



2026

Formulary

EFFECTIVE JANUARY 1, 2026



Formulary Introduction

FORMULARY

The Ambetter Formulary, or Prescription Drug List, is a guide to available brand and generic drugs that are approved by the Food and Drug Administration (FDA) and covered through your prescription drug benefit. Generic drugs have the same active ingredients as their brand name counterparts and should be considered the first line of treatment. The FDA requires generics to be safe and work the same as brand name drugs. If there is no generic available, there may be more than one brand name drug to treat a condition. Preferred brand name drugs are listed on Tier 2 to help identify brand drugs that are clinically appropriate, safe, and cost-effective treatment options, if a generic medication on the formulary is not suitable for your condition.

Please note, the Formulary is not meant to be a complete list of the drugs covered under your prescription benefit. Not all dosage forms or strengths of a drug may be covered. This list is periodically reviewed and updated and may be subject to change. Drugs may be added or removed, or additional requirements may be added in order to approve continued usage of a specific drug.

Specific prescription benefit plan designs may not cover certain products or categories, regardless of their appearance in this document. Please check your benefits for coverage limitations and your share of cost for your drugs.

Drug List Key:

Brand name drugs are listed in CAPS and generic drugs are lower case.

Drugs are covered under different copay tiers depending on your benefit:

- Tier 0** - No copayment for those drugs that are used for prevention and are mandated by the Affordable Care Act. Select oral contraceptives, vitamin D, folic acid for women of child bearing age, over-the-counter (OTC) aspirin, and smoking cessation products may be covered under this tier. Certain age limits may apply.
- Tier 1_A** - Lowest copayment for select drugs that offer the greatest value compared to other drugs used to treat similar conditions. Select over-the-counter (OTC) drugs may be covered under this tier.
- Tier 1_B** - Low copayment for those drugs that offer great value compared to other drugs used to treat similar conditions. Select over-the-counter (OTC) drugs may be covered under this tier.
- Tier 2** - Medium copayment covers brand name drugs that are generally more affordable, or may be preferred compared to other drugs to treat the same conditions.
- Tier 3** - High copayment covers higher cost brand name and non-preferred generic drugs. This tier may also cover non-specialty drugs that are not on the Prescription Drug List but approval has been granted for coverage.
- Tier 4** - Highest copayment is for "specialty" drugs used to treat complex, chronic conditions that may require special handling, storage or clinical management. Prescription drugs covered under the specialty tier may require fulfillment at a pharmacy that participates in Ambetter's "specialty" or "hemophilia" networks. For additional information on which pharmacies are within our "specialty" or "hemophilia" networks, please consult Ambetter website's pharmacy information section.

Prior Authorization for Non-Formulary Drugs

To obtain prior authorization for a non-formulary drug, your provider must fill out the Prior Authorization form. Services will respond via fax or phone within 24 hours of receipt of all necessary information for urgent requests, and within 72 hours for non-urgent requests, unless state law requires faster response. If the request is disapproved, the notice of disapproval will contain a clear explanation of the specific reasons for disapproving the prior authorization request, or if the request was incomplete, the explanation will identify the missing material information that is necessary to complete the request.

Formulary Abbreviations:

Abbreviation	Term	What it means
AL	Age Limit	Some drugs are only covered for certain ages.
QL	Quantity Limit	Some drugs are only covered for a certain amount.
PA	Prior Authorization	Your doctor must ask for approval from Ambetter before some drugs will be covered.
ST	Step Therapy	In some cases, you must first try certain drugs before Ambetter covers another drug for your medical condition. For example, if Drug A and Drug B both treat your medical condition, Ambetter may not cover Drug B unless you try Drug A first.
NF	Non-formulary	This product is not covered unless you or your provider request an exception. Alternative medications are listed next to non-covered product
RX/OTC	Prescription and OTC	These drugs are made in both prescription form and Over-the-counter (OTC) form.
SP	Specialty Drug	These products are Specialty Drugs that may have special fill requirements.
SF	Split Fill	Initially, certain medications may only be available in 15-day-supply increments until you are stabilized on the medication. After you have been taking the medication for 90 days, this restriction may no longer apply.
D/D+/C	Not applicable	Medications on the formulary with D/D+/C may take alternative copays for certain benefit designs. Please consult your benefit documents for more information.

Opioid Medications:

Medications identified on the formulary by "New starts limited to 7 day supply" allow up to two 7 day fills during any 28 day period and up to a total of 28 day non-consecutive supply in any 90 day period. This limit applies cumulatively to all opioid medications filled. For fills exceeding these limits, your providers may submit a Prior Authorization request.

Introducción al Formulario

FORMULARIO

El Formulario de Ambetter, o la Lista de medicamentos recetados, es una guía de los medicamentos de marca y genéricos disponibles que están aprobados por la Administración de Alimentos y Medicamentos (FDA) y que están cubiertos a través de su beneficio de medicamentos recetados. Los medicamentos genéricos tienen los mismos principios activos que los de marca y deben considerarse la primera línea de tratamiento. La FDA exige que los medicamentos genéricos sean seguros y funcionen igual que los medicamentos de marca. Si no hay un genérico disponible, podría haber más de un medicamento de marca para tratar una condición. Los medicamentos de marca preferidos figuran en el nivel 2 para ayudar a identificar los medicamentos de marca que son opciones de tratamiento clínicamente adecuadas, seguras y rentables, si un medicamento genérico del Formulario no es adecuado para su condición.

Tenga en cuenta que el Formulario no pretende ser una lista completa de los medicamentos cubiertos por su beneficio de medicamentos recetados. Es posible que no estén cubiertas todas las formas farmacéuticas o concentraciones de un medicamento. Esta lista se revisa y actualiza periódicamente y puede estar sujeta a cambios. Se pueden agregar o eliminar medicamentos, o se pueden incorporar requisitos adicionales para aprobar el uso continuado de un medicamento específico.

Es posible que determinados diseños de planes de beneficios de medicamentos recetados no cubran algunos productos o categorías, independientemente de que figuren en este documento. Revise sus beneficios para conocer las limitaciones de la cobertura y la parte que le corresponde pagar por sus medicamentos.

Clave de la lista de medicamentos:

Los medicamentos de marca aparecen en MAYÚSCULAS y los medicamentos genéricos aparecen en minúsculas.

Los medicamentos están cubiertos por diferentes niveles de copago en función de su beneficio:

- Nivel 0** - Sin copago para aquellos medicamentos que se usan para prevención y son obligatorios según la Ley de Cuidado de Salud Asequible. Los anticonceptivos orales seleccionados, la vitamina D, el ácido fólico para mujeres en edad fértil, las aspirinas de venta libre (OTC) y los productos para dejar de fumar pueden estar cubiertos en este nivel. Es posible que se apliquen ciertos límites de edad.
- Nivel 1_A** - El copago más bajo para medicamentos seleccionados que ofrecen el mayor valor en comparación con otros medicamentos utilizados para tratar condiciones similares. Ciertos medicamentos de venta libre (OTC) seleccionados pueden estar cubiertos en este nivel.
- Nivel 1_B** - Copago bajo para aquellos medicamentos que ofrecen un gran valor en comparación con otros medicamentos utilizados para tratar condiciones similares. Ciertos medicamentos de venta libre (OTC) seleccionados pueden estar cubiertos en este nivel.
- Nivel 2** - El copago medio cubre los medicamentos de marca que suelen ser más asequibles o que pueden ser preferidos en comparación con otros medicamentos para tratar las mismas condiciones.
- Nivel 3** - El copago alto cubre los medicamentos de marca de costo más alto y medicamentos genéricos no preferidos. Este nivel también puede cubrir medicamentos no especializados que no figuran en la Lista de medicamentos recetados, pero cuya cobertura ha sido aprobada.
- Nivel 4** - El copago más alto es para medicamentos “de especialidad” usados para tratar condiciones crónicas complejas que pueden requerir una manipulación, almacenamiento o administración clínica especiales. Los medicamentos recetados cubiertos en el nivel de especialidad pueden tener que ser surtidos en una farmacia que participe de las redes de “especialidad” o de “hemofilia” de Ambetter. Para obtener información adicional sobre qué farmacias están dentro de nuestras redes de “especialidad” o “hemofilia”, debe consultar la sección de información farmacéutica del sitio web de Ambetter.

Autorización previa para medicamentos no incluidos en el Formulario

Para obtener autorización previa para un medicamento no incluido en el Formulario, su proveedor debe completar el formulario de autorización previa. Los servicios responderán por fax o teléfono en un plazo de 24 horas a partir de la recepción de toda la información necesaria para las solicitudes urgentes, y en un plazo de 72 horas en caso de solicitudes no urgentes, a menos que la legislación estatal exija una respuesta más rápida. Si la solicitud es denegada, el aviso de la denegación incluirá una explicación clara de los motivos específicos para denegar la solicitud de autorización previa, o si la autorización estaba incompleta, la explicación identificará la información material faltante necesaria para completar la solicitud.

Abreviaturas del Formulario:

Abreviatura	Plazo	Significado
AL	Límite de edad	Algunos medicamentos solo están cubiertos para determinadas edades.
QL	Límite de cantidad	Algunos medicamentos solo están cubiertos para determinadas cantidades.
PA	Autorización previa	Su médico debe solicitar la aprobación de Ambetter antes de que algunos medicamentos tengan cobertura.
ST	Terapia escalonada	En algunos casos, usted primero debe probar un medicamento determinado antes de que Ambetter cubra otro medicamento para su condición médica. Por ejemplo, si tanto el medicamento A como el medicamento B tratan su condición médica, Ambetter podría no cubrir el medicamento B a menos que usted pruebe primero el medicamento A.
NF	No incluido en el Formulario	Este producto no está cubierto a menos que usted o su proveedor soliciten una excepción. Hay medicamentos alternativos que figuran a continuación del producto no cubierto.
RX/OTC	Medicamentos recetados y OTC	Estos medicamentos se fabrican tanto como medicamento recetado como de venta libre (OTC).
SP	Medicamento de especialidad	Estos productos son medicamentos de especialidad que pueden tener requisitos de surtido especiales.
SF	Surtido dividido	Al principio es posible que ciertos medicamentos solo estén disponibles en suministros incrementales cada 15 días hasta que usted se estabilice con el medicamento. Una vez transcurridos 90 días desde que comenzó a tomar este medicamento, es posible que esta restricción ya no se aplique.
D/D+/C	No se aplica	Los medicamentos que aparecen en el Formulario con los símbolos D/ D+/C pueden conllevar copagos alternativos para ciertos diseños de beneficio. Consulte sus documentos sobre los beneficios para obtener más información.

Medicamentos opioides:

Los medicamentos identificados en el Formulario como “Nuevos pedidos limitados a suministro de 7 días” permiten hasta dos surtidos de 7 días durante cualquier periodo de 28 días y hasta un total de 28 días no consecutivos en un periodo de 90 días. Este límite se aplica de forma acumulativa a todos los medicamentos opioides surtidos. Para surtidos que superen estos límites, sus proveedores pueden presentar una solicitud de autorización previa.

Drug Name	Drug Tier	Requirements/ Limits
ADHD/ANTI-NARCOLEPSY/ANTI-OBESITY/ANOREXIANTS - Drugs to Treat ADHD, Sleep and Eating Disorders		
Amphetamines		
<i>amphetamine sulfate TABS</i>	3	PA
<i>amphetamine-dextroamphetamine CP24 5 MG, 10 MG</i>	1B	QL(1 EA daily)
<i>amphetamine-dextroamphetamine CP24 20 MG, 25 MG, 30 MG</i>	1B	QL(2 EA daily)
<i>amphetamine-dextroamphetamine CP24 15 MG</i>	1B	
<i>amphetamine-dextroamphetamine TABS 30 MG</i>	1B	QL(2 EA daily)
<i>amphetamine-dextroamphetamine TABS 5 MG, 7.5 MG, 10 MG, 12.5 MG, 15 MG, 20 MG</i>	1B	QL(3 EA daily)
<i>dextroamphetamine sulfate CP24 5 MG</i>	1B	
<i>dextroamphetamine sulfate CP24 10 MG, 15 MG</i>	1B	QL(4 EA daily)
<i>dextroamphetamine sulfate TABS 2.5 MG, 7.5 MG, 15 MG, 20 MG, 30 MG</i>	1B	
<i>dextroamphetamine sulfate TABS 5 MG, 10 MG</i>	1B	QL(4 EA daily)
<i>lisdexamfetamine dimesylate CAPS</i>	1B	QL(1 EA daily); ST
<i>lisdexamfetamine dimesylate CHEW</i>	1B	QL(1 EA daily); ST
<i>methamphetamine hcl</i>	1B	QL(5 EA daily); AL(At least 6 yrs old)
Anorexiants Non-Amphetamine		

Drug Name	Drug Tier	Requirements/ Limits
<i>phendimetrazine tartrate TABS</i>	1B	PA
<i>phentermine hcl CAPS</i>	1B	PA
Attention-Deficit/Hyperactivity Disorder (ADHD) Agents		
<i>atomoxetine hcl 10 MG, 18 MG, 25 MG, 40 MG</i>	1B	QL(2 EA daily); AL(At least 6 yrs old)
<i>atomoxetine hcl 60 MG, 80 MG, 100 MG</i>	1B	QL(1 EA daily); AL(At least 6 yrs old)
<i>clonidine hcl (adhd) TB12</i>	1B	
<i>guanfacine hcl (adhd)</i>	1B	QL(1 EA daily); AL(At least 6 yrs old)
Dopamine and Norepinephrine Reuptake Inhibitors (DNRI)		
<i>SUNOSI 150 MG</i>	3	QL(1 EA daily); PA
<i>SUNOSI 75 MG</i>	3	QL(2 EA daily); PA
Stimulants - Misc.		
<i>armodafinil</i>	1B	QL(1 EA daily); AL(At least 17 yrs old); PA
<i>dexmethylphenidate hcl CP24</i>	1B	QL(1 EA daily)
<i>dexmethylphenidate hcl TABS</i>	1B	QL(2 EA daily); AL(At least 6 yrs old)
<i>methylphenidate hcl CHEW 2.5 MG</i>	1B	QL(2 EA daily)
<i>methylphenidate hcl CHEW 5 MG</i>	1B	QL(6 EA daily)
<i>methylphenidate hcl CHEW 10 MG</i>	1B	QL(5 EA daily)
<i>methylphenidate hcl CP24 30 MG</i>	1B	QL(2 EA daily); AL(At least 6 yrs old)
<i>methylphenidate hcl CP24</i>	1B	QL(1 EA daily)
<i>methylphenidate hcl CP24 10 MG, 20 MG, 40 MG, 60 MG</i>	1B	QL(1 EA daily); AL(At least 6 yrs old)

Drug Name	Drug Tier	Requirements/ Limits
<i>methylphenidate hcl CPCR</i>	1B	QL(1 EA daily); AL(At least 6 yrs old)
<i>methylphenidate hcl SOLN</i>	1B	QL(30 ML daily); AL(At least 6 yrs old)
<i>methylphenidate hcl TABS 5 MG</i>	1B	QL(6 EA daily); AL(At least 6 yrs old)
<i>methylphenidate hcl TABS 10 MG, 20 MG</i>	1B	QL(5 EA daily); AL(At least 6 yrs old)
<i>methylphenidate hcl TB24 18 MG, 27 MG</i>	1B	QL(1 EA daily); AL(At least 6 yrs old)
<i>methylphenidate hcl TB24 36 MG, 54 MG</i>	1B	QL(2 EA daily); AL(At least 6 yrs old)
<i>methylphenidate hcl TBCR 18 MG, 27 MG</i>	1B	QL(1 EA daily); AL(At least 6 yrs old)
<i>methylphenidate hcl TBCR 36 MG, 54 MG</i>	1B	QL(2 EA daily); AL(At least 6 yrs old)
<i>methylphenidate hcl TBCR 10 MG, 20 MG</i>	1B	QL(3 EA daily); AL(At least 6 yrs old)
<i>methylphenidate PTCH</i>	1B	QL(1 EA daily); PA
<i>modafinil 100 MG</i>	1B	QL(1 EA daily); PA
<i>modafinil 200 MG</i>	1B	QL(2 EA daily); PA
ALLERGENIC EXTRACTS/BIOLOGICALS MISC		
Allergenic Extracts		
GRASSTK SUBL	3	PA
AMINOGLYCOSIDES - Drugs to Treat Bacterial Infections		
Aminoglycosides		
<i>amikacin sulfate SOLN 1 GM/4ML, 500 MG/2ML</i>	1B	
ARIKAYCE	4	PA

Drug Name	Drug Tier	Requirements/ Limits
<i>gentamicin in saline 0.8 MG/ML-0.9 %, 1 MG/ML-0.9 %, 1.2 MG/ML-0.9 %, 1.6 MG/ML-0.9 %</i>	1B	
<i>gentamicin sulfate IJ 40 MG/ML</i>	1B	
<i>neomycin sulfate TABS</i>	1B	
<i>streptomycin sulfate SOLR</i>	3	
<i>tobramycin NEBU</i>	4	QL(280 ML per 56 day(s) retail; 280 ML per 56 days mail); PA
ANALGESICS - ANTI-INFLAMMATORY - Drugs to Treat Pain, Swelling, Muscle and Joint Conditions		
Antirheumatic - Enzyme Inhibitors		
RINVOQ LQ SOLN	4	QL(12 ML daily); PA
RINVOQ TB24	4	QL(1 EA daily); PA
XELJANZ XR TB24	4	QL(1 EA daily); PA
XELJANZ SOLN	4	QL(20 ML daily); PA
XELJANZ TABS 10 MG	4	QL(2 EA daily); PA
XELJANZ TABS 5 MG	4	QL(2 EA daily); SP; PA
Antirheumatic Antimetabolites		
OTREXUP SOAJ 10 MG/0.4ML, 12.5 MG/0.4ML, 15 MG/0.4ML, 17.5 MG/0.4ML, 20 MG/0.4ML, 22.5 MG/0.4ML, 25 MG/0.4ML	3	PA
RASUVO SOAJ 7.5 MG/0.15ML, 10 MG/0.2ML, 12.5 MG/0.25ML, 15 MG/0.3ML, 17.5 MG/0.35ML, 20 MG/0.4ML, 22.5 MG/0.45ML, 25 MG/0.5ML, 30 MG/0.6ML	3	PA
Anti-TNF-alpha - Monoclonal Antibodies		

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
ADALIMUMAB-AATY (1 PEN) AJKT 80 MG/0.8ML	4	QL(0.143 EA daily); 1 max fill(s) per 180 day(s) retail; 1 max fill(s) per 180 day(s) mail; PA	HUMIRA-CD/UC/HS STARTER AJKT	4	1 package(s) per 180 day(s) retail; 1 package(s) per 180 day(s) mail; PA
ADALIMUMAB-AATY (1 PEN) AJKT 40 MG/0.4ML	4	QL(0.143 EA daily); PA	HUMIRA-PED<40KG CROHNS STARTER PSKT	4	1 package(s) per 180 day(s) retail; 1 package(s) per 180 day(s) mail; PA
ADALIMUMAB-AATY (2 PEN) AJKT	4	QL(0.143 EA daily); PA	HUMIRA-PED>=40KG CROHNS START PSKT	4	1 package(s) per 180 day(s) retail; 1 package(s) per 180 day(s) mail; PA
ADALIMUMAB-AATY (2 SYRINGE) PSKT	4	QL(0.143 EA daily); PA	HUMIRA-PED>=40KG UC STARTER AJKT	4	1 package(s) per 180 day(s) retail; 1 package(s) per 180 day(s) mail; PA
ADALIMUMAB-AATY CD/UC/HS START AJKT 80 MG/0.8ML	4	QL(0.143 EA daily); 1 max fill(s) per 180 day(s) retail; 1 max fill(s) per 180 day(s) mail; PA	HUMIRA-PS/UV/ADOL HS STARTER AJKT	4	1 package(s) per 180 day(s) retail; 1 package(s) per 180 day(s) mail; PA
ADALIMUMAB-ADAZ SOAJ 80 MG/0.8ML	4	QL(0.0143 ML daily); PA	HUMIRA-PSORIASIS/UEIT STARTER AJKT	4	1 package(s) per 180 day(s) retail; 1 package(s) per 180 day(s) mail; PA
ADALIMUMAB-ADAZ SOAJ 40 MG/0.4ML	4	QL(0.143 ML daily); PA	SIMLANDI (1 PEN) AJKT	4	QL(0.143 EA daily); PA
ADALIMUMAB-ADAZ SOSY	4	QL(0.143 ML daily); PA	SIMLANDI (1 SYRINGE) PSKT	4	QL(0.143 EA daily); PA
ADALIMUMAB-ADBM (2 PEN) AJKT	4	QL(0.143 EA daily); PA	SIMLANDI (2 PEN) AJKT	4	QL(0.143 EA daily); PA
ADALIMUMAB-ADBM (2 SYRINGE) PSKT	4	QL(0.143 EA daily); PA	SIMLANDI (2 SYRINGE) PSKT	4	QL(0.143 EA daily); PA
ADALIMUMAB-ADBM(CD/UC/HS STRT) AJKT	4	QL(0.143 EA daily); PA	SIMPONI ARIA SOLN	4	PA
ADALIMUMAB-ADBM(PS/UV STARTER) AJKT	4	QL(0.143 EA daily); PA	YUFLYMA (1 PEN) AJKT 40 MG/0.4ML	4	QL(0.143 EA daily); PA
ADALIMUMAB-RYVK (1 PEN) AJKT 80 MG/0.8ML	4	QL(0.143 EA daily); PA			
HUMIRA (2 PEN) AJKT 80 MG/0.8ML	4	QL(0.072 EA daily); PA			
HUMIRA (2 PEN) AJKT	4	QL(0.143 EA daily); PA			
HUMIRA (2 SYRINGE) PSKT	4	QL(0.143 EA daily); PA			

Drug Name	Drug Tier	Requirements/ Limits
YUFLYMA (1 PEN) AJKT 80 MG/0.8ML	4	QL(0.143 EA daily); 1 max fill(s) per 180 day(s) retail; 1 max fill(s) per 180 day(s) mail; PA
YUFLYMA (2 PEN) AJKT	4	QL(0.143 EA daily); PA
YUFLYMA (2 SYRINGE) PSKT	4	QL(0.143 EA daily); PA
YUFLYMA-CD/UC/HS STARTER AJKT	4	QL(0.143 EA daily); 1 max fill(s) per 180 day(s) retail; 1 max fill(s) per 180 day(s) mail; PA
Gold Compounds		
AURANOFIN 3 MG	3	QL(3 EA daily)
RIDAURA	3	QL(3 EA daily)
Interleukin-1 Blockers		
ARCALYST	4	QL(0.286 EA daily); SP; PA
Interleukin-6 Receptor Inhibitors		
ACTEMRA ACTPEN SOAJ	4	QL(3.6 ML per 28 day(s) retail; 4 ML per 28 days mail); SP; PA
ACTEMRA SOLN 80 MG/4ML	4	QL(20 ML per 28 day(s) retail; 20 ML per 28 days mail); SP; PA
ACTEMRA SOLN 200 MG/10ML, 400 MG/20ML	4	QL(40 ML per 28 day(s) retail; 40 ML per 28 days mail); SP; PA
ACTEMRA SOSY	4	QL(3.6 ML per 28 day(s) retail; 4 ML per 28 days mail); SP; PA

Drug Name	Drug Tier	Requirements/ Limits
KEVZARA SOAJ	4	QL(0.082 ML daily); PA
KEVZARA SOSY	4	QL(0.082 ML daily); PA
Nonsteroidal Anti-inflammatory Agents (NSAIDs)		
<i>celecoxib</i>	1B	QL(2 EA daily)
<i>diclofenac potassium TABS 50 MG</i>	1B	
<i>diclofenac sodium TB24</i>	1B	
<i>diclofenac sodium TBEC</i>	1B	
<i>diclofenac w/ misoprostol TBEC</i>	1B	
<i>etodolac CAPS</i>	1B	
<i>etodolac TABS</i>	1B	
<i>fenoprofen calcium TABS</i>	1B	QL(4 EA daily); ST
<i>flurbiprofen TABS</i>	1B	
<i>ibuprofen SUSP 100 MG/5ML, 200 MG/10ML</i>	1B	RX/OTC
<i>ibuprofen TABS 800 MG</i>	1B	
<i>ibuprofen TABS 400 MG, 600 MG</i>	1A	
<i>indomethacin CAPS 25 MG, 50 MG</i>	1B	
<i>indomethacin CPCR</i>	1B	
<i>ketoprofen CAPS 50 MG</i>	1B	
<i>ketorolac tromethamine TABS</i>	1B	QL(0.667 EA daily)
<i>meclofenamate sodium CAPS</i>	1B	
<i>mefenamic acid CAPS</i>	1B	Must try ibuprofen. ; QL(5 EA daily); ST
<i>meloxicam TABS</i>	1A	QL(1 EA daily)
<i>nabumetone</i>	1B	
<i>naproxen sodium TABS 550 MG</i>	1B	
<i>naproxen SUSP</i>	1B	PA
<i>naproxen TABS</i>	1B	
<i>naproxen TBEC 500 MG</i>	1B	QL(3 EA daily)

Drug Name	Drug Tier	Requirements/ Limits
<i>oxaprozin TABS</i>	1B	
<i>piroxicam CAPS</i>	1B	
<i>sulindac TABS</i>	1B	
<i>tolmetin sodium CAPS</i>	1B	
<i>tolmetin sodium TABS 600 MG</i>	1B	
Phosphodiesterase 4 (PDE4) Inhibitors		
<i>OTEZLA TABS</i>	4	QL(2 EA daily); PA
<i>OTEZLA TBPk</i>	4	1 package(s) per 180 day(s) retail; PA
<i>OTEZLA TBPk</i>	4	1 max fill(s) per 180 day(s) retail; 1 max fill(s) per 180 day(s) mail; PA
Pyrimidine Synthesis Inhibitors		
<i>leflunomide</i>	1B	QL(1 EA daily)
Soluble Tumor Necrosis Factor Receptor Agents		
<i>ENBREL MINI SOCT</i>	4	QL(0.146 ML daily); PA
<i>ENBREL SURECLICK SOAJ</i>	4	QL(0.146 ML daily); PA
<i>ENBREL SOLN</i>	4	QL(0.146 ML daily); PA
<i>ENBREL SOSY 25 MG/0.5ML</i>	4	QL(0.146 ML daily); PA
<i>ENBREL SOSY 50 MG/ML</i>	4	QL(0.286 ML daily); SP; PA
ANALGESICS - NonNarcotic - Drugs to Treat Pain, Muscle and Joint Conditions		
Analgesic Combinations		
<i>butalbital-acetaminophen-caffeine CAPS 40 MG-50 MG-300 MG</i>	1B	QL(6 EA daily)
<i>butalbital-acetaminophen-caffeine CAPS 40 MG-50 MG-325 MG</i>	1B	

Drug Name	Drug Tier	Requirements/ Limits
<i>butalbital-acetaminophen-caffeine TABS 40 MG-50 MG-325 MG</i>	1B	QL(6 EA daily)
<i>butalbital-acetaminophen TABS 50 MG-325 MG</i>	1B	QL(6 EA daily)
<i>butalbital-aspirin-caffeine CAPS</i>	1B	QL(4 EA daily)
Salicylates		
<i>aspirin CHEW</i>	0	AL(At least 45 yrs old - Up to 79 yrs old)
<i>aspirin TABS 325 MG</i>	0	AL(At least 45 yrs old - Up to 79 yrs old)
<i>aspirin TBEC 325 MG</i>	1A	
<i>aspirin TBEC 81 MG</i>	0	AL(At least 45 yrs old - Up to 79 yrs old)
<i>diflunisal TABS</i>	1B	
<i>salsalate</i>	1B	
ANALGESICS - OPIOID - Drugs to Treat Pain, Muscle and Joint Conditions		
Opioid Agonists		
<i>codeine sulfate TABS 30 MG</i>	1B	New starts limited to 7 day supply
<i>CODEINE SULFATE TABS</i>	1B	New starts limited to 7 day supply
<i>fentanyl citrate LPOP</i>	1B	QL(4 EA daily); PA
<i>fentanyl PT72 12 MCG/HR, 25 MCG/HR, 50 MCG/HR, 75 MCG/HR, 100 MCG/HR</i>	1B	QL(0.34 EA daily)
<i>hydrocodone bitartrate CP12</i>	3	QL(2 EA daily); PA
<i>hydrocodone bitartrate T24A</i>	3	QL(2 EA daily); PA
<i>hydromorphone hcl LIQD</i>	1B	New starts limited to 7 day supply

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
<i>hydromorphone hcl SOLN IJ 10 MG/ML, 50 MG/5ML, 500 MG/50ML</i>	1B		<i>morphine sulfate SOLN PO 10 MG/5ML</i>	1B	New starts limited to 7 day supply; QL(100 ML daily)
<i>hydromorphone hcl TABS</i>	1B	New starts limited to 7 day supply; QL(8 EA daily)	<i>morphine sulfate SOLN IJ 0.5 MG/ML, 1 MG/ML</i>	1B	
<i>hydromorphone hcl TB24 8 MG, 12 MG, 16 MG</i>	1B	QL(2 EA daily); PA	<i>morphine sulfate SOLN PO 20 MG/5ML</i>	1B	New starts limited to 7 day supply; QL(50 ML daily)
<i>hydromorphone hcl TB24 32 MG</i>	1B	QL(1 EA daily); PA	<i>morphine sulfate TABS</i>	1B	New starts limited to 7 day supply; QL(6 EA daily)
<i>levorphanol tartrate TABS 2 MG</i>	1B	New starts limited to 7 day supply	<i>morphine sulfate TBCR</i>	1B	QL(2 EA daily)
<i>meperidine hcl SOLN IJ 25 MG/ML, 50 MG/ML, 100 MG/ML</i>	1B		<i>oxycodone hcl T12A 10 MG, 20 MG, 40 MG, 80 MG</i>	3	QL(2 EA daily); PA
<i>meperidine hcl SOLN PO 50 MG/5ML</i>	1B	New starts limited to 7 day supply; QL(500 ML per fill retail)	<i>oxycodone hcl TABS</i>	1B	New starts limited to 7 day supply; QL(12 EA daily)
<i>meperidine hcl TABS 50 MG</i>	1B	New starts limited to 7 day supply; QL(6 EA daily)	<i>oxymorphone hcl TABS</i>	1B	QL(12 EA daily); PA
<i>methadone hcl CONC</i>	1B	QL(10 ML daily)	<i>oxymorphone hcl TB12 40 MG</i>	1B	QL(4 EA daily); PA
<i>methadone hcl SOLN PO 5 MG/5ML</i>	1B	QL(100 ML daily)	<i>oxymorphone hcl TB12 5 MG, 7.5 MG, 10 MG, 15 MG, 20 MG, 30 MG</i>	1B	QL(2 EA daily); PA
<i>methadone hcl SOLN PO 10 MG/5ML</i>	1B	QL(50 ML daily)	SUBSYS LIQD 800 MCG	3	QL(8 EA daily); PA
<i>methadone hcl SOLN IJ 10 MG/ML</i>	1B		<i>tramadol hcl TABS 50 MG</i>	1A	New starts limited to 7 day supply; QL(8 EA daily)
METHADONE HCL SOLN IJ (<i>methadone hcl</i>)	1B		<i>tramadol hcl TB24</i>	1B	QL(1 EA daily)
<i>methadone hcl TABS 10 MG</i>	1B	QL(10 EA daily)	Opioid Combinations		
<i>methadone hcl TABS 5 MG</i>	1B	QL(4 EA daily)	<i>acetaminophen w/ codeine SOLN</i>	1A	New starts limited to 7 day supply; QL(75 ML daily)
<i>methadone hcl TBSO</i>	1B	QL(2 EA daily)	<i>acetaminophen w/ codeine TABS 60 MG-300 MG</i>	1B	New starts limited to 7 day supply; QL(6 EA daily)
<i>morphine sulfate CP24 10 MG, 20 MG, 30 MG, 50 MG, 60 MG, 80 MG, 100 MG</i>	1B	QL(2 EA daily); PA			

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
<i>acetaminophen w/ codeine TABS 15 MG-300 MG</i>	1B	New starts limited to 7 day supply; QL(13 EA daily)	<i>hydrocodone-ibuprofen 10 MG-200 MG, 5 MG-200 MG</i>	1B	PA
<i>acetaminophen w/ codeine TABS 30 MG-300 MG</i>	1A	New starts limited to 7 day supply; QL(12 EA daily)	<i>hydrocodone-ibuprofen 7.5 MG-200 MG</i>	1B	New starts limited to 7 day supply; QL(5 EA daily)
<i>acetaminophen-caff-dihydrocod CAPS 30 MG-320.5 MG-16 MG</i>	1B	New starts limited to 7 day supply	<i>oxycodone w/ acetaminophen TABS 325 MG-10 MG, 325 MG-5 MG, 325 MG-7.5 MG</i>	1B	New starts limited to 7 day supply; QL(12 EA daily)
<i>acetaminophen-caff-dihydrocod CAPS 30 MG-320.5 MG-16 MG</i>	3	New starts limited to 7 day supply; PA	<i>oxycodone w/ acetaminophen TABS 325 MG-2.5 MG</i>	1B	New starts limited to 7 day supply; QL(13 EA daily)
<i>butalbital-acetaminophen-cafeine w/ codeine 30 MG-40 MG-50 MG-325 MG</i>	1B	New starts limited to 7 day supply; QL(6 EA daily)	<i>tramadol-acetaminophen</i>	1B	New starts limited to 7 day supply; QL(8 EA daily)
<i>butalbital-acetaminophen-cafeine w/ codeine 30 MG-40 MG-50 MG-300 MG</i>	1B	New starts limited to 7 day supply	Opioid Partial Agonists		
<i>butalbital-aspirin-cafeine w/cod</i>	1B	New starts limited to 7 day supply; QL(6 EA daily)	<i>buprenorphine hcl-naloxone hcl dihydrate FILM SL 0.5 MG-2 MG, 1 MG-4 MG, 2 MG-8 MG</i>	1B	QL(3 EA daily)
<i>hydrocodone-acetaminophen SOLN 325 MG/15ML-10 MG/15ML</i>	1B	New starts limited to 7 day supply	<i>buprenorphine hcl-naloxone hcl dihydrate FILM SL 3 MG-12 MG</i>	1B	QL(2 EA daily)
<i>hydrocodone-acetaminophen SOLN 108 MG/5ML-2.5 MG/5ML, 217 MG/10ML-5 MG/10ML, 325 MG/15ML-7.5 MG/15ML</i>	1B	New starts limited to 7 day supply; QL(180 ML daily)	<i>buprenorphine hcl-naloxone hcl dihydrate SUBL</i>	1B	QL(3 EA daily)
<i>hydrocodone-acetaminophen TABS 325 MG-10 MG, 325 MG-5 MG, 325 MG-7.5 MG</i>	1B	New starts limited to 7 day supply; QL(12 EA daily)	<i>buprenorphine hcl SOLN</i>	1B	
<i>hydrocodone-acetaminophen TABS 300 MG-10 MG, 300 MG-5 MG, 300 MG-7.5 MG</i>	1B	New starts limited to 7 day supply; QL(13 EA daily)	<i>buprenorphine hcl SUBL</i>	1B	QL(3 EA daily)
<i>hydrocodone-acetaminophen TABS 325 MG-2.5 MG</i>	1B	New starts limited to 7 day supply	<i>buprenorphine PTWK</i>	1B	QL(0.143 EA daily); PA
			<i>butorphanol tartrate IJ 1 MG/ML, 2 MG/ML</i>	1B	
			<i>butorphanol tartrate NA 10 MG/ML</i>	1B	QL(0.34 ML daily); PA
			<i>pentazocine w/ naloxone hcl</i>	1B	New starts limited to 7 day supply
			ANDROGENS-ANABOLIC - Drugs to Regulate Hormones		
			Androgens		

Drug Name	Drug Tier	Requirements/ Limits
ANDRODERM PT24 2 MG/24HR, 4 MG/24HR	2	QL(1 EA daily); PA
<i>danazol CAPS</i>	1B	
<i>methyltestosterone TABS</i>	1B	
<i>testosterone cypionate SOLN IM</i>	1B	
TESTOSTERONE CYPIONATE SOLN IJ 200 MG/ML	1B	
<i>testosterone enanthate SOLN IM</i>	1B	
ANORECTAL AND RELATED PRODUCTS - Rectal Drugs to Treat Pain, Swelling and Itching		
Intrarectal Steroids		
<i>budesonide (intrarectal)</i>	4	QL(3.2 GM daily); PA
<i>hydrocortisone (intrarectal)</i>	1B	
Rectal Steroids		
<i>hydrocortisone (rectal) EX</i>	1B	
<i>hydrocortisone acetate (rectal)</i>	1B	
Vasodilating Agents		
<i>nitroglycerin (intra-anal)</i>	1B	QL(2 GM daily)
ANTHELMINTICS - Drugs to Treat Worm Infections		
Anthelmintics		
<i>albendazole</i>	1B	PA
EMVERM CHEW	2	QL(2 EA daily; 6 EA per fill retail; 6 per fill mail); 1 max fill(s) per 60 day(s) retail; 1 max fill(s) per 60 day(s) mail

Drug Name	Drug Tier	Requirements/ Limits
<i>ivermectin</i>	1B	QL(9 EA per fill retail; 9 per fill mail); 1 max fill(s) per 75 day(s) retail; 1 max fill(s) per 75 day(s) mail
<i>praziquantel</i>	1B	PA
ANTIANGINAL AGENTS - Drugs to Treat Chest Pain		
Antianginals-Other		
<i>ranolazine TB12 500 MG</i>	1B	QL(3 EA daily)
<i>ranolazine TB12 1000 MG</i>	1B	QL(2 EA daily)
Nitrates		
<i>isosorbide dinitrate TABS 5 MG, 10 MG, 20 MG, 30 MG</i>	1B	
<i>isosorbide mononitrate TABS</i>	1B	
<i>isosorbide mononitrate TB24</i>	1A	
NITRO-BID OINT	3	
<i>nitroglycerin CPCR</i>	1B	QL(4 EA daily)
<i>nitroglycerin PT24</i>	1B	
NITROGLYCERIN SOLN IV	1B	
<i>nitroglycerin SUBL</i>	1B	
ANTIANSXIETY AGENTS - Drugs to Treat Anxiety		
Antianxiety Agents - Misc.		
<i>buspirone hcl 7.5 MG, 10 MG, 15 MG, 30 MG</i>	1B	
<i>buspirone hcl 5 MG</i>	1A	
<i>hydroxyzine hcl SOLN 50 MG/ML</i>	1B	
<i>hydroxyzine hcl SYRP</i>	1B	
<i>hydroxyzine hcl TABS</i>	1B	
<i>hydroxyzine pamoate CAPS</i>	1B	
<i>meprobamate</i>	1B	

Drug Name	Drug Tier	Requirements/ Limits
Benzodiazepines		
<i>alprazolam TABS 0.25 MG, 0.5 MG, 1 MG</i>	1A	QL(4 EA daily)
<i>alprazolam TABS 2 MG</i>	1B	QL(4 EA daily)
<i>alprazolam TB24</i>	1B	
<i>alprazolam TBDP</i>	1B	
<i>chlordiazepoxide hcl CAPS</i>	1B	
<i>clorazepate dipotassium TABS</i>	1B	
<i>diazepam CONC</i>	1B	
<i>diazepam SOLN PO 5 MG/5ML</i>	1B	
<i>diazepam TABS</i>	1A	QL(4 EA daily)
<i>lorazepam CONC</i>	1B	
<i>lorazepam TABS 1 MG</i>	1A	QL(4 EA daily)
<i>lorazepam TABS 0.5 MG, 2 MG</i>	1A	QL(3 EA daily)
<i>oxazepam CAPS</i>	1B	
ANTIARRHYTHMICS - Drugs to treat abnormal heart rhythms		
Antiarrhythmics Type I-A		
<i>disopyramide phosphate CAPS</i>	1B	
<i>procainamide hcl SOLN 500 MG/ML</i>	1B	
<i>quinidine sulfate TABS</i>	1B	
Antiarrhythmics Type I-B		
<i>mexiletine hcl</i>	1B	
Antiarrhythmics Type I-C		
<i>flecainide acetate</i>	1B	
<i>propafenone hcl CP12</i>	1B	
<i>propafenone hcl TABS</i>	1B	
Antiarrhythmics Type III		
<i>amiodarone hcl SOLN 150 MG/3ML</i>	1B	
<i>amiodarone hcl TABS</i>	1B	

