

2025 Kaiser Permanente State Employee Health Benefit

SEHB Drug Formulary



Georgia Region

Member Services

Monday through Friday, 7 a.m. to 7 p.m.

404-261-2590 from the metropolitan Atlanta area
or **1-888-865-5813** outside Atlanta (711 TTY)

What is the Kaiser Permanente, a State Employee Health Benefit Formulary?

A formulary is a list of drugs determined to be safe and effective for our members by our Pharmacy and Therapeutics committee. Use of the formulary enables Kaiser Permanente to provide optimal care to you and your family at reasonable costs. Kaiser Permanente continually updates the formulary throughout the year based on new medical evidence, considering the recommendations of appropriate physician experts. Our physicians and pharmacists work closely together to ensure that our formulary meets your needs.

Does the formulary ever change?

Yes, Kaiser Permanente periodically updates the formulary based on new medical evidence, considering the recommendations of appropriate physician experts and notifies our doctors, pharmacists, and other clinicians about any changes. If a change in the formulary affects any of your prescriptions, your doctor or pharmacist will let you know.

The enclosed formulary is effective as of **January 1, 2025** and represents the most commonly prescribed medications.

How do I use the Formulary?

There is an easy way to find your drug within the formulary:

To search for a specific medication or condition, press the 'CTRL' key and the 'F' key on your keyboard at the same time. In the search window that pops up, enter the text you want to search for and press 'Enter.' Press 'Enter' again to move to the next result.

Medical Condition

The drugs on this formulary are grouped into categories depending on the type of medical

condition that they are used to treat. For example, drugs used to treat a heart condition are listed under the category, "Cardiovascular Drugs." If you know what your drug is used for, simply look for the category name in the list. Then look under the category name for your drug.

Alphabetical Listing

If you are not sure what category to look under, you can look for the drug in the Index. The Index provides an alphabetical list of all the drugs included in this document. Both Preferred Brand-name drugs and generic drugs are listed in the Index. Look in the Index and find your drug. Next to the drug, you will see the page number where you can find coverage information. Go to the page listed in the Index and find the name of your drug on the list.

What are generic drugs?

Kaiser Permanente covers both Preferred Brand-name drugs and generic drugs.

Generic drugs are produced and sold under their chemical names after the patent of the Preferred Brand name drug expires. Although the price is lower, the quality and effectiveness of generic drugs is the same as Preferred Brand name drugs. The Federal Food and Drug Administration (FDA) requires that generic drugs contain the same active ingredients in the same amount as the Preferred Brand name drug. Generic drugs are listed in lower-case italics (e.g., *amoxicillin*) within the formulary. Preferred Brand-name drugs are capitalized within the formulary (e.g., FLOVENT).

What are Preferred Brand name drugs?

Preferred Brand name drugs are drugs that are produced and sold under the original manufacturer's name.

What are Non- Preferred Brand drugs?

Non-Preferred Brand drugs are drugs that are not included on the plan's list of preferred prescription drugs.

Because all drug product strengths and package sizes of a formulary drug will be included in your plan's benefits, just note the drug cost share coverage amount will be based on the specific tier of the formulary, check with your Kaiser Permanente pharmacist for clarification, if needed.

How much will I pay for Covered Drugs?

What you pay for covered drugs is determined by the outpatient prescription drug benefit outlined in your Evidence of Coverage. Kaiser Permanente, the State Employee Health Benefit plan has a three-tier open formulary benefit.

Open formulary benefits have a generic cost sharing requirement. This means that if you choose to fill a Preferred Brand name drug when a generic is available, then in addition to your standard cost share, you will also pay the difference in cost between the Preferred Brand name and generic drug.

Generics drugs are those covered at the lowest cost share defined as Tier 1 coverage amount. Preferred Brand drugs are those Preferred Brands which will be covered at your preferred Brand cost share defined as Tier 2 coverage amount. Non-preferred Brands drugs are covered at the non-preferred cost share defined as Tier 3 coverage amount.

Coverage for prescription drugs is limited to drugs for which a prescription is required by law and those that are listed on the Kaiser Permanente, the State Employee Health

Benefit drug formulary. Certain diabetic supplies do not require a prescription but must still be listed in our formulary in order to be covered under the benefit.

Each prescription refill is provided on the same basis as the original prescription. Cost shares are applied on a per prescription basis, for up to the lesser of the dispensing amount listed in the "Schedule of Benefits" or the standard prescription amount.

The standard prescription amount for the following items is:

- Migraine medications — the smallest package size commercially available
- Ophthalmic and otic medications — the smallest package size commercially available
- Oral and nasal inhalers — the smallest standard package size

Are there any other restrictions on coverage?

Some covered drugs may have additional requirements or limits on coverage. These requirements and limits may include:

- Quantity Limits (QL): For certain drugs, Kaiser Permanente limits the amount of the drug that will be covered.
- Age Restriction (AGE): For certain drugs, Kaiser Permanente limits coverage based on a designated age.
- Prior Authorization (PA): For certain drugs, Kaiser Permanente requires review and authorization prior to dispensing. Your Provider must obtain this review and authorization. The list of prescription drugs requiring review and authorization is

subject to periodic review and modification by our Pharmacy and Therapeutics Committee.

- Step Therapy (ST): For certain drugs, Kaiser Permanente requires the use of similar, alternative medications prior to coverage.

You can find out if the drug has any additional requirements or limits by looking in the Restrictions Column on the formulary list.

What if my drug is not on the Formulary?

Because all drug product strengths and package sizes of a formulary drug may not be included on the formulary, check with your

Kaiser Permanente pharmacist for clarification, if needed.

For more information

For more detailed information about your Kaiser Permanente, prescription drug coverage, please review your *Evidence of Coverage* and other plan materials.

If you have questions about Kaiser Permanente, please call Member Services at **1-833-642-5973 or 770-291-4430**, Monday through Friday 7:00 a.m. to 7 p.m. TTY/TDD users should call **1-800-255-0056**.

Kaiser Permanente, a State Employee Health Benefit

ST = Step Therapy, PA = Prior Authorization, QL = Quantity Limit, AGE = Age Restriction

Category/Drug Name	Tier Level	Restrictions
ANALGESICS		
NO USP CLASS (COMBINATION PRODUCT)		
<i>acetaminophen w/ codeine</i>	1	QL
APADAZ	3	QL, ST
<i>butalbital-acetaminophen-caffeine w/ codeine</i>	1	QL
<i>butalbital-aspirin-caffeine</i>	1	
<i>butalbital-aspirin-caffeine w/cod</i>	1	QL
<i>hydrocodone-acetaminophen</i>	1	QL, ST
<i>oxycodone w/ acetaminophen</i>	1	QL
SEGLENTIS	3	ST
NONSTEROIDAL ANTI-INFLAMMATORY AGENTS		
COXANTO	3	ST
<i>indomethacin</i>	1	ST
MELOXICAM	3	ST
NONSTEROIDAL ANTI-INFLAMMATORY DRUGS		
<i>celecoxib</i>	1	
<i>diclofenac potassium</i>	1	ST
DUEXIS	3	ST
ELYXYB	3	ST
<i>ibuprofen</i>	1	
<i>indomethacin</i>	1, 3	ST
<i>meloxicam</i>	1	ST
<i>nabumetone</i>	1	
<i>naproxen</i>	1, 3	ST
<i>naproxen sodium</i>	1, 3	ST
<i>naproxen-esomeprazole magnesium</i>	1, 3	ST
<i>salsalate</i>	1	
SPRIX	3	ST
<i>sulindac</i>	1	
OPIOID ANALGESICS, LONG-ACTING		
<i>buprenorphine</i>	1	QL, ST
<i>fentanyl</i>	1, 3	QL, ST
<i>hydrocodone bitartrate</i>	1, 3	QL, ST
<i>methadone hcl</i>	1	QL, ST
<i>morphine sulfate</i>	1, 2	QL
OXYCODONE HCL ER	1	QL, ST
OXYMORPHONE HCL ER	1	QL, ST
XTAMPZA ER	3	ST
OPIOID ANALGESICS, SHORT-ACTING		
APAP-CAFF-DIHYDROCODEINE	1	ST
BENZHYDROCODONE-ACETAMINOPHEN	1	QL, ST
<i>butalbital-acetaminophen-caffeine w/ codeine</i>	1	ST
<i>butorphanol tartrate</i>	1	QL, ST
DSUVIA	3	QL
<i>hydromorphone hcl</i>	1, 3	QL, ST
LORTAB	1	ST
<i>meperidine hcl</i>	1	QL, ST
<i>morphine sulfate</i>	1, 3	QL

Kaiser Permanente, a State Employee Health Benefit Formulary

Category/Drug Name	Tier Level	Restrictions
<i>oxycodone hcl</i>	1, 3	QL, ST
OXYCODONE-ACETAMINOPHEN	1, 3	QL, ST
<i>oxymorphone hcl</i>	1	QL, ST
<i>tramadol hcl</i>	1	QL
ANDROGENIC AGENTS		
UNSPECIFIED		
KYZATREX	3	PA
ANESTHETICS		
LOCAL ANESTHETICS		
<i>lidocaine hcl (mouth-throat)</i>	1	
LIDOCAINE HCL URETHRAL/MUCOSAL	1	
ANTI-ADDICTION/ SUBSTANCE ABUSE TREATMENT AGENTS		
NO USP CLASS (COMBINATION PRODUCT)		
<i>buprenorphine hcl-naloxone hcl dihydrate</i>	1	
OPIOID ANTAGONISTS		
<i>buprenorphine hcl</i>	1	
<i>naltrexone hcl</i>	1	
OPIOID DEPENDENCE		
SUBOXONE	3	ST
ANTI-INFECTIVE AGENTS		
ANTHELMINTICS		
BILTRICIDE	3	ST
<i>ivermectin</i>	1	
<i>ivermectin (pediculicide)</i>	1	
ANTIBACTERIALS		
<i>amikacin sulfate</i>	1	
<i>amoxicillin</i>	1	
<i>amoxicillin & pot clavulanate</i>	1, 3	
ARIKAYCE	3	PA
<i>azithromycin</i>	1, 3	
BICILLIN C-R 900/300	3	
CEFACLOR ER	1	
<i>cefadroxil</i>	1	
<i>cefazolin sodium</i>	1	
<i>cefdinir</i>	1	
<i>cefixime</i>	1	
<i>cefpodoxime proxetil</i>	1	
<i>cefprozil</i>	1	
<i>ceftazidime</i>	1	
<i>cefuroxime axetil</i>	1	
<i>cephalexin</i>	1	
CIPRO	3	
CIPROFLOXACIN HCL	1	
<i>clarithromycin</i>	1	
<i>clindamycin hcl</i>	1, 3	
<i>demeclocycline hcl</i>	1	ST
<i>doxycycline (monohydrate)</i>	1, 3	
<i>doxycycline hyclate</i>	1, 3	ST
ERYTHROCIN STEARATE	1	QL, ST
<i>erythromycin base</i>	1	QL, ST

Kaiser Permanente, a State Employee Health Benefit Formulary

Category/Drug Name	Tier Level	Restrictions
<i>erythromycin ethylsuccinate</i>	1, 3	QL, ST
<i>gentamicin sulfate</i>	1	
HUMATIN	1	
<i>levofloxacin</i>	1	
<i>minocycline hcl</i>	1, 3	ST
<i>moxifloxacin hcl</i>	1	ST
NITROFURANTOIN	3	PA
<i>ofloxacin</i>	1	
PENICILLIN G PROCAINE	1	
PIVYA	3	PA
SIVEXTRO	3	ST
<i>sulfamethoxazole-trimethoprim</i>	1	
<i>sulfasalazine</i>	1	
<i>tetracycline hcl</i>	1	
<i>tobramycin</i>	1, 3	ST
<i>tobramycin sulfate</i>	1	
<i>vancomycin hcl</i>	1, 3	
ANTIFUNGALS		
AMPHOTERICIN B	1	
CRESEMBA	3	PA
<i>fluconazole</i>	1, 3	
<i>griseofulvin ultramicrosize</i>	1	
<i>itraconazole</i>	1	
<i>ketoconazole</i>	1	
NOXAFIL	3	PA
VIVJOA	3	PA
<i>voriconazole</i>	1	ST
ANTIMYCOBACTERIALS		
PASER	1	
PRETOMANID	3	ST
<i>rifampin</i>	1	
SIRTURO	3	
<i>tetracycline hcl</i>	1	
TRECTOR	3	ST
ANTIPROTOZOALS		
ALINIA	3	
<i>atovaquone-proguanil hcl</i>	1, 3	ST
BENZNIDAZOLE	3	
<i>chloroquine phosphate</i>	1	ST
COARTEM	3	ST
LAMPIT	3	ST
<i>mefloquine hcl</i>	1	ST
<i>metronidazole</i>	1, 3	ST
<i>primaquine phosphate</i>	1	
<i>quinine sulfate</i>	1, 3	ST
SOLOSEC	3	ST
<i>tinidazole</i>	1	
ANTIVIRALS		
<i>abacavir sulfate-lamivudine</i>	1	QL
APTIVUS	3	

Kaiser Permanente, a State Employee Health Benefit Formulary

Category/Drug Name	Tier Level	Restrictions
<i>atazanavir sulfate</i>	1, 3	QL
BIKTARVY	3	QL
<i>cidofovir</i>	1	
<i>darunavir</i>	1, 3	QL, ST
DOVATO	2	QL
<i>entecavir</i>	1	QL
EPCLUSA	2, 3	PA
<i>etravirine</i>	1	QL
<i>famciclovir</i>	1	ST
FUZEON	2	QL
HARVONI	3	PA, QL
JULUCA	3	QL
LIVTENCITY	3	PA
MAVYRET	3	PA
PEGASYS	2	
PIFELTRO	3	QL
PREVYMIS	3	PA
RETROVIR	3	
<i>ritonavir</i>	1	QL
SOVALDI	3	PA, QL
SUNLENCA	3	PA
<i>tenofovir disoproxil fumarate</i>	1, 3	QL
TIVICAY	2	
<i>valacyclovir hcl</i>	1, 3	ST
VOCABRIA	3	PA
ZEPATIER	3	PA, QL
BETA-LACTAM, CEPHALOSPORINS		
CEFACLOR	1	
MACROLIDES		
DIFICID	3	ST
URINARY ANTI-INFECTIVES		
<i>fosfomycin tromethamine</i>	1, 3	ST
<i>methenamine hippurate</i>	1, 3	ST
<i>nitrofurantoin macrocrystal</i>	1, 3	ST
<i>nitrofurantoin monohyd macro</i>	1, 3	ST
PRIMSOL	3	
ANTIBACTERIALS		
AMINOGLYCOSIDES		
BETHKIS	3	ST
<i>gentamicin sulfate (ophth)</i>	1	
<i>neomycin sulfate</i>	1	
<i>tobramycin (ophth)</i>	1, 2	
ANTIBACTERIALS, OTHER		
BACITRACIN	1	
CAYSTON	3	PA
<i>clindamycin hcl</i>	1	
<i>clindamycin palmitate hydrochloride</i>	1	
<i>linezolid</i>	1, 3	ST
<i>metronidazole</i>	1	
<i>metronidazole (topical)</i>	1	

Kaiser Permanente, a State Employee Health Benefit Formulary

Category/Drug Name	Tier Level	Restrictions
<i>mupirocin</i>	1	
<i>nitrofurantoin</i>	1	PA
<i>nitrofurantoin macrocrystal</i>	1	
NUVESSA	3	ST
TRIMETHOPRIM	1	
XIFAXAN	3	QL, ST
BETA-LACTAM, CEPHALOSPORINS		
CEFACLOR	1	
<i>cefdinir</i>	1	
<i>cefepodoxime proxetil</i>	1	
<i>cefprozil</i>	1	
<i>cefuroxime axetil</i>	1	
<i>cephalexin</i>	1	
BETA-LACTAM, PENICILLINS		
<i>amoxicillin</i>	1	
<i>amoxicillin & pot clavulanate</i>	1	
<i>ampicillin</i>	1	
<i>dicloxacillin sodium</i>	1	
<i>penicillin v potassium</i>	1	
MACROLIDES		
<i>azithromycin</i>	1	
<i>clarithromycin</i>	1	
DIFICID	3	ST
<i>erythromycin (acne aid)</i>	1	
<i>erythromycin (ophth)</i>	1	
MISCELLANEOUS THERAPEUTIC AGENTS		
<i>methenamine-hyosc-methylene blue-sod phos-phenyl sal</i>	1	ST
<i>methenamine-hyoscamine-methylene blue-sodium phosphate</i>	1, 3	ST
QUINOLONES		
BAXDELA	3	ST
<i>ciprofloxacin hcl</i>	1	
<i>ciprofloxacin hcl (ophth)</i>	1	
<i>gatifloxacin (ophth)</i>	1, 3	ST
<i>levofloxacin</i>	1	
<i>ofloxacin (ophth)</i>	1	
SULFONAMIDES		
<i>silver sulfadiazine</i>	1	
<i>sulfacetamide sodium (ophth)</i>	1	
SULFADIAZINE	1	
<i>sulfamethoxazole-trimethoprim</i>	1	
TETRACYCLINES		
<i>doxycycline (monohydrate)</i>	1	
<i>doxycycline hyclate</i>	1	ST
<i>minocycline hcl</i>	1, 3	ST
NUZYRA	3	ST
SEYSARA	3	ST
ANTICONVULSANTS		
ANTICONVULSANTS, MISCELLANEOUS		
<i>methsuximide</i>	1, 3	ST
MOTPOLY XR	3	

Kaiser Permanente, a State Employee Health Benefit Formulary

Category/Drug Name	Tier Level	Restrictions
NAYZILAM	3	ST
PRIMIDONE	1	ST
XCOPRI	3	QL, ST
ANTICONVULSANTS, OTHER		
BRIVIACT	3	ST
DEPAKOTE	3	ST
DIACOMIT	3	PA
EPIDIOLEX	3	PA
FINTEPLA	3	PA
LAMICTAL ODT	3	ST
<i>levetiracetam</i>	1, 3	ST
<i>oxcarbazepine</i>	1	
QUDEXY XR	3	ST
SYMPAZAN	3	ST
TERIPARATIDE (RECOMBINANT)	3	PA
<i>tiagabine hcl</i>	1	ST
XCOPRI	3	QL, ST
CALCIUM CHANNEL MODIFYING AGENTS		
<i>ethosuximide</i>	1	
ZONEGRAN	3	ST
GAMMA-AMINOBTYRIC ACID (GABA) AUGMENTING AGENTS		
<i>clonazepam</i>	1, 3	QL, ST
<i>divalproex sodium</i>	1	
<i>gabapentin</i>	1, 3	ST
LYRICA	3	QL, ST
ONFI	3	ST
<i>phenobarbital</i>	1	
<i>primidone</i>	1	
<i>valproic acid</i>	1	
<i>vigabatrin</i>	1, 3	PA
ZTALMY	3	ST
GLUTAMATE REDUCING AGENTS		
<i>topiramate</i>	1	
SODIUM CHANNEL AGENTS		
APTIOM	3	ST
<i>carbamazepine</i>	1, 3	ST
<i>lacosamide</i>	1, 3	QL, ST
<i>phenytoin</i>	1	
<i>phenytoin sodium extended</i>	1	ST
<i>rufinamide</i>	1, 3	ST
TRILEPTAL	3	ST
ANTIDEMENTIA AGENTS		
ANTIDEMENTIA AGENTS, OTHER		
ADLARITY	3	ST
ERGOLOID MESYLATES	1	
CHOLINESTERASE INHIBITORS		
<i>donepezil hydrochloride</i>	1, 3	ST
EXELON	3	ST
<i>galantamine hydrobromide</i>	1	ST
NAMZARIC	3	ST

Kaiser Permanente, a State Employee Health Benefit Formulary

Category/Drug Name	Tier Level	Restrictions
<i>rivastigmine tartrate</i>	1	
N-METHYL-D-ASPARTATE (NMDA) RECEPTOR ANTAGONIST		
<i>memantine hcl</i>	1, 3	ST
ANTIDEPRESSANTS		
ANTIDEPRESSANTS, OTHER		
<i>bupropion hcl</i>	1, 3	ST
<i>mirtazapine</i>	1	
SEROQUEL XR	3	ST
<i>trazodone hcl</i>	1	ST
MONOAMINE OXIDASE INHIBITORS		
EMSAM	3	ST
<i>phenelzine sulfate</i>	1	
<i>tranylcypromine sulfate</i>	1	
SEROTONIN/NOREPINEPHRINE REUPTAKE INHIBITORS		
<i>citalopram hydrobromide</i>	1	
<i>desvenlafaxine succinate</i>	1, 3	ST
<i>duloxetine hcl</i>	1, 3	ST
<i>escitalopram oxalate</i>	1	
<i>fluoxetine hcl</i>	1	
<i>paroxetine hcl</i>	1, 3	ST
<i>sertraline hcl</i>	1, 3	ST
<i>venlafaxine hcl</i>	1	
TRICYCLICS		
<i>amitriptyline hcl</i>	1	
<i>clomipramine hcl</i>	1, 3	ST
<i>desipramine hcl</i>	1	
<i>doxepin hcl</i>	1	
<i>imipramine hcl</i>	1	
<i>nortriptyline hcl</i>	1	
ANTIEMETICS		
ANTIEMETICS, OTHER		
<i>chlorpromazine hcl</i>	1	
<i>doxylamine-pyridoxine</i>	1, 3	ST
<i>hydroxyzine hcl</i>	1	
<i>metoclopramide hcl</i>	1	
<i>perphenazine</i>	1	
<i>prochlorperazine maleate</i>	1	
<i>promethazine hcl</i>	1	
EMETOGENIC THERAPY ADJUNCTS		
AKYNZEO	3	ST
ANZEMET	3	ST
<i>dronabinol</i>	1, 3	ST
EMEND	3	QL, ST
<i>ondansetron</i>	1	
<i>ondansetron hcl</i>	1	
ANTIFUNGALS		
ANTIFUNGALS		
BREXAFEMME	3	PA, QL
NO USP CLASS		
<i>clotrimazole</i>	1	

Kaiser Permanente, a State Employee Health Benefit Formulary

Category/Drug Name	Tier Level	Restrictions
<i>fluconazole</i>	1	
<i>flucytosine</i>	1, 3	
<i>griseofulvin microsize</i>	1	
<i>griseofulvin ultramicrosize</i>	1	ST
<i>itraconazole</i>	1, 3	
<i>ketoconazole (topical)</i>	1	
NATACYN	2	
<i>nystatin</i>	1	
<i>nystatin (mouth-throat)</i>	1	
<i>nystatin (topical)</i>	1	
<i>posaconazole</i>	1, 3	PA
SULCONAZOLE NITRATE	3	ST
<i>terbinafine hcl</i>	1	
VFEND	3	ST
ZOLINZA	2	
ANTIGOUT AGENTS		
MISCELLANEOUS THERAPEUTIC AGENTS		
COLCHICINE	3	ST
NO USP CLASS		
<i>allopurinol</i>	1	
<i>colchicine</i>	1, 3	ST
<i>probenecid</i>	1	
ANTIHISTAMINE DRUGS		
ANTIHISTAMINE DRUGS		
<i>carbinoxamine maleate</i>	1	ST
CLARINEX-D 12 HOUR	3	
CLEMASTINE FUMARATE	1	ST
<i>desloratadine</i>	1, 3	ST
DEXCHLORPHENIRAMINE MALEATE	1	
DIPHENHYDRAMINE HCL	1	
<i>hydroxyzine hcl</i>	1	
<i>levocetirizine dihydrochloride</i>	1, 3	ST
<i>promethazine & phenylephrine</i>	1	
<i>promethazine hcl</i>	1	QL
ANTIMIGRAINE AGENTS		
ERGOT ALKALOIDS		
<i>dihydroergotamine mesylate</i>	1, 3	ST
<i>ergotamine w/ caffeine</i>	1	ST
TRUDHESA	3	ST
NO USP CLASS (COMBINATION PRODUCT)		
CAFERGOT	1	ST
NURTEC	3	PA, QL
REYVOW	3	PA, QL
SEROTONIN (5-HT) 1B/1D RECEPTOR AGONISTS		
<i>naratriptan hcl</i>	1	QL
<i>rizatriptan benzoate</i>	1	QL
<i>sumatriptan succinate</i>	1	QL
TOSYMRA	3	ST
ANTIMYASTHENIC AGENTS		
PARASYMPATHOMIMETICS		

Kaiser Permanente, a State Employee Health Benefit Formulary

Category/Drug Name	Tier Level	Restrictions
<i>pyridostigmine bromide</i>	1, 3	ST
ANTIMYCOBACTERIALS		
ANTIMYCOBACTERIALS, OTHER		
<i>dapsone</i>	1	
PRIFTIN	3	
<i>rifabutin</i>	1	
ANTITUBERCULARS		
<i>ethambutol hcl</i>	1	
<i>isoniazid</i>	1	
<i>pyrazinamide</i>	1	
<i>rifampin</i>	1	
ANTINEOPLASTIC AGENTS		
ALKYLATING AGENTS		
GLEOSTINE	3	QL, ST
LEUKERAN	2	QL
ANTIANDROGENS		
ZYTIGA	3	QL, ST
ANTIESTROGENS/MODIFIERS		
FARESTON	3	QL, ST
ANTINEOPLASTIC AGENTS		
<i>anastrozole</i>	1	
<i>bicalutamide</i>	1	
BRUKINSA	3	QL
CALQUENCE	3	PA
<i>decitabine</i>	1	
<i>erlotinib hcl</i>	1	
<i>exemestane</i>	1	
FARYDAK	3	
<i>fluorouracil</i>	1	
<i>gefitinib</i>	1	
GLEOSTINE	3	ST
IMLYGIC	3	
KESIMPTA	3	PA
<i>lenalidomide</i>	1	QL
<i>letrozole</i>	1	
LONSURF	2	
LUMAKRAS	3	PA, QL
LYNPARZA	3	QL
MATULANE	2	
MELPHALAN	1	
<i>methotrexate sodium</i>	1	
OSPHENA	3	ST
PIQRAY (200 MG DAILY DOSE)	3	PA, QL
POMALYST	2	QL
SOLTAMOX	3	
<i>sorafenib tosylate</i>	1	
STIVARGA	2	
<i>sunitinib malate</i>	1	
<i>temozolomide</i>	1	
<i>toremifene citrate</i>	1	

