30	FIRST-OMEPRAZOLE . . . . .	28	
ENDOMETRIN . . . . .	35	eszopiclone . . . . .	39	FLAGYL . . . . .	10	
ENLITE GLUCOSE SENSOR . . . . .	24	etodolac . . . . .	9	FLAREX . . . . .	37	
ENOVARX-DICLOFENAC SODIUM . . .	9	etodolac er . . . . .	9	flecainide acetate . . . . .	17	
enoxaparin sodium . . . . .	11	etonogestrel-ethinyl estradiol . . . . .	30	FLEQSUVY . . . . .	39	
enskyce . . . . .	30	EUCRISA . . . . .	21	FLEXICHAMBER . . . . .	38	
ENSTILAR . . . . .	21	EUFLEXXA . . . . .	8	FLOLIPID . . . . .	17	
entecavir . . . . .	15	euthyrox . . . . .	33	FLOMAX . . . . .	29	
ENTRESTO . . . . .	17	EVAMIST . . . . .	30	FLORIVA PLUS . . . . .	27	
ENVARUSUS XR . . . . .	34	EVOCLIN . . . . .	21	FLOVENT DISKUS . . . . .	38	
EPANED . . . . .	17	EXFORGE . . . . .	17	FLOVENT HFA . . . . .	38	
EPCLUSA ORAL PACKET . . . . .	15	EXKIVITY . . . . .	14	fluconazole oral . . . . .	13	
EPCLUSA ORAL TABLET . . . . .	15	EXSERVAN . . . . .	20	fluocinolone acetonide body . . . . .	21	
epinephrine injection solution auto- injector 0.15 mg/0.15ml . . . . .	37	EXTAVIA . . . . .	20	fluocinolone acetonide external cream . . . . .	22	
epinephrine solution auto-injector 0.15 mg/0.3ml injection . . . . .	37	EXTINA . . . . .	13	fluocinolone acetonide external ointment . . . . .	22	
epinephrine solution auto-injector 0.3 mg/0.3ml injection . . . . .	37	EYSUVIS . . . . .	35	fluocinolone acetonide external solution . . . . .	22	
EPIPEN 2-PAK . . . . .	37	EZALLOR SPRINKLE . . . . .	17	fluocinolone acetonide scalp . . . . .	22	
EPIPEN JR 2-PAK . . . . .	37	ezetimibe . . . . .	17	fluocinonide external cream 0.05 % .	22	
epitol . . . . .	11	ezetimibe-simvastatin . . . . .	17	fluocinonide external cream 0.1 % . .	22	
EPRONTIA . . . . .	11	<b>F</b>			fluocinonide external gel . . . . .	22
EQ BLOOD GLUCOSE TEST . . . . .	24	falmina . . . . .	30	fluocinonide external ointment . . . . .	22	
ERGOCAL . . . . .	27	famotidine oral suspension reconstituted . . . . .	28	fluocinonide external solution . . . . .	22	
ergocalciferol oral capsule . . . . .	27, 28	FARXIGA . . . . .	26	FLUORIDEX . . . . .	20	
ERIVEDGE . . . . .	14	FASENRA PEN . . . . .	38	FLUORIDEX ENHANCED WHITENING . . . . .	20	
ERLEADA . . . . .	14	fayosim . . . . .	30	FLUORIMAX 5000 . . . . .	20	
errin . . . . .	30	febuxostat . . . . .	13	FLUROPLEX EXTERNAL CREAM 1 % . . . . .	22	
erythromycin ophthalmic . . . . .	35	FEMARA . . . . .	14	FLUOROURACIL EXTERNAL CREAM 0.5 % . . . . .	22	
escitalopram oxalate oral solution . .	12	femynor . . . . .	30, 32	fluorouracil external cream 5 % . . . .	22	
escitalopram oxalate oral tablet . . .	12	fenofibrate oral capsule 150 mg, 50 mg . . . . .	17	fluorouracil external solution . . . . .	14	
ESGIC . . . . .	8	fenofibrate oral tablet 120 mg, 40 mg, 48 mg . . . . .	17	fluoxetine hcl oral capsule . . . . .	12	
estarylla . . . . .	30	fenofibrate oral tablet 145 mg, 160 mg, 54 mg . . . . .	17	fluoxetine hcl oral capsule delayed release . . . . .	12	
ESTRACE . . . . .	30	FENOGLIDE . . . . .	17	fluoxetine hcl oral solution . . . . .	12	
estradiol oral . . . . .	30	fentanyl transdermal patch 72 hour 100 mcg/hr, 12 mcg/hr, 25 mcg/hr, 50 mcg/hr, 75 mcg/hr . . . . .	8	fluoxetine hcl oral tablet 10 mg . . . .	12	
estradiol patch twice weekly 0.025 mg/24hr transdermal . . . . .	30	fentanyl transdermal patch 72 hour 37.5 mcg/hr, 62.5 mcg/hr, 87.5 mcg/hr . . . . .	8	fluoxetine hcl oral tablet 20 mg . . . .	12	
estradiol patch twice weekly 0.0375 mg/24hr transdermal . . . . .	30	fesoterodine fumarate er . . . . .	29	fluoxetine hcl oral tablet 60 mg . . . .	12	
estradiol patch twice weekly 0.05 mg/24hr transdermal . . . . .	30			FLUTICASONE FUROATE- VILANTEROL . . . . .	38	
estradiol patch twice weekly 0.075 mg/24hr transdermal . . . . .	30			FLUTICASONE PROPIONATE HFA . .	38	





hydrocodone-acetaminophen oral tablet 10-300 mg, 5-300 mg, 7.5-300 mg	8
hydrocodone-acetaminophen oral tablet 10-325 mg, 5-325 mg, 7.5-325 mg	8
hydrocort-pramoxine (perianal)	35
hydrocortisone ace-pramoxine external cream 1-1 %	35
hydrocortisone external cream 1 %	22
hydrocortisone external cream 2.5 %	22
hydrocortisone external lotion 2.5 %	22
hydrocortisone external ointment 1 %, 2.5 %	22
hydrocortisone oral	32
hydromorphone hcl er	8
hydromorphone hcl oral	8
hydromorphone hcl rectal	8
hydroxychloroquine sulfate oral	14
hydroxyzine hcl oral	16
hydroxyzine pamoate oral	16
hyoscyamine sulfate er	28
hyoscyamine sulfate oral	28
hyoscyamine sulfate sl	28
hyoscyamine sulfate sublingual	28
hyosyne	28
HYSINGLA ER	8
HYZAAR	17

## I

ibandronate sodium oral	35
IBRANCE	14
ibuprofen oral suspension 100 mg/5ml	9
ibuprofen oral tablet 400 mg, 600 mg, 800 mg	9
icatibant acetate	34
iclevia	30
ICLUSIG ORAL TABLET	14
icosapent ethyl	17
IDHIFA	14
ILEVRO	36
IMBRUVICA ORAL TABLET	14
imiquimod external cream 3.75 %	22
imiquimod external cream 5 %	22
imiquimod pump	22
IMITREX ORAL	14
IMITREX STATDOSE REFILL	14
IMITREX STATDOSE SYSTEM	14

IMPEKLO	22
IMPOYZ	22
IMURAN	34
IMVEXXY MAINTENANCE PACK	27
IMVEXXY STARTER PACK	27
IN TOUCH	24
INBRIJA	15
incassia	30
INCRUSE ELLIPTA	38
INDERAL LA	17
INDOCIN ORAL	9
INDOCIN RECTAL	9
indomethacin er	9
INDOMETHACIN ORAL CAPSULE 20 MG	9
indomethacin oral capsule 25 mg, 50 mg	9
INSPIRACHAMBER/LARGE	38
INSPIRACHAMBER/MEDIUM	38
INSPIRACHAMBER/MOUTHPIECE	38
INSPIRACHAMBER/SMALL	38
INSPIREASE	38
INSULIN ASPART	25
INSULIN ASPART FLEXPEN	25
INSULIN ASPART PENFILL	25
INSULIN GLARGINE	25
INSULIN GLARGINE SOLOSTAR	25
INSULIN LISPRO	25
INSULIN LISPRO (1 UNIT DIAL)	25
INSULIN LISPRO JUNIOR KWIKPEN	25
INSULIN LISPRO PROT & LISPRO	25
INSULIN PEN NEEDLES	24
INTRAROSA	27
introvale	30
INTUNIV	19
INVELTYS	36
ipratropium bromide nasal	37
ipratropium-albuterol	38
irbesartan	17
irbesartan-hydrochlorothiazide	17
ISENTRESS	15
ISENTRESS HD	15
isibloom	30
isosorb dinitrate-hydralazine	17
isosorbide mononitrate	17
isosorbide mononitrate er	17
isotretinoin capsule 10 mg oral	22
isotretinoin capsule 20 mg oral	22

isotretinoin capsule 30 mg oral	22
isotretinoin capsule 40 mg oral	22
isotretinoin oral capsule 25 mg, 35 mg	22
ISTALOL	36
ivermectin oral	14

