



Your 2023 Prescription Drug List

Flex Standard 3-Tier

Effective January 1, 2023



**United
Healthcare**

This Prescription Drug List (PDL) is accurate as of January 1, 2023 and is subject to change after this date. This PDL applies to members of our UnitedHealthcare and Oxford medical plans with a pharmacy benefit subject to the Flex Standard 3-Tier PDL. Your estimated coverage and copayment/coinsurance may vary based on the benefit plan you choose and the effective date of the plan.

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Understanding your Prescription Drug List (PDL)

What is a PDL?

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

How do I use my PDL?

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

What are tiers?

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

When does the PDL change?

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

Why are some medications excluded from coverage?

We review medications based on their total value, including effectiveness and safety, how much they cost, and the availability of alternative medications to treat the same or similar medical conditions. Certain medications may be excluded from coverage or be subject to prior authorization (sometimes referred to as precertification)¹ if similar alternatives are available at a lower cost. Examples include medications that work the same way, but one is much more expensive than the other, or options that are available without a prescription (also referred to as over-the-counter medications²). There are also some instances where the same product can be made by 2 or more manufacturers, but greatly vary in cost. In these instances, only the lower-cost product may be covered.

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

Who decides which medications are covered?

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

1. Depending on your benefit, you may have notification or medical necessity requirements for select medications.
2. For New York and New Jersey plans, a prescription drug product that is therapeutically equal to an over-the-counter drug may be covered if it is determined to be medically necessary.

About this PDL

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



Medication tips

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

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

What if my doctor writes a brand-name prescription?

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

What if I am taking a specialty medication?

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

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

Over-the-counter (OTC) medications

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

Reading your PDL

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

Tier information

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

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

Drug Tier	Includes	Helpful Tips
Tier 1	\$ Lower-cost Medications that provide the highest overall value. Mostly generic drugs. Some brand-name drugs may also be included.	Use Tier 1 drugs for the lowest out-of-pocket costs.
Tier 2	\$\$ Mid-range cost Medications that provide good overall value. Mainly preferred brand-name drugs.	Use Tier 2 drugs, instead of Tier 3, to help reduce your out-of-pocket costs.
Tier 3	\$\$\$ Highest-cost Medications that provide the lowest overall value.	Ask your doctor if a Tier 1 or Tier 2 option could work for you.

Drug list information

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

E	May be excluded from coverage. May be subject to Prior Authorization for fully insured benefit plans governed by state law in Connecticut, New Jersey, and New York. (Referred to as First Start in New Jersey) —Lower-cost options are available and covered.
H	Health Care Reform Preventive —This medication is part of a health care reform preventive benefit and may be available at no additional cost to you.
H-PA	Health Care Reform Preventive with Prior Authorization —May be part of health care reform preventive and available at no additional cost to you if prior authorization criteria is met.
PA	Prior Authorization (sometimes referred to as precertification)³ —Requires your doctor to provide information about why you are taking a medication to determine how it may be covered by your plan.
QL	Quantity Limits —Specifies the largest quantity of medication covered per copayment or in a defined period of time.
RS	Refill and Save Program⁴ —Save money on your copayment when you refill your prescription on time as prescribed. Program eligibility may vary.
SP	Specialty Medication —Specialty medications treat complex or rare conditions and may require special storage and handling. You may be required to obtain these medications from a specialty pharmacy.
ST	Step Therapy (referred to as First Start in New Jersey) —Requires prior authorization and may require you to try one or more other medications before the medication you are requesting may be covered.

3. Depending on your benefit, you may have notification or medical necessity requirements for select medications.

4. Not applicable to Oxford plans.



Reading your PDL (continued)

Coverage details

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

- **Diabetes: blood glucose monitoring, insulin, non-insulin**

Diabetic supplies and prescription medications may be subject to different cost-share arrangements for Oxford plans. Please see your Summary of Benefits and Coverage (SBC) for specifics.

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

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

- **Endocrine: growth hormone**

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

- **Infertility**

Coverage is set by the consumer's prescription drug benefit plan. Please consult plan documents regarding benefit coverage and cost-share. Prior authorization (sometimes referred to as precertification) may be required for Oxford plans or where a state mandates infertility drug coverage.

- **Medications for sexual dysfunction**

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

Questions

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



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



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

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

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

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



Drug Name	Drug Tier	Requirements & Limits
Analgesics - Drugs for Pain		
acetaminophen-codeine	1	
acetaminophen-codeine #2	1	
acetaminophen-codeine #3	1	
acetaminophen-codeine #4	1	
apap-caff-dihydrocodeine	1	QL
bac	1	QL
BELBUCA	3	PA, QL
butalbital-apap-caffeine	1	QL
CONZIP	3	QL
DILAUDID ORAL	E	
DUROLANE	E	
endocet	1	
ESGIC	3	QL
EUFLEXXA	E	
fentanyl	1	PA, QL
FIORICET	3	QL
GELSYN-3	E	
GEN7T EXTERNAL PATCH	E	
HYALGAN INTRA-ARTICULAR SOLUTION PREFILLED SYRINGE	E	
hydrocodone bitartrate er oral capsule extended release 12 hour	1	PA, ST, QL
hydrocodone bitartrate er oral tablet er 24 hour abuse-deterrent	1	PA, QL
hydrocodone-acetaminophen oral solution 7.5-325 mg/15ml	1	
hydrocodone-acetaminophen oral tablet	1	
hydromorphone hcl er	1	PA, ST, QL
hydromorphone hcl oral	1	
hydromorphone hcl rectal	1	
HYSINGLA ER	E	PA, QL
lidocaine external ointment 5 %	1	QL
lidocaine external patch 5 %	1	PA, QL
lidocaine-prilocaine external cream	1	
LIDODERM	E	PA, QL
LORTAB	3	
morphine sulfate (concentrate) oral solution 100 mg/5ml, 20 mg/ml	1	

Drug Name	Drug Tier	Requirements & Limits
morphine sulfate er oral capsule extended release 24 hour	1	PA, ST, QL
morphine sulfate er oral tablet extended release	1	PA, QL
morphine sulfate oral	1	
morphine sulfate rectal	1	
MS CONTIN	E	PA, ST, QL
NALOCET	E	QL
NUCYNTA	2	QL
NUCYNTA ER	3	PA, QL
OXAYDO	E	QL
OXYCODONE HCL ER	E	PA, QL
oxycodone hcl oral capsule	1	
oxycodone hcl oral concentrate 100 mg/5ml	1	
oxycodone hcl oral solution	1	
oxycodone hcl oral tablet 10 mg, 15 mg, 20 mg, 30 mg	1	
oxycodone hcl oral tablet 5 mg	1	QL
OXYCODONE-ACETAMINOPHEN ORAL SOLUTION	E	
OXYCODONE-ACETAMINOPHEN ORAL TABLET 10-300 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	
OXYCODONE-ACETAMINOPHEN ORAL TABLET 2.5-300 MG	E	QL
OXYCONTIN	E	PA, QL
PERCOCET	E	
premium lidocaine	1	QL
PROLATE	E	
QDOLO	E	QL
ROXICODONE ORAL TABLET 15 MG, 30 MG	E	
ROXICODONE ORAL TABLET 5 MG	E	QL
ROXYBOND ORAL TABLET ABUSE-DETERRENT 15 MG, 30 MG	E	QL

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



Drug Name	Drug Tier	Requirements & Limits
ROXYBOND ORAL TABLET ABUSE-DETERRENT 5 MG	E	
SUBSYS	E	PA, QL
SUPARTZ FX	E	
SYNOJOYNT	E	
tramadol hcl er (biphasic)	1	(generic for Ryzolt), QL
TRAMADOL HCL ER ORAL CAPSULE EXTENDED RELEASE 24 HOUR	3	(generic for Conzip), QL
tramadol hcl er oral tablet extended release 24 hour	1	(generic for Ultram ER), QL
TRAMADOL HCL ORAL SOLUTION	E	QL
tramadol hcl oral tablet	1	
TREZIX	1	QL
TRILURON	E	
ULTRAM	E	
VTOL LQ	2	QL
XTAMPZA ER	3	PA, QL
ZEBUTAL	3	QL
ZTLIDO	3	PA, QL

Analgesics - Drugs for Pain and Inflammation

ANAPROX DS	E	
CATAFLAM	E	
CELEBREX	E	QL
celecoxib oral	1	QL
diclofenac potassium oral capsule	1	
diclofenac potassium oral tablet 25 mg	E	
diclofenac potassium oral tablet 50 mg	1	
diclofenac sodium er	1	
diclofenac sodium external gel 1 %	E	
diclofenac sodium external solution	E	
diclofenac sodium oral	1	
EC-NAPROSYN	3	
ec-naproxen	1	
ENOVARX-DICLOFENAC SODIUM	E	
etodolac	1	
etodolac er	1	

Drug Name	Drug Tier	Requirements & Limits
ibuprofen oral suspension 100 mg/5ml	E	
ibuprofen oral tablet 400 mg, 600 mg, 800 mg	1	
INDOCIN	3	
indomethacin er	1	
INDOMETHACIN ORAL CAPSULE 20 MG	3	
indomethacin oral capsule 25 mg, 50 mg	1	
KETOROLAC TROMETHAMINE NASAL	3	ST, QL
ketorolac tromethamine oral	1	
LODINE	E	
LOFENA	E	
meloxicam oral capsule	E	QL
MELOXICAM ORAL SUSPENSION	3	
meloxicam oral tablet	1	
nabumetone oral	1	
NAPRELAN	E	
NAPROSYN	E	
naproxen oral suspension	E	
naproxen oral tablet	1	
naproxen oral tablet delayed release	1	
naproxen sodium er oral tablet extended release 24 hour 375 mg, 500 mg	1	
NAPROXEN SODIUM ER ORAL TABLET EXTENDED RELEASE 24 HOUR 750 MG	E	
naproxen sodium oral tablet 275 mg, 550 mg	1	
PENNSAID	E	
RELAFEN	E	
RELAFEN DS	E	
SPRIX	3	ST, QL
TIVORBEX	3	
ZIPSOR	3	

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Drug Name	Drug Tier	Requirements & Limits
Anti-Addiction / Substance Abuse Treatment Agents		
buprenorphine hcl sublingual	1	QL
buprenorphine hcl-naloxone hcl	1	QL
KLOXXADO	2	QL
naloxone hcl injection	1	
naloxone hcl nasal	1	QL
naltrexone hcl oral	1	
NARCAN	2	QL
SUBOXONE	E	PA, QL
varenicline tartrate	1	PA, H
ZIMHI	2	QL
ZUBSOLV	1	QL
Antibacterials - Drugs for Infections		
ACTICLATE	E	
amoxicillin	1	
amoxicillin-potassium clavulanate	1	
amoxicillin-potassium clavulanate er	1	
AUGMENTIN	E	
AUGMENTIN ES-600	E	
avidoxy	1	
azithromycin oral	1	
BACTRIM	3	
BACTRIM DS	3	
cefadroxil	1	
cefdinir	1	
cefuroxime axetil	1	
CENTANY	3	QL
CENTANY AT	3	
cephalexin	1	
CIPRO ORAL TABLET	3	
ciprofloxacin hcl oral	1	
clarithromycin er	1	
clarithromycin oral	1	
CLEOCIN ORAL CAPSULE 150 MG, 300 MG	3	
CLEOCIN ORAL CAPSULE 75 MG	2	
clindamycin hcl oral	1	
CLINDESSE	2	
coremino	E	

Drug Name	Drug Tier	Requirements & Limits
DIFICID	3	QL
DORYX MPC	3	
DORYX ORAL TABLET DELAYED RELEASE 200 MG, 50 MG	E	
DORYX ORAL TABLET DELAYED RELEASE 80 MG	3	
doxycycline hyclate oral capsule	1	
doxycycline hyclate oral tablet 100 mg, 150 mg, 20 mg, 75 mg	1	
doxycycline hyclate oral tablet 50 mg	E	
doxycycline hyclate oral tablet delayed release 100 mg, 150 mg, 200 mg, 50 mg, 75 mg	1	
DOXYCYCLINE HYCLATE ORAL TABLET DELAYED RELEASE 80 MG	3	
doxycycline monohydrate oral	1	
FLAGYL	3	
levofloxacin oral	1	
LYMEPAK	E	
metronidazole oral	1	
metronidazole vaginal	1	
MINOCYCLINE HCL ER ORAL CAPSULE EXTENDED RELEASE 24 HOUR	3	
minocycline hcl er oral tablet extended release 24 hour	E	
minocycline hcl oral	1	
MINOLIRA	E	
mondoxyne nl	1	
mupirocin calcium	1	QL
mupirocin external	1	QL
nitrofurantoin macrocrystal	1	
nitrofurantoin monohydrate macrocrystals	1	
NUVESSA	3	
NUZYRA ORAL	3	QL
penicillin v potassium	1	
SOLODYN	E	
sulfamethoxazole-trimethoprim oral	1	

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Drug Name	Drug Tier	Requirements & Limits
sulfatrim pediatric	1	
TARGADOX	E	
vandazole	3	
VIBRAMYCIN ORAL CAPSULE	3	
VIBRAMYCIN ORAL SUSPENSION RECONSTITUTED	3	
XENLETA ORAL	3	
XEPI	3	QL
XIMINO	3	
ZITHROMAX ORAL	3	
ZITHROMAX TRI-PAK	3	
ZITHROMAX Z-PAK	3	

Anticoagulants - Drugs to Treat or Prevent Blood Clots

dabigatran etexilate mesylate	1	QL
ELIQUIS	2	QL
ELIQUIS DVT/PE STARTER PACK	2	QL
enoxaparin sodium	1	QL
jantoven	1	
LOVENOX	E	QL
PRADAXA	2	QL
warfarin sodium oral	1	
XARELTO	2	QL
XARELTO STARTER PACK	2	QL

Anticonvulsants - Drugs for Seizures

BRIVIACT ORAL TABLET	3	PA
carbamazepine er	1	
carbamazepine oral	1	
CARBATROL	3	
DEPAKOTE	3	
DEPAKOTE ER	3	
DEPAKOTE SPRINKLES	3	
divalproex sodium er	1	
divalproex sodium oral	1	
ELEPSIA XR	E	PA
epitol	1	
EPRONTIA	E	
gabapentin oral capsule	1	
gabapentin oral solution 250 mg/5ml	1	

Drug Name	Drug Tier	Requirements & Limits
GABAPENTIN ORAL TABLET 25 MG, 50 MG	E	ST
gabapentin oral tablet 600 mg, 800 mg	1	
KEPPRA ORAL	3	
KEPPRA XR	3	
lacosamide oral	1	PA
LAMICTAL	3	
LAMICTAL ODT	3	
LAMICTAL STARTER	3	
LAMICTAL XR	3	
lamotrigine er	1	ST
lamotrigine oral kit	1	ST
lamotrigine oral tablet	1	
lamotrigine oral tablet chewable	1	
lamotrigine oral tablet dispersible	1	ST
lamotrigine starter kit-blue	1	
lamotrigine starter kit-green	1	
lamotrigine starter kit-orange	1	
levetiracetam er	1	
levetiracetam oral	1	
NAYZILAM	3	PA, QL
NEURONTIN	3	
oxcarbazepine	1	
OXTELLAR XR	E	
QUDEXY XR	E	
roweepra	1	
SPRITAM	3	
subvenite	1	
subvenite starter kit-blue	1	
subvenite starter kit-green	1	
subvenite starter kit-orange	1	
TEGRETOL	3	
TEGRETOL-XR	3	
TOPAMAX	3	
TOPAMAX SPRINKLE	3	
topiramate er	E	ST
topiramate oral	1	
TRILEPTAL	3	

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Drug Name	Drug Tier	Requirements & Limits
TROKENDI XR	E	
VALTOCO NASAL LIQUID 10 MG/0.1ML, 5 MG/0.1ML	3	PA, QL
VIMPAT ORAL	3	PA
XCOPRI ORAL TABLET 100 MG, 150 MG, 200 MG, 50 MG	3	PA
ZONEGRAN	3	
zonisamide oral	1	

Antidementia Agents - Drugs for Alzheimer's Disease and Dementia

ADLARITY	E	
ARICEPT	E	
donepezil hcl	1	

Antidepressants - Drugs for Depression

amitriptyline hcl oral	1	
bupropion hcl er (sr)	1	
bupropion hcl er (xl) oral tablet extended release 24 hour 150 mg, 300 mg	1	
BUPROPION HCL ER (XL) ORAL TABLET EXTENDED RELEASE 24 HOUR 450 MG	3	QL
bupropion hcl oral	1	
CELEXA	E	
CITALOPRAM HYDROBROMIDE ORAL CAPSULE	3	
citalopram hydrobromide oral solution	1	
citalopram hydrobromide oral tablet	1	
CYMBALTA	E	QL
desvenlafaxine succinate er	1	QL
doxepin hcl oral capsule	1	
doxepin hcl oral concentrate	1	
DRIZALMA SPRINKLE	3	QL
duloxetine hcl oral capsule delayed release particles 20 mg, 30 mg, 60 mg	1	QL
duloxetine hcl oral capsule delayed release particles 40 mg	1	
EFFEXOR XR	E	
escitalopram oxalate oral	1	

