



2025 Premium Standard Formulary

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



Call the number on your member ID card.



Visit your plan's website on your member ID card or log on to the Optum Rx app to:

- Find a participating retail pharmacy by ZIP code.
- Look up possible lower-cost medication alternatives.
- Compare medication pricing and options.

Understanding your formulary

What is a formulary?

A formulary is a list of prescribed medications or other pharmacy care products, services or supplies chosen for their safety, cost, and effectiveness. Medications are listed by categories or classes and are placed into cost levels known as tiers. It includes both brand and generic prescription medications.

To create the list, Optum Rx® is guided by the Pharmacy and Therapeutics Committee. This group of doctors and pharmacists reviews which medications will be covered, how well the drugs work, and overall value. They also make sure there are safe and covered options.

How do I use my formulary?

You and your doctor can use the formulary to help you choose the most cost-effective prescription medications. This guide tells you if a medication is generic or brand, and if special rules apply. If your medication is not listed here, please visit your plan's website or call the number on your member ID card.

What are tiers?

Tiers are the different cost levels you pay for a medication. Each tier is assigned a cost, set by your employer or plan sponsor.

When does the formulary change?

- Medications may move to a lower tier at any time.
- Medications may move to a higher tier when a generic equal becomes available.
- Medications may move to a higher tier or be excluded from coverage on January 1 or July 1 of each year.

If a medication changes tiers, you may have to pay a different amount for that medication.

Why are some medications excluded from coverage?

A medication may be excluded from coverage under your pharmacy benefit when it works the same as or is similar to another prescription or over-the-counter (OTC) medication.

What if my doctor wants me to keep taking my excluded medication?

You, your authorized representative, or your doctor can start a request for coverage by calling the number on your member ID card. Your doctor will need to submit information for the review. If approved, you may keep filling your prescription for the excluded medication, but you may pay a higher cost. If not approved, you may pay the full cost of the prescription.



About this formulary

Where differences exist between this list and your benefit plan, the benefit plan documents rule. This is not a complete list of your covered medications. Please review your benefit plan documents for full details. Not all formulary alternatives listed in this document may be appropriate for your specific condition. Please talk to your doctor.

Medication tips

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

Generic medications contain the same active ingredients (offer the same effect) as brand-name medications, but they often cost less. In some situations, brand-name medications could be lower in cost.

What if my doctor writes a brand-name prescription?

If your doctor gives you a prescription for a brand-name medication, ask if a lower-cost option could be right for you.

What if I am taking a specialty medication?

Specialty medications are used to treat complex conditions and are generally higher in cost. Please note, not all specialty medications are listed in the formulary. Call the number on the back of your member ID card to learn more about where you can fill your specialty prescriptions.



Over-the-counter medications (OTC)

Talk to your doctor about OTC options. Even though OTC medications may not be covered by your pharmacy benefit, they may cost less than a prescription medication.

Reading your formulary

The formulary gives you choices so you and your doctor can decide your best course of treatment. In this formulary, brand-name medications are shown in UPPERCASE (for example, CLOBEX). Generic medications are shown in lowercase (for example, clobetasol).

Tier information

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

Drug tier	Includes	Helpful tips
Tier 1	\$ Lower-cost generics and some brand name	Use tier 1 drugs for the lowest out-of-pocket costs.
Tier 2	\$\$ Mid-range cost preferred brand name	Use tier 2 drugs instead of tier 3 to help reduce your out-of-pocket costs.
Tier 3	\$\$\$ Higher-cost brand name and some generics	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 not be covered or need prior authorization. Lower-cost options are available and covered.

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 decides how these medications may be covered.

M	Authorized generic or cobranded product
PA	Prior authorization – Your doctor is required to give Optum Rx more information to determine coverage.
QL	Quantity limit – Medication may be limited to a certain quantity.
SP	Specialty medication – Medication is designated as specialty.
ST	Step therapy – Must try lower-cost medication(s) before a higher-cost medication can be covered
3P	Tier 3 preferred
++	Benefit design options – Coverage is determined by your prescription medication benefit plan.

Health Trust Premium

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Drug Name	Drug Tier	Notes
Analgesics - Drugs for Pain		
acetaminophen-codeine oral tablet	1	QL
APADAZ	E	
apap-caff-dihydrocodeine	1	QL
BELBUCA	2	PA; QL
BENZHYDROCODON E-ACETAMINOPHEN	E	
butalbital-apap-caffeine	1	
BUTRANS	E	
CONZIP	E	
DILAUDID ORAL	E	
endocet	1	QL
FIORICET	E	
FIORICET/CODEINE	E	
hydrocodone-acetaminophen	1	QL
hydromorphone hcl oral tablet	1	QL
HYSINGLA ER	2	PA; QL
morphine sulfate er oral tablet extended release	1	PA; QL
MS CONTIN	E	
NUCYNTA	E	
NUCYNTA ER	E	
OXYCODONE HCL	E	
oxycodone hcl oral solution	1	QL
oxycodone hcl oral tablet	1	QL
OXYCODONE HCL ORAL TABLET ABUSE-DETERRENT	E	
oxycodone-acetaminophen oral tablet 10-325 mg, 2.5-325 mg, 5-325 mg, 7.5-325 mg	1	QL
OXYCONTIN	2	PA; QL
PERCOCET	E	

Drug Name	Drug Tier	Notes
ROXICODONE	E	
ROXYBOND	E	
TRAMADOL HCL (ER BIPHASIC) ORAL CAPSULE EXTENDED RELEASE 24 HOUR	E	
TRAMADOL HCL ORAL SOLUTION	E	
tramadol hcl oral tablet	1	QL
TREZIX	3	QL
XTAMPZA ER	2	PA; QL
Analgesics - Drugs for Pain and Inflammation		
ARTHROTEC	E	
CELEBREX	E	
celecoxib oral	1	QL
COXANTO	E	
DICLOFENAC PATCH 1.3%	E	
diclofenac potassium oral tablet	1	
diclofenac sodium external gel 1 %	1	QL
diclofenac sodium oral	1	
DUEXIS	E	
ELYXYB	E	
FENOPRON	E	
FLECTOR	E	
ibuprofen oral suspension 100 mg/5ml	1	
ibuprofen oral tablet 400 mg, 600 mg, 800 mg	1	
ibuprofen-famotidine	E	
indomethacin oral capsule	1	
ketorolac tromethamine oral	1	QL
LICART	E	
meloxicam oral tablet	1	
nabumetone oral	1	

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Drug Name	Drug Tier	Notes
NALFON	E	
NAPRELAN	3	
naproxen oral tablet	1	
OXAPROZIN ORAL CAPSULE	E	
PENNSAID	E	
RELAFEN DS	E	
SPRIX	E	
TOLECTIN 600	E	
VIMOVO	E	
ZIPSOR	E	
Anesthetics		
lidocaine external ointment 5 %	1	
lidocaine external patch 5 %	1	
lidocaine-prilocaine external cream	1	
LIDOCAN	E	
LIDODERM	E	
premium lidocaine	1	
TRIDACAINE II	E	
TRIDACAINE III	E	
ZTLIDO	E	
Anti-Addiction / Substance Abuse Treatment Agents		
BRIXADI	3	SP
BRIXADI (WEEKLY)	3	SP
buprenorphine hcl sublingual	1	QL
buprenorphine hcl-naloxone hcl	1	QL
KLOXXADO	2	
naloxone hcl nasal	1	
naltrexone hcl oral	1	
OPVEE	2	
REXTOVY	2	
SUBLOCADE	3	SP
SUBOXONE	E	

Drug Name	Drug Tier	Notes
varenicline tartrate	1	QL
varenicline tartrate(continue)	1	QL
VIVITROL	3	SP
ZIMHI	3	
ZUBSOLV	2	QL
Antibacterials		
amoxicillin oral capsule	1	
amoxicillin oral suspension reconstituted	1	
amoxicillin oral tablet	1	
amoxicillin-potassium clavulanate oral suspension reconstituted	1	
amoxicillin-potassium clavulanate oral tablet	1	
azithromycin oral	1	
cefadroxil oral capsule	1	
cefdinir	1	
cefpodoxime proxetil oral tablet	1	
cefuroxime axetil	1	
cephalexin	1	
ciprofloxacin hcl oral	1	
clarithromycin oral tablet	1	
CLEOCIN VAGINAL	E	
clindamycin hcl oral	1	
clindamycin phosphate vaginal	1	
CLINDESSE	3	
DIFICID	3	
DORYX MPC	E	
doxycycline hyclate oral capsule	1	
doxycycline hyclate oral tablet	1	

Drug Name	Drug Tier	Notes
DOXYCYCLINE HYCLATE ORAL TABLET DELAYED RELEASE 80 MG	E	
doxycycline monohydrate oral capsule	1	
doxycycline monohydrate oral tablet	1	
levofloxacin oral tablet	1	
LIKMEZ	E	
metronidazole oral tablet 250 mg, 500 mg	1	
metronidazole vaginal	1	
minocycline hcl oral capsule	1	
mupirocin ointment	1	
nitrofurantoin macrocrystal	1	
nitrofurantoin monohydrate macrocrystals	1	
NITROFURANTOIN ORAL SUSPENSION 50 MG/5ML	E	
NUVESSA	E	
NUZYRA ORAL	3	QL
penicillin v potassium oral tablet	1	
SEYSARA	3	ST
SILVADENE	E	
sulfamethoxazole-trimethoprim oral	1	
sulfatrim pediatric	1	
TARGADOX	E	
XACIATO	3	
XIFAXAN ORAL TABLET 200 MG	E	
Anticoagulants		
ELIQUIS	2	QL
ELIQUIS DVT/PE STARTER PACK	2	QL

Drug Name	Drug Tier	Notes
enoxaparin sodium injection solution prefilled syringe	1	SP
jantoven	1	
warfarin sodium oral	1	
XARELTO	2	QL
XARELTO STARTER PACK	2	QL
Anticonvulsants - Drugs for Seizures		
APTOM	3	
BRIVIACT INTRAVENOUS	3	
BRIVIACT ORAL	3	ST
CARBATROL	E	
DEPAKOTE	E	
DEPAKOTE ER	E	
DEPAKOTE SPRINKLES	E	
DILANTIN INFATABS	E	
DILANTIN ORAL CAPSULE 100 MG	E	
DILANTIN-125	E	
divalproex sodium er	1	
divalproex sodium oral	1	
ELEPSIA XR	E	
EPIDIOLEX	3	PA; SP
EPRONTIA	E	
FYCOMPA	3	
gabapentin oral capsule	1	
gabapentin oral tablet 600 mg, 800 mg	1	
KEPPRA ORAL	E	
KEPPRA XR	E	
lacosamide oral tablet	1	
LAMICTAL	E	
LAMICTAL ODT	E	
LAMICTAL STARTER	E	

Drug Name	Drug Tier	Notes
LAMICTAL XR ORAL TABLET EXTENDED RELEASE 24 HOUR	E	
lamotrigine er	1	
lamotrigine oral tablet	1	
levetiracetam er	1	
levetiracetam intravenous	1	
levetiracetam oral solution	1	
levetiracetam oral tablet	1	
LIBERVANT BUCCAL FILM 10 MG, 12.5 MG, 15 MG, 5 MG, 7.5 MG	3	QL
MOTPOLY XR	3	ST
NAYZILAM	3	QL
NEURONTIN	E	
ONFI	E	
oxcarbazepine	1	
OXTELLAR XR	E	
primidone oral	1	
QUDEXY XR	E	
roweepra	1	
SABRIL	E	
subvenite	1	
SYMPAZAN	3	PA
TEGRETOL	E	
TEGRETOL-XR	E	
TOPAMAX	E	
TOPAMAX SPRINKLE	E	
topiramate oral tablet	1	
TRILEPTAL	E	
TROKENDI XR	E	
VALTOCO 10 MG DOSE	3	QL
VALTOCO 5 MG DOSE	3	QL
VIGADRONE	E	
VIMPAT	E	

Drug Name	Drug Tier	Notes
XCOPRI	3	ST
ZONEGRAN	E	
ZONISADE	E	
zonisamide oral	1	
Antidementia Agents - Drugs for Alzheimer's Disease and Dementia		
ADLARITY	E	
donepezil hcl oral tablet	1	
KISUNLA	E	
LEQEMBI	E	
memantine hcl oral tablet	1	
NAMZARIC	2	QL
Antidepressants		
amitriptyline hcl oral	1	
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	E	
CITALOPRAM HYDROBROMIDE ORAL CAPSULE	E	
citalopram hydrobromide oral tablet	1	
CYMBALTA	E	
desvenlafaxine succinate er	1	QL
doxepin hcl oral capsule	1	
duloxetine hcl oral	1	QL
EFFEXOR XR	E	

Drug Name	Drug Tier	Notes
escitalopram oxalate oral tablet	1	
fluoxetine hcl oral capsule	1	
fluoxetine hcl oral solution	1	
fluoxetine hcl oral tablet	1	
fluvoxamine maleate	1	
FORFIVO XL	E	
LEXAPRO	E	
mirtazapine oral tablet	1	
nortriptyline hcl oral capsule	1	
paroxetine hcl oral tablet	1	
PAXIL CR	E	
PAXIL ORAL TABLET	E	
PRISTIQ	E	
PROZAC	E	
SERTRALINE HCL ORAL CAPSULE	E	
sertraline hcl oral tablet	1	
SPRAVATO (56 MG DOSE)	3	PA; SP
SPRAVATO (84 MG DOSE)	3	PA; SP
trazodone hcl 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	1	
vilazodone hcl	1	QL
WELLBUTRIN SR	E	
WELLBUTRIN XL	E	
ZOLOFT	E	

Drug Name	Drug Tier	Notes
ZURZUVAE	3	PA; QL
Antiemetics - Drugs for Nausea and Vomiting		
GIMOTI	E	
meclizine hcl oral tablet	1	
metoclopramide hcl oral tablet	1	
ondansetron hcl oral tablet 24 mg	1	QL
ondansetron hcl oral tablet 4 mg, 8 mg	1	
ondansetron odt	1	
prochlorperazine maleate oral	1	
promethazine hcl injection	1	
promethazine hcl oral solution 6.25 mg/5ml	1	
promethazine hcl oral tablet	1	
SANCUSO	E	
scopolamine	1	
VARUBI (180 MG DOSE)	3	QL
Antifungals		
BREXAFEMME	E	
ciclodan	1	
ciclopirox external solution	1	
clotrimazole external cream	1	
clotrimazole mouth/throat	1	
clotrimazole-betamethasone external cream	1	
CRESEMBA INTRAVENOUS	3	
CRESEMBA ORAL	3	PA
fluconazole oral tablet	1	
GYNAZOLE-1	3	

