

# Your 2020 Prescription Drug List

## Essential 4-Tier



Effective Jan. 1, 2020

This Prescription Drug List (PDL) is accurate as of Jan. 1, 2020 and is subject to change after this date. The next anticipated update will be July 1, 2020. This PDL applies to members of our UnitedHealthcare, All Savers, Golden Rule, Neighborhood Health Plan and River Valley medical plans with a pharmacy benefit subject to the Essential 4-Tier PDL. Your estimated coverage and copayment/coinsurance may vary based on the benefit plan you choose and the effective date of the plan.



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# Understanding your Prescription Drug List (PDL)

## What is a PDL?

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

## How do I use my PDL?

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

## What are tiers?

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

## When does the PDL change?

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

## About this PDL

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

## Understanding your Prescription Drug List (continued)

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

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

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

### **Who decides which medications are covered?**

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

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

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

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

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

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

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

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

### **Over-the-counter (OTC) medications**

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

## Reading your PDL

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

### Tier information

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

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

Drug Tier	Includes	Helpful Tips
<b>Tier 1</b>	\$ <b>Lower-cost</b> Medications that provide the highest overall value. Mostly generic drugs. Some brand-name drugs may also be included.	Use Tier 1 drugs for the lowest out-of-pocket costs.
<b>Tiers 2 and 3</b>	\$\$ <b>Mid-range cost</b> Medications that provide good overall value. A mix of brand-name and generic drugs.	Use Tier 2 or Tier 3 drugs, instead of Tier 4, to help reduce your out-of-pocket costs.
<b>Tier 4</b>	\$\$\$ <b>Highest-cost</b> Medications that provide the lowest overall value. Mostly brand-name drugs, as well as some generics.	Many Tier 4 drugs have lower-cost options in Tiers 1, 2 or 3. Ask your doctor if they could work for you.

## Reading your PDL (continued)

### 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.

**H**                    **Health Care Reform Preventive**  
This medication is part of a health care reform preventive benefit and may be available at no additional cost to you.

**H-PA**                **Health Care Reform Preventive with Prior Authorization**  
May be part of health care reform preventive and available at no additional cost to you if prior authorization criteria is met.

**NF**                    **Non-Formulary**  
Non-formulary drugs are not covered by your insurance provider, however may be filled at a Tier 4 cost share if certain criteria is met.

**PA**                    **Prior Authorization**  
Requires your doctor to provide information about why you are taking a medication to determine how it may be covered by your plan.

**QL**                    **Quantity Limits**  
Specifies the largest quantity of medication covered per copayment or in a defined period of time.

**SP**                    **Specialty Medication**  
Specialty medications treat complex or rare conditions and may require special storage and handling. You may be required to obtain these medications from a specialty pharmacy.

**ST**                    **Step Therapy (referred to as First Start in New Jersey)**  
Requires prior authorization and may require you to try one or more other medications before the medication you are requesting may be covered.

## Reading your PDL (continued)

### Coverage details.

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

#### **Diabetes: Continuous Glucose Monitors, Sensors**

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

#### **Endocrine: Growth Hormone**

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

#### **Infertility**

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

This is not a covered benefit for Neighborhood Health Plan.

#### **Medications for Sexual Dysfunction**

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



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



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



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

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

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

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

Drug Name	Drug Tier	Requirements & Limits	Drug Name	Drug Tier	Requirements & Limits
<b>Analgesics - Drugs for Pain</b>			hydromorphone hcl oral	1	
acetaminophen-codeine	1		HYSINGLA ER	NF	PA, ST, QL
acetaminophen-codeine #2	1		KADIAN	NF	PA, ST, QL
acetaminophen-codeine #3	1		lidocaine external ointment	2	QL
acetaminophen-codeine #4	1		lidocaine external patch	3	PA, QL
apap-caff-dihydrocodeine	NF	QL	lidocaine-prilocaine external cream	1	
ARYMO ER	NF	PA, ST, QL	LIDODERM	NF	PA, QL
BELBUCA	NF	PA, QL	lorcet	1	
butalbital-apap-caffeine oral capsule 50-300-40 mg	3	QL	lorcet hd	1	
butalbital-apap-caffeine oral capsule 50-325-40 mg	1	QL	lorcet plus	1	
butalbital-apap-caffeine oral tablet	1	QL	LORTAB	4	
CONZIP	NF	QL	MORPHABOND ER	NF	PA, ST, QL
DILAUDID ORAL	4		morphine sulfate (concentrate) oral solution 100 mg/5ml, 20 mg/ml	1	
DURAGESIC-100	NF	PA, ST, QL	morphine sulfate er oral capsule extended release 24 hour	NF	PA, ST, QL
DURAGESIC-12	NF	PA, ST, QL	morphine sulfate er oral tablet extended release	1	PA, QL
DURAGESIC-25	NF	PA, ST, QL	morphine sulfate oral	1	
DURAGESIC-50	NF	PA, ST, QL	MS CONTIN	3	PA, ST, QL
DURAGESIC-75	NF	PA, ST, QL	NALOCET	NF	QL
DVORAH	NF	QL	NORCO	4	
endocet	1		NUCYNTA	4	QL
ESGIC	4	QL	NUCYNTA ER	3	PA, QL
fentanyl transdermal patch 72 hour 100 mcg/hr, 12 mcg/hr, 25 mcg/hr, 50 mcg/hr, 75 mcg/hr	2	PA, QL	OXAYDO	NF	QL
fentanyl transdermal patch 72 hour 37.5 mcg/hr, 62.5 mcg/hr, 87.5 mcg/hr	NF	PA, ST, QL	OXYCODONE HCL ER	NF	PA, ST, QL
FIORICET	4	QL	oxycodone hcl oral capsule	1	
hydrocodone-acetaminophen oral solution 10-325 mg/15ml	1		oxycodone hcl oral concentrate 100 mg/5ml	1	
hydrocodone-acetaminophen oral solution 7.5-325 mg/15ml	2		oxycodone hcl oral solution	1	
hydrocodone-acetaminophen oral tablet 10-300 mg, 5-300 mg, 7.5-300 mg	NF		oxycodone hcl oral tablet	1	
hydrocodone-acetaminophen oral tablet 10-325 mg, 5-325 mg, 7.5-325 mg	1		oxycodone-acetaminophen	1	
hydromorphone hcl er	NF	PA, ST, QL	OXYCONTIN	NF	PA, ST, QL
			PERCOCET	NF	
			phrenilin forte	3	QL
			premium lidocaine	2	QL

See page 8 for coverage details. Drugs listed as ST are subject to Prior Authorization in CT, NJ and NY.

Drug Name	Drug Tier	Requirements & Limits
PRIMLEV	NF	
ROXICODONE ORAL TABLET 15 MG, 30 MG	4	
ROXICODONE ORAL TABLET 5 MG	3	
ROXYBOND	NF	QL
SUBSYS	NF	PA, QL
tramadol hcl er (biphasic)	NF	QL
TRAMADOL HCL ER ORAL CAPSULE EXTENDED RELEASE 24 HOUR 100 MG, 200 MG, 300 MG	NF	QL
tramadol hcl er oral capsule extended release 24 hour 150 mg	1	QL
tramadol hcl er oral tablet extended release 24 hour	2	QL
tramadol hcl ir	1	QL
trezix	NF	QL
TYLENOL WITH CODEINE #3	4	
TYLENOL WITH CODEINE #4	4	
ULTRAM	4	QL
VANATOL LQ	2	PA, QL
VANATOL S	2	PA, QL
vicodin	NF	
vicodin es	NF	
vicodin hp	NF	
XTAMPZA ER	2	PA, QL
zebutal	1	QL
ZOHYDRO ER	4	PA, ST, QL
ZTLIDO	NF	PA, QL
<b>Analgesics - Drugs for Pain and Inflammation</b>		
CELEBREX	NF	QL
celecoxib oral	2	QL
diclofenac potassium	1	
diclofenac sodium er	1	
diclofenac sodium oral	1	
diclofenac sodium transdermal gel 1 %	NF	
diclofenac sodium transdermal solution	NF	

Drug Name	Drug Tier	Requirements & Limits
EC-NAPROSYN	3	
ec-naproxen	1	
etodolac	1	
etodolac er	1	
hydromorphone hcl rectal	1	
ibu	1	
ibuprofen oral suspension	NF	
ibuprofen oral tablet 400 mg, 600 mg, 800 mg	1	
INDOCIN ORAL	NF	
INDOCIN RECTAL	3	
indomethacin er	1	
indomethacin oral	1	
ketorolac tromethamine oral	1	
LODINE	NF	
meloxicam oral	1	
MOBIC	4	
morphine sulfate rectal	1	
nabumetone oral	1	
NAPRELAN	NF	
NAPROSYN ORAL SUSPENSION	4	PA
naproxen dr	1	
naproxen oral suspension	1	PA
naproxen oral tablet	1	
naproxen sodium er	NF	
naproxen sodium oral tablet 275 mg, 550 mg	1	
PENNSAID	NF	
QMIIZ ODT	NF	
SPRIX	3	
TIVORBEX	NF	
VIVLODEX	NF	QL
VOLTAREN GEL	2	
ZIPSOR	NF	

Drug Name	Drug Tier	Requirements & Limits
<b>Anti-Addiction / Substance Abuse Treatment Agents</b>		
BUNAVAIL	NF	PA, QL
buprenorphine hcl sublingual	1	QL
buprenorphine hcl-naloxone hcl	2	QL
CHANTIX	4	PA, H
CHANTIX CONTINUING MONTH PAK	4	PA, H
CHANTIX STARTING MONTH PAK	4	PA, H
EVZIO	NF	PA, QL
naloxone hcl injection	1	
naltrexone hcl oral	1	
NARCAN	2	QL
SUBOXONE	NF	QL
ZUBSOLV	2	QL
<b>Antibacterials - Drugs for Infections</b>		
ACTICLATE	NF	
amoxicillin	1	
amoxicillin-potassium clavulanate er	NF	
amoxicillin-potassium clavulanate oral	1	
AUGMENTIN	NF	
AUGMENTIN ES-600	NF	
avidoxy	1	
azithromycin oral	1	
BACTRIM	4	
BACTRIM DS	4	
cefadroxil	1	
cefdinir	1	
cefuroxime axetil	1	
CENTANY	4	QL
CENTANY AT	NF	
cephalexin	1	
CIPRO ORAL TABLET	4	
ciprofloxacin hcl oral	1	
clarithromycin er	2	

Drug Name	Drug Tier	Requirements & Limits
clarithromycin oral suspension reconstituted	2	
clarithromycin oral tablet	1	
CLEOCIN ORAL CAPSULE 150 MG, 300 MG	4	
CLEOCIN ORAL CAPSULE 75 MG	2	
clindamycin hcl oral	1	
CLINDESSE	2	
coremino	NF	PA
DIFICID	4	QL
DORYX	NF	
DORYX MPC	NF	
doxycycline hyclate oral capsule	2	
doxycycline hyclate oral tablet 100 mg	2	
doxycycline hyclate oral tablet 150 mg, 50 mg, 75 mg	NF	
doxycycline hyclate oral tablet 20 mg	1	
doxycycline hyclate oral tablet delayed release 100 mg, 150 mg, 200 mg, 50 mg, 75 mg	NF	
DOXYCYCLINE HYCLATE ORAL TABLET DELAYED RELEASE 80 MG	NF	
doxycycline monohydrate oral capsule 100 mg, 50 mg	1	
doxycycline monohydrate oral capsule 150 mg, 75 mg	NF	
doxycycline monohydrate oral suspension reconstituted	3	
doxycycline monohydrate oral tablet	1	
FLAGYL	4	
KEFLEX	4	
LEVAQUIN ORAL TABLET 500 MG, 750 MG	4	
levofloxacin oral	1	
MACROBID	4	
MACRODANTIN	4	
METROGEL-VAGINAL	NF	
metronidazole oral	1	

