

Effective May 2025

2025 Drug Formulary

For large employer groups with a 4-tier in-network pharmacy benefit

Access PPO

SEBB

Core

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			indomethacin oral capsule	1	
ANAPROX DS	3		indomethacin oral suspension	3	
ARTHROTEC	3		indomethacin rectal suppository 50 mg	3	
CELEBREX	3		ketoprofen er	3	
celecoxib oral	1		ketoprofen oral	3	
DAYPRO	3		ketorolac tromethamine injection solution 15 mg/ml	1	
DICLOFENAC PATCH 1.3%	3		KETOROLAC TROMETHAMINE INTRAMUSCULAR SOLUTION 30 MG/ML	3	
diclofenac potassium oral capsule	3	PA	ketorolac tromethamine intramuscular solution 60 mg/2ml	1	
diclofenac potassium oral tablet 50 mg	1		ketorolac tromethamine oral	3	
diclofenac sodium er	1		ketorolac tromethamine solution 30 mg/ml injection	1	
diclofenac sodium external gel 1 %	3		KETOROLAC TROMETHAMINE SOLUTION 30 MG/ML INJECTION	3	
diclofenac sodium external solution 1.5 %	3		KIPROFEN	3	
diclofenac sodium external solution 2 %	3	PA	LICART	3	
diclofenac sodium oral	1		LODINE	3	
diclofenac-misoprostol	3		meclofenamate sodium oral	1	
DICLOFONO	3		mefenamic acid oral	3	
diflunisal oral	1		meloxicam oral capsule	3	
DOLOBID	3	PA	MELOXICAM ORAL SUSPENSION	3	
EC-NAPROSYN	3		meloxicam oral tablet	1	
ec-naproxen	3		nabumetone oral	1	
etodolac	1		NALFON	3	
etodolac er	3		NAPRELAN ORAL TABLET EXTENDED RELEASE 24 HOUR 375 MG, 500 MG	3	
fenopropfen calcium oral	3				
FENOPRON	3				
FLECTOR	3				
flurbiprofen oral	1				
ibuprofen oral suspension 100 mg/5ml, 200 mg/10ml	3				
ibuprofen oral tablet 400 mg, 600 mg, 800 mg	1				
INDOCIN	3				
indomethacin er	1				

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Drug Name	Drug Tier	Notes	Drug Name	Drug Tier	Notes
NAPRELAN ORAL TABLET EXTENDED RELEASE 24 HOUR 750 MG	3	PA	butalbital-acetaminophen	3	
NAPROSYN	3		butalbital-apap-caff-cod	3	QL
naproxen dr	3		butalbital-apap-caffeine oral capsule	3	
naproxen oral suspension	1		butalbital-apap-caffeine oral tablet	1	
naproxen oral tablet	1		butalbital-asa-caff-codeine	3	QL
naproxen oral tablet delayed release	3		butalbital-aspirin-caffeine	1	
naproxen sodium er	3		butorphanol tartrate nasal	3	QL
naproxen sodium oral tablet 275 mg, 550 mg	1		BUTRANS	3	PA; QL
oxaprozin oral tablet	3		codeine sulfate	1	QL
PENNSAID	3	PA	CONZIP	3	PA; QL
piroxicam oral	1		DILAUDID ORAL	3	QL
RELAFEN DS	3	PA	endocet	1	QL
salsalate 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
SPRIX	3		fentanyl transdermal patch 72 hour 37.5 mcg/hr, 62.5 mcg/hr, 87.5 mcg/hr	3	PA; QL
sulindac oral	1		FIORICET	3	
TOLECTIN 600	3		FIORICET/CODEINE	3	QL
tolmetin sodium oral capsule	1		hydrocodone bitartrate er	3	PA; QL
tolmetin sodium oral tablet	3		hydrocodone-acetaminophen oral solution 10-325 mg/15ml	3	QL
TRIFENA PAIN RELIEF	3		hydrocodone-acetaminophen oral solution 2.5-108 mg/5ml, 5-217 mg/10ml, 7.5-325 mg/15ml	1	QL
ZIPSOR	3	PA	hydrocodone-acetaminophen oral tablet 10-300 mg, 2.5-325 mg, 5-300 mg, 7.5-300 mg	3	QL
ZYNRELEF	3		hydrocodone-acetaminophen oral tablet 10-325 mg, 5-325 mg, 7.5-325 mg	1	QL
Analgesics - Drugs for Pain			hydrocodone-ibuprofen	3	QL
acetaminophen-codeine	1	QL			
ALLZITAL	3				
APADAZ	3	QL			
apap-caff-dihydrocodeine	3	QL			
ascomp-codeine	3	QL			
bac (butalbital-acetamin-caff)	1				
BELBUCA	3	PA; QL			
BENZHYDROCODONE-ACETAMINOPHEN	3	QL			
buprenorphine	3	PA; QL			

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Drug Name	Drug Tier	Notes	Drug Name	Drug Tier	Notes
hydromorphone hcl er	3	PA; QL	OXYCODONE- ACETAMINOPHEN ORAL TABLET 10-300 MG, 2.5-300 MG, 5-300 MG, 7.5-300 MG	3	QL
hydromorphone hcl oral	1	QL	oxycodone- acetaminophen oral tablet 10-325 mg, 2.5-325 mg, 5-325 mg, 7.5-325 mg	1	QL
hydromorphone hcl rectal	1	QL	OXYCONTIN	2	ST; QL
HYSINGLA ER	3	PA; QL	oxymorphone hcl	3	QL
JOURNAVX	3	PA	oxymorphone hcl er	3	PA; QL
levorphanol tartrate oral	1	PA; QL	pentazocine-naloxone hcl	3	QL
meperidine hcl oral tablet	3	QL	PERCOCET	3	QL
methadone hcl intensol	1	QL	PROLATE ORAL TABLET	3	QL
methadone hcl oral	1	QL	ROXICODONE	3	QL
METHADOSE ORAL CONCENTRATE 10 MG/ML	3	QL	tencon	3	
methadose oral tablet soluble	1	QL	TRAMADOL HCL (ER BIPHASIC) ORAL CAPSULE EXTENDED RELEASE 24 HOUR	3	PA; QL
METHADOSE SUGAR- FREE	3	QL	tramadol hcl (er biphasic) oral tablet extended release 24 hour	3	PA; QL
morphine sulfate (concentrate) oral solution 100 mg/5ml	1	QL	tramadol hcl er	3	PA; QL
morphine sulfate er beads	3	ST; QL	tramadol hcl oral tablet 100 mg, 50 mg	1	QL
morphine sulfate er oral capsule extended release 24 hour	3	PA; QL	tramadol hcl oral tablet 25 mg, 75 mg	3	PA; QL
morphine sulfate er oral tablet extended release	1	ST; QL	tramadol-acetaminophen	1	QL
morphine sulfate oral	1	QL	TREZIX	3	QL
morphine sulfate rectal	1	QL	Anesthetics		
MS CONTIN	3	ST; QL	AGONEAZE	3	
NALOCET	3	QL	ANODYNE LPT	3	
NUCYNTA	3	PA; QL	ASTERO	3	
NUCYNTA ER	3	PA; QL	BRUSELIX EXTERNAL CREAM	3	
oxycodone hcl oral capsule	3	QL	COCAINE HCL NASAL	3	
oxycodone hcl oral concentrate	1	QL	CRYODOSE TA	3	
oxycodone hcl oral solution	1	QL	DERMACINRX LIDOGEL	3	
oxycodone hcl oral tablet	1	QL	EHA	3	
OXYCODONE- ACETAMINOPHEN ORAL SOLUTION 5-325 MG/5ML	2	QL			

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Drug Name	Drug Tier	Notes	Drug Name	Drug Tier	Notes
ethyl chloride	3		LIDOCAINE HCL SOLUTION PREFILLED SYRINGE 100 MG/5ML INJECTION	3	
GEBAUERS PAIN EASE	3		lidocaine hcl urethral/mucosal	1	
GEBAUERS SPRAY AND STRETCH	3		lidocaine-epinephrine solution 1 %-1:100000 injection	3	
glydo	1		LIDOCAINE-EPINEPHRINE SOLUTION 1 %-1:100000 INJECTION	3	
LDO PLUS	3		lidocaine-prilocaine	1	
LEVATIO	3		LIDOCAN	3	
LIDO BDK	3		LIDODERM	3	
lidocaine external ointment 5 %	3		LIDOMAR	3	
lidocaine external patch 5 %	1		LIDOPIN EXTERNAL CREAM 3 %	3	
lidocaine hcl (pf) injection solution 0.5 %, 1.5 %	3		LIDOREX	3	
lidocaine hcl (pf) injection solution 1 %, 2 %	1		LIDORX	3	PA
lidocaine hcl external cream 3 %	3		LIDO-SORB	3	PA
LIDOCAINE HCL EXTERNAL CREAM 4.12 %	3		LIDOTHOL	3	
lidocaine hcl external lotion	3	PA	LIDOTRAL EXTERNAL CREAM	3	
lidocaine hcl external solution	3		LIDOTRAL EXTERNAL LIQUID	3	
lidocaine hcl injection solution 0.5 %	1		LIDOTRAN	3	
LIDOCAINE HCL INJECTION SOLUTION PREFILLED SYRINGE 10 MG/ML, 200 MG/10ML	3		LIVIXIL PAK	3	
LIDOCAINE HCL SOLUTION 1 % INJECTION	3		LYDEXA	3	
lidocaine hcl solution 1 % injection	1		NEUROZYL	3	
LIDOCAINE HCL SOLUTION 2 % INJECTION	3		NUMBRINO	3	
lidocaine hcl solution 2 % injection	1		premium lidocaine	3	
lidocaine hcl solution prefilled syringe 100 mg/5ml injection	3		PRILOVIX	3	
			PRILOVIX PLUS	3	
			PROXIVOL	3	
			RELADOR PAK	3	
			RELADOR PAK PLUS	3	
			SOOTHEE	3	
			TRIDACAINE II	3	

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Drug Name	Drug Tier	Notes	Drug Name	Drug Tier	Notes
TRIDACAINE III	3		NICORETTE MOUTH/THROAT GUM 2 MG	2	
TRILOCAINE	3		NICORETTE MOUTH/THROAT LOZENGE	2	
XYLOCAINE	3		nicotine mini	2	
XYLOCAINE MPF +RFID	3		nicotine polacrilex mini	2	
XYLOCAINE/EPINEPHRINE INJECTION SOLUTION 1 %-1:100000	3		nicotine polacrilex mouth/throat	2	
XYLOCAINE-MPF	3		nicotine step 1	1	
XYLOCAINE-MPF +RFID	3		nicotine step 2	1	
ZERUVIA	3		nicotine step 3	1	
ZIONODIL	3	PA	nicotine transdermal kit	1	
ZIONODIL 100	3	PA	nicotine transdermal patch 24 hour 21 mg/24hr	1	
ZTLIDO	3		OPVEE	3	PA
Anti-Addiction / Substance Abuse Treatment Agents			REXTOVY	3	
acamprosate calcium	1		SUBOXONE	3	QL
buprenorphine hcl sublingual	1	QL	varenicline tartrate	1	
buprenorphine hcl-naloxone hcl	1	QL	varenicline tartrate (starter)	1	
bupropion hcl er (smoking det)	1		varenicline tartrate(continue)	1	
disulfiram oral	1		VIVITROL	4	QL
ft nicotine mini	2		ZIMHI	3	
ft nicotine mouth/throat	2		ZUBSOLV	3	QL
ft nicotine transdermal	1		Antibacterials		
goodsense nicotine mouth/throat gum	2		amoxicillin	1	
goodsense nicotine mouth/throat lozenge 4 mg	2		amoxicillin-potassium clavulanate	1	
habitrol	1		amoxicillin-potassium clavulanate er	3	
KLOXXADO	3		ampicillin	1	
naloxone hcl injection	1		ampicillin sodium injection solution reconstituted 1 gm, 250 mg, 500 mg	1	
naloxone hcl nasal	1		ARIKAYCE	3	
naltrexone hcl oral	1		AUGMENTIN	3	
NARCAN	2		AUGMENTIN ES-600	3	
NICORETTE MINI	2		avidoxy	1	

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Drug Name	Drug Tier	Notes	Drug Name	Drug Tier	Notes
azithromycin oral	1		clindamycin phosphate injection solution 300 mg/2ml	1	
BACTRIM	3		clindamycin phosphate vaginal	1	
BACTRIM DS	3		CLINDESSE	3	
BICILLIN L-A	2		colistimethate sodium (cba)	3	
cefaclor	3		COLY-MYCIN M	3	
cefaclor er	3		demeclocycline hcl	3	
cefadroxil	1		dicloxacillin sodium	1	
cefazolin sodium injection solution reconstituted 1 gm	1		doxycycline hyclate oral capsule	1	
cefdinir	1		doxycycline hyclate oral tablet	1	
cefepime hcl injection	3		doxycycline hyclate oral tablet delayed release 100 mg, 150 mg, 200 mg, 50 mg, 75 mg	3	
cefixime	1		DOXYCYCLINE HYCLATE ORAL TABLET DELAYED RELEASE 80 MG	3	
cefepodoxime proxetil	3		doxycycline monohydrate oral capsule	1	
cefprozil	1		doxycycline monohydrate oral suspension reconstituted	3	
ceftazidime injection solution reconstituted 1 gm	1		doxycycline monohydrate oral tablet	1	
ceftriaxone sodium injection solution reconstituted 1 gm, 2 gm, 250 mg, 500 mg	1		E.E.S. 400	3	
cefuroxime axetil	1		E.E.S. GRANULES	3	
cephalexin oral capsule 250 mg, 500 mg	1		ERYPED 400	3	
cephalexin oral capsule 750 mg	3		erythromycin base oral	3	
cephalexin oral suspension reconstituted	1		erythromycin ethylsuccinate oral suspension reconstituted	1	
cephalexin oral tablet	3		erythromycin oral	3	
CIPRO	3		FIRVANQ	2	
ciprofloxacin hcl oral	1		fosfomicin tromethamine	3	
clarithromycin er	3		gentamicin sulfate external	1	
clarithromycin oral	1		HIPREX	3	
CLEOCIN	3				
CLEOCIN PHOSPHATE INJECTION SOLUTION 300 MG/2ML	3				
clindamycin hcl oral	1				
clindamycin palmitate hcl	1				

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Drug Name	Drug Tier	Notes	Drug Name	Drug Tier	Notes
HUMATIN	3		SILVADENE	3	
levofloxacin oral	1		silver nitrate external	3	
LIKMEZ	3	PA	silver sulfadiazine external	1	
LINCOCIN	3		SIVEXTRO ORAL	4	QL
lincomycin hcl injection	3		SOLOSEC	3	
linezolid oral	1	QL	ssd	1	
MACROBID	3		streptomycin sulfate intramuscular	3	
MACRODANTIN	3		sulfadiazine oral	3	
mafenide acetate external	3		sulfamethoxazole-trimethoprim oral	1	
methenamine hippurate	1		SULFAMYLON	3	
methenamine mandelate oral	3		sulfatrim pediatric	1	
metronidazole oral capsule	3		TARGADOX	3	
metronidazole oral tablet 125 mg	3	PA	tazicef injection	1	
metronidazole oral tablet 250 mg, 500 mg	1		tetracycline hcl oral capsule	1	
metronidazole vaginal	1		TETRACYCLINE HCL ORAL TABLET	3	
minocycline hcl er	3	PA	tinidazole oral	3	
minocycline hcl oral capsule	1		trimethoprim oral	1	
minocycline hcl oral tablet	3		vancomycin hcl oral capsule	1	QL
mondoxyne nl	1		vancomycin hcl oral solution reconstituted	1	
moxifloxacin hcl oral	1		VANDAZOLE	3	
mupirocin cream	1		XACIATO	3	
mupirocin ointment	1		ZITHROMAX ORAL	3	
neomycin sulfate oral	1		ZITHROMAX TRI-PAK	3	
neomycin-polymyxin b gu	3		ZITHROMAX Z-PAK	3	
nitrofurantoin macrocrystal	1		Anticoagulants		
nitrofurantoin monohydrate macrocrystals	1		dabigatran etexilate mesylate	1	
nitrofurantoin oral suspension 25 mg/5ml, 50 mg/10ml	1		ELIQUIS	3	PA
NUVESSA	3		ELIQUIS DVT/PE STARTER PACK	3	PA
ofloxacin oral	3		enoxaparin sodium	1	
penicillin v potassium	1		fondaparinux sodium	4	QL

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Drug Name	Drug Tier	Notes	Drug Name	Drug Tier	Notes
FRAGMIN SUBCUTANEOUS SOLUTION 10000 UNIT/4ML	3		DILANTIN INFATABS	3	
FRAGMIN SUBCUTANEOUS SOLUTION 95000 UNIT/3.8ML	3	PA	DILANTIN ORAL CAPSULE 100 MG	3	
FRAGMIN SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	3		DILANTIN ORAL CAPSULE 30 MG	2	
heparin sodium (porcine) injection solution 1000 unit/ml, 10000 unit/ml, 5000 unit/ml	1		DILANTIN ORAL SUSPENSION 125 MG/5ML	3	
heparin sodium (porcine) pf	1		DILANTIN-125	3	
jantoven	1		divalproex sodium er	1	
LOVENOX	3		divalproex sodium oral	1	
PRADAXA ORAL CAPSULE	3		epitol	1	
REGIOCIT	3		EPRONTIA	3	PA
rivaroxaban	1	PA	ethosuximide oral	1	
SAVAYSA	3	PA	felbamate	3	QL
warfarin sodium oral	1		FYCOMPA	3	PA; QL
XARELTO ORAL TABLET	2	PA	gabapentin oral capsule	1	
XARELTO STARTER PACK	2	PA	gabapentin oral solution	1	
			gabapentin oral tablet 600 mg, 800 mg	1	
			KEPPRA ORAL	3	
			KEPPRA XR	3	
			lacosamide oral	1	
			LAMICTAL	3	PA
			LAMICTAL ODT	3	PA
			LAMICTAL STARTER	3	PA
			LAMICTAL XR	3	PA
Anticonvulsants - Drugs for Seizures			lamotrigine er	3	
carbamazepine er	1		lamotrigine oral kit	3	
carbamazepine oral	1		lamotrigine oral tablet	1	
CARBATROL	3		lamotrigine oral tablet chewable	1	
CELONTIN	3		lamotrigine oral tablet dispersible	3	
clobazam oral suspension 2.5 mg/ml	1		lamotrigine starter kit-blue	3	
clobazam oral tablet	1		lamotrigine starter kit-green	3	
DEPAKOTE	3		lamotrigine starter kit-orange	3	
DEPAKOTE ER	3		levetiracetam er	1	
DEPAKOTE SPRINKLES	3				
diazepam rectal	1	QL			

