



2027 Premium 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.
Tier E	⊗ Excluded	May not be covered or need prior authorization. Lower-cost options are available and covered.

Drug list information

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

M	Authorized generic or cobranded product
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.

RIT July 2027 Abridged Formulary

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Drug Name	Drug Tier	Notes
Analgesics - Drugs for Pain		
acetaminophen-codeine oral tablet	1	QL
apap-caff-dihydrocodeine	1	QL
bac (butalbital-acetamin-caff)	1	
BELBUCA	2	PA; QL
butalbital-apap-caffeine oral capsule 50-300-40 mg	1	
butalbital-apap-caffeine oral tablet	1	
BUTRANS	E	
CONZIP	E	
DILAUDID ORAL	E	
endocet	1	QL
FIORICET	E	
hydrocodone-acetaminophen	1	QL
hydromorphone hcl oral tablet	1	QL
HYSINGLA ER	E	
JOURNAVX	3	QL
morphine sulfate er	1	PA; QL
MS CONTIN	E	
NUCYNTA	E	
NUCYNTA ER	E	
OXYCODONE HCL	E	
oxycodone hcl oral solution	1	QL
oxycodone hcl oral tablet	1	QL
oxycodone-acetaminophen oral tablet 10-325 mg, 2.5-325 mg, 5-325 mg, 7.5-325 mg	1	QL
OXYCONTIN	E	
PERCOCET	E	

Drug Name	Drug Tier	Notes
ROXICODONE	E	
ROXYBOND	E	
TAPENTADOL HCL ER	E	
TRAMADOL HCL (ER BIPHASIC) ORAL CAPSULE EXTENDED RELEASE 24 HOUR	E	
TRAMADOL HCL ORAL SOLUTION	E	
tramadol hcl oral tablet 100 mg, 50 mg	1	QL
XTAMPZA ER	2	PA; QL
Analgesics - Drugs for Pain and Inflammation		
ARTHROTEC	E	
CELEBREX	E	
celecoxib oral	1	QL
COMBOGESIC ORAL	E	
COXANTO	E	
DICLOFENAC PATCH 1.3%	E	
diclofenac potassium oral tablet 50 mg	1	
diclofenac sodium oral	1	
ELYXYB	E	
FLECTOR	E	
ibuprofen oral suspension 100 mg/5ml, 200 mg/10ml	1	
ibuprofen oral tablet 400 mg, 600 mg, 800 mg	1	
ibuprofen-famotidine	E	
indomethacin oral capsule	1	
ketorolac tromethamine oral	1	QL
LICART	E	
meloxicam oral tablet	1	

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

Drug Name	Drug Tier	Notes
nabumetone oral	1	
NAPRELAN	E	
naproxen oral tablet	1	
ORUDIS	E	
OXAPROZIN ORAL CAPSULE	E	
RELAFEN DS	E	
SPRIX	E	
TOLECTIN 600	E	
TOLECTIN DS	E	
VYSCOXIA	E	
ZIPSOR	E	
ZYBIC	E	
Anesthetics		
EXPAREL	3	
lidocaine external ointment 5 %	1	
lidocaine external patch 5 %	1	
lidocaine-prilocaine external cream	1	
LIDOCAN	E	
LIDODERM	E	
TRIDACAINE III	E	
ZTLIDO	E	
Anti-Addiction / Substance Abuse Treatment Agents		
BRIXADI	2	SP
BRIXADI (WEEKLY)	2	SP
buprenorphine hcl sublingual	1	
buprenorphine hcl-naloxone hcl	1	
CHANTIX	E	
CHANTIX CONTINUING MONTH PAK	E	
CHANTIX STARTING MONTH PAK	E	

Drug Name	Drug Tier	Notes
ft naloxone hcl	1	
KLOXXADO	2	
naloxone hcl nasal	1	
naltrexone hcl oral	1	
OPVEE	2	
REXTOVY	2	
REZENOPY	E	
SUBLOCADE	2	SP
SUBOXONE	E	
varenicline tartrate	1	QL
varenicline tartrate(continue)	1	QL
ZUBSOLV	2	
ZURNAI	E	
Antibacterials		
amoxicillin oral capsule	1	
amoxicillin oral suspension reconstituted	1	
amoxicillin oral tablet	1	
amoxicillin-potassium clavulanate oral suspension reconstituted	1	
amoxicillin-potassium clavulanate oral tablet	1	
azithromycin oral	1	
BLUJEPA	3	QL
cefadroxil oral capsule	1	
cefdinir	1	
cefpodoxime proxetil oral tablet	1	
cefuroxime axetil	1	
cephalexin oral capsule 250 mg, 500 mg	1	
cephalexin oral suspension reconstituted	1	
cephalexin oral tablet	1	
ciprofloxacin hcl oral	1	

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

Drug Name	Drug Tier	Notes
CLEOCIN VAGINAL	E	
clindamycin hcl oral	1	
clindamycin phosphate vaginal	1	
CLINDESSE	3	
DIFICID ORAL SUSPENSION RECONSTITUTED	3	
DIFICID ORAL TABLET	E	
DORYX MPC	E	
doxycycline hyclate oral capsule 100 mg, 50 mg	1	
doxycycline hyclate oral tablet 100 mg, 20 mg	1	
doxycycline monohydrate oral capsule 100 mg, 50 mg	1	
doxycycline monohydrate oral tablet	1	
levofloxacin oral tablet	1	
LIKMEZ	E	
metronidazole oral tablet 250 mg, 500 mg	1	
metronidazole vaginal	1	
minocycline hcl oral capsule	1	
moxifloxacin hcl oral	1	
mupirocin ointment	1	
nitrofurantoin macrocrystal	1	
nitrofurantoin monohydrate macrocrystals	1	
NITROFURANTOIN ORAL SUSPENSION 50 MG/5ML	E	
NUVESSA	E	
NUZYRA ORAL	3	QL
ORLYNVAH	E	
penicillin v potassium oral tablet	1	

Drug Name	Drug Tier	Notes
PIVYA	3	QL
SEYSARA	3	ST
SILVADENE	E	
silver sulfadiazine external	1	
ssd	1	
sulfamethoxazole-trimethoprim oral tablet	1	
TARGADOX	E	
XACIATO	3	
XIFAXAN ORAL TABLET 200 MG	E	
Anticoagulants		
ELIQUIS	2	QL
ELIQUIS (1.5 MG PACK)	2	QL
ELIQUIS (2 MG PACK)	2	QL
ELIQUIS DVT/PE STARTER PACK	2	QL
enoxaparin sodium injection solution prefilled syringe	1	
warfarin sodium oral	1	
XARELTO	2	QL
XARELTO STARTER PACK	2	QL
Anticonvulsants - Drugs for Seizures		
APTOM	E	
BRIVIACT	E	
CARBATROL	E	
DEPAKOTE	E	
DEPAKOTE ER	E	
DEPAKOTE SPRINKLES	E	
DILANTIN INFATABS	E	
DILANTIN ORAL CAPSULE 100 MG	E	
DILANTIN-125	E	
divalproex sodium er	1	

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

Drug Name	Drug Tier	Notes
divalproex sodium oral	1	
ELEPSIA XR	E	
EPIDIOLEX	2	PA; SP
EPRONTIA	E	
FYCOMPA	3	
gabapentin oral capsule 100 mg, 300 mg, 400 mg	1	
gabapentin oral solution	1	
gabapentin oral tablet 600 mg, 800 mg	1	
GABARONE	E	
KEPPRA ORAL	E	
KEPPRA XR	E	
lacosamide intravenous	1	
lacosamide oral solution 10 mg/ml, 100 mg/10ml, 50 mg/5ml	1	
lacosamide oral tablet	1	
LAMICTAL	E	
LAMICTAL ODT	E	
LAMICTAL STARTER	E	
LAMICTAL XR ORAL TABLET EXTENDED RELEASE 24 HOUR	E	
lamotrigine er	1	
lamotrigine oral tablet	1	
levetiracetam er	1	
levetiracetam intravenous	1	
levetiracetam oral solution	1	
levetiracetam oral tablet	1	
LEVETIRACETAM ORAL TABLET DISINTEGRATING SOLUBLE	E	
MOTPOLY XR	3	ST
NAYZILAM	3	QL

Drug Name	Drug Tier	Notes
NEURONTIN	E	
ONFI	E	
oxcarbazepine	1	
OXTELLAR XR	E	
RELGAABI	E	
roweepra	1	
SABRIL	E	
SPRITAM	E	
SUBVENITE ORAL SUSPENSION	E	
subvenite oral tablet	1	
SYMPAZAN	2	PA
TEGRETOL	E	
TEGRETOL-XR	E	
TOPAMAX	E	
TOPAMAX SPRINKLE	E	
topiramate oral capsule sprinkle	1	
topiramate oral tablet	1	
TRILEPTAL	E	
TROKENDI XR	E	
VALTOCO 10 MG DOSE	3	QL
VALTOCO 15 MG DOSE	3	QL
VALTOCO 20 MG DOSE	3	QL
VALTOCO 5 MG DOSE	3	QL
VIGADRONE	E	
VIMPAT	E	
XCOPRI	3	ST
ZONEGRAN	E	
ZONISADE	E	
zonisamide oral	1	
Antidementia Agents - Drugs for Alzheimer's Disease and Dementia		
KISUNLA	E	

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

Drug Name	Drug Tier	Notes
LEQEMBI	E	
LEQEMBI IQLIK	E	
LEQEMBI IQLIK (500 MG DOSE)	E	
memantine hcl oral tablet	1	
NAMZARIC	E	
ZUNVEYL	E	
Antidepressants		
amitriptyline hcl oral	1	
APLENZIN	E	
AUVELITY	3	ST; QL
AUVELITY TITRATION PACK	3	ST; QL
bupropion hcl er (sr)	1	QL
bupropion hcl er (xl) oral tablet extended release 24 hour 150 mg, 300 mg	1	QL
BUPROPION HCL ER (XL) ORAL TABLET EXTENDED RELEASE 24 HOUR 450 MG	E	
bupropion hcl oral	1	
CELEXA	E	
citalopram hydrobromide oral tablet	1	
desvenlafaxine succinate er	1	QL
doxepin hcl oral capsule	1	
duloxetine hcl oral capsule delayed release particles 20 mg, 30 mg, 40 mg, 60 mg	1	QL
EFFEXOR XR	E	
ESCITALOPRAM OXALATE ORAL CAPSULE	E	

Drug Name	Drug Tier	Notes
escitalopram oxalate oral tablet	1	
EXXUA	E	
EXXUA TITRATION PACK	E	
fluoxetine hcl oral capsule	1	
fluoxetine hcl oral tablet 10 mg, 60 mg	1	
fluvoxamine maleate	1	
LEXAPRO	E	
mirtazapine oral tablet	1	
nortriptyline hcl oral capsule	1	
paroxetine hcl oral tablet	1	
PAXIL	E	
PAXIL CR	E	
PRISTIQ	E	
sertraline hcl oral concentrate	1	
sertraline hcl oral tablet	1	
SPRAVATO (56 MG DOSE)	2	PA; SP
SPRAVATO (84 MG DOSE)	2	PA; SP
trazodone hcl oral tablet 100 mg, 150 mg, 300 mg, 50 mg	1	
TRINTELLIX	3	ST; QL
VENLAFAXINE BESYLATE ER	E	
venlafaxine hcl	1	
venlafaxine hcl er oral capsule extended release 24 hour	1	QL
venlafaxine hcl er oral tablet extended release 24 hour 225 mg	1	
VIIBRYD	E	
vilazodone hcl	1	QL

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

Drug Name	Drug Tier	Notes
WELLBUTRIN SR	E	
WELLBUTRIN XL	E	
ZOLOFT	E	
ZURZUVAE	3	QL
Antiemetics - Drugs for Nausea and Vomiting		
GIMOTI	E	
meclizine hcl oral tablet	1	
metoclopramide hcl oral tablet	1	
NEREUS	E	
ondansetron hcl oral tablet 4 mg, 8 mg	1	
ondansetron odt oral tablet dispersible 4 mg, 8 mg	1	
prochlorperazine maleate oral	1	
promethazine hcl injection	1	
promethazine hcl oral	1	
SANCUSO	E	
scopolamine	1	
VARUBI (180 MG DOSE)	2	QL
Antifungals		
ciclodan	1	
ciclopirox external solution	1	
clotrimazole external cream	1	
clotrimazole mouth/throat	1	
clotrimazole-betamethasone external cream	1	
CRESEMBA INTRAVENOUS	3	
CRESEMBA ORAL	3	PA

Drug Name	Drug Tier	Notes
ECONAZOLE NITRATE EXTERNAL FOAM	E	
fluconazole oral	1	
GYNAZOLE-1	3	
JUBLIA	E	
ketoconazole external cream	1	
ketoconazole external shampoo	1	
klayesta	1	
nystatin external	1	
nystatin mouth/throat suspension 100000 unit/ml	1	
nystop	1	
terbinafine hcl oral	1	QL
terconazole vaginal cream	1	
TOLSURA	E	
VIVJOA	E	
Antigout Agents		
allopurinol oral tablet 100 mg, 300 mg	1	
colchicine oral	1	
GLOPERBA	E	
MITIGARE	E	
Antimigraine Agents		
AIMOVIG SUBCUTANEOUS SOLUTION AUTO-INJECTOR 140 MG/ML, 70 MG/ML	2	PA; QL
AJOVY	E	
BREKIYA	E	
CAMBIA	E	
eletriptan hydrobromide	1	QL
EMGALITY	2	PA; QL
IMITREX	E	
IMITREX STATDOSE REFILL	E	

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

Drug Name	Drug Tier	Notes
IMITREX STATDOSE SYSTEM	E	
MAXALT	E	
MAXALT-MLT	E	
naratriptan hcl	1	QL
NURTEC	2	PA; QL
ONZETRA XSAIL	E	
QULIPTA	2	PA; QL
RELPAK	E	
rizatriptan benzoate	1	QL
sumatriptan succinate oral	1	QL
sumatriptan succinate subcutaneous solution auto-injector	1	QL
SYMBRAVO	E	
TOSYMRA	E	
TREXIMET	E	
TRUDHESA	E	
UBRELVY	2	PA; QL
ZAVZPRET	3	PA; QL
ZEMBRACE SYMTOUCH	E	
ZOMIG ORAL	E	
Antimyasthenic Agents		
VYVGART	2	SP
VYVGART HYTRULO	2	SP
Antineoplastics - Drugs for Cancer		
abiraterone acetate oral tablet 250 mg	1	PA; SP
abirtega	1	PA; SP
AFINITOR	E	
AFINITOR DISPERZ	E	
AKEEGA	E	
ALECENSA	2	PA; SP
ALUNBRIG	2	PA; SP; QL
ALYMSYS	E	