Drug Name	Drug Tier	Requirements/ Limits
<i>dofetilide</i>	1B	
ANTIASTHMATIC AND BRONCHODILATOR AGENTS - Drugs to Treat Lung Conditions		
Antiasthmatic - Monoclonal Antibodies		
<i>FASENRA PEN SOAJ</i>	4	QL(0.036 ML daily); PA
<i>FASENRA SOSY 30 MG/ML</i>	4	QL(0.036 ML daily); PA
<i>FASENRA SOSY 10 MG/0.5ML</i>	4	QL(0.018 ML daily); PA
Anti-Inflammatory Agents		
<i>cromolyn sodium NEBU</i>	1B	C; QL(8 ML daily)
Bronchodilators - Anticholinergics		
<i>ATROVENT HFA</i>	3	QL(0.44 GM daily)
<i>INCRUSE ELLIPTA</i>	2	C; QL(1 EA daily)
<i>ipratropium bromide SOLN 0.02 %</i>	1B	C; QL(15 ML daily)
<i>SPIRIVA RESPIMAT AERS IN</i>	2	C; QL(0.14 GM daily)
<i>tiotropium bromide CAPS IN 18 MCG</i>	1B	C; QL(1 EA daily)
Leukotriene Modulators		
<i>montelukast sodium CHEW</i>	1B	C; QL(1 EA daily)
<i>montelukast sodium PACK</i>	1B	C; QL(1 EA daily)
<i>montelukast sodium TABS</i>	1B	C; QL(1 EA daily)
<i>zafirlukast</i>	1B	C; QL(2 EA daily)
<i>zileuton TB12</i>	3	QL(4 EA daily); PA
Selective Phosphodiesterase 4 (PDE4) Inhibitors		
<i>roflumilast</i>	1B	QL(1 EA daily)
Steroid Inhalants		
<i>ALVESCO</i>	3	PA

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
ARNUITY ELLIPTA 50 MCG/ACT, 200 MCG/ACT (<i>fluticasone furoate (inhalation)</i>)	2		<i>fluticasone furoate-vilanterol</i>	1B	
ARNUITY ELLIPTA 100 MCG/ACT (<i>fluticasone furoate (inhalation)</i>)	1B		<i>fluticasone-salmeterol AEPB 113 MCG/ACT-14 MCG/ACT, 232 MCG/ACT-14 MCG/ACT, 55 MCG/ACT-14 MCG/ACT</i>	1B	C
<i>budesonide (inhalation) SUSP</i>	1B	C; QL(4 ML daily); PA	<i>fluticasone-salmeterol AEPB 100 MCG/ACT-50 MCG/ACT, 250 MCG/ACT-50 MCG/ACT, 500 MCG/ACT-50 MCG/ACT</i>	1B	
<i>fluticasone furoate (inhalation) 50 MCG/ACT, 100 MCG/ACT, 200 MCG/ACT</i>	1B		<i>fluticasone-salmeterol AERO</i>	1B	C
<i>fluticasone propionate (inhalation) AEPB</i>	1B	C	<i>formoterol fumarate NEBU</i>	1B	C; QL(4 ML daily)
<i>fluticasone propionate hfa</i>	1B	C; QL(0.8 GM daily)	<i>ipratropium-albuterol SOLN</i>	1B	C; QL(18 ML daily)
PULMICORT FLEXHALER AEPB	2	C	<i>levalbuterol hcl</i>	1B	C
QVAR REDHALER	2	C	<i>levalbuterol tartrate</i>	1B	C; QL(0.5 GM daily)
Sympathomimetics			PROAIR DIGIHALER	3	
AIRDUO DIGIHALER	3		PROAIR RESPICLICK AEPB	3	
<i>albuterol sulfate AERS</i>	1B	C	SEREVENT DISKUS	2	C
<i>albuterol sulfate NEBU</i>	1B	C	STIOLTO RESPIMAT	2	C
<i>albuterol sulfate SYRP</i>	1B	C	STRIVERDI RESPIMAT	2	C
<i>albuterol sulfate TABS</i>	1B	C	<i>terbutaline sulfate SOLN</i>	1B	C
<i>arformoterol tartrate</i>	1B	C; QL(4 ML daily)	<i>terbutaline sulfate TABS</i>	1B	C
BREO ELLIPTA (<i>fluticasone furoate-vilanterol</i>)	2		TRELEGY ELLIPTA	2	C; QL(2 EA daily)
BREO ELLIPTA 50 MCG/INH-25 MCG/INH	2	C	<i>umeclidinium-vilanterol</i>	2	C; QL(2 EA daily)
BREZTRI AEROSPHERE	2	C; QL(0.38 GM daily)	Xanthines		
<i>budesonide-formoterol fumarate dihydrate</i>	1B		<i>theophylline ELIX</i>	1B	
COMBIVENT RESPIMAT AERS	2	QL(0.16 GM daily)	<i>theophylline SOLN</i>	1B	C; QL(56 ML daily)
DULERA	2	C	<i>theophylline TB12</i>	1B	C
			<i>theophylline TB24</i>	1B	C
			ANTICOAGULANTS - Blood Thinners		

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
Coumarin Anticoagulants			<i>fondaparinux sodium 10 MG/0.8ML</i>	4	QL(7.2 ML per 180 day(s) retail; 7 ML per 180 days mail); SP
<i>warfarin sodium TABS</i>	1A				
Direct Factor Xa Inhibitors			<i>fondaparinux sodium 5 MG/0.4ML</i>	4	QL(3.6 ML per 180 day(s) retail; 4 ML per 180 days mail); SP
ELIQUIS DVT/PE STARTER PACK TBPK	2	QL(2.47 EA daily); 1 max fill(s) per 180 day(s) retail	<i>fondaparinux sodium 7.5 MG/0.6ML</i>	4	QL(5.4 ML per 180 day(s) retail; 5 ML per 180 days mail); SP
ELIQUIS TABS	2	QL(2 EA daily)	FRAGMIN SOSY	4	SP; PA
<i>rivaroxaban SUSR 1 MG/ML</i>	1B	QL(900 ML per 30 day(s) retail; 900 ML per 30 days mail)	HEPARIN (PORCINE) IN NACL SOLN IV 0.45 %-12500 UNIT/250ML	1B	
<i>rivaroxaban TABS 2.5 MG</i>	1B	QL(2 EA daily)	<i>heparin sodium (porcine) SOLN IJ 5000 UNIT/ML, 10000 UNIT/ML, 20000 UNIT/ML</i>	1B	
XARELTO STARTER PACK TBPK	2	1 max fill(s) per 365 day(s) retail	Thrombin Inhibitors		
XARELTO SUSR 1 MG/ML (<i>rivaroxaban</i>)	2	QL(900 ML per 30 day(s) retail; 900 ML per 30 days mail)	<i>dabigatran etexilate mesylate CAPS</i>	1B	
XARELTO TABS 15 MG	2	QL(2 EA daily)	ANTICONVULSANTS - Drugs to Treat Seizures		
XARELTO TABS 10 MG, 20 MG	2	QL(1 EA daily)	AMPA Glutamate Receptor Antagonists		
Heparins And Heparinoid-Like Agents			<i>perampanel TABS 4 MG</i>	1B	QL(3 EA daily); PA
<i>enoxaparin sodium SOLN IJ 300 MG/3ML</i>	4	QL(6 ML daily)	<i>perampanel TABS 6 MG</i>	1B	QL(2 EA daily); PA
<i>enoxaparin sodium SOSY 40 MG/0.4ML</i>	4	QL(0.8 ML daily; 30 Day(s) limit); SP	<i>perampanel TABS 8 MG, 10 MG, 12 MG</i>	1B	QL(1 EA daily); PA
<i>enoxaparin sodium SOSY 100 MG/ML, 150 MG/ML</i>	4	QL(2 ML daily)	<i>perampanel TABS 2 MG</i>	1B	QL(6 EA daily); PA
<i>enoxaparin sodium SOSY 80 MG/0.8ML, 120 MG/0.8ML</i>	4	QL(1.6 ML daily)	Anticonvulsants - Benzodiazepines		
<i>enoxaparin sodium SOSY 30 MG/0.3ML</i>	4	QL(0.6 ML daily); SP	<i>clobazam SUSP</i>	1B	QL(16 ML daily); PA
<i>enoxaparin sodium SOSY 60 MG/0.6ML</i>	4	QL(1.2 ML daily; 30 Day(s) limit); SP	<i>clobazam TABS</i>	1B	QL(2 EA daily); PA
<i>fondaparinux sodium 2.5 MG/0.5ML</i>	4	QL(4.5 ML per 180 day(s) retail; 4 ML per 180 days mail); SP	<i>clonazepam TABS</i>	1A	

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
<i>diazepam (anticonvulsant) GEL</i>	3	5 package(s) per 30 day(s) retail; 5 package(s) per 30 day(s) mail	DIACOMIT PACK 250 MG	4	QL(12 EA daily); PA
NAYZILAM	3	QL(10 EA per 30 day(s) retail); PA	DIACOMIT PACK 500 MG	4	QL(6 EA daily); PA
VALTOCO 10 MG DOSE LIQD	4	QL(10 EA per 30 day(s) retail); PA	EPIDIOLEX	3	PA
VALTOCO 15 MG DOSE LQPK 7.5 MG/0.1ML	4	QL(10 EA per 30 day(s) retail); PA	<i>eslicarbazepine acetate 200 MG, 400 MG, 600 MG, 800 MG</i>	1B	QL(2 EA daily); ST
VALTOCO 20 MG DOSE LQPK 10 MG/0.1ML	4	QL(10 EA per 30 day(s) retail); PA	<i>gabapentin CAPS</i>	1B	
VALTOCO 5 MG DOSE LIQD	4	QL(10 EA per 30 day(s) retail); PA	<i>gabapentin SOLN</i>	1B	QL(60 ML daily)
Anticonvulsants - Misc.			<i>gabapentin TABS 600 MG, 800 MG</i>	1B	
BANZEL TABS 200 MG (<i>rufinamide</i>)	2	QL(2 EA daily); PA	<i>lacosamide SOLN IV 200 MG/20ML</i>	1B	QL(40 ML daily)
BANZEL TABS 400 MG (<i>rufinamide</i>)	2	QL(8 EA daily); PA	<i>lacosamide TABS</i>	1B	QL(2 EA daily)
BRIVIACT SOLN PO 10 MG/ML	3	QL(20 ML daily); PA	<i>lamotrigine CHEW 5 MG</i>	1B	QL(100 EA daily)
<i>carbamazepine CHEW 100 MG</i>	1B		<i>lamotrigine CHEW 25 MG</i>	1B	QL(20 EA daily)
<i>carbamazepine CP12 300 MG</i>	1B	QL(4 EA daily)	<i>lamotrigine TABS</i>	1B	
<i>carbamazepine CP12 100 MG</i>	1B		<i>lamotrigine TBDP</i>	1B	QL(1 EA daily)
<i>carbamazepine CP12 200 MG</i>	1B	QL(6 EA daily)	<i>levetiracetam SOLN IV 500 MG/5ML</i>	1B	QL(30 ML daily)
<i>carbamazepine SUSP</i>	1B		<i>levetiracetam TABS 500 MG</i>	1B	QL(6 EA daily)
<i>carbamazepine TABS</i>	1B		<i>levetiracetam TABS 250 MG, 750 MG</i>	1B	QL(4 EA daily)
<i>carbamazepine TB12 200 MG</i>	1B	QL(6 EA daily)	<i>levetiracetam TABS 1000 MG</i>	1B	QL(3 EA daily)
<i>carbamazepine TB12 100 MG, 400 MG</i>	1B	QL(4 EA daily)	<i>levetiracetam TB24</i>	1B	QL(4 EA daily)
DIACOMIT CAPS 250 MG	4	QL(12 EA daily); PA	<i>oxcarbazepine SUSP</i>	1B	QL(40 ML daily)
DIACOMIT CAPS 500 MG	4	QL(6 EA daily); PA	<i>oxcarbazepine TABS 600 MG</i>	1B	QL(4 EA daily)
			<i>oxcarbazepine TABS 150 MG, 300 MG</i>	1B	QL(3 EA daily)
			<i>pregabalin CAPS 225 MG, 300 MG</i>	1B	QL(2 EA daily); PA
			<i>pregabalin CAPS 25 MG, 50 MG, 75 MG, 100 MG, 150 MG, 200 MG</i>	1B	QL(3 EA daily); PA
			<i>pregabalin SOLN</i>	1B	QL(30 ML daily); PA

Drug Name	Drug Tier	Requirements/ Limits
<i>primidone 50 MG, 250 MG</i>	1B	
<i>rufinamide SUSP</i>	1B	QL(80 ML daily); PA
<i>rufinamide TABS 400 MG</i>	1B	QL(8 EA daily); PA
<i>rufinamide TABS 200 MG</i>	1B	QL(2 EA daily); PA
TEGRETOL SUSP (<i>carbamazepine</i>)	2	
TEGRETOL TABS (<i>carbamazepine</i>)	2	
<i>topiramate CPSP 15 MG</i>	1B	QL(6 EA daily)
<i>topiramate CPSP 25 MG</i>	1B	QL(8 EA daily)
<i>topiramate CS24</i>	3	PA
<i>topiramate TABS 25 MG, 100 MG</i>	1B	QL(4 EA daily)
<i>topiramate TABS 50 MG</i>	1B	QL(6 EA daily)
<i>topiramate TABS 200 MG</i>	1B	QL(2 EA daily)
<i>zonisamide CAPS</i>	1B	QL(6 EA daily)
Carbamates		
<i>felbamate SUSP</i>	1B	QL(30 ML daily)
<i>felbamate TABS 400 MG</i>	1B	QL(9 EA daily)
<i>felbamate TABS 600 MG</i>	1B	QL(6 EA daily)
GABA Modulators		
<i>tiagabine hcl</i>	1B	
<i>vigabatrin PACK</i>	4	QL(6 EA daily); SP; PA
<i>vigabatrin TABS</i>	4	QL(6 EA daily); SP; PA
Hydantoins		
DILANTIN (<i>phenytoin sodium extended</i>)	2	
DILANTIN	2	
DILANTIN INFATABS CHEW (<i>phenytoin</i>)	2	
DILANTIN-125 SUSP (<i>phenytoin</i>)	2	
DILANTIN SUSP (<i>phenytoin</i>)	2	

Drug Name	Drug Tier	Requirements/ Limits
<i>fosphenytoin sodium</i>	1B	
<i>phenytoin sodium extended 100 MG, 200 MG, 300 MG</i>	1B	
<i>phenytoin sodium SOLN</i>	1B	
<i>phenytoin CHEW</i>	1B	
<i>phenytoin SUSP</i>	1B	
Succinimides		
<i>ethosuximide CAPS</i>	1B	QL(6 EA daily)
<i>ethosuximide SOLN</i>	1B	QL(30 ML daily)
<i>methsuximide</i>	1B	QL(4 EA daily)
ZARONTIN CAPS (<i>ethosuximide</i>)	2	QL(6 EA daily)
Valproic Acid		
<i>divalproex sodium TB24</i>	1B	
<i>divalproex sodium TBEC</i>	1B	
<i>valproate sodium SOLN PO 250 MG/5ML, 500 MG/10ML</i>	1B	
<i>valproic acid CAPS</i>	1B	
ANTIDEPRESSANTS - Drugs to Treat Depression		
Alpha-2 Receptor Antagonists (Tetracyclics)		
<i>mirtazapine TABS</i>	1B	
<i>mirtazapine TBDP</i>	1B	
Antidepressants - Misc.		
<i>bupropion hcl TABS</i>	1B	D+/C
<i>bupropion hcl TB12</i>	1B	D+/C
<i>bupropion hcl TB24 150 MG, 300 MG</i>	1B	
Monoamine Oxidase Inhibitors (MAOIs)		
EMSAM	3	QL(1 EA daily)
MARPLAN	2	QL(6 EA daily)
<i>phenelzine sulfate</i>	1B	
<i>tranylcypromine sulfate</i>	1B	
N-Methyl-D-aspartic acid (NMDA) Receptor Antagonists		

Ambetter Formulary Updated January 2026

Drug Name	Drug Tier	Requirements/ Limits
SPRAVATO (56 MG DOSE)	4	PA
SPRAVATO (84 MG DOSE)	4	PA
Selective Serotonin Reuptake Inhibitors (SSRIs)		
<i>citalopram hydrobromide SOLN</i>	1A	
<i>citalopram hydrobromide TABS</i>	1A	D/C
<i>escitalopram oxalate SOLN</i>	1B	
<i>escitalopram oxalate TABS</i>	1B	D+/C
<i>fluoxetine hcl CAPS</i>	1A	D/C
<i>fluoxetine hcl CPDR</i>	1A	
<i>fluoxetine hcl SOLN</i>	1B	
<i>fluoxetine hcl TABS</i>	1B	
<i>fluvoxamine maleate TABS</i>	1B	D+/C
<i>paroxetine hcl SUSP</i>	1B	
<i>paroxetine hcl TABS</i>	1B	D/C
<i>paroxetine hcl TB24</i>	1B	
<i>sertraline hcl CONC</i>	1B	
<i>sertraline hcl TABS</i>	1B	D/C
Serotonin Modulators		
<i>nefazodone hcl</i>	1B	
<i>trazodone hcl TABS</i>	1B	
TRINTELLIX	3	QL(1 EA daily); PA
VIIBRYD STARTER PACK KIT	3	1 package(s) per 180 day(s) retail; 1 package(s) per 180 day(s) mail
<i>vilazodone hcl TABS</i>	1B	
Serotonin-Norepinephrine Reuptake Inhibitors (SNRIs)		
<i>desvenlafaxine succinate</i>	1B	
<i>duloxetine hcl CPEP</i>	1B	D/C

Drug Name	Drug Tier	Requirements/ Limits
FETZIMA TITRATION C4PK	3	PA
FETZIMA CP24	3	QL(1 EA daily); PA
<i>venlafaxine hcl CP24</i>	1B	D+/C
<i>venlafaxine hcl TABS</i>	1B	D/C
<i>venlafaxine hcl TB24</i>	1B	
Tricyclic Agents		
<i>amitriptyline hcl TABS</i>	1A	D/C
<i>amoxapine</i>	1B	
<i>clomipramine hcl</i>	1B	
<i>desipramine hcl TABS</i>	1B	
<i>doxepin hcl CAPS</i>	1B	
<i>doxepin hcl CONC</i>	1B	
<i>imipramine hcl TABS</i>	1B	D+/C
<i>imipramine pamoate</i>	1B	
<i>nortriptyline hcl CAPS</i>	1B	
<i>nortriptyline hcl SOLN</i>	1B	
<i>protriptyline hcl</i>	1B	
<i>trimipramine maleate CAPS</i>	1B	
ANTIDIABETICS - Drugs to Regulate Blood Sugar		
Alpha-Glucosidase Inhibitors		
<i>acarbose</i>	1B	QL(3 EA daily)
<i>miglitol</i>	1B	QL(3 EA daily)
Antidiabetic Combinations		
<i>alogliptin-metformin hcl</i>	1B	QL(2 EA daily); PA
<i>alogliptin-pioglitazone 30 MG-12.5 MG</i>	1B	QL(2 EA daily); PA
<i>alogliptin-pioglitazone 15 MG-25 MG, 30 MG-25 MG, 45 MG-25 MG</i>	1B	QL(1 EA daily); PA
<i>dapagliflozin propanediol-metformin hcl 1000 MG-10 MG</i>	2	QL(1 EA daily)
<i>dapagliflozin propanediol-metformin hcl 1000 MG-5 MG</i>	2	QL(2 EA daily)

Drug Name	Drug Tier	Requirements/ Limits
<i>glipizide-metformin hcl</i> 500 MG-5 MG	1B	D+; QL(4 EA daily)
<i>glipizide-metformin hcl</i> 250 MG-2.5 MG, 500 MG-2.5 MG	1B	D+; QL(2 EA daily)
<i>glyburide-metformin</i> 250 MG-1.25 MG	1B	D+; QL(2 EA daily)
<i>glyburide-metformin</i> 500 MG-2.5 MG, 500 MG-5 MG	1B	D+; QL(4 EA daily)
GLYXAMBI	2	QL(1 EA daily)
JANUMET XR TB24 1000 MG-50 MG, 500 MG-50 MG	2	QL(2 EA daily)
JANUMET XR TB24 1000 MG-100 MG	2	QL(1 EA daily)
JANUMET TABS	2	QL(2 EA daily)
<i>pioglitazone hcl-glimepiride</i>	1B	QL(1 EA daily)
<i>pioglitazone hcl-metformin hcl</i> TABS	1B	QL(2 EA daily)
<i>saxagliptin-metformin hcl</i> 1000 MG-2.5 MG	1B	QL(2 EA daily)
<i>saxagliptin-metformin hcl</i> 1000 MG-5 MG, 500 MG-5 MG	1B	QL(1 EA daily)
SOLIQUA	2	QL(0.5 ML daily); PA
SYNJARDY XR TB24 1000 MG-10 MG, 1000 MG-12.5 MG, 1000 MG-5 MG	2	QL(2 EA daily)
SYNJARDY XR TB24 1000 MG-25 MG	2	QL(1 EA daily)
SYNJARDY TABS	2	QL(2 EA daily)
TRIJARDY XR 1000 MG-5 MG-10 MG, 1000 MG-5 MG-25 MG	2	QL(1 EA daily)
TRIJARDY XR 1000 MG-2.5 MG-12.5 MG, 1000 MG-2.5 MG-5 MG	2	QL(2 EA daily)
XULTOPHY	2	QL(0.5 ML daily); PA

Drug Name	Drug Tier	Requirements/ Limits
Biguanides		
<i>metformin hcl</i> TABS 1000 MG	1A	D+; QL(2.5 EA daily)
<i>metformin hcl</i> TABS 500 MG	1A	D+; QL(5 EA daily)
<i>metformin hcl</i> TABS 850 MG	0	QL(3 EA daily)
<i>metformin hcl</i> TB24 500 MG	1B	D+; QL(4 EA daily)
<i>metformin hcl</i> TB24 750 MG	1B	D+; QL(3 EA daily)
Diabetic Other		
<i>diazoxide</i>	3	
<i>glucagon SOLR IJ</i> 1 MG	1B	D+; QL(0.035 EA daily)
Dipeptidyl Peptidase-4 (DPP-4) Inhibitors		
<i>alogliptin benzoate</i>	1B	QL(1 EA daily)
JANUVIA	2	QL(1 EA daily)
<i>saxagliptin hcl</i>	1B	QL(1 EA daily)
Incretin Mimetic Agents		
<i>liraglutide</i>	1B	QL(0.3 ML daily); PA
OZEMPIC (0.25 OR 0.5 MG/DOSE) SOPN	2	QL(0.054 ML daily); PA
OZEMPIC (0.25 OR 0.5 MG/DOSE) SOPN	2	QL(0.108 ML daily); PA
OZEMPIC (1 MG/DOSE) SOPN 4 MG/3ML	2	QL(0.108 ML daily); PA
OZEMPIC (2 MG/DOSE) SOPN	2	QL(0.108 ML daily); PA
RYBELSUS TABS	2	QL(1 EA daily); PA
TRULICITY	2	QL(0.143 ML daily); PA
Insulin		
APIDRA SOLOSTAR SOPN	3	PA
APIDRA SOLN	3	PA

Drug Name	Drug Tier	Requirements/ Limits
HUMULIN R U-500 (CONCENTRATED) SOLN SC	2	D; QL(1.34 ML daily)
HUMULIN R U-500 KWIKPEN SOPN SC	2	D; QL(1.34 ML daily)
INSULIN ASP PROT & ASP FLEXPEN SUPN	1B	D
INSULIN ASPART PROT & ASPART SUSP	1B	D
INSULIN GLARGINE-YFGN SOLN	2	D
INSULIN GLARGINE-YFGN SOPN	2	D
INSULIN LISPRO (1 UNIT DIAL) SOPN	1B	
INSULIN LISPRO JUNIOR KWIKPEN SOPN	1B	
INSULIN LISPRO PROT & LISPRO SUPN	1B	
INSULIN LISPRO SOLN IJ	1B	D
NOVOLIN 70/30 FLEXPEN SUPN	2	D
NOVOLIN 70/30 SUSP	2	D
NOVOLIN N FLEXPEN SUPN	2	D
NOVOLIN N SUSP	2	D
NOVOLIN R FLEXPEN SOPN IJ	2	D
NOVOLIN R SOLN IJ	2	D
NOVOLOG FLEXPEN SOPN	1B	D
NOVOLOG PENFILL SOCT	1B	D
NOVOLOG SOLN IJ	1B	D
REZVOGLAR KWIKPEN	3	PA
SEMGLEE (YFGN) SOLN	2	D
SEMGLEE (YFGN) SOPN	2	D
TRESIBA FLEXTOUCH SOPN	2	D
TRESIBA SOLN	2	D
Insulin Sensitizing Agents		

Drug Name	Drug Tier	Requirements/ Limits
<i>pioglitazone hcl</i>	1B	D+; QL(1 EA daily)
Meglitinide Analogues		
<i>nateglinide</i>	1B	QL(3 EA daily)
<i>repaglinide 2 MG</i>	1B	QL(8 EA daily)
<i>repaglinide 0.5 MG, 1 MG</i>	1B	QL(4 EA daily)
Sodium-Glucose Co-Transporter 2 (SGLT2) Inhibitors		
<i>dapagliflozin propanediol</i>	2	QL(1 EA daily)
JARDIANCE	2	QL(1 EA daily)
Sulfonylureas		
<i>glimepiride 1 MG, 2 MG</i>	1A	D+; QL(4 EA daily)
<i>glimepiride 4 MG</i>	1A	D+; QL(2 EA daily)
<i>glipizide TABS 5 MG, 10 MG</i>	1A	D+; QL(4 EA daily)
<i>glipizide TB24</i>	1A	D+; QL(2 EA daily)
<i>glyburide micronized 1.5 MG, 3 MG, 6 MG</i>	1B	D+; QL(4 EA daily)
<i>glyburide TABS</i>	1A	D+; QL(4 EA daily)
ANTIDIARRHEAL/PROBIOTIC AGENTS - Drugs to Treat Diarrhea		
Antiperistaltic Agents		
<i>diphenoxylate w/ atropine LIQD</i>	1B	
<i>diphenoxylate w/ atropine TABS</i>	1B	
<i>loperamide hcl CAPS</i>	1B	RX/OTC
MOTOFEN	3	
ANTIDOTES AND SPECIFIC ANTAGONISTS		
Antidotes - Chelating Agents		
CHEMET	3	
<i>deferasirox PACK</i>	4	PA
<i>deferasirox TABS</i>	4	SP; PA
<i>deferasirox TBSO</i>	4	SP; PA

Drug Name	Drug Tier	Requirements/ Limits
Antidotes and Specific Antagonists		
VISTOGARD	4	PA
Opioid Antagonists		
<i>naloxone hcl LIQD</i>	1B	QL(2 EA per fill retail); 2 max fill(s) per 30 day(s) retail; RX/OTC
<i>naloxone hcl SOLN 0.4 MG/ML, 4 MG/10ML</i>	1B	
<i>naltrexone hcl</i>	1B	
ANTIEMETICS - Drugs to Treat Nausea and Vomiting		
5-HT3 Receptor Antagonists		
ANZEMET TABS 50 MG	3	QL(0.167 EA daily); PA
<i>granisetron hcl SOLN IV 1 MG/ML</i>	1B	
<i>granisetron hcl TABS</i>	1B	QL(0.34 EA daily)
<i>ondansetron hcl SOLN IJ 4 MG/2ML</i>	1B	
<i>ondansetron hcl SOLN PO 4 MG/5ML</i>	1B	QL(3.34 ML daily)
<i>ondansetron hcl SOSY</i>	1B	
<i>ondansetron hcl TABS 8 MG</i>	1B	QL(3 EA daily; 45 EA per fill retail; 45 per fill mail)
<i>ondansetron hcl TABS 24 MG</i>	1B	QL(0.143 EA daily)
<i>ondansetron hcl TABS 4 MG</i>	1B	QL(4 EA daily; 60 EA per fill retail; 60 per fill mail)
<i>ondansetron TBDP 4 MG</i>	1B	QL(1 EA daily)
<i>ondansetron TBDP 8 MG</i>	1B	
<i>palonosetron hcl SOLN</i>	1B	
Antiemetics - Anticholinergic		
<i>meclizine hcl TABS 25 MG</i>	1B	RX/OTC

Drug Name	Drug Tier	Requirements/ Limits
<i>meclizine hcl TABS 12.5 MG</i>	1A	RX/OTC
<i>scopolamine</i>	1B	QL(0.34 EA daily)
<i>trimethobenzamide hcl CAPS</i>	1B	
Antiemetics - Miscellaneous		
AKYNZEO	3	PA
<i>doxylamine-pyridoxine TBEC</i>	1B	QL(4 EA daily); 3 max fill(s) per 365 day(s) retail; 3 max fill(s) per 365 day(s) mail; PA
<i>dronabinol CAPS</i>	1B	
Substance P/Neurokinin 1 (NK1) Receptor Antagonists		
<i>aprepitant CAPS 40 MG, 125 MG</i>	1B	QL(0.067 EA daily)
<i>aprepitant CAPS 80 MG</i>	1B	QL(0.134 EA daily)
<i>aprepitant CAPS</i>	1B	PA
VARUBI (180 MG DOSE) TBPK	3	PA
ANTIFUNGALS - Drugs to Treat Fungal Infections		
Antifungals		
<i>amphotericin b IV</i>	3	
<i>flucytosine</i>	1B	
<i>griseofulvin microsize SUSP</i>	1B	AL(At least 2 yrs old)
<i>griseofulvin microsize TABS</i>	1B	
<i>griseofulvin ultramicrosize</i>	1B	
<i>nystatin TABS</i>	1B	
<i>terbinafine hcl TABS</i>	1B	QL(1 EA daily)
Imidazole-Related Antifungals		
CRESEMBA CAPS 186 MG	3	PA
<i>fluconazole SUSP</i>	1B	

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
<i>fluconazole TABS</i>	1B		<i>loratadine TBDP</i>	1B	
<i>itraconazole CAPS</i>	1B	QL(4 EA daily); PA	QUZYTIR SOLN IV	3	PA
<i>itraconazole SOLN</i>	1B	QL(20 ML daily); PA	Antihistamines - Phenothiazines		
<i>ketoconazole</i>	1B		<i>promethazine hcl SUPP 50 MG</i>	1B	
<i>posaconazole SUSP</i>	3	QL(20 ML daily)	<i>promethazine hcl SUPP 12.5 MG, 25 MG</i>	1B	QL(6 EA daily)
TOLSURA CAPS	4	PA	<i>promethazine hcl TABS</i>	1B	
<i>voriconazole TABS</i>	1B	QL(4 EA daily)	Antihistamines - Piperidines		
ANTIHISTAMINES - Drugs to Treat Allergies			<i>cyproheptadine hcl SYRP</i>	1B	
Antihistamines - Ethanolamines			<i>cyproheptadine hcl TABS</i>	1B	
<i>carbinoxamine maleate SOLN</i>	1B		ANTIHYPERLIPIDEMICS - Drugs to Treat High Cholesterol		
<i>carbinoxamine maleate TABS 4 MG</i>	1B		Antihyperlipidemics - Combinations		
<i>clemastine fumarate SYRP</i>	1B		<i>ezetimibe-simvastatin</i>	1B	QL(1 EA daily)
<i>clemastine fumarate TABS 2.68 MG</i>	1B		Antihyperlipidemics - Misc.		
<i>diphenhydramine hcl CAPS 50 MG</i>	1A		<i>icosapent ethyl 1 GM</i>	1B	QL(4 EA daily); PA
<i>diphenhydramine hcl ELIX 12.5 MG/5ML</i>	1B		<i>omega-3-acid ethyl esters</i>	1B	D+; QL(4 EA daily)
<i>diphenhydramine hcl LIQD 12.5 MG/5ML, 25 MG/10ML, 50 MG/20ML</i>	1B	QL(20 ML daily)	Bile Acid Sequestrants		
Antihistamines - Non-Sedating			<i>cholestyramine light PACK</i>	1B	QL(6 EA daily)
<i>cetirizine hcl TABS</i>	1A	QL(1 EA daily)	<i>cholestyramine light POWD</i>	1B	QL(24 GM daily)
<i>desloratadine TABS</i>	1B	QL(1 EA daily)	<i>cholestyramine PACK</i>	1B	QL(6 EA daily)
<i>desloratadine TBDP 2.5 MG</i>	1B	QL(1 EA daily)	<i>cholestyramine POWD</i>	1B	QL(25.2 GM daily)
<i>levocetirizine dihydrochloride SOLN</i>	1B	QL(10 ML daily); RX/OTC	<i>colesevelam hcl PACK</i>	1B	QL(1 EA daily); PA
<i>levocetirizine dihydrochloride TABS</i>	1B	QL(1 EA daily); RX/OTC	<i>colesevelam hcl TABS</i>	1B	QL(7 EA daily)
<i>loratadine CAPS</i>	1B		<i>colestipol hcl GRAN</i>	1B	QL(6 GM daily)
<i>loratadine CHEW</i>	1B		<i>colestipol hcl PACK</i>	1B	QL(6 EA daily)
<i>loratadine SOLN</i>	1B		<i>colestipol hcl TABS</i>	1B	QL(16 EA daily)
<i>loratadine TABS</i>	1A		Fibric Acid Derivatives		
			<i>choline fenofibrate</i>	1B	D+; QL(1 EA daily)

Drug Name	Drug Tier	Requirements/ Limits
<i>fenofibrate micronized 43 MG, 130 MG</i>	1B	QL(1 EA daily)
<i>fenofibrate micronized 67 MG, 134 MG, 200 MG</i>	1B	D+; QL(1 EA daily)
<i>fenofibrate TABS 48 MG, 54 MG, 145 MG, 160 MG</i>	1B	D+; QL(1 EA daily)
<i>gemfibrozil TABS</i>	1B	D+; QL(2 EA daily)
HMG CoA Reductase Inhibitors		
<i>atorvastatin calcium TABS</i>	1A	D+; QL(1 EA daily)
<i>fluvastatin sodium CAPS 40 MG</i>	1B	QL(2 EA daily)
<i>fluvastatin sodium CAPS 20 MG</i>	1B	QL(1 EA daily)
<i>lovastatin TABS 10 MG, 20 MG</i>	1A	D+; QL(1 EA daily); PV
<i>lovastatin TABS 40 MG</i>	1A	D+; QL(2 EA daily); PV
<i>pravastatin sodium</i>	1B	D+; QL(1 EA daily)
<i>rosuvastatin calcium TABS</i>	1B	QL(1 EA daily)
<i>simvastatin TABS</i>	1A	D+; QL(1 EA daily)
Intestinal Cholesterol Absorption Inhibitors		
<i>ezetimibe</i>	1B	D+; QL(1 EA daily)
Nicotinic Acid Derivatives		
<i>niacin (antihyperlipidemic) TBCR</i>	1B	QL(2 EA daily)
Proprotein Convertase Subtilisin/Kexin Type 9 Inhibitors		
REPATHA PUSHTRONEX SYSTEM SOCT	4	QL(0.25 ML daily); PA
REPATHA SURECLICK SOAJ	4	QL(0.0714 ML daily); PA
REPATHA SOSY	4	QL(0.0714 ML daily); PA
ANTIHYPERTENSIVES - Drugs to Treat High Blood Pressure		

Drug Name	Drug Tier	Requirements/ Limits
ACE Inhibitors		
<i>benazepril hcl</i>	1A	D+
<i>captopril 12.5 MG</i>	1B	
<i>captopril 25 MG, 50 MG, 100 MG</i>	1B	QL(3 EA daily)
<i>enalapril maleate TABS</i>	1A	D+
<i>fosinopril sodium</i>	1B	D+
<i>lisinopril TABS 2.5 MG, 5 MG, 10 MG, 20 MG, 30 MG, 40 MG</i>	1A	D+
<i>moexipril hcl</i>	1B	QL(2 EA daily)
<i>perindopril erbumine 4 MG</i>	1B	
<i>perindopril erbumine 2 MG, 8 MG</i>	1B	QL(2 EA daily)
<i>quinapril hcl 20 MG, 40 MG</i>	1B	
<i>quinapril hcl 5 MG, 10 MG</i>	1B	QL(2 EA daily)
<i>ramipril CAPS</i>	1B	D+
<i>trandolapril 1 MG, 2 MG</i>	1B	D+; QL(1 EA daily)
<i>trandolapril 4 MG</i>	1B	D+; QL(2 EA daily)
Agents for Pheochromocytoma		
<i>phenoxybenzamine hcl</i>	3	PA
Angiotensin II Receptor Antagonists		
<i>candesartan cilexetil</i>	1B	QL(1 EA daily)
EDARBI	3	QL(1 EA daily); ST
<i>irbesartan</i>	1B	D+; QL(1 EA daily)
<i>losartan potassium</i>	1A	D+; QL(1 EA daily)
<i>olmesartan medoxomil</i>	1B	D+; QL(1 EA daily)
<i>telmisartan</i>	1B	QL(1 EA daily)
<i>valsartan TABS</i>	1B	D+; QL(1 EA daily)
Antiadrenergic Antihypertensives		
<i>clonidine hcl TABS</i>	1A	D+; QL(8 EA daily)

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
<i>clonidine PTWK</i>	1B	QL(0.15 EA daily)	<i>losartan potassium & hydrochlorothiazide 12.5 MG-100 MG, 25 MG-100 MG</i>	1A	D+; QL(1 EA daily)
<i>doxazosin mesylate</i>	1B		<i>losartan potassium & hydrochlorothiazide 12.5 MG-50 MG</i>	1A	D+; QL(2 EA daily)
<i>guanfacine hcl</i>	1B		<i>metoprolol & hydrochlorothiazide TABS 25 MG-100 MG, 50 MG-100 MG</i>	1B	
<i>methyldopa TABS</i>	1B	QL(6 EA daily)	<i>metoprolol & hydrochlorothiazide TABS 25 MG-50 MG</i>	1B	QL(1 EA daily)
<i>prazosin hcl CAPS</i>	1B	QL(4 EA daily)	<i>olmesartan medoxomil-amlodipine-hydrochlorothiazide</i>	1B	ST
<i>terazosin hcl</i>	1B		<i>olmesartan medoxomil-hydrochlorothiazide</i>	1B	
Antihypertensive Combinations			<i>quinapril-hydrochlorothiazide 12.5 MG-10 MG</i>	1B	QL(3 EA daily)
<i>amlodipine besylate-benazepril hcl</i>	1B		<i>quinapril-hydrochlorothiazide 25 MG-20 MG</i>	1B	QL(2 EA daily)
<i>amlodipine besylate-olmesartan medoxomil</i>	1B	ST	<i>quinapril-hydrochlorothiazide 12.5 MG-20 MG</i>	1B	QL(4 EA daily)
<i>amlodipine besylate-valsartan</i>	1B	QL(1 EA daily)	<i>telmisartan-amlodipine</i>	1B	QL(1 EA daily)
<i>amlodipine-valsartan-hydrochlorothiazide</i>	3		<i>telmisartan-hydrochlorothiazide</i>	1B	QL(1 EA daily)
<i>atenolol & chlorthalidone</i>	1B		<i>trandolapril-verapamil hcl 180 MG-2 MG, 240 MG-1 MG</i>	3	
<i>benazepril & hydrochlorothiazide 12.5 MG-20 MG, 6.25 MG-5 MG</i>	1B		<i>trandolapril-verapamil hcl 240 MG-2 MG, 240 MG-4 MG</i>	3	QL(1 EA daily)
<i>benazepril & hydrochlorothiazide 12.5 MG-10 MG, 25 MG-20 MG</i>	1B	QL(1 EA daily)	<i>valsartan-hydrochlorothiazide</i>	1B	QL(1 EA daily)
<i>bisoprolol & hydrochlorothiazide</i>	1B	QL(2 EA daily)	Antihypertensives - Misc.		
<i>candesartan cilexetil-hydrochlorothiazide</i>	1B		VECAMEYL	3	PA
<i>enalapril maleate & hydrochlorothiazide 25 MG-10 MG</i>	1B		Direct Renin Inhibitors		
<i>enalapril maleate & hydrochlorothiazide 12.5 MG-5 MG</i>	1B	QL(2 EA daily)	<i>aliskiren fumarate</i>	1B	QL(1 EA daily)
<i>fosinopril sodium & hydrochlorothiazide</i>	1B	QL(1 EA daily)			
<i>irbesartan-hydrochlorothiazide</i>	1B	D+			
<i>lisinopril & hydrochlorothiazide</i>	1A	D+			

Drug Name	Drug Tier	Requirements/ Limits
Selective Aldosterone Receptor Antagonists (SARAs)		
<i>eplerenone</i>	1B	
Vasodilators		
<i>hydralazine hcl SOLN</i>	1B	
<i>hydralazine hcl TABS</i>	1B	D+
<i>minoxidil 2.5 MG, 10 MG</i>	1B	D+
ANTI-INFECTIVE AGENTS - MISC. - Drugs to Treat Bacterial Infections		
Anti-infective Agents - Misc.		
<i>metronidazole TABS 250 MG, 500 MG</i>	1B	
<i>pentamidine isethionate IN</i>	1B	
<i>tinidazole</i>	1B	
<i>trimethoprim TABS</i>	1B	
XIFAXAN 200 MG	3	QL(3 EA daily; 9 EA per 3 day(s) retail; 9 EA per 3 days mail); AL(At least 12 yrs old); PA
XIFAXAN 550 MG	3	QL(3 EA daily); AL(At least 12 yrs old); PA
Anti-infective Misc. - Combinations		
<i>sulfamethoxazole-trimethoprim SOLN</i>	1B	
<i>sulfamethoxazole-trimethoprim SUSP</i>	1B	
<i>sulfamethoxazole-trimethoprim TABS</i>	1A	
Antiprotozoal Agents		
ALINIA SUSR	2	PA
<i>atovaquone</i>	1B	
<i>nitazoxanide TABS</i>	1B	PA
Carbapenems		

