



# 2022

## Your Prescription Drug List/Formulary

**Effective September 1, 2022**

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

In this guide you can find:

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

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

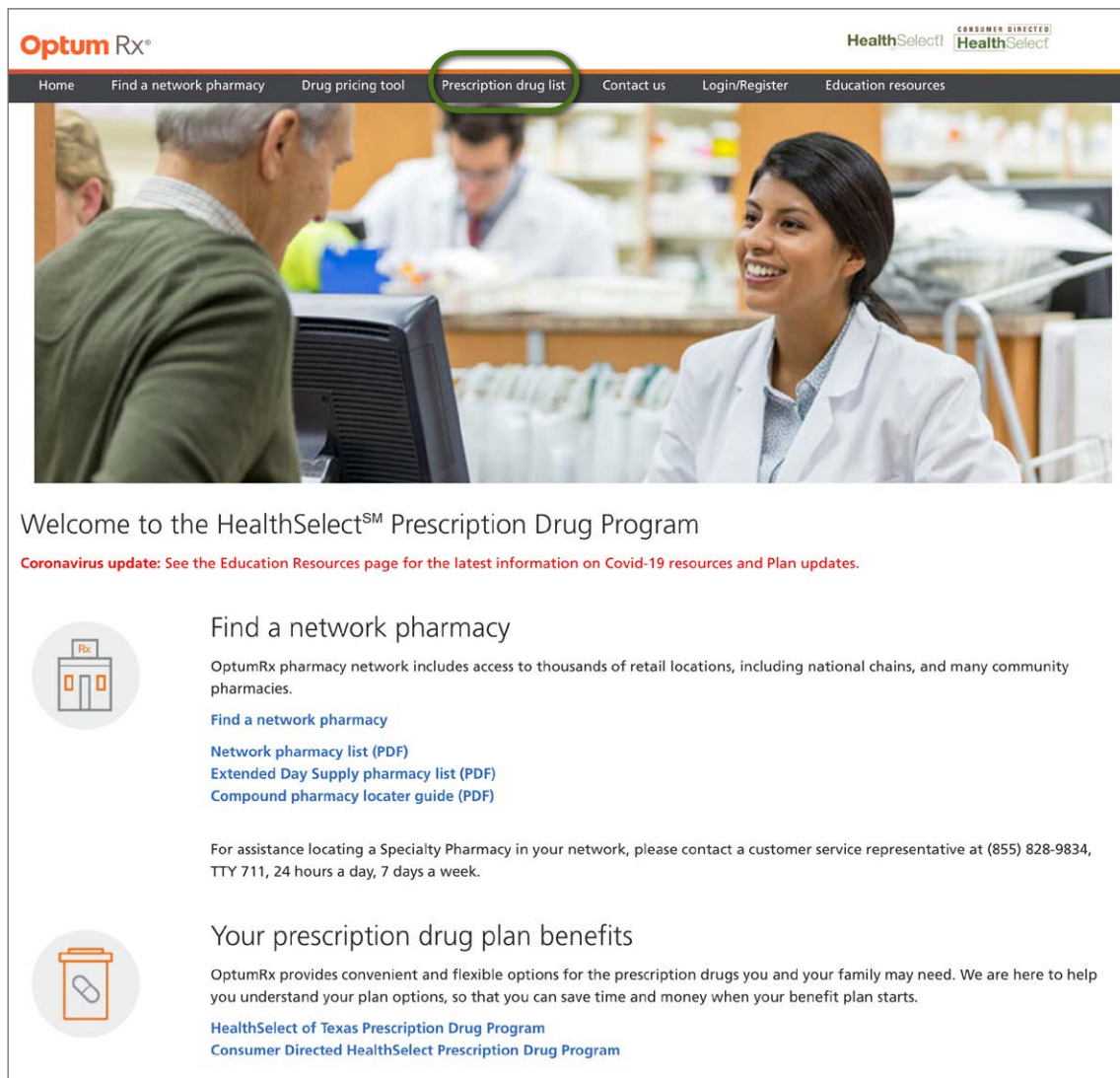
- Call HealthSelect Prescription Drug Program (PDP) customer care toll-free at **(855) 828-9834 (TTY: 711)**.
- Visit **www.HealthSelectRx.com**
  - Locate an Optum Rx<sup>®</sup> in-network pharmacy
  - Look up possible lower-cost medication alternatives
  - Compare medication pricing and options

## Your Prescription Drug List / Formulary

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

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

# Understanding Your Prescription Drug List/Formulary

## What is a formulary?

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

## How do I use my formulary?

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

If your medication is not listed on this document, it may not be covered by the HealthSelect Prescription Drug Program or Consumer Directed HealthSelect Prescription Drug Program. Please visit [www.HealthSelectRx.com](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)**.

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

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

# Medication Tips

## What are tiers?

Your plan has three copay tiers.

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

If you are enrolled in Consumer Directed HealthSelect, you will pay the full cost of the medication until you have met your deductible. Then, you pay a portion of the costs for each tier once your deductible is met.

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

Drug Tier	Includes	Helpful Tips
<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.

## When does the formulary change?

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

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

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

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

## Why are some medications excluded from coverage?

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

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

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

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

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

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

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

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

## What if I am taking a specialty medication?

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

# Drug List Information

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

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

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

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

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**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.

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

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# ERS of Texas

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Drug Name	Drug Tier	Notes
<b>Analgesics - Drugs for Pain</b>		
8 hour arthritis pain	E	
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

Drug Name	Drug Tier	Notes
acetaminophen-codeine #3	1	QL
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	
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
codeine sulfate oral tablet 30 mg, 60 mg	1	QL
CONZIP	E	
cvs acetaminophen ex st oral tablet	E	
DEMEROL INJECTION SOLUTION 50 MG/ML	3	
DILAUDID ORAL	E	
DSUVIA	E	
duramorph	1	
endocet oral tablet 10-325 mg, 2.5-325 mg, 5-325 mg, 7.5-325 mg	1	QL
ESGIC ORAL CAPSULE	E	
ESGIC ORAL TABLET	3	
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-%, 1-0.125- 0.9 MG/250ML-%	E	
FENTANYL- BUPIVACAINE-NACL INJECTION	E	
FENTANYL- BUPIVACAINE-NACL SOLUTION 0.2-0.1-0.9 MG/100ML-% EPIDURAL	E	
FENTANYL- BUPIVACAINE-NACL SOLUTION 0.2-0.125- 0.9 MG/100ML-% EPIDURAL	E	
FENTANYL- BUPIVACAINE-NACL SOLUTION 0.5-0.0625- 0.9 MG/250ML-% EPIDURAL	E	
FENTANYL- BUPIVACAINE-NACL SOLUTION 0.5-0.1-0.9 MG/250ML-% EPIDURAL	E	
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	
mm acetaminophen ex str	E	
MORPHINE SULFATE (BULK)	E	

Drug Name	Drug Tier	Notes
morphine sulfate (concentrate) oral solution 10 mg/0.5ml, 100 mg/5ml, 20 mg/ml	1	QL
morphine sulfate (pf) injection	1	
morphine sulfate (pf) intravenous solution 1 mg/ml, 10 mg/ml, 2 mg/ml, 4 mg/ml, 8 mg/ml	1	
morphine sulfate er beads	1	PA; QL
morphine sulfate er oral capsule extended release 24 hour 10 mg, 100 mg, 20 mg, 30 mg, 50 mg, 60 mg, 80 mg	1	PA; QL
morphine sulfate er oral tablet extended release	1	PA; QL
MORPHINE SULFATE INJECTION SOLUTION 1 MG/ML	3	
morphine sulfate injection solution 2 mg/ml, 4 mg/ml	1	
MORPHINE SULFATE INTRAVENOUS SOLUTION 0.5 MG/ML	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 ORAL TABLET ER 12 HOUR ABUSE-DETERRENT 10 MG, 20 MG, 40 MG, 80 MG	E	
oxycodone hcl oral capsule	1	QL
oxycodone hcl oral concentrate 100 mg/5ml	1	QL
oxycodone hcl oral solution	1	QL
oxycodone hcl oral tablet	1	QL
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	

Drug Name	Drug Tier	Notes
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	
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	

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

Drug Name	Drug Tier	Notes
ROXICODONE ORAL TABLET 15 MG, 30 MG	E	
ROXYBOND	E	
SEGLENTIS	E	
SUBSYS	E	
SYNAPRYN FUSEPAQ	E	
TENCON ORAL TABLET 50-325 MG	3	
tramadol hcl er (biphasic) oral 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	
TYLENOL 8 HOUR ARTHRITIS PAIN	E	
TYLENOL CHILDRENS ORAL SUSPENSION	E	
TYLENOL EXTRA STRENGTH ORAL TABLET	E	
TYLENOL FOR CHILDREN + ADULTS	E	
TYLENOL INFANTS PAIN+FEVER	E	

Drug Name	Drug Tier	Notes
TYLENOL ORAL TABLET	E	
ULTRACET	E	
VTOL LQ	E	
XTAMPZA ER	2	PA; QL
ZEBUTAL ORAL CAPSULE 50-325-40 MG	E	
<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	
all day 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	
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	

For more information regarding the tiers 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 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	
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	
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	

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

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

Drug Name	Drug Tier	Notes
ENOVARX-IBUPROFEN	E	
ENOVARX-NAPROXEN EXTERNAL	E	
etodolac er	1	
etodolac oral	1	
FBL KIT	E	
FELDENE	3	
fenoprofen calcium oral	E	
FENOVAR	E	
FLECTOR EXTERNAL	E	
flurbiprofen oral	1	
FROTEK	E	
goodsense aspirin adults	\$0	
goodsense aspirin low dose	\$0	
goodsense ibuprofen	E	
IBUPAK	E	
ibuprofen infants	E	
ibuprofen oral capsule 200 mg	E	
ibuprofen oral suspension 100 mg/5ml	1	
ibuprofen oral tablet 200 mg	E	
ibuprofen oral tablet 400 mg, 600 mg, 800 mg	1	
ibuprofen-famotidine	E	
ICLOFENAC CP	E	
inavix	E	
INDOCIN ORAL	3	ST
INDOCIN RECTAL	E	
indomethacin er	1	
INDOMETHACIN ORAL CAPSULE 20 MG	E	

Drug Name	Drug Tier	Notes
indomethacin oral capsule 25 mg, 50 mg	1	
INDOMETHACIN RECTAL SUPPOSITORY 100 MG	E	
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	
ketoprofen oral capsule 50 mg	1	
ketorolac tromethamine injection solution 15 mg/ml	1	
ketorolac tromethamine intramuscular solution 60 mg/2ml	1	
KETOROLAC TROMETHAMINE NASAL	E	
ketorolac tromethamine oral	1	QL
ketorolac tromethamine solution 30 mg/ml injection	1	
KETOROLAC TROMETHAMINE SOLUTION 30 MG/ML INJECTION	3	
LEXITRAL PHARMAPAK II	E	
LICART EXTERNAL	E	
LODINE	3	
LOFENA	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
meclofenamate sodium oral	E	
mefenamic acid oral	E	
meloxicam oral capsule	E	
MELOXICAM ORAL SUSPENSION	E	
meloxicam oral tablet	1	
mm aspirin oral tablet delayed release	\$0	
MOTRIN CHILDRENS	E	
MOTRIN IB ORAL CAPSULE	E	
MOTRIN INFANTS DROPS	E	
nabumetone oral	1	
NALFON ORAL CAPSULE 400 MG	E	
NALFON ORAL TABLET	E	
NAPRELAN ORAL TABLET EXTENDED RELEASE 24 HOUR 375 MG, 500 MG, 750 MG	E	
NAPROSYN ORAL SUSPENSION	E	
NAPROSYN ORAL TABLET 500 MG	3	
NAPROTIN	E	
naproxen oral suspension	E	
naproxen oral tablet	1	
naproxen oral tablet delayed release	1	
naproxen sodium er oral tablet extended release 24 hour 375 mg, 500 mg	E	
NAPROXEN SODIUM ER ORAL TABLET EXTENDED RELEASE 24 HOUR 750 MG	E	

Drug Name	Drug Tier	Notes
naproxen sodium oral tablet 220 mg	E	
naproxen sodium oral tablet 275 mg, 550 mg	1	
naproxen-esomeprazole mg	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	
RELAFEN	E	
RELAFEN DS	E	
salsalate oral	E	
sm naproxen sodium oral tablet	E	
SPRIX	E	
ST JOSEPH LOW DOSE ORAL TABLET CHEWABLE	\$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
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	
ZICLOCIN	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	
blue tube/ aloe	E	
bupivacaine fisiopharma	1	
BUPIVACAINE HCL (BULK)	E	
bupivacaine hcl (pf)	1	

Drug Name	Drug Tier	Notes
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	
EXPAREL	3	
GEBAUERS PAIN EASE	3	
GEBAUERS SPRAY AND STRETCH	3	
GEN7T	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
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	
LIDOCAINE HCL SOLUTION 1 % INJECTION	3	
lidocaine hcl solution 1 % injection	1	

Drug Name	Drug Tier	Notes
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 pain relief max st	E	
lidocaine-prilocaine external cream	1	
lidocaine-prilocaine external kit	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	
lidopin external cream 3 %	E	
LIDOPIN EXTERNAL CREAM 3.25 %	E	
LIDOPURE PATCH	E	
LIDOREX	E	
LIDORX	E	
LIDO-SORB	E	
LIDOSTREAM	E	
LIDOTHOL	E	
LIDOTOR	E	
LIDOTRAL	E	
LIDOTRAN	E	
LIDOVIX L	E	

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

Drug Name	Drug Tier	Notes
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	
PRILOVIX	E	
PRILOVIX LITE	E	
PRILOVIX LITE PLUS	E	
PRILOVIX PLUS	E	
PRILOVIX ULTRALITE	E	
PRILOVIX ULTRALITE PLUS	E	
PRILOVIXIL	E	
PROXIVOL	E	
READYSHARP-A	E	
RELADOR PAK EXTERNAL KIT	E	
RELADOR PAK PLUS	E	
SENSORCAINE	3	

Drug Name	Drug Tier	Notes
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	
VENIPUNCTURE PX1 PHLEBOTOMY	3	
WPR PLUS WOUND HEALING SYSTEM	E	
XARACOLL	E	
XYLOCAINE INJECTION	3	
XYLOCAINE-MPF INJECTION SOLUTION 0.5 %, 1 %, 1.5 %, 2 %	3	
ZERUVIA	E	
ZILACAINE PATCH	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

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

Drug Name	Drug Tier	Notes
disulfiram oral	1	
goodsense nicotine mouth/throat lozenge 4 mg	\$0	QL
habitrol	\$0	QL
KLOXXADO	2	
LUCEMYRA	3	ST; QL
naloxone hcl injection solution 0.4 mg/ml, 4 mg/10ml	1	
naloxone hcl injection solution cartridge	1	
naloxone hcl injection solution prefilled syringe	1	
naloxone hcl nasal	1	
naltrexone hcl oral	1	
NARCAN	2	
NICORETTE MOUTH/THROAT GUM 2 MG	\$0	QL
NICORETTE MOUTH/THROAT LOZENGE 4 MG	\$0	QL
nicotine polacrilex mini	\$0	QL
nicotine polacrilex mouth/throat	\$0	QL
nicotine step 1	\$0	QL
nicotine step 2	\$0	QL
nicotine step 3	\$0	QL
nicotine transdermal kit	E	
NICOTROL	\$0	QL
NICOTROL NS	\$0	QL
SUBLOCADE	3	SP
SUBOXONE SUBLINGUAL FILM	2	QL
varenicline tartrate oral tablet	\$0	QL
varenicline tartrate oral tablet therapy pack	\$0	QL
VIVITROL	3	SP

Drug Name	Drug Tier	Notes
ZIMHI	3	
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	
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	

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

Drug Name	Drug Tier	Notes
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	
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	

Drug Name	Drug Tier	Notes
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	
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	

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

Drug Name	Drug Tier	Notes
colistimethate sodium (cba)	1	
COLY-MYCIN M	3	
coremino	E	
CUBICIN RF	3	
daptomycin	1	
demeclocycline hcl oral	1	
dicloxacillin sodium	1	
DIFICID	3	
DORYX MPC	E	
DORYX ORAL TABLET DELAYED RELEASE 200 MG, 50 MG, 80 MG	E	
doxy 100	1	
doxycycline hyclate intravenous	1	
doxycycline hyclate oral capsule	1	
doxycycline hyclate oral tablet 100 mg	1	
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	

Drug Name	Drug Tier	Notes
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	
FIRVANQ	3	
FLAGYL ORAL CAPSULE	E	
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	

