

# 2024

## Formulary

(List of Covered Drugs)

This formulary was updated on July 1, 2024. For more recent information or other questions, please contact ArchCare Senior Life (PACE) Member Services at 1-866-412-5435 or, for TTY users, 711, 24 hours a day, 7 days a week, or visit [www.ArchCareSeniorLife.org](http://www.ArchCareSeniorLife.org).



archcare  
Senior Life

# ArchCare Senior Life (PACE)

## 2024 Formulary

### List of Covered Drugs

**PLEASE READ: THIS DOCUMENT CONTAINS INFORMATION ABOUT THE DRUGS WE COVER IN THIS PLAN**

Formulary ID: 00024103, Version Number: 13

**Note to existing members:** This formulary has changed since last year. Please review this document to make sure that it still contains the drugs you take.

When this drug list (formulary) refers to “we,” “us,” or “our,” it means Catholic Managed Long Term Care, Inc. When it refers to “plan” or “our plan,” it means ArchCare Senior Life (PACE).

ArchCare Senior Life is a Program of All-inclusive Care for the Elderly (PACE). PACE is a community-based healthcare program created for people 55 and over who require nursing-home-level care, but prefer to receive it in their own familiar surroundings.

This document includes a list of the drugs (formulary) for our plan which is current as of July 1, 2024. For an updated formulary, please contact us. Our contact information, along with the date we last updated the formulary, appears on the front and back cover pages.

You must generally use network pharmacies to use your prescription drug benefit. Benefits, formulary, and/or pharmacy network may change on January 1, 2024, and from time to time during the year.

#### **What is the ArchCare Senior Life (PACE) Formulary?**

A formulary is a list of covered drugs selected by ArchCare Senior Life (PACE) in consultation with a team of health care providers, which represents the prescription therapies believed to be a necessary part of a quality treatment program. ArchCare Senior Life (PACE) will generally cover the drugs listed in our formulary as long as the drug is medically necessary, the prescription is filled at an ArchCare Senior Life (PACE) network pharmacy, and other plan rules are followed.

#### **Can the Formulary (drug list) change?**

Generally, if you are taking a drug on our 2024 formulary that was covered at the beginning of the year, we will not discontinue or reduce coverage of the drug during the 2024 coverage year except when a new, less expensive generic drug becomes available or when new adverse information about the safety or effectiveness of a drug is released. Other types of formulary changes, such as removing a drug from our formulary, will not affect members who are currently taking the drug. It will remain available at the same cost-sharing for those members taking it for the remainder of the

This document includes a list of drugs covered on our formulary as of July 1, 2024. You can find information on what the symbols and abbreviations on this table mean by going to page 7.

coverage year. We feel it is important that you have continued access for the remainder of the coverage year to the formulary drugs that were available when you chose our plan, except for cases in which you can save additional money or we can ensure your safety.

If we remove drugs from our formulary, or add prior authorization, quantity limits and/or step therapy restrictions on a drug, we must notify affected members of the change at least 30 days before the change becomes effective, or at the time the member requests a refill of the drug, at which time the member will receive a 30-day supply of the drug. If the Food and Drug Administration deems a drug on our formulary to be unsafe or the drug's manufacturer removes the drug from the market, we will immediately remove the drug from our formulary and provide notice to members who take the drug. The enclosed formulary is current as of July 1, 2024. To get updated information about the drugs covered by ArchCare Senior Life (PACE), please contact us. Our contact information appears on the front and back cover pages. Please visit our web site at [www.ArchCareSeniorLife.org](http://www.ArchCareSeniorLife.org) or call Member Services at 1-866-412-5435, 24 hours a day, 7 days a week. TTY/TDD users should call 711. We will notify you by mail in the event of mid-year non-maintenance formulary changes.

## **How do I use the Formulary?**

There are two ways to find your drug within the formulary:

### **Medical Condition**

The formulary begins on page 10. The drugs in this formulary are grouped into categories depending on the type of medical conditions that they are used to treat. For example, drugs used to treat a heart condition are listed under the category, "Cardiovascular". If you know what your drug is used for, look for the category name in the list that begins below. Then look under the category name for your drug.

### **Alphabetical Listing**

If you are not sure what category to look under, you should look for your drug in the Index that begins on page 229. The Index provides an alphabetical list of all of the drugs included in this document. Both brand name drugs and generic drugs are listed in the Index. Look in the Index and find your drug. Next to your drug, you will see the page number where you can find coverage information. Turn to the page listed in the Index and find the name of your drug in the first column of the list.

## **What are generic drugs?**

ArchCare Senior Life (PACE) covers both brand name drugs and generic drugs. A generic drug is approved by the FDA as having the same active ingredient as the brand name drug. Generally, generic drugs cost less than brand name drugs.

## **Are there any restrictions on my coverage?**

Some covered drugs may have additional requirements or limits on coverage. These requirements and limits may include:

This document includes a list of drugs covered on our formulary as of July 1, 2024. You can find information on what the symbols and abbreviations on this table mean by going to page 7.

**Prior Authorization:** ArchCare Senior Life (PACE) requires you or your physician to get prior authorization for certain drugs. This means that you will need to get approval from ArchCare Senior Life (PACE) before you fill your prescriptions. If you don't get approval, ArchCare Senior Life (PACE) may not cover the drug.

**Quantity Limits:** For certain drugs, ArchCare Senior Life (PACE) limits the amount of the drug that ArchCare Senior Life (PACE) will cover. For example, ArchCare Senior Life (PACE) provides 30 tablets per prescription for Kerendia. This may be in addition to a standard one-month or three-month supply.

**Step Therapy:** In some cases, ArchCare Senior Life (PACE) requires you to first try certain drugs to treat your medical condition before we will cover another drug for that condition. For example, if Drug A and Drug B both treat your medical condition, ArchCare Senior Life (PACE) may not cover Drug B unless you try Drug A first. If Drug A does not work for you, ArchCare Senior Life (PACE) will then cover Drug B.

You can find out if your drug has any additional requirements or limits by looking in the formulary that begins on page 10. You can also get more information about the restrictions applied to specific covered drugs by visiting our Web site. We have posted online a document that explains our prior authorization and step therapy restrictions. You may also ask us to send you a copy. Our contact information, along with the date we last updated the formulary, appears on the front and back cover pages.

You can ask ArchCare Senior Life (PACE) to make an exception to these restrictions or limits or for a list of other, similar drugs that may treat your health condition. See the section, "How do I request an exception to the ArchCare Senior Life (PACE)'s formulary?" on page 5 for information about how to request an exception.

## **What if my drug is not on the Formulary?**

If your drug is not included in this formulary (list of covered drugs), you should first contact Member Services and ask if your drug is covered.

If you learn that ArchCare Senior Life (PACE) does not cover your drug, you have two options:

You can ask Member Services for a list of similar drugs that are covered by ArchCare Senior Life (PACE). When you receive the list, show it to your doctor and ask him or her to prescribe a similar drug that is covered by ArchCare Senior Life (PACE).

You can ask ArchCare Senior Life (PACE) to make an exception and cover your drug. See below for information about how to request an exception.

## **How do I request an exception to the ArchCare Senior Life (PACE)'s Formulary?**

You can ask ArchCare Senior Life (PACE) to make an exception to our coverage rules. There are several types of exceptions that you can ask us to make.

This document includes a list of drugs covered on our formulary as of July 1, 2024. You can find information on what the symbols and abbreviations on this table mean by going to page 7.

You can ask us to cover a drug even if it is not on our formulary. If approved, this drug will be covered.

You can ask us to waive coverage restrictions or limits on your drug. For example, for certain drugs, ArchCare Senior Life (PACE) limits the amount of the drug that we will cover. If your drug has a quantity limit, you can ask us to waive the limit and cover a greater amount.

Generally, ArchCare Senior Life (PACE) will only approve your request for an exception if the alternative drugs included on the plan's formulary or additional utilization restrictions would not be as effective in treating your condition and/or would cause you to have adverse medical effects.

You should contact us to ask us for an initial coverage decision for a formulary or utilization restriction exception. **When you request a formulary or utilization restriction exception you should submit a statement from your prescriber or physician supporting your request.** Generally, we must make our decision within 72 hours of getting your prescriber's supporting statement. You can request an expedited (fast) exception if you or your doctor believe that your health could be seriously harmed by waiting up to 72 hours for a decision. If your request to expedite is granted, we must give you a decision no later than 24 hours after we get a supporting statement from your doctor or other prescriber.

### **What do I do before I can talk to my doctor about changing my drugs or requesting an exception?**

As a new or continuing member in our plan you may be taking drugs that are not on our formulary. Or, you may be taking a drug that is on our formulary but your ability to get it is limited. For example, you may need a prior authorization from us before you can fill your prescription. You should talk to your doctor to decide if you should switch to an appropriate drug that we cover or request a formulary exception so that we will cover the drug you take. While you talk to your doctor to determine the right course of action for you, we may cover your drug in certain cases during the first 90 days you are a member of our plan.

For each of your drugs that is not on our formulary or if your ability to get your drugs is limited, we will cover a temporary 30-day supply (unless you have a prescription written for fewer days) when you go to a network pharmacy. After your first 30-day supply, we will not pay for these drugs, even if you have been a member of the plan less than 90 days.

If you are a resident of a long-term care facility, we will allow you to refill your prescription until we have provided you with a 31-day transition supply, consistent with dispensing increment, (unless you have a prescription written for fewer days). If you need a drug that is not on our formulary or if your ability to get your drugs is limited, but you are past the first 90 days of membership in our plan, we will cover a 31-day emergency supply of that drug (unless you have a prescription for fewer days) while you pursue a formulary exception.

If you experience a change in level of care, we will cover a transition supply of your drugs. A level of care change occurs when you are discharged from a hospital or moved to or from a long-term care facility. In these instances, we will provide an emergency supply of non-formulary medication (including Part D medications that are on our formulary but require prior authorization

This document includes a list of drugs covered on our formulary as of July 1, 2024. You can find information on what the symbols and abbreviations on this table mean by going to page 7.

or step therapy under our utilization management rules). This emergency supply will be for one 31 day supply, or less if your prescription is written for fewer days. The emergency supply is to ensure that you receive your medications while an exception has been requested.

## **For more information**

For more detailed information about your ArchCare Senior Life (PACE) prescription drug coverage, please review your plan materials.

If you have questions about ArchCare Senior Life (PACE), please contact us. Our contact information, along with the date we last updated the formulary, appears on the front and back cover pages.

If you have general questions about Medicare prescription drug coverage, please call Medicare at 1-800-MEDICARE (1-800-633-4227) 24 hours a day/7 days a week. TTY users should call 1-877-486-2048. Or, visit <http://www.medicare.gov>.

## **ArchCare Senior Life (PACE)'s Formulary**

The formulary below provides coverage information about the drugs covered by ArchCare Senior Life (PACE). If you have trouble finding your drug in the list, turn to the Index that begins on page 229.

The first column of the chart lists the drug name. Brand name drugs are capitalized (e.g., COUMADIN) and generic drugs are listed in lower-case italics (e.g., *warfarin*).

The information in the Requirements/Limits column tells you if ArchCare Senior Life (PACE) has any special requirements for coverage of your drug.

## **GUIDE TO ABBREVIATIONS**

**PA** – Prior Authorization required. This means that you or your physician must get approval from us before you fill your prescriptions for certain drugs. If you do not get approval, we may not cover the drugs.

**QL** – Quantity limits apply. For certain drugs we limit the amount that the plan will cover.

**B/D** – The plan will determine whether this drug will be covered under Medicare Part B or Part D based on the reason this drug has been prescribed by your doctor.

**LA** – Limited access. The drug is only available at a limited number of specialty pharmacies.

**NM** – Not available at our mail-order pharmacies. Not all drugs are available at mail-order, please check with customer service if you have any questions.

**ST** – Step Therapy. This means that we may require you to first try certain drugs to treat your medical condition before we will cover another drug for that condition.

ArchCare Senior Life is a Program of All-inclusive Care for the Elderly (PACE).

You can ask for this information for free in other formats, such as Braille, large print, data CD, audio CD or qualified reader. Puede solicitar esta información de forma gratuita en otros formatos, tales como Braille, letra grande, en CD, CD de audio o un lector cualificado.

The formulary, pharmacy network and provider network may change at any time. You will receive notice when necessary.

## Discrimination is Against the Law

ArchCare complies with applicable Federal civil rights laws and does not discriminate on the basis of race, color, national origin, age, disability, or sex. ArchCare does not exclude people or treat them differently because of race, color, national origin, age, disability, or sex.

### ArchCare

- Provides free aids and services to people with disabilities to communicate effectively with us, such as:
  - Qualified sign language interpreters
  - Written information in other formats (large print, audio, accessible electronic formats, other formats)
- Provides free language services to people whose primary language is not English, such as:
  - Qualified interpreters
  - Information written in other languages

If you need these services, contact **Sarah Strum @ (646) 633-4401, TTY 711**

If you believe that ArchCare has failed to provide these services listed above or discriminated in another way on the basis of race, color, national origin, age, disability, or sex, you can file a grievance with: **Sarah Strum, (646) 633-4401, TTY 711**, or email [PACE1557grievances@archcare.org](mailto:PACE1557grievances@archcare.org). You can file a grievance in person or by mail, fax, or email. If you need help filing a grievance, **Sarah Strum (646) 633-4401, TTY 711** is available to help you.

You can also file a civil rights complaint with the U.S. Department of Health and Human Services, Office for Civil Rights, electronically through the Office for Civil Rights Complaint Portal, available at [https://ocrportal.hhs.gov/ocr/cp/wizard\\_cp.jsf](https://ocrportal.hhs.gov/ocr/cp/wizard_cp.jsf) or by mail or phone at:

U.S. Department of Health and Human Services  
200 Independence Avenue, SW  
Room 509F, HHH Building  
Washington, D.C. 20201  
1-800-368-1019, 800-537-7697 (TDD)

Complaint forms are available on-line at <http://www.hhs.gov/civil-rights/filing-a-complaint/complaint-process/index.html>

ATTENTION: If you speak English, language assistance services, free of charge, are available to you. Call 1-855-380-2589 (TTY: 711).

ATENCIÓN: si habla español, tiene a su disposición servicios gratuitos de asistencia lingüística. Llame al 1-855-380-2589 (TTY: 711).

This document includes a list of drugs covered on our formulary as of July 1, 2024. You can find information on what the symbols and abbreviations on this table mean by going to page 7.



注意：如果您使用繁體中文，您可以免費獲得語言援助服務。請致電1-855-380-2589 (TTY: 711)。

CHÚ Ý: Nếu bạn nói Tiếng Việt, có các dịch vụ hỗ trợ ngôn ngữ miễn phí dành cho bạn. Gọi số 1-855-380-2589 (TTY: 711).

주의: 한국어를 사용하시는 경우, 언어 지원 서비스를 무료로 이용하실 수 있습니다. 1-855-380-2589 (청각 장애인용 서비스: 711)으로 전화해 주십시오.

PAUNAWA: Kung nagsasalita ka ng Tagalog, maaari kang gumamit ng mga serbisyo ng tulong sa wika nang walang bayad. Tumawag sa 1-855-380-2589 (TTY: 711).

ВНИМАНИЕ: Если вы говорите на русском языке, то вам доступны бесплатные услуги перевода. Звоните 1-855-380-2589 (телетайп: 711).

ملحوظة: إذا كنت تتحدث اذكر اللغة، فإن خدمات المساعدة اللغوية تتوافر لك بالمجان. اتصل برقم 1-855-380-2589 (711:YTT) رقم هاتف الصم والبكم

ATANSYON: Si w pale Kreyòl Ayisyen, gen sèvis èd pou lang ki disponib gratis pou ou. Rele 1-855-380-2589 (TTY: 711).

ATTENTION : Si vous parlez français, des services d'aide linguistique vous sont proposés gratuitement. Appelez le 1-855-380-2589 (ATS: 711).

UWAGA: Jeżeli mówisz po polsku, możesz skorzystać z bezpłatnej pomocy językowej. Zadzwoń pod numer 1-855-380-2589 (TTY: 711).

ATENÇÃO: Se fala português, encontram-se disponíveis serviços linguísticos, grátis. Ligue para 1-855-380-2589 (TTY: 711).

ATTENZIONE: In caso la lingua parlata sia l'italiano, sono disponibili servizi di assistenza linguistica gratuiti. Chiamare il numero 1-855-380-2589 (TTY: 711).

ACHTUNG: Wenn Sie Deutsch sprechen, stehen Ihnen kostenlos sprachliche Hilfsdienstleistungen zur Verfügung. Rufnummer: 1-855-380-2589 (TTY: 711).

注意事項：日本語を話される場合、無料の言語支援をご利用いただけます。（1-855-380-2589 (TTY: 711)まで、お電話にてご連絡ください。

توجه: اگر به زبان فارسی گفتگو می کنید، تسهیلات زبانی بصورت رایگان برای شما بگیرید تماس 1-855-380-2589 (TTY: 711) با. باشد می ف.

# ArchCare Senior Life (PACE) Formulary

Effective: July 1, 2024

Drug Name	Drug Tier	Requirements/Limits
<b><u>ANALGESICS</u></b>		
<b><u>GOUT</u></b>		
<i>allopurinol</i> TABS 100mg, 300mg	1	
<i>colchicine</i> TABS .6mg	1	QL (120 tabs / 30 days)
<i>colchicine w/ probenecid tab 0.5-500 mg</i>	1	
MITIGARE CAPS .6mg	2	QL (60 caps / 30 days)
<i>probenecid</i> TABS 500mg	1	
<b><u>MISCELLANEOUS</u></b>		
<i>a/f pain relief</i> TABS 500mg	3	
<i>acephen</i> SUPP 120mg	3	
<i>acetaminophen</i> CAPS 500mg; CHEW 80mg, 160mg; LIQD 160mg/5ml, 166.67mg/5ml; SOLN 160mg/5ml; SUPP 325mg, 650mg; SUSP 80mg/0.8ml; TABS 325mg	3	
<i>acetaminophen junior stre</i> TBDP 160mg	3	
<i>added strength pain relie</i>	3	
<i>adprin b</i>	3	
<i>adult aspirin regimen</i> TBEC 81mg	3	
<i>af-aspirin childrens</i> CHEW 81mg	3	
ALKA-SELTZER TAB 325MG	3	
ALKA-SELTZER TAB 500MG	3	
<i>anacin</i> TBEC 81mg	3	
ANACIN TAB 400-30MG	3	
ANACIN TAB MAX STR	3	

This document includes a list of drugs covered on our formulary as of July 1, 2024. You can find information on what the symbols and abbreviations on this table mean by going to page 7.

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
APACET CHW 80MG CHEW 80mg	3	
<i>arthritis pain reliever</i> GEL 1%	3	
ASCRIPIN TAB	3	
<i>aspercreme arthritis pain</i> GEL 1%	3	
<i>aspir-low</i> TBEC 81mg	3	
<i>aspirin</i> SUPP 300mg, 600mg; TABS 325mg, 500mg; TBEC 81mg, 325mg, 650mg	3	
ASPIRIN SUPP 300mg, 600mg; TBEC 650mg	3	
<i>aspirin 81</i> TBEC 81mg	3	
<i>aspirin adult low dose</i> TBEC 81mg	3	
<i>aspirin adult low strengt</i> TBEC 81mg	3	
<i>aspirin buffered tab 500 mg</i>	3	
<i>aspirin ec low dose</i> TBEC 81mg	3	
<i>aspirin enteric coated ad</i> TBEC 81mg	3	
<i>aspirin low dose</i> TBEC 81mg	3	
<i>aspirin powder</i>	3	
<i>aspirin regimen</i> TBEC 81mg	3	
<i>aspirin-caffeine tab 400-32 mg</i>	3	
BACK PAINOFF TAB	3	
<i>bayer aspirin ec low dose</i> TBEC 81mg	3	
<i>bayer chewable low dose</i> CHEW 81mg	3	
<i>bayer low dose</i> TBEC 81mg	3	
BAYER PLUS TAB 500MG	3	

This document includes a list of drugs covered on our formulary as of July 1, 2024. You can find information on what the symbols and abbreviations on this table mean by going to page 7.

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
BAYER WOMENS TAB 81-300MG	3	
BC FAST PAIN POW RELIEF	3	
BC FAST PAIN POW RLF ARTH	3	
<i>bufferin extra strength</i>	3	
BUFFERIN TAB 325MG	3	
BUFFERIN TAB 500MG	3	
<i>childrens acetaminophen SUSP</i> 160mg/5ml	3	
CHLD NON-ASA TAB 80MG	3	
CRAMP TAB	3	
<i>cvs aspirin adult low str</i> TBEC 81mg	3	
<i>cvs aspirin ec</i> TBEC 81mg	3	
<i>cvs aspirin low dose</i> TBEC 81mg	3	
<i>cvs aspirin low strength</i> TBEC 81mg	3	
<i>cvs diclofenac sodium</i> GEL 1%	3	
<i>cvs diclofenac sodium</i> GEL 1%	3	
<i>diclofenac sodium (topical)</i> GEL 1%	3	
DOANS EXTRA STRENGTH TABS 500mg	3	
<i>ecotrin low strength</i> TBEC 81mg	3	
ECOTRIN LOW TAB 81MG EC	3	
ECOTRIN MAXIMUM STRENGTH TBEC 500mg	3	
ECOTRIN REGULAR STRENGTH TBEC 325mg	3	
<i>eq arthritis pain</i> GEL 1%	3	

This document includes a list of drugs covered on our formulary as of July 1, 2024. You can find information on what the symbols and abbreviations on this table mean by going to page 7.

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
<i>eq arthritis pain relieve</i> GEL 1%	3	
<i>eq aspirin adult low dose</i> TBEC 81mg	3	
<i>eq aspirin low dose</i> TBEC 81mg	3	
EXCEDRIN TAB	3	
<i>extra strength bayer arth</i> TBEC 500mg	3	
FEVERALL JUNIOR STRENGTH SUPP 325mg	3	
FEVERALL SUP 80MG SUPP 80mg	3	
<i>ft arthritis pain</i> GEL 1%	3	
<i>gnp arthritis pain</i> GEL 1%	3	
<i>gnp aspirin</i> TBEC 81mg	3	
<i>gnp aspirin low dose</i> TBEC 81mg	3	
<i>gnp diclofenac sodium</i> GEL 1%	3	
<i>goodsense arthritis pain</i> GEL 1%	3	
<i>goodsense aspirin</i> TBEC 81mg	3	
<i>goodsense aspirin low dos</i> TBEC 81mg	3	
GOODYS POW EX ST	3	
<i>h-e-b aspirin</i> TBEC 81mg	3	
HISTAFLEX TAB 325-25MG	3	
<i>hm aspirin ec low dose</i> TBEC 81mg	3	
HM PAIN REL DRO 80/0.8ML	3	
JR NON-ASA TAB 160MG QM	3	
<i>kls arthritis pain relief</i> GEL 1%	3	
<i>kls aspirin low dose</i> TBEC 81mg	3	

This document includes a list of drugs covered on our formulary as of July 1, 2024. You can find information on what the symbols and abbreviations on this table mean by going to page 7.

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
<i>kls diclofenac sodium</i> GEL 1%	3	
<i>kp aspirin</i> TBEC 81mg	3	
<i>magnesium salicylate</i> TABS 500mg	3	
MEDI-TABS TAB 500MG	3	
<i>miniprin low dose</i> TBEC 81mg	3	
<i>mm aspirin</i> TBEC 81mg	3	
<i>motrin arthritis pain</i> GEL 1%	3	
<i>nicotine polacrilex</i> LOZG 2mg	3	
PAIN RELIEF TAB	3	
<i>painaid</i>	3	
<i>px enteric aspirin</i> TBEC 81mg	3	
<i>qc aspirin low dose</i> TBEC 81mg	3	
<i>qc diclofenac sodiium</i> GEL 1%	3	
<i>ra antacid pain relief</i>	3	
<i>ra aspirin ec</i> TBEC 81mg	3	
<i>ra aspirin ec adult low s</i> TBEC 81mg	3	
<i>sb aspirin</i> TBEC 81mg	3	
<i>sb aspirin adult low stre</i> TBEC 81mg	3	
<i>sb low dose asa ec</i> TBEC 81mg	3	
<i>sm 8 hour pain relief</i> TBCR 650mg	3	
<i>sm arthritis pain</i> GEL 1%	3	
<i>sm aspirin adult low stre</i> TBEC 81mg	3	
<i>sm aspirin ec low strengt</i> TBEC 81mg	3	

This document includes a list of drugs covered on our formulary as of July 1, 2024. You can find information on what the symbols and abbreviations on this table mean by going to page 7.

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
<i>sm aspirin low dose</i> TBEC 81mg	3	
<i>st joseph aspirin</i> TBEC 81mg	3	
<i>st joseph low dose aspiri</i> TBEC 81mg	3	
TEMPRA 3 CHW 160MG CHEW 160mg	3	
<i>tgt acetaminophen melts c</i> TBDP 80mg	3	
TYLENOL CAP 500MG CAPS 500mg	3	
TYLENOL CAPLETS TABS 325mg	3	
TYLENOL CHILDRENS SUSP 160mg/5ml	3	
TYLENOL ER TAB 650MG TBCR 650mg	3	
TYLENOL EXTRA STRENGTH LIQD 1000mg/30ml	3	
VOLTAREN ARTHRITIS PAIN GEL 1%	3	
<b>NSAIDS</b>		
<i>addaprin</i> TABS 200mg	3	
<i>advil junior strength</i> CHEW 100mg; TABS 100mg	3	
ALEVE CAPS 220mg; TABS 220mg	3	
<i>all day pain relief</i> TABS 220mg	3	
<i>celecoxib</i> CAPS 50mg, 100mg, 200mg	1	QL (60 caps / 30 days)
<i>celecoxib</i> CAPS 400mg	1	QL (30 caps / 30 days)
CHILDRENS ADVIL SUSP 40mg/ml	3	
<i>childrens ibuprofen</i> SUSP 40mg/ml	3	
CHILDRENS MOTRIN JUNIOR S CHEW 100mg	3	
<i>diclofenac potassium</i> TABS 50mg	1	QL (120 tabs / 30 days)

This document includes a list of drugs covered on our formulary as of July 1, 2024. You can find information on what the symbols and abbreviations on this table mean by going to page 7.

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
<i>diclofenac sodium</i> TB24 100mg; TBEC 25mg, 50mg, 75mg	1	
<i>diflunisal</i> TABS 500mg	1	
<i>ec-naproxen</i> TBEC 375mg	1	QL (120 tabs / 30 days)
<i>ec-naproxen</i> TBEC 500mg	1	QL (90 tabs / 30 days)
<i>eq ibuprofen</i> CAPS 200mg	3	
<i>eq naproxen sodium</i> CAPS 220mg	3	
<i>etodolac</i> CAPS 200mg, 300mg; TABS 400mg, 500mg; TB24 400mg, 500mg, 600mg	1	
<i>flurbiprofen</i> TABS 100mg	1	
HCA IBUPROFE CAP SOFTGEL	3	
HM IBUPROFEN SUS 100/5ML	3	
<i>ibu</i> TABS 400mg, 600mg, 800mg	1	
<i>ibuprofen</i> SUSP 100mg/5ml; TABS 400mg, 600mg, 800mg	1	
<i>meloxicam</i> TABS 7.5mg, 15mg	1	
MOTRIN MIGRA TAB 200MG	3	
<i>nabumetone</i> TABS 500mg, 750mg	1	
<i>naproxen</i> TABS 250mg, 375mg, 500mg	1	
<i>naproxen</i> TBEC 375mg	1	QL (120 tabs / 30 days)
<i>naproxen</i> TBEC 500mg	1	QL (90 tabs / 30 days)
<i>naproxen sodium</i> TABS 275mg, 550mg	1	
<i>piroxicam</i> CAPS 10mg, 20mg	1	
<i>sb childrens ibuprofen</i> SUSP 100mg/5ml	3	

This document includes a list of drugs covered on our formulary as of July 1, 2024. You can find information on what the symbols and abbreviations on this table mean by going to page 7.



<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
<i>sulindac</i> TABS 150mg, 200mg	1	
<b>OPIOID ANALGESICS, LONG-ACTING</b>		
<i>buprenorphine</i> PTWK 5mcg/hr, 7.5mcg/hr, 10mcg/hr, 15mcg/hr, 20mcg/hr	1	QL (4 patches / 28 days), PA
<i>fentanyl</i> PT72 12mcg/hr, 25mcg/hr, 37.5mcg/hr, 50mcg/hr, 62.5mcg/hr, 75mcg/hr, 87.5mcg/hr, 100mcg/hr	1	QL (10 patches / 30 days), PA
<i>hydrocodone bitartrate</i> T24A 20mg, 30mg, 40mg, 60mg	1	QL (30 tabs / 30 days), PA
<i>hydrocodone bitartrate</i> T24A 80mg, 100mg, 120mg	2	QL (30 tabs / 30 days), PA
HYSINGLA ER T24A 20mg, 30mg, 40mg, 60mg, 80mg, 100mg, 120mg	2	QL (30 tabs / 30 days), PA
<i>methadone hcl</i> SOLN 5mg/5ml, 10mg/5ml	1	QL (450 mL / 30 days), PA
<i>methadone hcl</i> TABS 5mg, 10mg	1	QL (90 tabs / 30 days), PA
<i>methadone hydrochloride i</i> CONC 10mg/ml	1	QL (90 mL / 30 days), PA
<i>morphine sulfate</i> TBCR 15mg, 30mg, 60mg, 100mg, 200mg	1	QL (90 tabs / 30 days), PA
OXYCONTIN T12A 10mg, 15mg, 20mg, 30mg, 40mg, 60mg, 80mg	2	QL (60 tabs / 30 days), PA
<b>OPIOID ANALGESICS, SHORT-ACTING</b>		
<i>acetaminophen w/ codeine soln</i> 120-12 mg/5ml	1	QL (2700 mL / 30 days)
<i>acetaminophen w/ codeine tab</i> 300-15 mg	1	QL (400 tabs / 30 days)
<i>acetaminophen w/ codeine tab</i> 300-30 mg	1	QL (360 tabs / 30 days)
<i>acetaminophen w/ codeine tab</i> 300-60 mg	1	QL (180 tabs / 30 days)
<i>butorphanol tartrate</i> SOLN 1mg/ml, 2mg/ml	2	

This document includes a list of drugs covered on our formulary as of July 1, 2024. You can find information on what the symbols and abbreviations on this table mean by going to page 7.

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
<i>endocet tab 2.5-325mg</i>	1	QL (360 tabs / 30 days)
<i>endocet tab 5-325mg</i>	1	QL (360 tabs / 30 days)
<i>endocet tab 7.5-325mg</i>	1	QL (240 tabs / 30 days)
<i>endocet tab 10-325mg</i>	1	QL (180 tabs / 30 days)
<i>fentanyl citrate</i> LPOP 200mcg	1	QL (120 lozenges / 30 days), PA
<i>fentanyl citrate</i> LPOP 400mcg, 600mcg, 800mcg, 1200mcg, 1600mcg	2	QL (120 lozenges / 30 days), PA
<i>hydrocodone-acetaminophen soln 7.5-325 mg/15ml</i>	1	QL (2700 mL / 30 days)
<i>hydrocodone-acetaminophen tab 5-325 mg</i>	1	QL (240 tabs / 30 days)
<i>hydrocodone-acetaminophen tab 7.5-325 mg</i>	1	QL (180 tabs / 30 days)
<i>hydrocodone-acetaminophen tab 10-325 mg</i>	1	QL (180 tabs / 30 days)
<i>hydrocodone-ibuprofen tab 7.5-200 mg</i>	1	QL (150 tabs / 30 days)
<i>hydromorphone hcl</i> LIQD 1mg/ml	1	QL (600 mL / 30 days)
<i>hydromorphone hcl</i> TABS 2mg, 4mg, 8mg	1	QL (180 tabs / 30 days)
MORPHINE SULFATE SOLN 2mg/ml, 4mg/ml, 5mg/ml, 8mg/ml, 10mg/ml, 50mg/ml	2	B/D
<i>morphine sulfate</i> SOLN 4mg/ml, 8mg/ml, 10mg/ml	2	B/D
<i>morphine sulfate</i> SOLN 10mg/5ml, 20mg/5ml	1	QL (900 mL / 30 days)
<i>morphine sulfate</i> SOLN 100mg/5ml	1	QL (180 mL / 30 days)
<i>morphine sulfate</i> TABS 15mg, 30mg	1	QL (180 tabs / 30 days)
MORPHINE SULFATE/SODIUM C SOLN 1mg/ml	2	B/D

This document includes a list of drugs covered on our formulary as of July 1, 2024. You can find information on what the symbols and abbreviations on this table mean by going to page 7.

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
<i>nalbuphine hcl</i> SOLN 10mg/ml, 20mg/ml	2	
<i>oxycodone hcl</i> CAPS 5mg	1	QL (180 caps / 30 days)
<i>oxycodone hcl</i> CONC 100mg/5ml	1	QL (180 mL / 30 days)
<i>oxycodone hcl</i> SOLN 5mg/5ml	1	QL (900 mL / 30 days)
<i>oxycodone hcl</i> TABS 5mg, 10mg, 15mg, 20mg, 30mg	1	QL (180 tabs / 30 days)
<i>oxycodone w/ acetaminophen tab 2.5-325 mg</i>	1	QL (360 tabs / 30 days)
<i>oxycodone w/ acetaminophen tab 5-325 mg</i>	1	QL (360 tabs / 30 days)
<i>oxycodone w/ acetaminophen tab 7.5-325 mg</i>	1	QL (240 tabs / 30 days)
<i>oxycodone w/ acetaminophen tab 10-325 mg</i>	1	QL (180 tabs / 30 days)
<i>tramadol hcl</i> TABS 50mg	1	QL (240 tabs / 30 days)
<i>tramadol-acetaminophen tab 37.5-325 mg</i>	1	QL (240 tabs / 30 days)

## **ANESTHETICS**

### **LOCAL ANESTHETICS**

<i>lidocaine hcl (local anesth.)</i> SOLN .5%, 1%, 1.5%, 2%	1	B/D
---	---	-----

## **ANTI-INFECTIVES**

### **ANTI-INFECTIVES - MISCELLANEOUS**

<i>albendazole</i> TABS 200mg	2	QL (672 tabs / year), PA
<i>amikacin sulfate</i> SOLN 1gm/4ml, 500mg/2ml	1	
ANTIMINTH SUS 250/5ML SUSP 250mg/5ml	3	
<i>ascarel</i> SUSP 250mg/5ml	3	
<i>atovaquone</i> SUSP 750mg/5ml	1	

This document includes a list of drugs covered on our formulary as of July 1, 2024. You can find information on what the symbols and abbreviations on this table mean by going to page 7.

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
<i>aztreonam</i> SOLR 1gm, 2gm	1	
CAYSTON SOLR 75mg	2	NM, LA, PA
<i>clindamycin hcl</i> CAPS 75mg, 150mg, 300mg	1	
<i>clindamycin palmitate hydrochloride</i> SOLR 75mg/5ml	1	
<i>clindamycin phosphate</i> SOLN 600mg/4ml, 900mg/6ml, 9000mg/60ml	1	
<i>clindamycin phosphate in d5w iv soln</i> 300 mg/50ml	1	
<i>clindamycin phosphate in d5w iv soln</i> 600 mg/50ml	1	
<i>clindamycin phosphate in d5w iv soln</i> 900 mg/50ml	1	
CLINDMYC/NAC INJ 300/50ML	2	
CLINDMYC/NAC INJ 600/50ML	2	
CLINDMYC/NAC INJ 900/50ML	2	
<i>colistimethate sodium</i> SOLR 150mg	1	
<i>dapsone</i> TABS 25mg, 100mg	1	
DAPTOMYCIN SOLR 350mg	2	
<i>daptomycin</i> SOLR 350mg, 500mg	2	
EMVERM CHEW 100mg	2	QL (12 tabs / year)
<i>ertapenem sodium</i> SOLR 1gm	1	
<i>gentamicin in saline inj</i> 0.8 mg/ml	1	
<i>gentamicin in saline inj</i> 1 mg/ml	1	
<i>gentamicin in saline inj</i> 1.2 mg/ml	1	

This document includes a list of drugs covered on our formulary as of July 1, 2024. You can find information on what the symbols and abbreviations on this table mean by going to page 7.

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
<i>gentamicin in saline inj 1.6 mg/ml</i>	1	
<i>gentamicin in saline inj 2 mg/ml</i>	1	
<i>gentamicin sulfate SOLN 10mg/ml, 40mg/ml</i>	1	
<i>imipenem-cilastatin intravenous for soln 250 mg</i>	1	
<i>imipenem-cilastatin intravenous for soln 500 mg</i>	1	
<i>ivermectin TABS 3mg</i>	1	QL (12 tabs / 90 days), PA
<i>linezolid SOLN 600mg/300ml</i>	1	
<i>linezolid SUSR 100mg/5ml</i>	2	QL (1800 mL / 30 days)
<i>linezolid TABS 600mg</i>	1	QL (60 tabs / 30 days)
LINEZOLID INJ 2MG/ML	1	
<i>meropenem SOLR 1gm, 500mg</i>	1	
<i>methenamine hippurate TABS 1gm</i>	1	
<i>metronidazole SOLN 500mg/100ml; TABS 250mg, 500mg</i>	1	
<i>neomycin sulfate TABS 500mg</i>	1	
<i>nitazoxanide TABS 500mg</i>	2	QL (6 tabs / 30 days)
<i>nitrofurantoin macrocrystal CAPS 50mg, 100mg</i>	2	
<i>nitrofurantoin monohyd macro CAPS 100mg</i>	2	
<i>pentamidine isethionate inh SOLR 300mg</i>	1	B/D
<i>pentamidine isethionate inj SOLR 300mg</i>	1	
<i>praziquantel TABS 600mg</i>	1	

This document includes a list of drugs covered on our formulary as of July 1, 2024. You can find information on what the symbols and abbreviations on this table mean by going to page 7.

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
REESES PINWORM MEDICINE TABS 180mg	3	
SIVEXTRO SOLR 200mg; TABS 200mg	2	
<i>streptomycin sulfate</i> SOLR 1gm	2	
<i>sulfadiazine</i> TABS 500mg	2	
<i>sulfamethoxazole-trimethoprim iv soln</i> 400-80 mg/5ml	1	
<i>sulfamethoxazole-trimethoprim susp 200-40</i> mg/5ml	1	
<i>sulfamethoxazole-trimethoprim tab 400-80</i> mg	1	
<i>sulfamethoxazole-trimethoprim tab 800-160</i> mg	1	
<i>tinidazole</i> TABS 250mg, 500mg	1	
<i>tobramycin</i> NEBU 300mg/5ml	2	NM, PA
<i>tobramycin sulfate</i> SOLN 1.2gm/30ml, 10mg/ml, 40mg/ml, 80mg/2ml	1	
<i>trimethoprim</i> TABS 100mg	1	
<i>vancomycin hcl</i> CAPS 125mg	1	QL (80 caps / 180 days)
<i>vancomycin hcl</i> CAPS 250mg	1	QL (160 caps / 180 days)
<i>vancomycin hcl</i> SOLR 1gm, 5gm, 10gm, 500mg, 750mg	1	
VANCOMYCIN HYDROCHLORIDE SOLR 1gm, 5gm, 10gm, 500mg	1	
VANCOMYCIN INJ 1 GM	2	
VANCOMYCIN INJ 500MG	2	
VANCOMYCIN INJ 750MG	2	

This document includes a list of drugs covered on our formulary as of July 1, 2024. You can find information on what the symbols and abbreviations on this table mean by going to page 7.

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
<b>ANTIFUNGALS</b>		
ABELCET SUSP 5mg/ml	2	B/D
<i>amphotericin b</i> SOLR 50mg	1	B/D
<i>amphotericin b liposome</i> SUSR 50mg	2	B/D
<i>caspofungin acetate</i> SOLR 50mg, 70mg	1	
<i>fluconazole</i> SUSR 10mg/ml, 40mg/ml; TABS 50mg, 100mg, 150mg, 200mg	1	
<i>fluconazole in nacl 0.9% inj 200 mg/100ml</i>	1	
<i>fluconazole in nacl 0.9% inj 400 mg/200ml</i>	1	
<i>flucytosine</i> CAPS 250mg, 500mg	2	PA
<i>griseofulvin microsize</i> SUSP 125mg/5ml; TABS 500mg	1	
<i>griseofulvin ultramicrosize</i> TABS 125mg, 250mg	1	
<i>itraconazole</i> CAPS 100mg	1	PA
<i>ketoconazole</i> TABS 200mg	1	PA
<i>miconazole sodium</i> SOLR 50mg, 100mg	2	
<i>nystatin</i> TABS 500000unit	1	
<i>posaconazole</i> SUSP 40mg/ml	2	QL (630 mL / 30 days), PA
<i>posaconazole</i> TBEC 100mg	2	QL (93 tabs / 30 days), PA
<i>terbinafine hcl</i> TABS 250mg	1	QL (90 tabs / year)
<i>voriconazole</i> SOLR 200mg	1	PA
<i>voriconazole</i> SUSR 40mg/ml	2	PA
<i>voriconazole</i> TABS 50mg	1	QL (480 tabs / 30 days), PA

This document includes a list of drugs covered on our formulary as of July 1, 2024. You can find information on what the symbols and abbreviations on this table mean by going to page 7.

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
<i>voriconazole</i> TABS 200mg	1	QL (120 tabs / 30 days), PA
<b>ANTIMALARIALS</b>		
<i>atovaquone-proguanil hcl tab 62.5-25 mg</i>	1	
<i>atovaquone-proguanil hcl tab 250-100 mg</i>	1	
<i>chloroquine phosphate</i> TABS 250mg, 500mg	1	
COARTEM TAB 20-120MG	2	
<i>mefloquine hcl</i> TABS 250mg	1	
<i>primaquine phosphate</i> TABS 26.3mg	1	
PRIMAQUINE PHOSPHATE TABS 26.3mg	2	
<i>quinine sulfate</i> CAPS 324mg	1	PA
<b>ANTIRETROVIRAL AGENTS</b>		
<i>abacavir sulfate</i> SOLN 20mg/ml; TABS 300mg	1	NM
APTIVUS CAPS 250mg	2	NM
<i>atazanavir sulfate</i> CAPS 150mg, 200mg, 300mg	1	NM
<i>darunavir</i> TABS 600mg	2	QL (60 tabs / 30 days), NM
<i>darunavir</i> TABS 800mg	2	QL (30 tabs / 30 days), NM
EDURANT TABS 25mg	2	NM
<i>efavirenz</i> CAPS 50mg, 200mg; TABS 600mg	1	NM
<i>emtricitabine</i> CAPS 200mg	1	NM
EMTRIVA SOLN 10mg/ml	2	NM
<i>etravirine</i> TABS 100mg, 200mg	2	NM

This document includes a list of drugs covered on our formulary as of July 1, 2024. You can find information on what the symbols and abbreviations on this table mean by going to page 7.



<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
<i>fosamprenavir calcium</i> TABS 700mg	2	NM
FUZEON SOLR 90mg	2	NM, LA
INTELENCE TABS 25mg	2	NM
ISENTRESS CHEW 25mg, 100mg; PACK 100mg; TABS 400mg	2	NM
ISENTRESS HD TABS 600mg	2	NM
<i>lamivudine</i> SOLN 10mg/ml; TABS 150mg, 300mg	1	NM
LEXIVA SUSP 50mg/ml	2	NM
<i>maraviroc</i> TABS 150mg, 300mg	2	NM
<i>nevirapine</i> SUSP 50mg/5ml; TABS 200mg; TB24 400mg	1	NM
NORVIR PACK 100mg	2	NM
PIFELTRO TABS 100mg	2	NM
PREZISTA SUSP 100mg/ml	2	QL (400 mL / 30 days), NM
PREZISTA TABS 75mg	2	QL (480 tabs / 30 days), NM
PREZISTA TABS 150mg	2	QL (240 tabs / 30 days), NM
REYATAZ PACK 50mg	2	NM
<i>ritonavir</i> TABS 100mg	1	NM
RUKOBIA TB12 600mg	2	NM
SELZENTRY SOLN 20mg/ml; TABS 25mg, 75mg	2	NM
SUNLENCA TBPK 300mg	2	NM, LA
<i>tenofovir disoproxil fumarate</i> TABS 300mg	1	NM

This document includes a list of drugs covered on our formulary as of July 1, 2024. You can find information on what the symbols and abbreviations on this table mean by going to page 7.

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
TIVICAY TABS 10mg, 25mg, 50mg	2	NM
TIVICAY PD TBSO 5mg	2	NM
TROGARZO SOLN 200mg/1.33ml	2	NM, LA
TYBOST TABS 150mg	2	NM
VIRACEPT TABS 250mg, 625mg	2	NM
VIREAD POWD 40mg/gm; TABS 150mg, 200mg, 250mg	2	NM
<i>zidovudine</i> CAPS 100mg; SYRP 50mg/5ml; TABS 300mg	1	NM
<b>ANTIRETROVIRAL COMBINATION AGENTS</b>		
<i>abacavir sulfate-lamivudine tab 600-300 mg</i>	1	NM
BIKTARVY TAB 30-120-15 MG	2	NM
BIKTARVY TAB 50-200-25 MG	2	NM
CIMDUO TAB 300-300	2	NM
COMPLERA TAB	2	NM
DELSTRIGO TAB	2	NM
DESCOVY TAB 120-15MG	2	QL (30 tabs / 30 days), NM
DESCOVY TAB 200/25MG	2	QL (30 tabs / 30 days), NM
DOVATO TAB 50-300MG	2	NM
<i>efavirenz-emtricitabine-tenofovir df tab 600-200-300 mg</i>	2	NM
<i>efavirenz-lamivudine-tenofovir df tab 400-300-300 mg</i>	2	NM
<i>efavirenz-lamivudine-tenofovir df tab 600-300-300 mg</i>	2	NM

This document includes a list of drugs covered on our formulary as of July 1, 2024. You can find information on what the symbols and abbreviations on this table mean by going to page 7.

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
<i>emtricitabine-tenofovir disoproxil fumarate tab 100-150 mg</i>	2	QL (30 tabs / 30 days), NM
<i>emtricitabine-tenofovir disoproxil fumarate tab 133-200 mg</i>	2	QL (30 tabs / 30 days), NM
<i>emtricitabine-tenofovir disoproxil fumarate tab 167-250 mg</i>	2	QL (30 tabs / 30 days), NM
<i>emtricitabine-tenofovir disoproxil fumarate tab 200-300 mg</i>	1	QL (30 tabs / 30 days), NM
EVOTAZ TAB 300-150	2	NM
GENVOYA TAB	2	NM
JULUCA TAB 50-25MG	2	NM
<i>lamivudine-zidovudine tab 150-300 mg</i>	1	NM
<i>lopinavir-ritonavir soln 400-100 mg/5ml (80-20 mg/ml)</i>	1	NM
<i>lopinavir-ritonavir tab 100-25 mg</i>	1	NM
<i>lopinavir-ritonavir tab 200-50 mg</i>	1	NM
ODEFSEY TAB	2	NM
PREZCOBIX TAB 800-150	2	NM
STRIBILD TAB	2	NM
SYMTUZA TAB	2	NM
TRIUMEQ PD TAB	2	NM
TRIUMEQ TAB	2	NM
TRIZIVIR TAB	2	NM
<b>ANTITUBERCULAR AGENTS</b>		
<i>cycloserine CAPS 250mg</i>	2	
<i>ethambutol hcl TABS 100mg, 400mg</i>	1	

This document includes a list of drugs covered on our formulary as of July 1, 2024. You can find information on what the symbols and abbreviations on this table mean by going to page 7.

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
<i>isoniazid</i> SYRP 50mg/5ml; TABS 100mg, 300mg	1	
PRIFTIN TABS 150mg	2	
<i>pyrazinamide</i> TABS 500mg	1	
<i>rifabutin</i> CAPS 150mg	1	
<i>rifampin</i> CAPS 150mg, 300mg; SOLR 600mg	1	
SIRTURO TABS 20mg, 100mg	2	NM, LA, PA
TRECTOR TABS 250mg	2	
<b>ANTIVIRALS</b>		
<i>acyclovir</i> CAPS 200mg; SUSP 200mg/5ml; TABS 400mg, 800mg	1	
<i>acyclovir sodium</i> SOLN 50mg/ml	1	B/D
<i>adefovir dipivoxil</i> TABS 10mg	1	NM
BARACLUDE SOLN .05mg/ml	2	NM
<i>entecavir</i> TABS .5mg, 1mg	1	NM
EPCLUSA PAK 150-37.5	2	NM, PA
EPCLUSA PAK 200-50MG	2	NM, PA
EPCLUSA TAB 200-50MG	2	NM, PA
EPCLUSA TAB 400-100	2	NM, PA
<i>famciclovir</i> TABS 125mg, 250mg, 500mg	1	
<i>ganciclovir sodium</i> SOLR 500mg	1	B/D
HARVONI PAK 33.75-150MG	2	NM, PA
HARVONI PAK 45-200MG	2	NM, PA
HARVONI TAB 45-200MG	2	NM, PA

This document includes a list of drugs covered on our formulary as of July 1, 2024. You can find information on what the symbols and abbreviations on this table mean by going to page 7.

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
HARVONI TAB 90-400MG	2	NM, PA
<i>lamivudine (hbv)</i> TABS 100mg	1	NM
MAVYRET PAK 50-20MG	2	NM, PA
MAVYRET TAB 100-40MG	2	NM, PA
<i>oseltamivir phosphate</i> CAPS 30mg	1	QL (168 caps / year)
<i>oseltamivir phosphate</i> CAPS 45mg, 75mg	1	QL (84 caps / year)
<i>oseltamivir phosphate</i> SUSR 6mg/ml	1	QL (1080 mL / year)
PAXLOVID TAB 150-100	2	QL (40 tabs / 30 days); \$0 Cost Share
PAXLOVID TAB 300-100	2	QL (60 tabs / 30 days); \$0 Cost Share
PEGASYS SOLN 180mcg/ml; SOSY 180mcg/0.5ml	2	NM, PA
PREVYMIS TABS 240mg, 480mg	2	QL (28 tabs / 28 days), PA
RELENZA DISKHALER AEPB 5mg/blister	2	QL (6 inhalers / year)
<i>ribavirin (hepatitis c)</i> CAPS 200mg; TABS 200mg	1	NM
<i>rimantadine hydrochloride</i> TABS 100mg	1	
<i>valacyclovir hcl</i> TABS 1gm, 500mg	1	
<i>valganciclovir hcl</i> SOLR 50mg/ml	2	
<i>valganciclovir hcl</i> TABS 450mg	1	
VEMLIDY TABS 25mg	2	NM
VOSEVI TAB	2	NM, PA
XOFLUZA TBPK 40mg, 80mg	2	QL (1 tab / 180 days)

This document includes a list of drugs covered on our formulary as of July 1, 2024. You can find information on what the symbols and abbreviations on this table mean by going to page 7.

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
<b>CEPHALOSPORINS</b>		
<i>cefaclor</i> CAPS 250mg, 500mg; SUSR 250mg/5ml	1	
CEFACLOR ER TB12 500mg	2	
<i>cefadroxil</i> CAPS 500mg; SUSR 250mg/5ml, 500mg/5ml	1	
CEFAZOLIN SOLR 2gm, 3gm	2	
CEFAZOLIN INJ 1GM/50ML	2	
<i>cefazolin sodium</i> SOLR 1gm, 2gm, 3gm, 10gm, 500mg	1	
CEFAZOLIN SOLN 2GM/100ML-4%	2	
<i>cefdinir</i> CAPS 300mg; SUSR 125mg/5ml, 250mg/5ml	1	
<i>cefepime hcl</i> SOLR 1gm, 2gm	1	
<i>cefixime</i> CAPS 400mg; SUSR 100mg/5ml, 200mg/5ml	1	
<i>cefoxitin sodium</i> SOLR 1gm, 2gm, 10gm	1	
<i>cefpodoxime proxetil</i> SUSR 50mg/5ml, 100mg/5ml; TABS 100mg, 200mg	1	
<i>cefprozil</i> SUSR 125mg/5ml, 250mg/5ml; TABS 250mg, 500mg	1	
<i>ceftazidime</i> SOLR 1gm, 2gm, 6gm	1	
<i>ceftriaxone sodium</i> SOLR 1gm, 2gm, 10gm, 250mg, 500mg	1	
<i>cefuroxime axetil</i> TABS 250mg, 500mg	1	
<i>cefuroxime sodium</i> SOLR 1.5gm, 750mg	1	
<i>cephalexin</i> CAPS 250mg, 500mg; SUSR 125mg/5ml, 250mg/5ml	1	

This document includes a list of drugs covered on our formulary as of July 1, 2024. You can find information on what the symbols and abbreviations on this table mean by going to page 7.

