



Illinois
Individual & Family plans

2025 Prescription Drug List

Effective as of Jan. 1, 2025

Table of contents

Analgesics.....	9
Anesthetics	10
Anti-addiction/substance abuse treatment agents.....	10
Antibacterials	11
Anticonvulsants.....	11
Antidementia agents	12
Antidepressants	12
Antiemetics	13
Antifungals.....	13
Antigout agents.....	13
Antimigraine agents	13
Antimyasthenic agents.....	14
Antimycobacterials.....	14
Antineoplastics	14
Antiparasitics	15
Anti-Parkinson's agents	15
Antipsychotics	16
Antivirals	16
Anxiolytics.....	17
Bipolar agents.....	17
Blood glucose monitoring.....	17
Blood glucose regulators	18
Blood products and modifiers.....	19
Cardiovascular agents.....	19
Central nervous system agents	21
Dental and oral agents.....	22
Dermatological agents	22
Electrolytes/minerals/metals/vitamins.....	22
Gastrointestinal agents.....	23
Genetic or enzyme disorder: replacement, modifiers, treatment	25
Genitourinary agents	25
Hormonal agents, stimulant/replacement/modifying (adrenal)	25
Hormonal agents, stimulant/replacement/modifying (pituitary)	26
Hormonal agents, stimulant/replacement/modifying (prostaglandins)	26
Hormonal agents, stimulant/replacement/modifying (sex hormones/modifiers).....	26
Hormonal agents, stimulant/replacement/modifying (thyroid).....	29

Hormonal agents, suppressant (adrenal)	29
Hormonal agents, suppressant (pituitary).....	29
Hormonal agents, suppressant (thyroid)	29
Immunological agents	29
Inflammatory bowel disease agents	31
Metabolic bone disease agents	31
Miscellaneous therapeutic agents	31
Ophthalmic agents	32
Otic agents.....	34
Respiratory tract/pulmonary agents.....	34
Antileukotrienes	34
Skeletal muscle relaxants.....	35
Sleep disorder agents	35

Understanding your prescription drug list

What is a prescription drug list (PDL)?

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

To create the list, UnitedHealthcare® is guided by the Individual & Family plan Pharmacy Management Committee. This group reviews which medications will be covered, based on how well the drugs work, and overall value. They also make sure there are safe and covered options.

How do I use my PDL?

You and your healthcare provider can use the PDL to help you choose the most cost-effective prescription medications. This guide tells you if your medication is covered, what tier your medication is considered under your plan, and if your medication has coverage rules or limits. You can reference this list when you see your healthcare provider. If your medication is not listed here, please visit myuhc.com/exchange or call the Member Services number on your health plan ID card.

About this PDL

Where differences between this document and your benefit plan exist, the benefit plan documents rule. This may not be a complete list of medications that are covered by your plan. Please review your benefit plan for full details.

What are tiers?

Tiers are the different cost levels you pay for a medication. Each tier is assigned a cost, and you can find cost-sharing information in your plan documents. This determines how much you will pay when you fill a prescription at a network pharmacy. Using lower-tier medications can help you pay the lowest out-of-pocket cost. If you are prescribed a medication on a higher tier, you can ask your healthcare provider if a lower-tier medication can work for your condition. In the chart below, the overall value is based on factors such as medication effectiveness, safety, cost, and the availability of alternative medications to treat the same or similar medical condition.

Tier	Cost-share	Includes
1	\$0	\$0 Cost-share Medications available at no cost to you, which includes preventive medications .
2	\$	Lower cost-share Medications that offer the highest overall value , which includes preferred generic medications .
3	\$\$	Mid-range cost-share Medications that provide good overall value , which includes preferred brand name and non-preferred generic medications .
4	\$\$\$	Higher cost-share Medications that provide lower overall value , which includes non-preferred brand name medications and non-preferred generic medications .
5	\$\$\$\$	Highest cost-share Medications that provide the lowest overall value , which includes most specialty medications .

Can the PDL change?

Most changes in drug coverage happen on January 1st, but during the year UnitedHealthcare may add or remove drugs on the PDL, move them to different cost-sharing tiers, or add or remove rules.

When a medication changes tiers, you may have to pay a different amount for that medication. Talk to your healthcare provider to learn about alternatives.

Why are some medications not covered?

A medication may not be covered under your pharmacy benefit when it works the same as or similar to another prescription or over-the-counter (OTC) medication.

Coverage details

What are coverage rules or limits?

Some medications on your PDL have extra rules before they can be covered. A few of the most common coverage rules or limits are prior authorization (PA), step therapy (ST), and quantity limits (QL). We use programs like these to help make sure the medication you take is safe and effective. Check your plan documents for more information. In this drug list, some medications are noted with letters next to them to help you see which ones may have coverage rules or limits. Your benefit plan sets how these medications may be covered for you. To get a medication that has a coverage rule or limit, see the “Prior authorization and exception requests” section.

PA	Prior authorization required UnitedHealthcare requires you or your healthcare provider to obtain prior authorization for certain drugs to be sure the drug is most appropriate for your condition. This means that you will need to get approval from UnitedHealthcare before you fill your prescriptions. If you don't get approval, the drug may not be covered.
QL	Quantity limit For certain drugs, UnitedHealthcare limits the amount of the drug being filled per copayment or over a certain period of time. We update quantity limits based on medical guidance and Food and Drug Administration (FDA) recommendations. This helps reduce waste and ensures medications are used appropriately.
ST	Step therapy In some cases, UnitedHealthcare requires you to first try certain drugs to treat your medical condition before we cover another drug for that condition. Step Therapy makes sure you are filling medically appropriate and affordable medications.
SP	Specialty medication Limited to a 1-month supply per prescription.
MME	Morphine milligram equivalent Additional quantity limits may apply across all drugs in the opioid class used for the treatment of pain. This additional limit is called a cumulative morphine milligram equivalent (MME) and is designed to monitor safe dosing levels of opioids for individuals who may be taking more than 1 opioid drug for pain management. If your healthcare provider prescribes more than this amount, or thinks the limit is not right for your situation, you or your healthcare provider can ask the plan to cover the additional quantity.

7D

7 day limit if you have not filled an opioid prescription recently

If you have not filled an opioid prescription recently, you may be limited to a 7-day supply. This limit is intended to minimize initial duration if you do not have recent history of opioid use. For members who are new to the plan and have a recent history of using opioids, the limit may be overridden by the pharmacy. For members who have filled an opioid recently, prescriptions are limited to a 1 month supply.

Which preventive medications are covered?

Your UnitedHealthcare Individual & Family plan covers certain preventive medications and supplements at no cost to you when filled at a network pharmacy.

Under the Affordable Care Act (ACA) of 2010, prescription and over-the-counter (OTC) preventive medications and supplements include:

- Aspirin to prevent preeclampsia during pregnancy
- Birth control (contraceptives)
- Bowel preparation for a colonoscopy needed for colon cancer screening
- Breast cancer preventive medications
- Fluoride to prevent dental cavities
- Folic acid to prevent birth defects
- Gonococcal Ophthalmia Neonatorum preventive medications
- Human Immunodeficiency Virus (HIV) infection pre-exposure preventive (PrEP) medications
- Statin medications to prevent cardiovascular events
- Tobacco cessation medications to help you quit smoking
- Vaccines

We follow recommendations by the U.S. Preventive Services Task Force, Health Resources and Services Administration, and Advisory Committee on Immunization Practices.

Preventive medications are listed as Tier 1 or are noted as \$0 Copay medications in this drug list. Some medications are available at no cost to you only when certain requirements are met. As noted in this list, we may need your healthcare provider to provide information about your medical condition to confirm that you meet the requirements to obtain the preventive medication at no cost. Follow the steps in the “Prior authorization and exception requests” section. If you qualify, you can receive these drugs at \$0 cost-share. If you are using it to treat another medical condition, a cost-share may apply.

What medications are covered under my medical benefit?

To learn about medications covered under your medical benefit, visit uhcprovider.com/content/dam/provider/docs/public/resources/pharmacy/IFP-Clinical-Program-Summary-Drug-List.pdf

Prior authorization and exception requests

Some medications require prior authorization or may need an exception. This includes medications that:

- Require a prior authorization, including compounded prescription medications
- Require step therapy
- Exceed quantity limits
- Exceed opioid safety edits
 - 7-day supply limit for members who have not filled an opioid prescription recently or
 - Opioid use that exceeds the established morphine milligram equivalent (MME) level
- Are not listed in the PDL (also called non-formulary drugs)
- May be covered at no cost when specific requirements are met such as preventive medications

How can I get a medication that requires a prior authorization or an exception?

Optum Rx, our Pharmacy Benefit Manager, processes prior authorization and exception requests on behalf of UnitedHealthcare Individual & Family plans. Contact your healthcare provider to submit a request. Healthcare providers can submit a request:

- Online: professionals.optumrx.com/prior-authorization.html
- Phone: 1-800-711-4555

The request should include the diagnosis, medication history, clinical justification, medical records/lab tests as needed and other supporting information. If information is missing, Optum Rx will contact your healthcare provider and request additional information.

If you need help, you can also start a request at myuhc.com/exchange or by calling the member services number on your health plan ID card, and we can contact your healthcare provider for information to help process the request.

We'll send written notification of the decision to both you and your healthcare provider. If your healthcare provider does not agree with the decision, this notification will provide instructions on requesting a peer-to-peer review or requesting an appeal.

You and your healthcare provider can learn more and find clinical criteria by visiting uhcprovider.com/exchange.

Medication tips

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

Generic medications contain the same active ingredients (what makes the medication work) as brand-name medications, but they often cost less.

What if my healthcare provider writes a brand-name prescription?

If your healthcare provider gives you a prescription for a brand-name medication, ask if a generic or lower-cost option could be right for you. Generic medications are usually your lowest-cost option.

Over-the-counter medications

An over-the-counter (OTC) medication may be the right treatment for some conditions. Talk to your healthcare provider about available OTC options. Even though OTC medications may not be covered by your pharmacy benefit, they may cost less than a prescription medication.

What if I am taking a specialty medication?

Specialty medications are for rare or complex conditions and are usually higher-cost medications. Specialty medications are indicated with SP throughout the PDL.

Please note, not all specialty medications may be available at a retail pharmacy. If you have a question on how to access covered specialty medications, call the number on your health plan ID card or visit myuhc.com/exchange.

Reading your PDL

The PDL gives you choices so you and your healthcare provider can decide your best course of treatment. In this PDL, brand-name medications are shown in UPPERCASE (for example, JARDIANCE). Generic medications are shown in lowercase (for example, atorvastatin). There are two ways to find your drug within the PDL:

1. The drugs in this formulary are grouped into categories depending on the medical conditions that they are used to treat. For example, drugs used to treat an infection are generally listed under the category, Antibacterial. If you know what your drug is used for, look for the category name, then look under the category name for your drug .
2. Alphabetical listing - if you are not sure what category to look under, you should look for your drug in the Index. The Index provides an alphabetical list of all the drugs included in this document for both brand name drugs and generic drugs. Review the Index to find your drug. Next to your drug, you will see the page number where you can find coverage information. Turn to that page listed in the Index and find the name of your drug in the first column of the list .

Questions



Review your policy for more information about your pharmacy benefit



Call the Member Services number on your health plan ID card



Register or login to your online account at myuhc.com/exchange to:

- Find current list of covered medications
- Find a network pharmacy by ZIP code
- Learn about home delivery
- Look up possible lower-cost medication alternatives
- Compare medication pricing and options

Drug name	Drug tier	Notes
Analgesics		
Nonsteroidal anti-inflammatory drugs		
aspirin 81 oral tablet delayed release	1	\$0 Copay for members between ages of 16 to 49 years.
aspirin adult low dose	1	\$0 Copay for members between ages of 16 to 49 years.
aspirin adult low strength	1	\$0 Copay for members between ages of 16 to 49 years.
aspirin childrens	1	\$0 Copay for members between ages of 16 to 49 years.
aspirin ec adult low dose	1	\$0 Copay for members between ages of 16 to 49 years.
aspirin ec low dose	1	\$0 Copay for members between ages of 16 to 49 years.
aspirin ec low strength	1	\$0 Copay for members between ages of 16 to 49 years.
aspirin low dose	1	\$0 Copay for members between ages of 16 to 49 years.
aspirin oral tablet chewable	1	\$0 Copay for members between ages of 16 to 49 years.
aspirin oral tablet delayed release 81 mg	1	\$0 Copay for members between ages of 16 to 49 years.
aspirin regimen	1	\$0 Copay for members between ages of 16 to 49 years.
celecoxib oral	2	QL
diclofenac potassium oral tablet 50 mg	2	
diclofenac sodium er	3	
diclofenac sodium external gel 1 %	3	QL
diclofenac sodium oral	2	
diclofenac-misoprostol	3	
diflunisal oral	2	
ec-naproxen	2	
etodolac	2	
etodolac er	3	
fenoprofen calcium oral tablet	4	

Drug name	Drug tier	Notes
flurbiprofen oral tablet 100 mg	2	
ft aspirin low dose	1	\$0 Copay for members between ages of 16 to 49 years.
ft aspirin oral tablet chewable	1	\$0 Copay for members between ages of 16 to 49 years.
goodsense aspirin low dose	1	\$0 Copay for members between ages of 16 to 49 years.
ibuprofen oral tablet 400 mg, 600 mg, 800 mg	2	
indomethacin er	2	
indomethacin oral capsule	2	QL
ketoprofen er	4	ST
ketoprofen oral	3	ST
ketorolac tromethamine oral	2	
KIPROFEN	3	ST
meclofenamate sodium oral	4	
mefenamic acid oral	4	
meloxicam oral tablet	2	
mm aspirin	1	\$0 Copay for members between ages of 16 to 49 years.
nabumetone oral	2	
naproxen dr	2	
naproxen oral suspension	4	PA
naproxen oral tablet	2	
naproxen oral tablet delayed release	2	
naproxen sodium oral tablet 275 mg, 550 mg	2	
oxaprozin oral tablet	3	
piroxicam oral	2	
salsalate oral	2	
ST JOSEPH LOW DOSE	1	\$0 Copay for members between ages of 16 to 49 years.
sulindac oral	2	
tolmetin sodium	4	
Opioid analgesics, long-acting		
fentanyl transdermal patch 72 hour 100 mcg/hr, 12 mcg/hr, 25 mcg/hr, 50 mcg/hr, 75 mcg/hr	3	PA; QL; MME; 7D
hydrocodone bitartrate er oral capsule extended release 12 hour	4	PA; QL; MME; 7D
hydromorphone hcl er	4	PA; QL; MME; 7D
levorphanol tartrate oral	4	PA; QL; MME; 7D
methadone hcl intensol	2	PA; QL; MME; 7D
methadone hcl oral concentrate	2	PA; QL; MME; 7D
methadone hcl oral solution	2	PA; QL; MME; 7D
methadone hcl oral tablet	2	PA; QL; MME; 7D

KEY: **7D** 7 day limit
MME Morphine milligram equivalent
PA Prior authorization required

QL Quantity limit
SP Specialty medication
ST Step therapy

Drug name	Drug tier	Notes
morphine sulfate er oral tablet extended release	2	PA; QL; MME; 7D
NUCYNTA ER	4	PA; QL; MME; 7D
oxycodone hcl er	4	PA; QL; MME; 7D
tramadol hcl (er biphasic) oral tablet extended release 24 hour	3	PA; QL; MME; 7D
tramadol hcl er tablet	3	PA; QL; MME; 7D
XTAMPZA ER	4	PA; QL; MME; 7D
Opioid analgesics, short-acting		
acetaminophen-codeine	2	QL; MME; 7D
apap-caff-dihydrocodeine	4	QL; MME; 7D
ascomp-codeine	3	QL; MME; 7D
bac	2	QL
butalbital-acetaminophen oral tablet	3	QL
butalbital-apap-caff-cod	4	QL; MME; 7D
butalbital-apap-caffeine oral capsule	4	QL
butalbital-apap-caffeine oral tablet	2	QL
butalbital-asa-caff-codeine	3	QL; MME; 7D
butalbital-aspirin-caffeine	3	QL
codeine sulfate	2	QL; MME; 7D
endocet	2	QL; MME; 7D
fentanyl citrate buccal lozenge on a handle	4	PA; QL
hydrocodone-acetaminophen oral solution 7.5-325 mg/15ml	2	QL; MME; 7D
hydrocodone-acetaminophen oral tablet 10-325 mg, 5-325 mg, 7.5-325 mg	2	QL; MME; 7D
hydrocodone-ibuprofen	4	QL; MME; 7D
hydromorphone hcl oral liquid	3	QL; MME; 7D
hydromorphone hcl oral tablet	2	QL; MME; 7D
morphine sulfate (concentrate)	3	QL; MME; 7D
morphine sulfate oral solution	3	QL; MME; 7D
morphine sulfate oral tablet	2	QL; MME; 7D
oxycodone hcl oral capsule	2	QL; MME; 7D
oxycodone hcl oral concentrate	4	QL; MME; 7D
oxycodone hcl oral solution	2	QL; MME; 7D
oxycodone hcl oral tablet	2	QL; MME; 7D
oxycodone-acetaminophen oral tablet 10-325 mg, 2.5-325 mg, 5-325 mg, 7.5-325 mg	2	QL; MME; 7D
oxycodone hcl	3	QL; MME; 7D
pentazocine-naloxone hcl	3	QL; MME; 7D
TENCON	3	QL
tramadol hcl oral tablet 50 mg	2	QL; MME; 7D
tramadol-acetaminophen	2	QL; MME; 7D
Anesthetics		
Local anesthetics		
glydo	2	
lidocaine external patch 5 %	3	PA; QL
lidocaine hcl external solution	3	

Drug name	Drug tier	Notes
lidocaine hcl mouth/throat	3	
lidocaine hcl urethral/mucosal	2	
lidocaine viscous hcl	2	
lidocaine-prilocaine external cream	2	
Anti-addiction/substance abuse treatment agents		
Alcohol deterrents/anti-craving		
acamprosate calcium	2	
disulfiram oral	2	
naltrexone hcl oral	2	
Opioid dependence treatments		
buprenorphine hcl sublingual	2	
buprenorphine hcl-naloxone hcl	2	
LUCEMYRA	3	
SUBOXONE	3	
ZUBSOLV	3	
Opioid reversal agents		
KLOXXADO	1	
naloxone hcl injection	1	
naloxone hcl nasal	1	
NARCAN	1	
OPVEE	3	
REXTOVY	1	
ZIMHI	1	
Smoking cessation agents		
bupropion hcl er (smoking det)	1	
ft nicotine	1	
ft nicotine mini	1	
goodsense nicotine mouth/throat gum 2 mg	1	
goodsense nicotine mouth/throat lozenge 4 mg	1	
habitrol	1	
NICORETTE MINI	1	
NICORETTE MOUTH/THROAT GUM 2 MG	1	
NICORETTE MOUTH/THROAT LOZENGE	1	
nicotine mini	1	
nicotine polacrilex mini	1	
nicotine polacrilex mouth/throat	1	
nicotine step 1	1	
nicotine step 2	1	
nicotine step 3	1	
nicotine transdermal kit	1	
nicotine transdermal patch 24 hour 21 mg/24hr	1	
NICOTROL	1	
NICOTROL NS	1	
varenicline tartrate	1	
varenicline tartrate (starter)	1	
varenicline tartrate(continue)	1	

KEY: **7D** 7 day limit
MME Morphine milligram equivalent
PA Prior authorization required

QL Quantity limit
SP Specialty medication
ST Step therapy

Drug name	Drug tier	Notes
Antibacterials		
Aminoglycosides		
gentamicin sulfate external	3	
HUMATIN	4	
neomycin sulfate oral	2	
Antibacterials, other		
clindamycin hcl oral	2	
clindamycin palmitate hcl	3	
clindamycin phosphate vaginal	2	
fosfomycin tromethamine	4	
linezolid oral suspension reconstituted	4	QL
linezolid oral tablet	3	QL
mafenide acetate external	4	
methenamine hippurate	3	
metronidazole oral tablet	2	
metronidazole vaginal	2	
mupirocin cream	4	QL
mupirocin ointment	2	QL
NEO-SYNALAR	4	QL
nitrofurantoin macrocrystal	3	
nitrofurantoin monohydrate macrocrystals	2	
nitrofurantoin oral suspension 25 mg/5ml	4	
silver sulfadiazine external	2	
SIVEXTRO ORAL	4	PA; QL
ssd	2	
SULFAMYLON	4	
tinidazole oral	2	
trimethoprim oral	2	
vancomycin hcl oral capsule	2	QL
vancomycin hcl oral solution reconstituted	3	
VANDAZOLE	3	
XIFAXAN	5	PA; QL
Beta-lactam, cephalosporins		
cefaclor er	3	
cefaclor oral capsule	2	
cefadroxil oral capsule	2	
cefadroxil oral suspension reconstituted	2	
cefadroxil oral tablet	3	
cefdinir	2	
cefixime oral capsule	3	
cefixime oral suspension reconstituted	4	
cefepodoxime proxetil	3	
cefprozil	2	
cefuroxime axetil	2	
cephalexin oral capsule 250 mg, 500 mg	2	

Drug name	Drug tier	Notes
cephalexin oral suspension reconstituted	2	
Beta-lactam, penicillins		
amoxicillin	2	
amoxicillin-potassium clavulanate	2	
ampicillin	2	
dicloxacillin sodium	2	
penicillin v potassium	2	
Macrolides		
azithromycin oral	2	
clarithromycin er	3	
clarithromycin oral suspension reconstituted	4	
clarithromycin oral tablet	2	
erythromycin base oral capsule delayed release particles	4	
erythromycin base oral tablet	3	
erythromycin base oral tablet delayed release	3	
erythromycin ethylsuccinate oral	4	
erythromycin oral	3	
Quinolones		
BAXDELA ORAL	4	
ciprofloxacin hcl oral	2	
levofloxacin oral solution	4	
levofloxacin oral tablet	2	
moxifloxacin hcl oral	2	
ofloxacin oral	3	
Sulfonamides		
sulfadiazine oral	4	
sulfamethoxazole-trimethoprim oral suspension 200-40 mg/5ml	2	
sulfamethoxazole-trimethoprim oral tablet	2	
sulfatrim pediatric	2	
Tetracyclines		
avidoxy	2	
demeclocycline hcl	4	
doxycycline hyclate oral capsule	2	
doxycycline hyclate oral tablet 100 mg, 20 mg	2	
doxycycline monohydrate oral capsule 100 mg, 50 mg	2	
doxycycline monohydrate oral suspension reconstituted	3	
doxycycline monohydrate oral tablet	2	
minocycline hcl oral capsule	2	
mondoxylene nl	2	
tetracycline hcl oral capsule	2	
Anticonvulsants		
Anticonvulsants, other		
levetiracetam er	2	

KEY: **7D** 7 day limit
MME Morphine milligram equivalent
PA Prior authorization required

QL Quantity limit
SP Specialty medication
ST Step therapy

Drug name	Drug tier	Notes
levetiracetam oral	2	
NAYZILAM	5	PA
roweepra	2	
Calcium channel modifying agents		
ethosuximide oral	3	
methsuximide	3	
zonisamide oral	2	
Gamma-aminobutyric acid (GABA) augmenting agents		
clobazam	4	PA; QL
DIACOMIT	5	PA; QL; SP
diazepam rectal	4	QL
gabapentin oral capsule	2	
gabapentin oral solution 250 mg/5ml	2	
gabapentin oral tablet 600 mg, 800 mg	2	
phenobarbital oral	2	
primidone oral	2	
tiagabine hcl	4	
valproic acid oral capsule	2	
valproic acid oral solution 250 mg/5ml	2	
vigabatrin	5	PA; QL; SP
vigadrone	5	PA; QL; SP
vigpoder	5	PA; QL; SP
Glutamate reducing agents		
felbamate	4	
FYCOMPA ORAL SUSPENSION	4	PA; QL
lamotrigine oral tablet	2	
lamotrigine oral tablet chewable	2	
subvenite	2	
topiramate oral capsule sprinkle	3	
topiramate oral tablet	2	
Sodium channel agents		
APTIOM	4	PA; QL
carbamazepine er	3	
carbamazepine oral suspension 100 mg/5ml	3	
carbamazepine oral tablet	2	
carbamazepine oral tablet chewable	2	
DILANTIN ORAL CAPSULE 30 MG	4	
epitol	2	
lacosamide oral	4	PA; QL
oxcarbazepine oral suspension	4	
oxcarbazepine oral tablet	2	
phenytek	2	
phenytoin infatabs	2	
phenytoin oral	2	
phenytoin sodium extended	2	
rufinamide	4	PA
Antidementia agents		
Cholinesterase inhibitors		