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Drug Name	Drug Tier	Notes	Drug Name	Drug Tier	Notes
levetiracetam oral solution	1		subvenite starter kit-green	3	
levetiracetam oral tablet	1		subvenite starter kit-orange	3	
LEVETIRACETAM ORAL TABLET DISINTEGRATING SOLUBLE	3		TEGRETOL	3	
LIBERVANT BUCCAL FILM 10 MG, 12.5 MG, 15 MG, 5 MG, 7.5 MG	3	PA; QL	TEGRETOL-XR	3	
methsuximide	2		tiagabine hcl	3	
NAYZILAM	2	PA; QL	TOPAMAX	3	
NEURONTIN	3		TOPAMAX SPRINKLE	3	
oxcarbazepine	1		topiramate er	3	PA
oxcarbazepine er	3		topiramate oral	1	
OXTELLAR XR	3		TRILEPTAL	3	
pentobarbital sodium injection	3		TROKENDI XR	3	PA
phenobarbital oral	1		valproic acid oral	1	
phenobarbital sodium injection solution 130 mg/ml	1		VALTOCO 10 MG DOSE	2	PA; QL
phenytek	3		VALTOCO 15 MG DOSE	2	PA; QL
phenytoin infatabs	1		VALTOCO 20 MG DOSE	2	PA; QL
phenytoin oral	1		VALTOCO 5 MG DOSE	2	PA; QL
phenytoin sodium extended oral capsule 100 mg	1		VIMPAT ORAL	3	
phenytoin sodium extended oral capsule 200 mg, 300 mg	3		ZARONTIN	3	
phenytoin sodium injection	1		ZONEGRAN	3	
primidone oral tablet 125 mg	3	PA; QL	ZONISADE	3	PA
primidone oral tablet 250 mg, 50 mg	1		zonisamide oral	1	
QUDEXY XR	3	PA	Antidementia Agents - Drugs for Alzheimer's Disease and Dementia		
roweepra	1		ADLARITY	3	PA
SPRITAM	3		ARICEPT	3	
subvenite	1		donepezil hcl	1	
subvenite starter kit-blue	3		EXELON	3	
			galantamine hydrobromide	1	
			galantamine hydrobromide er	1	
			memantine hcl er	3	PA
			memantine hcl oral solution	3	
			memantine hcl oral tablet 10 mg, 5 mg	1	
			memantine hcl oral tablet 28 x 5 mg & 21 x 10 mg	3	

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Drug Name	Drug Tier	Notes	Drug Name	Drug Tier	Notes
memantine hcl-donepezil hcl	3		doxepin hcl oral concentrate	1	
NAMENDA TITRATION PAK	3		DRIZALMA SPRINKLE	3	
NAMZARIC	3		duloxetine hcl oral capsule delayed release particles 20 mg, 30 mg, 60 mg	1	
rivastigmine	3		duloxetine hcl oral capsule delayed release particles 40 mg	3	
rivastigmine tartrate	1		EFFEXOR XR	3	
ZUNVEYL	3	PA	escitalopram oxalate oral	1	
Antidepressants			FETZIMA	3	PA
amitriptyline hcl oral	1		FETZIMA TITRATION	3	PA
amoxapine	1		fluoxetine hcl (pmdd)	3	
ANAFRANIL	3		fluoxetine hcl oral capsule	1	
APLENZIN	3		fluoxetine hcl oral capsule delayed release	3	
bupropion hcl er (sr)	1		fluoxetine hcl oral solution	1	
bupropion hcl er (xl) oral tablet extended release 24 hour 150 mg, 300 mg	1		fluoxetine hcl oral tablet	1	
BUPROPION HCL ER (XL) ORAL TABLET EXTENDED RELEASE 24 HOUR 450 MG	3	PA	fluvoxamine maleate	1	
bupropion hcl oral	1		fluvoxamine maleate er	3	
CELEXA	3		FORFIVO XL	3	PA
chlordiazepoxide-amitriptyline	3	QL	imipramine hcl oral	1	
CITALOPRAM HYDROBROMIDE ORAL CAPSULE	3	PA	imipramine pamoate	3	
citalopram hydrobromide oral solution	1		LEXAPRO	3	
citalopram hydrobromide oral tablet	1		MARPLAN	3	
clomipramine hcl oral	1		mirtazapine oral	1	
CYMBALTA	3		NARDIL	3	
desipramine hcl oral	1		nefazodone hcl	3	
DESVENLAFAXINE ER (authorized generic Khedezla)	3	PA	NORPRAMIN	3	
desvenlafaxine succinate er	1		nortriptyline hcl oral	1	
doxepin hcl oral capsule	1		olanzapine-fluoxetine hcl	3	
			PAMELOR	3	
			PARNATE	3	
			paroxetine hcl	1	
			paroxetine hcl er	1	
			paroxetine mesylate	3	
			PAXIL	3	

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Drug Name	Drug Tier	Notes	Drug Name	Drug Tier	Notes
PAXIL CR	3		aprepitant oral capsule 125 mg, 80 & 125 mg, 80 mg	1	
perphenazine-amitriptyline	1		aprepitant oral capsule 40 mg	3	
phenelzine sulfate oral	1		BONJESTA	3	PA
PRISTIQ	3		compro	1	
protriptyline hcl	1		DICLEGIS	3	PA
PROZAC	3		dimenhydrinate injection	1	
REMERON	3		doxylamine-pyridoxine	3	PA
REMERON SOLTAB	3		dronabinol	1	
SERTRALINE HCL ORAL CAPSULE	3		EMEND BIPACK	3	
sertraline hcl oral concentrate	1		EMEND ORAL	3	
sertraline hcl oral tablet	1		EMEND TRIPACK	3	
SYMBYAX	3		granisetron hcl oral	1	
tranlycypromine sulfate	1		meclizine hcl oral tablet 12.5 mg, 25 mg	3	
trazodone hcl oral	1		metoclopramide hcl injection	1	
trimipramine maleate oral	3		metoclopramide hcl oral solution	1	
TRINTELLIX	3	PA; QL	metoclopramide hcl oral tablet	1	
VENLAFAXINE BESYLATE ER	3		metoclopramide hcl oral tablet dispersible	3	
venlafaxine hcl	1		ondansetron hcl +rfid	1	
venlafaxine hcl er oral capsule extended release 24 hour	1		ondansetron hcl injection	1	
venlafaxine hcl er oral tablet extended release 24 hour	3		ondansetron hcl oral	1	
VIIBRYD	3	PA	ondansetron odt oral tablet dispersible 16 mg	3	PA
vilazodone hcl	3	PA	ondansetron odt oral tablet dispersible 4 mg, 8 mg	1	
WELLBUTRIN SR	3		perphenazine oral	1	
WELLBUTRIN XL	3		PHENERGAN	3	
ZOLOFT	3		prochlorperazine	1	
Antiemetics - Drugs for Nausea and Vomiting			prochlorperazine edisylate injection	1	
AKYNZEO ORAL	3		prochlorperazine maleate oral	1	
ANZEMET	3		promethazine hcl injection	3	
aprepitant oral	1				

Drug Name	Drug Tier	Notes	Drug Name	Drug Tier	Notes
promethazine hcl oral	1		itraconazole oral	1	PA
promethazine hcl rectal	1		JUBLIA	3	PA
promethegan	1		ketoconazole external cream	1	
REGLAN	3		ketoconazole external foam	3	
SANCUSO	3	PA	ketoconazole external shampoo	1	
scopolamine	3		ketoconazole oral	1	
SYNDROS	3		ketodan	3	
TIGAN	3	PA	klayesta	1	
trimethobenzamide hcl oral	3	PA	LULICONAZOLE	3	
VARUBI (180 MG DOSE)	3	PA; QL	LUZU	3	
Antifungals			miconazole 3	3	
BREXAFEMME	3	PA	MICONAZOLE-ZINC OXIDE-PETROLAT	3	
ciclodan	1		naftifine hcl	3	
ciclopirox external	1		NAFTIN	3	
ciclopirox olamine external	1		NOXAFIL ORAL PACKET	3	
clotrimazole external	3		nyamyc	1	
clotrimazole mouth/throat	1		nystatin external	1	
clotrimazole-betamethasone	1		nystatin mouth/throat	1	
CRESEMBA ORAL	4	PA; QL	nystatin oral	1	
DIFLUCAN ORAL SUSPENSION RECONSTITUTED	3		nystatin-triamcinolone	1	
DIFLUCAN ORAL TABLET 100 MG, 200 MG	3		nystop	1	
econazole nitrate external	3		ORAVIG	3	
ECOZA	3		oxiconazole nitrate	3	
ERTACZO	3		OXISTAT	3	
EXELDERM	3		SPORANOX	3	PA
exoderm	3		tavaborole	3	PA
fluconazole oral	1		terbinafine hcl oral	1	
flucytosine oral	4	QL	terconazole vaginal cream	1	
griseofulvin microsize oral	1		terconazole vaginal suppository	3	
griseofulvin ultramicronsize oral tablet 125 mg, 250 mg	1		voriconazole oral	1	
GYNAZOLE-1	3		VUSION	3	
			Antigout Agents		

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Drug Name	Drug Tier	Notes	Drug Name	Drug Tier	Notes
allopurinol oral tablet 100 mg, 300 mg	1		IMITREX STATDOSE REFILL	3	
allopurinol oral tablet 200 mg	3	PA	IMITREX STATDOSE SYSTEM	3	
colchicine oral	1		MAXALT	3	
colchicine-probenecid	1		MAXALT-MLT	3	
febuxostat	1		MIGERGOT	2	
GLOPERBA	3		naratriptan hcl	1	
MITIGARE	3		NURTEC	3	PA; QL
probenecid	1		RELPAK	3	
ULORIC	3		REYVOW	3	PA; QL
Antimigraine Agents			rizatriptan benzoate	1	
AIMOVIG SUBCUTANEOUS SOLUTION AUTO-INJECTOR 140 MG/ML, 70 MG/ML	3	PA	sumatriptan nasal	1	
AJOVY	3	PA	sumatriptan succinate oral	1	
almotriptan malate	3	PA	sumatriptan succinate refill subcutaneous solution cartridge	1	
CAMBIA	3	PA	sumatriptan succinate subcutaneous	1	
diclofenac potassium(migraine)	3	PA	sumatriptan-naproxen sodium	3	PA
dihydroergotamine mesylate injection	1	QL	TOSYMRA	3	
dihydroergotamine mesylate nasal	4		TREXIMET	3	PA
eletriptan hydrobromide	1		TRUDHESA	3	PA
EMGALITY SUBCUTANEOUS SOLUTION AUTO-INJECTOR 120 MG/ML	3	PA	UBRELVY	3	PA; QL
EMGALITY SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 100 MG/ML, 120 MG/ML	3	PA; QL	ZEMBRACE SYMTOUCH	3	
ERGOMAR	2		ZOLMITRIPTAN NASAL SOLUTION 2.5 MG	3	
ergotamine-caffeine	1		zolmitriptan nasal solution 5 mg	3	
FROVA	3	PA	zolmitriptan oral	1	
frovatriptan succinate	3	PA	ZOMIG	3	
IMITREX	3		Antimyasthenic Agents		
			MESTINON ORAL SOLUTION	2	
			MESTINON ORAL TABLET	3	
			MESTINON ORAL TABLET EXTENDED RELEASE	3	

Drug Name	Drug Tier	Notes	Drug Name	Drug Tier	Notes
pyridostigmine bromide er	1		CASODEX	3	
pyridostigmine bromide oral	1		COMETRIQ	3	PA; QL
Antimycobacterials			COPIKTRA	3	PA; QL
cycloserine oral	3		COTELLIC	2	PA; QL
dapsone oral	1		cyclophosphamide oral capsule	1	
ethambutol hcl oral	1		CYCLOPHOSPHAMIDE ORAL TABLET	3	
isoniazid oral	1		DANZITEN	3	PA; QL
PRETOMANID	3		dasatinib	1	PA; QL
PRIFTIN	2		DAURISMO	3	PA; QL
pyrazinamide oral	1		DROXIA	2	
rifabutin	1		ERIVEDGE	3	PA; QL
rifampin oral	1		ERLEADA	3	PA; QL
TRECATOR	3		erlotinib hcl	1	PA; QL
Antineoplastics - Drugs for Cancer			etoposide oral	1	QL
abiraterone acetate	1	QL	EULEXIN	3	QL
ABIRTEGA	3	PA; QL	everolimus oral tablet 10 mg, 2.5 mg, 5 mg, 7.5 mg	1	PA; QL
AFINITOR	3	PA; QL	everolimus oral tablet soluble	1	PA; QL
AFINITOR DISPERZ	2	PA; QL	exemestane	1	
AKEEGA	3	PA; QL	FARESTON	3	PA
ALECENSA	3	PA; QL	FEMARA	3	
ALUNBRIG	3	PA; QL	FOTIVDA	3	PA; QL
anastrozole oral	1		FRUZAQLA	3	PA; QL
ARIMIDEX	3		GAVRETO	3	PA; QL
AROMASIN	3		gefitinib	2	PA; QL
AUGTYRO	3	PA; QL	GILOTRIF	2	PA; QL
AYVAKIT	3	PA; QL	GLEEVEC	3	PA; QL
BALVERSA	3	PA; QL	GLEOSTINE	2	
BESREMI	3	PA; QL	HYCAMTIN ORAL	3	QL
bexarotene	3	PA; QL	HYDREA	3	
bicalutamide	1		hydroxyurea oral	1	
BOSULIF	3	PA; QL	IBRANCE	3	PA; QL
BRAFTOVI	3	PA; QL	ICLUSIG	3	PA; QL
BRUKINSA	2	PA; QL	IDHIFA	3	PA; QL
CABOMETYX	3	PA; QL	imatinib mesylate	1	QL
CALQUENCE	2	PA; QL			
capecitabine	1	QL			
CAPRELSA	3	PA; QL			

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Drug Name	Drug Tier	Notes	Drug Name	Drug Tier	Notes
IMBRUVICA ORAL CAPSULE	2	PA; QL	LYTGOBI (12 MG DAILY DOSE)	3	PA; QL
IMBRUVICA ORAL SUSPENSION	3	PA; QL	LYTGOBI (16 MG DAILY DOSE)	3	PA; QL
IMBRUVICA ORAL TABLET 140 MG, 420 MG	2	PA; QL	LYTGOBI (20 MG DAILY DOSE)	3	PA; QL
IMBRUVICA ORAL TABLET 280 MG	3	PA; QL	MATULANE	2	QL
IMKELDI	3	PA; QL	MEKINIST	2	PA; QL
INLYTA	3	PA; QL	MEKTOVI	3	PA; QL
INQOVI	3	PA; QL	mercaptopurine oral suspension	3	PA
INREBIC	3	PA; QL	mercaptopurine oral tablet	1	
IRESSA	3	PA; QL	mesna	1	
ITOVEBI	3	PA; QL	MESNEX ORAL	2	
JAKAFI	3	PA; QL	MYLERAN	2	QL
JAYPIRCA	3	PA; QL	NERLYNX	3	PA; QL
KISQALI (200 MG DOSE)	3	PA; QL	NEXAVAR	3	PA; QL
KISQALI (400 MG DOSE)	3	PA; QL	NILANDRON	3	PA
KISQALI (600 MG DOSE)	3	PA; QL	nilutamide	3	PA
KRAZATI	3	PA; QL	NINLARO	3	PA; QL
lapatinib ditosylate	1	PA; QL	NUBEQA	2	PA; QL
LAZCLUZE	3	PA; QL	ODOMZO	3	PA; QL
lenalidomide	1	PA; QL	OGSIVEO	3	PA; QL
LENVIMA ORAL CAPSULE THERAPY PACK 10 & 4 MG, 10 MG, 10 MG & 2 X 4 MG, 2 X 10 MG, 2 X 10 MG & 4 MG, 2 X 4 MG, 3 X 4 MG, 4 MG	3	PA; QL	OJEMDA	3	PA; QL
letrozole oral	1		OJJAARA	3	PA; QL
leucovorin calcium injection solution 100 mg/10ml	3		ONUREG	3	PA; QL
leucovorin calcium oral	1		ORGOVYX	3	PA; QL
LEUKERAN	2		ORSERDU	3	PA; QL
LONSURF	3	PA; QL	PANRETIN	3	PA; QL
LORBRENA	3	PA; QL	pazopanib hcl	1	PA; QL
LUMAKRAS	3	PA; QL	PEMAZYRE	3	PA; QL
LYNPARZA	3	PA; QL	PIQRAY	3	PA; QL
LYSODREN	3	PA; QL	POMALYST	3	PA; QL
			PURIXAN	3	PA
			QINLOCK	3	PA; QL
			RETEVMO	3	PA; QL
			REVLIMID	3	PA; QL
			REVUFORJ	3	PA; QL
			REZLIDHIA	3	PA; QL

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Drug Name	Drug Tier	Notes	Drug Name	Drug Tier	Notes
ROMVIMZA	3	PA; QL	VONJO	3	PA; QL
ROZLYTREK	2	PA; QL	VORANIGO	3	PA; QL
RUBRACA	3	PA; QL	VOTRIENT	3	PA; QL
RYDAPT	2	PA; QL	WELIREG	3	PA; QL
SCSEMBLIX	3	PA; QL	XALKORI	3	PA; QL
SOLTAMOX	3		XELODA	3	PA; QL
sorafenib tosylate	1	PA; QL	XOSPATA	3	PA; QL
SPRYCEL	2	PA; QL	XPOVIO (100 MG ONCE WEEKLY)	3	PA; QL
STIVARGA	2	PA; QL	XPOVIO (40 MG ONCE WEEKLY)	3	PA; QL
sunitinib malate	1	PA; QL	XPOVIO (40 MG TWICE WEEKLY)	3	PA; QL
SUTENT	3	PA; QL	XPOVIO (60 MG ONCE WEEKLY)	3	PA; QL
TABLOID	2		XPOVIO (60 MG TWICE WEEKLY)	3	PA; QL
TABRECTA	3	PA; QL	XPOVIO (80 MG ONCE WEEKLY)	3	PA; QL
TAFINLAR	2	PA; QL	XPOVIO (80 MG TWICE WEEKLY)	3	PA; QL
TAGRISSO	2	PA; QL	XTANDI ORAL CAPSULE	2	PA; QL
TALZENNA	3	PA; QL	XTANDI ORAL TABLET	3	PA; QL
tamoxifen citrate oral	1		YONSA	3	PA; QL
TARCEVA	3	PA; QL	ZEJULA	3	PA; QL
TARGRETIN	3	PA; QL	ZELBORAF	2	PA; QL
TASIGNA	3	PA; QL	ZOLINZA	3	PA; QL
TAZVERIK	3	PA; QL	ZYDELIG	2	PA; QL
temozolomide	1	QL	ZYKADIA	3	PA; QL
TEPMETKO	3	PA; QL	ZYTIGA	3	PA; QL
THALOMID	2	PA; QL	Antiparasitics		
TIBSOVO	3	PA; QL	albendazole oral	1	
toremifene citrate	3	PA	atovaquone	4	QL
torpenz	1	PA; QL	BENZNIDAZOLE	3	QL
tretinoin oral	1	QL	BILTRICIDE	2	
TRUQAP	3	PA; QL	chloroquine phosphate oral	1	
TUKYSA	3	PA; QL	COARTEM	3	
TURALIO	3	PA; QL	CROTAN	2	
TYKERB	3	PA; QL	ELIMITE	3	
VANFLYTA	3	PA; QL			
VENCLEXTA	2	PA; QL			
VENCLEXTA STARTING PACK	2	PA; QL			
VERZENIO	3	PA; QL			
VITRAKVI	3	PA; QL			
VIZIMPRO	3	PA; QL			