Drug Name	Drug Tier	Requirements & Limits
metronidazole vaginal	2	
MINOCIN ORAL CAPSULE 50 MG	NF	
minocycline hcl er	NF	PA
minocycline hcl oral capsule	1	
minocycline hcl oral tablet	NF	
MINOLIRA	NF	PA
mondoxyne nl oral capsule 100 mg, 50 mg	1	
mondoxyne nl oral capsule 75 mg	NF	
morgidox oral	2	
mupirocin calcium	3	QL
mupirocin external	1	QL
nitrofurantoin macrocrystal oral	1	
nitrofurantoin monohydrate macrocrystals	1	
NUVESSA	NF	
NUZYRA ORAL	4	
okebo	NF	
penicillin v potassium	1	
SOLODYN	NF	PA
soloxide	NF	
sulfamethoxazole-trimethoprim oral	1	
sulfatrim pediatric	1	
TARGADOX	NF	
vandazole	2	
VIBRAMYCIN ORAL CAPSULE	4	
VIBRAMYCIN ORAL SUSPENSION RECONSTITUTED	4	
XEPI	3	QL
XIMINO	NF	PA
ZITHROMAX ORAL PACKET	4	
ZITHROMAX ORAL SUSPENSION RECONSTITUTED	4	
ZITHROMAX ORAL TABLET 250 MG, 500 MG	4	

Drug Name	Drug Tier	Requirements & Limits
ZITHROMAX ORAL TABLET 600 MG	3	
ZITHROMAX TRI-PAK	4	
ZITHROMAX Z-PAK	4	
<b>Anticoagulants - Drugs to Treat or Prevent Blood Clots</b>		
BEVYXXA	3	QL
COUMADIN	3	
ELIQUIS	4	QL
ELIQUIS STARTER PACK	4	QL
enoxaparin sodium	2	QL
jantoven	1	
LOVENOX	NF	QL
PRADAXA	2	QL
SAVAYSA	4	QL
warfarin sodium oral	1	
XARELTO	2	QL
XARELTO STARTER PACK	2	
<b>Anticonvulsants - Drugs for Seizures</b>		
carbamazepine er oral capsule extended release 12 hour	2	
carbamazepine er oral tablet extended release 12 hour	3	
carbamazepine oral	1	
CARBATROL	4	
DEPAKOTE	4	PA
DEPAKOTE ER	4	PA, ST
DEPAKOTE SPRINKLES	4	PA, ST
divalproex sodium er	2	
divalproex sodium oral capsule delayed release sprinkle	2	
divalproex sodium oral tablet delayed release	1	
epitol	1	
gabapentin oral capsule	1	
gabapentin oral solution 250 mg/5ml	1	
gabapentin oral tablet	1	
KEPPRA ORAL	4	PA, ST

See page 8 for coverage details. Drugs listed as ST are subject to Prior Authorization in CT, NJ and NY.

Drug Name	Drug Tier	Requirements & Limits
KEPPRA XR	4	PA, ST
LAMICTAL	4	PA, ST
LAMICTAL ODT ORAL KIT	3	PA, ST
LAMICTAL ODT ORAL TABLET DISPERSIBLE	4	PA, ST
LAMICTAL STARTER	4	PA, ST
LAMICTAL XR ORAL KIT	NF	PA, ST
LAMICTAL XR ORAL TABLET EXTENDED RELEASE 24 HOUR	NF	PA
lamotrigine er	NF	PA
lamotrigine oral tablet	1	
lamotrigine oral tablet chewable	1	
lamotrigine oral tablet dispersible	3	PA, ST
lamotrigine starter kit-blue	1	
lamotrigine starter kit-green	1	
lamotrigine starter kit-orange	1	
levetiracetam er	2	
levetiracetam oral	1	
NEURONTIN	4	PA, ST
oxcarbazepine	1	
OXTELLAR XR	NF	PA, ST
QUDEXY XR	NF	PA, ST
roweepra	1	
roweepra xr	2	
subvenite	1	
subvenite starter kit-blue	1	
subvenite starter kit-green	1	
subvenite starter kit-orange	1	
TEGRETOL	3	
TEGRETOL-XR	4	
TOPAMAX	4	PA, ST
TOPAMAX SPRINKLE	4	PA, ST
topiramate er	NF	PA, ST
topiramate oral	1	
TRILEPTAL	4	PA, ST
TROKENDI XR	NF	PA, ST

Drug Name	Drug Tier	Requirements & Limits
VIMPAT ORAL SOLUTION	3	PA
VIMPAT ORAL TABLET	NF	PA
ZONEGRAN	4	PA, ST
zonisamide oral	1	
<b>Antidementia Agents - Drugs for Alzheimer's Disease and Dementia</b>		
ARICEPT ORAL TABLET 10 MG, 5 MG	3	
ARICEPT ORAL TABLET 23 MG	NF	
donepezil hcl oral tablet 10 mg, 5 mg	1	
donepezil hcl oral tablet 23 mg	NF	
donepezil hcl oral tablet dispersible	1	
<b>Antidepressants - Drugs for Depression</b>		
amitriptyline hcl oral	1	
bupropion hcl er (sr)	1	
bupropion hcl er (xl) oral tablet extended release 24 hour 150 mg, 300 mg	1	
BUPROPION HCL ER (XL) ORAL TABLET EXTENDED RELEASE 24 HOUR 450 MG	NF	QL
bupropion hcl oral	1	
CELEXA	NF	
citalopram hydrobromide	1	
CYMBALTA	NF	QL
desvenlafaxine succinate er	2	QL
doxepin hcl oral	1	
duloxetine hcl oral capsule delayed release particles 20 mg, 30 mg, 60 mg	2	QL
duloxetine hcl oral capsule delayed release particles 40 mg	NF	
EFFEXOR XR	NF	
escitalopram oxalate oral solution	3	
escitalopram oxalate oral tablet	1	
fluoxetine hcl oral capsule	1	
fluoxetine hcl oral capsule delayed release	3	QL
fluoxetine hcl oral solution	1	

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Drug Name	Drug Tier	Requirements & Limits
fluoxetine hcl oral tablet 10 mg	3	QL
fluoxetine hcl oral tablet 20 mg	3	
fluoxetine hcl oral tablet 60 mg	NF	
fluvoxamine maleate	1	
fluvoxamine maleate er	4	QL
FORFIVO XL	NF	QL
LEXAPRO	NF	
mirtazapine oral	1	
nortriptyline hcl oral	1	
PAMELOR	4	
paroxetine hcl	1	
paroxetine hcl er	3	QL
PAXIL CR	4	QL
PAXIL ORAL SUSPENSION	3	
PAXIL ORAL TABLET	4	
PRISTIQ	NF	QL
PROZAC	NF	
REMERON	4	
REMERON SOLTAB	4	
sertraline hcl oral	1	
trazodone hcl oral	1	
TRINTELLIX	NF	ST, QL
venlafaxine hcl	1	
venlafaxine hcl er oral capsule extended release 24 hour	1	
venlafaxine hcl er oral tablet extended release 24 hour	NF	QL
VIIBRYD	4	QL
VIIBRYD STARTER PACK	4	
WELLBUTRIN SR	NF	
WELLBUTRIN XL	NF	
ZOLOFT	NF	
<b>Antiemetics - Drugs for Nausea and Vomiting</b>		
AKYNZEO ORAL	4	QL
BONJESTA	NF	PA
DICLEGIS	NF	PA

Drug Name	Drug Tier	Requirements & Limits
doxylamine-pyridoxine	NF	PA
metoclopramide hcl oral solution 5 mg/5ml	1	
metoclopramide hcl oral tablet	1	
metoclopramide hcl oral tablet dispersible	NF	
ondansetron hcl oral	1	
ondansetron odt	1	
prochlorperazine maleate oral	1	
promethazine hcl oral syrup	1	
promethazine hcl oral tablet	1	
promethazine hcl rectal	1	
promethegan	1	
REGLAN	4	
scopolamine	3	
TRANSDERM SCOP (1.5 MG)	4	
TRANSDERM-SCOP (1.5 MG)	4	
VARUBI	2	QL
ZOFRAN	4	
ZUPLENZ	NF	QL
<b>Antifungals - Drugs for Fungal Infections</b>		
ciclodan	1	
CICLODAN SOLUTION	NF	
ciclopirox external gel	1	
ciclopirox external shampoo	2	
ciclopirox external solution	1	
ciclopirox treatment	NF	
CRESEMBA ORAL	3	
DIFLUCAN ORAL SUSPENSION RECONSTITUTED	4	
DIFLUCAN ORAL TABLET 100 MG, 150 MG, 200 MG	4	
DIFLUCAN ORAL TABLET 50 MG	3	
EXTINA	4	QL
fluconazole oral	1	
GYNAZOLE-1	3	
ketoconazole external cream	1	QL

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Drug Name	Drug Tier	Requirements & Limits
ketoconazole external foam	3	QL
ketoconazole external shampoo	1	
LOPROX EXTERNAL SHAMPOO	NF	
NIZORAL	4	
nyamyc	1	
nystatin external	1	
nystatin mouth/throat	1	
nystop	1	
PENLAC	NF	
terbinafine hcl oral	1	QL
terconazole	1	
XOLEGEL	NF	

#### Antigout Agents - Drugs for Gout

allopurinol oral	1	
COLCHICINE ORAL	NF	
COLCRYS	NF	
febuxostat	NF	ST, QL
MITIGARE	2	
ULORIC	NF	ST, QL
ZYLOPRIM	4	

#### Antimigraine Agents - Drugs for Migraines

AIMOVIG	2	PA, ST, QL
AIMOVIG SUBCUTANEOUS SOLUTION AUTO-INJECTOR 140 MG/ML	2	PA, ST, QL
AMERGE	4	QL
eletriptan hydrobromide	NF	QL
EMGALITY	2	PA, ST, QL
EMGALITY 300 DOSE	NF	PA, ST
IMITREX ORAL	NF	QL
IMITREX STATDOSE REFILL	NF	QL
IMITREX STATDOSE SYSTEM	NF	QL
IMITREX SUBCUTANEOUS	NF	QL
MAXALT	NF	QL
MAXALT-MLT	NF	QL

Drug Name	Drug Tier	Requirements & Limits
naratriptan hcl	1	QL
ONZETRA XSAIL	NF	QL
RELPAK	NF	QL
rizatriptan benzoate	1	QL
sumatriptan succinate oral	1	QL
sumatriptan succinate refill	1	QL
sumatriptan succinate subcutaneous	1	QL
ZEMBRACE SYMTOUCH	NF	QL

#### Antineoplastics - Drugs for Cancer

abiraterone acetate	NF	PA, SP, QL
anastrozole oral	1	
ARIMIDEX	NF	
bexarotene	NF	SP
BOSULIF	3	PA, ST, SP, QL
capecitabine	NF	SP, QL
ERLEADA	3	PA, SP, QL
FEMARA	NF	
GLEEVEC	NF	PA, SP, QL
IBRANCE	3	PA, SP, QL
IDHIFA	3	PA, SP, QL
imatinib mesylate	1	PA, SP, QL
letrozole oral	1	
mercaptopurine oral	1	
PURIXAN	4	PA
REVLIMID	3	PA, SP, QL
SOLTAMOX	NF	
tamoxifen citrate oral tablet 10 mg	1	
tamoxifen citrate oral tablet 20 mg	1	H-PA
TARGRETIN EXTERNAL	4	SP, QL
TARGRETIN ORAL	3	SP
TASIGNA	3	PA, ST, SP, QL
VERZENIO	3	PA, SP, QL
XELODA	1	SP, QL



Drug Name	Drug Tier	Requirements & Limits
YONSA	NF	PA, ST, SP, QL
ZYTIGA ORAL TABLET 250 MG	3	PA, SP, QL
ZYTIGA ORAL TABLET 500 MG	2	PA, SP, QL

#### Antiparasitics - Drugs for Parasitic infections

ARAKODA	4	QL
atovaquone-proguanil hcl	2	
ELIMITE	4	
hydroxychloroquine sulfate oral	1	
KRINTAFEL	1	QL
MALARONE	4	
permethrin external	1	
PLAQUENIL	NF	