Drug Name	Drug Tier	Notes
anastrozole oral	1	
ANKTIVA	3	PA; SP
ARIMIDEX	E	
AUGTYRO	2	PA; SP
AVGEMSI	E	
AVOPEF	E	
BEIZRAY	E	
BELRAPZO	E	
BENDAMUSTINE HCL INTRAVENOUS SOLUTION	E	
BESREMI	3	PA; SP
BLENREP	E	
CABOMETYX ORAL TABLET 20 MG	2	PA; SP; QL
CABOMETYX ORAL TABLET 40 MG, 60 MG	2	PA; SP
CALQUENCE	3	PA; SP
capecitabine	1	SP
COSELA	E	
COTELLIC	2	PA; SP
DANZITEN	2	PA; SP
DARZALEX FASPRO	E	
ENSACOVE	2	PA; SP
ERIVEDGE	2	PA; SP
ERLEADA	2	PA; SP
FAVLYXA	E	
FOTIVDA	E	
GAVRETO	3	PA; SP
GLEEVEC	E	
HERCESSI	E	
HERZUMA	E	
HYRNUO	3	PA; SP
IBTROZI	2	PA; SP
ICLUSIG ORAL TABLET 10 MG, 15 MG	2	PA; SP; QL

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

Drug Name	Drug Tier	Notes
ICLUSIG ORAL TABLET 30 MG, 45 MG	2	PA; SP
IDHIFA	2	PA; SP; QL
IMBRUVICA ORAL TABLET 140 MG, 280 MG	E	
IMKELDI	3	PA; SP
INLEXZO	E	
INQOVI	E	
IVRA	E	
JOBEVNE	E	
KANJINTI	2	PA; SP
KISQALI (200 MG DOSE)	2	PA; SP
KISQALI (400 MG DOSE)	2	PA; SP
KISQALI (600 MG DOSE)	2	PA; SP
KOSELUGO	2	PA; SP
KYXATA	E	
lenalidomide	1	PA; SP
letrozole oral	1	
LUMAKRAS	2	PA; SP
LUNSUMIO VELO	E	
LYMPHIR	E	
LYNPARZA	2	PA; SP
MEKINIST	2	PA; SP
MVASI	2	PA; SP
NIKTIMVO	E	
NILOTINIB D- TARTRATE	E	
NUBEQA	3	PA; SP
ODOMZO	2	PA; SP
OGIVRI	E	
OJJAARA	E	
ONTRUZANT	E	
ORGOVYX	2	PA; SP
PANRETIN	3	

Drug Name	Drug Tier	Notes
PEMAZYRE	E	
PHESGO	2	PA; SP
PHYRAGO	E	
PIQRAY	2	PA; SP; QL
POMALYST	E	
RETEVMO ORAL TABLET 120 MG, 160 MG	2	PA; SP
RETEVMO ORAL TABLET 40 MG, 80 MG	2	PA; SP; QL
REVLIMID	E	
REZLIDHIA	E	
RIABNI	E	
ROZLYTREK	2	PA; SP
RUBRACA	E	
RUXIENCE	2	PA; SP
RYBREVANT FASPRO	E	
RYDAPT	2	PA; SP
RYLAZE	E	
SCEMBLIX ORAL TABLET 100 MG	2	PA; SP
SCEMBLIX ORAL TABLET 20 MG, 40 MG	2	PA; SP; QL
SPRYCEL	E	
STIVARGA	2	PA; SP
SUTENT	E	
TABRECTA	2	PA; SP
TAFINLAR	2	PA; SP
TAGRISSE ORAL TABLET 40 MG	3	PA; SP; QL
TAGRISSE ORAL TABLET 80 MG	3	PA; SP
TALZENNA	E	
tamoxifen citrate oral	1	
TARGRETIN ORAL	E	
TASIGNA	E	
TEPADINA	E	
TEPMETKO	2	PA; SP

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

Drug Name	Drug Tier	Notes
TEPYLUTE	E	
TRAZIMERA	2	PA; SP
TREANDA	E	
TRUQAP	3	PA; SP
TRUXIMA	E	
UNLOXCYT	E	
VEGZELMA	E	
VERZENIO	3	PA; SP
VITRAKVI	2	PA; SP
VIVIMUSTA	E	
VYKOURA	E	
XALKORI	E	
XTANDI	2	PA; SP
YONSA	E	
ZEJULA ORAL TABLET 100 MG	2	PA; SP; QL
ZEJULA ORAL TABLET 200 MG, 300 MG	2	PA; SP
ZELBORAF	2	PA; SP
ZIRABEV	2	PA; SP
ZYTIGA	E	
Antiparasitics		
ARAKODA	3	
EMVERM	2	
hydroxychloroquine sulfate oral	1	
NATROBA	E	
PLAQUENIL	E	
PRURADIK	E	
SOVUNA	E	
Antiparkinson Agents		
CARBIDOPA- LEVODOPA ER ORAL CAPSULE EXTENDED RELEASE	E	
carbidopa-levodopa oral tablet	1	
CREXONT	3	ST

Drug Name	Drug Tier	Notes
DHIVY	E	
GOCOVRI	E	
INBRIJA	3	PA; SP
NEUPRO	3	
ONGENTYS	3	ST
pramipexole dihydrochloride	1	
ropinirole hcl	1	
RYTARY	E	
Antiplatelets		
BRILINTA	E	
clopidogrel bisulfate oral	1	
PLAVIX	E	
prasugrel hcl	1	
ticagrelor	1	
YOSPRALA	E	
Antipsychotics - Drugs for Mood Disorders		
ABILIFY	E	
ABILIFY ASIMTUFII	3	
ABILIFY MAINTENA	3	
aripiprazole oral tablet	1	QL
ARISTADA	3	
ARISTADA INITIO	3	
CAPLYTA	3	ST; QL
ERZOFRI INTRAMUSCULAR SUSPENSION PREFILLED SYRINGE 117 MG/0.75ML, 156 MG/ML, 234 MG/1.5ML, 39 MG/0.25ML, 78 MG/0.5ML	2	
ERZOFRI INTRAMUSCULAR SUSPENSION PREFILLED SYRINGE 351 MG/2.25ML	3	

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

Drug Name	Drug Tier	Notes
INVEGA HAFYERA	2	ST
INVEGA SUSTENNA	2	
INVEGA TRINZA	2	
LATUDA	E	
lurasidone hcl	1	QL
LYBALVI	3	ST; QL
olanzapine oral tablet	1	QL
quetiapine fumarate	1	QL
quetiapine fumarate er	1	QL
REXULTI	3	QL
RISPERDAL	E	
risperidone oral tablet	1	QL
RYKINDO	3	
SAPHRIS	E	
SECUADO	E	
SEROQUEL	E	
SEROQUEL XR	E	
UZEDY	3	
VRAYLAR	3	QL
ZYPREXA	E	
Antivirals		
acyclovir external ointment	1	QL
acyclovir oral capsule	1	
acyclovir oral tablet	1	
APRETUDE	2	
BARACLUDE ORAL TABLET	E	
BIKTARVY	2	
CABENUVA	2	
CIMDUO	2	
DELSTRIGO	2	
DESCOVY ORAL TABLET 120-15 MG	3	
DESCOVY ORAL TABLET 200-25 MG	3	PA
DOVATO	2	
EDURANT	E	

Drug Name	Drug Tier	Notes
emtricitabine-tenofovir df	1	
EPCLUSA	E	
HARVONI	E	
JULUCA	2	
LEDIPASVIR-SOFOSBUVIR	E	
MAVYRET	2	PA; SP; QL
oseltamivir phosphate oral	1	QL
PAPZIMEOS	E	
PAXLOVID (150/100)	2	QL
PAXLOVID (300/100 & 150/100)	2	QL
PAXLOVID (300/100)	2	QL
PIFELTRO	2	
PREZCOBIX	2	
SOFOSBUVIR-VELPATASVIR	E	
SOVALDI	E	
SYMTUZA	2	
TAMIFLU	E	
TRIUMEQ	2	
TRUVADA	E	
valacyclovir hcl oral	1	QL
VALTREX	E	
VEMLIDY	E	
VOCABRIA	E	
VOSEVI	2	PA; SP; QL
XOFLUZA (40 MG DOSE)	3	QL
XOFLUZA (80 MG DOSE)	3	QL
YEZTUGO	E	
ZOVIRAX	E	
Anxiolytics - Drugs for Anxiety		
alprazolam oral tablet	1	QL
ATIVAN ORAL	E	

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

Drug Name	Drug Tier	Notes
BUCAPSOL	E	
bupirone hcl oral tablet 10 mg, 15 mg, 30 mg, 5 mg, 7.5 mg	1	
clonazepam oral tablet 0.5 mg, 1 mg, 2 mg	1	QL
diazepam oral tablet	1	
hydroxyzine hcl oral syrup 10 mg/5ml, 50 mg/25ml	1	
hydroxyzine hcl oral tablet	1	
hydroxyzine pamoate oral capsule 25 mg, 50 mg	1	
KLONOPIN	E	
lorazepam oral tablet	1	QL
LOREEV XR	E	
triazolam	1	QL
VALIUM	E	
XANAX	E	
Bipolar Agents - Drugs for Mood Disorders		
lithium carbonate er	1	
lithium carbonate oral	1	
Blood Products and Modifiers - Drugs for Blood Disorders		
ARANESP (ALBUMIN FREE)	2	PA; SP
DOPTELET	2	PA; SP
DOPTELET SPRINKLE	2	PA; SP
EMPAVELI	2	PA; SP
EPOGEN	E	
FABHALTA	2	PA; SP; QL
FULPHILA	E	
FYLNETRA	E	
GRANIX	E	
NEULASTA ONPRO	2	PA; SP

Drug Name	Drug Tier	Notes
NEULASTA SUBCUTANEOUS SOLUTION	3	PA; SP
NEULASTA SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	2	PA; SP
NEUPOGEN	E	
NIVESTYM	2	PA; SP
NYPOZI	E	
NYVEPRIA	E	
PIASKY	E	
PROCRT	2	PA; SP
PROMACTA	E	
RELEUKO	E	
RETACRIT	2	PA; SP
ROLVEDON	E	
RYZNEUTA	E	
SEVENFACT	E	
SOLIRIS	E	
STIMUFEND	E	
tranexamic acid oral	1	
UDENYCA	2	PA; SP
UDENYCA ONBODY	2	PA; SP
ULTOMIRIS	2	PA; SP
VAFSEO	E	
VOYDEYA	2	PA; SP; QL
WAYRILZ	E	
ZARXIO	2	PA; SP
ZIEXTENZO	E	
Cardiovascular Agents - Drugs for Heart and Circulation Conditions		
amiodarone hcl oral	1	
amlodipine besylate oral	1	
amlodipine besylate-benazepril hcl	1	

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

Drug Name	Drug Tier	Notes
amlodipine besylate-valsartan	1	
ARBLI	3	
ATACAND	E	
atenolol oral	1	
ATORVALIQ	E	
atorvastatin calcium oral	1	
ATTRUBY	E	
AVAPRO	E	
AZOR	E	
benazepril hcl oral	1	
BENICAR	E	
BENICAR HCT	E	
bisoprolol fumarate oral tablet 10 mg, 5 mg	1	
bisoprolol-hydrochlorothiazide	1	
bumetanide oral	1	
BYSTOLIC	E	
CAMZYOS	3	SP
CARDAMYST	E	
CARDIZEM LA	E	
cartia xt	1	
carvedilol	1	
CATAPRES-TTS-1	E	
CATAPRES-TTS-2	E	
CATAPRES-TTS-3	E	
chlorthalidone	1	
clonidine hcl oral tablet 0.1 mg, 0.2 mg, 0.3 mg	1	
COLESTID	E	
colestipol hcl oral tablet	1	
CONJUPRI	E	
COREG	E	
COREG CR	E	
CORLANOR	E	
COZAAR	E	
CRESTOR	E	

Drug Name	Drug Tier	Notes
diltiazem hcl er coated beads oral capsule extended release 24 hour 120 mg, 180 mg, 240 mg, 300 mg	1	
diltiazem hcl er oral capsule extended release 24 hour	1	
dilt-xr	1	
DIOVAN	E	
DIOVAN HCT	E	
doxazosin mesylate oral	1	
EDARBI	E	
EDARBYCLOR	3	ST
enalapril maleate oral tablet	1	
ENBUMYST	E	
ENTRESTO ORAL CAPSULE SPRINKLE	2	
ENTRESTO ORAL TABLET	E	
EXFORGE	E	
EXFORGE HCT	E	
ezetimibe oral	1	
fenofibrate micronized oral capsule 134 mg, 200 mg, 43 mg, 67 mg	1	
fenofibrate oral capsule 134 mg, 200 mg, 67 mg	1	
fenofibrate oral tablet 145 mg, 160 mg, 48 mg, 54 mg	1	
flecainide acetate	1	
FUROSCIX	E	
furosemide oral tablet	1	
gemfibrozil oral	1	
guanfacine hcl	1	
HEMANGEOL	3	
HEMICLOR	E	
hydralazine hcl oral	1	

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

Drug Name	Drug Tier	Notes
hydrochlorothiazide oral	1	
HYZAAR	E	
icosapent ethyl	1	
INDERAL LA	E	
INDERAL XL	E	
INNOPRAN XL	E	
INPEFA	E	
INZIRQO	E	
irbesartan	1	
irbesartan-hydrochlorothiazide	1	
isosorbide mononitrate er	1	
JAVADIN	E	
KAPSPARGO SPRINKLE	E	
KATERZIA	E	
labetalol hcl oral	1	
LASIX	E	
LASIX ONYU	E	
LEQVIO	E	
LEROCHOL	E	
LESCOL XL	E	
LEVAMLODIPINE MALEATE	E	
LIPITOR	E	
lisinopril oral	1	
lisinopril-hydrochlorothiazide	1	
LIVALO	E	
LODOCO	E	
LOPRESSOR ORAL SOLUTION	3	
losartan potassium oral	1	
losartan potassium-hctz	1	
LOTREL ORAL CAPSULE 5-10 MG	E	
lovastatin oral	1	

Drug Name	Drug Tier	Notes
LOVAZA	E	
metoprolol succinate er	1	
metoprolol tartrate oral tablet 100 mg, 25 mg, 37.5 mg, 50 mg, 75 mg	1	
MICARDIS HCT	E	
midodrine hcl	1	
minoxidil oral	1	
MULTAQ	3	
MYQORZO	3	SP
nebivolol hcl	1	
NEXLETOL	2	PA; QL
NEXLIZET	2	PA; QL
nifedipine er	1	
nifedipine er osmotic release	1	
nitroglycerin sublingual	1	
NITROSTAT	E	
NORLIQVA	3	
NORVASC	E	
olmesartan medoxomil oral	1	
olmesartan medoxomil-hctz	1	
omega-3-acid ethyl esters	1	
PRALUENT	E	
pravastatin sodium	1	
prazosin hcl oral	1	
propranolol hcl er	1	
propranolol hcl oral tablet	1	
QUESTRAN	E	
QUESTRAN LIGHT	E	
ramipril	1	
ranolazine er	1	
REDEMPLO	E	
REPATHA SURECLICK	2	