Kaiser Permanente, a State Employee Health Benefit Formulary

Category/Drug Name	Tier Level	Restrictions
ANTINEOPLASTICS, OTHER		
AKEEGA	3	PA
AUGTYRO	3	PA
<i>bexarotene</i>	1	QL, ST
BOSULIF	3	PA, QL
CASODEX	3	QL, ST
COPIKTRA	3	PA, QL
COTELLIC	2	QL
DACOGEN	3	ST
DAURISMO	3	PA, QL
ERIVEDGE	3	PA, QL
ERLEADA	3	PA, QL
FRUZAQLA	3	PA, QL
IBRANCE	3	PA, QL
ICLUSIG	3	PA, QL
IDHIFA	3	PA, QL
IMBRUVICA	3	PA
INLYTA	3	QL, ST
INQOVI	3	PA, QL
INREBIC	3	PA, QL
IRESSA	3	QL, ST
JAYPIRCA	3	PA, QL
JYLAMVO	3	ST
KRAZATI	3	PA
LYTGOBI (12 MG DAILY DOSE)	3	PA, QL
MEKINIST	3	PA
<i>methotrexate sodium</i>	1	
MYLERAN	2	QL
NERLYNX	3	PA, QL
NINLARO	2	QL
ODOMZO	3	PA, QL
OGSIVEO	3	PA, QL
OJJAARA	3	PA, QL
ONUREG	3	PA, QL
ORGOVYX	3	PA, QL
ORSERDU	3	PA, QL
PEMAZYRE	3	PA, QL
PURIXAN	3	QL
QINLOCK	3	PA, QL
RETEVMO	3	PA, QL
REVLIMID	3	QL, ST
REZLIDHIA	3	PA, QL
ROZLYTREK	3	PA, QL
RUBRACA	3	PA, QL
RYDAPT	3	PA, QL
SCEMBLIX	3	PA, QL
SIKLOS	3	PA, QL
SOMATULINE DEPOT	3	PA
SYNRIBO	3	QL
TABRECTA	3	PA, QL

Kaiser Permanente, a State Employee Health Benefit Formulary

Category/Drug Name	Tier Level	Restrictions
TAFINLAR	3	PA
TALZENNA	3	PA
TAZVERIK	3	PA, QL
TRUQAP	3	PA
TRUSELTIQ (100MG DAILY DOSE)	3	PA, QL
TUKYSA	3	PA, QL
TURALIO	3	PA
VANFLYTA	3	PA, QL
VENCLEXTA	3	PA, QL
VERZENIO	3	PA, QL
VITRAKVI	3	PA, QL
VIZIMPRO	3	PA, QL
WELIREG	3	PA, QL
XALKORI	3	PA, QL
XENLETA	3	QL, ST
XOSPATA	3	PA, QL
XPOVIO (100 MG ONCE WEEKLY)	3	PA, QL
XTANDI	3	PA
ZEJULA	3	PA
ZYDELIG	3	PA, QL
ZYKADIA	3	PA, QL
ENZYME INHIBITORS		
HYCANTIN	2	QL
MOLECULAR TARGET INHIBITORS		
ALUNBRIG	3	PA, QL
AYVAKIT	3	PA, QL
BALVERSA	3	PA, QL
BRAFTOVI	3	PA, QL
FOTIVDA	3	PA, QL
GAVRETO	3	PA, QL
GILOTRIF	3	PA, QL
JAKAFI	3	QL
KISQALI (200 MG DOSE)	2	QL
KOSELUGO	3	PA, QL
LENVIMA (10 MG DAILY DOSE)	2	QL
LORBRENA	3	PA, QL
MEKINIST	3	PA, QL
MEKTOVI	3	PA, QL
<i>pazopanib hcl</i>	1, 3	QL, ST
TAFINLAR	3	PA, QL
TAGRISSO	2	QL
TALZENNA	3	PA, QL
TASIGNA	2, 3	PA, QL
TIBSOVO	3	PA, QL
TYKERB	3	QL, ST
RETINOIDS		
<i>bexarotene (topical)</i>	1	PA
PANRETIN	3	PA
TARGRETIN	3	QL, ST
ANTINEOPLASTICS		

Kaiser Permanente, a State Employee Health Benefit Formulary

Category/Drug Name	Tier Level	Restrictions
ALKYLATING AGENTS		
CYCLOPHOSPHAMIDE	1, 2	
ANTIANDROGENS		
<i>abiraterone acetate</i>	1, 3	ST
ANTIANGIOGENIC AGENTS		
THALOMID	2	QL
ANTIESTROGENS/MODIFIERS		
EMCYT	2	
<i>tamoxifen citrate</i>	1	
ANTIMETABOLITES		
<i>capecitabine</i>	1	
DROXIA	2	
<i>hydroxyurea</i>	1	
TABLOID	2	
ANTINEOPLASTIC AGENTS		
VONJO	3	PA, QL
ANTINEOPLASTICS, OTHER		
ALECENSA	3	
BESREMI	3	PA
<i>everolimus</i>	1	QL
<i>leucovorin calcium</i>	1	
TREXALL	1	ST
XATMEP	3	ST
AROMATASE INHIBITORS, 3RD GENERATION		
ARIMIDEX	3	ST
<i>exemestane</i>	1, 3	ST
FEMARA	3	ST
ENZYME INHIBITORS		
ETOPOSIDE	1	
HYCAMTIN	2	
MOLECULAR TARGET INHIBITORS		
CABOMETYX	3	QL, ST
CAPRELSA	2	
<i>everolimus</i>	1, 3	QL, ST
EXKIVITY	3	PA, QL
<i>imatinib mesylate</i>	1, 3	PA
IMBRUVICA	3	PA, QL
<i>lapatinib ditosylate</i>	1	
NEXAVAR	3	ST
SPRYCEL	2	PA, QL
SUTENT	3	ST
TARCEVA	3	ST
ZELBORAF	2	
ZORTRESS	3	QL, ST
NO USP CLASS		
MESNEX	2	
RETINOIDS		
<i>tretinoin</i>	1	AGE
<i>tretinoin (chemotherapy)</i>	1	
ANTIPARASITICS		

Kaiser Permanente, a State Employee Health Benefit Formulary

Category/Drug Name	Tier Level	Restrictions
ANTHELMINTICS		
<i>albendazole</i>	1	
IMPAVIDO	3	PA
ANTIPROTOZOALS		
<i>atovaquone</i>	1, 3	
<i>hydroxychloroquine sulfate</i>	1	
NEBUPENT	3	ST
NITAZOXANIDE	1	ST
<i>pyrimethamine</i>	1, 3	PA
PEDICULICIDES/SCABICIDES		
LINDANE	1	
<i>permethrin</i>	1	
ANTIPARKINSON AGENTS		
ANTICHOLINERGICS		
<i>benztropine mesylate</i>	1	
<i>trihexyphenidyl hcl</i>	1	
ANTIPARKINSON AGENTS, OTHER		
<i>amantadine hcl</i>	1, 3	ST
<i>apomorphine hydrochloride</i>	1	ST
<i>carbidopa-levodopa</i>	1	
NOURIANZ	3	ST
ONGENTYS	3	ST
TASMAR	3	ST
DOPAMINE AGONISTS		
APOKYN	3	ST
<i>bromocriptine mesylate</i>	1	
INBRIJA	3	PA
<i>pramipexole dihydrochloride</i>	1	ST
<i>ropinirole hydrochloride</i>	1	
DOPAMINE PRECURSORS/ L-AMINO ACID DECARBOXYLASE INHIBITORS		
<i>carbidopa-levodopa</i>	1	
MONOAMINE OXIDASE B (MAO-B) INHIBITORS		
<i>selegiline hcl</i>	1	
NO USP CLASS (COMBINATION PRODUCT)		
<i>carbidopa-levodopa-entacapone</i>	1	
ANTIPSYCHOTICS		
1ST GENERATION/TYPICAL		
<i>fluphenazine hcl</i>	1	
<i>haloperidol</i>	1	
<i>thioridazine hcl</i>	1	
<i>thiothixene</i>	1	
<i>trifluoperazine hcl</i>	1	
2ND GENERATION/ATYPICAL		
ABILIFY MYCITE MAINTENANCE KIT	3	ST
<i>aripiprazole</i>	1	
CAPLYTA	3	ST
FANAPT	3	ST
INVEGA	3	ST
LATUDA	3	QL, ST
NUPLAZID	3	PA

Kaiser Permanente, a State Employee Health Benefit Formulary

Category/Drug Name	Tier Level	Restrictions
<i>olanzapine</i>	1, 3	ST
<i>quetiapine fumarate</i>	1, 3	ST
<i>risperidone</i>	1, 3	ST
VRAYLAR	3	QL, ST
<i>ziprasidone hcl</i>	1, 3	ST
TREATMENT-RESISTANT		
<i>clozapine</i>	1	
ANTISPASTICITY AGENTS		
ANTISPASTICITY AGENTS		
BACLOFEN	1	ST
NO USP CLASS		
<i>baclofen</i>	1, 3	ST
<i>tizanidine hcl</i>	1	
ANTIVIRALS		
ANTI-CYTOMEGALOVIRUS (CMV) AGENTS		
<i>valganciclovir hcl</i>	1, 2, 3	
ANTI-HIV AGENTS		
DESCOVY	3	QL, ST
ANTI-HIV AGENTS, INTEGRASE INHIBITORS (INSTI)		
STRIBILD	3	ST
TRIUMEQ	3	ST
ANTI-HIV AGENTS, NON-NUCLEOSIDE REVERSE TRANSCRIPTASE INHIBITORS		
EDURANT	2	QL
<i>efavirenz</i>	1, 3	QL
<i>efavirenz-emtricitabine-tenofovir disoproxil fumarate</i>	1	QL
INTELENCE	3	QL
<i>nevirapine</i>	1, 3	QL
SYMFI LO	1	ST
ANTI-HIV AGENTS, NUCLEOSIDE AND NUCLEOTIDE REVERSE TRANSCRIPTASE INHIBITORS		
<i>abacavir sulfata</i>	1, 3	QL
<i>abacavir sulfata-lamivudine-zidovudine</i>	1, 3	QL
CIMDUO	2	QL
<i>emtricitabine</i>	1, 3	QL
<i>emtricitabine-tenofovir disoproxil fumarate</i>	1, 3	PA, QL
EPZICOM	3	QL
<i>lamivudine</i>	1, 3	QL
<i>lamivudine (hbv)</i>	1, 3	QL, ST
<i>lamivudine-zidovudine</i>	1, 3	QL
VIREAD	3	QL, ST
<i>zidovudine</i>	1	QL
ANTI-HIV AGENTS, OTHER		
<i>atazanavir sulfata</i>	1	QL
BIKTARVY	2	QL
DESCOVY	3	QL, ST
EVOTAZ	3	ST
<i>fosamprenavir calcium</i>	1	QL
GENVOYA	2	QL
ISENTRESS	2, 3	QL
<i>maraviroc</i>	1, 3	QL, ST
ODEFSEY	2	QL

Kaiser Permanente, a State Employee Health Benefit Formulary

Category/Drug Name	Tier Level	Restrictions
PREZCOBIX	2	
RUKOBIA	3	PA
SYMFI	2	QL
SYMTUZA	2	QL
TYBOST	3	ST
ANTI-HIV AGENTS, PROTEASE INHIBITORS		
APTIVUS	2	QL
<i>atazanavir sulfate</i>	1	QL
CRIXIVAN	2	
INVIRASE	2	QL
LEXIVA	3	QL
<i>lopinavir-ritonavir</i>	1, 3	QL
NORVIR	2, 3	QL
PREZISTA	2	QL
VIRACEPT	2	QL
ANTI-INFLUENZA AGENTS		
<i>oseltamivir phosphate</i>	1, 3	QL
RELENZA DISKHALER	2	QL
RIMANTADINE HCL	1	QL
XOFLUZA (40 MG DOSE)	3	QL
ANTIHEPATITIS AGENTS		
<i>adefovir dipivoxil</i>	1, 3	QL, ST
BARACLUDE	3	QL, ST
MAVYRET	3	PA, QL
PEGASYS	2	QL
RIBAVIRIN	1	
VEMLIDY	3	PA, QL
VOSEVI	2	PA, QL
ANTIHERPETIC AGENTS		
<i>acyclovir</i>	1	
TRIFLURIDINE	1	
ANTIVIRALS		
LAGEVRIO	3	QL, ST
NO USP CLASS (COMBINATION PRODUCT)		
ATRIPLA	3	QL
COMPLERA	3	QL
DELSTRIGO	3	QL
PAXLOVID (150/100)	3	QL, ST
ANXIOLYTICS		
ANXIOLYTICS, OTHER		
<i>alprazolam</i>	1	QL
<i>buspirone hcl</i>	1	
<i>chlordiazepoxide hcl</i>	1	QL
<i>clorazepate dipotassium</i>	1	QL, ST
DIASTAT ACUDIAL	3	
<i>diazepam</i>	1	QL
<i>lorazepam</i>	1	QL
<i>meprobamate</i>	1	ST
<i>oxazepam</i>	1	QL
BENZODIAZEPINES		

Kaiser Permanente, a State Employee Health Benefit Formulary

Category/Drug Name	Tier Level	Restrictions
<i>alprazolam</i>	1, 3	QL, ST
ATIVAN	3	QL, ST
AUTONOMIC DRUGS		
ANTICHOLINERGIC AGENTS		
<i>dicyclomine hcl</i>	1, 3	
<i>glycopyrrolate</i>	1, 3	
<i>ipratropium bromide (nasal)</i>	1	
<i>methscopolamine bromide</i>	1	ST
AUTONOMIC DRUGS, MISCELLANEOUS		
NICOTROL	3	QL, ST
<i>varenicline tartrate</i>	1, 3	ST
PARASYMPATHOMIMETIC (CHOLINERGIC) AGENTS		
<i>cevimeline hcl</i>	1	
<i>donepezil hydrochloride</i>	1	
GUANIDINE HCL	3	
<i>pilocarpine hcl (oral)</i>	1, 3	ST
<i>rivastigmine</i>	1	
SKELETAL MUSCLE RELAXANTS		
<i>carisoprodol</i>	1, 3	ST
CARISOPRODOL-ASPIRIN-CODEINE	1	ST
<i>chlorzoxazone</i>	1	ST
<i>cyclobenzaprine hcl</i>	1	ST
<i>dantrolene sodium</i>	1, 3	ST
<i>metaxalone</i>	1	ST
<i>orphenadrine citrate</i>	1	ST
<i>orphenadrine w/ aspirin & caff</i>	1	ST
<i>tizanidine hcl</i>	1, 3	ST
SYMPATHOLYTIC (ADRENERGIC BLOCKING) AGENTS		
<i>alfuzosin hcl</i>	1	
<i>silodosin</i>	1, 3	ST
SYMPATHOMIMETIC (ADRENERGIC) AGENTS		
<i>albuterol sulfate</i>	1, 3	
BROVANA	3	ST
<i>epinephrine (anaphylaxis)</i>	1, 3	ST
<i>fluticasone-salmeterol</i>	1, 3	ST
<i>levalbuterol hcl</i>	1, 3	ST
LEVALBUTEROL TARTRATE	1, 3	ST
<i>midodrine hcl</i>	1	
<i>terbutaline sulfate</i>	1	
TRELEGY ELLIPTA	3	ST
BIPOLAR AGENTS		
BIPOLAR AGENTS, OTHER		
<i>asenapine maleate</i>	1, 3	ST
SECUADO	3	ST
MOOD STABILIZERS		
<i>lithium carbonate</i>	1	
BLOOD FORMATION, COAGULATION, AND THROMBOSIS		
ANTICOAGULANTS		
PRADAXA	2	QL
COAGULANTS AND ANTICOAGULANTS		

Kaiser Permanente, a State Employee Health Benefit Formulary

Category/Drug Name	Tier Level	Restrictions
AMICAR	3	
BRILINTA	2	
<i>clopidogrel bisulfate</i>	1	
DURLAZA	3	
ELIQUIS	3	ST
<i>enoxaparin sodium</i>	1	
<i>fondaparinux sodium</i>	1, 3	ST
<i>prasugrel hcl</i>	1	
SAVAYSA	3	ST
<i>tranexamic acid</i>	1, 3	QL, ST
<i>warfarin sodium</i>	1	
XARELTO	3	QL, ST
ZONTIVITY	3	ST
HEMATOPOIETIC AGENTS		
ALVAIZ	2	
EPOGEN	3	
FULPHILA	3	ST
GRANIX	3	
JESDUVROQ	3	PA
NEULASTA	3	PA
NYVEPRIA	3	ST
PROMACTA	3	ST
RELEUKO	3	ST
RETACRIT	3	
ROLVEDON	3	PA
UDENYCA	3	PA
ZARXIO	3	ST
ZIEXTENZO	3	ST
PYRUVATE KINASE ACTIVATORS		
PYRUKYND	3	PA
BLOOD GLUCOSE REGULATORS		
ANTIDIABETIC AGENTS		
<i>acarbose</i>	1	
AFREZZA	3	PA, QL
ALOGLIPTIN BENZOATE	1, 3	PA
ALOGLIPTIN-METFORMIN HCL	1	PA
ALOGLIPTIN-PIOGLITAZONE	1	PA
BRENZAVVY	3	PA
BYDUREON BCISE	3	PA, QL
FIASP PUMPCART	3	PA
GATTEX	3	PA
<i>glimepiride</i>	1	
<i>glipizide</i>	1, 3	ST
<i>glipizide-metformin hcl</i>	1	
GLYNASE	3	ST
GLYXAMBI	3	PA
GVOKE PFS	3	ST
HUMALOG MIX 50/50	3	ST
INPEFA	3	PA
JANUVIA	3	PA

Kaiser Permanente, a State Employee Health Benefit Formulary

Category/Drug Name	Tier Level	Restrictions
JARDIANCE	2, 3	PA, QL
JENTADUETO XR	3	PA
KORLYM	3	PA
<i>metformin hcl</i>	1	
MOUNJARO	3	PA, QL
ONGLYZA	3	PA
OZEMPIC (0.25 OR 0.5 MG/DOSE)	3	PA, QL
<i>pioglitazone hcl</i>	1	
<i>pioglitazone hcl-glimepiride</i>	1	ST
<i>pioglitazone hcl-metformin hcl</i>	1, 3	ST
QTERN	3	PA
SEGLUROMET	3	PA
STEGLATRO	3	PA
STEGLUJAN	3	PA
SYMLINPEN 120	3	PA
SYNJARDY XR	3	PA
TRADJENTA	3	PA
TRIJARDY XR	3	PA
TRULICITY	3	PA, QL
VICTOZA	3	PA, QL
XIGDUO XR	3	PA
ZITUVIO	3	PA
DEVICES		
CONTOUR BLOOD GLUCOSE SYSTEM	2	
GLYCEMIC AGENTS		
BAQSIMI ONE PACK	2	
GLUCAGON EMERGENCY	3	
GVOKE HYPOPEN 1-PACK	3	ST
PROGLYCEM	3	ST
INSULINS		
ADMELOG	3	ST
BASAGLAR TEMPO PEN	3	ST
FIASP PENFILL	3	ST
HUMULIN 70/30	2	
HUMULIN N	3	ST
NOVOLIN R	3	PA
INSULIN GLARGINE-YFGN	2, 3	ST
LYUMJEV	3	ST
SOLIQUA	3	PA, QL
XULTOPHY	3	PA, QL
NO USP CLASS (COMBINATION PRODUCT)		
BD VEO INSULIN SYRINGE U/F	1	
CONTOUR TEST	2	
<i>diazoxide</i>	1	
JANUMET	3	PA
JENTADUETO	3	PA
KAZANO	3	PA
OSENI	3	PA
<i>saxagliptin-metformin hcl</i>	1, 3	PA
BLOOD PRODUCTS/MODIFIERS/ VOLUME EXPANDERS		

Kaiser Permanente, a State Employee Health Benefit Formulary

Category/Drug Name	Tier Level	Restrictions
ANTICOAGULANTS		
<i>dabigatran etexilate mesylate</i>	1, 2	QL
<i>enoxaparin sodium</i>	1	
FRAGMIN	3	ST
<i>warfarin sodium</i>	1	
BLOOD FORMATION MODIFIERS		
<i>anagrelide hcl</i>	1	
ARANESP (ALBUMIN FREE)	2	
<i>icatibant acetate</i>	1, 3	PA
LEUKINE	2	
MOZOBIL	3	ST
NEUPOGEN	3	PA
PROCRIT	2, 3	
COAGULANTS		
<i>aminocaproic acid</i>	1, 3	
PLATELET MODIFYING AGENTS		
<i>aspirin-dipyridamole</i>	1	ST
<i>cilostazol</i>	1	
<i>clopidogrel bisulfate</i>	1	
<i>dipyridamole</i>	1	
CARDIOVASCULAR AGENTS		
ALPHA-ADRENERGIC AGONISTS		
CATAPRES-TTS-1	3	ST
<i>clonidine hcl</i>	1	ST
<i>guanfacine hcl</i>	1	
<i>methyl dopa</i>	1	QL, ST
NORTHERA	3	PA
ALPHA-ADRENERGIC BLOCKING AGENTS		
CARDURA	3	ST
DIBENZYLINE	3	ST
<i>prazosin hcl</i>	1, 3	ST
<i>terazosin hcl</i>	1	
ANGIOTENSIN II RECEPTOR ANTAGONISTS		
ATACAND HCT	3	ST
AZOR	3	ST
<i>losartan potassium</i>	1	
ANGIOTENSIN-CONVERTING ENZYME (ACE) INHIBITORS		
ACCUPRIL	3	ST
AZOR	3	ST
<i>captopril</i>	1	
<i>enalapril maleate</i>	1	
<i>lisinopril</i>	1	
LOTREL	3	ST
MICARDIS HCT	3	ST
<i>ramipril</i>	1	
VASERETIC	3	ST
ANTIARRHYTHMICS		
<i>amiodarone hcl</i>	1	
CARDIZEM CD	3	ST
<i>disopyramide phosphate</i>	1, 2	

Kaiser Permanente, a State Employee Health Benefit Formulary

Category/Drug Name	Tier Level	Restrictions
<i>flecainide acetate</i>	1	
LANOXIN	3	ST
<i>mexiletine hcl</i>	1	
<i>propafenone hcl</i>	1, 3	ST
<i>quinidine sulfate</i>	1	
TIAZAC	3	ST
TIKOSYN	3	ST
ANTILIPEMIC AGENTS		
<i>icosapent ethyl</i>	1	PA
VYTORIN	3	ST
BETA-ADRENERGIC BLOCKING AGENTS		
<i>acebutolol hcl</i>	1	
<i>atenolol</i>	1	
<i>atenolol & chlorthalidone</i>	1	
<i>betaxolol hcl</i>	1	ST
<i>bisoprolol fumarate</i>	1	
<i>carvedilol</i>	1	
COREG CR	3	ST
INDERAL XL	3	ST
<i>labetalol hcl</i>	1	
<i>metoprolol & hydrochlorothiazide</i>	1	ST
<i>metoprolol succinate</i>	1, 3	ST
<i>metoprolol tartrate</i>	1	
<i>nadolol</i>	1	
<i>nebivolol hcl</i>	1, 3	ST
<i>pindolol</i>	1	ST
<i>propranolol hcl</i>	1, 3	ST
PROPRANOLOL-HCTZ	1	
<i>sotalol hcl</i>	1	
<i>timolol maleate</i>	1	
CALCIUM CHANNEL BLOCKING AGENTS		
<i>amlodipine besylate-atorvastatin calcium</i>	1	ST
<i>diltiazem hcl</i>	1	
<i>diltiazem hcl coated beads</i>	1	
<i>felodipine</i>	1	
LEVAMLODIPINE MALEATE	3	
<i>nifedipine</i>	1	
<i>nimodipine</i>	1, 3	ST
<i>verapamil hcl</i>	1	
CARDIOVASCULAR AGENTS, OTHER		
<i>amlodipine-valsartan-hydrochlorothiazide</i>	1	ST
ASPRUZYO SPRINKLE	3	ST
<i>digoxin</i>	1, 2	
<i>pentoxifylline</i>	1	
DIURETICS, CARBONIC ANHYDRASE INHIBITORS		
<i>acetazolamide</i>	1	
DIURETICS, LOOP		
<i>bumetanide</i>	1	
<i>furosemide</i>	1	
<i>torseamide</i>	1	

