



2025 Select Standard Formulary

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



Call the number on your member ID card.



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

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

Understanding your formulary

What is a formulary?

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

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

How do I use my formulary?

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

What are tiers?

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

When does the formulary change?

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

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

Why are some medications excluded from coverage?

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

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

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



About this formulary

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

Medication tips

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

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

What if my doctor writes a brand-name prescription?

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

What if I am taking a specialty medication?

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



Over-the-counter medications (OTC)

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

Reading your formulary

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

Tier information

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

Drug tier	Includes	Helpful tips
Tier 1	\$ Lower-cost generics and some brand name	Use tier 1 drugs for the lowest out-of-pocket costs.
Tier 2	\$\$ Mid-range cost preferred brand name	Use tier 2 drugs instead of tier 3 to help reduce your out-of-pocket costs.
Tier 3	\$\$\$ Higher-cost brand name and some generics	Many tier 3 drugs have lower-cost options in tier 1 or 2. Ask your doctor if they could work for you.

Drug list information

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

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

HealthTrust Select Focus

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Drug Name	Drug Tier	Notes
Analgesics - Drugs for Pain		
acetaminophen-codeine oral tablet	1	
apap-caff-dihydrocodeine	1	
BELBUCA	2	PA; QL
butalbital-apap-caffeine	1	
endocet	1	
hydrocodone-acetaminophen	1	
hydromorphone hcl oral tablet	1	
HYSINGLA ER	2	PA; QL
morphine sulfate er oral tablet extended release	1	PA; QL
NUCYNTA	3	
oxycodone hcl oral solution	1	
oxycodone hcl oral tablet	1	
oxycodone-acetaminophen oral tablet 10-325 mg, 2.5-325 mg, 5-325 mg, 7.5-325 mg	1	
OXYCONTIN	2	PA; QL
ROXYBOND	3	
tramadol hcl oral tablet	1	
TREZIX	3	
XTAMPZA ER	2	PA; QL
Analgesics - Drugs for Pain and Inflammation		
celecoxib oral	1	
diclofenac potassium oral tablet	1	
diclofenac sodium external gel 1 %	E	
diclofenac sodium oral	1	
ELYXYB	3	

Drug Name	Drug Tier	Notes
ibuprofen oral suspension 100 mg/5ml	1	
ibuprofen oral tablet 400 mg, 600 mg, 800 mg	1	
indomethacin oral capsule	1	
ketorolac tromethamine oral	1	
meloxicam oral tablet	1	
nabumetone oral	1	
NAPRELAN	3	
naproxen oral tablet	1	
Anesthetics		
lidocaine external ointment 5 %	1	
lidocaine external patch 5 %	1	
lidocaine-prilocaine external cream	1	
premium lidocaine	1	
ZTLIDO	3	
Anti-Addiction / Substance Abuse Treatment Agents		
BRIXADI	3	SP
BRIXADI (WEEKLY)	3	SP
buprenorphine hcl sublingual	1	
buprenorphine hcl-naloxone hcl	1	
KLOXXADO	2	
naloxone hcl nasal	1	
naltrexone hcl oral	1	
OPVEE	2	
REXTOVY	2	
SUBLOCADE	3	SP
varenicline tartrate	1	
varenicline tartrate(continue)	1	
VIVITROL	3	SP

Drug Name	Drug Tier	Notes
ZIMHI	3	
ZUBSOLV	2	
Antibacterials		
amoxicillin oral capsule	1	
amoxicillin oral suspension reconstituted	1	
amoxicillin oral tablet	1	
amoxicillin-potassium clavulanate	1	
azithromycin oral	1	
cefadroxil oral capsule	1	
cefdinir	1	
cefepodoxime proxetil oral tablet	1	
cefuroxime axetil	1	
cephalexin	1	
ciprofloxacin hcl oral	1	
clarithromycin oral tablet	1	
clindamycin hcl oral	1	
clindamycin phosphate vaginal	1	
CLINDESSE	3	
DIFICID	3	
doxycycline hyclate oral capsule	1	
doxycycline hyclate oral tablet	1	
doxycycline monohydrate oral capsule	1	
doxycycline monohydrate oral tablet	1	
levofloxacin oral tablet	1	
metronidazole oral tablet 250 mg, 500 mg	1	
metronidazole vaginal	1	
minocycline hcl oral capsule	1	
mupirocin ointment	1	

Drug Name	Drug Tier	Notes
nitrofurantoin macrocrystal	1	
nitrofurantoin monohydrate macrocrystals	1	
NUZYRA ORAL	3	QL
penicillin v potassium oral tablet	1	
SEYSARA	3	
sulfamethoxazole-trimethoprim oral	1	
sulfatrim pediatric	1	
XACIATO	3	
Anticoagulants		
ELIQUIS	2	
ELIQUIS DVT/PE STARTER PACK	2	
enoxaparin sodium injection solution prefilled syringe	1	SP
jantoven	1	
warfarin sodium oral	1	
XARELTO	2	
XARELTO STARTER PACK	2	
Anticonvulsants - Drugs for Seizures		
APTOM	3	
BRIVIACT	3	
divalproex sodium er	1	
divalproex sodium oral	1	
EPIDIOLEX	3	SP
FYCOMPA	3	
gabapentin oral capsule	1	
gabapentin oral tablet 600 mg, 800 mg	1	
lacosamide oral tablet	1	
lamotrigine er	1	
lamotrigine oral tablet	1	
levetiracetam er	1	

Drug Name	Drug Tier	Notes
levetiracetam intravenous	1	
levetiracetam oral solution	1	
levetiracetam oral tablet	1	
MOTPOLY XR	3	
NAYZILAM	3	
oxcarbazepine	1	
primidone oral	1	
roweepra	1	
subvenite	1	
SYMPAZAN	3	
TOPAMAX	3	
TOPAMAX SPRINKLE	3	
topiramate oral tablet	1	
VALTOCO 10 MG DOSE	3	
VALTOCO 5 MG DOSE	3	
XCOPRI	3	
ZONEGRAN	3	
zonisamide oral	1	
Antidementia Agents - Drugs for Alzheimer's Disease and Dementia		
donepezil hcl oral tablet	1	
memantine hcl oral tablet	1	
NAMZARIC	2	
Antidepressants		
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 oral	1	
citalopram hydrobromide oral tablet	1	

Drug Name	Drug Tier	Notes
desvenlafaxine succinate er	1	
doxepin hcl oral capsule	1	
duloxetine hcl oral	1	
escitalopram oxalate oral tablet	1	
fluoxetine hcl oral capsule	1	
fluoxetine hcl oral solution	1	
fluoxetine hcl oral tablet	1	
fluvoxamine maleate	1	
mirtazapine oral tablet	1	
nortriptyline hcl oral capsule	1	
paroxetine hcl oral tablet	1	
sertraline hcl oral tablet	1	
SPRAVATO (56 MG DOSE)	3	SP
SPRAVATO (84 MG DOSE)	3	SP
trazodone hcl oral	1	
TRINTELLIX	3	
venlafaxine hcl	1	
venlafaxine hcl er	1	
vilazodone hcl	1	
ZURZUVAE	3	
Antiemetics - Drugs for Nausea and Vomiting		
meclizine hcl oral tablet 12.5 mg, 50 mg	1	
meclizine hcl tablet 25 mg oral (otc)	E	
meclizine hcl tablet 25 mg oral (rx)	1	
metoclopramide hcl oral tablet	1	
ondansetron hcl oral tablet	1	

Drug Name	Drug Tier	Notes
ondansetron odt	1	
prochlorperazine maleate oral	1	
promethazine hcl injection	1	
promethazine hcl oral solution 6.25 mg/5ml	1	
promethazine hcl oral tablet	1	
SANCUSO	3	
scopolamine	1	
VARUBI (180 MG DOSE)	3	
Antifungals		
ciclodan	1	
ciclopirox external solution	1	
clotrimazole cream 1 % external (otc)	E	
clotrimazole cream 1 % external (rx)	1	
clotrimazole mouth/throat	1	
clotrimazole-betamethasone external cream	1	
CRESEMBA	3	
fluconazole oral tablet	1	
GYNAZOLE-1	3	
JUBLIA	3	
ketoconazole external cream	1	
ketoconazole external shampoo	1	
klayesta	1	
nyamyc	1	
nystatin external	1	
nystatin mouth/throat	1	
nystop	1	
terbinafine hcl oral	1	
terconazole vaginal cream	1	

Drug Name	Drug Tier	Notes
VIVJOA	3	
Antigout Agents		
allopurinol oral	1	
colchicine oral tablet	1	
Antimigraine Agents		
AIMOVIG SUBCUTANEOUS SOLUTION AUTO-INJECTOR 140 MG/ML, 70 MG/ML	2	
AJOVY	2	
eletriptan hydrobromide	1	
EMGALITY SUBCUTANEOUS SOLUTION AUTO-INJECTOR 120 MG/ML	3	
EMGALITY SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 100 MG/ML	2	
naratriptan hcl	1	
NURTEC	2	
QULIPTA	2	
rizatriptan benzoate	1	
sumatriptan succinate oral	1	
sumatriptan succinate subcutaneous solution auto-injector	1	
UBRELVY	2	
ZAVZPRET	3	
Antimyasthenic Agents		
VYVGART	3	SP
VYVGART HYTRULO SUBCUTANEOUS SOLUTION	3	SP
Antineoplastics - Drugs for Cancer		
abiraterone acetate	1	SP
ALECENSA	2	SP
ALUNBRIG	2	SP

Drug Name	Drug Tier	Notes
anastrozole oral	1	
ANKTIVA	3	SP
AUGTYRO	3	SP
BESREMI	3	SP
CABOMETYX	2	SP
CALQUENCE	3	SP
capecitabine	1	SP
COTELLIC	3	SP
ERIVEDGE	3	SP
ERLEADA	3	SP
GAVRETO	3	SP
ICLUSIG	3	SP
IDHIFA	3	SP
imatinib mesylate	1	SP
IMBRUVICA ORAL CAPSULE	3	SP
IMBRUVICA ORAL SUSPENSION	3	SP
IMBRUVICA ORAL TABLET 420 MG	3	SP
KANJINTI	2	SP
KISQALI (200 MG DOSE)	3	SP
KISQALI (400 MG DOSE)	3	SP
KISQALI (600 MG DOSE)	3	SP
KOSELUGO	3	SP
lenalidomide	1	SP
letrozole oral	1	
LUMAKRAS	3	SP
LYNPARZA	2	SP
MEKINIST	3	SP
MVASI	2	SP
NUBEQA	3	SP
ODOMZO	3	SP
ORGOVYX	3	SP
PANRETIN	3	
PHESGO	2	SP
PIQRAY	3	SP