Drug Name	Drug Tier	Requirements & Limits
fluoxetine hcl oral capsule	1	
fluoxetine hcl oral capsule delayed release	1	QL
fluoxetine hcl oral solution	1	
fluoxetine hcl oral tablet 10 mg	1	QL
fluoxetine hcl oral tablet 20 mg, 60 mg	1	
fluvoxamine maleate	1	
fluvoxamine maleate er	1	QL
FORFIVO XL	3	QL
LEXAPRO	E	
mirtazapine oral	1	
nortriptyline hcl oral	1	
PAMELOR	E	
paroxetine hcl	1	
paroxetine hcl er	1	QL
PAXIL CR	E	QL
PAXIL ORAL SUSPENSION	3	
PAXIL ORAL TABLET	E	
PRISTIQ	E	QL
PROZAC	E	
REMERON	E	
REMERON SOLTAB ORAL TABLET DISPERSIBLE 15 MG, 30 MG	E	
SERTRALINE HCL ORAL CAPSULE	3	QL
sertraline hcl oral concentrate	1	
sertraline hcl oral tablet	1	
trazodone hcl oral	1	
TRINTELLIX	3	ST, QL
venlafaxine hcl	1	
venlafaxine hcl er oral capsule extended release 24 hour	1	
venlafaxine hcl er oral tablet extended release 24 hour	1	QL
VIIBRYD	E	QL
VIIBRYD STARTER PACK	2	
vilazodone hcl	1	QL
WELLBUTRIN SR	E	
WELLBUTRIN XL	E	
ZOLOFT	E	

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Drug Name	Drug Tier	Requirements & Limits
Antiemetics - Drugs for Nausea and Vomiting		
BONJESTA	2	
DICLEGIS	E	
doxylamine-pyridoxine	1	
GIMOTI	E	QL
metoclopramide hcl oral	1	
ondansetron hcl oral	1	
ondansetron odt	1	
prochlorperazine maleate oral	1	
promethazine hcl oral tablet	1	
promethazine hcl rectal	1	
promethegan	1	
REGLAN	3	
scopolamine	1	
TRANSDERM-SCOP	E	
Antifungals - Drugs for Fungal Infections		
ciclodan	1	
ciclopirox external	1	
ciclopirox treatment	1	
CRESEMBA ORAL	3	
DIFLUCAN	E	
EXTINA	3	
fluconazole oral	1	
GYNAZOLE-1	3	
ketoconazole external cream	1	QL
ketoconazole external foam	1	
ketoconazole external shampoo	1	
ketodan external foam	1	
LOPROX EXTERNAL SHAMPOO	E	
nyamyc	1	QL
nystatin external	1	QL
nystatin mouth/throat	1	
nystop	1	QL
terbinafine hcl oral	1	QL
terconazole	1	
XOLEGEL	3	

Drug Name	Drug Tier	Requirements & Limits
Antigout Agents - Drugs for Gout		
allopurinol oral	1	
COLCHICINE ORAL CAPSULE	E	
colchicine oral tablet	E	
COLCRYS	E	
febuxostat	1	QL
GLOPERBA	3	
MITIGARE	2	
ULORIC	E	QL
ZYLOPRIM	3	
Antimigraine Agents - Drugs for Migraines		
AIMOVIG	2	PA
AIMOVIG SUBCUTANEOUS SOLUTION AUTO-INJECTOR 140 MG/ML	2	PA, QL
AMERGE ORAL TABLET 1 MG, 2.5 MG	E	QL
eletriptan hydrobromide	1	QL
EMGALITY	2	PA, QL
EMGALITY (300 MG DOSE)	2	PA, QL
IMITREX ORAL	E	QL
IMITREX STATDOSE REFILL	E	QL
IMITREX STATDOSE SYSTEM	E	QL
MAXALT	E	QL
naratriptan hcl	1	QL
ONZETRA XSAIL	3	QL
RELPAX	E	QL
rizatriptan benzoate	1	QL
sumatriptan succinate oral	1	QL
sumatriptan succinate refill subcutaneous solution cartridge	1	QL
sumatriptan succinate subcutaneous	1	QL
UBRELVY	2	PA, ST, QL
ZEMBRACE SYMTOUCH	3	QL
ZOLMITRIPTAN NASAL SOLUTION 2.5 MG	E	QL
ZOMIG NASAL SOLUTION 2.5 MG	2	QL
ZOMIG NASAL SOLUTION 5 MG	1	QL

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Drug Name	Drug Tier	Requirements & Limits
Antineoplastics - Drugs for Cancer		
ALECENSA	2	PA, QL, SP
ALUNBRIG	2	PA, QL, SP
anastrozole oral	1	H-PA
ARIMIDEX	E	
bexarotene external	E	QL, SP
bexarotene oral	E	SP
CALQUENCE	2	PA, QL, SP
capecitabine	1	QL, SP
ERIVEDGE	2	PA, QL, SP
ERLEADA	2	PA, QL, SP
EXKIVITY	3	PA, QL, SP
FEMARA	E	
fluorouracil external solution	1	
GAVRETO	3	PA, QL, SP
IBRANCE	2	PA, QL, SP
ICLUSIG ORAL TABLET	3	PA, QL, SP
IDHIFA	2	PA, QL, SP
IMBRUVICA ORAL TABLET	2	PA, QL, SP
KOSELUGO	3	PA, QL, SP
lenalidomide	1	PA, QL, SP
letrozole oral	1	H-PA
LYNPARZA	2	PA, QL, SP
mercaptopurine oral	1	
NUBEQA	2	PA, QL, SP
ODOMZO	2	PA, QL, SP
ORGOVYX	3	PA, QL, SP
PURIXAN	3	PA, SP
REVLIMID	2	PA, QL, SP
SOLTAMOX	3	
STIVARGA	2	PA, QL, SP
tamoxifen citrate oral tablet 10 mg	1	
tamoxifen citrate oral tablet 20 mg	1	H-PA
TARGRETIN EXTERNAL	1	QL, SP
TARGRETIN ORAL	1	SP
TASIGNA	2	PA, ST, QL, SP
VERZENIO	2	PA, QL, SP
VITRAKVI	2	PA, QL, SP

Drug Name	Drug Tier	Requirements & Limits
XELODA	E	QL, SP
ZEJULA	2	PA, QL, SP
Antiparasitics - Drugs for Parasitic Infections		
ARAKODA	3	QL
atovaquone-proguanil hcl	1	
hydroxychloroquine sulfate oral	1	
ivermectin oral	1	PA, QL
KRINTAFEL	1	QL
MALARONE	3	
permethrin external	1	
PLAQUENIL	E	
Antiparkinson Agents - Drugs for Parkinson's Disease		
carbidopa-levodopa	1	
carbidopa-levodopa er	1	
DHIVY	E	
DUOPA	3	
INBRIJA	3	PA, QL, SP
KYNMOBI	3	PA, QL, SP
MIRAPEX ER	E	
NOURIANZ	3	QL
pramipexole dihydrochloride	1	
pramipexole dihydrochloride er	E	
ropinirole hcl	1	
ropinirole hcl er	1	
RYTARY	E	
SINEMET	3	
Antiplatelets - Drugs for Heart Attack and Stroke Prevention		
BRILINTA	2	QL
clopidogrel bisulfate oral	1	
PLAVIX	E	
ZONTIVITY	3	QL
Antipsychotics - Drugs for Mood Disorders		
ABILIFY	E	QL
aripiprazole oral solution	1	
aripiprazole oral tablet	1	QL
aripiprazole oral tablet dispersible	1	QL
asenapine maleate	E	QL

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Drug Name	Drug Tier	Requirements & Limits	Drug Name	Drug Tier	Requirements & Limits
GEODON ORAL	E	QL	LEDIPASVIR-SOFOSBUVIR	2	PA, ST, QL, SP
LATUDA	2	QL	MAVYRET	2	PA, QL, SP
olanzapine oral	1	QL	NORVIR ORAL PACKET	2	
quetiapine fumarate	1		NORVIR ORAL SOLUTION	2	
quetiapine fumarate er	1	QL	NORVIR ORAL TABLET	E	
REXULTI	3	PA, ST, QL	ODEFSEY	3	QL
RISPERDAL	E		oseltamivir phosphate oral capsule	1	
risperidone	1		oseltamivir phosphate oral suspension reconstituted	1	QL
SAPHRIS	1	QL	PREZCOBIX	2	
SEROQUEL	E		ritonavir	1	
SEROQUEL XR	E	QL	RUKOBIA	3	PA
VRAYLAR ORAL CAPSULE	3	QL	SITAVIG	E	QL
ziprasidone hcl	1	QL	SOFOSBUVIR-VELPATASVIR	2	PA, QL, SP
ZYPREXA ORAL	E	QL	STRIBILD	3	QL
ZYPREXA ZYDIS	E	QL	SYMFI	2	QL
Antivirals - Drugs for Viral Infections			SYMFI LO	2	QL
acyclovir oral	1		TAMIFLU ORAL CAPSULE	E	
BARACLUDE ORAL SOLUTION	2	SP	TAMIFLU ORAL SUSPENSION RECONSTITUTED	E	QL
BARACLUDE ORAL TABLET	E	SP	tenofovir disoproxil fumarate	1	H-PA
BIKTARVY	3	QL	TIVICAY	3	
CIMDUO	2	QL	TIVICAY PD	3	
DESCOVY	E	ST, QL	TRIUMEQ	2	QL
DOVATO	2	QL	TRIUMEQ PD	2	QL
efavirenz-emtricitab-tenofovir	1	QL	TRUVADA ORAL TABLET 100-150 MG, 133-200 MG, 167-250 MG	3	QL
efavirenz-lamivudine-tenofovir	1	QL	TRUVADA ORAL TABLET 200-300 MG	E	QL
emtricitabine-tenofovir df oral tablet 100-150 mg, 133-200 mg, 167-250 mg	1	QL	valacyclovir hcl oral	1	QL
emtricitabine-tenofovir df oral tablet 200-300 mg	1	QL, H	VALTREX	E	QL
entecavir	1	SP	VEMLIDY	E	ST, SP
EPCLUSA ORAL PACKET	2	PA, QL, SP	VIREAD ORAL POWDER	3	
EPCLUSA ORAL TABLET	2	PA, QL, SP	VIREAD ORAL TABLET 150 MG, 200 MG, 250 MG	2	
GENVOYA	3	QL	VIREAD ORAL TABLET 300 MG	E	
HARVONI	2	PA, ST, QL, SP	VOSEVI	2	PA, QL, SP
ISENTRESS	2		XOFLUZA (40 MG DOSE)	3	QL
ISENTRESS	2				
ISENTRESS HD	2				
JULUCA	2	QL			

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Drug Name	Drug Tier	Requirements & Limits
XOFLUZA (80 MG DOSE)	3	QL
ZEPATIER	2	PA, QL, SP
ZOVIRAX ORAL	3	
Anxiolytics - Drugs for Anxiety		
alprazolam er	1	
alprazolam intensol	1	
alprazolam oral	1	
alprazolam xr	1	
ATIVAN ORAL	E	
bupirone hcl oral	1	
clonazepam oral	1	
diazepam intensol	1	
diazepam oral	1	
HALCION	3	
hydroxyzine hcl oral	1	
hydroxyzine pamoate oral	1	
KLONOPIN	E	
lorazepam intensol	1	
lorazepam oral concentrate 2 mg/ml	1	
lorazepam oral tablet	1	
LOREEV XR	3	
triazolam	1	
VALIUM	E	
VISTARIL	3	
XANAX	E	
XANAX XR	E	
Bipolar Agents - Drugs for Mood Disorders		
lithium carbonate er	1	
lithium carbonate oral	1	
LITHOBID	3	
Cardiovascular Agents - Drugs for Heart and Circulation Conditions		
ACCUPRIL	E	
acetazolamide er	1	
acetazolamide oral	1	
ALDACTONE	E	
aliskiren fumarate	1	
ALTACE	E	

Drug Name	Drug Tier	Requirements & Limits
ALTOPREV	3	
amiodarone hcl oral	1	
amlodipine besylate oral	1	
amlodipine besylate-benazepril hcl	1	
amlodipine besylate-valsartan	1	
ASPRUZYO SPRINKLE	E	
atenolol oral	1	
atenolol-chlorthalidone	1	
atorvastatin calcium oral tablet 10 mg, 20 mg	1	QL, H-PA
atorvastatin calcium oral tablet 40 mg, 80 mg	1	QL
AVALIDE	E	
AVAPRO	E	
benazepril hcl oral	1	
benazepril-hydrochlorothiazide	1	
BENICAR	E	
BENICAR HCT	E	
BETAPACE	E	
BIDIL	2	
bisoprolol fumarate oral	1	
bisoprolol-hydrochlorothiazide	1	
BYSTOLIC	E	
CALAN SR	3	
CARDIZEM	E	
CARDIZEM CD	E	
CARDIZEM LA	E	
CARDURA	3	
CAROSPIR	3	
cartia xt	1	
carvedilol	1	
chlorthalidone	1	
clonidine hcl oral	1	
colesevelam hcl	1	
COREG	E	
CORGARD	3	
CORLANOR	3	PA, QL
COZAAR	E	
CRESTOR	E	QL

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Drug Name	Drug Tier	Requirements & Limits
diltiazem hcl er	1	
diltiazem hcl er coated beads	1	
diltiazem hcl oral	1	
dilt-xr	1	
DIOVAN	E	
DIOVAN HCT	E	
doxazosin mesylate oral	1	
EDARBI	2	
EDARBYCLOR	2	
enalapril maleate oral	1	
ENTRESTO	3	PA, QL
EPANED	3	
EXFORGE	E	
EZALLOR SPRINKLE	3	
ezetimibe	1	
ezetimibe-simvastatin	1	
fenofibrate oral capsule 150 mg, 50 mg	1	
fenofibrate oral tablet	1	
FENOGLIDE	E	
flecainide acetate	1	
FLOLIPID	3	
furosemide oral	1	
gemfibrozil oral	1	
GONITRO	3	QL
guanfacine hcl	1	
HEMANGEOL	E	
hydralazine hcl oral	1	
hydrochlorothiazide oral	1	
HYZAAR	E	
icosapent ethyl	E	PA
INDERAL LA	E	
irbesartan	1	
irbesartan-hydrochlorothiazide	1	
isosorb dinitrate-hydralazine	1	
isosorbide mononitrate	1	
isosorbide mononitrate er	1	
KAPSPARGO SPRINKLE	3	

Drug Name	Drug Tier	Requirements & Limits
labetalol hcl oral	1	
LASIX	3	
LIPITOR	E	QL
LIPOFEN	3	
lisinopril oral	1	
lisinopril-hydrochlorothiazide	1	
LOPID	3	
LOPRESSOR	3	
losartan potassium oral	1	
losartan potassium-hctz	1	
LOTENSIN	3	
LOTENSIN HCT	3	
LOTREL	E	
lovastatin oral	1	H
LOVAZA	E	
matzim la	1	
MAXZIDE	3	
MAXZIDE-25	3	
metoprolol succinate er	1	
metoprolol tartrate oral	1	
MICARDIS	E	
MINIPRESS	3	
MULTAQ	3	PA
nadolol oral	1	
nebivolol hcl	1	
NEXICLON XR	E	
NEXLETOL	2	QL
NEXLIZET	2	QL
niacin (antihyperlipidemic)	E	
niacin er (antihyperlipidemic)	1	
niacor	E	
NIASPAN	E	
nifedipine er	1	
nifedipine er osmotic release	1	
nifedipine oral	1	
NITRO-BID	2	
NITRO-DUR	3	
nitroglycerin sublingual	1	

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Drug Name	Drug Tier	Requirements & Limits
nitroglycerin transdermal	1	
nitroglycerin translingual	1	QL
NITROLINGUAL	E	QL
NITROMIST	3	QL
NITROSTAT	3	
NITRO-TIME	3	
NORLIQVA	E	
NORVASC	E	
olmesartan medoxomil oral	1	
olmesartan medoxomil-hctz	1	
omega-3-acid ethyl esters	1	
PACERONE	3	
PRALUENT	E	PA, QL
pravastatin sodium	1	
prazosin hcl oral	1	
PROCARDIA XL	E	
propranolol hcl er	1	
propranolol hcl oral	1	
QBRELIS	3	
quinapril hcl	1	
ramipril	1	
RANEXA	E	
ranolazine er	1	
REPATHA	2	PA, QL
REPATHA PUSHTRONEX SYSTEM	2	PA, QL
REPATHA SURECLICK	2	PA, QL
rosuvastatin calcium	1	QL
simvastatin oral tablet 10 mg, 20 mg, 40 mg, 5 mg	1	H-PA
simvastatin oral tablet 80 mg	1	
SOAANZ	3	QL
sotalol hcl oral	1	
SOTYLIZE	3	
spironolactone oral	1	
TEKTURNA	3	
TEKTURNA HCT	3	
telmisartan	1	
telmisartan-hctz	1	
TENORETIC 100	E	

Drug Name	Drug Tier	Requirements & Limits
TENORETIC 50	E	
TENORMIN	E	
THALITONE	3	
TOPROL XL	E	
torseamide	1	
triamterene-hctz	1	
TRICOR	E	
VALSARTAN ORAL SOLUTION	E	
valsartan oral tablet	1	
valsartan-hydrochlorothiazide	1	
VASCEPA	E	PA
VASOTEC	E	
verapamil hcl er	1	
verapamil hcl oral	1	
VERELAN	3	
VERELAN PM	3	
VERQUVO	3	PA, QL
VYTORIN	E	
WELCHOL	E	
ZESTORETIC	E	
ZESTRIL	E	
ZETIA	E	
ZIAC	3	
ZOCOR	E	
Central Nervous System Agents - Drugs for Attention Deficit Disorder		
ADDERALL	E	
ADDERALL XR	1	QL
ADHANSIA XR	3	QL
amphetamine-dextroamphetamine	1	
amphetamine-dextroamphetamine er	E	QL
APTENSIO XR	3	QL
atomoxetine hcl	1	QL
CONCERTA	1	QL
DEXEDRINE	E	QL
dexmethylphenidate hcl	1	
dexmethylphenidate hcl er	1	QL
dextroamphetamine sulfate er	1	QL