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

Drug Name	Drug Tier	Notes
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	
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	

Drug Name	Drug Tier	Notes
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	
NEOSPORIN ORIGINAL	E	
nitrofurantoin macrocrystal oral	1	
nitrofurantoin monohydrate macrocrystals	1	
nitrofurantoin oral suspension	E	
NUTRIDOX	E	
NUVESSA	E	
NUZYRA ORAL TABLET 150 MG	3	
ofloxacin oral tablet 300 mg, 400 mg	1	
oxacillin sodium injection solution reconstituted 1 gm	1	
oxacillin sodium intravenous	1	
paromomycin sulfate oral	1	
penicillin g potassium injection solution reconstituted 5000000 unit	1	
penicillin g procaine	1	
penicillin g sodium	1	
penicillin v potassium	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
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	
RAYASORE KIT	E	
RECARBRIO	3	
SCRUB CARE POVIDONE-IODINE	E	
SEYSARA	3	ST
SILVADENE	3	
silver nitrate external solution 0.5 %	E	
silver sulfadiazine external	1	
SIVEXTRO INTRAVENOUS	3	QL
SIVEXTRO ORAL	E	
SOLODYN ORAL TABLET EXTENDED RELEASE 24 HOUR 105 MG, 115 MG, 55 MG, 65 MG, 80 MG	E	
SOLOSEC	3	
ssd	1	
streptomycin sulfate intramuscular	1	

Drug Name	Drug Tier	Notes
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	
TEFLARO INTRAVENOUS SOLUTION RECONSTITUTED 600 MG	3	
tetracycline hcl oral	1	
tigecycline	1	
tinidazole oral	1	
trimethoprim oral	1	
triple antibiotic external ointment , 3.5-400-5000 , 5-400-5000	E	
TYGACIL	3	
UNASYN INJECTION SOLUTION RECONSTITUTED 3 (2-1) GM	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
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	
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	

Drug Name	Drug Tier	Notes
ANTICOAGULANT SODIUM CITRATE	3	
ARIXTRA	3	SP; QL
CATHFLO ACTIVASE	E	
dabigatran etexilate mesylate	1	QL
ELIQUIS	2	QL
ELIQUIS DVT/PE STARTER PACK ORAL TABLET THERAPY PACK	2	QL
enoxaparin sodium injection	1	SP; QL
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	
HEPARIN (PORCINE) IN NAACL INTRAVENOUS SOLUTION 4000-0.9 UNIT/L-%	E	
heparin sod (pork) lock flush intravenous solution 10 unit/ml, 100 unit/ml	1	
heparin sodium (porcine) injection solution 1000 unit/ml, 10000 unit/ml, 20000 unit/ml, 5000 unit/ml	1	

For more information regarding the tiers 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 sodium (porcine) injection solution prefilled syringe	1	
heparin sodium (porcine) pf	1	
HEPMED	E	
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	
CEREBYX INJECTION SOLUTION 500 MG PE/10ML	3	
clobazam	1	PA
DEPAKOTE	3	
DEPAKOTE ER	3	
DEPAKOTE SPRINKLES ORAL CAPSULE DELAYED RELEASE SPRINKLE	3	

Drug Name	Drug Tier	Notes
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	
FYCOMPA	3	
gabapentin oral capsule	1	
gabapentin oral solution 250 mg/5ml	1	
GABAPENTIN ORAL TABLET 25 MG, 50 MG	E	
gabapentin oral tablet 600 mg, 800 mg	1	

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

Drug Name	Drug Tier	Notes
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	
levetiracetam in nacl	1	
levetiracetam intravenous	1	
levetiracetam oral	1	
MYSOLINE	3	
NAYZILAM	3	QL

Drug Name	Drug Tier	Notes
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	
SYMPAZAN	3	PA
TEGRETOL ORAL SUSPENSION	3	
TEGRETOL ORAL TABLET	3	

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

Drug Name	Drug Tier	Notes
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 X 200 MG, 14 X 50 MG & 14 X 100 MG, 150 & 200 MG	3	ST
ZARONTIN	3	
ZONEGRAN	3	
ZONISADE	E	
zonisamide oral	1	
ZTALMY	E	SP
<b>Antidementia Agents - Drugs for Alzheimer's Disease and Dementia</b>		
ADLARITY	E	
ADUHELM	E	SP
ARICEPT	3	
donepezil hcl	1	

Drug Name	Drug Tier	Notes
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	
AUVELITY	E	
bupropion hcl er (sr)	1	QL
bupropion hcl er (xl) oral tablet extended release 24 hour 150 mg, 300 mg	1	QL
BUPROPION HCL ER (XL) ORAL TABLET EXTENDED RELEASE 24 HOUR 450 MG	E	
bupropion hcl oral	1	
CELEXA ORAL TABLET	3	
chlordiazepoxide-amitriptyline	1	

For more information regarding the tiers 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 ORAL TABLET 10 MG, 20 MG, 30 MG	E	
phenelzine sulfate oral	1	
PRISTIQ	E	
protriptyline hcl	1	
PROZAC ORAL CAPSULE	E	

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

Drug Name	Drug Tier	Notes
REMERON ORAL TABLET 15 MG, 30 MG	3	
REMERON SOLTAB ORAL TABLET DISPERSIBLE 15 MG, 30 MG	3	
SERTRALINE HCL ORAL CAPSULE	E	
sertraline hcl oral concentrate	1	
sertraline hcl oral tablet	1	
SPRAVATO (56 MG DOSE)	3	PA; SP
SPRAVATO (84 MG DOSE)	3	PA; SP
SYMBYAX ORAL CAPSULE 3-25 MG, 6-25 MG	3	QL
tranylcypromine sulfate	1	
trazodone hcl oral	1	
trimipramine maleate oral	1	
TRINTELLIX	3	ST; QL
VENLAFAXINE BESYLATE ER	E	
venlafaxine hcl	1	
venlafaxine hcl er oral capsule extended release 24 hour	1	
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

Drug Name	Drug Tier	Notes
WELLBUTRIN SR	E	
WELLBUTRIN XL	E	
ZOLOFT	E	
ZULRESSO	3	PA; SP
<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

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

Drug Name	Drug Tier	Notes
MARINOL ORAL CAPSULE 2.5 MG	3	PA; QL
meclizine hcl oral tablet 12.5 mg, 25 mg	1	
meclizine hcl oral tablet chewable	E	
metoclopramide hcl oral solution 10 mg/10ml, 5 mg/5ml	1	
metoclopramide hcl oral tablet	1	
metoclopramide hcl oral tablet dispersible 5 mg	1	
motion sickness relief oral tablet 50 mg	E	
motion sickness relief oral tablet chewable	E	
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

Drug Name	Drug Tier	Notes
TIGAN INTRAMUSCULAR	3	
TRANSDERM-SCOP TRANSDERMAL PATCH 72 HOUR	3	
trimethobenzamide hcl oral	1	
VARUBI (180 MG DOSE)	3	QL
<b>Antifungals</b>		
amphotericin b intravenous	1	
ANCOBON	3	
antifungal external cream 2 %	E	
antifungal external powder	E	
athletes foot (terbinafine)	E	
BREXAFEMME	E	
CANCIDAS INTRAVENOUS SOLUTION RECONSTITUTED 70 MG	3	
casprofing 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-betamethasone	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
CORTI-SAV	E	
CRESEMBA INTRAVENOUS	3	
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	E	
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	

Drug Name	Drug Tier	Notes
iodoquinol- hydrocortisone-aloe	E	
itraconazole oral	1	PA
JUBLIA	E	
KERYDIN	3	PA
ketoconazole external cream	1	
ketoconazole external foam	E	
ketoconazole external shampoo 2 %	1	
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	

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

Drug Name	Drug Tier	Notes
MICOTRIN AP	E	
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	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	
tolnaftate antifungal	E	

Drug Name	Drug Tier	Notes
tolnaftate external cream	E	
tolnaftate external powder	E	
TOLSURA	E	
VFEND	3	PA
VIVJOA	E	
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
KRYSTEXXA	3	PA; SP
MITIGARE	E	
probenecid oral	1	
ULORIC	3	ST
ZYLOPRIM	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>Antimigraine Agents</b>		
AIMOVIG SUBCUTANEOUS SOLUTION AUTO- INJECTOR 140 MG/ML, 70 MG/ML	2	PA; QL
AJOVY	2	PA; QL
almotriptan malate	E	
CAFERGOT	3	PA; QL
CAMBIA	E	
dihydroergotamine mesylate injection	1	PA; QL
dihydroergotamine mesylate nasal	1	PA; QL
eletriptan hydrobromide	1	QL
EMGALITY SUBCUTANEOUS SOLUTION AUTO- INJECTOR 120 MG/ML	E	
EMGALITY SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 100 MG/ML	2	PA; QL
EMGALITY SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 120 MG/ML	E	
ERGOMAR	3	PA; QL
ergotamine-caffeine	1	PA; QL
FROVA	E	
frovatriptan succinate	E	
IMITREX NASAL	3	QL
IMITREX ORAL	3	QL
IMITREX STATDOSE REFILL SUBCUTANEOUS SOLUTION CARTRIDGE	3	QL

Drug Name	Drug Tier	Notes
IMITREX STATDOSE SYSTEM SUBCUTANEOUS SOLUTION AUTO- INJECTOR	3	QL
MAXALT ORAL TABLET 10 MG	3	QL
MIGERGOT	3	PA; QL
MIGRANAL	3	PA; QL
MIGRANOW	E	
naratriptan hcl	1	QL
NURTEC	2	PA; QL
ONZETRA XSAIL	E	
QULIPTA	2	PA; QL
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

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

Drug Name	Drug Tier	Notes
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	
<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	

Drug Name	Drug Tier	Notes
MYAMBUTOL ORAL TABLET 400 MG	3	
MYCOBUTIN	3	
PASER	3	
PRETOMANID	3	
PRIFTIN	3	
pyrazinamide oral	1	
rifabutin	1	
rifampin oral	1	
RIFAMPIN+SYRSPEN D SF	E	
SIRTURO	3	
TRECTOR	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

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

Drug Name	Drug Tier	Notes
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
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
CAMCEVI	E	SP
CAMPTOSAR	3	SP
capecitabine	1	PA; SP
CAPRELSA ORAL TABLET 100 MG	2	PA; SP; QL
CAPRELSA ORAL TABLET 300 MG	2	PA; SP
carboplatin intravenous solution	1	SP
carmustine	1	SP

Drug Name	Drug Tier	Notes
CARVYKTI	3	PA; 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
clofarabine	1	SP
CLOLAR	3	SP
COMETRIQ ORAL KIT 20 MG, 3 X 20 MG & 80 MG, 80 & 20 MG	3	PA; SP
COPIKTRA	3	PA; SP
COSELA	E	SP
COSMEGEN	3	SP
COTELLIC	3	PA; SP
cyclophosphamide injection	1	SP
CYCLOPHOSPHAMID E INTRAVENOUS	3	SP
cyclophosphamide oral capsule	1	
CYCLOPHOSPHAMID E ORAL TABLET	2	
CYRAMZA	3	PA; SP
cytarabine (pf)	1	SP
cytarabine injection solution	1	SP
dacarbazine intravenous	1	SP
dactinomycin	1	SP
DANYELZA	3	PA; SP
DARZALEX	3	PA; SP
DARZALEX FASPRO	E	SP
daunorubicin hcl intravenous solution	1	SP

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

Drug Name	Drug Tier	Notes
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
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
ETHYOL	3	SP
ETOPOPHOS	3	SP
etoposide intravenous solution 1 gm/50ml, 100 mg/5ml, 500 mg/25ml	1	SP
etoposide oral	1	SP
EULEXIN	3	
everolimus oral tablet 10 mg, 2.5 mg, 5 mg, 7.5 mg	1	PA; SP; QL

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

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

Drug Name	Drug Tier	Notes
hydroxyurea oral	1	
IBRANCE	3	PA; SP
ICLUSIG ORAL TABLET 10 MG, 15 MG	3	PA; SP; QL
ICLUSIG ORAL TABLET 30 MG, 45 MG	3	PA; SP
IDAMYCIN PFS	3	SP
idarubicin hcl	1	SP
IDHIFA	3	PA; SP; QL
IFEX	3	SP
ifosfamide	1	SP
imatinib mesylate	1	PA; SP
IMBRUVICA ORAL CAPSULE	3	PA; SP; QL
IMBRUVICA ORAL SUSPENSION	3	PA; SP
IMBRUVICA ORAL TABLET	3	PA; SP; QL
IMFINZI	3	PA; SP
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

Drug Name	Drug Tier	Notes
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
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

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

Drug Name	Drug Tier	Notes
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
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	3	PA; SP

Drug Name	Drug Tier	Notes
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	3	SP
PADCEV	3	PA; SP
PANRETIN	3	
paraplatin	1	SP
PEMAZYRE	E	SP
PEMETREXED	E	SP
PEMETREXED DISODIUM INTRAVENOUS SOLUTION	E	SP
pemetrexed disodium intravenous solution reconstituted	1	SP
PEMETREXED DITROMETHAMINE	E	SP
PEMFEXY	3	SP
PERJETA	2	PA; SP
PHESGO	2	PA; SP
PHOTOFRIN	3	SP
PIQRAY	3	PA; SP
PLUVICTO	E	
POLIVY	3	PA; SP
POMALYST	3	PA; SP
PORTRAZZA	3	PA; SP
POTELIGEO	3	PA; SP
PROLEUKIN	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
PURIXAN	3	SP
QINLOCK	3	PA; SP
RETEVMO	3	PA; SP
REVLIMID	2	PA; SP
RIABNI	E	SP
RITUXAN HYCELA	3	PA; SP
RITUXAN INTRAVENOUS SOLUTION	3	PA; SP
ROMIDEPSIN INTRAVENOUS SOLUTION	3	PA; SP
romidepsin intravenous solution reconstituted	1	PA; SP
ROZLYTREK	3	PA; SP
RUBRACA	2	PA; SP
RUXIENCE	2	PA; SP
RYBREVANT	3	PA; SP
RYDAPT	3	PA; SP
RYLAZE	E	SP
SARCLISA	3	PA; SP
SCEMBLIX ORAL TABLET 20 MG	3	PA; SP; QL
SCEMBLIX ORAL TABLET 40 MG	3	PA; SP
SIKLOS	E	
SOLTAMOX	3	
sorafenib tosylate	1	PA; SP
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

Drug Name	Drug Tier	Notes
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
TEMODAR INTRAVENOUS	2	SP
TEMODAR ORAL CAPSULE 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
TICE BCG	2	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

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

Drug Name	Drug Tier	Notes
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
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

Drug Name	Drug Tier	Notes
vincristine sulfate intravenous	1	SP
vinorelbine tartrate	1	SP
VITRAKVI	3	PA; SP
VIZIMPRO	3	PA; SP
VONJO	3	PA; SP
VORAXAZE	3	
VOTRIENT	3	PA; SP
VYXEOS INTRAVENOUS SUSPENSION RECONSTITUTED 44- 100 MG	3	PA; SP
WELIREG	3	PA; SP
XALKORI	3	PA; SP
XELODA	3	PA; SP
XOFIGO INTRAVENOUS SOLUTION 30 MCCI/ML	2	
XOSPATA	3	PA; SP
XPOVIO (100 MG ONCE WEEKLY) ORAL TABLET THERAPY PACK 50 MG	3	PA; SP
XPOVIO (40 MG ONCE WEEKLY) ORAL TABLET THERAPY PACK 40 MG	3	PA; SP
XPOVIO (40 MG TWICE WEEKLY) ORAL TABLET THERAPY PACK 40 MG	3	PA; SP
XPOVIO (60 MG ONCE WEEKLY) ORAL TABLET THERAPY PACK 60 MG	3	PA; SP
XPOVIO (60 MG TWICE WEEKLY)	3	PA; SP

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

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

Drug Name	Drug Tier	Notes
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 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	

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

Drug Name	Drug Tier	Notes
pyrimethamine oral	1	PA; SP
PYRIMETHAMINE-LEUCOVORIN	3	
QUALAQUIN	3	PA
quinine sulfate oral	1	PA
spinosad	1	
stop lice complete treatment	E	
STROMECTOL	3	PA; QL
sulfurated lime	1	
<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	

Drug Name	Drug Tier	Notes
DHIVY ORAL TABLET 25-100 MG	E	
DUOPA ENTERAL	3	PA
entacapone	1	
GOCOVRI	E	
INBRIJA	3	PA; SP
KYNMOBI	3	PA; SP; QL
KYNMOBI TITRATION KIT	3	PA; SP; QL
LODOSYN	3	
MIRAPEX ER	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	