Drug name	Drug tier	Notes
donepezil hcl oral tablet 10 mg, 5 mg	2	QL
donepezil hcl oral tablet dispersible	2	QL
galantamine hydrobromide er	3	QL
galantamine hydrobromide oral solution	4	QL
galantamine hydrobromide oral tablet	3	QL
rivastigmine	4	QL
rivastigmine tartrate	2	QL
N-methyl-D-aspartate (NMDA) receptor antagonist		
memantine hcl oral solution	4	QL
memantine hcl oral tablet	2	QL
Antidepressants		
Antidepressants, other		
bupropion hcl er (sr)	2	
bupropion hcl er (xl) oral tablet extended release 24 hour 150 mg, 300 mg	2	QL
bupropion hcl oral	2	
chlordiazepoxide-amitriptyline	3	
mirtazapine oral tablet	2	
mirtazapine oral tablet dispersible	3	
olanzapine-fluoxetine hcl	4	QL
perphenazine-amitriptyline	3	
SPRAVATO (56 MG DOSE)	5	PA; QL; SP
SPRAVATO (84 MG DOSE)	5	PA; QL; SP
Monoamine oxidase inhibitors		
MARPLAN	4	
phenelzine sulfate oral	2	
tranylcypromine sulfate	4	
SSRI/SNRI (selective serotonin reuptake inhibitors/serotonin and norepinephrine reuptake inhibitors)		
citalopram hydrobromide oral solution	3	
citalopram hydrobromide oral tablet	2	
desvenlafaxine succinate er	3	QL
duloxetine hcl oral capsule delayed release particles 20 mg, 30 mg, 60 mg	2	QL
escitalopram oxalate oral solution	3	
escitalopram oxalate oral tablet	2	
FETZIMA	4	ST; QL
fluoxetine hcl (pmdd)	3	QL
fluoxetine hcl oral capsule	2	
fluoxetine hcl oral capsule delayed release	3	QL
fluoxetine hcl oral solution	2	
fluoxetine hcl oral tablet 10 mg, 20 mg	3	QL
fluvoxamine maleate	2	
fluvoxamine maleate er	4	QL
nefazodone hcl	3	

KEY: **7D** 7 day limit
MME Morphine milligram equivalent
PA Prior authorization required

QL Quantity limit
SP Specialty medication
ST Step therapy

Drug name	Drug tier	Notes
paroxetine hcl er	3	QL
paroxetine hcl oral suspension	4	
paroxetine hcl oral tablet	2	
sertraline hcl oral concentrate	2	
sertraline hcl oral tablet	2	
trazodone hcl oral	2	
venlafaxine hcl	2	
venlafaxine hcl er oral capsule extended release 24 hour	2	
vilazodone hcl	4	QL
Tricyclics		
amitriptyline hcl oral	2	
amoxapine	2	
clomipramine hcl oral	4	
desipramine hcl oral	3	
doxepin hcl oral capsule	2	
doxepin hcl oral concentrate	2	
imipramine hcl oral	2	
imipramine pamoate	4	
nortriptyline hcl oral capsule	2	
nortriptyline hcl oral solution	3	
protriptyline hcl	3	
trimipramine maleate oral	4	
Antiemetics		
Antiemetics, other		
meclizine hcl oral tablet 25 mg	2	
meclizine hcl oral tablet 50 mg	3	
metoclopramide hcl oral solution 5 mg/5ml	2	
metoclopramide hcl oral tablet	2	
perphenazine oral	2	
prochlorperazine	3	
prochlorperazine maleate oral	2	
promethazine hcl oral	2	
promethazine hcl rectal	3	QL
promethegan	3	QL
scopolamine	3	
trimethobenzamide hcl oral	2	
Emetogenic therapy adjuncts		
ANZEMET	4	QL
aprepitant	3	QL
dronabinol	4	
EMEND ORAL SUSPENSION RE-CONSTITUTED	3	QL
granisetron hcl oral	3	QL
ondansetron hcl oral	2	
ondansetron odt oral tablet dispersible 4 mg, 8 mg	2	
VARUBI (180 MG DOSE)	3	QL
Antifungals		
ciclodan	2	
ciclopirox external	2	

Drug name	Drug tier	Notes
ciclopirox olamine external	2	
clotrimazole mouth/throat	2	
clotrimazole-betamethasone external cream	2	QL
clotrimazole-betamethasone external lotion	3	
econazole nitrate external	3	QL
EXELDERM	4	
fluconazole oral	2	
flucytosine oral	4	
griseofulvin microsize oral	3	
griseofulvin ultramicrosize	3	
GYNAZOLE-1	4	
itraconazole oral	4	QL
ketoconazole external cream	2	QL
ketoconazole external shampoo	2	
ketoconazole oral	2	
klayesta	2	QL
LULICONAZOLE	4	QL
miconazole 3	2	
naftifine hcl external cream	4	
nyamyc	2	QL
nystatin external cream	2	
nystatin external ointment	2	
nystatin external powder	2	QL
nystatin mouth/throat	2	
nystatin oral	2	
nystatin-triamcinolone	2	
nystop	2	QL
posaconazole oral tablet delayed release	3	QL
SULCONAZOLE NITRATE	4	
terbinafine hcl oral	2	QL
terconazole vaginal cream	2	
terconazole vaginal suppository	3	
voriconazole oral suspension reconstituted	4	
voriconazole oral tablet	4	QL
Antigout agents		
allopurinol oral tablet 100 mg, 300 mg	2	
colchicine oral tablet	2	QL
colchicine-probenecid	2	
febuxostat	2	ST; QL
probenecid	2	
Antimigraine agents		
Calcitonin gene-related peptide (CGRP) receptor antagonist		
AIMOVIG SUBCUTANEOUS SOLUTION AUTO-INJECTOR 140 MG/ML, 70 MG/ML	3	PA; QL
EMGALITY	3	PA; QL
UBRELVY	3	PA; QL

KEY: **7D** 7 day limit
MME Morphine milligram equivalent
PA Prior authorization required

QL Quantity limit
SP Specialty medication
ST Step therapy

Drug name	Drug tier	Notes
Ergot alkaloids		
dihydroergotamine mesylate injection	4	QL
ERGOMAR	4	QL
ergotamine-caffeine	4	
MIGERGOT	4	
Serotonin (5-HT) receptor agonists		
almotriptan malate	3	ST; QL
eletriptan hydrobromide	3	ST; QL
naratriptan hcl	2	QL
rizatriptan benzoate	2	QL
sumatriptan nasal	4	QL
sumatriptan succinate oral	2	QL
sumatriptan succinate refill subcutaneous solution cartridge	4	QL
sumatriptan succinate subcutaneous	4	QL
sumatriptan-naproxen sodium	4	ST; QL
zolmitriptan nasal	4	ST; QL
zolmitriptan oral	3	ST; QL
Antimythasthenic agents		
pyridostigmine bromide er	4	
pyridostigmine bromide oral solution	4	
pyridostigmine bromide oral tablet 60 mg	2	
Antimycobacterials		
Antimycobacterials, other		
dapsone oral	2	
rifabutin	4	
Antituberculars		
cycloserine oral	4	
ethambutol hcl oral	2	
isoniazid oral syrup	4	
isoniazid oral tablet	2	
PRIFTIN	3	
pyrazinamide oral	3	
rifampin oral	2	
SIRTURO	5	PA
TRECTOR	3	
Antineoplastics		
Alkylating agents		
cyclophosphamide oral capsule	4	
CYCLOPHOSPHAMIDE ORAL TABLET	4	
GLEOSTINE	5	SP
LEUKERAN	4	
MATULANE	5	SP
MYLERAN	4	
temozolomide	5	PA; SP
VALCHLOR	5	PA; QL; SP
Antiandrogens		

Drug name	Drug tier	Notes
abiraterone acetate	5	PA; QL; SP
bicalutamide	2	
ERLEADA	5	PA; QL; SP
nilutamide	5	SP
NUBEQA	5	PA; QL; SP
Antiangiogenic agents		
lenalidomide	5	PA; QL; SP
POMALYST	5	PA; QL; SP
THALOMID	5	PA; QL; SP
Antiestrogens/modifiers		
EMCYT	4	
tamoxifen citrate oral tablet 10 mg	2	
tamoxifen citrate oral tablet 20 mg	2	\$0 Copay for members 35 years and older once your healthcare provider confirms use is for breast cancer prevention.
toremifene citrate	4	
Antimetabolites		
capecitabine	5	SP
DROXIA	4	
hydroxyurea oral	2	
mercaptopurine oral	2	
TABLOID	5	SP
Antineoplastics, other		
diclofenac sodium external gel 3 %	4	QL
fluorouracil external cream	2	QL
fluorouracil external solution	2	
leucovorin calcium oral	2	
LONSURF	5	PA; QL; SP
PIQRAY	5	PA; QL; SP
ROZLYTREK	5	PA; QL; SP
VERZENIO	5	PA; QL; SP
ZOLINZA	5	QL; SP
Aromatase inhibitors, 3rd generation		
anastrozole oral	2	\$0 Copay for members 35 years and older once your healthcare provider confirms use is for breast cancer prevention.

KEY: **7D** 7 day limit
MME Morphine milligram equivalent
PA Prior authorization required

QL Quantity limit
SP Specialty medication
ST Step therapy

Drug name	Drug tier	Notes
exemestane	4	\$0 Copay for members 35 years and older once your healthcare provider confirms use is for breast cancer prevention.
letrozole oral	2	\$0 Copay for members 35 years and older once your healthcare provider confirms use is for breast cancer prevention.
Enzyme inhibitors		
etoposide oral	5	SP
HYCANTIN ORAL	5	PA; QL; SP
TALZENNA	5	PA; QL; SP
Molecular target inhibitors		
ALECENSA	5	PA; QL; SP
BOSULIF	5	PA; QL; SP
CABOMETYX	5	PA; QL; SP
CALQUENCE	5	PA; QL; SP
CAPRELSA	5	PA; QL; SP
COMETRIQ	5	PA; QL; SP
COTELLIC	5	PA; QL; SP
erlotinib hcl	5	PA; QL; SP
everolimus oral tablet 10 mg, 2.5 mg, 5 mg, 7.5 mg	5	PA; QL; SP
gefitinib	5	PA; QL; SP
IBRANCE	5	PA; QL; SP
ICLUSIG	5	PA; QL; SP
IDHIFA	5	PA; QL; SP
imatinib mesylate	5	PA; QL; SP
IMBRUVICA	5	PA; QL; SP
INLYTA	5	PA; QL; SP
JAKAFI	5	PA; QL; SP
lapatinib ditosylate	5	PA; QL; SP
LENVIMA ORAL CAPSULE THERAPY PACK 10 & 4 MG, 10 MG, 10 MG & 2 X 4 MG, 2 X 10 MG, 2 X 10 MG & 4 MG, 2 X 4 MG, 3 X 4 MG, 4 MG	5	PA; QL; SP
LORBRENA	5	PA; QL; SP
MEKINIST	5	PA; QL; SP
sorafenib tosylate	5	PA; QL; SP
STIVARGA	5	PA; QL; SP
sunitinib malate	5	PA; QL; SP
TAFINLAR	5	PA; QL; SP
TUKYSA	5	PA; QL; SP
TURALIO	5	PA; QL; SP
VENCLEXTA	5	PA; QL; SP
VENCLEXTA STARTING PACK	5	PA; QL; SP

Drug name	Drug tier	Notes
VITRAKVI	5	PA; QL; SP
XOSPATA	5	PA; QL; SP
ZELBORAF	5	PA; QL; SP
ZYDELIG	5	PA; QL; SP
ZYKADIA	5	PA; QL; SP
Retinoids		
bexarotene external	5	QL; SP
bexarotene oral	5	SP
tretinoin oral	5	QL; SP
Treatment adjuncts		
MESNEX ORAL	5	SP
Antiparasitics		
Anthelmintics		
albendazole oral	4	PA; QL
ivermectin oral	2	PA; QL
praziquantel oral	4	
Antiprotozoals		
ALINIA ORAL SUSPENSION RECONSTITUTED 100 MG/5ML	3	QL
atovaquone	4	
atovaquone-proguanil hcl	3	
BENZNIDAZOLE	3	PA; QL
chloroquine phosphate oral	2	QL
hydroxychloroquine sulfate oral tablet 100 mg, 200 mg	2	QL
mefloquine hcl	2	
nitazoxanide oral	3	QL
pentamidine isethionate inhalation	3	QL
primaquine phosphate	2	
pyrimethamine oral	5	PA; SP
quinine sulfate	3	
Pediculicides/scabicides		
CROTAN	4	
malathion	4	
permethrin external	2	
spinosad	4	
Anti-Parkinson's agents		
Anticholinergics		
benztropine mesylate oral	2	
trihexyphenidyl hcl	2	
Anti-Parkinson's agents, other		
amantadine hcl oral	2	
carbidopa-levodopa-entacapone	4	
entacapone	3	
tolcapone	4	QL
Dopamine agonists		
apomorphine hcl subcutaneous	5	QL; SP
bromocriptine mesylate oral capsule	4	
bromocriptine mesylate oral tablet	3	
pramipexole dihydrochloride	2	

KEY: **7D** 7 day limit
MME Morphine milligram equivalent
PA Prior authorization required

QL Quantity limit
SP Specialty medication
ST Step therapy

Drug name	Drug tier	Notes
ropinirole hcl	2	
Dopamine precursors/L-amino acid decarboxylase inhibitors		
carbidopa oral	4	
carbidopa-levodopa er	2	
carbidopa-levodopa oral tablet	2	
carbidopa-levodopa oral tablet dispersible	3	
DUOPA	4	PA
Monoamine oxidase B (MAO-B) inhibitors		
rasagiline mesylate oral	4	ST
selegiline hcl oral	3	
Antipsychotics		
1st generation/typical		
chlorpromazine hcl oral tablet	2	
fluphenazine hcl oral	3	
haloperidol lactate oral concentrate 2 mg/ml	2	
haloperidol oral	2	
loxapine succinate	2	
pimozide	3	
thioridazine hcl oral	2	
thiothixene	2	
trifluoperazine hcl	2	
2nd generation/atypical		
aripiprazole oral solution	4	QL
aripiprazole oral tablet	2	QL
asenapine maleate	4	ST; QL
lurasidone hcl	2	QL
olanzapine oral tablet	2	QL
olanzapine oral tablet dispersible	3	QL
paliperidone er	4	QL
quetiapine fumarate	2	QL
quetiapine fumarate er	3	QL
risperidone oral solution	2	
risperidone oral tablet	2	
risperidone oral tablet dispersible	3	
VRAYLAR	4	QL
ziprasidone hcl	3	QL
Treatment-resistant		
clozapine oral tablet	2	
clozapine oral tablet dispersible	4	QL
Antivirals		
LAGEVRIO	4	QL
PAXLOVID (150/100)	4	QL
PAXLOVID (300/100)	4	QL
Anti-cytomegalovirus (CMV) agents		
valganciclovir hcl oral solution reconstituted	4	QL
valganciclovir hcl oral tablet	2	QL
Anti-hepatitis B (HBV) agents		
adefovir dipivoxil	5	

Drug name	Drug tier	Notes
BARACLUDE ORAL SOLUTION	5	
entecavir	3	
lamivudine oral tablet 100 mg	3	
VEMLIDY	5	ST; QL
Anti-hepatitis C (HCV) agents		
LEDIPASVIR-SOFOSBUVIR	4	PA; QL; SP
MAVYRET	4	PA; QL; SP
PEGASYS	5	PA; QL; SP
ribavirin oral	3	
SOFOSBUVIR-VELPATASVIR	4	PA; QL; SP
SOVALDI	5	PA; QL; SP
ZEPATIER	5	PA; QL; SP
Antiherpetic agents		
acyclovir external ointment	3	QL
acyclovir oral	2	
famciclovir oral	2	QL
valacyclovir hcl oral	2	QL
Anti-HIV agents, integrase inhibitors (INSTI)		
BIKTARVY	4	QL
DOVATO	4	QL
GENVOYA	4	QL
JULUCA	4	QL
STRIBILD	4	QL
TIVICAY	4	QL
TYBOST	4	QL
Anti-HIV agents, non-nucleoside reverse transcriptase inhibitors (NNRTI)		
COMPLERA	4	QL
EDURANT	4	QL
efavirenz	2	QL
efavirenz-emtricitabine-tenofovir df	2	QL
efavirenz-lamivudine-tenofovir oral tablet 400-300-300 mg	3	QL
efavirenz-lamivudine-tenofovir oral tablet 600-300-300 mg	2	QL
etravirine	4	QL
INTELENCE ORAL TABLET 25 MG	4	QL
nevirapine	2	QL
nevirapine er	2	QL
Anti-HIV agents, nucleoside and nucleotide reverse transcriptase inhibitors (NRTI)		
abacavir sulfate oral solution	3	QL
abacavir sulfate oral tablet	2	QL
abacavir sulfate-lamivudine	2	QL
emtricitabine	3	QL
emtricitabine-tenofovir df oral tablet 100-150 mg, 133-200 mg, 167-250 mg	2	QL

KEY: **7D** 7 day limit
MME Morphine milligram equivalent
PA Prior authorization required

QL Quantity limit
SP Specialty medication
ST Step therapy

Drug name	Drug tier	Notes
emtricitabine-tenofovir df oral tablet 200-300 mg	2	QL; \$0 Copay once your healthcare provider confirms use is to prevent HIV as pre-exposure prophylaxis (PrEP) in individuals at increased risk of HIV infection.
lamivudine oral solution	2	QL
lamivudine oral tablet 150 mg, 300 mg	2	QL
lamivudine-zidovudine	2	QL
ODEFSEY	4	QL
tenofovir disoproxil fumarate	2	QL; \$0 Copay once your healthcare provider confirms use is to prevent HIV as pre-exposure prophylaxis (PrEP) in individuals at increased risk of HIV infection.
TRIUMEQ	4	QL
zidovudine	2	QL
Anti-HIV agents, other		
FUZEON	5	QL
maraviroc	2	QL
SELZENTRY ORAL SOLUTION	4	QL
Anti-HIV agents, protease inhibitors		
APTIVUS	4	QL
atazanavir sulfate	2	QL
darunavir	2	QL
EVOTAZ	4	QL
fosamprenavir calcium	4	QL
lopinavir-ritonavir	2	QL
NORVIR ORAL PACKET	4	QL
PREZCOBIX	4	QL
PREZISTA ORAL SUSPENSION	4	QL
REYATAZ ORAL PACKET	4	QL
ritonavir	2	QL
VIRACEPT	4	QL
Anti-influenza agents		
oseltamivir phosphate oral	2	QL
RELENZA DISKHALER	4	QL
rimantadine hcl	3	
Anxiolytics		
Anxiolytics, other		
bupirone hcl oral	2	
hydroxyzine hcl oral	2	
hydroxyzine pamoate oral	2	
meprobamate	4	

Drug name	Drug tier	Notes
Benzodiazepines		
alprazolam er	3	QL
alprazolam intensol	3	QL
alprazolam oral tablet	2	QL
alprazolam oral tablet dispersible	3	QL
alprazolam xr	3	QL
chlordiazepoxide hcl	2	
clonazepam oral tablet	2	QL
clonazepam oral tablet dispersible	3	QL
clorazepate dipotassium	3	QL
diazepam intensol	2	QL
diazepam oral concentrate	2	QL
diazepam oral solution	2	
diazepam oral tablet	2	QL
estazolam	2	QL
lorazepam intensol	2	QL
lorazepam oral concentrate 2 mg/ml	2	QL
lorazepam oral tablet	2	QL
oxazepam	2	
quazepam	4	
Bipolar agents		
Mood stabilizers		
divalproex sodium er	2	
divalproex sodium oral	2	
EQUETRO	4	
lithium	2	
lithium carbonate er	2	
lithium carbonate oral	2	
Blood glucose monitoring		
ACCU-CHEK AVIVA DEVICE	3	QL
ACCU-CHEK AVIVA PLUS TEST STRIPS	3	QL
ACCU-CHEK FASTCLIX LANCET KIT	3	QL
ACCU-CHEK GUIDE TEST STRIPS	3	QL
ACCU-CHEK GUIDE CONTROL	3	QL
ACCU-CHEK GUIDE KIT W/DEVICE	3	QL
ACCU-CHEK SMARTVIEW CONTROL	3	QL
ACCU-CHEK SMARTVIEW TEST STRIPS	3	QL
ACCU-CHEK SOFTCLIX LANCET DEVICE KIT	3	QL
AUTOLET LANCING DEVICE	3	
CARESENS LANCETS 30G	3	QL
CARETOUCH LANCING/EJECTOR	3	
CHEMSTRIP K	3	
CHEMSTRIP MICRAL	3	
CHEMSTRIP UGK	3	
CHOSEN LANCETS 30G	3	QL
CHOSEN LANCING DEVICE	3	
CHOSEN SAFETY LANCETS 28G	3	QL

KEY: **7D** 7 day limit
MME Morphine milligram equivalent
PA Prior authorization required

QL Quantity limit
SP Specialty medication
ST Step therapy

Drug name	Drug tier	Notes
CLEVER CHOICE COMFORT EZ	3	QL
COMFORT TOUCH TWIST LANCET 30G	3	QL
CONTOUR CONTROL IN VITRO LIQUID LOW , NORMAL	3	QL
CVS KETONE CARE	3	
DEXCOM G6 RECEIVER	4	PA; QL
DEXCOM G6 SENSOR	4	PA; QL
DEXCOM G6 TRANSMITTER	4	PA; QL
DEXCOM G7 RECEIVER	4	PA; QL
DEXCOM G7 SENSOR	4	PA; QL
DIASTIX REAGENT	3	
FORA TEST N'GO ADV-VOICE-6 CON	3	
FREESTYLE LIBRE 14 DAY READER	4	PA; QL
FREESTYLE LIBRE 14 DAY SENSOR	4	PA; QL
FREESTYLE LIBRE 2 READER	4	PA; QL
FREESTYLE LIBRE 2 SENSOR	4	PA; QL
FREESTYLE LIBRE 3 READER	4	PA; QL
FREESTYLE LIBRE 3 SENSOR	4	PA; QL
FREESTYLE LIBRE READER	4	PA; QL
KETO-DIASTIX	3	
KETONE TEST	3	
KETOSTIX	3	
LANCETS	3	
LANCETS SUPER THIN	3	QL
MICROLET NEXT LANCING DEVICE	3	
NOVOPEN ECHO	3	
ONETOUCH DELICA PLUS LANCING	3	
ONETOUCH DELICA SAFETY LANCING	3	QL
ONETOUCH ULTRA TEST STRIPS	3	QL
ONETOUCH ULTRA 2 KIT W/DEVICE	3	QL
ONETOUCH ULTRA TEST STRIPS	3	QL
ONETOUCH VERIO FLEX SYSTEM KIT	3	QL
ONETOUCH VERIO IN VITRO LIQUID HIGH	3	QL
ONETOUCH VERIO TEST STRIPS	3	QL
PERFECT POINT SAFETY LANCETS	3	QL
TECHLITE LANCETS 26G		QL
VERIFINE SAFE LANCET MINI 21G	3	QL
VERIFINE SAFE LANCET MINI 23G	3	QL
VERIFINE SAFE LANCET MINI 28G	3	QL
VERIFINE SAFE LANCET MINI 30G	3	QL
VIVAGUARD LANCETS 30G	3	QL
VIVAGUARD LANCING DEVICE	3	
VIVAGUARD SAFETY LANCETS 28G	3	QL
Blood glucose regulators		
Antidiabetic agents		

Drug name	Drug tier	Notes
acarbose oral	2	QL
BYDUREON BCISE AUTOINJECTOR	3	PA; QL
FARXIGA	3	QL
glimepiride oral tablet 1 mg, 2 mg, 4 mg	2	QL
glipizide er	2	QL
glipizide ir	2	QL
glipizide xl	2	QL
glipizide-metformin hcl	3	QL
glyburide micronized	2	QL
glyburide oral	2	QL
glyburide-metformin	2	QL
JARDIANCE	3	QL
JENTADUETO	3	QL
JENTADUETO XR	3	QL
metformin hcl er	2	QL
metformin hcl oral solution	4	QL
metformin hcl oral tablet 1000 mg, 500 mg, 850 mg	2	QL
miglitol	3	QL
MOUNJARO	3	PA; QL
nateglinide	3	QL
OZEMPIC	3	PA; QL
pioglitazone hcl	2	QL
pioglitazone hcl-metformin hcl	3	QL
repaglinide	2	QL
RYBELSUS	3	PA; QL
saxagliptin hcl	3	QL
SOLIQUA	3	QL
SYNJARDY	3	QL
SYNJARDY XR	3	QL
TRADJENTA	3	QL
TRULICITY	3	PA; QL
XIGDUO XR	3	QL
XULTOPHY	3	QL
Glycemic agents		
BAQSIMI ONE PACK	1	QL
BAQSIMI TWO PACK	1	QL
diazoxide oral	4	
glucagon emergency kit	1	QL
GLUCAGON EMERGENCY KIT	1	QL
GLUCO TO GO	3	
GVOKE HYPOPEN 1-PACK	1	QL
GVOKE HYPOPEN 2-PACK	1	QL
GVOKE KIT	1	QL
GVOKE PFS	1	QL
ZEGALOGUE	1	QL
Insulins		
BASAGLAR KWIKPEN	1	QL
HUMALOG	1	QL
HUMALOG KWIKPEN	1	QL
HUMALOG MIX 50/50 KWIKPEN	1	QL