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Drug Name	Drug Tier	Requirements & Limits
dextroamphetamine sulfate oral solution	1	
dextroamphetamine sulfate oral tablet	E	
FOCALIN	3	
FOCALIN XR	E	QL
guanfacine hcl er	1	QL
INTUNIV	E	QL
JORNAY PM	3	QL
METHYLIN	3	
methylphenidate hcl er (cd)	1	QL
methylphenidate hcl er (la) oral capsule extended release 24 hour 10 mg, 20 mg, 30 mg, 40 mg	1	QL
methylphenidate hcl er (la) oral capsule extended release 24 hour 60 mg	1	
methylphenidate hcl er (osm)	E	QL
methylphenidate hcl er (xr)	1	QL
methylphenidate hcl er oral tablet extended release	1	QL
methylphenidate hcl er oral tablet extended release 24 hour	E	QL
methylphenidate hcl oral	1	
MYDAYIS	2	QL
PROCENTRA	3	
QUILLICHEW ER	3	QL
QUILLIVANT XR	3	QL
relexxii	E	QL
RITALIN	E	
RITALIN LA	E	QL
STRATTERA	E	QL
VYVANSE	2	QL
ZENZEDI	E	

Central Nervous System Agents - Drugs for Multiple Sclerosis

AMPYRA	E	PA, QL, SP
AUBAGIO	3	PA, QL, SP
AVONEX PEN	2	PA, QL, SP
AVONEX PREFILLED	2	PA, QL, SP

Drug Name	Drug Tier	Requirements & Limits
BAFIERTAM	2	PA, QL, SP
BETASERON	2	PA, QL, SP
COPAXONE	E	PA, QL, SP
dalfampridine er	1	PA, QL, SP
EXTAVIA	E	PA, ST, QL, SP
GILENYA	3	PA, QL, SP
glatiramer acetate	1	PA, QL, SP
glatopa	1	PA, QL, SP
KESIMPTA	2	PA, QL, SP
MAVENCLAD	3	PA, ST, QL, SP
PLEGRIDY INTRAMUSCULAR	3	PA, QL, SP
PLEGRIDY STARTER PACK	3	PA, QL, SP
PLEGRIDY SUBCUTANEOUS	3	PA, QL, SP
REBIF	E	PA, QL, SP
REBIF REBIDOSE	E	PA, QL, SP
REBIF REBIDOSE TITRATION PACK	E	PA, QL, SP
REBIF TITRATION PACK	E	PA, QL, SP

Central Nervous System Agents - Miscellaneous

AUSTEDO	2	PA, QL, SP
EXSERVAN	E	PA, SP
LYRICA	3	QL
LYRICA CR	E	QL
NUDEXTA	2	PA, QL
pregabalin	1	QL
pregabalin er	1	QL
RILUTEK	E	SP
riluzole	1	SP
TIGLUTIK	3	PA
ZEPOSIA	3	PA, ST, QL, SP
ZEPOSIA 7-DAY STARTER PACK	3	PA, ST, QL, SP
ZEPOSIA STARTER KIT	3	PA, ST, QL, SP

Dental and Oral Agents - Drugs for Mouth and Throat Conditions

cavarest	1	
chlorhexidine gluconate mouth/throat	1	
CLINPRO 5000	3	
DENTA 5000 PLUS	3	

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

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

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Drug Name	Drug Tier	Requirements & Limits
dapsone external	1	QL
DERMA-SMOOTH/FS BODY	3	QL
DERMA-SMOOTH/FS SCALP	3	
desonide external	1	QL
DESOWEN	3	QL
desrx	1	QL
DIPROLENE	3	
DUPIXENT SUBCUTANEOUS SOLUTION PEN-INJECTOR	2	PA, QL, SP
DUPIXENT SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	2	PA, QL, SP
EFUDEX	3	
ENSTILAR	3	QL
EUCRISA	3	ST, QL
EVOCLIN	3	
FINACEA EXTERNAL FOAM	2	
FINACEA EXTERNAL GEL	3	
fluocinolone acetonide body	1	QL
fluocinolone acetonide external	1	QL
fluocinolone acetonide scalp	1	
fluocinonide external cream 0.05 %	1	
fluocinonide external cream 0.1 %	1	QL
fluocinonide external gel	1	
fluocinonide external ointment	1	
fluocinonide external solution	1	
FLUOROPLEX EXTERNAL CREAM 1 %	3	
FLUOROURACIL EXTERNAL CREAM 0.5 %	E	
fluorouracil external cream 5 %	1	
hydrocortisone external cream 1 %	E	
hydrocortisone external cream 2.5 %	1	
hydrocortisone external lotion 2.5 %	1	
hydrocortisone external ointment 1 %, 2.5 %	1	
imiquimod external cream 3.75 %	E	QL
imiquimod external cream 5 %	1	
imiquimod pump	E	QL

Drug Name	Drug Tier	Requirements & Limits
IMPEKLO	E	QL
IMPOYZ	3	QL
isotretinoin capsule 10 mg oral	E	
isotretinoin capsule 10 mg oral	1	
isotretinoin capsule 20 mg oral	E	
isotretinoin capsule 20 mg oral	1	
isotretinoin capsule 30 mg oral	E	
isotretinoin capsule 30 mg oral	1	
isotretinoin capsule 40 mg oral	E	
isotretinoin capsule 40 mg oral	1	
isotretinoin oral capsule 25 mg, 35 mg	E	
KENALOG EXTERNAL	E	QL
KLISYRI	3	QL
METROCREAM	3	
METROGEL	E	
METROLOTION	3	
metronidazole external	1	
MIRVASO	3	PA, QL
mometasone furoate external	1	
myorisan	1	
neuac external gel	1	QL
NORITATE	E	
OLUX	E	QL
pimecrolimus	1	ST, QL
PLEXION	3	
PLEXION CLEANSER	3	
PLEXION CLEANSING CLOTH	3	
RETIN-A	E	PA, QL
RHOFADE	3	PA, QL
rosadan external cream	1	
rosadan external gel	1	
SANTYL	3	QL
SERNIVO	3	QL
SOOLANTRA	1	QL
sss 10-5	1	
sulfacetamide sodium-sulfur external cream	1	

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Drug Name	Drug Tier	Requirements & Limits
sulfacetamide sodium-sulfur external liquid	1	
sulfacetamide sodium-sulfur external lotion	1	
sulfacetamide sodium-sulfur external pad	1	
sulfacetamide sodium-sulfur external suspension 10-5 %, 8-4 %	1	
sulfacetamide sod-sulfur wash	1	
SULFACLEANSE 8/4	3	
sulfamez wash	1	
SUMADAN WASH	E	
SUMAXIN	3	
SYNALAR	3	QL
TACLONEX EXTERNAL OINTMENT	E	QL
TACLONEX EXTERNAL SUSPENSION	1	QL
tacrolimus external	1	ST, QL
tazarotene external cream	1	PA, QL
TAZORAC EXTERNAL CREAM	3	PA, QL
TAZORAC EXTERNAL GEL 0.05 %	2	PA, QL
TAZORAC EXTERNAL GEL 0.1 %	3	PA, QL
TEXACORT	2	
tretinoin external cream	1	QL
tretinoin external gel 0.01 %	1	QL
tretinoin external gel 0.05 %	1	PA, QL
tretinoin gel 0.025 % external	1	
tretinoin gel 0.025 % external	1	QL
triamcinolone acetonide external aerosol solution	1	QL
triamcinolone acetonide external cream 0.025 %, 0.1 %	1	
triamcinolone acetonide external cream 0.5 %	1	QL
triamcinolone acetonide external lotion	1	
triamcinolone acetonide external ointment 0.025 %, 0.1 %, 0.5 %	1	
triamcinolone acetonide external ointment 0.05 %	E	
triamcinolone in absorbbase	E	

Drug Name	Drug Tier	Requirements & Limits
TRIANEX	E	
triderm external cream 0.1 %	1	
triderm external cream 0.5 %	1	QL
TRIDESILON	1	QL
tritocin	E	
VANOS	E	QL
VECTICAL	E	QL
VERDESO	3	QL
WYNZORA	E	QL
zenatane	1	
ZILXI	3	PA, ST, QL
ZYCLARA	E	QL
ZYCLARA PUMP	E	QL
Diabetes - Glucose Monitoring and Supplies		
ACCU-CHEK AVIVA PLUS TEST STRIPS	E	QL
ACCU-CHEK FASTCLIX LANCET KIT	1	
ACCU-CHEK FASTCLIX LANCETS	1	
ACCU-CHEK GUIDE KIT W/DEVICE	3	(Accu-Chek Guide Me)
ACCU-CHEK GUIDE TEST STRIPS	3	QL
ACCU-CHEK SAFE-T PRO LANCETS	1	
ACCU-CHEK SMARTVIEW TEST STRIPS	E	QL
ACCU-CHEK SOFTCLIX LANCET DEVICE KIT	1	
ACCU-CHEK SOFTCLIX LANCETS	1	
ACCUTREND GLUCOSE	E	QL
bd autoshield duo pen needles	2	
bd ultra-fine insulin syringes	2	
bd ultra-fine pen needles	2	
BLOOD GLUCOSE TEST STRIPS	E	QL
CARETOUCH MONITOR SYSTEM	E	
CARETOUCH TEST	E	QL
CHEMSTRIP BG LOG BOOK	1	
CONTOUR MONITOR DEVICE	E	
CONTOUR MONITOR KIT W/DEVICE	E	

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Drug Name	Drug Tier	Requirements & Limits
CONTOUR NEXT EZ KIT W/DEVICE	E	
CONTOUR NEXT GEN MONITOR	E	
CONTOUR NEXT LINK KIT W/DEVICE	3	
CONTOUR NEXT LINK KIT W/DEVICE	E	(Contour Next Link 24)
CONTOUR NEXT MONITOR KIT W/DEVICE	2	
CONTOUR NEXT ONE DEVICE	E	
CONTOUR NEXT ONE KIT	2	
CONTOUR NEXT TEST STRIPS	2	QL
CONTOUR TEST STRIPS	E	QL
CVS ADVANCED GLUCOSE TEST	E	QL
CVS GLUCOSE METER TEST STRIPS	E	QL
D-CARE BLOOD GLUCOSE	E	QL
D-CARE GLUCOMETER	E	
DEXCOM G4 MOBILE RECEIVER	3	PA, QL
DEXCOM G4 SENSOR	3	PA, QL
DEXCOM G4 TRANSMITTER	3	PA, QL
DEXCOM G5 MOBILE RECEIVER	3	PA, QL
DEXCOM G5 SENSOR	3	PA, QL
DEXCOM G5 TRANSMITTER	3	PA, QL
DEXCOM G6 RECEIVER	3	PA, QL
DEXCOM G6 SENSOR	3	PA, QL
DEXCOM G6 TRANSMITTER	3	PA, QL
EASY TOUCH TEST	E	QL
EASYMAX 15 TEST	E	QL
EASYMAX NG BLOOD GLUCOSE	E	
EASYMAX V BLOOD GLUCOSE	E	
ENLITE GLUCOSE SENSOR	3	PA
EQ BLOOD GLUCOSE TEST	E	QL
FORTISCARE G1 TEST STRIP	E	QL
FORTISCARE T1 GLUCOSE SYSTEM	E	
FORTISCARE TEST	E	QL
FREESTYLE LIBRE 14 DAY READER	3	PA

Drug Name	Drug Tier	Requirements & Limits
FREESTYLE LIBRE 14 DAY SENSOR	3	PA
FREESTYLE LIBRE 2 READER	3	PA
FREESTYLE LIBRE 2 SENSOR	3	PA
FREESTYLE LIBRE 3 SENSOR	3	PA
FREESTYLE LIBRE READER	3	PA, QL
FREESTYLE PRECISION NEO SYSTEM	E	
FREESTYLE PRECISION NEO TEST	E	QL
GENTLE-LET PLATFORMS	3	
GLUCOCARD EXPRESSION TEST	E	QL
GLUCOCARD SHINE TEST	E	QL
GLUCOCARD VITAL TEST	E	QL
GUARDIAN LINK 3 TRANSMITTER	3	
GUARDIAN REAL-TIME REPLACE PED	3	PA
GUARDIAN SENSOR (3)	3	PA
IN TOUCH	3	
INSULIN PEN NEEDLES	2	
LANCETS	3	
MICRODOT TEST	E	QL
MINILINK REAL-TIME TRANSMITTER	3	
MM EASY TOUCH GLUCOSE METER	E	
NEUTEK 2TEK TEST	E	QL
NOVOFINE AUTOCOVER PEN NEEDLE	2	
NOVOFINE PEN NEEDLE	2	
NOVOFINE PLUS PEN NEEDLE	2	
OMNIPOD 5 G5 INTRO KIT (Gen 5)	2	QL
OMNIPOD 5 G6 PODS (Gen 5)	2	QL
ONETOUCH CLUB LANCETS FINE PT	1	
ONETOUCH DELICA LANCETS 30G	1	
ONETOUCH DELICA LANCETS 33G	1	

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Drug Name	Drug Tier	Requirements & Limits	Drug Name	Drug Tier	Requirements & Limits
ONETOUGH DELICA PLUS LANCET30G	1	(Onetouch Delica Plus Lancets)	RELION TRUE MET AIR GLUC METER	E	
ONETOUGH DELICA PLUS LANCET33G	1	(Onetouch Delica Plus Lancets)	RELION TRUE METRIX TEST STRIPS	E	QL
ONETOUGH FINEPOINT LANCETS	1		RELION ULTIMA GLUCOSE SYSTEM	E	
ONETOUGH SOLUTIONS STARTER KIT	E		RELION ULTIMA TEST	E	QL
ONETOUGH SURESOFT LANCING DEV	1		SURESTEP PRO LINEARITY	1	
ONETOUGH ULTRA 2 KIT W/DEVICE	1		TRUE FOCUS BLOOD GLUCOSE STRIP	E	QL
ONETOUGH ULTRA MINI KIT W/DEVICE	1		TRUE METRIX AIR GLUCOSE METER	E	
ONETOUGH ULTRA TEST STRIPS	1	QL	TRUE METRIX BLOOD GLUCOSE TEST	E	QL
ONETOUGH ULTRASOFT LANCETS	1	(Onetouch Ultrasoft Plus lancets)	TRUE METRIX GO GLUCOSE METER	E	
ONETOUGH VERIO FLEX SYSTEM	1		TRUE METRIX METER KIT	E	
ONETOUGH VERIO IQ SYSTEM	1		TRUE METRIX PRO BLOOD GLUCOSE	E	QL
ONETOUGH VERIO KIT W/DEVICE	1		TRUETRACK BLOOD GLUCOSE DEVICE	E	
ONETOUGH VERIO REFLECT KIT W/DEVICE	1		TRUETRACK TEST	E	QL
ONETOUGH VERIO TEST STRIPS	1	QL	UNISTRIP1 GENERIC	E	QL
OPTIUMEZ TEST	E	QL	Diabetes - Insulin		
PARADIGM REAL-TIME TRANSMITTER	3		ADMELOG	E	QL
PENLET II BLOOD SAMPLER	1		ADMELOG SOLOSTAR	E	QL
PENLET II REPLACEMENT CAP	3		AFREZZA	3	QL
PRECISION XTRA	E		BASAGLAR KWIKPEN	E	QL
PRECISION XTRA BLOOD GLUCOSE	E	QL	HUMALOG INJECTION	1	QL
PREMIUM BLOOD GLUCOSE TEST	E	QL	HUMALOG KWIKPEN	2	QL
PSS SELECT PLATFORMS	3		HUMALOG MIX 50/50 KWIKPEN	2	QL
QUINTET AC BLOOD GLUCOSE	E		HUMALOG MIX 50/50 VIAL	1	QL
QUINTET AC BLOOD GLUCOSE TEST	E	QL	HUMALOG MIX 75/25 KWIKPEN	2	QL
QUINTET BLOOD GLUCOSE SYSTEM	E		HUMALOG MIX 75/25 VIAL	1	QL
QUINTET BLOOD GLUCOSE TEST	E	QL	HUMALOG SUBCUTANEOUS	2	QL
			HUMALOG U-100 JUNIOR KWIKPEN	2	QL
			HUMULIN 70/30 KWIKPEN	2	QL
			HUMULIN 70/30 VIAL	1	QL
			HUMULIN N KWIKPEN	2	QL

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Drug Name	Drug Tier	Requirements & Limits
HUMULIN N VIAL	1	QL
HUMULIN R U-500 KWIKPEN	2	QL
HUMULIN R U-500 VIAL	1	QL
HUMULIN R VIAL	1	QL
INSULIN ASPART	E	QL
INSULIN ASPART FLEXPEN	E	ST, QL
INSULIN ASPART PENFILL	E	ST, QL
INSULIN GLARGINE	E	QL
INSULIN GLARGINE SOLOSTAR	E	QL
INSULIN LISPRO	E	QL
INSULIN LISPRO (1 UNIT DIAL)	E	QL
INSULIN LISPRO JUNIOR KWIKPEN	E	QL
INSULIN LISPRO PROT & LISPRO	E	QL
LANTUS SOLOSTAR	1	QL
LANTUS U-100 VIAL	1	QL
LEVEMIR U-100 FLEXTOUCH	E	PA, QL
LEVEMIR U-100 VIAL	E	PA, QL
LYUMJEV KWIKPEN	2	QL
LYUMJEV VIAL	1	QL
NOVOLIN 70/30 FLEXPEN	E	QL
NOVOLIN 70/30 FLEXPEN RELION	E	QL
NOVOLIN 70/30 RELION	E	QL
NOVOLIN 70/30 VIAL	E	QL
NOVOLIN N FLEXPEN	E	QL
NOVOLIN N FLEXPEN RELION	E	QL
NOVOLIN N RELION	E	QL
NOVOLIN N VIAL	E	QL
NOVOLIN R FLEXPEN	E	QL
NOVOLIN R FLEXPEN RELION	E	QL
NOVOLIN R RELION	E	QL
NOVOLIN R VIAL	E	QL
NOVOLOG FLEXPEN	E	ST, QL
NOVOLOG FLEXPEN RELION	E	ST, QL
NOVOLOG PENFILL	E	ST, QL
NOVOLOG RELION	E	QL
NOVOLOG U-100 VIAL	E	QL
TOUJEO MAX SOLOSTAR	2	QL