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
<i>tazicef</i> SOLR 1gm, 2gm, 6gm	1	
TEFLARO SOLR 400mg, 600mg	2	
<b><i>ERYTHROMYCINS/MACROLIDES</i></b>		
<i>azithromycin</i> PACK 1gm; SOLR 500mg; SUSR 100mg/5ml, 200mg/5ml; TABS 250mg, 500mg, 600mg	1	
<i>clarithromycin</i> SUSR 125mg/5ml, 250mg/5ml; TABS 250mg, 500mg; TB24 500mg	1	
DIFICID SUSR 40mg/ml; TABS 200mg	2	
<i>e.e.s. 400</i> TABS 400mg	1	
<i>ery-tab</i> TBEC 250mg, 333mg, 500mg	1	
ERYTHROCIN LACTOBIONATE SOLR 500mg	2	
<i>erythrocin stearate</i> TABS 250mg	1	
<i>erythromycin base</i> CPEP 250mg; TABS 250mg, 500mg; TBEC 250mg, 333mg, 500mg	1	
<i>erythromycin ethylsuccinate</i> TABS 400mg	1	
<i>erythromycin lactobionate</i> SOLR 500mg	1	
<b><i>FLUOROQUINOLONES</i></b>		
CIPRO SUSR 500mg/5ml	2	
<i>ciprofloxacin 200 mg/100ml in d5w</i>	1	
<i>ciprofloxacin 400 mg/200ml in d5w</i>	1	
<i>ciprofloxacin hcl</i> TABS 250mg, 500mg, 750mg	1	
<i>levofloxacin</i> SOLN 25mg/ml; TABS 250mg, 500mg, 750mg	1	
<i>levofloxacin in d5w iv soln 250 mg/50ml</i>	1	

This document includes a list of drugs covered on our formulary as of July 1, 2024. You can find information on what the symbols and abbreviations on this table mean by going to page 7.

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
<i>levofloxacin in d5w iv soln 500 mg/100ml</i>	1	
<i>levofloxacin in d5w iv soln 750 mg/150ml</i>	1	
<i>moxifloxacin hcl TABS 400mg</i>	1	
<i>moxifloxacin hcl 400 mg/250ml in sodium chloride 0.8% inj</i>	1	
<b>PENICILLINS</b>		
<i>amoxicillin CAPS 250mg, 500mg; CHEW 125mg, 250mg; SUSR 125mg/5ml, 200mg/5ml, 250mg/5ml, 400mg/5ml; TABS 500mg, 875mg</i>	1	
<i>amoxicillin &amp; k clavulanate chew tab 200-28.5 mg</i>	1	
<i>amoxicillin &amp; k clavulanate chew tab 400-57 mg</i>	1	
<i>amoxicillin &amp; k clavulanate for susp 200-28.5 mg/5ml</i>	1	
<i>amoxicillin &amp; k clavulanate for susp 250-62.5 mg/5ml</i>	1	
<i>amoxicillin &amp; k clavulanate for susp 400-57 mg/5ml</i>	1	
<i>amoxicillin &amp; k clavulanate for susp 600-42.9 mg/5ml</i>	1	
<i>amoxicillin &amp; k clavulanate tab 250-125 mg</i>	1	
<i>amoxicillin &amp; k clavulanate tab 500-125 mg</i>	1	
<i>amoxicillin &amp; k clavulanate tab 875-125 mg</i>	1	
<i>amoxicillin &amp; k clavulanate tab er 12hr 1000-62.5 mg</i>	1	
<i>ampicillin CAPS 500mg</i>	1	
<i>ampicillin &amp; sulbactam sodium for inj 1.5 (1-0.5) gm</i>	1	

This document includes a list of drugs covered on our formulary as of July 1, 2024. You can find information on what the symbols and abbreviations on this table mean by going to page 7.



<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
<i>ampicillin &amp; sulbactam sodium for inj 3 (2-1) gm</i>	1	
<i>ampicillin &amp; sulbactam sodium for iv soln 1.5 (1-0.5) gm</i>	1	
<i>ampicillin &amp; sulbactam sodium for iv soln 3 (2-1) gm</i>	1	
<i>ampicillin &amp; sulbactam sodium for iv soln 15 (10-5) gm</i>	1	
<i>ampicillin sodium SOLR 1gm, 2gm, 10gm, 125mg, 250mg, 500mg</i>	1	
BICILLIN L-A SUSY 600000unit/ml, 1200000unit/2ml, 2400000unit/4ml	2	
<i>dicloxacillin sodium CAPS 250mg, 500mg</i>	1	
<i>nafcillin sodium SOLR 1gm, 2gm</i>	1	
<i>nafcillin sodium SOLR 10gm</i>	2	
<i>oxacillin sodium SOLR 1gm, 2gm, 10gm</i>	1	
PEN GK/DEXTR INJ 40000/ML	2	
PEN GK/DEXTR INJ 60000/ML	2	
<i>penicillin g potassium SOLR 5000000unit, 20000000unit</i>	1	
<i>penicillin g sodium SOLR 5000000unit</i>	1	
<i>penicillin v potassium SOLR 125mg/5ml, 250mg/5ml; TABS 250mg, 500mg</i>	1	
<i>pfizerpen SOLR 5000000unit, 20000000unit</i>	1	
<i>piperacillin sod-tazobactam na for inj 3.375 gm (3-0.375 gm)</i>	1	
<i>piperacillin sod-tazobactam sod for inj 2.25 gm (2-0.25 gm)</i>	1	

This document includes a list of drugs covered on our formulary as of July 1, 2024. You can find information on what the symbols and abbreviations on this table mean by going to page 7.

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
<i>piperacillin sod-tazobactam sod for inj 4.5 gm (4-0.5 gm)</i>	1	
<i>piperacillin sod-tazobactam sod for inj 13.5 gm (12-1.5 gm)</i>	1	
<i>piperacillin sod-tazobactam sod for inj 40.5 gm (36-4.5 gm)</i>	1	

### **TETRACYCLINES**

<i>doxy 100 SOLR 100mg</i>	1	
<i>doxycycline (monohydrate) CAPS 50mg, 100mg; SUSR 25mg/5ml; TABS 50mg, 75mg, 100mg</i>	1	
<i>doxycycline hyclate CAPS 50mg, 100mg; SOLR 100mg; TABS 20mg, 100mg</i>	1	
<i>minocycline hcl CAPS 50mg, 75mg, 100mg</i>	1	
NUZYRA SOLR 100mg; TABS 150mg	2	NM, LA
<i>tetracycline hcl CAPS 250mg, 500mg</i>	1	PA
<i>tigecycline SOLR 50mg</i>	2	

### **ANTINEOPLASTIC AGENTS**

#### **ALKYLATING AGENTS**

BENDEKA SOLN 100mg/4ml	2	B/D, NM, LA
<i>carboplatin SOLN 50mg/5ml, 150mg/15ml, 450mg/45ml, 600mg/60ml</i>	1	B/D
<i>cisplatin SOLN 50mg/50ml, 100mg/100ml, 200mg/200ml</i>	1	B/D
<i>cyclophosphamide CAPS 25mg, 50mg; SOLR 1gm, 500mg</i>	1	B/D
CYCLOPHOSPHAMIDE SOLN 1gm/5ml, 500mg/2.5ml, 500mg/ml; TABS 25mg, 50mg	2	B/D
<i>cyclophosphamide SOLR 2gm</i>	2	B/D

This document includes a list of drugs covered on our formulary as of July 1, 2024. You can find information on what the symbols and abbreviations on this table mean by going to page 7.

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
CYCLOPHOSPHAMIDE MONOHYDR SOLN 2gm/10ml	2	B/D
GLEOSTINE CAPS 10mg, 40mg, 100mg	2	NM
LEUKERAN TABS 2mg	2	
<i>oxaliplatin</i> SOLN 50mg/10ml, 100mg/20ml, 200mg/40ml; SOLR 50mg	1	B/D
<i>oxaliplatin</i> SOLR 100mg	2	B/D
<i>paraplatin</i> SOLN 1000mg/100ml	1	B/D
<b>ANTIBIOTICS</b>		
<i>doxorubicin hcl</i> SOLN 2mg/ml	1	B/D
<i>doxorubicin hcl liposomal</i> INJ 2mg/ml	2	B/D
ELLENCE SOLN 50mg/25ml, 200mg/100ml	2	B/D
<b>ANTIMETABOLITES</b>		
<i>azacitidine</i> SUSR 100mg	2	B/D, NM
<i>cytarabine</i> SOLN 20mg/ml	1	B/D
<i>fluorouracil</i> SOLN 1gm/20ml, 2.5gm/50ml, 5gm/100ml, 500mg/10ml	1	B/D
<i>gemcitabine hcl</i> SOLN 1gm/26.3ml, 2gm/52.6ml, 200mg/5.26ml; SOLR 1gm, 2gm, 200mg	1	B/D
INQOVI TAB 35-100MG	2	QL (5 tabs / 28 days), NM, LA, PA
LONSURF TAB 15-6.14	2	QL (100 tabs / 28 days), NM, LA, PA
LONSURF TAB 20-8.19	2	QL (80 tabs / 28 days), NM, LA, PA
<i>mercaptopurine</i> TABS 50mg	1	
<i>methotrexate sodium</i> SOLN 1gm/40ml, 50mg/2ml, 250mg/10ml; SOLR 1gm	1	B/D

This document includes a list of drugs covered on our formulary as of July 1, 2024. You can find information on what the symbols and abbreviations on this table mean by going to page 7.

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
ONUREG TABS 200mg, 300mg	2	QL (14 tabs / 28 days), NM, LA, PA
<i>pemetrexed disodium</i> SOLR 100mg, 500mg, 750mg, 1000mg	2	B/D
PURIXAN SUSP 2000mg/100ml	2	NM, LA
TABLOID TABS 40mg	2	
<b><i>HORMONAL ANTINEOPLASTIC AGENTS</i></b>		
<i>abiraterone acetate</i> TABS 250mg	2	QL (120 tabs / 30 days), NM, PA
<i>abiraterone acetate</i> TABS 500mg	2	QL (60 tabs / 30 days), NM, PA
AKEEGA TAB 50/500MG	2	QL (60 tabs / 30 days), NM, LA, PA
AKEEGA TAB 100/500	2	QL (60 tabs / 30 days), NM, LA, PA
<i>anastrozole</i> TABS 1mg	1	
<i>bicalutamide</i> TABS 50mg	1	
ELIGARD KIT 7.5mg, 22.5mg, 30mg, 45mg	2	NM, PA
ERLEADA TABS 60mg	2	QL (120 tabs / 30 days), NM, LA, PA
ERLEADA TABS 240mg	2	QL (30 tabs / 30 days), NM, LA, PA
EULEXIN CAPS 125mg	2	
<i>exemestane</i> TABS 25mg	1	
FIRMAGON SOLR 80mg, 120mg/vial	2	NM, PA
<i>fulvestrant</i> SOSY 250mg/5ml	2	B/D
<i>letrozole</i> TABS 2.5mg	1	

This document includes a list of drugs covered on our formulary as of July 1, 2024. You can find information on what the symbols and abbreviations on this table mean by going to page 7.

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
<i>leuprolide acetate</i> KIT 1mg/0.2ml	1	NM, PA
LUPRON DEPOT (1-MONTH) KIT 3.75mg	2	NM, PA
LUPRON DEPOT (3-MONTH) KIT 11.25mg	2	NM, PA
LYSODREN TABS 500mg	2	NM, LA
<i>megestrol acetate</i> TABS 20mg, 40mg	2	
<i>nilutamide</i> TABS 150mg	2	
NUBEQA TABS 300mg	2	QL (120 tabs / 30 days), NM, LA, PA
ORGOVYX TABS 120mg	2	NM, LA, PA
ORSERDU TABS 86mg	2	QL (90 tabs / 30 days), NM, LA, PA
ORSERDU TABS 345mg	2	QL (30 tabs / 30 days), NM, LA, PA
SOLTAMOX SOLN 10mg/5ml	2	
<i>tamoxifen citrate</i> TABS 10mg, 20mg	1	
<i>toremifene citrate</i> TABS 60mg	1	
XTANDI CAPS 40mg	2	QL (120 caps / 30 days), NM, LA, PA
XTANDI TABS 40mg	2	QL (120 tabs / 30 days), NM, LA, PA
XTANDI TABS 80mg	2	QL (60 tabs / 30 days), NM, LA, PA
<b>IMMUNOMODULATORS</b>		
<i>lenalidomide</i> CAPS 2.5mg, 5mg, 10mg, 15mg	2	QL (28 caps / 28 days), NM, LA, PA
<i>lenalidomide</i> CAPS 20mg, 25mg	2	QL (21 caps / 28 days), NM, LA, PA

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
POMALYST CAPS 1mg, 2mg, 3mg, 4mg	2	QL (21 caps / 28 days), NM, LA, PA
REVLIMID CAPS 2.5mg, 5mg, 10mg, 15mg	2	QL (28 caps / 28 days), NM, LA, PA
REVLIMID CAPS 20mg, 25mg	2	QL (21 caps / 28 days), NM, LA, PA
THALOMID CAPS 50mg	2	QL (84 caps / 28 days), NM, LA, PA
THALOMID CAPS 100mg	2	QL (112 caps / 28 days), NM, LA, PA
THALOMID CAPS 150mg, 200mg	2	QL (56 caps / 28 days), NM, LA, PA
<b>MISCELLANEOUS</b>		
BESREMI SOSY 500mcg/ml	2	QL (2 syringes / 28 days), NM, LA, PA
<i>bexarotene</i> CAPS 75mg	2	QL (300 caps / 30 days), NM, PA
<i>hydroxyurea</i> CAPS 500mg	1	
<i>irinotecan hcl</i> SOLN 40mg/2ml, 100mg/5ml, 300mg/15ml, 500mg/25ml	1	B/D
IWILFIN TABS 192mg	2	QL (240 tabs / 30 days), NM, LA, PA
KISQALI 200 PAK FEMARA	2	QL (49 tabs / 28 days), NM, PA
KISQALI 400 PAK FEMARA	2	QL (70 tabs / 28 days), NM, PA
KISQALI 600 PAK FEMARA	2	QL (91 tabs / 28 days), NM, PA
MATULANE CAPS 50mg	2	NM, LA
<i>tretinoin (chemotherapy)</i> CAPS 10mg	2	

This document includes a list of drugs covered on our formulary as of July 1, 2024. You can find information on what the symbols and abbreviations on this table mean by going to page 7.

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
WELIREG TABS 40mg	2	QL (90 tabs / 30 days), NM, LA, PA
<b>MITOTIC INHIBITORS</b>		
<i>docetaxel</i> CONC 20mg/ml	1	B/D
<i>docetaxel</i> CONC 80mg/4ml, 160mg/8ml; SOLN 20mg/2ml, 80mg/8ml, 160mg/16ml	2	B/D
DOCETAXEL CONC 80mg/4ml, 160mg/8ml; SOLN 20mg/2ml, 80mg/8ml, 160mg/16ml	2	B/D
<i>etoposide</i> SOLN 1gm/50ml, 100mg/5ml, 500mg/25ml	1	B/D
<i>paclitaxel</i> CONC 6mg/ml, 30mg/5ml, 150mg/25ml, 300mg/50ml	1	B/D
<i>paclitaxel protein-bound particles for iv susp 100 mg</i>	2	B/D, NM
<i>vincristine sulfate</i> SOLN 1mg/ml	1	B/D
<i>vinorelbine tartrate</i> SOLN 10mg/ml, 50mg/5ml	1	B/D
<b>MOLECULAR TARGET AGENTS</b>		
ALECENSA CAPS 150mg	2	QL (240 caps / 30 days), NM, LA, PA
ALUNBRIG TABS 30mg	2	QL (120 tabs / 30 days), NM, LA, PA
ALUNBRIG TABS 90mg, 180mg	2	QL (30 tabs / 30 days), NM, LA, PA
ALUNBRIG PAK	2	QL (30 tabs / 30 days), NM, LA, PA
AUGTYRO CAPS 40mg	2	QL (240 caps / 30 days), NM, LA, PA
AYVAKIT TABS 25mg, 50mg, 100mg, 200mg, 300mg	2	QL (30 tabs / 30 days), NM, LA, PA

This document includes a list of drugs covered on our formulary as of July 1, 2024. You can find information on what the symbols and abbreviations on this table mean by going to page 7.

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
BALVERSA TABS 3mg	2	QL (84 tabs / 28 days), NM, LA, PA
BALVERSA TABS 4mg	2	QL (56 tabs / 28 days), NM, LA, PA
BALVERSA TABS 5mg	2	QL (28 tabs / 28 days), NM, LA, PA
BORTEZOMIB SOLR 1mg, 2.5mg	2	NM, PA
<i>bortezomib</i> SOLR 3.5mg	2	NM, PA
BOSULIF CAPS 50mg	2	QL (360 caps / 30 days), NM, PA
BOSULIF CAPS 100mg	2	QL (150 caps / 25 days), NM, PA
BOSULIF TABS 100mg	2	QL (180 tabs / 30 days), NM, PA
BOSULIF TABS 400mg, 500mg	2	QL (30 tabs / 30 days), NM, PA
BRAFTOVI CAPS 75mg	2	QL (180 caps / 30 days), NM, LA, PA
BRUKINSA CAPS 80mg	2	QL (120 caps / 30 days), NM, LA, PA
CABOMETYX TABS 20mg, 40mg, 60mg	2	QL (30 tabs / 30 days), NM, LA, PA
CALQUENCE CAPS 100mg	2	QL (60 caps / 30 days), NM, LA, PA
CALQUENCE TABS 100mg	2	QL (60 tabs / 30 days), NM, LA, PA
CAPRELSA TABS 100mg	2	QL (60 tabs / 30 days), NM, LA, PA
CAPRELSA TABS 300mg	2	QL (30 tabs / 30 days), NM, LA, PA

This document includes a list of drugs covered on our formulary as of July 1, 2024. You can find information on what the symbols and abbreviations on this table mean by going to page 7.



<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
COMETRIQ (60MG DOSE) KIT 20mg	2	QL (84 caps / 28 days), NM, LA, PA
COMETRIQ KIT 100MG	2	QL (56 caps / 28 days), NM, LA, PA
COMETRIQ KIT 140MG	2	QL (112 caps / 28 days), NM, LA, PA
COPIKTRA CAPS 15mg, 25mg	2	QL (56 caps / 28 days), NM, LA, PA
COTELLIC TABS 20mg	2	QL (63 tabs / 28 days), NM, LA, PA
DAURISMO TABS 25mg	2	QL (60 tabs / 30 days), NM, LA, PA
DAURISMO TABS 100mg	2	QL (30 tabs / 30 days), NM, LA, PA
ERIVEDGE CAPS 150mg	2	QL (30 caps / 30 days), NM, LA, PA
<i>erlotinib hcl</i> TABS 25mg	2	QL (90 tabs / 30 days), NM, PA
<i>erlotinib hcl</i> TABS 100mg, 150mg	2	QL (30 tabs / 30 days), NM, PA
<i>everolimus</i> TABS 2.5mg, 5mg, 7.5mg, 10mg	2	QL (30 tabs / 30 days), NM, PA
<i>everolimus</i> TBSO 2mg	2	QL (150 tabs / 30 days), NM, PA
<i>everolimus</i> TBSO 3mg	2	QL (90 tabs / 30 days), NM, PA
<i>everolimus</i> TBSO 5mg	2	QL (60 tabs / 30 days), NM, PA
EXKIVITY CAPS 40mg	2	QL (120 caps / 30 days), NM, LA, PA
FOTIVDA CAPS .89mg, 1.34mg	2	QL (21 caps / 28 days), NM, LA, PA

This document includes a list of drugs covered on our formulary as of July 1, 2024. You can find information on what the symbols and abbreviations on this table mean by going to page 7.

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
FRUZAQLA CAPS 1mg	2	QL (84 caps / 28 days), NM, LA, PA
FRUZAQLA CAPS 5mg	2	QL (21 caps / 28 days), NM, LA, PA
GAVRETO CAPS 100mg	2	QL (120 caps / 30 days), NM, LA, PA
<i>gefitinib</i> TABS 250mg	2	QL (30 tabs / 30 days), NM, PA
GILOTRIF TABS 20mg, 30mg, 40mg	2	QL (30 tabs / 30 days), NM, LA, PA
HERCEP HYLEC SOL 60-10000	2	NM, LA, PA
HERCEPTIN SOLR 150mg	2	NM, LA, PA
HERZUMA SOLR 150mg, 420mg	2	NM, PA
IBRANCE CAPS 75mg, 100mg, 125mg	2	QL (21 caps / 28 days), NM, LA, PA
IBRANCE TABS 75mg, 100mg, 125mg	2	QL (21 tabs / 28 days), NM, LA, PA
ICLUSIG TABS 10mg, 15mg, 30mg, 45mg	2	QL (30 tabs / 30 days), NM, LA, PA
IDHIFA TABS 50mg, 100mg	2	QL (30 tabs / 30 days), NM, LA, PA
<i>imatinib mesylate</i> TABS 100mg	2	QL (90 tabs / 30 days), NM, PA
<i>imatinib mesylate</i> TABS 400mg	2	QL (60 tabs / 30 days), NM, PA
IMBRUVICA CAPS 70mg	2	QL (30 caps / 30 days), NM, LA, PA
IMBRUVICA CAPS 140mg	2	QL (120 caps / 30 days), NM, LA, PA
IMBRUVICA SUSP 70mg/ml	2	QL (216 mL / 27 days), NM, LA, PA

This document includes a list of drugs covered on our formulary as of July 1, 2024. You can find information on what the symbols and abbreviations on this table mean by going to page 7.

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
IMBRUVICA TABS 140mg, 280mg, 420mg	2	QL (30 tabs / 30 days), NM, LA, PA
INLYTA TABS 1mg	2	QL (180 tabs / 30 days), NM, LA, PA
INLYTA TABS 5mg	2	QL (120 tabs / 30 days), NM, LA, PA
INREBIC CAPS 100mg	2	QL (120 caps / 30 days), NM, LA, PA
JAKAFI TABS 5mg, 10mg, 15mg, 20mg, 25mg	2	QL (60 tabs / 30 days), NM, LA, PA
JAYPIRCA TABS 50mg	2	QL (30 tabs / 30 days), NM, LA, PA
JAYPIRCA TABS 100mg	2	QL (60 tabs / 30 days), NM, LA, PA
KADCYLA SOLR 100mg, 160mg	2	B/D, NM, LA
KANJINTI SOLR 150mg, 420mg	2	NM, LA, PA
KEYTRUDA SOLN 100mg/4ml	2	NM, LA, PA
KISQALI 200 DOSE TBPK 200mg	2	QL (21 tabs / 28 days), NM, PA
KISQALI 400 DOSE TBPK 200mg	2	QL (42 tabs / 28 days), NM, PA
KISQALI 600 DOSE TBPK 200mg	2	QL (63 tabs / 28 days), NM, PA
KOSELUGO CAPS 10mg	2	QL (240 caps / 30 days), NM, LA, PA
KOSELUGO CAPS 25mg	2	QL (120 caps / 30 days), NM, LA, PA
KRAZATI TABS 200mg	2	QL (180 tabs / 30 days), NM, LA, PA
<i>lapatinib ditosylate</i> TABS 250mg	2	QL (180 tabs / 30 days), NM, PA

This document includes a list of drugs covered on our formulary as of July 1, 2024. You can find information on what the symbols and abbreviations on this table mean by going to page 7.

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
LENVIMA 4 MG DAILY DOSE CPPK 4mg	2	QL (30 caps / 30 days), NM, LA, PA
LENVIMA 8 MG DAILY DOSE CPPK 4mg	2	QL (60 caps / 30 days), NM, LA, PA
LENVIMA 10 MG DAILY DOSE CPPK 10mg	2	QL (30 caps / 30 days), NM, LA, PA
LENVIMA 12MG DAILY DOSE CPPK 4mg	2	QL (90 caps / 30 days), NM, LA, PA
LENVIMA 20 MG DAILY DOSE CPPK 10mg	2	QL (60 caps / 30 days), NM, LA, PA
LENVIMA CAP 14 MG	2	QL (60 caps / 30 days), NM, LA, PA
LENVIMA CAP 18 MG	2	QL (90 caps / 30 days), NM, LA, PA
LENVIMA CAP 24 MG	2	QL (90 caps / 30 days), NM, LA, PA
LORBRENA TABS 25mg	2	QL (90 tabs / 30 days), NM, LA, PA
LORBRENA TABS 100mg	2	QL (30 tabs / 30 days), NM, LA, PA
LUMAKRAS TABS 120mg	2	QL (240 tabs / 30 days), NM, LA, PA
LUMAKRAS TABS 320mg	2	QL (90 tabs / 30 days), NM, LA, PA
LYNPARZA TABS 100mg, 150mg	2	QL (120 tabs / 30 days), NM, LA, PA
LYTGOBI (12 MG DAILY DOSE) TBPK 4mg	2	QL (84 tabs / 28 days), NM, LA, PA
LYTGOBI (16 MG DAILY DOSE) TBPK 4mg	2	QL (112 tabs / 28 days), NM, LA, PA
LYTGOBI (20 MG DAILY DOSE) TBPK 4mg	2	QL (140 tabs / 28 days), NM, LA, PA

This document includes a list of drugs covered on our formulary as of July 1, 2024. You can find information on what the symbols and abbreviations on this table mean by going to page 7.

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
MEKINIST SOLR .05mg/ml	2	QL (1260 mL / 30 days), NM, LA, PA
MEKINIST TABS 2mg	2	QL (30 tabs / 30 days), NM, LA, PA
MEKINIST TABS .5mg	2	QL (90 tabs / 30 days), NM, LA, PA
MEKTOVI TABS 15mg	2	QL (180 tabs / 30 days), NM, LA, PA
MONJUVI SOLR 200mg	2	NM, LA, PA
NERLYNX TABS 40mg	2	QL (180 tabs / 30 days), NM, LA, PA
NEXAVAR TABS 200mg	2	QL (120 tabs / 30 days), NM, LA, PA
NINLARO CAPS 2.3mg, 3mg, 4mg	2	QL (3 caps / 28 days), NM, PA
ODOMZO CAPS 200mg	2	QL (30 caps / 30 days), NM, LA, PA
OGIVRI SOLR 150mg	2	NM, LA, PA
OGIVRI INJ 420MG	2	NM, LA, PA
OGSIVEO TABS 50mg	2	QL (180 tabs / 30 days), NM, LA, PA
OJJAARA TABS 100mg, 150mg, 200mg	2	QL (30 tabs / 30 days), NM, LA, PA
ONTRUZANT SOLR 150mg, 420mg	2	NM, LA, PA
<i>pazopanib hcl</i> TABS 200mg	2	QL (120 tabs / 30 days), NM, PA
PEMAZYRE TABS 4.5mg, 9mg, 13.5mg	2	QL (28 tabs / 28 days), NM, LA, PA
PHESGO SOL	2	NM, LA, PA

This document includes a list of drugs covered on our formulary as of July 1, 2024. You can find information on what the symbols and abbreviations on this table mean by going to page 7.

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
PIQRAY 200MG DAILY DOSE TBPK 200mg	2	QL (28 tabs / 28 days), NM, PA
PIQRAY 250MG TAB DOSE	2	QL (56 tabs / 28 days), NM, PA
PIQRAY 300MG DAILY DOSE TBPK 150mg	2	QL (56 tabs / 28 days), NM, PA
QINLOCK TABS 50mg	2	QL (90 tabs / 30 days), NM, LA, PA
RETEVMO CAPS 40mg	2	QL (180 caps / 30 days), NM, LA, PA
RETEVMO CAPS 80mg	2	QL (120 caps / 30 days), NM, LA, PA
REZLIDHIA CAPS 150mg	2	QL (60 caps / 30 days), NM, LA, PA
ROZLYTREK CAPS 100mg	2	QL (150 caps / 30 days), NM, LA, PA
ROZLYTREK CAPS 200mg	2	QL (90 caps / 30 days), NM, LA, PA
ROZLYTREK PACK 50mg	2	QL (336 packets / 28 days), NM, LA, PA
RUBRACA TABS 200mg, 250mg, 300mg	2	QL (120 tabs / 30 days), NM, LA, PA
RYDAPT CAPS 25mg	2	QL (224 caps / 28 days), NM, PA
SCSEMBLIX TABS 20mg	2	QL (60 tabs / 30 days), NM, PA
SCSEMBLIX TABS 40mg	2	QL (300 tabs / 30 days), NM, PA
<i>sorafenib tosylate</i> TABS 200mg	2	QL (120 tabs / 30 days), NM, PA
SPRYCEL TABS 20mg	2	QL (90 tabs / 30 days), NM, PA

This document includes a list of drugs covered on our formulary as of July 1, 2024. You can find information on what the symbols and abbreviations on this table mean by going to page 7.

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
SPRYCEL TABS 50mg, 70mg, 80mg, 100mg, 140mg	2	QL (30 tabs / 30 days), NM, PA
STIVARGA TABS 40mg	2	QL (84 tabs / 28 days), NM, LA, PA
<i>sunitinib malate</i> CAPS 12.5mg, 25mg, 37.5mg, 50mg	2	QL (30 caps / 30 days), NM, PA
TABRECTA TABS 150mg, 200mg	2	QL (112 tabs / 28 days), NM, PA
TAFINLAR CAPS 50mg, 75mg	2	QL (120 caps / 30 days), NM, LA, PA
TAFINLAR TBSO 10mg	2	QL (900 tabs / 30 days), NM, LA, PA
TAGRISSE TABS 40mg, 80mg	2	QL (30 tabs / 30 days), NM, LA, PA
TALZENNA CAPS .1mg, .35mg, .5mg, .75mg, 1mg	2	QL (30 caps / 30 days), NM, LA, PA
TALZENNA CAPS .25mg	2	QL (90 caps / 30 days), NM, LA, PA
TASIGNA CAPS 50mg	2	QL (120 caps / 30 days), NM, PA
TASIGNA CAPS 150mg, 200mg	2	QL (112 caps / 28 days), NM, PA
TAZVERIK TABS 200mg	2	QL (240 tabs / 30 days), NM, LA, PA
TECENTRIQ SOLN 840mg/14ml, 1200mg/20ml	2	NM, LA, PA
TEPMETKO TABS 225mg	2	QL (60 tabs / 30 days), NM, LA, PA
TIBSOVO TABS 250mg	2	QL (60 tabs / 30 days), NM, LA, PA
TRAZIMERA SOLR 150mg, 420mg	2	NM, PA

This document includes a list of drugs covered on our formulary as of July 1, 2024. You can find information on what the symbols and abbreviations on this table mean by going to page 7.

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
TRUQAP TABS 160mg, 200mg	2	QL (64 tabs / 28 days), NM, LA, PA
TRUXIMA SOLN 100mg/10ml, 500mg/50ml	2	NM, PA
TUKYSA TABS 50mg, 150mg	2	QL (120 tabs / 30 days), NM, LA, PA
TURALIO CAPS 125mg	2	QL (120 caps / 30 days), NM, LA, PA
VANFLYTA TABS 17.7mg, 26.5mg	2	QL (56 tabs / 28 days), NM, LA, PA
VENCLEXTA TABS 10mg, 50mg	2	QL (112 tabs / 28 days), NM, LA, PA
VENCLEXTA TABS 100mg	2	QL (180 tabs / 30 days), NM, LA, PA
VENCLEXTA TAB START PK	2	QL (42 tabs / 28 days), NM, LA, PA
VERZENIO TABS 50mg, 100mg, 150mg, 200mg	2	QL (56 tabs / 28 days), NM, LA, PA
VITRAKVI CAPS 25mg	2	QL (180 caps / 30 days), NM, LA, PA
VITRAKVI CAPS 100mg	2	QL (60 caps / 30 days), NM, LA, PA
VITRAKVI SOLN 20mg/ml	2	QL (300 mL / 30 days), NM, LA, PA
VIZIMPRO TABS 15mg, 30mg, 45mg	2	QL (30 tabs / 30 days), NM, LA, PA
VONJO CAPS 100mg	2	QL (120 caps / 30 days), NM, LA, PA
XALKORI CAPS 200mg, 250mg; CPSP 50mg	2	QL (120 caps / 30 days), NM, LA, PA
XALKORI CPSP 20mg	2	QL (240 caps / 30 days), NM, LA, PA

This document includes a list of drugs covered on our formulary as of July 1, 2024. You can find information on what the symbols and abbreviations on this table mean by going to page 7.



<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
XALKORI CPSP 150mg	2	QL (180 caps / 30 days), NM, LA, PA
XOSPATA TABS 40mg	2	QL (90 tabs / 30 days), NM, LA, PA
XPOVIO 40 MG ONCE WEEKLY TBPK 40mg	2	QL (4 tabs / 28 days), NM, LA, PA
XPOVIO 40 MG TWICE WEEKLY TBPK 40mg	2	QL (8 tabs / 28 days), NM, LA, PA
XPOVIO 60 MG ONCE WEEKLY TBPK 60mg	2	QL (4 tabs / 28 days), NM, LA, PA
XPOVIO 60 MG TWICE WEEKLY TBPK 20mg	2	QL (24 tabs / 28 days), NM, LA, PA
XPOVIO 80 MG ONCE WEEKLY TBPK 40mg	2	QL (8 tabs / 28 days), NM, LA, PA
XPOVIO 80 MG TWICE WEEKLY TBPK 20mg	2	QL (32 tabs / 28 days), NM, LA, PA
XPOVIO 100 MG ONCE WEEKLY TBPK 50mg	2	QL (8 tabs / 28 days), NM, LA, PA
ZEJULA CAPS 100mg	2	QL (90 caps / 30 days), NM, LA, PA
ZEJULA TABS 100mg, 200mg, 300mg	2	QL (30 tabs / 30 days), NM, LA, PA
ZELBORAF TABS 240mg	2	QL (240 tabs / 30 days), NM, LA, PA
ZIRABEV SOLN 100mg/4ml, 400mg/16ml	2	NM, LA, PA
ZOLINZA CAPS 100mg	2	QL (120 caps / 30 days), NM, PA
ZYDELIG TABS 100mg, 150mg	2	QL (60 tabs / 30 days), NM, LA, PA
ZYKADIA TABS 150mg	2	QL (84 tabs / 28 days), NM, LA, PA

This document includes a list of drugs covered on our formulary as of July 1, 2024. You can find information on what the symbols and abbreviations on this table mean by going to page 7.

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
<b><i>PROTECTIVE AGENTS</i></b>		
<i>leucovorin calcium SOLN 500mg/50ml; SOLR 50mg, 100mg, 200mg, 350mg, 500mg</i>	1	B/D
<i>leucovorin calcium TABS 5mg, 10mg, 15mg, 25mg</i>	1	
<i>MESNEX TABS 400mg</i>	2	
<b><i>CARDIOVASCULAR</i></b>		
<b><i>ACE INHIBITOR COMBINATIONS</i></b>		
<i>amlodipine besylate-benazepril hcl cap 2.5- 10 mg</i>	1	QL (30 caps / 30 days)
<i>amlodipine besylate-benazepril hcl cap 5- 10 mg</i>	1	QL (30 caps / 30 days)
<i>amlodipine besylate-benazepril hcl cap 5- 20 mg</i>	1	QL (30 caps / 30 days)
<i>amlodipine besylate-benazepril hcl cap 5- 40 mg</i>	1	QL (30 caps / 30 days)
<i>amlodipine besylate-benazepril hcl cap 10- 20 mg</i>	1	QL (30 caps / 30 days)
<i>amlodipine besylate-benazepril hcl cap 10- 40 mg</i>	1	QL (30 caps / 30 days)
<i>benazepril &amp; hydrochlorothiazide tab 5- 6.25mg</i>	1	
<i>benazepril &amp; hydrochlorothiazide tab 10- 12.5 mg</i>	1	
<i>benazepril &amp; hydrochlorothiazide tab 20- 12.5 mg</i>	1	
<i>benazepril &amp; hydrochlorothiazide tab 20-25 mg</i>	1	
<i>captopril &amp; hydrochlorothiazide tab 25-15 mg</i>	1	

This document includes a list of drugs covered on our formulary as of July 1, 2024. You can find information on what the symbols and abbreviations on this table mean by going to page 7.

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
<i>captopril &amp; hydrochlorothiazide tab 25-25 mg</i>	1	
<i>captopril &amp; hydrochlorothiazide tab 50-15 mg</i>	1	
<i>captopril &amp; hydrochlorothiazide tab 50-25 mg</i>	1	
<i>enalapril maleate &amp; hydrochlorothiazide tab 5-12.5 mg</i>	1	
<i>enalapril maleate &amp; hydrochlorothiazide tab 10-25 mg</i>	1	
<i>fosinopril sodium &amp; hydrochlorothiazide tab 10-12.5 mg</i>	1	
<i>fosinopril sodium &amp; hydrochlorothiazide tab 20-12.5 mg</i>	1	
<i>lisinopril &amp; hydrochlorothiazide tab 10-12.5 mg</i>	1	
<i>lisinopril &amp; hydrochlorothiazide tab 20-12.5 mg</i>	1	
<i>lisinopril &amp; hydrochlorothiazide tab 20-25 mg</i>	1	
<b>ACE INHIBITORS</b>		
<i>benazepril hcl TABS 5mg, 10mg, 20mg, 40mg</i>	1	
<i>captopril TABS 12.5mg, 25mg, 50mg, 100mg</i>	1	
<i>enalapril maleate TABS 2.5mg, 5mg, 10mg, 20mg</i>	1	
<i>fosinopril sodium TABS 10mg, 20mg, 40mg</i>	1	
<i>lisinopril TABS 2.5mg, 5mg, 10mg, 20mg, 30mg, 40mg</i>	1	

This document includes a list of drugs covered on our formulary as of July 1, 2024. You can find information on what the symbols and abbreviations on this table mean by going to page 7.

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
<i>moexipril hcl</i> TABS 7.5mg, 15mg	1	
<i>perindopril erbumine</i> TABS 2mg, 4mg, 8mg	1	
<i>quinapril hcl</i> TABS 5mg, 10mg, 20mg, 40mg	1	
<i>ramipril</i> CAPS 1.25mg, 2.5mg, 5mg, 10mg	1	
<i>trandolapril</i> TABS 1mg, 2mg, 4mg	1	
<b>ALDOSTERONE RECEPTOR ANTAGONISTS</b>		
<i>eplerenone</i> TABS 25mg, 50mg	1	
KERENDIA TABS 10mg, 20mg	2	QL (30 tabs / 30 days)
<i>spironolactone</i> TABS 25mg, 50mg, 100mg	1	
<b>ALPHA BLOCKERS</b>		
<i>doxazosin mesylate</i> TABS 1mg, 2mg, 4mg, 8mg	1	
<i>prazosin hcl</i> CAPS 1mg, 2mg, 5mg	1	
<i>terazosin hcl</i> CAPS 1mg, 2mg, 5mg, 10mg	1	
<b>ANGIOTENSIN II RECEPTOR ANTAGONIST COMBINATIONS</b>		
<i>amlodipine besylate-olmesartan medoxomil</i> tab 5-20 mg	1	QL (30 tabs / 30 days)
<i>amlodipine besylate-olmesartan medoxomil</i> tab 5-40 mg	1	QL (30 tabs / 30 days)
<i>amlodipine besylate-olmesartan medoxomil</i> tab 10-20 mg	1	QL (30 tabs / 30 days)
<i>amlodipine besylate-olmesartan medoxomil</i> tab 10-40 mg	1	QL (30 tabs / 30 days)
<i>amlodipine besylate-valsartan</i> tab 5-160 mg	1	QL (30 tabs / 30 days)
<i>amlodipine besylate-valsartan</i> tab 5-320 mg	1	QL (30 tabs / 30 days)

This document includes a list of drugs covered on our formulary as of July 1, 2024. You can find information on what the symbols and abbreviations on this table mean by going to page 7.

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
<i>amlodipine besylate-valsartan tab 10-160 mg</i>	1	QL (30 tabs / 30 days)
<i>amlodipine besylate-valsartan tab 10-320 mg</i>	1	QL (30 tabs / 30 days)
<i>candesartan cilexetil-hydrochlorothiazide tab 16-12.5 mg</i>	1	QL (60 tabs / 30 days)
<i>candesartan cilexetil-hydrochlorothiazide tab 32-12.5 mg</i>	1	QL (30 tabs / 30 days)
<i>candesartan cilexetil-hydrochlorothiazide tab 32-25 mg</i>	1	QL (30 tabs / 30 days)
ENTRESTO TAB 24-26MG	2	QL (60 tabs / 30 days)
ENTRESTO TAB 49-51MG	2	QL (60 tabs / 30 days)
ENTRESTO TAB 97-103MG	2	QL (60 tabs / 30 days)
<i>irbesartan-hydrochlorothiazide tab 150-12.5 mg</i>	1	QL (60 tabs / 30 days)
<i>irbesartan-hydrochlorothiazide tab 300-12.5 mg</i>	1	QL (30 tabs / 30 days)
<i>losartan potassium &amp; hydrochlorothiazide tab 50-12.5 mg</i>	1	
<i>losartan potassium &amp; hydrochlorothiazide tab 100-12.5 mg</i>	1	
<i>losartan potassium &amp; hydrochlorothiazide tab 100-25 mg</i>	1	
<i>olmesartan medoxomil-hydrochlorothiazide tab 20-12.5 mg</i>	1	QL (30 tabs / 30 days)
<i>olmesartan medoxomil-hydrochlorothiazide tab 40-12.5 mg</i>	1	QL (30 tabs / 30 days)
<i>olmesartan medoxomil-hydrochlorothiazide tab 40-25 mg</i>	1	QL (30 tabs / 30 days)
<i>olmesartan-amlodipine-hydrochlorothiazide tab 20-5-12.5 mg</i>	1	QL (30 tabs / 30 days)

This document includes a list of drugs covered on our formulary as of July 1, 2024. You can find information on what the symbols and abbreviations on this table mean by going to page 7.

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
<i>olmesartan-amlodipine-hydrochlorothiazide tab 40-5-12.5 mg</i>	1	QL (30 tabs / 30 days)
<i>olmesartan-amlodipine-hydrochlorothiazide tab 40-5-25 mg</i>	1	QL (30 tabs / 30 days)
<i>olmesartan-amlodipine-hydrochlorothiazide tab 40-10-12.5 mg</i>	1	QL (30 tabs / 30 days)
<i>olmesartan-amlodipine-hydrochlorothiazide tab 40-10-25 mg</i>	1	QL (30 tabs / 30 days)
<i>telmisartan-amlodipine tab 40-5 mg</i>	1	QL (30 tabs / 30 days)
<i>telmisartan-amlodipine tab 40-10 mg</i>	1	QL (30 tabs / 30 days)
<i>telmisartan-amlodipine tab 80-5 mg</i>	1	QL (30 tabs / 30 days)
<i>telmisartan-amlodipine tab 80-10 mg</i>	1	QL (30 tabs / 30 days)
<i>telmisartan-hydrochlorothiazide tab 40-12.5 mg</i>	1	QL (30 tabs / 30 days)
<i>telmisartan-hydrochlorothiazide tab 80-12.5 mg</i>	1	QL (60 tabs / 30 days)
<i>telmisartan-hydrochlorothiazide tab 80-25 mg</i>	1	QL (30 tabs / 30 days)
<i>valsartan-hydrochlorothiazide tab 80-12.5 mg</i>	1	QL (30 tabs / 30 days)
<i>valsartan-hydrochlorothiazide tab 160-12.5 mg</i>	1	QL (30 tabs / 30 days)
<i>valsartan-hydrochlorothiazide tab 160-25 mg</i>	1	QL (30 tabs / 30 days)
<i>valsartan-hydrochlorothiazide tab 320-12.5 mg</i>	1	QL (30 tabs / 30 days)
<i>valsartan-hydrochlorothiazide tab 320-25 mg</i>	1	QL (30 tabs / 30 days)

This document includes a list of drugs covered on our formulary as of July 1, 2024. You can find information on what the symbols and abbreviations on this table mean by going to page 7.

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
<b>ANGIOTENSIN II RECEPTOR ANTAGONISTS</b>		
<i>candesartan cilexetil</i> TABS 4mg, 8mg, 16mg	1	QL (60 tabs / 30 days)
<i>candesartan cilexetil</i> TABS 32mg	1	QL (30 tabs / 30 days)
<i>irbesartan</i> TABS 75mg, 150mg, 300mg	1	QL (30 tabs / 30 days)
<i>losartan potassium</i> TABS 25mg, 50mg, 100mg	1	
<i>olmesartan medoxomil</i> TABS 5mg	1	QL (60 tabs / 30 days)
<i>olmesartan medoxomil</i> TABS 20mg, 40mg	1	QL (30 tabs / 30 days)
<i>telmisartan</i> TABS 20mg, 40mg, 80mg	1	QL (30 tabs / 30 days)
<i>valsartan</i> TABS 40mg, 80mg, 160mg	1	QL (60 tabs / 30 days)
<i>valsartan</i> TABS 320mg	1	QL (30 tabs / 30 days)
<b>ANTIARRHYTHMICS</b>		
<i>amiodarone hcl</i> SOLN 50mg/ml, 900mg/18ml; TABS 100mg, 200mg, 400mg	1	
<i>disopyramide phosphate</i> CAPS 100mg, 150mg	2	
<i>dofetilide</i> CAPS 125mcg, 250mcg, 500mcg	1	NM
<i>flecainide acetate</i> TABS 50mg, 100mg, 150mg	1	
MULTAQ TABS 400mg	2	
NORPACE CR CP12 100mg, 150mg	2	
<i>pacerone</i> TABS 100mg, 200mg, 400mg	1	
<i>propafenone hcl</i> CP12 225mg, 325mg, 425mg; TABS 150mg, 225mg, 300mg	1	
<i>quinidine sulfate</i> TABS 200mg, 300mg	1	

This document includes a list of drugs covered on our formulary as of July 1, 2024. You can find information on what the symbols and abbreviations on this table mean by going to page 7.

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
<i>sorine</i> TABS 80mg, 120mg, 160mg, 240mg	1	
<i>sotalol hcl</i> TABS 80mg, 120mg, 160mg, 240mg	1	
<i>sotalol hcl (afib/af)</i> TABS 80mg, 120mg, 160mg	1	
<b>ANTILIPEMICS, FIBRATES</b>		
<i>fenofibrate</i> TABS 48mg, 54mg, 145mg, 160mg	1	
<i>fenofibrate micronized</i> CAPS 67mg, 134mg, 200mg	1	
<i>gemfibrozil</i> TABS 600mg	1	
<b>ANTILIPEMICS, HMG-CoA REDUCTASE INHIBITORS</b>		
<i>atorvastatin calcium</i> TABS 10mg, 20mg, 40mg, 80mg	1	QL (30 tabs / 30 days)
<i>lovastatin</i> TABS 10mg, 20mg, 40mg	1	QL (60 tabs / 30 days)
<i>pravastatin sodium</i> TABS 10mg, 20mg, 40mg, 80mg	1	QL (30 tabs / 30 days)
<i>rosuvastatin calcium</i> TABS 5mg, 10mg, 20mg, 40mg	1	QL (30 tabs / 30 days)
<i>simvastatin</i> TABS 5mg, 10mg, 20mg, 40mg, 80mg	1	QL (30 tabs / 30 days)
<b>ANTILIPEMICS, MISCELLANEOUS</b>		
<i>cholestyramine</i> PACK 4gm; POWD 4gm/dose	1	
<i>cholestyramine light</i> PACK 4gm; POWD 4gm/dose	1	
<i>colesevelam hcl</i> PACK 3.75gm; TABS 625mg	1	
<i>colestipol hcl</i> GRAN 5gm; PACK 5gm; TABS 1gm	1	

This document includes a list of drugs covered on our formulary as of July 1, 2024. You can find information on what the symbols and abbreviations on this table mean by going to page 7.



<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
<i>ezetimibe</i> TABS 10mg	1	
<i>ezetimibe-simvastatin tab 10-10 mg</i>	1	QL (30 tabs / 30 days)
<i>ezetimibe-simvastatin tab 10-20 mg</i>	1	QL (30 tabs / 30 days)
<i>ezetimibe-simvastatin tab 10-40 mg</i>	1	QL (30 tabs / 30 days)
<i>ezetimibe-simvastatin tab 10-80 mg</i>	1	QL (30 tabs / 30 days)
NEXLETOL TABS 180mg	2	QL (30 tabs / 30 days)
NEXLIZET TAB 180/10MG	2	QL (30 tabs / 30 days)
<i>niacin (antihyperlipidemic)</i> TBCR 500mg, 750mg, 1000mg	1	QL (60 tabs / 30 days)
<i>omega-3-acid ethyl esters cap 1 gm</i>	1	PA
<i>prevalite</i> PACK 4gm; POWD 4gm/dose	1	
REPATHA SOSY 140mg/ml	2	NM, PA
REPATHA PUSHTRONEX SYSTEM SOCT 420mg/3.5ml	2	NM, PA
REPATHA SURECLICK SOAJ 140mg/ml	2	NM, PA
VASCEPA CAPS .5gm, 1gm	2	
<b>BETA-BLOCKER/DIURETIC COMBINATIONS</b>		
<i>atenolol &amp; chlorthalidone tab 50-25 mg</i>	1	
<i>atenolol &amp; chlorthalidone tab 100-25 mg</i>	1	
<i>bisoprolol &amp; hydrochlorothiazide tab 2.5-6.25 mg</i>	1	
<i>bisoprolol &amp; hydrochlorothiazide tab 5-6.25 mg</i>	1	
<i>bisoprolol &amp; hydrochlorothiazide tab 10-6.25 mg</i>	1	
<i>metoprolol &amp; hydrochlorothiazide tab 50-25 mg</i>	1	

This document includes a list of drugs covered on our formulary as of July 1, 2024. You can find information on what the symbols and abbreviations on this table mean by going to page 7.

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
<i>metoprolol &amp; hydrochlorothiazide tab 100-25 mg</i>	1	
<i>metoprolol &amp; hydrochlorothiazide tab 100-50 mg</i>	1	
<b>BETA-BLOCKERS</b>		
<i>acebutolol hcl CAPS 200mg, 400mg</i>	1	
<i>atenolol TABS 25mg, 50mg, 100mg</i>	1	
<i>betaxolol hcl TABS 10mg, 20mg</i>	1	
<i>bisoprolol fumarate TABS 5mg, 10mg</i>	1	
<i>carvedilol TABS 3.125mg, 6.25mg, 12.5mg, 25mg</i>	1	
<i>labetalol hcl TABS 100mg, 200mg, 300mg</i>	1	
<i>metoprolol succinate TB24 25mg, 50mg, 100mg, 200mg</i>	1	
<i>metoprolol tartrate SOLN 5mg/5ml; TABS 25mg, 50mg, 100mg</i>	1	
<i>nadolol TABS 20mg, 40mg, 80mg</i>	1	
<i>nebivolol hcl TABS 2.5mg, 5mg, 10mg</i>	1	QL (30 tabs / 30 days)
<i>nebivolol hcl TABS 20mg</i>	1	QL (60 tabs / 30 days)
<i>pindolol TABS 5mg, 10mg</i>	1	
<i>propranolol hcl CP24 60mg, 80mg, 120mg, 160mg; SOLN 20mg/5ml, 40mg/5ml; TABS 10mg, 20mg, 40mg, 60mg, 80mg</i>	1	
<i>timolol maleate TABS 5mg, 10mg, 20mg</i>	1	
<b>CALCIUM CHANNEL BLOCKERS</b>		
<i>amlodipine besylate TABS 2.5mg, 5mg, 10mg</i>	1	

This document includes a list of drugs covered on our formulary as of July 1, 2024. You can find information on what the symbols and abbreviations on this table mean by going to page 7.

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
<i>cartia xt</i> CP24 120mg, 180mg, 240mg, 300mg	1	
<i>dilt-xr</i> CP24 120mg, 180mg, 240mg	1	
<i>diltiazem hcl</i> CP12 60mg, 90mg, 120mg; SOLN 25mg/5ml, 50mg/10ml, 125mg/25ml; TABS 30mg, 60mg, 90mg, 120mg	1	
<i>diltiazem hcl coated beads</i> CP24 120mg, 180mg, 240mg, 300mg, 360mg	1	
<i>diltiazem hcl extended release beads</i> CP24 120mg, 180mg, 240mg, 300mg, 360mg, 420mg	1	
<i>felodipine</i> TB24 2.5mg, 5mg, 10mg	1	
<i>isradipine</i> CAPS 2.5mg, 5mg	1	
<i>nicardipine hcl</i> CAPS 20mg, 30mg	1	
<i>nifedipine</i> TB24 30mg, 60mg, 90mg	1	
<i>nimodipine</i> CAPS 30mg	1	
NYMALIZE SOLN 6mg/ml	2	
<i>taztia xt</i> CP24 120mg, 180mg, 240mg, 300mg, 360mg	1	
<i>tiadylt er</i> CP24 120mg, 180mg, 240mg, 300mg, 360mg, 420mg	1	
<i>verapamil hcl</i> CP24 100mg, 120mg, 180mg, 200mg, 240mg, 300mg, 360mg; SOLN 2.5mg/ml; TABS 40mg, 80mg, 120mg; TBCR 120mg, 180mg, 240mg	1	
<b><i>DIURETICS</i></b>		
<i>acetazolamide</i> CP12 500mg; TABS 125mg, 250mg	1	
<i>amiloride &amp; hydrochlorothiazide tab 5-50 mg</i>	1	

This document includes a list of drugs covered on our formulary as of July 1, 2024. You can find information on what the symbols and abbreviations on this table mean by going to page 7.

