
Effective May 2025

2025 Drug Formulary

For members covered through large employer groups with a 1- or 2-tier with additional specialty tier in-network pharmacy benefit and no out-of-network pharmacy benefit

KP Plus

Drug Formulary

INTRODUCTION



What is a formulary?

A formulary is a list of generic, brand, and specialty drugs. It is used by practitioners to identify drugs that offer the best overall value, considering effectiveness, safety, and cost.

How is the drug formulary developed?

The formulary is developed by the Kaiser Permanente Pharmacy and Therapeutics (P&T) Committee. The P&T Committee is composed of physicians from various medical specialties, pharmacists, and a consumer member. The P&T Committee reviews and selects the most appropriate drugs in each class for the formulary based on safety, effectiveness, and cost. The P&T Committee meets quarterly to review new and existing drugs to ensure that the formulary remains responsive to the needs of members and providers.

How do I search the formulary?

Drugs on the formulary are listed by therapeutic class. An alphabetical index is included at the end of this document to assist in locating specific drugs.

Drugs are listed by generic name if a generic is available. If there is no generic available, drugs are listed by the brand name. Drugs are organized by class and drug formulary tier. Drugs administered in a provider's office or in a clinic (e.g., drugs given intravenously) may not be listed on the formulary. For coverage of these drugs, refer to your Benefit Booklet.

How do I use the formulary to understand my drug coverage?

Drug coverage is based on an individual's contracted benefit. Coverage for a specific drug is subject to each member's medical coverage agreement. Please consult your Benefit Booklet or call Member Service if you have questions about your drug coverage.

Kaiser Permanente will only cover FDA-approved drugs used for non-experimental therapies. Most plans exclude experimental and investigational drugs, over-the-counter drugs, drugs used in the treatment of sexual dysfunction disorders, drugs for anticipated illnesses while traveling, drugs for weight loss, and drugs used for cosmetic purposes. Please consult your Benefit Booklet for limitations and exclusions, and plan specific benefit coverage.

Medications not listed in this document are not on the formulary at the time of publication. The most current information is online at www.kp.org/wa/formulary. Non-formulary drugs are not covered unless approved by the health plan as a coverage exception. The prescriber must contact Kaiser Permanente to determine the medical necessity of the non-formulary medication. An alternative formulary medication will be recommended when clinically appropriate. If a coverage exception is not approved, the patient is responsible for the full price of the drug.

Prior authorization, step therapy and nonformulary requests are considered based on coverage criteria requirements approved by the P&T Committee. To request review of an exception to Kaiser Permanente requirements for coverage of prescription drugs, you or your prescriber may contact Kaiser Permanente Member Services at 1-888-630-4636 and request an exception. If the evidence your prescriber provides meets medical necessity, an exception may be approved. Exceptions to required therapy that may be approved include: contraindications, clinical factors associated with adverse reactions, clinical factors reducing effect, other risks of clinical harm, and barriers to compliance with clinical care. Your prescriber may also request temporary coverage while the exception request is being processed.

Generic drugs are substituted when available and allowed by your prescriber. When a generic is available, the brand-name drug is generally considered non-formulary and subject to a higher cost share.

The drug formulary is updated periodically and is subject to change. If a drug will be removed from the formulary, members who filled the drug in the prior three months will be notified by letter of the upcoming change. A formulary change notice will also be posted on the member website at least 60 days prior to the effective date.

What are the methods that Kaiser Permanente uses to ensure appropriate and safe use of formulary drugs?

Prior Authorization (PA)

The P&T Committee determines that certain drugs should require prior authorization before they will be covered. These drugs most often have alternatives on the formulary, safety concerns, or a high potential for inappropriate use. To request coverage for prior authorization drugs, you or your prescriber must contact Kaiser Permanente. Drugs requiring prior authorization are indicated with a “PA” superscript next to the drug name.

Step Therapy (ST)

Step therapy requires you to try certain preferred drugs before receiving coverage for the drug you were prescribed. Step therapy is added by the P&T Committee. Step therapy automatically looks at your prescription history when you fill the drug you were prescribed. If you have tried the preferred drugs required by step therapy, the drug you were prescribed will automatically be covered. To request step therapy exceptions, you or your prescriber must contact Kaiser Permanente. Drugs requiring step therapy are indicated with a “ST” superscript next to the drug name.

Quantity Limit (QL)

A quantity limit defines how much of a particular drug you can get during a specific time period or the maximum days supply that you can get at once. The P&T Committee determines if a drug should have a quantity limit. To request exceptions to quantity limits, your prescriber must contact Kaiser Permanente. Drugs with quantity limits are indicated with “QL” superscript next to the drug name.

High Dose Pain Medicine Prescriber Review

Members on high doses of certain pain medicines will need their prescriber to confirm safety standards are in place annually to continue coverage of therapy.

Drugs Limited to Select Pharmacies

Some drugs are required to be dispensed from a preferred specialty pharmacy vendor. Members with an out-of-network benefit may use other pharmacies; however, they may pay a higher cost share.

Please consult your Benefit Booklet for limitations and exclusions. Drugs limited to select pharmacies are listed on the www.kp.org/wa/formulary webpage.

Covered Diabetic Supplies

Some diabetic supplies may be covered at a Tier 1 cost share if they are filled as a prescription. These items are:

- Preferred blood glucose strips:
 - One Touch Verio
 - One Touch Ultra
 - Prodigy – prior authorization required
 - Contour Next – prior authorization required
 - Freestyle – prior authorization required
- Disposable insulin syringes and needles
- Lancing devices and lancets

Preferred blood glucose meters are covered only when filled through mail order pharmacy.

Mail Order Pharmacy Service

Mail order is convenient and efficiently utilizes Kaiser Permanente's resources. This service works best for drugs that must be taken on regular basis, such as birth control pills and drugs for high blood pressure, high cholesterol, or other chronic conditions.

To begin using mail order, ask your prescriber to send your prescription directly to the Mail Order Pharmacy. To transfer an existing prescription from a retail pharmacy, contact the Mail Order Pharmacy.

Address: Kaiser Permanente Mail Order Pharmacy
PO Box 34383
Seattle, WA 98124-1383

Phone: 800-245-RXRX (1-800-245-7979)

Fax: 206-630-7950, or toll-free 1-800-350-1683

Specialty Drugs

Specialty drugs are high-cost drugs prescribed by a physician for the treatment of complex conditions. Some specialty products are dispensed from a preferred specialty pharmacy vendor.

Copay and Coinsurance Caps

State mandated copay and coinsurance caps for eligible plans apply to the following products: insulin, ciclesonide inhaled corticosteroid, fluticasone/salmeterol inhaled corticosteroid combination (generic Advair Diskus), and epinephrine autoinjector 0.3 mg and 0.15 mg (generic and Auvi-Q). Please call Member Service if you have questions about your coverage for these drugs.

Preventative Medications and Preferred Contraceptives

In accordance with the Affordable Care Act (ACA) requirements for preventive services, most plans cover preventative care medicines and contraceptives in full. If your plan offers ACA benefits, all prescribed FDA approved contraceptive methods from the Kaiser Permanente formulary list will be covered in full when obtained in-network. For plans with out-of-network (OON) benefits, contraceptives will be subject to the OON cost-share. The list of the preventative medications covered in full is available on the www.kp.org/wa/formulary webpage.

Please consult your Benefit Booklet under “Preventive Services” or call Member Service if you have questions about your coverage for these drugs.

If you request coverage for a non-preferred contraceptive, we will contact your provider to recommend a preferred generic or therapeutically equivalent product. If you and your provider determine that the preferred contraceptive(s) would be medically inappropriate, your provider must request a contraceptive waiver. If waiver is completed, the requested non-preferred contraceptive will be covered in full.

Excluded Prescription Products for Medications that have Over-The-Counter (OTC) Alternatives

There are certain prescription products that have the same or similar products available over-the-counter (OTC) without a prescription. In certain cases, Kaiser Permanente will not cover the prescription product. The following prescription drug products are excluded from coverage: esomeprazole magnesium (Nexium), omeprazole/sodium bicarbonate (Zegerid), budesonide nasal spray (Rhinocort Aqua), triamcinolone nasal spray (Nasacort), and fluticasone propionate nasal spray (Flonase).

Medical Benefit Injectable Drugs

Some drugs are given in a non-hospital setting such as home infusion, a medical office, a physician's office, or an infusion suite. These drugs are covered under the medical benefit but may require prior authorization or a non-hospital setting. The list of medical benefit injectable drugs is available on the www.kp.org/wa/formulary webpage.

How do I get additional information?

Please contact Member Service at 1-888-630-4636 with any questions or concerns regarding the information contained in this document.

The most current drug formulary is available at www.kp.org/wa/formulary.

Kaiser Foundation Health Plan of Washington

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Analgesics - Drugs for Pain and Inflammation			endocet	1	QL
celecoxib oral	1		fentanyl transdermal patch 72 hour 100 mcg/hr, 12 mcg/hr, 25 mcg/hr, 50 mcg/hr, 75 mcg/hr	1	PA; QL
diclofenac potassium oral tablet 50 mg	1		hydrocodone-acetaminophen oral solution 2.5-108 mg/5ml, 5-217 mg/10ml, 7.5-325 mg/15ml	1	QL
diclofenac sodium er	1		hydrocodone-acetaminophen oral tablet 10-325 mg, 5-325 mg, 7.5-325 mg	1	QL
diclofenac sodium oral	1		hydromorphone hcl oral	1	QL
diflunisal oral	1		hydromorphone hcl rectal	1	QL
etodolac	1		levorphanol tartrate oral	1	PA; QL
flurbiprofen oral	1		methadone hcl intensol	1	QL
ibuprofen oral tablet 400 mg, 600 mg, 800 mg	1		methadone hcl oral	1	QL
indomethacin er	1		methadose oral tablet soluble	1	QL
indomethacin oral capsule	1		morphine sulfate (concentrate) oral solution 100 mg/5ml	1	QL
ketorolac tromethamine injection	1		morphine sulfate er oral tablet extended release	1	ST; QL
ketorolac tromethamine intramuscular solution 60 mg/2ml	1		morphine sulfate oral	1	QL
meclofenamate sodium oral	1		morphine sulfate rectal	1	QL
meloxicam oral tablet	1		oxycodone hcl oral concentrate	1	QL
nabumetone oral	1		oxycodone hcl oral solution	1	QL
naproxen oral suspension	1		oxycodone hcl oral tablet	1	QL
naproxen oral tablet	1		OXYCODONE-ACETAMINOPHEN ORAL SOLUTION 5-325 MG/5ML	2	QL
naproxen sodium oral tablet 275 mg, 550 mg	1		oxycodone-acetaminophen oral tablet 10-325 mg, 2.5-325 mg, 5-325 mg, 7.5-325 mg	1	QL
piroxicam oral	1		OXYCONTIN	2	ST; QL
salsalate oral	1		tramadol hcl oral tablet 100 mg, 50 mg	1	QL
sulindac oral	1				
tolmetin sodium oral capsule	1				
Analgesics - Drugs for Pain					
acetaminophen-codeine	1	QL			
bac (butalbital-acetaminocaff)	1				
butalbital-apap-caffeine oral tablet	1				
butalbital-aspirin-caffeine	1				
codeine sulfate	1	QL			