Drug Name	Drug Tier	Notes
JUBLIA	E	
ketoconazole external cream	1	
ketoconazole external shampoo	1	
klayesta	1	
nyamyc	1	
nystatin external	1	
nystatin mouth/throat	1	
nystop	1	
terbinafine hcl oral	1	QL
terconazole vaginal cream	1	
TOLSURA	E	
VIVJOA	E	
Antigout Agents		
allopurinol oral	1	
colchicine oral tablet	1	
GLOPERBA	E	
MITIGARE	E	
Antimigraine Agents		
AIMOVIG SUBCUTANEOUS SOLUTION AUTO- INJECTOR 140 MG/ML, 70 MG/ML	2	PA; QL
AJOVY	2	PA; QL
CAMBIA	E	
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	

Drug Name	Drug Tier	Notes
IMITREX	E	
IMITREX STATDOSE REFILL	E	
IMITREX STATDOSE SYSTEM	E	
MAXALT	E	
MAXALT-MLT	E	
naratriptan hcl	1	QL
NURTEC	2	PA; QL
ONZETRA XSAIL	E	
QULIPTA	2	PA; QL
RELPAK	E	
REYVOW	E	
rizatriptan benzoate	1	QL
sumatriptan succinate oral	1	QL
sumatriptan succinate subcutaneous solution auto-injector	1	QL
TOSYMRA	E	
TREXIMET	E	
TRUDHESA	E	
UBRELVY	2	PA; QL
ZAVZPRET	3	PA; QL
ZEMBRACE SYMTOUCH	E	
ZOMIG ORAL	E	
Antineoplastics - Drugs for Cancer		
abiraterone acetate	1	PA; SP
AFINITOR	E	
AFINITOR DISPERZ	E	
AKEEGA	E	
ALECENSA	2	PA; SP
ALUNBRIG	2	PA; SP; QL
ALYMSYS	E	
anastrozole oral	1	
ANKTIVA	3	PA; SP
ARIMIDEX	E	
AUGTYRO	3	PA; SP

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Drug Name	Drug Tier	Notes
BELRAPZO	E	
BENDAMUSTINE HCL INTRAVENOUS SOLUTION	E	
BESREMI	3	PA; SP
CABOMETYX ORAL TABLET 20 MG	2	PA; SP; QL
CABOMETYX ORAL TABLET 40 MG, 60 MG	2	PA; SP
CALQUENCE	3	PA; SP
capecitabine	1	SP
COSELA	E	
COTELLIC	3	PA; SP
DARZALEX FASPRO	E	
dasatinib	1	PA
ERIVEDGE	3	PA; SP
ERLEADA	3	PA; SP
FOTIVDA	E	
GAVRETO	3	PA; SP
GLEEVEC	E	
HERZUMA	E	
ICLUSIG ORAL TABLET 10 MG, 15 MG	3	PA; SP; QL
ICLUSIG ORAL TABLET 30 MG, 45 MG	3	PA; SP
IDHIFA	3	PA; SP; QL
imatinib mesylate	1	PA; SP
IMBRUVICA ORAL CAPSULE	3	PA; SP; QL
IMBRUVICA ORAL SUSPENSION	3	PA; SP
IMBRUVICA ORAL TABLET 140 MG, 280 MG	E	
IMBRUVICA ORAL TABLET 420 MG	3	PA; SP; QL
INQOVI	E	
KANJINTI	2	PA; SP

Drug Name	Drug Tier	Notes
KISQALI (200 MG DOSE)	3	PA; SP
KISQALI (400 MG DOSE)	3	PA; SP
KISQALI (600 MG DOSE)	3	PA; SP
KOSELUGO	3	PA; SP
lenalidomide	1	PA; SP
letrozole oral	1	
LUMAKRAS	3	PA; SP
LYNPARZA	2	PA; SP
MEKINIST	3	PA; SP
MVASI	2	PA; SP
NUBEQA	3	PA; SP
ODOMZO	3	PA; SP
OGIVRI	E	
OJJAARA	E	
ONTRUZANT	E	
ORGOVYX	3	PA; SP
PANRETIN	3	
PEMAZYRE	E	
PHESGO	2	PA; SP
PIQRAY	3	PA; SP
POMALYST ORAL CAPSULE 1 MG, 2 MG	3	PA; SP; QL
POMALYST ORAL CAPSULE 3 MG, 4 MG	3	PA; SP
RETEVMO ORAL TABLET 120 MG, 160 MG	3	PA; SP
RETEVMO ORAL TABLET 40 MG, 80 MG	3	PA; SP; QL
REVLIMID	2	PA; SP
REZLIDHIA	E	
RIABNI	E	
ROZLYTREK	3	PA; SP
RUBRACA	E	
RUXIENCE	2	PA; SP
RYDAPT	3	PA; SP
RYLAZE	E	

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Drug Name	Drug Tier	Notes
SCEMBLIX ORAL TABLET 100 MG	3	PA; SP
SCEMBLIX ORAL TABLET 20 MG, 40 MG	3	PA; SP; QL
SPRYCEL	E	
STIVARGA	2	PA; SP
SUTENT	E	
TABRECTA	3	PA; SP
TAFINLAR	3	PA; SP
TAGRISSE ORAL TABLET 40 MG	3	PA; SP; QL
TAGRISSE ORAL TABLET 80 MG	3	PA; SP
TALZENNA	E	
tamoxifen citrate oral	1	
TARGRETIN ORAL	E	
TASIGNA	3	PA; SP
TAZVERIK	E	
temozolomide	1	PA; SP
TEPMETKO	E	
TRAZIMERA	2	PA; SP
TREANDA	E	
TRUQAP	3	PA; SP
TRUXIMA	E	
VEGZELMA	E	
VERZENIO	3	PA; SP
VITRAKVI	3	PA; SP
VIVIMUSTA	E	
XALKORI	E	
XTANDI	3	PA; SP
YONSA	E	
ZEJULA ORAL TABLET 100 MG	2	PA; SP; QL
ZEJULA ORAL TABLET 200 MG, 300 MG	2	PA; SP
ZELBORAF	3	PA; SP
ZIRABEV	2	PA; SP
ZYTIGA	E	

Drug Name	Drug Tier	Notes
Antiparasitics		
ARAKODA	3	
atovaquone-proguanil hcl	1	
EMVERM	2	
hydroxychloroquine sulfate oral	1	
NATROBA	E	
PLAQUENIL	E	
SOVUNA	E	
Antiparkinson Agents		
benztropine mesylate oral	1	
carbidopa-levodopa oral tablet	1	
CREXONT	3	ST
DHIVY	E	
GOCOVRI	E	
INBRIJA	3	PA; SP
NEUPRO	3	
ONGENTYS	3	ST
OSMOLEX ER	E	
pramipexole dihydrochloride	1	
ropinirole hcl	1	
RYTARY	3	ST
Antiplatelets		
BRILINTA	2	
clopidogrel bisulfate oral	1	
PLAVIX	E	
prasugrel hcl	1	
YOSPRALA	E	
Antipsychotics - Drugs for Mood Disorders		
ABILIFY	E	
ABILIFY ASIMTUFII	3	
ABILIFY MAINTENA	3	
aripiprazole oral tablet	1	QL

Drug Name	Drug Tier	Notes
ARISTADA	3	
ARISTADA INITIO	3	
INVEGA HAFYERA	3	ST
INVEGA SUSTENNA	3	
INVEGA TRINZA	3	
LATUDA	E	
lurasidone hcl	1	QL
LYBALVI	E	
olanzapine oral tablet	1	QL
PERSERIS	3	
quetiapine fumarate	1	QL
quetiapine fumarate er	1	QL
REXULTI	3	QL
RISPERDAL	E	
risperidone oral tablet	1	QL
RYKINDO	3	
SAPHRIS	E	
SECUADO	E	
SEROQUEL	E	
SEROQUEL XR	E	
UZEDY	3	
VRAYLAR	3	QL
ziprasidone hcl	1	QL
ZYPREXA	E	
Antivirals		
acyclovir external ointment	1	QL
acyclovir oral capsule	1	
acyclovir oral tablet	1	
BARACLUDE ORAL TABLET	E	
BIKTARVY	3	
CIMDUO	2	
DESCOVY ORAL TABLET 120-15 MG	3	
DESCOVY ORAL TABLET 200-25 MG	3	PA
DOVATO	2	

Drug Name	Drug Tier	Notes
emtricitabine-tenofovir df	1	
EPCLUSA	2	PA; SP; QL
HARVONI	2	PA; SP; QL
JULUCA	2	
LEDIPASVIR-SOFOSBUVIR	E	
MAVYRET	2	PA; SP; QL
oseltamivir phosphate oral	1	QL
PAXLOVID (150/100)	2	QL
PAXLOVID (300/100)	2	QL
PREZCOBIX	2	
SOFOVIR-SOFOSBUVIR-VELPATASVIR	E	
SYMFI	2	
SYMFI LO	2	
SYMITUZA	3	
TAMIFLU	E	
TRIUMEQ	2	
TRUVADA	E	
valacyclovir hcl oral	1	QL
VALTREX	E	
VEMLIDY	E	
VOCABRIA	E	
VOSEVI	2	PA; SP; QL
XOFLUZA (40 MG DOSE)	3	QL
XOFLUZA (80 MG DOSE)	3	QL
ZOVIRAX	E	
Anxiolytics - Drugs for Anxiety		
alprazolam oral tablet	1	QL
ATIVAN ORAL	E	
buspirone hcl oral	1	
clonazepam oral	1	QL
diazepam oral tablet	1	
hydroxyzine hcl oral	1	

Drug Name	Drug Tier	Notes
hydroxyzine pamoate oral	1	
KLONOPIN	E	
lorazepam oral tablet	1	QL
LOREEV XR	E	
triazolam	1	QL
VALIUM	E	
XANAX	E	
XANAX XR	E	
Bipolar Agents - Drugs for Mood Disorders		
lithium carbonate er	1	
lithium carbonate oral	1	
Blood Products and Modifiers - Drugs for Blood Disorders		
ADVATE	2	SP
ADYNOVATE	3	SP
AFSTYLA	3	SP
ALPROLIX	3	SP
ALTUVIIIO	3	SP
ARANESP (ALBUMIN FREE)	2	PA; SP
DOPTelet	3	PA; SP
ELOCTATE	3	SP
EMPAVELI	3	PA; SP
EPOGEN	E	
ESPEROCT	3	SP
FABHALTA	3	PA; SP; QL
FULPHILA	E	
FYLNETRA	E	
GRANIX	E	
IDELVION	3	SP
JIVI	3	SP
KOATE	2	SP
KOGENATE FS	2	SP
KOVALTRY	2	SP
NEULASTA	3	PA; SP
NEULASTA ONPRO	3	PA; SP

Drug Name	Drug Tier	Notes
NEUPOGEN	E	
NIVESTYM	2	PA; SP
NOVOEIGHT	2	SP
NUWIQ	2	SP
NYVEPRIA	E	
PIASKY	E	
PROCrit	2	PA; SP
PROMACTA	3	PA; SP
REBINYN	3	SP
RECOMBinate	2	SP
RELEUKO	E	
RETACRIT	2	PA; SP
ROLVEDON	E	
SEVENFACT	E	
SOLIRIS	3	PA; SP
STIMUFEND	E	
TAVALISSE	3	PA; SP
tranexamic acid oral	1	
UDENYCA	3	PA; SP
UDENYCA ONBODY	3	PA; SP
ULTOMIRIS	3	PA; SP
VOYDEYA	3	PA; SP; QL
WILATE	2	SP
XYNTHA	2	SP
XYNTHA SOLOFUSE	2	SP
ZARXIO	2	PA; SP
ZIEXTENZO	E	
Cardiovascular Agents - Drugs for Heart and Circulation Conditions		
ALTACE	E	
amiodarone hcl oral	1	
amlodipine besylate oral	1	
amlodipine besylate-benazepril hcl	1	
amlodipine besylate-valsartan	1	
amlodipine-olmesartan	1	

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Drug Name	Drug Tier	Notes
ASPRUZYO SPRINKLE	E	
ATACAND	E	
atenolol oral	1	
atenolol-chlorthalidone	1	
ATORVALIQ	E	
atorvastatin calcium oral	1	
AVAPRO	E	
AZOR	E	
benazepril hcl oral	1	
BENICAR	E	
BENICAR HCT	E	
bisoprolol fumarate oral	1	
bisoprolol-hydrochlorothiazide	1	
bumetanide oral	1	
BYSTOLIC	E	
CAMZYOS	E	
candesartan cilexetil	1	
CARDIZEM LA	E	
cartia xt	1	
carvedilol	1	
CATAPRES-TTS-1	E	
CATAPRES-TTS-2	E	
CATAPRES-TTS-3	E	
chlorthalidone	1	
clonidine hcl oral	1	
COLESTID	E	
CONJUPRI	E	
COREG	E	
COREG CR	E	
CORLANOR	3	QL
COZAAR	E	
CRESTOR	E	
diltiazem hcl er coated beads	1	
DIOVAN	E	
DIOVAN HCT	E	

Drug Name	Drug Tier	Notes
doxazosin mesylate oral	1	
EDARBI	3	ST
EDARBYCLOR	3	ST
enalapril maleate oral tablet	1	
ENTRESTO	2	QL
EXFORGE	E	
EXFORGE HCT	E	
ezetimibe	1	
fenofibrate micronized	1	
fenofibrate oral capsule 134 mg, 200 mg, 67 mg	1	
fenofibrate oral tablet	1	
flecainide acetate	1	
FUROSCIX	E	
furosemide oral tablet	1	
gemfibrozil oral	1	
guanfacine hcl	1	
HEMANGEOL	3	PA
hydralazine hcl oral	1	
hydrochlorothiazide oral	1	
HYZAAR	E	
icosapent ethyl	1	PA
INDERAL LA	E	
INDERAL XL	E	
INNOPRAN XL	E	
INPEFA	E	
irbesartan	1	
irbesartan-hydrochlorothiazide	1	
isosorbide mononitrate er	1	
KAPSPARGO SPRINKLE	E	
KATERZIA	E	
labetalol hcl oral	1	
LASIX	E	
LEQVIO	E	

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Drug Name	Drug Tier	Notes
LESCOL XL	E	
LEVAMLODIPINE MALEATE	E	
LIPITOR	E	
lisinopril oral	1	
lisinopril- hydrochlorothiazide	1	
LIVALO	E	
LODOCO	E	
losartan potassium oral	1	
losartan potassium-hctz	1	
LOTREL	E	
lovastatin oral	1	
LOVAZA	E	
metoprolol succinate er	1	
metoprolol tartrate oral	1	
MICARDIS	E	
MICARDIS HCT	E	
minoxidil oral	1	
MULTAQ	3	
nadolol oral	1	
nebivolol hcl	1	
NEXLETOL	2	PA; QL
NEXLIZET	2	PA; QL
nifedipine er	1	
nifedipine er osmotic release	1	
nitroglycerin sublingual	1	
NITROSTAT	E	
NORLIQVA	3	PA
NORVASC	E	
olmesartan medoxomil oral	1	
olmesartan medoxomil- hctz	1	
omega-3-acid ethyl esters	1	
PRALUENT	E	
pravastatin sodium	1	
prazosin hcl oral	1	