Drug Name	Drug Tier	Notes
POMALYST	3	SP
RETEVMO	3	SP
REVLIMID	2	SP
ROZLYTREK	3	SP
RUXIENCE	2	SP
RYDAPT	3	SP
SCEMBLIX	3	SP
STIVARGA	2	SP
TABRECTA	3	SP
TAFINLAR	3	SP
TAGRISSO	3	SP
tamoxifen citrate oral	1	
TASIGNA	3	SP
temozolomide	1	SP
TRAZIMERA	2	SP
TRUQAP	3	SP
VERZENIO	3	SP
VITRAKVI	3	SP
XTANDI	3	SP
ZEJULA	2	SP
ZELBORAF	3	SP
ZIRABEV	2	SP
Antiparasitics		
ARAKODA	3	
atovaquone-proguanil hcl	1	
EMVERM	2	
hydroxychloroquine sulfate oral	1	
Antiparkinson Agents		
benztropine mesylate oral	1	
carbidopa-levodopa oral tablet	1	
CREXONT	3	
INBRIJA	3	SP
NEUPRO	3	
ONGENTYS	3	

Drug Name	Drug Tier	Notes
pramipexole dihydrochloride	1	
ropinirole hcl	1	
RYTARY	3	
Antiplatelets		
BRILINTA	2	
clopidogrel bisulfate oral	1	
prasugrel hcl	1	
Antipsychotics - Drugs for Mood Disorders		
ABILIFY ASIMTUFII	3	
ABILIFY MAINTENA	3	
aripiprazole oral tablet	1	
ARISTADA	3	
ARISTADA INITIO	3	
INVEGA HAFYERA	3	
INVEGA SUSTENNA	3	
INVEGA TRINZA	3	
lurasidone hcl	1	
LYBALVI	3	
olanzapine oral tablet	1	
PERSERIS	3	
quetiapine fumarate	1	
quetiapine fumarate er	1	
REXULTI	3	
risperidone oral tablet	1	
RYKINDO	3	
UZEDY	3	
VRAYLAR	3	
ziprasidone hcl	1	
Antivirals		
acyclovir external ointment	1	
acyclovir oral capsule	1	
acyclovir oral tablet	1	
BIKTARVY	3	
CIMDUO	2	

Drug Name	Drug Tier	Notes
DESCOVY	3	
DOVATO	2	
emtricitabine-tenofovir df	1	
EPCLUSA	2	PA; SP; QL
HARVONI	2	PA; SP; QL
JULUCA	2	
MAVYRET	2	PA; SP; QL
oseltamivir phosphate oral	1	
PAXLOVID (150/100)	2	
PAXLOVID (300/100)	2	
PREZCOBIX	2	
SYMFI	2	
SYMFI LO	2	
SYMTUZA	3	
TRIUMEQ	2	
valacyclovir hcl oral	1	
VOSEVI	2	PA; SP; QL
XOFLUZA (40 MG DOSE)	3	
XOFLUZA (80 MG DOSE)	3	
Anxiolytics - Drugs for Anxiety		
alprazolam oral tablet	1	
buspirone hcl oral	1	
clonazepam oral	1	
diazepam oral tablet	1	
hydroxyzine hcl oral	1	
hydroxyzine pamoate oral	1	
lorazepam oral tablet	1	
triazolam	1	
Bipolar Agents - Drugs for Mood Disorders		
lithium carbonate er	1	
lithium carbonate oral	1	

Drug Name	Drug Tier	Notes
Blood Products and Modifiers - Drugs for Blood Disorders		
ADVATE	2	SP
ADYNOVATE	3	SP
AFSTYLA	3	SP
ALPROLIX	3	SP
ALTUVIIIO	3	SP
ARANESP (ALBUMIN FREE)	2	SP
DOPTELET	3	SP
ELOCTATE	3	SP
EMPAVELI	3	SP
ESPEROCT	3	SP
FABHALTA	3	SP
IDELVION	3	SP
JIVI	3	SP
KOATE	2	SP
KOGENATE FS	2	SP
KOVALTRY	2	SP
NEULASTA	3	SP
NEULASTA ONPRO	3	SP
NIVESTYM	2	SP
NOVOEIGHT	2	SP
NUWIQ	2	SP
PROCRIT	2	SP
PROMACTA	3	SP
REBINYN	3	SP
RECOMBINATE	2	SP
RETACRIT	2	SP
SOLIRIS	3	SP
TAVALISSE	3	SP
tranexamic acid oral	1	
UDENYCA	3	SP
UDENYCA ONBODY	3	SP
ULTOMIRIS	3	SP
VOYDEYA	3	SP
WILATE	2	SP
XYNTHA	2	SP

Drug Name	Drug Tier	Notes
XYNTHA SOLOFUSE	2	SP
ZARXIO	2	SP
Cardiovascular Agents - Drugs for Heart and Circulation Conditions		
amiodarone hcl oral	1	
amlodipine besylate oral	1	
amlodipine besylate-benazepril hcl	1	
amlodipine besylate-valsartan	1	
amlodipine-olmesartan	1	
atenolol oral	1	
atenolol-chlorthalidone	1	
ATORVALIQ	3	
atorvastatin calcium oral	1	
benazepril hcl oral	1	
bisoprolol fumarate oral tablet 10 mg, 5 mg	1	
bisoprolol-hydrochlorothiazide	1	
bumetanide oral	1	
candesartan cilexetil	1	
cartia xt	1	
carvedilol	1	
chlorthalidone	1	
clonidine hcl oral	1	
CORLANOR	3	
diltiazem hcl er coated beads	1	
doxazosin mesylate oral	1	
EDARBI	3	
EDARBYCLOR	3	
enalapril maleate oral tablet	1	
ENTRESTO	2	
ezetimibe	1	

Drug Name	Drug Tier	Notes
fenofibrate micronized	1	
fenofibrate oral capsule 134 mg, 200 mg, 67 mg	1	
fenofibrate oral tablet	1	
flecainide acetate	1	
FUROSCIX	3	
furosemide oral tablet	1	
gemfibrozil oral	1	
guanfacine hcl	1	
HEMANGEOL	3	
hydralazine hcl oral	1	
hydrochlorothiazide oral	1	
icosapent ethyl	1	
irbesartan	1	
irbesartan- hydrochlorothiazide	1	
isosorbide mononitrate er	1	
labetalol hcl oral	1	
lisinopril oral	1	
lisinopril- hydrochlorothiazide	1	
LIVALO	3	
losartan potassium oral	1	
losartan potassium-hctz	1	
lovastatin oral	1	
metoprolol succinate er	1	
metoprolol tartrate oral	1	
minoxidil oral	1	
MULTAQ	3	
nadolol oral	1	
nebivolol hcl	1	
NEXLETOL	2	
NEXLIZET	2	
nifedipine er	1	
nifedipine er osmotic release	1	
nitroglycerin sublingual	1	
NORLIQVA	3	

Drug Name	Drug Tier	Notes
olmesartan medoxomil oral	1	
olmesartan medoxomil- hctz	1	
omega-3-acid ethyl esters	1	
pravastatin sodium	1	
prazosin hcl oral	1	
propranolol hcl er	1	
propranolol hcl oral tablet	1	
ramipril	1	
ranolazine er	1	
REPATHA	2	SP
REPATHA PUSHTRONEX SYSTEM	2	SP
REPATHA SURECLICK	2	SP
rosuvastatin calcium oral	1	
simvastatin oral	1	
SOAANZ	3	
sotalol hcl oral	1	
spironolactone oral tablet	1	
TEKTURNIA	2	
telmisartan	1	
toremide	1	
triamterene-hctz	1	
valsartan oral tablet	1	
valsartan- hydrochlorothiazide	1	
VASCEPA	2	
verapamil hcl er oral tablet extended release	1	
VERQUVO	3	

Drug Name	Drug Tier	Notes
Central Nervous System Agents - Drugs for Attention Deficit Disorder		
amphetamine-dextroamphetamine	1	
amphetamine-dextroamphetamine er	1	
amphet-dextroamphet 3-bead er	1	
atomoxetine hcl	1	
AZSTARYS	3	
dexmethylphenidate hcl	1	
dexmethylphenidate hcl er	1	
dextroamphetamine sulfate oral tablet	1	
guanfacine hcl er	1	
JORNAY PM	3	
lisdexamfetamine dimesylate	1	
methylphenidate hcl er	1	
methylphenidate hcl er (cd)	1	
methylphenidate hcl er (la)	1	
methylphenidate hcl er (osm) oral tablet extended release 18 mg, 27 mg, 36 mg, 54 mg, 72 mg	1	
methylphenidate hcl er (xr)	1	
methylphenidate hcl oral tablet	1	
MYDAYIS	3	
VYVANSE ORAL CAPSULE	3	
Central Nervous System Agents - Drugs for Multiple Sclerosis		
AVONEX PEN	2	PA; SP; QL

Drug Name	Drug Tier	Notes
AVONEX PREFILLED	2	PA; SP; QL
BAFIERTAM	2	PA; SP; QL
BETASERON	2	PA; SP; QL
COPAXONE SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 40 MG/ML	2	PA; SP; QL
dalfampridine er	1	SP
dimethyl fumarate oral	1	PA; SP; QL
glatiramer acetate	1	PA; SP; QL
glatopa	1	PA; SP; QL
KESIMPTA	2	PA; SP; QL
MAVENCLAD	3	PA; SP; QL
MAYZENT	3	PA; SP; QL
MAYZENT STARTER PACK	3	PA; SP; QL
REBIF	3	PA; SP; QL
REBIF REBIDOSE	3	PA; SP; QL
REBIF REBIDOSE TITRATION PACK	3	PA; SP; QL
REBIF TITRATION PACK	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
Central Nervous System Agents - Miscellaneous		
AUSTEDO	3	SP
AUSTEDO XR	3	SP
AUSTEDO XR PATIENT TITRATION	3	SP
GRALISE	3	
HORIZANT	3	
INGREZZA	3	SP
phentermine hcl oral	E	
pregabalin oral capsule	1	

Drug Name	Drug Tier	Notes
QSYMIA	E	
RADICAVA ORS	2	SP
RADICAVA ORS STARTER KIT	2	SP
SAXENDA	E	
TEGLUTIK	2	
VYLEESI	3	
WAINUA	3	SP
WEGOVY	E	
ZEPBOUND SUBCUTANEOUS SOLUTION AUTO-INJECTOR	E	
Dental and Oral Agents - Drugs for Mouth and Throat Conditions		
chlorhexidine gluconate mouth/throat	1	
lidocaine hcl mouth/throat	1	
lidocaine viscous hcl	1	
periogard	1	
Dermatological Agents - Drugs for Skin Conditions		
ABSORICA	3	
ABSORICA LD	3	
acutane	1	
adapalene-benzoyl peroxide external gel	1	
ADBRY	2	SP
AKLIEF	3	
ala-cort	1	
amnestem oral capsule 10 mg, 20 mg, 40 mg	1	
AMZEEQ	3	
azelaic acid external	1	
betamethasone dipropionate external	1	
CIBINQO	2	SP