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Drug Name	Drug Tier	Notes	Drug Name	Drug Tier	Notes
tramadol-acetaminophen	1	QL	NICORETTE MOUTH/THROAT LOZENGE	2	
Anesthetics			nicotine mini	2	
glydo	1		nicotine polacrilex mini	2	
lidocaine external patch 5 %	1		nicotine polacrilex mouth/throat	2	
lidocaine hcl (pf) injection solution 1 %, 2 %	1		nicotine step 1	1	
lidocaine hcl injection solution	1		nicotine step 2	1	
lidocaine hcl urethral/mucosal	1		nicotine step 3	1	
lidocaine-prilocaine	1		nicotine transdermal kit	1	
Anti-Addiction / Substance Abuse Treatment Agents			nicotine transdermal patch 24 hour 21 mg/24hr	1	
acamprosate calcium	1		varenicline tartrate	1	
buprenorphine hcl sublingual	1	QL	varenicline tartrate (starter)	1	
buprenorphine hcl-naloxone hcl	1	QL	varenicline tartrate(continue)	1	
bupropion hcl er (smoking det)	1		VIVITROL	4	QL
disulfiram oral	1		Antibacterials		
ft nicotine mini	2		amoxicillin	1	
ft nicotine mouth/throat	2		amoxicillin-potassium clavulanate	1	
ft nicotine transdermal	1		ampicillin	1	
goodsense nicotine mouth/throat gum	2		ampicillin sodium injection solution reconstituted 1 gm, 250 mg, 500 mg	1	
goodsense nicotine mouth/throat lozenge 4 mg	2		avidoxy	1	
habitrol	1		azithromycin oral	1	
naloxone hcl injection	1		BICILLIN L-A	2	
naloxone hcl nasal	1		cefadroxil	1	
naltrexone hcl oral	1		cefazolin sodium injection solution reconstituted 1 gm	1	
NARCAN	2		cefdinir	1	
NICORETTE MINI	2		cefixime	1	
NICORETTE MOUTH/THROAT GUM 2 MG	2		cefprozil	1	
			ceftazidime injection solution reconstituted 1 gm	1	

Drug Name	Drug Tier	Notes	Drug Name	Drug Tier	Notes
ceftriaxone sodium injection solution reconstituted 1 gm, 2 gm, 250 mg, 500 mg	1		moxifloxacin hcl oral	1	
cefuroxime axetil	1		mupirocin cream	1	
cephalexin oral capsule 250 mg, 500 mg	1		mupirocin ointment	1	
cephalexin oral suspension reconstituted	1		neomycin sulfate oral	1	
ciprofloxacin hcl oral	1		nitrofurantoin macrocrystal	1	
clarithromycin oral	1		nitrofurantoin monohydrate macrocrystals	1	
clindamycin hcl oral	1		nitrofurantoin oral suspension 25 mg/5ml, 50 mg/10ml	1	
clindamycin palmitate hcl	1		penicillin v potassium	1	
clindamycin phosphate injection solution 300 mg/2ml	1		silver sulfadiazine external	1	
clindamycin phosphate vaginal	1		SIVEXTRO ORAL	4	QL
dicloxacillin sodium	1		ssd	1	
doxycycline hyclate oral capsule	1		sulfamethoxazole-trimethoprim oral	1	
doxycycline hyclate oral tablet	1		sulfatrim pediatric	1	
doxycycline monohydrate oral capsule	1		tazicef injection	1	
doxycycline monohydrate oral tablet	1		tetracycline hcl oral capsule	1	
erythromycin ethylsuccinate oral suspension reconstituted	1		trimethoprim oral	1	
FIRVANQ	2		vancomycin hcl oral capsule	1	QL
gentamicin sulfate external	1		vancomycin hcl oral solution reconstituted	1	
levofloxacin oral	1		Anticoagulants		
linezolid oral	1	QL	dabigatran etexilate mesylate	1	
methenamine hippurate	1		enoxaparin sodium	1	
metronidazole oral tablet 250 mg, 500 mg	1		fondaparinux sodium	4	QL
metronidazole vaginal	1		heparin sodium (porcine) injection solution 1000 unit/ml, 10000 unit/ml, 5000 unit/ml	1	
minocycline hcl oral capsule	1		heparin sodium (porcine) pf	1	
mondoxyne nl	1		jantoven	1	
			rivaroxaban	1	PA
			warfarin sodium oral	1	

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Drug Name	Drug Tier	Notes	Drug Name	Drug Tier	Notes
XARELTO ORAL TABLET	2	PA	phenytoin sodium injection	1	
XARELTO STARTER PACK	2	PA	primidone oral tablet 250 mg, 50 mg	1	
Anticonvulsants - Drugs for Seizures			roweepra	1	
carbamazepine er	1		subvenite	1	
carbamazepine oral	1		topiramate oral	1	
clobazam oral suspension 2.5 mg/ml	1		valproic acid oral	1	
clobazam oral tablet	1		VALTOCO 10 MG DOSE	2	PA; QL
diazepam rectal	1	QL	VALTOCO 15 MG DOSE	2	PA; QL
DILANTIN ORAL CAPSULE 30 MG	2		VALTOCO 20 MG DOSE	2	PA; QL
divalproex sodium er	1		VALTOCO 5 MG DOSE	2	PA; QL
divalproex sodium oral	1		zonisamide oral	1	
epitol	1		Antidementia Agents - Drugs for Alzheimer's Disease and Dementia		
ethosuximide oral	1		donepezil hcl	1	
gabapentin oral capsule	1		galantamine hydrobromide	1	
gabapentin oral solution	1		galantamine hydrobromide er	1	
gabapentin oral tablet 600 mg, 800 mg	1		memantine hcl oral tablet 10 mg, 5 mg	1	
lacosamide oral	1		rivastigmine tartrate	1	
lamotrigine oral tablet	1		Antidepressants		
lamotrigine oral tablet chewable	1		amitriptyline hcl oral	1	
levetiracetam er	1		amoxapine	1	
levetiracetam oral solution	1		bupropion hcl er (sr)	1	
levetiracetam oral tablet	1		bupropion hcl er (xl) oral tablet extended release 24 hour 150 mg, 300 mg	1	
methsuximide	2		bupropion hcl oral	1	
NAYZILAM	2	PA; QL	citalopram hydrobromide oral solution	1	
oxcarbazepine	1		citalopram hydrobromide oral tablet	1	
phenobarbital oral	1		clomipramine hcl oral	1	
phenobarbital sodium injection solution 130 mg/ml	1		desipramine hcl oral	1	
phenytoin infatabs	1		desvenlafaxine succinate er	1	
phenytoin oral	1		doxepin hcl oral capsule	1	
phenytoin sodium extended oral capsule 100 mg	1				

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Drug Name	Drug Tier	Notes	Drug Name	Drug Tier	Notes
doxepin hcl oral concentrate	1		metoclopramide hcl injection	1	
duloxetine hcl oral capsule delayed release particles 20 mg, 30 mg, 60 mg	1		metoclopramide hcl oral solution	1	
escitalopram oxalate oral	1		metoclopramide hcl oral tablet	1	
fluoxetine hcl oral capsule	1		ondansetron hcl +rfid	1	
fluoxetine hcl oral solution	1		ondansetron hcl injection	1	
fluoxetine hcl oral tablet	1		ondansetron hcl oral	1	
fluvoxamine maleate	1		ondansetron odt oral tablet dispersible 4 mg, 8 mg	1	
imipramine hcl oral	1		perphenazine oral	1	
mirtazapine oral	1		prochlorperazine	1	
nortriptyline hcl oral	1		prochlorperazine edisylate injection	1	
paroxetine hcl	1		prochlorperazine maleate oral	1	
paroxetine hcl er	1		promethazine hcl oral	1	
perphenazine-amitriptyline	1		promethazine hcl rectal	1	
phenelzine sulfate oral	1		promethegan	1	
protriptyline hcl	1				
sertraline hcl oral concentrate	1		Antifungals		
sertraline hcl oral tablet	1		ciclodan	1	
tranylcypromine sulfate	1		ciclopirox external	1	
trazodone hcl oral	1		ciclopirox olamine external	1	
venlafaxine hcl	1		clotrimazole mouth/throat	1	
venlafaxine hcl er oral capsule extended release 24 hour	1		clotrimazole-betamethasone	1	
Antiemetics - Drugs for Nausea and Vomiting			CRESEMBA ORAL	4	PA; QL
aprepitant oral	1		fluconazole oral	1	
aprepitant oral capsule 125 mg, 80 & 125 mg, 80 mg	1		flucytosine oral	4	QL
compro	1		griseofulvin microsize oral	1	
dimenhydrinate injection	1		griseofulvin ultramicrosize oral tablet 125 mg, 250 mg	1	
dronabinol	1		itraconazole oral	1	PA
granisetron hcl oral	1		ketoconazole external cream	1	
			ketoconazole external shampoo	1	

