



# 2022

## Your Prescription Drug List/Formulary

EFFECTIVE JULY 1, 2022

**Please read:**

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

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

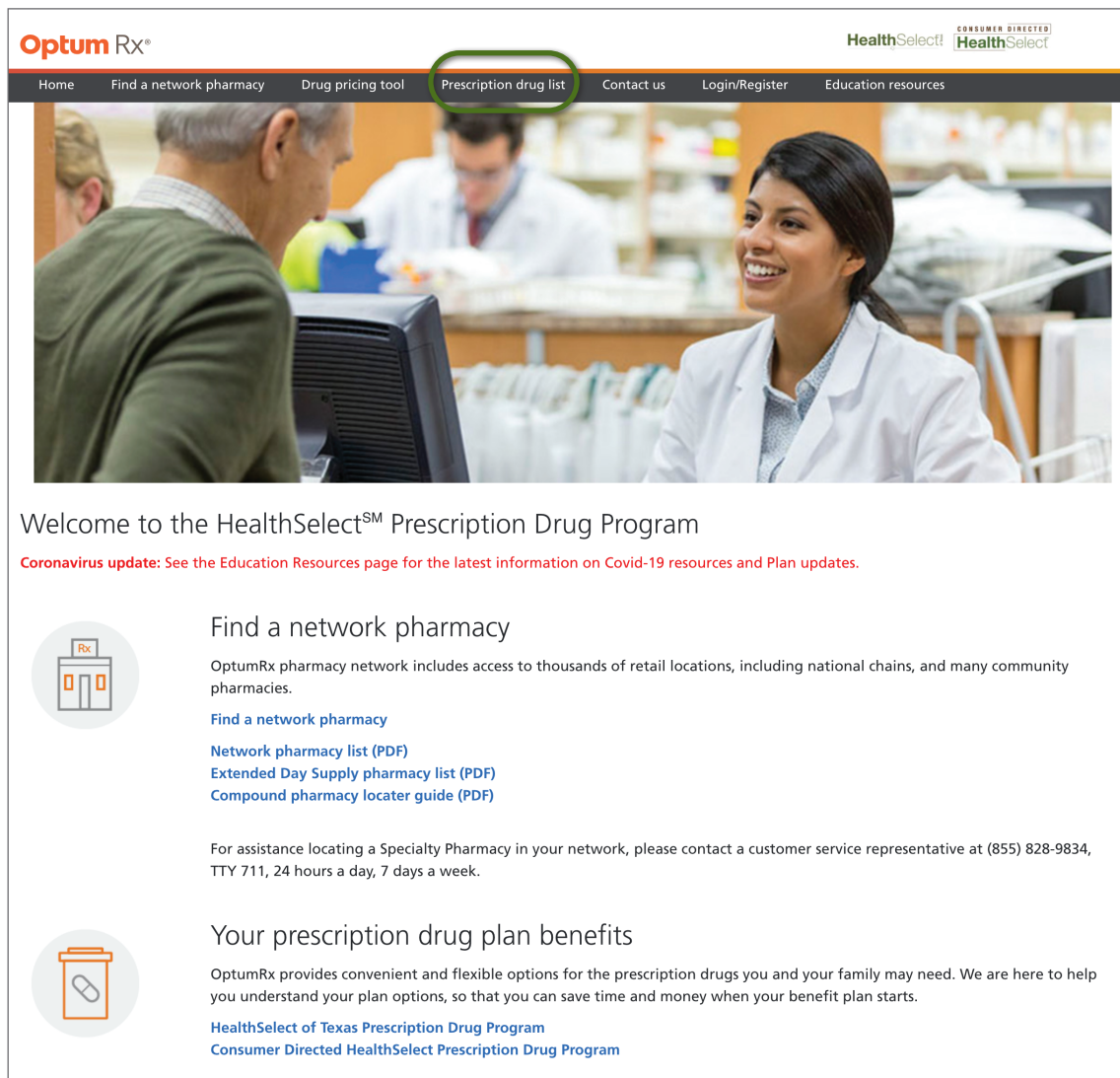
- Call a customer care representative toll-free at **(855) 828-9834 (TTY 711)**.
- Visit **www.HealthSelectRx.com**
  - Locate an Optum Rx<sup>®</sup> in-network pharmacy
  - Look up possible lower-cost medication alternatives
  - Compare medication pricing and options

## Your Prescription Drug List / Formulary

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

### Go to [www.HealthSelectRx.com](http://www.HealthSelectRx.com) for complete and up-to-date drug information

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



The screenshot shows the Optum Rx website interface. At the top left is the Optum Rx logo. To the right is the HealthSelect logo with 'CONSUMER DIRECTED' above it. Below the logo is a navigation bar with the following items: Home, Find a network pharmacy, Drug pricing tool, Prescription drug list (highlighted with a green circle), Contact us, Login/Register, and Education resources. A green arrow points from the right towards the 'Prescription drug list' link. Below the navigation bar is a large image of a pharmacist in a white lab coat smiling at a customer in a pharmacy setting. Below the image, the text reads: 'Welcome to the HealthSelect<sup>SM</sup> Prescription Drug Program'. Below this is a red text update: 'Coronavirus update: See the Education Resources page for the latest information on Covid-19 resources and Plan updates.' There are two main content sections. The first is titled 'Find a network pharmacy' and includes an icon of a pharmacy building. The text describes the OptumRx pharmacy network and lists links for 'Find a network pharmacy', 'Network pharmacy list (PDF)', 'Extended Day Supply pharmacy list (PDF)', and 'Compound pharmacy locator guide (PDF)'. The second section is titled 'Your prescription drug plan benefits' and includes an icon of a pill bottle. The text describes the convenience and flexibility of the plan and lists links for 'HealthSelect of Texas Prescription Drug Program' and 'Consumer Directed HealthSelect Prescription Drug Program'.

# UNDERSTANDING YOUR PRESCRIPTION DRUG LIST/FORMULARY

## What is a formulary?

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

Where differences exist between this formulary and your benefit plan documents, the benefit plan documents will rule. This may not be a complete list of medications, and not all medications listed may be covered under your plan. Please look at the Master Benefit Plan Document (MBPD) provided by your plan for full details.

## How do I use my formulary?

You and your doctor can consult the formulary to help you select the most cost-effective prescription medications. This guide tells you if a medication is generic or brand, and if special rules apply. Bring this list with you when you see your doctor. It is organized by common medical conditions. Medications are then listed alphabetically.

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

## What are tiers?

Tiers are the different cost levels you pay for a medication. Each tier is assigned a cost, which is determined by your plan. This is how much you will pay when you fill a prescription. The HealthSelect of Texas Prescription Drug Program has different copays assigned depending on which tier a drug is. The Consumer Directed HealthSelect Prescription Drug Program has coinsurance assigned for each drug tier that applies once the annual combined medical and pharmacy deductible is met. Tier 1 medications are your lowest-cost options. If your medication is placed in Tier 2 or 3, look to see if there is a Tier 1 option available. Discuss these options with your doctor.

### **When does the formulary change?**

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

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

For the most up-to-date list, call a customer care representative, 24 hours a day, 7 days a week toll-free at **(855) 828-9834 (TTY 711)**.

### **Why are some medications excluded from coverage?**

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

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

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

# 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 of a brand-name medication ends, the FDA can approve a generic version with the same active ingredients.

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

## **What if my doctor writes a brand-name prescription?**

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

## **What if I am taking a specialty medication?**

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

# READING YOUR FORMULARY

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

## Tier information

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

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

## Drug list information

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

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

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

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

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

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

# ERS of Texas

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

Drug Name	Drug Tier	Notes
acetaminophen-codeine #4	1	QL
ACTIQ	3	PA; QL
ALLZITAL	E	
APADAZ	E	
apap-caff-dihydrocodeine oral capsule	1	QL
arthritis pain reliever oral	E	
ascomp-codeine	1	
aurophen childrens	E	
bac	1	
BELBUCA	2	PA; QL
BENZHYDROCODON E-ACETAMINOPHEN	E	
BUPAP ORAL TABLET 50-300 MG	E	
BUPRENEX	3	
buprenorphine hcl injection solution 0.3 mg/ml	1	
buprenorphine transdermal	1	PA; QL
butalbital-acetaminophen capsule 50-300 mg oral	E	
BUTALBITAL-ACETAMINOPHEN CAPSULE 50-300 MG ORAL	E	
butalbital-acetaminophen oral tablet 50-300 mg	E	
butalbital-acetaminophen oral tablet 50-325 mg	1	
butalbital-apap-caff-cod	1	
butalbital-apap-caffeine oral capsule	1	

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

Drug Name	Drug Tier	Notes
butalbital-apap-caffeine oral tablet 50-325-40 mg	1	
butalbital-asa-caff-codeine	1	
butalbital-aspirin-caffeine oral capsule	1	
butorphanol tartrate injection	1	
butorphanol tartrate nasal	1	QL
BUTRANS	3	PA; QL
carisoprodol-aspirin-codeine	1	
codeine sulfate oral tablet	1	QL
CONZIP	E	
cvs acetaminophen ex st oral tablet	E	
DEMEROL INJECTION SOLUTION 50 MG/ML	3	
DILAUDID ORAL	E	
DSUVIA	E	
duramorph	1	
endocet oral tablet 10-325 mg, 2.5-325 mg, 5-325 mg, 7.5-325 mg	1	QL
ESGIC	3	
fentanyl	1	PA; QL
FENTANYL CITRATE (BULK)	E	
fentanyl citrate (pf)	E	
fentanyl citrate buccal lozenge on a handle	1	PA; QL
FENTANYL CITRATE BUCCAL TABLET	E	
FENTANYL CITRATE SOLUTION PREFILLED SYRINGE 100 MCG/2ML INTRAVENOUS	E	

Drug Name	Drug Tier	Notes
FENTANYL CITRATE-NACL INJECTION SOLUTION 1-0.9 MG/100ML-%, 2.5-0.9 MG/250ML-%	E	
FENTANYL CITRATE-NACL INTRAVENOUS SOLUTION 1.25-0.9 MG/250ML-%	3	
FENTANYL CITRATE-NACL SOLUTION 1-0.9 MG/100ML-% INTRAVENOUS	3	
FENTANYL CITRATE-NACL SOLUTION 1-0.9 MG/100ML-% INTRAVENOUS	E	
FENTANYL CITRATE-NACL SOLUTION 2.5-0.9 MG/250ML-% INTRAVENOUS	3	
FENTANYL CITRATE-NACL SOLUTION 2.5-0.9 MG/250ML-% INTRAVENOUS	E	
FENTANYL CITRATE-NACL SOLUTION 2-0.9 MG/100ML-% INTRAVENOUS	3	
FENTANYL CITRATE-NACL SOLUTION 2-0.9 MG/100ML-% INTRAVENOUS	E	
FENTANYL CITRATE-NACL SOLUTION PREFILLED SYRINGE 500-0.9 MCG/50ML-% INTRAVENOUS	3	
FENTANYL CITRATE-NACL SOLUTION PREFILLED SYRINGE 500-0.9 MCG/50ML-% INTRAVENOUS	E	

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

Drug Name	Drug Tier	Notes
FENTANYL-BUPIVACAINE-NACL EPIDURAL SOLUTION 0.8-0.1667-0.9 MG/200ML-%	E	
FENTANYL-BUPIVACAINE-NACL INJECTION	E	
FENTANYL-BUPIVACAINE-NACL SOLUTION 0.2-0.1-0.9 MG/100ML-% EPIDURAL	E	
FENTANYL-BUPIVACAINE-NACL SOLUTION 0.2-0.125-0.9 MG/100ML-% EPIDURAL	E	
FENTANYL-BUPIVACAINE-NACL SOLUTION 0.5-0.0625-0.9 MG/250ML-% EPIDURAL	E	
FENTANYL-BUPIVACAINE-NACL SOLUTION 0.5-0.1-0.9 MG/250ML-% EPIDURAL	E	
FENTANYL-BUPIVACAINE-NACL SOLUTION 0.5-0.125-0.9 MG/250ML-% EPIDURAL	E	
FENTORA BUCCAL TABLET 100 MCG, 200 MCG, 400 MCG, 600 MCG, 800 MCG	E	
FIORICET ORAL CAPSULE	3	
FIORICET/CODEINE ORAL CAPSULE 50-300-40-30 MG	3	
goodsense pain & fever child	E	

Drug Name	Drug Tier	Notes
goodsense pain relief oral tablet	E	
headache relief oral	E	
hydrocodone bitartrate er oral capsule extended release 12 hour	1	PA; QL
hydrocodone bitartrate er oral tablet er 24 hour abuse-deterrent	1	PA; QL
hydrocodone-acetaminophen oral solution 7.5-325 mg/15ml	1	QL
hydrocodone-acetaminophen oral tablet 10-300 mg, 10-325 mg, 5-300 mg, 5-325 mg, 7.5-300 mg, 7.5-325 mg	1	QL
hydrocodone-ibuprofen oral tablet 10-200 mg, 5-200 mg, 7.5-200 mg	1	QL
hydromorphone hcl er oral tablet extended release 24 hour	1	PA; QL
hydromorphone hcl injection solution 2 mg/ml	E	
hydromorphone hcl oral	1	QL
hydromorphone hcl rectal	E	
HYDROMORPHONE HCL-NACL INTRAVENOUS SOLUTION 25-0.9 MG/50ML-%, 50-0.9 MG/50ML-%	3	
HYDROMORPHONE HCL-NACL INTRAVENOUS SOLUTION PREFILLED SYRINGE 10-0.9 MG/50ML-%, 15-0.9 MG/30ML-%	3	

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

Drug Name	Drug Tier	Notes
HYSINGLA ER	2	PA; QL
INFUMORPH 200	3	
INFUMORPH 500	3	
LAZANDA NASAL SOLUTION 100 MCG/ACT, 400 MCG/ACT	E	
levorphanol tartrate oral	E	
liquid acetaminophen	E	
LORTAB ORAL ELIXIR 10-300 MG/15ML	3	QL
meperidine hcl injection solution 50 mg/ml	1	
meperidine hcl oral solution	1	QL
meperidine hcl oral tablet 50 mg	E	
methadone hcl injection	1	
methadone hcl intensol	1	
methadone hcl oral concentrate	1	
methadone hcl oral solution	1	
methadone hcl oral tablet	1	PA
methadone hcl oral tablet soluble	1	
methadose oral concentrate 10 mg/ml	1	
methadose oral tablet soluble	1	
methadose sugar-free	1	
migraine relief	E	
mitigo	1	
MORPHINE SULFATE (BULK)	E	
morphine sulfate (concentrate) oral solution 100 mg/5ml, 20 mg/ml	1	QL

Drug Name	Drug Tier	Notes
morphine sulfate (pf) injection	1	
morphine sulfate (pf) intravenous solution 1 mg/ml, 10 mg/ml, 2 mg/ml, 4 mg/ml, 8 mg/ml	1	
morphine sulfate er beads	1	PA; QL
morphine sulfate er oral capsule extended release 24 hour 10 mg, 100 mg, 20 mg, 30 mg, 50 mg, 60 mg, 80 mg	1	PA; QL
morphine sulfate er oral tablet extended release	1	PA; QL
MORPHINE SULFATE INJECTION SOLUTION 1 MG/ML	3	
morphine sulfate injection solution 2 mg/ml, 4 mg/ml	1	
MORPHINE SULFATE INTRAVENOUS SOLUTION 0.5 MG/ML	3	
morphine sulfate intravenous solution 10 mg/ml, 4 mg/ml, 8 mg/ml	1	
morphine sulfate intravenous solution 50 mg/ml	E	
morphine sulfate oral	1	QL
morphine sulfate rectal	E	
MORPHINE SULFATE SOLUTION 1 MG/ML INTRAVENOUS	3	
morphine sulfate solution 1 mg/ml intravenous	E	

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

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

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

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

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

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

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

Drug Name	Drug Tier	Notes
aspirin ec low strength	\$0	
aspirin ec oral tablet delayed release 325 mg	\$0	
aspirin low dose oral tablet chewable	\$0	
aspirin low dose oral tablet delayed release	\$0	
aspirin oral tablet 325 mg	\$0	
aspirin oral tablet delayed release 325 mg, 81 mg	\$0	
aspirin rectal suppository 300 mg	E	
BAYER ASPIRIN EC LOW DOSE	\$0	
BAYER ASPIRIN ORAL TABLET	\$0	
BAYER ASPIRIN ORAL TABLET DELAYED RELEASE	\$0	
CALDOLOR INTRAVENOUS SOLUTION 800 MG/200ML, 800 MG/8ML	3	
CAMBIA	E	
CAPSFENAC PAK EXTERNAL	E	
CAPSINAC EXTERNAL	E	
CATAFLAM	3	
CELEBREX	E	
celecoxib oral	1	QL
DAYPRO	3	
DERMACINRX LEXITRAL PHARMAPAK EXTERNAL	E	
DFS DR/MS/MENTH/CAP PAK	E	

Drug Name	Drug Tier	Notes
DFS/MS/MENTH/CAP PAK EXTERNAL	E	
DICLOFENAC CAP 35MG	E	
DICLOFENAC PATCH EXTERNAL	E	
diclofenac potassium oral capsule	E	
diclofenac potassium oral tablet 25 mg	E	
diclofenac potassium oral tablet 50 mg	1	
diclofenac sodium er	1	
diclofenac sodium external gel 1 %	1	QL
diclofenac sodium external solution 1.5 %	1	PA
diclofenac sodium external solution 2 %	E	
diclofenac sodium oral	1	
diclofenac-misoprostol oral tablet delayed release	1	QL
DICLOFONO GEL 1.6 % EXTERNAL	3	
DICLOFONO GEL 1.6 % EXTERNAL	E	
DICLOHEAL-60 EXTERNAL	E	
DICLONA	E	
DICLOPR	E	
DICLOSTREAM	E	
DICLOTREX	E	
DICLOTREX II	E	
DICLOVIX EXTERNAL	E	
DICLOVIX M	E	
DICLOZOR EXTERNAL	E	
diflunisal oral	1	
DIMENTHO	E	

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

Drug Name	Drug Tier	Notes
DUAL COMPLEX FORMULA 1 KIT	E	
DUEXIS	E	
EC-NAPROSYN	3	
ec-naproxen	1	
ELYXYB	E	
ENOVARX-DICLOFENAC SODIUM EXTERNAL	E	
ENOVARX-IBUPROFEN	E	
ENOVARX-NAPROXEN EXTERNAL	E	
etodolac er	1	
etodolac oral	1	
FBL KIT	E	
FELDENE	3	
fenoprofen calcium oral	E	
fenortho oral capsule 200 mg	E	
FENOVAR	E	
FLECTOR EXTERNAL	E	
FLEXIPAK	E	
flurbiprofen oral	1	
FROTEK	E	
GABAPENTIN-NAPROXEN CMPD KIT	E	
goodsense aspirin adults	\$0	
goodsense aspirin low dose	\$0	
goodsense ibuprofen oral capsule	E	
IBUPAK	E	
ibuprofen infants	E	
ibuprofen oral capsule 200 mg	E	

Drug Name	Drug Tier	Notes
ibuprofen oral suspension 100 mg/5ml	1	
ibuprofen oral tablet 200 mg	E	
ibuprofen oral tablet 400 mg, 600 mg, 800 mg	1	
ibuprofen-famotidine	E	
ICLOFENAC CP	E	
inavix	E	
INDOCIN ORAL	3	ST
INDOCIN RECTAL	E	
indomethacin er	1	
INDOMETHACIN ORAL CAPSULE 20 MG	E	
indomethacin oral capsule 25 mg, 50 mg	1	
INFLAMMACIN	E	
INFLATHERM COMBINATION THERAPY PACK	E	
K.B.G.L IN TERODERM	E	
KETOPHENE RAPIDPAQ	E	
ketoprofen er	E	
ketoprofen oral capsule 25 mg	E	
ketorolac tromethamine injection solution 15 mg/ml	1	
ketorolac tromethamine intramuscular solution 60 mg/2ml	1	
KETOROLAC TROMETHAMINE NASAL	3	PA; QL
ketorolac tromethamine oral	1	QL

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



Drug Name	Drug Tier	Notes
ketorolac tromethamine solution 30 mg/ml injection	1	
KETOROLAC TROMETHAMINE SOLUTION 30 MG/ML INJECTION	3	
LEXITRAL PHARMAPAK II	E	
LICART EXTERNAL	E	
LODINE	3	
LOFENA	3	ST
meclofenamate sodium oral	E	
mefenamic acid oral	E	
meloxicam oral capsule	E	
meloxicam oral tablet	1	
MOTRIN IB ORAL CAPSULE	E	
MOTRIN INFANTS DROPS	E	
nabumetone oral	1	
NALFON ORAL CAPSULE 400 MG	E	
NALFON ORAL TABLET	E	
NAPRELAN ORAL TABLET EXTENDED RELEASE 24 HOUR 375 MG, 500 MG	3	
NAPRELAN ORAL TABLET EXTENDED RELEASE 24 HOUR 750 MG	E	
NAPROSYN ORAL SUSPENSION	3	
NAPROSYN ORAL TABLET 500 MG	3	
naproxen oral suspension	E	
naproxen oral tablet	1	

Drug Name	Drug Tier	Notes
naproxen oral tablet delayed release	1	
naproxen sodium er oral tablet extended release 24 hour 375 mg, 500 mg	E	
NAPROXEN SODIUM ER ORAL TABLET EXTENDED RELEASE 24 HOUR 750 MG	E	
naproxen sodium oral tablet 220 mg	E	
naproxen sodium oral tablet 275 mg, 550 mg	1	
naproxen-esomeprazole	E	
NUDICLO SOLUPAK EXTERNAL	E	
NUDICLO TABPAK	E	
NUDROXIPAK	E	
NUDROXIPAK DSDR-50	E	
NUDROXIPAK DSDR-75	E	
NUDROXIPAK E-400	E	
NUDROXIPAK I-800	E	
NUDROXIPAK M-15	E	
NUDROXIPAK N-500	E	
ORMECA	E	
oxaprozin	1	
PENNSAICIN EXTERNAL	E	
PENNSAID EXTERNAL	E	
piroxicam oral	1	
PRASTERA	E	
PREVIDOLRX ANALGESIC	E	
previdolrx plus analgesic	E	
PROFINAC	E	

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

Drug Name	Drug Tier	Notes
RELAFEN	E	
RELAFEN DS	E	
salsalate oral	E	
SPRIX	3	PA; QL
ST JOSEPH LOW DOSE ORAL TABLET CHEWABLE	\$0	
sulindac oral	1	
SURE RESULT DSS PREMIUM PACK EXTERNAL	E	
TIVORBEX ORAL CAPSULE 20 MG	E	
TORONOVA II SUIK	E	
TORONOVA SUIK	E	
TRIPLE COMPLEX FORMULA 3 KIT	E	
VAROPHEN	E	
VENNGEL ONE	E	
VIMOVO	E	
VP FC KIT	E	
VP GKL KIT	E	
XRYLIX EXTERNAL	E	
XRYLIX II	E	
ZICLOPRO EXTERNAL	E	
ZIPSOR	E	
ZORVOLEX	E	
<b>Anesthetics</b>		
1ST MEDX-PATCH/ LIDOCAINE EXTERNAL PATCH 4-0.0375-5-20 %	E	
7T LIDO	E	
ACCUCAINE	E	
AGONEAZE	E	
ANODYNE LPT	E	
APRIZIO PAK	E	
ASTERO	E	

Drug Name	Drug Tier	Notes
blue tube/ aloe	E	
bupivacaine fisiopharma	1	
BUPIVACAINE HCL (BULK)	E	
bupivacaine hcl (pf)	1	
BUPIVACAINE HCL INJECTION SOLUTION 0.125 %	E	
bupivacaine hcl injection solution 0.25 %, 0.5 %	1	
BUPIVACAINE HCL INJECTION SOLUTION PREFILLED SYRINGE 0.125 % (50 ML)	E	
BUPIVACAINE HCL INJECTION SOLUTION PREFILLED SYRINGE 0.25 % (10 ML)	3	
CADIRAMD	E	
CAPSAICIN-MENTHOL	E	
CETACAINE EXTERNAL AEROSOL	E	
CETACAINE EXTERNAL GEL 2-2-14 %	E	
COCAINE HCL NASAL	E	
DERMACINRX LIDOGEL	E	
DERMACINRX PHN	E	
DERMACINRX ZRM	E	
DERMALID	E	
EHA	E	
ELEMAR PATCH	E	
ENOVARX-LIDOCAINE HCL	E	
ENZNONUTY	E	
ethyl chloride	1	

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

Drug Name	Drug Tier	Notes
EXPAREL	3	
GEBAUERS PAIN EASE	3	
GEBAUERS SPRAY AND STRETCH	3	
GEN7T	E	
GEN7T PLUS	E	
glydo external prefilled syringe	1	
GOPRELTO	E	
L.E.T. EXTERNAL SOLUTION	3	
LDO PLUS	E	
LETS	E	
LEVATIO	E	
LIDO BDK	E	
lidocaine external cream 4 %	E	
lidocaine external patch 5 %	1	
lidocaine hcl (pf) injection solution	1	
lidocaine hcl external cream 3 %, 4 %	E	
LIDOCAINE HCL EXTERNAL CREAM 4.12 %	E	
lidocaine hcl external lotion	E	
lidocaine hcl external solution	1	
lidocaine hcl injection solution 0.5 %	1	
LIDOCAINE HCL INJECTION SOLUTION PREFILLED SYRINGE 10 MG/ML, 100 MG/10ML, 100 MG/5ML, 200 MG/10ML, 60 MG/3ML, 9 MG/ML	3	

Drug Name	Drug Tier	Notes
LIDOCAINE HCL SOLUTION 1 % INJECTION	3	
lidocaine hcl solution 1 % injection	1	
LIDOCAINE HCL SOLUTION 2 % INJECTION	3	
lidocaine hcl solution 2 % injection	1	
lidocaine hcl urethral/mucosal	1	
lidocaine ointment 5 % external	E	
lidocaine ointment 5 % external	1	QL
lidocaine-prilocaine external cream	1	
lidocaine-prilocaine external kit	E	
LIDOCAINE-TETRACAINE EXTERNAL CREAM 7-7 %	E	
LIDODERM	E	
LIDO-EPINEPHRINE-TETRACAINE SOLUTION 4-0.05-0.5 % EXTERNAL	3	
LIDO-EPINEPHRINE-TETRACAINE SOLUTION 4-0.05-0.5 % EXTERNAL	E	
LIDOMARK 2/5	E	
LIDOPAC	E	
lidopin external cream 3 %	E	
LIDOPIN EXTERNAL CREAM 3.25 %	E	
LIDOPRIL EXTERNAL KIT	E	
LIDOPRIL XR	E	

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

Drug Name	Drug Tier	Notes
LIDO-PRILO CAINE PACK	E	
LIDOPURE PATCH	E	
LIDOREX	E	
LIDORX	E	
LIDO-SORB	E	
LIDOSTREAM	E	
LIDOTHOL	E	
LIDOTOR	E	
LIDOTRAL	E	
LIDOVIX L	E	
LIDTOPIC MAX	E	
LIVIXIL PAK	E	
LMR PLUS	E	
LYDEXA	E	
MARCAINE	3	
MARCAINE PRESERVATIVE FREE	3	
marlido	E	
MARLIDO-25	E	
MARVONA SUIK	E	
MOXICAINE	E	
NUMBRINO	E	
pain relieving + lidocaine	E	
PAINGO KFT	E	
PLIAGLIS	E	
POINT OF CARE LM-2.2	E	
POINT OF CARE LM-2.5	E	
premium lidocaine	E	
PREMIUM SCAR	E	
PREPIV SUPPLY	3	
PRILO PATCH	E	
PRILOHEAL PLUS 30	E	
PRILOLID	E	

Drug Name	Drug Tier	Notes
PRILOVIX	E	
PRILOVIX LITE	E	
PRILOVIX LITE PLUS	E	
PRILOVIX PLUS	E	
PRILOVIX ULTRALITE	E	
PRILOVIX ULTRALITE PLUS	E	
PRILOVIXIL	E	
PROXIVOL	E	
READYSHARP-A	E	
REAL HEAL-I	E	
RELADOR PAK EXTERNAL KIT	E	
RELADOR PAK PLUS	E	
SENSORCAINE	3	
SENSORCAINE-MPF	3	
SKYADERM-LP	E	
SOOTHEE EXTERNAL PATCH 0.5-0.0375-5-2 %	E	
STERILE TOPICAL L.E.T. GEL	3	
SX1 MEDICATED POST-OPERATIVE	E	
SYNERA	E	
TOPICAL L.E.T.	3	
VALLADERM-90	E	
VENIPUNCTURE PX1 PHLEBOTOMY	3	
VEXATROL	E	
WPR PLUS WOUND HEALING SYSTEM	E	
XARACOLL	E	
XYLOCAINE INJECTION	3	
XYLOCAINE-MPF INJECTION SOLUTION 0.5 %, 1 %, 1.5 %, 2 %	3	
ZERUVIA	E	

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

Drug Name	Drug Tier	Notes
ZILACAINE PATCH	E	
ZILOVAL	E	
ZINGO INTRADERMAL JET- INJECTOR	E	
ZIONODIL	E	
ZIONODIL 100	E	
ZTLIDO	E	
<b>Anti-Addiction / Substance Abuse Treatment Agents</b>		
acamprosate calcium	1	
APO-VARENICLINE	\$0	QL
buprenorphine hcl sublingual	1	QL
buprenorphine hcl- naloxone hcl	1	QL
bupropion hcl er (smoking det)	\$0	QL
disulfiram oral	1	
goodsense nicotine mouth/throat lozenge 4 mg	\$0	QL
habitrol	\$0	QL
KLOXXADO	2	
LUCEMYRA	3	ST; QL
naloxone hcl injection solution 0.4 mg/ml, 4 mg/10ml	1	
naloxone hcl injection solution cartridge	1	
naloxone hcl injection solution prefilled syringe	1	
naloxone hcl nasal	1	
naltrexone hcl oral	1	
NALTREXONE SUBCUTANEOUS	E	
NARCAN	2	

Drug Name	Drug Tier	Notes
NICORETTE MOUTH/THROAT GUM 2 MG	\$0	QL
NICORETTE MOUTH/THROAT LOZENGE 4 MG	\$0	QL
nicotine polacrilex mini	\$0	QL
nicotine polacrilex mouth/throat	\$0	QL
nicotine step 1	\$0	QL
nicotine step 2	\$0	QL
nicotine step 3	\$0	QL
nicotine transdermal kit	E	
NICOTROL	\$0	QL
NICOTROL NS	\$0	QL
SUBLOCADE	3	SP
SUBOXONE SUBLINGUAL FILM	2	QL
varenicline tartrate	\$0	QL
VIVITROL	3	SP
ZIMHI	E	
ZUBSOLV	2	QL
<b>Antibacterials</b>		
ACTICLATE	E	
AEMCOLO	3	PA
ALTABAX	3	
amikacin sulfate injection solution 500 mg/2ml	1	
amoxicillin oral capsule	1	
amoxicillin oral suspension reconstituted	1	
amoxicillin oral tablet	1	
amoxicillin oral tablet chewable 125 mg, 250 mg	1	
amoxicillin-potassium clavulanate er	1	

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

Drug Name	Drug Tier	Notes
amoxicillin-potassium clavulanate oral	1	
ampicillin oral capsule 500 mg	1	
ampicillin-sulbactam sodium injection solution reconstituted 3 (2-1) gm	1	
antibiotic external ointment	E	
ARIKAYCE	3	PA; SP
AUGMENTIN ES-600	3	
AUGMENTIN ORAL TABLET 500-125 MG	3	
avidoxy	1	
AVIDOXY DK	E	
azithromycin oral packet	1	
azithromycin oral suspension reconstituted	1	
azithromycin oral tablet 250 mg, 500 mg, 600 mg	1	
bacitracin external	E	
bacitracin zinc external	E	
bacitracin zinc-aloe	E	
BACTRIM	3	
BACTRIM DS	3	
BAXDELA	3	
benzalkonium chloride external solution , 50 %	1	
BENZODOX	E	
BICILLIN L-A INTRAMUSCULAR SUSPENSION 2400000 UNIT/4ML	3	
BICILLIN L-A INTRAMUSCULAR SUSPENSION PREFILLED SYRINGE	3	

Drug Name	Drug Tier	Notes
cefaclor	1	
cefaclor er	1	
cefadroxil	1	
cefazolin sodium injection solution reconstituted 1 gm, 10 gm	1	
cefazolin sodium-dextrose intravenous solution 2-4 gm/100ml-%	1	
cefdinir	1	
cefepime hcl injection solution reconstituted 2 gm	1	
cefixime	1	
cefotaxime sodium injection solution reconstituted 1 gm, 2 gm	1	
cefotetan disodium injection solution reconstituted 1 gm, 2 gm	1	
cefoxitin sodium intravenous solution reconstituted 10 gm	1	
cefpodoxime proxetil	1	
cefprozil	1	
ceftazidime injection solution reconstituted 1 gm, 6 gm	1	
ceftazidime intravenous	1	
ceftriaxone sodium injection solution reconstituted 1 gm, 2 gm, 250 mg, 500 mg	1	
cefuroxime axetil oral tablet	1	
CENTANY	3	
CENTANY AT	E	
cephalexin	1	

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

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

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

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

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

Drug Name	Drug Tier	Notes
methenamine mandelate oral	E	
METRONIDAZOLE BENZO+SYRSPEND	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 oral capsule 100 mg	1	
MONUROL	3	
moxifloxacin hcl in nacl	1	
moxifloxacin hcl oral	1	
mupirocin calcium	E	
mupirocin external	1	
nafcillin sodium injection solution reconstituted 1 gm	1	
nafcillin sodium intravenous solution reconstituted 10 gm	1	
neomycin sulfate oral	1	
neomycin-polymyxin b gu	E	
nitrofurantoin macrocrystal oral	1	
nitrofurantoin monohydrate macrocrystals	1	
nitrofurantoin oral suspension	E	
NUTRIDOX	E	
NUVESSA	E	