Kaiser Permanente, a State Employee Health Benefit Formulary

Category/Drug Name	Tier Level	Restrictions
DIURETICS, POTASSIUM-SPARING		
ALDACTAZIDE	3	ST
<i>spironolactone</i>	1	
<i>triamterene</i>	1	
DIURETICS, THIAZIDE		
<i>chlorthalidone</i>	1	
<i>hydrochlorothiazide</i>	1	
<i>indapamide</i>	1	
<i>metolazone</i>	1	
DYSLIPIDEMICS		
ATORVALIQ	3	ST
DYSLIPIDEMICS, FIBRIC ACID DERIVATIVES		
ANTARA	1, 3	ST
<i>fenofibrate</i>	1, 3	ST
FIBRICOR	3	ST
<i>gemfibrozil</i>	1	
TRILIPIX	3	ST
DYSLIPIDEMICS, HMG COA REDUCTASE INHIBITORS		
<i>atorvastatin calcium</i>	1	
<i>lovastatin</i>	1	
<i>pravastatin sodium</i>	1	
<i>rosuvastatin calcium</i>	1, 3	ST
<i>simvastatin</i>	1	
DYSLIPIDEMICS, OTHER		
<i>cholestyramine</i>	1	
<i>cholestyramine light</i>	1	
<i>colestipol hcl</i>	1	
<i>ezetimibe</i>	1, 3	ST
JUXTAPID	3	PA
PRALUENT	3	PA
REPATHA	3	PA
HYPOTENSIVE AGENTS		
METHYLDOPA-HYDROCHLOROTHIAZIDE	1	ST
<i>midodrine hcl</i>	1	
NO USP CLASS (COMBINATION PRODUCT)		
AMILORIDE-HYDROCHLOROTHIAZIDE	1	
<i>bisoprolol & hydrochlorothiazide</i>	1	
<i>lisinopril & hydrochlorothiazide</i>	1	
<i>losartan potassium & hydrochlorothiazide</i>	1	
<i>triamterene & hydrochlorothiazide</i>	1	
RENIN-ANGIOTENSIN-ALDOSTERONE SYSTEM INHIBITORS		
ENTRESTO	3	ST
VASODILATING AGENTS		
ADEMPAS	3	PA, QL
ORENITRAM	3	ST
TADLIQ	3	ST
TYVASO	3	ST
VASODILATORS, DIRECT-ACTING ARTERIAL/VENOUS		
<i>hydralazine hcl</i>	1	
<i>isosorbide dinitrate</i>	1	ST

Kaiser Permanente, a State Employee Health Benefit Formulary

Category/Drug Name	Tier Level	Restrictions
<i>isosorbide dinitrate-hydralazine hcl</i>	1, 3	ST
<i>isosorbide mononitrate</i>	1	
<i>minoxidil</i>	1	
<i>nitroglycerin</i>	1, 3	ST
CARDIOVASCULAR DRUGS		
A-ADRENERGIC BLOCKING AGENTS		
<i>doxazosin mesylate</i>	1	
ALPHA-ADRENERGIC BLOCKING AGENTS		
SOTYLIZE	3	ST
ANTILIPEMIC AGENTS		
<i>atorvastatin calcium</i>	1	
<i>cholestyramine</i>	1	
<i>choline fenofibrate</i>	1	
<i>colestipol hcl</i>	1, 3	ST
EZETIMIBE-ROSUVASTATIN	1	ST
<i>ezetimibe-simvastatin</i>	1	
<i>fenofibrate</i>	1, 3	ST
<i>fenofibrate micronized</i>	1	
FENOFIBRIC ACID	1, 3	
<i>fluvastatin sodium</i>	1, 3	ST
<i>icosapent ethyl</i>	1, 3	PA
<i>lovastatin</i>	1, 3	
NEXLETOL	3	PA
NEXLIZET	3	PA
<i>niacin (antihyperlipidemic)</i>	1, 3	ST
<i>omega-3 fatty acids</i>	1	ST
<i>omega-3-acid ethyl esters</i>	1, 3	
<i>pitavastatin calcium</i>	1, 3	ST
WELCHOL	3	ST
BETA-ADRENERGIC BLOCKING AGENTS		
<i>acebutolol hcl</i>	1	
CALCIUM CHANNEL MODIFYING AGENTS		
EXFORGE HCT	3	ST
CALCIUM-CHANNEL BLOCKING AGENTS		
<i>amlodipine besylate</i>	1	
<i>amlodipine besylate-benazepril hcl</i>	1, 3	ST
<i>amlodipine besylate-valsartan</i>	1, 3	ST
<i>amlodipine-valsartan-hydrochlorothiazide</i>	1, 3	ST
CADUET	3	ST
<i>diltiazem hcl</i>	1, 3	ST
<i>diltiazem hcl coated beads</i>	1	
<i>diltiazem hcl extended release beads</i>	1, 3	ST
<i>isradipine</i>	1	ST
<i>nicardipine hcl</i>	1	
<i>nifedipine</i>	1, 3	
<i>nisoldipine</i>	1, 3	ST
TARKA	1, 3	ST
<i>telmisartan-amlodipine</i>	1	ST
TRIBENZOR	3	ST
<i>verapamil hcl</i>	1, 3	ST

Kaiser Permanente, a State Employee Health Benefit Formulary

Category/Drug Name	Tier Level	Restrictions
CARDIAC DRUGS		
<i>amiodarone hcl</i>	1	
CAMZYOS	3	PA
<i>digoxin</i>	1, 3	
<i>ivabradine hcl</i>	1, 3	
MULTAQ	3	ST
<i>propafenone hcl</i>	1	
<i>quinidine gluconate</i>	1	
<i>ranolazine</i>	1	QL
VYNDAMAX	3	PA
VYNDAQEL	3	PA
DYSLIPIDEMICS, OTHER		
ROSZET	3	ST
HYPOTENSIVE AGENTS		
<i>clonidine</i>	1, 3	ST
<i>clonidine hcl (adhd)</i>	1	ST
<i>guanfacine hcl</i>	1	
<i>hydralazine hcl</i>	1	
VECAMYL	1	
NO USP CLASS		
<i>dofetilide</i>	1	
RENIN-ANGIOTENSIN-ALDOSTERONE SYSTEM INHIBITORS		
<i>benazepril & hydrochlorothiazide</i>	1	
<i>benazepril hcl</i>	1	
BENICAR	3	ST
BENICAR HCT	3	ST
<i>candesartan cilexetil</i>	1, 3	ST
<i>candesartan cilexetil-hydrochlorothiazide</i>	1, 3	ST
CAPTOPRIL-HYDROCHLOROTHIAZIDE	1	ST
EDARBI	3	ST
EDARBYCLOR	3	ST
<i>enalapril maleate & hydrochlorothiazide</i>	1	
ENTRESTO	2	
<i>eplerenone</i>	1, 3	ST
<i>fosinopril sodium</i>	1	ST
<i>fosinopril sodium & hydrochlorothiazide</i>	1	ST
<i>irbesartan</i>	1, 3	ST
<i>irbesartan-hydrochlorothiazide</i>	1, 3	ST
<i>lisinopril</i>	1	
<i>lisinopril & hydrochlorothiazide</i>	1	
<i>moexipril hcl</i>	1	ST
<i>perindopril erbumine</i>	1	ST
<i>quinapril hcl</i>	1, 3	ST
<i>quinapril-hydrochlorothiazide</i>	1, 3	ST
<i>spironolactone & hydrochlorothiazide</i>	1, 3	
TEKTURNA	3	ST
TEKTURNA HCT	3	ST
<i>telmisartan</i>	1, 3	ST
<i>telmisartan-hydrochlorothiazide</i>	1, 3	ST
TEVETEN HCT	3	

Kaiser Permanente, a State Employee Health Benefit Formulary

Category/Drug Name	Tier Level	Restrictions
<i>trandolapril</i>	1	ST
<i>valsartan</i>	1, 3	ST
<i>valsartan-hydrochlorothiazide</i>	1, 3	ST
VASODILATING AGENTS		
ADCIRCA	3	ST
<i>ambrisentan</i>	1	
<i>isosorbide mononitrate</i>	1	
<i>nitroglycerin</i>	1, 3	ST
OPSUMIT	2	PA
<i>sildenafil citrate (pulmonary hypertension)</i>	1, 3	PA, QL
TYVASO REFILL KIT	3	ST
VENTAVIS	3	
VERQUVO	3	PA
CENTRAL NERVOUS SYSTEM AGENTS		
ANALGESICS AND ANTIPYRETICS		
<i>acetaminophen w/ codeine</i>	1	QL
ACTIQ	1, 3	QL, ST
BELBUCA	3	ST
<i>butalbital-acetaminophen</i>	1	ST
<i>butalbital-acetaminophen-caffeine</i>	1	ST
BUTRANS	3	QL, ST
CAMBIA	3	QL, ST
CELEBREX	3	ST
CODEINE SULFATE	1	QL, ST
<i>diclofenac potassium</i>	1, 3	ST
<i>diclofenac sodium</i>	1	
<i>diclofenac w/ misoprostol</i>	1	
<i>diflunisal</i>	1	ST
EC-NAPROSYN	3	
<i>etodolac</i>	1	ST
<i>fenoprofen calcium</i>	1, 3	ST
<i>fentanyl</i>	1, 3	QL, ST
<i>flurbiprofen</i>	1	ST
GRALISE	3	ST
HYDROCODONE BITARTRATE ER	1	QL, ST
<i>hydrocodone bitartrate-homatropine methylbromide</i>	1	QL
<i>hydrocodone-acetaminophen</i>	1	QL, ST
<i>hydrocodone-ibuprofen</i>	1	QL, ST
<i>hydromorphone hcl</i>	1, 3	QL, ST
<i>ibuprofen</i>	1	
<i>ibuprofen-famotidine</i>	1	ST
KETOPROFEN	1	ST
<i>ketorolac tromethamine</i>	1	QL
<i>levorphanol tartrate</i>	1	QL, ST
MECLOFENAMATE SODIUM	1	ST
<i>mefenamic acid</i>	1	QL, ST
<i>methadone hcl</i>	1	QL
<i>morphine sulfate</i>	1, 3	QL, ST
MORPHINE SULFATE ER BEADS	1	QL, ST
NAPRELAN	3	ST

Kaiser Permanente, a State Employee Health Benefit Formulary

Category/Drug Name	Tier Level	Restrictions
<i>naproxen-esomeprazole magnesium</i>	1	
NUCYNTA	3	QL, ST
<i>oxaprozin</i>	1, 3	ST
<i>oxycodone hcl</i>	1, 3	QL, ST
<i>oxycodone w/ acetaminophen</i>	1	QL, ST
<i>pentazocine w/ naloxone hcl</i>	1	QL
<i>piroxicam</i>	1, 3	ST
<i>tramadol hcl</i>	1, 3	QL, ST
<i>tramadol-acetaminophen</i>	1, 3	QL, ST
TREZIX	1	ST
ZORVOLEX	3	
ANOREXIGENIC AGENTS AND RESPIRATORY AND CEREBRAL STIMULANTS		
<i>amphetamine sulfate</i>	1	ST
<i>amphetamine-dextroamphetamine</i>	1	QL, ST
<i>dexmethylphenidate hcl</i>	1, 3	QL, ST
<i>dextroamphetamine sulfate</i>	1	ST
KAPVAY	3	ST
<i>methamphetamine hcl</i>	1, 3	PA, ST
<i>methylphenidate</i>	1, 3	QL, ST
<i>methylphenidate hcl</i>	1, 3	QL, ST
<i>modafinil</i>	1, 3	QL, ST
VYVANSE	3	QL, ST
ANTICONVULSANTS		
<i>carbamazepine</i>	1	
<i>clobazam</i>	1	
<i>clonazepam</i>	1	QL
<i>diazepam (anticonvulsant)</i>	1, 3	
<i>divalproex sodium</i>	1	
EQUETRO	3	ST
FELBATOL	3	ST
FYCOMPA	3	QL, ST
<i>gabapentin</i>	1	
HORIZANT	3	ST
<i>lamotrigine</i>	1, 3	ST
<i>levetiracetam</i>	1	
<i>oxcarbazepine</i>	1, 3	ST
<i>phenobarbital</i>	1	
<i>phenytoin sodium extended</i>	1	
<i>pregabalin</i>	1, 3	QL, ST
<i>pregabalin (once-daily)</i>	1, 3	ST
<i>tiagabine hcl</i>	1, 3	ST
<i>topiramate</i>	1, 3	QL, ST
<i>valproate sodium</i>	1	
<i>zonisamide</i>	1	
ANTICONVULSANTS, OTHER		
KEPPRA	3	ST
TEGRETOL-XR	3	ST
TOPAMAX	3	ST
ANTIMIGRAINE AGENTS		
AIMOVIG	3	PA

Kaiser Permanente, a State Employee Health Benefit Formulary

Category/Drug Name	Tier Level	Restrictions
AJOVY	3	ST
<i>almotriptan malate</i>	1	ST
<i>clonazepam</i>	1	QL
<i>eletriptan hydrobromide</i>	1, 3	ST
ERGOMAR	1	ST
<i>frovatriptan succinate</i>	1, 3	ST
MAXALT	3	QL, ST
<i>naratriptan hcl</i>	1	QL
QULIPTA	3	PA, QL
<i>sumatriptan</i>	1	
<i>sumatriptan succinate</i>	1, 3	QL, ST
TREXIMET	3	ST
UBRELVY	3	PA, QL
ZAVZPRET	3	PA
<i>zolmitriptan</i>	1, 3	ST
ANTIPARKINSON AGENTS, OTHER		
XADAGO	3	ST
ANTIPARKINSONIAN AGENTS		
<i>amantadine hcl</i>	1	
<i>benztropine mesylate</i>	1	
<i>bromocriptine mesylate</i>	1	
<i>carbidopa</i>	1, 3	ST
<i>carbidopa-levodopa</i>	1, 3	ST
<i>entacapone</i>	1	
NEUPRO	3	ST
<i>pramipexole dihydrochloride</i>	1, 3	
<i>rasagiline mesylate</i>	1, 3	ST
<i>ropinirole hydrochloride</i>	1	ST
<i>tolcapone</i>	1	
TRIHEXYPHENIDYL HCL	1	
ZELAPAR	3	ST
ANXIOLYTICS, SEDATIVES, AND HYPNOTICS		
<i>alprazolam</i>	1, 3	QL, ST
BELSOMRA	3	ST
<i>bupirone hcl</i>	1	
<i>diazepam</i>	1	QL
<i>estazolam</i>	1	QL
<i>eszopiclone</i>	1, 3	QL, ST
FLURAZEPAM HCL	1	QL
<i>hydroxyzine hcl</i>	1	
<i>hydroxyzine pamoate</i>	1, 3	ST
<i>lorazepam</i>	1, 3	QL, ST
QUAZEPAM	3	QL, ST
QUVIVIQ	3	QL, ST
<i>ramelteon</i>	1, 3	ST
SECONAL	1	
SILENOR	3	ST
<i>tasimelteon</i>	1, 3	PA
<i>temazepam</i>	1, 3	QL, ST
<i>triazolam</i>	1	QL

Kaiser Permanente, a State Employee Health Benefit Formulary

Category/Drug Name	Tier Level	Restrictions
<i>zolpidem tartrate</i>	1, 3	QL, ST
ATTENTION DEFICIT HYPERACTIVITY DISORDER AGENTS, AMPHETAMINES		
ADZENYS ER	3	QL, ST
<i>amphetamine-dextroamphetamine</i>	1, 3	PA, QL
<i>dextroamphetamine sulfate</i>	1, 3	QL, ST
ATTENTION DEFICIT HYPERACTIVITY DISORDER AGENTS, NON-AMPHETAMINES		
<i>methylphenidate hcl</i>	1, 3	PA, QL, ST
QELBREE	3	QL, ST
CENTRAL NERVOUS SYSTEM AGENTS, MISCELLANEOUS		
<i>acamprosate calcium</i>	1	ST
<i>atomoxetine hcl</i>	1, 3	ST
<i>butalbital-acetaminophen</i>	1	QL, ST
EPRONTIA	3	ST
<i>guanfacine hcl (adhd)</i>	1, 3	ST
<i>memantine hcl</i>	1, 3	ST
<i>paroxetine hcl</i>	1	
RELYVRIO	3	PA
<i>riluzole</i>	1, 3	
SAVELLA	3	QL, ST
<i>tetrabenazine</i>	1	
WAKIX	3	PA
XYWAV	3	PA
CENTRAL NERVOUS SYSTEM, OTHER		
<i>armodafinil</i>	1	QL
<i>memantine hcl</i>	1	
NUEDEXTA	3	PA
RILUTEK	3	ST
XENAZINE	3	PA
ERGOT ALKALOIDS		
ERGOTAMINE-CAFFEINE	1	ST
GAMMA-AMINOBTYRIC ACID (GABA) AUGMENTING AGENTS		
NEURONTIN	3	ST
GLUCOCORTICOIDS/MINERALOCORTICOIDS		
<i>dexamethasone</i>	1	
MISCELLANEOUS THERAPEUTIC AGENTS		
BETASERON	1	PA
GRALISE	3	ST
MULTIPLE SCLEROSIS AGENTS		
AVONEX PREFILLED	3	PA
BAFIERTAM	3	PA
<i>dalfampridine</i>	1, 3	PA
<i>fingolimod hcl</i>	1, 3	PA
<i>glatiramer acetate</i>	1, 3	PA
LYVISPAH	3	ST
MAYZENT	3	PA
PONVORY	3	PA
TASCENSO ODT	3	PA
ZEPOSIA	3	PA, QL
NONSTEROIDAL ANTI-INFLAMMATORY DRUGS		
ARTHROTEC	3	ST

Kaiser Permanente, a State Employee Health Benefit Formulary

Category/Drug Name	Tier Level	Restrictions
OPIATE ANTAGONISTS		
<i>buprenorphine hcl-naloxone hcl dihydrate</i>	1, 3	ST
<i>naloxone hcl</i>	1, 3	ST
PSYCHOTHERAPEUTIC AGENTS		
<i>amoxapine</i>	1	
APLENZIN	3	ST
<i>aripiprazole</i>	1, 3	ST
<i>asenapine maleate</i>	1	ST
AUVELITY	3	PA
<i>bupropion hcl (smoking deterrent)</i>	1	ST
CAPLYTA	3	ST
CHLORDIAZEPOXIDE-AMITRIPTYLINE	1	
<i>chlorpromazine hcl</i>	1, 3	ST
<i>citalopram hydrobromide</i>	1	
<i>clozapine</i>	1, 3	ST
DESVENLAFAXINE ER	3	ST
<i>doxepin hcl</i>	1	
<i>duloxetine hcl</i>	1	ST
<i>escitalopram oxalate</i>	1, 3	ST
FETZIMA	3	QL, ST
<i>fluoxetine hcl</i>	1, 3	ST
FLUOXETINE HCL (PMDD)	1	ST
FLUPHENAZINE HCL	1	
<i>fluvoxamine maleate</i>	1	QL, ST
<i>haloperidol lactate</i>	1	
<i>imipramine pamoate</i>	1	ST
<i>lithium carbonate</i>	1, 3	
<i>loxapine succinate</i>	1	ST
<i>lurasidone hcl</i>	1	QL
LYBALVI	3	ST
MARPLAN	3	ST
<i>mirtazapine</i>	1, 3	ST
MOLINDONE HCL	1	ST
NEFAZODONE HCL	1	ST
<i>nortriptyline hcl</i>	1	ST
<i>olanzapine-fluoxetine hcl</i>	1, 3	ST
<i>paroxetine hcl</i>	1, 3	ST
<i>paroxetine mesylate (vasomotor)</i>	1	ST
<i>perphenazine</i>	1	
PERPHENAZINE-AMITRIPTYLINE	1	
PEXEVA	3	ST
PIMOZIDE	1	ST
<i>protriptyline hcl</i>	1	ST
REXULTI	3	QL, ST
<i>risperidone</i>	1, 3	
<i>sertraline hcl</i>	1, 3	ST
SUNOSI	3	PA
<i>thioridazine hcl</i>	1	
<i>thiothixene</i>	1	
<i>trimipramine maleate</i>	1	ST

Kaiser Permanente, a State Employee Health Benefit Formulary

Category/Drug Name	Tier Level	Restrictions
TRINTELLIX	3	QL, ST
<i>venlafaxine hcl</i>	1, 3	ST
<i>vilazodone hcl</i>	1, 3	QL, ST
ZURZUVAE	3	PA
SLEEP PROMOTING AGENTS		
DAYVIGO	3	ST
DORAL	3	QL, ST
HALCION	3	QL, ST
<i>zolpidem tartrate</i>	1, 3	QL, ST
DENTAL AND ORAL AGENTS		
MISCELLANEOUS THERAPEUTIC AGENTS		
<i>chlorhexidine gluconate (mouth-throat)</i>	1	
NO USP CLASS		
<i>pilocarpine hcl (oral)</i>	1	
<i>triamcinolone acetonide (mouth)</i>	1	
DERMATOLOGICAL AGENTS		
ACNE AND ROSACEA AGENTS		
ABSORICA	3	ST
ABSORICA LD	3	ST
AKLIEF	3	ST
ALTRENO	2, 3	ST, AGE
<i>azelaic acid</i>	1	
<i>benzoyl peroxide-erythromycin</i>	1	ST
KLARON	3	ST
WINLEVI	3	ST
DERMATITIS AND PRURITUS AGENTS		
ALA SCALP	1	ST
APEXICON E	1	ST
<i>clobetasol propionate</i>	1, 3	ST
CORDRAN	1, 3	ST
DESONIDE	1	ST
DIPROLENE	3	ST
<i>triamcinolone acetonide (topical)</i>	1, 3	ST
VANOS	3	ST
DERMATOLOGICAL AGENTS, OTHER		
TARGRETIN	3	QL, ST
NO USP CLASS		
BENZOYL PEROXIDE	3	
<i>clindamycin phosphate (topical)</i>	1	
<i>clobetasol propionate emollient base</i>	1	ST
COAL TAR	2	
CONDYLOX	1, 3	
CORDRAN	3	ST
<i>dapsone (topical)</i>	1, 3	ST
<i>desoximetasone</i>	1	
DRITHO-CREME HP	3	ST
DRYSOL	2	
DUPIXENT	3	PA
EUCRISA	3	PA
<i>fluorouracil (topical)</i>	1, 2	

Kaiser Permanente, a State Employee Health Benefit Formulary

Category/Drug Name	Tier Level	Restrictions
<i>imiquimod</i>	1	
<i>iodoquinol-hc</i>	1	
<i>isotretinoin</i>	1	
METHOXSALEN RAPID	3	ST
REGRANEX	2	
RETIN-A MICRO PUMP	3	AGE
RHOFADE	3	ST
<i>salicylic acid</i>	1	ST
SANTYL	2	
<i>selenium sulfide</i>	1	
SPINOSAD	1	
VECTICAL	1	ST
VEREGEN	3	ST
NO USP CLASS (COMBINATION PRODUCT)		
BENZOYL PEROXIDE FORTE- HC	3	
SKIN AND MUCOUS MEMBRANE AGENTS, MISCELLANEOUS		
ONEXTON	3	PA
WYNZORA	3	ST
TOPICAL ANTI-INFECTIVES		
CLINDESSE	3	QL, ST
GYNAZOLE-1	1	ST
LOPROX	3	ST
LUZU	3	ST
ZOVIRAX	3	ST
DEVICES		
DEVICES		
AEROCHAMBER PLUS FLO-VU SMALL	2	
FREESTYLE LITE TEST	3	ST
NOVOFINE 30GX8MM	3	ST
TODAY SPONGE	3	ST
DIABETIC SUPPLIES		
DIABETIC SUPPLIES		
BD INSULIN SYRINGE	1, 2, 3	ST
BD INSULIN SYRINGE U-500	2	
BD PEN NEEDLE NANO U/F	1, 2	
DIASTIX	3	ST
INPEN 100-BLUE-LILLY-HUMALOG	3	PA
OMNIPOD 5 G6 INTRO (GEN 5)	3	PA, QL
ONETOUCH DELICA LANCETS 30G	2	
DIAGNOSTIC AGENTS		
DIABETES MELLITUS		
BD PEN NEEDLE MINI U/F	2	
ELECTROLYTES/ MINERALS/ METALS/ VITAMINS		
ELECTROLYTE/MINERAL REPLACEMENT		
K-TAB	3	ST
ELECTROLYTE/MINERAL/METAL MODIFIERS		
EXJADE	3	PA, QL
ELECTROLYTIC, CALORIC, AND WATER BALANCE		
ACIDIFYING AND ALKALINIZING AGENTS		
<i>potassium citrate (alkalinizer)</i>	1, 3	ST