Drug Name	Drug Tier	Notes
propranolol hcl er	1	
propranolol hcl oral tablet	1	
QUESTRAN	E	
QUESTRAN LIGHT	E	
ramipril	1	
ranolazine er	1	
REPATHA	2	ST; SP; QL
REPATHA PUSHTRONEX SYSTEM	2	ST; SP; QL
REPATHA SURECLICK	2	ST; SP; QL
rosuvastatin calcium oral	1	
simvastatin oral	1	
SOAANZ	E	
sotalol hcl oral	1	
spironolactone oral tablet	1	
TEKTURNIA	2	
telmisartan	1	
TENORMIN	E	
TIKOSYN	E	
TOPROL XL	E	
torsemide	1	
triamterene-hctz	1	
TRIBENZOR	E	
TRICOR	E	
VALSARTAN ORAL SOLUTION	E	
valsartan oral tablet	1	
valsartan- hydrochlorothiazide	1	
VASCEPA	2	PA
verapamil hcl er oral tablet extended release	1	
VERQUVO	3	PA; QL
VYTORIN	E	
WELCHOL	E	

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Drug Name	Drug Tier	Notes
ZESTRIL	E	
ZETIA	E	
ZOCOR	E	
ZYPITAMAG	E	
Central Nervous System Agents - Drugs for Attention Deficit Disorder		
ADDERALL	E	
ADZENYS XR-ODT	E	
amphetamine-dextroamphetamine	1	QL
amphetamine-dextroamphetamine er	1	QL
amphet-dextroamphet 3-bead er	1	QL
atomoxetine hcl	1	QL
COTEMPLA XR-ODT	E	
DAYTRANA	E	
dexmethylphenidate hcl	1	QL
dexmethylphenidate hcl er	1	QL
dextroamphetamine sulfate oral tablet	1	QL
DYANAVEL XR	E	
EVEKEO	E	
FOCALIN	E	
FOCALIN XR	E	
guanfacine hcl er	1	
INTUNIV	E	
JORNAY PM	3	ST; QL
lisdexamfetamine dimesylate	1	QL
METADATE CD	E	
methylphenidate hcl er	1	QL
methylphenidate hcl er (cd)	1	QL
methylphenidate hcl er (la)	1	QL

Drug Name	Drug Tier	Notes
methylphenidate hcl er (osm) oral tablet extended release 18 mg, 27 mg, 36 mg, 54 mg, 72 mg	1	QL
methylphenidate hcl er (xr)	1	QL
methylphenidate hcl oral tablet	1	QL
MYDAYIS	E	
QELBREE	E	
QUILLICHEW ER	E	
QUILLIVANT XR	E	
RITALIN	E	
RITALIN LA	E	
STRATTERA	E	
VYVANSE ORAL CAPSULE	3	ST; QL
XELSTRYM	E	
ZENZEDI	E	
Central Nervous System Agents - Drugs for Multiple Sclerosis		
AMPYRA	E	
AUBAGIO	E	
AVONEX PEN	2	PA; SP; QL
AVONEX PREFILLED	2	PA; SP; QL
BAFIERTAM	2	PA; SP; QL
BETASERON	2	PA; SP; QL
COPAXONE SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 20 MG/ML	E	
COPAXONE SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 40 MG/ML	2	PA; SP; QL
dalfampridine er	1	PA; SP; QL
dimethyl fumarate oral	1	PA; SP; QL

Drug Name	Drug Tier	Notes
GILENYA ORAL CAPSULE 0.5 MG	E	
glatiramer acetate	1	PA; SP; QL
glatopa	1	PA; SP; QL
KESIMPTA	2	PA; SP; QL
MAVENCLAD	3	PA; SP
MAYZENT	3	PA; SP; QL
MAYZENT STARTER PACK	3	PA; SP; QL
PLEGRIDY	E	
PLEGRIDY STARTER PACK	E	
PONVORY	E	
PONVORY STARTER PACK	E	
REBIF	E	
REBIF REBIDOSE	E	
REBIF REBIDOSE TITRATION PACK	E	
REBIF TITRATION PACK	E	
TASCENSO ODT	E	
TECFIDERA	E	
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		
ADIPEX-P	E	
AUSTEDO	3	PA; SP; QL
AUSTEDO XR	3	PA; SP; QL
AUSTEDO XR PATIENT TITRATION	3	PA; SP; QL
CONTRACE	E	
DAYBUE	E	
GRALISE	3	ST; QL
HORIZANT	3	PA; QL

Drug Name	Drug Tier	Notes
IMCIVREE	E	
INGREZZA	3	PA; SP; QL
LYRICA	E	
LYRICA CR	E	
phentermine hcl oral	1	
pregabalin oral capsule	1	QL
QSYMIA	3	PA
RADICAVA ORS	2	PA; SP
RADICAVA ORS STARTER KIT	2	PA; SP
SAXENDA	3	PA; QL
TEGLUTIK	2	PA; QL
VYLEESI	3	PA; QL
WAINUA	3	PA; SP; QL
WEGOVY	3	PA; QL
ZEPBOUND SUBCUTANEOUS SOLUTION AUTO-INJECTOR	3	PA; QL
Dental and Oral Agents - Drugs for Mouth and Throat Conditions		
chlorhexidine gluconate mouth/throat	1	
lidocaine hcl mouth/throat	1	
lidocaine viscous hcl	1	
periogard	1	
Dermatological Agents - Drugs for Skin Conditions		
ABSORICA	E	
ABSORICA LD	3	PA
ACANYA	E	
accutane	1	
ACZONE	E	
adapalene-benzoyl peroxide external gel	1	

Drug Name	Drug Tier	Notes
ADBRY	2	PA; SP; QL
AKLIEF	3	PA
ALA SCALP	E	
ala-cort	1	
amneesteem	1	
AMZEEQ	3	
ARAZLO	E	
azelaic acid external	1	
BENZAMYCIN	E	
betamethasone dipropionate external	1	
CABTREO	E	
CALCIPOTRIENE EXTERNAL FOAM	E	
CIBINQO	2	PA; SP; QL
claravis	1	
clindacin etz external swab	1	
clindacin-p	1	
CLINDAGEL	E	
clindamycin phosphate-benzoyl peroxide	1	
clindamycin phosphate external lotion	1	
clindamycin phosphate external solution	1	
clindamycin phosphate external swab	1	
clobetasol propionate external cream 0.05 %	1	
clobetasol propionate external foam	1	
clobetasol propionate external ointment	1	
clobetasol propionate external shampoo	1	
clobetasol propionate external solution	1	
CLOBEX	E	
CLOBEX SPRAY	E	
clodan	1	

Drug Name	Drug Tier	Notes
CLODERM	E	
CORDRAN	E	
desonide external cream	1	
desonide external ointment	1	
DIFFERIN EXTERNAL CREAM	E	
DIFFERIN EXTERNAL GEL 0.3 %	E	
DIFFERIN EXTERNAL LOTION	E	
DUOBRII	E	
DUPIXENT	2	PA; SP; QL
EBGLYSS	2	PA; SP; QL
ELIDEL	E	
ENSTILAR	3	QL
EPIDUO	E	
EPIDUO FORTE	3	
EPSOLAY	E	
EUCRISA	2	ST
FABIOR	E	
FINACEA EXTERNAL FOAM	3	
finasteride oral tablet 1 mg	1	
fluocinonide external cream	1	
fluocinonide external ointment	1	
fluocinonide external solution	1	
fluorouracil external cream	1	
fluticasone propionate external cream	1	
HALOG	E	
hydrocortisone external cream 1 %, 2.5 %	1	
hydrocortisone external ointment 1 %, 2.5 %	1	
HYFTOR	E	

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Drug Name	Drug Tier	Notes
imiquimod external cream 3.75 %	1	ST
imiquimod external cream 5 %	1	
imiquimod pump	1	ST
IMPOYZ	E	
isotretinoin oral	1	
KLISYRI (250 MG)	3	ST
KLISYRI (350 MG)	3	ST
LEXETTE	E	
LITFULO	3	PA; SP; QL
METROGEL	E	
metronidazole external cream	1	
metronidazole external gel	1	
MIRVASO	2	
mometasone furoate external	1	
neuac	1	
NORITATE	E	
ONEXTON	3	ST
OPZELURA	2	ST; SP; QL
ORACEA	E	
pimecrolimus	1	ST; QL
PROPECIA	E	
QBREXZA	3	QL
RETIN-A	E	
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 %	3	PA
RHOFADE	E	
SANTYL	3	QL
SOFDRA	3	QL
SOOLANTRA	3	
SORILUX	E	

Drug Name	Drug Tier	Notes
TACLONEX	3	QL
tacrolimus external	1	QL
TAZAROTENE EXTERNAL FOAM	E	
TAZORAC	E	
TOPICORT SPRAY	E	
tretinoin external	1	
triamcinolone acetonide external cream	1	
triamcinolone acetonide external lotion	1	
triamcinolone acetonide external ointment	1	
triamcinolone in absorbase	1	
triderm	1	
TWYNEO	3	
VECTICAL	E	
VTAMA	2	PA
WINLEVI	E	
WYNZORA	3	QL
YCANTH	3	PA
zenatane	1	
ZIANA	E	
ZILXI	3	ST
ZORYVE EXTERNAL CREAM 0.15 %	2	ST
ZORYVE EXTERNAL CREAM 0.3 %	2	PA
ZORYVE EXTERNAL FOAM	E	
ZYCLARA	E	
ZYCLARA PUMP	E	
Diabetes - Antidiabetic Agents		
ALOGLIPTIN BENZOATE	E	
ALOGLIPTIN-METFORMIN HCL	E	
ALOGLIPTIN-PIOGLITAZONE	E	

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Drug Name	Drug Tier	Notes
BEXAGLIFLOZIN	E	
BRENZAVVY	E	
DAPAGLIFLOZIN PRO-METFORMIN ER	E	
DAPAGLIFLOZIN PROPANEDIOL	E	
FARXIGA	2	
glimepiride	1	
glipizide er	1	
glipizide ir	1	
glyburide oral	1	
GLYXAMBI	2	
INVOKAMET	E	
INVOKAMET XR	E	
INVOKANA	E	
JANUMET	2	
JANUMET XR	2	
JANUVIA	2	
JARDIANCE	2	
JENTADUETO	2	
JENTADUETO XR	2	
metformin hcl er	1	
metformin hcl er (mod)	E	
metformin hcl er (osm)	E	
metformin hcl oral tablet 1000 mg, 500 mg, 750 mg, 850 mg	1	
metformin hcl oral tablet 625 mg	E	
MOUNJARO	2	PA; QL
ONGLYZA	E	
OZEMPIC	2	PA; QL
pioglitazone hcl	1	
QTERN	E	
RYBELSUS	2	PA; QL
SEGLUROMET	E	
SITAGLIPTIN	E	
SITAGLIPTIN BASE- METFORMIN HCL	E	
SOLIQUA	2	

Drug Name	Drug Tier	Notes
STEGLATRO	E	
STEGLUJAN	E	
SYMLINPEN 120	3	PA
SYMLINPEN 60	3	PA
SYNJARDY	2	
SYNJARDY XR	2	
TRADJENTA	2	
TRIJARDY XR	2	
TRULICITY	2	PA; QL
TZIELD	E	
VICTOZA	E	
XIGDUO XR	2	
ZITUVIMET	E	
ZITUVIMET XR	E	
ZITUVIO	E	
Diabetes - Glucose Monitoring		
ACCU-CHEK AVIVA DEVICE	E	
ACCU-CHEK AVIVA PLUS KIT W/DEVICE	E	
ACCU-CHEK FASTCLIX LANCET KIT	2	
ACCU-CHEK GUIDE TEST STRIPS	E	
ACCU-CHEK GUIDE CONTROL	E	
ACCU-CHEK GUIDE KIT W/DEVICE	E	
ACCU-CHEK GUIDE TEST	E	
ACCU-CHEK SMARTVIEW CONTROL	E	
ACCU-CHEK SMARTVIEW TEST STRIPS	E	
ACCU-CHEK SOFTCLIX LANCET DEVICE KIT	2	

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Drug Name	Drug Tier	Notes
ACCUTREND GLUCOSE	E	
ACCUTREND GLUCOSE CONTROL	E	
ADVANCE INTUITION CONTROL	E	
ADVANCE INTUITION METER	E	
ADVANCE INTUITION MONITOR	E	
ADVANCE INTUITION TEST	E	
ADVANCE MICRO-DRAW CONTROL	E	
ADVANCE MICRO-DRAW METER	E	
ADVANCE MICRO-DRAW NORMAL	E	
ADVANCE MICRO-DRAW TEST	E	
ADVOCATE BLOOD GLUCOSE MONITOR	E	
ADVOCATE BLOOD GLUCOSE SYSTEM	E	
ADVOCATE CONTROL SOLUTION	E	
ADVOCATE REDI-CODE	E	
ADVOCATE REDI-CODE+	E	
ADVOCATE REDI-CODE+ CONTROL	E	
ADVOCATE REDI-CODE+ TEST	E	
ADVOCATE TEST	E	
AGAMATRIX AMP TEST	E	
AGAMATRIX CONTROL	E	
AGAMATRIX CONTROL LEVEL 2	E	
AGAMATRIX CONTROL LEVEL 4	E	

Drug Name	Drug Tier	Notes
AGAMATRIX JAZZ TEST	E	
AGAMATRIX JAZZ WIRELESS 2	E	
AGAMATRIX PRESTO	E	
AGAMATRIX PRESTO TEST	E	
ASSURE 3 CONTROL	E	
ASSURE 3 METER	E	
ASSURE 3 TEST	E	
ASSURE 4 CONTROL LEVEL 1 & 2	E	
ASSURE 4 METER	E	
ASSURE 4 TEST	E	
ASSURE DOSE CONTROL	E	
ASSURE DOSE NORM/HIGH CONTROL	E	
ASSURE II	E	
ASSURE II CHECK	E	
ASSURE II CONTROL	E	
ASSURE II CONTROL LEVEL 1 & 2	E	
ASSURE PLATINUM	E	
ASSURE PLATINUM METER	E	
ASSURE PRISM CONTROL LEVEL 1	E	
ASSURE PRISM MULTI METER	E	
ASSURE PRISM MULTI TEST	E	
ASSURE PRO BLOOD GLUCOSE METER	E	
ASSURE PRO CONTROL LEVEL 1 & 2	E	
ASSURE PRO TEST	E	
BD LATITUDE DIABETES	E	