KEY: **7D** 7 day limit
MME Morphine milligram equivalent
PA Prior authorization required

QL Quantity limit
SP Specialty medication
ST Step therapy

Drug name	Drug tier	Notes
HUMALOG MIX 50/50 VIAL	1	QL
HUMALOG MIX 75/25 KWIKPEN	1	QL
HUMALOG MIX 75/25 VIAL	1	QL
HUMALOG U-100 JUNIOR KWIKPEN	1	QL
HUMULIN 70/30 KWIKPEN	1	QL
HUMULIN 70/30 VIAL	1	QL
HUMULIN N KWIKPEN	1	QL
HUMULIN N VIAL	1	QL
HUMULIN R U-500 KWIKPEN	1	QL
HUMULIN R U-500 VIAL	1	QL
HUMULIN R VIAL	1	QL
INSULIN ASPART PROT & ASPART	1	QL
INSULIN DEGLUDEC	1	QL
INSULIN DEGLUDEC FLEXTOUCH	1	QL
INSULIN LISPRO	1	QL
INSULIN LISPRO (1 UNIT DIAL)	1	QL
INSULIN LISPRO JUNIOR KWIKPEN	1	QL
INSULIN LISPRO PROT & LISPRO	1	QL
LEVEMIR FLEXPEN	1	QL
LEVEMIR U-100 VIAL	1	QL
REZVOGLAR KWIKPEN	1	QL
TRESIBA	1	QL
TRESIBA FLEXTOUCH	1	QL
Blood products and modifiers		
Anticoagulants		
dabigatran etexilate mesylate oral capsule 150 mg, 75 mg	4	QL
ELIQUIS	3	QL
ELIQUIS DVT/PE STARTER PACK	3	QL
enoxaparin sodium	3	QL
fondaparinux sodium	4	QL
FRAGMIN	5	QL
heparin sodium (porcine)	2	
heparin sodium (porcine) pf	2	
jantoven	2	
warfarin sodium oral	2	
XARELTO	3	QL
XARELTO STARTER PACK	3	QL
Blood formation modifiers		
anagrelide hcl	4	
ARANESP (ALBUMIN FREE)	5	QL; SP
LEUKINE	5	SP
NEULASTA	5	SP
NEULASTA ONPRO	5	SP
plerixafor	5	SP
PROMACTA	5	PA; QL; SP
RETACRIT	5	QL; SP
ZARXIO	5	SP
Hemostasis agents		
aminocaproic acid oral	4	
RECOTHROM EXTERNAL SOLUTION RECONSTITUTED 5000 UNIT	4	

Drug name	Drug tier	Notes
RECOTHROM SPRAY KIT	4	
THROMBIN-JMI EPISTAXIS	4	
THROMBIN-JMI EXTERNAL KIT	4	
tranexamic acid oral	3	QL
Platelet modifying agents		
aspirin-dipyridamole er	4	QL
BRILINTA	4	QL
cilostazol	2	
clopidogrel bisulfate oral	2	QL
dipyridamole oral	2	
prasugrel hcl	2	QL
YOSPRALA	3	QL
Cardiovascular agents		
Alpha-adrenergic agonists		
clonidine	3	
clonidine hcl oral	2	
guanfacine hcl	2	QL
METHYLDOPA	2	
midodrine hcl	2	
Alpha-adrenergic blocking agents		
doxazosin mesylate oral	2	
phenoxybenzamine hcl oral	4	
prazosin hcl oral	2	
Angiotensin II receptor antagonists		
candesartan cilexetil	3	QL
EDARBI	4	QL
irbesartan	2	QL
losartan potassium oral	2	QL
olmesartan medoxomil oral	2	QL
telmisartan	3	QL
valsartan oral tablet	2	QL
Angiotensin-converting enzyme (ACE) inhibitors		
benazepril hcl oral	2	QL
captopril oral	2	QL
enalapril maleate oral tablet	2	QL
fosinopril sodium	2	QL
lisinopril oral	2	QL
moexipril hcl	2	QL
perindopril erbumine	2	QL
quinapril hcl	2	QL
ramipril	2	QL
trandolapril	2	QL
Antiarrhythmics		
amiodarone hcl oral	2	
disopyramide phosphate	3	
dofetilide	4	QL
flecainide acetate	2	
mexiletine hcl oral	3	
MULTAQ	4	PA; QL
NORPACE CR	3	
propafenone hcl	2	

KEY: **7D** 7 day limit
MME Morphine milligram equivalent
PA Prior authorization required

QL Quantity limit
SP Specialty medication
ST Step therapy

Drug name	Drug tier	Notes
propafenone hcl er	4	
quinidine gluconate er	2	
quinidine sulfate	2	
sotalol hcl (af)	2	
sotalol hcl oral	2	
SOTYLIZE	4	PA
Beta-adrenergic blocking agents		
acebutolol hcl oral	2	
atenolol oral	2	
betaxolol hcl oral	2	
bisoprolol fumarate oral	2	
carvedilol	2	
labetalol hcl oral	2	
metoprolol succinate er	2	
metoprolol tartrate oral tablet 100 mg, 25 mg, 50 mg	2	
nadolol oral	2	
pindolol	2	
propranolol hcl er	2	
propranolol hcl oral	2	
timolol maleate oral	2	
Calcium channel blocking agents		
amlodipine besylate oral	2	
cartia xt	2	
diltiazem hcl er beads	2	
diltiazem hcl er coated beads	2	
diltiazem hcl er oral capsule extended release 12 hour	3	
diltiazem hcl er oral capsule extended release 24 hour	2	
diltiazem hcl er oral tablet extended release 24 hour	3	
diltiazem hcl oral	2	
dilt-xr	2	
felodipine er	2	
isradipine	2	
matzim la	3	
nicardipine hcl oral	3	
nifedipine er	2	QL
nifedipine er osmotic release	2	QL
nifedipine oral	2	
nimodipine oral	4	
nisoldipine er	3	
tiadylt er	2	
verapamil hcl er oral capsule extended release 24 hour	3	
verapamil hcl er oral tablet extended release	2	
verapamil hcl oral	2	
Cardiovascular agents, other		
amiloride-hydrochlorothiazide	2	
amlodipine besylate-benazepril hcl	2	QL
amlodipine besylate-valsartan	3	QL

Drug name	Drug tier	Notes
atenolol-chlorthalidone	2	
benazepril-hydrochlorothiazide	3	QL
bisoprolol-hydrochlorothiazide	2	QL
candesartan cilexetil-hctz	3	QL
captopril-hydrochlorothiazide	3	QL
CORLANOR	4	PA; QL
digoxin oral solution	3	
digoxin oral tablet 125 mcg, 250 mcg	2	
digoxin oral tablet 62.5 mcg	4	
EDARBYCLOR	4	QL
enalapril-hydrochlorothiazide	2	QL
ENTRESTO	4	PA; QL
fosinopril sodium-hctz	3	QL
irbesartan-hydrochlorothiazide	2	QL
isosorb dinitrate-hydralazine	3	QL
ivabradine hcl	4	PA; QL
lisinopril-hydrochlorothiazide	2	QL
losartan potassium-hctz	2	QL
metoprolol-hydrochlorothiazide	3	
olmesartan medoxomil-hctz	2	QL
pentoxifylline er	2	
quinapril-hydrochlorothiazide	3	QL
ranolazine er	4	QL
spironolactone-hctz	2	
telmisartan-hctz	3	QL
triamterene-hctz	2	
valsartan-hydrochlorothiazide	2	QL
Diuretics, carbonic anhydrase inhibitors		
acetazolamide er	3	
acetazolamide oral	3	
methazolamide oral	4	
Diuretics, loop		
bumetanide oral	2	
ethacrynic acid	4	
furosemide oral	2	
toremide	2	
Diuretics, potassium-sparing		
amiloride hcl oral	2	
eprenone	3	
spironolactone oral tablet	2	
Diuretics, thiazide		
chlorthalidone	2	
DIURIL	3	
hydrochlorothiazide oral	2	
indapamide	2	
metolazone	2	
Dyslipidemics, fibric acid derivatives		
fenofibrate micronized oral capsule 134 mg, 200 mg, 67 mg	2	
fenofibrate oral capsule 134 mg, 200 mg, 67 mg	2	

KEY: **7D** 7 day limit
MME Morphine milligram equivalent
PA Prior authorization required

QL Quantity limit
SP Specialty medication
ST Step therapy

Drug name	Drug tier	Notes
fenofibrate oral tablet 145 mg, 160 mg, 48 mg, 54 mg	2	
gemfibrozil oral	2	
Dyslipidemics, HMG COA reductase inhibitors		
atorvastatin calcium oral tablet 10 mg, 20 mg	2	QL; \$0 Copay for members between ages 40 to 75 years.
atorvastatin calcium oral tablet 40 mg, 80 mg	2	QL
fluvastatin sodium	3	QL; \$0 Copay for members between ages 40 to 75 years once your health-care provider confirms risk of cardiovascular disease.
lovastatin oral	2	QL; \$0 Copay for members between ages 40 to 75 years.
pravastatin sodium	2	QL; \$0 Copay for members between ages 40 to 75 years once your health-care provider confirms risk of cardiovascular disease.
rosuvastatin calcium oral tablet 10 mg, 5 mg	2	QL; \$0 Copay for members between ages 40 to 75 years once your health-care provider confirms risk of cardiovascular disease.
rosuvastatin calcium oral tablet 20 mg, 40 mg	2	QL
simvastatin oral tablet 10 mg, 20 mg, 40 mg, 5 mg	2	QL; \$0 Copay for members between ages 40 to 75 years.
simvastatin oral tablet 80 mg	2	QL
Dyslipidemics, other		
cholestyramine light	3	
cholestyramine oral	3	
colesevelam hcl	3	
colestipol hcl oral granules	3	
colestipol hcl oral packet	3	
colestipol hcl oral tablet	2	
ezetimibe	2	QL
ezetimibe-simvastatin	3	QL
icosapent ethyl	4	PA
niacin (antihyperlipidemic)	3	

Drug name	Drug tier	Notes
niacin er (antihyperlipidemic)	3	
niacor	3	
omega-3-acid ethyl esters	2	PA; QL
prevalite	3	
REPATHA	4	PA; QL
REPATHA PUSHTRONEX SYSTEM	4	PA; QL
REPATHA SURECLICK	4	PA; QL
Vasodilators, direct-acting arterial/venous		
isosorbide dinitrate oral tablet 10 mg, 20 mg, 30 mg, 5 mg	2	
isosorbide mononitrate	2	
isosorbide mononitrate er	2	
NITRO-BID	3	
NITRO-DUR TRANSDERMAL PATCH 24 HOUR 0.3 MG/HR, 0.8 MG/HR	4	
nitroglycerin rectal	4	QL
nitroglycerin sublingual	2	
nitroglycerin transdermal	2	
Vasodilators, direct-acting arterial		
hydralazine hcl oral	2	
minoxidil oral	2	
Central nervous system agents		
Attention deficit hyperactivity disorder agents, amphetamines		
amphetamine sulfate	4	PA
amphetamine-dextroamphetamine	2	PA; QL
amphetamine-dextroamphetamine er	3	PA; QL
dextroamphetamine sulfate er	3	PA; QL
dextroamphetamine sulfate oral solution	3	PA
dextroamphetamine sulfate oral tablet 10 mg, 5 mg	2	PA; QL
lisdexamfetamine dimesylate oral capsule	4	PA; QL
methamphetamine hcl	4	PA
Attention deficit hyperactivity disorder agents, non-amphetamines		
atomoxetine hcl	3	QL
clonidine hcl er oral tablet extended release 12 hour	3	
dexmethylphenidate hcl	2	PA; QL
dexmethylphenidate hcl er	3	PA; QL
guanfacine hcl er	2	QL
methylphenidate hcl er (cd)	3	PA; QL
methylphenidate hcl er (la)	3	PA; QL
methylphenidate hcl er (osm) oral tablet extended release 18 mg, 27 mg, 36 mg, 54 mg	3	PA; QL
methylphenidate hcl er oral tablet extended release	3	PA; QL
methylphenidate hcl oral solution	3	PA; QL
methylphenidate hcl oral tablet	2	PA; QL

KEY: **7D** 7 day limit
MME Morphine milligram equivalent
PA Prior authorization required

QL Quantity limit
SP Specialty medication
ST Step therapy

Drug name	Drug tier	Notes
methylphenidate hcl oral tablet chewable	3	PA; QL
Central nervous system, other		
AUSTEDO	5	PA; QL; SP
caffeine citrate oral	2	
DAYBUE	5	PA; QL; SP
INGREZZA	5	PA; QL; SP
riluzole	4	SP
tetrabenazine	5	PA; QL; SP
Fibromyalgia agents		
pregabalin oral capsule	2	QL
SAVELLA	4	ST; QL
SAVELLA TITRATION PACK	4	ST; QL
Multiple sclerosis agents		
AVONEX PEN	5	PA; QL; SP
AVONEX PREFILLED	5	PA; QL; SP
BETASERON	5	PA; QL; SP
dalfampridine er	4	PA; QL; SP
dimethyl fumarate oral	4	PA; QL; SP
dimethyl fumarate starter pack	4	PA; QL; SP
fingolimod hcl	5	PA; QL; SP
glatiramer acetate	4	PA; QL; SP
glatopa	4	PA; QL; SP
teriflunomide	5	PA; QL; SP
Dental and oral agents		
cevimeline hcl	4	
chlorhexidine gluconate mouth/throat	2	
kourzeq	2	
oralone	2	
periogard	2	
pilocarpine hcl oral	3	
triamcinolone acetonide mouth/throat	2	
Dermatological agents		
accutane	4	
acitretin	4	
adapalene external cream	4	PA; QL
adapalene external gel	4	PA; QL
ammonium lactate external cream	2	
amnesteem	4	
azelaic acid external	4	QL
benzoyl peroxide-erythromycin	3	QL
brimonidine tartrate external	4	QL
calcipotriene external cream	4	QL
calcipotriene external ointment	4	QL
calcipotriene external solution	3	QL
calcipotriene-betameth diprop	4	QL
calcitriol external	4	QL
claravis	4	
CLINDACIN ETZ EXTERNAL KIT	2	QL
clindacin etz external swab	2	QL

Drug name	Drug tier	Notes
clindacin-p	2	QL
clindamycin phos-benzoyl perox external gel 1.2-5 %	3	QL
clindamycin phosphate external gel	3	QL
clindamycin phosphate external lotion	3	QL
clindamycin phosphate external solution	2	QL
clindamycin phosphate external swab	2	QL
doxepin hcl external	4	PA; QL
DUPIXENT	5	PA; QL; SP
ery pad 2%	2	
erythromycin external	3	
ESKATA	4	
imiquimod external cream 5 %	2	QL
isotretinoin oral capsule 10 mg, 20 mg, 30 mg, 40 mg	4	
ivermectin external cream	4	QL
methoxsalen rapid	4	
metronidazole external cream	3	
metronidazole external gel 0.75 %	3	
metronidazole external lotion	3	
pimecrolimus	4	ST; QL
podofilox external gel	4	
podofilox external solution	2	
REGRANEX	3	PA; QL
selenium sulfide external lotion	2	
SKYRIZI SUBCUTANEOUS SOLUTION CARTRIDGE	5	PA; QL; SP
STELARA SUBCUTANEOUS	5	PA; QL; SP
sulfacetamide sodium (acne)	4	
tacrolimus external	4	ST; QL
tazarotene external cream 0.1 %	4	PA; QL
tazarotene external gel	4	PA; QL
tretinoin external cream	3	PA; QL
zenatane	4	
Electrolytes/minerals/metals/vitamins		
Electrolyte/mineral replacement		
carglumic acid	5	PA; SP
EFFER-K ORAL TABLET EFFERVESCENT 10 MEQ, 20 MEQ	3	
effer-k oral tablet effervescent 25 meq	2	
GALZIN	4	
klor-con 10	2	
klor-con m10	2	
klor-con m15	2	
klor-con m20	2	
klor-con oral packet	4	
klor-con oral tablet extended release	2	
klor-con/ef	2	

KEY: **7D** 7 day limit
MME Morphine milligram equivalent
PA Prior authorization required

QL Quantity limit
SP Specialty medication
ST Step therapy

Drug name	Drug tier	Notes
k-prime	2	
levocarnitine oral solution	3	
levocarnitine oral tablet	2	
levocarnitine sf	3	
potassium chloride crys er	2	
potassium chloride er	2	
potassium chloride oral packet	4	
potassium chloride oral solution	2	
potassium citrate er	3	
sodium fluoride oral	1	\$0 Copay for members ages 0 to 16 years.
Electrolyte/mineral/metal modifiers		
CHEMET	3	
deferasirox granules	5	PA; SP
deferasirox oral packet	5	PA; SP
deferasirox oral tablet	4	PA; SP
deferasirox oral tablet soluble	5	PA; SP
LOKELMA	4	PA; QL
sodium polystyrene sulfonate	2	
SPS	3	
trientine hcl oral capsule 250 mg	5	PA; QL; SP
VELTASSA ORAL PACKET 16.8 GM, 25.2 GM, 8.4 GM	4	PA; QL
Phosphate binders		
AURYXIA	4	SP
calcium acetate (phos binder)	2	
calcium acetate oral tablet 667 mg	2	
FOSRENOL ORAL PACKET	4	
lanthanum carbonate	4	
sevelamer carbonate oral packet	4	
sevelamer carbonate oral tablet	3	
VELPHORO	3	SP
Vitamins		
ATABEX OB	2	
cyanocobalamin injection solution 1000 mcg/ml	2	
CYANOCOBALAMIN INJECTION SOLUTION 2000 MCG/ML	2	
DODEX	3	
ergocalciferol oral capsule	2	
folic acid oral tablet 1 mg	2	
folic acid oral tablet 400 mcg, 800 mcg	1	
ft folic acid	1	
M-NATAL PLUS	2	
NEONATAL COMPLETE	2	
NEONATAL PLUS	2	
ONE VITE WOMENS PLUS	2	
phytonadione oral	4	QL
pnv prenatal plus multivit+dha	2	
prenatal oral tablet 27-1 mg	2	
prenatal plus vitamin/mineral	2	

Drug name	Drug tier	Notes
PRENATRIX	2	
PRENATRYL	2	
TRINATE	2	
TRUE FOLIC ACID ORAL TABLET 1 MG	2	
TRUE FOLIC ACID ORAL TABLET 400 MCG	1	
VINATE ONE ORAL TABLET 60-1 MG	2	
vitamin d (ergocalciferol) oral capsule 1.25 mg (50000 ut), 50000 unit	2	
VITATHELY WITH GINGER	2	
WESNATAL DHA COMPLETE	2	
WESTAB PLUS	2	
Gastrointestinal agents		
Antispasmodics, gastrointestinal		
dicyclomine hcl oral capsule	2	
dicyclomine hcl oral solution	3	
dicyclomine hcl oral tablet	2	
glycopyrrolate oral tablet 1 mg, 2 mg	2	
methscopolamine bromide oral	3	
Gastrointestinal agents, other		
alvimopan	4	
amoxicill-clarithro-lansopraz	4	QL
cromolyn sodium oral	4	
diphenoxylate-atropine oral liquid	3	
diphenoxylate-atropine oral tablet	2	
loperamide hcl oral capsule	2	
opium	4	QL
RELISTOR SUBCUTANEOUS	4	PA; QL
SYMPROIC	3	PA; QL
ursodiol oral capsule 300 mg	2	
ursodiol oral tablet	2	
Histamine2 (H2) receptor antagonists		
cimetidine hcl	2	
cimetidine oral	2	
famotidine oral suspension reconstituted	3	
famotidine oral tablet 20 mg, 40 mg	2	
nizatidine	3	
Irritable bowel syndrome agents		
alosetron hcl	4	PA; QL
LINZESS	3	PA; QL
lubiprostone	4	QL
VIBERZI	4	PA; QL; SP
Laxatives		
bisacodyl ec	1	QL
bisacodyl oral	1	QL
citroma	1	QL
clearlax	1	QL

KEY: **7D** 7 day limit
MME Morphine milligram equivalent
PA Prior authorization required

QL Quantity limit
SP Specialty medication
ST Step therapy

Drug name	Drug tier	Notes
CLENPIQ	4	\$0 Copay once your healthcare provider confirms use is to prepare for a preventive colonoscopy.
constulose	2	
enulose	2	
FRESKARO MAGNESIUM CITRATE	1	QL
ft clearlax	1	QL
ft laxative	1	QL
ft magnesium citrate	1	QL
gavilax oral powder	1	QL
gavilyte-c	2	QL; \$0 Copay once your healthcare provider confirms use is to prepare for a preventive colonoscopy.
gavilyte-g	2	QL; \$0 Copay once your healthcare provider confirms use is to prepare for a preventive colonoscopy.
gavilyte-n with flavor pack	2	QL; \$0 Copay once your healthcare provider confirms use is to prepare for a preventive colonoscopy.
generlac	2	
gentle laxative oral tablet delayed release	1	QL
gentlelax	1	QL
glycolax	1	QL
KRISTALOSE	4	
lactulose encephalopathy oral solution 10 gm/15ml	2	
lactulose oral packet	4	
lactulose oral solution	2	
magnesium citrate oral solution	1	QL
mm clearlax	1	QL
na sulfate-k sulfate-mg sulf	4	QL; \$0 Copay once your healthcare provider confirms use is to prepare for a preventive colonoscopy.
ONELAX MAGNESIUM CITRATE	1	QL

Drug name	Drug tier	Notes
peg 3350-kcl-na bicarb-nacl	2	QL; \$0 Copay once your healthcare provider confirms use is to prepare for a preventive colonoscopy.
peg-3350/electrolytes	2	QL; \$0 Copay once your healthcare provider confirms use is to prepare for a preventive colonoscopy.
peg-3350/electrolytes/ascorbat	4	QL; \$0 Copay once your healthcare provider confirms use is to prepare for a preventive colonoscopy.
peg-kcl-nacl-nasulf-na asc-c	4	QL; \$0 Copay once your healthcare provider confirms use is to prepare for a preventive colonoscopy.
PLENVU	4	QL; \$0 Copay once your healthcare provider confirms use is to prepare for a preventive colonoscopy.
polyethylene glycol 3350 oral powder	1	QL
TRUE LAXATIVE	1	QL
Protectants		
misoprostol oral	2	
sucralfate oral suspension	4	PA
sucralfate oral tablet	2	
Proton pump inhibitors		
dexlansoprazole	4	QL
esomeprazole magnesium oral capsule delayed release	2	QL
ft acid reducer oral capsule delayed release 15 mg	2	QL
lansoprazole oral capsule delayed release	2	QL
omeprazole oral capsule delayed release 10 mg	2	QL
omeprazole oral capsule delayed release 20 mg, 40 mg	2	
pantoprazole sodium oral tablet delayed release	2	QL
rabeprazole sodium oral tablet delayed release	3	QL

KEY: **7D** 7 day limit
MME Morphine milligram equivalent
PA Prior authorization required

QL Quantity limit
SP Specialty medication
ST Step therapy

Drug name	Drug tier	Notes
sm lansoprazole	2	QL
Genetic or enzyme disorder: replacement, modifiers, treatment		
betaine	5	SP
CREON	3	
CYSTAGON	5	SP
MYALEPT	5	PA; QL; SP
OICALIVA	5	PA; QL; SP
sapropterin dihydrochloride	5	PA; QL; SP
ZENPEP	3	
Genitourinary agents		
Antispasmodics, urinary		
darifenacin hydrobromide er	3	ST; QL
fesoterodine fumarate er	4	ST; QL
flavoxate hcl	2	
oxybutynin chloride er	2	QL
oxybutynin chloride oral solution	2	
oxybutynin chloride oral tablet 5 mg	2	
solifenacin succinate	2	QL
tolterodine tartrate	3	
tolterodine tartrate er	3	
tropium chloride	3	
tropium chloride er	3	ST
Benign prostatic hypertrophy agents		
alfuzosin hcl er	2	
CARDURA XL	4	QL
dutasteride oral	2	QL
dutasteride-tamsulosin hcl	4	
finasteride oral tablet 5 mg	2	
silodosin	3	QL
tamsulosin hcl	2	
terazosin hcl	2	
Genitourinary agents, other		
bethanechol chloride oral	2	
ELMIRON	3	
ENCARE	1	QL
OPTIONS GYNOL II CONTRACEPTIVE	1	
penicillamine oral	5	SP
phenazo oral tablet 200 mg	2	
phenazopyridine hcl oral tablet 100 mg, 200 mg	2	
tadalafil oral tablet 10 mg, 20 mg	2	QL
tadalafil oral tablet 2.5 mg, 5 mg	4	QL
VCF VAGINAL CONTRACEPTIVE	1	
Hormonal agents, stimulant/replacement/modifying (adrenal)		
ALA SCALP	4	
alclometasone dipropionate	2	
amcinonide	4	
APEXICON E	3	QL
betamethasone dipropionate aug	3	