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

Drug Name	Drug Tier	Notes
rosuvastatin calcium oral	1	
sacubitril-valsartan	1	
SDAMLO	E	
simvastatin oral	1	
SOAANZ	E	
spironolactone oral tablet	1	
TEKTURNA	2	
telmisartan	1	
TENORMIN	E	
THALITONE	E	
TIKOSYN	E	
TOPROL XL	E	
torsemide	1	
triamterene-hctz	1	
TRIBENZOR	E	
TRYNGOLZA SUBCUTANEOUS SOLUTION AUTO- INJECTOR 80 MG/0.8ML	3	PA; SP; QL
valsartan oral tablet	1	
valsartan- hydrochlorothiazide	1	
VASCEPA	2	
verapamil hcl er oral tablet extended release	1	
VERQUVO	3	PA; QL
VYNDAMAX	2	PA; SP; QL
VYTORIN	E	
WELCHOL	E	
ZESTRIL	E	
ZETIA	E	
ZOCOR	E	
ZYPITAMAG	E	

Drug Name	Drug Tier	Notes
Central Nervous System Agents - Drugs for Attention Deficit Disorder		
ADDERALL	E	
ADDERALL XR	E	
ADZENYS XR-ODT	E	
amphetamine- dextroamphetamine	1	QL
amphetamine- dextroamphetamine er	1	QL
amphet-dextroamphet 3-bead er	1	QL
ARYNTA	E	
atomoxetine hcl oral capsule	1	QL
AZSTARYS	2	ST; QL
clonidine hcl er	1	
COTEMPLA XR-ODT	E	
DAYTRANA	E	
dexmethylphenidate hcl	1	QL
dexmethylphenidate hcl er	1	QL
dextroamphetamine sulfate oral tablet	1	QL
DYANAVEL XR	E	
EVEKEO	E	
FOCALIN	E	
FOCALIN XR	E	
guanfacine hcl er	1	
INTUNIV	E	
JORNAY PM	3	ST; QL
lisdexamfetamine dimesylate	1	QL
METADATE CD	E	
methylphenidate hcl er	1	QL
methylphenidate hcl er (cd)	1	QL
methylphenidate hcl er (la)	1	QL

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

Drug Name	Drug Tier	Notes
methylphenidate hcl er (osm) oral tablet extended release 18 mg, 27 mg, 36 mg, 54 mg	1	QL
methylphenidate hcl er (xr)	1	QL
methylphenidate hcl oral	1	QL
MYDAYIS	E	
QELBREE	E	
QUILLICHEW ER	E	
QUILLIVANT XR	E	
RITALIN	E	
RITALIN LA	E	
VYVANSE ORAL CAPSULE	3	ST; QL
ZENZEDI	E	
Central Nervous System Agents - Drugs for Multiple Sclerosis		
AMPYRA	E	
AUBAGIO	E	
AVONEX PEN	2	PA; SP; QL
AVONEX PREFILLED	2	PA; SP; QL
BAFIERTAM	2	PA; SP; QL
BETASERON	2	PA; SP; QL
COPAXONE	E	
dimethyl fumarate oral	1	PA; SP; QL
GILENYA ORAL CAPSULE 0.5 MG	E	
KESIMPTA	2	PA; SP; QL
MAVENCLAD	E	
MAYZENT	2	PA; SP; QL
MAYZENT STARTER PACK	2	PA; SP; QL
PLEGRIDY	E	
PLEGRIDY STARTER PACK	E	
PONVORY	E	

Drug Name	Drug Tier	Notes
PONVORY STARTER PACK	E	
REBIF	E	
REBIF REBIDOSE	E	
REBIF REBIDOSE TITRATION PACK	E	
REBIF TITRATION PACK	E	
TASCENSO ODT	E	
TECFIDERA	E	
TYRUKO	3	PA; SP; QL
TYSABRI	3	PA; SP; QL
VUMERITY	2	PA; SP; QL
ZEPOSIA	3	PA; SP; QL
ZEPOSIA 7-DAY STARTER PACK	3	PA; SP; QL
ZEPOSIA STARTER KIT	3	PA; SP; QL
Central Nervous System Agents - Miscellaneous		
AUSTEDO	2	PA; SP
AUSTEDO XR	2	PA; SP
AUSTEDO XR PATIENT TITRATION	2	PA; SP
CONTRACE	E	
DAYBUE	E	
DAYBUE STIX	E	
GRALISE	3	ST; QL
HORIZANT	E	
INGREZZA	2	PA; SP
LYRICA	E	
LYRICA CR	E	
phentermine hcl oral capsule	1	
phentermine hcl oral tablet 37.5 mg	1	
pregabalin oral capsule	1	QL
QSYMIA	2	PA
RADICAVA ORS	2	PA; SP

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

Drug Name	Drug Tier	Notes
RADICAVA ORS STARTER KIT	2	PA; SP
SAVELLA	E	
SAVELLA TITRATION PACK	E	
TEGLUTIK	2	QL
TONMYA	E	
VYLEESI	3	PA; QL
WAINUA SUBCUTANEOUS SOLUTION AUTO-INJECTOR	3	PA; SP; QL
Dental and Oral Agents - Drugs for Mouth and Throat Conditions		
chlorhexidine gluconate mouth/throat	1	
lidocaine viscous hcl	1	
periogard	1	
Dermatological Agents - Drugs for Skin Conditions		
ABSORICA	E	
ABSORICA LD	3	PA
ACANYA	E	
accutane	1	
ACZONE	E	
ADBRY	2	PA; SP; QL
AKLIEF	3	PA
ALA SCALP	E	
ala-cort	1	
amnesteem	1	
AMZEEQ	3	
ANZUPGO	3	PA; QL
ARAZLO	E	
azelaic acid external	1	
BENZAMYCIN	E	
betamethasone dipropionate external	1	

Drug Name	Drug Tier	Notes
CABTREO	E	
CALCIPOTRIENE EXTERNAL FOAM	E	
CIBINQO	2	PA; SP; QL
claravis	1	
clindacin etz	1	
clindacin-p	1	
CLINDAGEL	E	
clindamycin phos (twice-daily)	1	
clindamycin phos-benzoyl perox external gel 1.2-3.75 %	E	
clindamycin phos-benzoyl perox external gel 1-5 %, 1.2-2.5 %	1	
clindamycin phosphate external lotion	1	
clindamycin phosphate external solution	1	
clindamycin phosphate external swab	1	
CLOBETASOL PROPIONATE EXTERNAL CREAM 0.025 %	E	
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	
CORDRAN	E	
desonide external cream	1	
desonide external ointment	1	

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

Drug Name	Drug Tier	Notes
diclofenac sodium external gel 3 %	1	QL
doxycycline	E	
DUOBRII	E	
DUPIXENT	2	PA; SP; QL
EBGLYSS	2	PA; SP; QL
EMROSI	E	
ENSTILAR	3	QL
EPSOLAY	E	
EUCRISA	2	ST
FINACEA EXTERNAL FOAM	3	
fluocinonide external cream	1	
fluocinonide external ointment	1	
fluocinonide external solution	1	
FLUOROURACIL EXTERNAL CREAM 0.5 %	E	
fluorouracil external cream 5 %	1	
fluticasone propionate external cream	1	
HALOBETASOL PROPIONATE EXTERNAL LOTION	E	
HALOG EXTERNAL CREAM	E	
HYDROCORTISONE ACETATE EXTERNAL CREAM 2.5 %	E	
hydrocortisone external cream 1 %, 2.5 %	1	
hydrocortisone external ointment 1 %, 2.5 %	1	
HYDROCORTISONE EXTERNAL SOLUTION	E	
HYFTOR	E	

Drug Name	Drug Tier	Notes
imiquimod external cream 5 %	1	
IMPOYZ	E	
isotretinoin oral capsule 10 mg, 20 mg, 30 mg, 40 mg	1	
KLISYRI (250 MG)	3	ST
KLISYRI (350 MG)	3	ST
LEQSELVI	2	PA; SP; QL
LEXETTE	E	
LITFULO	2	PA; SP; QL
metronidazole external cream	1	
metronidazole external gel	1	
mometasone furoate external	1	
NEMLUVIO	2	SP
NORITATE	E	
ONEXTON	1	
OPZELURA	2	ST; QL
ORACEA	E	
PROPECIA	E	
QBREXZA	3	QL
RETIN-A	E	
RHOFADE	E	
SANTYL	3	QL
SOFDRA	3	QL
SOOLANTRA	3	
SORILUX	E	
TACLONEX	E	
tacrolimus external	1	QL
TAZAROTENE EXTERNAL FOAM	E	
TAZORAC	E	
TOPICORT SPRAY	E	
tretinoin external	1	
triamcinolone acetonide external cream	1	

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

Drug Name	Drug Tier	Notes
triamcinolone acetonide external lotion	1	
triamcinolone acetonide external ointment 0.025 %, 0.1 %, 0.5 %	1	
triderm	1	
TWYNEO	E	
ULTRAVATE	E	
VTAMA	2	ST
VYJUVEK	2	SP
WINLEVI	E	
WYNZORA	3	QL
YCANTH	3	
ZELSUVMI	3	
zenatane	1	
ZEVASKYN BATCH UP TO 12 SHEETS	E	
ZIANA	E	
ZILXI	3	ST
ZORYVE	2	ST
ZYCLARA PUMP	E	
Diabetes - Antidiabetic Agents		
ALOGLIPTIN BENZOATE	E	
ALOGLIPTIN-METFORMIN HCL	E	
ALOGLIPTIN-PIOGLITAZONE	E	
BEXAGLIFLOZIN	E	
BRENZAVVY	E	
BRYNOVIN	E	
dapagliflozin	1	
DAPAGLIFLOZIN-SAXAGLIPTIN	E	
FARXIGA	E	
glimepiride oral tablet 1 mg, 2 mg, 4 mg	1	
glipizide er	1	

Drug Name	Drug Tier	Notes
glipizide oral tablet 10 mg, 5 mg	1	
GLYXAMBI	2	
INVOKAMET	E	
INVOKAMET XR	E	
INVOKANA	E	
JANUMET	E	
JANUMET XR	E	
JANUVIA	E	
JARDIANCE	2	
JENTADUETO	2	
JENTADUETO XR	2	
liraglutide	1	PA; QL
metformin hcl er	1	
metformin hcl er (mod)	E	
metformin hcl er (osm)	E	
metformin hcl oral tablet 1000 mg, 500 mg, 850 mg	1	
metformin hcl oral tablet 625 mg	E	
MOUNJARO	2	PA; QL
OZEMPIC	2	PA; QL
pioglitazone hcl	1	
RYBELSUS	2	PA; QL
SEGLUROMET	E	
SITAGLIPT BASE-METFORM HCL ER	E	
SITAGLIPTIN	E	
SITAGLIPTIN BASE-METFORMIN HCL	E	
SOLQUA	2	
STEGLATRO	E	
STEGLUJAN	E	
SYNJARDY	2	
SYNJARDY XR	2	
TRADJENTA	2	
TRIJARDY XR	2	
TRULICITY	2	PA; QL

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

Drug Name	Drug Tier	Notes
TZIELD	E	
VICTOZA	E	
XIGDUO XR	E	
ZITUVIMET	E	
ZITUVIMET XR	E	
ZITUVIO	E	
Diabetes - Glucose Monitoring		
ACCU-CHEK AVIVA DEVICE	E	
ACCU-CHEK AVIVA PLUS KIT W/DEVICE	E	
ACCU-CHEK FASTCLIX LANCET KIT	2	
ACCU-CHEK GUIDE	E	
ACCU-CHEK GUIDE CONTROL	E	
ACCU-CHEK GUIDE KIT W/DEVICE	E	
ACCU-CHEK GUIDE TEST STRIPS	E	
ACCU-CHEK SMARTVIEW CONTROL	E	
ACCU-CHEK SMARTVIEW TEST STRIPS	E	
ACCU-CHEK SOFTCLIX LANCET DEVICE KIT	2	
ACCUTREND GLUCOSE	E	
ACCUTREND GLUCOSE CONTROL	E	
ADVANCE INTUITION CONTROL	E	
ADVANCE INTUITION METER	E	
ADVANCE INTUITION MONITOR	E	

Drug Name	Drug Tier	Notes
ADVANCE INTUITION TEST	E	
ADVANCE MICRO-DRAW CONTROL	E	
ADVANCE MICRO-DRAW METER	E	
ADVANCE MICRO-DRAW NORMAL	E	
ADVANCE MICRO-DRAW TEST	E	
ADVOCATE BLOOD GLUCOSE MONITOR	E	
ADVOCATE BLOOD GLUCOSE SYSTEM	E	
ADVOCATE CONTROL SOLUTION	E	
ADVOCATE REDI-CODE	E	
ADVOCATE REDI-CODE+	E	
ADVOCATE REDI-CODE+ CONTROL	E	
ADVOCATE REDI-CODE+ TEST	E	
ADVOCATE TEST	E	
AGAMATRIX AMP TEST	E	
AGAMATRIX CONTROL	E	
AGAMATRIX CONTROL LEVEL 2	E	
AGAMATRIX CONTROL LEVEL 4	E	
AGAMATRIX CONTROL NORMAL/HIGH	E	
AGAMATRIX JAZZ TEST	E	
AGAMATRIX JAZZ WIRELESS 2	E	
AGAMATRIX PRESTO	E	
AGAMATRIX PRESTO TEST	E	

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

Drug Name	Drug Tier	Notes
ASSURE 3 CONTROL	E	
ASSURE 3 TEST	E	
ASSURE 4 CONTROL LEVEL 1 & 2	E	
ASSURE 4 METER	E	
ASSURE 4 TEST	E	
ASSURE CONTROL SOLUTION 2/3	E	
ASSURE DOSE CONTROL	E	
ASSURE DOSE NORM/HIGH CONTROL	E	
ASSURE II	E	
ASSURE II CHECK	E	
ASSURE II CONTROL	E	
ASSURE II CONTROL LEVEL 1 & 2	E	
ASSURE PLATINUM	E	
ASSURE PLATINUM METER	E	
ASSURE PRISM CONTROL LEVEL 1	E	
ASSURE PRISM MULTI METER	E	
ASSURE PRISM MULTI TEST	E	
ASSURE PRO BLOOD GLUCOSE METER	E	
ASSURE PRO CONTROL LEVEL 1 & 2	E	
ASSURE PRO TEST	E	
ASSURE TITANIUM	E	
ASSURE TITANIUM BLOOD GLUCOSE	E	
BD LATITUDE DIABETES	E	
BD LOGIC BLOOD GLUCOSE MONITOR	E	
BIGFOOT UNITY PROGRAM	E	