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Drug Name	Drug Tier	Notes	Drug Name	Drug Tier	Notes
EMVERM	3		carbidopa-levodopa-entacapone	1	
hydroxychloroquine sulfate oral	1		CREXONT	3	PA
ivermectin oral	3	PA	DHIVY	3	PA
KRINTAFEL	2		DUOPA	4	PA; QL
LAMPIT	3		entacapone	1	
malathion	3		LODOSYN	3	
NATROBA	3		NEUPRO	3	
NEBUPENT	3		ONGENTYS	3	PA; QL
nitazoxanide oral	2		OSMOLEX ER	3	PA
OVIDE	3		PARLODEL	3	
PENTAM	3		pramipexole dihydrochloride	1	
pentamidine isethionate	3		pramipexole dihydrochloride er	3	
permethrin external	1		rasagiline mesylate oral	1	PA
PLAQUENIL	3		ropinirole hcl	1	
praziquantel oral	1		ropinirole hcl er	1	
primaquine phosphate	1		RYTARY	3	PA
pyrimethamine oral	4	PA; QL	selegiline hcl oral	1	
QUALAQUIN	3		SINEMET	3	
quinine sulfate	1		trihexyphenidyl hcl	1	
SOVUNA	3		XADAGO	3	PA
spinosad	3				
STROMEKTOL	3	PA	Antiplatelets		
Antiparkinson Agents			aspirin-dipyridamole er	1	
amantadine hcl oral	1		BRILINTA	2	
AZILECT	3	PA	cilostazol	1	
benztropine mesylate	1		clopidogrel bisulfate oral	1	
bromocriptine mesylate oral	1		dipyridamole oral	1	
carbidopa oral	1		EFFIENT	3	
carbidopa-levodopa er	1		PLAVIX	3	
carbidopa-levodopa oral tablet	1		prasugrel hcl	1	
carbidopa-levodopa oral tablet dispersible 10-100 mg, 25-100 mg	1		YOSPRALA	3	
carbidopa-levodopa oral tablet dispersible 25-250 mg	3		ZONTIVITY	3	
			Antipsychotics - Drugs for Mood Disorders		
			ABILIFY	3	
			ABILIFY ASIMTUFII	4	
			ABILIFY MAINTENA	4	

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Drug Name	Drug Tier	Notes	Drug Name	Drug Tier	Notes
aripiprazole oral solution	1		olanzapine	1	
aripiprazole oral tablet	1		paliperidone er	1	
aripiprazole oral tablet dispersible	3		PERSERIS	4	
ARISTADA	4		pimozide	1	
ARISTADA INITIO	4		quetiapine fumarate	1	
asenapine maleate	3	PA	quetiapine fumarate er	1	
chlorpromazine hcl injection	1		REXULTI	3	PA; QL
chlorpromazine hcl oral concentrate	3		RISPERDAL	3	
chlorpromazine hcl oral tablet	1		RISPERDAL CONSTA SUSPENSION RECONSTITUTED ER 12.5 MG INTRAMUSCULAR	1	
clozapine oral tablet	1		RISPERDAL CONSTA SUSPENSION RECONSTITUTED ER 12.5 MG INTRAMUSCULAR	2	
clozapine oral tablet dispersible	3		RISPERDAL CONSTA SUSPENSION RECONSTITUTED ER 25 MG INTRAMUSCULAR	1	
CLOZARIL	3		RISPERDAL CONSTA SUSPENSION RECONSTITUTED ER 25 MG INTRAMUSCULAR	2	
ERZOFRI	4		RISPERDAL CONSTA SUSPENSION RECONSTITUTED ER 25 MG INTRAMUSCULAR	1	
FANAPT	3	PA; QL	RISPERDAL CONSTA SUSPENSION RECONSTITUTED ER 25 MG INTRAMUSCULAR	2	
FANAPT TITRATION PACK	3	PA; QL	RISPERDAL CONSTA SUSPENSION RECONSTITUTED ER 25 MG INTRAMUSCULAR	1	
fluphenazine decanoate injection	1		RISPERDAL CONSTA SUSPENSION RECONSTITUTED ER 25 MG INTRAMUSCULAR	2	
fluphenazine hcl	1		RISPERDAL CONSTA SUSPENSION RECONSTITUTED ER 25 MG INTRAMUSCULAR	1	
GEODON	3		RISPERDAL CONSTA SUSPENSION RECONSTITUTED ER 25 MG INTRAMUSCULAR	2	
HALDOL DECANOATE	3		RISPERDAL CONSTA SUSPENSION RECONSTITUTED ER 25 MG INTRAMUSCULAR	1	
haloperidol decanoate intramuscular	1		RISPERDAL CONSTA SUSPENSION RECONSTITUTED ER 25 MG INTRAMUSCULAR	2	
haloperidol lactate injection	1		RISPERDAL CONSTA SUSPENSION RECONSTITUTED ER 25 MG INTRAMUSCULAR	1	
haloperidol lactate oral concentrate 2 mg/ml	1		RISPERDAL CONSTA SUSPENSION RECONSTITUTED ER 25 MG INTRAMUSCULAR	2	
haloperidol oral	1		RISPERDAL CONSTA SUSPENSION RECONSTITUTED ER 25 MG INTRAMUSCULAR	1	
INVEGA	3		RISPERDAL CONSTA SUSPENSION RECONSTITUTED ER 25 MG INTRAMUSCULAR	2	
INVEGA HAFYERA	4		RISPERDAL CONSTA SUSPENSION RECONSTITUTED ER 25 MG INTRAMUSCULAR	1	
INVEGA SUSTENNA	4		RISPERDAL CONSTA SUSPENSION RECONSTITUTED ER 25 MG INTRAMUSCULAR	2	
INVEGA TRINZA	4		RISPERDAL CONSTA SUSPENSION RECONSTITUTED ER 25 MG INTRAMUSCULAR	1	
loxapine succinate	1		risperidone microspheres er	1	
lurasidone hcl	1				
molindone hcl	3				

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Drug Name	Drug Tier	Notes	Drug Name	Drug Tier	Notes
risperidone oral solution	1		efavirenz	1	
risperidone oral tablet	1		efavirenz-emtricitabine-tenofo df	1	
risperidone oral tablet dispersible	3		efavirenz-lamivudine-tenofovir	1	
RYKINDO	4		emtricitabine	1	
SAPHRIS	3	PA	emtricitabine-tenofovir df	1	
SECUADO	3	PA	EMTRIVA ORAL CAPSULE	3	PA
SEROQUEL	3		EMTRIVA ORAL SOLUTION	2	
SEROQUEL XR	3		entecavir	1	
thioridazine hcl oral	1		EPCLUSA	4	QL
thiothixene	1		EPIVIR	3	
trifluoperazine hcl	1		etravirine	1	
UZEDY	4		famciclovir oral	1	
VERSACLOZ	3		fosamprenavir calcium	4	
ziprasidone hcl	1		GENVOYA	4	
ziprasidone mesylate	3		Antivirals		
ZYPREXA	3		INTELENCE ORAL TABLET 100 MG, 200 MG	3	
			INTELENCE ORAL TABLET 25 MG	2	
			ISENTRESS HD	2	
			ISENTRESS ORAL PACKET	3	
			ISENTRESS ORAL TABLET	2	
		QL	ISENTRESS ORAL TABLET CHEWABLE	2	
			JULUCA	4	
			KALETRA ORAL SOLUTION	2	
			KALETRA ORAL TABLET	3	
			LAGEVRIO	2	QL
		PA	lamivudine oral solution 10 mg/ml	1	
			lamivudine oral tablet	1	
			lamivudine-zidovudine	1	
			lopinavir-ritonavir	1	
			maraviroc	4	

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Drug Name	Drug Tier	Notes	Drug Name	Drug Tier	Notes
nevirapine er	1		tenofovir disoproxil fumarate	1	
nevirapine oral suspension	3		TIVICAY	2	
nevirapine oral tablet	1		TIVICAY PD	2	
NORVIR ORAL PACKET	2		TRIUMEQ	4	
NORVIR ORAL TABLET	3		TRIUMEQ PD	4	
ODEFSEY	4		TYBOST	2	PA
oseltamivir phosphate oral	1		valacyclovir hcl oral	1	
PAXLOVID (150/100)	2	QL	valganciclovir hcl	4	QL
PAXLOVID (300/100)	2	QL	VALTREX	3	
PEGASYS	4	QL	VIRACEPT	2	
penciclovir	3		VIRAZOLE	3	
PREVYMIS ORAL	4	PA; QL	VIREAD ORAL POWDER	2	
PREZCOBIX	2		VIREAD ORAL TABLET 150 MG, 200 MG, 250 MG	2	
PREZISTA ORAL SUSPENSION	2		VIREAD ORAL TABLET 300 MG	3	PA
PREZISTA ORAL TABLET 150 MG, 75 MG	2		VOSEVI	4	PA; QL
PREZISTA ORAL TABLET 600 MG, 800 MG	3		XERESE	3	
RELENZA DISKHALER	2		XOFLUZA (40 MG DOSE)	3	
RETROVIR ORAL	3		XOFLUZA (80 MG DOSE)	3	
REYATAZ ORAL PACKET	2		ZIAGEN	3	
ribavirin inhalation	3		zidovudine	1	
ribavirin oral	1	QL	ZOVIRAX	3	
rimantadine hcl	1		Anxiolytics - Drugs for Anxiety		
ritonavir	1		alprazolam er	1	QL
SELZENTRY ORAL SOLUTION	4		alprazolam intensol	3	QL
SITAVIG	3		alprazolam oral tablet	1	QL
SOFOSBUVIR-VELPATASVIR	4	QL	alprazolam oral tablet dispersible	3	QL
STRIBILD	4	PA	alprazolam xr	1	QL
SYMFI	1		ATIVAN INJECTION SOLUTION 2 MG/ML	3	QL
SYMFI LO	1		ATIVAN ORAL	3	QL
SYMTUZA	4		buspirone hcl oral	1	
TAMIFLU	2		chlordiazepoxide hcl	1	QL
			clonazepam oral	1	QL

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Drug Name	Drug Tier	Notes	Drug Name	Drug Tier	Notes
clorazepate dipotassium	1	QL	lithium carbonate er	1	
diazepam injection solution 10 mg/2ml	1	QL	lithium carbonate oral	1	
diazepam intensol	3	QL	LITHOBID	3	
diazepam oral concentrate	3	QL	Blood Products and Modifiers - Drugs for Blood Disorders		
diazepam oral solution	1	QL	AGRYLIN	3	
diazepam oral tablet	1	QL	ALVAIZ	4	PA; QL
diazepam solution 5 mg/ml injection	1	QL	aminocaproic acid oral	3	
DIAZEPAM SOLUTION 5 MG/ML INJECTION	3	QL	anagrelide hcl	1	
estazolam	3	QL	ARANESP (ALBUMIN FREE)	3	PA
HALCION	3	QL	EPOGEN	2	PA
hydroxyzine hcl oral	1		GRANIX	4	QL
hydroxyzine pamoate oral	1		HEMLIBRA	4	PA; QL
KLONOPIN	3	QL	JESDUVROQ ORAL TABLET 1 MG, 2 MG, 4 MG, 6 MG, 8 MG	3	PA
lorazepam injection solution 2 mg/ml	1	QL	LEUKINE	2	
lorazepam intensol	1	QL	MIRCERA	3	PA
lorazepam oral concentrate 2 mg/ml	1	QL	NIVESTYM	4	PA; QL
lorazepam oral tablet	1	QL	PROCRIT	2	PA
LOREEV XR	3	QL	RETACRIT	3	PA
meprobamate	3		tranexamic acid oral	1	QL
midazolam hcl (pf) injection solution 10 mg/2ml, 5 mg/ml	1	QL	ZARXIO	4	PA; QL
midazolam hcl injection solution 10 mg/2ml, 5 mg/ml	1	QL	Cardiovascular Agents - Drugs for Heart and Circulation Conditions		
midazolam hcl oral	3	QL	ACCUPRIL	3	
oxazepam	1	QL	ACCURETIC	3	
quazepam	3	QL	acebutolol hcl oral	1	
triazolam	1	QL	acetazolamide sodium	3	
VALIUM	3	QL	ALDACTONE	3	
XANAX	3	QL	aliskiren fumarate	3	PA
XANAX XR	3	QL	alprostadiil injection	1	
Bipolar Agents - Drugs for Mood Disorders			ALTACE	3	
EQUETRO	3		ALTOPREV	3	
lithium	1		amiloride hcl oral	1	
			amiloride-hydrochlorothiazide	1	
			amiodarone hcl oral	1	

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Drug Name	Drug Tier	Notes	Drug Name	Drug Tier	Notes
amlodipine besylate oral	1		captopril-hydrochlorothiazide	1	
amlodipine besylate-benazepril hcl	1		CARDIZEM	3	
amlodipine besylate-valsartan	3	PA	CARDIZEM CD	3	
amlodipine-atorvastatin	3		CARDIZEM LA	3	
amlodipine-olmesartan	1		CARDURA	3	
amlodipine-valsartan-hctz	3		CAROSPIR	3	
ASPRUZYO SPRINKLE	3	PA	cartia xt	1	
ATACAND	3		carvedilol	1	
ATACAND HCT	3		carvedilol phosphate er	3	
atenolol oral	1		CATAPRES-TTS-1	3	
atenolol-chlorthalidone	1		CATAPRES-TTS-2	3	
ATORVALIQ	3	PA	CATAPRES-TTS-3	3	
atorvastatin calcium oral	1		chlorthalidone	1	
AVALIDE	3		cholestyramine light	1	
AVAPRO	3		cholestyramine oral	1	
AZOR	3		clonidine	1	
benazepril hcl oral	1		CLONIDINE ER	3	
benazepril-hydrochlorothiazide	1		clonidine hcl oral	1	
BENICAR	3		colesevelam hcl	3	
BENICAR HCT	3		COLESTID	3	
BETAPACE	3		colestipol hcl	1	
BETAPACE AF	3		CONJUPRI	3	PA
betaxolol hcl oral	1		COREG	3	
BIDIL	3		COREG CR	3	
bisoprolol fumarate oral	1		CORLANOR	3	PA
bisoprolol-hydrochlorothiazide	1		COZAAR	3	
bumetanide oral	1		CRESTOR	3	
BUMEX	3		DEMSER	3	
BYSTOLIC	3		digoxin injection	1	
CADUET	3		digoxin oral solution	1	
candesartan cilexetil	3		digoxin oral tablet 125 mcg, 250 mcg	1	
candesartan cilexetil-hctz	3		digoxin oral tablet 62.5 mcg	3	
captopril oral	1		diltiazem hcl er beads (generic Tiazac)	1	

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Drug Name	Drug Tier	Notes	Drug Name	Drug Tier	Notes
diltiazem hcl er coated beads (generic Cardizem CD)	1		eplerenone	1	
diltiazem hcl er oral capsule extended release 12 hour	1		ethacrynic acid	1	PA
diltiazem hcl er oral capsule extended release 24 hour	1		EXFORGE	3	PA
diltiazem hcl er oral tablet extended release 24 hour	3		EXFORGE HCT	3	PA
diltiazem hcl oral	1		EZALLOR SPRINKLE	3	
dilt-xr	1		ezetimibe	1	
DIOVAN	3		ezetimibe-simvastatin	1	
DIOVAN HCT	3		felodipine er	1	
disopyramide phosphate	1		fenofibrate micronized	1	
DIURIL	2		fenofibrate oral capsule 134 mg, 200 mg, 67 mg	1	
dofetilide	1		fenofibrate oral capsule 150 mg, 50 mg	3	
doxazosin mesylate oral	1		fenofibrate oral tablet 120 mg, 145 mg, 40 mg, 48 mg	3	
DYRENIUM	3		fenofibrate oral tablet 160 mg, 54 mg	1	
EDARBI	3	PA	fenofibric acid	1	
EDARBYCLOR	3	PA	flecainide acetate	1	
EDECIN	3	PA	FLOLIPID	3	
enalapril maleate oral solution	3		fluvastatin sodium	3	
enalapril maleate oral tablet	1		fluvastatin sodium er	3	
enalapril-hydrochlorothiazide	1		fosinopril sodium	1	
ENTRESTO ORAL CAPSULE SPRINKLE	3	PA	fosinopril sodium-hctz	1	
ENTRESTO ORAL TABLET	2	PA; QL	furosemide injection	1	
EPANED	3		furosemide oral	1	
epinephrine injection solution 10 mg/10ml	1		gemfibrozil oral	1	
epinephrine pf	1		guanfacine hcl	1	
epinephrine solution 1 mg/ml injection	1		HEMANGEOL	3	PA
EPINEPHRINE SOLUTION 1 MG/ML INJECTION	3		hydralazine hcl oral	1	
			hydrochlorothiazide oral	1	
			HYZAAR	3	
			icosapent ethyl	3	PA
			indapamide	1	
			INDERAL LA	3	
			INDERAL XL	3	
			INNOPRAN XL	3	

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Drug Name	Drug Tier	Notes	Drug Name	Drug Tier	Notes
INPEFA	3	PA	LOTREL	3	
INSPRA	3		lovastatin oral	1	
INZIRQO	3	PA	LOVAZA	3	
irbesartan	1		matzim la	3	
irbesartan-hydrochlorothiazide	1		methyldopa oral tablet 250 mg	1	
ISORDIL TITRADOSE	3		methyldopa oral tablet 500 mg	3	
isosorb dinitrate-hydralazine	3		metolazone	1	
isosorbide dinitrate	1		metoprolol succinate er	1	
isosorbide mononitrate	1		metoprolol tartrate oral	1	
isosorbide mononitrate er	1		metoprolol-hydrochlorothiazide	1	
isradipine	1		metyrosine	3	
ivabradine hcl	3	PA	mexiletine hcl oral	1	
KAPSPARGO SPRINKLE	3		MICARDIS	3	
KATERZIA	3		MICARDIS HCT	3	
labetalol hcl oral tablet 100 mg, 200 mg, 300 mg	1		midodrine hcl	1	
labetalol hcl oral tablet 400 mg	3		minoxidil oral	1	
LANOXIN	3		moexipril hcl	1	
LANOXIN PEDIATRIC	3		MULTAQ	3	
LASIX	3		nadolol oral	1	
LESCOL XL	3		nebivolol hcl	1	
LEVAMLODIPINE MALEATE	3	PA	NEXICLON XR	3	
LIPITOR	3		NEXLETOL	3	PA
LIPOFEN	3		NEXLIZET	3	PA
lisinopril oral	1		niacin (antihyperlipidemic)	3	
lisinopril-hydrochlorothiazide	1		niacin er (antihyperlipidemic)	3	
LIVALO	3		niacor	3	
LODOCO	3	PA	nicardipine hcl oral	1	
LOPID	3		nifedipine er	1	
LOPRESSOR	3		nifedipine er osmotic release	1	
losartan potassium oral	1		nifedipine oral	1	
losartan potassium-hctz	1		nimodipine oral capsule	1	
LOTENSIN	3		nisoldipine er	3	
LOTENSIN HCT	3		NITRO-BID	2	

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Drug Name	Drug Tier	Notes	Drug Name	Drug Tier	Notes
NITRO-DUR TRANSDERMAL PATCH 24 HOUR 0.1 MG/HR, 0.2 MG/HR, 0.4 MG/HR, 0.6 MG/HR	3		pravastatin sodium	1	
NITRO-DUR TRANSDERMAL PATCH 24 HOUR 0.3 MG/HR, 0.8 MG/HR	2		prazosin hcl oral	1	
nitroglycerin rectal	1		PRESTALIA	3	
nitroglycerin sublingual	1		prevalite	1	
nitroglycerin transdermal	1		procainamide hcl injection	1	
nitroglycerin translingual	3		PROCARDIA XL	3	
NITROLINGUAL	3		propafenone hcl	1	
NITROSTAT	3		propafenone hcl er	1	
nitro-time oral capsule extended release 9 mg	1		propranolol hcl er	1	
NORLIQVA	3	PA	propranolol hcl oral	1	
NORPACE	3		PROSTIN VR	3	
NORPACE CR	2		QBRELIS	3	
NORVASC	3		QUESTRAN	3	
olmesartan medoxomil oral	1		QUESTRAN LIGHT	3	
olmesartan medoxomil- hctz	1		quinapril hcl	1	
olmesartan-amlodipine- hctz	1		quinapril- hydrochlorothiazide	1	
omega-3-acid ethyl esters	3		quinidine gluconate er	1	
pacerone oral tablet 100 mg, 200 mg	1		quinidine sulfate	1	
PACERONE ORAL TABLET 400 MG	3		ramipril	1	
papaverine hcl injection	1		ranolazine er	1	
pentoxifylline er	1		RECTIV	3	
perindopril erbumine	1		REPATHA	3	PA
phenoxybenzamine hcl oral	4	QL	REPATHA PUSHTRONEX SYSTEM	3	PA
phentolamine mesylate injection	1		REPATHA SURECLICK	3	PA
pindolol	1		rosuvastatin calcium oral	1	
pitavastatin calcium	3		simvastatin oral	1	
			SOANZ	3	PA
			sotalol hcl (af)	1	
			sotalol hcl oral	1	
			SOTYLIZE	3	
			spironolactone oral suspension	3	
			spironolactone oral tablet	1	
			spironolactone-hctz	1	
			SULAR	3	