#### Antiparkinson Agents - Drugs for Parkinson's Disease

carbidopa-levodopa	1	
carbidopa-levodopa er	1	
DUOPA	4	PA
INBRIJA	3	PA, SP, QL
MIRAPEX	4	
MIRAPEX ER	NF	
pramipexole dihydrochloride	1	
pramipexole dihydrochloride er	NF	
REQUIP XL	NF	
ropinirole hcl	1	
ropinirole hcl er	NF	
RYTARY	NF	
selegiline hcl oral	1	
SINEMET	4	
SINEMET CR	4	
ZELAPAR	NF	

Drug Name	Drug Tier	Requirements & Limits
<b>Antiplatelets - Drugs for Heart Attack and Stroke Prevention</b>		
BRILINTA	4	QL
clopidogrel bisulfate oral	1	
PLAVIX	NF	
ZONTIVITY	4	QL

#### Antipsychotics - Drugs for Mood Disorders

ABILIFY	NF	QL
ABILIFY MYCITE	NF	PA, QL
aripiprazole oral solution	4	
aripiprazole oral tablet	NF	QL
aripiprazole oral tablet dispersible	NF	QL
GEODON ORAL	NF	QL
LATUDA	NF	ST, QL
olanzapine oral tablet	1	QL
olanzapine oral tablet dispersible	4	QL
quetiapine fumarate	1	
quetiapine fumarate er	NF	ST, QL
RISPERDAL	NF	
risperidone	1	
SAPHRIS	NF	QL
SEROQUEL	NF	
SEROQUEL XR	NF	ST, QL
ziprasidone hcl	2	QL
ZYPREXA ORAL	NF	QL
ZYPREXA ZYDIS	NF	QL

#### Antivirals - Drugs for Viral Infections

acyclovir oral	1	
ATRIPLA	NF	ST, SP, QL
BARACLUDE ORAL SOLUTION	3	SP
BARACLUDE ORAL TABLET	NF	SP
CIMDUO	3	SP, QL
DESCOVY	4	SP, QL
DOVATO	3	SP, QL

Drug Name	Drug Tier	Requirements & Limits
entecavir	3	SP
EPCLUSA	2	PA, SP, QL
GENVOYA	4	SP, QL
HARVONI	2	PA, SP, QL
ISENTRESS	3	SP
ISENTRESS HD	3	SP
JULUCA	2	SP, QL
LEDIPASVIR-SOFOSBUVIR	2	PA, SP, QL
MAVYRET	3	PA, SP, QL
NORVIR ORAL PACKET	3	SP
NORVIR ORAL SOLUTION	3	SP
NORVIR ORAL TABLET	NF	SP
ODEFSEY	4	SP, SL
oseltamivir phosphate oral capsule 30 mg, 45 mg	2	QL
oseltamivir phosphate oral capsule 75 mg	2	
oseltamivir phosphate oral suspension reconstituted	2	QL
PREZCOBIX	3	SP
PREZISTA	3	SP
ritonavir	3	SP
SITAVIG	NF	QL
SOFOSBUVIR-VELPATASVIR	2	PA, SP, QL
STRIBILD	4	SP, QL
SYMFI	3	SP, QL
SYMFI LO	3	SP, QL
TAMIFLU ORAL CAPSULE 30 MG, 45 MG	NF	QL
TAMIFLU ORAL CAPSULE 75 MG	NF	QL
TAMIFLU ORAL SUSPENSION RECONSTITUTED	NF	QL
tenofovir disoproxil fumarate	3	SP
TIVICAY	4	SP
TRIUMEQ	3	SP, QL
TRUVADA	4	SP, QL
valacyclovir hcl oral	1	QL

Drug Name	Drug Tier	Requirements & Limits
VALTREX	NF	QL
VEMLIDY	4	ST, SP
VIREAD ORAL POWDER	4	SP
VIREAD ORAL TABLET 150 MG, 200 MG, 250 MG	2	SP
VIREAD ORAL TABLET 300 MG	NF	SP
VOSEVI	3	PA, SP, QL
ZEPATIER	3	PA, ST, SP, QL
ZOVIRAX ORAL	4	

#### Anxiolytics - Drugs for Anxiety

alprazolam er	1	
alprazolam intensol	1	
alprazolam oral	1	
alprazolam xr	1	
ATIVAN ORAL	NF	
bupirone hcl oral	1	
clonazepam oral	1	
diazepam intensol	1	
diazepam oral	1	
HALCION	4	
hydroxyzine hcl oral	1	
hydroxyzine pamoate oral	1	
KLONOPIN	NF	
lorazepam intensol	1	
lorazepam oral	1	
triazolam	1	
VALIUM	NF	
VISTARIL	4	
XANAX	NF	
XANAX XR	NF	

#### Bipolar Agents - Drugs for Mood Disorders

lithium carbonate er	1	
lithium carbonate oral	1	
LITHOBID	4	

Drug Name	Drug Tier	Requirements & Limits
<b>Cardiovascular Agents - Drugs for Heart and Circulation Conditions</b>		
ACCUPRIL	4	
acetazolamide er	1	
acetazolamide oral	1	
ADALAT CC	4	
ALDACTONE	4	
aliskiren fumarate	NF	QL
ALTACE	4	
ALTOPREV	NF	
amiodarone hcl oral	1	
amlodipine besylate oral	1	
amlodipine besylate-benazepril hcl	1	
amlodipine besylate-valsartan	2	
atenolol oral	1	
atenolol-chlorthalidone	1	
atorvastatin calcium oral tablet 10 mg, 20 mg	1	H-PA, QL
atorvastatin calcium oral tablet 40 mg, 80 mg	1	QL
AVALIDE	4	
AVAPRO	4	
benazepril hcl oral	1	
benazepril-hydrochlorothiazide	1	
BENICAR	NF	
BENICAR HCT	NF	
BETAPACE	NF	
BIDIL	2	
bisoprolol fumarate	1	
bisoprolol-hydrochlorothiazide	1	
BYSTOLIC	3	
CALAN	4	
CALAN SR	4	
CARDIZEM	NF	
CARDIZEM CD	NF	
CARDIZEM LA	NF	

Drug Name	Drug Tier	Requirements & Limits
CARDURA	4	
CAROSPIR	4	PA
cartia xt	2	
carvedilol	1	
CATAPRES	4	
chlorthalidone	1	
clonidine hcl oral	1	
colesevelam hcl	NF	
COREG	4	
CORGARD	4	
CORLANOR	3	PA, QL
COZAAR	4	
CRESTOR	NF	QL
diltiazem hcl er coated beads	2	
diltiazem hcl er oral capsule extended release 12 hour	1	
diltiazem hcl er oral capsule extended release 24 hour 180 mg, 240 mg	1	
diltiazem hcl oral	1	
dilt-xr	1	
DIOVAN	NF	
DIOVAN HCT	NF	
doxazosin mesylate oral	1	
DYAZIDE	4	
EDARBI	3	
EDARBYCLOR	3	
enalapril maleate oral	1	
EPANED	4	PA
EXFORGE	NF	
EZALLOR SPRINKLE	NF	
ezetimibe	2	
ezetimibe-simvastatin	NF	
fenofibrate oral capsule 150 mg, 50 mg	NF	
fenofibrate oral tablet 120 mg, 145 mg, 40 mg, 48 mg	NF	

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Drug Name	Drug Tier	Requirements & Limits
fenofibrate oral tablet 160 mg, 54 mg	2	
FENOGLIDE	NF	
flecainide acetate	1	
FLOLIPID	4	PA
furosemide oral	1	
gemfibrozil oral	1	
GONITRO	NF	QL
guanfacine hcl	1	
HEMANGEOL	NF	
hydralazine hcl oral	1	
hydrochlorothiazide oral	1	
HYZAAR	4	
INDERAL LA	NF	
irbesartan	1	
irbesartan-hydrochlorothiazide	1	
isosorbide mononitrate	1	
isosorbide mononitrate er	1	
KAPSPARGO SPRINKLE	4	
labetalol hcl oral	1	
LASIX	4	
LIPITOR	NF	QL
LIPOFEN	NF	
lisinopril oral	1	
lisinopril-hydrochlorothiazide	1	
LOPID	4	
LOPRESSOR	4	
losartan potassium	1	
losartan potassium-hctz	1	
LOTENSIN	4	
LOTENSIN HCT	4	
LOTREL	4	
lovastatin	1	H
LOVAZA	NF	PA
matzim la	2	

Drug Name	Drug Tier	Requirements & Limits
MAXZIDE	4	
MAXZIDE-25	4	
metoprolol succinate er oral tablet extended release 24 hour 100 mg, 200 mg, 50 mg	2	
metoprolol succinate er oral tablet extended release 24 hour 25 mg	1	
metoprolol tartrate oral tablet 100 mg, 25 mg, 50 mg	1	
metoprolol tartrate oral tablet 37.5 mg, 75 mg	NF	
MICARDIS	NF	
MINIPRESS	4	
minitran	1	
MULTAQ	NF	PA
nadolol oral	1	
niacin (antihyperlipidemic)	2	
niacin er (antihyperlipidemic)	NF	
niacor	2	
NIASPAN	2	
nifedipine er	1	
nifedipine er osmotic release	1	
nifedipine oral	1	
NITRO-BID	2	
NITRO-DUR	3	
nitroglycerin er	1	
nitroglycerin sublingual	1	
nitroglycerin transdermal	1	
nitroglycerin translingual	NF	QL
NITROLINGUAL	NF	QL
NITROMIST	4	QL
NITROSTAT	4	
nitro-time	1	
NORVASC	NF	
olmesartan medoxomil oral	NF	
olmesartan medoxomil-hctz	NF	
omega-3-acid ethyl esters	NF	PA

Drug Name	Drug Tier	Requirements & Limits
PACERONE ORAL TABLET 100 MG, 400 MG	3	
pacerone oral tablet 200 mg	1	
PRALUENT	3	PA, ST, SP, QL
PRAVACHOL	4	
pravastatin sodium	1	
prazosin hcl oral	1	
PRINIVIL	4	
PROCARDIA	4	
PROCARDIA XL	4	
propranolol hcl er	2	
propranolol hcl oral	1	
QBRELIS	4	PA
quinapril hcl	1	
ramipril	1	
RANEXA	NF	
ranolazine er	2	
REPATHA	3	PA, ST, SP, QL
REPATHA PUSHTRONEX SYSTEM	3	PA, ST, SP, QL
REPATHA SURECLICK	3	PA, ST, SP, QL
rosuvastatin calcium	3	QL
simvastatin oral tablet 10 mg, 20 mg, 40 mg, 5 mg	1	H-PA
simvastatin oral tablet 80 mg	1	
sotalol hcl oral	1	
SOTYLIZE	4	PA
spironolactone oral	1	
TEKTURNA	NF	QL
TEKTURNA HCT	NF	QL
telmisartan	2	
TENORETIC 100	NF	
TENORETIC 50	NF	
TENORMIN	NF	
TOPROL XL	4	
torseamide	1	

Drug Name	Drug Tier	Requirements & Limits
triamterene-hctz	1	
TRICOR	NF	
valsartan	2	
valsartan-hydrochlorothiazide	1	
VASCEPA ORAL CAPSULE 0.5 GM	4	PA
VASCEPA ORAL CAPSULE 1 GM	3	PA
VASOTEC	NF	
verapamil hcl er oral capsule extended release 24 hour 100 mg, 200 mg, 300 mg	3	
verapamil hcl er oral capsule extended release 24 hour 120 mg, 180 mg, 240 mg, 360 mg	1	
verapamil hcl er oral tablet extended release	1	
verapamil hcl oral	1	
VERELAN	4	
VERELAN PM	4	
VYTORIN	NF	
WELCHOL	2	
ZESTORETIC	NF	
ZESTRIL	NF	
ZETIA	NF	
ZIAC ORAL TABLET 10-6.25 MG, 2.5-6.25 MG	3	
ZIAC ORAL TABLET 5-6.25 MG	4	
ZOCOR	4	
<b>Central Nervous System Agents - Drugs for Attention Deficit Disorder</b>		
ADDERALL	NF	PA
ADDERALL XR	2	QL
ADHANSIA XR	NF	PA, QL
amphetamine-dextroamphetamine	1	PA
amphetamine-dextroamphetamine er	NF	QL
APTENSIO XR	NF	PA, QL
atomoxetine hcl	4	QL
CONCERTA	2	PA, QL