Drug Name	Drug Tier	Notes
BIOTEL CARE BLOOD GLUCOSE	E	
BIOTEL CARE BLOOD GLUCOSE SYST	E	
BIOTEL CARE TEST STRIPS	E	
BLOOD GLUCOSE MONITOR SYSTEM	E	
BLOOD GLUCOSE MONITORING 333	E	
BLOOD GLUCOSE TEST	E	
BLOOD GLUCOSE TEST STRIPS 333	E	
BLULINK CONTROL HIGH & LOW	E	
BLULINK GLUCOSE MONITORING SYS	E	
BLULINK GLUCOSE TEST	E	
CARESENS CONTROL A	E	
CARESENS CONTROL SOLUTION A/B	E	
CARESENS N FELIZ	E	
CARESENS N FELIZ BT	E	
CARESENS N GLUCOSE SYSTEM	E	
CARESENS N GLUCOSE TEST	E	
CARESENS N PLUS BT	E	
CARESENS N VOICE SYSTEM	E	
CARESENS S CONTROL SOLN A/B	E	
CARESENS S FIT BLOOD GLUC MON	E	
CARESENS S FIT BT BLOOD GLUC	E	

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

Drug Name	Drug Tier	Notes
CARESENS S GLUCOSE TEST	E	
CARETOUCH CONTROL SOL LEVEL 2	E	
CARETOUCH MONITOR SYSTEM	E	
CARETOUCH TEST	E	
CLEVER CHEK AUTO-CODE SYSTEM	E	
CLEVER CHEK AUTO-CODE TEST	E	
CLEVER CHEK AUTO-CODE VOICE	E	
CLEVER CHEK SYSTEM	E	
CLEVER CHEK TEST	E	
CLEVER CHOICE AUTO-CODE SYSTEM	E	
CLEVER CHOICE AUTO-CODE TEST	E	
CLEVER CHOICE GLUCOSE CONTROL	E	
CLEVER CHOICE MICRO SYSTEM	E	
CLEVER CHOICE MICRO TEST	E	
CLEVER CHOICE MINI SYSTEM	E	
CLEVER CHOICE NO CODING	E	
CLEVER CHOICE TALK SYSTEM	E	
CONTOUR NEXT EZ KIT W/DEVICE	2	
CONTOUR NEXT GEN MONITOR KIT W/DEVICE	2	
CONTOUR NEXT ONE KIT W/DEVICE	2	
CONTOUR NEXT GEN TEST STRIPS	2	QL

Drug Name	Drug Tier	Notes
CONTOUR PLUS BLUE KIT W/DEVICE	2	
CONTOUR PLUS TEST STRIP	2	QL
CONTOUR TEST STRIPS	2	QL
COOL BLOOD GLUCOSE TEST STRIPS	E	
COOL CONTROL A	E	
COOL CONTROL B	E	
COOL MONITOR	E	
COOL MONITOR KIT	E	
CVS ADVANCED GLUCOSE TEST	E	
CVS BLOOD GLUCOSE METER	E	
CVS GLUCOSE METER TEST STRIPS	E	
CVS TRUE METRIX GLUCOSE TEST	E	
D-CARE BLOOD GLUCOSE	E	
D-CARE GLUCOMETER	E	
DIABETES CARE	E	
DIATHRIVE BLOOD GLUCOSE METER	E	
DIATHRIVE BLOOD GLUCOSE TEST	E	
DIATHRIVE GLUCOSE CONTROL SOLN	E	
DIATHRIVE GLUCOSE TEST	E	
DIATHRIVE+ GLUCOSE MONITOR	E	
DIATHRIVE+ GLUCOSE TEST	E	
DUO-CARE CONTROL SOLUTION	E	
DUO-CARE TEST	E	

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

Drug Name	Drug Tier	Notes
EASY MAX BLOOD GLUCOSE TEST	E	
EASY MAX T1 GLUCOSE SYSTEM	E	
EASY PLUS II CONTROL	E	
EASY PLUS II GLUCOSE SYSTEM	E	
EASY PLUS II GLUCOSE TEST	E	
EASY STEP CONTROL	E	
EASY STEP GLUCOSE MONITOR	E	
EASY STEP TEST	E	
EASY TALK BLOOD GLUCOSE SYSTEM	E	
EASY TALK BLOOD GLUCOSE TEST	E	
EASY TALK CONTROL	E	
EASY TALK PLUS II CONTROL	E	
EASY TALK PLUS II TEST STRIPS	E	
EASY TOUCH CONTROL HIGH & LOW	E	
EASY TOUCH GLUCOSE SYSTEM	E	
EASY TOUCH HEALTHPRO GLUCOSE	E	
EASY TOUCH HEALTHPRO HIGH/LOW	E	
EASY TOUCH TEST	E	
EASY TRAK BLOOD GLUCOSE SYSTEM	E	
EASY TRAK BLOOD GLUCOSE TEST	E	
EASY TRAK CONTROL	E	

Drug Name	Drug Tier	Notes
EASY TRAK II BLOOD GLUCOSE SYS	E	
EASY TRAK II CONTROL	E	
EASY TRAK II GLUCOSE TEST	E	
EASYGLUCO	E	
EASYMAX 15 LEVEL 2 CONTROL	E	
EASYMAX 15 LEVEL 2-3 CONTROL	E	
EASYMAX 15 TEST	E	
EASYMAX CONTROL	E	
GLUCOSE CONTROL SOLUTIONS	E	
EASYMAX NG BLOOD GLUCOSE	E	
BLOOD GLUCOSE TEST STRIPS	E	
EASYMAX V BLOOD GLUCOSE	E	
EASYPRO BLOOD GLUCOSE MONITOR	E	
EASYPRO BLOOD GLUCOSE TEST	E	
EASYPRO PLUS	E	
ELEMENT AUTOCODE SYSTEM	E	
ELEMENT COMPACT CONTROL 2	E	
ELEMENT COMPACT CONTROL 3	E	
ELEMENT COMPACT GLUCOSE SYSTEM	E	
ELEMENT COMPACT TEST	E	
ELEMENT COMPACT V GLUCOSE SYS	E	
ELEMENT CONTROL	E	
ELEMENT PLUS	E	
ELEMENT TEST	E	

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

Drug Name	Drug Tier	Notes
EMBRACE BLOOD GLUCOSE MONITOR	E	
EMBRACE BLOOD GLUCOSE TEST	E	
EMBRACE CONTROL	E	
EMBRACE EVO BLOOD GLUCOSE TEST	E	
EMBRACE EVO CONTROL LEVEL 1	E	
EMBRACE EVO GLUCOSE MONITORING	E	
EMBRACE GLUCOSE CONTROL	E	
EMBRACE PRO GLUCOSE CONTROL	E	
EMBRACE PRO GLUCOSE METER	E	
EMBRACE PRO GLUCOSE TEST	E	
EMBRACE TALK BLOOD GLUCOSE	E	
EMBRACE TALK GLUCOSE CONTROL	E	
EMBRACE TALK GLUCOSE TEST	E	
EMBRACE TALK MONITORING SYSTEM	E	
EMBRACE WAVE BLOOD GLUCOSE	E	
EMBRACE WAVE GLUCOSE CONTROL	E	
EMBRACE WAVE GLUCOSE METER	E	
EQ BLOOD GLUCOSE TEST	E	
EVERSENSE 365 SENSOR/HOLDER	E	
EVERSENSE 365 SMART TRANSMIT	E	

Drug Name	Drug Tier	Notes
EVERSENSE SENSOR/HOLDER	E	
EVOLUTION AUTOCODE	E	
EVOLUTION CONTROL	E	
FIFTY50 GLUCOSE METER 2.0	E	
FIFTY50 GLUCOSE TEST 2.0	E	
FONDCIRCLE BLOOD GLUCOSE MONIT	E	
FONDCIRCLE BLOOD GLUCOSE TEST	E	
FONDCIRCLE CONTROL SOLUTION	E	
FORA 6 CONNECT	E	
FORA 6 CONNECT/GTEL TEST	E	
FORA CONTROL	E	
FORA D40/G31 BLOOD GLUCOSE	E	
FORA G20 BLOOD GLUCOSE SYSTEM	E	
FORA G20 BLOOD GLUCOSE TEST	E	
FORA G30A BLOOD GLUCOSE SYSTEM	E	
FORA GD20 BLOOD GLUCOSE SYSTEM	E	
FORA GD20 TEST	E	
FORA GD50 BLOOD GLUCOSE SYSTEM	E	
FORA GD50 BLOOD GLUCOSE TEST	E	
FORA GTEL BLOOD GLUCOSE SYSTEM	E	
FORA GTEL BLOOD GLUCOSE TEST	E	
FORA PREMIUM V10 BLE SYSTEM	E	

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

Drug Name	Drug Tier	Notes
FORA TEST N' GO MONITOR	E	
FORA TN'G ADVANCE PRO IN VITRO	E	
FORA TN'G VOICE	E	
FORA TN'G/TN'G VOICE	E	
FORA V10 BLOOD GLUCOSE TEST	E	
FORA V12 BLOOD GLUCOSE SYSTEM	E	
FORA V30A BLOOD GLUCOSE TEST	E	
FORACARE GD40 MONITOR	E	
FORACARE GD40 TEST	E	
FORACARE GDH CONTROL	E	
FORACARE PREMIUM V10	E	
FORACARE PREMIUM V10 TEST	E	
FORACARE TEST N GO MONITOR	E	
FORACARE TEST N GO TEST	E	
FREESTYLE CONTROL SOLUTION	E	
FREESTYLE FREEDOM LITE KIT W/DEVICE	E	
FREESTYLE INSULINX TEST STRIPS	E	
FREESTYLE LIBRE 14 DAY READER	E	
FREESTYLE LIBRE 14 DAY SENSOR	E	
FREESTYLE LIBRE 2 PLUS SENSOR	E	
FREESTYLE LIBRE 2 READER	E	

Drug Name	Drug Tier	Notes
FREESTYLE LIBRE 2 SENSOR	E	
FREESTYLE LIBRE 3 PLUS SENSOR	E	
FREESTYLE LIBRE 3 READER	E	
FREESTYLE LIBRE 3 SENSOR	E	
FREESTYLE LITE	E	
FREESTYLE LITE TEST STRIPS	E	
FREESTYLE PRECISION NEO SYSTEM	E	
FREESTYLE PRECISION NEO TEST STRIPS	E	
FREESTYLE TEST STRIPS	E	
GE100 BLOOD GLUCOSE SYSTEM	E	
GE100 BLOOD GLUCOSE TEST	E	
GE100 CONTROL	E	
GENULTIMATE TEST	E	
GHT BLOOD GLUCOSE MONITOR	E	
GHT TEST	E	
GLUCO PERFECT 3 METER	E	
GLUCO PERFECT 3 TEST	E	
GLUCOCARD 01 BLOOD GLUCOSE	E	
GLUCOCARD 01 CONTROL	E	
GLUCOCARD 01 SENSOR PLUS	E	
GLUCOCARD 01 TEST IN VITRO STRIP	E	
GLUCOCARD 01-MINI GLUCOSE	E	

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

Drug Name	Drug Tier	Notes
GLUCOCARD EXPRESSION CONTROL	E	
GLUCOCARD EXPRESSION MONITOR	E	
GLUCOCARD EXPRESSION TEST	E	
GLUCOCARD SHINE	E	
GLUCOCARD SHINE CONNEX	E	
GLUCOCARD SHINE CONTROL	E	
GLUCOCARD SHINE EXPRESS	E	
GLUCOCARD SHINE TEST	E	
GLUCOCARD SHINE XL	E	
GLUCOCARD VITAL MONITOR	E	
GLUCOCARD VITAL TEST	E	
GLUCOCARD X- METER	E	
GLUCOCARD X- SENSOR	E	
GLUCOCARD X- SENSOR CONTROL	E	
GLUCOCOM BLOOD GLUCOSE MONITOR	E	
GLUCOCOM CONTROL	E	
GLUCOCOM MONITOR	E	
GLUCOCOM TEST	E	
GLUCONAVII BLOOD GLUCOSE SYS	E	
GLUCONAVII BLOOD GLUCOSE TEST	E	
GLUCOSE METER TEST	E	

Drug Name	Drug Tier	Notes
GNP EASY TOUCH CONT HIGH/LOW	E	
GNP EASY TOUCH GLUCOSE METER	E	
GNP EASY TOUCH GLUCOSE TEST	E	
GNP TRUE METRIX AIR METER	E	
GNP TRUE METRIX GLUCOSE METER	E	
GNP TRUE METRIX GLUCOSE STRIPS	E	
GNP TRUETRACK SMART SYSTEM	E	
GNP TRUETRACK TEST STRIPS	E	
GOJJI BLOOD GLUCOSE TEST STRIP	E	
GOJJI BLOOD TEST STRIP/LANCETS	E	
GOJJI CONTROL	E	
HEALTHPRO BLOOD GLUCOSE MONITO	E	
HM EMBRACE TALK SYSTEM	E	
HW EMBRACE PRO GLUCOSE METER	E	
HW EMBRACE PRO GLUCOSE TEST	E	
HW EMBRACE TALK BLOOD GLUCOSE	E	
HW EMBRACE TALK GLUCOSE TEST	E	
IGLUCOSE MONITORING SYSTEM	E	
IGLUCOSE TEST STRIPS	E	
IHEALTH BLOOD GLUCOSE TEST STR	E	
IHEALTH CONTROL SOLUTION	E	

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

Drug Name	Drug Tier	Notes
IHEALTH GLUCO+ KIT 10	E	
IHEALTH GLUCO+ KIT 100	E	
IN TOUCH	E	
IN TOUCH BLOOD GLUCOSE TEST	E	
IN TOUCH GLUCOSE CONTROL	E	
INFINITY BLOOD GLUCOSE SYSTEM	E	
INFINITY BLOOD GLUCOSE TEST	E	
INFINITY CONTROL	E	
INFINITY VOICE	E	
KROGER HEALTHPRO CONTROL HI/LO	E	
KROGER HEALTHPRO GLUCOSE TEST	E	
LANCETS	2	
MEDISENSE GLUCOSE KETONE CONTR	E	
MEIJER TRUE2GO BLOOD GLUCOSE	E	
MEIJER TRUERESULT GLUCOSE SYS	E	
MEIJER TRUETEST TEST	E	
MEIJER TRUETRACK GLUCOSE SYS	E	
MEIJER TRUETRACK TEST	E	
MICRODOT BLOOD GLUCOSE SYSTEM	E	
MICRODOT CONTROL HIGH/LOW	E	
MICRODOT TEST	E	
MM BLOOD GLUCOSE SYSTEM	E	