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Drug Name	Drug Tier	Notes	Drug Name	Drug Tier	Notes
TEKTURNA	3	PA	verapamil hcl oral	1	
telmisartan	1		VERELAN	3	
telmisartan-amlodipine	3		VERQUVO	3	PA
telmisartan-hctz	3		VYTORIN	3	
TENORETIC 100	3		WELCHOL	3	
TENORETIC 50	3		ZESTORETIC	3	
TENORMIN	3		ZESTRIL	3	
THALITONE	3		ZETIA	3	
tiadylt er	1		ZOCOR	3	
TIAZAC	3		ZYPITAMAG	3	
TIKOSYN	3		Central Nervous System Agents - Drugs for Attention Deficit Disorder		
timolol maleate oral	1		ADDERALL	2	
TOPROL XL	3		ADDERALL XR	2	
toremide	1		ADZENYS XR-ODT	3	PA
trandolapril	1		amphetamine sulfate	3	PA
trandolapril-verapamil hcl er	3		amphetamine-dextroamphetamine	1	
triamterene oral	1		amphetamine-dextroamphetamine er	1	
triamterene-hctz	1		amphet-dextroamphet 3-bead er	3	PA; QL
TRIBENZOR	3		APTENSIO XR	3	PA; QL
TRICOR	3		atomoxetine hcl	1	
TRILIPIX	3		AZSTARYS	3	PA
TRYVIO	3	PA	clonidine hcl er	1	
valsartan oral tablet	1		CONCERTA	2	
valsartan-hydrochlorothiazide	1		COTEMPLA XR-ODT	3	PA; QL
VASCEPA	3	PA	DAYTRANA	3	PA; QL
VASERETIC	3		DEXEDRINE	3	
VASOTEC	3		dexmethylphenidate hcl	1	
verapamil hcl er oral capsule extended release 24 hour 100 mg, 200 mg, 300 mg	3		dexmethylphenidate hcl er	1	QL
verapamil hcl er oral capsule extended release 24 hour 120 mg, 180 mg, 240 mg, 360 mg	1		dextroamphetamine sulfate er	1	
verapamil hcl er oral tablet extended release	1		dextroamphetamine sulfate oral solution	3	
			dextroamphetamine sulfate oral tablet 10 mg, 5 mg	1	

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Drug Name	Drug Tier	Notes	Drug Name	Drug Tier	Notes
dextroamphetamine sulfate oral tablet 15 mg, 2.5 mg, 20 mg, 30 mg, 7.5 mg	3		methylphenidate hcl er oral tablet extended release (generic Methylin)	1	
DYANAVEL XR	3	PA	methylphenidate hcl er oral tablet extended release 24 hour (generic Methylin)	1	QL
EVEKEO	3	PA			
FOCALIN	3				
FOCALIN XR	3	QL	methylphenidate hcl oral solution (generic Methylin)	3	
guanfacine hcl er	1				
INTUNIV	3		methylphenidate hcl oral tablet (generic Ritalin)	1	
JORNAY PM	3	PA; QL			
lisdexamfetamine dimesylate	3	PA; QL	methylphenidate hcl oral tablet chewable (generic Methylin)	3	
METADATE CD	3		MYDAYIS	3	PA; QL
methamphetamine hcl	3		ONYDA XR	3	PA
METHYLIN	3		PROCENTRA	3	
methylphenidate (generic Aptensio XR)	3	PA; QL	QELBREE	3	PA
methylphenidate hcl er (cd) (generic Metadate)	1		QUILLICHEW ER	3	PA
methylphenidate hcl er (la) oral capsule extended release 24 hour 10 mg (generic Ritalin LA)	3	PA; QL	QUILLIVANT XR	3	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	RELEXXII ORAL TABLET EXTENDED RELEASE 18 MG, 27 MG, 36 MG, 45 MG, 54 MG, 63 MG	3	
methylphenidate hcl er (osm) oral tablet extended release 18 mg, 27 mg, 36 mg, 54 mg, 72 mg (generic Concerta)	1		relexxii oral tablet extended release 72 mg	1	
METHYLPHENIDATE HCL ER (OSM) ORAL TABLET EXTENDED RELEASE 45 MG, 63 MG (authorized generic Relexxii ER)	3		RITALIN	3	
methylphenidate hcl er (xr) (generic Aptensio XR)	3	PA; QL	RITALIN LA ORAL CAPSULE EXTENDED RELEASE 24 HOUR 10 MG	3	PA; QL
			RITALIN LA ORAL CAPSULE EXTENDED RELEASE 24 HOUR 20 MG, 30 MG, 40 MG	3	QL
			STRATTERA	3	
			VYVANSE	3	PA; QL
			XELSTRYM	3	PA
			zenzedi oral tablet 10 mg, 5 mg	1	
			ZENZEDI ORAL TABLET 15 MG, 2.5 MG, 20 MG, 30 MG, 7.5 MG	3	

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Drug Name	Drug Tier	Notes	Drug Name	Drug Tier	Notes
Central Nervous System Agents - Drugs for Multiple Sclerosis			chlorhexidine gluconate mouth/throat	1	
AVONEX PEN	4	PA; QL	DEBACTEROL	3	
AVONEX PREFILLED	4	PA; QL	EVOXAC	3	
BETASERON	4	QL	FIRST-MOUTHWASH BLM	3	
dalfampridine er	1		kourzeq	1	
dimethyl fumarate oral	1		lidocaine hcl mouth/throat	3	
dimethyl fumarate starter pack	1		lidocaine viscous hcl	1	
fingolimod hcl	1	QL	oralone	1	
GILENYA ORAL CAPSULE 0.25 MG	4	PA; QL	periogard	1	
glatiramer acetate	4	QL	pilocarpine hcl oral	1	
glatopa	4	QL	SALAGEN	3	
REBIF	4	PA; QL	triamcinolone acetonide mouth/throat	1	
REBIF REBIDOSE	4	PA; QL	Dermatological Agents - Drugs for Skin Conditions		
REBIF REBIDOSE TITRATION PACK	4	PA; QL	ABSORICA	3	
REBIF TITRATION PACK	4	PA; QL	ABSORICA LD	3	
teriflunomide	1	QL	ACANYA	3	
Central Nervous System Agents - Miscellaneous			accutane	1	
caffeine citrate oral	1		ACIOXIA	3	
CAFFEINE-SODIUM BENZOATE	3		acitretin	1	QL
gabapentin (once-daily)	3		ACZONE	3	
GRALISE	3		adapalene external cream	1	
HORIZANT	3		adapalene external gel	1	
LYRICA	3	QL	ADAPALENE EXTERNAL PAD	3	
LYRICA CR	3	PA	ADAPALENE EXTERNAL SOLUTION	3	
NUDEXTA	3	PA	adapalene-benzoyl peroxide external gel 0.1-2.5 %	1	
pregabalin er	3	PA	adapalene-benzoyl peroxide external gel 0.3-2.5 %	3	
pregabalin oral	1	QL	ADAPALENE-BENZOYL PEROXIDE EXTERNAL PAD	3	PA
riluzole	1	QL	ADVANCED ALLERGY COLLECTION	3	
SAVELLA	3	PA			
SAVELLA TITRATION PACK	3	PA			
Dental and Oral Agents - Drugs for Mouth and Throat Conditions					
cevimeline hcl	3				

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Drug Name	Drug Tier	Notes	Drug Name	Drug Tier	Notes
AKLIEF	3	PA	CABTREO	3	PA
ALA SCALP	3		calcipotriene external cream	1	
ala-cort	3		CALCIPOTRIENE EXTERNAL FOAM	3	
alclometasone dipropionate	1		calcipotriene external ointment	1	
ALTRENO	3		calcipotriene external solution	1	
amcinonide	3		calcipotriene-betameth diprop	3	
AMELUZ	2	QL	calcitrene	1	
ammonium lactate external	3		calcitriol external	1	
amnesteem	1		cem-urea	3	
AMZEEQ	3		claravis	1	
ARAZLO	3		CLEOCIN-T	3	
arzol silver nit applicators	3		clindacin	3	
ATRALIN	3		clindacin etz external swab	1	
avar cleanser	1		clindacin-p	1	
AVAR LS CLEANSER	3		CLINDAGEL	3	
AVAR-E EMOLLIENT	3		clindamycin phos (once-daily)	1	
azelaic acid external	1		clindamycin phos (twice-daily)	1	
AZELEX	2		clindamycin phos-benzoyl perox external gel 1.2-2.5 %, 1.2-3.75 %	3	
BENZAMYCIN	3		clindamycin phos-benzoyl perox external gel 1-5 %, 1.2-5 %	1	
BENZOYL PEROX-HYDROCORTISONE	3		clindamycin phosphate external foam	3	
BENZOYL PEROXIDE EXTERNAL GEL 6.5 %, 8 %	3		clindamycin phosphate external lotion	1	
BENZOYL PEROXIDE FORTE- HC	3		clindamycin phosphate external solution	1	
benzoyl peroxide-erythromycin	1		clindamycin phosphate external swab	1	
betamethasone dipropionate aug	1		clindamycin-tretinoin	3	
betamethasone dipropionate external	1		clobetasol propionate e	1	
betamethasone valerate external	1				
bp 10-1	3				
brimonidine tartrate external	3				
BRYHALI	3				

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Drug Name	Drug Tier	Notes	Drug Name	Drug Tier	Notes
clobetasol propionate emulsion	3		desoximetasone external cream	1	
CLOBETASOL PROPIONATE EXTERNAL CREAM 0.025 %	3	PA	desoximetasone external gel	1	
clobetasol propionate external cream 0.05 %	1		desoximetasone external liquid	3	
clobetasol propionate external foam	1		desoximetasone external ointment	1	
clobetasol propionate external gel	1		diclofenac sodium external gel 3 %	3	
clobetasol propionate external liquid	1		DIFFERIN EXTERNAL CREAM	3	
clobetasol propionate external lotion	1		DIFFERIN EXTERNAL GEL 0.3 %	3	
clobetasol propionate external ointment	1		DIFFERIN EXTERNAL LOTION	2	
clobetasol propionate external shampoo	3		diflorasone diacetate	3	
clobetasol propionate external solution	1		DIPROLENE	3	
CLOBEX	3		doxepin hcl external	3	
CLOBEX SPRAY	3		doxycycline	3	PA
clocortolone pivalate	3		DRYSOL	2	
clodan	3		DYCLOPRO	3	
CLODERM	3		ELIDEL	3	
CONDYLOX	2		ENSTILAR	3	
CORDRAN	2		EPIDUO	3	
dapsone external	3		EPIDUO FORTE	3	
DERMACINRX UREA	3		EPIFOAM	3	
DERMA-SMOOTH/FS BODY	3		EPSOLAY	3	PA
DERMA-SMOOTH/FS SCALP	3		ery pad 2%	3	
desonide external cream	1		ERYGEL	3	
desonide external gel	3		erythromycin external	1	
desonide external lotion	1		EUCRISA	3	PA; QL
desonide external ointment	1		FABIOR	3	
DESOWEN	3		FINACEA EXTERNAL FOAM	2	
			fluocinolone acetonide body	1	
			fluocinolone acetonide external	1	
			fluocinolone acetonide scalp	1	

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Drug Name	Drug Tier	Notes	Drug Name	Drug Tier	Notes
fluocinonide emulsified base	1		hydrocortisone external ointment 1 %, 2.5 %	1	
fluocinonide external	1		HYDROCORTISONE EXTERNAL SOLUTION	3	
fluorouracil external	1		hydrocortisone valerate	1	
flurandrenolide	3		imiquimod external cream 3.75 %	3	
fluticasone propionate external cream	1		imiquimod external cream 5 %	1	
fluticasone propionate external lotion	3		imiquimod pump	3	
fluticasone propionate external ointment	1		IMPOYZ	3	PA
halcinonide external cream	3		isotretinoin oral	1	
HALCINONIDE EXTERNAL SOLUTION	3		ivermectin external cream	3	
halobetasol propionate external cream	1		KEFUNOVA	3	
halobetasol propionate external foam	3		KERALYT EXTERNAL GEL 6 %	3	
halobetasol propionate external ointment	1		KERALYT EXTERNAL SHAMPOO	3	
HALOG	3		KLARON	3	
HYDRO 40	3		lactic acid e	3	
hydrocortisone ace-pramoxine external cream 2.5-1 %	1		LEVULAN KERASTICK	2	QL
hydrocortisone butyrate external cream	1		LEXETTE	3	
hydrocortisone butyrate external lotion	3		LIDOCAINE-HYDROCORTISONE ACE EXTERNAL	3	
hydrocortisone butyrate external ointment	1		LOCOID	3	
hydrocortisone butyrate external solution	1		methoxsalen rapid	4	QL
hydrocortisone external cream 1 %	3		METROCREAM	3	
hydrocortisone external cream 2.5 %	1		METROGEL	3	
hydrocortisone external lotion 2 %	3		METROLOTION	3	
hydrocortisone external lotion 2.5 %	1		metronidazole external cream	1	
			metronidazole external gel 0.75 %	1	
			metronidazole external gel 1 %	3	
			metronidazole external lotion	3	
			MIRVASO	3	
			mometasone furoate external	1	

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Drug Name	Drug Tier	Notes	Drug Name	Drug Tier	Notes
NEO-SYNALAR	3		salicylic acid external foam	3	
neuac	1		salicylic acid external gel	3	
NORITATE	3		salicylic acid external shampoo	3	
NUCORT	3		salicylic acid external solution	3	
ONEXTON	3		salicylic acid wart remover	3	
ORACEA	3	PA	SALIMEZ	3	
OVACE PLUS EXTERNAL CREAM	3		SALIMEZ FORTE	3	
OVACE PLUS EXTERNAL SHAMPOO	3		SALVAX	3	
OVACE PLUS WASH	3		SALYCIM	3	
OVACE WASH	3		SANTYL	2	
pimecrolimus cream 1 % external	1		selenium sulfide external lotion	1	
PIMECROLIMUS CREAM 1 % EXTERNAL	1		selenium sulfide external shampoo 2.25 %	3	
PLEXION	3		SERNIVO	3	
PLEXION CLEANSER	3		sodium sulfacetamide external shampoo 10 %	1	
PLEXION CLEANSING CLOTH	3		sodium sulfacetamide wash	3	
PODOCON-25	3		SOFDRA	3	PA
podofilox external	1		SOOLANTRA	3	
PRAMOSONE EXTERNAL CREAM	2		SORILUX	3	
PRAMOSONE EXTERNAL LOTION	2		sss 10-5 external cream	3	
PRUDOXIN	3		SSS 10-5 EXTERNAL FOAM	3	
PYROGALLIC ACID	3		sulfacetamide sodium (acne)	1	
QBREXZA	3	PA; QL	sulfacetamide sodium (cleans)	3	
RESORCINOL-SULFUR	3		sulfacetamide sodium external	3	
RETIN-A	1		sulfacetamide sodium-sulfur external cream	3	
RETIN-A MICRO GEL 0.04 %, 0.1 %	1		sulfacetamide sodium-sulfur external liquid 10-2 %, 9-4 %, 9-4.5 %, 9.8-4.8 %	3	
RETIN-A MICRO PUMP EXTERNAL GEL 0.04 %, 0.1 %	1				
RETIN-A MICRO PUMP EXTERNAL GEL 0.06 %, 0.08 %	3				
RHOFADE	3				

Drug Name	Drug Tier	Notes	Drug Name	Drug Tier	Notes
sulfacetamide sodium-sulfur external liquid 10-5 %	1		tretinoin external gel 0.01 %, 0.025 %	1	
sulfacetamide sodium-sulfur external lotion 10-5 %	1		tretinoin external gel 0.05 %	3	
sulfacetamide sodium-sulfur external lotion 9.8-4.8 %	3		tretinoin microsphere external gel 0.04 %, 0.1 %	1	
sulfacetamide sodium-sulfur external suspension 10-5 %, 8-4 %	3		tretinoin microsphere external gel 0.08 %	3	
sulfacetamide sod-sulfur wash	3		tretinoin microsphere pump external gel 0.04 %, 0.1 %	1	
sulfacetamide-sulfur in urea	1		tretinoin microsphere pump external gel 0.08 %	3	
sulfaceanse 8/4	3		triamcinolone acetonide external aerosol solution	3	
sulfamez wash	3		triamcinolone acetonide external cream	1	
SUMADAN WASH	3		triamcinolone acetonide external lotion	1	
SUMAXIN	3		triamcinolone acetonide external ointment 0.025 %, 0.1 %, 0.5 %	1	
synalar	1		triamcinolone acetonide external ointment 0.05 %	3	
TACLONEX	3		triamcinolone in absorbase	3	
tacrolimus external	1		triderm	1	
tazarotene external cream	1		TWYNEO	3	PA
TAZAROTENE EXTERNAL FOAM	3		UMECTA MOUSSE	3	
tazarotene external gel	1		URAMAXIN	3	
TAZORAC EXTERNAL CREAM 0.05 %	1		urea external cream 39 %, 41 %, 45 %, 47 %	3	
TAZORAC EXTERNAL CREAM 0.1 %	3		urea external cream 40 %	1	
TAZORAC EXTERNAL GEL	3		UREA EXTERNAL FOAM	3	
TELIORA	3		urea nail	3	
TEXACORT	3		uredeb	3	
TOLAK	3	PA	uremez-40	1	
TOPICORT	3		URESOL	3	
TOPICORT SPRAY	3		VANOS	3	
tovet	3		VANOXIDE-HC	3	
tretinoin external cream	1		VECTICAL	1	