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
<i>amiloride hcl</i> TABS 5mg	1	
<i>bumetanide</i> SOLN .25mg/ml; TABS .5mg, 1mg, 2mg	1	
<i>chlorthalidone</i> TABS 25mg, 50mg	1	
<i>furosemide</i> SOLN 10mg/ml, 40mg/5ml; TABS 20mg, 40mg, 80mg	1	
<i>furosemide inj</i> SOLN 10mg/ml	1	
<i>hydrochlorothiazide</i> CAPS 12.5mg; TABS 12.5mg, 25mg, 50mg	1	
<i>indapamide</i> TABS 1.25mg, 2.5mg	1	
<i>methazolamide</i> TABS 25mg, 50mg	1	
<i>metolazone</i> TABS 2.5mg, 5mg, 10mg	1	
<i>spironolactone &amp; hydrochlorothiazide tab 25-25 mg</i>	1	
<i>torseamide</i> TABS 5mg, 10mg, 20mg, 100mg	1	
<i>triamterene &amp; hydrochlorothiazide cap 37.5-25 mg</i>	1	
<i>triamterene &amp; hydrochlorothiazide tab 37.5-25 mg</i>	1	
<i>triamterene &amp; hydrochlorothiazide tab 75-50 mg</i>	1	
<b>MISCELLANEOUS</b>		
<i>aliskiren fumarate</i> TABS 150mg, 300mg	1	
<i>clonidine</i> PTWK .1mg/24hr, .2mg/24hr, .3mg/24hr	1	
<i>clonidine hcl</i> TABS .1mg, .2mg, .3mg	1	
CORLANOR SOLN 5mg/5ml	2	QL (450 mL / 30 days)

This document includes a list of drugs covered on our formulary as of July 1, 2024. You can find information on what the symbols and abbreviations on this table mean by going to page 7.

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
CORLANOR TABS 5mg, 7.5mg	2	QL (60 tabs / 30 days)
<i>digoxin</i> SOLN .05mg/ml, .25mg/ml	1	
<i>digoxin</i> TABS 125mcg, 250mcg	1	QL (30 tabs / 30 days)
<i>droxidopa</i> CAPS 100mg	2	QL (90 caps / 30 days), NM, PA
<i>droxidopa</i> CAPS 200mg, 300mg	2	QL (180 caps / 30 days), NM, PA
<i>epinephrine (anaphylaxis)</i> SOLN 1mg/ml	1	
<i>guanfacine hcl</i> TABS 1mg, 2mg	2	PA; PA if 70 years and older
<i>hydralazine hcl</i> SOLN 20mg/ml; TABS 10mg, 25mg, 50mg, 100mg	1	
<i>metyrosine</i> CAPS 250mg	2	PA
<i>midodrine hcl</i> TABS 2.5mg, 5mg, 10mg	1	
<i>minoxidil</i> TABS 2.5mg, 10mg	1	
<i>ranolazine</i> TB12 500mg, 1000mg	1	
VERQUVO TABS 2.5mg, 5mg, 10mg	2	QL (30 tabs / 30 days)
<b><i>NITRATES</i></b>		
<i>isosorbide dinitrate</i> TABS 5mg, 10mg, 20mg, 30mg	1	
<i>isosorbide mononitrate</i> TABS 10mg, 20mg; TB24 30mg, 60mg, 120mg	1	
NITRO-BID OINT 2%	2	
<i>nitroglycerin</i> PT24 .1mg/hr, .2mg/hr, .4mg/hr, .6mg/hr; SOLN .4mg/spray; SUBL .3mg, .4mg, .6mg	1	
<b><i>PULMONARY ARTERIAL HYPERTENSION</i></b>		
ADEMPAS TABS .5mg, 1mg, 1.5mg, 2mg, 2.5mg	2	QL (90 tabs / 30 days), NM, LA, PA

This document includes a list of drugs covered on our formulary as of July 1, 2024. You can find information on what the symbols and abbreviations on this table mean by going to page 7.

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
<i>ambrisentan</i> TABS 5mg, 10mg	2	QL (30 tabs / 30 days), NM, LA, PA
<i>bosentan</i> TABS 62.5mg, 125mg	2	QL (60 tabs / 30 days), NM, LA, PA
OPSUMIT TABS 10mg	2	QL (30 tabs / 30 days), NM, LA, PA
<i>sildenafil citrate (pulmonary hypertension)</i> TABS 20mg	1	QL (360 tabs / 30 days), NM, PA
<i>treprostinil</i> SOLN 20mg/20ml, 50mg/20ml, 100mg/20ml, 200mg/20ml	2	NM, LA, PA
VENTAVIS SOLN 10mcg/ml, 20mcg/ml	2	NM, LA, PA

## **CENTRAL NERVOUS SYSTEM**

### **ANTI-ANXIETY**

<i>alprazolam</i> TABS .25mg, .5mg, 1mg, 2mg	1	QL (150 tabs / 30 days)
<i>bupirone hcl</i> TABS 5mg, 7.5mg, 10mg, 15mg, 30mg	1	
<i>fluvoxamine maleate</i> TABS 25mg, 50mg, 100mg	1	
<i>lorazepam</i> CONC 2mg/ml	1	QL (150 mL / 30 days)
<i>lorazepam</i> SOLN 2mg/ml, 4mg/ml	1	
<i>lorazepam</i> TABS .5mg, 1mg, 2mg	1	QL (150 tabs / 30 days)
<i>lorazepam intensol</i> CONC 2mg/ml	1	QL (150 mL / 30 days)

### **ANTIDEMENTIA**

<i>donepezil hydrochloride</i> TABS 5mg; TBDP 5mg	1	QL (30 tabs / 30 days)
<i>donepezil hydrochloride</i> TABS 10mg; TBDP 10mg	1	
<i>galantamine hydrobromide</i> CP24 8mg, 16mg, 24mg	1	QL (30 caps / 30 days)
<i>galantamine hydrobromide</i> SOLN 4mg/ml	1	QL (200 mL / 30 days)

This document includes a list of drugs covered on our formulary as of July 1, 2024. You can find information on what the symbols and abbreviations on this table mean by going to page 7.

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
<i>galantamine hydrobromide</i> TABS 4mg, 8mg, 12mg	1	QL (60 tabs / 30 days)
<i>memantine hcl</i> CP24 7mg, 14mg, 21mg, 28mg; SOLN 2mg/ml; TABS 5mg, 10mg	1	PA; PA applies if 29 years and younger
<i>memantine hcl tab 28 x 5 mg &amp; 21 x 10 mg titration pack</i>	2	PA; PA applies if 29 years and younger
NAMZARIC CAP 7-10MG	2	
NAMZARIC CAP 14-10MG	2	
NAMZARIC CAP 21-10MG	2	
NAMZARIC CAP 28-10MG	2	
NAMZARIC CAP PACK	2	
<i>rivastigmine</i> PT24 4.6mg/24hr, 9.5mg/24hr, 13.3mg/24hr	1	QL (30 patches / 30 days)
<i>rivastigmine tartrate</i> CAPS 1.5mg, 3mg, 4.5mg, 6mg	1	QL (60 caps / 30 days)
<b>ANTIDEPRESSANTS</b>		
<i>amitriptyline hcl</i> TABS 10mg, 25mg, 50mg, 75mg, 100mg, 150mg	2	
<i>amoxapine</i> TABS 25mg, 50mg, 100mg, 150mg	2	
AUVELITY TAB 45-105MG	2	QL (60 tabs / 30 days), PA
<i>bupropion hcl</i> TABS 75mg, 100mg	1	
<i>bupropion hcl</i> TB12 100mg, 150mg, 200mg; TB24 150mg	1	QL (60 tabs / 30 days)
<i>bupropion hcl</i> TB24 300mg	1	QL (30 tabs / 30 days)
<i>citalopram hydrobromide</i> SOLN 10mg/5ml; TABS 10mg, 20mg, 40mg	1	

This document includes a list of drugs covered on our formulary as of July 1, 2024. You can find information on what the symbols and abbreviations on this table mean by going to page 7.

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
<i>clomipramine hcl</i> CAPS 25mg, 50mg, 75mg	2	PA
<i>desipramine hcl</i> TABS 10mg, 25mg, 50mg, 75mg, 100mg, 150mg	2	
<i>desvenlafaxine succinate</i> TB24 25mg, 50mg, 100mg	1	QL (30 tabs / 30 days), PA
<i>doxepin hcl</i> CAPS 10mg, 25mg, 50mg, 75mg, 100mg, 150mg; CONC 10mg/ml	2	
<i>duloxetine hcl</i> CPEP 20mg, 30mg, 60mg	1	QL (60 caps / 30 days)
EMSAM PT24 6mg/24hr, 9mg/24hr, 12mg/24hr	2	QL (30 patches / 30 days), PA
<i>escitalopram oxalate</i> SOLN 5mg/5ml; TABS 5mg, 10mg, 20mg	1	
FETZIMA CP24 20mg, 40mg	2	QL (60 caps / 30 days), PA
FETZIMA CP24 80mg, 120mg	2	QL (30 caps / 30 days), PA
FETZIMA CAP TITRATIO	2	QL (2 packs / year), PA
<i>fluoxetine hcl</i> CAPS 10mg, 20mg, 40mg; SOLN 20mg/5ml	1	
<i>imipramine hcl</i> TABS 10mg, 25mg, 50mg	2	
MARPLAN TABS 10mg	2	QL (180 tabs / 30 days)
<i>mirtazapine</i> TABS 7.5mg, 15mg, 30mg, 45mg; TBDP 15mg, 30mg, 45mg	1	
<i>nefazodone hcl</i> TABS 50mg, 100mg, 150mg, 200mg, 250mg	1	
<i>nortriptyline hcl</i> CAPS 10mg, 25mg, 50mg, 75mg; SOLN 10mg/5ml	2	
<i>paroxetine hcl</i> SUSP 10mg/5ml	2	QL (900 mL / 30 days), PA

This document includes a list of drugs covered on our formulary as of July 1, 2024. You can find information on what the symbols and abbreviations on this table mean by going to page 7.



<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
<i>paroxetine hcl</i> TABS 10mg, 20mg, 30mg, 40mg	2	
<i>phenelzine sulfate</i> TABS 15mg	1	
<i>protriptyline hcl</i> TABS 5mg, 10mg	2	
<i>sertraline hcl</i> CONC 20mg/ml; TABS 25mg, 50mg, 100mg	1	
<i>tranylcypromine sulfate</i> TABS 10mg	1	
<i>trazodone hcl</i> TABS 50mg, 100mg, 150mg	1	
<i>trimipramine maleate</i> CAPS 25mg, 50mg	2	QL (120 caps / 30 days)
<i>trimipramine maleate</i> CAPS 100mg	2	QL (60 caps / 30 days)
TRINTELLIX TABS 5mg, 10mg, 20mg	2	QL (30 tabs / 30 days)
<i>venlafaxine hcl</i> CP24 37.5mg, 75mg, 150mg; TABS 25mg, 37.5mg, 50mg, 75mg, 100mg	1	
<i>vilazodone hcl</i> TABS 10mg, 20mg, 40mg	1	QL (30 tabs / 30 days)
ZURZUVAE CAPS 20mg, 25mg	2	QL (28 caps / 14 days), NM, LA, PA
ZURZUVAE CAPS 30mg	2	QL (14 caps / 14 days), NM, LA, PA
<b>ANTIPARKINSONIAN AGENTS</b>		
<i>amantadine hcl</i> CAPS 100mg	1	QL (120 caps / 30 days)
<i>amantadine hcl</i> SOLN 50mg/5ml; TABS 100mg	1	
<i>benztropine mesylate</i> SOLN 1mg/ml	1	
<i>benztropine mesylate</i> TABS .5mg, 1mg, 2mg	2	PA; PA if 70 years and older
<i>bromocriptine mesylate</i> CAPS 5mg; TABS 2.5mg	1	

This document includes a list of drugs covered on our formulary as of July 1, 2024. You can find information on what the symbols and abbreviations on this table mean by going to page 7.

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
<i>carb/levo orally disintegrating tab 10-100mg</i>	1	
<i>carb/levo orally disintegrating tab 25-100mg</i>	1	
<i>carb/levo orally disintegrating tab 25-250mg</i>	1	
<i>carbidopa &amp; levodopa tab 10-100 mg</i>	1	
<i>carbidopa &amp; levodopa tab 25-100 mg</i>	1	
<i>carbidopa &amp; levodopa tab 25-250 mg</i>	1	
<i>carbidopa &amp; levodopa tab er 25-100 mg</i>	1	
<i>carbidopa &amp; levodopa tab er 50-200 mg</i>	1	
<i>carbidopa-levodopa-entacapone tabs 12.5-50-200 mg</i>	1	
<i>carbidopa-levodopa-entacapone tabs 18.75-75-200 mg</i>	1	
<i>carbidopa-levodopa-entacapone tabs 25-100-200 mg</i>	1	
<i>carbidopa-levodopa-entacapone tabs 31.25-125-200 mg</i>	1	
<i>carbidopa-levodopa-entacapone tabs 37.5-150-200 mg</i>	1	
<i>carbidopa-levodopa-entacapone tabs 50-200-200 mg</i>	1	
<i>entacapone TABS 200mg</i>	1	
INBRIJA CAPS 42mg	2	QL (300 caps / 30 days), NM, LA, PA
NEUPRO PT24 1mg/24hr, 2mg/24hr, 3mg/24hr, 4mg/24hr, 6mg/24hr, 8mg/24hr	2	

This document includes a list of drugs covered on our formulary as of July 1, 2024. You can find information on what the symbols and abbreviations on this table mean by going to page 7.

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
<i>pramipexole dihydrochloride</i> TABS .125mg, .25mg, .5mg, .75mg, 1mg, 1.5mg	1	
<i>rasagiline mesylate</i> TABS .5mg, 1mg	1	QL (30 tabs / 30 days)
<i>ropinirole hydrochloride</i> TABS .25mg, .5mg, 1mg, 2mg, 3mg, 4mg, 5mg	1	
<i>selegiline hcl</i> CAPS 5mg; TABS 5mg	1	
<i>trihexyphenidyl hcl</i> SOLN .4mg/ml; TABS 2mg, 5mg	2	PA; PA if 70 years and older
<b>ANTIPSYCHOTICS</b>		
ABILIFY MAINTENA PRSY 300mg, 400mg	2	QL (1 syringe / 28 days)
ABILIFY MAINTENA SRER 300mg, 400mg	2	QL (1 injection / 28 days)
<i>aripiprazole</i> SOLN 1mg/ml	1	QL (900 mL / 30 days)
<i>aripiprazole</i> TABS 2mg, 5mg, 10mg, 15mg, 20mg, 30mg	1	QL (30 tabs / 30 days)
<i>aripiprazole</i> TBDP 10mg, 15mg	1	QL (60 tabs / 30 days)
ARISTADA PRSY 441mg/1.6ml, 662mg/2.4ml, 882mg/3.2ml	2	QL (1 syringe / 28 days)
ARISTADA PRSY 1064mg/3.9ml	2	QL (1 syringe / 56 days)
ARISTADA INITIO PRSY 675mg/2.4ml	2	
<i>asenapine maleate</i> SUBL 2.5mg, 5mg, 10mg	1	QL (60 tabs / 30 days)
CAPLYTA CAPS 10.5mg, 21mg, 42mg	2	QL (30 caps / 30 days)
<i>chlorpromazine hcl</i> CONC 30mg/ml, 100mg/ml; SOLN 25mg/ml, 50mg/2ml; TABS 10mg, 25mg, 50mg, 100mg, 200mg	1	
<i>clozapine</i> TABS 25mg, 50mg	1	
<i>clozapine</i> TABS 100mg	1	QL (270 tabs / 30 days)

This document includes a list of drugs covered on our formulary as of July 1, 2024. You can find information on what the symbols and abbreviations on this table mean by going to page 7.

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
<i>clozapine</i> TABS 200mg	1	QL (120 tabs / 30 days)
<i>clozapine</i> TBDP 12.5mg, 25mg	1	PA
<i>clozapine</i> TBDP 100mg	1	QL (270 tabs / 30 days), PA
<i>clozapine</i> TBDP 150mg	1	QL (180 tabs / 30 days), PA
<i>clozapine</i> TBDP 200mg	2	QL (120 tabs / 30 days), PA
FANAPT TABS 1mg, 2mg, 4mg, 6mg, 8mg, 10mg, 12mg	2	QL (60 tabs / 30 days), PA
FANAPT PAK	2	QL (2 packs / year), PA
<i>fluphenazine decanoate</i> SOLN 25mg/ml	1	
<i>fluphenazine hcl</i> CONC 5mg/ml; ELIX 2.5mg/5ml; SOLN 2.5mg/ml; TABS 1mg, 2.5mg, 5mg, 10mg	1	
<i>haloperidol</i> TABS .5mg, 1mg, 2mg, 5mg, 10mg, 20mg	1	
<i>haloperidol decanoate</i> SOLN 50mg/ml, 100mg/ml	1	
<i>haloperidol lactate</i> CONC 2mg/ml; SOLN 5mg/ml	1	
INVEGA HAFYERA SUSY 1092mg/3.5ml, 1560mg/5ml	2	QL (1 injection / 180 days)
INVEGA SUSTENNA SUSY 39mg/0.25ml, 78mg/0.5ml, 117mg/0.75ml, 156mg/ml, 234mg/1.5ml	2	QL (1 syringe / 28 days)
INVEGA TRINZA SUSY 273mg/0.88ml, 410mg/1.32ml, 546mg/1.75ml, 819mg/2.63ml	2	QL (1 syringe / 90 days)
<i>loxapine succinate</i> CAPS 5mg, 10mg, 25mg, 50mg	1	

This document includes a list of drugs covered on our formulary as of July 1, 2024. You can find information on what the symbols and abbreviations on this table mean by going to page 7.

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
<i>lurasidone hcl</i> TABS 20mg, 40mg, 60mg, 120mg	1	QL (30 tabs / 30 days)
<i>lurasidone hcl</i> TABS 80mg	1	QL (60 tabs / 30 days)
<i>molindone hcl</i> TABS 5mg, 10mg, 25mg	1	
NUPLAZID CAPS 34mg	2	QL (30 caps / 30 days), NM, LA, PA
NUPLAZID TABS 10mg	2	QL (30 tabs / 30 days), NM, LA, PA
<i>olanzapine</i> SOLR 10mg	1	QL (3 vials / 1 day)
<i>olanzapine</i> TABS 2.5mg, 5mg, 10mg; TBDP 10mg	1	QL (60 tabs / 30 days)
<i>olanzapine</i> TABS 7.5mg, 15mg, 20mg; TBDP 5mg, 15mg, 20mg	1	QL (30 tabs / 30 days)
<i>paliperidone</i> TB24 1.5mg, 3mg, 9mg	1	QL (30 tabs / 30 days)
<i>paliperidone</i> TB24 6mg	1	QL (60 tabs / 30 days)
<i>perphenazine</i> TABS 2mg, 4mg, 8mg, 16mg	1	
PERSERIS PRSY 90mg, 120mg	2	QL (1 syringe / 30 days)
<i>pimozide</i> TABS 1mg, 2mg	1	
<i>quetiapine fumarate</i> TABS 25mg	1	QL (180 tabs / 30 days)
<i>quetiapine fumarate</i> TABS 50mg, 100mg, 150mg, 200mg	1	QL (90 tabs / 30 days)
<i>quetiapine fumarate</i> TABS 300mg, 400mg	1	QL (60 tabs / 30 days)
<i>quetiapine fumarate</i> TB24 50mg, 300mg, 400mg	1	QL (60 tabs / 30 days), PA
<i>quetiapine fumarate</i> TB24 150mg, 200mg	1	QL (30 tabs / 30 days), PA
REXULTI TABS 3mg, 4mg	2	QL (30 tabs / 30 days)

This document includes a list of drugs covered on our formulary as of July 1, 2024. You can find information on what the symbols and abbreviations on this table mean by going to page 7.

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
REXULTI TABS .25mg, .5mg, 1mg, 2mg	2	QL (60 tabs / 30 days)
<i>risperidone</i> SOLN 1mg/ml	1	QL (240 mL / 30 days)
<i>risperidone</i> TABS .25mg, .5mg, 1mg, 2mg, 3mg, 4mg	1	
<i>risperidone</i> TBDP 1mg, 2mg, 3mg	1	QL (60 tabs / 30 days)
<i>risperidone</i> TBDP 4mg	1	QL (120 tabs / 30 days)
<i>risperidone</i> TBDP .25mg, .5mg	1	QL (90 tabs / 30 days)
<i>risperidone microspheres</i> SRER 12.5mg, 25mg	1	QL (2 injections / 28 days)
<i>risperidone microspheres</i> SRER 37.5mg, 50mg	2	QL (2 injections / 28 days)
SECUADO PT24 3.8mg/24hr, 5.7mg/24hr, 7.6mg/24hr	2	QL (30 patches / 30 days)
<i>thioridazine hcl</i> TABS 10mg, 25mg, 50mg, 100mg	1	
<i>thiothixene</i> CAPS 1mg, 2mg, 5mg, 10mg	1	
<i>trifluoperazine hcl</i> TABS 1mg, 2mg, 5mg, 10mg	1	
VERSACLOZ SUSP 50mg/ml	2	QL (600 mL / 30 days), PA
VRAYLAR CAPS 1.5mg	2	QL (60 caps / 30 days)
VRAYLAR CAPS 3mg, 4.5mg, 6mg	2	QL (30 caps / 30 days)
<i>ziprasidone hcl</i> CAPS 20mg, 40mg, 60mg, 80mg	1	QL (60 caps / 30 days)
<i>ziprasidone mesylate</i> SOLR 20mg	1	QL (6 injections / 3 days)
ZYPREXA RELPREVV SUSR 210mg, 300mg	2	QL (2 vials / 28 days), NM, PA

This document includes a list of drugs covered on our formulary as of July 1, 2024. You can find information on what the symbols and abbreviations on this table mean by going to page 7.

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
ZYPREXA RELPREVV SUSR 405mg	2	QL (1 vial / 28 days), NM, PA
<b>ANTIEPILEPTIC AGENTS</b>		
APTIOM TABS 200mg, 400mg	2	QL (30 tabs / 30 days)
APTIOM TABS 600mg, 800mg	2	QL (60 tabs / 30 days)
BRIVIACT SOLN 10mg/ml	2	QL (600 mL / 30 days), PA
BRIVIACT SOLN 50mg/5ml	2	PA
BRIVIACT TABS 10mg, 25mg, 50mg, 75mg, 100mg	2	QL (60 tabs / 30 days), PA
<i>carbamazepine</i> CHEW 100mg; CP12 100mg, 200mg, 300mg; SUSP 100mg/5ml; TABS 200mg; TB12 100mg, 200mg, 400mg	1	
<i>clobazam</i> SUSP 2.5mg/ml	1	QL (480 mL / 30 days), PA
<i>clobazam</i> TABS 10mg, 20mg	1	QL (60 tabs / 30 days), PA
<i>clonazepam</i> TABS 2mg; TBDP 2mg	1	QL (300 tabs / 30 days)
<i>clonazepam</i> TABS .5mg, 1mg; TBDP .125mg, .25mg, .5mg, 1mg	1	QL (90 tabs / 30 days)
<i>clorazepate dipotassium</i> TABS 3.75mg, 7.5mg, 15mg	1	QL (180 tabs / 30 days), PA; PA if 65 years and older
DIACOMIT CAPS 250mg	2	QL (360 caps / 30 days), NM, LA, PA
DIACOMIT CAPS 500mg	2	QL (180 caps / 30 days), NM, LA, PA
DIACOMIT PACK 250mg	2	QL (360 packets / 30 days), NM, LA, PA

This document includes a list of drugs covered on our formulary as of July 1, 2024. You can find information on what the symbols and abbreviations on this table mean by going to page 7.

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
DIACOMIT PACK 500mg	2	QL (180 packets / 30 days), NM, LA, PA
<i>diazepam</i> SOLN 5mg/5ml	1	QL (1200 mL / 30 days), PA; PA applies if 65 years and older after a 5 day supply in a calendar year
<i>diazepam</i> TABS 2mg, 5mg, 10mg	1	QL (120 tabs / 30 days), PA; PA applies if 65 years and older after a 5 day supply in a calendar year
<i>diazepam (anticonvulsant)</i> GEL 2.5mg, 10mg, 20mg	1	
<i>diazepam inj</i> SOLN 5mg/ml	1	
<i>diazepam intensol</i> CONC 5mg/ml	1	QL (240 mL / 30 days), PA; PA applies if 65 years and older after a 5 day supply in a calendar year
DILANTIN CAPS 30mg, 100mg	2	
DILANTIN INFATABS CHEW 50mg	2	
DILANTIN-125 SUSP 125mg/5ml	2	
<i>divalproex sodium</i> CSDR 125mg; TB24 250mg, 500mg; TBEC 125mg, 250mg, 500mg	1	
EPIDIOLEX SOLN 100mg/ml	2	QL (600 mL / 30 days), NM, LA, PA
<i>epitol</i> TABS 200mg	1	
EPRONTIA SOLN 25mg/ml	2	QL (480 mL / 30 days), PA
<i>ethosuximide</i> CAPS 250mg; SOLN 250mg/5ml	1	

This document includes a list of drugs covered on our formulary as of July 1, 2024. You can find information on what the symbols and abbreviations on this table mean by going to page 7.



<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
<i>felbamate</i> SUSP 600mg/5ml	2	
<i>felbamate</i> TABS 400mg, 600mg	1	
FINTEPLA SOLN 2.2mg/ml	2	QL (360 mL / 30 days), NM, LA, PA
FYCOMPA SUSP .5mg/ml	2	QL (720 mL / 30 days), PA
FYCOMPA TABS 2mg	2	QL (60 tabs / 30 days), PA
FYCOMPA TABS 4mg, 6mg, 8mg, 10mg, 12mg	2	QL (30 tabs / 30 days), PA
<i>gabapentin</i> CAPS 100mg, 300mg, 400mg	1	QL (180 caps / 30 days)
<i>gabapentin</i> SOLN 250mg/5ml, 300mg/6ml	1	QL (2160 mL / 30 days)
<i>gabapentin</i> TABS 600mg	1	QL (180 tabs / 30 days)
<i>gabapentin</i> TABS 800mg	1	QL (120 tabs / 30 days)
<i>lacosamide</i> SOLN 200mg/20ml	1	
<i>lacosamide</i> TABS 50mg	1	QL (120 tabs / 30 days)
<i>lacosamide</i> TABS 100mg, 150mg, 200mg	1	QL (60 tabs / 30 days)
<i>lacosamide oral</i> SOLN 10mg/ml	1	QL (1200 mL / 30 days)
<i>lamotrigine</i> CHEW 5mg, 25mg; TABS 25mg, 100mg, 150mg, 200mg; TB24 25mg, 50mg, 100mg, 200mg, 250mg, 300mg	1	
<i>levetiracetam</i> SOLN 100mg/ml, 500mg/5ml; TABS 250mg, 500mg, 750mg, 1000mg; TB24 500mg, 750mg	1	
<i>levetiracetam in sodium chloride iv soln</i> 500 mg/100ml	1	
<i>levetiracetam in sodium chloride iv soln</i> 1000 mg/100ml	1	

This document includes a list of drugs covered on our formulary as of July 1, 2024. You can find information on what the symbols and abbreviations on this table mean by going to page 7.

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
<i>levetiracetam in sodium chloride iv soln</i> 1500 mg/100ml	1	
<i>methsuximide</i> CAPS 300mg	1	
NAYZILAM SOLN 5mg/0.1ml	2	
<i>oxcarbazepine</i> SUSP 300mg/5ml; TABS 150mg, 300mg, 600mg	1	
<i>phenobarbital</i> ELIX 20mg/5ml	2	QL (1500 mL / 30 days), PA; PA if 70 years and older
<i>phenobarbital</i> TABS 15mg, 16.2mg, 30mg, 32.4mg, 60mg, 64.8mg, 97.2mg, 100mg	2	QL (120 tabs / 30 days), PA; PA if 70 years and older
<i>phenobarbital sodium</i> SOLN 65mg/ml, 130mg/ml	2	PA; PA if 70 years and older
<i>phenytek</i> CAPS 200mg, 300mg	1	
<i>phenytoin</i> CHEW 50mg; SUSP 125mg/5ml	1	
<i>phenytoin sodium</i> SOLN 50mg/ml	1	
<i>phenytoin sodium extended</i> CAPS 100mg, 200mg, 300mg	1	
<i>pregabalin</i> CAPS 25mg, 50mg, 75mg, 100mg, 150mg	1	QL (120 caps / 30 days), PA
<i>pregabalin</i> CAPS 200mg	1	QL (90 caps / 30 days), PA
<i>pregabalin</i> CAPS 225mg, 300mg	1	QL (60 caps / 30 days), PA
<i>pregabalin</i> SOLN 20mg/ml	1	QL (900 mL / 30 days), PA
<i>primidone</i> TABS 50mg, 125mg, 250mg	1	
<i>roweepra</i> TABS 500mg	1	

This document includes a list of drugs covered on our formulary as of July 1, 2024. You can find information on what the symbols and abbreviations on this table mean by going to page 7.

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
<i>rufinamide</i> SUSP 40mg/ml	2	QL (2400 mL / 30 days), PA
<i>rufinamide</i> TABS 200mg	1	QL (480 tabs / 30 days), PA
<i>rufinamide</i> TABS 400mg	2	QL (240 tabs / 30 days), PA
SPRITAM TB3D 250mg	2	QL (360 tabs / 30 days)
SPRITAM TB3D 500mg	2	QL (180 tabs / 30 days)
SPRITAM TB3D 750mg	2	QL (120 tabs / 30 days)
SPRITAM TB3D 1000mg	2	QL (90 tabs / 30 days)
<i>subvenite</i> TABS 25mg, 100mg, 150mg, 200mg	1	
SYMPAZAN FILM 5mg, 10mg, 20mg	2	QL (60 films / 30 days), PA
<i>tiagabine hcl</i> TABS 2mg, 4mg, 12mg, 16mg	1	
<i>topiramate</i> CPSP 15mg, 25mg; TABS 25mg, 50mg, 100mg, 200mg	1	
<i>valproate sodium</i> SOLN 100mg/ml, 250mg/5ml	1	
<i>valproic acid</i> CAPS 250mg	1	
VALTOCO 5 MG DOSE LIQD 5mg/0.1ml	2	
VALTOCO 10 MG DOSE LIQD 10mg/0.1ml	2	
VALTOCO 15 MG DOSE LQPK 7.5mg/0.1ml	2	
VALTOCO 20 MG DOSE LQPK 10mg/0.1ml	2	
<i>vigabatrin</i> PACK 500mg	2	QL (180 packets / 30 days), NM, LA, PA
<i>vigabatrin</i> TABS 500mg	2	QL (180 tabs / 30 days), NM, LA, PA

This document includes a list of drugs covered on our formulary as of July 1, 2024. You can find information on what the symbols and abbreviations on this table mean by going to page 7.

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
<i>vigadrone</i> PACK 500mg	2	QL (180 packets / 30 days), NM, LA, PA
<i>vigadrone</i> TABS 500mg	2	QL (180 tabs / 30 days), NM, LA, PA
<i>vigpoder</i> PACK 500mg	2	QL (180 packets / 30 days), NM, LA, PA
XCOPRI TABS 50mg, 100mg	2	QL (30 tabs / 30 days)
XCOPRI TABS 150mg, 200mg	2	QL (60 tabs / 30 days)
XCOPRI PAK 12.5-25	2	QL (28 tabs / 28 days)
XCOPRI PAK 50-100MG	2	QL (28 tabs / 28 days)
XCOPRI PAK 100-150	2	QL (56 tabs / 28 days)
XCOPRI PAK 150-200MG (MAINTENANCE)	2	QL (56 tabs / 28 days)
XCOPRI PAK 150-200MG (TITRATION)	2	QL (28 tabs / 28 days)
ZONISADE SUSP 100mg/5ml	2	QL (900 mL / 30 days), PA
<i>zonisamide</i> CAPS 25mg, 50mg, 100mg	1	
ZTALMY SUSP 50mg/ml	2	QL (1100 mL / 30 days), NM, LA, PA
<b>ATTENTION DEFICIT HYPERACTIVITY DISORDER</b>		
<i>amphetamine-dextroamphetamine cap er 24hr 5 mg</i>	1	QL (30 caps / 30 days), PA
<i>amphetamine-dextroamphetamine cap er 24hr 10 mg</i>	1	QL (30 caps / 30 days), PA
<i>amphetamine-dextroamphetamine cap er 24hr 15 mg</i>	1	QL (30 caps / 30 days), PA
<i>amphetamine-dextroamphetamine cap er 24hr 20 mg</i>	1	QL (30 caps / 30 days), PA
<i>amphetamine-dextroamphetamine cap er 24hr 25 mg</i>	1	QL (30 caps / 30 days), PA

This document includes a list of drugs covered on our formulary as of July 1, 2024. You can find information on what the symbols and abbreviations on this table mean by going to page 7.

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
<i>amphetamine-dextroamphetamine cap er 24hr 30 mg</i>	1	QL (30 caps / 30 days), PA
<i>amphetamine-dextroamphetamine tab 5 mg</i>	1	QL (60 tabs / 30 days), PA
<i>amphetamine-dextroamphetamine tab 7.5 mg</i>	1	QL (60 tabs / 30 days), PA
<i>amphetamine-dextroamphetamine tab 10 mg</i>	1	QL (60 tabs / 30 days), PA
<i>amphetamine-dextroamphetamine tab 12.5 mg</i>	1	QL (60 tabs / 30 days), PA
<i>amphetamine-dextroamphetamine tab 15 mg</i>	1	QL (60 tabs / 30 days), PA
<i>amphetamine-dextroamphetamine tab 20 mg</i>	1	QL (90 tabs / 30 days), PA
<i>amphetamine-dextroamphetamine tab 30 mg</i>	1	QL (60 tabs / 30 days), PA
<i>atomoxetine hcl CAPS 10mg, 18mg, 25mg</i>	1	QL (120 caps / 30 days)
<i>atomoxetine hcl CAPS 40mg</i>	1	QL (60 caps / 30 days)
<i>atomoxetine hcl CAPS 60mg, 80mg, 100mg</i>	1	QL (30 caps / 30 days)
<i>dexmethylphenidate hcl TABS 2.5mg, 5mg</i>	1	QL (120 tabs / 30 days), PA
<i>dexmethylphenidate hcl TABS 10mg</i>	1	QL (60 tabs / 30 days), PA
<i>guanfacine hcl (adhd) TB24 1mg, 2mg, 4mg</i>	2	QL (30 tabs / 30 days), PA; PA if 70 years and older
<i>guanfacine hcl (adhd) TB24 3mg</i>	2	QL (60 tabs / 30 days), PA; PA if 70 years and older
<i>methylphenidate hcl SOLN 5mg/5ml</i>	1	QL (1800 mL / 30 days), PA

This document includes a list of drugs covered on our formulary as of July 1, 2024. You can find information on what the symbols and abbreviations on this table mean by going to page 7.

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
<i>methylphenidate hcl</i> SOLN 10mg/5ml	1	QL (900 mL / 30 days), PA
<i>methylphenidate hcl</i> TABS 5mg, 10mg	1	QL (180 tabs / 30 days), PA
<i>methylphenidate hcl</i> TABS 20mg; TBCR 10mg, 20mg	1	QL (90 tabs / 30 days), PA
<b>HYPNOTICS</b>		
DAYVIGO TABS 5mg, 10mg	2	QL (30 tabs / 30 days)
<i>doxepin hcl (sleep)</i> TABS 3mg, 6mg	1	QL (30 tabs / 30 days)
<i>eszopiclone</i> TABS 1mg, 2mg, 3mg	2	QL (30 tabs / 30 days), PA; PA applies if 70 years and older after a 90 day supply in a calendar year
<i>tasimelteon</i> CAPS 20mg	2	QL (30 caps / 30 days), NM, PA
<i>temazepam</i> CAPS 7.5mg, 30mg	1	QL (30 caps / 30 days), PA; PA if 65 years and older
<i>temazepam</i> CAPS 15mg	1	QL (60 caps / 30 days), PA; PA if 65 years and older
<i>zaleplon</i> CAPS 5mg	2	QL (30 caps / 30 days), PA; PA applies if 70 years and older after a 90 day supply in a calendar year
<i>zaleplon</i> CAPS 10mg	2	QL (60 caps / 30 days), PA; PA applies if 70 years and older after a 90 day supply in a calendar year

This document includes a list of drugs covered on our formulary as of July 1, 2024. You can find information on what the symbols and abbreviations on this table mean by going to page 7.

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
<i>zolpidem tartrate</i> TABS 5mg, 10mg	2	QL (30 tabs / 30 days), PA; PA applies if 70 years and older after a 90 day supply in a calendar year
<b>MIGRAINE</b>		
AIMOVIG SOAJ 70mg/ml, 140mg/ml	2	QL (1 pen / 30 days), NM, PA
<i>dihydroergotamine mesylate</i> SOLN 1mg/ml	2	
<i>dihydroergotamine mesylate</i> SOLN 4mg/ml	2	QL (8 mL / 30 days), PA
<i>ergotamine w/ caffeine tab 1-100 mg</i>	1	QL (40 tabs / 28 days), PA
<i>naratriptan hcl</i> TABS 1mg, 2.5mg	1	QL (12 tabs / 30 days)
NURTEC TBDP 75mg	2	QL (16 tabs / 30 days), PA
QULIPTA TABS 10mg, 30mg, 60mg	2	QL (30 tabs / 30 days), PA
<i>rizatriptan benzoate</i> TABS 5mg, 10mg; TBDP 5mg, 10mg	1	QL (18 tabs / 30 days)
<i>sumatriptan</i> SOLN 5mg/act	1	QL (24 units / 30 days)
<i>sumatriptan</i> SOLN 20mg/act	1	QL (12 units / 30 days)
<i>sumatriptan succinate</i> SOAJ 4mg/0.5ml; SOCT 4mg/0.5ml	1	QL (18 injections / 30 days)
<i>sumatriptan succinate</i> SOAJ 6mg/0.5ml; SOCT 6mg/0.5ml; SOLN 6mg/0.5ml	1	QL (12 injections / 30 days)
<i>sumatriptan succinate</i> TABS 25mg, 50mg, 100mg	1	QL (12 tabs / 30 days)
UBRELVY TABS 50mg, 100mg	2	QL (16 tabs / 30 days), PA

This document includes a list of drugs covered on our formulary as of July 1, 2024. You can find information on what the symbols and abbreviations on this table mean by going to page 7.

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
<b>MISCELLANEOUS</b>		
AUSTEDO TABS 6mg	2	QL (60 tabs / 30 days), NM, LA, PA
AUSTEDO TABS 9mg, 12mg	2	QL (120 tabs / 30 days), NM, LA, PA
AUSTEDO XR TB24 6mg	2	QL (90 tabs / 30 days), NM, PA
AUSTEDO XR TB24 12mg	2	QL (120 tabs / 30 days), NM, PA
AUSTEDO XR TB24 24mg	2	QL (60 tabs / 30 days), NM, PA
AUSTEDO XR TAB TITR KIT	2	QL (2 packs / year), NM, PA
<i>lithium</i> SOLN 8meq/5ml	1	
<i>lithium carbonate</i> CAPS 150mg, 300mg, 600mg; TABS 300mg; TBCR 300mg, 450mg	1	
NUEDEXTA CAP 20-10MG	2	QL (60 caps / 30 days), PA
<i>pyridostigmine bromide</i> TABS 60mg	1	
<i>riluzole</i> TABS 50mg	1	
<i>tetrabenazine</i> TABS 12.5mg	2	QL (90 tabs / 30 days), NM, PA
<i>tetrabenazine</i> TABS 25mg	2	QL (120 tabs / 30 days), NM, PA
<b>MULTIPLE SCLEROSIS AGENTS</b>		
BAFIERTAM CPDR 95mg	2	QL (120 caps / 30 days), NM, LA, PA
BETASERON KIT .3mg	2	QL (14 syringes / 28 days), NM, PA

This document includes a list of drugs covered on our formulary as of July 1, 2024. You can find information on what the symbols and abbreviations on this table mean by going to page 7.



<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
<i>dalfampridine</i> TB12 10mg	1	QL (60 tabs / 30 days), NM, PA
<i>fingolimod hcl</i> CAPS .5mg	2	QL (30 caps / 30 days), NM, PA
<i>glatiramer acetate</i> SOSY 20mg/ml	2	QL (30 syringes / 30 days), NM, PA
<i>glatiramer acetate</i> SOSY 40mg/ml	2	QL (12 syringes / 28 days), NM, PA
<i>glatopa</i> SOSY 20mg/ml	2	QL (30 syringes / 30 days), NM, PA
<i>glatopa</i> SOSY 40mg/ml	2	QL (12 syringes / 28 days), NM, PA
KESIMPTA SOAJ 20mg/0.4ml	2	QL (16 pens / year), NM, LA, PA

### ***MUSCULOSKELETAL THERAPY AGENTS***

<i>baclofen</i> TABS 5mg	1	QL (90 tabs / 30 days)
<i>baclofen</i> TABS 10mg, 20mg	1	
<i>carisoprodol</i> TABS 350mg	2	QL (120 tabs / 30 days), PA; PA applies if 70 years and older after a 30 day supply in a calendar year
<i>cyclobenzaprine hcl</i> TABS 5mg, 10mg	2	QL (90 tabs / 30 days), PA; PA applies if 70 years and older after a 30 day supply in a calendar year
<i>dantrolene sodium</i> CAPS 25mg, 50mg, 100mg	1	
<i>methocarbamol</i> TABS 500mg	2	QL (360 tabs / 30 days), PA; PA applies if 70 years and older after a 30 day supply in a calendar year

This document includes a list of drugs covered on our formulary as of July 1, 2024. You can find information on what the symbols and abbreviations on this table mean by going to page 7.

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
<i>methocarbamol</i> TABS 750mg	2	QL (240 tabs / 30 days), PA; PA applies if 70 years and older after a 30 day supply in a calendar year
<i>tizanidine hcl</i> TABS 2mg, 4mg	1	
<b>NARCOLEPSY/CATAPLEXY</b>		
<i>armodafinil</i> TABS 50mg	1	QL (60 tabs / 30 days), PA
<i>armodafinil</i> TABS 150mg, 200mg, 250mg	1	QL (30 tabs / 30 days), PA
<i>modafinil</i> TABS 100mg	1	QL (30 tabs / 30 days), PA
<i>modafinil</i> TABS 200mg	1	QL (60 tabs / 30 days), PA
SODIUM OXYBATE SOLN 500mg/ml	2	QL (540 mL / 30 days), NM, LA, PA
<b>PSYCHOTHERAPEUTIC-MISC</b>		
<i>acamprosate calcium</i> TBEC 333mg	1	
<i>acetadryl</i>	3	
ADVIL PM TAB 200-38MG	3	
BAYER PM TAB 38.3-500	3	
<i>bl headache pm</i>	3	
BUFFERIN AF TAB NITETIME	3	
<i>buprenorphine hcl</i> SUBL 2mg, 8mg	1	QL (90 tabs / 30 days), PA
<i>buprenorphine hcl-naloxone hcl sl film 2-0.5 mg (base equiv)</i>	1	QL (90 films / 30 days)
<i>buprenorphine hcl-naloxone hcl sl film 4-1 mg (base equiv)</i>	1	QL (90 films / 30 days)

This document includes a list of drugs covered on our formulary as of July 1, 2024. You can find information on what the symbols and abbreviations on this table mean by going to page 7.

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
<i>buprenorphine hcl-naloxone hcl sl film 8-2 mg (base equiv)</i>	1	QL (90 films / 30 days)
<i>buprenorphine hcl-naloxone hcl sl film 12-3 mg (base equiv)</i>	1	QL (60 films / 30 days)
<i>buprenorphine hcl-naloxone hcl sl tab 2-0.5 mg (base equiv)</i>	1	QL (90 tabs / 30 days)
<i>buprenorphine hcl-naloxone hcl sl tab 8-2 mg (base equiv)</i>	1	QL (90 tabs / 30 days)
<i>bupropion hcl (smoking deterrent) TB12 150mg</i>	1	QL (60 tabs / 30 days)
COMMIT LOZG 2mg, 4mg	3	
compoz CAPS 50mg	3	
cvs nicotine PT24 7mg/24hr, 14mg/24hr, 21mg/24hr	3	
cvs nicotine polacrilex GUM 2mg, 4mg; LOZG 2mg, 4mg	3	
<i>diphenhydramine hcl (sleep) TABS 25mg</i>	3	
<i>disulfiram TABS 250mg, 500mg</i>	1	
<i>doxylamine succinate (sleep) TABS 25mg</i>	3	
<i>eq sleep-aid nighttime CAPS 25mg</i>	3	
<i>eql ibuprofen pm</i>	3	
<i>eql sleep aid nighttime LIQD 50mg/30ml</i>	3	
HCA NON-ASA TAB PM	3	
<i>naloxone hcl LIQD 4mg/0.1ml; SOCT .4mg/ml; SOLN .4mg/ml, 4mg/10ml; SOSY 2mg/2ml</i>	1	
<i>naltrexone hcl TABS 50mg</i>	1	
NICOTINE SYS KIT TRANSDER	3	

This document includes a list of drugs covered on our formulary as of July 1, 2024. You can find information on what the symbols and abbreviations on this table mean by going to page 7.

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
NICOTROL INHALER INHA 10mg	2	
NICOTROL NS SOLN 10mg/ml	2	
UNISOM TABS 25mg	3	
UNISOM SLEEPGELS CAPS 50mg	3	
<i>varenicline tartrate</i> TABS .5mg, 1mg	1	QL (56 tabs / 28 days), PA
<i>varenicline tartrate tab 11 x 0.5 mg &amp; 42 x 1 mg start pack</i>	1	QL (2 packs / year), PA
VIVITROL SUSR 380mg	2	NM
ZZZQUIL CAPS 25mg; LIQD 50mg/30ml	3	

## **ENDOCRINE AND METABOLIC**

### **ANDROGENS**

<i>depo-testosterone</i> SOLN 100mg/ml, 200mg/ml	1	PA
<i>methyltestosterone</i> CAPS 10mg	2	QL (600 caps / 30 days), PA
<i>testosterone</i> GEL 1%, 25mg/2.5gm, 50mg/5gm	1	QL (300 gm / 30 days), PA
<i>testosterone</i> GEL 1.62%	1	QL (150 gm / 30 days), PA
<i>testosterone cypionate</i> SOLN 100mg/ml, 200mg/ml	1	PA
<i>testosterone enanthate</i> SOLN 200mg/ml	1	PA

### **ANTIDIABETICS**

<i>acarbose</i> TABS 25mg, 50mg, 100mg	1	
BYDUREON BCISE AUIJ 2mg/0.85ml	2	QL (4 pens / 28 days), PA
BYETTA SOPN 5mcg/0.02ml, 10mcg/0.04ml	2	QL (1 pen / 30 days), PA

This document includes a list of drugs covered on our formulary as of July 1, 2024. You can find information on what the symbols and abbreviations on this table mean by going to page 7.

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
FARXIGA TABS 5mg, 10mg	2	QL (30 tabs / 30 days)
<i>glimepiride</i> TABS 1mg, 2mg	1	QL (90 tabs / 30 days)
<i>glimepiride</i> TABS 4mg	1	QL (60 tabs / 30 days)
<i>glipizide</i> TABS 5mg	1	QL (240 tabs / 30 days)
<i>glipizide</i> TABS 10mg	1	QL (120 tabs / 30 days)
<i>glipizide</i> TB24 2.5mg, 5mg	1	QL (90 tabs / 30 days)
<i>glipizide</i> TB24 10mg	1	QL (60 tabs / 30 days)
<i>glipizide xl</i> TB24 2.5mg, 5mg	1	QL (90 tabs / 30 days)
<i>glipizide xl</i> TB24 10mg	1	QL (60 tabs / 30 days)
<i>glipizide-metformin hcl tab 2.5-250 mg</i>	1	QL (240 tabs / 30 days)
<i>glipizide-metformin hcl tab 2.5-500 mg</i>	1	QL (120 tabs / 30 days)
<i>glipizide-metformin hcl tab 5-500 mg</i>	1	QL (120 tabs / 30 days)
GLYXAMBI TAB 10-5 MG	2	QL (30 tabs / 30 days)
GLYXAMBI TAB 25-5 MG	2	QL (30 tabs / 30 days)
JANUMET TAB 50-500MG	2	QL (60 tabs / 30 days)
JANUMET TAB 50-1000	2	QL (60 tabs / 30 days)
JANUMET XR TAB 50-500MG	2	QL (60 tabs / 30 days)
JANUMET XR TAB 50-1000	2	QL (60 tabs / 30 days)
JANUMET XR TAB 100-1000	2	QL (30 tabs / 30 days)
JANUVIA TABS 25mg, 50mg, 100mg	2	QL (30 tabs / 30 days)
JARDIANCE TABS 10mg, 25mg	2	QL (30 tabs / 30 days)
JENTADUETO TAB 2.5-500	2	QL (60 tabs / 30 days)
JENTADUETO TAB 2.5-850	2	QL (60 tabs / 30 days)

This document includes a list of drugs covered on our formulary as of July 1, 2024. You can find information on what the symbols and abbreviations on this table mean by going to page 7.

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
JENTADUETO TAB 2.5-1000	2	QL (60 tabs / 30 days)
JENTADUETO TAB XR 2.5-1000MG	2	QL (60 tabs / 30 days)
JENTADUETO TAB XR 5-1000MG	2	QL (30 tabs / 30 days)
<i>metformin hcl</i> TABS 500mg	1	QL (150 tabs / 30 days)
<i>metformin hcl</i> TABS 850mg	1	QL (90 tabs / 30 days)
<i>metformin hcl</i> TABS 1000mg	1	QL (75 tabs / 30 days)
<i>metformin hcl</i> TB24 500mg	1	QL (120 tabs / 30 days); (generic of GLUCOPHAGE XR)
<i>metformin hcl</i> TB24 750mg	1	QL (60 tabs / 30 days); (generic of GLUCOPHAGE XR)
MOUNJARO SOPN 2.5mg/0.5ml, 5mg/0.5ml, 7.5mg/0.5ml, 10mg/0.5ml, 12.5mg/0.5ml, 15mg/0.5ml	2	QL (4 pens / 28 days), PA
<i>nateglinide</i> TABS 60mg, 120mg	1	QL (90 tabs / 30 days)
OZEMPIC (0.25 OR 0.5 MG/DOSE) SOPN 2mg/1.5ml	2	QL (1 pen / 28 days), PA
OZEMPIC (0.25 OR 0.5MG/DOSE) SOPN 2mg/3ml	2	QL (1 pen / 28 days), PA
OZEMPIC (1MG/DOSE) SOPN 4mg/3ml	2	QL (1 pen / 28 days), PA
OZEMPIC (2MG/DOSE) SOPN 8mg/3ml	2	QL (1 pen / 28 days), PA
<i>pioglitazone hcl</i> TABS 15mg, 30mg, 45mg	1	QL (30 tabs / 30 days)
<i>pioglitazone hcl-metformin hcl tab 15-500 mg</i>	1	QL (90 tabs / 30 days)
<i>pioglitazone hcl-metformin hcl tab 15-850 mg</i>	1	QL (90 tabs / 30 days)
<i>repaglinide</i> TABS 2mg	1	QL (240 tabs / 30 days)

This document includes a list of drugs covered on our formulary as of July 1, 2024. You can find information on what the symbols and abbreviations on this table mean by going to page 7.

