



2024

Your Prescription Drug List/Formulary

Effective July 1, 2023

This document contains information about the medications covered under your pharmacy benefit plan.

In this guide you can find:

- Prescription drug list/formulary overview
- Copay/coinsurance tiers
- Brand-name, generic and specialty medication resources
- Drug list information

For a complete list of covered medications or if you have questions:

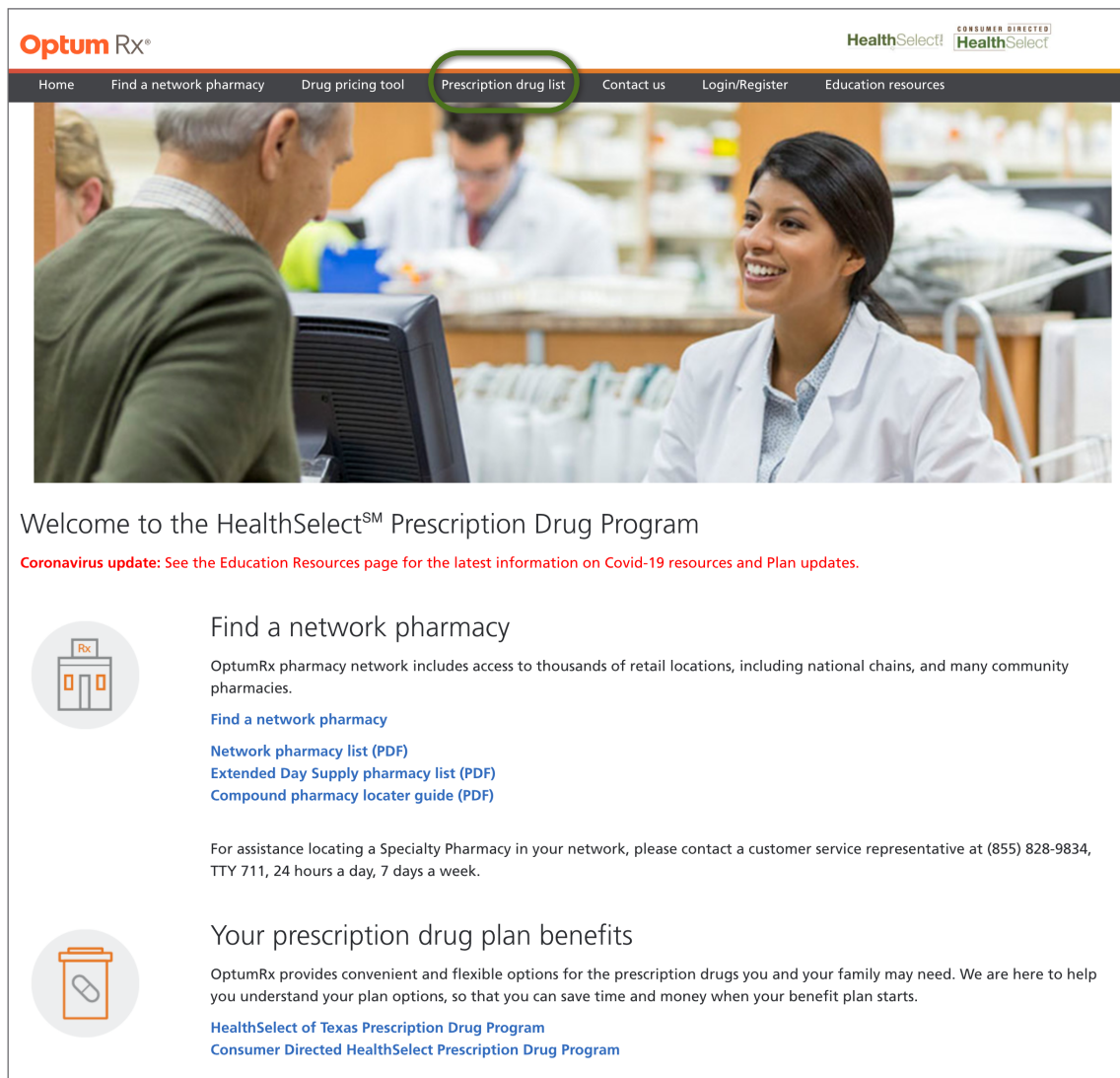
- Call HealthSelect Prescription Drug Program (PDP) customer care toll-free at **(855) 828-9834 (TTY: 711)**.
- Visit **www.HealthSelectRx.com**
 - Locate an Optum Rx[®] in-network pharmacy
 - Look up possible lower-cost medication alternatives
 - Compare medication pricing and options

Your Prescription Drug List / Formulary

This formulary describes the most commonly prescribed medications covered under your plan's prescription drug benefits. The formulary is also known as the Prescription Drug List (PDL). A formulary identifies the medications available for certain conditions and organizes them into cost levels, also known as tiers. An important part of the formulary is giving you choices so you and your doctor can choose the best course of treatment for you.

Go to www.HealthSelectRx.com for complete and up-to-date drug information

Since the formulary may change, we encourage you to visit our website, **www.HealthSelectRx.com** and click on **Prescription Drug List**. This website is the best source for up-to-date information about all of the medications your pharmacy benefit covers, possible lower-cost options and cost comparisons.



The screenshot shows the Optum Rx website interface. The navigation bar at the top includes links for Home, Find a network pharmacy, Drug pricing tool, Prescription drug list (highlighted with a green circle), Contact us, Login/Register, and Education resources. A green arrow points to the right side of the navigation bar. Below the navigation bar is a banner image of a pharmacist smiling at a customer. The main content area features a heading "Welcome to the HealthSelectSM Prescription Drug Program" and a "Coronavirus update" link. Two main sections are visible: "Find a network pharmacy" with a pharmacy icon and links to "Find a network pharmacy", "Network pharmacy list (PDF)", "Extended Day Supply pharmacy list (PDF)", and "Compound pharmacy locator guide (PDF)"; and "Your prescription drug plan benefits" with a pill icon and links to "HealthSelect of Texas Prescription Drug Program" and "Consumer Directed HealthSelect Prescription Drug Program".

Understanding Your Prescription Drug List/Formulary

What is a formulary?

This document is a list of prescription medications covered by your plan for their safety, cost and effectiveness. Medications are listed by categories or class and are placed into cost levels known as tiers. It includes both brand and generic prescription medications approved by the U.S. Food and Drug Administration (FDA).

How do I use my formulary?

This guide tells you if a medication is generic or brand, and if special rules apply. It is organized by common medical conditions. Medications are then listed alphabetically.

If your medication is not listed on this document, it may not be covered by the HealthSelect Prescription Drug Program or Consumer Directed HealthSelect Prescription Drug Program. Please visit www.HealthSelectRx.com and click on **Prescription Drug List** for the most up to date list of medications covered under your plan. If you have any questions, call a customer care representative toll-free at **(855) 828-9834 (TTY: 711)**.

Be sure to take the most current formulary list with you when you visit your health care provider. Use it as a helpful tool when you discuss your medications with your provider to determine if a lower cost medication is a good option for you.

Where differences exist between this formulary and your benefit plan documents, the benefit plan documents will rule. This may not be a complete list of medications, and not all medications listed may be covered under your plan. Please look at the Master Benefit Plan Document (MBPD) provided by your plan for full details. If you have questions please call HealthSelect PDP customer care toll-free at **(855) 828-9834 (TTY: 711)**.

Medication Tips

What are tiers?

Your plan has three copay tiers.

- Tier 1 has mostly generic medications and has the lowest copay.
- Tier 2 has mostly name brand medications and has a higher copay than Tier 1.
- Tier 3 is mostly name brand, non-formulary medications and has the highest copay.

Except for certain insulin products, if you are enrolled in Consumer Directed HealthSelect, you will pay the full cost of the medications until you have met your deductible. Then, you pay a portion of the costs for each tier once your deductible is met.

Using lower tier or preferred medications can help you pay your lowest out-of-pocket cost. Your prescription drug plan has multiple tiers. Please note: If you have a high deductible plan, the tier cost levels will apply once you hit your deductible.

Drug Tier	Includes	Helpful Tips
\$ Tier 1 Lowest Cost	Lower-cost, commonly used generic drugs. Some low-cost brands may be included.	Use Tier 1 drugs for the lowest out-of-pocket costs.
\$\$ Tier 2 Mid-range Cost	Many common brand-name drugs, called preferred brands.	Use Tier 2 drugs, instead of Tier 3, to help reduce your out-of-pocket costs.
\$\$\$ Tier 3 Highest Cost	Mostly higher-cost brand drugs, also known as non-preferred brands.	Many Tier 3 drugs have lower-cost options in Tier 1 or 2. Ask your doctor if they could work for you.
⊘ Tier E	Excluded	May be excluded from coverage or subject to prior authorization. Lower-cost options are available and covered.

When does the formulary change?

When a medication changes tiers, you may have to pay a different amount for that medication. A medication may change tiers because:

- the generic equivalent becomes available and the name-brand moves to a higher tier or
- your plan updates the list every January 1 and July 1.

Your plan may move your medication to a lower tier at anytime.

For the most current list, call HealthSelect PDP customer care toll-free at **(855) 828-9834 (TTY: 711)**. Representatives are ready to assist you 24/7.

Why are some medications excluded from coverage?

A medication may be excluded from coverage under your prescription drug plan when it works the same as or similar to another prescription medication or an over-the-counter (OTC) medication that is more cost-effective.

What if I don't agree with a decision about an excluded medication?

You (or your authorized representative) and your doctor can ask for an appeal to cover an excluded medication by calling **(855) 828-9834 (TTY: 711)**.

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

Generic medications contain the same active ingredients (what makes the medication work) as brand-name medications, but they often cost less. Once the patent of a brand-name medication ends, the FDA can approve a generic version with the same active ingredients. Inactive ingredients may differ. In this formulary, brand-name medications are shown in UPPERCASE (for example, CLOBEX) and generic medications in lowercase (for example, clobetasol).

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

What if my doctor writes a brand-name prescription?

If your doctor gives you a prescription for a brand-name medication, ask if a generic equivalent or lower-cost option is available and if it might be right for you. Generic medications are usually your lowest-cost option, but not always.

What if I am taking a specialty medication?

Specialty medications treat rare or complex conditions and are typically higher cost medications. Please note, not all specialty medications are listed in the formulary. Optum® Specialty Pharmacy can provide most of your specialty medications along with helpful programs and services. Call Optum Specialty Pharmacy toll-free at **(855) 427-4682** and have your prescriptions delivered right to your home or doctor's office.

Drug List Information

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

PA **Prior Authorization** – Your doctor is required to provide additional information before the drug will be covered by your prescription drug plan.

ST **Step Therapy** – Requires you to first try a cost-effective medication before the more expensive medication will be covered.

QL **Quantity Limit** – Limits the amount of a medication that will be covered under your prescription drug plan.

SP **Specialty Medication** – Drugs that are used in the treatment of rare or complex conditions and are typically injected or infused, are high cost, have special delivery and storage requirements, or require close monitoring or care coordination with your doctor.

E **Excluded** – Lower-cost options are available and covered. Drugs that are not covered by your health plan.

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Drug Name	Drug Tier	Notes
Analgesics - Drugs for Pain		
8 hour arthritis pain	E	
8 hour pain reliever	E	
8 hr arthritis pain relief	E	
acetaminophen 8 hour oral tablet extended release	E	
acetaminophen childrens oral solution	E	
acetaminophen childrens oral suspension 160 mg/5ml	E	
acetaminophen childrens oral tablet chewable 160 mg	E	
acetaminophen er	E	
acetaminophen extra strength oral tablet	E	
acetaminophen oral liquid	E	
acetaminophen oral solution 160 mg/5ml, 325 mg/10.15ml, 650 mg/20.3ml	E	
acetaminophen oral suspension 160 mg/5ml	E	
acetaminophen oral tablet	E	
acetaminophen oral tablet chewable 160 mg	E	
acetaminophen rectal suppository 120 mg, 650 mg	E	
acetaminophen-codeine	1	QL
acetaminophen-codeine #2	1	QL
acetaminophen-codeine #3	1	QL
acetaminophen-codeine #4	1	QL

Drug Name	Drug Tier	Notes
ACTIQ	3	PA; QL
ALLZITAL	E	
APADAZ	E	
apap-caff-dihydrocodeine oral capsule	1	QL
arthritis pain reliever oral	E	
ascomp-codeine	1	
bac	1	
BELBUCA	2	PA; QL
BENZHYDROCODON E-ACETAMINOPHEN	E	
BUPAP ORAL TABLET 50-300 MG	E	
BUPRENEX	3	
buprenorphine hcl injection solution 0.3 mg/ml	1	
buprenorphine transdermal	1	PA; QL
butalbital-acetaminophen capsule 50-300 mg oral	E	
BUTALBITAL-ACETAMINOPHEN CAPSULE 50-300 MG ORAL	E	
butalbital-acetaminophen oral tablet 50-300 mg	E	
butalbital-acetaminophen oral tablet 50-325 mg	1	
butalbital-apap-caff-cod	1	
butalbital-apap-caffeine oral capsule 50-300-40 mg	1	
butalbital-apap-caffeine oral capsule 50-325-40 mg	E	

For more information regarding the tiers and designations in this drug list, please see the *Reading your formulary* section on page 6 of this booklet.

Drug Name	Drug Tier	Notes
butalbital-apap-caffeine oral tablet 50-325-40 mg	1	
butalbital-asa-caff-codeine	1	
butalbital-aspirin-caffeine oral capsule	1	
butorphanol tartrate injection	1	
butorphanol tartrate nasal	1	QL
BUTRANS TRANSDERMAL PATCH WEEKLY 10 MCG/HR, 15 MCG/HR, 20 MCG/HR, 5 MCG/HR	3	PA; QL
BUTRANS TRANSDERMAL PATCH WEEKLY 7.5 MCG/HR	E	
codeine sulfate oral tablet 30 mg, 60 mg	1	QL
CONZIP	E	
cvs acetaminophen ex st oral tablet	E	
DEMEROL INJECTION SOLUTION 50 MG/ML	3	
DILAUDID ORAL	E	
DSUVIA	E	
DURAMORPH	3	
endocet oral tablet 10-325 mg, 2.5-325 mg, 5-325 mg, 7.5-325 mg	1	QL
ESGIC ORAL CAPSULE	E	
ESGIC ORAL TABLET	3	
EXCEDRIN TENSION HEADACHE	E	
fentanyl	1	PA; QL
FENTANYL CITRATE (BULK)	E	

Drug Name	Drug Tier	Notes
fentanyl citrate (pf)	E	
fentanyl citrate buccal lozenge on a handle	1	PA; QL
FENTANYL CITRATE BUCCAL TABLET	E	
FENTANYL CITRATE SOLUTION PREFILLED SYRINGE 100 MCG/2ML INTRAVENOUS	E	
FENTANYL CITRATE-NACL INJECTION SOLUTION 1-0.9 MG/100ML-%, 2.5-0.9 MG/250ML-%	E	
FENTANYL CITRATE-NACL INTRAVENOUS SOLUTION 1.25-0.9 MG/250ML-%	3	
FENTANYL CITRATE-NACL INTRAVENOUS SOLUTION 2.5-0.9 MG/100ML-%	E	
FENTANYL CITRATE-NACL SOLUTION 1-0.9 MG/100ML-% INTRAVENOUS	3	
FENTANYL CITRATE-NACL SOLUTION 1-0.9 MG/100ML-% INTRAVENOUS	E	
FENTANYL CITRATE-NACL SOLUTION 2.5-0.9 MG/250ML-% INTRAVENOUS	3	
FENTANYL CITRATE-NACL SOLUTION 2.5-0.9 MG/250ML-% INTRAVENOUS	E	
FENTANYL CITRATE-NACL SOLUTION 2-0.9 MG/100ML-% INTRAVENOUS	3	

For more information regarding the tiers and designations in this drug list, please see the *Reading your formulary* section on page 6 of this booklet.

Drug Name	Drug Tier	Notes
FENTANYL CITRATE-NACL SOLUTION 2-0.9 MG/100ML-% INTRAVENOUS	E	
FENTANYL CITRATE-NACL SOLUTION PREFILLED SYRINGE 500-0.9 MCG/50ML-% INTRAVENOUS	3	
FENTANYL CITRATE-NACL SOLUTION PREFILLED SYRINGE 500-0.9 MCG/50ML-% INTRAVENOUS	E	
FENTANYL-BUPIVACAINE-NACL EPIDURAL SOLUTION 0.5-0.04-0.9 MG/100ML-%, 0.5-0.075-0.9 MG/100ML-%, 0.8-0.1667-0.9 MG/200ML-%, 1-0.125-0.9 MG/250ML-%	E	
FENTANYL-BUPIVACAINE-NACL INJECTION	E	
FENTANYL-BUPIVACAINE-NACL SOLUTION 0.2-0.1-0.9 MG/100ML-% EPIDURAL	E	
FENTANYL-BUPIVACAINE-NACL SOLUTION 0.2-0.125-0.9 MG/100ML-% EPIDURAL	E	
FENTANYL-BUPIVACAINE-NACL SOLUTION 0.5-0.0625-0.9 MG/250ML-% EPIDURAL	E	
FENTANYL-BUPIVACAINE-NACL SOLUTION 0.5-0.1-0.9 MG/250ML-% EPIDURAL	E	

Drug Name	Drug Tier	Notes
FENTANYL-BUPIVACAINE-NACL SOLUTION 0.5-0.125-0.9 MG/250ML-% EPIDURAL	E	
FENTORA BUCCAL TABLET 100 MCG, 200 MCG, 400 MCG, 600 MCG, 800 MCG	E	
FIORICET ORAL CAPSULE	3	
FIORICET/CODEINE ORAL CAPSULE 50-300-40-30 MG	3	
goodsense pain & fever child	E	
goodsense pain relief oral tablet	E	
headache relief oral	E	
hydrocodone bitartrate er oral capsule extended release 12 hour	1	PA; QL
hydrocodone bitartrate er oral tablet er 24 hour abuse-deterrent	1	PA; QL
hydrocodone-acetaminophen oral solution 7.5-325 mg/15ml	1	QL
hydrocodone-acetaminophen oral tablet 10-300 mg, 10-325 mg, 5-300 mg, 5-325 mg, 7.5-300 mg, 7.5-325 mg	1	QL
hydrocodone-ibuprofen oral tablet 10-200 mg, 5-200 mg, 7.5-200 mg	1	QL
hydromorphone hcl er oral tablet extended release 24 hour	1	PA; QL
hydromorphone hcl injection solution 2 mg/ml	E	

For more information regarding the tiers and designations in this drug list, please see the *Reading your formulary* section on page 6 of this booklet.

Drug Name	Drug Tier	Notes
hydromorphone hcl oral	1	QL
hydromorphone hcl rectal	E	
HYDROMORPHONE HCL-NACL INTRAVENOUS SOLUTION 25-0.9 MG/50ML-%, 50-0.9 MG/50ML-%	3	
HYDROMORPHONE HCL-NACL INTRAVENOUS SOLUTION PREFILLED SYRINGE 10-0.9 MG/50ML-%, 15-0.9 MG/30ML-%	3	
HYSINGLA ER	2	PA; QL
INFUMORPH 200	3	
INFUMORPH 500	3	
levorphanol tartrate oral	E	
liquid acetaminophen	E	
LOTREXONE	E	
meperidine hcl injection solution 50 mg/ml	1	
meperidine hcl oral solution	1	QL
meperidine hcl oral tablet 50 mg	E	
methadone hcl injection	1	
methadone hcl intensol	1	
methadone hcl oral concentrate	1	
methadone hcl oral solution	1	
methadone hcl oral tablet	1	PA
methadone hcl oral tablet soluble	1	
METHADOSE ORAL CONCENTRATE 10 MG/ML	3	

Drug Name	Drug Tier	Notes
methadose oral tablet soluble	1	
METHADOSE SUGAR-FREE	3	
migraine relief	E	
mitigo	1	
mm acetaminophen ex str	E	
MORPHINE SULFATE (BULK)	E	
morphine sulfate (concentrate) oral solution 10 mg/0.5ml, 100 mg/5ml, 20 mg/ml	1	QL
morphine sulfate (pf) injection	1	
morphine sulfate (pf) intravenous solution 1 mg/ml, 10 mg/ml, 2 mg/ml, 4 mg/ml, 8 mg/ml	1	
morphine sulfate er beads	1	PA; QL
morphine sulfate er oral capsule extended release 24 hour 10 mg, 100 mg, 20 mg, 30 mg, 50 mg, 60 mg, 80 mg	1	PA; QL
morphine sulfate er oral tablet extended release	1	PA; QL
MORPHINE SULFATE INJECTION SOLUTION 1 MG/ML	3	
morphine sulfate injection solution 2 mg/ml, 4 mg/ml	1	
MORPHINE SULFATE INTRAVENOUS SOLUTION 0.5 MG/ML, 1 MG/ML	3	
morphine sulfate intravenous solution 10 mg/ml, 4 mg/ml, 8 mg/ml	1	

For more information regarding the tiers and designations in this drug list, please see the *Reading your formulary* section on page 6 of this booklet.

Drug Name	Drug Tier	Notes
morphine sulfate intravenous solution 50 mg/ml	E	
morphine sulfate oral	1	QL
morphine sulfate rectal	E	
MORPHINE SULFATE-NACL SOLUTION PREFILLED SYRINGE 50-0.9 MG/50ML-% INTRAVENOUS	3	
MORPHINE SULFATE-NACL SOLUTION PREFILLED SYRINGE 50-0.9 MG/50ML-% INTRAVENOUS	E	
m-pap	E	
MS CONTIN ORAL TABLET EXTENDED RELEASE	E	
nalbuphine hcl injection solution 20 mg/ml	1	
NALOCET	E	
NALTREX	E	
NUCYNTA	E	
NUCYNTA ER	E	
OXAYDO ORAL TABLET	E	
OXYCODONE HCL ER ORAL TABLET ER 12 HOUR ABUSE-DETERRENT 10 MG, 20 MG, 40 MG, 80 MG	E	
oxycodone hcl oral capsule	1	QL
oxycodone hcl oral concentrate 100 mg/5ml	1	QL
oxycodone hcl oral solution	1	QL
oxycodone hcl oral tablet	1	QL

Drug Name	Drug Tier	Notes
OXYCODONE-ACETAMINOPHEN ORAL SOLUTION 10-300 MG/5ML	E	
OXYCODONE-ACETAMINOPHEN ORAL SOLUTION 5-325 MG/5ML	3	QL
OXYCODONE-ACETAMINOPHEN ORAL TABLET 10-300 MG, 2.5-300 MG, 5-300 MG, 7.5-300 MG	E	
oxycodone-acetaminophen oral tablet 10-325 mg, 2.5-325 mg, 5-325 mg, 7.5-325 mg	1	QL
OXYCONTIN ORAL TABLET ER 12 HOUR ABUSE-DETERRENT	2	PA; QL
oxymorphone hcl	1	QL
oxymorphone hcl er	1	PA; QL
pain & fever childrens oral suspension	E	
pain & fever infants	E	
pain relief childrens oral elixir 160 mg/5ml	E	
pain relief extra strength oral capsule 500 mg	E	
pain relief extra strength oral tablet 500 mg	E	
pain relief oral liquid	E	
pain relief regular strength	E	
pain reliever extra strength oral tablet 250-250-65 mg	E	
PANADOL CHILDRENS	E	
PANADOL EXTRA	E	

For more information regarding the tiers and designations in this drug list, please see the *Reading your formulary* section on page 6 of this booklet.

Drug Name	Drug Tier	Notes
PANADOL EXTRA STRENGTH	E	
PANADOL INFANTS	E	
pentazocine-naloxone hcl	1	QL
PERCOCET ORAL TABLET 10-325 MG, 2.5-325 MG, 5-325 MG, 7.5-325 MG	E	
PRIALT	2	SP
PROLATE	E	
QDOLO	E	
ROXICODONE ORAL TABLET 15 MG, 30 MG	E	
ROXYBOND	E	
SEGLENTIS	E	
SUBSYS	E	
SYNAPRYN FUSEPAQ	E	
TENCON ORAL TABLET 50-325 MG	3	
TRAMADOL HCL (ER BIPHASIC) ORAL CAPSULE EXTENDED RELEASE 24 HOUR 100 MG, 200 MG, 300 MG	E	
tramadol hcl (er biphasic) oral tablet extended release 24 hour	1	PA; QL
tramadol hcl er	1	PA; QL
TRAMADOL HCL ORAL SOLUTION	E	
tramadol hcl oral tablet	1	QL
tramadol-acetaminophen	1	QL
TREZIX ORAL CAPSULE 320.5-30-16 MG	3	QL
TYLENOL 8 HOUR	E	

Drug Name	Drug Tier	Notes
TYLENOL 8 HOUR ARTHRITIS PAIN	E	
TYLENOL CHILDRENS ORAL SUSPENSION	E	
TYLENOL EXTRA STRENGTH ORAL TABLET	E	
TYLENOL FOR CHILDREN + ADULTS	E	
TYLENOL INFANTS PAIN+FEVER	E	
TYLENOL ORAL TABLET	E	
XTAMPZA ER	2	PA; QL
ZEBUTAL ORAL CAPSULE 50-325-40 MG	E	
Analgesics - Drugs for Pain and Inflammation		
ADVIL	E	
ADVIL JUNIOR STRENGTH	E	
ADVIL LIQUI-GELS MINIS	E	
ADVIL MIGRAINE	E	
ALEVE ORAL TABLET	E	
all day pain relief	E	
all day relief	E	
ANAPROX DS	3	
ARTHROTEC ORAL TABLET DELAYED RELEASE	E	
aspirin 81 oral tablet delayed release	\$0	
aspirin adult low dose	\$0	
aspirin adult low strength oral tablet delayed release	\$0	
aspirin childrens	\$0	
aspirin ec low dose	\$0	

For more information regarding the tiers and designations in this drug list, please see the *Reading your formulary* section on page 6 of this booklet.

Drug Name	Drug Tier	Notes
aspirin ec low strength	\$0	
aspirin ec oral tablet delayed release 325 mg	E	
aspirin low dose oral tablet chewable	\$0	
aspirin low dose oral tablet delayed release	\$0	
aspirin oral tablet 325 mg	E	
aspirin oral tablet delayed release 325 mg	E	
aspirin oral tablet delayed release 81 mg	\$0	
aspirin rectal suppository 300 mg	E	
aspirin regimen	\$0	
CALDOLOR INTRAVENOUS SOLUTION 800 MG/200ML, 800 MG/8ML	3	
CAPSINAC EXTERNAL	E	
CELEBREX	E	
celecoxib oral	1	QL
DAYPRO	3	
DERMACINRX LEXITRAL PHARMAPAK EXTERNAL	E	
DFS DR/MS/MENTH/CAP PAK	E	
DFS/MS/MENTH/CAP PAK EXTERNAL	E	
DICLOFENAC PATCH EXTERNAL	E	
diclofenac potassium oral capsule	E	
diclofenac potassium oral tablet 25 mg	E	

Drug Name	Drug Tier	Notes
diclofenac potassium oral tablet 50 mg	1	
diclofenac sodium er	1	
diclofenac sodium external gel 1 %	1	QL
diclofenac sodium external solution 2 %	E	
diclofenac sodium oral	1	
diclofenac sodium solution 1.5 % external	1	PA
diclofenac sodium solution 1.5 % external	E	
diclofenac-misoprostol oral tablet delayed release	E	
DICLOFONO GEL 1.6 % EXTERNAL	3	
DICLOFONO GEL 1.6 % EXTERNAL	E	
DICLONA	E	
DICLONA+ PATCH 1.25-4.5 % EXTERNAL	3	
DICLOPR	E	
DICLOSAICIN EXTERNAL THERAPY PACK 1.5-0.025 %	E	
DICLOSTREAM	E	
DICLOTREX	E	
DICLOTREX II	E	
DICLOVIX EXTERNAL	E	
DICLOVIX M	E	
diflunisal oral	1	
DIMENTHO	E	
DUAL COMPLEX FORMULA 1 KIT	E	
DUEXIS	E	
EC-NAPROSYN	3	
ec-naproxen	1	
ELYXYB	E	

For more information regarding the tiers and designations in this drug list, please see the *Reading your formulary* section on page 6 of this booklet.

Drug Name	Drug Tier	Notes
ENOVARX-DICLOFENAC SODIUM EXTERNAL	E	
ENOVARX-IBUPROFEN	E	
ENOVARX-NAPROXEN EXTERNAL	E	
etodolac er	1	
etodolac oral	1	
FBL KIT	E	
FELDENE	3	
fenoprofen calcium oral	E	
FENOVAR	E	
FLECTOR EXTERNAL	E	
flurbiprofen oral	1	
FROTEK	E	
goodsense aspirin adults	E	
goodsense aspirin low dose	\$0	
goodsense ibuprofen	E	
IBUPAK	E	
ibuprofen infants	E	
ibuprofen oral capsule 200 mg	E	
ibuprofen oral suspension 100 mg/5ml	1	
ibuprofen oral tablet 200 mg	E	
ibuprofen oral tablet 400 mg, 600 mg, 800 mg	1	
ibuprofen-famotidine	E	
ICLOFENAC CP	E	
inavix	E	
INDOCIN ORAL	E	
INDOCIN RECTAL	E	
indomethacin er	1	

Drug Name	Drug Tier	Notes
indomethacin oral capsule 25 mg, 50 mg	1	
INDOMETHACIN RECTAL SUPPOSITORY 100 MG	E	
INFLAMMACIN	E	
K.B.G.L IN TERODERM	E	
KETOPHENE RAPIDPAQ	E	
ketoprofen er	E	
ketoprofen oral capsule 25 mg	E	
ketoprofen oral capsule 50 mg	1	
ketorolac tromethamine injection solution 15 mg/ml	1	
ketorolac tromethamine intramuscular solution 60 mg/2ml	1	
KETOROLAC TROMETHAMINE NASAL	E	
ketorolac tromethamine oral	1	QL
KETOROLAC TROMETHAMINE SOLUTION 30 MG/ML INJECTION	3	
ketorolac tromethamine solution 30 mg/ml injection	1	
LEXITRAL PHARMAPAK II	E	
LICART EXTERNAL	E	
LODINE	3	
LOFENA	E	
meclofenamate sodium oral	E	
mefenamic acid oral	E	

For more information regarding the tiers and designations in this drug list, please see the *Reading your formulary* section on page 6 of this booklet.

Drug Name	Drug Tier	Notes
meloxicam oral capsule	E	
MELOXICAM ORAL SUSPENSION	E	
meloxicam oral tablet	1	
mm aspirin oral tablet delayed release	\$0	
mm ibuprofen	E	
MOTRIN CHILDRENS	E	
MOTRIN IB ORAL CAPSULE	E	
MOTRIN INFANTS DROPS	E	
nabumetone oral	1	
NALFON ORAL CAPSULE 400 MG	E	
NALFON ORAL TABLET	E	
NAPRELAN ORAL TABLET EXTENDED RELEASE 24 HOUR 375 MG, 500 MG, 750 MG	E	
NAPROSYN ORAL SUSPENSION	E	
NAPROSYN ORAL TABLET 500 MG	E	
NAPROTIN	E	
naproxen oral suspension	E	
naproxen oral tablet	1	
naproxen oral tablet delayed release	1	
naproxen sodium er	E	
naproxen sodium oral tablet 220 mg	E	
naproxen sodium oral tablet 275 mg, 550 mg	1	
naproxen-esomeprazole mg	E	
NUDICLO SOLUPAK EXTERNAL	E	

Drug Name	Drug Tier	Notes
NUDICLO TABPAK	E	
NUDROXIPAK	E	
NUDROXIPAK DSDR-50	E	
NUDROXIPAK DSDR-75	E	
NUDROXIPAK E-400	E	
NUDROXIPAK I-800	E	
NUDROXIPAK M-15	E	
NUDROXIPAK N-500	E	
ORMECA	E	
oxaprozin	1	
PENNSAICIN EXTERNAL	E	
PENNSAID EXTERNAL	E	
piroxicam oral	1	
PRASTERA	E	
PREVIDOLRX ANALGESIC	E	
previdolrx plus analgesic	E	
PROFINAC	E	
RELAFEN DS	E	
salsalate oral	E	
sm naproxen sodium oral tablet	E	
SPRIX	E	
ST JOSEPH LOW DOSE ORAL TABLET CHEWABLE	\$0	
sulindac oral	1	
SURE RESULT DSS PREMIUM PACK EXTERNAL	E	
TORONOVA II SUIK	E	
TORONOVA SUIK	E	
TRIPLE COMPLEX FORMULA 3 KIT	E	
VAROPHEN	E	

For more information regarding the tiers and designations in this drug list, please see the *Reading your formulary* section on page 6 of this booklet.

Drug Name	Drug Tier	Notes
VENNGEL ONE	E	
VIMOVO	E	
VP FC KIT	E	
VP GKL KIT	E	
XRYLIX EXTERNAL	E	
XRYLIX II	E	
ZICLOCIN	E	
ZICLOPRO EXTERNAL	E	
ZIPSOR	E	
ZORVOLEX	E	
Anesthetics		
1ST MEDX-PATCH/ LIDOCAINE EXTERNAL PATCH 4- 0.0375-5-20 %	E	
7T LIDO	E	
ACCUCAINE	E	
AGONEAZE	E	
ANODYNE LPT	E	
APRIZIO PAK	E	
ASPERCREME LIDOCAINE EXTERNAL CREAM	E	
ASTERO	E	
bupivacaine fisiopharma	1	
BUPIVACAINE HCL (BULK)	E	
bupivacaine hcl (pf)	1	
BUPIVACAINE HCL INJECTION SOLUTION 0.125 %	E	
bupivacaine hcl injection solution 0.5 %	1	
BUPIVACAINE HCL INJECTION SOLUTION PREFILLED SYRINGE 0.125 % (50 ML)	E	

Drug Name	Drug Tier	Notes
BUPIVACAINE HCL INJECTION SOLUTION PREFILLED SYRINGE 0.25 % (10 ML)	3	
bupivacaine hcl solution 0.25 % injection	1	
bupivacaine hcl solution 0.25 % injection	E	
CADIRAMD	E	
CETACAINE EXTERNAL AEROSOL	E	
CETACAINE EXTERNAL GEL 2-2- 14 %	E	
COCAINE HCL NASAL	E	
DERMACINRX LIDOGEL	E	
DERMACINRX PHN	E	
DERMACINRX ZRM	E	
DERMALID	E	
EHA	E	
ELEMAR PATCH	E	
ENOVARX- LIDOCAINE HCL	E	
ENZNONUTY	E	
ethyl chloride	1	
EXPAREL	3	
GEBAUERS PAIN EASE	3	
GEBAUERS SPRAY AND STRETCH	3	
GEN7T	E	
GEN7T PLUS	E	
glydo external prefilled syringe	1	
GOPRELTO	E	
L.E.T. EXTERNAL SOLUTION	3	

For more information regarding the tiers and designations in this drug list, please see the *Reading your formulary* section on page 6 of this booklet.

Drug Name	Drug Tier	Notes
LDO PLUS	E	
LETS	E	
LEVATIO	E	
LIDO BDK	E	
lidocaine external cream 4 %	E	
lidocaine external patch 5 %	1	
lidocaine hcl (pf) injection solution	1	
lidocaine hcl external cream 3 %, 4 %	E	
LIDOCAINE HCL EXTERNAL CREAM 4.12 %	E	
lidocaine hcl external lotion	E	
lidocaine hcl external solution	1	
lidocaine hcl injection solution 0.5 %	1	
LIDOCAINE HCL INJECTION SOLUTION PREFILLED SYRINGE 10 MG/ML, 100 MG/10ML, 100 MG/5ML, 200 MG/10ML, 60 MG/3ML, 9 MG/ML	3	
LIDOCAINE HCL SOLUTION 1 % INJECTION	3	
lidocaine hcl solution 1 % injection	1	
LIDOCAINE HCL SOLUTION 2 % INJECTION	3	
lidocaine hcl solution 2 % injection	1	

Drug Name	Drug Tier	Notes
lidocaine hcl urethral/mucosal external prefilled syringe	1	
lidocaine ointment 5 % external	1	QL
lidocaine ointment 5 % external	E	
lidocaine pain relief max st external cream	E	
lidocaine-prilocaine external cream	1	
lidocaine-prilocaine external kit	E	
LIDODERM	E	
LIDO-EPINEPHRINE-TETRACAINE	3	
LIDOMARK 2/5	E	
lidopin external cream 3 %	E	
LIDOPIN EXTERNAL CREAM 3.25 %	E	
LIDOPURE PATCH	E	
LIDOREX	E	
LIDORX	E	
LIDO-SORB	E	
LIDOSTREAM	E	
LIDOTHOL	E	
LIDOTOR	E	
LIDOTRAL	E	
LIDOTRAN	E	
LIDOVIX L	E	
LIDTOPIC MAX	E	
LIVIXIL PAK	E	
LMR PLUS	E	
LYDEXA	E	
MARCAINE	3	
MARCAINE PRESERVATIVE FREE	3	

For more information regarding the tiers and designations in this drug list, please see the *Reading your formulary* section on page 6 of this booklet.

Drug Name	Drug Tier	Notes
MARLIDO	E	
MARLIDO-25	E	
MARVONA SUIK	E	
NUMBRINO	E	
NYNUTEY	E	
pain relieving + lidocaine	E	
PAINGO KFT	E	
PLIAGLIS	E	
POINT OF CARE LM-2.2	E	
POINT OF CARE LM-2.5	E	
premium lidocaine	E	
PREMIUM SCAR	E	
PREPIV SUPPLY	3	
PRILO PATCH	E	
PRILOVIX	E	
PRILOVIX LITE	E	
PRILOVIX LITE PLUS	E	
PRILOVIX PLUS	E	
PRILOVIX ULTRALITE	E	
PRILOVIX ULTRALITE PLUS	E	
PRILOVIXIL	E	
PROXIVOL	E	
READYSHARP-A	E	
RELADOR PAK EXTERNAL KIT	E	
RELADOR PAK PLUS	E	
SENSORCAINE INJECTION SOLUTION 0.25 %	3	
SENSORCAINE SOLUTION 0.5 % INJECTION	3	
SENSORCAINE SOLUTION 0.5 % INJECTION	E	

Drug Name	Drug Tier	Notes
SENSORCAINE-MPF INJECTION SOLUTION 0.25 %, 0.5 %	3	
SENSORCAINE-MPF SOLUTION 0.75 % INJECTION	3	
SENSORCAINE-MPF SOLUTION 0.75 % INJECTION	E	
SKYADERM-LP	E	
SOOTHEE EXTERNAL PATCH 0.5-0.0375-5-2 %	E	
STERILE TOPICAL L.E.T. GEL	3	
SX1 MEDICATED POST-OPERATIVE	E	
SYNERA	E	
TOPICAL L.E.T. EXTERNAL GEL 4-0.09-0.5 %	3	
VENIPUNCTURE PX1 PHLEBOTOMY	3	
WPR PLUS WOUND HEALING SYSTEM	E	
XARACOLL	E	
XYLOCAINE INJECTION	3	
XYLOCAINE-MPF INJECTION SOLUTION 0.5 %, 1 %, 1.5 %, 2 %	3	
ZERUVIA	E	
ZINGO INTRADERMAL JET-INJECTOR	E	
ZIONODIL	E	
ZIONODIL 100	E	
ZTLIDO	E	

For more information regarding the tiers and designations in this drug list, please see the *Reading your formulary* section on page 6 of this booklet.

Drug Name	Drug Tier	Notes
Anti-Addiction / Substance Abuse Treatment Agents		
acamprosate calcium	1	
APO-VARENICLINE	\$0	QL
buprenorphine hcl sublingual	1	QL
buprenorphine hcl-naloxone hcl	1	QL
bupropion hcl er (smoking det)	\$0	QL
disulfiram oral	1	
goodsense nicotine mouth/throat lozenge 4 mg	\$0	QL
habitrol	\$0	QL
KLOXXADO	2	
LUCEMYRA	3	ST; QL
naloxone hcl injection solution 0.4 mg/ml, 4 mg/10ml	1	
naloxone hcl injection solution cartridge	1	
naloxone hcl injection solution prefilled syringe	1	
naloxone hcl nasal	1	
naltrexone hcl oral	1	
NARCAN	2	
NICORETTE MOUTH/THROAT GUM 2 MG	\$0	QL
NICORETTE MOUTH/THROAT LOZENGE 4 MG	\$0	QL
nicotine polacrilex mini	\$0	QL
nicotine polacrilex mouth/throat	\$0	QL
nicotine step 1	\$0	QL
nicotine step 2	\$0	QL
nicotine step 3	\$0	QL

Drug Name	Drug Tier	Notes
nicotine transdermal kit	E	
nicotine transdermal patch 24 hour 21 mg/24hr	\$0	QL
NICOTROL	\$0	QL
NICOTROL NS	\$0	QL
SUBLOCADE	3	SP
SUBOXONE SUBLINGUAL FILM	2	QL
varenicline tartrate oral tablet	\$0	QL
varenicline tartrate oral tablet therapy pack	\$0	QL
VIVITROL	3	SP
ZIMHI	3	
ZUBSOLV	2	QL
Antibacterials		
AEMCOLO	3	PA
ALTABAX	3	
amikacin sulfate injection solution 500 mg/2ml	1	
amoxicillin oral capsule	1	
amoxicillin oral suspension reconstituted	1	
amoxicillin oral tablet	1	
amoxicillin oral tablet chewable 125 mg, 250 mg	1	
amoxicillin-potassium clavulanate er	1	
amoxicillin-potassium clavulanate oral	1	
ampicillin oral capsule 500 mg	1	
ampicillin-sulbactam sodium injection solution reconstituted 3 (2-1) gm	1	

For more information regarding the tiers and designations in this drug list, please see the *Reading your formulary* section on page 6 of this booklet.

