

Effective July 2024

2024 Drug Formulary

For members covered through large employer groups with a 3-tier in-network pharmacy benefit or members with an out-of-network pharmacy benefit

Access PPO

Alliance

Alliant Plus

Core

Elect PPO

Omni PPO

Options PPO

Drug Formulary

INTRODUCTION



What is a formulary?

A formulary is a list of generic, brand, and specialty drugs. It is used by practitioners to identify drugs that offer the best overall value, considering effectiveness, safety, and cost.

How is the drug formulary developed?

The formulary is developed by the Kaiser Permanente Pharmacy and Therapeutics (P&T) Committee. The P&T Committee is composed of physicians from various medical specialties, pharmacists, and a consumer member. The P&T Committee reviews and selects the most appropriate drugs in each class for the formulary based on safety, effectiveness, and cost.

The P&T Committee meets quarterly to review new and existing drugs to ensure that the formulary remains responsive to the needs of members and providers.

How do I search the formulary?

Drugs on the formulary are listed by therapeutic class. An alphabetical index is included at the end of this document to assist in locating specific drugs.

Drugs are listed by generic name if a generic is available. If there is no generic available, drugs are listed by the brand name. Drugs are organized by class and drug formulary tier. Drugs administered in a provider's office or in a clinic (e.g., drugs given intravenously) may not be listed on the formulary. For coverage of these drugs, refer to your Benefit Booklet.

How do I use the formulary to understand my drug coverage?

Drug coverage is based on an individual's contracted benefit. Coverage for a specific drug is subject to each member's medical coverage agreement. Please consult your Benefit Booklet or call Member Service if you have questions about your drug coverage.

Kaiser Permanente will only cover FDA-approved drugs used for non-experimental therapies. Most plans exclude experimental and investigational drugs, over-the-counter drugs, drugs used in the treatment of sexual dysfunction disorders, drugs for anticipated illnesses while traveling, drugs for weight loss, and drugs used for cosmetic purposes. Please consult your Benefit Booklet for limitations and exclusions, and plan specific benefit coverage.

Medications not listed in this document are not on the formulary at the time of publication. The most current information is online at www.kp.org/wa/formulary. Non-formulary drugs are not covered unless approved by the health plan as a coverage exception. The prescriber must contact Kaiser Permanente to determine the medical necessity of the non-formulary medication. An alternative formulary medication will be recommended when clinically appropriate. If a coverage exception is not approved, the patient is responsible for the full price of the drug.

Prior authorization and step therapy requests are considered based on coverage criteria requirements approved by the P&T Committee. To request review of an exception to Kaiser Permanente requirements for coverage of prescription drugs, you or your prescriber may contact

Kaiser Permanente Member Services at 1-888-630-4636 and request an exception. If the evidence your prescriber provides meets medical necessity, an exception may be approved. Exceptions to required therapy that may be approved include: contraindications, clinical factors associated with adverse reactions, clinical factors reducing effect, other risks of clinical harm, and barriers to compliance with clinical care. Your prescriber may also request temporary coverage while the exception request is being processed.

Generic drugs are substituted when available and allowed by your prescriber. When a generic is available, the brand-name drug is generally considered non-formulary and subject to a higher cost share.

The drug formulary is updated periodically and is subject to change. If a drug will be removed from the formulary, members who filled the drug in the prior three months will be notified by letter of the upcoming change. A formulary change notice will also be posted on the member website at least 60 days prior to the effective date.

Drug Formulary Tiers

Tier	Description
Tier 1	Preferred generic
Tier 2	Preferred brand
Tier 3	Non-preferred

What are the methods that Kaiser Permanente uses to ensure appropriate and safe use of formulary drugs?

Prior Authorization (PA)

The P&T Committee determines that certain drugs should require prior authorization before they will be covered. These drugs most often have alternatives on the formulary, safety concerns, or a high potential for inappropriate use. To request coverage for prior authorization drugs, you or your prescriber must contact Kaiser Permanente. Drugs requiring prior authorization are indicated with a “PA” superscript next to the drug name.

Step Therapy (ST)

Step therapy requires you to try certain preferred drugs before receiving coverage for the drug you were prescribed. Step therapy is added by the P&T Committee. Step therapy automatically looks at your prescription history when you fill the drug you were prescribed. If you have tried the preferred drugs required by step therapy, the drug you were prescribed will automatically be covered. To request step therapy exceptions, you or your prescriber must contact Kaiser Permanente. Drugs requiring step therapy are indicated with a “ST” superscript next to the drug name.

Quantity Limit (QL)

A quantity limit defines how much of a particular drug you can get during a specific time period or the maximum days supply that you can get at once. The P&T Committee determines if a drug should have a quantity limit. To request exceptions to quantity limits, your prescriber must contact Kaiser Permanente. Drugs with quantity limits are indicated with “QL” superscript next to the drug name.

High Dose Pain Medicine Prescriber Review

Members on high doses of certain pain medicines will need their prescriber to confirm safety standards are in place annually to continue coverage of therapy.

Drugs Limited to Select Pharmacies

Some drugs are required to be dispensed from a preferred specialty pharmacy vendor. Members with an out-of-network benefit may use other pharmacies; however, they may pay a higher cost share.

Please consult your Benefit Booklet for limitations and exclusions. Drugs limited to select pharmacies are listed on the www.kp.org/wa/formulary webpage.

Covered Diabetic Supplies

Some diabetic supplies may be covered at a Tier 1 cost share if they are filled as a prescription. These items are:

- Preferred blood glucose strips:
 - One Touch Verio
 - One Touch Ultra
 - Prodigy – prior authorization required
 - Contour Next – prior authorization required
 - Freestyle – prior authorization required
- Disposable insulin syringes and needles
- Lancing devices and lancets

Preferred blood glucose meters are covered only when filled through mail order pharmacy.

Mail Order Pharmacy Service

Mail order is convenient and efficiently utilizes Kaiser Permanente's resources. This service works best for drugs that must be taken on regular basis, such as birth control pills and drugs for high blood pressure, high cholesterol, or other chronic conditions.

To begin using mail order, ask your prescriber to send your prescription directly to the Mail Order Pharmacy. To transfer an existing prescription from a retail pharmacy, contact the Mail Order Pharmacy.

Address: Kaiser Permanente Mail Order Pharmacy
PO Box 34383
Seattle, WA 98124-1383

Phone: 800-245-RXRX (1-800-245-7979)

Fax: 206-630-7950, or toll-free 1-800-350-1683

Over-the-Counter (OTC) Drugs

A few plans offer coverage for OTC drugs. For these plans, a list of covered OTC drugs can be found in *Appendix A*. You may contact Member Service at 1-888-630-4636 to find if you have OTC drug coverage.

Preventative Medications and Preferred Contraceptives

In accordance with the Affordable Care Act (ACA) requirements for preventive services, most plans cover preventative care medicines and contraceptives in full. If your plan offers ACA benefits, all prescribed FDA approved contraceptive methods from the Kaiser Permanente

formulary list will be covered in full when obtained in-network. For plans with out-of-network (OON) benefits, contraceptives will be subject to the OON cost-share. The list of the preventative medications covered in full is available on the www.kp.org/wa/formulary webpage.

Please consult your Benefit Booklet under “Preventive Services” or call Member Service if you have questions about your coverage for these drugs.

If you request coverage for a non-preferred contraceptive, we will contact your provider to recommend a preferred generic or therapeutically equivalent product. If you and your provider determine that the preferred contraceptive(s) would be medically inappropriate, your provider must request a contraceptive waiver. If waiver is completed, the requested non-preferred contraceptive will be covered in full.

Excluded Prescription Products for Medications that have Over-The-Counter (OTC) Alternatives

There are certain prescription products that have the same or similar products available over-the- counter (OTC) without a prescription. In certain cases, Kaiser Permanente will not cover the prescription product. The following prescription drug products are excluded from coverage: esomeprazole magnesium (Nexium), omeprazole/sodium bicarbonate (Zegerid), budesonide nasal spray (Rhinocort Aqua), triamcinolone nasal spray (Nasacort), and fluticasone propionate nasal spray (Flonase).

Medical Benefit Injectable Drugs

Some drugs are given in a non-hospital setting such as home infusion, a medical office, a physician's office, or an infusion suite. These drugs are covered under the medical benefit but may require prior authorization or a non-hospital setting. The list of medical benefit injectable drugs is available on the www.kp.org/wa/formulary webpage.

How do I get additional information?

Please contact Member Service at 1-888-630-4636 with any questions or concerns regarding the information contained in this document.

The most current drug formulary is available at www.kp.org/wa/formulary.

Kaiser Foundation Health Plan of Washington

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Drug Name	Drug Tier	Notes	Drug Name	Drug Tier	Notes
Analgesics - Drugs for Pain and Inflammation			ibuprofen-famotidine	3	PA; QL
			INDOCIN	3	
ANAPROX DS	3		indomethacin er	1	
ARTHROTEC	3		indomethacin oral capsule	1	
CELEBREX	3		indomethacin oral suspension	3	
celecoxib oral	1		indomethacin rectal suppository 50 mg	3	
COXANTO	3	PA; QL	ketoprofen er	3	
DAYPRO	3		ketoprofen oral	3	
DICLOFENAC PATCH 1.3%	3		ketorolac tromethamine injection solution 15 mg/ml	1	
diclofenac potassium oral capsule	3	PA	KETOROLAC TROMETHAMINE INTRAMUSCULAR SOLUTION 30 MG/ML	3	
diclofenac potassium oral tablet 25 mg	3	PA; QL	diclofenac sodium er	1	
diclofenac potassium oral tablet 50 mg	1		diclofenac sodium external gel 1 %	1	
diclofenac sodium external solution 1.5 %	3		diclofenac sodium external solution 2 %	3	
diclofenac sodium oral	1		diclofenac-misoprostol	3	
DICLOFONO	3		DIFLUNISAL	3	
diflunisal oral	1		DUEXIS	3	
EC-NAPROSYN	3		EC-NAPROSYN	3	
ec-naproxen	3		ELYXYB	3	PA; QL
etodolac	1		etodolac	1	
etodolac er	3		fenoprofen calcium oral	3	
FLECTOR	3		flurbiprofen oral	1	
ibuprofen oral suspension 100 mg/5ml	3		ibuprofen oral suspension 100 mg/5ml	3	
ibuprofen oral tablet 400 mg, 600 mg, 800 mg	1		lodine	3	
			LOFENA	3	PA; QL
			meclofenamate sodium oral	1	
			mefenamic acid oral	3	
			meloxicam oral capsule	3	
			MELOXICAM ORAL SUSPENSION	3	
			meloxicam oral tablet	1	
			nabumetone oral	1	
			NALFON	3	

Drug Name	Drug Tier	Notes	Drug Name	Drug Tier	Notes
NAPRELAN ORAL TABLET EXTENDED RELEASE 24 HOUR 375 MG, 500 MG	3		BELBUCA	3	PA; QL
			BENZHYDROCODONE-ACETAMINOPHEN	3	QL
			BUPAP	3	
NAPRELAN ORAL TABLET EXTENDED RELEASE 24 HOUR 750 MG	3	PA	buprenorphine	3	PA; QL
			butalbital-acetaminophen capsule 50-300 mg oral	3	
NAPROSYN	3		BUTALBITAL-ACETAMINOPHEN CAPSULE 50-300 MG ORAL	3	
naproxen dr	3				
naproxen oral suspension	1				
naproxen oral tablet	1		butalbital-acetaminophen oral tablet	3	
naproxen oral tablet delayed release	3		butalbital-apap-caff-cod	3	QL
naproxen sodium er	3		butalbital-apap-caffeine oral capsule	3	
naproxen sodium oral tablet 275 mg, 550 mg	1		butalbital-apap-caffeine oral tablet	1	
naproxen-esomeprazole mg	3	PA; QL	butalbital-asa-caff-codeine	3	QL
OXaprozin ORAL CAPSULE	3	PA; QL	butalbital-aspirin-caffeine	1	
oxaprozin oral tablet	3		butorphanol tartrate nasal	3	QL
PENNSAID	3	PA	BUTTRANS	3	PA; QL
piroxicam oral	1		codeine sulfate	1	QL
RELAFEN DS	3	PA	CONZIP	3	PA; QL
salsalate oral	1		DILAUDID ORAL	3	QL
SPRIX	3		endocet	1	QL
sulindac oral	1		ESGIC	3	
TOLECTIN 600	3		fentanyl citrate buccal lozenge on a handle	3	PA; QL
tolmetin sodium	1		FENTANYL CITRATE BUCCAL TABLET	3	PA; QL
VIMOVO	3	PA; QL			
ZIPSOR	3	PA	fentanyl transdermal patch 72 hour 100 mcg/hr, 12 mcg/hr, 25 mcg/hr, 50 mcg/hr, 75 mcg/hr	1	PA; QL
ZYNRELEF	3				
Analgesics - Drugs for Pain					
acetaminophen-codeine	1	QL			
ALLZITAL	3		fentanyl transdermal patch 72 hour 37.5 mcg/hr, 62.5 mcg/hr, 87.5 mcg/hr	3	PA; QL
APADAZ	3	QL			
apap-caff-dihydrocodeine	3	QL			
ascomp-codeine	3	QL	FENTORA	3	PA; QL
bac	1		FIORICET	3	

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Drug Name	Drug Tier	Notes	Drug Name	Drug Tier	Notes
FIORICET/CODEINE	3	QL	OXYCODONE HCL ER	2	ST; QL
hydrocodone bitartrate er	3	PA; QL	oxycodone hcl oral capsule	3	QL
hydrocodone-acetaminophen oral solution	1	QL	oxycodone hcl oral concentrate	1	QL
hydrocodone-acetaminophen oral tablet 10-300 mg, 5-300 mg, 7.5-300 mg	3	QL	oxycodone hcl oral solution	1	QL
hydrocodone-acetaminophen oral tablet 10-325 mg, 5-325 mg, 7.5-325 mg	1	QL	oxycodone hcl oral tablet	1	QL
hydrocodone-ibuprofen	3	QL	OXYCODONE-ACETAMINOPHEN ORAL SOLUTION 10-300 MG/5ML	3	PA; QL
hydromorphone hcl er	3	PA; QL	OXYCODONE-ACETAMINOPHEN ORAL SOLUTION 5-325 MG/5ML	2	QL
hydromorphone hcl oral	1	QL	OXYCODONE-ACETAMINOPHEN ORAL TABLET 10-300 MG, 2.5-300 MG, 5-300 MG, 7.5-300 MG	3	QL
hydromorphone hcl rectal	1	QL	meperidine hcl oral tablet	3	
HYSINGLA ER	3	PA; QL	methadone hcl intensol	1	
levorphanol tartrate oral	1	PA; QL	methadone hcl oral	1	
meperidine hcl oral tablet	3	QL	METHADOSE ORAL CONCENTRATE 10 MG/ML	3	
methadose hcl intensol	1	QL	methadose oral tablet soluble	1	
methadone hcl oral	1	QL	METHADOSE SUGAR-FREE	3	
METHADOSE ORAL CONCENTRATE 10 MG/ML	3	QL	morphine sulfate (concentrate)	1	
methadose oral tablet soluble	1	QL	morphine sulfate er beads	3	
METHADOSE SUGAR-FREE	3	QL	morphine sulfate er oral capsule extended release 24 hour	3	
morphine sulfate (concentrate)	1	QL	morphine sulfate er oral tablet extended release	1	
morphine sulfate er oral capsule extended release 24 hour	3	PA; QL	morphine sulfate oral	1	
morphine sulfate er oral tablet extended release	1	ST; QL	morphine sulfate rectal	1	
morphine sulfate oral	1	QL	MS CONTIN	3	
morphine sulfate rectal	1	QL	NALOCET	3	
MS CONTIN	3	ST; QL	NUCYNTA	3	
NALOCET	3	QL	NUCYNTA ER	3	
NUCYNTA	3	PA; QL	NUCYNTA ER	3	PA; QL

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Drug Name	Drug Tier	Notes	Drug Name	Drug Tier	Notes
tramadol hcl (er biphasic) oral tablet extended release 24 hour	3	PA; QL	lidocaine hcl external cream 3 %	3	
tramadol hcl er	3	PA; QL	LIDOCAINE HCL EXTERNAL CREAM 4.12 %	3	
TRAMADOL HCL ORAL SOLUTION	3	PA; QL	lidocaine hcl external lotion	3	PA
tramadol hcl oral tablet 100 mg, 50 mg	1	QL	lidocaine hcl external solution	3	
tramadol hcl oral tablet 25 mg	3	PA; QL	lidocaine hcl injection solution 0.5 %	1	
tramadol-acetaminophen	1	QL	LIDOCAINE HCL INJECTION SOLUTION PREFILLED SYRINGE 10 MG/ML, 100 MG/5ML, 200 MG/10ML	3	
Anesthetics					
AGONEAZE	3		LIDOCAINE HCL SOLUTION 1 % INJECTION	3	
ANODYNE LPT	3		lidocaine hcl solution 1 % injection	1	
ASTERO	3		LIDOCAINE HCL SOLUTION 2 % INJECTION	3	
BRUSELIX EXTERNAL CREAM	3		lidocaine hcl solution 2 % injection	1	
COCAINE HCL NASAL	3		lidocaine hcl urethral/mucosal	1	
CRYODOSE TA	3		lidocaine-epinephrine solution 1 %-1:100000 injection	3	
DERMACINRX LIDOGEL	3		LIDOCAINE-EPINEPHRINE SOLUTION 1 %-1:100000 INJECTION	3	
EHA	3		lidocaine-prilocaine	1	
ethyl chloride	3		LIDOCAN	3	
GEBAUERS PAIN EASE	3		LIDODERM	3	
GEBAUERS SPRAY AND STRETCH	3		LIDOMAR	3	
glydo	1		lidopin external cream 3 %	3	
GOPRELTO	3		LIDOREX	3	
LDO PLUS	3		LIDORX	3	PA
LEVATIO	3		LIDO-SORB	3	PA
LIDO BDK	3				
lidocaine external ointment 5 %	3				
lidocaine external patch 5 %	1				
lidocaine hcl (pf) injection solution 0.5 %, 1.5 %	3				
lidocaine hcl (pf) injection solution 1 %, 2 %	1				

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Drug Name	Drug Tier	Notes	Drug Name	Drug Tier	Notes
LIDOTHOL EXTERNAL PATCH	3		goodsense nicotine mouth/throat gum 2 mg	2	
LIDOTRAL EXTERNAL CREAM	3		goodsense nicotine mouth/throat lozenge 4 mg	2	
LIDOTRAN	3		habitrol	1	
LIVIXIL PAK	3		KLOXXADO	3	
LYDEXA	3		LUCEMYRA	3	PA; QL
premium lidocaine	3		naloxone hcl injection	1	
PRILOVIX	3		naloxone hcl nasal	1	
PRILOVIX LITE	3		naltrexone hcl oral	1	
PRILOVIX LITE PLUS	3		NARCAN	2	
PRILOVIX PLUS	3		NICORETTE MINI MOUTH/THROAT LOZENGE 2 MG	2	
prilovix ultralite	1		NICORETTE MOUTH/THROAT GUM 2 MG	2	
prilovix ultralite plus	1		NICORETTE MOUTH/THROAT LOZENGE	2	
PROXIVOL	3		nicotine mini	2	
RELADOR PAK	3		nicotine polacrilex mini	2	
RELADOR PAK PLUS	3		nicotine polacrilex mouth/throat	2	
SOOTHEE	3		nicotine step 1	1	
XYLOCAINE	3		nicotine step 2	1	
XYLOCAINE/EPINEPHRINE INJECTION SOLUTION 1 %-1:100000	3		nicotine step 3	1	
XYLOCAINE-MPF	3		nicotine transdermal kit	1	
ZERUVIA	3		nicotine transdermal patch 24 hour 21 mg/24hr	1	
ZIONODIL	3	PA	OPVEE	3	PA
ZIONODIL 100	3	PA	REXTOVY	3	
ZTLIDO	3		SUBOXONE	3	QL
Anti-Addiction / Substance Abuse Treatment Agents			varenicline tartrate	1	
acamprosate calcium	1		varenicline tartrate (starter)	1	
buprenorphine hcl sublingual	1	QL	varenicline tartrate(continue)	1	
buprenorphine hcl-naloxone hcl	1	QL	VIVITROL	2	QL
bupropion hcl er (smoking det)	1		ZIMHI	3	
disulfiram oral	1				
ft nicotine	2				
ft nicotine mini	2				

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Drug Name	Drug Tier	Notes	Drug Name	Drug Tier	Notes
ZUBSOLV	3	QL	cefuroxime axetil	1	
Antibacterials			cephalexin oral capsule 250 mg, 500 mg	1	
AEMCOLO	3	PA	cephalexin oral capsule 750 mg	3	
amoxicillin	1		cephalexin oral suspension reconstituted	1	
amoxicillin-potassium clavulanate	1		cephalexin oral tablet	3	
amoxicillin-potassium clavulanate er	3		CIPRO	3	
ampicillin	1		ciprofloxacin hcl oral	1	
ampicillin sodium injection solution reconstituted 1 gm, 125 mg, 250 mg, 500 mg	1		clarithromycin er	3	
ARIKAYCE	3		clarithromycin oral	1	
AUGMENTIN	3		CLEOCIN	3	
AUGMENTIN ES-600	3		CLEOCIN PHOSPHATE INJECTION SOLUTION 300 MG/2ML	3	
avidoxy	1		clindamycin hcl oral	1	
azithromycin oral	1		clindamycin palmitate hcl	1	
BACTRIM	3		clindamycin phosphate vaginal	1	
BACTRIM DS	3		CLINDESSE	3	
BAXDELA ORAL	3	QL	colistimethate sodium (cba)	3	
BICILLIN L-A	2		COLY-MYCIN M	3	
cefaclor	3		demeclacycline hcl	3	
cefaclor er	3		dicloxacillin sodium	1	
cefadroxil	1		DIFICID	3	PA; QL
cefazolin sodium injection solution reconstituted 1 gm	1		DORYX MPC ORAL TABLET DELAYED RELEASE 120 MG	3	
cefdinir	1		DORYX MPC ORAL TABLET DELAYED RELEASE 60 MG	3	PA; QL
cefpemide hcl injection	3		doxycycline hyclate oral capsule	1	
cefixime	1		doxycycline hyclate oral tablet	1	
cefpodoxime proxetil	3		doxycycline hyclate oral tablet delayed release 100 mg, 150 mg, 200 mg, 50 mg, 75 mg	3	
cefprozil	1				
ceftazidime injection solution reconstituted 1 gm	1				
ceftriaxone sodium injection solution reconstituted 1 gm, 2 gm, 250 mg, 500 mg	1				