Drug Name	Drug Tier	Notes
claravis	1	
clindacin etz external swab	1	
clindacin-p	1	
clindamycin phosphate-benzoyl peroxide	1	
clindamycin phosphate external lotion	1	
clindamycin phosphate external solution	1	
clindamycin phosphate external swab	1	
clobetasol propionate external cream 0.05 %	1	
clobetasol propionate external foam	1	
clobetasol propionate external ointment	1	
clobetasol propionate external shampoo	1	
clobetasol propionate external solution	1	
clodan	1	
desonide external cream	1	
desonide external ointment	1	
DUPIXENT	2	SP; QL
EBGLYSS	2	SP
ENSTILAR	3	
EPIDUO FORTE	3	
EUCRISA	2	
FINACEA EXTERNAL FOAM	3	
finasteride oral tablet 1 mg	E	
fluocinonide external cream	1	
fluocinonide external ointment	1	
fluocinonide external solution	1	

Drug Name	Drug Tier	Notes
fluorouracil external cream	1	
fluticasone propionate external cream	1	
hydrocortisone cream 1 % external (otc)	E	
hydrocortisone cream 1 % external (rx)	1	
hydrocortisone external cream 2.5 %	1	
hydrocortisone external ointment 1 %, 2.5 %	1	
HYFTOR	3	
imiquimod external	1	
imiquimod pump	1	
isotretinoin oral	1	
KLISYRI (250 MG)	3	
KLISYRI (350 MG)	3	
LITFULO	3	PA; SP; QL
metronidazole external cream	1	
metronidazole external gel	1	
MIRVASO	2	
mometasone furoate external	1	
neuac	1	
ONEXTON	3	ST
OPZELURA	2	SP; QL
pimecrolimus	1	
QBREXZA	3	
RETIN-A MICRO PUMP EXTERNAL GEL 0.06 %, 0.08 %	3	
SANTYL	3	
SOFDRA	3	
SOOLANTRA	3	
TACLONEX	3	
tacrolimus external	1	
tretinoin external	1	

Drug Name	Drug Tier	Notes
triamcinolone acetonide external cream	1	
triamcinolone acetonide external lotion	1	
triamcinolone acetonide external ointment	1	
triamcinolone in absorbbase	1	
triderm	1	
TWYNEO	3	
VTAMA	2	
WINLEVI	3	
WYNZORA	3	
YCANTH	3	
zenatane	1	
ZILXI	3	ST
ZORYVE EXTERNAL CREAM 0.15 %	2	ST
ZORYVE EXTERNAL CREAM 0.3 %	2	PA
Diabetes - Antidiabetic Agents		
DAPAGLIFLOZIN PRO-METFORMIN ER	3	PA
DAPAGLIFLOZIN PROPANEDIOL	3	PA
FARXIGA	2	
glimepiride	1	
glipizide er	1	
glipizide ir	1	
glyburide oral	1	
GLYXAMBI	2	
JANUMET	2	
JANUMET XR	2	
JANUVIA	2	
JARDIANCE	2	
JENTADUETO	2	
JENTADUETO XR	2	
metformin hcl er	1	
metformin hcl er (mod)	1	

Drug Name	Drug Tier	Notes
metformin hcl er (osm)	1	
metformin hcl oral tablet	1	
MOUNJARO	2	PA; QL
OZEMPIC	2	PA; QL
pioglitazone hcl	1	
RYBELSUS	2	PA; QL
SOLIQUA	2	
SYMLINPEN 120	3	
SYMLINPEN 60	3	
SYNJARDY	2	
SYNJARDY XR	2	
TRADJENTA	2	
TRIJARDY XR	2	
TRULICITY	2	PA; QL
XIGDUO XR	2	
Diabetes - Glucose Monitoring		
ACCU-CHEK FASTCLIX LANCET KIT	2	
ACCU-CHEK SOFTCLIX LANCET DEVICE KIT	2	
CEQUR SIMPLICITY 2U 10PK	2	
CEQUR SIMPLICITY INSERTER	2	
CONTOUR NEXT EZ KIT W/DEVICE	2	
CONTOUR NEXT GEN MONITOR	2	
CONTOUR NEXT MONITOR KIT W/DEVICE	2	
CONTOUR NEXT ONE KIT	2	
CONTOUR NEXT GEN TEST STRIPS	2	
CONTOUR PLUS BLUE KIT W/DEVICE	2	

Drug Name	Drug Tier	Notes
CONTOUR PLUS TEST STRIP	2	
CONTOUR TEST STRIPS	2	
DEXCOM G6 RECEIVER	2	
DEXCOM G6 SENSOR	2	
DEXCOM G6 TRANSMITTER	2	
DEXCOM G7 RECEIVER	2	
DEXCOM G7 SENSOR	2	
ENLITE GLUCOSE SENSOR	3	
EVERSENSE 365 SENSOR/HOLDER	3	
EVERSENSE 365 SMART TRANSMIT	3	
EVERSENSE SENSOR/HOLDER	3	
EVERSENSE SMART TRANSMITTER	3	
FREESTYLE LIBRE 14 DAY READER	2	
FREESTYLE LIBRE 14 DAY SENSOR	2	
FREESTYLE LIBRE 2 PLUS SENSOR	2	
FREESTYLE LIBRE 2 READER	2	
FREESTYLE LIBRE 2 SENSOR	2	
FREESTYLE LIBRE 3 PLUS SENSOR	2	
FREESTYLE LIBRE 3 READER	2	
FREESTYLE LIBRE 3 SENSOR	2	
GUARDIAN 4 GLUCOSE SENSOR	3	
GUARDIAN 4 TRANSMITTER	3	

Drug Name	Drug Tier	Notes
GUARDIAN LINK 3 TRANSMITTER	3	
GUARDIAN SENSOR 3	3	
ONETOUCH ULTRA TEST STRIPS	2	
ONETOUCH ULTRA 2 KIT W/DEVICE	2	
ONETOUCH ULTRA BLUE TEST	2	
ONETOUCH ULTRA TEST STRIPS	2	
ONETOUCH VERIO FLEX SYSTEM DEVICE	3	
ONETOUCH VERIO FLEX SYSTEM KIT	2	
ONETOUCH VERIO REFLECT KIT W/DEVICE	2	
ONETOUCH VERIO TEST STRIPS	2	
ONETOUCH VERIO TEST STRIPS	3	
Diabetes - Glycemic Agents		
BAQSIMI ONE PACK	2	
BAQSIMI TWO PACK	2	
GLUCAGON EMERGENCY KIT INJECTION SOLUTION RECONSTITUTED	2	
ZEGALOGUE	2	
Diabetes - Insulins		
ADMELOG	3	ST
ADMELOG SOLOSTAR	3	ST
APIDRA SOLOSTAR SOLUTION PEN-INJECTOR 100 UNIT/ML SUBCUTANEOUS	3	ST

Drug Name	Drug Tier	Notes
APIDRA SOLOSTAR SOLUTION PEN-INJECTOR 100 UNIT/ML SUBCUTANEOUS	3	
APIDRA VIAL	3	ST
BASAGLAR KWIKPEN SOLUTION PEN-INJECTOR 100 UNIT/ML SUBCUTANEOUS	3	
BASAGLAR KWIKPEN SOLUTION PEN-INJECTOR 100 UNIT/ML SUBCUTANEOUS	3	ST
BASAGLAR TEMPO PEN	3	ST
BD ULTRA-FINE INSULIN SYRINGES 31G X 5/16" 0.3 ML	2	
FIASP	3	ST
FIASP FLEXTOUCH	3	ST
FIASP PENFILL	3	ST
HUMALOG	2	
HUMALOG KWIKPEN	2	
HUMALOG MIX 50/50 KWIKPEN	2	
HUMALOG MIX 75/25 KWIKPEN	2	
HUMALOG MIX 75/25 VIAL	2	
HUMALOG TEMPO PEN	3	ST
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	

Drug Name	Drug Tier	Notes
HUMULIN R U-500 VIAL	2	
HUMULIN R VIAL	2	
INSULIN ASPART	2	PA
INSULIN ASPART FLEXPEN	2	PA
INSULIN DEGLUDEC FLEXTouch	3	PA
INSULIN GLARGINE MAX SOLOSTAR	3	PA
INSULIN GLARGINE SOLOSTAR SUBCUTANEOUS SOLUTION PEN-INJECTOR 300 UNIT/ML	3	PA
INSULIN LISPRO	2	
INSULIN LISPRO (1 UNIT DIAL)	2	
INSULIN LISPRO JUNIOR KWIKPEN	2	
INSULIN LISPRO PROT & LISPRO	2	
LANTUS SOLOSTAR	2	
LANTUS U-100 VIAL	2	
LYUMJEV KWIKPEN	2	
LYUMJEV VIAL	2	
NOVOLIN 70/30 FLEXPEN	3	
NOVOLIN 70/30 FLEXPEN RELION	2	
NOVOLIN 70/30 VIAL	3	
NOVOLIN N FLEXPEN	3	
NOVOLIN N FLEXPEN RELION	2	
NOVOLIN N VIAL	3	
NOVOLIN R FLEXPEN	3	
NOVOLIN R FLEXPEN RELION SOLUTION PEN-INJECTOR 100 UNIT/ML INJECTION	2	

Drug Name	Drug Tier	Notes
NOVOLIN R FLEXPEN RELION SOLUTION PEN-INJECTOR 100 UNIT/ML INJECTION	3	
NOVOLIN R VIAL	3	
NOVOLOG FLEXPEN	3	
NOVOLOG FLEXPEN RELION SOLUTION PEN-INJECTOR 100 UNIT/ML SUBCUTANEOUS	3	PA
NOVOLOG FLEXPEN RELION SOLUTION PEN-INJECTOR 100 UNIT/ML SUBCUTANEOUS	3	PA; ST
NOVOLOG MIX 70/30 FLEXPEN	3	
NOVOLOG MIX 70/30 VIAL	3	
NOVOLOG PENFILL	3	
NOVOLOG RELION	3	PA
NOVOLOG U-100 VIAL	3	
REZVOGLAR KWIKPEN SOLUTION PEN-INJECTOR 100 UNIT/ML SUBCUTANEOUS	3	
REZVOGLAR KWIKPEN SOLUTION PEN-INJECTOR 100 UNIT/ML SUBCUTANEOUS	3	ST
TOUJEO MAX SOLOSTAR	2	
TOUJEO SOLOSTAR	2	
TRESIBA	2	
TRESIBA FLEXTouch	2	
Electrolytes / Minerals / Metals / Vitamins		
ACCRUFER	3	
cyanocobalamin injection solution 1000 mcg/ml	1	

Drug Name	Drug Tier	Notes
cyanocobalamin nasal	1	
ergocalciferol oral capsule	1	
folic acid tablet 1 mg oral (otc)	E	
folic acid tablet 1 mg oral (rx)	1	
klor-con 10	1	
klor-con m10	1	
klor-con m15	1	
klor-con m20	1	
klor-con oral tablet extended release	1	
LOKELMA	3	
NASCOBAL	3	
potassium chloride crystal	1	
potassium chloride er	1	
potassium citrate er	1	
VELTASSA	3	
vitamin d (ergocalciferol) oral capsule 1.25 mg (50000 ut), 50000 unit	1	
Gastrointestinal Agents - Drugs for Acid Reflux and Ulcer		
dexlansoprazole	1	
esomeprazole magnesium capsule delayed release 20 mg oral (otc)	E	
esomeprazole magnesium capsule delayed release 20 mg oral (rx)	1	
esomeprazole magnesium oral capsule delayed release 40 mg	1	
famotidine oral suspension reconstituted	1	