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



Drug Name	Drug Tier	Notes
NUZYRA ORAL TABLET 150 MG	3	
ofloxacin oral tablet 300 mg, 400 mg	1	
oxacillin sodium injection solution reconstituted 1 gm	1	
oxacillin sodium intravenous	1	
paromomycin sulfate oral	1	
penicillin g potassium injection solution reconstituted 5000000 unit	1	
penicillin g procaine	1	
penicillin g sodium	1	
penicillin v potassium	1	
PFIZERPEN INJECTION SOLUTION RECONSTITUTED 5000000 UNIT	3	
piperacillin sod-tazobactam so intravenous solution reconstituted 4-0.5 gm, 4.5 (4-0.5) gm	1	
poly bacitracin external ointment 500-10000 unit/gm	E	
polymyxin b sulfate injection	1	
POLYSPORIN EXTERNAL OINTMENT 500-10000 UNIT/GM	E	
povidone-iodine external solution 10 %	E	
RECARBRIO	3	
SCRUB CARE POVIDONE-IODINE	E	
SEYSARA	3	ST

Drug Name	Drug Tier	Notes
SILVADENE	3	
silver nitrate external solution 0.5 %	E	
silver sulfadiazine external	1	
SIVEXTRO INTRAVENOUS	3	QL
SIVEXTRO ORAL	E	
SOLODYN ORAL TABLET EXTENDED RELEASE 24 HOUR 105 MG, 115 MG, 55 MG, 65 MG, 80 MG	E	
SOLOSEC	3	
ssd	1	
streptomycin sulfate intramuscular	1	
sulfadiazine oral	1	
sulfamethoxazole-trimethoprim oral suspension 200-40 mg/5ml	1	
sulfamethoxazole-trimethoprim oral tablet	1	
SULFAMYLON EXTERNAL CREAM	E	
SULFAMYLON EXTERNAL PACKET	3	
sulfatrim pediatric	1	
SUPRAX ORAL CAPSULE	3	
SUPRAX ORAL SUSPENSION RECONSTITUTED 200 MG/5ML, 500 MG/5ML	3	
SUPRAX ORAL TABLET CHEWABLE	3	
TARGADOX	E	
tazicef injection solution reconstituted 1 gm	1	
tazicef intravenous solution reconstituted	1	

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

Drug Name	Drug Tier	Notes
TEFLARO INTRAVENOUS SOLUTION RECONSTITUTED 600 MG	3	
tetracycline hcl oral	1	
tigecycline	1	
tinidazole oral	1	
trimethoprim oral	1	
TYGACIL	3	
UNASYN INJECTION SOLUTION RECONSTITUTED 3 (2-1) GM	3	
VANCOCIN	3	
vancomycin hcl in nacl intravenous solution 1- 0.9 gm/200ml-%	1	
vancomycin hcl intravenous solution 1000 mg/200ml, 1250 mg/250ml, 1500 mg/300ml, 1750 mg/350ml, 2000 mg/400ml, 500 mg/100ml, 750 mg/150ml	1	
vancomycin hcl oral	1	
VANCOMYCIN+SYRS PEND SF	E	
vandazole	1	
VIBRAMYCIN	3	ST
XENLETA	3	
XEPI	3	
XIFAXAN	3	PA
XIMINO	3	
ZEMDRI	3	
ZITHROMAX ORAL PACKET	3	
ZITHROMAX ORAL SUSPENSION RECONSTITUTED	3	

Drug Name	Drug Tier	Notes
ZITHROMAX ORAL TABLET 250 MG, 500 MG	3	
ZITHROMAX TRI-PAK	3	
ZITHROMAX Z-PAK	3	
ZYVOX INTRAVENOUS SOLUTION 200 MG/100ML, 600 MG/300ML	3	
ZYVOX ORAL	3	QL
<b>Anticoagulants</b>		
ACD-A NOCLOT-50	3	
ACTIVASE	E	
ANTICOAGULANT SODIUM CITRATE	3	
ARIXTRA	3	SP; QL
CATHFLO ACTIVASE	E	
ELIQUIS	2	QL
ELIQUIS DVT/PE STARTER PACK ORAL TABLET THERAPY PACK	2	QL
enoxaparin sodium injection	1	SP; QL
fondaparinux sodium	1	SP; QL
FRAGMIN SUBCUTANEOUS SOLUTION 95000 UNIT/3.8ML	3	SP; QL
FRAGMIN SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	3	SP; QL
heparin (porcine) in nacl intravenous solution 1000-0.9 ut/500ml-%, 2000-0.9 unit/l-%	1	

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

Drug Name	Drug Tier	Notes
HEPARIN (PORCINE) IN NACL INTRAVENOUS SOLUTION 4000-0.9 UNIT/L-%	E	
heparin sodium (porcine) injection solution 1000 unit/ml, 10000 unit/ml, 20000 unit/ml, 5000 unit/ml	1	
heparin sodium (porcine) injection solution prefilled syringe	1	
heparin sodium (porcine) pf	1	
jantoven	1	
LOVENOX INJECTION	3	SP; QL
PRADAXA	2	QL
REGIOCIT EXTRACORPOREAL	E	
SAVAYSA	3	QL
THROMBATE III	3	SP
TRICITRASOL	3	
warfarin sodium oral	1	
XARELTO	2	QL
XARELTO STARTER PACK	2	QL
<b>Anticonvulsants - Drugs for Seizures</b>		
APTIOM	3	
BANZEL	3	PA
BRIVIACT INTRAVENOUS	3	
BRIVIACT ORAL	3	ST
carbamazepine er	1	
carbamazepine oral	1	
CARBATROL	3	
CELONTIN	3	

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

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

Drug Name	Drug Tier	Notes
FYCOMPA	3	
gabapentin oral capsule	1	
gabapentin oral solution 250 mg/5ml	1	
gabapentin oral tablet	1	
GABITRIL	3	
KEPPRA	3	
KEPPRA XR	3	
lacosamide	1	
LAMICTAL ODT ORAL KIT 21 X 25 MG & 7 X 50 MG, 42 X 50 MG & 14X100 MG	2	
LAMICTAL ODT ORAL KIT 25 & 50 & 100 MG	E	
LAMICTAL ODT ORAL TABLET DISPERSIBLE	3	
LAMICTAL ORAL TABLET	3	
LAMICTAL ORAL TABLET CHEWABLE 25 MG, 5 MG	3	
LAMICTAL STARTER	3	
LAMICTAL XR	3	
lamotrigine er	1	
lamotrigine oral kit 25 & 50 & 100 mg	1	
lamotrigine oral tablet	1	
lamotrigine oral tablet chewable	1	
lamotrigine oral tablet dispersible	1	
lamotrigine starter kit-blue	1	
lamotrigine starter kit-green	1	
lamotrigine starter kit-orange	1	
levetiracetam er	1	

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

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

Drug Name	Drug Tier	Notes
SYMPAZAN	3	PA
TEGRETOL ORAL SUSPENSION	3	
TEGRETOL ORAL TABLET	3	
TEGRETOL-XR	3	
tiagabine hcl	1	
TOPAMAX	3	
TOPAMAX SPRINKLE	3	
topiramate er	1	
topiramate oral	1	
TRILEPTAL	3	
TROKENDI XR	3	ST
valproic acid oral capsule	1	
valproic acid oral solution	1	
VALTOCO	3	QL
vigabatrin	1	PA; SP
vigadrone	1	PA; SP
VIMPAT	3	
XCOPRI ORAL TABLET 100 MG, 150 MG, 200 MG, 50 MG	3	ST
XCOPRI ORAL TABLET THERAPY PACK 100 & 150 MG, 14 X 12.5 MG & 14 X 25 MG, 14 X 150 MG & 14 X200 MG, 14 X 50 MG & 14 X100 MG, 150 & 200 MG	3	ST
ZARONTIN	3	
ZONEGRAN	3	
zonisamide oral	1	
<b>Antidementia Agents - Drugs for Alzheimer's Disease and Dementia</b>		
ADLARITY	E	
ADUHELM	E	SP

Drug Name	Drug Tier	Notes
ARICEPT	3	
donepezil hcl	1	
EXELON TRANSDERMAL	3	
galantamine hydrobromide	1	
galantamine hydrobromide er	1	
memantine hcl er	1	QL
memantine hcl oral solution 2 mg/ml	1	
memantine hcl oral tablet	1	
NAMENDA ORAL TABLET	3	
NAMENDA TITRATION PAK	3	
NAMENDA XR	3	QL
NAMZARIC	2	QL
RAZADYNE ER	3	
rivastigmine	1	
rivastigmine tartrate	1	
<b>Antidepressants</b>		
amitriptyline hcl oral	1	
amoxapine	1	
ANAFRANIL	3	
APLENZIN	E	
bupropion hcl er (sr)	1	QL
bupropion hcl er (xl) oral tablet extended release 24 hour 150 mg, 300 mg	1	QL
BUPROPION HCL ER (XL) ORAL TABLET EXTENDED RELEASE 24 HOUR 450 MG	E	
bupropion hcl oral	1	
CELEXA ORAL TABLET	3	
chlordiazepoxide-amitriptyline	1	

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

Drug Name	Drug Tier	Notes
CITALOPRAM HYDROBROMIDE ORAL CAPSULE	E	
citalopram hydrobromide oral solution	1	
citalopram hydrobromide oral tablet	1	
clomipramine hcl oral	1	
CYMBALTA	E	
desipramine hcl oral	1	
DESVENLAFAXINE ER	3	ST; QL
desvenlafaxine succinate er	1	QL
doxepin hcl oral capsule	1	
doxepin hcl oral concentrate	1	
DRIZALMA SPRINKLE	3	ST; QL
duloxetine hcl oral	1	QL
EFFEXOR XR	E	
EMSAM	3	QL
escitalopram oxalate oral	1	
FETZIMA	3	ST; QL
FETZIMA TITRATION	3	ST; QL
fluoxetine hcl (pmdd) oral tablet	E	
fluoxetine hcl oral capsule	1	
fluoxetine hcl oral capsule delayed release	1	QL
fluoxetine hcl oral solution	1	
fluoxetine hcl oral tablet 10 mg, 60 mg	1	
fluoxetine hcl oral tablet 20 mg	E	

Drug Name	Drug Tier	Notes
fluvoxamine maleate	1	
fluvoxamine maleate er	1	QL
FORFIVO XL	E	
imipramine hcl oral	1	
imipramine pamoate	1	
LEXAPRO ORAL TABLET	E	
LYBALVI	E	
MARPLAN	3	
mirtazapine oral	1	
NARDIL	3	
nefazodone hcl	1	
NORPRAMIN ORAL TABLET 10 MG, 25 MG	3	
nortriptyline hcl oral	1	
olanzapine-fluoxetine hcl	1	QL
PAMELOR ORAL CAPSULE	3	
PARNATE	3	
paroxetine hcl	1	
paroxetine hcl er	1	
paroxetine mesylate	1	QL
PAXIL CR	3	
PAXIL ORAL SUSPENSION	3	ST
PAXIL ORAL TABLET	3	
perphenazine-amitriptyline	1	
PEXEVA	E	
phenelzine sulfate oral	1	
PRISTIQ	E	
protriptyline hcl	1	
PROZAC ORAL CAPSULE	E	
REMERON ORAL TABLET 15 MG, 30 MG	3	

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

Drug Name	Drug Tier	Notes
REMERON SOLTAB ORAL TABLET DISPERSIBLE 15 MG, 30 MG	3	
SERTRALINE HCL ORAL CAPSULE	E	
sertraline hcl oral concentrate	1	
sertraline hcl oral tablet	1	
SPRAVATO (56 MG DOSE)	3	PA; SP
SPRAVATO (84 MG DOSE)	3	PA; SP
SYMBYAX ORAL CAPSULE 3-25 MG, 6-25 MG	3	QL
tranylcypromine sulfate	1	
trazodone hcl oral	1	
trimipramine maleate 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 150 mg, 37.5 mg, 75 mg	E	
venlafaxine hcl er oral tablet extended release 24 hour 225 mg	1	
VIIBRYD ORAL TABLET	3	QL
VIIBRYD STARTER PACK	3	QL
vilazodone hcl	1	QL
WELLBUTRIN SR	E	
WELLBUTRIN XL	E	
ZOLOFT	E	
ZULRESSO	3	PA; SP

Drug Name	Drug Tier	Notes
<b>Antiemetics - Drugs for Nausea and Vomiting</b>		
AKYNZEO INTRAVENOUS	3	
AKYNZEO ORAL	3	QL
ANTIVERT ORAL TABLET 50 MG	3	
ANTIVERT ORAL TABLET CHEWABLE	3	
ANZEMET ORAL TABLET 50 MG	3	QL
aprepitant	1	QL
BONJESTA	3	PA; QL
compro	1	
cvs motion sickness	E	
DICLEGIS	3	PA; QL
doxylamine-pyridoxine	1	PA; QL
dronabinol	1	PA; QL
EMEND INTRAVENOUS SOLUTION RECONSTITUTED 150 MG	3	
EMEND ORAL CAPSULE 80 MG	3	QL
EMEND ORAL SUSPENSION RECONSTITUTED	3	QL
EMEND TRI-PACK	3	QL
fosaprepitant dimeglumine	1	
GIMOTI	E	
granisetron hcl intravenous solution 1 mg/ml, 4 mg/4ml	1	
granisetron hcl oral	1	QL
MARINOL ORAL CAPSULE 2.5 MG	3	PA; QL
meclizine hcl oral tablet 12.5 mg, 25 mg	1	

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

Drug Name	Drug Tier	Notes
meclizine hcl oral tablet chewable	E	
metoclopramide hcl oral solution 10 mg/10ml, 5 mg/5ml	1	
metoclopramide hcl oral tablet	1	
metoclopramide hcl oral tablet dispersible	1	
motion sickness relief oral tablet 50 mg	E	
motion sickness relief oral tablet chewable	E	
ondansetron hcl injection solution 4 mg/2ml, 40 mg/20ml	1	
ondansetron hcl injection solution prefilled syringe	1	
ondansetron hcl oral solution	1	QL
ondansetron hcl oral tablet 24 mg	E	
ondansetron hcl oral tablet 4 mg, 8 mg	1	
ondansetron odt	1	
palonosetron hcl	1	
perphenazine oral	1	
prochlorperazine	1	
prochlorperazine maleate oral	1	
REGLAN ORAL	3	
SANCUSO	3	PA; QL
scopolamine	1	
SUSTOL	3	QL
SYNDROS	3	PA; QL
TIGAN INTRAMUSCULAR	3	
TRANSDERM-SCOP TRANSDERMAL PATCH 72 HOUR	3	

Drug Name	Drug Tier	Notes
trimethobenzamide hcl oral	1	
VARUBI (180 MG DOSE)	3	QL
<b>Antifungals</b>		
ALOE VESTA CLEAR ANTIFUNGAL	E	
amphotericin b intravenous	1	
ANCOBON	3	
antifungal external powder	E	
athletes foot (terbinafine)	E	
BREXAFEMME	E	
CANCIDAS INTRAVENOUS SOLUTION RECONSTITUTED 70 MG	3	
caspofungin acetate intravenous solution reconstituted 70 mg	1	
ciclodan external solution	1	
ciclopirox external	1	
ciclopirox olamine external	1	
ciclopirox treatment	E	
clotrimazole external cream	1	
clotrimazole external solution	1	
clotrimazole mouth/throat troche	1	
clotrimazole vaginal cream 1 %	E	
clotrimazole-betamethasone	1	
CORTI-SAV	E	
CRESEMBA INTRAVENOUS	3	

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



Drug Name	Drug Tier	Notes
CRESEMBA ORAL	3	PA
cvs clotrimazole 3	E	
DERMACINRX THERAZOLE PAK	E	
DESENEX EXTERNAL POWDER	E	
DIFLUCAN	3	
DIFMETIOXRIME	E	
econazole nitrate external	1	
ECOZA	E	
ERAXIS INTRAVENOUS SOLUTION RECONSTITUTED 100 MG	3	
ERTACZO	E	
EXELDERM	E	
EXTINA	3	
fluconazole oral	1	
flucytosine oral	1	
FORMULA 7 THE SOLUTION	E	
FUNGIMEZ	E	
griseofulvin microsize oral	1	
griseofulvin ultramicrosize	1	
GYNAZOLE-1	3	
HIXDEFRIMA	E	
hydrocortisone- iodoquinol external cream 1-1 %	E	
IMIOXIA	E	
IDOQUIMEZ-HC	E	
iodoquinol-hc-aloe polysacch	E	
iodoquinol- hydrocortisone-aloe	E	
itraconazole oral	1	PA

Drug Name	Drug Tier	Notes
JUBLIA	E	
KERYDIN	3	PA
ketoconazole external cream	1	
ketoconazole external foam	E	
ketoconazole external shampoo 2 %	1	
ketoconazole oral	1	
ketodan external foam	E	
KETODAN EXTERNAL KIT	E	
LOPROX EXTERNAL CREAM	3	
LOPROX EXTERNAL KIT	E	
LOPROX EXTERNAL SHAMPOO	3	
LOPROX EXTERNAL SUSPENSION	3	
LULICONAZOLE	E	
LUZU	E	
MENTAX	E	
micaderm	E	
micalfungin sodium intravenous solution reconstituted 100 mg	1	
miconazole 1	E	
miconazole 3 vaginal suppository	1	
miconazole 7	E	
miconazole nitrate external cream	E	
MICONAZOLE-ZINC OXIDE-PETROLAT	E	
miconazorb af	E	
MICOTRIN AL	E	
MICOTRIN AP	E	

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

Drug Name	Drug Tier	Notes
MYCAMINE INTRAVENOUS SOLUTION RECONSTITUTED 100 MG	3	
MYCOZYL AL	E	
MYCOZYL AP	E	
naftifine hcl external cream	1	
NAFTIN EXTERNAL GEL 1 %	E	
NAFTIN EXTERNAL GEL 2 %	3	
NOXAFIL ORAL	3	PA
nyamyc	1	
nystatin external	1	
nystatin mouth/throat	1	
nystatin oral tablet	1	
nystatin-triamcinolone	1	
nystop	1	
ONYCHO-MED	E	
ORAVIG	E	
oxiconazole nitrate	E	
OXISTAT EXTERNAL CREAM	3	
OXISTAT EXTERNAL LOTION	E	
PEDIZOLPAK	E	
PHEODOYO	E	
PHEYO	E	
posaconazole	1	PA
RECURA	E	
SPORANOX	3	PA
SPORANOX PULSEPAK	3	PA
SULCONAZOLE NITRATE	E	
tavaborole	1	PA
terbinafine hcl oral	1	QL
terconazole	1	

Drug Name	Drug Tier	Notes
tolnaftate antifungal	E	
tolnaftate external cream	E	
tolnaftate external powder	E	
TOLSURA	E	
VFEND	3	PA
voriconazole oral	1	PA
VUSION	E	
VYTONE CREAM 1-1.9 % EXTERNAL	3	
VYTONE CREAM 1-1.9 % EXTERNAL	E	
XOLEGEL	E	
XOLEGEL COREPAK	E	
XOLEGEL DUO/HEAD & SHOULDERS	E	
XOLEGEL DUO/XOLEX	E	
ZEASORB-AF EXTERNAL POWDER	E	
ZOLPAK	E	
<b>Antigout Agents</b>		
allopurinol oral	1	
COLCHICINE ORAL CAPSULE	E	
colchicine oral tablet	1	
colchicine-probenecid	1	
COLCRYS	E	
febuxostat	1	ST
GLOPERBA	E	
KRYSTEXXA	3	PA; SP
MITIGARE	E	
probenecid oral	1	
ULORIC	3	ST
ZYLOPRIM	3	
<b>Anti-inflammatory Agents</b>		
EMFLAZA	E	SP

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

Drug Name	Drug Tier	Notes
<b>Antimigraine Agents</b>		
AIMOVIG SUBCUTANEOUS SOLUTION AUTO- INJECTOR 140 MG/ML, 70 MG/ML	2	PA; QL
AJOVY	2	PA; QL
almotriptan malate	E	
AMERGE	3	QL
CAFERGOT	3	PA; QL
D.H.E. 45	3	PA; QL
dihydroergotamine mesylate injection	1	PA; QL
dihydroergotamine mesylate nasal	1	PA; QL
eletriptan hydrobromide	1	QL
EMGALITY	E	
EMGALITY (300 MG DOSE)	2	PA; QL
ERGOMAR	3	PA; QL
ergotamine-caffeine	1	PA; QL
FROVA	3	QL
frovatriptan succinate	E	
IMITREX NASAL	3	QL
IMITREX ORAL	3	QL
IMITREX STATDOSE REFILL SUBCUTANEOUS SOLUTION CARTRIDGE	3	QL
IMITREX STATDOSE SYSTEM SUBCUTANEOUS SOLUTION AUTO- INJECTOR	3	QL
MAXALT ORAL TABLET 10 MG	3	QL
MIGERGOT	3	PA; QL
MIGRAINE PACK	E	
MIGRANAL	3	PA; QL
MIGRANOW	E	

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

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

Drug Name	Drug Tier	Notes
<b>Antimyasthenic Agents</b>		
MESTINON ORAL SOLUTION	3	
MESTINON ORAL TABLET	3	
MESTINON ORAL TABLET EXTENDED RELEASE	3	
NEOSTIGMINE METHYLSULFATE SOLUTION PREFILLED SYRINGE 5 MG/5ML INTRAVENOUS	3	
NEOSTIGMINE METHYLSULFATE SOLUTION PREFILLED SYRINGE 5 MG/5ML INTRAVENOUS	E	
pyridostigmine bromide er	1	
pyridostigmine bromide oral solution	1	
pyridostigmine bromide oral tablet	1	
<b>Antimycobacterials</b>		
cycloserine oral	1	
dapsone oral	1	
ethambutol hcl oral	1	
isoniazid oral	1	
MYAMBUTOL ORAL TABLET 400 MG	3	
MYCOBUTIN	3	
PASER	3	
PRETOMANID	3	
PRIFTIN	3	
pyrazinamide oral	1	
rifabutin	1	
rifampin oral	1	

Drug Name	Drug Tier	Notes
RIFAMPIN+SYRSPEN D SF	E	
SIRTURO	3	
TRECATOR	3	
<b>Antineoplastics - Drugs for Cancer</b>		
ABECMA	3	PA; SP
abiraterone acetate	1	PA; SP
ABRAXANE	2	SP
ADCETRIS	2	PA; SP
adriamycin intravenous solution reconstituted 50 mg	1	SP
AFINITOR	E	SP
AFINITOR DISPERZ	E	SP
ALECENSA	2	PA; SP
ALIMTA	3	SP
ALIQOPA	3	PA; SP
ALKERAN	3	SP
ALUNBRIG	2	PA; SP; QL
ALYMSYS	E	SP
anastrozole oral	1	
ARIMIDEX	E	
AROMASIN	3	
ARRANON	3	SP
arsenic trioxide intravenous	1	SP
ARZERRA	2	PA; SP
ASPARLAS	3	SP
AVASTIN	3	PA; SP
AYVAKIT	3	PA; SP; QL
azacitidine	1	PA; SP
BALVERSA	3	PA; SP
BAVENCIO	3	PA; SP
BELEODAQ	3	PA; SP
BELRAPZO	E	SP
BENDEKA	3	PA; SP
BESPONSA	3	PA; SP

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

Drug Name	Drug Tier	Notes
BESREMI	E	SP
bexarotene	1	PA; SP
bicalutamide	1	
BICNU	3	SP
BLENREP	3	PA; SP
bleomycin sulfate	1	SP
BLINCYTO	3	PA; SP
bortezomib injection	1	PA; SP
BORTEZOMIB INTRAVENOUS	3	PA; SP
BOSULIF	3	PA; SP
BRAFTOVI ORAL CAPSULE 75 MG	3	PA; SP
BREYANZI	3	PA; SP
BRUKINSA	3	PA; SP
busulfan	1	SP
BUSULFEX	3	SP
CABOMETYX	2	PA; SP
CALQUENCE	3	PA; SP
CAMPTOSAR	3	SP
capecitabine	1	PA; SP
CAPRELSA ORAL TABLET 100 MG	2	PA; SP; QL
CAPRELSA ORAL TABLET 300 MG	2	PA; SP
carboplatin intravenous solution	1	SP
carmustine	1	SP
CARVYKTI	E	SP
CASODEX	3	
cisplatin intravenous solution 100 mg/100ml, 200 mg/200ml, 50 mg/50ml	1	SP
CISPLATIN INTRAVENOUS SOLUTION RECONSTITUTED	3	SP
cladribine intravenous solution 10 mg/10ml	1	SP

Drug Name	Drug Tier	Notes
clofarabine	1	SP
CLOLAR	3	SP
COMETRIQ ORAL KIT 20 MG, 3 X 20 MG & 80 MG, 80 & 20 MG	3	PA; SP
COPIKTRA	3	PA; SP
COSELA	E	SP
COSMEGEN	3	SP
COTELLIC	3	PA; SP
cyclophosphamide injection	1	SP
CYCLOPHOSPHAMID E INTRAVENOUS	3	SP
cyclophosphamide oral capsule	1	
CYCLOPHOSPHAMID E ORAL TABLET	2	
CYRAMZA	3	PA; SP
cytarabine (pf)	1	SP
cytarabine injection solution	1	SP
dacarbazine intravenous	1	SP
DACOGEN	3	PA; SP
dactinomycin	1	SP
DANYELZA	3	PA; SP
DARZALEX	3	PA; SP
DARZALEX FASPRO	E	SP
daunorubicin hcl intravenous solution	1	SP
DAURISMO	3	PA; SP
decitabine	1	PA; SP
dexrazoxane hcl	1	SP
docetaxel intravenous concentrate 160 mg/8ml, 20 mg/ml, 80 mg/4ml	1	SP
docetaxel intravenous solution 160 mg/16ml, 20 mg/2ml, 80 mg/8ml	1	SP

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

Drug Name	Drug Tier	Notes
DOXIL	3	SP
doxorubicin hcl	1	SP
doxorubicin hcl liposomal	1	SP
DROXIA	3	
ELITEK	3	SP
ELLECE	3	SP
ELZONRIS	3	PA; SP
EMCYT	2	
EMPLICITI	3	PA; SP
ENHERTU	3	PA; SP
ERBITUX	2	PA; SP
ERIVEDGE	3	PA; SP
ERLEADA	3	PA; SP
erlotinib hcl oral tablet 100 mg, 150 mg	1	PA; SP
erlotinib hcl oral tablet 25 mg	1	PA; SP; QL
ERWINASE	3	SP
ETHYOL	3	SP
ETOPOPHOS	3	SP
etoposide intravenous solution 1 gm/50ml, 100 mg/5ml, 500 mg/25ml	1	SP
etoposide oral	1	SP
EULEXIN	3	
everolimus oral tablet 10 mg, 2.5 mg, 5 mg, 7.5 mg	1	PA; SP; QL
everolimus oral tablet soluble	1	PA; SP
EVOMELA	3	SP
exemestane	1	
EXKIVITY	3	PA; SP
FARESTON	3	
FASLODEX INTRAMUSCULAR SOLUTION 250 MG/5ML	3	SP

Drug Name	Drug Tier	Notes
FEMARA	3	
floxuridine injection	1	SP
fludarabine phosphate	1	SP
fluorouracil intravenous	1	SP
flutamide	1	
FOLOTYN	2	PA; SP
FOTIVDA	E	SP
fulvestrant	1	SP
FYARRO	3	PA; SP
GAVRETO	3	PA; SP
GAZYVA	3	PA; SP
gemcitabine hcl	1	SP
GILOTRIF	3	PA; SP; QL
GLEEVEC	3	PA; SP
GLEOSTINE ORAL CAPSULE 10 MG, 100 MG, 40 MG	3	SP
HALAVEN	2	PA; SP
HERCEPTIN HYLECTA	3	PA; SP
HERCEPTIN INTRAVENOUS SOLUTION RECONSTITUTED 150 MG	3	PA; SP
HERZUMA	E	SP
HYCAMTIN	3	SP
HYDREA	3	
hydroxyurea oral	1	
IBRANCE	3	PA; SP
ICLUSIG ORAL TABLET 10 MG, 15 MG	3	PA; SP; QL
ICLUSIG ORAL TABLET 30 MG, 45 MG	3	PA; SP
IDAMYCIN PFS	3	SP
idarubicin hcl	1	SP
IDHIFA	3	PA; SP; QL
IFEX	3	SP

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

Drug Name	Drug Tier	Notes
ifosfamide	1	SP
imatinib mesylate	1	PA; SP
IMBRUVICA	3	PA; SP; QL
IMFINZI	3	PA; SP
IMLYGIC	3	SP
INFUGEM	3	SP
INLYTA	3	PA; SP
INQOVI	E	SP
INREBIC	3	PA; SP
IRESSA	3	PA; SP
irinotecan hcl	1	SP
ISTODAX (OVERFILL)	3	PA; SP
IXEMPRA KIT	2	SP
JAKAFI ORAL TABLET 10 MG	2	PA; SP; QL
JAKAFI ORAL TABLET 15 MG, 20 MG, 25 MG, 5 MG	2	PA; SP
JELMYTO	E	SP
JEMPERLI	3	PA; SP
JEVTANA	2	PA; SP
KADCYLA	3	PA; SP
KANJINTI	2	PA; SP
KEYTRUDA INTRAVENOUS SOLUTION	3	PA; SP
KHAPZORY	3	ST; SP
KIMMTRAK	3	PA; SP
KISQALI FEMARA	3	PA; SP
KISQALI ORAL TABLET THERAPY PACK 200 MG	3	PA; SP
KOSELUGO	3	PA; SP
KYPROLIS	2	PA; SP
lapatinib ditosylate	1	PA; SP
lenalidomide	1	PA; SP

Drug Name	Drug Tier	Notes
LENVIMA ORAL CAPSULE THERAPY PACK 10 & 4 MG, 10 MG, 10 MG & 2 X 4 MG, 2 X 10 MG, 2 X 10 MG & 4 MG, 2 X 4 MG, 3 X 4 MG, 4 MG	3	PA; SP
letrozole oral	1	
leucovorin calcium injection	1	
leucovorin calcium oral	1	
LEUKERAN	2	
levoleucovorin calcium intravenous solution reconstituted 50 mg	1	SP
levoleucovorin calcium pf	1	SP
LIBTAYO	3	PA; SP
LONSURF	3	PA; SP
LORBRENA	3	PA; SP
LUMAKRAS	3	PA; SP
LUMOXITI	3	PA; SP
LUTATHERA	E	
LYNPARZA ORAL TABLET	2	PA; SP
LYSODREN	2	
MARGENZA	3	PA; SP
MATULANE	2	SP
MEKINIST	2	PA; SP
MEKTOVI	3	PA; SP
melphalan	1	SP
melphalan hcl	1	SP
mercaptopurine oral	1	
mesna	1	SP
MESNEX	3	SP
mitomycin intravenous	1	SP
MITOMYCIN INTRAVESICAL	E	SP
mitoxantrone hcl	1	PA; SP
MONJUVI	3	PA; SP

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

Drug Name	Drug Tier	Notes
mutamycin	1	SP
MVASI	2	PA; SP
MYLERAN	2	
MYLOTARG INTRAVENOUS SOLUTION RECONSTITUTED 4.5 MG	3	PA; SP
nelarabine	1	SP
NERLYNX	3	PA; SP; QL
NEXAVAR	3	PA; SP
NILANDRON	3	SP
nilutamide	1	SP
NINLARO	3	PA; SP
NIPENT	3	SP
NUBEQA	3	PA; SP
ODOMZO	3	PA; SP
OGIVRI	E	SP
ONCASPAR INJECTION	2	SP
ONIVYDE	3	SP
ONTRUZANT	E	SP
ONUREG	3	PA; SP
OPDIVO	3	PA; SP
OPDUALAG	E	SP
ORGOVYX	3	PA; SP
oxaliplatin intravenous solution 100 mg/20ml, 50 mg/10ml	1	SP
oxaliplatin intravenous solution 200 mg/40ml	1	
oxaliplatin intravenous solution reconstituted	1	SP
paclitaxel intravenous concentrate 100 mg/16.7ml, 150 mg/25ml, 30 mg/5ml, 300 mg/50ml	1	SP
PACLITAXEL PROTEIN-BOUND PART	E	SP

Drug Name	Drug Tier	Notes
PADCEV	3	PA; SP
PANRETIN	3	
paraplatin	1	SP
PEMAZYRE	E	SP
pemetrexed disodium	1	SP
PEMETREXED INTRAVENOUS SOLUTION 500 MG/20ML	E	SP
PEMFEXY	E	SP
PERJETA	2	PA; SP
PHESGO	2	PA; SP
PHOTOFRIN	3	SP
PIQRAY	3	PA; SP
POLIVY	3	PA; SP
POMALYST	3	PA; SP
PORTRAZZA	3	PA; SP
POTELIGEO	3	PA; SP
PROLEUKIN	2	SP
PURIXAN	3	SP
QINLOCK	3	PA; SP
RETEVMO	3	PA; SP
REVLIMID	2	PA; SP
REZUROCK	E	SP
RIABNI	E	SP
RITUXAN HYCELA	3	PA; SP
RITUXAN INTRAVENOUS SOLUTION	3	PA; SP
ROMIDEPSIN INTRAVENOUS SOLUTION	3	PA; SP
romidepsin intravenous solution reconstituted	1	PA; SP
ROZLYTREK	3	PA; SP
RUBRACA	2	PA; SP
RUXIENCE	2	PA; SP
RYBREVANT	3	PA; SP
RYDAPT	3	PA; SP

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



Drug Name	Drug Tier	Notes
RYLAZE	E	SP
SARCLISA	3	PA; SP
SCEMBLIX ORAL TABLET 20 MG	3	PA; SP; QL
SCEMBLIX ORAL TABLET 40 MG	3	PA; SP
SIKLOS	E	
SOLTAMOX	3	
sorafenib tosylate	1	PA; SP
SPRYCEL	2	PA; SP
STIVARGA	3	PA; SP
sunitinib malate	1	PA; SP
SUTENT	E	SP
SYLVANT	3	PA; SP
SYNRIBO	3	PA; SP
TABLOID	2	SP
TABRECTA	3	PA; SP
TAFINLAR	2	PA; SP
TAGRISSEO ORAL TABLET 40 MG	3	PA; SP; QL
TAGRISSEO ORAL TABLET 80 MG	3	PA; SP
TALZENNA ORAL CAPSULE 0.25 MG, 0.75 MG, 1 MG	3	PA; SP
TALZENNA ORAL CAPSULE 0.5 MG	3	PA; SP; QL
tamoxifen citrate oral	1	
TARCEVA ORAL TABLET 100 MG, 150 MG	3	PA; SP
TARCEVA ORAL TABLET 25 MG	3	PA; SP; QL
TARGRETIN EXTERNAL	3	PA; SP
TARGRETIN ORAL	E	SP
TASIGNA	3	PA; SP
TAZVERIK	E	SP
TECARTUS	3	PA; SP
TECENTRIQ	3	PA; SP