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
<i>repaglinide</i> TABS .5mg, 1mg	1	QL (120 tabs / 30 days)
RYBELSUS TABS 3mg, 7mg, 14mg	2	QL (30 tabs / 30 days), PA
SYNJARDY TAB 5-500MG	2	QL (120 tabs / 30 days)
SYNJARDY TAB 5-1000MG	2	QL (60 tabs / 30 days)
SYNJARDY TAB 12.5-500	2	QL (60 tabs / 30 days)
SYNJARDY TAB 12.5-1000MG	2	QL (60 tabs / 30 days)
SYNJARDY XR TAB 5-1000MG	2	QL (60 tabs / 30 days)
SYNJARDY XR TAB 10-1000	2	QL (60 tabs / 30 days)
SYNJARDY XR TAB 12.5-1000	2	QL (60 tabs / 30 days)
SYNJARDY XR TAB 25-1000	2	QL (30 tabs / 30 days)
TRADJENTA TABS 5mg	2	QL (30 tabs / 30 days)
TRIJARDY XR TAB ER 24HR 5-2.5-1000MG	2	QL (60 tabs / 30 days)
TRIJARDY XR TAB ER 24HR 10-5-1000MG	2	QL (30 tabs / 30 days)
TRIJARDY XR TAB ER 24HR 12.5-2.5-1000MG	2	QL (60 tabs / 30 days)
TRIJARDY XR TAB ER 24HR 25-5-1000MG	2	QL (30 tabs / 30 days)
TRULICITY SOPN .75mg/0.5ml, 1.5mg/0.5ml, 3mg/0.5ml, 4.5mg/0.5ml	2	QL (4 pens / 28 days), PA
XIGDUO XR TAB 2.5-1000	2	QL (60 tabs / 30 days)
XIGDUO XR TAB 5-500MG	2	QL (60 tabs / 30 days)
XIGDUO XR TAB 5-1000MG	2	QL (60 tabs / 30 days)
XIGDUO XR TAB 10-500MG	2	QL (30 tabs / 30 days)
XIGDUO XR TAB 10-1000	2	QL (30 tabs / 30 days)

This document includes a list of drugs covered on our formulary as of July 1, 2024. You can find information on what the symbols and abbreviations on this table mean by going to page 7.

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
<b><i>ANTIDIABETICS, INSULINS</i></b>		
ADMELOG SOLN 100unit/ml	2	
ADMELOG SOLOSTAR SOPN 100unit/ml	2	
BASAGLAR KWIKPEN SOPN 100unit/ml	2	
BD ALCOHOL SWABS	2	
FIASP SOLN 100unit/ml	2	
FIASP FLEXTOUCH SOPN 100unit/ml	2	
FIASP PENFILL SOCT 100unit/ml	2	
FIASP PUMPCART SOCT 100unit/ml	2	B/D
GAUZE PADS 2" X 2"	2	
HUMULIN R U-500 (CONCENTR SOLN 500unit/ml	2	B/D
HUMULIN R U-500 KWIKPEN SOPN 500unit/ml	2	
INSULIN PEN NEEDLES: BD/NOVO	2	
INSULIN SAFETY NEEDLES	2	
INSULIN SYRINGES: BD	2	
LANTUS SOLN 100unit/ml	2	
LANTUS SOLOSTAR SOPN 100unit/ml	2	
NOVOLIN INJ 70/30	2	(brand RELION not covered)
NOVOLIN INJ 70/30 FP	2	(brand RELION not covered)
NOVOLIN N SUSP 100unit/ml	2	(brand RELION not covered)
NOVOLIN N FLEXPEN SUPN 100unit/ml	2	(brand RELION not covered)

This document includes a list of drugs covered on our formulary as of July 1, 2024. You can find information on what the symbols and abbreviations on this table mean by going to page 7.



<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
NOVOLIN R SOLN 100unit/ml	2	(brand RELION not covered)
NOVOLIN R FLEXPEN SOPN 100unit/ml	2	(brand RELION not covered)
NOVOLOG SOLN 100unit/ml	2	(brand RELION not covered)
NOVOLOG FLEXPEN SOPN 100unit/ml	2	(brand RELION not covered)
NOVOLOG MIX INJ 70/30	2	(brand RELION not covered)
NOVOLOG MIX INJ FLEXPEN	2	(brand RELION not covered)
NOVOLOG PENFILL SOCT 100unit/ml	2	(brand RELION not covered)
OMNIPOD 5 G6 KIT INTRO	2	QL (1 kit / year), PA
OMNIPOD 5 G6 MIS PODS	2	QL (15 pods / 30 days), PA
OMNIPOD 5 G7 KIT INTRO	2	QL (1 kit / year), PA
OMNIPOD 5 G7 MIS PODS	2	QL (15 pods / 30 days), PA
OMNIPOD DASH KIT INTRO	2	QL (1 kit / year), PA
OMNIPOD DASH MIS PODS	2	QL (15 pods / 30 days), PA
OMNIPOD GO KIT 10UNT/DY	2	QL (15 pods / 30 days), PA
OMNIPOD GO KIT 15UNT/DY	2	QL (15 pods / 30 days), PA
OMNIPOD GO KIT 20UNT/DY	2	QL (15 pods / 30 days), PA
OMNIPOD GO KIT 25UNT/DY	2	QL (15 pods / 30 days), PA

This document includes a list of drugs covered on our formulary as of July 1, 2024. You can find information on what the symbols and abbreviations on this table mean by going to page 7.

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
OMNIPOD GO KIT 30UNT/DY	2	QL (15 pods / 30 days), PA
OMNIPOD GO KIT 35UNT/DY	2	QL (15 pods / 30 days), PA
OMNIPOD GO KIT 40UNT/DY	2	QL (15 pods / 30 days), PA
OMNIPOD MIS CLASSIC	2	QL (15 pods / 30 days), PA
SOLIQUA INJ 100/33	2	QL (5 pens / 25 days)
TOUJEO MAX SOLOSTAR SOPN 300unit/ml	2	
TOUJEO SOLOSTAR SOPN 300unit/ml	2	
TRESIBA SOLN 100unit/ml	2	
TRESIBA FLEXTOUCH SOPN 100unit/ml, 200unit/ml	2	
V-GO 20 KIT	2	QL (30 devices / 30 days), PA
V-GO 30 KIT	2	QL (30 devices / 30 days), PA
V-GO 40 KIT	2	QL (30 devices / 30 days), PA
XULTOPHY INJ 100/3.6	2	QL (5 pens / 30 days)
<b>CALCIUM REGULATORS</b>		
<i>alendronate sodium</i> SOLN 70mg/75ml; TABS 10mg, 35mg, 70mg	1	
<i>calcitonin (salmon) spray</i> SOLN 200unit/act	1	B/D
<i>ibandronate sodium</i> TABS 150mg	1	B/D
NATPARA CART 25mcg, 50mcg, 75mcg, 100mcg	2	LA, PA

This document includes a list of drugs covered on our formulary as of July 1, 2024. You can find information on what the symbols and abbreviations on this table mean by going to page 7.

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
PAMIDRONATE DISODIUM SOLN 6mg/ml	2	B/D
<i>pamidronate disodium</i> SOLN 30mg/10ml, 90mg/10ml	1	B/D
PROLIA SOSY 60mg/ml	2	QL (1 syringe / 180 days), NM
<i>risedronate sodium</i> TABS 5mg, 35mg, 150mg; TBEC 35mg	1	
TERIPARATIDE SOPN 620mcg/2.48ml	2	NM, PA
XGEVA SOLN 120mg/1.7ml	2	NM, PA
<i>zoledronic acid</i> CONC 4mg/5ml; SOLN 4mg/100ml, 5mg/100ml	1	B/D, NM
<b>CHELATING AGENTS</b>		
CHEMET CAPS 100mg	2	
<i>deferasirox</i> PACK 90mg, 180mg, 360mg; TABS 180mg, 360mg	2	NM, PA
<i>deferasirox</i> TABS 90mg	1	NM, PA
LOKELMA PACK 5gm, 10gm	2	
<i>penicillamine</i> TABS 250mg	2	NM
<i>sodium polystyrene sulfonate powder</i>	1	
<i>sps</i> SUSP 15gm/60ml	1	
<i>trientine hcl</i> CAPS 250mg	2	NM, PA
VELTASSA PACK 8.4gm, 16.8gm, 25.2gm	2	
<b>ENDOMETRIOSIS</b>		
<i>danazol</i> CAPS 50mg, 100mg, 200mg	1	
SYNAREL SOLN 2mg/ml	2	PA
<b>ESTROGENS</b>		
<i>dotti</i> PTTW .025mg/24hr, .037mg/24hr, .05mg/24hr, .075mg/24hr, .1mg/24hr	2	

This document includes a list of drugs covered on our formulary as of July 1, 2024. You can find information on what the symbols and abbreviations on this table mean by going to page 7.

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
<i>estradiol</i> PTTW .025mg/24hr, .037mg/24hr, .05mg/24hr, .075mg/24hr, .1mg/24hr; PTWK .025mg/24hr, .05mg/24hr, .06mg/24hr, .075mg/24hr, .1mg/24hr, 37.5mcg/24hr; TABS .5mg, 1mg, 2mg	2	
<i>estradiol &amp; norethindrone acetate tab 0.5-0.1 mg</i>	2	
<i>estradiol &amp; norethindrone acetate tab 1-0.5 mg</i>	2	
<i>estradiol vaginal</i> CREA .1mg/gm; TABS 10mcg	1	
<i>estradiol valerate</i> OIL 10mg/ml, 20mg/ml, 40mg/ml	1	
<i>fyavolv tab 0.5mg-2.5mcg</i>	2	
<i>fyavolv tab 1mg-5mcg</i>	2	
<i>jinteli</i>	2	
<i>lyllana</i> PTTW .025mg/24hr, .037mg/24hr, .05mg/24hr, .075mg/24hr, .1mg/24hr	2	
<i>mimvey</i>	2	
<i>norethindrone acetate-ethinyl estradiol tab 0.5 mg-2.5 mcg</i>	2	
<i>norethindrone acetate-ethinyl estradiol tab 1 mg-5 mcg</i>	2	
<i>yuvaferm</i> TABS 10mcg	1	
<b>GLUCOCORTICOIDS</b>		
<i>dexamethasone</i> ELIX .5mg/5ml; SOLN .5mg/5ml; TABS .5mg, .75mg, 1mg, 1.5mg, 2mg, 4mg, 6mg	1	B/D
DEXAMETHASONE INTENSOL CONC 1mg/ml	2	B/D

This document includes a list of drugs covered on our formulary as of July 1, 2024. You can find information on what the symbols and abbreviations on this table mean by going to page 7.

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
<i>dexamethasone sodium phosphate</i> SOLN 4mg/ml, 10mg/ml, 20mg/5ml, 100mg/10ml, 120mg/30ml; SOSY 4mg/ml	1	
<i>fludrocortisone acetate</i> TABS .1mg	1	
<i>hydrocortisone</i> TABS 5mg, 10mg, 20mg	1	
<i>methylprednisolone</i> TABS 4mg, 8mg, 16mg, 32mg	1	B/D
<i>methylprednisolone</i> TBPK 4mg	1	
<i>methylprednisolone acetate</i> SUSP 40mg/ml, 80mg/ml	1	B/D
<i>methylprednisolone sod succ</i> SOLR 40mg, 125mg, 1000mg	1	B/D
<i>prednisolone</i> SOLN 15mg/5ml	1	B/D
<i>prednisolone sodium phosphate</i> SOLN 5mg/5ml, 15mg/5ml, 25mg/5ml	1	B/D
<i>prednisone</i> SOLN 5mg/5ml; TABS 1mg, 2.5mg, 5mg, 10mg, 20mg, 50mg	1	B/D
<i>prednisone</i> TBPK 5mg, 10mg	1	
PREDNISONE INTENSOL CONC 5mg/ml	2	B/D
SOLU-CORTEF SOLR 100mg, 250mg, 500mg, 1000mg	2	
<b>GLUCOSE ELEVATING AGENTS</b>		
BD GLUCOSE CHEW 5gm	3	
BL GLUCOSE CHEW 4gm	3	
<i>cvs glucose</i> GEL 40%	3	
CVS GLUCOSE CHW FRUIT	3	
DEX4 CHEW 1gm	3	

This document includes a list of drugs covered on our formulary as of July 1, 2024. You can find information on what the symbols and abbreviations on this table mean by going to page 7.

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
DEX4 FAST ACTING GLUCOSE GEL 15gm/33gm; LIQD 15gm/59ml	3	
<i>dextrose (diabetic use)</i> CHEW 4gm, 5gm; LIQD 15gm/59ml	3	
<i>diazoxide</i> SUSP 50mg/ml	2	
GLUCOSE LIQD 15gm/60ml	3	
GVOKE HYPOPEN 2-PACK SOAJ .5mg/0.1ml, 1mg/0.2ml	2	
GVOKE KIT SOLN 1mg/0.2ml	2	
GVOKE PFS SOSY 1mg/0.2ml	2	
INSTA-GLUCOSE GEL 77.4%	3	
RA TRUEPLUS GLUCOSE GEL 15gm/32ml	3	
WALGREENS GLUCOSE CHEW 4gm	3	
<b>MISCELLANEOUS</b>		
A1C NOW KIT	3	
ACCU-CHECK TES COMFORT	3	
ACCU-CHEK KIT FASTCLIX	3	
<i>actidose/sorbitol</i>	3	
ADJ LANCING MIS DEVICE	3	
ALDURAZYME SOLN 2.9mg/5ml	2	NM, LA, PA
ASCENSIA MIS AUTODISC	3	
ASSURE ID MIS 30GX3/16	3	
ASSURE ID MIS 30GX5/16	3	
AUTOLET PLAT MIS 1.8MM	3	
BD PEN NEEDL MIS 29GX12.7	3	

This document includes a list of drugs covered on our formulary as of July 1, 2024. You can find information on what the symbols and abbreviations on this table mean by going to page 7.

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
BD PEN NEEDL MIS 32GX6MM	3	
<i>betaine powder for oral solution</i>	2	NM, LA
BILI-LABSTIX TES STRIPS	3	
<i>cabergoline</i> TABS .5mg	1	
CAREFINE MIS 32GX5MM	3	
<i>carglumic acid</i> TBSO 200mg	2	NM, LA, PA
CERDELGA CAPS 84mg	2	NM, LA, PA
CEREZYME SOLR 400unit	2	NM, LA, PA
<i>charcoal activated powder</i>	3	
CHARCOAL POW	3	
CHEMSTRIP TES UGK	3	
CHEMSTRIP-UG TES	3	
1ST CHOICE MIS LANCETS	3	
<i>cinacalcet hcl</i> TABS 30mg, 60mg	1	B/D, QL (60 tabs / 30 days), NM
<i>cinacalcet hcl</i> TABS 90mg	2	B/D, QL (120 tabs / 30 days), NM
CLINI-TEK MIS	3	
COMFORT EZ MIS 33GX4MM	3	
CYSTAGON CAPS 50mg, 150mg	2	NM, LA, PA
<i>desmopressin acetate</i> SOLN 4mcg/ml	2	
<i>desmopressin acetate</i> TABS .1mg, .2mg	1	
<i>desmopressin acetate spray</i> SOLN .01%	1	
<i>desmopressin acetate spray refrigerated</i> SOLN .01%	1	

This document includes a list of drugs covered on our formulary as of July 1, 2024. You can find information on what the symbols and abbreviations on this table mean by going to page 7.

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
FABRAZYME SOLR 5mg, 35mg	2	NM, LA, PA
GENOTROPIN CART 5mg, 12mg	2	NM, PA
GENOTROPIN MINIQUICK PRSY .2mg, .4mg, .6mg, .8mg, 1mg, 1.2mg, 1.4mg, 1.6mg, 1.8mg, 2mg	2	NM, PA
INCRELEX SOLN 40mg/4ml	2	NM, LA, PA
IOSAT TABS 130mg	3	
<i>javygtor</i> PACK 100mg, 500mg; TABS 100mg	2	NM, LA, PA
KORLYM TABS 300mg	2	NM, LA, PA
<i>*lancets misc.***</i>	3	
<i>*lancets***</i>	3	
<i>levocarnitine (metabolic modifiers)</i> SOLN 1gm/10ml; TABS 330mg	1	B/D
LUMIZYME SOLR 50mg	2	NM, LA, PA
LUPRON DEPOT-PED (1-MONTH KIT 7.5mg, 11.25mg, 15mg	2	NM, PA
LUPRON DEPOT-PED (3-MONTH KIT 11.25mg, 30mg	2	NM, PA
LUPRON DEPOT-PED (6-MONTH KIT 45mg	2	NM, PA
<i>mifepristone (hyperglycemia)</i> TABS 300mg	2	NM, PA
<i>miglustat</i> CAPS 100mg	2	QL (90 caps / 30 days), NM, PA
<i>*multiple urine test strips***</i>	3	
NAGLAZYME SOLN 1mg/ml	2	NM, LA, PA
<i>nitisinone</i> CAPS 2mg, 5mg, 10mg, 20mg	2	NM, PA

This document includes a list of drugs covered on our formulary as of July 1, 2024. You can find information on what the symbols and abbreviations on this table mean by going to page 7.



<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
<i>octreotide acetate</i> SOLN 50mcg/ml, 100mcg/ml, 200mcg/ml; SOSY 50mcg/ml, 100mcg/ml	1	NM, PA
<i>octreotide acetate</i> SOLN 500mcg/ml, 1000mcg/ml; SOSY 500mcg/ml	2	NM, PA
POTASSIUM IODIDE SOLN 65mg/ml	3	
<i>raloxifene hcl</i> TABS 60mg	1	
RELION ALL- MIS IN-ONE	3	
<i>sapropterin dihydrochloride</i> PACK 100mg, 500mg; TABS 100mg	2	NM, PA
SIGNIFOR SOLN .3mg/ml, .6mg/ml, .9mg/ml	2	NM, LA, PA
<i>sodium phenylbutyrate</i> POWD 3gm/tsp; TABS 500mg	2	NM, PA
SOMATULINE DEPOT SOLN 60mg/0.2ml, 90mg/0.3ml, 120mg/0.5ml	2	NM, LA, PA
SOMAVERT SOLR 10mg, 15mg, 20mg, 25mg, 30mg	2	NM, LA, PA
THYROSAFE TABS 65mg	3	
1ST TIER UNI MIS 31GX5MM	3	
1ST TIER UNI MIS 31GX6MM	3	
1ST TIER UNI MIS 31GX8MM	3	
1ST TIER UNI MIS 32GX4MM	3	
<i>yargesa</i> CAPS 100mg	2	QL (90 caps / 30 days), NM, PA
<b>PHOSPHATE BINDER AGENTS</b>		
<i>calcium acetate (phosphate binder)</i> CAPS 667mg	1	QL (360 caps / 30 days)

This document includes a list of drugs covered on our formulary as of July 1, 2024. You can find information on what the symbols and abbreviations on this table mean by going to page 7.

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
<i>calcium acetate (phosphate binder)</i> TABS 667mg	1	QL (360 tabs / 30 days)
<i>lanthanum carbonate</i> CHEW 500mg, 1000mg	1	QL (90 tabs / 30 days)
<i>lanthanum carbonate</i> CHEW 750mg	1	QL (180 tabs / 30 days)
<i>sevelamer carbonate</i> PACK 2.4gm	1	QL (180 packets / 30 days)
<i>sevelamer carbonate</i> PACK .8gm	1	QL (540 packets / 30 days)
<i>sevelamer carbonate</i> TABS 800mg	1	QL (540 tabs / 30 days)
VELPHORO CHEW 500mg	2	QL (180 tabs / 30 days)
<b>PROGESTINS</b>		
<i>medroxyprogesterone acetate</i> TABS 2.5mg, 5mg, 10mg	1	
<i>megestrol acetate</i> SUSP 40mg/ml	2	
<i>megestrol acetate (appetite)</i> SUSP 625mg/5ml	2	PA
<i>norethindrone acetate</i> TABS 5mg	1	
<i>progesterone</i> CAPS 100mg, 200mg	1	
<b>THYROID AGENTS</b>		
<i>euthyrox</i> TABS 25mcg, 50mcg, 75mcg, 88mcg, 100mcg, 112mcg, 125mcg, 137mcg, 150mcg, 175mcg, 200mcg	1	
<i>levo-t</i> TABS 25mcg, 50mcg, 75mcg, 88mcg, 100mcg, 112mcg, 125mcg, 137mcg, 150mcg, 175mcg, 200mcg, 300mcg	1	
<i>levothyroxine sodium</i> TABS 25mcg, 50mcg, 75mcg, 88mcg, 100mcg, 112mcg, 125mcg, 137mcg, 150mcg, 175mcg, 200mcg, 300mcg	1	

This document includes a list of drugs covered on our formulary as of July 1, 2024. You can find information on what the symbols and abbreviations on this table mean by going to page 7.

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
<i>levoxyl</i> TABS 25mcg, 50mcg, 75mcg, 88mcg, 100mcg, 112mcg, 125mcg, 137mcg, 150mcg, 175mcg, 200mcg	1	
<i>liothyronine sodium</i> TABS 5mcg, 25mcg, 50mcg	1	
<i>methimazole</i> TABS 5mg, 10mg	1	
<i>propylthiouracil</i> TABS 50mg	1	
SYNTHROID TABS 25mcg, 50mcg, 75mcg, 88mcg, 100mcg, 112mcg, 125mcg, 137mcg, 150mcg, 175mcg, 200mcg, 300mcg	2	
<i>unithroid</i> TABS 25mcg, 50mcg, 75mcg, 88mcg, 100mcg, 112mcg, 125mcg, 137mcg, 150mcg, 175mcg, 200mcg, 300mcg	1	
<b><u>VITAMIN D ANALOGS</u></b>		
<i>calcitriol</i> CAPS .25mcg, .5mcg	1	B/D
<i>calcitriol (oral)</i> SOLN 1mcg/ml	1	B/D
<i>paricalcitol</i> CAPS 1mcg, 2mcg, 4mcg	1	B/D
RAYALDEE CPCR 30mcg	2	
<b><u>GASTROINTESTINAL</u></b>		
<b><u>ANTACIDS</u></b>		
<i>acid gone</i>	3	
<i>acid relief</i>	3	
<i>alamag-plus</i>	3	
<i>aldroxicon i</i>	3	
ALKA SELTZER TAB HEARTBRN	3	
ALKA-SELTZER CHW 750-80MG	3	
ALKA-SELTZER TAB GOLD	3	

This document includes a list of drugs covered on our formulary as of July 1, 2024. You can find information on what the symbols and abbreviations on this table mean by going to page 7.

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
<i>alkets</i> CHEW 500mg	3	
ALUMINUM HYDROXIDE SUSP 320mg/5ml, 600mg/5ml	3	
<i>aluminum hydroxide gel</i> SUSP 320mg/5ml	3	
<i>aluminum hydroxide gel su</i> SUSP 600mg/5ml	3	
<i>antacid</i>	3	
ANTACID CHEW 1177mg	3	
<i>antacid double strength</i>	3	
<i>antacid extra strength</i>	3	
<i>antacid ultra strength</i> CHEW 1000mg	3	
BELL-ANS TAB 650MG TABS 650mg	3	
CALCIUM CARBONATE TABS 648mg, 650mg	3	
<i>calcium carbonate (antacid)</i> TABS 648mg, 650mg	3	
<i>cvs antacid multi-symptom</i>	3	
DEWEES CARMINATIVE SUSP 250mg/5ml	3	
<i>eq antacid &amp; anti-gas max</i>	3	
FP FOMICON SUS	3	
GAVISCON CHW	3	
GAVISCON CHW EX-STR	3	
GAVISCON SUS	3	
GELUSIL CHW	3	
<i>gnp calcium antacid child</i> CHEW 400mg	3	

This document includes a list of drugs covered on our formulary as of July 1, 2024. You can find information on what the symbols and abbreviations on this table mean by going to page 7.

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
<i>hm advanced antacid maxim</i>	3	
<i>hm magnesium</i> TABS 250mg	3	
HYVEE ADVCD SUS ANTACID	3	
<i>longs acid relief extra s</i> CHEW 750mg	3	
MAALOX MAX CHW 1000-60	3	
MAALOX QUICK DISSOLVE MAX CHEW 1000mg	3	
MAG-AL LIQ	3	
<i>mag-caps</i> CAPS 140mg	3	
MAG-OX 400 TAB 400MG TABS 400mg	3	
<i>magaldrate</i> SUSP 540mg/5ml	3	
<i>magaldrate w/ simethicone susp 1080-30 mg/5ml</i>	3	
MAGNESIUM CAPS 500mg	3	
MAGNESIUM OXIDE CAPS 400mg	3	
<i>magnesium oxide</i> TABS 400mg, 420mg	3	
<i>maox</i> TABS 420mg	3	
MI-ACID CHW	3	
MYLANTA CHW 400MG CHEW 400mg	3	
MYLANTA SUS	3	
MYLANTA SUS SUPREME	3	
RI-MAG SUSP 540mg/5ml	3	
RI-MAG PLUS SUS	3	
ROLAIDS CHW	3	

This document includes a list of drugs covered on our formulary as of July 1, 2024. You can find information on what the symbols and abbreviations on this table mean by going to page 7.

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
ROLAIDS CHW EX ST	3	
ROLAIDS MULT CHW SYMPTOM	3	
<i>sodium bicarbonate (antacid)</i> TABS 325mg, 650mg	3	
<i>*sodium bicarbonate powder**</i>	3	
SODIUM POW BICARBON	3	
<i>tgt antacid extra strengt</i>	3	
TUMS CHEW 500mg	3	
TUMS CALCIUM FOR LIFE BON CHEW 750mg	3	
<i>tums gas relief chewy bit</i>	3	
URO MAG CAPS 140mg	3	
<b>ANTI-DIARRHEAL</b>		
<i>abatinex</i> CAPS 680mg	3	
ACIDOPHILUS WAFR 1mg	3	
ACIDOPHILUS CAP	3	
ACIDOPHILUS/ TAB CIT PECT	3	
<i>anti-diarrheal</i> CAPS 2mg; LIQD 1mg/5ml; SOLN 1mg/7.5ml; TABS 2mg	3	
<i>bismuth subsalicylate</i> CHEW 262mg; SUSP 525mg/15ml	3	
CULTURELLE CAPS 10bcell	3	
CULTURELLE CAP	3	
CULTURELLE CHW DIGESTIV	3	
CULTURELLE CHW KIDS	3	
CULTURELLE KIDS PACK 5bcell	3	

This document includes a list of drugs covered on our formulary as of July 1, 2024. You can find information on what the symbols and abbreviations on this table mean by going to page 7.

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
<i>cvs acidophilus probiotic</i>	3	
<i>cvs anti-diarrheal</i> SUSP 262mg/15ml	3	
<i>cvs bismuth</i> TABS 262mg	3	
<i>cvs digestive probiotic</i> CAPS 250mg	3	
<i>flora assist</i>	3	
FLORAJEN CAP ACIDOPHI	3	
FLORASTOR CAPS 250mg; PACK 250mg	3	
<i>hm probiotic digestive he</i> CAPS 20bcell	3	
IMODIUM A-D SOLN 1mg/7.5ml; TABS 2mg	3	
IMODIUM A-D LIQ 1MG/5ML LIQD 1mg/5ml	3	
IMODIUM ADV TAB	3	
KAOLIN POW	3	
<i>kaolin powder</i>	3	
KAOPECTATE SUS 262/15ML	3	
KAOPECTATE SUS EX ST	3	
KAOPECTATE TAB	3	
LACTINEX CHW	3	
LACTINEX GRA	3	
LACTINEX TAB	3	
<i>*lactobacillus acidophilus-pectin cap**</i>	3	
<i>*lactobacillus chew tab**</i>	3	
MORE-DOPHILUS ACIDOPHILUS POWD 1550mg/1.55gm	3	

This document includes a list of drugs covered on our formulary as of July 1, 2024. You can find information on what the symbols and abbreviations on this table mean by going to page 7.

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
PEPTO-BISMOL TO-GO CHEW 262mg	3	
<i>qc anti-diarrheal advance</i>	3	
RESTORE PAK	3	
4X PROBIOTIC TAB	3	
<b>ANTIEMETICS</b>		
<i>ambizine</i> TABS 25mg	3	
<i>aprepitant</i> CAPS 40mg, 80mg, 125mg	1	B/D
<i>aprepitant capsule therapy pack 80 &amp; 125 mg</i>	1	B/D
BL MOTION SI TAB 25MG	3	
<i>bonine</i> CHEW 25mg	3	
<i>compro</i> SUPP 25mg	1	
<i>dimenhydrinate</i> TABS 50mg	3	
<i>dronabinol</i> CAPS 2.5mg, 5mg, 10mg	1	B/D, QL (60 caps / 30 days)
<i>granisetron hcl</i> SOLN 1mg/ml, 4mg/4ml	1	
<i>granisetron hcl</i> TABS 1mg	1	B/D
HCA MOT SICK TAB 50MG	3	
<i>meclizine hcl</i> TABS 12.5mg	3	
<i>meclizine hcl</i> TABS 12.5mg, 25mg	2	
<i>metoclopramide hcl</i> SOLN 5mg/5ml, 5mg/ml; TABS 5mg, 10mg	1	
<i>ondansetron</i> TBDP 4mg, 8mg	1	B/D
<i>ondansetron hcl</i> SOLN 4mg/2ml, 40mg/20ml; SOSY 4mg/2ml	1	

This document includes a list of drugs covered on our formulary as of July 1, 2024. You can find information on what the symbols and abbreviations on this table mean by going to page 7.



<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
<i>ondansetron hcl</i> SOLN 4mg/5ml; TABS 4mg, 8mg	1	B/D
<i>prochlorperazine</i> SUPP 25mg	1	
<i>prochlorperazine edisylate</i> SOLN 10mg/2ml	1	
<i>prochlorperazine maleate</i> TABS 5mg, 10mg	1	
<i>promethazine hcl</i> SOLN 6.25mg/5ml, 25mg/ml, 50mg/ml; TABS 12.5mg, 25mg, 50mg	2	PA; PA if 70 years and older
<i>scopolamine</i> PT72 1mg/3days	2	QL (10 patches / 30 days), PA; PA if 70 years and older
<b>ANTISPASMODICS</b>		
<i>dicyclomine hcl</i> CAPS 10mg; SOLN 10mg/5ml; TABS 20mg	2	
<i>glycopyrrolate</i> TABS 1mg	1	QL (90 tabs / 30 days)
<i>glycopyrrolate</i> TABS 2mg	1	QL (120 tabs / 30 days)
<b>DIGESTIVE AGENTS</b>		
CVS DAIRY RELIEF EXTRA ST TABS 4500unit	3	
<i>cvs lactase</i> TABS 3000unit	3	
<i>dairy digestive ultra</i> TABS 9000unit	3	
<i>fast acting dairy aid</i> TABS 9000unit	3	
FP DAIRY-REL TAB 3000UNIT	3	
GAS-X CAP PREVENT	3	
LACTAID FAST ACT CHEW 9000unit; TABS 9000unit	3	
<i>sb lactase</i> TABS 3000unit	3	

This document includes a list of drugs covered on our formulary as of July 1, 2024. You can find information on what the symbols and abbreviations on this table mean by going to page 7.

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
<b>H2-RECEPTOR ANTAGONISTS</b>		
<i>acid controller</i> TABS 10mg	3	
<i>cimetidine tab 200 mg</i> TABS 200mg	3	
<i>famotidine</i> SOLN 20mg/2ml, 40mg/4ml, 200mg/20ml	1	
<i>famotidine</i> SUSR 40mg/5ml	1	QL (300 mL / 30 days)
<i>famotidine</i> TABS 20mg	1	QL (120 tabs / 30 days)
<i>famotidine</i> TABS 40mg	1	QL (60 tabs / 30 days)
<i>famotidine in nacl 0.9% iv soln 20 mg/50ml</i>	1	
<i>gnp acid control 75</i> TABS 75mg	3	
<i>gnp acid control 150 maxi</i> TABS 150mg	3	
<i>kls acid controller maxim</i> TABS 20mg	3	
<i>nizatidine</i> CAPS 150mg, 300mg	1	
PEPCID AC TABS 10mg	3	
ZANTAC TAB 75MG	3	
<b>INFLAMMATORY BOWEL DISEASE</b>		
<i>balsalazide disodium</i> CAPS 750mg	1	
<i>budesonide</i> CPEP 3mg	1	QL (90 caps / 30 days), PA
<i>budesonide</i> TB24 9mg	2	QL (30 tabs / 30 days), PA
<i>hydrocortisone (intrarectal)</i> ENEM 100mg/60ml	1	
<i>mesalamine</i> CP24 .375gm	1	QL (120 caps / 30 days)
<i>mesalamine</i> CPDR 400mg	1	QL (180 caps / 30 days)
<i>mesalamine</i> ENEM 4gm; SUPP 1000mg	1	

This document includes a list of drugs covered on our formulary as of July 1, 2024. You can find information on what the symbols and abbreviations on this table mean by going to page 7.

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
<i>mesalamine</i> TBEC 1.2gm	1	QL (120 tabs / 30 days)
<i>mesalamine w/ cleanser</i> KIT 4gm	1	
<i>sulfasalazine</i> TABS 500mg; TBEC 500mg	1	

### **LAXATIVES**

<i>alophen</i> TBEC 5mg	3	
<i>benefiber on the go</i>	3	
BENEFIBER POW	3	
<i>bisac-evac</i> SUPP 10mg	3	
<i>bl epsom salt</i>	3	
<i>bl laxative pills</i> TABS 15mg, 25mg	3	
<i>bl magnesium citrate</i>	3	
<i>bl mineral oil</i>	3	
<i>bl natural fiber</i> POWD 48.57%	3	
<i>calcium polycarbophil</i> TABS 625mg	3	
CASTOR OIL OIL 100%	3	
<i>castor oil stimulant laxa</i> OIL 100%	3	
CELLOTHYL TAB 500MG TABS 500mg	3	
CEO-TWO SUP	3	
<i>chocolated laxative</i> CHEW 15mg	3	
CITRUCEL POW ORANGE	3	
<i>clearlax</i>	3	
COLACE CAPS 50mg	3	
<i>colace 2-in-1</i>	3	
<i>colace adult</i> SUPP 2.1gm	3	

This document includes a list of drugs covered on our formulary as of July 1, 2024. You can find information on what the symbols and abbreviations on this table mean by going to page 7.

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
COLACE CAP 100MG CAPS 100mg	3	
COLACE LIQ 150/15ML LIQD 150mg/15ml	3	
<i>colace pediatric</i> SUPP 1.2gm	3	
COLACE SYP 60/15ML SYRP 60mg/15ml	3	
<i>constulose</i> SOLN 10gm/15ml	1	
<i>cvs daily fiber</i> POWD 51.7%	3	
<i>cvs enema disposable</i>	3	
CVS EPSOM GRA SALT	3	
<i>cvs fiber</i> CAPS .52gm	3	
<i>cvs fiber laxative</i> POWD 30.9%	3	
<i>cvs laxative dietary supp</i> TABS 500mg	3	
<i>cvs mineral oil</i>	3	
<i>cvs mini enema kids</i> ENEM 100mg/5ml	3	
<i>cvs nat fiber laxative</i> POWD 100%	3	
<i>cvs natural fiber supplem</i> PACK 58.6%	3	
<i>cvs senna</i> TABS 8.6mg	3	
<i>dietary fiber laxative</i> POWD 28.3%	3	
<i>diocto</i> LIQD 150mg/15ml	3	
<i>doculase</i>	3	
<i>docusate calcium</i> CAPS 240mg	3	
<i>docusate sodium</i> CAPS 100mg, 250mg; SYRP 60mg/15ml; TABS 100mg	3	
DOCUSOL KIDS ENE 100MG/5M	3	
<i>docusol mini</i> ENEM 283mg/5ml	3	

This document includes a list of drugs covered on our formulary as of July 1, 2024. You can find information on what the symbols and abbreviations on this table mean by going to page 7.

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
<i>docusol plus mini-enema</i>	3	
DULCOLAX TBEC 5mg	3	
<i>dulcolax milk of magnesia</i> SUSP 400mg/5ml	3	
<i>eck soluble fiber</i> POWD 2gm/19gm	3	
<i>enulose</i> SOLN 10gm/15ml	1	
EPSOM SALT GRA	3	
EPSOM SALT POW	3	
EQUALACTIN CHEW 625mg	3	
EVAC POW	3	
EX-LAX CHEW 15mg	3	
EX-LAX MILK SUS OF MAGNE	3	
FIBER LAX POW 95%	3	
<i>fiber therapy</i> POWD 25%	3	
FIBERCON TAB 625MG TABS 625mg	3	
FLEET BISACODYL ENEM 10mg/30ml	3	
FLEET ENE	3	
FLEET ENE PED	3	
FLEET LIQUID GLYCERIN SUP ENEM 5.4gm/dose	3	
<i>fp fiber laxative</i> POWD 95%	3	
FV MINERAL OIL HEAVY	3	
<i>gavilyte-c</i>	1	
<i>gavilyte-g</i>	1	

This document includes a list of drugs covered on our formulary as of July 1, 2024. You can find information on what the symbols and abbreviations on this table mean by going to page 7.

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
<i>generlac</i> SOLN 10gm/15ml	1	
<i>glycerin (laxative)</i> SUPP 1gm, 2gm	3	
GLYCERIN ADULT SUPP 2gm	3	
<i>glycerin adult</i> SUPP 80.7%	3	
<i>goodsense clearlax</i> POWD 17gm/scoop	3	
<i>goodsense fiber</i> TABS 500mg	3	
HCA BISACODY SUP 10MG	3	
HCA LAX-X TAB 25MG	3	
<i>hm fiber</i> POWD 51.7%	3	
HYDROCIL INS POW 95% PACK 95%	3	
KAOPECTATE STOOL SOFTENER CAPS 240mg	3	
KONSYL PACK 60.3%; POWD 60.3%, 71.67%	3	
KONSYL DAILY FIBER PACK 28.3%	3	
KONSYL POW 100%	3	
KONSYL-D POWD 52.3%	3	
<i>lactulose</i> SOLN 10gm/15ml	1	
<i>lactulose (encephalopathy)</i> SOLN 10gm/15ml	1	
<i>laxmar</i> POWD 33%	3	
<i>magnesium sulfat granules</i>	3	
METAMUCIL CAPS .36gm	3	
<i>metamucil 3-in-1 daily fi</i>	3	
METAMUCIL 4-IN-1 FIBER PACK 51.7%	3	

This document includes a list of drugs covered on our formulary as of July 1, 2024. You can find information on what the symbols and abbreviations on this table mean by going to page 7.

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
METAMUCIL POW 28% CIT PACK 28%	3	
METAMUCIL POW 48.57%	3	
METAMUCIL POW 58.6 CIT PACK 58.6%	3	
METAMUCIL POW 58.6%	3	
METAMUCIL POW 63%	3	
METAMUCIL POW ORANGE POWD 33%	3	
METAMUCIL WAF	3	
<i>milk of magnesia concentr</i> SUSP 2400mg/10ml	3	
MINERAL OIL	3	
<i>mineral oil (bulk)</i>	3	
MINERAL OIL ENE	3	
MINERAL OIL LIGHT	3	
<i>mineral oil light (bulk)</i>	3	
MIRALAX PACK 17gm; POWD 17gm/scoop	3	
<i>natural vegetable fiber</i> POWD 63%	3	
<i>osco natural fiber laxati</i> PACK 28%	3	
PEDIA-LAX CHEW 400mg; LIQD 50mg/15ml; SUPP 1gm, 2.8gm	3	
<i>pediatric enema</i>	3	
<i>peg 3350-kcl-na bicarb-nacl-na sulfate for soln 236 gm</i>	1	
<i>peg 3350-kcl-sod bicarb-nacl for soln 420 gm</i>	1	
PHILLIPS TABS 500mg	3	

This document includes a list of drugs covered on our formulary as of July 1, 2024. You can find information on what the symbols and abbreviations on this table mean by going to page 7.

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
PLENVU SOL	2	
<i>psyllium</i> POWD 68%	3	
<i>ra laxative extra strengt</i> TABS 17.2mg	3	
<i>senexon</i> LIQD 8.8mg/5ml	3	
SENNA SYRP 176mg/5ml	3	
SENNA LEAVES MIS	3	
SENOKOT SYRP 8.8mg/5ml; TABS 8.6mg	3	
SENOKOT S TAB 8.6-50MG	3	
SENOKOT XTRA TABS 17.2mg	3	
<i>sm fiber</i> POWD 51.7%	3	
SM LAXATIVE TAB REGULAR	3	
<i>sod sulfate-pot sulf-mg sulf oral sol 17.5-3.13-1.6 gm/177ml</i>	1	
SORBITOL SOLN 70%	3	
<i>vacuant mini-enema</i> ENEM 283mg	3	
<i>vacuant plus mini-enema</i>	3	
<b>MISCELLANEOUS</b>		
<i>alka-seltzer anti-gas</i> CAPS 125mg	3	
<i>alose tron hcl</i> TABS .5mg, 1mg	2	QL (60 tabs / 30 days), PA
<i>anti gas</i> CAPS 166mg	3	
BICARSIM TABS 80mg	3	
BICARSIM FORTE TABS 125mg	3	
<i>cromolyn sodium (mastocytosis)</i> CONC 100mg/5ml	1	

This document includes a list of drugs covered on our formulary as of July 1, 2024. You can find information on what the symbols and abbreviations on this table mean by going to page 7.



<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
<i>cvs gas relief drops extr</i> LIQD 40mg/0.6ml	3	
<i>cvs gas relief extra stre</i> CHEW 125mg	3	
<i>diphenoxylate w/ atropine liq 2.5-0.025 mg/5ml</i>	2	
<i>diphenoxylate w/ atropine tab 2.5-0.025 mg</i>	2	
EMETROL SOL	3	
GAS RELIEF CAP 125MG	3	
GAS-X CHEW 80mg	3	
GAS-X EXTRA STRENGTH CHEW 125mg; STRP 62.5mg	3	
GATTEX KIT 5mg	2	NM, LA, PA
<i>hm anti-nausea</i>	3	
<i>kls acid controller compl</i>	3	
LINZESS CAPS 72mcg, 145mcg, 290mcg	2	QL (30 caps / 30 days)
LITTLE TUMMY DRO 20/0.3ML	3	
<i>loperamide hcl</i> CAPS 2mg	1	
<i>misoprostol</i> TABS 100mcg, 200mcg	1	
MOVANTIK TABS 12.5mg, 25mg	2	QL (30 tabs / 30 days)
PEPCID CHW COMPLETE	3	
PHAZYME CAPS 180mg	3	
PHAZYME MAXIMUM STRENGTH CAPS 250mg	3	
PHAZYME MS CAP 166MG CAPS 166mg	3	
RELISTOR SOLN 8mg/0.4ml, 12mg/0.6ml	2	QL (28 syringes / 28 days), PA

This document includes a list of drugs covered on our formulary as of July 1, 2024. You can find information on what the symbols and abbreviations on this table mean by going to page 7.

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
<i>sb anti-gas</i> CAPS 180mg	3	
<i>simethicone</i> CHEW 80mg; TABS 80mg	3	
<i>simethicone susp 40 mg/0.6ml</i> SUSP	3	
<i>sucralfate</i> TABS 1gm	1	
<i>ursodiol</i> CAPS 300mg; TABS 250mg, 500mg	1	
XERMELO TABS 250mg	2	QL (84 tabs / 28 days), NM, LA, PA
XIFAXAN TABS 550mg	2	PA
<b>PANCREATIC ENZYMES</b>		
CREON CAP 3000UNIT	2	
CREON CAP 6000UNIT	2	
CREON CAP 12000UNT	2	
CREON CAP 24000UNT	2	
CREON CAP 36000UNT	2	
ZENPEP CAP 3000UNIT	2	
ZENPEP CAP 5000UNIT	2	
ZENPEP CAP 10000UNT	2	
ZENPEP CAP 15000UNT	2	
ZENPEP CAP 20000UNT	2	
ZENPEP CAP 25000UNT	2	
ZENPEP CAP 40000UNT	2	
ZENPEP CAP 60000UNT	2	
<b>PROTON PUMP INHIBITORS</b>		
<i>acid reducer</i> CPDR 20.6mg	3	

This document includes a list of drugs covered on our formulary as of July 1, 2024. You can find information on what the symbols and abbreviations on this table mean by going to page 7.

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
<i>esomeprazole magnesium</i> CPDR 20mg, 40mg	1	QL (30 caps / 30 days), ST
<i>heartburn treatment 24 ho</i> CPDR 15mg	3	
<i>lansoprazole</i> CPDR 15mg, 30mg	1	QL (60 caps / 30 days)
<i>omeprazole</i> CPDR 10mg, 20mg, 40mg	1	
<i>omeprazole</i> TBEC 20mg	3	
<i>pantoprazole sodium</i> SOLR 40mg; TBEC 20mg, 40mg	1	
PRILOSEC OTC TBEC 20mg	3	
<i>rabeprazole sodium</i> TBEC 20mg	1	QL (30 tabs / 30 days)

## **GENITOURINARY**

### **BENIGN PROSTATIC HYPERPLASIA**

<i>alfuzosin hcl</i> TB24 10mg	1	QL (30 tabs / 30 days)
<i>dutasteride</i> CAPS .5mg	1	QL (30 caps / 30 days)
<i>dutasteride-tamsulosin hcl cap 0.5-0.4 mg</i>	1	QL (30 caps / 30 days)
<i>finasteride</i> TABS 5mg	1	QL (30 tabs / 30 days)
<i>tamsulosin hcl</i> CAPS .4mg	1	QL (60 caps / 30 days)

### **MISCELLANEOUS**

A + D PERSON MIS CARE WIP	3	
<i>acetic acid</i> SOLN .25%	1	
<i>azo dine</i> TABS 95mg	3	
<i>azo dine maximum strength</i> TABS 97.5mg	3	
<i>bethanechol chloride</i> TABS 5mg, 10mg, 25mg, 50mg	1	
<i>cvs disposable douche med</i> SOLN .3%	3	
<i>fq breathable adult brief</i>	3	

This document includes a list of drugs covered on our formulary as of July 1, 2024. You can find information on what the symbols and abbreviations on this table mean by going to page 7.

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
GLYCINE POW	3	
<i>potassium citrate (alkalinizer)</i> TBCR 15meq, 540mg, 1080mg	1	
SUMMERS EVE SOL 0.3%	3	
URO-TRIN TAB 95MG TABS 95mg	3	
<b>URINARY ANTISPASMODICS</b>		
GEMTESA TABS 75mg	2	QL (30 tabs / 30 days)
MYRBETRIQ SRER 8mg/ml	2	QL (300 mL / 28 days)
MYRBETRIQ TB24 25mg, 50mg	2	QL (30 tabs / 30 days)
<i>oxybutynin chloride</i> SOLN 5mg/5ml	1	QL (600 mL / 30 days)
<i>oxybutynin chloride</i> TABS 5mg	1	QL (120 tabs / 30 days)
<i>oxybutynin chloride</i> TB24 5mg	1	QL (30 tabs / 30 days)
<i>oxybutynin chloride</i> TB24 10mg, 15mg	1	QL (60 tabs / 30 days)
<i>solifenacin succinate</i> TABS 5mg, 10mg	1	QL (30 tabs / 30 days)
<i>tolterodine tartrate</i> CP24 2mg, 4mg	1	QL (30 caps / 30 days), ST
<i>tolterodine tartrate</i> TABS 1mg, 2mg	1	QL (60 tabs / 30 days)
<i>trospium chloride</i> TABS 20mg	1	QL (60 tabs / 30 days)
<b>VAGINAL ANTI-INFECTIVES</b>		
<i>af-miconazole 7</i> CREA 2%	3	
<i>bl miconazole 3</i>	3	
<i>clindamycin phosphate vaginal</i> CREA 2%	1	
CLOTRIMAZOLE CRE 2%	3	
<i>clotrimazole vaginal</i> CREA 1%	3	
<i>cvs miconazole 3</i>	3	

This document includes a list of drugs covered on our formulary as of July 1, 2024. You can find information on what the symbols and abbreviations on this table mean by going to page 7.

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
GYNE-LOTRIMIN CREA 1%	3	
<i>metronidazole vaginal GEL .75%</i>	1	
<i>miconazole 3 combination</i>	3	
MICONAZOLE KIT 200MG/2%	3	
<i>miconazole nitrate vaginal SUPP 100mg</i>	3	
<i>miconazole nitrate vaginal supp 1200 mg &amp; 2% cream kit</i>	3	
<i>monistat 1-day OINT 6.5%</i>	3	
MONISTAT 3 CREA 4%	3	
MONISTAT 3 KIT COMBINAT	3	
MONISTAT 7 CREA 2%; SUPP 100mg	3	
<i>qc 3 day vaginal cream CREA 4%</i>	3	
<i>sm 3-day vaginal CREA 2%</i>	3	
<i>terconazole vaginal CREA .4%, .8%; SUPP 80mg</i>	1	
TIOCONAZOLE OIN -1	3	

## **HEMATOLOGIC**

### **ANTICOAGULANTS**

ELIQUIS TABS 2.5mg	2	QL (60 tabs / 30 days)
ELIQUIS TABS 5mg	2	QL (74 tabs / 30 days)
ELIQUIS STARTER PACK TBPK 5mg	2	QL (74 tabs / 30 days)
<i>enoxaparin sodium SOLN 300mg/3ml; SOSY 30mg/0.3ml, 40mg/0.4ml, 60mg/0.6ml, 80mg/0.8ml, 100mg/ml, 120mg/0.8ml, 150mg/ml</i>	1	
<i>fondaparinux sodium SOLN 2.5mg/0.5ml</i>	1	

This document includes a list of drugs covered on our formulary as of July 1, 2024. You can find information on what the symbols and abbreviations on this table mean by going to page 7.

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
<i>fondaparinux sodium</i> SOLN 5mg/0.4ml, 7.5mg/0.6ml, 10mg/0.8ml	2	
HEP SOD/D5W INJ 20000UNT	2	
HEP SOD/D5W INJ 25000UNT	2	
HEP SOD/NAACL INJ 12500UNT	2	
HEP SOD/NAACL INJ 25000UNT	2	
<i>heparin sodium (porcine)</i> SOLN 1000unit/ml, 5000unit/ml, 10000unit/ml, 20000unit/ml	1	B/D
HEPARIN/NAACL INJ 25000UNT	2	
<i>jantoven</i> TABS 1mg, 2mg, 2.5mg, 3mg, 4mg, 5mg, 6mg, 7.5mg, 10mg	1	
<i>warfarin sodium</i> TABS 1mg, 2mg, 2.5mg, 3mg, 4mg, 5mg, 6mg, 7.5mg, 10mg	1	
XARELTO SUSR 1mg/ml	2	QL (620 mL / 30 days)
XARELTO TABS 2.5mg	2	QL (60 tabs / 30 days)
XARELTO TABS 10mg, 15mg, 20mg	2	QL (30 tabs / 30 days)
XARELTO STAR TAB 15/20MG	2	QL (51 tabs / 30 days)
<b>HEMATOPOIETIC GROWTH FACTORS</b>		
PROCRIT SOLN 2000unit/ml, 3000unit/ml, 4000unit/ml, 10000unit/ml, 20000unit/ml, 40000unit/ml	2	NM, PA
ZARXIO SOSY 300mcg/0.5ml, 480mcg/0.8ml	2	NM, PA
ZIEXTENZO SOSY 6mg/0.6ml	2	QL (2 syringes / 28 days), NM, PA
<b>IRON</b>		
<i>abatron af</i>	3	
ABATRON LIQ	3	

This document includes a list of drugs covered on our formulary as of July 1, 2024. You can find information on what the symbols and abbreviations on this table mean by going to page 7.

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
<i>altorex</i> CAPS 150mg	3	
BIFERA TAB 28MG	3	
<i>bl iron</i>	3	
<i>cvs iron</i> TABS 27mg	3	
<i>eql carbonyl iron</i> TABS 45mg	3	
EZFE 200 CAPS 200mg	3	
<i>fe c</i>	3	
<i>fe c tab plus</i>	3	
FE SULFATE POW	3	
<i>fe tabs</i> TBEC 325mg	3	
FEOSOL TABS 45mg, 200mg	3	
FER-IN-SOL SOLN 15mg/ml	3	
<i>fer-iron</i> SOLN 15mg/ml	3	
FERGON TABS 240mg	3	
FERGON TAB 320MG TABS 320mg	3	
FERRETTS TABS 325mg	3	
FERRETTS IPS SOLN 40mg/15ml	3	
FERRIMIN 150 TABS 150mg	3	
FERRO-SEQUEL TAB 65-25MG	3	
<i>ferrocite</i> TABS 324mg	3	
FERROUS FUMARATE TABS 29mg	3	
<i>ferrous fumarate</i> TABS 325mg	3	
<i>ferrous gluconate</i> TABS 320mg	3	

This document includes a list of drugs covered on our formulary as of July 1, 2024. You can find information on what the symbols and abbreviations on this table mean by going to page 7.

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
FERROUS GLUCONATE TABS 324mg	3	
FERROUS SULFATE LIQD 220mg/5ml; TBCR 140mg; TBEC 324mg	3	
<i>ferrous sulfate</i> SOLN 300mg/5ml; SYRP 300mg/5ml; TABS 27mg; TBCR 50mg	3	
<i>ferrous sulfate dried</i> TBCR 160mg	3	
<i>ferrous sulfate elixir 22</i> ELIX 220mg/5ml	3	
FERROUS SULFATE ELIXIR 22 ELIX 220mg/5ml	3	
<i>ferrous sulfate iron</i> TABS 200mg	3	
FOLITAB 500 TAB	3	
FUSION CAP	3	
<i>gnp iron</i> TBCR 45mg	3	
<i>hematron</i>	3	
HEMOCYTE TABS 324mg	3	
ICAR PEDIATRIC SUSP 15mg/1.25ml	3	
ICAR-C TAB	3	
INTEGRA CAP	3	
IRO-PLEX LIQ	3	
IRO-PLEX TAB 165-2MG	3	
IRON TABS 28mg, 90mg, 256mg	3	
IRON 21/7 MIS	3	
IRON CHEWS PEDIATRIC CHEW 15mg	3	
<i>*iron combination elixir*</i>	3	
<i>iron slow release</i> TBCR 45mg	3	

This document includes a list of drugs covered on our formulary as of July 1, 2024. You can find information on what the symbols and abbreviations on this table mean by going to page 7.