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

Drug Name	Drug Tier	Notes
TASMAR ORAL TABLET 100 MG	3	
tolcapone	1	
trihexyphenidyl hcl	1	
XADAGO	E	
ZELAPAR	E	
<b>Antiplatelets</b>		
aspirin-dipyridamole er	1	
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 ORAL TABLET THERAPY PACK	E	
ABILIFY MYCITE STARTER KIT ORAL TABLET THERAPY PACK	E	
ABILIFY ORAL TABLET	3	QL

Drug Name	Drug Tier	Notes
ADASUVE	3	PA
aripiprazole	1	QL
ARISTADA	3	
ARISTADA INITIO	3	
asenapine maleate	1	QL
CAPLYTA	3	ST; QL
chlorpromazine hcl injection	1	
chlorpromazine hcl oral	1	
clozapine	1	QL
CLOZARIL	3	QL
FANAPT	3	ST; QL
FANAPT TITRATION PACK	3	ST; QL
fluphenazine decanoate injection	1	
fluphenazine hcl injection	1	
fluphenazine hcl oral	1	
GEODON INTRAMUSCULAR	3	
GEODON ORAL	3	QL
HALDOL DECANOATE	3	
haloperidol decanoate intramuscular solution 100 mg/ml, 50 mg/ml	1	
haloperidol lactate oral	1	
haloperidol oral	1	
INVEGA	3	QL
INVEGA HAFYERA	3	ST
INVEGA SUSTENNA INTRAMUSCULAR SUSPENSION PREFILLED SYRINGE	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
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
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	

Drug Name	Drug Tier	Notes
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	
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	
BARACLUDGE	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	

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

Drug Name	Drug Tier	Notes
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
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	

Drug Name	Drug Tier	Notes
INTELENCE ORAL TABLET 25 MG	2	
INTRON A INJECTION SOLUTION RECONSTITUTED 10000000 UNIT, 50000000 UNIT	3	PA; SP
ISENTRESS	2	
ISENTRESS HD	2	
JULUCA	2	
KALETRA ORAL SOLUTION	3	
KALETRA ORAL TABLET	3	
LAGEVRIO	3	QL
lamivudine oral solution	1	
lamivudine oral tablet 100 mg	1	SP
lamivudine oral tablet 150 mg, 300 mg	1	
lamivudine-zidovudine	1	
LEDIPASVIR-SOFOSBUVIR	E	SP
LEXIVA ORAL SUSPENSION	2	
LEXIVA ORAL TABLET	3	
LIVTENCITY	3	PA; SP
lopinavir-ritonavir	1	
maraviroc	1	PA
MAVYRET	2	PA; SP; QL
nevirapine	1	
nevirapine er	1	
NORVIR ORAL PACKET	2	
NORVIR ORAL SOLUTION	2	
NORVIR ORAL TABLET	3	
ODEFSEY	3	
oseltamivir phosphate 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
PAXLOVID (150/100)	3	QL
PAXLOVID (300/100)	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	
PREZISTA ORAL TABLET 150 MG, 600 MG, 75 MG, 800 MG	2	
RAPIVAB	3	
RELENZA DISKHALER INHALATION AEROSOL POWDER BREATH ACTIVATED 5 MG/ACT	3	QL
REMDESIVIR INTRAVENOUS SOLUTION RECONSTITUTED 100 MG	3	QL
RETROVIR INTRAVENOUS	2	
RETROVIR ORAL CAPSULE	3	
RETROVIR ORAL SYRUP	3	
REYATAZ ORAL CAPSULE 200 MG, 300 MG	3	
REYATAZ ORAL PACKET	2	
ribavirin inhalation	1	
ribavirin oral capsule	1	SP

Drug Name	Drug Tier	Notes
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	
SUSTIVA ORAL CAPSULE	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	
TPOXX ORAL	E	
TRIUMEQ	2	
TRIUMEQ PD	3	
TRIZIVIR	3	
TROGARZO	3	PA
TRUVADA	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
TYBOST	2	
valacyclovir hcl oral	1	QL
VALCYTE	3	
valganciclovir hcl	1	
VALTREX	3	QL
VEKLURY INTRAVENOUS SOLUTION RECONSTITUTED	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
XERESE	E	
XOFLUZA (40 MG DOSE) ORAL TABLET THERAPY PACK 1 X 40 MG	3	QL
XOFLUZA (80 MG DOSE) ORAL TABLET THERAPY PACK 1 X 80 MG	3	QL
ZEPATIER	3	PA; SP; QL
ZIAGEN	3	
zidovudine	1	
ZOVIRAX EXTERNAL	E	
ZOVIRAX ORAL SUSPENSION	E	
<b>Anxiolytics - Drugs for Anxiety</b>		
alprazolam er	1	QL

Drug Name	Drug Tier	Notes
alprazolam intensol	1	QL
alprazolam oral tablet	1	QL
alprazolam oral tablet dispersible	E	
alprazolam xr	1	QL
ATIVAN INJECTION	3	
ATIVAN ORAL	E	
buspirone 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	
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	

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

Drug Name	Drug Tier	Notes
MIDAZOLAM 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	
<b>Blood Products and Modifiers - Drugs for Blood Disorders</b>		
ADVATE	2	SP
ADYNOVATE	3	SP
AFSTYLA	3	SP
AGRYLIN	3	

Drug Name	Drug Tier	Notes
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	3	
BENEFIX INTRAVENOUS KIT	2	SP
CEPROTIN	3	SP
COAGADEX	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

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

Drug Name	Drug Tier	Notes
ENJAYMO	3	PA; SP
EPOGEN INJECTION SOLUTION 10000 UNIT/ML, 2000 UNIT/ML, 20000 UNIT/ML, 3000 UNIT/ML, 4000 UNIT/ML	E	SP
ESPEROCT	E	SP
FEIBA INTRAVENOUS SOLUTION RECONSTITUTED 1000 UNIT, 2500 UNIT, 500 UNIT	2	SP
FIBRYGA	2	SP
FULPHILA	E	SP
FYLNETRA	E	
GRANIX	E	SP
HEMLIBRA	3	SP
HEMOFIL M INTRAVENOUS SOLUTION RECONSTITUTED 1000 UNIT, 1700 UNIT, 250 UNIT, 500 UNIT	3	SP
HUMATE-P INTRAVENOUS SOLUTION RECONSTITUTED 1000-2400 UNIT, 250-600 UNIT, 500-1200 UNIT	2	SP
IDELVION	3	SP
IXINITY	3	SP
JIVI	3	SP
KOATE	2	SP
KOATE-DVI INTRAVENOUS SOLUTION RECONSTITUTED 1000 UNIT, 500 UNIT	2	SP
KOGENATE FS	3	SP
KOVALTRY	3	SP

Drug Name	Drug Tier	Notes
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
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

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

Drug Name	Drug Tier	Notes
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
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

Drug Name	Drug Tier	Notes
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
ZYNTEGLO	E	SP
<b>Cardiovascular Agents - Drugs for Heart and Circulation Conditions</b>		
ACCUPRIL	3	
ACCURETIC	3	
acebutolol hcl oral	1	
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	

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

Drug Name	Drug Tier	Notes
amlodipine besylate-benazepril hcl	1	
amlodipine besylate-valsartan	1	
amlodipine-atorvastatin	1	
amlodipine-olmesartan	1	
amlodipine-valsartan-hctz	1	
ANTARA ORAL CAPSULE 30 MG, 90 MG	E	
ASPRUZYO SPRINKLE	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	
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	

Drug Name	Drug Tier	Notes
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	E	
CATAPRES-TTS-2	E	
CATAPRES-TTS-3	E	
chlorthalidone oral tablet 25 mg, 50 mg	1	
cholestyramine light	1	
cholestyramine oral	1	
clonidine	1	
CLONIDINE HCL ER ORAL TABLET EXTENDED RELEASE 24 HOUR	E	
clonidine hcl oral	1	
colesevelam hcl 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
colesevelam hcl oral tablet	1	
COLESTID	E	
COLESTID FLAVORED	E	
colestipol hcl	1	
CONJUPRI	E	
COREG	3	
COREG CR	E	
CORGARD	3	
CORLANOR	3	PA; QL
COZAAR	3	
CRESTOR	E	
DEMSEER	3	PA; QL
DIBENZYLINE	3	PA
digitek	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	
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	

Drug Name	Drug Tier	Notes
disopyramide phosphate oral	1	
DIURIL	3	
dofetilide	1	
doxazosin mesylate oral	1	
droxidopa	1	PA; SP
DYRENIUM	3	
EDARBI	3	ST
EDARBYCLOR	3	ST
EDECRIN	3	
enalapril maleate oral solution	E	
enalapril maleate oral tablet	1	
enalapril-hydrochlorothiazide	1	
ENTRESTO	2	QL
EPANED ORAL SOLUTION	E	
ephedrine sulfate intravenous solution 50 mg/ml	1	
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	

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

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

Drug Name	Drug Tier	Notes
fenofibric acid oral tablet	E	
FENOGLIDE	E	
FIBRICOR	E	
flecainide acetate	1	
FLOLIPID	E	
fluvastatin sodium	E	
fluvastatin sodium er	E	
fosinopril sodium	1	
fosinopril sodium-hctz	1	
furosemide oral solution 10 mg/ml, 8 mg/ml	1	
furosemide oral tablet	1	
gemfibrozil oral	1	
GONITRO	3	
guanfacine hcl oral	1	
HEMANGEOL	3	
hydralazine hcl oral	1	
hydrochlorothiazide oral	1	
HYZAAR	3	
icosapent ethyl	1	PA
indapamide oral	1	
INDERAL LA	E	
INDERAL XL	E	
INNOPRAN XL	E	
INSPRA	3	
irbesartan	1	
irbesartan-hydrochlorothiazide	1	
ISORDIL TITRADOSE ORAL TABLET 40 MG	E	
ISORDIL TITRADOSE ORAL TABLET 5 MG	3	
isosorb dinitrate-hydralazine	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
isosorbide dinitrate oral tablet 10 mg, 20 mg, 30 mg, 5 mg	1	
isosorbide dinitrate oral tablet 40 mg	E	
isosorbide mononitrate	1	
isosorbide mononitrate er	1	
isradipine	1	
JUXTAPID ORAL CAPSULE 10 MG, 20 MG, 30 MG, 5 MG	3	PA; SP; QL
KAPSPARGO SPRINKLE	E	
KATERZIA	E	
labetalol hcl oral	1	
LANOXIN ORAL TABLET 125 MCG, 250 MCG, 62.5 MCG	2	
LASIX	3	
LEQVIO	E	
LESCOL XL	E	
LEVAMLODIPINE MALEATE	E	
LIPITOR	E	
LIPOFEN	E	
lisinopril oral	1	
lisinopril-hydrochlorothiazide	1	
LIVALO	E	
LOPID	3	
LOPRESSOR ORAL	3	
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	

Drug Name	Drug Tier	Notes
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	
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	
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	

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



Drug Name	Drug Tier	Notes
niacin er (antihyperlipidemic)	1	
niacor	E	
NIASPAN ORAL TABLET EXTENDED RELEASE 1000 MG	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	E	SP
NORVASC	E	
NYMALIZE ORAL SOLUTION 6 MG/ML	3	
olmesartan medoxomil oral	1	
olmesartan medoxomil-hctz	1	
olmesartan-amlodipine-hctz	1	
omega-3-acid ethyl esters	1	

Drug Name	Drug Tier	Notes
PACERONE ORAL TABLET 100 MG, 200 MG, 400 MG	3	
papaverine hcl injection	E	
pentoxifylline er	1	
perindopril erbumine	1	
phenoxybenzamine hcl oral	1	PA
phentolamine mesylate injection solution reconstituted	1	
PHENYLEPHRINE HCL-NACL INTRAVENOUS SOLUTION PREFILLED SYRINGE 1-0.9 MG/10ML-%, 100-0.9 MCG/10ML-%, 20-0.9 MG/50ML-%, 5-0.9 MG/50ML-%	3	
pindolol	1	
PRALUENT SUBCUTANEOUS SOLUTION AUTO-INJECTOR	E	
pravastatin sodium	1	
prazosin hcl oral	1	
PRESTALIA	3	
prevalite	1	
procainamide hcl injection	1	
PROCARDIA XL	3	
propafenone hcl	1	
propafenone hcl er	1	
propranolol hcl er	1	
propranolol hcl oral	1	
QBRELIS	E	
QUESTRAN	E	
QUESTRAN LIGHT ORAL POWDER	E	
quinapril hcl	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
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	
SOANZ	E	
sotalol hcl (af)	1	
sotalol hcl oral	1	
SOTYLIZE	3	
spironolactone oral	1	
spironolactone-hctz	1	
SULAR ORAL TABLET EXTENDED RELEASE 24 HOUR 17 MG, 34 MG, 8.5 MG	E	
SURE RESULT O3D3 SYSTEM	E	
taztia xt	1	
TEKTURNA	2	
TEKTURNA HCT ORAL TABLET 150-12.5 MG, 300-12.5 MG, 300-25 MG	2	ST
telmisartan	1	
telmisartan-amlodipine	1	
telmisartan-hctz	1	
TENORETIC 100	3	

Drug Name	Drug Tier	Notes
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	
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	

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

Drug Name	Drug Tier	Notes
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	ST; QL
amphetamine sulfate	1	QL
amphetamine-dextroamphetamine	1	QL
amphetamine-dextroamphetamine er	E	
APTENSIO XR	3	ST; QL
atomoxetine hcl	1	QL
AZSTARYS	E	
clonidine hcl er oral tablet extended release 12 hour	1	

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

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

Drug Name	Drug Tier	Notes
methyphenidate hcl er (osm)	1	QL
methyphenidate hcl er (xr)	1	QL
methyphenidate hcl oral	1	QL
MYDAYIS	3	ST; QL
PROCENTRA	3	ST; QL
QELBREE	E	
QUILLICHEW ER	3	ST; QL
QUILLIVANT XR ORAL SUSPENSION RECONSTITUTED ER	3	ST; 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	ST; 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

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
ingolimod hcl	1	PA; SP; QL
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

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

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	
AMVUTTRA	E	SP
AUSTEDO	3	PA; SP; QL
benzphetamine hcl	E	
caffeine citrate oral	1	
CONTRACE	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	

Drug Name	Drug Tier	Notes
NUEDEXTA	3	PA
ONPATTRO	3	PA; SP
ORLISTAT ORAL	E	
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
RELYVRIO	E	
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
WEGOVY	E	
XENAZINE	3	PA; SP
XENICAL	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>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	
HURRICAINA MOUTH/THROAT GEL	E	
instant oral pain relief max	E	
JUST RIGHT 5000	E	
KEPIVANCE	2	SP
lidocaine hcl mouth/throat	E	

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	

For more information regarding the tiers 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 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	
acutane	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	

Drug Name	Drug Tier	Notes
ADAPALENE EXTERNAL SOLUTION	E	
adapalene-benzoyl peroxide external gel	1	
ADAPALENE-BENZOYL PEROXIDE EXTERNAL PAD	E	
ADBRY	2	PA; SP; QL
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	
amnestem	1	PA
AMZEEQ	3	
ANACAINE	E	
APEXICON E	E	
AQUA-NU	E	
AQUAPHILIC	E	
ARAZLO	E	
ARIDA	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
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	
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	
BENZEPRO EXTERNAL LIQUID	E	
BENZEPRO FOAMING CLOTHS	E	
benzoin compound	E	
benzoin external tincture	E	

Drug Name	Drug Tier	Notes
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
CALCIPOTRIENE EXTERNAL FOAM	E	
calcipotriene external ointment	1	
calcipotriene external 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
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	2	PA; 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	
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	

Drug Name	Drug Tier	Notes
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	
COPASIL EXTERNAL	E	
CORDRAN	E	
corn & callus remover	E	
CORTANE-B EXTERNAL	E	
dapsone external gel 5 %	E	

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

Drug Name	Drug Tier	Notes
dapsone gel 7.5 % external	1	
DELUO	E	
DEOXIA	E	
DEOXIADEMTAR	3	
DEOXIATAR	3	
DERMACINRX ATRIX ANTIBAC WASH	E	
DERMACINRX ATRIX CLARIFY TONER	E	
DERMACINRX PENETRAL	E	
DERMACINRX SURGICAL COMBOPAK	E	
DERMACINRX UREA	E	
DERMA-SMOOTH/FS BODY	3	
DERMA-SMOOTH/FS SCALP	3	
DERMELEVE ADVANCED FORMULA	E	
DERMELLE	E	
DERPIXA	E	
desonide external cream	1	
desonide external gel	E	
desonide external lotion	1	
desonide external ointment	1	
DESOWEN EXTERNAL CREAM	3	
desoximetasone external cream 0.05 %	E	
desoximetasone external cream 0.25 %	1	
desoximetasone external gel	1	
desoximetasone external liquid	E	