Drug Name	Drug Tier	Notes
TEMODAR INTRAVENOUS	2	SP
TEMODAR ORAL CAPSULE 100 MG, 140 MG, 180 MG, 250 MG	3	PA; SP
temozolomide	1	PA; SP
TEPADINA	3	SP
TEPMETKO	E	SP
THALOMID	2	PA; SP
thiotepa injection	1	SP
TIBSOVO	3	PA; SP
TIVDAK	3	PA; SP
toposar intravenous solution 1 gm/50ml, 100 mg/5ml, 500 mg/25ml	1	SP
topotecan hcl	1	SP
toremifene citrate	1	
TOTECT	3	SP
TRAZIMERA	2	PA; SP
TREANDA INTRAVENOUS SOLUTION RECONSTITUTED	E	SP
tretinoin oral	1	SP
TRISENOX INTRAVENOUS SOLUTION 12 MG/6ML	3	SP
TRODELVY	3	PA; SP
TRUSELTIQ (100MG DAILY DOSE)	3	PA; SP
TRUSELTIQ (125MG DAILY DOSE)	3	PA; SP
TRUSELTIQ (50MG DAILY DOSE)	3	PA; SP
TRUSELTIQ (75MG DAILY DOSE)	3	PA; SP
TRUXIMA	E	SP
TUKYSA	3	PA; SP

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

Drug Name	Drug Tier	Notes
TURALIO	3	PA; SP
TYKERB	3	PA; SP
UNITUXIN	3	PA; SP
VALCHLOR	3	PA; SP
valrubicin	1	
VALSTAR	3	
VECTIBIX INTRAVENOUS SOLUTION 100 MG/5ML, 400 MG/20ML	3	SP
VELCADE INJECTION	3	PA; SP
VENCLEXTA	3	PA; SP
VENCLEXTA STARTING PACK	3	PA; SP
VERZENIO	3	PA; SP
VIDAZA	3	PA; SP
VIJOICE	E	SP
vinblastine sulfate intravenous solution	1	SP
vincasar pfs	1	SP
vincristine sulfate intravenous	1	SP
vinorelbine tartrate	1	SP
VITRAKVI	3	PA; SP
VIZIMPRO	3	PA; SP
VONJO	E	SP
VORAXAZE	3	
VOTRIENT	3	PA; SP
VYXEOS INTRAVENOUS SUSPENSION RECONSTITUTED 44- 100 MG	3	PA; SP
WELIREG	3	PA; SP
XALKORI	3	PA; SP
XELODA	3	PA; SP

Drug Name	Drug Tier	Notes
XOFIGO INTRAVENOUS SOLUTION 30 MCCI/ML	2	
XOSPATA	3	PA; SP
XPOVIO (100 MG ONCE WEEKLY) ORAL TABLET THERAPY PACK 50 MG	3	PA; SP
XPOVIO (40 MG ONCE WEEKLY) ORAL TABLET THERAPY PACK 40 MG	3	PA; SP
XPOVIO (40 MG TWICE WEEKLY) ORAL TABLET THERAPY PACK 40 MG	3	PA; SP
XPOVIO (60 MG ONCE WEEKLY) ORAL TABLET THERAPY PACK 60 MG	3	PA; SP
XPOVIO (60 MG TWICE WEEKLY)	3	PA; SP
XPOVIO (80 MG ONCE WEEKLY) ORAL TABLET THERAPY PACK 40 MG	3	PA; SP
XPOVIO (80 MG TWICE WEEKLY)	3	PA; SP
XTANDI	3	PA; SP
YERVOY	2	PA; SP
YESCARTA INTRAVENOUS SUSPENSION 200000000 CELLS	3	PA; SP
YONDELIS	3	SP
YONSA	E	SP
ZALTRAP	2	PA; SP
ZANOSAR	2	SP

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

Drug Name	Drug Tier	Notes
ZEJULA	2	PA; SP
ZELBORAF	3	PA; SP
ZEPZELCA	3	PA; SP
ZEVALIN Y-90	3	SP
ZIRABEV	2	PA; SP
ZOLINZA	2	PA; SP
ZYDELIG	3	PA; SP
ZYKADIA ORAL TABLET	3	PA; SP
ZYNLONTA	3	PA; SP
ZYTIGA	E	SP
<b>Antineoplastics - Drugs to Treat Cancer</b>		
CAMCEVI	E	SP
<b>Antiparasitics</b>		
albendazole oral	1	PA
ALINIA ORAL SUSPENSION RECONSTITUTED	2	
ALINIA ORAL TABLET	3	
ARAKODA	3	
atovaquone oral	1	
atovaquone-proguanil hcl	1	
BENZNIDAZOLE	3	
BILTRICIDE	3	
chloroquine phosphate oral	1	
COARTEM	3	
crotan	1	
DARAPRIM	3	PA; SP
EGATEN	3	
EMVERM	2	
goodsense lice killing	E	
hydroxychloroquine sulfate oral	1	
IMPAVIDO	3	
ivermectin external lotion	1	

Drug Name	Drug Tier	Notes
ivermectin oral	1	PA; QL
KRINTAFEL	3	
LAMPIT	3	
lice killing external shampoo 4-0.33 %	E	
lice treatment creme rinse	E	
lice treatment external liquid 1 %	E	
lindane external shampoo	1	
MALARONE	3	
malathion external	1	
mefloquine hcl	1	
MEPRON	3	
NATROBA	3	
NEBUPENT	3	
nitazoxanide oral	1	
OVIDE	3	
PENTAM	3	
pentamidine isethionate	1	
permethrin external cream	1	
PLAQUENIL	3	
praziquantel oral	1	
primaquine phosphate oral tablet 26.3 (15 base) mg	1	
pyrimethamine oral	1	PA; SP
PYRIMETHAMINE-LEUCOVORIN	3	
QUALAQUIN	3	PA
quinine sulfate oral	1	PA
spinosad	1	
stop lice complete treatment	E	
STROMEKTOL	3	PA; QL
sulfurated lime	1	

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

Drug Name	Drug Tier	Notes
<b>Antiparkinson Agents</b>		
amantadine hcl oral capsule	1	
amantadine hcl oral solution	1	
amantadine hcl oral tablet	1	
APOKYN SUBCUTANEOUS SOLUTION CARTRIDGE	3	PA; SP; QL
apomorphine hcl subcutaneous	1	PA; SP; QL
AZILECT	3	
benztropine mesylate oral	1	
bromocriptine mesylate oral	1	
carbidopa oral	1	
carbidopa-levodopa	1	
carbidopa-levodopa er oral tablet extended release 25-100 mg, 50-200 mg	1	
carbidopa-levodopa-entacapone oral tablet 12.5-50-200 mg, 18.75-75-200 mg, 25-100-200 mg, 31.25-125-200 mg, 37.5-150-200 mg, 50-200-200 mg	1	
COMTAN	3	
DHIVY ORAL TABLET 25-100 MG	E	
DUOPA ENTERAL	3	PA
entacapone	1	
GOCOVRI	E	
INBRIJA	3	PA; SP
KYNMOBI	3	PA; SP; QL
KYNMOBI TITRATION KIT	3	PA; SP; QL
LODOSYN	3	

Drug Name	Drug Tier	Notes
MIRAPEX ER	3	
NEUPRO	3	ST
NOURIANZ	3	PA
ONGENTYS	3	ST
OSMOLEX ER ORAL TABLET ER 24 HOUR THERAPY PACK	E	
OSMOLEX ER ORAL TABLET EXTENDED RELEASE 24 HOUR 129 MG, 193 MG	E	
PARLODEL	3	
pramipexole dihydrochloride	1	
pramipexole dihydrochloride er	1	
rasagiline mesylate oral	1	
ropinirole hcl	1	
ropinirole hcl er	1	
RYTARY	3	ST
selegiline hcl oral	1	
SINEMET ORAL TABLET 10-100 MG, 25-100 MG	3	
STALEVO 100	3	
STALEVO 125	3	
STALEVO 150	3	
STALEVO 200	3	
STALEVO 50	3	
STALEVO 75	3	
TASMAR ORAL TABLET 100 MG	3	
tolcapone	1	
trihexyphenidyl hcl	1	
XADAGO	E	
ZELAPAR	E	
<b>Antiplatelets</b>		
aspirin-dipyridamole er	1	

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

Drug Name	Drug Tier	Notes
ASPIRIN- OMEPRazole ORAL TABLET DELAYED RELEASE 81-40 MG	E	
BRILINTA	2	
CABLIVI	3	PA; SP; QL
cilostazol	1	
clopidogrel bisulfate oral	1	
dipyridamole oral	1	
DURLAZA	E	
EFFIENT	3	
PLAVIX ORAL TABLET 75 MG	3	
prasugrel hcl	1	
YOSPRALA	E	
ZONTIVITY	3	
<b>Antipsychotics - Drugs for Mood Disorders</b>		
ABILIFY MAINTENA INTRAMUSCULAR PREFILLED SYRINGE	3	
ABILIFY MAINTENA INTRAMUSCULAR SUSPENSION RECONSTITUTED ER	3	
ABILIFY MYCITE MAINTENANCE KIT	E	
ABILIFY MYCITE STARTER KIT	E	
ABILIFY ORAL TABLET	3	QL
ADASUVE	3	PA
aripiprazole	1	QL
ARISTADA	3	
ARISTADA INITIO	3	
asenapine maleate	1	QL
CAPLYTA	3	ST; QL
chlorpromazine hcl injection	1	

Drug Name	Drug Tier	Notes
chlorpromazine hcl oral	1	
clozapine	1	QL
CLOZARIL	3	QL
FANAPT	3	ST; QL
FANAPT TITRATION PACK	3	ST; QL
fluphenazine decanoate injection	1	
fluphenazine hcl injection	1	
fluphenazine hcl oral	1	
GEODON INTRAMUSCULAR	3	
GEODON ORAL	3	QL
HALDOL DECANOATE	3	
haloperidol decanoate intramuscular solution 100 mg/ml, 50 mg/ml	1	
haloperidol lactate oral	1	
haloperidol oral	1	
INVEGA	3	QL
INVEGA HAFYERA	3	ST
INVEGA SUSTENNA INTRAMUSCULAR SUSPENSION PREFILLED SYRINGE	3	
INVEGA TRINZA INTRAMUSCULAR SUSPENSION PREFILLED SYRINGE 273 MG/0.88ML, 410 MG/1.32ML, 546 MG/1.75ML, 819 MG/2.63ML	3	
LATUDA	3	QL
loxapine succinate oral	1	
molindone hcl	1	
NUPLAZID ORAL CAPSULE	3	PA
NUPLAZID ORAL TABLET 10 MG	3	PA

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

Drug Name	Drug Tier	Notes
olanzapine intramuscular	1	
olanzapine oral	1	QL
paliperidone er	1	QL
PERSERIS	3	
pimozide	1	
quetiapine fumarate	1	QL
quetiapine fumarate er	1	QL
REXULTI	3	QL
RISPERDAL CONSTA INTRAMUSCULAR SUSPENSION RECONSTITUTED ER	3	
RISPERDAL ORAL SOLUTION	E	
RISPERDAL ORAL TABLET 0.5 MG, 1 MG, 2 MG, 3 MG, 4 MG	E	
risperidone	1	QL
SAPHRIS	E	
SECUADO	E	
SEROQUEL	3	QL
SEROQUEL XR	3	QL
thioridazine hcl oral	1	
thiothixene oral	1	
trifluoperazine hcl oral	1	
VERSACLOZ	3	QL
VRAYLAR	3	QL
ziprasidone hcl	1	QL
ziprasidone mesylate	1	
ZYPREXA INTRAMUSCULAR	3	
ZYPREXA ORAL	3	QL
ZYPREXA RELPREVV	3	
ZYPREXA ZYDIS	3	QL
<b>Antivirals</b>		
abacavir sulfate	1	

Drug Name	Drug Tier	Notes
abacavir sulfate-lamivudine	1	
acyclovir external cream	E	
acyclovir external ointment	1	
acyclovir oral	1	
ACYCLOVIX	E	
adefovir dipivoxil	1	SP
APRETUDE	E	
APTIVUS ORAL CAPSULE	2	
atazanavir sulfate	1	
BARACLUDE	3	SP; QL
BIKTARVY	3	
CABENUVA	E	
cidofovir intravenous	1	
CIMDUO	2	
COMBIVIR	3	
COMPLERA	2	
DELSTRIGO	3	
DENAVIR	E	
DESCOVY	E	
DOVATO	2	
EDURANT	2	
efavirenz	1	
efavirenz-emtricitabine-tenofovir	1	
efavirenz-lamivudine-tenofovir	1	
emtricitabine	1	
emtricitabine-tenofovir df	1	
EMTRIVA ORAL CAPSULE	3	
EMTRIVA ORAL SOLUTION	2	
entecavir	1	SP; QL
EPCLUSA	2	PA; SP; QL

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

Drug Name	Drug Tier	Notes
EPIVIR	3	
EPIVIR HBV ORAL SOLUTION	2	SP
EPIVIR HBV ORAL TABLET	3	SP
EPZICOM	3	
etravirine	1	
EVOTAZ	2	
famciclovir oral	1	
FAVIPIRAVIR	3	
fosamprenavir calcium	1	
foscarnet sodium intravenous solution 6000 mg/250ml	1	
FOSCAVIR INTRAVENOUS SOLUTION 6000 MG/250ML	3	
FUZEON SUBCUTANEOUS SOLUTION RECONSTITUTED	2	
GENVOYA	3	
HARVONI	2	PA; SP; QL
HEPSERA	3	SP
INTELENCE ORAL TABLET 100 MG, 200 MG	3	
INTELENCE ORAL TABLET 25 MG	2	
INTRON A INJECTION SOLUTION RECONSTITUTED	3	PA; SP
ISENTRESS	2	
ISENTRESS HD	2	
JULUCA	2	
KALETRA ORAL SOLUTION	3	
KALETRA ORAL TABLET	3	
LAGEVRIO	3	QL

Drug Name	Drug Tier	Notes
lamivudine oral solution	1	
lamivudine oral tablet 100 mg	1	SP
lamivudine oral tablet 150 mg, 300 mg	1	
lamivudine-zidovudine	1	
LEDIPASVIR-SOFOSBUVIR	E	SP
LEXIVA ORAL SUSPENSION	2	
LEXIVA ORAL TABLET	3	
LIVTENCITY	3	PA; SP
lopinavir-ritonavir	1	
maraviroc	1	PA
MAVYRET	2	PA; SP; QL
nevirapine	1	
nevirapine er	1	
NORVIR ORAL PACKET	2	
NORVIR ORAL SOLUTION	2	
NORVIR ORAL TABLET	3	
ODEFSEY	3	
oseltamivir phosphate oral	1	QL
PAXLOVID	3	QL
PEGASYS SUBCUTANEOUS SOLUTION 180 MCG/ML	2	PA; SP
PEGASYS SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	2	PA; SP
PIFELTRO	3	
PREVYMIS	3	SP
PREZCOBIX	2	
PREZISTA ORAL SUSPENSION	2	

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

Drug Name	Drug Tier	Notes
PREZISTA ORAL TABLET 150 MG, 600 MG, 75 MG, 800 MG	2	
RAPIVAB	3	
RELENZA DISKHALER	3	QL
REMDESIVIR INTRAVENOUS SOLUTION RECONSTITUTED 100 MG	3	QL
RETROVIR INTRAVENOUS	2	
RETROVIR ORAL CAPSULE	3	
RETROVIR ORAL SYRUP	3	
REYATAZ ORAL CAPSULE 200 MG, 300 MG	3	
REYATAZ ORAL PACKET	2	
ribavirin inhalation	1	
ribavirin oral capsule	1	SP
ribavirin oral tablet 200 mg	1	SP
rimantadine hcl	1	
ritonavir	1	
RUKOBIA	2	
SELZENTRY ORAL SOLUTION	2	PA
SELZENTRY ORAL TABLET 150 MG, 300 MG	3	PA
SELZENTRY ORAL TABLET 25 MG, 75 MG	2	PA
SITAVIG	E	
SOFOSBUVIR-VELPATASVIR	E	SP
SOVALDI	3	PA; SP; QL
stavudine oral capsule	1	
STRIBILD	3	

Drug Name	Drug Tier	Notes
SUSTIVA	3	
SYMFI	2	
SYMFI LO	2	
SYMTUZA	3	
TAMIFLU ORAL CAPSULE	E	
TAMIFLU ORAL SUSPENSION RECONSTITUTED 6 MG/ML	E	
tenofovir disoproxil fumarate	1	
TIVICAY	2	
TIVICAY PD	2	
TRIUMEQ	2	
TRIUMEQ PD	E	
TRIZIVIR	3	
TROGARZO	3	PA
TRUVADA	E	
TYBOST	2	
valacyclovir hcl oral	1	QL
VALCYTE	3	
valganciclovir hcl	1	
VALTREX	3	QL
VEKLURY	3	QL
VEMLIDY	E	SP
VIEKIRA PAK	3	PA; SP; QL
VIRACEPT ORAL TABLET	2	
VIRAZOLE	3	
VIREAD ORAL POWDER	2	
VIREAD ORAL TABLET 150 MG, 200 MG, 250 MG	2	
VIREAD ORAL TABLET 300 MG	3	
VOCABRIA	E	
VOSEVI	2	PA; SP; QL

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



Drug Name	Drug Tier	Notes
XERESE	E	
XOFLUZA (40 MG DOSE)	3	QL
XOFLUZA (80 MG DOSE)	3	QL
ZEPATIER	3	PA; SP; QL
ZIAGEN	3	
zidovudine	1	
ZOVIRAX EXTERNAL	E	
ZOVIRAX ORAL SUSPENSION	E	
<b>Anxiolytics - Drugs for Anxiety</b>		
alprazolam er	1	QL
alprazolam intensol	1	QL
alprazolam oral tablet	1	QL
alprazolam oral tablet dispersible	E	
alprazolam xr	1	QL
ATIVAN INJECTION	3	
ATIVAN ORAL	E	
bupirone hcl oral	1	
chlordiazepoxide hcl	1	QL
clonazepam oral	1	QL
clorazepate dipotassium	1	QL
diazepam intensol	1	
diazepam oral concentrate	1	
diazepam oral solution 5 mg/5ml	1	
diazepam oral tablet	1	
DORAL	3	QL
estazolam	1	QL
HALCION	3	QL
hydroxyzine hcl oral syrup	1	
hydroxyzine hcl oral tablet	1	

Drug Name	Drug Tier	Notes
hydroxyzine pamoate oral	1	
KLONOPIN	3	QL
lorazepam injection	1	
lorazepam intensol	1	QL
lorazepam oral concentrate 2 mg/ml	1	QL
lorazepam oral tablet	1	QL
LOREEV XR	E	
meprobamate	1	
midazolam hcl oral	E	
MIDAZOLAM HCL-SODIUM CHLORIDE INTRAVENOUS SOLUTION 100-0.8 MG/100ML-%, 50-0.8 MG/50ML-%, 50-0.9 MG/50ML-%	E	
MIDAZOLAM HCL-SODIUM CHLORIDE SOLUTION 100-0.9 MG/100ML-% INTRAVENOUS	E	
MIDAZOLAM+SYRSP END SF	E	
oxazepam	1	QL
quazepam	1	QL
TRANXENE-T ORAL TABLET 7.5 MG	3	QL
triazolam	1	QL
VALIUM	E	
VISTARIL	3	
XANAX	E	
XANAX XR	E	
<b>Bipolar Agents - Drugs for Mood Disorders</b>		
EQUETRO	3	
lithium carbonate er	1	
lithium carbonate oral	1	
LITHOBID	3	

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

Drug Name	Drug Tier	Notes
<b>Blood Products and Modifiers - Drugs for Blood Disorders</b>		
ADVATE	2	SP
ADYNOVATE	3	SP
AFSTYLA	3	SP
AGRYLIN	3	
ALPHANATE INTRAVENOUS SOLUTION RECONSTITUTED 1000 UNIT, 1500 UNIT, 2000 UNIT, 250 UNIT, 500 UNIT	2	SP
ALPHANINE SD	2	SP
ALPROLIX	3	SP
AMICAR ORAL SOLUTION	3	
AMICAR ORAL TABLET	3	
aminocaproic acid oral solution	1	
aminocaproic acid oral tablet	1	
anagrelide hcl	1	
ARANESP (ALBUMIN FREE) INJECTION SOLUTION 100 MCG/ML, 200 MCG/ML, 25 MCG/ML, 40 MCG/ML, 60 MCG/ML	2	PA; SP
ARANESP (ALBUMIN FREE) INJECTION SOLUTION PREFILLED SYRINGE	2	PA; SP
ASTRINGYN SOLUTION 259 MG/GM EXTERNAL	3	
ASTRINGYN SOLUTION 259 MG/GM EXTERNAL	E	

Drug Name	Drug Tier	Notes
BENEFIX INTRAVENOUS KIT	2	SP
CEPROTIN	3	SP
COAGADDEX	3	SP
CORIFACT	2	SP
CYKLOKAPRON INTRAVENOUS SOLUTION 1000 MG/10ML	3	
DOPTELET ORAL TABLET 20 MG	3	PA; SP
ELOCTATE	3	SP
EMPAVELI	3	PA; SP
ENJAYMO	3	PA; SP
EPOGEN INJECTION SOLUTION 10000 UNIT/ML, 2000 UNIT/ML, 20000 UNIT/ML, 3000 UNIT/ML, 4000 UNIT/ML	E	SP
ESPEROCT	E	SP
FEIBA INTRAVENOUS SOLUTION RECONSTITUTED 1000 UNIT, 2500 UNIT, 500 UNIT	2	SP
FIBRYGA	2	SP
FULPHILA	E	SP
GRANIX	E	SP
HEMLIBRA	3	SP
HEMOFIL M INTRAVENOUS SOLUTION RECONSTITUTED 1000 UNIT, 1700 UNIT, 250 UNIT, 500 UNIT	3	SP

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

Drug Name	Drug Tier	Notes
HUMATE-P INTRAVENOUS SOLUTION RECONSTITUTED 1000-2400 UNIT, 250- 600 UNIT, 500-1200 UNIT	2	SP
IDELVION	3	SP
IXINITY	3	SP
JIVI	3	SP
KOATE	2	SP
KOATE-DVI INTRAVENOUS SOLUTION RECONSTITUTED 1000 UNIT, 500 UNIT	2	SP
KOGENATE FS	3	SP
KOVALTRY	3	SP
LEUKINE INJECTION SOLUTION RECONSTITUTED	3	PA; SP
LYSTEDA	3	
MIRCERA INJECTION SOLUTION PREFILLED SYRINGE	3	PA; SP
MONSELS FERRIC SUBSULFATE EXTERNAL	E	
MOZOBIL	2	PA; SP; QL
MULPLETA	2	PA; SP
NEULASTA ONPRO	3	PA; SP
NEULASTA SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	3	PA; SP
NEUPOGEN INJECTION SOLUTION 300 MCG/ML, 480 MCG/1.6ML	E	SP

Drug Name	Drug Tier	Notes
NEUPOGEN INJECTION SOLUTION PREFILLED SYRINGE	E	SP
NIVESTYM	2	PA; SP
NOVOEIGHT	2	SP
NOVOSEVEN RT	3	SP
NPLATE	3	PA; SP
NUWIQ	2	SP
NYVEPRIA	E	SP
OBIZUR	3	SP
PANHEMATIN INTRAVENOUS SOLUTION RECONSTITUTED 350 MG	3	SP
PROCRIT	2	PA; SP
PROFILNINE	2	SP
PROMACTA	3	PA; SP
PYRUKYND	3	PA; SP; QL
PYRUKYND TAPER PACK	3	PA; SP; QL
REBINYN	3	SP
REBLOZYL	3	PA; SP
RECOMBINATE	2	SP
RECOTHROM	3	
RECOTHROM SPRAY KIT	3	
RELEUKO	E	SP
RETACRIT INJECTION SOLUTION 10000 UNIT/ML, 2000 UNIT/ML, 20000 UNIT/ML, 3000 UNIT/ML, 4000 UNIT/ML, 40000 UNIT/ML	2	PA; SP
RIASTAP	2	SP
RIXUBIS	3	SP
SEVENFACT	E	SP

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

Drug Name	Drug Tier	Notes
SOLIRIS INTRAVENOUS SOLUTION 300 MG/30ML	3	PA; SP
TAVALISSE	3	PA; SP
THROMBIN-JMI EPISTAXIS	3	
THROMBIN-JMI EXTERNAL KIT	3	
THROMBOGEN	3	
tranexamic acid intravenous solution 1000 mg/10ml	1	
tranexamic acid oral	1	
TRANEXAMIC ACID- NACL	3	
TRETTEN	3	SP
UDENYCA	E	SP
ULTOMIRIS INTRAVENOUS SOLUTION 1100 MG/11ML, 300 MG/3ML	3	PA; SP
VONVENDI	3	SP
WILATE INTRAVENOUS KIT	2	SP
XYNTHA INTRAVENOUS KIT 1000 UNIT, 2000 UNIT, 250 UNIT, 500 UNIT	2	SP
XYNTHA SOLOFUSE	2	SP
ZARXIO	2	PA; SP
ZIEXTENZO	3	PA; SP
<b>Cardiovascular Agents - Drugs for Heart and Circulation Conditions</b>		
ACCUPRIL	3	
ACCURETIC	3	
acebutolol hcl oral	1	

Drug Name	Drug Tier	Notes
AKOVAZ INTRAVENOUS SOLUTION	3	
ALDACTAZIDE	3	
ALDACTONE	3	
aliskiren fumarate	1	
ALTACE ORAL CAPSULE	E	
ALTOPREV	E	
amiloride hcl oral	1	
amiloride- hydrochlorothiazide	1	
amiodarone hcl oral	1	
AMLODIPINE BES+SYRSPEND SF	E	
amlodipine besylate oral	1	
amlodipine besylate- benazepril hcl	1	
amlodipine besylate- valsartan	1	
amlodipine-atorvastatin	1	
amlodipine-olmesartan	1	
ANTARA ORAL CAPSULE 30 MG, 90 MG	E	
ATACAND	E	
ATACAND HCT	3	
atenolol oral	1	
ATENOLOL+SYRSPE ND SF	E	
atenolol-chlorthalidone	1	
atorvastatin calcium oral	1	
AVALIDE ORAL TABLET 150-12.5 MG, 300-12.5 MG	3	
AVAPRO	3	
AZOR	E	
benazepril hcl oral	1	

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

Drug Name	Drug Tier	Notes
benazepril-hydrochlorothiazide	1	
BENICAR	E	
BENICAR HCT	E	
BETAPACE AF	3	
BETAPACE ORAL TABLET 120 MG, 160 MG, 80 MG	3	
betaxolol hcl oral	1	
BIDIL	3	
bisoprolol fumarate oral	1	
bisoprolol-hydrochlorothiazide	1	
bumetanide oral	1	
BUMEX ORAL TABLET 0.5 MG	3	
BYSTOLIC	E	
CADUET ORAL TABLET 10-10 MG, 10-20 MG, 10-40 MG, 10-80 MG, 5-10 MG, 5-20 MG, 5-40 MG, 5-80 MG	3	
CALAN SR	3	
CAMZYOS	E	SP
candesartan cilexetil	1	
candesartan cilexetil-hctz	1	
captopril oral	1	
CARDIZEM CD	3	
CARDIZEM LA	E	
CARDIZEM ORAL TABLET 120 MG, 30 MG, 60 MG	3	
CARDURA	3	
CAROSPIR	3	
cartia xt	1	
carvedilol	1	
carvedilol phosphate er	E	
CATAPRES-TTS-1	3	
CATAPRES-TTS-2	3	

Drug Name	Drug Tier	Notes
CATAPRES-TTS-3	3	
chlorthalidone oral tablet 25 mg, 50 mg	1	
cholestyramine light	1	
cholestyramine oral	1	
clonidine	1	
clonidine hcl oral	1	
colesevelam hcl oral packet	E	
colesevelam hcl oral tablet	1	
COLESTID	E	
COLESTID FLAVORED	E	
colestipol hcl	1	
CONJUPRI	E	
CONSENSI	E	
COREG	3	
COREG CR	E	
CORGARD	3	
CORLANOR	3	PA; QL
COZAAR	3	
CRESTOR	E	
DEMSER	3	PA; QL
DIBENZYLINE	3	PA
digitek	1	
digox	1	
digoxin oral	1	
diltiazem hcl er beads	1	
diltiazem hcl er coated beads	1	
diltiazem hcl er oral capsule extended release 12 hour	1	
diltiazem hcl er oral capsule extended release 24 hour 120 mg, 180 mg, 240 mg	1	
diltiazem hcl oral	1	

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

Drug Name	Drug Tier	Notes
DILTIAZEM HCL- DEXTROSE SOLUTION 125-5 MG/125ML-% INTRAVENOUS	E	
DILTIAZEM HCL- DEXTROSE SOLUTION 125-5 MG/125ML-% INTRAVENOUS	3	
dilt-xr	1	
DIOVAN	E	
DIOVAN HCT	E	
disopyramide phosphate oral	1	
DIURIL	3	
dofetilide	1	
doxazosin mesylate oral	1	
droxidopa	1	PA; SP
DUTOPROL ORAL TABLET EXTENDED RELEASE 24 HOUR 50-12.5 MG	E	
DYRENIUM	3	
EDARBI	3	ST
EDARBYCLOR	3	ST
EDECIN	3	
enalapril maleate oral solution	E	
enalapril maleate oral tablet	1	
enalapril- hydrochlorothiazide	1	
ENTRESTO	2	QL
EPANED ORAL SOLUTION	E	
ephedrine sulfate intravenous solution 50 mg/ml	1	

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

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

Drug Name	Drug Tier	Notes
FENOFIBRATE MICRONIZED ORAL CAPSULE 30 MG, 90 MG	E	
fenofibrate oral capsule 134 mg, 200 mg, 67 mg	1	
fenofibrate oral capsule 150 mg, 50 mg	E	
fenofibrate oral tablet 120 mg, 40 mg	E	
fenofibrate oral tablet 145 mg, 160 mg, 48 mg, 54 mg	1	
fenofibric acid oral capsule delayed release	1	
fenofibric acid oral tablet	E	
FENOGLIDE	3	ST
FIBRICOR	E	
flecainide acetate	1	
FLOLIPID	E	
fluvastatin sodium	E	
fluvastatin sodium er	E	
fosinopril sodium	1	
fosinopril sodium-hctz	1	
furosemide oral solution 10 mg/ml, 8 mg/ml	1	
furosemide oral tablet	1	
gemfibrozil oral	1	
GONITRO	3	
guanfacine hcl oral	1	
HEMANGEOL	3	
hydralazine hcl oral	1	
hydrochlorothiazide oral	1	
HYZAAR	3	
icosapent ethyl	1	PA
indapamide oral	1	

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

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

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

Drug Name	Drug Tier	Notes
MULTAQ	3	
nadolol oral tablet 20 mg, 40 mg, 80 mg	1	
nebivolol hcl	1	
NEXICLON XR ORAL TABLET EXTENDED RELEASE 24 HOUR	E	
NEXLETOL	2	PA; QL
NEXLIZET	2	PA; QL
niacin (antihyperlipidemic)	E	
niacin er (antihyperlipidemic)	1	
niacor	E	
NIASPAN	3	
nicardipine hcl oral	1	
nifedipine er	1	
nifedipine er osmotic release	1	
nifedipine oral	1	
nimodipine oral	1	
nisoldipine er	1	
NITRO-BID	3	
NITRO-DUR	E	
nitroglycerin sublingual	1	
nitroglycerin transdermal patch 24 hour	1	
nitroglycerin translingual solution	1	
NITROLINGUAL	3	
NITROMIST	3	
NITROSTAT	E	
NITRO-TIME	E	
NORLIQVA	E	
NORPACE	3	
NORPACE CR	2	
NORTHERA	3	PA; SP
NORVASC	E	

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



Drug Name	Drug Tier	Notes
NYMALIZE ORAL SOLUTION 6 MG/ML	3	
olmesartan medoxomil oral	1	
olmesartan medoxomil-hctz	1	
olmesartan-amlodipine-hctz	1	
OMEGA-3 RX COMPLETE	E	
omega-3-acid ethyl esters	1	
PACERONE ORAL TABLET 100 MG, 200 MG, 400 MG	3	
papaverine hcl injection	E	
pentoxifylline er	1	
perindopril erbumine	1	
phenoxybenzamine hcl oral	1	PA
phentolamine mesylate injection solution reconstituted	1	
PHENYLEPHRINE HCL-NACL INTRAVENOUS SOLUTION PREFILLED SYRINGE 1-0.9 MG/10ML-%, 100-0.9 MCG/10ML-%, 20-0.9 MG/50ML-%, 5-0.9 MG/50ML-%	3	
pindolol	1	
PRALUENT SUBCUTANEOUS SOLUTION AUTO-INJECTOR	E	
pravastatin sodium	1	
prazosin hcl oral	1	
PRESTALIA	3	
prevalite	1	
procainamide hcl injection	1	

Drug Name	Drug Tier	Notes
PROCARDIA XL	3	
propafenone hcl	1	
propafenone hcl er	1	
propranolol hcl er	1	
propranolol hcl oral	1	
QBRELIS	E	
QUESTRAN	E	
QUESTRAN LIGHT ORAL POWDER	E	
quinapril hcl	1	
quinapril-hydrochlorothiazide	1	
quinidine gluconate er	1	
quinidine sulfate oral	1	
ramipril	1	
RANEXA	3	
ranolazine er	1	
RECTIV	3	
REPATHA	2	PA; QL
REPATHA PUSHTRONEX SYSTEM	2	PA; QL
REPATHA SURECLICK	2	PA; QL
rosuvastatin calcium	1	
ROSZET	E	
RYTHMOL SR	3	
simvastatin oral tablet	1	
SOAANZ	E	
sotalol hcl (af)	1	
sotalol hcl oral	1	
SOTYLIZE	3	
spironolactone oral	1	
spironolactone-hctz	1	
SULAR ORAL TABLET EXTENDED RELEASE 24 HOUR 17 MG, 34 MG, 8.5 MG	3	