Drug name	Drug tier	Notes
betamethasone dipropionate external	3	
betamethasone valerate external cream	3	
betamethasone valerate external lotion	3	
betamethasone valerate external ointment	3	
clobetasol propionate e	4	QL
clobetasol propionate external cream	3	QL
clobetasol propionate external gel	3	QL
clobetasol propionate external ointment	3	QL
clobetasol propionate external solution	2	QL
clocortolone pivalate	4	ST; QL
CORDRAN	4	QL
desonide external cream	3	QL
desonide external lotion	3	QL
desonide external ointment	3	QL
desoximetasone external	3	QL
dexamethasone intensol	2	
dexamethasone oral elixir	2	
dexamethasone oral solution	2	
dexamethasone oral tablet	2	
diflorasone diacetate external cream	4	QL
fludrocortisone acetate oral	2	
fluocinolone acetonide body	3	QL
fluocinolone acetonide external	3	QL
fluocinolone acetonide scalp	3	QL
fluocinonide emulsified base	3	QL
fluocinonide external cream 0.05 %	3	QL
fluocinonide external gel	3	QL
fluocinonide external ointment	3	QL
fluocinonide external solution	3	QL
flurandrenolide external lotion	4	ST; QL
fluticasone propionate external cream	2	
fluticasone propionate external ointment	2	
halobetasol propionate external cream	3	QL
halobetasol propionate external ointment	3	QL
hydrocortisone butyrate external cream	4	QL
hydrocortisone butyrate external ointment	4	
hydrocortisone butyrate external solution	4	
hydrocortisone external cream 2.5 %	2	
hydrocortisone external lotion 2.5 %	2	

KEY: **7D** 7 day limit
MME Morphine milligram equivalent
PA Prior authorization required

QL Quantity limit
SP Specialty medication
ST Step therapy

Drug name	Drug tier	Notes
hydrocortisone external ointment 1 %, 2.5 %	2	
hydrocortisone oral	2	
hydrocortisone valerate	3	QL
methylprednisolone oral	2	
mometasone furoate external	2	
PANDEL	4	
prednisolone oral solution	2	
prednisolone oral tablet	3	
prednisolone sodium phosphate oral solution	2	
prednisolone sodium phosphate oral tablet dispersible	4	
prednisone intensol	3	
prednisone oral solution	3	
prednisone oral tablet	2	
prednisone oral tablet therapy pack	2	
TEXACORT	3	
triamcinolone acetonide external cream	2	QL
triamcinolone acetonide external lotion	2	
triamcinolone acetonide external ointment 0.025 %, 0.1 %, 0.5 %	2	
triderm	2	QL
Hormonal agents, stimulant/replacement/modifying (pituitary)		
cabergoline	2	
desmopressin ace spray refrig	3	
desmopressin acetate injection	4	
desmopressin acetate oral	2	
desmopressin acetate pf	4	
desmopressin acetate spray	3	
FOLLISTIM AQ	5	PA; SP
INCRELEX	5	PA; QL; SP
MENOPUR	5	PA; SP
OMNITROPE	4	PA; QL; SP
PREGNYL	4	PA
Selective estrogen receptor modifying agents		
CLOMID	3	PA
Hormonal agents, stimulant/replacement/modifying (prostaglandins)		
MIFEPREX	3	
mifepristone oral tablet 200 mg	2	
PREPIDIL	4	
Hormonal agents, stimulant/replacement/modifying (sex hormones/modifiers)		
Androgens		
ANDRODERM	3	PA; QL
danazol oral	3	
methyltestosterone oral	4	
testosterone cypionate intramuscular	2	PA

Drug name	Drug tier	Notes
testosterone enanthate intramuscular	2	PA
testosterone transdermal gel 1.62 %, 20.25 mg/act (1.62%), 50 mg/5gm (1%)	3	PA; QL
Estrogens		
afirmelle	1	
altavera	1	
alyacen 1/35	1	
alyacen 7/7/7	1	
amethyst	1	
ANNOVERA	1	QL
apri	1	
aranelle	1	
ashlyna	1	
aubra eq	1	
aurovela 1.5/30	1	
aurovela 1/20	1	
aurovela 24 fe	1	
aurovela fe 1.5/30	1	
aurovela fe 1/20	1	
aviane	1	
ayuna	1	
azurette	1	
balziva	1	
BIJUVA ORAL CAPSULE 0.5-100 MG	4	
blisovi 24 fe	1	
blisovi fe 1.5/30	1	
blisovi fe 1/20	1	
briellyn	1	
camrese	1	
camrese lo	1	
charlotte 24 fe	1	
chateal eq	1	
CLIMARA PRO	4	QL
cryselle-28	1	
cyred eq	1	
dasetta 1/35	1	
dasetta 7/7/7	1	
daysee	1	
delyla	1	
desogestrel-ethinyl estradiol	1	
dolishale	1	
dotti	3	QL
drospiren-eth estrad-levomefol	1	
drospirenone-ethinyl estradiol	1	
elinest	1	
eluryng	1	
enilloring	1	
enpresse-28	1	
enskyce	1	
estarylla	1	

KEY: **7D** 7 day limit
MME Morphine milligram equivalent
PA Prior authorization required

QL Quantity limit
SP Specialty medication
ST Step therapy

Drug name	Drug tier	Notes
estradiol oral	2	
estradiol transdermal patch twice weekly	3	QL
estradiol transdermal patch weekly	2	QL
estradiol vaginal cream	3	
estradiol vaginal tablet	3	QL
estradiol valerate intramuscular	2	
estradiol-norethindrone acet	3	
ESTRING	3	QL
ethynodiol diac-eth estradiol	1	
etonogestrel-ethinyl estradiol	1	
falmina	1	
finzala	1	
fyavolv	3	
gemmily	1	
hailey 1.5/30	1	
hailey 24 fe	1	
hailey fe 1.5/30	1	
hailey fe 1/20	1	
haloette	1	
iclevia	1	
introvale	1	
isibloom	1	
jaimiess	1	
jasmiel	1	
jinteli	3	
jolessa	1	
joyeaux	1	
juleber	1	
junel 1.5/30	1	
junel 1/20	1	
junel fe 1.5/30	1	
junel fe 1/20	1	
junel fe 24	1	
kaitlib fe	1	
kalliga	1	
kariva	1	
kelnor 1/35	1	
kelnor 1/50	1	
kurvelo	1	
larin 1.5/30	1	
larin 1/20	1	
larin 24 fe	1	
larin fe 1.5/30	1	
larin fe 1/20	1	
layolis fe	1	
leena	1	
lessina	1	
levonest	1	
levonorgest-eth est & eth est	1	
levonorgest-eth estrad 91-day	1	
levonorgest-eth estradiol-iron	1	

Drug name	Drug tier	Notes
levonorgestrel-ethinyl estrad	1	
levonorg-eth estrad triphasic	1	
levora 0.15/30 (28)	1	
LO LOESTRIN FE	1	
lojaimiess	1	
loryna	1	
low-ogestrel	1	
lo-zumandimine	1	
lutera	1	
lyllana	3	QL
marlissa	1	
merzee	1	
mibelas 24 fe	1	
microgestin 1.5/30	1	
microgestin 1/20	1	
microgestin 24 fe oral tablet 1-20 mg-mcg	1	
microgestin fe 1.5/30	1	
microgestin fe 1/20	1	
mili	1	
mimvey	3	
mono-lynyah	1	
NATAZIA	1	
necon 0.5/35 (28)	1	
NEXTSTELLIS	1	
nikki	1	
norelgestromin-eth estradiol	1	
norethin ace-eth estrad-fe	1	
norethindrone acet-ethinyl est	1	
norethindrone-eth estradiol	3	
norethindron-ethinyl estrad-fe	1	
norethin-eth estradiol-fe	1	
norgestimate-eth estradiol	1	
norgestimate-ethinyl estradiol triphasic	1	
nortrel 0.5/35 (28)	1	
nortrel 1/35 (21)	1	
nortrel 1/35 (28)	1	
nortrel 7/7/7	1	
nylia 1/35	1	
nylia 7/7/7	1	
nymyo oral tablet 0.25-35 mg-mcg	1	
ocella	1	
philith	1	
pimtrea	1	
portia-28	1	
PREMARIN VAGINAL	4	
reclipsen	1	
rivelsa	1	
setlakin	1	
simliya	1	
simpesse	1	

KEY: **7D** 7 day limit
MME Morphine milligram equivalent
PA Prior authorization required

QL Quantity limit
SP Specialty medication
ST Step therapy

Drug name	Drug tier	Notes
sprintec 28	1	
sronyx	1	
syeda	1	
tarina 24 fe	1	
tarina fe 1/20 eq	1	
taysofy	1	
tilia fe	1	
tri-estarylla	1	
tri-legest fe	1	
tri-linyah	1	
tri-lo-estarylla	1	
tri-lo-marzia	1	
tri-lo-mili	1	
tri-lo-sprintec	1	
tri-mili	1	
tri-nymyo oral tablet 0.18/0.215/0.25 mg-35 mcg	1	
tri-sprintec	1	
trivora (28)	1	
tri-vylibra	1	
tri-vylibra lo	1	
turqoz	1	
TWIRLA	1	
TYBLUME	1	
tydemy	1	
velivet	1	
vestura	1	
vienva	1	
viorele	1	
volnea	1	
vyfemla	1	
vylibra	1	
wera	1	
wymzya fe	1	
xulane	1	
yuvaferm	3	QL
zafemy	1	
zovia 1/35 (28)	1	
zumandimine	1	
Progestins		
aftera	1	
camila	1	
curae	1	
deblitane	1	
DEPO-SUBQ PROVERA 104	1	QL; Available under pharmacy or medical benefit
econtra one-step	1	
ELLA	1	QL
emzahh	1	
errin	1	
heather	1	

Drug name	Drug tier	Notes
her style	1	
incassia	1	
jencycla	1	
KYLEENA	1	Available under pharmacy or medical benefit
levonorgestrel	1	
LILETTA (52 MG)	1	Available under pharmacy or medical benefit
lyleq	1	
lyza	1	
medroxyprogesterone acetate intramuscular suspension	1	QL; Available under pharmacy or medical benefit
medroxyprogesterone acetate intramuscular suspension prefilled syringe	1	Available under pharmacy or medical benefit
medroxyprogesterone acetate oral	2	
megestrol acetate oral suspension 40 mg/ml	2	
megestrol acetate oral suspension 625 mg/5ml	4	
megestrol acetate oral tablet	2	
MIRENA (52 MG)	1	Available under pharmacy or medical benefit
my choice	1	
my way	1	
new day	1	
NEXPLANON	1	QL; Available under pharmacy or medical benefit
nora-be	1	
norethindrone acetate oral	2	
norethindrone oral	1	
norlyroc	1	
opcicon one-step	1	
OPILL	1	
option 2	1	
PLAN B ONE-STEP	1	
progesterone intramuscular	2	
progesterone oral	2	
react	1	
sharobel	1	
SKYLA	1	Available under pharmacy or medical benefit
take action	1	
Selective estrogen receptor modifying agents		
OSPHENA	4	PA; QL

KEY: **7D** 7 day limit
MME Morphine milligram equivalent
PA Prior authorization required

QL Quantity limit
SP Specialty medication
ST Step therapy

Drug name	Drug tier	Notes
raloxifene hcl	2	QL; \$0 Copay for members 35 years and older once your healthcare provider confirms use is for breast cancer prevention.
Hormonal agents, stimulant/replacement/modifying (thyroid)		
ARMOUR THYROID	4	
euthyrox	2	
levo-t	2	
levothyroxine sodium oral tablet	2	
levoxyl	2	
liothyronine sodium oral	2	
NIVA THYROID	4	
np thyroid	4	
SYNTHROID	3	
THYQUIDITY	4	PA
thyroid oral	4	
TIROSINT-SOL	4	PA
unithroid	2	
Hormonal agents, suppressant (adrenal)		
LYSODREN	4	
Hormonal agents, suppressant (pituitary)		
ELIGARD	5	PA; SP
fyremadel	5	PA; SP
ganirelix acetate	5	PA; SP
leuprolide acetate injection	5	PA; SP
octreotide acetate	4	PA; SP
ORLISSA	4	PA; QL
SIGNIFOR	5	PA; QL; SP
SOMAVERT	5	PA; QL; SP
SYNAREL	3	
Hormonal agents, suppressant (thyroid)		
Antithyroid agents		
methimazole oral	2	
propylthiouracil oral	2	
Immunological agents		
Angioedema agents		
HAEGARDA	5	PA; QL; SP
icatibant acetate	4	PA; QL; SP
sajazir	4	PA; QL; SP
Immune suppressants		
ADALIMUMAB-ADAZ	5	PA; QL; SP
ADALIMUMAB-ADBIM (2 PEN)	5	PA; QL; SP
ADALIMUMAB-ADBIM (2 SYRINGE)	5	PA; QL; SP
ADALIMUMAB-ADBIM(CD/UC/HS STRT)	5	PA; SP
ADALIMUMAB-ADBIM(PS/UV STARTER)	5	PA; SP
AMJEVITA FOR NUVAILA	5	PA; SP

Drug name	Drug tier	Notes
AMJEVITA SUBCUTANEOUS SOLUTION AUTO-INJECTOR 40 MG/0.4ML, 80 MG/0.8ML	5	PA; QL; SP
AMJEVITA SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 40 MG/0.4ML	5	PA; QL; SP
AMJEVITA-PED 15KG TO <30KG SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 20 MG/0.2ML	5	PA; QL; SP
azathioprine oral tablet 50 mg	2	
CIMZIA	5	PA; QL; SP
CIMZIA (2 SYRINGE)	5	PA; QL; SP
CIMZIA STARTER KIT	5	PA; QL; SP
cyclosporine modified	2	
cyclosporine oral	3	
gengraf	3	
HADLIMA	5	PA; QL; SP
HADLIMA PUSH TOUCH	5	PA; QL; SP
HUMIRA (2 PEN)	5	PA; QL; SP
HUMIRA (2 SYRINGE)	5	PA; QL; SP
HUMIRA-CD/UC/HS STARTER	5	PA; SP
HUMIRA-PSORIASIS/UEVIT STARTER	5	PA; QL; SP
methotrexate sodium	2	
methotrexate sodium (pf)	2	
mycophenolate mofetil oral capsule	3	
mycophenolate mofetil oral suspension reconstituted	4	
mycophenolate mofetil oral tablet	3	
mycophenolate sodium	4	
mycophenolic acid	4	
OLUMIANT	5	PA; QL; SP
SIMPONI	5	PA; QL; SP
sirolimus oral solution	5	
sirolimus oral tablet	4	
SKYRIZI PEN	5	PA; QL; SP
SKYRIZI SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	5	PA; QL; SP
tacrolimus oral	2	
TALTZ	5	PA; SP
XELJANZ	5	PA; QL; SP
XELJANZ XR	5	PA; QL; SP
Immunomodulators		
ACTEMRA ACTPEN	5	PA; QL; SP
ACTEMRA SUBCUTANEOUS	5	PA; QL; SP
ACTIMMUNE	5	PA; QL; SP
BEYFORTUS	1	QL; \$0 copay for members 19 months of age or younger.
leflunomide oral	2	
OTEZLA	5	PA; QL; SP
RINVOQ	5	PA; QL; SP
RINVOQ LQ	5	PA; QL; SP

KEY: **7D** 7 day limit
MME Morphine milligram equivalent
PA Prior authorization required

QL Quantity limit
SP Specialty medication
ST Step therapy

Drug name	Drug tier	Notes
XOLAIR SUBCUTANEOUS SOLUTION AUTO-INJECTOR	5	PA; QL
XOLAIR SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 150 MG/ML, 75 MG/0.5ML	5	PA; QL; SP
XOLAIR SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 300 MG/2ML	5	PA; QL
Vaccines		
ABRYVO	1	QL
ACTHIB	1	QL
ADACEL	1	QL
AFLURIA	1	QL; \$0 copay for members 6 months of age or older.
AFLURIA PRESERVATIVE FREE	1	QL; \$0 copay for members 6 months of age or older.
AREXVY	1	QL; \$0 Copay for members 60 years of age or older.
BEXSERO	1	QL; \$0 copay for members 10 years of age or older.
BOOSTRIX	1	QL
BOOSTRIX INTRAMUSCULAR SUSPENSION 5-2.5-18.5 LF-MCG/0.5	1	QL
CAPVAXIVE	1	QL; \$0 copay for members 19 years of age or older.
COMIRNATY	1	QL; \$0 copay for members 12 years of age or older.
COMIRNATY INTRAMUSCULAR SUSPENSION 30 MCG/0.3ML	1	QL; \$0 copay for members 12 years of age or older.
DAPTACEL	1	QL
DENGVAXIA	1	QL; \$0 copay for members between ages of 9 to 16 years.
ENGERIX-B	1	QL
FLUAD	1	QL; \$0 copay for members 65 years of age or older.
FLUARIX	1	QL; \$0 copay for members 6 months of age or older.

Drug name	Drug tier	Notes
FLUCELVAX INTRAMUSCULAR SUSPENSION PREFILLED SYRINGE	1	QL; \$0 copay for members 6 months of age or older.
FLULAVAL	1	QL; \$0 copay for members 6 months of age or older.
FLUMIST	1	QL; \$0 copay for members between ages of 2 to 49 years.
FLUMIST QUADRIVALENT NASAL SUSPENSION	1	QL; \$0 copay for members between ages of 2 to 49 years.
FLUZONE HIGH-DOSE	1	QL; \$0 copay for members 65 years of age or older.
FLUZONE INTRAMUSCULAR SUSPENSION PREFILLED SYRINGE	1	QL; \$0 copay for members 6 months of age or older.
GARDASIL 9	1	QL; \$0 copay for members between ages of 9 to 45 years.
HAVRIX	1	QL
HEPLISAV-B	1	QL; \$0 copay for members 18 years of age or older.
HIBERIX	1	QL
INFANRIX	1	QL
IPOL	1	QL
MENQUADFI	1	QL
MENVEO	1	QL
M-M-R II	1	QL
PEDIARIX	1	QL; \$0 copay for members 6 years of age or younger.
PEDVAX HIB	1	QL
PENBRAYA	1	QL; \$0 copay for members between ages of 10 to 25 years.
PENTACEL	1	QL; \$0 copay for members 4 years of age or younger.
PFIZER COVID-19 VAC-TRIS 5-11Y	1	QL; \$0 copay for members between ages of 5 to 11 years.

KEY: **7D** 7 day limit
MME Morphine milligram equivalent
PA Prior authorization required

QL Quantity limit
SP Specialty medication
ST Step therapy

Drug name	Drug tier	Notes
PFIZER COVID-19 VAC-TRIS 6M-4Y	1	QL; \$0 copay for members between ages of 6 months to 4 years.
PNEUMOVAX 23	1	QL
PREHEVBRIO	1	QL; \$0 copay for members 18 years of age or older.
PREVNAR 20	1	QL; \$0 copay for members 1 month of age or older.
PRIORIX	1	QL
PROQUAD	1	QL; \$0 copay for members between ages of 1 to 12 years.
QUADRACEL INTRAMUSCULAR SUSPENSION	1	QL
RECOMBIVAX HB	1	QL
ROTARIX	1	QL; \$0 copay for members 8 months of age or younger.
ROTATEQ	1	QL; \$0 copay for members 8 months of age or younger.
SHINGRIX	1	QL; \$0 Copay for members 19 years of age or older.
SPIKEVAX	1	QL; \$0 copay for members 12 years of age or older.
TDVAX	1	QL
TENIVAC	1	QL
TETANUS-DIPHTHERIA TOXOIDS TD	1	QL
TRUMENBA	1	QL; \$0 copay for members 10 years of age or older.
TWINRIX	1	QL
VAQTA	1	QL
VARIVAX	1	QL
VAXELIS	1	QL; \$0 copay for members 4 years of age or younger.
VAXNEUVANCE	1	QL; \$0 copay for members 1 month of age or older.
Inflammatory bowel disease agents		
Aminosalicylates		
balsalazide disodium	3	

Drug name	Drug tier	Notes
DIPENTUM	4	
mesalamine er oral capsule 0.375 gm	3	QL
mesalamine oral tablet delayed release 1.2 gm	3	QL
mesalamine rectal	4	QL
mesalamine-cleanser	4	QL
Glucocorticoids		
ANALPRAM-HC EXTERNAL LOTION	4	
budesonide oral	4	
budesonide rectal	3	
CORTIFOAM	3	
hydrocortisone (perianal) external cream 2.5 %	2	
hydrocortisone ace-pramoxine external cream 1-1 %	3	
hydrocortisone rectal	3	
PROCTOFOAM HC	3	
procto-med hc	2	
proctosol hc	2	
proctozone-hc	2	
Sulfonamides		
sulfasalazine oral	2	
Metabolic bone disease agents		
alendronate sodium oral solution	3	
alendronate sodium oral tablet 10 mg, 35 mg, 70 mg	2	QL
calcitonin (salmon) nasal	2	QL
calcitriol oral capsule	2	
calcitriol oral solution	3	
cinacalcet hcl	3	PA; QL
doxercalciferol oral	4	
ibandronate sodium oral	2	QL
paricalcitol oral	3	
risedronate sodium oral tablet	3	QL
TYMLOS	5	PA; QL; SP
Miscellaneous therapeutic agents		
ADVOCATE INSULIN PEN NEEDLE	1	
AEROCHAMBER HOLDING CHAMBER	2	QL
AEROCHAMBER PLS FLOVU MTH-PIECE	2	QL
AEROCHAMBER PLUS FLO-VU INTERM	2	QL
AEROCHAMBER PLUS FLO-VU LARGE DEVICE	2	QL
AEROCHAMBER PLUS FLO-VU MEDIUM DEVICE	2	QL
AEROCHAMBER PLUS FLO-VU SMALL DEVICE	2	QL
ALCOHOL PREP PADS PAD , 70 %	3	
AQ INSULIN SYRINGE	1	
AQINJECT PEN NEEDLE	1	

KEY: **7D** 7 day limit
MME Morphine milligram equivalent
PA Prior authorization required

QL Quantity limit
SP Specialty medication
ST Step therapy

Drug name	Drug tier	Notes
ASSURE ID DUO PRO PEN NEEDLES	1	
ASSURE ID PRO PEN NEEDLES	1	
AUM ALCOHOL PREP PADS	3	
AUM INSULIN SAFETY PEN NEEDLE	1	
AUM MINI INSULIN PEN NEEDLE	1	
AUM PEN NEEDLE	1	
AUM READYGARD DUO PEN NEEDLE	1	
AUM SAFETY PEN NEEDLE	1	
BD AUTOSHIELD DUO PEN NEEDLES	1	
BD SHARPS COLLECTOR	3	
BD ULTRA-FINE INSULIN SYRINGES	1	
BD ULTRA-FINE PEN NEEDLES	1	
BREATHE COMFORT CHAMBER/ADULT	2	QL
BREATHE COMFORT CHAMBER/CHILD	2	QL
CAYA	1	
COMFORT EZ PRO PEN NEEDLES	1	
CONDOMS	1	QL
DROPSAFE ALCOHOL PREP	3	
DROPSAFE SAFETY SYRINGE/NEEDLE	1	
DUREX EXTRA SENSITIVE THIN	1	QL
DUREX TROPICAL	1	QL
EASIVENT	2	QL
EASY COMFORT SHARPS CONTAINER	3	
EMBRACE PEN NEEDLES 30G X 5 MM, 30G X 8 MM, 31G X 6 MM, 31G X 8 MM, 32G X 4 MM	1	
ergoloid mesylates oral	4	
FC2 FEMALE CONDOM	1	QL
FEMCAP	1	
FLEXICHAMBER	2	QL
FLEXICHAMBER ADULT MASK/SMALL	2	QL
FLEXICHAMBER CHILD MASK/LARGE	2	QL
FLEXICHAMBER CHILD MASK/SMALL	2	QL
INSPIREASE RESERVOIR BAGS	2	QL
INSULIN PEN NEEDLES 29G X 12.7MM, 29G X 12MM, 29G X 5MM, 29G X 8MM, 30G X 5 MM, 30G X 8 MM, 31G X 4 MM, 31G X 5 MM, 31G X 6 MM, 31G X 8 MM, 32G X 4 MM, 32G X 5 MM, 32G X 6 MM, 32G X 8 MM, 33G X 4 MM, 33G X 5 MM, 33G X 6 MM	1	