Drug Name	Drug Tier	Requirements/ Limits
<i>ertapenem sodium IJ</i>	1B	
Chloramphenicols		
<i>chloramphenicol sodium succinate</i>	4	SP; PA
Cyclic Lipopeptides		
<i>daptomycin 500 MG</i>	1B	
Glycopeptides		
<i>vancomycin hcl CAPS</i>	1B	QL(4 EA daily; 40 EA per fill retail)
<i>vancomycin hcl SOLR PO 25 MG/ML, 50 MG/ML, 250 MG/5ML</i>	1B	QL(300 ML per fill retail)
Leprostatics		
<i>dapsone</i>	1B	
Lincosamides		
<i>clindamycin hcl</i>	1B	
<i>clindamycin palmitate hydrochloride</i>	1B	
<i>clindamycin phosphate SOLN IJ 9 GM/60ML, 300 MG/2ML, 600 MG/4ML, 900 MG/6ML, 9000 MG/60ML</i>	1B	
<i>lincomycin hcl</i>	1B	
Monobactams		
<i>aztreonam 1 GM</i>	1B	
CAYSTON	4	QL(3 ML daily); PA
Oxazolidinones		
<i>linezolid SUSR</i>	1B	
<i>linezolid TABS</i>	1B	QL(2 EA daily); PA
Urinary Anti-infectives		
<i>fosfomycin tromethamine</i>	1B	
<i>methenamine hippurate</i>	1B	
<i>nitrofurantoin</i>	1B	

Drug Name	Drug Tier	Requirements/ Limits
<i>nitrofurantoin macrocrystal 50 MG, 100 MG</i>	1B	
<i>nitrofurantoin monohydrate macro</i>	1B	
ANTIMALARIALS - Drugs to Treat Malaria (Parasitic Infections)		
Antimalarial Combinations		
<i>atovaquone-proguanil hcl</i>	1B	Covered for malaria treatment only. Limit 1 fill every 180 days; QL(12 EA per fill retail; 12 per fill mail); 1 max fill(s) per 180 day(s) retail; 1 max fill(s) per 180 day(s) mail
COARTEM	2	Covered for malaria treatment only. Limit 1 fill every 180 days; QL(24 EA per fill retail; 24 per fill mail); 1 max fill(s) per 180 day(s) retail; 1 max fill(s) per 180 day(s) mail
Antimalarials		
<i>chloroquine phosphate TABS 250 MG</i>	1B	QL(3 EA daily)
<i>chloroquine phosphate TABS 500 MG</i>	1B	
<i>hydroxychloroquine sulfate 400 MG</i>	1B	QL(1 EA daily)
<i>hydroxychloroquine sulfate 100 MG</i>	1B	QL(4 EA daily)
<i>hydroxychloroquine sulfate 200 MG</i>	1B	QL(3 EA daily)
KRINTAFEL	3	QL(2 EA per 30 day(s) retail)

Drug Name	Drug Tier	Requirements/ Limits
<i>mefloquine hcl</i>	1B	Covered for malaria treatment only. Limit 1 fill every 180 days; QL(5 EA daily); 1 max fill(s) per 180 day(s) retail; 1 max fill(s) per 180 day(s) mail
<i>primaquine phosphate TABS</i>	3	
<i>pyrimethamine</i>	1B	QL(3 EA daily); PA
<i>quinine sulfate CAPS 324 MG</i>	1B	PA
ANTIMYASTHENIC/CHOLINERGIC AGENTS		
Antimyasthenic/Cholinergic Agents		
<i>neostigmine methylsulfate SOSY</i>	3	PA
<i>pyridostigmine bromide SOLN PO</i>	1B	
<i>pyridostigmine bromide TABS 60 MG</i>	1B	
<i>pyridostigmine bromide TBCR</i>	1B	
ANTIMYCOBACTERIAL AGENTS - Drugs to Treat Tuberculosis (Bacterial Infections)		
Antimycobacterial Agents		
<i>cycloserine</i>	1B	QL(4 EA daily)
<i>ethambutol hcl TABS</i>	1B	
<i>isoniazid SOLN</i>	1B	
<i>isoniazid SYRP</i>	1B	
<i>isoniazid TABS</i>	1A	
PRIFTIN	3	
<i>pyrazinamide</i>	1B	
<i>rifabutin</i>	1B	PA
<i>rifampin CAPS</i>	1B	
<i>rifampin SOLR</i>	1B	
SIRTURO	3	PA

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES - Drugs to Treat Cancer			<i>gemcitabine hcl SOLR 2 GM, 200 MG</i>	4	SP; PA
Alkylating Agents			<i>mercaptopurine TABS</i>	1B	
<i>busulfan SOLN</i>	4	SP; PA	<i>methotrexate sodium SOLN 50 MG/2ML, 250 MG/10ML</i>	1B	
<i>carmustine</i>	4	SP; PA	<i>methotrexate sodium SOLR</i>	1B	SP
<i>cisplatin SOLN 100 MG/100ML</i>	4	SP; PA	<i>methotrexate sodium TABS 2.5 MG</i>	1B	SP
<i>cyclophosphamide CAPS</i>	1B	PA	<i>nelarabine</i>	4	SP; PA
<i>cyclophosphamide SOLR IJ</i>	4		<i>pemetrexed disodium SOLR 500 MG</i>	4	SP; PA
GLEOSTINE 10 MG	4	SP; PA	<i>pralatrexate 20 MG/ML</i>	4	SP; PA
GLEOSTINE 40 MG, 100 MG	4	PA	TABLOID	4	SP; PA
<i>ifosfamide SOLN 1 GM/20ML</i>	4	SP; PA	TREXALL TABS 5 MG, 7.5 MG, 10 MG, 15 MG	4	SP; PA
<i>ifosfamide SOLR</i>	4	SP; PA	Antineoplastic - Angiogenesis Inhibitors		
LEUKERAN	4	SP; PA	INLYTA	4	QL(2 EA daily); SP; PA
<i>melphalan</i>	1B		LENVIMA (10 MG DAILY DOSE)	4	QL(1 EA daily); PA
<i>melphalan hcl IV</i>	1B		LENVIMA (12 MG DAILY DOSE)	4	QL(3 EA daily); PA
MYLERAN TABS	4	SP; PA	LENVIMA (14 MG DAILY DOSE)	4	QL(2 EA daily); PA
<i>oxaliplatin SOLN 50 MG/10ML, 100 MG/20ML</i>	4	SP; PA	LENVIMA (18 MG DAILY DOSE)	4	QL(3 EA daily); PA
TEMODAR SOLR	4		LENVIMA (20 MG DAILY DOSE)	4	QL(2 EA daily); PA
<i>temozolomide CAPS</i>	4	SP; PA	LENVIMA (24 MG DAILY DOSE)	4	QL(3 EA daily); PA
<i>thiotepa 15 MG</i>	4	SP; PA	LENVIMA (4 MG DAILY DOSE)	4	QL(1 EA daily); PA
ZANOSAR	4	SP; PA	LENVIMA (8 MG DAILY DOSE)	4	QL(2 EA daily); PA
Antimetabolites			MVASI	4	PA
<i>azacitidine SUSR</i>	4	SP; PA	ZALTRAP 100 MG/4ML	4	SP; PA
<i>capecitabine</i>	4	SP; PA	ZIRABEV	4	PA
<i>clofarabine</i>	4	SP; PA	Antineoplastic - Antibodies		
<i>decitabine</i>	4	SP; PA			
<i>floxuridine</i>	4	SP; PA			
<i>fludarabine phosphate SOLN</i>	4	SP; PA			
<i>fludarabine phosphate SOLR</i>	4	SP; PA			
<i>fluorouracil 500 MG/10ML</i>	4	SP; PA			

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
ARZERRA	4	SP; PA	ELIGARD SC 22.5 MG, 30 MG, 45 MG	4	SP; PA
LOQTORZI	4	PA	ELIGARD KIT SC 7.5 MG	4	QL(0.0089 EA daily); SP; PA
RUXIENCE	4	PA	EMCYT	4	SP; PA
TRUXIMA	4	PA	ERLEADA 60 MG	4	QL(4 EA daily); PA
YERVOY	4	SP; PA	ERLEADA 240 MG	4	QL(1 EA daily); PA
Antineoplastic - Anti-HER2 Agents			<i>exemestane</i>	4	QL(1 EA daily); SP
KANJINTI	4	PA	FIRMAGON 80 MG	4	QL(0.143 EA daily); SP; PA
OGIVRI	4	PA	FIRMAGON (240 MG DOSE)	4	QL(0.143 EA daily); SP; PA
TRAZIMERA	4	PA	<i>fulvestrant SOSY</i>	4	QL(0.357 ML daily); SP; PA
TUKYSA	4	PA	<i>letrozole</i>	1B	
Antineoplastic - EGFR Inhibitors			<i>leuprolide acetate KIT IJ 1 MG/0.2ML</i>	4	SP; PA
ERBITUX	4	SP; PA	LUPRON DEPOT (1-MONTH) KIT IM	4	QL(0.0358 EA daily); SP; PA
<i>erlotinib hcl</i>	4	QL(1 EA daily); SP; PA	LUPRON DEPOT (3-MONTH) KIT IM	4	SP; PA
<i>gefitinib</i>	4	QL(2 EA daily); PA	LUPRON DEPOT (4-MONTH) IM	4	QL(0.1339 EA daily); SP; PA
GILOTRIF	4	QL(1 EA daily); PA	LUPRON DEPOT (6-MONTH) IM	4	QL(0.0089 EA daily); SP; PA
TAGRISSO 40 MG	4	QL(2 EA daily); PA	LYSODREN	4	SP; PA
TAGRISSO 80 MG	4	QL(1 EA daily); PA	<i>megestrol acetate SUSP</i>	1B	
VECTIBIX 100 MG/5ML	4	SP; PA	<i>megestrol acetate TABS</i>	1B	
VIZIMPRO	4	QL(1 EA daily); PA	<i>nilutamide</i>	1B	QL(2 EA daily)
Antineoplastic - Hedgehog Pathway Inhibitors			NUBEQA	4	QL(4 EA daily); PA
DAURISMO	4	PA	ORGOVYX	4	PA
ERIVEDGE	4	QL(1 EA daily); SP; PA	<i>tamoxifen citrate TABS</i>	0	
ODOMZO	4	QL(1 EA daily); PA	<i>toremifene citrate</i>	1B	
Antineoplastic - Hormonal and Related Agents			TRELSTAR MIXJECT	4	SP; PA
<i>abiraterone acetate 250 MG</i>	4	QL(4 EA daily); SP; PA	VABRINTY KIT SC 22.5 MG, 45 MG	4	SP; PA
<i>abiraterone acetate 500 MG</i>	4	QL(2 EA daily); PA	XTANDI CAPS	4	QL(4 EA daily); SP; PA
<i>anastrozole</i>	1B	QL(1 EA daily)			
<i>bicalutamide</i>	1B	QL(1 EA daily); SP			

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
XTANDI TABS 40 MG	4	QL(4 EA daily); PA	CAPRELSA	4	QL(1 EA daily); SP; PA
XTANDI TABS 80 MG	4	QL(2 EA daily); PA	COMETRIQ (100 MG DAILY DOSE) KIT	4	QL(2 EA daily); SP; PA
YONSA	4	QL(4 EA daily); PA	COMETRIQ (140 MG DAILY DOSE) KIT	4	QL(4 EA daily); SP; PA
ZOLADEX 3.6 MG	4	QL(0.0357 EA daily); SP; PA	COMETRIQ (60 MG DAILY DOSE) KIT	4	QL(3 EA daily); SP; PA
ZOLADEX 10.8 MG	4	QL(0.0119 EA daily); SP; PA	<i>dasatinib</i>	4	QL(1 EA daily); SP; PA
Antineoplastic - Immunomodulators			<i>everolimus TABS</i>	4	QL(1 EA daily); SP; PA
POMALYST	4	QL(1 EA daily); PA	IBRANCE CAPS	4	QL(1 EA daily); PA
Antineoplastic Antibiotics			IBRANCE TABS	4	QL(1 EA daily); PA
<i>bleomycin sulfate 15 UNIT</i>	4	SP; PA	ICLUSIG	4	QL(1 EA daily); PA
<i>dactinomycin</i>	4	SP; PA	<i>imatinib mesylate TABS</i>	4	QL(2 EA daily); SP; PA
<i>doxorubicin hcl SOLR 10 MG, 50 MG</i>	4	SP; PA	JAKAFI	4	QL(2 EA daily); SP; PA
<i>idarubicin hcl 5 MG/5ML, 10 MG/10ML</i>	4	SP; PA	KISQALI (200 MG DOSE)	4	QL(2 EA daily); PA
<i>idarubicin hcl 20 MG/20ML</i>	4	PA	KISQALI (400 MG DOSE)	4	QL(2 EA daily); PA
<i>mitomycin SOLR IV 20 MG</i>	4	SP; PA	KISQALI (600 MG DOSE)	4	QL(2.5 EA daily); PA
<i>mitoxantrone hcl 25 MG/12.5ML</i>	4	SP; PA	KYPROLIS	4	PA
<i>valrubicin</i>	4	SP; PA	<i>lapatinib ditosylate</i>	4	QL(6 EA daily); SP; PA
Antineoplastic Combinations			LORBRENA	4	QL(1 EA daily); PA
KISQALI FEMARA (200 MG DOSE)	4	QL(2 EA daily); PA	LUMAKRAS 120 MG, 240 MG	3	QL(2 EA daily); PA
KISQALI FEMARA (400 MG DOSE)	4	QL(2.5 EA daily); PA	LUMAKRAS 320 MG	3	QL(3 EA daily); PA
KISQALI FEMARA (600 MG DOSE)	4	QL(3.25 EA daily); PA	LYNPARZA TABS	4	QL(4 EA daily); PA
Antineoplastic Enzyme Inhibitors			MEKINIST SOLR	4	QL(40 ML daily); PA
ALECENSA	4	QL(8 EA daily); PA	MEKINIST TABS 0.5 MG	4	QL(3 EA daily); PA
<i>bortezomib SOLR IJ</i>	4	SP; PA	MEKINIST TABS 2 MG	4	QL(1 EA daily); PA
BORTEZOMIB SOLR IV 3.5 MG	4	PA	<i>pazopanib hcl</i>	4	QL(4 EA daily); SP; PA
CABOMETYX TABS	4	QL(1 EA daily); PA			

Ambetter Formulary Updated January 2026

Drug Name	Drug Tier	Requirements/ Limits
PIQRAY (200 MG DAILY DOSE)	4	QL(1 EA daily); PA
PIQRAY (250 MG DAILY DOSE)	4	QL(2 EA daily); PA
PIQRAY (300 MG DAILY DOSE)	4	QL(2 EA daily); PA
<i>romidepsin SOLR</i>	4	SP; PA
ROZLYTREK CAPS	4	PA
RUBRACA	4	QL(4 EA daily); PA
<i>sorafenib tosylate</i>	4	QL(4 EA daily); SP; PA
STIVARGA	4	QL(4 EA daily); SP; PA
<i>sunitinib malate 12.5 MG, 25 MG, 50 MG</i>	4	QL(1 EA daily); SP; PA
<i>sunitinib malate 37.5 MG</i>	4	QL(1 EA daily); PA
TAFINLAR CAPS	4	QL(4 EA daily); PA
TAFINLAR TBSO	4	QL(30 EA daily); PA
TALZENNA	4	QL(1 EA daily); PA
TAZVERIK	4	PA
<i>temsirolimus</i>	4	QL(0.143 ML daily); SP; PA
TURALIO 125 MG	4	PA
VERZENIO	4	QL(2 EA daily); PA
VITRAKVI CAPS	4	PA
VITRAKVI SOLN	4	PA
XALKORI CAPS	4	QL(2 EA daily); SP; PA
XOSPATA	4	PA
ZEJULA TABS 200 MG, 300 MG	4	QL(1 EA daily); PA
ZEJULA TABS 100 MG	4	QL(3 EA daily); PA
ZELBORAF	4	QL(8 EA daily); SP; PA
ZOLINZA	4	QL(4 EA daily); SP; PA
ZYDELIG	4	QL(2 EA daily); PA

Drug Name	Drug Tier	Requirements/ Limits
Antineoplastics Misc.		
ACTIMMUNE 100 MCG/0.5ML	4	SP; PA
<i>arsenic trioxide 10 MG/10ML</i>	4	SP; PA
<i>bexarotene</i>	4	SP; PA
<i>hydroxyurea</i>	1B	
MATULANE	4	SP; PA
NIPENT	4	SP; PA
PHOTOFRIN	4	SP; PA
PROLEUKIN	4	SP; PA
SYNRIBO	4	SP; PA
<i>tretinoin (chemotherapy)</i>	1B	
UVADEX	4	SP; PA
Chemotherapy Adjuncts		
KEPIVANCE 6.25 MG	4	SP; PA
Chemotherapy Rescue/Antidote/Protective Agents		
<i>leucovorin calcium SOLR</i>	1B	
<i>leucovorin calcium TABS</i>	1B	
VORAXAZE	4	SP; PA
Mitotic Inhibitors		
<i>docetaxel CONC 20 MG/ML</i>	4	SP; PA
<i>eribulin mesylate</i>	4	SP; PA
ETOPOPHOS	4	SP; PA
<i>etoposide CAPS</i>	4	SP; PA
<i>etoposide SOLN 1 GM/50ML, 100 MG/5ML, 500 MG/25ML</i>	4	PA
IXEMPRA KIT 15 MG	4	SP; PA
<i>paclitaxel 100 MG/16.7ML, 150 MG/25ML</i>	4	SP; PA
<i>paclitaxel protein-bound particles</i>	4	SP; PA
<i>vincristine sulfate</i>	4	SP; PA

Drug Name	Drug Tier	Requirements/ Limits
<i>vinorelbine tartrate 10 MG/ML</i>	4	SP; PA
Topoisomerase I Inhibitors		
<i>HYCAMTIN CAPS</i>	4	SP; PA
<i>irinotecan hcl 40 MG/2ML, 100 MG/5ML</i>	4	SP; PA
<i>topotecan hcl SOLN</i>	4	
<i>topotecan hcl SOLR</i>	4	
ANTIPARKINSON AND RELATED THERAPY AGENTS - Drugs to Treat Parkinson's Disease		
Antiparkinson Adjunctive Therapy		
<i>carbidopa</i>	1B	
Antiparkinson Anticholinergics		
<i>benztropine mesylate TABS</i>	1B	
<i>trihexyphenidyl hcl SOLN</i>	1B	
<i>trihexyphenidyl hcl TABS</i>	1B	
Antiparkinson COMT Inhibitors		
<i>entacapone</i>	1B	QL(8 EA daily)
<i>tolcapone</i>	1B	
Antiparkinson Dopaminergics		
<i>amantadine hcl CAPS</i>	1B	
<i>amantadine hcl SOLN</i>	1B	
<i>amantadine hcl TABS</i>	1B	
<i>apomorphine hydrochloride SOCT</i>	4	PA
<i>bromocriptine mesylate CAPS</i>	1B	
<i>bromocriptine mesylate TABS 2.5 MG</i>	1B	
<i>carbidopa-levodopa-entacapone</i>	1B	
<i>carbidopa-levodopa TABS</i>	1B	
<i>carbidopa-levodopa TBCR</i>	1B	
<i>carbidopa-levodopa TBDP</i>	1B	
<i>NEUPRO</i>	2	

Drug Name	Drug Tier	Requirements/ Limits
<i>pramipexole dihydrochloride TABS 0.25 MG, 0.5 MG, 0.75 MG, 1 MG, 1.5 MG</i>	1B	
<i>pramipexole dihydrochloride TABS 0.125 MG</i>	1B	QL(4 EA daily)
<i>ropinirole hydrochloride TABS</i>	1B	
<i>ropinirole hydrochloride TB24 8 MG, 12 MG</i>	1B	QL(2 EA daily); ST
<i>ropinirole hydrochloride TB24 2 MG, 4 MG, 6 MG</i>	1B	QL(1 EA daily); ST
Antiparkinson Monoamine Oxidase Inhibitors		
<i>rasagiline mesylate</i>	1B	QL(1 EA daily); PA
<i>selegiline hcl CAPS</i>	1B	
<i>selegiline hcl TABS</i>	1B	
ANTIPSYCHOTICS/ANTIMANIC AGENTS - Drugs to Treat Mood Disorders		
Antimanic Agents		
<i>lithium</i>	1B	
<i>lithium carbonate CAPS</i>	1B	
<i>lithium carbonate TABS</i>	1B	
<i>lithium carbonate TBCR</i>	1B	
Antipsychotics - Misc.		
<i>EQUETRO 100 MG</i>	3	QL(2 EA daily); ST
<i>EQUETRO 300 MG</i>	3	QL(4 EA daily); ST
<i>EQUETRO 200 MG</i>	3	QL(8 EA daily); ST
<i>lurasidone hcl 80 MG</i>	1B	QL(2 EA daily)
<i>lurasidone hcl 20 MG, 40 MG, 60 MG, 120 MG</i>	1B	QL(1 EA daily)
<i>ziprasidone hcl</i>	1B	QL(2 EA daily); AL(At least 18 yrs old)
Benzisoxazoles		
<i>FANAPT</i>	2	QL(2 EA daily); PA

Ambetter Formulary Updated January 2026

Drug Name	Drug Tier	Requirements/ Limits
FANAPT TITRATION PACK A	2	PA
<i>paliperidone</i>	1B	
PERSERIS PRSY	2	QL(0.072 EA daily); PA
<i>risperidone microspheres</i>	1B	QL(0.072 EA daily); PA
<i>risperidone SOLN</i>	1B	
<i>risperidone TABS</i>	1B	
<i>risperidone TBDP</i>	1B	
Butyrophenones		
<i>haloperidol decanoate</i>	1B	QL(0.036 ML daily)
<i>haloperidol lactate CONC</i>	1B	
<i>haloperidol lactate SOLN</i>	1B	
<i>haloperidol TABS</i>	1B	
Dibenzapines		
<i>asenapine maleate 2.5 MG</i>	1B	QL(4 EA daily); PA
<i>asenapine maleate 5 MG, 10 MG</i>	1B	QL(2 EA daily); PA
<i>clozapine TABS</i>	1B	
<i>clozapine TBDP 100 MG</i>	1B	QL(9 EA daily)
<i>clozapine TBDP 25 MG</i>	1B	QL(3 EA daily)
<i>clozapine TBDP 12.5 MG, 150 MG</i>	1B	QL(6 EA daily)
<i>loxapine succinate</i>	1B	
<i>olanzapine SOLR</i>	1B	QL(0.215 EA daily)
<i>olanzapine TABS 2.5 MG, 5 MG</i>	1B	QL(4 EA daily)
<i>olanzapine TABS 7.5 MG, 10 MG, 15 MG, 20 MG</i>	1B	QL(2 EA daily)
<i>olanzapine TBDP 5 MG, 10 MG, 15 MG</i>	1B	QL(2 EA daily)
<i>olanzapine TBDP 20 MG</i>	1B	QL(1 EA daily)
<i>quetiapine fumarate TABS 25 MG, 50 MG, 100 MG, 200 MG, 300 MG, 400 MG</i>	1B	AL(At least 10 yrs old)
<i>quetiapine fumarate TB24</i>	1B	

Drug Name	Drug Tier	Requirements/ Limits
Phenothiazines		
<i>chlorpromazine hcl SOLN</i>	3	
<i>chlorpromazine hcl TABS</i>	1B	
<i>fluphenazine hcl CONC</i>	1B	
<i>fluphenazine hcl ELIX</i>	1B	
<i>fluphenazine hcl SOLN</i>	1B	
<i>fluphenazine hcl TABS</i>	1B	
<i>perphenazine TABS</i>	1B	
<i>prochlorperazine</i>	1B	
<i>prochlorperazine maleate TABS</i>	1B	
<i>thioridazine hcl</i>	1B	
<i>trifluoperazine hcl TABS</i>	1B	
Quinolinone Derivatives		
<i>aripiprazole SOLN PO</i>	1B	QL(30 ML daily); AL(At least 6 yrs old)
<i>aripiprazole TABS</i>	1B	QL(1 EA daily); AL(At least 6 yrs old)
REXULTI	3	PA
Thioxanthenes		
<i>thiothixene</i>	1B	
ANTIVIRALS - Drugs to Treat Viral Infections		
Antiretrovirals		
<i>abacavir sulfate-lamivudine</i>	1B	QL(1 EA daily)
<i>abacavir sulfate SOLN</i>	1B	QL(32 ML daily)
<i>abacavir sulfate TABS</i>	1B	QL(2 EA daily)
APTIVUS CAPS	3	QL(4 EA daily)
<i>atazanavir sulfate CAPS 150 MG, 300 MG</i>	1B	QL(1 EA daily)
<i>atazanavir sulfate CAPS 200 MG</i>	1B	QL(2 EA daily)
BIKTARVY	3	QL(1 EA daily)
CABENUVA	3	
CIMDUO	3	QL(1 EA daily); ST

Ambetter Formulary Updated January 2026

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
COMPLERA 200 MG-300 MG-25 MG (<i>emtricitabine-rilpivirine-tenofovir disoproxil fumarate</i>)	3	QL(1 EA daily)	ISENTRESS CHEW	3	QL(6 EA daily)
<i>darunavir TABS</i>	1B		ISENTRESS TABS	3	QL(2 EA daily)
DELSTRIGO	3	QL(1 EA daily)	JULUCA	3	QL(1 EA daily)
DESCOVY 200 MG-25 MG	3		KALETRA SOLN	2	QL(12.5 ML daily)
DOVATO	3	QL(1 EA daily)	<i>lamivudine SOLN</i>	1B	QL(30 ML daily)
EDURANT	3	QL(1 EA daily)	<i>lamivudine TABS 150 MG</i>	1B	QL(2 EA daily)
<i>efavirenz CAPS 50 MG</i>	1B	QL(3 EA daily)	<i>lamivudine TABS 300 MG</i>	1B	QL(1 EA daily)
<i>efavirenz CAPS 200 MG</i>	1B	QL(2 EA daily)	<i>lamivudine-zidovudine</i>	1B	QL(2 EA daily)
<i>efavirenz-emtricitabine-tenofovir disoproxil fumarate</i>	1B	QL(1 EA daily)	LEXIVA SUSP	3	QL(56 ML daily)
<i>efavirenz-lamivudine-tenofovir disoproxil fumarate</i>	1B	QL(1 EA daily)	<i>lopinavir-ritonavir SOLN</i>	1B	QL(12.5 ML daily)
<i>efavirenz TABS</i>	1B	QL(1 EA daily)	<i>lopinavir-ritonavir TABS</i>	1B	QL(4 EA daily)
<i>emtricitabine CAPS</i>	1B	QL(1 EA daily)	<i>maraviroc TABS 300 MG</i>	1B	QL(4 EA daily)
<i>emtricitabine-rilpivirine-tenofovir disoproxil fumarate</i>	1B	QL(1 EA daily)	<i>maraviroc TABS 150 MG</i>	1B	QL(2 EA daily)
<i>emtricitabine-tenofovir disoproxil fumarate 100 MG-150 MG, 133 MG-200 MG, 167 MG-250 MG</i>	1B	QL(1 EA daily)	<i>nevirapine SUSP</i>	1B	QL(40 ML daily)
<i>emtricitabine-tenofovir disoproxil fumarate 200 MG-300 MG</i>	0	QL(1 EA daily)	<i>nevirapine TABS</i>	1B	QL(2 EA daily)
EMTRIVA SOLN	3	QL(24 ML daily)	<i>nevirapine TB24 400 MG</i>	1B	QL(1 EA daily)
<i>etravirine 100 MG</i>	1B	QL(4 EA daily)	NORVIR CAPS	2	QL(12 EA daily)
<i>etravirine 200 MG</i>	1B	QL(2 EA daily)	NORVIR PACK	3	QL(12 EA daily)
EVOTAZ	3	QL(1 EA daily)	ODEFSEY	3	QL(1 EA daily)
<i>fosamprenavir calcium TABS</i>	1B	QL(4 EA daily)	PIFELTRO	3	QL(1 EA daily)
FUZEON SOLR	4	SP; PA	PREZCOBIX	3	QL(1 EA daily)
GENVOYA	3	QL(1 EA daily)	PREZISTA SUSP	3	QL(12 ML daily)
INTELENCE 25 MG	3	QL(8 EA daily)	PREZISTA TABS 75 MG, 150 MG	3	QL(2 EA daily)
ISENTRESS HD TABS	3	QL(2 EA daily)	RETROVIR SOLN	3	
			<i>ritonavir TABS</i>	1B	QL(12 EA daily)
			SELZENTRY SOLN	3	QL(30 ML daily)
			SELZENTRY TABS 25 MG, 75 MG	3	QL(2 EA daily)
			STRIBILD	3	QL(1 EA daily)
			SYMTUZA	3	

Drug Name	Drug Tier	Requirements/ Limits
<i>tenofovir disoproxil fumarate TABS</i>	1B	
TIVICAY PD TBSO	3	
TIVICAY TABS	3	QL(2 EA daily)
TRIUMEQ PD TBSO	3	
TRIUMEQ TABS	3	QL(1 EA daily)
TRIZIVIR	3	QL(2 EA daily)
TYBOST	3	QL(1 EA daily)
VIRACEPT TABS 625 MG	3	QL(4 EA daily)
VIRACEPT TABS 250 MG	3	QL(10 EA daily)
VIREAD POWD	3	QL(7.5 GM daily)
VIREAD TABS 150 MG, 200 MG, 250 MG	3	QL(1 EA daily)
<i>zidovudine CAPS</i>	1B	QL(6 EA daily)
<i>zidovudine SYRP</i>	1B	QL(60 ML daily)
<i>zidovudine TABS</i>	1B	QL(2 EA daily)
CMV Agents		
<i>cidofovir</i>	3	
<i>ganciclovir sodium SOLR</i>	1B	
<i>valganciclovir hcl TABS</i>	1B	QL(4 EA daily); PA
Hepatitis Agents		
<i>adefovir dipivoxil</i>	4	QL(1 EA daily); SP
<i>entecavir TABS</i>	4	QL(1 EA daily); SP
<i>lamivudine (hbv) TABS</i>	1B	QL(3 EA daily); SP
PEGASYS SOLN	4	QL(0.0714 ML daily); SP; PA
PEGASYS SOSY	4	QL(0.072 ML daily); PA
<i>ribavirin (hepatitis c) CAPS</i>	1B	QL(7 EA daily)
<i>ribavirin (hepatitis c) TABS 200 MG</i>	1B	QL(7 EA daily)
SOFOSBUVIR-VELPATASVIR TABS	1B	QL(1 EA daily); PA

Drug Name	Drug Tier	Requirements/ Limits
SOVALDI TABS 200 MG	3	QL(1 EA daily); PA
SOVALDI TABS 400 MG	3	QL(1 EA daily); SP; PA
VOSEVI	4	QL(1 EA daily); PA
Herpes Agents		
<i>acyclovir CAPS</i>	1A	QL(5 EA daily; 50 EA per fill retail; 50 per fill mail)
<i>acyclovir SUSP</i>	1B	QL(13.34 ML daily)
<i>acyclovir TABS PO</i>	1B	QL(5 EA daily)
<i>famciclovir 500 MG</i>	1B	QL(4 EA daily)
<i>famciclovir 125 MG, 250 MG</i>	1B	QL(3 EA daily)
<i>valacyclovir hcl 1 GM</i>	1B	QL(4 EA daily)
<i>valacyclovir hcl 500 MG</i>	1B	QL(2 EA daily)
Influenza Agents		
<i>oseltamivir phosphate CAPS</i>	1B	Limit 1 fill every 90 days.; QL(10 EA per fill retail; 10 per fill mail); 1 max fill(s) per 90 day(s) retail; 1 max fill(s) per 90 day(s) mail
<i>oseltamivir phosphate SUSR</i>	1B	Limit 1 fill every 90 days.; QL(125 ML per fill retail); 1 max fill(s) per 90 day(s) retail
RELENZA DISKHALER	2	1 package(s) per 30 day(s) retail
<i>rimantadine hydrochloride TABS</i>	1B	QL(2 EA daily)
BETA BLOCKERS - Drugs to Treat High Blood Pressure		
Alpha-Beta Blockers		
<i>carvedilol</i>	1A	D+

Drug Name	Drug Tier	Requirements/ Limits
<i>carvedilol phosphate</i>	3	QL(1 EA daily)
<i>labetalol hcl SOLN</i>	1B	
<i>labetalol hcl TABS 100 MG, 200 MG</i>	1B	D+
<i>labetalol hcl TABS 300 MG</i>	1B	D+; QL(8 EA daily)
Beta Blockers Cardio-Selective		
<i>acebutolol hcl CAPS</i>	1B	
<i>atenolol TABS</i>	1A	D+
<i>betaxolol hcl</i>	1B	
<i>bisoprolol fumarate</i>	1B	D+
<i>metoprolol succinate TB24 200 MG</i>	1B	D+; QL(2 EA daily)
<i>metoprolol succinate TB24 25 MG, 50 MG, 100 MG</i>	1B	D+
<i>metoprolol tartrate SOLN IV 5 MG/5ML</i>	1B	
<i>metoprolol tartrate TABS 25 MG, 50 MG, 100 MG</i>	1A	D+
<i>nebivolol hcl 20 MG</i>	3	QL(2 EA daily)
<i>nebivolol hcl 2.5 MG, 5 MG, 10 MG</i>	3	QL(1 EA daily)
Beta Blockers Non-Selective		
<i>HEMANGEOL SOLN PO</i>	4	QL(75 ML daily); PA
<i>nadolol TABS 80 MG</i>	1B	
<i>nadolol TABS 40 MG</i>	1B	QL(6 EA daily)
<i>nadolol TABS 20 MG</i>	1B	QL(3 EA daily)
<i>pindolol TABS</i>	1B	
<i>propranolol hcl CP24</i>	1B	QL(2 EA daily)
<i>propranolol hcl SOLN PO 20 MG/5ML, 40 MG/5ML</i>	1B	
<i>propranolol hcl TABS</i>	1B	
<i>sotalol hcl (afib/afl)</i>	1B	
<i>sotalol hcl TABS 80 MG, 120 MG, 160 MG</i>	1B	QL(2 EA daily)
<i>sotalol hcl TABS 240 MG</i>	1B	
<i>timolol maleate TABS</i>	1B	

Drug Name	Drug Tier	Requirements/ Limits
CALCIUM CHANNEL BLOCKERS - Drugs to Treat High Blood Pressure		
Calcium Channel Blockers		
<i>amlodipine besylate TABS</i>	1B	D+
<i>diltiazem hcl coated beads CP24 180 MG, 240 MG</i>	1B	QL(2 EA daily)
<i>diltiazem hcl coated beads CP24 120 MG, 300 MG, 360 MG</i>	1B	
<i>diltiazem hcl extended release beads 420 MG</i>	1B	
<i>diltiazem hcl extended release beads 120 MG, 180 MG, 240 MG, 300 MG, 360 MG</i>	1B	D+
<i>diltiazem hcl CP12</i>	1B	QL(2 EA daily)
<i>diltiazem hcl CP24</i>	1B	D+
<i>diltiazem hcl SOLN 50 MG/10ML</i>	1B	
<i>DILTIAZEM HCL SOLR</i>	1B	
<i>diltiazem hcl TABS</i>	1B	D+
<i>diltiazem hcl TB24</i>	1B	
<i>felodipine</i>	1B	D+
<i>isradipine CAPS</i>	1B	
<i>nicardipine hcl CAPS</i>	1B	
<i>nicardipine hcl SOLN</i>	1B	
<i>nifedipine CAPS 20 MG</i>	1B	QL(9 EA daily)
<i>nifedipine CAPS 10 MG</i>	1B	
<i>nifedipine TB24 30 MG</i>	1B	D+
<i>nifedipine TB24 90 MG</i>	1B	D+; QL(1 EA daily)
<i>nifedipine TB24</i>	1B	
<i>nifedipine TB24 60 MG</i>	1B	D+; QL(2 EA daily)
<i>nimodipine CAPS</i>	1B	
<i>nisoldipine</i>	1B	
<i>verapamil hcl CP24 100 MG, 200 MG, 300 MG</i>	1B	

Drug Name	Drug Tier	Requirements/ Limits
<i>verapamil hcl CP24 120 MG, 180 MG, 240 MG, 360 MG</i>	1B	QL(1 EA daily)
<i>verapamil hcl TABS</i>	1B	D+
<i>verapamil hcl TBCR</i>	1B	D+
CARDIOTONICS - Drugs to Treat Heart Failure and Abnormal Heart Rhythm		
Cardiac Glycosides		
<i>digoxin SOLN PO 0.05 MG/ML</i>	1B	
<i>digoxin TABS 62.5 MCG, 125 MCG, 250 MCG</i>	1B	
LANOXIN SOLN IJ (<i>digoxin</i>)	2	
LANOXIN TABS 62.5 MCG, 125 MCG, 250 MCG (<i>digoxin</i>)	2	
CARDIOVASCULAR AGENTS - MISC. - Drugs to Treat Heart and Circulation Conditions		
Cardiovascular Agents Misc. - Combinations		
<i>amlodipine besylate-atorvastatin calcium</i>	1B	QL(1 EA daily)
<i>isosorbide dinitrate-hydralazine hcl</i>	1B	
Impotence Agents		
<i>avanafil</i>	1B	QL(0.134 EA daily)
<i>sildenafil citrate</i>	1B	QL(0.1334 EA daily); PA
<i>tadalafil 5 MG</i>	1B	BPH Only; QL(1 EA daily); PA
Prostaglandin Vasodilators		
<i>epoprostenol sodium</i>	4	PA
ORENITRAM TBCR	4	PA
<i>treprostinil SOLN IJ</i>	4	SP; PA
TYVASO REFILL KIT SOLN IN	4	PA

Drug Name	Drug Tier	Requirements/ Limits
TYVASO STARTER KIT SOLN IN	4	PA
TYVASO SOLN IN	4	PA
Pulmonary Hypertension - Endothelin Receptor Antagonists		
<i>ambrisentan</i>	4	QL(1 EA daily); SP; PA
<i>bosentan TABS 62.5 MG</i>	4	QL(2 EA daily); PA
<i>bosentan TABS 125 MG</i>	4	QL(2 EA daily); SP; PA
<i>bosentan TBSO 32 MG</i>	4	QL(2 EA daily); SP; PA
TRACLEER TBSO 32 MG (<i>bosentan</i>)	4	QL(2 EA daily); SP; PA
Pulmonary Hypertension - Phosphodiesterase Inhibitors		
<i>sildenafil citrate (pulmonary hypertension) SOLN</i>	4	QL(37.5 ML daily); SP; PA
<i>sildenafil citrate (pulmonary hypertension) SUSR</i>	4	QL(6 ML daily); PA
<i>sildenafil citrate (pulmonary hypertension) TABS</i>	4	QL(3 EA daily); SP; PA
<i>tadalafil (pulmonary hypertension) TABS</i>	4	QL(2 EA daily); SP; PA
Pulmonary Hypertension - Prostacyclin Receptor Agonist		
UPTRA VI TITRATION TBPK	4	1 max fill(s) per 180 day(s) retail; PA
UPTRA VI TABS 200 MCG	4	PA
UPTRA VI TABS 400 MCG, 600 MCG, 800 MCG, 1000 MCG, 1200 MCG, 1400 MCG, 1600 MCG	4	QL(2 EA daily); PA
Pulmonary Hypertension - Sol Guanylate Cyclase Stimulator		

Drug Name	Drug Tier	Requirements/ Limits
ADEMPAS	4	QL(3 EA daily); PA
Sinus Node Inhibitors		
<i>ivabradine hcl TABS</i>	3	QL(2 EA daily); PA
CEPHALOSPORINS - Drugs to Treat Bacterial Infections		
Cephalosporins - 1st Generation		
<i>cefadroxil CAPS</i>	1B	
<i>cefadroxil SUSR</i>	1B	
<i>cefadroxil TABS</i>	1B	
<i>cefazolin sodium SOLR IJ 1 GM, 10 GM, 500 MG</i>	1B	
<i>cephalexin CAPS</i>	1B	
<i>cephalexin SUSR</i>	1B	
Cephalosporins - 2nd Generation		
<i>cefaclor CAPS</i>	1B	
<i>cefaclor SUSR 125 MG/5ML, 250 MG/5ML, 375 MG/5ML</i>	1B	
<i>cefotetan disodium IJ 1 GM, 2 GM</i>	1B	
<i>cefoxitin sodium IV 1 GM, 2 GM</i>	1B	
<i>cefprozil SUSR</i>	1B	
<i>cefprozil TABS</i>	1B	
<i>cefuroxime axetil TABS</i>	1B	
<i>cefuroxime sodium IJ 750 MG</i>	1B	
Cephalosporins - 3rd Generation		
<i>cefdinir CAPS</i>	1B	
<i>cefdinir SUSR</i>	1B	
<i>cefixime CAPS</i>	1B	
<i>cefixime SUSR</i>	1B	ST
<i>cefpodoxime proxetil SUSR</i>	1B	
<i>cefpodoxime proxetil TABS</i>	1B	