## J

jaimiess	30
jantoven	11
JANUVIA	26
JARDIANCE	26
jasmiel	30
jencycla	30
JENTADUETO	26
JENTADUETO XR	26
JIVI	27
jolessa	30
JORNAY PM	19
juleber	30
JULUCA	15
junel 1/20	31
junel 1.5/30	30
junel fe 1/20	31
junel fe 1.5/30	31
junel fe 24	31
JUST RIGHT 5000	20

## K

K-TAB	27
kalliga	31
KAPSPARGO SPRINKLE	17
kariva	31
KAZANO	26
KENALOG EXTERNAL	22
KEPPRA ORAL	11
KEPPRA XR	11
KESIMPTA	20
ketoconazole external cream	13
ketoconazole external foam	13
ketoconazole external shampoo	13
ketodan external foam	13
KETOROLAC TROMETHAMINE NASAL	9
ketorolac tromethamine ophthalmic	36
ketorolac tromethamine oral	9
KITABIS PAK	39
KLARITY-A	36



KLISYRI . . . . .	22	larissia . . . . .	31	lisinopril-hydrochlorothiazide . . . . .	17
KLONOPIN . . . . .	16	LASIX . . . . .	17	lithium carbonate er . . . . .	16
klor-con . . . . .	27	latanoprost ophthalmic . . . . .	36	lithium carbonate oral . . . . .	16
klor-con 10 . . . . .	27	LATUDA . . . . .	15	LITHOBID . . . . .	16
klor-con m10 . . . . .	27	LEDIPASVIR-SOFOSBUVIR . . . . .	15	LO LOESTRIN FE . . . . .	31
klor-con m15 . . . . .	27	lenalidomide . . . . .	14	lo-zumandimine . . . . .	31
klor-con m20 . . . . .	27	lessina . . . . .	31	LODINE . . . . .	9
KLOXXADO . . . . .	10	letrozole oral . . . . .	14	LOESTRIN 1/20 (21) . . . . .	31
KOATE . . . . .	27	LEVALBUTEROL HFA INHALATION AEROSOL 45 MCG/ACT . . . . .	38	LOESTRIN 1.5/30 (21) . . . . .	31
KOATE-DVI . . . . .	27	LEVBIID . . . . .	28	LOESTRIN FE 1/20 . . . . .	31
KOGENATE FS . . . . .	27	LEVEMIR U-100 FLEXTOUCH . . . . .	25	LOESTRIN FE 1.5/30 . . . . .	31
KOMBIGLYZE XR . . . . .	26	LEVEMIR U-100 VIAL . . . . .	25	LOFENA . . . . .	9
KOSELUGO . . . . .	14	levetiracetam er . . . . .	12	lojaimiess . . . . .	31
KOVALTRY . . . . .	27	levetiracetam oral . . . . .	12	LOKELMA . . . . .	27
KRINTAFEL . . . . .	14	levo-t . . . . .	33	LOMOTIL . . . . .	28
kurvelo . . . . .	31	levocetirizine dihydrochloride oral solution . . . . .	37	LOPID . . . . .	17
KYNMOBI . . . . .	15	levocetirizine dihydrochloride oral tablet . . . . .	37	LOPRESSOR . . . . .	17
<b>L</b>					
labetalol hcl oral . . . . .	17	levofloxacin oral . . . . .	10	LOPROX EXTERNAL SHAMPOO . . . . .	13
lacosamide oral solution . . . . .	11	levonorgest-eth est & eth est . . . . .	31	lorazepam intensol . . . . .	16
lacosamide oral tablet . . . . .	11	levonorgest-eth estrad 91-day oral tablet 0.1-0.02 & 0.01 mg . . . . .	31	lorazepam oral concentrate 2 mg/ml . . . . .	16
LAMICTAL . . . . .	11	levonorgest-eth estrad 91-day oral tablet 0.15-0.03 & 0.01 mg . . . . .	31	lorazepam oral tablet . . . . .	16
LAMICTAL ODT ORAL KIT 21 X 25 MG & 7 X 50 MG, 42 X 50 MG & 14X100 MG . . . . .	11	levonorgest-eth estrad 91-day oral tablet 0.15-0.03 mg . . . . .	31	LOREEV XR . . . . .	16
LAMICTAL ODT ORAL KIT 25 & 50 & 100 MG . . . . .	11	levonorgest-eth estrad 91-day oral tablet 0.15-0.03 mg . . . . .	31	LORTAB . . . . .	8
LAMICTAL ODT ORAL TABLET DISPERSIBLE . . . . .	11	levonorgestrel-ethinyl estrad oral tablet 0.1-20 mg-mcg, 0.15-30 mg-mcg . . . . .	31	loryna . . . . .	31
LAMICTAL STARTER . . . . .	11	levora 0.15/30 (28) . . . . .	31	losartan potassium oral . . . . .	17
LAMICTAL XR . . . . .	11	LEVOTHYROXINE SODIUM ORAL CAPSULE . . . . .	33	losartan potassium-hctz . . . . .	17
lamotrigine er . . . . .	11	levothyroxine sodium oral tablet . . . . .	33	LOSEASONIQUE . . . . .	31
lamotrigine oral kit . . . . .	11	levoxyl . . . . .	33	LOTEMAX OPHTHALMIC GEL . . . . .	36
lamotrigine oral tablet . . . . .	11	LEVSIN ORAL . . . . .	28	LOTEMAX OPHTHALMIC OINTMENT . . . . .	36
lamotrigine oral tablet chewable . . . . .	11	LEVSIN/SL . . . . .	28	LOTEMAX OPHTHALMIC SUSPENSION . . . . .	36
lamotrigine oral tablet dispersible . . . . .	11	LEXAPRO . . . . .	12	LOTEMAX SM . . . . .	36
lamotrigine starter kit-blue . . . . .	11	LIALDA . . . . .	35	LOTENSIN . . . . .	17
lamotrigine starter kit-green . . . . .	12	lidocaine external ointment 5 % . . . . .	8	LOTENSIN HCT . . . . .	17
lamotrigine starter kit-orange . . . . .	12	lidocaine external patch 5 % . . . . .	8	loteprednol etabonate ophthalmic gel . . . . .	36
LANCETS . . . . .	23, 24	lidocaine hcl mouth/throat . . . . .	20	loteprednol etabonate ophthalmic suspension . . . . .	36
LANREOTIDE ACETATE . . . . .	33	lidocaine viscous hcl . . . . .	20	LOTREL . . . . .	17
LANTUS SOLOSTAR . . . . .	25	lidocaine-prilocaine external cream . . . . .	8	lovastatin oral . . . . .	17
LANTUS U-100 VIAL . . . . .	25	LIDODERM . . . . .	8	LOVAZA . . . . .	17
larin 1/20 . . . . .	31	LINZESS . . . . .	28	LOVENOX . . . . .	11
larin 1.5/30 . . . . .	31	liothyronine sodium oral . . . . .	33	low-ogestrel . . . . .	31
larin 24 fe . . . . .	31	LIPITOR . . . . .	17	LUMIGAN . . . . .	36
larin fe 1/20 . . . . .	31	LIPOFEN . . . . .	17	LUNESTA . . . . .	39
larin fe 1.5/30 . . . . .	31	lisinopril oral . . . . .	17	lutera . . . . .	31
				lyleq . . . . .	31
				lyllana . . . . .	31