<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
IRON UP LIQD 15mg/0.5ml	3	
<i>kp ferrous gluconate</i> TABS 324mg	3	
NOVAFERRUM 50 CAPS 50mg	3	
NOVAFERRUM LIQ 125	3	
NOVAFERRUM PEDIATRIC DROP LIQD 15mg/ml	3	
PERFECT IRON TABS 25mg	3	
PROFE CAPS 180mg	3	
PROFERRIN ES TAB 12 MG	3	
RA HIGH POTENCY IRON TABS 27mg	3	
<i>ra slow release iron</i> TBCR 47.5mg	3	
SLOW FE TBCR 45mg, 160mg	3	
SM SLOW RELEASE IRON TBCR 143mg	3	
TANDEM CAP	3	
VITRON-C TAB 65-125MG	3	
<i>wee care</i> SUSP 15mg/1.25ml	3	
<b>MISCELLANEOUS</b>		
ALVAIZ TABS 9mg, 54mg	2	QL (60 tabs / 30 days), NM, LA, PA
ALVAIZ TABS 18mg, 36mg	2	QL (90 tabs / 30 days), NM, LA, PA
<i>anagrelide hcl</i> CAPS .5mg, 1mg	1	
BERINERT KIT 500unit	2	QL (24 boxes / 30 days), NM, LA, PA
<i>cilostazol</i> TABS 50mg, 100mg	1	
DOPTELET TABS 20mg	2	NM, LA, PA

This document includes a list of drugs covered on our formulary as of July 1, 2024. You can find information on what the symbols and abbreviations on this table mean by going to page 7.

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
DROXIA CAPS 200mg, 300mg, 400mg	2	
ENDARI PACK 5gm	2	NM, LA, PA
HAEGARDA SOLR 2000unit	2	QL (30 vials / 30 days), NM, LA, PA
HAEGARDA SOLR 3000unit	2	QL (20 vials / 30 days), NM, LA, PA
<i>icatibant acetate</i> SOSY 30mg/3ml	2	QL (9 syringes / 30 days), NM, PA
<i>pentoxifylline</i> TBCR 400mg	1	
PROMACTA PACK 12.5mg	2	QL (360 packets / 30 days), NM, LA, PA
PROMACTA PACK 25mg	2	QL (180 packets / 30 days), NM, LA, PA
PROMACTA TABS 12.5mg, 25mg	2	QL (30 tabs / 30 days), NM, LA, PA
PROMACTA TABS 50mg, 75mg	2	QL (60 tabs / 30 days), NM, LA, PA
<i>sajazir</i> SOSY 30mg/3ml	2	QL (9 syringes / 30 days), NM, LA, PA
<i>tranexamic acid</i> SOLN 1000mg/10ml; TABS 650mg	1	
<b>PLATELET AGGREGATION INHIBITORS</b>		
<i>aspirin-dipyridamole cap er 12hr 25-200 mg</i>	1	
BRILINTA TABS 60mg, 90mg	2	
<i>clopidogrel bisulfate</i> TABS 75mg	1	
<i>dipyridamole</i> TABS 25mg, 50mg, 75mg	2	PA; PA if 70 years and older
<i>prasugrel hcl</i> TABS 5mg, 10mg	1	

This document includes a list of drugs covered on our formulary as of July 1, 2024. You can find information on what the symbols and abbreviations on this table mean by going to page 7.

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
<b><u>IMMUNOLOGIC AGENTS</u></b>		
<b><u>AUTOIMMUNE AGENTS</u></b>		
ADALIMUMAB-AACF (2 PEN) AJKT 40mg/0.8ml	2	QL (56 pens / 365 days), NM, PA
DUPIXENT SOPN 200mg/1.14ml, 300mg/2ml; SOSY 100mg/0.67ml, 200mg/1.14ml, 300mg/2ml	2	NM, PA
ENBREL SOLN 25mg/0.5ml	2	QL (16 vials / 28 days), NM, PA
ENBREL SOSY 25mg/0.5ml	2	QL (16 syringes / 28 days), NM, PA
ENBREL SOSY 50mg/ml	2	QL (8 syringes / 28 days), NM, PA
ENBREL MINI SOCT 50mg/ml	2	QL (8 cartridges / 28 days), NM, PA
ENBREL SURECLICK SOAJ 50mg/ml	2	QL (8 pens / 28 days), NM, PA
HUMIRA PSKT 10mg/0.1ml	2	QL (2 syringes / 28 days), NM, PA
HUMIRA PSKT 20mg/0.2ml	2	QL (4 syringes / 28 days), NM, PA
HUMIRA PSKT 40mg/0.4ml, 40mg/0.8ml	2	QL (6 syringes / 28 days), NM, PA
HUMIRA PEDIA INJ CROHNS	2	QL (2 syringes / 28 days), NM, PA
HUMIRA PEDIATRIC CROHNS D PSKT 80mg/0.8ml	2	QL (3 syringes / 28 days), NM, PA
HUMIRA PEN PNKT 40mg/0.4ml, 40mg/0.8ml	2	QL (6 pens / 28 days), NM, PA
HUMIRA PEN PNKT 80mg/0.8ml	2	QL (4 pens / 28 days), NM, PA

This document includes a list of drugs covered on our formulary as of July 1, 2024. You can find information on what the symbols and abbreviations on this table mean by going to page 7.

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
HUMIRA PEN KIT PS/UV	2	QL (3 pens / 28 days), NM, PA
HUMIRA PEN-CD/UC/HS START PNKT 80mg/0.8ml	2	QL (3 pens / 28 days), NM, PA
HUMIRA PEN-PEDIATRIC UC S PNKT 80mg/0.8ml	2	QL (4 pens / 28 days), NM, PA
HUMIRA PEN-PS/UV STARTER PNKT 40mg/0.8ml	2	QL (4 pens / 28 days), NM, PA
IDACIO (2 PEN) AJKT 40mg/0.8ml	2	QL (56 pens / 365 days), NM, PA
IDACIO (2 SYRINGE) PSKT 40mg/0.8ml	2	QL (56 syringes / 365 days), NM, PA
IDACIO CROHN INJ DISEASE AJKT 40mg/0.8ml	2	QL (2 packs / year), NM, PA
IDACIO PLAQU INJ PSORIASIS AJKT 40mg/0.8ml	2	QL (2 packs / year), NM, PA
INFLIXIMAB SOLR 100mg	2	NM, LA, PA
KEVZARA SOAJ 150mg/1.14ml, 200mg/1.14ml	2	QL (2 pens / 28 days), NM, PA
KEVZARA SOSY 150mg/1.14ml, 200mg/1.14ml	2	QL (2 syringes / 28 days), NM, PA
OTEZLA TABS 30mg	2	QL (60 tabs / 30 days), NM, PA
OTEZLA TAB 10/20/30	2	QL (110 tabs / year), NM, PA
REMICADE SOLR 100mg	2	NM, LA, PA
RENFLEXIS SOLR 100mg	2	NM, LA, PA
RINVOQ TB24 15mg, 30mg	2	QL (30 tabs / 30 days), NM, PA
RINVOQ TB24 45mg	2	QL (168 tabs / year), NM, PA

This document includes a list of drugs covered on our formulary as of July 1, 2024. You can find information on what the symbols and abbreviations on this table mean by going to page 7.

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
SKYRIZI SOCT 180mg/1.2ml, 360mg/2.4ml	2	QL (1 cartridge / 56 days), NM, PA
SKYRIZI SOLN 600mg/10ml	2	QL (6 vials / year), NM, PA
SKYRIZI SOSY 150mg/ml	2	QL (6 syringes / 365 days), NM, PA
SKYRIZI PEN SOAJ 150mg/ml	2	QL (6 pens / 365 days), NM, PA
STELARA SOLN 45mg/0.5ml	2	QL (1 vial / 28 days), NM, LA, PA
STELARA SOLN 130mg/26ml	2	NM, LA, PA
STELARA SOSY 45mg/0.5ml, 90mg/ml	2	QL (1 syringe / 28 days), NM, PA
TALTZ SOAJ 80mg/ml; SOSY 80mg/ml	2	QL (3 syringes / 28 days), NM, LA, PA
TREMFYA SOPN 100mg/ml	2	QL (1 pen / 28 days), NM, PA
TREMFYA SOSY 100mg/ml	2	QL (1 syringe / 28 days), NM, PA
XELJANZ SOLN 1mg/ml	2	QL (480 mL / 24 days), NM, PA
XELJANZ TABS 5mg, 10mg	2	QL (60 tabs / 30 days), NM, PA
XELJANZ XR TB24 11mg, 22mg	2	QL (30 tabs / 30 days), NM, PA
<b><i>DISEASE-MODIFYING ANTI-RHEUMATIC DRUGS (DMARDS)</i></b>		
<i>hydroxychloroquine sulfate</i> TABS 200mg	1	
JYLAMVO SOLN 2mg/ml	2	B/D
<i>leflunomide</i> TABS 10mg, 20mg	1	QL (30 tabs / 30 days)
<i>methotrexate sodium</i> TABS 2.5mg	1	

This document includes a list of drugs covered on our formulary as of July 1, 2024. You can find information on what the symbols and abbreviations on this table mean by going to page 7.

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
XATMEP SOLN 2.5mg/ml	2	B/D
<b>IMMUNOGLOBULINS</b>		
BIVIGAM SOLN 5gm/50ml, 10%	2	NM, LA, PA
FLEBOGAMMA DIF SOLN 5gm/100ml, 10gm/200ml, 20gm/400ml	2	NM, PA
GAMASTAN INJ	2	B/D, NM, LA
GAMMAGARD LIQUID SOLN 1gm/10ml, 2.5gm/25ml, 5gm/50ml, 10gm/100ml, 20gm/200ml, 30gm/300ml	2	NM, PA
GAMMAGARD S/D IGA LESS TH SOLR 5gm, 10gm	2	NM, PA
GAMMAKED SOLN 1gm/10ml, 5gm/50ml, 10gm/100ml, 20gm/200ml	2	NM, PA
GAMMAPLEX SOLN 5gm/100ml, 5gm/50ml, 10gm/100ml, 10gm/200ml, 20gm/200ml, 20gm/400ml	2	NM, LA, PA
GAMUNEX-C SOLN 1gm/10ml, 2.5gm/25ml, 5gm/50ml, 10gm/100ml, 20gm/200ml, 40gm/400ml	2	NM, PA
OCTAGAM SOLN 1gm/20ml, 2gm/20ml, 2.5gm/50ml, 5gm/100ml, 5gm/50ml, 10gm/100ml, 10gm/200ml, 20gm/200ml, 30gm/300ml	2	NM, PA
PANZYGA SOLN 1gm/10ml, 2.5gm/25ml, 5gm/50ml, 10gm/100ml, 20gm/200ml, 30gm/300ml	2	NM, PA
PRIVIGEN SOLN 5gm/50ml, 10gm/100ml, 20gm/200ml, 40gm/400ml	2	NM, PA
<b>IMMUNOMODULATORS</b>		
ACTIMMUNE SOLN 100mcg/0.5ml	2	NM, LA, PA
ARCALYST SOLR 220mg	2	NM, LA, PA

This document includes a list of drugs covered on our formulary as of July 1, 2024. You can find information on what the symbols and abbreviations on this table mean by going to page 7.

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
<b>IMMUNOSUPPRESSANTS</b>		
ASTAGRAF XL CP24 .5mg, 1mg, 5mg	2	B/D, NM
<i>azathioprine</i> TABS 50mg	1	B/D
BENLYSTA SOAJ 200mg/ml; SOSY 200mg/ml	2	QL (8 syringes / 28 days), NM, LA, PA
BENLYSTA SOLR 120mg, 400mg	2	NM, LA, PA
<i>cyclosporine</i> CAPS 25mg, 100mg; SOLN 50mg/ml	1	B/D, NM
<i>cyclosporine modified (for microemulsion)</i> CAPS 25mg, 50mg, 100mg; SOLN 100mg/ml	1	B/D, NM
<i>everolimus (immunosuppressant)</i> TABS .25mg, .5mg, .75mg, 1mg	2	B/D, NM
<i>engraf</i> CAPS 25mg, 100mg; SOLN 100mg/ml	1	B/D, NM
<i>mycophenolate mofetil</i> CAPS 250mg; TABS 500mg	1	B/D, NM
<i>mycophenolate mofetil</i> SUSR 200mg/ml	2	B/D, NM
<i>mycophenolate sodium</i> TBEC 180mg, 360mg	1	B/D, NM
NULOJIX SOLR 250mg	2	B/D, NM
PROGRAF PACK .2mg, 1mg	2	B/D, NM
REZUROCK TABS 200mg	2	NM, LA, PA
SANDIMMUNE SOLN 100mg/ml	2	B/D, NM
<i>sirolimus</i> SOLN 1mg/ml	2	B/D, NM
<i>sirolimus</i> TABS .5mg, 1mg, 2mg	1	B/D, NM
<i>tacrolimus</i> CAPS .5mg, 1mg, 5mg	1	B/D, NM

This document includes a list of drugs covered on our formulary as of July 1, 2024. You can find information on what the symbols and abbreviations on this table mean by going to page 7.

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
<b>VACCINES</b>		
ABRYSVO SOLR 120mcg/0.5ml	1	
ACTHIB INJ	1	
ADACEL INJ	1	
AREXVY SUSR 120mcg/0.5ml	1	
BCG VACCINE SOLR 50mg	1	
BEXSERO INJ	1	
BOOSTRIX INJ	1	
DAPTACEL INJ	1	
DENGVAXIA SUS	1	
DIP/TET PED INJ 25-5LFU	1	B/D
ENGERIX-B SUSP 20mcg/ml; SUSY 10mcg/0.5ml, 20mcg/ml	1	B/D
GARDASIL 9 INJ	1	
HAVRIX SUSP 720elu/0.5ml, 1440elu/ml	1	
HEPLISAV-B SOSY 20mcg/0.5ml	1	B/D
HIBERIX SOLR 10mcg	1	
IMOVAX RABIES (H.D.C.V.) SUSR 2.5unit/ml	1	B/D
INFANRIX INJ	1	
IPOL INJ INACTIVE	1	
IXCHIQ INJ	1	
IXIARO INJ	1	
JYNNEOS SUSP .5ml	1	B/D
KINRIX INJ	1	

This document includes a list of drugs covered on our formulary as of July 1, 2024. You can find information on what the symbols and abbreviations on this table mean by going to page 7.



<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
M-M-R II INJ	1	
MENACTRA INJ	1	
MENQUADFI INJ	1	
MENVEO INJ	1	
MENVEO SOL	1	
PEDIARIX INJ 0.5ML	1	
PEDVAX HIB SUSP 7.5mcg/0.5ml	1	
PENBRAYA INJ	1	
PENTACEL INJ	1	
PREHEVBRIO SUSP 10mcg/ml	1	B/D
PRIORIX INJ	1	
PROQUAD INJ	1	
QUADRACEL INJ	1	
QUADRACEL INJ 0.5ML	1	
RABAVERT INJ	1	B/D
RECOMBIVAX HB SUSP 5mcg/0.5ml, 10mcg/ml, 40mcg/ml; SUSY 5mcg/0.5ml, 10mcg/ml	1	B/D
ROTARIX SUS	1	
ROTATEQ SOL	1	
SHINGRIX SUSR 50mcg/0.5ml	1	QL (2 vials per lifetime)
TDVAX INJ 2-2 LF	1	B/D
TENIVAC INJ 5-2LF	1	B/D
TICOVAC SUSY 1.2mcg/0.25ml, 2.4mcg/0.5ml	1	

This document includes a list of drugs covered on our formulary as of July 1, 2024. You can find information on what the symbols and abbreviations on this table mean by going to page 7.

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
TRUMENBA INJ	1	
TWINRIX INJ	1	
TYPHIM VI SOLN 25mcg/0.5ml; SOSY 25mcg/0.5ml	1	
VAQTA SUSP 25unit/0.5ml, 50unit/ml	1	
VARIVAX INJ 1350pfu/0.5ml	1	
YF-VAX INJ	1	
<b><u>INJECTABLE</u></b>		
<b><i>ANTI-COAGULANT FOR IV</i></b>		
<i>heparin sodium (porcine) lock flush</i> SOLN 1unit/ml, 10unit/ml, 100unit/ml	3	
<b><i>STERILE INJECTABLE</i></b>		
<i>water for injection</i>	3	
<i>water for iv injection</i>	3	
<b><u>MISCELLANEOUS</u></b>		
<b><i>MISCELLANEOUS</i></b>		
ACACIA POW	3	
<i>acacia powder</i>	3	
ACETAMIN POW	3	
ACETIC ACID SOLN 3%	3	
ALCOHOL SOL DENATURE	3	
ALLANTOIN POW	3	
<i>almond oil (sweet)</i>	3	
<i>alum (ammonium) powder</i>	3	
ALUM AMMONIU POW	3	
AMMONIUM GRA CHLORIDE	3	

This document includes a list of drugs covered on our formulary as of July 1, 2024. You can find information on what the symbols and abbreviations on this table mean by going to page 7.

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
ANISE FLAVOR OIL	3	
AQUABASE OIN	3	
ASCORBIC ACD POW	3	
BENZYL ALC LIQ	3	
BIOFLAVINOID POW LEMON	3	
BIOFLAVONOID POW CITRUS	3	
BISMUTH POW SUBNITRA	3	
BISMUTH SUBC POW	3	
<i>bismuth subcarbonate powder</i>	3	
<i>bismuth subnitrate powder</i>	3	
BL BORIC ACI POW	3	
BL GLYCERIN LIQ	3	
BL PETROLEUM OIN JELLY	3	
BLENDED SUSP SUS COMPOUND	3	
<i>boric acid powder</i>	3	
BUBBLE GUM SYP	3	
<i>calcium hydroxide powder</i>	3	
CALCIUM POW SACCHARA	3	
CARBOMER POW 1342	3	
<i>castor oil</i>	3	
CASTOR OIL OIL 100%	3	
CETYL ALCOHO GRA	3	
CHERRY CON	3	

This document includes a list of drugs covered on our formulary as of July 1, 2024. You can find information on what the symbols and abbreviations on this table mean by going to page 7.

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
<i>cherry syrup</i>	3	
CHLOROFORM SOL	3	
<i>chloroform soln</i>	3	
CITRIC ACID GRA	3	
<i>citric acid granules</i>	3	
<i>citric acid powder</i>	3	
<i>clove oil</i>	3	
CLOVE OIL	3	
<i>cocoa butter</i>	3	
COCOA BUTTER LOT	3	
<i>coconut oil</i>	3	
<i>collodion flexible</i>	3	
COLLODION LIQ FLEXIBLE	3	
COTTONSEED OIL	3	
CROTON OIL	3	
CRYSTAL LAKE LIQ WATER	3	
D-VITAMIN E POW SUCCINAT	3	
DELBASE OIN COMPOUND	3	
DL-MENTHOL CRY	3	
FATTYBLEND MIS	3	
FD&C BLUE #2 POW	3	
FD&C RED 40 POW	3	
FDC BLUE 1 POW AL LAKE	3	

This document includes a list of drugs covered on our formulary as of July 1, 2024. You can find information on what the symbols and abbreviations on this table mean by going to page 7.

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
FDC RED #40 POW AL LAKE	3	
FDC YELLOW 5 POW AL LAKE	3	
FERRIC POW SUBSULFA	3	
FLAVOR CONC LIQ GRAPE	3	
FULLERS POW EARTH	3	
<i>glycerin liquid</i>	3	
<i>glycolic acid crystals</i>	3	
GNP PETROLEU GEL JELLY	3	
GRAPE SEED OIL	3	
GREEN TEA EXTRACT LIQD 90%	3	
GRX WHITE OIN PETROLAT	3	
HYDROPHILIC OIN PETROLAT	3	
<i>hydrophilic ointment</i>	3	
INDOLE-3- POW CARBINOL	3	
INOSITOL POW HEXANICO	3	
IODINE CRY	3	
<i>karaya gum</i>	3	
KARAYA GUM	3	
LACTIC ACID SOL	3	
LACTOSE POW	3	
<i>lactose powder</i>	3	
LIP BALM OIN NATURAL	3	
LIPOIL OIL	3	

This document includes a list of drugs covered on our formulary as of July 1, 2024. You can find information on what the symbols and abbreviations on this table mean by going to page 7.

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
LIPOVAN BASE CRE	3	
LOLLIBASE POW	3	
LOZIBASE MIS	3	
MANNITOL POW	3	
<i>menthol crystals</i>	3	
METHYLCELLULOSE GEL 2%, 3%	3	
<i>methylcellulose powder</i>	3	
NICE PURE POW BAK SODA	3	
ORA-HESIVE PST BASE	3	
<i>*oral vehicles***</i>	3	
OXALIC ACID CRY	3	
<i>oxalic acid crystals</i>	3	
PCCA MBK MIS FAT ACID	3	
PEG 1000 LIQ	3	
PERUVIAN LIQ BALSAM	3	
<i>petrolatum ointment</i>	3	
<i>petrolatum, hydrophilic ointment</i>	3	
PHOSPHATIDYL POW 20%	3	
PLURONIC GEL 20%, 30%	3	
POLYSORBATE SOL 20	3	
POT NITRATE GRA	3	
POT SORBATE CRY	3	
POTASSIUM HYDROXIDE SOLN 10%, 20%	3	

This document includes a list of drugs covered on our formulary as of July 1, 2024. You can find information on what the symbols and abbreviations on this table mean by going to page 7.

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
PROPYLENE GL SOL	3	
<i>propylene glycol</i>	3	
<i>raspberry syrup</i>	3	
RED YEAST POW RICE	3	
<i>simple - syrup</i>	3	
SOD BENZOATE POW	3	
SOD METABISU GRA	3	
SOD PERBORAT CRY	3	
SOD PROPION POW	3	
SOD SULFITE POW	3	
<i>sodium benzoate powder</i>	3	
SODIUM BORAT POW	3	
SODIUM CITRA GRA	3	
<i>sorbitol SOLN 70%</i>	3	
STEVIA EXTRACT POWD 90%	3	
SULFUR POW	3	
SUSPENDOL-S LIQ	3	
TALC POW	3	
<i>talc powder</i>	3	
THYMOL CRY	3	
TROCHIBASE S MIS	3	
<i>turpentine liq</i>	3	
UNIBASE CRE	3	

This document includes a list of drugs covered on our formulary as of July 1, 2024. You can find information on what the symbols and abbreviations on this table mean by going to page 7.

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
UREA BEA	3	
VEEGUM MIS LUMP	3	
<i>white petrolatum gel</i>	3	
<i>white petrolatum ointment</i>	3	
WITEPSOL MIS	3	
ZINC CHLORID GRA	3	
ZINC OXIDE POW	3	

## **NUTRITIONAL/SUPPLEMENTS**

### **ELECTROLYTES**

BABY DARLNG POW PED ELEC	3	
<i>buffered salt</i>	3	
CERALYTE 50 LIQ	3	
CERASPORT SOL	3	
<i>hm potassium TABS 595mg</i>	3	
<i>hydralife</i>	3	
MEDI-LYTE TAB	3	
<i>*oral electrolyte for soln***</i>	3	
<i>*oral electrolyte solution***</i>	3	
<i>osco potassium gluconate TABS 550mg</i>	3	
POT GLUCONAT TAB 500MG	3	
<i>potassium TABS 99mg</i>	3	
<i>potassium gluconate TABS 2meq</i>	3	
POTASSIUM GLUCONATE TABS 550mg	3	
POTASSIUM GLUCONATE ER TBCR 595mg	3	

This document includes a list of drugs covered on our formulary as of July 1, 2024. You can find information on what the symbols and abbreviations on this table mean by going to page 7.



<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
POTASSIUM TAB CHELATED	3	
REPLACE TAB SR	3	
<b><i>ELECTROLYTES/MINERALS, INJECTABLE</i></b>		
D2.5W/NAACL INJ 0.45%	2	
D5W/LYTES INJ #48	2	
D10W/NAACL INJ 0.2%	2	
<i>dextrose 2.5% w/ sodium chloride 0.45%</i>	1	
<i>dextrose 5% in lactated ringers</i>	1	
<i>dextrose 5% w/ sodium chloride 0.2%</i>	1	
<i>dextrose 5% w/ sodium chloride 0.3%</i>	1	
<i>dextrose 5% w/ sodium chloride 0.9%</i>	1	
<i>dextrose 5% w/ sodium chloride 0.45%</i>	1	
<i>dextrose 5% w/ sodium chloride 0.225%</i>	1	
<i>dextrose 10% w/ sodium chloride 0.45%</i>	1	
ISOLYTE-P INJ /D5W	2	
ISOLYTE-S INJ	2	
ISOLYTE-S INJ PH 7.4	2	
<i>kcl 10 meq/l (0.075%) in dextrose 5% &amp; nacl 0.45% inj</i>	1	
<i>kcl 20 meq/l (0.15%) in dextrose 5% &amp; nacl 0.2% inj</i>	1	
<i>kcl 20 meq/l (0.15%) in dextrose 5% &amp; nacl 0.9% inj</i>	1	
<i>kcl 20 meq/l (0.15%) in dextrose 5% &amp; nacl 0.45% inj</i>	1	
<i>kcl 20 meq/l (0.15%) in nacl 0.9% inj</i>	1	

This document includes a list of drugs covered on our formulary as of July 1, 2024. You can find information on what the symbols and abbreviations on this table mean by going to page 7.

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
<i>kcl 20 meq/l (0.15%) in nacl 0.45% inj</i>	1	
<i>kcl 20 meq/l (0.149%) in nacl 0.45% inj</i>	1	
<i>kcl 30 meq/l (0.224%) in dextrose 5% &amp; nacl 0.45% inj</i>	1	
<i>kcl 40 meq/l (0.3%) in dextrose 5% &amp; nacl 0.9% inj</i>	1	
<i>kcl 40 meq/l (0.3%) in dextrose 5% &amp; nacl 0.45% inj</i>	1	
<i>kcl 40 meq/l (0.3%) in nacl 0.9% inj</i>	1	
KCL/D5W/NACL INJ 0.3/0.9%	2	
<i>lactated ringer's solution</i>	1	
MAGNESIUM SULFATE SOLN 2gm/50ml, 4gm/100ml, 4gm/50ml, 20gm/500ml, 40gm/1000ml	2	
<i>magnesium sulfate SOLN 2gm/50ml, 4gm/100ml, 4gm/50ml, 20gm/500ml, 40gm/1000ml, 50%</i>	2	
<i>magnesium sulfate in dextrose 5% iv soln 1 gm/100ml</i>	2	
MG SO4/D5W INJ 10MG/ML	2	
<i>multiple electrolytes ph 5.5</i>	1	
<i>multiple electrolytes ph 7.4</i>	1	
PLASMA-LYTE INJ -148	2	
PLASMA-LYTE INJ -A	2	
POT CHL 20MEQ/L IN NACL 0.9% INJ	2	
POT CHL 20MEQ/L IN NACL 0.45% INJ	2	
POT CHL 40MEQ/L IN NACL 0.9% INJ	2	

This document includes a list of drugs covered on our formulary as of July 1, 2024. You can find information on what the symbols and abbreviations on this table mean by going to page 7.

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
<i>potassium chloride</i> SOLN 2meq/ml, 10meq/100ml, 20meq/100ml, 20meq/50ml, 40meq/100ml	1	
POTASSIUM CHLORIDE SOLN 10meq/50ml	2	
<i>potassium chloride 20 meq/l (0.15%) in dextrose 5% inj</i>	1	
<i>sodium chloride</i> SOLN .45%, .9%, 2.5meq/ml, 3%, 5%	1	
TPN ELECTROL INJ	2	B/D
<b><i>ELECTROLYTES/MINERALS/VITAMINS, ORAL</i></b>		
<i>klor-con</i> PACK 20meq	1	
<i>klor-con 8</i> TBCR 8meq	1	
<i>klor-con 10</i> TBCR 10meq	1	
<i>klor-con m10</i> TBCR 10meq	1	
<i>klor-con m15</i> TBCR 15meq	1	
<i>klor-con m20</i> TBCR 20meq	1	
M-NATAL PLUS TAB	2	
<i>potassium chloride</i> CPCR 8meq, 10meq; PACK 20meq; SOLN 10%, 20%; TBCR 8meq, 10meq, 20meq	1	
<i>potassium chloride microencapsulated crystals er</i> TBCR 10meq, 15meq, 20meq	1	
PRENATAL TAB 27-1MG	2	
PRENATAL TAB PLUS	2	
<i>sodium fluoride chew; tab; 1.1 (0.5 f) mg/ml soln</i>	1	
<b><i>IV NUTRITION</i></b>		
CLINIMIX INJ 4.25/D5W	2	B/D

This document includes a list of drugs covered on our formulary as of July 1, 2024. You can find information on what the symbols and abbreviations on this table mean by going to page 7.

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
CLINIMIX INJ 4.25/D10	2	B/D
CLINIMIX INJ 5%/D15W	2	B/D
CLINIMIX INJ 5%/D20W	2	B/D
CLINIMIX INJ 6/5	2	B/D
CLINIMIX INJ 8/10	2	B/D
CLINIMIX INJ 8/14	2	B/D
<i>clinisol sf 15%</i>	1	B/D
CLINOLIPID EMU 20%	2	B/D
COPPER SULF CRY	3	
<i>dextrose SOLN 5%, 10%</i>	1	
<i>dextrose SOLN 50%, 70%</i>	1	B/D
INTRALIPID EMUL 20gm/100ml, 30gm/100ml	2	B/D
NUTRILIPID EMUL 20gm/100ml	2	B/D
<i>plenamine</i>	1	B/D
PREMASOL SOL 10%	2	B/D
PROSOL INJ 20%	2	B/D
TRAVASOL INJ 10%	2	B/D
TROPHAMINE INJ 10%	2	B/D
<b>MINERALS</b>		
BEELITH TAB	3	
<i>bl calcium 500/d</i>	3	
<i>bl calcium 600 + d</i>	3	
<i>bl calcium citrate+d</i>	3	

This document includes a list of drugs covered on our formulary as of July 1, 2024. You can find information on what the symbols and abbreviations on this table mean by going to page 7.

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
<i>bl calcium/magnesium/zinc</i>	3	
<i>bl magnesium TABS 250mg</i>	3	
BONE MEAL TAB	3	
<i>*bone meal w/ vitamin d tab***</i>	3	
CA GLUCONATE TAB 50MG	3	
CA HI-CAL/D TAB 500MG	3	
CA PHOS DIHY POW DIBASIC	3	
CA/MG TAB	3	
CA/MG/ZN TAB	3	
CAL CIT MAL/ TAB VITAMIND	3	
CAL-CITRATE TAB PLUS D	3	
CAL-LAC CAPS 500mg	3	
CAL-MAG COMP TAB	3	
CAL-QUICK LIQ 500-400	3	
CAL/MAG TAB CHEW	3	
CAL/MAG/VITD TAB	3	
CALC CHEWABL CHW 600 PLUS	3	
CALC CIT+D3 TAB 250-200	3	
CALC/MAGNES TAB 333-167	3	
CALC/VIT D3 CHW 200-200	3	
CALC/VIT D3 CHW DISNEY	3	
<i>calcarb 600 TABS 1500mg</i>	3	
<i>calcarb 600/vitamin d</i>	3	

This document includes a list of drugs covered on our formulary as of July 1, 2024. You can find information on what the symbols and abbreviations on this table mean by going to page 7.

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
CALCET CHW BITES	3	
CALCET PETIT TAB 200-250	3	
<i>calci-chew</i> CHEW 1250mg	3	
CALCI-CHEW CHEW 1250mg	3	
CALCI-MIX CAPS 1250mg	3	
<i>calcio del mar</i> TABS 1250mg	3	
<i>calcitrate</i> TABS 950mg	3	
<i>calcium</i> TABS 600mg	3	
<i>calcium 500+d high potenc</i>	3	
<i>calcium 500/d</i>	3	
<i>calcium 600 + d</i>	3	
<i>calcium 600 mg w/ vitamin d tab</i>	3	
<i>calcium 600 with vitamin</i>	3	
<i>calcium 600-d</i>	3	
CALCIUM 1000 TAB + D	3	
<i>calcium 1200+d3</i>	3	
CALCIUM ACETATE TABS 668mg	3	
CALCIUM CARB POW	3	
CALCIUM CARB TAB 600MG	3	
<i>calcium carb-cholecalcif chew tab 500 mg-2.5mcg (100 unit)</i>	3	
<i>calcium carb-cholecalciferol tab 250 mg-3.125 mcg (125 unit)</i>	3	
<i>calcium carb-cholecalciferol tab 500 mg-3.125 mcg (125 unit)</i>	3	

This document includes a list of drugs covered on our formulary as of July 1, 2024. You can find information on what the symbols and abbreviations on this table mean by going to page 7.

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
<i>calcium carb-cholecalciferol tab 500 mg-10 mcg (400 unit)</i>	3	
<i>*calcium carb-vit d w/ minerals chew tab 600 mg-400 unit***</i>	3	
<i>*calcium carb-vit d w/ minerals chew tab 1200 mg-1000 unit**</i>	3	
CALCIUM CARBONATE CHEW 260mg; POWD 800mg/2gm	3	
<i>calcium carbonate (antacid) SUSP 1250mg/5ml</i>	3	
<i>calcium carbonate powder</i>	3	
<i>calcium carbonate-ergocalciferol tab 500 mg-5 mcg (200 unit)</i>	3	
<i>*calcium carbonate-vit d</i>	3	
<i>calcium carbonate-vitamin d tab 250 mg-3.125 mcg (125 unit)</i>	3	
<i>calcium carbonate-vitamin d tab 500 mg-3.125 mcg (125 unit)</i>	3	
<i>calcium cit-vit d tab 315 mg-6.25 mcg(250 unit) (elem ca)</i>	3	
CALCIUM CIT/ TAB VIT D	3	
CALCIUM CITR TAB + D	3	
CALCIUM CITRATE GRAN 760mg/3.5gm; TABS 250mg, 1040mg	3	
<i>calcium citrate + d3</i>	3	
<i>calcium citrate-vitamin d tab 1500 mg-200 unit</i>	3	
<i>calcium gluconate TABS 500mg, 650mg</i>	3	
CALCIUM GLUCONATE TABS 500mg, 650mg	3	

This document includes a list of drugs covered on our formulary as of July 1, 2024. You can find information on what the symbols and abbreviations on this table mean by going to page 7.

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
<i>calcium gluconate powder</i>	3	
<i>calcium gummies</i>	3	
CALCIUM LACTATE TABS 100mg, 648mg, 750mg	3	
<i>calcium lactate</i> TABS 650mg	3	
<i>calcium liquid caps</i>	3	
<i>calcium phos-cholecalcif chew tab 250 mg-12.5 mcg (500 unit)</i>	3	
CALCIUM PLUS CAP VIT D	3	
CALCIUM SOFT CHW CARAMEL	3	
CALCIUM TAB 600MG	3	
CALCIUM TAB FORMULA	3	
<i>calcium w/ magnesium tab 333-167 mg</i>	3	
<i>calcium w/ magnesium tab 500-250 mg</i>	3	
<i>calcium w/ vitamin d &amp; k chew tab 500 mg-100 unit-40 mcg</i>	3	
<i>calcium-carb 600 + d</i>	3	
<i>calcium-magnesium-zinc tab 333-133-8.3 mg</i>	3	
<i>calcium-magnesium-zinc tab 334-134-5 mg</i>	3	
<i>calcium-vitamin d tab 600 mg-5 mcg (200 unit)</i>	3	
CALCIUM/C/D CHW 500MG	3	
CALCIUM/D3 CAP 600-2500	3	
CALCIUM/D TAB 600/200	3	

This document includes a list of drugs covered on our formulary as of July 1, 2024. You can find information on what the symbols and abbreviations on this table mean by going to page 7.



<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
CALCIUM/MAGN TAB 250-155	3	
CALCIUM/VITD CAP 600-400	3	
CALTRATE 600 CHW 600-800	3	
CALTRATE 600 CHW +D PLUS	3	
CALTRATE + D TAB 300-800	3	
CALTRATE +D3 TAB 600-800	3	
CALTRATE+D TAB 600-800	3	
<i>calvite p&amp;d</i>	3	
CHELATED CALCIUM TABS 200mg	3	
CHELATED MG TAB 100MG TABS 100mg	3	
CHELATED MUL TAB MINERAL	3	
CITRACAL CAL CHW GUMMIES	3	
CITRACAL CAL TAB +D SLOW	3	
CITRACAL TAB MAXIMUM	3	
CITRACAL TAB VIT D	3	
CITRACAL+D3 CHW 250-500	3	
CORAL CALCIU CAP	3	
CORAL CALCIU CAP 1000MG	3	
CORAL CAP CALCIUM	3	
<i>cvs magnesium citrate</i> CAPS 125mg	3	
<i>cvs selenium</i> TABS 200mcg	3	
<i>cvs selenium natural</i> TABS 100mcg	3	
<i>cvs zinc</i> LOZG 10mg	3	

This document includes a list of drugs covered on our formulary as of July 1, 2024. You can find information on what the symbols and abbreviations on this table mean by going to page 7.

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
<i>600+d3 plus minerals</i>	3	
DIASENSE MAGNESIUM TABS 241.3mg	3	
ECK HI-CAL TAB 500MG	3	
<i>eq calcium 500+d</i>	3	
<i>eq calcium 600+d+minerals</i>	3	
EQL CALCIUM CAP VIT D	3	
<i>eql calcium gummies</i>	3	
<i>eql calcium soft chews</i>	3	
<i>gnp calcium 500 +d3</i>	3	
GUMMY BITES CHW	3	
HCA ELEMENTA CAP MAGNESIU	3	
<i>hca elemental magnesium CAPS 300mg</i>	3	
HCA ZINC GLU TAB 50MG	3	
<i>hm calcium 600 &amp; vitamin</i>	3	
<i>iodine (kelp) TABS .15mg</i>	3	
<i>kp calcium 600+d3</i>	3	
<i>kp mag-oxide magnesium TABS 200mg</i>	3	
LIQUID CALCI CAP WITH D3	3	
LOCALNESIUM TAB	3	
LOCALNESIUM TAB -C	3	
MAG64 TBEC 64mg	3	
MAG CARBONAT POW	3	
MAG GLYCINATE TABS 100mg	3	

This document includes a list of drugs covered on our formulary as of July 1, 2024. You can find information on what the symbols and abbreviations on this table mean by going to page 7.

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
MAG-200 TABS 200mg	3	
MAG-G TABS 500mg	3	
MAG-SR PLUS TAB CALCIUM	3	
MAG-TAB SR TBCR 84mg	3	
<i>magbee</i>	3	
<i>magdelay</i> TBEC 64mg	3	
MAGDELAY TBEC 70mg	3	
MAGINEX TBEC 615mg	3	
MAGNEBIND TAB 200	3	
MAGNEBIND TAB 300	3	
<i>magnesium</i> TABS 30mg, 100mg	3	
MAGNESIUM TABS 200mg	3	
<i>magnesium chloride</i> TBEC 64mg	3	
MAGNESIUM CITRATE CAPS 125mg; TABS 100mg	3	
MAGNESIUM ELEMENTAL TABS 30mg	3	
<i>magnesium gluconate</i> TABS 27.5mg	3	
MAGNESIUM GLUCONATE TABS 250mg, 500mg, 550mg	3	
<i>magnesium glycinate</i> CAPS 100mg	3	
MAGNESIUM GLYCINATE CAPS 100mg	3	
<i>magnesium lactate</i> TBCR 7meq	3	
MAGNESIUM OXIDE CAPS 400mg; TABS 250mg	3	

This document includes a list of drugs covered on our formulary as of July 1, 2024. You can find information on what the symbols and abbreviations on this table mean by going to page 7.

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
<i>magnesium oxide (mg supplement)</i> CAPS 500mg; TABS 250mg, 400mg, 500mg	3	
MAGNESIUM SULFATE CAPS 70mg	3	
<i>magnesium tab 200 mg</i>	3	
<i>magnesium tab 400 mg</i>	3	
MAGONATE LIQ 1000/5ML	3	
<i>mar-zinc</i> TABS 220mg	3	
MONOCAL TAB 3-250	3	
<i>*multiple minerals tab**</i>	3	
NU-MAG TAB 71.5-119	3	
ORAZINC TABS 110mg	3	
<i>os-cal</i>	3	
OS-CAL TABS 1250mg	3	
OS-CAL TAB 500 + D	3	
OS-CAL ULTRA TAB	3	
OSTEO-PORETI TAB	3	
<i>oyster shell</i> TABS 500mg	3	
OYSTER SHELL CALCIUM TABS 250mg	3	
PARVA-CAL TAB 250-100	3	
PARVA-CAL TAB 500MG	3	
PHOS-NAK POW CONCENTR	3	
POSTURE-D TAB 600MG	3	
POSTURE-D TAB CALC/MAG	3	

This document includes a list of drugs covered on our formulary as of July 1, 2024. You can find information on what the symbols and abbreviations on this table mean by going to page 7.

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
<i>potassium &amp; sodium phosphates powder pack 280-160-250 mg</i>	3	
RA CA/BORON TAB	3	
<i>ra calcium 600 TABS 600mg</i>	3	
RA OYS SHL/D TAB 500MG	3	
<i>ra potassium/magnesium as</i>	3	
RISACAL-D TAB	3	
SE PLUS PROTEIN TABS 200mcg	3	
<i>selenium TABS 50mcg</i>	3	
SELENIUM TBCR 200mcg	3	
SELENIUM TAB 50MCG	3	
SLOW MAGNESIUM CHLORIDE/	3	
<i>sm calcium plus/vitamin d</i>	3	
SM CORAL CALCIUM TABS 1000mg	3	
SOD CHLORIDE GRA	3	
<i>sodium chloride TABS 1gm</i>	3	
SODIUM CHLORIDE TABS 1gm	3	
TR MAG COMPL CAP 400MG	3	
UPCAL D POW	3	
VIACTIV CHW CARAMEL	3	
ZINC LOZG 10mg	3	
<i>zinc TABS 50mg</i>	3	
ZINC 15 TABS 66mg	3	
<i>zinc gluconate TABS 30mg, 50mg, 100mg</i>	3	

This document includes a list of drugs covered on our formulary as of July 1, 2024. You can find information on what the symbols and abbreviations on this table mean by going to page 7.

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
ZINC SULFATE CAPS 50mg	3	
<i>zinc sulfate</i> CAPS 220mg; TABS 66mg	3	
ZINC SULFATE POW	3	
<i>zinc sulfate powder</i>	3	
<b>MISCELLANEOUS</b>		
ADULT OMEGA CHW PLUS DHA	3	
ADVERA LIQ CHOCOLAT	3	
ALBA-LYBE NR LIQ	3	
ALP HIGH3 CAP 600MG	3	
<i>alpha betic</i> CAPS 200mg	3	
ALPHA LIPOIC ACID CAPS 50mg, 200mg, 300mg	3	
ALPHA-LIPOIC ACID TABS 100mg	3	
<i>alpha-lipoic acid (thioctic acid)</i> CAPS 100mg, 600mg; TABS 100mg	3	
<i>arginine</i> CAPS 500mg; TABS 500mg	3	
ARGININE PACK 500mg; TABS 500mg	3	
ARGININE2000 PACK 2000mg	3	
ARGININE CAP 500 MG CAPS 500mg	3	
<i>arthx ds</i>	3	
<i>azo d-mannose</i> CAPS 500mg	3	
BIO-FLAX CAPS 1000mg	3	
<i>bioginkgo 24/6</i> TABS 60mg	3	
<i>bl flax seed oil</i> CAPS 1000mg	3	
CHEW Q CHEW 30mg	3	

This document includes a list of drugs covered on our formulary as of July 1, 2024. You can find information on what the symbols and abbreviations on this table mean by going to page 7.

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
CHEW Q CHW 100MG	3	
CHEW Q CHW 600MG	3	
<i>cidaflex</i>	3	
<i>cidatine</i> TABS 500mg	3	
CO Q10 TABS 100mg	3	
CO Q-10 CAPS 300mg	3	
CO-ENZYME WAF Q10/E	3	
COENZYME Q10 CHEW 60mg; LIQD 30mg/5ml; TABS 25mg, 50mg, 200mg	3	
<i>coenzyme q10 (ubidecarenone)</i> CAPS 10mg, 30mg, 50mg, 60mg, 75mg, 100mg, 150mg, 200mg, 300mg, 400mg; TABS 25mg, 60mg	3	
COENZYME Q-10 CAPS 75mg	3	
COQ10/VIT E CAP 100-10	3	
COQ10/VIT E CAP 200-200	3	
COQ-10 TR CPCR 100mg	3	
COROMEGA EMU OMEGA 3	3	
COROMEGA MIS	3	
CRANBERRY (VACCINIUM MACR CAPS 400mg	3	
<i>cranberry (vaccinium macrocarpon)</i> CAPS 200mg, 250mg, 425mg	3	
<i>cvs glucose liquid shot</i>	3	
<i>cvs l-lysine</i> TABS 500mg	3	
<i>cvs natural fish oil</i>	3	

This document includes a list of drugs covered on our formulary as of July 1, 2024. You can find information on what the symbols and abbreviations on this table mean by going to page 7.

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
<i>cvs quality sleep</i> CAPS 10mg	3	
<i>cyto arg</i>	3	
CYTO-Q LIQD 80mg/10ml	3	
CYTO-Q MAX LIQD 100mg/ml	3	
D-MANNOSE CAPS 500mg	3	
DEXTROSE GRA ANHYDROU	3	
DIABETISWEET POW	3	
DL-METHIONIN POW	3	
<i>emulsified omega-3</i>	3	
<i>eql lutein</i> CAPS 20mg	3	
EQL OMEGA 3 CAP 1400MG	3	
<i>eql omega 3 fish oil</i>	3	
ESTROVEN TAB ENERGY	3	
FATIGUE REL TAB COMPLEX	3	
<i>fish oil adult gummies</i>	3	
FISH OIL CAP 150MG	3	
FISH OIL CAP 180MG	3	
FISH OIL CAP 183.33MG	3	
FISH OIL CAP 900MG	3	
FISH OIL CAP 1360MG	3	
FISH OIL CHW 875MG	3	
<i>fish oil maximum strength</i>	3	
<i>fish oil pearls</i>	3	

This document includes a list of drugs covered on our formulary as of July 1, 2024. You can find information on what the symbols and abbreviations on this table mean by going to page 7.



<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
FLAX SEED CAP 1300MG	3	
<i>*flaxseed (linseed) cap 1200 mg***</i>	3	
<i>*flaxseed (linseed) oral oil***</i>	3	
<i>*flaxseed (linseed) oral powder***</i>	3	
FLAXSEED OIL CAPS 1030mg	3	
<i>fp glucosamine</i>	3	
GINKGO BILOB TAB PLUS	3	
GINKGO BILOBA CAPS 30mg, 50mg, 100mg, 200mg; TABS 230mg	3	
<i>ginkgo biloba</i> CAPS 40mg, 60mg, 120mg, 500mg; TABS 120mg	3	
GINKGO PHYTOSOME CAPS 80mg	3	
GLUCOSAMINE CAP CHONDROI	3	
<i>*glucosamine-chondroitin-</i>	3	
GLUCOSE LIQ SHOT	3	
GLUTAMINE POW RAP RLS	3	
<i>glutamine powder</i>	3	
GNP FISH OIL CAP 840MG	3	
GOWEY TIN TINCTURE	3	
HM FISH OIL CAP 554MG	3	
<i>kp glucosamine chondroiti</i>	3	
<i>kp melatonin</i> TABS 3mg	3	
L-ARGININE TABS 1000mg	3	
L-ARGININE POW	3	

This document includes a list of drugs covered on our formulary as of July 1, 2024. You can find information on what the symbols and abbreviations on this table mean by going to page 7.

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
L-CARNITINE CAPS 250mg	3	
L-CYSTINE POW	3	
L-ISOLEUCINE POW	3	
L-TRYPTOPHAN TAB 500MG TABS 500mg	3	
L-TYROSINE POW	3	
L-VALINE POW	3	
LECITHIN GRA	3	
LIPOIC ACID CAPS 150mg	3	
LIQ-10 SYP	3	
LIQSORB LIQD 100mg/ml	3	
<i>lutein</i> CAPS 6mg	3	
<i>melatonin</i> CAPS 5mg; LIQD 1mg/ml; TABS 1mg, 5mg; TBDP 5mg	3	
MELATONIN LIQD 1mg/4ml; TABS 300mcg	3	
MELATONIN TAB 1-10MG	3	
MELATONIN TAB 3-10MG	3	
<i>melatonin tr</i> TBCR 10mg	3	
<i>melatonin-pyridoxine tab 3-10 mg</i>	3	
<i>melatonin-pyridoxine tab 5-10 mg</i>	3	
NAC CAPS 500mg	3	
<i>nac</i> CAPS 600mg	3	
NEOQ10 CAPS 125mg	3	
<i>*nutritional supplement liquid**</i>	3	

This document includes a list of drugs covered on our formulary as of July 1, 2024. You can find information on what the symbols and abbreviations on this table mean by going to page 7.

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
<i>odorless coated fish oil/</i>	3	
OMEGA POWER CAP 1050MG	3	
OMEGA-3 CAP 350MG	3	
OMEGA-3 CAP FISH OIL	3	
<i>omega-3 fatty acids</i> CAPS 500mg	3	
<i>*omega-3 fatty acids cap 435 mg**</i>	3	
OMEGA-3 IQ CHW 240MG	3	
OMEGAPURE CAP 780 EC	3	
<i>prasterone (dhea)</i> CAPS 25mg	3	
PRASTERONE (DHEA) CAP 25 CAPS 25mg	3	
PRO NUTRIENT CAP OMEGA3	3	
PROTO-CHOL CAP 1000MG CAPS 1000mg	3	
PURE L-CITRULLINE CAPS 600mg	3	
<i>px fish oil</i>	3	
Q-GEL CAPS 15mg	3	
<i>q-up</i> LIQD 30mg/5ml	3	
<i>qunol coq10/ubiquinol/meg</i> CAPS 100mg	3	
<i>ra ginkgo biloba</i> TABS 40mg	3	
<i>ra l-arginine</i> TABS 1000mg	3	
SALMON CAP 200MG	3	
<i>saw palmetto (serenoa repens)</i> CAPS 160mg, 450mg	3	
SAW PALMETTO CAP 450MG CAPS 450mg	3	
<i>sm flax seed oil</i> CAPS 1000mg	3	

This document includes a list of drugs covered on our formulary as of July 1, 2024. You can find information on what the symbols and abbreviations on this table mean by going to page 7.

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
<i>sm ginkgo biloba</i> TABS 60mg	3	
<i>sodium saccharin powder</i>	3	
SUPER TWIN CAP EPA/DHA	3	
<i>sv d-mannose</i> CAPS 500mg	3	
TRUEPLUS GEL GLUCOSE	3	
TRUEPLUS GLUCOSE CHEW 4gm	3	
<i>tryptophan</i> TABS 500mg	3	
ULTRA COQ10 CAPS 75mg	3	
<i>valine powder</i>	3	
VITALINE COQ10 TABS 60mg	3	
<b>VITAMINS</b>		
<i>a thru z advantage</i>	3	
<i>a thru z select</i>	3	
<i>a-10000</i> CAPS 10000unit	3	
A/BETA CAROT TAB 25000UNT	3	
ABC COMPLETE TAB WOMEN	3	
<i>abc-z -tr</i>	3	
<i>abdek</i>	3	
ABDEK CAP	3	
<i>abdek pediatric</i>	3	
ACEROLA C-500 WAFR 500mg	3	
ACTIFLOVIT TAB EAR HEAL	3	
ACTITROM CAP	3	
ACTIVE 55 LIQ PLUS	3	

This document includes a list of drugs covered on our formulary as of July 1, 2024. You can find information on what the symbols and abbreviations on this table mean by going to page 7.