Drug Name	Drug Tier	Notes
BD LOGIC BLOOD GLUCOSE MONITOR	E	
BIGFOOT UNITY PROGRAM	E	
BIOTEL CARE BLOOD GLUCOSE	E	
BIOTEL CARE BLOOD GLUCOSE SYST	E	
BIOTEL CARE TEST STRIPS	E	
BLOOD GLUCOSE MONITOR SYSTEM	E	
BLOOD GLUCOSE MONITORING 333	E	
BLOOD GLUCOSE SYSTEM PAK	E	
BLOOD GLUCOSE TEST	E	
BLOOD GLUCOSE TEST STRIPS 333	E	
BLULINK CONTROL HIGH & LOW	E	
BLULINK GLUCOSE MONITORING SYS	E	
BLULINK GLUCOSE TEST	E	
CAREONE BLOOD GLUCOSE SYSTEM	E	
CAREONE BLOOD GLUCOSE TEST	E	
CARESENS CONTROL A	E	
CARESENS CONTROL SOLUTION A/B	E	
CARESENS N FELIZ	E	
CARESENS N FELIZ BT	E	
CARESENS N GLUCOSE SYSTEM	E	
CARESENS N GLUCOSE TEST	E	
CARESENS N VOICE SYSTEM	E	

Drug Name	Drug Tier	Notes
CARETOUCH CONTROL SOL LEVEL 2	E	
CARETOUCH MONITOR SYSTEM	E	
CARETOUCH TEST	E	
CEQUR SIMPLICITY 2U 10PK	2	
CEQUR SIMPLICITY INSERTER	2	
CLEVER CHEK AUTO-CODE SYSTEM	E	
CLEVER CHEK AUTO-CODE TEST	E	
CLEVER CHEK AUTO-CODE VOICE	E	
CLEVER CHEK SYSTEM	E	
CLEVER CHEK TEST	E	
CLEVER CHOICE AUTO-CODE SYSTEM	E	
CLEVER CHOICE AUTO-CODE TEST	E	
CLEVER CHOICE GLUCOSE CONTROL	E	
CLEVER CHOICE MICRO SYSTEM	E	
CLEVER CHOICE MICRO TEST	E	
CLEVER CHOICE MINI SYSTEM	E	
CLEVER CHOICE NO CODING	E	
CLEVER CHOICE TALK SYSTEM	E	
CONTOUR NEXT EZ KIT W/DEVICE	2	
CONTOUR NEXT GEN MONITOR	2	
CONTOUR NEXT MONITOR KIT W/DEVICE	2	
CONTOUR NEXT ONE KIT	2	

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Drug Name	Drug Tier	Notes
CONTOUR NEXT GEN TEST STRIPS	2	QL
CONTOUR PLUS BLUE KIT W/DEVICE	2	
CONTOUR PLUS TEST STRIP	2	QL
CONTOUR TEST STRIPS	2	QL
COOL BLOOD GLUCOSE TEST STRIPS	E	
COOL CONTROL A	E	
COOL CONTROL B	E	
COOL MONITOR	E	
COOL MONITOR KIT	E	
CVS ADVANCED GLUCOSE TEST	E	
CVS GLUCOSE METER TEST STRIPS	E	
CVS TRUE METRIX GLUCOSE TEST	E	
D-CARE BLOOD GLUCOSE	E	
D-CARE GLUCOMETER	E	
DEXCOM G6 RECEIVER	2	PA
DEXCOM G6 SENSOR	2	PA
DEXCOM G6 TRANSMITTER	2	PA
DEXCOM G7 RECEIVER	2	PA
DEXCOM G7 SENSOR	2	PA
DIABETES CARE	E	
DIATHRIVE BLOOD GLUCOSE METER	E	
DIATHRIVE BLOOD GLUCOSE TEST	E	
DIATHRIVE GLUCOSE CONTROL SOLN	E	
DIATHRIVE GLUCOSE TEST	E	

Drug Name	Drug Tier	Notes
DIATHRIVE+ GLUCOSE MONITOR	E	
DIATHRIVE+ GLUCOSE TEST	E	
DUO-CARE CONTROL SOLUTION	E	
DUO-CARE TEST	E	
EASY MAX BLOOD GLUCOSE TEST	E	
EASY MAX T1 GLUCOSE SYSTEM	E	
EASY PLUS II CONTROL	E	
EASY PLUS II GLUCOSE SYSTEM	E	
EASY PLUS II GLUCOSE TEST	E	
EASY STEP CONTROL	E	
EASY STEP GLUCOSE MONITOR	E	
EASY STEP TEST	E	
EASY TALK BLOOD GLUCOSE SYSTEM	E	
EASY TALK BLOOD GLUCOSE TEST	E	
EASY TALK CONTROL	E	
EASY TALK PLUS II CONTROL	E	
EASY TALK PLUS II TEST STRIPS	E	
EASY TOUCH CONTROL HIGH & LOW	E	
EASY TOUCH GLUCOSE SYSTEM	E	
EASY TOUCH HEALTHPRO GLUCOSE	E	
EASY TOUCH HEALTHPRO HIGH/LOW	E	
EASY TOUCH TEST	E	

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Drug Name	Drug Tier	Notes
EASY TRAK BLOOD GLUCOSE SYSTEM	E	
EASY TRAK BLOOD GLUCOSE TEST	E	
EASY TRAK CONTROL	E	
EASY TRAK II BLOOD GLUCOSE SYS	E	
EASY TRAK II CONTROL	E	
EASY TRAK II GLUCOSE TEST	E	
EASYGLUCO	E	
EASYMAX 15 LEVEL 2 CONTROL	E	
EASYMAX 15 LEVEL 2-3 CONTROL	E	
EASYMAX 15 TEST	E	
EASYMAX CONTROL	E	
GLUCOSE CONTROL SOLUTIONS	E	
EASYMAX NG BLOOD GLUCOSE	E	
BLOOD GLUCOSE TEST STRIPS	E	
EASYMAX V BLOOD GLUCOSE	E	
EASYPRO BLOOD GLUCOSE MONITOR	E	
EASYPRO BLOOD GLUCOSE TEST	E	
EASYPRO PLUS	E	
ELEMENT AUTOCODE SYSTEM	E	
ELEMENT COMPACT CONTROL 2	E	
ELEMENT COMPACT CONTROL 3	E	
ELEMENT COMPACT GLUCOSE SYSTEM	E	
ELEMENT COMPACT TEST	E	

Drug Name	Drug Tier	Notes
ELEMENT COMPACT V GLUCOSE SYS	E	
ELEMENT CONTROL	E	
ELEMENT PLUS	E	
ELEMENT TEST	E	
EMBRACE BLOOD GLUCOSE MONITOR	E	
EMBRACE BLOOD GLUCOSE TEST	E	
EMBRACE CONTROL	E	
EMBRACE EVO BLOOD GLUCOSE TEST	E	
EMBRACE EVO CONTROL LEVEL 1	E	
EMBRACE EVO GLUCOSE MONITOR	E	
EMBRACE EVO GLUCOSE MONITORING	E	
EMBRACE GLUCOSE CONTROL	E	
EMBRACE PRO GLUCOSE CONTROL	E	
EMBRACE PRO GLUCOSE METER	E	
EMBRACE PRO GLUCOSE TEST	E	
EMBRACE TALK BLOOD GLUCOSE	E	
EMBRACE TALK GLUCOSE CONTROL	E	
EMBRACE TALK GLUCOSE TEST	E	
EMBRACE TALK MONITORING SYSTEM	E	
EMBRACE WAVE BLOOD GLUCOSE	E	
EMBRACE WAVE GLUCOSE METER	E	
ENLITE GLUCOSE SENSOR	3	PA

Drug Name	Drug Tier	Notes
EQ BLOOD GLUCOSE TEST	E	
EVERSENSE 365 SENSOR/HOLDER	E	
EVERSENSE 365 SMART TRANSMIT	E	
EVERSENSE SENSOR/HOLDER	E	
EVERSENSE SMART TRANSMITTER	E	
EVOLUTION AUTOCODE	E	
EVOLUTION CONTROL	E	
FIFTY50 GLUCOSE METER 2.0	E	
FIFTY50 GLUCOSE TEST 2.0	E	
FORA 6 CONNECT	E	
FORA 6 CONNECT/GTEL TEST	E	
FORA CONTROL	E	
FORA D40/G31 BLOOD GLUCOSE	E	
FORA G20 BLOOD GLUCOSE SYSTEM	E	
FORA G20 BLOOD GLUCOSE TEST	E	
FORA G30A BLOOD GLUCOSE SYSTEM	E	
FORA GD20 BLOOD GLUCOSE SYSTEM	E	
FORA GD20 TEST	E	
FORA GD50 BLOOD GLUCOSE SYSTEM	E	
FORA GD50 BLOOD GLUCOSE TEST	E	
FORA GTEL BLOOD GLUCOSE SYSTEM	E	
FORA GTEL BLOOD GLUCOSE TEST	E	

Drug Name	Drug Tier	Notes
FORA PREMIUM V10 BLE SYSTEM	E	
FORA TEST N' GO MONITOR	E	
FORA TN'G ADVANCE PRO IN VITRO	E	
FORA TN'G VOICE	E	
FORA TN'G/TN'G VOICE	E	
FORA V10 BLOOD GLUCOSE TEST	E	
FORA V12 BLOOD GLUCOSE SYSTEM	E	
FORA V30A BLOOD GLUCOSE TEST	E	
FORACARE GD40 MONITOR	E	
FORACARE GD40 TEST	E	
FORACARE GDH CONTROL	E	
FORACARE PREMIUM V10	E	
FORACARE PREMIUM V10 TEST	E	
FORACARE TEST N GO MONITOR	E	
FORACARE TEST N GO TEST	E	
FREESTYLE CONTROL SOLUTION	E	
FREESTYLE FREEDOM LITE	E	
FREESTYLE INSULINX TEST	E	
FREESTYLE LIBRE 14 DAY READER	E	
FREESTYLE LIBRE 14 DAY SENSOR	E	
FREESTYLE LIBRE 2 PLUS SENSOR	E	
FREESTYLE LIBRE 2 READER	E	

Drug Name	Drug Tier	Notes
FREESTYLE LIBRE 2 SENSOR	E	
FREESTYLE LIBRE 3 PLUS SENSOR	E	
FREESTYLE LIBRE 3 READER	E	
FREESTYLE LIBRE 3 SENSOR	E	
FREESTYLE LIBRE READER	E	
FREESTYLE LITE	E	
FREESTYLE LITE TEST	E	
FREESTYLE PRECISION NEO SYSTEM	E	
FREESTYLE PRECISION NEO TEST	E	
FREESTYLE TEST	E	
GE100 BLOOD GLUCOSE SYSTEM	E	
GE100 BLOOD GLUCOSE TEST	E	
GE100 CONTROL	E	
GENULTIMATE TEST	E	
GHT BLOOD GLUCOSE MONITOR	E	
GHT TEST	E	
GLUCO PERFECT 3 METER	E	
GLUCO PERFECT 3 TEST	E	
GLUCOCARD 01 BLOOD GLUCOSE	E	
GLUCOCARD 01 CONTROL	E	
GLUCOCARD 01 SENSOR PLUS	E	
GLUCOCARD 01 TEST IN VITRO STRIP	E	
GLUCOCARD 01-MINI GLUCOSE	E	

Drug Name	Drug Tier	Notes
GLUCOCARD EXPRESSION CONTROL	E	
GLUCOCARD EXPRESSION MONITOR	E	
GLUCOCARD EXPRESSION TEST	E	
GLUCOCARD SHINE	E	
GLUCOCARD SHINE CONNEX	E	
GLUCOCARD SHINE CONTROL	E	
GLUCOCARD SHINE EXPRESS	E	
GLUCOCARD SHINE TEST	E	
GLUCOCARD SHINE XL	E	
GLUCOCARD VITAL MONITOR	E	
GLUCOCARD VITAL TEST	E	
GLUCOCARD X-METER	E	
GLUCOCARD X-SENSOR	E	
GLUCOCARD X-SENSOR CONTROL	E	
GLUCOCOM BLOOD GLUCOSE MONITOR	E	
GLUCOCOM CONTROL	E	
GLUCOCOM MONITOR	E	
GLUCOCOM TEST	E	
GLUCONAVII BLOOD GLUCOSE SYS	E	
GLUCONAVII BLOOD GLUCOSE TEST	E	
GLUCOSE METER TEST	E	
GNP EASY TOUCH CONT HIGH/LOW	E	

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Drug Name	Drug Tier	Notes
GNP EASY TOUCH GLUCOSE METER	E	
GNP EASY TOUCH GLUCOSE TEST	E	
GNP TRUE METRIX AIR METER	E	
GNP TRUE METRIX GLUCOSE METER	E	
GNP TRUE METRIX GLUCOSE STRIPS	E	
GNP TRUETRACK SMART SYSTEM	E	
GNP TRUETRACK TEST STRIPS	E	
GOJJI BLOOD GLUCOSE TEST	E	
GOJJI CONTROL	E	
GOODSENSE BLOOD GLUCOSE	E	
GUARDIAN 4 GLUCOSE SENSOR	3	PA
GUARDIAN 4 TRANSMITTER	3	PA
GUARDIAN LINK 3 TRANSMITTER	3	PA
GUARDIAN SENSOR 3	3	PA
HEALTHPRO BLOOD GLUCOSE MONITO	E	
HM EMBRACE TALK SYSTEM	E	
HW EMBRACE PRO GLUCOSE METER	E	
HW EMBRACE PRO GLUCOSE TEST	E	
HW EMBRACE TALK BLOOD GLUCOSE	E	
HW EMBRACE TALK GLUCOSE TEST	E	
IGLUCOSE MONITORING SYSTEM	E	
IGLUCOSE TEST STRIPS	E	

Drug Name	Drug Tier	Notes
IHEALTH BLOOD GLUCOSE TEST STR	E	
IHEALTH CONTROL SOLUTION	E	
IHEALTH GLUCO+ KIT 10	E	
IHEALTH GLUCO+ KIT 100	E	
IN TOUCH	E	
IN TOUCH BLOOD GLUCOSE TEST	E	
IN TOUCH GLUCOSE CONTROL	E	
INFINITY BLOOD GLUCOSE SYSTEM	E	
INFINITY BLOOD GLUCOSE TEST	E	
INFINITY CONTROL	E	
INFINITY VOICE	E	
KROGER BLOOD GLUCOSE	E	
KROGER BLOOD GLUCOSE TEST	E	
KROGER HEALTHPRO CONTROL HI/LO	E	
KROGER HEALTHPRO GLUCOSE TEST	E	
KROGER PREMIUM BLOOD GLUCOSE	E	
KROGER PREMIUM GLUCOSE TEST	E	
LANCETS IN VITRO STRIP	E	
MEDISENSE GLUCOSE KETONE CONTR	E	
MEDISENSE HI/MID/LOW CONTROL	E	
MEIJER BLOOD GLUCOSE	E	