Drug Name	Drug Tier	Notes
antibiotic external ointment	E	
ARIKAYCE	3	PA; SP
AUGMENTIN ES-600	3	
AUGMENTIN ORAL SUSPENSION RECONSTITUTED 125-31.25 MG/5ML	3	
AUGMENTIN ORAL TABLET 500-125 MG	3	
avidoxy	1	
AVIDOXY DK	E	
azithromycin oral packet	1	
azithromycin oral suspension reconstituted	1	
azithromycin oral tablet 250 mg, 500 mg, 600 mg	1	
bacitracin external	E	
bacitracin zinc external	E	
bacitracin zinc-aloe	E	
BACTRIM	3	
BACTRIM DS	3	
BAXDELA	3	
benzalkonium chloride external solution , 50 %	1	
BENZODOX	E	
BETADINE EXTERNAL SOLUTION 10 %	E	
BICILLIN L-A INTRAMUSCULAR SUSPENSION PREFILLED SYRINGE	3	
cefaclor	1	
cefaclor er	1	
cefadroxil	1	

Drug Name	Drug Tier	Notes
cefazolin sodium injection solution reconstituted 1 gm, 10 gm	1	
cefazolin sodium-dextrose intravenous solution 2-4 gm/100ml-%	1	
cefdinir	1	
cefepime hcl intravenous solution reconstituted 2 gm	1	
cefixime	1	
CEFOTAXIME SODIUM INJECTION SOLUTION RECONSTITUTED 1 GM, 2 GM	3	
cefotetan disodium injection solution reconstituted 1 gm, 2 gm	1	
cefoxitin sodium intravenous solution reconstituted 10 gm	1	
cefpodoxime proxetil	1	
cefprozil	1	
ceftazidime injection solution reconstituted 1 gm, 6 gm	1	
ceftazidime intravenous	1	
ceftriaxone sodium injection solution reconstituted 1 gm, 2 gm, 250 mg, 500 mg	1	
cefuroxime axetil oral tablet	1	
cephalexin oral capsule 250 mg, 500 mg	1	
cephalexin oral capsule 750 mg	E	
cephalexin oral suspension reconstituted	1	

For more information regarding the tiers and designations in this drug list, please see the *Reading your formulary* section on page 6 of this booklet.

Drug Name	Drug Tier	Notes
cephalexin oral tablet	1	
chloramphenicol sod succinate	1	
CIPRO ORAL SUSPENSION RECONSTITUTED	3	
CIPRO ORAL TABLET 250 MG, 500 MG	3	
ciprofloxacin hcl oral	1	
clarithromycin er	1	
clarithromycin oral	1	
CLEOCIN ORAL	3	
CLEOCIN VAGINAL	E	
clindamycin hcl oral	1	
clindamycin palmitate hcl	1	
clindamycin phosphate vaginal	1	
CLINDESSE	3	
colistimethate sodium (cba)	1	
COLY-MYCIN M	3	
coremino	E	
CUBICIN RF	3	
daptomycin	1	
demeclocycline hcl oral	1	
dicloxacillin sodium	1	
DIFICID	3	
DORYX MPC	E	
DORYX ORAL TABLET DELAYED RELEASE 200 MG, 50 MG, 80 MG	E	
doxy 100	1	
doxycycline hyclate intravenous	1	
doxycycline hyclate oral capsule	1	
doxycycline hyclate oral tablet 100 mg	1	

Drug Name	Drug Tier	Notes
doxycycline hyclate oral tablet 150 mg, 20 mg, 50 mg, 75 mg	E	
doxycycline hyclate oral tablet delayed release 100 mg, 150 mg, 200 mg, 50 mg, 75 mg	E	
DOXYCYCLINE HYCLATE ORAL TABLET DELAYED RELEASE 80 MG	E	
doxycycline monohydrate oral capsule 100 mg, 50 mg	1	
doxycycline monohydrate oral capsule 150 mg, 75 mg	E	
doxycycline monohydrate oral suspension reconstituted	1	
doxycycline monohydrate oral tablet	1	
E.E.S. 400 ORAL TABLET	3	
E.E.S. GRANULES	3	
ertapenem sodium	1	
ERYPED 200	3	
ERYPED 400	3	
ERY-TAB	3	
ERYTHROCIN STEARATE ORAL TABLET 250 MG	3	
erythromycin base oral	1	
erythromycin ethylsuccinate oral	1	
erythromycin oral	1	
FETROJA	3	
FIRST-METRONIDAZOLE ORAL SUSPENSION RECONSTITUTED 50 MG/ML	E	

For more information regarding the tiers and designations in this drug list, please see the *Reading your formulary* section on page 6 of this booklet.

Drug Name	Drug Tier	Notes
FIRVANQ	3	
FLAGYL ORAL CAPSULE	E	
fosfomicin tromethamine	1	
gentamicin sulfate external	1	
HIPREX	3	
HUMATIN	3	
imipenem-cilastatin intravenous solution reconstituted 250 mg	1	
INVANZ INJECTION	3	
iodine tincture external tincture 2 %	E	
IODOSORB	E	
levofloxacin oral	1	
LINCOCIN	3	
lincomycin hcl injection	1	
linezolid in sodium chloride	1	
linezolid intravenous solution 600 mg/300ml	1	
linezolid oral	1	QL
LUGOLS STRONG IODINE	3	
LYMEPAK	E	
MACROBID	3	
MACRODANTIN	3	
mafenide acetate external	1	
meropenem intravenous solution reconstituted 500 mg	1	
MEROPENEM-SODIUM CHLORIDE INTRAVENOUS SOLUTION RECONSTITUTED 1 GM/50ML, 500 MG/50ML	3	

Drug Name	Drug Tier	Notes
methenamine hippurate	1	
methenamine mandelate oral	E	
METRONIDAZOLE BENZO+SYRSPEND	E	
metronidazole oral capsule	E	
metronidazole oral tablet	1	
metronidazole vaginal	1	
MINOCYCLINE HCL ER (BIPHASIC)	E	
MINOCYCLINE HCL ER ORAL CAPSULE EXTENDED RELEASE 24 HOUR	E	
minocycline hcl er oral tablet extended release 24 hour	E	
minocycline hcl oral capsule	1	
minocycline hcl oral tablet	E	
MINOLIRA	E	
mondoxyne nl oral capsule 100 mg	1	
MONUROL	3	
moxifloxacin hcl in nacl	1	
moxifloxacin hcl oral	1	
mupirocin calcium	E	
mupirocin external	1	
nafcillin sodium injection solution reconstituted 1 gm	1	
nafcillin sodium intravenous solution reconstituted 10 gm	1	
NANRAN	E	
neomycin sulfate oral	1	
neomycin-polymyxin b gu	E	

For more information regarding the tiers and designations in this drug list, please see the *Reading your formulary* section on page 6 of this booklet.

Drug Name	Drug Tier	Notes
NEOSPORIN ORIGINAL	E	
nitrofurantoin macrocrystal oral	1	
nitrofurantoin monohydrate macrocrystals	1	
nitrofurantoin oral suspension	E	
NUTRIDOX	E	
NUVESSA	E	
NUZYRA ORAL TABLET 150 MG	3	
ofloxacin oral tablet 300 mg, 400 mg	1	
oxacillin sodium injection solution reconstituted 1 gm	1	
oxacillin sodium intravenous	1	
paromomycin sulfate oral	1	
penicillin g potassium injection solution reconstituted 5000000 unit	1	
penicillin g sodium	1	
penicillin v potassium	1	
PFIZERPEN INJECTION SOLUTION RECONSTITUTED 5000000 UNIT	3	
piperacillin sod-tazobactam so intravenous solution reconstituted 4-0.5 gm, 4.5 (4-0.5) gm	1	
poly bacitracin external ointment 500-10000 unit/gm	E	
polymyxin b sulfate injection	1	

Drug Name	Drug Tier	Notes
POLYSPORIN EXTERNAL OINTMENT 500-10000 UNIT/GM	E	
povidone-iodine external solution 10 %	E	
RAYASORE KIT	E	
RECARBRIO	3	
SCRUB CARE POVIDONE-IODINE	E	
SEYSARA	3	ST
SILVADENE	3	
silver nitrate external solution 0.5 %	E	
silver sulfadiazine external	1	
SIVEXTRO INTRAVENOUS	3	QL
SIVEXTRO ORAL	E	
SOLODYN ORAL TABLET EXTENDED RELEASE 24 HOUR 105 MG, 115 MG, 55 MG, 65 MG, 80 MG	E	
SOLOSEC	3	ST
ssd	1	
streptomycin sulfate intramuscular	1	
sulfadiazine oral	1	
sulfamethoxazole-trimethoprim oral suspension 200-40 mg/5ml	1	
sulfamethoxazole-trimethoprim oral tablet	1	
SULFAMYLON EXTERNAL CREAM	E	
SULFAMYLON EXTERNAL PACKET	3	
sulfatrim pediatric	1	
SUPRAX ORAL CAPSULE	3	

For more information regarding the tiers and designations in this drug list, please see the *Reading your formulary* section on page 6 of this booklet.

Drug Name	Drug Tier	Notes
SUPRAX ORAL SUSPENSION RECONSTITUTED 200 MG/5ML, 500 MG/5ML	3	
SUPRAX ORAL TABLET CHEWABLE	3	
TARGADOX	E	
tazicef injection solution reconstituted 1 gm	1	
tazicef intravenous solution reconstituted	1	
TEFLARO INTRAVENOUS SOLUTION RECONSTITUTED 600 MG	3	
tetracycline hcl oral	1	
tigecycline	1	
tinidazole oral	1	
trimethoprim oral	1	
triple antibiotic external ointment , 3.5-400-5000 , 5-400-5000 , 5-400-5000 mg-unit	E	
TYGACIL	3	
UNASYN INJECTION SOLUTION RECONSTITUTED 3 (2-1) GM	3	
VANCOCIN ORAL CAPSULE 250 MG	3	
vancomycin hcl in nacl intravenous solution 1-0.9 gm/200ml-%	1	
vancomycin hcl intravenous solution 1000 mg/200ml, 1250 mg/250ml, 1500 mg/300ml, 1750 mg/350ml, 2000 mg/400ml, 500 mg/100ml, 750 mg/150ml	1	

Drug Name	Drug Tier	Notes
vancomycin hcl oral capsule	1	
VANCOMYCIN HCL ORAL SOLUTION RECONSTITUTED 25 MG/ML, 50 MG/ML	3	
vancomycin hcl oral solution reconstituted 250 mg/5ml	1	
VANCOMYCIN+SYRS PEND SF	E	
VANDAZOLE	3	ST
VIBRAMYCIN ORAL CAPSULE	3	ST
VIBRAMYCIN ORAL SUSPENSION RECONSTITUTED	3	ST
XACIATO	E	
XENLETA	3	
XEPI	3	
XIFAXAN ORAL TABLET 200 MG	E	
XIFAXAN ORAL TABLET 550 MG	3	PA
XIMINO	3	
ZEMDRI	3	
ZITHROMAX ORAL PACKET	3	
ZITHROMAX ORAL SUSPENSION RECONSTITUTED	3	
ZITHROMAX ORAL TABLET 250 MG, 500 MG	3	
ZITHROMAX TRI-PAK	3	
ZITHROMAX Z-PAK	3	
ZYVOX INTRAVENOUS SOLUTION 200 MG/100ML, 600 MG/300ML	3	
ZYVOX ORAL	3	QL

For more information regarding the tiers and designations in this drug list, please see the *Reading your formulary* section on page 6 of this booklet.

Drug Name	Drug Tier	Notes
Anticoagulants		
ACD-A NOCLOT-50	3	
ACTIVASE	E	
ANTICOAGULANT SODIUM CITRATE	3	
ARIXTRA	3	SP; QL
CATHFLO ACTIVASE	E	
dabigatran etexilate mesylate	1	QL
ELIQUIS	2	QL
ELIQUIS DVT/PE STARTER PACK ORAL TABLET THERAPY PACK	2	QL
enoxaparin sodium injection	1	SP; QL
ENOXILUV KIT	E	SP
fondaparinux sodium	1	SP; QL
FRAGMIN SUBCUTANEOUS SOLUTION 10000 UNIT/4ML, 95000 UNIT/3.8ML	3	SP; QL
FRAGMIN SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	3	SP; QL
heparin (porcine) in nacl intravenous solution 1000-0.9 ut/500ml-%, 2000-0.9 unit/l-%	1	
HEPARIN (PORCINE) IN NAACL INTRAVENOUS SOLUTION 4000-0.9 UNIT/L-%	E	
heparin na (pork) lock flsh pf intravenous solution 10 unit/ml, 100 unit/ml	1	

Drug Name	Drug Tier	Notes
heparin sod (pork) lock flush intravenous solution 10 unit/ml, 100 unit/ml	1	
heparin sodium (porcine) injection solution 1000 unit/ml, 10000 unit/ml, 20000 unit/ml, 5000 unit/ml	1	
heparin sodium (porcine) injection solution prefilled syringe	1	
heparin sodium (porcine) pf	1	
HEPMED	E	
jantoven	1	
LOVENOX INJECTION	3	SP; QL
PRADAXA ORAL CAPSULE	2	QL
PRADAXA ORAL PACKET	E	
REGIOCIT EXTRACORPOREAL	E	
SAVAYSA	3	QL
THROMBATE III	3	SP
TRICITRASOL	3	
warfarin sodium oral	1	
XARELTO	2	QL
XARELTO STARTER PACK	2	QL
Anticonvulsants - Drugs for Seizures		
APTIOM	3	
BANZEL	3	PA
BRIVIACT INTRAVENOUS	3	
BRIVIACT ORAL	3	ST
carbamazepine er	1	
carbamazepine oral	1	
CARBATROL	3	

For more information regarding the tiers and designations in this drug list, please see the *Reading your formulary* section on page 6 of this booklet.

Drug Name	Drug Tier	Notes
CELONTIN	3	
CEREBYX INJECTION SOLUTION 500 MG PE/10ML	3	
clobazam	1	PA
DEPAKOTE	3	
DEPAKOTE ER	3	
DEPAKOTE SPRINKLES ORAL CAPSULE DELAYED RELEASE SPRINKLE	3	
DIACOMIT	3	PA; SP
DIASTAT ACUDIAL	3	QL
DIASTAT PEDIATRIC	3	QL
diazepam rectal	1	QL
DILANTIN INFATABS	E	
DILANTIN ORAL CAPSULE 100 MG	E	
DILANTIN ORAL CAPSULE 30 MG	3	
DILANTIN ORAL SUSPENSION	E	
divalproex sodium er oral tablet extended release 24 hour	1	
divalproex sodium oral capsule delayed release sprinkle	1	
divalproex sodium oral tablet delayed release	1	
ELEPSIA XR	E	
EPIDIOLEX	3	PA; SP
epitol	1	
EPRONTIA	E	
ethosuximide oral	1	
FANATREX FUSEPAQ	E	
felbamate	1	
FELBATOL	3	
FINTEPLA	3	PA; SP

Drug Name	Drug Tier	Notes
fosphenytoin sodium injection solution 500 mg pe/10ml	1	
FYCOMPA	3	
gabapentin oral capsule	1	
gabapentin oral solution 250 mg/5ml	1	
GABAPENTIN ORAL TABLET 25 MG, 50 MG	E	
gabapentin oral tablet 600 mg, 800 mg	1	
GABITRIL	3	
KEPPRA	3	
KEPPRA XR	3	
lacosamide	1	
LAMICTAL ODT ORAL KIT	E	
LAMICTAL ODT ORAL TABLET DISPERSIBLE	3	
LAMICTAL ORAL TABLET	3	
LAMICTAL ORAL TABLET CHEWABLE 25 MG, 5 MG	3	
LAMICTAL STARTER	3	
LAMICTAL XR	3	
lamotrigine er	1	
lamotrigine oral kit 21 x 25 mg & 7 x 50 mg, 25 & 50 & 100 mg, 42 x 50 mg & 14x100 mg	1	
lamotrigine oral tablet	1	
lamotrigine oral tablet chewable	1	
lamotrigine oral tablet dispersible	1	
lamotrigine starter kit-blue	1	

For more information regarding the tiers and designations in this drug list, please see the *Reading your formulary* section on page 6 of this booklet.

Drug Name	Drug Tier	Notes
lamotrigine starter kit-green	1	
lamotrigine starter kit-orange	1	
levetiracetam er	1	
levetiracetam in nacl	1	
levetiracetam intravenous	1	
levetiracetam oral	1	
MYSOLINE	3	
NAYZILAM	3	QL
NEURONTIN	3	
ONFI ORAL SUSPENSION	3	PA
ONFI ORAL TABLET 10 MG, 20 MG	3	PA
oxcarbazepine	1	
OXTELLAR XR	E	
phenobarbital oral elixir	1	
phenobarbital oral tablet	1	
PHENYTEK	3	
phenytoin infatabs	1	
phenytoin oral suspension 125 mg/5ml	1	
phenytoin oral tablet chewable	1	
phenytoin sodium extended	1	
primidone oral tablet 125 mg	E	
primidone oral tablet 250 mg, 50 mg	1	
QUDEXY XR	3	
roweepra oral tablet 500 mg	1	
rufinamide	1	PA
SABRIL ORAL PACKET	E	SP

Drug Name	Drug Tier	Notes
SABRIL ORAL TABLET	3	PA; SP
SPRITAM	E	
subvenite	1	
subvenite starter kit-blue	1	
subvenite starter kit-green	1	
subvenite starter kit-orange	1	
SYMPAZAN	3	PA
TEGRETOL ORAL SUSPENSION	3	
TEGRETOL ORAL TABLET	3	
TEGRETOL-XR	3	
tiagabine hcl	1	
TOPAMAX	3	
TOPAMAX SPRINKLE	3	
topiramate er oral capsule er 24 hour sprinkle	1	
topiramate er oral capsule extended release 24 hour	1	ST
topiramate oral	1	
TRILEPTAL	3	
TROKENDI XR	3	ST
valproic acid oral capsule	1	
valproic acid oral solution	1	
VALTOCO	3	QL
vigabatrin	1	PA; SP
vigadrone	1	PA; SP
VIMPAT	E	
XCOPRI ORAL TABLET 100 MG, 150 MG, 200 MG, 50 MG	3	ST

For more information regarding the tiers and designations in this drug list, please see the *Reading your formulary* section on page 6 of this booklet.

Drug Name	Drug Tier	Notes
XCOPRI ORAL TABLET THERAPY PACK 100 & 150 MG, 14 X 12.5 MG & 14 X 25 MG, 14 X 150 MG & 14 X200 MG, 14 X 50 MG & 14 X100 MG, 150 & 200 MG	3	ST
ZARONTIN	3	
ZONEGRAN	3	
ZONISADE	E	
zonisamide oral	1	
ZTALMY	3	PA; SP
Antidementia Agents - Drugs for Alzheimer's Disease and Dementia		
ADLARITY	E	
ADUHELM	E	SP
ARICEPT	3	
donepezil hcl	1	
EXELON TRANSDERMAL	3	
galantamine hydrobromide	1	
galantamine hydrobromide er	1	
LEQEMBI	E	SP
memantine hcl er	1	QL
memantine hcl oral solution 2 mg/ml	1	
memantine hcl oral tablet	1	
NAMENDA ORAL TABLET	3	
NAMENDA TITRATION PAK	3	
NAMENDA XR	3	QL
NAMZARIC	2	QL
RAZADYNE ER	3	
rivastigmine	1	

Drug Name	Drug Tier	Notes
rivastigmine tartrate	1	
SKYSONA	3	PA; SP
Antidepressants		
amitriptyline hcl oral	1	
amoxapine	1	
ANAFRANIL	3	
APLENZIN	E	
AUVELITY	E	
bupropion hcl er (sr)	1	QL
bupropion hcl er (xl) oral tablet extended release 24 hour 150 mg, 300 mg	1	QL
BUPROPION HCL ER (XL) ORAL TABLET EXTENDED RELEASE 24 HOUR 450 MG	E	
bupropion hcl oral	1	
CELEXA ORAL TABLET	3	
chlordiazepoxide-amitriptyline	1	
CITALOPRAM HYDROBROMIDE ORAL CAPSULE	E	
citalopram hydrobromide oral solution	1	
citalopram hydrobromide oral tablet	1	
clomipramine hcl oral	1	
CYMBALTA	E	
desipramine hcl oral	1	
DESVENLAFAXINE ER	3	ST; QL
desvenlafaxine succinate er	1	QL
doxepin hcl oral capsule	1	

For more information regarding the tiers and designations in this drug list, please see the *Reading your formulary* section on page 6 of this booklet.

Drug Name	Drug Tier	Notes
doxepin hcl oral concentrate	1	
DRIZALMA SPRINKLE	3	ST; QL
duloxetine hcl oral	1	QL
DULOXICAINE	E	
EFFEXOR XR	E	
EMSAM	3	QL
escitalopram oxalate oral	1	
FETZIMA	3	ST; QL
FETZIMA TITRATION	3	ST; QL
fluoxetine hcl (pmdd) oral tablet	E	
fluoxetine hcl oral capsule	1	
fluoxetine hcl oral capsule delayed release	1	QL
fluoxetine hcl oral solution	1	
fluoxetine hcl oral tablet 10 mg, 60 mg	1	
fluoxetine hcl oral tablet 20 mg	E	
fluvoxamine maleate	1	
fluvoxamine maleate er	1	QL
FORFIVO XL	E	
imipramine hcl oral	1	
imipramine pamoate	1	
LEXAPRO ORAL TABLET	E	
LYBALVI	E	
MARPLAN	3	
mirtazapine oral	1	
NARDIL	3	
nefazodone hcl	1	
NORPRAMIN ORAL TABLET 10 MG, 25 MG	3	
nortriptyline hcl oral	1	

Drug Name	Drug Tier	Notes
olanzapine-fluoxetine hcl	1	QL
PAMELOR ORAL CAPSULE	3	
PARNATE	3	
paroxetine hcl	1	
paroxetine hcl er	1	
paroxetine mesylate	E	
PAXIL CR	3	
PAXIL ORAL SUSPENSION	3	ST
PAXIL ORAL TABLET	3	
perphenazine- amitriptyline	1	
PEXEVA ORAL TABLET 10 MG, 20 MG, 30 MG	E	
phenelzine sulfate oral	1	
PRISTIQ	E	
protriptyline hcl	1	
PROZAC ORAL CAPSULE	E	
REMERON ORAL TABLET 15 MG, 30 MG	3	
REMERON SOLTAB ORAL TABLET DISPERSIBLE 15 MG, 30 MG	3	
SERTRALINE HCL ORAL CAPSULE	E	
sertraline hcl oral concentrate	1	
sertraline hcl oral tablet	1	
SPRAVATO (56 MG DOSE)	3	PA; SP
SPRAVATO (84 MG DOSE)	3	PA; SP
SYMBYAX ORAL CAPSULE 3-25 MG, 6-25 MG	3	QL

For more information regarding the tiers and designations in this drug list, please see the *Reading your formulary* section on page 6 of this booklet.

Drug Name	Drug Tier	Notes
tranylcypromine sulfate	1	
trazodone hcl oral	1	
trimipramine maleate oral	1	
TRINTELLIX	3	ST; QL
VENLAFAXINE BESYLATE ER	E	
venlafaxine hcl	1	
venlafaxine hcl er oral capsule extended release 24 hour	1	QL
venlafaxine hcl er oral tablet extended release 24 hour 150 mg, 37.5 mg, 75 mg	E	
venlafaxine hcl er oral tablet extended release 24 hour 225 mg	1	
VIIBRYD ORAL TABLET	3	ST; QL
VIIBRYD STARTER PACK	3	ST; QL
vilazodone hcl	1	QL
WELLBUTRIN SR	E	
WELLBUTRIN XL	E	
ZOLOFT	E	
ZULRESSO	3	PA; SP
Antiemetics - Drugs for Nausea and Vomiting		
AKYNZEO INTRAVENOUS	3	
AKYNZEO ORAL	3	QL
ANTIVERT ORAL TABLET 50 MG	3	
ANTIVERT ORAL TABLET CHEWABLE	3	
ANZEMET ORAL TABLET 50 MG	3	QL
APONVIE	E	
aprepitant	1	QL

Drug Name	Drug Tier	Notes
BONJESTA	3	PA; QL
compro	1	
cvs motion sickness	E	
DICLEGIS	3	PA; QL
doxylamine-pyridoxine	1	PA; QL
dronabinol	1	PA; QL
EMEND INTRAVENOUS SOLUTION RECONSTITUTED 150 MG	3	
EMEND ORAL CAPSULE 80 MG	3	QL
EMEND ORAL SUSPENSION RECONSTITUTED	3	QL
EMEND TRI-PACK	3	QL
fosaprepitant dimeglumine	1	
GIMOTI	E	
granisetron hcl intravenous solution 1 mg/ml, 4 mg/4ml	1	
granisetron hcl oral	1	QL
MARINOL ORAL CAPSULE 2.5 MG	3	PA; QL
meclizine hcl oral tablet 12.5 mg, 25 mg	1	
meclizine hcl oral tablet chewable	E	
metoclopramide hcl oral solution 10 mg/10ml, 5 mg/5ml	1	
metoclopramide hcl oral tablet	1	
metoclopramide hcl oral tablet dispersible 5 mg	1	
motion sickness relief oral tablet 50 mg	E	
motion sickness relief oral tablet chewable	E	

For more information regarding the tiers and designations in this drug list, please see the *Reading your formulary* section on page 6 of this booklet.

Drug Name	Drug Tier	Notes
ondansetron hcl injection solution 4 mg/2ml, 40 mg/20ml	1	
ondansetron hcl injection solution prefilled syringe	1	
ondansetron hcl oral solution	1	QL
ondansetron hcl oral tablet 24 mg	E	
ondansetron hcl oral tablet 4 mg, 8 mg	1	
ondansetron odt	1	
palonosetron hcl	1	
perphenazine oral	1	
prochlorperazine	1	
prochlorperazine maleate oral	1	
REGLAN ORAL	3	
SANCUSO	3	PA; QL
scopolamine	1	
SUSTOL	3	QL
SYNDROS	3	PA; QL
TIGAN INTRAMUSCULAR	3	
TRANSDERM-SCOP TRANSDERMAL PATCH 72 HOUR	3	
trimethobenzamide hcl oral	1	
VARUBI (180 MG DOSE)	3	QL
Antifungals		
amphotericin b intravenous	1	
ANCOBON	3	
antifungal external cream 2 %	E	
antifungal external powder	E	

Drug Name	Drug Tier	Notes
athletes foot (terbinafine)	E	
BREXAFEMME	E	
CANCIDAS INTRAVENOUS SOLUTION RECONSTITUTED 70 MG	3	
casprofungin acetate intravenous solution reconstituted 70 mg	1	
ciclodan external solution	1	
ciclopirox external	1	
ciclopirox olamine external	1	
ciclopirox treatment	E	
clotrimazole external cream	1	
clotrimazole external solution	1	
clotrimazole mouth/throat troche	1	
clotrimazole vaginal cream 1 %	E	
clotrimazole-betamethasone	1	
CORTI-SAV	E	
CRESEMBA INTRAVENOUS	3	
CRESEMBA ORAL	3	PA
cvs clotrimazole 3	E	
DERMACINRX THERAZOLE PAK	E	
DESENEX EXTERNAL POWDER	E	
DIFLUCAN ORAL SUSPENSION RECONSTITUTED	3	
DIFLUCAN ORAL TABLET 100 MG, 150 MG, 200 MG	3	

For more information regarding the tiers and designations in this drug list, please see the *Reading your formulary* section on page 6 of this booklet.

Drug Name	Drug Tier	Notes
DIFMETIOXRIME	E	
econazole nitrate external	1	
ECOZA	E	
ERAXIS INTRAVENOUS SOLUTION RECONSTITUTED 100 MG	3	
ERTACZO	E	
EXELDERM	E	
fluconazole oral	1	
flucytosine oral	1	
FORMULA 7 THE SOLUTION	E	
FUNGIMEZ	E	
griseofulvin microsize oral	1	
griseofulvin ultramicrosize	1	
GYNAZOLE-1	3	
HEXIOUNYL	E	
HIXDEFRIMA	E	
hydrocortisone-iodoquinol external cream 1-1 %	E	
IMIOXIA	E	
IDOQUIMEZ-HC	E	
iodoquinol-hc-aloe polysacch	E	
iodoquinol-hydrocortisone-aloe	E	
itraconazole oral	1	PA
JUBLIA	E	
KERYDIN	3	PA
ketoconazole external cream	1	
ketoconazole external foam	E	
ketoconazole external shampoo 2 %	1	

Drug Name	Drug Tier	Notes
ketoconazole oral	1	
ketodan external foam	E	
KETODAN EXTERNAL KIT	E	
LOPROX EXTERNAL KIT 0.77 % (SUSP)	E	
LOPROX EXTERNAL SHAMPOO	3	
LOPROX EXTERNAL SUSPENSION	3	
LULICONAZOLE	E	
LUZU	E	
MENTAX	E	
micaderm	E	
micafungin sodium intravenous solution reconstituted 100 mg	1	
miconazole 3 vaginal suppository	1	
miconazole 7	E	
miconazole nitrate external cream	E	
miconazole nitrate external solution	E	
MICONAZOLE-ZINC OXIDE-PETROLAT	E	
miconazorb af	E	
MICOTRIN AL	E	
MICOTRIN AP	E	
MYCAMINE INTRAVENOUS SOLUTION RECONSTITUTED 100 MG	3	
MYCOZYL AL	E	
MYCOZYL AP	E	
naftifine hcl external cream	E	
naftifine hcl external gel 2 %	1	

For more information regarding the tiers and designations in this drug list, please see the *Reading your formulary* section on page 6 of this booklet.

Drug Name	Drug Tier	Notes
NAFTIN EXTERNAL GEL	E	
NOXAFIL ORAL	3	PA
nyamyc	1	
nystatin external	1	
nystatin mouth/throat	1	
nystatin oral tablet	1	
nystatin-triamcinolone	1	
nystop	1	
ONYCHO-MED	E	
ORAVIG	E	
oxiconazole nitrate	E	
OXISTAT	E	
PEDIZOLPAK	E	
PHEDRAX	E	
PHEODOYO	E	
PHEOXIA	E	
PHEYO	E	
PODIATROLE	E	
posaconazole	1	PA
RECURA	E	
RIMI	E	
SPORANOX	3	PA
SULCONAZOLE NITRATE	E	
tavaborole	1	PA
terbinafine hcl oral	1	QL
terconazole	1	
tm-tolnaftate	E	
tolnaftate antifungal	E	
tolnaftate external cream	E	
tolnaftate external powder	E	
TOLSURA	E	
VFEND	3	PA
VIVJOA	E	
voriconazole oral	1	PA

Drug Name	Drug Tier	Notes
VUSION	E	
VYTONE	E	
XOLEGEL COREPAK	E	
XOLEGEL DUO/HEAD & SHOULDERS	E	
XOLEGEL DUO/XOLEX	E	
ZEASORB-AF EXTERNAL POWDER	E	
Antigout Agents		
allopurinol oral tablet 100 mg, 300 mg	1	
ALLOPURINOL ORAL TABLET 200 MG	E	
COLCHICINE ORAL CAPSULE	E	
colchicine oral tablet	1	
colchicine-probenecid	1	
COLCRYS	E	
febuxostat	1	ST
KRYSTEXXA	3	PA; SP
MITIGARE	E	
probenecid oral	1	
ULORIC	3	ST
ZYLOPRIM	3	
Antimigraine Agents		
AIMOVIG SUBCUTANEOUS SOLUTION AUTO-INJECTOR 140 MG/ML, 70 MG/ML	2	PA; QL
AJOVY	2	PA; QL
almotriptan malate	E	
CAFERGOT	3	PA; QL
CAMBIA	E	
diclofenac potassium(migraine)	E	
dihydroergotamine mesylate injection	1	PA; QL

For more information regarding the tiers and designations in this drug list, please see the *Reading your formulary* section on page 6 of this booklet.

Drug Name	Drug Tier	Notes
dihydroergotamine mesylate nasal	1	PA; QL
eletriptan hydrobromide	1	QL
EMGALITY SUBCUTANEOUS SOLUTION AUTO-INJECTOR 120 MG/ML	E	
EMGALITY SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 100 MG/ML	2	PA; QL
EMGALITY SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 120 MG/ML	E	
ERGOMAR	3	PA; QL
ergotamine-caffeine	1	PA; QL
FROVA	E	
frovatriptan succinate	E	
IMITREX NASAL	3	QL
IMITREX ORAL	3	QL
IMITREX STATDOSE REFILL SUBCUTANEOUS SOLUTION CARTRIDGE	3	QL
IMITREX STATDOSE SYSTEM SUBCUTANEOUS SOLUTION AUTO-INJECTOR	3	QL
MAXALT ORAL TABLET 10 MG	3	QL
MIGERGOT	3	PA; QL
MIGRANAL	3	PA; QL
MIGRANOW	E	
naratriptan hcl	1	QL
NURTEC	2	PA; QL
ONZETRA XSAIL	E	
QULIPTA	2	PA; QL

Drug Name	Drug Tier	Notes
RELPAX	3	QL
REYVOW	E	
rizatriptan benzoate	1	QL
SUMANSETRON	E	
sumatriptan nasal	1	QL
sumatriptan succinate oral	1	QL
sumatriptan succinate refill subcutaneous solution cartridge subcutaneous solution cartridge	1	QL
sumatriptan succinate subcutaneous solution 6 mg/0.5ml	1	QL
sumatriptan succinate subcutaneous solution auto-injector 4 mg/0.5ml, 6 mg/0.5ml	1	QL
sumatriptan-naproxen sodium	E	
TOSYMRA	E	
TREXIMET ORAL TABLET 85-500 MG	E	
TRUDHESA	E	
UBRELVY	2	PA; QL
VYEPTI	3	PA; QL
ZEMBRACE SYMTOUCH	E	
zolmitriptan nasal solution 5 mg	1	QL
zolmitriptan oral	1	QL
ZOMIG NASAL SOLUTION 2.5 MG	E	
ZOMIG NASAL SOLUTION 5 MG	3	ST; QL
Antimyasthenic Agents		
MESTINON ORAL SOLUTION	3	
MESTINON ORAL TABLET	3	

For more information regarding the tiers and designations in this drug list, please see the *Reading your formulary* section on page 6 of this booklet.

Drug Name	Drug Tier	Notes
MESTINON ORAL TABLET EXTENDED RELEASE	3	
NEOSTIGMINE METHYLSULFATE SOLUTION PREFILLED SYRINGE 5 MG/5ML INTRAVENOUS	3	
NEOSTIGMINE METHYLSULFATE SOLUTION PREFILLED SYRINGE 5 MG/5ML INTRAVENOUS	E	
pyridostigmine bromide er	1	
pyridostigmine bromide oral solution	1	
pyridostigmine bromide oral tablet	1	
Antimycobacterials		
cycloserine oral	1	
dapsone oral	1	
ethambutol hcl oral	1	
isoniazid oral	1	
MYAMBUTOL ORAL TABLET 400 MG	3	
MYCOBUTIN	3	
PRETOMANID	3	
PRIFTIN	3	
pyrazinamide oral	1	
rifabutin	1	
rifampin oral	1	
RIFAMPIN+SYRSPEND SF	E	
SIRTURO	3	
TRECTOR	3	
Antineoplastics - Drugs for Cancer		
ABECMA	3	PA; SP

Drug Name	Drug Tier	Notes
abiraterone acetate	1	PA; SP
ABRAXANE	2	SP
ADCETRIS	2	PA; SP
adriamycin intravenous solution reconstituted 50 mg	1	SP
AFINITOR	E	SP
AFINITOR DISPERZ	E	SP
ALECENSA	2	PA; SP
ALIMTA	3	ST; SP
ALIQOPA	3	PA; SP
ALKERAN	3	SP
ALUNBRIG	2	PA; SP; QL
ALYMSYS	E	SP
anastrozole oral	1	
ARIMIDEX	E	
AROMASIN	3	
ARRANON	3	SP
arsenic trioxide intravenous	1	SP
ARZERRA	2	PA; SP
ASPARLAS	3	SP
AVASTIN	3	PA; SP
AYVAKIT	3	PA; SP; QL
azacitidine	1	SP
BALVERSA	3	PA; SP
BAVENCIO	3	PA; SP
BELEODAQ	3	PA; SP
BELRAPZO	E	SP
BENDAMUSTINE HCL INTRAVENOUS SOLUTION	E	SP
bendamustine hcl intravenous solution reconstituted	1	PA; SP
BENDEKA	3	PA; SP
BESPONSA	3	PA; SP
BESREMI	E	SP
bexarotene	1	PA; SP

For more information regarding the tiers and designations in this drug list, please see the *Reading your formulary* section on page 6 of this booklet.

Drug Name	Drug Tier	Notes
bicalutamide	1	
BICNU	3	SP
BLENREP	3	SP
bleomycin sulfate	1	SP
BLINCYTO	3	PA; SP
bortezomib injection solution reconstituted	1	PA; SP
bortezomib intravenous solution	1	PA; SP
BORTEZOMIB INTRAVENOUS SOLUTION RECONSTITUTED	3	PA; SP
BOSULIF	3	PA; SP
BRAFTOVI ORAL CAPSULE 75 MG	3	PA; SP
BREYANZI INTRAVENOUS SUSPENSION 70000000 CELLS/ML	3	PA; SP
BRUKINSA	3	PA; SP
busulfan	1	SP
BUSULFEX	3	SP
CABOMETYX	2	PA; SP
CALQUENCE ORAL TABLET	3	PA; SP
CAMCEVI	E	SP
CAMPTOSAR	3	SP
capecitabine	1	PA; SP
CAPRELSA ORAL TABLET 100 MG	2	PA; SP; QL
CAPRELSA ORAL TABLET 300 MG	2	PA; SP
carboplatin intravenous solution	1	SP
carmustine	1	SP
CARVYKTI	3	PA; SP
CASODEX	3	

Drug Name	Drug Tier	Notes
cisplatin intravenous solution 100 mg/100ml, 200 mg/200ml, 50 mg/50ml	1	SP
CISPLATIN INTRAVENOUS SOLUTION RECONSTITUTED	3	SP
cladribine intravenous solution 10 mg/10ml	1	SP
clofarabine	1	SP
CLOLAR	3	SP
COMETRIQ ORAL KIT 20 MG, 3 X 20 MG & 80 MG, 80 & 20 MG	3	PA; SP
COPIKTRA	3	PA; SP
COSELA	E	SP
COSMEGEN	3	SP
COTELLIC	3	PA; SP
cyclophosphamide injection	1	SP
CYCLOPHOSPHAMID E INTRAVENOUS	3	SP
cyclophosphamide oral capsule	1	
CYCLOPHOSPHAMID E ORAL TABLET	2	
CYRAMZA	3	PA; SP
cytarabine (pf)	1	SP
cytarabine injection solution	1	SP
dacarbazine intravenous	1	SP
dactinomycin	1	SP
DANYELZA	3	PA; SP
DARZALEX	3	PA; SP
DARZALEX FASPRO	E	SP
daunorubicin hcl intravenous solution	1	SP
DAURISMO	3	PA; SP
decitabine	1	PA; SP

For more information regarding the tiers and designations in this drug list, please see the *Reading your formulary* section on page 6 of this booklet.

Drug Name	Drug Tier	Notes
dexrazoxane hcl	1	SP
dexrazoxane intravenous solution reconstituted 250 mg	1	SP
docetaxel intravenous concentrate 160 mg/8ml, 20 mg/ml, 80 mg/4ml	1	SP
docetaxel intravenous solution 160 mg/16ml, 20 mg/2ml, 80 mg/8ml	1	SP
DOXIL	3	SP
doxorubicin hcl	1	SP
doxorubicin hcl liposomal	1	SP
DROXIA	3	
ELAHERE	3	PA; SP
ELITEK	3	SP
ELLECE	3	SP
ELZONRIS	3	PA; SP
EMCYT	2	
EMPLICITI	3	PA; SP
ENHERTU	3	PA; SP
ERBITUX	2	PA; SP
ERIVEDGE	3	PA; SP
ERLEADA	3	PA; SP
erlotinib hcl oral tablet 100 mg, 150 mg	1	PA; SP
erlotinib hcl oral tablet 25 mg	1	PA; SP; QL
ETHYOL	3	SP
ETOPOPHOS	3	SP
etoposide intravenous solution 1 gm/50ml, 100 mg/5ml, 500 mg/25ml	1	SP
etoposide oral	1	SP
EULEXIN	3	
everolimus oral tablet 10 mg, 2.5 mg, 5 mg, 7.5 mg	1	PA; SP; QL

Drug Name	Drug Tier	Notes
everolimus oral tablet soluble	1	PA; SP
EVOMELA	3	SP
exemestane	1	
EXKIVITY	3	PA; SP
FARESTON	3	
FASLODEX INTRAMUSCULAR SOLUTION PREFILLED SYRINGE	3	SP
FEMARA	3	
fludarabine phosphate	1	SP
fluorouracil intravenous	1	SP
FOLOTYN INTRAVENOUS SOLUTION 40 MG/2ML	2	PA; SP
FOTIVDA	E	SP
fulvestrant intramuscular solution prefilled syringe	1	SP
FYARRO	3	PA; SP
GAVRETO	3	PA; SP
GAZYVA	3	PA; SP
gemcitabine hcl	1	SP
GILOTRIF	3	PA; SP; QL
GLEEVEC	E	SP
GLEOSTINE ORAL CAPSULE 10 MG, 100 MG, 40 MG	3	SP
HALAVEN	2	PA; SP
HERCEPTIN HYLECTA	3	PA; SP
HERCEPTIN INTRAVENOUS SOLUTION RECONSTITUTED 150 MG	3	PA; SP
HERZUMA	E	SP
HYCAMTIN	3	SP
HYDREA	3	

For more information regarding the tiers and designations in this drug list, please see the *Reading your formulary* section on page 6 of this booklet.

Drug Name	Drug Tier	Notes
hydroxyurea oral	1	
IBRANCE	3	PA; SP
ICLUSIG ORAL TABLET 10 MG, 15 MG	3	PA; SP; QL
ICLUSIG ORAL TABLET 30 MG, 45 MG	3	PA; SP
IDAMYCIN PFS	3	SP
idarubicin hcl	1	SP
IDHIFA	3	PA; SP; QL
IFEX	3	SP
ifosfamide	1	SP
imatinib mesylate	1	PA; SP
IMBRUVICA ORAL CAPSULE	3	PA; SP; QL
IMBRUVICA ORAL SUSPENSION	3	PA; SP
IMBRUVICA ORAL TABLET	3	PA; SP; QL
IMFINZI	3	PA; SP
IMJUDO	3	PA; SP
IMLYGIC	3	SP
INFUGEM	3	SP
INLYTA	3	PA; SP
INQOVI	E	SP
INREBIC	3	PA; SP
IRESSA	3	PA; SP
irinotecan hcl	1	SP
ISTODAX (OVERFILL)	3	PA; SP
IXEMPRA KIT	2	SP
JAKAFI ORAL TABLET 10 MG, 5 MG	2	PA; SP; QL
JAKAFI ORAL TABLET 15 MG, 20 MG, 25 MG	2	PA; SP
JAYPIRCA	E	SP
JELMYTO	E	SP
JEMPERLI	3	PA; SP
JEVTANA	2	PA; SP

Drug Name	Drug Tier	Notes
KADCYLA	3	PA; SP
KANJINTI	2	PA; SP
KEYTRUDA INTRAVENOUS SOLUTION	3	PA; SP
KHAPZORY	3	ST; SP
KIMMTRAK	3	PA; SP
KISQALI FEMARA	3	PA; SP
KISQALI ORAL TABLET THERAPY PACK 200 MG	3	PA; SP
KOSELUGO	3	PA; SP
KRAZATI	3	PA; SP
KYPROLIS	2	PA; SP
lapatinib ditosylate	1	PA; SP
lenalidomide	1	PA; SP
LENVIMA ORAL CAPSULE THERAPY PACK 10 & 4 MG, 10 MG, 10 MG & 2 X 4 MG, 2 X 10 MG, 2 X 10 MG & 4 MG, 2 X 4 MG, 3 X 4 MG, 4 MG	3	PA; SP
letrozole oral	1	
leucovorin calcium injection	1	
leucovorin calcium oral	1	
LEUKERAN	2	
levoleucovorin calcium intravenous solution reconstituted 50 mg	1	SP
levoleucovorin calcium pf	1	SP
LIBTAYO	3	PA; SP
LONSURF	3	PA; SP
LORBRENA	3	PA; SP
LUMAKRAS	3	PA; SP
LUMOXITI	3	PA; SP
LUNSUMIO	3	PA; SP
LUTATHERA	E	

For more information regarding the tiers and designations in this drug list, please see the *Reading your formulary* section on page 6 of this booklet.