Drug Name	Drug Tier	Requirements & Limits
TOUJEO SOLOSTAR	2	QL
TRESIBA	E	QL
TRESIBA FLEXTOUCH	E	QL
Diabetes - Non-Insulin Agents		
ACTOS	E	QL
ADLYXIN	3	PA, ST, QL
ADLYXIN STARTER PACK	3	PA, ST, QL
ALOGLIPTIN BENZOATE	E	QL
ALOGLIPTIN-METFORMIN HCL	E	QL
ALOGLIPTIN-PIOGLITAZONE	E	QL
AMARYL	E	
BAQSIMI ONE PACK	2	QL
BAQSIMI TWO PACK	2	QL
BYDUREON BCISE AUTOINJECTOR	2	PA, ST, QL
BYETTA 10 MCG PEN	2	PA, ST, QL
BYETTA 5 MCG PEN	2	PA, ST, QL
FARXIGA	E	ST, QL
glimepiride	1	
glipizide er	1	
glipizide ir	1	
glipizide xl	1	
glucagon emergency kit 1 mg injection 1 mg	1	QL
GLUCAGON EMERGENCY KIT 1 MG INJECTION 1 MG	3	QL
GLUCOTROL XL	3	
GLUMETZA	E	
glyburide oral	1	
glyburide-metformin	1	
GLYXAMBI	2	ST, QL
JANUVIA	E	ST, QL
JARDIANCE	2	ST, QL
JENTADUETO	2	QL
JENTADUETO XR	2	QL
KAZANO	2	QL
KOMBIGLYZE XR	2	QL
metformin hcl er	1	

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Drug Name	Drug Tier	Requirements & Limits
metformin hcl er (mod)	E	
metformin hcl er (osm)	E	
metformin hcl oral solution	1	
metformin hcl oral tablet 1000 mg, 500 mg, 850 mg	1	
metformin hcl oral tablet 625 mg	E	
MOUNJARO	2	PA, ST, QL
NESINA	2	QL
ONGLYZA	2	QL
OSENI	2	QL
OZEMPIC SUBCUTANEOUS SOLUTION PEN-INJECTOR 2 MG/1.5ML, 4 MG/3ML	2	PA, ST, QL
OZEMPIC SUBCUTANEOUS SOLUTION PEN-INJECTOR 8 MG/3ML	2	PA, ST
pioglitazone hcl	1	QL
RIOMET	E	
RYBELSUS	2	PA, ST, QL
SOLIQUA	2	QL
SYMLINPEN 120	3	QL
SYMLINPEN 60	3	QL
SYNJARDY	2	QL
SYNJARDY XR	2	QL
TRADJENTA	2	QL
TRIJARDY XR	2	QL
TRULICITY	2	PA, ST, QL
VICTOZA SOLUTION PEN-INJECTOR 18 MG/3ML SUBCUTANEOUS	2	PA, ST, (2 Pak), QL
VICTOZA SOLUTION PEN-INJECTOR 18 MG/3ML SUBCUTANEOUS	3	PA, ST, (3 Pak), QL
ZEGALOGUE SUBCUTANEOUS SOLUTION AUTO-INJECTOR	2	QL
Drugs for Blood Disorders		
ADVATE	2	SP
ADYNOVATE	3	PA, SP
AFSTYLA INTRAVENOUS KIT	3	PA, SP

Drug Name	Drug Tier	Requirements & Limits
ALPHANATE	2	SP
ARANESP (ALBUMIN FREE)	2	QL, SP
DOPTELET	3	PA, ST, QL, SP
ELOCTATE	3	PA, SP
EMPAVELI	2	PA, QL, SP
HEMOFIL M	2	SP
HUMATE-P	2	SP
JIVI	3	PA, SP
KOATE	2	SP
KOATE-DVI	2	SP
KOGENATE FS	2	SP
KOVALTRY	2	SP
MULPLETA	2	PA, QL, SP
NEULASTA	3	SP
NOVOEIGHT	2	SP
NUWIQ INTRAVENOUS KIT	2	SP
NUWIQ INTRAVENOUS SOLUTION RECONSTITUTED	2	SP
RECOMBINATE	2	SP
RETACRIT INJECTION SOLUTION	2	QL, SP
TAVALISSE	3	PA, QL, SP
WILATE	2	SP
ZARXIO	2	SP
ZIEXTENZO	3	SP
Drugs for Sexual Dysfunction		
ADDYI	3	QL
CIALIS	E	QL
IMVEXXY MAINTENANCE PACK	2	QL
IMVEXXY STARTER PACK	2	QL
INTRAROSA	3	PA, QL
OSPHENA	2	PA, QL
sildenafil citrate oral tablet 100 mg, 25 mg, 50 mg	1	QL
STENDRA	2	QL
tadalafil oral	1	QL
VIAGRA	E	QL
VYLEESI	3	QL

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Drug Name	Drug Tier	Requirements & Limits
Electrolytes / Vitamins		
cyanocobalamin injection solution 1000 mcg/ml	1	
CYANOCOBALAMIN INJECTION SOLUTION 2000 MCG/ML	3	
DODEX	3	
DRISDOL	3	
ERGOCAL	3	
ergocalciferol oral capsule	1	
FLORIVA PLUS	3	
folic acid oral tablet 1 mg	1	
klor-con	1	
klor-con 10	1	
klor-con m10	1	
klor-con m15	3	
klor-con m20	1	
K-TAB	3	
LOKELMA	3	QL
multi-vitamin/fluoride	1	
multivitamin/fluoride tablet chewable 0.25 mg oral (rx)	1	
MULTIVITAMIN/FLUORIDE TABLET CHEWABLE 0.25 MG ORAL (RX)	3	
multivitamin/fluoride tablet chewable 0.5 mg oral	1	
MULTIVITAMIN/FLUORIDE TABLET CHEWABLE 0.5 MG ORAL	3	
multivitamin/fluoride tablet chewable 1 mg oral	1	
MULTIVITAMIN/FLUORIDE TABLET CHEWABLE 1 MG ORAL	3	
MULTI-VIT-FLOR	3	
NASCOBAL	3	
POLY-VI-FLOR	3	
potassium chloride crys er oral tablet extended release 10 meq, 20 meq	1	
potassium chloride crys er oral tablet extended release 15 meq	3	
potassium chloride er	1	

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

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Drug Name	Drug Tier	Requirements & Limits
Gastrointestinal Agents - Drugs for Bowel, Intestine and Stomach Conditions		
ANASPAZ	2	
CLENPIQ	2	
dicyclomine hcl oral	1	
diphenoxylate-atropine	1	
ED-SPAZ	3	
gavilyte-c	1	H
gavilyte-g	1	QL, H
glycopyrrolate oral tablet 1 mg, 2 mg	1	
GOLYTELY	3	QL
hyoscyamine sulfate er	1	
hyoscyamine sulfate oral	1	
hyoscyamine sulfate sl	1	
hyoscyamine sulfate sublingual	1	
hyosyne	1	
LEVBID	3	
LEVSIN ORAL	3	
LEVSIN/SL	3	
LINZESS	2	PA, QL
LOMOTIL	3	
MOTEGRITY	3	PA, QL
MOVIPREP	2	QL
NA SULFATE-K SULFATE-MG SULF	2	QL
NULEV	3	
OSCIMIN	3	
peg-3350/electrolytes	1	QL, H
peg-3350/electrolytes/ascorbic	1	QL
peg-kcl-nacl-nasulf-na asc-c	1	QL
PLENVU	2	QL
RELTONE	E	
SUPREP BOWEL PREP KIT	2	QL
SYMPROIC	2	PA, QL
URSO 250	E	
URSO FORTE	E	
URSODIOL ORAL CAPSULE 200 MG, 400 MG	E	

Drug Name	Drug Tier	Requirements & Limits
ursodiol oral capsule 300 mg	1	
ursodiol oral tablet	1	
VIBERZI	3	QL
ZELNORM	3	PA, QL
Genetic or Enzyme Disorder - Drugs for Replacement, Modification, Treatment		
CERDELGA	2	PA, SP
CREON	2	
CUPRIMINE	E	SP
DEPEN TITRATABS	2	SP
ENDARI	3	QL
nitisinone	E	PA, SP
NITYR	E	PA
ORFADIN ORAL CAPSULE	1	PA, SP
ORFADIN ORAL SUSPENSION	2	PA, SP
PANCREAZE	3	ST
penicillamine oral capsule	E	SP
penicillamine oral tablet	1	SP
PERTZYE	3	ST
STRENSIQ	2	PA, QL, SP
SYPRINE	E	PA, SP
TEGSEDI	2	PA, QL, SP
trientine hcl	1	PA, SP
VIOKACE	3	ST
ZENPEP	2	
Genitourinary Agents - Drugs for Bladder, Genital and Kidney Conditions		
AURYXIA	E	
DITROPAN XL	E	
fesoterodine fumarate er	E	
GELNIQUE	3	
oxybutynin chloride er	1	
oxybutynin chloride oral	1	
phenazo oral tablet 200 mg	1	
phenazopyridine hcl oral tablet 100 mg, 200 mg	1	
PYRIDIUM	3	
THIOLA	3	SP

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Drug Name	Drug Tier	Requirements & Limits
THIOLA EC	3	SP
TOVIAZ	E	
VELPHORO	2	
Genitourinary Agents - Drugs for Prostate Conditions		
alfuzosin hcl er	1	
finasteride oral tablet 5 mg	1	
FLOMAX	E	
PROSCAR	E	
tamsulosin hcl	1	
terazosin hcl	1	
UROXATRAL	E	
Hormonal Agents - Hormone Replacement and Birth Control		
afirmelle	1	H
ALORA	3	QL
altavera	1	H
alyacen 1/35	1	H
amethia	1	H
ANNOVERA	3	QL
apri	1	H
ashlyna	1	H
aubra	1	H
aubra eq	1	H
aurovela 1.5/30	1	H
aurovela 1/20	1	H
aurovela 24 fe	1	H
aurovela fe 1.5/30	1	H
aurovela fe 1/20	1	H
aviane	1	H
AYGESTIN	3	
ayuna	1	H
azurette	1	H
balziva	1	H
BEYAZ	E	
BIJUVA	3	
blisovi 24 fe	1	H
blisovi fe 1.5/30	1	H
blisovi fe 1/20	1	H

Drug Name	Drug Tier	Requirements & Limits
briellyn	1	H
camila	1	H
camrese	1	H
camrese lo	1	H
chateal	1	H
chateal eq	1	H
CLIMARA	E	QL
CLIMARA PRO	2	QL
cryselle-28	1	H
cyred	1	H
cyred eq	1	H
dasetta 1/35	1	H
daysee	1	H
deblitane	1	H
delyla	1	H
DEPO-PROVERA INTRAMUSCULAR SUSPENSION	3	QL
DEPO-PROVERA INTRAMUSCULAR SUSPENSION PREFILLED SYRINGE	3	QL
DEPO-SUBQ PROVERA 104	2	QL
desogestrel-ethinyl estradiol	1	H
DIVIGEL	2	
dotti	1	QL
drospiren-eth estrad-levomefol	1	
drospirenone-ethinyl estradiol	1	H
DUAVEE	3	QL
ELESTRIN	3	
elinest	1	H
eluryng	1	H
emoquette	1	H
enskyce	1	H
errin	1	H
estarylla	1	H
ESTRACE	E	
estradiol oral	1	
estradiol patch twice weekly 0.025 mg/24hr transdermal	1	(generic for Minivelle), QL

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Drug Name	Drug Tier	Requirements & Limits
estradiol patch twice weekly 0.025 mg/24hr transdermal	1	(generic for Vivelle-Dot), QL
estradiol patch twice weekly 0.0375 mg/24hr transdermal	1	(generic for Minivelle), QL
estradiol patch twice weekly 0.0375 mg/24hr transdermal	1	(generic for Vivelle-Dot), QL
estradiol patch twice weekly 0.05 mg/24hr transdermal	1	(generic for Minivelle), QL
estradiol patch twice weekly 0.05 mg/24hr transdermal	1	(generic for Vivelle-Dot), QL
estradiol patch twice weekly 0.075 mg/24hr transdermal	1	(generic for Minivelle), QL
estradiol patch twice weekly 0.075 mg/24hr transdermal	1	(generic for Vivelle-Dot), QL
estradiol patch twice weekly 0.1 mg/24hr transdermal	1	(generic for Minivelle), QL
estradiol patch twice weekly 0.1 mg/24hr transdermal	1	(generic for Vivelle-Dot), QL
estradiol transdermal patch weekly	1	(generic for Climara), QL
estradiol vaginal	1	
ESTRING	2	QL
ESTROGEL	3	QL
etonogestrel-ethinyl estradiol	1	H
EVAMIST	2	
falmina	1	H
fayosim	1	
femynor	1	H
gemmily	1	
hailey 1.5/30	1	H
hailey 24 fe	1	H
hailey fe 1.5/30	1	H
hailey fe 1/20	1	H
heather	1	H
iclevia	1	H
incassia	1	H
introvale	1	H
isibloom	1	H
jaimiess	1	H
jasmiel	1	H

Drug Name	Drug Tier	Requirements & Limits
jencycla	1	H
jolessa	1	H
juleber	1	H
junel 1.5/30	1	H
junel 1/20	1	H
junel fe 1.5/30	1	H
junel fe 1/20	1	H
junel fe 24	1	H
kalliga	1	H
kariva	1	H
kurvelo	1	H
larin 1.5/30	1	H
larin 1/20	1	H
larin 24 fe	1	H
larin fe 1.5/30	1	H
larin fe 1/20	1	H
larissia	1	H
lessina	1	H
levonorgest-eth est & eth est	1	
levonorgest-eth estrad 91-day	1	H
levonorgestrel-ethinyl estrad oral tablet 0.1-20 mg-mcg, 0.15-30 mg-mcg	1	H
levora 0.15/30 (28)	1	H
lillow oral tablet 0.15-30 mg-mcg	1	H
LO LOESTRIN FE	1	H
LOESTRIN 1.5/30 (21)	E	
LOESTRIN 1/20 (21)	E	
LOESTRIN FE 1.5/30	E	
LOESTRIN FE 1/20	E	
lojaimiess	1	H
loryna	1	H
LOSEASONIQUE	3	
low-ogestrel	1	H
lo-zumandimine	1	H
lutura	1	H
lyleq	1	H
lyllana	3	QL

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Drug Name	Drug Tier	Requirements & Limits
lyza	1	H
marlissa	1	H
medroxyprogesterone acetate intramuscular suspension	1	QL, H
medroxyprogesterone acetate intramuscular suspension prefilled syringe	1	H
medroxyprogesterone acetate oral	1	
MENOSTAR	3	QL
merzee	1	
microgestin 1.5/30	1	H
microgestin 1/20	1	H
microgestin 24 fe	1	H
microgestin fe 1.5/30	1	H
microgestin fe 1/20	1	H
mili	1	H
MINASTRIN 24 FE	E	
MINIVELLE	E	QL
MIRCETTE	E	
mono-linyah	1	H
MYFEMBREE	2	PA, QL
NATAZIA	2	
necon 0.5/35 (28)	1	H
nikki	1	H
nora-be	1	H
norethin ace-eth estrad-fe oral capsule	1	
norethin ace-eth estrad-fe oral tablet	1	H
norethindrone acetate oral	1	
norethindrone acet-ethinyl est	1	H
norethindrone oral	1	H
norgestimate-eth estradiol	1	H
norgestimate-ethinyl estradiol triphasic	1	H
norlyda	1	H
norlyroc	1	H
nortrel 0.5/35 (28)	1	H
nortrel 1/35 (21)	1	H

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

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Drug Name	Drug Tier	Requirements & Limits
tri-lo-mili	1	H
tri-lo-sprintec	1	H
tri-mili	1	H
tri-nymyo	1	H
tri-sprintec	1	H
tri-vylibra	1	H
tri-vylibra lo	1	H
tyblume	1	H
tydemy	1	
VAGIFEM	E	
vestura	1	H
vienva	1	H
viorele	1	H
VIVELLE-DOT	E	QL
volnea	1	H
vyfemla	1	H
vylibra	1	H
wera	1	H
xulane	1	H
YASMIN 28	3	
YAZ	3	
yuvafem	1	
zafemy	1	H
zumandimine	1	H
Hormonal Agents - Oral Steroids		
ALKINDI SPRINKLE	E	
CORTEF	3	
DEXABLISS	E	
dexamethasone intensol	1	
dexamethasone oral	1	
DXEVO 11-DAY	E	
HEMADY	E	
HIDEX 6-DAY	E	
hydrocortisone oral	1	
MEDROL ORAL TABLET 16 MG, 32 MG, 4 MG, 8 MG	3	
MEDROL ORAL TABLET 2 MG	2	
MEDROL ORAL TABLET THERAPY PACK	3	

Drug Name	Drug Tier	Requirements & Limits
methylprednisolone oral	1	
MILLIPRED	2	
ORAPRED ODT	3	
PEDIAPRED	2	
prednisolone oral	1	
prednisolone sodium phosphate oral solution 10 mg/5ml, 25 mg/5ml, 6.7 (5 base) mg/5ml	E	
prednisolone sodium phosphate oral solution 15 mg/5ml	1	
prednisolone sodium phosphate oral solution 20 mg/5ml	E	QL
prednisolone sodium phosphate oral tablet dispersible	1	
prednisone intensol	1	
prednisone oral	1	
RAYOS	E	
TAPERDEX 12-DAY	3	
TAPERDEX 6-DAY	3	
TAPERDEX 7-DAY	3	
ZCORT 7-DAY	E	
Hormonal Agents - Other		
cabergoline	1	
DDAVP	E	
DDAVP PF	E	
desmopressin acetate injection	1	
DESMOPRESSIN ACETATE NASAL	3	
desmopressin acetate oral	1	
desmopressin acetate pf	1	
GENOTROPIN	E	PA, QL, SP
GENOTROPIN MINIQUICK	E	PA, QL, SP
HUMATROPE	E	PA, QL, SP
LANREOTIDE ACETATE	E	SP
NOCDURNA	3	QL
NORDITROPIN FLEXPRO	2	PA, QL, SP
NUTROPIN AQ NUSPIN 10	2	PA, QL, SP
NUTROPIN AQ NUSPIN 20	2	PA, QL, SP
NUTROPIN AQ NUSPIN 5	2	PA, QL, SP
OMNITROPE	E	PA, QL, SP