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Drug Name	Drug Tier	Notes	Drug Name	Drug Tier	Notes
ketoconazole oral	1		Antimyasthenic Agents		
klayesta	1		MESTINON ORAL SOLUTION	2	
nyamyc	1		pyridostigmine bromide er	1	
nystatin external	1		pyridostigmine bromide oral	1	
nystatin mouth/throat	1		Antimycobacterials		
nystatin oral	1		dapsone oral	1	
nystatin-triamcinolone	1		ethambutol hcl oral	1	
nystop	1		isoniazid oral	1	
terbinafine hcl oral	1		PRIFTIN	2	
terconazole vaginal cream	1		pyrazinamide oral	1	
voriconazole oral	1		rifabutin	1	
Antigout Agents			rifampin oral	1	
allopurinol oral tablet 100 mg, 300 mg	1		Antineoplastics - Drugs for Cancer		
colchicine oral	1		abiraterone acetate	1	QL
colchicine-probenecid	1		AFINITOR DISPERZ	2	PA; QL
febuxostat	1		anastrozole oral	1	
probenecid	1		bicalutamide	1	
Antimigraine Agents			BRUKINSA	2	PA; QL
dihydroergotamine mesylate injection	1	QL	CALQUENCE	2	PA; QL
dihydroergotamine mesylate nasal	4		capecitabine	1	QL
eletriptan hydrobromide	1		COTELLIC	2	PA; QL
ERGOMAR	2		cyclophosphamide oral capsule	1	
ergotamine-caffeine	1		dasatinib	1	PA; QL
MIGERGOT	2		DROXIA	2	
naratriptan hcl	1		erlotinib hcl	1	PA; QL
rizatriptan benzoate	1		etoposide oral	1	QL
sumatriptan nasal	1		everolimus oral tablet 10 mg, 2.5 mg, 5 mg, 7.5 mg	1	PA; QL
sumatriptan succinate oral	1		everolimus oral tablet soluble	1	PA; QL
sumatriptan succinate refill subcutaneous solution cartridge	1		exemestane	1	
sumatriptan succinate subcutaneous	1		gefitinib	2	PA; QL
zolmitriptan oral	1		GILOTRIF	2	PA; QL
			GLEOSTINE	2	
			hydroxyurea oral	1	
			imatinib mesylate	1	QL

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IMBRUVICA ORAL CAPSULE	2	PA; QL	albendazole oral	1	
IMBRUVICA ORAL TABLET 140 MG, 420 MG	2	PA; QL	atovaquone	4	QL
lapatinib ditosylate	1	PA; QL	BILTRICIDE	2	
lenalidomide	1	PA; QL	chloroquine phosphate oral	1	
letrozole oral	1		hydroxychloroquine sulfate oral	1	
leucovorin calcium oral	1		KRINTAFEL	2	
LEUKERAN	2		nitazoxanide oral	2	
MATULANE	2	QL	permethrin external	1	
MEKINIST	2	PA; QL	praziquantel oral	1	
mercaptapurine oral tablet	1		primaquine phosphate	1	
mesna	1		pyrimethamine oral	4	PA; QL
MESNEX ORAL	2		quinine sulfate	1	
MYLERAN	2	QL	Antiparkinson Agents		
NUBEQA	2	PA; QL	amantadine hcl oral	1	
pazopanib hcl	1	PA; QL	benztropine mesylate	1	
ROZLYTREK	2	PA; QL	bromocriptine mesylate oral	1	
RYDAPT	2	PA; QL	carbidopa oral	1	
sorafenib tosylate	1	PA; QL	carbidopa-levodopa er	1	
SPRYCEL	2	PA; QL	carbidopa-levodopa oral tablet	1	
STIVARGA	2	PA; QL	carbidopa-levodopa oral tablet dispersible 10-100 mg, 25-100 mg	1	
sunitinib malate	1	PA; QL	carbidopa-levodopa-entacapone	1	
TABLOID	2		DUOPA	4	PA; QL
TAFINLAR	2	PA; QL	entacapone	1	
TAGRISSO	2	PA; QL	pramipexole dihydrochloride	1	
tamoxifen citrate oral	1		rasagiline mesylate oral	1	PA
temozolomide	1	QL	ropinirole hcl	1	
THALOMID	2	PA; QL	ropinirole hcl er	1	
torpenz	1	PA; QL	selegiline hcl oral	1	
tretinoin oral	1	QL	trihexyphenidyl hcl	1	
VENCLEXTA	2	PA; QL	Antiplatelets		
VENCLEXTA STARTING PACK	2	PA; QL	aspirin-dipyridamole er	1	
XTANDI ORAL CAPSULE	2	PA; QL			
ZELBORAF	2	PA; QL			
ZYDELIG	2	PA; QL			
Antiparasitics					

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Drug Name	Drug Tier	Notes	Drug Name	Drug Tier	Notes
BRILINTA	2		quetiapine fumarate er	1	
cilostazol	1		RISPERDAL CONSTA SUSPENSION		
clopidogrel bisulfate oral	1		RECONSTITUTED ER	1	
dipyridamole oral	1		12.5 MG		
prasugrel hcl	1		INTRAMUSCULAR		
Antipsychotics - Drugs for Mood Disorders			RISPERDAL CONSTA SUSPENSION		
ABILIFY ASIMTUFII	4		RECONSTITUTED ER	2	
ABILIFY MAINTENA	4		12.5 MG		
aripiprazole oral solution	1		INTRAMUSCULAR		
aripiprazole oral tablet	1		RISPERDAL CONSTA SUSPENSION		
ARISTADA	4		RECONSTITUTED ER 25	1	
ARISTADA INITIO	4		MG INTRAMUSCULAR		
chlorpromazine hcl injection	1		RISPERDAL CONSTA SUSPENSION		
chlorpromazine hcl oral tablet	1		RECONSTITUTED ER 25	2	
clozapine oral tablet	1		MG INTRAMUSCULAR		
ERZOFRI	4		RISPERDAL CONSTA SUSPENSION		
fluphenazine decanoate injection	1		RECONSTITUTED ER	1	
fluphenazine hcl	1		37.5 MG		
haloperidol decanoate intramuscular	1		INTRAMUSCULAR		
haloperidol lactate injection	1		RISPERDAL CONSTA SUSPENSION		
haloperidol lactate oral concentrate 2 mg/ml	1		RECONSTITUTED ER	2	
haloperidol oral	1		37.5 MG		
INVEGA HAFYERA	4		INTRAMUSCULAR		
INVEGA SUSTENNA	4		RISPERDAL CONSTA SUSPENSION		
INVEGA TRINZA	4		RECONSTITUTED ER 50	1	
loxapine succinate	1		MG INTRAMUSCULAR		
lurasidone hcl	1		RISPERDAL CONSTA SUSPENSION		
olanzapine	1		RECONSTITUTED ER 50	2	
paliperidone er	1		MG INTRAMUSCULAR		
PERSERIS	4		risperidone microspheres er	1	
pimozide	1		risperidone oral solution	1	
quetiapine fumarate	1		risperidone oral tablet	1	
			RYKINDO	4	
			thioridazine hcl oral	1	
			thiothixene	1	
			trifluoperazine hcl	1	
			UZEDY	4	

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Drug Name	Drug Tier	Notes	Drug Name	Drug Tier	Notes
ziprasidone hcl	1		ISENTRESS ORAL TABLET	2	
Antivirals			ISENTRESS ORAL TABLET CHEWABLE	2	
abacavir sulfate	1		JULUCA	4	
abacavir sulfate-lamivudine	1		KALETRA ORAL SOLUTION	2	
acyclovir external ointment	1		LAGEVRIO	2	QL
acyclovir oral	1		lamivudine oral solution 10 mg/ml	1	
adefovir dipivoxil	1	QL	lamivudine oral tablet	1	
APTIVUS	4		lamivudine-zidovudine	1	
atazanavir sulfate	1		lopinavir-ritonavir	1	
BARACLUDGE ORAL SOLUTION	4	QL	maraviroc	4	
BIKTARVY	4		nevirapine er	1	
CIMDUO	4		nevirapine oral tablet	1	
COMPLERA	4	PA	NORVIR ORAL PACKET	2	
darunavir	1		ODEFSEY	4	
DESCOVY	4		oseltamivir phosphate oral	1	
DOVATO	4		PAXLOVID (150/100)	2	QL
EDURANT	2		PAXLOVID (300/100)	2	QL
efavirenz	1		PEGASYS	4	QL
efavirenz-emtricitab-tenofo df	1		PREVYMIS ORAL	4	PA; QL
efavirenz-lamivudine-tenofovir	1		PREZCOBIX	2	
emtricitabine	1		PREZISTA ORAL SUSPENSION	2	
emtricitabine-tenofovir df	1		PREZISTA ORAL TABLET 150 MG, 75 MG	2	
EMTRIVA ORAL SOLUTION	2		RELENZA DISKHALER	2	
entecavir	1		REYATAZ ORAL PACKET	2	
EPCLUSA	4	QL	ribavirin oral	1	QL
etravirine	1		rimantadine hcl	1	
famciclovir oral	1		ritonavir	1	
fosamprenavir calcium	4		SELZENTRY ORAL SOLUTION	4	
GENVOYA	4		SOFOSBUVIR-VELPATASVIR	4	QL
INTELENCE ORAL TABLET 25 MG	2		STRIBILD	4	PA
ISENTRESS HD	2				

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Drug Name	Drug Tier	Notes	Drug Name	Drug Tier	Notes
SYMFI	1		midazolam hcl (pf) injection solution 10 mg/2ml, 5 mg/ml	1	QL
SYMFI LO	1				
SYMTUZA	4		midazolam hcl injection solution 10 mg/2ml, 5 mg/ml	1	QL
TAMIFLU	2		oxazepam	1	QL
tenofovir disoproxil fumarate	1		triazolam	1	QL
TIVICAY	2		Bipolar Agents - Drugs for Mood Disorders		
TIVICAY PD	2		lithium	1	
TRIUMEQ	4		lithium carbonate er	1	
TRIUMEQ PD	4		lithium carbonate oral	1	
TYBOST	2	PA	Blood Products and Modifiers - Drugs for Blood Disorders		
valacyclovir hcl oral	1		ALVAIZ	4	PA; QL
valganciclovir hcl	4	QL	anagrelide hcl	1	
VIRACEPT	2		EPOGEN	2	PA
VIREAD ORAL POWDER	2		GRANIX	4	QL
VIREAD ORAL TABLET 150 MG, 200 MG, 250 MG	2		HEMLIBRA	4	PA; QL
VOSEVI	4	PA; QL	LEUKINE	2	
zidovudine	1		NIVESTYM	4	PA; QL
Anxiolytics - Drugs for Anxiety			PROCRIT	2	PA
alprazolam er	1	QL	tranexamic acid oral	1	QL
alprazolam oral tablet	1	QL	ZARXIO	4	PA; QL
alprazolam xr	1	QL	Cardiovascular Agents - Drugs for Heart and Circulation Conditions		
bupirone hcl oral	1		acebutolol hcl oral	1	
chlordiazepoxide hcl	1	QL	alprostadiil injection	1	
clonazepam oral	1	QL	amiloride hcl oral	1	
clorazepate dipotassium	1	QL	amiloride-hydrochlorothiazide	1	
diazepam injection	1	QL	amiodarone hcl oral	1	
diazepam oral solution	1	QL	amlodipine besylate oral	1	
diazepam oral tablet	1	QL	amlodipine besylate-benazepril hcl	1	
hydroxyzine hcl oral	1		amlodipine-olmesartan	1	
hydroxyzine pamoate oral	1		atenolol oral	1	
lorazepam injection solution 2 mg/ml	1	QL	atenolol-chlorthalidone	1	
lorazepam intensol	1	QL	atorvastatin calcium oral	1	
lorazepam oral concentrate 2 mg/ml	1	QL	benazepril hcl oral	1	
lorazepam oral tablet	1	QL			