Drug Name	Drug Tier	Notes	Drug Name	Drug Tier	Notes
DOXYCYCLINE HYCLATE ORAL TABLET DELAYED RELEASE 80 MG	3		mafenide acetate external	3	
doxycycline monohydrate oral capsule	1		methenamine hippurate	1	
doxycycline monohydrate oral suspension reconstituted	3		methenamine mandelate oral	3	
doxycycline monohydrate oral tablet	1		metronidazole oral capsule	3	
E.E.S. 400	3		metronidazole oral tablet	1	
E.E.S. GRANULES	3		metronidazole vaginal	1	
ERYPED 200	3		minocycline hcl er	3	PA
ERYPED 400	3		minocycline hcl oral capsule	1	
ERY-TAB	3		minocycline hcl oral tablet	3	
ERYTHROCIN STEARATE	3		MINOLIRA	3	PA
erythromycin base oral	3		monodoxine nl	1	
erythromycin ethylsuccinate oral suspension reconstituted	1		moxifloxacin hcl oral	1	
erythromycin ethylsuccinate oral tablet	3		mupirocin calcium	1	
erythromycin oral	3		mupirocin external	1	
FIRVANQ	2		neomycin sulfate oral	1	
FLAGYL	3		neomycin-polymyxin b gu	3	
fosfomycin tromethamine	3		nitrofurantoin macrocrystal	1	
gentamicin sulfate external	1		nitrofurantoin monohydrate macrocrystals	1	
HIPREX	3		nitrofurantoin oral suspension 25 mg/5ml	1	
HUMATIN	3		NITROFURANTOIN ORAL SUSPENSION 50 MG/5ML	3	PA; QL
levofloxacin oral	1		NUVESSA	3	
LIKMEZ	3	PA	NUZYRA ORAL	3	QL
LINCOCIN	3		ofloxacin oral	3	
lincomycin hcl injection	3		penicillin v potassium	1	
linezolid oral suspension reconstituted	1	QL	SEYSARA	3	PA; QL
linezolid oral tablet	1		SILVADENE	3	
MACROBID	3		silver nitrate external	3	
MACRODANTIN	3		silver sulfadiazine external	1	
			SIVEXTRO ORAL	2	QL
			SOLODYN	3	PA

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Drug Name	Drug Tier	Notes	Drug Name	Drug Tier	Notes
SOLOSEC	3		ELIQUIS DVT/PE STARTER PACK	3	PA
ssd	1		enoxaparin sodium	1	
streptomycin sulfate intramuscular	3		fondaparinux sodium	1	QL
sulfadiazine oral	3		FRAGMIN SUBCUTANEOUS SOLUTION 10000 UNIT/4ML	3	
sulfamethoxazole-trimethoprim oral	1		SULFAMYLYON	3	
sulfatrim pediatric	1		FRAGMIN SUBCUTANEOUS SOLUTION 95000 UNIT/3.8ML	3	PA
TARGADOX	3		tazicef injection	1	
tetracycline hcl oral capsule	3		FRAGMIN SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	3	
TETRACYCLINE HCL ORAL TABLET	3		heparin sodium (porcine) injection solution 1000 unit/ml, 10000 unit/ml, 5000 unit/ml	1	
tinidazole oral	3		VANCOCIN	3	PA; QL
trimethoprim oral	1		heparin sodium (porcine) pf	1	
vancomycin hcl oral capsule	1	QL	jantoven	1	
vancomycin hcl oral solution reconstituted	1		LOVENOX	1	
vandazole	1		PRADAXA ORAL CAPSULE	1	
VIBRAMYCIN	3		PRADAXA ORAL PACKET	3	PA; QL
XACIATO	3		REGIOCIT	3	
XEPI	3		SAVAYSA	3	PA
XIFAXAN	3	PA; QL	warfarin sodium oral	1	
ZITHROMAX ORAL	3		ZARELTO ORAL SUSPENSION RECONSTITUTED	3	PA; QL
ZITHROMAX TRI-PAK	3		ZYVOX ORAL SUSPENSION RECONSTITUTED	3	PA; QL
ZITHROMAX Z-PAK	3		ZYVOX ORAL TABLET	2	PA
ZYVOX ORAL SUSPENSION RECONSTITUTED	3	QL	ZARELTO STARTER PACK	2	PA
ZYVOX ORAL TABLET	3	PA			
Anticoagulants			Anticonvulsants - Drugs for Seizures		
ARIXTRA	3	PA; QL	APTIOM	3	PA; QL
dabigatran etexilate mesylate	1		BANZEL	3	QL
ELIQUIS	3	PA	BRIVIACT ORAL	3	PA; QL
			carbamazepine er	1	

Drug Name	Drug Tier	Notes	Drug Name	Drug Tier	Notes
carbamazepine oral	1		LAMICTAL ODT	3	PA
CARBATROL	3		LAMICTAL STARTER	3	PA
CELONTIN	3		LAMICTAL XR	3	PA
clobazam oral suspension	3	QL	lamotrigine er	3	
clobazam oral tablet	1		lamotrigine oral kit	3	
DEPAKOTE	3		lamotrigine oral tablet	1	
DEPAKOTE ER	3		lamotrigine oral tablet chewable	1	
DEPAKOTE SPRINKLES	3		lamotrigine oral tablet dispersible	3	
DIACOMIT	3	PA; QL	lamotrigine starter kit-blue	3	
diazepam rectal	1	QL	lamotrigine starter kit-green	3	
DILANTIN INFATABS	3		lamotrigine starter kit-orange	3	
DILANTIN ORAL CAPSULE 100 MG	3		levetiracetam er	1	
DILANTIN ORAL CAPSULE 30 MG	2		levetiracetam oral	1	
DILANTIN ORAL SUSPENSION	3		LIBERVANT	3	PA; QL
DILANTIN-125	3		methsuximide	2	
divalproex sodium er	1		MOTPOLY XR	3	PA; QL
divalproex sodium oral	1		MYSOLINE	3	PA; QL
ELEPSIA XR	3	PA; QL	NAYZILAM	2	PA; QL
EPIDIOLEX	3	PA; QL	NEURONTIN	3	
epitol	1		ONFI	3	PA; QL
EPRONTIA	3	PA	oxcarbazepine	1	
ethosuximide oral	1		OXTELLAR XR	3	
felbamate oral suspension	3		pentobarbital sodium injection	3	
felbamate oral tablet	3	QL	phenobarbital oral	1	
FELBATOL	3	PA; QL	phenobarbital sodium injection solution 130 mg/ml	1	
FINTEPLA	3	PA; QL	phenytek	3	
FYCOMPA	3	PA; QL	phenytoin infatabs	1	
gabapentin oral capsule	1		phenytoin oral	1	
gabapentin oral solution	1		phenytoin sodium extended oral capsule	1	
gabapentin oral tablet 600 mg, 800 mg	1		100 mg		
KEPPRA ORAL	3				
KEPPRA XR	3				
lacosamide oral	1				
LAMICTAL	3	PA			

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Drug Name	Drug Tier	Notes	Drug Name	Drug Tier	Notes
phenytoin sodium extended oral capsule 200 mg, 300 mg	3		XCOPRI ORAL TABLET 100 MG, 150 MG, 200 MG, 50 MG	3	PA; QL
phenytoin sodium injection	1		XCOPRI ORAL TABLET 25 MG	3	PA
primidone oral tablet 125 mg	3	PA	XCOPRI ORAL TABLET THERAPY PACK 100 & 150 MG, 14 X 12.5 MG & 14 X 25 MG, 14 X 150 MG & 14 X 200 MG, 14 X 50 MG & 14 X 100 MG,	3	PA; QL
primidone oral tablet 250 mg, 50 mg	1	QL	150 & 200 MG		
QUDEXY XR	3	PA			
roweepra	1		ZARONTIN	3	
rufinamide	3	QL	ZONEGRAN	3	
SABRIL	3	PA	ZONISADE	3	PA
SPRITAM	3		zonisamide oral	1	
subvenite	1		ZTALMY	3	PA; QL
subvenite starter kit-blue	3		Antidementia Agents - Drugs for Alzheimer's Disease and Dementia		
subvenite starter kit-green	3		ADLARITY	3	PA
subvenite starter kit-orange	3		ARICEPT	3	
SYMPAZAN	3	QL	donepezil hcl	1	
TEGRETOL	3		EXELON	3	
TEGRETOL-XR	3		galantamine hydrobromide	1	
tiagabine hcl	3		galantamine hydrobromide er	1	
TOPAMAX	3		memantine hcl er	3	PA
TOPAMAX SPRINKLE	3		memantine hcl oral solution	3	
topiramate er	3	PA	memantine hcl oral tablet 10 mg, 5 mg	1	
topiramate oral	1		memantine hcl oral tablet 28 x 5 mg & 21 x 10 mg	3	
TRILEPTAL	3		NAMENDA TITRATION PAK	3	
TROKENDI XR	3	PA	NAMENDA XR	3	PA
valproic acid oral	1		NAMZARIC	3	
VALTOCO	2	PA; QL	rivastigmine	3	
vigabatrin oral packet	3		rivastigmine tartrate	1	
vigabatrin oral tablet	3	PA	Antidepressants		
vigadronе oral packet	3		amitriptyline hcl oral	1	
vigadronе oral tablet	3	PA			
vigpoder	3				
VIMPAT ORAL	3				

Drug Name	Drug Tier	Notes	Drug Name	Drug Tier	Notes
amoxapine	1		escitalopram oxalate oral	1	
ANAFRANIL	3		FETZIMA	3	PA
APLENZIN	3		FETZIMA TITRATION	3	PA
AUVELITY	3	PA; QL	fluoxetine hcl (pmdd)	3	
bupropion hcl er (sr)	1		fluoxetine hcl oral capsule	1	
bupropion hcl er (xl) oral tablet extended release 24 hour 150 mg, 300 mg	1		fluoxetine hcl oral capsule delayed release	3	
BUPROPION HCL ER (XL) ORAL TABLET EXTENDED RELEASE 24 HOUR 450 MG	3	PA	fluoxetine hcl oral solution	1	
bupropion hcl oral	1		fluoxetine hcl oral tablet	3	
CELEXA	3		fluvoxamine maleate	1	
chlor diazepoxide-amitriptyline	3	QL	fluvoxamine maleate er	3	
CITALOPRAM HYDROBROMIDE ORAL CAPSULE	3	PA	FORFIVO XL	3	PA
citalopram hydrobromide oral solution	1		imipramine hcl oral	1	
citalopram hydrobromide oral tablet	1		imipramine pamoate	3	
clomipramine hcl oral	1		LEXAPRO	3	
CYMBALTA	3		LYBALVI	3	PA; QL
desipramine hcl oral	1		MARPLAN	3	
DESVENLAFAKINE ER (authorized generic Khdezla)	3	PA	mirtazapine oral	1	
desvenlafaxine succinate er	1		NARDIL	3	
doxepin hcl oral capsule	1		nefazodone hcl	3	
doxepin hcl oral concentrate	1		NORPRAMIN	3	
duloxetine hcl oral capsule delayed release particles 20 mg, 30 mg, 60 mg	1		nortriptyline hcl oral	1	
duloxetine hcl oral capsule delayed release particles 40 mg	3		olanzapine-fluoxetine hcl	3	
EFFEXOR XR	3		PAMELOR	3	
EMSAM	3		PARNATE	3	
			paroxetine hcl	1	
			paroxetine hcl er	1	
			paroxetine mesylate	3	
			PAXIL	3	
			PAXIL CR	3	
			perphenazine-amitriptyline	1	
			phenelzine sulfate oral	1	
			PRISTIQ	3	
			protriptyline hcl	1	
			PROZAC	3	
			REMERON	3	

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Drug Name	Drug Tier	Notes	Drug Name	Drug Tier	Notes
REMERON SOLTAB	3		compro	1	
SERTRALINE HCL ORAL CAPSULE	3		DICLEGIS	3	PA
sertraline hcl oral concentrate	1		dimenhydrinate injection	1	
sertraline hcl oral tablet	1		doxylamine-pyridoxine	3	PA
SPRAVATO (56 MG DOSE)	3	PA; QL	dronabinol	1	
SPRAVATO (84 MG DOSE)	3	PA; QL	EMEND ORAL	3	
SYMBYAX	3		EMEND TRI-PACK	3	
tranylcypromine sulfate	1		GIMOTI	3	PA
trazodone hcl oral	1		granisetron hcl oral	1	
trimipramine maleate oral	3		MARINOL	3	
TRINTELLIX	3	PA; QL	meclizine hcl oral tablet 12.5 mg, 25 mg	3	
VENLAFAKINE BESYLATE ER	3		metoclopramide hcl injection	1	
venlafaxine hcl	1		metoclopramide hcl oral solution	1	
venlafaxine hcl er oral capsule extended release 24 hour	1		metoclopramide hcl oral tablet dispersible	3	
venlafaxine hcl er oral tablet extended release 24 hour	3		ondansetron hcl injection	1	
VIIBRYD	3	PA	ondansetron hcl oral	1	
vilazodone hcl	3	PA	ondansetron odt	1	
WELLBUTRIN SR	3		perphenazine oral	1	
WELLBUTRIN XL	3		PHENERGAN	3	
ZOLOFT	3		prochlorperazine	1	
ZURZUVAE	3	PA; QL	prochlorperazine edisylate injection	1	
Antiemetics - Drugs for Nausea and Vomiting			prochlorperazine maleate oral	1	
AKYNZEO ORAL	3		promethazine hcl injection	3	
ANZEMET	3		promethazine hcl oral	1	
aprepitant oral	1		promethazine hcl rectal	1	
aprepitant oral capsule 125 mg, 80 & 125 mg, 80 mg	1		promethegan	1	
aprepitant oral capsule 40 mg	3		REGLAN	3	
BONJESTA	3	PA	SANCUSO	3	PA
			scopolamine	3	
			SYNDROS	3	
			TIGAN	3	PA

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Drug Name	Drug Tier	Notes	Drug Name	Drug Tier	Notes
TRANSDERM-SCOP	3		ketoconazole oral	1	
trimethobenzamide hcl oral	3	PA	ketodan	3	
VARUBI (180 MG DOSE)	3	PA; QL	klayesta	1	
Antifungals			LULICONAZOLE	3	
ANCOBON	3	PA; QL	LUZU	3	
BREXAFEMME	3	PA	miconazole 3	3	
ciclodan	1		MICONAZOLE-ZINC OXIDE-PETROLAT	3	
ciclopirox external	1		naftifine hcl	3	
ciclopirox olamine external	1		NAFTIN	3	
clotrimazole external	3		NOXAFL ORAL PACKET	3	
clotrimazole mouth/throat	1		NOXAFL ORAL SUSPENSION	3	PA; QL
clotrimazole-betamethasone	1		NOXAFL ORAL TABLET DELAYED RELEASE	3	PA
CRESEMBA ORAL	2	PA; QL	nyamyc	1	
DIFLUCAN ORAL SUSPENSION RECONSTITUTED	3		nystatin external	1	
DIFLUCAN ORAL TABLET 100 MG, 200 MG	3		nystatin mouth/throat	1	
econazole nitrate external	3		nystatin oral	1	
ECOZA	3		nystatin-triamcinolone	1	
ERTACZO	3		nystop	1	
EXELDERM	3		ORAVIG	3	
exoderm	3		oxiconazole nitrate	3	
fluconazole oral	1		OXISTAT	3	
flucytosine oral	2	QL	posaconazole oral suspension	3	PA; QL
griseofulvin microsize oral	1		posaconazole oral tablet delayed release	3	PA
griseofulvin ultramicrosize	1		SPORANOX	3	PA
GYNIAZOLE-1	3		tavaborole	3	PA
itraconazole oral	1	PA	terbinafine hcl oral	1	
JUBLIA	3	PA	terconazole vaginal cream	1	
ketoconazole external cream	1		terconazole vaginal suppository	3	
ketoconazole external foam	3		TOLSURA	3	PA
ketoconazole external shampoo	1		VFEND	3	PA
			VIVJOA	3	PA; QL
			voriconazole oral	1	PA

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Drug Name	Drug Tier	Notes	Drug Name	Drug Tier	Notes
VUSION	3		IMITREX	3	
Antigout Agents			IMITREX STATDOSE REFILL	3	
allopurinol oral tablet 100 mg, 300 mg	1		IMITREX STATDOSE SYSTEM	3	
ALLOPURINOL ORAL TABLET 200 MG	3	PA	MAXALT	3	
colchicine oral	1		MAXALT-MLT	3	
colchicine-probenecid	1		MIGERGOT	2	
febuxostat	1		MIGRANAL	3	PA
GLOPERBA	3		naratriptan hcl	1	
MITIGARE	3		NURTEC	3	PA; QL
probenecid	1		QULIPTA	3	PA; QL
ULORIC	3		RELPAX	3	
Antimigraine Agents			REYVOW	3	PA; QL
AIMOVIG SUBCUTANEOUS SOLUTION AUTO-INJECTOR 140 MG/ML, 70 MG/ML	3	PA	rizatriptan benzoate	1	
AJOVY	3	PA	sumatriptan nasal	1	
almotriptan malate	3	PA	sumatriptan succinate oral	1	
CAMBIA	3	PA	sumatriptan succinate subcutaneous	1	
diclofenac potassium(migraine)	3	PA	sumatriptan-naproxen sodium	3	PA
dihydroergotamine mesylate injection	1	QL	TOSYMRA	3	
dihydroergotamine mesylate nasal	1		TREXIMET	3	PA
eletriptan hydrobromide	3		TRUDHESA	3	PA
EMGALITY SUBCUTANEOUS SOLUTION AUTO-INJECTOR 120 MG/ML	3	PA	UBRELVY	3	PA; QL
ZAVZPRET			ZAVZPRET	3	PA; QL
ZEMBRACE SYMTOUCH			ZEMBRACE SYMTOUCH	3	
zolmitriptan nasal			zolmitriptan nasal	3	
EMGALITY SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 100 MG/ML, 120 MG/ML	3	PA; QL	zolmitriptan oral	1	
ZOMIG NASAL			ZOMIG NASAL	3	
Antimyasthenic Agents			MESTINON ORAL SOLUTION	2	
ERGOMAR	2		MESTINON ORAL TABLET	3	
ergotamine-caffeine	1				
FROVA	3	PA			
frovatriptan succinate	3	PA			

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Drug Name	Drug Tier	Notes	Drug Name	Drug Tier	Notes
MESTINON ORAL TABLET EXTENDED RELEASE	3		BRUKINSA	2	PA; QL
pyridostigmine bromide er	1		CABOMETYX	3	PA; QL
pyridostigmine bromide oral	1		CALQUENCE	2	PA; QL
Antimycobacterials			capecitabine	1	QL
cycloserine oral	3		CAPRELSA	3	PA; QL
dapsone oral	1		CASODEX	3	
ethambutol hcl oral	1		COMETRIQ	3	PA; QL
isoniazid oral	1		COPIKTRA	3	PA; QL
MYAMBUTOL	3		COTELIC	2	PA; QL
MYCOBUTIN	3		cyclophosphamide oral capsule	1	
PRETOMANID	3		CYCLOPHOSPHAMIDE ORAL TABLET	3	
PRIFTIN	2		DAURISMO	3	PA; QL
pyrazinamide oral	1		DROXIA	2	
rifabutin	1		EMCYT	3	QL
rifampin oral	1		ERIVEDGE	3	PA
SIRTURO	3	PA; QL	ERLEADA	3	PA; QL
TRECATOR	3		erlotinib hcl	1	PA
Antineoplastics - Drugs for Cancer			etoposide oral	1	QL
abiraterone acetate	1	QL	EULEXIN	3	
AFINITOR	3	PA; QL	everolimus oral tablet 10 mg, 2.5 mg, 5 mg, 7.5 mg	1	PA; QL
AFINITOR DISPERZ	2	PA; QL	everolimus oral tablet soluble	1	PA; QL
AKEEGA	3	PA; QL	exemestane	1	
ALECensa	3	PA; QL	EXKIVITY	3	PA; QL
ALUNBRIG	3	PA; QL	FARESTON	3	PA
anastrozole oral	1		FEMARA	3	
ARIMIDEX	3		FOTIVDA	3	PA; QL
AROMASIN	3		FRUZAQLA	3	PA; QL
AUGTYRO	3	PA; QL	GAVRETO	3	PA; QL
AYVAKIT	3	PA; QL	gefitinib	2	PA; QL
BALVERSA	3	PA; QL	GILOTrif	2	PA; QL
BESREMI	3	PA; QL	GLEEVEC	3	PA; QL
bexarotene	3	PA; QL	GLEOSTINE	2	
bicalutamide	1		HYCAMTIN ORAL	3	QL
BOSULIF	3	PA; QL	HYDREA	3	
BRAFTOVI	3	PA; QL	hydroxyurea oral	1	

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Drug Name	Drug Tier	Notes	Drug Name	Drug Tier	Notes
IBRANCE	3	PA; QL	LORBRENA	3	PA; QL
ICLUSIG	3	PA; QL	LUMAKRAS	3	PA; QL
IDHIFA	3	PA; QL	LYNPARZA	3	PA; QL
imatinib mesylate	1	QL	LYSODREN	3	PA
IMBRUVICA ORAL CAPSULE	2	PA; QL	LYTGOBI (12 MG DAILY DOSE)	3	PA; QL
IMBRUVICA ORAL SUSPENSION	3	PA; QL	LYTGOBI (16 MG DAILY DOSE)	3	PA; QL
IMBRUVICA ORAL TABLET 140 MG, 420 MG	2	PA; QL	LYTGOBI (20 MG DAILY DOSE)	3	PA; QL
			MATULANE	2	QL
IMBRUVICA ORAL TABLET 280 MG	3	PA; QL	MEKINIST	2	PA; QL
INLYTA	3	PA; QL	MEKTOVI	3	PA; QL
INQOVI	3	PA; QL	mercaptopurine oral	1	
INREBIC	3	PA; QL	mesna	1	
IRESSA	3	PA; QL	MESNEX ORAL	2	
JAKAFI	3	PA; QL	MYLERAN	2	QL
JAYPIRCA	3	PA; QL	NERLYNX	3	PA; QL
KISQALI FEMARA	3	PA; QL	NEXAVAR	3	PA
KISQALI ORAL TABLET THERAPY PACK 200 MG	3	PA; QL	NILANDRON	3	PA
			nilutamide	3	PA
KOSELUGO	3	PA; QL	NINLARO	3	PA; QL
KRAZATI	3	PA; QL	NUBEQA	3	PA; QL
lapatinib ditosylate	1	PA; QL	ODOMZO	3	PA; QL
lenalidomide	1	PA; QL	OGSIVEO	3	PA; QL
LENVIMA ORAL CAPSULE THERAPY PACK 10 & 4 MG, 10 MG, 2 X 10 MG, 2 X 10 MG & 4 MG, 3 X 4 MG, 4 MG	3	PA; QL	OJEMDA	3	PA; QL
			OJJAARA	3	PA; QL
			ONUREG	3	PA; QL
			ORGOVYX	3	PA; QL
LENVIMA ORAL CAPSULE THERAPY PACK 10 MG & 2 X 4 MG, 2 X 4 MG	3	PA	ORSERDU	3	PA; QL
			PANRETIN	3	PA; QL
			pazopanib hcl	1	PA; QL
letrozole oral	1		PEMAZYRE	3	PA; QL
leucovorin calcium injection solution 100 mg/10ml	3		PIQRAY	3	PA; QL
			POMALYST	3	PA; QL
			PURIXAN	3	PA
leucovorin calcium oral	1		QINLOCK	3	PA; QL
LEUKERAN	2		RETEVMO	3	PA; QL
LONSURF	3	PA; QL	REVLIMID	2	PA; QL