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Drug Name	Drug Tier	Requirements & Limits
ORIAHNN	2	PA, QL
ORLISSA	2	QL
SOMATULINE DEPOT	3	SP
STIMATE	3	
ZOMACTON	E	PA, QL, SP
Hormonal Agents - Testosterone Replacement		
ANDRODERM	2	QL
ANDROGEL PUMP	E	QL
ANDROGEL TRANSDERMAL GEL 25 MG/2.5GM (1%), 40.5 MG/2.5GM (1.62%), 50 MG/5GM (1%)	E	QL
DEPO-TESTOSTERONE	3	
FORTESTA	E	QL
NATESTO	E	QL
TESTIM	1	QL
testosterone cypionate intramuscular	1	
testosterone transdermal	E	QL
VOGELXO	E	QL
VOGELXO PUMP	E	QL
Hormonal Agents - Thyroid		
ARMOUR THYROID	2	
CYTOMEL	E	
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	
SYNTHROID	E	
THYQUIDITY	3	
TIROSINT	3	
TIROSINT-SOL	2	
unithroid	1	

Drug Name	Drug Tier	Requirements & Limits
Immunological Agents - Drugs for Immune System Stimulation or Suppression		
ACTEMRA ACTPEN	3	PA, ST, QL, SP
ACTEMRA SUBCUTANEOUS	3	PA, ST, QL, SP
ADBRY	2	PA, SP
ASTAGRAF XL	E	
AZASAN	3	
azathioprine oral	1	
BERINERT	3	PA, ST, QL, SP
CELLCEPT	E	
CIMZIA	E	PA
CIMZIA PREFILLED KIT	2	PA, QL, SP
CIMZIA STARTER KIT	2	PA, QL, SP
CINRYZE	E	PA, QL, SP
COSENTYX (300 MG DOSE)	3	PA, ST, QL, SP
COSENTYX 150 MG/ML SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	3	PA, ST, QL, SP
COSENTYX SENSOREADY (300 MG)	3	PA, ST, QL, SP
COSENTYX SENSOREADY PEN	3	PA, ST, QL, SP
cyclosporine modified	1	
ENBREL MINI	3	PA, ST, QL, SP
ENBREL SUBCUTANEOUS SOLUTION	3	PA, ST, QL, SP
ENBREL SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	3	PA, ST, QL, SP
ENBREL SURECLICK	3	PA, ST, QL, SP
ENVARUSUS XR	E	
FIRAZYR	E	PA, QL, SP
gengraf	1	
HAEGARDA	2	PA, QL, SP
HUMIRA	2	PA, QL, SP
HUMIRA PEDIATRIC CROHNS START	2	PA, QL, SP
HUMIRA PEN	2	PA, QL, SP
HUMIRA PEN-CD/UC/HS STARTER	2	PA, QL, SP
HUMIRA PEN-PEDIATRIC UC START	2	PA, QL, SP

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Drug Name	Drug Tier	Requirements & Limits
HUMIRA PEN-PS/UV/ADOL HS START	2	PA, QL, SP
HUMIRA PEN-PSOR/UEVIT STARTER	2	PA, QL, SP
icatibant acetate	1	PA, QL, SP
IMURAN	E	
MAYZENT	3	PA, QL, SP
methotrexate oral	1	
methotrexate sodium	1	
methotrexate sodium (pf)	1	
mycophenolate mofetil oral	1	
mycophenolate sodium	1	
MYFORTIC	E	
NEORAL	E	
OLUMIANT ORAL TABLET 1 MG	2	PA, ST, QL, SP
OLUMIANT ORAL TABLET 2 MG	2	PA, ST, QL, SP
OLUMIANT ORAL TABLET 4 MG	E	PA, ST, SP
ORENCIA CLICKJECT	3	PA, ST, QL, SP
ORENCIA SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 125 MG/ML	3	PA, ST, QL, SP
ORENCIA SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 50 MG/0.4ML, 87.5 MG/0.7ML	3	PA, QL, SP
OTEZLA	2	PA, QL, SP
OTREXUP	E	QL
PROGRAF ORAL	3	
RAPAMUNE ORAL SOLUTION	3	
RAPAMUNE ORAL TABLET	E	
RASUVO	2	QL
REDITREX	E	QL
RINVOQ	2	PA, QL, SP
RUCONEST	3	PA, QL, SP
sajazir	E	PA, QL, SP
SIMPONI	2	PA, QL, SP
sirolimus oral	1	
SKYRIZI SUBCUTANEOUS SOLUTION CARTRIDGE	E	

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

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

Drug Name	Drug Tier	Requirements & Limits
azelastine hcl ophthalmic	1	
BESIVANCE	3	
CILOXAN	3	
ciprofloxacin hcl ophthalmic	1	
erythromycin ophthalmic	1	H-PA
EYSUVIS	3	QL
ILEVRO	3	
INVELTYS	3	
ketorolac tromethamine ophthalmic	1	
KLARITY-A	E	
LOTEMAX OPHTHALMIC GEL	3	
LOTEMAX OPHTHALMIC OINTMENT	3	
LOTEMAX OPHTHALMIC SUSPENSION	E	QL
LOTEMAX SM	3	QL
loteprednol etabonate ophthalmic gel	1	
loteprednol etabonate ophthalmic suspension	1	QL
MAXITROL	3	
moxifloxacin hcl (2x day)	1	
moxifloxacin hcl ophthalmic solution	1	
neomycin-polymyxin-dexameth ophthalmic ointment	1	
neomycin-polymyxin-dexameth ophthalmic suspension 3.5-10000-0.1	1	
NEVANAC	3	
OCUFLOX	3	
ofloxacin ophthalmic	1	
olopatadine hcl ophthalmic solution 0.1 %	1	
olopatadine hcl ophthalmic solution 0.2 %	E	
polymyxin b-trimethoprim	1	
POLYTRIM	3	
PRED FORTE	E	
PRED MILD	3	

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Drug Name	Drug Tier	Requirements & Limits
prednisolone acetate ophthalmic	1	
TOBRADEX	3	
TOBRADEX ST	3	
tobramycin ophthalmic	1	QL
tobramycin-dexamethasone	1	
TOBREX	3	QL
VIGAMOX	E	
ZYLET	3	
Ophthalmic Agents - Drugs for Glaucoma		
ALPHAGAN P OPHTHALMIC SOLUTION 0.1 %	2	QL
ALPHAGAN P OPHTHALMIC SOLUTION 0.15 %	3	QL
AZOPT	E	QL
BETIMOL	2	QL
bimatoprost ophthalmic	1	QL
brimonidine tartrate ophthalmic solution 0.15 %	1	QL
brimonidine tartrate ophthalmic solution 0.2 %	1	
brimonidine tartrate-timolol	E	QL
brinzolamide	1	QL
COMBIGAN	1	QL
COSOPT	3	
COSOPT PF	E	QL
dorzolamide hcl-timolol mal	1	
dorzolamide hcl-timolol mal pf	1	QL
ISTALOL	3	
latanoprost ophthalmic	1	
LUMIGAN	2	
RHOPRESSA	3	QL
ROCKLATAN	3	QL
timolol maleate (once-daily)	1	
timolol maleate ocdose	1	
timolol maleate ophthalmic	1	
timolol maleate pf	1	
TIMOPTIC	3	
TIMOPTIC OCUDOSE OPHTHALMIC SOLUTION 0.25 %	2	

Drug Name	Drug Tier	Requirements & Limits
TIMOPTIC OCUDOSE OPHTHALMIC SOLUTION 0.5 %	3	
TIMOPTIC-XE	3	
TRAVATAN Z	E	QL
travoprost (bak free)	1	QL
VYZULTA	3	ST, QL
XALATAN	E	
XELPROS	3	QL
Ophthalmic Agents - Drugs for Miscellaneous Eye Conditions		
CEQUA	E	PA, QL
CYCLOSPORINE IN KLARITY	E	
cyclosporine ophthalmic	E	PA, QL
FLAREX	2	
RESTASIS	1	PA, QL
RESTASIS MULTIDOSE	3	PA, QL
TYRVAYA	3	PA, QL
VERKAZIA	E	PA, QL
XIIDRA	2	PA, QL
Otic Agents - Drugs for Ear Conditions		
CIPRODEX	1	
ciprofloxacin-dexamethasone	E	
neomycin-polymyxin-hc otic	1	
ofloxacin otic	1	
Respiratory - Drugs for Anaphylaxis		
AUVI-Q	2	QL
epinephrine injection solution auto-injector 0.15 mg/0.15ml	1	(generic for Adrenaclick), QL
epinephrine solution auto-injector 0.15 mg/0.3ml injection	1	(generic for EpiPen-Single Pack), QL
epinephrine solution auto-injector 0.15 mg/0.3ml injection	1	(generic for EpiPen), QL
epinephrine solution auto-injector 0.3 mg/0.3ml injection	1	(generic for Adrenaclick), QL
epinephrine solution auto-injector 0.3 mg/0.3ml injection	1	(generic for EpiPen-Single Pack), QL
epinephrine solution auto-injector 0.3 mg/0.3ml injection	1	QL

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Drug Name	Drug Tier	Requirements & Limits
epinephrine solution auto-injector 0.3 mg/0.3ml injection	1	(generic for EpiPen), QL
EPIPEN 2-PAK	E	QL
EPIPEN JR 2-PAK	E	QL
SYMJEPI	2	QL

Respiratory Tract / Pulmonary Agents - Drugs for Allergies, Cough, Cold

azelastine hcl nasal solution 0.1 %, 137 mcg/spray	1	
azelastine hcl nasal solution 0.15 %	E	
benzonatate	1	
cyproheptadine hcl oral	1	
fluticasone propionate nasal	1	QL
hydrocodone polst-chlorphen polster susp	1	PA, QL
ipratropium bromide nasal	1	
levocetirizine dihydrochloride oral	1	
OMNARIS	3	QL
promethazine hcl oral solution	1	
promethazine hcl oral syrup	1	
promethazine-codeine	1	PA, QL
promethazine-dm	1	
pseudoephedrine-bromphen-dm	1	
XHANCE	E	QL
ZETONNA	3	QL

Respiratory Tract / Pulmonary Agents - Drugs for Asthma and COPD

ADVAIR DISKUS	1	QL
ADVAIR HFA	2	QL, RS
AEROCHAMBER PLUS FLO-VU	2	
AEROCHAMBER PLUS FLO-VU LARGE	2	
AEROCHAMBER PLUS FLO-VU SMALL	2	
AEROCHAMBER PLUS FLO-VU W/MASK	2	
AIRDUO DIGIHALER	E	QL
AIRDUO RESPICLICK 113/14	E	QL
AIRDUO RESPICLICK 232/14	E	QL

Drug Name	Drug Tier	Requirements & Limits
AIRDUO RESPICLICK 55/14	E	QL
albuterol sulfate hfa aerosol solution 108 (90 base) mcg/act inhalation	1	QL
albuterol sulfate hfa aerosol solution 108 (90 base) mcg/act inhalation	1	(ProAir HFA or Proventil HFA), QL
ALBUTEROL SULFATE HFA AEROSOL SOLUTION 108 (90 BASE) MCG/ACT INHALATION	E	(Ventolin HFA), QL
albuterol sulfate inhalation	1	
albuterol sulfate oral	1	
ALVESCO	E	QL
ANORO ELLIPTA	3	QL
ARMONAIR DIGIHALER	E	QL
ARNUITY ELLIPTA	1	QL
ASMANEX (120 METERED DOSES)	E	QL
ASMANEX (14 METERED DOSES)	E	QL
ASMANEX (30 METERED DOSES)	E	QL
ASMANEX (60 METERED DOSES)	E	QL
ASMANEX HFA	E	QL
ATROVENT HFA	2	QL
BEVESPI AEROSPHERE	2	QL
BREO ELLIPTA	2	QL, RS
BREZTRI AEROSPHERE	3	QL, RS
budesonide inhalation	1	QL
BUDESONIDE-FORMOTEROL FUMARATE	3	QL, RS
COMBIVENT RESPIMAT	2	QL
EASIVENT	2	
EASIVENT MASK LARGE	2	
EASIVENT MASK MEDIUM	2	
EASIVENT MASK SMALL	2	
FASENRA PEN	3	PA, QL
FLEXICHAMBER	2	
FLOVENT DISKUS	1	QL
FLOVENT HFA	1	QL
FLUTICASONE FUROATE-VILANTEROL	E	QL, RS
FLUTICASONE PROPIONATE HFA	E	QL

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Drug Name	Drug Tier	Requirements & Limits
fluticasone-salmeterol inhalation aerosol powder breath activated 100-50 mcg/act, 250-50 mcg/act, 500-50 mcg/act	E	QL
FLUTICASONE-SALMETEROL INHALATION AEROSOL POWDER BREATH ACTIVATED 113-14 MCG/ACT, 232-14 MCG/ACT, 55-14 MCG/ACT	1	QL
formoterol fumarate inhalation	1	QL
INCRUSE ELLIPTA	E	QL
INSPIRACHAMBER/LARGE	2	
INSPIRACHAMBER/MEDIUM	2	
INSPIRACHAMBER/MOUTHPIECE	2	
INSPIRACHAMBER/SMALL	2	
INSPIREASE	2	
ipratropium-albuterol	1	
LEVALBUTEROL HFA INHALATION AEROSOL 45 MCG/ACT	3	QL
montelukast sodium oral	1	
NUCALA SUBCUTANEOUS SOLUTION AUTO-INJECTOR	3	PA, QL, SP
NUCALA SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	3	PA, QL, SP
PERFOROMIST	3	QL
PROAIR HFA	E	QL
PROAIR RESPICLICK	E	QL
PROVENTIL HFA	E	QL
PULMICORT FLEXHALER	1	QL
PULMICORT SUSPENSION	E	QL
QVAR REDHALER	E	QL
SEREVENT DISKUS	2	QL
SINGULAIR ORAL PACKET	3	
SINGULAIR ORAL TABLET	E	
SINGULAIR ORAL TABLET CHEWABLE	E	
SPIRIVA HANDIHALER	2	QL
SPIRIVA RESPIMAT	2	QL
STIOLTO RESPIMAT	2	QL
STRIVERDI RESPIMAT	2	QL
SYMBICORT	2	QL, RS

Drug Name	Drug Tier	Requirements & Limits
TRELEGY ELLIPTA	3	QL, RS
VENTOLIN HFA	E	QL
VORTEX VALVED HOLDING CHAMBER	2	
wixela inhub	E	QL
XOPENEX HFA	3	QL
YUPELRI	3	QL

Respiratory Tract / Pulmonary Agents - Drugs for Cystic Fibrosis

Drug Name	Drug Tier	Requirements & Limits
BETHKIS	E	PA, QL, SP
BRONCHITOL	3	PA, ST, QL, SP
BRONCHITOL TOLERANCE TEST	3	PA, ST, QL, SP
KITABIS PAK	E	PA, QL, SP
PULMOZYME	2	PA, QL, SP
TOBI NEBULIZATION SOLUTION 300 MG/5ML INHALATION 300 MG/5ML	E	PA, QL, SP
TOBI PODHALER	3	PA, QL, SP
tobramycin inhalation nebulization solution 300 mg/4ml	1	PA, QL, SP
tobramycin nebulization solution 300 mg/5ml inhalation	1	PA, QL, SP
tobramycin nebulization solution 300 mg/5ml inhalation	E	PA, QL, SP
TOBRAMYCIN NEBULIZATION SOLUTION 300 MG/5ML INHALATION	E	PA, QL, SP

Respiratory Tract / Pulmonary Agents - Drugs for Pulmonary Hypertension

Drug Name	Drug Tier	Requirements & Limits
ADEMPAS	2	PA, QL, SP
bosentan	1	PA, QL, SP
OPSUMIT	2	PA, QL, SP
REMODULIN	E	
TRACLEER	2	PA, QL, SP
treprostinil	E	
TYVASO DPI MAINTENANCE KIT	E	PA, SP
TYVASO DPI TITRATION KIT	E	PA, SP
TYVASO INHALATION POWDER	E	PA, SP
TYVASO INHALATION SOLUTION	2	PA, SP
TYVASO REFILL	2	PA, SP
TYVASO STARTER	2	PA, SP

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



Drug Name	Drug Tier	Requirements & Limits
Skeletal Muscle Relaxants - Drugs for Muscle Pain and Spasm		
AMRIX	E	
BACLOFEN ORAL SOLUTION	3	
baclofen oral tablet	1	
carisoprodol oral	1	
cyclobenzaprine hcl er	E	
cyclobenzaprine hcl oral tablet 10 mg, 5 mg	1	
cyclobenzaprine hcl oral tablet 7.5 mg	E	
FEXMID	E	
FLEQSUVY	3	
LYVISPAH	E	
metaxalone	1	
methocarbamol oral	1	
OZOBAX	3	
SOMA	E	
tizanidine hcl oral	1	
VANADOM	E	
ZANAFLEX	3	
Sleep Disorder Agents		
AMBIEN	E	QL
AMBIEN CR	E	QL
BELSOMRA	3	QL
DAYVIGO	3	QL
EDLUAR	3	QL
eszopiclone	1	QL
LUNESTA	E	QL
modafinil	1	PA, QL
PROVIGIL	E	PA, QL
RESTORIL	3	
SUNOSI	3	PA, QL
temazepam	1	
WAKIX	3	PA, QL, SP
XYREM	3	PA, QL, SP
XYWAV	3	PA, QL, SP