Drug Name	Drug Tier	Notes
LYNPARZA ORAL TABLET	2	PA; SP
LYSODREN	2	
LYTGOBI (12 MG DAILY DOSE)	3	PA; SP
LYTGOBI (16 MG DAILY DOSE)	3	PA; SP
LYTGOBI (20 MG DAILY DOSE)	3	PA; SP
MARGENZA	3	PA; SP
MATULANE	2	SP
MEKINIST	2	PA; SP
MEKTOVI	3	PA; SP
melphalan	1	SP
melphalan hcl	1	SP
mercaptopurine oral	1	
mesna	1	SP
MESNEX	3	SP
mitomycin intravenous	1	SP
mitoxantrone hcl	1	PA; SP
MONJUVI	3	PA; SP
mutamycin	1	SP
MVASI	2	PA; SP
MYLERAN	2	
MYLOTARG INTRAVENOUS SOLUTION RECONSTITUTED 4.5 MG	3	PA; SP
nelarabine	1	SP
NERLYNX	3	PA; SP; QL
NEXAVAR	3	PA; SP
NILANDRON	3	SP
nilutamide	1	SP
NINLARO	3	PA; SP
NIPENT	3	SP
NUBEQA	3	PA; SP
ODOMZO	3	PA; SP
OGIVRI	E	SP

Drug Name	Drug Tier	Notes
ONCASPAR INJECTION	2	SP
ONIVYDE	3	SP
ONTRUZANT	E	SP
ONUREG	3	PA; SP
OPDIVO	3	PA; SP
OPDUALAG	3	PA; SP
ORGOVYX	3	PA; SP
ORSERDU	E	SP
oxaliplatin intravenous solution 100 mg/20ml, 50 mg/10ml	1	SP
oxaliplatin intravenous solution 200 mg/40ml	1	
oxaliplatin intravenous solution reconstituted	1	SP
paclitaxel intravenous concentrate 100 mg/16.7ml, 150 mg/25ml, 30 mg/5ml, 300 mg/50ml	1	SP
PACLITAXEL PROTEIN-BOUND PART	3	SP
PADCEV	3	PA; SP
PANRETIN	3	
paraplatin intravenous solution 1000 mg/100ml, 450 mg/45ml, 600 mg/60ml	1	SP
PEMAZYRE	E	SP
PEMETREXED	3	ST; SP
PEMETREXED DISODIUM INTRAVENOUS SOLUTION	3	ST; SP
pemetrexed disodium intravenous solution reconstituted	1	SP
PEMETREXED DITROMETHAMINE	3	ST; SP
PEMFEXY	3	ST; SP

For more information regarding the tiers and designations in this drug list, please see the *Reading your formulary* section on page 6 of this booklet.

Drug Name	Drug Tier	Notes
PERJETA	2	PA; SP
PHEGO	2	PA; SP
PHOTOFRIN	3	SP
PIQRAY	3	PA; SP
PLUVICTO	E	
POLIVY	3	PA; SP
POMALYST	3	PA; SP
PORTRAZZA	3	PA; SP
POTELIGEO	3	PA; SP
PRALATREXATE	3	PA; SP
PROLEUKIN	2	SP
PURIXAN	3	SP
QINLOCK	3	PA; SP
RETEVMO	3	PA; SP
REVLIMID	2	PA; SP
REZLIDHIA	3	PA; SP
RIABNI	E	SP
RITUXAN HYCELA	3	PA; SP
RITUXAN INTRAVENOUS SOLUTION	3	PA; SP
ROMIDEPSIN INTRAVENOUS SOLUTION	3	PA; SP
romidepsin intravenous solution reconstituted	1	PA; SP
ROZLYTREK	3	PA; SP
RUXIENCE	2	PA; SP
RYBREVANT	3	PA; SP
RYDAPT	3	PA; SP
RYLAZE	E	SP
SARCLISA	3	PA; SP
SCEMBLIX ORAL TABLET 20 MG	3	PA; SP; QL
SCEMBLIX ORAL TABLET 40 MG	3	PA; SP
SIKLOS	E	
SOLTAMOX	3	
sorafenib tosylate	1	PA; SP

Drug Name	Drug Tier	Notes
SPRYCEL	2	PA; SP
STIVARGA	3	PA; SP
sunitinib malate	1	PA; SP
SUTENT	E	SP
SYLVANT	3	PA; SP
SYNRIBO	3	PA; SP
TABLOID	2	SP
TABRECTA	3	PA; SP
TAFINLAR	2	PA; SP
TAGRISSO ORAL TABLET 40 MG	3	PA; SP; QL
TAGRISSO ORAL TABLET 80 MG	3	PA; SP
TALZENNA	E	SP
tamoxifen citrate oral	1	
TARCEVA ORAL TABLET 100 MG, 150 MG	3	PA; SP
TARCEVA ORAL TABLET 25 MG	3	PA; SP; QL
TARGRETIN EXTERNAL	3	PA; SP
TARGRETIN ORAL	E	SP
TASIGNA	3	PA; SP
TAZVERIK	E	SP
TECARTUS	3	PA; SP
TECENTRIQ	3	PA; SP
TECVAYLI	3	PA; SP
TEMODAR INTRAVENOUS	2	SP
temozolomide	1	PA; SP
TEPADINA	3	SP
TEPMETKO	E	SP
THALOMID	2	PA; SP
thiotepa injection	1	SP
TIBSOVO	3	PA; SP
TICE BCG	2	SP
TIVDAK	3	PA; SP

For more information regarding the tiers and designations in this drug list, please see the *Reading your formulary* section on page 6 of this booklet.

Drug Name	Drug Tier	Notes
toposar intravenous solution 1 gm/50ml, 100 mg/5ml, 500 mg/25ml	1	SP
topotecan hcl	1	SP
toremifene citrate	1	
TRAZIMERA	2	PA; SP
TREANDA INTRAVENOUS SOLUTION RECONSTITUTED	E	SP
tretinoin oral	1	SP
TRISENOX INTRAVENOUS SOLUTION 12 MG/6ML	3	SP
TRODELVY	3	PA; SP
TRUXIMA	E	SP
TUKYSA	3	PA; SP
TURALIO ORAL CAPSULE 125 MG	3	PA; SP
TYKERB	3	PA; SP
UNITUXIN	3	PA; SP
VALCHLOR	3	PA; SP
valrubicin	1	
VALSTAR	3	
VECTIBIX INTRAVENOUS SOLUTION 100 MG/5ML, 400 MG/20ML	3	SP
VEGZELMA	E	SP
VELCADE INJECTION	3	PA; SP
VENCLEXTA	3	PA; SP
VENCLEXTA STARTING PACK	3	PA; SP
VERZENIO	3	PA; SP
VIDAZA	3	SP
VIJOICE	E	SP
vinblastine sulfate intravenous solution	1	SP

Drug Name	Drug Tier	Notes
vincasar pfs	1	SP
vincristine sulfate intravenous	1	SP
vinorelbine tartrate	1	SP
VITRAKVI	3	PA; SP
VIVIMUSTA	3	PA; SP
VIZIMPRO	3	PA; SP
VONJO	3	PA; SP
VORAXAZE	3	
VOTRIENT	3	PA; SP
VYXEOS INTRAVENOUS SUSPENSION RECONSTITUTED 44-100 MG	3	PA; SP
WELIREG	3	PA; SP
XALKORI	3	PA; SP
XELODA ORAL TABLET 150 MG	E	SP
XELODA ORAL TABLET 500 MG	3	PA; SP
XOFIGO INTRAVENOUS SOLUTION 30 MCCI/ML	2	
XOSPATA	3	PA; SP
XPOVIO (100 MG ONCE WEEKLY) ORAL TABLET THERAPY PACK 50 MG	3	PA; SP
XPOVIO (40 MG ONCE WEEKLY) ORAL TABLET THERAPY PACK 40 MG	3	PA; SP
XPOVIO (40 MG TWICE WEEKLY) ORAL TABLET THERAPY PACK 40 MG	3	PA; SP

For more information regarding the tiers and designations in this drug list, please see the *Reading your formulary* section on page 6 of this booklet.

Drug Name	Drug Tier	Notes
XPOVIO (60 MG ONCE WEEKLY) ORAL TABLET THERAPY PACK 60 MG	3	PA; SP
XPOVIO (60 MG TWICE WEEKLY)	3	PA; SP
XPOVIO (80 MG ONCE WEEKLY) ORAL TABLET THERAPY PACK 40 MG	3	PA; SP
XPOVIO (80 MG TWICE WEEKLY)	3	PA; SP
XTANDI	3	PA; SP
YERVOY	2	PA; SP
YESCARTA INTRAVENOUS SUSPENSION 200000000 CELLS	3	PA; SP
YONDELIS	3	SP
YONSA	E	SP
ZALTRAP	2	PA; SP
ZANOSAR	2	SP
ZEJULA	2	PA; SP
ZELBORAF	3	PA; SP
ZEPZELCA	3	PA; SP
ZEVALIN Y-90	3	SP
ZIRABEV	2	PA; SP
ZOLINZA	2	PA; SP
ZYDELIG	3	PA; SP
ZYKADIA ORAL TABLET	3	PA; SP
ZYNLONTA	3	PA; SP
ZYNYZ	E	SP
ZYTIGA	E	SP
Antiparasitics		
albendazole oral	1	PA
ALINIA ORAL SUSPENSION RECONSTITUTED	2	

Drug Name	Drug Tier	Notes
ALINIA ORAL TABLET	3	
ARAKODA	3	
atovaquone oral	1	
atovaquone-proguanil hcl	1	
BENZNIDAZOLE	3	
BILTRICIDE	3	
chloroquine phosphate oral	1	
COARTEM	3	
CROTAN	3	
DARAPRIM	3	PA; SP
EGATEN	3	
EMVERM	2	
goodsense lice killing	E	
hydroxychloroquine sulfate oral	1	
IMPAVIDO	3	
ivermectin oral	1	PA; QL
KRINTAFEL	3	
LAMPIT	3	
lice killing external shampoo 4-0.33 %	E	
lice treatment creme rinse	E	
lice treatment external liquid 1 %	E	
lindane external shampoo	1	
MALARONE	3	
malathion external	1	
mefloquine hcl	1	
MEPRON	3	
NATROBA	3	
NEBUPENT	3	
nitazoxanide oral	1	
OVIDE	3	
PENTAM	3	
pentamidine isethionate	1	

For more information regarding the tiers and designations in this drug list, please see the *Reading your formulary* section on page 6 of this booklet.

Drug Name	Drug Tier	Notes
permethrin external cream	1	
PLAQUENIL	3	
praziquantel oral	1	
primaquine phosphate oral tablet 26.3 (15 base) mg	1	
pyrimethamine oral	1	PA; SP
PYRIMETHAMINE-LEUCOVORIN	3	
QUALAQUIN	3	PA
quinine sulfate oral	1	PA
RID LICE KILLING SHAMPOO	E	
spinosad	1	
stop lice complete treatment	E	
STROMEKTOL	3	PA; QL
sulfurated lime	1	
Antiparkinson Agents		
amantadine hcl oral capsule	1	
amantadine hcl oral solution	1	
amantadine hcl oral tablet	1	
APOKYN SUBCUTANEOUS SOLUTION CARTRIDGE	3	PA; SP; QL
apomorphine hcl subcutaneous	1	PA; SP; QL
AZILECT	3	
benztropine mesylate oral	1	
bromocriptine mesylate oral	1	
carbidopa oral	1	
carbidopa-levodopa	1	

Drug Name	Drug Tier	Notes
carbidopa-levodopa er oral tablet extended release 25-100 mg, 50-200 mg	1	
carbidopa-levodopa-entacapone oral tablet 12.5-50-200 mg, 18.75-75-200 mg, 25-100-200 mg, 31.25-125-200 mg, 37.5-150-200 mg, 50-200-200 mg	1	
COMTAN	3	
DHIVY ORAL TABLET 25-100 MG	E	
DUOPA ENTERAL	3	PA
entacapone	1	
GOCOVRI	E	
INBRIJA	3	PA; SP
KYNMOBI	3	PA; SP; QL
KYNMOBI TITRATION KIT	3	PA; SP; QL
LODOSYN	3	
MIRAPEX ER	E	
NEUPRO	3	ST
NOURIANZ	3	PA
ONGENTYS	3	ST
OSMOLEX ER ORAL TABLET EXTENDED RELEASE 24 HOUR 129 MG, 193 MG	E	
PARLODEL	3	
pramipexole dihydrochloride	1	
pramipexole dihydrochloride er	E	
rasagiline mesylate oral	1	
ropinirole hcl	1	
ropinirole hcl er	1	
RYTARY	3	ST
selegiline hcl oral	1	

For more information regarding the tiers and designations in this drug list, please see the *Reading your formulary* section on page 6 of this booklet.

Drug Name	Drug Tier	Notes
SINEMET ORAL TABLET 10-100 MG, 25-100 MG	3	
STALEVO 100	3	
STALEVO 125	3	
STALEVO 150	3	
STALEVO 200	3	
STALEVO 50	3	
STALEVO 75	3	
TASMAR ORAL TABLET 100 MG	3	
tolcapone	1	
trihexyphenidyl hcl	1	
XADAGO	E	
ZELAPAR	E	
Antiplatelets		
aspirin-dipyridamole er	1	
BRILINTA	2	
CABLIVI	3	PA; SP; QL
cilostazol	1	
clopidogrel bisulfate oral	1	
dipyridamole oral	1	
EFFIENT	3	
PLAVIX ORAL TABLET 75 MG	3	
prasugrel hcl	1	
YOSPRALA	E	
ZONTIVITY	3	
Antipsychotics - Drugs for Mood Disorders		
ABILIFY MAINTENA INTRAMUSCULAR PREFILLED SYRINGE	3	
ABILIFY MAINTENA INTRAMUSCULAR SUSPENSION RECONSTITUTED ER	3	

Drug Name	Drug Tier	Notes
ABILIFY MYCITE MAINTENANCE KIT ORAL TABLET THERAPY PACK	E	
ABILIFY MYCITE STARTER KIT ORAL TABLET THERAPY PACK	E	
ABILIFY ORAL TABLET	3	QL
ADASUVE	3	PA
aripiprazole	1	QL
ARISTADA	3	
ARISTADA INITIO	3	
asenapine maleate	1	QL
CAPLYTA	3	ST; QL
chlorpromazine hcl injection	1	
chlorpromazine hcl oral	1	
clozapine	1	QL
CLOZARIL	3	QL
FANAPT	3	ST; QL
FANAPT TITRATION PACK	3	ST; QL
fluphenazine decanoate injection	1	
fluphenazine hcl injection	1	
fluphenazine hcl oral	1	
GEODON INTRAMUSCULAR	3	
GEODON ORAL	3	QL
HALDOL DECANOATE	3	
haloperidol decanoate intramuscular solution 100 mg/ml, 50 mg/ml	1	
haloperidol lactate oral	1	
haloperidol oral	1	
INVEGA	3	QL
INVEGA HAFYERA	3	ST

For more information regarding the tiers and designations in this drug list, please see the *Reading your formulary* section on page 6 of this booklet.

Drug Name	Drug Tier	Notes
INVEGA SUSTENNA INTRAMUSCULAR SUSPENSION PREFILLED SYRINGE	3	
INVEGA TRINZA INTRAMUSCULAR SUSPENSION PREFILLED SYRINGE 273 MG/0.88ML, 410 MG/1.32ML, 546 MG/1.75ML, 819 MG/2.63ML	3	
LATUDA	3	QL
loxapine succinate oral	1	
lurasidone hcl	1	QL
molindone hcl	1	
NUPLAZID ORAL CAPSULE	3	PA
NUPLAZID ORAL TABLET 10 MG	3	PA
olanzapine intramuscular	1	
olanzapine oral	1	QL
paliperidone er	1	QL
PERSERIS	3	
pimozide	1	
quetiapine fumarate	1	QL
quetiapine fumarate er	1	QL
REXULTI	3	QL
RISPERDAL CONSTA INTRAMUSCULAR SUSPENSION RECONSTITUTED ER	3	
RISPERDAL ORAL SOLUTION	E	
RISPERDAL ORAL TABLET 0.5 MG, 1 MG, 2 MG, 3 MG, 4 MG	E	
risperidone	1	QL
SAPHRIS	E	
SECUADO	E	

Drug Name	Drug Tier	Notes
SEROQUEL	3	QL
SEROQUEL XR	3	QL
thioridazine hcl oral	1	
thiothixene oral	1	
trifluoperazine hcl oral	1	
VERSACLOZ	3	QL
VRAYLAR	3	QL
ziprasidone hcl	1	QL
ziprasidone mesylate	1	
ZYPREXA INTRAMUSCULAR	3	
ZYPREXA ORAL	3	QL
ZYPREXA RELPREVV	3	
ZYPREXA ZYDIS	3	QL
Antivirals		
abacavir sulfate	1	
abacavir sulfate-lamivudine	1	
acyclovir external cream	E	
acyclovir external ointment	1	QL
acyclovir oral	1	
ACYCLOVIX	E	
adefovir dipivoxil	1	SP
APRETUDE	E	
APTIVUS ORAL CAPSULE	2	
atazanavir sulfate	1	
BARACLUDGE	3	SP; QL
BIKTARVY	3	
CABENUVA	E	
cidofovir intravenous	1	
CIMDUO	2	
COMBIVIR	3	
COMPLERA	2	
DELSTRIGO	3	
DENAVIR	E	

For more information regarding the tiers and designations in this drug list, please see the *Reading your formulary* section on page 6 of this booklet.

Drug Name	Drug Tier	Notes
DESCOVY	E	
DOVATO	2	
EDURANT	2	
efavirenz	1	
efavirenz-emtricitab-tenofo df	1	
efavirenz-lamivudine-tenofovir	1	
emtricitabine	1	
emtricitabine-tenofovir df	1	
EMTRIVA ORAL CAPSULE	3	
EMTRIVA ORAL SOLUTION	2	
entecavir	1	SP; QL
EPCLUSA	2	PA; SP; QL
EPIVIR	3	
EPZICOM	3	
etravirine	1	
EVOTAZ	2	
famciclovir oral	1	
fosamprenavir calcium	1	
foscarnet sodium intravenous solution 6000 mg/250ml	1	
FOSCAVIR INTRAVENOUS SOLUTION 6000 MG/250ML	3	
FUZEON SUBCUTANEOUS SOLUTION RECONSTITUTED	2	
GENVOYA	3	
HARVONI	2	PA; SP; QL
INTELENCE ORAL TABLET 100 MG, 200 MG	3	
INTELENCE ORAL TABLET 25 MG	2	

Drug Name	Drug Tier	Notes
ISENTRESS	2	
ISENTRESS HD	2	
JULUCA	2	
KALETRA ORAL SOLUTION	3	
KALETRA ORAL TABLET	3	
LAGEVRIO	3	QL
lamivudine oral solution	1	
lamivudine oral tablet 100 mg	1	SP
lamivudine oral tablet 150 mg, 300 mg	1	
lamivudine-zidovudine	1	
LEDIPASVIR-SOFOSBUVIR	E	SP
LEXIVA ORAL SUSPENSION	2	
LEXIVA ORAL TABLET	3	
LIVTENCITY	3	PA; SP
lopinavir-ritonavir	1	
maraviroc	1	PA
MAVYRET	2	PA; SP; QL
nevirapine	1	
nevirapine er	1	
NORVIR ORAL PACKET	2	
NORVIR ORAL TABLET	3	
ODEFSEY	3	
oseltamivir phosphate oral	1	QL
PAXLOVID (150/100)	3	QL
PAXLOVID (300/100)	3	QL
PEGASYS SUBCUTANEOUS SOLUTION 180 MCG/ML	2	PA; SP

For more information regarding the tiers and designations in this drug list, please see the *Reading your formulary* section on page 6 of this booklet.

Drug Name	Drug Tier	Notes
PEGASYS SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	2	PA; SP
penciclovir	E	
PIFELTRO	3	
PREVYMIS	3	PA; SP
PREZCOBIX	2	
PREZISTA ORAL SUSPENSION	2	
PREZISTA ORAL TABLET 150 MG, 600 MG, 75 MG, 800 MG	2	
RAPIVAB	3	
RELENZA DISKHALER INHALATION AEROSOL POWDER BREATH ACTIVATED 5 MG/ACT	3	QL
REMDESIVIR INTRAVENOUS SOLUTION RECONSTITUTED 100 MG	3	QL
RETROVIR INTRAVENOUS	2	
RETROVIR ORAL CAPSULE	3	
RETROVIR ORAL SYRUP	3	
REYATAZ ORAL CAPSULE 200 MG, 300 MG	3	
REYATAZ ORAL PACKET	2	
ribavirin inhalation	1	
ribavirin oral capsule	1	SP
ribavirin oral tablet 200 mg	1	SP
rimantadine hcl	1	
ritonavir	1	
RUKOBIA	2	

Drug Name	Drug Tier	Notes
SELZENTRY ORAL SOLUTION	2	PA
SELZENTRY ORAL TABLET 150 MG, 300 MG	3	PA
SELZENTRY ORAL TABLET 25 MG, 75 MG	2	PA
SITAVIG	E	
SOFOSBUVIR-VELPATASVIR	E	SP
SOVALDI	3	PA; SP; QL
stavudine oral capsule	1	
STRIBILD	3	
SUNLENCA	3	PA; QL
SYMFI	2	
SYMFI LO	2	
SYMTUZA	3	
TAMIFLU ORAL CAPSULE	3	QL
TAMIFLU ORAL SUSPENSION RECONSTITUTED 6 MG/ML	E	
tenofovir disoproxil fumarate	1	
TIVICAY	2	
TIVICAY PD	2	
TPOXX ORAL	3	
TRIUMEQ	2	
TRIUMEQ PD	3	
TRIZIVIR	3	
TROGARZO	3	PA
TRUVADA	E	
TYBOST	2	
valacyclovir hcl oral	1	QL
VALCYTE	3	
valganciclovir hcl	1	
VALTREX	3	QL

For more information regarding the tiers and designations in this drug list, please see the *Reading your formulary* section on page 6 of this booklet.

Drug Name	Drug Tier	Notes
VEKLURY INTRAVENOUS SOLUTION RECONSTITUTED	3	QL
VEMLIDY	E	SP
VIRACEPT ORAL TABLET	2	
VIRAZOLE	3	
VIREAD ORAL POWDER	2	
VIREAD ORAL TABLET 150 MG, 200 MG, 250 MG	2	
VIREAD ORAL TABLET 300 MG	3	
VOCABRIA	E	
VOSEVI	2	PA; SP; QL
XERESE	E	
XOFLUZA (40 MG DOSE) ORAL TABLET THERAPY PACK 1 X 40 MG	3	QL
XOFLUZA (80 MG DOSE) ORAL TABLET THERAPY PACK 1 X 80 MG	3	QL
ZEPATIER	3	PA; SP; QL
ZIAGEN	3	
zidovudine	1	
ZOVIRAX EXTERNAL	E	
Anxiolytics - Drugs for Anxiety		
alprazolam er	1	QL
alprazolam intensol	1	QL
alprazolam oral tablet	1	QL
alprazolam oral tablet dispersible	E	
alprazolam xr	1	QL
ATIVAN INJECTION	3	
ATIVAN ORAL	E	
bupirone hcl oral	1	

Drug Name	Drug Tier	Notes
chlordiazepoxide hcl	1	QL
clonazepam oral	1	QL
clorazepate dipotassium	1	QL
diazepam intensol	1	
diazepam oral concentrate	1	
diazepam oral solution 5 mg/5ml	1	
diazepam oral tablet	1	
DORAL	3	QL
estazolam	1	QL
HALCION	3	QL
hydroxyzine hcl oral syrup	1	
hydroxyzine hcl oral tablet	1	
hydroxyzine pamoate oral	1	
KLONOPIN	3	QL
lorazepam injection	1	
lorazepam intensol	1	QL
lorazepam oral concentrate 2 mg/ml	1	QL
lorazepam oral tablet	1	QL
LOREEV XR	E	
meprobamate	1	
midazolam hcl oral	E	
MIDAZOLAM HCL-SODIUM CHLORIDE INTRAVENOUS SOLUTION 100-0.8 MG/100ML-%, 50-0.8 MG/50ML-%, 50-0.9 MG/50ML-%	E	
MIDAZOLAM HCL-SODIUM CHLORIDE SOLUTION 100-0.9 MG/100ML-% INTRAVENOUS	E	

For more information regarding the tiers and designations in this drug list, please see the *Reading your formulary* section on page 6 of this booklet.

Drug Name	Drug Tier	Notes
MIDAZOLAM+SYRSP END SF	E	
oxazepam	1	QL
quazepam	1	QL
triazolam	1	QL
VALIUM	E	
VISTARIL	3	
XANAX	E	
XANAX XR	E	
Bipolar Agents - Drugs for Mood Disorders		
EQUETRO	3	
lithium carbonate er	1	
lithium carbonate oral	1	
LITHOBID	3	
Blood Products and Modifiers - Drugs for Blood Disorders		
ADVATE	2	SP
ADYNOVATE	3	SP
AFSTYLA	3	SP
AGRYLIN	3	
ALPHANATE INTRAVENOUS SOLUTION RECONSTITUTED 1000 UNIT, 1500 UNIT, 2000 UNIT, 250 UNIT, 500 UNIT	2	SP
ALPHANINE SD	2	SP
ALPROLIX	3	SP
ALTUVIIIIO	E	SP
AMICAR ORAL SOLUTION	3	
AMICAR ORAL TABLET	3	
aminocaproic acid oral solution	1	
aminocaproic acid oral tablet	1	

Drug Name	Drug Tier	Notes
anagrelide hcl	1	
ARANESP (ALBUMIN FREE) INJECTION SOLUTION 100 MCG/ML, 200 MCG/ML, 25 MCG/ML, 40 MCG/ML, 60 MCG/ML	2	PA; SP
ARANESP (ALBUMIN FREE) INJECTION SOLUTION PREFILLED SYRINGE	2	PA; SP
ASTRINGYN	3	
BENEFIX INTRAVENOUS KIT	2	SP
CEPROTIN	3	SP
COAGADDEX	3	SP
CORIFACT	2	SP
CYKLOKAPRON INTRAVENOUS SOLUTION 1000 MG/10ML	3	
DOPTELET ORAL TABLET 20 MG	3	PA; SP
ELOCTATE	3	SP
EMPAVELI	3	PA; SP
ENJAYMO	3	PA; SP
EPOGEN INJECTION SOLUTION 10000 UNIT/ML, 2000 UNIT/ML, 20000 UNIT/ML, 3000 UNIT/ML, 4000 UNIT/ML	E	SP
ESPEROCT	E	SP
FEIBA INTRAVENOUS SOLUTION RECONSTITUTED 1000 UNIT, 2500 UNIT, 500 UNIT	2	SP
FIBRYGA	2	SP
FULPHILA	E	SP
FYLNETRA	E	SP

For more information regarding the tiers and designations in this drug list, please see the *Reading your formulary* section on page 6 of this booklet.

Drug Name	Drug Tier	Notes
GRANIX	E	SP
HEMGENIX	3	PA; SP
HEMLIBRA	3	SP
HEMOFIL M INTRAVENOUS SOLUTION RECONSTITUTED 1000 UNIT, 1700 UNIT, 250 UNIT, 500 UNIT	3	SP
HUMATE-P INTRAVENOUS SOLUTION RECONSTITUTED 1000-2400 UNIT, 250- 600 UNIT, 500-1200 UNIT	2	SP
IDELVION	3	SP
IXINITY	3	SP
JIVI	3	SP
KOATE	2	SP
KOATE-DVI INTRAVENOUS SOLUTION RECONSTITUTED 1000 UNIT, 500 UNIT	2	SP
KOGENATE FS	3	SP
KOVALTRY	3	SP
LEUKINE INJECTION SOLUTION RECONSTITUTED	3	PA; SP
MIRCERA INJECTION SOLUTION PREFILLED SYRINGE 100 MCG/0.3ML, 150 MCG/0.3ML, 200 MCG/0.3ML, 30 MCG/0.3ML, 50 MCG/0.3ML, 75 MCG/0.3ML	3	PA; SP
MIRCERA SOLUTION PREFILLED SYRINGE 120 MCG/0.3ML INJECTION	3	PA

Drug Name	Drug Tier	Notes
MONSELS FERRIC SUBSULFATE EXTERNAL	E	
MOZOBIL	2	PA; SP; QL
MULPLETA	2	PA; SP
NEULASTA ONPRO	3	PA; SP
NEULASTA SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	3	PA; SP
NEUPOGEN INJECTION SOLUTION 300 MCG/ML, 480 MCG/1.6ML	E	SP
NEUPOGEN INJECTION SOLUTION PREFILLED SYRINGE	E	SP
NIVESTYM	2	PA; SP
NOVOEIGHT	2	SP
NOVOSEVEN RT	3	SP
NPLATE	3	PA; SP
NUWIQ	2	SP
NYVEPRIA	E	SP
OBIZUR	3	SP
PANHEMATIN INTRAVENOUS SOLUTION RECONSTITUTED 350 MG	3	SP
PROCRIT	2	PA; SP
PROFILNINE	2	SP
PROMACTA	3	PA; SP
PYRUKYND	3	PA; SP; QL
PYRUKYND TAPER PACK	3	PA; SP; QL
REBINYN	3	SP
REBLOZYL	3	PA; SP
RECOMBINATE	2	SP
RECOTHROM	3	

For more information regarding the tiers and designations in this drug list, please see the *Reading your formulary* section on page 6 of this booklet.

Drug Name	Drug Tier	Notes
RECOTHROM SPRAY KIT	3	
RELEUKO	E	SP
RETACRIT INJECTION SOLUTION 10000 UNIT/ML, 2000 UNIT/ML, 20000 UNIT/ML, 3000 UNIT/ML, 4000 UNIT/ML, 40000 UNIT/ML	2	PA; SP
RIASTAP	2	SP
RIXUBIS	3	SP
ROLVEDON	E	SP
SEVENFACT	E	SP
SOLIRIS INTRAVENOUS SOLUTION 300 MG/30ML	3	PA; SP
STIMUFEND	E	SP
TAVALISSE	3	PA; SP
THROMBIN-JMI EPISTAXIS	3	
THROMBIN-JMI EXTERNAL KIT	3	
THROMBOGEN	3	
tranexamic acid intravenous solution 1000 mg/10ml	1	
tranexamic acid oral	1	
TRANEXAMIC ACID-NACL	3	
TRETTEN	3	SP
UDENYCA	E	SP
ULTOMIRIS INTRAVENOUS SOLUTION 1100 MG/11ML, 300 MG/3ML	3	PA; SP
VONVENDI	3	SP
WILATE INTRAVENOUS KIT	2	SP

Drug Name	Drug Tier	Notes
XYNTHA INTRAVENOUS KIT 1000 UNIT, 2000 UNIT, 250 UNIT, 500 UNIT	2	SP
XYNTHA SOLOFUSE	2	SP
ZARXIO	2	PA; SP
ZIEXTENZO	3	PA; SP
ZYNTEGLO	3	PA; SP
Cardiovascular Agents - Drugs for Heart and Circulation Conditions		
ACCUPRIL	3	
ACCURETIC ORAL TABLET 10-12.5 MG, 20-12.5 MG	3	
acebutolol hcl oral	1	
AKOVAZ INTRAVENOUS SOLUTION	3	
ALDACTAZIDE ORAL TABLET 25-25 MG	3	
ALDACTONE	3	
aliskiren fumarate	1	
ALTACE ORAL CAPSULE	E	
ALTOPREV	E	
amiloride hcl oral	1	
amiloride-hydrochlorothiazide	1	
amiodarone hcl oral	1	
AMLODIPINE BES+SYRSPEND SF	E	
amlodipine besylate oral	1	
amlodipine besylate-benazepril hcl	1	
amlodipine besylate-valsartan	1	
amlodipine-atorvastatin	1	
amlodipine-olmesartan	1	

For more information regarding the tiers and designations in this drug list, please see the *Reading your formulary* section on page 6 of this booklet.

Drug Name	Drug Tier	Notes
amlodipine-valsartan-hctz	1	
ANTARA ORAL CAPSULE 90 MG	E	
ASPRUZYO SPRINKLE	E	
ATACAND	E	
ATACAND HCT	E	
atenolol oral	1	
ATENOLOL+SYRSPE ND SF	E	
atenolol-chlorthalidone	1	
ATORVALIQ	E	
atorvastatin calcium oral	1	
AVALIDE ORAL TABLET 150-12.5 MG, 300-12.5 MG	3	
AVAPRO	3	
AZOR	E	
benazepril hcl oral	1	
benazepril-hydrochlorothiazide	1	
BENICAR	E	
BENICAR HCT	E	
BETAPACE AF	3	
BETAPACE ORAL TABLET 120 MG, 160 MG, 80 MG	3	
betaxolol hcl oral	1	
BIDIL	3	
bisoprolol fumarate oral	1	
bisoprolol-hydrochlorothiazide	1	
bumetanide oral	1	
BUMEX ORAL TABLET 0.5 MG	3	
BYSTOLIC	E	

Drug Name	Drug Tier	Notes
CADUET ORAL TABLET 10-10 MG, 10-20 MG, 10-40 MG, 10-80 MG, 5-10 MG, 5-20 MG, 5-40 MG, 5-80 MG	3	
CALAN SR	3	
CAMZYOS	E	SP
candesartan cilexetil	1	
candesartan cilexetil-hctz	E	
captopril oral	1	
captopril-hydrochlorothiazide	1	
CARDIZEM CD	E	
CARDIZEM LA	E	
CARDIZEM ORAL TABLET 120 MG, 30 MG, 60 MG	3	
CARDURA	3	
CAROSPIR	E	
cartia xt	1	
carvedilol	1	
carvedilol phosphate er	E	
CATAPRES-TTS-1	E	
CATAPRES-TTS-2	E	
CATAPRES-TTS-3	E	
chlorthalidone oral tablet 25 mg, 50 mg	1	
cholestyramine light	1	
cholestyramine oral	1	
clonidine	E	
CLONIDINE HCL ER ORAL TABLET EXTENDED RELEASE 24 HOUR	E	
clonidine hcl oral	1	
colesevelam hcl oral packet	E	
colesevelam hcl oral tablet	1	

For more information regarding the tiers and designations in this drug list, please see the *Reading your formulary* section on page 6 of this booklet.

Drug Name	Drug Tier	Notes
COLESTID	E	
COLESTID FLAVORED	E	
colestipol hcl	1	
CONJUPRI	E	
COREG	3	
COREG CR	E	
CORGARD ORAL TABLET 20 MG, 40 MG	3	
CORLANOR	3	PA; QL
COZAAR	3	
CRESTOR	E	
DEMSEER	3	PA; QL
DIBENZYLINE	3	PA
digoxin oral	1	
diltiazem hcl er beads	1	
diltiazem hcl er coated beads oral capsule extended release 24 hour 120 mg, 180 mg, 240 mg, 300 mg	1	
diltiazem hcl er coated beads oral capsule extended release 24 hour 360 mg	E	
diltiazem hcl er oral capsule extended release 12 hour 120 mg	E	
diltiazem hcl er oral capsule extended release 12 hour 60 mg, 90 mg	1	
diltiazem hcl er oral capsule extended release 24 hour 120 mg, 180 mg, 240 mg	1	
diltiazem hcl er oral tablet extended release 24 hour	E	
diltiazem hcl oral	1	

Drug Name	Drug Tier	Notes
DILTIAZEM HCL- DEXTROSE SOLUTION 125-5 MG/125ML-% INTRAVENOUS	E	
DILTIAZEM HCL- DEXTROSE SOLUTION 125-5 MG/125ML-% INTRAVENOUS	3	
dilt-xr	1	
DIOVAN	E	
DIOVAN HCT	E	
disopyramide phosphate oral	1	
DIURIL	3	
dofetilide	1	
doxazosin mesylate oral	1	
droxidopa	E	SP
DYRENIUM	3	
EDARBI	3	ST
EDARBYCLOR	3	ST
EDECRIN	3	
enalapril maleate oral solution	E	
enalapril maleate oral tablet	1	
enalapril-hydrochlorothiazide	1	
ENTRESTO	2	QL
EPANED ORAL SOLUTION	E	
ephedrine sulfate (pressors) intravenous solution 50 mg/ml	1	
EPHEDRINE SULFATE-NACL SOLUTION PREFILLED SYRINGE 50-0.9 MG/10ML-% INTRAVENOUS	3	

For more information regarding the tiers and designations in this drug list, please see the *Reading your formulary* section on page 6 of this booklet.

Drug Name	Drug Tier	Notes
EPHEDRINE SULFATE-NACL SOLUTION PREFILLED SYRINGE 50-0.9 MG/10ML-% INTRAVENOUS	E	
EPHEDRINE SULFATE-NACL SOLUTION PREFILLED SYRINGE 50-0.9 MG/5ML-% INTRAVENOUS	3	
EPHEDRINE SULFATE-NACL SOLUTION PREFILLED SYRINGE 50-0.9 MG/5ML-% INTRAVENOUS	E	
eplerenone	1	
ESMOLOL HCL INTRAVENOUS SOLUTION PREFILLED SYRINGE	E	
ethacrynic acid oral	1	
EVKEEZA	3	PA; SP
EXFORGE	3	
EXFORGE HCT	3	
EZALLOR SPRINKLE	E	
ezetimibe	1	
EZETIMIBE-ROSUVASTATIN	E	
ezetimibe-simvastatin	1	
felodipine er	1	
fenofibrate micronized oral capsule 130 mg	E	
fenofibrate micronized oral capsule 134 mg, 200 mg, 43 mg, 67 mg	1	
FENOFIBRATE MICRONIZED ORAL CAPSULE 90 MG	E	
fenofibrate oral capsule 134 mg, 200 mg, 67 mg	1	

Drug Name	Drug Tier	Notes
fenofibrate oral capsule 150 mg, 50 mg	E	
fenofibrate oral tablet 120 mg, 40 mg	E	
fenofibrate oral tablet 145 mg, 160 mg, 48 mg, 54 mg	1	
fenofibric acid oral capsule delayed release	1	
fenofibric acid oral tablet	E	
FENOGLIDE	E	
FIBRICOR	E	
flecainide acetate	1	
FLOLIPID	E	
fluvastatin sodium	E	
fluvastatin sodium er	E	
fosinopril sodium	1	
fosinopril sodium-hctz	1	
FUROSCIX	E	
furosemide oral solution 10 mg/ml, 8 mg/ml	1	
furosemide oral tablet	1	
gemfibrozil oral	1	
GONITRO	3	
guanfacine hcl oral	1	
HEMANGEOL	3	
hydralazine hcl oral	1	
hydrochlorothiazide oral	1	
HYZAAR	3	
icosapent ethyl	1	PA
indapamide oral	1	
INDERAL LA	E	
INDERAL XL	E	
INNOPRAN XL	E	
INSPRA	3	

For more information regarding the tiers and designations in this drug list, please see the *Reading your formulary* section on page 6 of this booklet.

Drug Name	Drug Tier	Notes
irbesartan	1	
irbesartan-hydrochlorothiazide	1	
ISORDIL TITRADOSE ORAL TABLET 40 MG	E	
ISORDIL TITRADOSE ORAL TABLET 5 MG	3	
isosorb dinitrate-hydralazine	1	
isosorbide dinitrate oral tablet 10 mg, 20 mg, 30 mg, 5 mg	1	
isosorbide dinitrate oral tablet 40 mg	E	
isosorbide mononitrate	1	
isosorbide mononitrate er	1	
isradipine	1	
JUXTAPID ORAL CAPSULE 10 MG, 20 MG, 30 MG, 5 MG	3	PA; SP; QL
KAPSPARGO SPRINKLE	E	
KATERZIA	E	
labetalol hcl oral	1	
LANOXIN ORAL TABLET 125 MCG, 250 MCG, 62.5 MCG	2	
LASIX	3	
LEQVIO	E	
LESCOL XL	E	
LEVAMLODIPINE MALEATE	E	
LIPITOR	E	
LIPOFEN	E	
lisinopril oral	1	
lisinopril-hydrochlorothiazide	1	
LIVALO	E	
LOPID	3	
LOPRESSOR ORAL	3	

Drug Name	Drug Tier	Notes
losartan potassium oral	1	
losartan potassium-hctz	1	
LOTENSIN HCT ORAL TABLET 10-12.5 MG, 20-12.5 MG, 20-25 MG	3	
LOTENSIN ORAL TABLET 10 MG, 20 MG, 40 MG	3	
LOTREL ORAL CAPSULE 10-20 MG, 10-40 MG, 5-10 MG, 5-20 MG	3	
lovastatin oral	1	
LOVAZA	E	
matzim la	E	
MAXZIDE	3	
MAXZIDE-25	3	
METHYLDOPA ORAL	3	
metolazone	1	
metoprolol succinate er	1	
metoprolol tartrate oral	1	
metoprolol-hydrochlorothiazide	1	
metyrosine	1	PA; QL
mexiletine hcl oral	1	
MICARDIS	3	
MICARDIS HCT	E	
midodrine hcl	1	
milrinone lactate in dextrose	1	
milrinone lactate intravenous solution 10 mg/10ml, 20 mg/20ml, 50 mg/50ml	1	
MINIPRESS	3	
minoxidil oral	1	
moexipril hcl	1	
MULTAQ	3	
nadolol oral tablet 20 mg, 40 mg, 80 mg	1	

For more information regarding the tiers and designations in this drug list, please see the *Reading your formulary* section on page 6 of this booklet.