Drug Name	Drug Tier	Notes
famotidine oral tablet 40 mg	1	
famotidine tablet 20 mg oral (otc)	E	
famotidine tablet 20 mg oral (rx)	1	
lansoprazole capsule delayed release 15 mg oral (otc)	E	
lansoprazole capsule delayed release 15 mg oral (rx)	1	
lansoprazole oral capsule delayed release 30 mg	1	
misoprostol oral	1	
omeprazole oral capsule delayed release	1	
pantoprazole sodium oral tablet delayed release	1	
rabeprazole sodium oral tablet delayed release	1	
sucralfate oral	1	
Gastrointestinal Agents - Drugs for Bowel, Intestine and Stomach Conditions		
CLENPIQ	3	
constulose	1	
dicyclomine hcl oral capsule	1	
dicyclomine hcl oral tablet	1	
diphenoxylate-atropine oral tablet	1	
gavilyte-c	1	
gavilyte-g	1	
gavilyte-n with flavor pack	1	
glycopyrrolate oral tablet 1 mg, 2 mg	1	

Drug Name	Drug Tier	Notes
IQIRVO	3	SP
lactulose oral solution	1	
LINZESS	2	ST; QL
LIVDELZI	3	SP
lubiprostone	1	
MOVANTIK	2	ST; QL
na sulfate-k sulfate-mg sulf	1	
OMECLAMOX-PAK	2	
peg 3350-kcl-na bicarb-nacl	1	
peg-3350/electrolytes	1	
PYLERA	3	
REBYOTA	3	SP
SUFLAVE	3	
SUPREP BOWEL PREP KIT	3	
SUTAB	3	
SYMPROIC	2	ST; QL
TALICIA	3	
VIBERZI	3	
VOQUEZNA DUAL PAK	3	
VOQUEZNA TRIPLE PAK	3	
Genetic or Enzyme Disorder - Drugs for Replacement, Modification, Treatment		
CERDELGA	3	SP
CREON	2	
FABRAZYME	2	SP
ORFADIN	3	SP
PANCREAZE	3	ST
PERTZYE	3	ST
PHEBURANE	3	SP
STRENSIQ	2	SP
ZENPEP	2	
ZOLGENSMA	E	SP

Drug Name	Drug Tier	Notes
Genitourinary Agents - Drugs for Bladder, Genital and Kidney Conditions		
AURYXIA	3	
DEPEN TITRATABS	2	SP
mirabegron er	1	
MYRBETRIQ	2	
oxybutynin chloride er	1	
oxybutynin chloride oral tablet	1	
phenazopyridine hcl oral tablet 100 mg, 200 mg	1	
sildenafil citrate oral tablet 100 mg, 25 mg, 50 mg	E	
solifenacin succinate	1	
STENDRA	E	
tadalafil oral tablet 10 mg, 20 mg	E	
tadalafil oral tablet 2.5 mg, 5 mg	1	PA
THIOLA	3	SP
THIOLA EC	3	SP
tolterodine tartrate er	1	
Genitourinary Agents - Drugs for Prostate Conditions		
alfuzosin hcl er	1	
dutasteride oral	1	
finasteride oral tablet 5 mg	1	
tamsulosin hcl	1	
Hormonal Agents - Adrenal		
dexamethasone oral tablet	1	
fludrocortisone acetate oral	1	
hydrocortisone oral	1	

Drug Name	Drug Tier	Notes
methylprednisolone oral	1	
prednisolone oral solution	1	
prednisolone sodium phosphate oral solution	1	
prednisone oral tablet	1	
prednisone oral tablet therapy pack	1	
Hormonal Agents - Men's Health		
testosterone cypionate intramuscular	1	
testosterone transdermal gel	1	
XYOSTED	3	
Hormonal Agents - Pituitary		
ACTHAR	2	SP
ACTHAR GEL	2	SP
cabergoline	1	
CORTROPHIN	2	SP
desmopressin acetate oral	1	
FOLLISTIM AQ	E	SP
ganirelix acetate	E	SP
LUPRON DEPOT (1-MONTH) INTRAMUSCULAR KIT 7.5 MG	2	SP
LUPRON DEPOT (3-MONTH) INTRAMUSCULAR KIT 22.5 MG	2	SP
LUPRON DEPOT (4-MONTH) INTRAMUSCULAR KIT 30MG	2	SP
LUPRON DEPOT (6-MONTH) INTRAMUSCULAR KIT 45MG	2	SP
NGENLA	3	PA; SP

Drug Name	Drug Tier	Notes
NOC DURNA	3	
NORDITROPIN FLEXPPO	2	PA; SP
NUTROPIN AQ NUSPIN 10	3	PA; SP
NUTROPIN AQ NUSPIN 20	3	PA; SP
NUTROPIN AQ NUSPIN 5	3	PA; SP
OMNITROPE	2	PA; SP
ORILISSA	2	
OVIDREL	E	SP
SKYTROFA	3	PA; SP
SOMATULINE DEPOT SUBCUTANEOUS SOLUTION 60 MG/0.2ML, 90 MG/0.3ML	3	SP
SUPPRELIN LA	2	SP
TRIPTODUR	2	SP
Hormonal Agents - Selective Estrogen Receptor Modifying Agents		
OSPHENA	3	
Hormonal Agents - Sex Hormones and Birth Control		
afirmelle	1	
altavera	1	
ANNOVERA	3	
apri	1	
aubra eq	1	
aurovela 1.5/30	1	
aurovela 1/20	1	
aurovela 24 fe	1	
aurovela fe 1.5/30	1	
aurovela fe 1/20	1	
aviane	1	
ayuna	1	
BALCOLTRA	3	

Drug Name	Drug Tier	Notes
BIJUVA	3	
blisovi 24 fe	1	
blisovi fe 1.5/30	1	
blisovi fe 1/20	1	
camila	1	
chateal eq	1	
CLIMARA PRO	2	
cyred eq	1	
deblitane	1	
delyla	1	
DIVIGEL	3	
dotti	1	
drospirenone-ethinyl estradiol	1	
DUAVEE	2	
ELESTRIN	3	
eluryng	1	
emzahh	1	
ENDOMETRIN	2	
enilloring	1	
enskyce	1	
errin	1	
estarylla	1	
estradiol oral	1	
estradiol transdermal	1	
estradiol vaginal	1	
estradiol-norethindrone acet	1	
ESTROGEL	3	
etonogestrel-ethinyl estradiol	1	
EVAMIST	3	
falmina	1	
gallifrey	1	
hailey 1.5/30	1	
hailey 24 fe	1	
hailey fe 1.5/30	1	
hailey fe 1/20	1	
haloette	1	

Drug Name	Drug Tier	Notes
heather	1	
IMVEXXY MAINTENANCE PACK	2	
IMVEXXY STARTER PACK	2	
incassia	1	
isibloom	1	
jasmiel	1	
jencycla	1	
juleber	1	
junel 1.5/30	1	
junel 1/20	1	
junel fe 1.5/30	1	
junel fe 1/20	1	
junel fe 24	1	
kalliga	1	
kurvelo	1	
larin 1.5/30	1	
larin 1/20	1	
larin 24 fe	1	
larin fe 1.5/30	1	
larin fe 1/20	1	
lessina	1	
levonorgestrel-ethinyl estradiol oral tablet 0.1-20 mg-mcg, 0.15-30 mg- mcg	1	
levora 0.15/30 (28)	1	
LO LOESTRIN FE	3	
loryna	1	
lo-zumandimine	1	
luteria	1	
lyleq	1	
lyllana	1	
lyza	1	
marlissa	1	
medroxyprogesterone acetate	1	
microgestin 1.5/30	1	
microgestin 1/20	1	

Drug Name	Drug Tier	Notes
microgestin fe 1.5/30	1	
microgestin fe 1/20	1	
mili	1	
mimvey	1	
MIRENA (52 MG)	3	
mono-lynyah	1	
MYFEMBREE	2	
NATAZIA	2	
NEXTSTELLIS	3	
nikki	1	
nora-be	1	
norelgestromin-eth estradiol	1	
norethin ace-eth estrad-fe oral tablet	1	
norethindrone acetate oral	1	
norethindrone acet-ethinyl est	1	
norethindrone oral	1	
norgestimate-eth estradiol oral tablet 0.25-35 mg-mcg	1	
norgestimate-ethinyl estradiol triphasic	1	
norlyroc	1	
ocella	1	
ORIAHNN	2	
portia-28	1	
PREMARIN ORAL	2	
PREMARIN VAGINAL	2	
PREMPHASE	2	
PREMPRO	2	
progesterone intramuscular	1	
progesterone oral	1	
reclipsen	1	
sharobel	1	
SLYND	3	
sprintec 28	1	

Drug Name	Drug Tier	Notes
sronyx	1	
syeda	1	
tarina 24 fe	1	
tarina fe 1/20 eq	1	
tri-estarylla	1	
tri-lynyah	1	
tri-lo-estarylla	1	
tri-lo-marzia	1	
tri-lo-mili	1	
tri-lo-sprintec	1	
tri-mili	1	
tri-sprintec	1	
tri-vylibra	1	
tri-vylibra lo	1	
vestura	1	
vienva	1	
vylibra	1	
xulane	1	
yuvaferm	1	
zafemy	1	
zumandimine	1	
Hormonal Agents - Thyroid		
ADTHYZA	3	
ARMOUR THYROID	3	
ERMEZA	3	
euthyrox	1	
levo-t	1	
levothyroxine sodium oral tablet	1	
levoxyl	1	
liothyronine sodium oral	1	
methimazole oral	1	
NIVA THYROID	3	
SYNTHROID	3	
TIROSINT	3	
TIROSINT-SOL	3	
unithroid	1	

Drug Name	Drug Tier	Notes
Immunological Agents - Drugs for Immune System Stimulation or Suppression		
ACTEMRA	3	PA; SP; QL
ACTEMRA ACTPEN	3	PA; SP; QL
ADALIMUMAB-ADBM	3	PA; SP
ADALIMUMAB-ADAZ SUBCUTANEOUS SOLUTION AUTO-INJECTOR	3	PA; SP; QL
ADALIMUMAB-ADAZ SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 20 MG/0.2ML, 40 MG/0.4ML	3	PA; SP; QL
AMJEVITA for NUVAILA SOLUTION AUTO-INJECTOR 40 MG/0.4ML	2	PA; SP; QL
AMJEVITA for AMGEN SOLUTION AUTO-INJECTOR 40 MG/0.4ML	3	PA; SP; QL
AMJEVITA for NUVAILA SOLUTION AUTO-INJECTOR 80 MG/0.8ML	2	PA; SP; QL
AMJEVITA for AMGEN SOLUTION AUTO-INJECTOR 80 MG/0.8ML	3	PA; SP; QL
AMJEVITA for NUVAILA SOLUTION PREFILLED SYRINGE 40 MG/0.4ML	2	PA; SP; QL
AMJEVITA for AMGEN SOLUTION PREFILLED SYRINGE 40 MG/0.4ML	3	PA; SP; QL
AMJEVITA for AMGEN SOLUTION AUTO-INJECTOR 40 MG/0.8ML	3	PA; SP; QL