Drug Name	Drug Tier	Notes
desoximetasone external ointment 0.05 %	E	
desoximetasone external ointment 0.25 %	1	
desrx	E	
DEXERYL	E	
DIADIMAXIA	E	
DIAOXIA	E	
diaper rash external ointment	E	
DIASAXIATAR	3	
DIASDIMAXIA	E	
DIASOXIA	E	
dibucaine (perianal)	E	
diclofenac sodium gel 3 % external	1	ST; QL
diclofenac sodium gel 3 % external	1	PA; QL
diclofenac sodium gel 3 % external	E	
DIFFERIN EXTERNAL CREAM	E	
DIFFERIN EXTERNAL GEL 0.3 %	E	
DIFFERIN EXTERNAL LOTION	E	
diflorasone diacetate external	E	
DIMOXIA	E	
DIOCHLOY	E	
DIPROLENE EXTERNAL OINTMENT	3	
docosanol external	E	
DOVONEX EXTERNAL CREAM	3	
doxepin hcl external	E	
doxycycline	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
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	
EPIFOAM	3	
EPSOLAY	E	
ery	1	
ERYGEL	3	
erythromycin external gel	1	
erythromycin external solution	1	
ESKATA	E	
ETHOXIA	E	
EUCRISA	2	ST
EVOCLIN	E	
FABIOR	E	

Drug Name	Drug Tier	Notes
FINACEA EXTERNAL FOAM	3	
FINACEA EXTERNAL GEL	3	ST
FINAPID	E	
FINAPOD	E	
FINAPODTAR	E	
finasteride oral tablet 1 mg	E	
fluocinolone acetonide body	1	
fluocinolone acetonide external	1	
fluocinolone acetonide scalp	1	
fluocinonide cream 0.1 % external	E	
fluocinonide emulsified base	1	
fluocinonide external cream 0.05 %	1	
fluocinonide external gel	1	
fluocinonide external ointment	1	
fluocinonide external solution	1	
FLUOPAR	E	
FLUOROURACIL EXTERNAL CREAM 0.5 %	2	
fluorouracil external cream 5 %	1	
fluorouracil external solution	1	
FLUOVIX	E	
FLUOVIX PLUS	E	
flurandrenolide external cream	E	
flurandrenolide external lotion	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
fluticasone propionate external	1	
FLYPROGPIDTAR	E	
GENADUR	E	
GORDOFILM	3	
halcinonide	E	
halobetasol propionate external cream	1	
HALOBETASOL PROPIONATE EXTERNAL FOAM	E	
halobetasol propionate external ointment	1	
HALOG	E	
HALUCORT	E	
HAPRODERM	E	
HAXCHLO	E	
HPR PLUS	E	
HPR PLUS HYDROGEL	E	
HYDRO 40	E	
hydrocortisone ace-pramoxine external cream 2.5-1 %	E	
hydrocortisone acetate external cream	E	
hydrocortisone acetate external ointment 1 %	E	
hydrocortisone butyr lipo base	E	
hydrocortisone butyrate external cream	1	
hydrocortisone butyrate external lotion	E	
hydrocortisone butyrate external ointment	1	
hydrocortisone butyrate external solution	1	
hydrocortisone cream 1 % external (otc)	E	

Drug Name	Drug Tier	Notes
hydrocortisone cream 1 % external (rx)	1	
hydrocortisone external cream 2.5 %	1	
hydrocortisone external lotion 2.5 %	1	
hydrocortisone external ointment 1 %, 2.5 %	1	
hydrocortisone valerate	1	
hydroquinone external cream	E	
HYFTOR	E	
HYLATOPIC PLUS EXTERNAL CREAM	E	
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	
INZDEAXIATAR	3	
INZDEAXIAVAR	3	
INZDEOXIA	3	
isotretinoin oral capsule 10 mg, 20 mg, 30 mg, 40 mg	1	PA
isotretinoin oral capsule 25 mg, 35 mg	E	
ITHOXIA	E	
ivermectin external cream	1	
JUVAZIN	E	
KAMDOY	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
KATARYA	E	
KATARYAXN	E	
KAXM	E	
KEIDO	E	
KENALOG EXTERNAL	E	
KERAGEL	E	
KERALYT EXTERNAL GEL 6 %	E	
KERALYT EXTERNAL SHAMPOO	3	
KERALYT SCALP	E	
KERAMATRIX REPLICINE 2CMX3CM	E	
KERAMATRIX REPLICINE 5CMX5CM EXTERNAL SHEET	E	
KETARYA	E	
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	
LAVARE WOUND WASH	E	
LEVULAN KERASTICK	3	
LEXETTE	E	

Drug Name	Drug Tier	Notes
LIDOCAINE-HYDROCORTISONE ACE EXTERNAL CREAM 1-1 %	E	
LOCOID EXTERNAL LOTION	E	
LOCOID LIPOCREAM	E	
LUXIQ	3	
MEDERMA	E	
MEDERMA ADVANCED SCAR GEL	E	
MEDERMA FOR KIDS	E	
MEDERMA SPF 30	E	
medpura hand sanitizer external gel 70 %	E	
MEDPURA HYDROCORTISONE	E	
METDRAY	E	
methoxsalen rapid	1	
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	
NEO-SYNALAR EXTERNAL CREAM	3	
NEO-SYNALAR EXTERNAL KIT	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
neuac external gel	1	
NEUAC EXTERNAL KIT	E	
NIVATOPIC PLUS	E	
NORITATE	E	
NUCARACLINPAK	E	
NUCARARXPAK	E	
NUCORT	E	
NUDERMRXPAK 120	E	
NUDERMRXPAK 60	E	
NUJO	3	
NUTRASEB	E	
NUTRIARX CREAMPAK	E	
NUVAIL	E	
OLUX	3	
OLUX-E	E	
ONEXTON	3	
ONZDEAXIADEMTAR	3	
ONZDEAXIADEMVAR	3	
ONZDEAXIATAR	3	
ONZDEAXIAVAR	3	
ONZDEAXIAZAR	3	
ONZDEOXIA	E	
OPZELURA	E	
ORACEA	E	
OVACE PLUS	E	
OVACE PLUS WASH	E	
OVACE WASH	E	
OXIAICE	3	
OXIANUJO	E	
OXIATAR	E	
OXIAVAR	3	
OXIAVARRY	E	
OXIAVARY	3	
OXIAZAR	E	
OXOPID	E	

Drug Name	Drug Tier	Notes
OXOPOD	E	
PANDEL	E	
PENLEN	E	
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	
prednicarbate external ointment	1	
PREPARATION H EXTERNAL CREAM 1 %	E	
PRESERA	E	
PROMISEB	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
PROPECIA	E	
PROSILK EXTERNAL	E	
PROTOPIC	3	ST
PRUCLAIR	E	
PRUDOXIN	E	
PRUMYX	E	
PYROGALLIC ACID	3	
QBREXZA	3	QL
QUIHOXVAR	E	
QUINIXIL	E	
QUTENZA	E	
QUTENZA (2 PATCH)	E	
QUTENZA (4 PATCH)	E	
RADIAPLEXRX	3	
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	

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 ointment	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	

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

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 %, 9.8-4.8 %	E	

Drug Name	Drug Tier	Notes
sulfacetamide sodium-sulfur external suspension	E	
sulfacetamide sodium-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	
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	
tazarotene external gel	1	PA
TAZORAC EXTERNAL CREAM 0.05 %	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
TAZORAC EXTERNAL CREAM 0.1 %	3	PA
TAZORAC EXTERNAL GEL	E	
TETRIX EXTERNAL CREAM	E	
TEXACORT	E	
TOPICORT EXTERNAL CREAM 0.05 %	E	
TOPICORT EXTERNAL CREAM 0.25 %	3	
TOPICORT EXTERNAL GEL	3	
TOPICORT EXTERNAL OINTMENT 0.05 %	E	
TOPICORT EXTERNAL OINTMENT 0.25 %	3	
TOPICORT SPRAY	E	
tovet external foam	1	
TOVET EXTERNAL KIT	E	
tretinoin external	1	PA
tretinoin microsphere	1	PA
tretinoin microsphere pump	1	PA
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	

Drug Name	Drug Tier	Notes
triamcinolone in absorbbase	E	
TRIANEX	E	
triderm external cream	1	
TRIDESILON	3	
TRILOCICLO	E	
TRI-LUMA	E	
triple antibiotic pain relief	E	
triple antibiotic+pain relief	E	
tritocin	E	
TRIVIX	E	
turpentine external	E	
TWYNEO	3	
ULTRASAL-ER	E	
ULTRAVATE EXTERNAL LOTION	E	
UMECTA MOUSSE	E	
URAMAXIN EXTERNAL GEL	E	
urea 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	
URESOL	E	

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

Drug Name	Drug Tier	Notes
VANICREAM EXTERNAL OINTMENT	E	
VANIQA	E	
VANOS	3	
VANOXIDE-HC	E	
VARDIMAXIA	E	
VAROXIA	E	
VECTICAL	E	
VELTIN	E	
VENELEX	3	
VERDESO	E	
VEREGEN	E	
VIRASAL	E	
VTAMA	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	E	
ZYCLARA	E	
ZYCLARA PUMP	E	
<b>Dermatological Agents - Drugs to Treat Skin Conditions</b>		
ZORYVE	E	

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 ORAL TABLET 12.5-30 MG, 12.5-45 MG, 25-15 MG, 25-30 MG, 25-45 MG	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	

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

Drug Name	Drug Tier	Notes
INVOKANA	E	
JANUMET	2	ST
JANUMET XR	2	ST
JANUVIA	2	ST
JARDIANCE	2	ST
JENTADUETO	2	ST
JENTADUETO XR	2	ST
KAZANO	E	
KOMBIGLYZE XR	E	
metformin hcl er	1	
metformin hcl er (mod)	E	
metformin hcl er (osm) oral tablet extended release 24 hour 1000 mg, 500 mg	E	
metformin hcl oral solution	1	
metformin hcl oral tablet 1000 mg, 500 mg, 850 mg	1	
metformin hcl oral tablet 625 mg	E	
miglitol	1	
MOUNJARO	2	ST; QL
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	

Drug Name	Drug Tier	Notes
QTERN	E	
repaglinide	1	
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	3	
ACCU-CHEK AVIVA PLUS TEST STRIPS	3	QL
ACCU-CHEK FASTCLIX LANCET KIT	\$0	
ACCU-CHEK FASTCLIX LANCETS	\$0	
ACCU-CHEK GUIDE CONTROL	3	
ACCU-CHEK GUIDE TEST STRIPS	3	QL
ACCU-CHEK SAFE-T PRO LANCETS	\$0	
ACCU-CHEK SMARTVIEW CONTROL	3	

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

Drug Name	Drug Tier	Notes
ACCU-CHEK SMARTVIEW TEST STRIPS	3	QL
ACCU-CHEK SOFTCLIX LANCET DEVICE KIT	\$0	
ACCU-CHEK SOFTCLIX LANCETS	\$0	
AUTOLET LANCING DEVICE	\$0	
BLUESTAR	E	
CARETOUCH CONTROL SOL LEVEL 2	3	
CARETOUCH LANCING/EJECTOR	\$0	
CARETOUCH TEST	3	QL
CARETOUCH TWIST MC LANCETS 30G	\$0	
CEQR SIMPLICITY 2U KIT	2	
CHEMSTRIP 10 MD	3	
CHEMSTRIP 10/SG	3	
CHEMSTRIP 2 GP	3	
CHEMSTRIP 5 OB	3	
CHEMSTRIP 7	3	
CHEMSTRIP 9	3	
CHEMSTRIP K	3	
CHEMSTRIP MICRAL	E	
CHEMSTRIP UGK	3	
CONTOUR CONTROL SOLUTION	2	
CONTOUR MONITOR DEVICE DEVICE	2	
CONTOUR MONITOR KIT W/DEVICE KIT	2	
CONTOUR NEXT CONTROL SOLUTION	2	
CONTOUR NEXT EZ KIT W/DEVICE	2	

Drug Name	Drug Tier	Notes
CONTOUR NEXT GEN MONITOR	2	
CONTOUR NEXT LINK KIT W/DEVICE	2	
CONTOUR NEXT MONITOR KIT W/DEVICE	2	
CONTOUR NEXT ONE KIT	2	
CONTOUR NEXT TEST STRIPS	\$0	QL
CONTOUR TEST STRIPS	\$0	QL
CVS KETONE CARE	3	
DIABETES MONITOR DIGIT ADD-ON	E	
DIABETES MONITOR DIGIT SOLN	E	
EASYMAX 15 LEVEL 2-3 CONTROL	3	
EASYMAX CONTROL IN VITRO SOLUTION NORMAL	3	
GLUCOSE CONTROL SOLUTIONS	3	
FORTISCARE CONTROL	3	
FORTISCARE G1 TEST STRIP	3	QL
FORTISCARE T1 GLUCOSE SYSTEM	3	
FREESTYLE PRECISION NEO TEST	3	QL
GLUCOCARD EXPRESSION TEST	3	QL
GLUCOCARD SHINE TEST	3	QL
GLUCOCARD VITAL TEST	3	QL
KETO-DIASTIX	3	
KETONE TEST	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
KETOSTIX	3	
LANCETS	\$0	
MICRODOT TEST	3	QL
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	
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	3	
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	

Drug Name	Drug Tier	Notes
ONETOUCH VERIO TEST STRIPS	\$0	QL
ONETOUCH VERIO IQ SYSTEM	2	
ONETOUCH VERIO REFLECT KIT W/DEVICE	2	
PRECISION XTRA BLOOD GLUCOSE	3	QL
PTS PANELS EGLU TEST	3	QL
SURESTEP PRO HIGH GLUCOSE	3	
SURESTEP PRO LOW GLUCOSE	3	
SURESTEP PRO NORMAL GLUCOSE	3	
TRUE METRIX BLOOD GLUCOSE TEST	3	QL
TRUE METRIX LEVEL 1	3	
TRUE METRIX LEVEL 2	3	
TRUE METRIX LEVEL 3	3	
TRUE METRIX METER KIT	3	
TRUE METRIX PRO BLOOD GLUCOSE	3	QL
TRUETRACK TEST	3	QL
UNISTRIP CONTROL IN VITRO SOLUTION LOW	3	
<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	

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

Drug Name	Drug Tier	Notes
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
glutose 5	E	
GVOKE HYPOPEN 1-PACK	E	
GVOKE HYPOPEN 2-PACK	E	
GVOKE KIT	E	
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	
BASAGLAR KWIKPEN	E	
FIASP FLEXTOUCH	E	
FIASP INJECTION	E	
FIASP PENFILL	E	
HUMALOG INJECTION	2	

Drug Name	Drug Tier	Notes
HUMALOG U-100 AND U-200 KWIKPEN	2	
HUMALOG MIX 50/50 KWIKPEN	2	
HUMALOG MIX 50/50 VIAL	2	
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 DEGLUDEC	E	
INSULIN DEGLUDEC FLEXTOUCH	E	
INSULIN GLARGINE	E	
INSULIN GLARGINE SOLOSTAR	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
INSULIN GLARGINE-YFGN	E	
INSULIN LISPRO (1 UNIT DIAL)	E	
INSULIN LISPRO INJECTION	E	
INSULIN LISPRO JUNIOR KWIKPEN	E	
INSULIN LISPRO PROT & LISPRO	E	
INSULIN SYRINGES 27G X 1/2" 0.5 ML, 27G X 1/2" 1 ML, 28G X 1/2" 0.5 ML, 28G X 1/2" 1 ML, 29G X 1/2" 1 ML, 30G X 1/2" 0.3 ML, 30G X 1/2" 0.5 ML, 30G X 1/2" 1 ML, 30G X 5/16" 0.3 ML, 30G X 5/16" 0.5 ML, 30G X 5/16" 1 ML, 31G X 15/64" 0.3 ML, 31G X 15/64" 0.5 ML, 31G X 5/16" 0.3 ML, 31G X 5/16" 0.5 ML, 31G X 5/16" 1 ML	\$0	
LANTUS U-100 SOLOSTAR	2	
LANTUS U-100 VIAL	2	
LEVEMIR U-100 FLEXTOUCH	E	
LEVEMIR U-100 VIAL	E	
LYUMJEV KWIKPEN	2	
LYUMJEV VIAL	2	
MYXREDLIN	3	
NOVOLIN 70/30 FLEXPEN	E	
NOVOLIN 70/30 FLEXPEN RELION	E	
NOVOLIN 70/30 RELION	E	
NOVOLIN 70/30 VIAL	E	
NOVOLIN N FLEXPEN	E	