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
ACTIVESSENT PAK	3	
ADEKS PEDIAT DRO	3	
ADLT ONE DLY CHW GUMMIES	3	
ADRENAL TAB CALM	3	
<i>50+ adult eye health</i>	3	
ADVANCED CA/ TAB D/MAGNES	3	
AIRBORNE LOZ	3	
ALIVE MULTI-VITAMIN CHILD	3	
ALLBEE-T TAB	3	
<i>alph-e-mixed CAPS 200unit</i>	3	
<i>alph-e-mixed 1000 CAPS 1000unit</i>	3	
AMINO-MIN-D CAP	3	
<i>animal chewable multiple</i>	3	
<i>animal chews</i>	3	
ANIMAL SHAPE CHW IRON	3	
<i>animal shapes plus extra</i>	3	
ANTIOXIDANT CAP	3	
ANTIOXIDANT CHW VITAMINS	3	
<i>antioxidant pack</i>	3	
APATATE LIQ	3	
APETEX ELX	3	
APETIGEN TAB PLUS	3	
APETIGEN-PLS SOL	3	

This document includes a list of drugs covered on our formulary as of July 1, 2024. You can find information on what the symbols and abbreviations on this table mean by going to page 7.

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
<i>apetonic</i>	3	
APPEAREX TABS 2.5mg	3	
AQUA-E LIQD 75unit/ml	3	
AQUASOL E SOLN 15unit/0.3ml	3	
AQUASOL E CAP 100IU CAPS 100iu	3	
AQUASOL E CAP 400IU CAPS 400iu	3	
<i>aquavit-e</i> SOLN 15unit/0.3ml	3	
ASCOCID POW	3	
ASCOCID-1000 TAB	3	
<i>ascorbic acid</i> CHEW 100mg, 250mg, 500mg; CPCR 500mg; LIQD 500mg/5ml; SYRP 500mg/5ml; TABS 100mg, 250mg, 500mg, 1000mg; TBCR 500mg, 1000mg, 1500mg	3	
<i>ascorbic acid oral crystals</i>	3	
AVAIL TAB	3	
<i>b12 fast dissolve</i> TBDP 5000mcg	3	
<i>b complete</i>	3	
B COMPLEX +C TAB TR	3	
<i>b complex maxi</i>	3	
B COMPLEX TAB FORM #1	3	
B COMPLEX/FO TAB	3	
B-1 TABS 500mg	3	
B-6 TABS 500mg	3	
B-12 CAPS 1000mcg; LOZG 1000mcg; TABS 2000mcg, 2500mcg	3	

This document includes a list of drugs covered on our formulary as of July 1, 2024. You can find information on what the symbols and abbreviations on this table mean by going to page 7.

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
B-12 DOTS TBDP 500mcg	3	
B-12 DUAL SPECTRUM TBCR 5000mcg	3	
B-12 QUICK DISSOLVE TBDP 5000mcg	3	
B-12 SUB 1000MCG	3	
B-12 SUPER STRENGTH LIQD 5000mcg/ml	3	
<i>b-12 tr</i> TBCR 2000mcg	3	
<i>b-100</i>	3	
B-100 COMPLX TAB	3	
<i>b-100 tr</i>	3	
<i>*b-complex vitamin cap**</i>	3	
<i>*b-complex vitamin elixir**</i>	3	
<i>*b-complex vitamin sublingual liquid**</i>	3	
<i>*b-complex w/ c &amp; e + zn tab***</i>	3	
<i>*b-complex w/ c cap**</i>	3	
<i>*b-complex w/ c tab er**</i>	3	
<i>*b-complex w/ c tab**</i>	3	
<i>*b-complex w/ folic acid tab**</i>	3	
<i>*b-complex w/ minerals ta</i>	3	
B-NATAL LOZG 25mg; LPOP 25mg	3	
BABY DDROPS LIQD 400ut/0.028ml	3	
<i>baby super daily d3</i> LIQD 400ut/0.028ml	3	
<i>baby vitamin</i>	3	
<i>baby vitamin/iron</i>	3	

This document includes a list of drugs covered on our formulary as of July 1, 2024. You can find information on what the symbols and abbreviations on this table mean by going to page 7.

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
BALANCE B-50 TAB	3	
BETA CAROTEN CAP 25000UNT	3	
<i>beta carotene</i> CAPS 25000unit	3	
BIO-D-MULSION LIQD 400unt/0.04ml	3	
BIO-D-MULSION FORTE LIQD 2000unt/0.04ml	3	
<i>*bioflavonoid products cap**</i>	3	
<i>*bioflavonoid products chew tab**</i>	3	
<i>*bioflavonoid products tab er**</i>	3	
<i>*bioflavonoid products tab**</i>	3	
BIOTIN CAPS 1mg	3	
<i>biotin</i> CAPS 10mg, 2500mcg, 5000mcg; TABS 300mcg, 1000mcg	3	
BIOTIN FORTE TAB	3	
BIOTIN FORTE TAB /ZINC	3	
BIOVOL SYP	3	
<i>bl brewers yeast</i>	3	
<i>bl niacin tr</i> TBCR 250mg	3	
<i>bl prenatal vitamins</i>	3	
BPROTECT PED DRO TRI-VITE	3	
C-BUFF POW	3	
CAL-CITRATE CAPS 150mg	3	
CALCI-MAX CAP	3	
<i>calcidol</i> SOLN 200mcg/ml	3	

This document includes a list of drugs covered on our formulary as of July 1, 2024. You can find information on what the symbols and abbreviations on this table mean by going to page 7.



<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
<i>calcium ascorbate</i> TABS 500mg	3	
<i>calcium citrate plus</i>	3	
<i>calcium pantothenate</i> TABS 500mg	3	
CARDIOTEK TAB	3	
CATEMINE TAB	3	
<i>centrum kids complete</i>	3	
CENTRUM SPEC PAK PRENATAL	3	
CHILDRENS CHW COMPLETE	3	
CHLORELLA CAP	3	
<i>cholecalciferol</i> CAPS 10000unit; CHEW 2000unit	3	
CHROMIUM PIC TAB 500MCG	3	
CL PRENATAL TAB 28-0.8MG	3	
<i>*cobalamin combination sl tab***</i>	3	
<i>*cobalamin combination tab***</i>	3	
COD LIVER OIL	3	
<i>*cod liver oil cap***</i>	3	
<i>*cod liver oil***</i>	3	
<i>complex b-100</i>	3	
CONCEPTIONXR MIS MOTILITY	3	
<i>crush vitamin c drops</i> LOZG 60mg	3	
CVS B12 CHEW 2500mcg	3	
<i>cvs b-12</i> LIQD 1000mcg/15ml; TBDP 1500mcg	3	

This document includes a list of drugs covered on our formulary as of July 1, 2024. You can find information on what the symbols and abbreviations on this table mean by going to page 7.

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
<i>cv</i> s <i>childrens vitamin d f</i> CHEW 400unit	3	
<i>cv</i> s <i>d3</i> CAPS 400unit, 1000unit, 2000unit, 5000unit; CHEW 1000unit	3	
<i>cv</i> s <i>e oil</i>	3	
<i>cv</i> s <i>niacin</i> TABS 100mg	3	
<i>cv</i> s <i>niacin flush free</i>	3	
CVS PRENATAL TAB 27-0.8MG	3	
<i>cyanocobalamin</i> LOZG 500mcg; SOLN 1000mcg/ml; SUBL 500mcg, 1000mcg, 2500mcg, 3000mcg, 5000mcg; TABS 50mcg, 100mcg, 250mcg, 500mcg, 1000mcg, 2000mcg; TBCR 1000mcg	3	
CYTO B2 POWD 343mg/gm	3	
D3 DOTS TBDP 2000unit	3	
<i>d3 maximum strength</i> LIQD 5000unit/ml	3	
<i>d3 vitamin</i> LIQD 400unit/ml	3	
<i>d3-50</i> CAPS 50000unit	3	
<i>d 400</i> TABS 400unit	3	
<i>d 1000</i> TABS 1000unit	3	
<i>d 2000</i> TABS 2000unit	3	
D-BIOTIN CAP 10MG CAPS 10mg	3	
D-VI-SOL LIQD 400unit/ml	3	
DAILY MULTI TAB VIT/IRON	3	
DDROPS LIQD 1000ut/0.028ml, 2000ut/0.028ml	3	
DECARA CAPS 25000unit	3	

This document includes a list of drugs covered on our formulary as of July 1, 2024. You can find information on what the symbols and abbreviations on this table mean by going to page 7.

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
DEKAS CAP ESSENTIA	3	
DEKAS LIQ ESSENTIA	3	
DEKAS PLUS LIQ	3	
<i>dialyvite 800</i>	3	
DIALYVITE WAF PLUS D	3	
DIALYVITE/ TAB ZINC	3	
DINO-LIFE CHW IRON-ZIN	3	
DRISDOL SOLN 8000unit/ml	3	
<i>dry e-synthetic</i> TABS 400unit	3	
E600 CAPS 600unit	3	
<i>endur-acin</i> TBCR 750mg	3	
<i>endur-amide</i> TBCR 500mg	3	
ENDUR-AMIDE TBCR 750mg	3	
ENDURACIN TAB 500MG SR TBCR 500mg	3	
ENFAMIL MIS EXPECTA	3	
<i>eql air protector</i>	3	
<i>eql b complex</i>	3	
<i>eql gummies childrens</i>	3	
<i>eql niacin flush free</i> CAPS 500mg	3	
<i>ergocalciferol</i> CAPS 50000unit	3	
ESTROFACTORS TAB	3	
EZFE FORTE CAP	3	
<i>fa-8</i> CAPS .8mg; TABS 800mcg	3	

This document includes a list of drugs covered on our formulary as of July 1, 2024. You can find information on what the symbols and abbreviations on this table mean by going to page 7.

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
FLINTSTONES CHW COMPLETE	3	
FLINTSTONES CHW TODDLER	3	
FOLGARD TAB	3	
FOLIC + B12 TAB	3	
<i>folic acid</i> CAPS 5mg; TABS 1mg, 400mcg	3	
FOLIC ACID CAPS 20mg	3	
FOLIC ACID TAB 400MCG	3	
FOLTABS 800	3	
FRUIT C CHW 200MG	3	
FV VITAMIN E TAB 200IU TABS 200iu	3	
GERIATRIC LIQ VITAMIN	3	
GERITOL LIQ TONIC	3	
GEVRABON LIQ	3	
GNP DAILY MIS PRENATAL	3	
<i>gnp niacin</i> TABS 250mg	3	
<i>gnp vitamin b1</i> TABS 100mg	3	
<i>gnp vitamin d super stren</i> TABS 5000unit	3	
HARD NAILS CAPS 2.5mg	3	
HCA NIACIN TAB 250MG TR	3	
HCA VIT B12 TAB 500MCG	3	
HCA VIT C CHW 250MG	3	
HCA VIT C CHW 500MG	3	
HONEY BEARS CHW	3	

This document includes a list of drugs covered on our formulary as of July 1, 2024. You can find information on what the symbols and abbreviations on this table mean by going to page 7.

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
<i>hydroxocobalamin acetate</i> SOLN 1000mcg/ml	3	
ICAPS LUTEIN TAB ZEAXANTH	3	
<i>immune system booster</i>	3	
<i>*iron w/ vitamin liq**</i>	3	
<i>k 100</i> TABS 100mcg	3	
KEY-E CHEW 400unit	3	
<i>kp folic acid</i> TABS 1mg	3	
<i>kp niacin</i> TABS 500mg	3	
<i>kp vitamin e</i> CAPS 100unit	3	
KPN PRENATAL TAB	3	
<i>lexinal</i> TABS 2.5mg	3	
LIQUI C LIQ 500/5ML LIQD 500mg/5ml	3	
<i>liqui-e</i> LIQD 400unit/15ml	3	
LIQUID C LIQ	3	
MEPHYTON TABS 5mg	3	
METHISCOL CAP	3	
<i>methylcobalamin</i> SUBL 1000mcg	3	
MIL-A-MULSIO EMU	3	
MTERYTI TAB	3	
MTERYTI TAB FOLIC 5	3	
<i>multi-delyn</i>	3	
MULTI-DELYN LIQ /IRON	3	
<i>*multiple vitamin cap**</i>	3	

This document includes a list of drugs covered on our formulary as of July 1, 2024. You can find information on what the symbols and abbreviations on this table mean by going to page 7.

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
<i>*multiple vitamin tab**</i>	3	
<i>*multiple vitamins w/ calcium tab**</i>	3	
<i>*multiple vitamins w/ min</i>	3	
<i>*multiple vitamins w/ minerals tab**</i>	3	
MVW COMPLETE DRO PEDIATRI	3	
NANOVM POW 1-3 YRS	3	
NASCOBAL SOLN 500mcg/0.1ml	3	
<i>nat-rul antioxidants c+e</i>	3	
NEPHRO-VITE TAB RX	3	
NEPHRONEX LIQ 0.9/5ML	3	
<i>nestrex TABS 25mg</i>	3	
<i>niacin CPCR 125mg, 250mg, 500mg; TABS 50mg; TBCR 1000mg</i>	3	
NIACIN FLUSH-FREE EXTRA S CAPS 750mg	3	
<i>niacin tab cr 500 mg TBCR 500mg</i>	3	
NIACIN TR TBCR 1000mg	3	
<i>niacinamide TABS 500mg</i>	3	
NIACINOL CAPS 500mg	3	
NICOBID CAP 125MG CR CPCR 125mg	3	
NICOBID CAP 250MG CR CPCR 250mg	3	
NICOBID CAP 500MG CR CPCR 500mg	3	
ONE A DAY CAP PRENATAL	3	
OPTIMAL D3 M CAPS 14000unit	3	

This document includes a list of drugs covered on our formulary as of July 1, 2024. You can find information on what the symbols and abbreviations on this table mean by going to page 7.

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
P D NATAL/FA TAB	3	
PALMITATE-A TABS 15000unit	3	
<i>*pediatric multiple vitam</i>	3	
<i>*pediatric multiple vitamin w/ minerals &amp; c chew tab 60 mg**</i>	3	
<i>*pediatric multiple vitamins w/ iron chew tab 12 mg**</i>	3	
<i>*pediatric multiple vitamins w/ iron chew tab**</i>	3	
<i>phytonadione SOLN 1mg/0.5ml, 10mg/ml; TABS 5mg</i>	3	
<i>poly-c</i>	3	
POLY-VI-SOL SOL 50MG/ML	3	
POLY-VI-SOL SOL IRON	3	
PRENAT MULTI CAP +DHA	3	
PRENATAL CAP FORMULA	3	
PRENATAL DHA PAK MULTI	3	
PRENATAL FRM TAB A-FREE	3	
PRENATAL GUM CHW 0.4-32.5	3	
PRENATAL TAB	3	
<i>pyridoxine hcl TABS 50mg, 100mg, 250mg</i>	3	
<i>qc b-complex + vitamin c</i>	3	
RA VITAMIN B-1 TABS 100mg	3	
RA VITAMIN B-12 LIQD 1000mcg/ml	3	
REPLESTA WAFR 50000unit	3	

This document includes a list of drugs covered on our formulary as of July 1, 2024. You can find information on what the symbols and abbreviations on this table mean by going to page 7.

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
REPLESTA CHILDRENS WAFR 14000unit	3	
<i>riboflavin</i> TABS 25mg, 50mg, 100mg	3	
RIBOFLAVIN TABS 400mg	3	
SCOOBY-DOO CHW	3	
SESAME ST CHW VITAMINS	3	
SLO-NIACIN TBCR 750mg	3	
SM B-COMPLEX TAB /VIT C	3	
<i>sm biotin</i> TABS 5000mcg	3	
SM VITAMIN D3 MAXIMUM STR CAPS 4000unit	3	
STRESS B CMP TAB /C TR	3	
STRESSCAPS CAP	3	
STUART ONE CAP	3	
SUPER DAILY D3 LIQD 1000unt/0.03ml	3	
SUPERIORSOURCE K1 TBDP 500mcg	3	
<i>th b complex/iron/vitamin</i>	3	
THER B COMPL TAB W/C	3	
THERA MULTI LIQ	3	
THERA-D 4000 TABS 4000unit	3	
THERANATAL CAP ONE	3	
THERANATAL MIS COMPLETE	3	
THERANATAL PAK OVAVITE	3	
<i>thiamine hcl</i> SOLN 100mg/ml; TABS 50mg, 100mg, 250mg, 500mg	3	

This document includes a list of drugs covered on our formulary as of July 1, 2024. You can find information on what the symbols and abbreviations on this table mean by going to page 7.



<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
TRI-VI-SOL SOL A/C/D	3	
UPSPRING BABY VITAMIN D LIQD 400ut/0.025ml	3	
VICKS VITAMIN C DROPS LOZG 60mg	3	
VIT C+ZINC TAB 15-60MG	3	
VITA-C CRY	3	
VITACRAVES CHW +OMEGA-3	3	
VITAMAX CHW	3	
<i>vitamin a</i> CAPS 8000iu; TABS 10000iu	3	
VITAMIN A CAP 8000UNIT	3	
VITAMIN B12 LIQD 3000mcg/ml	3	
VITAMIN B 12 LOZG 250mcg	3	
VITAMIN B-12 LOZG 50mcg	3	
VITAMIN B-12 SUB 1000MCG SUBL 1000mcg	3	
VITAMIN C SYRP 500mg/5ml; TABS 100mg	3	
VITAMIN C SOL	3	
VITAMIN D CAPS 400unit, 2000unit	3	
VITAMIN D2 TABS 400unit, 2000unit	3	
VITAMIN D3 LIQD 1000unit/spray, 1200unit/15ml; TABS 3000unit, 10000unit; TBDP 5000unit	3	
VITAMIN D3 IMMUNE HEALTH LIQD 25mcg/10ml	3	
<i>vitamin d3 ultra potency</i> TABS 1250mcg	3	

This document includes a list of drugs covered on our formulary as of July 1, 2024. You can find information on what the symbols and abbreviations on this table mean by going to page 7.

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
<i>vitamin e</i> CAPS 400iu; TABS 200iu	3	
VITAMIN E TABS 100unit	3	
<i>vitamin e-100</i> TABS 100unit	3	
VITAMIN K TABS 100mcg	3	
VITAMIN K2 TABS 40mcg	3	
<i>*vitamin mixture tab**</i>	3	
<i>*vitamins a &amp; d cap***</i>	3	
<i>*vitamins a &amp; d tab***</i>	3	
<i>*vitamins w/ lipotropics cap**</i>	3	
ZINC & C LOZ 20-120MG	3	

## **OPHTHALMIC**

### **ANTI-INFECTIVE/ANTI-INFLAMMATORY**

<i>bacitracin-polymyxin-neomycin-hc ophth oint 1%</i>	1	
<i>neo-polycin hc ophth oint 1%</i>	1	
<i>neomycin-polymyxin-dexamethasone ophth oint 0.1%</i>	1	
<i>neomycin-polymyxin-dexamethasone ophth susp 0.1%</i>	1	
<i>neomycin-polymyxin-hc ophth susp</i>	1	
<i>sulfacetamide sodium-prednisolone ophth soln 10-0.23(0.25)%</i>	1	
TOBRADEX OIN 0.3-0.1%	2	
TOBRADEX ST SUS 0.3-0.05	2	
<i>tobramycin-dexamethasone ophth susp 0.3-0.1%</i>	1	
ZYLET SUS 0.5-0.3%	2	

This document includes a list of drugs covered on our formulary as of July 1, 2024. You can find information on what the symbols and abbreviations on this table mean by going to page 7.

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
<b>ANTI-INFECTIVES</b>		
<i>bacitracin (ophthalmic) OINT 500unit/gm</i>	1	
<i>bacitracin-polymyxin b ophth oint</i>	1	
BESIVANCE SUSP .6%	2	
CILOXAN OINT .3%	2	
<i>ciprofloxacin hcl (ophth) SOLN .3%</i>	1	
<i>erythromycin (ophth) OINT 5mg/gm</i>	1	
<i>gatifloxacin (ophth) SOLN .5%</i>	1	
<i>gentamicin sulfate (ophth) SOLN .3%</i>	1	
<i>moxifloxacin hcl (ophth) SOLN .5%</i>	1	
NATACYN SUSP 5%	2	
<i>neo-polycin 5(3.5)mg-400unt-10000unt op oin</i>	1	
<i>neomycin-bacitrac zn-polymyx 5(3.5)mg-400unt-10000unt op oin</i>	1	
<i>neomycin-polymy-gramicid op sol 1.75-10000-0.025mg-unt-mg/ml</i>	1	
<i>ofloxacin (ophth) SOLN .3%</i>	1	
<i>polycin ophth oint</i>	1	
<i>polymyxin b-trimethoprim ophth soln 10000 unit/ml-0.1%</i>	1	
<i>sulfacetamide sodium (ophth) OINT 10%; SOLN 10%</i>	1	
<i>tobramycin (ophth) SOLN .3%</i>	1	
<i>trifluridine SOLN 1%</i>	1	
ZIRGAN GEL .15%	2	

This document includes a list of drugs covered on our formulary as of July 1, 2024. You can find information on what the symbols and abbreviations on this table mean by going to page 7.

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
<b>ANTI-INFLAMMATORIES</b>		
ALREX SUSP .2%	2	
<i>bromfenac sodium (ophth)</i> SOLN .07%, .075%	1	
BROMSITE SOLN .075%	2	
<i>dexamethasone sodium phosphate (ophth)</i> SOLN .1%	1	
<i>diclofenac sodium (ophth)</i> SOLN .1%	1	
EYSUVIS SUSP .25%	2	
FLAREX SUSP .1%	2	
<i>fluorometholone (ophth)</i> SUSP .1%	1	
<i>flurbiprofen sodium</i> SOLN .03%	1	
<i>ketorolac tromethamine (ophth)</i> SOLN .4%, .5%	1	
LOTEMAX OINT .5%	2	
<i>loteprednol etabonate</i> SUSP .2%	1	
<i>prednisolone acetate (ophth)</i> SUSP 1%	1	
PREDNISOLONE SODIUM PHOSP SOLN 1%	2	
PROLENSA SOLN .07%	2	
<b>ANTIALLERGICS</b>		
<i>alaway</i> SOLN .035%	3	
<i>altazine moisture relief</i> SOLN .05%	3	
<i>azelastine hcl (ophth)</i> SOLN .05%	1	
<i>cromolyn sodium (ophth)</i> SOLN 4%	1	
<i>cvs olopatadine hydrochlo</i> SOLN .2%	3	
<i>eye allergy itch relief</i> SOLN .2%	3	

This document includes a list of drugs covered on our formulary as of July 1, 2024. You can find information on what the symbols and abbreviations on this table mean by going to page 7.

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
<i>eye allergy itch/redness</i> SOLN .1%	3	
<i>gnp olopatadine hydrochlo</i> SOLN .1%, .2%	3	
<i>hm eye allergy itch/redne</i> SOLN .1%	3	
NAPHCAN-A SOL OP	3	
<i>olopatadine hcl</i> SOLN .1%, .2%	3	
OPCON-A SOL OP	3	
PATADAY SOLN .1%, .2%	3	
PATADAY EXTRA STRENGTH SOLN .7%	3	
<i>tgt eye allergy relief</i>	3	
VISINE SOLN .05%	3	
ZERVIAE SOLN .24%	2	
<b>ANTIGLAUCOMA</b>		
<i>betaxolol hcl (ophth)</i> SOLN .5%	1	
BETOPTIC-S SUSP .25%	2	
<i>brimonidine tartrate</i> SOLN .15%, .2%	1	
<i>brinzolamide</i> SUSP 1%	1	
<i>carteolol hcl (ophth)</i> SOLN 1%	1	
COMBIGAN SOL 0.2/0.5%	2	
<i>dorzolamide hcl</i> SOLN 2%	1	
<i>dorzolamide hcl-timolol maleate ophth soln</i> 2-0.5%	1	
<i>latanoprost</i> SOLN .005%	1	
<i>levobunolol hcl</i> SOLN .5%	1	
LUMIGAN SOLN .01%	2	

This document includes a list of drugs covered on our formulary as of July 1, 2024. You can find information on what the symbols and abbreviations on this table mean by going to page 7.

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
<i>pilocarpine hcl</i> SOLN 1%, 2%, 4%	1	
RHOPRESSA SOLN .02%	2	
ROCKLATAN DRO	2	
SIMBRINZA SUS 1-0.2%	2	
<i>timolol maleate (ophth)</i> SOLG .25%, .5%; SOLN .25%, .5%	1	
VYZULTA SOLN .024%	2	
<b>MISCELLANEOUS</b>		
<i>adsorbonac</i> SOLN 5%	3	
<i>ak-rinse</i>	3	
AKWA TEARS OIN OP	3	
ALCON SALINE SOL SEN EYES	3	
<i>altalube</i>	3	
<i>20/20 artificial tears</i>	3	
<i>artificial tears</i> SOLN 1.4%	3	
ATROPINE SULFATE SOLN 1%	2	
<i>atropine sulfite (ophthalmic)</i> SOLN 1%	1	
<i>biolle gel tears</i> GEL 1%	3	
<i>biolle tears</i> SOLN .5%	3	
BLINK TEARS LUBRICATING E SOLN .25%	3	
COLLYRIUM SOL OP	3	
<i>cvs gentle lubricant eye</i> SOLN .3%	3	
<i>cvs lubricant eye drops</i> SOLN .5%	3	
<i>cvs lubricant gel drops</i> GEL 1%	3	

This document includes a list of drugs covered on our formulary as of July 1, 2024. You can find information on what the symbols and abbreviations on this table mean by going to page 7.

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
CYSTADROPS SOLN .37%	2	NM, LA, PA
CYSTARAN SOLN .44%	2	NM, LA, PA
DAKRINA SOL 2.7-2%	3	
<i>eq artificial tears</i>	3	
<i>eq lubricant eye drops hi</i>	3	
EYE STREAM SOL OP	3	
GENTEAL GEL	3	
GENTEAL MILD TO MODERATE SOLN .3%	3	
GENTEAL SEVERE GEL .3%	3	
GENTEAL TEAR SOL MOD PF	3	
GONAK SOLN 2.5%	3	
<i>gonioscopic prism SOLN 2.5%</i>	3	
<i>goodsense lubricant eye d</i>	3	
HCA TEARS SOL PLUS	3	
ISOPTO TEARS SOLN .5%	3	
LIQUIFILM TEARS SOLN 1.4%	3	
<i>lubricant eye drops SOLN .6%</i>	3	
<i>lubricant eye drops/dual-</i>	3	
LUBRICNT GEL DRO 0.25-0.3	3	
MIEBO SOLN 1.338gm/ml	2	
MOISTURE EYE DRO	3	
<i>moisturizing lubricant ey SOLN .25%</i>	3	
MURO 128 OINT 5%; SOLN 2%, 5%	3	

This document includes a list of drugs covered on our formulary as of July 1, 2024. You can find information on what the symbols and abbreviations on this table mean by going to page 7.

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
<i>optics mini drops</i>	3	
<i>proparacaine hcl SOLN .5%</i>	1	
<i>ra cleaning/disinfecting SOLN 3%</i>	3	
REFRESH DRO OP	3	
REFRESH GEL OPTIVE	3	
REFRESH LIQUIGEL GEL 1%	3	
REFRESH OPTI DRO 0.5-0.9%	3	
REFRESH PLUS SOLN .5%	3	
REFRESH SOL OPTIVE	3	
RESTASIS EMUL .05%	2	
RESTASIS MULTIDOSE EMUL .05%	2	
RETAIN E HPMC SOLN .3%	3	
RETAIN E MGD EMU 0.5-0.5%	3	
<i>sodium chloride hypertonic OINT 5%</i>	3	
STERILE LUBRICANT DROPS LIQD .7%	3	
SYSTANE BALANCE RESTORATI SOLN .6%	3	
SYSTANE FREE GEL	3	
SYSTANE PF SOL	3	
TEARS NATURA OIN PM	3	
THERATEARS GEL 1%; SOLN .25%	3	
TYRVAYA SOLN .03mg/act	2	
VISINE PURE DRO TEARS	3	
VISINE TIRED EYE RELIEF SOLN 1%	3	

This document includes a list of drugs covered on our formulary as of July 1, 2024. You can find information on what the symbols and abbreviations on this table mean by going to page 7.



<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
XIIDRA SOLN 5%	2	

## **OTIC**

### **OTIC AGENTS**

<i>acetic acid (otic)</i> SOLN 2%	1	
<i>ciprofloxacin-dexamethasone otic susp 0.3-0.1%</i>	1	
<i>flac</i> OIL .01%	1	
<i>fluocinolone acetonide (otic)</i> OIL .01%	1	
<i>neomycin-polymyxin-hc otic soln 1%</i>	1	
<i>neomycin-polymyxin-hc otic susp 3.5 mg/ml-10000 unit/ml-1%</i>	1	
<i>ofloxacin (otic)</i> SOLN .3%	1	

## **RESPIRATORY**

### **ANTICHOLINERGIC/BETA AGONIST COMBINATIONS**

ANORO ELLIPT AER 62.5-25	2	QL (60 blisters / 30 days)
BEVESPI AER 9-4.8MCG	2	QL (1 inhaler / 30 days)
BREZTRI AERO AER SPHERE	2	QL (1 inhaler / 30 days)
BREZTRI AERO AER SPHERE (INSTITUTIONAL PACK)	2	QL (4 inhalers / 28 days)
COMBIVENT AER 20-100	2	QL (2 inhalers / 30 days)
<i>ipratropium-albuterol nebu soln 0.5-2.5(3) mg/3ml</i>	1	B/D
TRELEGY AER ELLIPTA 100-62.5-25 MCG	2	QL (60 blisters / 30 days)
TRELEGY AER ELLIPTA 200-62.5-25 MCG	2	QL (60 blisters / 30 days)

Drug Name	Drug Tier	Requirements/Limits
<b>ANTICHOLINERGICS</b>		
ATROVENT HFA AERS 17mcg/act	2	QL (2 inhalers / 30 days)
INCRUSE ELLIPTA AEPB 62.5mcg/inh	2	QL (30 blisters / 30 days)
<i>ipratropium bromide</i> SOLN .02%	1	B/D
<i>ipratropium bromide (nasal)</i> SOLN .03%, .06%	1	
<b>ANTI HISTAMINES</b>		
AHIST TABS 25mg	3	
ALA-HIST IR TABS 2mg	3	
<i>alavert</i> TABS 10mg; TBDP 10mg	3	
ALAVERT SYP	3	
<i>aler-cap</i> CAPS 25mg; TABS 25mg	3	
<i>all day allergy childrens</i> CHEW 5mg, 10mg	3	
<i>aller-chlor</i> SYRP 2mg/5ml; TABS 4mg	3	
<i>aller-ease</i> TABS 60mg	3	
<i>aller-ease childrens</i> SUSP 30mg/5ml	3	
<i>allergy</i> TBCR 12mg	3	
<i>allergy childrens</i> SOLN 5mg/5ml	3	
<i>allergy rapid melts child</i> CHEW 12.5mg	3	
<i>azelastine hcl</i> SOLN .1%	1	
<i>banophen</i> CAPS 50mg	3	
BENADRYL ALLERGY CHEW 12.5mg	3	
BENADRYL CAP 25MG CAPS 25mg	3	
BENADRYL TAB 25MG TABS 25mg	3	

This document includes a list of drugs covered on our formulary as of July 1, 2024. You can find information on what the symbols and abbreviations on this table mean by going to page 7.

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
<i>cetirizine hcl</i> SOLN 5mg/5ml	1	QL (300 mL / 30 days)
CHLOR-TRIMETON SYRP 2mg/5ml; TABS 4mg	3	
CHLOR-TRIMETON REPETABS TBCR 12mg	3	
CLARITIN CAPS 10mg	3	
<i>cyproheptadine hcl</i> SYRP 2mg/5ml; TABS 4mg	2	PA; PA if 70 years and older
<i>diphenhydramine hcl</i> SOLN 50mg/ml	1	
DIPHENHYDRAMINE HYDROCHLO LIQD 6.25mg/ml	3	
ED CHLORPED LIQD 2mg/ml	3	
<i>goodsense all day allergy</i> SOLN 5mg/5ml; TABS 10mg	3	
HISTEX CHEW 1.25mg; SYRP 2.5mg/5ml	3	
HISTEX PD LIQD .938mg/ml	3	
HISTEX PDX LIQD 1.25mg/ml	3	
<i>24hr allergy relief</i> TABS 180mg	3	
<i>hydroxyzine hcl</i> SOLN 25mg/ml, 50mg/ml; SYRP 10mg/5ml; TABS 10mg, 25mg, 50mg	2	PA; PA if 70 years and older
<i>hydroxyzine pamoate</i> CAPS 25mg, 50mg	2	PA; PA if 70 years and older
KC ALLERGY LIQ RELIEF	3	
<i>kp cetirizine hcl</i> TABS 5mg	3	
<i>levocetirizine dihydrochloride</i> SOLN 2.5mg/5ml	1	QL (300 mL / 30 days)
<i>levocetirizine dihydrochloride</i> TABS 5mg	1	QL (30 tabs / 30 days)
<i>loratadine</i> CAPS 10mg	3	

This document includes a list of drugs covered on our formulary as of July 1, 2024. You can find information on what the symbols and abbreviations on this table mean by going to page 7.

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
<i>m-hist pd</i> LIQD .625mg/ml	3	
PEDIAVENT CHEW 1mg; SYRP 2mg/5ml	3	
<i>ra allergy</i> LIQD 12.5mg/5ml	3	
<i>sm allergy relief</i> TABS 1.34mg	3	
TAVIST ALLERGY TABS 1.34mg	3	
TRIPROLIDINE HYDROCHLORID LIQD .313mg/ml	3	
VANACLEAR PD LIQD .313mg/ml	3	
VANAHIST PD LIQD .625mg/ml	3	
VANAMINE PD LIQD 6.25mg/ml	3	
ZYRTEC CHILDRENS ALLERGY SOLN 1mg/ml	3	

### **BETA AGONISTS**

<i>albuterol sulfate</i> AERS 108mcg/act	1	QL (2 inhalers / 30 days); (generic of Proair HFA)
<i>albuterol sulfate</i> AERS 108mcg/act	1	QL (2 inhalers / 30 days); (generic of Proventil HFA)
<i>albuterol sulfate</i> AERS 108mcg/act	1	QL (2 inhalers / 30 days); (generic of Ventolin HFA)
<i>albuterol sulfate</i> NEBU .083%, .63mg/3ml, 1.25mg/3ml, 2.5mg/0.5ml	1	B/D
<i>albuterol sulfate</i> SYRP 2mg/5ml; TABS 2mg, 4mg	1	
<i>levalbuterol hcl</i> NEBU .31mg/3ml, .63mg/3ml, 1.25mg/0.5ml, 1.25mg/3ml	1	B/D
<i>levalbuterol tartrate</i> AERO 45mcg/act	1	QL (2 inhalers / 30 days), ST

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
SEREVENT DISKUS AEPB 50mcg/dose	2	QL (60 inhalations / 30 days)
<i>terbutaline sulfate</i> TABS 2.5mg, 5mg	1	
VENTOLIN HFA AERS 108mcg/act	2	QL (2 inhalers / 30 days)
VENTOLIN HFA (INSTITUTIONAL PACK) AERS 108mcg/act	2	QL (6 inhalers / 30 days)
<b><i>COUGH AND COLD</i></b>		
<i>a.r.m.</i>	3	
<i>aceta-gesic</i>	3	
<i>acetadryl</i>	3	
<i>acta-tabs pe</i>	3	
ACTICON SOL 1-30	3	
ACTICON TAB 2-60MG	3	
ACTIDOGESIC TAB 1-500MG	3	
<i>actifed cold/sinus</i>	3	
ACTINEL LIQ	3	
ACTINEL LIQ PEDIATRI	3	
ADULT DISPOS MIS MOUTHPIE	3	
ADVIL COLD/ TAB SINUS	3	
<i>af-dibromm</i>	3	
<i>af-dibromm dm</i>	3	
<i>af-ibup sinus</i>	3	
<i>af-pseudoephedrine hcl</i> TABS 30mg	3	
<i>af-tussin dm</i>	3	

This document includes a list of drugs covered on our formulary as of July 1, 2024. You can find information on what the symbols and abbreviations on this table mean by going to page 7.

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
AFRIN SPR 0.05% SOLN .05%	3	
AIRZONE PEAK MIS FLOW MTR	3	
ALA-HIST PE TAB 2-10MG	3	
ALAHIST CF TAB 10-2-20	3	
ALAHIST DM LIQ 7.5-2-15	3	
<i>alavert allergy/sinus</i>	3	
ALEVE COLD & TAB SINUS	3	
<i>alka-seltzer plus night c</i>	3	
ALKA-SELTZER TAB PLS COLD	3	
<i>all day allergy d-12</i>	3	
<i>all day pain relief sinus</i>	3	
<i>all-nite multi-symptom co</i>	3	
<i>allerest</i>	3	
<i>allergy multi-symptom</i>	3	
<i>allergy multi-symptom nig</i>	3	
ALLERGY/SINU TAB HEADACHE	3	
ALLFEN TABS 400mg	3	
<i>allfen dm</i>	3	
ALOE VESTA LIQ WHIRLBTH	3	
<i>altarussin SYRP 100mg/5ml</i>	3	
<i>altarussin dm</i>	3	
<i>ambi 10peh/400gfn</i>	3	
<i>ambi 10peh/400gfn/20dm</i>	3	

This document includes a list of drugs covered on our formulary as of July 1, 2024. You can find information on what the symbols and abbreviations on this table mean by going to page 7.

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
<i>ambi 12.5cpd/1dcpm/30pse</i>	3	
<i>ambi 40pse/400gfn</i>	3	
AMBI 60PSE/ TAB 400GFN	3	
<i>ambitussin ac</i>	3	
ANTI HIST NAS TAB DECONGES	3	
ANTITUSS CG/ SYP CODEINE	3	
AP-HIST DM LIQ 7.5-4-15	3	
AQUANAZ TAB	3	
BENADRYL TAB ALL/COLD	3	
BENYLIN SYP 15MG/5ML SYRP 15mg/5ml	3	
BENYLIN-DME LIQ	3	
BENZEDREX INH	3	
<i>benzonatate CAPS 100mg, 200mg</i>	3	
<i>bidex TABS 400mg</i>	3	
<i>bio t pres</i>	3	
<i>biofed LIQD 30mg/5ml</i>	3	
BROHIST D TAB 4-10MG	3	
<i>bromfed dm</i>	3	
<i>broncho saline AERS .9%</i>	3	
BROTAPP DM LIQ 15-1-5/5	3	
<i>*camphor-eucalyptus-menthol - oint***</i>	3	
CAPMIST DM TAB	3	
CAPRON DM LIQ	3	

This document includes a list of drugs covered on our formulary as of July 1, 2024. You can find information on what the symbols and abbreviations on this table mean by going to page 7.

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
CAPRON DMT TAB 30-30MG	3	
CARBAPHEN CH SUS	3	
<i>chest congestion &amp; pain r</i>	3	
<i>chest congestion relief d</i>	3	
<i>childrens plus multi-symp</i>	3	
<i>childrens pseuphedrin LIQD 15mg/5ml</i>	3	
CHILDRENS SUS PLUS CLD	3	
<i>childs allergy cold/cough</i>	3	
CHLO HIST SOL	3	
CHLO TUSS LIQ	3	
CLEAN START TAB VAPORIZE	3	
CLEAR COUGH LIQ PM	3	
CLOFERA LIQ	3	
CNTC CLD/FLU TAB DAY/NGHT	3	
<i>codar gf</i>	3	
CODITUSSIN LIQ AC	3	
CODITUSSIN LIQ DAC	3	
<i>666 cold</i>	3	
<i>cold &amp; flu relief nightti</i>	3	
<i>cold head congestion day/</i>	3	
<i>cold head congestion dayt</i>	3	
<i>666 cold preparation</i>	3	
<i>cold relief plus</i>	3	

This document includes a list of drugs covered on our formulary as of July 1, 2024. You can find information on what the symbols and abbreviations on this table mean by going to page 7.



<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
COMTrex CLD/ PAK CGH D/NT	3	
COMTrex COLD TAB & COUGH	3	
<i>comtrex severe cold &amp; sin</i>	3	
<i>contac cold+flu maximum s</i>	3	
<i>contac-d TABS 10mg</i>	3	
<i>corfen-dm</i>	3	
CORICIDN HBP TAB 2-325MG	3	
CORICIDN HBP TAB CGH&COLD	3	
<i>cough &amp; chest congestion</i>	3	
<i>cough &amp; cold</i>	3	
<i>cough cold &amp; sore throat</i>	3	
<i>cough suppressant long-ac SYRP 15mg/5ml</i>	3	
<i>coughtab TABS 200mg</i>	3	
<i>cvs allergy relief d</i>	3	
CVS CHEST CONGESTION CHIL PACK 100mg	3	
<i>cvs chest congestion plus</i>	3	
<i>cvs chest rub medicated</i>	3	
<i>cvs cold &amp; cough children</i>	3	
<i>cvs cold &amp; cough nighttim</i>	3	
<i>cvs cold &amp; flu bp</i>	3	
<i>cvs cold &amp; sinus multi-sy</i>	3	
<i>cvs flu &amp; severe cold nig</i>	3	

This document includes a list of drugs covered on our formulary as of July 1, 2024. You can find information on what the symbols and abbreviations on this table mean by going to page 7.

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
<i>cvs nighttime cough</i>	3	
<i>cvs stuffy nose &amp; cold ch</i>	3	
DAY TIME CAP COLD/FLU	3	
<i>daytime multi-symptom col</i>	3	
DECONEX DMX TAB	3	
DECONEX IR TAB 10-385MG	3	
DELSYM SUER 30mg/5ml	3	
<i>despec</i>	3	
<i>dexbrompheniramine-phenylephrine tab 2-10 mg</i>	3	
<i>dextromethorphan hbr SYRP 10mg/5ml</i>	3	
<i>dextromethorphan-guaifene</i>	3	
<i>dextromethorphan-guaifenesin syrup 10-100 mg/5ml</i>	3	
DIABETIC TUS LIQ DM	3	
DIABETIC TUS LIQ EX	3	
DIABETIC TUS LIQ MAX STR	3	
DIMETAPP CLD ELX /ALLERGY	3	
DIMETAPP ELX 1-15/5ML	3	
DIMETAPP LIQ CHILD	3	
DOLOGEN TAB	3	
DORCOL LIQ DECONGES LIQD 15mg/5ml	3	
<i>doxylamine-phenylephrine tab 7.5-10 mg</i>	3	
DURAFLU TAB	3	

This document includes a list of drugs covered on our formulary as of July 1, 2024. You can find information on what the symbols and abbreviations on this table mean by going to page 7.

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
DURAVENT DM TAB	3	
ED A-HIST DM TAB 10-4-10	3	
ED A-HIST LIQ 4-10/5ML	3	
ED BRON GP LIQ	3	
ED CHLORPED DRO D	3	
<i>eq cold &amp; cough dm child</i>	3	
<i>eq tussin dm cough/chest</i>	3	
<i>eq flu &amp; severe cold mul</i>	3	
<i>eq tussin dm cough/chest</i>	3	
EXCEDRIN SIN TAB HEADACHE	3	
FLOWTUSS SOL 2.5-200	3	
FLU & SORE POW THROAT	3	
<i>geri-tussin dm</i>	3	
GLEN PE LIQ	3	
GLENAX PEB LIQ	3	
GLENTUSS LIQ	3	
GLUCOSSIN-DM LIQD 15mg/5ml	3	
<i>gnp allergy &amp; congestion</i>	3	
<i>gnp allergy plus sinus he</i>	3	
<i>gnp allergy sinus pe day</i>	3	
<i>goodsense cold &amp; head con</i>	3	
<i>goodsense cough dm SUER 30mg/5ml</i>	3	
<i>goodsense day time cold &amp;</i>	3	

This document includes a list of drugs covered on our formulary as of July 1, 2024. You can find information on what the symbols and abbreviations on this table mean by going to page 7.

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
<i>goodsense nighttime cold</i>	3	
<i>guaicon dms</i>	3	
<i>guaifenesin liquid 100 mg LIQD</i> 100mg/5ml	3	
GUAIFENESIN TAB 200 MG TABS 200mg	3	
HCA SUPHEDRI TAB PLUS	3	
HCA TUSSIN LIQ CF	3	
HISTAGESIC TAB	3	
HISTEX-AC SYP	3	
HISTEX-DM SYP	3	
HISTEX-PE SYP 2.5-10/5	3	
<i>hm severe cold cough &amp; fl</i>	3	
<i>hm severe cold/cough/flu</i>	3	
<i>12 hour cold</i> TB12 120mg	3	
HUMIBID CS TAB 20-400MG	3	
HUMIBID MAXIMUM STRENGTH TB12 1200mg	3	
HYCOFENIX SOL	3	
HYDROC/GUAIF SOL 2.5-200	3	
<i>hydrocodone bitart-homatropine</i> <i>methylbrom soln 5-1.5 mg/5ml</i>	3	
<i>hydrocodone w/ homatropine syrup 5-1.5</i> <i>mg/5ml</i>	3	
<i>hydromet</i>	3	
LODRANE D CAP 4-60MG	3	

This document includes a list of drugs covered on our formulary as of July 1, 2024. You can find information on what the symbols and abbreviations on this table mean by going to page 7.

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
LOHIST-DM SYP 5-2-10MG	3	
<i>lohist-peb</i>	3	
LORTUSS DM LIQ	3	
LORTUSS EX LIQ	3	
LORTUSS LQ LIQ	3	
3M AIR WARM MIS MASK	3	
M-CLEAR WC LIQ 100-6.33	3	
M-END DMX LIQ	3	
M-END PE LIQ	3	
<i>m-end wc</i>	3	
MAPAP SINUS TAB PE	3	
MAR-COF BP LIQ 30-2-7.5	3	
MAR-COF CG LIQ 225-7.5	3	
MAXIPHEN DM TAB	3	
<i>medi-tussin dm</i>	3	
MEDICATED OIN RUB	3	
MEDIFIN PE TAB 10-400MG	3	
MICROSPACER MIS	3	
MS COLD MIS DAY/NITE	3	
MUCINEX TB12 600mg	3	
MUCINEX CAP DAY/NGHT	3	
MUCINEX CAP FAST-MAX	3	
MUCINEX CGH GRA 5-100MG	3	

This document includes a list of drugs covered on our formulary as of July 1, 2024. You can find information on what the symbols and abbreviations on this table mean by going to page 7.

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
MUCINEX CHLD LIQ MULTISYM	3	
MUCINEX COLD LIQ /KIDS	3	
MUCINEX COLD LIQ CHILD	3	
MUCINEX COLD LIQ SINUS	3	
MUCINEX D TAB 60-600MG	3	
MUCINEX D/N PAK FAST/MAX	3	
MUCINEX FAST MIS DAY/NGHT	3	
MUCINEX FAST TAB 5-10-200	3	
<i>mucinex fast-max day time</i>	3	
<i>mucinex sinus-max day/nig</i>	3	
<i>mucus congestion &amp; cough</i>	3	
<i>mucus relief dm</i>	3	
<i>mucus relief dm maximum s</i>	3	
NASAL DECONGESTANT LIQD 30mg/5ml; SYRP 30mg/5ml	3	
NASOPEN PE LIQ	3	
NEO-SYNEPHRINE SOLN 1%	3	
NEXAFED SINS TAB + PAIN	3	
NIGHT TIME CAP COLD/FLU	3	
<i>nighttime cold &amp; flu</i>	3	
<i>nighttime sinus &amp; congest</i>	3	
NINJACOF LIQ	3	
NINJACOF-A LIQ	3	
NINJACOF-XG LIQ 200-8/5	3	

This document includes a list of drugs covered on our formulary as of July 1, 2024. You can find information on what the symbols and abbreviations on this table mean by going to page 7.

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
NIVANEX DMX TAB	3	
<i>non-asa severe allergy</i>	3	
NYQUIL COUGH LIQ 6.25-15	3	
NYQUIL SINEX CAP NT RELF	3	
OBREDON SOL 2.5-200	3	
<i>oxymetazoline hcl SOLN .05%</i>	3	
PEDIACARE INFANT SOLN 7.5mg/0.8ml	3	
PEDIACARE LIQ CGH/COLD	3	
PEDIATRIC MIS MASK	3	
PERCOGESIC TAB 12.5-325	3	
PHANATUSS SYP	3	
<i>phenylephrine w/ dm-gg liqd 10-18-200 mg/15ml</i>	3	
<i>phenylephrine w/ dm-gg syrup 5-10-100 mg/5ml</i>	3	
<i>phenylephrine w/ dm-gg tab 10-17.5-385 mg</i>	3	
POLY HIST TAB 7.5-10MG	3	
POLY-HIST DM LIQ 5-25-10	3	
POLY-HIST PD LIQ	3	
POLY-TUSSIN LIQ 10-4-10	3	
POLY-VENT DM TAB	3	
POLY-VENT IR TAB 60-380MG	3	
PRO-RED AC SYP 5-1-9/5	3	
<i>promethazine vc/codeine</i>	3	

This document includes a list of drugs covered on our formulary as of July 1, 2024. You can find information on what the symbols and abbreviations on this table mean by going to page 7.

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
<i>promethazine w/ codeine syrup 6.25-10 mg/5ml</i>	3	
<i>promethazine-dm syrup 6.25-15 mg/5ml</i>	3	
<i>promethazine-phenylephrine-codeine syrup 6.25-5-10 mg/5ml</i>	3	
<i>pseudoeph-chlorphen w/ hydrocodone soln 60-4-5 mg/5ml</i>	3	
<i>pseudoephed-bromphen-dm syrup 30-2-10 mg/5ml</i>	3	
<i>pseudoephedrine hcl SOLN 7.5mg/0.8ml; SYRP 30mg/5ml; TABS 60mg</i>	3	
PYRILAMIN/PE TAB 25-10MG	3	
<i>q-tussin dm</i>	3	
<i>ra day/night maximum stre</i>	3	
<i>ra severe cold/night time</i>	3	
<i>ra tussin cough dm sugar</i>	3	
REFENESEN TAB CHST CNG	3	
<i>relcof c</i>	3	
RESCON TAB 2-60MG	3	
RESCON-DM SYP	3	
RESPAIRE-30 CAP	3	
<i>robafen dm clear</i>	3	
<i>robafen dm cough clear</i>	3	
ROBITUSSIN COUGHGELS CAPS 15mg	3	
ROBITUSSIN LIQ CGH/CLD	3	

This document includes a list of drugs covered on our formulary as of July 1, 2024. You can find information on what the symbols and abbreviations on this table mean by going to page 7.



<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
ROBITUSSIN SYP 100/5ML SYRP 100mg/5ml	3	
RYDEX LIQ	3	
RYMED TAB 2-10MG	3	
<i>sb cough control</i> CAPS 15mg	3	
<i>sb cough control cf</i>	3	
<i>sb cough relief</i> LIQD 15mg/5ml	3	
<i>siltussin-dm</i>	3	
SINUS RELIEF TAB DAY/NGHT	3	
<i>sm tussin dm</i>	3	
<i>sm tussin dm cough/chest</i>	3	
STAHIST AD LIQ	3	
STAHIST AD TAB 25-60MG	3	
SUDAFED PE MAXIMUM STRENG TABS 10mg	3	
SUDAFED PE PAK COLD	3	
SUDAFED SINUS CONGESTION TABS 30mg	3	
SUDAFED TAB 60MG TABS 60mg	3	
TESSALON PERLES CAPS 100mg	3	
<i>tg 10peh/380gfn/15dm</i>	3	
<i>tgt cough formula dm max</i>	3	
<i>th cold &amp; allergy</i>	3	
THERAFLU PAK SEV COLD	3	
THERAFLU SEV POW COLD/CGH	3	

This document includes a list of drugs covered on our formulary as of July 1, 2024. You can find information on what the symbols and abbreviations on this table mean by going to page 7.

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
TRIAMINIC NT LIQ COLD/CGH	3	
TRIAMINIC SOL COLD/CGH	3	
TRIAMINIC SYP CLD/ALRG	3	
TRIAMINIC SYP COLD/CGH	3	
<i>triprolidine &amp; pseudoephedrine tab 2.5-60 mg</i>	3	
<i>trymine cg</i>	3	
TUSNEL C SYP	3	
TUSNEL PED DRO 7.5-50	3	
TUSNEL TAB	3	
TUSNEL-DM DRO PEDIATRC	3	
<i>tussin dm</i>	3	
TYL ALLERGY TAB SINUS	3	
TYLENOL ALLE TAB MULTI-SY	3	
TYLENOL CHLD SUS COLD FLU	3	
TYLENOL COLD LIQ MAX	3	
TYLENOL COLD LIQ MULTI-S	3	
TYLENOL COLD LIQ MULTI-SY	3	
TYLENOL COLD TAB HEAD CON	3	
TYLENOL COLD TAB RELIEF	3	
TYLENOL SINU PAK CNG/PAIN	3	
TYLENOL TAB CLD/HD	3	
VANACOF AC LIQ 12.5-25	3	
VANACOF DM LIQ	3	

This document includes a list of drugs covered on our formulary as of July 1, 2024. You can find information on what the symbols and abbreviations on this table mean by going to page 7.