Drug Name	Drug Tier	Notes
AMJEVITA for AMGEN SOLUTION PREFILLED SYRINGE 40 MG/0.8ML	3	PA; SP; QL
AMJEVITA for AMGEN 10KG TO <15KG SOLUTION PREFILLED SYRINGE 10MG/0.2ML	2	PA; SP; QL
AMJEVITA for NUVAILA 15KG TO <30KG SOLUTION PREFILLED SYRINGE 20 MG/0.2ML	2	PA; SP; QL
AMJEVITA for AMGEN 15KG TO <30KG SOLUTION PREFILLED SYRINGE 20 MG/0.2ML	3	PA; SP; QL
AMJEVITA for AMGEN 15KG TO <30KG SOLUTION PREFILLED SYRINGE 20 MG/0.4ML	3	PA; SP; QL
AVSOLA	2	PA; SP
azathioprine oral	1	
BENLYSTA	3	SP
BIMZELX	3	PA; SP; QL
BIVIGAM	3	SP
CIMZIA	2	PA; SP; QL
CIMZIA (2 SYRINGE)	2	PA; SP; QL
CIMZIA-STARTER	2	PA; SP; QL
COSENTYX (300 MG DOSE)	3	PA; SP; QL
COSENTYX 150 MG/ML INTRAVENOUS SOLUTION 125 MG/5ML	3	PA; SP

Drug Name	Drug Tier	Notes
COSENTYX 150 MG/ML SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 150 MG/ML, 75 MG/0.5ML	3	PA; SP; QL
COSENTYX SENSOREADY (300 MG)	3	PA; SP; QL
COSENTYX SENSOREADY PEN	3	PA; SP; QL
COSENTYX UNOREADY	3	PA; SP; QL
CUTAQUIG	3	SP
ENBREL	2	PA; SP; QL
ENBREL MINI	2	PA; SP; QL
ENBREL SURECLICK	2	PA; SP; QL
ENTYVIO PEN	3	PA; SP; QL
HADLIMA	3	PA; SP
HAEGARDA	3	SP
HIZENTRA	3	SP
HUMIRA (2 PEN)	3	PA; SP; QL
HUMIRA (2 SYRINGE)	3	PA; SP; QL
HUMIRA-CD/UC/HS STARTER	3	PA; SP; QL
HUMIRA-PSORIASIS/UEIT STARTER	3	PA; SP; QL
HYRIMOZ SUBCUTANEOUS SOLUTION AUTO-INJECTOR	3	PA; SP; QL
HYRIMOZ SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 20 MG/0.2ML, 40 MG/0.4ML, 40 MG/0.8ML	3	PA; SP; QL
HYRIMOZ-CROHNS/UC STARTER	3	PA; SP; QL
HYRIMOZ-PED<40KG CROHN STARTER	3	PA; SP; QL

Drug Name	Drug Tier	Notes
HYRIMOZ-PED>=40KG CROHN START	3	PA; SP; QL
HYRIMOZ-PLAQ PSOR/UEIT START	3	PA; SP; QL
HYRIMOZ-PLAQUE PSORIASIS START	3	PA; SP; QL
INFLECTRA	2	PA; SP
JYLAMVO	3	
leflunomide oral	1	
LUPKYNIS	3	SP
methotrexate sodium (pf)	1	
methotrexate sodium injection solution	1	
methotrexate sodium oral	1	
mycophenolate mofetil oral capsule	1	
mycophenolate mofetil oral tablet	1	
mycophenolate sodium	1	
mycophenolic acid	1	
MYHIBBIN	3	
OLUMIANT	3	PA; SP; QL
OMVOH	2	PA; SP; QL
ORENCIA	3	PA; SP; QL
ORENCIA CLICKJECT	3	PA; SP; QL
ORLADEYO	3	SP
OTEZLA	2	PA; SP; QL
PANZYGA	3	SP
PRIVIGEN	3	SP
RASUVO	2	
RINVOQ	2	PA; SP; QL
RINVOQ LQ	2	PA; SP; QL
RUCONEST	3	SP
SELARSDI	3	PA; SP; QL
SIMLANDI	3	PA; SP
SIMPONI	2	PA; SP; QL
SIMPONI ARIA	2	PA; SP; QL
SKYRIZI	2	PA; SP; QL
SKYRIZI PEN	2	PA; SP; QL

Drug Name	Drug Tier	Notes
SOTYKTU	2	PA; SP; QL
STELARA	3	PA; SP; QL
tacrolimus oral	1	
TAKHZYRO	3	SP
TALTZ	2	PA; SP; QL
TREMFYA INTRAVENOUS	2	PA; SP
TREMFYA SUBCUTANEOUS	2	PA; SP; QL
TREXALL	3	
VELSIPITY	2	PA; SP; QL
WEZLANA INTRAVENOUS	2	PA; SP; QL
WEZLANA SOLUTION 45 MG/0.5ML SUBCUTANEOUS	2	PA; SP; QL
WEZLANA SOLUTION 45 MG/0.5ML SUBCUTANEOUS	3	PA; SP; QL
WEZLANA SOLUTION PREFILLED SYRINGE 45 MG/0.5ML SUBCUTANEOUS	2	PA; SP; QL
WEZLANA SOLUTION PREFILLED SYRINGE 45 MG/0.5ML SUBCUTANEOUS	3	PA; SP; QL
WEZLANA SOLUTION PREFILLED SYRINGE 90 MG/ML SUBCUTANEOUS	2	PA; SP; QL
WEZLANA SOLUTION PREFILLED SYRINGE 90 MG/ML SUBCUTANEOUS	3	PA; SP; QL
XELJANZ	2	PA; SP; QL
XELJANZ XR	2	PA; SP; QL
XEMBIFY	3	SP
YESINTEK	3	PA; SP; QL
Inflammatory Bowel Disease Agents		
APRISO	2	
budesonide oral	1	
CORTIFOAM	3	

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Drug Name	Drug Tier	Notes
DIPENTUM	3	
hydrocortisone (perianal)	1	
mesalamine er oral capsule 0.375 gm	1	
mesalamine oral tablet delayed release	1	
PROCTOFOAM HC	2	
procto-med hc	1	
sulfasalazine oral	1	
UCERIS RECTAL	3	
Metabolic Bone Disease Agents		
PROLIA	2	SP
Metabolic Bone Disease Agents - Drugs for Osteoporosis		
alendronate sodium oral tablet	1	
ibandronate sodium oral	1	
TERIPARATIDE SUBCUTANEOUS SOLUTION PEN-INJECTOR 620 MCG/2.48ML	2	SP
TYMLOS	2	SP
Metabolic Bone Disease Agents - Other		
calcitriol oral capsule	1	
RAYALDEE	3	
Miscellaneous Therapeutic Agents		
BD ULTRA-FINE PEN NEEDLES	2	
BYLVAY	3	SP
BYLVAY (PELLETS)	3	SP
DUROLANE	2	PA; SP
DYSPORT	2	SP
ENDARI	3	

Drug Name	Drug Tier	Notes
EUFLEXXA	2	PA; SP
GELSYN-3	2	PA; SP
KERENDIA	3	
MYOBLOC	2	SP
NOVOFINE PEN NEEDLE	2	
NOVOFINE PLUS PEN NEEDLE	2	
OMNIPOD 5 DEXCOM INTRO KIT	2	
OMNIPOD 5 DEXCOM PODS	2	
OMNIPOD 5 LIBRE INTRO KIT	2	
OMNIPOD 5 LIBRE PODS	2	
OMNIPOD DASH INTRO KIT	2	
OMNIPOD DASH PODS	2	
VEOZAH	3	
V-GO 20	2	
V-GO 30	2	
V-GO 40	2	
XEOMIN	2	SP
YORVIPATH	3	SP
Ophthalmic Agents - Drugs for Eye Allergy, Infection and Inflammation		
AZASITE	3	
BESIVANCE	3	
ciprofloxacin hcl ophthalmic	1	
erythromycin ophthalmic	1	
EYSUVIS	3	
FLAREX	3	
INVELTYS	3	
ketorolac tromethamine ophthalmic	1	
LOTEMAX SM	3	

Drug Name	Drug Tier	Notes
moxifloxacin hcl (2x day)	1	
moxifloxacin hcl ophthalmic	1	
neomycin-polymyxin-dexameth	1	
ofloxacin ophthalmic	1	
prednisolone acetate ophthalmic	1	
TOBRADEX ST	3	
tobramycin ophthalmic	1	
tobramycin-dexamethasone	1	
Ophthalmic Agents - Drugs for Glaucoma		
acetazolamide oral	1	
ALPHAGAN P OPHTHALMIC SOLUTION 0.15 %	2	
BETIMOL	3	
brimonidine tartrate ophthalmic	1	
brimonidine tartrate-timolol	1	
dorzolamide hcl-timolol mal	1	
dorzolamide hcl-timolol mal pf	1	
latanoprost ophthalmic	1	
LUMIGAN	2	
RHOPRESSA	3	
ROCKLATAN	3	
SIMBRINZA	2	
timolol maleate (once-daily)	1	
timolol maleate ocudose	1	
timolol maleate ophthalmic solution	1	
timolol maleate pf	1	
ZIOPTAN	3	

Drug Name	Drug Tier	Notes
Ophthalmic Agents - Drugs for Miscellaneous Eye Conditions		
CEQUA	3	PA
cyclosporine ophthalmic	1	PA
MIEBO	2	PA
polymyxin b- trimethoprim	1	
RESTASIS	2	PA
RESTASIS MULTIDOSE	2	PA
TYRVAYA	3	
VERKAZIA	3	
XIIDRA	2	PA
ZYLET	3	
Otic Agents - Drugs for Ear Conditions		
ciprofloxacin- dexamethasone	1	
neomycin-polymyxin-hc otic	1	
ofloxacin otic	1	
Respiratory Tract / Pulmonary Agents - Drugs for Allergies, Cough, Cold		
azelastine hcl nasal	1	
azelastine-fluticasone	1	
benzonatate	1	
bromphen-pseudoeph- dm	1	
cetirizine hcl oral solution	1	
cyproheptadine hcl oral tablet	1	
DYMISTA	2	
fluticasone propionate suspension 50 mcg/act nasal (otc)	E	