Drug Name	Drug Tier	Requirements/ Limits
<i>ceftazidime IJ 1 GM, 6 GM</i>	1B	
Cephalosporins - 4th Generation		
<i>cefepime hcl SOLR IV 2 GM</i>	1B	
Cephalosporins - 5th Generation		
TEFLARO	3	
CONTRACEPTIVES - Drugs to Prevent Pregnancy		
Combination Contraceptives - Oral		
<i>desogestrel & ethinyl estradiol</i>	0	
<i>desogestrel-ethinyl estradiol (biphasic)</i>	0	
<i>desogestrel-ethinyl estradiol (triphasic)</i>	0	
<i>drospirenone-ethinyl estradiol</i>	0	
<i>drospirenone-ethinyl estradiol-levomefolate calcium</i>	0	
<i>ethynodiol diacet & eth estrad</i>	0	
FEMLYV TBDP	0	
<i>levonorgestrel & eth estradiol TABS</i>	0	
<i>levonorgestrel-eth estradiol (triphasic)</i>	0	
<i>levonorgestrel-ethinyl estradiol (91-day) 0.03 MG-0.15 MG</i>	0	
<i>levonorgestrel-ethinyl estradiol (continuous)</i>	0	
<i>levonorgestrel-ethinyl estradiol-iron</i>	0	
LO LOESTRIN FE TABS	0	
NATAZIA	0	
NEXTSTELLIS	0	
<i>norethin acet & estrad-fe CAPS</i>	0	

Drug Name	Drug Tier	Requirements/ Limits
<i>norethin acet & estrad-fe CHEW</i>	0	
<i>norethin acet & estrad-fe TABS 1 MG-20 MCG-75 MG, 1.5 MG-30 MCG-75 MG</i>	0	
<i>norethindrone & eth estradiol</i>	0	
<i>norethindrone & ethinyl estradiol-fe</i>	0	
<i>norethindrone acet & eth estra TABS</i>	0	
<i>norethindrone acetate-ethinyl estradiol-fe</i>	0	
<i>norethindrone-eth estradiol (triphasic)</i>	0	
<i>norgestimate-ethinyl estradiol</i>	0	
<i>norgestimate-ethinyl estradiol (triphasic)</i>	0	
<i>norgestrel & ethinyl estradiol 30 MCG-0.3 MG</i>	0	
TYBLUME CHEW	0	
Combination Contraceptives - Transdermal		
<i>norelgestromin-ethinyl estradiol</i>	0	
TWIRLA	0	QL(3 EA per 28 day(s) retail; 9 EA per 84 days mail)
Combination Contraceptives - Vaginal		
ANNOVERA	0	
<i>etonogestrel-ethinyl estradiol</i>	0	QL(0.05 EA daily)
Copper Contraceptives - IUD		
MIUDELLA INTRAUTERINE COPPER	0	
PARAGARD INTRAUTERINE COPPER	0	
Emergency Contraceptives		
ELLA	0	

Drug Name	Drug Tier	Requirements/ Limits
<i>levonorgestrel (emergency oc) 1.5 MG</i>	0	
Progestin Contraceptives - Implants		
NEXPLANON	0	
Progestin Contraceptives - Injectable		
DEPO-SUBQ PROVERA 104 SUSY SC	0	
<i>medroxyprogesterone acetate (contraceptive) SUSP IM</i>	0	QL(1 ML per 90 day(s) retail)
<i>medroxyprogesterone acetate (contraceptive) SUSY IM</i>	0	QL(90 Day(s) limit ; 1 ML per 90 day(s) retail)
Progestin Contraceptives - IUD		
KYLEENA	0	
LILETTA (52 MG)	0	
MIRENA (52 MG)	0	
SKYLA	0	
Progestin Contraceptives - Oral		
<i>norethindrone (contraceptive)</i>	0	
OPILL	0	
SLYND	0	QL(1 EA daily)
CORTICOSTEROIDS - Steroid Hormone Drugs to Treat Systemic Swelling Conditions		
Glucocorticosteroids		
<i>budesonide CPEP</i>	1B	QL(3 EA daily)
<i>deflazacort TABS</i>	4	PA
DEPO-MEDROL SUSP	3	
DEXAMETHASONE INTENSOL CONC	1B	
<i>dexamethasone ELIX</i>	1B	
<i>dexamethasone SOLN</i>	1B	
<i>dexamethasone TABS 0.5 MG, 0.75 MG</i>	1A	

Drug Name	Drug Tier	Requirements/ Limits
<i>dexamethasone TABS 1 MG, 1.5 MG, 2 MG, 4 MG, 6 MG</i>	1B	
<i>hydrocortisone sod succinate 100 MG</i>	1B	2 max fill(s) per 30 day(s) retail
<i>hydrocortisone TABS</i>	1B	
MEDROL TABS	3	
<i>methylprednisolone acetate SUSP</i>	1B	
<i>methylprednisolone sod succ 40 MG, 125 MG, 500 MG, 1000 MG</i>	1B	
<i>methylprednisolone TABS</i>	1B	
<i>methylprednisolone TBPk</i>	1B	
<i>prednisolone sodium phosphate SOLN 5 MG/5ML, 10 MG/5ML, 15 MG/5ML, 25 MG/5ML</i>	1B	
<i>prednisolone sodium phosphate TBPk</i>	3	
<i>prednisolone SOLN</i>	1B	
<i>prednisolone TABS</i>	1B	
<i>prednisone SOLN</i>	1B	
<i>prednisone TABS 2.5 MG, 10 MG, 20 MG, 50 MG</i>	1A	
<i>prednisone TABS 1 MG, 5 MG</i>	1B	
<i>prednisone TBPk</i>	1B	
SOLU-CORTEF 250 MG	3	
SOLU-CORTEF 500 MG, 1000 MG	3	2 max fill(s) per 30 day(s) retail
SOLU-MEDROL 2 GM	3	
<i>triamcinolone acetonide SUSP 40 MG/ML</i>	1B	
Mineralocorticoids		
<i>fludrocortisone acetate TABS</i>	1B	
COUGH/COLD/ALLERGY - Drugs to Treat Cough, Cold and Allergy Symptoms		
Antitussives		

Drug Name	Drug Tier	Requirements/ Limits
<i>benzonatate 100 MG</i>	1B	QL(6 EA daily)
<i>benzonatate 150 MG</i>	1B	QL(4 EA daily)
<i>benzonatate 200 MG</i>	1B	QL(3 EA daily)
Cough/Cold/Allergy Combinations		
<i>hydrocodone polistirex-chlorpheniramine polistirex SUEr</i>	1B	
Misc. Respiratory Inhalants		
HYPERSAL NEBU	1B	
NEBUSAL NEBU	1B	
<i>sodium chloride (inhalant) NEBU 7 %</i>	1B	
Mucolytics		
<i>acetylcysteine SOLN</i>	1B	
DERMATOLOGICALS - Drugs to Treat Skin Conditions		
Acne Products		
<i>adapalene-benzoyl peroxide GEL 2.5 %-0.1 %</i>	1B	AL(At least 12 yrs old); ST
<i>adapalene CREA</i>	1B	AL(At least 12 yrs old)
<i>adapalene GEL</i>	1B	AL(At least 12 yrs old); RX/OTC
BENZEPRO CREAMY WASH LIQD	2	AL(At least 12 yrs old)
BENZEPRO FOAM 5.3 %	2	AL(At least 12 yrs old); RX/OTC
<i>benzoyl peroxide-erythromycin GEL</i>	1B	AL(At least 12 yrs old); PA
<i>benzoyl peroxide FOAM 5.3 %, 9.8 %</i>	1B	AL(At least 12 yrs old); RX/OTC
<i>benzoyl peroxide GEL 5 %</i>	1B	QL(3 GM daily); AL(At least 12 yrs old)
<i>benzoyl peroxide GEL 10 %</i>	1B	AL(At least 12 yrs old)

Drug Name	Drug Tier	Requirements/ Limits
<i>benzoyl peroxide LIQD 4 %</i> , <i>10 %</i>	1B	AL(At least 12 yrs old)
<i>clindamycin phosphate (topical) FOAM</i>	1B	AL(At least 12 yrs old); PA
<i>clindamycin phosphate (topical) GEL</i>	1B	QL(8 ML daily)
<i>clindamycin phosphate (topical) LOTN</i>	1B	AL(At least 12 yrs old)
<i>clindamycin phosphate (topical) SOLN</i>	1B	QL(4 ML daily); AL(At least 12 yrs old)
<i>clindamycin phosphate (topical) SWAB</i>	1B	AL(At least 12 yrs old)
<i>clindamycin phosphate-benzoyl peroxide (refrigerate)</i>	1B	AL(At least 12 yrs old); PA
<i>clindamycin phosphate-benzoyl peroxide GEL 5 %-1 %</i>	1B	AL(At least 12 yrs old); PA
<i>clindamycin phosphate-tretinoin</i>	1B	AL(At least 12 yrs old); ST
DIFFERIN LOTN	2	AL(At least 12 yrs old); ST
<i>erythromycin (acne aid) PADS</i>	1B	AL(At least 12 yrs old)
<i>erythromycin (acne aid) SOLN</i>	1B	AL(At least 12 yrs old)
<i>isotretinoin 10 MG, 20 MG, 30 MG, 40 MG</i>	3	AL(At least 12 yrs old); PA
PR BENZOYL PEROXIDE WASH LIQD	2	AL(At least 12 yrs old)
<i>sulfacetamide sodium (acne)</i>	1B	AL(At least 12 yrs old)
<i>sulfacetamide sodium w/ sulfur CREA 10 %-5 %</i>	1B	AL(At least 12 yrs old)
<i>sulfacetamide sodium w/ sulfur LIQD 10 %-5 %</i>	1B	AL(At least 12 yrs old)
<i>sulfacetamide sodium w/ sulfur LIQD 9 %-4.5 %</i>	1B	AL(At least 12 yrs old); ST
<i>tretinoin microsphere 0.1 %</i>	1B	QL(3 GM daily); AL(At least 12 yrs old - Up to 30 yrs old); PA

Drug Name	Drug Tier	Requirements/ Limits
<i>tretinoin CREA 0.025 %</i> , <i>0.05 %</i> , <i>0.1 %</i>	1B	QL(3 GM daily); AL(At least 12 yrs old - Up to 30 yrs old)
<i>tretinoin GEL 0.01 %</i> , <i>0.025 %</i>	1B	QL(3 GM daily); AL(At least 12 yrs old - Up to 30 yrs old)
Agents for External Genital and Perianal Warts		
VEREGEN	3	QL(1 GM daily)
Antibiotics - Topical		
ALTABAX	2	QL(15 GM per 30 day(s) retail; 15 GM per 30 days mail)
<i>gentamicin sulfate (topical) CREA</i>	1B	QL(1 GM daily)
<i>gentamicin sulfate (topical) OINT</i>	1B	
<i>mupirocin OINT</i>	1B	QL(6 GM daily)
NEO-SYNALAR	3	QL(60 GM per 30 day(s) retail; 60 GM per 30 days mail); PA
Antifungals - Topical		
<i>butenafine hcl</i>	1B	QL(6 GM daily)
<i>ciclopirox olamine CREA</i>	1B	QL(90 GM per fill retail); 1 max fill(s) per 30 day(s) retail
<i>ciclopirox olamine SUSP</i>	1B	
<i>ciclopirox GEL</i>	1B	QL(3.35 GM daily)
<i>ciclopirox SHAM</i>	1B	QL(10 ML daily)
<i>ciclopirox SOLN</i>	1B	QL(0.22 ML daily)
<i>clotrimazole (topical) CREA</i>	1B	QL(4.5 GM daily); RX/OTC
<i>clotrimazole (topical) SOLN</i>	1B	QL(10 ML daily); RX/OTC

Drug Name	Drug Tier	Requirements/ Limits
<i>clotrimazole w/ betamethasone CREA</i>	1B	QL(8 GM daily)
<i>clotrimazole w/ betamethasone LOTN</i>	1B	
<i>econazole nitrate CREA</i>	1B	QL(85 GM per fill retail; 85 per fill mail)
ERTACZO	3	QL(2.15 GM daily)
<i>ketoconazole (topical) CREA</i>	1B	QL(10 GM daily)
<i>ketoconazole (topical) SHAM 2 %</i>	1B	QL(20 ML daily)
<i>luliconazole</i>	1B	PA
<i>naftifine hcl CREA 1 %</i>	1B	QL(3 GM daily); 1 max fill(s) per 180 day(s) retail; 1 max fill(s) per 180 day(s) mail
<i>naftifine hcl CREA 2 %</i>	1B	QL(2 GM daily); 1 max fill(s) per 180 day(s) retail; 1 max fill(s) per 180 day(s) mail
<i>nystatin (topical) CREA</i>	1B	QL(10 GM daily)
<i>nystatin (topical) OINT</i>	1B	QL(6 GM daily)
<i>nystatin (topical) POWD EX</i>	1B	QL(10 GM daily)
<i>nystatin-triamcinolone CREA</i>	1B	QL(10 GM daily)
<i>nystatin-triamcinolone OINT</i>	1B	QL(4 GM daily)
<i>oxiconazole nitrate CREA</i>	1B	Limit 1 Fill per 180 days; QL(3 GM daily); 1 max fill(s) per 180 day(s) retail; 1 max fill(s) per 180 day(s) mail

Drug Name	Drug Tier	Requirements/ Limits
OXISTAT LOTN	2	Limit 1 Fill per 180 days; QL(2 ML daily); 1 max fill(s) per 180 day(s) retail; 1 max fill(s) per 180 day(s) mail
<i>sulconazole nitrate CREA</i>	1B	
<i>sulconazole nitrate SOLN</i>	1B	1 max fill(s) per 90 day(s) retail; 1 max fill(s) per 90 day(s) mail
<i>tavaborole</i>	1B	PA
Anti-inflammatory Agents - Topical		
<i>diclofenac epolamine PTCH EX</i>	1B	QL(2 EA daily); PA
<i>diclofenac sodium (topical) GEL EX</i>	1B	QL(3.34 GM daily); RX/OTC
Antineoplastic or Premalignant Lesion Agents - Topical		
<i>bexarotene (topical)</i>	4	SP; PA
<i>diclofenac sodium (actinic keratoses) EX</i>	1B	QL(3.34 GM daily); PA
<i>fluorouracil (topical) CREA 5 %</i>	1B	QL(4 GM daily)
<i>fluorouracil (topical) SOLN</i>	1B	QL(2 ML daily)
PANRETIN	3	QL(60 GM per 30 day(s) retail; 60 GM per 30 days mail)
Antipruritics - Topical		
<i>doxepin hcl (antipruritic)</i>	3	Limit 1 fill every 180 days; QL(45 GM per fill retail; 45 per fill mail); 1 max fill(s) per 180 day(s) retail; 1 max fill(s) per 180 day(s) mail; PA
Antipsoriatics		

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
<i>acitretin 25 MG</i>	1B	QL(2 EA daily)	<i>tazarotene CREA 0.1 %</i>	1B	QL(1 GM daily)
<i>acitretin 10 MG, 17.5 MG</i>	1B	QL(1 EA daily)	TREMFYA PEN SOAJ 100 MG/ML	4	QL(0.018 ML daily); PA
<i>calcipotriene CREA</i>	1B	QL(4 GM daily); PA	TREMFYA SOSY 100 MG/ML	4	QL(0.018 ML daily); PA
<i>calcipotriene OINT</i>	1B	QL(4 GM daily); PA	YESINTEK SOLN 45 MG/0.5ML	4	QL(0.012 ML daily); PA
<i>calcipotriene SOLN</i>	1B	QL(4 ML daily); PA	YESINTEK SOSY 45 MG/0.5ML	4	QL(0.012 ML daily); PA
<i>calcitriol (topical)</i>	1B	QL(3.34 GM daily)	YESINTEK SOSY 90 MG/ML	4	QL(0.018 ML daily); PA
COSENTYX (300 MG DOSE) SOSY	4	QL(0.072 ML daily); PA	Antiseborrheic Products		
COSENTYX SENSOREADY (300 MG) SOAJ	4	QL(0.072 ML daily); PA	<i>selenium sulfide LOTN 2.5 %</i>	1B	
COSENTYX SENSOREADY PEN SOAJ	4	QL(0.072 ML daily); PA	Antivirals - Topical		
COSENTYX UNOREADY SOAJ	4	QL(0.072 ML daily); PA	<i>acyclovir topical CREA</i>	1B	1 package(s) per fill retail; 1 package(s) per fill mail
COSENTYX SOSY 150 MG/ML	4	QL(0.036 ML daily); PA	<i>acyclovir topical OINT</i>	1B	1 package(s) per fill retail; 1 package(s) per fill mail
COSENTYX SOSY 75 MG/0.5ML	4	QL(0.18 ML daily); PA	<i>penciclovir</i>	3	QL(0.18 GM daily)
<i>methoxsalen rapid</i>	1B	QL(4 EA daily)	Burn Products		
PYZCHIVA SC 45 MG/0.5ML	4	QL(0.012 ML daily); PA	<i>mafenide acetate PACK</i>	3	
PYZCHIVA 45 MG/0.5ML	4	QL(0.012 ML daily); PA	<i>silver sulfadiazine</i>	1B	QL(20 GM daily)
PYZCHIVA 90 MG/ML	4	QL(0.018 ML daily); PA	SULFAMYLON CREA	3	
SKYRIZI PEN SOAJ	4	QL(0.025 ML daily); PA	Corticosteroids - Topical		
SKYRIZI SOSY	4	QL(0.025 ML daily); PA	<i>alclometasone dipropionate CREA</i>	1B	QL(2 GM daily)
STELARA SOLN 45 MG/0.5ML	4	QL(0.012 ML daily); PA	<i>alclometasone dipropionate OINT</i>	1B	QL(3 GM daily)
STELARA SOSY 45 MG/0.5ML	4	QL(0.012 ML daily); PA	<i>amcinonide CREA</i>	1B	QL(60 GM per fill retail; 60 per fill mail); 1 max fill(s) per 30 day(s) retail; 1 max fill(s) per 30 day(s) mail
STELARA SOSY 90 MG/ML	4	QL(0.018 ML daily); PA			
STEQEYMA 45 MG/0.5ML	4	QL(0.012 ML daily); PA			
STEQEYMA 90 MG/ML	4	QL(0.018 ML daily); PA			

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
<i>amcinonide LOTN</i>	3		<i>clobetasol propionate OINT 0.05 %</i>	1B	QL(1 GM daily); PA
<i>amcinonide OINT</i>	3		<i>clobetasol propionate SOLN 0.05 %</i>	1B	QL(3.34 ML daily); PA
<i>betamethasone dipropionate (topical) CREA</i>	1B	QL(3 GM daily)	<i>clocortolone pivalate</i>	3	QL(3 GM daily)
<i>betamethasone dipropionate (topical) LOTN</i>	1B		CORDRAN TAPE	3	1 package(s) per 30 day(s) retail; 3 package(s) per 90 day(s) mail
<i>betamethasone dipropionate (topical) OINT</i>	1B	QL(3 GM daily)	<i>desonide CREA</i>	1B	QL(4 GM daily)
<i>betamethasone dipropionate augmented CREA</i>	1B	QL(3.5 GM daily)	<i>desonide LOTN</i>	1B	QL(4 ML daily)
<i>betamethasone dipropionate augmented LOTN</i>	1B	QL(5 ML daily)	<i>desonide OINT</i>	1B	QL(3 GM daily)
<i>betamethasone dipropionate augmented OINT</i>	1B	QL(3.5 GM daily)	<i>desoximetasone CREA 0.25 %</i>	1B	QL(4 GM daily)
<i>betamethasone valerate CREA</i>	1B	QL(2.5 GM daily)	<i>desoximetasone GEL</i>	1B	QL(3 GM daily)
<i>betamethasone valerate FOAM</i>	1B	QL(1.67 GM daily)	<i>desoximetasone OINT 0.25 %</i>	1B	QL(4 GM daily)
<i>betamethasone valerate LOTN</i>	1B	QL(5 ML daily)	<i>diflorasone diacetate CREA</i>	1B	PA
<i>betamethasone valerate OINT</i>	1B	QL(3 GM daily)	<i>diflorasone diacetate OINT</i>	1B	PA
<i>calcipotriene-betamethasone dipropionate OINT</i>	1B	ST	<i>fluocinolone acetonide CREA 0.01 %</i>	1B	
<i>calcipotriene-betamethasone dipropionate SUSP</i>	1B	ST	<i>fluocinolone acetonide CREA 0.025 %</i>	1B	QL(4 GM daily)
<i>clobetasol propionate emollient base 0.05 %</i>	1B	QL(1 GM daily); PA	<i>fluocinolone acetonide OIL</i>	1B	QL(8 ML daily)
<i>clobetasol propionate CREA 0.05 %</i>	1B	QL(3 GM daily); PA	<i>fluocinolone acetonide OINT</i>	1B	QL(4 GM daily)
<i>clobetasol propionate FOAM</i>	1B	QL(3 GM daily); ST	<i>fluocinolone acetonide SOLN</i>	1B	QL(4 ML daily)
<i>clobetasol propionate GEL 0.05 %</i>	1B	QL(2 GM daily); ST	<i>fluocinonide emulsified base</i>	1B	QL(2 GM daily)
			<i>fluocinonide CREA 0.05 %</i>	1B	QL(2 GM daily)
			<i>fluocinonide CREA 0.1 %</i>	1B	QL(4 GM daily)
			<i>fluocinonide GEL</i>	1B	
			<i>fluocinonide OINT</i>	1B	QL(2 GM daily)
			<i>fluocinonide SOLN</i>	1B	QL(2 ML daily)
			<i>flurandrenolide CREA</i>	2	QL(2 GM daily)

Drug Name	Drug Tier	Requirements/ Limits
<i>flurandrenolide</i> LOTN	2	QL(2 ML daily)
<i>fluticasone propionate</i> CREA 0.05 %	1B	QL(4 GM daily)
<i>fluticasone propionate</i> LOTN	1B	QL(6 ML daily)
<i>fluticasone propionate</i> OINT	1B	QL(4 GM daily)
<i>halcinonide</i> CREA	1B	PA
<i>halobetasol propionate</i> CREA	1B	QL(3.5 GM daily)
<i>halobetasol propionate</i> OINT	1B	QL(3.5 GM daily)
HALOG OINT	3	PA
<i>hydrocortisone (topical)</i> CREA 1 %, 2.5 %	1B	QL(15.15 GM daily); RX/OTC
<i>hydrocortisone (topical)</i> LOTN 2.5 %	1B	
<i>hydrocortisone (topical)</i> OINT 1 %, 2.5 %	1B	QL(15.15 GM daily); RX/OTC
<i>hydrocortisone butyrate</i> CREA	1B	QL(3 GM daily)
<i>hydrocortisone butyrate</i> OINT	1B	QL(3 GM daily)
<i>hydrocortisone butyrate</i> SOLN	1B	QL(5 ML daily)
<i>hydrocortisone valerate</i> CREA	1B	
<i>hydrocortisone valerate</i> OINT	1B	
<i>mometasone furoate</i> CREA	1B	QL(3 GM daily)
<i>mometasone furoate</i> OINT	1B	QL(4 GM daily)
<i>mometasone furoate</i> SOLN	1B	QL(5 ML daily)
<i>triamcinolone acetonide (topical)</i> CREA 0.025 %	1B	QL(15.15 GM daily)
<i>triamcinolone acetonide (topical)</i> CREA 0.5 %	1B	QL(5 GM daily)
<i>triamcinolone acetonide (topical)</i> CREA 0.1 %	1B	QL(3.34 GM daily)

Drug Name	Drug Tier	Requirements/ Limits
<i>triamcinolone acetonide (topical)</i> LOTN 0.1 %	1B	QL(6 ML daily)
<i>triamcinolone acetonide (topical)</i> LOTN 0.025 %	1B	
<i>triamcinolone acetonide (topical)</i> OINT 0.025 %, 0.1 %	1B	QL(15.15 GM daily)
<i>triamcinolone acetonide (topical)</i> OINT 0.5 %	1B	QL(6 GM daily)
Eczema Agents		
DUPIXENT SOAJ 200 MG/1.14ML	4	QL(0.082 ML daily); PA
DUPIXENT SOAJ 300 MG/2ML	4	QL(0.29 ML daily); PA
DUPIXENT SOSY 200 MG/1.14ML	4	QL(0.082 ML daily); PA
DUPIXENT SOSY 100 MG/0.67ML	4	QL(0.048 ML daily); PA
DUPIXENT SOSY 300 MG/2ML	4	QL(0.29 ML daily); PA
Emollients		
<i>lactic acid (ammonium lactate)</i> CREA	1B	QL(12.9 GM daily); RX/OTC
<i>lactic acid (ammonium lactate)</i> LOTN 12 %	1B	RX/OTC
Enzymes - Topical		
SANTYL OINT	3	PA
Immunomodulating Agents - Topical		
<i>imiquimod</i> 5 %	1B	QL(12 EA per fill retail; 12 per fill mail)
Immunosuppressive Agents - Topical		
<i>pimecrolimus</i>	1B	QL(3 GM daily); AL(At least 2 yrs old); PA
<i>tacrolimus (topical)</i> OINT	1B	AL(At least 2 yrs old); PA
Keratolytic/Antimitotic/Vesicant Agents		
<i>podofilox</i> SOLN	1B	

Drug Name	Drug Tier	Requirements/ Limits
Local Anesthetics - Topical		
<i>lidocaine hcl GEL 2 %</i>	1B	QL(4 ML daily)
<i>lidocaine hcl PRSY</i>	1B	QL(4 ML daily)
<i>lidocaine hcl SOLN</i>	1B	QL(10 ML daily)
<i>lidocaine-prilocaine CREA</i>	1B	QL(1 GM daily)
<i>lidocaine PTCH 5 %</i>	1B	PA
SYNERA PTCH	3	QL(10 EA per fill retail; 10 per fill mail); 1 max fill(s) per 30 day(s) retail; 1 max fill(s) per 30 day(s) mail
Phosphodiesterase 4 (PDE4) Inhibitors - Topical		
EUCRISA	3	QL(2 GM daily); PA
Rosacea Agents		
<i>azelaic acid GEL</i>	1B	QL(1.67 GM daily)
<i>brimonidine tartrate (topical)</i>	3	QL(1 GM daily); PA
<i>metronidazole (topical) CREA</i>	1B	QL(3 GM daily)
<i>metronidazole (topical) GEL 0.75 %</i>	1B	QL(3 GM daily)
<i>metronidazole (topical) GEL 1 %</i>	1B	QL(5 GM daily)
<i>metronidazole (topical) LOTN</i>	1B	
Scabicides & Pediculicides		
<i>crotamiton LOTN</i>	1B	PA
<i>ivermectin (pediculicide)</i>	1B	PA
<i>malathion</i>	1B	
<i>permethrin CREA</i>	1B	
<i>permethrin LIQD EX</i>	1B	
<i>spinosad</i>	1B	PA
DIAGNOSTIC PRODUCTS		
Diagnostic Drugs		

Drug Name	Drug Tier	Requirements/ Limits
GLUCAGEN DIAGNOSTIC	3	QL(0.035 EA daily)
THYROGEN 0.9 MG	3	1 max fill(s) per 365 day(s) retail; 1 max fill(s) per 365 day(s) mail; PA
Diagnostic Tests		
CHEMSTRIP K STRP	1B	D
FORA GTEL BLOOD KETONE TEST	1B	D
FORA TEST N'GO ADV-VOICE-6 CON	1B	D
GOJJI BLOOD KETONE TEST	1B	D
KETONE TEST STRP	1B	D
KETOSTIX STRP	1B	D
NOVA MAX PLUS KETONE TEST	1B	D
PRECISION XTRA KETONE	1B	D
RELION KETONE TEST STRP	1B	D
RELION TRUE METRIX TEST STRIPS STRP	1B	D; QL(3.34 EA daily); RX/OTC
TRUE METRIX BLOOD GLUCOSE TEST STRP	1B	D; QL(3.34 EA daily); RX/OTC
DIGESTIVE AIDS - Drugs to Treat Low Digestive Enzymes		
Digestive Enzymes		
CREON CPEP	2	Non-FDA approved uses require Prior Authorization

Drug Name	Drug Tier	Requirements/ Limits
ZENPEP CPEP 105000 UNIT-79000 UNIT-25000 UNIT, 14000 UNIT-10000 UNIT-3000 UNIT, 168000 UNIT-126000 UNIT-40000 UNIT, 24000 UNIT-17000 UNIT-5000 UNIT, 42000 UNIT-32000 UNIT-10000 UNIT, 63000 UNIT-47000 UNIT-15000 UNIT, 84000 UNIT-63000 UNIT-20000 UNIT	2	Non-FDA approved uses require Prior Authorization
ZENPEP CPEP 252600 UNIT-189600 UNIT-60000 UNIT	2	
DIURETICS - Drugs to Treat Heart, Circulation Conditions and Blood Pressure		
Carbonic Anhydrase Inhibitors		
<i>acetazolamide sodium</i>	1B	
<i>acetazolamide CP12</i>	1B	QL(2 EA daily)
<i>acetazolamide TABS 250 MG</i>	1B	QL(4 EA daily)
<i>acetazolamide TABS 125 MG</i>	1B	QL(8 EA daily)
<i>methazolamide TABS</i>	1B	QL(6 EA daily)
Diuretic Combinations		
<i>amiloride & hydrochlorothiazide</i>	1B	
<i>spironolactone & hydrochlorothiazide</i>	1B	
<i>triamterene & hydrochlorothiazide CAPS 25 MG-37.5 MG</i>	1A	
<i>triamterene & hydrochlorothiazide TABS</i>	1A	
Loop Diuretics		
<i>bumetanide SOLN 0.25 MG/ML</i>	1B	
<i>bumetanide TABS</i>	1B	QL(5 EA daily)
<i>ethacrynic acid</i>	1B	QL(16 EA daily)

Drug Name	Drug Tier	Requirements/ Limits
<i>furosemide SOLN PO 8 MG/ML, 10 MG/ML</i>	1B	
<i>furosemide TABS</i>	1A	
<i>torsemide TABS</i>	1B	
Potassium Sparing Diuretics		
<i>amiloride hcl TABS</i>	1B	
<i>spironolactone TABS</i>	1B	
<i>triamterene CAPS</i>	1B	QL(3 EA daily)
Thiazides and Thiazide-Like Diuretics		
<i>chlorthalidone 25 MG, 50 MG</i>	1A	
DIURIL SUSP	2	QL(20 ML daily)
<i>hydrochlorothiazide CAPS</i>	1B	QL(2 EA daily)
<i>hydrochlorothiazide TABS 25 MG, 50 MG</i>	1A	QL(2 EA daily)
<i>hydrochlorothiazide TABS 12.5 MG</i>	1B	QL(2 EA daily)
<i>indapamide TABS 2.5 MG</i>	1A	QL(2 EA daily)
<i>indapamide TABS 1.25 MG</i>	1A	QL(1 EA daily)
<i>metolazone</i>	1B	QL(2 EA daily)
ENDOCRINE AND METABOLIC AGENTS - MISC. - Drugs to Treat Bone Disease and Regulate Hormones		
Bone Density Regulators		
<i>alendronate sodium TABS 35 MG, 70 MG</i>	1A	QL(0.143 EA daily)
<i>alendronate sodium TABS 5 MG, 10 MG</i>	1A	QL(1 EA daily)
<i>calcitonin (salmon) NA</i>	1B	QL(0.14 ML daily)
FOSAMAX PLUS D	3	QL(0.143 EA daily); PA
<i>ibandronate sodium SOLN</i>	4	SP; PA
<i>ibandronate sodium TABS</i>	1B	QL(0.036 EA daily)

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
<i>pamidronate disodium SOLN 30 MG/10ML, 90 MG/10ML</i>	4	SP; PA	NORDITROPIN FLEXPPO SOPN 30 MG/3ML	4	PA
PAMIDRONATE DISODIUM SOLN	4	SP; PA	ZORBTIVE SC	4	SP; PA
PROLIA SOSY	4	1 max fill(s) per 180 day(s) retail; SP; PA	Hormone Receptor Modulators		
<i>risedronate sodium TABS 35 MG</i>	1B	QL(0.143 EA daily); PA	OSPHEA	3	PA
<i>risedronate sodium TABS 150 MG</i>	1B	QL(0.036 EA daily); PA	<i>raloxifene hcl</i>	0	QL(1 EA daily)
<i>risedronate sodium TABS 5 MG, 30 MG</i>	1B	QL(1 EA daily); PA	Insulin-Like Growth Factors (Somatomedins)		
<i>risedronate sodium TBEC</i>	1B	PA	INCRELEX	4	SP; PA
<i>teriparatide SOPN</i>	4	QL(0.09 ML daily); SP; PA	LHRH/GnRH Agonist Analog Pituitary Suppressants		
TYMLOS	4	PA	FENSOLVI (6 MONTH) SC	4	SP; PA
<i>zoledronic acid SOLN</i>	4	SP; PA	SYNAREL	4	SP; PA
Corticotropin			Metabolic Modifiers		
ACTHAR GEL PEN SC 40 UNIT/0.5ML, 80 UNIT/ML	3	PA	ALDURAZYME	4	SP; PA
ACTHAR GEL	3	PA	<i>betaine</i>	4	SP; PA
Fertility Regulators			<i>calcitriol CAPS</i>	1B	
CHORIONIC GONADOTROPIN IM	4	PA	<i>calcitriol SOLN IV</i>	1B	
<i>clomiphene citrate TABS</i>	3	PA	<i>cinacalcet hcl</i>	1B	QL(4 EA daily); SP; PA
NOVAREL IM 10000 UNIT	4	PA	<i>doxercalciferol CAPS</i>	1B	
GnRH/LHRH Antagonists			<i>doxercalciferol SOLN</i>	1B	
<i>ganirelix acetate</i>	4	PA	ELAPRASE	4	SP; PA
ORILISSA	2	PA	MYALEPT	4	PA
Growth Hormones			<i>nitisinone CAPS</i>	4	PA
GENOTROPIN MINIQUICK PRSY	4	PA	<i>paricalcitol CAPS</i>	1B	
GENOTROPIN CART SC	4	PA	<i>paricalcitol SOLN</i>	1B	
HUMATROPE CART IJ	4	SP; PA	<i>sodium phenylbutyrate POWD</i>	1B	PA
NORDITROPIN FLEXPPO SOPN 5 MG/1.5ML, 10 MG/1.5ML, 15 MG/1.5ML	4	SP; PA	<i>sodium phenylbutyrate TABS</i>	1B	PA
			Posterior Pituitary Hormones		
			<i>desmopressin acetate spray</i>	1B	
			<i>desmopressin acetate spray refrigerated 0.01 %</i>	1B	

Drug Name	Drug Tier	Requirements/ Limits
<i>desmopressin acetate SOLN IJ</i>	1B	PA
DESMOPRESSIN ACETATE SOLN NA	4	SP; PA
<i>desmopressin acetate TABS 0.2 MG</i>	1B	QL(8 EA daily)
<i>desmopressin acetate TABS 0.1 MG</i>	1B	QL(6 EA daily)
Prolactin Inhibitors		
<i>cabergoline</i>	1B	
Somatostatic Agents		
<i>octreotide acetate SOLN</i>	4	SP; PA
SIGNIFOR	4	PA
Vasopressin Receptor Antagonists		
<i>tolvaptan TABS</i>	4	QL(2 EA daily); SP; PA
ESTROGENS - Hormone Replacement/Modifying Drugs		
Estrogen Combinations		
ANGELIQ	3	
BIJUVA	3	
CLIMARA PRO	3	
COMBIPATCH PTTW	3	
DUAVEE	3	
<i>esterified estrogens & methyltestosterone</i>	3	
<i>estradiol & norethindrone acetate TABS</i>	3	
<i>norethindrone acetate-ethinyl estradiol</i>	1B	
PREMPHASE	2	
PREMPRO	2	QL(1 EA daily)
Estrogens		
DEPO-ESTRADIOL	3	
ELESTRIN GEL	3	
<i>estradiol valerate</i>	1B	
<i>estradiol GEL</i>	1B	

Drug Name	Drug Tier	Requirements/ Limits
<i>estradiol GEL</i>	3	
<i>estradiol PTTW</i>	1B	QL(0.572 EA daily)
<i>estradiol PTWK</i>	1B	
<i>estradiol TABS</i>	1B	
EVAMIST SOLN	3	
MENEST 2.5 MG	3	
MENOSTAR PTWK	3	
PREMARIN SOLR	2	
PREMARIN TABS	2	QL(1 EA daily)
FLUOROQUINOLONES - Drugs to Treat Bacterial Infections		
Fluoroquinolones		
BAXDELA SOLR	3	PA
BAXDELA TABS	3	PA
<i>ciprofloxacin hcl TABS</i>	1B	
<i>ciprofloxacin in d5w 200 MG/100ML</i>	3	
<i>levofloxacin in d5w 500 MG/100ML</i>	1B	
<i>levofloxacin SOLN PO</i>	1B	
<i>levofloxacin TABS 500 MG</i>	1A	
<i>levofloxacin TABS 250 MG, 750 MG</i>	1B	
<i>moxifloxacin hcl in sodium chloride</i>	1B	
<i>moxifloxacin hcl TABS</i>	1B	
<i>ofloxacin 300 MG, 400 MG</i>	1B	
GASTROINTESTINAL AGENTS - MISC. - Miscellaneous Gastrointestinal Drugs		
5-HT4 Receptor Agonists		
<i>prucalopride succinate</i>	1B	QL(1 EA daily)
Agents for Chronic Idiopathic Constipation (CIC)		
TRULANCE	2	QL(1 EA daily)
Gallstone Solubilizing Agents		

Drug Name	Drug Tier	Requirements/ Limits
<i>ursodiol CAPS</i>	1B	QL(3 EA daily)
<i>ursodiol TABS</i>	1B	
Gastrointestinal Chloride Channel Activators		
<i>lubiprostone</i>	1B	QL(2 EA daily)
Gastrointestinal Stimulants		
<i>metoclopramide hcl SOLN IJ 5 MG/ML</i>	1B	
<i>metoclopramide hcl SOLN PO 5 MG/5ML, 10 MG/10ML</i>	1B	QL(60 ML daily)
<i>metoclopramide hcl TABS</i>	1A	QL(6 EA daily)
Inflammatory Bowel Agents		
<i>balsalazide disodium CAPS</i>	1B	QL(9 EA daily)
DIPENTUM	2	
INFLECTRA SOLR	4	PA
<i>mesalamine CP24</i>	1B	
<i>mesalamine CPDR</i>	1B	
<i>mesalamine ENEM</i>	3	
<i>mesalamine SUPP</i>	3	
<i>mesalamine TBEC 1.2 GM</i>	3	
<i>mesalamine TBEC 800 MG</i>	3	QL(6 EA daily)
PYZCHIVA 130 MG/26ML	4	QL(3.47 ML daily); PA
RENFLEXIS	4	PA
SKYRIZI SOCT	4	QL(0.043 ML daily); PA
SKYRIZI SOLN	4	QL(0.36 ML daily); PA
STELARA 130 MG/26ML	4	QL(3.47 ML daily); PA
STEQEYMA	4	QL(3.47 ML daily); PA
<i>sulfasalazine TABS</i>	1B	
<i>sulfasalazine TBEC</i>	1B	
TREMFYA PEN SOAJ SC 200 MG/2ML	4	QL(0.072 ML daily); PA

Drug Name	Drug Tier	Requirements/ Limits
TREMFYA-CD/UC INDUCTION SOAJ SC 200 MG/2ML	4	QL(0.143 ML daily); PA
TREMFYA SOLN IV	4	QL(0.72 ML daily); PA
TREMFYA SOSY SC 200 MG/2ML	4	QL(0.072 ML daily); PA
YESINTEK 130 MG/26ML	4	QL(3.47 ML daily); PA
Intestinal Acidifiers		
<i>lactulose (encephalopathy)</i>	1B	
Irritable Bowel Syndrome (IBS) Agents		
<i>alosetron hcl</i>	1B	QL(2 EA daily)
LINZESS	2	QL(1 EA daily)
Peripheral Opioid Receptor Antagonists		
<i>alvimopan</i>	1B	
MOVANTIK	3	QL(1 EA daily); PA
Phosphate Binder Agents		
<i>calcium acetate (phosphate binder) CAPS</i>	1B	
<i>calcium acetate (phosphate binder) TABS</i>	1B	RX/OTC
<i>lanthanum carbonate CHEW</i>	1B	
<i>sevelamer carbonate PACK</i>	1B	
<i>sevelamer carbonate TABS</i>	1B	
VELPHORO	3	PA
GENITOURINARY AGENTS - MISCELLANEOUS - Miscellaneous Drugs to Treat Reproductive Organs and Urinary System		
Alkalinizers		
<i>potassium citrate (alkalinizer) TBCR</i>	1B	
<i>sodium citrate & citric acid</i>	1B	RX/OTC
Cystinosis Agents		