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Drug Name	Drug Tier	Notes	Drug Name	Drug Tier	Notes
REZLIDHIA	3	PA; QL	VITRAKVI	3	PA; QL
ROZLYTREK	2	PA; QL	VIZIMPRO	3	PA; QL
RUBRACA	3	PA; QL	VONJO	3	PA; QL
RYDAPT	2	PA; QL	VOTRIENT	3	PA; QL
SCEMBLIX	3	PA; QL	WELIREG	3	PA; QL
SIKLOS	3	PA; QL	XALKORI	3	PA; QL
SOLTAMOX	3		XELODA	3	PA; QL
sorafenib tosylate	1	PA	XOSPATA	3	PA; QL
SPRYCEL	2	PA; QL	XPOVIO (100 MG ONCE WEEKLY)	3	PA; QL
STIVARGA	2	PA	XPOVIO (40 MG ONCE WEEKLY)	3	PA; QL
sunitinib malate	1	PA; QL	XPOVIO (40 MG TWICE WEEKLY)	3	PA; QL
SUTENT	3	PA; QL	XPOVIO (60 MG ONCE WEEKLY)	3	PA; QL
TABLOID	2		XPOVIO (60 MG TWICE WEEKLY)	3	PA; QL
TABRECTA	3	PA; QL	XPOVIO (80 MG ONCE WEEKLY)	3	PA; QL
TAFINLAR	2	PA; QL	XPOVIO (80 MG TWICE WEEKLY)	3	PA; QL
TAGRISSO	2	PA; QL	XPOVIO (60 MG TWICE WEEKLY)	3	PA; QL
TALZENNA	3	PA; QL	XPOVIO (80 MG ONCE WEEKLY)	3	PA; QL
tamoxifen citrate oral	1		XPOVIO (80 MG TWICE WEEKLY)	3	PA; QL
TARCEVA	3	PA	XPOVIO (80 MG TWICE WEEKLY)	3	PA; QL
TARGETIN	3	PA; QL	XTANDI ORAL CAPSULE	2	PA; QL
TASIGNA	3	PA; QL	XTANDI ORAL TABLET	3	PA; QL
TAZVERIK	3	PA; QL	YONSA	3	PA; QL
temozolomide	1	QL	ZEJULA	3	PA; QL
TEPMETKO	3	PA; QL	ZELBORAF	2	PA
THALOMID	2	PA; QL	ZOLINZA	3	PA; QL
TIBSOVO	3	PA; QL	ZYDELIG	2	PA; QL
toremifene citrate	3	PA	ZYKADIA	3	PA; QL
tretinoin oral	1	QL	ZYTIGA	3	PA; QL
TRUQAP	3	PA; QL	Antiparasitics		
TUKYSA	3	PA; QL	albendazole oral	1	
TURALIO	3	PA; QL	ALINIA ORAL SUSPENSION RECONSTITUTED	2	
TYKERB	3	PA; QL	ALINIA ORAL TABLET	3	
VALCHLOR	3	PA; QL	atovaquone	1	
VANFLYTA	3	PA; QL	BENZNIDAZOLE	3	QL
VENCLEXTA	2	PA; QL	BILTRICIDE	3	
VENCLEXTA STARTING PACK	2	PA; QL			
VERZENIO	3	PA; QL			
VIJOICE	3	PA; QL			

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Drug Name	Drug Tier	Notes	Drug Name	Drug Tier	Notes
chloroquine phosphate oral	1		bromocriptine mesylate oral	1	
COARTEM	3		carbidopa oral	1	
CROTAN	2		carbidopa-levodopa er	1	
DARAPRIM	3	PA; QL	carbidopa-levodopa oral tablet	1	
EMVERM	3		carbidopa-levodopa oral tablet dispersible 10-100 mg, 25-100 mg	1	
IMPAVIDO	3	PA; QL	carbidopa-levodopa oral tablet dispersible 25-250 mg		
ivermectin oral	3	PA	carbidopa-levodopa-entacapone	3	
KRINTAFEL	2		DHIVY	3	PA
LAMPIT	3		DUOPA	2	PA
malathion	3		entacapone	1	
MEPRON	3	PA	GOCOVRI	3	PA; QL
NATROBA	3		INBRIJA	3	PA; QL
NEBUPENT	3		LODOSYN	3	
nitazoxanide oral	2		MIRAPEX ER	3	
OVIDE	3		NEUPRO	3	
PENTAM	3		NOURIANZ	3	PA; QL
pentamidine isethionate	3		ONGENTYS	3	PA; QL
permethrin external	1		OSMOLEX ER	3	PA
PLAQUENIL	3		PARLODEL	3	
praziquantel oral	1		pramipexole dihydrochloride	1	
primaquine phosphate	1		pramipexole dihydrochloride er	3	
pyrimethamine oral	1	PA; QL	rasagiline mesylate oral	1	PA
QUALAQUIN	3		ropinirole hcl	1	
quinine sulfate	3		ropinirole hcl er	3	
SOVUNA	3		RYTARY	3	PA
spinosad	3		selegiline hcl oral	1	
STROMECTOL	3	PA	SINEMET	3	
Antiparkinson Agents			STALEVO 150	3	
amantadine hcl oral	1		TASMAR	3	PA; QL
APOKYN	3	PA; QL	tolcapone	3	QL
apomorphine hcl subcutaneous	3	PA; QL	trihexyphenidyl hcl	1	
AZILECT	3	PA			
benztropine mesylate	1				

Drug Name	Drug Tier	Notes	Drug Name	Drug Tier	Notes
XADAGO	3	PA	CLOZARIL	3	
ZELAPAR	3	QL	FANAPT	3	PA
Antiplatelets			FANAPT TITRATION PACK	3	PA
aspirin-dipyridamole er	1		fluphenazine decanoate injection	1	
BRILINTA	2		fluphenazine hcl	1	
CABLIVI	3	PA; QL	GEODON	3	
cilostazol	1		HALDOL DECANOATE	3	
clopidogrel bisulfate oral	1		haloperidol decanoate intramuscular	1	
dipyridamole oral	1		haloperidol lactate injection	1	
EFFIENT	3		haloperidol lactate oral concentrate 2 mg/ml	1	
PLAVIX	3		haloperidol oral	1	
prasugrel hcl	1		INVEGA	3	
YOSPRALA	3		INVEGA HAFYERA	2	
ZONTIVITY	3		INVEGA SUSTENNA	2	
Antipsychotics - Drugs for Mood Disorders			INVEGA TRINZA	2	QL
ABILIFY	3		LATUDA	3	PA
ABILIFY ASIMTUFI	2		loxapine succinate	1	
ABILIFY MAINTENA	2		Iurasidone hcl	1	
ABILIFY MYCITE MAINTENANCE KIT	3	PA; QL	molindone hcl	3	
ABILIFY MYCITE STARTER KIT	3	PA; QL	NUPLAZID	3	PA; QL
aripiprazole oral solution	1		olanzapine	1	
aripiprazole oral tablet	1		paliperidone er	1	
aripiprazole oral tablet dispersible	3		ARISTADA	2	
ARISTADA INITIO	2	QL	PERSERIS	2	
asenapine maleate	3	PA	pimozide	1	
CAPLYTA	3	PA; QL	quetiapine fumarate	1	
chlorpromazine hcl injection	1		quetiapine fumarate er	1	
chlorpromazine hcl oral concentrate	3		REXULTI	3	PA
chlorpromazine hcl oral tablet	1		RISPERDAL	3	
clozapine oral tablet	1		RISPERDAL CONSTA SUSPENSION RECONSTITUTED ER 12.5 MG INTRAMUSCULAR	1	
clozapine oral tablet dispersible	3				

Drug Name	Drug Tier	Notes	Drug Name	Drug Tier	Notes
RISPERDAL CONSTA SUSPENSION RECONSTITUTED ER 12.5 MG INTRAMUSCULAR	2		UZEDY	2	
RISPERDAL CONSTA SUSPENSION RECONSTITUTED ER 25 MG INTRAMUSCULAR	1		VERSACLOZ	3	
RISPERDAL CONSTA SUSPENSION RECONSTITUTED ER 25 MG INTRAMUSCULAR	2		VRAYLAR	3	PA; QL
RISPERDAL CONSTA SUSPENSION RECONSTITUTED ER 25 MG INTRAMUSCULAR	2		ziprasidone hcl	1	
RISPERDAL CONSTA SUSPENSION RECONSTITUTED ER 25 MG INTRAMUSCULAR	1		ziprasidone mesylate	3	
RISPERDAL CONSTA SUSPENSION RECONSTITUTED ER 25 MG INTRAMUSCULAR	1		ZYPREXA	3	
RISPERDAL CONSTA SUSPENSION RECONSTITUTED ER 25 MG INTRAMUSCULAR	1		ZYPREXA RELPREVV	2	
RISPERDAL CONSTA SUSPENSION RECONSTITUTED ER 25 MG INTRAMUSCULAR	2		ZYPREXA ZYDIS	3	
RISPERDAL CONSTA SUSPENSION RECONSTITUTED ER 37.5 MG INTRAMUSCULAR	1		Antivirals		
RISPERDAL CONSTA SUSPENSION RECONSTITUTED ER 37.5 MG INTRAMUSCULAR	1		abacavir sulfate	1	
RISPERDAL CONSTA SUSPENSION RECONSTITUTED ER 37.5 MG INTRAMUSCULAR	2		abacavir sulfate-lamivudine	1	
RISPERDAL CONSTA SUSPENSION RECONSTITUTED ER 37.5 MG INTRAMUSCULAR	2		acyclovir external cream	3	
RISPERDAL CONSTA SUSPENSION RECONSTITUTED ER 37.5 MG INTRAMUSCULAR	2		acyclovir external ointment	1	
RISPERDAL CONSTA SUSPENSION RECONSTITUTED ER 50 MG INTRAMUSCULAR	1		acyclovir oral	1	
RISPERDAL CONSTA SUSPENSION RECONSTITUTED ER 50 MG INTRAMUSCULAR	1		adefovir dipivoxil	1	QL
RISPERDAL CONSTA SUSPENSION RECONSTITUTED ER 50 MG INTRAMUSCULAR	2		APTIVUS	2	QL
RISPERDAL CONSTA SUSPENSION RECONSTITUTED ER 50 MG INTRAMUSCULAR	2		atazanavir sulfate	1	
RISPERDAL CONSTA SUSPENSION RECONSTITUTED ER 50 MG INTRAMUSCULAR	2		BARACLUE ORAL SOLUTION	2	QL
RISPERDAL CONSTA SUSPENSION RECONSTITUTED ER 50 MG INTRAMUSCULAR	2		BARACLUE ORAL TABLET	3	PA; QL
risperidone microspheres er	1		BIKTARVY	2	QL
risperidone oral solution	1		CIMDUO	2	QL
risperidone oral tablet	1		COMPLERA	2	PA; QL
risperidone oral tablet dispersible	3		darunavir	1	
RYKINDO	2		DELSTRIGO	3	PA; QL
SAPHRIS	3	PA	DENAVIR	3	
SECUADO	3	PA	DESCOVY	2	PA; QL
SEROQUEL	3		DOVATO	2	QL
SEROQUEL XR	3		EDURANT	2	
thioridazine hcl oral	3		efavirenz	1	
thiothixene	1		efavirenz-emtricitab-tenofo df	1	
trifluoperazine hcl	1		efavirenz-lamivudine-tenofovir	1	
			emtricitabine	1	
			emtricitabine-tenofovir df	1	

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Drug Name	Drug Tier	Notes	Drug Name	Drug Tier	Notes
EMTRIVA ORAL CAPSULE	3	PA	nevirapine oral tablet	1	
EMTRIVA ORAL SOLUTION	2		NORVIR ORAL PACKET	2	
entecavir	1		NORVIR ORAL TABLET	3	
EPCLUSA	2	QL	ODEFSEY	2	QL
EPIVIR	3		oseltamivir phosphate oral	1	
etravirine	1		PAXLOVID (150/100)	2	QL
EVOTAZ	3	QL	PAXLOVID (300/100)	2	QL
famciclovir oral	1		PEGASYS	2	QL
fosamprenavir calcium	1	QL	penciclovir	3	
FUZEON	3	QL	PIFELTRO	3	PA; QL
GENVOYA	2		PREVYMIS ORAL	2	PA; QL
HARVONI	2	PA; QL	PREZCOBIX	2	QL
INTELENCE ORAL TABLET 100 MG, 200 MG	3		PREZISTA ORAL SUSPENSION	2	
INTELENCE ORAL TABLET 25 MG	2		PREZISTA ORAL TABLET 150 MG, 75 MG	2	
ISENTRESS HD	2		PREZISTA ORAL TABLET 600 MG, 800 MG	3	
ISENTRESS ORAL PACKET	3		RELENZA DISKHALER	2	
ISENTRESS ORAL TABLET	2		RETROVIR ORAL	3	
ISENTRESS ORAL TABLET CHEWABLE	2		REYATAZ ORAL CAPSULE	3	PA; QL
JULUCA	2	QL	REYATAZ ORAL PACKET	2	
KALETRA	3		ribavirin inhalation	3	
LAGEVRIO	2	QL	ribavirin oral	1	QL
lamivudine	1		rimantadine hcl	1	
lamivudine-zidovudine	1		ritonavir	1	
LEDIPASVIR-SOFOSBUVIR	2	PA; QL	RUKOBIA	3	PA; QL
LIVTENCITY	3	PA; QL	SELZENTRY ORAL SOLUTION	2	QL
lopinavir-ritonavir	1		SELZENTRY ORAL TABLET	3	QL
maraviroc	2	QL	SITAVIG	3	
MAVYRET	3	PA; QL	SOFOSBUVIR-VELPATASVIR	2	QL
nevirapine er	1		SOVALDI	3	PA; QL
nevirapine oral suspension	3		STRIBILD	2	PA; QL

Drug Name	Drug Tier	Notes	Drug Name	Drug Tier	Notes
SUNLENCA ORAL	3	PA; QL	alprazolam oral tablet	1	QL
SYMFY	1		alprazolam oral tablet dispersible	3	QL
SYMFY LO	1		alprazolam xr	1	QL
SYMTUZA	2	QL	ATIVAN INJECTION SOLUTION 2 MG/ML	3	QL
TAMIFLU	2		ATIVAN ORAL	3	QL
tenofovir disoproxil fumarate	1		buspirone hcl oral	1	
TIVICAY	2		chlordiazepoxide hcl	1	QL
TIVICAY PD	2		clonazepam oral	1	QL
TRIUMEQ	2	QL	clorazepate dipotassium	1	QL
TRIUMEQ PD	2	QL	diazepam injection	1	
TRUVADA	3	QL	solution 10 mg/2ml	1	QL
TYBOST	2	PA	diazepam intensol	3	QL
valacyclovir hcl oral	1		diazepam oral	3	QL
VALCYTE	3	PA; QL	concentrate	1	
valganciclovir hcl	1	QL	diazepam oral solution	1	QL
VALTREX	3		diazepam oral tablet	1	QL
VEMLIDY	3	PA; QL	diazepam solution 5 mg/ml injection	1	QL
VIRACEPT	2		DIAZEPAM SOLUTION 5 MG/ML INJECTION	3	QL
VIRAZOLE	3		DORAL	3	QL
VIREAD ORAL POWDER	2		estazolam	3	QL
VIREAD ORAL TABLET 150 MG, 200 MG, 250 MG	2		HALCION	3	QL
VIREAD ORAL TABLET 300 MG	3	PA	hydroxyzine hcl oral	1	
VOSEVI	2	PA; QL	hydroxyzine pamoate oral	1	
XERESE	3		KLONOPIN	3	QL
XOFLUZA (40 MG DOSE)	3		lorazepam injection solution 2 mg/ml	1	QL
XOFLUZA (80 MG DOSE)	3		lorazepam intensol	1	QL
ZEPATIER	3	PA; QL	lorazepam oral concentrate 2 mg/ml	1	QL
ZIAGEN	3		lorazepam oral tablet	1	QL
zidovudine	1		LOREEV XR	3	QL
ZOVIRAX	3		meprobamate	3	
Anxiolytics - Drugs for Anxiety			midazolam hcl (pf) injection solution 10 mg/2ml, 5 mg/ml	1	QL
alprazolam er	1	QL			
alprazolam intensol	3	QL			

Drug Name	Drug Tier	Notes	Drug Name	Drug Tier	Notes
midazolam hcl injection solution 10 mg/2ml, 5 mg/ml	1	QL	NIVESTYM	2	QL
midazolam hcl oral	3	QL	NYVEPRIA	3	PA; QL
oxazepam	1	QL	PROCRIT	2	PA
quazepam	3	QL	PROMACTA	3	PA; QL
triazolam	1	QL	PYRUKYND	3	PA; QL
VALIUM	3	QL	PYRUKYND TAPER PACK	3	PA; QL
VISTARIL	3	QL	RELEUKO	3	PA; QL
XANAX	3	QL	RETACRIT	3	PA
XANAX XR	3	QL	STIMUFEND	3	PA; QL
Bipolar Agents - Drugs for Mood Disorders			TAVALISSE	3	PA; QL
EQUETRO	3		tranexamic acid oral	1	QL
lithium	1		UDENYCA	3	PA; QL
lithium carbonate er	1		VOYDEYA	3	PA; QL
lithium carbonate oral	1		XOLREMDI	3	PA; QL
LITHOBID	3		ZARXIO	2	QL
Blood Products and Modifiers - Drugs for Blood Disorders			ZIEXTENZO	3	PA; QL
Cardiovascular Agents - Drugs for Heart and Circulation Conditions					
AGRYLIN	3		ACCUPRIL	3	
ALVAIZ	2	PA; QL	ACCURETIC	3	
aminocaproic acid oral	3		acebutolol hcl oral	1	
anagrelide hcl	1		acetazolamide sodium	3	
ARANESP (ALBUMIN FREE)	3	PA	ALDACTONE	3	
DOPTELET	3	PA; QL	aliskiren fumarate	3	PA
EPOGEN	2	PA	ALTACE	3	
FABHALTA	3	PA; QL	ALTOPREV	3	
FULPHILA	3	PA; QL	amiloride hcl oral	1	
FYLNETRA	3	PA; QL	amiloride-hydrochlorothiazide	1	
GRANIX	3	PA; QL	amiodarone hcl oral	1	
HEMLIBRA	2	PA; QL	amlodipine besylate oral	1	
JESDUVROQ	3	PA	amlodipine besylate-benazepril hcl	1	
LEUKINE	2		amlodipine besylate-valsartan	3	PA
MIRCERA	3	PA	amlodipine-atorvastatin	3	
MULPLETA	3	PA; QL	amlodipine-olmesartan	1	
NEULASTA	3	PA; QL	amlodipine-valsartan-hctz	3	
NEULASTA ONPRO	3	PA; QL			
NEUPOGEN	3	PA; QL			

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Drug Name	Drug Tier	Notes	Drug Name	Drug Tier	Notes
ASPRUZY SPRINKLE	3	PA	cartia xt	1	
ATACAND	3		carvedilol	1	
ATACAND HCT	3		carvedilol phosphate er	3	
atenolol oral	1		CATAPRES-TTS-1	3	
atenolol-chlorthalidone	1		CATAPRES-TTS-2	3	
ATORVALIQ	3	PA	CATAPRES-TTS-3	3	
atorvastatin calcium oral	1		chlorthalidone	1	
AVALIDE	3		cholestyramine light	1	
AVAPRO	3		cholestyramine oral	1	
AZOR	3		clonidine	1	
benazepril hcl oral	1		CLONIDINE HCL ER ORAL TABLET EXTENDED RELEASE 24 HOUR	3	
benazepril-hydrochlorothiazide	1		clonidine hcl oral		
BENICAR	3		colesevelam hcl		
BENICAR HCT	3		COLESTID	3	
BETAPACE	3		colestipol hcl	1	
BETAPACE AF	3		CONJUPRI	3	PA
betaxolol hcl oral	1		COREG	3	
BIDIL	3		COREG CR	3	
bisoprolol fumarate oral	1		CORGARD	3	
bisoprolol-hydrochlorothiazide	1		CORLANOR	3	PA
bumetanide oral	1		COZAAR	3	
BUMEX	3		CRESTOR	3	
BYSTOLIC	3		DEMSER	3	
CADUET	3		DIBENZYLINE	3	PA
CAMZYOS	3	PA; QL	digoxin injection	1	
candesartan cilexetil	3		digoxin oral solution	1	
candesartan cilexetil-hctz	3		digoxin oral tablet 125 mcg, 250 mcg	1	
captopril oral	1		digoxin oral tablet 62.5 mcg	3	
captopril-hydrochlorothiazide	1		diltiazem hcl er beads (generic Tiazac)	3	
CARDIZEM	3				
CARDIZEM CD	3				
CARDIZEM LA	3				
CARDURA	3				
CAROSPIR	3				

Drug Name	Drug Tier	Notes	Drug Name	Drug Tier	Notes
diltiazem hcl er coated beads oral capsule extended release 24 hour 120 mg, 180 mg, 240 mg, 300 mg (generic Cardizem CD)	1		epinephrine solution 1 mg/ml injection	1	
			EPINEPHRINE SOLUTION 1 MG/ML INJECTION	3	
			eplerenone	1	
diltiazem hcl er coated beads oral capsule extended release 24 hour 360 mg (generic Cardizem CD)	3		ethacrynic acid	1	PA
			EXFORGE	3	PA
			EXFORGE HCT	3	PA
diltiazem hcl er oral capsule extended release 12 hour	1		EZALLOR SPRINKLE	3	
			ezetimibe	1	
			ezetimibe-simvastatin	1	
diltiazem hcl er oral capsule extended release 24 hour	1		felodipine er	1	
			fenofibrate micronized	1	
diltiazem hcl er oral tablet extended release 24 hour	3		fenofibrate oral capsule 134 mg, 200 mg, 67 mg	1	
diltiazem hcl oral	1		fenofibrate oral capsule 150 mg, 50 mg	3	
dilt-xr	1		fenofibrate oral tablet 120 mg, 145 mg, 40 mg, 48 mg	3	
DIOVAN	3				
DIOVAN HCT	3		fenofibrate oral tablet 160 mg, 54 mg	1	
disopyramide phosphate	1		fenofibric acid	1	
DIURIL	2		FENOGLIDE	3	
dofetilide	3	PA	FIBRICOR	3	
doxazosin mesylate oral	1		flecainide acetate	1	
droxidopa	3	PA; QL	FLOLIPID	3	
DYRENIUM	3		fluvastatin sodium	3	
EDARBI	3	PA	fluvastatin sodium er	3	
EDARBYCLOR	3	PA	fosinopril sodium	1	
EDECRIN	3	PA	fosinopril sodium-hctz	1	
enalapril maleate oral solution	3		furosemide injection	1	
enalapril maleate oral tablet	1		gemfibrozil oral	1	
enalapril-hydrochlorothiazide	1		guanfacine hcl	1	
ENTRESTO	2	PA; QL	HEMANGEOL	3	PA
EPANED	3		hydralazine hcl oral	1	
epinephrine injection solution 10 mg/10ml	1		hydrochlorothiazide oral	1	
epinephrine pf	1				

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Drug Name	Drug Tier	Notes	Drug Name	Drug Tier	Notes
HYZAAR	3		losartan potassium-hctz	1	
icosapent ethyl	3	PA	LOTENSIN	3	
indapamide	1		LOTENSIN HCT	3	
INDERAL LA	3		LOTREL	3	
INDERAL XL	3		lovastatin oral	1	
INNOPRAN XL	3		LOVAZA	3	
INPEFA	3	PA	matzim la	3	
INSPRA	3		METHYLDOPA	3	
irbesartan	1		metolazone	1	
irbesartan-hydrochlorothiazide	1		metoprolol succinate er	1	
ISORDIL TITRADOSE	3		metoprolol tartrate oral	1	
isosorb dinitrate-hydralazine	3		metoprolol-hydrochlorothiazide	1	
isosorbide dinitrate	1		metyrosine	3	
isosorbide mononitrate	1		mexiletine hcl oral	1	
isosorbide mononitrate er	1		MICARDIS	3	
isradipine	1		MICARDIS HCT	3	
JUXTAPID	3	PA; QL	midodrine hcl	1	
KAPSPARGO SPRINKLE	3		MINIPRESS ORAL CAPSULE 2 MG, 5 MG	3	
KATERZIA	3		minoxidil oral	1	
labetalol hcl oral	1		moexipril hcl	1	
LANOXIN	3		MULTAQ	3	
LANOXIN PEDIATRIC	3		nadolol oral	1	
LASIX	3		nebivolol hcl	1	
LESCOL XL	3		NEXICLON XR	3	
LEVAMLODIPINE MALEATE	3	PA	NEXLETOL	3	PA
LIPITOR	3		NEXLIZET	3	PA
LIPOFEN	3		niacin (antihyperlipidemic)	3	
lisinopril oral	1		niacin er (antihyperlipidemic)	3	
lisinopril-hydrochlorothiazide	1		niacor	3	
LIVALO	3		nicardipine hcl oral	1	
LODOC	3	PA	nifedipine er	1	
LOPID	3		nifedipine er osmotic release	1	
LOPRESSOR	3		nifedipine oral	1	
losartan potassium oral	1		nimodipine oral	1	