LYMEPAK . . . . .	10	metformin hcl oral tablet 625 mg. . . . .	26	microgestin 24 fe. . . . .	31
LYNPARZA . . . . .	14	methimazole oral . . . . .	33	microgestin fe 1/20 . . . . .	31
LYRICA . . . . .	20	methocarbamol oral . . . . .	39	microgestin fe 1.5/30 . . . . .	31
LYRICA CR . . . . .	20	methotrexate oral . . . . .	34	mili. . . . .	31
LYUMJEV KWIKPEN . . . . .	25	methotrexate sodium . . . . .	34	MILLIPRED . . . . .	32
LYUMJEV VIAL . . . . .	25	methotrexate sodium (pf) . . . . .	34	MINASTRIN 24 FE . . . . .	31
LYVISPAH . . . . .	39	METHYLIN . . . . .	19	MINILINK REAL-TIME TRANSMITTER . . . . .	24
lyza . . . . .	31	methylphenidate hcl er (cd) . . . . .	19	MINIPRESS . . . . .	18
<b>M</b>					
MALARONE . . . . .	14	methylphenidate hcl er (la) oral capsule extended release 24 hour 10 mg, 20 mg, 30 mg, 40 mg . . . . .	19	MINIVELLE . . . . .	30, 31
marlissa . . . . .	31	methylphenidate hcl er (la) oral capsule extended release 24 hour 60 mg . . . . .	19	MINOCYCLINE HCL ER ORAL CAPSULE EXTENDED RELEASE 24 HOUR . . . . .	10
matzim la . . . . .	17	methylphenidate hcl er (osm) . . . . .	19	minocycline hcl er oral tablet extended release 24 hour . . . . .	10
MAVENCLAD . . . . .	20	methylphenidate hcl er (xr) . . . . .	19	minocycline hcl oral capsule . . . . .	10
MAVYRET . . . . .	15	methylphenidate hcl er oral tablet extended release . . . . .	19	minocycline hcl oral tablet . . . . .	11
MAXALT . . . . .	14	methylphenidate hcl er oral tablet extended release 24 hour . . . . .	19	MINOLIRA . . . . .	11
MAXITROL . . . . .	36	methylphenidate hcl oral solution . . . . .	19	MIRAPEX ER . . . . .	15
MAXZIDE . . . . .	17	methylphenidate hcl oral tablet . . . . .	19	MIRCETTE . . . . .	31
MAXZIDE-25 . . . . .	18	methylphenidate hcl oral tablet chewable . . . . .	19	mirtazapine oral . . . . .	12
MAYZENT STARTER PACK . . . . .	34	methylprednisolone oral . . . . .	32	MIRVASO . . . . .	22
MEDROL ORAL TABLET 16 MG, 4 MG, 8 MG . . . . .	32	metoclopramide hcl oral solution . . . . .	13	misoprostol oral . . . . .	28
MEDROL ORAL TABLET 2 MG . . . . .	32	metoclopramide hcl oral tablet . . . . .	13	MITIGARE . . . . .	13
MEDROL ORAL TABLET 32 MG . . . . .	32	metoclopramide hcl oral tablet dispersible . . . . .	13	MM EASY TOUCH GLUCOSE METER . . . . .	24
MEDROL ORAL TABLET THERAPY PACK . . . . .	32	metoprolol succinate er oral tablet extended release 24 hour 100 mg, 200 mg, 50 mg . . . . .	18	modafinil . . . . .	39
medroxyprogesterone acetate intramuscular suspension . . . . .	31	metoprolol succinate er oral tablet extended release 24 hour 25 mg . . . . .	18	mometasone furoate external . . . . .	22
medroxyprogesterone acetate intramuscular suspension prefilled syringe . . . . .	31	metoprolol tartrate oral tablet 100 mg, 25 mg, 50 mg . . . . .	18	mondoxyne nl . . . . .	11
medroxyprogesterone acetate oral . . . . .	31	metoprolol tartrate oral tablet 37.5 mg, 75 mg . . . . .	18	mono-lyyah . . . . .	31
meloxicam oral capsule . . . . .	9	METROCREAM . . . . .	22	montelukast sodium oral packet . . . . .	38
MELOXICAM ORAL SUSPENSION . . . . .	9	METROGEL . . . . .	22	montelukast sodium oral tablet . . . . .	38
meloxicam oral tablet . . . . .	9	METROLOTION . . . . .	22	montelukast sodium oral tablet chewable . . . . .	38
MENOSTAR . . . . .	31	metronidazole external cream . . . . .	22	morphine sulfate (concentrate) oral solution 100 mg/5ml, 20 mg/ml . . . . .	8
mercaptopurine oral . . . . .	14	metronidazole external gel 0.75 % . . . . .	22	morphine sulfate er oral capsule extended release 24 hour . . . . .	8
merzee . . . . .	31	metronidazole external gel 1 % . . . . .	22	morphine sulfate er oral tablet extended release . . . . .	8
mesalamine er oral capsule . . . . .	35	metronidazole external lotion . . . . .	22	morphine sulfate oral . . . . .	8
mesalamine oral . . . . .	35	metronidazole oral . . . . .	10	morphine sulfate rectal . . . . .	8
mesalamine rectal enema . . . . .	35	metronidazole vaginal . . . . .	10	MOTEGRITY . . . . .	28
mesalamine rectal suppository . . . . .	35	MICARDIS . . . . .	18	MOUNJARO . . . . .	26
metaxalone . . . . .	39	MICRODOT TEST . . . . .	24	MOVIPREP . . . . .	28
metformin hcl er . . . . .	26	microgestin 1/20 . . . . .	31	moxifloxacin hcl (2x day) . . . . .	36
metformin hcl er (mod) . . . . .	26	microgestin 1.5/30 . . . . .	31	moxifloxacin hcl ophthalmic solution . . . . .	36
metformin hcl er (osm) . . . . .	26			MS CONTIN . . . . .	8
metformin hcl oral solution . . . . .	26			MULPLETA . . . . .	27
metformin hcl oral tablet 1000 mg, 500 mg, 850 mg . . . . .	26			MULTAQ . . . . .	18



MULTI-VIT-FLOR . . . . .	27	neomycin-polymyxin-dexameth ophthalmic ointment . . . . .	36	norgestimate-ethinyl estradiol triphasic oral tablet 0.18/0.215/ 0.25 mg-25 mcg. . . . .	31
multi-vitamin/fluoride . . . . .	27	neomycin-polymyxin-dexameth ophthalmic suspension 3.5-10000-0.1 . . . . .	36	norgestimate-ethinyl estradiol triphasic oral tablet 0.18/0.215/ 0.25 mg-35 mcg. . . . .	31
multivitamin/fluoride tablet chewable 0.25 mg oral (rx) . . . . .	27	neomycin-polymyxin-hc otic. . . . .	37	NORITATE . . . . .	22
multivitamin/fluoride tablet chewable 0.5 mg oral . . . . .	27	NEORAL . . . . .	34	NORLIQVA . . . . .	18
multivitamin/fluoride tablet chewable 1 mg oral . . . . .	27	NESINA . . . . .	26	norlyroc . . . . .	31
mupirocin calcium . . . . .	11	neuac external gel . . . . .	22	nortrel 0.5/35 (28) . . . . .	31
mupirocin external . . . . .	11	NEULASTA . . . . .	27	nortrel 1/35 (21) . . . . .	31
mycophenolate mofetil oral . . . . .	34	NEURONTIN . . . . .	12	nortrel 1/35 (28) . . . . .	31
mycophenolate sodium . . . . .	34	NEUTEK 2TEK TEST . . . . .	24	nortriptyline hcl oral . . . . .	13
MYDAYIS . . . . .	19	NEVANAC . . . . .	36	NORVASC . . . . .	18
MYFEMBREE . . . . .	31	NEXICLON XR . . . . .	18	NORVIR ORAL PACKET . . . . .	15
MYFORTIC . . . . .	34	NEXLETOL . . . . .	18	NORVIR ORAL SOLUTION . . . . .	15
myorisan . . . . .	22	NEXLIZET . . . . .	18	NORVIR ORAL TABLET . . . . .	15
<b>N</b>					
NA SULFATE-K SULFATE-MG SULF . . . . .	28	niacin (antihyperlipidemic) . . . . .	18	NOURIANZ . . . . .	15
nabumetone oral . . . . .	9	niacin er (antihyperlipidemic) . . . . .	18	NOVAREL . . . . .	35
nadolol oral . . . . .	18	niacor . . . . .	18	NOVOEIGHT . . . . .	27
NAFRINSE DAILY/NEUTRAL . . . . .	20	NIASPAN . . . . .	18	NOVOFINE AUTOCOVER PEN NEEDLE . . . . .	24
NAFRINSE WEEKLY . . . . .	20	nifedipine er . . . . .	18	NOVOFINE PEN NEEDLE . . . . .	24
NALOCET . . . . .	8	nifedipine er osmotic release . . . . .	18	NOVOFINE PLUS PEN NEEDLE . . . . .	24
naloxone hcl injection . . . . .	10	nifedipine oral . . . . .	18	NOVOLIN 70/30 FLEXPEN . . . . .	25
naloxone hcl nasal . . . . .	10	nikki . . . . .	31	NOVOLIN 70/30 FLEXPEN RELION . . . . .	25
naltrexone hcl oral . . . . .	10	nitisinone . . . . .	29	NOVOLIN 70/30 RELION . . . . .	25
NAPRELAN . . . . .	9	NITRO-BID . . . . .	18	NOVOLIN 70/30 RELION . . . . .	25
NAPROSYN ORAL SUSPENSION . . . . .	9	NITRO-DUR . . . . .	18	NOVOLIN 70/30 VIAL . . . . .	25
NAPROSYN ORAL TABLET . . . . .	9	NITRO-TIME . . . . .	18	NOVOLIN N FLEXPEN . . . . .	26
naproxen oral suspension . . . . .	9	nitrofurantoin macrocrystal . . . . .	11	NOVOLIN N FLEXPEN RELION . . . . .	26
naproxen oral tablet . . . . .	9	nitrofurantoin monohydrate macrocrystals . . . . .	11	NOVOLIN N RELION . . . . .	26
naproxen oral tablet delayed release . . . . .	9	nitroglycerin sublingual . . . . .	18	NOVOLIN N VIAL . . . . .	26
naproxen sodium er oral tablet extended release 24 hour 375 mg, 500 mg . . . . .	9	nitroglycerin transdermal . . . . .	18	NOVOLIN R FLEXPEN . . . . .	26
NAPROXEN SODIUM ER ORAL TABLET EXTENDED RELEASE 24 HOUR 750 MG . . . . .	9	nitroglycerin translingual . . . . .	18	NOVOLIN R FLEXPEN RELION . . . . .	26
naproxen sodium oral tablet 275 mg, 550 mg . . . . .	10	NITROLINGUAL . . . . .	18	NOVOLIN R RELION . . . . .	26
naratriptan hcl . . . . .	14	NITROMIST . . . . .	18	NOVOLIN R VIAL . . . . .	26
NARCAN . . . . .	10	NITROSTAT . . . . .	18	NOVOLOG FLEXPEN . . . . .	26
NASCOBAL . . . . .	27	NITYR . . . . .	29	NOVOLOG FLEXPEN RELION . . . . .	26
NATAZIA . . . . .	31	NOCDURNA . . . . .	33	NOVOLOG PENFILL . . . . .	26
NATESTO . . . . .	33	nora-be . . . . .	31	NOVOLOG RELION . . . . .	26
NAYZILAM . . . . .	12	NORDITROPIN FLEXPEN . . . . .	33	NOVOLOG U-100 VIAL . . . . .	26
neбиволol hcl . . . . .	18	norethin ace-eth estrad-fe oral capsule . . . . .	31	np thyroid . . . . .	33
necon 0.5/35 (28) . . . . .	31	norethin ace-eth estrad-fe oral tablet . . . . .	31	NUBEQA . . . . .	14
		norethindrone acet-ethinyl est . . . . .	31	NUCALA SUBCUTANEOUS SOLUTION AUTO-INJECTOR . . . . .	38
		norethindrone acetate oral . . . . .	31	NUCALA SUBCUTANEOUS SOLUTION PREFILLED SYRINGE . . . . .	38
		norethindrone oral . . . . .	31	NUCYNTA . . . . .	8
		norgestimate-eth estradiol . . . . .	31	NUCYNTA ER . . . . .	8