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Drug Name	Drug Tier	Notes	Drug Name	Drug Tier	Notes
VEREGEN	3		glyburide micronized	3	
VIRASAL	3		glyburide oral	1	
WINLEVI	3	PA	glyburide-metformin	3	
XALIX	3		GLYXAMBI	3	PA; QL
xurea	3		INVOKAMET	3	PA; QL
ZACLIR CLEANSING	3		INVOKAMET XR	3	PA; QL
zenatane	1		INVOKANA	3	PA; QL
ZIANA	3		JANUMET	3	PA
ZITHRANOL	3		JANUMET XR	3	PA
ZONALON	3		JANUVIA	3	PA
ZORYVE	3	PA	JARDIANCE	2	QL
ZYCLARA	3		JENTADUETO	3	PA
ZYCLARA PUMP	3		JENTADUETO XR	3	PA
Diabetes - Antidiabetic Agents			liraglutide	1	PA; QL
acarbose oral	1		metformin hcl er	1	
ACTOPLUS MET	3		metformin hcl er (mod)	3	PA
ACTOS	3		metformin hcl er (osm) oral tablet extended release 24 hour 1000 mg	3	PA
ALOGLIPTIN BENZOATE	3	PA	metformin hcl er (osm) oral tablet extended release 24 hour 500 mg	3	
ALOGLIPTIN- METFORMIN HCL	3	PA	metformin hcl oral solution	1	
ALOGLIPTIN- PIOGLITAZONE	3	PA	metformin hcl oral tablet 1000 mg, 500 mg, 850 mg	1	
BEXAGLIFLOZIN	3	PA	miglitol	3	PA
BRENZAVVY	3	PA	nateglinide	3	
CYCLOSET	3	PA	ONGLYZA	3	PA
DAPAGLIFLOZIN PRO- METFORMIN ER	3	PA; QL	OZEMPIC	2	PA; QL
DAPAGLIFLOZIN PROPANEDIOL	3	PA; QL	pioglitazone hcl	3	
DUETACT	3		pioglitazone hcl- glimepiride	3	
FARXIGA	3	PA; QL	pioglitazone hcl- metformin hcl	3	
glimepiride	1		QTERN	3	PA; QL
glipizide er	1		repaglinide	3	
glipizide oral tablet 10 mg, 5 mg	1		RIOMET	3	
glipizide oral tablet 2.5 mg	3	PA	RYBELSUS	3	PA; QL
glipizide-metformin hcl	1				
GLUCOTROL XL	3				

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Drug Name	Drug Tier	Notes	Drug Name	Drug Tier	Notes
saxagliptin hcl	3	PA	AUTOLET LANCING DEVICE	1	
saxagliptin-metformin er	3	PA	AUTOLET LITE LANCING DEVICE	1	
SEGLUROMET	3	PA; QL	BLULINK CONTROL HIGH & LOW	1	
SITAGLIPTIN	2		CARESENS CONTROL SOLUTION A/B	1	
SITAGLIPTIN BASE-METFORMIN HCL	3	PA	CARESENS LANCETS 30G	1	
SOLIQUA	3	PA; QL	CARETOUCH CONTROL SOL LEVEL 2	1	
STEGLATRO	3	PA; QL	CARETOUCH LANCING/EJECTOR	1	
STEGLUJAN	3	PA; QL	CHEMSTRIP 10 MD	2	
SYMLINPEN 120	3		CHEMSTRIP 10/SG	2	
SYMLINPEN 60	3		CHEMSTRIP 2 GP	2	
SYNJARDY	3	PA; QL	CHEMSTRIP 5 OB	2	
SYNJARDY XR	3	PA; QL	CHEMSTRIP 7	2	
TRADJENTA	3	PA	CHEMSTRIP 9	2	
TRIJARDY XR	3	PA; QL	CHOSEN LANCETS 30G	1	
TRULICITY	3	PA; QL	CHOSEN LANCING DEVICE	1	
VICTOZA	3	PA; QL	CHOSEN SAFETY LANCETS 28G	1	
XIGDUO XR	3	PA; QL	CLEVER CHOICE COMFORT EZ	1	
XULTOPHY	3	PA; QL	COMFORT TOUCH TWIST LANCET 30G	1	
ZITUVIMET	3	PA	CONTOUR CONTROL SOLUTION	1	
ZITUVIMET XR	3	PA	CONTOUR NEXT CONTROL SOLUTION	1	
ZITUVIO	3	PA	CONTOUR NEXT GEN TEST STRIPS	1	PA; QL
Diabetes - Glucose Monitoring			DIASTIX REAGENT	3	
			DIATHRIVE GLUCOSE CONTROL SOLN	1	
ACCU-CHEK FASTCLIX LANCET KIT	1		DIATHRIVE LANCING DEVICE	1	
ACCU-CHEK GUIDE CONTROL	1		DROPLET GENTEEL LANCING DEVICE	1	
ACCU-CHEK GUIDE TEST	1	PA; QL			
ACCU-CHEK SMARTVIEW CONTROL	1				
ACCU-CHEK SOFTCLIX LANCET DEVICE KIT	1				
AGAMATRIX CONTROL LEVEL 2	1				
AGAMATRIX CONTROL LEVEL 4	1				
AUTOLET II CLINISAFE	1				

Drug Name	Drug Tier	Notes	Drug Name	Drug Tier	Notes
DROPSAFE ACTI-LANCE 23G	1		ONETOUCH ULTRA IN VITRO STRIP	1	QL
EASY TALK PLUS II CONTROL	1		ONETOUCH ULTRA TEST STRIPS	1	QL
EASY TOUCH HEALTHPRO HIGH/LOW	1		ONETOUCH VERIO FLEX SYSTEM KIT	1	
EASY TOUCH LANCING DEVICE	1		ONETOUCH VERIO IN VITRO LIQUID HIGH	1	
EASY TRAK II CONTROL	1		ONETOUCH VERIO TEST STRIPS	1	QL
EASYMAX 15 LEVEL 2-3 CONTROL	1		ONETOUCH VERIO REFLECT KIT W/DEVICE	1	
EASYMAX CONTROL	1		PERFECT POINT SAFETY LANCETS	1	
GLUCOSE CONTROL SOLUTIONS	1		PIP GLUCOSE CONTROL SOLUTION	1	
EMBRACE LANCING DEVICE/EJECTOR	1		TECHLITE LANCETS 26G	1	
EMBRACE TALK GLUCOSE CONTROL	1		TRUE METRIX LEVEL 1	1	
FREESTYLE TEST	1	PA; QL	TRUE METRIX LEVEL 2	1	
GENTEEL LANCING KIT (BLUE)	1		TRUE METRIX LEVEL 3	1	
GOJJI CONTROL	1		UNISTRIP CONTROL IN VITRO SOLUTION LOW	1	
GOJJI LANCING DEVICE/CLEAR CAP	1		VERIFINE SAFE LANCET MINI 21G	1	
IHEALTH CONTROL SOLUTION	1		VERIFINE SAFE LANCET MINI 23G	1	
IHEALTH LANCING DEVICE	1		VERIFINE SAFE LANCET MINI 28G	1	
LANCETS	1		VERIFINE SAFE LANCET MINI 30G	1	
LANCETS 28G THIN	1		VIVAGUARD INO CONTROL SOLUTION	1	
LANCETS SUPER THIN	1		VIVAGUARD LANCETS 30G	1	
MICROLET NEXT LANCING DEVICE	1		VIVAGUARD LANCING DEVICE	1	
ONETOUCH DELICA PLUS LANCING	1		VIVAGUARD SAFETY LANCETS 28G	1	
ONETOUCH DELICA SAFETY LANCING	1		Diabetes - Glycemic Agents		
ONETOUCH ULTRA 2 KIT W/DEVICE	1		BAQSIMI ONE PACK	2	
ONETOUCH ULTRA BLUE TEST	1	QL	BAQSIMI TWO PACK	2	
ONETOUCH ULTRA IN VITRO LIQUID	1		diazoxide oral	2	

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Drug Name	Drug Tier	Notes	Drug Name	Drug Tier	Notes
glucagon emergency kit	1		HUMALOG TEMPO PEN	3	PA
GLUCAGON EMERGENCY KIT	3		HUMALOG U-100 JUNIOR KWIKPEN	2	
PROGLYCEM	3		HUMULIN 70/30 KWIKPEN	2	
ZEGALOGUE	3	PA	HUMULIN 70/30 VIAL	2	
Diabetes - Insulins			HUMULIN N KWIKPEN	2	
ADMELOG	3		HUMULIN N VIAL	2	
ADMELOG SOLOSTAR	3		HUMULIN R U-500 KWIKPEN	1	PA
AFREZZA	3	PA	HUMULIN R U-500 VIAL	1	PA
APIDRA SOLOSTAR	3		HUMULIN R VIAL	1	
APIDRA VIAL	3		INSULIN ASP PROT & ASP FLEXPEN	3	
AQ INSULIN SYRINGE	1		INSULIN ASPART	3	
BASAGLAR KWIKPEN	3	PA	INSULIN ASPART FLEXPEN	3	
BASAGLAR TEMPO PEN	3	PA	INSULIN ASPART PROT & ASPART	3	
BD ULTRA-FINE INSULIN SYRINGES	1		INSULIN DEGLUDEC	2	PA
DROPSAFE SAFETY SYRINGE/NEEDLE	1		INSULIN DEGLUDEC FLEXTOUCH	2	PA
EMBECTA INS SYR U/F 1/2 UNIT	1		INSULIN GLARGINE MAX SOLOSTAR	3	PA
EMBECTA INSULIN SYRINGE	1		INSULIN GLARGINE SOLOSTAR SUBCUTANEOUS SOLUTION PEN-INJECTOR 300 UNIT/ML	3	PA
EMBECTA INSULIN SYRINGE U/F	1		INSULIN GLARGINE-YFGN	1	
EMBECTA INSULIN SYRINGE U-100	1		INSULIN LISPRO	2	
EMBECTA INSULIN SYRINGE U-500	1		INSULIN LISPRO (1 UNIT DIAL)	2	
FIASP	3		INSULIN LISPRO JUNIOR KWIKPEN	3	
FIASP FLEXTOUCH	3		INSULIN LISPRO PROT & LISPRO	3	
FIASP PENFILL	3				
FIASP PUMPCART	3				
HUMALOG	2				
HUMALOG KWIKPEN	2				
HUMALOG MIX 50/50 KWIKPEN	3				
HUMALOG MIX 75/25 KWIKPEN	3				
HUMALOG MIX 75/25 VIAL	3				

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Drug Name	Drug Tier	Notes	Drug Name	Drug Tier	Notes		
INSULIN SYRINGES 27G X 1/2" 0.5 ML, 27G X 1/2" 1 ML, 27G X 5/8" 1 ML, 28G X 1/2" 0.5 ML, 28G X 1/2" 1 ML, 29G X 1/2" 0.3 ML, 29G X 1/2" 0.5 ML, 29G X 1/2" 1 ML, 30G X 1/2" 0.3 ML, 30G X 1/2" 0.5 ML, 30G X 1/2" 1 ML, 30G X 5/16" 0.3 ML, 30G X 5/16" 0.5 ML, 30G X 5/16" 1 ML, 31G X 1/4" 0.3 ML, 31G X 1/4" 0.5 ML, 31G X 1/4" 1 ML, 31G X 15/64" 0.3 ML, 31G X 15/64" 0.5 ML, 31G X 15/64" 1 ML, 31G X 5/16" 0.3 ML, 31G X 5/16" 0.5 ML, 31G X 5/16" 1 ML	1		NOVOLOG FLEXPEN RELION	3			
			NOVOLOG MIX 70/30 FLEXPEN	3			
			NOVOLOG MIX 70/30 RELION	3			
			NOVOLOG MIX 70/30 VIAL	3			
			NOVOLOG PENFILL	3			
			NOVOLOG RELION	3			
			NOVOLOG U-100 VIAL	3			
			REZVOGLAR KWIKPEN	3	PA		
			SEMGLEE (YFGN)	3	PA		
			TOUJEO MAX SOLOSTAR	3	PA		
			TOUJEO SOLOSTAR	3	PA		
		LANTUS SOLOSTAR	3	PA	TRESIBA	3	PA
		LANTUS U-100 VIAL	3	PA	TRESIBA FLEXTOUCH	3	PA
		LYUMJEV KWIKPEN	3	PA	ULTIGUARD SAFEPACK SYR/NEEDLE	1	
LYUMJEV TEMPO PEN	3	PA	VERIFINE INSULIN SYRINGE	1			
LYUMJEV VIAL	3	PA					
NOVOLIN 70/30 FLEXPEN	3	PA	Electrolytes / Minerals / Metals / Vitamins				
NOVOLIN 70/30 FLEXPEN RELION	3	PA	ACCRUFER	3	PA		
NOVOLIN 70/30 RELION	3	PA	ARGYLE STERILE SALINE	1			
NOVOLIN 70/30 VIAL	3	PA	argyle sterile water	3			
NOVOLIN N FLEXPEN	3	PA	CARNITOR ORAL	3			
NOVOLIN N FLEXPEN RELION	3	PA	CARNITOR SF	3			
NOVOLIN N RELION	3	PA	CHEMET	3			
NOVOLIN N VIAL	3	PA	curity sterile saline	1			
NOVOLIN R FLEXPEN	3	PA	cyanocobalamin injection solution 1000 mcg/ml	1			
NOVOLIN R FLEXPEN RELION	3	PA	cytra k crystals	1			
NOVOLIN R RELION	3	PA	deferasirox granules	4	QL		
NOVOLIN R VIAL	3	PA	deferasirox oral packet	4	QL		
NOVOLOG 70/30 FLEXPEN RELION	3		deferasirox oral tablet	1			
NOVOLOG FLEXPEN	3		deferasirox oral tablet soluble	1			
			DRISDOL	3			

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Drug Name	Drug Tier	Notes	Drug Name	Drug Tier	Notes
EFFER-K ORAL TABLET EFFERVESCENT 10 MEQ, 20 MEQ	3		potassium chloride crys er oral tablet extended release 10 meq, 20 meq	1	
effer-k oral tablet effervescent 25 meq	3		potassium chloride crys er oral tablet extended release 15 meq	2	
ergocalciferol oral capsule	1		potassium chloride er oral capsule extended release	1	
FERRIPROX ORAL SOLUTION	3	PA; QL	potassium chloride er oral tablet extended release 10 meq, 20 meq, 8 meq	1	
folic acid injection	1		potassium chloride er oral tablet extended release 15 meq	3	
folic acid oral tablet 1 mg	1		potassium chloride oral	1	
FOLVITE-D	3		potassium citrate er	1	
iodine strong oral	3		potassium citrate-citric acid	1	
KIONEX	3		sod citrate-citric acid	1	
klor-con	1		sodium chloride (pf)	1	
klor-con 10	1		sodium chloride irrigation	1	
klor-con m10	1		sodium fluoride oral solution	1	
klor-con m15	2		sodium fluoride oral tablet 1.1 (0.5 f) mg	1	
klor-con m20	1		sodium fluoride oral tablet 2.2 (1 f) mg	3	
klor-con/ef	3		sodium fluoride oral tablet chewable	1	
K-PHOS	3		sodium polystyrene sulfonate	1	
K-PHOS NO 2	3		sps (sodium polystyrene sulf)	1	
K-PHOS-NEUTRAL	3		sterile water for irrigation	3	
K-PRIME	3		tricitrates	1	
levocarnitine oral solution	1		UROCIT-K 10	3	
levocarnitine oral tablet	1		UROCIT-K 15	3	
levocarnitine sf	1		VELTASSA	3	PA
LOKELMA	3	PA	vitamin d (ergocalciferol) oral capsule 1.25 mg (50000 ut), 50000 unit	1	
ORACIT	2		vitamin k1 injection	1	
ORAL CITRATE	2				
phospha 250 neutral	1				
phosphorous	1				
phospho-trin 250 neutral	1				
PHOSPHO-TRIN K500	3				
PHOXILLUM B22K4/0	3				
PHOXILLUM BK4/2.5	3				
phytonadione injection	1				
phytonadione oral	1				
pot & sod cit-cit ac	1				

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Drug Name	Drug Tier	Notes	Drug Name	Drug Tier	Notes
water for irrigation, sterile	3		PRILOSEC	3	
wes-phos 250 neutral	1		PROTONIX ORAL	3	
Gastrointestinal Agents - Drugs for Acid Reflux and Ulcer			rabeprazole sodium oral tablet delayed release	1	ST
ACIPHEX	3	PA	sucralfate oral	1	
CARAFATE	3		VOQUEZNA	3	PA
cimetidine hcl	1		Gastrointestinal Agents - Drugs for Bowel, Intestine and Stomach Conditions		
cimetidine oral	1		AMITIZA	3	PA; QL
CYTOTEC	3		amoxicill-clarithro-lansopraz	3	
DEXILANT	3	PA	ANASPAZ	3	
dexlansoprazole	3	PA	belladonna alkaloids-opium	1	QL
esomeprazole magnesium oral packet	3	PA	BENTYL	3	
famotidine oral suspension reconstituted	1		bis subcit-metronid-tetracyc	3	PA
famotidine oral tablet 20 mg, 40 mg	1		bismuth/metronidaz/tetracyclin	3	PA
FIRST-LANSOPRAZOLE	3		chlordiazepoxide-clidinium	1	QL
FIRST-OMEPRAZOLE	3		CLENPIQ	3	
KONVOMEF	3	PA	constulose	1	
lansoprazole oral capsule delayed release	1		cromolyn sodium oral	3	
lansoprazole oral tablet delayed release dispersible	3	PA	CUVPOSA	3	
misoprostol oral	1		dicyclomine hcl intramuscular	3	
NEXIUM ORAL PACKET	3	PA	dicyclomine hcl oral capsule	1	
nizatidine	3		dicyclomine hcl oral solution 10 mg/5ml	1	
omeprazole oral capsule delayed release	1		dicyclomine hcl oral tablet	1	
OMEPRAZOLE+SYRSPE ND SF ALKA	3		diphenoxylate-atropine	1	
omeprazole-sodium bicarbonate oral packet	3	PA	enulose	1	
pantoprazole sodium oral packet	3		GASTROCROM	3	
pantoprazole sodium oral tablet delayed release	1		gavilyte-c	1	
PEPCID	3		gavilyte-g	1	
PREVACID	3		gavilyte-n with flavor pack	1	
PREVACID SOLUTAB	3	PA	generlac	1	
			GLYCATE	3	

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Drug Name	Drug Tier	Notes	Drug Name	Drug Tier	Notes
glycopyrrolate injection solution	1		MYTESI	3	
glycopyrrolate oral solution	3		na sulfate-k sulfate-mg sulf	3	
glycopyrrolate oral tablet 1 mg, 2 mg	1		nulev	1	
GLYCOPYRROLATE ORAL TABLET 1.5 MG	3		OMECLAMOX-PAK	3	
GOLYTELY	3		opium	1	QL
HELIDAC THERAPY	2		oscimin	1	
hyoscyamine sulfate er	1		peg 3350-kcl-na bicarb-nacl	1	
hyoscyamine sulfate injection	3		peg-3350/electrolytes	1	
hyoscyamine sulfate oral	1		peg-3350/electrolytes/ascorbate	3	
hyoscyamine sulfate sublingual	1		peg-kcl-nacl-nasulf-na asc-c	3	
hyosyne	1		PEG-PREP	3	
KRISTALOSE	3		PLENVU	3	
lactulose encephalopathy	1		prucalopride succinate	3	PA; QL
lactulose oral packet	3		PYLERA	3	PA
lactulose oral solution	1		RELISTOR ORAL	3	PA; QL
LEVBIID	3		RELISTOR SUBCUTANEOUS	2	PA
LEVSIN	3		SUFLAVE	3	
LEVSIN/SL	3		SUPREP BOWEL PREP KIT	3	
LIBRAX	3	QL	SUTAB	3	
LINZESS ORAL CAPSULE 145 MCG, 290 MCG	3	PA; QL	SYMPROIC	3	PA; QL
LINZESS ORAL CAPSULE 72 MCG	3	PA	TALICIA	3	
LOMOTIL	3		TRULANCE	3	PA; QL
loperamide hcl oral capsule	1		URSO FORTE	3	
lubiprostone	3	PA; QL	ursodiol oral capsule 300 mg	1	
methscopolamine bromide oral	3		ursodiol oral tablet	1	
MOTEGRITY	3	PA; QL	VIBERZI	3	PA
MOTOFEN	3		VOQUEZNA DUAL PAK	3	PA
MOVANTIK	3	PA; QL	VOQUEZNA TRIPLE PAK	3	PA
MOVIPREP	3		Genetic or Enzyme Disorder - Drugs for Replacement, Modification, Treatment		
			betaine	3	