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Drug Name	Drug Tier	Notes	Drug Name	Drug Tier	Notes
nisoldipine er	3		phentolamine mesylate injection	1	
NITRO-BID	2		pindolol	1	
NITRO-DUR TRANSDERMAL PATCH 24 HOUR 0.1 MG/HR, 0.2 MG/HR, 0.4 MG/HR, 0.6 MG/HR	3		pitavastatin calcium	3	
NITRO-DUR TRANSDERMAL PATCH 24 HOUR 0.3 MG/HR, 0.8 MG/HR	2		PRALUENT	3	PA; QL
nitroglycerin rectal	1		pravastatin sodium	1	
nitroglycerin sublingual	1		prazosin hcl oral	1	
nitroglycerin transdermal	1		PRESTALIA	3	
nitroglycerin translingual	3		prevalite	1	
NITROLINGUAL	3		procainamide hcl injection	1	
NITROSTAT	3		PROCARDIA XL	3	
nitro-time oral capsule extended release 9 mg	1		propafenone hcl	1	
NORLIQVA	3	PA	propafenone hcl er	1	
NORPACE	3		propranolol hcl er	1	
NORPACE CR	2		propranolol hcl oral	1	
NORTHERA	3	PA; QL	PROSTIN VR	3	
NORVASC	3		QBRELIS	3	
NYMALIZE	3	QL	QUESTRAN	3	
olmesartan medoxomil oral	1		QUESTRAN LIGHT	3	
olmesartan medoxomil-hctz	1		quinapril hcl	1	
olmesartan-amlodipine-hctz	1		quinapril- hydrochlorothiazide	1	
omega-3-acid ethyl esters	3		quinidine gluconate er	1	
pacerone oral tablet 100 mg, 200 mg	1		quinidine sulfate	1	
PACERONE ORAL TABLET 400 MG	3		ramipril	1	
papaverine hcl injection	1		ranolazine er	1	
pentoxifylline er	1		RECTIV	2	
perindopril erbumine	1		REPATHA	3	PA
phenoxybenzamine hcl oral	1		REPATHA PUSHTRONEX SYSTEM	3	PA
			REPATHA SURECLICK	3	PA
			rosuvastatin calcium oral	1	
			simvastatin oral	1	
			SOAANZ	3	PA
			sotalol hcl (af)	1	
			sotalol hcl oral	1	
			SOTYLIZE	3	

Drug Name	Drug Tier	Notes	Drug Name	Drug Tier	Notes
spironolactone oral suspension	3		verapamil hcl er oral capsule extended release 24 hour 100 mg, 200 mg, 300 mg	3	
spironolactone oral tablet	1				
spironolactone-hctz	1		verapamil hcl er oral capsule extended release 24 hour 120 mg, 180 mg, 240 mg, 360 mg	1	
SULAR	3				
taztia xt	3				
TEKTURNA	3	PA	verapamil hcl er oral tablet extended release	1	
telmisartan	1				
telmisartan-amlodipine	3		verapamil hcl oral	1	
telmisartan-hctz	3		VERELAN	3	
TENORETIC 100	3		VERELAN PM	3	
TENORETIC 50	3		VERQUVO	3	PA
TENORMIN	3		VYNDAMAX	3	PA; QL
THALITONE	3		VYNDAQEL	3	PA; QL
tiadylt er	3		VYTORIN	3	
TIAZAC	3		WELCHOL	3	
TIKOSYN	3	PA	ZESTORETIC	3	
timolol maleate oral	1		ZESTRIL	3	
TOPROL XL	3		ZETIA	3	
torsemide	1		ZOCOR	3	
trandolapril	1		ZYPITAMAG	3	
trandolapril-verapamil hcl er	3		Central Nervous System Agents - Drugs for Attention Deficit Disorder		
triamterene oral	1		ADDERALL	2	
triamterene-hctz	1		ADDERALL XR	2	
TRIBENZOR	3		ADZENYS XR-ODT	3	PA
TRICOR	3		amphetamine sulfate	3	PA
TRILIPIX	3		amphetamine-dextroamphetamine	1	
VALSARTAN ORAL SOLUTION	3	PA; QL	amphetamine-dextroamphetamine er	1	
valsartan oral tablet	1		amphet-dextroamphet 3-bead er	3	PA; QL
valsartan-hydrochlorothiazide	1		APTENSIO XR	3	PA; QL
VASCEPA	3	PA	atomoxetine hcl	1	
VASERETIC	3		AZSTARYS	3	PA
VASOTEC	3		clonidine hcl er oral tablet extended release 12 hour	1	
VECAMYL	3		CONCERTA	2	

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Drug Name	Drug Tier	Notes	Drug Name	Drug Tier	Notes
COTEMPLA XR-ODT	3	PA; QL	methylphenidate hcl er (osm) oral tablet extended release 18 mg, 27 mg, 36 mg, 54 mg, 72 mg (generic Concerta)	1	
DAYTRANA	3	PA; QL			
DESOXYN	3				
DEXEDRINE	3				
dexamphetamine hcl	1		METHYLPHENIDATE HCL ER (OSM) ORAL TABLET EXTENDED RELEASE 45 MG, 63 MG	3	
dexamphetamine hcl er	3	PA; QL	(authorized generic Relexxii ER)	3	PA
dextroamphetamine sulfate er	1		methylphenidate hcl er (xr) (generic Aptensio XR)	3	PA; QL
dextroamphetamine sulfate oral solution	3		methylphenidate hcl er oral tablet extended release (generic Methylin)	1	
dextroamphetamine sulfate oral tablet 10 mg, 5 mg	1		methylphenidate hcl er oral tablet extended release 24 hour (generic Methylin)	1	QL
dextroamphetamine sulfate oral tablet 15 mg, 2.5 mg, 20 mg, 30 mg, 7.5 mg	3				
DYANAVEL XR	3	PA	methylphenidate hcl oral solution (generic Methylin)	3	
EVEKEO	3	PA			
FOCALIN	3		methylphenidate hcl oral tablet (generic Ritalin)	1	
FOCALIN XR	3	PA; QL			
guanfacine hcl er	1		methylphenidate hcl oral tablet chewable (generic Methylin)	3	
INTUNIV	3		MYDAYIS	3	PA; QL
JORNAY PM	3	PA; QL	PROCENTRA	3	
lisdexamfetamine dimesylate	3	PA; QL	QUELBREE	3	PA
methamphetamine hcl	3		QUILLICHEW ER	3	PA
METHYLIN	3		QUILLIVANT XR	3	PA; QL
methylphenidate (generic Aptensio XR)	3	PA; QL	RELEXXII ORAL TABLET EXTENDED RELEASE 18 MG, 27 MG, 36 MG, 54 MG	3	
methylphenidate hcl er (cd) (generic Metadate)	1		RELEXXII ORAL TABLET EXTENDED RELEASE 45 MG, 63 MG	3	PA
methylphenidate hcl er (la) oral capsule extended release 24 hour 10 mg (generic Ritalin LA)	3	PA; QL	relexxii oral tablet extended release 72 mg	1	
methylphenidate hcl er (la) oral capsule extended release 24 hour 20 mg, 30 mg, 40 mg, 60 mg (generic Ritalin LA, generic Methylin LA)	1	QL	RITALIN	3	

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Drug Name	Drug Tier	Notes	Drug Name	Drug Tier	Notes
RITALIN LA ORAL CAPSULE EXTENDED RELEASE 24 HOUR 10 MG	3	PA; QL	PLEGRIDY	3	PA; QL
RITALIN LA ORAL CAPSULE EXTENDED RELEASE 24 HOUR 20 MG, 30 MG, 40 MG	3	QL	PLEGRIDY STARTER PACK	3	PA; QL
STRATTERA	3		PONVORY	3	PA; QL
VYVANSE	3	PA; QL	PONVORY STARTER PACK	3	PA; QL
XELTRYM	3	PA	REBIF	2	PA; QL
zenzedi oral tablet 10 mg, 5 mg	1		REBIF REBIDOSE	2	PA; QL
ZENZEDI ORAL TABLET 15 MG, 2.5 MG, 20 MG, 30 MG, 7.5 MG	3		REBIF REBIDOSE TITRATION PACK	2	PA; QL
Central Nervous System Agents - Drugs for Multiple Sclerosis			REBIF TITRATION PACK	2	PA; QL
AMPYRA	3	PA; QL	TASCENO ODT	3	PA; QL
AUBAGIO	3	PA; QL	TECFIDERA	3	PA; QL
AVONEX PEN	2	PA; QL	teriflunomide	1	QL
AVONEX PREFILLED	2	PA; QL	VUMERITY	3	PA; QL
BAFIERTAM	3	PA; QL	ZEPOSIA	3	PA; QL
BETASERON	1	QL	ZEPOSIA 7-DAY STARTER PACK	3	PA; QL
COPAXONE	3	PA; QL	ZEPOSIA STARTER KIT	3	PA; QL
dalfampridine er	3	PA; QL	Central Nervous System Agents - Miscellaneous		
dimethyl fumarate oral	1		AUSTEDO	3	PA; QL
dimethyl fumarate starter pack	1		AUSTEDO XR ORAL TABLET EXTENDED RELEASE 24 HOUR 12 MG, 24 MG, 6 MG	3	PA; QL
EXTAVIA	3	QL	AUSTEDO XR PATIENT TITRATION	3	PA; QL
fingolimod hcl	1	QL	caffeine citrate oral	1	
GILENYA ORAL CAPSULE 0.25 MG	2	PA; QL	CAFFEINE-SODIUM BENZOATE	3	
GILENYA ORAL CAPSULE 0.5 MG	3	PA; QL	DAYBUE	3	PA; QL
glatiramer acetate	1	QL	EXSERVAN	3	PA; QL
glatopa	1	QL	gabapentin (once-daily)	3	
KESIMPTA	3	PA; QL	GRALISE ORAL TABLET	3	
MAVENCLAD	3	PA; QL	HORIZANT	3	
MAYZENT	3	PA; QL	IMCIVREE	3	PA; QL
MAYZENT STARTER PACK	3	PA; QL	INGREZZA	3	PA; QL
			LYRICA	3	QL
			LYRICA CR	3	PA
			NUEDEXTA	3	PA

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Drug Name	Drug Tier	Notes	Drug Name	Drug Tier	Notes
pregabalin er	3	PA	Dermatological Agents - Drugs for Skin Conditions		
pregabalin oral	1	QL	ABSORICA	3	
RADICAVA ORS	3	PA; QL	ABSORICA LD	3	
RADICAVA ORS STARTER KIT	3	PA; QL	ACANYA	3	
RELYVRIOS	3	PA; QL	accutane	1	
RILUTEK ORAL TABLET 50 MG	3	PA; QL	ACIOXIA	3	
riluzole	1	QL	acitretin	1	QL
SAVELLA	3	PA	ACZONE	3	
SAVELLA TITRATION PACK	3	PA	adapalene external cream	1	
TEGLUTIK	3	QL	adapalene external gel	1	
TEGSEDI	3	PA; QL	ADAPALENE EXTERNAL PAD	3	
tetrabenazine	3	PA; QL	ADAPALENE EXTERNAL SOLUTION	3	
WAINUA	3	PA; QL	adapalene-benzoyl peroxide external gel 0.1-2.5 %	1	
XENAZINE	3	PA; QL	SKYCLARYS	3	
Central Nervous System Agents			adapalene-benzoyl peroxide external gel 0.3-2.5 %	3	
cevimeline hcl	3		ADAPALENE-BENZOYL PEROXIDE EXTERNAL PAD	3	PA
chlorhexidine gluconate mouth/throat	1		ADBRY	3	PA; QL
DEBACTEROL	3		ADVANCED ALLERGY COLLECTION	3	
EVOXAC	3		AKLIEF	3	PA
FIRST-MOUTHWASH BLM	3		ALA SCALP	3	
kourzeq	1		ala-cort	3	
lidocaine hcl mouth/throat	3		ALADERM PLUS	3	
lidocaine viscous hcl	1		alclometasone dipropionate	1	
oralone	1		ALTRENO	3	
periogard	1		amcinonide	3	
pilocarpine hcl oral tablet 5 mg	1		AMELUZ	2	QL
pilocarpine hcl oral tablet 7.5 mg	3		ammonium lactate external	3	
SALAGEN	3		amnesteem	1	
triamcinolone acetonide mouth/throat	1		AMZEEQ	3	
			APEXICON E	3	

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Drug Name	Drug Tier	Notes	Drug Name	Drug Tier	Notes
ARAZLO	3		calcipotriene-betameth diprop	3	
arzol silver nit applicators	3		calcitrene	1	
ATRALIN	3		calcitriol external	1	
avar cleanser	1		CARAC	3	PA
AVAR LS CLEANSER	3		cem-urea	3	
AVAR-E EMOLlient	3		CERACADE	3	
AVAR-E GREEN	3		ceramax external cream	3	
AVAR-E LS	3		CIBINQO	3	PA; QL
azelaic acid external	1		claravis	1	
AZELEX	2		CLEOCIN-T	3	
BENZAMYCIN	3		clindacin	3	
BENZOYL PEROX- HYDROCORTISONE	3		clindacin etz external swab	1	
BENZOYL PEROXIDE EXTERNAL GEL 6.5 %, 8 %	3		clindacin-p	1	
BENZOYL PEROXIDE FORTE- HC	3		CLINDAGEL	3	
benzoyl peroxide- erythromycin	1		clindamycin phos-benzoyl perox external gel 1.2-2.5 %, 1.2-3.75 %	3	
betamethasone dipropionate aug	1		clindamycin phos-benzoyl perox external gel 1-5 %, 1.2-5 %	1	
betamethasone dipropionate external	1		clindamycin phosphate external foam	3	
betamethasone valerate external	1		clindamycin phosphate external gel	1	
BIMZELX	3	PA; QL	clindamycin phosphate external lotion	1	
bp 10-1	3		clindamycin phosphate external solution	1	
brimonidine tartrate external	3		clindamycin phosphate external swab	1	
BRYHALI	3		clindamycin-tretinoin	3	
CABTREO	3	PA	clobetasol propionate e	1	
calcipotriene external cream	1		clobetasol propionate emulsion	3	
CALCIPOTRIENE EXTERNAL FOAM	3		clobetasol propionate external cream	1	
calcipotriene external ointment	1		clobetasol propionate external foam	3	
calcipotriene external solution	1		clobetasol propionate external gel	1	

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Drug Name	Drug Tier	Notes	Drug Name	Drug Tier	Notes
clobetasol propionate external liquid	3		DIFFERIN EXTERNAL CREAM	3	
clobetasol propionate external lotion	1		DIFFERIN EXTERNAL GEL 0.3 %	3	
clobetasol propionate external ointment	1		DIFFERIN EXTERNAL LOTION	2	
clobetasol propionate external shampoo	3		diflorasone diacetate	3	
clobetasol propionate external solution	1		DIPROLENE	3	
CLOBEX	3		doxepin hcl external	3	
CLOBEX SPRAY	3		doxycycline	3	
clocortolone pivalate	3		DRYSOL	2	
clodan	3		DUPIXENT	3	PA; QL
CLODERM	3		DYCLOPRO	3	
CONDYLOX	2		EFUDEX	3	
CORDRAN	2		ELIDEL	3	
dapsone external	3		EMULSION SB	3	
DERMACINRX UREA	3		ENSTILAR	3	
DERMA-SMOOTH/FS BODY	3		EPICERAM	3	
DERMA-SMOOTH/FS SCALP	3		EPIDUO	3	
DERMASO PLUS	3		EPIDUO FORTE	3	
desonide external cream	1		EPIFOAM	3	
desonide external gel	3		EPSOLAY	3	PA
desonide external lotion	1		ery	3	
desonide external ointment	1		ERYGEL	3	
DESOWEN	3		erythromycin external	1	
desoximetasone external cream	1		EUCRISA	3	PA; QL
desoximetasone external gel	1		FABIOR	3	
desoximetasone external liquid	3		FINACEA EXTERNAL FOAM	2	
desoximetasone external ointment	1		fluocinolone acetonide body	1	
DEXERYL	3		fluocinolone acetonide external	1	
diclofenac sodium external gel 3 %	3		fluocinolone acetonide scalp	1	
			fluocinonide emulsified base	1	
			fluocinonide external	1	

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Drug Name	Drug Tier	Notes	Drug Name	Drug Tier	Notes
FLUOROURACIL EXTERNAL CREAM 0.5 %	3	PA	hydrocortisone valerate	1	
fluorouracil external cream 5 %	1		HYFTOR	3	PA; QL
fluorouracil external solution	1		HYLATOPIC PLUS	3	
flurandrenolide	3		ILIDERM	3	
fluticasone propionate external cream	1		imiquimod external cream 3.75 %	3	
fluticasone propionate external lotion	3		imiquimod external cream 5 %	1	
fluticasone propionate external ointment	1		imiquimod pump	3	
halcinonide	3		IMPOYZ	3	PA
halobetasol propionate external cream	1		isotretinoin oral	1	
halobetasol propionate external foam	3		ivermectin external cream	3	
halobetasol propionate external ointment	1		KAMDOY	3	
HALOG	3		KENALOG EXTERNAL	3	
HPR PLUS EXTERNAL CREAM	3		KERALYT EXTERNAL GEL 6 %	3	
HYDRO 40	3		KERALYT EXTERNAL SHAMPOO	3	
hydrocortisone ace-pramoxine external cream 2.5-1 %	1		KIVIK	3	
hydrocortisone butyrate external cream	1		KLARON	3	
hydrocortisone butyrate external lotion	3		KLISYRI	3	PA; QL
hydrocortisone butyrate external ointment	1		lactic acid e	3	
hydrocortisone butyrate external solution	1		lactic acid external	3	
hydrocortisone external cream 1 %	3		LEVULAN KERASTICK	2	QL
hydrocortisone external cream 2.5 %	1		LEXETTE	3	
hydrocortisone external lotion 2.5 %	1		LIDOCAINE-HYDROCORTISONE ACE EXTERNAL	3	
hydrocortisone external ointment 1 %, 2.5 %	1		LITFULO	3	PA; QL
			LOCOID	3	
			LOCOID LIPOCREAM	3	
			methoxsalen rapid	1	QL
			METROCREAM	3	
			METROGEL	3	
			METROLOTION	3	
			metronidazole external cream	1	
			metronidazole external gel 0.75 %	1	

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Drug Name	Drug Tier	Notes	Drug Name	Drug Tier	Notes
metronidazole external gel 1 %	3		PRAMOSONE EXTERNAL CREAM 1-2.5 %	3	
metronidazole external lotion	3		PRAMOSONE EXTERNAL LOTION	2	
MIMYX	3		PRUCLAIR	3	
MIRVASO	3		PRUDOXIN	3	
mometasone furoate external	1		PRUMYX	3	
NEOSALUS EXTERNAL CREAM	3		PYROGALLIC ACID	3	
NEO-SYNALAR	3		QBREXZA	3	PA; QL
neuac	1		RESORCINOL-SULFUR	3	
NORITATE	3		RETIN-A	1	
NUCORT	3		RETIN-A MICRO GEL 0.04 %, 0.1 %	1	
ONEXTON	3		RETIN-A MICRO PUMP EXTERNAL GEL 0.04 %, 0.1 %	1	
OPZELURA	3	PA; QL	RETIN-A MICRO PUMP EXTERNAL GEL 0.06 %, 0.08 %	3	
ORACEA	3	PA	RHOFADE	3	
OVACE PLUS EXTERNAL CREAM	3		salicylic acid external foam	3	
OVACE PLUS EXTERNAL SHAMPOO	3		salicylic acid external gel	3	
OVACE PLUS WASH	3		salicylic acid external shampoo	3	
OVACE WASH	3		salicylic acid external solution	3	
PANDEL	3		salicylic acid wart remover	3	
PENLEN	3		SALIMEZ	3	
PHLAG SPRAY	3		SALIMEZ FORTE	3	
pimecrolimus cream 1 % external	1		SALVAX	3	
PIMECROLIMUS CREAM 1 % EXTERNAL	1		SALYCIM	3	
PLEXION	3		SALYNTRA	3	
PLEXION CLEANSER	3		SANTYL	2	
PLEXION CLEANSING CLOTH	3		selenium sulfide external lotion	1	
PODOCON-25	3		selenium sulfide external shampoo 2.25 %	3	
podofilox external	1		SERNIVO	3	
PRAMOSONE EXTERNAL CREAM 1-1 %	2				

Drug Name	Drug Tier	Notes	Drug Name	Drug Tier	Notes
sodium sulfacetamide external shampoo 10 %	1		SYNERDERM	3	
sodium sulfacetamide wash	3		TACLONEX	3	
SOOLANTRA	3		tacrolimus external	1	
SORILUX	3		tazarotene external cream	1	
sss 10-5 external cream	3		TAZAROTENE EXTERNAL FOAM	3	
SSS 10-5 EXTERNAL FOAM	3		tazarotene external gel	1	
sulfacetamide sodium (acne)	1		TAZORAC EXTERNAL CREAM 0.05 %	2	
sulfacetamide sodium (cleans)	3		TAZORAC EXTERNAL CREAM 0.1 %	3	
sulfacetamide sodium external	3		TAZORAC EXTERNAL GEL	3	
sulfacetamide sodium-sulfur external cream	3		TEXACORT	3	
sulfacetamide sodium-sulfur external liquid 10-2 %, 9-4 %, 9-4.5 %, 9.8-4.8 %	3		TOLAK	3	PA
sulfacetamide sodium-sulfur external liquid 10-5 %	1		TOPICORT	3	
sulfacetamide sodium-sulfur external lotion 10-5 %	1		TOPICORT SPRAY	3	
sulfacetamide sodium-sulfur external lotion 9.8-4.8 %	3		tovet	3	
sulfacetamide sodium-sulfur external pad	3		tretinoin external cream	1	
sulfacetamide sodium-sulfur external suspension	3		tretinoin external gel 0.01 %, 0.025 %	1	
sulfacetamide sod-sulfur wash	3		tretinoin external gel 0.05 %	3	
sulfacetamide-sulfur in urea	1		tretinoin microsphere external gel 0.04 %, 0.1 %	1	
sulfacleanse 8/4	3		tretinoin microsphere external gel 0.08 %	3	
sulfamez wash	3		tretinoin microsphere pump external gel 0.04 %, 0.1 %	1	
SUMADAN WASH	3		tretinoin microsphere pump external gel 0.08 %	3	
SUMAXIN	3		triamcinolone acetonide external aerosol solution	3	
synalar	1		triamcinolone acetonide external cream	1	
			triamcinolone acetonide external lotion	1	
			triamcinolone acetonide external ointment 0.025 %, 0.1 %, 0.5 %	1	