Drug Name	Drug Tier	Notes
nebivolol hcl	E	
NEXICLON XR ORAL TABLET EXTENDED RELEASE 24 HOUR	E	
NEXLETOL	2	PA; QL
NEXLIZET	2	PA; QL
niacin (antihyperlipidemic)	E	
niacin er (antihyperlipidemic)	1	
niacor	E	
nicardipine hcl oral	E	
nifedipine er	1	
nifedipine er osmotic release	1	
nifedipine oral	1	
nimodipine oral	1	
nisoldipine er	E	
NITRO-BID	3	
NITRO-DUR	E	
nitroglycerin sublingual	1	
nitroglycerin transdermal patch 24 hour	1	
nitroglycerin translingual solution	1	
NITROLINGUAL	3	
NITROSTAT	E	
NITRO-TIME	E	
NORLIQVA	3	PA
NORPACE	3	
NORPACE CR	2	
NORTHERA	E	SP
NORVASC	E	
NYMALIZE ORAL SOLUTION 6 MG/ML	3	
olmesartan medoxomil oral	1	
olmesartan medoxomil-hctz	1	

Drug Name	Drug Tier	Notes
olmesartan-amlodipine-hctz	1	
omega-3-acid ethyl esters	1	
PACERONE ORAL TABLET 100 MG, 200 MG, 400 MG	3	
papaverine hcl injection	E	
pentoxifylline er	1	
perindopril erbumine	1	
phenoxybenzamine hcl oral	1	PA
phentolamine mesylate injection solution reconstituted	1	
PHENYLEPHRINE HCL-NACL INTRAVENOUS SOLUTION PREFILLED SYRINGE 1-0.9 MG/10ML-%, 100-0.9 MCG/10ML-%, 20-0.9 MG/50ML-%, 5-0.9 MG/50ML-%	3	
pindolol	1	
PRALUENT SUBCUTANEOUS SOLUTION AUTO-INJECTOR	E	
pravastatin sodium	1	
prazosin hcl oral	1	
PRESTALIA	3	
prevalite	1	
procainamide hcl injection	1	
PROCARDIA XL	3	
propafenone hcl	1	
propafenone hcl er	1	
propranolol hcl er	1	
propranolol hcl oral	1	
QBRELIS	E	
QUESTRAN	E	

For more information regarding the tiers and designations in this drug list, please see the *Reading your formulary* section on page 6 of this booklet.

Drug Name	Drug Tier	Notes
QUESTRAN LIGHT ORAL POWDER	E	
quinapril hcl	1	
quinapril-hydrochlorothiazide oral tablet 20-12.5 mg, 20-25 mg	1	
quinidine gluconate er	1	
quinidine sulfate oral	1	
ramipril	1	
ranolazine er	1	
RECTIV	3	
REPATHA	2	PA; QL
REPATHA PUSHTRONEX SYSTEM	2	PA; QL
REPATHA SURECLICK	2	PA; QL
rosuvastatin calcium	1	
ROSZET	E	
RYTHMOL SR	3	
simvastatin oral tablet	1	
SOAAZ	E	
sotalol hcl (af)	1	
sotalol hcl oral	1	
SOTYLIZE	3	
spironolactone oral	1	
spironolactone-hctz	1	
SULAR ORAL TABLET EXTENDED RELEASE 24 HOUR 17 MG, 34 MG, 8.5 MG	E	
SURE RESULT O3D3 SYSTEM	E	
taztia xt	1	
TEKTURNA	2	
TEKTURNA HCT ORAL TABLET 300-12.5 MG, 300-25 MG	2	ST
telmisartan	1	

Drug Name	Drug Tier	Notes
telmisartan-amlodipine	1	
telmisartan-hctz	E	
TENORETIC 100	3	
TENORETIC 50	3	
TENORMIN	E	
THALITONE	3	
tiadyt er	1	
TIAZAC	3	
TIKOSYN	E	
timolol maleate oral	1	
TOPROL XL	E	
toremide oral	1	
trandolapril	1	
trandolapril-verapamil hcl er	1	
triamterene oral	1	
triamterene-hctz oral capsule 37.5-25 mg	1	
triamterene-hctz oral tablet	1	
TRIBENZOR	E	
TRICOR	3	
TRILIPIX	3	
VALSARTAN ORAL SOLUTION	E	
valsartan oral tablet	1	
valsartan-hydrochlorothiazide	1	
VASCEPA	2	PA
VASERETIC	3	
VASOTEC	3	
VECAMYL	3	
verapamil hcl er oral capsule extended release 24 hour	1	
verapamil hcl er oral tablet extended release 120 mg, 180 mg, 240 mg	1	

For more information regarding the tiers and designations in this drug list, please see the *Reading your formulary* section on page 6 of this booklet.

Drug Name	Drug Tier	Notes
verapamil hcl oral	1	
VERELAN	3	
VERELAN PM	3	
VERQUVO	3	PA; QL
VYNDAMAX	3	PA; SP; QL
VYNDAQEL	3	PA; SP; QL
VYTORIN	E	
WELCHOL ORAL PACKET	E	
WELCHOL ORAL TABLET	3	
ZESTORETIC	3	
ZESTRIL ORAL TABLET 10 MG, 20 MG, 5 MG	3	
ZESTRIL ORAL TABLET 2.5 MG, 30 MG, 40 MG	E	
ZETIA	E	
ZIAC	3	
ZOCOR ORAL TABLET 10 MG, 20 MG, 40 MG	3	
ZYPITAMAG ORAL TABLET 2 MG, 4 MG	E	
Central Nervous System Agents - Drugs for Attention Deficit Disorder		
ADDERALL	3	QL
ADDERALL XR	1	QL
ADZENYS XR-ODT	E	
amphetamine sulfate	1	QL
amphetamine-dextroamphetamine	1	QL
amphetamine-dextroamphetamine er	E	
APTENSIO XR	3	ST; QL
atomoxetine hcl	1	QL
AZSTARYS	3	ST; QL

Drug Name	Drug Tier	Notes
clonidine hcl er oral tablet extended release 12 hour	1	
CONCERTA	E	
COTEMPLA XR-ODT	E	
DAYTRANA	E	
DESOXYN	E	
DEXEDRINE ORAL CAPSULE EXTENDED RELEASE 24 HOUR 10 MG, 15 MG	3	ST; QL
dexmethylphenidate hcl	1	QL
dexmethylphenidate hcl er	1	QL
dextroamphetamine sulfate er	1	QL
dextroamphetamine sulfate oral	1	QL
DYANAVAL XR	E	
EVEKEO	E	
EVEKEO ODT	3	QL
FOCALIN	E	
FOCALIN XR	E	
guanfacine hcl er	1	
INTUNIV	3	
JORNAY PM	3	ST; QL
KAPVAY ORAL TABLET EXTENDED RELEASE 12 HOUR	3	ST
methamphetamine hcl	E	
METHYLIN ORAL SOLUTION	3	ST; QL
methylphenidate	E	
methylphenidate hcl er	1	QL
methylphenidate hcl er (cd)	1	QL
methylphenidate hcl er (la)	1	QL

For more information regarding the tiers and designations in this drug list, please see the *Reading your formulary* section on page 6 of this booklet.

Drug Name	Drug Tier	Notes
methylphenidate hcl er (osm) oral tablet extended release 18 mg, 27 mg, 36 mg, 54 mg	1	QL
METHYLPHENIDATE HCL ER (OSM) ORAL TABLET EXTENDED RELEASE 45 MG, 63 MG	3	QL
methylphenidate hcl er (osm) oral tablet extended release 72 mg	E	
methylphenidate hcl er (xr)	1	QL
methylphenidate hcl oral	1	QL
MYDAYIS	E	
PROCENTRA	3	ST; QL
QELBREE	E	
QUILLICHEW ER	E	
QUILLIVANT XR ORAL SUSPENSION RECONSTITUTED ER	E	
RELEXXII ORAL TABLET EXTENDED RELEASE 45 MG, 63 MG	3	QL
RELEXXII ORAL TABLET EXTENDED RELEASE 72 MG	E	
RITALIN	E	
RITALIN LA ORAL CAPSULE EXTENDED RELEASE 24 HOUR 10 MG, 20 MG, 30 MG, 40 MG	E	
STRATTERA	3	QL
VYVANSE	2	QL
XELSTRYM	E	
ZENZEDI	E	

Drug Name	Drug Tier	Notes
Central Nervous System Agents - Drugs for Multiple Sclerosis		
AMPYRA	3	PA; SP; QL
AUBAGIO	3	PA; SP; QL
AVONEX PEN INTRAMUSCULAR AUTO-INJECTOR KIT	2	PA; SP; QL
AVONEX PREFILLED INTRAMUSCULAR PREFILLED SYRINGE KIT	2	PA; SP; QL
BAFIERTAM	2	PA; SP; QL
BETASERON SUBCUTANEOUS KIT	2	PA; SP; QL
BRIUMVI	3	PA; SP
COPAXONE SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	2	PA; SP; QL
dalfampridine er	1	PA; SP; QL
dimethyl fumarate oral	1	PA; SP; QL
dimethyl fumarate starter pack	1	PA; SP; QL
EXTAVIA SUBCUTANEOUS KIT	E	SP
fingolimod hcl	1	PA; SP; QL
GILENYA ORAL CAPSULE 0.25 MG	3	PA; SP; QL
GILENYA ORAL CAPSULE 0.5 MG	E	SP
glatiramer acetate	1	PA; SP; QL
glatopa	1	PA; SP; QL
KESIMPTA	2	PA; SP; QL
LEMTRADA	3	PA; SP
MAVENCLAD	3	PA; SP
MAYZENT	3	PA; SP; QL
MAYZENT STARTER PACK	3	PA; SP; QL
OCREVUS	3	PA; SP

For more information regarding the tiers and designations in this drug list, please see the *Reading your formulary* section on page 6 of this booklet.

Drug Name	Drug Tier	Notes
PLEGRIDY	E	SP
PLEGRIDY STARTER PACK	E	SP
PONVORY	E	SP
PONVORY STARTER PACK	E	SP
REBIF REBIDOSE SUBCUTANEOUS SOLUTION AUTO-INJECTOR	E	SP
REBIF REBIDOSE TITRATION PACK SUBCUTANEOUS SOLUTION AUTO-INJECTOR	E	SP
REBIF SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	E	SP
REBIF TITRATION PACK SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	E	SP
TASCENSO ODT	3	PA; SP; QL
TECFIDERA	E	SP
teriflunomide	1	PA; SP; QL
TYSABRI	3	PA; SP; QL
VUMERITY	2	PA; SP; QL
ZEPOSIA	3	PA; SP; QL
ZEPOSIA 7-DAY STARTER PACK	3	PA; SP; QL
ZEPOSIA STARTER KIT	3	PA; SP; QL
Central Nervous System Agents - Miscellaneous		
ADDYI	3	PA; QL
ADIPEX-P	E	
AMVUTTRA	3	PA; SP; QL
AUSTEDO	3	PA; SP; QL

Drug Name	Drug Tier	Notes
AUSTEDO PATIENT TITRATION KIT	3	PA; SP; QL
AUSTEDO XR	E	SP
benzphetamine hcl	E	
caffeine citrate oral	1	
CONTRACE	E	
CONVENIENCE PAK	E	
DAYBUE	E	SP
diethylpropion hcl er	E	
diethylpropion hcl oral	E	
EXSERVAN	E	
GRALISE ORAL	3	ST; QL
GRALISE ORAL TABLET 300 MG, 600 MG	3	ST; QL
GRALISE TABLET 450 MG ORAL	3	
GRALISE TABLET 750 MG ORAL	3	
GRALISE TABLET 900 MG ORAL	3	
HORIZANT ORAL TABLET EXTENDED RELEASE	3	PA; QL
IMCIVREE	E	SP
INGREZZA	3	PA; SP; QL
LOMAIRA	E	
LYRICA CR	E	
LYRICA ORAL CAPSULE	2	QL
LYRICA ORAL SOLUTION	3	QL
NEURAPTINE	E	
NUEDEXTA	3	PA
ONPATTRO	3	PA; SP
ORLISTAT ORAL	E	
phendimetrazine tartrate	E	
phendimetrazine tartrate er	E	

For more information regarding the tiers and designations in this drug list, please see the *Reading your formulary* section on page 6 of this booklet.

Drug Name	Drug Tier	Notes
phentermine hcl oral	E	
pregabalin er	E	
pregabalin oral	1	QL
QSYMIA	E	
RADICAVA	3	PA; SP
RADICAVA ORS	2	PA; SP
RADICAVA ORS STARTER KIT	2	PA; SP
RELYVRIO	3	PA; SP; QL
RILUTEK	3	PA; QL
riluzole	1	PA; QL
SAVELLA	3	ST; QL
SAVELLA TITRATION PACK	3	ST; QL
SAXENDA	E	
SUCCINYLBCHOLINE CHLORIDE INTRAVENOUS SOLUTION PREFILLED SYRINGE 140 MG/7ML	3	
TEGSEDI	3	PA; SP; QL
tetrabenazine	1	PA; SP
TIGLUTIK	2	PA; QL
VECURONIUM BROMIDE INTRAVENOUS SOLUTION PREFILLED SYRINGE	3	
VYLEESI	3	PA; QL
WEGOVI	E	
XENAZINE	E	SP
XENICAL	E	
Dental and Oral Agents - Drugs for Mouth and Throat Conditions		
ARESTIN	E	
cevimeline hcl	1	
chlorhexidine gluconate mouth/throat	E	

Drug Name	Drug Tier	Notes
CLINPRO 5000	E	
DEBACTEROL SOLUTION 30-50 % MOUTH/THROAT	E	
DENTA 5000 PLUS	E	
DENTAGEL	E	
DERMACINRX CLORHEXACIN	E	
easygel dental	E	
EVOXAC	3	
FIRST-MOUTHWASH BLM	E	
FLUORIDEX	E	
fluoridex daily renewal	E	
FLUORIDEX ENHANCED WHITENING DENTAL PASTE	E	
FLUORIDEX SENSITIVITY RELIEF DENTAL PASTE	E	
FLUORIMAX 5000	E	
FLUORIMAX 5000 SENSITIVE	E	
HURRICAIN MOUTH/THROAT GEL	E	
instant oral pain relief max	E	
JUST RIGHT 5000	E	
KEPIVANCE	2	SP
lidocaine hcl mouth/throat	E	
lidocaine viscous hcl	1	
LOLLICAINE	E	
MOUTH KOTE REMINT	E	
MUCOSITISRX	E	
NAFRINSE DAILY ACIDULATED	E	
NAFRINSE DAILY/NEUTRAL	E	

For more information regarding the tiers and designations in this drug list, please see the *Reading your formulary* section on page 6 of this booklet.

Drug Name	Drug Tier	Notes
NAFRINSE WEEKLY	E	
NUSURGEPAK SURGICAL PREP/CARE	E	
oralone	1	
PERIDEX	E	
periogard	E	
pilocarpine hcl oral	1	
PREVIDENT	E	
PREVIDENT 5000 BOOSTER PLUS	E	
PREVIDENT 5000 DRY MOUTH DENTAL GEL	E	
PREVIDENT 5000 ENAMEL PROTECT DENTAL GEL	E	
PREVIDENT 5000 ORTHO DEFENSE	E	
PREVIDENT 5000 PLUS	E	
PREVIDENT 5000 SENSITIVE DENTAL GEL	E	
SALAGEN	3	
SALIVAMAX	E	
sf	E	
sf 5000 plus	E	
sodium fluoride 5000 enamel dental gel	E	
sodium fluoride 5000 plus	E	
sodium fluoride 5000 ppm	E	
sodium fluoride 5000 sensitive dental gel	E	
sodium fluoride dental cream	E	
sodium fluoride dental gel 1.1 %	E	

Drug Name	Drug Tier	Notes
sodium fluoride mouth/throat	E	
triamcinolone acetonide mouth/throat	1	
XEROSTOMIA RELIEF SPRAY	E	
Dermatological Agents - Drugs for Skin Conditions		
A.A.G.C. KIT IN TERODERM	E	
ABREVA	E	
ABSORICA	E	
ABSORICA LD	3	PA
ACANYA	E	
acutane	1	
ACESO AG	E	
ACIOXIA	E	
ACIOXIAY	E	
acitretin	1	
ACZONE	E	
ADAINZDE	E	
ADAINZOXIA	E	
adapalene external cream	1	PA
adapalene external gel	1	PA
ADAPALENE EXTERNAL PAD	E	
ADAPALENE EXTERNAL SOLUTION	E	
adapalene-benzoyl peroxide external gel	1	
ADAPALENE- BENZOYL PEROXIDE EXTERNAL PAD	E	
ADBRY	2	PA; SP; QL
ADEINZDE	E	
ADVANCED ALLERGY COLLECTION	E	

For more information regarding the tiers and designations in this drug list, please see the *Reading your formulary* section on page 6 of this booklet.

Drug Name	Drug Tier	Notes
AKLIEF	E	
ALA SCALP	E	
ala-cort external cream	1	
ALADERM PLUS	E	
alclometasone dipropionate	1	
ALCOHOL PREP PADS EXTERNAL 70 %	E	
ALEVAMAX	E	
ALTRENO	3	PA
amcinonide external lotion	1	
amcinonide external ointment	E	
AMELUZ	E	
ammonium lactate external	1	
amnesteem	1	
AMZEEQ	3	
APEXICON E	E	
AQUA-NU	E	
AQUAPHILIC	E	
ARAZLO	E	
ARIDA	E	
ARZOL SILVER NIT APPLICATORS	E	
ATOPICLAIR	E	
ATRALIN	3	PA
AVAR CLEANSER EXTERNAL LIQUID	E	
AVAR LS CLEANSER	E	
AVAR-E EMOLLIENT	E	
AVAR-E GREEN	E	
AVAR-E LS	E	
AVEIDA	E	
AVEIDAOXIA	E	
AVITA	E	
AZADROX	E	

Drug Name	Drug Tier	Notes
azelaic acid external	1	
AZELEX	E	
B & C	3	
balsam peru-castor oil	1	
BENSAL HP EXTERNAL OINTMENT 3 %	E	
BENZAC AC WASH EXTERNAL LIQUID	E	
BENZAMYCIN	E	
BENZEPRO CREAMY WASH	E	
BENZEPRO EXTERNAL	E	
BENZEPRO EXTERNAL FOAM 5.2 %, 9.7 %	E	
benzebro external foam 5.3 %	E	
BENZEPRO EXTERNAL LIQUID	E	
BENZEPRO FOAMING CLOTHS	E	
benzoin compound	E	
benzoin external tincture	E	
BENZOYL PEROX-HYDROCORTISONE	E	
benzoyl peroxide external foam 9.8 %	E	
BENZOYL PEROXIDE EXTERNAL GEL 6.5 %, 8 %	E	
BENZOYL PEROXIDE FORTE- HC	E	
benzoyl peroxide-erythromycin	1	
betamethasone dipropionate aug	1	
betamethasone dipropionate external	1	

For more information regarding the tiers and designations in this drug list, please see the *Reading your formulary* section on page 6 of this booklet.

Drug Name	Drug Tier	Notes
betamethasone valerate external	1	
BIAFINE	E	
BIONECT EXTERNAL CREAM	E	
blanche	E	
BOTOX COSMETIC	E	SP
boudreauxs butt paste external ointment 40 %	E	
bp 10-1	E	
bp cleansing wash	E	
bp wash external liquid 2.5 %	E	
BPCO	3	
brimonidine tartrate external	1	
BRYHALI	E	
calamine external lotion 8-8 %	E	
calcipotriene external cream	1	QL
CALCIPOTRIENE EXTERNAL FOAM	E	
calcipotriene external ointment	1	
calcipotriene external solution	1	
calcipotriene-betameth diprop external ointment	E	
calcipotriene-betameth diprop external suspension	1	QL
CALCITRENE	3	
calcitriol external	1	
CANTHARIDIN EXTERNAL	E	
CAPEX	E	
capsaicin external cream 0.025 %, 0.075 %	E	

Drug Name	Drug Tier	Notes
capsaicin pain relief	E	
capzix	E	
CARAC	3	
CEM-UREA	E	
CERACADE	E	
cerovel external lotion	E	
CHLOHUX	E	
CHLOOXIA	E	
CIBINQO	2	PA; SP; QL
claravis	1	
CLENIA PLUS	E	
CLEOCIN-T EXTERNAL LOTION	3	
clindacin	E	
CLINDACIN ETZ EXTERNAL KIT	E	
clindacin etz external swab	1	
CLINDACIN PAC	E	
clindacin-p	1	
CLINDAGEL	E	
clindamycin phos-benzoyl perox external gel 1-5 %, 1.2-2.5 %, 1.2-5 %	1	
clindamycin phosphate external foam	E	
clindamycin phosphate external lotion	1	
clindamycin phosphate external solution	1	
clindamycin phosphate external swab	1	
clindamycin phosphate gel 1 % external	1	
clindamycin phosphate gel 1 % external	E	
clindamycin-tretinoin	1	
CLINDAVIX	E	
CLINOIN	E	

For more information regarding the tiers and designations in this drug list, please see the *Reading your formulary* section on page 6 of this booklet.

Drug Name	Drug Tier	Notes
clobetasol prop emollient base	1	
clobetasol propionate e	1	
clobetasol propionate emulsion	E	
clobetasol propionate external	1	
CLOBETAVIX	E	
CLOBEX	3	
CLOBEX SPRAY	3	
clocortolone pivalate	E	
CLODAN EXTERNAL KIT	E	
clodan external shampoo	1	
CLODERM	E	
coal tar external solution	1	
COLLANEX	E	
CONDYLOX EXTERNAL GEL	3	
COPADERM	E	
COPASIL EXTERNAL	E	
CORDRAN EXTERNAL CREAM 0.05 %	E	
CORDRAN EXTERNAL LOTION	E	
CORDRAN EXTERNAL TAPE	E	
corn & callus remover	E	
CORTANE-B EXTERNAL	E	
CORTIZONE-10 COOLING	E	
CORTIZONE-10 FEMININE ITCH	E	
CORTIZONE-10 INTENSVE MOISTURE	E	
CORTIZONE-10 OVERNIGHT	E	

Drug Name	Drug Tier	Notes
CORTIZONE-10 SOOTHING ALOE	E	
CORTIZONE-10 ULTRA SOOTHING	E	
dapsone external gel 5 %	E	
dapsone gel 7.5 % external	E	
DAZAVEIDAOXIA	E	
DAZOMON	E	
DELUO	E	
DEOXIA	E	
DEOXIADEMTAR	E	
DEOXIATAR	E	
DEOXIAVAR	E	
DERMACINRX ATRIX ANTIBAC WASH	E	
DERMACINRX ATRIX CLARIFY TONER	E	
DERMACINRX PENETRAL	E	
DERMACINRX SURGICAL COMBOPAK	E	
DERMACINRX UREA	E	
DERMA-SMOOTHIE/FS BODY	3	
DERMA-SMOOTHIE/FS SCALP	3	
DERMELEVE ADVANCED FORMULA	E	
DERMELLE	E	
DERPIXA	E	
desonide external cream	1	
desonide external gel	E	
desonide external lotion	1	
desonide external ointment	1	

For more information regarding the tiers and designations in this drug list, please see the *Reading your formulary* section on page 6 of this booklet.

Drug Name	Drug Tier	Notes
DESOWEN EXTERNAL CREAM	3	
desoximetasone external cream 0.05 %	E	
desoximetasone external cream 0.25 %	1	
desoximetasone external gel	1	
desoximetasone external liquid	E	
desoximetasone external ointment 0.05 %	E	
desoximetasone external ointment 0.25 %	1	
desrx	E	
DEXERYL	E	
DIADIMAXIA	E	
DIAOXIA	E	
diaper rash external ointment	E	
DIASAXIATAR	E	
DIASDIMAXIA	E	
DIASOXIA	E	
dibucaine (perianal)	E	
diclofenac sodium gel 3 % external	1	ST; QL
diclofenac sodium gel 3 % external	1	PA; QL
diclofenac sodium gel 3 % external	E	
DIFFERIN EXTERNAL CREAM	E	
DIFFERIN EXTERNAL GEL 0.3 %	E	
DIFFERIN EXTERNAL LOTION	E	
diflorasone diacetate external	E	
DIMOXIA	E	

Drug Name	Drug Tier	Notes
DIOCHLOY	E	
DIOOXIA	E	
DIPROLENE EXTERNAL OINTMENT	3	
docosanol external	E	
DOVONEX EXTERNAL CREAM	3	
doxepin hcl external	E	
doxycycline	E	
DR SMITHS ADULT BARRIER EXTERNAL OINTMENT	E	
DR SMITHS DIAPER QUICK RELIEF	E	
DRAXACE LOTION CLEANSER	E	
DRAXACEY	E	
DRIXECE	E	
DRYSOL	3	
DUOBRII	E	
DUPIXENT	2	PA; SP; QL
DYNAGINATE AG SILVER CAL 4"X8" PAD 4"X8" EXTERNAL	E	
ECEOXIA	E	
EFUDEX EXTERNAL CREAM	3	
ELETONE	E	
ELIDEL	3	QL
EMULSION SB	E	
ENOVARX-TRAMADOL	E	
ENSTILAR	3	QL
EPICERAM	E	
EPIDUO	3	
EPIDUO FORTE	3	
EPIFOAM	3	
EPSOLAY	E	
ery	1	

For more information regarding the tiers and designations in this drug list, please see the *Reading your formulary* section on page 6 of this booklet.

Drug Name	Drug Tier	Notes
ERYGEL	3	
erythromycin external gel	1	
erythromycin external solution	1	
ESKATA	E	
ETHOXIA	E	
EUCRISA	2	ST
FABIOR	E	
FINACEA EXTERNAL FOAM	3	
FINACEA EXTERNAL GEL	3	ST
FINAPID	E	
FINAPOD	E	
FINAPODTAR	E	
finasteride oral tablet 1 mg	E	
fluocinolone acetonide body	1	
fluocinolone acetonide external	1	
fluocinolone acetonide scalp	1	
fluocinonide cream 0.1 % external	E	
fluocinonide emulsified base	1	
fluocinonide external cream 0.05 %	1	
fluocinonide external gel	1	
fluocinonide external ointment	1	
fluocinonide external solution	1	
FLUOPAR	E	
FLUOROURACIL EXTERNAL CREAM 0.5 %	2	

Drug Name	Drug Tier	Notes
fluorouracil external cream 5 %	1	
fluorouracil external solution	1	
FLUOVIX	E	
FLUOVIX PLUS	E	
FLUOXIA	E	
flurandrenolide external cream	E	
flurandrenolide external lotion	E	
fluticasone propionate external	1	
FLYPROGPIDTAR	E	
GENADUR	E	
GORDOFILM	3	
halcinonide	E	
halobetasol propionate external cream	1	
HALOBETASOL PROPIONATE EXTERNAL FOAM	E	
halobetasol propionate external ointment	1	
HALOG	E	
HALUCORT	E	
HAPRODERM	E	
HAXCHLO	E	
HAXCHLODREX	E	
HAXDRAX	E	
HPR PLUS	E	
HPR PLUS HYDROGEL	E	
HYDRO 40	E	
hydrocortisone acepramoxine external cream 2.5-1 %	E	
hydrocortisone acetate external cream	E	

For more information regarding the tiers and designations in this drug list, please see the *Reading your formulary* section on page 6 of this booklet.

Drug Name	Drug Tier	Notes
hydrocortisone acetate external ointment 1 %	E	
hydrocortisone butyr lipo base	E	
hydrocortisone butyrate external cream	1	
hydrocortisone butyrate external lotion	E	
hydrocortisone butyrate external ointment	1	
hydrocortisone butyrate external solution	1	
hydrocortisone cream 1 % external (otc)	E	
hydrocortisone cream 1 % external (rx)	1	
hydrocortisone external cream 2.5 %	1	
hydrocortisone external lotion 2.5 %	1	
hydrocortisone external ointment 1 %, 2.5 %	1	
hydrocortisone valerate	1	
hydroquinone external cream	E	
HYFTOR	E	
HYLATOPIC PLUS EXTERNAL CREAM	E	
IDAOXIA	E	
IDARAN	E	
IDYYXIATAR	E	
imiquimod external cream 3.75 %	1	ST
imiquimod external cream 5 %	1	
imiquimod pump	1	ST
IMPEKLO	E	
IMPOYZ	E	
INOVA	E	
INOVA 4/1 ACNE CONTROL THERAPY	E	

Drug Name	Drug Tier	Notes
INOVA 8/2 ACNE CONTROL THERAPY	E	
INZDEAXIATAR	E	
INZDEAXIAVAR	E	
INZDEOXIA	E	
isotretinoin oral capsule 10 mg, 20 mg, 30 mg, 40 mg	1	
isotretinoin oral capsule 25 mg, 35 mg	E	
ITHOXIA	E	
ivermectin external cream	1	
JUVAZIN	E	
KAMDOY	E	
KATARAXAP	E	
KATARVIA	E	
KATARYA	E	
KATARYAXN	E	
KAXM	E	
KEIDO	E	
KENALOG EXTERNAL	E	
KERAGEL	E	
KERALYT EXTERNAL GEL 6 %	E	
KERALYT EXTERNAL SHAMPOO	3	
KERALYT SCALP	E	
KERAMATRIX REPLICINE 2CMX3CM	E	
KERAMATRIX REPLICINE 5CMX5CM EXTERNAL SHEET	E	
KETARYA	E	
KEVARAXAP	E	
KEVARTIA	E	
KEVARYA	E	
KEXM	E	
KEYA	E	

For more information regarding the tiers and designations in this drug list, please see the *Reading your formulary* section on page 6 of this booklet.

Drug Name	Drug Tier	Notes
KIVIK	E	
KLARON	3	
KLISYRI	3	ST
KOTARAXAP	E	
KUTAR	E	
KUTARVIA	E	
KUTARYAXM	E	
KUTARYAXMPA	E	
KUTEA	E	
KUVARYA	E	
KUVARYE	E	
KUXM	E	
lactic acid e	1	
lactic acid external lotion	1	
LAVARE WOUND WASH	E	
LEVULAN KERASTICK	3	
LEXETTE	E	
LIDOCAINE-HYDROCORTISONE ACE EXTERNAL CREAM 1-1 %	E	
LOCOID EXTERNAL LOTION	E	
LOCOID LIPOCREAM	E	
LUXIQ	3	
MEDERMA	E	
MEDERMA ADVANCED SCAR GEL	E	
MEDERMA FOR KIDS	E	
MEDERMA SPF 30	E	
medpura hand sanitizer external gel 70 %	E	
MEDPURA HYDROCORTISONE	E	
METDRAY	E	
methoxsalen rapid	1	

Drug Name	Drug Tier	Notes
methyl salicylate external liquid	E	
METROCREAM	3	
METROGEL EXTERNAL GEL	E	
METROLOTION	3	
metronidazole external	1	
MIMYX	E	
MIRVASO	3	
moisturel external lotion 3 %	E	
mometasone furoate external	1	
NENDRUX	E	
NEOSALUS	E	
NEOSPORIN + PAIN RELIEF MAX ST	E	
NEO-SYNALAR EXTERNAL CREAM	3	
NEO-SYNALAR EXTERNAL KIT	E	
neuac external gel	1	
NEXOBRID	E	
NORITATE	E	
NUCARACLINPAK	E	
NUCARARXPAK	E	
NUCORT	E	
NUDERMRXPAK 120	E	
NUDERMRXPAK 60	E	
NUJU	E	
NUJU	E	
NUTRASEB	E	
NUTRIARX CREAMPK	E	
NUVAIL	E	
OLUX-E	E	
ONEXTON	3	
ONZDEAXIADEMTAR	E	
ONZDEAXIADEMVAR	E	

For more information regarding the tiers and designations in this drug list, please see the *Reading your formulary* section on page 6 of this booklet.

Drug Name	Drug Tier	Notes
ONZDEAXIATAR	E	
ONZDEAXIAVAR	E	
ONZDEAXIAZAR	E	
ONZDEOXIA	E	
OPZELURA	E	
ORACEA	E	
OVACE PLUS	E	
OVACE PLUS WASH	E	
OVACE WASH	E	
OXIACHLO	E	
OXIAICE	E	
OXIANUJI	E	
OXIANUJO	E	
OXIATAR	E	
OXIAVAR	E	
OXIAVARRY	E	
OXIAVARY	E	
OXIAZAR	E	
OXOPID	E	
OXOPIDAXIAQUP	E	
OXOPOD	E	
PANDEL	E	
PENLEN	E	
PHLAG SPRAY	E	
PIDPROGTAR	E	
pimecrolimus	1	ST; QL
PLEXION	E	
PLEXION CLEANSER EXTERNAL LIQUID	E	
PLEXION CLEANSING CLOTH EXTERNAL PAD	E	
PLEXION NS	E	
PODOCON-25	E	
podofilox external	1	
PODOXIA	E	
PODPROG	E	
PODPROGTAR	E	

Drug Name	Drug Tier	Notes
PODTAR	E	
PR BENZOYL PEROXIDE	E	
PR BENZOYL PEROXIDE WASH	E	
PR CREAM	E	
PRAKETAMIDE	E	
PRAMOSONE EXTERNAL CREAM 1-1 %	3	
PRAMOSONE EXTERNAL CREAM 1-2.5 %	E	
PRAMOSONE EXTERNAL LOTION	3	
PRAMOSONE EXTERNAL OINTMENT	E	
PRAMOXINE-HC EXTERNAL CREAM	E	
PREPARATION H EXTERNAL CREAM 1 %	E	
PRESERA	E	
PROMISEB	E	
PRONAL	E	
PROOXIA	E	
PROPECIA	E	
PROSILK EXTERNAL	E	
PROTOPIC	3	ST; QL
PRUCLAIR	E	
PRUDOXIN	E	
PRUMYX	E	
PYROGALLIC ACID	3	
QBREXZA	3	QL
QUIDROXZAR	E	
QUIHOXAXIA	E	
QUIHOXVAR	E	
QUINIXIL	E	
QUITAR	E	

For more information regarding the tiers and designations in this drug list, please see the *Reading your formulary* section on page 6 of this booklet.

Drug Name	Drug Tier	Notes
QUTENZA	E	
QUTENZA (2 PATCH)	E	
QUTENZA (4 PATCH)	E	
RADIAPLEXRX	3	
RAYASAL	E	
RECEDO	E	
REGENECARE	3	
REGRANEX	3	PA
REMIGEN	E	
RENOVA	E	
RENOVA PUMP	E	
RESORCINOL-SULFUR	E	
RETIN-A	3	PA
RETIN-A MICRO GEL 0.04 %, 0.1 %	E	
RETIN-A MICRO PUMP EXTERNAL GEL 0.04 %, 0.1 %	E	
RETIN-A MICRO PUMP EXTERNAL GEL 0.06 %, 0.08 %	2	PA
REXASIL PATCH & VITAMIN E LIQ	E	
RHOFADE	3	
ROAOXIA	E	
salicylic acid er	E	
salicylic acid external foam	E	
salicylic acid external gel	E	
salicylic acid external ointment	E	
salicylic acid external shampoo	E	
salicylic acid external solution 26 %	E	
salicylic acid wart remover	E	

Drug Name	Drug Tier	Notes
salicylic acid-cleanser external kit 6 % cream	E	
SALIMEZ	E	
SALIMEZ FORTE	E	
SALVAX	E	
SALVAX DUO PLUS	E	
SANADERMRX SKIN REPAIR	E	
SANTYL	3	QL
SAROXIA	E	
SCALACORT DK	E	
SCARCARE GEL-PAD KIT/LARGE	E	
SCARCIN	E	
SCARSILK EXTERNAL	E	
SCARZEN SKIN REPAIR	E	
SCENESSE	3	PA; SP
selenium sulfide external lotion	1	
selenium sulfide external shampoo	E	
SERNIVO	E	
SILA III	E	
SILHEAL-10	E	
SILVERSEAL HYDROGEL DRESSING EXTERNAL PAD 2"X3"	E	
SKARCADE	E	
skarjel	E	
sodium sulfacetamide external shampoo	E	
sodium sulfacetamide wash	E	
SODIUM SULFACETAMIDE-BAKUCHIOL	E	
SOLARAVIX EXTERNAL	E	

For more information regarding the tiers and designations in this drug list, please see the *Reading your formulary* section on page 6 of this booklet.

Drug Name	Drug Tier	Notes
SOLOX	E	
SOOLANTRA	3	
SORILUX	E	
sss 10-5 external cream	E	
SSS 10-5 EXTERNAL FOAM	E	
STRATA CTX	E	
STRATA GRT	E	
STRATA MARK	E	
STRATA TRIZ	E	
STRATA XRT	E	
sulfacetamide sodium (acne)	1	
sulfacetamide sodium (cleans)	E	
sulfacetamide sodium external liquid	E	
sulfacetamide sodium-sulfur external cream	E	
sulfacetamide sodium-sulfur external liquid	E	
sulfacetamide sodium-sulfur external lotion	E	
sulfacetamide sodium-sulfur external pad 10-4 %, 9.8-4.8 %	E	
sulfacetamide sodium-sulfur external suspension	E	
sulfacetamide sod-sulfur wash external liquid	E	
sulfacetamide-sulfur in urea emulsion 10-5 % external	1	
sulfacetamide-sulfur in urea emulsion 10-5 % external	E	
SULFACLEANSE 8/4	E	
sulfamez wash	E	

Drug Name	Drug Tier	Notes
SUMADAN	E	
SUMADAN WASH	E	
SUMADAN XLT	E	
SUMAXIN	E	
SUMAXIN CP	E	
SYNALAR	3	
SYNALAR (CREAM)	E	
SYNALAR (OINTMENT)	E	
SYNALAR TS	E	
SYNERDERM	E	
TACLONEX EXTERNAL OINTMENT	E	
TACLONEX EXTERNAL SUSPENSION	3	QL
tacrolimus external ointment	1	QL
TARDEOXIA	E	
TARDIMAXIA	E	
TAROXIA	E	
tazarotene external cream	1	PA
TAZAROTENE EXTERNAL FOAM	E	
tazarotene external gel	1	PA
TAZORAC EXTERNAL CREAM 0.05 %	E	
TAZORAC EXTERNAL CREAM 0.1 %	3	PA
TAZORAC EXTERNAL GEL	E	
TETOXIA	E	
TETPIDTAR	E	
TETRIX EXTERNAL CREAM	E	
TEXACORT	E	

For more information regarding the tiers and designations in this drug list, please see the *Reading your formulary* section on page 6 of this booklet.

Drug Name	Drug Tier	Notes
TOPICORT EXTERNAL CREAM 0.05 %	E	
TOPICORT EXTERNAL CREAM 0.25 %	3	
TOPICORT EXTERNAL GEL	3	
TOPICORT EXTERNAL OINTMENT 0.05 %	E	
TOPICORT EXTERNAL OINTMENT 0.25 %	3	
TOPICORT SPRAY	E	
tovet external foam	E	
TOVET EXTERNAL KIT	E	
tretinoin external	1	PA
tretinoin microsphere	E	
tretinoin microsphere pump	E	
triamcinolone acetonide external aerosol solution	E	
triamcinolone acetonide external cream	1	
triamcinolone acetonide external lotion	1	
triamcinolone acetonide external ointment 0.025 %, 0.1 %, 0.5 %	1	
triamcinolone acetonide external ointment 0.05 %	E	
triamcinolone in absorbbase	E	
TRIANEX	E	
TRIASIL	E	
triderm external cream	1	
TRIDESILON	3	
TRI-LUMA	E	

Drug Name	Drug Tier	Notes
TRIONEX	E	
triple antibiotic pain relief	E	
triple antibiotic+pain relief	E	
tritocin	E	
TRIVIX	E	
turpentine external	E	
TWYNEO	3	
ULTRASAL-ER	E	
ULTRAVATE EXTERNAL LOTION	E	
UMECTA MOUSSE	E	
URAMAXIN EXTERNAL GEL	E	
urea 20 intensive hydrating	E	
urea cream 47 % external	1	
urea cream 47 % external	E	
urea external cream 39 %, 40 %, 41 %, 45 %	E	
UREA EXTERNAL CREAM 39.5 %	E	
UREA EXTERNAL FOAM	E	
urea external lotion 40 %	E	
urea hydrating	E	
urea nail external gel 45 %	E	
ureacin-10	E	
ureacin-20	E	
UREA-SALICYLIC ACID	E	
uredeb	E	
UREMEZ-40	E	
URESOL	E	

For more information regarding the tiers and designations in this drug list, please see the *Reading your formulary* section on page 6 of this booklet.

Drug Name	Drug Tier	Notes
VANICREAM EXTERNAL OINTMENT	E	
VANIQA	E	
VANOS	3	
VANOXIDE-HC	E	
VARDIMAXIA	E	
VAROXIA	E	
VECTICAL	E	
VELTIN	E	
VENELEX	3	
VERDESO	E	
VEREGEN	E	
VIRASAL	E	
VTAMA	3	PA
WINLEVI	E	
WYNZORA	3	QL
XALIX	3	
XERAC AC	3	
XERALUX	E	
xurea	E	
YAXATARXYN	E	
YOKATAR	E	
ZACARE	E	
ZACLIR CLEANSING EXTERNAL LOTION 8 %	E	
zenatane	1	
ZENPHOR WOUND GEL	E	
ZENPHOR WOUND PAD	E	
ZIANA	E	
ZILXI	3	ST
ZITHRANOL	E	
ZMA CLEAR	E	
ZONALON	E	
ZORYVE	E	

Drug Name	Drug Tier	Notes
ZYCLARA	E	
ZYCLARA PUMP	E	
Diabetes - Antidiabetic Agents		
acarbose oral	1	
ACTOPLUS MET ORAL TABLET 15-850 MG	3	
ACTOS	E	
ALOGLIPTIN BENZOATE	E	
ALOGLIPTIN-METFORMIN HCL	E	
ALOGLIPTIN-PIOGLITAZONE ORAL TABLET 12.5-30 MG, 25-15 MG, 25-30 MG, 25-45 MG	E	
AMARYL	3	
BYDUREON BCISE AUTOINJECTOR	2	PA; QL
BYETTA 10 MCG PEN	2	PA; QL
BYETTA 5 MCG PEN	2	PA; QL
CYCLOSET	3	ST
DUETACT	3	
FARXIGA	2	ST
glimepiride	1	
glipizide er	1	
glipizide ir	1	
glipizide xl	1	
glipizide-metformin hcl	1	
GLUCOTROL XL	3	
GLUMETZA	E	
glyburide micronized	1	
glyburide oral	1	
glyburide-metformin	1	
GLYNASE	3	
GLYXAMBI	2	ST
INVOKAMET	E	

For more information regarding the tiers and designations in this drug list, please see the *Reading your formulary* section on page 6 of this booklet.