Drug Name	Drug Tier	Requirements/ Limits
CYSTAGON CAPS	3	PA
Genitourinary Irrigants		
<i>acetic acid 0.25 %</i>	1B	
<i>glycine (gu irrigant) SOLN 1.5 %</i>	1B	
<i>sodium chloride (gu irrigant) 0.9 %</i>	1B	
SORBITOL 3 %	1B	
SORBITOL-MANNITOL 2.7 GM/100ML-0.54 GM/100ML	1B	
Interstitial Cystitis Agents		
ELMIRON CAPS	2	QL(3 EA daily)
Prostatic Hypertrophy Agents		
<i>alfuzosin hcl</i>	1B	QL(1 EA daily)
<i>dutasteride</i>	1B	QL(1 EA daily)
<i>dutasteride-tamsulosin hcl</i>	1B	PA
<i>finasteride</i>	1B	5 mg only
<i>silodosin</i>	1B	
<i>tamsulosin hcl</i>	1B	
Urinary Analgesics		
<i>phenazopyridine hcl TABS 100 MG, 200 MG</i>	1B	
GOUT AGENTS - Drugs to Treat Gout		
Gout Agent Combinations		
<i>colchicine w/ probenecid</i>	1B	
Gout Agents		
<i>allopurinol 100 MG, 300 MG</i>	1A	
<i>colchicine TABS</i>	1B	QL(1 EA daily)
<i>febuxostat</i>	1B	QL(1 EA daily); PA
Uricosurics		
<i>probenecid</i>	1B	
HEMATOLOGICAL AGENTS - MISC. - Drugs to Treat Blood Disorders		

Drug Name	Drug Tier	Requirements/ Limits
Antihemophilic Products		
AFSTYLA 250 UNIT, 500 UNIT, 1000 UNIT, 1500 UNIT, 2000 UNIT, 2500 UNIT	4	PA
Bradykinin B2 Receptor Antagonists		
<i>icatibant acetate SOSY</i>	4	QL(9 ML daily); PA
Complement Inhibitors		
GOHIBIC	4	PA
HAEGARDA SOLR SC	4	PA
Hematorheologic Agents		
<i>pentoxifylline</i>	1B	QL(3 EA daily)
Plasma Kallikrein Inhibitors		
ORLADEYO	4	PA
TAKHZYRO SOLN	4	PA
TAKHZYRO SOSY	4	PA
Platelet Aggregation Inhibitors		
<i>anagrelide hcl</i>	1B	
<i>aspirin-dipyridamole</i>	1B	QL(2 EA daily); PA
<i>cilostazol</i>	1B	
<i>clopidogrel bisulfate 300 MG</i>	1B	
<i>clopidogrel bisulfate 75 MG</i>	1A	QL(1 EA daily)
<i>dipyridamole</i>	1B	
<i>eptifibatide 200 MG/100ML</i>	4	PA
<i>prasugrel hcl</i>	1B	QL(1 EA daily)
<i>ticagrelor 60 MG, 90 MG</i>	1B	QL(2 EA daily)
ZONTIVITY	3	PA
HEMATOPOIETIC AGENTS - Drugs to Treat Blood Disorders		
Agents for Gaucher Disease		
CERDELGA	4	QL(2 EA daily); PA

Drug Name	Drug Tier	Requirements/ Limits
<i>miglustat</i>	4	QL(3 EA daily); SP; PA
Agents for Sickle Cell Disease		
DROXIA CAPS	3	
Cobalamins		
<i>cyanocobalamin SOLN IJ 1000 MCG/ML</i>	1B	QL(1 ML daily)
Folic Acid/Folates		
<i>folic acid TABS</i>	0	
Hematopoietic Growth Factors		
ARANESP (ALBUMIN FREE) SOLN 25 MCG/ML	4	SP; PA
ARANESP (ALBUMIN FREE) SOLN 40 MCG/ML, 60 MCG/ML, 100 MCG/ML	4	SP; PA
ARANESP (ALBUMIN FREE) SOSY 150 MCG/0.3ML, 200 MCG/0.4ML, 300 MCG/0.6ML, 500 MCG/ML	4	SP; PA
<i>eltrombopag olamine PACK 12.5 MG, 25 MG</i>	3	QL(1 EA daily); PA
<i>eltrombopag olamine TABS 12.5 MG, 25 MG, 50 MG, 75 MG</i>	3	QL(1 EA daily); PA
LEUKINE SOLR IJ	4	SP; PA
MIRCERA	4	PA
NYVEPRIA	4	PA
RETACRIT	4	PA
UDENYCA ONBODY SOSY	4	PA
UDENYCA SOAJ	4	PA
UDENYCA SOSY	4	PA
ZARXIO	4	PA
Hematopoietic Mixtures		
HEMATINIC/FOLIC ACID	1B	QL(1 EA daily)
Iron		

Drug Name	Drug Tier	Requirements/ Limits
<i>ferrous sulfate SOLN 15 MG/ML, 15 MG/ML</i>	0	AL(Up to 1 yrs old)
<i>ferrous sulfate TABS 325 MG, 65 MG, 325 MG</i>	0	
<i>ferrous sulfate TBEC 325 MG</i>	0	
HEMOSTATICS - Drugs to Stop Bleeding/Treat Blood Disorders		
Hemostatics - Systemic		
<i>aminocaproic acid TABS</i>	1B	PA
<i>tranexamic acid SOLN 1000 MG/10ML</i>	1B	
<i>tranexamic acid TABS</i>	1B	
HYPNOTICS/SEDATIVES/SLEEP DISORDER AGENTS		
Barbiturate Hypnotics		
<i>phenobarbital ELIX</i>	1B	
<i>phenobarbital TABS</i>	1B	
Hypnotics - Tricyclic Agents		
<i>doxepin hcl (sleep)</i>	1B	QL(1 EA daily); PA
Non-Barbiturate Hypnotics		
<i>estazolam</i>	1B	
<i>eszopiclone</i>	1B	QL(1 EA daily); AL(At least 18 yrs old); ST
<i>flurazepam hcl</i>	1B	PA
<i>temazepam 15 MG, 30 MG</i>	1A	QL(1 EA daily)
<i>temazepam 7.5 MG, 22.5 MG</i>	1B	QL(1 EA daily)
<i>triazolam</i>	1B	
<i>zaleplon 5 MG</i>	1B	QL(1 EA daily); AL(At least 18 yrs old)
<i>zaleplon 10 MG</i>	1B	QL(2 EA daily); AL(At least 18 yrs old)

Drug Name	Drug Tier	Requirements/ Limits
<i>zolpidem tartrate TABS</i>	1A	QL(1 EA daily); AL(At least 18 yrs old)
<i>zolpidem tartrate TBCR</i>	1B	QL(1 EA daily)
Orexin Receptor Antagonists		
<i>BELSOMRA</i>	3	PA
Selective Melatonin Receptor Agonists		
<i>ramelteon</i>	1B	QL(1 EA daily); AL(At least 18 yrs old)
LAXATIVES - Bowel Treatment Drugs		
Bulk Laxatives		
<i>calcium polycarbophil TABS</i>	1B	
Laxative Combinations		
<i>peg 3350-kcl-nacl-na sulfate-na ascorbate-ascorbic acid</i>	1B	
<i>peg 3350-kcl-sod bicarb-sod chloride-sod sulfate SOLR 236 GM</i>	0	
<i>peg 3350-potassium chloride-sod bicarbonate-sod chloride</i>	1B	PA
<i>sodium sulfate-potassium sulfate-magnesium sulfate</i>	1B	
Laxatives - Miscellaneous		
<i>lactulose SOLN</i>	1B	
Stimulant Laxatives		
<i>bisacodyl SUPP</i>	1A	
<i>bisacodyl TBEC</i>	1A	
Surfactant Laxatives		
<i>docusate calcium</i>	1A	QL(1 EA daily)
<i>docusate sodium CAPS 250 MG</i>	1A	
<i>docusate sodium CAPS 100 MG</i>	1A	QL(4 EA daily)
MACROLIDES - Drugs to Treat Bacterial Infections		

Drug Name	Drug Tier	Requirements/ Limits
Azithromycin		
<i>azithromycin PACK</i>	1B	
<i>azithromycin SUSR</i>	1B	
<i>azithromycin TABS 250 MG</i>	1B	QL(6 EA per fill retail; 6 per fill mail)
<i>azithromycin TABS 600 MG</i>	1B	QL(0.286 EA daily)
<i>azithromycin TABS 500 MG</i>	1B	QL(4 EA per fill retail; 4 per fill mail)
Clarithromycin		
<i>clarithromycin SUSR</i>	1B	
<i>clarithromycin TABS</i>	1B	
<i>clarithromycin TB24</i>	1B	
Erythromycins		
<i>erythromycin base CPEP</i>	3	
<i>erythromycin base TABS</i>	3	
<i>erythromycin base TBEC</i>	1B	
<i>erythromycin ethylsuccinate SUSR</i>	1B	
<i>erythromycin ethylsuccinate TABS</i>	3	
Fidaxomicin		
<i>DIFICID TABS 200 MG (fidaxomicin)</i>	2	
<i>fidaxomicin TABS 200 MG</i>	1B	
MEDICAL DEVICES AND SUPPLIES		
Contraceptives		
<i>AIMSCO LUBRICATED MISC</i>	0	
<i>CAYA DPRH</i>	0	
<i>DUREX EXTRA SENSITIVE THIN DEVI</i>	0	
<i>DUREX EXTRA SENSITIVE THIN MISC</i>	0	
<i>DUREX TROPICAL MISC</i>	0	

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
FANTASY LUBRICATED/SPERMICIDE MISC	0		TROJAN BARESKIN DEVI	0	
FANTASY LUBRICATED MISC	0		TROJAN MAGNUM MISC	0	
FC2 FEMALE CONDOM	0	QL(12 EA per fill retail; 12 per fill mail); 1 max fill(s) per 90 day(s) retail; 1 max fill(s) per 90 day(s) mail	TROJAN ULTRA THIN/SPERMICIDAL MISC	0	
FEMCAP DEVI	0		TROJAN ULTRA THIN MISC	0	
KAMELEON LUBRICATED MISC	0		TROJAN-ENZ LUBRICATED MISC	0	
KIMONO COLORS DEVI	0		TROJAN-ENZ/SPERMICIDAL MISC	0	
KIMONO MAXX-LARGE FLARE MISC	0		TRUE COVER DEVI	0	
KIMONO MICRO THIN PLUS MISC	0		TRUSTEX COLOR CONDOMS + LUBE MISC	0	
KIMONO PLUS MISC	0		TRUSTEX LUB/RIBBED/STUDDED MISC	0	
KIMONO PS PLUS MISC	0		TRUSTEX LUB/SPERMICIDE EX ST MISC	0	
KIMONO PS MISC	0		TRUSTEX LUB/SPERMICIDE XL MISC	0	
KIMONO SENSATION PLUS MISC	0		TRUSTEX LUBRICATED EX LARGE MISC	0	
KIMONO SENSATION MISC	0		TRUSTEX LUBRICATED EXTRA ST MISC	0	
KIMONO SPECIAL DEVI	0		TRUSTEX LUBRICATED/SPERMICIDE MISC	0	
KIMONO MISC	0		TRUSTEX LUBRICATED MISC	0	
K-Y ME & YOU EXTRA LUBRICATED DEVI	0		TRUSTEX NATURAL CONDOMS + LUBE MISC	0	
K-Y ME & YOU INTENSE DEVI	0		TRUSTEX RIA LUB/SPERMICIDE MISC	0	
MAXX PLUS MISC	0		TRUSTEX RIA LUBRICATED MISC	0	
MAXX MISC	0		TRUSTEX-NONOXYNOL-9/RIB/STUD MISC	0	
OMNIFLEX DIAPHRAGM	0		WIDE-SEAL DIAPHRAGM 60	0	
REALITY LATEX CONDOMS MISC	0				
REALITY LATEX/ULTRA TEXTURED DEVI	0				
REALITY LATEX/ULTRA THIN DEVI	0				

Ambetter Formulary Updated January 2026

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
WIDE-SEAL DIAPHRAGM 65	0		TRUE METRIX LEVEL 3 SOLN	1B	D
WIDE-SEAL DIAPHRAGM 70	0		Parenteral Therapy Supplies		
WIDE-SEAL DIAPHRAGM 75	0		BD PEN NEEDLE NANO 2ND GEN	1B	D; QL(5 EA daily); RX/OTC
WIDE-SEAL DIAPHRAGM 80	0		EMBECTA AUTOSHIELD DUO	1B	D; QL(5 EA daily); RX/OTC
WIDE-SEAL DIAPHRAGM 85	0		EMBECTA PEN NEEDLE NANO	1B	D; QL(5 EA daily); RX/OTC
WIDE-SEAL DIAPHRAGM 90	0		EMBECTA PEN NEEDLE NANO 2 GEN	1B	D; QL(5 EA daily); RX/OTC
WIDE-SEAL DIAPHRAGM 95	0		EMBECTA PEN NEEDLE ULTRAFINE	1B	D; QL(5 EA daily)
Diabetic Supplies			SELECT INSULIN SYRINGES	1B	5/day; #
FREESTYLE LIBRE 14 DAY READER	3	PA	SELECT INSULIN SYRINGES	1	5/day
FREESTYLE LIBRE 14 DAY SENSOR	3	QL(0.072 EA daily); PA	MIGRAINE PRODUCTS - Drugs to Treat Migraine Headaches		
FREESTYLE LIBRE 2 PLUS SENSOR	3	QL(0.072 EA daily); PA	Calcitonin Gene-Related Peptide (CGRP) Receptor Antag		
FREESTYLE LIBRE 2 READER	3	PA	AIMOVIG	2	QL(0.04 ML daily); PA
FREESTYLE LIBRE 2 SENSOR	3	QL(0.072 EA daily); PA	EMGALITY (300 MG DOSE) SOSY	2	QL(0.1 ML daily); PA
FREESTYLE LIBRE 3 PLUS SENSOR	3	QL(0.072 EA daily); PA	EMGALITY SOAJ	2	QL(0.07 ML daily); PA
FREESTYLE LIBRE 3 READER	3	QL(1 EA per 365 day(s) retail); PA	EMGALITY SOSY	2	QL(0.07 ML daily); PA
FREESTYLE LIBRE 3 SENSOR	3	QL(0.072 EA daily); PA	UBRELVY 50 MG	3	QL(10 EA per 30 day(s) retail; 10 EA per 30 days mail); ST
FREESTYLE LIBRE READER	3	PA	UBRELVY 100 MG	3	QL(16 EA per 30 day(s) retail; 16 EA per 30 days mail); ST
ONETOUCH DELICA SAFETY LANCING	1B	D; RX/OTC	Migraine Combinations		
RELION LANCET DEVICES 30G	1B	D; RX/OTC	<i>ergotamine w/ caffeine TABS</i>	1B	QL(1.5 EA daily)
RELION LANCETS	1B	D; RX/OTC			
SELECT LANCETS	1B	6.66/day			
SELECT LANCETS	1	6.66/day			

Drug Name	Drug Tier	Requirements/ Limits
<i>sumatriptan-naproxen sodium</i>	3	QL(10 EA per 30 day(s) retail; 10 EA per 30 days mail)
Migraine Products		
<i>dihydroergotamine mesylate SOLN NA 4 MG/ML</i>	1B	QL(0.267 ML daily)
<i>dihydroergotamine mesylate SOLN IJ 1 MG/ML</i>	1B	
ERGOMAR SUBL	3	QL(0.667 EA daily)
Serotonin Agonists		
<i>almotriptan malate 6.25 MG</i>	1B	QL(0.3 EA daily); AL(At least 12 yrs old); ST
<i>almotriptan malate 12.5 MG</i>	1B	QL(0.4 EA daily); AL(At least 12 yrs old); ST
<i>eletriptan hydrobromide</i>	1B	QL(0.2 EA daily); AL(At least 18 yrs old); ST
<i>frovatriptan succinate</i>	1B	QL(0.4 EA daily); AL(At least 18 yrs old); ST
<i>naratriptan hcl</i>	1B	QL(0.3 EA daily); AL(At least 18 yrs old)
<i>rizatriptan benzoate TABS 10 MG</i>	1B	QL(0.6 EA daily); AL(At least 6 yrs old)
<i>rizatriptan benzoate TABS 5 MG</i>	1B	QL(0.4 EA daily); AL(At least 6 yrs old)
<i>rizatriptan benzoate TBDP 10 MG</i>	1B	QL(0.6 EA daily); AL(At least 6 yrs old)
<i>rizatriptan benzoate TBDP 5 MG</i>	1B	QL(0.4 EA daily); AL(At least 6 yrs old)

Drug Name	Drug Tier	Requirements/ Limits
<i>sumatriptan</i>	1B	QL(0.2 EA daily); AL(At least 18 yrs old)
<i>sumatriptan succinate SOAJ</i>	1B	QL(0.134 ML daily); AL(At least 18 yrs old)
<i>sumatriptan succinate SOCT</i>	1B	QL(0.134 ML daily); AL(At least 18 yrs old)
<i>sumatriptan succinate SOLN 6 MG/0.5ML</i>	1B	QL(0.134 ML daily); AL(At least 18 yrs old)
<i>sumatriptan succinate TABS</i>	1B	QL(0.3 EA daily); AL(At least 18 yrs old)
<i>zolmitriptan SOLN</i>	1B	QL(0.2 EA daily); AL(At least 12 yrs old); ST
<i>zolmitriptan TABS</i>	1B	QL(0.3 EA daily); AL(At least 12 yrs old); ST
<i>zolmitriptan TBDP</i>	1B	QL(0.3 EA daily); AL(At least 12 yrs old); ST
MINERALS & ELECTROLYTES		
Bicarbonates		
<i>sodium acetate SOLN</i>	1B	
SODIUM ACETATE SOLN (<i>sodium acetate</i>)	1B	
Calcium		
<i>calcium chloride (dihydrate) SOLN</i>	1B	
Electrolyte Mixtures		
<i>electrolyte-148</i>	1B	
<i>electrolyte-a</i>	1B	
IONOSOL-MB IN D5W	1B	

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
ISOLYTE-P IN D5W	1B		<i>potassium chloride microencapsulated crystals er</i>	1B	
ISOLYTE-S	1B		<i>potassium chloride CPCR</i>	1B	
KCL IN DEXTROSE-NACL 5 %-40 MEQ/L-0.9 % (<i>potassium chloride in dextrose & sodium chloride</i>)	1B		<i>potassium chloride PACK PO 20 MEQ</i>	1B	PA
KCL-LACTATED RINGERS-D5W	1B		<i>potassium chloride SOLN IV 2 MEQ/ML, 10 MEQ/50ML, 20 MEQ/50ML</i>	1B	
NORMOSOL-M IN D5W	1B		POTASSIUM CHLORIDE SOLN IV 10 MEQ/50ML (<i>potassium chloride</i>)	1B	
NORMOSOL-R PH 7.4	1B		<i>potassium chloride TBCR 8 MEQ, 10 MEQ, 20 MEQ</i>	1B	
PLASMA-LYTE 148 27 MEQ/L-23 MEQ/L-98 MEQ/L-140 MEQ/L-3 MEQ/L-5 MEQ/L	1B		MISCELLANEOUS THERAPEUTIC CLASSES		
PLASMA-LYTE A (<i>electrolyte-a</i>)	1B		Chelating Agents		
<i>potassium chloride in dextrose 20 MEQ/L</i>	1B		<i>penicillamine CAPS</i>	1B	PA
<i>potassium chloride in dextrose & sodium chloride 5 %-0.075 %-0.45 %, 5 %-0.15 %-0.9 %, 5 %-10 MEQ/L-0.45 %, 5 %-20 MEQ/L-0.2 %, 5 %-20 MEQ/L-0.45 %, 5 %-20 MEQ/L-0.9 %, 5 %-30 MEQ/L-0.45 %, 5 %-40 MEQ/L-0.45 %, 5 %-40 MEQ/L-0.9 %</i>	1B		<i>penicillamine TABS</i>	1B	QL(8 EA daily)
<i>ringer's</i>	1B		<i>trientine hcl 250 MG</i>	4	QL(8 EA daily); SP; PA
Fluoride			Immunomodulators		
<i>sodium fluoride CHEW</i>	0	QL(1 EA daily)	<i>lenalidomide 2.5 MG, 5 MG, 10 MG, 15 MG, 25 MG</i>	4	QL(1 EA daily); SP; PA
Phosphate			<i>lenalidomide 20 MG</i>	4	QL(1 EA daily); PA
<i>potassium phosphates 45 MMOLE/15ML</i>	1B		THALOMID	4	QL(3 EA daily); SP; PA
Potassium			Immunosuppressive Agents		
<i>potassium acetate SOLN 2 MEQ/ML</i>	1B		ATGAM	4	SP; PA
<i>potassium bicarbonate TBEF</i>	1B		AZATHIOPRINE SODIUM	1B	
			<i>azathioprine TABS</i>	1B	
			<i>cyclosporine modified (for microemulsion) CAPS</i>	1B	
			<i>cyclosporine modified (for microemulsion) SOLN</i>	1B	
			<i>cyclosporine CAPS</i>	1B	
			<i>cyclosporine SOLN IV 50 MG/ML</i>	1B	

Drug Name	Drug Tier	Requirements/ Limits
<i>everolimus (immunosuppressant) 0.25 MG, 0.5 MG, 0.75 MG</i>	4	QL(20 EA daily); SP; PA
<i>everolimus (immunosuppressant) 1 MG</i>	4	QL(10 EA daily); PA
<i>mycophenolate mofetil CAPS</i>	1B	
<i>mycophenolate mofetil TABS</i>	1B	
<i>mycophenolate sodium</i>	1B	
PROGRAF PACK	2	PA
PROGRAF SOLN	2	
SIMULECT	3	
<i>sirolimus TABS</i>	1B	
<i>tacrolimus CAPS</i>	1B	
THYMOGLOBULIN	4	SP; PA
Irrigation Solutions		
<i>irrigation solutions, physiological</i>	1B	
<i>lactated ringer's (irrigation)</i>	1B	
<i>ringer's irrigation</i>	1B	
<i>water for irrigation, sterile</i>	1B	
Potassium Removing Agents		
LOKELMA	3	QL(1 EA daily); PA
<i>sodium polystyrene sulfonate POWD</i>	1B	
<i>sodium polystyrene sulfonate SUSP CO 15 GM/60ML</i>	1B	
MOUTH/THROAT/DENTAL AGENTS		
Anesthetics Topical Oral		
<i>lidocaine hcl (mouth-throat) 2 %</i>	1B	QL(4 ML daily)
<i>lidocaine hcl (mouth-throat) 4 %</i>	1B	
Anti-infectives - Throat		

Drug Name	Drug Tier	Requirements/ Limits
<i>clotrimazole</i>	1B	
<i>nystatin (mouth-throat)</i>	1B	
Antiseptics - Mouth/Throat		
<i>chlorhexidine gluconate (mouth-throat)</i>	1B	
Dental Products		
<i>stannous fluoride CONC</i>	0	RX/OTC
Steroids - Mouth/Throat/Dental		
<i>triamcinolone acetonide (mouth)</i>	1B	
Throat Products - Misc.		
<i>cevimeline hcl</i>	1B	
<i>pilocarpine hcl (oral)</i>	1B	
MULTIVITAMINS		
Ped MV w/ Fluoride		
<i>pediatric multivitamins w/fl CHEW</i>	1A	RX/OTC
Prenatal Vitamins		
CLASSIC PRENATAL TABS	2	QL(1 EA daily)
CVS PRENATAL TABS 100 MG-2.6 MG-800 MCG-400 UNIT-4 MCG-1.7 MG-18 MG-27 MG-1.5 MG-25 MG-263 MG-11 UNIT-4000 UNIT	2	QL(1 EA daily)
EQL PRENATAL FORMULA TABS	2	QL(1 EA daily)
FT PRENATAL TABS	2	QL(1 EA daily)
GNP PRENATAL/FOLIC ACID TABS	2	QL(1 EA daily)
GNP PRENATAL TABS	2	QL(1 EA daily)
KP PRENATAL MULTIVITAMINS TABS	2	QL(1 EA daily)
MASONATAL TABS	2	QL(1 EA daily)
M-NATAL PLUS TABS	2	QL(1 EA daily); RX/OTC
MULTI PRENATAL TABS	2	QL(1 EA daily)

Ambetter Formulary Updated January 2026

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
NEONATAL COMPLETE TABS 120 MG-10 MG-9.2 MG-1000 MCG-10 MCG-12 MCG-3 MG-5 MG-20 MG-27 MG-200 MG-1.84 MG-25 MG-2 MG-1200 MCG-2 MG-0.2 MG	2	QL(1 EA daily); RX/OTC	PRENATRIX TABS	2	QL(1 EA daily); RX/OTC
NEONATAL PLUS TABS	2	QL(1 EA daily); RX/OTC	PRENATRYL TABS	2	QL(1 EA daily); RX/OTC
NEONATAL PRENATAL TABS	2	QL(1 EA daily)	PX PRENATAL MULTIVITAMINS TABS	2	QL(1 EA daily)
NEONATAL VITAMIN TABS	2	QL(1 EA daily)	QC PRENATAL TABS	2	QL(1 EA daily)
NIVA-PLUS TABS	2	QL(1 EA daily); RX/OTC	RA PRENATAL FORMULA TABS	2	QL(1 EA daily)
ONE VITE WOMENS PLUS TABS	2	QL(1 EA daily); RX/OTC	RA PRENATAL TABS	2	QL(1 EA daily)
ONE VITE WOMENS TABS	2	QL(1 EA daily)	SM PRENATAL VITAMINS TABS	2	QL(1 EA daily)
PRENATAL ONE DAILY TABS	2	QL(1 EA daily)	THERANATAL CORE NUTRITION TABS	2	QL(1 EA daily); RX/OTC
PRENATAL PLUS VITAMIN/MINERAL TABS	2	QL(1 EA daily); RX/OTC	TRICARE TABS	2	QL(1 EA daily); RX/OTC
PRENATAL PLUS TABS	2	QL(1 EA daily); RX/OTC	VITATHELY WITH GINGER TABS	2	QL(1 EA daily); RX/OTC
PRENATAL VITAMIN AND MINERAL TABS	2	QL(1 EA daily)	WESTAB PLUS TABS	2	QL(1 EA daily); RX/OTC
PRENATAL VITAMINS TABS 100 MG-800 MCG-1.84 MG-18 MG-2.6 MG-1.7 MG-27 MG-10 MCG-4.95 MG-25 MG-200 MG-160 MG-1200 MCG-4 MCG, 120 MG-2.6 MG-800 MCG-400 UNIT-8 MCG-1.7 MG-20 MG-28 MG-200 MG-1.8 MG-25 MG-4000 UNIT-30 UNIT	2	QL(1 EA daily)	MUSCULOSKELETAL THERAPY AGENTS - Drugs to Treat Spasms		
PRENATAL/IRON TABS 120 MG-2.6 MG-800 MCG-400 UNIT-8 MCG-1.7 MG-20 MG-28 MG-200 MG-1.8 MG-25 MG-4000 UNIT-30 UNIT	2	QL(1 EA daily)	Central Muscle Relaxants		
PRENATAL TABS	2	QL(1 EA daily)	<i>baclofen TABS</i>	1B	
			<i>carisoprodol TABS</i>	1B	
			<i>chlorzoxazone TABS 750 MG</i>	1B	QL(4 EA daily)
			<i>chlorzoxazone TABS 500 MG</i>	1B	QL(6 EA daily)
			<i>cyclobenzaprine hcl TABS 5 MG, 10 MG</i>	1A	QL(3 EA daily)
			<i>metaxalone 800 MG</i>	1B	QL(4 EA daily)
			<i>methocarbamol TABS 500 MG, 750 MG</i>	1B	
			<i>orphenadrine citrate TB12</i>	1B	QL(2 EA daily)
			<i>tizanidine hcl CAPS</i>	1B	
			<i>tizanidine hcl TABS</i>	1B	
			Direct Muscle Relaxants		
			<i>dantrolene sodium CAPS</i>	1B	QL(4 EA daily)
			NASAL AGENTS - SYSTEMIC AND TOPICAL -		

Drug Name	Drug Tier	Requirements/ Limits
Drugs to treat the Nose or Sinus		
Nasal Antiallergy		
<i>azelastine hcl</i>	1B	
<i>olopatadine hcl (nasal)</i>	1B	
Nasal Anticholinergics		
<i>ipratropium bromide (nasal) 0.03 %</i>	1B	QL(1 ML daily)
<i>ipratropium bromide (nasal) 0.06 %</i>	1B	
Nasal Steroids		
<i>budesonide (nasal)</i>	1B	
<i>flunisolide (nasal)</i>	1B	1 package(s) per fill retail
<i>fluticasone propionate (nasal) SUSP</i>	1B	Limit 2 inhalers per month; QL(32 ML per 30 day(s) retail); RX/OTC
<i>mometasone furoate (nasal) SUSP</i>	1B	QL(1.14 GM daily); PA; RX/OTC
<i>triamcinolone acetonide (nasal) AERO</i>	1B	
XHANCE EXHU	3	PA
NEUROMUSCULAR AGENTS - Drugs to Relax/Paralyze Muscles		
ALS Agents		
<i>riluzole TABS</i>	3	
Neuromuscular Blocking Agent - Neurotoxins		
XEOMIN	3	PA
Nondepolarizing Muscle Relaxants		
<i>atracurium besylate 50 MG/5ML, 100 MG/10ML</i>	3	PA
NUTRIENTS		
Proteins		
CLINIMIX/DEXTROSE (4.25/10)	3	

Drug Name	Drug Tier	Requirements/ Limits
CLINIMIX/DEXTROSE (4.25/5)	3	
OPHTHALMIC AGENTS - Drugs to Treat the Eye		
Beta-blockers - Ophthalmic		
<i>betaxolol hcl (ophth) SOLN</i>	1B	
<i>brimonidine tartrate-timolol maleate</i>	1B	
<i>carteolol hcl (ophth)</i>	1B	
<i>dorzolamide hcl-timolol maleate</i>	1B	
<i>levobunolol hcl 0.5 %</i>	1B	
<i>timolol maleate (ophth) SOLG</i>	1B	
<i>timolol maleate (ophth) SOLN</i>	1B	
Cycloplegic Mydriatics		
<i>tropicamide SOLN 1 %</i>	1B	
<i>tropicamide SOLN 0.5 %</i>	1B	QL(2.5 ML daily)
Miotics		
<i>pilocarpine hcl SOLN 1 %, 2 %, 4 %</i>	1B	
Ophthalmic Adrenergic Agents		
<i>brimonidine tartrate 0.15 %, 0.2 %</i>	1B	
Ophthalmic Anti-infectives		
<i>bacitracin (ophthalmic)</i>	3	
BESIVANCE	3	PA
<i>ciprofloxacin hcl (ophth) SOLN</i>	1B	
<i>erythromycin (ophth)</i>	1B	
<i>gatifloxacin (ophth)</i>	1B	
<i>gentamicin sulfate (ophth) SOLN</i>	1B	
<i>levofloxacin (ophth) 0.5 %</i>	1B	
<i>moxifloxacin hcl (ophth) SOLN OP</i>	1B	

Drug Name	Drug Tier	Requirements/ Limits
NATACYN	2	
<i>neomycin-bacitracin zn-polymyxin</i>	1B	
<i>ofloxacin (ophth)</i>	1B	
<i>polymyxin b-trimethoprim</i>	1B	
<i>sulfacetamide sodium (ophth) SOLN</i>	1B	
<i>tobramycin (ophth) SOLN</i>	1B	
<i>trifluridine</i>	1B	
ZIRGAN GEL	2	
Ophthalmic Immunomodulators		
<i>cyclosporine (ophth) EMUL</i>	3	PA
Ophthalmic Local Anesthetics		
<i>proparacaine hcl</i>	1B	
Ophthalmic Steroids		
<i>dexamethasone sodium phosphate (ophth)</i>	1B	QL(0.4 ML daily)
<i>difluprednate</i>	1B	PA
<i>fluorometholone (ophth) SUSP</i>	1B	
FML FORTE SUSP	3	PA
LOTEMAX OINT	3	PA
<i>loteprednol etabonate GEL</i>	1B	PA
<i>loteprednol etabonate SUSP</i>	1B	PA
MAXIDEX SUSP OP	3	PA
<i>neomycin-polymy-dexameth OINT</i>	1B	
<i>neomycin-polymy-dexameth SUSP 0.1 %-3.5 MG/ML-10000 UNIT/ML, 0.1 %</i>	1B	
<i>neomycin-polymyxin-hc (ophth)</i>	1B	QL(2.5 ML daily)
PRED MILD	3	PA
<i>prednisolone acetate (ophth)</i>	1B	

Drug Name	Drug Tier	Requirements/ Limits
PREDNISOLONE SODIUM PHOSPHATE	3	
<i>sulfacetamide sod-prednisolone SOLN</i>	3	PA
<i>tobramycin-dexamethasone SUSP</i>	1B	
ZYLET	3	PA
Ophthalmic Surgical Aids		
HEALON PRO SOSY	3	PA
PROVISC SOSY	3	PA
Ophthalmics - Misc.		
ALOCRIAL	3	PA
ALOMIDE	3	PA
<i>azelastine hcl (ophth)</i>	1B	
<i>bepotastine besilate</i>	3	PA
<i>brinzolamide</i>	1B	
<i>bromfenac sodium (ophth)</i>	1B	
<i>cromolyn sodium (ophth)</i>	1B	
CYSTARAN	2	QL(2.143 ML daily); PA
<i>diclofenac sodium (ophth)</i>	1B	
<i>dorzolamide hcl</i>	1B	
<i>epinastine hcl (ophth)</i>	1B	
<i>flurbiprofen sodium</i>	1B	
<i>ketorolac tromethamine (ophth)</i>	1B	
<i>ketotifen fumarate (ophth) 0.035 %</i>	1B	
LASTACRAFT	3	PA
NEVANAC	3	QL(0.2 ML daily); ST
<i>olopatadine hcl 0.1 %</i>	1B	QL(0.34 ML daily); RX/OTC
<i>olopatadine hcl 0.2 %</i>	1B	RX/OTC
Prostaglandins - Ophthalmic		
<i>bimatoprost SOLN</i>	1B	
<i>latanoprost SOLN</i>	1B	
<i>tafluprost</i>	1B	

Drug Name	Drug Tier	Requirements/ Limits
<i>travoprost SOLN</i>	1B	
OTIC AGENTS - Drugs to Treat the Ear		
Otic Agents - Miscellaneous		
<i>acetic acid (otic)</i>	1B	QL(0.5 ML daily)
Otic Anti-infectives		
<i>ciprofloxacin hcl (otic)</i>	1B	
<i>ofloxacin (otic)</i>	1B	
Otic Combinations		
<i>ciprofloxacin-dexamethasone</i>	1B	PA
<i>ciprofloxacin-fluocinolone acetonide</i>	1B	QL(0.5 EA daily); PA
CORTISPORIN-TC	3	
<i>neomycin-polymyxin-hc (otic) SOLN</i>	1B	QL(2 ML daily)
<i>neomycin-polymyxin-hc (otic) SUSP</i>	1B	
Otic Steroids		
<i>fluocinolone acetonide (otic)</i>	1B	
<i>hydrocortisone w/acetic acid</i>	1B	
PASSIVE IMMUNIZING AND TREATMENT AGENTS - Antibody Drugs to Treat Low Immune System		
Monoclonal Antibodies		
BEYFORTUS	0	
Passive Immunizing Agents - Combinations		
HYQVIA	4	PA
PENICILLINS - Drugs to Treat Bacterial Infections		
Aminopenicillins		
<i>amoxicillin CAPS</i>	1A	
<i>amoxicillin CHEW 125 MG, 250 MG</i>	1B	

Drug Name	Drug Tier	Requirements/ Limits
<i>amoxicillin SUSR 125 MG/5ML</i>	1A	
<i>amoxicillin SUSR 200 MG/5ML, 250 MG/5ML, 400 MG/5ML</i>	1B	
<i>amoxicillin TABS</i>	1B	
<i>ampicillin sodium IV 10 GM</i>	1B	
<i>ampicillin CAPS 500 MG</i>	1B	
Natural Penicillins		
PENICILLIN G POT IN DEXTROSE 40000 UNIT/ML, 60000 UNIT/ML	1B	
<i>penicillin g potassium 5000000 UNIT</i>	1B	
<i>penicillin g sodium</i>	3	
<i>penicillin v potassium SOLR</i>	1B	
<i>penicillin v potassium TABS</i>	1B	
Penicillin Combinations		
<i>amoxicillin & pot clavulanate CHEW</i>	1B	
<i>amoxicillin & pot clavulanate SUSR</i>	1B	
<i>amoxicillin & pot clavulanate TABS</i>	1B	
<i>amoxicillin & pot clavulanate TB12</i>	1B	
Penicillinase-Resistant Penicillins		
<i>dicloxacillin sodium</i>	1B	
<i>naftillin sodium IV 10 GM</i>	1B	
<i>oxacillin sodium IV 10 GM</i>	1B	
PROGESTINS - Hormone Replacement/Modifying Drugs		
Progestins		
<i>medroxyprogesterone acetate 10 MG</i>	1A	

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
<i>medroxyprogesterone acetate 2.5 MG, 5 MG</i>	1B		Fibromyalgia Agents		
<i>megestrol acetate (appetite)</i>	1B	PA	SAVELLA TITRATION PACK MISC	2	1 max fill(s) per 365 day(s) retail; PA
<i>norethindrone acetate TABS</i>	0		SAVELLA TABS	2	QL(2 EA daily); PA
<i>progesterone CAPS</i>	1B		Movement Disorder Drug Therapy		
PSYCHOTHERAPEUTIC AND NEUROLOGICAL AGENTS - MISC. - Drugs to Treat Mental and Emotional Conditions			AUSTEDO TABS	4	QL(4 EA daily); PA
Agents for Chemical Dependency			<i>tetrabenazine</i>	4	QL(3 EA daily); SP; PA
<i>acamprosate calcium</i>	1B		Multiple Sclerosis Agents		
<i>disulfiram</i>	1B		AVONEX PEN AJKT	4	QL(0.0714 EA daily); SP; PA
<i>lofexidine hcl</i>	1B	QL(224 EA per 14 day(s) retail); PA	AVONEX PREFILLED PSKT	4	QL(0.0714 EA daily); SP; PA
Antidementia Agents			BETASERON KIT	4	QL(0.5 EA daily); SP; PA
<i>donepezil hydrochloride TABS 5 MG, 23 MG</i>	1B	QL(1 EA daily)	<i>dalfampridine</i>	4	QL(2 EA daily); SP; PA
<i>donepezil hydrochloride TABS 10 MG</i>	1B	QL(2 EA daily)	<i>dimethyl fumarate CDPK</i>	1B	QL(2 EA daily)
<i>donepezil hydrochloride TBDP 5 MG</i>	1B	QL(1 EA daily)	<i>dimethyl fumarate CPDR</i>	1B	QL(2 EA daily)
<i>donepezil hydrochloride TBDP 10 MG</i>	1B	QL(2 EA daily)	<i> fingolimod hcl</i>	3	QL(1 EA daily); PA
<i>galantamine hydrobromide CP24</i>	1B	QL(1 EA daily)	<i>glatiramer acetate SOSY 40 MG/ML</i>	4	QL(0.43 ML daily)
<i>galantamine hydrobromide SOLN</i>	1B	QL(6 ML daily)	<i>glatiramer acetate SOSY 20 MG/ML</i>	4	QL(1 ML daily)
<i>galantamine hydrobromide TABS</i>	1B	QL(2 EA daily)	LEMTRADA	4	QL(1.2 ML daily); PA
<i>memantine hcl TABS</i>	1B	QL(2 EA daily)	PLEGRIDY STARTER PACK SOAJ	4	QL(0.036 ML daily); PA
<i>memantine hcl TABS</i>	1B		PLEGRIDY STARTER PACK SOSY SC	4	QL(0.036 ML daily); PA
<i>rivastigmine tartrate CAPS</i>	1B		PLEGRIDY SOAJ	4	QL(0.036 ML daily); PA
Combination Psychotherapeutics			PLEGRIDY SOSY SC	4	QL(0.036 ML daily); PA
<i>chlordiazepoxide-amitriptyline</i>	1B		REBIF REBIDOSE TITRATION PACK SOAJ	4	1 max fill(s) per 365 day(s) retail; SP; PA
<i>perphenazine-amitriptyline</i>	1B	QL(4 EA daily)	REBIF REBIDOSE SOAJ	4	QL(0.214 ML daily); SP; PA

Drug Name	Drug Tier	Requirements/ Limits
REBIF TITRATION PACK SOSY	4	1 max fill(s) per 365 day(s) retail; SP; PA
REBIF SOSY	4	QL(0.214 ML daily); SP; PA
<i>teriflunomide</i>	3	QL(1 EA daily); PA
Postherpetic Neuralgia (PHN)/Neuropathic Pain Agents		
<i>pregabalin (once-daily) 82.5 MG, 165 MG</i>	3	QL(1 EA daily); PA
<i>pregabalin (once-daily) 330 MG</i>	3	QL(2 EA daily); PA
Pseudobulbar Affect (PBA) Agents		
NUEDEXTA	3	QL(2 EA daily); PA
Psychotherapeutic and Neurological Agents - Misc.		
<i>ergoloid mesylates TABS</i>	1B	
<i>pimozide</i>	1B	
Smoking Deterrents		
<i>bupropion hcl (smoking deterrent)</i>	0	QL(2 EA daily)
<i>nicotine polacrilex GUM</i>	0	
<i>nicotine polacrilex LOZG</i>	0	
NICOTINE KIT	0	
<i>nicotine PT24 TD 7 MG/24HR, 14 MG/24HR, 21 MG/24HR</i>	0	QL(1 EA daily)
NICOTROL NS SOLN	0	
NICOTROL INHA	0	
<i>varenicline tartrate TABS</i>	0	QL(2 EA daily)
<i>varenicline tartrate TBPk</i>	0	
RESPIRATORY AGENTS - MISC. - Drugs to Treat Lung Conditions		
Alpha-Proteinase Inhibitor (Human)		
PROLASTIN-C SOLN	4	PA
PROLASTIN-C SOLR	4	PA