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Drug Name	Drug Tier	Requirements & Limits
DEXEDRINE	NF	PA
dexmethylphenidate hcl	1	PA
dexmethylphenidate hcl er	3	PA, QL
dextroamphetamine sulfate er	3	PA
dextroamphetamine sulfate oral solution	1	PA
dextroamphetamine sulfate oral tablet	3	PA
FOCALIN	4	PA
FOCALIN XR	NF	PA, QL
guanfacine hcl er	2	QL
INTUNIV	NF	QL
JORNAY PM	NF	PA
metadate er	NF	PA, QL
METHYLIN	4	PA
methylphenidate hcl er	NF	PA, QL
methylphenidate hcl er (cd)	2	PA, QL
methylphenidate hcl er (la) oral capsule extended release 24 hour 10 mg, 20 mg, 30 mg, 40 mg	2	PA, QL
methylphenidate hcl er (la) oral capsule extended release 24 hour 60 mg	2	PA
methylphenidate hcl oral solution	1	PA
methylphenidate hcl oral tablet	1	PA
methylphenidate hcl oral tablet chewable	3	PA
MYDAYIS	NF	PA, QL
PROCENTRA	3	PA
QUILLICHEW ER	NF	PA, QL
QUILLIVANT XR	NF	PA, QL
relexxii	NF	PA, QL
RITALIN	4	PA
RITALIN LA	NF	PA, QL
STRATTERA	NF	QL
VYVANSE	NF	PA, QL
ZENZEDI	NF	PA

Drug Name	Drug Tier	Requirements & Limits
<b>Central Nervous System Agents - Drugs for Multiple Sclerosis</b>		
AMPYRA	NF	PA, SP, QL
AUBAGIO	4	PA, SP, QL
AVONEX PEN	3	PA, SP, QL
AVONEX PREFILLED	3	PA, SP, QL
BETASERON	3	PA, SP, QL
COPAXONE	NF	PA, SP, QL
dalfampridine er	3	PA, SP, QL
EXTAVIA	NF	PA, ST, SP, QL
GILENYA ORAL CAPSULE 0.25 MG	4	PA, SP, QL
GILENYA ORAL CAPSULE 0.5 MG	4	PA, SP, QL
glatiramer acetate	3	PA, SP, QL
glatopa	NF	PA, SP, QL
PLEGRIDY	4	PA, SP, QL
PLEGRIDY STARTER PACK	4	PA, SP, QL
REBIF	NF	PA, SP, QL
REBIF REBIDOSE	NF	PA, SP, QL
REBIF REBIDOSE TITRATION PACK	NF	PA, SP, QL
REBIF TITRATION PACK	NF	PA, SP, QL
TECFIDERA	3	PA, SP, QL
<b>Central Nervous System Agents - Miscellaneous</b>		
AUSTEDO	3	PA, SP, QL
LYRICA	NF	ST, QL
LYRICA CR	NF	ST, QL
NUDEXTA	2	PA
RILUTEK	4	SP
riluzole	1	SP
TIGLUTIK	4	PA

Drug Name	Drug Tier	Requirements & Limits
<b>Dental and Oral Agents - Drugs for Mouth and Throat Conditions</b>		
cavarest	1	
chlorhexidine gluconate mouth/throat	1	
clinpro 5000	1	
denta 5000 plus	1	
dentagel	1	
fluoridex	1	
fluoridex enhanced whitening	1	
lidocaine hcl mouth/throat	1	
lidocaine viscous mouth/throat solution 2 %	1	
NAFRINSE DAILY/NEUTRAL	2	
NAFRINSE WEEKLY	4	
neutral sodium fluoride	1	
paroex	1	
PERIDEX	4	
perio gard	1	
PREVIDENT 5000 BOOSTER PLUS	3	
PREVIDENT 5000 DRY MOUTH	4	
PREVIDENT 5000 ORTHO DEFENSE	3	
PREVIDENT 5000 PLUS	4	
PREVIDENT DENTAL	4	
PREVIDENT MOUTH/THROAT	3	
sf	1	
sf 5000 plus	1	
sodium fluoride 5000 plus	1	
sodium fluoride dental	1	

<b>Dermatological Agents - Drugs for Skin Conditions</b>		
ABSORICA	NF	PA
ACZONE	NF	QL
ALA SCALP	4	
ala-cort external cream 1 %	NF	
ala-cort external cream 2.5 %	1	

Drug Name	Drug Tier	Requirements & Limits
ALDARA	4	QL
ALTRENO	NF	PA, QL
amnesteam	2	
ATRALIN	NF	PA, QL
AVAR	NF	
avar cleanser	1	
AVAR LS CLEANSER	NF	
AVAR LS EXTERNAL PAD	NF	
AVAR-E EMOLLIENT	3	
AVAR-E GREEN	3	
AVAR-E LS	3	
avita	NF	PA, QL
azelaic acid external	3	
betamethasone dipropionate aug external cream	1	
betamethasone dipropionate aug external gel	1	
betamethasone dipropionate aug external lotion	3	
betamethasone dipropionate aug external ointment	3	
betamethasone dipropionate external cream	2	
betamethasone dipropionate external lotion	1	
betamethasone dipropionate external ointment	2	
bp 10-1	1	
calcipotriene-betameth diprop	3	QL
calcitriol external	1	QL
CAPEX	2	
CARAC	2	
claravis	2	
CLEOCIN-T EXTERNAL GEL	4	QL
CLEOCIN-T EXTERNAL LOTION	4	
CLEOCIN-T EXTERNAL SWAB	4	
clindacin etz external swab	1	
clindacin-p	1	
CLINDAGEL	NF	QL

Drug Name	Drug Tier	Requirements & Limits	Drug Name	Drug Tier	Requirements & Limits
clindamycin phos-benzoyl perox external gel 1.2-5 %	3	QL	DUAC	NF	QL
clindamycin phosphate external foam	3		DUPIXENT SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 300 MG/2ML	4	PA, ST, SP, QL
clindamycin phosphate external lotion	3		EFUDEX	4	
clindamycin phosphate external solution	1	QL	ELIDEL	4	ST, QL
clindamycin phosphate external swab	1		ELOCON	4	
CLINDAMYCIN PHOSPHATE GEL 1 % EXTERNAL	NF		ENSTILAR	NF	QL
clindamycin phosphate gel 1 % external	3	QL	EUCRISA	3	ST, QL
clobetasol propionate external cream	2	QL	EVOCLIN	4	
clobetasol propionate external foam	NF	QL	FINACEA	4	
clobetasol propionate external gel	2	QL	fluocinolone acetonide body	3	QL
clobetasol propionate external liquid	1	QL	fluocinolone acetonide external cream	3	QL
clobetasol propionate external lotion	NF	QL	fluocinolone acetonide external ointment	2	QL
clobetasol propionate external ointment	2	QL	fluocinolone acetonide external solution	3	QL
clobetasol propionate external shampoo	NF	QL	fluocinolone acetonide scalp	3	
clobetasol propionate external solution	1	QL	fluocinonide external cream 0.05 %	1	
CLOBEX	NF	QL	fluocinonide external cream 0.1 %	NF	QL
CLOBEX SPRAY	3	QL	fluocinonide external gel	1	
clodan external shampoo	NF	QL	fluocinonide external ointment	1	
clotrimazole-betamethasone external cream	1	QL	fluocinonide external solution	1	
clotrimazole-betamethasone external lotion	1		FLUOROPLEX	4	
dapsone external	NF	QL	FLUOROURACIL EXTERNAL CREAM 0.5 %	4	
DERMA-SMOOTH/FS BODY	4	QL	fluorouracil external cream 5 %	1	
DERMA-SMOOTH/FS SCALP	4		fluorouracil external solution	1	
DESONATE	NF	ST, QL	hydrocortisone external cream 1 %	NF	
desonide external	3	QL	hydrocortisone external cream 2.5 %	1	
DESOWEN	3	QL	hydrocortisone external lotion 2.5 %	1	
DIPROLENE	4		hydrocortisone external ointment 1 %, 2.5 %	1	
DIPROLENE AF	4		imiquimod external	1	QL
doxycycline	NF		IMIQUIMOD PUMP	4	QL
			IMPOYZ	NF	QL

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Drug Name	Drug Tier	Requirements & Limits
isotretinoin oral	2	
KENALOG EXTERNAL	NF	QL
LOTRISONE	4	QL
methoxsalen oral	1	
methoxsalen rapid	1	
METROCREAM	4	
METROGEL	NF	
METROLOTION	4	
metronidazole external cream	1	
metronidazole external gel 0.75 %	1	
metronidazole external gel 1 %	NF	
metronidazole external lotion	1	
MIRVASO	4	QL
mometasone furoate external	1	
myorisan	2	
neucac external gel	3	QL
NORITATE	NF	
OLUX	NF	QL
OXSORALEN ULTRA	2	
PICATO	NF	QL
pimecrolimus	3	ST, QL
PLEXION	NF	
PLEXION CLEANSER	NF	
PLEXION CLEANSING CLOTH	NF	
RETIN-A	NF	PA, QL
RHOFADE	4	PA, QL
rosadan external cream	1	
rosadan external gel	1	
SERNIVO	NF	QL
sss 10-5	1	
sulfacetamide sodium-sulfur external cream 10-2 %, 10-5 %	1	
sulfacetamide sodium-sulfur external cream 9.8-4.8 %	NF	
sulfacetamide sodium-sulfur external emulsion	1	

Drug Name	Drug Tier	Requirements & Limits
sulfacetamide sodium-sulfur external liquid 10-2 %, 9.8-4.8 %	NF	
sulfacetamide sodium-sulfur external liquid 9-4 %, 9-4.5 %	1	
sulfacetamide sodium-sulfur external lotion 10-5 %	1	
sulfacetamide sodium-sulfur external lotion 9.8-4.8 %	NF	
sulfacetamide sodium-sulfur external pad	1	
sulfacetamide sodium-sulfur external suspension 10-5 %	1	
sulfacetamide sodium-sulfur external suspension 8-4 %	NF	
sulfacleanse 8/4	NF	
sulfamez wash	1	
SUMADAN WASH	NF	
SUMAXIN	4	
SUMAXIN WASH	3	
SYNALAR	NF	QL
TACLONEX	NF	QL
tazarotene external	NF	PA, QL
TAZORAC	4	PA, QL
TEMOVATE	4	QL
TEXACORT	2	
TOLAK	NF	
TREMFYA SUBCUTANEOUS SOLUTION PEN-INJECTOR	3	PA, SP, QL
tretinoin cream 0.025 % external	4	PA, QL
tretinoin cream 0.025 % external	3	PA, QL
tretinoin external cream 0.05 %, 0.1 %	3	PA, QL
tretinoin external gel 0.01 %, 0.05 %	NF	PA, QL
tretinoin gel 0.025 % external	4	PA, QL
tretinoin gel 0.025 % external	NF	PA, QL
triamcinolone acetonide external aerosol solution	2	QL
triamcinolone acetonide external cream	1	
triamcinolone acetonide external lotion	1	