Drug Name	Drug Tier	Notes	Drug Name	Drug Tier	Notes
triamcinolone acetonide external ointment 0.05 %	3		Diabetes - Antidiabetic Agents		
triamcinolone in absorbase	3		acarbose oral	1	
triderm	1		ACTOPLUS MET	3	
TWYNEO	3	PA	ACTOS	3	
ULTRAVATE	3		ALOGLIPTIN BENZOATE	3	PA
UMECTA MOUSSE	3		ALOGLIPTIN-METFORMIN HCL	3	PA
URAMAXIN	3		ALOGLIPTIN-PIOGLITAZONE	3	PA
urea external cream 39 %, 41 %, 45 %, 47 %	3		BEXAGLIFLOZIN	3	PA
urea external cream 40 %	1		BRENZAVVY	3	PA
UREA EXTERNAL FOAM	3		BYDUREON BCISE AUTOINJECTOR	3	PA; QL
urea hydrating	3		BYETTA 10 MCG PEN	3	PA; QL
urea nail	3		BYETTA 5 MCG PEN	3	PA; QL
uredeb	3		CYCLOSET	3	PA
uremez-40	1		DAPAGLIFLOZIN PRO-METFORMIN ER	3	PA; QL
URESOL	3		DAPAGLIFLOZIN PROPANEDIOL	3	PA; QL
VANOS	3		DUETACT	3	
VANOXIDE-HC	3		FARXIGA	3	PA; QL
VECTICAL	1		glimepiride	1	
VEREGEN	3		glipizide er	1	
VIRASAL	3		glipizide oral tablet 10 mg, 5 mg	1	
VTAMA	3	PA; QL	glipizide oral tablet 2.5 mg	3	PA
WINLEVI	3	PA	glipizide xl	1	
WYNZORA	3	PA; QL	glipizide-metformin hcl	1	
XALIX	3		GLUCOTROL XL	3	
XERALUX	3		GLUMETZA	3	PA
xurea	3		glyburide micronized	3	
ZACLIR CLEANSING	3		glyburide oral	1	
zenatane	1		glyburide-metformin	3	
ZIANA	3		GLYXAMBI	3	PA; QL
ZITHRANOL	3		INVOKAMET	3	PA; QL
ZONALON	3		INVOKAMET XR	3	PA; QL
ZORYVE	3	PA	INVOKANA	3	PA; QL
ZYCLARA	3		JANUMET	3	PA
ZYCLARA PUMP	3				

Drug Name	Drug Tier	Notes	Drug Name	Drug Tier	Notes
JANUMET XR	3	PA	SYMLINPEN 120	3	
JANUVIA	3	PA	SYMLINPEN 60	3	
JARDIANCE	2	QL	SYNJARDY	3	PA; QL
JENTADUETO	3	PA	SYNJARDY XR	3	PA; QL
JENTADUETO XR	3	PA	TRADJENTA	3	PA
metformin hcl er	1		TRIJARDY XR	3	PA; QL
metformin hcl er (mod)	3	PA	TRULICITY	3	PA; QL
metformin hcl er (osm) oral tablet extended release 24 hour 1000 mg	3	PA	VICTOZA	2	PA; QL
metformin hcl er (osm) oral tablet extended release 24 hour 500 mg	3		XIGDUO XR	3	PA; QL
metformin hcl er (osm) oral tablet extended release 24 hour 500 mg	3		XULTOPHY	3	PA; QL
metformin hcl oral solution	1		ZITUVIO	3	PA
metformin hcl oral tablet 1000 mg, 500 mg, 850 mg	1		Diabetes - Glucose Monitoring		
metformin hcl oral tablet 625 mg	3	PA; QL	ACCU-CHEK FASTCLIX LANCET KIT	1	
miglitol	3	PA	ACCU-CHEK GUIDE CONTROL	1	
MOUNJARO	3	PA; QL	ACCU-CHEK SMARTVIEW CONTROL	1	
nateglinide	3		ACCU-CHEK SOFTCLIX	1	
ONGLYZA	3	PA	LANCET DEVICE KIT		
OZEMPIC	2	PA; QL	AGAMATRIX CONTROL LEVEL 2	1	
pioglitazone hcl	3		AGAMATRIX CONTROL LEVEL 4	1	
pioglitazone hcl- glimepiride	3		AUTOLET II CLINISAFE	1	
pioglitazone hcl- metformin hcl	3		AUTOLET LANCING DEVICE	1	
QTERN	3	PA; QL	BLULINK CONTROL HIGH & LOW	1	
repaglinide	3		CARESENS CONTROL SOLUTION A/B	1	
RIOMET	3				
RYBELSUS	3	PA; QL			
saxagliptin hcl	3	PA	CARESENS LANCETS	1	
saxagliptin-metformin er	3	PA	30G		
SEGLUROMET	3	PA; QL	CARETOUCH CONTROL SOL LEVEL 2	1	
SITAGLIPTIN	3	PA	CARETOUCH		
SOLIQUA	3	PA; QL	LANCING/EJECTOR	1	
STEGLATRO	3	PA; QL	CHEMSTRIP 10 MD	2	
STEGLUJAN	3	PA; QL			

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Drug Name	Drug Tier	Notes	Drug Name	Drug Tier	Notes
CHEMSTRIP 10/SG	2		GENTEEL LANCING KIT (BLUE)	1	
CHEMSTRIP 2 GP	2		GOJJI CONTROL	1	
CHEMSTRIP 5 OB	2		GOJJI LANCING DEVICE/CLEAR CAP	1	
CHEMSTRIP 7	2		LANCETS	1	
CHEMSTRIP 9	2		MICROLET NEXT LANCING DEVICE	1	
CHOSEN LANCETS 30G	1		ONETOUCH DELICA PLUS LANCING	1	
CHOSEN LANCING DEVICE	1		ONETOUCH DELICA SAFETY LANCING	1	
CHOSEN SAFETY LANCETS 28G	1		ONETOUCH ULTRA 2 KIT W/DEVICE	1	
CLEVER CHOICE COMFORT EZ	1		ONETOUCH ULTRA IN VITRO LIQUID	1	
COMFORT TOUCH TWIST LANCET 30G	1		ONETOUCH ULTRA IN VITRO STRIP	1	QL
CONTOUR CONTROL SOLUTION	1		ONETOUCH ULTRA TEST	1	QL
CONTOUR NEXT CONTROL SOLUTION	1		ONETOUCH VERIO FLEX SYSTEM KIT	1	
CONTOUR NEXT GEN TEST STRIPS	1	PA; QL	ONETOUCH VERIO IN VITRO LIQUID HIGH	1	
DIASTIX REAGENT	3		ONETOUCH VERIO TEST STRIPS	1	QL
DIATHRIVE GLUCOSE CONTROL SOLN	1		ONETOUCH VERIO REFLECT KIT W/DEVICE	1	
DIATHRIVE LANCING DEVICE	1		PIP GLUCOSE CONTROL SOLUTION	1	
DROPLET GENTEEL LANCING DEVICE	1		TECHLITE LANCETS 26G	1	
EASY TALK PLUS II CONTROL	1		TRUE METRIX LEVEL 1	1	
EASY TOUCH LANCING DEVICE	1		TRUE METRIX LEVEL 2	1	
EASY TRAK II CONTROL	1		TRUE METRIX LEVEL 3	1	
EASymax 15 LEVEL 2-3 CONTROL	1		UNISTRIP CONTROL IN VITRO SOLUTION LOW	1	
EASymax CONTROL	1		VERIFINE SAFE LANCET MINI 21G	1	
GLUCOSE CONTROL SOLUTIONS	1		VERIFINE SAFE LANCET MINI 23G	1	
EMBRACE LANCING DEVICE/EJECTOR	1		VERIFINE SAFE LANCET MINI 28G	1	
EMBRACE TALK GLUCOSE CONTROL	1				
FREESTYLE TEST	1	PA; QL			

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Drug Name	Drug Tier	Notes	Drug Name	Drug Tier	Notes
VERIFINE SAFE LANCET MINI 30G	1		FIASP FLEXTOUCH	3	
VIVAGUARD INO CONTROL SOLUTION	1		FIASP PENFILL	3	
VIVAGUARD LANCETS 30G	1		FIASP PUMPCART	3	
VIVAGUARD LANCING DEVICE	1		HUMALOG	2	
VIVAGUARD SAFETY LANCETS 28G	1		HUMALOG KWIKPEN	2	
Diabetes - Glycemic Agents			HUMALOG MIX 50/50 VIAL	3	
BAQSIMI ONE PACK	2		HUMALOG MIX 75/25 KWIKPEN	3	
BAQSIMI TWO PACK	2		HUMALOG MIX 75/25 VIAL	3	
diazoxide oral	2		HUMALOG TEMPO PEN	3	PA
GLUCAGEN HYPOKIT	2		HUMALOG U-100	2	
glucagon emergency kit	1		JUNIOR KWIKPEN		
GLUCAGON EMERGENCY KIT	3		HUMULIN 70/30 KWIKPEN	1	
GVOKE HYPOOPEN 1-PACK	3	QL	HUMULIN 70/30 VIAL	1	
GVOKE HYPOOPEN 2-PACK	3	QL	HUMULIN N KWIKPEN	1	
GVOKE KIT	3	PA; QL	HUMULIN N VIAL	1	
GVOKE PFS	3	QL	HUMULIN R U-500 KWIKPEN	1	
PROGLYCEM	3		HUMULIN R U-500 VIAL	1	
ZEGALOGUE	3	PA	HUMULIN R VIAL	1	
Diabetes - Insulins			INSULIN ASP PROT & ASP FLEXPEN	3	
ADMELOG	3		INSULIN ASPART	3	
ADMELOG SOLOSTAR	3		INSULIN ASPART	3	
AFREZZA	3	PA	FLEXPEN		
APIDRA SOLOSTAR	3		INSULIN ASPART PENFILL	3	
APIDRA VIAL	3		INSULIN ASPART PROT & ASPART	3	
AQ INSULIN SYRINGE	1				
BASAGLAR KWIKPEN	3	PA	INSULIN DEGLUDEC	2	PA
BASAGLAR TEMPO PEN	3	PA	INSULIN DEGLUDEC FLEXTOUCH	2	PA
BD ULTRA-FINE INSULIN SYRINGES	1		INSULIN GLARGINE MAX SOLOSTAR	3	PA
DROPSAFE SAFETY SYRINGE/NEEDLE	1				
FIASP	3				

Drug Name	Drug Tier	Notes	Drug Name	Drug Tier	Notes
INSULIN GLARGINE SOLOSTAR SUBCUTANEOUS SOLUTION PEN-INJECTOR 300 UNIT/ML	3	PA	NOVOLIN N FLEXPEN RELION	3	PA
INSULIN GLARGINE-YFGN	1		NOVOLIN N RELION	3	PA
INSULIN LISPRO	2		NOVOLIN N VIAL	3	PA
INSULIN LISPRO (1 UNIT DIAL)	2		NOVOLIN R FLEXPEN	3	PA
INSULIN LISPRO JUNIOR KWIKPEN	3		NOVOLIN R FLEXPEN RELION	3	PA
INSULIN LISPRO PROT & LISPRO	3		NOVOLIN R RELION	3	PA
INSULIN SYRINGES 27G X 1/2" 0.5 ML, 27G X 1/2" 1 ML, 27G X 5/8" 1 ML, 28G X 1/2" 0.5 ML, 28G X 1/2" 1 ML, 29G X 1/2" 0.3 ML, 29G X 1/2" 0.5 ML, 29G X 1/2" 1 ML, 30G X 1/2" 0.3 ML, 30G X 1/2" 0.5 ML, 30G X 5/16" 0.3 ML, 30G X 5/16" 0.5 ML, 30G X 5/16" 1 ML, 31G X 15/64" 0.3 ML, 31G X 15/64" 0.5 ML, 31G X 15/64" 1 ML, 31G X 5/16" 0.3 ML, 31G X 5/16" 0.5 ML, 31G X 5/16" 1 ML	1		NOVOLOG 70/30 FLEXPEN RELION	3	
LANTUS SOLOSTAR	3	PA	NOVOLOG MIX 70/30 FLEXPEN	3	
LANTUS U-100 VIAL	3	PA	NOVOLOG MIX 70/30 RELION	3	
LEVEMIR FLEXPEN	2	PA	NOVOLOG MIX 70/30 VIAL	3	
LEVEMIR U-100 VIAL	2	PA	NOVOLOG PENFILL	3	
LYUMJEV KWIKPEN	3	PA	NOVOLOG RELION	3	
LYUMJEV TEMPO PEN	3	PA	NOVOLOG U-100 VIAL	3	
LYUMJEV VIAL	3	PA	REZVOGLAR KWIKPEN	3	PA
NOVOLIN 70/30 FLEXPEN	3	PA	SEMGLEE (YFGN) SOLUTION 100 UNIT/ML SUBCUTANEOUS	3	PA
NOVOLIN 70/30 FLEXPEN RELION	3	PA	SEMGLEE (YFGN) SOLUTION 100 UNIT/ML SUBCUTANEOUS	3	PA
NOVOLIN 70/30 RELION	3	PA	SEMGLEE (YFGN) SUBCUTANEOUS	3	PA
NOVOLIN 70/30 VIAL	3	PA	SOLUTION PEN-INJECTOR		
NOVOLIN N FLEXPEN	3	PA	TOUJEO MAX SOLOSTAR	3	PA
			TOUJEO SOLOSTAR	3	PA
			TRESIBA	3	PA
			TRESIBA FLEXTOUCH	3	PA
			ULTIGUARD SAFEPACK SYR/NEEDLE	1	
			VERIFINE INSULIN SYRINGE	1	

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Drug Name	Drug Tier	Notes	Drug Name	Drug Tier	Notes
Electrolytes / Minerals / Metals / Vitamins			JADENU	3	PA; QL
ACCRUFER	3	PA	JADENU SPRINKLE	3	PA; QL
ARGYLE STERILE SALINE	1		JYNARQUE ORAL TABLET 30 MG	3	PA; QL
argyle sterile water	3		JYNARQUE ORAL TABLET THERAPY PACK	3	PA; QL
CARBAGLU	3	PA; QL	KIONEX	3	
carglumic acid	3	PA; QL	klor-con	1	
CARNITOR ORAL	3		klor-con 10	1	
CARNITOR SF	3		klor-con m10	1	
CHEMET	3		klor-con m15	2	
curity sterile saline	1		klor-con m20	1	
CUVRIOR	3	PA; QL	klor-con/ef	3	
cyanocobalamin injection solution 1000 mcg/ml	1		K-PHOS	3	
cytra k crystals	1		K-PHOS NO 2	3	
deferasirox granules	1	QL	K-PHOS-NEUTRAL	3	
deferasirox oral packet	1	QL	k-prime	3	
deferasirox oral tablet	1		K-TAB	3	
deferasirox oral tablet soluble	1		levocarnitine oral solution	1	
deferiprone	3	PA; QL	levocarnitine oral tablet	1	
DODEX	3		levocarnitine sf	1	
DRISDOL	3		LOKELMA	3	PA
EFFER-K ORAL TABLET EFFERVESCENT 10 MEQ, 20 MEQ	3		ORACIT	2	
effer-k oral tablet effervescent 25 meq	3		ORAL CITRATE	2	
ergocalciferol oral capsule	1		phospha 250 neutral	1	
EXJADE	3	PA; QL	phosphorous	1	
FERRIPROX ORAL SOLUTION	3	PA	phospho-trin 250 neutral	1	
FERRIPROX ORAL TABLET	3	PA; QL	PHOSPHO-TRIN K500	3	
FERRIPROX TWICE-A-DAY	3	PA; QL	PHOXILLUM B22K4/0	3	
folic acid injection	1		PHOXILLUM BK4/2.5	3	
folic acid oral tablet 1 mg	1		phytonadione injection	1	
FOLVITE-D	3		phytonadione oral	1	
iodine strong oral	3		POKONZA	3	PA; QL
			pot & sod cit-cit ac	1	
			potassium chloride crys er		
			oral tablet extended		
			release 10 meq, 20 meq	1	

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Drug Name	Drug Tier	Notes	Drug Name	Drug Tier	Notes
potassium chloride crys er oral tablet extended release 15 meq	2		vitamin k1 injection	1	
potassium chloride er oral capsule extended release	1		water for irrigation, sterile	3	
potassium chloride er oral tablet extended release 10 meq, 20 meq, 8 meq	1		wes-phos 250 neutral	1	
potassium chloride er oral tablet extended release 15 meq	2		Gastrointestinal Agents - Drugs for Acid Reflux and Ulcer		
potassium chloride oral	1		ACIPHEX	3	PA
potassium citrate er	1		CARAFATE	3	
potassium citrate-citric acid	1		cimetidine hcl	1	
SAMSCA	3	PA; QL	cimetidine oral	1	
sod citrate-citric acid	1		CYTOTEC	3	
sodium chloride (pf)	1		DEXILANT	3	PA
sodium chloride irrigation	1		dexlansoprazole	3	PA
sodium fluoride oral solution	1		esomeprazole	3	
sodium fluoride oral tablet 1.1 (0.5 f) mg	1		magnesium oral packet	3	PA
sodium fluoride oral tablet 2.2 (1 f) mg	3		famotidine oral suspension reconstituted	1	
sodium fluoride oral tablet chewable	1		famotidine oral tablet 20 mg, 40 mg	1	
sodium polystyrene sulfonate	1		FIRST-LANSOPRAZOLE	3	
sps	1		FIRST-OMEPRAZOLE	3	
sterile water for irrigation	3		KONVOMEP	3	PA
SYPRINE	3	PA; QL	lansoprazole oral capsule delayed release	1	
tolvaptan	3	PA; QL	lansoprazole oral tablet delayed release dispersible	3	PA
tricitrates	1		misoprostol oral	1	
trientine hcl	3	PA; QL	NEXIUM ORAL PACKET	3	PA
UROCIT-K 10	3		nizatidine	3	
UROCIT-K 15	3		omeprazole oral capsule delayed release	1	
UROCIT-K 5	3		OMEPRAZOLE+SYRSPE ND SF ALKA	3	
VELTASSA	3	PA	omeprazole-sodium bicarbonate oral packet	3	PA
vitamin d (ergocalciferol) oral capsule 1.25 mg (50000 ut), 50000 unit	1		pantoprazole sodium oral packet	3	
			pantoprazole sodium oral tablet delayed release	1	
			PEPCID	3	
			PREVACID	3	

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Drug Name	Drug Tier	Notes	Drug Name	Drug Tier	Notes
PREVACID SOLUTAB	3	PA	glycopyrrolate injection solution	1	
PRILOSEC	3		glycopyrrolate oral solution	3	
PROTONIX ORAL	3		glycopyrrolate oral tablet 1 mg, 2 mg	1	
rabeprazole sodium oral tablet delayed release	1	ST	GLYCOPYRROLATE ORAL TABLET 1.5 MG	3	
sucralfate oral	1		GOLYTELY	3	
VOQUEZNA	3	PA	HELIDAC THERAPY	2	
ZEGERID ORAL PACKET	3	PA	hyoscyamine sulfate er	3	
Gastrointestinal Agents - Drugs for Bowel, Intestine and Stomach Conditions			hyoscyamine sulfate injection	3	
alosetron hcl	3	QL	hyoscyamine sulfate oral	3	
AMITIZA	3	PA; QL	hyoscyamine sulfate sublingual	3	
amoxicill-clarithro-lansopraz	3		hyosyne	3	
ANASPAZ	3		IBSRELA	3	PA; QL
BENTYL	3		KRISTALOSE	3	
bis subcit-metronid-tetracyc	3	PA	lactulose encephalopathy	1	
bismuth/metronidaz/tetracyclin	3	PA	lactulose oral packet	3	
CHENODAL	3		lactulose oral solution	1	
chlordiazepoxide-clidinium	1	QL	LEVBID	3	
CLENPIQ	3		LEVSIN	3	
constulose	1		LEVSIN/SL	3	
cromolyn sodium oral	3		LIBRAX	3	QL
CUVPOSA	3		LINZESS ORAL CAPSULE 145 MCG, 290 MCG	3	PA; QL
dicyclomine hcl intramuscular	3		LINZESS ORAL CAPSULE 72 MCG	3	PA
dicyclomine hcl oral	1		LOMOTIL	3	
diphenoxylate-atropine	1		loperamide hcl oral capsule	1	
enulose	1		LOTRONEX	3	PA; QL
GASTROCROM	3		lubiprostone	3	PA; QL
GATTEX	3	PA; QL	methscopolamine bromide oral	3	
gavilyte-c	1		MOTEGRITY	3	PA; QL
gavilyte-g	1		MOTOFEN	3	
generlac	1				
GLYCATE	3				

Drug Name	Drug Tier	Notes	Drug Name	Drug Tier	Notes
MOVANTIK	3	PA; QL	ursodiol oral capsule 300 mg	1	
MOVIPREP	3		ursodiol oral tablet	1	
MYTESI	3		VIBERZI	3	PA
na sulfate-k sulfate-mg sulf	3		VOQUEZNA DUAL PAK	3	PA
nulev	3		VOQUEZNA TRIPLE PAK	3	PA
OMECLAMOX-PAK	3		VOWST	3	PA; QL
opium	1	QL	XERMELO	3	PA; QL
oscimin	3		Genetic or Enzyme Disorder - Drugs for Replacement, Modification, Treatment		
peg 3350-kcl-na bicarb-nacl	1		betaine	3	
peg-3350/electrolytes	1		BUPHENYL	3	PA; QL
peg-3350/electrolytes/ascorbate	3		CERDELGA	2	PA; QL
peg-kcl-nacl-nasulf-na asc-c	3		CHOLBAM	3	PA; QL
PEG-PREP	3		CREON	2	
PLENUVU	3		CRYSVITA	3	PA; QL
PYLERA	3	PA	CYSTADANE	3	
RELISTOR ORAL	3	PA; QL	CYSTAGON	2	PA
RELISTOR SUBCUTANEOUS	2	PA	EVRYSDI	3	PA; QL
RELTONE	3	PA; QL	GALAFOLD	3	PA; QL
REZDIFRA	3	PA; QL	JAVYGTOR	3	PA; QL
ROBINUL	3		KUVAN	3	PA; QL
ROBINUL-FORTE	3		miglustat	3	PA; QL
SEROSTIM	3	PA; QL	MYALEPT	3	PA; QL
SUFLAVE	3		nitisinone oral capsule 10 mg, 2 mg, 5 mg	3	PA; QL
SUPREP BOWEL PREP KIT	3		nitisinone oral capsule 20 mg	3	PA
SUTAB	3		NITYR	3	PA; QL
SYMPROIC	3	PA; QL	OCALIVA	3	PA; QL
TALICIA	3		OLPRUVA (2 GM DOSE)	3	PA; QL
TRULANCE	3	PA; QL	OLPRUVA (3 GM DOSE)	3	PA; QL
URSO 250	3		OLPRUVA (4 GM DOSE)	3	PA; QL
URSO FORTE	3		OLPRUVA (5 GM DOSE)	3	PA; QL
URSODIOL ORAL CAPSULE 200 MG, 400 MG	3	PA; QL	OLPRUVA (6 GM DOSE)	3	PA; QL
			OLPRUVA (6.67 GM DOSE)	3	PA; QL
			OPFOLDA	3	PA