Kaiser Permanente, a State Employee Health Benefit Formulary

Category/Drug Name	Tier Level	Restrictions
AMMONIA DETOXICANTS		
KRISTALOSE	1	ST
LITHOSTAT	3	
RAVICTI	3	PA
DIURETICS		
<i>acetazolamide</i>	1	
<i>amiloride hcl</i>	1	ST
<i>bumetanide</i>	1	
DIURIL	3	
DYRENIUM	3	ST
EDECIN	3	ST
<i>furosemide</i>	1	
THALITONE	3	ST
<i>triamterene & hydrochlorothiazide</i>	1	
ION-REMOVING AGENTS		
AURYXIA	3	ST
LOKELMA	3	ST
<i>sevelamer carbonate</i>	1, 3	ST
<i>sevelamer hcl</i>	1, 3	ST
<i>sodium polystyrene sulfonate</i>	1	
VELPHORO	3	ST
VELTASSA	3	ST
REPLACEMENT PREPARATIONS		
<i>potassium chloride</i>	1	ST
<i>potassium chloride microencapsulated crystals cr</i>	1	
URICOSURIC AGENTS		
<i>colchicine w/ probenecid</i>	1	
ENZYME REPLACEMENT/ MODIFIERS		
MISCELLANEOUS THERAPEUTIC AGENTS		
<i>sapropterin dihydrochloride</i>	1	PA
NO USP CLASS		
CERDELGA	3	PA
CYSTADANE	3	ST
CYSTAGON	3	ST
<i>sapropterin dihydrochloride</i>	1, 3	PA
<i>sodium phenylbutyrate</i>	1, 3	
ZAVESCA	3	PA
ENZYMES		
ENZYMES		
<i>miglustat</i>	1	PA
PALYNZIQ	3	PA
ZENPEP	2	
EYE, EAR, NOSE, AND THROAT (EENT) PREPARATIONS		
ANTI-INFECTIVES		
BESIVANCE	3	ST
<i>levofloxacin (ophth)</i>	1	
MOXEZA	3	ST
SULFACETAMIDE SODIUM	1	
ZIRGAN	3	ST
ANTI-INFLAMMATORY AGENTS		

Kaiser Permanente, a State Employee Health Benefit Formulary

Category/Drug Name	Tier Level	Restrictions
BECONASE AQ	3	ST
<i>bromfenac sodium (ophth)</i>	1, 3	ST
<i>budesonide (nasal)</i>	1	ST
CIPRO HC	3	ST
<i>ciprofloxacin-dexamethasone</i>	1	
<i>difluprednate</i>	1, 3	ST
EPIFOAM	1	ST
EYSUVIS	3	ST
FLAREX	3	ST
FLONASE SENSIMIST CHILDRENS	3	ST
<i>flunisolide (nasal)</i>	1	ST
<i>fluocinolone acetonide (otic)</i>	1	
FLURBIPROFEN SODIUM	1	
<i>fluticasone propionate (nasal)</i>	1	ST
<i>hydrocortisone w/acetic acid</i>	1	
ILEVRO	3	ST
<i>mometasone furoate (nasal)</i>	1, 3	ST
OMNARIS	3	ST
PREDNISOLONE SODIUM PHOSPHATE	1	
QNASL	3	ST
TOBRADEX ST	3	
<i>triamcinolone acetonide (nasal)</i>	1	ST
ZYLET	3	ST
ANTIALLERGIC AGENTS		
ALOCRIAL	3	ST
ALOMIDE	3	ST
<i>azelastine hcl</i>	1	ST
<i>azelastine hcl (ophth)</i>	1	ST
<i>azelastine hcl-fluticasone propionate</i>	1, 3	ST
<i>bepotastine besilate</i>	1, 3	ST
CROMOLYN SODIUM	1	ST
<i>epinastine hcl (ophth)</i>	1	ST
LASTACAFIT	3	ST
<i>olopatadine hcl</i>	1, 3	ST
<i>olopatadine hcl (nasal)</i>	1, 3	ST
ANTIGLAUCOMA AGENTS		
ALPHAGAN P	3	ST
BETIMOL	3	ST
<i>bimatoprost</i>	1, 3	ST
<i>brimonidine tartrate-timolol maleate</i>	3	ST
<i>brinzolamide</i>	1, 3	ST
CARTEOLOL HCL	1	
SIMBRINZA	3	ST
<i>tafluprost</i>	1, 3	ST
<i>timolol maleate (ophth)</i>	1, 3	ST
TRAVATAN Z	3	ST
EENT DRUGS, MISCELLANEOUS		
<i>acetic acid (otic)</i>	1	
APRACLONIDINE HCL	1	
CYSTARAN	3	

Kaiser Permanente, a State Employee Health Benefit Formulary

Category/Drug Name	Tier Level	Restrictions
HOMATROPAIRE	2	
<i>ketorolac tromethamine (ophth)</i>	1	
LACRISERT	3	ST
MIEBO	3	ST
XHANCE	3	PA
OPHTHALMIC AGENTS, OTHER		
TYRVAYA	3	QL, ST
GASTROINTESTINAL AGENTS		
ANTI-INFLAMMATORY AGENTS		
IBSRELA	3	PA
ANTIDIARRHEA AGENTS		
MYTESI	3	PA
ANTISPASMODICS, GASTROINTESTINAL		
<i>chlordiazepoxide hcl-clidinium bromide</i>	1	
<i>dicyclomine hcl</i>	1	
<i>glycopyrrolate</i>	1	
<i>hyoscyamine sulfate</i>	1	
GASTROINTESTINAL AGENTS, OTHER		
CHOLBAM	3	PA
<i>diphenoxylate w/ atropine</i>	1	
GIMOTI	1, 3	ST
PLENVU	3	ST
<i>sucrafate</i>	1	ST
<i>ursodiol</i>	1, 3	ST
VIBERZI	3	PA
HISTAMINE2 (H2) RECEPTOR ANTAGONISTS		
<i>cimetidine</i>	1	
<i>cimetidine hcl</i>	1	
LAXATIVES		
<i>lactulose</i>	1	
<i>lactulose (encephalopathy)</i>	1	
MISCELLANEOUS THERAPEUTIC AGENTS		
PANCREAZE	3	ST
NO USP CLASS (COMBINATION PRODUCT)		
GAVILYTE-C	1	
PROTECTANTS		
<i>misoprostol</i>	1	
<i>sucrafate</i>	1	
PROTON PUMP INHIBITORS		
ACIPHEX SPRINKLE	3	ST
<i>dexlansoprazole</i>	3	ST
NEXIUM	3	ST
PREVACID SOLUTAB	3	ST
PROTONIX	3	ST
GASTROINTESTINAL DRUGS		
ANTI-INFLAMMATORY AGENTS		
<i>alosetron hcl</i>	1, 3	ST
<i>mesalamine</i>	1, 3	ST
<i>mesalamine w/ cleanser</i>	1	
PROCTOFOAM HC	1	ST

Kaiser Permanente, a State Employee Health Benefit Formulary

Category/Drug Name	Tier Level	Restrictions
SKYRIZI	3	PA
ANTIDIARRHEA AGENTS		
<i>loperamide hcl</i>	1	
ANTIEMETICS		
<i>aprepitant</i>	1	QL, ST
<i>granisetron hcl</i>	1	
<i>meclizine hcl</i>	1, 3	ST
<i>ondansetron hcl</i>	1, 3	ST
<i>prochlorperazine</i>	1, 3	QL, ST
SANCUSO	3	ST
<i>scopolamine</i>	1, 3	ST
<i>trimethobenzamide hcl</i>	1, 3	ST
VARUBI (180 MG DOSE)	3	ST
ANTIULCER AGENTS AND ACID SUPPRESSANTS		
CARAFATE	3	ST
<i>cimetidine</i>	1	
<i>famotidine</i>	1	ST
<i>lansoprazole</i>	1, 3	ST
NEXIUM	3	ST
NIZATIDINE	1	ST
OMECLAMOX-PAK	3	ST
<i>omeprazole</i>	1	
<i>omeprazole-sodium bicarbonate</i>	1, 3	ST
<i>pantoprazole sodium</i>	1	
PRILOSEC	3	ST
PYLERA	3	ST
<i>rabeprazole sodium</i>	1, 3	ST
CATHARTICS AND LAXATIVE		
SUFLAVE	3	ST
CATHARTICS AND LAXATIVES		
OSMOPREP	3	QL, ST
<i>peg 3350-kcl-nacl-na sulfate-na ascorbate-ascorbic acid</i>	1, 3	ST
<i>peg 3350-kcl-sod bicarb-sod chloride-sod sulfate</i>	1, 2	
<i>peg 3350-potassium chloride-sod bicarbonate-sod chloride</i>	1	
PEG-PREP	1	
<i>polyethylene glycol 3350</i>	1, 2	
SUPREP BOWEL PREP KIT	1	ST
DIGESTANTS		
CREON	2, 3	ST
GASTROINTESTINAL AGENTS, OTHER		
CHENODAL	1	PA
GI DRUGS, MISCELLANEOUS		
HELIDAC THERAPY	3	ST
LINZESS	3	QL, ST
<i>lubiprostone</i>	1, 3	ST
<i>metoclopramide hcl</i>	1	
MOTEGRITY	3	ST
MOVANTIK	3	ST
OMVOH	3	PA
PANCREAZE	2, 3	ST

Kaiser Permanente, a State Employee Health Benefit Formulary

Category/Drug Name	Tier Level	Restrictions
RELISTOR	3	PA
SYMPROIC	3	ST
TRULANCE	3	ST
VELSIPITY	3	PA
ZELNORM	3	ST
GENE THERAPY AGENTS		
GENE THERAPY		
VYJUVEK	3	PA
GENETIC OR ENZYME OR PROTEIN DISORDER: REPLACEMENT, MODIFIERS, TREATMENT		
NO USP CLASS		
EMFLAZA	3	PA
STRENSIQ	3	PA
SUCRAID	3	PA
ZOKINVY	3	PA
GENITOURINARY AGENTS		
ADRENALS		
RAYOS	3	ST
ANTISPASMODICS, URINARY		
DETROL	3	ST
<i>oxybutynin chloride</i>	1	ST
<i>trospium chloride</i>	1	
VESICARE	3	ST
BENIGN PROSTATIC HYPERTROPHY AGENTS		
CARDURA XL	3	ST
<i>dutasteride-tamsulosin hcl</i>	1, 3	ST
<i>finasteride</i>	1	
<i>tadalafil</i>	1, 3	ST
<i>tamsulosin hcl</i>	1, 3	ST
GENITOURINARY AGENTS, OTHER		
<i>bethanechol chloride</i>	1	
ELMIRON	2	PA
<i>penicillamine</i>	1, 3	ST
NO USP CLASS		
<i>methylergonovine maleate</i>	1	
PHOSPHATE BINDERS		
<i>calcium acetate (phosphate binder)</i>	1, 2	
FOSRENOL	3	ST
<i>sevelamer carbonate</i>	1, 3	ST
GROWTH HORMONES		
GROWTH HORMONE AND RELATED AGENTS		
NGENLA	3	PA
HORMONAL AGENTS, STIMULANT/ REPLACEMENT/ MODIFYING (ADRENAL)		
GLUCOCORTICOIDS/MINERALOCORTICOIDS		
<i>alclometasone dipropionate</i>	1	
<i>betamethasone dipropionate (topical)</i>	1	
<i>betamethasone dipropionate augmented</i>	1	
<i>betamethasone valerate</i>	1	
<i>clobetasol propionate</i>	1	
<i>desonide</i>	1	
<i>dexamethasone</i>	1	

Kaiser Permanente, a State Employee Health Benefit Formulary

Category/Drug Name	Tier Level	Restrictions
<i>fludrocortisone acetate</i>	1	
<i>fluocinolone acetonide</i>	1	
<i>fluocinonide</i>	1	
<i>fluocinonide emulsified base</i>	1	
<i>hydrocortisone</i>	1	
<i>hydrocortisone (intrarectal)</i>	1	
<i>hydrocortisone (topical)</i>	1	
<i>methylprednisolone</i>	1	
<i>mometasone furoate</i>	1	
<i>prednisolone sodium phosphate</i>	1	
<i>prednisone</i>	1	
<i>triamcinolone acetonide (topical)</i>	1	
NO USP CLASS		
<i>dexamethasone sodium phosphate</i>	1	
<i>esterified estrogens & methyltestosterone</i>	1	
<i>norelgestromin-ethinyl estradiol</i>	1	QL
UCERIS	3	ST
HORMONAL AGENTS, STIMULANT/REPLACEMENT/MODIFYING (PITUITARY)		
ANDROGENS		
<i>cetorelix acetate</i>	1, 3	
TESTOSTERONE	1	
<i>testosterone cypionate</i>	1	
MISCELLANEOUS THERAPEUTIC AGENTS		
SOGROYA	3	PA
NO USP CLASS		
ACTHAR	3	PA
CHORIONIC GONADOTROPIN	3	ST
<i>desmopressin acetate</i>	1	
<i>desmopressin acetate spray</i>	1	
<i>desmopressin acetate spray refrigerated</i>	1	
GENOTROPIN	1, 3	PA
SAIZEN	3	PA
SELECTIVE ESTROGEN RECEPTOR MODIFYING AGENTS		
<i>raloxifene hcl</i>	1	
HORMONAL AGENTS, STIMULANT/REPLACEMENT/MODIFYING (SEX HORMONES/MODIFIERS)		
ANDROGENS		
ANDRODERM	3	ST
<i>danazol</i>	1	
<i>methyltestosterone</i>	1	ST
ESTROGENS		
ACTIVELLA	3	ST
DEPO-ESTRADIOL	1	
<i>estradiol</i>	1, 2	ST
<i>estradiol vaginal</i>	1, 3	ST
<i>estradiol valerate</i>	1	
NEXTSTELLIS	3	QL, ST
PREMARIN	3	ST
NO USP CLASS (COMBINATION PRODUCT)		
BIJUVA	3	ST
<i>desogestrel & ethinyl estradiol</i>	1	QL

Kaiser Permanente, a State Employee Health Benefit Formulary

Category/Drug Name	Tier Level	Restrictions
<i>esterified estrogens & methyltestosterone</i>	1	ST
<i>ethynodiol diacet & eth estrad</i>	1	QL
<i>levonorgestrel & eth estradiol</i>	1	QL
<i>levonorgestrel-eth estradiol (triphasic)</i>	1	QL
<i>norethindrone & eth estradiol</i>	1	QL
<i>norethindrone acetate-ethinyl estradiol</i>	1	ST
<i>norethindrone-eth estradiol (triphasic)</i>	1	QL
<i>norgestimate-ethinyl estradiol</i>	1	QL
<i>norgestimate-ethinyl estradiol (triphasic)</i>	1	QL
PROGESTINS		
ELLA	2	
<i>levonorgestrel (emergency oc)</i>	1	
<i>medroxyprogesterone acetate</i>	1	
<i>megestrol acetate</i>	1	
<i>norethindrone (contraceptive)</i>	1	QL
<i>norethindrone acetate</i>	1	
SLYND	3	ST
HORMONAL AGENTS, STIMULANT/REPLACEMENT/MODIFYING (THYROID)		
NO USP CLASS		
CYTOMEL	3	ST
<i>levothyroxine sodium</i>	1	
REZDIFFRA	3	PA
THYROID AND ANTITHYROID AGENTS		
<i>levothyroxine sodium</i>	1, 3	ST
<i>liothyronine sodium</i>	1	
HORMONAL AGENTS, SUPPRESSANT (ADRENAL)		
NO USP CLASS		
LYSODREN	2	
HORMONAL AGENTS, SUPPRESSANT (PARATHYROID)		
MISCELLANEOUS THERAPEUTIC AGENTS		
<i>cinacalcet hcl</i>	1	
NO USP CLASS		
<i>cinacalcet hcl</i>	1	
HORMONAL AGENTS, SUPPRESSANT (PITUITARY)		
HORMONAL AGENTS, SUPPRESSANT (PITUITARY)		
SYNAREL	2	PA
MISCELLANEOUS THERAPEUTIC AGENTS		
SOMAVERT	3	PA
NO USP CLASS		
<i>cabergoline</i>	1	
SOMAVERT	3	PA
HORMONAL AGENTS, SUPPRESSANT (SEX HORMONES/MODIFIERS)		
ANTIANDROGENS		
<i>abiraterone acetate</i>	1	QL
FLUTAMIDE	1	
<i>nilutamide</i>	1, 3	ST
NUBEQA	3	PA, QL
HORMONAL AGENTS, SUPPRESSANT (THYROID)		
ANTITHYROID AGENTS		
<i>methazolamide</i>	1	

Kaiser Permanente, a State Employee Health Benefit Formulary

Category/Drug Name	Tier Level	Restrictions
<i>methimazole</i>	1	
<i>propylthiouracil</i>	1	
HORMONES AND SYNTHETIC SUBSTITUTES		
ADRENALS		
ARISTOSPAN INTRALESIONAL	3	
BREO ELLIPTA	3	ST
<i>budesonide</i>	1, 3	PA
CORTISONE ACETATE	1	ST
DEXAMETHASONE	1	
FLO-PRED	3	
<i>hydrocortisone</i>	1, 3	PA, ST
<i>Hydrocortisone sodium succinate</i>	1	QL
<i>methylprednisolone</i>	1, 3	ST
<i>methylprednisolone acetate</i>	1, 3	
<i>prednisolone</i>	1	ST
<i>prednisolone sodium phosphate</i>	1, 3	ST
<i>prednisone</i>	1, 3	ST
<i>testosterone</i>	1	
<i>triamcinolone acetonide</i>	1, 3	
ANDROGENS		
AVEED	3	PA, QL
<i>budesonide</i>	1	
<i>oxandrolone</i>	1	ST
<i>testosterone</i>	1, 3	ST
TESTOSTERONE PROPIONATE	2	
XYOSTED	3	ST
CONTRACEPTIVES		
ANNOVERA	3	QL, ST
BALCOLTRA	3	ST
<i>desogestrel-ethinyl estradiol (biphasic)</i>	1	
<i>drospirenone-ethinyl estradiol</i>	1, 3	QL, ST
<i>drospirenone-ethinyl estradiol-levomefolate calcium</i>	1, 3	QL, ST
<i>ethynodiol diacet & eth estrad</i>	1	QL
<i>etonogestrel-ethinyl estradiol</i>	1, 3	QL, ST
<i>levonorgestrel & eth estradiol</i>	1, 3	QL, ST
<i>levonorgestrel-ethinyl estradiol (91-day)</i>	1, 3	QL, ST
<i>levonorgestrel-ethinyl estradiol (continuous)</i>	1	ST
LO LOESTRIN FE	3	QL, ST
<i>medroxyprogesterone acetate (contraceptive)</i>	1	QL
NATAZIA	3	ST
<i>norelgestromin-ethinyl estradiol</i>	1	QL, ST
<i>norethin acet & estrad-fe</i>	1, 3	QL, ST
<i>norethindrone & eth estradiol</i>	1	QL, ST
<i>norethindrone & ethinyl estradiol-fe</i>	1, 3	QL, ST
<i>norethindrone acet & eth estra</i>	1	ST
<i>norethindrone acetate-ethinyl estradiol-fe</i>	1	ST
<i>norgestimate-ethinyl estradiol (triphasic)</i>	1	QL
<i>norgestrel & ethinyl estradiol</i>	1	QL
TWIRLA	3	ST
VELIVET	1	ST

Kaiser Permanente, a State Employee Health Benefit Formulary

Category/Drug Name	Tier Level	Restrictions
DIABETIC AGENTS		
APIDRA	3	ST
BASAGLAR KWIKPEN	3	ST
CYCLOSET	3	ST
DAPAGLIFLOZIN PRO-METFORMIN ER	3	PA
DAPAGLIFLOZIN PROPANEDIOL	3	PA
DUETACT	3	ST
FIASP	3	ST
<i>glipizide</i>	1, 3	
<i>glipizide-metformin hcl</i>	1	
<i>glyburide</i>	1	
GLYBURIDE MICRONIZED	1	
<i>glyburide-metformin</i>	1	
HUMALOG	3	ST
HUMALOG MIX 50/50 KWIKPEN	3	ST
HUMULIN 70/30 KWIKPEN	2	
HUMULIN R U-500 (CONCENTRATED)	3	ST
INSULIN ASPART	3	ST
INSULIN ASPART PROT & ASPART	3	ST
INSULIN DEGLUDEC	3	ST
INVOKAMET	3	PA
INVOKANA	3	PA
LEVEMIR	3	ST
<i>metformin hcl</i>	1, 3	PA, ST
<i>migliol</i>	1	ST
<i>nateglinide</i>	1	ST
<i>repaglinide</i>	1	ST
SYNJARDY	3	PA
ESTROGENS		
<i>estradiol vaginal</i>	1	
<i>norethindrone acetate-ethinyl estradiol</i>	1	ST
ESTROGENS AND ANTIESTROGENS		
ANGELIQ	3	QL, ST
CLIMARA PRO	3	ST
DUAVEE	3	ST
ESTRACE	3	ST
<i>estradiol</i>	1, 3	ST
<i>estradiol & norethindrone acetate</i>	1, 3	ST
FEMRING	3	ST
MENEST	1	ST
<i>norethindrone acetate-ethinyl estradiol</i>	1, 3	ST
ORIAHNN	3	PA
PREFEST	1	ST
PREMARIN	3	ST
PREMPHASE	3	ST
GLYCEMIC AGENTS		
GLUCAGON EMERGENCY	1	
MISCELLANEOUS THERAPEUTIC AGENTS		
BIJUVA	3	ST
DESMOPRESSIN ACETATE	3	

Kaiser Permanente, a State Employee Health Benefit Formulary

Category/Drug Name	Tier Level	Restrictions
EVISTA	3	ST
MYFEMBREE	3	PA
PARATHYROID		
<i>calcitonin (salmon)</i>	1, 3	
<i>teriparatide (recombinant)</i>	1, 3	PA
PITUITARY		
<i>chorionic gonadotropin</i>	3	ST
<i>desmopressin acetate</i>	1, 3	ST
EGRIFTA SV	3	PA
SKYTROFA	3	PA, QL
PROGESTINS		
CRINONE	3	
<i>medroxyprogesterone acetate (contraceptive)</i>	1, 3	QL
<i>megestrol acetate (appetite)</i>	1	
<i>progesterone</i>	1, 3	ST
SOMATOTROPIN AGONISTS AND ANTAGONISTS		
SAIZEN	3	PA
SOMAVERT	3	PA
THYROID AND ANTITHYROID AGENTS		
LEVOTHYROXINE SODIUM	1, 3	ST
<i>methimazole</i>	1	
IMMUNOLOGICAL AGENTS		
IMMUNE SUPPRESSANTS		
<i>azathioprine</i>	1	ST
<i>cyclosporine</i>	1, 3	ST
<i>cyclosporine modified (for microemulsion)</i>	1, 3	ST
DUPIXENT	3	PA
ENBREL	2	PA
<i>mercaptopurine</i>	1	
<i>methotrexate sodium</i>	1	
<i>mycophenolate mofetil</i>	1, 3	ST
<i>mycophenolate sodium</i>	1, 3	ST
ORENCIA	3	ST
<i>sirolimus</i>	1, 3	ST
<i>tacrolimus</i>	1, 3	ST
IMMUNOLOGICAL AGENTS, OTHER		
RIDAURA	3	ST
SAPHNELO	3	PA
TYENNE	2	
IMMUNOMODULATORS		
ACTIMMUNE	2	
ARCALYST	3	PA
HIZENTRA	3	PA
HYQVIA	3	PA
JOENJA	3	PA, QL
<i>leflunomide</i>	1	
OLUMIANT	3	PA, QL
RINVOQ	3	PA
<i>teriflunomide</i>	1, 3	PA
XELJANZ	2	QL

Kaiser Permanente, a State Employee Health Benefit Formulary

Category/Drug Name	Tier Level	Restrictions
XEMBIFY	3	PA
MISCELLANEOUS THERAPEUTIC AGENTS		
GAMMAGARD	3	PA
NO USP CLASS		
DUPIXENT	3	PA
INFLAMMATORY BOWEL DISEASE AGENTS		
AMINOSALICYLATES		
<i>balsalazide disodium</i>	1	
DIPENTUM	3	ST
<i>mesalamine</i>	1, 3	ST
GLUCOCORTICOIDS		
<i>hydrocortisone acetate (rectal)</i>	1	
ORTIKOS	3	PA
SULFONAMIDES		
<i>sulfasalazine</i>	1	
JANUS KINASE (JAK) INHIBITORS		
DISEASE-MODIFYING ANTIRHEUMATIC AGENTS		
RINVOQ	3	PA
METABOLIC BONE DISEASE AGENTS		
METABOLIC BONE DISEASE AGENTS		
FOSAMAX PLUS D	3	ST
MISCELLANEOUS THERAPEUTIC AGENTS		
<i>alendronate sodium</i>	1	
NO USP CLASS		
<i>alendronate sodium</i>	1, 3	ST
<i>calcitriol</i>	1	
RAYALDEE	3	ST
<i>risedronate sodium</i>	1, 3	ST
SENSIPAR	3	ST
TYMLOS	3	PA
MISCELLANEOUS THERAPEUTIC AGENTS		
CONTRACEPTIVES		
FEMCAP	3	ST
IMMUNE SUPPRESSANTS		
<i>everolimus (immunosuppressant)</i>	1, 3	QL, ST
MISCELLANEOUS THERAPEUTIC AGENTS		
ABRILADA (1 PEN)	3	PA
ACTEMRA	3	ST
ADALIMUMAB-AACF (2 PEN)	3	PA
ADALIMUMAB-ADAZ	3	PA
AEROCHAMBER PLUS FLO-VU LARGE	2	
<i>aminocaproic acid</i>	1	
AMJEVITA	2	
<i>aspirin</i>	1	
AUSTEDO	3	PA, QL
AUVI-Q	3	PA
AVONEX PEN	3	PA
BENLYSTA	3	PA
BERINERT	3	PA
<i>betaine</i>	1	ST