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

Drug Name	Drug Tier	Notes
SURE RESULT O3D3 SYSTEM	E	
taztia xt	1	
TEKTURNA	2	
TEKTURNA HCT	2	ST
telmisartan	1	
telmisartan-amlodipine	1	
telmisartan-hctz	1	
TENORETIC 100	3	
TENORETIC 50	3	
TENORMIN	E	
THALITONE	3	
tiadylt er	1	
TIAZAC	3	
TIKOSYN	E	
timolol maleate oral	1	
TOPROL XL	E	
toremide oral	1	
trandolapril	1	
trandolapril-verapamil hcl er	1	
triamterene oral	1	
triamterene-hctz oral capsule 37.5-25 mg	1	
triamterene-hctz oral tablet	1	
TRIBENZOR	E	
TRICOR	3	
TRILIPIX	3	
VALSARTAN ORAL SOLUTION	E	
valsartan oral tablet	1	
valsartan-hydrochlorothiazide	1	
VASCEPA	2	PA
VASERETIC	3	
VASOTEC	3	
VECAMYL	3	

Drug Name	Drug Tier	Notes
verapamil hcl er oral capsule extended release 24 hour	1	
verapamil hcl er oral tablet extended release 120 mg, 180 mg, 240 mg	1	
verapamil hcl oral	1	
VERELAN	3	
VERELAN PM	3	
VERQUVO	3	PA; QL
VYNDAMAX	3	PA; SP; QL
VYNDAQEL	3	PA; SP; QL
VYTORIN	E	
WELCHOL ORAL PACKET	E	
WELCHOL ORAL TABLET	3	
ZESTORETIC	3	
ZESTRIL ORAL TABLET 10 MG, 20 MG, 5 MG	3	
ZESTRIL ORAL TABLET 2.5 MG, 30 MG, 40 MG	E	
ZETIA	E	
ZIAC	3	
ZOCOR ORAL TABLET 10 MG, 20 MG, 40 MG	3	
ZYPITAMAG ORAL TABLET 2 MG, 4 MG	E	
<b>Central Nervous System Agents - Drugs for Attention Deficit Disorder</b>		
ADDERALL	E	
ADDERALL XR	1	QL
ADHANSIA XR	E	
ADZENYS XR-ODT	3	QL
amphetamine sulfate	1	QL

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

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

Drug Name	Drug Tier	Notes
methylphenidate hcl er (la)	1	QL
methylphenidate hcl er (xr)	1	QL
methylphenidate hcl oral	1	QL
MYDAYIS	3	QL
PROCENTRA	3	QL
QELBREE	E	
QUILLICHEW ER	3	QL
QUILLIVANT XR ORAL SUSPENSION RECONSTITUTED ER	3	QL
relexxii	1	QL
RITALIN	E	
RITALIN LA ORAL CAPSULE EXTENDED RELEASE 24 HOUR 10 MG, 20 MG, 30 MG, 40 MG	E	
STRATTERA	3	QL
VYVANSE	2	QL
ZENZEDI	3	QL
<b>Central Nervous System Agents - Drugs for Multiple Sclerosis</b>		
AMPYRA	3	PA; SP; QL
AUBAGIO	3	PA; SP; QL
AVONEX PEN INTRAMUSCULAR AUTO-INJECTOR KIT	2	PA; SP; QL
AVONEX PREFILLED INTRAMUSCULAR PREFILLED SYRINGE KIT	2	PA; SP; QL
BAFIERTAM	2	PA; SP; QL
BETASERON SUBCUTANEOUS KIT	2	PA; SP; QL

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

Drug Name	Drug Tier	Notes
COPAXONE SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	2	PA; SP; QL
dalfampridine er	1	PA; SP; QL
dimethyl fumarate oral	1	PA; SP; QL
dimethyl fumarate starter pack	1	PA; SP; QL
EXTAVIA SUBCUTANEOUS KIT	E	SP
GILENYA	3	PA; SP; QL
glatiramer acetate	1	PA; SP; QL
glatopa	1	PA; SP; QL
KESIMPTA	2	PA; SP; QL
LEMTRADA	3	PA; SP
MAVENCLAD	3	PA; SP
MAYZENT	3	PA; SP; QL
MAYZENT STARTER PACK	3	PA; SP; QL
OCREVUS	3	PA; SP; QL
PLEGRIDY	E	SP
PLEGRIDY STARTER PACK	E	SP
PONVORY	E	SP
PONVORY STARTER PACK	E	SP
REBIF REBIDOSE SUBCUTANEOUS SOLUTION AUTO-INJECTOR	E	SP
REBIF REBIDOSE TITRATION PACK SUBCUTANEOUS SOLUTION AUTO-INJECTOR	E	SP
REBIF SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	E	SP

Drug Name	Drug Tier	Notes
REBIF TITRATION PACK SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	E	SP
TECFIDERA	E	SP
TYSABRI	3	PA; SP; QL
VUMERITY	2	PA; SP; QL
ZEPOSIA	3	PA; SP; QL
ZEPOSIA 7-DAY STARTER PACK	3	PA; SP; QL
ZEPOSIA STARTER KIT	3	PA; SP; QL
<b>Central Nervous System Agents - Miscellaneous</b>		
ADDYI	3	PA; QL
ADIPEX-P	E	
AUSTEDO	3	PA; SP; QL
benzphetamine hcl	E	
caffeine citrate oral	1	
CONTRAVE	E	
CONVENIENCE PAK	E	
diethylpropion hcl er	E	
diethylpropion hcl oral	E	
EXSERVAN	E	
GRALISE	3	ST; QL
HORIZANT ORAL TABLET EXTENDED RELEASE	3	PA; QL
IMCIVREE	E	SP
INGREZZA	3	PA; SP; QL
LOMAIRA	E	
LYRICA CR	E	
LYRICA ORAL CAPSULE	2	QL
LYRICA ORAL SOLUTION	3	QL
NEURAPTINE	E	
NUEDEXTA	3	PA

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

Drug Name	Drug Tier	Notes
ONPATTRO	3	PA; SP
phendimetrazine tartrate	E	
phendimetrazine tartrate er	E	
phentermine hcl oral	E	
pregabalin er	1	ST; QL
pregabalin oral	1	QL
QSYMIA	E	
RADICAVA	3	PA; SP
RADICAVA ORS	E	SP
RADICAVA ORS STARTER KIT	E	SP
RILUTEK	3	PA; QL
riluzole	1	PA; QL
SAVELLA	3	ST; QL
SAVELLA TITRATION PACK	3	ST; QL
SAXENDA	E	
SUCCINYLCHOLINE CHLORIDE INTRAVENOUS SOLUTION PREFILLED SYRINGE 140 MG/7ML	3	
TEGSEDI	3	PA; SP
tetrabenazine	1	PA; SP
TIGLUTIK	3	PA; QL
VECURONIUM BROMIDE INTRAVENOUS SOLUTION PREFILLED SYRINGE	3	
VYLEESI	3	PA; QL
WEGOVIY	E	
XENAZINE	3	PA; SP
XENICAL	E	

Drug Name	Drug Tier	Notes
<b>Dental and Oral Agents - Drugs for Mouth and Throat Conditions</b>		
ARESTIN	E	
cavarest	E	
cevimeline hcl	1	
chlorhexidine gluconate mouth/throat	E	
CLINPRO 5000	E	
DEBACTEROL SOLUTION 30-50 % MOUTH/THROAT	E	
DENTA 5000 PLUS	E	
DENTAGEL	E	
DERMACINRX CLORHEXACIN	E	
easygel dental	E	
EVOXAC	3	
FIRST-MOUTHWASH BLM	E	
FLUORIDEX	E	
fluoridex daily renewal	E	
FLUORIDEX ENHANCED WHITENING DENTAL PASTE	E	
FLUORIDEX SENSITIVITY RELIEF DENTAL PASTE	E	
FLUORIMAX 5000	E	
FLUORIMAX 5000 SENSITIVE	E	
HURRICAIN MOUTH/THROAT GEL	E	
instant oral pain relief max	E	
JUST RIGHT 5000	E	
KEPIVANCE	2	SP
lidocaine hcl mouth/throat	E	

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

Drug Name	Drug Tier	Notes
lidocaine viscous hcl	1	
LOLLICAINE	E	
MOUTH KOTE REMINT	E	
MUCOSITISRX	E	
NAFRINSE DAILY ACIDULATED	E	
NAFRINSE DAILY/NEUTRAL	E	
NAFRINSE WEEKLY	E	
NUSURGEPAK SURGICAL PREP/CARE	E	
oralone	1	
PERIDEX	E	
periogard	E	
pilocarpine hcl oral	1	
PREVIDENT	E	
PREVIDENT 5000 BOOSTER PLUS	E	
PREVIDENT 5000 DRY MOUTH DENTAL GEL	E	
PREVIDENT 5000 ENAMEL PROTECT DENTAL GEL	E	
PREVIDENT 5000 ORTHO DEFENSE	E	
PREVIDENT 5000 PLUS	E	
PREVIDENT 5000 SENSITIVE DENTAL GEL	E	
SALAGEN	3	
SALIVAMAX	E	
sf	E	
sf 5000 plus	E	
sodium fluoride 5000 enamel dental gel	E	
sodium fluoride 5000 plus	E	

Drug Name	Drug Tier	Notes
sodium fluoride 5000 ppm	E	
sodium fluoride 5000 sensitive dental gel	E	
sodium fluoride dental cream	E	
sodium fluoride dental gel 1.1 %	E	
sodium fluoride mouth/throat	E	
triamcinolone acetonide mouth/throat	1	
XEROSTOMIA RELIEF SPRAY	E	
<b>Dermatological Agents - Drugs for Skin Conditions</b>		
A.A.G.C. KIT IN TERODERM	E	
ABREVA	E	
ABSORICA	E	
ABSORICA LD	3	PA
ACANYA	E	
accutane	1	PA
ACESO AG	E	
ACIOXIAY	E	
acitretin	1	
ACNESIC	E	
ACZONE EXTERNAL GEL 5 %	E	
ACZONE EXTERNAL GEL 7.5 %	2	
ADAINZDE	E	
ADAINZOXIA	E	
adapalene external cream	1	PA
adapalene external gel	1	PA
ADAPALENE EXTERNAL PAD	E	

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

Drug Name	Drug Tier	Notes
ADAPALENE EXTERNAL SOLUTION	E	
adapalene-benzoyl peroxide external gel	1	
ADAPALENE-BENZOYL PEROXIDE EXTERNAL PAD	E	
ADBRY	E	SP
ADVANCED ALLERGY COLLECTION	E	
AKLIEF	E	
ALA SCALP	E	
ala-cort external cream	1	
ALADERM PLUS	E	
alclometasone dipropionate	1	
ALCOHOL PREP PADS EXTERNAL 70 %	E	
ALEVAMAX	E	
ALTRENO	3	PA
amcinonide external cream	E	
amcinonide external lotion	1	
amcinonide external ointment	E	
AMELUZ	E	
ammonium lactate external	1	
amnesteam	1	PA
AMZEEQ	3	
ANACAINE	E	
APEXICON E	E	
AQUA-NU	E	
AQUAPHILIC	E	
AQUAPHOR ADV PROTECT HEALING	E	
AQUAPHOR ADV THERAPY HEALING	E	

Drug Name	Drug Tier	Notes
AQUAPHOR ADVANCED THERAPY BABY	E	
ARAZLO	E	
ARIDA	E	
ARZOL SILVER NIT APPLICATORS	E	
ATOPADERM	E	
ATOPICLAIR	E	
ATRALIN	3	PA
AVAR CLEANSER EXTERNAL LIQUID	E	
AVAR LS CLEANSER	E	
AVAR-E EMOLLIENT	E	
AVAR-E GREEN	E	
AVAR-E LS	E	
AVEIDAOXIA	E	
AVITA	E	
AZADROX	E	
azelaic acid external	1	
AZELEX	3	
B & C	3	
balsam peru-castor oil	1	
BEAU RX	E	
BENSAL HP EXTERNAL OINTMENT 3 %	E	
BENZAC AC WASH EXTERNAL LIQUID	E	
BENZAMYCIN	E	
BENZEPRO CREAMY WASH	E	
BENZEPRO EXTERNAL	E	
BENZEPRO EXTERNAL FOAM 5.2 %, 9.7 %	E	
benzeapro external foam 5.3 %	E	

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

Drug Name	Drug Tier	Notes
BENZEPRO EXTERNAL LIQUID	E	
BENZEPRO FOAMING CLOTHS	E	
benzoin compound	E	
benzoin external tincture	E	
BENZOYL PEROX-HYDROCORTISONE	E	
benzoyl peroxide external foam 9.8 %	E	
BENZOYL PEROXIDE EXTERNAL GEL 6.5 %, 8 %	E	
BENZOYL PEROXIDE FORTE- HC	E	
benzoyl peroxide-erythromycin	1	
betamethasone dipropionate aug	1	
betamethasone dipropionate external	1	
betamethasone valerate external	1	
BIAFINE	E	
BIONECT EXTERNAL CREAM	E	
blanche	E	
BOTOX COSMETIC	E	SP
boudreauxs butt paste external ointment 40 %	E	
bp 10-1	E	
bp cleansing wash	E	
bp wash external liquid 2.5 %	E	
BPCO	3	
BRYHALI	E	
calamine external lotion 8-8 %	E	
calcipotriene external cream	1	QL

Drug Name	Drug Tier	Notes
CALCIPOTRIENE EXTERNAL FOAM	E	
calcipotriene external ointment	1	
calcipotriene external solution	1	
calcipotriene-betameth diprop external ointment	E	
calcipotriene-betameth diprop external suspension	1	QL
CALCITRENE	3	
calcitriol external	1	
CANTHARIDIN EXTERNAL	E	
CAPEX	E	
capsaicin external cream 0.025 %, 0.075 %	E	
capsaicin pain relief	E	
capzix	E	
CARAC	3	
CEM-UREA	E	
CERACADE	E	
cerovel external lotion	E	
CHLOOXIA	E	
CIBINQO	E	SP
claravis	1	PA
CLENIA PLUS	E	
CLEOCIN-T EXTERNAL LOTION	3	
CLINDACIN ETZ EXTERNAL KIT	E	
clindacin etz external swab	1	
CLINDACIN PAC	E	
clindacin-p	1	
CLINDAGEL	E	

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



Drug Name	Drug Tier	Notes
clindamycin phos- benzoyl perox external gel 1-5 %, 1.2-2.5 %, 1.2-5 %	1	
clindamycin phosphate external foam	1	
clindamycin phosphate external lotion	1	
clindamycin phosphate external solution	1	
clindamycin phosphate external swab	1	
clindamycin phosphate gel 1 % external	E	
clindamycin phosphate gel 1 % external	1	
clindamycin-tretinoin	1	
CLINDAVIX	E	
CLINOIN	E	
clobetasol prop emollient base	1	
clobetasol propionate e	1	
clobetasol propionate emulsion	1	
clobetasol propionate external	1	
CLOBETAVIX	E	
CLOBEX	3	
CLOBEX SPRAY	3	
clocortolone pivalate	E	
CLODAN EXTERNAL KIT	E	
clodan external shampoo	1	
CLODERM	E	
coal tar external solution	1	
COLLANEX	E	
CONDYLOX EXTERNAL GEL	3	
COPADERM	E	

Drug Name	Drug Tier	Notes
COPASIL EXTERNAL	E	
CORDRAN EXTERNAL CREAM 0.025 %	E	
CORDRAN EXTERNAL CREAM 0.05 %	3	
CORDRAN EXTERNAL LOTION	3	
CORDRAN EXTERNAL OINTMENT	3	
CORDRAN EXTERNAL TAPE	E	
corn & callus remover	E	
CORTANE-B EXTERNAL	E	
dapsone external gel 5 %	E	
dapsone gel 7.5 % external	1	
DELUO	E	
DEOXIA	E	
DERMACINRX ATRIX ANTIBAC WASH	E	
DERMACINRX ATRIX CLARIFY TONER	E	
DERMACINRX PENETRAL	E	
DERMACINRX SURGICAL COMBOPAK	E	
DERMACINRX UREA	3	
DERMA-SMOOTH/FS BODY	3	
DERMA-SMOOTH/FS SCALP	3	
DERMELEVE ADVANCED FORMULA	E	
DERMELLE	E	
DERPIXA	E	

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

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

Drug Name	Drug Tier	Notes
DIFFERIN EXTERNAL LOTION	E	
diflorasone diacetate external	E	
DIMOXIA	E	
DIOCHLOY	E	
DIPROLENE EXTERNAL OINTMENT	3	
docosanol external	E	
DOVONEX EXTERNAL CREAM	3	
doxepin hcl external	E	
doxycycline	E	
DR SMITHS ADULT BARRIER EXTERNAL OINTMENT	E	
DR SMITHS DIAPER QUICK RELIEF	E	
DRAXACE	E	
DRAXACE LOTION CLEANSER	E	
DRIXECE	E	
DRYSOL	3	
DUOBRII	E	
DUPIXENT	2	PA; SP; QL
ECEOXIA	E	
EFUDEX EXTERNAL CREAM	3	
ELETONE	E	
ELIDEL	3	
EMULSION SB	E	
ENOVARX-TRAMADOL	E	
ENSTILAR	E	
ENTTY SPRAY	E	
ENZOCLEAR	E	
EPICERAM	E	
EPIDUO	3	
EPIDUO FORTE	3	

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

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

Drug Name	Drug Tier	Notes
FLUOROURACIL EXTERNAL CREAM 0.5 %	2	
fluorouracil external cream 5 %	1	
fluorouracil external solution	1	
FLUOVIX	E	
FLUOVIX PLUS	E	
flurandrenolide	E	
fluticasone propionate external	1	
FORAXA	E	
FORDAGEL	E	
GEAMETDRAY	E	
GENADUR	E	
GORDOFILM	3	
GUANENDRUX	E	
halcinonide	E	
halobetasol propionate external cream	1	
HALOBETASOL PROPIONATE EXTERNAL FOAM	E	
halobetasol propionate external ointment	1	
HALOG	E	
HALUCORT	E	
HAPRODERM	E	
HAXCHLO	E	
HPR PLUS	E	
HPR PLUS HYDROGEL	E	
HYDRO 40	E	
hydrocortisone acepramoxine external cream 2.5-1 %	E	
hydrocortisone acetate external cream	E	

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

Drug Name	Drug Tier	Notes
hydrocortisone acetate external ointment 1 %	E	
hydrocortisone butyr lipo base	E	
hydrocortisone butyrate external cream	1	
hydrocortisone butyrate external lotion	E	
hydrocortisone butyrate external ointment	1	
hydrocortisone butyrate external solution	1	
hydrocortisone external cream 1 %, 2.5 %	1	
hydrocortisone external lotion 2.5 %	1	
hydrocortisone external ointment 1 %, 2.5 %	1	
hydrocortisone valerate	1	
hydroquinone external cream	E	
HYLATOPIC PLUS EXTERNAL CREAM	E	
HYLATOPIC PLUS EXTERNAL LOTION	E	
imiquimod external cream 3.75 %	1	ST
imiquimod external cream 5 %	1	
imiquimod pump	1	ST
IMPEKLO	E	
IMPOYZ	E	
INOVA	E	
INOVA 4/1 ACNE CONTROL THERAPY	E	
INOVA 8/2 ACNE CONTROL THERAPY	E	
isotretinoin oral capsule 10 mg, 20 mg, 30 mg, 40 mg	1	PA
isotretinoin oral capsule 25 mg, 35 mg	E	

Drug Name	Drug Tier	Notes
ITHOXIA	E	
ivermectin external cream	1	
JUVAZIN	E	
KAMDOY	E	
KATARYA	E	
KATARYAXN	E	
KAXM	E	
KEIDO	E	
KELARX	E	
KENALOG EXTERNAL	E	
KERAGEL	E	
KERALYT EXTERNAL GEL 6 %	E	
KERALYT EXTERNAL SHAMPOO	3	
KERALYT SCALP	E	
KERAMATRIX REPLICINE 2CMX3CM	E	
KERAMATRIX REPLICINE 5CMX5CM EXTERNAL SHEET	E	
KETARYA	E	
KEVARYA	E	
KEXM	E	
KEYA	E	
KIVIK	E	
KLARON	3	
KLISYRI	3	ST
KUTARYAXM	E	
KUTARYAXMPA	E	
KUTEA	E	
KUVARYA	E	
KUVARYE	E	
KUXM	E	
lactic acid e	1	
lactic acid external lotion	1	

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

Drug Name	Drug Tier	Notes
LAVARE WOUND WASH	E	
LEVULAN KERASTICK	3	
LEXETTE	E	
LIDOCAINE-HYDROCORTISONE ACE EXTERNAL CREAM 1-1 %	E	
LIDOTREX (ALOE VERA)	E	
LOCOID EXTERNAL LOTION	3	
LOCOID LIPOCREAM	E	
LUXIQ	3	
MEDERMA	E	
MEDERMA ADVANCED SCAR GEL	E	
MEDERMA FOR KIDS	E	
MEDERMA SPF 30	E	
medpura hand sanitizer external gel 70 %	E	
METDRAY	E	
methoxsalen rapid	1	
methyl salicylate external liquid	E	
METROCREAM	3	
METROGEL EXTERNAL GEL	E	
METROLOTION	3	
metronidazole external	1	
MIMYX	E	
MIRVASO	3	
moisturel external lotion 3 %	E	
mometasone furoate external	1	
myorisan	1	PA
NENDRUX	E	
NEOSALUS	E	

Drug Name	Drug Tier	Notes
NEOSPORIN ORIGINAL EXTERNAL OINTMENT	E	
NEO-SYNALAR EXTERNAL CREAM	3	
NEO-SYNALAR EXTERNAL KIT	E	
neuac external gel	1	
NEUAC EXTERNAL KIT	E	
NIVATOPIC PLUS	E	
nolix external lotion	E	
NORITATE	E	
NUCARACLINPAK	E	
NUCARARXPAK	E	
NUCORT	E	
NUDERMRXPAK 120	E	
NUDERMRXPAK 60	E	
NUTRASEB	E	
NUTRIARX CREAMPK	E	
NUVAIL	E	
OLUX	3	
OLUX-E	3	
ONEXTON	3	
ONZDEOXIA	E	
OPZELURA	E	
ORACEA	E	
OVACE PLUS	E	
OVACE PLUS WASH	E	
OVACE WASH	E	
OXIANUJO	E	
OXIATAR	E	
OXIAVARRY	E	
OXIAZAR	E	
OXOPOD	E	
PANDEL	E	
PENLEN	E	

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

Drug Name	Drug Tier	Notes
PHLAG SPRAY	E	
pimecrolimus	1	ST
PLEXION	E	
PLEXION CLEANSER EXTERNAL LIQUID	E	
PLEXION CLEANSING CLOTH EXTERNAL PAD	E	
PLEXION NS	E	
podocon-25	E	
podofilox external	1	
PODPROG	E	
PR BENZOYL PEROXIDE	E	
PR BENZOYL PEROXIDE WASH	E	
PR CREAM	E	
PRAMOSONE EXTERNAL CREAM 1-1 %	3	
PRAMOSONE EXTERNAL CREAM 1-2.5 %	E	
PRAMOSONE EXTERNAL LOTION	3	
PRAMOSONE EXTERNAL OINTMENT	E	
pramox	E	
PRAMOXINE-HC EXTERNAL CREAM	E	
PRE & POST SX POUCH	E	
prednicarbate external ointment	1	
PRESERA	E	
PROMISEB	E	
PROPECIA	E	
PROSILK EXTERNAL	E	
PROTEXA	E	
PROTOPIC	3	ST

Drug Name	Drug Tier	Notes
PRUCLAIR	E	
PRUDOXIN	3	PA
PRUMYX	E	
PSORCON	E	
PYROGALLIC ACID	3	
QBREXZA	3	QL
QUIHOXVAR	E	
QUINIXIL	E	
QUTENZA	E	
QUTENZA (2 PATCH)	E	
QUTENZA (4 PATCH)	E	
RADIAPLEXRX GEL EXTERNAL	3	
RADIAPLEXRX GEL EXTERNAL	E	
RECEDO	E	
REFISSA	E	
REGENECARE	3	
REGRANEX	3	PA
REMIGEN	E	
RENOVA	E	
RENOVA PUMP	E	
RESORCINOL-SULFUR	E	
RETIN-A	3	PA
RETIN-A MICRO GEL 0.04 %, 0.1 %	E	
RETIN-A MICRO PUMP EXTERNAL GEL 0.04 %, 0.1 %	E	
RETIN-A MICRO PUMP EXTERNAL GEL 0.06 %, 0.08 %	2	PA
REXASIL PATCH & VITAMIN E LIQ	E	
RHOFADE	3	
ROAOXIA	E	
rosadan external cream	1	
rosadan external gel	1	

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

Drug Name	Drug Tier	Notes
ROSADAN EXTERNAL KIT	E	
salicylic acid er	E	
salicylic acid external foam	E	
salicylic acid external gel	E	
salicylic acid external shampoo	E	
salicylic acid external solution 26 %	E	
salicylic acid wart remover	E	
salicylic acid-cleanser external kit 6 % cream	E	
salimez	E	
SALIMEZ FORTE	E	
SALVAX	E	
SALVAX DUO PLUS	E	
SANADERMRX SKIN REPAIR	E	
SANTYL	3	QL
SAROXIA	E	
SCALACORT DK	E	
SCARCARE GEL-PAD KIT/LARGE	E	
SCARCIN	E	
SCARSILK EXTERNAL	E	
SCARZEN SKIN REPAIR	E	
SCENESSE	3	PA; SP
selenium sulfide external lotion	1	
selenium sulfide external shampoo	E	
SERNIVO	E	
SILA III	E	
SILHEAL-10	E	
SILIPAC	E	

Drug Name	Drug Tier	Notes
SILVERSEAL HYDROGEL DRESSING EXTERNAL PAD 2"X3"	E	
SKARCADE	E	
skarjel	E	
sodium sulfacetamide external shampoo	E	
sodium sulfacetamide wash	E	
SODIUM SULFACETAMIDE-BAKUCHIOL	E	
SOLARAVIX EXTERNAL	E	
SOLOX	E	
SOOLANTRA	3	
SORILUX	E	
sss 10-5	E	
STRATA CTX	E	
STRATA GRT	E	
STRATA MARK	E	
STRATA TRIZ	E	
STRATA XRT	E	
sulfacetamide sodium (acne)	1	
sulfacetamide sodium (cleans)	E	
sulfacetamide sodium external liquid	E	
sulfacetamide sodium-sulfur external cream	E	
sulfacetamide sodium-sulfur external liquid	E	
sulfacetamide sodium-sulfur external lotion	E	
sulfacetamide sodium-sulfur external pad 10-4 %	E	

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

Drug Name	Drug Tier	Notes
sulfacetamide sodium-sulfur external pad 9.8-4.8 %	1	
sulfacetamide sodium-sulfur external suspension	E	
sulfacetamide sod-sulfur wash external liquid	E	
sulfacetamide-sulfur in urea external emulsion	E	
SULFACLEANSE 8/4	E	
sulfamez wash	E	
SUMADAN	E	
SUMADAN WASH	E	
SUMADAN XLT	E	
SUMAXIN	E	
SUMAXIN CP	E	
SUVICORT	E	
SYNALAR	3	
SYNALAR (CREAM)	E	
SYNALAR (OINTMENT)	E	
SYNALAR TS	E	
SYNERDERM	E	
TACLONEX EXTERNAL OINTMENT	E	
TACLONEX EXTERNAL SUSPENSION	3	QL
tacrolimus external ointment	1	
TARDEOXIA	E	
TARDIMAXIA	E	
TAROXIA	E	
TASOPROL	E	
tazarotene external cream	1	PA
TAZAROTENE EXTERNAL FOAM	E	

Drug Name	Drug Tier	Notes
TAZORAC EXTERNAL CREAM 0.05 %	E	
TAZORAC EXTERNAL CREAM 0.1 %	3	PA
TAZORAC EXTERNAL GEL	E	
TEMOVATE EXTERNAL CREAM	3	
TETRIX EXTERNAL CREAM	E	
TEXACORT	E	
TOPICORT EXTERNAL CREAM	3	
TOPICORT EXTERNAL GEL	3	
TOPICORT EXTERNAL OINTMENT	3	
TOPICORT SPRAY	E	
tovet external foam	1	
TOVET EXTERNAL KIT	E	
tretinoin external	1	PA
tretinoin microsphere	1	PA
tretinoin microsphere pump	1	PA
TRIADIME-80	E	
triamcinolone acetonide external aerosol solution	E	
triamcinolone acetonide external cream	1	
triamcinolone acetonide external lotion	1	
triamcinolone acetonide external ointment 0.025 %, 0.1 %, 0.5 %	1	
triamcinolone acetonide external ointment 0.05 %	E	
triamcinolone in absorbbase	E	

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



Drug Name	Drug Tier	Notes
TRIANEX	E	
triderm external cream	1	
TRIDESILON	3	
TRIHEAL-80	E	
TRILOCICLO	E	
TRI-LUMA	E	
triple antibiotic external ointment , 3.5-400-5000 , 5-400-5000	E	
triple antibiotic pain relief	E	
triple antibiotic+pain relief	E	
tritocin	E	
TRIVIX	E	
turpentine external	E	
TWYNEO	E	
ULTRASAL-ER	E	
ULTRAVATE EXTERNAL LOTION	E	
UMECTA MOUSSE	E	
URAMAXIN EXTERNAL GEL	E	
urea cream 47 % external	1	
urea cream 47 % external	E	
urea external cream 39 % , 40 % , 41 % , 45 %	E	
UREA EXTERNAL FOAM	E	
urea external lotion 40 %	E	
urea hydrating	E	
urea nail external gel 45 %	E	
ureacin-10	E	
ureacin-20	E	
uredeb	E	
UREMEZ-40	E	

Drug Name	Drug Tier	Notes
URESOL	E	
VANICREAM EXTERNAL OINTMENT	E	
VANIQA	E	
VANOS	3	
VANOXIDE-HC	E	
VARDIMAXIA	E	
VAROXIA	E	
VECTICAL	E	
VELTIN	E	
VENELEX	3	
VERDESO	E	
VEREGEN	E	
VEXASYN	E	
VIRASAL	E	
VTAMA	E	
WINLEVI	E	
WYNZORA	E	
XALIX	3	
XERAC AC	3	
XERALUX	E	
xurea	E	
ZACARE	E	
zaclir cleansing external lotion 8 %	E	
zenatane	1	PA
ZENPHOR WOUND GEL	E	
ZENPHOR WOUND PAD	E	
ZIANA	E	
ZILXI	3	ST
ZITHRANOL	E	
ZONALON	3	PA
ZYCLARA	E	
ZYCLARA PUMP	E	

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

Drug Name	Drug Tier	Notes
<b>Diabetes - Antidiabetic Agents</b>		
acarbose oral	1	
ACTOPLUS MET	3	
ACTOS	3	
ADLYXIN	E	
ADLYXIN STARTER PACK	E	
ALOGLIPTIN BENZOATE	E	
ALOGLIPTIN-METFORMIN HCL	E	
ALOGLIPTIN-PIOGLITAZONE	E	
AMARYL	3	
BYDUREON BCISE AUTOINJECTOR	2	ST; QL
BYETTA 10 MCG PEN	2	ST; QL
BYETTA 5 MCG PEN	2	ST; QL
CYCLOSET	3	ST
DUETACT	3	
FARXIGA	2	ST
glimepiride	1	
glipizide er	1	
glipizide ir	1	
glipizide xl	1	
glipizide-metformin hcl	1	
GLUCOTROL XL	3	
GLUMETZA	E	
glyburide micronized	1	
glyburide oral	1	
glyburide-metformin	1	
GLYNASE	3	
GLYXAMBI	2	ST
INVOKAMET	E	
INVOKAMET XR	E	
INVOKANA	E	
JANUMET	2	ST

Drug Name	Drug Tier	Notes
JANUMET XR	2	ST
JANUVIA	2	ST
JARDIANCE	2	ST
JENTADUETO	2	ST
JENTADUETO XR	2	ST
KAZANO	E	
KOMBIGLYZE XR	E	
metformin hcl er	1	
metformin hcl er (mod)	E	
metformin hcl er (osm) oral tablet extended release 24 hour 1000 mg, 500 mg	E	
metformin hcl oral solution	1	
metformin hcl oral tablet 1000 mg, 500 mg, 850 mg	1	
metformin hcl oral tablet 625 mg	E	
miglitol	1	
MOUNJARO	E	
nateglinide	1	
NESINA	E	
ONGLYZA	E	
OSENI	E	
OZEMPIC SUBCUTANEOUS SOLUTION PEN-INJECTOR 2 MG/1.5ML, 4 MG/3ML, 8 MG/3ML	2	ST; QL
pioglitazone hcl	1	
pioglitazone hcl-glimepiride	1	
pioglitazone hcl-metformin hcl	1	
PRECOSE	3	
QTERN	E	
repaglinide	1	

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

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

Drug Name	Drug Tier	Notes
ACCU-CHEK SOFTCLIX LANCET DEVICE KIT	\$0	
ACCU-CHEK SOFTCLIX LANCETS	\$0	
AUTOLET LANCING DEVICE	\$0	
BLUESTAR	E	
CARETOUCH CONTROL SOL LEVEL 2	E	
CARETOUCH LANCING/EJECTOR	\$0	
CARETOUCH TEST	E	
CEQUR SIMPLICITY 2U	3	
CHEMSTRIP 10 MD	3	
CHEMSTRIP 10/SG	3	
CHEMSTRIP 2 GP	3	
CHEMSTRIP 5 OB	3	
CHEMSTRIP 7	3	
CHEMSTRIP 9	3	
CHEMSTRIP K	3	
CHEMSTRIP MICRAL	E	
CHEMSTRIP UGK	3	
CONTOUR CONTROL SOLUTION	E	
CONTOUR MONITOR DEVICE DEVICE	E	
CONTOUR MONITOR KIT W/DEVICE KIT	E	
CONTOUR NEXT CONTROL SOLUTION	E	
CONTOUR NEXT EZ KIT W/DEVICE	E	
CONTOUR NEXT GEN MONITOR	E	
CONTOUR NEXT LINK KIT W/DEVICE	E	