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

Drug Name	Drug Tier	Notes
CARDIOPLEGIA IND PLASMA-TROMET	E	
CARDIOPLEGIA INDUCTION HIGH K	E	
CARDIOPLEGIA INDUCTION LOW DEX	E	
CARDIOPLEGIA INDUCTION NON-ENR	E	
CARDIOPLEGIA MAIN LOW DEXTROSE	E	
CARDIOPLEGIA MAIN LOW TROMETHA	E	
CARDIOPLEGIA MAIN PLASMA-TROME	E	
CARDIOPLEGIA MAINTENANCE	E	
CARDIOPLEGIA REPERFUSATE 4:1	E	
carglumic acid oral tablet soluble	1	PA; SP
CARNITOR	3	
CARNITOR SF	3	
CENFOL	E	
CENTRATEX	E	
CEREFOLIN	E	
CEREFOLIN NAC ORAL TABLET 6-90.314-2-600 MG	E	
CHEMET	3	
CHOLECAL DF	E	
CHROMAGEN ORAL CAPSULE	E	
CIFEREX	E	
CITRANATAL BLOOM	E	
cod liver oil oral oil	E	
corvita 150	E	
CORVITA ORAL TABLET	E	
CORVITE 150	E	
CORVITE 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
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	
DERMACINRX DAVIMET	E	
DERMACINRX DOTREMIN	E	
DERMACINRX FOLTAMIN	E	
DERMACINRX MULTITAM ORAL TABLET	E	
DERMACINRX PRETRATE	E	
DERMACINRX RIBOTIN-E	E	
DERMACINRX ZINTREXYL-C	E	
DEXIFOL	E	
DIALYVITE	E	
DIALYVITE 3000	E	

Drug Name	Drug Tier	Notes
DIALYVITE 5000	E	
DIALYVITE SUPREME D ORAL TABLET	E	
DIALYVITE/ZINC	E	
DODEX	3	
DRISDOL ORAL CAPSULE	3	
d-vite pediatric	E	
EFFER-K ORAL TABLET EFFERVESCENT 10 MEQ, 20 MEQ	3	
effer-k tablet effervescent 25 meq oral	1	
effer-k tablet effervescent 25 meq oral	E	
ELFOLATE	E	
ELFOLATE PLUS ORAL TABLET 3-35-2 MG	E	
ELITE-OB	2	
ENBRACE HR	E	
ergocalciferol oral capsule	1	
ergocalciferol oral solution 200 mcg/ml	E	
EXJADE	3	PA
fabb	E	
fa-vitamin b-6-vitamin b-12	E	
FEONYX	E	
FERAHEME	E	
FERIVA 21/7	E	
FERIVAF	E	
ferocon	E	
ferotinsic	E	
FERRALET 90	E	
FERRIPROX ORAL SOLUTION	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
FERRIPROX ORAL TABLET 1000 MG	3	PA
FERRIPROX ORAL TABLET 500 MG	E	
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	
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	

Drug Name	Drug Tier	Notes
FOLIC D3	E	
FOLI-D	E	
FOLIFLEX	E	
FOLITE	E	
FOLITIN-Z	E	
FOLIVANE-F	E	
FOLIVANE-PLUS	E	
FOLIXAPURE	E	
folplex 2.2	E	
FOLTANX	E	
FOLTANX RF	E	
FOLTRATE	E	
FOLTREXYL	E	
foltrin	E	
FOLTX ORAL TABLET 1.13-25-2 MG	E	
FOLVITE-D	E	
FOSTEUM	E	
FUSION PLUS	E	
GALZIN	3	
GENICIN VITA-D	E	
GENICIN VITA-Q ORAL TABLET	E	
GENICIN VITA-S	E	
hematinic plus vit/minerals	E	
hematinic/folic acid	E	
HEMATOGEN	E	
HEMATOGEN FA	E	
HEMATRON-AF	E	
HEMOCYTE PLUS	E	
hemocyte-f oral tablet	E	
HYLAVITE	E	
HYLAZINC	E	
ICAR-C PLUS	E	
iferex 150 forte	E	
INFED	E	
INFUVITE ADULT	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
INFUVITE PEDIATRIC INTRAVENOUS SOLUTION	E	
INJECTAFER INTRAVENOUS SOLUTION 750 MG/15ML	E	
INTEGRA F	E	
INTEGRA PLUS	E	
iodine strong oral	1	
IROSPAN 24/6	E	
ISOLYTE-S	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	
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	

Drug Name	Drug Tier	Notes
K-TAB ORAL TABLET EXTENDED RELEASE 10 MEQ, 20 MEQ	3	
k-tan plus	E	
L-CYSTINE	E	
levocarnitine oral solution	1	
levocarnitine 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-algae-b12-b6	E	
l-methylfolate-b6-b12 oral tablet 3-35-2 mg	E	
l-methyl-mc	E	
LOKELMA	3	
lysiplex plus oral tablet	E	
magnesium oxide oral tablet 400 (240 mg) mg	E	
magnesium sulfate intravenous solution 2 gm/50ml, 20 gm/500ml, 4 gm/100ml, 4 gm/50ml, 40 gm/1000ml	1	
MAGNESIUM SULFATE SOLUTION 50 % INJECTION	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	

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

Drug Name	Drug Tier	Notes
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	
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	

Drug Name	Drug Tier	Notes
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	
NESTABS	2	
NESTABS ONE	E	
NEURIN-SL	E	
NICADAN	E	
NICAZEL	E	
NICAZEL FORTE	E	
NICOMIDE ORAL TABLET 750-27-2-0.5 MG	E	
nicotinamide oral	E	
NIFEREX ORAL TABLET	E	
NOVAMV PEDIATRIC MULTI-VITAMIN	E	
NUFERA	E	
nufol	E	
NUTRICAP	E	
nutrifac zx	E	
NUTRIVIT	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
OCUVEL ORAL CAPSULE	E	
ONE VITE WOMENS	\$0	
ONE VITE WOMENS PLUS	2	
ONEVITE ORAL TABLET	E	
ORACIT	3	
ORTHO DF	E	
OSTACHOL	E	
OVEEZA	E	
oyster shell calcium w/d oral tablet 500-5 mg-mcg	E	
oyster shell calcium/d oral tablet 250-6.25 mg-mcg	E	
oyster shell calcium/vit d oral tablet 500-5 mg-mcg	E	
oyster shell calcium/vit d3 oral tablet 500-5 mg-mcg	E	
oyster shell calcium/vitamin d oral tablet 500-5 mg-mcg	E	
PHOSPHA 250 NEUTRAL	3	
phosphorous	1	
phosphorus supplement	E	
phosphorus w/sod & potassium	E	
phospho-trin 250 neutral	1	
PHOSPHO-TRIN K500	3	
PHOXILLUM B22K4/0 EXTRACORPOREAL	E	
PHOXILLUM BK4/2.5 EXTRACORPOREAL	E	
PHYSICIANS EZ USE B-12	E	

Drug Name	Drug Tier	Notes
PHYSIOLYTE	E	
PHYSIOSOL IRRIGATION	E	
phytonadione injection solution 1 mg/0.5ml, 10 mg/ml	E	
phytonadione oral	1	
PLASMA-LYTE 148	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	
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	

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

Drug Name	Drug Tier	Notes
potassium citrate er	1	
potassium citrate-citric acid solution 1100-334 mg/5ml oral	1	
potassium citrate-citric acid solution 1100-334 mg/5ml oral	E	
PREGEN DHA	E	
PREGENNA	E	
PREMESISRX	E	
PRENAISSANCE	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	
PRENATE	E	
PRENATE DHA ORAL CAPSULE 18-0.6-0.4-300 MG	E	
PRENATE ELITE ORAL TABLET 20-0.6-0.4 MG	E	
PRENATE ENHANCE	E	
PRENATE ESSENTIAL ORAL CAPSULE 18-0.6-0.4-300 MG	E	
PRENATE MINI ORAL CAPSULE 18-0.6-0.4-350 MG	E	
PRENATE PIXIE	E	
PRENATE RESTORE	E	
PRENATRIX	E	
PRENATRYL	E	
PRENATVITE COMPLETE	E	
PRENATVITE PLUS	2	
PRENATVITE RX	2	

Drug Name	Drug Tier	Notes
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	
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	

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

Drug Name	Drug Tier	Notes
RENAL ORAL CAPSULE	E	
RENATABS	E	
RENATABS WITH IRON	E	
rena-vite	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	
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	

Drug Name	Drug Tier	Notes
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
SYSTANE ICAPS AREDS2 ORAL TABLET CHEWABLE	E	
TALIVA	E	
TARON FORTE	E	
thiamine hcl injection	E	
tis-u-sol	E	
tolvaptan	1	PA; SP; QL
tricitrates	1	
TRICON	E	
trientine hcl	1	PA; SP
TRIFERIC HEMODIALYSIS 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
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	
VENTRIXYL ORAL TABLET	E	
vic-forte	E	
VINATE ONE	2	
virt-caps	E	
virt-gard	E	
vita s forte	E	
vitacel	E	
vitachew vitamin d3	E	
VITAFOL FE+ ORAL CAPSULE	E	
VITAFOL STRIPS	2	
VITAFOL-NANO	E	
VITAFOL-OB+DHA	E	
VITAL-D RX	E	
VITAMEZ	E	

Drug Name	Drug Tier	Notes
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-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	

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



Drug Name	Drug Tier	Notes
zinc oral tablet 50 mg	E	
ZIPHEX	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	E	
cimetidine hcl oral solution 300 mg/5ml	1	
cimetidine oral	1	
CYTOTEC	2	QL
DEXILANT	2	QL
DEXLANSOPRAZOLE	E	
esomeprazole magnesium oral capsule delayed release	1	QL
esomeprazole magnesium oral packet	1	QL
famotidine oral suspension reconstituted	1	
famotidine oral tablet 10 mg	E	
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

Drug Name	Drug Tier	Notes
lansoprazole oral capsule delayed release 30 mg	1	QL
lansoprazole oral tablet delayed release dispersible	E	
misoprostol oral	1	QL
NEXIUM ORAL CAPSULE DELAYED RELEASE	E	
NEXIUM ORAL PACKET	3	QL
nizatidine oral capsule	1	
omeprazole magnesium oral tablet delayed release	E	
omeprazole oral capsule delayed release	1	QL
omeprazole oral tablet delayed release	E	
OMEPRAZOLE+SYRS PEND SF ALKA	3	ST
omeprazole-sodium bicarbonate	E	
pantoprazole sodium oral packet	E	
pantoprazole sodium oral tablet delayed release	1	QL
PEPCID ORAL TABLET	3	
PREVACID 24HR	E	
PREVACID ORAL CAPSULE DELAYED RELEASE 30 MG	E	
PREVACID SOLUTAB ORAL TABLET DELAYED RELEASE DISPERSIBLE	E	
PRILOSEC 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
PROTONIX ORAL PACKET	E	
PROTONIX ORAL TABLET DELAYED RELEASE	3	QL
RABEPRAZOLE SODIUM ORAL CAPSULE SPRINKLE	E	
rabeprazole sodium oral tablet delayed release	1	QL
sm lansoprazole	E	
sucralfate oral tablet	1	
sucralfate suspension 1 gm/10ml oral	E	
SUCRALFATE SUSPENSION 1 GM/10ML ORAL	E	
ZEGERID	E	
<b>Gastrointestinal Agents - Drugs for Bowel, Intestine and Stomach Conditions</b>		
ACTIPHORA	E	
alosetron hcl	1	PA
alvimopan	1	
AMITIZA	E	
amoxicill-clarithro-lansopraz	1	
ANASPAZ	3	
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	

Drug Name	Drug Tier	Notes
antacid oral tablet chewable 500 mg, 750 mg	E	
antacid regular strength	E	
antacid ultra strength oral tablet chewable 1000 mg	E	
antacid/antigas	E	
anti-diarrheal oral liquid	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	

For more information regarding the tiers 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 solution prefilled syringe 1 mg/10ml injection	E	
AVEDANA GLYCERIN (ADULT)	E	
BACICAP	E	
belladonna alkaloids-opium	E	
BILAC	3	
bisacodyl ec	\$0	QL
bisacodyl rectal	E	
bismuth subsalicylate oral tablet chewable 262 mg	E	
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	
CULTURELLE WOMEN'S WELLNESS	E	
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	

Drug Name	Drug Tier	Notes
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	
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	
gas relief oral tablet chewable	E	
GASTROCROM	3	
GATTEX	3	PA; SP
gavilax oral powder	\$0	QL
gavilyte-c	\$0	QL
gavilyte-g	\$0	QL

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

Drug Name	Drug Tier	Notes
GELUSIL	E	
generlac	1	
gentle laxative oral	\$0	QL
gentle laxative rectal	E	
gentlelax oral powder	\$0	QL
geri-kot	E	
GIALAX	E	
GLYCATE	E	
glycerin (adult) rectal suppository 2 gm	E	
glycerin adult	E	
glycolax	\$0	QL
GLYCOPYRROLATE (PF)	3	
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	

Drug Name	Drug Tier	Notes
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	
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	
goodsense milk of magnesia	E	
goodsense senna laxative oral tablet 8.6 mg	E	
heartland gas relief	E	
HELIDAC THERAPY	3	
high potency probiotic	E	
hm stomach relief oral suspension 525 mg/30ml	E	
hm stool softener oral capsule 100 mg	E	

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

Drug Name	Drug Tier	Notes
hyoscyamine sulfate 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	
IBSRELA	E	
IMODIUM A-D ORAL TABLET	E	
IMODIUM MULTI-SYMPTOM RELIEF ORAL TABLET	E	
infants gas relief oral suspension 20 mg/0.3ml	E	
JARRO-DOPHILUS PROBIOT+PRE+FOS	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	
LEVBID	E	

Drug Name	Drug Tier	Notes
LEVSIN ORAL TABLET	E	
LEVSIN/SL	E	
LIBRAX	E	
LINZESS	2	ST; QL
LOMOTIL ORAL TABLET	3	
loperamide hcl oral capsule	1	
loperamide hcl oral solution 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	
MAALOX MULTI SYMPTOM MAX ST ORAL SUSPENSION	E	
mag-al plus	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	

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

Drug Name	Drug Tier	Notes
MOVANTIK	E	
MOVIPREP	E	
MYLICON INFANTS GAS RELIEF	E	
MYTESI	3	QL
na sulfate-k sulfate-mg sulf	1	
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	
peg 3350-kcl-na bicarb-nacl	\$0	QL
peg-3350/electrolytes	\$0	QL
peg-3350/electrolytes/ascorbic acid	1	
peg-kcl-nacl-nasulf-naascorbic acid	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

Drug Name	Drug Tier	Notes
PRIMIDAR	E	
PROBICHEW	E	
PROBINATE	E	
PROBITROL	E	
PROBIZEN	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
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	

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

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

Drug Name	Drug Tier	Notes
SYMPROIC	2	ST; QL
TALICIA	3	
TRULANCE	E	
TUMS CHEWY BITES	E	
UP4 PROBIOTICS MENS	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
XYBIOTIC	E	
ZELAC	E	
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

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

Drug Name	Drug Tier	Notes
BUPHENYL ORAL 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
EVRYSDI	3	PA; SP; QL
EXONDYS 51	E	SP
FABRAZYME	2	PA; SP
GALAFOLD	3	PA; SP; QL
JAVYGTOR	E	SP
KANUMA	3	PA; SP
KUVAN ORAL PACKET	E	SP
KUVAN ORAL TABLET	E	SP
lactase enzyme	E	
LUMIZYME	2	PA; SP
MEPSEVII	3	PA; SP
miglustat	1	PA; SP
MYALEPT	3	PA; SP
NAGLAZYME	2	PA; SP
NEXVIAZYME	3	PA; SP
nitisinone	1	PA; SP
NITYR	3	PA; SP
NULIBRY	3	PA; SP
OCALIVA	3	PA; SP; QL
ORFADIN	3	PA; SP
PALYNZIQ	3	PA; SP; QL

Drug Name	Drug Tier	Notes
PANCREAZE ORAL CAPSULE DELAYED RELEASE PARTICLES 10500-35500 UNIT, 16800-56800 UNIT, 21000-54700 UNIT, 2600-8800 UNIT, 37000-97300 UNIT, 4200-14200 UNIT	E	
PERTZYE	E	
PHEBURANE	E	SP
PROCYSBI	E	SP
RAVICTI	3	PA; SP
REVCOVI	3	PA; SP
sapropterin dihydrochloride oral packet	1	PA; SP
sapropterin dihydrochloride oral tablet	1	PA; SP
SKYSONA	E	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
XENPOZYME	E	SP
XURIDEN	3	PA; SP; QL
ZAVESCA	3	PA; SP