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Drug Name	Drug Tier	Notes	Drug Name	Drug Tier	Notes
benazepril-hydrochlorothiazide	1		enalapril maleate oral tablet	1	
betaxolol hcl oral	1		enalapril-hydrochlorothiazide	1	
bisoprolol fumarate oral	1		ENTRESTO ORAL TABLET	2	PA; QL
bisoprolol-hydrochlorothiazide	1		epinephrine injection solution	1	
bumetanide oral	1		epinephrine pf	1	
captopril oral	1		eplerenone	1	
captopril-hydrochlorothiazide	1		ethacrynic acid	1	PA
cartia xt	1		ezetimibe	1	
carvedilol	1		ezetimibe-simvastatin	1	
chlorthalidone	1		felodipine er	1	
cholestyramine light	1		fenofibrate micronized	1	
cholestyramine oral	1		fenofibrate oral capsule 134 mg, 200 mg, 67 mg	1	
clonidine	1		fenofibrate oral tablet 160 mg, 54 mg	1	
clonidine hcl oral	1		fenofibric acid	1	
colestipol hcl	1		flecainide acetate	1	
digoxin injection	1		fosinopril sodium	1	
digoxin oral solution	1		fosinopril sodium-hctz	1	
digoxin oral tablet 125 mcg, 250 mcg	1		furosemide injection	1	
diltiazem hcl er beads (generic Tiazac)	1		furosemide oral	1	
diltiazem hcl er coated beads (generic Cardizem CD)	1		gemfibrozil oral	1	
diltiazem hcl er oral capsule extended release 12 hour	1		guanfacine hcl	1	
diltiazem hcl er oral capsule extended release 24 hour	1		hydralazine hcl oral	1	
diltiazem hcl oral	1		hydrochlorothiazide oral	1	
dilt-xr	1		indapamide	1	
disopyramide phosphate	1		irbesartan	1	
DIURIL	2		irbesartan-hydrochlorothiazide	1	
dofetilide	1		isosorbide dinitrate	1	
doxazosin mesylate oral	1		isosorbide mononitrate	1	
			isosorbide mononitrate er	1	
			isradipine	1	
			labetalol hcl oral tablet 100 mg, 200 mg, 300 mg	1	

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Drug Name	Drug Tier	Notes	Drug Name	Drug Tier	Notes
lisinopril oral	1		olmesartan-amlodipine-hctz	1	
lisinopril-hydrochlorothiazide	1		pacerone oral tablet 100 mg, 200 mg	1	
losartan potassium oral	1		papaverine hcl injection	1	
losartan potassium-hctz	1		pentoxifylline er	1	
lovastatin oral	1		perindopril erbumine	1	
methyldopa oral tablet 250 mg	1		phenoxybenzamine hcl oral	4	QL
metolazone	1		phentolamine mesylate injection	1	
metoprolol succinate er	1		pindolol	1	
metoprolol tartrate oral	1		pravastatin sodium	1	
metoprolol-hydrochlorothiazide	1		prazosin hcl oral	1	
mexiletine hcl oral	1		prevalite	1	
midodrine hcl	1		procainamide hcl injection	1	
minoxidil oral	1		propafenone hcl	1	
moexipril hcl	1		propafenone hcl er	1	
nadolol oral	1		propranolol hcl er	1	
nebivolol hcl	1		propranolol hcl oral	1	
nicardipine hcl oral	1		quinapril hcl	1	
nifedipine er	1		quinapril-hydrochlorothiazide	1	
nifedipine er osmotic release	1		quinidine gluconate er	1	
nifedipine oral	1		quinidine sulfate	1	
nimodipine oral capsule	1		ramipril	1	
NITRO-BID	2		ranolazine er	1	
NITRO-DUR TRANSDERMAL PATCH 24 HOUR 0.3 MG/HR, 0.8 MG/HR	2		rosuvastatin calcium oral	1	
nitroglycerin rectal	1		simvastatin oral	1	
nitroglycerin sublingual	1		sotalol hcl (af)	1	
nitroglycerin transdermal	1		sotalol hcl oral	1	
nitro-time oral capsule extended release 9 mg	1		spironolactone oral tablet	1	
NORPACE CR	2		spironolactone-hctz	1	
olmesartan medoxomil oral	1		telmisartan	1	
olmesartan medoxomil- hctz	1		tiadylt er	1	
			timolol maleate oral	1	
			torse mide	1	
			trandolapril	1	

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Drug Name	Drug Tier	Notes	Drug Name	Drug Tier	Notes
triamterene oral	1		methylphenidate hcl er (osm) oral tablet extended release 18 mg, 27 mg, 36 mg, 54 mg, 72 mg (generic Concerta)	1	
triamterene-hctz	1		methylphenidate hcl er oral tablet extended release (generic Methylin)	1	
valsartan oral tablet	1		methylphenidate hcl er oral tablet extended release 24 hour (generic Methylin)	1	QL
valsartan-hydrochlorothiazide	1		methylphenidate hcl oral tablet (generic Ritalin)	1	
verapamil hcl er oral capsule extended release 24 hour 120 mg, 180 mg, 240 mg, 360 mg	1		relexxii oral tablet extended release 72 mg	1	
verapamil hcl er oral tablet extended release	1		zenzedi oral tablet 10 mg, 5 mg	1	
verapamil hcl oral	1		Central Nervous System Agents - Drugs for Multiple Sclerosis		
Central Nervous System Agents - Drugs for Attention Deficit Disorder			AVONEX PEN	4	PA; QL
ADDERALL	2		AVONEX PREFILLED	4	PA; QL
ADDERALL XR	2		BETASERON	4	QL
amphetamine-dextroamphetamine	1		dalfampridine er	1	
amphetamine-dextroamphetamine er	1		dimethyl fumarate oral	1	
atomoxetine hcl	1		dimethyl fumarate starter pack	1	
clonidine hcl er	1		fingolimod hcl	1	QL
CONCERTA	2		GILENYA ORAL CAPSULE 0.25 MG	4	PA; QL
dexmethylphenidate hcl	1		glatiramer acetate	4	QL
dexmethylphenidate hcl er	1	QL	glatopa	4	QL
dextroamphetamine sulfate er	1		REBIF	4	PA; QL
dextroamphetamine sulfate oral tablet 10 mg, 5 mg	1		REBIF REBIDOSE	4	PA; QL
guanfacine hcl er	1		REBIF REBIDOSE TITRATION PACK	4	PA; QL
methylphenidate hcl er (cd) (generic Metadate)	1		REBIF TITRATION PACK	4	PA; QL
methylphenidate hcl er (la) oral capsule extended release 24 hour 20 mg, 30 mg, 40 mg, 60 mg (generic Ritalin LA, generic Methylin LA)	1	QL	teriflunomide	1	QL
			Central Nervous System Agents - Miscellaneous		
			caffeine citrate oral	1	
			pregabalin oral	1	QL
			riluzole	1	QL

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Drug Name	Drug Tier	Notes	Drug Name	Drug Tier	Notes
Dental and Oral Agents - Drugs for Mouth and Throat Conditions			calcitrene	1	
chlorhexidine gluconate mouth/throat	1		calcitriol external	1	
kourzeq	1		claravis	1	
lidocaine viscous hcl	1		clindacin etz external swab	1	
oralone	1		clindacin-p	1	
periogard	1		clindamycin phos (once-daily)	1	
pilocarpine hcl oral	1		clindamycin phos (twice-daily)	1	
triamcinolone acetonide mouth/throat	1		clindamycin phos-benzoyl perox external gel 1-5 %, 1.2-5 %	1	
Dermatological Agents - Drugs for Skin Conditions			clindamycin phosphate external lotion	1	
accutane	1		clindamycin phosphate external solution	1	
acitretin	1	QL	clindamycin phosphate external swab	1	
adapalene external cream	1		clobetasol propionate e	1	
adapalene external gel	1		clobetasol propionate external cream 0.05 %	1	
adapalene-benzoyl peroxide external gel 0.1-2.5 %	1		clobetasol propionate external foam	1	
alclometasone dipropionate	1		clobetasol propionate external gel	1	
AMELUZ	2	QL	clobetasol propionate external liquid	1	
amnesteem	1		clobetasol propionate external lotion	1	
avar cleanser	1		clobetasol propionate external ointment	1	
azelaic acid external	1		clobetasol propionate external solution	1	
AZELEX	2		CONDYLOX	2	
benzoyl peroxide-erythromycin	1		CORDRAN	2	
betamethasone dipropionate aug	1		desonide external cream	1	
betamethasone dipropionate external	1		desonide external lotion	1	
betamethasone valerate external	1		desonide external ointment	1	
calcipotriene external cream	1		desoximetasone external cream	1	
calcipotriene external ointment	1				
calcipotriene external solution	1				

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Drug Name	Drug Tier	Notes	Drug Name	Drug Tier	Notes
desoximetasone external gel	1		hydrocortisone valerate	1	
desoximetasone external ointment	1		imiquimod external cream 5 %	1	
DIFFERIN EXTERNAL LOTION	2		isotretinoin oral	1	
DRYSOL	2		LEVULAN KERASTICK	2	QL
erythromycin external	1		methoxsalen rapid	4	QL
FINACEA EXTERNAL FOAM	2		metronidazole external cream	1	
fluocinolone acetonide body	1		metronidazole external gel 0.75 %	1	
fluocinolone acetonide external	1		mometasone furoate external	1	
fluocinolone acetonide scalp	1		neuac	1	
fluocinonide emulsified base	1		pimecrolimus cream 1 % external	1	
fluocinonide external	1		PIMECROLIMUS CREAM 1 % EXTERNAL	1	
fluorouracil external	1		podofilox external	1	
fluticasone propionate external cream	1		PRAMOSONE EXTERNAL CREAM	2	
fluticasone propionate external ointment	1		PRAMOSONE EXTERNAL LOTION	2	
halobetasol propionate external cream	1		RETIN-A	1	
halobetasol propionate external ointment	1		RETIN-A MICRO GEL 0.04 %, 0.1 %	1	
hydrocortisone ace-pramoxine external cream 2.5-1 %	1		RETIN-A MICRO PUMP EXTERNAL GEL 0.04 %, 0.1 %	1	
hydrocortisone butyrate external cream	1		SANTYL	2	
hydrocortisone butyrate external ointment	1		selenium sulfide external lotion	1	
hydrocortisone butyrate external solution	1		sodium sulfacetamide external shampoo 10 %	1	
hydrocortisone external cream 2.5 %	1		sulfacetamide sodium (acne)	1	
hydrocortisone external lotion 2.5 %	1		sulfacetamide sodium-sulfur external liquid 10-5 %	1	
hydrocortisone external ointment 1 %, 2.5 %	1		sulfacetamide sodium-sulfur external lotion 10-5 %	1	
			sulfacetamide-sulfur in urea	1	