Kaiser Permanente, a State Employee Health Benefit Formulary

Category/Drug Name	Tier Level	Restrictions
BIMZELX	3	PA
BRONCHITOL	3	PA
BYLVAY	3	PA
CABLIVI	3	PA
<i>calcium acetate (phosphate binder)</i>	1	ST
CAYA	3	ST
CIBINQO	3	PA
CIMZIA	3	PA
<i>colchicine</i>	3	ST
CONSENSI	3	
CONTRACE	3	PA
COSENTYX	2, 3	PA
CUTAQUIG	3	PA
CUVITRU	3	PA
<i>cyclosporine modified (for microemulsion)</i>	1	
CYLTEZO (2 SYRINGE)	3	PA
<i>cyproheptadine hcl</i>	1	
DAYBUE	3	PA
<i>deferasirox</i>	1	
<i>deferiprone</i>	1, 3	PA, QL
<i>desmopressin acetate spray</i>	1	
<i>dimethyl fumarate</i>	1, 3	PA
<i>disulfiram</i>	1	
DOJOLVI	3	PA
DOPTELET	3	PA, QL
<i>droxidopa</i>	1	ST
<i>dutasteride</i>	1, 3	ST
<i>dutasteride-tamsulosin hcl</i>	1, 3	
EMFLAZA	3	PA
EMGALITY	3	PA
EMPAVELI	3	PA
ENBREL	2, 3	PA
ENDARI	3	PA
ENSPRYNG	3	PA
ENTYVIO	3	PA
ENVARUSUS XR	3	ST
EVOXAC	3	ST
EVRYSDI	3	PA
EXTAVIA	1	PA
FASENRA	3	PA
FC2 FEMALE CONDOM	3	ST
FILSPARI	3	PA
FIRDAPSE	3	PA
FOSAMAX PLUS D	3	
GALAFOLD	3	PA
GAMMAGARD	3	PA
GRASTEK	3	
GVOKE PFS	3	ST
HADLIMA	3	PA
HEMLIBRA	3	PA

Kaiser Permanente, a State Employee Health Benefit Formulary

Category/Drug Name	Tier Level	Restrictions
HULIO (2 PEN)	3	PA
HUMIRA (2 PEN)	3	PA
<i>hydroxyzine hcl</i>	1	ST
<i>ibandronate sodium</i>	1, 3	ST
<i>icatibant acetate</i>	1	PA
ILARIS	3	PA
ILUMYA	3	PA
IMCIVREE	3	PA
INGREZZA	3	PA
IODINE STRONG	2	
ISTURISA	3	PA
KALYDECO	3	PA
KERENDIA	3	PA, QL
KETO-DIASTIX	3	ST
KETOSTIX	3	ST
KEVEYIS	3	PA
KEVZARA	3	PA
KINERET	3	ST
<i>lanthanum carbonate</i>	1, 3	ST
<i>leucovorin calcium</i>	1	
<i>levocarnitine (metabolic modifiers)</i>	1, 3	ST
<i>lidocaine hcl (local anesth.)</i>	1, 3	ST
LIQREV	3	PA
LIVMARLI	3	PA, QL
LODOCO	3	PA
LUCEMYRA	3	ST
LUMRYZ	3	PA
LUPKYNIS	3	PA
MAVENCLAD (10 TABS)	3	PA
MAYZENT	3	PA
MESTINON	3	ST
<i>metirosine</i>	1, 3	PA
<i>midodrine hcl</i>	1	
MIRCERA	3	
<i>mitomycin</i>	1	
MOTOFEN	3	ST
MULPLETA	3	PA, QL
MYALEPT	3	PA
MYCAPSSA	3	PA
<i>mycophenolate mofetil</i>	1	
<i>naloxone hcl</i>	1, 3	ST
<i>nicotine polacrilex</i>	1	
<i>nitisinone</i>	1, 3	PA
NEFFY	3	PA
NIVESTYM	2	
NOCDURNA	3	ST
NULOJIX	3	
OLPRUVA (2 GM DOSE)	3	
OPFOLDA	3	PA
OPTIONS GYNOL II CONTRACEPTIVE	3	ST

Kaiser Permanente, a State Employee Health Benefit Formulary

Category/Drug Name	Tier Level	Restrictions
ORENCIA CLICKJECT	3	ST
ORLISSA	3	PA
ORLADEYO	3	PA
OTEZLA	2	PA
OTREXUP	3	ST
OXBRYTA	3	PA, QL
PALFORZIA (12 MG DAILY DOSE)	3	PA
PHEXXI	3	ST
PLAQUENIL	3	ST
PLEGRIDY	3	PA
<i>plerixafor</i>	1	
<i>potassium bicarbonate</i>	1	ST
PROCYSBI	3	PA
QBREXZA	3	PA, QL
RADICAVA ORS STARTER KIT	3	PA
RAGWITEK	3	
RECORLEV	3	ST
REZUROCK	3	PA, QL
<i>risedronate sodium</i>	1	
RIVFLOZA	3	PA
SAXENDA	3	PA, QL
SIGNIFOR LAR	3	PA
SILIQ	3	PA
SIMPONI	3	PA
sodium chloride	1	
SODIUM FLUORIDE	3	
SOHONOS	3	PA
SOMAVERT	3	PA
SYMDEKO	3	PA
SYNERA	3	ST
TAKHZYRO	3	PA
TARPEYO	3	PA, QL
TAVALISSE	3	PA
TAVNEOS	3	PA, QL
TEGSEDI	3	PA
TEPMETKO	3	PA
THALOMID	2	QL
<i>tiopronin</i>	1, 3	ST
TREMFYA	3	PA
TRIENTINE HCL	3	PA
TRIKAFTA	3	PA
UDENYCA	3	
ULORIC	3	ST
UROXATRAL	3	ST
VAFSEO	3	PA
VEOZAH	3	PA
VIJOICE	3	PA
VISTOGARD	3	ST
VOWST	3	PA
VOXZOGO	3	PA

Kaiser Permanente, a State Employee Health Benefit Formulary

Category/Drug Name	Tier Level	Restrictions
VUMERITY	3	PA
VYVGART HYTRULO	3	PA
WEGOVY	3	PA, QL
WIDE-SEAL DIAPHRAGM 60	3	ST
WINREVAIR	3	PA
XELJANZ	3	QL, ST
XERMELO	3	PA
XOLREMDI	3	PA
XPHOZAH	3	PA
XURIDEN	3	ST
YUFLYMA (1 PEN)	3	PA
YUSIMRY	3	PA
ZEGALOGUE	3	ST
ZEPBOUND	3	PA
ZEPOSIA STARTER KIT	3	PA
ZILBRYSQ	3	PA
NONSTEROIDAL ANTI-INFLAMMATORY DRUGS		
<i>ibuprofen</i>	1	
OPHTHALMIC AGENTS		
NO USP CLASS (COMBINATION PRODUCT)		
<i>bacitracin-poly-neomycin-hc</i>	1	
<i>bacitracin-polymyxin b (ophth)</i>	1	
BLEPHAMIDE	1, 2	
<i>neomycin-bacitracin zn-polymyxin</i>	1	
<i>neomycin-polymy-dexameth</i>	1	
NEOMYCIN-POLYMYXIN-GRAMICIDIN	1	
NEOMYCIN-POLYMYXIN-HC	1	
<i>polymyxin b-trimethoprim</i>	1	
PRED-G	2	
<i>tobramycin-dexamethasone</i>	1	ST
OPHTHALMIC AGENTS, OTHER		
ATROPINE SULFATE	1	
<i>brimonidine tartrate</i>	1, 3	ST
BROMSITE	3	ST
<i>cyclopentolate hcl</i>	1	
<i>cyclosporine (ophth)</i>	1, 3	QL, ST
<i>moxifloxacin hcl (ophth)</i>	1	
OXERVATE	3	PA
<i>phenylephrine hcl (mydriatic)</i>	1	
<i>proparacaine hcl</i>	1	
XIIDRA	3	QL, ST
OPHTHALMIC ANTI-ALLERGY AGENTS		
<i>olopatadine hcl</i>	1	ST
ZERViate	3	ST
OPHTHALMIC ANTI-INFECTIVES		
AZASITE	3	ST
CILOXAN	3	ST
XDEMYVY	3	PA
OPHTHALMIC ANTI-INFLAMMATORIES		
DEXAMETHASONE SODIUM PHOSPHATE	1	

Kaiser Permanente, a State Employee Health Benefit Formulary

Category/Drug Name	Tier Level	Restrictions
<i>diclofenac sodium (ophth)</i>	1	
<i>fluorometholone (ophth)</i>	1, 3	ST
<i>ketorolac tromethamine (ophth)</i>	1, 3	ST
<i>loteprednol etabonate</i>	1, 3	ST
MAXIDEX	2	
PRED MILD	1, 2	
OPHTHALMIC ANTIGLAUCOMA AGENTS		
<i>betaxolol hcl (ophth)</i>	1, 3	ST
<i>brimonidine tartrate</i>	1	ST
<i>dorzolamide hcl</i>	1	
<i>dorzolamide hcl-timolol maleate</i>	1	
IOPIDINE	3	ST
IYUZEH	3	
<i>levobunolol hcl</i>	1	
PHOSPHOLINE IODIDE	2	
<i>pilocarpine hcl</i>	1	
RHOPRESSA	3	PA
<i>timolol maleate (ophth)</i>	1	
VYZULTA	3	PA
OPHTHALMIC PROSTAGLANDIN AND PROSTAMIDE ANALOGS		
<i>latanoprost</i>	1	
ROCKLATAN	3	PA
VYZULTA	3	PA
OTIC AGENTS		
NO USP CLASS (COMBINATION PRODUCT)		
CORTISPORIN-TC	3	ST
<i>neomycin-polymyxin-hc (otic)</i>	1	
<i>ofloxacin (otic)</i>	1	
OTIC AGENTS		
CIPROFLOXACIN HCL	3	ST
RESPIRATORY TRACT AGENTS		
ANTI-INFLAMMATORIES, INHALED CORTICOSTEROIDS		
ASMANEX HFA	2	
BREZTRI AEROSPHERE	3	ST
<i>budesonide (inhalation)</i>	1, 3	ST
<i>budesonide-formoterol fumarate dihydrate</i>	1, 3	ST
DULERA	3	ST
FLOVENT HFA	2, 3	QL
QVAR REDIHALER	3	QL, ST
ANTI-INFLAMMATORY AGENTS		
<i>cromolyn sodium (mastocytosis)</i>	1, 3	
<i>montelukast sodium</i>	1, 3	
<i>zafirlukast</i>	1, 3	ST
<i>zileuton</i>	1, 3	ST
ANTICHOLINERGIC AGENTS		
DUAKLIR PRESSAIR	3	ST
SPIRIVA HANDIHALER	3	ST
ANTIHISTAMINES		
<i>cyproheptadine hcl</i>	1	
ANTILEUKOTRIENES		

Kaiser Permanente, a State Employee Health Benefit Formulary

Category/Drug Name	Tier Level	Restrictions
<i>montelukast sodium</i>	1	
BRONCHODILATORS, ANTICHOLINERGIC		
ATROVENT HFA	3	QL, ST
BREO ELLIPTA	3	ST
<i>ipratropium bromide</i>	1	
<i>ipratropium bromide (nasal)</i>	1	
SPIRIVA RESPIMAT	2	
STIOLTO RESPIMAT	2	
YUPELRI	3	ST
BRONCHODILATORS, SYMPATHOMIMETIC		
<i>albuterol sulfate</i>	1	
<i>arformoterol tartrate</i>	1	ST
EPINEPHRINE	1	
<i>formoterol fumarate</i>	1, 3	ST
SEREVENT DISKUS	3	ST
STRIVERDI RESPIMAT	2	
<i>terbutaline sulfate</i>	1	
CYSTIC FIBROSIS		
ORKAMBI	3	PA
MAST CELL STABILIZERS		
<i>cromolyn sodium</i>	1	
MISCELLANEOUS THERAPEUTIC AGENTS		
OFEV	3	QL
<i>tiotropium bromide monohydrate</i>	1	ST
NO USP CLASS		
ESBRIET	3	ST
ORKAMBI	3	PA
PULMOZYME	2	
NO USP CLASS (COMBINATION PRODUCT)		
AIRDUO DIGIHALER	3	ST
<i>guaifenesin-codeine</i>	1	
<i>ipratropium-albuterol</i>	1, 2, 3	ST
PROMETHAZINE VC/CODEINE	1	ST
<i>promethazine w/codeine</i>	1	ST
PULMONARY ANTIHYPERTENSIVES		
<i>bosentan</i>	1, 3	
LETAIRIS	3	
REMODULIN	3	ST
<i>tadalafil (pulmonary hypertension)</i>	1	
UPTRAVI	3	ST
RESPIRATORY AGENTS, MISCELLANEOUS		
ALVESCO	2	
ARMONAIR DIGIHALER	3	QL, ST
ARNUITY ELLIPTA	3	QL, ST
ASMANEX (120 METERED DOSES)	3	QL
BEVESPI AEROSPHERE	3	QL, ST
BREO ELLIPTA	3	ST
<i>budesonide-formoterol fumarate dihydrate</i>	3	
FLOVENT DISKUS	3	QL, ST
FLOVENT HFA	3	QL, ST

Kaiser Permanente, a State Employee Health Benefit Formulary

Category/Drug Name	Tier Level	Restrictions
KALYDECO	3	PA
LONHALA MAGNAIR REFILL KIT	3	ST
<i>pirfenidone</i>	1, 3	ST
PULMICORT FLEXHALER	3	QL, ST
<i>roflumilast</i>	1, 3	ST
TRIKAFTA	3	PA
TUDORZA PRESSAIR	3	QL, ST
XOLAIR	3	PA
RESPIRATORY TRACT AGENTS, OTHER		
<i>acetylcysteine</i>	1	
ANORO ELLIPTA	3	QL, ST
<i>benzonatate</i>	1	
FLUTICASONE FUROATE-VILANTEROL	3	ST
INCRUSE ELLIPTA	3	QL, ST
KALYDECO	3	PA
ORKAMBI	3	PA
SPIRIVA RESPIMAT	3	QL, ST
TEZSPIRE	3	PA
<i>theophylline</i>	1	
TUDORZA PRESSAIR	3	QL, ST
UPTRAVI	3	
SKELETAL MUSCLE RELAXANTS		
NO USP CLASS		
<i>chlorzoxazone</i>	1	ST
<i>cyclobenzaprine hcl</i>	1	
FLEQSUVY	3	ST
<i>methocarbamol</i>	1	
NORGESIC FORTE	1	ST
SKELETAL MUSCLE RELAXANTS		
AMRIX	3	ST
SKIN AND MUCOUS MEMBRANE AGENTS		
ANTI-INFECTIVES (SKIN AND MUCOUS MEMBRANE)		
<i>acyclovir topical</i>	1, 3	QL, ST
ALTABAX	3	ST
<i>ciclopirox</i>	1, 3	
<i>ciclopirox olamine</i>	1	
CLINDACIN PAC	3	
<i>clindamycin phosphate (topical)</i>	1, 3	ST
<i>clindamycin phosphate vaginal</i>	1, 3	ST
<i>clindamycin phosphate-benzoyl peroxide</i>	1, 3	PA, ST
<i>clindamycin phosphate-benzoyl peroxide (refrigerate)</i>	1	
<i>clotrimazole (topical)</i>	1	
<i>clotrimazole w/ betamethasone</i>	1	ST
<i>econazole nitrate</i>	1	
ERTACZO	3	ST
<i>erythromycin (acne aid)</i>	1, 3	
<i>gentamicin sulfate (topical)</i>	1	
<i>ivermectin (rosacea)</i>	1, 3	PA, QL
JUBLIA	3	PA, QL
<i>ketoconazole (topical)</i>	1	ST

Kaiser Permanente, a State Employee Health Benefit Formulary

Category/Drug Name	Tier Level	Restrictions
KETODAN	3	
<i>malathion</i>	1	
MENTAX	3	ST
<i>metronidazole (topical)</i>	1, 3	ST
<i>metronidazole vaginal</i>	1	ST
MICONAZOLE 3	1	ST
<i>mupirocin calcium (topical)</i>	1	ST
<i>naftifine hcl</i>	1, 3	ST
ORAVIG	3	
<i>oxiconazole nitrate</i>	1, 3	ST
<i>penciclovir</i>	1, 3	ST
SULCONAZOLE NITRATE	3	ST
<i>sulfacetamide sodium (acne)</i>	1	
SULFAMYLON	3	ST
<i>tavaborole</i>	1, 3	PA
<i>terconazole vaginal</i>	1	ST
XERESE	3	ST
ANTI-INFLAMMATORY AGENTS		
ADBRY	3	PA
<i>calcipotriene-betamethasone dipropionate</i>	1, 3	ST
<i>clobetasol propionate</i>	1	
<i>diclofenac sodium (topical)</i>	1, 3	ST
<i>fluocinolone acetonide</i>	1	
<i>fluocinonide</i>	1	
<i>pimecrolimus</i>	1	
ULTRAVATE	3	
ANTI-INFLAMMATORY AGENTS (SKIN AND MUCOUS MEMBRANE)		
<i>amcinonide</i>	1	ST
<i>betamethasone dipropionate (topical)</i>	1	
<i>betamethasone dipropionate augmented</i>	1, 3	
<i>betamethasone valerate</i>	1	
<i>calcipotriene-betamethasone dipropionate</i>	1, 3	PA, ST
<i>clobetasol propionate</i>	1, 3	ST
CLODERM	3	ST
CORTIFOAM	3	
<i>desonide</i>	1	
<i>desoximetasone</i>	1, 3	ST
<i>diflorasone diacetate</i>	1	ST
<i>fluocinolone acetonide</i>	1, 3	ST
<i>fluocinonide</i>	1	
<i>fluticasone propionate</i>	1, 3	ST
<i>halobetasol propionate</i>	1	
HALOG	3	ST
<i>hydrocortisone (rectal)</i>	1	
<i>hydrocortisone (topical)</i>	1	
<i>hydrocortisone butyrate hydrophilic lipo base</i>	1	
<i>hydrocortisone valerate</i>	1	
LOCOID	3	ST
LULICONAZOLE	3	
<i>mometasone furoate</i>	1	

Kaiser Permanente, a State Employee Health Benefit Formulary

Category/Drug Name	Tier Level	Restrictions
NEO-SYNALAR	1	ST
<i>nystatin-triamcinolone</i>	1	
PANDEL	3	ST
PREDNICARBATE	1	ST
SYNALAR (CREAM)	3	ST
<i>triamcinolone acetonide (topical)</i>	1	
ANTIPRURITICS AND LOCAL ANESTHETICS		
<i>doxepin hcl (antipruritic)</i>	1, 3	ST
HYDROCORTISONE ACE-PRAMOXINE	3	ST
<i>lidocaine</i>	1, 3	ST
<i>lidocaine hcl</i>	1	QL
<i>lidocaine-prilocaine</i>	1	
ANTIPSORIATICS AGENTS		
ZORYVE	3	PA
CELL STIMULANTS AND PROLIFERANTS		
TRETIN-X	1	
<i>tretinoin microsphere</i>	1, 3	ST, AGE
KERATOLYTIC AGENTS		
<i>podofilox</i>	1	ST
<i>urea</i>	1	
SKIN AND MUCOUS MEMBRANE AGENTS, MISCELLANEOUS		
<i>acitretin</i>	1, 3	ST
<i>adapalene</i>	1, 3	ST
<i>adapalene-benzoyl peroxide</i>	1, 3	ST
ARAZLO	3	ST
AZELEX	3	QL, ST
<i>brimonidine tartrate (topical)</i>	1, 3	PA, QL
CABTREO	3	ST
<i>calcipotriene</i>	1, 3	ST
CARAC	1, 3	ST
<i>clindamycin phosphate-benzoyl peroxide (refrigerate)</i>	1	
<i>clindamycin phosphate-tretinoin</i>	1, 3	ST
<i>dapsone (topical)</i>	1, 3	ST
DICLOFENAC EPOLAMINE	1, 3	ST
<i>diclofenac sodium (actinic keratoses)</i>	1	
<i>diclofenac sodium (topical)</i>	1, 3	ST
DUOBRII	3	ST
FINACEA	3	ST
HYFTOR	3	PA
<i>imiquimod</i>	1, 3	ST
<i>isotretinoin</i>	1	
KLISYRI	3	ST
<i>lactic acid (ammonium lactate)</i>	1	
NORITATE	3	ST
OPZELURA	3	PA
ORACEA	1	ST
RECTIV	3	ST
SKYRIZI	3	PA
SOTYKTU	3	PA
STELARA	3	PA, QL

Kaiser Permanente, a State Employee Health Benefit Formulary

Category/Drug Name	Tier Level	Restrictions
<i>sulfacetamide sodium w/ sulfur</i>	1, 3	ST
SULFACETAMIDE-SULFUR IN UREA	3	ST
<i>tacrolimus (topical)</i>	1	
TALTZ	3	PA
<i>tazarotene</i>	1, 3	ST
<i>tretinoin</i>	1	AGE
<i>tretinoin microsphere</i>	1, 3	ST
VALCHLOR	3	QL
VTAMA	3	PA
ZORYVE	3	PA
SLEEP DISORDER AGENTS		
GABA RECEPTOR MODULATORS		
<i>zaleplon</i>	1	QL
<i>zolpidem tartrate</i>	1	QL
SLEEP DISORDERS, OTHER		
NUVIGIL	3	QL, ST
<i>temazepam</i>	1	QL
XYREM	3	PA, QL
SLEEP PROMOTING AGENTS		
<i>temazepam</i>	1	QL, ST
SMOOTH MUSCLE RELAXANTS		
RESPIRATORY AGENTS, MISCELLANEOUS		
<i>theophylline</i>	1	
SMOOTH MUSCLE RELAXANTS		
<i>darifenacin hydrobromide</i>	1	
<i>fesoterodine fumarate</i>	1, 3	ST
<i>flavoxate hcl</i>	1	ST
GELNIQUE	3	
GEMTESA	3	ST
MYRBETRIQ	3	ST
OXYTROL FOR WOMEN	3	ST
<i>solifenacin succinate</i>	1, 3	ST
<i>theophylline</i>	1	ST
<i>tolterodine tartrate</i>	1, 3	ST
<i>tropium chloride</i>	1	ST
THERAPEUTIC NUTRIENTS/ MINERALS/ ELECTROLYTES		
ELECTROLYTE/MINERAL MODIFIERS		
CHEMET	3	ST
<i>tolvaptan</i>	1, 3	PA, ST
<i>trientine hcl</i>	1, 3	PA
ELECTROLYTE/MINERAL REPLACEMENT		
CARBAGLU	3	ST
GEL-KAM	2	
K-PHOS	2	
<i>ped multivitamins w/fl & iron</i>	1	
<i>pediatric multivitamins w/fl</i>	1	
<i>pot & sod citrates w/citric ac</i>	1	
<i>pot phosphate monobasic w/ sod phosphate dibasic & monobasic</i>	1	
<i>potassium chloride</i>	1, 3	ST
<i>potassium chloride microencapsulated crystals er</i>	1	

Kaiser Permanente, a State Employee Health Benefit Formulary

Category/Drug Name	Tier Level	Restrictions
<i>potassium citrate (alkalinizer)</i>	1	
<i>sodium fluoride</i>	1	
TRI-VITE/FLUORIDE	1	
ELECTROLYTE/MINERAL/METAL MODIFIERS		
<i>deferasirox</i>	1	
<i>sodium polystyrene sulfonate</i>	1	ST
NO USP CLASS		
<i>ergocalciferol</i>	1	
<i>phytonadione</i>	1	
VITAMINS		
VITAMINS		
<i>doxercalciferol</i>	1	ST
<i>ergocalciferol</i>	1	
<i>folic acid</i>	1	
MULTIVITAMIN/FLUORIDE	1	
<i>niacin</i>	1	
NIACIN (ANTIHYPERLIPIDEMIC)	1	
<i>paricalcitol</i>	1, 3	ST
TRI-VITE/FLUORIDE	1	
TRINATAL RX 1	3	
WESTAB MAX	3	