Drug Name	Drug Tier	Notes	Drug Name	Drug Tier	Notes
ORFADIN ORAL CAPSULE 10 MG, 2 MG, 5 MG	3	PA; QL	ENTADFI	3	PA
ORFADIN ORAL CAPSULE 20 MG	3	PA	FEM PH	3	
ORFADIN ORAL SUSPENSION	3	PA; QL	fesoterodine fumarate er	3	PA
PANCREAZE	3		FILSPARI	3	PA; QL
PERTZYE	3		flavoxate hcl	1	
PHEBURANE	3	PA; QL	FOSRENOL ORAL PACKET	3	
PROCYSB1	3	PA; QL	GELNIQUE	3	PA
RAVICTI	3	PA; QL	GEMTESA	3	PA
sapropterin dihydrochloride	3	PA; QL	INTRAROSA	3	PA; QL
sodium phenylbutyrate oral	3	QL	lanthanum carbonate	3	QL
STRENSIQ	3	PA; QL	LITHOSTAT	3	
SUCRAID	3	PA	me/naphos(mb/hyo1	3	
VIOKACE	3		mirabegron er	3	PA
VOXZOGO	3	PA; QL	MYRBETRIQ	3	PA
yargesa	3	PA; QL	oxybutynin chloride er	1	
ZAVESCA	3	PA; QL	oxybutynin chloride oral tablet 2.5 mg	3	
ZENPEP	2		oxybutynin chloride oral tablet 5 mg	1	
Genitourinary Agents - Drugs for Bladder, Genital and Kidney Conditions			oxybutynin chloride solution 5 mg/5ml oral	1	
acetic acid irrigation	1		OXYBUTYNIN CHLORIDE SOLUTION 5 MG/5ML ORAL	3	PA
AURYXIA	3	PA; QL	OXYTROL	3	PA
bethanechol chloride oral	1		penicillamine oral capsule	1	PA; QL
calcium acetate (phos binder)	1		penicillamine oral tablet	2	PA; QL
calcium acetate oral tablet 667 mg	1		PENTOSAN POLYSULFATE SODIUM ORAL	2	
CERVIDIL	2		phenazo oral tablet 200 mg	1	
CUPRIMINE	3	PA; QL	phenazopyridine hcl oral tablet 100 mg, 200 mg	1	
darifenacin hydrobromide er	1		PREPIDIL	2	
DEPEN TITRATABS	3	PA; QL	PYRIDIUM	3	
DETROL	3		RENACIDIN	3	
DETROL LA	3		RENVELA	3	
ELMIRON	2				

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Drug Name	Drug Tier	Notes	Drug Name	Drug Tier	Notes	
RIMSO-50	3		FLOMAX	3		
RIVFLOZA	3	PA; QL	JALYN ORAL CAPSULE 0.5-0.4 MG	3		
sevelamer carbonate	1		PROSCAR	3		
sevelamer hcl	1	PA	RAPAFLO	3		
solifenacin succinate	1		silodosin	1		
THIOLA	3	PA	tamsulosin hcl	1		
THIOLA EC	3	PA	terazosin hcl	1		
tiopronin oral tablet	3		UROXATRAL	3		
tiopronin oral tablet delayed release	3	PA	Hormonal Agents - Adrenal			
tolterodine tartrate	1		AGAMREE	3	PA; QL	
tolterodine tartrate er	1		ALKINDI SPRINKLE	3	PA; QL	
TOVIAZ	3	PA	BETAMETHASONE SODIUM PHOSPHATE INJECTION	3		
trospium chloride	1		CORTEF	3		
trospium chloride er	1		CORTISONE ACETATE ORAL	3		
urelle	3		deflazacort oral tablet	3	PA; QL	
uretron d/s	3		DEPO-MEDROL INJECTION	2		
uribel oral capsule	3		SUSPENSION 20 MG/ML			
URIBEL ORAL TABLET	3		DEPO-MEDROL INJECTION	3		
URIMAR-T	3		SUSPENSION 40 MG/ML, 80 MG/ML			
urin ds	3		DEXABLISS	3		
URNEVA	3		DEXAMETHASONE (LA)	3		
UROGESIC-BLUE	3		DEXAMETHASONE ACETATE INJECTION	3		
uro-mp	3		dexamethasone intensol	2		
VELPHORO	3	PA; QL	dexamethasone oral elixir	1		
VESICARE	3		dexamethasone oral solution	1		
VESICARE LS	3		dexamethasone oral tablet	1		
vilamit mb	3		dexamethasone oral tablet therapy pack	3		
VILEVEV MB	3		dexamethasone sod phosphate pf injection solution	1		
Genitourinary Agents - Drugs for Prostate Conditions						
alfuzosin hcl er	1					
AVODART	3					
CARDURA XL	3					
dutasteride oral	1					
dutasteride-tamsulosin hcl	3					
finasteride oral tablet 5 mg	1					

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Drug Name	Drug Tier	Notes	Drug Name	Drug Tier	Notes
dexamethasone sodium phosphate injection solution 100 mg/10ml, 120 mg/30ml, 20 mg/5ml, 4 mg/ml	1		prednisolone sodium phosphate oral solution 10 mg/5ml, 20 mg/5ml	3	
dexamethasone sodium phosphate injection solution prefilled syringe	1		prednisolone sodium phosphate oral solution 15 mg/5ml, 25 mg/5ml, 6.7 (5 base) mg/5ml	1	
DEXAMETHASONE SODIUM PHOSPHATE SOLUTION 10 MG/ML INJECTION	3		prednisolone sodium phosphate oral tablet dispersible	3	
dexamethasone sodium phosphate solution 10 mg/ml injection	1		prednisone intensol	3	
RAYOS			prednisone oral	1	
SOLU-CORTEF			RAYOS	3	PA
DEXONTO 0.4%	3		SOLU-MEDROL (PF) INJECTION SOLUTION RECONSTITUTED 125 MG	3	
EMFLAZA	3	PA; QL	TAPERDEX 12-DAY	3	
fludrocortisone acetate oral	1		TAPERDEX 6-DAY	3	
HEMADY	3	PA	TAPERDEX 7-DAY	3	
HIDEX 6-DAY	3		TRIAMCINOLONE ACETONIDE INJECTION SUSPENSION 50 MG/ML	3	
hydrocortisone oral	1		MEDROL ORAL TABLET 16 MG, 4 MG, 8 MG	3	
KENALOG INJECTION	3		triamcinolone acetonide suspension 40 mg/ml injection	3	
MEDROL ORAL TABLET 2 MG	2		MEDROL ORAL TABLET THERAPY PACK	3	
METHYLPREDNISOLON E ACE-LIDO	3		TRIAMCINOLONE ACETONIDE SUSPENSION 40 MG/ML INJECTION	3	
METHYLPREDNISOLON E ACETATE INJECTION SUSPENSION 40 MG/ML, 80 MG/ML	3		TRIAMCINOLONE DIACETATE INJECTION	3	
methylprednisolone oral	1		Hormonal Agents - Men's Health		
methylprednisolone sodium succ injection solution reconstituted 125 mg	1		ANDRODERM	3	PA; QL
ORAPRED ODT	3		ANDROGEL PUMP	3	QL
PEDIAPRED	3		danazol oral	1	
prednisolone oral solution	1		DEPO-TESTOSTERONE (brand testosterone cypionate intramuscular)	1	
prednisolone oral tablet	3		FORTESTA TRANSDERMAL GEL 10 MG/ACT (2%)	3	PA; QL
			JATENZO	3	PA

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Drug Name	Drug Tier	Notes	Drug Name	Drug Tier	Notes
KYZATREX	3	PA	EGRIFTA SV	3	QL
METHITEST	3	PA	ELIGARD	2	
methyltestosterone oral	3	PA	FENSOLVI (6 MONTH)	3	
NATESTO	3	PA; QL	GENOTROPIN	3	PA; QL
TESTIM	3	QL	GENOTROPIN	3	PA; QL
TESTONE CIK	3		MINIQUICK		
testosterone cypionate intramuscular	1		HUMATROPE	3	PA; QL
testosterone enanthate intramuscular	1		INCRELEX	3	PA; QL
testosterone transdermal gel 1.62 %, 12.5 mg/act (1%), 20.25 mg/act (1.62%), 25 mg/2.5gm (1%), 50 mg/5gm (1%)	1	QL	ISTURISA	3	PA; QL
testosterone transdermal gel 10 mg/act (2%), 20.25 mg/1.25gm (1.62%), 40.5 mg/2.5gm (1.62%)	3	PA; QL	Ianreotide acetate	3	PA
testosterone transdermal solution	3	PA; QL	leuprolide acetate injection	1	
TLANDO	3	PA	LUPRON DEPOT (1-MONTH)	2	
VOGELXO	3	QL	LUPRON DEPOT (3-MONTH)	2	
VOGELXO PUMP	3	QL	LUPRON DEPOT (4-MONTH)		
XYOSTED	3	PA	INTRAMUSCULAR KIT 30MG	2	
Hormonal Agents - Pituitary			LUPRON DEPOT (6-MONTH)		
ACTHAR	2	PA; QL	LUPRON DEPOT-PED (1-MONTH)	2	
cabergoline	1		LUPRON DEPOT-PED (3-MONTH)	2	
CORTROPHIN	2	PA; QL	MYCAPSSA	3	PA; QL
DDAVP	3		NGENLA	3	PA; QL
DDAVP PF	3		NOCDURNA	3	PA
desmopressin ace spray refrig	1		NORDITROPIN FLEXPRO	3	PA; QL
desmopressin acetate injection	1		NUTROPIN AQ NUSPIN 10	3	PA; QL
DESMOPRESSIN ACETATE NASAL	2		NUTROPIN AQ NUSPIN 20	3	PA; QL
desmopressin acetate oral	1		NUTROPIN AQ NUSPIN 5	3	PA; QL
desmopressin acetate pf	1		octreotide acetate	1	
desmopressin acetate spray	1		OMNITROPE	2	PA; QL
			ORILISSA	3	PA; QL

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Drug Name	Drug Tier	Notes	Drug Name	Drug Tier	Notes
RECORLEV	3	PA; QL	aranelle	1	
SAIZEN	3	PA; QL	ashlyna	1	
SANDOSTATIN	3	PA	aubra eq	1	
SANDOSTATIN LAR DEPOT	2	QL	aurovela 1.5/30	1	
SIGNIFOR	3	PA; QL	aurovela 1/20	1	
SKYTROFA	3	PA; QL	aurovela 24 fe	1	
SOGROYA	3	PA; QL	aurovela fe 1.5/30	1	
SOMATULINE DEPOT	3	PA	aurovela fe 1/20	1	
SOMAVERT	3	PA; QL	aviane	1	
SYNAREL	3	QL	ayuna	1	
ZOMACTON	3	PA; QL	azurette	1	
Hormonal Agents - Prostaglandins			BALCOLTRA	3	
KORLYM	3	PA; QL	balziva	1	
MIFEPREX	1		BEYAZ	3	
mifepristone oral tablet 200 mg	1		BIJUVA	3	
mifepristone oral tablet 300 mg	3	PA; QL	blisovi 24 fe	1	
			blisovi fe 1.5/30	1	
			blisovi fe 1/20	1	
Hormonal Agents - Selective Estrogen Receptor Modifying Agents			briellyn	1	
EVISTA	3		camila	1	
OSPHENA	3	PA	camrese	1	
raloxifene hcl	1		camrese lo	1	
Hormonal Agents - Sex Hormones and Birth Control			charlotte 24 fe	3	
ACTIVELLA	3		chateal eq	1	
afirmelle	1		CLIMARA	1	
aftera	1		CLIMARA PRO	3	
AFTERPILL	1		COMBIPATCH	3	
ALORA	3		covaryx	3	
altavera	1		covaryx hs	3	
alyacen 1/35	1		CRINONE	3	
alyacen 7/7/7	1		cryselle-28	1	
amabelz	3		curae	1	
amethyst	3		cyred eq	1	
ANGELIQ	3		dasetta 1/35	1	
ANNOVERA	3		dasetta 7/7/7	1	
apri	1		daysee	1	

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Drug Name	Drug Tier	Notes	Drug Name	Drug Tier	Notes
deblitane	1		estradiol transdermal gel	3	
DELESTROGEN	2		estradiol transdermal patch twice weekly	1	
delyla	1		estradiol transdermal patch weekly	1	
DEPO-ESTRADIOL	2		estradiol vaginal	1	
DEPO-PROVERA	3		estradiol valerate intramuscular	1	
DEPO-SUBQ PROVERA 104	3		estradiol-norethindrone acet	3	
desogestrel-ethinyl estradiol oral tablet 0.15-0.02/0.01 mg (21/5)	1		ESTRING	2	
DIVIGEL	3		ESTROGEL	3	
dolishale	3		ethynodiol diac-eth estradiol	1	
dotti	1		etongestrel-ethinyl estradiol	1	
drospirene-eth estrad-levomefol	3		EVAMIST	3	
drospirenone-ethinyl estradiol	1		falmina	1	
DUAVEE	3		FEMRING	2	
econtra one-step	1		finzala	3	
eemt	3		FIRST-PROGESTERONE VGS	3	
eemt hs	3		fyavolv	3	
ELESTRIN	3		gemma	3	
elinest	1		hailey 1.5/30	1	
ELLA	2		hailey 24 fe	1	
eluryng	1		hailey fe 1.5/30	1	
emzahh	1		hailey fe 1/20	1	
ENDOMETRIN	3		haloette	1	
enilloring	1		heather	1	
enpresse-28	1		her style	1	
enskyce	1		iclevia	1	
errin	1		IMVEXXY MAINTENANCE PACK	3	
est estrogens-methyltest	3		IMVEXXY STARTER PACK	3	
est estrogens-methyltest ds	3		incassia	1	
est estrogens-methyltest hs	3		introvale	1	
estarrylla	1		isibloom	1	
ESTRACE	3				
estradiol oral	1				

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Drug Name	Drug Tier	Notes	Drug Name	Drug Tier	Notes
jaimiess	1		levonorgestrel-ethinyl estrad oral tablet 90-20 mcg	3	
jasmiel	1				
jencycla	1		levonorg-eth estrad triphasic	1	
jintel	3				
jolessa	1		levora 0.15/30 (28)	1	
joyeaux	3		LILETTA (52 MG)	3	
juleber	1		LO LOESTRIN FE	3	
junel 1.5/30	1		LOESTRIN 1.5/30 (21)	3	
junel 1/20	1		LOESTRIN 1/20 (21)	3	
junel fe 1.5/30	1		LOESTRIN FE 1.5/30	3	
junel fe 1/20	1		LOESTRIN FE 1/20	3	
junel fe 24	1		lojaimiess	1	
kaitlib fe	3		loryna	1	
kalliga	1		low-ogestrel	1	
kariva	1		lo-zumandimine	1	
kelnor 1/35	1		lutera	1	
kelnor 1/50	1		lyleq	1	
kurvelo	1		lyllana	1	
larin 1.5/30	1		lyza	1	
larin 1/20	1		marlissa	1	
larin 24 fe	1		medroxyprogesterone acetate	1	
larin fe 1.5/30	1				
larin fe 1/20	1		megestrol acetate oral suspension 40 mg/ml, 400 mg/10ml, 800 mg/20ml	1	
layolis fe	3				
leena	1		megestrol acetate oral suspension 625 mg/5ml	3	
lessina	1				
levonest	1		megestrol acetate oral tablet	1	
levonorgest-eth est & eth est	3		MENEST	3	
levonorgest-eth estrad 91-day	1		MENOSTAR	3	
levonorgest-eth estradiol-iron	3		merzee	3	
levonorgestrel	1		mibelas 24 fe	3	
levonorgestrel-ethinyl estrad oral tablet 0.1-20 mg-mcg, 0.15-30 mg-mcg	1		microgestin 1.5/30	1	
			microgestin 1/20	1	
			microgestin 24 fe	1	
			microgestin fe 1.5/30	1	

Drug Name	Drug Tier	Notes	Drug Name	Drug Tier	Notes
microgestin fe 1/20	1		nortrel 1/35 (28)	1	
mili	1		nortrel 7/7/7	1	
mimvey	3		NUVARING	3	
MINIVELLE	3		nylia 1/35	1	
MIRENA (52 MG)	2		nylia 7/7/7	1	
mono-linyah	1		nymyo	1	
my choice	1		ocella	1	
my way	1		opcicon one-step	1	
MYFEMBREE	3	PA; QL	OPILL	1	
NATAZIA	3		option 2	1	
necon 0.5/35 (28)	1		ORIAHNN	3	PA; QL
new day	1		PARAGARD		
NEXTSTELLIS	3		INTRAUTERINE COPPER	2	
nikki	1		philith	1	
nora-be	1		pimtrea	1	
norelgestromin-eth estradiol	1		PLAN B ONE-STEP	3	
norethin ace-eth estrad-fe oral capsule	3		portia-28	1	
norethin ace-eth estrad-fe oral tablet	1		PREMARIN ORAL	3	PA
norethin ace-eth estrad-fe oral tablet chewable	3		PREMARIN VAGINAL	2	
norethindrone acetate oral	1		PREMPHASE	3	
norethindrone acet-ethinyl est	1		PREMPRO	3	
norethindrone oral	1		progesterone intramuscular	1	
norethindrone-eth estradiol	3		progesterone oral	1	
norethindron-ethinyl estradiol-fe	3		PROMETRIUM	3	
norethin-eth estradiol-fe	3		PROVERA	3	
norgestimate-eth estradiol	1		react	1	
norgestimate-ethinyl estradiol triphasic	1		reclipsen	1	
norlyroc	1		rivelsa	3	
nortrel 0.5/35 (28)	1		SAFYRAL	3	
nortrel 1/35 (21)	1		setlakin	1	
			sharobel	1	
			simliya	1	
			simpesse	1	
			SKYLA	2	
			SLYND	3	

Drug Name	Drug Tier	Notes	Drug Name	Drug Tier	Notes
sprintec 28	1		vylibra	1	
sronyx	1		wera	1	
syeda	1		wymzya fe	3	
take action	1		xulane	1	
tarina 24 fe	1		YASMIN 28	3	
tarina fe 1/20 eq	1		YAZ	3	
taysofy	3		yuvafem	1	
TAYTULLA CAPSULE 1-20 MG-MCG(24) ORAL	3		zafemy	1	
TAYTULLA CAPSULE 1-20 MG-MCG(24) ORAL	3	PA	zovia 1/35 (28)	1	
			zumandimine	1	
tilia fe	3		Hormonal Agents - Thyroid		
tri-estarylla	1		ADTHYZA	3	
tri-legest fe	3		ARMOUR THYROID	3	
tri-linyah	1		CYTOMEL	3	
tri-lo-estarylla	1		ERMEZA	3	PA
tri-lo-marzia	1		euthyrox	3	
tri-lo-mili	1		levo-t	3	
tri-lo-sprintec	1		LEVOTHYROXINE SODIUM ORAL CAPSULE	3	
tri-mili	1		levothyroxine sodium oral tablet	1	
tri-nymyo	1		levoxyl	3	
tri-sprintec	1		liothyronine sodium oral	1	
trivora (28)	1		methimazole oral	1	
tri-vylibra	1		NIVA THYROID	3	
tri-vylibra lo	1		NP THYROID	3	
turqoz	1		propylthiouracil oral	1	
TWIRLA	3		SYNTHROID	3	
tyblume	1		THYQUIDITY	3	
tydemy	3		THYROID ORAL	3	
VAGIFEM	3		TIROSINT	3	
velivet	1		TIROSINT-SOL	3	
vestura	1		unithroid	3	
vienna	1		Immunological Agents - Drugs for Immune System Stimulation or Suppression		
viorele	1		ABRILADA (1 PEN)	3	PA; QL
VIVELLE-DOT	3		ABRILADA (2 PEN)	3	PA; QL
volnea	1				
vyfemla	1				

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Drug Name	Drug Tier	Notes	Drug Name	Drug Tier	Notes
ABRILADA (2 SYRINGE)	3	PA; QL	BENLYSTA SUBCUTANEOUS	3	PA; QL
ACTEMRA ACTPEN	3	PA; QL	BERINERT	2	PA; QL
ACTEMRA SUBCUTANEOUS	3	PA; QL	CELLCEPT	3	
ACTIMMUNE	3	QL	CIMZIA	3	PA; QL
ADALIMUMAB-AACF (2 PEN)	3	PA; QL	CIMZIA (2 SYRINGE)	3	PA; QL
ADALIMUMAB-AATY (1 PEN)	3	PA; QL	CIMZIA STARTER KIT	3	PA; QL
ADALIMUMAB-AATY (2 PEN)	3	PA; QL	CINRYZE	3	PA; QL
ADALIMUMAB-AATY (2 SYRINGE)	3	PA; QL	COSENTYX (300 MG DOSE)	2	PA; QL
ADALIMUMAB-ADAZ	3	PA; QL	COSENTYX 150 MG/ML SUBCUTANEOUS	2	PA; QL
ADALIMUMAB-ADBM (2 PEN)	3	PA; QL	COSENTYX SENSOREADY (300 MG)	2	PA; QL
ADALIMUMAB-ADBM (2 SYRINGE)	3	PA; QL	COSENTYX SENSOREADY PEN	2	PA; QL
ADALIMUMAB-ADBM(CD/UC/HS STRT)	3	PA; QL	COSENTYX UNOREADY	2	PA; QL
ADALIMUMAB-ADBM(PS/UV STARTER)	3	PA; QL	CUTAQUIG	3	PA; QL
ADALIMUMAB-FKJP	3	PA; QL	CUVITRU	2	PA; QL
ADALIMUMAB-FKJP (2 SYRINGE)	3	PA; QL	cyclosporine modified	1	
ADALIMUMAB-RYVK (2 PEN)	3	PA; QL	cyclosporine oral	1	
AMJEVITA	2	PA; QL	CYLTEZO (2 PEN)	3	PA; QL
AMJEVITA-PED 10KG TO <15KG	2	PA; QL	CYLTEZO (2 SYRINGE)	3	PA; QL
AMJEVITA-PED 15KG TO <30KG	2	PA; QL	CYLTEZO-CD/UC/HS STARTER	3	PA; QL
ANTIVENIN LATRODECTUS MACTANS	3		CYLTEZO-PSORIASIS/UV STARTER	3	PA; QL
ARAVA	3		ENBREL	2	PA; QL
ARCALYST	3	PA; QL	ENBREL MINI	2	PA; QL
ASTAGRAF XL	3		ENBREL SURECLICK	2	PA; QL
AZASAN	3		ENSPRYNG	3	PA; QL
azathioprine oral tablet 100 mg, 75 mg	3		ENTYVIO SUBCUTANEOUS	3	PA; QL
azathioprine oral tablet 50 mg	1		ENVARSUS XR	2	
			everolimus oral tablet 0.25 mg, 0.5 mg, 0.75 mg, 1 mg	3	QL
			FIRAZYR	3	PA; QL
			gengraf	1	
			HADLIMA	3	PA; QL

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Drug Name	Drug Tier	Notes	Drug Name	Drug Tier	Notes
HADLIMA PUSHTOUCH	3	PA; QL	IDACIO-PSORIASIS STARTER	3	PA; QL
HAEGARDA	3	PA; QL	IMO GAM RABIES-HT	3	
HEPAGAM B	3		IMURAN	3	
HIZENTRA	2	PA; QL	JOENJA	3	PA; QL
HULIO (2 PEN)	3	PA; QL	JYLAMVO	3	PA
HULIO (2 SYRINGE)	3	PA; QL	KEDRAB	3	
HUMIRA (2 PEN)	2	PA; QL	KEVZARA	3	PA; QL
HUMIRA (2 SYRINGE)	2	PA; QL	KINERET	3	PA; QL
HUMIRA-CD/UC/HS STARTER	2	PA; QL	leflunomide oral	1	
HUMIRA-PED<40KG CROHNS STARTER	2	PA; QL	LUPKYNIS	3	PA; QL
HUMIRA-PED>/=40KG CROHNS START	2	PA; QL	methotrexate sodium	1	
HUMIRA-PED>/=40KG UC STARTER	2	PA; QL	methotrexate sodium (pf)	1	
HUMIRA-PSORIASIS/UVEIT STARTER	2	PA; QL	mycophenolate mofetil oral	1	
HYPERRAB INJECTION SOLUTION 1500 UNIT/5ML, 300 UNIT/ML	3		mycophenolate sodium	1	
HYPERRAB INJECTION SOLUTION 900 UNIT/3ML	3	PA	mycophenolic acid	1	
HYPERTET	3		MYFORTIC	3	
HYQVIA	2	PA; QL	NABI-HB	2	
HYRIMOZ	3	PA; QL	NEORAL	3	
HYRIMOZ-CROHNS/UC STARTER	3	PA; QL	OLUMIANT	3	PA; QL
HYRIMOZ-PED<40KG CROHN STARTER	3	PA; QL	OMVOH SUBCUTANEOUS	3	PA; QL
HYRIMOZ-PED>/=40KG CROHN START	3	PA; QL	ORENCIA CLICKJECT	2	PA; QL
HYRIMOZ-PLAQUE PSORIASIS START	3	PA; QL	ORENCIA SUBCUTANEOUS	2	PA; QL
icatibant acetate	2	PA; QL	ORLADEYO	3	PA; QL
IDACIO (2 PEN)	3	PA; QL	OTEZLA	2	PA; QL
IDACIO (2 SYRINGE)	3	PA; QL	OTREXUP		
IDACIO-CROHNS/UC STARTER	3	PA; QL	SUBCUTANEOUS SOLUTION AUTO-INJECTOR 10 MG/0.4ML, 12.5 MG/0.4ML, 15 MG/0.4ML, 17.5 MG/0.4ML, 22.5 MG/0.4ML, 25 MG/0.4ML	3	PA
			OTREXUP		
			SUBCUTANEOUS		
			SOLUTION AUTO-		
			INJECTOR 20 MG/0.4ML		
			PROGRAF ORAL		