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Drug Name	Drug Tier	Notes	Drug Name	Drug Tier	Notes
synalar	1		metformin hcl oral tablet 1000 mg, 500 mg, 850 mg	1	
tacrolimus external	1		OZEMPIC	2	PA; QL
tazarotene external cream	1		SITAGLIPTIN	2	
tazarotene external gel	1		Diabetes - Glucose Monitoring		
TAZORAC EXTERNAL CREAM 0.05 %	1				
tretinoin external cream	1		ACCU-CHEK FASTCLIX LANCET KIT	1	
tretinoin external gel 0.01 %, 0.025 %	1		ACCU-CHEK GUIDE CONTROL	1	
tretinoin microsphere external gel 0.04 %, 0.1 %	1		ACCU-CHEK GUIDE TEST	1	PA; QL
tretinoin microsphere pump external gel 0.04 %, 0.1 %	1		ACCU-CHEK SMARTVIEW CONTROL	1	
triamcinolone acetonide external cream	1		ACCU-CHEK SOFTCLIX LANCET DEVICE KIT	1	
triamcinolone acetonide external lotion	1		AGAMATRIX CONTROL LEVEL 2	1	
triamcinolone acetonide external ointment 0.025 %, 0.1 %, 0.5 %	1		AGAMATRIX CONTROL LEVEL 4	1	
triderm	1		AUTOLET II CLINISAFE	1	
urea external cream 40 %	1		AUTOLET LANCING DEVICE	1	
uremez-40	1		AUTOLET LITE LANCING DEVICE	1	
VECTICAL	1		BLULINK CONTROL HIGH & LOW	1	
zenatane	1		CARESENS CONTROL SOLUTION A/B	1	
Diabetes - Antidiabetic Agents			CARESENS LANCETS 30G	1	
acarbose oral	1		CARETOUCH CONTROL SOL LEVEL 2	1	
glimepiride	1		CARETOUCH LANCING/EJECTOR	1	
glipizide er	1		CHEMSTRIP 10 MD	2	
glipizide oral tablet 10 mg, 5 mg	1		CHEMSTRIP 10/SG	2	
glipizide-metformin hcl	1		CHEMSTRIP 2 GP	2	
glyburide oral	1		CHEMSTRIP 5 OB	2	
JARDIANCE	2	QL	CHEMSTRIP 7	2	
liraglutide	1	PA; QL	CHEMSTRIP 9	2	
metformin hcl er	1				
metformin hcl oral solution	1				

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Drug Name	Drug Tier	Notes	Drug Name	Drug Tier	Notes
CHOSEN LANCETS 30G	1		GOJJI LANCING DEVICE/CLEAR CAP	1	
CHOSEN LANCING DEVICE	1		IHEALTH CONTROL SOLUTION	1	
CHOSEN SAFETY LANCETS 28G	1		IHEALTH LANCING DEVICE	1	
CLEVER CHOICE COMFORT EZ	1		LANCETS	1	
COMFORT TOUCH TWIST LANCET 30G	1		LANCETS 28G THIN	1	
CONTOUR CONTROL SOLUTION	1		LANCETS SUPER THIN	1	
CONTOUR NEXT CONTROL SOLUTION	1		MICROLET NEXT LANCING DEVICE	1	
CONTOUR NEXT GEN TEST STRIPS	1	PA; QL	ONETOUCH DELICA PLUS LANCING	1	
DIATHRIVE GLUCOSE CONTROL SOLN	1		ONETOUCH DELICA SAFETY LANCING	1	
DIATHRIVE LANCING DEVICE	1		ONETOUCH ULTRA 2 KIT W/DEVICE	1	
DROPLET GENTEEL LANCING DEVICE	1		ONETOUCH ULTRA BLUE TEST	1	QL
DROPSAFE ACTI-LANCE 23G	1		ONETOUCH ULTRA IN VITRO LIQUID	1	
EASY TALK PLUS II CONTROL	1		ONETOUCH ULTRA IN VITRO STRIP	1	QL
EASY TOUCH HEALTHPRO HIGH/LOW	1		ONETOUCH ULTRA TEST STRIPS	1	QL
EASY TOUCH LANCING DEVICE	1		ONETOUCH VERIO FLEX SYSTEM KIT	1	
EASY TRAK II CONTROL	1		ONETOUCH VERIO IN VITRO LIQUID HIGH	1	
EASYMAX 15 LEVEL 2-3 CONTROL	1		ONETOUCH VERIO TEST STRIPS	1	QL
EASYMAX CONTROL	1		ONETOUCH VERIO REFLECT KIT W/DEVICE	1	
GLUCOSE CONTROL SOLUTIONS	1		PERFECT POINT SAFETY LANCETS	1	
EMBRACE LANCING DEVICE/EJECTOR	1		PIP GLUCOSE CONTROL SOLUTION	1	
EMBRACE TALK GLUCOSE CONTROL	1		TECHLITE LANCETS 26G	1	
FREESTYLE TEST	1	PA; QL	TRUE METRIX LEVEL 1	1	
GENTEEL LANCING KIT (BLUE)	1		TRUE METRIX LEVEL 2	1	
GOJJI CONTROL	1		TRUE METRIX LEVEL 3	1	

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Drug Name	Drug Tier	Notes	Drug Name	Drug Tier	Notes
UNISTRIP CONTROL IN VITRO SOLUTION LOW	1		HUMALOG U-100 JUNIOR KWIKPEN	2	
VERIFINE SAFE LANCET MINI 21G	1		HUMULIN 70/30 KWIKPEN	2	
VERIFINE SAFE LANCET MINI 23G	1		HUMULIN 70/30 VIAL	2	
VERIFINE SAFE LANCET MINI 28G	1		HUMULIN N KWIKPEN	2	
VERIFINE SAFE LANCET MINI 30G	1		HUMULIN N VIAL	2	
VIVAGUARD INO CONTROL SOLUTION	1		HUMULIN R U-500 KWIKPEN	1	PA
VIVAGUARD LANCETS 30G	1		HUMULIN R U-500 VIAL	1	PA
VIVAGUARD LANCING DEVICE	1		HUMULIN R VIAL	1	
VIVAGUARD SAFETY LANCETS 28G	1		INSULIN DEGLUDEC	2	PA
			INSULIN DEGLUDEC FLEXTOUCH	2	PA
			INSULIN GLARGINE-YFGN	1	
			INSULIN LISPRO	2	
			INSULIN LISPRO (1 UNIT DIAL)	2	
Diabetes - Glycemic Agents					
BAQSIMI ONE PACK	2				
BAQSIMI TWO PACK	2				
diazoxide oral	2				
glucagon emergency kit injection kit	1				
Diabetes - Insulins					
AQ INSULIN SYRINGE	1				
BD ULTRA-FINE INSULIN SYRINGES	1				
DROPSAFE SAFETY SYRINGE/NEEDLE	1				
EMBECTA INS SYR U/F 1/2 UNIT	1				
EMBECTA INSULIN SYRINGE	1				
EMBECTA INSULIN SYRINGE U/F	1				
EMBECTA INSULIN SYRINGE U-100	1				
EMBECTA INSULIN SYRINGE U-500	1				
HUMALOG	2				
HUMALOG KWIKPEN	2				
			Electrolytes / Minerals / Metals / Vitamins		

Drug Name	Drug Tier	Notes	Drug Name	Drug Tier	Notes
ARGYLE STERILE SALINE	1		potassium chloride er oral tablet extended release 10 meq, 20 meq, 8 meq	1	
curity sterile saline	1		potassium chloride oral	1	
cyanocobalamin injection solution 1000 mcg/ml	1		potassium citrate er	1	
cytra k crystals	1		potassium citrate-citric acid	1	
deferasirox granules	4	QL	sod citrate-citric acid	1	
deferasirox oral packet	4	QL	sodium chloride (pf)	1	
deferasirox oral tablet	1		sodium chloride irrigation	1	
deferasirox oral tablet soluble	1		sodium fluoride oral solution	1	
ergocalciferol oral capsule	1		sodium fluoride oral tablet 1.1 (0.5 f) mg	1	
folic acid injection	1		sodium fluoride oral tablet chewable	1	
folic acid oral tablet 1 mg	1		sodium polystyrene sulfonate	1	
klor-con	1		sps (sodium polystyrene sulf)	1	
klor-con 10	1		tricitrates	1	
klor-con m10	1		vitamin d (ergocalciferol) oral capsule 1.25 mg (50000 ut), 50000 unit	1	
klor-con m15	2		vitamin k1 injection	1	
klor-con m20	1		wes-phos 250 neutral	1	
levocarnitine oral solution	1		Gastrointestinal Agents - Drugs for Acid Reflux and Ulcer		
levocarnitine oral tablet	1		cimetidine hcl	1	
levocarnitine sf	1		cimetidine oral	1	
ORACIT	2		famotidine oral suspension reconstituted	1	
ORAL CITRATE	2		famotidine oral tablet 20 mg, 40 mg	1	
phospha 250 neutral	1		lansoprazole oral capsule delayed release	1	
phosphorous	1		misoprostol oral	1	
phospho-trin 250 neutral	1		omeprazole oral capsule delayed release	1	
phytonadione injection	1		pantoprazole sodium oral tablet delayed release	1	
phytonadione oral	1				
pot & sod cit-cit ac	1				
potassium chloride crys er oral tablet extended release 10 meq, 20 meq	1				
potassium chloride crys er oral tablet extended release 15 meq	2				
potassium chloride er oral capsule extended release	1				