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Drug Name	Drug Tier	Requirements & Limits
triamcinolone acetonide external ointment	1	
TRIANEX	NF	
triderm	1	QL
tridesilon	3	QL
VANOS	NF	QL
VECTICAL	4	QL
VERDESO	NF	QL
zenatane	2	
ZYCLARA	4	QL
ZYCLARA PUMP EXTERNAL CREAM 2.5 %	NF	QL
ZYCLARA PUMP EXTERNAL CREAM 3.75 %	4	QL
Diabetes - Glucose Monitoring		
ACCU-CHEK AVIVA CONNECT KIT W/DEVICE	NF	
ACCU-CHEK AVIVA DEVICE	NF	
ACCU-CHEK AVIVA PLUS	NF	
ACCU-CHEK AVIVA PLUS TEST STRIPS	NF	QL
ACCU-CHEK COMPACT PLUS CARE KIT	NF	
ACCU-CHEK COMPACT PLUS TEST STRIPS	NF	QL
ACCU-CHEK GUIDE	NF	
ACCU-CHEK GUIDE TEST STRIPS	NF	QL
ACCU-CHEK NANO SMARTVIEW KIT W/DEVICE	NF	
ACCU-CHEK SMARTVIEW TEST STRIPS	NF	QL
AUTOSHIELD	2	
BD PEN NEEDLE	2	
BD U-500	2	
BD ULTRA-FIN	2	
BD VEO SYR	2	
CONTOUR NEXT MONITOR	2	
CONTOUR NEXT TEST	2	QL
CONTOUR TEST	NF	QL
DEXCOM G6 RECEIVER	3	PA, QL

Drug Name	Drug Tier	Requirements & Limits
DEXCOM G6 SENSOR	3	PA, QL
DEXCOM G6 TRANSMITTER	3	PA, QL
EASYPLUS BLOOD GLUCOSE TEST	3	QL
ENLITE GLUCOSE SENSOR	3	PA
FREESTYLE LIBRE 14 DAY READER	3	PA, QL
FREESTYLE LIBRE 14 DAY SENSOR	3	PA, QL
FREESTYLE LIBRE READER	3	PA, QL
FREESTYLE LIBRE SENSOR SYSTEM	3	PA, QL
FREESTYLE PRECISION NEO TEST	NF	QL
GUARDIAN CONNECT TRANSMITTER	3	PA
GUARDIAN LINK 3 TRANSMITTER	3	PA
GUARDIAN SENSOR (3)	3	PA
ONE TOUCH VERIO KIT W/DEVICE	1	
ONETOUCH ULTRA 2	1	
ONETOUCH ULTRA BLUE TEST STRIPS	1	QL
ONETOUCH ULTRA MINI	1	
ONETOUCH VERIO FLEX SYSTEM KIT W/DEVICE	1	
ONETOUCH VERIO IQ SYSTEM	1	
ONETOUCH VERIO SYNC SYSTEM KIT W/DEVICE	1	
ONETOUCH VERIO TEST STRIPS	1	QL
PRECISION LINK	NF	
PRECISION PCX PLUS TEST	NF	QL
PRECISION QID MONITOR	NF	
PRECISION QID TEST	NF	QL
PRECISION SOF-TACT MONITOR	NF	
PRECISION SOF-TACT TEST	NF	QL
PRECISION XTRA BLOOD GLUCOSE	NF	QL
PRECISION XTRA DEVICE	NF	
PRECISION XTRA KIT	NF	
PRECISION XTRA MONITOR	NF	

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Drug Name	Drug Tier	Requirements & Limits
RELION BLOOD GLUCOSE TEST	NF	QL
RELION ULTIMA TEST	3	QL
SOF-SENSOR	3	PA
TRUE METRIX BLOOD GLUCOSE TEST	3	QL
TRUEPLUS 5-BEVEL PEN NEEDLES	2	
TRUETRACK TEST	3	QL
<b>Diabetes - Insulin</b>		
ADMELOG	NF	QL
ADMELOG SOLOSTAR	NF	QL
AFREZZA INHALATION POWDER 12 UNIT, 4 UNIT	NF	PA, QL
AFREZZA INHALATION POWDER 4 & 8 & 12 UNIT, 8 UNIT, 90 X 4 UNIT & 90X8 UNIT, 90 X 8 UNIT & 90X12 UNIT	NF	PA
BASAGLAR KWIKPEN	2	QL
HUMALOG KWIKPEN	2	QL
HUMALOG MIX 50/50 KWIKPEN	2	QL
HUMALOG MIX 50/50 VIAL	2	QL
HUMALOG MIX 75/25 KWIKPEN	2	QL
HUMALOG MIX 75/25 VIAL	2	QL
HUMALOG U-100 JUNIOR KWIKPEN	2	QL
HUMALOG U-100 VIAL AND CARTRIDGE	2	QL
HUMULIN 70/30 KWIKPEN	2	QL
HUMULIN 70/30 VIAL	2	QL
HUMULIN N KWIKPEN	2	QL
HUMULIN N VIAL	2	QL
HUMULIN R U-500 KWIKPEN	2	QL
HUMULIN R U-500 VIAL (CONCENTRATED)	2	QL
HUMULIN R VIAL	2	QL
INSULIN LISPRO	NF	QL
LANTUS SOLOSTAR	NF	QL
LANTUS U-100 VIAL	NF	QL
LEVEMIR U-100 FLEXTOUCH	NF	QL

Drug Name	Drug Tier	Requirements & Limits
LEVEMIR U-100 VIAL	NF	QL
NOVOLIN 70/30 RELION	NF	ST, QL
NOVOLIN 70/30 VIAL	NF	ST, QL
NOVOLIN N RELION	NF	ST, QL
NOVOLIN N VIAL	NF	ST, QL
NOVOLIN R RELION	NF	ST, QL
NOVOLIN R VIAL	NF	ST, QL
NOVOLOG FLEXPEN	NF	ST, QL
NOVOLOG PENFILL	NF	ST, QL
NOVOLOG U-100 VIAL	NF	ST, QL
TOUJEO MAX SOLOSTAR	NF	QL
TOUJEO SOLOSTAR	NF	QL
TRESIBA	3	QL
TRESIBA FLEXTOUCH	3	QL
<b>Diabetes - Non-Insulin Agents</b>		
ACTOS	NF	QL
ADLYXIN	NF	QL
ADLYXIN STARTER PACK	NF	QL
ALOGLIPTIN BENZOATE	NF	QL
ALOGLIPTIN-METFORMIN HCL	NF	QL
ALOGLIPTIN-PIOGLITAZONE	NF	QL
AMARYL	4	
BYDUREON	2	QL
BYDUREON BCISE AUTOINJECTOR	2	QL
BYETTA 10 MCG PEN	2	QL
BYETTA 5 MCG PEN	2	QL
FARXIGA	NF	ST, QL
FORTAMET	NF	PA
glimepiride	1	
glipizide er	1	
glipizide ir	1	
glipizide xl	1	
GLUCAGON EMERGENCY	2	QL

Drug Name	Drug Tier	Requirements & Limits
GLUCOPHAGE	4	
GLUCOPHAGE XR	4	PA
GLUCOTROL	4	
GLUCOTROL XL	4	
GLUCOVANCE ORAL TABLET 5-500 MG	4	
GLUMETZA	NF	PA
glyburide oral	1	
glyburide-metformin	1	
GLYXAMBI	2	ST, QL
INVOKAMET	2	QL
INVOKAMET XR	2	QL
INVOKANA	2	ST, QL
JANUVIA	NF	ST, QL
JARDIANCE	2	ST, QL
JENTADUETO	2	QL
JENTADUETO XR	2	QL
KAZANO	2	QL
KOMBIGLYZE XR	2	QL
metformin hcl er	1	
metformin hcl er (mod)	NF	PA
metformin hcl er (osm)	NF	PA
METFORMIN HCL ORAL SOLUTION	3	
metformin hcl oral tablet	1	
NESINA	2	QL
ONGLYZA	2	QL
OSENI	2	QL
OZEMPIC	3	QL
pioglitazone hcl	1	QL
RIOMET	3	
SOLIQUA	2	QL
SYNJARDY	2	QL
SYNJARDY XR	2	QL
TRADJENTA	2	QL

Drug Name	Drug Tier	Requirements & Limits
TRULICITY	3	QL
VICTOZA SOLUTION PEN-INJECTOR 18 MG/3ML SUBCUTANEOUS - 2 Pak	2	QL
VICTOZA SOLUTION PEN-INJECTOR 18 MG/3ML SUBCUTANEOUS - 3 Pak	3	QL
Drugs for Blood Disorders		
AFSTYLA	4	PA, SP
ARANESP (ALBUMIN FREE)	3	SP, QL
ELOCTATE	NF	PA, SP
HELIXATE FS	NF	SP
JIVI	4	PA, SP
KOGENATE FS	3	SP
KOVALTRY	3	SP
MULPLETA	3	PA, SP, QL
NEULASTA	4	SP
NOVOEIGHT	3	SP
NUWIQ	3	SP
RECOMBINATE	4	PA, ST, SP
RETACRIT	3	SP, QL
ZARXIO	3	SP
Drugs for Sexual Dysfunction		
ADDYI	4	PA, QL
CIALIS ORAL TABLET 10 MG, 20 MG	NF	QL
CIALIS ORAL TABLET 2.5 MG, 5 MG	NF	ST, QL
IMVEXXY	4	QL
LEVITRA	NF	QL
OSPHENA	3	PA, QL
sildenafil citrate oral tablet 100 mg, 25 mg, 50 mg	NF	QL
STAXYN	NF	QL
STENDRA	NF	PA, QL
tadalafil oral tablet 10 mg, 20 mg	NF	QL
tadalafil oral tablet 2.5 mg, 5 mg	NF	ST, QL

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Drug Name	Drug Tier	Requirements & Limits
varafenafil hcl	NF	QL
VIAGRA	NF	QL
<b>Electrolytes / Vitamins</b>		
DRISDOL	4	
ERGOAL	3	
ergocalciferol oral capsule	1	
FLORIVA PLUS	3	
folic acid oral tablet 1 mg	1	
klor-con	1	
klor-con 10	1	
klor-con m10	1	
KLOR-CON M15	3	
klor-con m20	1	
klor-con sprinkle	1	
K-TAB	3	
LOKELMA	3	PA, QL
multi-vitamin/fluoride	1	
multivitamin/fluoride oral solution	1	
multivitamin/fluoride oral tablet chewable 0.5 mg, 1 mg	1	
MULTIVITAMIN/FLUORIDE TABLET CHEWABLE 0.25 MG ORAL	3	
multivitamin/fluoride tablet chewable 0.25 mg oral	1	
multivitamins/fluoride	1	
mvc-fluoride	1	
POLY-VI-FLOR	3	
potassium chloride crys er	1	
potassium chloride er	1	
potassium chloride oral	1	
potassium citrate er	1	
QUFLORA PEDIATRIC	3	
SYPRINE	NF	PA, SP
trientine hcl	NF	PA, SP
UROKIT-K 10	4	

Drug Name	Drug Tier	Requirements & Limits
UROKIT-K 15	4	
UROKIT-K 5	4	
VELTASSA	3	PA, QL
vitamin d (ergocalciferol) oral capsule 50000 unit	1	
<b>Gastrointestinal Agents - Drugs for Acid Reflux and Ulcer</b>		
ACIPHEX	NF	QL
ACIPHEX SPRINKLE	NF	QL
CARAFATE ORAL SUSPENSION	3	
CARAFATE ORAL TABLET	4	
CYTOTEC	4	
DEXILANT	3	QL
misoprostol oral	1	
OMECLAMOX-PAK	4	QL
omeprazole oral capsule delayed release	1	
pantoprazole sodium oral	1	
PROTONIX ORAL PACKET	NF	
PROTONIX ORAL TABLET DELAYED RELEASE	NF	
PYLERA	NF	QL
RABEPRAZOLE SODIUM ORAL CAPSULE SPRINKLE	NF	QL
rabeprazole sodium oral tablet delayed release	2	QL
ranitidine hcl oral capsule	NF	
ranitidine hcl oral syrup	1	
ranitidine hcl oral tablet 150 mg, 300 mg	NF	
sucralfate oral tablet	1	
<b>Gastrointestinal Agents - Drugs for Bowel, Intestine and Stomach Conditions</b>		
ACTIGALL	4	
ANASPAZ	2	
CLENPIQ	3	
COLYTE WITH FLAVOR PACKS	4	
dicyclomine hcl oral	1	