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



Drug Name	Drug Tier	Notes
ZENPEP ORAL CAPSULE DELAYED RELEASE PARTICLES 10000-32000 UNIT, 15000-47000 UNIT, 20000-63000 UNIT, 25000-79000 UNIT, 3000-10000 UNIT, 40000-126000 UNIT, 5000-24000 UNIT	2	
ZOLGENSMA	3	PA; SP
<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	E	
CUPRIMINE ORAL CAPSULE 250 MG	E	SP
darifenacin hydrobromide er	1	
DEPEN TITRATABS	2	SP
DETROL	3	
DETROL LA	3	
DITROPAN XL ORAL TABLET EXTENDED RELEASE 24 HOUR 10 MG, 5 MG	3	
EDEX	3	QL
ELMIRON	E	
FEM PH	E	

Drug Name	Drug Tier	Notes
fesoterodine fumarate er	1	
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	

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

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	
PYRIDIUM	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	

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	
uro-sp	1	
USTELL	E	
UTIRA-C	E	
vardenafil hcl oral tablet	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	

For more information regarding the tiers 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>Genitourinary Agents - Drugs to Treat Bladder, Genital and Kidney Conditions</b>		
ENTADFI	E	
<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	

Drug Name	Drug Tier	Notes
DEXAMETHASONE SODIUM PHOSPHATE SOLUTION 10 MG/ML INJECTION	3	
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	
EMFLAZA	E	SP
fludrocortisone acetate oral	1	
HEMADY	E	
HEXATRIONE	3	
HIDEX 6-DAY	E	
hydrocortisone oral	1	
KENALOG INJECTION	3	
KENALOG-80	3	
MAS CARE-PAK	E	
MEDROL ORAL TABLET 16 MG, 4 MG, 8 MG	3	
MEDROL ORAL TABLET 2 MG	2	

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

Drug Name	Drug Tier	Notes
MEDROL ORAL TABLET THERAPY PACK	3	
MEDROLOAN II SUIK	E	
MEDROLOAN SUIK	E	
METHYLPREDNISOLONE ACETATE INJECTION SUSPENSION 50 MG/ML	3	
METHYLPREDNISOLONE ACETATE SUSPENSION 40 MG/ML INJECTION	3	
methylprednisolone acetate suspension 40 mg/ml injection	1	
METHYLPREDNISOLONE ACETATE SUSPENSION 80 MG/ML INJECTION	3	
methylprednisolone acetate suspension 80 mg/ml injection	1	
methylprednisolone oral	1	
MILLIPRED ORAL TABLET	E	
MLK F1	E	
MLK F2	E	
MLK F3	E	
MLK F4	E	
MULTI-SPECIALTY	E	
ORAPRED ODT	E	
P-CARE K40	E	
P-CARE K40G	E	
P-CARE K40MX	E	
P-CARE K80	E	
P-CARE K80G	E	
P-CARE K80MX	E	
PEDIAPRED	3	

Drug Name	Drug Tier	Notes
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	
prednisolone oral solution	1	
prednisolone oral syrup 15 mg/5ml	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	
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	

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

Drug Name	Drug Tier	Notes
TOPIDEX	E	
TRIAMCINOLONE ACETONIDE INJECTION SUSPENSION 50 MG/ML	E	
triamcinolone acetamide 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%)	E	
AVEED	E	
danazol oral	1	
DEPO-TESTOSTERONE INTRAMUSCULAR SOLUTION	E	
EC-RX TESTOSTERONE	E	
FORTESTA	E	
JATENZO	E	
KYZATREX	E	

Drug Name	Drug Tier	Notes
METHITEST	3	PA
methyltestosterone oral	E	
NATESTO	E	
oxandrolone oral	1	PA; QL
TESTIM	E	
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	

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

Drug Name	Drug Tier	Notes
CETROTIDE SUBCUTANEOUS KIT 0.25 MG	E	SP
CHORIONIC GONADOTROPIN INTRAMUSCULAR	3	PA; SP
CLOMID	3	PA
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

Drug Name	Drug Tier	Notes
GENOTROPIN MINIQUICK SUBCUTANEOUS PREFILLED SYRINGE	E	SP
GENOTROPIN SUBCUTANEOUS CARTRIDGE	E	SP
GONAL-F	E	SP
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

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

Drug Name	Drug Tier	Notes
LUPRON DEPOT (6-MONTH) INTRAMUSCULAR KIT 45MG	2	PA; SP
LUPRON DEPOT-PED (1-MONTH) INTRAMUSCULAR KIT 11.25 MG	3	PA; SP
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

Drug Name	Drug Tier	Notes
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
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

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

Drug Name	Drug Tier	Notes
SOMATULINE DEPOT	3	PA; SP
SOMAVERT	3	PA; SP
SUPPRELIN LA	2	PA; SP; QL
SYNAREL	2	
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 TRANSDERMAL PATCH TWICE WEEKLY 0.025 MG/24HR, 0.075 MG/24HR, 0.1 MG/24HR	3	ST
altavera	\$0	QL
alyacen 1/35	\$0	QL
alyacen 7/7/7	\$0	QL

Drug Name	Drug Tier	Notes
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
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	\$0	QL
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
charlotte 24 fe	\$0	QL
chateal	\$0	QL
chateal eq	\$0	QL
CLIMARA	3	
CLIMARA PRO	2	
COMBIPATCH	3	
COVARYX	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
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
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	

Drug Name	Drug Tier	Notes
EC-RX PROGESTERONE	E	
EEMT	E	
EEMT HS	E	
ELESTRIN	3	
elinest	\$0	QL
ELLA	\$0	QL
eluryng	\$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

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

Drug Name	Drug Tier	Notes
femynor	\$0	QL
finzala	\$0	QL
FIRST-PROGESTERONE VGS VAGINAL SUPPOSITORY 100 MG, 200 MG	E	
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

Drug Name	Drug Tier	Notes
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
larin 24 fe	\$0	QL
larin fe 1.5/30	\$0	QL
larin fe 1/20	\$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	
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

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

Drug Name	Drug Tier	Notes
lo-zumandimine	\$0	QL
lutera	\$0	QL
lyleq	\$0	QL
lyllana	1	
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

Drug Name	Drug Tier	Notes
NATAZIA	\$0	QL
necon 0.5/35 (28)	\$0	QL
new day	\$0	QL
NEXPLANON	E	
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	
norethindron-ethinyl estrad-fe	\$0	QL
norethin-eth estradiol-fe	\$0	QL
norgestimate-eth estradiol oral tablet 0.25-35 mg-mcg	\$0	QL
norgestimate-ethinyl estradiol triphasic	\$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

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

Drug Name	Drug Tier	Notes
ocella	\$0	QL
opcicon one-step	\$0	QL
option 2	\$0	QL
ORIAHNN	2	PA; QL
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	
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	

Drug Name	Drug Tier	Notes
sprintec 28	\$0	QL
sronyx	\$0	QL
syeda	\$0	QL
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-linyah	\$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
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
violele	\$0	QL
VIVELLE-DOT	E	
volnea	\$0	QL
vyfemla	\$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
vylibra	\$0	QL
wera	\$0	QL
wymzya fe	\$0	QL
xulane	\$0	QL
YASMIN 28	3	QL
YAZ	E	
yuvaferm	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

Drug Name	Drug Tier	Notes
ACTIMMUNE	2	PA; SP
ALFERON N	2	SP
ANTIVENIN LATRODECTUS MACTANS	3	
ANTIVENIN MICRURUS FULVIUS INTRAVENOUS	3	
ARAVAL	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

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

Drug Name	Drug Tier	Notes
COSENTYX SENSOREADY PEN SUBCUTANEOUS SOLUTION AUTO- INJECTOR 150 MG/ML	E	SP
CROFAB	3	
CUTAQUIG	E	SP
CUVITRU	3	PA; SP
cyclosporine intravenous	1	SP
cyclosporine modified	1	SP
cyclosporine oral capsule	1	SP
CYTOGAM	2	PA; SP
ENBREL MINI	3	PA; SP
ENBREL SUBCUTANEOUS SOLUTION 25 MG/0.5ML	3	PA; SP
ENBREL SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	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

Drug Name	Drug Tier	Notes
GAMMAKED INJECTION SOLUTION 1 GM/10ML, 10 GM/100ML, 20 GM/200ML, 5 GM/50ML	3	PA; SP
GAMMAPLEX INTRAVENOUS SOLUTION 10 GM/100ML, 10 GM/200ML, 20 GM/200ML, 20 GM/400ML, 5 GM/100ML, 5 GM/50ML	3	PA; SP
GAMUNEX-C	3	PA; SP
gengraf oral capsule 100 mg, 25 mg	1	SP
gengraf oral solution	1	SP
HAEGARDA	3	PA; SP
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

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

Drug Name	Drug Tier	Notes
HUMIRA PEN-CD/UC/HS STARTER	2	PA; SP
HUMIRA PEN-PEDIATRIC UC START	2	PA; SP
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

Drug Name	Drug Tier	Notes
IMOGAM RABIES-HT INJECTION SOLUTION 300 UNIT/2ML	E	
IMURAN	3	
INFLECTRA	2	PA; SP
INFLIXIMAB	E	SP
KALBITOR	3	PA; SP; QL
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

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

Drug Name	Drug Tier	Notes
mycophenolate mofetil oral	1	SP
mycophenolate sodium	1	SP
MYFORTIC	3	SP
NABI-HB INTRAMUSCULAR SOLUTION 312 UNIT/ML	3	
NEORAL	3	SP
NULOJIX	3	SP
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

Drug Name	Drug Tier	Notes
OTREXUP SUBCUTANEOUS SOLUTION AUTO-INJECTOR 10 MG/0.4ML, 12.5 MG/0.4ML, 15 MG/0.4ML, 17.5 MG/0.4ML, 20 MG/0.4ML, 22.5 MG/0.4ML, 25 MG/0.4ML	E	
PANZYGA	E	SP
PRIVIGEN	3	PA; SP
PROGRAF	3	SP
PROVENGE INTRAVENOUS SUSPENSION 50000000 CELLS	2	PA; SP
RAPAMUNE	3	SP
RASUVO SUBCUTANEOUS SOLUTION AUTO-INJECTOR 10 MG/0.2ML, 12.5 MG/0.25ML, 15 MG/0.3ML, 17.5 MG/0.35ML, 20 MG/0.4ML, 22.5 MG/0.45ML, 25 MG/0.5ML, 30 MG/0.6ML, 7.5 MG/0.15ML	2	PA; QL
REDITREX	E	
REMICADE	E	SP
RENFLEXIS	E	SP
REZUROCK	E	SP
RHOGAM ULTRA-FILTERED PLUS INTRAMUSCULAR SOLUTION PREFILLED SYRINGE	2	SP
RHOPHYLAC INJECTION SOLUTION PREFILLED SYRINGE	2	

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



Drug Name	Drug Tier	Notes
RIDAURA	3	SP
RINVOQ	2	PA; SP
RUCONEST	3	PA; SP; QL
sajazir	1	PA; SP; QL
SANDIMMUNE INTRAVENOUS	2	SP
SANDIMMUNE ORAL CAPSULE	3	SP
SANDIMMUNE ORAL SOLUTION	2	SP
SAPHNELO	3	PA; SP
SILIQ	3	PA; SP
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
SKYRIZI (150 MG DOSE)	2	PA; SP
SKYRIZI PEN	2	PA; SP
SOTYKTU	E	SP
SPEVIGO	E	SP
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

Drug Name	Drug Tier	Notes
TAKHZYRO	3	PA; SP
TALTZ	3	PA; SP
temsirolimus	1	SP
THYMOGLOBULIN	3	
TORISEL	3	SP
TREMFYA	2	PA; SP
TREXALL	3	
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 INTRAMUSCULAR SUSPENSION	\$0	
AFLURIA QUADRIVALENT INTRAMUSCULAR SUSPENSION PREFILLED SYRINGE 0.5 ML	\$0	
BCG VACCINE INJECTION SOLUTION RECONSTITUTED	E	
BEXSERO	\$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
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	
DIPHThERIA- TETANUS TOXOIDS DT	\$0	
ENGERIX-B INJECTION SUSPENSION 20 MCG/ML	\$0	
ENGERIX-B INJECTION SUSPENSION PREFILLED SYRINGE	\$0	
FLUAD QUADRIVALENT	\$0	
FLUARIX QUADRIVALENT INTRAMUSCULAR SUSPENSION PREFILLED SYRINGE	\$0	
FLUBLOK QUADRIVALENT	\$0	
FLUCELVAX QUADRIVALENT	\$0	
FLULAVAL QUADRIVALENT INTRAMUSCULAR SUSPENSION PREFILLED SYRINGE	\$0	
FLUMIST QUADRIVALENT	\$0	

Drug Name	Drug Tier	Notes
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	
HEPLISAV-B INTRAMUSCULAR SOLUTION PREFILLED SYRINGE	\$0	
HIBERIX INJECTION	\$0	
IMOVAX RABIES INTRAMUSCULAR SUSPENSION RECONSTITUTED	E	
INFANRIX	\$0	
IPOL INJECTION INJECTABLE	\$0	
IXIARO	E	
JANSSEN COVID-19 VACCINE	\$0	
MENACTRA INTRAMUSCULAR SOLUTION	\$0	
MENQUADFI INTRAMUSCULAR SOLUTION	\$0	
MENVEO	\$0	
M-M-R II INJECTION	\$0	

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

Drug Name	Drug Tier	Notes
MODERNA COVID-19 VAC (BOOSTER) INTRAMUSCULAR SUSPENSION 50 MCG/0.5ML	\$0	
MODERNA COVID-19 VACC 6M-5Y	\$0	
MODERNA COVID-19 VACCINE	\$0	
NOVAVAX COVID-19 VACCINE	\$0	
PEDIARIX INTRAMUSCULAR SUSPENSION PREFILLED SYRINGE	\$0	
PEDVAX HIB INTRAMUSCULAR SUSPENSION	\$0	
PENTACEL INTRAMUSCULAR SUSPENSION RECONSTITUTED	\$0	
PFIZER COVID-19 VAC BIVALENT	\$0	
PFIZER COVID-19 VAC-TRIS 5-11Y	\$0	
PFIZER COVID-19 VAC-TRIS 6M-4Y	\$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	
PROQUAD SUBCUTANEOUS SUSPENSION RECONSTITUTED	\$0	
QUADRACEL INTRAMUSCULAR SUSPENSION	\$0	

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

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

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

Drug Name	Drug Tier	Notes
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>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
ATELVIA	3	QL
BINOSTO	E	
calcitonin (salmon) injection	1	
calcitonin (salmon) nasal	1	QL
EVENITY	3	PA; SP; QL
FORTEO SUBCUTANEOUS SOLUTION PEN-INJECTOR 600 MCG/2.4ML	E	SP

Drug Name	Drug Tier	Notes
FOSAMAX ORAL TABLET 70 MG	3	QL
FOSAMAX PLUS D	E	
ibandronate sodium intravenous solution 3 mg/3ml	1	QL
ibandronate sodium oral	1	QL
MIACALCIN INJECTION	3	
pamidronate disodium intravenous solution	1	SP
PROLIA SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	2	PA; SP; QL
RECLAST	3	SP
risedronate sodium oral tablet 150 mg, 35 mg	1	QL
risedronate sodium oral tablet 30 mg, 5 mg	1	
risedronate sodium oral tablet delayed release	1	QL
TERIPARATIDE (RECOMBINANT)	2	PA; SP
TYMLOS	2	PA; SP
XGEVA	2	PA; SP
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	

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

Drug Name	Drug Tier	Notes
PARSABIV	3	SP
RAYALDEE	3	
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	
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	

Drug Name	Drug Tier	Notes
ANDEXXA INTRAVENOUS SOLUTION RECONSTITUTED 200 MG	E	
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	
AUM MINI INSULIN PEN NEEDLE	\$0	
AUM READYGARD DUO PEN NEEDLE	\$0	
AUM SAFETY PEN NEEDLE	\$0	
AUTOSOFT 30 INFUSION SET	E	
AUTOSOFT 90 INFUSION SET	E	
AUTOSOFT XC INFUSION SET	E	
AVAILNEX	E	
AVITENE	E	
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	