Drug Name	Drug Tier	Notes	Drug Name	Drug Tier	Notes
rabeprazole sodium oral tablet delayed release	1	ST	peg-3350/electrolytes	1	
sucralfate oral	1		RELISTOR SUBCUTANEOUS	2	PA
Gastrointestinal Agents - Drugs for Bowel, Intestine and Stomach Conditions			ursodiol oral capsule 300 mg	1	
belladonna alkaloids-opium	1	QL	ursodiol oral tablet	1	
chlordiazepoxide-clidinium	1	QL	Genetic or Enzyme Disorder - Drugs for Replacement, Modification, Treatment		
constulose	1		CERDELGA	4	PA; QL
dicyclomine hcl oral capsule	1		CREON	2	
dicyclomine hcl oral solution 10 mg/5ml	1		CYSTAGON	2	PA
dicyclomine hcl oral tablet	1		ZENPEP	2	
diphenoxylate-atropine	1		Genitourinary Agents - Drugs for Bladder, Genital and Kidney Conditions		
enulose	1		acetic acid irrigation	1	
gavilyte-c	1		bethanechol chloride oral	1	
gavilyte-g	1		calcium acetate (phos binder)	1	
gavilyte-n with flavor pack	1		calcium acetate oral tablet 667 mg	1	
generlac	1		CERVIDIL	2	
glycopyrrolate injection solution	1		darifenacin hydrobromide er	1	
glycopyrrolate oral tablet 1 mg, 2 mg	1		ELMIRON	2	
HELIDAC THERAPY	2		flavoxate hcl	1	
hyoscyamine sulfate er	1		mirabegron er	1	
hyoscyamine sulfate oral	1		oxybutynin chloride er	1	
hyoscyamine sulfate sublingual	1		oxybutynin chloride oral solution	1	
hyosyne	1		oxybutynin chloride oral tablet 5 mg	1	
lactulose encephalopathy	1		penicillamine oral	4	PA; QL
lactulose oral solution	1		PENTOSAN POLYSULFATE SODIUM ORAL	2	
loperamide hcl oral capsule	1		phenazopyridine hcl oral tablet 100 mg, 200 mg	1	
nulev	1		PREPIDIL	2	
opium	1	QL	sevelamer carbonate	1	
oscimin	1		sevelamer hcl	1	PA
peg 3350-kcl-na bicarb-nacl	1		solifenacin succinate	1	

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Drug Name	Drug Tier	Notes	Drug Name	Drug Tier	Notes
tolterodine tartrate	1		prednisolone oral solution	1	
tolterodine tartrate er	1		prednisolone sodium phosphate oral solution 15 mg/5ml, 25 mg/5ml, 5 mg/5ml	1	
tropium chloride	1				
tropium chloride er	1				
Genitourinary Agents - Drugs for Prostate Conditions			prednisone oral	1	
alfuzosin hcl er	1		SOLU-CORTEF INJECTION SOLUTION RECONSTITUTED 100 MG	1	
dutasteride oral	1				
finasteride oral tablet 5 mg	1		SOLU-CORTEF INJECTION SOLUTION RECONSTITUTED 1000 MG, 250 MG, 500 MG	2	
silodosin	1				
tamsulosin hcl	1				
terazosin hcl	1				
Hormonal Agents - Adrenal			Hormonal Agents - Men's Health		
DEPO-MEDROL INJECTION SUSPENSION 20 MG/ML	2		danazol oral	1	
dexamethasone intensol	2		DEPO-TESTOSTERONE (brand testosterone cypionate intramuscular)	1	
dexamethasone oral elixir	1		TESTOSTERONE CYPIONATE INJECTION	1	
dexamethasone oral solution	1		testosterone cypionate intramuscular	1	
dexamethasone oral tablet	1		testosterone enanthate intramuscular	1	
dexamethasone sod phos +rfd	1		testosterone transdermal gel 1.62 %, 12.5 mg/act (1%), 20.25 mg/act (1.62%), 25 mg/2.5gm (1%), 50 mg/5gm (1%)	1	QL
dexamethasone sod phosphate pf injection solution	1				
dexamethasone sodium phosphate injection	1		Hormonal Agents - Pituitary		
fludrocortisone acetate oral	1		ACTHAR	4	PA; QL
hydrocortisone oral	1		ACTHAR GEL	4	PA; QL
hydrocortisone sod suc (pf)	1		cabergoline	1	
MEDROL ORAL TABLET 2 MG	2		CORTROPHIN	4	PA; QL
methylprednisolone oral	1		CORTROPHIN GEL	4	PA; QL
methylprednisolone sodium succ injection solution reconstituted 125 mg	1		desmopressin ace spray refrig	1	
			desmopressin acetate injection	1	
			DESMOPRESSIN ACETATE NASAL	2	
			desmopressin acetate oral	1	

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Drug Name	Drug Tier	Notes	Drug Name	Drug Tier	Notes
desmopressin acetate pf	1		aftera	1	
desmopressin acetate spray	1		AFTERPILL	1	
ELIGARD	2		altavera	1	
leuprolide acetate injection	1		alyacen 1/35	1	
LUPRON DEPOT (1-MONTH)	2		alyacen 7/7/7	1	
LUPRON DEPOT (3-MONTH)	2		apri	1	
LUPRON DEPOT (4-MONTH)	2		aranelle	1	
LUPRON DEPOT (6-MONTH)	2		ashlyna	1	
LUPRON DEPOT (4-MONTH) INTRAMUSCULAR KIT 30MG	2		aubra eq	1	
LUPRON DEPOT (6-MONTH) INTRAMUSCULAR KIT 45MG	2		aurovela 1.5/30	1	
LUPRON DEPOT-PED (1-MONTH)	2		aurovela 1/20	1	
LUPRON DEPOT-PED (3-MONTH)	2		aurovela 24 fe	1	
octreotide acetate injection	1		aurovela fe 1.5/30	1	
octreotide acetate intramuscular kit 10 mg	2	QL	aurovela fe 1/20	1	
octreotide acetate intramuscular kit 20 mg, 30 mg	1	QL	aviane	1	
octreotide acetate subcutaneous	1		ayuna	1	
OMNITROPE	4	PA; QL	azurette	1	
SANDOSTATIN LAR DEPOT	2	QL	balziva	1	
Hormonal Agents - Prostaglandins			blisovi 24 fe	1	
MIFEPREX	1		blisovi fe 1.5/30	1	
mifepristone oral tablet 200 mg	1		blisovi fe 1/20	1	
Hormonal Agents - Selective Estrogen Receptor Modifying Agents			briellyn	1	
raloxifene hcl	1		camila	1	
Hormonal Agents - Sex Hormones and Birth Control			camrese	1	
afirmelle	1		camrese lo	1	
			chateal eq	1	
			CLIMARA	1	
			cryselle-28	1	
			cyred eq	1	
			dasetta 1/35 (28)	1	
			dasetta 7/7/7	1	
			daysee	1	
			deblitane	1	
			DELESTROGEN	2	
			delyla	1	
			DEPO-ESTRADIOL	2	

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Drug Name	Drug Tier	Notes	Drug Name	Drug Tier	Notes
desogestrel-ethinyl estradiol	1		haloette	1	
dotti	1		heather	1	
drosiprenone-ethinyl estradiol	1		her style	1	
econtra one-step	1		iclevia	1	
elinest	1		incassia	1	
ELLA	2		introvale	1	
eluryng	1		isibloom	1	
emzahh	1		jaimiess	1	
enilloring	1		jasmiel	1	
enpresse-28	1		jencycla	1	
enskyce	1		jolessa	1	
errin	1		juleber	1	
estarylla	1		junel 1.5/30	1	
estradiol oral	1		junel 1/20	1	
estradiol transdermal patch twice weekly	1		junel fe 1.5/30	1	
estradiol transdermal patch weekly	1		junel fe 1/20	1	
estradiol vaginal	1		junel fe 24	1	
estradiol valerate intramuscular	1		kalliga	1	
estradiol-norethindrone acet	1		kariva	1	
ESTRING	2		kelnor 1/35	1	
ethynodiol diac-eth estradiol	1		kelnor 1/50	1	
etonogestrel-ethinyl estradiol	1		kurvelo	1	
falmina	1		larin 1.5/30	1	
feirza 1.5/30	1		larin 1/20	1	
feirza 1/20	1		larin 24 fe	1	
FEMRING	2		larin fe 1.5/30	1	
gallifrey	1		larin fe 1/20	1	
hailey 1.5/30	1		leena	1	
hailey 24 fe	1		lessina	1	
hailey fe 1.5/30	1		levonest	1	
hailey fe 1/20	1		levonorgest-eth estrad 91-day	1	
			levonorgestrel	1	
			levonorgestrel-ethinyl estrad oral tablet 0.1-20 mg-mcg, 0.15-30 mg-mcg	1	

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Drug Name	Drug Tier	Notes	Drug Name	Drug Tier	Notes
levonorg-eth estrad triphasic	1		norethindrone acetate oral	1	
levora 0.15/30 (28)	1		norethindrone acet-ethinyl est	1	
lojaimiess	1		norethindrone oral	1	
loryna	1		norgestimate-eth estradiol oral tablet 0.25-35 mg-mcg	1	
low-ogestrel	1		norgestimate-ethinyl estradiol triphasic	1	
lo-zumandimine	1		norlyroc	1	
luteria	1		nortrel 0.5/35 (28)	1	
lyleq	1		nortrel 1/35 (21)	1	
lyllana	1		nortrel 1/35 (28)	1	
lyza	1		nortrel 7/7/7	1	
marlissa	1		nylia 1/35	1	
medroxyprogesterone acetate	1		nylia 7/7/7	1	
megestrol acetate oral suspension 40 mg/ml, 400 mg/10ml, 800 mg/20ml	1		ocella	1	
megestrol acetate oral tablet	1		opcicon one-step	1	
microgestin 1.5/30	1		OPILL	1	
microgestin 1/20	1		option 2	1	
microgestin fe 1.5/30	1		PARAGARD INTRAUTERINE COPPER	2	
microgestin fe 1/20	1		philith	1	
mili	1		pimtrea	1	
mimvey	1		portia-28	1	
MIRENA (52 MG)	2		PREMARIN VAGINAL	2	
mono-linyah	1		progesterone intramuscular	1	
my choice	1		progesterone oral	1	
my way	1		react	1	
necon 0.5/35 (28)	1		reclipsen	1	
new day	1		setlakin	1	
nikki	1		sharobel	1	
nora-be	1		simliya	1	
norelgestromin-eth estradiol	1		simpesse	1	
norethin ace-eth estrad-fe oral tablet	1		SKYLA	2	
			sprintec 28	1	