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Drug Name	Drug Tier	Requirements & Limits	Drug Name	Drug Tier	Requirements & Limits
diphenoxylate-atropine	1		URSO 250	4	
ed-spaz	1		URSO FORTE	4	
gavilyte-c	1	H	ursodiol oral	1	
gavilyte-g	1	H, QL	VIBERZI	4	PA, QL
GOLYTELY ORAL SOLUTION RECONSTITUTED 227.1 GM	2	QL	<b>Genetic or Enzyme Disorder - Drugs for Replacement, Modification, Treatment</b>		
GOLYTELY ORAL SOLUTION RECONSTITUTED 236 GM	4	QL	CERDELGA	3	PA, SP
hyoscyamine sulfate er	1		CREON	2	
hyoscyamine sulfate oral	1		ENDARI	4	PA, QL
hyoscyamine sulfate sl	1		NITYR	3	PA, SP
hyoscyamine sulfate sublingual	1		ORFADIN	NF	PA, SP
hyosyne	1		PANCREAZE	NF	ST
LEVBID	4		PERTZYE	4	ST
LEVSIN ORAL	4		STRENSIQ	3	PA, SP, QL
LEVSIN/SL	4		VIOKACE	4	ST
LINZESS	2	PA, QL	ZENPEP	2	
LOMOTIL	4		<b>Genitourinary Agents - Drugs for Bladder, Genital and Kidney Conditions</b>		
MOTEGRITY	3	PA, QL	AURYXIA	3	
MOVANTIK	NF	PA, QL	CUPRIMINE	4	SP
MOVIPREP	3	QL	DEPEN TITRATABS	2	SP
NULEV	4		DITROPAN XL	3	
oscimin	1		D-PENAMINE	3	SP
oscimin sr	1		FOSRENOL ORAL PACKET	3	
peg 3350/electrolytes	1	H	FOSRENOL ORAL TABLET CHEWABLE	NF	
peg-3350/electrolytes	1	H, QL	GELNIQUE	NF	
PLENVU	3		GELNIQUE PUMP	NF	
PREPOPIK	3	QL	lanthanum carbonate	3	
SUPREP BOWEL PREP KIT	3	QL	oxybutynin chloride er	2	
SYMAX DUOTAB	NF		oxybutynin chloride oral	1	
symax-sl	1		penicillamine oral	4	SP
symax-sr	1		phenazo oral tablet 200 mg	1	
SYMPROIC	2	PA, QL	phenazopyridine hcl oral tablet 100 mg, 200 mg	1	
TRULANCE	4	PA, ST, QL			

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Drug Name	Drug Tier	Requirements & Limits
PYRIDIDIUM	3	
TOVIAZ	3	
VELPHORO	2	
<b>Genitourinary Agents - Drugs for Prostate Conditions</b>		
alfuzosin hcl er	1	
finasteride oral tablet 5 mg	1	
FLOMAX	NF	
PROSCAR	4	
RAPAFLO	4	
silodosin	3	
tamsulosin hcl	1	
terazosin hcl	1	
UROXATRAL	4	
<b>Hormonal Agents - Hormone Replacement and Birth Control</b>		
afirmelle	1	H
ALORA	3	QL
altavera	1	H
alyacen 1/35	1	H
amethia	3	
amethia lo	4	
apri	1	H
ashlyna	3	
aubra	1	H
aubra eq	1	H
aurovela 1.5/30	2	
aurovela 1/20	2	
aurovela 24 fe	3	
aurovela fe 1.5/30	1	H
aurovela fe 1/20	1	H
aviane	1	H
AYGESTIN	4	
ayuna	1	H
azurette	2	

Drug Name	Drug Tier	Requirements & Limits
balziva	2	
bekyree	2	
BEYAZ	NF	
BIJUVA	3	
blisovi 24 fe	3	
blisovi fe 1.5/30	1	H
briellyn	2	
camila	1	H
camrese	3	
camrese lo	4	
chateal	1	H
chateal eq	1	H
CLIMARA	NF	QL
CLIMARA PRO	3	QL
cryselle-28	1	H
cyclafem 1/35	1	H
cyred	1	H
cyred eq	1	H
dasetta 1/35	1	H
daysee	3	
deblitane	1	H
delyla	1	H
DEPO-PROVERA INTRAMUSCULAR SUSPENSION 150 MG/ML	4	
DEPO-PROVERA INTRAMUSCULAR SUSPENSION PREFILLED SYRINGE	4	
DEPO-SUBQ PROVERA 104	2	
desogestrel-ethinyl estradiol oral tablet 0.15-0.02/0.01 mg (21/5)	2	
desogestrel-ethinyl estradiol oral tablet 0.15-30 mg-mcg	1	H
DIVIGEL TRANSDERMAL GEL 0.25 MG/0.25GM, 0.5 MG/0.5GM, 1 MG/GM	3	
DIVIGEL TRANSDERMAL GEL 0.75 MG/0.75GM	4	

Drug Name	Drug Tier	Requirements & Limits	Drug Name	Drug Tier	Requirements & Limits
dotti	NF	QL	estradiol vaginal cream	NF	
drospiren-eth estrad-levomefol	NF		estradiol vaginal tablet	2	
drospirenone-ethinyl estradiol	NF		ESTRING	2	QL
DUAVEE	NF	QL	ESTROGEL	3	QL
ELESTRIN	3		EVAMIST	2	
elinest	1	H	falmina	1	H
emoquette	1	H	fayosim	NF	
enskyce	1	H	femynor	1	H
errin	1	H	gianvi	NF	
estarylla	1	H	hailey 24 fe	3	
ESTRACE ORAL	4		heather	1	H
ESTRACE VAGINAL	3		incassia	1	H
estradiol oral	1		introvale	2	H
estradiol patch twice weekly 0.025 mg/24hr transdermal (generic Minivelle)	2	QL	isibloom	1	H
estradiol patch twice weekly 0.025 mg/24hr transdermal (generic Vivelle-Dot)	NF	QL	jasmiel	NF	
estradiol patch twice weekly 0.0375 mg/24hr transdermal (generic Minivelle)	2	QL	jencycla	1	H
estradiol patch twice weekly 0.0375 mg/24hr transdermal (generic Vivelle-Dot)	NF	QL	jolessa	2	H
estradiol patch twice weekly 0.05 mg/24hr transdermal (generic Minivelle)	2	QL	juleber	1	H
estradiol patch twice weekly 0.05 mg/24hr transdermal (generic Vivelle-Dot)	NF	QL	junel 1.5/30	2	
estradiol patch twice weekly 0.075 mg/24hr transdermal (generic Minivelle)	2	QL	junel 1/20	2	
estradiol patch twice weekly 0.075 mg/24hr transdermal (generic Vivelle-Dot)	NF	QL	junel fe 1.5/30	1	H
estradiol patch twice weekly 0.1 mg/24hr transdermal (generic Minivelle)	2	QL	junel fe 1/20	1	H
estradiol patch twice weekly 0.1 mg/24hr transdermal (generic Vivelle-Dot)	NF	QL	junel fe 24	3	
estradiol transdermal patch weekly (generic Climara)	1	QL	kalliga	1	H
			kariva	2	
			kurvelo	1	H
			larin 1.5/30	2	
			larin 1/20	2	
			larin 24 fe	3	
			larin fe 1.5/30	1	H
			larin fe 1/20	1	H
			larissia	1	H
			lessina	1	H
			levonorgest-eth est & eth est	NF	

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Drug Name	Drug Tier	Requirements & Limits
levonorgest-eth estrad 91-day oral tablet 0.1-0.02 & 0.01 mg	4	
levonorgest-eth estrad 91-day oral tablet 0.15-0.03 & 0.01 mg	3	
levonorgest-eth estrad 91-day oral tablet 0.15-0.03 mg	2	H
levonorgestrel-ethinyl estrad oral tablet 0.1-20 mg-mcg, 0.15-30 mg-mcg	1	H
levora 0.15/30 (28)	1	H
lillow	1	H
LO LOESTRIN FE	NF	
LOESTRIN 1.5/30 (21)	4	
LOESTRIN 1/20 (21)	4	
LOESTRIN FE 1.5/30	4	
LOESTRIN FE 1/20	4	
loryna	NF	
LOSEASONIQUE	4	
low-ogestrel	1	H
lo-zumandimine	NF	
lutra	1	H
lyza	1	H
marlissa	1	H
medroxyprogesterone acetate intramuscular	1	H
medroxyprogesterone acetate oral	1	
melodetta 24 fe	NF	
MENOSTAR	3	QL
mibelas 24 fe	NF	
microgestin 1.5/30	2	
microgestin 1/20	2	
microgestin fe 1.5/30	1	H
microgestin fe 1/20	1	H
mili	1	H
MINASTRIN 24 FE	NF	
MINIVELLE	NF	QL
MIRCETTE	4	
mono-linyah	1	H

Drug Name	Drug Tier	Requirements & Limits
NATAZIA	2	
necon 0.5/35 (28)	1	H
nikki	NF	
nora-be	1	H
norethin ace-eth estrad-fe oral tablet 1-20 mg-mcg	1	H
norethin ace-eth estrad-fe oral tablet 1-20 mg-mcg(24)	3	
norethin ace-eth estrad-fe oral tablet chewable	NF	
norethindrone acetate oral	1	
norethindrone acet-ethinyl est	2	
norethindrone oral	1	H
norgestimate-eth estradiol	1	H
norgestimate-ethinyl estradiol triphasic oral tablet 0.18/0.215/0.25 mg-25 mcg	2	
norgestimate-ethinyl estradiol triphasic oral tablet 0.18/0.215/0.25 mg-35 mcg	1	H
norlyda	1	H
norlyroc	1	H
nortrel 0.5/35 (28)	1	H
nortrel 1/35 (21)	1	H
nortrel 1/35 (28)	1	H
NUVARING	2	H
ocella	NF	
ogestrel	2	
orsythia	1	H
ORTHO MICRONOR	4	
ORTHO TRI-CYCLEN LO	NF	
ORTHO-NOVUM 1/35 (28)	4	
philith	2	
pimtrea	2	
pirmella 1/35	1	H
portia-28	1	H
PREMARIN ORAL	NF	
PREMARIN VAGINAL	3	

Drug Name	Drug Tier	Requirements & Limits	Drug Name	Drug Tier	Requirements & Limits
PREMPHASE	3		tulana	1	H
PREMPRO	NF		tydemy	NF	
previfem	1	H	VAGIFEM	NF	
progesterone micronized oral	2		vienva	1	H
PROMETRIUM	NF		viorele	2	
PROVERA	4		VIVELLE-DOT	2	QL
QUARTETTE	NF		vyfemla	2	
reclipsen	1	H	vylibra	1	H
rivelsa	NF		wera	1	H
SAFYRAL	NF		xulane	3	H
SEASONIQUE	4		YASMIN 28	2	
setlakin	2	H	YAZ	2	
sharobel	1	H	yuvafem	2	
simliya	2		zarah	NF	
simpesse	3		zumandimine	NF	
sprintec 28	1	H	<b>Hormonal Agents - Oral Steroids</b>		
sronyx	1	H	CORTEF	4	
syeda	NF		DECADRON	NF	
tarina 24 fe	3		deltasone	1	
tarina fe 1/20	1	H	dexamethasone intensol	1	
tarina fe 1/20 eq	1	H	dexamethasone oral elixir	1	
TAYTULLA	NF		dexamethasone oral solution	1	
tri femynor	1	H	dexamethasone oral tablet	1	
tri-estarylla	1	H	dexamethasone oral tablet therapy pack	3	
tri-linyah	1	H	DEXPAK 10 DAY	4	
tri-lo-estarylla	2		DEXPAK 13 DAY	4	
tri-lo-marzia	2		DEXPAK 6 DAY	4	
tri-lo-mili	2		DXEVO 11-DAY	NF	
tri-lo-sprintec	2		HIDEX 6-DAY	NF	
tri-mili	1	H	hydrocortisone oral	1	
tri-previfem	1	H	MEDROL ORAL TABLET 16 MG, 4 MG, 8 MG	4	
tri-sprintec	1	H	MEDROL ORAL TABLET 2 MG	2	
tri-vylibra	1	H	MEDROL ORAL TABLET 32 MG	3	
tri-vylibra lo	2				

See page 8 for coverage details. Drugs listed as ST are subject to Prior Authorization in CT, NJ and NY.