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Drug Name	Drug Tier	Notes
MEIJER BLOOD GLUCOSE TEST	E	
MEIJER ESSENTIAL BLOOD GLUCOSE	E	
MEIJER ESSENTIAL GLUCOSE TEST	E	
MEIJER PREMIUM BLOOD GLUCOSE	E	
MEIJER TRUE2GO BLOOD GLUCOSE	E	
MEIJER TRUERESULT GLUCOSE SYS	E	
MEIJER TRUETEST TEST	E	
MEIJER TRUETRACK GLUCOSE SYS	E	
MEIJER TRUETRACK TEST	E	
MICRODOT BLOOD GLUCOSE SYSTEM	E	
MICRODOT CONTROL HIGH/LOW	E	
MICRODOT TEST	E	
MM BLOOD GLUCOSE SYSTEM	E	
MM BLOOD GLUCOSE SYSTEM REFILL	E	
MM BLULINK GLUCOSE MONIT SYS	E	
MM BLULINK GLUCOSE TEST	E	
MM EASY TOUCH GLUCOSE	E	
MM EASY TOUCH GLUCOSE METER	E	
MYGLUCOHEALTH BLOOD GLUCOSE	E	
MYGLUCOHEALTH CONTROL	E	
MYGLUCOHEALTH TEST	E	

Drug Name	Drug Tier	Notes
NEUTEK 2TEK CONTROL	E	
NEUTEK 2TEK TEST	E	
NOVA MAX BLOOD GLUCOSE SYSTEM	E	
NOVA MAX GLUCOSE TEST	E	
NOVA MAX PLUS GLU/KET CONTROL	E	
ON CALL EXPRESS BLOOD GLUCOSE	E	
ON CALL EXPRESS MONITORING SYS	E	
ONE DROP BLOOD GLUCOSE MONITOR	E	
ONE DROP TEST	E	
ONETOUCH ULTRA TEST STRIPS	E	
ONETOUCH ULTRA 2 KIT W/DEVICE	E	
ONETOUCH ULTRA BLUE TEST	E	
ONETOUCH ULTRA CONTROL	E	
ONETOUCH ULTRA IN VITRO LIQUID	E	
ONETOUCH ULTRA TEST STRIPS	E	
ONETOUCH VERIO KIT W/DEVICE	E	
ONETOUCH VERIO FLEX SYSTEM	E	
ONETOUCH VERIO REFLECT KIT W/DEVICE	E	
OPTIUMEZ TEST	E	
PHARMACIST CHOICE AUTOCODE	E	
PHARMACIST CHOICE AUTOCODE SYS	E	
PHARMACIST CHOICE MINI SYSTEM	E	

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Drug Name	Drug Tier	Notes
PHARMACIST CHOICE NO CODING	E	
PIP BLOOD GLUCOSE MONITORING	E	
PIP BLOOD GLUCOSE TEST STRIP	E	
PIP GLUCOSE CONTROL SOLUTION	E	
POCKETCHEM EZ CONTROL	E	
POCKETCHEM EZ SYSTEM	E	
POCKETCHEM EZ TEST	E	
POGO AUTOMATIC BLOOD GLUCOSE	E	
POGO AUTOMATIC TEST CARTRIDGES	E	
PRECISION GLUCOSE KETONE CONTR	E	
PRECISION XTRA	E	
PRECISION XTRA BLOOD GLUCOSE	E	
PREMIUM BLOOD GLUCOSE TEST	E	
PRO VOICE V8/V9 GLUCOSE	E	
PRO VOICE V9 GLUCOSE SYSTEM	E	
PRODIGY AUTOCODE BLOOD GLUCOSE	E	
PRODIGY CONTROL SOLUTION	E	
PRODIGY NO CODING BLOOD GLUC	E	
PRODIGY POCKET BLOOD GLUCOSE	E	
PRODIGY VOICE BLOOD GLUCOSE	E	
PTS PANELS EGLU TEST	E	

Drug Name	Drug Tier	Notes
QUICK TOUCH BLOOD GLUCOSE	E	
QUICK TOUCH BLOOD GLUCOSE TEST	E	
QUICKTEK	E	
QUICKTEK CONTROL SOLUTION	E	
QUICKTEK TEST	E	
QUICKTEK/METER	E	
QUINTET AC BLOOD GLUCOSE	E	
QUINTET AC BLOOD GLUCOSE TEST	E	
QUINTET BLOOD GLUCOSE SYSTEM	E	
QUINTET BLOOD GLUCOSE TEST	E	
QUINTET CONTROL HIGH/NORMAL	E	
REFUAH PLUS BLOOD GLUCOSE TEST	E	
REFUAH PLUS GLUCOSE CONTROL	E	
REFUAH PLUS MONITORING SYSTEM	E	
RELION ALL-IN-ONE	E	
RELION BLOOD GLUCOSE TEST	E	
RELION CONFIRM GLUCOSE MONITOR	E	
RELION CONFIRM/MICRO TEST	E	
RELION GLUCOSE TEST STRIPS	E	
RELION MICRO	E	
RELION PREMIER BLU MONITOR	E	
RELION PREMIER CLASSIC	E	

Drug Name	Drug Tier	Notes
RELION PREMIER COMPACT SYSTEM	E	
RELION PREMIER TEST	E	
RELION PREMIER VOICE MONITOR	E	
RELION PRIME MONITOR	E	
RELION PRIME TEST	E	
RELION TRUE MET AIR GLUC METER	E	
RELION TRUE METRIX TEST STRIPS	E	
RELION ULTIMA GLUCOSE SYSTEM	E	
RELION ULTIMA TEST	E	
REXALL BLOOD GLUCOSE SYSTEM	E	
REXALL BLOOD GLUCOSE TEST	E	
RIGHTEST GC300 CONTROL	E	
RIGHTEST GM100 BLOOD GLUCOSE	E	
RIGHTEST GM300 BLOOD GLUCOSE	E	
RIGHTEST GM550 BLOOD GLUCOSE	E	
RIGHTEST GS100 BLOOD GLUCOSE	E	
RIGHTEST GS300 BLOOD GLUCOSE	E	
RIGHTEST GS550 BLOOD GLUCOSE	E	
RIGHTEST GT333 BLOOD GLUCOSE	E	
RIGHTEST GT333 GLUCOSE TEST	E	
SMART SENSE PREMIUM SYSTEM	E	
SMART SENSE PREMIUM TEST	E	

Drug Name	Drug Tier	Notes
SMART SENSE VALUE GLUCOSE SYS	E	
SMART SENSE VALUE TEST	E	
SMARTTEST BLOOD GLUCOSE TEST	E	
SMARTTEST CONTROL MEDIUM	E	
SMARTTEST EJECT	E	
SMARTTEST EJECT STARTER	E	
SMARTTEST PERSONA STARTER	E	
SMARTTEST PRONTO STARTER	E	
SMARTTEST PROTEGE	E	
SMARTTEST PROTEGE STARTER	E	
SOLUS V2 BLOOD GLUCOSE SYSTEM	E	
SOLUS V2 CONTROL	E	
SOLUS V2 TEST	E	
SUPREME II HIGH/LOW CONTROL	E	
SUPREME TEST	E	
TAI DOC CONTROL	E	
TEMPO REFILL	E	
TEMPO SMART BUTTON	E	
TEMPO WELCOME	E	
TGT BLOOD GLUCOSE MONITORING	E	
TGT BLOOD GLUCOSE TEST	E	
TRUE FOCUS BLOOD GLUCOSE METER	E	
TRUE FOCUS BLOOD GLUCOSE STRIP	E	
TRUE METRIX AIR GLUCOSE METER	E	

Drug Name	Drug Tier	Notes
TRUE METRIX BLOOD GLUCOSE TEST	E	
TRUE METRIX GO GLUCOSE METER	E	
TRUE METRIX LEVEL 1	E	
TRUE METRIX LEVEL 2	E	
TRUE METRIX LEVEL 3	E	
TRUE METRIX METER	E	
TRUE METRIX PRO BLOOD GLUCOSE	E	
TRUERESULT BLOOD GLUCOSE	E	
TRUETEST TEST	E	
TRUETRACK BLOOD GLUCOSE	E	
TRUETRACK SMART SYSTEM	E	
TRUETRACK TEST	E	
UNISTRIp CONTROL	E	
UNISTRIp1 GENERIC	E	
VERASENS BLOOD GLUCOSE METER	E	
VERASENS BLOOD GLUCOSE SYSTEM	E	
VERASENS BLOOD GLUCOSE TEST	E	
VERASENS GLUCOSE CONTROL	E	
VIVAGUARD INO CONTROL SOLUTION	E	
VIVAGUARD INO GLUCOSE METER	E	
VIVAGUARD INO SMART GLUC METER	E	
VIVAGUARD INO TEST STRIPS	E	
Diabetes - Glycemic Agents		
BAQSIMI ONE PACK	2	
BAQSIMI TWO PACK	2	

Drug Name	Drug Tier	Notes
GLUCAGON EMERGENCY KIT INJECTION SOLUTION RECONSTITUTED	2	
GVOKE HYPOPEN 1-PACK	E	
GVOKE HYPOPEN 2-PACK	E	
GVOKE KIT	E	
GVOKE PFS	E	
ZEGALOGUE	2	
Diabetes - Insulins		
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" 1 ML, 31G X 5/16" 0.3 ML, 31G X 5/16" 0.5 ML, 31G X 5/16" 1 ML	2	
HUMALOG	2	
HUMALOG KWIKPEN	2	
HUMALOG MIX 50/50 KWIKPEN	2	
HUMALOG MIX 75/25 KWIKPEN	2	
HUMALOG MIX 75/25 VIAL	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	

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Drug Name	Drug Tier	Notes
HUMULIN R U-500 VIAL	2	
HUMULIN R VIAL	2	
INSULIN ASP PROT & ASP FLEXPEN	E	
INSULIN ASPART	E	
INSULIN ASPART FLEXPEN	E	
INSULIN ASPART PENFILL	E	
INSULIN ASPART PROT & ASPART	E	
INSULIN DEGLUDEC	E	
INSULIN DEGLUDEC FLEXTouch	E	
INSULIN GLARGINE MAX SOLOSTAR	E	
INSULIN GLARGINE SOLOSTAR SUBCUTANEOUS SOLUTION PEN-INJECTOR 300 UNIT/ML	E	
INSULIN GLARGINE-YFGN	E	
INSULIN LISPRO	2	
INSULIN LISPRO (1 UNIT DIAL)	2	
INSULIN LISPRO JUNIOR KWIKPEN	2	
INSULIN LISPRO PROT & LISPRO	2	
LANTUS SOLOSTAR	2	
LANTUS U-100 VIAL	2	
LYUMJEV KWIKPEN	2	
LYUMJEV TEMPO PEN	E	
LYUMJEV VIAL	2	
SEMGLEE (YFGN)	E	
TOUJEO MAX SOLOSTAR	2	
TOUJEO SOLOSTAR	2	
TRESIBA	E	

Drug Name	Drug Tier	Notes
TRESIBA FLEXTouch	E	
Electrolytes / Minerals / Metals / Vitamins		
ACCRUFER	E	
ALTRIXA	E	
AMLADEX	E	
AZESCO	E	
CARNITOR ORAL	E	
CARNITOR SF	E	
CITRANATAL 90 DHA	E	
CITRANATAL ASSURE	E	
CITRANATAL HARMONY	E	
CITRANATAL MEDLEY	E	
CUVRIOR	E	
cyanocobalamin injection solution 1000 mcg/ml	1	
cyanocobalamin nasal	1	
DAVIMET-FLUORIDE	E	
DAVIMET-M	E	
DAYAVITE	E	
DERMACINRX DAVIMET	E	
DERMACINRX MULTITAM	E	
DERMACINRX PRETRATE	E	
DERMACINRX RIBOTIN-E	E	
DERMACINRX ZINTREXYL-C	E	
DEXATRAN	E	
DEXIFOL	E	
DIATROL	E	
ENBRACE HR	E	
ergocalciferol oral capsule	1	

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Drug Name	Drug Tier	Notes
FEONYX	E	
FINAZOL	E	
FLORAFOL FE PEDIATRIC	E	
FLORAFOL PEDIATRIC	E	
FLORRAVITE	E	
FLORRAXYL	E	
FLOTREX	E	
FOLAGENT DHA	E	
FOLAMAX	E	
FOLAMED DHA	E	
FOLAPRIME	E	
FOLCYTEINE	E	
FOLETRA	E	
folic acid oral tablet 1 mg	1	
FOLIFLEX	E	
FOLIKA-BC	E	
FOLITIN-Z	E	
FOLTREXYL	E	
HYLAVITE	E	
HYLAZINC	E	
JENLIVA PRENATAL/POSTNAT AL	E	
JYNARQUE	E	
KEYLOSA	E	
klor-con 10	1	
klor-con m10	1	
klor-con m15	1	
klor-con m20	1	
klor-con oral tablet extended release	1	
LIVITA ADULTS	E	
LIVITA CHILDREN	E	
LOKELMA	3	
MATERNACEL	E	
MEDI TAB	E	
MENATROL	E	

Drug Name	Drug Tier	Notes
MINCORA	E	
MI-VITE RX	E	
MULTIPRO	E	
MULTITOL-M	E	
MULTI-VIT-FLOR	E	
NASCOBAL	3	
NATAL PNV	E	
NEEVO DHA	E	
NEO-VITAL RX	E	
NESTABS DHA	E	
NESTABS ONE	E	
NICADAN	E	
NICAZEL	E	
NICAZEL FORTE	E	
NICOMIDE	E	
NITRIVIA	E	
NOVITE	E	
NUTRA-Z+	E	
OB COMPLETE ONE	E	
OB COMPLETE PETITE	E	
OB COMPLETE PREMIER	E	
PAXLYTE	E	
PNV TABS 20-1	E	
POKONZA	E	
POLY-VI-FLOR	E	
POLY-VI-FLOR/IRON	E	
potassium chloride crys er	1	
potassium chloride er	1	
potassium citrate er	1	
PREGEN DHA	E	
PREGENNA	E	
PRENATE	E	
PRENATE DHA	E	
PRENATE ELITE	E	
PRENATE ENHANCE	E	
PRENATE ESSENTIAL	E	

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Drug Name	Drug Tier	Notes
PRENATE MINI	E	
PRENATE PIXIE	E	
PRENATE RESTORE	E	
PRENATOL-M	E	
PRENATRIX	E	
PRENATRYL	E	
PRIMACARE	E	
PROFOLA	E	
PUREVITA SUPER B-COMPLEX	E	
QUFLORA FE	E	
REMEDIENT	E	
SELECT-OB ORAL TABLET CHEWABLE 29-0.6-0.4 MG	E	
SELECT-OB+DHA	E	
SYPRINE	E	
TM-DAILY VITE	E	
TM-VITE RX	E	
TRISTART DHA	E	
TRIVIA COMPLETE	E	
TRONVITE	E	
TRUE DAILY VITE	E	
TRUE MULTIVITAMIN	E	
VELTASSA	3	
VENEXA	E	
VENEXA FE	E	
VENTRIXYL	E	
VENTRIXYL FE	E	
VITACORE	E	
VITAFOL FE+	E	
VITAFOL GUMMIES	E	
VITAFOL ULTRA	E	
VITAFOL-OB	E	
VITAFOL-OB+DHA	E	
VITAFOL-ONE	E	
VITALARA	E	
VITAMEDMD ONE RX/QUATREFOLIC	E	