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Drug Name	Drug Tier	Notes	Drug Name	Drug Tier	Notes	
RAPAMUNE	3		ZORTRESS	3	QL	
RASUVO	2		ZYMFENTRA (1 PEN)	3	PA; QL	
REZUROCK	3	PA; QL	ZYMFENTRA (2 PEN)	3	PA; QL	
RHOPHYLAC	3		ZYMFENTRA (2 SYRINGE)	3	PA; QL	
RIDAURA	2	QL	Immunological Agents - Drugs for Vaccination			
RINVOQ	3	PA; QL	ABRYSVO	2		
RUCONEST	3	PA; QL	ACTHIB	2		
sajazir	2	PA; QL	ADACEL	2		
SANDIMMUNE ORAL	3		AFLURIA QUADRIVALENT	1		
SILIQ	3	PA; QL	AREXVY	2		
SIMLANDI (1 PEN)	3	PA; QL	BEXSERO	2		
SIMLANDI (2 PEN)	3	PA; QL	BIOTHRAX	3		
SIMPONI	3	PA; QL	BOOSTRIX	2		
sirolimus oral	1		COMIRNATY	2		
SKYRIZI PEN	2	PA; QL	DAPTACEL	2		
SKYRIZI SUBCUTANEOUS	2	PA; QL	ENGERIX-B	2		
SOTYKTU	3	PA; QL	FLUAD QUADRIVALENT	1		
SPEVIGO SUBCUTANEOUS	3	PA; QL	FLUARIX QUADRIVALENT	1		
STELARA SUBCUTANEOUS	2	PA; QL	FLUBLOK QUADRIVALENT	1		
tacrolimus oral	1		FLUCELVAX QUADRIVALENT	1		
TAKHZYRO	3	PA; QL	FLULALVAL QUADRIVALENT	1		
TALTZ	3	PA; QL	FLUMIST QUADRIVALENT	1		
TREMFYA	2	PA; QL	FLUZONE HIGH-DOSE QUADRIVALENT	1		
TREXALL	3		FLUZONE QUADRIVALENT	1		
VARIZIG	3		GARDASIL 9	2		
VELSIPITY	3	PA; QL	HAVRIX	2		
XATMEP	3	QL	HEPLISAV-B	2		
XELJANZ	2	PA; QL	HIBERIX	2		
XELJANZ XR	2	PA; QL	INFANRIX	2		
XEMBIFY	3	PA; QL	IPOL	2		
YUFLYMA (1 PEN)	3	PA; QL				
YUFLYMA (2 PEN)	3	PA; QL				
YUFLYMA (2 SYRINGE)	3	PA; QL				
YUFLYMA-CD/UC/HS STARTER	3	PA; QL				
YUSIMRY	3	PA; QL				

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Drug Name	Drug Tier	Notes	Drug Name	Drug Tier	Notes	
KINRIX	2		VAXNEUVANCE	2		
MENQUADFI	2		Inflammatory Bowel Disease Agents			
MENVEO	2		ANALPRAM-HC	3		
M-M-R II	2		anucort-hc	3		
MODERNA COVID-19 VAC 6M-11Y	2		ANUSOL-HC EXTERNAL	3		
NOVAVAX COVID-19 VACCINE	2		anusol-hc rectal	3		
PEDIARIX	2		APRISO	1		
PEDVAX HIB	2		AZULFIDINE	3		
PENBRAYA	2		AZULFIDINE EN-TABS	3		
PENTACEL	2		balsalazide disodium	1		
PFIZER COVID-19 VAC-TRIS 5-11Y	2		budesonide er	3	PA; QL	
PFIZER COVID-19 VAC-TRIS 6M-4Y	2		budesonide oral (generic Entocort)	1		
PNEUMOVAX 23	2		budesonide rectal	3		
PREHEVBRIOD	2		CANASA	3		
PREVNAR 20	2		COLAZAL	3		
PRIORIX	2		CORTENEMA	3		
PROQUAD	2		CORTIFOAM	2		
QUADRACEL	2		DELZICOL	3	PA	
RECOMBIVAX HB	2		DIPENTUM	3	PA; QL	
ROTARIX	2		EOHILIA	3	PA; QL	
ROTATEQ	2		hemmorex-hc rectal suppository 25 mg	3		
SHINGRIX	2		HEMMOREX-HC RECTAL SUPPOSITORY 30 MG	3		
SPIKEVAX	2		hydrocortisone (perianal) external cream 1 %	3		
TDVAX	2		hydrocortisone (perianal) external cream 2.5 %	1		
TENIVAC	2		hydrocortisone ace-pramoxine external cream 1-1 %	3		
TETANUS-DIPHTHERIA TOXOIDS TD	2		hydrocortisone acetate rectal	3		
TRUMENBA	2		hydrocortisone rectal	1		
TWINRIX	3		LIALDA	3		
VAQTA INTRAMUSCULAR SUSPENSION 50 UNIT/ML	2		lidocaine-hydrocort (perianal)	3		
VARIVAX	2		VAXELIS	2		

Drug Name	Drug Tier	Notes	Drug Name	Drug Tier	Notes	
LIDOCAINE-HYDROCORTISONE ACE RECTAL GEL	3		ATELVIA	3		
lidocaine-hydrocortisone ace rectal kit 3-0.5 %, 3-1 %	3		BINOSTO	3		
LIDOCORT	3		calcitonin (salmon) injection	3		
mesalamine er oral capsule 500 mg	1	PA	calcitonin (salmon) nasal	1		
mesalamine er oral capsule 0.375 gm	1		FORTEO	3	PA; QL	
mesalamine oral capsule delayed release 400 mg	1	ST	FOSAMAX	3		
mesalamine oral tablet delayed release 1.2 gm	1		FOSAMAX PLUS D	3		
mesalamine oral tablet delayed release 800 mg	3	PA	ibandronate sodium oral	1		
mesalamine rectal	1		MIACALCIN	3		
mesalamine-cleanser	3		risedronate sodium oral tablet	1		
PENTASA ORAL CAPSULE EXTENDED RELEASE 250 MG	2	PA	risedronate sodium oral tablet delayed release	3		
PENTASA ORAL CAPSULE EXTENDED RELEASE 500 MG	1	PA	teriparatide	3	PA; QL	
PROCORT	3		teriparatide (recombinant) subcutaneous solution pen-injector 600 mcg/2.4ml	3	PA; QL	
PROCTOCORT	3		TERIPARATIDE (RECOMBINANT) SUBCUTANEOUS SOLUTION PEN-INJECTOR 620 MCG/2.48ML	3	PA; QL	
PROCTOFOAM HC	2		TYMLOS	3	PA	
procto-med hc	1		Metabolic Bone Disease Agents - Other			
proctosol hc	1		calcitriol oral	1		
proctozone-hc	1		cinacalcet hcl	1	PA	
ROWASA	3		doxercalciferol oral	3		
SFROWASA	3		paricalcitol oral	3		
sulfasalazine oral	1		RAYALDEE	3	PA	
TARPEYO	3	PA; QL	ROCALTROL	3		
UCERIS ORAL	3	PA; QL	SENSIPAR	3	PA	
UCERIS RECTAL	3		ZEMPLAR ORAL	3		
Metabolic Bone Disease Agents - Drugs for Osteoporosis			Miscellaneous Therapeutic Agents			
ACTONEL	3		ADVOCATE INSULIN PEN NEEDLE	1		
alendronate sodium	1		AEROCHAMBER HOLDING CHAMBER	2		

Drug Name	Drug Tier	Notes	Drug Name	Drug Tier	Notes
AEROCHAMBER MINI CHAMBER	2		BREATHE COMFORT CHAMBER/CHILD	2	
AEROCHAMBER MV	2		BREATHE EASE LARGE	2	
AEROCHAMBER PLS FLOVU MTHPIECE	2		BREATHE EASE MEDIUM	2	
AEROCHAMBER PLUS FLO-VU INTERM	2		BREATHE EASE SMALL	2	
AEROCHAMBER PLUS FLO-VU LARGE DEVICE	2		BREATHERITE VALVED MDI CHAMBER	2	
AEROCHAMBER PLUS FLO-VU MEDIUM DEVICE	2		BYLVAY	3	PA; QL
AEROCHAMBER PLUS FLO-VU SMALL DEVICE	2		BYLVAY (PELLETS)	3	PA; QL
AEROCHAMBER PLUS FLOW VU	2		CAYA	2	
AEROCHAMBER W/FLOWSIGNAL	2		CLEVER CHOICE HOLDING CHAMBER	2	
ALCOHOL PREP PADS PAD , 70 %	1		COMFORT EZ PRO PEN NEEDLES	1	
ALCOHOL PREP PADS SHEET 70 %	1		COMPACT SPACE CHAMBER	2	
AQINJECT PEN NEEDLE	1		COMPACT SPACE CHAMBER/LG MASK	2	
ASSURE ID DUO PRO PEN NEEDLES	1		COMPACT SPACE CHAMBER/MED MASK	2	
ASSURE ID PRO PEN NEEDLES	1		COMPACT SPACE CHAMBER/SM MASK	2	
AUM ALCOHOL PREP PADS	1		CYTOTINE ORAL POWDER	3	
AUM INSULIN SAFETY PEN NEEDLE	1		deferoxamine mesylate injection solution reconstituted 500 mg	1	
AUM MINI INSULIN PEN NEEDLE	1		DESFERAL	3	
AUM PEN NEEDLE	1		DOJOLVI	3	PA; QL
AUM READYGARD DUO PEN NEEDLE	1		DROPSAFE ALCOHOL PREP	1	
AUM SAFETY PEN NEEDLE	1		EASIVENT	2	
BD AUTOSHIELD DUO PEN NEEDLES	1		EDETA CALCIUM DISODIUM INJECTION	3	
BD ULTRA-FINE PEN NEEDLES	1		EMBRACE PEN NEEDLES 30G X 5 MM , 30G X 8 MM , 31G X 6 MM , 31G X 8 MM , 32G X 4 MM	1	
BREATHE COMFORT CHAMBER/ADULT	2		ENDARI	3	PA; QL
			ergoloid mesylates oral	3	
			FEMCAP	2	

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Drug Name	Drug Tier	Notes	Drug Name	Drug Tier	Notes
FIRDAPSE	3	PA; QL	OMNIPOD 5 G6 INTRO (GEN 5)	3	PA
FLEXICHAMBER	2		OMNIPOD 5 G6 PODS (GEN 5)	3	PA
FLEXICHAMBER ADULT MASK/SMALL	2		OMNIPOD 5 G7 INTRO (GEN 5)	3	PA; QL
FLEXICHAMBER CHILD MASK/LARGE	2		OMNIPOD 5 G7 PODS (GEN 5)	3	PA
GLUCAGEN DIAGNOSTIC	2		OMNIPOD CLASSIC PODS (GEN 3)	3	PA
GLUCAGON HCL (DIAGNOSTIC)	2		OMNIPOD DASH INTRO (GEN 4)	3	PA
GRASTEK	3	PA	OMNIPOD DASH PDM (GEN 4)	3	PA
INCONTROL ULTICARE PEN NEEDLES	1		OMNIPOD DASH PODS (GEN 4)	3	PA
INSULIN PEN NEEDLES 29G X 12.7MM , 29G X 12MM , 29G X 5MM , 29G X 8MM , 30G X 5 MM , 30G X 8 MM , 31G X 4 MM , 31G X 5 MM , 31G X 6 MM , 31G X 8 MM , 32G X 4 MM , 32G X 5 MM , 32G X 6 MM , 32G X 8 MM , 33G X 4 MM , 33G X 5 MM , 33G X 6 MM	1		OMNIPOD GO	3	PA
			OMNIPOD POD PALS	3	PA
			OPTICHAMBER DIAMOND	2	
			OPTICHAMBER DIAMOND-LG MASK	2	
			OPTICHAMBER DIAMOND-MD MASK	2	
			OPTICHAMBER DIAMOND-SM MASK	2	
IWLFIN	3	PA; QL	ORALAIR	3	PA
KERENDIA	3	PA; QL	ORALAIR ADULT STARTER PACK	3	PA
LIVMARLI	3	PA; QL	ORALAIR CHILDRENS STARTER PACK	3	PA
methergine	1		OXBRYTA	3	PA; QL
methylergonovine maleate	1		PALFORZIA	3	PA; QL
MICROCHAMBER DEVICE	2		PANDA MASK LARGE	2	
NOVOFINE PEN NEEDLE	1		PANDA MASK MEDIUM	2	
NOVOFINE PLUS PEN NEEDLE	1		PANDA MASK SMALL	2	
NOZIN NASAL SANITIZER	1		PARI VORTEX ADULT MASK	2	
NOZIN NASAL SANITIZER POPSWAB	1		PEDIATRIC PANDA MASK	2	
ODACTRA	3	PA	PHEXXI	3	
			PIP PEN NEEDLES 31G X 5MM	1	

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Drug Name	Drug Tier	Notes	Drug Name	Drug Tier	Notes
PIP PEN NEEDLES 32G X 4MM	1		WIDE-SEAL DIAPHRAGM 70	2	
pocket spacer	2		WIDE-SEAL DIAPHRAGM 75	2	
PRO COMFORT SPACER ADULT	2		WIDE-SEAL DIAPHRAGM 80	2	
PRO COMFORT SPACER CHILD	2		WIDE-SEAL DIAPHRAGM 85	2	
PRO COMFORT SPACER INFANT	2		WIDE-SEAL DIAPHRAGM 90	2	
PROCARE SPACER/ADULT MASK	2		WIDE-SEAL DIAPHRAGM 95	2	
PROCARE SPACER/CHILD MASK	2		XPHOZAH	3	PA; QL
PURE COMFORT SAFETY PEN NEEDLE	1		ZILBRYSQ	3	PA; QL
PURE COMFORT SPACER CHAMBER	2		ZOKINVY	3	PA; QL
RAGWITEK	3	PA	Ophthalmic Agents - Drugs for Eye Allergy, Infection and Inflammation		
RAYA SURE PEN NEEDLE	1		ACULAR	2	
SAFETY PEN NEEDLES	1		ACULAR LS	3	
SOHONOS	3	PA; QL	ACUVAIL	3	
TAVNEOS	3	PA; QL	ALOCRIL	3	
TREE MIX 9	3		ALOMIDE	2	
UNIFINE PROTECT PEN NEEDLE	1		ALREX	3	
VEOZAH	3	PA	AZASITE	3	
VERIFINE INSULIN PEN NEEDLE	1		azelastine hcl ophthalmic	1	
VERIFINE PLUS PEN NEEDLE	1		bacitracin ophthalmic	1	
V-GO 20	3	PA	bepotastine besilate	3	
V-GO 30	3	PA	BEPREVE	3	
V-GO 40	3	PA	BESIVANCE	3	
VISTOGARD	3	PA; QL	BETADINE OPHTHALMIC PREP	3	
VORTEX VALVED HOLDING CHAMBER	2		bromfenac sodium (once-daily)	3	
WIDE-SEAL DIAPHRAGM 60	2		bromfenac sodium ophthalmic	3	
WIDE-SEAL DIAPHRAGM 65	2		BROMSITE	3	
			CILOXAN	2	
			ciprofloxacin hcl ophthalmic	1	
			cromolyn sodium ophthalmic	1	

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Drug Name	Drug Tier	Notes	Drug Name	Drug Tier	Notes
dexamethasone sodium phosphate ophthalmic	1		neomycin-polymyxin-dexameth ophthalmic ointment	1	
diclofenac sodium ophthalmic	1		neomycin-polymyxin-dexameth ophthalmic suspension 3.5-10000-0.1	1	
difluprednate	1		neomycin-polymyxin-hc ophthalmic	3	
DUREZOL	3		NEVANAC	3	
epinastine hcl	3		EYSUVIS	3	PA
erythromycin ophthalmic	1		OCUFLOX	3	
FLAREX	3		ofloxacin ophthalmic	1	
fluorometholone	1		olopatadine hcl ophthalmic solution 0.2 %	3	
flurbiprofen sodium	1		FML FORTE	2	
FML LIQUIFILM	3		PRED FORTE	3	
gatifloxacin ophthalmic	1		PRED MILD	2	
gentamicin sulfate ophthalmic	1		PREDNISOL ACE-MOXIFLOX-BROMFEN	3	
ILEVRO	3		prednisolone acetate ophthalmic	1	
INVELTYS	3		ketorolac tromethamine ophthalmic	1	
			PREDNISOLONE ACETATE-NEPAFENAC	3	
KLARITY-A	3		KLARITY-L	3	
levofloxacin ophthalmic	3		LOTEMAX	3	
LOTEMAX	3		PREDNISOLONE ACET-MOXIFLOXACIN	3	
LOTEMAX SM	3		prednisolone sodium phosphate ophthalmic	3	
lotepranol etabonate	3		PREDNISOLON-GATIFLOX-BROMFENAC	3	
MAXIDEX	3		MAXITROL OPHTHALMIC OINTMENT	3	
MAXITROL OPHTHALMIC SUSPENSION 0.1 %	3		PREDNISOLON-MOXIFLOX-BROMFENAC	3	
moxifloxacin hcl (2x day)	1		PREDNISOLON-MOXIFLOX-NEPAFENAC	3	
moxifloxacin hcl ophthalmic	1		PROLENSA	3	
NATACYN	2		sulfacetamide sodium ophthalmic	1	
			TOBRADEX	2	
			TOBRADEX ST	3	
			tobramycin ophthalmic	1	

Drug Name	Drug Tier	Notes	Drug Name	Drug Tier	Notes
tobramycin-dexamethasone	1		dorzolamide hcl-timolol mal	1	
TOBREX	2		dorzolamide hcl-timolol mal pf	3	
trifluridine	1		IOPIDINE	3	
UPNEEQ	3	PA	ISTALOL	3	
VIGAMOX	2		IZUZEH	3	
XDEMVY	3	PA; QL	KEVEYIS	3	PA; QL
ZERVIATE	3		latanoprost ophthalmic	1	
ZIRGAN	3		LATANOPROST-TIMOLOL MALEATE	3	
Ophthalmic Agents - Drugs for Glaucoma			levobunolol hcl	1	
acetazolamide er	1		LUMIGAN	2	
acetazolamide oral	1		methazolamide oral	1	
ALPHAGAN P	3		ORMALVI	3	PA; QL
apraclonidine hcl	3		PHOSPHOLINE IODIDE	3	
AZOPT	3		pilocarpine hcl ophthalmic	1	
betaxolol hcl ophthalmic	1		RHOPRESSA	3	PA
BETIMOL	3		ROCKLATAN	3	PA
BETOPTIC-S	2		SIMBRINZA	3	
bimatoprost ophthalmic	1		tafluprost (pf)	3	
brimonidine tartrate ophthalmic solution 0.1 %, 0.15 %	3		timolol maleate (once-daily)	3	
brimonidine tartrate ophthalmic solution 0.2 %	1		timolol maleate ocudose	3	
brimonidine tartrate-timolol	3		timolol maleate ophthalmic	1	
BRIMONIDINE-DORZOLAMIDE	3		timolol maleate pf	3	
brinzolamide	1		TIMOLOL-BRIMON-DORZOL-LATANOPR	3	
carteolol hcl	1		TIMOLOL-BRIMONIDINE-DORZOLAMIDE	3	
COMBIGAN	3		TIMOLOL-DORZOLAMID-LATANOPROST	3	
COSOPT	3		TIMOLOL-OCUDOSE	3	
COSOPT PF	3		TRAVATAN Z	3	
dichlorphenamide	3	PA; QL	travoprost (bak free)	1	
DORZOLAMIDE HCL SOLUTION 2 % OPTHALMIC	3		VURITY	3	PA
dorzolamide hcl solution 2 % ophthalmic	1		VYZULTA	3	PA

Drug Name	Drug Tier	Notes	Drug Name	Drug Tier	Notes
XALATAN	3		neomycin-polymyxin-gramicidin	1	
XELPROS	3		neo-polycin	3	
ZIOPTAN	3		neo-polycin hc	1	
Ophthalmic Agents - Drugs for Miscellaneous Eye Conditions			OXERVATE	3	PA; QL
ACUICYN	3		phenylephrine hcl ophthalmic	1	
AKTEN	3		polycin	1	
ALCAINE	3		polymyxin b-trimethoprim	1	
altacaine	3		PREDNISOLONE-BROMFENAC	3	
altafrin	1		PREDNISOLONE-GATIFLOXACIN	3	
atropine sulfate ophthalmic ointment	1		PREDNISOLONE-MOXIFLOXACIN	3	
ATROPINE SULFATE OPHTHALMIC SOLUTION 0.01 %	1		proparacaine hcl ophthalmic	3	
atropine sulfate ophthalmic solution 1 %	1		RESTASIS	3	PA
AVENOVA	3		RESTASIS MULTIDOSE	3	PA
bacitracin-polymyxin b	1		sulfacetamide-prednisolone	1	
bacitra-neomycin-polymyxin-hc	1		tetracaine hcl ophthalmic	3	
CEQUA	2	PA	TROPICAMIDE-CYCLOPENTOLATE-PE	3	
CYCLOGYL OPHTHALMIC SOLUTION 0.5 %	2		TROPICAMIDE-PHENYLEPHRINE	3	
CYCLOGYL OPHTHALMIC SOLUTION 1 %, 2 %	3		TROPIC-PROPARAC-PE-KETOROLAC	3	
CYCLOMYDRIL	3		TYRVAYA	3	PA
cyclopentolate hcl ophthalmic	1		VERKAZIA	3	PA; QL
cyclosporine ophthalmic	1	PA	VEVYE	3	PA; QL
CYSTADROPS	3	PA	XIIDRA	2	PA
CYSTARAN	3		ZYLET	3	
Otic Agents - Drugs for Ear Conditions					
GELFILM OPHTHALMIC	3		acetic acid otic	1	
homatropaire	1		CETRAXAL	3	
KLARITY-C DROPS	3	PA; QL	CIPRO HC	2	
LACRISERT	2		ciprofloxacin hcl otic	3	
MIEBO	3	PA; QL	ciprofloxacin-dexamethasone	1	
neomycin-bacitracin zn-polymyx	3				