Drug Name	Drug Tier	Requirements/ Limits
Cystic Fibrosis Agents		
KALYDECO TABS	4	QL(2 EA daily); SP; PA
ORKAMBI PACK	4	QL(2 EA daily); PA
ORKAMBI TABS	4	QL(4 EA daily); PA
PULMOZYME	4	QL(2.5 ML daily); SP; PA
TRIKAFTA TBPk	4	QL(3 EA daily); PA
Pulmonary Fibrosis Agents		
OFEV	4	QL(2 EA daily); PA
<i>pirfenidone CAPS</i>	4	QL(1 EA daily); PA
<i>pirfenidone TABS 534 MG</i>	4	QL(3 EA daily); PA
<i>pirfenidone TABS 267 MG, 801 MG</i>	4	QL(1 EA daily); PA
SULFONAMIDES - Drugs to Treat Bacterial Infections		
Sulfonamides		
<i>sulfadiazine TABS</i>	1B	
TETRACYCLINES - Drugs to Treat Bacterial Infections		
Tetracyclines		
<i>demeclocycline hcl TABS</i>	1B	
<i>doxycycline (monohydrate) CAPS 50 MG, 100 MG</i>	1B	QL(2 EA daily)
<i>doxycycline (monohydrate) CAPS 75 MG</i>	1B	
<i>doxycycline (monohydrate) TABS 50 MG, 75 MG</i>	1B	
<i>doxycycline (monohydrate) TABS 100 MG</i>	1B	QL(2 EA daily)
<i>doxycycline hyclate CAPS</i>	1B	QL(2 EA daily)

Drug Name	Drug Tier	Requirements/ Limits
<i>doxycycline hyclate TABS 20 MG, 100 MG</i>	1B	QL(2 EA daily)
<i>minocycline hcl CAPS</i>	1B	QL(3 EA daily)
<i>minocycline hcl TABS</i>	1B	QL(3 EA daily)
<i>tetracycline hcl CAPS</i>	1B	QL(8 EA daily)
THYROID AGENTS - Drugs to Regulate Thyroid Hormones		
Antithyroid Agents		
<i>methimazole TABS</i>	1B	
<i>propylthiouracil</i>	1B	
Thyroid Hormones		
ADTHYZA TABS 16.25 MG, 32.5 MG, 65 MG, 97.5 MG, 130 MG	2	
ARMOUR THYROID TABS	2	QL(1 EA daily)
<i>levothyroxine sodium TABS</i>	1B	
<i>liothyronine sodium SOLN</i>	1B	
<i>liothyronine sodium TABS</i>	1B	
NP THYROID TABS	1B	QL(1 EA daily)
SYNTHROID TABS (<i>levothyroxine sodium</i>)	2	
TOXOIDS		
Toxoid Combinations		
ADACEL SUSP	0	
BOOSTRIX SUSP	0	
BOOSTRIX SUSY	0	
DAPTACEL	0	
INFANRIX	0	
KINRIX SUSY	0	
PEDIARIX SUSY	0	
PENTACEL	0	
QUADRACEL SUSP	0	
QUADRACEL SUSY	0	
TDVAX SUSP	0	

Drug Name	Drug Tier	Requirements/ Limits
TENIVAC SUSP 2 LFU-5 LFU	0	
TETANUS-DIPHTHERIA TOXOIDS TD SUSP	0	
VAXELIS SUSP	0	
VAXELIS SUSY	0	
ULCER DRUGS - Drugs to Treat Bowel, Intestine and Stomach Conditions		
Antispasmodics		
<i>atropine sulfate SOSY IJ 0.25 MG/5ML</i>	1B	
<i>chlordiazepoxide hcl-clidinium bromide</i>	1B	
<i>dicyclomine hcl CAPS</i>	1B	
<i>dicyclomine hcl SOLN PO</i>	1B	
<i>dicyclomine hcl TABS</i>	1B	
<i>glycopyrrolate SOLN IJ 4 MG/20ML</i>	1B	
<i>glycopyrrolate TABS 2 MG</i>	1B	QL(6 EA daily)
<i>glycopyrrolate TABS 1 MG</i>	1B	
<i>methscopolamine bromide</i>	1B	
H-2 Antagonists		
<i>cimetidine TABS</i>	1B	RX/OTC
<i>famotidine in nacl SOLN</i>	1B	
<i>famotidine SUSR</i>	1B	QL(10 ML daily)
<i>famotidine TABS 20 MG, 40 MG</i>	1B	RX/OTC
<i>nizatidine CAPS</i>	1B	
Misc. Anti-Ulcer		
<i>sucralfate SUSP</i>	1B	QL(40 ML daily)
<i>sucralfate TABS</i>	1B	QL(4 EA daily)
Proton Pump Inhibitors		
<i>dexlansoprazole</i>	3	QL(1 EA daily)

Drug Name	Drug Tier	Requirements/ Limits
<i>esomeprazole magnesium CPDR 20 MG</i>	1B	QL(2 EA daily); RX/OTC
<i>esomeprazole magnesium CPDR 40 MG</i>	3	QL(1 EA daily)
<i>esomeprazole magnesium TBEC</i>	1B	QL(2 EA daily)
<i>lansoprazole CPDR 30 MG</i>	1B	
<i>lansoprazole CPDR 15 MG</i>	1B	QL(2 EA daily); RX/OTC
NEXIUM 24HR TBEC 20 MG	1B	QL(2 EA daily)
<i>omeprazole magnesium CPDR</i>	1B	QL(4 EA daily)
<i>omeprazole CPDR</i>	1B	QL(2 EA daily)
<i>omeprazole TBEC</i>	1B	QL(2 EA daily)
<i>pantoprazole sodium TBEC 20 MG</i>	1B	QL(1 EA daily)
<i>pantoprazole sodium TBEC 40 MG</i>	1B	
<i>rabeprazole sodium TBEC</i>	1B	QL(1 EA daily)
Ulcer Drugs - Prostaglandins		
<i>misoprostol</i>	1B	QL(4 EA daily)
Ulcer Therapy Combinations		
<i>amoxicillin-clarithromycin w/ lansoprazole THPK</i>	1B	14 day(s) max supply per 365 day(s) retail; 14 day(s) max supply per 365 day(s) mail
<i>omeprazole-sodium bicarbonate CAPS 1100 MG-20 MG</i>	1B	QL(1 EA daily); RX/OTC
URINARY ANTISPASMODICS - Drugs to Treat Miscellaneous Bladder Spasms		
Urinary Antispasmodic - Antimuscarinics (Anticholinergic)		
<i>darifenacin hydrobromide</i>	1B	QL(1 EA daily)
<i>fesoterodine fumarate</i>	1B	QL(1 EA daily)
<i>oxybutynin chloride SOLN</i>	1B	

Drug Name	Drug Tier	Requirements/ Limits
<i>oxybutynin chloride TABS 5 MG</i>	1B	
<i>oxybutynin chloride TB24</i>	1B	
<i>solifenacin succinate TABS</i>	1B	QL(1 EA daily)
<i>tolterodine tartrate CP24</i>	1B	QL(1 EA daily)
<i>tolterodine tartrate TABS</i>	1B	
<i>trospium chloride CP24</i>	1B	QL(1 EA daily)
<i>trospium chloride TABS</i>	1B	QL(3 EA daily)
Urinary Antispasmodics - Beta-3 Adrenergic Agonists		
<i>mirabegron TB24</i>	3	PA
Urinary Antispasmodics - Cholinergic Agonists		
<i>bethanechol chloride 5 MG, 10 MG, 50 MG</i>	1B	QL(4 EA daily)
<i>bethanechol chloride 25 MG</i>	1B	
Urinary Antispasmodics - Direct Muscle Relaxants		
<i>flavoxate hcl</i>	1B	
VACCINES		
Bacterial Vaccines		
ACTHIB SOLR IM	0	
BEXSERO 0.5 ML	0	
CAPVAXIVE	0	
HIBERIX SOLR IJ	0	
MENACTRA	0	
MENQUADFI 0.5 ML	0	
MENVEO SOLN	0	
MENVEO SOLR	0	
PEDVAX HIB SUSP	0	
PENBRAYA	0	
PNEUMOVAX 23 SOLN	0	
PNEUMOVAX 23 SOSY	0	
PREVNAR 13	0	
PREVNAR 20	0	1 max fill(s) per 999 day(s) retail

Drug Name	Drug Tier	Requirements/ Limits
TRUMENBA 0.5 ML	0	
VAXNEUVANCE	0	4 max fill(s) per 999 day(s) retail
Viral Vaccines		
ABRYSVO	0	
AFLURIA PRESERVATIVE FREE SUSY	0	Limit 1 dose per season; 1 max fill(s) per 180 day(s) retail
AFLURIA QUADRIVALENT SUSP	0	1 max fill(s) per 180 day(s) retail
AFLURIA QUADRIVALENT SUSY 0.5 ML	0	1 max fill(s) per 180 day(s) retail
AFLURIA SUSP	0	1 max fill(s) per 180 day(s) retail
AREXVY	0	
AUDENZ EMUL	0	
AUDENZ PRSY	0	
COMIRNATY 5-11 YEARS SUSP 10 MCG/0.3ML	0	
COMIRNATY SUSP	0	
COMIRNATY SUSY	0	
ENGRIX-B SUSP 20 MCG/ML	0	3 max fill(s) per 365 day(s) retail; 3 max fill(s) per 365 day(s) mail
ENGRIX-B SUSY	0	3 max fill(s) per 365 day(s) retail; 3 max fill(s) per 365 day(s) mail
FLUAD	0	1 max fill(s) per 180 day(s) retail
FLUAD QUADRIVALENT	0	1 max fill(s) per 180 day(s) retail
FLUARIX QUADRIVALENT SUSY	0	1 max fill(s) per 180 day(s) retail

Drug Name	Drug Tier	Requirements/ Limits
FLUARIX SUSY	0	Limit 1 dose per season; 1 max fill(s) per 180 day(s) retail
FLUBLOK QUADRIVALENT	0	Limit 1 dose per season; 1 max fill(s) per 180 day(s) retail
FLUBLOK SOSY	0	1 max fill(s) per 180 day(s) retail
FLUCELVAX QUADRIVALENT SUSP	0	Limit 1 dose per season; 1 max fill(s) per 180 day(s) retail
FLUCELVAX QUADRIVALENT SUSY	0	Limit 1 dose per season; 1 max fill(s) per 180 day(s) retail
FLUCELVAX SUSP	0	1 max fill(s) per 180 day(s) retail
FLUCELVAX SUSY	0	1 max fill(s) per 180 day(s) retail
FLULAVAL QUADRIVALENT SUSY	0	1 max fill(s) per 180 day(s) retail
FLULAVAL SUSY	0	Limit 1 dose per season; 1 max fill(s) per 180 day(s) retail
FLUMIST	0	1 max fill(s) per 180 day(s) retail
FLUMIST QUADRIVALENT	0	Limit 1 dose per season; 1 max fill(s) per 180 day(s) retail
FLUZONE HIGH-DOSE QUADRIVALENT	0	1 max fill(s) per 180 day(s) retail

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
FLUZONE HIGH-DOSE SUSY	0	1 max fill(s) per 180 day(s) retail	NOVAVAX COVID-19 VACCINE SUSP	0	
FLUZONE QUADRIVALENT SUSP	0	1 max fill(s) per 180 day(s) retail	NOVAVAX COVID-19 VACCINE SUSY	0	
FLUZONE QUADRIVALENT SUSY	0	1 max fill(s) per 180 day(s) retail	NUVAXOVID COVID-19 VACCINE SUSY 5 MCG/0.5ML	0	
FLUZONE SUSP	0	1 max fill(s) per 180 day(s) retail	PFIZER COVID-19 VAC BIVALENT	0	
FLUZONE SUSY	0	Limit 1 dose per season; 1 max fill(s) per 180 day(s) retail	PFIZER COVID-19 VAC-TRIS 5-11Y SUSP	0	
GARDASIL 9 SUSP 0.5 ML	0	3 max fill(s) per 365 day(s) retail	PFIZER COVID-19 VAC-TRIS 6M-4Y SUSP	0	
GARDASIL 9 SUSY 0.5 ML	0	3 max fill(s) per 365 day(s) retail	PFIZER-BIONT COVID-19 VAC-TRIS SUSP	0	
HAVRIX IM 720 EL U/0.5ML	0		PFIZER-BIONTECH COVID-19 VACC SUSP	0	
HEPLISAV-B SOSY	0	2 max fill(s) per 292 day(s) retail; 2 max fill(s) per 292 day(s) mail	PREHEVBRIO	0	3 max fill(s) per 365 day(s) retail
IPOLE IJ	0		PRIORIX SUSR	0	3 max fill(s) per 365 day(s) retail
JYNNEOS	0		PROQUAD SUSR	0	2 max fill(s) per 365 day(s) retail
M-M-R II SOLR	0	2 max fill(s) per 365 day(s) retail	RECOMBIVAX HB SUSP	0	
MNEXSPIKE SUSY 10 MCG/0.2ML	0		RECOMBIVAX HB SUSY	0	
MODERNA COVID-19 BIVALENT	0		ROTARIX SUSP	0	
MODERNA COVID-19 VAC 6M-11Y SUSP	0		ROTATEQ SOLN	0	
MODERNA COVID-19 VAC 6M-11Y SUSY	0		SHINGRIX	0	2 max fill(s) per 999 day(s) retail; AL(At least 18 yrs old)
MODERNA COVID-19 VACCINE SUSP	0		SPIKEVAX 6M-11Y SUSY 25 MCG/0.25ML	0	
MRESVIA	0		SPIKEVAX SUSP	0	
			SPIKEVAX SUSY	0	
			TWINRIX SUSY	0	
			VAQTA	0	
			VARIVAX SUSR	0	2 max fill(s) per 365 day(s) retail

Drug Name	Drug Tier	Requirements/ Limits
VAGINAL AND RELATED PRODUCTS		
Spermicides		
TODAY SPONGE MISC	0	
Vaginal Anti-infectives		
<i>clindamycin phosphate vaginal CREA</i>	1B	
<i>clotrimazole vaginal CREA 1 %</i>	1B	
GYNAZOLE-1	3	QL(5 GM per 30 day(s) retail; 5 GM per 30 days mail)
<i>metronidazole vaginal</i>	1B	
<i>miconazole nitrate vaginal SUPP 200 MG</i>	1B	
<i>terconazole vaginal CREA</i>	1B	
<i>terconazole vaginal CREA</i>	1B	
<i>terconazole vaginal SUPP</i>	1B	
Vaginal Anti-inflammatory Agents		
<i>hydrocortisone vaginal</i>	1B	QL(15.15 GM daily)
Vaginal Contraceptive - pH Modulators		
PHEXXI	0	PV
Vaginal Estrogens		
<i>estradiol vaginal CREA</i>	1B	QL(2 GM daily)
<i>estradiol vaginal TABS</i>	1B	
ESTRING RING 7.5 MCG/24HR	3	
FEMRING	3	
PREMARIN	2	QL(1.5 GM daily)
VASOPRESSORS - Drugs to Treat Heart and Circulation Conditions		
Anaphylaxis Therapy Agents		

Drug Name	Drug Tier	Requirements/ Limits
<i>epinephrine (anaphylaxis) SOAJ</i>	1B	QL(2 EA per fill retail; 2 per fill mail); 2 max fill(s) per 365 day(s) retail; 2 max fill(s) per 365 day(s) mail
Vasopressors		
<i>midodrine hcl</i>	1B	
VITAMINS		
Oil Soluble Vitamins		
<i>cholecalciferol CAPS</i>	1A	
<i>cholecalciferol TABS 10 MCG, 400 UNIT</i>	0	
<i>ergocalciferol CAPS</i>	0	
<i>ergocalciferol SOLN PO 200 MCG/ML</i>	1B	
VITAMIN D2 TABS 400 UNIT	0	AL(At least 65 yrs old)
Water Soluble Vitamins		
<i>ascorbic acid SOLN IJ</i>	3	QL(0.4 ML daily)
NIACIN ER TBCR	1B	
<i>niacinamide TABS 100 MG</i>	1B	
<i>niacinamide TABS 500 MG</i>	1A	
<i>niacin CPCR 250 MG, 500 MG</i>	1A	
<i>niacin TABS</i>	1A	
<i>niacin TBCR</i>	1A	

INDEX

abacavir sulfate SOLN	28	ACTHAR GEL PEN SC 40 UNIT/0.5ML, 80 UNIT/ML	43	ADALIMUMAB-RYVK (1 PEN) AJKT 80 MG/0.8ML	3
abacavir sulfate TABS	28	ACTHAR GEL	43	adapalene CREA	35
abacavir sulfate-lamivudine	28	ACTHIB SOLR IM	61	adapalene GEL	35
abiraterone acetate 250 MG	24	ACTIMMUNE 100 MCG/0.5ML	26	adapalene-benzoyl peroxide GEL 2.5 %-0.1 %	35
abiraterone acetate 500 MG	24	acyclovir CAPS	30	adefovir dipivoxil	30
ABRYSVO	62	acyclovir SUSP	30	ADEMPAS	33
acamprosate calcium	58	acyclovir TABS PO	30	ADTHYZA TABS 16.25 MG, 32.5 MG, 65 MG, 97.5 MG, 130 MG	60
acarbose	14	acyclovir topical CREA	38	AFLURIA PRESERVATIVE FREE SUSY	62
acebutolol hcl CAPS	31	acyclovir topical OINT	38	AFLURIA QUADRIVALENT SUSP	62
acetaminophen w/ codeine SOLN ..	6	ADACEL SUSP	60	AFLURIA QUADRIVALENT SUSY 0.5 ML	62
acetaminophen w/ codeine TABS 15 MG-300 MG	7	ADALIMUMAB-AATY (1 PEN) AJKT 40 MG/0.4ML	3	AFLURIA SUSP	62
acetaminophen w/ codeine TABS 30 MG-300 MG	7	ADALIMUMAB-AATY (1 PEN) AJKT 80 MG/0.8ML	3	AFSTYLA 250 UNIT, 500 UNIT, 1000 UNIT, 1500 UNIT, 2000 UNIT, 2500 UNIT	46
acetaminophen w/ codeine TABS 60 MG-300 MG	6	ADALIMUMAB-AATY (2 PEN) AJKT . 3		AIMOVIG	50
acetaminophen-caff-dihydrocod CAPS 30 MG-320.5 MG-16 MG	7	ADALIMUMAB-AATY (2 SYRINGE) PSKT	3	AIMSCO LUBRICATED MISC	48
acetazolamide CP12	42	ADALIMUMAB-AATY CD/UC/HS START AJKT 80 MG/0.8ML	3	AIRDUO DIGIHALER	10
acetazolamide sodium	42	ADALIMUMAB-ADAZ SOAJ 40 MG/0.4ML	3	AIRSUPRA	10
acetazolamide TABS 125 MG	42	ADALIMUMAB-ADAZ SOAJ 80 MG/0.8ML	3	AKYNZEO	17
acetazolamide TABS 250 MG	42	ADALIMUMAB-ADAZ SOSY	3	albendazole	8
acetic acid (otic)	57	ADALIMUMAB-ADBM (2 PEN) AJKT 3		albuterol sulfate AERS	10
acetic acid 0.25 %	46	ADALIMUMAB-ADBM (2 SYRINGE) PSKT	3	albuterol sulfate NEBU	10
acetylcysteine SOLN	35	ADALIMUMAB-ADBM(CD/UC/HS STRT) AJKT	3	albuterol sulfate SYRP	10
acitretin 10 MG, 17.5 MG	38	ADALIMUMAB-ADBM(PS/UV STARTER) AJKT	3	alclometasone dipropionate CREA	38
acitretin 25 MG	38			alclometasone dipropionate OINT	38
ACTEMRA ACTPEN SOAJ	4			ALDURAZYME	43
ACTEMRA SOLN 200 MG/10ML, 400 MG/20ML	4				
ACTEMRA SOLN 80 MG/4ML	4				
ACTEMRA SOSY	4				

ALECENSA	25	amcinonide CREA	38	amoxicillin SUSR 125 MG/5ML	57
alendronate sodium TABS 35 MG, 70 MG	42	amcinonide LOTN	39	amoxicillin SUSR 200 MG/5ML, 250 MG/5ML, 400 MG/5ML	57
alendronate sodium TABS 5 MG, 10 MG	42	amcinonide OINT	39	amoxicillin TABS	57
alfuzosin hcl	46	amikacin sulfate SOLN 1 GM/4ML, 500 MG/2ML	2	amoxicillin-clarithromycin w/ lansoprazole THPK	61
ALINIA SUSR	21	amiloride & hydrochlorothiazide ..	42	amphetamine sulfate TABS	1
aliskiren fumarate	20	amiloride hcl TABS	42	amphetamine-dextroamphetamine CP24 15 MG	1
allopurinol 100 MG, 300 MG	46	aminocaproic acid TABS	47	amphetamine-dextroamphetamine CP24 20 MG, 25 MG, 30 MG	1
almotriptan malate 12.5 MG	51	amiodarone hcl SOLN 150 MG/3ML .	9	amphetamine-dextroamphetamine CP24 5 MG, 10 MG	1
almotriptan malate 6.25 MG	51	amiodarone hcl TABS	9	amphetamine-dextroamphetamine TABS 30 MG	1
ALOCRIL	56	amitriptyline hcl TABS	14	amphetamine-dextroamphetamine TABS 5 MG, 7.5 MG, 10 MG, 12.5 MG, 15 MG, 20 MG	1
alogliptin benzoate	15	amlodipine besylate TABS	31	amphotericin b IV	17
alogliptin-metformin hcl	14	amlodipine besylate-atorvastatin calcium	32	ampicillin CAPS 500 MG	57
alogliptin-pioglitazone 15 MG-25 MG, 30 MG-25 MG, 45 MG-25 MG	14	amlodipine besylate-benazepril hcl	20	ampicillin sodium IV 10 GM	57
alogliptin-pioglitazone 30 MG-12.5 MG	14	amlodipine besylate-olmesartan medoxomil	20	anagrelide hcl	46
ALOMIDE	56	amlodipine besylate-valsartan	20	anastrozole	24
alosetron hcl	45	amlodipine-valsartan-hydrochlorothiazide	20	ANDRODERM PT24 2 MG/24HR, 4 MG/24HR	8
alprazolam TABS 0.25 MG, 0.5 MG, 1 MG	9	amoxapine	14	ANGELIQ	44
alprazolam TABS 2 MG	9	amoxicillin & pot clavulanate CHEW .	57	ANNOVERA	34
alprazolam TB24	9	amoxicillin & pot clavulanate SUSR	57	ANZEMET TABS 50 MG	17
alprazolam TBDP	9	amoxicillin & pot clavulanate TABS	57	APIDRA SOLN	15
ALTABAX	36	amoxicillin & pot clavulanate TB12	57	APIDRA SOLOSTAR SOPN	15
ALVESCO	9	amoxicillin CAPS	57	apomorphine hydrochloride SOCT	27
alvimopan	45	amoxicillin CHEW 125 MG, 250 MG .	57	aprepitant CAPS 40 MG, 125 MG .	17
amantadine hcl CAPS	27			aprepitant CAPS 80 MG	17
amantadine hcl SOLN	27				
amantadine hcl TABS	27				
ambrisentan	32				

aprepitant CAPS	17	atazanavir sulfate CAPS 150 MG, 300 MG	28	azithromycin SUSR	48
APTIVUS CAPS	28	atazanavir sulfate CAPS 200 MG ..	28	azithromycin TABS 250 MG	48
ARANESP (ALBUMIN FREE) SOLN 25 MCG/ML	47	atenolol & chlorthalidone	20	azithromycin TABS 500 MG	48
ARANESP (ALBUMIN FREE) SOLN 40 MCG/ML, 60 MCG/ML, 100 MCG/ML	47	atenolol TABS	31	azithromycin TABS 600 MG	48
ARANESP (ALBUMIN FREE) SOSY 150 MCG/0.3ML, 200 MCG/0.4ML, 300 MCG/0.6ML, 500 MCG/ML ...	47	ATGAM	52	aztreonam 1 GM	21
ARCALYST	4	atomoxetine hcl 10 MG, 18 MG, 25 MG, 40 MG	1	bacitracin (ophthalmic)	55
AREXVY	62	atomoxetine hcl 60 MG, 80 MG, 100 MG	1	baclofen TABS	54
arformoterol tartrate	10	atorvastatin calcium TABS	19	balsalazide disodium CAPS	45
ARIKAYCE	2	atovaquone	21	BANZEL TABS 200 MG (rufinamide) 12	
aripiprazole SOLN PO	28	atovaquone-proguanil hcl	22	BANZEL TABS 400 MG (rufinamide) 12	
aripiprazole TABS	28	atracurium besylate 50 MG/5ML, 100 MG/10ML	55	BAXDELA SOLR	44
armodafinil	1	atropine sulfate SOSY IJ 0.25 MG/5ML	60	BAXDELA TABS	44
ARMOUR THYROID TABS	60	ATROVENT HFA	9	BD PEN NEEDLE NANO 2ND GEN . 50	
ARNUITY ELLIPTA 100 MCG/ACT (fluticasone furoate (inhalation)) ...	10	AUDENZ EMUL	62	BELSOMRA	48
ARNUITY ELLIPTA 50 MCG/ACT, 200 MCG/ACT (fluticasone furoate (inhalation))	10	AUDENZ PRSY	62	benazepril & hydrochlorothiazide 12.5 MG-10 MG, 25 MG-20 MG ...	20
arsenic trioxide 10 MG/10ML	26	AURANOFIN 3 MG	4	benazepril & hydrochlorothiazide 12.5 MG-20 MG, 6.25 MG-5 MG ..	20
ARZERRA	24	AUSTEDO TABS	58	benazepril hcl	19
ascorbic acid SOLN IJ	64	avanafil	32	BENZEPRO CREAMY WASH LIQD . 35	
asenapine maleate 2.5 MG	28	AVONEX PEN AJKT	58	BENZEPRO FOAM 5.3 %	35
asenapine maleate 5 MG, 10 MG ..	28	AVONEX PREFILLED PSKT	58	benzonatate 100 MG	35
aspirin CHEW	5	azacitidine SUSR	23	benzonatate 150 MG	35
aspirin TABS 325 MG	5	AZATHIOPRINE SODIUM	52	benzonatate 200 MG	35
aspirin TBEC 325 MG	5	azathioprine TABS	52	benzoyl peroxide FOAM 5.3 %, 9.8 %	35
aspirin TBEC 81 MG	5	azelaic acid GEL	41	benzoyl peroxide GEL 10 %	35
aspirin-dipyridamole	46	azelastine hcl (ophth)	56	benzoyl peroxide GEL 5 %	35
		azelastine hcl	55		
		azithromycin PACK	48		

benzoyl peroxide LIQD 4 %, 10 % .36	bicalutamide24	budesonide (inhalation) SUSP10
benzoyl peroxide-erythromycin GEL .35	BIJUVA44	budesonide (intrarectal) 8
benztropine mesylate TABS27	BIKTARVY28	budesonide (nasal)55
bepotastine besilate56	bimatoprost SOLN56	budesonide CPEP 34
BESIVANCE55	bisacodyl SUPP48	budesonide-formoterol fumarate dihydrate10
betaine43	bisacodyl TBEC48	bumetanide SOLN 0.25 MG/ML ...42
betamethasone dipropionate (topical) CREA39	bisoprolol & hydrochlorothiazide ..20	bumetanide TABS42
betamethasone dipropionate (topical) LOTN39	bisoprolol fumarate31	buprenorphine hcl SOLN7
betamethasone dipropionate (topical) OINT39	bleomycin sulfate 15 UNIT25	buprenorphine hcl SUBL7
betamethasone dipropionate augmented CREA39	BOOSTRIX SUSP60	buprenorphine hcl-naloxone hcl dihydrate FILM SL 0.5 MG-2 MG, 1 MG-4 MG, 2 MG-8 MG7
betamethasone dipropionate augmented LOTN39	BOOSTRIX SUSY60	buprenorphine hcl-naloxone hcl dihydrate FILM SL 3 MG-12 MG7
betamethasone dipropionate augmented OINT39	bortezomib SOLR IJ25	buprenorphine hcl-naloxone hcl dihydrate SUBL7
betamethasone valerate CREA ...39	BORTEZOMIB SOLR IV 3.5 MG ..25	buprenorphine PTWK7
betamethasone valerate FOAM ...39	bosentan TABS 125 MG32	bupropion hcl (smoking deterrent) 59
betamethasone valerate LOTN39	bosentan TABS 62.5 MG32	bupropion hcl TABS13
betamethasone valerate OINT39	bosentan TBSO 32 MG32	bupropion hcl TB1213
BETASERON KIT58	BREO ELLIPTA (fluticasone furoate-vilanterol)10	bupropion hcl TB24 150 MG, 300 MG13
betaxolol hcl (ophth) SOLN55	BREO ELLIPTA 50 MCG/INH-25 MCG/INH10	buspirone hcl 5 MG8
betaxolol hcl31	BREZTRI AEROSPHERE10	buspirone hcl 7.5 MG, 10 MG, 15 MG, 30 MG8
bethanechol chloride 25 MG61	brimonidine tartrate (topical)41	busulfan SOLN23
bethanechol chloride 5 MG, 10 MG, 50 MG61	brimonidine tartrate 0.15 %, 0.2 % 55	butalbital-acetaminophen TABS 50 MG-325 MG5
bexarotene (topical)37	brimonidine tartrate-timolol maleate .55	butalbital-acetaminophen-caffeine CAPS 40 MG-50 MG-300 MG5
bexarotene26	brinzolamide56	butalbital-acetaminophen-caffeine CAPS 40 MG-50 MG-325 MG5
BEXSERO 0.5 ML61	BRIVIACT SOLN PO 10 MG/ML ...12	
BEYFORTUS57	bromfenac sodium (ophth)56	
	bromocriptine mesylate CAPS27	
	bromocriptine mesylate TABS 2.5 MG27	

butalbital-acetaminophen-caffeine TABS 40 MG-50 MG-325 MG5	calcium polycarbophil TABS48	CAYA DPRH48
butalbital-acetaminophen-caffeine w/ codeine 30 MG-40 MG-50 MG-300 MG7	candesartan cilexetil19	CAYSTON21
butalbital-acetaminophen-caffeine w/ codeine 30 MG-40 MG-50 MG-325 MG7	candesartan cilexetil- hydrochlorothiazide20	cefaclor CAPS33
butalbital-aspirin-caffeine CAPS5	capecitabine23	cefaclor SUSR 125 MG/5ML, 250 MG/5ML, 375 MG/5ML33
butalbital-aspirin-caffeine w/cod7	CAPRELSA25	cefadroxil CAPS33
butenafine hcl36	captopril 12.5 MG19	cefadroxil SUSR33
butorphanol tartrate IJ 1 MG/ML, 2 MG/ML7	captopril 25 MG, 50 MG, 100 MG .19	cefadroxil TABS33
butorphanol tartrate NA 10 MG/ML .7	CAPVAXIVE61	cefazolin sodium SOLR IJ 1 GM, 10 GM, 500 MG33
CABENUVA28	carbamazepine CHEW 100 MG ...12	cefdinir CAPS33
cabergoline44	carbamazepine CP12 100 MG12	cefdinir SUSR33
CABOMETYX TABS25	carbamazepine CP12 200 MG12	cefepime hcl SOLR IV 2 GM33
calcipotriene CREA38	carbamazepine CP12 300 MG12	cefixime CAPS33
calcipotriene OINT38	carbamazepine SUSP12	cefixime SUSR33
calcipotriene SOLN38	carbamazepine TABS12	cefotetan disodium IJ 1 GM, 2 GM 33
calcipotriene-betamethasone dipropionate OINT39	carbamazepine TB12 100 MG, 400 MG12	cefoxitin sodium IV 1 GM, 2 GM ...33
calcipotriene-betamethasone dipropionate SUSP39	carbamazepine TB12 200 MG12	cefpodoxime proxetil SUSR33
calcitonin (salmon) NA42	carbidopa27	cefpodoxime proxetil TABS33
calcitriol (topical)38	carbidopa-levodopa TABS27	cefprozil SUSR33
calcitriol CAPS43	carbidopa-levodopa TBCR27	cefprozil TABS33
calcitriol SOLN IV43	carbidopa-levodopa TBDP27	ceftazidime IJ 1 GM, 6 GM33
calcium acetate (phosphate binder) CAPS45	carbidopa-levodopa-entacapone .27	cefuroxime axetil TABS33
calcium acetate (phosphate binder) TABS45	carbinoxamine maleate SOLN18	cefuroxime sodium IJ 750 MG33
calcium chloride (dihydrate) SOLN 51	carbinoxamine maleate TABS 4 MG . 18	celecoxib4
	carisoprodol TABS54	cephalexin CAPS33
	carmustine23	cephalexin SUSR33
	carteolol hcl (ophth)55	CERDELGA46
	carvedilol30	cetirizine hcl TABS18
	carvedilol phosphate31	cevimeline hcl53
		CHEMET16

CHEMSTRIP K STRP	41	ciclopirox SOLN	36	clindamycin phosphate (topical) LOTN	36
chloramphenicol sodium succinate 21		cidofovir	30	clindamycin phosphate (topical) SOLN	36
chlordiazepoxide hcl CAPS	9	cilostazol	46	clindamycin phosphate (topical) SWAB	36
chlordiazepoxide hcl-clidinium bromide	60	CIMDUO	28	clindamycin phosphate SOLN IJ 9 GM/60ML, 300 MG/2ML, 600 MG/4ML, 900 MG/6ML, 9000 MG/60ML	21
chlordiazepoxide-amitriptyline	58	cimetidine TABS	60	clindamycin phosphate vaginal CREA	64
chlorhexidine gluconate (mouth- throat)	53	cinacalcet hcl	43	clindamycin phosphate-benzoyl peroxide (refrigerate)	36
chloroquine phosphate TABS 250 MG	22	ciprofloxacin hcl (ophth) SOLN	55	clindamycin phosphate-benzoyl peroxide GEL 5 %-1 %	36
chloroquine phosphate TABS 500 MG	22	ciprofloxacin hcl (otic)	57	clindamycin phosphate-tretinoin ..	36
chlorpromazine hcl SOLN	28	ciprofloxacin hcl TABS	44	CLINIMIX/DEXTROSE (4.25/10) ..	55
chlorpromazine hcl TABS	28	ciprofloxacin in d5w 200 MG/100ML .	44	CLINIMIX/DEXTROSE (4.25/5) ...	55
chlorthalidone 25 MG, 50 MG	42	ciprofloxacin-dexamethasone	57	clobazam SUSP	11
chlorzoxazone TABS 500 MG	54	ciprofloxacin-fluocinolone acetonide .	57	clobazam TABS	11
chlorzoxazone TABS 750 MG	54	cisplatin SOLN 100 MG/100ML ...	23	clobetasol propionate CREA 0.05 % .	39
cholecalciferol CAPS	64	citalopram hydrobromide SOLN ...	14	clobetasol propionate emollient base 0.05 %	39
cholecalciferol TABS 10 MCG, 400 UNIT	64	citalopram hydrobromide TABS ...	14	clobetasol propionate FOAM	39
cholestyramine light PACK	18	clarithromycin SUSR	48	clobetasol propionate GEL 0.05 %	39
cholestyramine light POWD	18	clarithromycin TABS	48	clobetasol propionate OINT 0.05 %	39
cholestyramine PACK	18	clarithromycin TB24	48	clobetasol propionate SOLN 0.05 % .	39
cholestyramine POWD	18	CLASSIC PRENATAL TABS	53	clocortolone pivalate	39
choline fenofibrate	18	clemastine fumarate SYRP	18	clofarabine	23
CHORIONIC GONADOTROPIN IM 43		clemastine fumarate TABS 2.68 MG .	18	clomiphene citrate TABS	43
ciclopirox GEL	36	CLIMARA PRO	44		
ciclopirox olamine CREA	36	clindamycin hcl	21		
ciclopirox olamine SUSP	36	clindamycin palmitate hydrochloride .	21		
ciclopirox SHAM	36	clindamycin phosphate (topical) FOAM	36		
		clindamycin phosphate (topical) GEL	36		

clomipramine hcl	14	COMBIPATCH PTTW	44	263 MG-11 UNIT-4000 UNIT	53
clonazepam TABS	11	COMBIVENT RESPIMAT AERS ..	10	cyanocobalamin SOLN IJ 1000 MCG/ML	47
clonidine hcl (adhd) TB12	1	COMETRIQ (100 MG DAILY DOSE) KIT	25	cyclobenzaprine hcl TABS 5 MG, 10 MG	54
clonidine hcl TABS	19	COMETRIQ (140 MG DAILY DOSE) KIT	25	cyclophosphamide CAPS	23
clonidine PTWK	20	COMETRIQ (60 MG DAILY DOSE) KIT	25	cyclophosphamide SOLR IJ	23
clopidogrel bisulfate 300 MG	46	COMIRNATY 5-11 YEARS SUSP 10 MCG/0.3ML	62	cycloserine	22
clopidogrel bisulfate 75 MG	46	COMIRNATY SUSP	62	cyclosporine (ophth) EMUL	56
clorazepate dipotassium TABS	9	COMIRNATY SUSY	62	cyclosporine CAPS	52
clotrimazole (topical) CREA	36	COMIRNATY SUSY	62	cyclosporine modified (for microemulsion) CAPS	52
clotrimazole (topical) SOLN	36	COMPLERA 200 MG-300 MG-25 MG (emtricitabine- rilpivirine-tenofovir disoproxil fumarate)	29	cyclosporine modified (for microemulsion) SOLN	52
clotrimazole	53	CORDRAN TAPE	39	cyclosporine SOLN IV 50 MG/ML .	52
clotrimazole vaginal CREA 1 % ...	64	CORTISPORIN-TC	57	cyproheptadine hcl SYRP	18
clotrimazole w/ betamethasone CREA	37	COSENTYX (300 MG DOSE) SOSY . 38		cyproheptadine hcl TABS	18
clotrimazole w/ betamethasone LOTN	37	COSENTYX SENSOREADY (300 MG) SOAJ	38	CYSTAGON CAPS	46
clozapine TABS	28	COSENTYX SENSOREADY PEN SOAJ	38	CYSTARAN	56
clozapine TBDP 100 MG	28	COSENTYX SOSY 150 MG/ML ...	38	dabigatran etexilate mesylate CAPS . 11	
clozapine TBDP 12.5 MG, 150 MG 28		COSENTYX SOSY 75 MG/0.5ML .	38	dactinomycin	25
clozapine TBDP 25 MG	28	COSENTYX UNOREADY SOAJ ..	38	dalfampridine	58
COARTEM	22	CREON CPEP	41	danazol CAPS	8
codeine sulfate TABS 30 MG	5	CRESEMBA CAPS 186 MG	17	dantrolene sodium CAPS	54
CODEINE SULFATE TABS	5	cromolyn sodium (ophth)	56	dapagliflozin propanediol	16
colchicine TABS	46	cromolyn sodium NEBU	9	dapagliflozin propanediol-metformin hcl 1000 MG-10 MG	14
colchicine w/ probenecid	46	crotamiton LOTN	41	dapagliflozin propanediol-metformin hcl 1000 MG-5 MG	14
colesevelam hcl PACK	18	CVS PRENATAL TABS 100 MG-2.6 MG-800 MCG-400 UNIT-4 MCG-1.7 MG-18 MG-27 MG-1.5 MG-25 MG-		dapsone	21
colesevelam hcl TABS	18			DAPTACEL	60
colestipol hcl GRAN	18				
colestipol hcl PACK	18				
colestipol hcl TABS	18				

daptomycin 500 MG	21	(biphasic)	33	DIACOMIT CAPS 500 MG	12
darifenacin hydrobromide	61	desogestrel-ethinyl estradiol		DIACOMIT PACK 250 MG	12
darunavir TABS	29	(triphasic)	33	DIACOMIT PACK 500 MG	12
dasatinib	25	desonide CREA	39	diazepam (anticonvulsant) GEL ...	12
DAURISMO	24	desonide LOTN	39	diazepam CONC	9
decitabine	23	desonide OINT	39	diazepam SOLN PO 5 MG/5ML	9
deferasirox PACK	16	desoximetasone CREA 0.25 %	39	diazepam TABS	9
deferasirox TABS	16	desoximetasone GEL	39	diazoxide	15
deferasirox TBSO	16	desoximetasone OINT 0.25 %	39	diclofenac epolamine PTCH EX ...	37
deflazacort TABS	34	desvenlafaxine succinate	14	diclofenac potassium TABS 50 MG .	4
DELSTRIGO	29	dexamethasone ELIX	34	diclofenac sodium (actinic keratoses)	
demeclocycline hcl TABS	59	DEXAMETHASONE INTENSOL		EX	37
DEPO-ESTRADIOL	44	CONC	34	diclofenac sodium (ophth)	56
DEPO-MEDROL SUSP	34	dexamethasone sodium phosphate		diclofenac sodium (topical) GEL EX	
DEPO-SUBQ PROVERA 104 SUSY		(ophth)	56	37	
SC	34	dexamethasone SOLN	34	diclofenac sodium TB24	4
DESCOVY 200 MG-25 MG	29	dexamethasone TABS 0.5 MG, 0.75		diclofenac sodium TBEC	4
desipramine hcl TABS	14	MG	34	diclofenac w/ misoprostol TBEC	4
desloratadine TABS	18	dexamethasone TABS 1 MG, 1.5		dicloxacillin sodium	57
desloratadine TBDP 2.5 MG	18	MG, 2 MG, 4 MG, 6 MG	35	dicyclomine hcl CAPS	60
desmopressin acetate SOLN IJ ...	44	dexlansoprazole	60	dicyclomine hcl SOLN PO	60
DESMOPRESSIN ACETATE SOLN		dexmethylphenidate hcl CP24	1	dicyclomine hcl TABS	60
NA	44	dexmethylphenidate hcl TABS	1	DIFFERIN LOTN	36
desmopressin acetate spray	43	dextroamphetamine sulfate CP24 10		DIFICID TABS 200 MG (fidaxomicin)	
desmopressin acetate spray		MG, 15 MG	1	48	
refrigerated 0.01 %	43	dextroamphetamine sulfate CP24 5		diflorasone diacetate CREA	39
desmopressin acetate TABS 0.1 MG		MG	1	diflorasone diacetate OINT	39
44		dextroamphetamine sulfate TABS 2.5		diflunisal TABS	5
desmopressin acetate TABS 0.2 MG		MG, 7.5 MG, 15 MG, 20 MG, 30 MG .		difluprednate	56
44		1		digoxin SOLN PO 0.05 MG/ML	32
desogestrel & ethinyl estradiol	33	dextroamphetamine sulfate TABS 5		digoxin TABS 62.5 MCG, 125 MCG,	
desogestrel-ethinyl estradiol		MG, 10 MG	1		
		DIACOMIT CAPS 250 MG	12		