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

Drug Name	Drug Tier	Notes
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	
CAMINO PRO COMPLETE/GLYTACT IN	E	
CARESTART COVID-19 HOME TEST	E	
CARETOUCH 2 CPAP HOSE HANGER	E	
CARETOUCH CPAP & BIPAP HOSE	E	
CARETOUCH CPAP MASK WIPES	E	
CARETOUCH CPAP PRE-WASH SOLN	E	

Drug Name	Drug Tier	Notes
CARETOUCH CPAP TUBE BRUSH	E	
CARETOUCH HYPODERMIC NEEDLE 22G X 1" , 26G X 1"	3	
CARETOUCH UNIVERSL CPAP FILTER	E	
CAT HAIR EXTRACT SUBCUTANEOUS	E	
CATTLE EPITHELIUM	E	
CAYA	\$0	QL
CEDAR ELM	E	
CLEARDETECT COVID-19 AG HOME	E	
CLINITEST RAPID COVID-19 TEST	E	
COCKLEBUR	E	
coenzyme q10 oral capsule 100 mg, 50 mg	E	
coenzyme q-10 oral capsule 200 mg, 30 mg	E	
COLCIGEL	E	
COLD-EEZE NATURAL MULTI-SYMP MOUTH/THROAT	E	
COLD-EEZE PLUS DEFENSE MOUTH/THROAT	E	
COLD-EEZE SUGAR FREE MOUTH/THROAT LOZENGE	E	
COMPRESSOR NEBULIZER	E	
CONDOMS	E	
coq10 oral capsule 200 mg	E	
CORN POLLEN	E	
CORTROSYN	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
cosyntropin injection	E	
COVID-19 AT-HOME TEST	E	
COVID-19 RAPID SELF TEST KIT	E	
COVID-19 SPECIMEN COLLECTION	E	
DANDELION	E	
deferoxamine mesylate	1	
DEPLIN 15	E	
DEPLIN 7.5	E	
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	

Drug Name	Drug Tier	Notes
DIATRUST COVID-19 HOME TEST	E	
DIGIFAB	3	
DOG EPITHELIUM	E	
DOG FENNEL	E	
DOJOLVI	E	
DROPSAFE ALCOHOL PREP	3	
DUROLANE INTRA-ARTICULAR	2	PA; SP
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	
ENCARE VAGINAL SUPPOSITORY	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	

For more information regarding the tiers 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 GENTLEASE ORAL POWDER	E	
ENFAMIL NEUROPRO INFANT ORAL PACKET	E	
ENFAMIL NEUROPRO INFANT ORAL POWDER	E	
ENFAMIL NEUROPRO SENSITIVE	E	
ENFAMIL NUTRAMIGEN LIPIL ORAL LIQUID	E	
ENFAMIL NUTRAMIGEN ORAL LIQUID	E	
ENFAMIL NUTRAMIGEN PROBIOT LGG	E	
ENLYTE	E	
ENOVARX-AMITRIPTYLINE	E	
ENTERADE	E	
ENTERAGAM	E	
ENU NUTRITIONAL SHAKE	E	
ENU PRO3 PLUS	E	
EPISIL	E	
EQUACARE JR	E	
ergoloid mesylates oral	1	
ESSENTIAL CARE JR	E	
EUFLEXXA INTRA-ARTICULAR SOLUTION PREFILLED SYRINGE	2	PA; SP
FC2 FEMALE CONDOM	\$0	QL
FEMCAP	\$0	QL
FIRDAPSE	E	SP
FIRE ANT	E	

Drug Name	Drug Tier	Notes
fish oil oral capsule 1000 mg	E	
FLEXICHAMBER	2	
FLEXICHAMBER ADULT MASK/SMALL	2	
FLEXICHAMBER CHILD MASK/LARGE	2	
FLEXICHAMBER CHILD MASK/SMALL	2	
FLOWFLEX COVID-19 AG HOME TEST	E	
FORANE	E	
formaldehyde external solution 10 %	E	
formaldehyde solution 37 % external (rx)	1	
formaldehyde solution 37 % external (rx)	E	
FOSTEUM PLUS	E	
GELFILM EXTERNAL	E	
GEL-FLOW	E	
GEL-FLOW NT	E	
GELFOAM	E	
GELFOAM COMPRESSED SIZE 100	E	
GELFOAM DENTAL PACK SIZE 4	E	
GELFOAM SPONGE	E	
GELFOAM SPONGE SIZE 100	E	
GELFOAM SPONGE SIZE 200	E	
GELFOAM SPONGE SIZE 50	E	
GELFOAM-JMI POWDER	E	
GELFOAM-JMI SPONGE	E	
GELSYN-3	2	PA; SP
GELX	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
GERMAN COCKROACH	E	
GIVLAARI	3	PA; SP
GLEOLAN	E	
glutaraldehyde external	1	
GLYTACTIN BETTERMILK 15 PACKET ORAL	E	
GLYTACTIN BETTERMILK DE-LITE	E	
GLYTACTIN BUILD 10PE	E	
GLYTACTIN BUILD 20/20	E	
GLYTACTIN BUILD 20/20 PKU	E	
GLYTACTIN BURST	E	
GLYTACTIN COMPLETE 10PE	E	
GLYTACTIN RESTORE 10	E	
GLYTACTIN RESTORE 5	E	
GLYTACTIN RESTORE LITE 10	E	
GLYTACTIN RESTORE LITE 10PE	E	
GLYTACTIN RTD 10 LIQUID ORAL	E	
GLYTACTIN RTD 15	E	
GLYTACTIN RTD LITE 15 LIQUID ORAL	E	
GLYTACTIN SWIRL 15	E	
GLYTACTIN SWIRL 15PE	E	
GOLDENROD	E	
GRASTEK	3	PA; QL
HACKBERRY	E	
HCU EASY	E	
HIBICLENS	E	
HOMACTIN AA PLUS	E	

Drug Name	Drug Tier	Notes
HOME PAP KIT	E	
HORSE EPITHELIUM	E	
HUMATROPEN FOR 12MG	E	
HUMATROPEN FOR 24MG	E	
HUMATROPEN FOR 6MG	E	
HYALGAN	E	SP
HYLAFEM	E	
HYMOVIS	E	SP
IGALMI	E	
IHEALTH COVID-19 RAPID TEST	E	
IMUBOLIC	E	
INDICAID COVID-19 RAPID TEST	E	
INSPIREASE RESERVOIR BAGS	2	
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 5 MM , 32G X 6 MM , 32G X 8 MM , 33G X 4 MM , 33G X 5 MM , 33G X 6 MM	\$0	
INTELISWAB COVID-19 RAPID TEST	E	
INTERCEED	E	
IOSAT	E	
isoflurane	E	
ISOVACTIN AA PLUS ORAL PACKET	E	
JOHNSON GRASS	E	
JUNE GRASS POLLEN STANDARDIZED	E	

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

Drug Name	Drug Tier	Notes
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	3	PA; SP
LENSCALE	E	
lifes dha adult	E	
LIMBREL	E	
LIMBREL250	E	
LIMBREL500	E	
LIVMARLI	E	SP
l-methylfolate forte	E	
l-methylfolate-algae oral capsule 15-90.314 mg	E	
LORMATE	E	
MACRILEN	E	
MEADOW FESCUE GRASS POLLEN	E	
MELALEUCA	E	
MESQUITE	E	
METHACHOLINE CHLORIDE INHALATION	E	
methergine oral	1	QL
METHOHEXITAL SODIUM INTRAVENOUS SOLUTION PREFILLED SYRINGE 100 MG/10ML	E	

Drug Name	Drug Tier	Notes
methylergonovine maleate oral	1	QL
METOPIRONE	E	
MINIMED PUMP RESERVOIR 3ML	E	
MITE (D. FARINAE) SUBCUTANEOUS	E	
MITE (D. PTERONYSSINUS) SUBCUTANEOUS	E	
MIXED FEATHERS	E	
MIXED RAGWEED	E	
MONOVISC	E	SP
MORCIN	E	
MOUNTAIN CEDAR	E	
MOUSE EPITHELIUM	E	
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	
NORDIPEN 5 INJECTION DEVICE	E	
NOVOFINE AUTOCOVER PEN NEEDLE	\$0	
NOVOFINE PEN NEEDLE	\$0	
NOVOFINE PLUS PEN NEEDLE	\$0	
ODACTRA	3	PA; QL
odorless coated fish oil	E	
OLIVE TREE	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
OMEGA MONOPURE 650 EC	E	
OMNIPOD 5 G6 INTRO (GEN 5)	2	
OMNIPOD 5 G6 POD (GEN 5)	2	
ON/GO COVID-19 ANTIGEN TEST	E	
ON/GO ONE COVID-19 HOME TEST	E	
OPTIONS GYNOL II CONTRACEPTIVE	\$0	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
OVEGA-3	E	
OXBRYTA	E	SP
PALFORZIA	E	SP
PARI ALTERA NEBULIZER HANDSET	E	
PARI PRONEB MAX LC PLUS	E	
PARI PRONEB MAX LC SPRINT	E	
PARI SMARTMASK BABY/ELBOW	E	
PARI TREK S COMBO PACK	E	
PARI VORTEX ADULT MASK	E	

Drug Name	Drug Tier	Notes
PEDIATRIC COMPRESSOR NEBULIZER	E	
PH STRIPS	E	
PHEXXI	E	
PHOTREXA-PHOTREXA VISCOUS KIT	3	
PILOT COVID-19 AT-HOME TEST	E	
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	
PRO-CRITIC	E	
PROLEVA	E	
PRONEB ULTRA FILTER SET	E	
PROVOCHOLINE INHALATION KIT	E	
PSORIZIDE FORTE	E	
PSORIZIDE ULTRA	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
PURAMINO DHA/ARA	E	
QUEEN PALM	E	
QUICKVUE AT-HOME COVID-19 TEST	E	
RABBIT EPITHELIUM	E	
RADIOGARDASE	3	
RAGWITEK	3	PA; QL
RAYA SURE PEN NEEDLE	\$0	
RED MAPLE	E	
RED MULBERRY	E	
RED TOP GRASS POLLEN	E	
RESOURCE THICKENUP JUICE	E	
RETHYMIC	E	SP
RHEUMATE	E	
ROUGH MARSH ELDER	E	
RUSSIAN THISTLE	E	
RYPLAZIM	3	PA; SP
SAFETY PEN NEEDLES	\$0	
sevoflurane	E	
SHAGBARK HICKORY	E	
SHARPS CONTAINER	E	
SHEEP SORREL	E	
SHORT RAGWEED POLLEN EXT	E	
SILATRIX	E	
SILTREX	E	
SOLESTA	2	SP
SORBITOL IRRIGATION SOLUTION 3 %	E	
sorbitol-mannitol	E	
SORREL/DOCK MIX	E	
SPEEDGEL RX	E	
SPINRAZA	3	PA; SP

Drug Name	Drug Tier	Notes
SPINY PIGWEED	E	
STREPTOCOCCINUM 30C	E	
SUPARTZ FX	E	SP
SUPRANE	E	
SURGICEL SNOW 1"X2"	E	
SURGICEL SNOW 2"X4"	E	
SURGICEL SNOW 4"X4"	E	
SWEET GUM	E	
SWEET VERNAL GRASS POLLEN	E	
SYNOJOYNT	E	SP
SYNVISC INTRA-ARTICULAR SOLUTION PREFILLED SYRINGE	E	SP
SYNVISC ONE INTRA-ARTICULAR SOLUTION PREFILLED SYRINGE	E	SP
SYRINGE AVITENE	E	
T:SLIM X2 3ML CARTRIDGE	E	
TACHOSIL	3	
TALL RAGWEED	E	
TAVNEOS	E	SP
terrell	E	
THROMBI-GEL 10	E	
THROMBI-GEL 100	E	
THROMBI-GEL 40	E	
THROMBI-PAD	E	
THYROGEN INTRAMUSCULAR SOLUTION RECONSTITUTED 0.9 MG	2	PA; SP

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

Drug Name	Drug Tier	Notes
TIMOTHY GRASS POLLEN ALLERGEN SUBCUTANEOUS SOLUTION 100000 BAU/ML	E	
TISSEEL EXTERNAL KIT	3	
TOBAKIENT	E	
TRANZGEL	E	
TRAUMEEL EXTERNAL OINTMENT	E	
TRICHOPHYTON MENTAGROPHYTES	E	
TRILURON	E	SP
TRUSTEEL INFUSION SET	E	
TYLACTIN BUILD 20PE TYR	E	
TYLACTIN COMPLETE 15 PE	E	
TYLACTIN RESTORE 10	E	
TYLACTIN RESTORE 5PE	E	
TYLACTIN RTD 15 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	
ULTRAFOAM SPONGE 2X6.25X7CM	E	
ULTRAFOAM SPONGE 8X12.5X1CM	E	
ULTRAFOAM SPONGE 8X12.5X3CM	E	

Drug Name	Drug Tier	Notes
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
WIDE-SEAL DIAPHRAGM 70	\$0	QL
WIDE-SEAL DIAPHRAGM 75	\$0	QL
WIDE-SEAL DIAPHRAGM 80	\$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
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	
<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	
BESIVANCE	3	
BETADINE OPHTHALMIC PREP	3	
bromfenac sodium (once-daily)	1	QL
BROMSITE	E	

Drug Name	Drug Tier	Notes
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	
ILEVRO	E	
ILUVIEN INTRAVITREAL	E	SP
INVELTYS	3	
ketorolac tromethamine ophthalmic	1	

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

Drug Name	Drug Tier	Notes
ketotifen fumarate ophthalmic	E	
KLARITY-A	E	
KLARITY-L	E	
levofloxacin ophthalmic	1	
LOTEMAX	E	
LOTEMAX SM	3	
loteprednol etabonate ophthalmic gel	1	QL
loteprednol etabonate ophthalmic suspension	1	
MAXIDEX	3	
MAXITROL	3	
MITOSOL	3	
moxifloxacin hcl (2x day)	1	
moxifloxacin hcl ophthalmic solution	1	
MOXIFLOXACIN HCL OPHTHALMIC SOLUTION PREFILLED SYRINGE	E	
NATACYN	2	
neomycin-polymyxin-dexameth ophthalmic ointment	1	
neomycin-polymyxin-dexameth ophthalmic suspension 3.5-10000-0.1	1	
neomycin-polymyxin-hc ophthalmic suspension 3.5-10000-1	1	
NEVANAC	E	
OCUFLOX	3	
ofloxacin ophthalmic	1	
olopatadine hcl solution 0.1 % ophthalmic (otc)	E	
olopatadine hcl solution 0.1 % ophthalmic (rx)	1	

Drug Name	Drug Tier	Notes
olopatadine hcl solution 0.2 % ophthalmic (otc)	E	
olopatadine hcl solution 0.2 % ophthalmic (rx)	1	
OZURDEX INTRAVITREAL	E	SP
PATADAY OPHTHALMIC SOLUTION 0.1 %, 0.2 %	E	
POVIDONE-IODINE OPHTHALMIC	3	
PRED FORTE	3	
PRED MILD	3	
PREDNISOL ACE-MOXIFLOX-BROMFEN	E	
prednisolone acetate ophthalmic	1	
prednisolone acetate p-f	E	
PREDNISOLONE ACETATE-NEPAFENAC	E	
PREDNISOLONE ACET-MOXIFLOXACIN	E	
prednisolone sodium phosphate ophthalmic	1	
PREDNISOLON-GATIFLOX-BROMFENAC	E	
PREDNISOLON-MOXIFLOX-BROMFENAC OPHTHALMIC SOLUTION 1-0.5-0.075 %	E	
PREDNISOLON-MOXIFLOX-NEPAFENAC	E	
PROLENSA	2	QL
RETISERT INTRAVITREAL	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
sulfacetamide sodium ophthalmic	1	
TOBRADEX OPTHALMIC OINTMENT	3	
TOBRADEX OPTHALMIC SUSPENSION	E	
TOBRADEX ST	3	
tobramycin ophthalmic	1	
tobramycin-dexamethasone	1	
TOBREX OPTHALMIC OINTMENT	3	
trifluridine ophthalmic	1	
TRIPLE PMB	E	
TRIPLE PMK	E	
TYRVAYA	3	PA; QL
UPNEEQ	3	PA
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	