Drug Name	Drug Tier	Requirements & Limits
MEDROL ORAL TABLET THERAPY PACK	4	
methylprednisolone oral	1	
MILLIPRED	2	
MILLIPRED DP	2	
MILLIPRED DP 12-DAY	2	
ORAPRED ODT	4	
PEDIAPRED	2	
prednisolone oral solution	1	
prednisolone sodium phosphate oral	1	
prednisone intensol	1	
prednisone oral	1	
RAYOS	NF	
TAPERDEX 12-DAY	3	
TAPERDEX 6-DAY	4	
TAPERDEX 7-DAY	3	

#### Hormonal Agents - Other

cabergoline	2	
DDAVP INJECTION	4	
DDAVP ORAL	4	
desmopressin acetate injection	1	
desmopressin acetate oral	1	
FOLLISTIM AQ	2	PA, ST, SP
ganirelix acetate (Merck/Organon)	2	PA, SP, QL
GENOTROPIN	NF	PA, SP, QL
GENOTROPIN MINIQUICK	NF	PA, SP, QL
HUMATROPE	NF	PA, SP, QL
NOCDURNA	3	PA, QL
NOCTIVA	NF	PA, QL
NORDITROPIN FLEXPRO	NF	PA, SP, QL
NOVAREL INJ 5000 UNIT	3	PA, SP
NUTROPIN AQ NUSPIN 10	3	PA, SP, QL
NUTROPIN AQ NUSPIN 20	3	PA, SP, QL
NUTROPIN AQ NUSPIN 5	3	PA, SP, QL
OMNITROPE	NF	PA, SP, QL

Drug Name	Drug Tier	Requirements & Limits
ORLISSA	4	PA, QL
pregnyl	1	PA, SP
STIMATE	NF	
ZOMACTON	NF	PA, SP, QL

#### Hormonal Agents - Testosterone Replacement

ANDRODERM	2	PA, QL
ANDROGEL	NF	PA, QL
ANDROGEL PUMP	NF	PA, QL
DEPO-TESTOSTERONE INTRAMUSCULAR SOLUTION 100 MG/ML	3	
DEPO-TESTOSTERONE INTRAMUSCULAR SOLUTION 200 MG/ML	4	
FORTESTA	NF	PA, QL
METHITEST	2	
methyltestosterone oral	2	
NATESTO	NF	PA, QL
STRIANT	NF	PA, QL
TESTIM	2	PA, QL
testosterone cypionate intramuscular	1	
testosterone enanthate intramuscular	1	
testosterone transdermal	NF	PA, QL
VOGELXO	NF	PA, QL
VOGELXO PUMP	NF	PA, QL
XYOSTED	NF	PA

#### Hormonal Agents - Thyroid

ARMOUR THYROID	3	
CYTOMEL	NF	
euthyrox	1	
levo-t	1	
levothyroxine sodium oral	1	
levothyroxine-liothyronine oral tablet 120 mg, 15 mg, 30 mg, 60 mg, 90 mg	1	
levoxyl	2	
liothyronine sodium oral	2	

Drug Name	Drug Tier	Requirements & Limits
methimazole oral	1	
NATURE-THROID	3	
np thyroid	1	
SYNTHROID	2	
TAPAZOLE	4	
TIROSINT	NF	
TIROSINT-SOL	4	
unithroid	1	
WESTHROID	3	
WP THYROID	3	

### Immunological Agents - Drugs for Immune System Stimulation or Suppression

ACTEMRA ACTPEN	4	PA, ST, SP, QL
ACTEMRA SUBCUTANEOUS	4	PA, ST, SP, QL
ASTAGRAF XL	NF	SP
AZASAN	4	
azathioprine oral	1	
CELLCEPT	NF	SP
CIMZIA PREFILLED KIT	3	PA, SP, QL
CIMZIA STARTER KIT	3	PA, SP, QL
COSENTYX 150 MG/ML	4	PA, ST, SP, QL
COSENTYX 300 DOSE	4	PA, ST, SP, QL
COSENTYX SENSOREADY 300 DOSE	4	PA, ST, SP, QL
COSENTYX SENSOREADY PEN	4	PA, ST, SP, QL
cyclosporine modified oral capsule 100 mg, 25 mg	1	SP
CYCLOSPORINE MODIFIED ORAL CAPSULE 50 MG	NF	SP
cyclosporine modified oral solution	1	SP
ENBREL	NF	PA, ST, SP, QL
ENBREL MINI	NF	PA, ST, SP, QL
ENBREL SURECLICK	NF	PA, ST, SP, QL
ENVARUSUS XR	NF	SP
FIRAZYR	4	PA, SP, QL
gengraf	1	SP

Drug Name	Drug Tier	Requirements & Limits
HAEGARDA	3	PA, SP, QL
HUMIRA	3	PA, SP, QL
HUMIRA PEDIATRIC CROHNS START	3	PA, SP, QL
HUMIRA PEN	3	PA, SP, QL
HUMIRA PEN-CD/UC/HS STARTER	3	PA, SP, QL
HUMIRA PEN-PS/UV/ADOL HS START	3	PA, SP, QL
icatibant acetate	1	PA, SP, QL
IMURAN	NF	
methotrexate oral	1	
methotrexate sodium oral	1	
mycophenolate mofetil	1	SP
mycophenolate sodium	3	SP
MYFORTIC	NF	SP
NEORAL	NF	SP
OLUMIANT	3	PA, ST, SP, QL
ORENCIA	4	PA, ST, SP, QL
OTEZLA	3	PA, SP, QL
OTREXUP	NF	ST, QL
PROGRAF ORAL	NF	SP
RAPAMUNE ORAL SOLUTION	4	SP
RAPAMUNE ORAL TABLET	NF	SP
RASUVO	4	ST, QL
RINVOQ	3	PA, SP, QL
SILIQ	NF	PA, SP, ST, QL
SIMPONI	3	PA, SP, QL
sirolimus oral solution	3	SP
sirolimus oral tablet	1	SP
SKYRIZI	3	PA, SP, QL
STELARA SUBCUTANEOUS SOLUTION	NF	PA, SP, QL
STELARA SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	3	PA, SP, QL
tacrolimus oral	1	SP
TAKHZYRO	3	PA, SP, QL

Drug Name	Drug Tier	Requirements & Limits
TALTZ	NF	PA, ST, SP, QL
TREMFYA SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	3	PA, SP, QL
TREXALL	2	
XELJANZ	3	PA, ST, SP, QL
XELJANZ XR	3	PA, ST, SP, QL

#### Infertility Agents

CRINONE VAGINAL GEL 4 %	4	ST
CRINONE VAGINAL GEL 8 %	4	PA, ST
ENDOMETRIN	2	PA

#### Inflammatory Bowel Disease Agents

ANALPRAM HC	4	
ANALPRAM HC SINGLES	4	
ANALPRAM-HC RECTAL CREAM	4	
ANALPRAM-HC RECTAL LOTION	3	
APRISO	2	
ASACOL HD	NF	
AZULFIDINE	4	
AZULFIDINE EN-TABS	4	
budesonide er	NF	
budesonide oral	2	
CANASA	NF	
CORTIFOAM	2	
DELZICOL	NF	
DIPENTUM	NF	
ENTOCORT EC	NF	
hydrocortisone ace-pramoxine rectal	1	
LIALDA	NF	
mesalamine oral	NF	
mesalamine rectal enema	1	
mesalamine rectal suppository	2	
PENTASA	NF	
PROCORT	NF	

Drug Name	Drug Tier	Requirements & Limits
PROCTOFOAM HC	2	
SFROWASA	NF	
sulfasalazine oral	1	
UCERIS ORAL	NF	
UCERIS RECTAL	2	

#### Metabolic Bone Disease Agents - Drugs for Osteoporosis

alendronate sodium	1	
BINOSTO	NF	QL
BONIVA ORAL	4	
calcitriol oral	1	
FORTEO	NF	PA, SP
FOSAMAX	4	
ibandronate sodium oral	2	
ROCALTROL	4	
TYMLOS	NF	PA, SP

#### Ophthalmic Agents - Drugs for Eye Allergy, Infection and Inflammation

ACULAR	4	
ACULAR LS	4	
ACUVAIL	NF	
ALREX	4	QL
AZASITE	3	
azelastine hcl ophthalmic	1	
BESIVANCE	3	
CILOXAN OPHTHALMIC OINTMENT	3	
CILOXAN OPHTHALMIC SOLUTION	4	
ciprofloxacin hcl ophthalmic	1	
erythromycin ophthalmic	1	H
INVELTYS	3	
ketorolac tromethamine ophthalmic	1	
LASTACFT	3	QL
LOTEMAX OPHTHALMIC GEL	NF	

Drug Name	Drug Tier	Requirements & Limits
LOTEMAX OPHTHALMIC OINTMENT	3	
LOTEMAX OPHTHALMIC SUSPENSION	4	QL
LOTEMAX SM	3	QL
loteprednol etabonate	1	QL
MAXITROL	4	
MOXEZA	4	
moxifloxacin hcl ophthalmic	3	
neomycin-polymyxin-dexameth ophthalmic ointment	1	
neomycin-polymyxin-dexameth ophthalmic suspension 3.5-10000-0.1	1	
OCUFLOX	4	
ofloxacin ophthalmic	1	
olopatadine hcl ophthalmic solution 0.1 %	3	QL
olopatadine hcl ophthalmic solution 0.2 %	NF	QL
PATADAY	NF	QL
PATANOL	NF	QL
PAZEO	NF	QL
polymyxin b-trimethoprim	1	
POLYTRIM	4	
PRED FORTE	4	
PRED MILD	3	
prednisolone acetate ophthalmic	1	
TOBRADEX OPHTHALMIC OINTMENT	3	
TOBRADEX OPHTHALMIC SUSPENSION	4	
TOBRADEX ST	NF	
tobramycin ophthalmic	1	
tobramycin-dexamethasone	2	
TOBREX OPHTHALMIC OINTMENT	3	
TOBREX OPHTHALMIC SOLUTION	4	
VIGAMOX	NF	
VYZULTA	NF	ST, QL

Drug Name	Drug Tier	Requirements & Limits
<b>Ophthalmic Agents - Drugs for Glaucoma</b>		
ALPHAGAN P OPHTHALMIC SOLUTION 0.1 %	2	QL
ALPHAGAN P OPHTHALMIC SOLUTION 0.15 %	4	QL
AZOPT	2	QL
BETIMOL	2	QL
bimatoprost ophthalmic	NF	QL
brimonidine tartrate ophthalmic solution 0.15 %	2	QL
brimonidine tartrate ophthalmic solution 0.2 %	1	
COMBIGAN	2	QL
COSOPT	4	
COSOPT PF	NF	QL
dorzolamide hcl-timolol mal	2	
dorzolamide hcl-timolol mal pf	NF	QL
ISTALOL	4	
latanoprost ophthalmic	1	
LUMIGAN	2	
RHOPRESSA	NF	QL
timolol maleate ophthalmic gel forming solution	1	
timolol maleate ophthalmic solution 0.25 %, 0.5 %	1	
timolol maleate ophthalmic solution 0.5 % (daily)	3	
TIMOPTIC	4	
TIMOPTIC OCUDOSE	2	
TIMOPTIC-XE	4	
TRAVATAN Z	2	QL
XALATAN	NF	
XELPROS	3	QL
<b>Ophthalmic Agents - Drugs for Miscellaneous Eye Conditions</b>		
CEQUA	NF	PA, QL
CYCLOSPORINE IN KLARITY	NF	PA
RESTASIS	NF	PA, QL
RESTASIS MULTIDOSE	NF	PA, QL
XIIDRA	NF	PA, QL