Drug Name	Drug Tier	Requirements & Limits
zolpidem tartrate	1	QL
zolpidem tartrate er	1	QL
ZOLPIMIST	3	QL

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



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ABILIFY	14	ADLYXIN STARTER PACK	25	ALPHAGAN P OPHTHALMIC SOLUTION 0.1 %	36
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ACCU-CHEK AVIVA PLUS TEST STRIPS	22	ADMELOG SOLOSTAR	24	ALPHANATE	26
ACCU-CHEK FASTCLIX LANCET KIT	22	ADVAIR DISKUS	37	alprazolam er	16
ACCU-CHEK FASTCLIX LANCETS	22	ADVAIR HFA	37	alprazolam intensol	16
ACCU-CHEK GUIDE KIT W/DEVICE	22	ADVATE	26	alprazolam oral	16
ACCU-CHEK GUIDE TEST STRIPS	22	ADYNOVATE	26	alprazolam xr	16
ACCU-CHEK SAFE-T PRO LANCETS	22	AEROCHAMBER PLUS FLO-VU	37	ALREX	35
ACCU-CHEK SMARTVIEW TEST STRIPS	22	AEROCHAMBER PLUS FLO-VU LARGE	37	ALTACE	16
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ACCU-CHEK SOFTCLIX LANCETS	22	AEROCHAMBER PLUS FLO-VU W/MASK	37	ALTOPREV	16
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ACCU-CHEK SOFTCLIX LANCETS	22	AIMOVI SUBCUTANEOUS SOLUTION AUTO-INJECTOR 140 MG/ML	13	AMARYL	25
ACCU-CHEK SOFTCLIX LANCETS	22	AIRDUO DIGIHALER	37	AMBIEN	39
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ACCU-CHEK SOFTCLIX LANCETS	22	ALA SCALP	20	amiodarone hcl oral	16
ACCU-CHEK SOFTCLIX LANCETS	22	ala-cort external cream 1 %	20	amitriptyline hcl oral	12
ACCU-CHEK SOFTCLIX LANCETS	22	ala-cort external cream 2.5 %	20	amlodipine besylate oral	16
ACCU-CHEK SOFTCLIX LANCETS	22	albuterol sulfate hfa aerosol solution 108 (90 base) mcg/act inhalation	37	amlodipine besylate-benazepril hcl	16
ACCU-CHEK SOFTCLIX LANCETS	22	albuterol sulfate inhalation	37	amlodipine besylate-valsartan	16
ACCU-CHEK SOFTCLIX LANCETS	22	albuterol sulfate oral	37	amnestem	20
ACCU-CHEK SOFTCLIX LANCETS	22	ALDACTONE	16	amoxicillin	10
ACCU-CHEK SOFTCLIX LANCETS	22	ALECENSA	14	amoxicillin-potassium clavulanate	10
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ANDROGEL PUMP	33	AUGMENTIN ES-600	10	BAQSIMI ONE PACK	25	
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ASMANEX HFA	37	azathioprine oral	33	bexarotene oral	14	
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ASTAGRAF XL	33	azelastine hcl nasal solution 0.1 %, 137 mcg/spray	37	BIDIL	16	
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budesonide oral	34	CARDIZEM LA	16	ciprofloxacin-dexamethasone	36	
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bupropion hcl er (sr)	12	carisoprodol oral	39	claravis	20	
bupropion hcl er (xl) oral tablet extended release 24 hour 150 mg, 300 mg	12	CAROSPIR	16	clarithromycin er.	10	
BUPROPION HCL ER (XL) ORAL TABLET EXTENDED RELEASE 24 HOUR 450 MG	12	cartia xt	16	clarithromycin oral	10	
bupropion hcl oral	12	carvedilol	16	CLENPIQ	28	
buspirone hcl oral	16	CATAFLAM	9	CLEOCIN ORAL CAPSULE 150 MG, 300 MG	10	
butalbital-apap-caffeine	8	cavarest	19	CLEOCIN ORAL CAPSULE 75 MG.	10	
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C			celecoxib oral	9	clindacin-p	20
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calcipotriene-betameth diprop external suspension	20	CENTANY AT	10	clindamycin phosphate external foam	20	
calcitriol external	20	cephalexin	10	clindamycin phosphate external gel	20	
calcitriol oral	35	CEQUA	36	clindamycin phosphate external lotion	20	
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COLCRYS	13	cyanocobalamin injection solution 1000 mcg/ml	27	DESCOVY	15
colesevelam hcl	16	CYANOCOBALAMIN INJECTION SOLUTION 2000 MCG/ML	27	desmopressin acetate injection	32
COMBIGAN	36	cyclobenzaprine hcl er	39	DESMOPRESSIN ACETATE NASAL	32
COMBIVENT RESPIMAT	37	cyclobenzaprine hcl oral tablet 10 mg, 5 mg	39	desmopressin acetate oral	32
CONCERTA	18	cyclobenzaprine hcl oral tablet 7.5 mg	39	desmopressin acetate pf	32
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CONTOUR NEXT LINK KIT W/DEVICE	23	cyproheptadine hcl oral	37	desvenlafaxine succinate er	12
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CONTOUR NEXT ONE DEVICE	23	cyred eq	29	dexamethasone intensol	32
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coremino	10			DEXCOM G5 TRANSMITTER	23
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CORLANOR	16			DEXCOM G6 SENSOR	23
CORTEF	32			DEXCOM G6 TRANSMITTER	23
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COSENTYX (300 MG DOSE)	33			DEXILANT	27
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COSENTYX SENSOREADY (300 MG)	33			dexmethylphenidate hcl	18
COSENTYX SENSOREADY PEN	33			dexmethylphenidate hcl er	18
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COSOPT PF	36			dextroamphetamine sulfate oral solution	19
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				DHIVY	14
				diazepam intensol	16

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DICLEGIS	13	doxycycline hyclate oral tablet delayed release 100 mg, 150 mg, 200 mg, 50 mg, 75 mg.	10	eletriptan hydrobromide	13	
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DILAUDID ORAL	8	DUOPA	14	emtricitabine-tenofovir df oral tablet 200-300 mg.	15	
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ERGOCAL	27	falmina	30	FLUOROPLEX EXTERNAL CREAM 1 %	21
ergocalciferol oral capsule	27	famotidine oral suspension reconstituted	27	FLUOROURACIL EXTERNAL CREAM 0.5 %	21
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estarylla	29	fenofibrate oral capsule 150 mg, 50 mg	17	fluoxetine hcl oral tablet 20 mg, 60 mg	12
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estradiol patch twice weekly 0.0375 mg/24hr transdermal	30	fesoterodine fumarate er	28	fluticasone-salmeterol inhalation aerosol powder breath activated 100-50 mcg/act, 250-50 mcg/act, 500-50 mcg/act	38
estradiol patch twice weekly 0.05 mg/24hr transdermal	30	FEXMID	39	FLUTICASONE-SALMETEROL INHALATION AEROSOL POWDER BREATH ACTIVATED 113-14 MCG/ ACT, 232-14 MCG/ACT, 55-14 MCG/ACT	38
estradiol patch twice weekly 0.075 mg/24hr transdermal	30	FINACEA EXTERNAL FOAM	21	fluvoxamine maleate	12
estradiol patch twice weekly 0.1 mg/24hr transdermal	30	FINACEA EXTERNAL GEL	21	fluvoxamine maleate er	12
estradiol transdermal patch weekly	30	finasteride oral tablet 5 mg	29	FOCALIN	19
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EXTAVIA	19	fluocinolone acetonide external	21	FREESTYLE LIBRE 3 SENSOR	23
EXTINA	13	fluocinolone acetonide scalp	21		
EYSUVIS	35	fluocinonide external cream 0.05 %	21		
EZALLOR SPRINKLE	17	fluocinonide external cream 0.1 %	21		
ezetimibe	17	fluocinonide external gel	21		
ezetimibe-simvastatin	17	fluocinonide external ointment	21		
		fluocinonide external solution	21		
		FLUORIDEX	20		
		FLUORIDEX ENHANCED WHITENING	20		



FREESTYLE LIBRE READER	23
FREESTYLE PRECISION NEO SYSTEM.	23
FREESTYLE PRECISION NEO TEST	23
furosemide oral.	17
fyremadel	34

G

gabapentin oral capsule	11
gabapentin oral solution 250 mg/5ml.	11
GABAPENTIN ORAL TABLET 25 MG, 50 MG.	11
gabapentin oral tablet 600 mg, 800 mg	11
ganirelix acetate solution prefilled syringe 250 mcg/0.5ml subcutaneous.	34
gavilyte-c.	28
gavilyte-g.	28
GAVRETO	14
GELNIQUE	28
GELSYN-3	8
gemfibrozil oral.	17
gemmily.	30
GEN7T EXTERNAL PATCH.	8
gengraf	33
GENOTROPIN.	32
GENOTROPIN MINIQUICK	32
GENTLE-LET PLATFORMS.	23
GENVOYA	15
GEODON ORAL.	15
GILENYA	19
GIMOTI	13
glatiramer acetate.	19
glatopa.	19
glimepiride	25
glipizide er	25
glipizide ir	25
glipizide xl	25
GLOPERBA.	13
glucagon emergency kit 1 mg injection 1 mg.	25
GLUCOCARD EXPRESSION TEST	23
GLUCOCARD SHINE TEST.	23
GLUCOCARD VITAL TEST	23

GLUCOTROL XL.	25
GLUMETZA.	25
glyburide oral	25
glyburide-metformin.	25
glycopyrrolate oral tablet 1 mg, 2 mg.	28
GLYXAMBI	25
GOLYTELY	28
GONITRO	17
guanfacine hcl	17, 19
guanfacine hcl er	19
GUARDIAN LINK 3 TRANSMITTER.	23
GUARDIAN REAL-TIME REPLACE PED	23
GUARDIAN SENSOR (3)	23
GYNAZOLE-1	13

H

HAEGARDA	33
hailey 1.5/30	30
hailey 24 fe	30
hailey fe 1/20.	30
hailey fe 1.5/30	30
HALCION.	16
HARVONI.	15
heather	30
HEMADY	32
HEMANGEOL	17
HEMOFIL M.	26
HIDEX 6-DAY.	32
HUMALOG INJECTION	24
HUMALOG KWIKPEN	24
HUMALOG MIX 50/50 KWIKPEN	24
HUMALOG MIX 50/50 VIAL	24
HUMALOG MIX 75/25 KWIKPEN	24
HUMALOG MIX 75/25 VIAL.	24
HUMALOG SUBCUTANEOUS	24
HUMALOG U-100 JUNIOR KWIKPEN	24
HUMATE-P	26
HUMATROPE	32
HUMIRA	33, 34
HUMIRA PEDIATRIC CROHNS START	33
HUMIRA PEN	33

HUMIRA PEN-CD/UC/HS STARTER.	33
HUMIRA PEN-PEDIATRIC UC START	33
HUMIRA PEN-PS/UV/ADOL HS START	34
HUMIRA PEN-PSOR/UEVIT STARTER.	34
HUMULIN 70/30 KWIKPEN.	24
HUMULIN 70/30 VIAL	24
HUMULIN N KWIKPEN	24
HUMULIN N VIAL.	25
HUMULIN R U-500 KWIKPEN.	25
HUMULIN R U-500 VIAL	25
HUMULIN R VIAL.	25
HYALGAN INTRA-ARTICULAR SOLUTION PREFILLED SYRINGE	8
hydralazine hcl oral	17
hydrochlorothiazide oral	17
hydrocodone bitartrate er oral capsule extended release 12 hour	8
hydrocodone bitartrate er oral tablet er 24 hour abuse-deterrent.	8
hydrocodone polst-chlorphen polst er susp.	37
hydrocodone-acetaminophen oral solution 7.5-325 mg/15ml	8
hydrocodone-acetaminophen oral tablet	8
hydrocort-pramoxine (perianal).	35
hydrocortisone ace-pramoxine external cream 1-1 %	35
hydrocortisone external cream 1 %	21
hydrocortisone external cream 2.5 %	21
hydrocortisone external lotion 2.5 %	21
hydrocortisone external ointment 1 %, 2.5 %	21
hydrocortisone oral	32
hydromorphone hcl er	8
hydromorphone hcl oral	8
hydromorphone hcl rectal.	8
hydroxychloroquine sulfate oral	14
hydroxyzine hcl oral	16
hydroxyzine pamoate oral	16
hyoscyamine sulfate er	28
hyoscyamine sulfate oral	28
hyoscyamine sulfate sl.	28



hyoscyamine sulfate sublingual	28	INSULIN ASPART.	25	JORNAY PM	19
hyosyne	28	INSULIN ASPART FLEXPEN.	25	juleber	30
HYSINGLA ER	8	INSULIN ASPART PENFILL.	25	JULUCA.	15
HYZAAR	17	INSULIN GLARGINE	25	junel 1/20.	30
I					
ibandronate sodium oral	35	INSULIN GLARGINE SOLOSTAR.	25	junel 1.5/30.	30
IBRANCE.	14	INSULIN LISPRO	25	junel fe 1/20	30
ibuprofen oral suspension 100 mg/5ml.	9	INSULIN LISPRO (1 UNIT DIAL)	25	junel fe 1.5/30	30
ibuprofen oral tablet 400 mg, 600 mg, 800 mg	9	INSULIN LISPRO JUNIOR KWIKPEN	25	junel fe 24	30
icatibant acetate	34	INSULIN LISPRO PROT & LISPRO.	25	JUST RIGHT 5000	20
iclevia.	30	INSULIN PEN NEEDLES	23	K	
ICLUSIG ORAL TABLET	14	INTRAROSA	26	K-TAB.	27
icosapent ethyl	17	introvale	30	kalliga.	30
IDHIFA	14	INTUNIV.	19	KAPSPARGO SPRINKLE.	17
ILEVRO	35	INVELTYS	35	kariva	30
IMBRUVICA ORAL TABLET	14	ipratropium bromide nasal	37	KAZANO	25
imiquimod external cream 3.75 %	21	ipratropium-albuterol	38	KENALOG EXTERNAL.	21
imiquimod external cream 5 %	21	irbesartan	17	KEPPRA ORAL.	11
imiquimod pump	21	irbesartan-hydrochlorothiazide	17	KEPPRA XR	11
IMITREX ORAL.	13	ISENTRESS.	15	KESIMPTA.	19
IMITREX STATDOSE REFILL.	13	ISENTRESS HD	15	ketoconazole external cream	13
IMITREX STATDOSE SYSTEM	13	isibloom.	30	ketoconazole external foam	13
IMPEKLO.	21	isosorb dinitrate-hydralazine.	17	ketoconazole external shampoo.	13
IMPOYZ.	21	isosorbide mononitrate	17	ketodan external foam	13
IMURAN	34	isosorbide mononitrate er	17	KETOROLAC TROMETHAMINE NASAL	9
IMVEXXY MAINTENANCE PACK	26	isotretinoin capsule 10 mg oral	21	ketorolac tromethamine ophthalmic.	35
IMVEXXY STARTER PACK	26	isotretinoin capsule 20 mg oral	21	ketorolac tromethamine oral	9
IN TOUCH	23	isotretinoin capsule 30 mg oral	21	KITABIS PAK.	38
INBRIJA.	14	isotretinoin capsule 40 mg oral	21	KLARITY-A	35
incassia	30	isotretinoin oral capsule 25 mg, 35 mg.	21	KLISYRI	21
INCRUSE ELLIPTA	38	ISTALOL	36	KLONOPIN	16
INDERAL LA	17	ivermectin oral	14	klor-con	27
INDOCIN	9	J			
indomethacin er	9	jaimiess	30	klor-con 10	27
INDOMETHACIN ORAL CAPSULE 20 MG	9	jantoven	11	klor-con m10	27
indomethacin oral capsule 25 mg, 50 mg.	9	JANUVIA	25	klor-con m15	27
INSPIRACHAMBER/LARGE	38	JARDIANCE	25	klor-con m20.	27
INSPIRACHAMBER/MEDIUM	38	jasmiel	30	KLOXXADO.	10
INSPIRACHAMBER/MOUTHPIECE.	38	jencycla	30	KOATE	26
INSPIRACHAMBER/SMALL.	38	JENTADUETO.	25	KOATE-DVI	26
INSPIREASE.	38	JENTADUETO XR.	25	KOGENATE FS	26
		JIVI	26	KOMBIGLYZE XR.	25
		jolessa	30	KOSELUGO.	14
				KOVALTRY	26
				KRINTAFEL.	14