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Drug Name	Drug Tier	Notes	Drug Name	Drug Tier	Notes
sronyx	1		methimazole oral	1	
syeda	1		propylthiouracil oral	1	
take action	1		Immunological Agents - Drugs for Immune System Stimulation or Suppression		
tarina 24 fe	1		AMJEVITA	2	PA
tarina fe 1/20 eq	1		AMJEVITA-PED 10KG TO <15KG		
tri-estarylla	1		SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 10MG/0.2ML	2	PA
tri-linyah	1				
tri-lo-estarylla	1		AMJEVITA-PED 15KG TO <30KG	2	PA
tri-lo-marzia	1				
tri-lo-mili	1		AURANOFIN	4	PA; QL
tri-lo-sprintec	1		azathioprine oral tablet 50 mg	1	
tri-mili	1		BERINERT	4	PA; QL
tri-sprintec	1		COSENTYX (300 MG DOSE)	4	PA; QL
trivora (28)	1		COSENTYX 150 MG/ML SUBCUTANEOUS	4	PA; QL
tri-vylibra	1		COSENTYX SENSOREADY (300 MG)	4	PA; QL
tri-vylibra lo	1		COSENTYX SENSOREADY PEN	4	PA; QL
turqoz	1		COSENTYX UNOREADY	4	PA; QL
tyblume	1		CUVITRU	4	PA; QL
valtya 1/50	1		cyclosporine modified	1	
velivet	1		cyclosporine oral	1	
vestura	1		ENBREL	4	PA; QL
vienva	1		ENBREL MINI	4	PA; QL
viorele	1		ENBREL SURECLICK	4	PA; QL
volnea	1		ENVARUSUS XR	2	
vyfemla	1		gengraf	1	
vylibra	1		HIZENTRA	4	PA; QL
wera	1		HYPERHEP B	2	
xulane	1		HYQVIA	4	PA; QL
yuvaferm	1		icatibant acetate	4	PA; QL
zafemy	1		leflunomide oral	1	
zovia 1/35 (28)	1		methotrexate sodium	1	
zumandimine	1		methotrexate sodium (pf)	1	
Hormonal Agents - Thyroid					
levothyroxine sodium oral tablet	1				
liothyronine sodium oral	1				

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Drug Name	Drug Tier	Notes	Drug Name	Drug Tier	Notes
mycophenolate mofetil oral	1		COMIRNATY	2	
mycophenolate sodium	1		DAPTACEL	2	
mycophenolic acid	1		ENGERIX-B	2	
NABI-HB	2		FLUAD	1	
ORENCIA CLICKJECT	4	PA; QL	FLUARIX	1	
ORENCIA SUBCUTANEOUS	4	PA; QL	FLUBLOK	1	
OTEZLA	4	PA; QL	FLUCELVAX	1	
RASUVO	2		FLULAVAL	1	
RIDAURA	4	PA; QL	FLUMIST	1	
sajazir	4	PA; QL	FLUZONE HIGH-DOSE	1	
sirolimus oral tablet	1		FLUZONE INTRAMUSCULAR SUSPENSION PREFILLED SYRINGE	1	
SKYRIZI PEN	4	PA; QL	GARDASIL 9	2	
SKYRIZI SUBCUTANEOUS	4	PA; QL	HAVRIX	2	
			HEPLISAV-B	2	
tacrolimus oral	1		HIBERIX	2	
TREMFYA CROHNS INDUCTION	4	PA; QL	INFANRIX	2	
TREMFYA SUBCUTANEOUS	4	PA; QL	IPOL	2	
XELJANZ	4	PA; QL	KINRIX	2	
XELJANZ XR	4	PA; QL	MENQUADFI	2	
YESINTEK SUBCUTANEOUS	2	PA	MENVEO	2	
Immunological Agents - Drugs for Vaccination			M-M-R II	2	
ABRYSVO	2		MODERNA COVID-19 VAC 6M-11Y	2	
ACTHIB	2		MRESVIA	2	
ADACEL	2		NOVAVAX COVID-19 VACCINE	2	
AFLURIA	1		PEDIARIX	2	
AFLURIA PRESERVATIVE FREE	1		PEDVAX HIB	2	
AREXVY	2		PENBRAYA	2	
AUDENZ	2		PENTACEL	2	
BEXSERO	2		PFIZER COVID-19 VAC-TRIS 5-11Y	2	
BOOSTRIX	2		PFIZER COVID-19 VAC-TRIS 6M-4Y	2	
CAPVAXIVE	2		PNEUMOVAX 23	2	
			PREVNAR 20	2	

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Drug Name	Drug Tier	Notes	Drug Name	Drug Tier	Notes
PRIORIX	2		mesalamine oral tablet delayed release 1.2 gm	1	
PROQUAD	2		mesalamine rectal	1	
QUADRACEL	2		PENTASA ORAL CAPSULE EXTENDED RELEASE 250 MG	2	PA
RECOMBIVAX HB	2		PENTASA ORAL CAPSULE EXTENDED RELEASE 500 MG	1	PA
ROTARIX	2		PROCTOFOAM HC	2	
ROTATEQ	2		procto-med hc	1	
SHINGRIX	2		proctosol hc	1	
SPIKEVAX	2		proctozone-hc	1	
TDVAX INTRAMUSCULAR SUSPENSION 2-2 LF/0.5ML	2		sulfasalazine oral	1	
TENIVAC	2		Metabolic Bone Disease Agents - Drugs for Osteoporosis		
TETANUS-DIPHTHERIA TOXOIDS TD INTRAMUSCULAR SUSPENSION 2-2 LF/0.5ML	2		alendronate sodium	1	
TRUMENBA	2		calcitonin (salmon) nasal	1	
TWINRIX	2		ibandronate sodium oral	1	
VAQTA INTRAMUSCULAR SUSPENSION 50 UNIT/ML	2		risedronate sodium oral tablet	1	
VARIVAX	2		Metabolic Bone Disease Agents - Other		
VAXELIS	2		calcitriol oral	1	
VAXNEUVANCE	2		cinacalcet hcl	1	
Inflammatory Bowel Disease Agents			Miscellaneous Therapeutic Agents		
APRISO	1		AEROCHAMBER HOLDING CHAMBER	2	
balsalazide disodium	1		AEROCHAMBER MINI CHAMBER	2	
budesonide oral (generic Entocort)	1		AEROCHAMBER MV	2	
CORTIFOAM	2		AEROCHAMBER PLS FLOVU MTHPIECE	2	
hydrocortisone (perianal) external cream 2.5 %	1		AEROCHAMBER PLUS FLO-VU INTERM	2	
hydrocortisone rectal	1		AEROCHAMBER PLUS FLO-VU LARGE DEVICE	2	
mesalamine er oral capsule 0.375 gm	1		AEROCHAMBER PLUS FLO-VU MEDIUM DEVICE	2	
mesalamine oral capsule delayed release 400 mg	1	ST	AEROCHAMBER PLUS FLO-VU SMALL DEVICE	2	

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Drug Name	Drug Tier	Notes	Drug Name	Drug Tier	Notes
AEROCHAMBER PLUS FLOW VU	2		CLEVER CHOICE HOLDING CHAMBER	2	
AEROCHAMBER W/FLOWSIGNAL	2		COMFORT EZ PRO PEN NEEDLES	1	
ALCOHOL PREP PADS PAD , 70 %	1		COMPACT SPACE CHAMBER	2	
ALCOHOL PREP PADS SHEET 70 %	1		COMPACT SPACE CHAMBER/LG MASK	2	
AQINJECT PEN NEEDLE	1		COMPACT SPACE CHAMBER/MED MASK	2	
ASSURE ID DUO PRO PEN NEEDLES	1		COMPACT SPACE CHAMBER/SM MASK	2	
ASSURE ID PRO PEN NEEDLES	1		deferoxamine mesylate injection solution reconstituted 500 mg	1	
AUM ALCOHOL PREP PADS	1		DROPSAFE ALCOHOL PREP	1	
AUM INSULIN SAFETY PEN NEEDLE 31G X 4 MM	1		EASIVENT	2	
AUM MINI INSULIN PEN NEEDLE	1		EMBECTA AUTOSHIELD DUO	1	
AUM PEN NEEDLE 32G X 5 MM , 33G X 4 MM , 33G X 5 MM , 33G X 6 MM	1		EMBECTA PEN NEEDLE NANO	1	
AUM READYGARD DUO PEN NEEDLE	1		EMBECTA PEN NEEDLE NANO 2 GEN	1	
AUM SAFETY PEN NEEDLE	1		EMBECTA PEN NEEDLE U/F	1	
BD AUTOSHIELD DUO PEN NEEDLES	1		EMBRACE PEN NEEDLES 30G X 5 MM , 30G X 8 MM , 31G X 6 MM , 31G X 8 MM , 32G X 4 MM	1	
BD ULTRA-FINE PEN NEEDLES	1		FEMCAP	2	
BREATHE COMFORT CHAMBER/ADULT	2		FLEXICHAMBER	2	
BREATHE COMFORT CHAMBER/CHILD	2		FLEXICHAMBER ADULT MASK/SMALL	2	
BREATHE EASE LARGE	2		FLEXICHAMBER CHILD MASK/LARGE	2	
BREATHE EASE MEDIUM	2		FLEXICHAMBER CHILD MASK/SMALL	2	
BREATHE EASE SMALL	2		GLUCAGON HCL (DIAGNOSTIC)	2	
BREATHERITE VALVED MDI CHAMBER	2		GOODSENSE ALCOHOL SWABS	1	
CAYA	2				