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Drug Name	Drug Tier	Notes	Drug Name	Drug Tier	Notes
CERDELGA	4	PA; QL	oxybutynin chloride oral tablet 5 mg	1	
CREON	2		oxybutynin chloride solution 5 mg/5ml oral	1	
CYSTADANE	3		OXYBUTYNIN CHLORIDE SOLUTION 5 MG/5ML ORAL	3	PA
CYSTAGON	2	PA	OXYTROL	3	PA
OPFOLDA	3	PA	penicillamine oral	4	PA; QL
PANCREAZE	3		PENTOSAN POLYSULFATE SODIUM ORAL	2	
PERTZYE	3		phenazopyridine hcl oral tablet 100 mg, 200 mg	1	
VIOKACE	3		PREPIDIL	2	
ZENPEP	2		PYRIDIUM	3	
Genitourinary Agents - Drugs for Bladder, Genital and Kidney Conditions			RENACIDIN	3	
acetic acid irrigation	1		REVELA	3	
AURYXIA	3	PA; QL	RIMSO-50	3	
bethanechol chloride oral	1		sevelamer carbonate	1	
calcium acetate (phos binder)	1		sevelamer hcl	1	PA
calcium acetate oral tablet 667 mg	1		solifenacin succinate	1	
CERVIDIL	2		tolterodine tartrate	1	
darifenacin hydrobromide er	1		tolterodine tartrate er	1	
DETROL	3		TOVIAZ	3	PA
ELMIRON	2		trospium chloride	1	
ENTADFI	3	PA	trospium chloride er	1	
FEM PH	3		urelle	3	
FERRIC CITRATE	3	PA; QL	uretron d/s	3	
fesoterodine fumarate er	3	PA	URIBEL	3	
flavoxate hcl	1		URIMAR-T	3	
GEMTESA	3	PA	URNEVA	3	
INTRAROSA	3	PA; QL	UROGESIC-BLUE	3	
LITHOSTAT	3		uro-mp	3	
MB CAPS	3		VESICARE	3	
me/naphos/mb/hyo1	3		VESICARE LS	3	
mirabegron er	1		vilamit mb	3	
MYRBETRIQ	3		VILEVEV MB	3	
oxybutynin chloride er	1				
oxybutynin chloride oral tablet 2.5 mg	3				

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Drug Name	Drug Tier	Notes	Drug Name	Drug Tier	Notes
Genitourinary Agents - Drugs for Prostate Conditions			dexamethasone oral tablet therapy pack	3	
alfuzosin hcl er	1		dexamethasone sod phos +rfd	1	
AVODART	3		dexamethasone sod phosphate pf injection solution	1	
CARDURA XL	3		dexamethasone sodium phosphate injection solution 100 mg/10ml, 120 mg/30ml, 20 mg/5ml	1	
dutasteride oral	1		dexamethasone sodium phosphate injection solution prefilled syringe	1	
dutasteride-tamsulosin hcl	3		DEXAMETHASONE SODIUM PHOSPHATE SOLUTION 10 MG/ML INJECTION	3	
finasteride oral tablet 5 mg	1		dexamethasone sodium phosphate solution 10 mg/ml injection	1	
JALYN	3		DEXAMETHASONE SODIUM PHOSPHATE SOLUTION 4 MG/ML INJECTION	3	
PROSCAR	3		dexamethasone sodium phosphate solution 4 mg/ml injection	1	
RAPAFLO	3		DEXONTO 0.4%	3	
silodosin	1		fludrocortisone acetate oral	1	
tamsulosin hcl	1		HEMADY	3	PA
terazosin hcl	1		HIDEX 6-DAY	3	
UROXATRAL	3		hydrocortisone oral	1	
Hormonal Agents - Adrenal			hydrocortisone sod suc (pf)	1	
BETAMETHASONE SODIUM PHOSPHATE INJECTION	3		KENALOG-10	3	
BLT-25	3		KENALOG-40	3	
CORTEF	3		MEDROL ORAL TABLET 16 MG, 4 MG, 8 MG	3	
CORTISONE ACETATE ORAL	3		MEDROL ORAL TABLET 2 MG	2	
DEPO-MEDROL INJECTION SUSPENSION 20 MG/ML	2		MEDROL ORAL TABLET THERAPY PACK	3	
DEPO-MEDROL INJECTION SUSPENSION 40 MG/ML, 80 MG/ML	3				
DEXABLISS	3				
DEXAMETHASONE (LA)	3				
DEXAMETHASONE ACETATE INJECTION	3				
dexamethasone intensol	2				
dexamethasone oral elixir	1				
dexamethasone oral solution	1				
dexamethasone oral tablet	1				

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Drug Name	Drug Tier	Notes	Drug Name	Drug Tier	Notes
METHYLPREDNISOLONE ACE-LIDO	3		TRIAMCINOLONE ACETONIDE INJECTION SUSPENSION 50 MG/ML	3	
METHYLPREDNISOLONE ACETATE INJECTION SUSPENSION 40 MG/ML, 80 MG/ML	3		triamcinolone acetonide suspension 40 mg/ml injection	3	
methylprednisolone oral	1		TRIAMCINOLONE ACETONIDE SUSPENSION 40 MG/ML INJECTION	3	
methylprednisolone sodium succ injection solution reconstituted 125 mg	1		TRIAMCINOLONE DIACETATE INJECTION	3	
ORAPRED ODT	3		Hormonal Agents - Men's Health		
PEDIAPRED	3		ANDROGEL PUMP	3	QL
prednisolone oral solution	1		danazol oral	1	
prednisolone oral tablet	3		DEPO-TESTOSTERONE (brand testosterone cypionate intramuscular)	1	
prednisolone sodium phosphate oral solution 10 mg/5ml, 20 mg/5ml	3		JATENZO	3	PA
prednisolone sodium phosphate oral solution 15 mg/5ml, 25 mg/5ml, 5 mg/5ml	1		KYZATREX	3	PA
prednisolone sodium phosphate oral tablet dispersible	3		METHITEST	3	PA
prednisone intensol	3		methyltestosterone oral	3	PA
prednisone oral	1		NATESTO	3	PA; QL
RAYOS	3	PA	TESTIM	3	QL
SOLU-CORTEF INJECTION SOLUTION RECONSTITUTED 100 MG	1		TESTONE CIK	3	
SOLU-CORTEF INJECTION SOLUTION RECONSTITUTED 1000 MG, 250 MG, 500 MG	2		TESTOSTERONE CYPIONATE INJECTION	1	
SOLU-MEDROL (PF) INJECTION SOLUTION RECONSTITUTED 125 MG	3		testosterone cypionate intramuscular	1	
TAPERDEX 12-DAY	3		testosterone enanthate intramuscular	1	
TAPERDEX 6-DAY	3		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
TAPERDEX 7-DAY	3		testosterone transdermal gel 10 mg/act (2%), 20.25 mg/1.25gm (1.62%), 40.5 mg/2.5gm (1.62%)	3	PA; QL
			testosterone transdermal solution	3	PA; QL
			TLANDO	3	PA
			UNDECATREX	3	PA

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Drug Name	Drug Tier	Notes	Drug Name	Drug Tier	Notes
VOGELXO	3	QL	NOCDURNA	3	PA
VOGELXO PUMP	3	QL	octreotide acetate injection	1	
XYOSTED	3	PA	octreotide acetate intramuscular kit 10 mg	2	QL
Hormonal Agents - Pituitary			octreotide acetate intramuscular kit 20 mg, 30 mg	1	QL
ACTHAR	4	PA; QL	octreotide acetate subcutaneous	1	
ACTHAR GEL	4	PA; QL	OMNITROPE	4	PA; QL
cabergoline	1		SANDOSTATIN	3	PA
CORTROPHIN	4	PA; QL	SANDOSTATIN LAR DEPOT	2	QL
CORTROPHIN GEL	4	PA; QL	SYNAREL	3	QL
DDAVP	3		Hormonal Agents - Prostaglandins		
DDAVP PF	3		MIFEPREX	1	
desmopressin ace spray refrig	1		mifepristone oral tablet 200 mg	1	
desmopressin acetate injection	1		Hormonal Agents - Selective Estrogen Receptor Modifying Agents		
DESMOPRESSIN ACETATE NASAL	2		EVISTA	3	
desmopressin acetate oral	1		OSPHENA	3	PA
desmopressin acetate pf	1		raloxifene hcl	1	
desmopressin acetate spray	1		Hormonal Agents - Sex Hormones and Birth Control		
ELIGARD	2		ACTIVELLA	3	
FENSOLVI (6 MONTH)	3		afirmelle	1	
leuprolide acetate injection	1		aftera	1	
LUPRON DEPOT (1-MONTH)	2		AFTERPILL	1	
LUPRON DEPOT (3-MONTH)	2		ALORA	3	
LUPRON DEPOT (4-MONTH) INTRAMUSCULAR KIT 30MG	2		altavera	1	
LUPRON DEPOT (6-MONTH) INTRAMUSCULAR KIT 45MG	2		alyacen 1/35	1	
LUPRON DEPOT-PED (1-MONTH)	2		alyacen 7/7/7	1	
LUPRON DEPOT-PED (3-MONTH)	2		amethyst	3	
			ANGELIQ	3	
			ANNOVERA	3	
			apri	1	
			aranelle	1	
			ashlyna	1	

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Drug Name	Drug Tier	Notes	Drug Name	Drug Tier	Notes
aubra eq	1		DEPO-ESTRADIOL	2	
aurovela 1.5/30	1		DEPO-PROVERA	3	
aurovela 1/20	1		DEPO-SUBQ PROVERA 104	3	
aurovela 24 fe	1		desogestrel-ethinyl estradiol	1	
aurovela fe 1.5/30	1		DIVIGEL	3	
aurovela fe 1/20	1		dolishale	3	
aviane	1		dotti	1	
ayuna	1		drosipren-eth estrad-levomefol	3	
azurette	1		drosiprenone-ethinyl estradiol	1	
BALCOLTRA	3		DUAVEE	3	
balziva	1		econtra one-step	1	
BEYAZ	3		eemt	3	
BIJUVA	3		eemt hs	3	
blisovi 24 fe	1		ELESTRIN	3	
blisovi fe 1.5/30	1		elinest	1	
blisovi fe 1/20	1		ELLA	2	
briellyn	1		eluryng	1	
camila	1		emzahn	1	
camrese	1		ENDOMETRIN	3	
camrese lo	1		enilloring	1	
charlotte 24 fe	3		enpresse-28	1	
chateal eq	1		enskyce	1	
CLIMARA	1		errin	1	
CLIMARA PRO	3		est estrogens-methyltest	3	
COMBIPATCH	3		est estrogens-methyltest ds	3	
covaryx	3		est estrogens-methyltest hs	3	
covaryx hs	3		estarylla	1	
CRINONE	3		ESTRACE	3	
cryselle-28	1		estradiol oral	1	
cyred eq	1		estradiol transdermal gel	3	
dasetta 1/35 (28)	1		estradiol transdermal patch twice weekly	1	
dasetta 7/7/7	1				
daysee	1				
deblitane	1				
DELESTROGEN	2				
delyla	1				

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Drug Name	Drug Tier	Notes	Drug Name	Drug Tier	Notes
estradiol transdermal patch weekly	1		IMVEXXY MAINTENANCE PACK	3	
estradiol vaginal	1		IMVEXXY STARTER PACK	3	
estradiol valerate intramuscular	1		incassia	1	
estradiol-norethindrone acet	1		introvale	1	
estratest f.s.	3		isibloom	1	
estratest h.s. tablet 0.625-1.25 mg oral	3		jaimiess	1	
ESTRATEST H.S. TABLET 0.625-1.25 MG ORAL	3		jasmiel	1	
ESTRING	2		jencycla	1	
ESTROGEL	3		jinteli	3	
ethynodiol diac-eth estradiol	1		jolessa	1	
etonogestrel-ethinyl estradiol	1		joyeaux	3	
EVAMIST	3		juleber	1	
falmina	1		junel 1.5/30	1	
feirza 1.5/30	1		junel 1/20	1	
feirza 1/20	1		junel fe 1.5/30	1	
FEMLYV	3		junel fe 1/20	1	
FEMRING	2		junel fe 24	1	
finzala	3		kaitlib fe	3	
FIRST-PROGESTERONE VGS	3		kalliga	1	
fyavolv	3		kariva	1	
gallifrey	1		kelnor 1/35	1	
gemmily	3		kelnor 1/50	1	
hailey 1.5/30	1		kurvelo	1	
hailey 24 fe	1		larin 1.5/30	1	
hailey fe 1.5/30	1		larin 1/20	1	
hailey fe 1/20	1		larin 24 fe	1	
haloette	1		larin fe 1.5/30	1	
heather	1		larin fe 1/20	1	
her style	1		layolis fe	3	
iclevia	1		leena	1	
			lessina	1	
			levonest	1	
			levonorgest-eth est & eth est	3	
			levonorgest-eth estrad 91-day	1	

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Drug Name	Drug Tier	Notes	Drug Name	Drug Tier	Notes
levonorgest-eth estradiol-iron	3		mibelas 24 fe	3	
levonorgestrel	1		microgestin 1.5/30	1	
levonorgestrel-ethinyl estrad oral tablet 0.1-20 mg-mcg, 0.15-30 mg-mcg	1		microgestin 1/20	1	
levonorgestrel-ethinyl estrad oral tablet 90-20 mcg	3		microgestin fe 1.5/30	1	
levonorg-eth estrad triphasic	1		microgestin fe 1/20	1	
levora 0.15/30 (28)	1		mili	1	
LILETTA (52 MG)	3		mimvey	1	
LO LOESTRIN FE	3		MINIVELLE	3	
LOESTRIN 1.5/30 (21)	3		minzoya	3	
LOESTRIN 1/20 (21)	3		MIRENA (52 MG)	2	
LOESTRIN FE 1.5/30	3		mono-linyah	1	
LOESTRIN FE 1/20	3		my choice	1	
lojaimiess	1		my way	1	
loryna	1		NATAZIA	3	
low-ogestrel	1		necon 0.5/35 (28)	1	
lo-zumandimine	1		new day	1	
lutra	1		NEXTSTELLIS	3	
lyleq	1		nikki	1	
lyllana	1		nora-be	1	
lyza	1		norelgestromin-eth estradiol	1	
marlissa	1		norethin ace-eth estrad-fe oral capsule	3	
medroxyprogesterone acetate	1		norethin ace-eth estrad-fe oral tablet	1	
megestrol acetate oral suspension 40 mg/ml, 400 mg/10ml, 800 mg/20ml	1		norethin ace-eth estrad-fe oral tablet chewable	3	
megestrol acetate oral suspension 625 mg/5ml	3		norethindrone acetate oral	1	
megestrol acetate oral tablet	1		norethindrone acet-ethinyl est	1	
MENEST	3		norethindrone oral	1	
MENOSTAR	3		norethindrone-eth estradiol	3	
merzee	3		norethin-eth estradiol-fe	3	
			norgestimate-eth estradiol oral tablet 0.25-35 mg-mcg	1	
			norgestimate-ethinyl estradiol triphasic	1	

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Drug Name	Drug Tier	Notes	Drug Name	Drug Tier	Notes
norlyroc	1		SLYND	3	
nortrel 0.5/35 (28)	1		sprintec 28	1	
nortrel 1/35 (21)	1		sronyx	1	
nortrel 1/35 (28)	1		syeda	1	
nortrel 7/7/7	1		take action	1	
NUVARING	3		tarina 24 fe	1	
nylia 1/35	1		tarina fe 1/20 eq	1	
nylia 7/7/7	1		taysofy	3	
ocella	1		TAYTULLA CAPSULE 1-20 MG-MCG(24) ORAL	3	
opcicon one-step	1		TAYTULLA CAPSULE 1-20 MG-MCG(24) ORAL	3	PA
OPILL	1		tilia fe	3	
option 2	1		tri-estarylla	1	
PARAGARD INTRAUTERINE COPPER	2		tri-legest fe	3	
philith	1		tri-linyah	1	
pimtrea	1		tri-lo-estarylla	1	
PLAN B ONE-STEP	3		tri-lo-marzia	1	
portia-28	1		tri-lo-mili	1	
PREMARIN ORAL	3	PA	tri-lo-sprintec	1	
PREMARIN VAGINAL	2		tri-mili	1	
PREMPHASE	3		tri-sprintec	1	
PREMPRO	3		trivora (28)	1	
progesterone intramuscular	1		tri-vylibra	1	
progesterone oral	1		tri-vylibra lo	1	
PROMETRIUM	3		turqoz	1	
PROVERA	3		TWIRLA	3	
react	1		tyblume	1	
reclipsen	1		VAGIFEM	3	
rivelsa	3		valtya 1/50	1	
SAFYRAL	3		velivet	1	
setlakin	1		vestura	1	
sharobel	1		vienva	1	
simliya	1		viorele	1	
simpesse	1		VIVELLE-DOT	3	
SKYLA	2		volnea	1	
			vyfemla	1	

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Drug Name	Drug Tier	Notes	Drug Name	Drug Tier	Notes
vylibra	1		AMJEVITA-PED 10KG TO <15KG		
wera	1		SUBCUTANEOUS	2	PA
wymzya fe	3		SOLUTION PREFILLED		
xarah fe	3		SYRINGE 10MG/0.2ML		
xulane	1		AMJEVITA-PED 15KG TO <30KG	2	PA
YASMIN 28	3		ANTIVENIN		
YAZ	3		LATRODECTUS	3	
yuvaferm	1		MACTANS		
zafemy	1		ARAVA	3	
zovia 1/35 (28)	1		ASTAGRAF XL	3	
zumandimine	1		AURANOFIN	4	PA; QL
Hormonal Agents - Thyroid			AZASAN	3	
ADTHYZA	3		azathioprine oral tablet 100 mg, 75 mg	3	
ARMOUR THYROID	3		azathioprine oral tablet 50 mg	1	
CYTOMEL	3		BERINERT	4	PA; QL
ERMEZA	3	PA	CELLCEPT	3	
euthyrox	3		COSENTYX (300 MG DOSE)	4	PA; QL
levo-t	3		COSENTYX 150 MG/ML SUBCUTANEOUS	4	PA; QL
LEVOTHYROXINE SODIUM ORAL CAPSULE	3		COSENTYX SENSOREADY (300 MG)	4	PA; QL
levothyroxine sodium oral tablet	1		COSENTYX SENSOREADY PEN	4	PA; QL
levoxyl	3		COSENTYX UNOREADY	4	PA; QL
liothyronine sodium oral	1		CUVITRU	4	PA; QL
methimazole oral	1		cyclosporine modified	1	
NIVA THYROID	3		cyclosporine oral	1	
NP THYROID	3		ENBREL	4	PA; QL
propylthiouracil oral	1		ENBREL MINI	4	PA; QL
SYNTHROID	3		ENBREL SURECLICK	4	PA; QL
THYQUIDITY	3		ENVARBUS XR	2	
THYROID ORAL	3		engraf	1	
TIROSINT	3		HEPAGAM B	3	
TIROSINT-SOL	3		HIZENTRA	4	PA; QL
unithroid	3		HYPERHEP B	2	
Immunological Agents - Drugs for Immune System Stimulation or Suppression			HYPERRAB	3	
AMJEVITA	2	PA			