NUEDEXTA .....	20	ONETOUCH CLUB LANCETS FINE PT .....	24	oxybutynin chloride er .....	29
NULEV .....	28	ONETOUCH DELICA LANCETS 30G.....	24	oxybutynin chloride oral .....	29
NUTROPIN AQ NUSPIN 10 .....	33	ONETOUCH DELICA LANCETS 33G.....	24	OXYCODONE HCL ER .....	8
NUTROPIN AQ NUSPIN 20 .....	33	ONETOUCH DELICA PLUS LANCET30G .....	24	oxycodone hcl oral capsule .....	8
NUTROPIN AQ NUSPIN 5 .....	33	ONETOUCH DELICA PLUS LANCET33G .....	24	oxycodone hcl oral concentrate 100 mg/5ml .....	8
NUVARING.....	31	ONETOUCH FINEPOINT LANCETS ..	24	oxycodone hcl oral solution .....	8
NUVESSA.....	11	ONETOUCH SOLUTIONS STARTER KIT.....	24	oxycodone hcl oral tablet 10 mg, 15 mg, 20 mg, 30 mg .....	8
NUWIQ INTRAVENOUS KIT.....	27	ONETOUCH SURESOFT LANCING DEV.....	24	oxycodone hcl oral tablet 5 mg .....	8
NUWIQ INTRAVENOUS SOLUTION RECONSTITUTED.....	27	ONETOUCH ULTRA 2 KIT W/DEVICE .....	24	OXYCODONE-ACETAMINOPHEN ORAL SOLUTION .....	8
NUZYRA ORAL.....	11	ONETOUCH ULTRA MINI KIT W/DEVICE .....	24	OXYCODONE-ACETAMINOPHEN ORAL TABLET 10-300 MG, 5-300 MG, 7.5-300 MG.....	8
nyamyc .....	13	ONETOUCH ULTRA TEST STRIPS ..	24	oxycodone-acetaminophen oral tablet 10-325 mg, 2.5-325 mg, 5-325 mg, 7.5-325 mg.....	8
nylia 1/35 .....	31	ONETOUCH ULTRASOFT LANCETS.....	24	OXYCODONE-ACETAMINOPHEN ORAL TABLET 2.5-300 MG .....	8
nymyo .....	31	ONETOUCH VERIO FLEX SYSTEM. .	24	OXYCONTIN .....	8
nystatin external .....	13	ONETOUCH VERIO IQ SYSTEM . . .	24	OZEMPIC SUBCUTANEOUS SOLUTION PEN-INJECTOR 2 MG/1.5ML, 4 MG/3ML .....	26
nystatin mouth/throat .....	13	ONETOUCH VERIO KIT W/DEVICE .	24	OZEMPIC SUBCUTANEOUS SOLUTION PEN-INJECTOR 8 MG/3ML .....	26
nystop.....	13	ONETOUCH VERIO REFLECT KIT W/DEVICE .....	25	OZOBAX.....	39
<b>O</b>					
ocella .....	32	ONETOUCH VERIO TEST STRIPS ..	25		
OCUFLOX.....	36	ONGLYZA.....	26	<b>P</b>	
ODEFSEY.....	15	ONZETRA XSAIL.....	14	PACERONE ORAL TABLET 100 MG, 400 MG.....	18
ODOMZO .....	14	OPSUMIT.....	39	PACERONE ORAL TABLET 200 MG.....	18
ofloxacin ophthalmic.....	36	OPTIUMEZ TEST.....	25	PAMELOR .....	13
ofloxacin otic .....	37	ORAPRED ODT.....	32	PANCREAZE .....	29
olanzapine oral tablet .....	15	ORENCIA CLICKJECT .....	34	pantoprazole sodium oral packet . .	28
olanzapine oral tablet dispersible . .	15	ORENCIA SUBCUTANEOUS.....	34	pantoprazole sodium oral tablet delayed release .....	28
olmesartan medoxomil oral .....	18	ORFADIN .....	29	PARADIGM REAL-TIME TRANSMITTER .....	25
olmesartan medoxomil-hctz.....	18	ORGOVYX .....	14	paroxetine hcl er .....	13
olopatadine hcl ophthalmic solution 0.1 % .....	36	ORIAHNN.....	33	paroxetine hcl oral suspension .....	13
olopatadine hcl ophthalmic solution 0.2 %.....	36	ORLISSA.....	33	paroxetine hcl oral tablet .....	13
OLUMIANT ORAL TABLET 1 MG . . .	34	ORTIKOS .....	35	PAXIL CR .....	13
OLUMIANT ORAL TABLET 2 MG . . .	34	OSCIMIN .....	28	PAXIL ORAL SUSPENSION.....	13
OLUMIANT ORAL TABLET 4 MG . . .	34	oseltamivir phosphate oral capsule. .	15	PAXIL ORAL TABLET.....	13
OLUX .....	22	oseltamivir phosphate oral suspension reconstituted.....	15	PEDIAPRED .....	33
OMECLAMOX-PAK.....	28	OSENI.....	26	peg-3350/electrolytes.....	28
omega-3-acid ethyl esters .....	18	OSPHENA .....	27	peg-3350/electrolytes/ascorbat . . .	28
omeprazole oral capsule delayed release .....	28	OTEZLA .....	34	peg-kcl-nacl-nasulf-na asc-c .....	28
OMEPRAZOLE+SYRSPEND SF ALKA.....	28	OTREXUP.....	34		
OMNARIS.....	37	OXAYDO.....	8		
OMNIPOD 5 G5 INTRO KIT (Gen 5) .	24	oxcarbazepine .....	12		
OMNIPOD 5 G6 PODS (Gen 5) .....	24	OXTELLAR XR.....	12		
OMNITROPE .....	33				
ondansetron hcl oral .....	13				
ondansetron odt .....	13				