250 MCG	32	diphenhydramine hcl LIQD 12.5 MG/5ML, 25 MG/10ML, 50 MG/20ML	18	doxercalciferol CAPS	43
dihydroergotamine mesylate SOLN IJ 1 MG/ML	51	diphenoxylate w/ atropine LIQD ...	16	doxercalciferol SOLN	43
dihydroergotamine mesylate SOLN NA 4 MG/ML	51	diphenoxylate w/ atropine TABS ...	16	doxorubicin hcl SOLR 10 MG, 50 MG	25
DILANTIN (phenytoin sodium extended)	13	dipyridamole	46	doxycycline (monohydrate) CAPS 50 MG, 100 MG	59
DILANTIN	13	disopyramide phosphate CAPS	9	doxycycline (monohydrate) CAPS 75 MG	59
DILANTIN INFATABS CHEW (phenytoin)	13	disulfiram	58	doxycycline (monohydrate) TABS 100 MG	59
DILANTIN SUSP (phenytoin)	13	DIURIL SUSP	42	doxycycline (monohydrate) TABS 50 MG, 75 MG	59
DILANTIN-125 SUSP (phenytoin) .	13	divalproex sodium TB24	13	doxycycline hyclate CAPS	59
diltiazem hcl coated beads CP24 120 MG, 300 MG, 360 MG	31	divalproex sodium TBEC	13	doxycycline hyclate TABS 20 MG, 100 MG	60
diltiazem hcl coated beads CP24 180 MG, 240 MG	31	docetaxel CONC 20 MG/ML	26	doxylamine-pyridoxine TBEC	17
diltiazem hcl CP12	31	docusate calcium	48	dronabinol CAPS	17
diltiazem hcl CP24	31	docusate sodium CAPS 100 MG ..	48	drosiprenone-ethinyl estradiol	33
diltiazem hcl extended release beads 120 MG, 180 MG, 240 MG, 300 MG, 360 MG	31	docusate sodium CAPS 250 MG ..	48	drosiprenone-ethinyl estradiol- levomefolate calcium	33
diltiazem hcl extended release beads 420 MG	31	dofetilide	9	DROXIA CAPS	47
diltiazem hcl SOLN 50 MG/10ML ..	31	donepezil hydrochloride TABS 10 MG	58	DUAVEE	44
DILTIAZEM HCL SOLR	31	donepezil hydrochloride TABS 5 MG, 23 MG	58	DULERA	10
diltiazem hcl TABS	31	donepezil hydrochloride TBDP 10 MG	58	duloxetine hcl CPEP	14
diltiazem hcl TB24	31	donepezil hydrochloride TBDP 5 MG 58		DUPIXENT SOAJ 200 MG/1.14ML 40	
dimethyl fumarate CDPK	58	dorzolamide hcl	56	DUPIXENT SOAJ 300 MG/2ML ...	40
dimethyl fumarate CPDR	58	dorzolamide hcl-timolol maleate ..	55	DUPIXENT SOSY 100 MG/0.67ML 40	
DIPENTUM	45	DOVATO	29	DUPIXENT SOSY 200 MG/1.14ML 40	
diphenhydramine hcl CAPS 50 MG 18		doxazosin mesylate	20	DUPIXENT SOSY 300 MG/2ML ...	40
diphenhydramine hcl ELIX 12.5 MG/5ML	18	doxepin hcl (antipruritic)	37	DUREX EXTRA SENSITIVE THIN DEVI	48
		doxepin hcl (sleep)	47		
		doxepin hcl CAPS	14		
		doxepin hcl CONC	14		

DUREX EXTRA SENSITIVE THIN MISC	48	EMBECTA AUTOSHIELD DUO ...	50	ENERGIX-B SUSP 20 MCG/ML ...	62
DUREX TROPICAL MISC	48	EMBECTA PEN NEEDLE NANO .	50	ENERGIX-B SUSY	62
dutasteride	46	EMBECTA PEN NEEDLE NANO 2		enoxaparin sodium SOLN IJ 300	
dutasteride-tamsulosin hcl	46	GEN	50	MG/3ML	11
econazole nitrate CREA	37	EMBECTA PEN NEEDLE		enoxaparin sodium SOSY 100	
EDARBI	19	ULTRAFINE	50	MG/ML, 150 MG/ML	11
EDURANT	29	EMCYT	24	enoxaparin sodium SOSY 30	
efavirenz CAPS 200 MG	29	EMGALITY (300 MG DOSE) SOSY		MG/0.3ML	11
efavirenz CAPS 50 MG	29	50		enoxaparin sodium SOSY 40	
efavirenz TABS	29	EMGALITY SOAJ	50	MG/0.4ML	11
efavirenz-emtricitabine-tenofovir		EMGALITY SOSY	50	enoxaparin sodium SOSY 60	
disoproxil fumarate	29	EMSAM	13	MG/0.6ML	11
efavirenz-lamivudine-tenofovir		emtricitabine CAPS	29	enoxaparin sodium SOSY 80	
disoproxil fumarate	29	emtricitabine-rilpivirine-tenofovir		MG/0.8ML, 120 MG/0.8ML	11
ELAPRASE	43	disoproxil fumarate	29	entacapone	27
electrolyte-148	51	emtricitabine-tenofovir disoproxil		entecavir TABS	30
electrolyte-a	51	fumarate 100 MG-150 MG, 133 MG-		EPIDIOLEX	12
ELESTRIN GEL	44	200 MG, 167 MG-250 MG	29	epinastine hcl (ophth)	56
eletriptan hydrobromide	51	emtricitabine-tenofovir disoproxil		epinephrine (anaphylaxis) SOAJ ..	64
ELIGARD KIT SC 7.5 MG	24	fumarate 200 MG-300 MG	29	eplerenone	21
ELIGARD SC 22.5 MG, 30 MG, 45		EMTRIVA SOLN	29	epoprostenol sodium	32
MG	24	EMVERM CHEW	8	eptifibatide 200 MG/100ML	46
ELIQUIS DVT/PE STARTER PACK		enalapril maleate &		EQL PRENATAL FORMULA TABS	
TBPK	11	hydrochlorothiazide 12.5 MG-5 MG		53	
ELIQUIS TABS	11	20		EQUETRO 100 MG	27
ELLA	34	enalapril maleate &		EQUETRO 200 MG	27
ELMIRON CAPS	46	hydrochlorothiazide 25 MG-10 MG 20		EQUETRO 300 MG	27
eltrombopag olamine PACK 12.5		enalapril maleate TABS	19	ERBITUX	24
MG, 25 MG	47	ENBREL MINI SOCT	5	ergocalciferol CAPS	64
eltrombopag olamine TABS 12.5 MG,		ENBREL SOLN	5	ergocalciferol SOLN PO 200	
25 MG, 50 MG, 75 MG	47	ENBREL SOSY 25 MG/0.5ML	5	MCG/ML	64
		ENBREL SOSY 50 MG/ML	5	ergoloid mesylates TABS	59
		ENBREL SURECLICK SOAJ	5	ERGOMAR SUBL	51

ergotamine w/ caffeine TABS50	estradiol PTTW44	ezetimibe19
eribulin mesylate26	estradiol PTWK44	ezetimibe-simvastatin18
ERIVEDGE24	estradiol TABS44	famciclovir 125 MG, 250 MG30
ERLEADA 240 MG24	estradiol vaginal CREA64	famciclovir 500 MG30
ERLEADA 60 MG24	estradiol vaginal TABS64	famotidine in nacl SOLN60
erlotinib hcl24	estradiol valerate44	famotidine SUSR60
ERTACZO37	ESTRING RING 7.5 MCG/24HR ..64	famotidine TABS 20 MG, 40 MG ..60
ertapenem sodium IJ21	eszopiclone47	FANAPT27
erythromycin (acne aid) PADS36	ethacrynic acid42	FANAPT TITRATION PACK A28
erythromycin (acne aid) SOLN36	ethambutol hcl TABS22	FANTASY LUBRICATED MISC ...49
erythromycin (ophth)55	ethosuximide CAPS13	FANTASY
erythromycin base CPEP48	ethosuximide SOLN13	LUBRICATED/SPERMICIDE MISC
erythromycin base TABS48	ethynodiol diacet & eth estrad33	49
erythromycin base TBEC48	etodolac CAPS4	FASENRA PEN SOAJ9
erythromycin ethylsuccinate SUSR	etodolac TABS4	FASENRA SOSY 10 MG/0.5ML9
48	etonogestrel-ethinyl estradiol34	FASENRA SOSY 30 MG/ML9
erythromycin ethylsuccinate TABS 48	ETOPOPHOS26	FC2 FEMALE CONDOM49
escitalopram oxalate SOLN14	etoposide CAPS26	febuxostat46
escitalopram oxalate TABS14	etoposide SOLN 1 GM/50ML, 100	felbamate SUSP13
eslicarbazepine acetate 200 MG, 400	MG/5ML, 500 MG/25ML26	felbamate TABS 400 MG13
MG, 600 MG, 800 MG12	etravirine 100 MG29	felbamate TABS 600 MG13
esomeprazole magnesium CPDR 20	etravirine 200 MG29	felodipine31
MG61	EUCRISA41	FEMCAP DEVI49
esomeprazole magnesium CPDR 40	EVAMIST SOLN44	FEMLYV TBDP33
MG61	everolimus (immunosuppressant)	FEMRING64
esomeprazole magnesium TBEC ..61	0.25 MG, 0.5 MG, 0.75 MG53	fenofibrate micronized 43 MG, 130
estazolam47	everolimus (immunosuppressant) 1	MG19
esterified estrogens &	MG53	fenofibrate micronized 67 MG, 134
methyltestosterone44	everolimus TABS25	MG, 200 MG19
estradiol & norethindrone acetate	EVOTAZ29	fenofibrate TABS 48 MG, 54 MG, 145
TABS44	exemestane24	MG, 160 MG19
estradiol GEL44		fenoprofen calcium TABS4

FENSOLVI (6 MONTH) SC43	FLUCELVAX SUSY62	fluoxetine hcl CAPS14
fentanyl citrate LPOP5	fluconazole SUSR17	fluoxetine hcl CPDR14
fentanyl PT72 12 MCG/HR, 25 MCG/HR, 50 MCG/HR, 75 MCG/HR, 100 MCG/HR5	fluconazole TABS18	fluoxetine hcl SOLN14
ferrous sulfate SOLN 15 MG/ML, 15 MG/ML47	flucytosine17	fluoxetine hcl TABS14
ferrous sulfate TABS 325 MG, 65 MG, 325 MG47	fludarabine phosphate SOLN23	fluphenazine hcl CONC28
ferrous sulfate TBEC 325 MG47	fludarabine phosphate SOLR23	fluphenazine hcl ELIX28
fesoterodine fumarate61	fludrocortisone acetate TABS35	fluphenazine hcl SOLN28
FETZIMA CP2414	FLULAVAL QUADRIVALENT SUSY . 62	fluphenazine hcl TABS28
FETZIMA TITRATION C4PK14	FLULAVAL SUSY62	flurandrenolide CREA39
fidaxomicin TABS 200 MG48	FLUMIST62	flurandrenolide LOTN40
finasteride46	FLUMIST QUADRIVALENT62	flurazepam hcl47
fingolimod hcl58	flunisolide (nasal)55	flurbiprofen sodium56
FIRMAGON (240 MG DOSE)24	fluocinolone acetonide (otic)57	flurbiprofen TABS4
FIRMAGON 80 MG24	fluocinolone acetonide CREA 0.01 % 39	fluticasone furoate (inhalation) 50 MCG/ACT, 100 MCG/ACT, 200 MCG/ACT10
flavoxate hcl61	fluocinolone acetonide CREA 0.025 %39	fluticasone furoate-vilanterol10
flecainide acetate9	fluocinolone acetonide OIL39	fluticasone propionate (inhalation) AEPB10
floxuridine23	fluocinolone acetonide OINT39	fluticasone propionate (nasal) SUSP . 55
FLUAD62	fluocinolone acetonide SOLN39	fluticasone propionate CREA 0.05 % 40
FLUAD QUADRIVALENT62	fluocinonide CREA 0.05 %39	fluticasone propionate hfa10
FLUARIX QUADRIVALENT SUSY 62	fluocinonide CREA 0.1 %39	fluticasone propionate LOTN40
FLUARIX SUSY62	fluocinonide emulsified base39	fluticasone propionate OINT40
FLUBLOK QUADRIVALENT62	fluocinonide GEL39	fluticasone-salmeterol AEPB 100 MCG/ACT-50 MCG/ACT, 250 MCG/ACT-50 MCG/ACT, 500 MCG/ACT-50 MCG/ACT10
FLUBLOK SOSY62	fluocinonide OINT39	fluticasone-salmeterol AEPB 113 MCG/ACT-14 MCG/ACT, 232 MCG/ACT-14 MCG/ACT, 55 MCG/ACT-14 MCG/ACT10
FLUCELVAX QUADRIVALENT SUSP62	fluocinonide SOLN39	
FLUCELVAX QUADRIVALENT SUSY62	fluorometholone (ophth) SUSP56	
FLUCELVAX SUSP62	fluorouracil (topical) CREA 5 % ...37	
	fluorouracil (topical) SOLN37	
	fluorouracil 500 MG/10ML23	

fluticasone-salmeterol AERO	10	fosphenytoin sodium	13	GARDASIL 9 SUSY 0.5 ML	63
fluvastatin sodium CAPS 20 MG ...	19	FRAGMIN SOSY	11	gatifloxacin (ophth)	55
fluvastatin sodium CAPS 40 MG ...	19	FREESTYLE LIBRE 14 DAY READER	50	gefitinib	24
fluvoxamine maleate TABS	14	FREESTYLE LIBRE 14 DAY SENSOR	50	gemcitabine hcl SOLR 2 GM, 200 MG	23
FLUZONE HIGH-DOSE QUADRIVALENT	62	FREESTYLE LIBRE 2 PLUS SENSOR	50	gemfibrozil TABS	19
FLUZONE HIGH-DOSE SUSY	63	FREESTYLE LIBRE 2 READER ..	50	GENOTROPIN CART SC	43
FLUZONE QUADRIVALENT SUSP 63		FREESTYLE LIBRE 2 SENSOR ..	50	GENOTROPIN MINIQUEL PRSY 43	
FLUZONE QUADRIVALENT SUSY 63		FREESTYLE LIBRE 3 PLUS SENSOR	50	gentamicin in saline 0.8 MG/ML-0.9 %, 1 MG/ML-0.9 %, 1.2 MG/ML-0.9 %, 1.6 MG/ML-0.9 %	2
FLUZONE SUSP	63	FREESTYLE LIBRE 3 READER ..	50	gentamicin sulfate (ophth) SOLN ..	55
FLUZONE SUSY	63	FREESTYLE LIBRE 3 SENSOR ..	50	gentamicin sulfate (topical) CREA .	36
FML FORTE SUSP	56	FREESTYLE LIBRE READER	50	gentamicin sulfate (topical) OINT ..	36
folic acid TABS	47	frovatriptan succinate	51	gentamicin sulfate IJ 40 MG/ML	2
fondaparinux sodium 10 MG/0.8ML 11		FT PRENATAL TABS	53	GENVOYA	29
fondaparinux sodium 2.5 MG/0.5ML . 11		fulvestrant SOSY	24	GILOTRIF	24
fondaparinux sodium 5 MG/0.4ML .11		furosemide SOLN PO 8 MG/ML, 10 MG/ML	42	glatiramer acetate SOSY 20 MG/ML . 58	
fondaparinux sodium 7.5 MG/0.6ML . 11		furosemide TABS	42	glatiramer acetate SOSY 40 MG/ML . 58	
FORA GTBL BLOOD KETONE TEST	41	FUZEON SOLR	29	GLEOSTINE 10 MG	23
FORA TEST N'GO ADV-VOICE-6 CON	41	gabapentin CAPS	12	GLEOSTINE 40 MG, 100 MG	23
formoterol fumarate NEBU	10	gabapentin SOLN	12	glimepiride 1 MG, 2 MG	16
FOSAMAX PLUS D	42	gabapentin TABS 600 MG, 800 MG 12		glimepiride 4 MG	16
fosamprenavir calcium TABS	29	galantamine hydrobromide CP24 ..	58	glipizide TABS 5 MG, 10 MG	16
fosfomycin tromethamine	21	galantamine hydrobromide SOLN ..	58	glipizide TB24	16
fosinopril sodium & hydrochlorothiazide	20	galantamine hydrobromide TABS ..	58	glipizide-metformin hcl 250 MG-2.5 MG, 500 MG-2.5 MG	15
fosinopril sodium	19	ganciclovir sodium SOLR	30	glipizide-metformin hcl 500 MG-5 MG	15
		ganirelix acetate	43	GLUCAGEN DIAGNOSTIC	41
		GARDASIL 9 SUSP 0.5 ML	63		

glucagon SOLR IJ 1 MG15	HALOG OINT40	HUMULIN R U-500 (CONCENTRATED) SOLN SC16
glyburide micronized 1.5 MG, 3 MG, 6 MG16	haloperidol decanoate28	HUMULIN R U-500 KWIKPEN SOPN SC16
glyburide TABS16	haloperidol lactate CONC28	HYCANTIN CAPS27
glyburide-metformin 250 MG-1.25 MG15	haloperidol lactate SOLN28	hydralazine hcl SOLN21
glyburide-metformin 500 MG-2.5 MG, 500 MG-5 MG15	haloperidol TABS28	hydralazine hcl TABS21
glycine (gu irrigant) SOLN 1.5 % ..46	HAVRIX IM 720 EL U/0.5ML63	hydrochlorothiazide CAPS42
glycopyrrolate SOLN IJ 4 MG/20ML 60	HEALON PRO SOSY56	hydrochlorothiazide TABS 12.5 MG 42
glycopyrrolate TABS 1 MG60	HEMATINIC/FOLIC ACID47	hydrochlorothiazide TABS 25 MG, 50 MG42
glycopyrrolate TABS 2 MG60	HEPARIN (PORCINE) IN NACL SOLN IV 0.45 %-12500 UNIT/250ML 11	hydrocodone bitartrate CP125
GLYXAMBI15	heparin sodium (porcine) SOLN IJ 5000 UNIT/ML, 10000 UNIT/ML, 20000 UNIT/ML11	hydrocodone bitartrate T24A5
GNP PRENATAL TABS53	HEPLISAV-B SOSY63	hydrocodone polistirex- chlorpheniramine polistirex SUER .35
GNP PRENATAL/FOLIC ACID TABS53	HIBERIX SOLR IJ61	hydrocodone-acetaminophen SOLN 108 MG/5ML-2.5 MG/5ML, 217 MG/10ML-5 MG/10ML, 325 MG/15ML-7.5 MG/15ML7
GOHIBIC46	HUMATROPE CART IJ43	hydrocodone-acetaminophen SOLN 325 MG/15ML-10 MG/15ML7
GOJJI BLOOD KETONE TEST ...41	HUMIRA (2 PEN) AJKT 80 MG/0.8ML3	hydrocodone-acetaminophen TABS 300 MG-10 MG, 300 MG-5 MG, 300 MG-7.5 MG7
granisetron hcl SOLN IV 1 MG/ML 17	HUMIRA (2 PEN) AJKT3	hydrocodone-acetaminophen TABS 325 MG-10 MG, 325 MG-5 MG, 325 MG-7.5 MG7
granisetron hcl TABS17	HUMIRA (2 SYRINGE) PSKT3	hydrocodone-acetaminophen TABS 325 MG-10 MG, 325 MG-5 MG, 325 MG-7.5 MG7
GRASTEK SUBL2	HUMIRA-CD/UC/HS STARTER AJKT3	hydrocodone-acetaminophen TABS 325 MG-10 MG, 325 MG-5 MG, 325 MG-7.5 MG7
griseofulvin microsize SUSP17	HUMIRA-PED<40KG CROHNS STARTER PSKT3	hydrocodone-acetaminophen TABS 325 MG-2.5 MG7
griseofulvin microsize TABS17	HUMIRA-PED>=40KG CROHNS START PSKT3	hydrocodone-ibuprofen 10 MG-200 MG, 5 MG-200 MG7
griseofulvin ultramicrosize17	HUMIRA-PS/UV/ADOL HS STARTER AJKT3	hydrocodone-ibuprofen 7.5 MG-200 MG7
guanfacine hcl (adhd)1	HUMIRA-PSORIASIS/UEIT STARTER AJKT3	hydrocortisone (intrarectal)8
guanfacine hcl20		
GYNAZOLE-164		
HAEGARDA SOLR SC46		
halcinonide CREA40		
halobetasol propionate CREA40		
halobetasol propionate OINT40		

hydrocortisone (rectal) EX8	hydroxyzine hcl SOLN 50 MG/ML ...8	indomethacin CPR4
hydrocortisone (topical) CREA 1 %, 2.5 %40	hydroxyzine hcl SYRP8	INFANRIX60
hydrocortisone (topical) LOTN 2.5 % . 40	hydroxyzine hcl TABS8	INFLECTRA SOLR45
hydrocortisone (topical) OINT 1 %, 2.5 %40	hydroxyzine pamoate CAPS8	INLYTA23
hydrocortisone acetate (rectal)8	HYPERSAL NEBU35	INSULIN ASP PROT & ASP FLEXPEN SUPN16
hydrocortisone butyrate CREA40	HYQVIA57	INSULIN ASPART PROT & ASPART SUSP16
hydrocortisone butyrate OINT40	ibandronate sodium SOLN42	INSULIN GLARGINE-YFGN SOLN 16
hydrocortisone butyrate SOLN40	ibandronate sodium TABS42	INSULIN GLARGINE-YFGN SOPN 16
hydrocortisone sod succinate 100 MG35	IBRANCE CAPS25	INSULIN LISPRO (1 UNIT DIAL) SOPN16
hydrocortisone TABS35	IBRANCE TABS25	INSULIN LISPRO JUNIOR KWIKPEN SOPN16
hydrocortisone vaginal64	ibuprofen SUSP 100 MG/5ML, 200 MG/10ML4	INSULIN LISPRO PROT & LISPRO SUPN16
hydrocortisone valerate CREA40	ibuprofen TABS 400 MG, 600 MG ..4	INSULIN LISPRO SOLN IJ16
hydrocortisone valerate OINT40	ibuprofen TABS 800 MG4	INTELENCE 25 MG29
hydrocortisone w/acetic acid57	icatibant acetate SOSY46	IONOSOL-MB IN D5W51
hydromorphone hcl LIQD5	ICLUSIG25	IPOSOL-MB IN D5W51
hydromorphone hcl SOLN IJ 10 MG/ML, 50 MG/5ML, 500 MG/50ML . 6	icosapent ethyl 1 GM18	IPOSOL-MB IN D5W51
hydromorphone hcl TABS6	idarubicin hcl 20 MG/20ML25	IPOSOL-MB IN D5W51
hydromorphone hcl TB24 32 MG ...6	idarubicin hcl 5 MG/5ML, 10 MG/10ML25	IPOSOL-MB IN D5W51
hydromorphone hcl TB24 8 MG, 12 MG, 16 MG6	ifosfamide SOLN 1 GM/20ML23	IPOSOL-MB IN D5W51
hydroxychloroquine sulfate 100 MG 22	ifosfamide SOLR23	IPOSOL-MB IN D5W51
hydroxychloroquine sulfate 200 MG 22	imatinib mesylate TABS25	IPOSOL-MB IN D5W51
hydroxychloroquine sulfate 400 MG 22	imipramine hcl TABS14	IPOSOL-MB IN D5W51
hydroxyurea26	imipramine pamoate14	IPOSOL-MB IN D5W51
	imiquimod 5 %40	IPOSOL-MB IN D5W51
	INCRELEX43	IPOSOL-MB IN D5W51
	INCRUSE ELLIPTA9	IPOSOL-MB IN D5W51
	indapamide TABS 1.25 MG42	IPOSOL-MB IN D5W51
	indapamide TABS 2.5 MG42	IPOSOL-MB IN D5W51
	indomethacin CAPS 25 MG, 50 MG 4	IPOSOL-MB IN D5W51

ISENTRESS CHEW	29	JYNNEOS	63	KIMONO SENSATION PLUS MISC	
ISENTRESS HD TABS	29	KALETRA SOLN	29	49	
ISENTRESS TABS	29	KALYDECO TABS	59	KIMONO SPECIAL DEVI	49
ISOLYTE-P IN D5W	52	KAMELEON LUBRICATED MISC	49	KINRIX SUSY	60
ISOLYTE-S	52	KANJINTI	24	KISQALI (200 MG DOSE)	25
isoniazid SOLN	22	KCL IN DEXTROSE-NACL 5 %-40		KISQALI (400 MG DOSE)	25
isoniazid SYRP	22	MEQ/L-0.9 % (potassium chloride in		KISQALI (600 MG DOSE)	25
isoniazid TABS	22	dextrose & sodium chloride)	52	KISQALI FEMARA (200 MG DOSE) .	25
isosorbide dinitrate TABS 5 MG, 10		KCL-LACTATED RINGERS-D5W	52	KISQALI FEMARA (400 MG DOSE) .	25
MG, 20 MG, 30 MG	8	KEPIVANCE 6.25 MG	26	KISQALI FEMARA (600 MG DOSE) .	25
isosorbide dinitrate-hydralazine hcl		ketoconazole (topical) CREA	37		
32		ketoconazole (topical) SHAM 2 %	37	KP PRENATAL MULTIVITAMINS	
isosorbide mononitrate TABS	8	ketoconazole	18	TABS	53
isosorbide mononitrate TB24	8	KETONE TEST STRP	41	KRINTAFEL	22
isotretinoin 10 MG, 20 MG, 30 MG,		ketoprofen CAPS 50 MG	4	K-Y ME & YOU EXTRA	
40 MG	36	ketorolac tromethamine (ophth) ...	56	LUBRICATED DEVI	49
isradipine CAPS	31	ketorolac tromethamine TABS	4	K-Y ME & YOU INTENSE DEVI ...	49
itraconazole CAPS	18	KETOSTIX STRP	41	KYLEENA	34
itraconazole SOLN	18	ketotifen fumarate (ophth) 0.035 %		KYPROLIS	25
ivabradine hcl TABS	33	56		labetalol hcl SOLN	31
ivermectin (pediculicide)	41	KEVZARA SOAJ	4	labetalol hcl TABS 100 MG, 200 MG .	31
ivermectin	8	KEVZARA SOSY	4	labetalol hcl TABS 300 MG	31
IXEMPRA KIT 15 MG	26	KIMONO COLORS DEVI	49	lacosamide SOLN IV 200 MG/20ML .	12
JAKAFI	25	KIMONO MAXX-LARGE FLARE		lacosamide TABS	12
JANUMET TABS	15	MISC	49	lactated ringer's (irrigation)	53
JANUMET XR TB24 1000 MG-100		KIMONO MICRO THIN PLUS MISC .	49	lactic acid (ammonium lactate) CREA	40
MG	15	49			40
JANUMET XR TB24 1000 MG-50		KIMONO MISC	49	lactic acid (ammonium lactate) LOTN	
MG, 500 MG-50 MG	15	KIMONO PLUS MISC	49	12 %	40
JANUVIA	15	KIMONO PS MISC	49		
JARDIANCE	16	KIMONO PS PLUS MISC	49		
JULUCA	29	KIMONO SENSATION MISC	49		

lactulose (encephalopathy)	45	LENVIMA (4 MG DAILY DOSE) ..	23	MG	34
lactulose SOLN	48	LENVIMA (8 MG DAILY DOSE) ..	23	levonorgestrel-eth estradiol (triphasic)	33
lamivudine (hbv) TABS	30	letrozole	24	levonorgestrel-ethinyl estradiol (91- day) 0.03 MG-0.15 MG	33
lamivudine SOLN	29	leucovorin calcium SOLR	26	levonorgestrel-ethinyl estradiol (continuous)	33
lamivudine TABS 150 MG	29	leucovorin calcium TABS	26	levonorgestrel-ethinyl estradiol-iron 33	
lamivudine TABS 300 MG	29	LEUKERAN	23	levorphanol tartrate TABS 2 MG	6
lamivudine-zidovudine	29	LEUKINE SOLR IJ	47	levothyroxine sodium TABS	60
lamotrigine CHEW 25 MG	12	leuprolide acetate KIT IJ 1 MG/0.2ML	24	LEXIVA SUSP	29
lamotrigine CHEW 5 MG	12	levalbuterol hcl	10	lidocaine hcl (mouth-throat) 2 % ...	53
lamotrigine TABS	12	levalbuterol tartrate	10	lidocaine hcl (mouth-throat) 4 % ...	53
lamotrigine TBDP	12	levetiracetam SOLN IV 500 MG/5ML 12		lidocaine hcl GEL 2 %	41
LANOXIN SOLN IJ (digoxin)	32	levetiracetam TABS 1000 MG	12	lidocaine hcl PRSY	41
LANOXIN TABS 62.5 MCG, 125 MCG, 250 MCG (digoxin)	32	levetiracetam TABS 250 MG, 750 MG	12	lidocaine hcl SOLN	41
lansoprazole CPDR 15 MG	61	levetiracetam TABS 500 MG	12	lidocaine PTCH 5 %	41
lansoprazole CPDR 30 MG	61	levetiracetam TB24	12	lidocaine-prilocaine CREA	41
lanthanum carbonate CHEW	45	levobunolol hcl 0.5 %	55	LILETTA (52 MG)	34
lapatinib ditosylate	25	levocetirizine dihydrochloride SOLN 18		lincomycin hcl	21
LASTACRAFT	56	levocetirizine dihydrochloride TABS 18		linezolid SUSR	21
latanoprost SOLN	56	levofloxacin (ophth) 0.5 %	55	linezolid TABS	21
leflunomide	5	levofloxacin in d5w 500 MG/100ML 44		LINZESS	45
LEMTRADA	58	levofloxacin SOLN PO	44	liothyronine sodium SOLN	60
lenalidomide 2.5 MG, 5 MG, 10 MG, 15 MG, 25 MG	52	levofloxacin TABS 250 MG, 750 MG . 44		liothyronine sodium TABS	60
lenalidomide 20 MG	52	levofloxacin TABS 500 MG	44	liraglutide	15
LENVIMA (10 MG DAILY DOSE) .	23	levonorgestrel & eth estradiol TABS 33		lisdexamfetamine dimesylate CAPS 1 1	
LENVIMA (12 MG DAILY DOSE) .	23			lisdexamfetamine dimesylate CHEW . 1	
LENVIMA (14 MG DAILY DOSE) .	23			lisinopril & hydrochlorothiazide ...	20
LENVIMA (18 MG DAILY DOSE) .	23			lisinopril TABS 2.5 MG, 5 MG, 10	
LENVIMA (20 MG DAILY DOSE) .	23				
LENVIMA (24 MG DAILY DOSE) .	23				

MG, 20 MG, 30 MG, 40 MG	19	lovastatin TABS 10 MG, 20 MG ...	19	MEDROL TABS	35
lithium	27	lovastatin TABS 40 MG	19	medroxyprogesterone acetate (contraceptive) SUSP IM	34
lithium carbonate CAPS	27	loxapine succinate	28	medroxyprogesterone acetate (contraceptive) SUSY IM	34
lithium carbonate TABS	27	lubiprostone	45	medroxyprogesterone acetate 10 MG	57
lithium carbonate TBCR	27	luliconazole	37	medroxyprogesterone acetate 2.5 MG, 5 MG	58
LO LOESTRIN FE TABS	33	LUMAKRAS 120 MG, 240 MG	25	mefenamic acid CAPS	4
lofexidine hcl	58	LUMAKRAS 320 MG	25	mefloquine hcl	22
LOKELMA	53	LUPRON DEPOT (1-MONTH) KIT IM	24	megestrol acetate (appetite)	58
loperamide hcl CAPS	16	LUPRON DEPOT (3-MONTH) KIT IM	24	megestrol acetate SUSP	24
lopinavir-ritonavir SOLN	29	LUPRON DEPOT (4-MONTH) IM .	24	megestrol acetate TABS	24
lopinavir-ritonavir TABS	29	LUPRON DEPOT (6-MONTH) IM .	24	MEKINIST SOLR	25
LOQTORZI	24	lurasidone hcl 20 MG, 40 MG, 60 MG, 120 MG	27	MEKINIST TABS 0.5 MG	25
loratadine CAPS	18	lurasidone hcl 80 MG	27	MEKINIST TABS 2 MG	25
loratadine CHEW	18	LYNPARZA TABS	25	meloxicam TABS	4
loratadine SOLN	18	LYSODREN	24	melphalan	23
loratadine TABS	18	mafenide acetate PACK	38	melphalan hcl IV	23
loratadine TBDP	18	malathion	41	memantine hcl TABS	58
lorazepam CONC	9	maraviroc TABS 150 MG	29	MENACTRA	61
lorazepam TABS 0.5 MG, 2 MG	9	maraviroc TABS 300 MG	29	MENEST 2.5 MG	44
lorazepam TABS 1 MG	9	MARPLAN	13	MENOSTAR PTWK	44
LORBRENA	25	MASONATAL TABS	53	MENQUADFI 0.5 ML	61
losartan potassium & hydrochlorothiazide 12.5 MG-100 MG, 25 MG-100 MG	20	MATULANE	26	MENVEO SOLN	61
losartan potassium & hydrochlorothiazide 12.5 MG-50 MG . 20		MAXIDEX SUSP OP	56	MENVEO SOLR	61
losartan potassium	19	MAXX MISC	49	meperidine hcl SOLN IJ 25 MG/ML, 50 MG/ML, 100 MG/ML	6
LOTEMAX OINT	56	MAXX PLUS MISC	49	meperidine hcl SOLN PO 50 MG/5ML	6
loteprednol etabonate GEL	56	meclizine hcl TABS 12.5 MG	17	meperidine hcl TABS 50 MG	6
loteprednol etabonate SUSP	56	meclizine hcl TABS 25 MG	17		
		meclofenamate sodium CAPS	4		

meprobamate	8	methotrexate sodium SOLN 50 MG/2ML, 250 MG/10ML	23	methylprednisolone sod succ 40 MG, 125 MG, 500 MG, 1000 MG	35
mercaptopurine TABS	23	methotrexate sodium SOLR	23	methylprednisolone TABS	35
mesalamine CP24	45	methotrexate sodium TABS 2.5 MG 23		methylprednisolone TBPK	35
mesalamine CPDR	45	methoxsalen rapid	38	methyltestosterone TABS	8
mesalamine ENEM	45	methscopolamine bromide	60	metoclopramide hcl SOLN IJ 5 MG/ML	45
mesalamine SUPP	45	methsuximide	13	metoclopramide hcl SOLN PO 5 MG/5ML, 10 MG/10ML	45
mesalamine TBEC 1.2 GM	45	methyldopa TABS	20	metoclopramide hcl TABS	45
mesalamine TBEC 800 MG	45	methylphenidate hcl CHEW 10 MG .1		metolazone	42
metaxalone 800 MG	54	methylphenidate hcl CHEW 2.5 MG 1		metoprolol & hydrochlorothiazide TABS 25 MG-100 MG, 50 MG-100 MG	20
metformin hcl TABS 1000 MG	15	methylphenidate hcl CHEW 5 MG ..1		metoprolol & hydrochlorothiazide TABS 25 MG-50 MG	20
metformin hcl TABS 500 MG	15	methylphenidate hcl CP24 10 MG, 20 MG, 40 MG, 60 MG	1	metoprolol succinate TB24 200 MG 31	
metformin hcl TABS 850 MG	15	methylphenidate hcl CP24 30 MG ..1		metoprolol succinate TB24 25 MG, 50 MG, 100 MG	31
metformin hcl TB24 500 MG	15	methylphenidate hcl CP24	1	metoprolol tartrate SOLN IV 5 MG/5ML	31
metformin hcl TB24 750 MG	15	methylphenidate hcl CP24	1	metoprolol tartrate TABS 25 MG, 50 MG, 100 MG	31
methadone hcl CONC	6	methylphenidate hcl CPCR	2	metronidazole (topical) CREA	41
METHADONE HCL SOLN IJ (methadone hcl)	6	methylphenidate hcl SOLN	2	metronidazole (topical) GEL 0.75 % 41	
methadone hcl SOLN IJ 10 MG/ML .6		methylphenidate hcl TABS 10 MG, 20 MG	2	metronidazole (topical) GEL 1 % ..	41
methadone hcl SOLN PO 10 MG/5ML	6	methylphenidate hcl TABS 5 MG ...2		metronidazole (topical) LOTN	41
methadone hcl SOLN PO 5 MG/5ML 6		methylphenidate hcl TB24 18 MG, 27 MG	2	metronidazole TABS 250 MG, 500 MG	21
methadone hcl TABS 10 MG	6	methylphenidate hcl TB24 36 MG, 54 MG	2	metronidazole vaginal	64
methadone hcl TABS 5 MG	6	methylphenidate hcl TBCR 10 MG, 20 MG	2	mexiletine hcl	9
methadone hcl TBSO	6	methylphenidate hcl TBCR 18 MG, 27 MG	2	miconazole nitrate vaginal SUPP 200	
methamphetamine hcl	1	methylphenidate hcl TBCR 36 MG, 54 MG	2		
methazolamide TABS	42	methylphenidate PTCH	2		
methenamine hippurate	21	methylprednisolone acetate SUSP 35			
methimazole TABS	60				
methocarbamol TABS 500 MG, 750 MG	54				