Kaiser Permanente, a State Employee Health Benefit Formulary

Index of Drugs

A

<i>abacavir sulfate</i>	6, 17
<i>abacavir sulfate-lamivudine</i>	6, 17
<i>abacavir sulfate-lamivudine-zidovudine</i>	17
ABILIFY MYCITE MAINTENANCE KIT	16
<i>abiraterone acetate</i>	15, 40
ABRILADA (1 PEN)	44
ABSORICA	32
ABSORICA LD	32
<i>acamprosate calcium</i>	30
<i>acarbose</i>	20
ACCUPRIL	22
<i>acebutolol hcl</i>	23, 25
<i>acetaminophen w/ codeine</i>	4, 27
<i>acetazolamide</i>	23, 34
<i>acetic acid (otic)</i>	35
<i>acetylcysteine</i>	51
ACIPHEX SPRINKLE	36
<i>acitretin</i>	53
ACTEMRA	44
ACTHAR	39
ACTIMMUNE	43
ACTIQ	27
ACTIVEVELLA	39
<i>acyclovir</i>	18, 51
<i>acyclovir topical</i>	51
ADALIMUMAB-AACF (2 PEN)	44
ADALIMUMAB-ADAZ	44
<i>adapalene</i>	53
<i>adapalene-benzoyl peroxide</i>	53
ADBRY	52
ADCIRCA	27
<i>adefovir dipivoxil</i>	18
ADEMPAS	24
ADLARITY	9
ADMELOG	21
ADZENYS ER	30
AEROCHAMBER PLUS FLO-VU LARGE	44
AEROCHAMBER PLUS FLO-VU SMALL	33
AFREZZA	20
AIMOVIG	28
AIRDUO DIGIHALER	50
AJOVY	29
AKEEGA	13
AKLIEF	32
AKYNZEO	10
ALA SCALP	32
<i>albendazole</i>	16
<i>albuterol sulfate</i>	19, 50
<i>alclometasone dipropionate</i>	38
ALDACTAZIDE	24
ALECENSA	15
<i>alendronate sodium</i>	44
<i>alfuzosin hcl</i>	19
ALINIA	6
<i>allopurinol</i>	11
<i>almotriptan malate</i>	29
ALOCRIL	35
ALOGLIPTIN BENZOATE	20
ALOGLIPTIN-METFORMIN HCL	20
ALOGLIPTIN-PIOGLITAZONE	20
ALOMIDE	35
<i>alosetron hcl</i>	36
ALPHAGAN P	35
<i>alprazolam</i>	18, 19, 29
ALTABAX	51
ALTRENO	32
ALUNBRIG	14
ALVAIZ	20
ALVESCO	50
<i>amantadine hcl</i>	16, 29
<i>ambrisentan</i>	27
<i>amcinonide</i>	52
AMICAR	20
<i>amikacin sulfate</i>	5
<i>amiloride hcl</i>	34
AMILORIDE-HYDROCHLOROTHIAZIDE	24
<i>aminocaproic acid</i>	22, 44
<i>amiodarone hcl</i>	22, 26
<i>amitriptyline hcl</i>	10
AMJEVITA	44
<i>amlodipine besylate</i>	23, 25
<i>amlodipine besylate-atorvastatin calcium</i>	23
<i>amlodipine besylate-benazepril hcl</i>	25
<i>amlodipine besylate-valsartan</i>	25
<i>amlodipine-valsartan-hydrochlorothiazide</i>	23, 25
<i>amoxapine</i>	31
<i>amoxicillin</i>	1, 5, 8
<i>amoxicillin & pot clavulanate</i>	5, 8
<i>amphetamine sulfate</i>	28
<i>amphetamine-dextroamphetamine</i>	28, 30
AMPHOTERICIN B	6
<i>ampicillin</i>	8
AMRIX	51
<i>anagrelide hcl</i>	22
<i>anastrozole</i>	12
ANDRODERM	39
ANGELIQ	42
ANNOVERA	41
ANORO ELLIPTA	51
ANTARA	24

Kaiser Permanente, a State Employee Health Benefit Formulary

ANZEMET.....	10	<i>azelaic acid</i>	32
APADAZ.....	4	<i>azelastine hcl</i>	35
APAP-CAFF-DIHYDROCODEINE.....	4	<i>azelastine hcl (ophth)</i>	35
APEXICON E.....	32	<i>azelastine hcl-fluticasone propionate</i>	35
APIDRA.....	42	AZELEX.....	53
APLENZIN.....	31	<i>azithromycin</i>	5, 8
APOKYN.....	16	AZOR.....	22
<i>apomorphine hydrochloride</i>	16		
APRACLONIDINE HCL.....	35	B	
<i>aprepitant</i>	37	BACITRACIN.....	7
APTIOM.....	9	<i>bacitracin-polymyxin b (ophth)</i>	48
APTIVUS.....	6, 18	<i>bacitracin-poly-neomycin-hc</i>	48
ARANESP (ALBUMIN FREE).....	22	<i>baclofen</i>	17
ARAZLO.....	53	BACLOFEN.....	17
ARCALYST.....	43	BAFIERTAM.....	30
<i>arformoterol tartrate</i>	50	BALCOLTRA.....	41
ARIKAYCE.....	5	<i>balsalazide disodium</i>	44
ARIMIDEX.....	15	BALVERSA.....	14
<i>aripiprazole</i>	16, 31	BAQSIMI ONE PACK.....	21
ARISTOSPAN INTRALESIONAL.....	41	BARACLUDGE.....	18
<i>armodafinil</i>	30	BASAGLAR KWIKPEN.....	42
ARMONAIR DIGIHALER.....	50	BASAGLAR TEMPO PEN.....	21
ARNUITY ELLIPTA.....	50	BAXDELA.....	8
ARTHROTEC.....	30	BD INSULIN SYRINGE.....	33
<i>asenapine maleate</i>	19, 31	BD INSULIN SYRINGE U-500.....	33
ASMANEX (120 METERED DOSES).....	50	BD PEN NEEDLE MINI U/F.....	33
ASMANEX HFA.....	49	BD PEN NEEDLE NANO U/F.....	33
<i>aspirin</i>	4, 19, 22, 44	BD VEO INSULIN SYRINGE U/F.....	21
<i>aspirin-dipyridamole</i>	22	BECONASE AQ.....	35
ASPRUZYO SPRINKLE.....	23	BELBUCA.....	27
ATACAND HCT.....	22	BELSOMRA.....	29
<i>atazanavir sulfate</i>	7, 17, 18	<i>benazepril & hydrochlorothiazide</i>	26
<i>atenolol</i>	23	<i>benazepril hcl</i>	25, 26
<i>atenolol & chlorthalidone</i>	23	BENICAR.....	26
ATIVAN.....	19	BENICAR HCT.....	26
<i>atomoxetine hcl</i>	30	BENLYSTA.....	44
ATORVALIQ.....	24	BENZHYDROCODONE-ACETAMINOPHEN.....	4
<i>atorvastatin calcium</i>	23, 24, 25	BENZNIDAZOLE.....	6
<i>atovaquone</i>	6, 16	<i>benzonatate</i>	51
<i>atovaquone-proguanil hcl</i>	6	BENZOYL PEROXIDE.....	32, 33
ATRIPLA.....	18	BENZOYL PEROXIDE FORTE- HC.....	33
ATROPINE SULFATE.....	48	<i>benzoyl peroxide-erythromycin</i>	32
ATROVENT HFA.....	50	<i>benztropine mesylate</i>	16, 29
AUGTYRO.....	13	<i>bepotastine besilate</i>	35
AURYXIA.....	34	BERINERT.....	44
AUSTEDO.....	44	BESIVANCE.....	34
AUVELITY.....	31	BESREMI.....	15
AUVI-Q.....	44	<i>betaine</i>	44
AVEED.....	41	<i>betamethasone dipropionate (topical)</i>	38, 52
AVONEX PEN.....	44	<i>betamethasone dipropionate augmented</i>	38, 52
AVONEX PREFILLED.....	30	<i>betamethasone valerate</i>	38, 52
AYVAKIT.....	14	BETASERON.....	30
AZASITE.....	48	<i>betaxolol hcl</i>	23, 49
<i>azathioprine</i>	43		

Kaiser Permanente, a State Employee Health Benefit Formulary

<i>betaxolol hcl (ophth)</i>	49	<i>BYDUREON BCISE</i>	20
<i>bethanechol chloride</i>	38	<i>BYLVAY</i>	45
BETHKIS.....	7	C	
BETIMOL	35	<i>cabergoline</i>	40
BEVESPI AEROSPHERE	50	CABLIVI	45
<i>bexarotene</i>	13, 14	CABOMETRYX.....	15
<i>bexarotene (topical)</i>	14	CABTREO	53
<i>bicalutamide</i>	12	CADUET	25
BICILLIN C-R 900/300	5	CAFERGOT	11
BIJUVA.....	39, 42	<i>calcipotriene</i>	52, 53
BIKTARVY	7, 17	<i>calcipotriene-betamethasone dipropionate</i>	52
BILTRICIDE.....	5	<i>calcitonin (salmon)</i>	43
<i>bimatoprost</i>	35	<i>calcitriol</i>	44
BIMZELX.....	45	<i>calcium acetate (phosphate binder)</i>	38, 45
<i>bisoprolol & hydrochlorothiazide</i>	24	CALQUENCE.....	12
<i>bisoprolol fumarate</i>	23	CAMBIA	27
BLEPHAMIDE	48	CAMZYOS.....	26
<i>bosentan</i>	50	<i>candesartan cilexetil</i>	26
BOSULIF.....	13	<i>candesartan cilexetil-hydrochlorothiazide</i>	26
BRAFTOVI.....	14	<i>capecitabine</i>	15
BRENZAVVY.....	20	CAPLYTA	16, 31
BREO ELLIPTA.....	41, 50	CAPRELSA	15
BREXAFEMME.....	10	<i>captopril</i>	22
BREZTRI AEROSPHERE	49	CAPTOPRIL-HYDROCHLOROTHIAZIDE.....	26
BRILINTA.....	20	CARAC.....	53
<i>brimonidine tartrate</i>	35, 48, 49, 53	CARAFATE	37
<i>brimonidine tartrate (topical)</i>	53	CARBAGLU.....	54
<i>brimonidine tartrate-timolol maleate</i>	35	<i>carbamazepine</i>	9, 28
<i>brinzolamide</i>	35	<i>carbidopa</i>	16, 29
BRIVIACT.....	9	<i>carbidopa-levodopa</i>	16, 29
<i>bromfenac sodium (ophth)</i>	35	<i>carbidopa-levodopa-entacapone</i>	16
<i>bromocriptine mesylate</i>	16, 29	<i>carbinoxamine maleate</i>	11
BROMSITE	48	CARDIZEM CD.....	22
BRONCHITOL.....	45	CARDURA	22, 38
BROVANA	19	CARDURA XL	38
BRUKINSA.....	12	<i>carisoprodol</i>	19
<i>budesonide</i>	35, 41, 49, 50	CARISOPRODOL-ASPIRIN-CODEINE	19
<i>budesonide (inhalation)</i>	49	CARTEOLOL HCL.....	35
<i>budesonide (nasal)</i>	35	<i>carvedilol</i>	23
<i>budesonide-formoterol fumarate dihydrate</i>	49, 50	CASODEX	13
<i>bumetanide</i>	23, 34	CATAPRES-TTS-1.....	22
<i>buprenorphine</i>	4, 5, 31	CAYA.....	45
<i>buprenorphine hcl</i>	5, 31	CAYSTON	7
<i>buprenorphine hcl-naloxone hcl dihydrate</i>	5, 31	CEFACLOR.....	5, 7, 8
<i>bupropion hcl</i>	10, 31	CEFACLOR ER	5
<i>bupropion hcl (smoking deterrent)</i>	31	<i>cefadroxil</i>	5
<i>buspirone hcl</i>	18, 29	<i>cefazolin sodium</i>	5
<i>butalbital-acetaminophen</i>	4, 27, 30	<i>cefdinir</i>	5, 8
<i>butalbital-acetaminophen-caffeine</i>	4, 27	<i>cefixime</i>	5
<i>butalbital-acetaminophen-caffeine w/ codeine</i>	4	<i>cefepodoxime proxetil</i>	5, 8
<i>butalbital-aspirin-caffeine</i>	4	<i>cefprozil</i>	5, 8
<i>butalbital-aspirin-caffeine w/cod</i>	4	<i>ceftazidime</i>	5
<i>butorphanol tartrate</i>	4		
BUTRANS.....	27		

Kaiser Permanente, a State Employee Health Benefit Formulary

<i>cefuroxime axetil</i>	5, 8	<i>clobazam</i>	28
CELEBREX.....	27	<i>clobetasol propionate</i>	32, 38, 52
<i>celecoxib</i>	4	<i>clobetasol propionate emollient base</i>	32
<i>cephalexin</i>	5, 8	CLODERM.....	52
CERDELGA.....	34	<i>clomipramine hcl</i>	10
<i>cetorelix acetate</i>	39	<i>clonazepam</i>	9, 28, 29
<i>cevimeline hcl</i>	19	<i>clonidine</i>	22, 26
CHEMET	54	<i>clonidine hcl</i>	22, 26
CHENODAL.....	37	<i>clonidine hcl (adhd)</i>	26
<i>chlordiazepoxide hcl</i>	18, 36	<i>clopidogrel bisulfate</i>	20, 22
<i>chlordiazepoxide hcl-clidinium bromide</i>	36	<i>clorazepate dipotassium</i>	18
CHLORDIAZEPOXIDE-AMITRIPTYLINE	31	<i>clotrimazole</i>	10, 51
<i>chlorhexidine gluconate (mouth-throat)</i>	32	<i>clotrimazole (topical)</i>	51
<i>chloroquine phosphate</i>	6	<i>clotrimazole w/ betamethasone</i>	51
<i>chlorpromazine hcl</i>	10, 31	<i>clozapine</i>	17, 31
<i>chlorthalidone</i>	23, 24	COAL TAR.....	32
<i>chlorzoxazone</i>	19, 51	COARTEM.....	6
CHOLBAM	36	CODEINE SULFATE.....	27
<i>cholestyramine</i>	24, 25	<i>colchicine</i>	11, 34, 45
<i>cholestyramine light</i>	24	COLCHICINE	11
<i>choline fenofibrate</i>	25	<i>colchicine w/ probenecid</i>	34
<i>chorionic gonadotropin</i>	43	<i>colestipol hcl</i>	24, 25
CHORIONIC GONADOTROPIN.....	39	COMPLERA	18
CIBINQO.....	45	CONDYLOX	32
<i>ciclopirox</i>	51	CONSENSI.....	45
<i>ciclopirox olamine</i>	51	CONTOUR BLOOD GLUCOSE SYSTEM.....	21
<i>cidofovir</i>	7	CONTOUR TEST	21
<i>cilostazol</i>	22	CONTRAVE	45
CILOXAN	48	COPIKTRA	13
CIMDUO.....	17	CORDRAN	32
<i>cimetidine</i>	36, 37	COREG CR	23
<i>cimetidine hcl</i>	36	CORTIFOAM.....	52
CIMZIA	45	CORTISONE ACETATE.....	41
<i>cinacalcet hcl</i>	40	CORTISPORIN-TC	49
CIPRO	5, 35	COSENTYX.....	45
CIPRO HC	35	COTELLIC	13
<i>ciprofloxacin hcl</i>	8	COXANTO.....	4
CIPROFLOXACIN HCL	5, 49	CREON	37
<i>ciprofloxacin hcl (ophth)</i>	8	CRESEMBA	6
<i>ciprofloxacin-dexamethasone</i>	35	CRINONE	43
<i>citalopram hydrobromide</i>	10, 31	CRIXIVAN.....	18
CLARINEX-D 12 HOUR.....	11	<i>cromolyn sodium</i>	49, 50
<i>clarithromycin</i>	5, 8	CROMOLYN SODIUM.....	35
CLEMASTINE FUMARATE.....	11	<i>cromolyn sodium (mastocytosis)</i>	49
CLIMARA PRO.....	42	CUTAQUIG.....	45
CLINDACIN PAC	51	CUVITRU.....	45
<i>clindamycin hcl</i>	5, 7	<i>cyclobenzaprine hcl</i>	19, 51
<i>clindamycin palmitate hydrochloride</i>	7	<i>cyclopentolate hcl</i>	48
<i>clindamycin phosphate (topical)</i>	32, 51	CYCLOPHOSPHAMIDE.....	15
<i>clindamycin phosphate vaginal</i>	51	CYCLOSET	42
<i>clindamycin phosphate-benzoyl peroxide</i>	51, 53	<i>cyclosporine</i>	43, 45, 48
<i>clindamycin phosphate-benzoyl peroxide (refrigerate)</i>	51, 53	<i>cyclosporine (ophth)</i>	48
<i>clindamycin phosphate-tretinoin</i>	53	<i>cyclosporine modified (for microemulsion)</i>	43, 45
CLINDESSE	33	CYLTEZO (2 SYRINGE)	45

Kaiser Permanente, a State Employee Health Benefit Formulary

<i>cyproheptadine hcl</i>	45, 49
CYSTADANE.....	34
CYSTAGON.....	34
CYSTARAN.....	35
CYTOMEL.....	40

D

<i>dabigatran etexilate mesylate</i>	22
DACOGEN.....	13
<i>dalfampridine</i>	30
<i>danazol</i>	39
<i>dantrolene sodium</i>	19
DAPAGLIFLOZIN PRO-METFORMIN ER.....	42
DAPAGLIFLOZIN PROPANEDIOL.....	42
<i>dapsone</i>	12, 32, 53
<i>dapsone (topical)</i>	32, 53
<i>darifenacin hydrobromide</i>	54
<i>darunavir</i>	7
DAURISMO.....	13
DAYBUE.....	45
DAYVIGO.....	32
<i>decitabine</i>	12
<i>deferasirox</i>	45, 55
<i>deferiprone</i>	45
DELSTRIGO.....	18
<i>demeclocycline hcl</i>	5
DEPAKOTE.....	9
DEPO-ESTRADIOL.....	39
DESCOVY.....	17
<i>desipramine hcl</i>	10
<i>desloratadine</i>	11
<i>desmopressin acetate</i>	39, 43, 45
DESMOPRESSIN ACETATE.....	42
<i>desmopressin acetate spray</i>	39, 45
<i>desmopressin acetate spray refrigerated</i>	39
<i>desogestrel & ethinyl estradiol</i>	39
<i>desogestrel-ethinyl estradiol (biphasic)</i>	41
<i>desonide</i>	38, 52
DESONIDE.....	32
<i>desoximetasone</i>	32, 52
DESVENLAFAXINE ER.....	31
<i>desvenlafaxine succinate</i>	10
DETROL.....	38
<i>dexamethasone</i>	30, 35, 38, 39, 48
DEXAMETHASONE.....	41, 48
<i>dexamethasone sodium phosphate</i>	39
DEXAMETHASONE SODIUM PHOSPHATE.....	48
DEXCHLORPHENIRAMINE MALEATE.....	11
<i>dexlansoprazole</i>	36
<i>dexmethylphenidate hcl</i>	28
<i>dextroamphetamine sulfate</i>	28, 30
DIACOMIT.....	9
DIASTAT ACUDIAL.....	18

DIASTIX.....	33, 46
<i>diazepam</i>	18, 28, 29
<i>diazepam (anticonvulsant)</i>	28
<i>diazoxide</i>	21
DIBENZYLINE.....	22
DICLOFENAC EPOLAMINE.....	53
<i>diclofenac potassium</i>	4, 27
<i>diclofenac sodium</i>	27, 49, 52, 53
<i>diclofenac sodium (actinic keratoses)</i>	53
<i>diclofenac sodium (ophth)</i>	49
<i>diclofenac sodium (topical)</i>	52, 53
<i>diclofenac w/ misoprostol</i>	27
<i>dicloxacillin sodium</i>	8
<i>dicyclomine hcl</i>	19, 36
DIFICID.....	7, 8
<i>diflorasone diacetate</i>	52
<i>diflunisal</i>	27
<i>difluprednate</i>	35
<i>digoxin</i>	23, 26
<i>dihydroergotamine mesylate</i>	11
<i>diltiazem hcl</i>	23, 25
<i>diltiazem hcl coated beads</i>	23, 25
<i>diltiazem hcl extended release beads</i>	25
<i>dimethyl fumarate</i>	45
DIPENTUM.....	44
DIPHENHYDRAMINE HCL.....	11
<i>diphenoxylate w/ atropine</i>	36
DIPROLENE.....	32
<i>dipyridamole</i>	22
<i>disopyramide phosphate</i>	22
<i>disulfiram</i>	45
DIURIL.....	34
<i>divalproex sodium</i>	9, 28
<i>dofetilide</i>	26
DOJOLVI.....	45
<i>donepezil hydrochloride</i>	9, 19
DOPTELET.....	45
DORAL.....	32
<i>dorzolamide hcl</i>	49
<i>dorzolamide hcl-timolol maleate</i>	49
DOVATO.....	7
<i>doxazosin mesylate</i>	25
<i>doxepin hcl</i>	10, 31, 53
<i>doxepin hcl (antipruritic)</i>	53
<i>doxercalciferol</i>	55
<i>doxycycline (monohydrate)</i>	5, 8
<i>doxycycline hyclate</i>	5, 8
<i>doxylamine-pyridoxine</i>	10
DRITHO-CREME HP.....	32
<i>dronabinol</i>	10
<i>drospirenone-ethinyl estradiol</i>	41
<i>drospirenone-ethinyl estradiol-levomefolate calcium</i>	41
DROXIA.....	15
<i>droxidopa</i>	45

Kaiser Permanente, a State Employee Health Benefit Formulary

DRYSOL.....	32	EPINEPHRINE.....	50
DSUVIA.....	4	<i>epinephrine (anaphylaxis)</i>	19
DUAKLIR PRESSAIR.....	49	<i>epiphenone</i>	26
DUAVEE.....	42	EPOGEN.....	20
DUETACT.....	42	EPRONTIA.....	30
DUEXIS.....	4	EPZICOM.....	17
DULERA.....	49	EQUETRO.....	28
<i>duloxetine hcl</i>	10, 31	<i>ergocalciferol</i>	55
DUOBRII.....	53	ERGOLOID MESYLATES.....	9
DUPIXENT.....	32, 43, 44	ERGOMAR.....	29
DURLAZA.....	20	<i>ergotamine w/ caffeine</i>	11
<i>dutasteride</i>	38, 45	ERGOTAMINE-CAFFEINE.....	30
<i>dutasteride-tamsulosin hcl</i>	38, 45	ERIVEDGE.....	13
DYRENIUM.....	34	ERLEADA.....	13
E			
EC-NAPROSYN.....	27	<i>erlotinib hcl</i>	12
<i>econazole nitrate</i>	51	ERTACZO.....	51
EDARBI.....	26	ERYTHROCIN STEARATE.....	5
EDARBYCLOR.....	26	<i>erythromycin (acne aid)</i>	8, 51
EDECIN.....	34	<i>erythromycin (ophth)</i>	8
EDURANT.....	17	<i>erythromycin base</i>	5
<i>efavirenz</i>	17	<i>erythromycin ethylsuccinate</i>	6
<i>efavirenz-emtricitabine-tenofovir disoproxil fumarate</i>	17	ESBRIET.....	50
EGRIFTA SV.....	43	<i>escitalopram oxalate</i>	10, 31
<i>eletriptan hydrobromide</i>	29	<i>estazolam</i>	29
ELIQUIS.....	20	<i>esterified estrogens & methyltestosterone</i>	39, 40
ELLA.....	40	ESTRACE.....	42
ELMIRON.....	38	<i>estradiol</i>	39, 40, 41, 42
ELYXYB.....	4	<i>estradiol & norethindrone acetate</i>	42
EMCYT.....	15	<i>estradiol vaginal</i>	39, 42
EMEND.....	10	<i>estradiol valerate</i>	39
EMFLAZA.....	38, 45	<i>eszopiclone</i>	29
EMGALITY.....	45	<i>ethambutol hcl</i>	12
EMPAVELI.....	45	<i>ethosuximide</i>	9
EMSAM.....	10	<i>ethynodiol diacet & eth estrad</i>	40, 41
<i>emtricitabine</i>	17	<i>etodolac</i>	27
<i>emtricitabine-tenofovir disoproxil fumarate</i>	17	<i>etonogestrel-ethinyl estradiol</i>	41
<i>enalapril maleate</i>	22, 26	ETOPOSIDE.....	15
<i>enalapril maleate & hydrochlorothiazide</i>	26	<i>etravirine</i>	7
ENBREL.....	43, 45	EUCRISA.....	32
ENDARI.....	45	<i>everolimus</i>	15, 44
<i>enoxaparin sodium</i>	20, 22	<i>everolimus (immunosuppressant)</i>	44
ENSPRYNG.....	45	EVISTA.....	43
<i>entacapone</i>	16, 29	EVOTAZ.....	17
<i>entecavir</i>	7	EVOXAC.....	45
ENTRESTO.....	24, 26	EVRYSDI.....	45
ENTYVIO.....	45	EXELON.....	9
ENVARUSUS XR.....	45	<i>exemestane</i>	12, 15
EPCLUSA.....	7	EXFORGE HCT.....	25
EPIDIOLEX.....	9	EXJADE.....	33
EPIFOAM.....	35	EXKIVITY.....	15
<i>epinastine hcl (ophth)</i>	35	EXTAVIA.....	45
		EYSUVIS.....	35
		<i>ezetimibe</i>	24, 25
		EZETIMIBE-ROSUVASTATIN.....	25