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

Drug Name	Drug Tier	Notes
CONTOUR NEXT MONITOR KIT W/DEVICE	E	
CONTOUR NEXT ONE KIT	E	
CONTOUR NEXT TEST STRIPS	E	
CONTOUR TEST STRIPS	E	
CVS KETONE CARE	3	
EASYMAX 15 LEVEL 2-3 CONTROL	E	
EASYMAX CONTROL IN VITRO SOLUTION NORMAL	E	
GLUCOSE CONTROL SOLUTIONS	E	
FORTISCARE CONTROL	E	
FORTISCARE G1 TEST STRIP	E	
FORTISCARE T1 GLUCOSE SYSTEM	E	
FREESTYLE PRECISION NEO TEST	E	
KETO-DIASTIX	3	
KETONE TEST	3	
KETOSTIX	3	
LANCETS	\$0	
MICRODOT TEST	E	
MICROLET NEXT LANCING DEVICE	\$0	
NOVOPEN ECHO	3	
ONETOUCH CLUB LANCETS FINE PT	\$0	
ONETOUCH DELICA LANCETS 30G	\$0	
ONETOUCH DELICA LANCETS 33G	\$0	
ONETOUCH DELICA LANCING DEV	\$0	

Drug Name	Drug Tier	Notes
ONETOUCH DELICA PLUS LANCET30G	\$0	
ONETOUCH DELICA PLUS LANCET33G	\$0	
ONETOUCH DELICA PLUS LANCING	\$0	
ONETOUCH FINEPOINT LANCETS	\$0	
ONETOUCH SOLUTIONS STARTER KIT KIT W/ WELL DEVICE	E	
ONETOUCH ULTRA TEST STRIPS	\$0	QL
ONETOUCH ULTRA 2 KIT W/DEVICE	2	
ONETOUCH ULTRA MINI KIT W/DEVICE	2	
ONETOUCH ULTRASOFT LANCETS	\$0	
ONETOUCH VERIO KIT W/DEVICE	2	
ONETOUCH VERIO FLEX SYSTEM	2	
ONETOUCH VERIO IN VITRO SOLUTION HIGH	3	
ONETOUCH VERIO TEST STRIPS	\$0	QL
ONETOUCH VERIO IQ SYSTEM	2	
ONETOUCH VERIO REFLECT KIT W/DEVICE	2	
PRECISION XTRA BLOOD GLUCOSE	E	
SURESTEP PRO HIGH GLUCOSE	3	
SURESTEP PRO LOW GLUCOSE	3	
SURESTEP PRO NORMAL GLUCOSE	3	

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

Drug Name	Drug Tier	Notes
TRUE METRIX BLOOD GLUCOSE TEST	E	
TRUE METRIX LEVEL 1	E	
TRUE METRIX LEVEL 2	E	
TRUE METRIX LEVEL 3	E	
TRUE METRIX METER KIT	E	
TRUE METRIX PRO BLOOD GLUCOSE	E	
TRUETRACK TEST	E	
UNISTRIP CONTROL IN VITRO SOLUTION LOW	E	
<b>Diabetes - Glycemic Agents</b>		
BAQSIMI ONE PACK	2	
BAQSIMI TWO PACK	2	
diazoxide oral	1	
GLUCAGEN HYPOKIT	E	
glucagon emergency kit 1 mg injection 1 mg	1	
GLUCAGON EMERGENCY KIT 1 MG INJECTION 1 MG	E	Made by Lilly  This drug is not covered Request is eligible for non-formulary review (FOE) by the prior authorization department
GLUCAGON EMERGENCY KIT	2	Made by Fresenius
glucose 5	E	
GVOKE HYPOPEN 1-PACK	E	
GVOKE HYPOPEN 2-PACK	E	
GVOKE KIT	E	

Drug Name	Drug Tier	Notes
GVOKE PFS	E	
PROGLYCEM	3	
ZEGALOGUE	2	
<b>Diabetes - Insulins</b>		
ADMELOG INJECTION	E	
ADMELOG SOLOSTAR	E	
AFREZZA INHALATION POWDER 12 UNIT, 4 UNIT, 60X4 & 60X8 & 60X12 UNIT, 8 UNIT, 90 X 4 UNIT & 90X8 UNIT, 90 X 8 UNIT & 90X12 UNIT	3	PA
APIDRA SOLOSTAR	E	
APIDRA VIAL	E	
AUM MINI INSULIN PEN NEEDLE 32G X 4 MM , 32G X 6 MM , 32G X 8 MM , 33G X 4 MM , 33G X 5 MM , 33G X 6 MM	\$0	
AUM READYGARD DUO PEN NEEDLE	\$0	
AUM SAFETY PEN NEEDLE	\$0	
BASAGLAR KWIKPEN	E	
CARETOUCH HYPODERMIC NEEDLE 22G X 1"	3	
FIASP FLEXTOUCH	E	
FIASP INJECTION	E	
FIASP PENFILL	E	
HUMALOG INJECTION	2	
HUMALOG U-100 AND U-200 KWIKPEN	2	
HUMALOG MIX 50/50 KWIKPEN	2	
HUMALOG MIX 50/50 VIAL	2	

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

Drug Name	Drug Tier	Notes
HUMALOG MIX 75/25 KWIKPEN	2	
HUMALOG MIX 75/25 VIAL	2	
HUMALOG SUBCUTANEOUS SOLUTION CARTRIDGE	2	
HUMALOG U-100 JUNIOR KWIKPEN	2	
HUMULIN 70/30 KWIKPEN	2	
HUMULIN 70/30 VIAL	2	
HUMULIN N KWIKPEN	2	
HUMULIN N VIAL	2	
HUMULIN R U-500 KWIKPEN	2	
HUMULIN R U-500 VIAL	2	
HUMULIN R VIAL	2	
INSULIN ASP PROT & ASP FLEXPEN	E	
INSULIN ASPART FLEXPEN	E	
INSULIN ASPART INJECTION	E	
INSULIN ASPART PENFILL	E	
INSULIN ASPART PROT & ASPART	E	
INSULIN GLARGINE	E	
INSULIN GLARGINE SOLOSTAR	E	
INSULIN GLARGINE-YFGN	E	
INSULIN LISPRO (1 UNIT DIAL)	E	
INSULIN LISPRO INJECTION	E	
INSULIN LISPRO JUNIOR KWIKPEN	E	

Drug Name	Drug Tier	Notes
INSULIN LISPRO PROT & LISPRO	E	
INSULIN PEN NEEDLES 29G X 12.7MM , 29G X 12MM , 29G X 5MM , 29G X 8MM , 31G X 4 MM , 31G X 5 MM , 31G X 6 MM , 31G X 8 MM , 32G X 4 MM , 32G X 6 MM , 32G X 8 MM , 33G X 4 MM , 33G X 5 MM , 33G X 6 MM	\$0	
INSULIN SYRINGES 27G X 1/2" 0.5 ML, 27G X 1/2" 1 ML, 28G X 1/2" 0.5 ML, 28G X 1/2" 1 ML, 29G X 1/2" 1 ML, 30G X 1/2" 0.3 ML, 30G X 1/2" 0.5 ML, 30G X 1/2" 1 ML, 30G X 5/16" 0.3 ML, 30G X 5/16" 0.5 ML, 30G X 5/16" 1 ML, 31G X 15/64" 0.3 ML, 31G X 15/64" 0.5 ML, 31G X 5/16" 0.3 ML, 31G X 5/16" 0.5 ML, 31G X 5/16" 1 ML	\$0	
LANTUS U-100 SOLOSTAR	2	
LANTUS U-100 VIAL	2	
LEVEMIR U-100 FLEXTOUCH	E	
LEVEMIR U-100 VIAL	E	
LYUMJEV KWIKPEN	2	
LYUMJEV VIAL	2	
MYXREDLIN	3	
NOVOFINE AUTOCOVER PEN NEEDLE	\$0	
NOVOFINE PEN NEEDLE	\$0	
NOVOFINE PLUS PEN NEEDLE	\$0	

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

Drug Name	Drug Tier	Notes
NOVOLIN 70/30 FLEXPEN	E	
NOVOLIN 70/30 FLEXPEN RELION	E	
NOVOLIN 70/30 RELION	E	
NOVOLIN 70/30 VIAL	E	
NOVOLIN N FLEXPEN	E	
NOVOLIN N FLEXPEN RELION	E	
NOVOLIN N RELION	E	
NOVOLIN N VIAL	E	
NOVOLIN R FLEXPEN	E	
NOVOLIN R FLEXPEN RELION	E	
NOVOLIN R RELION	E	
NOVOLIN R VIAL	E	
NOVOLOG 70/30 FLEXPEN RELION	E	
NOVOLOG FLEXPEN RELION	E	
NOVOLOG U-100 FLEXPEN	E	
NOVOLOG MIX 70/30 FLEXPEN	E	
NOVOLOG MIX 70/30 RELION	E	
NOVOLOG MIX 70/30 VIAL	E	
NOVOLOG U-100 PENFILL	E	
NOVOLOG RELION INJECTION	E	
NOVOLOG U-100 VIAL INJECTION	E	
SEMGLEE (YFGN)	E	
TOUJEO MAX SOLOSTAR	2	
TOUJEO SOLOSTAR	2	
TRESIBA	E	

Drug Name	Drug Tier	Notes
TRESIBA FLEXTOUCH	E	
<b>Electrolytes / Minerals / Metals / Vitamins</b>		
ABANEU-SL	E	
ACCRUFER	E	
ACTITROM-D	E	
ACTIVE FE	E	
ACTIVITE	E	
adc/f (0.5mg/ml)	1	
ADRENAL C FORMULA	E	
airavite	E	
aminoamrms	E	
aminoreliefrms	E	
AMLADEX	E	
AQUASOL A INTRAMUSCULAR SOLUTION 50000 UNIT/ML	E	
ASCOR	E	
ASCORBIC ACID SOLUTION 500 MG/ML INJECTION	E	
ascorbic acid solution 500 mg/ml injection	E	
ATABEX OB	2	
AZESCO	E	
b-6 folic acid oral capsule 8.333-100-1 mg	E	
BACMIN	E	
b-complex/b-12 oral	E	
BENTIVITE	E	
biocel	E	
biopetit	E	
biotin oral tablet 1000 mcg	E	
bp vit 3	E	
b-plex	E	

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

Drug Name	Drug Tier	Notes
b-plex plus	E	
calcidol oral solution 200 mcg/ml	E	
CALCIFOL	3	
calcium-folic acid plus d	E	
CARBAGLU ORAL TABLET SOLUBLE	3	PA; SP
CARDIOPLEGIA DEL NIDO FORMULA	E	
CARDIOPLEGIA IND PLASMA HIGH K	E	
CARDIOPLEGIA IND PLASMA-TROMET	E	
CARDIOPLEGIA INDUCTION HIGH K	E	
CARDIOPLEGIA INDUCTION LOW DEX	E	
CARDIOPLEGIA INDUCTION NON-ENR	E	
CARDIOPLEGIA MAIN LOW DEXTROSE	E	
CARDIOPLEGIA MAIN LOW TROMETHA	E	
CARDIOPLEGIA MAIN PLASMA-TROME	E	
CARDIOPLEGIA MAINTENANCE	E	
CARDIOPLEGIA REPERFUSATE 4:1	E	
carglumic acid oral tablet soluble	1	PA; SP
CARNITOR	3	
CARNITOR SF	3	
CENFOL	E	
CENTRATEX	E	
CEREFOLIN	E	
CEREFOLIN NAC ORAL TABLET 6-90.314-2-600 MG	E	
CHEMET	3	
CHOLECAL DF	E	

Drug Name	Drug Tier	Notes
CHROMAGEN ORAL CAPSULE	E	
CIFEREX	E	
CITRANATAL BLOOM	E	
cod liver oil oral oil	E	
corvita 150	E	
CORVITA ORAL TABLET	E	
CORVITE 150	E	
CORVITE FE	E	
cyanocobalamin injection solution 1000 mcg/ml	1	
CYANOCOBALAMIN INJECTION SOLUTION 2000 MCG/ML	3	
cytra k crystals	E	
d3 high potency oral capsule 25 mcg (1000 ut)	E	
d3 super strength	E	
daflonex-xl oral capsule	E	
DAYAVITE	E	
DECARA ORAL CAPSULE 1.25 MG (50000 UT), 625 MCG (25000 UT)	E	
deferasirox	1	PA
deferasirox granules	1	PA
deferiprone oral tablet 1000 mg	1	PA
deferiprone oral tablet 500 mg	E	
DEPLIN 15	E	
DEPLIN 7.5	E	
DERMACINRX DOTREMIN	E	
DERMACINRX FOLTAMIN	E	

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



Drug Name	Drug Tier	Notes
DERMACINRX MULTITAM ORAL TABLET	E	
DERMACINRX PRETRATE	E	
DERMACINRX RIBOTIN-E	E	
DERMACINRX ZINTREXYL-C	E	
DEXIFOL	E	
DIALYVITE	E	
DIALYVITE 3000	E	
DIALYVITE 5000	E	
DIALYVITE SUPREME D ORAL TABLET	E	
DIALYVITE/ZINC	E	
DODEX	3	
DRISDOL ORAL CAPSULE	3	
d-vite pediatric	E	
EFFER-K ORAL TABLET EFFERVESCENT 10 MEQ, 20 MEQ	3	
effer-k tablet effervescent 25 meq oral	1	
effer-k tablet effervescent 25 meq oral	E	
ELFOLATE	E	
ELFOLATE PLUS ORAL TABLET 3-35-2 MG	E	
ELITE-OB	2	
ENBRACE HR	E	
ERGOCAL	E	
ergocalciferol oral capsule	1	
ergocalciferol oral solution 200 mcg/ml	E	

Drug Name	Drug Tier	Notes
EXJADE	3	PA
fabb	E	
fa-vitamin b-6-vitamin b-12	E	
FEONYX	E	
FERAHEME	E	
FERIVA 21/7	E	
FERIVAFA	E	
ferocon	E	
ferotinsic	E	
FERRALET 90	E	
FERRAPLUS 90	E	
FERRIPROX	3	PA
FERRIPROX TWICE- A-DAY	E	
FERRLECIT	E	
ferrocite plus oral tablet	E	
FERRO-PLEX	E	
ferrous sulfate oral solution 75 (15 fe) mg/ml	E	
ferrous sulfate oral syrup	E	
ferrous sulfate oral tablet 325 (65 fe) mg	E	
ferrous sulfate oral tablet delayed release 324 (65 fe) mg, 325 (65 fe) mg	E	
ferumoxytol	E	
FLORIVA	E	
FLORIVA PLUS	E	
fluoritab oral solution	\$0	
FOLAGENT DHA	E	
FOLAMAX	E	
FOLAMED DHA ORAL CAPSULE	E	
folbee	E	
folbee plus	E	

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

Drug Name	Drug Tier	Notes
FOLBEE PLUS CZ	E	
FOLBIC RF	E	
FOLDITAM	E	
FOLGARD OS	E	
FOLGARD RX	E	
folic acid injection	E	
folic acid oral tablet 1 mg	1	
folic acid oral tablet 400 mcg, 800 mcg	\$0	
FOLIC D3	E	
FOLI-D	E	
FOLIFLEX	E	
FOLITE	E	
FOLITIN-Z	E	
FOLIVANE-F	E	
FOLIVANE-PLUS	E	
FOLIXAPURE	E	
folplex 2.2	E	
FOLTANX	E	
FOLTANX RF	E	
FOLTRATE	E	
FOLTREXYL	E	
foltrin	E	
FOLTX ORAL TABLET 1.13-25-2 MG	E	
FOLVITE-D	E	
FOSTEUM	E	
FUSION PLUS	E	
GALZIN	3	
GENICIN VITA-D	E	
GENICIN VITA-Q ORAL TABLET	E	
GENICIN VITA-S	E	
hematinic plus vit/minerals	E	
hematinic/folic acid	E	
HEMATOGEN	E	

Drug Name	Drug Tier	Notes
HEMATOGEN FA	E	
HEMATRON-AF	E	
HEMOCYTE PLUS	E	
hemocyte-f oral tablet	E	
HYLAVITE	E	
HYLAZINC	E	
ICAR-C PLUS	E	
iferex 150 forte	E	
INFED	E	
INFUVITE ADULT	E	
INFUVITE PEDIATRIC INTRAVENOUS SOLUTION	E	
INJECTAFER	E	
INTEGRA F	E	
INTEGRA PLUS	E	
iodine strong oral	1	
IROSPAN 24/6	E	
ISOLYTE-S	3	
JADENU	3	PA
JADENU SPRINKLE	3	PA
JENLIVA PRENATAL/POSTNATAL	E	
JYNARQUE	E	SP
KCL-LIDOCAINE-NACL SOLUTION 10-10 MEQ-MG /100ML INTRAVENOUS	3	
KCL-LIDOCAINE-NACL SOLUTION 10-10 MEQ-MG /100ML INTRAVENOUS	E	
klor-con 10	1	
klor-con m10	1	
klor-con m15	1	
klor-con m20	1	
klor-con oral packet 20 meq	1	

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

Drug Name	Drug Tier	Notes
klor-con oral tablet extended release	1	
klor-con/ef	E	
K-PHOS	3	
K-PHOS NO 2	E	
K-PHOS-NEUTRAL	E	
k-prime	1	
K-TAB	3	
k-tan plus	E	
L-CYSTINE	E	
levocarnitine oral solution	1	
levocarnitine oral tablet	1	
levocarnitine sf	1	
L-ISOLEUCINE	E	
l-methylfolate	E	
l-methylfolate ca me-cbl nac	E	
l-methylfolate calcium oral	E	
l-methylfolate forte	E	
l-methylfolate-algae oral capsule 15-90.314 mg	E	
l-methylfolate-algae-b12-b6	E	
l-methylfolate-b6-b12 oral tablet 3-35-2 mg	E	
l-methyl-mc	E	
l-methyl-mc nac	E	
LOKELMA	3	
LORID	E	
lysiplex plus oral tablet	E	
magnesium oxide oral tablet 400 (240 mg) mg	E	

Drug Name	Drug Tier	Notes
magnesium sulfate intravenous solution 2 gm/50ml, 20 gm/500ml, 4 gm/100ml, 4 gm/50ml, 40 gm/1000ml	1	
MAGNESIUM SULFATE SOLUTION 50 % INJECTION	3	
magnesium sulfate solution 50 % injection	1	
magnesium-oxide oral tablet 400 (240 mg) mg	E	
mag-oxide oral tablet 200 mg	E	
MEPHYTON	3	
METAFOLBIC	E	
METAFOLBIC PLUS	E	
METAFOLBIC PLUS RF	E	
METANX ORAL CAPSULE	E	
methylfol-algae-b12-acetylcyst	E	
MICROPLEGIA MSA-MSG	E	
MIFEPREX	E	
mifepristone	E	
M-NATAL PLUS	2	
MONOFERRIC	E	
MULTIGEN	E	
MULTIGEN FOLIC	E	
MULTIGEN PLUS	E	
MULTI-MAC	E	
MULTIPRO	E	
multi-vitamin/fluoride oral solution	1	
multivitamin/fluoride tablet chewable 0.25 mg oral (rx)	1	

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

Drug Name	Drug Tier	Notes
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-vitamin/fluoride/iron	1	
MULTI-VIT-FLOR	E	
mynephrocaps	E	
MYNEPHRON	E	
na ferric gluc cplx in sucrose	E	
nafrinse	\$0	
nafrinse drops	\$0	
NASCOBAL	3	
NEONATAL + DHA	E	
NEONATAL 19	2	
NEONATAL COMPLETE	E	
NEONATAL FE	E	
NEONATAL PLUS	2	
NEOVITE	E	
NEPHPLEX RX	E	
nephronex oral tablet	E	
NEPHRO-VITE RX	E	
NESTABS	2	
NESTABS ONE	E	
NEURIN-SL	E	

Drug Name	Drug Tier	Notes
NICADAN	E	
NICAZEL	E	
NICAZEL FORTE	E	
NICOMIDE ORAL TABLET 750-27-2-0.5 MG	E	
nicotinamide oral	E	
NIFEREX ORAL TABLET	E	
NOVAMV PEDIATRIC MULTI-VITAMIN	E	
NUFERA	E	
nufol	E	
NUTRICAP	E	
nutrifac zx	E	
NUTRIVIT	E	
OCUVEL ORAL CAPSULE	E	
ONE VITE WOMENS	\$0	
ONE VITE WOMENS PLUS	2	
ONEVITE ORAL TABLET	E	
ORACIT	E	
ORTHO DF	E	
OVEEZA	E	
oyster shell calcium w/d	E	
oyster shell calcium/d oral tablet 250-250 mg-unit	E	
oyster shell calcium/vit d oral tablet 500-5 mg-mcg	E	
oyster shell calcium/vitamin d oral tablet 500-200 mg-unit	E	
PHOSPHA 250 NEUTRAL	3	
phosphorous	1	
phosphorus supplement	E	

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

Drug Name	Drug Tier	Notes
phosphorus w/sod & potassium	E	
phospho-trin 250 neutral	1	
PHOSPHO-TRIN K500	3	
PHOXILLUM B22K4/0 EXTRACORPOREAL	E	
PHOXILLUM BK4/2.5 EXTRACORPOREAL	E	
PHYSICIANS EZ USE B-12	E	
PHYSIOLYTE	E	
PHYSIOSOL IRRIGATION	E	
phytonadione injection solution 1 mg/0.5ml, 10 mg/ml	E	
phytonadione oral	1	
PLASMA-LYTE 148	3	
PLASMA-LYTE A	3	
PNV TABS 20-1	E	
PODIAPN ORAL CAPSULE	E	
poly-iron 150 forte	E	
polysaccharide iron forte	E	
POLY-VI-FLOR ORAL SUSPENSION	3	
POLY-VI-FLOR ORAL TABLET CHEWABLE	E	
POLY-VI-FLOR/IRON ORAL SUSPENSION	2	
POLY-VI-FLOR/IRON ORAL TABLET CHEWABLE	E	
POLY-VITE PEDIATRIC ORAL SOLUTION	E	
pot & sod cit-cit ac	E	
POTABA ORAL CAPSULE	E	

Drug Name	Drug Tier	Notes
potassium chloride cryser	1	
potassium chloride er	1	
potassium chloride in nacl intravenous solution 20-0.45 meq/l-%, 20-0.9 meq/l-%, 40-0.9 meq/l-%	1	
potassium chloride oral packet	1	
potassium chloride oral solution 20 meq/15ml (10%), 40 meq/15ml (20%)	1	
potassium citrate er	1	
potassium citrate-citric acid oral solution	E	
PREGEN DHA	E	
PREGENNA	E	
PREMESISRX	E	
PRENAISSANCE	E	
PRENARA	E	
prenatal oral tablet 27-0.8 mg	\$0	
prenatal oral tablet 27-1 mg	1	
prenatal plus vitamin/mineral	1	
prenatal vitamin plus low iron	1	
prenatal/folic acid+dha	1	
PRENATE	E	
PRENATE DHA ORAL CAPSULE 18-0.6-0.4-300 MG	E	
PRENATE ELITE ORAL TABLET 20-0.6-0.4 MG	E	
PRENATE ENHANCE	E	
PRENATE ESSENTIAL ORAL CAPSULE 18-0.6-0.4-300 MG	E	

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

Drug Name	Drug Tier	Notes
PRENATE MINI ORAL CAPSULE 18-0.6-0.4-350 MG	E	
PRENATE PIXIE	E	
PRENATE RESTORE	E	
PRENATRIX	E	
PRENATRYL	E	
PRENATVITE COMPLETE	E	
PRENATVITE PLUS	2	
PRENATVITE RX	2	
PRIMACARE ORAL CAPSULE	E	
PRISMASOL B22GK 4/0 EXTRACORPOREAL	3	
PRISMASOL BGK 0/2.5 EXTRACORPOREAL	3	
PRISMASOL BGK 2/0 EXTRACORPOREAL	3	
PRISMASOL BGK 2/3.5 EXTRACORPOREAL	3	
PRISMASOL BGK 4/0/1.2 EXTRACORPOREAL	E	
PRISMASOL BGK 4/2.5 EXTRACORPOREAL	3	
PRISMASOL BK 0/0/1.2 EXTRACORPOREAL	3	
PRO HERS RX	E	
PRO HIS RX	E	
PRO PCOS RX	E	
PROFOLA	E	
PROTEINEX ORAL LIQUID	E	
PROTEINEX P18	E	
purevit dualfe plus	E	

Drug Name	Drug Tier	Notes
pyridoxine hcl injection	E	
QUFLORA FE	E	
QUFLORA FE PEDIATRIC	E	
QUFLORA GUMMIES	E	
QUFLORA PEDIATRIC	E	
RELNATE DHA	2	
REMEDIENT ORAL CAPSULE	E	
RENAL MULTIVITAMIN FORMULA	E	
RENAL ORAL CAPSULE	E	
RENATABS	E	
RENATABS WITH IRON	E	
rena-vite	E	
REVESTA	E	
ringers irrigation	E	
SAMSCA	3	PA; SP; QL
SELECT-OB ORAL TABLET CHEWABLE 29-1 MG	E	
se-tan plus	E	
SLO-NIACIN ORAL TABLET EXTENDED RELEASE 500 MG	E	
SLOWMAG MG MUSCLE/HEART	E	
sod citrate-citric acid	1	
sodium bicarbonate intravenous solution 4.2 %, 7.5 %	1	
sodium bicarbonate solution 8.4 % intravenous	1	
SODIUM BICARBONATE SOLUTION 8.4 % INTRAVENOUS	3	

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

Drug Name	Drug Tier	Notes
SODIUM BICARBONATE SOLUTION 8.4 % INTRAVENOUS	E	
sodium bicarbonate solution 8.4 % intravenous	E	
sodium chloride (pf) solution 0.9 % injection	1	
sodium chloride (pf) solution 0.9 % injection	E	
sodium chloride injection solution 2.5 meq/ml	1	
sodium chloride intravenous solution 0.45 %, 0.9 %, 3 %, 5 %	1	
sodium chloride oral	E	
SODIUM CHLORIDE SOLUTION 4 MEQ/ML INTRAVENOUS	3	
sodium chloride solution 4 meq/ml intravenous	1	
sodium fluoride oral solution 1.1 (0.5 f) mg/ml	\$0	
sodium fluoride oral tablet	\$0	
sodium fluoride oral tablet chewable	\$0	
sodium polystyrene sulfonate oral powder	1	
soluvita e oral solution 15.8 mg/0.7ml	E	
sps	1	
STROVITE FORTE	E	
STROVITE ONE	E	
SUPERVITE	E	
SYPRINE	3	PA; SP

Drug Name	Drug Tier	Notes
SYSTANE ICAPS		
AREDS2 ORAL TABLET CHEWABLE	E	
TALIVA	E	
TARON FORTE	E	
thiamine hcl injection	E	
tis-u-sol	E	
tl-hem 150	E	
tolvaptan oral tablet 30 mg	1	PA; SP; QL
tricitrates	E	
TRICON	E	
trientine hcl	1	PA; SP
TRIFERIC HEMODIALYSIS PACKET	E	
TRINATE	2	
triphrocaps	E	
TRISTART DHA	E	
TRISTART FREE	E	
TRISTART ONE	E	
TRI-VI-FLOR	3	
TRI-VI-FLORO	3	
tri-vite pediatric	E	
tri-vite/fluoride	1	
TRONVITE	E	
UDAMIN SP ORAL TABLET	E	
UROCIT-K 10	3	
UROCIT-K 15	3	
UROCIT-K 5	3	
urosex	E	
v-c forte	E	
VELTASSA	3	
VENEXA	E	
VENEXA FE	E	
VENOFER	E	
VENTRIXYL FE	E	

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

Drug Name	Drug Tier	Notes
VENTRIXYL ORAL TABLET	E	
vic-forte	E	
VINATE ONE	2	
virt-caps	E	
virt-gard	E	
vita s forte	E	
vitacel	E	
VITAFOL FE+ ORAL CAPSULE	E	
VITAFOL STRIPS	2	
VITAFOL-NANO	E	
VITAFOL-OB+DHA	E	
VITAL-D RX	E	
VITAMEZ	E	
vitamin b complex 100	E	
vitamin b-complex 100	E	
vitamin d (ergocalciferol) oral capsule 1.25 mg (50000 ut), 50000 unit	1	
VITAMIN DEFICIENCY SYSTEM-B12	E	
vitamin k1 injection solution 1 mg/0.5ml, 10 mg/ml	E	
vitamins acd-fluoride	1	
VITAROCA PLUS	E	
VITASURE	E	
VITATHELY WITH GINGER	E	
VITRAMYN	E	
VITRANOL	E	
VITRANOL FE	E	
VITREXATE	E	
VITREXATE FE	E	
VITREXYL	E	
VITREXYL + IRON	E	
vp-pnv-dha	1	

Drug Name	Drug Tier	Notes
vp-vite rx	E	
weekly-d	E	
WESCAP-C DHA	2	
WESCAP-PN DHA	2	
wescaps	E	
WESNATE DHA	2	
westab mini	E	
westab one	E	
WESTAB PLUS	2	
WESTGEL DHA	E	
wheat germ oil oral oil	E	
WILZIN	3	
XAQUIL XR	E	
XVITE	E	
ZALVIT	E	
ZELDANA	E	
zinc oral tablet 50 mg	E	
zinc sulfate oral tablet 220 (50 zn) mg	E	
ZIPHEX	E	
ZYVANA	E	
<b>Gastrointestinal Agents - Drugs for Acid Reflux and Ulcer</b>		
acid reducer oral tablet 10 mg	E	
acid reducer oral tablet delayed release	E	
ACIPHEX	E	
CARAFATE ORAL SUSPENSION	3	
CARAFATE ORAL TABLET	E	
cimetidine hcl oral solution 300 mg/5ml	1	
cimetidine oral	1	
CYTOTEC	2	QL
DEXILANT	2	QL
DEXLANSOPRAZOLE	E	

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



Drug Name	Drug Tier	Notes
esomeprazole magnesium oral capsule delayed release	1	QL
esomeprazole magnesium oral packet	1	QL
ESOMEPRAZOLE STRONTIUM ORAL CAPSULE DELAYED RELEASE 49.3 MG	E	
famotidine oral suspension reconstituted	1	
famotidine oral tablet 10 mg	E	
famotidine oral tablet 20 mg, 40 mg	1	
famotidine orig st	E	
FIRST-LANSOPRAZOLE	3	ST
FIRST-OMEPRAZOLE	3	ST
lansoprazole capsule delayed release 15 mg oral (otc)	E	
lansoprazole capsule delayed release 15 mg oral (rx)	1	QL
lansoprazole oral capsule delayed release 30 mg	1	QL
lansoprazole oral tablet delayed release dispersible 15 mg	E	
lansoprazole oral tablet delayed release dispersible 30 mg	1	QL
misoprostol oral	1	QL
NEXIUM ORAL CAPSULE DELAYED RELEASE	E	
NEXIUM ORAL PACKET	3	QL
nizatidine oral capsule	1	

Drug Name	Drug Tier	Notes
omeprazole magnesium oral tablet delayed release	E	
omeprazole oral capsule delayed release	1	QL
omeprazole oral tablet delayed release	E	
OMEPRAZOLE+SYRS PEND SF ALKA	3	ST
omeprazole-sodium bicarbonate	E	
pantoprazole sodium oral packet	E	
pantoprazole sodium oral tablet delayed release	1	QL
PEPCID ORAL TABLET	3	
PREVACID 24HR	E	
PREVACID ORAL CAPSULE DELAYED RELEASE 30 MG	E	
PREVACID SOLUTAB ORAL TABLET DELAYED RELEASE DISPERSIBLE 15 MG	E	
PREVACID SOLUTAB ORAL TABLET DELAYED RELEASE DISPERSIBLE 30 MG	3	QL
PRIOSEC ORAL PACKET	E	
PROTONIX ORAL PACKET	3	ST; QL
PROTONIX ORAL TABLET DELAYED RELEASE	3	QL
RABEPRAZOLE SODIUM ORAL CAPSULE SPRINKLE	E	
rabeprazole sodium oral tablet delayed release	1	QL

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

Drug Name	Drug Tier	Notes
sucralfate oral suspension	E	
sucralfate oral tablet	1	
ZEGERID	E	
<b>Gastrointestinal Agents - Drugs for Bowel, Intestine and Stomach Conditions</b>		
ACTIPHLORA	E	
alosetron hcl	1	PA
alum & mag hydroxide-simeth oral suspension 400-400-40 mg/5ml	E	
alumina-magnesia-simethicone	E	
alvimopan	1	
AMITIZA	E	
amoxicill-clarithro-lansopraz	1	
ANASPAZ	3	
antacid anti-gas max strength	E	
antacid calcium	E	
antacid calcium rich	E	
antacid extra strength oral tablet chewable 160-105 mg, 750 mg	E	
antacid maximum	E	
antacid maximum strength oral suspension 800-800-80 mg/10ml	E	
antacid oral suspension 400-400-40 mg/10ml	E	
antacid oral tablet chewable 500 mg, 750 mg	E	
antacid regular strength	E	
antacid ultra strength oral tablet chewable 1000 mg	E	
antacid/antigas	E	

Drug Name	Drug Tier	Notes
anti-diarrheal oral liquid	E	
anti-diarrheal oral tablet	E	
ATROPEN INTRAMUSCULAR SOLUTION AUTO-INJECTOR	3	
atropine sulfate injection solution 0.4 mg/ml, 1 mg/ml	E	
atropine sulfate injection solution prefilled syringe 0.25 mg/5ml	1	
atropine sulfate intravenous solution	1	
ATROPINE SULFATE INTRAVENOUS SOLUTION PREFILLED SYRINGE 0.8 MG/2ML, 1 MG/2.5ML, 1.2 MG/3ML	3	
atropine sulfate solution 8 mg/20ml injection	1	
atropine sulfate solution 8 mg/20ml injection	E	
atropine sulfate solution prefilled syringe 0.5 mg/5ml injection	1	
atropine sulfate solution prefilled syringe 0.5 mg/5ml injection	E	
atropine sulfate solution prefilled syringe 1 mg/10ml injection	1	
atropine sulfate solution prefilled syringe 1 mg/10ml injection	E	
AVEDANA GLYCERIN (ADULT)	E	
BACICAP	E	
belladonna alkaloids-opium	E	
bisacodyl ec	\$0	QL