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Drug Name	Drug Tier	Notes	Drug Name	Drug Tier	Notes
INCONTROL ULTICARE PEN NEEDLES	1		PEN NEEDLE/5-BEVEL TIP	1	
INSULIN PEN NEEDLES 29G X 10MM , 29G X 12.7MM , 29G X 12MM , 29G X 5MM , 29G X 8MM , 30G X 5 MM , 30G X 8 MM , 31G X 4 MM , 31G X 5 MM , 31G X 6 MM , 31G X 8 MM , 32G X 4 MM , 32G X 5 MM , 32G X 6 MM , 32G X 8 MM , 33G X 4 MM , 33G X 5 MM , 33G X 6 MM	1		PENTIPS GENERIC PEN NEEDLES 32G X 6 MM	1	
methergine	1		PIP PEN NEEDLES 32G X 4MM	1	
methylegonovine maleate	1		pocket spacer	2	
MICROCHAMBER DEVICE	2		PRO COMFORT SPACER ADULT	2	
NOVOFINE PEN NEEDLE	1		PRO COMFORT SPACER CHILD	2	
NOVOFINE PLUS PEN NEEDLE	1		PRO COMFORT SPACER INFANT	2	
NOZIN NASAL SANITIZER	1		PROCARE SPACER/ADULT MASK	2	
NOZIN NASAL SANITIZER POPSWAB	1		PROCARE SPACER/CHILD MASK	2	
OPTICHAMBER DIAMOND	2		PURE COMFORT SAFETY PEN NEEDLE	1	
OPTICHAMBER DIAMOND-LG MASK	2		PURE COMFORT SPACER CHAMBER	2	
OPTICHAMBER DIAMOND-MD MASK	2		QUICK TOUCH INSULIN PEN NEEDLE	1	
OPTICHAMBER DIAMOND-SM MASK	2		RAYA SURE PEN NEEDLE	1	
PANDA MASK LARGE	2		SAFETY PEN NEEDLES	1	
PANDA MASK MEDIUM	2		TRUE COMFORT SAFETY PEN NEEDLE	1	
PANDA MASK SMALL	2		UNIFINE OTC PEN NEEDLES	1	
PARI VORTEX ADULT MASK	2		UNIFINE PROTECT PEN NEEDLE	1	
PARI VORTEX PEDIATRIC MASK	2		VERIFINE INSULIN PEN NEEDLE	1	
PEDIATRIC PANDA MASK	2		VERIFINE PLUS PEN NEEDLE	1	
			VORTEX VALVE CHAMBER-PEDI MASK	2	
			VORTEX VALVED HOLDING CHAMBER	2	
			WIDE-SEAL DIAPHRAGM 60	2	
			WIDE-SEAL DIAPHRAGM 65	2	

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Drug Name	Drug Tier	Notes	Drug Name	Drug Tier	Notes
WIDE-SEAL DIAPHRAGM 70	2		neomycin-polymyxin- dexameth ophthalmic ointment	1	
WIDE-SEAL DIAPHRAGM 75	2		neomycin-polymyxin- dexameth ophthalmic suspension 3.5-10000-0.1	1	
WIDE-SEAL DIAPHRAGM 80	2		ofloxacin ophthalmic	1	
WIDE-SEAL DIAPHRAGM 85	2		PRED MILD	2	
WIDE-SEAL DIAPHRAGM 90	2		prednisolone acetate ophthalmic	1	
WIDE-SEAL DIAPHRAGM 95	2		prednisolone acetate p-f	1	
Ophthalmic Agents - Drugs for Eye Allergy, Infection and Inflammation			sulfacetamide sodium ophthalmic	1	
ACULAR	2		TOBRADEX	2	
azelastine hcl ophthalmic	1		tobramycin ophthalmic	1	
bacitracin ophthalmic	1		tobramycin- dexamethasone	1	
CILOXAN	2		TOBREX	2	
ciprofloxacin hcl ophthalmic	1		trifluridine	1	
cromolyn sodium ophthalmic	1		VIGAMOX	2	
Ophthalmic Agents - Drugs for Glaucoma			acetazolamide er	1	
dexamethasone sodium phosphate ophthalmic	1		acetazolamide oral	1	
diclofenac sodium ophthalmic	1		betaxolol hcl ophthalmic	1	
difluprednate	1		BETOPTIC-S	2	
erythromycin ophthalmic	1		bimatoprost ophthalmic	1	
fluorometholone	1		brimonidine tartrate ophthalmic solution 0.2 %	1	
flurbiprofen sodium	1		brinzolamide	1	
FML FORTE	2		carteolol hcl	1	
gatifloxacin ophthalmic	1		dorzolamide hcl ophthalmic	1	
gentamicin sulfate ophthalmic	1		dorzolamide hcl-timolol mal	1	
ketorolac tromethamine ophthalmic	1		latanoprost ophthalmic	1	
moxifloxacin hcl (2x day)	1		levobunolol hcl	1	
moxifloxacin hcl ophthalmic	1		LUMIGAN	2	
NATACYN	2		methazolamide oral	1	
			pilocarpine hcl ophthalmic	1	

Drug Name	Drug Tier	Notes	Drug Name	Drug Tier	Notes
timolol maleate ophthalmic	1		ofloxacin otic	1	
travoprost (bak free)	1		Respiratory Tract / Pulmonary Agents - Drugs for Allergies, Cough, Cold		
Ophthalmic Agents - Drugs for Miscellaneous Eye Conditions			azelastine hcl nasal	1	
altafrin	1		benzonatate oral capsule 100 mg, 200 mg	1	
ATROPINE SULFATE OPTHALMIC SOLUTION 0.01 %	1		carbinoxamine maleate	1	
atropine sulfate ophthalmic solution 1 %	1		clemaprine fumarate oral	1	
bacitracin-polymyxin b	1		cyproheptadine hcl oral	1	
bacitra-neomycin-polymyxin-hc	1		desloratadine	1	
CEQUA	2	PA	diphenhydramine hcl injection	1	
CYCLOGYL OPTHALMIC SOLUTION 0.5 %	2		flunisolide nasal	1	
cyclopentolate hcl ophthalmic	1		guaifenesin-codeine	2	QL
cyclosporine ophthalmic	1	PA	hydrocodone bit-homatrop mbr	1	
homatropaire	1		hydromet	1	
neomycin-polymyxin-gramicidin	1		ipratropium bromide nasal	1	
neo-polycin hc	1		levocetirizine dihydrochloride oral	1	
phenylephrine hcl ophthalmic	1		maxi-tuss ac	2	QL
polycin	1		nebusal inhalation nebulization solution 3 %	1	
polymyxin b-trimethoprim	1		olopatadine hcl nasal	1	
sulfacetamide-prednisolone	1		potassium iodide (expectorant)	2	
XIIDRA	2	PA	promethazine vc	1	
Otic Agents - Drugs for Ear Conditions			promethazine-dm	1	
acetic acid otic	1		promethazine-phenylephrine	1	
CIPRO HC	2		pulmosal	1	
ciprofloxacin-dexamethasone	1		ryvent	1	
flac	1		sodium chloride inhalation nebulization solution 0.9 %, 3 %, 7 %	1	
fluocinolone acetonide otic	1		SSKI	2	
neomycin-polymyxin-hc otic	1		SURVANTA	2	
			Respiratory Tract / Pulmonary Agents - Drugs for Asthma and Other Lung Conditions		
			acetylcysteine inhalation	1	

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Drug Name	Drug Tier	Notes	Drug Name	Drug Tier	Notes
ADVAIR HFA	2		FLUTICASONE PROPIONATE DISKUS	2	PA
albuterol sulfate hfa aerosol solution 108 (90 base) mcg/act inhalation	1	QL	FLUTICASONE PROPIONATE HFA INHALATION AEROSOL	2	PA
ALBUTEROL SULFATE HFA AEROSOL SOLUTION 108 (90 BASE) MCG/ACT INHALATION	1	QL	110 MCG/ACT, 220 MCG/ACT		
albuterol sulfate inhalation	1		FLUTICASONE PROPIONATE HFA INHALATION AEROSOL	2	
albuterol sulfate oral syrup 2 mg/5ml	1		44 MCG/ACT		
albuterol sulfate oral tablet	1		FLUTICASONE- SALMETEROL INHALATION AEROSOL	2	
ALVESCO	2		fluticasone-salmeterol inhalation aerosol powder		
ASMANEX (120 METERED DOSES)	2	ST	breath activated 100-50 mcg/act, 250-50 mcg/act, 500-50 mcg/act	1	
ASMANEX (14 METERED DOSES)	2	ST	ipratropium bromide inhalation	1	
ASMANEX (30 METERED DOSES)	2	ST	ipratropium-albuterol	1	
ASMANEX (60 METERED DOSES)	2	ST	montelukast sodium oral	1	
ASMANEX HFA	2	ST	OFEV	4	PA; QL
ATROVENT HFA	2		pirfenidone	4	PA; QL
AUVI-Q INJECTION SOLUTION AUTO- INJECTOR 0.1 MG/0.1ML	2		SEREVENT DISKUS	2	ST
AUVI-Q INJECTION SOLUTION AUTO- INJECTOR 0.15 MG/0.15ML, 0.3 MG/0.3ML	1		SPIRIVA HANDIHALER	1	
breyna	1	PA; QL	SPIRIVA RESPIMAT INHALATION AEROSOL SOLUTION 1.25 MCG/ACT	2	ST
budesonide inhalation	1		SPIRIVA RESPIMAT INHALATION AEROSOL SOLUTION 2.5 MCG/ACT	2	
budesonide-formoterol fumarate	1	PA; QL	STIOLTO RESPIMAT	2	
COMBIVENT RESPIMAT	2		STRIVERDI RESPIMAT	2	PA
cromolyn sodium inhalation	1		terbutaline sulfate oral	1	
elixophyllin	1		theophylline er	1	
epinephrine injection solution auto-injector	1		theophylline oral	1	
			tiotropium bromide monohydrate	1	
			wixela inhub	1	

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Drug Name	Drug Tier	Notes	Drug Name	Drug Tier	Notes
Respiratory Tract / Pulmonary Agents - Drugs for Cystic Fibrosis			Skeletal Muscle Relaxants - Drugs for Muscle Pain and Spasm		
ALYFTREK	4	PA; QL	baclofen oral tablet 10 mg, 20 mg, 5 mg	1	
PULMOZYME	2	QL	chlorzoxazone oral tablet 250 mg	1	
tobramycin nebulization solution 300 mg/5ml inhalation	4	PA; QL	chlorzoxazone oral tablet 375 mg, 500 mg, 750 mg	1	QL
TRIKAFTA	4	PA; QL	cyclobenzaprine hcl oral tablet 10 mg, 5 mg	1	QL
Respiratory Tract / Pulmonary Agents - Drugs for Pulmonary Hypertension			dantrolene sodium oral	1	
alyq	1		methocarbamol injection	1	
ambrisentan	1	PA; QL	methocarbamol oral tablet 500 mg, 750 mg	1	QL
bosentan	1	PA; QL	orphenadrine citrate er	1	QL
OPSUMIT	4	PA; QL	tizanidine hcl oral tablet	1	
sildenafil citrate oral suspension reconstituted	4	PA; QL	Sleep Disorder Agents		
sildenafil citrate oral tablet 20 mg	4	PA	armodafinil	1	
tadalafil (pah)	1		eszopiclone	1	QL
TYVASO	2	PA; QL	flurazepam hcl	1	QL
TYVASO REFILL KIT	2	PA; QL	modafinil oral	1	
TYVASO STARTER KIT	2	PA; QL	temazepam oral capsule 15 mg, 30 mg, 7.5 mg	1	QL
UPTRAVI ORAL	4	PA; QL	zaleplon	1	QL
UPTRAVI TITRATION	4	PA; QL	zolpidem tartrate oral tablet	1	QL
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