Drug Name	Drug Tier	Notes
vitamin d (ergocalciferol) oral capsule 1.25 mg (50000 ut), 50000 unit	1	
VITA-PAC	E	
VITAPEARL	E	
VITASURE	E	
VITATHELY WITH GINGER	E	
VITRAMYN	E	
VITRANOL	E	
VITRANOL FE	E	
VITREXATE	E	
VITREXATE FE	E	
VITREXYL	E	
VITREXYL + IRON	E	
WELLFOLA	E	
WESTGEL DHA	E	
ZALVIT	E	
ZELDANA	E	
ZIPHEX	E	
Gastrointestinal Agents - Drugs for Acid Reflux and Ulcer		
ACIPHEX	E	
CARAFATE ORAL TABLET	E	
DEXILANT	E	
dexlansoprazole	1	QL
esomeprazole magnesium oral capsule delayed release	1	QL
famotidine oral suspension reconstituted	1	
famotidine oral tablet 20 mg, 40 mg	1	
KONVOMEF	E	
lansoprazole oral capsule delayed release	1	QL

Drug Name	Drug Tier	Notes
misoprostol oral	1	
NEXIUM ORAL CAPSULE DELAYED RELEASE	E	
omeprazole oral capsule delayed release	1	QL
omeprazole-sodium bicarbonate	E	
pantoprazole sodium oral tablet delayed release	1	QL
PREVACID	E	
PREVACID SOLUTAB	E	
PROTONIX ORAL TABLET DELAYED RELEASE	E	
RABEPRAZOLE SODIUM ORAL CAPSULE SPRINKLE	E	
rabeprazole sodium oral tablet delayed release	1	QL
sucralfate oral	1	
VOQUEZNA	E	
Gastrointestinal Agents - Drugs for Bowel, Intestine and Stomach Conditions		
AMITIZA	E	
CLENPIQ	3	
constulose	1	
dicyclomine hcl oral capsule	1	
dicyclomine hcl oral tablet	1	
diphenoxylate-atropine oral tablet	1	
gavilyte-c	1	
gavilyte-g	1	
gavilyte-n with flavor pack	1	

Drug Name	Drug Tier	Notes
glycopyrrolate oral tablet 1 mg, 2 mg	1	QL
GOLYTELY	E	
IBSRELA	E	
IQIRVO	3	PA; SP; QL
lactulose oral solution	1	
LINZESS	2	ST; QL
LIVDELZI	3	PA; SP; QL
lubiprostone	1	QL
MOTOFEN	E	
MOVANTIK	E	
MOVIPREP	E	
na sulfate-k sulfate-mg sulf	1	
OMECLAMOX-PAK	2	
peg 3350-kcl-na bicarb- nacl	1	
peg-3350/electrolytes	1	
PLENVU	E	
PYLERA	3	
REBYOTA	3	PA; SP
RELISTOR	E	
RELTONE	E	
REZDIFFRA	E	
SUFLAVE	3	
SUPREP BOWEL PREP KIT	3	
SUTAB	3	
SYMPROIC	2	ST; QL
TALICIA	3	
TRULANCE	E	
URSODIOL ORAL CAPSULE 200 MG, 400 MG	E	
VIBERZI	3	PA; QL
VOQUEZNA DUAL PAK	3	PA
VOQUEZNA TRIPLE PAK	3	PA
VOWST	E	

Drug Name	Drug Tier	Notes
Genetic or Enzyme Disorder - Drugs for Replacement, Modification, Treatment		
AMONDYS 45	E	
BUPHENYL	E	
CERDELGA	3	PA; SP
CREON	2	
DUVYZAT	E	
ELEVIDYS	E	
ELFABRIO	E	
EXONDYS 51	E	
FABRAZYME	2	PA; SP
JAVYGTOR	E	
KUVAN	E	
OLPRUVA (2 GM DOSE)	E	
OLPRUVA (3 GM DOSE)	E	
OLPRUVA (4 GM DOSE)	E	
OLPRUVA (5 GM DOSE)	E	
OLPRUVA (6 GM DOSE)	E	
OLPRUVA (6.67 GM DOSE)	E	
ORFADIN	3	PA; SP
PALYNZIQ	E	
PANCREAZE	E	
PERTZYE	E	
PHEBURANE	3	PA; SP
RAVICTI	E	
STRENSIQ	2	PA; SP
VILTEPSO	E	
VIOKACE	E	
VYONDYS 53	E	
ZENPEP	2	
ZOLGENSMA	3	PA; SP

Drug Name	Drug Tier	Notes
Genitourinary Agents - Drugs for Bladder, Genital and Kidney Conditions		
AURYXIA	3	
CIALIS	E	
CUPRIMINE	E	
DEPEN TITRATABS	2	SP
ELMIRON	E	
GEMTESA	E	
mirabegron er	1	
MYRBETRIQ ORAL SUSPENSION RECONSTITUTED ER	E	
MYRBETRIQ ORAL TABLET EXTENDED RELEASE 24 HOUR	2	
oxybutynin chloride er	1	
oxybutynin chloride oral tablet	1	
penicillamine oral capsule	E	
phenazopyridine hcl oral tablet 100 mg, 200 mg	1	
sildenafil citrate oral tablet 100 mg, 25 mg, 50 mg	1	QL
solifenacin succinate	1	
STENDRA	E	
tadalafil oral	1	QL
THIOLA	3	SP
THIOLA EC	3	SP
tolterodine tartrate er	1	
TOVIAZ	E	
VELPHORO	E	
VESICARE	E	
VESICARE LS	E	
VIAGRA	E	

Drug Name	Drug Tier	Notes
Genitourinary Agents - Drugs for Prostate Conditions		
alfuzosin hcl er	1	
AVODART	E	
dutasteride oral	1	
finasteride oral tablet 5 mg	1	
tamsulosin hcl	1	
Hormonal Agents - Adrenal		
ALKINDI SPRINKLE	E	
CORTEF	E	
CORTISONE ACETATE ORAL	E	
dexamethasone oral tablet	1	
EMFLAZA	E	
fludrocortisone acetate oral	1	
HEMADY	E	
hydrocortisone oral	1	
KENALOG-40	E	
methylprednisolone oral	1	
prednisolone oral solution	1	
prednisolone sodium phosphate oral solution	1	
prednisone oral tablet	1	
prednisone oral tablet therapy pack	1	
RAYOS	E	
Hormonal Agents - Men's Health		
ANDROGEL PUMP	E	
AVEED	E	
DEPO-TESTOSTERONE	E	
JATENZO	E	
NATESTO	E	

Drug Name	Drug Tier	Notes
TESTIM	E	
TESTOPEL	E	
testosterone cypionate intramuscular	1	PA
testosterone transdermal gel	1	PA
TLANDO	E	
UNDECATREX	E	
VOGELXO	E	
VOGELXO PUMP	E	
XYOSTED	E	
Hormonal Agents - Pituitary		
ACTHAR	2	PA; SP
ACTHAR GEL	2	PA; SP
cabergoline	1	
CETROTIDE	E	
CORTROPHIN	2	PA; SP
desmopressin acetate oral	1	
FOLLISTIM AQ	2	PA; SP
ganirelix acetate	1	PA; SP
GENOTROPIN	E	
GENOTROPIN MINIQUICK	E	
GONAL-F	E	
GONAL-F RFF	E	
GONAL-F RFF REDIJECT	E	
HUMATROPE	E	
ISTURISA	E	
LUPRON DEPOT (1-MONTH) INTRAMUSCULAR KIT 7.5 MG	2	PA; SP
LUPRON DEPOT (3-MONTH) INTRAMUSCULAR KIT 22.5 MG	2	PA; SP

Drug Name	Drug Tier	Notes
LUPRON DEPOT (4-MONTH) INTRAMUSCULAR KIT 30MG	2	PA; SP
LUPRON DEPOT (6-MONTH) INTRAMUSCULAR KIT 45MG	2	PA; SP
MYCAPSSA	E	
NGENLA	3	PA; SP
NOCDURNA	3	PA
NORDITROPIN FLEXPRO	2	PA; SP
NUTROPIN AQ NUSPIN 10	3	PA; SP
NUTROPIN AQ NUSPIN 20	3	PA; SP
NUTROPIN AQ NUSPIN 5	3	PA; SP
OMNITROPE	2	PA; SP
ORILISSA	2	PA; QL
OVIDREL	3	PA; SP
RECORLEV	E	
SANDOSTATIN	E	
SIGNIFOR	E	
SKYTROFA	3	PA; SP
SOGROYA	E	
SOMATULINE DEPOT SUBCUTANEOUS SOLUTION 60 MG/0.2ML, 90 MG/0.3ML	3	PA; SP
SUPPRELIN LA	2	PA; SP; QL
TRIPTODUR	3	PA; SP; QL
ZOMACTON	E	
Hormonal Agents - Selective Estrogen Receptor Modifying Agents		
OSPHENA	3	

Drug Name	Drug Tier	Notes
Hormonal Agents - Sex Hormones and Birth Control		
afirmelle	1	
altavera	1	
ANNOVERA	3	QL
apri	1	
aubra eq	1	
aurovela 1.5/30	1	
aurovela 1/20	1	
aurovela 24 fe	1	
aurovela fe 1.5/30	1	
aurovela fe 1/20	1	
aviane	1	
ayuna	1	
BALCOLTRA	3	
BEYAZ	E	
BIJUVA	3	
blisovi 24 fe	1	
blisovi fe 1.5/30	1	
blisovi fe 1/20	1	
camila	1	
chateal eq	1	
CLIMARA	E	
CLIMARA PRO	2	
cyred eq	1	
deblitane	1	
DELESTROGEN	E	
delyla	1	
DIVIGEL	3	
dotti	1	
drospirenone-ethinyl estradiol	1	
DUAVEE	2	
ELESTRIN	3	
eluryng	1	
emzahh	1	
ENDOMETRIN	2	
enilloring	1	

Drug Name	Drug Tier	Notes
enskyce	1	
errin	1	
estarylla	1	
ESTRACE	E	
estradiol oral	1	
estradiol transdermal	1	
estradiol vaginal	1	
estradiol-norethindrone acet	1	
ESTROGEL	3	
etonogestrel-ethinyl estradiol	1	
EVAMIST	3	
falmina	1	
gallifrey	1	
hailey 1.5/30	1	
hailey 24 fe	1	
hailey fe 1.5/30	1	
hailey fe 1/20	1	
haloette	1	
heather	1	
IMVEXXY MAINTENANCE PACK	2	
IMVEXXY STARTER PACK	2	
incassia	1	
isibloom	1	
jasmiel	1	
jencycla	1	
juleber	1	
junel 1.5/30	1	
junel 1/20	1	
junel fe 1.5/30	1	
junel fe 1/20	1	
junel fe 24	1	
kalliga	1	
kurvelo	1	
larin 1.5/30	1	
larin 1/20	1	

Drug Name	Drug Tier	Notes
larin 24 fe	1	
larin fe 1.5/30	1	
larin fe 1/20	1	
lessina	1	
levonorgestrel-ethinyl estrad oral tablet 0.1-20 mg-mcg, 0.15-30 mg-mcg	1	
levora 0.15/30 (28)	1	
LO LOESTRIN FE	3	
LOESTRIN 1.5/30 (21)	E	
LOESTRIN 1/20 (21)	E	
LOESTRIN FE 1.5/30	E	
LOESTRIN FE 1/20	E	
loryna	1	
lo-zumandimine	1	
lutra	1	
lyleq	1	
lyllana	1	
lyza	1	
marlissa	1	
medroxyprogesterone acetate intramuscular	1	QL
medroxyprogesterone acetate oral	1	
microgestin 1.5/30	1	
microgestin 1/20	1	
microgestin fe 1.5/30	1	
microgestin fe 1/20	1	
mili	1	
mimvey	1	
MIRENA (52 MG)	3	
mono-linyah	1	
MYFEMBREE	2	PA; QL
NATAZIA	2	
NEXTSTELLIS	E	
nikki	1	
nora-be	1	
norelgestromin-eth estradiol	1	

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Drug Name	Drug Tier	Notes
norethin ace-eth estradiol oral tablet	1	
norethindrone acetate oral	1	
norethindrone acet- ethinyl est	1	
norethindrone oral	1	
norgestimate-eth estradiol oral tablet 0.25-35 mg-mcg	1	
norgestimate-ethinyl estradiol triphasic	1	
norlyroc	1	
ocella	1	
ORIAHNN	2	PA; QL
portia-28	1	
PREMARIN ORAL	2	
PREMARIN VAGINAL	2	
PREMPHASE	2	
PREMPRO	2	
progesterone intramuscular	1	
progesterone oral	1	
PROMETRIUM	E	
reclipsen	1	
SAFYRAL	E	
sharobel	1	
SLYND	E	
sprintec 28	1	
sronyx	1	
syeda	1	
tarina 24 fe	1	
tarina fe 1/20 eq	1	
tri-estarylla	1	
tri-linyah	1	
tri-lo-estarylla	1	
tri-lo-marzia	1	
tri-lo-mili	1	
tri-lo-sprintec	1	
tri-mili	1	

Drug Name	Drug Tier	Notes
tri-sprintec	1	
tri-vylibra	1	
tri-vylibra lo	1	
TWIRLA	E	
VAGIFEM	E	
vestura	1	
vienva	1	
VIVELLE-DOT	E	
vylibra	1	
xulane	1	
YASMIN 28	E	
YAZ	E	
yuvaferm	1	
zafemy	1	
zumandimine	1	
Hormonal Agents - Thyroid		
ADTHYZA	3	
ARMOUR THYROID	3	
CYTOMEL	E	
ERMEZA	E	
euthyrox	1	
levo-t	1	
LEVOTHYROXINE SODIUM ORAL CAPSULE	E	
levothyroxine sodium oral tablet	1	
levoxyl	1	
liothyronine sodium oral	1	
methimazole oral	1	
NIVA THYROID	3	
SYNTHROID	3	
THYQUIDITY	E	
TIROSINT	E	
TIROSINT-SOL	E	
unithroid	1	

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Drug Name	Drug Tier	Notes
Immunological Agents - Drugs for Immune System Stimulation or Suppression		
ACTEMRA ACTPEN	3	PA; 3P; SP; QL
ACTEMRA INTRAVENOUS	3	PA; 3P; SP
ACTEMRA SUBCUTANEOUS	3	PA; 3P; SP; QL
ADALIMUMAB-ADBM	3	PA; SP
ALYGLO	E	
AMJEVITA for NUVAILA SOLUTION AUTO-INJECTOR 40 MG/0.4ML, 80 MG/0.8ML	2	PA; SP; QL
AMJEVITA for NUVAILA SOLUTION PREFILLED SYRINGE 40 MG/0.4ML	2	PA; SP; QL
AMJEVITA for AMGEN -PED 10KG TO <15KG SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 10MG/0.2ML	2	PA; SP; QL
AMJEVITA for NUVAILA -PED 15KG TO <30KG SOLUTION PREFILLED SYRINGE 20 MG/0.2ML	2	PA; SP; QL
ASCENIV	E	
AVSOLA	2	PA; SP
azathioprine oral	1	
BENLYSTA	3	PA; SP
BIMZELX	3	PA; SP; QL
BIVIGAM	3	PA; SP
CIMZIA	2	PA; SP; QL
CIMZIA (2 SYRINGE)	2	PA; SP; QL
CIMZIA-STARTER	2	PA; SP; QL
CINRYZE	E	
COSENTYX (300 MG DOSE)	E	