penicillamine oral capsule . . . . .	29	prazosin hcl oral . . . . .	18	promethazine hcl oral solution. . . . .	37
penicillamine oral tablet . . . . .	29	PRECISION XTRA. . . . .	25	promethazine hcl oral syrup. . . . .	37
penicillin v potassium . . . . .	11	PRECISION XTRA BLOOD GLUCOSE . . . . .	25	promethazine hcl oral tablet. . . . .	13
PENLET II BLOOD SAMPLER . . . . .	25	PRED FORTE. . . . .	36	promethazine hcl rectal . . . . .	13
PENLET II REPLACEMENT CAP . . . . .	25	PRED MILD . . . . .	36	promethazine-codeine . . . . .	37
PENNSAID . . . . .	10	prednisolone acetate ophthalmic . . . . .	36	promethazine-dm . . . . .	37
PENTASA . . . . .	35	prednisolone oral. . . . .	33	promethegan . . . . .	13
PERCOCET . . . . .	8	prednisolone sodium phosphate oral solution 10 mg/5ml, 25 mg/5ml, 6.7 (5 base) mg/5ml . . . . .	33	propranolol hcl er . . . . .	18
PERFOROMIST . . . . .	38	prednisolone sodium phosphate oral solution 15 mg/5ml . . . . .	33	propranolol hcl oral. . . . .	18
PERIDEX. . . . .	20	prednisolone sodium phosphate oral solution 20 mg/5ml . . . . .	33	PROSCAR . . . . .	29
periogard . . . . .	20	prednisolone sodium phosphate oral tablet dispersible . . . . .	33	PROTONIX ORAL . . . . .	28
permethrin external. . . . .	14	prednisone intensol. . . . .	33	PROVENTIL HFA . . . . .	37, 38
PERTZYE . . . . .	29	prednisone oral . . . . .	33	PROVERA. . . . .	30, 32
phenazo oral tablet 200 mg . . . . .	29	pregabalin er . . . . .	20	PROVIGIL. . . . .	39
phenazopyridine hcl oral tablet 100 mg, 200 mg. . . . .	29	pregabalin oral capsule . . . . .	20	PROZAC. . . . .	13
philith . . . . .	32	pregabalin oral solution . . . . .	20	pseudoephedrine-bromphen-dm . . . . .	37
pimecrolimus . . . . .	22	PREGNYL. . . . .	35	PSS SELECT PLATFORMS . . . . .	25
pimtrex . . . . .	32	PREMARIN ORAL. . . . .	32	PULMICORT FLEXHALER . . . . .	38
pioglitazone hcl . . . . .	26	PREMARIN VAGINAL . . . . .	32	PULMICORT SUSPENSION. . . . .	38
pirmella 1/35 . . . . .	32	PREMIUM BLOOD GLUCOSE TEST. . . . .	25	PULMOZYME . . . . .	39
PLAQUENIL . . . . .	14	premium lidocaine. . . . .	8	PURIXAN . . . . .	14
PLAVIX . . . . .	15	PREMPHASE . . . . .	32	PYLERA . . . . .	28
PLEGRIDY INTRAMUSCULAR . . . . .	20	PREMPRO . . . . .	32	PYRIDIUM . . . . .	29
PLEGRIDY STARTER PACK . . . . .	20	PRENA1 PEARL. . . . .	28		
PLEGRIDY SUBCUTANEOUS . . . . .	20	PREVIDENT 5000 BOOSTER PLUS . . . . .	20	<b>Q</b>	
PLENVU . . . . .	28	PREVIDENT 5000 DRY MOUTH . . . . .	20	QBRELIS . . . . .	18
PLEXION . . . . .	22	PREVIDENT 5000 ORTHO DEFENSE. . . . .	20	QDOLO. . . . .	9
PLEXION CLEANSER . . . . .	22	PREVIDENT 5000 PLUS. . . . .	20	QUARTETTE . . . . .	32
PLEXION CLEANSING CLOTH . . . . .	22	PREVIDENT DENTAL . . . . .	20	QUDEXY XR. . . . .	12
POLY-VI-FLOR . . . . .	27	PREVIDENT MOUTH/THROAT . . . . .	20	quetiapine fumarate . . . . .	15
polymyxin b-trimethoprim. . . . .	36	PREZCOBIX. . . . .	15	quetiapine fumarate er . . . . .	15
POLYTRIM . . . . .	36	PRISTIQ . . . . .	13	QUFLORA PEDIATRIC . . . . .	28
portia-28 . . . . .	32	PROAIR HFA . . . . .	37, 38	QUILLICHEW ER. . . . .	19
potassium chloride crys er oral tablet extended release 10 meq, 20 meq . . . . .	28	PROAIR RESPICLICK. . . . .	38	QUILLIVANT XR. . . . .	19
potassium chloride crys er oral tablet extended release 15 meq . . . . .	28	PROCARDIA XL. . . . .	18	quinapril hcl . . . . .	18
potassium chloride er . . . . .	28	PROCENTRA. . . . .	19	QUINTET AC BLOOD GLUCOSE . . . . .	25
potassium chloride oral packet . . . . .	28	prochlorperazine maleate oral . . . . .	13	QUINTET AC BLOOD GLUCOSE TEST . . . . .	25
potassium chloride oral solution 20 meq/15ml (10%), 40 meq/15ml (20%). . . . .	28	PROCORT . . . . .	35	QUINTET BLOOD GLUCOSE SYSTEM . . . . .	25
potassium citrate er. . . . .	28	PROCTOFOAM HC . . . . .	35	QUINTET BLOOD GLUCOSE TEST . . . . .	25
PRADAXA . . . . .	11	progesterone oral . . . . .	32	QVAR REDHALER . . . . .	38
PRALUENT. . . . .	18	PROGRAF ORAL CAPSULE . . . . .	34		
pramipexole dihydrochloride . . . . .	15	PROGRAF ORAL PACKET. . . . .	34	<b>R</b>	
pramipexole dihydrochloride er. . . . .	15	PROLATE. . . . .	9	RABEPRAZOLE SODIUM ORAL CAPSULE SPRINKLE . . . . .	28
pravastatin sodium . . . . .	18			rabeprazole sodium oral tablet delayed release . . . . .	28