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
VANACOF LIQ	3	
VANACOF-8 LIQ 25-50/15	3	
VANATAB AC TAB 12.5-25	3	
VANATAB DM TAB 5-9-198	3	
<i>vazotab</i>	3	
<i>vicks dayquil severe cold</i>	3	
VICKS NYQUIL LIQ COLD/FLU	3	
VICKS OIN VAPORUB	3	
WAL-FLU COLD POW SORE THR	3	
<i>wal-tussin cough &amp; chest</i>	3	
<i>4-way fast acting SOLN 1%</i>	3	
ZUTRIPRO LIQ 60-4-5MG	3	
<b>LEUKOTRIENE MODULATORS</b>		
<i>montelukast sodium</i> CHEW 4mg, 5mg; PACK 4mg; TABS 10mg	1	
<i>zafirlukast</i> TABS 10mg, 20mg	1	
<b>MISCELLANEOUS</b>		
<i>acetylcysteine</i> SOLN 10%, 20%	1	B/D
<i>afrin saline nasal mist</i>	3	
ARALAST NP SOLR 500mg, 1000mg	2	NM, LA, PA
<i>asthmanefrin refill</i> NEBU 2.25%	3	
<i>ayr nasal drops</i> SOLN .65%	3	
AYR NASAL DROPS SOLN .65%	3	
AYR NASAL MIST ALLERGY & SOLN 2.65%	3	
AYR SALINE KIT NETI RNS	3	

This document includes a list of drugs covered on our formulary as of July 1, 2024. You can find information on what the symbols and abbreviations on this table mean by going to page 7.

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
<i>ayr saline nasal</i>	3	
<i>bronchial mist</i> AERS .22mg/act	3	
BRONCHITOL CAPS 40mg	2	QL (560 caps / 28 days), NM, LA, PA
<i>cromolyn sodium</i> NEBU 20mg/2ml	1	B/D
<i>cromolyn sodium (nasal)</i> AERS 4%	3	
CVS NASAL MIST AERS .9%, 3%	3	
<i>epinephrine (anaphylaxis)</i> SOAJ .15mg/0.3ml, .3mg/0.3ml	1	(generic of EpiPen)
<i>epinephrine (anaphylaxis)</i> SOAJ .15mg/0.15ml, .3mg/0.3ml	1	(generic of Adrenaclick)
EPINEPHRINE AER MIST AERS .22mg/act	3	
FASENRA SOSY 30mg/ml	2	NM, LA, PA
FASENRA PEN SOAJ 30mg/ml	2	NM, LA, PA
KALYDECO PACK 5.8mg, 13.4mg, 25mg, 50mg, 75mg	2	QL (56 packs / 28 days), NM, LA, PA
KALYDECO TABS 150mg	2	QL (60 tabs / 30 days), NM, LA, PA
NASADROPS SALINE ON THE G SOLN .9%	3	
NASOGEL GEL	3	
OCEAN NASAL SPRAY SOLN .65%	3	
OFEV CAPS 100mg, 150mg	2	QL (60 caps / 30 days), NM, LA, PA
ORKAMBI GRA 75-94MG	2	QL (56 packs / 28 days), NM, LA, PA
ORKAMBI GRA 100-125	2	QL (56 packs / 28 days), NM, LA, PA

This document includes a list of drugs covered on our formulary as of July 1, 2024. You can find information on what the symbols and abbreviations on this table mean by going to page 7.

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
ORKAMBI GRA 150-188	2	QL (56 packs / 28 days), NM, LA, PA
ORKAMBI TAB 100-125	2	QL (112 tabs / 28 days), NM, LA, PA
ORKAMBI TAB 200-125	2	QL (112 tabs / 28 days), NM, LA, PA
<i>pirfenidone</i> CAPS 267mg	2	QL (270 caps / 30 days), NM, PA
<i>pirfenidone</i> TABS 267mg	2	QL (270 tabs / 30 days), NM, PA
<i>pirfenidone</i> TABS 534mg, 801mg	2	QL (90 tabs / 30 days), NM, PA
PROLASTIN-C SOLN 1000mg/20ml	2	NM, LA, PA
PULMOZYME SOLN 2.5mg/2.5ml	2	NM, PA
RHINARIS SOLN .2%	3	
<i>roflumilast</i> TABS 250mcg	1	QL (56 tabs / year)
<i>roflumilast</i> TABS 500mcg	1	QL (30 tabs / 30 days)
S2 NEBU 2.25%	3	
SINUS WASH CRY SALT	3	
SYMDEKO TAB 50-75MG	2	QL (56 tabs / 28 days), NM, LA, PA
SYMDEKO TAB 100-150	2	QL (56 tabs / 28 days), NM, LA, PA
<i>theophylline</i> ELIX 80mg/15ml; SOLN 80mg/15ml; TB12 100mg, 200mg, 300mg, 450mg; TB24 400mg, 600mg	1	
TRIKAFTA PAK 59.5MG	2	QL (56 packs / 28 days), NM, LA, PA
TRIKAFTA PAK 75MG	2	QL (56 packs / 28 days), NM, LA, PA

This document includes a list of drugs covered on our formulary as of July 1, 2024. You can find information on what the symbols and abbreviations on this table mean by going to page 7.

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
TRIKAFTA TAB 50-25-37.5MG & 75MG	2	QL (84 tabs / 28 days), NM, LA, PA
TRIKAFTA TAB 100-50-75MG & 150MG	2	QL (84 tabs / 28 days), NM, LA, PA
XOLAIR SOAJ 75mg/0.5ml, 150mg/ml, 300mg/2ml; SOLR 150mg; SOSY 75mg/0.5ml, 150mg/ml, 300mg/2ml	2	NM, LA, PA
ZEMAIRA SOLR 1000mg, 4000mg, 5000mg	2	NM, LA, PA
<b>NASAL STEROIDS</b>		
FLONASE SENSIMIST SUSP 27.5mcg/spray	3	
<i>flunisolide (nasal)</i> SOLN .025%	1	QL (3 bottles / 30 days)
<i>fluticasone propionate (nasal)</i> SUSP 50mcg/act	1	QL (1 bottle / 30 days)
<i>gnp 24 hour nasal allerg</i> AERO 55mcg/act	3	
<i>kls aller-flo</i> SUSP 50mcg/act	3	
NASACORT ALR SPR 55MCG/AC	3	
XHANCE EXHU 93mcg/act	2	QL (32 mL / 30 days), PA
<b>STEROID INHALANTS</b>		
ALVESCO AERS 80mcg/act	2	QL (3 inhalers / 30 days)
ALVESCO AERS 160mcg/act	2	QL (2 inhalers / 30 days)
ARNUITY ELLIPTA AEPB 50mcg/act, 100mcg/act, 200mcg/act	2	QL (30 inhalations / 30 days)
<i>budesonide (inhalation)</i> SUSP .25mg/2ml, .5mg/2ml	1	B/D
<b>STEROID/BETA-AGONIST COMBINATIONS</b>		
ADVAIR HFA AER 45/21	2	QL (1 inhaler / 30 days)

This document includes a list of drugs covered on our formulary as of July 1, 2024. You can find information on what the symbols and abbreviations on this table mean by going to page 7.

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
ADVAIR HFA AER 115/21	2	QL (1 inhaler / 30 days)
ADVAIR HFA AER 230/21	2	QL (1 inhaler / 30 days)
BREO ELLIPTA INH 50-25MCG	2	QL (60 blisters / 30 days)
BREO ELLIPTA INH 100-25	2	QL (60 blisters / 30 days)
BREO ELLIPTA INH 200-25	2	QL (60 blisters / 30 days)
DULERA AER 50-5MCG	2	QL (3 inhalers / 30 days)
DULERA AER 100-5MCG	2	QL (3 inhalers / 30 days)
DULERA AER 200-5MCG	2	QL (3 inhalers / 30 days)
<i>fluticasone-salmeterol aer powder ba 100-50 mcg/act</i>	1	QL (60 inhalations / 30 days); (generic PRASCO not covered)
<i>fluticasone-salmeterol aer powder ba 250-50 mcg/act</i>	1	QL (60 inhalations / 30 days); (generic PRASCO not covered)
<i>fluticasone-salmeterol aer powder ba 500-50 mcg/act</i>	1	QL (60 inhalations / 30 days); (generic PRASCO not covered)
<i>wixela inhub</i>	1	QL (60 inhalations / 30 days)

## **TOPICAL**

### **DERMATOLOGY, ACNE**

<i>acutane</i> CAPS 10mg, 20mg, 30mg, 40mg	1	PA
<i>acne 10</i> GEL 10%	3	
<i>acne foaming wash</i> LIQD 10%	3	
ACNE MEDICATION LOTN 10%	3	

This document includes a list of drugs covered on our formulary as of July 1, 2024. You can find information on what the symbols and abbreviations on this table mean by going to page 7.

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
<i>acne medication 5</i> GEL 5%	3	
ACNE MEDICATION 5 LOTN 5%	3	
ACNEFREE KIT SEVERE	3	
<i>amnesteem</i> CAPS 10mg, 20mg, 40mg	1	PA
<i>benzoyl peroxide</i> GEL 2.5%; LOTN 5%, 10%	3	
<i>benzoyl peroxide cleanser</i> LIQD 6%	3	
BENZOYL PEROXIDE CLEANSER LIQD 6%	3	
<i>benzoyl peroxide-erythromycin gel 5-3%</i>	1	QL (46.6 gm / 30 days)
<i>claravis</i> CAPS 10mg, 20mg, 30mg, 40mg	1	PA
<i>clindamycin phosphate (topical)</i> GEL 1%	1	QL (75 gm / 30 days)
<i>clindamycin phosphate (topical)</i> LOTN 1%; SOLN 1%	1	QL (60 mL / 30 days)
<i>cvs acne cleansing bar</i> BAR 10%	3	
<i>cvs advanced 3-in-1 exfol</i> LIQD 5%	3	
<i>ery</i> PADS 2%	1	QL (60 pledgets / 30 days)
<i>erythromycin (acne aid)</i> GEL 2%	1	QL (60 gm / 30 days)
<i>erythromycin (acne aid)</i> SOLN 2%	1	QL (60 mL / 30 days)
<i>isotretinoin</i> CAPS 10mg, 20mg, 30mg, 40mg	1	PA
<i>sulfacetamide sodium (acne)</i> LOTN 10%	1	QL (118 mL / 30 days)
<i>tretinoin</i> CREA .025%, .05%, .1%; GEL .01%, .025%	1	QL (45 gm / 30 days), PA
<i>zenatane</i> CAPS 10mg, 20mg, 30mg, 40mg	1	PA

This document includes a list of drugs covered on our formulary as of July 1, 2024. You can find information on what the symbols and abbreviations on this table mean by going to page 7.



<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
<b><i>DERMATOLOGY, ANTIBIOTICS</i></b>		
<i>alba-3</i>	3	
ANTIBIOTIC CRE	3	
BACIGUENT OINT 500unit/gm	3	
<i>bacitracin (topical)</i> OINT 500u/gm	3	
<i>bacitracin zinc</i> OINT 500unit/gm	3	
<i>*bacitracin-polymyxin b oint***</i>	3	
<i>eql antibiotic + pain rel</i>	3	
<i>gentamicin sulfate (topical)</i> CREA .1%; OINT .1%	1	QL (30 gm / 30 days)
<i>mp triple antibiotic plus</i>	3	
<i>mupirocin</i> OINT 2%	1	QL (220 gm / 30 days)
MYCITRACIN OIN	3	
POLYSPORIN OIN	3	
<i>ra antibiotic/pain relief</i>	3	
<i>silver sulfadiazine</i> CREA 1%	1	
SPECTROCIN OIN PLUS	3	
<i>ssd</i> CREA 1%	1	
SULFAMYLON CREA 85mg/gm	2	QL (453.6 gm / 30 days)
<b><i>DERMATOLOGY, ANTIFUNGALS</i></b>		
<i>absorbine jr</i> SOLN 1%	3	
AFTATE ATHLE POW FOOT 1% POWD 1%	3	
<i>aftate athlete's foot</i> AERO 1%	3	
ALEVAZOL OINT 1%	3	
ALOE VESTA 2-N-1 ANTIFUNG OINT 2%	3	

This document includes a list of drugs covered on our formulary as of July 1, 2024. You can find information on what the symbols and abbreviations on this table mean by going to page 7.

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
<i>antifungal</i> CREA 1%, 2%	3	
<i>athletes foot powder spra</i> AERP 2%	3	
AZOLEN TINCTURE SOLN 2%	3	
<i>butenafine hcl</i> CREA 1%	3	
<i>castellani paint</i> LIQD 1.5%	3	
<i>ciclopirox olamine</i> CREA .77%	1	QL (90 gm / 30 days)
<i>ciclopirox olamine</i> SUSP .77%	1	QL (60 mL / 30 days)
<i>clotrimazole (topical)</i> CREA 1%	1	QL (45 gm / 30 days)
<i>clotrimazole (topical)</i> SOLN 1%	1	QL (60 mL / 30 days)
<i>clotrimazole w/ betamethasone cream 1-0.05%</i>	1	QL (45 gm / 30 days)
CLOVERINE OIN SALVE	3	
<i>critic-aid clear af</i> OINT 2%	3	
CRUEX CRE 1%	3	
<i>cvs af spray powder</i> AERP 1%	3	
DESENEX MAX CREA 1%	3	
<i>eql antifungal</i> CREA 1%	3	
FUNGOID TINCTURE KIT 2%	3	
<i>ketoconazole (topical)</i> CREA 2%	1	QL (60 gm / 30 days)
<i>klayesta</i> POWD 100000unit/gm	1	QL (60 gm / 30 days)
LAMISIL ADVANCED GEL 1%	3	
MICATIN AERP 2%	3	
MICATIN CRE 2%	3	
MICATIN POW 2% POWD 2%	3	

This document includes a list of drugs covered on our formulary as of July 1, 2024. You can find information on what the symbols and abbreviations on this table mean by going to page 7.

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
NP-27 AERP 1%; CREA 1%	3	
NP-27 SOL 1% SOLN 1%	3	
<i>nyamyc</i> POWD 100000unit/gm	1	QL (60 gm / 30 days)
<i>nystatin (topical)</i> CREA 100000unit/gm; OINT 100000unit/gm	1	QL (30 gm / 30 days)
<i>nystatin (topical)</i> POWD 100000unit/gm	1	QL (60 gm / 30 days)
<i>nystop</i> POWD 100000unit/gm	1	QL (60 gm / 30 days)
<i>original ointment</i>	3	
<i>ra antifungal foot care</i> CREA 1%	3	
<i>remedy phytoplex antifung</i> POWD 2%	3	
TINACTIN AERO 1%	3	
<i>tolnaftate</i> POWD 1%	3	
<b><i>DERMATOLOGY, ANTIHISTAMINES</i></b>		
<i>allergy cream</i> CREA 2%	3	
<i>allergy relief maximum st</i>	3	
BENADRYL CRE 2% EX ST	3	
BENADRYL MAXIMUM STRENGTH SOLN 2%	3	
BENADRYL SPR 2-0.1%	3	
<i>diphenhydramine hcl (topical)</i> SOLN 2%	3	
<i>diphenhydramine-zinc acetate cream 2- 0.1%</i>	3	
ITCH RELIEF CREA 2%	3	
<b><i>DERMATOLOGY, ANTIPSORIATICS</i></b>		
<i>acitretin</i> CAPS 10mg, 17.5mg, 25mg	1	PA

This document includes a list of drugs covered on our formulary as of July 1, 2024. You can find information on what the symbols and abbreviations on this table mean by going to page 7.

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
<i>calcipotriene</i> CREA .005%; OINT .005%	1	QL (120 gm / 30 days), PA
<i>calcipotriene</i> SOLN .005%	1	QL (120 mL / 30 days), PA
<i>calcitrene</i> OINT .005%	1	QL (120 gm / 30 days), PA
<i>tazarotene</i> CREA .1%	1	QL (60 gm / 30 days), PA
TAZORAC CREA .05%	2	QL (60 gm / 30 days), PA
<b>DERMATOLOGY, ANTISEBORRHEICS</b>		
<i>ketoconazole (topical)</i> SHAM 2%	1	QL (120 mL / 30 days)
<i>selenium sulfide</i> LOTN 2.5%	1	
<b>DERMATOLOGY, CORTICOSTEROIDS</b>		
<i>ala-cort</i> CREA 1%, 2.5%	1	
<i>alclometasone dipropionate</i> CREA .05%; OINT .05%	1	QL (60 gm / 30 days)
<i>betamethasone dipropionate (topical)</i> CREA .05%; OINT .05%	1	QL (120 gm / 30 days)
<i>betamethasone dipropionate (topical)</i> LOTN .05%	1	QL (120 mL / 30 days)
<i>betamethasone dipropionate augmented</i> CREA .05%; GEL .05%; OINT .05%	1	QL (120 gm / 30 days)
<i>betamethasone dipropionate augmented</i> LOTN .05%	1	QL (120 mL / 30 days)
<i>betamethasone valerate</i> CREA .1%; OINT .1%	1	QL (120 gm / 30 days)
<i>betamethasone valerate</i> LOTN .1%	1	QL (120 mL / 30 days)
<i>clobetasol propionate</i> CREA .05%; GEL .05%; OINT .05%	1	QL (60 gm / 30 days)

This document includes a list of drugs covered on our formulary as of July 1, 2024. You can find information on what the symbols and abbreviations on this table mean by going to page 7.

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
<i>clobetasol propionate</i> SOLN .05%	1	QL (50 mL / 30 days)
<i>clobetasol propionate e</i> CREA .05%	1	QL (60 gm / 30 days)
CORTIZONE-10 CRE 1%	3	
<i>cortizone-10 eczema</i> LOTN 1%	3	
CORTIZONE-10 OIN 1%	3	
CORTIZONE-10 SOL SCALP 1% SOLN 1%	3	
ENSTILAR AER	2	QL (120 gm / 30 days), PA
<i>eql anti-itch maximum str</i> OINT 1%	3	
<i>fluocinolone acetonide</i> CREA .01%	1	QL (60 gm / 30 days)
<i>fluocinolone acetonide</i> CREA .025%; OINT .025%	1	QL (120 gm / 30 days)
<i>fluocinolone acetonide</i> OIL .01%	1	QL (118.28 mL / 30 days)
<i>fluocinolone acetonide</i> SOLN .01%	1	QL (90 mL / 30 days)
<i>fluocinonide</i> CREA .05%	1	QL (120 gm / 30 days)
<i>fluocinonide</i> GEL .05%; OINT .05%	1	QL (60 gm / 30 days)
<i>fluocinonide</i> SOLN .05%	1	QL (60 mL / 30 days)
<i>fluocinonide emulsified base</i> CREA .05%	1	QL (120 gm / 30 days)
<i>fluticasone propionate</i> CREA .05%; OINT .005%	1	
<i>halobetasol propionate</i> CREA .05%; OINT .05%	1	QL (50 gm / 30 days)
HYDROCORT CRE 0.5%	3	
HYDROCORT CRE 1%	3	

This document includes a list of drugs covered on our formulary as of July 1, 2024. You can find information on what the symbols and abbreviations on this table mean by going to page 7.

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
<i>hydrocortisone (topical)</i> CREA 1%, 2.5%; LOTN 2.5%; OINT 2.5%	1	
<i>hydrocortisone (topical)</i> CREA .5%; OINT .5%; SOLN 1%	3	
<i>hydrocortisone-aloe vera cream 0.5%</i>	3	
<i>mometasone furoate</i> CREA .1%; OINT .1%; SOLN .1%	1	
<i>tgt anti-itch/aloe maximu</i>	3	
<i>triamcinolone acetonide (topical)</i> CREA .025%, .1%, .5%	1	QL (454 gm / 30 days)
<i>triamcinolone acetonide (topical)</i> LOTN .025%, .1%; OINT .025%, .1%, .5%	1	
<b>DERMATOLOGY, LOCAL ANESTHETICS</b>		
<i>glydo</i> PRSY 2%	1	QL (60 mL / 30 days), PA
<i>lidocaine</i> OINT 5%	1	QL (50 gm / 30 days), PA
<i>lidocaine</i> PTCH 5%	1	QL (3 patches / 1 day), PA
<i>lidocaine hcl</i> SOLN 4%	1	QL (50 mL / 30 days), PA
<i>lidocaine-prilocaine cream 2.5-2.5%</i>	1	B/D, QL (30 gm / 30 days)
<i>lidocan</i> PTCH 5%	1	QL (3 patches / 1 day), PA
<b>DERMATOLOGY, MISCELLANEOUS SKIN AND MUCOUS MEMBRANE</b>		
A + D PERSON LOT	3	
<i>a+d first aid</i>	3	
ABREVA CREA 10%	3	
<i>absorbine jr back patch</i> PTCH 5%	3	

This document includes a list of drugs covered on our formulary as of July 1, 2024. You can find information on what the symbols and abbreviations on this table mean by going to page 7.

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
ACNE-AID BAR	3	
ACNO CLEANSE LIQ	3	
ACTIMARIS GEL WOUND	3	
<i>advanced healing ointment</i> OINT 41%	3	
AGREE SHA EX CLEAN	3	
<i>ala seb</i>	3	
ALCOHOL SOL /WG 70%	3	
<i>alcohol, rubbing</i> SOLN 70%	3	
ALLCLENZ LIQ	3	
<i>aloe vesta 2-n-1 body was</i>	3	
ALOE VESTA 2-N-1 SKIN CON LOTN 3%	3	
<i>alphasoft</i>	3	
ALUMINUM CHLORIDE CRYST 25%	3	
<i>amedia triple zero lanolin</i>	3	
<i>americerin</i>	3	
AMERIGEL LOT BARRIER	3	
<i>ameriphor</i>	3	
<i>amlactin</i> CREA 12%	3	
AMMENS MEDIC POW	3	
<i>amplify relief mm</i>	3	
<i>analgesia</i> CREA 10%	3	
ANALPRAM-HC LOT 2.5%	3	
<i>anecream</i> CREA 4%	3	

This document includes a list of drugs covered on our formulary as of July 1, 2024. You can find information on what the symbols and abbreviations on this table mean by going to page 7.

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
<i>anecream5</i> CREA 5%	3	
<i>anti-dandruff shampoo</i> SHAM 1%	3	
ANTI-ITCH LOT 1% LOTN 1%	3	
<i>anti-itch medication</i>	3	
ANTIPHLOGIST CRE	3	
<i>antiseptic</i> SOLN 10%	3	
<i>antiseptic skin cleanser</i> SOLN 4%	3	
<i>anusol-hc</i> SUPP 25mg	3	
AQUA CARE CREA 10%	3	
<i>aqua care</i> CREA 10%; LOTN 10%	3	
<i>aqua lube</i>	3	
<i>aqua net conditon norm</i>	3	
AQUAPHILIC OIN	3	
AQUAPHOR 3 IN 1 DIAPER RA CREA 15%	3	
AQUASITE PAD 4"X4"	3	
<i>arctic relief pain reliev</i>	3	
<i>arctic relief roll-on pai</i> GEL 4%	3	
ARGLAES POW	3	
<i>arthritis pain relieving</i> CREA .075%	3	
ASPERCREME/ALOE CREA 10%	3	
AVEENO ANTI- LOT ITCH	3	
AVEENO BABY SOOTHING RELI CREA 13%	3	
AVEENO SKIN OIL RELIEF	3	

This document includes a list of drugs covered on our formulary as of July 1, 2024. You can find information on what the symbols and abbreviations on this table mean by going to page 7.



<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
<i>baby ease</i> OINT 30%	3	
BABY EYELID PAD CLEANSER	3	
BABY MONKEY CRE 2-12%	3	
<i>baby vitamin a &amp; d</i>	3	
BALMEX CREA 11.3%; STCK 11.3%	3	
BALMEX ADULT CARE CREA 11.3%	3	
BALMEX COMPLETE PROTECTIO CREA 11.3%	3	
BASIS FACIAL CRE MOIST	3	
BAZA CLEANSE & PROTECT LOTN 2%	3	
BENGAY CRE GREASLES	3	
<i>bengay pain relief/massag</i> GEL 2.5%	3	
BENZOIN CMPD TIN	3	
<i>benzoin compound tincture</i>	3	
BENZOIN TIN	3	
<i>benzoin tincture</i>	3	
BERRI-FREEZ PAIN RELIEVIN LIQD 10%	3	
BETADINE OINT 10%; SOLN 5%, 10%	3	
BETADINE PREPSTICK SWAB 10%	3	
BETADINE SCR SOL 7.5% SOLN 7.5%	3	
BETASAL SHA 3% SHAM 3%	3	
<i>betasept surgical scrub</i> LIQD 4%	3	
<i>bexarotene (topical)</i> GEL 1%	2	QL (60 gm / 30 days), NM, PA

This document includes a list of drugs covered on our formulary as of July 1, 2024. You can find information on what the symbols and abbreviations on this table mean by going to page 7.

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
<i>biofreeze</i> AERO 10.5%; LIQD 10%	3	
<i>bl cold &amp; hot therapy bal</i>	3	
BL ISOPROPYL ALCOHOL SOLN 91%, 99%	3	
<i>bl isopropyl rubbing alco</i> SOLN 70%	3	
BL ISOPROPYL RUBBING ALCO SOLN 70%	3	
BL MINERAL OIL LIGHT	3	
<i>bl wart remover</i> LIQD 17%	3	
BL WITCH HAZ LIQ 86%	3	
<i>blue gel</i> GEL 2%	3	
BLUE STAR OIN	3	
BORIC ACID GRA	3	
<i>boric acid granules</i>	3	
BOUDREAUXS BUTT PASTE OINT 16%	3	
BULL FROG SPR MOSQUITO	3	
BURN SPRAY AER	3	
CALAMINE LOT	3	
CALAMINE LOT PHENOLAT	3	
<i>*calamine lotion***</i>	3	
<i>*calamine phenolated lotion***</i>	3	
<i>calamine plus</i>	3	
CALAMINE POW	3	
<i>calamine powder</i>	3	
CALAZIME SKN PST PROTECT	3	

This document includes a list of drugs covered on our formulary as of July 1, 2024. You can find information on what the symbols and abbreviations on this table mean by going to page 7.

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
CAMPHOR CRY	3	
<i>camphor crystals</i>	3	
<i>capsaicin</i> CREA .025%, .075%	3	
CAPSAICIN POW	3	
CAPZASIN-HP CREA .1%	3	
CAPZASIN-P CRE 0.025% CREA .025%	3	
<i>carb-o-philic/20</i> CREA 20%	3	
CARMOL 10 LOTN 10%	3	
CARMOL 20 CREA 20%	3	
<i>cerave baby</i> LOTN 1%	3	
CLORPACTIN WCS-90 POWD 2gm	3	
COATS ALOE CREME CREA .5%	3	
COATS ALOE GELLY GEL .5%	3	
COATS ALOE MOISTURIZING L LOTN .5%	3	
COLEMAN 100 MAX INSECT RE LIQD 98.11%	3	
COLEMAN INSECT REPELLENT/ AERO 25%	3	
COLEMN BOTAN LIQ INSECT	3	
COLEMN INSEC SPR SKINSMAR	3	
COMFEEL FILM MIS	3	
COMPOUND W LIQD 17%	3	
COMPOUND W MAXIMUM STRENG GEL 17%	3	
<i>constant-clens</i>	3	

This document includes a list of drugs covered on our formulary as of July 1, 2024. You can find information on what the symbols and abbreviations on this table mean by going to page 7.

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
<i>corn fix</i> SOLN 17%	3	
<i>cottontails diaper rash c</i> OINT 10%	3	
COZIMA CREA 24%	3	
CUTTER ALL FAMILY MOSQUIT SHEE 7.15%	3	
<i>cvs alcohol</i> SOLN 91%	3	
<i>cvs anti-itch</i>	3	
<i>cvs anti-itch sensitive s</i> LOTN 1%	3	
<i>cvs hydrogen peroxide</i> SOLN 3%	3	
<i>cvs muscle rub</i>	3	
<i>cvs wart remover gel pen</i> GEL 17%	3	
DAKINS SOLUTION FULL STRE SOLN .5%	3	
DAKINS SOLUTION HALF STRE SOLN .25%	3	
DAKINS SOLUTION QUARTER S SOLN .125%	3	
DERMAGRAN OIN	3	
<i>dermamed</i>	3	
<i>*dermatological products misc - aerosol**</i>	3	
DERMAZINC SPRAY LIQD .25%	3	
<i>desitin</i> CREA 13%	3	
DESITIN OINT 40%	3	
DESITIN CREAMY OINT 10%	3	
DESITIN MAXIMUM STRENGTH PSTE 40%	3	
<i>desitin rapid relief</i> CREA 13%	3	

This document includes a list of drugs covered on our formulary as of July 1, 2024. You can find information on what the symbols and abbreviations on this table mean by going to page 7.

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
DHS TAR SHAM .5%	3	
DHS ZINC SHA 2% SHAM 2%	3	
<i>diaper rash</i> CREA 10%	3	
<i>dibucaine (rectal)</i> OINT 1%	3	
<i>dickinsons witch hazel</i>	3	
<i>diclofenac sodium (topical)</i> GEL 1%	1	QL (1000 gm / 30 days)
<i>docosanol</i> CREA 10%	3	
DR SMITHS ADULT BARRIER OINT 10%	3	
DR SMITHS ADULT BARRIER S AERO 10%	3	
DRS CHOICE KIT CLOSURE	3	
DY-O-DERM VITILIGO STAIN SOLN 6.55%	3	
<i>e-oil</i> OIL 400unit/ml	3	
<i>eck a &amp; d</i>	3	
ECK IODINE TIN 2%	3	
EHA LOTION 4% LOTN 4%	3	
ELA-MAX CREA 4%	3	
ELA-MAX 5 CREA 5%	3	
ELTA SEAL MOISTURE BARRIE CREA 6%	3	
<i>*emollient - cream**</i>	3	
ENEGEL GEL	3	
<i>eq hygienic cleansing wip</i>	3	
<i>eql aloe after sun</i>	3	
ETHY ALCOHOL SOL 70%	3	

This document includes a list of drugs covered on our formulary as of July 1, 2024. You can find information on what the symbols and abbreviations on this table mean by going to page 7.

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
<i>fluorouracil (topical)</i> CREA 5%	1	QL (40 gm / 30 days)
<i>fluorouracil (topical)</i> SOLN 2%, 5%	1	QL (10 mL / 30 days)
FORAXA EMU	3	
<i>formaldehyde</i> SOLN 37%	3	
FORMALDEHYDE SOLN 37%	3	
<i>formulation r</i>	3	
FP ANTI-ITCH CRE MEDICATE	3	
FREEZE IT GEL 0.2-3.5%	3	
<i>fv iodine tincture</i>	3	
<i>geri-hydrolac</i> LOTN 5%	3	
<i>glycerin topical liquid</i>	3	
<i>glycolic acid</i> SOLN 70%	3	
<i>gnp arthritis pain relief</i> CREA .1%	3	
<i>gnp isopropyl alcohol</i> SOLN 99%	3	
GOLD BOND POW	3	
<i>gold bond rapid relief</i>	3	
GOLD DUST POW WOUND	3	
GOODSENSE CAPSAICIN ARTHR LIQD .15%	3	
<i>goodsense hemorrhoidal</i>	3	
<i>goodsense hemorrhoidal oi</i>	3	
<i>grx dyne swab</i> SWAB 10%	3	
<i>grx wound</i>	3	
<i>h-chlor 12</i> SOLN .125%	3	

This document includes a list of drugs covered on our formulary as of July 1, 2024. You can find information on what the symbols and abbreviations on this table mean by going to page 7.

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
<i>hca alcohol swabs</i>	3	
HCA GLYCERIN LIQ	3	
HCA HEMORRHO OIN	3	
<i>hemorrhoid</i>	3	
<i>hemorrhoidal</i>	3	
<i>hemorrhoidal cooling</i>	3	
<i>hemorrhoidal suppositorie</i>	3	
HEMORROID SUP 3%	3	
HIBICLENS LIQ 4% LIQD 4%	3	
HIBICLENS SOL 4% SOLN 4%	3	
HUGGIES DIAPER RASH CREAM CREA 10%	3	
<i>hydrocortisone (rectal) CREA 1%, 2.5%</i>	1	
<i>hydrocortisone acetate w/ pramoxine perianal cream 2.5-1%</i>	3	
HYDROGEN PEROXIDE SOLN 3%	3	
<i>hysept SOLN .25%, .5%</i>	3	
ICY HOT PAIN RELIEVING GE GEL 2.5%	3	
<i>imiquimod CREA 5%</i>	1	QL (24 packets / 30 days)
INSTACLEAN LIQ	3	
IODINE TIN 2% MILD	3	
IODINE TIN STRONG	3	
<i>*iodine tincture strong**</i>	3	
IODOFLEX PADS .9%	3	

This document includes a list of drugs covered on our formulary as of July 1, 2024. You can find information on what the symbols and abbreviations on this table mean by going to page 7.

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
IODOSORB GEL .9%	3	
<i>ionil-t</i> SHAM 1%	3	
<i>isopropyl alcohol</i> 70%	3	
ISOPROPYL ALCOHOL WIPES MISC 70%	3	
JESSNERS SOL	3	
<i>lactic acid (ammonium lactate)</i> CREA 12%; LOTN 12%	1	
LACTICARE LOT 5%	3	
<i>lidocaine pain relief pat</i> PTCH 4%	3	
<i>*liniments &amp; rubs - cream**</i>	3	
<i>*liniments &amp; rubs - ointment**</i>	3	
LMX 4 CREA 4%	3	
LUXAMEND CRE	3	
3M DURABLE CRE MOISTURI	3	
MEDERMA CRE SPF 30	3	
<i>metronidazole (topical)</i> CREA .75%; GEL .75%	1	QL (45 gm / 30 days)
<i>metronidazole (topical)</i> LOTN .75%	1	QL (59 mL / 30 days)
MOISTURE BARRIER CREA 5%	3	
<i>moisturel therapeutic</i> LOTN 3%	3	
<i>moisturizing lotion</i> LOTN 1.5%	3	
MUSCLE RUB CRE ULT STR	3	
MUSCLE RUB OIN	3	
4-N-1 CREA 1%	3	

This document includes a list of drugs covered on our formulary as of July 1, 2024. You can find information on what the symbols and abbreviations on this table mean by going to page 7.



<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
NATRAPEL LIQD 20%	3	
NATRAPEL 12-HOUR TICK & I AERO 20%	3	
<i>nitroglycerin (intra-anal)</i> OINT .4%	1	QL (30 gm / 30 days)
<i>noble formula</i> LIQD .25%	3	
NUPERCAINAL OINT 1%	3	
OCUSOFT LID AER ORIGINAL	3	
OPERAND CHLORHEXIDINE GLU LIQD 2%	3	
OXIPOR VHC LOT	3	
PANRETIN GEL .1%	2	QL (60 gm / 30 days), PA
PETROLATUM OIN	3	
PHARMABASE BARRIER OINT 9.38%	3	
PHENOL LIQ	3	
<i>phenol liquid</i>	3	
<i>phenylephrine in hard fat</i>	3	
<i>podofilox</i> SOLN .5%	1	QL (7 mL / 28 days)
POLAR FROST GEL 4%	3	
<i>povidone-iodine</i> OINT 10%; SOLN 5%, 7.5%	3	
POVIDONE-IODINE PREP PAD PADS 10%	3	
<i>powders</i> POWD .1%	3	
<i>pramoxine hcl (rectal)</i> FOAM 1%	3	
PREDATOR CREA 4%	3	
PREPARATIO H CRE TOTABLE	3	

This document includes a list of drugs covered on our formulary as of July 1, 2024. You can find information on what the symbols and abbreviations on this table mean by going to page 7.

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
PREPARATIO H GEL	3	
PREPARATION OIN H	3	
PROCORT CRE	3	
<i>procto-med hc</i> CREA 2.5%	1	
PROCTOCORT SUPP 30mg	3	
PROCTOFOAM AER HC 1%	3	
PROCTOFOAM AER NS 1% FOAM 1%	3	
<i>proctosol hc</i> CREA 2.5%	1	
<i>proctozone-hc</i> CREA 2.5%	1	
<i>psoriasis</i> LIQD 3%	3	
PSORIASIS MEDICATED SKIN LIQD 3%	3	
<i>pyrithione zinc</i> SHAM 2%	3	
<i>ra body powder medicated</i>	3	
<i>ra medicated first aid sp</i>	3	
RECTIV OINT .4%	2	QL (30 gm / 30 days)
REMEDY CLEANSING BODY LOT LOTN 1.5%	3	
REMEDY PST CALAZIME	3	
REMEDY SKIN REPAIR CREA 1.5%	3	
REPEL SPORTSMEN MAX LOTN 40%	3	
RISAMINE OIN	3	
SARNA LOT	3	
<i>*scar treatment products - cream**</i>	3	
<i>scholls for her cracked s</i> CREA 1.5%	3	

This document includes a list of drugs covered on our formulary as of July 1, 2024. You can find information on what the symbols and abbreviations on this table mean by going to page 7.

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
SCYTERA FOAM 2%	3	
SEBULEX SHA	3	
SECURA EXTRA PROTECTIVE CREA 30.6%	3	
SELSUN BLUE LOTN 1%	3	
2ND SKIN PAD MST BURN	3	
SKIN PROTECTANT MOISTURE CREA 12%	3	
<i>*skin protectants misc - PSTE 49.8%</i>	3	
<i>sm anti-dandruff coal tar SHAM .5%</i>	3	
<i>*soap &amp; cleansers - bar***</i>	3	
SOOTH-IT PAD PADS 50%	3	
STIMULEN LOT	3	
STOPAIN LIQD 8%	3	
SWEEN CRE	3	
<i>tacrolimus (topical) OINT .03%, .1%</i>	1	QL (100 gm / 30 days)
TANNIC ACID POW	3	
<i>tannic acid powder</i>	3	
<i>tgt hemorrhoidal supposit</i>	3	
THERAPLEX T SHAM 1%	3	
THERASEAL LOTN 1%	3	
TRIPLE PASTE OINT 12.8%	3	
VALCHLOR GEL .016%	2	QL (60 gm / 30 days), NM, LA, PA
VITAMIN A&D OIN	3	
WART OFF SOL 17% SOLN 17%	3	

This document includes a list of drugs covered on our formulary as of July 1, 2024. You can find information on what the symbols and abbreviations on this table mean by going to page 7.

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
<i>white petrolatum topical gel</i>	3	
WOUN'DRES GEL	3	
<i>*wound dressings - pads***</i>	3	
Z-BUM CREA 22%	3	
ZIKS ARTHRIT CRE RELIEF	3	
ZINC OXIDE PSTE 25%	3	
<i>zinc oxide (topical) OINT 20%, 40%; PSTE 25%</i>	3	
ZOSTRIX NATURAL PAIN RELI CREA .033%	3	
<b>DERMATOLOGY, SCABICIDES AND PEDICULIDES</b>		
<i>a-200 AERO .5%</i>	3	
<i>a-200 maximum strength</i>	3	
<i>bl permethrin LIQD 1%</i>	3	
<i>complete lice treatment k</i>	3	
<i>cvs permethrin LOTN 1%</i>	3	
END LICE M/S LIQ	3	
<i>hca lice shampoo</i>	3	
<i>malathion LOTN .5%</i>	1	QL (59 mL / 30 days)
NIX COMPLETE KIT LICE 1%	3	
NIX CREME LIQ RINSE 1% LIQD 1%	3	
<i>permethrin CREA 5%</i>	1	QL (60 gm / 30 days)
PERMETHRIN LOT 1%	3	
PRONTO SHA 0.33-4%	3	
<i>pyrethrins-piperonyl butoxide liq 0.3-3%</i>	3	

This document includes a list of drugs covered on our formulary as of July 1, 2024. You can find information on what the symbols and abbreviations on this table mean by going to page 7.

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
RID AERO .5%	3	
RID COMPLETE KIT LICE	3	
RID ESS LICE KIT 0.33-4%	3	
RID LIQ	3	
<b>DERMATOLOGY, WOUND CARE AGENTS</b>		
REGRANEX GEL .01%	2	QL (30 gm / 30 days), PA
SANTYL OINT 250unit/gm	2	QL (180 gm / 30 days)
<i>sodium chloride (gu irrigant) SOLN .9%</i>	1	
<i>water for irrigation, sterile irrigation soln</i>	1	
<b>MOUTH/THROAT/DENTAL AGENTS</b>		
ACTISEP SOL	3	
ACTISEP SPR	3	
<i>allevacaine SOLN 20%</i>	3	
ANBESOL GEL 10%; LIQD 10%	3	
<i>anbesol cold sore therapy</i>	3	
ANBESOL MAXIMUM STRENGTH GEL 20%; LIQD 20%	3	
<i>*artificial saliva - solution***</i>	3	
ASTRING-O-SO LIQ MTHWASH	3	
BABY ANBESOL GEL 7.5%	3	
<i>baby oral pain GEL 7.5%</i>	3	
<i>baby teething GEL 7.5%</i>	3	
<i>baby teething pain medici GEL 7.5%</i>	3	
<i>benz-o-sthetic GEL 20%; LIQD 20%; SOLN 20%</i>	3	

This document includes a list of drugs covered on our formulary as of July 1, 2024. You can find information on what the symbols and abbreviations on this table mean by going to page 7.

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
BENZ-O-STHETIC SWAB 20%	3	
<i>benzodent</i> CREA 20%	3	
BLISTEX OIN MEDICATE	3	
CAPHOSOL SOL	3	
<i>cavarest</i> GEL 1.1%	3	
CEPACOL LOZG 2mg	3	
CEPACOL DUAL SPR RELIEF	3	
CEPACOL FIZZLERS TBDP 6mg	3	
CEPACOL LOZ 15-2.3MG	3	
CEPACOL LOZ 15-20MG	3	
CEPACOL LOZ EXTRA ST	3	
CEPACOL LOZ INSTAMAX	3	
CEPACOL MAX LOZ NUMBING	3	
CEPACOL REGULAR STRENGTH LOZG 3mg	3	
CEPACOL SORE LOZ 10-2.1MG	3	
CEPACOL SORE LOZ 15-3.6MG	3	
CEPACOL SORE LOZ THRT MAX	3	
CEPACOL SORE SPR 0.1-33%	3	
CEPACOL SORE THROAT LOZG 5.4mg	3	
CEPACOL SORE THROAT/POST LOZG 5.4mg	3	
<i>cevimeline hcl</i> CAPS 30mg	1	
CHERACOL SORE THROAT LIQD 1.4%	3	
<i>cherry cough drops</i>	3	

This document includes a list of drugs covered on our formulary as of July 1, 2024. You can find information on what the symbols and abbreviations on this table mean by going to page 7.

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
<i>chloraseptic gargle</i> LIQD 1.4%	3	
CHLORASEPTIC LOZ 6-10MG	3	
CHLORASEPTIC LOZ CHERRY	3	
CHLORASEPTIC LOZ CITRUS	3	
CHLORASEPTIC LOZ HONY LEM	3	
CHLORASEPTIC LOZ MAX	3	
CHLORASEPTIC LOZ MENTHOL	3	
CHLORASEPTIC MIS	3	
CHLORASEPTIC MIS KIDS	3	
<i>chloraseptic warming sore</i> LOZG 15mg	3	
CHLORASEPTIC WARMING SORE LOZG 15mg	3	
<i>chlorhexidine gluconate (mouth-throat)</i> SOLN .12%	1	
<i>clotrimazole</i> TROC 10mg	1	QL (150 lozenges / 30 days)
CONTROL DENT CRE ADHESIVE	3	
COUGH DROPS LOZG 2.7mg	3	
<i>cough drops</i> LOZG 3.1mg, 5mg, 5.4mg, 5.8mg, 6.5mg, 7mg, 7.5mg, 7.6mg, 8mg, 8.4mg, 10mg	3	
<i>cough drops menthol</i>	3	
<i>cough drops sugar free</i> LOZG 5.8mg, 7.6mg	3	
<i>cvs baby teething oral pa</i> GEL 7.5%	3	
<i>cvs cherry menthol drops</i>	3	

This document includes a list of drugs covered on our formulary as of July 1, 2024. You can find information on what the symbols and abbreviations on this table mean by going to page 7.

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
<i>cvs cough drops sugar fre</i> LOZG 5.8mg, 7.6mg	3	
<i>cvs honey lemon drops</i>	3	
<i>cvs menthol drops</i>	3	
<i>cvs oral anesthetic maxim</i> GEL 20%	3	
<i>cvs oral pain reliever</i> PSTE 20%	3	
<i>cvs oral pain reliever ma</i> CREA 20%; PSTE 20%	3	
<i>cvs sore throat</i>	3	
<i>cvs sore throat maximum s</i>	3	
CVS SORE THROAT RELIEF PO LPOP 20mg	3	
<i>cvs throat relief pops ch</i> LPOP 10mg	3	
DADS MENTHOL THROAT DROP LOZG 3.5mg	3	
<i>dent-o-kain/20</i> LIQD 20%	3	
DENTIVA LOZ	3	
DENTS TOOTHACHE GUM GUM 20%	3	
<i>*denture care products - cream***</i>	3	
DIABETIC TUSSIN COUGH DRO LOZG 6mg	3	
DUAL RELIEF LIQ	3	
EFFERDENT PAK PWR CLN	3	
EFFERDENT TAB PLUS	3	
<i>eq cough drops sugar free</i> LOZG 5.8mg	3	
<i>eql cough drops</i> LOZG 5.8mg, 7.5mg, 7.6mg	3	

This document includes a list of drugs covered on our formulary as of July 1, 2024. You can find information on what the symbols and abbreviations on this table mean by going to page 7.



<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
EZO CUSHIONS MIS LOW REG	3	
FIRST-MOUTHW SUS BLM	3	
FRUIT FROSTERS LOZG 7mg	3	
G-BUCAL-C SOL 0.15-0.1	3	
GILTUSS SPR BUCALSEP	3	
<i>gnp cough drops</i> LOZG 6.5mg, 7mg	3	
<i>gnp herbal</i> LOZG 4.8mg	3	
<i>gnp oral pain relief</i> LIQD 20%	3	
<i>gnp throat drops</i> LOZG 2.8mg	3	
<i>goodsense oral pain relie</i> GEL 20%	3	
GUMSOL LIQ	3	
GUMSOL SPR	3	
HURRICAINA AERO 20%; SOLN 20%	3	
<i>hurricane</i> GEL 20%	3	
HURRICAINA ONE SOLN 20%	3	
HURRICAINA SNAP-N-GO SWAB 20%	3	
HURRIPAK STARTER KIT KIT 20%	3	
<i>instant oral pain relief</i> GEL 20%	3	
<i>intense toothache pain re</i> GEL 20%	3	
<i>kank-a mouth pain</i> SOLN 20%	3	
<i>kourzeq</i> PSTE .1%	1	
<i>larynex</i>	3	
<i>lidocaine hcl (mouth-throat)</i> SOLN 2%	1	

This document includes a list of drugs covered on our formulary as of July 1, 2024. You can find information on what the symbols and abbreviations on this table mean by going to page 7.

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
LITTLE COLDS COLD RELIEF LPOP 19mg	3	
LITTLE COLDS SOOTHING THR STRP 19mg	3	
LITTLE TEETH GEL 7.5%	3	
<i>lollicaine</i> GEL 20%	3	
LUDENS DUAL LOZ RELIEF	3	
LUDENS THROAT DROPS LOZG 1mg, 1.6mg, 1.7mg, 2.5mg, 2.8mg	3	
<i>medikoff drops</i> LOZG 7.6mg	3	
<i>menthol cough drops</i> LOZG 5mg	3	
<i>*mouthwashes - liquid**</i>	3	
MUCINEX LIQ INSTASOO	3	
<i>natural herb cough drops</i> LOZG 3mg	3	
<i>nycoff</i>	3	
<i>nystatin (mouth-throat)</i> SUSP 100000unit/ml	1	
ORA-FILM STRP 6%	3	
<i>oral analgesic maximum st</i> GEL 20%; LIQD 20%; PSTE 20%	3	
<i>oral anesthetic maximum s</i> PSTE 20%	3	
ORAMAGIC PLUS SUSR 10%	3	
ORASEP SPR	3	
<i>orastat maximum strength</i> GEL 20%	3	
<i>periogard</i> SOLN .12%	1	
PERMA-GRIP POW	3	

This document includes a list of drugs covered on our formulary as of July 1, 2024. You can find information on what the symbols and abbreviations on this table mean by going to page 7.

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
<i>perox-a-mint</i> SOLN 1.5%	3	
<i>pilocarpine hcl (oral)</i> TABS 5mg, 7.5mg	1	
POLIGRIP MIS COMFORT	3	
POLIGRIP SUP CRE STRNG FR	3	
<i>qc cough drops</i> LOZG 5.8mg	3	
<i>qc sore throat</i>	3	
<i>ra cough drops</i> LOZG 5.4mg, 5.8mg, 6.5mg, 7mg, 7.5mg	3	
<i>ra mouth pain anesthetic</i> LIQD 20%	3	
RICOLA CHERRY HERB SUGAR LOZG 2.6mg	3	
RICOLA CHERRY HONEY HERB LOZG 2mg	3	
<i>ricola honey lemon w/echi</i> LOZG 3.5mg	3	
RICOLA HONEY-HERB LOZG 2mg	3	
RICOLA LEMON MINT LOZG 1.5mg	3	
RICOLA LEMON MINT HERB SU LOZG 1.1mg	3	
RICOLA LOZ	3	
<i>ricola mountain herb suga</i> LOZG 4.8mg	3	
<i>ricola natural herb</i> LOZG 4.8mg	3	
SALESE LOZ	3	
SEA BOND BRI GEL CLEANSER	3	
SEA BOND WAF	3	
<i>sm cough drops</i> LOZG 3.1mg, 5mg, 5.8mg, 6.5mg, 7mg, 8mg, 10mg	3	

This document includes a list of drugs covered on our formulary as of July 1, 2024. You can find information on what the symbols and abbreviations on this table mean by going to page 7.

<b>Drug Name</b>	<b>Drug Tier</b>	<b>Requirements/Limits</b>
<i>sm fruit coolers</i> LOZG 7mg	3	
<i>sm natural herb cough dro</i> LOZG 4.8mg	3	
<i>sore throat</i>	3	
SORE THROAT LOLLIPOPS LPOP 10mg	3	
<i>sore throat lozenges</i>	3	
SUCRETS SORE THROAT LOZG 2mg	3	
<i>tgt cough drops</i> LOZG 9.1mg	3	
<i>throat discs</i>	3	
<i>*throat lozenges - lozenges**</i>	3	
TOOTHACHE GEL 20-0.26%	3	
<i>triamcinolone acetonide (mouth)</i> PSTE .1%	1	
<i>ultra throat lozenges</i>	3	
VICKS VAPODROPS LOZG 1.7mg, 3.3mg	3	
ZILACTIN BABY GEL 10%	3	
<i>zilactin-b</i> GEL 10%	3	
ZINC W/A&C LOZ	3	
<b>OTIC</b>		
<i>antiseptic cleanser</i> SOLN 10%	3	
<i>auraphene-b</i> SOLN 6.5%	3	
<i>auro-dri</i> LIQD 95%	3	
HCA EAR WAX SOL 6.5% OT	3	
SWIM EAR LIQD 95%	3	

This document includes a list of drugs covered on our formulary as of July 1, 2024. You can find information on what the symbols and abbreviations on this table mean by going to page 7.

## Index

*	
*artificial saliva - solution***	221
*bacitracin-polymyxin b oint***	201
*b-complex vitamin cap**	159
*b-complex vitamin elixir**	159
*b-complex vitamin sublingual liquid**	159
*b-complex w/ c & e + zn tab***	159
*b-complex w/ c cap**	159
*b-complex w/ c tab er**	159
*b-complex w/ c tab**	159
*b-complex w/ folic acid tab**	159
*b-complex w/ minerals ta	159
*bioflavonoid products cap**	160
*bioflavonoid products chew tab**	160
*bioflavonoid products tab er**	160
*bioflavonoid products tab**	160
*bone meal w/ vitamin d tab***	141
*calamine lotion***	210
*calamine phenolated lotion***	210
*calcium carbonate-vit d	143
*calcium carb-vit d w/ minerals chew tab 1200 mg-1000 unit**	143
*calcium carb-vit d w/ minerals chew tab 600 mg-400 unit***	143
*camphor-eucalyptus-menthol - oint***	183
*cobalamin combination sl tab***	161
*cobalamin combination tab***	161
*cod liver oil cap***	161
*cod liver oil***	161
*denture care products - cream***	224
*dermatological products misc - aerosol**	212
*emollient - cream**	213
*flaxseed (linseed) cap 1200 mg***	153
*flaxseed (linseed) oral oil***	153
*flaxseed (linseed) oral powder***	153
*glucosamine-chondroitin-	153
*iodine tincture strong**	215
*iron combination elixir*	120
*iron w/ vitamin liq**	165
*lactobacillus acidophilus-pectin cap**	103
*lactobacillus chew tab**	103
*lancets misc.***	96
*lancets***	96
*liniments & rubs - cream**	216
*liniments & rubs - ointment**	216
*mouthwashes - liquid**	226
*multiple minerals tab**	148
*multiple urine test strips***	96
*multiple vitamin cap**	165
*multiple vitamin tab**	166
*multiple vitamins w/ calcium tab**	166
*multiple vitamins w/ min	166
*multiple vitamins w/ minerals tab**	166
*nutritional supplement liquid**	154
*omega-3 fatty acids cap 435 mg**	155
*oral electrolyte for soln***	136
*oral electrolyte solution***	136
*oral vehicles***	134
*pediatric multiple vitam	167
*pediatric multiple vitamin w/ minerals & c chew tab 60 mg**	167
*pediatric multiple vitamins w/ iron chew tab 12 mg**	167
*pediatric multiple vitamins w/ iron chew tab**	167
*scar treatment products - cream**	218
*skin protectants misc -	219
*soap & cleansers - bar***	219
*sodium bicarbonate powder**	102
*throat lozenges - lozenges**	228
*vitamin mixture tab**	170
*vitamins a & d cap***	170
*vitamins a & d tab***	170
*vitamins w/ lipotropics cap**	170
*wound dressings - pads***	220
<b>1</b>	
12 hour cold	188
1ST CHOICE MIS LANCETS	95
1ST TIER UNI MIS 31GX5MM	97
1ST TIER UNI MIS 31GX6MM	97
1ST TIER UNI MIS 31GX8MM	97
1ST TIER UNI MIS 32GX4MM	97
<b>2</b>	
20/20 artificial tears	174
24hr allergy relief	179
2ND SKIN PAD MST BURN	219
<b>3</b>	
3M AIR WARM MIS MASK	189
3M DURABLE CRE MOISTURI	216

This document includes a list of drugs covered on our formulary as of July 1, 2024. You can find information on what the symbols and abbreviations on this table mean by going to page 7.