Drug Name	Drug Tier	Notes
COSENTYX 150 MG/ML	E	
COSENTYX SENSOREADY (300 MG)	E	
COSENTYX SENSOREADY PEN	E	
COSENTYX UNOREADY	E	
CUTAQUIG	3	PA; SP
ENBREL	2	PA; SP; QL
ENBREL MINI	2	PA; SP; QL
ENBREL SURECLICK	2	PA; SP; QL
ENTYVIO PEN	3	PA; SP; QL
FIRAZYR	E	
HADLIMA	3	PA; SP
HAEGARDA	3	PA; SP; QL
HIZENTRA	3	PA; SP
HUMIRA	E	
INFLECTRA	2	PA; SP
INFLIXIMAB	E	
JOENJA	E	
JYLAMVO	3	PA
leflunomide oral	1	
LUPKYNIS	E	
methotrexate sodium (pf)	1	
methotrexate sodium injection solution	1	
methotrexate sodium oral	1	
mycophenolate mofetil oral capsule	1	
mycophenolate mofetil oral tablet	1	
mycophenolate sodium	1	
mycophenolic acid	1	
MYHIBBIN	3	
OLUMIANT	3	PA; SP; QL
OMVOH	2	PA; SP; QL

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Drug Name	Drug Tier	Notes
ORENCIA CLICKJECT	3	PA; 3P; SP; QL
ORENCIA INTRAVENOUS	3	PA; 3P; SP
ORENCIA SUBCUTANEOUS	3	PA; 3P; SP; QL
ORLADEYO	3	PA; SP; QL
OTEZLA	2	PA; SP; QL
OTREXUP	E	
PANZYGA	3	PA; SP
PRIVIGEN	3	PA; SP
RASUVO	2	PA; QL
REMICADE	E	
RENFLEXIS	E	
REZUROCK	E	
RINVOQ	2	PA; SP; QL
RINVOQ LQ	2	PA; SP; QL
RUCONEST	3	PA; SP; QL
SAJAZIR	E	
SELARSDI	3	PA; SP; QL
SIMLANDI	3	PA; SP
SIMPONI	2	PA; SP; QL
SIMPONI ARIA	2	PA; SP
SKYRIZI INTRAVENOUS	2	PA; SP
SKYRIZI PEN	2	PA; SP; QL
SKYRIZI SUBCUTANEOUS	2	PA; SP; QL
SOTYKTU	2	PA; SP; QL
STELARA	E	
tacrolimus oral	1	
TAKHZYRO	3	PA; SP; QL
TALTZ	2	PA; SP; QL
TOFIDENCE	E	
TREMFYA INTRAVENOUS	2	PA; SP
TREMFYA SUBCUTANEOUS	2	PA; SP; QL
TREXALL	3	
TYENNE	E	

Drug Name	Drug Tier	Notes
VELSIPITY	2	PA; SP; QL
WEZLANA	2	PA; SP; QL
XELJANZ	2	PA; SP; QL
XELJANZ XR	2	PA; SP; QL
XEMBIFY	3	PA; SP
YESINTEK	3	PA; SP; QL
ZYMFENTRA	E	
ZYMFENTRA (2 SYRINGE)	E	
Inflammatory Bowel Disease Agents		
APRISO	2	
budesonide oral	1	
CANASA	E	
CORTIFOAM	3	
DELZICOL	E	
DIPENTUM	E	
hydrocortisone (perianal)	1	
LIALDA	E	
mesalamine er oral capsule 0.375 gm	1	
mesalamine oral tablet delayed release	1	
PENTASA	E	
PROCTOFOAM HC	2	
procto-med hc	1	
sulfasalazine oral	1	
TARPEYO	E	
UCERIS ORAL	E	
UCERIS RECTAL	3	
Metabolic Bone Disease Agents - Drugs for Osteoporosis		
alendronate sodium oral tablet 10 mg, 5 mg	1	
alendronate sodium oral tablet 35 mg, 70 mg	1	QL
FORTEO	E	

Drug Name	Drug Tier	Notes
ibandronate sodium oral	1	QL
PROLIA	2	PA; SP; QL
TERIPARATIDE SUBCUTANEOUS SOLUTION PEN-INJECTOR 620 MCG/2.48ML	2	PA; SP
TYMLOS	2	PA; SP
Metabolic Bone Disease Agents - Other		
calcitriol oral capsule	1	
RAYALDEE	3	
SENSIPAR	E	
Miscellaneous Therapeutic Agents		
BD ULTRA-FINE PEN NEEDLES	2	
BIGFOOT UNITY PEN CAP/ADMELOG	E	
BIGFOOT UNITY PEN CAP/APIDRA	E	
BIGFOOT UNITY PEN CAP/ASPART	E	
BIGFOOT UNITY PEN CAP/BASAGLAR	E	
BIGFOOT UNITY PEN CAP/FIASP	E	
BIGFOOT UNITY PEN CAP/HUMALOG	E	
BIGFOOT UNITY PEN CAP/LANTUS	E	
BIGFOOT UNITY PEN CAP/LISPRO	E	
BIGFOOT UNITY PEN CAP/LYUMJEV	E	
BIGFOOT UNITY PEN CAP/NOVOLOG	E	
BIGFOOT UNITY PEN CAP/TOUJEO	E	
BIGFOOT UNITY PEN CAP/TOUJEO M	E	

Drug Name	Drug Tier	Notes
BIGFOOT UNITY PEN CAP/TRESIBA	E	
BYLVAY	3	PA; SP
BYLVAY (PELLETS)	3	PA; SP
DOJOLVI	E	
DUROLANE	2	PA; SP
DYSPORT	2	PA; SP
ENDARI	3	PA
EUFLEXXA	2	PA; SP
FIRDAPSE	E	
GEL-ONE	E	
GELSYN-3	2	PA; SP
GENVISC 850	E	
HYALGAN	E	
HYMOVIS	E	
KERENDIA	3	PA; QL
LIVMARLI	E	
MONOVISC	E	
MYOBLOC	2	PA; SP
NOVOFINE PEN NEEDLE	2	
NOVOFINE PLUS PEN NEEDLE	2	
OMNIPOD 5 DEXCOM INTRO KIT	2	
OMNIPOD 5 DEXCOM PODS	2	
OMNIPOD 5 LIBRE INTRO KIT	2	
OMNIPOD 5 LIBRE PODS	2	
OMNIPOD DASH INTRO KIT	2	
OMNIPOD DASH PODS	2	
ORTHOVISC	E	
PALFORZIA	E	
PALFORZIA (1 MG DAILY DOSE)	E	
PALFORZIA INITIAL DOSE 1-3YRS	E	

Drug Name	Drug Tier	Notes
PALFORZIA INITIAL DOSE 4-17YRS	E	
PHEXXI	E	
SUPARTZ FX	E	
SYNOJOYNT	E	
SYNVISC	E	
SYNVISC ONE	E	
TAVNEOS	E	
TRILURON	E	
TRIVISC	E	
VEOZAH	E	
V-GO 20	2	
V-GO 30	2	
V-GO 40	2	
VISCO-3	E	
VYVGART	3	PA; SP
VYVGART HYTRULO	3	PA; SP
XEOMIN	2	PA; SP
XPHOZAH	E	
YORVIPATH	3	PA; SP; QL
Ophthalmic Agents - Drugs for Eye Allergy, Infection and Inflammation		
AZASITE	3	
BEPREVE	E	
BESIVANCE	3	
BROMSITE	E	
ciprofloxacin hcl ophthalmic	1	
erythromycin ophthalmic	1	
EYSUVIS	3	PA
FLAREX	3	
ILEVRO	E	
INVELTYS	3	
ketorolac tromethamine ophthalmic	1	

Drug Name	Drug Tier	Notes
LOTEMAX OPHTHALMIC SUSPENSION	E	
LOTEMAX SM	3	
moxifloxacin hcl (2x day)	1	
moxifloxacin hcl ophthalmic	1	
neomycin-polymyxin-dexameth ophthalmic ointment	1	
neomycin-polymyxin-dexameth ophthalmic suspension 3.5-10000-0.1	1	
NEVANAC	E	
ofloxacin ophthalmic	1	
PRED FORTE	E	
prednisolone acetate ophthalmic	1	
PROLENSA	E	
TOBRADEX ST	3	
tobramycin ophthalmic	1	
tobramycin-dexamethasone	1	
VIGAMOX	E	
XDEMVY	E	
ZERViate	E	
Ophthalmic Agents - Drugs for Glaucoma		
acetazolamide oral	1	
ALPHAGAN P	E	
AZOPT	E	
BETIMOL	3	
brimonidine tartrate ophthalmic	1	
brimonidine tartrate-timolol	1	
COMBIGAN	E	
COSOPT	E	
COSOPT PF	E	

Drug Name	Drug Tier	Notes
dorzolamide hcl-timolol mal	1	
dorzolamide hcl-timolol mal pf	1	
IYUZEH	E	
latanoprost ophthalmic	1	
LUMIGAN	2	QL
RHOPRESSA	3	QL
ROCKLATAN	3	QL
SIMBRINZA	2	
timolol maleate (once-daily)	1	
timolol maleate ocudose	1	
timolol maleate ophthalmic solution	1	
timolol maleate pf	1	
TIMOPTIC OCUDOSE	E	
TRAVATAN Z	E	
VUITY	E	
VYZULTA	E	
XALATAN	E	
ZIOPTAN	E	
Ophthalmic Agents - Drugs for Miscellaneous Eye Conditions		
BEOVU	E	
BYOOVIZ	E	
CEQUA	3	PA
cyclosporine ophthalmic	1	PA
LATISSE	E	
LUCENTIS	E	
MIEBO	2	PA; QL
polymyxin b-trimethoprim	1	
RESTASIS	2	PA
RESTASIS MULTIDOSE	2	PA
TYRVAYA	3	PA; QL

Drug Name	Drug Tier	Notes
VERKAZIA	E	
VEVYE	E	
XIIDRA	2	PA
ZYLET	3	
Otic Agents - Drugs for Ear Conditions		
ciprofloxacin-dexamethasone	1	
neomycin-polymyxin-hc otic	1	
ofloxacin otic	1	
Respiratory Tract / Pulmonary Agents - Drugs for Allergies, Cough, Cold		
azelastine hcl nasal	1	QL
azelastine-fluticasone	1	QL
benzonatate	1	
bromphen-pseudoeph-dm	1	
cetirizine hcl oral solution	1	
CLARINEX	E	
CLARINEX-D 12 HOUR	E	
cypheptadine hcl oral tablet	1	
DYMISTA	2	QL
fluticasone propionate nasal	1	
ipratropium bromide nasal	1	
levocetirizine dihydrochloride oral tablet	1	
mometasone furoate nasal	1	QL
OMNARIS	3	QL
promethazine vc	E	
promethazine-dm	1	
promethazine-phenylephrine	E	

Drug Name	Drug Tier	Notes
pseudoephedrine-bromphen-dm	1	
QNASL	3	QL
QNASL CHILDRENS	3	QL
RYALTRIS	3	QL
XHANCE	E	
Respiratory Tract / Pulmonary Agents - Drugs for Asthma and Other Lung Conditions		
ADVAIR DISKUS	E	
ADVAIR HFA	2	QL
AIRDUO RESPICLICK 113/14	E	
AIRDUO RESPICLICK 232/14	E	
AIRDUO RESPICLICK 55/14	E	
AIRSUPRA	2	QL
albuterol sulfate hfa	1	QL
albuterol sulfate inhalation nebulization solution (2.5 mg/3ml) 0.083%, 0.63 mg/3ml, 1.25 mg/3ml, 2.5 mg/0.5ml	1	QL
albuterol sulfate nebulization solution (5 mg/ml) 0.5% inhalation	1	QL
ALBUTEROL SULFATE NEBULIZATION SOLUTION (5 MG/ML) 0.5% INHALATION	2	QL
ALVESCO	E	
ANORO ELLIPTA	2	QL
ARNUITY ELLIPTA	2	QL
ASMANEX (120 METERED DOSES)	E	
ASMANEX (14 METERED DOSES)	E	
ASMANEX (30 METERED DOSES)	E	

Drug Name	Drug Tier	Notes
ASMANEX (60 METERED DOSES)	E	
ASMANEX HFA	E	
ATROVENT HFA	3	QL
AUVI-Q	3	
BEVESPI AEROSPHERE	E	
BREO ELLIPTA	2	QL
brey-na	1	QL
BREZTRI AEROSPHERE	2	QL
BROVANA	E	
budesonide inhalation	1	QL
budesonide-formoterol fumarate	1	QL
COMBIVENT RESPIMAT	2	QL
DUAKLIR PRESSAIR	E	
DULERA	E	
epinephrine injection solution auto-injector	1	
EPIPEN 2-PAK	3	ST
EPIPEN JR 2-PAK	E	
ESBRIET	E	
FASENRA	2	PA; SP; QL
FASENRA PEN	2	PA; SP; QL
FLUTICASONE FUROATE-VILANTEROL	E	
FLUTICASONE PROPIONATE DISKUS	E	
FLUTICASONE PROPIONATE HFA	E	

Effective Date: 07/01/2025

Drug Name	Drug Tier	Notes
fluticasone-salmeterol inhalation aerosol powder breath activated 100-50 mcg/act, 250-50 mcg/act, 500-50 mcg/act	1	QL
INCRUSE ELLIPTA	E	
ipratropium bromide inhalation	1	QL
ipratropium-albuterol	1	QL
LEVALBUTEROL HFA INHALATION AEROSOL 45 MCG/ACT	E	
montelukast sodium oral tablet	1	
montelukast sodium oral tablet chewable	1	
NEFFY	3	
NUCALA	2	PA; SP; QL
OFEV	3	PA; SP
OHTUVAYRE	E	
PERFOROMIST	3	QL
PROAIR RESPICLICK	E	
PULMICORT FLEXHALER	E	
PULMICORT SUSPENSION	E	
QVAR REDHALER	2	QL
SEREVENT DISKUS	2	QL
SINGULAIR	E	
SPIRIVA HANDIHALER	E	
SPIRIVA RESPIMAT	2	QL
STIOLTO RESPIMAT	2	QL
STRIVERDI RESPIMAT	2	QL
SYMBICORT	3	ST; QL
TEZSPIRE	2	PA; SP; QL
tiotropium bromide monohydrate	1	QL