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Drug Name	Drug Tier	Notes	Drug Name	Drug Tier	Notes
HYPERTET	3		SKYRIZI	4	PA; QL
HYQVIA	4	PA; QL	SUBCUTANEOUS		
icatibant acetate	4	PA; QL			
IMOGAM RABIES-HT	3		tacrolimus oral	1	
IMURAN	3		TREMFYA CROHNS	4	PA; QL
JYLAMVO	3	PA	INDUCTION		
KEDRAB	3		TREMFYA	4	PA; QL
leflunomide oral	1		SUBCUTANEOUS		
methotrexate sodium	1		TREXALL	3	
methotrexate sodium (pf)	1		VARIZIG	3	
mycophenolate mofetil oral	1		XATMEP	3	PA; QL
mycophenolate sodium	1		XELJANZ	4	PA; QL
mycophenolic acid	1		XELJANZ XR	4	PA; QL
MYFORTIC	3		YESINTEK	2	PA
NABI-HB	2		SUBCUTANEOUS		
NEORAL	3		Immunological Agents - Drugs for Vaccination		
ORENCIA CLICKJECT	4	PA; QL	ABRYSVO	2	
ORENCIA SUBCUTANEOUS	4	PA; QL	ACTHIB	2	
OTEZLA	4	PA; QL	ADACEL	2	
OTREXUP SUBCUTANEOUS SOLUTION AUTO-INJECTOR 10 MG/0.4ML, 12.5 MG/0.4ML, 15 MG/0.4ML, 17.5 MG/0.4ML, 22.5 MG/0.4ML, 25 MG/0.4ML	3	PA	AFLURIA	1	
OTREXUP SUBCUTANEOUS SOLUTION AUTO-INJECTOR 20 MG/0.4ML	3		AFLURIA PRESERVATIVE FREE	1	
PROGRAF ORAL	3		AREXVY	2	
RASUVO	2		AUDENZ	2	
RHOPHYLAC	3		BEXSERO	2	
RIDAURA	4	PA; QL	BIOTHRAX	3	
sajazir	4	PA; QL	BOOSTRIX	2	
SANDIMMUNE ORAL	3		CAPVAXIVE	2	
sirolimus oral	1		COMIRNATY	2	
SKYRIZI PEN	4	PA; QL	DAPTACEL	2	
			ENGERIX-B	2	
			FLUAD	1	
			FLUARIX	1	
			FLUBLOK	1	
			FLUCELVAX	1	
			FLULAVAL	1	
			FLUMIST	1	

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Drug Name	Drug Tier	Notes	Drug Name	Drug Tier	Notes
FLUZONE HIGH-DOSE	1		TDVAX		
FLUZONE INTRAMUSCULAR SUSPENSION PREFILLED SYRINGE	1		INTRAMUSCULAR SUSPENSION 2-2 LF/0.5ML	2	
GARDASIL 9	2		TENIVAC	2	
HAVRIX	2		TETANUS-DIPHTHERIA TOXOIDS TD INTRAMUSCULAR SUSPENSION 2-2 LF/0.5ML	2	
HEPLISAV-B	2		TRUMENBA	2	
HIBERIX	2		TWINRIX	2	
INFANRIX	2		VAQTA INTRAMUSCULAR SUSPENSION 50 UNIT/ML	2	
IPOL	2		VARIVAX	2	
KINRIX	2		VAXELIS	2	
MENQUADFI	2		VAXNEUVANCE	2	
MENVEO	2				
M-M-R II	2				
MODERNA COVID-19 VAC 6M-11Y	2				
MRESVIA	2				
NOVAVAX COVID-19 VACCINE	2				
PEDIARIX	2				
PEDVAX HIB	2				
PENBRAYA	2				
PENTACEL	2				
PFIZER COVID-19 VAC-TRIS 5-11Y	2				
PFIZER COVID-19 VAC-TRIS 6M-4Y	2				
PNEUMOVAX 23	2				
PREVNAR 20	2				
PRIORIX	2				
PROQUAD	2				
QUADRACEL	2				
RECOMBIVAX HB	2				
ROTARIX	2				
ROTATEQ	2				
SHINGRIX	2				
SPIKEVAX	2				
			Inflammatory Bowel Disease Agents		
			ANALPRAM-HC	3	
			ANUCORT-HC	3	
			ANUSOL-HC EXTERNAL	3	
			anusol-hc rectal	3	
			APRISO	1	
			AZULFIDINE	3	
			AZULFIDINE EN-TABS	3	
			balsalazide disodium	1	
			budesonide oral (generic Entocort)	1	
			budesonide rectal	3	
			CANASA	3	
			COLAZAL	3	
			CORTENEMA	3	
			CORTIFOAM	2	
			DELZICOL	3	PA
			HEMMOREX-HC RECTAL SUPPOSITORY 30 MG	3	

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Drug Name	Drug Tier	Notes	Drug Name	Drug Tier	Notes
HEMMOREX-HC SUPPOSITORY 25 MG RECTAL	3		PROCTOFOAM HC	2	
hemmorex-hc suppository 25 mg rectal	3		procto-med hc	1	
hydrocortisone (perianal) external cream 1 %	3		proctosol hc	1	
hydrocortisone (perianal) external cream 2.5 %	1		proctozone-hc	1	
hydrocortisone ace-pramoxine external cream 1-1 %	3		ROWASA	3	
hydrocortisone acetate rectal	3		SFROWASA	3	
hydrocortisone rectal	1		sulfasalazine oral	1	
LIALDA	3		UCERIS RECTAL	3	
lidocaine-hydrocort (perianal)	3		Metabolic Bone Disease Agents - Drugs for Osteoporosis		
LIDOCAINE-HYDROCORTISONE ACE RECTAL GEL	3		ACTONEL	3	
lidocaine-hydrocortisone ace rectal kit 3-0.5 %, 3-1 %	3		alendronate sodium	1	
LIDOCORT	3		ATELVIA	3	
mesalamine er oral capsule 0.375 gm	1		BINOSTO	3	
mesalamine oral capsule delayed release 400 mg	1	ST	calcitonin (salmon) injection	3	
mesalamine oral tablet delayed release 1.2 gm	1		calcitonin (salmon) nasal	1	
mesalamine oral tablet delayed release 800 mg	3	PA	FOSAMAX	3	
mesalamine rectal	1		FOSAMAX PLUS D	3	
mesalamine-cleanser	3		ibandronate sodium oral	1	
PENTASA ORAL CAPSULE EXTENDED RELEASE 250 MG	2	PA	MIACALCIN	3	
PENTASA ORAL CAPSULE EXTENDED RELEASE 500 MG	1	PA	risedronate sodium oral tablet	1	
PROCORT	3		risedronate sodium oral tablet delayed release	3	
PROCTOCORT	3		Metabolic Bone Disease Agents - Other		
			calcitriol oral	1	
			cinacalcet hcl	1	
			doxercalciferol oral	3	
			paricalcitol oral	3	
			RAYALDEE	3	PA
			ROCALTROL	3	
			SENSIPAR	3	
			ZEMPLAR ORAL	3	
			Miscellaneous Therapeutic Agents		
			AEROCHAMBER HOLDING CHAMBER	2	

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Drug Name	Drug Tier	Notes	Drug Name	Drug Tier	Notes
AEROCHAMBER MINI CHAMBER	2		BD ULTRA-FINE PEN NEEDLES	1	
AEROCHAMBER MV	2		BREATHE COMFORT CHAMBER/ADULT	2	
AEROCHAMBER PLS FLOVU MTHPIECE	2		BREATHE COMFORT CHAMBER/CHILD	2	
AEROCHAMBER PLUS FLO-VU INTERM	2		BREATHE EASE LARGE	2	
AEROCHAMBER PLUS FLO-VU LARGE DEVICE	2		BREATHE EASE MEDIUM	2	
AEROCHAMBER PLUS FLO-VU MEDIUM DEVICE	2		BREATHE EASE SMALL	2	
AEROCHAMBER PLUS FLO-VU SMALL DEVICE	2		BREATHRITE VALVED MDI CHAMBER	2	
AEROCHAMBER PLUS FLOW VU	2		CAYA	2	
AEROCHAMBER W/FLOWSIGNAL	2		CLEVER CHOICE HOLDING CHAMBER	2	
ALCOHOL PREP PADS PAD , 70 %	1		COMFORT EZ PRO PEN NEEDLES	1	
ALCOHOL PREP PADS SHEET 70 %	1		COMPACT SPACE CHAMBER	2	
AQINJECT PEN NEEDLE	1		COMPACT SPACE CHAMBER/LG MASK	2	
ASSURE ID DUO PRO PEN NEEDLES	1		COMPACT SPACE CHAMBER/MED MASK	2	
ASSURE ID PRO PEN NEEDLES	1		COMPACT SPACE CHAMBER/SM MASK	2	
AUM ALCOHOL PREP PADS	1		CYTOTINE ORAL POWDER	3	
AUM INSULIN SAFETY PEN NEEDLE 31G X 4 MM	1		deferoxamine mesylate injection solution reconstituted 500 mg	1	
AUM MINI INSULIN PEN NEEDLE	1		DESFERAL	3	
AUM PEN NEEDLE 32G X 5 MM , 33G X 4 MM , 33G X 5 MM , 33G X 6 MM	1		DROPSAFE ALCOHOL PREP	1	
AUM READYGARD DUO PEN NEEDLE	1		EASIVENT	2	
AUM SAFETY PEN NEEDLE	1		EDETATE CALCIUM DISODIUM INJECTION	3	
BD AUTOSHIELD DUO PEN NEEDLES	1		EMBECTA AUTOSHIELD DUO	1	
			EMBECTA PEN NEEDLE NANO	1	
			EMBECTA PEN NEEDLE NANO 2 GEN	1	

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Drug Name	Drug Tier	Notes	Drug Name	Drug Tier	Notes
EMBECTA PEN NEEDLE U/F	1		NOVOFINE PLUS PEN NEEDLE	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		NOZIN NASAL SANITIZER	1	
			NOZIN NASAL SANITIZER POPSWAB	1	
FEMCAP	2		ODACTRA	3	PA
FLEXICHAMBER	2		OMNIPOD 5 DEXCOM INTRO KIT	3	PA
FLEXICHAMBER ADULT MASK/SMALL	2		OMNIPOD 5 DEXCOM PODS	3	PA
FLEXICHAMBER CHILD MASK/LARGE	2		OMNIPOD 5 LIBRE INTRO KIT	3	PA
FLEXICHAMBER CHILD MASK/SMALL	2		OMNIPOD 5 LIBRE PODS	3	PA
GLUCAGON HCL (DIAGNOSTIC)	2		OMNIPOD DASH INTRO KIT	3	PA
GOODSENSE ALCOHOL SWABS	1		OMNIPOD DASH PDM (GEN 4)	3	PA
GRASTEK	3	PA	OMNIPOD DASH PODS	3	PA
INCONTROL ULTICARE PEN NEEDLES	1		OMNIPOD POD PALS	3	PA
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		OPTICHAMBER DIAMOND	2	
			OPTICHAMBER DIAMOND-LG MASK	2	
			OPTICHAMBER DIAMOND-MD MASK	2	
			OPTICHAMBER DIAMOND-SM MASK	2	
			ORALAIR	3	PA
			ORALAIR ADULT STARTER PACK	3	PA
			ORALAIR CHILDRENS STARTER PACK	3	PA
IWILFIN	3	PA; QL	PANDA MASK LARGE	2	
KERENDIA	3	PA; QL	PANDA MASK MEDIUM	2	
methergine	1		PANDA MASK SMALL	2	
methylergonovine maleate	1		PARI VORTEX ADULT MASK	2	
MICROCHAMBER DEVICE	2		PARI VORTEX PEDIATRIC MASK	2	
NATURAL CYCLES CONTRACEPTIVE	3		PEDIATRIC PANDA MASK	2	
NOVOFINE PEN NEEDLE	1				

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Drug Name	Drug Tier	Notes	Drug Name	Drug Tier	Notes
PEN NEEDLE/5-BEVEL TIP	1		VORTEX VALVE CHAMBER-PEDI MASK	2	
PENTIPS GENERIC PEN NEEDLES 32G X 6 MM	1		VORTEX VALVED HOLDING CHAMBER	2	
PHEXXI	3		WIDE-SEAL DIAPHRAGM 60	2	
PIP PEN NEEDLES 32G X 4MM	1		WIDE-SEAL DIAPHRAGM 65	2	
pocket spacer	2		WIDE-SEAL DIAPHRAGM 70	2	
PRO COMFORT SPACER ADULT	2		WIDE-SEAL DIAPHRAGM 75	2	
PRO COMFORT SPACER CHILD	2		WIDE-SEAL DIAPHRAGM 80	2	
PRO COMFORT SPACER INFANT	2		WIDE-SEAL DIAPHRAGM 85	2	
PROCARE SPACER/ADULT MASK	2		WIDE-SEAL DIAPHRAGM 90	2	
PROCARE SPACER/CHILD MASK	2		WIDE-SEAL DIAPHRAGM 95	2	
PURE COMFORT SAFETY PEN NEEDLE	1		Ophthalmic Agents - Drugs for Eye Allergy, Infection and Inflammation		
PURE COMFORT SPACER CHAMBER	2		ACULAR	2	
QUICK TOUCH INSULIN PEN NEEDLE	1		ACULAR LS	3	
RAGWITEK	3	PA	ACUVAIL	3	
RAYA SURE PEN NEEDLE	1		ALOCRIL	3	
SAFETY PEN NEEDLES	1		ALREX	3	
TRUE COMFORT SAFETY PEN NEEDLE	1		AZASITE	3	
UNIFINE OTC PEN NEEDLES	1		azelastine hcl ophthalmic	1	
UNIFINE PROTECT PEN NEEDLE	1		bacitracin ophthalmic	1	
VEOZAH	3	PA; QL	bepotastine besilate	3	
VERIFINE INSULIN PEN NEEDLE	1		BEPREVE	3	
VERIFINE PLUS PEN NEEDLE	1		BESIVANCE	3	
V-GO 20	3	PA	BETADINE OPHTHALMIC PREP	3	
V-GO 30	3	PA	bromfenac sodium (once-daily)	3	
V-GO 40	3	PA	bromfenac sodium ophthalmic	3	
			BROMSITE	3	
			CILOXAN	2	

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Drug Name	Drug Tier	Notes	Drug Name	Drug Tier	Notes
ciprofloxacin hcl ophthalmic	1		neomycin-polymyxin-dexameth ophthalmic ointment	1	
cromolyn sodium ophthalmic	1		neomycin-polymyxin-dexameth ophthalmic suspension 3.5-10000-0.1	1	
dexamethasone sodium phosphate ophthalmic	1		neomycin-polymyxin-hc ophthalmic	3	
diclofenac sodium ophthalmic	1		NEVANAC	3	
difluprednate	1		OCUFLOX	3	
DUREZOL	3		ofloxacin ophthalmic	1	
epinastine hcl	3		olopatadine hcl ophthalmic solution 0.2 %	3	
erythromycin ophthalmic	1		POVIDONE-IODINE OPHTHALMIC	3	
EYSUVIS	3	PA	PRED FORTE	3	
FLAREX	3		PRED MILD	2	
fluorometholone	1		PREDNISOL ACE-MOXIFLOX-BROMFEN	3	
flurbiprofen sodium	1		prednisolone acetate ophthalmic	1	
FML FORTE	2		prednisolone acetate p-f	1	
FML LIQUIFILM	3		PREDNISOLONE ACETATE-NEPAFENAC	3	
gatifloxacin ophthalmic	1		PREDNISOLONE ACET-MOXIFLOXACIN	3	
gentamicin sulfate ophthalmic	1		prednisolone sodium phosphate ophthalmic	3	
ILEVRO	3		PREDNISOLON-GATIFLOX-BROMFENAC	3	
INVELTYS	3		PREDNISOLON-MOXIFLOX-BROMFENAC	3	
ketorolac tromethamine ophthalmic	1		PREDNISOLON-MOXIFLOX-KETOROLAC	3	
KLARITY-A	3		PREDNISOLON-MOXIFLOX-NEPAFENAC	3	
KLARITY-L	3		PROLENSA	3	
levofloxacin ophthalmic	3		sulfacetamide sodium ophthalmic	1	
LOTEMAX	3		TOBRADEX	2	
LOTEMAX SM	3				
loteprednol etabonate	3				
MAXIDEX	3				
MAXITROL	3				
moxifloxacin hcl (2x day)	1				
moxifloxacin hcl ophthalmic	1				
NATACYN	2				

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Drug Name	Drug Tier	Notes	Drug Name	Drug Tier	Notes
TOBRADEX ST	3		dorzolamide hcl solution 2 % ophthalmic	1	
tobramycin ophthalmic	1		dorzolamide hcl-timolol mal	1	
tobramycin-dexamethasone	1		dorzolamide hcl-timolol mal pf	3	
TOBREX	2		IOPIDINE	3	
trifluridine	1		ISTALOL	3	
UPNEEQ	3	PA	IYUZEH	3	
VIGAMOX	2		latanoprost ophthalmic	1	
ZERVIAE	3		LATANOPROST-TIMOLOL MALEATE	3	
ZIRGAN	3		levobunolol hcl	1	
Ophthalmic Agents - Drugs for Glaucoma			LUMIGAN	2	
acetazolamide er	1		methazolamide oral	1	
acetazolamide oral	1		PHOSPHOLINE IODIDE	3	
ALPHAGAN P	3		pilocarpine hcl ophthalmic	1	
apraclonidine hcl	3		QLOSI	3	PA
AZOPT	3		RHOPRESSA	3	PA
betaxolol hcl ophthalmic	1		ROCKLATAN	3	PA
BETIMOL	3		SIMBRINZA	3	
BETOPTIC-S	2		tafluprost (pf)	3	
bimatoprost ophthalmic	1		timolol hemihydrate	3	
brimonidine tartrate ophthalmic solution 0.1 %, 0.15 %	3		timolol maleate (once-daily)	3	
brimonidine tartrate ophthalmic solution 0.2 %	1		timolol maleate ocudose	3	
brimonidine tartrate-timolol	3		timolol maleate ophthalmic	1	
BRIMONIDINE-DORZOLAMIDE OPTHALMIC SOLUTION 0.15-2 %	3		timolol maleate pf	3	
brinzolamide	1		TIMOLOL-BRIMON-DORZOL-LATANOPR	3	
carteolol hcl	1		TIMOLOL-BRIMONIDINE-DORZOLAMID OPTHALMIC SOLUTION 0.5-0.15-2 %	3	
COMBIGAN	3		TIMOLOL-DORZOLAMID-LATANOPROST	3	
COSOPT	3		TIMOPTIC OCUDOSE	3	
COSOPT PF	3		TRAVATAN Z	3	
DORZOLAMIDE HCL SOLUTION 2 % OPTHALMIC	3				