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

Drug Name	Drug Tier	Notes
bisacodyl rectal	E	
bismuth subsalicylate oral tablet chewable 262 mg	E	
casacara sagrada oral fluid extract	1	
CHENODAL	3	PA; SP
chlordiazepoxide-clidinium	E	
chocolated laxative	E	
citroma	\$0	QL
clearlax oral powder	\$0	QL
CLENPIQ	3	
constulose	1	
cromolyn sodium oral	1	
CUVPOSA	3	
cvs antacid extra strength oral tablet chewable 750 mg	E	
cvs gentle laxative rectal	E	
DARTISLA ODT	E	
DERMACINRX PROBISOL	E	
DERMACINRX PROBITRAN	E	
dicyclomine hcl oral	1	
diotame instydose	E	
diphenoxylate-atropine oral liquid	1	
diphenoxylate-atropine oral tablet 2.5-0.025 mg	1	
docu liquid	E	
docusate calcium	E	
docusate mini	E	
docusate sodium oral capsule 100 mg	E	
docusate sodium oral liquid 100 mg/10ml, 50 mg/5ml	E	

Drug Name	Drug Tier	Notes
docusate sodium oral syrup	E	
docuzen	E	
dok oral tablet	E	
DONNATAL	E	
ED-SPAZ	3	
ENEMEEZ MINI	E	
ENTEREG	3	
enulose	1	
EX-LAX MAXIMUM STRENGTH	E	
EX-LAX ORAL TABLET CHEWABLE	E	
EX-LAX ULTRA	E	
fiber laxative + calcium	E	
fiber laxative oral tablet	E	
fiber oral powder 28.3 %	E	
FLORANEX ONE	E	
gas relief extra strength oral capsule	E	
gas relief infants oral suspension	E	
GASTROCROM	3	
GATTEX	3	PA; SP
gavilax oral powder	\$0	QL
gavilyte-c	\$0	QL
gavilyte-g	\$0	QL
gavilyte-n with flavor pack	\$0	QL
GELUSIL	E	
generlac	1	
gentle laxative oral	\$0	QL
gentle laxative rectal	E	
gentlelax oral powder	\$0	QL
geri-kot	E	
GIALAX	E	
GLYCATE	E	

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

Drug Name	Drug Tier	Notes
glycerin (adult) rectal suppository 2 gm	E	
glycerin adult	E	
glycolax	\$0	QL
GLYCOPYRROLATE INJECTION SOLUTION PREFILLED SYRINGE 0.6 MG/3ML	3	
glycopyrrolate oral solution	1	PA
glycopyrrolate oral tablet 1 mg, 2 mg	1	
GLYCOPYRROLATE ORAL TABLET 1.5 MG	E	
glycopyrrolate pf	1	
GLYCOPYRROLATE SOLUTION PREFILLED SYRINGE 0.6 MG/3ML INTRAVENOUS	3	
GLYCOPYRROLATE SOLUTION PREFILLED SYRINGE 0.6 MG/3ML INTRAVENOUS	E	
GLYCOPYRROLATE SOLUTION PREFILLED SYRINGE 1 MG/5ML INJECTION	3	
GLYCOPYRROLATE SOLUTION PREFILLED SYRINGE 1 MG/5ML INJECTION	E	
GLYCOPYRROLATE SOLUTION PREFILLED SYRINGE 1 MG/5ML INTRAVENOUS	3	
GLYCOPYRROLATE SOLUTION PREFILLED SYRINGE 1 MG/5ML INTRAVENOUS	E	

Drug Name	Drug Tier	Notes
GLYRX-PF INJECTION SOLUTION PREFILLED SYRINGE	3	
gnp senna lax	E	
GOLYTELY ORAL SOLUTION RECONSTITUTED 236 GM	3	
goodsense advanced antacid	E	
goodsense antacid & gas relief	E	
goodsense antacid oral tablet chewable 500 mg, 750 mg	E	
goodsense anti-diarrheal	E	
HELIDAC THERAPY	3	
high potency probiotic	E	
hm stomach relief oral suspension 525 mg/30ml	E	
hm stool softener oral capsule 100 mg	E	
hyoscyamine sulfate er oral tablet extended release 12 hour	E	
hyoscyamine sulfate oral elixir	1	
hyoscyamine sulfate oral solution	E	
hyoscyamine sulfate oral tablet	1	
hyoscyamine sulfate oral tablet dispersible	1	
hyoscyamine sulfate sl	1	
hyoscyamine sulfate tablet sublingual 0.125 mg sublingual	1	
hyoscyamine sulfate tablet sublingual 0.125 mg sublingual	E	
hyosyne	1	

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

Drug Name	Drug Tier	Notes
IBSRELA	E	
IMODIUM A-D ORAL TABLET	E	
IMODIUM MULTI-SYMPTOM RELIEF ORAL TABLET	E	
infants gas relief oral suspension 20 mg/0.3ml	E	
KRISTALOSE	E	
LACTEROL	E	
lactobacillus oral tablet	E	
lactulose encephalopathy	1	
lactulose oral packet	E	
lactulose oral solution	1	
laxative max str	E	
laxative regular strength	E	
LEVBIID	E	
LEVSIN ORAL TABLET	E	
LEVSIN/SL	E	
LIBRAX	3	
LINZESS	2	ST; QL
LOMOTIL ORAL TABLET	3	
loperamide hcl oral capsule	1	
loperamide hcl oral solution 2 mg/15ml	E	
loperamide hcl oral tablet	E	
loperamide hcl solution 1 mg/7.5ml oral	E	
loperamide-simethicone	E	
LOTRONEX	3	PA
LUBIPROSTONE	E	

Drug Name	Drug Tier	Notes
MAALOX MULTI SYMPTOM MAX ST ORAL SUSPENSION	E	
magnesium citrate oral solution 1.745 gm/30ml	\$0	QL
magnesium oxide oral tablet 400 mg, 420 mg	E	
methscopolamine bromide oral	1	
milk of magnesia concentrate	E	
milk of magnesia oral suspension 1200 mg/15ml, 2400 mg/30ml, 400 mg/5ml	E	
mineral oil heavy oral	1	
mm clearlax	\$0	QL
mm stool softener laxative	E	
MOTTEGRITY	3	ST; QL
MOTOFEN	E	
MOVANTIK	E	
MOVIPREP	E	
MYLICON INFANTS GAS RELIEF	E	
MYTESI	3	QL
natural senna laxative oral tablet 8.6 mg	E	
NEWFLORA PROBIOTIC	E	
NULEV	E	
OMECLAMOX-PAK	2	
ONELAX	E	
opium	E	
OSCIMIN ORAL TABLET	3	
OSCIMIN SUBLINGUAL	3	
OSMOPREP	E	
pb-hyoscy-atropine-scopolamine	E	

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

Drug Name	Drug Tier	Notes
peg 3350-kcl-na bicarb-nacl	\$0	QL
peg-3350/electrolytes	\$0	QL
peg-3350/electrolytes/ascorbic acid	1	
peg-kcl-nacl-nasulf-na asc-c	1	
peg-prep	1	
PERDIEM OVERNIGHT RELIEF	E	
phenobarbital-belladonna alk	E	
PHENOHYTRO	E	
pink bismuth maximum strength	E	
PLENVU	E	
polyethylene glycol 3350 oral powder	\$0	QL
PRIMIDAR	E	
PROBICHEW	E	
PROBINATE	E	
PROBITROL	E	
PRODIGEN	E	
PROMELLA IN PREBIOTIC	E	
PROMEROL	E	
PYLERA	2	
qc magnesium citrate	\$0	QL
quad-probiotic	E	
REJUVAFLOR	E	
RELISTOR ORAL	E	
RELISTOR SUBCUTANEOUS SOLUTION 12 MG/0.6ML, 8 MG/0.4ML	E	
RELTONE	E	
RESTORA RX	3	
ROBINUL ORAL	3	PA

Drug Name	Drug Tier	Notes
ROBINUL-FORTE	3	PA
saccharomyces boulardii	E	
senexon-s	E	
senna oral liquid	E	
senna oral syrup 8.8 mg/5ml	E	
senna oral tablet 8.6 mg	E	
senna plus oral tablet	E	
senna s	E	
senna smooth	E	
senna-docusate sodium	E	
senna-plus	E	
senna-s	E	
SENOKOT EXTRA STRENGTH	E	
SENOKOT S	E	
SEROSTIM SUBCUTANEOUS SOLUTION RECONSTITUTED 4 MG, 5 MG, 6 MG	3	PA; SP
simethicone drops infants oral suspension	E	
simethicone oral capsule 125 mg	E	
simethicone oral tablet chewable 80 mg	E	
simethicone ultra strength	E	
sm calcium antacid ex st	E	
sodium bicarbonate oral powder	1	
sodium bicarbonate oral tablet 325 mg, 650 mg	E	
soothe oral tablet	E	

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

Drug Name	Drug Tier	Notes
stimulant laxative oral tablet	E	
stomach relief oral tablet chewable	E	
stool softener laxative oral capsule 100 mg	E	
stool softener oral capsule 100 mg, 250 mg	E	
stool softener plus laxative	E	
stool softener/laxative oral tablet	E	
SUPREP BOWEL PREP KIT	3	
SUTAB	3	
SYMPROIC	2	ST; QL
TALICIA	3	
TRULANCE	E	
TUMS CHEWY BITES	E	
URSO 250	3	
URSO FORTE	3	
URSODIOL ORAL CAPSULE 200 MG, 400 MG	E	
ursodiol oral capsule 300 mg	1	
ursodiol oral tablet	1	
URSODIOL+SYRSPE ND SF	E	
vegetable lax+stool softener	E	
VIBERZI	3	PA; QL
VISBIOME	E	
VOQUEZNA DUAL PAK	E	
VOQUEZNA TRIPLE PAK	E	
womens 50 billion	E	
XERMELO	3	PA; SP; QL
ZELAC	E	

Drug Name	Drug Tier	Notes
ZELNORM	3	PA; QL
ZORBTIVE	3	PA; SP
<b>Genetic or Enzyme Disorder - Drugs for Replacement, Modification, Treatment</b>		
ALDURAZYME	2	PA; SP
AMONDYS 45	E	SP
betaine	1	SP
BRINEURA KIT	3	PA; SP
BUPHENYL ORAL POWDER 3 GM/TSP	3	SP
BUPHENYL ORAL TABLET	3	SP
CERDELGA	3	PA; SP
CEREZYME INTRAVENOUS SOLUTION RECONSTITUTED 400 UNIT	3	PA; SP
CHOLBAM	3	PA; SP
CITRULLINE EASY	E	
CREON	2	
CRYSVITA	3	PA; SP
CYSTADANE	3	SP
CYSTAGON	3	SP
ELAPRASE	2	PA; SP
ELELYSO	3	PA; SP
ENZADYNE	E	
EVRYSDI	3	PA; SP; QL
EXONDYS 51	E	SP
FABRAZYME	2	PA; SP
GALAFOLD	3	PA; SP; QL
KANUMA	3	PA; SP
KUVAN ORAL PACKET	E	SP
KUVAN ORAL TABLET	E	SP
LUMIZYME	2	PA; SP
MEPSEVII	3	PA; SP

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

Drug Name	Drug Tier	Notes
miglustat	1	PA; SP
MYALEPT	3	PA; SP
NAGLAZYME	2	PA; SP
NEXVIAZYME	3	PA; SP
nitisinone	1	PA; SP
NITYR	3	PA; SP
NULIBRY	3	PA; SP
OCALIVA	3	PA; SP; QL
ORFADIN	3	PA; SP
PALYNZIQ	3	PA; SP; QL
PANCREAZE ORAL CAPSULE DELAYED RELEASE PARTICLES 10500-35500 UNIT, 16800-56800 UNIT, 21000-54700 UNIT, 2600-8800 UNIT, 37000-97300 UNIT, 4200-14200 UNIT	E	
PERTZYE	E	
PROCYSBI	E	SP
RAVICTI	3	PA; SP
REVCIVI	3	PA; SP
sapropterin dihydrochloride oral packet	1	PA; SP
sapropterin dihydrochloride oral tablet	1	PA; SP
sodium phenylbutyrate oral powder 3 gm/tsp	1	SP
sodium phenylbutyrate oral tablet	1	SP
STRENSIQ	2	PA; SP
SUCRAID	3	SP
VIMIZIM	3	PA; SP
VIOKACE	E	
VOXZOGO	3	PA; SP; QL
VPRIV	3	PA; SP
VYONDYS 53	E	SP

Drug Name	Drug Tier	Notes
XURIDEN	3	PA; SP; QL
ZAVESCA	3	PA; SP
ZENPEP ORAL CAPSULE DELAYED RELEASE PARTICLES 10000-32000 UNIT, 15000-47000 UNIT, 20000-63000 UNIT, 25000-79000 UNIT, 3000-10000 UNIT, 40000-126000 UNIT, 5000-24000 UNIT	2	
ZOLGENSMA	3	PA; SP
<b>Genitourinary Agents - Drugs for Bladder, Genital and Kidney Conditions</b>		
AURYXIA	3	
bethanechol chloride oral	1	
BI-MIX	3	
calcium acetate (phos binder)	1	
calcium acetate oral tablet 667 mg	1	
CAVERJECT	3	QL
CAVERJECT IMPULSE	3	QL
CERVIDIL	E	
CIALIS	3	QL
CUPRIMINE ORAL CAPSULE 250 MG	E	SP
darifenacin hydrobromide er	1	
DEPEN TITRATABS	2	SP
DETROL	3	
DETROL LA	3	
DITROPAN XL ORAL TABLET EXTENDED RELEASE 24 HOUR 10 MG, 5 MG	3	
EDEX	3	QL

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



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

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

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

Drug Name	Drug Tier	Notes
URIBEL	E	
URIMAR-T	E	
urin ds oral tablet 81.6 mg	E	
urinary pain relief oral tablet 95 mg	E	
URO-458	E	
UROGESIC-BLUE	E	
URO-MP	E	
USTELL	E	
UTIRA-C	E	
vardenafil hcl oral	E	
VELPHORO	3	
VESICARE	3	
VESICARE LS	E	
VIAGRA	E	
VILAMIT MB	E	
VILEVEV MB	E	
<b>Genitourinary Agents - Drugs for Prostate Conditions</b>		
alfuzosin hcl er	1	
AVODART	3	
CARDURA XL	E	
dutasteride oral	1	
dutasteride-tamsulosin hcl	1	
finasteride oral tablet 5 mg	1	
FLOMAX	E	
JALYN	3	
PROSCAR	3	
RAPAFLO	3	
silodosin	1	
tamsulosin hcl	1	
terazosin hcl oral	1	
UROXATRAL	3	

Drug Name	Drug Tier	Notes
<b>Hormonal Agents - Adrenal</b>		
ALKINDI SPRINKLE	E	
BETA 1 KIT	E	
BETALOAN SUIK	E	
BETAMETHASONE COMBO	E	
BETAMETHASONE SOD PHOS & ACET INJECTION SUSPENSION 7 (4-3) MG/ML	E	
BETAMETHASONE SOD PHOS & ACET SUSPENSION 6 (3-3) MG/ML INJECTION	E	
betamethasone sod phos & acet suspension 6 (3-3) mg/ml injection	1	
BSP 0820	E	
CELESTONE SOLUSPAN	3	
CONTRAST ALLERGY PREMEDIATION PACK	E	
CORTEF	3	
DEPO-MEDROL	3	
DEXABLISS	E	
dexamethasone intensol	1	
dexamethasone oral	1	
dexamethasone sod phosphate pf	1	
dexamethasone sodium phosphate injection solution 100 mg/10ml, 120 mg/30ml, 20 mg/5ml	1	
DEXAMETHASONE SODIUM PHOSPHATE SOLUTION 10 MG/ML INJECTION	3	

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

Drug Name	Drug Tier	Notes
dexamethasone sodium phosphate solution 10 mg/ml injection	1	
DEXAMETHASONE SODIUM PHOSPHATE SOLUTION 4 MG/ML INJECTION	3	
dexamethasone sodium phosphate solution 4 mg/ml injection	1	
DEXONTO 0.4%	3	
DMT SUIK	E	
DOUBLEDEX	E	
DXEVO 11-DAY	E	
DYURAL 80-LM	E	
DYURAL-40	E	
DYURAL-80	E	
DYURAL-L	E	
DYURAL-LM	E	
fludrocortisone acetate oral	1	
HEMADY	E	
HEXATRIONE	3	
HIDEX 6-DAY	E	
hydrocortisone oral	1	
KENALOG INJECTION	3	
KENALOG-80	3	
MAS CARE-PAK	E	
MEDROL ORAL TABLET 16 MG, 32 MG, 4 MG, 8 MG	3	
MEDROL ORAL TABLET 2 MG	2	
MEDROL ORAL TABLET THERAPY PACK	3	
MEDROLOAN II SUIK	E	
MEDROLOAN SUIK	E	

Drug Name	Drug Tier	Notes
METHYLPREDNISOLONE ACETATE INJECTION SUSPENSION 50 MG/ML	3	
METHYLPREDNISOLONE ACETATE SUSPENSION 40 MG/ML INJECTION	3	
methylprednisolone acetate suspension 40 mg/ml injection	1	
METHYLPREDNISOLONE ACETATE SUSPENSION 80 MG/ML INJECTION	3	
methylprednisolone acetate suspension 80 mg/ml injection	1	
methylprednisolone oral	1	
MILLIPRED ORAL TABLET	E	
MULTI-SPECIALTY	E	
ORAPRED ODT	3	
P-CARE K40	E	
P-CARE K40G	E	
P-CARE K40MX	E	
P-CARE K80	E	
P-CARE K80G	E	
P-CARE K80MX	E	
PEDIAPRED	3	
PHYSICIANS EZ USE JOINT/TUNNEL	E	
PHYSICIANS EZ USE M-PRED	E	
POD-CARE 100K	E	
POINT OF CARE L.2	E	
POINT OF CARE L.5	E	
POINT OF CARE LM DEP 2	E	

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

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

Drug Name	Drug Tier	Notes
triamcinolone acetonide suspension 40 mg/ml injection	1	
TRIAMCINOLONE ACETONIDE SUSPENSION 40 MG/ML INJECTION	3	
TRIAMCINOLONE ACETONIDE SUSPENSION 40 MG/ML INJECTION	E	
TRILOAN II SUIK	E	
TRILOAN SUIK	E	
ZCORT 7-DAY	E	
ZILRETTA	E	
<b>Hormonal Agents - Men's Health</b>		
ANDRODERM TRANSDERMAL PATCH 24 HOUR	2	PA
ANDROGEL PUMP TRANSDERMAL GEL 20.25 MG/ACT (1.62%)	3	PA
ANDROGEL TRANSDERMAL GEL 25 MG/2.5GM (1%), 50 MG/5GM (1%)	E	
AVEED	E	
danazol oral	1	
DEPO-TESTOSTERONE INTRAMUSCULAR SOLUTION	E	
EC-RX TESTOSTERONE	E	
FORTESTA	E	
JATENZO	E	
METHITEST	3	PA
methyltestosterone oral	E	
NATESTO	E	
oxandrolone oral	1	PA; QL
TESTIM	E	

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

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

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

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

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

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

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

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

Drug Name	Drug Tier	Notes
TEPEZZA	3	PA; SP
TRELSTAR MIXJECT	3	PA; SP; QL
TRIPTODUR	3	PA; SP; QL
ZOLADEX SUBCUTANEOUS IMPLANT 10.8 MG	3	SP; QL
ZOLADEX SUBCUTANEOUS IMPLANT 3.6 MG	2	SP; QL
ZOMACTON	E	SP
<b>Hormonal Agents - Prostaglandins</b>		
KORLYM	3	PA; SP; QL
<b>Hormonal Agents - Selective Estrogen Receptor Modifying Agents</b>		
EVISTA	3	
OSPHENA	3	
raloxifene hcl	1	
<b>Hormonal Agents - Sex Hormones and Birth Control</b>		
ACTIVELLA ORAL TABLET 1-0.5 MG	3	
afirmelle	\$0	QL
aftera	\$0	QL
ALORA	3	ST
altavera	\$0	QL
alyacen 1/35	\$0	QL
alyacen 7/7/7	\$0	QL
amabelz	1	
amethia	\$0	QL
amethyst	\$0	QL
ANGELIQ	3	
ANNOVERA	\$0	QL
apri	\$0	QL
aranelle	\$0	QL
ashlyna	\$0	QL
aubra	\$0	QL

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

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

Drug Name	Drug Tier	Notes
dasetta 1/35	\$0	QL
dasetta 7/7/7	\$0	QL
daysee	\$0	QL
deblitane	\$0	QL
DELESTROGEN	3	
delyla	\$0	QL
DEPO-ESTRADIOL	3	
DEPO-PROVERA INTRAMUSCULAR SUSPENSION 150 MG/ML	3	QL
DEPO-PROVERA INTRAMUSCULAR SUSPENSION PREFILLED SYRINGE	3	QL
DEPO-SUBQ PROVERA 104 SUBCUTANEOUS SUSPENSION PREFILLED SYRINGE	\$0	QL
desogestrel-ethinyl estradiol	\$0	QL
DIVIGEL	3	
dolishale	\$0	QL
dotti	1	
drospiren-eth estrad-levomefol	\$0	QL
drospirenone-ethinyl estradiol	\$0	QL
DUAVEE	2	
econtra ez	\$0	QL
econtra one-step	\$0	QL
EC-RX ESTRADIOL	E	
EC-RX PROGESTERONE	E	
EEMT	E	
EEMT HS	E	
ELESTRIN	3	
elinest	\$0	QL
ELLA	\$0	QL

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



Drug Name	Drug Tier	Notes
eluryng	\$0	QL
emoquette	\$0	QL
ENDOMETRIN	2	PA
enpresse-28	\$0	QL
enskyce oral tablet 0.15-30 mg-mcg	\$0	QL
errin	\$0	QL
est estrogens- methyltest ds	E	
est estrogens- methyltest hs	E	
est estrogens- methyltest oral tablet 1.25-2.5 mg	E	
estarylla	\$0	QL
ESTRACE	3	
estradiol oral	1	
estradiol transdermal	1	
estradiol vaginal	1	
estradiol valerate intramuscular oil 20 mg/ml, 40 mg/ml	1	
estradiol-norethindrone acet	1	
ESTRING	3	QL
ESTROGEL	3	
ethynodiol diac-eth estradiol	\$0	QL
etonogestrel-ethinyl estradiol	\$0	QL
EVAMIST	3	
falmina	\$0	QL
fayosim	\$0	QL
FEMRING	3	ST; QL
femynor	\$0	QL
FIRST- PROGESTERONE VGS VAGINAL SUPPOSITORY 100 MG, 200 MG	E	

Drug Name	Drug Tier	Notes
fyavolv	1	
gemmily	\$0	QL
GENERESS FE	E	
hailey 1.5/30	\$0	QL
hailey 24 fe	\$0	QL
hailey fe 1.5/30	\$0	QL
hailey fe 1/20	\$0	QL
heather	\$0	QL
hydroxyprogesterone caproate intramuscular	1	PA; SP
iclevia	\$0	QL
IMVEXXY MAINTENANCE PACK	2	
IMVEXXY STARTER PACK	2	
incassia	\$0	QL
introvale	\$0	QL
isibloom	\$0	QL
jaimiess	\$0	QL
jasmiel	\$0	QL
jencycla	\$0	QL
jinteli	1	
jolessa	\$0	QL
juleber	\$0	QL
junel 1.5/30	\$0	QL
junel 1/20	\$0	QL
junel fe 1.5/30	\$0	QL
junel fe 1/20	\$0	QL
junel fe 24	\$0	QL
kaitlib fe	\$0	QL
kalliga	\$0	QL
kariva	\$0	QL
kelnor 1/35	\$0	QL
kelnor 1/50	\$0	QL
kurvelo	\$0	QL
KYLEENA	E	
larin 1.5/30	\$0	QL
larin 1/20	\$0	QL

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

Drug Name	Drug Tier	Notes
larin 24 fe	\$0	QL
larin fe 1.5/30	\$0	QL
larin fe 1/20	\$0	QL
larissia	\$0	QL
layolis fe	\$0	QL
leena	\$0	QL
lessina	\$0	QL
levonest	\$0	QL
levonorgest-eth est & eth est	\$0	QL
levonorgest-eth estrad 91-day	\$0	QL
levonorgestrel oral tablet 1.5 mg	\$0	QL
levonorgestrel-ethinyl estrad	\$0	QL
levonorg-eth estrad triphasic oral tablet 50-30/75-40/ 125-30 mcg	\$0	QL
levora 0.15/30 (28)	\$0	QL
LILETTA (52 MG) INTRAUTERINE INTRAUTERINE DEVICE 20.1 MCG/DAY	E	
lillow	\$0	QL
LO LOESTRIN FE	\$0	QL
LOESTRIN 1.5/30 (21)	3	QL
LOESTRIN 1/20 (21)	3	QL
LOESTRIN FE 1.5/30	3	QL
LOESTRIN FE 1/20	3	QL
lojaimiess	\$0	QL
loryna	\$0	QL
LOSEASONIQUE	3	QL
low-ogestrel	\$0	QL
lo-zumandimine	\$0	QL
lutera	\$0	QL
lyleq	\$0	QL
lyllana	1	

Drug Name	Drug Tier	Notes
lyza	\$0	QL
MAKENA	2	PA; SP
marlissa	\$0	QL
medroxyprogesterone acetate intramuscular	\$0	QL
medroxyprogesterone acetate oral	1	
megestrol acetate oral suspension 40 mg/ml, 625 mg/5ml	1	
megestrol acetate oral tablet	1	
MENEST ORAL TABLET 0.3 MG, 0.625 MG, 1.25 MG	2	
MENOSTAR	3	ST
merzee	\$0	QL
microgestin 1.5/30	\$0	QL
microgestin 1/20	\$0	QL
microgestin 24 fe	\$0	QL
microgestin fe 1.5/30	\$0	QL
microgestin fe 1/20	\$0	QL
mili	\$0	QL
mimvey	1	
MINASTRIN 24 FE	E	
MINIVELLE	3	ST
MIRCETTE	3	QL
MIRENA (52 MG) INTRAUTERINE INTRAUTERINE DEVICE 20 MCG/DAY	E	
mono-linyah	\$0	QL
my choice	\$0	QL
my way	\$0	QL
MYFEMBREE	2	PA; QL
NATAZIA	\$0	QL
necon 0.5/35 (28)	\$0	QL
new day	\$0	QL
NEXPLANON	E	

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

Drug Name	Drug Tier	Notes
NEXTSTELLIS	E	
nikki	\$0	QL
nora-be	\$0	QL
norethin ace-eth estrad-fe oral capsule	\$0	QL
norethin ace-eth estrad-fe oral tablet 1-20 mg-mcg, 1.5-30 mg-mcg	\$0	QL
norethin ace-eth estrad-fe oral tablet chewable	\$0	QL
norethindrone acetate oral	1	
norethindrone acet-ethinyl est oral tablet	\$0	QL
norethindrone oral	\$0	QL
norethindrone-eth estradiol	1	
norethin-eth estradiol-fe	\$0	QL
norgestimate-eth estradiol oral tablet 0.25-35 mg-mcg	\$0	QL
norgestimate-ethinyl estradiol triphasic	\$0	QL
norlyda	\$0	QL
norlyroc	\$0	QL
nortrel 0.5/35 (28)	\$0	QL
nortrel 1/35 (21)	\$0	QL
nortrel 1/35 (28)	\$0	QL
nortrel 7/7/7	\$0	QL
NUVARING	3	QL
nylia 1/35	\$0	QL
nylia 7/7/7	\$0	QL
nymyo	\$0	QL
ocella	\$0	QL
opcicon one-step	\$0	QL
option 2	\$0	QL
ORIAHNN	2	PA; QL

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

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

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

Drug Name	Drug Tier	Notes
wymzya fe	\$0	QL
xulane	\$0	QL
YASMIN 28	3	QL
YAZ	E	
yuvafem	1	
zafemy	\$0	QL
zovia 1/35 (28)	\$0	QL
zumandimine	\$0	QL
<b>Hormonal Agents - Thyroid</b>		
ARMOUR THYROID	3	ST
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	
propylthiouracil oral	1	
SODIUM IODIDE I-131	3	
SYNTHROID	3	
THYQUIDITY	3	
TIROSINT	3	
TIROSINT-SOL	3	
unithroid	1	
<b>Immunological Agents - Drugs for Immune System Stimulation or Suppression</b>		
ACTEMRA	3	PA; SP
ACTEMRA ACTPEN	3	PA; SP
ACTIMMUNE	2	PA; SP
ALFERON N	2	SP

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

Drug Name	Drug Tier	Notes
ARAVA	3	
ARCALYST	3	PA; SP
ASCENIV	E	SP
ASTAGRAF XL	3	SP
ATGAM	2	SP
AVSOLA	2	PA; SP
AZASAN	3	
azathioprine oral	1	
azathioprine sodium	1	
BENLYSTA	3	PA; SP
BERINERT	3	PA; SP; QL
BIVIGAM	3	PA; SP
CELLCEPT	3	SP
CELLCEPT INTRAVENOUS	3	SP
CIMZIA PREFILLED KIT SUBCUTANEOUS PREFILLED SYRINGE KIT	2	PA; SP
CIMZIA STARTER KIT SUBCUTANEOUS PREFILLED SYRINGE KIT	2	PA; SP
CIMZIA VIAL KIT	2	PA; SP
CINRYZE	3	PA; SP
COSENTYX (300 MG DOSE)	E	SP
COSENTYX 150 MG/ML	E	SP
COSENTYX SENSOREADY (300 MG)	E	SP
COSENTYX SENSOREADY PEN SUBCUTANEOUS SOLUTION AUTO-INJECTOR 150 MG/ML	E	SP
CUTAQUIG	E	SP
CUVITRU	3	PA; SP
cyclosporine intravenous	1	SP

Drug Name	Drug Tier	Notes
cyclosporine modified	1	SP
cyclosporine oral capsule	1	SP
CYTOGAM	2	PA; SP
ENBREL MINI	3	PA; SP
ENBREL SUBCUTANEOUS SOLUTION 25 MG/0.5ML	3	PA; SP
ENBREL SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	3	PA; SP
ENBREL SUBCUTANEOUS SOLUTION RECONSTITUTED	3	PA; SP
ENBREL SURECLICK SUBCUTANEOUS SOLUTION AUTO-INJECTOR	3	PA; SP
ENSPRYNG	3	PA; SP
ENTYVIO	3	PA; SP
ENVARBUS XR	3	SP
everolimus oral tablet 0.25 mg, 0.5 mg, 0.75 mg, 1 mg	1	SP
FIRAZYR	E	SP
FLEBOGAMMA DIF	3	PA; SP
GAMASTAN	2	PA; SP
GAMIFANT	3	PA; SP
GAMMAGARD	3	PA; SP
GAMMAGARD S/D LESS IGA	3	PA; SP
GAMMAKED INJECTION SOLUTION 1 GM/10ML, 10 GM/100ML, 20 GM/200ML, 5 GM/50ML	3	PA; SP

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

Drug Name	Drug Tier	Notes
GAMMAPLEX INTRAVENOUS SOLUTION 10 GM/100ML, 10 GM/200ML, 20 GM/200ML, 20 GM/400ML, 5 GM/100ML, 5 GM/50ML	3	PA; SP
GAMUNEX-C	3	PA; SP
gengraf oral capsule 100 mg, 25 mg	1	SP
gengraf oral solution	1	SP
HAEGARDA	3	PA; SP
HEPAGAM B INJECTION SOLUTION 312 UNIT/ML	3	
HIZENTRA SUBCUTANEOUS SOLUTION 1 GM/5ML, 10 GM/50ML, 2 GM/10ML, 4 GM/20ML	3	PA; SP
HIZENTRA SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	3	PA; SP
HUMIRA PEDIATRIC CROHNS START SUBCUTANEOUS PREFILLED SYRINGE KIT 80 MG/0.8ML, 80 MG/0.8ML & 40MG/0.4ML	2	PA; SP
HUMIRA PEN SUBCUTANEOUS PEN-INJECTOR KIT	2	PA; SP
HUMIRA PEN- CD/UC/HS STARTER	2	PA; SP
HUMIRA PEN- PEDIATRIC UC START	2	PA; SP

Drug Name	Drug Tier	Notes
HUMIRA PEN- PS/UV/ADOL HS START SUBCUTANEOUS PEN-INJECTOR KIT 40 MG/0.8ML	2	PA; SP
HUMIRA PEN- PSOR/UEIT STARTER	2	PA; SP
HUMIRA SUBCUTANEOUS PREFILLED SYRINGE KIT 10 MG/0.1ML, 20 MG/0.2ML, 40 MG/0.4ML, 40 MG/0.8ML	2	PA; SP
HYPERHEP B INTRAMUSCULAR SOLUTION 220 UNIT/ML	3	
HYPERHEP B INTRAMUSCULAR SOLUTION PREFILLED SYRINGE	3	
HYPERRAB	E	
HYPERRHO S/D INTRAMUSCULAR SOLUTION PREFILLED SYRINGE	2	SP
HYPERTET	3	
HYQVIA	3	PA; SP
icatibant acetate	1	PA; SP; QL
ILARIS SUBCUTANEOUS SOLUTION	2	PA; SP; QL
ILUMYA	3	PA; SP
IMOGAM RABIES-HT INJECTION SOLUTION 300 UNIT/2ML	E	
IMURAN	3	
INFLECTRA	2	PA; SP
INFLIXIMAB	E	SP
KALBITOR	3	PA; SP; QL