Drug name	Drug tier	Notes
INSULIN SYRINGES 27G X 1/2" 0.5 ML, 27G X 1/2" 1 ML, 28G X 1/2" 0.5 ML, 28G X 1/2" 1 ML, 29G X 1/2" 0.5 ML, 29G X 1/2" 1 ML, 30G X 1/2" 0.3 ML, 30G X 1/2" 0.5 ML, 30G X 1/2" 1 ML, 30G X 5/16" 0.3 ML, 30G X 5/16" 0.5 ML, 30G X 5/16" 1 ML, 31G X 15/64" 0.3 ML, 31G X 15/64" 0.5 ML, 31G X 15/64" 1 ML, 31G X 5/16" 0.3 ML, 31G X 5/16" 0.5 ML, 31G X 5/16" 1 ML, 32G X 5/16" 1 ML	1	
methergine	4	QL
methylergonovine maleate oral	4	QL
NOVOFINE PEN NEEDLE	1	
NOVOFINE PLUS PEN NEEDLE	1	
OMNIPOD 5 G6 INTRO (GEN 5)	4	PA; QL
OMNIPOD 5 G6 PODS (GEN 5)	4	PA; QL
PARAGARD INTRAUTERINE COPPER	1	Available under pharmacy or medical benefit
PARI VORTEX ADULT MASK	2	QL
PHEXXI	1	QL
PURE COMFORT SAFETY PEN NEEDLE	1	
RADIOGARDASE	5	
RAYA SURE PEN NEEDLE	1	
SAFETY PEN NEEDLES	1	
SHARPS COLLECTOR	3	
SHARPS CONTAINER	3	
TRUE COVER	1	QL
UNIFINE PROTECT PEN NEEDLE	1	
VERIFINE INSULIN PEN NEEDLE	1	
VERIFINE INSULIN SYRINGE	1	
VERIFINE PLUS PEN NEEDLE	1	
VERIFINE SHARPS CONTAINER	3	
VORTEX VALVED HOLDING CHAMBER	2	QL
WIDE-SEAL DIAPHRAGM 60	1	
WIDE-SEAL DIAPHRAGM 65	1	
WIDE-SEAL DIAPHRAGM 70	1	
WIDE-SEAL DIAPHRAGM 75	1	
WIDE-SEAL DIAPHRAGM 80	1	
WIDE-SEAL DIAPHRAGM 85	1	
WIDE-SEAL DIAPHRAGM 90	1	
WIDE-SEAL DIAPHRAGM 95	1	
Ophthalmic agents		
Aminoglycosides		
gentamicin sulfate ophthalmic	2	
neomycin-polymyxin-gramicidin	2	
TOBRADEX	4	
tobramycin ophthalmic	2	
tobramycin-dexamethasone	3	
TOBREX	4	
Antibacterials, other		

KEY: **7D** 7 day limit
MME Morphine milligram equivalent
PA Prior authorization required

QL Quantity limit
SP Specialty medication
ST Step therapy

Drug name	Drug tier	Notes
bacitracin ophthalmic	3	
bacitracin-polymyxin b	2	
bacitra-neomycin-polymyxin-hc	3	
BETADINE OPHTHALMIC PREP	4	
neomycin-bacitracin zn-polymyx	2	
neomycin-polymyxin-dexameth ophthalmic ointment	2	
neomycin-polymyxin-dexameth ophthalmic suspension 3.5-10000-0.1	2	
neomycin-polymyxin-hc ophthalmic	3	
neo-polycin	2	
neo-polycin hc	3	
polycin	2	
polymyxin b-trimethoprim	2	
Anti-cytomegalovirus (CMV) agents		
ZIRGAN	4	
Antifungals		
NATACYN	4	
Antiherpetic agents		
trifluridine	3	
Macrolides		
AZASITE	4	
erythromycin ophthalmic	2	\$0 Copay once your healthcare provider confirms use is to prevent gonococcal ophthalmia neonatorum in newborns.
Ophthalmic agents, other		
AKTEN	4	
ALTACAINE	2	
atropine sulfate ophthalmic solution 1 %	2	
cyclopentolate hcl ophthalmic	2	
cyclosporine ophthalmic	4	PA; QL
MITOSOL	4	
proparacaine hcl ophthalmic	2	
sulfacetamide-prednisolone	2	
tetracaine hcl ophthalmic	2	
ZYLET	4	
Ophthalmic anti-allergy agents		
ALOCRIAL	4	
ALOMIDE	4	
altafrin	2	
azelastine hcl ophthalmic	2	
bepotastine besilate	4	QL
cromolyn sodium ophthalmic	2	
CYCLOMYDRIL	4	
epinastine hcl	2	ST; QL

Drug name	Drug tier	Notes
olopatadine hcl ophthalmic solution 0.1 %	2	QL
phenylephrine hcl ophthalmic	2	
Ophthalmic antiglaucoma agents		
apraclonidine hcl	2	
betaxolol hcl ophthalmic	2	
BETIMOL	3	QL
BETOPTIC-S	4	
brimonidine tartrate ophthalmic solution 0.15 %, 0.2 %	2	QL
brimonidine tartrate-timolol	3	QL
brinzolamide	3	QL
carteolol hcl	2	
dorzolamide hcl ophthalmic	2	
dorzolamide hcl-timolol mal	2	QL
dorzolamide hcl-timolol mal pf	3	QL
IOPIDINE	4	
levobunolol hcl	2	
PHOSPHOLINE IODIDE	3	
pilocarpine hcl ophthalmic	2	
SIMBRINZA	4	QL
timolol maleate (once-daily)	2	
timolol maleate ophthalmic gel forming solution	3	
timolol maleate ophthalmic solution	2	
timolol maleate pf	3	
Ophthalmic anti-inflammatories		
bromfenac sodium (once-daily)	3	QL
dexamethasone sodium phosphate ophthalmic	2	
diclofenac sodium ophthalmic	2	
difluprednate	4	
fluorometholone	2	
flurbiprofen sodium	2	
INVELTYS	4	QL
ketorolac tromethamine ophthalmic	2	
LOTEMAX OPHTHALMIC OINTMENT	4	
LOTEMAX SM	4	QL
loteprednol etabonate ophthalmic suspension 0.5 %	4	QL
prednisolone acetate ophthalmic	2	
prednisolone sodium phosphate ophthalmic	2	
Ophthalmic prostaglandin and prostamide analogs		
latanoprost ophthalmic	2	
LUMIGAN	3	QL
tafluprost (pf)	4	ST; QL
travoprost (bak free)	3	QL
XELPROS	4	QL
Quinolones		
BESIVANCE	4	

KEY: **7D** 7 day limit
MME Morphine milligram equivalent
PA Prior authorization required

QL Quantity limit
SP Specialty medication
ST Step therapy

Drug name	Drug tier	Notes
CILOXAN	4	
ciprofloxacin hcl ophthalmic	2	
gatifloxacin ophthalmic	3	
levofloxacin ophthalmic	2	
moxifloxacin hcl (2x day)	2	
moxifloxacin hcl ophthalmic	2	
ofloxacin ophthalmic	2	
Sulfonamides		
sulfacetamide sodium ophthalmic	2	
Otic agents		
acetic acid otic	2	
ciprofloxacin hcl otic	3	
ciprofloxacin-dexamethasone	4	ST
CIPROFLOXACIN-FLUOCINOLONE PF	4	
CORTISPORIN-TC	4	
flac	3	
fluocinolone acetonide otic	3	
hydrocortisone-acetic acid	3	
neomycin-polymyxin-hc otic	2	
ofloxacin otic	2	
OTOVEL	4	
Respiratory tract/pulmonary agents		
Antihistamines		
azelastine hcl nasal solution 0.1 %, 137 mcg/spray	2	QL
carbinoxamine maleate oral solution	2	
carbinoxamine maleate oral tablet 4 mg	2	
clemastine fumarate oral tablet	2	
cyproheptadine hcl oral	2	
desloratadine oral tablet	3	
diphenhydramine hcl oral elixir	2	
levocetirizine dihydrochloride oral solution	3	
levocetirizine dihydrochloride oral tablet	2	QL
olopatadine hcl nasal	3	QL
promethazine vc	2	
promethazine-phenylephrine	2	
Anti-inflammatories, inhaled corticosteroids		
ALVESCO	4	ST; QL
ARNUITY ELLIPTA	3	QL
ASMANEX (120 METERED DOSES)	3	QL
ASMANEX (14 METERED DOSES)	3	QL
ASMANEX (30 METERED DOSES)	3	QL
ASMANEX (60 METERED DOSES)	3	QL
ASMANEX HFA	3	QL
BEVESPI AEROSPHERE	3	QL
breyna	4	QL
budesonide inhalation	3	QL

Drug name	Drug tier	Notes
budesonide-formoterol fumarate	4	QL
flunisolide nasal	3	
fluticasone propionate nasal	2	QL
fluticasone-salmeterol inhalation aerosol powder breath activated 100-50 mcg/act, 250-50 mcg/act, 500-50 mcg/act	3	QL
FLUTICASONE-SALMETEROL INHALATION AEROSOL POWDER BREATH ACTIVATED 113-14 MCG/ACT, 232-14 MCG/ACT, 55-14 MCG/ACT	3	QL
QVAR REDIHALER	3	QL
wixela inhub	3	QL
Antileukotrienes		
montelukast sodium oral	2	QL
zafirlukast	3	QL
zileuton er	4	ST
Bronchodilators, anticholinergic		
ATROVENT HFA	4	QL
INCRUSE ELLIPTA	3	QL
ipratropium bromide inhalation	2	
ipratropium bromide nasal	2	
SPIRIVA HANDIHALER	3	QL
SPIRIVA RESPIMAT	3	QL
tiotropium bromide monohydrate	3	QL
Bronchodilators, sympathomimetic		
albuterol sulfate hfa aerosol solution 108 (90 base) mcg/act inhalation	1	
ALBUTEROL SULFATE HFA AEROSOL SOLUTION 108 (90 BASE) MCG/ACT INHALATION	1	
albuterol sulfate inhalation	1	
albuterol sulfate oral	3	
arformoterol tartrate	4	QL
epinephrine injection solution auto-injector	1	QL
formoterol fumarate inhalation	4	QL
levalbuterol hcl inhalation	3	QL
STRIVERDI RESPIMAT	3	QL
terbutaline sulfate oral	4	
VENTOLIN HFA	1	
Cystic fibrosis agents		
ORKAMBI	5	PA; QL; SP
PULMOZYME	5	PA; QL; SP
tobramycin nebulization solution 300 mg/5ml inhalation	5	PA; QL; SP
TOBRAMYCIN NEBULIZATION SOLUTION 300 MG/5ML INHALATION	5	PA; QL; SP
Mast cell stabilizers		
cromolyn sodium inhalation	3	
Phosphodiesterase inhibitors, airways disease		
elixophyllin	3	

KEY: **7D** 7 day limit
MME Morphine milligram equivalent
PA Prior authorization required

QL Quantity limit
SP Specialty medication
ST Step therapy

Drug name	Drug tier	Notes
roflumilast	4	PA; QL
THEO-24	4	
theophylline er	2	
theophylline oral	3	
Pulmonary antihypertensives		
ADEMPAS	5	PA; QL; SP
alyq	5	PA; QL; SP
ambrisentan	5	PA; QL; SP
bosentan	5	PA; QL; SP
OPSUMIT	5	PA; QL; SP
ORENITRAM	5	PA; QL; SP
ORENITRAM MONTH 1	5	PA; QL; SP
ORENITRAM MONTH 2	5	PA; QL; SP
ORENITRAM MONTH 3	5	PA; QL; SP
sildenafil citrate oral suspension reconstituted	5	PA; QL; SP
sildenafil citrate oral tablet 20 mg	4	PA; QL; SP
tadalafil (pah)	5	PA; QL; SP
TYVASO	5	PA; QL; SP
TYVASO DPI INSTITUTIONAL KIT	5	PA; QL; SP
TYVASO DPI MAINTENANCE KIT	5	PA; QL; SP
TYVASO DPI TITRATION KIT	5	PA; QL; SP
TYVASO REFILL KIT	5	PA; QL; SP
TYVASO STARTER KIT	5	PA; QL; SP
UPTRAVID ORAL	5	PA; QL; SP
UPTRAVID TITRATION	5	PA; QL; SP
VENTAVIS	5	PA; QL; SP
Pulmonary fibrosis agents		
OFEV	5	PA; QL; SP
pirfenidone	4	PA; QL; SP
Respiratory tract agents, other		
acetylcysteine inhalation	2	
benzonatate oral capsule 100 mg, 200 mg	2	
BREZTRI AEROSPHERE	3	QL
guaifenesin-codeine	2	PA; QL
hydrocodone bit-homatrop mbr	2	PA; QL
hydromet	2	PA; QL
HYPERSAL	3	
ipratropium-albuterol	2	
maxi-tuss ac	2	PA; QL
mometasone furoate nasal	3	QL
NEBUSAL	3	
promethazine-codeine oral solution	2	PA; QL
promethazine-dm	2	
pseudoephedrine-bromphen-dm	2	
PULMOSAL	3	
sodium chloride inhalation	2	
STIOLTO RESPIMAT	3	QL
TRELEGY ELLIPTA	3	QL
Skeletal muscle relaxants		

Drug name	Drug tier	Notes
baclofen oral tablet 10 mg, 20 mg, 5 mg	2	
carisoprodol oral tablet 350 mg	2	QL
chlorzoxazone oral tablet 500 mg	3	
cyclobenzaprine hcl oral	2	
dantrolene sodium oral	3	
metaxalone	3	
methocarbamol oral tablet 500 mg, 750 mg	2	
orphenadrine citrate er	2	
tizanidine hcl oral capsule	3	
tizanidine hcl oral tablet	2	
Sleep disorder agents		
GABA receptor modulators		
eszopiclone	2	QL
flurazepam hcl	2	QL
temazepam	2	QL
triazolam	2	QL
zaleplon	2	QL
zolpidem tartrate er	3	QL
zolpidem tartrate oral tablet	2	QL
Sleep disorders, other		
BELSOMRA	4	ST; QL
doxepin hcl oral tablet	2	QL
ramelteon	4	ST; QL
tasimelteon	5	PA; QL; SP
Wakefulness promoting agents		
armodafinil	3	PA; QL
modafinil oral	2	PA; QL
SODIUM OXYBATE	5	PA; QL; SP
SUNOSI	4	PA; QL

KEY: **7D** 7 day limit
MME Morphine milligram equivalent
PA Prior authorization required

QL Quantity limit
SP Specialty medication
ST Step therapy

Index

abacavir sulfate-lamivudine.....	16	AEROCHAMBER PLUS FLO-VU SMALL DEVICE	31	amitriptyline hcl oral.....	13
abacavir sulfate oral solution.....	16	afirmelle.....	26	AMJEVITA-PED 15KG TO <30KG SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 20 MG/0.2ML...	29
abacavir sulfate oral tablet.....	16	AFLURIA.....	30	AMJEVITA SUBCUTANEOUS SOLUTION AUTO-INJECTOR 40 MG/0.4ML, 80 MG/0.8ML	29
abiraterone acetate.....	14	AFLURIA PRESERVATIVE FREE	30	AMJEVITA SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 40 MG/0.4ML.....	29
ABRYSVO.....	30	aftera.....	28	amlodipine besylate-benazepril hcl... 20	
acamprosate calcium.....	10	AIMOVIG SUBCUTANEOUS SOLUTION AUTO-INJECTOR 140 MG/ML, 70 MG/ML	13	amlodipine besylate oral	20
acarbose oral.....	18	AKTEN	33	amlodipine besylate-valsartan	20
ACCU-CHEK AVIVA DEVICE	17	ALA SCALP	25	ammonium lactate external cream ...	22
ACCU-CHEK AVIVA PLUS TEST STRIPS	17	albendazole oral	15	amnestem	22
ACCU-CHEK FASTCLIX LANCET KIT ...	17	albuterol sulfate hfa aerosol solution 108 (90 base) mcg/act inhalation....	34	amoxapine	13
ACCU-CHEK GUIDE CONTROL	17	ALBUTEROL SULFATE HFA AEROSOL SOLUTION 108 (90 BASE) MCG/ACT INHALATION	34	amoxicill-clarithro-lansopraz.....	23
ACCU-CHEK GUIDE KIT W/DEVICE ...	17	albuterol sulfate inhalation.....	34	amoxicillin.....	11
ACCU-CHEK GUIDE TEST STRIPS	17	albuterol sulfate oral.....	34	amoxicillin-potassium clavulanate	11
ACCU-CHEK SMARTVIEW CONTROL ..	17	alclometasone dipropionate	25	amphetamine-dextroamphetamine... 21	
ACCU-CHEK SMARTVIEW TEST STRIPS	17	ALCOHOL PREP PADS PAD , 70 %	31	amphetamine-dextroamphetamine er21	
ACCU-CHEK SOFTCLIX LANCET DEVICE KIT	17	ALECENSA	15	amphetamine sulfate.....	21
accutane	22	alendronate sodium oral solution	31	ampicillin.....	11
acebutolol hcl oral	20	alendronate sodium oral tablet 10 mg, 35 mg, 70 mg.....	31	anagrelide hcl.....	19
acetaminophen-codeine	10	alfuzosin hcl er	25	ANALPRAM-HC EXTERNAL LOTION ...	31
acetazolamide er	20	ALINIA ORAL SUSPENSION RECONSTITUTED 100 MG/5ML	15	anastrozole oral.....	14
acetazolamide oral	20	allopurinol oral tablet 100 mg, 300 mg	13	ANDRODERM	26
acetic acid otic.....	34	almotriptan malate	14	ANNOVERA.....	26
acetylcysteine inhalation.....	35	ALOCRIAL	33	ANZEMET	13
acitretin	22	ALOMIDE.....	33	apap-caff-dihydrocodeine	10
ACTEMRA ACTPEN.....	29	alosectron hcl.....	23	APEXICON E	25
ACTEMRA SUBCUTANEOUS	29	alprazolam er	17	apomorphine hcl subcutaneous	15
ACTHIB	30	alprazolam intensol.....	17	apraclonidine hcl	33
ACTIMMUNE	29	alprazolam oral tablet	17	aprepitant.....	13
acyclovir external ointment	16	alprazolam oral tablet dispersible....	17	apri	26
acyclovir oral.....	16	alprazolam xr.....	17	APTIOM	12
ADACEL	30	ALTACAINE.....	33	APTIVUS.....	17
ADALIMUMAB-ADAZ	29	altafrin	33	AQINJECT PEN NEEDLE.....	31
ADALIMUMAB-ADBM (2 PEN)	29	altavera.....	26	AQ INSULIN SYRINGE	31
ADALIMUMAB-ADBM (2 SYRINGE)....	29	ALVESCO	34	aranelle.....	26
ADALIMUMAB-ADBM(CD/UC/HS STRT).....	29	alvimopan.....	23	ARANESP (ALBUMIN FREE)	19
ADALIMUMAB-ADBM(PS/UV STARTER).....	29	alyacen 1/35	26	AREXVY.....	30
adapalene external cream.....	22	alyacen 7/7/7.....	26	arformoterol tartrate	34
adapalene external gel	22	alyq	35	aripiprazole oral solution	16
adefovir dipivoxil.....	16	amantadine hcl oral.....	15	aripiprazole oral tablet.....	16
ADEMPAS	35	ambrisenan	35	armodafinil.....	35
ADVOCATE INSULIN PEN NEEDLE....	31	amcinonide	25	ARMOUR THYROID	29
AEROCHAMBER HOLDING CHAMBER	31	amethyst	26	ARNUNITY ELLIPTA	34
AEROCHAMBER PLS FLOVU MTHPIECE	31	amiloride hcl oral	20	ascomp-codeine.....	10
AEROCHAMBER PLUS FLO-VU INTERM	31	amiloride-hydrochlorothiazide.....	20	asenapine maleate	16
AEROCHAMBER PLUS FLO-VU LARGE DEVICE.....	31	aminocaproic acid oral	19	ashlyna	26
AEROCHAMBER PLUS FLO-VU MEDIUM DEVICE	31	amiodarone hcl oral	19	ASMANEX (14 METERED DOSES).....	34

ASMANEX (60 METERED DOSES)	34	azelastine hcl nasal solution 0.1 %, 137 mcg/spray	34	bisacodyl ec	23
ASMANEX (120 METERED DOSES)	34	azelastine hcl ophthalmic	33	bisacodyl oral	23
ASMANEX HFA	34	azithromycin oral	11	bisoprolol fumarate oral	20
aspirin 81 oral tablet delayed release	9	azurette	26	bisoprolol-hydrochlorothiazide	20
aspirin adult low dose	9	bac	10	blisovi 24 fe	26
aspirin adult low strength	9	bacitracin ophthalmic	33	blisovi fe 1.5/30	26
aspirin childrens	9	bacitracin-polymyxin b	33	blisovi fe 1/20	26
aspirin-dipyridamole er	19	bacitra-neomycin-polymyxin-hc	33	BOOSTRIX	30
aspirin ec adult low dose	9	baclofen oral tablet 10 mg, 20 mg, 5 mg	35	BOOSTRIX INTRAMUSCULAR SUSPENSION 5-2.5-18.5 LF-MCG/0.5	30
aspirin ec low dose	9	balsalazide disodium	31	bosentan	35
aspirin ec low strength	9	balziva	26	BOSULIF	15
aspirin low dose	9	BAQSIMI ONE PACK	18	BREATHE COMFORT CHAMBER/ADULT	32
aspirin oral tablet chewable	9	BAQSIMI TWO PACK	18	BREATHE COMFORT CHAMBER/CHILD	32
aspirin oral tablet delayed release 81 mg	9	BARACLUDGE ORAL SOLUTION	16	breyana	34
aspirin regimen	9	BASAGLAR KWIKPEN	18	BREZTRI AEROSPHERE	35
ASSURE ID DUO PRO PEN NEEDLES	32	BAXDELA ORAL	11	briellyn	26
ASSURE ID PRO PEN NEEDLES	32	BD AUTOSHIELD DUO PEN NEEDLES	32	BRILINTA	19
ATABEX OB	23	BD SHARPS COLLECTOR	32	brimonidine tartrate external	22
atazanavir sulfate	17	BD ULTRA-FINE INSULIN SYRINGES	32	brimonidine tartrate ophthalmic solution 0.15 %, 0.2 %	33
atenolol-chlorthalidone	20	BD ULTRA-FINE PEN NEEDLES	32	brimonidine tartrate-timolol	33
atenolol oral	20	BELSOMRA	35	brinzolamide	33
atomoxetine hcl	21	benazepril hcl oral	19	bromfenac sodium (once-daily)	33
atorvastatin calcium oral tablet 10 mg, 20 mg	21	benazepril-hydrochlorothiazide	20	bromocriptine mesylate oral capsule	15
atorvastatin calcium oral tablet 40 mg, 80 mg	21	BENZNIDAZOLE	15	bromocriptine mesylate oral tablet	15
atovaquone	15	benzonatate oral capsule 100 mg, 200 mg	35	budesonide-formoterol fumarate	34
atovaquone-proguanil hcl	15	benzoyl peroxide-erythromycin	22	budesonide inhalation	34
atropine sulfate ophthalmic solution 1 %	33	benztropine mesylate oral	15	budesonide oral	31
ATROVENT HFA	34	bepotastine besilate	33	budesonide rectal	31
aubra eq	26	BESIVANCE	33	bumetanide oral	20
AUM ALCOHOL PREP PADS	32	BETADINE OPHTHALMIC PREP	33	buprenorphine hcl-naloxone hcl	10
AUM INSULIN SAFETY PEN NEEDLE	32	betaine	25	buprenorphine hcl sublingual	10
AUM MINI INSULIN PEN NEEDLE	32	betamethasone dipropionate aug	25	bupropion hcl er (smoking det)	10
AUM PEN NEEDLE	32	betamethasone dipropionate external	25	bupropion hcl er (sr)	12
AUM READYGARD DUO PEN NEEDLE	32	betamethasone valerate external cream	25	bupropion hcl er (xl) oral tablet extended release 24 hour 150 mg, 300 mg	12
AUM SAFETY PEN NEEDLE	32	betamethasone valerate external lotion	25	bupropion hcl oral	12
aurovela 1.5/30	26	betamethasone valerate external ointment	25	buspirone hcl oral	17
aurovela 1/20	26	BETASERON	22	butalbital-acetaminophen oral tablet	10
aurovela 24 fe	26	betaxolol hcl ophthalmic	33	butalbital-apap-caff-cod	10
aurovela fe 1.5/30	26	betaxolol hcl oral	20	butalbital-apap-caffeine oral capsule	10
aurovela fe 1/20	26	bethanechol chloride oral	25	butalbital-apap-caffeine oral tablet	10
AURYXIA	23	BETIMOL	33	butalbital-asa-caff-codeine	10
AUSTEDO	22	BETOPTIC-S	33	butalbital-aspirin-caffeine	10
AUTOLET LANCING DEVICE	17	BEVESPI AEROSPHERE	34	BYDUREON BCISE AUTOINJECTOR	18
aviane	26	bexarotene external	15	cabergoline	26
avidoxy	11	bexarotene oral	15	CABOMETYX	15
AVONEX PEN	22	BEXSERO	30	caffeine citrate oral	22
AVONEX PREFILLED	22	BEYFORTUS	29	calcipotriene-betameth diprop	22
ayuna	26	bicalutamide	14	calcipotriene external cream	22
AZASITE	33	BIJUVA ORAL CAPSULE 0.5-100 MG	26	calcipotriene external ointment	22
azathioprine oral tablet 50 mg	29	BIKTARVY	16	calcipotriene external solution	22
azelaic acid external	22				