Drug Name	Drug Tier	Notes
fluticasone propionate suspension 50 mcg/act nasal (rx)	1	
ipratropium bromide nasal	1	
levocetirizine dihydrochloride tablet 5 mg oral (otc)	E	
levocetirizine dihydrochloride tablet 5 mg oral (rx)	1	
mometasone furoate suspension 50 mcg/act nasal (otc)	E	
mometasone furoate suspension 50 mcg/act nasal (rx)	1	
OMNARIS	3	
promethazine-dm	1	
pseudoephedrine- bromphen-dm	1	
QNASL	3	
QNASL CHILDRENS	3	
RYALTRIS	3	
XHANCE	3	
Respiratory Tract / Pulmonary Agents - Drugs for Asthma and Other Lung Conditions		
ADVAIR HFA	2	
AIRSUPRA	2	
albuterol sulfate hfa	1	
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	
albuterol sulfate nebulization solution (5 mg/ml) 0.5% inhalation	1	

Drug Name	Drug Tier	Notes
ALBUTEROL SULFATE NEBULIZATION SOLUTION (5 MG/ML) 0.5% INHALATION	2	
ALVESCO	3	ST; QL
ANORO ELLIPTA	2	
ARNUITY ELLIPTA	2	
ATROVENT HFA	3	
AUVI-Q	3	
BREO ELLIPTA	2	
brey-na	1	
BREZTRI AEROSPHERE	2	
budesonide inhalation	1	
budesonide-formoterol fumarate	1	
COMBIVENT RESPIMAT	2	
epinephrine injection solution auto-injector	1	
EPIPEN 2-PAK	3	
EPIPEN JR 2-PAK	3	
FASENRA PEN	2	SP; QL
FASENRA SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 10 MG/0.5ML	2	SP
FASENRA SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 30 MG/ML	2	SP; QL
FLUTICASONE FUROATE- VILANTEROL	2	PA; QL
FLUTICASONE PROPIONATE HFA	3	ST; QL
FLUTICASONE- SALMETEROL INHALATION AEROSOL	2	PA; QL

Drug Name	Drug Tier	Notes
fluticasone-salmeterol inhalation aerosol powder breath activated 100-50 mcg/act, 250-50 mcg/act, 500-50 mcg/act	1	
ipratropium bromide inhalation	1	
ipratropium-albuterol inhalation solution 0.5- 2.5 (3) mg/3ml	1	
montelukast sodium oral tablet	1	
montelukast sodium oral tablet chewable	1	
NEFFY NASAL SOLUTION 2 MG/0.1ML	3	
NUCALA	2	SP; QL
OFEV	3	SP
PERFOROMIST	3	
QVAR REDHALER	2	
SEREVENT DISKUS	2	
SPIRIVA HANDHALER	3	ST; QL
SPIRIVA RESPIMAT	2	
STIOLTO RESPIMAT	2	
STRIVERDI RESPIMAT	2	
SYMBICORT	3	ST; QL
TEZSPIRE	2	SP
tiotropium bromide monohydrate	1	
TRELEGY ELLIPTA	2	
wixela inhub	1	
XOLAIR SUBCUTANEOUS SOLUTION AUTO- INJECTOR	2	SP

Drug Name	Drug Tier	Notes
XOLAIR SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 150 MG/ML, 75 MG/0.5ML	2	SP; QL
XOLAIR SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 300 MG/2ML	2	SP
XOLAIR SUBCUTANEOUS SOLUTION RECONSTITUTED	2	SP; QL
YUPELRI	3	
Respiratory Tract / Pulmonary Agents - Drugs for Cystic Fibrosis		
BRONCHITOL	3	SP
BRONCHITOL TOLERANCE TEST	3	SP
PULMOZYME	2	SP
TOBI PODHALER	3	SP
TRIKAFTA	3	SP
Respiratory Tract / Pulmonary Agents - Drugs for Pulmonary Hypertension		
ADEMPAS	2	SP
OPSUMIT	2	SP
ORENITRAM	3	SP
ORENITRAM MONTH 1	3	SP
ORENITRAM MONTH 2	3	SP
ORENITRAM MONTH 3	3	SP
sildenafil citrate oral suspension reconstituted	1	SP
sildenafil citrate oral tablet 20 mg	1	SP

Drug Name	Drug Tier	Notes
TADLIQ	3	SP
treprostinil	1	SP
TYVASO	3	SP
TYVASO DPI INSTITUTIONAL KIT	3	SP
TYVASO DPI MAINTENANCE KIT	3	SP
TYVASO DPI TITRATION KIT	3	SP
TYVASO REFILL KIT	3	SP
TYVASO STARTER KIT	3	SP
Skeletal Muscle Relaxants - Drugs for Muscle Pain and Spasm		
baclofen oral tablet	1	
carisoprodol oral	1	
cyclobenzaprine hcl oral	1	
methocarbamol oral	1	
tizanidine hcl oral	1	
Sleep Disorder Agents		
armodafinil	1	
BELSOMRA	3	
DAYVIGO	3	
doxepin hcl oral tablet	1	
eszopiclone	1	
LUMRYZ	3	SP
LUMRYZ STARTER PACK	3	SP
modafinil oral	1	
SODIUM OXYBATE	3	SP
SUNOSI	2	
temazepam	1	
WAKIX	3	SP
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epinephrine.....	30	FLUTICASONE FUROATE-		SENSOR.....	17
EPIPEN 2-PAK.....	30	VILANTEROL.....	30	GUARDIAN 4 TRANSMITTER.....	17
EPIPEN JR 2-PAK.....	30	fluticasone propionate.....	16, 29	GUARDIAN LINK 3	
ergocalciferol.....	20	FLUTICASONE PROPIONATE		TRANSMITTER.....	18
ERIVEDGE.....	10	HFA.....	30	GUARDIAN SENSOR 3.....	18
ERLEADA.....	10	FLUTICASONE-		GYNAZOLE-1.....	9
ERMEZA.....	24	SALMETEROL.....	30	HADLIMA.....	26
errin.....	23	fluticasone-salmeterol.....	30	HAEGARDA.....	26
erythromycin.....	28	fluvoxamine maleate.....	8	hailey 1.5/30.....	23
escitalopram oxalate.....	8	folic acid.....	20	hailey 24 fe.....	23
				hailey fe 1.5/30.....	23

hailey fe 1/20.....	23	ibuprofen.....	6	JIVI.....	12
haloette.....	23	ICLUSIG.....	10	JORNAY PM.....	14
HARVONI.....	11	icosapent ethyl.....	13	JUBLIA.....	9
heather.....	23	IDELVION.....	12	juleber.....	23
HEMANGEOL.....	13	IDHIFA.....	10	JULUCA.....	11
HIZENTRA.....	26	imatinib mesylate.....	10	junel 1.5/30.....	23
HORIZANT.....	14	IMBRUVICA.....	10	junel 1/20.....	23
HUMALOG.....	18	imiquimod.....	16	junel fe 1.5/30.....	23
HUMALOG KWIKPEN.....	18	imiquimod pump.....	16	junel fe 1/20.....	23
HUMALOG MIX 50/50		IMVEXXY MAINTENANCE		junel fe 24.....	23
KWIKPEN.....	18	PACK.....	23	JYLAMVO.....	26
HUMALOG MIX 75/25		IMVEXXY STARTER PACK.....	23	kalliga.....	23
KWIKPEN.....	18	INBRIJA.....	10	KANJINTI.....	10
HUMALOG MIX 75/25 VIAL.....	18	incassia.....	23	KERENDIA.....	28
HUMALOG TEMPO PEN.....	18	indomethacin.....	6	KESIMPTA.....	14
HUMALOG U-100 JUNIOR		INFLECTRA.....	26	ketoconazole.....	9
KWIKPEN.....	18	INGREZZA.....	14	ketorolac tromethamine.....	6, 28
HUMIRA (2 PEN).....	26	INSULIN ASPART.....	19	KISQALI (200 MG DOSE).....	10
HUMIRA (2 SYRINGE).....	26	INSULIN ASPART FLEXPEN.....	19	KISQALI (400 MG DOSE).....	10
HUMIRA-CD/UC/HS		INSULIN DEGLUDEC		KISQALI (600 MG DOSE).....	10
STARTER.....	26	FLEXTOUCH.....	19	klayesta.....	9
HUMIRA-PSORIASIS/UEVIT		INSULIN GLARGINE MAX		KLISYRI (250 MG).....	16
STARTER.....	26	SOLOSTAR.....	19	KLISYRI (350 MG).....	16
HUMULIN 70/30 KWIKPEN.....	18	INSULIN GLARGINE		klor-con.....	20
HUMULIN 70/30 VIAL.....	18	SOLOSTAR.....	19	klor-con 10.....	20
HUMULIN N KWIKPEN.....	18	INSULIN LISPRO.....	19	klor-con m10.....	20
HUMULIN N VIAL.....	18	INSULIN LISPRO (1 UNIT		klor-con m15.....	20
HUMULIN R U-500 KWIKPEN.....	18	DIAL).....	19	klor-con m20.....	20
HUMULIN R U-500 VIAL.....	19	INSULIN LISPRO JUNIOR		KLOXXADO.....	6
HUMULIN R VIAL.....	19	KWIKPEN.....	19	KOATE.....	12
hydralazine hcl.....	13	INSULIN LISPRO PROT &		KOGENATE FS.....	12
hydrochlorothiazide.....	13	LISPRO.....	19	KOSELUGO.....	10
hydrocodone-acetaminophen.....	6	INVEGA HAFYERA.....	11	KOVALTRY.....	12
hydrocortisone.....	16, 21	INVEGA SUSTENNA.....	11	kurvelo.....	23
hydrocortisone (perianal).....	27	INVEGA TRINZA.....	11	labetalol hcl.....	13
hydromorphone hcl.....	6	INVELTYS.....	28	lacosamide.....	7
hydroxychloroquine sulfate.....	10	ipratropium bromide.....	29, 30	lactulose.....	21
hydroxyzine hcl.....	11	ipratropium-albuterol.....	30	lamotrigine.....	7
hydroxyzine pamoate.....	11	IQIRVO.....	21	lamotrigine er.....	7
HYFTOR.....	16	irbesartan.....	13	lansoprazole.....	20
HYRIMOZ.....	26	irbesartan-hydrochlorothiazide.....	13	LANTUS SOLOSTAR.....	19
HYRIMOZ-CROHNS/UC		isibloom.....	23	LANTUS U-100 VIAL.....	19
STARTER.....	26	isosorbide mononitrate er.....	13	larin 1.5/30.....	23
HYRIMOZ-PED<40KG		isotretinoin.....	16	larin 1/20.....	23
CROHN STARTER.....	26	jantoven.....	7	larin 24 fe.....	23
HYRIMOZ-PED>=40KG		JANUMET.....	16	larin fe 1.5/30.....	23
CROHN START.....	26	JANUMET XR.....	16	larin fe 1/20.....	23
HYRIMOZ-PLAQ		JANUVIA.....	16	latanoprost.....	28
PSOR/UEVIT START.....	26	JARDIANCE.....	16	leflunomide.....	26
HYRIMOZ-PLAQUE		jasmiel.....	23	lenalidomide.....	10
PSORIASIS START.....	26	jencycla.....	23	lessina.....	23
HYSINGLA ER.....	6	JENTADUETO.....	16	letrozole.....	10
ibandronate sodium.....	27	JENTADUETO XR.....	16	levetiracetam.....	8