kurvelo.....	30	levonorgest-eth est & eth est.....	30	lorazepam oral concentrate 2 mg/ml.....	16
KYNMOBI.....	14	levonorgest-eth estrad 91-day.....	30	lorazepam oral tablet.....	16
L					
labetalol hcl oral.....	17	levonorgestrel-ethinyl estrad oral tablet 0.1-20 mg-mcg, 0.15-30 mg-mcg.....	30	LOREEV XR.....	16
lacosamide oral.....	11	levora 0.15/30 (28).....	30	LORTAB.....	8
LAMICTAL.....	11	LEVOTHYROXINE SODIUM ORAL CAPSULE.....	33	loryna.....	30
LAMICTAL ODT.....	11	levothyroxine sodium oral tablet.....	33	losartan potassium oral.....	17
LAMICTAL STARTER.....	11	levoxyl.....	33	losartan potassium-hctz.....	17
LAMICTAL XR.....	11	LEVSIN ORAL.....	28	LOSEASONIQUE.....	30
lamotrigine er.....	11	LEVSIN/SL.....	28	LOTEMAX OPHTHALMIC GEL.....	35
lamotrigine oral kit.....	11	LEXAPRO.....	12	LOTEMAX OPHTHALMIC OINTMENT.....	35
lamotrigine oral tablet.....	11	LIALDA.....	35	LOTEMAX OPHTHALMIC SUSPENSION.....	35
lamotrigine oral tablet chewable.....	11	lidocaine external ointment 5 %.....	8	LOTEMAX SM.....	35
lamotrigine oral tablet dispersible.....	11	lidocaine external patch 5 %.....	8	LOTENSIN.....	17
lamotrigine starter kit-blue.....	11	lidocaine hcl mouth/throat.....	20	LOTENSIN HCT.....	17
lamotrigine starter kit-green.....	11	lidocaine viscous hcl.....	20	loteprednol etabonate ophthalmic gel.....	35
lamotrigine starter kit-orange.....	11	lidocaine-prilocaine external cream.....	8	loteprednol etabonate ophthalmic suspension.....	35
LANCETS.....	22-24	LIDODERM.....	8	LOTREL.....	17
LANREOTIDE ACETATE.....	32	lillow oral tablet 0.15-30 mg-mcg.....	30	lovastatin oral.....	17
LANTUS SOLOSTAR.....	25	LINZESS.....	28	LOVAZA.....	17
LANTUS U-100 VIAL.....	25	liothyronine sodium oral.....	33	LOVENOX.....	11
larin 1/20.....	30	LIPITOR.....	17	low-ogestrel.....	30
larin 1.5/30.....	30	LIPOFEN.....	17	LUMIGAN.....	36
larin 24 fe.....	30	lisinopril oral.....	17	LUNESTA.....	39
larin fe 1/20.....	30	lisinopril-hydrochlorothiazide.....	17	lutera.....	30
larin fe 1.5/30.....	30	lithium carbonate er.....	16	lyleq.....	30
larissia.....	30	lithium carbonate oral.....	16	lyllana.....	30
LASIX.....	17	LITHOBID.....	16	LYMEPAK.....	10
latanoprost ophthalmic.....	36	LO LOESTRIN FE.....	30	LYNPARZA.....	14
LATUDA.....	15	lo-zumandimine.....	30	LYRICA.....	19
LEDIPASVIR-SOFOSBUVIR.....	15	LODINE.....	9	LYRICA CR.....	19
lenalidomide.....	14	LOESTRIN 1/20 (21).....	30	LYUMJEV KWIKPEN.....	25
lessina.....	30	LOESTRIN 1.5/30 (21).....	30	LYUMJEV VIAL.....	25
letrozole oral.....	14	LOESTRIN FE 1/20.....	30	LYVISPAH.....	39
LEVALBUTEROL HFA INHALATION AEROSOL 45 MCG/ACT.....	38	LOESTRIN FE 1.5/30.....	30	lyza.....	31
LEVBID.....	28	LOFENA.....	9	M	
LEVEMIR U-100 FLEXTOUCH.....	25	lojaimiess.....	30	MALARONE.....	14
LEVEMIR U-100 VIAL.....	25	LOKELMA.....	27	marlissa.....	31
levetiracetam er.....	11	LOMOTIL.....	28	matzim la.....	17
levetiracetam oral.....	11	LOPID.....	17	MAVENCLAD.....	19
levo-t.....	33	LOPRESSOR.....	17	MAVYRET.....	15
levocetirizine dihydrochloride oral.....	37	LOPROX EXTERNAL SHAMPOO.....	13		
levofloxacin oral.....	10	lorazepam intensol.....	16		

MAXALT	13	methylphenidate hcl er (xr)	19	mondoxyne nl	10
MAXITROL	35	methylphenidate hcl er oral tablet extended release	19	mono-lynyah.	31
MAXZIDE	17	methylphenidate hcl er oral tablet extended release 24 hour	19	montelukast sodium oral	38
MAXZIDE-25	17	methylphenidate hcl oral	19	morphine sulfate (concentrate) oral solution 100 mg/5ml, 20 mg/ml	8
MAYZENT	34	methylprednisolone oral	32	morphine sulfate er oral capsule extended release 24 hour	8
MEDROL ORAL TABLET 16 MG, 32 MG, 4 MG, 8 MG	32	metoclopramide hcl oral	13	morphine sulfate er oral tablet extended release	8
MEDROL ORAL TABLET 2 MG	32	metoprolol succinate er	17	morphine sulfate oral	8
MEDROL ORAL TABLET THERAPY PACK	32	metoprolol tartrate oral	17	morphine sulfate rectal	8
medroxyprogesterone acetate intramuscular suspension	31	METROCREAM	21	MOTTEGRITY	28
medroxyprogesterone acetate intramuscular suspension prefilled syringe	31	METROGEL	21	MOUNJARO	26
medroxyprogesterone acetate oral	31	METROLOTION	21	MOVIPREP	28
meloxicam oral capsule	9	metronidazole external	21	moxifloxacin hcl (2x day)	35
MELOXICAM ORAL SUSPENSION	9	metronidazole oral	10	moxifloxacin hcl ophthalmic solution	35
meloxicam oral tablet	9	metronidazole vaginal	10	MS CONTIN	8
MENOSTAR	31	MICARDIS	17	MULPLETA	26
mercaptapurine oral	14	MICRODOT TEST	23	MULTAQ	17
merzee	31	microgestin 1/20	31	MULTI-VIT-FLOR	27
mesalamine er oral capsule	35	microgestin 1.5/30	31	multi-vitamin/fluoride	27
mesalamine oral	35	microgestin 24 fe	31	multivitamin/fluoride tablet chewable 0.25 mg oral (rx)	27
mesalamine rectal enema	35	microgestin fe 1/20	31	multivitamin/fluoride tablet chewable 0.5 mg oral	27
mesalamine rectal suppository	35	microgestin fe 1.5/30	31	multivitamin/fluoride tablet chewable 1 mg oral	27
metaxalone	39	mili	31	mupirocin calcium	10
metformin hcl er	25, 26	MILLIPRED	32	mupirocin external	10
metformin hcl er (mod)	26	MINASTRIN 24 FE	31	mycophenolate mofetil oral	34
metformin hcl er (osm)	26	MINILINK REAL-TIME TRANSMITTER	23	mycophenolate sodium	34
metformin hcl oral solution	26	MINIPRESS	17	MYDAYIS	19
metformin hcl oral tablet 1000 mg, 500 mg, 850 mg	26	MINIVELLE	29-31	MYFEMBREE	31
metformin hcl oral tablet 625 mg	26	MINOCYCLINE HCL ER ORAL CAPSULE EXTENDED RELEASE 24 HOUR	10	MYFORTIC	34
methimazole oral	33	minocycline hcl er oral tablet extended release 24 hour	10	myorisan	21
methocarbamol oral	39	minocycline hcl oral	10		
methotrexate oral	34	MINOLIRA	10		
methotrexate sodium	34	MIRAPEX ER	14		
methotrexate sodium (pf)	34	MIRCETTE	31		
METHYLIN	19	mirtazapine oral	12		
methylphenidate hcl er (cd)	19	MIRVASO	21		
methylphenidate hcl er (la) oral capsule extended release 24 hour 10 mg, 20 mg, 30 mg, 40 mg	19	misoprostol oral	27		
methylphenidate hcl er (la) oral capsule extended release 24 hour 60 mg	19	MITIGARE	13		
methylphenidate hcl er (osm)	19	MM EASY TOUCH GLUCOSE METER	23		
		modafinil	39		
		mometasone furoate external	21		

N

NA SULFATE-K SULFATE-MG SULF	28
nabumetone oral	9
nadolol oral	17
NAFRINSE DAILY/NEUTRAL	20
NAFRINSE WEEKLY	20
NALOCET	8
naloxone hcl injection	10
naloxone hcl nasal	10
naltrexone hcl oral	10



NAPRELAN	9	NITRO-DUR	17	NOVOLIN 70/30 RELION	25
NAPROSYN	9	NITRO-TIME	18	NOVOLIN 70/30 VIAL	25
naproxen oral suspension	9	nitrofurantoin macrocrystal	10	NOVOLIN N FLEXPEN	25
naproxen oral tablet	9	nitrofurantoin monohydrate macrocrystals	10	NOVOLIN N FLEXPEN RELION	25
naproxen oral tablet delayed release	9	nitroglycerin sublingual	17	NOVOLIN N RELION	25
naproxen sodium er oral tablet extended release 24 hour 375 mg, 500 mg	9	nitroglycerin transdermal	18	NOVOLIN N VIAL	25
NAPROXEN SODIUM ER ORAL TABLET EXTENDED RELEASE 24 HOUR 750 MG	9	nitroglycerin translingual	18	NOVOLIN R FLEXPEN	25
naproxen sodium oral tablet 275 mg, 550 mg	9	NITROLINGUAL	18	NOVOLIN R FLEXPEN RELION	25
naratriptan hcl	13	NITROMIST	18	NOVOLIN R RELION	25
NARCAN	10	NITROSTAT	18	NOVOLIN R VIAL	25
NASCOBAL	27	NITYR	28	NOVOLOG FLEXPEN	25
NATAZIA	31	NOCDURNA	32	NOVOLOG FLEXPEN RELION	25
NATESTO	33	nora-be	31	NOVOLOG PENFILL	25
NAYZILAM	11	NORDITROPIN FLEXPRO	32	NOVOLOG RELION	25
nebivolol hcl	17	norethin ace-eth estrad-fe oral capsule	31	NOVOLOG U-100 VIAL	25
necon 0.5/35 (28)	31	norethin ace-eth estrad-fe oral tablet	31	np thyroid	33
neomycin-polymyxin-dexameth ophthalmic ointment	35	norethindrone acet-ethinyl est	31	NUBEQA	14
neomycin-polymyxin-dexameth ophthalmic suspension 3.5-10000-0.1	35	norethindrone acetate oral	31	NUCALA SUBCUTANEOUS SOLUTION AUTO-INJECTOR	38
neomycin-polymyxin-hc otic	36	norethindrone oral	31	NUCALA SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	38
NEORAL	34	norgestimate-eth estradiol	31	NUCYNTA	8
NESINA	26	norgestimate-ethinyl estradiol triphasic	31	NUCYNTA ER	8
neuac external gel	21	NORITATE	21	NUEDEXTA	19
NEULASTA	26	NORLIQVA	18	NULEV	28
NEURONTIN	11	norlyda	31	NUTROPIN AQ NUSPIN 10	32
NEUTEK 2TEK TEST	23	norlyroc	31	NUTROPIN AQ NUSPIN 20	32
NEVANAC	35	nortrel 0.5/35 (28)	31	NUTROPIN AQ NUSPIN 5	32
NEXICLON XR	17	nortrel 1/35 (21)	31	NUVARING	31
NEXLETOL	17	nortrel 1/35 (28)	31	NUVESSA	10
NEXLIZET	17	nortriptyline hcl oral	12	NUWIQ INTRAVENOUS KIT	26
niacin (antihyperlipidemic)	17	NORVASC	18	NUWIQ INTRAVENOUS SOLUTION RECONSTITUTED	26
niacin er (antihyperlipidemic)	17	NORVIR ORAL PACKET	15	NUZYRA ORAL	10
niacor	17	NORVIR ORAL SOLUTION	15	nyamyc	13
NIASPAN	17	NORVIR ORAL TABLET	15	nylia 1/35	31
nifedipine er	17	NOURIANZ	14	nymyo	31
nifedipine er osmotic release	17	NOVAREL	34	nystatin external	13
nifedipine oral	17	NOVOEIGHT	26	nystatin mouth/throat	13
nikki	31	NOVOFINE AUTOCOVER PEN NEEDLE	23	nystop	13
nitisinone	28	NOVOFINE PEN NEEDLE	23		
NITRO-BID	17	NOVOFINE PLUS PEN NEEDLE	23		
		NOVOLIN 70/30 FLEXPEN	25		
		NOVOLIN 70/30 FLEXPEN RELION	25		

O

ocella	31
OCUFLOX	35
ODEFSEY	15
ODOMZO	14



ofloxacin ophthalmic	35	ONETOUCH VERIO KIT W/DEVICE	24	oxycodone-acetaminophen oral tablet 10-325 mg, 2.5-325 mg, 5-325 mg, 7.5-325 mg	8
ofloxacin otic	36	ONETOUCH VERIO REFLECT KIT W/DEVICE	24	OXYCODONE-ACETAMINOPHEN ORAL TABLET 2.5-300 MG	8
olanzapine oral	15	ONETOUCH VERIO TEST STRIPS	24	OXYCONTIN	8
olmesartan medoxomil oral	18	ONGLYZA	26	OZEMPIC SUBCUTANEOUS SOLUTION PEN-INJECTOR 2 MG/1.5ML, 4 MG/3ML	26
olmesartan medoxomil-hctz	18	ONZETRA XSAIL	13	OZEMPIC SUBCUTANEOUS SOLUTION PEN-INJECTOR 8 MG/3ML	26
olopatadine hcl ophthalmic solution 0.1 %	35	OPSUMIT	38	OZOBAX	39
olopatadine hcl ophthalmic solution 0.2 %	35	OPTIUMEZ TEST	24		
OLUMIANT ORAL TABLET 1 MG	34	ORAPRED ODT	32		
OLUMIANT ORAL TABLET 2 MG	34	ORENCIA CLICKJECT	34		
OLUMIANT ORAL TABLET 4 MG	34	ORENCIA SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 125 MG/ML	34		
OLUX	21	ORENCIA SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 50 MG/0.4ML, 87.5 MG/0.7ML	34		
OMECLAMOX-PAK	27	ORFADIN ORAL CAPSULE	28		
omega-3-acid ethyl esters	18	ORFADIN ORAL SUSPENSION	28		
omeprazole oral capsule delayed release	27	ORGOVYX	14		
OMEPRAZOLE+SYRSPEND SF ALKA	27	ORIAHNN	33		
OMNARIS	37	ORLISSA	33		
OMNIPOD 5 G5 INTRO KIT (Gen 5)	23	ORTIKOS	35		
OMNIPOD 5 G6 PODS (Gen 5)	23	OSCIMIN	28		
OMNITROPE	32	oseltamivir phosphate oral capsule	15		
ondansetron hcl oral	13	oseltamivir phosphate oral suspension reconstituted	15		
ondansetron odt	13	OSENI	26		
ONETOUCH CLUB LANCETS FINE PT	23	OSPHERA	26		
ONETOUCH DELICA LANCETS 30G	23	OTEZLA	34		
ONETOUCH DELICA LANCETS 33G	23	OTREXUP	34		
ONETOUCH DELICA PLUS LANCET30G	24	OXAYDO	8		
ONETOUCH DELICA PLUS LANCET33G	24	oxcarbazepine	11		
ONETOUCH FINEPOINT LANCETS	24	OXTELLAR XR	11		
ONETOUCH SOLUTIONS STARTER KIT	24	oxybutynin chloride er	28		
ONETOUCH SURESOFT LANCING DEV	24	oxybutynin chloride oral	28		
ONETOUCH ULTRA 2 KIT W/DEVICE	24	OXYCODONE HCL ER	8		
ONETOUCH ULTRA MINI KIT W/DEVICE	24	oxycodone hcl oral capsule	8		
ONETOUCH ULTRA TEST STRIPS	24	oxycodone hcl oral concentrate 100 mg/5ml	8		
ONETOUCH ULTRASOFT LANCETS	24	oxycodone hcl oral solution	8		
ONETOUCH VERIO FLEX SYSTEM	24	oxycodone hcl oral tablet 10 mg, 15 mg, 20 mg, 30 mg	8		
ONETOUCH VERIO IQ SYSTEM	24	oxycodone hcl oral tablet 5 mg	8		
		OXYCODONE-ACETAMINOPHEN ORAL SOLUTION	8		
		OXYCODONE-ACETAMINOPHEN ORAL TABLET 10-300 MG, 5-300 MG, 7.5-300 MG	8		
				P	
				PACERONE	18
				PAMELOR	12
				PANCREAZE	28
				pantoprazole sodium oral	27
				PARADIGM REAL-TIME TRANSMITTER	24
				paroxetine hcl	12
				paroxetine hcl er	12
				PAXIL CR	12
				PAXIL ORAL SUSPENSION	12
				PAXIL ORAL TABLET	12
				PEDIAPRED	32
				peg-3350/electrolytes	28
				peg-3350/electrolytes/ascorbic acid	28
				peg-kcl-nacl-nasulf-na asc-c	28
				penicillamine oral capsule	28
				penicillamine oral tablet	28
				penicillin v potassium	10
				PENLET II BLOOD SAMPLER	24
				PENLET II REPLACEMENT CAP	24
				PENNSAID	9
				PENTASA	35
				PERCOCET	8
				PERFOROMIST	38
				PERIDEX	20
				perigard	20
				permethrin external	14
				PERTZYE	28
				phenazo oral tablet 200 mg	28
				phenazopyridine hcl oral tablet 100 mg, 200 mg	28
				phillith	31