calcitonin (salmon) nasal.....	31	cephalexin oral suspension reconstituted	11	clindamycin palmitate hcl.....	11
calcitriol external	22	cevimeline hcl.....	22	clindamycin phos-benzoyl perox external gel 1.2-5 %	22
calcitriol oral capsule	31	charlotte 24 fe	26	clindamycin phosphate external gel ..	22
calcitriol oral solution.....	31	chateal eq.....	26	clindamycin phosphate external lotion	22
calcium acetate oral tablet 667 mg...	23	CHEMET.....	23	clindamycin phosphate external solution.....	22
calcium acetate (phos binder)	23	CHEMSTRIP K	17	clindamycin phosphate external swab	22
CALQUENCE	15	CHEMSTRIP MICRAL	17	clindamycin phosphate vaginal	11
camila	28	CHEMSTRIP UGK.....	17	clobazam.....	12
camrese	26	chlordiazepoxide-amitriptyline	12	clobetasol propionate e	25
camrese lo	26	chlordiazepoxide hcl.....	17	clobetasol propionate external cream	25
candesartan cilexetil.....	19	chlorhexidine gluconate mouth/ throat.....	22	clobetasol propionate external gel....	25
candesartan cilexetil-hctz.....	20	chloroquine phosphate oral.....	15	clobetasol propionate external ointment.....	25
capecitabine.....	14	chlorpromazine hcl oral tablet	16	clobetasol propionate external solution.....	25
CAPRELSA.....	15	chlorthalidone	20	clocortolone pivalate	25
captopril-hydrochlorothiazide	20	chlorzoxazone oral tablet 500 mg	35	CLOMID	26
captopril oral.....	19	cholestyramine light.....	21	clomipramine hcl oral	13
CAPVAXIVE.....	30	cholestyramine oral.....	21	clonazepam oral tablet.....	17
carbamazepine er.....	12	CHOSEN LANCETS 30G	17	clonazepam oral tablet dispersible	17
carbamazepine oral suspension 100 mg/5ml.....	12	CHOSEN LANCING DEVICE.....	17	clonidine	19
carbamazepine oral tablet	12	CHOSEN SAFETY LANCETS 28G	17	clonidine hcl er oral tablet extended release 12 hour	21
carbamazepine oral tablet chewable ..	12	ciclodan	13	clonidine hcl oral.....	19
carbidopa-levodopa-entacapone.....	15	ciclopirox external	13	clopidogrel bisulfate oral.....	19
carbidopa-levodopa er	16	ciclopirox olamine external.....	13	clorazepate dipotassium	17
carbidopa-levodopa oral tablet.....	16	cilostazol	19	clotrimazole-betamethasone external cream	13
carbidopa-levodopa oral tablet dispersible	16	CILOXAN	34	clotrimazole-betamethasone external lotion	13
carbidopa oral	16	cimetidine hcl.....	23	clotrimazole mouth/throat.....	13
carbinoxamine maleate oral solution .	34	cimetidine oral.....	23	clozapine oral tablet.....	16
carbinoxamine maleate oral tablet 4 mg.....	34	CIMZIA	29	clozapine oral tablet dispersible	16
CARDURA XL.....	25	CIMZIA (2 SYRINGE).....	29	codeine sulfate	10
CARESENS LANCETS 30G.....	17	CIMZIA STARTER KIT	29	colchicine oral tablet	13
CARETOUCH LANCING/EJECTOR.....	17	cinacalcet hcl	31	colchicine-probenecid	13
carglumic acid	22	ciprofloxacin-dexamethasone	34	colesevelam hcl.....	21
carisoprodol oral tablet 350 mg.....	35	CIPROFLOXACIN-FLUCINOLONE PF34		colestipol hcl oral granules	21
carteolol hcl.....	33	ciprofloxacin hcl ophthalmic.....	34	colestipol hcl oral packet.....	21
cartia xt	20	ciprofloxacin hcl oral	11	colestipol hcl oral tablet.....	21
carvedilol.....	20	ciprofloxacin hcl otic	34	COMETRIQ.....	15
CAYA.....	32	citalopram hydrobromide oral solution	12	COMFORT EZ PRO PEN NEEDLES.....	32
cefaclor er.....	11	citalopram hydrobromide oral tablet .	12	COMFORT TOUCH TWIST LANCET 30G.....	18
cefaclor oral capsule.....	11	citroma.....	23	COMIRNATY	30
cefadroxil oral capsule.....	11	claravis	22	COMIRNATY INTRAMUSCULAR SUSPENSION 30 MCG/0.3ML	30
cefadroxil oral suspension reconstituted	11	clarithromycin er.....	11	COMPLERA	16
cefadroxil oral tablet.....	11	clarithromycin oral suspension reconstituted	11	CONDOMS	32
cefdinir	11	clarithromycin oral tablet	11	constulose	24
cefixime oral capsule	11	clearlax.....	23	CONTOUR CONTROL IN VITRO LIQUID LOW , NORMAL.....	18
cefixime oral suspension reconstituted	11	clemastine fumarate oral tablet.....	34	CORDRAN	25
cefepodoxime proxetil.....	11	CLENPIQ.....	24	CORLANOR	20
cefprozil.....	11	CLEVER CHOICE COMFORT EZ.....	18	CORTIFOAM	31
cefuroxime axetil	11	CLIMARA PRO.....	26		
celecoxib oral	9	CLINDACIN ETZ EXTERNAL KIT.....	22		
cephalexin oral capsule 250 mg, 500 mg.....	11	clindacin etz external swab.....	22		
		clindacin-p	22		
		clindamycin hcl oral	11		

CORTISPORIN-TC.....	34	desogestrel-ethinyl estradiol.....	26	diltiazem hcl er oral capsule extended release 12 hour.....	20
COTELLIC.....	15	desonide external cream.....	25	diltiazem hcl er oral capsule extended release 24 hour.....	20
CREON.....	25	desonide external lotion.....	25	diltiazem hcl er oral tablet extended release 24 hour.....	20
cromolyn sodium inhalation.....	34	desonide external ointment.....	25	diltiazem hcl oral.....	20
cromolyn sodium ophthalmic.....	33	desoximetasone external.....	25	dilt-xr.....	20
cromolyn sodium oral.....	23	desvenlafaxine succinate er.....	12	dimethyl fumarate oral.....	22
CROTAN.....	15	dexamethasone intensol.....	25	dimethyl fumarate starter pack.....	22
cryselle-28.....	26	dexamethasone oral elixir.....	25	DIPENTUM.....	31
curae.....	28	dexamethasone oral solution.....	25	diphenhydramine hcl oral elixir.....	34
CVS KETONE CARE.....	18	dexamethasone oral tablet.....	25	diphenoxylate-atropine oral liquid.....	23
cyanocobalamin injection solution 1000 mcg/ml.....	23	dexamethasone sodium phosphate ophthalmic.....	33	diphenoxylate-atropine oral tablet.....	23
CYANOCOBALAMIN INJECTION SOLUTION 2000 MCG/ML.....	23	DEXCOM G6 RECEIVER.....	18	dipyridamole oral.....	19
cyclobenzaprine hcl oral.....	35	DEXCOM G6 SENSOR.....	18	disopyramide phosphate.....	19
CYCLOMYDRIL.....	33	DEXCOM G6 TRANSMITTER.....	18	disulfiram oral.....	10
cyclopentolate hcl ophthalmic.....	33	DEXCOM G7 RECEIVER.....	18	DIURIL.....	20
cyclophosphamide oral capsule.....	14	DEXCOM G7 SENSOR.....	18	divalproex sodium er.....	17
CYCLOPHOSPHAMIDE ORAL TABLET.....	14	dexlansoprazole.....	24	divalproex sodium oral.....	17
cycloserine oral.....	14	dexmethylphenidate hcl.....	21	DODEX.....	23
cyclosporine modified.....	29	dexmethylphenidate hcl er.....	21	dofetilide.....	19
cyclosporine ophthalmic.....	33	dextroamphetamine sulfate er.....	21	dolishale.....	26
cyclosporine oral.....	29	dextroamphetamine sulfate oral solution.....	21	donepezil hcl oral tablet 10 mg, 5 mg.....	12
cyproheptadine hcl oral.....	34	dextroamphetamine sulfate oral tablet 10 mg, 5 mg.....	21	donepezil hcl oral tablet dispersible.....	12
cyred eq.....	26	DIACOMIT.....	12	dorzolamide hcl ophthalmic.....	33
CYSTAGON.....	25	DIASTIX REAGENT.....	18	dorzolamide hcl-timolol mal.....	33
dabigatran etexilate mesylate oral capsule 150 mg, 75 mg.....	19	diazepam intensol.....	17	dorzolamide hcl-timolol mal pf.....	33
dalfampridine er.....	22	diazepam oral concentrate.....	17	dotti.....	26
danazol oral.....	26	diazepam oral solution.....	17	DOVATO.....	16
dantrolene sodium oral.....	35	diazepam oral tablet.....	17	doxazosin mesylate oral.....	19
dapsone oral.....	14	diazepam rectal.....	12	doxepin hcl external.....	22
DAPTACEL.....	30	diazoxide oral.....	18	doxepin hcl oral capsule.....	13
darifenacin hydrobromide er.....	25	diclofenac-misoprostol.....	9	doxepin hcl oral concentrate.....	13
darunavir.....	17	diclofenac potassium oral tablet 50 mg.....	9	doxepin hcl oral tablet.....	35
dasetta 1/35.....	26	diclofenac sodium er.....	9	doxercalciferol oral.....	31
dasetta 7/7/7.....	26	diclofenac sodium external gel 1 %.....	9	doxycycline hyclate oral capsule.....	11
DAYBUE.....	22	diclofenac sodium external gel 3 %.....	14	doxycycline hyclate oral tablet 100 mg, 20 mg.....	11
daysee.....	26	diclofenac sodium ophthalmic.....	33	doxycycline monohydrate oral capsule 100 mg, 50 mg.....	11
deblitane.....	28	diclofenac sodium oral.....	9	doxycycline monohydrate oral suspension reconstituted.....	11
deferasirox granules.....	23	dicloxacillin sodium.....	11	doxycycline monohydrate oral tablet.....	11
deferasirox oral packet.....	23	dicyclomine hcl oral capsule.....	23	dronabinol.....	13
deferasirox oral tablet.....	23	dicyclomine hcl oral solution.....	23	DROPSAFE ALCOHOL PREP.....	32
deferasirox oral tablet soluble.....	23	dicyclomine hcl oral tablet.....	23	DROPSAFE SAFETY SYRINGE/NEEDLE.....	32
delyla.....	26	diflorasone diacetate external cream.....	25	drospiren-eth estrad-levomefol.....	26
demeclocycline hcl.....	11	diflunisal oral.....	9	drospirenone-ethinyl estradiol.....	26
DENGVAXIA.....	30	difluprednate.....	33	DROXIA.....	14
DEPO-SUBQ PROVERA 104.....	28	digoxin oral solution.....	20	duloxetine hcl oral capsule delayed release particles 20 mg, 30 mg, 60 mg.....	12
desipramine hcl oral.....	13	digoxin oral tablet 62.5 mcg.....	20	DUOPA.....	16
desloratadine oral tablet.....	34	digoxin oral tablet 125 mcg, 250 mcg.....	20	DUPIXENT.....	22
desmopressin ace spray refrig.....	26	dihydroergotamine mesylate injection.....	14	DUREX EXTRA SENSITIVE THIN.....	32
desmopressin acetate injection.....	26	DILANTIN ORAL CAPSULE 30 MG.....	12	DUREX TROPICAL.....	32
desmopressin acetate oral.....	26	diltiazem hcl er beads.....	20		
desmopressin acetate pf.....	26	diltiazem hcl er coated beads.....	20		
desmopressin acetate spray.....	26				

dutasteride oral.....	25	epinephrine injection solution auto-injector.....	34	falmina.....	27
dutasteride-tamsulosin hcl.....	25	epitol.....	12	famciclovir oral.....	16
EASIVENT.....	32	eplerenone.....	20	famotidine oral suspension reconstituted.....	23
EASY COMFORT SHARPS CONTAINER.....	32	EQUETRO.....	17	famotidine oral tablet 20 mg, 40 mg..	23
ec-naproxen.....	9	ergocalciferol oral capsule.....	23	FARXIGA.....	18
econazole nitrate external.....	13	ergoloid mesylates oral.....	32	FC2 FEMALE CONDOM.....	32
econtra one-step.....	28	ERGOMAR.....	14	febuxostat.....	13
EDARBI.....	19	ergotamine-caffeine.....	14	felbamate.....	12
EDARBYCLOR.....	20	ERLEADA.....	14	felodipine er.....	20
EDURANT.....	16	erlotinib hcl.....	15	FEMCAP.....	32
efavirenz.....	16	errin.....	28	fenofibrate micronized oral capsule 134 mg, 200 mg, 67 mg.....	20
efavirenz-emtricitab-tenofo df.....	16	ery pad 2%.....	22	fenofibrate oral capsule 134 mg, 200 mg, 67 mg.....	20
efavirenz-lamivudine-tenofovir oral tablet 400-300-300 mg.....	16	erythromycin base oral capsule delayed release particles.....	11	fenofibrate oral tablet 145 mg, 160 mg, 48 mg, 54 mg.....	21
efavirenz-lamivudine-tenofovir oral tablet 600-300-300 mg.....	16	erythromycin base oral tablet.....	11	fenopropfen calcium oral tablet.....	9
EFFER-K ORAL TABLET		erythromycin base oral tablet delayed release.....	11	fenofibrate oral tablet 145 mg, 160 mg, 48 mg, 54 mg.....	21
EFFERVESCENT 10 MEQ, 20 MEQ.....	22	erythromycin ethylsuccinate oral.....	11	fenopropfen calcium oral tablet.....	9
effer-k oral tablet effervescent 25 meq.....	22	erythromycin external.....	22	fenofibrate oral tablet 145 mg, 160 mg, 48 mg, 54 mg.....	21
eletriptan hydrobromide.....	14	erythromycin ophthalmic.....	33	fenofibrate oral tablet 145 mg, 160 mg, 48 mg, 54 mg.....	21
ELIGARD.....	29	erythromycin oral.....	11	fenofibrate oral tablet 145 mg, 160 mg, 48 mg, 54 mg.....	21
elinest.....	26	escitalopram oxalate oral solution.....	12	fenofibrate oral tablet 145 mg, 160 mg, 48 mg, 54 mg.....	21
ELIQUIS.....	19	escitalopram oxalate oral tablet.....	12	fenofibrate oral tablet 145 mg, 160 mg, 48 mg, 54 mg.....	21
ELIQUIS DVT/PE STARTER PACK.....	19	ESKATA.....	22	fenofibrate oral tablet 145 mg, 160 mg, 48 mg, 54 mg.....	21
elixophyllin.....	34	esomeprazole magnesium oral capsule delayed release.....	24	fenofibrate oral tablet 145 mg, 160 mg, 48 mg, 54 mg.....	21
ELLA.....	28	estarylla.....	26	fenofibrate oral tablet 145 mg, 160 mg, 48 mg, 54 mg.....	21
ELMIRON.....	25	estazolam.....	17	fenofibrate oral tablet 145 mg, 160 mg, 48 mg, 54 mg.....	21
eluryng.....	26	estradiol-norethindrone acet.....	27	fenofibrate oral tablet 145 mg, 160 mg, 48 mg, 54 mg.....	21
EMBRACE PEN NEEDLES 30G X 5 MM , 30G X 8 MM , 31G X 6 MM , 31G X 8 MM , 32G X 4 MM.....	32	estradiol oral.....	27	fenofibrate oral tablet 145 mg, 160 mg, 48 mg, 54 mg.....	21
EMCYT.....	14	estradiol transdermal patch twice weekly.....	27	fenofibrate oral tablet 145 mg, 160 mg, 48 mg, 54 mg.....	21
EMEND ORAL SUSPENSION RECONSTITUTED.....	13	estradiol transdermal patch weekly... ..	27	fenofibrate oral tablet 145 mg, 160 mg, 48 mg, 54 mg.....	21
EMGALITY.....	13	estradiol vaginal cream.....	27	fenofibrate oral tablet 145 mg, 160 mg, 48 mg, 54 mg.....	21
emtricitabine.....	16	estradiol vaginal tablet.....	27	fenofibrate oral tablet 145 mg, 160 mg, 48 mg, 54 mg.....	21
emtricitabine-tenofovir df oral tablet 100-150 mg, 133-200 mg, 167-250 mg.....	16	estradiol valerate intramuscular.....	27	fenofibrate oral tablet 145 mg, 160 mg, 48 mg, 54 mg.....	21
emtricitabine-tenofovir df oral tablet 200-300 mg.....	17	ESTRING.....	27	fenofibrate oral tablet 145 mg, 160 mg, 48 mg, 54 mg.....	21
emzahn.....	28	eszopiclone.....	35	fenofibrate oral tablet 145 mg, 160 mg, 48 mg, 54 mg.....	21
enalapril-hydrochlorothiazide.....	20	ethacrynic acid.....	20	fenofibrate oral tablet 145 mg, 160 mg, 48 mg, 54 mg.....	21
enalapril maleate oral tablet.....	19	ethambutol hcl oral.....	14	fenofibrate oral tablet 145 mg, 160 mg, 48 mg, 54 mg.....	21
ENCARE.....	25	ethosuximide oral.....	12	fenofibrate oral tablet 145 mg, 160 mg, 48 mg, 54 mg.....	21
endocet.....	10	ethynodiol diac-eth estradiol.....	27	fenofibrate oral tablet 145 mg, 160 mg, 48 mg, 54 mg.....	21
ENGERIX-B.....	30	etodolac.....	9	fenofibrate oral tablet 145 mg, 160 mg, 48 mg, 54 mg.....	21
enilloring.....	26	etodolac er.....	9	fenofibrate oral tablet 145 mg, 160 mg, 48 mg, 54 mg.....	21
enoxaparin sodium.....	19	etonogestrel-ethinyl estradiol.....	27	fenofibrate oral tablet 145 mg, 160 mg, 48 mg, 54 mg.....	21
enpresse-28.....	26	etoposide oral.....	15	fenofibrate oral tablet 145 mg, 160 mg, 48 mg, 54 mg.....	21
enskyce.....	26	etravirine.....	16	fenofibrate oral tablet 145 mg, 160 mg, 48 mg, 54 mg.....	21
entacapone.....	15	euthyrox.....	29	fenofibrate oral tablet 145 mg, 160 mg, 48 mg, 54 mg.....	21
entecavir.....	16	everolimus oral tablet 10 mg, 2.5 mg, 5 mg, 7.5 mg.....	15	fenofibrate oral tablet 145 mg, 160 mg, 48 mg, 54 mg.....	21
ENTRESTO.....	20	EVOTAZ.....	17	fenofibrate oral tablet 145 mg, 160 mg, 48 mg, 54 mg.....	21
enulose.....	24	EXELDERM.....	13	fenofibrate oral tablet 145 mg, 160 mg, 48 mg, 54 mg.....	21
epinastine hcl.....	33	exemestane.....	15	fenofibrate oral tablet 145 mg, 160 mg, 48 mg, 54 mg.....	21
		ezetimibe.....	21	fenofibrate oral tablet 145 mg, 160 mg, 48 mg, 54 mg.....	21
		ezetimibe-simvastatin.....	21	fenofibrate oral tablet 145 mg, 160 mg, 48 mg, 54 mg.....	21

fluorometholone.....	33	ft aspirin oral tablet chewable.....	9	glycopyrrolate oral tablet 1 mg, 2 mg .	23
fluorouracil external cream.....	14	ft clearlax.....	24	glydo.....	10
fluorouracil external solution.....	14	ft folic acid.....	23	goodsense aspirin low dose.....	9
fluoxetine hcl oral capsule.....	12	ft laxative.....	24	goodsense nicotine mouth/throat	
fluoxetine hcl oral capsule delayed		ft magnesium citrate.....	24	gum 2 mg.....	10
release.....	12	ft nicotine.....	10	goodsense nicotine mouth/throat	
fluoxetine hcl oral solution.....	12	ft nicotine mini.....	10	lozenge 4 mg.....	10
fluoxetine hcl oral tablet 10 mg, 20 mg	12	furosemide oral.....	20	granisetron hcl oral.....	13
fluoxetine hcl (pmdd).....	12	FUZEON.....	17	griseofulvin microsize oral.....	13
fluphenazine hcl oral.....	16	fyavolv.....	27	griseofulvin ultramicrosize.....	13
flurandrenolide external lotion.....	25	FYCOMPA ORAL SUSPENSION.....	12	guaifenesin-codeine.....	35
flurazepam hcl.....	35	fyremadel.....	29	guanfacine hcl.....	19
flurbiprofen oral tablet 100 mg.....	9	gabapentin oral capsule.....	12	guanfacine hcl er.....	21
flurbiprofen sodium.....	33	gabapentin oral solution 250 mg/5ml	12	GVOKE HYPOPEN 1-PACK.....	18
fluticasone propionate external cream	25	gabapentin oral tablet 600 mg, 800		GVOKE HYPOPEN 2-PACK.....	18
fluticasone propionate external		mg.....	12	GVOKE KIT.....	18
ointment.....	25	galantamine hydrobromide er.....	12	GVOKE PFS.....	18
fluticasone propionate nasal.....	34	galantamine hydrobromide oral		GYNAZOLE-1.....	13
fluticasone-salmeterol inhalation		solution.....	12	habitrol.....	10
aerosol powder breath activated		galantamine hydrobromide oral tablet	12	HADLIMA.....	29
100-50 mcg/act, 250-50 mcg/act,		GALZIN.....	22	HADLIMA PUSH TOUCH.....	29
500-50 mcg/act.....	34	ganirelix acetate.....	29	HAEGARDA.....	29
FLUTICASONE-SALMETEROL		GARDASIL 9.....	30	hailey 1.5/30.....	27
INHALATION AEROSOL POWDER		gatifloxacin ophthalmic.....	34	hailey 24 fe.....	27
BREATH ACTIVATED 113-14 MCG/		gavilax oral powder.....	24	hailey fe 1.5/30.....	27
ACT, 232-14 MCG/ACT, 55-14 MCG/		gavilyte-c.....	24	hailey fe 1/20.....	27
ACT.....	34	gavilyte-g.....	24	halobetasol propionate external	
fluvastatin sodium.....	21	gavilyte-n with flavor pack.....	24	cream.....	25
fluvoxamine maleate.....	12	gefitinib.....	15	halobetasol propionate external	
fluvoxamine maleate er.....	12	gemfibrozil oral.....	21	ointment.....	25
FLUZONE HIGH-DOSE.....	30	gemmily.....	27	haloette.....	27
FLUZONE INTRAMUSCULAR		generlac.....	24	haloperidol lactate oral concentrate	
SUSPENSION PREFILLED SYRINGE...	30	gengraf.....	29	2 mg/ml.....	16
folic acid oral tablet 1 mg.....	23	gentamicin sulfate external.....	11	haloperidol oral.....	16
folic acid oral tablet 400 mcg, 800		gentamicin sulfate ophthalmic.....	32	HAVRIX.....	30
mcg.....	23	gentlelax.....	24	heather.....	28
FOLLISTIM AQ.....	26	gentle laxative oral tablet delayed		heparin sodium (porcine).....	19
fondaparinux sodium.....	19	release.....	24	heparin sodium (porcine) pf.....	19
FORA TEST N'GO ADV-VOICE-6 CON .	18	GENVOYA.....	16	HEPLISAV-B.....	30
formoterol fumarate inhalation.....	34	glatiramer acetate.....	22	her style.....	28
fosamprenavir calcium.....	17	glatopa.....	22	HIBERIX.....	30
fosfomycin tromethamine.....	11	GLEOSTINE.....	14	HUMALOG.....	18
fosinopril sodium.....	19	glimepiride oral tablet 1 mg, 2 mg, 4		HUMALOG KWIKPEN.....	18
fosinopril sodium-hctz.....	20	mg.....	18	HUMALOG MIX 50/50 KWIKPEN.....	18
FOSRENOL ORAL PACKET.....	23	glipizide er.....	18	HUMALOG MIX 50/50 VIAL.....	19
FRAGMIN.....	19	glipizide ir.....	18	HUMALOG MIX 75/25 KWIKPEN.....	19
FREESTYLE LIBRE 2 READER.....	18	glipizide-metformin hcl.....	18	HUMALOG MIX 75/25 VIAL.....	19
FREESTYLE LIBRE 2 SENSOR.....	18	glipizide xl.....	18	HUMALOG U-100 JUNIOR KWIKPEN...	19
FREESTYLE LIBRE 3 READER.....	18	glucagon emergency kit.....	18	HUMATIN.....	11
FREESTYLE LIBRE 3 SENSOR.....	18	GLUCAGON EMERGENCY KIT.....	18	HUMIRA (2 PEN).....	29
FREESTYLE LIBRE 14 DAY READER....	18	GLUCO TO GO.....	18	HUMIRA (2 SYRINGE).....	29
FREESTYLE LIBRE 14 DAY SENSOR....	18	glyburide-metformin.....	18	HUMIRA-CD/UC/HS STARTER.....	29
FREESTYLE LIBRE READER.....	18	glyburide micronized.....	18	HUMIRA-PSORIASIS/UEVIT STARTER.	29
FRESKARO MAGNESIUM CITRATE....	24	glyburide oral.....	18	HUMULIN 70/30 KWIKPEN.....	19
ft acid reducer oral capsule delayed		glycolax.....	24	HUMULIN 70/30 VIAL.....	19
release 15 mg.....	24			HUMULIN N KWIKPEN.....	19
ft aspirin low dose.....	9				