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Drug Name	Drug Tier	Requirements & Limits
<b>Otic Agents - Drugs for Ear Conditions</b>		
CIPRODEX	NF	ST
FLOXIN OTIC	NF	
neomycin-polymyxin-hc otic	1	
ofloxacin otic	2	
<b>Respiratory Tract / Pulmonary Agents - Drugs for Allergies, Cough, Cold</b>		
ASTEPRO	NF	
AUVI-Q	NF	QL
azelastine hcl nasal solution 0.1 %, 137 mcg/spray	3	
azelastine hcl nasal solution 0.15 %	NF	
benzonatate oral capsule 100 mg, 200 mg	1	
benzonatate oral capsule 150 mg	NF	
bromfed dm	1	
cyproheptadine hcl oral	1	
EPINEPHRINE INJECTION SOLUTION 0.3 MG/0.3ML	NF	QL
EPINEPHRINE INJECTION SOLUTION AUTO-INJECTOR 0.15 MG/0.15ML	NF	QL
EPINEPHRINE INJECTION SOLUTION AUTO-INJECTOR 0.15 MG/0.3ML	2	QL
EPINEPHRINE SOLUTION AUTO-INJECTOR 0.3 MG/0.3ML INJECTION	2	QL
epinephrine solution auto-injector 0.3 mg/0.3ml injection	2	QL
EPIPEN 2-PAK	NF	QL
EPIPEN JR 2-PAK	NF	QL
fluticasone propionate nasal	2	QL
hydrocodone polst-cpm polst er	NF	PA, QL
ipratropium bromide nasal	1	
levocetirizine dihydrochloride oral solution	3	
levocetirizine dihydrochloride oral tablet	1	
OMNARIS	NF	QL
phenadoz	1	

Drug Name	Drug Tier	Requirements & Limits
promethazine-codeine	1	PA, QL
promethazine-dm	1	
pseudoephedrine-bromphen-dm	1	
SYMJEPI	2	QL
TESSALON PERLES	4	
TUSSICAPS	4	QL
XHANCE	NF	QL
YUPELRI	4	PA, QL
ZETONNA	3	QL
<b>Respiratory Tract / Pulmonary Agents - Drugs for Asthma and COPD</b>		
ADVAIR DISKUS	3	QL
ADVAIR HFA	3	QL
AIRDUO RESPICLICK 113/14	NF	QL
AIRDUO RESPICLICK 232/14	NF	QL
AIRDUO RESPICLICK 55/14	NF	QL
albuterol sulfate er	1	
ALBUTEROL SULFATE HFA AEROSOL SOLUTION 108 (90 BASE) MCG/ACT INHALATION (ProAir HFA, Proventil HFA)	3	QL
ALBUTEROL SULFATE HFA AEROSOL SOLUTION 108 (90 BASE) MCG/ACT INHALATION (Ventolin HFA)	NF	QL
albuterol sulfate inhalation	1	
albuterol sulfate oral	1	
ALVESCO	2	QL
ANORO ELLIPTA	3	QL
ARCAPTA NEOHALER	3	QL
ARNUITY ELLIPTA	NF	QL
ASMANEX 120 METERED DOSES	2	QL
ASMANEX 14 METERED DOSES	2	QL
ASMANEX 30 METERED DOSES	2	QL
ASMANEX 60 METERED DOSES	2	QL
ASMANEX 7 METERED DOSES	2	QL

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Drug Name	Drug Tier	Requirements & Limits	Drug Name	Drug Tier	Requirements & Limits
ASMANEX HFA	2	QL	SPIRIVA RESPIMAT	2	QL
ATROVENT HFA	3	QL	STRIVERDI RESPIMAT	2	QL
BEVESPI AEROSPHERE	2	QL	SYMBICORT	3	QL
BREO ELLIPTA	3	QL	TRELEGY ELLIPTA	3	QL
budesonide inhalation	2	QL	VENTOLIN HFA	2	QL
COMBIVENT RESPIMAT	4	QL	wixela inhub	NF	QL
FLOVENT DISKUS	NF	QL	XOPENEX HFA	NF	QL
FLOVENT HFA	NF	QL	<b>Respiratory Tract / Pulmonary Agents - Drugs for Cystic Fibrosis</b>		
fluticasone-salmeterol inhalation aerosol powder breath activated 100-50 mcg/dose, 250-50 mcg/dose, 500-50 mcg/dose	NF	QL	BETHKIS	3	PA, SP, QL
FLUTICASONE-SALMETEROL INHALATION AEROSOL POWDER BREATH ACTIVATED 113-14 MCG/ACT, 232-14 MCG/ACT, 55-14 MCG/ACT	2	QL	KITABIS PAK	NF	PA, SP, QL
INCRUSE ELLIPTA	2	QL	PULMOZYME	3	PA, SP, QL
ipratropium-albuterol	2		TOBI NEBULIZER	NF	PA, SP, QL
LEVALBUTEROL HFA INHALATION AEROSOL 45 MCG/ACT	NF	QL	TOBI PODHALER	NF	PA, SP, QL
montelukast sodium oral packet	2		tobramycin nebulization solution 300 mg/5ml inhalation	NF	PA, SP, QL
montelukast sodium oral tablet	1		TOBRAMYCIN NEBULIZATION SOLUTION 300 MG/5ML INHALATION	NF	PA, SP, QL
montelukast sodium oral tablet chewable	1		<b>Respiratory Tract / Pulmonary Agents - Drugs for Pulmonary Hypertension</b>		
PERFOROMIST	NF	QL	ADCIRCA	NF	PA, SP, QL
PROAIR HFA	3	QL	ADEMPAS	3	PA, SP, QL
PROAIR RESPICLICK	3	QL	alyq	NF	PA, SP, QL
PROVENTIL HFA	4	QL	ambrisentan	3	PA, SP, QL
PULMICORT FLEXHALER	NF	ST, QL	bosentan	3	PA, SP, QL
PULMICORT SUSPENSION	NF	QL	LETAIRIS	NF	PA, SP, QL
QVAR REDHALER	2	QL	OPSUMIT	3	PA, SP, QL
SINGULAIR ORAL PACKET	3		ORENITRAM	4	PA, SP, QL
SINGULAIR ORAL TABLET	NF		tadalafil (pah)	NF	PA, SP, QL
SINGULAIR ORAL TABLET CHEWABLE	NF		TRACLEER ORAL TABLET	3	PA, SP, QL
SPIRIVA HANDIHALER	2	QL	TRACLEER ORAL TABLET SOLUBLE	2	PA, SP
			TYVASO	3	PA, SP
			TYVASO REFILL	3	PA, SP
			TYVASO STARTER	3	PA, SP

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Drug Name	Drug Tier	Requirements & Limits
<b>Skeletal Muscle Relaxants - Drugs for Muscle Pain and Spasm</b>		
AMRIX	NF	
baclofen oral	1	
carisoprodol oral tablet 250 mg	NF	
carisoprodol oral tablet 350 mg	1	
cyclobenzaprine hcl er	NF	
cyclobenzaprine hcl oral	1	
FEXMID	4	
metaxall	3	
metaxalone	3	
methocarbamol oral	1	
ROBAXIN ORAL	4	
ROBAXIN-750	4	
SKELAXIN	NF	
SOMA ORAL TABLET 250 MG	NF	
SOMA ORAL TABLET 350 MG	3	
tizanidine hcl oral capsule	3	
tizanidine hcl oral tablet	1	
ZANAFLEX	4	

Drug Name	Drug Tier	Requirements & Limits
<b>Sleep Disorder Agents</b>		
AMBIEN	NF	QL
AMBIEN CR	NF	QL
EDLUAR	NF	QL
eszopiclone	2	QL
INTERMEZZO	NF	QL
LUNESTA	NF	QL
modafinil	2	PA, QL
PROVIGIL	NF	PA, QL
RESTORIL	4	
temazepam	1	
zolpidem tartrate er	NF	QL
zolpidem tartrate oral	1	QL
zolpidem tartrate sublingual	NF	QL
ZOLPIMIST	4	ST, QL

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brimonidine tartrate ophthalmic		extended release 12 hour.....	13	ciclopirox external solution .....	15
solution 0.2 %.....	38	carbamazepine er oral tablet		ciclopirox treatment .....	15
bromfed dm .....	39	extended release 12 hour.....	13	CILOXAN OPHTHALMIC	
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AUTOINJECTOR .....	27	CENTANY AT .....	12	LOTION .....	23
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		CHANTIX CONTINUING MONTH		clindacin-p .....	23
		PAK .....	12	CLINDAGEL .....	23
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		PAK .....	12	clindamycin phos-benzoyl perox	
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clobetasol propionate external foam.....	24	COSENTYX SENSOREADY PEN.....	36	DEPEN TITRATABS.....	30	
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FOLLISTIM AQ .....	35	glipizide xl .....	27	HUMIRA PEDIATRIC CROHNS	
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		GUARDIAN CONNECT		solution 10-325 mg/15ml .....	10
		TRANSMITTER .....	26	hydrocodone-acetaminophen oral	
		GUARDIAN LINK 3		solution 7.5-325 mg/15ml .....	10
		TRANSMITTER .....	26	hydrocodone-acetaminophen oral	
		GUARDIAN SENSOR (3) .....	26	tablet 10-300 mg, 5-300 mg,	
		GYNAZOLE-1 .....	15	7.5-300 mg .....	10
				hydrocodone-acetaminophen oral	
				tablet 10-325 mg, 5-325 mg,	
				7.5-325 mg .....	10
				hydrocortisone ace-pramoxine	
				rectal .....	37
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## G

## H



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levonorgest-eth estrad 91-day oral		lorcet plus .....	10		
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## Multi-language interpreter services

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**請注意:** 如果您說**中文 (Chinese)**，我們免費為您提供語言協助服務。請撥打會員卡所列的免付費會員電話號碼。

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**PAALALA:** Kung nagsasalita ka ng **Tagalog (Tagalog)**, may makukuha kang mga libreng serbisyo ng tulong sa wika. Pakitawagan ang toll-free na numero ng telepono na nasa iyong identification card.

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تنبیه: إذا كنت تتحدث **العربية (Arabic)**، فإن خدمات المساعدة اللغوية المجانية متاحة لك. الرجاء الاتصال على رقم الهاتف المجاني الموجود على معرف العضوية.

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**ACHTUNG:** Falls Sie **Deutsch (German)** sprechen, stehen Ihnen kostenlos sprachliche Hilfsdienstleistungen zur Verfügung. Bitte rufen Sie die gebührenfreie Rufnummer auf der Rückseite Ihres Mitgliedsausweises an.

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توجه: اگر زبان شما **فارسی (Farsi)** است، خدمات امداد زبانی به طور رایگان در اختیار شما می باشد. لطفا با شماره تلفن رایگانی که روی کارت شناسایی شما قید شده تماس بگیرید.

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

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

ចំណាប់អារម្មណ៍: បើសិនអ្នកនិយាយ**ខ្មែរ(Khmer)**សំដៅនូវភាសាដើមរបស់អ្នកនិយាយគឺមានសំរាប់អ្នក។ សូមទូរស័ព្ទទៅលេខឥតគិតថ្លៃ ដើម្បីមាននូវលេខអត្តសញ្ញាណប័ណ្ណរបស់អ្នក។

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

**DÍI BAA'AKONÍNÍZIN:** **Diné (Navajo)** bizaad bee yániit'igo, saad beę áka'anída'awo'ígíí, t'áa jíík'eh, bee ná'ahóót'i'. T'áa shòqdí ninaaltsoos niit'izí bee nééhozinígíí bine'déę t'áa jíík'ehgo béesh bee hane'í biká'ígíí bee hodíilnih.

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



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