Drug Name	Drug Tier	Notes
MM BLULINK GLUCOSE MONIT SYS	E	
MM BLULINK GLUCOSE TEST	E	
MM EASY TOUCH GLUCOSE	E	
MM EASY TOUCH GLUCOSE METER	E	
MYGLUCOHEALTH BLOOD GLUCOSE	E	
MYGLUCOHEALTH CONTROL	E	
MYGLUCOHEALTH TEST	E	
NEUTEK 2TEK CONTROL	E	
NEUTEK 2TEK TEST	E	
NOVA MAX BLOOD GLUCOSE SYSTEM	E	
NOVA MAX GLUCOSE TEST	E	
NOVA MAX PLUS GLU/KET CONTROL	E	
ON CALL EXPRESS BLOOD GLUCOSE	E	
ON CALL EXPRESS MONITORING SYS	E	
ONE DROP BLOOD GLUCOSE MONITOR	E	
ONE DROP TEST	E	
ONETOUCH ULTRA TEST STRIPS	E	
ONETOUCH ULTRA 2 KIT W/DEVICE	E	
ONETOUCH ULTRA BLUE TEST	E	
ONETOUCH ULTRA CONTROL	E	
ONETOUCH ULTRA IN VITRO LIQUID	E	
ONETOUCH ULTRA TEST STRIPS	E	

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

Drug Name	Drug Tier	Notes
ONETOUCH VERIO KIT W/DEVICE	E	
ONETOUCH VERIO FLEX SYSTEM	E	
ONETOUCH VERIO REFLECT KIT W/DEVICE	E	
OPTIUMEZ TEST	E	
PHARMACIST CHOICE AUTOCODE	E	
PHARMACIST CHOICE AUTOCODE SYS	E	
PHARMACIST CHOICE MINI SYSTEM	E	
PHARMACIST CHOICE NO CODING	E	
PIP BLOOD GLUCOSE MONITORING	E	
PIP BLOOD GLUCOSE TEST STRIP	E	
PIP GLUCOSE CONTROL SOLUTION	E	
POCKETCHEM EZ CONTROL	E	
POCKETCHEM EZ SYSTEM	E	
POCKETCHEM EZ TEST	E	
POGO AUTOMATIC BLOOD GLUCOSE	E	
POGO AUTOMATIC TEST CARTRIDGES	E	
PRECISION GLUCOSE KETONE CONTR	E	
PRECISION XTRA BLOOD GLUCOSE STRIPS	E	
PRO VOICE V8/V9 GLUCOSE	E	

Drug Name	Drug Tier	Notes
PRO VOICE V9 GLUCOSE SYSTEM	E	
PRODIGY AUTOCODE BLOOD GLUCOSE	E	
PRODIGY CONTROL SOLUTION	E	
PRODIGY NO CODING BLOOD GLUC	E	
PRODIGY POCKET BLOOD GLUCOSE	E	
PRODIGY VOICE BLOOD GLUCOSE	E	
PTS PANELS EGLU TEST	E	
QUICK TOUCH BLOOD GLUCOSE	E	
QUICK TOUCH BLOOD GLUCOSE TEST	E	
QUICKTEK CONTROL SOLUTION	E	
QUICKTEK TEST	E	
QUICKTEK/METER	E	
QUINTET AC BLOOD GLUCOSE	E	
QUINTET AC BLOOD GLUCOSE TEST	E	
QUINTET BLOOD GLUCOSE SYSTEM	E	
QUINTET BLOOD GLUCOSE TEST	E	
QUINTET CONTROL HIGH/NORMAL	E	
REFUAH PLUS BLOOD GLUCOSE TEST	E	
REFUAH PLUS GLUCOSE CONTROL	E	
REFUAH PLUS MONITORING SYSTEM	E	
RELION ALL-IN-ONE	E	

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

Drug Name	Drug Tier	Notes
RELION BLOOD GLUCOSE TEST	E	
RELION CONFIRM GLUCOSE MONITOR	E	
RELION CONFIRM/MICRO TEST	E	
RELION GLUCOSE TEST STRIPS	E	
RELION MICRO	E	
RELION PREMIER BLU MONITOR	E	
RELION PREMIER CLASSIC	E	
RELION PREMIER COMPACT SYSTEM	E	
RELION PREMIER TEST	E	
RELION PREMIER VOICE MONITOR	E	
RELION PRIME MONITOR	E	
RELION PRIME TEST	E	
RELION TRUE MET AIR GLUC METER	E	
RELION TRUE METRIX TEST STRIPS	E	
RELION ULTIMA GLUCOSE SYSTEM	E	
RELION ULTIMA TEST	E	
REXALL BLOOD GLUCOSE SYSTEM KIT W/DEVICE	E	
RIGHTEST GC300 CONTROL	E	
RIGHTEST GM100 BLOOD GLUCOSE	E	
RIGHTEST GM300 BLOOD GLUCOSE	E	
RIGHTEST GM550 BLOOD GLUCOSE	E	
RIGHTEST GS100 BLOOD GLUCOSE	E	

Drug Name	Drug Tier	Notes
RIGHTEST GS300 BLOOD GLUCOSE	E	
RIGHTEST GS550 BLOOD GLUCOSE	E	
RIGHTEST GT333 BLOOD GLUCOSE	E	
RIGHTEST GT333 GLUCOSE TEST	E	
SMARTEST BLOOD GLUCOSE TEST	E	
SMARTEST CONTROL MEDIUM	E	
SMARTEST EJECT	E	
SMARTEST EJECT STARTER	E	
SMARTEST PERSONA STARTER	E	
SMARTEST PRONTO STARTER	E	
SMARTEST PROTEGE	E	
SMARTEST PROTEGE STARTER	E	
SOLUS V2 BLOOD GLUCOSE SYSTEM	E	
SOLUS V2 CONTROL	E	
SOLUS V2 TEST	E	
SUPREME II HIGH/LOW CONTROL	E	
SUPREME TEST	E	
TAI DOC CONTROL	E	
TGT BLOOD GLUCOSE TEST IN VITRO STRIP	E	
TRUE FOCUS BLOOD GLUCOSE METER	E	
TRUE FOCUS BLOOD GLUCOSE STRIP	E	
TRUE METRIX AIR GLUCOSE METER	E	
TRUE METRIX BLOOD GLUCOSE TEST	E	

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

Drug Name	Drug Tier	Notes
TRUE METRIX GO GLUCOSE METER	E	
TRUE METRIX LEVEL 1	E	
TRUE METRIX LEVEL 2	E	
TRUE METRIX LEVEL 3	E	
TRUE METRIX METER	E	
TRUE METRIX PRO BLOOD GLUCOSE	E	
TRUENESS BLOOD GLUCOSE MONITOR	E	
TRUENESS BLOOD GLUCOSE STRIPS	E	
TRUERESULT BLOOD GLUCOSE	E	
TRUETEST TEST	E	
TRUETRACK BLOOD GLUCOSE	E	
TRUETRACK SMART SYSTEM	E	
TRUETRACK TEST	E	
UNISTRIp CONTROL	E	
UNISTRIp1 GENERIC	E	
VERASENS BLOOD GLUCOSE METER	E	
VERASENS BLOOD GLUCOSE SYSTEM	E	
VERASENS BLOOD GLUCOSE TEST	E	
VERASENS GLUCOSE CONTROL	E	
VIVAGUARD INO CONTROL SOLUTION	E	
VIVAGUARD INO GLUCOSE METER	E	
VIVAGUARD INO SMART GLUC METER	E	
VIVAGUARD INO TEST STRIPS	E	

Drug Name	Drug Tier	Notes
Diabetes - Glycemic Agents		
BAQSIMI ONE PACK	2	
BAQSIMI TWO PACK	2	
GLUCAGON EMERGENCY KIT	2	
GVOKE HYPOPEN 1-PACK	2	
GVOKE HYPOPEN 2-PACK	2	
GVOKE KIT	2	
GVOKE PFS	2	
Diabetes - Insulins		
ADMELOG	1	
ADMELOG SOLOSTAR	1	
APIDRA SOLOSTAR	1	
APIDRA VIAL	1	
AQINJECT PEN NEEDLE	2	
BASAGLAR KWIKPEN	1	
BD PEN NEEDLE MICRO ULTRAFINE	2	
BD PEN NEEDLE MINI ULTRAFINE	2	
BD PEN NEEDLE NANO ULTRAFINE	2	
BD PEN NEEDLE ORIG ULTRAFINE	2	
BD PEN NEEDLE SHORT ULTRAFINE	2	
BD ULTRA-FINE INSULIN SYRINGES 30G X 1/2" 0.3 ML, 30G X 1/2" 0.5 ML, 30G X 1/2" 1 ML, 31G X 5/16" 0.3 ML, 31G X 5/16" 0.5 ML, 31G X 5/16" 1 ML	2	
BD ULTRA-FINE PEN NEEDLES	2	

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

Drug Name	Drug Tier	Notes
BD VEO INSULIN SYR ULTRAFINE 31G X 15/64" 1 ML	2	
CEQUR SIMPLICITY 2U 10PK	2	
FIASP	1	
FIASP FLEXTOUCH	1	
FIASP PENFILL	1	
FIASP PUMPCART	1	
HUMALOG	1	
HUMALOG KWIKPEN	1	
HUMALOG MIX 50/50 KWIKPEN	1	
HUMALOG MIX 75/25 KWIKPEN	1	
HUMALOG MIX 75/25 VIAL	1	
HUMALOG U-100 JUNIOR KWIKPEN	1	
HUMULIN 70/30 KWIKPEN	1	
HUMULIN 70/30 VIAL	1	
HUMULIN N KWIKPEN	1	
HUMULIN N VIAL	1	
HUMULIN R U-500 KWIKPEN	1	
HUMULIN R VIAL	1	
INSULIN GLARGINE MAX SOLOSTAR	E	
INSULIN GLARGINE SOLOSTAR	E	
INSULIN GLARGINE- YFGN	E	
INSULIN LISPRO	1	
INSULIN LISPRO (1 UNIT DIAL)	1	
INSULIN LISPRO JUNIOR KWIKPEN	1	
INSULIN LISPRO PROT & LISPRO	1	

Drug Name	Drug Tier	Notes
INSULIN PEN NEEDLES 29G X 12MM , 30G X 5 MM , 31G X 5 MM , 31G X 6 MM , 31G X 8 MM , 32G X 4 MM	2	
LANTUS SOLOSTAR	1	
LANTUS U-100 VIAL	1	
LYUMJEV KWIKPEN	1	
LYUMJEV VIAL	1	
MERILOG	1	
MERILOG SOLOSTAR	1	
NOVOFINE PEN NEEDLE	2	
NOVOFINE PLUS PEN NEEDLE	2	
NOVOLIN 70/30 FLEXPEN	1	
NOVOLIN 70/30 FLEXPEN RELION	E	
NOVOLIN 70/30 RELION	E	
NOVOLIN 70/30 VIAL	1	
NOVOLIN N FLEXPEN	1	
NOVOLIN N FLEXPEN RELION	E	
NOVOLIN N RELION	E	
NOVOLIN N VIAL	1	
NOVOLIN R FLEXPEN	1	
NOVOLIN R FLEXPEN RELION	E	
NOVOLIN R RELION	E	
NOVOLIN R VIAL	1	
NOVOLOG 70/30 FLEXPEN RELION	E	
NOVOLOG FLEXPEN	1	
NOVOLOG FLEXPEN RELION	E	
NOVOLOG MIX 70/30 FLEXPEN	1	

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

Drug Name	Drug Tier	Notes
NOVOLOG MIX 70/30 RELION	E	
NOVOLOG MIX 70/30 VIAL	1	
NOVOLOG PENFILL	1	
NOVOLOG RELION	E	
NOVOLOG U-100 VIAL	1	
REZVOGLAR KWIKPEN	1	
SEMGLEE (YFGN)	E	
TOUJEO MAX SOLOSTAR	1	
TOUJEO SOLOSTAR	1	
TRESIBA	E	
TRESIBA FLEXTOUCH	E	
Electrolytes / Minerals / Metals / Vitamins		
ACCRUFER	E	
AFLORA	E	
ALTRIVA	E	
AMLADEX	E	
AVOWISE	E	
AZENTRA	E	
AZESCO	E	
CARNITOR ORAL	E	
CARNITOR SF	E	
CITRANATAL 90 DHA	E	
COBALEFOL	E	
COREVIA	E	
CUVRIOR	E	
cyanocobalamin injection solution 1000 mcg/ml	1	
cyanocobalamin nasal	1	
DAVIMET-FLUORIDE	E	
DAVIMET-M	E	
DAYAVITE	E	
DEPLINPRO MOOD HEALTH	E	

Drug Name	Drug Tier	Notes
DERMACINRX BOOSTERVITE	E	
DERMACINRX DAVIMET	E	
DERMACINRX MULTITAM	E	
DERMACINRX MULTIVITAMIN	E	
DERMACINRX PNV PRENATOL	E	
DERMACINRX PRETRATE	E	
DERMACINRX RIBOTIN-E	E	
DERMACINRX ZINTREXYL-C	E	
DEXATRAN	E	
DEXIFOL	E	
DIATROL	E	
DUOVANCE	E	
EMBRIVA	E	
ENBRACE HR	E	
ENLYTE GUMMY+	E	
ergocalciferol oral capsule	1	
EVERCORE	E	
EVERVITA	E	
FEONYX	E	
FINAZOL	E	
FLORAVITA MINI	E	
FLORRAXYL	E	
FLOTREX	E	
FOLA-B COMPLEX	E	
FOLACHEW	E	
FOLAGENT DHA	E	
FOLAMAX	E	
FOLAMED DHA	E	
FOLAPRIME	E	
FOLAREX	E	
FOLASYNC DHA	E	

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

Drug Name	Drug Tier	Notes
FOLATEN	E	
FOLATEXCEL	E	
FOLAWISE	E	
FOLCYTEINE	E	
FOLETRA	E	
folic acid oral tablet 1 mg	1	
FOLICORE B COMPLEX	E	
FOLIFLEX	E	
FOLIKA-BC	E	
FOLITIN-Z	E	
FOLIVANCE	E	
FOLIVEX	E	
FOLIVRA	E	
FOLIXIA	E	
FOLTREXYL	E	
FOLVITA COMPLEX	E	
FOLYRA	E	
GESTYRA	E	
GLP-DLAX	E	
HYLAVITE	E	
HYLAZINC	E	
HYVITE	E	
JENLIVA PRENATAL/POSTNAT AL	E	
JYNARQUE	E	
KEYLOSA	E	
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	
LUMAVEX	E	
LUMIVANCE	E	
LUNAVIRA	E	

Drug Name	Drug Tier	Notes
MATERNACEL	E	
MATERVIA	E	
MATRIAPRO	E	
MEDI TAB	E	
MENATROL	E	
METANXPRO NERVE HEALTH	E	
METAVAX	E	
METAVEX	E	
METAVITE	E	
MICRONEX	E	
MINOVIA	E	
MIREXA	E	
MI-VITE RX	E	
MULTIPRO	E	
MULTITOL-M	E	
multivitamin/fluoride oral suspension	E	
NATAL PNV	E	
NATALCHEW	E	
NATALCORE	E	
NEEVO DHA	E	
NEOMATERNA	E	
NEO-VITAL RX	E	
NESTABS DHA	E	
NESTABS ONE	E	
NEURODANA B- COMPLEX SUPPORT	E	
NEWVITE	E	
NEXOCHW	E	
NICADAN	E	
NICAZEL	E	
NICAZEL FORTE	E	
NICOMIDE	E	
NORIXA	E	
NORVEXA	E	
NOVITE	E	
NOVYRA	E	