Drug Name	Drug Tier	Notes
INVOKAMET XR	E	
INVOKANA	E	
JANUMET	2	ST
JANUMET XR	2	ST
JANUVIA	2	ST
JARDIANCE	2	ST
JENTADUETO	2	ST
JENTADUETO XR	2	ST
KAZANO	E	
KOMBIGLYZE XR	E	
metformin hcl er	1	
metformin hcl er (mod)	E	
metformin hcl er (osm) oral tablet extended release 24 hour 1000 mg, 500 mg	E	
metformin hcl oral solution	1	
metformin hcl oral tablet 1000 mg, 500 mg, 850 mg	1	
metformin hcl oral tablet 625 mg	E	
miglitol	1	
MOUNJARO	2	PA; QL
nateglinide	1	
NESINA	E	
ONGLYZA	E	
OSENI ORAL TABLET 12.5-30 MG, 25-15 MG, 25-30 MG, 25-45 MG	E	
OZEMPIC SUBCUTANEOUS SOLUTION PEN- INJECTOR 2 MG/3ML, 4 MG/3ML, 8 MG/3ML	2	PA; QL
pioglitazone hcl	1	
pioglitazone hcl- glimepiride	1	
pioglitazone hcl- metformin hcl	1	

Drug Name	Drug Tier	Notes
QTERN	E	
repaglinide	1	
RIOMET	3	ST
RYBELSUS	2	PA; QL
SEGLUROMET	E	
SOLIQUA	2	ST; QL
STEGLATRO	E	
STEGLUJAN	E	
SYMLINPEN 120	3	PA
SYMLINPEN 60	3	PA
SYNJARDY	2	ST
SYNJARDY XR	2	ST
TRADJENTA	2	ST
TRIJARDY XR	2	ST
TRULICITY	2	PA; QL
TZIELD	3	PA
VICTOZA	2	PA; QL
XIGDUO XR	2	ST
XULTOPHY	3	ST; QL
Diabetes - Glucose Monitoring		
ACCU-CHEK AVIVA IN VITRO SOLUTION	3	
ACCU-CHEK AVIVA PLUS TEST STRIPS	3	QL
ACCU-CHEK FASTCLIX LANCET KIT	\$0	
ACCU-CHEK FASTCLIX LANCETS	\$0	
ACCU-CHEK GUIDE CONTROL	3	
ACCU-CHEK GUIDE TEST STRIPS	3	QL
ACCU-CHEK SAFE-T PRO LANCETS	\$0	
ACCU-CHEK SMARTVIEW CONTROL	3	

For more information regarding the tiers and designations in this drug list, please see the *Reading your formulary* section on page 6 of this booklet.

Drug Name	Drug Tier	Notes
ACCU-CHEK SMARTVIEW TEST STRIPS	3	QL
ACCU-CHEK SOFTCLIX LANCET DEVICE KIT	\$0	
ACCU-CHEK SOFTCLIX LANCETS	\$0	
AUTOLET LANCING DEVICE	\$0	
BIGFOOT UNITY PROGRAM	E	
BLOOD GLUCOSE MONITORING 333	3	
BLOOD GLUCOSE TEST STRIPS 333	3	QL
BLUESTAR	E	
CARETOUCH CONTROL SOL LEVEL 2	3	
CARETOUCH LANCING/EJECTOR	\$0	
CARETOUCH TEST	3	QL
CARETOUCH TWIST MC LANCETS 30G	\$0	
CEQR SIMPLICITY 2U 10PK	2	
CHEMSTRIP 10 MD	3	
CHEMSTRIP 10/SG	3	
CHEMSTRIP 2 GP	3	
CHEMSTRIP 5 OB	3	
CHEMSTRIP 7	3	
CHEMSTRIP 9	3	
CHEMSTRIP K	3	
CHEMSTRIP MICRAL	E	
CHEMSTRIP UGK	3	
COMFORT TOUCH PLUS LANCETS 28G	\$0	
CONTOUR CONTROL SOLUTION	2	

Drug Name	Drug Tier	Notes
CONTOUR MONITOR DEVICE DEVICE	2	
CONTOUR MONITOR KIT W/DEVICE KIT	2	
CONTOUR NEXT CONTROL SOLUTION	2	
CONTOUR NEXT EZ KIT W/DEVICE	2	
CONTOUR NEXT GEN MONITOR	2	
CONTOUR NEXT LINK KIT W/DEVICE	2	
CONTOUR NEXT MONITOR KIT W/DEVICE	2	
CONTOUR NEXT ONE KIT	2	
CONTOUR NEXT GEN TEST STRIPS	\$0	QL
CONTOUR TEST STRIPS	\$0	QL
CVS KETONE CARE	3	
DIABETES MONITOR DIGIT ADD-ON	E	
DIABETES MONITOR DIGIT SOLN	E	
EASY TOUCH HEALTHPRO GLUCOSE	3	
EASYMAX 15 LEVEL 2-3 CONTROL	3	
EASYMAX CONTROL IN VITRO SOLUTION NORMAL	3	
GLUCOSE CONTROL SOLUTIONS	3	
FORTISCARE CONTROL	3	
FORTISCARE G1 TEST STRIP	3	QL
FORTISCARE T1 GLUCOSE SYSTEM	3	

For more information regarding the tiers and designations in this drug list, please see the *Reading your formulary* section on page 6 of this booklet.

Drug Name	Drug Tier	Notes
FREESTYLE PRECISION NEO TEST	3	QL
FREESTYLE TEST	3	QL
GLUCOCARD EXPRESSION TEST	3	QL
GLUCOCARD SHINE TEST	3	QL
GLUCOCARD VITAL TEST	3	QL
INPEN 100-BLUE-LILLY-HUMALOG	3	
INPEN 100-BLUE-NOVOLOG-FIASP	3	
INPEN 100-GREY-LILLY-HUMALOG	3	
INPEN 100-GREY-NOVOLOG-FIASP	3	
INPEN 100-PINK-LILLY-HUMALOG	3	
INPEN 100-PINK-NOVOLOG-FIASP	3	
KETO-DIASTIX	3	
KETONE TEST	3	
KETOSTIX	3	
LANCETS	\$0	
MICRODOT TEST	3	QL
MICROLET NEXT LANCING DEVICE	\$0	
NOVOPEN ECHO	3	
ONETOUCH DELICA PLUS LANCET30G	\$0	
ONETOUCH DELICA PLUS LANCET33G	\$0	
ONETOUCH DELICA PLUS LANCING	\$0	
ONETOUCH ULTRA TEST STRIPS	\$0	QL
ONETOUCH ULTRASOFT 2 LANCETS	\$0	

Drug Name	Drug Tier	Notes
ONETOUCH VERIO FLEX SYSTEM	2	
ONETOUCH VERIO IN VITRO SOLUTION HIGH	3	
ONETOUCH VERIO TEST STRIPS	\$0	QL
ONETOUCH VERIO REFLECT KIT W/DEVICE	2	
PIP BLOOD GLUCOSE MONITORING	3	
PIP BLOOD GLUCOSE TEST STRIP	3	QL
PIP GLUCOSE CONTROL SOLUTION	3	
PRECISION XTRA BLOOD GLUCOSE	3	QL
PRO COMFORT SAFETY LANCETS 30G	\$0	
PTS PANELS EGLU TEST	3	QL
RIGHTTEST GT333 GLUCOSE TEST	3	QL
SAFETY LANCETS 23G	\$0	
TEMPO REFILL	3	
TEMPO WELCOME	3	
TRUE METRIX BLOOD GLUCOSE TEST	3	QL
TRUE METRIX LEVEL 1	3	
TRUE METRIX LEVEL 2	3	
TRUE METRIX LEVEL 3	3	
TRUE METRIX METER KIT	3	
TRUE METRIX PRO BLOOD GLUCOSE	3	QL
TRUETRACK TEST	3	QL

For more information regarding the tiers and designations in this drug list, please see the *Reading your formulary* section on page 6 of this booklet.

Drug Name	Drug Tier	Notes
TWIST TOP LANCETS 30G	\$0	
UNISTRIP CONTROL IN VITRO SOLUTION LOW	3	
VERIFINE UNIVERSAL LANCETS 28G	\$0	
VERIFINE UNIVERSAL LANCETS 30G	\$0	
VERIFINE UNIVERSAL LANCETS 33G	\$0	
Diabetes - Glycemic Agents		
BAQSIMI ONE PACK	2	
BAQSIMI TWO PACK	2	
diazoxide oral	1	
GLUCAGEN HYPOKIT	E	
glucagon emergency kit 1 mg injection	1	
GLUCAGON EMERGENCY KIT 1 MG INJECTION	E	Made by Lilly This drug is not covered Request is eligible for non-formulary review (FOE) by the prior authorization department
GLUCAGON EMERGENCY KIT	2	Made by Fresenius
GLUTOSE 5	E	
GVOKE HYPOPEN 1-PACK	E	
GVOKE HYPOPEN 2-PACK	E	
GVOKE KIT	E	
GVOKE PFS	E	
INSTA-GLUCOSE ORAL GEL 77.4 %	E	
PROGLYCEM	3	

Drug Name	Drug Tier	Notes
YUMVS GLUCOSE GUMMIES	E	
ZEGALOGUE	2	
Diabetes - Insulins		
ADMELOG INJECTION	E	
ADMELOG SOLOSTAR	E	
AFREZZA INHALATION POWDER 12 UNIT, 4 UNIT, 60X4 &60X8 & 60X12 UNIT, 8 UNIT, 90 X 4 UNIT & 90X8 UNIT, 90 X 8 UNIT & 90X12 UNIT	3	PA
APIDRA SOLOSTAR	E	
APIDRA VIAL	E	
AQ INSULIN SYRINGE	\$0	
BASAGLAR KWIKPEN	E	
BASAGLAR TEMPO PEN	E	
BD ULTRA-FINE INSULIN SYRINGES 30G X 1/2" 0.3 ML, 30G X 1/2" 0.5 ML, 30G X 1/2" 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" 0.5 ML, 31G X 6MM 0.5 ML	\$0	
DROPSAFE SAFETY SYRINGE/NEEDLE	\$0	
FIASP FLEXTOUCH	E	
FIASP INJECTION	E	
FIASP PENFILL	E	
HUMALOG INJECTION	2	
HUMALOG U-100 AND U-200 KWIKPEN	2	
HUMALOG MIX 50/50 KWIKPEN	2	

For more information regarding the tiers and designations in this drug list, please see the *Reading your formulary* section on page 6 of this booklet.

Drug Name	Drug Tier	Notes
HUMALOG MIX 50/50 VIAL	2	
HUMALOG MIX 75/25 KWIKPEN	2	
HUMALOG MIX 75/25 VIAL	2	
HUMALOG SUBCUTANEOUS SOLUTION CARTRIDGE	2	
HUMALOG TEMPO PEN	E	
HUMALOG U-100 JUNIOR KWIKPEN	2	
HUMULIN 70/30 KWIKPEN	2	
HUMULIN 70/30 VIAL	2	
HUMULIN N KWIKPEN	2	
HUMULIN N VIAL	2	
HUMULIN R U-500 KWIKPEN	2	
HUMULIN R U-500 VIAL	2	
HUMULIN R VIAL	2	
INSULIN ASP PROT & ASP FLEXPEN	E	
INSULIN ASPART FLEXPEN	E	
INSULIN ASPART INJECTION	E	
INSULIN ASPART PENFILL	E	
INSULIN ASPART PROT & ASPART	E	
INSULIN DEGLUDEC	E	
INSULIN DEGLUDEC FLEXTOUCH	E	
INSULIN GLARGINE	E	
INSULIN GLARGINE SOLOSTAR	E	
INSULIN GLARGINE-YFGN	E	

Drug Name	Drug Tier	Notes
INSULIN LISPRO (1 UNIT DIAL)	E	
INSULIN LISPRO INJECTION	E	
INSULIN LISPRO JUNIOR KWIKPEN	E	
INSULIN LISPRO PROT & LISPRO	E	
INSULIN SYRINGES 27G X 1/2" 0.5 ML, 27G X 1/2" 1 ML, 28G X 1/2" 0.5 ML, 28G X 1/2" 1 ML, 29G X 1/2" 1 ML, 30G X 1/2" 0.3 ML, 30G X 1/2" 0.5 ML, 30G X 1/2" 1 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 5/16" 0.3 ML, 31G X 5/16" 0.5 ML, 31G X 5/16" 1 ML	\$0	
LANTUS U-100 SOLOSTAR	2	
LANTUS U-100 VIAL	2	
LEVEMIR FLEXPEN SUBCUTANEOUS SOLUTION PEN-INJECTOR	E	
LEVEMIR U-100 VIAL	E	
LYUMJEV KWIKPEN	2	
LYUMJEV TEMPO PEN	E	
LYUMJEV VIAL	2	
MYXREDLIN	3	
NOVOLIN 70/30 FLEXPEN	E	
NOVOLIN 70/30 FLEXPEN RELION	E	
NOVOLIN 70/30 RELION	E	
NOVOLIN 70/30 VIAL	E	

For more information regarding the tiers and designations in this drug list, please see the *Reading your formulary* section on page 6 of this booklet.

Drug Name	Drug Tier	Notes
NOVOLIN N FLEXPEN	E	
NOVOLIN N FLEXPEN RELION	E	
NOVOLIN N RELION	E	
NOVOLIN N VIAL	E	
NOVOLIN R FLEXPEN	E	
NOVOLIN R FLEXPEN RELION	E	
NOVOLIN R RELION	E	
NOVOLIN R VIAL	E	
NOVOLOG 70/30 FLEXPEN RELION	E	
NOVOLOG FLEXPEN RELION	E	
NOVOLOG U-100 FLEXPEN	E	
NOVOLOG MIX 70/30 FLEXPEN	E	
NOVOLOG MIX 70/30 RELION	E	
NOVOLOG MIX 70/30 VIAL	E	
NOVOLOG U-100 PENFILL	E	
NOVOLOG RELION INJECTION	E	
NOVOLOG U-100 VIAL INJECTION	E	
REZVOGLAR KWIKPEN	E	
SEMGLEE (YFGN)	E	
TOUJEO MAX SOLOSTAR	2	
TOUJEO SOLOSTAR	2	
TRESIBA	E	
TRESIBA FLEXTOUCH	E	
Electrolytes / Minerals / Metals / Vitamins		
ABANEU-SL	E	
ACCRUFER	E	

Drug Name	Drug Tier	Notes
ACTITROM-D	E	
ACTIVE FE	E	
ACTIVITE	E	
adc/f (0.5mg/ml)	1	
ADRENAL C FORMULA	E	
airavite	E	
aminoamrms	E	
aminoreliefrms	E	
AMLADEX	E	
AQUASOL A INTRAMUSCULAR SOLUTION 50000 UNIT/ML	E	
ASCOR	E	
ASCORBIC ACID SOLUTION 500 MG/ML INJECTION	E	
ascorbic acid solution 500 mg/ml injection	E	
ATABEX OB	2	
AZESCO	E	
BACMIN	E	
b-complex/b-12 oral	E	
BENTIVITE	E	
biocel	E	
biopetit	E	
biotin oral tablet 1000 mcg	E	
bp vit 3	E	
b-plex	E	
b-plex plus	E	
calcitol oral solution 200 mcg/ml	E	
CALCIFOL	3	
CARBAGLU ORAL TABLET SOLUBLE	3	PA; SP
CARDIOPLEGIA DEL NIDO FORMULA	E	

For more information regarding the tiers and designations in this drug list, please see the *Reading your formulary* section on page 6 of this booklet.

Drug Name	Drug Tier	Notes
CARDIOPLEGIA IND PLASMA HIGH K	E	
CARDIOPLEGIA IND PLASMA-TROMET	E	
CARDIOPLEGIA INDUCTION HIGH K	E	
CARDIOPLEGIA INDUCTION LOW DEX	E	
CARDIOPLEGIA INDUCTION NON-ENR	E	
CARDIOPLEGIA MAIN LOW DEXTROSE	E	
CARDIOPLEGIA MAIN LOW TROMETHA	E	
CARDIOPLEGIA MAIN PLASMA-TROME	E	
CARDIOPLEGIA MAINTENANCE	E	
CARDIOPLEGIA REPERFUSATE 4:1	E	
carglumic acid oral tablet soluble	1	PA; SP
CARNITOR	3	
CARNITOR SF	3	
CENFOL	E	
CENTRATEX	E	
CEREFOLIN	E	
CEREFOLIN NAC ORAL TABLET 6-90.314-2-600 MG	E	
CHEMET	3	
CHOLECAL DF	E	
CHROMAGEN ORAL CAPSULE	E	
CIFEREX	E	
CITRANATAL BLOOM	E	
CITRANATAL MEDLEY	E	
cod liver oil oral oil	E	
corvita 150	E	

Drug Name	Drug Tier	Notes
CORVITA ORAL TABLET	E	
CORVITE 150 ORAL TABLET	E	
CORVITE FE	E	
CUVRIOR	E	SP
cyanocobalamin injection solution 1000 mcg/ml	1	
CYANOCOBALAMIN INJECTION SOLUTION 2000 MCG/ML	E	
cytra k crystals	E	
d3 high potency oral capsule 25 mcg (1000 ut)	E	
daflonex-xl oral capsule	E	
DAYAVITE	E	
DECARA ORAL CAPSULE 1.25 MG (50000 UT), 625 MCG (25000 UT)	E	
deferasirox	1	PA
deferasirox granules	1	PA
deferiprone	E	
DERMACINRX DAVIMET	E	
DERMACINRX DOTREMIN	E	
DERMACINRX FOLTAMIN	E	
DERMACINRX MULTITAM ORAL TABLET	E	
DERMACINRX PRETRATE	E	
DERMACINRX RIBOTIN-E	E	
DERMACINRX ZINTREXYL-C	E	
DEXATRAN	E	

For more information regarding the tiers and designations in this drug list, please see the *Reading your formulary* section on page 6 of this booklet.

Drug Name	Drug Tier	Notes
DEXIFOL	E	
DIALYVITE	E	
DIALYVITE 3000	E	
DIALYVITE 5000	E	
DIALYVITE SUPREME D ORAL TABLET	E	
DIALYVITE/ZINC	E	
DODEX	3	
DRISDOL ORAL CAPSULE	3	
d-vite pediatric	E	
EFFER-K ORAL TABLET EFFERVESCENT 10 MEQ, 20 MEQ	3	
effer-k tablet effervescent 25 meq oral	1	
effer-k tablet effervescent 25 meq oral	E	
ELFOLATE	E	
ELFOLATE PLUS ORAL TABLET 3-35-2 MG	E	
ELITE-OB	2	
ENBRACE HR	E	
ergocalciferol oral capsule	1	
ergocalciferol oral solution 200 mcg/ml	E	
EXJADE	3	PA
fabb	E	
fa-vitamin b-6-vitamin b-12	E	
FEONYX	E	
FERAHEME	E	
FERIVA 21/7	E	
FERIVAFA	E	
ferocon	E	

Drug Name	Drug Tier	Notes
ferottrinsic	E	
FERRALET 90	E	
FERRIPROX ORAL SOLUTION	3	PA
FERRIPROX ORAL TABLET	E	
FERRIPROX TWICE-A-DAY	E	
FERRLECIT	E	
ferrocite plus oral tablet	E	
FERRO-PLEX	E	
ferrous fumarate oral tablet 324 mg	E	
ferrous sulfate oral syrup	E	
ferrous sulfate oral tablet 325 (65 fe) mg	E	
ferrous sulfate oral tablet delayed release 324 (65 fe) mg, 325 (65 fe) mg	E	
ferumoxytol	E	
FLORIVA	E	
FLORIVA PLUS	E	
fluoritab oral solution	\$0	
FOLAGENT DHA	E	
FOLAMAX	E	
FOLAMED DHA ORAL CAPSULE	E	
folbee	E	
folbee plus	E	
FOLBEE PLUS CZ	E	
FOLBIC RF	E	
FOLDITAM	E	
FOLGARD OS	E	
FOLGARD RX	E	
folic acid injection	E	
folic acid oral tablet 1 mg	1	

For more information regarding the tiers and designations in this drug list, please see the *Reading your formulary* section on page 6 of this booklet.

Drug Name	Drug Tier	Notes
folic acid oral tablet 400 mcg, 800 mcg	\$0	
FOLIC D3	E	
FOLI-D	E	
FOLIFLEX	E	
FOLITE	E	
FOLITIN-Z	E	
FOLIVANE-F	E	
FOLIVANE-PLUS	E	
FOLIXAPURE	E	
folplex 2.2	E	
FOLTANX	E	
FOLTANX RF	E	
FOLTRATE	E	
FOLTREXYL	E	
foltrin	E	
FOLTX ORAL TABLET 1.13-25-2 MG	E	
FOLVITE-D	E	
FOSTEUM	E	
FUSION PLUS	E	
GALZIN	3	
GENICIN VITA-D	E	
GENICIN VITA-Q ORAL TABLET	E	
GENICIN VITA-S	E	
hematinic plus vit/minerals	E	
hematinic/folic acid	E	
HEMATOGEN	E	
HEMATOGEN FA	E	
HEMATRON-AF	E	
HEMOCYTE PLUS	E	
HONEY BEARS TABLET CHEWABLE ORAL	E	
HYLAVITE	E	
HYLAZINC	E	

Drug Name	Drug Tier	Notes
ICAR-C PLUS	E	
iferex 150 forte	E	
INFED	E	
INFUVITE ADULT	E	
INFUVITE PEDIATRIC INTRAVENOUS SOLUTION	E	
INJECTAFER INTRAVENOUS SOLUTION 750 MG/15ML	E	
INTEGRA F	E	
INTEGRA PLUS	E	
iodine strong oral	1	
IROSPAN 24/6	E	
ISOLYTE-S	E	
JADENU	E	
JADENU SPRINKLE	3	PA
JENLIVA PRENATAL/POSTNATAL	E	
JYNARQUE	E	SP
KCL-LIDOCAINE-NACL SOLUTION 10-10 MEQ-MG /100ML INTRAVENOUS	E	
KEYFOLIC	E	
klor-con 10	1	
klor-con m10	1	
klor-con m15	1	
klor-con m20	1	
klor-con oral packet 20 meq	1	
klor-con oral tablet extended release	1	
klor-con/ef	E	
K-PHOS	3	
K-PHOS NO 2	E	
K-PHOS-NEUTRAL	E	
k-prime	1	

For more information regarding the tiers and designations in this drug list, please see the *Reading your formulary* section on page 6 of this booklet.

Drug Name	Drug Tier	Notes
K-TAB ORAL TABLET EXTENDED RELEASE 10 MEQ, 20 MEQ	3	
k-tan plus	E	
L-CYSTINE	E	
levocarnitine oral solution	1	
levocarnitine sf	1	
L-ISOLEUCINE	E	
l-methylfolate	E	
l-methylfolate ca me-cbl nac	E	
l-methylfolate calcium oral	E	
l-methylfolate-algae-b12-b6	E	
l-methyl-mc	E	
LOKELMA	3	
lysiplex plus oral tablet	E	
magnesium oxide oral tablet 400 (240 mg) mg	E	
magnesium sulfate intravenous solution 2 gm/50ml, 20 gm/500ml, 4 gm/100ml, 4 gm/50ml, 40 gm/1000ml	1	
magnesium sulfate solution 50 % injection	1	
MAGNESIUM SULFATE SOLUTION 50 % INJECTION	3	
magnesium-oxide oral tablet 400 (240 mg) mg	E	
mag-oxide oral tablet 200 mg	E	
METAFOLBIC	E	
METAFOLBIC PLUS	E	
METAFOLBIC PLUS RF	E	
METANX ORAL CAPSULE	E	

Drug Name	Drug Tier	Notes
methylfol-algae-b12-acetylcyst	E	
MICROPLEGIA MSA-MSG	E	
MIFEPREX	E	
mifepristone	E	
M-NATAL PLUS	2	
MONOFERRIC	E	
MULTIGEN	E	
MULTIGEN FOLIC	E	
MULTIGEN PLUS	E	
MULTI-MAC	E	
MULTIPRO	E	
multi-vitamin/fluoride oral solution	1	
multivitamin/fluoride tablet chewable 0.25 mg oral (rx)	1	
MULTIVITAMIN/FLUORIDE TABLET CHEWABLE 0.25 MG ORAL (RX)	3	
multivitamin/fluoride tablet chewable 0.5 mg oral (rx)	1	
MULTIVITAMIN/FLUORIDE TABLET CHEWABLE 0.5 MG ORAL (RX)	3	
multivitamin/fluoride tablet chewable 1 mg oral (rx)	1	
MULTIVITAMIN/FLUORIDE TABLET CHEWABLE 1 MG ORAL (RX)	3	
multi-vitamin/fluoride/iron	1	
MULTI-VIT-FLOR	E	
mynephrocaps	E	
MYNEPHRON	E	

For more information regarding the tiers and designations in this drug list, please see the *Reading your formulary* section on page 6 of this booklet.

Drug Name	Drug Tier	Notes
na ferric gluc cplx in sucrose	E	
nafrinse	\$0	
nafrinse drops	\$0	
NASCOBAL	3	
NATAL PNV TABLET 6-0.5 MG ORAL	3	
NEONATAL + DHA	E	
NEONATAL 19	2	
NEONATAL COMPLETE	E	
NEONATAL FE	E	
NEONATAL PLUS	2	
NEONATAL PRENATAL	\$0	
NEOVITE	E	
NEPHPLEX RX	E	
nephronex oral tablet	E	
NESTABS	2	
NESTABS ONE	E	
NEURIN-SL	E	
NICADAN	E	
NICAZEL	E	
NICAZEL FORTE	E	
NICOMIDE ORAL TABLET 750-27-2-0.5 MG	E	
nicotinamide oral	E	
NIFEREX ORAL TABLET	E	
NOVAMV PEDIATRIC MULTI-VITAMIN	E	
NUFERA	E	
nufol	E	
NUTRA-Z+	E	
NUTRICAP	E	
nutrifac zx	E	
NUTRIVIT	E	

Drug Name	Drug Tier	Notes
OCUVEL ORAL CAPSULE	E	
ONE VITE WOMENS	\$0	
ONE VITE WOMENS PLUS	2	
ONEVITE ORAL TABLET	E	
ORACIT	3	
ORTHO DF	E	
OSTACHOL	E	
OVEEZA	E	
oyster shell calcium w/d oral tablet 500-5 mg-mcg	E	
oyster shell calcium/d oral tablet 250-6.25 mg-mcg	E	
oyster shell calcium/vit d oral tablet 500-5 mg-mcg	E	
oyster shell calcium/vit d3 oral tablet 500-5 mg-mcg	E	
oyster shell calcium/vitamin d oral tablet 500-5 mg-mcg	E	
PHOSPHA 250 NEUTRAL	3	
phosphorous	1	
phosphorus supplement	E	
phosphorus w/sod & potassium	E	
phospho-trin 250 neutral	1	
PHOSPHO-TRIN K500	3	
PHOXILLUM B22K4/0 EXTRACORPOREAL	E	
PHOXILLUM BK4/2.5 EXTRACORPOREAL	E	
PHYSICIANS EZ USE B-12	E	

For more information regarding the tiers and designations in this drug list, please see the *Reading your formulary* section on page 6 of this booklet.

Drug Name	Drug Tier	Notes
PHYSIOLYTE	E	
PHYSIOSOL IRRIGATION	E	
phytonadione injection solution 1 mg/0.5ml, 10 mg/ml	E	
phytonadione oral	1	
PLASMA-LYTE 148	E	
PLASMA-LYTE A	E	
pnv prenatal plus multivit+dha	1	
PNV TABS 20-1	E	
PODIAPN ORAL CAPSULE	E	
poly-iron 150 forte	E	
polysaccharide iron forte	E	
POLY-VI-FLOR	E	
POLY-VI-FLOR/IRON	E	
POLY-VITE PEDIATRIC ORAL SOLUTION	E	
potassium chloride cryster	1	
potassium chloride er	1	
potassium chloride in nacl intravenous solution 20-0.45 meq/l-%, 20-0.9 meq/l-%, 40-0.9 meq/l-%	E	
potassium chloride oral packet	1	
potassium chloride oral solution 10 %, 20 meq/15ml (10%), 40 meq/15ml (20%)	1	
potassium citrate er	1	
potassium citrate-citric acid oral solution	E	
PREGEN DHA	E	
PREGENNA	E	

Drug Name	Drug Tier	Notes
PREMESISRX	E	
PRENAISSANCE	E	
prenatal complete oral capsule therapy pack	1	
prenatal oral tablet 27-0.8 mg	\$0	
prenatal oral tablet 27-1 mg	1	
prenatal plus vitamin/mineral	1	
PRENATE	E	
PRENATE DHA ORAL CAPSULE 18-0.6-0.4-300 MG	E	
PRENATE ELITE ORAL TABLET 20-0.6-0.4 MG	E	
PRENATE ENHANCE	E	
PRENATE ESSENTIAL ORAL CAPSULE 18-0.6-0.4-300 MG	E	
PRENATE MINI ORAL CAPSULE 18-0.6-0.4-350 MG	E	
PRENATE PIXIE	E	
PRENATE RESTORE	E	
PRENATRIX	E	
PRENATRYL	E	
PRENATVITE COMPLETE	E	
PRENATVITE PLUS	2	
PRENATVITE RX	2	
PRIMACARE ORAL CAPSULE	E	
PRISMASOL B22GK 4/0 EXTRACORPOREAL	3	
PRISMASOL BGK 0/2.5 EXTRACORPOREAL	3	
PRISMASOL BGK 2/0 EXTRACORPOREAL	3	

For more information regarding the tiers and designations in this drug list, please see the *Reading your formulary* section on page 6 of this booklet.

Drug Name	Drug Tier	Notes
PRISMASOL BGK 2/3.5 EXTRACORPOREAL	3	
PRISMASOL BGK 4/0/1.2 EXTRACORPOREAL	E	
PRISMASOL BGK 4/2.5 EXTRACORPOREAL	3	
PRISMASOL BK 0/0/1.2 EXTRACORPOREAL	3	
PRO HERS RX	E	
PRO HIS RX	E	
PRO PCOS RX	E	
PROFOLA	E	
PROTEINEX ORAL LIQUID	E	
PROTEINEX P18	E	
purevit dualfe plus	E	
pyridoxine hcl solution 100 mg/ml injection	E	
PYRIDOXINE HCL SOLUTION 100 MG/ML INJECTION	E	
QUFLORA FE	E	
QUFLORA FE PEDIATRIC	E	
QUFLORA GUMMIES	E	
QUFLORA PEDIATRIC	E	
RELNATE DHA	2	
REMEDIENT ORAL CAPSULE	E	
RENAL ORAL CAPSULE	E	
RENATABS	E	
RENATABS WITH IRON	E	
rena-vite	E	
ringers irrigation	E	
SAMSCA	3	PA; SP; QL

Drug Name	Drug Tier	Notes
SELECT-OB ORAL TABLET CHEWABLE 29-1 MG	E	
se-tan plus	E	
SLO-NIACIN ORAL TABLET EXTENDED RELEASE 500 MG	E	
SLOWMAG MG MUSCLE/HEART	E	
sod citrate-citric acid solution 500-334 mg/5ml oral	E	
sod citrate-citric acid solution 500-334 mg/5ml oral	1	
sodium bicarbonate intravenous solution 4.2 %, 7.5 %	1	
sodium bicarbonate solution 8.4 % intravenous	1	
SODIUM BICARBONATE SOLUTION 8.4 % INTRAVENOUS	3	
SODIUM BICARBONATE SOLUTION 8.4 % INTRAVENOUS	E	
sodium bicarbonate solution 8.4 % intravenous	E	
sodium chloride (pf) solution 0.9 % injection	1	
sodium chloride (pf) solution 0.9 % injection	E	
sodium chloride injection solution 2.5 meq/ml	1	
sodium chloride intravenous solution 0.45 %, 0.9 %, 3 %, 5 %	1	
sodium chloride oral	E	

For more information regarding the tiers and designations in this drug list, please see the *Reading your formulary* section on page 6 of this booklet.

Drug Name	Drug Tier	Notes
SODIUM CHLORIDE SOLUTION 4 MEQ/ML INTRAVENOUS	3	
sodium chloride solution 4 meq/ml intravenous	1	
sodium fluoride oral solution 1.1 (0.5 f) mg/ml	\$0	
sodium fluoride oral tablet	\$0	
sodium fluoride oral tablet chewable	\$0	
sodium polystyrene sulfonate oral powder	1	
soluvita e oral solution 15.8 mg/0.7ml	E	
sps	1	
STROVITE FORTE ORAL SYRUP	E	
STROVITE ONE	E	
SUPERVITE	E	
SYPRINE	E	SP
SYSTANE ICAPS AREDS2 ORAL TABLET CHEWABLE	E	
TALIVA	E	
TANDEM PLUS	E	
TARON FORTE	E	
thiamine hcl injection	E	
TIS-U-SOL	E	
tolvaptan	1	PA; SP; QL
tricitrates solution 550-500-334 mg/5ml oral	E	
tricitrates solution 550-500-334 mg/5ml oral	1	
TRICON	E	
trientine hcl	1	PA; SP
TRIFERIC HEMODIALYSIS PACKET	E	

Drug Name	Drug Tier	Notes
TRINATE	2	
triphrocaps	E	
TRISTART DHA	E	
TRISTART FREE	E	
TRISTART ONE	E	
TRI-VI-FLOR	2	
TRI-VI-FLORO	2	
tri-vite pediatric	E	
tri-vite/fluoride	1	
TRONVITE	E	
UDAMIN SP ORAL TABLET	E	
UROCID-K 10	3	
UROCID-K 15	3	
UROCID-K 5	3	
urosex	E	
v-c forte	E	
VELTASSA	3	
VENEXA	E	
VENEXA FE	E	
VENOFER	E	
VENTRIXYL FE	E	
VENTRIXYL ORAL TABLET	E	
vic-forte	E	
VINATE ONE	2	
virt-caps	E	
virt-gard	E	
vita s forte	E	
vitacel	E	
vitachew adult multi vitamin	E	
vitachew vitamin d3	E	
VITAFOL FE+ ORAL CAPSULE	E	
VITAFOL STRIPS	2	
VITAFOL-NANO	E	
VITAFOL-OB+DHA	E	

For more information regarding the tiers and designations in this drug list, please see the *Reading your formulary* section on page 6 of this booklet.

Drug Name	Drug Tier	Notes
VITAL-D RX	E	
VITAMEZ	E	
vitamin b complex 100	E	
vitamin b-complex 100	E	
vitamin d (ergocalciferol) oral capsule 1.25 mg (50000 ut), 50000 unit	1	
VITAMIN DEFICIENCY SYSTEM-B12	E	
vitamin k1 injection solution 1 mg/0.5ml, 10 mg/ml	E	
vitamins acd-fluoride	1	
VITA-PAC	E	
VITAROCA PLUS	E	
VITASURE	E	
VITATHELY WITH GINGER	E	
VITRAMYN	E	
VITRANOL	E	
VITRANOL FE	E	
VITREXATE	E	
VITREXATE FE	E	
VITREXYL	E	
VITREXYL + IRON	E	
vp-vite rx	E	
weekly-d	E	
WESCAP-C DHA	2	
WESCAP-PN DHA	2	
wescaps	E	
WESNATAL DHA COMPLETE	2	
WESNATE DHA	2	
westab one	E	
WESTAB PLUS	2	
WESTGEL DHA	E	
wheat germ oil oral oil	E	
XAQUIL XR	E	

Drug Name	Drug Tier	Notes
YUMVS CALC-MAG-ZINC-VIT D	E	
YUMVS MULTI ZERO	E	
YUMVS VITAMIN D3	E	
YUMVS VITAMIN D3 ZERO ORAL TABLET CHEWABLE 25 MCG	E	
YUMVS ZERO DIABETIC MULTIVITAM	E	
ZALVIT	E	
ZELDANA	E	
zinc oral tablet 50 mg	E	
ZIPHEX	E	
Gastrointestinal Agents - Drugs for Acid Reflux and Ulcer		
acid reducer oral tablet 10 mg	E	
acid reducer oral tablet delayed release	E	
ACIPHEX	E	
CARAFATE	E	
cimetidine hcl oral solution 300 mg/5ml	1	
cimetidine oral	1	
CYTOTEC	3	QL
DEXILANT	E	
dexlansoprazole	E	
esomeprazole magnesium oral capsule delayed release	1	QL
esomeprazole magnesium oral packet	1	QL
famotidine oral suspension reconstituted	1	
famotidine oral tablet 10 mg	E	

For more information regarding the tiers and designations in this drug list, please see the *Reading your formulary* section on page 6 of this booklet.

Drug Name	Drug Tier	Notes
famotidine oral tablet 20 mg, 40 mg	1	
famotidine orig st	E	
FIRST- LANSOPRAZOLE	3	ST
KONVOMEF	E	
lansoprazole capsule delayed release 15 mg oral (otc)	E	
lansoprazole capsule delayed release 15 mg oral (rx)	1	QL
lansoprazole oral capsule delayed release 30 mg	1	QL
lansoprazole oral tablet delayed release dispersible	E	
misoprostol oral	1	QL
NEXIUM ORAL CAPSULE DELAYED RELEASE	E	
NEXIUM ORAL PACKET	3	QL
nizatidine oral capsule	1	
omeprazole magnesium oral tablet delayed release	E	
omeprazole oral capsule delayed release	1	QL
omeprazole oral tablet delayed release	E	
OMEPRAZOLE+SYRS PEND SF ALKA	3	ST
omeprazole-sodium bicarbonate	E	
pantoprazole sodium oral packet	E	
pantoprazole sodium oral tablet delayed release	1	QL

Drug Name	Drug Tier	Notes
PEPCID ORAL TABLET	E	
PREVACID 24HR	E	
PREVACID ORAL CAPSULE DELAYED RELEASE 30 MG	E	
PREVACID SOLUTAB ORAL TABLET DELAYED RELEASE DISPERSIBLE	E	
PRILOSEC ORAL PACKET	E	
PROTONIX ORAL PACKET	E	
PROTONIX ORAL TABLET DELAYED RELEASE	3	QL
RABEPRAZOLE SODIUM ORAL CAPSULE SPRINKLE	E	
rabeprazole sodium oral tablet delayed release	1	QL
sm lansoprazole	E	
sucralfate oral suspension	E	
sucralfate oral tablet	1	
ZEGERID	E	
Gastrointestinal Agents - Drugs for Bowel, Intestine and Stomach Conditions		
acidophilus lactobacillus oral	E	
ACTIPHORA	E	
alosetron hcl	1	PA
alvimopan	1	
AMITIZA	E	
amoxicill-clarithro- lansopraz oral therapy pack	E	
ANASPAZ	3	

For more information regarding the tiers and designations in this drug list, please see the *Reading your formulary* section on page 6 of this booklet.

Drug Name	Drug Tier	Notes
antacid calcium	E	
antacid calcium rich	E	
antacid extra strength oral tablet chewable 160-105 mg, 750 mg	E	
antacid maximum	E	
antacid maximum strength oral suspension 800-800-80 mg/10ml	E	
antacid oral suspension 400-400-40 mg/10ml	E	
antacid oral tablet chewable 500 mg, 750 mg	E	
antacid regular strength	E	
antacid ultra strength oral tablet chewable 1000 mg	E	
antacid/antigas	E	
anti-diarrheal oral liquid 1 mg/7.5ml	E	
anti-diarrheal oral tablet	E	
ATROPEN INTRAMUSCULAR SOLUTION AUTO-INJECTOR	3	
atropine sulfate injection solution 0.4 mg/ml, 1 mg/ml	E	
atropine sulfate injection solution prefilled syringe 0.25 mg/5ml	1	
ATROPINE SULFATE INJECTION SOLUTION PREFILLED SYRINGE 0.8 MG/2ML	3	
atropine sulfate intravenous solution	1	

Drug Name	Drug Tier	Notes
ATROPINE SULFATE INTRAVENOUS SOLUTION PREFILLED SYRINGE 0.8 MG/2ML, 1 MG/2.5ML, 1.2 MG/3ML	3	
atropine sulfate solution 8 mg/20ml injection	1	
atropine sulfate solution 8 mg/20ml injection	E	
atropine sulfate solution prefilled syringe 0.5 mg/5ml injection	1	
atropine sulfate solution prefilled syringe 0.5 mg/5ml injection	E	
atropine sulfate solution prefilled syringe 1 mg/10ml injection	1	
atropine sulfate solution prefilled syringe 1 mg/10ml injection	E	
AVEDANA GLYCERIN (ADULT)	E	
BACICAP	E	
belladonna alkaloids-opium rectal suppository 16.2-60 mg	E	
BILAC	E	
bisacodyl ec	\$0	QL
bisacodyl oral	\$0	QL
bisacodyl rectal	E	
bismuth subsalicylate oral tablet chewable 262 mg	E	
bismuth/metronidaz/tetracyclin	1	
CHENODAL	3	PA; SP
chlordiazepoxide-clidinium	E	
chocolated laxative	E	
citroma	\$0	QL

For more information regarding the tiers and designations in this drug list, please see the *Reading your formulary* section on page 6 of this booklet.

Drug Name	Drug Tier	Notes
clearlax oral powder	\$0	QL
CLENPIQ	3	
constulose	1	
cromolyn sodium oral	1	
CUVPOSA	3	PA
cvs antacid extra strength oral tablet chewable 750 mg	E	
cvs gentle laxative rectal	E	
DARTISLA ODT	E	
DERMACINRX PROBISOL	E	
DERMACINRX PROBITRAN	E	
dicyclomine hcl oral	1	
diotame instydose	E	
diphenoxylate-atropine oral liquid	1	
diphenoxylate-atropine oral tablet 2.5-0.025 mg	1	
docusate calcium	E	
docusate mini	E	
docusate sodium oral capsule 100 mg	E	
docusate sodium oral liquid 100 mg/10ml, 50 mg/5ml	E	
docusate sodium oral syrup	E	
docuzen	E	
dok oral tablet	E	
DONNATAL	E	
ENEMEEZ MINI	E	
ENTEREG	3	
enulose	1	
EX-LAX MAXIMUM STRENGTH	E	
EX-LAX ORAL TABLET CHEWABLE	E	

Drug Name	Drug Tier	Notes
EX-LAX ULTRA	E	
fiber laxative + calcium	E	
fiber laxative oral tablet	E	
fiber oral powder 28.3 %	E	
FLORASAVE	E	
FORTIFY 30 BILLION PROBIOT 50+	E	
FORTIFY OPTIMA PROBIOTIC	E	
FORTIFY PROBIOTIC WOMENS	E	
FORTIFY PROBIOTIC WOMENS EX ST	E	
gas relief extra strength oral capsule	E	
gas relief infants oral suspension	E	
gas relief oral tablet chewable	E	
GASTROCROM	3	
GATTEX	3	PA; SP
gavilax oral powder	\$0	QL
gavilyte-c	\$0	QL
gavilyte-g	\$0	QL
GELUSIL	E	
generlac	1	
gentle laxative oral	\$0	QL
gentle laxative rectal	E	
gentlelax oral powder	\$0	QL
geri-kot	E	
GIALAX	E	
GLYCATE	E	
glycerin (adult) rectal suppository 2 gm	E	
glycerin adult	E	
glycolax	\$0	QL

For more information regarding the tiers and designations in this drug list, please see the *Reading your formulary* section on page 6 of this booklet.