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Drug Name	Drug Tier	Notes	Drug Name	Drug Tier	Notes
travoprost (bak free)	1		neo-polycin hc	1	
VUITY	3	PA	phenylephrine hcl ophthalmic	1	
VYZULTA	3	PA	polycin	1	
XALATAN	3		polymyxin b-trimethoprim	1	
XELPROS	3		PREDNISOLONE-BROMFENAC	3	
ZIOPTAN	3		PREDNISOLONE-GATIFLOXACIN	3	
Ophthalmic Agents - Drugs for Miscellaneous Eye Conditions			PREDNISOLONE-MOXIFLOXACIN	3	
ACUICYN	3		proparacaine hcl ophthalmic	3	
AKTEN	3		RESTASIS	3	PA
ALCAINE	3		RESTASIS MULTIDOSE	3	PA
altacaine	3		sulfacetamide-prednisolone	1	
altafrin	1		tetracaine hcl ophthalmic	3	
ATROPINE SULFATE OPTHALMIC SOLUTION 0.01 %	1		TROPICAMIDE-CYCLOPENTOLATE-PE	3	
atropine sulfate ophthalmic solution 1 %	1		TROPICAMIDE-PHENYLEPHRINE	3	
AVENOVA	3		TROPIC-PROPARACA-PE-KETOROLAC	3	
bacitracin-polymyxin b	1		TYRVAYA	3	PA
bacitra-neomycin-polymyxin-hc	1		XIIDRA	2	PA
CEQUA	2	PA	ZYLET	3	
CYCLOGYL OPTHALMIC SOLUTION 0.5 %	2		Otic Agents - Drugs for Ear Conditions		
CYCLOGYL OPTHALMIC SOLUTION 1 %, 2 %	3		acetic acid otic	1	
CYCLOMYDRIL	3		CETRAXAL	3	
cyclopentolate hcl ophthalmic	1		CIPRO HC	2	
cyclosporine ophthalmic	1	PA	ciprofloxacin hcl otic	3	
ENCELTO	3		ciprofloxacin-dexamethasone	1	
GELFILM OPTHALMIC	3		CIPROFLOXACIN-FLUOCINOLONE PF	3	
homatropaire	1		CORTISPORIN-TC	3	
neomycin-bacitracin zn-polymyx	3		DERMOTIC	3	
neomycin-polymyxin-gramicidin	1		flac	1	
NEO-POLYCIN	3		fluocinolone acetonide otic	1	

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Drug Name	Drug Tier	Notes	Drug Name	Drug Tier	Notes
hydrocortisone-acetic acid	3		hydrocodone bit-homatrop mbr	1	
neomycin-polymyxin-hc otic	1		hydromet	1	
ofloxacin otic	1		HYPERSAL	3	
OTOVEL	3		INFASURF	3	
PRAMOTIC	3		ipratropium bromide nasal	1	
Respiratory Tract / Pulmonary Agents - Drugs for Allergies, Cough, Cold			KARBINAL ER	3	
ADRENALIN NASAL	3		levocetirizine dihydrochloride oral	1	
azelastine hcl nasal	1		maxi-tuss ac	2	QL
azelastine-fluticasone	3		MICLARA LQ	3	
benzonatate oral capsule 100 mg, 200 mg	1		mometasone furoate nasal	3	PA
benzonatate oral capsule 150 mg	3		nebusal inhalation nebulization solution 3 %	1	
BROMPHENIRAMINE MALEATE INTRAMUSCULAR	3		NEBUSAL INHALATION NEBULIZATION SOLUTION 6 %	3	
bromphen-pseudoeph-dm	3		olopatadine hcl nasal	1	
carbinoxamine maleate	1		OMNARIS	3	PA
CARBINOXAMINE MALEATE ER	3		potassium iodide (expectorant)	2	
cetirizine hcl oral solution	3		promethazine vc	1	
CLARINEX	3		promethazine-codeine oral solution	3	PA
CLARINEX-D 12 HOUR	3		promethazine-dm	1	
clemastine fumarate oral	1		promethazine-phenylephrine	1	
CUROSURF	3		pseudoephedrine-bromphen-dm	3	
cyproheptadine hcl oral	1		pulmosal	1	
desloratadine	1		QNASL	3	PA
diphenhydramine hcl injection	1		QNASL CHILDRENS	3	PA
diphenhydramine hcl oral elixir	3		RYALTRIS	3	PA
DYMISTA	3		RYCLORA	3	
epinephrine hcl (nasal)	3		ryvent	1	
flunisolide nasal	1		sodium chloride inhalation nebulization solution 0.9 %, 3 %, 7 %	1	
guaifenesin-codeine	2	QL	sodium chloride inhalation nebulization solution 10 %	3	
HYCODAN	3				
hydrocod poli-chlorphe poli er	3				

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Drug Name	Drug Tier	Notes	Drug Name	Drug Tier	Notes
SSKI	2		albuterol sulfate oral tablet	1	
SURVANTA	2		ALVESCO	2	
TUXARIN ER	3	QL	ANORO ELLIPTA	3	PA
XHANCE	3	PA	arformoterol tartrate	3	PA
Respiratory Tract / Pulmonary Agents - Drugs for Asthma and Other Lung Conditions			ARNUITY ELLIPTA	3	PA
ACCOLATE	3		ASMANEX (120 METERED DOSES)	2	ST
acetylcysteine inhalation	1		ASMANEX (14 METERED DOSES)	2	ST
ADVAIR DISKUS	3		ASMANEX (30 METERED DOSES)	2	ST
ADVAIR HFA	2		ASMANEX (60 METERED DOSES)	2	ST
AIRDUO RESPICLICK 113/14	3	PA	ASMANEX HFA	2	ST
AIRDUO RESPICLICK 232/14	3	PA	ATROVENT HFA	2	
AIRDUO RESPICLICK 55/14	3	PA	AUVI-Q INJECTION SOLUTION AUTO-INJECTOR 0.1 MG/0.1ML	2	
AIRSUPRA	3	PA	AUVI-Q INJECTION SOLUTION AUTO-INJECTOR 0.15 MG/0.15ML, 0.3 MG/0.3ML	1	
albuterol sulfate hfa aerosol solution 108 (90 base) mcg/act inhalation	1	QL	BEVESPI AEROSPHERE	3	PA
albuterol sulfate hfa aerosol solution 108 (90 base) mcg/act inhalation	3	QL	BREO ELLIPTA	3	PA
ALBUTEROL SULFATE HFA AEROSOL SOLUTION 108 (90 BASE) MCG/ACT INHALATION	1	QL	breyana	1	PA; 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		BREZTRI AEROSPHERE	3	PA
albuterol sulfate nebulization solution (5 mg/ml) 0.5% inhalation	1		BROVANA	3	PA
ALBUTEROL SULFATE NEBULIZATION SOLUTION (5 MG/ML) 0.5% INHALATION	3		budesonide inhalation	1	
albuterol sulfate oral syrup 2 mg/5ml	1		budesonide-formoterol fumarate	1	PA; QL
			COMBIVENT RESPIMAT	2	
			cromolyn sodium inhalation	1	
			DALIRESP	3	
			DUAKLIR PRESSAIR	3	PA
			DULERA	3	PA; QL
			elixophyllin	1	
			epinephrine injection solution auto-injector	1	

Drug Name	Drug Tier	Notes	Drug Name	Drug Tier	Notes
EPINEPHRINE PROFESSIONAL	3		LEVALBUTEROL HFA INHALATION AEROSOL 45 MCG/ACT	3	QL
EPINEPHRINESNAP	3		montelukast sodium oral	1	
EPINEPHRINESNAP-EMS	3		NEFFY	3	PA
EPINEPHRINESNAP-V	3		OFEV	4	PA; QL
EPIPEN 2-PAK	3		PERFOROMIST	3	
EPIPEN JR 2-PAK	3		pirfenidone	4	PA; QL
FLUTICASONE FUROATE-VILANTEROL	3	PA	PROAIR RESPICLICK	3	QL
FLUTICASONE PROPIONATE DISKUS	2	PA	PULMICORT FLEXHALER	3	PA
FLUTICASONE PROPIONATE HFA INHALATION AEROSOL 110 MCG/ACT, 220 MCG/ACT	2	PA	PULMICORT SUSPENSION	3	
FLUTICASONE PROPIONATE HFA INHALATION AEROSOL 44 MCG/ACT	2		QVAR REDIHALER	3	PA
FLUTICASONE-SALMETEROL INHALATION AEROSOL	2		roflumilast	3	
fluticasone-salmeterol inhalation aerosol powder breath activated 100-50 mcg/act, 250-50 mcg/act, 500-50 mcg/act	1		SEREVENT DISKUS	2	ST
FLUTICASONE-SALMETEROL INHALATION AEROSOL POWDER BREATH ACTIVATED 113-14 MCG/ACT, 232-14 MCG/ACT, 55-14 MCG/ACT	3	PA	SINGULAIR	3	
formoterol fumarate inhalation	3		SPIRIVA HANDIHALER	1	
INCRUSE ELLIPTA	3	PA	SPIRIVA RESPIMAT INHALATION AEROSOL SOLUTION 1.25 MCG/ACT	2	ST
ipratropium bromide inhalation	1		SPIRIVA RESPIMAT INHALATION AEROSOL SOLUTION 2.5 MCG/ACT	2	
ipratropium-albuterol	1		STIOLTO RESPIMAT	2	
isoproterenol hcl injection	3		STRIVERDI RESPIMAT	2	PA
levabuterol hcl inhalation	3		SYMBICORT	3	PA; QL
			terbutaline sulfate injection	3	
			terbutaline sulfate oral	1	
			THEO-24	3	
			theophylline er	1	
			theophylline oral	1	
			tiotropium bromide monohydrate	1	
			TRELEGY ELLIPTA	3	PA
			TUDORZA PRESSAIR	3	
			VENTOLIN HFA	3	QL
			wixela inhub	1	

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Drug Name	Drug Tier	Notes	Drug Name	Drug Tier	Notes
XOPENEX HFA	3		carisoprodol oral	3	PA; QL
YUPELRI	3	PA	chlorzoxazone oral tablet 250 mg	1	
zafirlukast	3		chlorzoxazone oral tablet 375 mg, 500 mg, 750 mg	1	QL
Respiratory Tract / Pulmonary Agents - Drugs for Cystic Fibrosis			cyclobenzaprine hcl er	3	PA; QL
ALYFTREK	4	PA; QL	cyclobenzaprine hcl oral tablet 10 mg, 5 mg	1	QL
PULMOZYME	2	QL	cyclobenzaprine hcl oral tablet 7.5 mg	3	QL
tobramycin nebulization solution 300 mg/5ml inhalation	4	PA; QL	DANTRIUM ORAL	3	
TRIKAFTA	4	PA; QL	dantrolene sodium oral	1	
Respiratory Tract / Pulmonary Agents - Drugs for Pulmonary Hypertension			FLEQSUVY	3	PA
alyq	1		metaxalone oral tablet 400 mg, 800 mg	3	QL
ambrisentan	1	PA; QL	metaxalone oral tablet 640 mg	3	PA; QL
bosentan	1	PA; QL	methocarbamol injection	1	
OPSUMIT	4	PA; QL	methocarbamol oral tablet 500 mg, 750 mg	1	QL
sildenafil citrate oral suspension reconstituted	4	PA; QL	NORGESIC	3	
sildenafil citrate oral tablet 20 mg	4	PA	NORGESIC FORTE	3	QL
tadalafil (pah)	1		orphenadrine citrate er	1	QL
TRACLEER 62.5 MG, 125 MG	3	PA; QL	orphenadrine citrate injection	3	
TYVASO	2	PA; QL	orphenadrine-aspirin-caffeine	3	
TYVASO REFILL KIT	2	PA; QL	ORPHENGESIC FORTE	3	QL
TYVASO STARTER KIT	2	PA; QL	OZOBAX DS	3	
UPTRAVI ORAL	4	PA; QL	ROBAXIN	3	
UPTRAVI TITRATION	4	PA; QL	SOMA	3	PA; QL
VENTAVIS	4	PA; QL	tizanidine hcl oral capsule	3	
Skeletal Muscle Relaxants - Drugs for Muscle Pain and Spasm			tizanidine hcl oral tablet	1	
AMRIX	3	PA; QL	ZANAFLEX	3	
BACLOFEN ORAL SOLUTION 10 MG/5ML	3		Sleep Disorder Agents		
baclofen oral solution 5 mg/5ml	3		AMBIEN	3	QL
baclofen oral suspension	3	PA	AMBIEN CR	3	QL
baclofen oral tablet 10 mg, 20 mg, 5 mg	1		armodafinil	1	
baclofen oral tablet 15 mg	3		BELSOMRA	3	PA
			DAYVIGO	3	PA; QL

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Drug Name	Drug Tier	Notes	Drug Name	Drug Tier	Notes
doxepin hcl oral tablet	3		SILENOR	3	
EDLUAR	3	QL	temazepam oral capsule 15 mg, 30 mg, 7.5 mg	1	QL
eszopiclone	1	QL	temazepam oral capsule 22.5 mg	3	QL
flurazepam hcl	1	QL	zaleplon	1	QL
LUNESTA	3	QL	zolpidem tartrate er	3	QL
modafinil oral	1		ZOLPIDEM TARTRATE ORAL CAPSULE	3	PA; QL
NUVIGIL	3		zolpidem tartrate oral tablet	1	QL
PROVIGIL	3		zolpidem tartrate sublingual	3	QL
QUVIVIQ	3	PA; QL			
ramelteon	3				
RESTORIL	3	QL			
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Notice of Nondiscrimination

Kaiser Foundation Health Plan of Washington and Kaiser Foundation Health Plan of Washington Options, Inc. (“Kaiser Permanente”) complies with applicable Federal and Washington state civil rights laws and does not discriminate on the basis of race, color, national origin, age, disability, sex, sexual orientation, or gender identity. Kaiser Permanente does not exclude people or treat them less favorably because of race, color, national origin (including limited English proficiency and primary language), age, disability, sex, sex characteristics (including intersex traits), pregnancy (or related conditions), sex stereotypes, sexual orientation, or gender identity. We also:

- Provide people with disabilities reasonable modifications and free appropriate auxiliary aids and services to communicate effectively with us, such as:
 - Qualified sign language interpreters
 - Written information in other formats (large print, braille, audio, accessible electronic formats, other formats)
- Provide free language assistance services to people whose primary language is not English, which may include:
 - Qualified interpreters
 - Information written in other languages

If you need reasonable modifications, appropriate auxiliary aids and services, or language assistance services, contact Member Services at **1-888-901-4636** (TTY **711**).

If you believe that Kaiser Permanente has failed to provide these services or discriminated in another way on the basis of race, color, national origin (including limited English proficiency and primary language), age, disability, sex, sex characteristics (including intersex traits), pregnancy (or related conditions), sex stereotypes, sexual orientation, or gender identity, you can file a grievance with our Civil Rights Coordinator at P.O. Box 35191, Mail Stop: RCR-A1N-22, Seattle, WA 98124-5191 or by calling **1-888-901-4636** (TTY **711**). You can file a grievance in person or by mail, phone, or online at **kp.org/wa/feedback**. If you need help filing a grievance, our Civil Rights Coordinator is available to help you.

You can also file a civil rights complaint with:

- The U.S. Department of Health and Human Services, Office for Civil Rights, electronically through the Office for Civil Rights Complaint Portal, available at **<https://ocrportal.hhs.gov/ocr/portal/lobby.jsf>**, or by mail or phone at: U.S. Department of Health and Human Services, 200 Independence Avenue SW, Room 509F HHH Building, Washington, DC 20201; **1-800-368-1019, 800-537-7697** (TDD). Complaint forms are available at **<http://www.hhs.gov/ocr/office/file/index.html>**
- The Washington State Office of the Insurance Commissioner, electronically through the Office of the Insurance Commissioner Complaint portal available at **<https://www.insurance.wa.gov/file-complaint-or-check-your-complaint-status>**, or by phone at **800-562-6900, 360-586-0241** (TDD). Complaint forms are available at **<https://fortress.wa.gov/oic/onlineservices/cc/pub/complaintinformation.aspx>**

Multi-language Interpreter Services

English: ATTENTION: If you speak a language other than English, language assistance services, free of charge, are available to you. Call **1-888-901-4636 (TTY 711)**.

Español (Spanish): ATENCIÓN: Si habla español, tiene disponibles servicios de ayuda con el idioma sin cargo. Llame al **1-888-901-4636 (TTY 711)**.

中文 (Chinese) : 注意：如果您說中文，您可以免費獲得語言援助服務。請致電 **1-888-901-4636 (TTY 711)**。

Tiếng Việt (Vietnamese): CHÚ Ý: Nếu quý vị nói tiếng Việt, quý vị có thể sử dụng dịch vụ hỗ trợ ngôn ngữ miễn phí của chúng tôi. Xin gọi số **1-888-901-4636 (TTY 711)**.

한국어 (Korean): 참고: 한국어를 사용하시는 경우, 언어 지원 서비스를 무료로 제공해 드립니다. **1-888-901-4636(TTY 711)**번으로 문의하십시오.

Русский (Russian): ВНИМАНИЕ! Если вы говорите по-русски, вам доступны бесплатные услуги переводчика. Звоните по номеру **1-888-901-4636 (TTY 711)**.

Tagalog: PAUNAWA: Kung nagsasalita ka ng Tagalog, maaari kang gumamit ng mga serbisyo ng tulong sa wika nang walang bayad. Tumawag sa **1-888-901-4636 (TTY 711)**.

Українська (Ukrainian): УВАГА! Якщо ви розмовляєте українською мовою, вам доступні безкоштовні послуги перекладу. Телефонуйте за номером **1-888-901-4636 (TTY 711)**.

ភាសាខ្មែរ (Khmer): សូមយកចិត្តទុកដាក់៖ ប្រសិនបើអ្នកនិយាយភាសាខ្មែរ សេវាកម្មជំនួយផ្នែកភាសាដោយមិនគិតថ្លៃគឺមានសម្រាប់អ្នក។ ទូរស័ព្ទទៅលេខ **1-888-901-4636 (TTY 711)**។

日本語 (Japanese): 注意事項 : 無料の日本語での言語サポートをご利用いただけます。**1-888-901-4636 (TTY 711)** まで、お電話にてご連絡ください。

አማርኛ (Amharic): ማሳሰቢያ፡ የሚናገሩት ቋንቋ አማርኛ ከሆነ የትርጉም አገዛ አገልግሎቶች፡ በነጻ ለእርስዎ ይቀርባሉ፡፡ ወደ **1-888-901-4636 (TTY 711)** ይደውሉ፡፡

Oromiffa (Oromo): XIYYEEFFANNAA: Afaan dubbattu Oroomiffa yoo ta'e, tajaajila gargaarsa afaanii, kanfaltiidhaan ala, ni argama. **1-888-901-4636 (TTY 711)** irraatti bilbilaa.

ਪੰਜਾਬੀ (Punjabi): ਧਿਆਨ ਦਿਓ: ਜੇ ਤੁਸੀਂ ਪੰਜਾਬੀ ਬੋਲਦੇ ਹੋ, ਤਾਂ ਭਾਸ਼ਾ ਸਹਾਇਤਾ ਸੇਵਾਵਾਂ ਤੁਹਾਡੇ ਲਈ ਮੁਫਤ ਉਪਲਬਧ ਹਨ। **1-888-901-4636 (TTY 711)** 'ਤੇ ਕਾਲ ਕਰੋ।

العربية (Arabic): انتباه: إذا كنت تتحدث اللغة العربية، فإن خدمات المساعدة اللغوية، متوفرة لك، مجاناً. اتصل بالرقم **1-888-901-4636 (TTY 711)**

Deutsch (German): ACHTUNG: Wenn Sie Deutsch sprechen, stehen Ihnen kostenlos sprachliche Hilfsdienstleistungen zur Verfügung. Rufnummer: **1-888-901-4636 (TTY 711)**.

ພາສາລາວ (Lao): ໂປດຊາບ: ຖ້າວ່າທ່ານເວົ້າພາສາລາວ, ແມ່ນຈະມີການບໍລິການຊ່ວຍເຫຼືອດ້ານພາສາໃດຍັບໍ່ເສຍຄ່າໃຫ້ແກ່ທ່ານ. ໂທ **1-888-901-4636 (TTY 711)**.

International Symbol for ASL (American Sign Language):