HUMULIN N VIAL	19	imiquimod external cream 5 %	22	ivabradine hcl	20
HUMULIN R U-500 KWIKPEN	19	incassia	28	ivermectin external cream	22
HUMULIN R U-500 VIAL	19	INCRELEX	26	ivermectin oral	15
HUMULIN R VIAL	19	INCRUSE ELLIPTA	34	jaimiess	27
HYCAMTIN ORAL	15	indapamide	20	JAKAFI	15
hydralazine hcl oral	21	indomethacin er	9	jantoven	19
hydrochlorothiazide oral	20	indomethacin oral capsule	9	JARDIANCE	18
hydrocodone-acetaminophen oral solution 7.5-325 mg/15ml	10	INFANRIX	30	jasmiel	27
hydrocodone-acetaminophen oral tablet 10-325 mg, 5-325 mg, 7.5-325 mg	10	INGREZZA	22	jencycla	28
hydrocodone bitartrate er oral capsule extended release 12 hour	9	INLYTA	15	JENTADUETO	18
hydrocodone bit-homatrop mbr	35	INSPIREASE RESERVOIR BAGS	32	JENTADUETO XR	18
hydrocodone-ibuprofen	10	INSULIN ASPART PROT & ASPART	19	jinteli	27
hydrocortisone ace-pramoxine external cream 1-1 %	31	INSULIN DEGLUDEC	19	jolessa	27
hydrocortisone-acetic acid	34	INSULIN DEGLUDEC FLEXTOUCH	19	joyeaux	27
hydrocortisone butyrate external cream	25	INSULIN LISPRO	19	juleber	27
hydrocortisone butyrate external ointment	25	INSULIN LISPRO (1 UNIT DIAL)	19	JULUCA	16
hydrocortisone butyrate external solution	25	INSULIN LISPRO JUNIOR KWIKPEN	19	junel 1.5/30	27
hydrocortisone external cream 2.5 %	25	INSULIN LISPRO PROT & LISPRO	19	junel 1/20	27
hydrocortisone external lotion 2.5 %	25	INSULIN PEN NEEDLES 29G X 12.7MM, 29G X 12MM, 29G X 5MM, 29G X 8MM, 30G X 5 MM, 30G X 8 MM, 31G X 4 MM, 31G X 5 MM, 31G X 6 MM, 31G X 8 MM, 32G X 4 MM, 32G X 5 MM, 32G X 6 MM, 32G X 8 MM, 33G X 4 MM, 33G X 5 MM, 33G X 6 MM	32	junel fe 1.5/30	27
hydrocortisone external ointment 1 %, 2.5 %	26	INSULIN SYRINGES 27G X 1/2" 0.5 ML, 27G X 1/2" 1 ML, 28G X 1/2" 0.5 ML, 28G X 1/2" 1 ML, 29G X 1/2" 0.5 ML, 29G X 1/2" 1 ML, 30G X 1/2" 0.3 ML, 30G X 1/2" 0.5 ML, 30G X 1/2" 1 ML, 30G X 5/16" 0.3 ML, 30G X 5/16" 0.5 ML, 30G X 5/16" 1 ML, 31G X 15/64" 0.3 ML, 31G X 15/64" 0.5 ML, 31G X 15/64" 1 ML, 31G X 5/16" 0.3 ML, 31G X 5/16" 0.5 ML, 31G X 5/16" 1 ML, 32G X 5/16" 1 ML	32	junel fe 1/20	27
hydrocortisone oral	26	INTELENCE ORAL TABLET 25 MG	16	junel fe 24	27
hydrocortisone (perianal) external cream 2.5 %	31	introvale	27	kaitlib fe	27
hydrocortisone rectal	31	INVELTYS	33	kalliga	27
hydrocortisone valerate	26	IOPIDINE	33	kariva	27
hydromet	35	IPOL	30	kelnor 1/35	27
hydromorphone hcl er	9	ipratropium-albuterol	35	kelnor 1/50	27
hydromorphone hcl oral liquid	10	ipratropium bromide inhalation	34	ketoconazole external cream	13
hydromorphone hcl oral tablet	10	ipratropium bromide nasal	34	ketoconazole external shampoo	13
hydroxychloroquine sulfate oral tablet 100 mg, 200 mg	15	irbesartan	19	ketoconazole oral	13
hydroxyurea oral	14	irbesartan-hydrochlorothiazide	20	KETO-DIASTIX	18
hydroxyzine hcl oral	17	isibloom	27	KETONE TEST	18
hydroxyzine pamoate oral	17	isoniazid oral syrup	14	ketoprofen er	9
HYPERSAL	35	isoniazid oral tablet	14	ketoprofen oral	9
ibandronate sodium oral	31	isosorb dinitrate-hydralazine	20	ketorolac tromethamine ophthalmic	33
IBRANCE	15	isosorbide dinitrate oral tablet 10 mg, 20 mg, 30 mg, 5 mg	21	ketorolac tromethamine oral	9
ibuprofen oral tablet 400 mg, 600 mg, 800 mg	9	isosorbide mononitrate	21	KETOSTIX	18
icatibant acetate	29	isosorbide mononitrate er	21	KIPROFEN	9
iclevia	27	isotretinoin oral capsule 10 mg, 20 mg, 30 mg, 40 mg	22	klayesta	13
ICLUSIG	15	isradipine	20	klor-con 10	22
icosapent ethyl	21	itraconazole oral	13	klor-con/ef	22
IDHIFA	15			klor-con m10	22
imatinib mesylate	15			klor-con m15	22
IMBRUVICA	15			klor-con m20	22
imipramine hcl oral	13			klor-con oral packet	22
imipramine pamoate	13			klor-con oral tablet extended release	22

lactulose oral packet.....	24	levonorgestrel.....	28	LYSODREN.....	29
lactulose oral solution.....	24	levonorgestrel-ethinyl estrad.....	27	lyza.....	28
LAGEVRIO.....	16	levonorg-eth estrad triphasic.....	27	mafenide acetate external.....	11
lamivudine oral solution.....	17	levora 0.15/30 (28).....	27	magnesium citrate oral solution.....	24
lamivudine oral tablet 100 mg.....	16	levorphanol tartrate oral.....	9	malathion.....	15
lamivudine oral tablet 150 mg, 300 mg	17	levo-t.....	29	maraviroc.....	17
lamivudine-zidovudine.....	17	levothyroxine sodium oral tablet.....	29	marlissa.....	27
lamotrigine oral tablet.....	12	levoxyl.....	29	MARPLAN.....	12
lamotrigine oral tablet chewable.....	12	lidocaine external patch 5 %.....	10	MATULANE.....	14
LANCETS.....	18	lidocaine hcl external solution.....	10	matzim la.....	20
LANCETS SUPER THIN.....	18	lidocaine hcl mouth/throat.....	10	MAVYRET.....	16
lansoprazole oral capsule delayed release.....	24	lidocaine hcl urethral/mucosal.....	10	maxi-tuss ac.....	35
lanthanum carbonate.....	23	lidocaine-prilocaine external cream..	10	meclizine hcl oral tablet 25 mg.....	13
lapatinib ditosylate.....	15	lidocaine viscous hcl.....	10	meclizine hcl oral tablet 50 mg.....	13
larin 1.5/30.....	27	LILETTA (52 MG).....	28	meclofenamate sodium oral.....	9
larin 1/20.....	27	linezolid oral suspension reconstituted	11	medroxyprogesterone acetate intramuscular suspension.....	28
larin 24 fe.....	27	linezolid oral tablet.....	11	medroxyprogesterone acetate intramuscular suspension prefilled syringe.....	28
larin fe 1.5/30.....	27	LINZESS.....	23	medroxyprogesterone acetate oral...	28
larin fe 1/20.....	27	liothyronine sodium oral.....	29	mefenamic acid oral.....	9
latanoprost ophthalmic.....	33	lisdexamfetamine dimesylate oral capsule.....	21	mefloquine hcl.....	15
layolis fe.....	27	lisinopril-hydrochlorothiazide.....	20	megestrol acetate oral suspension 40 mg/ml.....	28
LEDIPASVIR-SOFOSBUVIR.....	16	lisinopril oral.....	19	megestrol acetate oral suspension 625 mg/5ml.....	28
leena.....	27	lithium.....	17	megestrol acetate oral tablet.....	28
leflunomide oral.....	29	lithium carbonate er.....	17	MEKINIST.....	15
lenalidomide.....	14	lithium carbonate oral.....	17	meloxicam oral tablet.....	9
LENVIMA ORAL CAPSULE THERAPY PACK 10 & 4 MG, 10 MG, 10 MG & 2 X 4 MG, 2 X 10 MG, 2 X 10 MG & 4 MG, 2 X 4 MG, 3 X 4 MG, 4 MG.....	15	lojaimiess.....	27	memantine hcl oral solution.....	12
lessina.....	27	LOKELMA.....	23	memantine hcl oral tablet.....	12
letrozole oral.....	15	LO LOESTRIN FE.....	27	MENOPUR.....	26
leucovorin calcium oral.....	14	LONSURF.....	14	MENQUADFI.....	30
LEUKERAN.....	14	loperamide hcl oral capsule.....	23	MENVEO.....	30
LEUKINE.....	19	lopinavir-ritonavir.....	17	meprobamate.....	17
leuprolide acetate injection.....	29	lorazepam intensol.....	17	mercaptopurine oral.....	14
levabuterol hcl inhalation.....	34	lorazepam oral concentrate 2 mg/ml..	17	merzee.....	27
LEVEMIR FLEXPEN.....	19	lorazepam oral tablet.....	17	mesalamine-cleanser.....	31
LEVEMIR U-100 VIAL.....	19	LORBRENA.....	15	mesalamine er oral capsule 0.375 gm..	31
levetiracetam er.....	11	loryna.....	27	mesalamine oral tablet delayed release 1.2 gm.....	31
levetiracetam oral.....	12	losartan potassium-hctz.....	20	mesalamine rectal.....	31
levobunolol hcl.....	33	losartan potassium oral.....	19	MESNEX ORAL.....	15
levocarnitine oral solution.....	23	LOTEMAX OPHTHALMIC OINTMENT.....	33	metaxalone.....	35
levocarnitine oral tablet.....	23	LOTEMAX SM.....	33	metformin hcl er.....	18
levocarnitine sf.....	23	loteprednol etabonate ophthalmic suspension 0.5 %.....	33	metformin hcl oral solution.....	18
levocetirizine dihydrochloride oral solution.....	34	lovastatin oral.....	21	metformin hcl oral tablet 1000 mg, 500 mg, 850 mg.....	18
levocetirizine dihydrochloride oral tablet.....	34	low-ogestrel.....	27	methadone hcl intensol.....	9
levofloxacin ophthalmic.....	34	loxapine succinate.....	16	methadone hcl oral concentrate.....	9
levofloxacin oral solution.....	11	lo-zumandimine.....	27	methadone hcl oral solution.....	9
levofloxacin oral tablet.....	11	lubiprostone.....	23	methadone hcl oral tablet.....	9
levonest.....	27	LUCEMYRA.....	10	methamphetamine hcl.....	21
levonorgest-eth est & eth est.....	27	LULICONAZOLE.....	13	methazolamide oral.....	20
levonorgest-eth estrad 91-day.....	27	LUMIGAN.....	33	methenamine hippurate.....	11
levonorgest-eth estradiol-iron.....	27	lurasidone hcl.....	16		
		lutera.....	27		
		lyleq.....	28		
		lyllana.....	27		

methergine	32	MIRENA (52 MG)	28	nateglinide	18
methimazole oral	29	mirtazapine oral tablet	12	NEBUSAL	35
methocarbamol oral tablet 500 mg, 750 mg	35	mirtazapine oral tablet dispersible	12	necon 0.5/35 (28)	27
methotrexate sodium	29	misoprostol oral	24	nefazodone hcl	12
methotrexate sodium (pf)	29	MITOSOL	33	neomycin-bacitracin zn-polymyx	33
methoxsalen rapid	22	mm aspirin	9	neomycin-polymyxin-dexameth ophthalmic ointment	33
methscopolamine bromide oral	23	mm clearlax	24	neomycin-polymyxin-dexameth ophthalmic suspension 3.5-10000-0.1	33
methsuximide	12	M-M-R II	30	neomycin-polymyxin-gramicidin	32
METHYLDOPA	19	M-NATAL PLUS	23	neomycin-polymyxin-hc ophthalmic	33
methylergonovine maleate oral	32	modafinil oral	35	neomycin-polymyxin-hc otic	34
methylphenidate hcl er (cd)	21	moexipril hcl	19	neomycin sulfate oral	11
methylphenidate hcl er (la)	21	mometasone furoate external	26	NEONATAL COMPLETE	23
methylphenidate hcl er oral tablet extended release	21	mometasone furoate nasal	35	NEONATAL PLUS	23
methylphenidate hcl er (osm) oral tablet extended release 18 mg, 27 mg, 36 mg, 54 mg	21	mondoxyne nl	11	neo-polycin	33
methylphenidate hcl oral solution	21	mono-linyah	27	neo-polycin hc	33
methylphenidate hcl oral tablet	21	montelukast sodium oral	34	NEO-SYNALAR	11
methylphenidate hcl oral tablet chewable	22	morphine sulfate (concentrate)	10	NEULASTA	19
methylprednisolone oral	26	morphine sulfate er oral tablet extended release	10	NEULASTA ONPRO	19
methyltestosterone oral	26	morphine sulfate oral solution	10	nevirapine	16
metoclopramide hcl oral solution 5 mg/5ml	13	morphine sulfate oral tablet	10	nevirapine er	16
metoclopramide hcl oral tablet	13	MOUNJARO	18	new day	28
metolazone	20	moxifloxacin hcl (2x day)	34	NEXPLANON	28
metoprolol-hydrochlorothiazide	20	moxifloxacin hcl ophthalmic	34	NEXTSTELLIS	27
metoprolol succinate er	20	moxifloxacin hcl oral	11	niacin (antihyperlipidemic)	21
metoprolol tartrate oral tablet 100 mg, 25 mg, 50 mg	20	MULTAQ	19	niacin er (antihyperlipidemic)	21
metronidazole external cream	22	mupirocin calcium	11	niacor	21
metronidazole external gel 0.75 %	22	mupirocin external	11	nicardipine hcl oral	20
metronidazole external lotion	22	MYALEPT	25	NICORETTE MINI	10
metronidazole oral tablet	11	my choice	28	NICORETTE MOUTH/THROAT GUM 2 MG	10
metronidazole vaginal	11	mycophenolate mofetil oral capsule	29	NICORETTE MOUTH/THROAT LOZENGE	10
mexiletine hcl oral	19	mycophenolate mofetil oral suspension reconstituted	29	nicotine mini	10
mibelas 24 fe	27	mycophenolate mofetil oral tablet	29	nicotine polacrilex mini	10
miconazole 3	13	mycophenolate sodium	29	nicotine polacrilex mouth/throat	10
microgestin 1.5/30	27	mycophenolic acid	29	nicotine step 1	10
microgestin 1/20	27	MYLERAN	14	nicotine step 2	10
microgestin 24 fe oral tablet 1-20 mg-mcg	27	my way	28	nicotine step 3	10
microgestin fe 1.5/30	27	nabumetone oral	9	nicotine transdermal kit	10
microgestin fe 1/20	27	nadolol oral	20	nicotine transdermal patch 24 hour 21 mg/24hr	10
MICROLET NEXT LANCING DEVICE	18	naftifine hcl external cream	13	NICOTROL	10
midodrine hcl	19	naloxone hcl injection	10	NICOTROL NS	10
MIFEPREX	26	naloxone hcl nasal	10	nifedipine er	20
mifepristone oral tablet 200 mg	26	naltrexone hcl oral	10	nifedipine er osmotic release	20
MIGERGOT	14	naproxen dr	9	nifedipine oral	20
miglitol	18	naproxen oral suspension	9	nikki	27
mili	27	naproxen oral tablet	9	nilutamide	14
mimvey	27	naproxen oral tablet delayed release	9	nimodipine oral	20
minocycline hcl oral capsule	11	naproxen sodium oral tablet 275 mg, 550 mg	9	nisoldipine er	20
minoxidil oral	21	naratriptan hcl	14	nitazoxanide oral	15
		NARCAN	10	NITRO-BID	21
		na sulfate-k sulfate-mg sulf	24	NITRO-DUR TRANSDERMAL PATCH 24 HOUR 0.3 MG/HR, 0.8 MG/HR	21
		NATACYN	33		
		NATAZIA	27		

nitrofurantoin macrocrystal	11	ofloxacin otic	34	oxcarbazepine oral suspension	12
nitrofurantoin monohydrate macrocrystals	11	olanzapine-fluoxetine hcl	12	oxcarbazepine oral tablet	12
nitrofurantoin oral suspension 25 mg/5ml	11	olanzapine oral tablet	16	oxybutynin chloride er	25
nitroglycerin rectal	21	olanzapine oral tablet dispersible	16	oxybutynin chloride oral solution	25
nitroglycerin sublingual	21	olmesartan medoxomil-hctz	20	oxybutynin chloride oral tablet 5 mg	25
nitroglycerin transdermal	21	olmesartan medoxomil oral	19	oxycodone-acetaminophen oral tablet 10-325 mg, 2.5-325 mg, 5-325 mg, 7.5-325 mg	10
NIVA THYROID	29	olopatadine hcl nasal	34	oxycodone hcl oral capsule	10
nizatidine	23	olopatadine hcl ophthalmic solution 0.1 %	33	oxycodone hcl oral concentrate	10
nora-be	28	OLUMIANT	29	oxycodone hcl oral solution	10
norelgestromin-eth estradiol	27	omega-3-acid ethyl esters	21	oxycodone hcl oral tablet	10
norethin ace-eth estrad-fe	27	omeprazole oral capsule delayed release 10 mg	24	oxymorphone hcl	10
norethindrone acetate oral	28	omeprazole oral capsule delayed release 20 mg, 40 mg	24	oxymorphone hcl er	10
norethindrone acet-ethinyl est	27	OMNIPOD 5 G6 INTRO (GEN 5)	32	OZEMPIC	18
norethindrone-eth estradiol	27	OMNIPOD 5 G6 PODS (GEN 5)	32	paliperidone er	16
norethindrone oral	28	OMNITROPE	26	PANDEL	26
norethindron-ethinyl estrad-fe	27	ondansetron hcl oral	13	pantoprazole sodium oral tablet delayed release	24
norethin-eth estradiol-fe	27	ondansetron odt oral tablet dispersible 4 mg, 8 mg	13	PARAGARD INTRAUTERINE COPPER	32
norgestimate-eth estradiol	27	ONELAX MAGNESIUM CITRATE	24	paricalcitol oral	31
norgestimate-ethinyl estradiol triphasic	27	ONETOUCH DELICA PLUS LANCING	18	PARI VORTEX ADULT MASK	32
norlyroc	28	ONETOUCH DELICA SAFETY LANCING	18	paroxetine hcl er	13
NORPACE CR	19	ONETOUCH ULTRA 2 KIT W/DEVICE	18	paroxetine hcl oral suspension	13
nortrel 0.5/35 (28)	27	ONETOUCH ULTRA TEST STRIPS	18	paroxetine hcl oral tablet	13
nortrel 1/35 (21)	27	ONETOUCH ULTRA TEST STRIPS	18	PAXLOVID (150/100)	16
nortrel 1/35 (28)	27	ONETOUCH ULTRA TEST STRIPS	18	PAXLOVID (300/100)	16
nortrel 7/7/7	27	ONETOUCH VERIO FLEX SYSTEM KIT	18	PEDIARIX	30
nortriptyline hcl oral capsule	13	ONETOUCH VERIO IN VITRO LIQUID HIGH	18	PEDVAX HIB	30
nortriptyline hcl oral solution	13	ONETOUCH VERIO TEST STRIPS	18	peg-3350/electrolytes	24
NORVIR ORAL PACKET	17	ONE VITE WOMENS PLUS	23	peg-3350/electrolytes/ascorbat	24
NOVOFINE PEN NEEDLE	32	opcicon one-step	28	peg 3350-kcl-na bicarb-nacl	24
NOVOFINE PLUS PEN NEEDLE	32	OPILL	28	PEGASYS	16
NOVOPEN ECHO	18	opium	23	peg-kcl-nacl-nasulf-na asc-c	24
np thyroid	29	OPSUMIT	35	PENBRAYA	30
NUBEQA	14	option 2	28	penicillamine oral	25
NUCYNTA ER	10	OPTIONS GYNOL II CONTRACEPTIVE	25	penicillin v potassium	11
nyamyc	13	OPVEE	10	PENTACEL	30
nylia 1/35	27	oralone	22	pentamidine isethionate inhalation	15
nylia 7/7/7	27	ORENITRAM	35	pentazocine-naloxone hcl	10
nymyo oral tablet 0.25-35 mg-mcg	27	ORENITRAM MONTH 1	35	pentoxifylline er	20
nystatin external cream	13	ORENITRAM MONTH 2	35	PERFECT POINT SAFETY LANCETS	18
nystatin external ointment	13	ORENITRAM MONTH 3	35	perindopril erbumine	19
nystatin external powder	13	ORILISSA	29	periogard	22
nystatin mouth/throat	13	ORKAMBI	34	permethrin external	15
nystatin oral	13	orphenadrine citrate er	35	perphenazine-amitriptyline	12
nystatin-triamcinolone	13	oseltamivir phosphate oral	17	perphenazine oral	13
nystop	13	OSPHENA	28	PFIZER COVID-19 VAC-TRIS 5-11Y	30
OCALIVA	25	OTEZLA	29	PFIZER COVID-19 VAC-TRIS 6M-4Y	31
ocella	27	OTOVEL	34	phenazo oral tablet 200 mg	25
octreotide acetate	29	oxaprozin oral tablet	9	phenazopyridine hcl oral tablet 100 mg, 200 mg	25
ODEFSEY	17	oxazepam	17	phenelzine sulfate oral	12
OFEV	35			phenobarbital oral	12
ofloxacin ophthalmic	34			phenoxybenzamine hcl oral	19
ofloxacin oral	11				