Drug Name	Drug Tier	Notes
GLYCOPYRROLATE INJECTION SOLUTION PREFILLED SYRINGE 0.6 MG/3ML	3	
GLYCOPYRROLATE INTRAVENOUS SOLUTION PREFILLED SYRINGE 1 MG/5ML	E	
glycopyrrolate oral solution	1	PA
glycopyrrolate oral tablet 1 mg, 2 mg	1	QL
GLYCOPYRROLATE ORAL TABLET 1.5 MG	E	
glycopyrrolate pf injection solution prefilled syringe 0.2 mg/ml, 0.4 mg/2ml	1	
GLYCOPYRROLATE PF INJECTION SOLUTION PREFILLED SYRINGE 0.6 MG/3ML	3	
GLYCOPYRROLATE SOLUTION PREFILLED SYRINGE 0.6 MG/3ML INTRAVENOUS	3	
GLYCOPYRROLATE SOLUTION PREFILLED SYRINGE 0.6 MG/3ML INTRAVENOUS	E	
GLYCOPYRROLATE SOLUTION PREFILLED SYRINGE 1 MG/5ML INJECTION	3	
GLYCOPYRROLATE SOLUTION PREFILLED SYRINGE 1 MG/5ML INJECTION	E	

Drug Name	Drug Tier	Notes
GLYRX-PF INJECTION SOLUTION PREFILLED SYRINGE	3	
GOLYTELY ORAL SOLUTION RECONSTITUTED 236 GM	3	
goodsense advanced antacid	E	
goodsense antacid & gas relief	E	
goodsense antacid oral tablet chewable 500 mg, 750 mg	E	
goodsense anti-diarrheal	E	
goodsense milk of magnesia	E	
goodsense senna laxative oral tablet 8.6 mg	E	
goodsense stool softener	E	
heartland gas relief	E	
HELIDAC THERAPY	3	
high potency probiotic	E	
hm stomach relief oral suspension 525 mg/30ml	E	
hm stool softener oral capsule 100 mg	E	
hyoscyamine sulfate er oral tablet extended release 12 hour	E	
hyoscyamine sulfate oral elixir	1	
hyoscyamine sulfate oral solution	E	
hyoscyamine sulfate oral tablet	1	
hyoscyamine sulfate oral tablet dispersible	1	
hyoscyamine sulfate sl	1	

For more information regarding the tiers and designations in this drug list, please see the *Reading your formulary* section on page 6 of this booklet.

Drug Name	Drug Tier	Notes
hyoscyamine sulfate tablet sublingual 0.125 mg sublingual	1	
hyoscyamine sulfate tablet sublingual 0.125 mg sublingual	E	
hyosyne	1	
IBSRELA	E	
IMODIUM A-D ORAL TABLET	E	
IMODIUM MULTI-SYMPTOM RELIEF ORAL TABLET	E	
infants gas relief oral suspension 20 mg/0.3ml	E	
JARRO-DOPHILUS VAGINAL PROBIOT	E	
KRISTALOSE	E	
LACTEROL	E	
lactobacillus oral tablet , 0.05-0.05 mg	E	
lactulose oral packet	E	
lactulose oral solution	1	
laxative max str	E	
laxative regular strength	E	
LEVBIID	E	
LEVSIN ORAL TABLET	E	
LEVSIN/SL	E	
LIBRAX	E	
LINZESS	2	ST; QL
LOMOTIL ORAL TABLET	3	
loperamide hcl oral capsule	1	
loperamide hcl oral solution 1 mg/7.5ml	E	
loperamide hcl oral tablet	E	

Drug Name	Drug Tier	Notes
loperamide-simethicone	E	
LOTRONEX	3	PA
lubiprostone capsule 24 mcg oral	1	QL
lubiprostone capsule 8 mcg oral	1	QL
MAALOX MULTI SYMPTOM MAX ST ORAL SUSPENSION	E	
mag-al plus	E	
MAGE	E	
magnesium citrate oral solution 1.745 gm/30ml	\$0	QL
magnesium oxide (antacid) oral tablet	E	
magnesium oxide oral tablet 400 mg, 420 mg	E	
methscopolamine bromide oral	1	
milk of magnesia concentrate	E	
milk of magnesia oral suspension 1200 mg/15ml, 2400 mg/30ml, 400 mg/5ml	E	
mineral oil heavy oral	1	
mm clearlax	\$0	QL
mm stool softener laxative	E	
MOTTEGRITY	3	ST; QL
MOTOFEN	E	
MOVANTIK	E	
MOVIPREP	E	
MYLICON INFANTS GAS RELIEF	E	
MYTESI	3	QL
na sulfate-k sulfate-mg sulf	\$0	QL
natural senna laxative oral tablet 8.6 mg	E	

For more information regarding the tiers and designations in this drug list, please see the *Reading your formulary* section on page 6 of this booklet.

Drug Name	Drug Tier	Notes
NEWFLORA PROBIOTIC	E	
NULEV	E	
OMECLAMOX-PAK	2	
ONELAX	E	
ONELAX MAGNESIUM CITRATE	E	
ONELAX SENNA	E	
opium	E	
OSCIMIN ORAL TABLET	3	
OSCIMIN SUBLINGUAL	3	
OSMOPREP	E	
pb-hyoscy-atropine-scopolamine	E	
peg 3350-kcl-na bicarb-nacl	\$0	QL
peg-3350/electrolytes	\$0	QL
peg-3350/electrolytes/ascorbic acid	1	
peg-kcl-nacl-nasulf-naasc-c	1	
PEG-PREP	3	
PERDIEM OVERNIGHT RELIEF	E	
PHAZYME ULTRA STRENGTH	E	
PHENOHYTRO	E	
pink bismuth maximum strength	E	
PLENVU	E	
polyethylene glycol 3350 oral powder	\$0	QL
PRIMADOPHILUS BIFIDUS	E	
PRIMIDAR	E	
PROBICHEW	E	
PROBINATE	E	

Drug Name	Drug Tier	Notes
PROBIOMAX IG 26 DF	E	
PROBITROL	E	
PROBIZEN	E	
PROMELLA IN PREBIOTIC	E	
PROMEROL	E	
PYLERA	2	
qc magnesium citrate	\$0	QL
quad-probiotic	E	
REBYOTA	3	PA
REJUVAFLOR	E	
RELISTOR ORAL	E	
RELISTOR SUBCUTANEOUS SOLUTION 12 MG/0.6ML, 8 MG/0.4ML	E	
RELTONE	E	
RESTORA RX	3	
ROBINUL ORAL	3	PA; QL
ROBINUL-FORTE	3	PA; QL
saccharomyces boulardii	E	
senexon-s	E	
senna oral liquid	E	
senna oral syrup 8.8 mg/5ml	E	
senna oral tablet 8.6 mg	E	
senna plus oral tablet	E	
senna s	E	
senna smooth	E	
senna-docusate sodium	E	
senna-lax	E	
senna-plus	E	
senna-s	E	
SENOKOT EXTRA STRENGTH	E	

For more information regarding the tiers and designations in this drug list, please see the *Reading your formulary* section on page 6 of this booklet.

Drug Name	Drug Tier	Notes
SENOKOT S	E	
SEROSTIM SUBCUTANEOUS SOLUTION RECONSTITUTED 4 MG, 5 MG, 6 MG	3	PA; SP
simethicone drops infants oral suspension	E	
simethicone oral capsule 125 mg	E	
simethicone oral tablet chewable 80 mg	E	
simethicone ultra strength	E	
sm calcium antacid ex st	E	
sm milk of magnesia oral suspension 1200 mg/15ml	E	
sm stool softener oral capsule 100 mg	E	
smooth antacid extra strength	E	
sodium bicarbonate oral powder	1	
sodium bicarbonate oral tablet 325 mg, 650 mg	E	
stimulant laxative oral tablet	E	
stomach relief oral tablet	E	
stomach relief oral tablet chewable	E	
stool softener laxative oral capsule 100 mg	E	
stool softener oral capsule 100 mg, 250 mg	E	
stool softener plus laxative	E	
stool softener/laxative oral tablet	E	

Drug Name	Drug Tier	Notes
SUPREP BOWEL PREP KIT	3	
SUTAB	3	
SYMPROIC	2	ST; QL
TALICIA	3	
TRULANCE	E	
TUMS CHEWY BITES	E	
URSO 250	3	
URSO FORTE	3	
URSODIOL ORAL CAPSULE 200 MG, 400 MG	E	
ursodiol oral capsule 300 mg	1	
ursodiol oral tablet	1	
URSODIOL+SYRSPE ND SF	E	
vegetable lax+stool softener	E	
VIBERZI	3	PA; QL
VISBIOME	E	
VOQUEZNA DUAL PAK	E	
VOQUEZNA TRIPLE PAK	E	
VSL#3 ORAL CAPSULE	E	
XERMELO	3	PA; SP; QL
XYBIOTIC	E	
ZELAC	E	
ZORBTIVE	3	PA; SP
Genetic or Enzyme Disorder - Drugs for Replacement, Modification, Treatment		
ALDURAZYME	2	PA; SP
AMONDYS 45	E	SP
betaine	1	SP
BRINEURA KIT	3	PA; SP

For more information regarding the tiers and designations in this drug list, please see the *Reading your formulary* section on page 6 of this booklet.

Drug Name	Drug Tier	Notes
BUPHENYL ORAL POWDER 3 GM/TSP	E	SP
BUPHENYL ORAL TABLET	E	SP
CERDELGA	3	PA; SP
CEREZYME INTRAVENOUS SOLUTION RECONSTITUTED 400 UNIT	3	PA; SP
CHOLBAM	3	PA; SP
CREON	2	
CRYSVITA	3	PA; SP
CYSTADANE	3	SP
CYSTAGON	3	SP
ELAPRASE	2	PA; SP
ELELYSO	3	PA; SP
EVRYSDI	3	PA; SP; QL
EXONDYS 51	E	SP
FABRAZYME	2	PA; SP
GALAFOLD	3	PA; SP; QL
JAVYGTOR	E	SP
KANUMA	3	PA; SP
KUVAN ORAL PACKET	E	SP
KUVAN ORAL TABLET	E	SP
lactase enzyme	E	
LAMZEDE	E	SP
LUMIZYME	2	PA; SP
MEPSEVII	3	PA; SP
miglustat	1	PA; SP
MYALEPT	3	PA; SP
NAGLAZYME	2	PA; SP
NEXVIAZYME	3	PA; SP
nitisinone	1	PA; SP
NITYR	3	PA; SP
NULIBRY	3	PA; SP
OCALIVA	3	PA; SP; QL
ORFADIN	3	PA; SP

Drug Name	Drug Tier	Notes
PALYNZIQ	E	SP
PANCREAZE ORAL CAPSULE DELAYED RELEASE PARTICLES 10500-35500 UNIT, 16800-56800 UNIT, 21000-54700 UNIT, 2600-8800 UNIT, 37000-97300 UNIT, 4200-14200 UNIT	E	
PERTZYE	E	
PHEBURANE	E	SP
PROCYSBI	E	SP
RAVICTI	E	SP
REVCОВI	3	PA; SP
sapropterin dihydrochloride oral packet	1	PA; SP
sapropterin dihydrochloride oral tablet	1	PA; SP
sodium phenylbutyrate oral powder 3 gm/tsp	1	PA; SP
sodium phenylbutyrate oral tablet	1	PA; SP
STRENSIQ	2	PA; SP
SUCRAID	3	PA; SP
VIMIZIM	3	PA; SP
VIKACE	E	
VOXZOGO	3	PA; SP; QL
VPRIV	3	PA; SP
VYONDYS 53	E	SP
XENPOZYME	3	PA; SP
XURIDEN	3	PA; SP; QL
ZAVESCA	3	PA; SP

For more information regarding the tiers and designations in this drug list, please see the *Reading your formulary* section on page 6 of this booklet.

Drug Name	Drug Tier	Notes
ZENPEP ORAL CAPSULE DELAYED RELEASE PARTICLES 10000-32000 UNIT, 15000-47000 UNIT, 20000-63000 UNIT, 25000-79000 UNIT, 3000-10000 UNIT, 40000-126000 UNIT, 5000-24000 UNIT	2	
ZOLGENSMA	3	PA; SP
ZOLGENSMA 20.6-21.0 KG	3	PA; SP
ZOLGENSMA 13.6-14.0 KG	3	PA; SP
ZOLGENSMA 14.1-14.5 KG	3	PA; SP
ZOLGENSMA 14.6-15.0 KG	3	PA; SP
ZOLGENSMA 15.1-15.5 KG	3	PA; SP
ZOLGENSMA 15.6-16.0 KG	3	PA; SP
ZOLGENSMA 16.1-16.5 KG	3	PA; SP
ZOLGENSMA 16.6-17.0 KG	3	PA; SP
ZOLGENSMA 17.1-17.5 KG	3	PA; SP
ZOLGENSMA 17.6-18.0 KG	3	PA; SP
ZOLGENSMA 18.1-18.5 KG	3	PA; SP
ZOLGENSMA 18.6-19.0 KG	3	PA; SP
ZOLGENSMA 19.1-19.5 KG	3	PA; SP
ZOLGENSMA 19.6-20.0 KG	3	PA; SP
ZOLGENSMA 20.1-20.5 KG	3	PA; SP

Drug Name	Drug Tier	Notes
Genitourinary Agents - Drugs for Bladder, Genital and Kidney Conditions		
AURYXIA	E	
bethanechol chloride oral	1	
BI-MIX	3	
calcium acetate (phos binder)	1	
calcium acetate oral tablet 667 mg	1	
CAVERJECT	3	QL
CAVERJECT IMPULSE	3	QL
CERVIDIL	E	
CIALIS	E	
CUPRIMINE ORAL CAPSULE 250 MG	E	SP
darifenacin hydrobromide er	1	
DEPEN TITRATABS	2	SP
DETROL	3	
DETROL LA	3	
DITROPAN XL ORAL TABLET EXTENDED RELEASE 24 HOUR 5 MG	3	
EDEX	3	QL
ELMIRON	E	
ENTADFI	E	
FEM PH	E	
fesoterodine fumarate er	E	
FILSPARI	E	SP
flavoxate hcl	1	
FOSRENOL ORAL PACKET	3	ST

For more information regarding the tiers and designations in this drug list, please see the *Reading your formulary* section on page 6 of this booklet.

Drug Name	Drug Tier	Notes
FOSRENOL ORAL TABLET CHEWABLE 1000 MG, 500 MG, 750 MG	3	ST
GELNIQUE TRANSDERMAL GEL 10 %	3	ST
GEMTESA	E	
glycine irrigation	E	
glycine urologic	E	
HYOPHEN	E	
INTRAROSA	3	ST
lanthanum carbonate	1	
LITHOSTAT	3	
me/naphos/mb/hyo1	E	
MUSE URETHRAL PELLETT 1000 MCG, 250 MCG, 500 MCG	3	QL
MYRBETRIQ ORAL SUSPENSION RECONSTITUTED ER	E	
MYRBETRIQ ORAL TABLET EXTENDED RELEASE 24 HOUR	2	
OXLUMO	3	PA; SP
oxybutynin chloride er	1	
OXYBUTYNIN CHLORIDE ORAL SOLUTION	E	
oxybutynin chloride oral syrup	1	
oxybutynin chloride oral tablet 2.5 mg	E	
oxybutynin chloride oral tablet 5 mg	1	
OXYTROL	3	ST; QL
OXYTROL FOR WOMEN	E	
penicillamine oral capsule	E	SP
penicillamine oral tablet	1	SP

Drug Name	Drug Tier	Notes
PENTOSAN POLYSULFATE SODIUM ORAL	E	
phenazo oral tablet 200 mg	1	
phenazopyridine hcl oral tablet 100 mg, 200 mg	1	
PHENYLEPHRINE HCL INTRACAVERNOSAL	E	
PHOSLYRA	3	ST
PHOSPHASAL	E	
PREPIDIL	E	
PYRIDIUM	E	
QUAD-MIX	3	
RENACIDIN	E	
RENAGEL ORAL TABLET 800 MG	E	
RENVELA	3	
RIMSO-50	3	
sevelamer carbonate	1	
sevelamer hcl	1	
sildenafil citrate oral tablet 100 mg, 25 mg, 50 mg	1	QL
solifenacin succinate	1	
STENDRA	E	
SUPER BI-MIX	3	
SUPER QUAD-MIX	3	
SUPER TRI-MIX	E	
tadalafil oral	1	QL
THIOLA	3	SP
THIOLA EC	3	SP
tiopronin oral	1	SP
tolterodine tartrate	1	
tolterodine tartrate er	1	
TOVIAZ	E	
TRI-MIX	E	

For more information regarding the tiers and designations in this drug list, please see the *Reading your formulary* section on page 6 of this booklet.

Drug Name	Drug Tier	Notes
tropium chloride	1	
tropium chloride er	1	
URELLE	E	
uretron d/s oral tablet 81.6 mg	1	
URIBEL	E	
URIMAR-T	E	
urin ds oral tablet 81.6 mg	E	
urinary pain relief oral tablet 95 mg	E	
URO-458	E	
UROGESIC-BLUE	E	
URO-MP	E	
URO-SP	E	
USTELL	E	
UTIRA-C	E	
vardefafil hcl oral tablet	E	
VELPHORO	3	
VESICARE	3	
VESICARE LS	E	
VIAGRA	E	
VILAMIT MB	E	
VILEVEV MB	E	
Genitourinary Agents - Drugs for Prostate Conditions		
alfuzosin hcl er	1	
AVODART	3	
CARDURA XL	E	
dutasteride oral	1	
dutasteride-tamsulosin hcl	1	
finasteride oral tablet 5 mg	1	
FLOMAX	E	
JALYN	3	
PROSCAR	3	
RAPAFLO	3	

Drug Name	Drug Tier	Notes
silodosin	1	
tamsulosin hcl	1	
terazosin hcl oral	1	
UROXATRAL	3	
Hormonal Agents - Adrenal		
ALKINDI SPRINKLE	E	
BETA 1 KIT	E	
BETALOAN SUIK	E	
BETAMETHASONE COMBO	E	
BETAMETHASONE SOD PHOS & ACET INJECTION SUSPENSION 7 (4-3) MG/ML	E	
BETAMETHASONE SOD PHOS & ACET SUSPENSION 6 (3-3) MG/ML INJECTION	E	
betamethasone sod phos & acet suspension 6 (3-3) mg/ml injection	1	
BSP 0820	E	
CELESTONE SOLUSPAN	3	
CONTRAST ALLERGY PREMEDIATION PACK	E	
CORTEF	3	
CORTISONE ACETATE ORAL	E	
DEPO-MEDROL	3	
DEXABLISS	E	
dexamethasone intensol	1	
dexamethasone oral	1	
dexamethasone sod phosphate pf	1	

For more information regarding the tiers and designations in this drug list, please see the *Reading your formulary* section on page 6 of this booklet.

Drug Name	Drug Tier	Notes
dexamethasone sodium phosphate injection solution 10 mg/ml, 100 mg/10ml, 120 mg/30ml, 20 mg/5ml, 4 mg/ml	1	
DEXAMETHASONE SODIUM PHOSPHATE SOLUTION 10 MG/ML INJECTION	3	
DEXONTO 0.4%	3	
DMT SUIK	E	
DOUBLEDEX	E	
DXEVO 11-DAY	E	
DYURAL 80-LM	E	
DYURAL-40	E	
DYURAL-80	E	
DYURAL-L	E	
DYURAL-LM	E	
EMFLAZA	E	SP
fludrocortisone acetate oral	1	
HEMADY	E	
HEXATRIONE	3	
HIDEX 6-DAY	E	
hydrocortisone oral	1	
KENALOG INJECTION	3	
KENALOG-80	3	
MAS CARE-PAK	E	
MEDROL ORAL TABLET 16 MG, 4 MG, 8 MG	3	
MEDROL ORAL TABLET 2 MG	2	
MEDROL ORAL TABLET THERAPY PACK	3	
MEDROLOAN II SUIK	E	
MEDROLOAN SUIK	E	

Drug Name	Drug Tier	Notes
METHYLPREDNISOLONE ACETATE INJECTION SUSPENSION 50 MG/ML	3	
METHYLPREDNISOLONE ACETATE SUSPENSION 40 MG/ML INJECTION	3	
methylprednisolone acetate suspension 40 mg/ml injection	1	
METHYLPREDNISOLONE ACETATE SUSPENSION 80 MG/ML INJECTION	3	
methylprednisolone acetate suspension 80 mg/ml injection	1	
methylprednisolone oral	1	
MILLIPRED ORAL TABLET	E	
MLK F1	E	
MLK F2	E	
MLK F3	E	
MLK F4	E	
MULTI-SPECIALTY	E	
ORAPRED ODT	E	
P-CARE K40	E	
P-CARE K40G	E	
P-CARE K40MX	E	
P-CARE K80	E	
P-CARE K80G	E	
P-CARE K80MX	E	
PEDIAPRED	3	
PHYSICIANS EZ USE JOINT/TUNNEL	E	
PHYSICIANS EZ USE M-PRED	E	
POD-CARE 100K	E	

For more information regarding the tiers and designations in this drug list, please see the *Reading your formulary* section on page 6 of this booklet.

Drug Name	Drug Tier	Notes
POINT OF CARE L.2	E	
POINT OF CARE L.5	E	
POINT OF CARE LM DEP 2	E	
prednisolone oral solution	1	
prednisolone oral tablet	E	
prednisolone sodium phosphate oral solution 10 mg/5ml, 20 mg/5ml	E	
prednisolone sodium phosphate oral solution 15 mg/5ml, 25 mg/5ml, 6.7 (5 base) mg/5ml	1	
prednisolone sodium phosphate oral tablet dispersible	E	
prednisone intensol	E	
prednisone oral	1	
PRO-C-DURE 5	E	
PRO-C-DURE 6	E	
RAYOS	E	
READYSHARP ANESTH + METHYLPRED	E	
SOLU-CORTEF INJECTION SOLUTION RECONSTITUTED 100 MG	3	
TAPERDEX 12-DAY	E	
TAPERDEX 6-DAY	E	
TAPERDEX 7-DAY ORAL TABLET THERAPY PACK 1.5 MG (27)	E	
TOPIX	E	
TRIAMCINOLONE ACETONIDE INJECTION SUSPENSION 50 MG/ML	E	

Drug Name	Drug Tier	Notes
triamcinolone acetonide suspension 40 mg/ml injection	1	
TRIAMCINOLONE ACETONIDE SUSPENSION 40 MG/ML INJECTION	3	
TRIAMCINOLONE ACETONIDE SUSPENSION 40 MG/ML INJECTION	E	
TRILOAN II SUIK	E	
TRILOAN SUIK	E	
ZILRETTA	E	
Hormonal Agents - Men's Health		
ANDRODERM TRANSDERMAL PATCH 24 HOUR	2	PA
ANDROGEL PUMP TRANSDERMAL GEL 20.25 MG/ACT (1.62%)	3	PA
AVEED	E	
danazol oral	1	
DEPO-TESTOSTERONE INTRAMUSCULAR SOLUTION	E	
EC-RX TESTOSTERONE	E	
FORTESTA	E	
JATENZO	E	
KYZATREX	E	
METHITEST	3	PA
methyltestosterone oral	E	
NATESTO	E	
oxandrolone oral	1	PA; QL
TESTIM	E	
TESTONE CIK	E	
TESTOPEL	E	

For more information regarding the tiers and designations in this drug list, please see the *Reading your formulary* section on page 6 of this booklet.

Drug Name	Drug Tier	Notes
TESTOSTERONE CYPIONATE INJECTION SOLUTION 200 MG/ML	E	
testosterone cypionate intramuscular solution 100 mg/ml, 200 mg/ml	1	PA
testosterone enanthate intramuscular solution	1	PA
TESTOSTERONE IMPLANT PELLETT 100 MG, 200 MG, 25 MG, 50 MG	E	
testosterone transdermal gel 1.62 %, 10 mg/act (2%), 12.5 mg/act (1%), 20.25 mg/1.25gm (1.62%), 20.25 mg/act (1.62%), 25 mg/2.5gm (1%), 40.5 mg/2.5gm (1.62%), 50 mg/5gm (1%)	1	PA
testosterone transdermal solution	1	PA
TLANDO	E	
VOGELXO PUMP	E	
VOGELXO TRANSDERMAL GEL 50 MG/5GM (1%)	E	
XYOSTED	3	PA
Hormonal Agents - Pituitary		
ACTHAR	2	PA; SP
cabergoline	1	
CETROTIDE SUBCUTANEOUS KIT 0.25 MG	E	SP
CHORIONIC GONADOTROPIN INTRAMUSCULAR	3	PA; SP
CLOMID	3	PA
CORTROPHIN	2	PA; SP

Drug Name	Drug Tier	Notes
DDAVP INJECTION SOLUTION 4 MCG/ML	3	
DDAVP ORAL	3	
DDAVP PF	3	
desmopressin ace spray refrig	1	
desmopressin acetate injection	1	
DESMOPRESSIN ACETATE NASAL	E	
desmopressin acetate oral	1	
desmopressin acetate pf	1	
desmopressin acetate spray	1	
EGRIFTA SV	3	PA; SP; QL
ELIGARD	3	PA; SP; QL
FENSOLVI (6 MONTH)	3	PA; SP; QL
FIRMAGON (240 MG DOSE)	3	PA; SP; QL
FIRMAGON SUBCUTANEOUS SOLUTION RECONSTITUTED 80 MG	3	PA; SP; QL
FOLLISTIM AQ SUBCUTANEOUS	2	PA; SP
fyremadel	1	PA; SP
ganirelix acetate subcutaneous solution prefilled syringe	1	PA; SP
GENOTROPIN MINIQUICK SUBCUTANEOUS PREFILLED SYRINGE	E	SP
GENOTROPIN SUBCUTANEOUS CARTRIDGE	E	SP
GONAL-F	E	SP
GONAL-F RFF	E	SP

For more information regarding the tiers and designations in this drug list, please see the *Reading your formulary* section on page 6 of this booklet.

Drug Name	Drug Tier	Notes
GONAL-F RFF REDIJECT SUBCUTANEOUS SOLUTION PEN- INJECTOR	E	SP
HUMATROPE INJECTION CARTRIDGE	E	SP
INCRELEX	2	PA; SP
ISTURISA	E	SP
LANREOTIDE ACETATE	E	SP
leuprolide acetate injection	1	PA; SP
LEUPROLIDE ACETATE INTRAMUSCULAR	3	PA; SP; QL
LUPRON DEPOT (1- MONTH) INTRAMUSCULAR KIT 3.75 MG	3	PA; SP
LUPRON DEPOT (1- MONTH) INTRAMUSCULAR KIT 7.5 MG	2	PA; SP
LUPRON DEPOT (3- MONTH) INTRAMUSCULAR KIT 11.25 MG	3	PA; SP
LUPRON DEPOT (3- MONTH) INTRAMUSCULAR KIT 22.5 MG	2	PA; SP
LUPRON DEPOT (4- MONTH) INTRAMUSCULAR KIT 30MG	2	PA; SP
LUPRON DEPOT (6- MONTH) INTRAMUSCULAR KIT 45MG	2	PA; SP
LUPRON DEPOT-PED (1-MONTH) INTRAMUSCULAR KIT 11.25 MG	3	PA; SP

Drug Name	Drug Tier	Notes
LUPRON DEPOT-PED (1-MONTH) INTRAMUSCULAR KIT 15 MG, 7.5 MG	2	PA; SP
LUPRON DEPOT-PED (3-MONTH) INTRAMUSCULAR KIT 11.25 MG (PED)	3	PA; SP
LUPRON DEPOT-PED (3-MONTH) INTRAMUSCULAR KIT 30 MG	2	PA; SP
MENOPUR	3	PA; SP
MYCAPSSA	E	SP
NOCDURNA	3	
NORDITROPIN FLEXPRO SUBCUTANEOUS SOLUTION PEN- INJECTOR	2	PA; SP
NOVAREL	3	PA; SP
NUTROPIN AQ NUSPIN 10 SUBCUTANEOUS SOLUTION PEN- INJECTOR	2	PA; SP
NUTROPIN AQ NUSPIN 20 SUBCUTANEOUS SOLUTION PEN- INJECTOR	2	PA; SP
NUTROPIN AQ NUSPIN 5 SUBCUTANEOUS SOLUTION PEN- INJECTOR	2	PA; SP
octreotide acetate injection solution 100 mcg/ml, 1000 mcg/ml, 200 mcg/ml, 50 mcg/ml, 500 mcg/ml	1	PA; SP
octreotide acetate subcutaneous	1	PA; SP

For more information regarding the tiers and designations in this drug list, please see the *Reading your formulary* section on page 6 of this booklet.

Drug Name	Drug Tier	Notes
OMNITROPE SUBCUTANEOUS SOLUTION CARTRIDGE	E	SP
OMNITROPE SUBCUTANEOUS SOLUTION RECONSTITUTED	E	SP
ORLISSA	2	PA; QL
OVIDREL	3	PA; SP
OXYTOCIN-LACTATED RINGERS INTRAVENOUS SOLUTION 30 UNIT/500ML	3	
OXYTOCIN-SODIUM CHLORIDE INTRAVENOUS SOLUTION 20-0.9 UNIT/L-%	3	
PREGNYL	3	PA; SP
RECORLEV	E	SP
SAIZEN	E	SP
SAIZENPREP	E	SP
SANDOSTATIN INJECTION SOLUTION 100 MCG/ML, 50 MCG/ML, 500 MCG/ML	E	SP
SANDOSTATIN LAR DEPOT	E	SP
SIGNIFOR	E	SP
SIGNIFOR LAR INTRAMUSCULAR SUSPENSION RECONSTITUTED ER	3	PA; SP; QL
SKYTROFA	E	SP
SOMATULINE DEPOT	3	PA; SP
SOMAVERT	3	PA; SP
SUPPRELIN LA	2	PA; SP; QL
SYNAREL	2	
TEPEZZA	3	PA; SP

Drug Name	Drug Tier	Notes
TRELSTAR MIXJECT	3	PA; SP; QL
TRIPTODUR	3	PA; SP; QL
ZOLADEX SUBCUTANEOUS IMPLANT 10.8 MG	3	SP; QL
ZOLADEX SUBCUTANEOUS IMPLANT 3.6 MG	2	SP; QL
ZOMACTON	E	SP
Hormonal Agents - Prostaglandins		
KORLYM	3	PA; SP; QL
Hormonal Agents - Selective Estrogen Receptor Modifying Agents		
EVISTA	3	
OSPHENA	3	
raloxifene hcl	1	
Hormonal Agents - Sex Hormones and Birth Control		
ACTIVELLA ORAL TABLET 1-0.5 MG	3	
afirmelle	\$0	
aftera	\$0	
ALORA TRANSDERMAL PATCH TWICE WEEKLY 0.025 MG/24HR, 0.075 MG/24HR, 0.1 MG/24HR	3	ST
altavera	\$0	
alyacen 1/35	\$0	
alyacen 7/7/7	\$0	
amabelz	1	
amethia	\$0	QL
amethyst	\$0	
ANGELIQ	3	
ANNOVERA	\$0	QL

For more information regarding the tiers and designations in this drug list, please see the *Reading your formulary* section on page 6 of this booklet.

Drug Name	Drug Tier	Notes
apri	\$0	
aranelle	\$0	
ashlyna	\$0	QL
aubra eq	\$0	
aurovela 1.5/30	\$0	
aurovela 1/20	\$0	
aurovela 24 fe	\$0	
aurovela fe 1.5/30	\$0	
aurovela fe 1/20	\$0	
aviane	\$0	
AYGESTIN	3	
ayuna	\$0	
azurette	\$0	
BALCOLTRA	\$0	
balziva	\$0	
BEYAZ	E	
BIJUVA	3	
blisovi 24 fe	\$0	
blisovi fe 1.5/30	\$0	
blisovi fe 1/20	\$0	
briellyn	\$0	
camila	\$0	
camrese	\$0	QL
camrese lo	\$0	QL
charlotte 24 fe	\$0	
chateal eq	\$0	
CLIMARA	3	
CLIMARA PRO	2	
COMBIPATCH	3	
COVARYX	E	
COVARYX HS	E	
CRINONE VAGINAL GEL 4 %	3	QL
CRINONE VAGINAL GEL 8 %	3	PA; QL
cryselle-28	\$0	
cyred	\$0	

Drug Name	Drug Tier	Notes
cyred eq	\$0	
dasetta 1/35	\$0	
dasetta 7/7/7	\$0	
daysee	\$0	QL
deblitane	\$0	
DELESTROGEN INTRAMUSCULAR OIL 10 MG/ML	E	
DELESTROGEN INTRAMUSCULAR OIL 20 MG/ML, 40 MG/ML	3	
delyla	\$0	
DEPO-ESTRADIOL	3	
DEPO-PROVERA INTRAMUSCULAR SUSPENSION 150 MG/ML	3	QL
DEPO-PROVERA INTRAMUSCULAR SUSPENSION PREFILLED SYRINGE	3	QL
DEPO-SUBQ PROVERA 104 SUBCUTANEOUS SUSPENSION PREFILLED SYRINGE	\$0	QL
desogestrel-ethinyl estradiol oral tablet 0.15-0.02/0.01 mg (21/5)	\$0	
DIVIGEL	3	
dolishale	\$0	
dotti	1	
drospiren-eth estrad-levomefol	\$0	
drospirenone-ethinyl estradiol	\$0	
DUAVEE	2	
econtra ez	\$0	
econtra one-step	\$0	
EC-RX ESTRADIOL	E	

For more information regarding the tiers and designations in this drug list, please see the *Reading your formulary* section on page 6 of this booklet.

Drug Name	Drug Tier	Notes
EC-RX PROGESTERONE	E	
EEMT	E	
EEMT HS	E	
ELESTRIN	3	
elinest	\$0	
ELLA	\$0	
eluryng	\$0	
ENDOMETRIN	2	PA
enpresse-28	\$0	
enskyce oral tablet 0.15-30 mg-mcg	\$0	
errin	\$0	
est estrogens- methyltest ds	E	
est estrogens- methyltest hs	E	
est estrogens- methyltest oral tablet 1.25-2.5 mg	E	
estarylla	\$0	
ESTRACE	3	
estradiol oral	1	
estradiol transdermal	1	
estradiol vaginal	1	
estradiol valerate intramuscular	1	
estradiol-norethindrone acet	1	
ESTRING	3	QL
ESTROGEL	3	
ethynodiol diac-eth estradiol	\$0	
etonogestrel-ethinyl estradiol	\$0	
EVAMIST	3	
falmina	\$0	
fayosim	\$0	QL
FEMRING	3	ST; QL

Drug Name	Drug Tier	Notes
finzala	\$0	
FIRST- PROGESTERONE VGS VAGINAL SUPPOSITORY 100 MG, 200 MG	E	
fyavolv	1	
gemmily	\$0	
GENERESS FE	E	
hailey 1.5/30	\$0	
hailey 24 fe	\$0	
hailey fe 1.5/30	\$0	
hailey fe 1/20	\$0	
haloette	\$0	
heather	\$0	
her style	\$0	
HYDROXYPROGESTE RONE CAPROATE INTRAMUSCULAR SOLUTION	3	PA; SP
iclevia	\$0	QL
IMVEXXY MAINTENANCE PACK	2	
IMVEXXY STARTER PACK	2	
incassia	\$0	
introvale	\$0	QL
isibloom	\$0	
jaimiess	\$0	QL
jasmiel	\$0	
jencycla	\$0	
jinteli	1	
jolessa	\$0	QL
juleber	\$0	
junel 1.5/30	\$0	
junel 1/20	\$0	
junel fe 1.5/30	\$0	
junel fe 1/20	\$0	
junel fe 24	\$0	

For more information regarding the tiers and designations in this drug list, please see the *Reading your formulary* section on page 6 of this booklet.

Drug Name	Drug Tier	Notes
kaitlib fe	\$0	
kalliga	\$0	
kariva	\$0	
kelnor 1/35	\$0	
kelnor 1/50	\$0	
kurvelo	\$0	
KYLEENA	E	
larin 1.5/30	\$0	
larin 1/20	\$0	
larin 24 fe	\$0	
larin fe 1.5/30	\$0	
larin fe 1/20	\$0	
layolis fe	\$0	
leena	\$0	
lessina	\$0	
levonest	\$0	
levonorgest-eth est & eth est	\$0	QL
levonorgest-eth estrad 91-day	\$0	QL
levonorgestrel oral tablet 1.5 mg	\$0	
levonorgestrel-ethinyl estrad	\$0	
levonorg-eth estrad triphasic oral tablet 50-30/75-40/ 125-30 mcg	\$0	
levora 0.15/30 (28)	\$0	
LILETTA (52 MG) INTRAUTERINE INTRAUTERINE DEVICE 20.1 MCG/DAY	E	
LO LOESTRIN FE	\$0	
LOESTRIN 1.5/30 (21)	3	
LOESTRIN 1/20 (21)	3	
LOESTRIN FE 1.5/30	3	
LOESTRIN FE 1/20	3	
lojaimiess	\$0	QL

Drug Name	Drug Tier	Notes
loryna	\$0	
LOSEASONIQUE	3	QL
low-ogestrel	\$0	
lo-zumandimine	\$0	
luteru	\$0	
lyleq	\$0	
lyllana	1	
lyza	\$0	
marlissa	\$0	
medroxyprogesterone acetate intramuscular	\$0	QL
medroxyprogesterone acetate oral	1	
megestrol acetate oral suspension 40 mg/ml, 625 mg/5ml	1	
megestrol acetate oral tablet	1	
MENEST	2	
MENOSTAR	3	ST
merzee	\$0	
microgestin 1.5/30	\$0	
microgestin 1/20	\$0	
microgestin 24 fe	\$0	
microgestin fe 1.5/30	\$0	
microgestin fe 1/20	\$0	
mili	\$0	
mimvey	1	
MINASTRIN 24 FE	E	
MINIVELLE	3	ST
MIRCETTE	3	
MIRENA (52 MG) INTRAUTERINE INTRAUTERINE DEVICE 20 MCG/DAY	E	
mono-linyah	\$0	
my choice	\$0	
my way	\$0	
MYFEMBREE	2	PA; QL

For more information regarding the tiers and designations in this drug list, please see the *Reading your formulary* section on page 6 of this booklet.

Drug Name	Drug Tier	Notes
NATAZIA	\$0	
necon 0.5/35 (28)	\$0	
new day	\$0	
NEXPLANON	E	
NEXTSTELLIS	E	
nikki	\$0	
nora-be	\$0	
norethin ace-eth estrad-fe oral capsule	\$0	
norethin ace-eth estrad-fe oral tablet 1-20 mg-mcg, 1.5-30 mg-mcg	\$0	
norethin ace-eth estrad-fe oral tablet chewable	\$0	
norethindrone acetate oral	1	
norethindrone acet-ethinyl est oral tablet	\$0	
norethindrone oral	\$0	
norethindrone-eth estradiol	1	
norethindron-ethinyl estrad-fe	\$0	
norethin-eth estradiol-fe	\$0	
norgestimate-eth estradiol oral tablet 0.25-35 mg-mcg	\$0	
norgestimate-ethinyl estradiol triphasic	\$0	
norlyroc	\$0	
nortrel 0.5/35 (28)	\$0	
nortrel 1/35 (21)	\$0	
nortrel 1/35 (28)	\$0	
nortrel 7/7/7	\$0	
NUVARING	3	
nylia 1/35	\$0	
nylia 7/7/7	\$0	
nymyo	\$0	

Drug Name	Drug Tier	Notes
ocella	\$0	
opcicon one-step	\$0	
option 2	\$0	
ORIAHNN	2	PA; QL
PARAGARD INTRAUTERINE COPPER	E	
philith	\$0	
pimtrea	\$0	
pirmella 1/35	\$0	
pirmella 7/7/7	\$0	
PLAN B ONE-STEP	\$0	
portia-28	\$0	
PREFEST	3	
PREMARIN ORAL	2	
PREMARIN VAGINAL	2	
PREMPHASE	2	
PREMPRO	2	
progesterone intramuscular	1	
PROGESTERONE MICRONIZED TRANSDERMAL	E	
progesterone oral	1	
PROMETRIUM	3	
PROVERA	3	
QUARTETTE	3	QL
react	\$0	
reclipsen	\$0	
rivelsa	\$0	QL
SAFYRAL	E	
SEASONIQUE	3	QL
setlakin	\$0	QL
sharobel	\$0	
simliya	\$0	
simpesse	\$0	QL
SKYLA	E	
SLYND	E	

For more information regarding the tiers and designations in this drug list, please see the *Reading your formulary* section on page 6 of this booklet.