levetiracetam er.....	7	MAVENCLAD.....	14	moxifloxacin hcl.....	28
levocetirizine dihydrochloride....	29	MAVYRET.....	11	moxifloxacin hcl (2x day).....	28
levofloxacin.....	7	MAYZENT.....	14	MULTAQ.....	13
levonorgestrel-ethinyl estrad...	23	MAYZENT STARTER PACK.....	14	mupirocin.....	7
levora 0.15/30 (28).....	23	meclizine hcl.....	8	MVASI.....	10
levo-t.....	24	medroxyprogesterone acetate	23	mycophenolate mofetil.....	26
levothyroxine sodium.....	24	MEKINIST.....	10	mycophenolate sodium.....	26
levoxyl.....	24	meloxicam.....	6	mycophenolic acid.....	26
lidocaine.....	6	memantine hcl.....	8	MYDAYIS.....	14
lidocaine hcl.....	15	mesalamine.....	27	MYFEMBREE.....	24
lidocaine viscous hcl.....	15	mesalamine er oral capsule		MYHIBBIN.....	26
lidocaine-prilocaine.....	6	0.375 gm.....	27	MYOBLOC.....	28
LINZESS.....	21	metformin hcl er.....	16	MYRBETRIQ.....	21
liothyronine sodium.....	24	metformin hcl er (mod).....	16	na sulfate-k sulfate-mg sulf.....	21
lisdexamfetamine dimesylate....	14	metformin hcl er (osm).....	17	nabumetone.....	6
lisinopril.....	13	metformin hcl ir.....	17	nadolol.....	13
lisinopril-hydrochlorothiazide....	13	methimazole.....	24	naloxone hcl.....	6
LITFULO.....	16	methocarbamol.....	31	naltrexone hcl.....	6
lithium carbonate.....	11	methotrexate sodium.....	26	NAMZARIC.....	8
lithium carbonate er.....	11	methotrexate sodium (pf).....	26	NAPRELAN.....	6
LIVALO.....	13	methylphenidate hcl.....	14	naproxen.....	6
LIVDELZI.....	21	methylphenidate hcl er.....	14	naratriptan hcl.....	9
LO LOESTRIN FE.....	23	methylphenidate hcl er (cd).....	14	NASCOBAL.....	20
LOKELMA.....	20	methylphenidate hcl er (la).....	14	NATAZIA.....	24
lorazepam.....	11	methylphenidate hcl er (osm)...	14	NAYZILAM.....	8
loryna.....	23	methylphenidate hcl er (xr).....	14	nebivolol hcl.....	13
losartan potassium.....	13	methylprednisolone.....	22	NEFFY.....	30
losartan potassium-hctz.....	13	metoclopramide hcl.....	8	neomycin-polymyxin-dexameth	28
LOTEMAX SM.....	28	metoprolol succinate er.....	13	neomycin-polymyxin-hc.....	29
lovastatin.....	13	metoprolol tartrate.....	13	neuac.....	16
lo-zumandimine.....	23	metronidazole.....	7, 16	NEULASTA.....	12
lubiprostone.....	21	microgestin 1.5/30.....	23	NEULASTA ONPRO.....	12
LUMAKRAS.....	10	microgestin 1/20.....	23	NEUPRO.....	10
LUMIGAN.....	28	microgestin fe 1.5/30.....	24	NEXLETOL.....	13
LUMRYZ.....	31	microgestin fe 1/20.....	24	NEXLIZET.....	13
LUMRYZ STARTER PACK.....	31	MIEBO.....	29	NEXTSTELLIS.....	24
LUPKYNIS.....	26	mili.....	24	NGENLA.....	22
LUPRON DEPOT (1-MONTH)	22	mimvey.....	24	nifedipine er.....	13
LUPRON DEPOT (3-MONTH)	22	minocycline hcl.....	7	nifedipine er osmotic release...	13
LUPRON DEPOT (4-MONTH)		minoxidil.....	13	nikki.....	24
INTRAMUSCULAR KIT 30MG	22	mirabegron er.....	21	nitrofurantoin macrocrystal.....	7
LUPRON DEPOT (6-MONTH)		MIRENA (52 MG).....	24	nitrofurantoin monohydrate	
INTRAMUSCULAR KIT 45MG	22	mirtazapine.....	8	macrocrystals.....	7
lurasidone hcl.....	11	MIRVASO.....	16	nitroglycerin.....	13
lutra.....	23	misoprostol.....	20	NIVA THYROID.....	24
LYBALVI.....	11	modafinil.....	31	NIVESTYM.....	12
lyleq.....	23	mometasone furoate.....	16, 29	NOC DURNA.....	22
lyllana.....	23	mono-lynyah.....	24	nora-be.....	24
LYNPARZA.....	10	montelukast sodium.....	30	NORDITROPIN FLEXPPO.....	22
LYUMJEV KWIKPEN.....	19	morphine sulfate er.....	6	norelgestromin-eth estradiol....	24
LYUMJEV VIAL.....	19	MOTPOLY XR.....	8	norethin ace-eth estrad-fe.....	24
lyza.....	23	MOUNJARO.....	17	norethindrone.....	24
marlissa.....	23	MOVANTIK.....	21	norethindrone acetate.....	24

norethindrone acet-ethinyl est...	24	omega-3-acid ethyl esters	13	OZEMPIC.....	17
norgestimate-eth estradiol	24	omeprazole	20	PANCREAZE	21
norgestimate-ethinyl estradiol		OMNARIS.....	29	PANRETIN.....	10
triphasic.....	24	OMNIPOD 5 DEXCOM INTRO		pantoprazole sodium.....	20
NORLIQVA.....	13	KIT	28	PANZYGA.....	26
norlyroc.....	24	OMNIPOD 5 DEXCOM PODS	28	paroxetine hcl.....	8
nortriptyline hcl	8	OMNIPOD 5 LIBRE INTRO		PAXLOVID (150/100)	11
NOVOEIGHT.....	12	KIT	28	PAXLOVID (300/100)	11
NOVOFINE PEN NEEDLE	28	OMNIPOD 5 LIBRE PODS.....	28	peg 3350-kcl-na bicarb-nacl	21
NOVOFINE PLUS PEN		OMNIPOD DASH INTRO KIT	28	peg-3350/electrolytes.....	21
NEEDLE.....	28	OMNIPOD DASH PODS.....	28	penicillin v potassium.....	7
NOVOLIN 70/30 FLEXPEN.....	19	OMNITROPE	22	PERFOROMIST	30
NOVOLIN 70/30 FLEXPEN		OMVOH.....	26	perio gard	15
RELION.....	19	ondansetron hcl.....	8	PERSERIS.....	11
NOVOLIN 70/30 VIAL	19	ondansetron odt.....	9	PERTZYE	21
NOVOLIN N FLEXPEN	19	ONETOUCH ULTRA 2 KIT		PHEBURANE.....	21
NOVOLIN N FLEXPEN		W/DEVICE	18	phenazopyridine hcl.....	21
RELION.....	19	ONETOUCH ULTRA BLUE		phentermine hcl.....	14
NOVOLIN N VIAL	19	TEST	18	PHESGO	10
NOVOLIN R FLEXPEN	19	ONETOUCH ULTRA TEST		pimecrolimus	16
NOVOLIN R FLEXPEN		STRIPS.....	18	pioglitazone hd	17
RELION.....	19	ONETOUCH VERIO FLEX		PIQRAY	10
NOVOLIN R VIAL	19	SYSTEM	18	polymyxin b-trimethoprim.....	29
NOVOLOG FLEXPEN.....	19	ONETOUCH VERIO KIT		POMALYST	10
NOVOLOG FLEXPEN		W/DEVICE	18	portia-28	24
RELION.....	19	ONETOUCH VERIO		potassium chloride crys er	20
NOVOLOG MIX 70/30		REFLECT KIT W/DEVICE	18	potassium chloride er	20
FLEXPEN.....	19	ONEXTON	16	potassium citrate er	20
NOVOLOG MIX 70/30 VIAL	19	ONGENTYS.....	10	pramipexole dihydrochloride.....	11
NOVOLOG PENFILL	19	OPSUMIT	31	prasugrel hcl	11
NOVOLOG RELION.....	19	OPVEE.....	6	pravastatin sodium.....	13
NOVOLOG U-100 VIAL	19	OPZELURA.....	16	prazosin hd.....	13
NUBEQA	10	ORENCIA.....	26	prednisolone.....	22
NUCALA.....	30	ORENCIA CLICKJECT	26	prednisolone acetate	28
NUCYNTA.....	6	ORENITRAM	31	prednisolone sodium	
NURTEC	9	ORENITRAM MONTH 1	31	phosphate.....	22
NUTROPIN AQ NUSPIN 10.....	22	ORENITRAM MONTH 2.....	31	prednisone	22
NUTROPIN AQ NUSPIN 20.....	22	ORENITRAM MONTH 3.....	31	pregabalin	14
NUTROPIN AQ NUSPIN 5.....	22	ORFADIN.....	21	PREMARIN.....	24
NUWIQ.....	12	ORGOVYX.....	10	premium lidocaine.....	6
NUZYRA	7	ORIAHNN	24	PREMPHASE.....	24
nyamyc.....	9	ORILISSA	22	PREMPRO.....	24
nystatin.....	9	ORLADEYO	26	PREZCOBIX	11
nystop	9	oseltamivir phosphate.....	11	primidone.....	8
ocella.....	24	OSPHERA.....	22	PRIVIGEN.....	26
ODOMZO.....	10	OTEZLA.....	26	prochlorperazine maleate	9
OFEV.....	30	OVIDREL	22	PROCRIT	12
ofloxacin.....	28, 29	oxcarbazepine.....	8	PROCTOFOAM HC	27
olanzapine.....	11	oxybutynin chloride.....	21	procto-med hc	27
olmesartan medoxomil.....	13	oxybutynin chloride er	21	progesterone	24
olmesartan medoxomil-hctz	13	oxycodone hcl	6	PROLIA	27
OLUMIANT	26	oxycodone-acetaminophen.....	6	PROMACTA	12
OMECLAMOX-PAK.....	21	OXYCONTIN.....	6	promethazine hcl.....	9