ramipril . . . . .	18	RITALIN . . . . .	19	simvastatin oral tablet 10 mg, 20 mg, 40 mg, 5 mg . . . . .	18
RANEXA . . . . .	18	RITALIN LA . . . . .	19	simvastatin oral tablet 80 mg . . . . .	18
ranolazine er . . . . .	18	ritonavir . . . . .	15	SINEMET . . . . .	15
RAPAMUNE ORAL SOLUTION . . . . .	34	rivelsa . . . . .	32	SINGULAIR ORAL PACKET . . . . .	38
RAPAMUNE ORAL TABLET . . . . .	34	rizatriptan benzoate . . . . .	14	SINGULAIR ORAL TABLET . . . . .	38
RASUVO . . . . .	34	ROCALTROL . . . . .	35	SINGULAIR ORAL TABLET CHEWABLE . . . . .	38
RAYOS . . . . .	33	ROCKLATAN . . . . .	36	sirolimus oral solution . . . . .	34
REBIF . . . . .	20	ropinirole hcl . . . . .	15	sirolimus oral tablet . . . . .	34
REBIF REBIDOSE . . . . .	20	ropinirole hcl er . . . . .	15	SITAVIG . . . . .	15
REBIF REBIDOSE TITRATION PACK . . . . .	20	rosadan external cream . . . . .	22	SKYRIZI SUBCUTANEOUS SOLUTION CARTRIDGE . . . . .	34
REBIF TITRATION PACK . . . . .	20	rosadan external gel . . . . .	22	SKYRIZI SUBCUTANEOUS SOLUTION PREFILLED SYRINGE . . . . .	34
reclipsen . . . . .	32	rosuvastatin calcium . . . . .	18	SOAANZ . . . . .	18
RECOMBINATE . . . . .	27	roweepra . . . . .	12	sodium fluoride 5000 plus . . . . .	20
REDITREX . . . . .	34	ROXICODONE ORAL TABLET 15 MG, 30 MG . . . . .	9	sodium fluoride 5000 ppm . . . . .	20
REGLAN . . . . .	13	ROXICODONE ORAL TABLET 5 MG . . . . .	9	sodium fluoride dental . . . . .	20
RELAFEN . . . . .	10	ROXYBOND ORAL TABLET ABUSE-DETERRENT 15 MG, 30 MG . . . . .	9	sodium fluoride mouth/throat . . . . .	20
RELAFEN DS . . . . .	10	ROXYBOND ORAL TABLET ABUSE-DETERRENT 5 MG . . . . .	9	SOFOSBUVIR-VELPATASVIR . . . . .	15
relexxii . . . . .	19	RUCONEST . . . . .	34	SOLIQUA . . . . .	26
RELION TRUE MET AIR GLUC METER . . . . .	25	RUKOBIA . . . . .	15	SOLODYN . . . . .	11
RELION TRUE METRIX TEST STRIPS . . . . .	25	RYBELSUS . . . . .	26	SOLTAMOX . . . . .	14
RELION ULTIMA GLUCOSE SYSTEM . . . . .	25	RYTARY . . . . .	15	SOMA . . . . .	39
RELION ULTIMA TEST . . . . .	25			SOMATULINE DEPOT . . . . .	33
RELPAK . . . . .	14			SOOLANTRA . . . . .	22
RELSTONE . . . . .	28			sotalol hcl oral . . . . .	18
REMERON . . . . .	13			SOTYLIZE . . . . .	18
REMERON SOLTAB ORAL TABLET DISPERSIBLE 15 MG, 30 MG . . . . .	13			SPIRIVA HANDIHALER . . . . .	38
REMODULIN . . . . .	39			SPIRIVA RESPIMAT . . . . .	38
REPATHA . . . . .	18			spironolactone oral . . . . .	18
REPATHA PUSHTRONEX SYSTEM . . . . .	18			sprintec 28 . . . . .	32
REPATHA SURECLICK . . . . .	18			SPRITAM . . . . .	12
RESTASIS . . . . .	37			SPRIX . . . . .	10
RESTASIS MULTIDOSE . . . . .	37			sronyx . . . . .	32
RESTORIL . . . . .	39			sss 10-5 . . . . .	22
RETACRIT INJECTION SOLUTION . . . . .	27			STELARA SUBCUTANEOUS SOLUTION . . . . .	34
RETIN-A . . . . .	22			STELARA SUBCUTANEOUS SOLUTION PREFILLED SYRINGE . . . . .	34
REVLIMID . . . . .	14			STENDRA . . . . .	27
REXULTI . . . . .	15			STIMATE . . . . .	33
RHOFADE . . . . .	22			STIOLTO RESPIMAT . . . . .	38
RHOPRESSA . . . . .	36			STIVARGA . . . . .	14
RILUTEK . . . . .	20			STRATTERA . . . . .	19
riluzole . . . . .	20			STRENSIQ . . . . .	29
RINVOQ . . . . .	34			STRIBILD . . . . .	15
RIOMET . . . . .	26			STRIVERDI RESPIMAT . . . . .	38
RISPERDAL . . . . .	15			SUBOXONE . . . . .	10
risperidone . . . . .	15				

## S

SAFYRAL . . . . .	32
sajazir . . . . .	34
SANTYL . . . . .	22
SAPHRIS . . . . .	15
scopolamine . . . . .	13
SEASONIQUE . . . . .	32
SEREVENT DISKUS . . . . .	38
SERNIVO . . . . .	22
SEROQUEL . . . . .	15
SEROQUEL XR . . . . .	15
SERTRALINE HCL ORAL CAPSULE . . . . .	13
sertraline hcl oral concentrate . . . . .	13
sertraline hcl oral tablet . . . . .	13
setlakin . . . . .	32
sf . . . . .	20, 28
sf 5000 plus . . . . .	20
SFROWASA . . . . .	35
sharobel . . . . .	32
sildenafil citrate oral tablet 100 mg, 25 mg, 50 mg . . . . .	27
simliya . . . . .	32
simpesse . . . . .	32
SIMPONI . . . . .	34



SUBSYS . . . . .	9	SYNALAR . . . . .	23	terbinafine hcl oral . . . . .	13	
subvenite . . . . .	12	SYNJARDY . . . . .	26	terconazole . . . . .	13	
subvenite starter kit-blue . . . . .	12	SYNJARDY XR . . . . .	26	TERIPARATIDE (RECOMBINANT) . . . . .	35	
subvenite starter kit-green . . . . .	12	SYNOJOYNT . . . . .	9	TESTIM . . . . .	33	
subvenite starter kit-orange . . . . .	12	SYNTHROID . . . . .	33	testosterone cypionate intramuscular . . . . .	33	
sucalfate oral suspension . . . . .	28	SYPRINE . . . . .	29	testosterone transdermal . . . . .	33	
sucalfate oral tablet . . . . .	28			TEXACORT . . . . .	23	
sulfacetamide sod-sulfur wash . . . . .	23			THALITONE . . . . .	18	
sulfacetamide sodium-sulfur external cream 10-2 %, 10-5 % . . . . .	22	<b>T</b>			THIOLA . . . . .	29
sulfacetamide sodium-sulfur external cream 9.8-4.8 % . . . . .	22	TACLONEX . . . . .	23	THIOLA EC . . . . .	29	
sulfacetamide sodium-sulfur external liquid 10-2 %, 9.8-4.8 % . . . . .	22	tacrolimus external . . . . .	23	THYQUIDITY . . . . .	33	
sulfacetamide sodium-sulfur external liquid 10-5 %, 9-4 %, 9-4.5 % . . . . .	22	tacrolimus oral . . . . .	34	TIGLUTIK . . . . .	20	
sulfacetamide sodium-sulfur external lotion 10-5 % . . . . .	22	tadalafil oral . . . . .	27	timolol maleate (once-daily) . . . . .	36	
sulfacetamide sodium-sulfur external lotion 9.8-4.8 % . . . . .	22	TAKHZYRO . . . . .	34	timolol maleate ocudose . . . . .	36	
sulfacetamide sodium-sulfur external pad . . . . .	22	TAMIFLU ORAL CAPSULE . . . . .	16	timolol maleate ophthalmic . . . . .	36	
sulfacetamide sodium-sulfur external suspension 10-5 % . . . . .	22	TAMIFLU ORAL SUSPENSION RECONSTITUTED . . . . .	16	timolol maleate pf . . . . .	36	
sulfacetamide sodium-sulfur external suspension 8-4 % . . . . .	22	tamoxifen citrate oral tablet 10 mg . . . . .	14	TIMOPTIC . . . . .	36	
SULFACLEANSE 8/4 . . . . .	23	tamoxifen citrate oral tablet 20 mg . . . . .	14	TIMOPTIC OCUDOSE OPHTHALMIC SOLUTION 0.25 % . . . . .	36	
sulfamethoxazole-trimethoprim oral . . . . .	11	tamsulosin hcl . . . . .	29	TIMOPTIC OCUDOSE OPHTHALMIC SOLUTION 0.5 % . . . . .	36	
sulfamez wash . . . . .	23	TAPERDEX 12-DAY . . . . .	33	TIMOPTIC-XE . . . . .	36	
sulfasalazine oral . . . . .	35	TAPERDEX 6-DAY . . . . .	33	TIROSINT . . . . .	33	
sulfatrim pediatric . . . . .	11	TAPERDEX 7-DAY . . . . .	33	TIROSINT-SOL . . . . .	33	
SUMADAN WASH . . . . .	23	TARGADOX . . . . .	11	TIVICAY . . . . .	16	
sumatriptan succinate oral . . . . .	14	TARGRETIN EXTERNAL . . . . .	14	TIVICAY PD . . . . .	16	
sumatriptan succinate refill subcutaneous solution cartridge . . . . .	14	TARGRETIN ORAL . . . . .	14	TIVORBEX . . . . .	10	
sumatriptan succinate subcutaneous . . . . .	14	tarina 24 fe . . . . .	32	tizanidine hcl oral capsule . . . . .	39	
SUMAXIN . . . . .	23	tarina fe 1/20 . . . . .	32	tizanidine hcl oral tablet . . . . .	39	
SUNOSI . . . . .	39	tarina fe 1/20 eq . . . . .	32	TOBI NEBULIZER . . . . .	39	
SUPARTZ FX . . . . .	9	TARPEYO . . . . .	35	TOBI PODHALER . . . . .	39	
SUPREP BOWEL PREP KIT . . . . .	28	TASIGNA . . . . .	14	TOBRADEX OPHTHALMIC OINTMENT . . . . .	36	
SURESTEP PRO LINEARITY . . . . .	25	TAVALISSE . . . . .	27	TOBRADEX OPHTHALMIC SUSPENSION . . . . .	36	
syeda . . . . .	32	taysofy . . . . .	32	TOBRADEX ST . . . . .	36	
SYMBICORT . . . . .	38	TAYTULLA . . . . .	32	tobramycin inhalation nebulization solution 300 mg/4ml . . . . .	39	
SYMFI . . . . .	15	tazarotene external cream . . . . .	23	tobramycin nebulization solution 300 mg/5ml inhalation . . . . .	39	
SYMFI LO . . . . .	15	TAZORAC . . . . .	23	tobramycin ophthalmic . . . . .	36	
SYMJEPI . . . . .	37	TEGRETOL . . . . .	12	tobramycin-dexamethasone . . . . .	36	
SYMLINPEN 120 . . . . .	26	TEGRETOL-XR . . . . .	12	TOBREX . . . . .	36	
SYMLINPEN 60 . . . . .	26	TEGSEDI . . . . .	29	TOPAMAX . . . . .	12	
SYMPROIC . . . . .	28	TEKTURNA . . . . .	18	TOPAMAX SPRINKLE . . . . .	12	
		TEKTURNA HCT . . . . .	18	topiramate er . . . . .	12	
		telmisartan . . . . .	18	topiramate oral . . . . .	12	
		telmisartan-hctz . . . . .	18	TOPROL XL . . . . .	18	
		temazepam . . . . .	39	torse mide . . . . .	18	
		tenofovir disoproxil fumarate . . . . .	16			
		TENORETIC 100 . . . . .	18			
		TENORETIC 50 . . . . .	18			
		TENORMIN . . . . .	18			
		terazosin hcl . . . . .	29			