MG	64	mometasone furoate (nasal) SUSP 55	mycophenolate sodium	53
midodrine hcl	64	mometasone furoate CREA	MYLERAN TABS	23
miglitol	14	mometasone furoate OINT	nabumetone	4
miglustat	47	mometasone furoate SOLN	nadolol TABS 20 MG	31
minocycline hcl CAPS	60	mometasone furoate SOLN	nadolol TABS 40 MG	31
minocycline hcl TABS	60	montelukast sodium CHEW	nadolol TABS 80 MG	31
minoxidil 2.5 MG, 10 MG	21	montelukast sodium PACK	nafcillin sodium IV 10 GM	57
mirabegron TB24	61	montelukast sodium TABS	naftifine hcl CREA 1 %	37
MIRCERA	47	morphine sulfate CP24 10 MG, 20 MG, 30 MG, 50 MG, 60 MG, 80 MG, 100 MG	naftifine hcl CREA 2 %	37
MIRENA (52 MG)	34	morphine sulfate SOLN IJ 0.5 MG/ML, 1 MG/ML	naloxone hcl LIQD	17
mirtazapine TABS	13	morphine sulfate SOLN PO 10 MG/5ML	naloxone hcl SOLN 0.4 MG/ML, 4 MG/10ML	17
mirtazapine TBDP	13	morphine sulfate SOLN PO 20 MG/5ML	naltrexone hcl	17
misoprostol	61	morphine sulfate TABS	naproxen sodium TABS 550 MG ...	4
mitomycin SOLR IV 20 MG	25	morphine sulfate TBCR	naproxen SUSP	4
mitoxantrone hcl 25 MG/12.5ML ...	25	MOTOFEN	naproxen TABS	4
MIUDELLA INTRAUTERINE COPPER	34	MOVANTIK	naproxen TBEC 500 MG	4
M-M-R II SOLR	63	moxifloxacin hcl (ophth) SOLN OP	naratriptan hcl	51
M-NATAL PLUS TABS	53	44	NATACYN	56
MNEXSPIKE SUSY 10 MCG/0.2ML . 63		moxifloxacin hcl in sodium chloride 44	NATAZIA	33
modafinil 100 MG	2	moxifloxacin hcl TABS	nateglinide	16
modafinil 200 MG	2	MRESVIA	NAYZILAM	12
MODERNA COVID-19 BIVALENT 63		MULTI PRENATAL TABS	nebivolol hcl 2.5 MG, 5 MG, 10 MG 31	
MODERNA COVID-19 VAC 6M-11Y SUSP	63	mupirocin OINT	nebivolol hcl 20 MG	31
MODERNA COVID-19 VAC 6M-11Y SUSY	63	MVASI	NEBUSAL NEBU	35
MODERNA COVID-19 VACCINE SUSP	63	MYALEPT	nefazodone hcl	14
moexipril hcl	19	mycophenolate mofetil CAPS	nelarabine	23
		mycophenolate mofetil TABS	neomycin sulfate TABS	2
			neomycin-bacitracin zn-polymyxin	56
			neomycin-polymy-dexameth OINT	56

neomycin-polymyx-dexameth SUSP 0.1 %-3.5 MG/ML-10000 UNIT/ML, 0.1 %	56	nicardipine hcl CAPS	31	NIVA-PLUS TABS	54
neomycin-polymyxin-hc (ophth) ...	56	nicardipine hcl SOLN	31	nizatidine CAPS	60
neomycin-polymyxin-hc (otic) SOLN .	57	NICOTINE KIT	59	NORDITROPIN FLEXPPO SOPN 30 MG/3ML	43
neomycin-polymyxin-hc (otic) SUSP .	57	nicotine polacrilex GUM	59	NORDITROPIN FLEXPPO SOPN 5 MG/1.5ML, 10 MG/1.5ML, 15 MG/1.5ML	43
NEONATAL COMPLETE TABS 120 MG-10 MG-9.2 MG-1000 MCG-10 MCG-12 MCG-3 MG-5 MG-20 MG- 27 MG-200 MG-1.84 MG-25 MG-2 MG-1200 MCG-2 MG-0.2 MG	54	nicotine PT24 TD 7 MG/24HR, 14 MG/24HR, 21 MG/24HR	59	norelgestromin-ethinyl estradiol ...	34
NEONATAL PLUS TABS	54	NICOTROL INHA	59	norethin acet & estrad-fe CAPS ...	33
NEONATAL PRENATAL TABS ...	54	NICOTROL NS SOLN	59	norethin acet & estrad-fe CHEW ..	34
NEONATAL VITAMIN TABS	54	nifedipine CAPS 10 MG	31	norethin acet & estrad-fe TABS 1 MG-20 MCG-75 MG, 1.5 MG-30 MCG-75 MG	34
neostigmine methylsulfate SOSY ..	22	nifedipine CAPS 20 MG	31	norethindrone & eth estradiol	34
NEO-SYNALAR	36	nifedipine TB24 30 MG	31	norethindrone & ethinyl estradiol-fe 34	
NEUPRO	27	nifedipine TB24 60 MG	31	norethindrone & ethinyl estradiol-fe 34	
NEVANAC	56	nifedipine TB24 90 MG	31	norethindrone (contraceptive)	34
nevirapine SUSP	29	nifedipine TB24	31	norethindrone acet & eth estra TABS 34	
nevirapine TABS	29	nilutamide	24	norethindrone acetate TABS	58
nevirapine TB24 400 MG	29	nimodipine CAPS	31	norethindrone acetate-ethinyl estradiol	44
NEXIUM 24HR TBEC 20 MG	61	NIPENT	26	norethindrone acetate-ethinyl estradiol-fe	34
NEXPLANON	34	nisoldipine	31	norethindrone-eth estradiol (triphasic)	34
NEXTSTELLIS	33	nitazoxanide TABS	21	norgestimate-ethinyl estradiol (triphasic)	34
niacin (antihyperlipidemic) TBCR ..	19	nitisinone CAPS	43	norgestimate-ethinyl estradiol	34
niacin CPCR 250 MG, 500 MG	64	NITRO-BID OINT	8	norgestrel & ethinyl estradiol 30 MCG-0.3 MG	34
NIACIN ER TBCR	64	nitrofurantoin	21	NORMOSOL-M IN D5W	52
niacin TABS	64	nitrofurantoin macrocrystal 50 MG, 100 MG	22	NORMOSOL-R PH 7.4	52
niacin TBCR	64	nitrofurantoin monohyd macro	22	nortriptyline hcl CAPS	14
niacinamide TABS 100 MG	64	nitroglycerin (intra-anal)	8		
niacinamide TABS 500 MG	64	nitroglycerin CPCR	8		
		nitroglycerin PT24	8		
		NITROGLYCERIN SOLN IV	8		
		nitroglycerin SUBL	8		

nortriptyline hcl SOLN14	NYVEPRIA47	17
NORVIR CAPS29	octreotide acetate SOLN44	ondansetron hcl SOLN PO 4 MG/5ML17
NORVIR PACK29	ODEFSEY29	ondansetron hcl SOSY17
NOVA MAX PLUS KETONE TEST 41	ODOMZO24	ondansetron hcl TABS 24 MG17
NOVAREL IM 10000 UNIT43	OFEV59	ondansetron hcl TABS 4 MG17
NOVAVAX COVID-19 VACCINE SUSP63	ofloxacin (ophth)56	ondansetron hcl TABS 8 MG17
NOVAVAX COVID-19 VACCINE SUSY63	ofloxacin (otic)57	ondansetron TBDP 4 MG17
NOVOLIN 70/30 FLEXPEN SUPN 16	ofloxacin 300 MG, 400 MG44	ondansetron TBDP 8 MG17
NOVOLIN 70/30 SUSP16	OGIVRI24	ONE VITE WOMENS PLUS TABS 54
NOVOLIN N FLEXPEN SUPN16	olanzapine SOLR28	ONE VITE WOMENS TABS54
NOVOLIN N SUSP16	olanzapine TABS 2.5 MG, 5 MG ..28	ONETOUCH DELICA SAFETY LANCING50
NOVOLIN R FLEXPEN SOPN IJ ..16	olanzapine TABS 7.5 MG, 10 MG, 15 MG, 20 MG28	OPILL34
NOVOLIN R SOLN IJ16	olanzapine TBDP 20 MG28	ORENITRAM TBCR32
NOVOLOG FLEXPEN SOPN16	olanzapine TBDP 5 MG, 10 MG, 15 MG28	ORGOVYX24
NOVOLOG PENFILL SOCT16	olmesartan medoxomil19	ORLISSA43
NOVOLOG SOLN IJ16	olmesartan medoxomil-amlodipine- hydrochlorothiazide20	ORKAMBI PACK59
NP THYROID TABS60	olmesartan medoxomil- hydrochlorothiazide20	ORKAMBI TABS59
NUBEQA24	olopatadine hcl (nasal)55	ORLADEYO46
NUDEXTA59	olopatadine hcl 0.1 %56	orphenadrine citrate TB1254
NUVAXOVID COVID-19 VACCINE SUSY 5 MCG/0.5ML63	olopatadine hcl 0.2 %56	oseltamivir phosphate CAPS30
nystatin (mouth-throat)53	omega-3-acid ethyl esters18	oseltamivir phosphate SUSR30
nystatin (topical) CREA37	omeprazole CPDR61	OSPHENA43
nystatin (topical) OINT37	omeprazole magnesium CPDR ...61	OTEZLA TABS5
nystatin (topical) POWD EX37	omeprazole TBEC61	OTEZLA TBPk5
nystatin TABS17	omeprazole-sodium bicarbonate CAPS 1100 MG-20 MG61	OTREXUP SOAJ 10 MG/0.4ML, 12.5 MG/0.4ML, 15 MG/0.4ML, 17.5 MG/0.4ML, 20 MG/0.4ML, 22.5 MG/0.4ML, 25 MG/0.4ML2
nystatin-triamcinolone CREA37	OMNIFLEX DIAPHRAGM49	oxacillin sodium IV 10 GM57
nystatin-triamcinolone OINT37	ondansetron hcl SOLN IJ 4 MG/2ML .	

oxaliplatin SOLN 50 MG/10ML, 100 MG/20ML	23	paliperidone	28	PENBRAYA	61
oxaprozin TABS	5	palonosetron hcl SOLN	17	penciclovir	38
oxazepam CAPS	9	pamidronate disodium SOLN 30 MG/10ML, 90 MG/10ML	43	penicillamine CAPS	52
oxcarbazepine SUSP	12	PAMIDRONATE DISODIUM SOLN 43		penicillamine TABS	52
oxcarbazepine TABS 150 MG, 300 MG	12	PANRETIN	37	PENICILLIN G POT IN DEXTROSE 40000 UNIT/ML, 60000 UNIT/ML ..	57
oxcarbazepine TABS 600 MG	12	pantoprazole sodium TBEC 20 MG 61		penicillin g potassium 5000000 UNIT 57	
oxiconazole nitrate CREA	37	pantoprazole sodium TBEC 40 MG 61		penicillin g sodium	57
OXISTAT LOTN	37	PARAGARD INTRAUTERINE COPPER	34	penicillin v potassium SOLR	57
oxybutynin chloride SOLN	61	paricalcitol CAPS	43	penicillin v potassium TABS	57
oxybutynin chloride TABS 5 MG ..	61	paricalcitol SOLN	43	PENTACEL	60
oxybutynin chloride TB24	61	paroxetine hcl SUSP	14	pentamidine isethionate IN	21
oxycodone hcl T12A 10 MG, 20 MG, 40 MG, 80 MG	6	paroxetine hcl TABS	14	pentazocine w/ naloxone hcl	7
oxycodone hcl TABS	6	paroxetine hcl TB24	14	pentoxifylline	46
oxycodone w/ acetaminophen TABS 325 MG-10 MG, 325 MG-5 MG, 325 MG-7.5 MG	7	pazopanib hcl	25	perampanel TABS 2 MG	11
oxycodone w/ acetaminophen TABS 325 MG-2.5 MG	7	PEDIARIX SUSY	60	perampanel TABS 4 MG	11
oxymorphone hcl TABS	6	pediatric multivitamins w/fl CHEW ..	53	perampanel TABS 6 MG	11
oxymorphone hcl TB12 40 MG	6	PEDVAX HIB SUSP	61	perampanel TABS 8 MG, 10 MG, 12 MG	11
oxymorphone hcl TB12 5 MG, 7.5 MG, 10 MG, 15 MG, 20 MG, 30 MG 6		peg 3350-kcl-nacl-na sulfate-na ascorbate-ascorbic acid	48	perindopril erbumine 2 MG, 8 MG ..	19
OZEMPIC (0.25 OR 0.5 MG/DOSE) SOPN	15	peg 3350-kcl-sod bicarb-sod chloride-sod sulfate SOLR 236 GM 48		perindopril erbumine 4 MG	19
OZEMPIC (1 MG/DOSE) SOPN 4 MG/3ML	15	peg 3350-potassium chloride-sod bicarbonate-sod chloride	48	permethrin CREA	41
OZEMPIC (2 MG/DOSE) SOPN ...	15	PEGASYS SOLN	30	permethrin LIQD EX	41
paclitaxel 100 MG/16.7ML, 150 MG/25ML	26	PEGASYS SOSY	30	perphenazine TABS	28
paclitaxel protein-bound particles ..	26	pemetrexed disodium SOLR 500 MG 23		perphenazine-amitriptyline	58
				PERSERIS PRSY	28
				PFIZER COVID-19 VAC BIVALENT ..	63
				PFIZER COVID-19 VAC-TRIS 5-11Y SUSP	63
				PFIZER COVID-19 VAC-TRIS 6M-4Y	

SUSP63	PIQRAY (250 MG DAILY DOSE) .26	MEQ/L-0.9 %52
PFIZER-BIONT COVID-19 VAC- TRIS SUSP 63	PIQRAY (300 MG DAILY DOSE) .26	potassium chloride in dextrose 20 MEQ/L52
PFIZER-BIONTECH COVID-19 VACC SUSP63	pirfenidone CAPS59	potassium chloride microencapsulated crystals er 52
phenazopyridine hcl TABS 100 MG, 200 MG46	pirfenidone TABS 267 MG, 801 MG 59	potassium chloride PACK PO 20 MEQ52
phendimetrazine tartrate TABS 1	pirfenidone TABS 534 MG59	POTASSIUM CHLORIDE SOLN IV 10 MEQ/50ML (potassium chloride) 52
phenelzine sulfate13	piroxicam CAPS5	potassium chloride SOLN IV 2 MEQ/ML, 10 MEQ/50ML, 20 MEQ/50ML52
phenobarbital ELIX47	PLASMA-LYTE 148 27 MEQ/L-23 MEQ/L-98 MEQ/L-140 MEQ/L-3 MEQ/L-5 MEQ/L52	potassium chloride TBCR 8 MEQ, 10 MEQ, 20 MEQ 52
phenobarbital TABS47	PLASMA-LYTE A (electrolyte-a) ..52	potassium citrate (alkalinizer) TBCR . 45
phenoxybenzamine hcl19	PLEGRIDY SOAJ58	potassium phosphates 45 MMOLE/15ML52
phentermine hcl CAPS 1	PLEGRIDY SOSY SC58	PR BENZOYL PEROXIDE WASH LIQD36
phenytoin CHEW13	PLEGRIDY STARTER PACK SOAJ . 58	pralatrexate 20 MG/ML 23
phenytoin sodium extended 100 MG, 200 MG, 300 MG13	PLEGRIDY STARTER PACK SOSY SC58	pramipexole dihydrochloride TABS 0.125 MG27
phenytoin sodium SOLN13	PNEUMOVAX 23 SOLN61	pramipexole dihydrochloride TABS 0.25 MG, 0.5 MG, 0.75 MG, 1 MG, 1.5 MG27
phenytoin SUSP 13	PNEUMOVAX 23 SOSY61	prasugrel hcl46
PHEXXI64	podofilox SOLN40	pravastatin sodium19
PHOTOFRIN26	polymyxin b-trimethoprim56	praziquantel8
PIFELTRO29	POMALYST25	prazosin hcl CAPS20
pilocarpine hcl (oral)53	posaconazole SUSP18	PRECISION XTRA KETONE41
pilocarpine hcl SOLN 1 %, 2 %, 4 % . 55	potassium acetate SOLN 2 MEQ/ML . 52	PRED MILD56
pimecrolimus40	potassium bicarbonate TBEF52	prednisolone acetate (ophth)56
pimozide59	potassium chloride CPCR52	PREDNISOLONE SODIUM
pindolol TABS31	potassium chloride in dextrose & sodium chloride 5 %-0.075 %-0.45 %, 5 %-0.15 %-0.9 %, 5 %-10 MEQ/L-0.45 %, 5 %-20 MEQ/L-0.2 %, 5 %-20 MEQ/L-0.45 %, 5 %-20 MEQ/L-0.9 %, 5 %-30 MEQ/L-0.45 %, 5 %-40 MEQ/L-0.45 %, 5 %-40	
pioglitazone hcl16		
pioglitazone hcl-glimepiride 15		
pioglitazone hcl-metformin hcl TABS . 15		
PIQRAY (200 MG DAILY DOSE) .26		

PHOSPHATE56	MINERAL TABS 54	PROLASTIN-C SOLN59
prednisolone sodium phosphate SOLN 5 MG/5ML, 10 MG/5ML, 15 MG/5ML, 25 MG/5ML35	PRENATAL VITAMINS TABS 100 MG-800 MCG-1.84 MG-18 MG-2.6 MG-1.7 MG-27 MG-10 MCG-4.95 MG-25 MG-200 MG-160 MG-1200 MCG-4 MCG, 120 MG-2.6 MG-800 MCG-400 UNIT-8 MCG-1.7 MG-20 MG-28 MG-200 MG-1.8 MG-25 MG- 4000 UNIT-30 UNIT54	PROLASTIN-C SOLR59
prednisolone sodium phosphate TBDP35	PRENATAL/IRON TABS 120 MG-2.6 MG-800 MCG-400 UNIT-8 MCG-1.7 MG-20 MG-28 MG-200 MG-1.8 MG- 25 MG-4000 UNIT-30 UNIT54	PROLEUKIN 26
prednisolone SOLN35	PRENATRIX TABS 54	PROLIA SOSY43
prednisolone TABS 35	PRENATRYL TABS54	promethazine hcl SUPP 12.5 MG, 25 MG 18
prednisone SOLN35	PREVNAR 13 61	promethazine hcl SUPP 50 MG ... 18
prednisone TABS 1 MG, 5 MG 35	PREVNAR 20 61	promethazine hcl TABS18
prednisone TABS 2.5 MG, 10 MG, 20 MG, 50 MG35	PREZCOBIX29	propafenone hcl CP12 9
prednisone TBPk35	PREZISTA SUSP29	propafenone hcl TABS9
pregabalin (once-daily) 330 MG ...59	PREZISTA TABS 75 MG, 150 MG 29	proparacaine hcl56
pregabalin (once-daily) 82.5 MG, 165 MG59	PRIFTIN22	propranolol hcl CP2431
pregabalin CAPS 225 MG, 300 MG 12	primaquine phosphate TABS22	propranolol hcl SOLN PO 20 MG/5ML, 40 MG/5ML31
pregabalin CAPS 25 MG, 50 MG, 75 MG, 100 MG, 150 MG, 200 MG ... 12	primidone 50 MG, 250 MG13	propranolol hcl TABS31
pregabalin SOLN12	PRIORIX SUSR63	propylthiouracil60
PREHEVBRIO63	PROAIR DIGIHALER10	PROQUAD SUSR63
PREMARIN64	PROAIR RESPICLICK AEPB10	protiptyline hcl 14
PREMARIN SOLR44	probenecid46	PROVISC SOSY56
PREMARIN TABS44	procainamide hcl SOLN 500 MG/ML . 9	prucalopride succinate44
PREMPHASE44	prochlorperazine28	PULMICORT FLEXHALER AEPB .10
PREMPRO44	prochlorperazine maleate TABS ...28	PULMOZYME59
PRENATAL ONE DAILY TABS54	progesterone CAPS58	PX PRENATAL MULTIVITAMINS TABS54
PRENATAL PLUS TABS 54	PROGRAF PACK53	pyrazinamide22
PRENATAL PLUS VITAMIN/MINERAL TABS54	PROGRAF SOLN53	pyridostigmine bromide SOLN PO .22
PRENATAL TABS 54		pyridostigmine bromide TABS 60 MG22
PRENATAL VITAMIN AND		pyridostigmine bromide TBCR22
		pyrimethamine22
		PYZCHIVA 130 MG/26ML45

PYZCHIVA 45 MG/0.5ML38	MG/0.2ML, 12.5 MG/0.25ML, 15	REZVOGLAR KWIKPEN16
PYZCHIVA 90 MG/ML38	MG/0.3ML, 17.5 MG/0.35ML, 20	ribavirin (hepatitis c) CAPS30
PYZCHIVA SC 45 MG/0.5ML38	MG/0.4ML, 22.5 MG/0.45ML, 25	ribavirin (hepatitis c) TABS 200 MG
QC PRENATAL TABS54	MG/0.5ML, 30 MG/0.6ML2	30
QUADRACEL SUSP60	REALITY LATEX CONDOMS MISC .	RIDAURA4
QUADRACEL SUSY60	49	rifabutin22
quetiapine fumarate TABS 25 MG, 50	REALITY LATEX/ULTRA	rifampin CAPS22
MG, 100 MG, 200 MG, 300 MG, 400	TEXTURED DEVI49	rifampin SOLR22
MG28	REALITY LATEX/ULTRA THIN DEVI	riluzole TABS55
quetiapine fumarate TB2428	49	rimantadine hydrochloride TABS ..30
quinapril hcl 20 MG, 40 MG19	REBIF REBIDOSE SOAJ58	ringer's52
quinapril hcl 5 MG, 10 MG19	REBIF REBIDOSE TITRATION	ringer's irrigation53
quinapril-hydrochlorothiazide 12.5	PACK SOAJ58	RINVOQ LQ SOLN2
MG-10 MG20	REBIF SOSY59	RINVOQ TB242
quinapril-hydrochlorothiazide 12.5	REBIF TITRATION PACK SOSY ..59	risedronate sodium TABS 150 MG 43
MG-20 MG20	RECOMBIVAX HB SUSP63	risedronate sodium TABS 35 MG .43
quinapril-hydrochlorothiazide 25 MG-	RECOMBIVAX HB SUSY63	risedronate sodium TABS 5 MG, 30
20 MG20	RELENZA DISKHALER30	MG43
quinidine sulfate TABS9	RELION KETONE TEST STRP ...41	risedronate sodium TBEC43
quinine sulfate CAPS 324 MG22	RELION LANCET DEVICES 30G .50	risperidone microspheres28
QUZYTIR SOLN IV18	RELION LANCETS50	risperidone SOLN28
QVAR REDHALER10	RELION TRUE METRIX TEST	risperidone TABS28
RA PRENATAL FORMULA TABS .54	STRIPS STRP41	risperidone TBDP28
RA PRENATAL TABS54	RENFLEXIS45	ritonavir TABS29
rabeprazole sodium TBEC61	repaglinide 0.5 MG, 1 MG16	rivaroxaban SUSR 1 MG/ML11
raloxifene hcl43	repaglinide 2 MG16	rivaroxaban TABS 2.5 MG11
ramelteon48	REPATHA PUSHTRONEX SYSTEM	rivastigmine tartrate CAPS58
ramipril CAPS19	SOCT19	rizatriptan benzoate TABS 10 MG .51
ranolazine TB12 1000 MG8	REPATHA SOSY19	rizatriptan benzoate TABS 5 MG ..51
ranolazine TB12 500 MG8	REPATHA SURECLICK SOAJ19	rizatriptan benzoate TBDP 10 MG .51
rasagiline mesylate27	RETACRIT47	rizatriptan benzoate TBDP 5 MG ..51
RASUVO SOAJ 7.5 MG/0.15ML, 10	RETROVIR SOLN29	
	REXULTI28	

roflumilast	9	selenium sulfide LOTN 2.5 %	38	SKYLA	34
romidepsin SOLR	26	SELZENTRY SOLN	29	SKYRIZI PEN SOAJ	38
ropinirole hydrochloride TABS	27	SELZENTRY TABS 25 MG, 75 MG 29		SKYRIZI SOCT	45
ropinirole hydrochloride TB24 2 MG, 4 MG, 6 MG	27	SEMGLEE (YFGN) SOLN	16	SKYRIZI SOLN	45
ropinirole hydrochloride TB24 8 MG, 12 MG	27	SEMGLEE (YFGN) SOPN	16	SKYRIZI SOSY	38
rosuvastatin calcium TABS	19	SEREVENT DISKUS	10	SLYND	34
ROTARIX SUSP	63	sertraline hcl CONC	14	SM PRENATAL VITAMINS TABS	54
ROTATEQ SOLN	63	sertraline hcl TABS	14	SODIUM ACETATE SOLN (sodium acetate)	51
ROZLYTREK CAPS	26	sevelamer carbonate PACK	45	sodium acetate SOLN	51
RUBRACA	26	sevelamer carbonate TABS	45	sodium chloride (gu irrigant) 0.9 %	46
rufinamide SUSP	13	SHINGRIX	63	sodium chloride (inhalant) NEBU 7 %	35
rufinamide TABS 200 MG	13	SIGNIFOR	44	sodium citrate & citric acid	45
rufinamide TABS 400 MG	13	sildenafil citrate (pulmonary hypertension) SOLN	32	sodium fluoride CHEW	52
RUXIENCE	24	sildenafil citrate (pulmonary hypertension) SUSR	32	sodium phenylbutyrate POWD	43
RYBELSUS TABS	15	sildenafil citrate (pulmonary hypertension) TABS	32	sodium phenylbutyrate TABS	43
salsalate	5	sildenafil citrate	32	sodium polystyrene sulfonate POWD 53	
SANTYL OINT	40	silodosin	46	sodium polystyrene sulfonate SUSP CO 15 GM/60ML	53
SAVELLA TABS	58	silver sulfadiazine	38	sodium sulfate-potassium sulfate- magnesium sulfate	48
SAVELLA TITRATION PACK MISC 58		SIMLANDI (1 PEN) AJKT	3	SOFOSBUVIR-VELPATASVIR TABS	30
saxagliptin hcl	15	SIMLANDI (1 SYRINGE) PSKT	3	solifenacin succinate TABS	61
saxagliptin-metformin hcl 1000 MG- 2.5 MG	15	SIMLANDI (2 PEN) AJKT	3	SOLQUA	15
saxagliptin-metformin hcl 1000 MG-5 MG, 500 MG-5 MG	15	SIMLANDI (2 SYRINGE) PSKT	3	SOLU-CORTEF 250 MG	35
scopolamine	17	SIMPONI ARIA SOLN	3	SOLU-CORTEF 500 MG, 1000 MG 35	
SELECT INSULIN SYRINGES	50	SIMULECT	53	SOLU-MEDROL 2 GM	35
SELECT LANCETS	50	simvastatin TABS	19	sorafenib tosylate	26
selegiline hcl CAPS	27	sirolimus TABS	53		
selegiline hcl TABS	27	SIRTURO	22		

SORBITOL 3 %	46	STRIBILD	29	MG/0.5ML	51
SORBITOL-MANNITOL 2.7 GM/100ML-0.54 GM/100ML	46	STRIVERDI RESPIMAT	10	sumatriptan succinate TABS	51
sotalol hcl (afib/af)	31	SUBSYS LIQD 800 MCG	6	sumatriptan-naproxen sodium	51
sotalol hcl TABS 240 MG	31	sucralfate SUSP	60	sunitinib malate 12.5 MG, 25 MG, 50 MG	26
sotalol hcl TABS 80 MG, 120 MG, 160 MG	31	sucralfate TABS	60	sunitinib malate 37.5 MG	26
SOVALDI TABS 200 MG	30	sulconazole nitrate CREA	37	SUNOSI 150 MG	1
SOVALDI TABS 400 MG	30	sulconazole nitrate SOLN	37	SUNOSI 75 MG	1
SPIKEVAX 6M-11Y SUSY 25 MCG/0.25ML	63	sulfacetamide sodium (acne)	36	SYMTUZA	29
SPIKEVAX SUSP	63	sulfacetamide sodium (ophth) SOLN . 56		SYNAREL	43
SPIKEVAX SUSY	63	sulfacetamide sodium w/ sulfur CREA 10 %-5 %	36	SYNERA PTCH	41
spinosad	41	sulfacetamide sodium w/ sulfur LIQD 10 %-5 %	36	SYNJARDY TABS	15
SPIRIVA RESPIMAT AERS IN	9	sulfacetamide sodium w/ sulfur LIQD 9 %-4.5 %	36	SYNJARDY XR TB24 1000 MG-10 MG, 1000 MG-12.5 MG, 1000 MG-5 MG	15
spironolactone & hydrochlorothiazide	42	sulfacetamide sod-prednisolone SOLN	56	SYNJARDY XR TB24 1000 MG-25 MG	15
spironolactone TABS	42	sulfadiazine TABS	59	SYNRIBO	26
SPRAVATO (56 MG DOSE)	14	sulfamethoxazole-trimethoprim SOLN	21	SYNTHROID TABS (levothyroxine sodium)	60
SPRAVATO (84 MG DOSE)	14	sulfamethoxazole-trimethoprim SUSP	21	TABLOID	23
stannous fluoride CONC	53	sulfamethoxazole-trimethoprim TABS	21	tacrolimus (topical) OINT	40
STELARA 130 MG/26ML	45	SULFAMYLON CREA	38	tacrolimus CAPS	53
STELARA SOLN 45 MG/0.5ML ...	38	sulfasalazine TABS	45	tadalafil (pulmonary hypertension) TABs	32
STELARA SOSY 45 MG/0.5ML ...	38	sulfasalazine TBEC	45	tadalafil 5 MG	32
STELARA SOSY 90 MG/ML	38	sulindac TABS	5	TAFINLAR CAPS	26
STEQEYMA	45	sumatriptan	51	TAFINLAR TBSO	26
STEQEYMA 45 MG/0.5ML	38	sumatriptan succinate SOAJ	51	tafluprost	56
STEQEYMA 90 MG/ML	38	sumatriptan succinate SOCT	51	TAGRISSO 40 MG	24
STIOLTO RESPIMAT	10	sumatriptan succinate SOLN 6		TAGRISSO 80 MG	24
STIVARGA	26			TAKHZYRO SOLN	46
streptomycin sulfate SOLR	2				

TAKHZYRO SOSY	46	teriparatide SOPN	43	tizanidine hcl CAPS	54
TALZENNA	26	TESTOSTERONE CYPIONATE		tizanidine hcl TABS	54
tamoxifen citrate TABS	24	SOLN IJ 200 MG/ML	8	tobramycin (ophth) SOLN	56
tamsulosin hcl	46	testosterone cypionate SOLN IM ...	8	tobramycin NEBU	2
tavaborole	37	testosterone enanthate SOLN IM ...	8	tobramycin-dexamethasone SUSP	56
tazarotene CREA 0.1 %	38	TETANUS-DIPHTHERIA TOXOIDS		TODAY SPONGE MISC	64
TAZVERIK	26	TD SUSP	60	tolcapone	27
TDVAX SUSP	60	tetrabenazine	58	tolmetin sodium CAPS	5
TEFLARO	33	tetracycline hcl CAPS	60	tolmetin sodium TABS 600 MG	5
TEGRETOL SUSP (carbamazepine) .	13	THALOMID	52	TOLSURA CAPS	18
TEGRETOL TABS (carbamazepine) .	13	theophylline ELIX	10	tolterodine tartrate CP24	61
		theophylline SOLN	10	tolterodine tartrate TABS	61
		theophylline TB12	10	tolvaptan TABS	44
telmisartan	19	theophylline TB24	10	topiramate CPSP 15 MG	13
telmisartan-amlodipine	20	THERANATAL CORE NUTRITION		topiramate CPSP 25 MG	13
telmisartan-hydrochlorothiazide ...	20	TABS	54	topiramate CS24	13
temazepam 15 MG, 30 MG	47	thioridazine hcl	28	topiramate TABS 200 MG	13
temazepam 7.5 MG, 22.5 MG	47	thiotepa 15 MG	23	topiramate TABS 25 MG, 100 MG .	13
TEMODAR SOLR	23	thiothixene	28	topiramate TABS 50 MG	13
temozolomide CAPS	23	THYMOGLOBULIN	53	topotecan hcl SOLN	27
temsirolimus	26	THYROGEN 0.9 MG	41	topotecan hcl SOLR	27
TENIVAC SUSP 2 LFU-5 LFU	60	tiagabine hcl	13	toremifene citrate	24
tenofovir disoproxil fumarate TABS	30	ticagrelor 60 MG, 90 MG	46	torsemide TABS	42
terazosin hcl	20	timolol maleate (ophth) SOLG	55	TRACLEER TBSO 32 MG (bosentan)	
terbinafine hcl TABS	17	timolol maleate (ophth) SOLN	55		32
terbutaline sulfate SOLN	10	timolol maleate TABS	31	tramadol hcl TABS 50 MG	6
terbutaline sulfate TABS	10	tinidazole	21	tramadol hcl TB24	6
terconazole vaginal CREA	64	tiotropium bromide CAPS IN 18 MCG		tramadol-acetaminophen	7
terconazole vaginal SUPP	64		9	trandolapril 1 MG, 2 MG	19
teriflunomide	59	TIVICAY PD TBSO	30	trandolapril 4 MG	19
		TIVICAY TABS	30		

trandolapril-verapamil hcl 180 MG-2 MG, 240 MG-1 MG	20	triamcinolone acetonide (mouth) ..53 MG, 1000 MG-5 MG-25 MG	15
trandolapril-verapamil hcl 240 MG-2 MG, 240 MG-4 MG	20	triamcinolone acetonide (nasal) TRIKAFTA TBPk	59
tranexamic acid SOLN 1000 MG/10ML	47	AERO	55
tranexamic acid TABS	47	triamcinolone acetonide (topical) CREA 0.025 %	40
tranylcypromine sulfate	13	triamcinolone acetonide (topical) CREA 0.1 %	40
travoprost SOLN	57	triamcinolone acetonide (topical) CREA 0.5 %	40
TRAZIMERA	24	triamcinolone acetonide (topical) LOTN 0.025 %	40
trazodone hcl TABS	14	triamcinolone acetonide (topical) LOTN 0.1 %	40
TRELEGY ELLIPTA	10	triamcinolone acetonide (topical) OINT 0.025 %, 0.1 %	40
TRELSTAR MIXJECT	24	triamcinolone acetonide (topical) OINT 0.5 %	40
TREMFYA PEN SOAJ 100 MG/ML 38		triamcinolone acetonide SUSP 40 MG/ML	35
TREMFYA PEN SOAJ SC 200 MG/2ML	45	triamterene & hydrochlorothiazide CAPS 25 MG-37.5 MG	42
TREMFYA SOLN IV	45	triamterene & hydrochlorothiazide TABS	42
TREMFYA SOSY 100 MG/ML	38	triamterene CAPS	42
TREMFYA SOSY SC 200 MG/2ML 45		triazolam	47
TREMFYA-CD/UC INDUCTION SOAJ SC 200 MG/2ML	45	TRICARE TABS	54
treprostinil SOLN IJ	32	trientine hcl 250 MG	52
TRESIBA FLEXTouch SOPN	16	trifluoperazine hcl TABS	28
TRESIBA SOLN	16	trifluridine	56
tretinoin (chemotherapy)	26	trihexyphenidyl hcl SOLN	27
tretinoin CREA 0.025 %, 0.05 %, 0.1 %	36	trihexyphenidyl hcl TABS	27
tretinoin GEL 0.01 %, 0.025 %	36	TRIJARdY XR 1000 MG-2.5 MG-12.5 MG, 1000 MG-2.5 MG-5 MG .	15
tretinoin microsphere 0.1 %	36	TRIJARdY XR 1000 MG-5 MG-10	
TREXALL TABS 5 MG, 7.5 MG, 10 MG, 15 MG	23		

MISC49	UBRELVY 50 MG50	MG/ML, 50 MG/ML, 250 MG/5ML .21
TRUSTEX LUB/SPERMICIDE EX ST MISC49	UDENYCA ONBODY SOSY47	VAQTA63
TRUSTEX LUB/SPERMICIDE XL MISC49	UDENYCA SOAJ47	varenicline tartrate TABS59
TRUSTEX LUBRICATED EX LARGE MISC49	UDENYCA SOSY47	varenicline tartrate TBPk59
TRUSTEX LUBRICATED EXTRA ST MISC49	umeclidinium-vilanterol10	VARIVAX SUSR63
TRUSTEX LUBRICATED MISC ...49	UPTRAVI TABS 200 MCG32	VARUBI (180 MG DOSE) TBPk ...17
TRUSTEX LUBRICATED/SPERMICIDE MISC 49	UPTRAVI TABS 400 MCG, 600 MCG, 800 MCG, 1000 MCG, 1200 MCG, 1400 MCG, 1600 MCG32	VAXELIS SUSP60
TRUSTEX NATURAL CONDOMS + LUBE MISC49	UPTRAVI TITRATION TBPk32	VAXELIS SUSY60
TRUSTEX RIA LUB/SPERMICIDE MISC49	ursodiol CAPS45	VAXNEUVANCE62
TRUSTEX RIA LUBRICATED MISC . 49	ursodiol TABS45	VECAMYL20
TRUSTEX-NONOXYNOL- 9/RIB/STUD MISC49	UVADEX26	VECTIBIX 100 MG/5ML24
TRUXIMA24	VABRINTY KIT SC 22.5 MG, 45 MG . 24	VELPHORO45
TUKYSA24	valacyclovir hcl 1 GM30	venlafaxine hcl CP2414
TURALIO 125 MG26	valacyclovir hcl 500 MG30	venlafaxine hcl TABS14
TWINRIX SUSY63	valganciclovir hcl TABS30	venlafaxine hcl TB2414
TWIRLA34	valproate sodium SOLN PO 250 MG/5ML, 500 MG/10ML13	verapamil hcl CP24 100 MG, 200 MG, 300 MG31
TYBLUME CHEW34	valproic acid CAPS13	verapamil hcl CP24 120 MG, 180 MG, 240 MG, 360 MG32
TYBOST30	valrubicin25	verapamil hcl TABS32
TYMLOS43	valsartan TABS19	verapamil hcl TBCR32
TYVASO REFILL KIT SOLN IN ...32	valsartan-hydrochlorothiazide20	VEREGEN36
TYVASO SOLN IN32	VALTOCO 10 MG DOSE LIQD12	VERZENIO26
TYVASO STARTER KIT SOLN IN .32	VALTOCO 15 MG DOSE LQPK 7.5 MG/0.1ML12	vigabatrin PACK13
UBRELVY 100 MG50	VALTOCO 20 MG DOSE LQPK 10 MG/0.1ML12	vigabatrin TABS13
	VALTOCO 5 MG DOSE LIQD12	VIIBRYD STARTER PACK KIT ...14
	vancomycin hcl CAPS21	vilazodone hcl TABS14
	vancomycin hcl SOLR PO 25	vincristine sulfate26
		vinorelbine tartrate 10 MG/ML27
		VIRACEPT TABS 250 MG30
		VIRACEPT TABS 625 MG30

VIREAD POWD	30	XELJANZ SOLN	2	ZANOSAR	23
VIREAD TABS 150 MG, 200 MG, 250 MG	30	XELJANZ TABS 10 MG	2	ZARONTIN CAPS (ethosuximide) ..	13
VISTOGARD	17	XELJANZ TABS 5 MG	2	ZARXIO	47
VITAMIN D2 TABS 400 UNIT	64	XELJANZ XR TB24	2	ZEJULA TABS 100 MG	26
VITATHELY WITH GINGER TABS 54		XEOMIN	55	ZEJULA TABS 200 MG, 300 MG ..	26
VITRAKVI CAPS	26	XHANCE EXHU	55	ZELBORAF	26
VITRAKVI SOLN	26	XIFAXAN 200 MG	21	ZENPEP CPEP 105000 UNIT-79000 UNIT-25000 UNIT, 14000 UNIT- 10000 UNIT-3000 UNIT, 168000 UNIT-126000 UNIT-40000 UNIT, 24000 UNIT-17000 UNIT-5000 UNIT, 42000 UNIT-32000 UNIT-10000 UNIT, 63000 UNIT-47000 UNIT- 15000 UNIT, 84000 UNIT-63000 UNIT-20000 UNIT	42
VIZIMPRO	24	XIFAXAN 550 MG	21	ZENPEP CPEP 252600 UNIT- 189600 UNIT-60000 UNIT	42
VORAXAZE	26	XOSPATA	26	zidovudine CAPS	30
voriconazole TABS	18	XTANDI CAPS	24	zidovudine SYRP	30
VOSEVI	30	XTANDI TABS 40 MG	25	zidovudine TABS	30
warfarin sodium TABS	11	XTANDI TABS 80 MG	25	zileuton TB12	9
water for irrigation, sterile	53	XULTOPHY	15	ziprasidone hcl	27
WESTAB PLUS TABS	54	YERVOY	24	ZIRABEV	23
WIDE-SEAL DIAPHRAGM 60	49	YESINTEK 130 MG/26ML	45	ZIRGAN GEL	56
WIDE-SEAL DIAPHRAGM 65	50	YESINTEK SOLN 45 MG/0.5ML ..	38	ZOLADEX 10.8 MG	25
WIDE-SEAL DIAPHRAGM 70	50	YESINTEK SOSY 45 MG/0.5ML ..	38	ZOLADEX 3.6 MG	25
WIDE-SEAL DIAPHRAGM 75	50	YESINTEK SOSY 90 MG/ML	38	zoledronic acid SOLN	43
WIDE-SEAL DIAPHRAGM 80	50	YONSA	25	ZOLINZA	26
WIDE-SEAL DIAPHRAGM 85	50	YUFLYMA (1 PEN) AJKT 40 MG/0.4ML	3	zolmitriptan SOLN	51
WIDE-SEAL DIAPHRAGM 90	50	YUFLYMA (1 PEN) AJKT 80 MG/0.8ML	4	zolmitriptan TABS	51
WIDE-SEAL DIAPHRAGM 95	50	YUFLYMA (2 PEN) AJKT	4	zolmitriptan TBDP	51
XALKORI CAPS	26	YUFLYMA (2 SYRINGE) PSKT	4	zolpidem tartrate TABS	48
XARELTO STARTER PACK TBPK 11		YUFLYMA-CD/UC/HS STARTER AJKT	4	zolpidem tartrate TBCR	48
XARELTO SUSR 1 MG/ML (rivaroxaban)	11	zafirlukast	9		
XARELTO TABS 10 MG, 20 MG ..	11	zaleplon 10 MG	47		
XARELTO TABS 15 MG	11	zaleplon 5 MG	47		
		ZALTRAP 100 MG/4ML	23		

zonisamide CAPS	13
ZONTIVITY	46
ZORBTIVE SC	43
ZYDELIG	26
ZYLET	56

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