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

Drug Name	Drug Tier	Notes
KEDRAB INJECTION	E	
KEVZARA	3	PA; SP
KINERET SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	3	PA; SP
KYMRIAH INTRAVENOUS SUSPENSION 250000000 CELLS, 600000000 CELLS	3	PA; SP
leflunomide oral	1	
LUPKYNIS	E	SP
methotrexate oral	1	
methotrexate sodium (pf) injection solution 1 gm/40ml, 250 mg/10ml, 50 mg/2ml	1	
methotrexate sodium injection solution 250 mg/10ml, 50 mg/2ml	1	
methotrexate sodium injection solution reconstituted	1	
methotrexate sodium oral	1	
MICRHOGAM ULTRA- FILTERED PLUS INTRAMUSCULAR SOLUTION PREFILLED SYRINGE	2	SP
mycophenolate mofetil hcl	1	SP
mycophenolate mofetil intravenous	1	SP
mycophenolate mofetil oral	1	SP
mycophenolate sodium	1	SP
MYFORTIC	3	SP
NABI-HB INTRAMUSCULAR SOLUTION 312 UNIT/ML	3	

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

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

Drug Name	Drug Tier	Notes
PROVENGE INTRAVENOUS SUSPENSION 50000000 CELLS	2	PA; SP
RAPAMUNE	3	SP
RASUVO SUBCUTANEOUS SOLUTION AUTO- INJECTOR 10 MG/0.2ML, 12.5 MG/0.25ML, 15 MG/0.3ML, 17.5 MG/0.35ML, 20 MG/0.4ML, 22.5 MG/0.45ML, 25 MG/0.5ML, 30 MG/0.6ML, 7.5 MG/0.15ML	2	PA; QL
REDITREX	E	
REMICADE	E	SP
RENFLEXIS	E	SP
RHOGAM ULTRA- FILTERED PLUS INTRAMUSCULAR SOLUTION PREFILLED SYRINGE	2	SP
RHOPHYLAC INJECTION SOLUTION PREFILLED SYRINGE	2	
RIDAURA	3	SP
RINVOQ ORAL TABLET EXTENDED RELEASE 24 HOUR 15 MG	2	PA; SP
RINVOQ ORAL TABLET EXTENDED RELEASE 24 HOUR 30 MG, 45 MG	2	PA; SP; QL
RUCONEST	3	PA; SP; QL
sajazir	1	PA; SP; QL
SANDIMMUNE INTRAVENOUS	2	SP

Drug Name	Drug Tier	Notes
SANDIMMUNE ORAL CAPSULE	3	SP
SANDIMMUNE ORAL SOLUTION	2	SP
SAPHNELO	3	PA; SP
SILIQ	3	PA; SP
SIMPONI ARIA	2	PA; SP
SIMPONI SUBCUTANEOUS SOLUTION AUTO- INJECTOR	2	PA; SP
SIMPONI SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	2	PA; SP
SIMULECT	3	
sirolimus oral	1	SP
SKYRIZI	2	PA; SP; QL
SKYRIZI (150 MG DOSE)	2	PA; SP; QL
SKYRIZI PEN	2	PA; SP; QL
STELARA INTRAVENOUS	2	PA; SP
STELARA SUBCUTANEOUS SOLUTION 45 MG/0.5ML	2	PA; SP; QL
STELARA SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	2	PA; SP; QL
SYNAGIS	2	PA; SP
tacrolimus oral	1	SP
TAKHZYRO	3	PA; SP
TALTZ	3	PA; SP
temsirolimus	1	SP
THYMOGLOBULIN	3	
TICE BCG	2	SP
TORISEL	3	SP
TREMFYA	2	PA; SP
TREXALL	3	

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



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

Drug Name	Drug Tier	Notes
DIPHTHERIA- TETANUS TOXOIDS DT	\$0	
ENGERIX-B INJECTION SUSPENSION 10 MCG/0.5ML, 20 MCG/ML	\$0	
FLUAD QUADRIVALENT	\$0	
FLUARIX QUADRIVALENT INTRAMUSCULAR SUSPENSION PREFILLED SYRINGE	\$0	
FLUBLOK QUADRIVALENT	\$0	
FLUCELVAX QUADRIVALENT	\$0	
FLULAVAL QUADRIVALENT INTRAMUSCULAR SUSPENSION PREFILLED SYRINGE	\$0	
FLUZONE HIGH- DOSE QUADRIVALENT	\$0	
FLUZONE QUADRIVALENT INTRAMUSCULAR SUSPENSION , 0.5 ML	\$0	
FLUZONE QUADRIVALENT INTRAMUSCULAR SUSPENSION PREFILLED SYRINGE 0.5 ML	\$0	
GARDASIL 9	\$0	
HAVRIX INTRAMUSCULAR SUSPENSION 1440 EL U/ML, 720 EL U/0.5ML	\$0	

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

Drug Name	Drug Tier	Notes
HEPLISAV-B INTRAMUSCULAR SOLUTION PREFILLED SYRINGE	\$0	
HIBERIX INJECTION	\$0	
IMOVAX RABIES	E	
INFANRIX	\$0	
IPOL INJECTION INJECTABLE	\$0	
IXIARO	E	
JANSSEN COVID-19 VACCINE	\$0	
MENACTRA INTRAMUSCULAR SOLUTION	\$0	
MENQUADFI INTRAMUSCULAR SOLUTION	\$0	
MENVEO	\$0	
M-M-R II INJECTION	\$0	
MODERNA COVID-19 VACCINE	\$0	
PEDIARIX INTRAMUSCULAR SUSPENSION PREFILLED SYRINGE	\$0	
PEDVAX HIB INTRAMUSCULAR SUSPENSION	\$0	
PENTACEL	\$0	
PFIZER COVID-19 VAC-TRIS 5-11Y	\$0	
PFIZER-BIONT COVID-19 VAC-TRIS	\$0	
PFIZER-BIONTECH COVID-19 VACC	\$0	
PNEUMOVAX 23	\$0	
PREHEVBRIO	3	
PREVNAR 13	\$0	
PREVNAR 20	\$0	

Drug Name	Drug Tier	Notes
PROQUAD SUBCUTANEOUS SUSPENSION RECONSTITUTED	\$0	
QUADRACEL INTRAMUSCULAR SUSPENSION	\$0	
RABAVERT	E	
RECOMBIVAX HB INJECTION SUSPENSION 10 MCG/ML, 40 MCG/ML, 5 MCG/0.5ML	\$0	
ROTARIX	\$0	
ROTATEQ ORAL SOLUTION	\$0	
SHINGRIX INTRAMUSCULAR SUSPENSION RECONSTITUTED 50 MCG/0.5ML	\$0	
SPIKEVAX COVID-19 VACCINE	\$0	
STAMARIL	E	
TDVAX	\$0	
TENIVAC	\$0	
TETANUS- DIPHTHERIA TOXOIDS TD	\$0	
TRUMENBA	\$0	
TWINRIX INTRAMUSCULAR SUSPENSION PREFILLED SYRINGE	\$0	
TYPHIM VI INTRAMUSCULAR SOLUTION 25 MCG/0.5ML	E	
TYPHIM VI INTRAMUSCULAR SOLUTION PREFILLED SYRINGE	E	

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

Drug Name	Drug Tier	Notes
VAQTA INTRAMUSCULAR SUSPENSION 25 UNIT/0.5ML, 50 UNIT/ML	\$0	
VARIVAX	\$0	
VAXCHORA	E	
VAXNEUVANCE	\$0	
VIVOTIF	E	
YF-VAX	E	
<b>Inflammatory Bowel Disease Agents</b>		
ana-lex	E	
ANALPRAM HC EXTERNAL	E	
ANALPRAM HC SINGLES EXTERNAL	E	
ANALPRAM-HC EXTERNAL CREAM	3	
ANALPRAM-HC EXTERNAL LOTION	E	
anucort-hc	E	
ANUSOL-HC EXTERNAL	3	
ANUSOL-HC RECTAL SUPPOSITORY	E	
APRISO	1	
ASACOL HD	E	
AZULFIDINE	3	
AZULFIDINE EN-TABS	3	
balsalazide disodium	1	
budesonide er oral tablet extended release 24 hour	1	
budesonide oral	1	
CANASA	E	
COLAZAL	3	
CORTENEMA	3	
CORTIFOAM EXTERNAL	3	

Drug Name	Drug Tier	Notes
DELZICOL	E	
DIPENTUM	E	
HEMMOREX-HC	E	
hydrocortisone (perianal)	1	
hydrocortisone ace- pramoxine external cream 1-1 %	1	
hydrocortisone acetate rectal suppository 30 mg	E	
hydrocortisone acetate suppository 25 mg rectal	E	
hydrocortisone rectal enema	1	
hydrocort-pramoxine (perianal)	E	
LIALDA	1	
lidocaine-hydrocort (perianal)	E	
LIDOCAINE- HYDROCORTISONE ACE RECTAL GEL	E	
lidocaine- hydrocortisone ace rectal kit	E	
LIDOCORT EXTERNAL	E	
mesalamine er oral capsule extended release	1	
mesalamine er oral capsule extended release 24 hour	E	
mesalamine oral capsule delayed release 400 mg	1	
mesalamine oral tablet delayed release	E	
mesalamine rectal	1	
mesalamine-cleanser	1	

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

Drug Name	Drug Tier	Notes
ORTIKOS	E	
PENTASA	3	
PROCORT EXTERNAL	E	
PROCTOCORT EXTERNAL	3	
PROCTOCORT RECTAL SUPPOSITORY	E	
PROCTOFOAM HC EXTERNAL	2	
procto-med hc external	1	
procto-pak external	1	
proctosol hc external	1	
proctozone-hc external	1	
ROWASA RECTAL	3	
SFROWASA	2	
sulfasalazine oral	1	
TARPEYO	E	
UCERIS	3	
<b>Insulins - Diabetic Drugs</b>		
AUM MINI INSULIN PEN NEEDLE 32G X 5 MM	\$0	
INSULIN PEN NEEDLES 32G X 5 MM	\$0	
<b>Metabolic Bone Disease Agents - Drugs for Osteoporosis</b>		
ACTONEL ORAL TABLET 150 MG, 35 MG	3	QL
alendronate sodium oral solution	1	
alendronate sodium oral tablet 10 mg, 5 mg	1	
alendronate sodium oral tablet 35 mg, 70 mg	1	QL
AELVIA	3	QL

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

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

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

Drug Name	Drug Tier	Notes
AEROCHAMBER PLUS FLO-VU	2	
ALCOHOL PREP PADS PAD , 70 %	3	
ALCOHOL PREP PADS SHEET 70 %	3	
ALDER	E	
AMERICAN BEECH	E	
AMERICAN COCKROACH	E	
AMERICAN ELM	E	
AMINOPMRMS	E	
ANDEXXA INTRAVENOUS SOLUTION RECONSTITUTED 200 MG	E	
ANTIVENIN LATRODECTUS MACTANS	3	
ANTIVENIN MICRURUS FULVIUS INTRAVENOUS	3	
APP SLIM RMS	E	
ARIDOL INHALATION KIT 0 & 5 & 10 & 20 & 40 MG	E	
ARIZONA CYPRESS	E	
ARTISS EXTERNAL SOLUTION	3	
asilnasalrms	E	
ASPARTAME	E	
ASPARTAME (NUTRASWEET)	E	
AUTOSOFT 30 INFUSION SET	E	
AUTOSOFT 90 INFUSION SET	E	
AUTOSOFT XC INFUSION SET	E	
AVAILNEX	E	
AVITENE	E	

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

Drug Name	Drug Tier	Notes
AVITENE FLOUR	E	
AXONA	E	
AZALGIA	E	
BAHIA	E	
BALD CYPRESS	E	
BAYBERRY (WAX MYRTLE)	E	
BERMUDA GRASS SUBCUTANEOUS	E	
BINAXNOW COVID-19 AG HOME TEST	E	
BOTOX	2	PA; Non-Cosmetic; SP
BREATHE COMFORT CHAMBER/ADULT	E	
BREATHE COMFORT CHAMBER/CHILD	E	
BREATHE COMFORT HUMIDIFIER	E	
BREATHE EASE HUMIDIFIER	E	
BREATHE EASE NEB MASK/CHILD	E	
BREATHE EASE NEB MASK/INFANT	E	
BRIDION INTRAVENOUS SOLUTION 500 MG/5ML	E	
BRIDION SOLUTION 200 MG/2ML INTRAVENOUS	3	
BRIDION SOLUTION 200 MG/2ML INTRAVENOUS	E	
BROME	E	
BYLVAY	3	PA; SP
BYLVAY (PELLETS)	3	PA; SP
CALIFORNIA PEPPER TREE	E	

Drug Name	Drug Tier	Notes
CAMINO PRO COMPLETE/GLYTACTIN	E	
CARETOUCH 2 CPAP HOSE HANGER	E	
CARETOUCH CPAP & BIPAP HOSE	E	
CARETOUCH CPAP MASK WIPES	E	
CARETOUCH CPAP PRE-WASH SOLN	E	
CARETOUCH CPAP TUBE BRUSH	E	
CARETOUCH HYPODERMIC NEEDLE 26G X 1"	3	
CARETOUCH UNIVERSL CPAP FILTER	E	
CARTICEL	3	
CAT HAIR EXTRACT SUBCUTANEOUS	E	
CATTLE EPITHELIUM	E	
CAYA	\$0	QL
CEDAR ELM	E	
COCKLEBUR	E	
coenzyme q10 oral capsule 100 mg, 50 mg	E	
COLCIGEL	E	
COLD-EEZE NATURAL MULTI-SYMP MOUTH/THROAT	E	
COLD-EEZE PLUS DEFENSE MOUTH/THROAT	E	
COLD-EEZE SUGAR FREE MOUTH/THROAT LOZENGE	E	
COMPRESSOR NEBULIZER	E	

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

Drug Name	Drug Tier	Notes
CONDOMS	E	
coq10 oral capsule 200 mg	E	
CORN POLLEN	E	
CORTROSYN	E	
cosyntropin injection	E	
COVID-19 SPECIMEN COLLECTION	E	
CROFAB	3	
DANDELION	E	
deferoxamine mesylate	1	
DESFERAL INJECTION SOLUTION RECONSTITUTED 500 MG	3	
desflurane	E	
dexmedetomidine hcl in nacl intravenous solution 200-0.9 mcg/50ml-%	1	
dexmedetomidine hcl in nacl solution 200 mcg/50ml intravenous	1	
dexmedetomidine hcl in nacl solution 200 mcg/50ml intravenous	E	
dexmedetomidine hcl in nacl solution 400 mcg/100ml intravenous	1	
dexmedetomidine hcl in nacl solution 400 mcg/100ml intravenous	E	
dexmedetomidine hcl in nacl solution 80 mcg/20ml intravenous	1	
dexmedetomidine hcl in nacl solution 80 mcg/20ml intravenous	E	
dexmedetomidine hcl intravenous solution 200 mcg/2ml	1	
DIGIFAB	3	

Drug Name	Drug Tier	Notes
DOG EPITHELIUM	E	
DOG FENNEL	E	
DOJOLVI	E	
DROPSAFE ALCOHOL PREP	3	
DUROLANE INTRA-ARTICULAR	2	PA; SP
DUST MITE MIXED ALLERGEN EXT SUBCUTANEOUS	E	
DYSPORT	3	PA; SP
EASIVENT	2	
EASTERN COTTONWOOD	E	
EC-RX DHEA	E	
ECZEMOL	E	
ELLUME COVID-19 HOME TEST	E	
ENDARI	3	PA
ENDO AVITENE	E	
ENFAGROW NEUROPRO TODDLER	E	
ENFAGROW PREMIUM TODDLER GENTL	E	
ENFAMIL GENTLEASE ORAL LIQUID	E	
ENFAMIL GENTLEASE ORAL POWDER	E	
ENFAMIL INFANT ORAL POWDER	E	
ENFAMIL NEUROPRO ENFACARE ORAL LIQUID	E	
ENFAMIL NEUROPRO INFANT ORAL PACKET	E	

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

Drug Name	Drug Tier	Notes
ENFAMIL NEUROPRO INFANT ORAL POWDER	E	
ENFAMIL NEUROPRO SENSITIVE	E	
ENFAMIL NUTRAMIGEN LIPIL ORAL LIQUID	E	
ENFAMIL NUTRAMIGEN ORAL LIQUID	E	
ENFAMIL NUTRAMIGEN PROBIOT LGG	E	
ENLYTE	E	
ENOVARX-AMITRIPTYLINE	E	
ENTERAGAM	E	
enteric fish oil	E	
ENU NUTRITIONAL SHAKE	E	
ENU PRO3 PLUS	E	
EPISIL	E	
EQUACARE JR	E	
ergoloid mesylates oral	1	
ESSENTIAL CARE JR	E	
EUFLEXXA INTRA-ARTICULAR SOLUTION PREFILLED SYRINGE	2	PA; SP
FIRDAPSE	E	SP
FIRE ANT	E	
fish oil oral capsule 1000 mg	E	
FLEXICHAMBER	2	
FLEXICHAMBER ADULT MASK/SMALL	2	
FLEXICHAMBER CHILD MASK/LARGE	2	
FLEXICHAMBER CHILD MASK/SMALL	2	

Drug Name	Drug Tier	Notes
FLOWFLEX COVID-19 AG HOME TEST	E	
FORANE	E	
formaldehyde external solution 10 %	E	
formaldehyde solution 37 % external (rx)	1	
formaldehyde solution 37 % external (rx)	E	
FOSTEUM PLUS	E	
GELFILM EXTERNAL	E	
GEL-FLOW	E	
GEL-FLOW NT	E	
GELFOAM	E	
GELFOAM COMPRESSED SIZE 100	E	
GELFOAM DENTAL PACK SIZE 4	E	
GELFOAM SPONGE	E	
GELFOAM SPONGE SIZE 100	E	
GELFOAM SPONGE SIZE 200	E	
GELFOAM SPONGE SIZE 50	E	
GELFOAM-JMI POWDER	E	
GELFOAM-JMI SPONGE	E	
GELSYN-3	2	PA; SP
GELX	E	
GERMAN COCKROACH	E	
GIVLAARI	3	PA; SP
GLEOLAN	E	
glutaraldehyde external	1	
GLYTACTIN BETTERMILK 15 PACKET ORAL	E	

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



Drug Name	Drug Tier	Notes
GLYTACTIN BETTERMILK DE-LITE	E	
GLYTACTIN BUILD 10PE	E	
GLYTACTIN BUILD 20/20	E	
GLYTACTIN BUILD 20/20 PKU	E	
GLYTACTIN BURST	E	
GLYTACTIN COMPLETE 10PE	E	
GLYTACTIN RESTORE 10	E	
GLYTACTIN RESTORE 5	E	
GLYTACTIN RESTORE LITE 10	E	
GLYTACTIN RESTORE LITE 10PE	E	
GLYTACTIN RTD 10 LIQUID ORAL	E	
GLYTACTIN RTD 15	E	
GLYTACTIN RTD LITE 15 LIQUID ORAL	E	
GLYTACTIN SWIRL 15PE	E	
GOLDENROD	E	
GRASTEK	3	PA; QL
HACKBERRY	E	
HCU EASY	E	
heparin lock flush intravenous solution 10 unit/ml	1	
heparin sodium lock flush intravenous solution 100 unit/ml	1	
HEPMED	E	
HIBICLENS	E	
HOMACTIN AA PLUS	E	
HOME PAP KIT	E	
HORSE EPITHELIUM	E	

Drug Name	Drug Tier	Notes
HUMATROPEN FOR 12MG	E	
HUMATROPEN FOR 24MG	E	
HUMATROPEN FOR 6MG	E	
HYALGAN	E	SP
HYLAFEM	E	
HYMOVIS	E	SP
IGALMI	E	
IMUBOLIC	E	
INSPIREASE RESERVOIR BAGS	2	
INTELISWAB COVID-19 RAPID TEST	E	
INTERCEED	E	
IOSAT	E	
isoflurane	E	
ISOVACTIN AA PLUS ORAL PACKET	E	
JOHNSON GRASS	E	
JUNE GRASS POLLEN STANDARDIZED	E	
KERENDIA	3	PA; QL
KETAMINE HCL SUBLINGUAL	E	
KETAMINE HCL-SODIUM CHLORIDE INTRAVENOUS SOLUTION PREFILLED SYRINGE 50-0.9 MG/5ML-%	E	
KETOVIE	E	
KETOVIE 4:1 LIQUID ORAL	E	
KETOVIE PEPTIDE	E	
KOCHIA	E	
KORSUVA	E	SP
LENSCALE	E	
LIMBREL	E	

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

Drug Name	Drug Tier	Notes
LIMBREL250	E	
LIMBREL500	E	
LIVMARLI	E	SP
LORMATE	E	
MACRILEN	E	
MEADOW FESCUE GRASS POLLEN	E	
MELALEUCA	E	
MESQUITE	E	
METHACHOLINE CHLORIDE INHALATION	E	
METHAVER	E	
methergine oral	1	QL
METHOHEXITAL SODIUM INTRAVENOUS SOLUTION PREFILLED SYRINGE 100 MG/10ML	E	
methylegonovine maleate oral	1	QL
METOPIRONE	E	
MINIMED PUMP RESERVOIR 3ML	E	
MITE (D. FARINAE) SUBCUTANEOUS	E	
MITE (D. PTERONYSSINUS) SUBCUTANEOUS	E	
MIXED FEATHERS	E	
MIXED RAGWEED	E	
MLK F1	E	
MLK F2	E	
MLK F3	E	
MLK F4	E	
MONOVISC	E	SP
MORCIN	E	
MOUNTAIN CEDAR	E	
MOUSE EPITHELIUM	E	

Drug Name	Drug Tier	Notes
MSUD EASY	E	
MUCOTROL	E	
MUGARD	E	
MUGWORT	E	
MYOBLOC	3	PA; SP
NEBULIZER MASK ADULT	E	
NEBULIZER MASK CHILD	E	
NEODOT THERMOMETER	E	
NICAPRIN	E	
NICAZYME	E	
NORDIPEN 5 INJECTION DEVICE	E	
ODACTRA	3	PA; QL
odorless coated fish oil	E	
OLIVE TREE	E	
OMNIVEX	E	
ON/GO COVID-19 ANTIGEN TEST	E	
OPTIONS GYNOL II CONTRACEPTIVE	\$0	QL
ORALAIR	3	PA; QL
ORALAIR ADULT STARTER PACK	3	PA; QL
ORALAIR CHILDRENS STARTER PACK	3	PA; QL
ORAMAGICRX	E	
ORCHARD GRASS POLLEN	E	
ORTHOVISC INTRA- ARTICULAR SOLUTION PREFILLED SYRINGE	E	SP
OXBRYTA	E	SP
PALFORZIA	E	SP
PARI ALTERA NEBULIZER HANDSET	E	

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

Drug Name	Drug Tier	Notes
PARI PRONEB MAX LC PLUS	E	
PARI PRONEB MAX LC SPRINT	E	
PARI SMARTMASK BABY/ELBOW	E	
PARI TREK S COMBO PACK	E	
PARI VORTEX ADULT MASK	E	
PEDIATRIC COMPRESSOR NEBULIZER	E	
PH STRIPS	E	
PHEXXI	E	
PHOTREXA-PHOTREXA VISCOUS KIT	3	
PKU EASY	E	
PKU EASY MICROTABS	E	
PKU EXPLORE10	E	
PKU EXPLORE5	E	
PKU GO	E	
PKU SPHERE 20 ORAL PACKET	E	
PRAXBIND	E	
PRECEDEX INTRAVENOUS SOLUTION 1000 MCG/250ML, 200 MCG/50ML, 400 MCG/100ML, 80 MCG/20ML	E	
PRECEDEX INTRAVENOUS SOLUTION 200 MCG/2ML	3	
PREMIUM CONDOMS LUBRICATED	E	
PRID	E	
PRIVET	E	

Drug Name	Drug Tier	Notes
PRO-CRITIC	E	
PROFESSIONAL DNA COLLECTION	E	
PROLEVA	E	
PRONEB ULTRA FILTER SET	E	
PSORIZIDE FORTE	E	
PSORIZIDE ULTRA	E	
PURAMINO DHA/ARA	E	
QUEEN PALM	E	
QUICKVUE AT-HOME COVID-19 TEST	E	
RABBIT EPITHELIUM	E	
RADIOGARDASE	3	
RAGWITEK	3	PA; QL
RAPID GEL RX	E	
RED MAPLE	E	
RED MULBERRY	E	
RED TOP GRASS POLLEN	E	
RESOURCE THICKENUP JUICE	E	
RETHYMIC	E	SP
RHEUMATE	E	
RIBOZEL	E	
ROUGH MARSH ELDER	E	
RUSSIAN THISTLE	E	
RYPLAZIM	3	PA; SP
SCANDISHAKE ORAL PACKET	E	
sevoflurane	E	
SHAGBARK HICKORY	E	
SHARPS CONTAINER	E	
SHEEP SORREL	E	
SHORT RAGWEED POLLEN EXT	E	
SILATRIX	E	
SILTREX	E	

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

Drug Name	Drug Tier	Notes
SORBITOL IRRIGATION SOLUTION 3 %	E	
sorbitol-mannitol	E	
SORREL/DOCK MIX	E	
SPEEDGEL RX	E	
SPINRAZA	3	PA; SP
SPINY PIGWEED	E	
STREPTOCOCCINUM 30C	E	
SUPARTZ FX	E	SP
SUPRANE	E	
SURGICEL SNOW 1"X2"	E	
SURGICEL SNOW 2"X4"	E	
SURGICEL SNOW 4"X4"	E	
SWEET GUM	E	
SWEET VERNAL GRASS POLLEN	E	
SYNVISC INTRA-ARTICULAR SOLUTION PREFILLED SYRINGE	E	SP
SYNVISC ONE INTRA-ARTICULAR SOLUTION PREFILLED SYRINGE	E	SP
SYRINGE AVITENE	E	
T:SLIM X2 3ML CARTRIDGE	E	
TACHOSIL	3	
TALL RAGWEED	E	
TAVNEOS	E	SP
terrell	E	
THROMBI-GEL 10	E	
THROMBI-GEL 100	E	
THROMBI-GEL 40	E	
THROMBI-PAD	E	

Drug Name	Drug Tier	Notes
THYROGEN INTRAMUSCULAR SOLUTION RECONSTITUTED 0.9 MG	2	PA; SP
TIMOTHY GRASS POLLEN ALLERGEN SUBCUTANEOUS SOLUTION 100000 BAU/ML	E	
TISSEEL EXTERNAL KIT	3	
TOBAKIENT	E	
TRANZGEL	E	
TRAUMEEL EXTERNAL OINTMENT	E	
TRICHOPHYTON MENTAGROPHYTES	E	
TRILURON	E	SP
TRUSTEEL INFUSION SET	E	
T-SUPPORT MAX	E	
TYLACTIN BUILD 20PE TYR	E	
TYLACTIN COMPLETE 15 PE	E	
TYLACTIN RESTORE 10	E	
TYLACTIN RESTORE 5PE	E	
TYLACTIN RTD 15 LIQUID ORAL (OTC)	E	
TYLACTIN RTD 15 LIQUID ORAL (RX)	E	
TYR EASY	E	
TYROS 2	E	
ULTANE	E	
ULTRA HERS RX	E	
ULTRA HIS	E	
ULTRA PCOS	E	

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

Drug Name	Drug Tier	Notes
ULTRAFOAM SPONGE 2X6.25X7CM	E	
ULTRAFOAM SPONGE 8X12.5X1CM	E	
ULTRAFOAM SPONGE 8X12.5X3CM	E	
ULTRAFOAM SPONGE 8X25X1CM	E	
ULTRAFOAM SPONGE 8X6.25X1CM	E	
VARISOFT INFUSION SET	E	
VASCULERA	E	
VCF VAGINAL CONTRACEPTIVE VAGINAL FILM	\$0	QL
VCF VAGINAL CONTRACEPTIVE VAGINAL FOAM	\$0	QL
vcf vaginal contraceptive vaginal gel	\$0	QL
VILACTIN AA PLUS	E	
VILTEPSO	E	SP
VISTOGARD	3	
VITRASE INJECTION SOLUTION	3	
VORTEX VALVED HOLDING CHAMBER	2	
VYVGART	3	PA; SP
WESTAB MAX	E	
WESTERN JUNIPER	E	
WHITE BIRCH	E	
WHITE MULBERRY	E	
WHITE OAK	E	
WHITE PINE	E	
WIDE-SEAL DIAPHRAGM 60	\$0	QL
WIDE-SEAL DIAPHRAGM 65	\$0	QL

Drug Name	Drug Tier	Notes
WIDE-SEAL DIAPHRAGM 70	\$0	QL
WIDE-SEAL DIAPHRAGM 75	\$0	QL
WIDE-SEAL DIAPHRAGM 80	\$0	QL
WIDE-SEAL DIAPHRAGM 85	\$0	QL
WIDE-SEAL DIAPHRAGM 90	\$0	QL
WIDE-SEAL DIAPHRAGM 95	\$0	QL
XEOMIN	3	PA; SP
XIAFLEX	2	PA; SP
XYZBAC	E	
XYZMUNE	E	
YELLOW DOCK	E	
ZEEL ARTHRITIS PAIN RELIEF EXTERNAL	E	
ZOKINVY	3	PA; SP; QL
ZYVEXOL	E	
ZYVIT	E	
<b>Ophthalmic Agents - Drugs for Eye Allergy, Infection and Inflammation</b>		
ACULAR	3	
ACULAR LS	3	
ACUVAIL	E	
ALAWAY	E	
ALOCRIAL	E	
ALOMIDE	3	
ALREX	E	
AZASITE	3	
azelastine hcl ophthalmic	1	
bacitracin ophthalmic	1	
bepotastine besilate	1	ST
BEPREVE	E	

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

Drug Name	Drug Tier	Notes
BESIVANCE	3	
BETADINE OPHTHALMIC PREP	3	
BLEPH-10	3	
bromfenac sodium (once-daily)	1	QL
BROMSITE	E	
CILOXAN OPHTHALMIC OINTMENT	E	
ciprofloxacin hcl ophthalmic	1	
cromolyn sodium ophthalmic	1	
dexamethasone sodium phosphate ophthalmic	1	
DEXTENZA	E	SP
DEXYCU	E	
diclofenac sodium ophthalmic	1	
difluprednate	1	
DUREZOL	E	
epinastine hcl	1	
erythromycin ophthalmic	1	
eye itch relief	E	
EYSUVIS	3	PA
FLAREX	3	
fluorometholone ophthalmic	1	
flurbiprofen sodium	1	
FML	2	
FML FORTE	3	
FML LIQUIFILM	3	
gatifloxacin ophthalmic	1	
gentak ophthalmic ointment	1	
gentamicin sulfate ophthalmic solution	1	

Drug Name	Drug Tier	Notes
ILEVRO	E	
ILUVIEN INTRAVITREAL	E	SP
INVELTYS	3	
ketorolac tromethamine ophthalmic	1	
ketotifen fumarate ophthalmic	E	
KLARITY-A	E	
KLARITY-L	E	
levofloxacin ophthalmic	1	
LOTEMAX OPHTHALMIC GEL	E	
LOTEMAX OPHTHALMIC OINTMENT	E	
LOTEMAX OPHTHALMIC SUSPENSION	3	
LOTEMAX SM	3	
loteprednol etabonate ophthalmic gel	E	
loteprednol etabonate ophthalmic suspension	1	
MAXIDEX	3	
MITOSOL	3	
moxifloxacin hcl (2x day)	1	
moxifloxacin hcl ophthalmic solution	1	
MOXIFLOXACIN HCL OPHTHALMIC SOLUTION PREFILLED SYRINGE	E	
NATACYN	2	
NEVANAC	E	
OCUFLOX	3	
ofloxacin ophthalmic	1	
olopatadine hcl solution 0.1 % ophthalmic (otc)	E	

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

Drug Name	Drug Tier	Notes
olopatadine hcl solution 0.1 % ophthalmic (rx)	1	
olopatadine hcl solution 0.2 % ophthalmic (otc)	E	
olopatadine hcl solution 0.2 % ophthalmic (rx)	1	
OZURDEX INTRAVITREAL	E	SP
PATADAY OPTHALMIC SOLUTION 0.1 %, 0.2 %	E	
POVIDONE-IODINE OPTHALMIC	3	
PRED FORTE	3	
PRED MILD	3	
PREDNISOL ACE-MOXIFLOX-BROMFEN	E	
prednisolone acetate ophthalmic	1	
prednisolone acetate p-f	E	
prednisolone sodium phosphate ophthalmic	1	
PREDNISOLON-MOXIFLOX-NEPAFENAC	E	
PROLENSA	2	QL
RETISERT INTRAVITREAL	E	SP
sulfacetamide sodium ophthalmic	1	
tobramycin ophthalmic	1	
TOBREX OPTHALMIC OINTMENT	3	
trifluridine ophthalmic	1	
TRIPLE PMB	E	
TRIPLE PMK	E	
TYRVAYA	3	PA; QL
UPNEEQ	3	PA

Drug Name	Drug Tier	Notes
VANCOMYCIN HCL OPTHALMIC	3	
VIGAMOX	3	
XIPERE	E	
YUTIQ	E	SP
ZADITOR	E	
ZERVIATE	E	
ZIRGAN	3	
ZYMAXID	3	
<b>Ophthalmic Agents - Drugs for Glaucoma</b>		
acetazolamide er	1	
acetazolamide oral	1	
ALPHAGAN P OPTHALMIC SOLUTION 0.1 %	2	
ALPHAGAN P OPTHALMIC SOLUTION 0.15 %	E	
apraclonidine hcl	1	
AZOPT	E	
betaxolol hcl ophthalmic	1	
BETIMOL	3	
BETOPTIC-S	E	
bimatoprost ophthalmic	1	QL
brimonidine tartrate ophthalmic	1	
brimonidine tartrate-timolol	1	
BRIMONIDINE-DORZOLAMIDE	E	
brinzolamide	1	
carteolol hcl	1	
COMBIGAN	2	
COSOPT	3	
COSOPT PF OPTHALMIC SOLUTION 2-0.5 %	3	

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

Drug Name	Drug Tier	Notes
DORZOLAMIDE HCL SOLUTION 2 % OPHTHALMIC	3	
dorzolamide hcl solution 2 % ophthalmic	1	
dorzolamide hcl-timolol mal	1	
dorzolamide hcl-timolol mal pf	1	
DURYSTA	E	
IOPIDINE OPHTHALMIC SOLUTION 1 %	3	
ISTALOL	3	
KEVEYIS	3	PA; SP; QL
latanoprost ophthalmic	1	
LATANOPROST-TIMOLOL MALEATE	E	
levobunolol hcl ophthalmic solution 0.5 %	1	
LUMIGAN OPHTHALMIC SOLUTION 0.01 %	2	QL
methazolamide oral	1	
PHOSPHOLINE IODIDE	E	
pilocarpine hcl ophthalmic solution 1 %, 2 %, 4 %	1	
RHOPRESSA	3	QL
ROCKLATAN	3	QL
SIMBRINZA	2	
timolol maleate (once-daily)	1	
timolol maleate ocudose	1	
timolol maleate ophthalmic gel forming solution	E	
timolol maleate ophthalmic solution	1	