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

Drug Name	Drug Tier	Notes
NUTRALYN	E	
NUTRAVANCE	E	
NUTRA-Z+	E	
NUTRIBOOST	E	
NUTRICORE	E	
NUTRIVIO	E	
OB COMPLETE ONE	E	
OB COMPLETE PETITE	E	
OB COMPLETE PREMIER	E	
PAXLYTE	E	
POKONZA	E	
POLY-VI-FLOR	E	
POLY-VI-FLOR/IRON	E	
potassium chloride crystal	1	
potassium chloride er	1	
potassium citrate er	1	
PREGEN DHA	E	
PREGENNA	E	
PRENACORE	E	
PRENATE	E	
PRENATE DHA	E	
PRENATE ELITE	E	
PRENATE ENHANCE	E	
PRENATE ESSENTIAL	E	
PRENATE MINI	E	
PRENATE PIXIE	E	
PRENATE RESTORE	E	
PRENATOL-M	E	
PRENATRIX	E	
PRENATRYL	E	
PRENOVA	E	
PRENYRA	E	
PREV-RX	E	
PROFOLA	E	

Drug Name	Drug Tier	Notes
PUREVITA SUPER B-COMPLEX	E	
RELEVIA	E	
REMEDIENT	E	
REVYRA	E	
SELECT-OB ORAL TABLET CHEWABLE 29-0.6-0.4 MG	E	
SELECT-OB+DHA	E	
SOLIVITE	E	
SYMTREX	E	
SYNVERA	E	
SYPRINE	E	
TERAVAX	E	
TM-DAILY VITE	E	
TREXION	E	
TREXVIA	E	
TRISTART DHA	E	
TRI-VITAMIN WITH FLUORIDE	E	
TRONVITE	E	
TRUE DAILY VITE	E	
TRUE MULTIVITAMIN	E	
TRUEBOOST	E	
TRUEVITE	E	
VALENTA	E	
VELTASSA	3	
VENEXA	E	
VENEXA FE	E	
VENTRIXYL	E	
VENTRIXYL FE	E	
VIRELIX	E	
VIREXA	E	
VITACHEW	E	
VITACORE	E	
VITAFOL FE+	E	
VITAFOL GUMMIES	E	
VITAFOL ULTRA	E	

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

Drug Name	Drug Tier	Notes
VITAFOL-OB	E	
VITAFOL-OB+DHA	E	
VITAFOL-ONE	E	
VITALARA	E	
VITALUX	E	
vitamin d (ergocalciferol) oral capsule 1.25 mg (50000 ut)	1	
VITANEX	E	
VITA-PAC	E	
VITASCRIPT	E	
VITASURE	E	
VITATHELY WITH GINGER	E	
VITAVERA	E	
VITRAMYN	E	
VITRANOL	E	
VITRANOL FE	E	
VITRAX	E	
VITREXATE	E	
VITREXATE FE	E	
VITREXYL	E	
VITREXYL + IRON	E	
VITRION	E	
VYLARIS	E	
WELLFOLA	E	
WESTGEL DHA	E	
ZALVIT	E	
ZELDANA	E	
ZIPHEX	E	
Gastrointestinal Agents - Drugs for Acid Reflux and Ulcer		
ACIPHEX	E	
CARAFATE	E	
DEXILANT	E	
esomeprazole magnesium	1	QL

Drug Name	Drug Tier	Notes
famotidine oral suspension reconstituted	1	
famotidine oral tablet 20 mg, 40 mg	1	
KONVOMEF	E	
lansoprazole oral capsule delayed release	1	QL
misoprostol oral	1	
NEXIUM ORAL CAPSULE DELAYED RELEASE	E	
omeprazole oral capsule delayed release	1	QL
omeprazole-sodium bicarbonate	E	
pantoprazole sodium oral tablet delayed release	1	QL
PREVACID	E	
PREVACID SOLUTAB	E	
RABEPRAZOLE SODIUM ORAL CAPSULE SPRINKLE	E	
sucralfate oral tablet	1	
VOQUEZNA	E	
Gastrointestinal Agents - Drugs for Bowel, Intestine and Stomach Conditions		
AMITIZA	E	
CLENPIQ	3	
constulose	1	
dicyclomine hcl oral capsule	1	
dicyclomine hcl oral tablet 20 mg	1	
diphenoxylate-atropine oral tablet	1	
enulose	1	

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

Drug Name	Drug Tier	Notes
gavilyte-c	1	
gavilyte-g	1	
generlac	1	
glycopyrrolate oral tablet 1 mg, 2 mg	1	
GOLYTELY	E	
IBSRELA	E	
IQIRVO	3	PA; SP; QL
lactulose encephalopathy	1	
lactulose oral solution	1	
LINZESS	2	ST; QL
LIVDELZI	2	PA; SP; QL
loperamide hcl oral capsule	1	
lubiprostone	1	QL
MOTEGRITY	E	
MOTOFEN	E	
MOVANTIK	E	
MOVIPREP	E	
na sulfate-k sulfate-mg sulf	1	
peg-3350/electrolytes	1	
PYLERA	2	
REBYOTA	3	PA; SP
RELISTOR	E	
RELTONE	E	
REZDIFFRA	3	
SUFLAVE	3	
SUPREP BOWEL PREP KIT	3	
SUTAB	3	
SYMPROIC	2	ST; QL
TALICIA	2	
TRULANCE	E	
URSODIOL ORAL CAPSULE 200 MG, 400 MG	E	
VIBERZI	3	PA

Drug Name	Drug Tier	Notes
VOQUEZNA DUAL PAK	2	
VOQUEZNA TRIPLE PAK	2	
VOWST	E	
Genetic or Enzyme Disorder - Drugs for Replacement, Modification, Treatment		
AMONDYS 45	E	
BUPHENYL	E	
CERDELGA	2	PA; SP
CREON	2	
DUVYZAT	E	
ELEVIDYS	E	
ELFABRIO	E	
EXONDYS 51	E	
FABRAZYME	2	PA; SP
HARLIKU	E	
IMCIVREE	E	
ITVISMIA	3	PA; SP
JAVYGTOR	E	
KUVAN	E	
OLPRUVA (2 GM DOSE)	E	
OLPRUVA (3 GM DOSE)	E	
OLPRUVA (4 GM DOSE)	E	
OLPRUVA (5 GM DOSE)	E	
OLPRUVA (6 GM DOSE)	E	
OLPRUVA (6.67 GM DOSE)	E	
ORFADIN	2	PA; SP
PALYNZIQ	E	
PANCREAZE	E	
PERTZYE	E	

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

Drug Name	Drug Tier	Notes
PHEBURANE	3	PA; SP
RAVICTI	E	
SEPHIENCE	E	
SPINRAZA INTRATHECAL SOLUTION 12 MG/5ML	3	PA; SP
SPINRAZA INTRATHECAL SOLUTION 28 MG/5ML, 50 MG/5ML	3	SP
STRENSIQ	2	PA; SP
VILTEPSO	E	
VIOKACE	E	
VYONDYS 53	E	
YUVIWEL	3	SP
ZENPEP	2	
ZOLGENSMA	2	PA; SP
Genitourinary Agents - Drugs for Bladder, Genital and Kidney Conditions		
AURYXIA	E	
CIALIS	E	
CUPRIMINE	E	
ELMIRON	E	
FILSPARI	2	SP
GEMTESA	E	
mirabegron er oral tablet extended release 24 hour	1	
MYRBETRIQ	E	
OXLUMO	2	PA; SP
oxybutynin chloride er	1	
oxybutynin chloride oral tablet 5 mg	1	
penicillamine oral capsule	E	
sildenafil citrate oral tablet 100 mg, 25 mg, 50 mg	1	QL

Drug Name	Drug Tier	Notes
solifenacin succinate	1	
STENDRA	E	
tadalafil oral	1	QL
THIOLA	3	SP
THIOLA EC	3	SP
TOVIAZ	E	
VANRAFIA	3	SP
VELPHORO	E	
VENXXIVA	E	
VIAGRA	E	
VOYXACT	2	SP
VYBRIQUE	E	
Genitourinary Agents - Drugs for Prostate Conditions		
alfuzosin hcl er	1	
AVODART	E	
dutasteride oral	1	
finasteride oral tablet 5 mg	1	
JALYN	E	
tamsulosin hcl	1	
TEZRULY	E	
Hormonal Agents - Adrenal		
ALKINDI SPRINKLE	E	
CORTEF	E	
CORTISONE ACETATE ORAL	E	
dexamethasone oral elixir	1	
dexamethasone oral tablet	1	
EMFLAZA	E	
fludrocortisone acetate oral	1	
HEMADY	E	
hydrocortisone oral	1	
KENALOG-10	E	

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

Drug Name	Drug Tier	Notes
KENALOG-40	E	
KHINDIVI	E	
methylprednisolone oral	1	
prednisolone oral solution	1	
prednisolone sodium phosphate oral solution 15 mg/5ml, 25 mg/5ml, 5 mg/5ml	1	
prednisone oral tablet	1	
PREDNISON ORAL TABLET DELAYED RELEASE	E	
prednisone oral tablet therapy pack	1	
Hormonal Agents - Men's Health		
ANDRELA	E	
ANDRENYX	E	
ANDROGEL PUMP	E	
AVEED	E	
AZMIRO	E	
DEPO-TESTOSTERONE	E	
JATENZO	E	
NATESTO	E	
TESTIM	E	
TESTOPEL	E	
testosterone cypionate intramuscular	1	PA; QL
testosterone transdermal gel 1.62 %, 12.5 mg/act (1%), 20.25 mg/act (1.62%), 25 mg/2.5gm (1%), 40.5 mg/2.5gm (1.62%), 50 mg/5gm (1%)	1	PA; QL
TLANDO	E	
VOGELXO	E	
VOGELXO PUMP	E	

Drug Name	Drug Tier	Notes
XYOSTED	E	
Hormonal Agents - Pituitary		
ACTHAR	2	PA; SP
ACTHAR GEL	2	PA; SP
BYNFEZIA PEN	E	
cabergoline	1	
CETROTIDE	E	
CORTROPHIN	2	PA; SP
CORTROPHIN GEL	2	PA; SP
DESMODA	E	
desmopressin acetate oral	1	
FOLLISTIM AQ	2	PA; SP
ganirelix acetate	1	PA; SP
GENOTROPIN	E	
GENOTROPIN MINIQUICK	E	
GONAL-F	E	
GONAL-F RFF REDIJECT	E	
HUMATROPE	E	
ISTURISA	E	
LUPRON DEPOT (1-MONTH) INTRAMUSCULAR KIT 7.5 MG	2	PA; SP
LUPRON DEPOT (3-MONTH) INTRAMUSCULAR KIT 22.5 MG	2	PA; SP
LUPRON DEPOT (4-MONTH) INTRAMUSCULAR KIT 30MG	2	PA; SP
LUPRON DEPOT (6-MONTH) INTRAMUSCULAR KIT 45MG	2	PA; SP
LUPRON DEPOT-PED (1-MONTH)	2	PA; SP; QL

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

Drug Name	Drug Tier	Notes
LUPRON DEPOT-PED (3-MONTH)	2	PA; SP; QL
LUPRON DEPOT-PED (6-MONTH)	2	PA; SP; QL
LUTRATE DEPOT	E	
MYCAPSSA	E	
NGENLA	2	PA; SP
NORDITROPIN FLEXPOR	2	PA; SP
OMNITROPE	2	PA; SP
ORILISSA	2	PA; QL
OVIDREL	3	PA; SP
PALSONIFY	E	
RECORLEV	E	
SANDOSTATIN	E	
SIGNIFOR	E	
SKYTROFA	3	PA; SP
SOGROYA	3	PA; SP
SOMATULINE DEPOT SUBCUTANEOUS SOLUTION 60 MG/0.2ML, 90 MG/0.3ML	2	PA; SP
TRIPTODUR	2	PA; SP; QL
VABRINTY	E	
ZOMACTON	E	
Hormonal Agents - Selective Estrogen Receptor Modifying Agents		
OSPHENA	3	
Hormonal Agents - Sex Hormones and Birth Control		
afirmelle	1	
altavera	1	
ANNOVERA	3	QL
apri	1	
aubra eq	1	
aurovela 1.5/30	1	

Drug Name	Drug Tier	Notes
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	
BEYAZ	E	
BIJUVA	3	
blisovi 24 fe	1	
blisovi fe 1.5/30	1	
blisovi fe 1/20	1	
camila	1	
chateal eq	1	
CLIMARA	E	
CLIMARA PRO	2	
COMBIPATCH	3	
cyred eq	1	
deblitane	1	
DELESTROGEN	E	
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	
ESTRACE	E	
estradiol oral	1	
estradiol transdermal	1	
estradiol vaginal	1	

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

Drug Name	Drug Tier	Notes
ESTROGEL	E	
etonogestrel-ethinyl estradiol	1	
EVAMIST	3	
falmina	1	
feirza 1.5/30	1	
feirza 1/20	1	
gallifrey	1	
hailey 1.5/30	1	
hailey 24 fe	1	
hailey fe 1.5/30	1	
hailey fe 1/20	1	
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 estrad oral tablet 0.1-20 mg-mcg	1	
LO LOESTRIN FE	E	

Drug Name	Drug Tier	Notes
LOESTRIN 1.5/30 (21)	E	
LOESTRIN 1/20 (21)	E	
LOESTRIN FE 1.5/30	E	
LOESTRIN FE 1/20	E	
loryna	1	
lo-zumandimine	1	
luizza 1.5/30	1	
luizza 1/20	1	
lutera	1	
lyleq	1	
lyllana	1	
lyza	1	
marlissa	1	
medroxyprogesterone acetate intramuscular	1	QL
medroxyprogesterone acetate oral	1	
meleya	1	
microgestin 1.5/30	1	
microgestin 1/20	1	
microgestin fe 1.5/30	1	
microgestin fe 1/20	1	
mili	1	
mono-lynyah	1	
MYFEMBREE	2	PA; QL
NATAZIA	2	
NEXTSTELLIS	3	
nikki	1	
nora-be	1	
norelgestromin-eth estradiol	1	
norethindrone acetate oral	1	
norethindrone acet-ethinyl est	1	
norethindrone oral	1	
norgestimate-eth estradiol oral tablet 0.25-35 mg-mcg	1	