pimecrolimus	21	prednisolone sodium phosphate oral tablet dispersible	32	PROVERA	29, 31
pimtrex	31	prednisone intensol	32	PROVIGIL	39
pioglitazone hcl	26	prednisone oral	32	PROZAC	12
pirmella 1/35	31	pregabalin	19	pseudoephedrine-bromphen-dm	37
PLAQUENIL	14	pregabalin er	19	PSS SELECT PLATFORMS	24
PLAVIX	14	PREGNYL	34	PULMICORT FLEXHALER	38
PLEGRIDY INTRAMUSCULAR	19	PREMARIN ORAL	31	PULMICORT SUSPENSION	38
PLEGRIDY STARTER PACK	19	PREMARIN VAGINAL	31	PULMOZYME	38
PLEGRIDY SUBCUTANEOUS	19	PREMIUM BLOOD GLUCOSE TEST	24	PURIXAN	14
PLENVU	28	premium lidocaine	8	PYLERA	27
PLEXION	21	PREMPHASE	31	PYRIDIUM	28
PLEXION CLEANSER	21	PREMPRO	31		
PLEXION CLEANSING CLOTH	21	PRENA1 PEARL	27	Q	
POLY-VI-FLOR	27	PREVIDENT	20	QBRELIS	18
polymyxin b-trimethoprim	35	PREVIDENT 5000 BOOSTER PLUS	20	QDOLO	8
POLYTRIM	35	PREVIDENT 5000 DRY MOUTH	20	QUARTETTE	31
portia-28	31	PREVIDENT 5000 ORTHO DEFENSE	20	QUDEXY XR	11
potassium chloride crys er oral tablet extended release 10 meq, 20 meq	27	PREVIDENT 5000 PLUS	20	quetiapine fumarate	15
potassium chloride crys er oral tablet extended release 15 meq	27	PREZCOBIX	15	quetiapine fumarate er	15
potassium chloride er	27	PRISTIQ	12	QUFLORA PEDIATRIC	27
potassium chloride oral packet	27	PROAIR HFA	37, 38	QUILLICHEW ER	19
potassium chloride oral solution 20 meq/15ml (10%), 40 meq/15ml (20%)	27	PROAIR RESPICLICK	38	QUILLIVANT XR	19
potassium citrate er	27	PROCARDIA XL	18	quinapril hcl	18
PRADAXA	11	PROCENTRA	19	QUINTET AC BLOOD GLUCOSE	24
PRALUENT	18	prochlorperazine maleate oral	13	QUINTET AC BLOOD GLUCOSE TEST	24
pramipexole dihydrochloride	14	PROCORT	35	QUINTET BLOOD GLUCOSE SYSTEM	24
pramipexole dihydrochloride er	14	PROCTOFOAM HC	35	QUINTET BLOOD GLUCOSE TEST	24
pravastatin sodium	18	progesterone oral	31	QVAR REDIHALER	38
prazosin hcl oral	18	PROGRAF ORAL	34		
PRECISION XTRA	24	PROLATE	8	R	
PRECISION XTRA BLOOD GLUCOSE	24	promethazine hcl oral solution	37	RABEPRAZOLE SODIUM ORAL CAPSULE SPRINKLE	27
PRED FORTE	35	promethazine hcl oral syrup	37	rabeprazole sodium oral tablet delayed release	27
PRED MILD	35	promethazine hcl oral tablet	13	ramipril	18
prednisolone acetate ophthalmic	36	promethazine hcl rectal	13	RANEXA	18
prednisolone oral	32	promethazine-codeine	37	ranolazine er	18
prednisolone sodium phosphate oral solution 10 mg/5ml, 25 mg/5ml, 6.7 (5 base) mg/5ml	32	promethazine-dm	37	RAPAMUNE ORAL SOLUTION	34
prednisolone sodium phosphate oral solution 15 mg/5ml	32	promethegan	13	RAPAMUNE ORAL TABLET	34
prednisolone sodium phosphate oral solution 20 mg/5ml	32	propranolol hcl er	18	RASUVO	34
		propranolol hcl oral	18	RAYOS	32
		PROSCAR	29	REBIF	19
		PROTONIX ORAL PACKET	27	REBIF REBIDOSE	19
		PROTONIX ORAL TABLET DELAYED RELEASE	27	REBIF REBIDOSE TITRATION PACK	19
		PROVENTIL HFA	37, 38		



REBIF TITRATION PACK	19	ropinirole hcl	14	SINGULAIR ORAL PACKET	38
reclipsen	31	ropinirole hcl er.	14	SINGULAIR ORAL TABLET.	38
RECOMBINATE	26	rosadan external cream.	21	SINGULAIR ORAL TABLET CHEWABLE	38
REDITREX.	34	rosadan external gel.	21	sirolimus oral.	34
REGLAN	13	rosuvastatin calcium	18	SITAVIG	15
RELAFEN	9	roweepra	11	SKYRIZI SUBCUTANEOUS SOLUTION CARTRIDGE	34
RELAFEN DS	9	ROXICODONE ORAL TABLET 15 MG, 30 MG.	8	SKYRIZI SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	34
relexxii	19	ROXICODONE ORAL TABLET 5 MG	8	SOAANZ	18
RELION TRUE MET AIR GLUC METER	24	ROXYBOND ORAL TABLET ABUSE-DETERRENT 15 MG, 30 MG	8	sodium fluoride 5000 plus.	20
RELION TRUE METRIX TEST STRIPS	24	ROXYBOND ORAL TABLET ABUSE-DETERRENT 5 MG.	9	sodium fluoride 5000 ppm	20
RELION ULTIMA GLUCOSE SYSTEM.	24	RUCONEST.	34	sodium fluoride dental.	20
RELION ULTIMA TEST.	24	RUKOBIA.	15	sodium fluoride mouth/throat	20
RELPAK.	13	RYBELSUS	26	SOFOSBUVIR-VELPATASVIR	15
RELTONE	28	RYTARY.	14	SOLQUA.	26
REMERON	12			SOLODYN	10
REMERON SOLTAB ORAL TABLET DISPERSIBLE 15 MG, 30 MG	12	S		SOLTAMOX.	14
REMODULIN.	38	SAFYRAL	31	SOMA	39
REPATHA	18	sajazir.	34	SOMATULINE DEPOT	33
REPATHA PUSHTRONEX SYSTEM	18	SANTYL.	21	SOOLANTRA	21
REPATHA SURECLICK	18	SAPHRIS	15	sotalol hcl oral.	18
RESTASIS	36	scopolamine	13	SOTYLIZE	18
RESTASIS MULTIDOSE.	36	SEASONIQUE.	31	SPIRIVA HANDIHALER	38
RESTORIL	39	SEREVENT DISKUS.	38	SPIRIVA RESPIMAT	38
RETACRIT INJECTION SOLUTION	26	SERNIVO	21	spironolactone oral	18
RETIN-A.	21	SEROQUEL.	15	sprintec 28	31
REVLIMID	14	SEROQUEL XR.	15	SPRITAM.	11
REXULTI	15	SERTRALINE HCL ORAL CAPSULE	12	SPRIX.	9
RHOFADE	21	sertraline hcl oral concentrate	12	sronyx	31
RHOPRESSA	36	sertraline hcl oral tablet	12	sss 10-5	21
RILUTEK	19	setlakin	31	STELARA SUBCUTANEOUS	34
riluzole	19	sf.	20, 27	STENDRA	26
RINVOQ.	34	sf 5000 plus.	20	STIMATE	33
RIOMET.	26	SFROWASA	35	STIOLTO RESPIMAT	38
RISPERDAL.	15	sharobel.	31	STIVARGA.	14
risperidone	15	sildenafil citrate oral tablet 100 mg, 25 mg, 50 mg	26	STRATTERA	19
RITALIN	19	simliya	31	STRENSIQ.	28
RITALIN LA	19	simpesse	31	STRIBILD.	15
ritonavir	15	SIMPONI	34	STRIVERDI RESPIMAT	38
rivelsa.	31	simvastatin oral tablet 10 mg, 20 mg, 40 mg, 5 mg	18	SUBOXONE.	10
rizatriptan benzoate	13	simvastatin oral tablet 80 mg	18	SUBSYS.	9
ROCALTROL.	35	SINEMET	14	subvenite	11
ROCKLATAN.	36			subvenite starter kit-blue	11
				subvenite starter kit-green.	11



subvenite starter kit-orange.	11	TACLONEX EXTERNAL SUSPENSION.	22	TERIPARATIDE (RECOMBINANT) . . .	35
sucralfate oral	27	tacrolimus external.	22	TESTIM	33
sulfacetamide sod-sulfur wash	22	tacrolimus oral	34	testosterone cypionate intramuscular	33
sulfacetamide sodium-sulfur external cream	21	tadalafil oral.	26	testosterone transdermal.	33
sulfacetamide sodium-sulfur external liquid	22	TAKHZYRO	34	TEXACORT.	22
sulfacetamide sodium-sulfur external lotion	22	TAMIFLU ORAL CAPSULE	15	THALITONE	18
sulfacetamide sodium-sulfur external pad	22	TAMIFLU ORAL SUSPENSION RECONSTITUTED	15	THIOLA	28, 29
sulfacetamide sodium-sulfur external suspension 10-5 %, 8-4 %	22	tamoxifen citrate oral tablet 10 mg.	14	THIOLA EC	29
SULFACLEANSE 8/4	22	tamoxifen citrate oral tablet 20 mg.	14	THYQUIDITY.	33
sulfamethoxazole-trimethoprim oral.	10	tamsulosin hcl.	29	TIGLUTIK.	19
sulfamez wash	22	TAPERDEX 12-DAY.	32	timolol maleate (once-daily).	36
sulfasalazine oral	35	TAPERDEX 6-DAY	32	timolol maleate ocudose	36
sulfatrim pediatric.	11	TAPERDEX 7-DAY.	32	timolol maleate ophthalmic	36
SUMADAN WASH	22	TARGADOX.	11	timolol maleate pf.	36
sumatriptan succinate oral	13	TARGRETIN EXTERNAL	14	TIMOPTIC	36
sumatriptan succinate refill subcutaneous solution cartridge	13	TARGRETIN ORAL.	14	TIMOPTIC OCUDOSE OPHTHALMIC SOLUTION 0.25 %	36
sumatriptan succinate subcutaneous.	13	tarina 24 fe.	31	TIMOPTIC OCUDOSE OPHTHALMIC SOLUTION 0.5 %	36
SUMAXIN	22	tarina fe 1/20.	31	TIMOPTIC-XE	36
SUNOSI.	39	tarina fe 1/20 eq	31	TIROSINT	33
SUPARTZ FX.	9	TARPEYO	35	TIROSINT-SOL	33
SUPREP BOWEL PREP KIT	28	TASIGNA	14	TIVICAY	15
SURESTEP PRO LINEARITY	24	TAVALISSE	26	TIVICAY PD.	15
syeda	31	taysofy	31	TIVORBEX.	9
SYMBICORT.	38	TAYTULLA.	31	tizanidine hcl oral	39
SYMFI	15	tazarotene external cream.	22	TOBI NEBULIZATION SOLUTION 300 MG/5ML INHALATION 300 MG/5ML	38
SYMFI LO	15	TAZORAC EXTERNAL CREAM	22	TOBI PODHALER.	38
SYMJEPI	37	TAZORAC EXTERNAL GEL 0.05 %	22	TOBRADEX.	36
SYMLINPEN 120.	26	TAZORAC EXTERNAL GEL 0.1 %	22	TOBRADEX ST.	36
SYMLINPEN 60.	26	TEGRETOL	11	tobramycin inhalation nebulization solution 300 mg/4ml	38
SYMPROIC	28	TEGRETOL-XR	11	tobramycin nebulization solution 300 mg/5ml inhalation.	38
SYNALAR	22	TEGSEDI	28	tobramycin ophthalmic	36
SYNJARDY	26	TEKTRNA.	18	tobramycin-dexamethasone	36
SYNJARDY XR	26	TEKTRNA HCT	18	TOBREX	36
SYNOJOYNT.	9	telmisartan	18	TOPAMAX.	11
SYNTHROID	33	telmisartan-hctz	18	TOPAMAX SPRINKLE	11
SYPRINE	28	temazepam	39	topiramate er.	11
		tenofovir disoproxil fumarate.	15	topiramate oral	11
		TENORETIC 100.	18	TOPROL XL.	18
		TENORETIC 50.	18	torse mide	18
		TENORMIN	18	TOUJEO MAX SOLOSTAR	25
		terazosin hcl	29		
		terbinafine hcl oral	13		
		terconazole	13		

T

TACLONEX EXTERNAL OINTMENT .22



TOUJEO SOLOSTAR	25	triamcinolone acetonide external ointment 0.025 %, 0.1 %, 0.5 %	22	TYVASO INHALATION SOLUTION	38
TOVIAZ	29	triamcinolone acetonide external ointment 0.05 %	22	TYVASO REFILL	38
TRACLEER	38	triamcinolone in absorbase	22	TYVASO STARTER	38
TRADJENTA	26	triamterene-hctz	18	U	
tramadol hcl er (biphasic)	9	TRIANEX	22	UBRELVY	13
TRAMADOL HCL ER ORAL CAPSULE EXTENDED RELEASE 24 HOUR	9	triazolam	16	UCERIS ORAL	35
tramadol hcl er oral tablet extended release 24 hour	9	TRICOR	18	UCERIS RECTAL	35
TRAMADOL HCL ORAL SOLUTION	9	triderm external cream 0.1 %	22	ULORIC	13
tramadol hcl oral tablet	9	triderm external cream 0.5 %	22	ULTRAM	9
TRANSDERM-SCOP	13	TRIDESILON	22	UNISTRIP1 GENERIC	24
TRAVATAN Z	36	trientine hcl	28	unithroid	33
travoprost (bak free)	36	TRIJARDY XR	26	UROCIT-K 10	27
trazodone hcl oral	12	TRILEPTAL	11	UROCIT-K 15	27
TRELEGY ELLIPTA	38	TRILURON	9	UROCIT-K 5	27
TREMFYA	34	TRINTELLIX	12	UROXATRAL	29
treprostinil	38	tritocin	22	URSO 250	28
TRESIBA	25	TRIUMEQ	15	URSO FORTE	28
TRESIBA FLEXTOUCH	25	TRIUMEQ PD	15	URSODIOL ORAL CAPSULE 200 MG, 400 MG	28
tretinoin external cream	22	TROKENDI XR	12	ursodiol oral capsule 300 mg	28
tretinoin external gel 0.01 %	22	TRUE FOCUS BLOOD GLUCOSE STRIP	24	ursodiol oral tablet	28
tretinoin external gel 0.05 %	22	TRUE METRIX AIR GLUCOSE METER	24	V	
tretinoin gel 0.025 % external	22	TRUE METRIX BLOOD GLUCOSE TEST	24	VAGIFEM	32
TREXALL	34	TRUE METRIX GO GLUCOSE METER	24	valacyclovir hcl oral	15
TREZIX	9	TRUE METRIX METER KIT	24	VALIUM	16
tri femynor	31	TRUE METRIX PRO BLOOD GLUCOSE	24	VALSARTAN ORAL SOLUTION	18
tri-estarylla	31	TRUETRACK BLOOD GLUCOSE DEVICE	24	valsartan oral tablet	18
tri-linyah	31	TRUETRACK TEST	24	valsartan-hydrochlorothiazide	18
tri-lo-estarylla	31	TRULICITY	26	VALTOCO NASAL LIQUID 10 MG/0.1ML, 5 MG/0.1ML	12
tri-lo-marzia	31	TRUVADA ORAL TABLET 100-150 MG, 133-200 MG, 167-250 MG	15	VALTRESX	15
tri-lo-mili	32	TRUVADA ORAL TABLET 200-300 MG	15	VANADOM	39
tri-lo-sprintec	32	tyblume	32	vandazole	11
tri-mili	32	tydemy	32	VANOS	22
tri-nymyo	32	TYMLOS	35	varenicline tartrate	10
tri-sprintec	32	TYRVAYA	36	VASCEPA	18
tri-vylibra	32	TYVASO DPI MAINTENANCE KIT	38	VASOTEC	18
tri-vylibra lo	32	TYVASO DPI TITRATION KIT	38	VECTICAL	22
triamcinolone acetonide external aerosol solution	22	TYVASO INHALATION POWDER	38	VELPHORO	29
triamcinolone acetonide external cream 0.025 %, 0.1 %	22			VELTASSA	27
triamcinolone acetonide external cream 0.5 %	22			VEMLIDY	15
triamcinolone acetonide external lotion	22			venlafaxine hcl	12
				venlafaxine hcl er oral capsule extended release 24 hour	12



zolpidem tartrate er	39
ZOLPIMIST	39
ZOMACTON	33
ZOMIG NASAL SOLUTION 2.5 MG ..	13
ZOMIG NASAL SOLUTION 5 MG	13
ZONEGRAN	12
zonisamide oral.	12
ZONTIVITY	14
ZOVIRAX ORAL	16
ZTLIDO	9
ZUBSOLV	10
zumandimine.	32
ZYCLARA	22
ZYCLARA PUMP	22
ZYLET	36
ZYLOPRIM	13
ZYPREXA ORAL.	15
ZYPREXA ZYDIS	15

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Salt Lake City, UT 84130

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Room 509F, HHH Building
Washington, D.C. 20201

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ध्यान दें: यदि आप **हिंदी (Hindi)** बोलते हैं, आपको भाषा सहायता सेवाएं, नःशुल्क उपलब्ध हैं। कृपया अपने पहचान पत्र पर सूचीबद्ध टोल-फ्री फोन नंबर पर कॉल करें।

CEEB TOOM: Yog koj hais Lus **Hmoob (Hmong)**, muaj kev pab txhais lus pub dawb rau koj. Thov hu rau tus xov tooj hu deb dawb uas teev muaj nyob rau ntawm koj daim yuaj cim qhia tus kheej.

ចំណាប់អារម្មណ៍: ប្រសិនបើអ្នកនិយាយ **ភាសាខ្មែរ (Khmer)** សូមទាក់ទងភាសាដទៃទៀតក្នុងចំណោមអ្នក គឺមានសំរាប់អ្នក។ សូមទូរស័ព្ទទៅលេខគតគិតក្នុងផ្នែក ដល់មានន័យលើអត្ថបទសញ្ញាណប័ណ្ណរបស់អ្នក។

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

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OGOW: Haddii aad ku hadasho **Soomali (Somali)**, adeegyada taageerada luqadda, oo bilaash ah, ayaad heli kartaa. Fadlan wac lambarka telefonka khadka bilaashka ee ku yaalla kaarkaaga aqoonsiga.



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