TOUJEO MAX SOLOSTAR . . . . .	26	triamcinolone acetonide external ointment 0.025 %, 0.1 %, 0.5 % . . . . .	23
TOUJEO SOLOSTAR . . . . .	26	triamcinolone acetonide external ointment 0.05 % . . . . .	23
TOVIAZ . . . . .	29	triamcinolone in absorbbase . . . . .	23
TRACLEER 32 MG . . . . .	39	triamterene-hctz . . . . .	18
TRACLEER 62.5 MG, 125 MG . . . . .	39	TRIANEX . . . . .	23
TRADJENTA . . . . .	26	triazolam . . . . .	16
tramadol hcl er (biphasic) . . . . .	9	TRICOR . . . . .	18
TRAMADOL HCL ER ORAL CAPSULE EXTENDED RELEASE 24 HOUR . . . . .	9	triderm external cream 0.1 % . . . . .	23
tramadol hcl er oral tablet extended release 24 hour . . . . .	9	triderm external cream 0.5 % . . . . .	23
TRAMADOL HCL ORAL SOLUTION . . . . .	9	TRIDESILON . . . . .	23
tramadol hcl oral tablet 100 mg . . . . .	9	trientine hcl . . . . .	29
tramadol hcl oral tablet 50 mg . . . . .	9	TRIJARDY XR . . . . .	26
TRANSDERM-SCOP . . . . .	13	TRILEPTAL . . . . .	12
TRAVATAN Z . . . . .	36	TRILURON . . . . .	9
travoprost (bak free) . . . . .	36	TRINTELLIX . . . . .	13
trazodone hcl oral . . . . .	13	tritocin . . . . .	23
TRELEGY ELLIPTA . . . . .	38	TRIUMEQ . . . . .	16
TREMFYA . . . . .	35	TRIUMEQ PD . . . . .	16
treprostinil . . . . .	39	TROKENDI XR . . . . .	12
TRESIBA . . . . .	26	TRUE FOCUS BLOOD GLUCOSE STRIP . . . . .	25
TRESIBA FLEXTOUCH . . . . .	26	TRUE METRIX AIR GLUCOSE METER . . . . .	25
tretinoin external cream . . . . .	23	TRUE METRIX BLOOD GLUCOSE TEST . . . . .	25
tretinoin external gel 0.01 % . . . . .	23	TRUE METRIX GO GLUCOSE METER . . . . .	25
tretinoin external gel 0.05 % . . . . .	23	TRUE METRIX METER KIT . . . . .	25
tretinoin gel 0.025 % external . . . . .	23	TRUE METRIX PRO BLOOD GLUCOSE . . . . .	25
TREXALL . . . . .	35	TRUETRACK BLOOD GLUCOSE DEVICE . . . . .	25
TREZIX . . . . .	9	TRUETRACK TEST . . . . .	25
tri femynor . . . . .	32	TRULICITY . . . . .	26
tri-estarylla . . . . .	32	TRUVADA ORAL TABLET 100-150 MG, 133-200 MG, 167-250 MG . . . . .	16
tri-linyah . . . . .	32	TRUVADA ORAL TABLET 200-300 MG . . . . .	16
tri-lo-estarylla . . . . .	32	tyblume . . . . .	32
tri-lo-marzia . . . . .	32	tydemy . . . . .	32
tri-lo-mili . . . . .	32	TYMLOS . . . . .	35
tri-lo-sprintec . . . . .	32	TYRVAYA . . . . .	37
tri-mili . . . . .	32	TYVASO DPI MAINTENANCE KIT . . . . .	39
tri-nymyo . . . . .	32	TYVASO DPI TITRATION KIT . . . . .	39
tri-sprintec . . . . .	32	TYVASO INHALATION POWDER . . . . .	39
tri-vylibra . . . . .	32	TYVASO INHALATION SOLUTION . . . . .	39
tri-vylibra lo . . . . .	32	TYVASO REFILL . . . . .	39
triamcinolone acetonide external aerosol solution . . . . .	23	TYVASO STARTER . . . . .	39
triamcinolone acetonide external cream 0.025 %, 0.1 % . . . . .	23		
triamcinolone acetonide external cream 0.5 % . . . . .	23		
triamcinolone acetonide external lotion . . . . .	23		

## U

UBRELVY . . . . .	14
UCERIS ORAL . . . . .	35
UCERIS RECTAL . . . . .	35
ULORIC . . . . .	13
ULTRAM . . . . .	9
UNISTRIP1 GENERIC . . . . .	25
unithroid . . . . .	33
UROCIT-K 10 . . . . .	28
UROCIT-K 15 . . . . .	28
UROCIT-K 5 . . . . .	28
UROXATRAL . . . . .	29
URSO 250 . . . . .	28
URSO FORTE . . . . .	28
URSODIOL ORAL CAPSULE 200 MG, 400 MG . . . . .	29
ursodiol oral capsule 300 mg . . . . .	29
ursodiol oral tablet . . . . .	29

## V

VAGIFEM . . . . .	32
valacyclovir hcl oral . . . . .	16
VALIUM . . . . .	16
VALSARTAN ORAL SOLUTION . . . . .	18
valsartan oral tablet . . . . .	18
valsartan-hydrochlorothiazide . . . . .	18
VALTOCO NASAL LIQUID 10 MG/0.1ML, 5 MG/0.1ML . . . . .	12
VALTRESX . . . . .	16
VANADOM . . . . .	39
vandazole . . . . .	11
VANOS . . . . .	23
varenicline tartrate . . . . .	10
VASCEPA . . . . .	18
VASOTEC . . . . .	18
VECTICAL . . . . .	23
VELPHORO . . . . .	29
VELTASSA . . . . .	28
VEMLIDY . . . . .	16
venlafaxine hcl . . . . .	13
venlafaxine hcl er oral capsule extended release 24 hour . . . . .	13
venlafaxine hcl er oral tablet extended release 24 hour . . . . .	13
VENTOLIN HFA . . . . .	37, 38
verapamil hcl er oral capsule extended release 24 hour 100 mg, 200 mg, 300 mg . . . . .	19



verapamil hcl er oral capsule extended release 24 hour 120 mg, 180 mg, 240 mg, 360 mg	19
verapamil hcl er oral tablet extended release	19
verapamil hcl oral	19
VERDESO	23
VERELAN	19
VERELAN PM	19
VERKAZIA	37
VERQUVO	19
VERZENIO	14
vestura	32
VIAGRA	27
VIBERZI	29
VIBRAMYCIN ORAL CAPSULE	11
VIBRAMYCIN ORAL SUSPENSION RECONSTITUTED	11
VICTOZA SOLUTION PEN- INJECTOR 18 MG/3ML SUBCUTANEOUS	26, 27
vienva	32
VIGAMOX	36
VIIBRYD	13
VIIBRYD STARTER PACK	13
vilazodone hcl	13
VIMPAT ORAL SOLUTION	12
VIMPAT ORAL TABLET	12
VIOKACE	29
viorele	32
VIREAD ORAL POWDER	16
VIREAD ORAL TABLET 150 MG, 200 MG, 250 MG	16
VIREAD ORAL TABLET 300 MG	16
VISTARIL	16
vitamin d (ergocalciferol) oral capsule 1.25 mg (50000 ut), 50000 unit	28
VITAPEARL	28
VITRAKVI	14
VIVELLE-DOT	30, 32
VOGELXO	33
VOGELXO PUMP	33
volnea	32
VORTEX VALVED HOLDING CHAMBER	38
VOSEVI	16
VRAYLAR ORAL CAPSULE	15
VTOL LQ	9
vyfemla	32
VYLEESI	27

vylibra	32
VYTORIN	19
VYVANSE	19
VYZULTA	36

## W

WAKIX	39
warfarin sodium oral	11
WELCHOL	19
WELLBUTRIN SR	13
WELLBUTRIN XL	13
wera	32
WILATE	27
wixela inhub	38
WYNZORA	23