Drug Name	Drug Tier	Notes
sprintec 28	\$0	
sronyx	\$0	
syeda	\$0	
take action	\$0	
tarina 24 fe	\$0	
tarina fe 1/20 eq	\$0	
taysofy	\$0	
TAYTULLA	3	ST
tilia fe	\$0	
tri-estarylla	\$0	
tri-legest fe	\$0	
tri-linyah	\$0	
tri-lo-estarylla	\$0	
tri-lo-marzia	\$0	
tri-lo-mili	\$0	
tri-lo-sprintec	\$0	
tri-mili	\$0	
tri-nymyo	\$0	
tri-sprintec	\$0	
trivora (28)	\$0	
tri-vylibra	\$0	
tri-vylibra lo	\$0	
TWIRLA	E	
tyblume oral tablet chewable	\$0	
tydemy	\$0	
VAGIFEM VAGINAL TABLET 10 MCG	E	
velivet	\$0	
vestura	\$0	
vienva	\$0	
viorele	\$0	
VIVELLE-DOT	E	
volnea	\$0	
vyfemla	\$0	
vylibra	\$0	
wera	\$0	

Drug Name	Drug Tier	Notes
wymzya fe	\$0	
xulane	\$0	
YASMIN 28	3	
YAZ	E	
yuvafem	1	
zafemy	\$0	
zovia 1/35 (28)	\$0	
zumandimine	\$0	
Hormonal Agents - Thyroid		
ADTHYZA	E	
ARMOUR THYROID	3	ST
CYTOMEL	E	
ERMEZA	3	
euthyrox	1	
levo-t	1	
LEVOTHYROXINE SODIUM ORAL CAPSULE	3	
levothyroxine sodium oral tablet	1	
levoxyl	1	
liothyronine sodium oral	1	
methimazole oral	1	
np thyroid	1	
propylthiouracil oral	1	
SODIUM IODIDE I-131	3	
SYNTHROID	3	
THYQUIDITY	3	
TIROSINT ORAL CAPSULE 100 MCG, 112 MCG, 125 MCG, 13 MCG, 137 MCG, 150 MCG, 175 MCG, 200 MCG, 25 MCG, 50 MCG, 75 MCG, 88 MCG	3	
TIROSINT-SOL	3	
unithroid	1	

For more information regarding the tiers and designations in this drug list, please see the *Reading your formulary* section on page 6 of this booklet.

Drug Name	Drug Tier	Notes
Immunological Agents - Drugs for Immune System Stimulation or Suppression		
ACTEMRA ACTPEN	3	PA; SP; QL
ACTEMRA INTRAVENOUS	3	PA; SP
ACTEMRA SUBCUTANEOUS	3	PA; SP; QL
ACTIMMUNE	2	PA; SP
ALFERON N	2	SP
AMJEVITA SOLUTION AUTO-INJECTOR 40 MG/0.8ML SUBCUTANEOUS	2	PA; SP; QL
AMJEVITA SOLUTION AUTO-INJECTOR 40 MG/0.8ML SUBCUTANEOUS	E	SP
AMJEVITA SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	2	PA; SP; QL
ANTIVENIN LATRODECTUS MACTANS	3	
ANTIVENIN MICRURUS FULVIUS INTRAVENOUS	3	
ARAVA	3	
ARCALYST	3	PA; SP
ASCENIV	E	SP
ASTAGRAF XL	3	SP
ATGAM	2	SP
AVSOLA	2	PA; SP
AZASAN	3	
azathioprine oral	1	
azathioprine sodium	1	
BENLYSTA	3	PA; SP
BERINERT	3	PA; SP; QL
BIVIGAM	3	PA; SP

Drug Name	Drug Tier	Notes
CELLCEPT	3	SP
CELLCEPT INTRAVENOUS	3	SP
CIMZIA STARTER KIT SUBCUTANEOUS PREFILLED SYRINGE KIT	2	PA; SP; QL
CIMZIA VIAL KIT	2	PA; SP; QL
CIMZIA SUBCUTANEOUS PREFILLED SYRINGE KIT	2	PA; SP; QL
CINRYZE	3	PA; SP
COSENTYX (300 MG DOSE)	E	SP
COSENTYX 150 MG/ML	E	SP
COSENTYX SENSOREADY (300 MG)	E	SP
COSENTYX SENSOREADY PEN SUBCUTANEOUS SOLUTION AUTO-INJECTOR 150 MG/ML	E	SP
CROFAB	3	
CUTAQUIG	E	SP
CUVITRU	3	PA; SP
cyclosporine intravenous	1	SP
cyclosporine modified	1	SP
cyclosporine oral capsule	1	SP
CYTOGAM	2	PA; SP
ENBREL MINI	2	PA; SP; QL
ENBREL SUBCUTANEOUS SOLUTION 25 MG/0.5ML	2	PA; SP; QL
ENBREL SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	2	PA; SP; QL

For more information regarding the tiers and designations in this drug list, please see the *Reading your formulary* section on page 6 of this booklet.

Drug Name	Drug Tier	Notes
ENBREL SURECLICK SUBCUTANEOUS SOLUTION AUTO-INJECTOR	2	PA; SP; QL
ENSPRYNG	3	PA; SP
ENTYVIO	3	PA; SP
ENVARUSUS XR	3	SP
everolimus oral tablet 0.25 mg, 0.5 mg, 0.75 mg, 1 mg	1	SP
FIRAZYR SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	E	SP
FLEBOGAMMA DIF	3	PA; SP
GAMASTAN	2	PA; SP
GAMIFANT	3	PA; SP
GAMMAGARD	3	PA; SP
GAMMAGARD S/D LESS IGA	3	PA; SP
GAMMAKED INJECTION SOLUTION 1 GM/10ML, 10 GM/100ML, 20 GM/200ML, 5 GM/50ML	3	PA; SP
GAMMAPLEX INTRAVENOUS SOLUTION 10 GM/100ML, 10 GM/200ML, 20 GM/200ML, 20 GM/400ML, 5 GM/100ML, 5 GM/50ML	3	PA; SP
GAMUNEX-C	3	PA; SP
gengraf oral capsule 100 mg, 25 mg	1	SP
gengraf oral solution	1	SP
HAEGARDA	3	PA; SP

Drug Name	Drug Tier	Notes
HEPAGAM B INJECTION SOLUTION 312 UNIT/ML	3	
HIZENTRA SUBCUTANEOUS SOLUTION 1 GM/5ML, 10 GM/50ML, 2 GM/10ML, 4 GM/20ML	3	PA; SP
HIZENTRA SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	3	PA; SP
HUMIRA PEDIATRIC CROHNS START SUBCUTANEOUS PREFILLED SYRINGE KIT 80 MG/0.8ML, 80 MG/0.8ML & 40MG/0.4ML	2	PA; SP; QL
HUMIRA PEN SUBCUTANEOUS PEN-INJECTOR KIT	2	PA; SP; QL
HUMIRA PEN-CD/UC/HS STARTER	2	PA; SP; QL
HUMIRA PEN-PEDIATRIC UC START	2	PA; SP; QL
HUMIRA PEN-PS/UV/ADOL HS START SUBCUTANEOUS PEN-INJECTOR KIT 40 MG/0.8ML	2	PA; SP; QL
HUMIRA PEN-PSOR/UEIT STARTER	2	PA; SP; QL
HUMIRA SUBCUTANEOUS PREFILLED SYRINGE KIT 10 MG/0.1ML, 20 MG/0.2ML, 40 MG/0.4ML, 40 MG/0.8ML	2	PA; SP; QL

For more information regarding the tiers and designations in this drug list, please see the *Reading your formulary* section on page 6 of this booklet.

Drug Name	Drug Tier	Notes
HYPERHEP B INTRAMUSCULAR SOLUTION 220 UNIT/ML	3	
HYPERHEP B INTRAMUSCULAR SOLUTION PREFILLED SYRINGE	3	
HYPERRAB	E	
HYPERRHO S/D INTRAMUSCULAR SOLUTION PREFILLED SYRINGE	2	SP
HYPERTET	3	
HYQVIA	3	PA; SP
icatibant acetate subcutaneous solution prefilled syringe	1	PA; SP; QL
ILARIS SUBCUTANEOUS SOLUTION	2	PA; SP; QL
ILUMYA	3	PA; SP; QL
IMOGAM RABIES-HT INJECTION SOLUTION 300 UNIT/2ML	E	
IMURAN	3	
INFLECTRA	2	PA; SP
INFLIXIMAB	E	SP
JOENJA	E	SP
KALBITOR	3	PA; SP; QL
KEDRAB INJECTION	E	
KEVZARA	3	PA; SP; QL
KINERET SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	3	PA; SP
KYMRIAH INTRAVENOUS SUSPENSION 250000000 CELLS, 600000000 CELLS	3	PA; SP
LEFLUNICLO	E	

Drug Name	Drug Tier	Notes
leflunomide oral	1	
LUPKYNIS	E	SP
methotrexate oral	1	
methotrexate sodium (pf) injection solution 1 gm/40ml, 250 mg/10ml, 50 mg/2ml	1	
methotrexate sodium injection solution 1000 mg/40ml, 250 mg/10ml, 50 mg/2ml	1	
methotrexate sodium injection solution reconstituted	1	
methotrexate sodium oral	1	
MICRHOGAM ULTRA-FILTERED PLUS INTRAMUSCULAR SOLUTION PREFILLED SYRINGE	2	SP
mycophenolate mofetil hcl	1	SP
mycophenolate mofetil intravenous	1	SP
mycophenolate mofetil oral	1	SP
mycophenolate sodium	1	SP
MYFORTIC	3	SP
NABI-HB INTRAMUSCULAR SOLUTION 312 UNIT/ML	3	
NEORAL	3	SP
NULOJIX	3	SP

For more information regarding the tiers and designations in this drug list, please see the *Reading your formulary* section on page 6 of this booklet.

Drug Name	Drug Tier	Notes
OCTAGAM INTRAVENOUS SOLUTION 1 GM/20ML, 10 GM/100ML, 10 GM/200ML, 2 GM/20ML, 2.5 GM/50ML, 20 GM/200ML, 30 GM/300ML, 5 GM/100ML, 5 GM/50ML	3	PA; SP
OLUMIANT	3	PA; SP; QL
ORENCIA CLICKJECT	3	PA; SP; QL
ORENCIA INTRAVENOUS	3	PA; SP
ORENCIA SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	3	PA; SP; QL
ORLADEYO	3	PA; SP; QL
OTEZLA ORAL TABLET	2	PA; SP; QL
OTEZLA ORAL TABLET THERAPY PACK	2	PA; SP; QL
OTREXUP SUBCUTANEOUS SOLUTION AUTO- INJECTOR 10 MG/0.4ML, 12.5 MG/0.4ML, 15 MG/0.4ML, 17.5 MG/0.4ML, 20 MG/0.4ML, 22.5 MG/0.4ML, 25 MG/0.4ML	E	
PANZYGA	E	SP
PRIVIGEN	3	PA; SP
PROGRAF	3	SP
PROVENGE INTRAVENOUS SUSPENSION 50000000 CELLS	2	PA; SP
RAPAMUNE	3	SP

Drug Name	Drug Tier	Notes
RASUVO SUBCUTANEOUS SOLUTION AUTO- INJECTOR 10 MG/0.2ML, 12.5 MG/0.25ML, 15 MG/0.3ML, 17.5 MG/0.35ML, 20 MG/0.4ML, 22.5 MG/0.45ML, 25 MG/0.5ML, 30 MG/0.6ML, 7.5 MG/0.15ML	2	PA; QL
REDITREX	E	
REMICADE	E	SP
RENFLEXIS	E	SP
REZUROCK	E	SP
RHOGAM ULTRA- FILTERED PLUS INTRAMUSCULAR SOLUTION PREFILLED SYRINGE	2	SP
RHOPHYLAC INJECTION SOLUTION PREFILLED SYRINGE	2	
RIDAURA	3	SP
RINVOQ	2	PA; SP; QL
RUCONEST	3	PA; SP; QL
sajazir subcutaneous solution prefilled syringe	1	PA; SP; QL
SANDIMMUNE INTRAVENOUS	2	SP
SANDIMMUNE ORAL CAPSULE	3	SP
SANDIMMUNE ORAL SOLUTION	2	SP
SAPHNELO	3	PA; SP
SILIQ	3	PA; SP; QL
SIMPONI ARIA	2	PA; SP

For more information regarding the tiers and designations in this drug list, please see the *Reading your formulary* section on page 6 of this booklet.

Drug Name	Drug Tier	Notes
SIMPONI SUBCUTANEOUS SOLUTION AUTO-INJECTOR	2	PA; SP; QL
SIMPONI SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	2	PA; SP; QL
SIMULECT	3	
sirolimus oral	1	SP
SKYRIZI INTRAVENOUS	2	PA; SP
SKYRIZI PEN	2	PA; SP; QL
SKYRIZI SUBCUTANEOUS	2	PA; SP; QL
SOTYKTU	E	SP
SPEVIGO	3	PA; SP; QL
STELARA INTRAVENOUS	2	PA; SP
STELARA SUBCUTANEOUS SOLUTION 45 MG/0.5ML	2	PA; SP; QL
STELARA SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	2	PA; SP; QL
SYNAGIS	2	PA; SP
tacrolimus oral	1	SP
TAKHZYRO	3	PA; SP
TALTZ	3	PA; SP; QL
temsirolimus	1	SP
THYMOGLOBULIN	3	
TORISEL	3	SP
TREMFYA	2	PA; SP; QL
TREXALL	3	
UPLIZNA	3	PA; SP
VARIZIG INTRAMUSCULAR SOLUTION	3	PA
WINRHO SDF	2	SP

Drug Name	Drug Tier	Notes
XATMEP	3	
XELJANZ	2	PA; SP; QL
XELJANZ XR	2	PA; SP; QL
XEMBIFY	3	PA; SP
ZINPLAVA	3	
ZORTRESS	3	SP
Immunological Agents - Drugs for Vaccination		
ACTHIB	\$0	
ADACEL INTRAMUSCULAR SUSPENSION 5-2-15.5 LF-MCG/0.5	\$0	
AFLURIA QUADRIVALENT INTRAMUSCULAR SUSPENSION	\$0	
AFLURIA QUADRIVALENT INTRAMUSCULAR SUSPENSION PREFILLED SYRINGE 0.5 ML	\$0	
BCG VACCINE INJECTION SOLUTION RECONSTITUTED	E	
BEXSERO	\$0	
BIOTHRAX	E	
BOOSTRIX INTRAMUSCULAR SUSPENSION 5-2.5-18.5 LF-MCG/0.5	\$0	
BOOSTRIX INTRAMUSCULAR SUSPENSION PREFILLED SYRINGE	\$0	
COMIRNATY	\$0	
DAPTACEL INTRAMUSCULAR SUSPENSION 23-15-5	\$0	
DENGVAXIA	E	

For more information regarding the tiers and designations in this drug list, please see the *Reading your formulary* section on page 6 of this booklet.

Drug Name	Drug Tier	Notes
ENGERIX-B INJECTION SUSPENSION 20 MCG/ML	\$0	
ENGERIX-B INJECTION SUSPENSION PREFILLED SYRINGE	\$0	
FLUAD QUADRIVALENT	\$0	
FLUARIX QUADRIVALENT INTRAMUSCULAR SUSPENSION PREFILLED SYRINGE	\$0	
FLUBLOK QUADRIVALENT	\$0	
FLUCELVAX QUADRIVALENT	\$0	
FLULAVAL QUADRIVALENT INTRAMUSCULAR SUSPENSION PREFILLED SYRINGE	\$0	
FLUZONE HIGH- DOSE QUADRIVALENT	\$0	
FLUZONE QUADRIVALENT INTRAMUSCULAR SUSPENSION , 0.5 ML	\$0	
FLUZONE QUADRIVALENT INTRAMUSCULAR SUSPENSION PREFILLED SYRINGE 0.5 ML	\$0	
GARDASIL 9	\$0	
HAVRIX INTRAMUSCULAR SUSPENSION 1440 EL U/ML, 720 EL U/0.5ML	\$0	

Drug Name	Drug Tier	Notes
HEPLISAV-B INTRAMUSCULAR SOLUTION PREFILLED SYRINGE	\$0	
HIBERIX INJECTION	\$0	
IMOVAX RABIES INTRAMUSCULAR SUSPENSION RECONSTITUTED	E	
INFANRIX	\$0	
IPOL INJECTION INJECTABLE	\$0	
IXIARO	E	
JANSSEN COVID-19 VACCINE	\$0	
MENACTRA INTRAMUSCULAR SOLUTION	\$0	
MENQUADFI INTRAMUSCULAR SOLUTION	\$0	
MENVEO	\$0	
M-M-R II INJECTION	\$0	
NOVAVAX COVID-19 VACCINE	\$0	
PEDIARIX INTRAMUSCULAR SUSPENSION PREFILLED SYRINGE	\$0	
PEDVAX HIB INTRAMUSCULAR SUSPENSION	\$0	
PENTACEL INTRAMUSCULAR SUSPENSION RECONSTITUTED	\$0	
PFIZER COVID-19 VAC BIVAL 5-11	\$0	
PFIZER COVID-19 VAC BIVALENT	\$0	
PNEUMOVAX 23	\$0	
PREHEVBRIO	\$0	
PREVNAR 13	\$0	

For more information regarding the tiers and designations in this drug list, please see the *Reading your formulary* section on page 6 of this booklet.

Drug Name	Drug Tier	Notes
PREVNAR 20	\$0	
PRIORIX	\$0	
PROQUAD SUBCUTANEOUS SUSPENSION RECONSTITUTED	\$0	
QUADRACEL INTRAMUSCULAR SUSPENSION	\$0	
RABAVERT	E	
RECOMBIVAX HB INJECTION SUSPENSION 10 MCG/ML, 40 MCG/ML, 5 MCG/0.5ML	\$0	
RECOMBIVAX HB INJECTION SUSPENSION PREFILLED SYRINGE	\$0	
ROTARIX	\$0	
ROTATEQ ORAL SOLUTION	\$0	
SHINGRIX INTRAMUSCULAR SUSPENSION RECONSTITUTED 50 MCG/0.5ML	\$0	
SPIKEVAX COVID-19 VACCINE	\$0	
STAMARIL	E	
TDVAX	\$0	
TENIVAC INTRAMUSCULAR INJECTABLE 5-2 LFU	\$0	
TETANUS- DIPHtheria TOXoids TD	\$0	
TRUMENBA	\$0	
TWINRIX INTRAMUSCULAR SUSPENSION PREFILLED SYRINGE	\$0	

Drug Name	Drug Tier	Notes
TYPHIM VI INTRAMUSCULAR SOLUTION 25 MCG/0.5ML	E	
TYPHIM VI INTRAMUSCULAR SOLUTION PREFILLED SYRINGE	E	
VAQTA INTRAMUSCULAR SUSPENSION 25 UNIT/0.5ML, 50 UNIT/ML	\$0	
VARIVAX	\$0	
VAXCHORA	E	
VAXELIS	\$0	
VAXNEUVANCE	\$0	
VIVOTIF	E	
YF-VAX SUBCUTANEOUS INJECTABLE	E	
Inflammatory Bowel Disease Agents		
ana-lex	E	
ANALPRAM HC EXTERNAL	E	
ANALPRAM HC SINGLES EXTERNAL	E	
ANALPRAM-HC EXTERNAL CREAM	3	
ANALPRAM-HC EXTERNAL LOTION	E	
anucort-hc	E	
ANUSOL-HC EXTERNAL	3	
ANUSOL-HC RECTAL SUPPOSITORY	E	
APRISO	1	
ASACOL HD	E	
AZULFIDINE	3	
AZULFIDINE EN-TABS	3	
balsalazide disodium	1	

For more information regarding the tiers and designations in this drug list, please see the *Reading your formulary* section on page 6 of this booklet.

Drug Name	Drug Tier	Notes
budesonide er oral tablet extended release 24 hour	1	
budesonide oral	1	
budesonide rectal	1	
CANASA	E	
COLAZAL	3	
CORTENEMA	3	
CORTIFOAM EXTERNAL	3	
DELZICOL	E	
DIPENTUM	E	
HEMMOREX-HC	E	
hydrocortisone (perianal)	1	
hydrocortisone ace-pramoxine external cream 1-1 %	1	
hydrocortisone acetate rectal	E	
hydrocortisone rectal enema	1	
hydrocort-pramoxine (perianal)	E	
LIALDA	1	
lidocaine-hydrocort (perianal)	E	
LIDOCAINE-HYDROCORTISONE ACE RECTAL GEL	E	
lidocaine-hydrocortisone ace rectal kit	E	
LIDOCORT EXTERNAL	E	
mesalamine er oral capsule 500 mg	1	
mesalamine er oral capsule 0.375 gm	E	
mesalamine oral capsule delayed release 400 mg	1	

Drug Name	Drug Tier	Notes
mesalamine oral tablet delayed release	E	
mesalamine rectal	1	
mesalamine-cleanser	1	
ORTIKOS	E	
PENTASA ORAL CAPSULE EXTENDED RELEASE 250 MG	3	
PENTASA ORAL CAPSULE EXTENDED RELEASE 500 MG	E	
PROCORT EXTERNAL	E	
PROCTOCORT EXTERNAL	3	
PROCTOCORT RECTAL SUPPOSITORY	E	
PROCTOFOAM HC EXTERNAL	2	
procto-med hc external	1	
procto-pak external	1	
proctosol hc external	1	
proctozone-hc external	1	
ROWASA RECTAL	3	
SFROWASA	2	
sulfasalazine oral	1	
TARPEYO	E	SP
UCERIS	3	
Metabolic Bone Disease Agents - Drugs for Osteoporosis		
ACTONEL ORAL TABLET 150 MG, 35 MG	3	QL
alendronate sodium oral solution	1	
alendronate sodium oral tablet 10 mg, 5 mg	1	

For more information regarding the tiers and designations in this drug list, please see the *Reading your formulary* section on page 6 of this booklet.

Drug Name	Drug Tier	Notes
alendronate sodium oral tablet 35 mg, 70 mg	1	QL
ATELVIA	3	QL
BINOSTO	E	
calcitonin (salmon) injection	1	
calcitonin (salmon) nasal	1	QL
EVENITY	3	PA; SP; QL
FORTEO SUBCUTANEOUS SOLUTION PEN-INJECTOR 600 MCG/2.4ML	E	SP
FOSAMAX ORAL TABLET 70 MG	3	QL
FOSAMAX PLUS D	E	
ibandronate sodium intravenous solution 3 mg/3ml	1	QL
ibandronate sodium oral	1	QL
MIACALCIN INJECTION	3	
pamidronate disodium intravenous solution	1	SP
PROLIA SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	2	PA; SP; QL
RECLAST	3	SP
risedronate sodium oral tablet 150 mg, 35 mg	1	QL
risedronate sodium oral tablet 30 mg, 5 mg	1	
risedronate sodium oral tablet delayed release	1	QL
TERIPARATIDE (RECOMBINANT)	2	PA; SP
TYMLOS	2	PA; SP
XGEVA	2	PA; SP

Drug Name	Drug Tier	Notes
zoledronic acid intravenous concentrate	1	SP
zoledronic acid intravenous solution	1	SP
Metabolic Bone Disease Agents - Other		
calcitriol oral	1	
cinacalcet hcl	1	PA
doxercalciferol oral	E	
paricalcitol	1	
PARSABIV	3	SP
RAYALDEE	3	
ROCALTROL	3	
SENSIPAR	3	PA
ZEMPLAR INTRAVENOUS	3	
ZEMPLAR ORAL CAPSULE 1 MCG, 2 MCG	3	
Miscellaneous Therapeutic Agents		
3232a infant formula	E	
ACACIA SUBCUTANEOUS	E	
ACCU-CHEK TENDER 1 INFUSION	E	
ACCU-CHEK ULTRAFLEX INF SET	E	
ACTIFOAM COLLAGEN SPONGE	E	
ACTIVESSENTIALS/C ALCIUM	E	
ACUNOL	E	
ADAKVEO	3	PA; SP
ADULT AEROSOL MASK	E	
AERIVA CONCENTRATOR NEBULIZER	E	

For more information regarding the tiers and designations in this drug list, please see the *Reading your formulary* section on page 6 of this booklet.

Drug Name	Drug Tier	Notes
AEROCHAMBER PLUS FLO-VU	2	
ALCOHOL PREP PADS PAD , 70 %	3	
ALCOHOL PREP PADS SHEET 70 %	3	
ALDER	E	
AMERICAN BEECH	E	
AMERICAN COCKROACH	E	
AMERICAN ELM	E	
AMINOPRMS	E	
ANDEXXA INTRAVENOUS SOLUTION RECONSTITUTED 200 MG	E	
APP SLIM RMS	E	
AQINJECT PEN NEEDLE	\$0	
ARIDOL INHALATION KIT 0 & 5 & 10 & 20 & 40 MG	E	
ARIZONA CYPRESS	E	
ARTISS EXTERNAL SOLUTION	3	
asilnasalrms	E	
ASPARTAME (FOR COMPOUNDING)	E	
ASPARTAME (NUTRASWEET)	E	
AUM INSULIN SAFETY PEN NEEDLE	\$0	
AUM MINI INSULIN PEN NEEDLE	\$0	
AUM PEN NEEDLE	\$0	
AUM READYGARD DUO PEN NEEDLE	\$0	
AUM SAFETY PEN NEEDLE	\$0	
AUTOSOFT 30 INFUSION SET	E	

Drug Name	Drug Tier	Notes
AUTOSOFT 90 INFUSION SET	E	
AUTOSOFT XC INFUSION SET	E	
AVAILNEX	E	
AVITENE	E	
AVITENE FLOUR	E	
AXONA	E	
BABY'S BIG SUPPORT	E	
BAHIA	E	
BALD CYPRESS	E	
BAYBERRY (WAX MYRTLE)	E	
BD AUTOSHIELD DUO PEN NEEDLES	\$0	
BD ECLIPSE LUER-LOK NEEDLE	3	
BD ECLIPSE NEEDLE 25G X 1-1/2" , 25G X 5/8"	3	
BD SHARPS COLLECTOR	E	
BD ULTRA-FINE PEN NEEDLES	\$0	
BERMUDA GRASS SUBCUTANEOUS	E	
BINAXNOW COVID-19 AG HOME TEST	E	
BOTOX	2	PA; Non-Cosmetic; SP
BREATHE COMFORT CHAMBER/ADULT	E	
BREATHE COMFORT CHAMBER/CHILD	E	
BREATHE COMFORT HUMIDIFIER	E	
BREATHE EASE HUMIDIFIER	E	
BREATHE EASE NEB MASK/CHILD	E	

For more information regarding the tiers and designations in this drug list, please see the *Reading your formulary* section on page 6 of this booklet.

Drug Name	Drug Tier	Notes
BREATHE EASE NEB MASK/INFANT	E	
BRIDION INTRAVENOUS SOLUTION 500 MG/5ML	E	
BRIDION SOLUTION 200 MG/2ML INTRAVENOUS	3	
BRIDION SOLUTION 200 MG/2ML INTRAVENOUS	E	
BROME	E	
BYLVAY	3	PA; SP
BYLVAY (PELLETS)	3	PA; SP
CALIFORNIA PEPPER TREE	E	
CAMINO PRO COMPLETE/GLYTACT IN	E	
CAREPOINT SAFETY 1ST NEEDLE	3	
CARESTART COVID-19 HOME TEST	E	
CARETOUCH 2 CPAP HOSE HANGER	E	
CARETOUCH CPAP & BIPAP HOSE	E	
CARETOUCH CPAP MASK WIPES	E	
CARETOUCH CPAP PRE-WASH SOLN	E	
CARETOUCH CPAP TUBE BRUSH	E	
CARETOUCH HYPODERMIC NEEDLE 22G X 1" , 26G X 1" , 27G X 1-1/2"	3	
CARETOUCH UNIVERSL CPAP FILTER	E	

Drug Name	Drug Tier	Notes
CAT HAIR EXTRACT SUBCUTANEOUS	E	
CATTLE EPITHELIUM	E	
CAYA	\$0	
CEDAR ELM	E	
CLEARDETECT COVID-19 AG HOME	E	
CLINITEST RAPID COVID-19 TEST	E	
COCKLEBUR	E	
coenzyme q10 oral capsule 100 mg, 50 mg	E	
coenzyme q-10 oral capsule 200 mg, 30 mg	E	
COLCIGEL	E	
COLD-EEZE MOUTH/THROAT LOZENGE	E	
COLD-EEZE PLUS COLD & FLU	E	
COLD-EEZE PLUS DEFENSE MOUTH/THROAT	E	
COMPRESSOR NEBULIZER	E	
CONDOMS	E	
coq10 oral capsule 200 mg	E	
CORN POLLEN	E	
CORTROSYN	E	
cosyntropin injection	E	
COVID-19 AT HOME ANTIGEN TEST	E	
COVID-19 AT-HOME TEST	E	
COVID-19 SPECIMEN COLLECTION	E	
DANDELION	E	
deferoxamine mesylate	1	
DEPLIN 15	E	
DEPLIN 7.5	E	

For more information regarding the tiers and designations in this drug list, please see the *Reading your formulary* section on page 6 of this booklet.

Drug Name	Drug Tier	Notes
DESFERAL INJECTION SOLUTION RECONSTITUTED 500 MG	3	
desflurane	E	
dexmedetomidine hcl in nacl intravenous solution 200-0.9 mcg/50ml-%	1	
dexmedetomidine hcl in nacl solution 200 mcg/50ml intravenous	1	
dexmedetomidine hcl in nacl solution 200 mcg/50ml intravenous	E	
dexmedetomidine hcl in nacl solution 400 mcg/100ml intravenous	1	
dexmedetomidine hcl in nacl solution 400 mcg/100ml intravenous	E	
dexmedetomidine hcl in nacl solution 80 mcg/20ml intravenous	1	
dexmedetomidine hcl in nacl solution 80 mcg/20ml intravenous	E	
dexmedetomidine hcl intravenous solution 200 mcg/2ml	1	
DIATRUST COVID-19 HOME TEST	E	
DIGIFAB	3	
DOG EPITHELIUM	E	
DOG FENNEL	E	
DOJOLVI	E	
DROPSAFE ALCOHOL PREP	3	
DUROLANE INTRA-ARTICULAR	2	PA; SP

Drug Name	Drug Tier	Notes
DUST MITE MIXED ALLERGEN EXT SUBCUTANEOUS	E	
DYSPORT	3	PA; SP
EASIVENT	2	
EASTERN COTTONWOOD	E	
EC-RX DHEA	E	
ECZEMOL	E	
ELLUME COVID-19 HOME TEST	E	
EMBRACE PEN NEEDLES 30G X 5 MM , 30G X 8 MM , 31G X 6 MM , 31G X 8 MM , 32G X 4 MM	\$0	
ENCARE VAGINAL SUPPOSITORY	E	
ENDARI	3	PA
ENDO AVITENE	E	
ENFAGROW NEUROPRO TODDLER	E	
ENFAGROW PREMIUM TODDLER	E	
ENFAGROW PREMIUM TODDLER GENTL	E	
ENFAMIL GENTLEASE ORAL LIQUID	E	
ENFAMIL GENTLEASE ORAL POWDER	E	
ENFAMIL INFANT ORAL POWDER	E	
ENFAMIL NEUROPRO ENFACARE ORAL LIQUID	E	
ENFAMIL NEUROPRO GENTLEASE ORAL POWDER	E	

For more information regarding the tiers and designations in this drug list, please see the *Reading your formulary* section on page 6 of this booklet.

Drug Name	Drug Tier	Notes
ENFAMIL NEUROPRO INFANT ORAL PACKET	E	
ENFAMIL NEUROPRO INFANT ORAL POWDER	E	
ENFAMIL NEUROPRO SENSITIVE	E	
ENFAMIL NUTRAMIGEN LIPIL ORAL LIQUID	E	
ENFAMIL NUTRAMIGEN ORAL LIQUID	E	
ENFAMIL NUTRAMIGEN PROBIOT LGG	E	
ENLYTE	E	
ENOVARX-AMITRIPTYLINE	E	
ENSURE HIGH PROTEIN ORAL PUDDING	E	
ENSURE ORIGINAL	E	
ENTERAGAM	E	
ENU NUTRITIONAL SHAKE	E	
ENU PRO3 PLUS	E	
EPISIL	E	
EQUACARE JR	E	
ergoloid mesylates oral	1	
ESSENTIAL CARE JR	E	
EUFLEXXA INTRA-ARTICULAR SOLUTION PREFILLED SYRINGE	2	PA; SP
EXTENDED INFUSION SET 32"/9MM	E	
FASTEP COVID-19 ANTIGEN TEST	E	
FC2 FEMALE CONDOM	\$0	

Drug Name	Drug Tier	Notes
FEMCAP	\$0	
FIRDAPSE	E	SP
FIRE ANT	E	
fish oil oral capsule 1000 mg	E	
FLEXICHAMBER	2	
FLEXICHAMBER ADULT MASK/SMALL	2	
FLEXICHAMBER CHILD MASK/LARGE	2	
FLEXICHAMBER CHILD MASK/SMALL	2	
FLOWFLEX COVID-19 AG HOME TEST	E	
FORANE	E	
formaldehyde external solution 10 %	E	
formaldehyde solution 37 % external (rx)	1	
formaldehyde solution 37 % external (rx)	E	
FOSTEUM PLUS	E	
GELFILM EXTERNAL	E	
GEL-FLOW	E	
GEL-FLOW NT	E	
GELFOAM	E	
GELFOAM COMPRESSED SIZE 100	E	
GELFOAM DENTAL PACK SIZE 4	E	
GELFOAM SPONGE	E	
GELFOAM SPONGE SIZE 100	E	
GELFOAM SPONGE SIZE 200	E	
GELFOAM SPONGE SIZE 50	E	
GELFOAM-JMI POWDER	E	

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Drug Name	Drug Tier	Notes
GELFOAM-JMI SPONGE	E	
GELSYN-3	2	PA; SP
GELX	E	
GENABIO COVID-19 RAPID TEST	E	
GERMAN COCKROACH	E	
GIVLAARI	3	PA; SP
GLEOLAN	E	
glutaraldehyde external	1	
GLYTACTIN BETTERMILK 15 PACKET ORAL	E	
GLYTACTIN BETTERMILK DE-LITE	E	
GLYTACTIN BUILD 10PE	E	
GLYTACTIN BUILD 20/20	E	
GLYTACTIN BUILD 20/20 PKU	E	
GLYTACTIN BURST	E	
GLYTACTIN COMPLETE 10PE	E	
GLYTACTIN RESTORE 10	E	
GLYTACTIN RESTORE 5	E	
GLYTACTIN RESTORE LITE 10	E	
GLYTACTIN RESTORE LITE 10PE	E	
GLYTACTIN RTD 10 LIQUID ORAL	E	
GLYTACTIN RTD 15	E	
GLYTACTIN RTD LITE 15 LIQUID ORAL	E	
GLYTACTIN SWIRL 15	E	
GLYTACTIN SWIRL 15PE	E	

Drug Name	Drug Tier	Notes
GOLDENROD	E	
GRASTEK	3	PA; QL
HACKBERRY	E	
HIBICLENS	E	
HOMACTIN AA PLUS	E	
HOME PAP KIT	E	
HORSE EPITHELIUM	E	
HUMATROPEN FOR 12MG	E	
HUMATROPEN FOR 24MG	E	
HUMATROPEN FOR 6MG	E	
HYALGAN	E	SP
HYMOVIS	E	SP
IGALMI	3	PA
IHEALTH COVID-19 RAPID TEST	E	
IMUBOLIC	E	
INDICAID COVID-19 RAPID TEST	E	
INSPIREASE RESERVOIR BAGS	2	
INSULIN PEN NEEDLES	\$0	
INTELISWAB COVID-19 RAPID TEST	E	
INTERCEED	E	
IOSAT	E	
isoflurane	E	
ISOVACTIN AA PLUS ORAL PACKET	E	
JOHNSON GRASS	E	
JUNE GRASS POLLEN STANDARDIZED	E	
KERENDIA	3	PA; QL
KETAMINE HCL SUBLINGUAL	E	

For more information regarding the tiers and designations in this drug list, please see the *Reading your formulary* section on page 6 of this booklet.

Drug Name	Drug Tier	Notes
KETAMINE HCL- SODIUM CHLORIDE INTRAVENOUS SOLUTION PREFILLED SYRINGE 50-0.9 MG/5ML-%	E	
KETOCAL 4:1 LQ MULTI-FIBER	E	
KETOVIE	E	
KETOVIE 4:1 LIQUID ORAL	E	
KETOVIE PEPTIDE	E	
KOCHIA	E	
KORSUVA	3	PA; SP
LENSCALE	E	
LIMBREL	E	
LIMBREL250	E	
LIMBREL500	E	
LIQUID HOPE PEPTIDE	E	
LIVMARLI	E	SP
l-methylfolate forte	E	
l-methylfolate-algae oral capsule 15-90.314 mg	E	
LORMATE	E	
LUMINOPIA ONE	3	
MACRILEN	E	
MEADOW FESCUE GRASS POLLEN	E	
MELALEUCA	E	
MESQUITE	E	
METHACHOLINE CHLORIDE INHALATION	E	
methergine oral	1	QL

Drug Name	Drug Tier	Notes
METHOHEXITAL SODIUM INTRAVENOUS SOLUTION PREFILLED SYRINGE 100 MG/10ML	E	
methylergonovine maleate oral	1	QL
METOPIRONE	E	
MINIMED PUMP RESERVOIR 3ML	E	
MITE (D. FARINAE) SUBCUTANEOUS	E	
MITE (D. PTERONYSSINUS) SUBCUTANEOUS	E	
MIXED FEATHERS	E	
MIXED RAGWEED	E	
MONOVISC	E	SP
MORCIN	E	
MOUNTAIN CEDAR	E	
MOUSE EPITHELIUM	E	
MUCOTROL	E	
MUGARD	E	
MUGWORT	E	
MYOBLOC	3	PA; SP
NEBULIZER MASK ADULT	E	
NEBULIZER MASK CHILD	E	
NEODOT THERMOMETER	E	
NICAPRIN	E	
NORDIPEN 5 INJECTION DEVICE	E	
NOVOFINE AUTOCOVER PEN NEEDLE	\$0	
NOVOFINE PEN NEEDLE	\$0	

For more information regarding the tiers and designations in this drug list, please see the *Reading your formulary* section on page 6 of this booklet.

Drug Name	Drug Tier	Notes
NOVOFINE PLUS PEN NEEDLE	\$0	
ODACTRA	3	PA; QL
odorless coated fish oil	E	
OLIVE TREE	E	
OMEGA MONOPURE DHA EC	E	
omega-3 microgel	E	
OMNIPOD 5 G6 INTRO (GEN 5)	2	
OMNIPOD 5 G6 POD (GEN 5)	2	
ON/GO COVID-19 ANTIGEN TEST	E	
ON/GO ONE COVID-19 HOME TEST	E	
OPTIONS GYNOL II CONTRACEPTIVE	\$0	
ORALAIR	3	PA; QL
ORALAIR ADULT STARTER PACK	3	PA; QL
ORALAIR CHILDRENS STARTER PACK	3	PA; QL
ORAMAGICRX	E	
ORCHARD GRASS POLLEN	E	
ORTHOVISC INTRA-ARTICULAR SOLUTION PREFILLED SYRINGE	E	SP
OXBRYTA	E	SP
PALFORZIA	E	SP
PARI ALTERA NEBULIZER HANDSET	E	
PARI PRONEB MAX LC PLUS	E	
PARI PRONEB MAX LC SPRINT	E	
PARI SMARTMASK BABY/ELBOW	E	

Drug Name	Drug Tier	Notes
PARI TREK S COMBO PACK	E	
PARI VORTEX ADULT MASK	E	
PEDIATRIC COMPRESSOR NEBULIZER	E	
PH STRIPS	E	
PHEXXI	E	
PHOTREXA-PHOTREXA VISCOUS KIT	3	
PILOT COVID-19 AT-HOME TEST	E	
PKU EASY MICROTABS	E	
PKU EXPLORE10	E	
PKU EXPLORE5	E	
PKU SPHERE 20 ORAL PACKET	E	
pku trio	E	
PRAXBIND	E	
PRECEDEX INTRAVENOUS SOLUTION 200 MCG/2ML	3	
PRECEDEX INTRAVENOUS SOLUTION 200 MCG/50ML, 400 MCG/100ML, 80 MCG/20ML	E	
PRECEDEX SOLUTION 1000 MCG/250ML INTRAVENOUS	3	
PRECEDEX SOLUTION 1000 MCG/250ML INTRAVENOUS	E	
PREKUNIL	E	
PRID	E	
PRIVET	E	

For more information regarding the tiers and designations in this drug list, please see the *Reading your formulary* section on page 6 of this booklet.

Drug Name	Drug Tier	Notes
PRO-CRITIC	E	
PROLEVA	E	
PRONEB ULTRA FILTER SET	E	
PROSOURCE NO CARB ORAL LIQUID	E	
PROVOCHOLINE INHALATION KIT	E	
PSORIZIDE FORTE	E	
PSORIZIDE ULTRA	E	
PURAMINO DHA/ARA	E	
QUEEN PALM	E	
QUICKVUE AT-HOME COVID-19 TEST	E	
RABBIT EPITHELIUM	E	
RADIOGARDASE	3	
RAGWITEK	3	PA; QL
RAYA SURE PEN NEEDLE	\$0	
RED MAPLE	E	
RED MULBERRY	E	
RED TOP GRASS POLLEN	E	
RETHYMIC	E	SP
RHEUMATE	E	
ROUGH MARSH ELDER	E	
RUSSIAN THISTLE	E	
RYPLAZIM	3	PA; SP
SAFETY PEN NEEDLES	\$0	
sevoflurane	E	
SHAGBARK HICKORY	E	
SHARPS COLLECTOR	E	
SHARPS CONTAINER	E	
SHEEP SORREL	E	
SHORT RAGWEED POLLEN EXT	E	
SILATRIX	E	

Drug Name	Drug Tier	Notes
SILTREX	E	
SKYCLARYS	E	SP
SOLESTA	2	SP
SORBITOL IRRIGATION SOLUTION 3 %	E	
sorbitol-mannitol	E	
SORREL/DOCK MIX	E	
SPEEDGEL RX	E	
SPEEDY SWAB COVID-19 ANTIGEN	E	
SPINRAZA	3	PA; SP
SPINY PIGWEED	E	
STREPTOCOCCINUM 30C	E	
SUPARTZ FX	E	SP
SUPRANE	E	
SURGICEL SNOW 1"X2"	E	
SURGICEL SNOW 2"X4"	E	
SURGICEL SNOW 4"X4"	E	
SWEET GUM	E	
SWEET VERNAL GRASS POLLEN	E	
SYNOJOYNT	E	SP
SYNVISC INTRA-ARTICULAR SOLUTION PREFILLED SYRINGE	E	SP
SYNVISC ONE INTRA-ARTICULAR SOLUTION PREFILLED SYRINGE	E	SP
SYRINGE AVITENE	E	
T:SLIM X2 3ML CARTRIDGE	E	
TACHOSIL	3	
TALL RAGWEED	E	
TAVNEOS	E	SP

For more information regarding the tiers and designations in this drug list, please see the *Reading your formulary* section on page 6 of this booklet.