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Drug Name	Drug Tier	Notes	Drug Name	Drug Tier	Notes
CIPROFLOXACIN-FLUOCINOLONE PF	3		flunisolide nasal	1	
CORTISPORIN-TC	3		guaifenesin-codeine	2	QL
DERMOTIC	3		HYCODAN	3	
flac	1		hydrocod poli-chlorphe poli er	3	
fluocinolone acetonide otic	1		hydrocodone bit- homatrop mbr	1	
hydrocortisone-acetic acid	3		hydromet	1	
neomycin-polymyxin-hc otic	1		HYPERSAL	3	
ofloxacin otic	1		INFASURF	3	
OTOVEL	3		ipratropium bromide nasal	1	
PRAMOTIC	3		KARBINAL ER	3	
Respiratory Tract / Pulmonary Agents - Drugs for Allergies, Cough, Cold			levocetirizine dihydrochloride oral	1	
ADRENALIN NASAL	3		maxi-tuss ac	2	QL
azelastine hcl nasal	1		MICLARA LQ	3	
azelastine-fluticasone	3		mometasone furoate nasal	3	PA
benzonatate oral capsule 100 mg, 200 mg	1		nebusal inhalation nebulization solution 3 %	1	
benzonatate oral capsule 150 mg	3		NEBUSAL INHALATION NEBULIZATION SOLUTION 6 %	3	
BROMFED DM	3		olopatadine hcl nasal	1	
BROMPHENIRAMINE MALEATE	3		OMNARIS	3	PA
INTRAMUSCULAR			potassium iodide oral	2	
carbinoxamine maleate	1		promethazine vc	1	
cetirizine hcl oral solution	3		promethazine-codeine oral solution	3	PA
CLARINEX	3		promethazine-dm	1	
CLARINEX-D 12 HOUR	3		pseudoephedrine- bromphen-dm	3	
clemastine fumarate oral	1		pulmosal	1	
CUROSURF	3		QNASL	3	PA
cyproheptadine hcl oral	1		QNASL CHILDRENS	3	PA
desloratadine	1		RYALTRIS	3	PA
diphenhydramine hcl injection	1		RYCLORA	3	
diphenhydramine hcl oral elixir	3		ryvent	1	
DYMISTA	3				
epinephrine hcl (nasal)	3				

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Drug Name	Drug Tier	Notes	Drug Name	Drug Tier	Notes
sodium chloride inhalation nebulization solution 0.9 %, 3 %, 7 %	1		ALBUTEROL SULFATE NEBULIZATION SOLUTION (5 MG/ML) 0.5% INHALATION	3	
sodium chloride inhalation nebulization solution 10 %	3		albuterol sulfate oral	1	
SSKI	2		ALVESCO	2	
SURVANTA	2		ANORO ELLIPTA	3	PA
TUXARIN ER	3	QL	arformoterol tartrate	3	PA
XHANCE	3	PA	ARNUITY ELLIPTA	3	PA
ZETONNA	3	PA	ASMANEX (120 METERED DOSES)	2	ST
Respiratory Tract / Pulmonary Agents - Drugs for Asthma and Other Lung Conditions			ASMANEX (14 METERED DOSES)	2	ST
ACCOLATE	3		ASMANEX (30 METERED DOSES)	2	ST
acetylcysteine inhalation	1		ASMANEX (60 METERED DOSES)	2	ST
ADVAIR DISKUS	3		ASMANEX HFA	2	ST
ADVAIR HFA	2		ATROVENT HFA	2	
AIRDUO RESPICLICK 113/14	3	PA	AUVI-Q	3	PA
AIRDUO RESPICLICK 232/14	3	PA	BEVESPI AEROSPHERE	3	PA
AIRDUO RESPICLICK 55/14	3	PA	BREO ELLIPTA	3	PA
AIRSUPRA	3	PA	breyna	1	PA; QL
albuterol sulfate hfa aerosol solution 108 (90 base) mcg/act inhalation	1	QL	BREZTRI AEROSPHERE	3	PA
albuterol sulfate hfa aerosol solution 108 (90 base) mcg/act inhalation	3	QL	BROVANA	3	PA
albuterol sulfate hfa aerosol solution 108 (90 base) mcg/act inhalation	3	QL	budesonide inhalation	1	
ALBUTEROL SULFATE HFA AEROSOL SOLUTION 108 (90 BASE) MCG/ACT INHALATION	1	QL	budesonide-formoterol fumarate	1	PA; QL
albuterol sulfate inhalation nebulization solution (2.5 mg/3ml) 0.083%, 0.63 mg/3ml, 1.25 mg/3ml, 2.5 mg/0.5ml	1		COMBIVENT RESPIMAT	2	
albuterol sulfate nebulization solution (5 mg/ml) 0.5% inhalation	1		cromolyn sodium inhalation	1	
			DALIRESP	3	
			DUAKLIR PRESSAIR	3	PA
			DULERA	3	PA; QL
			elixophyllin	1	
			epinephrine injection solution auto-injector	1	
			EPINEPHRINE PROFESSIONAL	3	
			EPINEPHRINESNAP	3	

Drug Name	Drug Tier	Notes	Drug Name	Drug Tier	Notes
EPINEPHRINESNAP-EMS	3		LEVALBUTEROL HFA INHALATION AEROSOL 45 MCG/ACT	3	QL
EPINEPHRINESNAP-V	3		montelukast sodium oral	1	
EPIPEN 2-PAK	3		NUCALA SUBCUTANEOUS SOLUTION AUTO-INJECTOR	3	PA; QL
EPIPEN JR 2-PAK	3		NUCALA SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	3	PA; QL
EPISNAP	3		OFEV	2	PA; QL
ESBRIET	3	PA; QL	PERFOROMIST	3	
FASENRA PEN	3	PA; QL	pirfenidone oral capsule	2	PA; QL
FLUTICASONE FUROATE-VILANTEROL	3	PA	pirfenidone oral tablet 267 mg, 801 mg	1	PA; QL
FLUTICASONE PROPIONATE DISKUS	2	PA	pirfenidone oral tablet 534 mg	2	PA; QL
FLUTICASONE PROPIONATE HFA INHALATION AEROSOL 110 MCG/ACT, 220 MCG/ACT	2	PA	PROAIR RESPICLICK	3	QL
FLUTICASONE PROPIONATE HFA INHALATION AEROSOL 44 MCG/ACT	2	PA	PROVENTIL HFA	3	QL
FLUTICASONE-SALMETEROL INHALATION AEROSOL	2		PULMICORT FLEXHALER	3	PA
fluticasone-salmeterol inhalation aerosol powder breath activated 100-50 mcg/act, 250-50 mcg/act, 500-50 mcg/act	1		PULMICORT SUSPENSION	3	
			QVAR REDIHALER	3	PA
			roflumilast	3	
			SEREVENT DISKUS	2	ST
FLUTICASONE-SALMETEROL INHALATION AEROSOL POWDER BREATH ACTIVATED 113-14 MCG/ACT, 232-14 MCG/ACT, 55-14 MCG/ACT	3	PA	SINGULAIR	3	
formoterol fumarate inhalation	3		SPIRIVA HANDIHALER	1	
INCRUSE ELLIPTA	3	PA	SPIRIVA RESPIMAT INHALATION AEROSOL SOLUTION 1.25 MCG/ACT	2	ST
ipratropium bromide inhalation	1		SPIRIVA RESPIMAT INHALATION AEROSOL SOLUTION 2.5 MCG/ACT	2	
ipratropium-albuterol	1		STIOLTO RESPIMAT	2	
isoproterenol hcl injection	3		STRIVERDI RESPIMAT	2	PA
levalbuterol hcl inhalation	3		SYMBICORT	3	PA; QL
			terbutaline sulfate injection	3	

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Drug Name	Drug Tier	Notes	Drug Name	Drug Tier	Notes
terbutaline sulfate oral	1		tobramycin inhalation nebulization solution 300 mg/4ml	3	PA; QL
TEZSPIRE SUBCUTANEOUS SOLUTION AUTO-INJECTOR	3	PA; QL	tobramycin nebulization solution 300 mg/5ml inhalation	1	PA; QL
THEO-24	3		TOBRAMYCIN NEBULIZATION SOLUTION 300 MG/5ML INHALATION	3	PA; QL
theophylline er	1		TRIKAFTA	3	PA; QL
theophylline oral	1				
tiotropium bromide monohydrate	1				
TRELEGY ELLIPTA	3	PA	Respiratory Tract / Pulmonary Agents - Drugs for Pulmonary Hypertension		
TUDORZA PRESSAIR	3		ADCIRCA	3	PA; QL
VENTOLIN HFA	3	QL	ADEMPAS	3	PA; QL
wixela inhub	1		alyq	1	
XOLAIR SUBCUTANEOUS SOLUTION AUTO-INJECTOR	3	PA; QL	ambrisentan	1	PA; QL
			bosentan	1	PA; QL
			LETAIRIS	3	PA; QL
XOLAIR SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	3	PA; QL	LIQREV	3	PA; QL
			OPSUMIT	2	PA; QL
			OPSYNVI	3	PA; QL
XOPENEX HFA	3		ORENITRAM	3	PA; QL
YUPELRI	3	PA	ORENITRAM MONTH 1	3	PA; QL
zafirlukast	3		ORENITRAM MONTH 2	3	PA; QL
zileuton er	3	PA; QL	ORENITRAM MONTH 3	3	PA; QL
ZYFLO	3	PA; QL	REVATIO ORAL SUSPENSION RECONSTITUTED	3	PA; QL
Respiratory Tract / Pulmonary Agents - Drugs for Cystic Fibrosis					
BETHKIS	3	PA; QL	REVATIO ORAL TABLET	3	PA
BRONCHITOL	3	PA; QL	sildenafil citrate oral suspension reconstituted	1	PA; QL
BRONCHITOL TOLERANCE TEST	3	PA; QL	sildenafil citrate oral tablet 20 mg	1	PA
CAYSTON	3	PA; QL	tadalafil (pah)	1	
KALYDECO	3	PA; QL	TADLIQ	3	PA; QL
KITABIS PAK	3	PA; QL	TRACLEER	3	PA; QL
ORKAMBI	3	PA; QL	TYVASO	2	PA; QL
PULMOZYME	2		TYVASO DPI INSTITUTIONAL KIT	3	PA; QL
SYMDEKO	3	PA; QL	TYVASO DPI MAINTENANCE KIT	3	PA; QL
TOBI NEBULIZER	3	PA; QL			
TOBI PODHALER	3	PA; QL			

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Drug Name	Drug Tier	Notes	Drug Name	Drug Tier	Notes
TYVASO DPI TITRATION KIT	3	PA; QL	orphenadrine-aspirin-caffeine	3	
TYVASO REFILL	2	PA; QL	ORPHENGESIC FORTE	3	QL
TYVASO STARTER	2	PA; QL	OZOBAX DS	3	
UPTRAVI ORAL	2	PA; QL	ROBAXIN	3	
UPTRAVI TITRATION	2	PA; QL	SOMA	3	PA; QL
VENTAVIS	2	PA; QL	tizanidine hcl oral capsule	3	
WINREVAIR	3	PA; QL	tizanidine hcl oral tablet	1	
Skeletal Muscle Relaxants - Drugs for Muscle Pain and Spasm			ZANAFLEX	3	
AMRIX	3	PA; QL	Sleep Disorder Agents		
BACLOFEN ORAL SOLUTION	3		AMBIEN	3	QL
baclofen oral suspension	3	PA	AMBIEN CR	3	QL
baclofen oral tablet 10 mg, 20 mg, 5 mg	1		AMYTAL SODIUM	3	
baclofen oral tablet 15 mg	3		armodafinil	1	
carisoprodol oral	3	PA; QL	BELSOMRA	3	PA
chlorzoxazone oral tablet 250 mg	1		DAYVIGO	3	PA; QL
chlorzoxazone oral tablet 375 mg, 500 mg, 750 mg	1	QL	doxepin hcl oral tablet	3	
cyclobenzaprine hcl er	3	PA; QL	EDLUAR	3	QL
cyclobenzaprine hcl oral tablet 10 mg, 5 mg	1	QL	eszopiclone	1	QL
cyclobenzaprine hcl oral tablet 7.5 mg	3	QL	flurazepam hcl	1	QL
DANTRIUM ORAL	3		HETLIOZ	3	PA; QL
dantrolene sodium oral	1		HETLIOZ LQ	3	PA; QL
FEXMID	3	QL	LUMRYZ	3	PA; QL
FLEQSUVY	3	PA	LUNESTA	3	QL
LORZONE	3	QL	modafinil oral	1	
LYVISPAH	3	QL	NUVIGIL	3	
metaxalone	3	QL	PROVIGIL	3	
methocarbamol injection	1		QUVIVIQ	3	PA; QL
methocarbamol oral	1	QL	ramelteon	3	
NORGESIC	3		RESTORIL	3	QL
NORGESIC FORTE	3	QL	ROZEREM	3	
orphenadrine citrate er	1	QL	SILENOR	3	
orphenadrine citrate injection	3		SODIUM OXYBATE	3	PA; QL
			SUNOSI	3	PA; QL
			tasimelteon	3	PA; QL
			temazepam oral capsule 15 mg, 30 mg, 7.5 mg	1	QL

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Drug Name	Drug Tier	Notes	Drug Name	Drug Tier	Notes
temazepam oral capsule 22.5 mg	3	QL	ZOLPIDEM TARTRATE ORAL CAPSULE	3	PA; QL
WAKIX	3	PA; QL	zolpidem tartrate oral tablet	1	QL
XYREM	3	PA; QL	zolpidem tartrate sublingual	3	QL
XYWAV	3	PA; QL			
zaleplon	1	QL			
zolpidem tartrate er	3	QL			

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WELLBUTRIN SR.....	22	XOFLUZA (80 MG DOSE)	32	ZAVESCA.....	56
WELLBUTRIN XL.....	22	XOLAIR.....	79	ZAVZPRET.....	24
wera	64	XOLREMDI.....	33	ZEGALOGUE.....	50
wes-phos 250 neutral	53	XOPENEX HFA.....	79	ZEGERID.....	53
WIDE-SEAL DIAPHRAGM 60	72	XOSPATA.....	27	ZEJULA.....	27
WIDE-SEAL DIAPHRAGM 65	72	XPHOZAH.....	72	ZELAPAR.....	28
WIDE-SEAL DIAPHRAGM 70	72	XPOVIO (100 MG ONCE WEEKLY).....	27	ZELBORAF.....	27
WIDE-SEAL DIAPHRAGM 75	72	XPOVIO (40 MG ONCE WEEKLY).....	27	ZEMBRACE SYMTOUCH	24
WIDE-SEAL DIAPHRAGM 80	72	XPOVIO (40 MG TWICE WEEKLY).....	27	ZEMPLAR.....	69
WIDE-SEAL DIAPHRAGM 85	72	XPOVIO (60 MG ONCE WEEKLY).....	27	zenatane.....	47
WIDE-SEAL DIAPHRAGM 90	72	XPOVIO (60 MG TWICE WEEKLY).....	27	ZENPEP.....	56
WIDE-SEAL DIAPHRAGM 95	72	XPOVIO (80 MG ONCE WEEKLY).....	27	zenzedi.....	39
WINLEVI.....	47	XPOVIO (80 MG TWICE WEEKLY).....	27	ZENZEDI.....	39
WINREVAIR.....	79	XTAMPZA ER.....	14	ZEPATIER.....	32
wixela inhub.....	78	XTANDI.....	27	ZEPOSIA.....	40
wymzya fe.....	64	xulane.....	64	ZEPOSIA 7-DAY STARTER PACK.....	40
WYNZORA.....	47	XULTOPHY.....	48	ZEPOSIA STARTER KIT.....	40
X		xurea.....	47	ZERUVIA.....	15
XACIATO.....	18	XYLOCAINE.....	15	ZERVIASTE.....	73
XADAGO.....	28	XYLOCAINE/EPINEPHRIN E.....	15	ZESTORETIC.....	38
XALATAN.....	74	XYLOCAINE-MPF.....	15	ZESTRIL.....	38
XALIX.....	47	XYOSTED.....	59	ZETIA.....	38
XALKORI.....	27	XYREM.....	80	ZETONNA.....	76
XANAX.....	33	XYWAV.....	80	ZIAGEN.....	32
XANAX XR.....	33	Y		ZIANA.....	47
XARELTO.....	18	yargesa	56	zidovudine	32
XARELTO STARTER PACK	18	YASMIN 28.....	64	ZIEXTENZO.....	33
XATMEP.....	67	YAZ.....	64	ZILBRYSQ.....	72
XCOPRI.....	20	YONSA.....	27	zileuton er.....	79
XDEMVVY.....	73	YOSPRALA.....	29	ZIMHI.....	15
XELJANZ.....	67			ZIONODIL.....	15

ZITHRANOL	47	ZONEGRAN	20	ZYFLO.....	79
ZITHROMAX.....	18	ZONISADE	20	ZYKADIA.....	27
ZITHROMAX TRI-PAK ...	18	zonisamide	20	ZYLET	75
ZITHROMAX Z-PAK.....	18	ZONTIVITY.....	29	ZYMFENTRA (1 PEN)....	67
ZITUVIO	48	ZORTRESS	67	ZYMFENTRA (2 PEN)....	67
ZOCOR	38	ZORYVE.....	47	ZYMFENTRA (2 SYRINGE)	
ZOKINVY.....	72	zovia 1/35 (28).....	64	67
ZOLINZA	27	ZOVIRAX.....	32	ZYNRELEF.....	12
zolmitriptan	24	ZTALMY	20	ZYPITAMAG.....	38
ZOLOFT	22	ZTLIDO	15	ZYPREXA.....	30
zolpidem tartrate	80	ZUBSOLV.....	16	ZYPREXA RELPREVV....	30
ZOLPIDEM TARTRATE .	80	zumandimine	64	ZYPREXA ZYDIS.....	30
zolpidem tartrate er	80	ZURZUVAE	22	ZYTIGA	27
ZOMACTON	60	ZYCLARA.....	47	ZYVOX.....	18
ZOMIG.....	24	ZYCLARA PUMP	47		
ZONALON	47	ZYDELIG	27		

Notice of Nondiscrimination

Kaiser Foundation Health Plan of Washington and Kaiser Foundation Health Plan of Washington Options, Inc. (“Kaiser Permanente”) comply with applicable Federal and Washington state civil rights laws and do not discriminate, exclude people, or treat them differently on the basis of race, color, national origin, age, disability, sex, sexual orientation, gender identity, or any other basis protected by applicable federal, state, or local law. We also:

- Provide free aids and services to people with disabilities to communicate effectively with us, such as:
 - Qualified sign language interpreters
 - Written information in other formats (large print, audio, accessible electronic formats, and other formats)
 - Assistive devices (magnifiers, Pocket Talkers, and other aids)
- Provide free language services to people whose primary language is not English, such as:
 - Qualified interpreters
 - Information written in other languages

If you need these services, contact Member Services at **1-888-901-4636 (TTY 711)**.

If you believe that Kaiser Permanente has failed to provide these services or discriminated in another way on the basis of race, color, national origin, age, disability, sex, sexual orientation, or gender identity, you can file a grievance with our Civil Rights Coordinator by writing to P.O. Box 35191, Mail Stop: RCR-A3S-03, Seattle, WA 98124-5191 or calling Member Services at the number listed above. You can file a grievance by mail, phone, or online at **kp.org/wa/feedback**. If you need help filing a grievance, our Civil Rights Coordinator is available to help you.

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, 800-537-7697 (TDD)**
Complaint forms are available at **http://www.hhs.gov/ocr/office/file/index.html**
- The Washington State Office of the Insurance Commissioner, electronically through the Office of the Insurance Commissioner Complaint portal available at **https://www.insurance.wa.gov/file-complaint-or-check-your-complaint-status**, or by phone at **800-562-6900, 360-586-0241 (TDD)**. Complaint forms are available at **https://fortress.wa.gov/oic/onlineservices/cc/pub/complaintinformation.aspx**

Multi-language Interpreter Services

English: ATTENTION: If you speak a language other than English, language assistance services, free of charge, are available to you. Call **1-888-901-4636 (TTY 711)**.

Español (Spanish): ATENCIÓN: Si habla español, tiene disponibles servicios de ayuda con el idioma sin cargo. Llame al **1-888-901-4636 (TTY 711)**.

中文 (Chinese) : 注意：如果您說中文，您可以免費獲得語言援助服務。請致電 **1-888-901-4636 (TTY 711)**。

Tiếng Việt (Vietnamese): CHÚ Ý: Nếu quý vị nói tiếng Việt, quý vị có thể sử dụng dịch vụ hỗ trợ ngôn ngữ miễn phí của chúng tôi. Xin gọi số **1-888-901-4636 (TTY 711)**.

한국어 (Korean): 참고: 한국어를 사용하시는 경우, 언어 지원 서비스를 무료로 제공해 드립니다. **1-888-901-4636 (TTY 711)** 번으로 문의하십시오.

Русский (Russian): ВНИМАНИЕ! Если вы говорите по-русски, вам доступны бесплатные услуги переводчика. Звоните по номеру **1-888-901-4636 (TTY 711)**.

Tagalog: PAUNAWA: Kung nagsasalita ka ng Tagalog, maaari kang gumamit ng mga serbisyo ng tulong sa wika nang walang bayad. Tumawag sa **1-888-901-4636 (TTY 711)**.

Українська (Ukrainian): УВАГА! Якщо ви розмовляєте українською мовою, вам доступні безкоштовні послуги перекладу. Телефонуйте за номером **1-888-901-4636 (TTY 711)**.

ភាសាខ្មែរ (Khmer): សូមយកចិត្តទុកដាក់៖ ប្រសិនបើអ្នកនឹងយាយភាសាខ្មែរ សេវាកម្មផ្លូវយ៉ាងដំឡើងភាសាដោយមិនគឺតិចឡើងទេ មានសម្រាប់អ្នក។ ទូរស័ព្ទខ្លួនលើលេខ **1-888-901-4636 (TTY 711)**។

日本語 (Japanese): 注意事項：無料の日本語での言語サポートをご利用いただけます。
1-888-901-4636 (TTY 711)まで、お電話にてご連絡ください。

አማርኛ (Amharic): መግለጫ፣ የሚገኘውን ቅጽ አማርኛ ክሮን የተርጋም እንደ አገልግሎቶች፣ በእኔ ለእርስዎ ይቀበሉ፡፡
ወደ **1-888-901-4636 (TTY 711)** ይደረግሉ፡፡

Oromiffa (Oromo): XIYYEFFANNAA: Afaan dubbattu Oroomiffa yoo ta'e, tajaajila gargaarsa afaanii, kanfaltiidhaan ala, ni argama. **1-888-901-4636 (TTY 711)** irraatti bilbilaa.

ਪੰਜਾਬੀ (Punjabi): ਧਿਆਨ ਦਿਓ: ਜੇ ਤੁਸੀਂ ਪੰਜਾਬੀ ਬੋਲਦੇ ਹੋ, ਤਾਂ ਭਾਸ਼ਾ ਸਹਾਇਤਾ ਸੇਵਾਵਾਂ ਤੁਹਾਡੇ ਲਈ ਮੁਫ਼ਤ ਉਪਲਬਧ ਹਨ।
1-888-901-4636 (TTY 711) ਤੇ ਕਾਲ ਕਰੋ।

العربية (Arabic): انتبه: إذا كنت تتحدث اللغة العربية، فإن خدمات المساعدة اللغوية، متوفرة لك، مجاناً.
اتصل بالرقم **1-888-901-4636 (TTY 711)**

Deutsch (German): ACHTUNG: Wenn Sie Deutsch sprechen, stehen Ihnen kostenlos sprachliche Hilfsdienstleistungen zur Verfügung. Rufnummer: **1-888-901-4636 (TTY 711)**.

ລາວ (Lao): ໄປດ້ວຍ: ຖ້າວ່າທ່ານເວັ້ນພາວັກວາ,
ແມ່ນຈະມີການບໍລິການຂ່ວຍເຫຼືອດ້ານພາກໄດ້ລຶ່ມແລ້ວໃຫ້ຕ່າງໆທ່ານ. ໃຫ້ **1-888-901-4636 (TTY 711)**.