Drug Name	Drug Tier	Notes
TRELEGY ELLIPTA	2	QL
TUDORZA PRESSAIR	E	
VENTOLIN HFA	E	
wixela inhub	1	QL
XOLAIR SUBCUTANEOUS SOLUTION AUTO-INJECTOR	2	PA; SP; QL
XOLAIR SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	2	PA; SP; QL
XOLAIR SUBCUTANEOUS SOLUTION RECONSTITUTED	2	PA; SP
XOPENEX HFA	E	
YUPELRI	3	QL
Respiratory Tract / Pulmonary Agents - Drugs for Cystic Fibrosis		
BETHKIS	E	
BRONCHITOL	E	
BRONCHITOL TOLERANCE TEST	E	
CAYSTON	E	
KITABIS PAK (W/ NEBULIZER)	E	
PULMOZYME	2	PA; SP
TOBI NEBULIZER	E	
TOBI PODHALER	3	SP; QL
TOBRAMYCIN NEBULIZATION SOLUTION 300 MG/5ML INHALATION	E	
TRIKAFTA	3	PA; SP; QL
Respiratory Tract / Pulmonary Agents - Drugs for Pulmonary Hypertension		
ADCIRCA	E	
ADEMPAS	2	PA; SP; QL

Drug Name	Drug Tier	Notes
LETAIRIS	E	
OPSUMIT	2	PA; SP; QL
OPSYNVI	E	
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	E	
REVATIO	E	
sildenafil citrate oral suspension reconstituted	1	PA; SP; QL
sildenafil citrate oral tablet 20 mg	1	PA; SP; QL
TADLIQ	E	
TRACLEER 62.5 MG, 125 MG	E	
treprostinil	1	PA; SP
TYVASO	3	PA; SP; QL
TYVASO DPI INSTITUTIONAL KIT	3	PA; SP; QL
TYVASO DPI MAINTENANCE KIT	3	PA; SP; QL
TYVASO DPI TITRATION KIT	3	PA; SP; QL
TYVASO REFILL KIT	3	PA; SP; QL
TYVASO STARTER KIT	3	PA; SP; QL
Skeletal Muscle Relaxants - Drugs for Muscle Pain and Spasm		
AMRIX	E	
BACLOFEN ORAL SOLUTION 10 MG/5ML	E	
baclofen oral tablet	1	
carisoprodol oral	1	

Drug Name	Drug Tier	Notes
cyclobenzaprine hcl oral	1	
FLEQSUVY	E	
LYVISPAH	E	
methocarbamol oral	1	
NORGESIC	E	
NORGESIC FORTE	E	
ORPHENGESIC FORTE	E	
OZOBAX DS	E	
SOMA	E	
tizanidine hcl oral	1	
ZANAFLEX	E	
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AMBIEN	E	
AMBIEN CR	E	
armodafinil	1	PA; QL
BELSOMRA	3	ST; QL
DAYVIGO	3	ST; QL
doxepin hcl oral tablet	1	QL
eszopiclone	1	QL
HETLIOZ	E	
HETLIOZ LQ	E	
LUMRYZ	E	
LUMRYZ STARTER PACK	E	
LUNESTA	E	
modafinil oral	1	PA; QL
NUVIGIL	E	
PROVIGIL	E	
QUVIVIQ	E	
RESTORIL	E	
SODIUM OXYBATE SOLUTION 500 MG/ML ORAL	3	PA; M; SP; QL
SODIUM OXYBATE SOLUTION 500 MG/ML ORAL	E	
SUNOSI	2	PA; QL

Drug Name	Drug Tier	Notes
temazepam	1	QL
WAKIX	3	PA; SP; QL
XYREM	E	
XYWAV	3	PA; SP; QL
zolpidem tartrate er	1	QL
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RELION PRIME TEST	33	RIGHTEST GS300 BLOOD GLUCOSE	33	SEROQUEL	15
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RELION TRUE METRIX TEST STRIPS	33	RIGHTEST GT333 BLOOD GLUCOSE	33	SERTRALINE HCL	11
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REPATHA SURECLICK	18	rosuvastatin calcium	18	SINGULAIR	50
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RESTORIL	51	ROXYBOND	7	SKYRIZI	45
RETACRIT	16	ROZLYTREK	13	SKYRIZI PEN	45
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REZDIFFRA	38	SAJAZIR	45	SMARTEST PRONTO STARTER	33
REZLIDHIA	13	SANCUSO	11	STELARA	45
		SANDOSTATIN	41	SMARTEST PROTEGE STARTER	33
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		SAPHRIS	15	SODIUM OXYBATE	51
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subvenite	10	TASIGNA.....	14	TOFIDENCE.....	45
sucrafate	38	TAVALISSE.....	16	TOLECTIN 600	8
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tranexamic acid	16	TRUE METRIX GO GLUCOSE METER	34	VALIUM	16
TRAVATAN Z	48	TRUE METRIX LEVEL 1	34	VALSARTAN	18
TRAZIMERA	14	TRUE METRIX LEVEL 2	34	valsartan	18
trazodone hcl	11	TRUE METRIX LEVEL 3	34	valsartan-hydrochlorothiazide	18
TREANDA	14	TRUE METRIX METER	34	VALTOCO 10 MG DOSE	10
TRELEGY ELLIPTA	50	TRUE METRIX PRO BLOOD GLUCOSE	34	VALTOCO 5 MG DOSE	10
TREMFYA	45	TRUE MULTIVITAMIN	37	VALTrex	15
treprostinil	51	TRUERESULT BLOOD GLUCOSE	34	varenicline tartrate	8
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triamcinolone acetonide	22	TRUQAP	14	VELSIPITY	45
triamcinolone in absorbbase	22	TRUVADA	15	VELTASSA	37
triamterene-hctz	18	TRUXIMA	14	VEMLIDY	15
triazolam	16	TUDORZA PRESSAIR	50	VENEXA	37
TRIBENZOR	18	TWIRLA	43	VENEXA FE	37
TRICOR	18	TWYNEO	22	VENLAFAXINE BESYLATE ER	11
TRIDACAINE II	8	TYENNE	45	venlafaxine hcl	11
TRIDACAINE III	8	TYMLOS	46	venlafaxine hcl er	11
triderm	22	TYRVAYA	48	VENTOLIN HFA	50
tri-estarylla	43	TYVASO	51	VENTRIXYL	37
TRIJARDY XR	23	TYVASO DPI INSTITUTIONAL KIT	51	VENTRIXYL FE	37
TRIKAFTA	50	TYVASO DPI MAINTENANCE KIT	51	VEOZAH	47
TRILEPTAL	10	TYVASO DPI TITRATION KIT	51	verapamil hcl er	18
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TRIPTODUR	41	UNDECATREX	40	VESICARE LS	39
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NOTICE OF NONDISCRIMINATION

OptumRx®, Inc. complies with applicable civil rights laws and does not discriminate on the basis of race, color, national origin, age, disability, or sex (including pregnancy, sexual orientation, and gender identity). We do not exclude people or treat them less favorably because of race, color, national origin, age, disability, or sex.

We provide free aids and services to help you communicate with us. You can ask for interpreters and/or for communications in other languages or formats such as large print. We also provide reasonable modifications for persons with disabilities.

If you need these services, call the toll-free number on your member ID card. (TTY **711**).

If you believe that we failed to provide these services or discriminated in another way on the basis of race, color, national origin, age, disability, or sex, you can send a complaint to the Civil Rights Coordinator:

Optum Civil Rights Coordinator
1 Optum Circle
Eden Prairie, MN 55344
Optum_Civil_Rights@optum.com

If you need help filing a complaint, call the toll-free number **1-888-445-8745**. (TTY **711**).

You can also file a civil rights complaint with the U.S. Department of Health and Human Services, Office for Civil Rights:

Online: ocrportal.hhs.gov/ocr/portal/lobby.jsf
Phone: **1-800-368-1019, 1-800-537-7697** (TDD)
Mail: U.S. Department of Health and Human Services
200 Independence Avenue, SW
Room 509F, HHH Building
Washington, D.C. 20201

Complaint forms are available at hhs.gov/ocr/office/file/index.html.

This notice is available at optum.com/en/language-assistance-nondiscrimination.html.

This information is available in other formats like large print. To ask for another format, please call the telephone number listed on your member plan ID card.

NOTICE OF AVAILABILITY OF LANGUAGE ASSISTANCE SERVICES AND ALTERNATE FORMATS

ATTENTION: If you speak **English**, free language assistance services and free communications in other formats, such as large print, are available to you. Call the toll-free number on your member identification card.

ATENCIÓN: Si habla **español (Spanish)**, hay servicios de asistencia de idiomas y comunicaciones en otros formatos como letra grande, sin cargo, a su disposición. Llame al número gratuito que figura en su tarjeta de identificación de miembro.

ملاحظة: إذا كنت تتحدث اللغة العربية (**Arabic**)، ستتوفر لك خدمات المساعدة اللغوية المجانية والمراسلات المجانية بتنسيقات أخرى، مثل الطباعة بأحرف كبيرة. اتصل بالرقم المجاني الممنون على بطاقة تعريف العضو خاصتك.

ចំណាំ: បើសិនជាអ្នកនិយាយភាសាខ្មែរ (**Khmer**) បសវ័នជំនួយភាសាភក្តិភីតថ្លៃ និងការទំនាក់ទំនង ឥតគិតថ្លៃ លក្ខណៈពិសេសបន្ថែម ដូចជាព័ត៌មានបន្ថែម មានស្រាប់ រួមមាន៖
ទូរសព្ទឥតគិតថ្លៃ លើលេខ ១៤៧៧៧៧ រឺ ១៤៧៧៧៧ រឺ សមាជិករបស់អ្នក។

请注意：如果您说中文 (**Chinese**)，我们可以为您提供免费语言协助服务以及大字印刷本等其他格式的免费通信。请致电您的会员身份卡上的免付费电话号码。

請注意：如果您說中文 (**Chinese**)，您可以獲得免費語言協助服務和大字體等其他格式的免費通訊。請致電您的會員身份卡上的免付費電話號碼。

ATTENTION : Si vous parlez **français (French)**, des services d'assistance linguistique et des communications dans d'autres formats, notamment en gros caractères, sont mis à votre disposition gratuitement. Appelez le numéro gratuit figurant sur votre carte de membre.

ATANSYON: Si w pale **Kreyòl Ayisyen (Haitian Creole)**, gen sèvis lang gratis ak kominikasyon nan lòt fòm lo disponib, tankou sa ki enprime ak gwo lèt. Rele nimewo gratis ki sou kat idantifikasyon manm ou an.

ACHTUNG: Falls Sie **Deutsch (German)** sprechen, stehen Ihnen kostenlose Sprachassistenzen und kostenlose Kommunikation in anderen Formaten, wie zum große Schrift, zur Verfügung. Rufen Sie die gebührenfreie Nummer auf Ihrer Mitgliedskarte an.

Hindi: यदि आप हिंदी (**Hindi**) बोलते हैं, तो आपके लिए मुफ्त भाषा सहायता सेवाएँ और अन्य प्रारूपों में मुफ्त संचार, जैसे की बड़े फॉन्ट, उपलब्ध हैं। अपने सिसय प चान पत्र पर दिए गए टोल-फ्री नंबर पर कॉल करें।

LUS TSEEM CEEB: Yog tias koj hais **lus Hmoob (Hmong)**, cov kev pab cuam lus pub dawb thiab kev sib txuas lus dawb hauv lwm hom ntawv, xws li luam ntawv loj, muaj rau koj. Thov hu rau tus xov tooj hu dawb ntawm koj daim npav ID.

PANANGIKASO: No agsasaoka iti **Ilocano (Ilocano)**, magun-odmo dagiti libre a serbisio ti tulong iti pagsasao ken libre a komunikasion iti dadduma a pormat, kas iti dadakkel a letra. Tawagan ti awan-bayadna a numero a masarakan iti kard a pakabigbigam kas miembro.

ATTENZIONE: Se parla **italiano (Italian)** può usufruire di servizi di assistenza linguistica gratuiti e comunicazioni gratuite in altri formati, come ad esempio la stampa a caratteri grandi. Chiami il numero verde riportato sul Suo tesserino identificativo.

注意事項：日本語（**Japanese**）を話される場合、無料の言語支援サービスや、拡大文字など他の形式での無料コミュニケーションをご利用いただけます。[]にお電話ください。

알림사항: 한국어(**Korean**)를 사용하시는 경우 무료 언어 지원 서비스와 대형 활자체 등 다른 형식으로 된 의사 소통 매체를 이용하실 수 있습니다. 회원 ID 카드에 나와 있는 무료 전화번호로 전화해 주십시오.

BAA'ÁKONÍNÍZIN: Diné (**Navajo**) saad bee yáá'í'go, t'áá'jiik'eh saad bee áka'e'eyeed bee áka'anída'wó'i dóó bee ahil hane'í nááná łahgo át'éego bee hadadilyaa, díí nitsaago bee ak'eda'ashehínígíí, náhółó. Bee atah nil'íní ninaaltsoos nít'í'í' bee nées hozíní baah t'áá'jiik'eh bee hane'í námbao bee hódíilnih

توجه: اگر به زبان فارسی (**Farsi**) صحبت میکنید، خدمات رایگان کمک زبانی و ارتباطات رایگان در قالبهای دیگر، مانند چاپ بزرگ، در دسترس شما هستند. با شماره رایگان مندرج روی کارت شناسایی عضویتان تماس بگیرید.

UWAGA: Dla osób mówiących po **polsku (Polish)** dostępne są bezpłatne usługi pomocy językowej i bezpłatne komunikaty w innych formatach, takich jak duży druk. Prosimy zadzwonić pod bezpłatny numer podany na karcie identyfikacyjnej.

ATENÇÃO: se você fala **português (Portuguese)**, tem à sua disposição serviços gratuitos de assistência linguística e comunicações gratuitas em outros formatos, como caracteres grandes. Ligue para o número gratuito que se encontra no seu cartão de identificação de membro.

ВНИМАНИЕ: Если вы говорите на **русском языке (Russian)**, вам доступны бесплатные услуги языковой поддержки и бесплатные материалы в других форматах, например, напечатанные крупным шрифтом. Звоните по бесплатному номеру телефона, указанному на вашей идентификационной карте участника.

FIIRO GAAR AH: Haddii aad ku hadasho **Soomaali (Somali)**, adeegyada taageerada luqadda bilaashka ah iyo isgaarsiino bilaash ah oo qaabab kale ah, sida far waaweyn, ayaa diyaar kuu ah. Ka wac lambarka wicitaanka bilaashka ah kaarkaaga aqoonsiga xubinta.

PAUNAWA: Kung nagsasalita ka ng **Tagalog (Tagalog)**, may makukuha kang mga libreng serbisyo ng tulong sa wika at libreng komunikasyon sa ibang mga format, tulad ng malalaking print. Tawagan ang walang bayad na numero na nasa iyong ID card ng miyembro.

LƯU Ý: Nếu quý vị nói Tiếng **Việt (Vietnamese)**, quý vị sẽ được cung cấp các dịch vụ hỗ trợ ngôn ngữ miễn phí và các phương tiện trao đổi liên lạc miễn phí ở các định dạng khác, chẳng hạn như bản in chữ lớn. Gọi đến số điện thoại miễn phí có trên thẻ nhận dạng thành viên của quý vị.