## X

XALATAN	36
XANAX	16
XANAX XR	16
XARELTO	11
XARELTO STARTER PACK	11
XCOPRI ORAL TABLET 100 MG, 150 MG, 200 MG, 50 MG	12
XELJANZ	35
XELJANZ XR ORAL TABLET EXTENDED RELEASE 24 HOUR 11 MG	35
XELJANZ XR ORAL TABLET EXTENDED RELEASE 24 HOUR 22 MG	35
XELODA	14
XELPROS	36
XENLETA ORAL	11
XEPI	11
XHANCE	37
XIIDRA	37
XIMINO	11
XOFLUZA (40 MG DOSE)	16
XOFLUZA (80 MG DOSE)	16
XOLAIR SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	35
XOLEGEL	13
XOPENEX HFA	38
XTAMPZA ER	9
xulane	32
XYREM	39
XYWAV	39

## Y

YASMIN 28	32
YAZ	32
YUPELRI	38
yuvafem	32

## Z

zafemy	32
ZANAFLEX	39
ZARXIO	27
ZCORT 7-DAY	33
ZEBUTAL	9
ZEGALOGUE SUBCUTANEOUS SOLUTION AUTO-INJECTOR	27
ZEJULA	14
ZELNORM	29
ZEMBRACE SYMTOUCH	14
zenatane	23
ZENPEP	29
ZENZEDI	19
ZEPATIER	16
ZEPOSIA	20
ZEPOSIA 7-DAY STARTER PACK	20
ZEPOSIA STARTER KIT	20
ZESTORETIC	19
ZESTRIL	19
ZETIA	19
ZETONNA	37
ZIAC ORAL TABLET 10-6.25 MG, 2.5-6.25 MG	19
ZIAC ORAL TABLET 5-6.25 MG	19
ZIEXTENZO	27
ZILXI	23
ZIMHI	10
ziprasidone hcl	15
ZIPSOR	10
ZITHROMAX ORAL	11
ZITHROMAX TRI-PAK	11
ZITHROMAX Z-PAK	11
ZOCOR	19
ZOLMITRIPTAN NASAL SOLUTION 2.5 MG	14
ZOLOFT	13
zolpidem tartrate er	39
zolpidem tartrate oral	39
zolpidem tartrate sublingual	39
ZOLPIMIST	39
ZOMACTON	33





ZOMIG NASAL SOLUTION 2.5 MG . .	14
ZOMIG NASAL SOLUTION 5 MG . . .	14
ZONEGRAN . . . . .	12
zonisamide oral . . . . .	12
ZONTIVITY . . . . .	15
ZOVIRAX ORAL . . . . .	16
ZTLIDO . . . . .	9
ZUBSOLV . . . . .	10
zumandimine . . . . .	32
ZYCLARA . . . . .	23
ZYCLARA PUMP . . . . .	23
ZYLET . . . . .	36
ZYLOPRIM . . . . .	13
ZYPREXA ORAL . . . . .	15
ZYPREXA ZYDIS . . . . .	15

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**Online:** [UHC\\_Civil\\_Rights@uhc.com](mailto:UHC_Civil_Rights@uhc.com)

**Mail:** Civil Rights Coordinator  
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P.O. Box 30608  
Salt Lake City, UT 84130

You must send the complaint within 60 days of your experience. A decision will be sent to you within 30 days. If you disagree with the decision, you have 15 days to ask us to look at it again. If you need help with your complaint, please call the toll-free phone number listed on your member ID card, TTY **711**, Monday through Friday, 8 a.m. to 8 p.m., or at the times listed in your health plan documents.

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**Online:** <https://ocrportal.hhs.gov/ocr/portal/lobby.jsf>  
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**Phone:** Toll-free **1-800-368-1019**, **1-800-537-7697 (TDD)**

**Mail:** U.S. Dept. of Health and Human Services  
200 Independence Avenue SW  
Room 509F, HHH Building  
Washington, D.C. 20201

We provide free services to help you communicate with us, including letters in other languages or large print. Or, you can ask for an interpreter. To ask for help, please call the toll-free phone number listed on your member ID card, TTY **711**, Monday through Friday, 8 a.m. to 8 p.m., or at the times listed in your health plan documents.



# Multi-language interpreter services

ATTENTION: If you speak English, language assistance services, free of charge, are available to you. Please call the toll-free phone number listed on your identification card.

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。

XIN LU'U Ý: Nếu quý vị nói tiếng **Việt (Vietnamese)**, quý vị sẽ được cung cấp dịch vụ trợ giúp về ngôn ngữ miễn phí. Vui lòng gọi số điện thoại miễn phí ở mặt sau thẻ hội viên của quý vị.

알림: **한국어(Korean)**를 사용하시는 경우 언어 지원 서비스를 무료로 이용하실 수 있습니다. 귀하의 신분증 카드에 기재된 무료 회원 전화번호로 문의하십시오.

PAALALA: Kung nagsasalita ka ng **Tagalog (Tagalog)**, may makukuha kang mga libreng serbisyo ng tulong sa wika. Pakitawagan ang toll-free na numero ng telepono na nasa iyong identification card.

ВНИМАНИЕ: бесплатные услуги перевода доступны для людей, чей родной язык является **русском (Russian)**. Позвоните по бесплатному номеру телефона, указанному на вашей идентификационной карте.

تنبيه: إذا كنت تتحدث **العربية (Arabic)**، فإن خدمات المساعدة اللغوية المجانية متاحة لك. الرجاء الاتصال على رقم الهاتف المجاني الموجود على معرف العضوية.

ATANSYON: Si w pale **Kreyòl ayisyen (Haitian Creole)**, ou kapab benefisye sèvis ki gratis pou ede w nan lang pa w. Tanpri rele nimewo gratis ki sou kat idantifikasyon w.

ATTENTION : Si vous parlez **français (French)**, des services d'aide linguistique vous sont proposés gratuitement. Veuillez appeler le numéro de téléphone gratuit figurant sur votre carte d'identification.

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

ATENÇÃO: Se você fala **português (Portuguese)**, contate o serviço de assistência de idiomas gratuito. Ligue gratuitamente para o número encontrado no seu cartão de identificação.

ATTENZIONE: in caso la lingua parlata sia **l'italiano (Italian)**, sono disponibili servizi di assistenza linguistica gratuiti. Per favore chiamate il numero di telefono verde indicato sulla vostra tessera identificativa.

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.

注意事項：日本語(**Japanese**)を話される場合、無料の言語支援サービスをご利用いただけます。健康保険証に記載されているフリーダイヤルにお電話ください。

توجه: اگر زبان شما **فارسی (Farsi)** است، خدمات امداد زبانی به طور رایگان در اختیار شما می باشد. لطفا 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, नि:शुल्क 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 xov tooj hu deb dawb uas teev muaj nyob rau ntawm koj daim yuaj cim qhia tus kheej.

ចំណាប់អារម្មណ៍: បើសិនអ្នកនិយាយ**ភាសាខ្មែរ(Khmer)**សូមជំនួយភាសាដទៃយកតម្កល់ គឺមានសំរាប់អ្នក។ សូមទូរស័ព្ទទំនាក់ទំនងលេខគតតិគតុល្ល ដល់មាន់នៃលើអត្តសញ្ញាណប័ណ្ណរបស់អ្នក។

PAKDAAR: Nu saritaem ti **Ilocano (Ilocano)**, ti serbisyo para ti baddang ti lengguahe nga awanan bayadna, ket sidadaan para kenyam. Maidawat nga awagan iti toll-free a numero ti telepono nga nakalista ayan iti identification card mo.

DÍI BAA'AKONÍNÍZIN: **Diné (Navajo)** bizaad bee yániit'igo, saad beę áka'anída'awo'ígíí, t'áa jíík'eh, bee ná'ahóót'i'. T'áa shqodí ninaaltsoos nit'i'izí bee nééhozinígíí bine'deę t'áa jíík'ehgo béesh bee hane'í biká'ígíí bee hodíilnih.

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.

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