Kaiser Permanente, a State Employee Health Benefit Formulary

<i>ezetimibe-simvastatin</i>	25	<i>fluphenazine hcl</i>	16
F		FLUPHENAZINE HCL	31
<i>famciclovir</i>	7	FLURAZEPAM HCL	29
<i>famotidine</i>	27, 37	<i>flurbiprofen</i>	27
FANAPT	16	FLURBIPROFEN SODIUM	35
FARESTON	12	FLUTAMIDE	40
FARYDAK	12	FLUTICASONE FUROATE-VILANTEROL	51
FASENRA	45	<i>fluticasone propionate</i>	35, 52
FC2 FEMALE CONDOM	45	<i>fluticasone propionate (nasal)</i>	35
FELBATOL.....	28	<i>fluticasone-salmeterol</i>	19
<i>felodipine</i>	23	<i>fluvastatin sodium</i>	25
FEMARA	15	<i>fluvoxamine maleate</i>	31
FEMCAP	44	<i>folic acid</i>	55
FEMRING.....	42	<i>fondaparinux sodium</i>	20
<i>fenofibrate</i>	24, 25	<i>formoterol fumarate</i>	49, 50
<i>fenofibrate micronized</i>	25	FOSAMAX PLUS D.....	44, 45
FENOFIBRIC ACID	25	<i>fosamprenavir calcium</i>	17
<i>fenoprofen calcium</i>	27	<i>fosfomycin tromethamine</i>	7
<i>fentanyl</i>	4, 27	<i>fosinopril sodium</i>	26
<i>fesoterodine fumarate</i>	54	<i>fosinopril sodium & hydrochlorothiazide</i>	26
FETZIMA.....	31	FOSRENOL.....	38
FIASP	20, 21, 42	FOTIVDA	14
FIASP PENFILL	21	FRAGMIN	22
FIASP PUMPCART	20	FREESTYLE LITE TEST.....	33
FIBRICOR.....	24	<i>frovatriptan succinate</i>	29
FILSPARI.....	45	FRUZAQLA	13
FINACEA.....	53	FULPHILA.....	20
<i>finasteride</i>	38	<i>furosemide</i>	23, 34
<i> fingolimod hcl</i>	30	FUZEON	7
FINTEPLA.....	9	FYCOMPA.....	28
FIRDAPSE	45	G	
FLAREX	35	<i>gabapentin</i>	9, 28
<i>flavoxate hcl</i>	54	GALAFOLD	45
<i>flecainide acetate</i>	23	<i>galantamine hydrobromide</i>	9
FLEQSUVY.....	51	GAMMAGARD	44, 45
FLONASE SENSIMIST CHILDRENS.....	35	<i>gatifloxacin (ophth)</i>	8
FLO-PRED.....	41	GATTEX.....	20
FLOVENT DISKUS.....	50	GAVILYTE-C.....	36
FLOVENT HFA.....	49, 50	GAVRETO	14
<i>fluconazole</i>	6, 11	<i>gefitinib</i>	12
<i>flucytosine</i>	11	GEL-KAM.....	54
<i>fludrocortisone acetate</i>	39	GELNIQUE	54
<i>flunisolide (nasal)</i>	35	<i>gemfibrozil</i>	24
<i>fluocinolone acetonide</i>	35, 39, 52	GEMTESA	54
<i>fluocinolone acetonide (otic)</i>	35	GENOTROPIN.....	39
<i>fluocinonide</i>	39, 52	<i>gentamicin sulfate</i>	6, 7, 51
<i>fluocinonide emulsified base</i>	39	<i>gentamicin sulfate (ophth)</i>	7
<i>fluorometholone (ophth)</i>	49	<i>gentamicin sulfate (topical)</i>	51
<i>fluorouracil</i>	12, 32	GENVOYA	17
<i>fluorouracil (topical)</i>	32	GILOTRIF	14
<i>fluoxetine hcl</i>	10, 31	GIMOTI	36
FLUOXETINE HCL (PMDD).....	31	<i>glatiramer acetate</i>	30

Kaiser Permanente, a State Employee Health Benefit Formulary

GLEOSTINE	12
<i>glimepiride</i>	20, 21
<i>glipizide</i>	20, 42
<i>glipizide-metformin hcl</i>	20, 42
GLUCAGON EMERGENCY.....	21, 42
<i>glyburide</i>	42
GLYBURIDE MICRONIZED.....	42
<i>glyburide-metformin</i>	42
<i>glycopyrrolate</i>	19, 36
GLYNASE	20
GLYXAMBI.....	20
GRALISE.....	27, 30
<i>granisetron hcl</i>	37
GRANIX.....	20
GRASTEK.....	45
<i>griseofulvin microsize</i>	11
<i>griseofulvin ultramicrosize</i>	6, 11
<i>guaifenesin-codeine</i>	50
<i>guanfacine hcl</i>	22, 26, 30
<i>guanfacine hcl (adhd)</i>	30
GUANIDINE HCL.....	19
GVOKE HYOPEN 1-PACK.....	21
GVOKE PFS.....	20, 45
GYNAZOLE-1.....	33

H

HADLIMA	45
HALCION	32
<i>halobetasol propionate</i>	52
HALOG	52
<i>haloperidol</i>	16, 31
<i>haloperidol lactate</i>	31
HARVONI.....	7
HELIDAC THERAPY.....	37
HEMLIBRA.....	45
HIZENTRA.....	43
HOMATROPAIRE.....	36
HORIZANT.....	28
HULIO (2 PEN).....	46
HUMALOG.....	20, 33, 42
HUMALOG MIX 50/50.....	20, 42
HUMALOG MIX 50/50 KWIKPEN	42
HUMATIN.....	6
HUMIRA (2 PEN).....	46
HUMULIN 70/30.....	21, 42
HUMULIN 70/30 KWIKPEN	42
HUMULIN N.....	21
HUMULIN R U-500 (CONCENTRATED)	42
HYCAMTIN	14, 15
<i>hydralazine hcl</i>	24, 25, 26
<i>hydrochlorothiazide</i>	23, 24, 26, 27, 34
<i>hydrocodone bitartrate</i>	4, 27
HYDROCODONE BITARTRATE ER.....	27

<i>hydrocodone bitartrate-homatropine methylbromide</i>	27
<i>hydrocodone-acetaminophen</i>	4, 27
<i>hydrocodone-ibuprofen</i>	27
<i>hydrocortisone</i>	35, 39, 41, 44, 52
<i>hydrocortisone (intrarectal)</i>	39
<i>hydrocortisone (rectal)</i>	52
<i>hydrocortisone (topical)</i>	39, 52
HYDROCORTISONE ACE-PRAMOXINE	53
<i>hydrocortisone acetate (rectal)</i>	44
<i>hydrocortisone butyrate hydrophilic lipo base</i>	52
<i>Hydrocortisone sodium succinate</i>	41
<i>hydrocortisone valerate</i>	52
<i>hydrocortisone w/acetic acid</i>	35
<i>hydromorphone hcl</i>	4, 27
<i>hydroxychloroquine sulfate</i>	16
<i>hydroxyurea</i>	15
<i>hydroxyzine hcl</i>	10, 11, 29, 46
<i>hydroxyzine pamoate</i>	29
HYFTOR.....	53
<i>hyoscyamine sulfate</i>	36
HYQVIA.....	43

I

<i>ibandronate sodium</i>	46
IBRANCE.....	13
IBSRELA.....	36
<i>ibuprofen</i>	4, 27, 48
<i>ibuprofen-famotidine</i>	27
<i>icatibant acetate</i>	22, 46
ICLUSIG.....	13
<i>icosapent ethyl</i>	23, 25
IDHIFA	13
ILARIS.....	46
ILEVRO.....	35
ILUMYA.....	46
<i>imatinib mesylate</i>	15
IMBRUVICA	13, 15
IMCIVREE	46
<i>imipramine hcl</i>	10
<i>imipramine pamoate</i>	31
<i>imiquimod</i>	33, 53
IMLYGIC	12
IMPAVIDO	16
INBRIJA	16
INCRUSE ELLIPTA.....	51
<i>indapamide</i>	24
INDERAL XL	23
<i>indomethacin</i>	4
INGREZZA	46
INLYTA.....	13
INPEFA	20
INPEN 100-BLUE-LILLY-HUMALOG	33
INQOVI.....	13

Kaiser Permanente, a State Employee Health Benefit Formulary

INREBIC.....	13	KAZANO	21
INSULIN ASPART	42	KEPPRA	28
INSULIN ASPART PROT & ASPART.....	42	KERENDIA	46
INSULIN DEGLUDEC	42	KESIMPTA	12
INSULIN GLARGINE-YFGN	21	<i>ketoconazole</i>	6, 11, 51
INTELENCE.....	17	<i>ketoconazole (topical)</i>	11, 51
INVEGA.....	16	KETODAN	52
INVIRASE	18	KETO-DIASTIX.....	46
INVOKAMET	42	KETOPROFEN	27
INVOKANA	42	<i>ketorolac tromethamine</i>	27, 36, 49
IODINE STRONG	46	<i>ketorolac tromethamine (ophth)</i>	36, 49
<i>iodoquinol-hc</i>	33	KETOSTIX.....	46
IOPIDINE	49	KEVEYIS.....	46
<i>ipratropium bromide</i>	19, 50	KEVZARA.....	46
<i>ipratropium bromide (nasal)</i>	19, 50	KINERET	46
<i>ipratropium-albuterol</i>	50	KISQALI (200 MG DOSE)	14
<i>irbesartan</i>	26	KLARON	32
<i>irbesartan-hydrochlorothiazide</i>	26	KLISYRI	53
IRESSA	13	KORLYM.....	21
ISENTRESS	17	KOSELUGO	14
<i>isoniazid</i>	12	K-PHOS	54
<i>isosorbide dinitrate</i>	24, 25	KRAZATI.....	13
<i>isosorbide dinitrate-hydralazine hcl</i>	25	KRISTALOSE.....	34
<i>isosorbide mononitrate</i>	25, 27	K-TAB.....	33
<i>isotretinoin</i>	33, 53	KYZATREX.....	5
<i>isradipine</i>	25		
ISTURISA.....	46	L	
<i>itraconazole</i>	6, 11	<i>labetalol hcl</i>	23
<i>ivabradine hcl</i>	26	<i>lacosamide</i>	9
<i>ivermectin</i>	5, 51	LACRISERT	36
<i>ivermectin (pediculicide)</i>	5	<i>lactic acid (ammonium lactate)</i>	53
<i>ivermectin (rosacea)</i>	51	<i>lactulose</i>	36
IYUZEH	49	<i>lactulose (encephalopathy)</i>	36
J		LAGEVRIO	18
JAKAFI	14	LAMICTAL ODT.....	9
JANUMET	21	<i>lamivudine</i>	6, 17
JANUVIA.....	20	<i>lamivudine (hbv)</i>	17
JARDIANCE	21	<i>lamivudine-zidovudine</i>	17
JAYPIRCA	13	<i>lamotrigine</i>	28
JENTADUETO	21	LAMPIT	6
JENTADUETO XR.....	21	LANOXIN	23
JESDUVROQ	20	<i>lansoprazole</i>	37
JOENJA.....	43	<i>lanthanum carbonate</i>	46
JUBLIA	51	<i>lapatinib ditosylate</i>	15
JULUCA	7	LASTACFT.....	35
JUXTAPID.....	24	<i>latanoprost</i>	49
JYLAMVO	13	LATUDA.....	16
		<i>leflunomide</i>	43
K		<i>lenalidomide</i>	12
KALYDECO	46, 51	LENVIMA (10 MG DAILY DOSE).....	14
KAPVAY.....	28	LETAIRIS.....	50
		<i>letrozole</i>	12
		<i>leucovorin calcium</i>	15, 46

Kaiser Permanente, a State Employee Health Benefit Formulary

LEUKERAN	12	<i>lovastatin</i>	24, 25
LEUKINE	22	<i>loxapine succinate</i>	31
<i>levalbuterol hcl</i>	19	<i>lubiprostone</i>	37
LEVALBUTEROL TARTRATE	19	LUCEMYRA	46
LEVAMLODIPINE MALEATE	23	LULICONAZOLE	52
LEVEMIR	42	LUMAKRAS	12
<i>levetiracetam</i>	9, 28	LUMRYZ	46
<i>levobunolol hcl</i>	49	LUPKYNIS	46
<i>levocarnitine (metabolic modifiers)</i>	46	<i>lurasidone hcl</i>	31
<i>levocetirizine dihydrochloride</i>	11	LUZU	33
<i>levofloxacin</i>	6, 8, 34	LYBALVI	31
<i>levofloxacin (ophth)</i>	34	LYNPARZA	12
<i>levonorgestrel & eth estradiol</i>	40, 41	LYRICA	9
<i>levonorgestrel (emergency oc)</i>	40	LYSODREN	40
<i>levonorgestrel-eth estradiol (triphasic)</i>	40	LYTGOBI (12 MG DAILY DOSE)	13
<i>levonorgestrel-ethinyl estradiol (91-day)</i>	41	LYUMJEV	21
<i>levonorgestrel-ethinyl estradiol (continuous)</i>	41	LYVISPAH	30
<i>levorphanol tartrate</i>	27		
<i>levothyroxine sodium</i>	40	M	
LEVOTHYROXINE SODIUM	43	<i>malathion</i>	52
LEXIVA	18	<i>maraviroc</i>	17
<i>lidocaine</i>	5, 46, 53	MARPLAN	31
<i>lidocaine hcl</i>	5, 46, 53	MATULANE	12
<i>lidocaine hcl (local anesth.)</i>	46	MAVENCLAD (10 TABS)	46
<i>lidocaine hcl (mouth-throat)</i>	5	MAVYRET	7, 18
LIDOCAINE HCL URETHRAL/MUCOSAL	5	MAXALT	29
<i>lidocaine-prilocaine</i>	53	MAXIDEX	49
LINDANE	16	MAYZENT	30, 46
<i>linezolid</i>	7	<i>meclizine hcl</i>	37
LINZESS	37	MECLOFENAMATE SODIUM	27
<i>liothyronine sodium</i>	40	<i>medroxyprogesterone acetate</i>	40, 41, 43
LIQREV	46	<i>medroxyprogesterone acetate (contraceptive)</i>	41, 43
<i>lisinopril</i>	22, 24, 26	<i>mefenamic acid</i>	27
<i>lisinopril & hydrochlorothiazide</i>	24, 26	<i>mefloquine hcl</i>	6
<i>lithium carbonate</i>	19, 31	<i>megestrol acetate</i>	40, 43
LITHOSTAT	34	<i>megestrol acetate (appetite)</i>	43
LIVMARLI	46	MEKINIST	13, 14
LIVTENCITY	7	MEKTOVI	14
LO LOESTRIN FE	41	<i>meloxicam</i>	4
LOCOID	52	MELOXICAM	4
LODOCO	46	MELPHALAN	12
LOKELMA	34	<i>memantine hcl</i>	10, 30
LONHALA MAGNAIR REFILL KIT	51	MENEST	42
LONSURF	12	MENTAX	52
<i>loperamide hcl</i>	37	<i>mepерidine hcl</i>	4
<i>lopinavir-ritonavir</i>	18	<i>meprobamate</i>	18
LOPROX	33	<i>mercaptopurine</i>	43
<i>lorazepam</i>	18, 29	<i>mesalamine</i>	36, 44
LORBRENA	14	<i>mesalamine w/ cleanser</i>	36
LORTAB	4	MESNEX	15
<i>losartan potassium</i>	22, 24	MESTINON	46
<i>losartan potassium & hydrochlorothiazide</i>	24	<i>metaxalone</i>	19
<i>loteprednol etabonate</i>	49	<i>metformin hcl</i>	20, 21, 42
LOTREL	22		

Kaiser Permanente, a State Employee Health Benefit Formulary

<i>methadone hcl</i>	4, 27	MOVANTIK.....	37
<i>methamphetamine hcl</i>	28	MOXEZA.....	34
<i>methazolamide</i>	40	<i>moxifloxacin hcl</i>	6, 48
<i>methenamine hippurate</i>	7	<i>moxifloxacin hcl (ophth)</i>	48
<i>methenamine-hyoscamine-methylene blue-sodium phosphate</i>	8	MOZOBIL.....	22
<i>methenamine-hyosc-methylene blue-sod phos-phenyl sal</i>	8	MULPLETA.....	46
<i>methimazole</i>	41, 43	MULTAQ.....	26
<i>methocarbamol</i>	51	MULTIVITAMIN/FLUORIDE.....	55
<i>methotrexate sodium</i>	12, 13, 43	<i>mupirocin</i>	8, 52
METHOXSALEN RAPID.....	33	<i>mupirocin calcium (topical)</i>	52
<i>methscopolamine bromide</i>	19	MYALEPT.....	46
<i>methsuximide</i>	8	MYCAPSSA.....	46
<i>methyl dopa</i>	22	<i>mycophenolate mofetil</i>	43, 46
METHYLDOPA-HYDROCHLOROTHIAZIDE.....	24	<i>mycophenolate sodium</i>	43
<i>methylergonovine maleate</i>	38	MYFEMBREE.....	43
<i>methylphenidate</i>	28, 30	MYLERAN.....	13
<i>methylphenidate hcl</i>	28, 30	MYRBETRIQ.....	54
<i>methylprednisolone</i>	39, 41	MYTESI.....	36
<i>methylprednisolone acetate</i>	41		
<i>methyltestosterone</i>	39, 40	N	
<i>metoclopramide hcl</i>	10, 37	<i>nabumetone</i>	4
<i>metolazone</i>	24	<i>nadolol</i>	23
<i>metoprolol & hydrochlorothiazide</i>	23	<i>naftifine hcl</i>	52
<i>metoprolol succinate</i>	23	<i>naloxone hcl</i>	5, 28, 31, 46
<i>metoprolol tartrate</i>	23	<i>naltrexone hcl</i>	5
<i>metronidazole</i>	6, 7, 52	NAMZARIC.....	9
<i>metronidazole (topical)</i>	7, 52	NAPRELAN.....	27
<i>metronidazole vaginal</i>	52	<i>naproxen</i>	4, 28
<i>metyrosine</i>	46	<i>naproxen sodium</i>	4
<i>mexiletine hcl</i>	23	<i>naproxen-esomeprazole magnesium</i>	4, 28
MICARDIS HCT.....	22	<i>naratriptan hcl</i>	11, 29
MICONAZOLE 3.....	52	NATACYN.....	11
<i>midodrine hcl</i>	19, 24, 46	NATAZIA.....	41
MIEBO.....	36	<i>nateglinide</i>	42
<i>miglitol</i>	42	NAYZILAM.....	9
<i>miglustat</i>	34	<i>nebivolol hcl</i>	23
<i>minocycline hcl</i>	6, 8	NEBUPENT.....	16
<i>minoxidil</i>	25	NEFAZODONE HCL.....	31
MIRCERA.....	46	NEFFY.....	46
<i>mirtazapine</i>	10, 31	<i>neomycin sulfate</i>	7
<i>misoprostol</i>	27, 36	<i>neomycin-bacitracin zn-polymyxin</i>	48
<i>mitomycin</i>	46	<i>neomycin-polymy-dexameth</i>	48
<i>modafinil</i>	28	NEOMYCIN-POLYMYXIN-GRAMICIDIN.....	48
<i>moexipril hcl</i>	26	NEOMYCIN-POLYMYXIN-HC.....	48
MOLINDONE HCL.....	31	<i>neomycin-polymyxin-hc (otic)</i>	49
<i>mometasone furoate</i>	35, 39, 52	NEO-SYNALAR.....	53
<i>mometasone furoate (nasal)</i>	35	NERLYNX.....	13
<i>montelukast sodium</i>	49, 50	NEULASTA.....	20
<i>morphine sulfate</i>	4, 27	NEUPOGEN.....	22
MORPHINE SULFATE ER BEADS.....	27	NEUPRO.....	29
MOTEGRITY.....	37	NEURONTIN.....	30
MOTOFEN.....	46	<i>nevirapine</i>	17
MOTPOLY XR.....	8	NEXAVAR.....	15
MOUNJARO.....	21		

Kaiser Permanente, a State Employee Health Benefit Formulary

NEXIUM	36, 37	NUVESSA.....	8
NEXLETOL	25	NUVIGIL.....	54
NEXLIZET	25	NUZYRA	8
NEXTSTELLIS	39	<i>nystatin</i>	11, 53
NGENLA.....	38	<i>nystatin (mouth-throat)</i>	11
<i>niacin</i>	25, 55	<i>nystatin (topical)</i>	11
<i>niacin (antihyperlipidemic)</i>	25	<i>nystatin-triamcinolone</i>	53
NIACIN (ANTIHYPERSLIPIDEMIC).....	55	NYVEPRIA	20
<i>nicardipine hcl</i>	25		
<i>nicotine polacrilex</i>	46	O	
NICOTROL	19	ODEFSEY.....	17
<i>nifedipine</i>	23, 25	ODOMZO.....	13
<i>nilutamide</i>	40	OFEV.....	50
<i>nimodipine</i>	23	<i>ofloxacin</i>	6, 8, 49
NINLARO	13	<i>ofloxacin (ophth)</i>	8
<i>nisoldipine</i>	25	<i>ofloxacin (otic)</i>	49
NITAZOXANIDE.....	16	OGSIVEO	13
<i>nitisinone</i>	46	OJJAARA.....	13
<i>nitrofurantoin</i>	7, 8	<i>olanzapine</i>	17, 31
NITROFURANTOIN	6	<i>olanzapine-fluoxetine hcl</i>	31
<i>nitrofurantoin macrocrystal</i>	7, 8	<i>olopatadine hcl</i>	35, 48
<i>nitrofurantoin monohyd macro</i>	7	<i>olopatadine hcl (nasal)</i>	35
<i>nitroglycerin</i>	25, 27	OLPRUVA (2 GM DOSE).....	46
NIVESTYM.....	46	OLUMIANT	43
NIZATIDINE.....	37	OMECLAMOX-PAK.....	37
NOCDURNA.....	46	<i>omega-3 fatty acids</i>	25
<i>norelgestromin-ethinyl estradiol</i>	39, 41	<i>omega-3-acid ethyl esters</i>	25
<i>norethin acet & estrad-fe</i>	41	<i>omeprazole</i>	37
<i>norethindrone & eth estradiol</i>	40, 41	<i>omeprazole-sodium bicarbonate</i>	37
<i>norethindrone & ethinyl estradiol-fe</i>	41	OMNARIS	35
<i>norethindrone (contraceptive)</i>	40	OMNIPOD 5 G6 INTRO (GEN 5).....	33
<i>norethindrone acet & eth estra</i>	41	OMVOH.....	37
<i>norethindrone acetate</i>	40, 41, 42	<i>ondansetron</i>	10, 37
<i>norethindrone acetate-ethinyl estradiol</i>	40, 41, 42	<i>ondansetron hcl</i>	10, 37
<i>norethindrone acetate-ethinyl estradiol-fe</i>	41	ONETOUCH DELICA LANCETS 30G.....	33
<i>norethindrone-eth estradiol (triphasic)</i>	40	ONEXTON	33
NORGESIC FORTE	51	ONFI.....	9
<i>norgestimate-ethinyl estradiol</i>	40, 41	ONGENTYS	16
<i>norgestimate-ethinyl estradiol (triphasic)</i>	40, 41	ONGLYZA.....	21
<i>norgestrel & ethinyl estradiol</i>	41	ONUREG	13
NORITATE.....	53	OPFOLDA.....	46
NORTHERA.....	22	OPSUMIT	27
<i>nortriptyline hcl</i>	10, 31	OPTIONS GYNOL II CONTRACEPTIVE.....	46
NORVIR	18	OPZELURA	53
NOURIANZ	16	ORACEA.....	53
NOVOFINE 30GX8MM	33	ORAVIG	52
NOVOLIN R.....	21	ORENCIA	43, 47
NOXAFIL.....	6	ORENCIA CLICKJECT	47
NUBEQA	40	ORENITRAM.....	24
NUCYNTA.....	28	ORGOVYX	13
NUEDEXTA	30	ORIAHNN	42
NULOJIX	46	ORILISSA	47
NUPLAZID	16	ORKAMBI	50, 51
NURTEC	11		

Kaiser Permanente, a State Employee Health Benefit Formulary

ORLADEYO.....	47	<i>pentazocine w/ naloxone hcl</i>	28
<i>orphenadrine citrate</i>	19	<i>pentoxifylline</i>	23
<i>orphenadrine w/ aspirin & caff</i>	19	<i>perindopril erbumine</i>	26
ORSERDU.....	13	<i>permethrin</i>	16
ORTIKOS.....	44	<i>perphenazine</i>	10, 31
<i>oseltamivir phosphate</i>	18	PERPHENAZINE-AMITRIPTYLINE.....	31
OSENI.....	21	PEXEVA.....	31
OSMOPREP.....	37	<i>phenelzine sulfate</i>	10
OSPHENA.....	12	<i>phenobarbital</i>	9, 28
OTEZLA.....	47	<i>phenylephrine hcl (mydriatic)</i>	48
OTREXUP.....	47	<i>phenytoin</i>	9, 28
<i>oxandrolone</i>	41	<i>phenytoin sodium extended</i>	9, 28
<i>oxaprozin</i>	28	PHEXXI.....	47
<i>oxazepam</i>	18	PHOSPHOLINE IODIDE.....	49
OXBRYTA.....	47	<i>phytonadione</i>	55
<i>oxcarbazepine</i>	9, 28	PIFELTRO.....	7
OXERVATE.....	48	<i>pilocarpine hcl</i>	19, 32, 49
<i>oxiconazole nitrate</i>	52	<i>pilocarpine hcl (oral)</i>	19, 32
<i>oxybutynin chloride</i>	38	<i>pimecrolimus</i>	52
<i>oxycodone hcl</i>	5, 28	PIMOZIDE.....	31
OXYCODONE HCL ER.....	4	<i>pindolol</i>	23
<i>oxycodone w/ acetaminophen</i>	4, 28	<i>pioglitazone hcl</i>	21
OXYCODONE-ACETAMINOPHEN.....	5	<i>pioglitazone hcl-glimepiride</i>	21
<i>oxymorphone hcl</i>	5	<i>pioglitazone hcl-metformin hcl</i>	21
OXYMORPHONE HCL ER.....	4	PIQRAY (200 MG DAILY DOSE).....	12
OXYTROL FOR WOMEN.....	54	<i>pirfenidone</i>	51
OZEMPIC (0.25 OR 0.5 MG/DOSE).....	21	<i>piroxicam</i>	28
P			
PALFORZIA (12 MG DAILY DOSE).....	47	<i>pitavastatin calcium</i>	25
PALYNZIQ.....	34	PIVYA.....	6
PANCREAZE.....	36, 37	PLAQUENIL.....	47
PANDEL.....	53	PLEGRIDY.....	47
PANRETIN.....	14	PLENVU.....	36
<i>pantoprazole sodium</i>	37	<i>plerixafor</i>	47
<i>paricalcitol</i>	55	<i>podofilox</i>	53
<i>paroxetine hcl</i>	10, 30, 31	<i>polyethylene glycol 3350</i>	37
<i>paroxetine mesylate (vasomotor)</i>	31	<i>polymyxin b-trimethoprim</i>	48
PASER.....	6	POMALYST.....	12
PAXLOVID (150/100).....	18	PONVORY.....	30
<i>pazopanib hcl</i>	14	<i>posaconazole</i>	11
<i>ped multivitamins w/fl & iron</i>	54	<i>pot & sod citrates w/citric ac</i>	54
<i>pediatric multivitamins w/fl</i>	54	<i>pot phosphate monobasic w/ sod phosphate dibasic & monobasic</i>	54
<i>peg 3350-kcl-nacl-na sulfate-na ascorbate-ascorbic acid</i>	37	<i>potassium bicarbonate</i>	47
<i>peg 3350-kcl-sod bicarb-sod chloride-sod sulfate</i>	37	<i>potassium chloride</i>	34, 37, 54
<i>peg 3350-potassium chloride-sod bicarbonate-sod chloride</i>	37	<i>potassium chloride microencapsulated crystals cr</i>	34
PEGASYS.....	7, 18	<i>potassium chloride microencapsulated crystals er</i>	54
PEG-PREP.....	37	<i>potassium citrate (alkalinizer)</i>	33, 55
PEMAZYRE.....	13	PRADAXA.....	19
<i>penciclovir</i>	52	PRALUENT.....	24
<i>penicillamine</i>	38	<i>pramipexole dihydrochloride</i>	16, 29
PENICILLIN G PROCAINE.....	6	<i>prasugrel hcl</i>	20
<i>penicillin v potassium</i>	8	<i>pravastatin sodium</i>	24
		<i>prazosin hcl</i>	22
		PRED MILD.....	49