phenylephrine hcl ophthalmic	33	prednisone oral tablet therapy pack ..	26	quazepam.....	17
phenytek.....	12	pregabalin oral capsule.....	22	quetiapine fumarate.....	16
phenytoin infatabs.....	12	PREGNYL.....	26	quetiapine fumarate er.....	16
phenytoin oral	12	PREHEVBRIO.....	31	quinapril hcl.....	19
phenytoin sodium extended	12	PREMARIN VAGINAL.....	27	quinapril-hydrochlorothiazide	20
PHEXXI.....	32	prenatal oral tablet 27-1 mg.....	23	quinidine gluconate er.....	20
philith	27	prenatal plus vitamin/mineral.....	23	quinidine sulfate.....	20
PHOSPHOLINE IODIDE	33	PRENATRIX.....	23	quinine sulfate	15
phytonadione oral	23	PRENATRYL.....	23	QVAR REDIHALER.....	34
pilocarpine hcl ophthalmic.....	33	PREPIDIL.....	26	rabeprazole sodium oral tablet	
pilocarpine hcl oral	22	prevalite.....	21	delayed release	24
pimecrolimus	22	PREVNAR 20	31	RADIOGARDASE.....	32
pimozide.....	16	PREZCOBIX	17	raloxifene hcl.....	29
pimtrex.....	27	PREZISTA ORAL SUSPENSION	17	ramelteon	35
pindolol	20	PRIFTIN	14	ramipril	19
pioglitazone hcl.....	18	primaquine phosphate	15	ranolazine er	20
pioglitazone hcl-metformin hcl	18	primidone oral	12	rasagiline mesylate oral.....	16
PIQRAY	14	PRIORIX.....	31	RAYA SURE PEN NEEDLE	32
pirfenidone.....	35	probenecid.....	13	react.....	28
piroxicam oral.....	9	prochlorperazine.....	13	reclipsen	27
PLAN B ONE-STEP	28	prochlorperazine maleate oral	13	RECOMBIVAX HB	31
PLENVU	24	PROCTOFOAM HC	31	RECOTHROM EXTERNAL SOLUTION	
plerixafor.....	19	procto-med hc.....	31	RECONSTITUTED 5000 UNIT	19
PNEUMOVAX 23.....	31	proctosol hc.....	31	RECOTHROM SPRAY KIT.....	19
pnv prenatal plus multivit+dha.....	23	proctozone-hc.....	31	REGRANEX.....	22
podofilox external gel	22	progesterone intramuscular	28	RELENZA DISKHALER	17
podofilox external solution.....	22	progesterone oral.....	28	RELISTOR SUBCUTANEOUS.....	23
polycin	33	PROMACTA.....	19	repaglinide.....	18
polyethylene glycol 3350 oral powder	24	promethazine-codeine oral solution..	35	REPATHA	21
polymyxin b-trimethoprim	33	promethazine-dm	35	REPATHA PUSHTRONEX SYSTEM.....	21
POMALYST	14	promethazine hcl oral	13	REPATHA SURECLICK.....	21
portia-28.....	27	promethazine hcl rectal	13	RETACRIT	19
posaconazole oral tablet delayed release	13	promethazine-phenylephrine.....	34	REXTOVY.....	10
potassium chloride crys er	23	promethazine vc.....	34	REYATAZ ORAL PACKET	17
potassium chloride er	23	promethegan	13	REZVOGLAR KWIKPEN	19
potassium chloride oral packet	23	propafenone hcl	19	ribavirin oral.....	16
potassium chloride oral solution.....	23	propafenone hcl er	20	rifabutin.....	14
potassium citrate er	23	proparacaine hcl ophthalmic.....	33	rifampin oral	14
pramipexole dihydrochloride.....	15	propranolol hcl er.....	20	riluzole	22
prasugrel hcl	19	propranolol hcl oral.....	20	rimantadine hcl	17
pravastatin sodium	21	propylthiouracil oral	29	RINVOQ	29
praziquantel oral.....	15	PROQUAD.....	31	RINVOQ LQ	29
prazosin hcl oral.....	19	protriptyline hcl.....	13	risedronate sodium oral tablet.....	31
prednisolone acetate ophthalmic.....	33	pseudoephedrine-bromphen-dm	35	risperidone oral solution.....	16
prednisolone oral solution.....	26	PULMOSAL.....	35	risperidone oral tablet	16
prednisolone oral tablet.....	26	PULMOZYME.....	34	risperidone oral tablet dispersible	16
prednisolone sodium phosphate		PURE COMFORT SAFETY PEN NEEDLE	32	ritonavir	17
ophthalmic.....	33	pyrazinamide oral.....	14	rivastigmine.....	12
prednisolone sodium phosphate oral		pyridostigmine bromide er	14	rivastigmine tartrate.....	12
solution.....	26	pyridostigmine bromide oral solution	14	rivelsa	27
prednisolone sodium phosphate oral tablet		60 mg	14	rizatriptan benzoate	14
dispersible	26	pyrimethamine oral.....	15	roflumilast.....	35
prednisone intensol.....	26	QUADRACEL INTRAMUSCULAR		ropinirole hcl.....	16
prednisone oral solution.....	26	SUSPENSION.....	31	rosuvastatin calcium oral tablet 10	
prednisone oral tablet	26			mg, 5 mg	21

rosuvastatin calcium oral tablet 20 mg, 40 mg	21	SOFOSBUVIR-VELPATASVIR	16	SYNJARDY	18
ROTARIX	31	solifenacin succinate	25	SYNJARDY XR	18
ROTATEQ	31	SOLIQUA	18	SYNTHROID	29
roweepra	12	SOMAVERT	29	TABLOID	14
ROZLYTREK	14	sorafenib tosylate	15	tacrolimus external	22
rufinamide	12	sotalol hcl (af)	20	tacrolimus oral	29
RYBELSUS	18	sotalol hcl oral	20	tadalafil oral tablet 2.5 mg, 5 mg	25
SAFETY PEN NEEDLES	32	SOTYLIZE	20	tadalafil oral tablet 10 mg, 20 mg	25
sajazir	29	SOVALDI	16	tadalafil (pah)	35
salsalate oral	9	SPIKEVAX	31	TAFINLAR	15
sapropterin dihydrochloride	25	spinosad	15	tafluprost (pf)	33
SAVELLA	22	SPIRIVA HANDIHALER	34	take action	28
SAVELLA TITRATION PACK	22	SPIRIVA RESPIMAT	34	TALTZ	29
saxagliptin hcl	18	spironolactone-hctz	20	TALZENNA	15
scopolamine	13	spironolactone oral tablet	20	tamoxifen citrate oral tablet 10 mg	14
selegiline hcl oral	16	SPRAVATO (56 MG DOSE)	12	tamoxifen citrate oral tablet 20 mg	14
selenium sulfide external lotion	22	SPRAVATO (84 MG DOSE)	12	tamsulosin hcl	25
SELZENTRY ORAL SOLUTION	17	sprintec 28	28	tarina 24 fe	28
sertraline hcl oral concentrate	13	SPS	23	tarina fe 1/20 eq	28
sertraline hcl oral tablet	13	sronyx	28	tasimelteon	35
setlakin	27	ssd	11	taysofy	28
sevelamer carbonate oral packet	23	STELARA SUBCUTANEOUS	22	tazarotene external cream 0.1 %	22
sevelamer carbonate oral tablet	23	STIOLTO RESPIMAT	35	tazarotene external gel	22
sharobel	28	STIVARGA	15	TDVAX	31
SHARPS COLLECTOR	32	ST JOSEPH LOW DOSE	9	TECHLITE LANCETS 26G	18
SHARPS CONTAINER	32	STRIBILD	16	telmisartan	19
SHINGRIX	31	STRIVERDI RESPIMAT	34	telmisartan-hctz	20
SIGNIFOR	29	SUBOXONE	10	temazepam	35
sildenafil citrate oral suspension reconstituted	35	subvenite	12	temozolomide	14
sildenafil citrate oral tablet 20 mg	35	sucalfate oral suspension	24	TENCON	10
silodosin	25	sucalfate oral tablet	24	TENIVAC	31
silver sulfadiazine external	11	SULCONAZOLE NITRATE	13	tenofovir disoproxil fumarate	17
SIMBRINZA	33	sulfacetamide-prednisolone	33	terazosin hcl	25
simliya	27	sulfacetamide sodium (acne)	22	terbinafine hcl oral	13
simpesse	27	sulfacetamide sodium ophthalmic	34	terbutaline sulfate oral	34
SIMPONI	29	sulfadiazine oral	11	terconazole vaginal cream	13
simvastatin oral tablet 10 mg, 20 mg, 40 mg, 5 mg	21	sulfamethoxazole-trimethoprim oral suspension 200-40 mg/5ml	11	terconazole vaginal suppository	13
simvastatin oral tablet 80 mg	21	sulfamethoxazole-trimethoprim oral tablet	11	teriflunomide	22
sirolimus oral solution	29	SULFAMYLON	11	testosterone cypionate intramuscular	26
sirolimus oral tablet	29	sulfasalazine oral	31	testosterone enanthate intramuscular	26
SIRTURO	14	sulfatrim pediatric	11	testosterone transdermal gel 1.62 %, 20.25 mg/act (1.62%), 50 mg/5gm (1%)	26
SIVEXTRO ORAL	11	sulindac oral	9	TETANUS-DIPHTHERIA TOXOIDS TD	31
SKYLA	28	sumatriptan-naproxen sodium	14	tetrabenazine	22
SKYRIZI PEN	29	sumatriptan nasal	14	tetracaine hcl ophthalmic	33
SKYRIZI SUBCUTANEOUS SOLUTION CARTRIDGE	22	sumatriptan succinate oral	14	tetracycline hcl oral capsule	11
SKYRIZI SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	29	sumatriptan succinate refill subcutaneous solution cartridge	14	TEXACORT	26
sm lansoprazole	25	sumatriptan succinate subcutaneous	14	THALOMID	14
sodium chloride inhalation	35	sunitinib malate	15	THEO-24	35
sodium fluoride oral	23	SUNOSI	35	theophylline er	35
SODIUM OXYBATE	35	syeda	28	theophylline oral	35
sodium polystyrene sulfonate	23	SYMPROIC	23	thioridazine hcl oral	16
		SYNAREL	29	thiothixene	16
				THROMBIN-JMI EPISTAXIS	19
				THROMBIN-JMI EXTERNAL KIT	19

THYQUIDITY	29	triamcinolone acetonide mouth/ throat	22	UPTRAVI ORAL	35
thyroid oral	29	triamterene-hctz	20	UPTRAVI TITRATION	35
tiadylt er	20	triazolam	35	ursodiol oral capsule 300 mg	23
tiagabine hcl	12	triderm	26	ursodiol oral tablet	23
tilia fe	28	trientine hcl oral capsule 250 mg	23	valacyclovir hcl oral	16
timolol maleate (once-daily)	33	tri-estarylla	28	VALCHLOR	14
timolol maleate ophthalmic gel forming solution	33	trifluoperazine hcl	16	valganciclovir hcl oral solution reconstituted	16
timolol maleate ophthalmic solution	33	trifluridine	33	valganciclovir hcl oral tablet	16
timolol maleate oral	20	trihexyphenidyl hcl	15	valproic acid oral capsule	12
timolol maleate pf	33	tri-legest fe	28	valproic acid oral solution 250 mg/5ml	12
tinidazole oral	11	tri-lynyah	28	valsartan-hydrochlorothiazide	20
tiotropium bromide monohydrate	34	tri-lo-estarylla	28	valsartan oral tablet	19
TIROSINT-SOL	29	tri-lo-marzia	28	vancomycin hcl oral capsule	11
TIVICAY	16	tri-lo-mili	28	vancomycin hcl oral solution reconstituted	11
tizanidine hcl oral capsule	35	tri-lo-sprintec	28	VANDAZOLE	11
tizanidine hcl oral tablet	35	trimethobenzamide hcl oral	13	VAQTA	31
TOBRADEX	32	trimethoprim oral	11	varenicline tartrate	10
tobramycin-dexamethasone	32	tri-mili	28	varenicline tartrate(continue)	10
tobramycin nebulization solution 300 mg/5ml inhalation	34	trimipramine maleate oral	13	varenicline tartrate (starter)	10
TOBAMYCIN NEBULIZATION SOLUTION 300 MG/5ML INHALATION	34	TRINATE	23	VARIVAX	31
tobramycin ophthalmic	32	tri-nymyo oral tablet 0.18/0.215/0.25 mg-35 mcg	28	VARUBI (180 MG DOSE)	13
TOBREX	32	tri-sprintec	28	VAXELIS	31
tolcapone	15	TRIUMEQ	17	VAXNEUVANCE	31
tolmetin sodium	9	trivora (28)	28	VCF VAGINAL CONTRACEPTIVE	25
tolterodine tartrate	25	tri-vylibra	28	velivet	28
tolterodine tartrate er	25	tri-vylibra lo	28	VELPHORO	23
topiramate oral capsule sprinkle	12	tropium chloride	25	VELTASSA ORAL PACKET 16.8 GM, 25.2 GM, 8.4 GM	23
topiramate oral tablet	12	tropium chloride er	25	VELMIDY	16
toremifene citrate	14	TRUE COVER	32	VENCLEXTA	15
torsemide	20	TRUE FOLIC ACID ORAL TABLET 1 MG	23	VENCLEXTA STARTING PACK	15
TRADJENTA	18	TRUE FOLIC ACID ORAL TABLET 400 MCG	23	venlafaxine hcl	13
tramadol-acetaminophen	10	TRUE LAXATIVE	24	venlafaxine hcl er oral capsule extended release 24 hour	13
tramadol hcl er	10	TRULICITY	18	VENTAVIS	35
tramadol hcl (er biphasic) oral tablet extended release 24 hour	10	TRUMENBA	31	VENTOLIN HFA	34
tramadol hcl oral tablet 50 mg	10	TUKYSA	15	verapamil hcl er oral capsule extended release 24 hour	20
trandolapril	19	TURALIO	15	verapamil hcl er oral tablet extended release	20
tranexamic acid oral	19	turqoz	28	verapamil hcl oral	20
tranylcypromine sulfate	12	TWINRIX	31	VERIFINE INSULIN PEN NEEDLE	32
travoprost (bak free)	33	TWIRLA	28	VERIFINE INSULIN SYRINGE	32
trazodone hcl oral	13	TYBLUME	28	VERIFINE PLUS PEN NEEDLE	32
TRECTOR	14	TYBOST	16	VERIFINE SAFE LANCET MINI 21G	18
TRELEGY ELLIPTA	35	tydemy	28	VERIFINE SAFE LANCET MINI 23G	18
TRESIBA	19	TYMLOS	31	VERIFINE SAFE LANCET MINI 28G	18
TRESIBA FLEXTOUCH	19	TYVASO	35	VERIFINE SAFE LANCET MINI 30G	18
tretinoin external cream	22	TYVASO DPI INSTITUTIONAL KIT	35	VERIFINE SAFE LANCET MINI 32G	18
tretinoin oral	15	TYVASO DPI MAINTENANCE KIT	35	VERIFINE SHARPS CONTAINER	32
triamcinolone acetonide external cream	26	TYVASO DPI TITRATION KIT	35	VERZENIO	14
triamcinolone acetonide external lotion	26	TYVASO REFILL KIT	35	vestura	28
triamcinolone acetonide external ointment 0.025 %, 0.1 %, 0.5 %	26	TYVASO STARTER KIT	35	VIBERZI	23
		UBRELVY	13	vienna	28
		UNIFINE PROTECT PEN NEEDLE	32	vigabatrin	12
		unithroid	29		

vigadrone	12	zafemy	28
vigpoder	12	zafirlukast	34
vilazodone hcl	13	zaleplon	35
VINATE ONE ORAL TABLET 60-1 MG	23	ZARXIO	19
viorele	28	ZEGALOGUE	18
VIRACEPT	17	ZELBORAF	15
vitamin d (ergocalciferol) oral capsule 1.25 mg (50000 ut), 50000 unit	23	zenatane	22
VITATHELY WITH GINGER	23	ZENPEP	25
VITRAKVI	15	ZEPATIER	16
VIVAGUARD LANCETS 30G	18	zidovudine	17
VIVAGUARD LANCING DEVICE	18	zileuton er	34
VIVAGUARD SAFETY LANCETS 28G	18	ZIMHI	10
volnea	28	ziprasidone hcl	16
voriconazole oral suspension reconstituted	13	ZIRGAN	33
voriconazole oral tablet	13	ZOLINZA	14
VORTEX VALVED HOLDING CHAMBER	32	zolmitriptan nasal	14
VRAYLAR	16	zolmitriptan oral	14
vyfemla	28	zolpidem tartrate er	35
vylibra	28	zolpidem tartrate oral tablet	35
warfarin sodium oral	19	zonisamide oral	12
wera	28	zovia 1/35 (28)	28
WESNATAL DHA COMPLETE	23	ZUBSOLV	10
WESTAB PLUS	23	zumandimine	28
WIDE-SEAL DIAPHRAGM 60	32	ZYDELIG	15
WIDE-SEAL DIAPHRAGM 65	32	ZYKADIA	15
WIDE-SEAL DIAPHRAGM 70	32	ZYLET	33
WIDE-SEAL DIAPHRAGM 75	32		
WIDE-SEAL DIAPHRAGM 80	32		
WIDE-SEAL DIAPHRAGM 85	32		
WIDE-SEAL DIAPHRAGM 90	32		
WIDE-SEAL DIAPHRAGM 95	32		
wixela inhub	34		
wymzya fe	28		
XARELTO	19		
XARELTO STARTER PACK	19		
XELJANZ	29		
XELJANZ XR	29		
XELPROS	33		
XIFAXAN	11		
XIGDUO XR	18		
XOLAIR SUBCUTANEOUS SOLUTION AUTO-INJECTOR	30		
XOLAIR SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 150 MG/ML, 75 MG/0.5ML	30		
XOLAIR SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 300 MG/2ML	30		
XOSPATA	15		
XTAMPZA ER	10		
xulane	28		
XULTOPHY	18		
YOSPRALA	19		
yuvafem	28		

Language Assistance Services

1-877-265-9199, TTY 711

English: Translation services and interpreters are available at no cost to you. If you need help, please call the number above or the Member Services number on your health plan ID card.

Spanish: Hay servicios de traducción e interpretación disponibles sin costo para usted. Si necesita ayuda, llame al número anterior o al número de Servicios para Miembros que figura en la tarjeta de identificación de su plan de salud.

Chinese: 翻译服务和口译员免费供您使用。如果您需要帮助，请拨打上述号码或拨打您健康计划 ID 卡上的会员服务号码。

Vietnamese: Dịch vụ dịch thuật và thông dịch viên được cung cấp miễn phí cho quý vị. Nếu quý vị cần trợ giúp, vui lòng gọi số ở trên hoặc số bộ phận Dịch vụ Thành viên trên thẻ ID chương trình sức khỏe của quý vị.

Korean: 번역 서비스와 통역사는 비용 부담 없이 이용하실 수 있습니다. 도움이 필요하신 경우, 전술한 번호 또는 의료 플랜 ID 카드에 기재된 가입자 서비스 번호로 전화하십시오.

Arabic: تتوفر خدمات الترجمة والمترجمون الفوريون لك مجاناً. إذا كنت بحاجة إلى المساعدة، فيرجى الاتصال بالرقم أعلاه أو رقم خدمات الأعضاء الموجود على بطاقة معرف الخطة الصحية الخاصة بك.

French Creole: Sèvis tradiksyon ak entèprèt disponib pou ou gratis. Si w bezwen èd, tanpri rele nimewo ki anwo a oswa nimewo Sèvis Manm ki sou kat idantite (ID) plan sante w la.

Tagalog: Ang mga serbisyo sa pagsasalín at mga tagapagsalín ay magagamit mo nang walang bayad. Kung kailangan mo ng tulong, mangyaring tawagan ang numero sa itaas o ang numero ng mga Serbisyo sa Miyembro na nasa iyong ID kard ng planong pangkalusugan.

French: Les services de traduction et d'interprétation vous sont fournis gratuitement. Si vous avez besoin d'aide, veuillez appeler le numéro ci-dessus ou le numéro de services aux membres figurant sur votre carte d'assurance maladie.

Russian: Вам доступны бесплатные услуги перевода и устные переводчики. Если вам нужна помощь, позвоните по указанному выше номеру или по номеру отдела обслуживания участников, указанному на вашей идентификационной карте программы страхования здоровья.

Polish: Mogą Państwo bezpłatnie skorzystać z usługi tłumaczenia pisemnego lub ustnego. Jeśli potrzebują Państwo pomocy, należy zadzwonić pod numer podany powyżej lub numer usług dla członków podany na karcie identyfikacyjnej członka planu ubezpieczenia zdrowotnego.

German: Übersetzungsdienste und Dolmetscher stehen Ihnen kostenlos zur Verfügung. Wenn Sie Hilfe benötigen, rufen Sie bitte die oben genannte Nummer oder die Nummer des Mitgliederservices auf Ihrer Versichertenkarte an.

Gujarati: અનુવાદ સેવાઓ અને દુભાષિયા તમારા માટે નિ:શુલ્ક ઉપલબ્ધ છે. જો તમને મદદની જરૂર હોય, તો કૃપા કરીને ઉપરના નંબર પર અથવા તમારા હેલ્થ પ્લાન આઈડી કાર્ડ પરના સભ્ય સેવાઓ નંબર પર કૉલ કરો.

Urdu: آپ کے لیے بغیر کسی فیس یا اخراجات کے ترجمہ کی خدمات اور ترجمان دستیاب ہیں۔ اگر آپ کو مدد کی ضرورت ہو، تو برائے مہربانی اوپر دیئے گئے نمبر یا اپنے ہیلتھ پلان آئی ڈی کارڈ پر موجود Member Services کے نمبر پر کال کریں۔

Portuguese: Você tem à disposição serviços gratuitos de tradução e intérpretes. Caso precise de ajuda, ligue para o número acima ou para o número de Atendimento a Membros exibido em seu cartão de identificação do plano de saúde.

Japanese: 翻訳サービスと通訳サービスを利用できます。サポートが必要な場合は、上記の電話番号か、保険プラン ID カードのメンバーサービス番号に電話してください。

Hindi: अनुवाद सेवाएँ और दुभाषिए आपके लिए नि:शुल्क उपलब्ध हैं। यदि आपको सहायता की आवश्यकता है, तो कृपया अपने स्वास्थ्य योजना आईडी कार्ड पर ऊपर दिए गए नंबर या सदस्य सेवा नंबर पर कॉल करें।

Persian: خدمات ترجمه کتبی و شفاهی به صورت رایگان برای شما فراهم است. اگر به کمک نیاز دارید، با شماره تلفن بالا یا شماره تلفن خدمات مشتری درج شده روی کارت شناسایی برنامه درمانی خود تماس بگیرید.

Amharic: የትርጉም አገልግሎቶች እና አስተርጓሚዎች ለእርስዎ ያለ ምንም ወጪ ይገኛሉ። እርዳታ ከፈለጉ፣ እባክዎን ከላይ ባለው ቁጥር ወይም በጤና እቅድ መታወቂያ ካርድዎ ላይ ባለው የአባላት አገልግሎት ቁጥር ይደውሉ።

Italian: Sono disponibili gratuitamente servizi di traduzione e interpreti. Se hai bisogno di aiuto, chiama il numero sopra oppure il numero di assistenza presente sulla tua tessera sanitaria.



Notice of non-discrimination

The company complies with applicable federal civil rights laws and does not treat members differently because of race, color, national origin, age, disability, sex, sexual orientation, or gender identity. If you think you were treated unfairly because of your race, color, national origin, age, disability, sex, sexual orientation, or gender identity, you can send a complaint to our Civil Rights Coordinator.

Mail: Civil Rights Coordinator
UnitedHealthcare Civil Rights Grievance
P.O. Box 30608
Salt Lake City, UTAH 84130

Email: UHC_Civil_Rights@uhc.com

You must send the complaint within 60 days of the incident. We will send you a decision within 30 days. If you disagree with the decision, you have 15 days to appeal.

If you need help with your complaint, please call **toll-free 1-877-265-9199** or the toll-free number on your health plan ID card (TTY/RTT 711). We are available Monday through Friday, 8 a.m. to 6 p.m., E.T.

You can also file a complaint with the U.S. Dept. of Health and Human services.

Online: <https://ocrportal.hhs.gov/ocr/portal/lobby.jsf>
Complaint forms are available at <http://www.hhs.gov/ocr/office/file/index.html>.

Phone: Toll-free **1-800-368-1019, 1-800-537-7697** (TDD)

Mail: U.S. Dept. of Health and Human Services
200 Independence Avenue, SW Room 509F
HHH Building
Washington, D.C. 20201



Medical plan coverage offered by: UnitedHealthcare of Arizona, Inc.; Rocky Mountain Health Maintenance Organization Incorporated in CO; UnitedHealthcare of Florida, Inc.; UnitedHealthcare of Georgia, Inc.; UnitedHealthcare of Illinois, Inc.; UnitedHealthcare Insurance Company in AL, IN, KS, LA, MO, NE, NJ, TN, and WY; Optimum Choice, Inc. in MD and VA; UnitedHealthcare Community Plan, Inc. in MI; UnitedHealthcare of Mississippi, Inc.; UnitedHealthcare of New Mexico, Inc.; UnitedHealthcare of North Carolina, Inc.; UnitedHealthcare of Ohio, Inc.; UnitedHealthcare of Oklahoma, Inc.; UnitedHealthcare of South Carolina, Inc.; UnitedHealthcare of Texas, Inc.; UnitedHealthcare of Oregon, Inc. in WA; UnitedHealthcare of Wisconsin, Inc., and UnitedHealthcare Plan of the River Valley in Iowa. Administrative services provided by United HealthCare Services, Inc. or their affiliates.