Drug Name	Drug Tier	Notes
terrell	E	
THROMBI-GEL 10	E	
THROMBI-GEL 100	E	
THROMBI-GEL 40	E	
THROMBI-PAD	E	
THYROGEN INTRAMUSCULAR SOLUTION RECONSTITUTED 0.9 MG	2	PA; SP
TIMOTHY GRASS POLLEN ALLERGEN SUBCUTANEOUS SOLUTION 100000 BAU/ML	E	
TISSEEL EXTERNAL KIT	3	
TOBAKIENT	E	
TRANZGEL	E	
TRAUMEEL EXTERNAL OINTMENT	E	
TRICHOPHYTON MENTAGROPHYTES	E	
TRILURON	E	SP
TRUSTEEL INFUSION SET	E	
TYLACTIN BUILD 20PE TYR	E	
TYLACTIN COMPLETE 15 PE	E	
TYLACTIN RESTORE 10	E	
TYLACTIN RESTORE 5PE	E	
TYLACTIN RTD 15	E	
TYROS 2	E	
ucd trio	E	
ULTANE	E	
ULTRA HERS RX	E	
ULTRA HIS	E	

Drug Name	Drug Tier	Notes
ULTRA PCOS	E	
ULTRAFOAM SPONGE 2X6.25X7CM	E	
ULTRAFOAM SPONGE 8X12.5X1CM	E	
ULTRAFOAM SPONGE 8X12.5X3CM	E	
ULTRAFOAM SPONGE 8X25X1CM	E	
ULTRAFOAM SPONGE 8X6.25X1CM	E	
VARISOFT INFUSION SET	E	
VASCULERA	E	
VCF VAGINAL CONTRACEPTIVE VAGINAL FILM	\$0	
VCF VAGINAL CONTRACEPTIVE VAGINAL FOAM	\$0	
vcf vaginal contraceptive vaginal gel	\$0	
VERIFINE INSULIN PEN NEEDLE	\$0	
VILACTIN AA PLUS	E	
VILTEPSO	E	SP
VISTOGARD	3	
VITRASE INJECTION SOLUTION	3	
VORTEX VALVED HOLDING CHAMBER	2	
VYVGART	3	PA; SP
WESTAB MAX	E	
WESTERN JUNIPER	E	
WHITE BIRCH	E	
WHITE MULBERRY	E	
WHITE OAK	E	
WHITE PINE	E	
WIDE-SEAL DIAPHRAGM 60	\$0	

For more information regarding the tiers and designations in this drug list, please see the *Reading your formulary* section on page 6 of this booklet.

Drug Name	Drug Tier	Notes
WIDE-SEAL DIAPHRAGM 65	\$0	
WIDE-SEAL DIAPHRAGM 70	\$0	
WIDE-SEAL DIAPHRAGM 75	\$0	
WIDE-SEAL DIAPHRAGM 80	\$0	
WIDE-SEAL DIAPHRAGM 85	\$0	
WIDE-SEAL DIAPHRAGM 90	\$0	
WIDE-SEAL DIAPHRAGM 95	\$0	
WONDR HEALTH OUTCOME BONUS	E	
XENOVIEW	E	
XEOMIN	3	PA; SP
XIAFLEX	2	PA; SP
XYZBAC	E	
XYZMUNE	E	
YELLOW DOCK	E	
ZEEL ARTHRITIS PAIN RELIEF EXTERNAL	E	
ZOKINVY	3	PA; SP; QL
ZYVEXOL	E	
Ophthalmic Agents - Drugs for Eye Allergy, Infection and Inflammation		
ACULAR	3	
ACULAR LS	3	
ACUVAIL	E	
ALAWAY	E	
ALOCRIAL	E	
ALOMIDE SOLUTION 0.1 % OPHTHALMIC	3	
ALREX	E	
AZASITE	3	

Drug Name	Drug Tier	Notes
azelastine hcl ophthalmic	1	
bacitracin ophthalmic	1	
bepotastine besilate	E	
BEPREVE	E	
BESIVANCE	3	
BETADINE OPHTHALMIC PREP	3	
bromfenac sodium (once-daily)	1	QL
BROMSITE	E	
CILOXAN OPHTHALMIC OINTMENT	E	
ciprofloxacin hcl ophthalmic	1	
cromolyn sodium ophthalmic	1	
dexamethasone sodium phosphate ophthalmic	1	
DEXTENZA	E	SP
DEXYCU	E	
diclofenac sodium ophthalmic	1	
difluprednate	1	
DUREZOL	E	
epinastine hcl	1	
erythromycin ophthalmic	1	
eye itch relief	E	
EYSUVIS	3	PA
FLAREX	3	
fluorometholone ophthalmic	1	
flurbiprofen sodium	1	
FML FORTE	3	
FML LIQUIFILM	3	
gatifloxacin ophthalmic	1	

For more information regarding the tiers and designations in this drug list, please see the *Reading your formulary* section on page 6 of this booklet.

Drug Name	Drug Tier	Notes
gentamicin sulfate ophthalmic solution	1	
ILEVRO	E	
ILUVIEN INTRAVITREAL	E	SP
INVELTYS	3	
ketorolac tromethamine ophthalmic	1	
ketotifen fumarate ophthalmic	E	
KLARITY-A	E	
KLARITY-L	E	
levofloxacin ophthalmic	1	
LOTEMAX	E	
LOTEMAX SM	3	
loteprednol etabonate ophthalmic gel	1	QL
loteprednol etabonate ophthalmic suspension	E	
MAXIDEX	3	
MAXITROL OPHTHALMIC OINTMENT	3	
MAXITROL OPHTHALMIC SUSPENSION 0.1 %	3	
MITOSOL	3	
moxifloxacin hcl (2x day)	1	
moxifloxacin hcl ophthalmic solution	1	
NATACYN	2	
neomycin-polymyxin-dexameth ophthalmic ointment	1	
neomycin-polymyxin-dexameth ophthalmic suspension 3.5-10000-0.1	1	
neomycin-polymyxin-hc ophthalmic suspension 3.5-10000-1	1	

Drug Name	Drug Tier	Notes
NEVANAC	E	
OCUFLOX	3	
ofloxacin ophthalmic	1	
olopatadine hcl solution 0.1 % ophthalmic (otc)	E	
olopatadine hcl solution 0.1 % ophthalmic (rx)	1	
olopatadine hcl solution 0.2 % ophthalmic (otc)	E	
olopatadine hcl solution 0.2 % ophthalmic (rx)	1	
OZURDEX INTRAVITREAL	E	SP
PATADAY OPHTHALMIC SOLUTION 0.1 %, 0.2 %	E	
POVIDONE-IODINE OPHTHALMIC	3	
PRED FORTE	3	
PRED MILD	3	
PREDNISOL ACE-MOXIFLOX-BROMFEN	E	
prednisolone acetate ophthalmic	1	
PREDNISOLONE ACETATE P-F	E	
PREDNISOLONE ACETATE-NEPAFENAC	E	
PREDNISOLONE ACET-MOXIFLOXACIN	E	
prednisolone sodium phosphate ophthalmic	1	
PREDNISOLON-GATIFLOX-BROMFENAC	E	
PREDNISOLON-MOXIFLOX-BROMFENAC OPHTHALMIC SOLUTION 1-0.5-0.075 %	E	

For more information regarding the tiers and designations in this drug list, please see the *Reading your formulary* section on page 6 of this booklet.

Drug Name	Drug Tier	Notes
PREDNISOLON- MOXIFLOX- NEPAFENAC	E	
PROLENSA	2	QL
RETISERT INTRAVITREAL	E	SP
sulfacetamide sodium ophthalmic	1	
TOBRADEX OPHTHALMIC OINTMENT	3	
TOBRADEX OPHTHALMIC SUSPENSION	E	
TOBRADEX ST	3	
tobramycin ophthalmic	1	
tobramycin- dexamethasone	1	
TOBREX OPHTHALMIC OINTMENT	3	
trifluridine ophthalmic	1	
TRIPLE PMB	E	
TRIPLE PMK	E	
TYRVAYA	3	PA; QL
UPNEEQ	3	PA
VIGAMOX	3	
XIPERE	E	
YUTIQ	E	SP
ZADITOR	E	
ZERVIATE	E	
ZIRGAN	3	
ZYMAXID	3	
Ophthalmic Agents - Drugs for Glaucoma		
acetazolamide er	1	
acetazolamide oral	1	
ALPHAGAN P OPHTHALMIC SOLUTION 0.1 %	2	

Drug Name	Drug Tier	Notes
ALPHAGAN P OPHTHALMIC SOLUTION 0.15 %	E	
apraclonidine hcl	1	
AZOPT	E	
betaxolol hcl ophthalmic	1	
BETIMOL	3	
BETOPTIC-S	E	
bimatoprost ophthalmic	1	QL
brimonidine tartrate ophthalmic	1	
brimonidine tartrate- timolol	1	
BRIMONIDINE- DORZOLAMIDE	E	
brinzolamide	1	
carteolol hcl	1	
COMBIGAN	E	
COSOPT	3	
COSOPT PF OPHTHALMIC SOLUTION 2-0.5 %	3	
dichlorphenamide	1	PA; SP; QL
DORZOLAMIDE HCL SOLUTION 2 % OPHTHALMIC	3	
dorzolamide hcl solution 2 % ophthalmic	1	
dorzolamide hcl-timolol mal	1	
dorzolamide hcl-timolol mal pf	1	
DURYSTA	E	
ISTALOL	3	
KEVEYIS	3	PA; SP; QL
latanoprost ophthalmic	1	
LATANOPROST- TIMOLOL MALEATE	E	

For more information regarding the tiers and designations in this drug list, please see the *Reading your formulary* section on page 6 of this booklet.

Drug Name	Drug Tier	Notes
levobunolol hcl ophthalmic solution 0.5 %	1	
LUMIGAN OPTHALMIC SOLUTION 0.01 %	2	QL
methazolamide oral	1	
PHOSPHOLINE IODIDE	E	
pilocarpine hcl ophthalmic solution 1 %, 2 %, 4 %	1	
RHOPRESSA	3	QL
ROCKLATAN	3	QL
SIMBRINZA	2	
tafluprost (pf)	1	QL
timolol maleate (once-daily)	1	
timolol maleate ophthalmic gel forming solution	E	
timolol maleate ophthalmic solution	1	
timolol maleate pf	1	
TIMOLOL-BRIMON-DORZOL-LATANOPR	E	
TIMOLOL-BRIMONIDINE-DORZOLAMID	E	
TIMOLOL-DORZOLAMID-LATANOPROST	E	
TIMOPTIC	E	
TIMOPTIC OCUDOSE	E	
TIMOPTIC-XE	E	
TRAVATAN Z	E	
travoprost (bak free)	1	QL
VUITY	E	
VYZULTA	E	
XALATAN	3	
XELPROS	3	ST; QL

Drug Name	Drug Tier	Notes
ZIOPTAN OPTHALMIC SOLUTION 0.0015 %	E	
Ophthalmic Agents - Drugs for Miscellaneous Eye Conditions		
AKTEN	3	
ALCAINE	3	
ALCON TEARS	E	
ALTACAINE	3	
altachlore	E	
ALTAFLUOR BENOX	E	
altafrin ophthalmic solution 10 %, 2.5 %	1	
artificial tears ophthalmic solution , 0.5-0.6 %	E	
atropine sulfate ophthalmic ointment	1	
ATROPINE SULFATE OPTHALMIC SOLUTION 0.01 %	E	
ATROPINE SULFATE OPTHALMIC SOLUTION 0.025 %, 0.05 %	3	
atropine sulfate ophthalmic solution 1 %	1	
bacitracin-polymyxin b ophthalmic ointment 500-10000 unit/gm	1	
bacitra-neomycin-polymyxin-hc	1	
BEOVU INTRAVITREAL SOLUTION PREFILLED SYRINGE	E	SP
BEVACIZUMAB INTRAVITREAL	2	SP
bimatoprost external	E	
BIO GLO	E	

For more information regarding the tiers and designations in this drug list, please see the *Reading your formulary* section on page 6 of this booklet.

Drug Name	Drug Tier	Notes
neomycin-bacitracin zn-polymyx	1	
neomycin-polymyxin-gramicidin ophthalmic solution 1.75-10000-.025	1	
neo-polycin	1	
neo-polycin hc	1	
OXERVATE	3	PA; SP; QL
phenylephrine hcl ophthalmic solution 10 %, 2.5 %	1	
polycin	1	
polymyxin b-trimethoprim	1	
POLYTRIM	3	
PREDNISOLONE-BROMFENAC OPHTHALMIC SOLUTION	E	
PREDNISOLONE-BROMFENAC OPHTHALMIC SUSPENSION 1-0.075 %	E	
PREDNISOLONE-BROMFENAC SUSPENSION 1-0.075 % OPHTHALMIC	3	
PREDNISOLONE-GATIFLOXACIN OPHTHALMIC SUSPENSION	E	
PREDNISOLONE-MOXIFLOXACIN	E	
proparacaine hcl ophthalmic	1	
proparacaine-fluorescein	E	
REFRESH RELIEVA	E	
REFRESH RELIEVA PF OPHTHALMIC SOLUTION 0.5-0.9 %	E	

Drug Name	Drug Tier	Notes
RESTASIS	1	PA
RESTASIS MULTIDOSE OPHTHALMIC EMULSION 0.05 %	2	PA
sodium chloride (hypertonic)	E	
sulfacetamide-prednisolone ophthalmic solution	1	
SUSVIMO (IMPLANT 1ST FILL)	3	PA; SP
SUSVIMO (IMPLANT REFILL)	3	PA; SP
SYFOVRE	E	SP
SYSTANE COMPLETE	E	
SYSTANE HYDRATION PF	E	
SYSTANE ULTRA	E	
SYSTANE ULTRA PF	E	
tetracaine hcl ophthalmic	1	
TOBRAMYCIN-VANCOMYCIN HCL	E	
tropicamide ophthalmic	E	
TROPICAMIDE-CYCLOPENTOLATE-PE SOLUTION 1-1-2.5 % OPHTHALMIC	3	
TROPICAMIDE-CYCLOPENTOLATE-PE SOLUTION 1-1-2.5 % OPHTHALMIC	E	
TROPICAMIDE-PHENYLEPHRINE SOLUTION 1-2.5 % OPHTHALMIC	3	
TROPICAMIDE-PHENYLEPHRINE SOLUTION 1-2.5 % OPHTHALMIC	E	

For more information regarding the tiers and designations in this drug list, please see the *Reading your formulary* section on page 6 of this booklet.

Drug Name	Drug Tier	Notes
TROPIC- PROPARACA-PE- KETOROLAC	E	
ultra fresh pm	E	
ultra lubricating eye drops	E	
ultra lubricating eye drops pf	E	
VABYSMO	3	PA; SP
VERKAZIA	E	
VISIONBLUE INTRAOCULAR	E	
VISUDYNE	3	SP
XIIDRA	2	PA
ZYLET	3	
Otic Agents - Drugs for Ear Conditions		
acetic acid otic	1	
CETRAXAL	3	ST
CIPRO HC	E	
CIPRODEX	E	
ciprofloxacin hcl otic	1	ST
ciprofloxacin- dexamethasone	1	
CIPROFLOXACIN- FLUOCINOLONE PF	E	
CLINERE EARWAX REMOVAL KIT OTIC SOLUTION	E	
cortic-nd	1	
CORTISPORIN-TC	3	
DERMOTIC	3	
flac	1	
fluocinolone acetonide otic	1	
hydrocortisone-acetic acid	1	
neomycin-polymyxin-hc otic	1	
ofloxacin otic	1	

Drug Name	Drug Tier	Notes
OTOVEL	E	
PRAMOTIC	3	
Respiratory Tract / Pulmonary Agents - Drugs for Allergies, Cough, Cold		
12 hour allergy-d	E	
12 hour nasal decongestant nasal	E	
12hr allergy & congestion	E	
12hr allergy relief	E	
24hr allergy & congestion reli	E	
24hr allergy relief	E	
ADRENALIN NASAL	E	
all day allergy d	E	
ALLEGRA ALLERGY ORAL TABLET 180 MG	E	
allergy (cetirizine)	E	
allergy 24hour indoor/outdoor	E	
allergy 24-hr	E	
allergy childrens oral liquid	E	
allergy childrens oral solution	E	
allergy childrens oral suspension	E	
allergy rel child (loratadine)	E	
allergy relief (cetirizine)	E	
allergy relief (loratadine)	E	
allergy relief cetirizine	E	
allergy relief d-12	E	
allergy relief oral capsule	E	

For more information regarding the tiers and designations in this drug list, please see the *Reading your formulary* section on page 6 of this booklet.

Drug Name	Drug Tier	Notes
allergy relief oral tablet 10 mg, 180 mg, 25 mg, 4 mg	E	
allergy relief/indoor/outdoor	E	
allergy relief/nasal decongest oral tablet extended release 12 hour	E	
allergy relief-d oral tablet extended release 12 hour	E	
antihistamine & nasal deconges	E	
APRODINE ORAL TABLET	E	
ASTEPRO CHILDRENS	E	
ASTEPRO NASAL SOLUTION 205.5 MCG/SPRAY	E	
azelastine hcl nasal	1	QL
azelastine-fluticasone	1	QL
banophen oral capsule 25 mg	E	
banophen oral tablet	E	
BECONASE AQ	E	
BENADRYL ALLERGY CHILDRENS ORAL LIQUID	E	
BENADRYL ALLERGY EXTRA STR	E	
benzonatate	1	
BRANTUSSIN DM	E	
carbinoxamine maleate oral solution	1	
carbinoxamine maleate oral tablet 4 mg	1	
carbinoxamine maleate oral tablet 6 mg	E	
cetirizine hcl oral solution 1 mg/ml	1	

Drug Name	Drug Tier	Notes
cetirizine hcl oral tablet	E	
cetirizine hcl oral tablet chewable 10 mg	E	
cetirizine-pseudoephedrine er	E	
chest congestion relief dm oral syrup	E	
chest congestion relief oral liquid	E	
chest congestion relief oral tablet	E	
chlorpheniramine maleate er	E	
CHLOR-TRIMETON ORAL TABLET	E	
CINQAIR	3	PA; SP
CLARINEX ORAL TABLET	E	
CLARINEX-D 12 HOUR	E	
CLARITIN ORAL TABLET	E	
CLARITIN REDITABS ORAL TABLET DISPERSIBLE 10 MG	E	
CLARITIN-D 24 HOUR	E	
clemastine fumarate oral syrup	E	
clemastine fumarate oral tablet 2.68 mg	1	
cold & flu relief daytime	E	
cold & sinus	E	
cold/flu daytime relief	E	
cough dm oral suspension extended release	E	
CUROSURF INTRATRACHEAL SUSPENSION 120 MG/1.5ML	3	
cvs allergy relief tablet dispersible 5 mg oral	E	

For more information regarding the tiers and designations in this drug list, please see the *Reading your formulary* section on page 6 of this booklet.

Drug Name	Drug Tier	Notes
cyproheptadine hcl oral	1	
DAYHIST ALLERGY 12 HOUR RELIEF	E	
daytime cold/flu relief oral capsule	E	
desloratadine oral tablet	E	
desloratadine oral tablet dispersible 5 mg	E	
dextromethorphan- guaifenesin oral syrup	E	
DICOPANOL FUSEPAQ	E	
DICOPANOL RAPIDPAQ	E	
dimaphen dm cold/cough oral liquid	E	
diphenhydramine hcl childrens	E	
diphenhydramine hcl injection	1	
diphenhydramine hcl oral capsule	E	
diphenhydramine hcl oral elixir	1	
diphenhydramine hcl oral liquid 12.5 mg/5ml	E	
diphenhydramine hcl oral tablet 25 mg	E	
diphenhydramine hcl oral tablet chewable	E	
DYMISTA	2	QL
epinephrine hcl (nasal)	E	
FASENRA	2	PA; SP
FASENRA PEN	2	PA; SP
fexofenadine hcl oral tablet 180 mg, 60 mg	E	
fexofenadine- pseudoephed er oral tablet extended release 12 hour	E	

Drug Name	Drug Tier	Notes
flunisolide nasal solution 25 mcg/act (0.025%)	1	QL
fluticasone propionate nasal	1	
geri-dryl oral liquid	E	
geri-dryl oral tablet	E	
GILPHEX TR ORAL TABLET 10-388 MG	E	
giltuss severe sinus	E	
goodsense all day allergy-d	E	
goodsense mucus er maximum str	E	
goodsense tussin dm max	E	
guaifenesin ac	1	PA; QL
guaifenesin oral tablet 400 mg	E	
guaifenesin-codeine oral solution	1	PA; QL
guaifenesin-dm oral syrup	E	
HYCODAN ORAL SOLUTION	3	PA; QL
HYCODAN ORAL TABLET	3	PA; QL
hydrocod poli-chlorphe poli er	1	PA; QL
hydrocodone bit- homatrop mbr	1	PA; QL
hydromet oral solution	1	PA; QL
HYPERSAL	3	
INFASURF INTRATRACHEAL	3	
ipratropium bromide nasal	1	
KARBINAL ER ORAL SUSPENSION EXTENDED RELEASE	E	
KINDERMED KIDS ALLERGY	E	

For more information regarding the tiers and designations in this drug list, please see the *Reading your formulary* section on page 6 of this booklet.

Drug Name	Drug Tier	Notes
levocetirizine dihydrochloride oral solution	E	
levocetirizine dihydrochloride oral tablet	1	
liquid allergy relief	E	
loratadine childrens oral solution	E	
loratadine childrens oral tablet chewable	E	
loratadine oral solution	E	
loratadine oral tablet	E	
loratadine oral tablet dispersible 10 mg	E	
loratadine-d 12hr	E	
loratadine-d 24hr	E	
maxi-tuss ac	1	PA; QL
maxi-tuss gmx	E	
maxi-tuss pe max	E	
m-dryl	E	
MICLARA LQ	E	
MM ALLER-BEN	E	
mometasone furoate nasal	1	QL
MUCINEX CHILDRENS FREEFROM ORAL LIQUID 5-100 MG/5ML	E	
MUCINEX CHILDRENS STUFFY NOSE	E	
MUCINEX DM	E	
MUCINEX FAST-MAX CHEST CONG MS	E	
mucinex fast-max cong headache	E	
MUCINEX FAST-MAX DM MAX	E	

Drug Name	Drug Tier	Notes
MUCINEX SINUS-MAX SEV CONG/PN ORAL CAPSULE	E	
mucus dm	E	
mucus relief d oral tablet extended release 12 hour	E	
mucus relief dm oral liquid	E	
mucus relief max st	E	
mucus relief oral tablet	E	
mucus+chest congestion	E	
mucus-d	E	
NASACORT ALLERGY 24HR	E	
nasal decongestant oral tablet 30 mg	E	
nasal decongestant pe	E	
nasal moisturizing spray	E	
nasal spray 12 hour	E	
nasal spray no drip	E	
nebusal inhalation nebulization solution 3 %	1	
NEBUSAL INHALATION NEBULIZATION SOLUTION 6 %	3	
NEO-SYNEPHRINE COLD/ALLRG MILD	E	
NEO-SYNEPHRINE COLD/ALLRGY EXT	E	
NEO-SYNEPHRINE COLD/ALLRGY REG	E	
NUCALA	2	PA; SP; QL
olopatadine hcl nasal	E	
OMNARIS	3	QL
PATANASE	E	

For more information regarding the tiers and designations in this drug list, please see the *Reading your formulary* section on page 6 of this booklet.

Drug Name	Drug Tier	Notes
PEDIACLEAR PD CHILDRENS	E	
PHENERGAN INJECTION	3	
polytussin dm oral liquid	E	
potassium iodide oral solution	E	
promethazine hcl injection	1	
promethazine hcl oral	1	
promethazine hcl rectal suppository 12.5 mg, 25 mg	1	
promethazine vc	1	
promethazine vc/codeine	1	PA; QL
promethazine-codeine	1	PA; QL
promethazine-dm oral syrup	1	
promethegan	1	
PROPEL	E	
PROPEL MINI	E	
PROPEL MINI SDS	E	
pseudoephedrine hcl er	E	
pseudoephedrine-bromphen-dm oral syrup 30-2-10 mg/5ml	1	
pseudoephedrine-guaifenesin er	E	
pulmosal	1	
QNASL	3	QL
QNASL CHILDRENS	3	QL
robafen mucus/chest congestion	E	
ROBITUSSIN 12 HOUR COUGH CHILD	E	

Drug Name	Drug Tier	Notes
ROBITUSSIN COUGH+CHEST CONG DM ORAL LIQUID 20-400 MG/20ML	E	
RYALTRIS	3	QL
RYCLORA ORAL SOLUTION	E	
ryvent	E	
sesame oil nasal spray	E	
sinus 12 hour	E	
SINUVA	E	
sm allergy relief childrens	E	
sm fexofenadine hcl oral tablet 180 mg	E	
sm guaifenesin/pseudoephedrine	E	
sodium chloride inhalation nebulization solution 0.9 %, 10 %, 3 %	1	
sodium chloride nebulization solution 7 % inhalation	E	
sodium chloride nebulization solution 7 % inhalation	1	
SSKI	E	
SUDAFED SINUS CONGESTION	E	
sudogest 12 hour	E	
sudogest maximum strength	E	
sudogest oral tablet 30 mg	E	
SURVANTA INTRATRACHEAL	3	
TEZSPIRE	E	SP

For more information regarding the tiers and designations in this drug list, please see the *Reading your formulary* section on page 6 of this booklet.

Drug Name	Drug Tier	Notes
triprolidine hcl oral liquid 0.625 mg/ml, 0.938 mg/ml	E	
tusnel-ex	E	
tussin dm max adult oral liquid 5-100 mg/5ml	E	
tussin dm max oral liquid 20-400 mg/20ml	E	
tussin dm oral syrup 100-10 mg/5ml	E	
tussin mucus+chest congest sf	E	
TUXARIN ER	E	
TUZISTRA XR ORAL SUSPENSION EXTENDED RELEASE	E	
wal-tap cold/allergy oral elixir	E	
XHANCE	E	
XOLAIR	2	PA; SP
ZETONNA	3	QL
ZYRTEC	E	
ZYRTEC ALLERGY ORAL TABLET	E	
ZYRTEC CHILDRENS ALLERGY ORAL TABLET CHEWABLE 10 MG	E	
ZYRTEC-D ALLERGY & SINUS	E	
Respiratory Tract / Pulmonary Agents - Drugs for Asthma and Other Lung Conditions		
ACCOLATE	3	
acetylcysteine inhalation	1	
ADRENALIN INJECTION SOLUTION 1 MG/ML	3	

Drug Name	Drug Tier	Notes
ADVAIR DISKUS INHALATION AEROSOL POWDER BREATH ACTIVATED 100-50 MCG/ACT, 250-50 MCG/ACT, 500-50 MCG/ACT	1	QL
ADVAIR HFA	2	QL
AIRDUO DIGIHALER	E	
AIRDUO RESPICLICK 113/14	E	
AIRDUO RESPICLICK 232/14	E	
AIRDUO RESPICLICK 55/14	E	
albuterol sulfate hfa aerosol solution 108 (90 base) mcg/act inhalation	1	QL
ALBUTEROL SULFATE HFA AEROSOL SOLUTION 108 (90 BASE) MCG/ACT INHALATION	E	
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	QL
ALBUTEROL SULFATE INHALATION NEBULIZATION SOLUTION (5 MG/ML) 0.5%	E	
albuterol sulfate oral	1	
ALVESCO	E	
ANORO ELLIPTA INHALATION AEROSOL POWDER BREATH ACTIVATED 62.5-25 MCG/ACT	2	QL

For more information regarding the tiers and designations in this drug list, please see the *Reading your formulary* section on page 6 of this booklet.

Drug Name	Drug Tier	Notes
ARALAST NP INTRAVENOUS SOLUTION RECONSTITUTED 1000 MG, 500 MG	3	PA; SP
arformoterol tartrate	1	QL
ARMONAIR DIGIHALER	E	
ARNUITY ELLIPTA	2	QL
ASMANEX (120 METERED DOSES) INHALATION AEROSOL POWDER BREATH ACTIVATED 220 MCG/ACT	E	
ASMANEX (14 METERED DOSES) INHALATION AEROSOL POWDER BREATH ACTIVATED 220 MCG/ACT	E	
ASMANEX (30 METERED DOSES) INHALATION AEROSOL POWDER BREATH ACTIVATED 110 MCG/ACT, 220 MCG/ACT	E	
ASMANEX (60 METERED DOSES) INHALATION AEROSOL POWDER BREATH ACTIVATED 220 MCG/ACT	E	
ASMANEX HFA	E	
ATROVENT HFA	3	QL
AUVI-Q INJECTION SOLUTION AUTO- INJECTOR 0.1 MG/0.1ML	3	QL
AUVI-Q INJECTION SOLUTION AUTO- INJECTOR 0.15 MG/0.15ML, 0.3 MG/0.3ML	E	

Drug Name	Drug Tier	Notes
BEVESPI AEROSPHERE	E	
BREO ELLIPTA INHALATION AEROSOL POWDER BREATH ACTIVATED 100-25 MCG/ACT, 200- 25 MCG/ACT	2	QL
BREZTRI AEROSPHERE	2	QL
BROVANA	E	
budesonide inhalation	1	QL
BUDESONIDE- FORMOTEROL FUMARATE	E	
COMBIVENT RESPIMAT	2	QL
cromolyn sodium inhalation	1	
DALIRESP	3	PA
DUAKLIR PRESSAIR	E	
DULERA	E	
elixophyllin	1	
epinephrine (anaphylaxis) injection solution 1 mg/ml	1	
epinephrine injection solution auto-injector	1	
EPINEPHRINE PROFESSIONAL	E	
EPINEPHRINESNAP	E	
EPINEPHRINESNAP- EMS	E	
EPINEPHRINESNAP-V	E	
EPIPEN 2-PAK INJECTION SOLUTION AUTO- INJECTOR	3	ST
EPIPEN JR 2-PAK INJECTION SOLUTION AUTO- INJECTOR	E	

For more information regarding the tiers and designations in this drug list, please see the *Reading your formulary* section on page 6 of this booklet.

Drug Name	Drug Tier	Notes
EPISNAP	E	
ESBRIET ORAL CAPSULE	3	PA; SP
ESBRIET ORAL TABLET	E	SP
FLOVENT DISKUS INHALATION AEROSOL POWDER BREATH ACTIVATED 100 MCG/ACT, 250 MCG/ACT, 50 MCG/ACT	2	QL
FLOVENT HFA	2	QL
FLUTICASONE FUROATE-VILANTEROL INHALATION AEROSOL POWDER BREATH ACTIVATED 100-25 MCG/ACT, 200-25 MCG/ACT	E	
FLUTICASONE PROPIONATE HFA	E	
FLUTICASONE-SALMETEROL INHALATION AEROSOL	E	
fluticasone-salmeterol inhalation aerosol powder breath activated 100-50 mcg/act, 250-50 mcg/act, 500-50 mcg/act	E	
FLUTICASONE-SALMETEROL INHALATION AEROSOL POWDER BREATH ACTIVATED 113-14 MCG/ACT, 232-14 MCG/ACT, 55-14 MCG/ACT	E	
formoterol fumarate inhalation	1	QL
GLASSIA	3	PA; SP

Drug Name	Drug Tier	Notes
INCRUSE ELLIPTA INHALATION AEROSOL POWDER BREATH ACTIVATED 62.5 MCG/ACT	E	
ipratropium bromide inhalation	1	QL
ipratropium-albuterol	1	QL
levalbuterol hcl inhalation nebulization solution 0.31 mg/3ml, 0.63 mg/3ml, 1.25 mg/0.5ml, 1.25 mg/3ml	1	QL
LEVALBUTEROL HFA INHALATION AEROSOL 45 MCG/ACT	E	
LONHALA MAGNAIR REFILL KIT	3	QL
LONHALA MAGNAIR STARTER KIT	3	QL
montelukast sodium oral	1	
OFEV	3	PA; SP
PERFOROMIST	3	QL
pirfenidone	1	PA; SP
PROAIR DIGIHALER INHALATION AEROSOL POWDER BREATH ACTIVATED 108 (90 BASE) MCG/ACT	E	
PROAIR RESPICLICK	E	
PROLASTIN-C INTRAVENOUS SOLUTION	3	PA; SP
PROLASTIN-C INTRAVENOUS SOLUTION RECONSTITUTED 1000 MG	3	PA; SP
PROVENTIL HFA	E	
PULMICORT FLEXHALER	2	QL

For more information regarding the tiers and designations in this drug list, please see the *Reading your formulary* section on page 6 of this booklet.

Drug Name	Drug Tier	Notes
PULMICORT SUSPENSION	E	
QVAR REDIHALER	E	
roflumilast	1	PA
SEREVENT DISKUS INHALATION AEROSOL POWDER BREATH ACTIVATED 50 MCG/ACT	2	QL
SINGULAIR	E	
SPIRIVA HANDIHALER	2	QL
SPIRIVA RESPIMAT INHALATION AEROSOL SOLUTION 1.25 MCG/ACT, 2.5 MCG/ACT	2	QL
STERITALC	3	
STIOLTO RESPIMAT INHALATION AEROSOL SOLUTION 2.5-2.5 MCG/ACT	2	QL
STRIVERDI RESPIMAT	2	QL
SYMBICORT	2	QL
SYMJEPI	3	
terbutaline sulfate injection	1	
terbutaline sulfate oral	1	
THEO-24	3	
theophylline	1	
theophylline er oral tablet extended release 12 hour 300 mg, 450 mg	1	
theophylline er oral tablet extended release 24 hour	1	

Drug Name	Drug Tier	Notes
TRELEGY ELLIPTA INHALATION AEROSOL POWDER BREATH ACTIVATED 100-62.5-25 MCG/ACT, 200-62.5-25 MCG/ACT	2	QL
TUDORZA PRESSAIR INHALATION AEROSOL POWDER BREATH ACTIVATED 400 MCG/ACT	E	
VENTOLIN HFA	E	
wixela inhub inhalation aerosol powder breath activated 100-50 mcg/act, 250-50 mcg/act, 500-50 mcg/act	E	
XOPENEX HFA	E	
YUPELRI	3	QL
zafirlukast	1	
ZEMAIRA	3	PA; SP
zileuton er	E	
ZYFLO	E	
Respiratory Tract / Pulmonary Agents - Drugs for Cystic Fibrosis		
BETHKIS	E	SP
BRONCHITOL	E	
BRONCHITOL TOLERANCE TEST	E	
CAYSTON	E	SP
KALYDECO	3	PA; SP
KITABIS PAK	E	SP
ORKAMBI	3	PA; SP; QL
PULMOZYME INHALATION SOLUTION 2.5 MG/2.5ML	2	PA; SP
SYMDEKO	3	PA; SP; QL
TOBI NEBULIZER	E	SP

For more information regarding the tiers and designations in this drug list, please see the *Reading your formulary* section on page 6 of this booklet.

Drug Name	Drug Tier	Notes
TOBI PODHALER	3	SP; QL
tobramycin inhalation nebulization solution 300 mg/4ml	1	SP
tobramycin nebulization solution 300 mg/5ml inhalation	1	SP
TOBRAMYCIN NEBULIZATION SOLUTION 300 MG/5ML INHALATION	E	SP
TRIKAFTA	3	PA; SP; QL
Respiratory Tract / Pulmonary Agents - Drugs for Pulmonary Hypertension		
ADCIRCA	3	PA; SP; QL
ADEMPAS	2	PA; SP; QL
alyq	1	PA; SP; QL
ambrisentan	1	PA; SP; QL
bosentan	1	PA; SP; QL
epoprostenol sodium	1	PA; SP
FLOLAN	3	PA; SP
LETAIRIS	3	PA; SP; QL
OPSUMIT	2	PA; SP; QL
ORENITRAM	3	PA; SP
ORENITRAM MONTH 1	3	PA; SP; QL
ORENITRAM MONTH 2	3	PA; SP; QL
ORENITRAM MONTH 3	3	PA; SP; QL
REMODULIN INJECTION SOLUTION 100 MG/20ML, 20 MG/20ML, 200 MG/20ML, 50 MG/20ML	E	SP
REVATIO INTRAVENOUS	3	PA; SP
REVATIO ORAL	E	SP

Drug Name	Drug Tier	Notes
sildenafil citrate intravenous	1	PA; SP
sildenafil citrate oral suspension reconstituted	1	PA; SP; QL
sildenafil citrate oral tablet 20 mg	1	PA; SP; QL
tadalafil (pah)	1	PA; SP; QL
TADLIQ	E	SP
TRACLEER 62.5 MG, 125 MG	E	SP
TRACLEER 32 MG	3	PA; SP; QL
treprostinil	1	PA; SP
TYVASO	3	PA; SP; QL
TYVASO DPI MAINTENANCE KIT	3	PA; SP; QL
TYVASO DPI TITRATION KIT	3	PA; SP; QL
TYVASO REFILL	3	PA; SP; QL
TYVASO STARTER	3	PA; SP; QL
UPTRAVI INTRAVENOUS	3	PA; SP
UPTRAVI ORAL	3	PA; SP; QL
VELETRI	3	PA; SP
VENTAVIS	3	PA; SP; QL
Skeletal Muscle Relaxants - Drugs for Muscle Pain and Spasm		
AMRIX	E	
baclofen intrathecal	E	
BACLOFEN ORAL SOLUTION	E	
BACLOFEN ORAL SUSPENSION	E	
baclofen oral tablet	1	
carisoprodol oral	1	
chlorzoxazone oral tablet 250 mg, 375 mg, 750 mg	E	

For more information regarding the tiers and designations in this drug list, please see the *Reading your formulary* section on page 6 of this booklet.

Drug Name	Drug Tier	Notes
chlorzoxazone oral tablet 500 mg	1	
cyclobenzaprine hcl er	E	
cyclobenzaprine hcl oral tablet 10 mg, 5 mg	1	
cyclobenzaprine hcl oral tablet 7.5 mg	E	
CYCLOPHENE RAPIDPAQ	E	
DANTRIUM ORAL CAPSULE 25 MG	3	
dantrolene sodium oral	1	
ENOVARX-BACLOFEN	E	
ENOVARX-CYCLOBENZAPRINE HCL	E	
FEXMID	E	
FLEQSUVY	E	
GABLOFEN INTRATHECAL SOLUTION 10000 MCG/20ML, 20000 MCG/20ML, 40000 MCG/20ML	E	
GABLOFEN INTRATHECAL SOLUTION PREFILLED SYRINGE 10000 MCG/20ML, 20000 MCG/20ML, 40000 MCG/20ML, 50 MCG/ML	E	
LIORESAL	E	
LORZONE	E	
LYVISPAH	E	
METAXALL CP	E	
metaxalone	E	
methocarbamol oral tablet 1000 mg	E	
methocarbamol oral tablet 500 mg, 750 mg	1	

Drug Name	Drug Tier	Notes
MUSCUSOLICE	E	
NORGESIC	E	
NORGESIC FORTE	E	
orphenadrine citrate er	1	QL
orphenadrine-aspirin-caffeine oral tablet 25-385-30 mg	E	
ORPHENGESIC FORTE ORAL TABLET 50-770-60 MG	E	
OZOBAX	E	
SOMA	3	
TABRADOL FUSEPAQ	E	
TABRADOL RAPIDPAQ	E	
tizanidine hcl oral capsule 2 mg, 4 mg	E	
tizanidine hcl oral capsule 6 mg	1	
tizanidine hcl oral tablet	1	
VANADOM	3	
ZANAFLEX	E	
Sleep Disorder Agents		
AMBIEN	E	
AMBIEN CR	E	
armodafinil	1	PA; QL
BELSOMRA	3	ST; QL
DAYVIGO	3	ST; QL
doxepin hcl oral tablet	1	QL
EDLUAR	E	
eszopiclone	1	QL
HETLIOZ	E	SP
HETLIOZ LQ	E	SP
LUNESTA	E	
modafinil	1	PA; QL
NUVIGIL	E	
PROVIGIL	E	
QUVIVIQ	E	

For more information regarding the tiers and designations in this drug list, please see the *Reading your formulary* section on page 6 of this booklet.

Drug Name	Drug Tier	Notes
ramelteon	1	QL
RESTORIL	E	
ROZEREM	3	QL
SILENOR	3	QL
sleep-aid oral capsule	E	
SODIUM OXYBATE	3	PA; SP; QL
SUNOSI	2	PA; QL
tasimelteon	1	PA; SP; QL
temazepam	1	QL
WAKIX	3	PA; SP; QL
XYREM	3	PA; SP; QL
XYWAV	3	PA; SP; QL
zaleplon	1	QL
zolpidem tartrate er	1	QL
zolpidem tartrate oral	1	QL
zolpidem tartrate sublingual	E	
ZOLPIMIST	E	

For more information regarding the tiers and designations in this drug list, please see the *Reading your formulary* section on page 6 of this booklet.

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10	Persian (Farsi)	شما حق دارید که کمک و اطلاعات به زبان خود را به طور رایگان دریافت نمایید. برای درخواست مترجم شفاهی با شماره تلفن رایگان قید شده در کارت شناسایی برنامه بهداشتی خود تماس حاصل نموده و 0 را فشار دهید. TTY 711
11	German	Sie haben das Recht, kostenlose Hilfe und Informationen in Ihrer Sprache zu erhalten. Um einen Dolmetscher anzufordern, rufen Sie die gebührenfreie Nummer auf Ihrer Krankenversicherungskarte an und drücken Sie die 0. TTY 711
12	Gujarati	તમને વિના મૂલ્યે મદદ અને તમારી ભાષામાં માહિતી મેળવવાનો અધિકાર છે. દુભાષિયા માટે વિનંતી કરવા, તમારા હેલ્થ પ્લાન ID કાર્ડ પરની સૂચીમાં આપેલ ટોલ-ફ્રી મેમ્બર ફોન નંબર ઉપર કોલ કરો, 0 દબાવો. TTY 711
13	Russian	Вы имеете право на бесплатное получение помощи и информации на вашем языке. Чтобы подать запрос переводчика позвоните по бесплатному номеру телефона, указанному на обратной стороне вашей идентификационной карты и нажмите 0. Линия TTY 711
14	Japanese	ご希望の言語でサポートを受けたり、情報入手したりすることができます。料金はかかりません。通訳をご希望の場合は、医療プランのIDカードに記載されているメンバー用のフリーダイヤルまでお電話の上、0を押してください。TTY専用番号は711です。
15	Laotian	ທ່ານມີສິດທິຈະໄດ້ຮັບການຊ່ວຍເຫຼືອແລະຂໍ້ມູນຂ່າວສານທີ່ເປັນພາສາຂອງທ່ານບໍ່ມີຄ່າໃຊ້ຈ່າຍ. ເພື່ອຂໍຮ້ອງນາຍພາສາ, ໂທລະສັບໂທລະສານໂທລະສັບສໍາລັບສະມາຊິກທີ່ໄດ້ລະບຸໂຕ້ໃນບັດສະມາຊິກຂອງທ່ານ, ກົດລະກ 0. TTY 711



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