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

Drug Name	Drug Tier	Notes
norgestimate-ethinyl estradiol triphasic	1	
norlyroc	1	
NUVARING	E	
ORIAHNN	2	PA; QL
orquidea	1	
portia-28	1	
PREMARIN ORAL	E	
PREMARIN VAGINAL	2	
PREMPHASE	2	
PREMPRO	2	
progesterone intramuscular	1	
progesterone oral	1	
PROMETRIUM	E	
reclipsen	1	
SAFYRAL	E	
sharobel	1	
SLYND	E	
sprintec 28	1	
syeda	1	
tarina 24 fe	1	
tarina fe 1/20 eq	1	
tri-estarylla	1	
tri-linyah	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	
TWIRLA	E	
VAGIFEM	E	
vestura	1	
vienva	1	
VIVELLE-DOT	E	

Drug Name	Drug Tier	Notes
vylibra	1	
xulane	1	
YASMIN 28	E	
YAZ	E	
yuvaferm	1	
zafemy	1	
zumandimine	1	
Hormonal Agents - Thyroid		
CYTOMEL	E	
EVEXITHROID	E	
LEVOTHYROXINE SODIUM ORAL CAPSULE	E	
levothyroxine sodium oral tablet	1	
levoxyl	1	
liomny	1	
liothyronine sodium oral	1	
methimazole oral	1	
RENTHYROID	E	
SYNTHROID	E	
THYQUIDITY	E	
TIROSINT	E	
TIROSINT-SOL	E	
unithroid	1	
Immunological Agents - Drugs for Immune System Stimulation or Suppression		
ABRILADA (1 PEN)	E	
ABRILADA (2 PEN)	E	
ABRILADA (2 SYRINGE)	E	
ACTEMRA ACTPEN	3	PA; SP; QL
ACTEMRA INTRAVENOUS	3	PA; SP
ACTEMRA SUBCUTANEOUS	3	PA; SP; QL

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

Drug Name	Drug Tier	Notes
ADALIMUMAB-AACF (2 PEN)	E	
ADALIMUMAB-AACF (2 SYRINGE)	E	
ADALIMUMAB-AACF (CD/UC/HS STRT)	E	
ADALIMUMAB-AACF (PS/UV STARTER)	E	
ADALIMUMAB-AATY (1 PEN)	E	
ADALIMUMAB-AATY (2 PEN)	E	
ADALIMUMAB-AATY (2 SYRINGE)	E	
ADALIMUMAB-AATY CD/UC/HS START	E	
ADALIMUMAB-ADAZ	E	
ADALIMUMAB-ADBM (2 PEN)	E	
ADALIMUMAB-ADBM (2 SYRINGE)	E	
ADALIMUMAB-BWWD	E	
ADALIMUMAB-FKJP (2 PEN)	E	
ADALIMUMAB-FKJP (2 SYRINGE)	E	
ADALIMUMAB-RYVK (1 PEN)	E	
ADALIMUMAB-RYVK (2 PEN)	E	
ADALIMUMAB-RYVK (2 SYRINGE)	E	
ALYGLO	E	
AMJEVITA SOLUTION AUTO-INJECTOR 40 MG/0.4ML SUBCUTANEOUS	2	PA; SP; QL
AMJEVITA SOLUTION AUTO-INJECTOR 40 MG/0.4ML SUBCUTANEOUS	E	

Drug Name	Drug Tier	Notes
AMJEVITA SOLUTION AUTO-INJECTOR 80 MG/0.8ML SUBCUTANEOUS	2	PA; SP; QL
AMJEVITA SOLUTION AUTO-INJECTOR 80 MG/0.8ML SUBCUTANEOUS	E	
AMJEVITA SOLUTION PREFILLED SYRINGE 40 MG/0.4ML SUBCUTANEOUS	2	PA; SP; QL
AMJEVITA SOLUTION PREFILLED SYRINGE 40 MG/0.4ML SUBCUTANEOUS	E	
AMJEVITA SUBCUTANEOUS SOLUTION AUTO-INJECTOR 40 MG/0.8ML	E	
AMJEVITA SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 40 MG/0.8ML	2	PA; SP; QL
AMJEVITA-PED 10KG TO <15KG SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 10MG/0.2ML	2	PA; SP; QL
AMJEVITA-PED 15KG TO <30KG SOLUTION PREFILLED SYRINGE 20 MG/0.2ML SUBCUTANEOUS	2	PA; SP; QL
AMJEVITA-PED 15KG TO <30KG SOLUTION PREFILLED SYRINGE 20 MG/0.2ML SUBCUTANEOUS	E	
ANDEMBRY	3	PA; SP; QL
ASCENIV	E	
AVSOLA	2	PA; SP

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

Drug Name	Drug Tier	Notes
AVTOZMA INTRAVENOUS	3	PA; SP
AVTOZMA SUBCUTANEOUS	3	PA; SP; QL
azathioprine oral	1	
BENLYSTA	2	PA; SP
BIMZELX	2	PA; SP; QL
BIVIGAM	3	PA; SP
CIMZIA	2	PA; SP; QL
CIMZIA (1 SYRINGE)	2	PA; SP; QL
CIMZIA (2 SYRINGE)	2	PA; SP; QL
CIMZIA-STARTER	2	PA; SP; QL
CINRYZE	E	
COSENTYX (300 MG DOSE)	E	
COSENTYX 150 MG/ML	E	
COSENTYX SENSOREADY (300 MG)	E	
COSENTYX SENSOREADY PEN	E	
COSENTYX UNOREADY	E	
CUTAQUIG	2	PA; SP
CYLTEZO (2 PEN)	E	
CYLTEZO (2 SYRINGE)	E	
DAWNZERA	3	PA; SP; QL
EKTERLY	E	
ENBREL	2	PA; SP; QL
ENBREL MINI	2	PA; SP; QL
ENBREL SURECLICK	2	PA; SP; QL
ENTYVIO PEN	2	PA; SP; QL
FIRAZYR	E	
HADLIMA	E	
HADLIMA PUSHTOUCH	E	
HIZENTRA	2	PA; SP
HULIO (2 PEN)	E	

Drug Name	Drug Tier	Notes
HULIO (2 SYRINGE)	E	
HUMIRA (1 PEN)	E	
HUMIRA (2 PEN)	E	
HUMIRA (2 SYRINGE)	E	
HUMIRA-CD/UC/HS STARTER	E	
HYRIMOZ	E	
HYRIMOZ-CROHNS/UC STARTER	E	
HYRIMOZ-PED<40KG CROHN STARTER	E	
HYRIMOZ-PED>=40KG CROHN START	E	
HYRIMOZ-PLAQ PSOR/UEIT START	E	
HYRIMOZ-PLAQUE PSORIASIS START	E	
ICOTYDE	2	PA; SP; QL
IMAAVY	E	
IMULDOSA	E	
INFLECTRA	2	PA; SP
INFLIXIMAB	E	
JOENJA	E	
JYLAMVO	3	
leflunomide oral	1	
LUPKYNIS	E	
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	

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

Drug Name	Drug Tier	Notes
OLUMIANT	2	PA; SP; QL
OMVOH	2	PA; SP; QL
OMVOH (300 MG DOSE)	2	PA; SP; QL
ORENCIA CLICKJECT	3	PA; SP; QL
ORENCIA INTRAVENOUS	3	PA; SP
ORENCIA SUBCUTANEOUS	3	PA; SP; QL
ORLADEYO	2	PA; SP; QL
OTEZLA	2	PA; SP; QL
OTEZLA XR	2	PA; SP; QL
OTEZLA/OTEZLA XR INITIATION PK	2	PA; SP; QL
OTULFI	E	
PANZYGA	2	PA; SP
PRIVIGEN	3	PA; SP
PYZCHIVA	E	
QIVIGY	E	
RASUVO	2	PA; QL
REMICADE	E	
RENFLEXIS	E	
REZUROCK	E	
RHAPSIDO	2	SP
RINVOQ	2	PA; SP; QL
RINVOQ LQ	2	PA; SP; QL
SAJAZIR	E	
SELARSDI	E	
SIMLANDI (1 PEN)	E	
SIMLANDI (2 PEN)	E	
SIMLANDI (2 SYRINGE)	E	
SIMPONI	2	PA; SP; QL
SIMPONI ARIA	2	PA; SP
SKYRIZI INTRAVENOUS	2	PA; SP
SKYRIZI PEN	2	PA; SP; QL
SKYRIZI SUBCUTANEOUS	2	PA; SP; QL

Drug Name	Drug Tier	Notes
SOTYKTU	E	
STELARA	E	
STEQEYMA	E	
tacrolimus oral	1	
TAKHZYRO	2	PA; SP; QL
TALTZ	2	PA; SP; QL
TOFIDENCE	E	
TREMFYA INTRAVENOUS	2	PA; SP
TREMFYA ONE-PRESS	2	PA; SP; QL
TREMFYA PEN	2	PA; SP; QL
TREMFYA SUBCUTANEOUS	2	PA; SP; QL
TREMFYA-CD/UC INDUCTION	2	PA; SP; QL
TREXALL	3	
TYENNE	E	
USTEKINUMAB	E	
USTEKINUMAB-AAUZ	E	
USTEKINUMAB-AEKN	E	
USTEKINUMAB-TTWE	E	
VELSIPITY	2	PA; SP; QL
WEZLANA INTRAVENOUS	2	PA; SP
WEZLANA SUBCUTANEOUS	2	PA; SP; QL
XELJANZ	E	
XELJANZ XR	E	
XEMBIFY	2	PA; SP
YESINTEK INTRAVENOUS	2	PA; SP
YESINTEK SUBCUTANEOUS	2	PA; SP; QL
YIMMUGO	E	
YUFLYMA (1 PEN)	E	
YUFLYMA (2 PEN)	E	
YUFLYMA (2 SYRINGE)	E	

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

Drug Name	Drug Tier	Notes
YUFLYMA-CD/UC/HS STARTER	E	
YUSIMRY	E	
ZYMFENTRA (1 PEN)	E	
ZYMFENTRA (2 PEN)	E	
ZYMFENTRA (2 SYRINGE)	E	
Inflammatory Bowel Disease Agents		
APRISO	2	
budesonide oral	1	
CANASA	E	
CORTIFOAM	3	
DIPENTUM	E	
hydrocortisone (perianal)	1	
LIALDA	E	
mesalamine oral tablet delayed release 1.2 gm	1	
PENTASA	E	
PROCTOFOAM HC	2	
procto-med hc	1	
TARPEYO	E	
UCERIS ORAL	E	
UCERIS RECTAL	3	
Metabolic Bone Disease Agents		
AUKELSO	E	
BILPREVDA	2	PA; SP
BOMYNTRA	E	
OSENVLT	2	PA; SP
WYOST	E	
XGEVA	E	
Metabolic Bone Disease Agents - Drugs for Osteoporosis		
alendronate sodium oral tablet 10 mg	1	

Drug Name	Drug Tier	Notes
alendronate sodium oral tablet 35 mg, 70 mg	1	QL
BILDYOS	2	PA; SP; QL
BONSITY	2	PA; SP
BOSAYA	E	
CONEXXENCE	E	
FORTEO	E	
JUBBONTI	E	
OSPOMYV	E	
PROLIA	E	
STOBOCLO	2	PA; SP; QL
teriparatide solution pen-injector 560 mcg/2.24ml subcutaneous	1	PA; SP
TERIPARATIDE SOLUTION PEN-INJECTOR 560 MCG/2.24ML SUBCUTANEOUS	2	PA; SP
TYMLOS	2	PA; SP
Metabolic Bone Disease Agents - Other		
calcitriol oral capsule	1	
RAYALDEE	3	
SENSIPAR	E	
Miscellaneous Therapeutic Agents		
BIGFOOT UNITY PEN CAP/ADMELOG	E	
BIGFOOT UNITY PEN CAP/APIDRA	E	
BIGFOOT UNITY PEN CAP/ASPART	E	
BIGFOOT UNITY PEN CAP/BASAGLAR	E	
BIGFOOT UNITY PEN CAP/FIASP	E	
BIGFOOT UNITY PEN CAP/HUMALOG	E	

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

Drug Name	Drug Tier	Notes
BIGFOOT UNITY PEN CAP/LANTUS	E	
BIGFOOT UNITY PEN CAP/LISPRO	E	
BIGFOOT UNITY PEN CAP/LYUMJEV	E	
BIGFOOT UNITY PEN CAP/NOVOLOG	E	
BIGFOOT UNITY PEN CAP/TOUJEO	E	
BIGFOOT UNITY PEN CAP/TOUJEO M	E	
BIGFOOT UNITY PEN CAP/TRESIBA	E	
BYLVAY	2	PA; SP
BYLVAY (PELLETS)	2	PA; SP
DOJOLVI	E	
DUROLANE	2	PA; QL
DYSPORE	2	PA
ENDARI	E	
EUFLEXXA	2	PA; QL
FIRDAPSE	E	
FOUNDAYO	2	PA; QL
GEL-ONE	E	
GELSYN-3	2	PA; QL
GENVISC 850	E	
GIVLAARI	2	PA; SP
HYALGAN	E	
HYMOVIS	E	
HYMOVIS ONE	E	
KERENDIA	3	
LASIX ONYU REUSABLE UNIT/CHARG	E	
LIVMARLI	E	
LYNKUET	3	
MONOVISC	E	
MYOBLOC	2	PA
ORTHOVISC	E	
PHEXX	E	

Drug Name	Drug Tier	Notes
SAXENDA	E	
SUPARTZ FX	E	
SYNOJOYNT	E	
SYNVISC	E	
SYNVISC ONE	E	
TAVNEOS	E	
TRILURON	E	
TRIVISC	E	
VEOZAH	3	
VISCO-3	E	
WEGOVY	2	PA; QL
WEGOVY HD	2	PA; QL
XEOMIN	2	PA
XPHOZAH	E	
YORVIPATH	2	SP
ZEPBOUND KWIKPEN	E	
ZEPBOUND SUBCUTANEOUS SOLUTION	E	
ZEPBOUND SUBCUTANEOUS SOLUTION AUTO-INJECTOR	2	PA; QL
Ophthalmic Agents - Drugs for Eye Allergy, Infection and Inflammation		
AZASITE	3	
azelastine hcl ophthalmic	1	
BEPREVE	E	
BESIFLOXACIN HCL	E	
BESIVANCE	3	
BROMSITE	E	
BYQLOVI	E	
ciprofloxacin hcl ophthalmic	1	
erythromycin ophthalmic	1	
EYSUVIS	3	PA; QL

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

Drug Name	Drug Tier	Notes
FLAREX	3	
ILEVRO	E	
INVELTYS	3	
ketorolac tromethamine ophthalmic	1	
LOTEMAX OPHTHALMIC SUSPENSION	E	
LOTEMAX SM	3	
moxifloxacin hcl ophthalmic	1	
neomycin-polymyxin-dexameth	1	
NEVANAC	E	
ofloxacin ophthalmic	1	
PRED FORTE	E	
prednisolone acetate ophthalmic	1	
PROLENSA	E	
TOBRADEX ST	3	
tobramycin-dexamethasone	1	
VIGAMOX	E	
XDEMVEY	E	
ZERVATE	E	
Ophthalmic Agents - Drugs for Glaucoma		
acetazolamide oral	1	
ALPHAGAN P	E	
AZOPT	E	
brimonidine tartrate ophthalmic	1	
COMBIGAN	E	
COSOPT	E	
COSOPT PF	E	
dorzolamide hcl-timolol mal	1	
dorzolamide hcl-timolol mal pf	1	
IYUZEH	E	