Drug Name	Drug Tier	Notes
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	
DORZOLAMIDE HCL SOLUTION 2 % OPTHALMIC	3	
dorzolamide hcl solution 2 % ophthalmic	1	
dorzolamide hcl-timolol mal	1	
dorzolamide hcl-timolol mal pf	1	
DURYSTA	E	
ISTALOL	3	
KEVEYIS	3	PA; SP; QL
latanoprost ophthalmic	1	
LATANOPROST-TIMOLOL MALEATE	E	
levobunolol hcl ophthalmic solution 0.5 %	1	
LUMIGAN OPTHALMIC SOLUTION 0.01 %	2	QL
methazolamide 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
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 oculosol	1	
timolol maleate ophthalmic gel forming solution	E	
timolol maleate ophthalmic solution	1	
timolol maleate pf	1	
TIMOLOL-BRIMON-DORZOL-LATANOPR	E	
TIMOLOL-BRIMONIDINE-DORZOLAMID	E	
TIMOLOL-DORZOLAMID-LATANOPROST	E	
TIMOPTIC	E	
TIMOPTIC OCUDOSE OPTHALMIC SOLUTION 0.25 %	3	
TIMOPTIC OCUDOSE OPTHALMIC 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

Drug Name	Drug Tier	Notes
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	
atropine sulfate ophthalmic ointment	1	
ATROPINE SULFATE OPTHALMIC 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	
BYOOVIZ	E	SP
carboxymethylcellulose sodium ophthalmic solution 0.5 %	E	
CEQUA	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
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	
PRED-G	3	
PRED-G S.O.P.	3	
PREDNISOLONE- BROMFENAC	E	
PREDNISOLONE- GATIFLOXACIN OPHTHALMIC SUSPENSION	E	
PREDNISOLONE- MOXIFLOXACIN	E	
proparacaine hcl ophthalmic	1	
proparacaine- fluorescein	E	
REFRESH RELIEVA	E	
REFRESH RELIEVA PF OPHTHALMIC SOLUTION 0.5-0.9 %	E	
RESTASIS	1	PA
RESTASIS MULTIDOSE OPHTHALMIC EMULSION 0.05 %	2	PA
sodium chloride (hypertonic)	E	
sulfacetamide- prednisolone ophthalmic solution	1	
SUSVIMO (IMPLANT 1ST FILL)	3	PA; SP

Drug Name	Drug Tier	Notes
SUSVIMO (IMPLANT REFILL)	3	PA; SP
SYSTANE COMPLETE	E	
SYSTANE HYDRATION PF	E	
SYSTANE ULTRA PF	E	
tetracaine hcl ophthalmic	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	
ultra lubricating eye drops pf	E	
VABYSMO	3	PA; SP
VERKAZIA	E	
VISIONBLUE INTRAOCULAR	E	
VISUDYNE	3	SP
XIIDRA	2	PA
ZYLET	3	
<b>Otic Agents - Drugs for Ear Conditions</b>		
acetic acid otic	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
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	
12hr allergy relief	E	
24hr allergy relief	E	
ADRENALIN NASAL	E	
all day allergy d	E	
allergy (cetirizine)	E	
allergy 24hour indoor/outdoor	E	
allergy 24-hr	E	
allergy childrens	E	

Drug Name	Drug Tier	Notes
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	
ASTEPRO CHILDRENS	E	
ASTEPRO NASAL SOLUTION 205.5 MCG/SPRAY	E	
azelastine hcl nasal	1	QL
azelastine-fluticasone	1	QL
banophen oral capsule 25 mg	E	
banophen oral tablet	E	
BECONASE AQ	3	QL
BENADRYL ALLERGY CHILDRENS ORAL LIQUID	E	
BENADRYL ALLERGY EXTRA STR	E	
benzonatate	1	
carbinoxamine maleate oral 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
carbinoxamine maleate oral tablet 4 mg	1	
carbinoxamine maleate oral tablet 6 mg	E	
cetirizine hcl oral solution 1 mg/ml	1	
cetirizine hcl oral tablet	E	
cetirizine hcl oral tablet chewable 10 mg	E	
cetirizine-pseudoephedrine er	E	
chest congestion relief dm oral syrup	E	
chest congestion relief oral liquid	E	
chest congestion relief oral tablet	E	
chlorpheniramine maleate er	E	
CHLOR-TRIMETON ORAL TABLET	E	
CINQAIR	3	PA; SP
CLARINEX ORAL TABLET	E	
CLARINEX-D 12 HOUR	E	
CLARITIN ORAL TABLET	E	
CLARITIN REDITABS ORAL TABLET DISPERSIBLE 10 MG	E	
CLARITIN-D 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	

Drug Name	Drug Tier	Notes
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	

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

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-codeine oral solution	1	PA; QL
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	

Drug Name	Drug Tier	Notes
KARBINAL ER ORAL SUSPENSION EXTENDED RELEASE	E	
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 oral tablet dispersible 10 mg	E	
loratadine-d 12hr	E	
loratadine-d 24hr	E	
maxi-tuss ac	1	PA; QL
maxi-tuss gmx	E	
maxi-tuss pe max	E	
m-dryl	E	
MICLARA LQ	E	
MM ALLER-BEN	E	
mometasone furoate nasal	1	QL
MUCINEX CHILDRENS FREEFROM ORAL LIQUID 5-100 MG/5ML	E	
MUCINEX CHILDRENS STUFFY NOSE	E	
MUCINEX DM	E	
MUCINEX FAST-MAX CHEST CONG MS	E	
mucinex fast-max cong headache	E	
MUCINEX FAST-MAX DM MAX	E	
MUCINEX SINUS-MAX SEV CONG/PN ORAL CAPSULE	E	

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

Drug Name	Drug Tier	Notes
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	
mucus+chest congestion	E	
mucus-d	E	
NASACORT ALLERGY 24HR	E	
nasal decongestant oral tablet 30 mg	E	
nasal decongestant pe	E	
nasal moisturizing spray	E	
nasal spray 12 hour	E	
nasal spray no drip	E	
NEBUSAL INHALATION NEBULIZATION SOLUTION 6 %	3	
NEO-SYNEPHRINE COLD/ALLRG MILD	E	
NEO-SYNEPHRINE COLD/ALLRGY EXT	E	
NEO-SYNEPHRINE COLD/ALLRGY REG	E	
NUCALA	2	PA; SP; QL
olopatadine hcl nasal	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	

Drug Name	Drug Tier	Notes
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
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
robafen mucus/chest congestion	E	
ROBITUSSIN 12 HOUR COUGH CHILD	E	
ROBITUSSIN COUGH+CHEST CONG DM ORAL LIQUID 20-400 MG/20ML	E	
RYALTRIS	E	
RYCLORA ORAL SOLUTION	E	
ryvent	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
sesame oil nasal spray	E	
sinus 12 hour	E	
SINUVA	E	
sm allergy relief childrens	E	
sm guaifenesin/pseudoephedrine	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	
TEZSPIRE	E	SP
triprolidine hcl oral liquid 0.938 mg/ml	E	
tusnel-ex	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	
tussin mucus+chest congest sf	E	
TUXARIN ER	E	
TUZISTRA XR ORAL SUSPENSION EXTENDED RELEASE	E	

Drug Name	Drug Tier	Notes
wal-tap cold/allergy oral elixir	E	
XHANCE	E	
XOLAIR	2	PA; SP
ZETONNA	3	QL
ZYRTEC	E	
ZYRTEC ALLERGY ORAL TABLET	E	
ZYRTEC CHILDRENS ALLERGY ORAL TABLET CHEWABLE 10 MG	E	
<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	
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

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

Drug Name	Drug Tier	Notes
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 INHALATION AEROSOL POWDER BREATH ACTIVATED 62.5-25 MCG/ACT	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) INHALATION AEROSOL POWDER BREATH ACTIVATED 220 MCG/ACT	E	

Drug Name	Drug Tier	Notes
ASMANEX (14 METERED DOSES) INHALATION AEROSOL POWDER BREATH ACTIVATED 220 MCG/ACT	E	
ASMANEX (30 METERED DOSES) INHALATION AEROSOL POWDER BREATH ACTIVATED 110 MCG/ACT, 220 MCG/ACT	E	
ASMANEX (60 METERED DOSES) INHALATION AEROSOL POWDER BREATH ACTIVATED 220 MCG/ACT	E	
ASMANEX HFA	E	
ATROVENT HFA	3	QL
AUVI-Q INJECTION SOLUTION AUTO-INJECTOR 0.1 MG/0.1ML	3	QL
AUVI-Q INJECTION SOLUTION AUTO-INJECTOR 0.15 MG/0.15ML, 0.3 MG/0.3ML	E	
BEVESPI AEROSPHERE	E	
BREO ELLIPTA INHALATION AEROSOL POWDER BREATH ACTIVATED 100-25 MCG/ACT, 200-25 MCG/ACT	2	QL
BREZTRI AEROSPHERE	2	QL
BROVANA	E	
budesonide inhalation	1	QL
BUDESONIDE-FORMOTEROL FUMARATE	E	

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

Drug Name	Drug Tier	Notes
COMBIVENT RESPIMAT	2	QL
cromolyn sodium inhalation	1	
DALIRESP	3	PA
DUAKLIR PRESSAIR	E	
DULERA	E	
elixophyllin	1	
epinephrine injection solution auto-injector	1	
EPINEPHRINE PROFESSIONAL	E	
EPINEPHRINESNAP-EMS	E	
EPINEPHRINESNAP-V	E	
EPIPEN 2-PAK INJECTION SOLUTION AUTO-INJECTOR	3	ST
EPIPEN JR 2-PAK INJECTION SOLUTION AUTO-INJECTOR	E	
EPISNAP	E	
ESBRIET	3	PA; SP
FLOVENT DISKUS INHALATION AEROSOL POWDER BREATH ACTIVATED 100 MCG/ACT, 250 MCG/ACT, 50 MCG/ACT	2	QL
FLOVENT HFA	2	QL
FLUTICASONE FUROATE-VILANTEROL INHALATION AEROSOL POWDER BREATH ACTIVATED 100-25 MCG/ACT, 200-25 MCG/ACT	E	
FLUTICASONE PROPIONATE HFA	E	

Drug Name	Drug Tier	Notes
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 INHALATION AEROSOL POWDER BREATH ACTIVATED 62.5 MCG/ACT	E	
ipratropium bromide inhalation	1	QL
ipratropium-albuterol	1	QL
levalbuterol hcl inhalation nebulization solution 0.31 mg/3ml, 0.63 mg/3ml, 1.25 mg/0.5ml, 1.25 mg/3ml	1	QL
LEVALBUTEROL HFA INHALATION AEROSOL 45 MCG/ACT	E	
LONHALA MAGNAIR REFILL KIT	3	QL
LONHALA MAGNAIR STARTER KIT	3	QL
montelukast sodium oral	1	
OFEV	3	PA; SP
PERFOROMIST	3	QL
pirfenidone	1	PA; SP

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

Drug Name	Drug Tier	Notes
PROAIR DIGIHALER INHALATION AEROSOL POWDER BREATH ACTIVATED 108 (90 BASE) MCG/ACT	E	
PROAIR RESPICLICK	E	
PROLASTIN-C INTRAVENOUS SOLUTION	3	PA; SP
PROLASTIN-C INTRAVENOUS SOLUTION RECONSTITUTED 1000 MG	3	PA; SP
PROVENTIL HFA	E	
PULMICORT FLEXHALER	2	QL
PULMICORT SUSPENSION	E	
QVAR REDIHALER	E	
SEREVENT DISKUS INHALATION AEROSOL POWDER BREATH ACTIVATED 50 MCG/ACT	2	QL
SINGULAIR	E	
SPIRIVA HANDIHALER	2	QL
SPIRIVA RESPIMAT INHALATION AEROSOL SOLUTION 1.25 MCG/ACT, 2.5 MCG/ACT	2	QL
STERITALC	3	
STIOLTO RESPIMAT INHALATION AEROSOL SOLUTION 2.5-2.5 MCG/ACT	2	QL
STRIVERDI RESPIMAT	2	QL
SYMBICORT	2	QL
SYMJEPI	3	

Drug Name	Drug Tier	Notes
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 INHALATION AEROSOL POWDER BREATH ACTIVATED 100-62.5-25 MCG/ACT, 200-62.5-25 MCG/ACT	2	QL
TUDORZA PRESSAIR INHALATION AEROSOL POWDER BREATH ACTIVATED 400 MCG/ACT	E	
VENTOLIN HFA	E	
wixela inhub inhalation aerosol powder breath activated 100-50 mcg/act, 250-50 mcg/act, 500-50 mcg/act	E	
XOPENEX NEB	3	QL
XOPENEX CONCENTRATE	3	QL
XOPENEX HFA	E	
YUPELRI	3	QL
zafirlukast	1	
ZEMAIRA	3	PA; SP
zileuton er	E	
ZYFLO	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>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
alyq	1	PA; SP; QL
ambrisentan	1	PA; SP; QL
bosentan	1	PA; SP; QL
epoprostenol sodium	1	PA; SP
FLOLAN	3	PA; SP

Drug Name	Drug Tier	Notes
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
TADLIQ	E	SP
TRACLEER 62.5 MG, 125 MG	E	SP
TRACLEER 32 MG	3	PA; SP; QL
treprostinil	1	PA; SP
TYVASO	3	PA; SP; QL
TYVASO DPI MAINTENANCE KIT	E	SP
TYVASO DPI TITRATION KIT	E	SP
TYVASO REFILL	3	PA; SP; QL
TYVASO STARTER	3	PA; SP; QL
UPTRAVI INTRAVENOUS	3	PA; SP
UPTRAVI ORAL	3	PA; SP; QL
VELETRI	3	PA; SP
VENTAVIS	3	PA; SP; QL

For more information regarding the tiers 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>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	
cyclobenzaprine hcl er	E	
cyclobenzaprine hcl oral tablet 10 mg, 5 mg	1	
cyclobenzaprine hcl oral tablet 7.5 mg	E	
CYCLOPHENE RAPIDPAQ	E	
DANTRIUM ORAL CAPSULE 25 MG	3	
dantrolene sodium oral	1	
ENOVARX-BACLOFEN	E	
ENOVARX-CYCLOBENZAPRINE HCL	E	
FEXMID	E	
FLEQSUVY	E	
GABLOFEN INTRATHECAL SOLUTION 10000 MCG/20ML, 20000 MCG/20ML, 40000 MCG/20ML	E	

Drug Name	Drug Tier	Notes
GABLOFEN INTRATHECAL SOLUTION PREFILLED SYRINGE 10000 MCG/20ML, 20000 MCG/20ML, 40000 MCG/20ML, 50 MCG/ML	E	
LIORESAL	E	
LORZONE	E	
LYVISPAH	E	
METAXALL CP	E	
metaxalone	E	
methocarbamol oral tablet 1000 mg	E	
methocarbamol oral tablet 500 mg, 750 mg	1	
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	
<b>Sleep Disorder Agents</b>		
AMBIEN	E	
AMBIEN CR	E	
armodafinil	1	PA; QL
BELSOMRA	3	ST; QL
DAYVIGO	3	ST; 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
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	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। दुभाषिए 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 قید شده در کارت شناسایی برنامه بهداشتی خود تماس حاصل نموده و 0 را فشار دهید. TTY 711
11	German	Sie haben das Recht, kostenlose Hilfe und Informationen in Ihrer Sprache zu erhalten. Um einen Dolmetscher anzufordern, rufen Sie die gebührenfreie Nummer auf Ihrer Krankenversicherungskarte an und drücken Sie die 0. TTY 711
12	Gujarati	તમને વિના મૂલ્યે મદદ અને તમારી ભાષામાં માહિતી મેળવવાનો અધિકાર છે. દુભાષિયા માટે વિનંતી કરવા, તમારા હેલ્થ પ્લાન ID કાર્ડ પરની સૂચીમાં આપેલ ટોલ-ફ્રી મેમ્બર ફોન નંબર ઉપર કોલ કરો, 0 દબાવો. TTY 711
13	Russian	Вы имеете право на бесплатное получение помощи и информации на вашем языке. Чтобы подать запрос переводчика позвоните по бесплатному номеру телефона, указанному на обратной стороне вашей идентификационной карты и нажмите 0. Линия TTY 711
14	Japanese	ご希望の言語でサポートを受けたり、情報入手したりすることができます。料金はかかりません。通訳をご希望の場合は、医療プランのIDカードに記載されているメンバー用のフリーダイヤルまでお電話の上、0を押してください。TTY専用番号は711です。
15	Laotian	ທ່ານມີສິດທິຈະໄດ້ຮັບການຊ່ວຍເຫຼືອແລະຂໍ້ມູນຂ່າວສານທີ່ເປັນພາສາຂອງທ່ານບໍ່ມີຄ່າໃຊ້ຈ່າຍ. ເພື່ອຂໍຮ້ອງນາຍພາສາ, ໂທລະສັບໂທລະສານໂທລະສັບສໍາລັບສະມາຊິກທີ່ໄດ້ລະບຸໂຕ້ໃນບັດສະມາຊິກຂອງທ່ານ, ກົດລະກ 0. TTY 711



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**Premium standard**