Kaiser Permanente, a State Employee Health Benefit Formulary

PRED-G	48	QELBREE	30
PREDNICARBATE	53	QINLOCK	13
<i>prednisolone</i>	39, 41	QNASL	35
<i>prednisolone sodium phosphate</i>	39, 41	QTERN	21
PREDNISOLONE SODIUM PHOSPHATE	35	QUAZEPAM	29
<i>prednisona</i>	39, 41	QUDEXY XR	9
PREFEST	42	<i>quetiapine fumarate</i>	17
<i>pregabalin</i>	28	<i>quinapril hcl</i>	26
<i>pregabalin (once-daily)</i>	28	<i>quinapril-hydrochlorothiazide</i>	26
PREMARIN	39, 42	<i>quinidine gluconate</i>	26
PREMPHASE	42	<i>quinidine sulfate</i>	23
PRETOMANID	6	<i>quinine sulfate</i>	6
PREVACID SOLUTAB	36	QULIPTA	29
PREVYMIS	7	QUVVIQ	29
PREZCOBIX	18	QVAR REDIHALER	49
PREZISTA	18		
PRIFTIN	12	R	
PRILOSEC	37	<i>rabeprazole sodium</i>	37
<i>primaquine phosphate</i>	6	RADICAVA ORS STARTER KIT	47
<i>primidone</i>	9	RAGWITEK	47
PRIMIDONE	9	<i>raloxifene hcl</i>	39
PRIMSOL	7	<i>ramelteon</i>	29
<i>probenecid</i>	11, 34	<i>ramipril</i>	22
<i>prochlorperazine</i>	10, 37	<i>ranolazine</i>	26
<i>prochlorperazine maleate</i>	10	<i>rasagiline mesylate</i>	29
PROCRIT	22	RAVICTI	34
PROCTOFOAM HC	36	RAYALDEE	44
PROCYSBI	47	RAYOS	38
<i>progesterone</i>	43	RECORLEV	47
PROGLYCEM	21	RECTIV	53
PROMACTA	20	REGRANEX	33
<i>promethazine & phenylephrine</i>	11	RELENZA DISKHALER	18
<i>promethazine hcl</i>	10, 11	RELEUKO	20
PROMETHAZINE VC/CODEINE	50	RELISTOR	38
<i>promethazine w/codeine</i>	50	RELYVRIO	30
<i>propafenone hcl</i>	23, 26	REMODULIN	50
<i>proparacaine hcl</i>	48	<i>repaglinide</i>	42
<i>propranolol hcl</i>	23	REPATHA	24
PROPRANOLOL-HCTZ	23	RETACRIT	20
<i>propylthiouracil</i>	41	RETEVMO	13
PROTONIX	36	RETIN-A MICRO PUMP	33
<i>protriptyline hcl</i>	31	RETROVIR	7
PULMICORT FLEXHALER	51	REVLIMID	13
PULMOZYME	50	REXULTI	31
PURIXAN	13	REYVOW	11
PYLERA	37	REZDIFFRA	40
<i>pyrazinamide</i>	12	REZLIDHIA	13
<i>pyridostigmine bromide</i>	12	REZUROCK	47
<i>pyrimethamine</i>	16	RHOFADE	33
PYRUKYND	20	RHOPRESSA	49
		RIBAVIRIN	18
Q		RIDAURA	43
QBREXZA	47	<i>rifabutin</i>	12

Kaiser Permanente, a State Employee Health Benefit Formulary

<i>rifampin</i>	6, 12	<i>sildenafil citrate (pulmonary hypertension)</i>	27
RILUTEK.....	30	SILENOR.....	29
<i>riluzole</i>	30	SILIQ.....	47
RIMANTADINE HCL.....	18	<i>silodosin</i>	19
RINVOQ.....	43, 44	<i>silver sulfadiazine</i>	8
<i>risedronate sodium</i>	44, 47	SIMBRINZA.....	35
<i>risperidone</i>	17, 31	SIMPONI.....	47
<i>ritonavir</i>	7, 18	<i>simvastatin</i>	24, 25
<i>rivastigmine</i>	10, 19	<i>sirolimus</i>	43
<i>rivastigmine tartrate</i>	10	SIRTURO.....	6
RIVFLOZA.....	47	SIVEXTRO.....	6
<i>rizatriptan benzoate</i>	11	SKYRIZI.....	37, 53
ROCKLATAN.....	49	SKYTROFA.....	43
<i>roflumilast</i>	51	SLYND.....	40
ROLVEDON.....	20	sodium chloride.....	47
<i>ropinirole hydrochloride</i>	16, 29	<i>sodium fluoride</i>	55
<i>rosuvastatin calcium</i>	24	SODIUM FLUORIDE.....	47
ROSZET.....	26	<i>sodium phenylbutyrate</i>	34
ROZLYTREK.....	13	<i>sodium polystyrene sulfonate</i>	34, 55
RUBRACA.....	13	SOGROYA.....	39
<i>rufinamide</i>	9	SOHONOS.....	47
RUKOBIA.....	18	<i>solifenacin succinate</i>	54
RYDAPT.....	13	SOLQUA.....	21
S			
SAIZEN.....	39, 43	SOLOSEC.....	6
<i>salicylic acid</i>	33	SOLTAMOX.....	12
<i>salsalate</i>	4	SOMATULINE DEPOT.....	13
SANCUSO.....	37	SOMAVERT.....	40, 43, 47
SANTYL.....	33	<i>sorafenib tosylate</i>	12
SAPHNELO.....	43	<i>sotalol hcl</i>	23
<i>sapropterin dihydrochloride</i>	34	SOTYKTU.....	53
SAVAYSA.....	20	SOTYLIZE.....	25
SAVELLA.....	30	SOVALDI.....	7
<i>saxagliptin-metformin hcl</i>	21	SPINOSAD.....	33
SAXENDA.....	47	SPIRIVA HANDHALER.....	49
SCEMBLIX.....	13	SPIRIVA RESPIMAT.....	50, 51
<i>scopolamine</i>	37	<i>spironolactone</i>	24, 26
SECONAL.....	29	<i>spironolactone & hydrochlorothiazide</i>	26
SECUADO.....	19	SPRIX.....	4
SEGLENTIS.....	4	SPRYCEL.....	15
SEGLUROMET.....	21	STEGLATRO.....	21
<i>selegiline hcl</i>	16	STEGLUJAN.....	21
<i>selenium sulfide</i>	33	STELARA.....	53
SENSIPAR.....	44	STIOLTO RESPIMAT.....	50
SEREVENT DISKUS.....	50	STIVARGA.....	12
SEROQUEL XR.....	10	STRENSIQ.....	38
<i>sertraline hcl</i>	10, 31	STRIBILD.....	17
<i>sevelamer carbonate</i>	34, 38	STRIVERDI RESPIMAT.....	50
<i>sevelamer hcl</i>	34	SUBOXONE.....	5
SEYSARA.....	8	SUCRAID.....	38
SIGNIFOR LAR.....	47	<i>sucrafate</i>	36
SIKLOS.....	13	SUFLAVE.....	37
		SULCONAZOLE NITRATE.....	11, 52
		SULFACETAMIDE SODIUM.....	34
		<i>sulfacetamide sodium (acne)</i>	52

Kaiser Permanente, a State Employee Health Benefit Formulary

<i>sulfacetamide sodium (ophth)</i>	8	<i>tavorole</i>	52
<i>sulfacetamide sodium w/ sulfur</i>	54	TAVALISSE.....	47
SULFACETAMIDE-SULFUR IN UREA.....	54	TAVNEOS.....	47
SULFADIAZINE.....	8	<i>tazarotene</i>	54
<i>sulfamethoxazole-trimethoprim</i>	6, 8	TAZVERIK.....	14
SULFAMYLON.....	52	TEGRETOL-XR.....	28
<i>sulfasalazine</i>	6, 44	TEGSEDI.....	47
<i>sulindac</i>	4	TEKTURNA.....	26
<i>sumatriptan</i>	11, 29	TEKTURNA HCT.....	26
<i>sumatriptan succinate</i>	11, 29	<i>telmisartan</i>	25, 26
<i>sunitinib malate</i>	12	<i>telmisartan-amlodipine</i>	25
SUNLENCA.....	7	<i>telmisartan-hydrochlorothiazide</i>	26
SUNOSI.....	31	<i>temazepam</i>	29, 54
SUPREP BOWEL PREP KIT.....	37	<i>temozolomide</i>	12
SUTENT.....	15	<i>tenofovir disoproxil fumarate</i>	7, 17
SYMDEKO.....	47	TEPMETKO.....	47
SYMFI.....	17, 18	<i>terazosin hcl</i>	22
SYMFI LO.....	17	<i>terbinafine hcl</i>	11
SYMLINPEN 120.....	21	<i>terbutaline sulfate</i>	19, 50
SYMPAZAN.....	9	<i>terconazole vaginal</i>	52
SYMPROIC.....	38	<i>teriflunomide</i>	43
SYMTUZA.....	18	<i>teriparatide (recombinant)</i>	43
SYNALAR (CREAM).....	53	TERIPARATIDE (RECOMBINANT).....	9
SYNAREL.....	40	<i>testosterone</i>	39, 41
SYNERA.....	47	TESTOSTERONE.....	39, 41
SYNJARDY.....	21, 42	<i>testosterone cypionate</i>	39
SYNJARDY XR.....	21	TESTOSTERONE PROPIONATE.....	41
SYNRIBO.....	13	<i>tetrabenazine</i>	30
T			
TABLOID.....	15	<i>tetracycline hcl</i>	6
TABRECTA.....	13	TEVETEN HCT.....	26
<i>tacrolimus</i>	43, 54	TEZSPIRE.....	51
<i>tacrolimus (topical)</i>	54	THALITONE.....	34
<i>tadalafil</i>	38, 50	THALOMID.....	15, 47
<i>tadalafil (pulmonary hypertension)</i>	50	<i>theophylline</i>	51, 54
TADLIQ.....	24	<i>thioridazine hcl</i>	16, 31
TAFINLAR.....	14	<i>thiothixene</i>	16, 31
<i>tafluprost</i>	35	<i>tiagabine hcl</i>	9, 28
TAGRISSO.....	14	TIAZAC.....	23
TAKHZYRO.....	47	TIBSOVO.....	14
TALTZ.....	54	TIKOSYN.....	23
TALZENNA.....	14	<i>timolol maleate</i>	23, 35, 49
<i>tamoxifen citrate</i>	15	<i>timolol maleate (ophth)</i>	35, 49
<i>tamsulosin hcl</i>	38, 45	<i>tinidazole</i>	6
TARCEVA.....	15	<i>tiopronin</i>	47
TARGRETIN.....	14, 32	<i>tiotropium bromide monohydrate</i>	50
TARKA.....	25	TIVICAY.....	7
TARPEYO.....	47	<i>tizanidine hcl</i>	17, 19
TASCENSO ODT.....	30	TOBRADEX ST.....	35
TASIGNA.....	14	<i>tobramycin</i>	6, 7, 48
<i>tasimelteon</i>	29	<i>tobramycin (ophth)</i>	7
TASMAR.....	16	<i>tobramycin sulfate</i>	6
		<i>tobramycin-dexamethasone</i>	48
		TODAY SPONGE.....	33
		<i>tolcapone</i>	29

Kaiser Permanente, a State Employee Health Benefit Formulary

<i>tolterodine tartrate</i>	54	TRUQAP	14
<i>tolvaptan</i>	54	TRUSELTIQ (100MG DAILY DOSE).....	14
TOPAMAX	28	TUDORZA PRESSAIR	51
<i>topiramate</i>	9, 28	TUKYSA.....	14
<i>toremifene citrate</i>	12	TURALIO	14
<i>toremide</i>	23	TWIRLA.....	41
TOSYMRA	11	TYBOST.....	18
TRADJENTA	21	TYENNE	43
<i>tramadol hcl</i>	5, 28	TYKERB.....	14
<i>tramadol-acetaminophen</i>	28	TYMLOS	44
<i>trandolapril</i>	27	TYRVAYA.....	36
<i>tranexamic acid</i>	20	TYVASO	24, 27
<i>tranylcypromine sulfate</i>	10	TYVASO REFILL KIT	27
TRAVATAN Z	35		
<i>trazodone hcl</i>	10	U	
TRECTOR	6	UBRELVY	29
TRELEGY ELLIPTA	19	UCERIS.....	39
TREMFYA.....	47	UDENYCA	20, 47
<i>tretinoin</i>	15, 53, 54	ULORIC.....	47
<i>tretinoin (chemotherapy)</i>	15	ULTRAVATE	52
<i>tretinoin microsphere</i>	53, 54	UPTRAVI	50, 51
TRETIN-X.....	53	<i>urea</i>	53
TREXALL	15	UROXATRAL	47
TREXIMET.....	29	<i>ursodiol</i>	36
TREZIX.....	28		
<i>triamcinolone acetonide</i>	32, 35, 39, 41, 53	V	
<i>triamcinolone acetonide (mouth)</i>	32	VAFSEO	47
<i>triamcinolone acetonide (nasal)</i>	35	<i>valacyclovir hcl</i>	7
<i>triamcinolone acetonide (topical)</i>	32, 39, 53	VALCHLOR	54
<i>triamterene</i>	24, 34	<i>valganciclovir hcl</i>	17
<i>triamterene & hydrochlorothiazide</i>	24, 34	<i>valproate sodium</i>	28
<i>triazolam</i>	29	<i>valproic acid</i>	9
TRIBENZOR.....	25	<i>valsartan</i>	23, 25, 27
<i>trientine hcl</i>	54	<i>valsartan-hydrochlorothiazide</i>	23, 25, 27
TRIENTINE HCL.....	47	<i>vancomycin hcl</i>	6
<i>trifluoperazine hcl</i>	16	VANFLYTA.....	14
TRIFLURIDINE.....	18	VANOS.....	32
<i>trihexyphenidyl hcl</i>	16	<i>varenicline tartrate</i>	19
TRIHXYPHENIDYL HCL.....	29	VARUBI (180 MG DOSE).....	37
TRIJARDY XR.....	21	VASERETIC	22
TRIKAFTA.....	47, 51	VECAMYL.....	26
TRILEPTAL.....	9	VECTICAL	33
TRILIPIX.....	24	VELIVET	41
<i>trimethobenzamide hcl</i>	37	VELPHORO	34
TRIMETHOPRIM	8	VELSIPITY	38
<i>trimipramine maleate</i>	31	VELTASSA.....	34
TRINATAL RX 1.....	55	VEMLIDY	18
TRINTELLIX	32	VENCLEXTA.....	14
TRIUMEQ.....	17	<i>venlafaxine hcl</i>	10, 32
TRI-VITE/FLUORIDE	55	VENTAVIS	27
<i>tropium chloride</i>	38, 54	VEOZAH	47
TRUDHESA	11	<i>verapamil hcl</i>	23, 25
TRULANCE	38		
TRULICITY	21		

Kaiser Permanente, a State Employee Health Benefit Formulary

VEREGEN	33	XELJANZ	43, 48
VERQUVO	27	XEMBIFY	44
VERZENIO.....	14	XENAZINE.....	30
VESICARE.....	38	XENLETA	14
VFEND	11	XERESE	52
VIBERZI	36	XERMELO	48
VICTOZA.....	21	XHANCE	36
<i>vigabatrin</i>	9	XIFAXAN.....	8
VIJOICE	47	XIGDUO XR	21
<i>vilazodone hcl</i>	32	XIIDRA	48
VIRACEPT	18	XOFLUZA (40 MG DOSE).....	18
VIREAD	17	XOLAIR	51
VISTOGARD	47	XOLREMDI.....	48
VITRAKVI.....	14	XOSPATA.....	14
VIVJOA.....	6	XPHOZAH	48
VIZIMPRO.....	14	XPOVIO (100 MG ONCE WEEKLY)	14
VOCABRIA	7	XTAMPZA ER.....	4
VONJO	15	XTANDI.....	14
<i>voriconazole</i>	6	XULTOPHY	21
VOSEVI	18	XURIDEN.....	48
VOWST	47	XYOSTED.....	41
VOXZOGO.....	47	XYREM	54
VRAYLAR	17	XYWAV	30
VTAMA	54		
VUMERITY	48	Y	
VYJUVEK.....	38	YUFLYMA (1 PEN).....	48
VYNDAMAX.....	26	YUPELRI.....	50
VYNDAQEL	26	YUSIMRY	48
VYTORIN	23		
VYVANSE	28	Z	
VYVGART HYTRULO.....	48	<i>zafirlukast</i>	49
VYZULTA.....	49	<i>zaleplon</i>	54
W		ZARXIO.....	20
WAKIX.....	30	ZAVESCA.....	34
<i>warfarin sodium</i>	20, 22	ZAVZPRET	29
WEGOVI	48	ZEGALOGUE	48
WELCHOL	25	ZEJULA.....	14
WELIREG.....	14	ZELAPAR	29
WESTAB MAX	55	ZELBORAF.....	15
WIDE-SEAL DIAPHRAGM 60.....	48	ZELNORM	38
WINLEVI.....	32	ZENPEP.....	34
WINREVAIR	48	ZEPATIER	7
WYNZORA.....	33	ZEPBOUND	48
		ZEPOSIA	30, 48
X		ZEPOSIA STARTER KIT.....	48
XADAGO.....	29	ZERVIAE	48
XALKORI.....	14	<i>zidovudine</i>	17
XARELTO	20	ZIEXTENZO	20
XATMEP.....	15	ZILBRYSQ.....	48
XCOPRI.....	9	<i>zileuton</i>	49
XDEMVI	48	<i>ziprasidone hcl</i>	17
		ZIRGAN.....	34

Kaiser Permanente, a State Employee Health Benefit Formulary

ZITUVIO	21	ZORVOLEX	28
ZOKINVY	38	ZORYVE	53, 54
ZOLINZA	11	ZOVIRAX	33
<i>zolmitriptan</i>	29	ZTALMY	9
<i>zolpidem tartrate</i>	30, 32, 54	ZURZUVAE	32
ZONEGRAN	9	ZYDELIG	14
<i>zonisamide</i>	28	ZYKADIA	14
ZONTIVITY	20	ZYLET	35
ZORTRESS	15	ZYTIGA	12

NONDISCRIMINATION NOTICE

Kaiser Foundation Health Plan of Georgia, Inc. (Kaiser Health Plan) complies with applicable Federal civil rights laws and does not discriminate on the basis of race, color, national origin, age, disability, or sex. Kaiser Health Plan does not exclude people or treat them differently because of race, color, national origin, age, disability, or sex. We also:

- Provide no cost aids and services to people with disabilities to communicate effectively with us, such as:
 - Qualified sign language interpreters
 - Written information in other formats, such as large print, audio, and accessible electronic formats
- Provide no cost language services to people whose primary language is not English, such as:
 - Qualified interpreters
 - Information written in other languages

If you need these services, call **1-888-865-5813** (TTY: **711**)

If you believe that Kaiser Health Plan has failed to provide these services or discriminated in another way on the basis of race, color, national origin, age, disability, or sex, you can file a grievance by mail at: Member Relations Unit (MRU), Attn: Kaiser Civil Rights Coordinator, Nine Piedmont Center, 3495 Piedmont Road, NE Atlanta, GA 30305-1736. Telephone Number: 1-888-865-5813.

You can also file a civil rights complaint with the U.S. Department of Health and Human Services, Office for Civil Rights electronically through the Office for Civil Rights Complaint Portal, available at <https://ocrportal.hhs.gov/ocr/portal/lobby.jsf>, or by mail or phone at: U.S. Department of Health and Human Services, 200 Independence Avenue SW., Room 509F, HHH Building, Washington, DC 20201, 1-800-368-1019, 1-800-537-7697 (TDD). Complaint forms are available at <http://www.hhs.gov/ocr/office/file/index.html>.

HELP IN YOUR LANGUAGE

ATTENTION: If you speak English, language assistance services, free of charge, are available to you. Call **1-888-865-5813** (TTY: **711**).

አማርኛ (Amharic) ማስታወሻ: የሚናገሩት ቋንቋ አማርኛ ከሆነ የትርጉም እርዳታ ድርጅቶች፣ በነጻ ሊያግዝዎት ተዘጋጅተዋል። ወደ ሚከተለው ቁጥር ይደውሉ **1-888-865-5813** (TTY: **711**)።

العربية (Arabic) ملحوظة: إذا كنت تتحدث العربية، فإن خدمات المساعدة اللغوية تتوافر لك بالمجان. اتصل برقم **1-888-865-5813** (TTY: **711**)።

中文 (Chinese) 注意: 如果您使用繁體中文，您可以免費獲得語言援助服務。請致電 **1-888-865-5813** (TTY: **711**)።

فارسی (Farsi) توجه: اگر به زبان فارسی گفتگو می کنید، تسهیلات زبانی بصورت رایگان برای شما فراهم می باشد. با **1-888-865-5813** (TTY: **711**) تماس بگیرید.

Français (French) ATTENTION: Si vous parlez français, des services d'aide linguistique vous sont proposés gratuitement. Appelez le **1-888-865-5813** (TTY: **711**).

Deutsch (German) ACHTUNG: Wenn Sie Deutsch sprechen, stehen Ihnen kostenlos sprachliche Hilfsdienstleistungen zur Verfügung.
Rufnummer: **1-888-865-5813** (TTY: **711**).

ગુજરાતી (Gujarati) સુચના: જો તમે ગુજરાતી બોલતા હો, તો નિ:શુલ્ક ભાષા સહાય સેવાઓ તમારા માટે ઉપલબ્ધ છે.
ફોન કરો **1-888-865-5813** (TTY: **711**).

Kreyòl Ayisyen (Haitian Creole) ATANSYON: Si w pale Kreyòl Ayisyen, gen sèvis èd pou lang ki disponib gratis pou ou. Rele **1-888-865-5813** (TTY: **711**).

हिन्दी (Hindi) ध्यान दें: यदि आप हिंदी बोलते हैं तो आपके लिए मुफ्त में भाषा सहायता सेवाएं उपलब्ध हैं। **1-888-865-5813** (TTY: **711**) पर कॉल करें।

日本語 (Japanese) 注意事項: 日本語を話される場合、無料の言語支援をご利用いただけます。 **1-888-865-5813** (TTY: **711**) まで、お電話にてご連絡ください。

한국어 (Korean) 주의: 한국어를 사용하시는 경우, 언어 지원 서비스를 무료로 이용하실 수 있습니다. **1-888-865-5813** (TTY: **711**) 번으로 전화해 주십시오.

Naabeehó (Navajo) Díí baa akó nínízin: Díí saad bee yáníłti'go Diné Bizaad, saad bee áká'ánída'áwo'déé', t'áá jiik'eh, éí ná hóló, koji' hódííłnih **1-888-865-5813** (TTY: **711**).

Português (Portuguese) ATENÇÃO: Se fala português, encontram-se disponíveis serviços linguísticos, grátis. Ligue para **1-888-865-5813** (TTY: **711**).

Русский (Russian) ВНИМАНИЕ: если вы говорите на русском языке, то вам доступны бесплатные услуги перевода. Звоните **1-888-865-5813** (TTY: **711**).

Español (Spanish) ATENCIÓN: si habla español, tiene a su disposición servicios gratuitos de asistencia lingüística. Llame al **1-888-865-5813** (TTY: **711**).

Tagalog (Tagalog) PAUNAWA: Kung nagsasalita ka ng Tagalog, maaari kang gumamit ng mga serbisyo ng tulong sa wika nang walang bayad.
Tumawag sa **1-888-865-5813** (TTY: **711**).

Tiếng Việt (Vietnamese) CHÚ Ý: Nếu bạn nói Tiếng Việt, có các dịch vụ hỗ trợ ngôn ngữ miễn phí dành cho bạn. Gọi số **1-888-865-5813** (TTY: **711**).