Drug Name	Drug Tier	Notes
latanoprost ophthalmic	1	
LUMIGAN	E	
OMLONTI	E	
QLOSI	E	
RHOPRESSA	3	QL
ROCKLATAN	3	QL
SIMBRINZA	2	
timolol maleate (once-daily)	1	
timolol maleate ophthalmic solution	1	
TIMOPTIC OCUDOSE	E	
TRAVATAN Z	E	
VUITY	E	
VYZULTA	E	
XALATAN	E	
ZIOPTAN	E	
Ophthalmic Agents - Drugs for Miscellaneous Eye Conditions		
BEOVU	E	
BYOOVIZ	E	
CEQUA	3	PA; QL
cyclosporine (pf)	E	
ENCELTO	E	
LATISSE	E	
LUCENTIS	E	
MIEBO	2	PA; QL
polymyxin b-trimethoprim	1	
RESTASIS	1	PA; QL
RESTASIS MULTIDOSE	2	PA; QL
TRYPTYR	2	PA; QL
TYRVAYA	3	PA; QL
VERKAZIA	E	
VEVYE	3	PA; QL
VIZZ	E	

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

Drug Name	Drug Tier	Notes
XIIDRA	2	PA; QL
YUVEZZI	E	
ZYLET	3	
Otic Agents - Drugs for Ear Conditions		
ciprofloxacin-dexamethasone	1	
neomycin-polymyxin-hc otic suspension	1	
ofloxacin otic	1	
Respiratory Tract / Pulmonary Agents - Drugs for Allergies, Cough, Cold		
azelastine hcl nasal	1	QL
azelastine-fluticasone	1	QL
benzonatate	1	
cetirizine hcl oral solution 1 mg/ml, 5 mg/5ml	1	
CLARINEX	E	
CLARINEX-D 12 HOUR	E	
cyproheptadine hcl oral tablet	1	
DESLORATADINE ORAL SOLUTION	E	
DYMISTA	E	
fluticasone propionate nasal	1	
ipratropium bromide nasal	1	
levocetirizine dihydrochloride oral tablet	1	
mometasone furoate nasal	1	QL
OMNARIS	3	QL
promethazine-dm	1	
promethazine-phenylephrine	E	

Drug Name	Drug Tier	Notes
pseudoephedrine-bromphen-dm	1	
QNASL	3	QL
QNASL CHILDRENS	3	QL
RYALTRIS	E	
XHANCE	E	
Respiratory Tract / Pulmonary Agents - Drugs for Asthma and Other Lung Conditions		
ADVAIR DISKUS	E	
ADVAIR HFA	1	QL
AIRSUPRA	2	QL
albuterol sulfate hfa	1	QL
albuterol sulfate inhalation nebulization solution (2.5 mg/3ml) 0.083%, 0.63 mg/3ml, 1.25 mg/3ml, 2.5 mg/0.5ml	1	QL
albuterol sulfate nebulization solution (5 mg/ml) 0.5% inhalation	1	QL
ALBUTEROL SULFATE NEBULIZATION SOLUTION (5 MG/ML) 0.5% INHALATION	2	QL
ALVESCO	E	
ANORO ELLIPTA	2	QL
ARNUITY ELLIPTA	2	QL
ASMANEX (120 METERED DOSES)	E	
ASMANEX (14 METERED DOSES)	E	
ASMANEX (30 METERED DOSES)	E	
ASMANEX (60 METERED DOSES)	E	
ASMANEX HFA	E	
ATROVENT HFA	E	

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

Drug Name	Drug Tier	Notes
AUVI-Q	3	
BECLOMETHASONE DIPROP HFA	E	
BEVESPI AEROSPHERE	E	
BREO ELLIPTA	1	QL
breyana	E	
BREZTRI AEROSPHERE	2	QL
BRINSUPRI	E	
budesonide inhalation	1	QL
budesonide-formoterol fumarate	E	
COMBIVENT RESPIMAT	2	QL
DUAKLIR PRESSAIR	E	
DULERA	E	
epinephrine injection solution auto-injector	1	
EPIPEN JR 2-PAK	E	
ESBRIET	E	
EXDENSUR	E	
FASENRA	2	PA; SP
FASENRA PEN	2	PA; SP
FLUTICASONE FUROATE ELLIPTA	E	
FLUTICASONE FUROATE- VILANTEROL	E	
FLUTICASONE PROPIONATE DISKUS	E	
fluticasone propionate hfa aerosol 44 mcg/act inhalation	1	QL
fluticasone propionate hfa aerosol 44 mcg/act inhalation	E	

Drug Name	Drug Tier	Notes
FLUTICASONE PROPIONATE HFA INHALATION AEROSOL 110 MCG/ACT, 220 MCG/ACT	E	
FLUTICASONE- SALMETEROL INHALATION AEROSOL 45-21 MCG/ACT, 115-21 MCG/ACT, 230-21 MCG/ACT	E	
fluticasone-salmeterol inhalation aerosol powder breath activated 100-50 mcg/act, 250-50 mcg/act, 500-50 mcg/act	1	QL
FLUTICASONE- SALMETEROL INHALATION AEROSOL POWDER BREATH ACTIVATED 113-14 MCG/ACT, 232- 14 MCG/ACT, 55-14 MCG/ACT	E	
INCRUSE ELLIPTA	E	
ipratropium bromide inhalation	1	QL
ipratropium-albuterol	1	QL
JASCAYD	E	
LEVALBUTEROL HFA INHALATION AEROSOL 45 MCG/ACT	E	
montelukast sodium oral tablet	1	
montelukast sodium oral tablet chewable	1	
NEFFY	3	
NUCALA	2	PA; SP
OFEV	E	
OHTUVAYRE	E	

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Drug Name	Drug Tier	Notes
PERFOROMIST	3	QL
PROAIR RESPICLICK	E	
PULMICORT FLEXHALER	E	
PULMICORT SUSPENSION	E	
QVAR REDIHALER	2	QL
SEREVENT DISKUS	2	QL
SINGULAIR	E	
SPIRIVA HANDIHALER	E	
SPIRIVA RESPIMAT	2	QL
STIOLTO RESPIMAT	2	QL
STRIVERDI RESPIMAT	2	QL
SYMBICORT	1	QL
TEZSPIRE	2	PA; SP
TRELEGY ELLIPTA	2	QL
TUDORZA PRESSAIR	E	
UMECLIDINIUM ELLIPTA	E	
UMECLIDINIUM-VILANTEROL	E	
VENTOLIN HFA	E	
wixela inhub	1	QL
XOLAIR	2	PA; SP
XOPENEX HFA	E	
YUPELRI	3	QL
Respiratory Tract / Pulmonary Agents - Drugs for Cystic Fibrosis		
BETHKIS	E	
BRONCHITOL	E	
BRONCHITOL TOLERANCE TEST	E	
CAYSTON	E	
KITABIS PAK (W/ NEBULIZER)	E	
PULMOZYME	2	PA; SP

Drug Name	Drug Tier	Notes
TOBI NEBULIZER	E	
TOBI PODHALER	2	SP; QL
TOBRAMYCIN NEBULIZATION SOLUTION 300 MG/5ML INHALATION	E	
TRIKAFTA	2	PA; SP; QL
Respiratory Tract / Pulmonary Agents - Drugs for Pulmonary Hypertension		
ADCIRCA	E	
ADEMPAS	2	PA; SP; QL
LETAIRIS	E	
OPSUMIT	E	
OPSYNVI	E	
ORENITRAM	2	PA; SP
ORENITRAM MONTH 1	2	PA; SP; QL
ORENITRAM MONTH 2	2	PA; SP; QL
ORENITRAM MONTH 3	2	PA; SP; QL
REMODULIN	E	
REVATIO	E	
sildenafil citrate oral suspension reconstituted	1	PA; SP; QL
sildenafil citrate oral tablet 20 mg	1	PA; SP; QL
TADLIQ	E	
TRACLEER	E	
treprostinil	1	PA; SP
TYVASO	2	PA; SP; QL
TYVASO DPI INSTITUTIONAL KIT	2	PA; SP; QL

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

Drug Name	Drug Tier	Notes
TYVASO DPI MAINTENANCE KIT INHALATION POWDER 112 X 32MCG & 112 X64MCG, 112 X 48MCG & 112 X64MCG, 16 MCG, 32 MCG, 48 MCG, 64 MCG, 80 MCG	2	PA; SP; QL
TYVASO DPI MAINTENANCE KIT INHALATION POWDER 112 X 48MCG & 112 X80MCG	3	PA; SP; QL
TYVASO DPI TITRATION KIT	2	PA; SP; QL
TYVASO REFILL KIT	2	PA; SP; QL
TYVASO STARTER KIT	2	PA; SP; QL
YUTREPIA	3	PA; SP; QL
Skeletal Muscle Relaxants - Drugs for Muscle Pain and Spasm		
AMRIX	E	
ATMEKSI	E	
baclofen oral tablet	1	
carisoprodol oral	1	
cyclobenzaprine hcl oral tablet 10 mg, 5 mg	1	
FLEQSUVY	E	
methocarbamol oral tablet 500 mg, 750 mg	1	
NORGESIC	E	
NORGESIC FORTE	E	
ONTRALFY	E	
ORPHENGESIC FORTE	E	
OZOBAX DS	E	
SOMA	E	

Drug Name	Drug Tier	Notes
tizanidine hcl oral capsule 6 mg	1	
tizanidine hcl oral tablet	1	
ZANAFLEX	E	
Sleep Disorder Agents		
AMBIEN	E	
AMBIEN CR	E	
armodafinil	1	PA; QL
BELSOMRA	3	QL
DAYVIGO	E	
doxepin hcl oral tablet	1	QL
eszopiclone	1	QL
HETLIOZ	E	
HETLIOZ LQ	E	
LUMRYZ	E	
LUMRYZ STARTER PACK	E	
LUNESTA	E	
modafinil oral	1	PA; QL
NUVIGIL	E	
PROVIGIL	E	
QUVIVIQ	E	
RESTORIL	E	
sodium oxybate	1	PA; SP; QL
SUNOSI	2	PA; QL
temazepam	1	QL
WAKIX	2	PA; SP; QL
XYREM	E	
XYWAV	2	PA; SP; QL
zolpidem tartrate er	1	QL
ZOLPIDEM TARTRATE ORAL CAPSULE	E	
zolpidem tartrate oral tablet	1	QL

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

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COSENTYX 150 MG/ML.....	48	delyla.....	44	DILAUDID.....	7
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(300 MG).....	48	DEPAKOTE ER.....	9	diltiazem hcl er coated beads...	18
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COTEMPLA XR-ODT.....	20	DERMACINRX MULTITAM.....	37	divalproex sodium.....	10
COXANTO.....	7	DERMACINRX.....		divalproex sodium er.....	9
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TRAVATAN Z.....	52	TRUE METRIX AIR		UDENYCA.....	17
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TRIKAFTA.....	55	TRUEVITE.....	39	VALTOCO 15 MG DOSE.....	10
TRILEPTAL.....	10	TRULANCE.....	41	VALTOCO 20 MG DOSE.....	10
tri-linyah.....	46	TRULICITY.....	24	VALTOCO 5 MG DOSE.....	10
tri-lo-estarylla.....	46	TRUQAP.....	15	VALTREX.....	16
tri-lo-marzia.....	46	TRUVADA.....	16	VANRAFIA.....	42
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VENTRIXYL.....	39	VITRAX.....	40	WELLBUTRIN SR.....	12
VENTRIXYL FE.....	39	VITREXATE.....	40	WELLBUTRIN XL.....	12
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VICTOZA.....	25	VOGELXO PUMP.....	43	XEOMIN.....	51
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YUFLYMA (2 PEN).....	49	ZONISADE.....	10
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YUPELRI.....	55	ZTLIDO.....	8
YUSIMRY.....	50	ZUBSOLV.....	8
YUTREPIA.....	56	zumandimine.....	46
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YUVEZZI.....	53	ZURNAL.....	8
YUVIWEL.....	42	ZURZUVAE.....	12
zafemy.....	46	ZYBIC.....	8
ZALVIT.....	40	ZYCLARA PUMP.....	24
ZANAFLEX.....	56	ZYLET.....	53
ZARXIO.....	17	ZYMFENTRA (1 PEN).....	50
ZAVZPRET.....	13	ZYMFENTRA (2 PEN).....	50
ZEJULA.....	15	ZYMFENTRA (2 SYRINGE).....	50
ZELBORAF.....	15	ZYPITAMAG.....	20
ZELDANA.....	40	ZYPREXA.....	16
ZELSUVMI.....	24	ZYTIGA.....	15
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zenatane.....	24		
ZENPEP.....	42		
ZENZEDI.....	21		
ZEPBOUND.....	51		
ZEPBOUND KWIKPEN.....	51		
ZEPOSIA.....	21		
ZEPOSIA 7-DAY STARTER			
PACK.....	21		
ZEPOSIA STARTER KIT.....	21		
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ZEVASKYN BATCH UP TO 12			
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ZIPHEX.....	40		
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ZITUVIMET.....	25		
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ZOCOR.....	20		
ZOLGENSMA.....	42		
ZOLOFT.....	12		

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**)، ستتوفر لك خدمات المساعدة اللغوية المجانية والمراسلات المجانية بتنسيقات أخرى، مثل الطباعة بأحرف كبيرة. اتصل بالرقم المجاني المدون على بطاقة تعريف العضو خاصتك.

ចំណាំ: ប្រសិនបើអ្នកនិយាយភាសាខ្មែរ (**Khmer**) សេវាជំនួយភាសាឥតគិតថ្លៃ និងការទំនាក់ទំនងឥតគិតថ្លៃក្នុងទម្រង់ផ្សេងទៀត ដូចជាព័ត៌មានអក្សរធំ មានសម្រាប់អ្នក។ ទូរសព្ទមកលេខឥតគិតថ្លៃនៅលើប័ណ្ណសម្គាល់សមាជិករបស់អ្នក។

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 संचार, जैसे की बड़े प्रिंट, उपलब्ध हैं। अपने सदस्य पहचान 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'ÁKONÍÍZIN: Diné (**Navajo**) saad bee yáníłti'go, t'áá jíik'eh saad bee áka'e'eyeed bee áka'anída'wo'í dóó bee ahíł hane'í nááná łahgo át'éego bee hadadilyaa, díí nitsaago bee ak'eda'ashchínígíí, náhóló. Bee atah nil'íní ninaaltsoos nitł'izí bee nééhoziní baah t'áá jíik'eh bee hane'í námboo bee hodílnih

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