Drug Name	Drug Tier	Notes
timolol maleate pf	1	
TIMOLOL-BRIMON-DORZOL-LATANOPR	E	
TIMOLOL-BRIMONIDINE-DORZOLAMID	E	
TIMOLOL-DORZOLAMID-LATANOPROST	E	
TIMOPTIC	E	
TIMOPTIC OCUDOSE OPHTHALMIC SOLUTION 0.25 %	3	
TIMOPTIC OCUDOSE OPHTHALMIC SOLUTION 0.5 %	E	
TIMOPTIC-XE	E	
TRAVATAN Z	E	
travoprost (bak free)	1	QL
TRUSOPT	3	
VUITY	E	
VYZULTA	E	
XALATAN	3	
XELPROS	3	ST; QL
ZIOPTAN	E	
<b>Ophthalmic Agents - Drugs for Miscellaneous Eye Conditions</b>		
ak-poly-bac	1	
AKTEN	3	
ALCAINE	3	
ALTACAINE	3	
altachlore	E	
ALTAFLUOR BENOX	E	
altafrin ophthalmic solution 10 %, 2.5 %	1	
artificial eye	E	
artificial tears ophthalmic solution 0.5-0.6 %, 1.4 %	E	

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



Drug Name	Drug Tier	Notes
atropine sulfate ophthalmic ointment	1	
ATROPINE SULFATE OPHTHALMIC SOLUTION 0.01 %	E	
atropine sulfate ophthalmic solution 1 %	1	
bacitracin-polymyxin b ophthalmic ointment 500-10000 unit/gm	1	
bacitra-neomycin-polymyxin-hc	1	
BEOVU	E	SP
BEVACIZUMAB	3	SP
bimatoprost external	E	
BIO GLO	E	
BLEPHAMIDE S.O.P.	3	
carboxymethylcellulose sodium ophthalmic solution 0.5 %	E	
CEQUA	E	
CHONDROITIN SULFATE OPHTHALMIC	E	
cvs lubricant eye drops ophthalmic solution 0.4-0.3 %	E	
CYCLOGYL	3	
CYCLOMYDRIL	3	
cyclopentolate hcl ophthalmic	1	
CYCLOSPORINE IN KLARITY	E	
cyclosporine ophthalmic	E	
CYSTADROPS	3	PA; SP; QL
CYSTARAN	3	PA; SP; QL
DOUBLE PM	E	
dry eye relief ophthalmic gel 0.4-0.3 %	E	

Drug Name	Drug Tier	Notes
EYLEA INTRAVITREAL	3	PA; SP
FLUCAINE	E	
FLUORESCEIN SODIUM/BENOXINATE	E	
fluorescein-benoxinate	E	
fluor-i-strips a.t.	E	
FLURA-SAFE	E	
FUL-GLO	E	
GELFILM OPHTHALMIC	E	
GENTEAL TEARS NIGHT-TIME	E	
GENTEAL TEARS SEVERE DAY/NIGHT	E	
GLOSTRIPS OPHTHALMIC STRIP 1 MG	E	
GREEN GLO LISSAMINE GREEN	E	
homatropaire	1	
ISOPTO ATROPINE	3	
LACRISERT	3	
LATISSE	E	
lubricant eye drops (pf) ophthalmic solution 0.4-0.3 %	E	
lubricant eye drops ophthalmic solution 0.4-0.3 %, 0.5 %	E	
lubricant eye drops pf	E	
lubricant eye pm	E	
lubricant pm	E	
lubricating eye drops ophthalmic solution 0.4-0.3 %	E	
lubricating plus eye drops	E	
lubricating tears eye drops	E	

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

Drug Name	Drug Tier	Notes
LUCENTIS INTRAVITREAL	2	PA; SP
LUXTURNA INTRAOCULAR SUSPENSION 5000000000000 VG/ML	3	PA; SP
MAXITROL	3	
MEMBRANEBLUE	3	
MURO 128 OPHTHALMIC OINTMENT	E	
MURO 128 OPHTHALMIC SOLUTION 5 %	E	
MYDRIACYL	E	
neomycin-bacitracin zn-polymyx	1	
neomycin-polymyxin-dexameth ophthalmic ointment	1	
neomycin-polymyxin-dexameth ophthalmic suspension 3.5-10000-0.1	1	
neomycin-polymyxin-gramicidin ophthalmic solution 1.75-10000-.025	1	
neomycin-polymyxin-hc ophthalmic suspension 3.5-10000-1	1	
neo-polycin	1	
neo-polycin hc	1	
OXERVATE	3	PA; SP; QL
PAREMYD	E	
phenylephrine hcl ophthalmic solution 10 %, 2.5 %	1	
polycin	1	
polymyxin b-trimethoprim	1	
POLYTRIM	3	

Drug Name	Drug Tier	Notes
PRED-G	3	
PRED-G S.O.P.	3	
PREDNISOLONE ACETATE-NEPAFENAC	E	
PREDNISOLONE ACET-MOXIFLOXACIN	E	
PREDNISOLONE-BROMFENAC	E	
PREDNISOLONE-GATIFLOXACIN OPHTHALMIC SUSPENSION	E	
PREDNISOLONE-MOXIFLOXACIN	E	
PREDNISOLON-GATIFLOX-BROMFENAC	E	
PREDNISOLON-MOXIFLOX-BROMFENAC OPHTHALMIC SOLUTION 1-0.5-0.075 %	E	
proparacaine hcl ophthalmic	1	
proparacaine-fluorescein	E	
REFRESH RELIEVA	E	
REFRESH RELIEVA PF OPHTHALMIC SOLUTION 0.5-0.9 %	E	
RESTASIS	1	PA
RESTASIS MULTIDOSE OPHTHALMIC EMULSION 0.05 %	2	PA
sodium chloride (hypertonic)	E	
sulfacetamide-prednisolone ophthalmic solution	1	

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

Drug Name	Drug Tier	Notes
SUSVIMO (IMPLANT 1ST FILL)	3	PA; SP
SUSVIMO (IMPLANT REFILL)	3	PA; SP
SYSTANE COMPLETE	E	
SYSTANE HYDRATION PF	E	
SYSTANE ULTRA PF	E	
tetracaine hcl ophthalmic	1	
TOBRADEX OPHTHALMIC OINTMENT	3	
TOBRADEX OPHTHALMIC SUSPENSION	E	
TOBRADEX ST	3	
tobramycin-dexamethasone	1	
tropicamide ophthalmic	E	
TROPICAMIDE-CYCLOPENTOLATE-PE	E	
TROPICAMIDE-PHENYLEPHRINE SOLUTION 1-2.5 % OPHTHALMIC	3	
TROPICAMIDE-PHENYLEPHRINE SOLUTION 1-2.5 % OPHTHALMIC	E	
TROPIC-CYCLOPENT-PE-KETOROLAC	E	
TROPIC-CYCLOP-PE-KETO-PROPAR	E	
TROPIC-PROPARACA-PE-KETOROLAC	E	
ultra fresh pm	E	
ultra lubricating eye drops	E	
VABYSMO	E	SP

Drug Name	Drug Tier	Notes
VERKAZIA	E	
VISIONBLUE	3	
VISUDYNE	3	SP
XIIDRA	2	PA
ZYLET	3	
<b>Otic Agents - Drugs for Ear Conditions</b>		
acetic acid otic	1	
CETRAXAL	3	ST
CIPRO HC	E	
CIPRODEX	E	
ciprofloxacin hcl otic	1	ST
ciprofloxacin-dexamethasone	1	
CIPROFLOXACIN-FLUOCINOLONE PF	E	
cortic-nd	1	
CORTISPORIN-TC	3	
DERMOTIC	3	
flac	1	
fluocinolone acetonide otic	1	
hydrocortisone-acetic acid	1	
neomycin-polymyxin-hc otic	1	
ofloxacin otic	1	
OTIPRIO	3	
OTOVEL	E	
PRAMOTIC	3	
<b>Respiratory Tract / Pulmonary Agents - Drugs for Allergies, Cough, Cold</b>		
12 hour allergy-d	E	
12 hour nasal decongestant nasal	E	
12hr allergy & congestion	E	
24hr allergy relief	E	

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

Drug Name	Drug Tier	Notes
ADRENALIN NASAL	E	
all day allergy d	E	
allergy (cetirizine)	E	
allergy 24hour indoor/outdoor	E	
allergy 24-hr	E	
allergy childrens	E	
allergy rel child (loratadine)	E	
allergy relief (cetirizine)	E	
allergy relief (loratadine)	E	
allergy relief cetirizine	E	
allergy relief d-12	E	
allergy relief oral capsule	E	
allergy relief oral tablet 10 mg, 180 mg, 25 mg, 4 mg	E	
allergy relief/indoor/outdoor	E	
allergy relief/nasal decongest oral tablet extended release 12 hour	E	
allergy relief-d oral tablet extended release 12 hour	E	
antihistamine & nasal deconges	E	
azelastine hcl nasal	1	QL
azelastine-fluticasone	1	QL
banophen oral capsule 25 mg	E	
banophen oral tablet	E	
BECONASE AQ	3	QL
BENADRYL ALLERGY CHILDRENS ORAL LIQUID	E	
benzonatate	1	

Drug Name	Drug Tier	Notes
carbinoxamine maleate oral solution	1	
carbinoxamine maleate oral tablet 4 mg	1	
carbinoxamine maleate oral tablet 6 mg	E	
cetirizine hcl oral solution	1	
cetirizine hcl oral tablet	E	
cetirizine hcl oral tablet chewable 10 mg	E	
cetirizine-pseudoephedrine er	E	
chest congestion relief	E	
chest congestion relief dm oral syrup	E	
chlorpheniramine maleate er	E	
CHLOR-TRIMETON ORAL TABLET	E	
CINQAIR	3	PA; SP
CLARINEX ORAL TABLET	E	
CLARINEX-D 12 HOUR	E	
CLARITIN ORAL TABLET	E	
CLARITIN REDITABS ORAL TABLET DISPERSIBLE 10 MG	E	
CLARITIN-D 12 HOUR	E	
clemastine fumarate oral syrup	E	
clemastine fumarate oral tablet 2.68 mg	1	
CLOBETEX	E	
cold & flu relief daytime	E	
cold/flu daytime relief	E	
cough dm oral suspension extended release	E	

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

Drug Name	Drug Tier	Notes
cough/chest congestion dm	E	
CUROSURF INTRATRACHEAL SUSPENSION 120 MG/1.5ML	3	
cyproheptadine hcl oral	1	
DAYHIST ALLERGY 12 HOUR RELIEF	E	
daytime cold/flu relief oral capsule	E	
desloratadine oral tablet	1	
desloratadine oral tablet dispersible 5 mg	E	
DICOPANOL FUSEPAQ	E	
DICOPANOL RAPIDPAQ	E	
dimaphen dm cold/cough oral liquid	E	
diphenhydramine hcl injection	1	
diphenhydramine hcl oral capsule	E	
diphenhydramine hcl oral elixir	1	
diphenhydramine hcl oral liquid 12.5 mg/5ml	E	
diphenhydramine hcl oral tablet 25 mg	E	
diphenhydramine hcl oral tablet chewable	E	
DYMISTA	2	QL
FASENRA	2	PA; SP
FASENRA PEN	2	PA; SP
fexofenadine hcl oral tablet 180 mg, 60 mg	E	
fexofenadine-pseudoephed er oral tablet extended release 12 hour	E	

Drug Name	Drug Tier	Notes
flunisolide nasal solution 25 mcg/act (0.025%)	1	QL
fluticasone propionate nasal	1	
geri-dryl oral liquid	E	
geri-dryl oral tablet	E	
GILPHEX TR	E	
giltuss severe sinus	E	
goodsense all day allergy-d	E	
goodsense mucus er maximum str	E	
goodsense tussin dm max	E	
guaiaatussin ac	1	PA; QL
guaifenesin ac	1	PA; QL
guaifenesin oral tablet 400 mg	E	
guaifenesin-dm oral syrup	E	
hm adult tussin cough & chest	E	
HYCODAN ORAL SOLUTION	3	PA; QL
HYCODAN ORAL TABLET	3	PA; QL
hydrocodone bit-homatrop mbr	1	PA; QL
hydrocodone polst-chlorphen polst er susp oral suspension extended release	1	PA; QL
hydromet oral solution	1	PA; QL
HYPERSAL	3	
INFASURF INTRATRACHEAL	3	
ipratropium bromide nasal	1	
KARBINAL ER ORAL SUSPENSION EXTENDED RELEASE	E	

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

Drug Name	Drug Tier	Notes
levocetirizine dihydrochloride oral	1	
liquid allergy relief	E	
loratadine childrens oral syrup	E	
loratadine childrens oral tablet chewable	E	
loratadine oral syrup	E	
loratadine oral tablet	E	
loratadine-d 12hr	E	
loratadine-d 24hr	E	
maxi-tuss ac	1	PA; QL
maxi-tuss gmx	E	
maxi-tuss pe max	E	
m-dryl	E	
MICLARA LQ	E	
mometasone furoate nasal	1	QL
MUCINEX CHILDRENS FREEFROM ORAL LIQUID 5-100 MG/5ML	E	
MUCINEX CHILDRENS STUFFY NOSE	E	
MUCINEX DM	E	
mucinex fast-max cong headache	E	
MUCINEX FAST-MAX DM MAX	E	
MUCINEX SINUS-MAX SEV CONG/PN ORAL CAPSULE	E	
mucus dm	E	
mucus relief d oral tablet extended release 12 hour 60-600 mg	E	
mucus relief dm oral liquid	E	
mucus relief max st	E	
mucus relief oral tablet	E	

Drug Name	Drug Tier	Notes
mucus-d	E	
NASACORT ALLERGY 24HR	E	
nasal decongestant oral tablet 30 mg	E	
nasal decongestant pe	E	
nasal moisturizing spray	E	
nasal spray 12 hour	E	
nasal spray no drip	E	
NEO-SYNEPHRINE COLD/ALLRG MILD	E	
NEO-SYNEPHRINE COLD/ALLRGY EXT	E	
NEO-SYNEPHRINE COLD/ALLRGY REG	E	
NUCALA	2	PA; SP; QL
olopatadine hcl nasal	1	QL
OMNARIS	3	QL
PATANASE	3	QL
pediaclear pd childrens	E	
PHENERGAN INJECTION	3	
polytussin dm oral liquid	E	
potassium iodide oral solution	E	
promethazine hcl injection	1	
promethazine hcl oral	1	
promethazine hcl rectal suppository 12.5 mg, 25 mg	1	
promethazine vc	1	
promethazine vc/codeine	1	PA; QL
promethazine-codeine	1	PA; QL
promethazine-dm oral syrup	1	
promethazine-phenyleph-codeine	1	PA; QL

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

Drug Name	Drug Tier	Notes
promethazine-phenylephrine	1	
promethegan	1	
PROPEL	E	
PROPEL MINI	E	
PROPEL MINI SDS	E	
pseudoephedrine hcl er	E	
pseudoephedrine-bromphen-dm oral syrup 30-2-10 mg/5ml	1	
pseudoephedrine-guaifenesin er	E	
QNASL	3	QL
QNASL CHILDRENS	3	QL
ROBITUSSIN 12 HOUR COUGH CHILD	E	
ROBITUSSIN COUGH+CHEST CONG DM ORAL LIQUID 20-400 MG/20ML	E	
RYCLORA ORAL SOLUTION	3	
ryvent	E	
sesame oil nasal spray	E	
sinus 12 hour	E	
SINUVA	E	
sm loratadine oral tablet	E	
sodium chloride inhalation nebulization solution 0.9 %, 10 %, 3 %, 7 %	1	
SSKI	E	
sudogest 12 hour	E	
sudogest maximum strength	E	
sudogest oral tablet 30 mg	E	
SURVANTA INTRATRACHEAL	3	

Drug Name	Drug Tier	Notes
TEZSPIRE	E	SP
triprolidine hcl oral liquid 0.938 mg/ml	E	
tussin cf multi-symptom cold	E	
tussin dm max adult oral liquid 5-100 mg/5ml	E	
tussin dm max oral liquid 20-400 mg/20ml	E	
tussin dm oral syrup 100-10 mg/5ml	E	
TUXARIN ER	E	
TUZISTRA XR ORAL SUSPENSION EXTENDED RELEASE	E	
wal-tap cold/allergy oral elixir	E	
XHANCE	E	
XOLAIR	2	PA; SP
ZETONNA	3	QL
ZYRTEC ALLERGY ORAL TABLET	E	
<b>Respiratory Tract / Pulmonary Agents - Drugs for Asthma and Other Lung Conditions</b>		
ACCOLATE	3	
acetylcysteine inhalation	1	
ADRENALIN INJECTION SOLUTION 1 MG/ML	3	
ADVAIR DISKUS INHALATION AEROSOL POWDER BREATH ACTIVATED 100-50 MCG/ACT, 250-50 MCG/ACT, 500-50 MCG/ACT	1	QL
ADVAIR HFA	2	QL
AIRDUO DIGIHALER	E	

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

Drug Name	Drug Tier	Notes
AIRDUO RESPICLICK 113/14	E	
AIRDUO RESPICLICK 232/14	E	
AIRDUO RESPICLICK 55/14	E	
albuterol sulfate hfa aerosol solution 108 (90 base) mcg/act inhalation	1	QL
ALBUTEROL SULFATE HFA AEROSOL SOLUTION 108 (90 BASE) MCG/ACT INHALATION	E	
albuterol sulfate inhalation nebulization solution (2.5 mg/3ml) 0.083%, 0.63 mg/3ml, 1.25 mg/3ml, 2.5 mg/0.5ml	1	QL
ALBUTEROL SULFATE NEBULIZATION SOLUTION (5 MG/ML) 0.5% INHALATION	E	
albuterol sulfate nebulization solution (5 mg/ml) 0.5% inhalation	1	QL
albuterol sulfate oral	1	
ALVESCO	E	
ANORO ELLIPTA	2	QL
ARALAST NP INTRAVENOUS SOLUTION RECONSTITUTED 1000 MG, 500 MG	3	PA; SP
arformoterol tartrate	1	QL
ARMONAIR DIGIHALER	E	
ARNUITY ELLIPTA	2	QL
ASMANEX (120 METERED DOSES)	E	

Drug Name	Drug Tier	Notes
ASMANEX (14 METERED DOSES)	E	
ASMANEX (30 METERED DOSES)	E	
ASMANEX (60 METERED DOSES)	E	
ASMANEX HFA	E	
ATROVENT HFA	3	QL
AUVI-Q INJECTION SOLUTION AUTO-INJECTOR 0.1 MG/0.1ML	3	QL
AUVI-Q INJECTION SOLUTION AUTO-INJECTOR 0.15 MG/0.15ML, 0.3 MG/0.3ML	E	
BEVESPI AEROSPHERE	E	
BREO ELLIPTA	2	QL
BREZTRI AEROSPHERE	2	QL
BROVANA	E	
budesonide inhalation	1	QL
BUDESONIDE-FORMOTEROL FUMARATE	E	
COMBIVENT RESPIMAT	2	QL
cromolyn sodium inhalation	1	
DALIRESP	3	PA
DUAKLIR PRESSAIR	E	
DULERA	E	
ELIXOPHYLLIN	2	
epinephrine injection solution auto-injector	1	
EPINEPHRINE PROFESSIONAL	E	
EPINEPHRINESNAP-EMS	E	
EPINEPHRINESNAP-V	E	

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



Drug Name	Drug Tier	Notes
EPIPEN 2-PAK INJECTION SOLUTION AUTO-INJECTOR	3	ST
EPIPEN JR 2-PAK INJECTION SOLUTION AUTO-INJECTOR	E	
EPISNAP	E	
ESBRIET	3	PA; SP
FLOVENT DISKUS	2	QL
FLOVENT HFA	2	QL
FLUTICASONE FUROATE-VILANTEROL	E	
FLUTICASONE PROPIONATE HFA	E	
fluticasone-salmeterol inhalation aerosol powder breath activated 100-50 mcg/act, 250-50 mcg/act, 500-50 mcg/act	E	
FLUTICASONE-SALMETEROL INHALATION AEROSOL POWDER BREATH ACTIVATED 113-14 MCG/ACT, 232-14 MCG/ACT, 55-14 MCG/ACT	E	
formoterol fumarate inhalation	1	QL
GLASSIA	3	PA; SP
INCRUSE ELLIPTA	E	
ipratropium bromide inhalation	1	QL
ipratropium-albuterol	1	QL
levalbuterol hcl inhalation nebulization solution 0.31 mg/3ml, 0.63 mg/3ml, 1.25 mg/0.5ml, 1.25 mg/3ml	1	QL

Drug Name	Drug Tier	Notes
LEVALBUTEROL HFA INHALATION AEROSOL 45 MCG/ACT	E	
LONHALA MAGNAIR REFILL KIT	3	QL
LONHALA MAGNAIR STARTER KIT	3	QL
montelukast sodium oral	1	
OFEV	3	PA; SP
PERFOROMIST	3	QL
pirfenidone	1	PA; SP
PROAIR DIGIHALER INHALATION AEROSOL POWDER BREATH ACTIVATED 108 (90 BASE) MCG/ACT	E	
PROAIR HFA	E	
PROAIR RESPICLICK	E	
PROLASTIN-C INTRAVENOUS SOLUTION	3	PA; SP
PROLASTIN-C INTRAVENOUS SOLUTION RECONSTITUTED 1000 MG	3	PA; SP
PROVENTIL HFA	E	
PULMICORT FLEXHALER	2	QL
PULMICORT SUSPENSION	E	
QVAR REDIHALER	E	
SEREVENT DISKUS	2	QL
SINGULAIR	E	
SPIRIVA HANDIHALER	2	QL

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

Drug Name	Drug Tier	Notes
SPIRIVA RESPIMAT INHALATION AEROSOL SOLUTION 1.25 MCG/ACT, 2.5 MCG/ACT	2	QL
STERITALC	3	
STIOLTO RESPIMAT INHALATION AEROSOL SOLUTION 2.5-2.5 MCG/ACT	2	QL
STRIVERDI RESPIMAT	2	QL
SYMBICORT	2	QL
SYMJEPI	3	
terbutaline sulfate injection	1	
terbutaline sulfate oral	1	
THEO-24	3	
theophylline	1	
theophylline er oral tablet extended release 12 hour 300 mg, 450 mg	1	
theophylline er oral tablet extended release 24 hour	1	
TRELEGY ELLIPTA	2	QL
TUDORZA PRESSAIR INHALATION AEROSOL POWDER BREATH ACTIVATED 400 MCG/ACT	E	
VENTOLIN HFA	E	
wixela inhub inhalation aerosol powder breath activated 100-50 mcg/act, 250-50 mcg/act, 500-50 mcg/act	E	
XOPENEX NEB	3	QL
XOPENEX CONCENTRATE	3	QL
XOPENEX HFA	E	

Drug Name	Drug Tier	Notes
YUPELRI	3	QL
zafirlukast	1	
ZEMAIRA	3	PA; SP
zileuton er	E	
ZYFLO	E	
<b>Respiratory Tract / Pulmonary Agents - Drugs for Cystic Fibrosis</b>		
BETHKIS	E	SP
BRONCHITOL	E	
BRONCHITOL TOLERANCE TEST	E	
CAYSTON	E	SP
KALYDECO	3	PA; SP
KITABIS PAK	E	SP
ORKAMBI	3	PA; SP; QL
PULMOZYME INHALATION SOLUTION 2.5 MG/2.5ML	2	PA; SP
SYMDEKO	3	PA; SP; QL
TOBI NEBULIZER	E	SP
TOBI PODHALER	3	SP; QL
tobramycin inhalation nebulization solution 300 mg/4ml	1	SP
tobramycin nebulization solution 300 mg/5ml inhalation	1	SP
TOBRAMYCIN NEBULIZATION SOLUTION 300 MG/5ML INHALATION	E	SP
TRIKAFTA	3	PA; SP; QL
<b>Respiratory Tract / Pulmonary Agents - Drugs for Pulmonary Hypertension</b>		
ADCIRCA	3	PA; SP; QL
ADEMPAS	2	PA; SP; QL

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

Drug Name	Drug Tier	Notes
alyq	1	PA; SP; QL
ambrisentan	1	PA; SP; QL
bosentan	1	PA; SP; QL
epoprostenol sodium	1	PA; SP
FLOLAN	3	PA; SP
LETAIRIS	3	PA; SP; QL
OPSUMIT	2	PA; SP; QL
ORENITRAM	3	PA; SP
REMODULIN INJECTION SOLUTION 100 MG/20ML, 20 MG/20ML, 200 MG/20ML, 50 MG/20ML	E	SP
REVATIO INTRAVENOUS	3	PA; SP
REVATIO ORAL	3	PA; SP; QL
sildenafil citrate intravenous	1	PA; SP
sildenafil citrate oral suspension reconstituted	1	PA; SP; QL
sildenafil citrate oral tablet 20 mg	1	PA; SP; QL
tadalafil (pah)	1	PA; SP; QL
TRACLEER 62.5 MG, 125 MG	E	SP
TRACLEER 32 MG	3	PA; SP; QL
treprostinil	1	PA; SP
TYVASO	3	PA; SP; QL
TYVASO REFILL	3	PA; SP; QL
TYVASO STARTER	3	PA; SP; QL
UPTRAVI INTRAVENOUS	3	PA; SP
UPTRAVI ORAL	3	PA; SP; QL
VELETRI	3	PA; SP
VENTAVIS INHALATION SOLUTION 20 MCG/ML	3	PA; SP; QL

Drug Name	Drug Tier	Notes
<b>Respiratory Tract/Pulmonary Agents - Drugs to Treat Allergies, Cough, Cold and Lung Conditions</b>		
TYVASO DPI MAINTENANCE KIT	E	
TYVASO DPI TITRATION KIT	E	
<b>Skeletal Muscle Relaxants - Drugs for Muscle Pain and Spasm</b>		
AMRIX	E	
baclofen intrathecal	E	
BACLOFEN ORAL SOLUTION	E	
baclofen oral tablet	1	
carisoprodol oral	1	
chlorzoxazone oral tablet 375 mg, 750 mg	E	
chlorzoxazone oral tablet 500 mg	1	
chlorzoxazone tablet 250 mg oral	1	QL
chlorzoxazone tablet 250 mg oral	E	
CYCLO/GABA 10/300	E	
cyclobenzaprine hcl er	E	
cyclobenzaprine hcl oral tablet 10 mg, 5 mg	1	
cyclobenzaprine hcl oral tablet 7.5 mg	E	
CYCLOPHENE RAPIDPAQ	E	
DANTRIUM ORAL CAPSULE 25 MG	3	
dantrolene sodium oral	1	
ENOVARX-BACLOFEN	E	

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

Drug Name	Drug Tier	Notes
ENOVARX-CYCLOBENZAPRINE HCL	E	
FEXMID	3	
FLEQSUVY	E	
GABLOFEN INTRATHECAL SOLUTION 10000 MCG/20ML, 20000 MCG/20ML, 40000 MCG/20ML	E	
GABLOFEN INTRATHECAL SOLUTION PREFILLED SYRINGE 10000 MCG/20ML, 20000 MCG/20ML, 40000 MCG/20ML, 50 MCG/ML	E	
LIORESAL	E	
LORZONE	E	
LYVISPAH	E	
METAXALL CP	E	
metaxalone	E	
methocarbamol oral	1	
NORGESIC	E	
NORGESIC FORTE	E	
orphenadrine citrate er	1	QL
orphenadrine-aspirin-caffeine oral tablet 25-385-30 mg	E	
ORPHENGESIC FORTE ORAL TABLET 50-770-60 MG	E	
OZOBAX	E	
SOMA	3	
TABRADOL FUSEPAQ	E	
TABRADOL RAPIDPAQ	E	
tizanidine hcl oral	1	
VANADOM	3	
ZANAFLEX	E	

Drug Name	Drug Tier	Notes
<b>Sleep Disorder Agents</b>		
AMBIEN	E	
AMBIEN CR	E	
armodafinil	1	PA; QL
BELSOMRA	3	ST; QL
DAYVIGO	3	ST; QL
doxepin hcl oral tablet	1	QL
EDLUAR	E	
eszopiclone	1	QL
flurazepam hcl	1	PA; QL
HETLIOZ	E	SP
HETLIOZ LQ	E	SP
LUNESTA	E	
modafinil	1	PA; QL
NUVIGIL	E	
PROVIGIL	E	
QUVIVIQ	E	
ramelteon	1	QL
RESTORIL	E	
ROZEREM	3	QL
SILENOR	3	QL
sleep-aid oral capsule 50 mg	E	
SUNOSI	2	PA; QL
temazepam	1	QL
WAKIX	3	PA; SP; QL
XYREM	3	PA; SP; QL
XYWAV	3	PA; SP; QL
zaleplon	1	QL
zolpidem tartrate er	1	QL
zolpidem tartrate oral	1	QL
zolpidem tartrate sublingual	E	
ZOLPIMIST	E	

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

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1	Spanish	Tiene derecho a recibir ayuda e información en su idioma sin costo. Para solicitar un intérprete, llame al número de teléfono gratuito para miembros que se encuentra en su tarjeta de identificación del plan de salud y presione 0. TTY 711
2	Vietnamese	Quý vị có quyền được giúp đỡ và cấp thông tin bằng ngôn ngữ của quý vị miễn phí. Để yêu cầu được thông dịch viên giúp đỡ, vui lòng gọi số điện thoại miễn phí dành cho hội viên được nêu trên thẻ ID chương trình bảo hiểm y tế của quý vị, bấm số 0. TTY 711
3	Chinese	您有權利免費以您的母語得到幫助和訊息。洽詢一位翻譯員，請撥打您健保計劃會員卡上的免付費會員電話號碼，再按 0。聽力語言殘障服務專線 711
4	Korean	귀하는 도움과 정보를 귀하의 언어로 비용 부담없이 얻을 수 있는 권리가 있습니다. 통역사를 요청하기 위해서는 귀하의 플랜 ID카드에 기재된 무료 회원 전화번호로 전화하여 0번을 누르십시오. TTY 711
5	Arabic	لك الحق في الحصول على المساعدة والمعلومات بلغتك دون تحمل أي تكلفة. لطلب مترجم فوري، اتصل برقم الهاتف المجاني الخاص بالأعضاء المدرج ببطاقة مُعرّف العضوية الخاصة بخطتك الصحية، واضغط على 0. الهاتف النصي (TTY) 711
6	Urdu	آپ کو اپنی زبان میں مفت مدد اور معلومات حاصل کرنے کا حق ہے۔ کسی ترجمان سے بات کرنے کے لئے، ٹول فری ممبر فون نمبر پر کال کریں جو آپ کے ہیلتھ پلان آئی ڈی کارڈ پر درج ہے، 0 دبائیں۔ TTY 711
7	Tagalog	May karapatan kang makatanggap ng tulong at impormasyon sa iyong wika nang walang bayad. Upang humiling ng tagasalin, tawagan ang toll-free na numero ng telepono na nakalagay sa iyong ID card ng planong pangkalusugan, pindutin ang 0. TTY 711
8	French	Vous avez le droit d'obtenir gratuitement de l'aide et des renseignements dans votre langue. Pour demander à parler à un interprète, appelez le numéro de téléphone sans frais figurant sur votre carte d'affilié du régime de soins de santé et appuyez sur la touche 0. ATS 711.
9	Hindi	आप के पास अपनी भाषा में सहायता एवं जानकारी निःशुल्क प्राप्त करने का अधिकार है। दुभाषिण के लिए अनुरोध करने के लिए, अपने हेल्थ प्लान ID कार्ड पर सूचीबद्ध टोल-फ्री नंबर पर फ़ोन करें, 0 दबाएं। TTY 711
10	Persian (Farsi)	شما حق دارید که کمک و اطلاعات به زبان خود را به طور رایگان دریافت نمایید. برای درخواست مترجم شفاهی با شماره تلفن رایگان فید شده در کارت شناسایی برنامه بهداشتی خود تماس حاصل نموده و 0 را فشار دهید. TTY 711
11	German	Sie haben das Recht, kostenlose Hilfe und Informationen in Ihrer Sprache zu erhalten. Um einen Dolmetscher anzufordern, rufen Sie die gebührenfreie Nummer auf Ihrer Krankenversicherungskarte an und drücken Sie die 0. TTY 711
12	Gujarati	તમને વિના મૂલ્યે મદદ અને તમારી ભાષામાં માહિતી મેળવવાનો અધિકાર છે. દુભાષિયા માટે વિનંતી કરવા, તમારા હેલ્થ પ્લાન ID કાર્ડ પરની સૂચીમાં આપેલ ટોલ-ફ્રી મેમ્બર ફોન નંબર ઉપર કોલ કરો, 0 દબાવો. TTY 711
13	Russian	Вы имеете право на бесплатное получение помощи и информации на вашем языке. Чтобы подать запрос переводчика позвоните по бесплатному номеру телефона, указанному на обратной стороне вашей идентификационной карты и нажмите 0. Линия TTY 711
14	Japanese	ご希望の言語でサポートを受けたり、情報を入手したりすることができます。料金はかかりません。通訳をご希望の場合は、医療プランのIDカードに記載されているメンバー用のフリーダイヤルまでお電話の上、0を押してください。TTY専用番号は711です。
15	Laotian	ທ່ານມີສິດທີ່ຈະໄດ້ຮັບການຊ່ວຍເຫຼືອແລະຂໍ້ມູນຂ່າວສານທີ່ເປັນພາສາຂອງທ່ານບໍ່ມີຄ່າໃຊ້ຈ່າຍ. ເພື່ອຂໍຮ້ອງນາຍພາສາ, ໂທລະສັບຫາຕາມລາຍລະອຽດສູ່ບໍລິສັດສະມາຊິກທີ່ໄດ້ລະບຸໄວ້ໃນບັດສະມາຊິກຂອງທ່ານ, ກົດເລກ 0. TTY 711



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**Premium standard**