promethazine-dm	29	ROXYBOND.....	6	sucralfate.....	20
propranolol hcl	13	ROZLYTREK	10	SUFLAVE.....	21
propranolol hcl er.....	13	RUCONEST	26	sulfamethoxazole-trimethoprim....	7
pseudoephedrine-bromphen- dm.....	29	RUXIENCE.....	10	sulfasalazine.....	27
PULMOZYME	31	RYALTRIS	29	sulfatrim pediatric.....	7
PYLERA	21	RYBELSUS	17	sumatriptan succinate.....	9
QBREXZA	16	RYDAPT	10	SUNOSI.....	31
QNASL	29	RYKINDO.....	11	SUPPRELIN LA.....	22
QNASL CHILDRENS.....	29	RYTARY	11	SUPREP BOWEL PREP KIT	21
QSYMIA	15	SANCUSO	9	SUTAB.....	21
quetiapine fumarate.....	11	SANTYL.....	16	syeda.....	24
quetiapine fumarate er.....	11	SAXENDA	15	SYMBICORT.....	30
QULIPTA.....	9	SCSEMBLIX.....	10	SYMFI.....	11
QVAR REDIHALER	30	scopolamine	9	SYMFI LO	11
rabeprazole sodium	20	SELARSDI.....	26	SYMLINPEN 120	17
RADICAVA ORS.....	15	SEREVENT DISKUS.....	30	SYMLINPEN 60.....	17
RADICAVA ORS STARTER KIT	15	sertraline hcl.....	8	SYMPAZAN	8
ramipril	13	SEYSARA	7	SYMPROIC.....	21
ranolazine er	13	sharobel.....	24	SYMTUZA.....	11
RASUVO	26	sildenafil citrate.....	21, 31	SYNJARDY.....	17
RAYALDEE	27	SIMBRINZA	28	SYNJARDY XR.....	17
REBIF	14	SIMLANDI.....	26	SYNTHROID.....	24
REBIF REBIDOSE	14	SIMPONI.....	26	TABRECTA.....	10
REBIF REBIDOSE	14	SIMPONI ARIA	26	TACLONEX.....	16
TITRATION PACK.....	14	simvastatin	13	tacrolimus	16, 27
REBIF TITRATION PACK.....	14	SKYRIZI.....	26	tadalafil.....	21
REBINYN.....	12	SKYRIZI PEN.....	26	TADLIQ.....	31
REBYOTA.....	21	SKYTROFA.....	22	TAFINLAR.....	10
reclipsen.....	24	SLYND.....	24	TAGRISSO.....	10
RECOMBINATE	12	SOAANZ	13	TAKHZYRO.....	27
REPATHA	13	SODIUM OXYBATE.....	31	TALICIA	21
REPATHA PUSHTRONEX SYSTEM	13	SOFDRA.....	16	TALTZ.....	27
REPATHA SURECLICK	13	solifenacin succinate.....	21	tamoxifen citrate.....	10
RESTASIS.....	29	SOLQUA.....	17	tamsulosin hcl.....	21
RESTASIS MULTIDOSE.....	29	SOLIRIS.....	12	tarina 24 fe.....	24
RETACRIT	12	SOMATULINE DEPOT	22	tarina fe 1/20 eq.....	24
RETEVMO	10	SOOLANTRA.....	16	TASIGNA	10
RETIN-A MICRO PUMP	16	sotalol hcl.....	13	TAVALISSE.....	12
REVLIMID	10	SOTYKTU	27	TEGLUTIK.....	15
REXTOVY	6	SPIRIVA HANDIHALER	30	TEKTRUNA.....	13
REXULTI	11	SPIRIVA RESPIMAT	30	telmisartan.....	13
REZVOGLAR KWIKPEN	19	spironolactone	13	temazepam	31
RHOPRESSA	28	SPRAVATO (56 MG DOSE).....	8	temozolomide	10
RINVOQ	26	SPRAVATO (84 MG DOSE).....	8	terbinafine hcl.....	9
RINVOQ LQ.....	26	sprintec 28.....	24	terconazole.....	9
risperidone.....	11	sronyx.....	24	TERIPARATIDE	27
rizatriptan benzoate.....	9	STELARA.....	27	testosterone.....	22
ROCKLATAN.....	28	STENDRA.....	21	testosterone cypionate	22
ropinirole hcl.....	11	STIOLTO RESPIMAT	30	TEZSPIRE.....	30
rosuvastatin calcium.....	13	STIVARGA.....	10	THIOLA.....	21
roweepra.....	8	STRENSIQ.....	21	THIOLA EC.....	21
		STRIVERDI RESPIMAT.....	30	timolol maleate	28
		SUBLOCADE	6	timolol maleate (once-daily).....	28
		subvenite	8		

timolol maleate ocudose.....	28	TWYNEO	16	VUMERITY.....	14
timolol maleate pf.....	28	TYMLOS.....	27	VYLEESI.....	15
tiotropium bromide		TYRVAYA	29	vylibra	24
monohydrate	30	TYVASO	31	VYVANSE	14
TIROSINT	24	TYVASO DPI INSTITUTIONAL		VYVGART.....	9
TIROSINT-SOL.....	24	KIT.....	31	VYVGART HYTRULO.....	9
tizanidine hcl.....	31	TYVASO DPI MAINTENANCE		WAINUA	15
TOBI PODHALER.....	31	KIT.....	31	WAKIX.....	31
TOBRADEX ST.....	28	TYVASO DPI TITRATION KIT	31	warfarin sodium.....	7
tobramycin.....	28	TYVASO REFILL KIT	31	WEGOVY.....	15
tobramycin-dexamethasone.....	28	TYVASO STARTER KIT	31	WEZLANA	27
tolterodine tartrate er	21	UBRELVY	9	WILATE.....	12
TOPAMAX.....	8	UCERIS	27	WINLEVI.....	16
TOPAMAX SPRINKLE.....	8	UDENYCA.....	12	wixela inhub.....	30
topiramate.....	8	UDENYCA ONBODY	12	WYNZORA	16
torsemide.....	13	ULTOMIRIS	12	XACIATO.....	7
TOUJEO MAX SOLOSTAR.....	19	unithroid	24	XARELTO.....	7
TOUJEO SOLOSTAR.....	19	UZEDY.....	11	XARELTO STARTER PACK.....	7
TRADJENTA.....	17	valacyclovir hcl.....	11	XCOPRI.....	8
tramadol hcl ir	6	valsartan.....	13	XELJANZ	27
tranexamic acid	12	valsartan-hydrochlorothiazide....	13	XELJANZ XR.....	27
TRAZIMERA	10	VALTOCO 10 MG DOSE	8	XEMBIFY	27
trazodone hcl.....	8	VALTOCO 5 MG DOSE.....	8	XEOMIN.....	28
TRELEGY ELLIPTA.....	30	varenicline tartrate	6	XHANCE.....	29
TREMFYA.....	27	varenicline tartrate(continue)	6	XIGDUO XR	17
treprostinil.....	31	VARUBI (180 MG DOSE).....	9	XIIDRA.....	29
TRESIBA.....	19	VASCEPA	13	XOFLUZA (40 MG DOSE)	11
TRESIBA FLEXTOUCH	19	VELSIPITY	27	XOFLUZA (80 MG DOSE)	11
tretinoin	16	VELTASSA.....	20	XOLAIR	30, 31
TREXALL	27	venlafaxine hcl.....	8	XTAMPZA ER.....	6
TREZIX.....	6	venlafaxine hcl er	8	XTANDI	10
triamcinolone acetonide.....	16	VEOZAH	28	xulane	24
triamcinolone in absorbbase	16	verapamil hcl er	13	XYNTHA.....	12
triamterene-hctz	13	VERKAZIA.....	29	XYNTHA SOLOFUSE.....	12
triazolam.....	11	VERQUVO	13	XYOSTED.....	22
triderm.....	16	VERZENIO.....	10	XYWAV	31
tri-estarylla.....	24	vestura.....	24	YCANTH.....	16
TRIJARDY XR.....	17	V-GO 20	28	YESINTEK.....	27
TRIKAFTA.....	31	V-GO 30	28	YORVIPATH	28
tri-linyah	24	V-GO 40.....	28	YUPELRI.....	31
tri-lo-estarylla.....	24	VIBERZI.....	21	yuvafem.....	24
tri-lo-marzia	24	vienva	24	zafemy.....	24
tri-lo-mili	24	vilazodone hcl.....	8	ZARXIO	12
tri-lo-sprintec.....	24	vitamin d (ergocalciferol)	20	ZAVZPRET	9
tri-mili.....	24	VITRAKVI.....	10	ZEGALOGUE	18
TRINTELLIX.....	8	VIVITROL.....	6	ZEJULA.....	10
TRIPTODUR	22	VIVJOA	9	ZELBORAF	10
tri-sprintec.....	24	VOQUEZNA DUAL PAK.....	21	zenatane	16
TRIUMEQ	11	VOQUEZNA TRIPLE PAK.....	21	ZENPEP.....	21
tri-vylibra.....	24	VOSEVI.....	11	ZEPBOUND	15
tri-vylibra lo.....	24	VOYDEYA.....	12	ZEPOSIA	14
TRULICITY	17	VRAYLAR	11	ZEPOSIA 7-DAY STARTER	
TRUQAP	10	VTAMA	16	PACK.....	14
				ZEPOSIA STARTER KIT	14

ZILXI.....	16
ZIMHI.....	7
ZIOPTAN.....	28
ziprasidone hcl.....	11
ZIRABEV.....	10
ZOLGENSMA.....	21
zolpidem tartrate.....	31
zolpidem tartrate er.....	31
ZONEGRAN.....	8
zonisamide	8
ZORYVE	16
ZTLIDO	6
ZUBSOLV	7
zumandimine.....	24
ZURZUVAE.....	8
ZYLET	29

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

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

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

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

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

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

NOTICE OF AVAILABILITY OF LANGUAGE ASSISTANCE SERVICES AND ALTERNATE FORMATS

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

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

ملاحظة: إذا كنت تتحدث اللغة العربية (**Arabic**)، ستوفر لك خدمات المساعدة اللغوية المجانية والمراسلات المجانية بتنسيقات أخرى، مثل طباعة بلحرف كبيرة أصل بالرقم لمجني لمنون على بطاقة تعريف لعضو خمنتك

ចំណាំ: ប្រសិនបើអ្នកនិយាយភាសាខ្មែរ (**Khmer**) បសវ័ជន្នយភាសាឥតគិតថ្លៃ និងការទំនាក់ទំនង ឥតគិតថ្លៃក្នុង អន្តរាគមន៍បណ្តាញព័ត៌មាន ដូចជាព័ត៌មានអំពី មានសញ្ញាអ្នក។
ទូរសព្ទឥតគិតថ្លៃលើកាត់សមាជិករបស់អ្នក។

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

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

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

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

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

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

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

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

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

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

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

BAA'ÁKONÍNÍZIN: Diné (**Navajo**) saad bee yáníłt'í go, t'áá jíik'eh saad bee áka'e'eyeed bee áka'anída'wo'í dóó bee ahil hane'í nááná łahgo át'éego bee hadadilyaa, díí nitsaago bee ak'eda'ashchínígíí, náhóló. Bee atah nil'íní ninaaltsoos nitł'izí bee néé hoziní baah t'áá jíik'eh bee hane'í námbóo bee hodílnih

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

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

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

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

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

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

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