<b>4</b>	
4-N-1 .....	216
4-way fast acting .....	195
4X PROBIOTIC TAB .....	104
<b>5</b>	
50+ adult eye health .....	157
<b>6</b>	
600+d3 plus minerals .....	146
666 cold .....	184
666 cold preparation.....	184
<b>A</b>	
A + D PERSON LOT .....	206
A + D PERSON MIS CARE WIP.....	115
a thru z advantage .....	156
a thru z select.....	156
a.r.m.....	181
A/BETA CAROT TAB 25000UNT .....	156
a/f pain relief .....	10
a+d first aid .....	206
a-10000 .....	156
A1C NOW KIT .....	94
a-200 .....	220
a-200 maximum strength.....	220
abacavir sulfate .....	24
abacavir sulfate-lamivudine tab 600-300 mg.....	26
abatinex.....	102
abatron af.....	118
ABATRON LIQ.....	118
ABC COMPLETE TAB WOMEN.....	156
abc-z -tr.....	156
abdek.....	156
ABDEK CAP .....	156
abdek pediatric .....	156
ABELCET.....	23
ABILIFY MAINTENA.....	67
abiraterone acetate .....	36
ABREVA.....	206
ABRYSVO.....	128
absorbine jr .....	201
absorbine jr back patch .....	206
ACACIA POW.....	130
acacia powder.....	130
acamprosate calcium.....	82
acarbose .....	84
ACCU-CHECK TES COMFORT .....	94
ACCU-CHEK KIT FASTCLIX.....	94

accutane.....	199
acebutolol hcl .....	58
acephen.....	10
ACEROLA C-500 .....	156
acetadryl.....	82, 181
aceta-gesic.....	181
ACETAMIN POW .....	130
acetaminophen.....	10
acetaminophen junior stre.....	10
acetaminophen w/ codeine soln 120-12 mg/5ml.....	17
acetaminophen w/ codeine tab 300-15 mg .....	17
acetaminophen w/ codeine tab 300-30 mg .....	17
acetaminophen w/ codeine tab 300-60 mg .....	17
acetazolamide.....	59
acetic acid .....	115
ACETIC ACID .....	130
acetic acid (otic) .....	177
acetylcysteine .....	195
acid controller.....	106
acid gone .....	99
acid reducer.....	114
acid relief.....	99
ACIDOPHILUS .....	102
ACIDOPHILUS CAP.....	102
ACIDOPHILUS/ TAB CIT PECT .....	102
acitretin .....	203
acne 10.....	199
acne foaming wash .....	199
ACNE MEDICATION.....	199
acne medication 5.....	200
ACNE MEDICATION 5.....	200
ACNE-AID BAR.....	207
ACNEFREE KIT SEVERE .....	200
ACNO CLEANSE LIQ.....	207
acta-tabs pe .....	181
ACTHIB INJ .....	128
ACTICON SOL 1-30.....	181
ACTICON TAB 2-60MG .....	181
ACTIDOGESIC TAB 1-500MG .....	181
actidose/sorbitol .....	94
actifed cold/sinus.....	181
ACTIFLOVIT TAB EAR HEAL.....	156
ACTIMARIS GEL WOUND .....	207
ACTIMMUNE.....	126
ACTINEL LIQ.....	181
ACTINEL LIQ PEDIATRI .....	181

This document includes a list of drugs covered on our formulary as of July 1, 2024. You can find information on what the symbols and abbreviations on this table mean by going to page 7.

ACTISEP SOL .....	221	AKEEGA TAB 50/500MG.....	36
ACTISEP SPR .....	221	<i>ak-rinse</i> .....	174
ACTITROM CAP .....	156	AKWA TEARS OIN OP.....	174
ACTIVE 55 LIQ PLUS.....	156	<i>ala seb</i> .....	207
ACTIVESSENT PAK.....	157	<i>ala-cort</i> .....	204
<i>acyclovir</i> .....	28	ALAHIST CF TAB 10-2-20.....	182
<i>acyclovir sodium</i> .....	28	ALAHIST DM LIQ 7.5-2-15.....	182
ADACEL INJ .....	128	ALA-HIST IR .....	178
ADALIMUMAB-AACF (2 PEN).....	123	ALA-HIST PE TAB 2-10MG .....	182
<i>addaprin</i> .....	15	<i>alamag-plus</i> .....	99
<i>added strength pain relie</i> .....	10	<i>alavert</i> .....	178
<i>adefovir dipivoxil</i> .....	28	<i>alavert allergy/sinus</i> .....	182
ADEKS PEDIAT DRO.....	157	ALAVERT SYP .....	178
ADEMPAS.....	61	<i>alaway</i> .....	172
ADJ LANCING MIS DEVICE.....	94	<i>alba-3</i> .....	201
ADLT ONE DLY CHW GUMMIES .....	157	ALBA-LYBE NR LIQ.....	150
ADMELOG.....	88	<i>albendazole</i> .....	19
ADMELOG SOLOSTAR.....	88	<i>albuterol sulfate</i> .....	180
<i>adprin b</i> .....	10	<i>alclometasone dipropionate</i> .....	204
ADRENAL TAB CALM .....	157	ALCOHOL SOL /WG 70% .....	207
<i>adsorbonac</i> .....	174	ALCOHOL SOL DENATURE.....	130
<i>adult aspirin regimen</i> .....	10	<i>alcohol, rubbing</i> .....	207
ADULT DISPOS MIS MOUTHPIE.....	181	ALCON SALINE SOL SEN EYES.....	174
ADULT OMEGA CHW PLUS DHA.....	150	<i>aldroxicon i</i> .....	99
ADVAIR HFA AER 115/21.....	199	ALDURAZYME .....	94
ADVAIR HFA AER 230/21.....	199	ALECENSA .....	39
ADVAIR HFA AER 45/21 .....	198	<i>alendronate sodium</i> .....	90
ADVANCED CA/ TAB D/MAGNES .....	157	<i>aler-cap</i> .....	178
<i>advanced healing ointment</i> .....	207	ALEVAZOL .....	201
ADVERA LIQ CHOCOLAT.....	150	ALEVE.....	15
ADVIL COLD/ TAB SINUS.....	181	ALEVE COLD & TAB SINUS .....	182
<i>advil junior strength</i> .....	15	<i>alfuzosin hcl</i> .....	115
ADVIL PM TAB 200-38MG.....	82	<i>aliskiren fumarate</i> .....	60
<i>af-aspirin childrens</i> .....	10	ALIVE MULTI-VITAMIN CHILD .....	157
<i>af-dibromm</i> .....	181	ALKA SELTZER TAB HEARTBRN .....	99
<i>af-dibromm dm</i> .....	181	<i>alka-seltzer anti-gas</i> .....	112
<i>af-ibup sinus</i> .....	181	ALKA-SELTZER CHW 750-80MG .....	99
<i>af-miconazole 7</i> .....	116	<i>alka-seltzer plus night c</i> .....	182
<i>af-pseudoephedrine hcl</i> .....	181	ALKA-SELTZER TAB 325MG.....	10
<i>afrin saline nasal mist</i> .....	195	ALKA-SELTZER TAB 500MG.....	10
AFRIN SPR 0.05%.....	182	ALKA-SELTZER TAB GOLD .....	99
AFTATE ATHLE POW FOOT 1% .....	201	ALKA-SELTZER TAB PLS COLD.....	182
<i>aftate athlete's foot</i> .....	201	<i>alkets</i> .....	100
<i>af-tussin dm</i> .....	181	<i>all day allergy childrens</i> .....	178
AGREE SHA EX CLEAN .....	207	<i>all day allergy d-12</i> .....	182
AHIST .....	178	<i>all day pain relief</i> .....	15
AIMOVIG.....	79	<i>all day pain relief sinus</i> .....	182
AIRBORNE LOZ .....	157	ALLANTOIN POW.....	130
AIRZONE PEAK MIS FLOW MTR.....	182	ALLBEE-T TAB.....	157
AKEEGA TAB 100/500 .....	36	ALLCLENZ LIQ.....	207

This document includes a list of drugs covered on our formulary as of July 1, 2024. You can find information on what the symbols and abbreviations on this table mean by going to page 7.

<i>aller-chlor</i> .....	178
<i>aller-ease</i> .....	178
<i>aller-ease childrens</i> .....	178
<i>allerest</i> .....	182
<i>allergy</i> .....	178
<i>allergy childrens</i> .....	178
<i>allergy cream</i> .....	203
<i>allergy multi-symptom</i> .....	182
<i>allergy multi-symptom nig</i> .....	182
<i>allergy rapid melts child</i> .....	178
<i>allergy relief maximum st</i> .....	203
ALLERGY/SINU TAB HEADACHE .....	182
<i>allevacaine</i> .....	221
ALLFEN .....	182
<i>allfen dm</i> .....	182
<i>all-nite multi-symptom co</i> .....	182
<i>allopurinol</i> .....	10
<i>almond oil (sweet)</i> .....	130
ALOE VESTA 2-N-1 ANTIFUNG .....	201
<i>aloe vesta 2-n-1 body was</i> .....	207
ALOE VESTA 2-N-1 SKIN CON .....	207
ALOE VESTA LIQ WHIRLBTH .....	182
<i>alophen</i> .....	107
<i>alose tron hcl</i> .....	112
ALP HIGH3 CAP 600MG .....	150
<i>alpha betic</i> .....	150
ALPHA LIPOIC ACID .....	150
ALPHA-LIPOIC ACID.....	150
<i>alpha-lipoic acid (thioctic acid)</i> .....	150
<i>alphasoft</i> .....	207
<i>alph-e-mixed</i> .....	157
<i>alph-e-mixed 1000</i> .....	157
<i>alprazolam</i> .....	62
ALREX.....	172
<i>altalube</i> .....	174
<i>altarussin</i> .....	182
<i>altarussin dm</i> .....	182
<i>altazine moisture relief</i> .....	172
<i>altorex</i> .....	119
<i>alum (ammonium) powder</i> .....	130
ALUM AMMONIU POW .....	130
ALUMINUM CHLORIDE .....	207
ALUMINUM HYDROXIDE .....	100
<i>aluminum hydroxide gel</i> .....	100
<i>aluminum hydroxide gel su</i> .....	100
ALUNBRIG .....	39
ALUNBRIG PAK.....	39
ALVAIZ .....	121
ALVESCO .....	198
<i>amantadine hcl</i> .....	65

<i>ambi 10peh/400gfn</i> .....	182
<i>ambi 10peh/400gfn/20dm</i> .....	182
<i>ambi 12.5cpd/1dcpm/30pse</i> .....	183
<i>ambi 40pse/400gfn</i> .....	183
AMBI 60PSE/ TAB 400GFN.....	183
<i>ambitussin ac</i> .....	183
<i>ambizine</i> .....	104
<i>ambrisentan</i> .....	62
<i>ameda triple zero lanolin</i> .....	207
<i>americerin</i> .....	207
AMERIGEL LOT BARRIER .....	207
<i>ameriphor</i> .....	207
<i>amikacin sulfate</i> .....	19
<i>amiloride &amp; hydrochlorothiazide tab 5-50</i> <i>mg</i> .....	59
<i>amiloride hcl</i> .....	60
AMINO-MIN-D CAP.....	157
<i>amiodarone hcl</i> .....	55
<i>amitriptyline hcl</i> .....	63
<i>amlactin</i> .....	207
<i>amlodipine besylate</i> .....	58
<i>amlodipine besylate-benazepril hcl cap 10-</i> <i>20 mg</i> .....	50
<i>amlodipine besylate-benazepril hcl cap 10-</i> <i>40 mg</i> .....	50
<i>amlodipine besylate-benazepril hcl cap 2.5-</i> <i>10 mg</i> .....	50
<i>amlodipine besylate-benazepril hcl cap 5-</i> <i>10 mg</i> .....	50
<i>amlodipine besylate-benazepril hcl cap 5-</i> <i>20 mg</i> .....	50
<i>amlodipine besylate-benazepril hcl cap 5-</i> <i>40 mg</i> .....	50
<i>amlodipine besylate-olmesartan medoxomil</i> <i>tab 10-20 mg</i> .....	52
<i>amlodipine besylate-olmesartan medoxomil</i> <i>tab 10-40 mg</i> .....	52
<i>amlodipine besylate-olmesartan medoxomil</i> <i>tab 5-20 mg</i> .....	52
<i>amlodipine besylate-olmesartan medoxomil</i> <i>tab 5-40 mg</i> .....	52
<i>amlodipine besylate-valsartan tab 10-160</i> <i>mg</i> .....	53
<i>amlodipine besylate-valsartan tab 10-320</i> <i>mg</i> .....	53
<i>amlodipine besylate-valsartan tab 5-160</i> <i>mg</i> .....	52
<i>amlodipine besylate-valsartan tab 5-320</i> <i>mg</i> .....	52
AMMENS MEDIC POW .....	207

This document includes a list of drugs covered on our formulary as of July 1, 2024. You can find information on what the symbols and abbreviations on this table mean by going to page 7.



AMMONIUM GRA CHLORIDE .....	130
<i>amnestem</i> .....	200
<i>amoxapine</i> .....	63
<i>amoxicillin</i> .....	32
<i>amoxicillin &amp; k clavulanate chew tab 200-28.5 mg</i> .....	32
<i>amoxicillin &amp; k clavulanate chew tab 400-57 mg</i> .....	32
<i>amoxicillin &amp; k clavulanate for susp 200-28.5 mg/5ml</i> .....	32
<i>amoxicillin &amp; k clavulanate for susp 250-62.5 mg/5ml</i> .....	32
<i>amoxicillin &amp; k clavulanate for susp 400-57 mg/5ml</i> .....	32
<i>amoxicillin &amp; k clavulanate for susp 600-42.9 mg/5ml</i> .....	32
<i>amoxicillin &amp; k clavulanate tab 250-125 mg</i> .....	32
<i>amoxicillin &amp; k clavulanate tab 500-125 mg</i> .....	32
<i>amoxicillin &amp; k clavulanate tab 875-125 mg</i> .....	32
<i>amoxicillin &amp; k clavulanate tab er 12hr 1000-62.5 mg</i> .....	32
<i>amphetamine-dextroamphetamine cap er 24hr 10 mg</i> .....	76
<i>amphetamine-dextroamphetamine cap er 24hr 15 mg</i> .....	76
<i>amphetamine-dextroamphetamine cap er 24hr 20 mg</i> .....	76
<i>amphetamine-dextroamphetamine cap er 24hr 25 mg</i> .....	76
<i>amphetamine-dextroamphetamine cap er 24hr 30 mg</i> .....	77
<i>amphetamine-dextroamphetamine cap er 24hr 5 mg</i> .....	76
<i>amphetamine-dextroamphetamine tab 10 mg</i> .....	77
<i>amphetamine-dextroamphetamine tab 12.5 mg</i> .....	77
<i>amphetamine-dextroamphetamine tab 15 mg</i> .....	77
<i>amphetamine-dextroamphetamine tab 20 mg</i> .....	77
<i>amphetamine-dextroamphetamine tab 30 mg</i> .....	77
<i>amphetamine-dextroamphetamine tab 5 mg</i> .....	77
<i>amphetamine-dextroamphetamine tab 7.5 mg</i> .....	77
<i>amphotericin b</i> .....	23

<i>amphotericin b liposome</i> .....	23
<i>ampicillin</i> .....	32
<i>ampicillin &amp; sulbactam sodium for inj 1.5 (1-0.5) gm</i> .....	32
<i>ampicillin &amp; sulbactam sodium for inj 3 (2-1) gm</i> .....	33
<i>ampicillin &amp; sulbactam sodium for iv soln 1.5 (1-0.5) gm</i> .....	33
<i>ampicillin &amp; sulbactam sodium for iv soln 15 (10-5) gm</i> .....	33
<i>ampicillin &amp; sulbactam sodium for iv soln 3 (2-1) gm</i> .....	33
<i>ampicillin sodium</i> .....	33
<i>amplify relief mm</i> .....	207
<i>anacin</i> .....	10
ANACIN TAB 400-30MG .....	10
ANACIN TAB MAX STR.....	10
<i>anagrelide hcl</i> .....	121
<i>analgesia</i> .....	207
ANALPRAM-HC LOT 2.5%.....	207
<i>anastrozole</i> .....	36
ANBESOL .....	221
<i>anbesol cold sore therapy</i> .....	221
ANBESOL MAXIMUM STRENGTH.....	221
<i>anecream</i> .....	207
<i>anecream5</i> .....	208
<i>animal chewable multiple</i> .....	157
<i>animal chews</i> .....	157
ANIMAL SHAPE CHW IRON .....	157
<i>animal shapes plus extra</i> .....	157
ANISE FLAVOR OIL .....	131
ANORO ELLIPT AER 62.5-25 .....	177
<i>antacid</i> .....	100
ANTACID .....	100
<i>antacid double strength</i> .....	100
<i>antacid extra strength</i> .....	100
<i>antacid ultra strength</i> .....	100
<i>anti gas</i> .....	112
ANTIBIOTIC CRE.....	201
<i>anti-dandruff shampoo</i> .....	208
<i>anti-diarrheal</i> .....	102
<i>antifungal</i> .....	202
ANTI HIST NAS TAB DECONGES.....	183
ANTI-ITCH LOT 1%.....	208
<i>anti-itch medication</i> .....	208
ANTIMINTH SUS 250/5ML.....	19
ANTIOXIDANT CAP.....	157
ANTIOXIDANT CHW VITAMINS .....	157
<i>antioxidant pack</i> .....	157
ANTIPHLOGIST CRE.....	208

This document includes a list of drugs covered on our formulary as of July 1, 2024. You can find information on what the symbols and abbreviations on this table mean by going to page 7.

<i>antiseptic</i> .....	208	<i>artificial tears</i> .....	174
<i>antiseptic cleanser</i> .....	228	<i>ascarel</i> .....	19
<i>antiseptic skin cleanser</i> .....	208	ASCENSIA MIS AUTODISC.....	94
ANTITUSS CG/ SYP CODEINE .....	183	ASCOCID POW.....	158
<i>anusol-hc</i> .....	208	ASCOCID-1000 TAB .....	158
APACET CHW 80MG .....	11	ASCORBIC ACD POW .....	131
APATATE LIQ.....	157	<i>ascorbic acid</i> .....	158
APETEX ELX.....	157	<i>ascorbic acid oral crystals</i> .....	158
APETIGEN TAB PLUS.....	157	ASCRIPITIN TAB.....	11
APETIGEN-PLS SOL.....	157	<i>asenapine maleate</i> .....	67
<i>apetonic</i> .....	158	<i>aspercreme arthritis pain</i> .....	11
AP-HIST DM LIQ 7.5-4-15.....	183	ASPERCREME/ALOE .....	208
APPEAREX .....	158	<i>aspirin</i> .....	11
<i>aprepitant</i> .....	104	ASPIRIN .....	11
<i>aprepitant capsule therapy pack 80 &amp; 125</i> <i>mg</i> .....	104	<i>aspirin 81</i> .....	11
APTIOM .....	71	<i>aspirin adult low dose</i> .....	11
APTIVUS .....	24	<i>aspirin adult low strengt</i> .....	11
<i>aqua care</i> .....	208	<i>aspirin buffered tab 500 mg</i> .....	11
AQUA CARE .....	208	<i>aspirin ec low dose</i> .....	11
<i>aqua lube</i> .....	208	<i>aspirin enteric coated ad</i> .....	11
<i>aqua net conditon norm</i> .....	208	<i>aspirin low dose</i> .....	11
AQUABASE OIN.....	131	<i>aspirin powder</i> .....	11
AQUA-E .....	158	<i>aspirin regimen</i> .....	11
AQUANAZ TAB.....	183	<i>aspirin-caffeine tab 400-32 mg</i> .....	11
AQUAPHILIC OIN.....	208	<i>aspirin-dipyridamole cap er 12hr 25-200</i> <i>mg</i> .....	122
AQUAPHOR 3 IN 1 DIAPER RA.....	208	<i>aspir-low</i> .....	11
AQUASITE PAD 4.....	208	ASSURE ID MIS 30GX3/16 .....	94
AQUASOL E.....	158	ASSURE ID MIS 30GX5/16 .....	94
AQUASOL E CAP 100IU.....	158	ASTAGRAF XL.....	127
AQUASOL E CAP 400IU.....	158	<i>asthmanefrin refill</i> .....	195
<i>aquavit-e</i> .....	158	ASTRING-O-SO LIQ MTHWASH.....	221
ARALAST NP.....	195	<i>atazanavir sulfata</i> .....	24
ARCALYST .....	126	<i>atenolol</i> .....	58
<i>arctic relief pain reliev</i> .....	208	<i>atenolol &amp; chlorthalidone tab 100-25 mg</i> .57	
<i>arctic relief roll-on pai</i> .....	208	<i>atenolol &amp; chlorthalidone tab 50-25 mg</i> ....57	
AREXVY .....	128	<i>athletes foot powder spra</i> .....	202
<i>arginine</i> .....	150	<i>atomoxetine hcl</i> .....	77
ARGININE.....	150	<i>atorvastatin calcium</i> .....	56
ARGININE CAP 500 MG.....	150	<i>atovaquone</i> .....	19
ARGININE2000.....	150	<i>atovaquone-proguanil hcl tab 250-100 mg</i> .....	24
ARGLAES POW .....	208	<i>atovaquone-proguanil hcl tab 62.5-25 mg</i> .....	24
<i>aripiprazole</i> .....	67	ATROPINE SULFATE.....	174
ARISTADA .....	67	<i>atropine sulfate (ophthalmic)</i> .....	174
ARISTADA INITIO .....	67	ATROVENT HFA .....	178
<i>armodafinil</i> .....	82	AUGTYRO.....	39
ARNUITY ELLIPTA.....	198	<i>auraphene-b</i> .....	228
<i>arthritis pain reliever</i> .....	11	<i>auro-dri</i> .....	228
<i>arthritis pain relieving</i> .....	208		
<i>arthx ds</i> .....	150		

This document includes a list of drugs covered on our formulary as of July 1, 2024. You can find information on what the symbols and abbreviations on this table mean by going to page 7.

AUSTEDO .....	80
AUSTEDO XR.....	80
AUSTEDO XR TAB TITR KIT .....	80
AUTOLET PLAT MIS 1.8MM.....	94
AUVELITY TAB 45-105MG.....	63
AVAIL TAB.....	158
AVEENO ANTI- LOT ITCH .....	208
AVEENO BABY SOOTHING RELI .....	208
AVEENO SKIN OIL RELIEF .....	208
<i>ayr nasal drops</i> .....	195
AYR NASAL DROPS.....	195
AYR NASAL MIST ALLERGY & .....	195
AYR SALINE KIT NETI RNS.....	195
<i>ayr saline nasal</i> .....	196
AYVAKIT.....	39
<i>azacitidine</i> .....	35
<i>azathioprine</i> .....	127
<i>azelastine hcl</i> .....	178
<i>azelastine hcl (ophth)</i> .....	172
<i>azithromycin</i> .....	31
<i>azo dine</i> .....	115
<i>azo dine maximum strength</i> .....	115
<i>azo d-mannose</i> .....	150
AZOLEN TINCTURE.....	202
<i>aztreonam</i> .....	20

**B**

<i>b complete</i> .....	158
B COMPLEX +C TAB TR .....	158
<i>b complex maxi</i> .....	158
B COMPLEX TAB FORM #1 .....	158
B COMPLEX/FO TAB .....	158
B-1.....	158
<i>b-100</i> .....	159
B-100 COMPLX TAB.....	159
<i>b-100 tr</i> .....	159
B-12 .....	158
B-12 DOTS.....	159
B-12 DUAL SPECTRUM.....	159
<i>b12 fast dissolve</i> .....	158
B-12 QUICK DISSOLVE.....	159
B-12 SUB 1000MCG.....	159
B-12 SUPER STRENGTH .....	159
<i>b-12 tr</i> .....	159
B-6.....	158
BABY ANBESOL.....	221
BABY DARLNG POW PED ELEC.....	136
BABY DDROPS .....	159
<i>baby ease</i> .....	209
BABY EYELID PAD CLEANSER .....	209

BABY MONKEY CRE 2-12%.....	209
<i>baby oral pain</i> .....	221
<i>baby super daily d3</i> .....	159
<i>baby teething</i> .....	221
<i>baby teething pain medici</i> .....	221
<i>baby vitamin</i> .....	159
<i>baby vitamin a &amp; d</i> .....	209
<i>baby vitamin/iron</i> .....	159
BACIGUENT.....	201
<i>bacitracin (ophthalmic)</i> .....	171
<i>bacitracin (topical)</i> .....	201
<i>bacitracin zinc</i> .....	201
<i>bacitracin-polymyxin b ophth oint</i> .....	171
<i>bacitracin-polymyxin-neomycin-hc ophth oint 1%</i> .....	170
BACK PAINOFF TAB .....	11
<i>baclofen</i> .....	81
BAFIERTAM .....	80
BALANCE B-50 TAB.....	160
BALMEX .....	209
BALMEX ADULT CARE .....	209
BALMEX COMPLETE PROTECTIO .....	209
<i>balsalazide disodium</i> .....	106
BALVERSA .....	40
<i>banophen</i> .....	178
BARACLUDGE.....	28
BASAGLAR KWIKPEN .....	88
BASIS FACIAL CRE MOIST .....	209
<i>bayer aspirin ec low dose</i> .....	11
<i>bayer chewable low dose</i> .....	11
<i>bayer low dose</i> .....	11
BAYER PLUS TAB 500MG.....	11
BAYER PM TAB 38.3-500.....	82
BAYER WOMENS TAB 81-300MG.....	12
BAZA CLEANSE & PROTECT.....	209
BC FAST PAIN POW RELIEF.....	12
BC FAST PAIN POW RLF ARTH .....	12
BCG VACCINE .....	128
BD ALCOHOL SWABS.....	88
BD GLUCOSE .....	93
BD PEN NEEDL MIS 29GX12.7 .....	94
BD PEN NEEDL MIS 32GX6MM .....	95
BEELITH TAB .....	140
BELL-ANS TAB 650MG.....	100
BENADRYL ALLERGY.....	178
BENADRYL CAP 25MG.....	178
BENADRYL CRE 2% EX ST .....	203
BENADRYL MAXIMUM STRENGTH .....	203
BENADRYL SPR 2-0.1% .....	203
BENADRYL TAB 25MG.....	178

This document includes a list of drugs covered on our formulary as of July 1, 2024. You can find information on what the symbols and abbreviations on this table mean by going to page 7.

BENADRYL TAB ALL/COLD.....	183
<i>benazepril &amp; hydrochlorothiazide tab 10-12.5 mg</i> .....	50
<i>benazepril &amp; hydrochlorothiazide tab 20-12.5 mg</i> .....	50
<i>benazepril &amp; hydrochlorothiazide tab 20-25 mg</i> .....	50
<i>benazepril &amp; hydrochlorothiazide tab 5-6.25mg</i> .....	50
<i>benazepril hcl</i> .....	51
BENDEKA.....	34
<i>benefiber on the go</i> .....	107
BENEFIBER POW .....	107
BENGAY CRE GREASLES .....	209
<i>bengay pain relief/massag</i> .....	209
BENLYSTA .....	127
BENYLIN SYP 15MG/5ML.....	183
BENYLIN-DME LIQ .....	183
BENZEDREX INH .....	183
<i>benzodent</i> .....	222
BENZOIN CMPD TIN.....	209
<i>benzoin compound tincture</i> .....	209
BENZOIN TIN.....	209
<i>benzoin tincture</i> .....	209
<i>benzonatate</i> .....	183
<i>benz-o-sthetic</i> .....	221
BENZ-O-STHETIC.....	222
<i>benzoyl peroxide</i> .....	200
<i>benzoyl peroxide cleanser</i> .....	200
BENZOYL PEROXIDE CLEANSER.....	200
<i>benzoyl peroxide-erythromycin gel 5-3%</i> .....	200
<i>benztropine mesylate</i> .....	65
BENZYL ALC LIQ.....	131
BERINERT.....	121
BERRI-FREEZ PAIN RELIEVIN .....	209
BESIVANCE.....	171
BESREMI.....	38
BETA CAROTEN CAP 25000UNT .....	160
<i>beta carotene</i> .....	160
BETADINE .....	209
BETADINE PREPSTICK.....	209
BETADINE SCR SOL 7.5% .....	209
<i>betaine powder for oral solution</i> .....	95
<i>betamethasone dipropionate (topical)</i> .....	204
<i>betamethasone dipropionate augmented</i> .....	204
<i>betamethasone valerate</i> .....	204
BETASAL SHA 3% .....	209
<i>betasept surgical scrub</i> .....	209
BETASERON .....	80

<i>betaxolol hcl</i> .....	58
<i>betaxolol hcl (ophth)</i> .....	173
<i>bethanechol chloride</i> .....	115
BETOPTIC-S.....	173
BEVESPI AER 9-4.8MCG .....	177
<i>bexarotene</i> .....	38
<i>bexarotene (topical)</i> .....	209
BEXSERO INJ .....	128
<i>bicalutamide</i> .....	36
BICARSIM .....	112
BICARSIM FORTE.....	112
BICILLIN L-A .....	33
<i>bidex</i> .....	183
BIFERA TAB 28MG.....	119
BIKTARVY TAB 30-120-15 MG .....	26
BIKTARVY TAB 50-200-25 MG .....	26
BILI-LABSTIX TES STRIPS .....	95
<i>bio t pres</i> .....	183
BIO-D-MULSION .....	160
BIO-D-MULSION FORTE.....	160
<i>biofed</i> .....	183
BIOFLAVINOID POW LEMON .....	131
BIOFLAVONOID POW CITRUS.....	131
BIO-FLAX .....	150
<i>biofreeze</i> .....	210
<i>bioginkgo 24/6</i> .....	150
<i>biolle gel tears</i> .....	174
<i>biolle tears</i> .....	174
<i>biotin</i> .....	160
BIOTIN.....	160
BIOTIN FORTE TAB .....	160
BIOTIN FORTE TAB /ZINC.....	160
BIOVOL SYP.....	160
<i>bisac-evac</i> .....	107
BISMUTH POW SUBNITRA .....	131
BISMUTH SUBC POW .....	131
<i>bismuth subcarbonate powder</i> .....	131
<i>bismuth subnitrate powder</i> .....	131
<i>bismuth subsalicylate</i> .....	102
<i>bisoprolol &amp; hydrochlorothiazide tab 10-6.25 mg</i> .....	57
<i>bisoprolol &amp; hydrochlorothiazide tab 2.5-6.25 mg</i> .....	57
<i>bisoprolol &amp; hydrochlorothiazide tab 5-6.25 mg</i> .....	57
<i>bisoprolol fumarate</i> .....	58
BIVIGAM .....	126
BL BORIC ACI POW.....	131
<i>bl brewers yeast</i> .....	160
<i>bl calcium 500/d</i> .....	140

This document includes a list of drugs covered on our formulary as of July 1, 2024. You can find information on what the symbols and abbreviations on this table mean by going to page 7.

<i>bl calcium 600 + d</i> .....	140
<i>bl calcium citrate+d</i> .....	140
<i>bl calcium/magnesium/zinc</i> .....	141
<i>bl cold &amp; hot therapy bal</i> .....	210
<i>bl epsom salt</i> .....	107
<i>bl flax seed oil</i> .....	150
BL GLUCOSE .....	93
BL GLYCERIN LIQ.....	131
<i>bl headache pm</i> .....	82
<i>bl iron</i> .....	119
BL ISOPROPYL ALCOHOL .....	210
<i>bl isopropyl rubbing alco</i> .....	210
BL ISOPROPYL RUBBING ALCO .....	210
<i>bl laxative pills</i> .....	107
<i>bl magnesium</i> .....	141
<i>bl magnesium citrate</i> .....	107
<i>bl miconazole 3</i> .....	116
<i>bl mineral oil</i> .....	107
BL MINERAL OIL LIGHT .....	210
BL MOTION SI TAB 25MG .....	104
<i>bl natural fiber</i> .....	107
<i>bl niacin tr</i> .....	160
<i>bl permethrin</i> .....	220
BL PETROLEUM OIN JELLY.....	131
<i>bl prenatal vitamins</i> .....	160
<i>bl wart remover</i> .....	210
BL WITCH HAZ LIQ 86%.....	210
BLENDED SUSP SUS COMPOUND .....	131
BLINK TEARS LUBRICATING E .....	174
BLISTEX OIN MEDICATE .....	222
<i>blue gel</i> .....	210
BLUE STAR OIN .....	210
B-NATAL .....	159
BONE MEAL TAB .....	141
<i>bonine</i> .....	104
BOOSTRIX INJ .....	128
BORIC ACID GRA .....	210
<i>boric acid granules</i> .....	210
<i>boric acid powder</i> .....	131
<i>bortezomib</i> .....	40
BORTEZOMIB.....	40
<i>bosentan</i> .....	62
BOSULIF .....	40
BOUDREAUXS BUTT PASTE.....	210
BPROTECT PED DRO TRI-VITE.....	160
BRAFTOVI.....	40
BREO ELLIPTA INH 100-25 .....	199
BREO ELLIPTA INH 200-25 .....	199
BREO ELLIPTA INH 50-25MCG.....	199
BREZTRI AERO AER SPHERE .....	177

BREZTRI AERO AER SPHERE (INSTITUTIONAL PACK) .....	177
BRILINTA .....	122
<i>brimonidine tartrate</i> .....	173
<i>brinzolamide</i> .....	173
BRIVIACT .....	71
BROHIST D TAB 4-10MG .....	183
<i>bromfed dm</i> .....	183
<i>bromfenac sodium (ophth)</i> .....	172
<i>bromocriptine mesylate</i> .....	65
BROMSITE .....	172
<i>bronchial mist</i> .....	196
BRONCHITOL.....	196
<i>broncho saline</i> .....	183
BROTAPP DM LIQ 15-1-5/5 .....	183
BRUKINSA .....	40
BUBBLE GUM SYP .....	131
<i>budesonide</i> .....	106
<i>budesonide (inhalation)</i> .....	198
<i>buffered salt</i> .....	136
BUFFERIN AF TAB NITETIME.....	82
<i>bufferin extra strength</i> .....	12
BUFFERIN TAB 325MG.....	12
BUFFERIN TAB 500MG.....	12
BULL FROG SPR MOSQUITO.....	210
<i>bumetanide</i> .....	60
<i>buprenorphine</i> .....	17
<i>buprenorphine hcl</i> .....	82
<i>buprenorphine hcl-naloxone hcl sl film 12-3 mg (base equiv)</i> .....	83
<i>buprenorphine hcl-naloxone hcl sl film 2- 0.5 mg (base equiv)</i> .....	82
<i>buprenorphine hcl-naloxone hcl sl film 4-1 mg (base equiv)</i> .....	82
<i>buprenorphine hcl-naloxone hcl sl film 8-2 mg (base equiv)</i> .....	83
<i>buprenorphine hcl-naloxone hcl sl tab 2- 0.5 mg (base equiv)</i> .....	83
<i>buprenorphine hcl-naloxone hcl sl tab 8-2 mg (base equiv)</i> .....	83
<i>bupropion hcl</i> .....	63
<i>bupropion hcl (smoking deterrent)</i> .....	83
BURN SPRAY AER .....	210
<i>bupirone hcl</i> .....	62
<i>butenafine hcl</i> .....	202
<i>butorphanol tartrate</i> .....	17
BYDUREON BCISE .....	84
BYETTA .....	84

This document includes a list of drugs covered on our formulary as of July 1, 2024. You can find information on what the symbols and abbreviations on this table mean by going to page 7.

**C**

CA GLUCONATE TAB 50MG ..... 141  
 CA HI-CAL/D TAB 500MG ..... 141  
 CA PHOS DIHY POW DIBASIC ..... 141  
 CA/MG TAB ..... 141  
 CA/MG/ZN TAB ..... 141  
*cabergoline* ..... 95  
 CABOMETYX ..... 40  
 CAL CIT MAL/ TAB VITAMIND ..... 141  
 CAL/MAG TAB CHEW ..... 141  
 CAL/MAG/VITD TAB ..... 141  
 CALAMINE LOT ..... 210  
 CALAMINE LOT PHENOLAT ..... 210  
*calamine plus* ..... 210  
 CALAMINE POW ..... 210  
*calamine powder* ..... 210  
 CALAZIME SKN PST PROTECT ..... 210  
 CALC CHEWABL CHW 600 PLUS ..... 141  
 CALC CIT+D3 TAB 250-200 ..... 141  
 CALC/MAGNES TAB 333-167 ..... 141  
 CALC/VIT D3 CHW 200-200 ..... 141  
 CALC/VIT D3 CHW DISNEY ..... 141  
*calcarb 600* ..... 141  
*calcarb 600/vitamin d* ..... 141  
 CALCET CHW BITES ..... 142  
 CALCET PETIT TAB 200-250 ..... 142  
*calci-chew* ..... 142  
 CALCI-CHEW ..... 142  
*calcidol* ..... 160  
 CALCI-MAX CAP ..... 160  
 CALCI-MIX ..... 142  
*calcio del mar* ..... 142  
*calcipotriene* ..... 204  
*calcitonin (salmon) spray* ..... 90  
*calcitrate* ..... 142  
 CAL-CITRATE ..... 160  
 CAL-CITRATE TAB PLUS D ..... 141  
*calcitrene* ..... 204  
*calcitriol* ..... 99  
*calcitriol (oral)* ..... 99  
*calcium* ..... 142  
 CALCIUM 1000 TAB + D ..... 142  
*calcium 1200+d3* ..... 142  
*calcium 500/d* ..... 142  
*calcium 500+d high potenc* ..... 142  
*calcium 600 + d* ..... 142  
*calcium 600 mg w/ vitamin d tab* ..... 142  
*calcium 600 with vitamin* ..... 142  
*calcium 600-d* ..... 142

CALCIUM ACETATE ..... 142  
*calcium acetate (phosphate binder)* ..... 97, 98  
*calcium ascorbate* ..... 161  
 CALCIUM CARB POW ..... 142  
 CALCIUM CARB TAB 600MG ..... 142  
*calcium carb-cholecalcif chew tab 500 mg-2.5mcg (100 unit)* ..... 142  
*calcium carb-cholecalciferol tab 250 mg-3.125 mcg (125 unit)* ..... 142  
*calcium carb-cholecalciferol tab 500 mg-10 mcg (400 unit)* ..... 143  
*calcium carb-cholecalciferol tab 500 mg-3.125 mcg (125 unit)* ..... 142  
 CALCIUM CARBONATE ..... 100, 143  
*calcium carbonate (antacid)* ..... 100, 143  
*calcium carbonate powder* ..... 143  
*calcium carbonate-ergocalciferol tab 500 mg-5 mcg (200 unit)* ..... 143  
*calcium carbonate-vitamin d tab 250 mg-3.125 mcg (125 unit)* ..... 143  
*calcium carbonate-vitamin d tab 500 mg-3.125 mcg (125 unit)* ..... 143  
 CALCIUM CIT/ TAB VIT D ..... 143  
 CALCIUM CITR TAB + D ..... 143  
 CALCIUM CITRATE ..... 143  
*calcium citrate + d3* ..... 143  
*calcium citrate plus* ..... 161  
*calcium citrate-vitamin d tab 1500 mg-200 unit* ..... 143  
*calcium cit-vit d tab 315 mg-6.25 mcg(250 unit) (elem ca)* ..... 143  
*calcium gluconate* ..... 143  
 CALCIUM GLUCONATE ..... 143  
*calcium gluconate powder* ..... 144  
*calcium gummies* ..... 144  
*calcium hydroxide powder* ..... 131  
*calcium lactate* ..... 144  
 CALCIUM LACTATE ..... 144  
*calcium liquid caps* ..... 144  
*calcium pantothenate* ..... 161  
*calcium phos-cholecalcif chew tab 250 mg-12.5 mcg (500 unit)* ..... 144  
 CALCIUM PLUS CAP VIT D ..... 144  
*calcium polycarbophil* ..... 107  
 CALCIUM POW SACCHARA ..... 131  
 CALCIUM SOFT CHW CAMEL ..... 144  
 CALCIUM TAB 600MG ..... 144  
 CALCIUM TAB FORMULA ..... 144  
*calcium w/ magnesium tab 333-167 mg* 144  
*calcium w/ magnesium tab 500-250 mg* 144

This document includes a list of drugs covered on our formulary as of July 1, 2024. You can find information on what the symbols and abbreviations on this table mean by going to page 7.

<i>calcium w/ vitamin d &amp; k chew tab 500 mg-100 unit-40 mcg</i> .....	144	CAPZASIN-HP.....	211
CALCIUM/C/D CHW 500MG.....	144	CAPZASIN-P CRE 0.025%.....	211
CALCIUM/D TAB 600/200.....	144	<i>carb/levo orally disintegrating tab 10-100mg</i> .....	66
CALCIUM/D3 CAP 600-2500.....	144	<i>carb/levo orally disintegrating tab 25-100mg</i> .....	66
CALCIUM/MAGN TAB 250-155.....	145	<i>carb/levo orally disintegrating tab 25-250mg</i> .....	66
CALCIUM/VITD CAP 600-400.....	145	<i>carbamazepine</i> .....	71
<i>calcium-carb 600 + d</i> .....	144	CARBAPHEN CH SUS.....	184
<i>calcium-magnesium-zinc tab 333-133-8.3 mg</i> .....	144	<i>carbidopa &amp; levodopa tab 10-100 mg</i> .....	66
<i>calcium-magnesium-zinc tab 334-134-5 mg</i> .....	144	<i>carbidopa &amp; levodopa tab 25-100 mg</i> .....	66
<i>calcium-vitamin d tab 600 mg-5 mcg (200 unit)</i> .....	144	<i>carbidopa &amp; levodopa tab 25-250 mg</i> .....	66
CAL-LAC.....	141	<i>carbidopa &amp; levodopa tab er 25-100 mg</i> .....	66
CAL-MAG COMP TAB.....	141	<i>carbidopa &amp; levodopa tab er 50-200 mg</i> .....	66
CALQUENCE.....	40	<i>carbidopa-levodopa-entacapone tabs 12.5-50-200 mg</i> .....	66
CAL-QUICK LIQ 500-400.....	141	<i>carbidopa-levodopa-entacapone tabs 18.75-75-200 mg</i> .....	66
CALTRATE + D TAB 300-800.....	145	<i>carbidopa-levodopa-entacapone tabs 25-100-200 mg</i> .....	66
CALTRATE +D3 TAB 600-800.....	145	<i>carbidopa-levodopa-entacapone tabs 31.25-125-200 mg</i> .....	66
CALTRATE 600 CHW +D PLUS.....	145	<i>carbidopa-levodopa-entacapone tabs 37.5-150-200 mg</i> .....	66
CALTRATE 600 CHW 600-800.....	145	<i>carbidopa-levodopa-entacapone tabs 50-200-200 mg</i> .....	66
CALTRATE+D TAB 600-800.....	145	CARBOMER POW 1342.....	131
<i>calvite p&amp;d</i> .....	145	<i>carb-o-philic/20</i> .....	211
CAMPHOR CRY.....	211	<i>carboplatin</i> .....	34
<i>camphor crystals</i> .....	211	CARDIOTEK TAB.....	161
<i>candesartan cilexetil</i> .....	55	CAREFINE MIS 32GX5MM.....	95
<i>candesartan cilexetil-hydrochlorothiazide tab 16-12.5 mg</i> .....	53	<i>carglumic acid</i> .....	95
<i>candesartan cilexetil-hydrochlorothiazide tab 32-12.5 mg</i> .....	53	<i>carisoprodol</i> .....	81
<i>candesartan cilexetil-hydrochlorothiazide tab 32-25 mg</i> .....	53	CARMOL 10.....	211
CAPHOSOL SOL.....	222	CARMOL 20.....	211
CAPLYTA.....	67	<i>carteolol hcl (ophth)</i> .....	173
CAPMIST DM TAB.....	183	<i>cartia xt</i> .....	59
CAPRELSA.....	40	<i>carvedilol</i> .....	58
CAPRON DM LIQ.....	183	<i>caspofungin acetate</i> .....	23
CAPRON DMT TAB 30-30MG.....	184	<i>castellani paint</i> .....	202
<i>capsaicin</i> .....	211	<i>castor oil</i> .....	131
CAPSAICIN POW.....	211	CASTOR OIL.....	107, 131
<i>captopril</i> .....	51	<i>castor oil stimulant laxa</i> .....	107
<i>captopril &amp; hydrochlorothiazide tab 25-15 mg</i> .....	50	CATEMINE TAB.....	161
<i>captopril &amp; hydrochlorothiazide tab 25-25 mg</i> .....	51	<i>cavarest</i> .....	222
<i>captopril &amp; hydrochlorothiazide tab 50-15 mg</i> .....	51	CAYSTON.....	20
<i>captopril &amp; hydrochlorothiazide tab 50-25 mg</i> .....	51	C-BUFF POW.....	160
		<i>cefaclor</i> .....	30
		CEFACLOR ER.....	30

This document includes a list of drugs covered on our formulary as of July 1, 2024. You can find information on what the symbols and abbreviations on this table mean by going to page 7.

<i>cefadroxil</i> .....	30	CHEMSTRIP TES UGK.....	95
CEFAZOLIN .....	30	CHEMSTRIP-UG TES .....	95
CEFAZOLIN INJ 1GM/50ML .....	30	CHERACOL SORE THROAT .....	222
<i>cefazolin sodium</i> .....	30	CHERRY CON.....	131
CEFAZOLIN SOLN 2GM/100ML-4%.....	30	<i>cherry cough drops</i> .....	222
<i>cefdinir</i> .....	30	<i>cherry syrup</i> .....	132
<i>cefepime hcl</i> .....	30	<i>chest congestion &amp; pain r</i> .....	184
<i>cefixime</i> .....	30	<i>chest congestion relief d</i> .....	184
<i>cefoxitin sodium</i> .....	30	CHEW Q.....	150
<i>cefepodoxime proxetil</i> .....	30	CHEW Q CHW 100MG .....	151
<i>cefprozil</i> .....	30	CHEW Q CHW 600MG .....	151
<i>ceftazidime</i> .....	30	<i>childrens acetaminophen</i> .....	12
<i>ceftriaxone sodium</i> .....	30	CHILDRENS ADVIL.....	15
<i>cefuroxime axetil</i> .....	30	CHILDRENS CHW COMPLETE .....	161
<i>cefuroxime sodium</i> .....	30	<i>childrens ibuprofen</i> .....	15
<i>celecoxib</i> .....	15	CHILDRENS MOTRIN JUNIOR S .....	15
CELLOTHYL TAB 500MG .....	107	<i>childrens plus multi-symp</i> .....	184
<i>centrum kids complete</i> .....	161	<i>childrens pseuphedrin</i> .....	184
CENTRUM SPEC PAK PRENATAL .....	161	CHILDRENS SUS PLUS CLD .....	184
CEO-TWO SUP .....	107	<i>childs allergy cold/cough</i> .....	184
CEPACOL .....	222	CHLD NON-ASA TAB 80MG .....	12
CEPACOL DUAL SPR RELIEF.....	222	CHLO HIST SOL.....	184
CEPACOL FIZZLERS .....	222	CHLO TUSS LIQ.....	184
CEPACOL LOZ 15-2.3MG.....	222	<i>chloraseptic gargle</i> .....	223
CEPACOL LOZ 15-20MG .....	222	CHLORASEPTIC LOZ 6-10MG.....	223
CEPACOL LOZ EXTRA ST.....	222	CHLORASEPTIC LOZ CHERRY .....	223
CEPACOL LOZ INSTAMAX .....	222	CHLORASEPTIC LOZ CITRUS .....	223
CEPACOL MAX LOZ NUMBING.....	222	CHLORASEPTIC LOZ HONY LEM.....	223
CEPACOL REGULAR STRENGTH.....	222	CHLORASEPTIC LOZ MAX.....	223
CEPACOL SORE LOZ 10-2.1MG .....	222	CHLORASEPTIC LOZ MENTHOL.....	223
CEPACOL SORE LOZ 15-3.6MG .....	222	CHLORASEPTIC MIS .....	223
CEPACOL SORE LOZ THRT MAX .....	222	CHLORASEPTIC MIS KIDS.....	223
CEPACOL SORE SPR 0.1-33%.....	222	<i>chloraseptic warming sore</i> .....	223
CEPACOL SORE THROAT .....	222	CHLORASEPTIC WARMING SORE .....	223
CEPACOL SORE THROAT/POST.....	222	CHLORELLA CAP.....	161
<i>cephalexin</i> .....	30	<i>chlorhexidine gluconate (mouth-throat)</i> .....	223
CERALYTE 50 LIQ.....	136	CHLOROFORM SOL .....	132
CERASPORT SOL .....	136	<i>chloroform soln</i> .....	132
<i>cerave baby</i> .....	211	<i>chloroquine phosphate</i> .....	24
CERDELGA .....	95	<i>chlorpromazine hcl</i> .....	67
CEREZYME .....	95	<i>chlorthalidone</i> .....	60
<i>cetirizine hcl</i> .....	179	CHLOR-TRIMETON .....	179
CETYL ALCOHO GRA .....	131	CHLOR-TRIMETON REPETABS .....	179
<i>cevimeline hcl</i> .....	222	<i>chocolated laxative</i> .....	107
<i>charcoal activated powder</i> .....	95	<i>cholecalciferol</i> .....	161
CHARCOAL POW .....	95	<i>cholestyramine</i> .....	56
CHELATED CALCIUM .....	145	<i>cholestyramine light</i> .....	56
CHELATED MG TAB 100MG .....	145	CHROMIUM PIC TAB 500MCG.....	161
CHELATED MUL TAB MINERAL.....	145	<i>ciclopirox olamine</i> .....	202
CHEMET .....	91	<i>cidaflex</i> .....	151

This document includes a list of drugs covered on our formulary as of July 1, 2024. You can find information on what the symbols and abbreviations on this table mean by going to page 7.



<i>cidatine</i> .....	151	CLINIMIX INJ 8/10.....	140
<i>cilostazol</i> .....	121	CLINIMIX INJ 8/14.....	140
CILOXAN.....	171	<i>clinisol sf 15%</i> .....	140
CIMDUO TAB 300-300 .....	26	CLINI-TEK MIS .....	95
<i>cimetidine tab 200 mg</i> .....	106	CLINOLIPID EMU 20%.....	140
<i>cinacalcet hcl</i> .....	95	<i>clobazam</i> .....	71
CIPRO .....	31	<i>clobetasol propionate</i> .....	204, 205
<i>ciprofloxacin 200 mg/100ml in d5w</i> .....	31	<i>clobetasol propionate e</i> .....	205
<i>ciprofloxacin 400 mg/200ml in d5w</i> .....	31	CLOFERA LIQ.....	184
<i>ciprofloxacin hcl</i> .....	31	<i>clomipramine hcl</i> .....	64
<i>ciprofloxacin hcl (ophth)</i> .....	171	<i>clonazepam</i> .....	71
<i>ciprofloxacin-dexamethasone otic susp 0.3-0.1%</i> .....	177	<i>clonidine</i> .....	60
<i>cisplatin</i> .....	34	<i>clonidine hcl</i> .....	60
<i>citalopram hydrobromide</i> .....	63	<i>clopidogrel bisulfate</i> .....	122
CITRACAL CAL CHW GUMMIES.....	145	<i>clorazepate dipotassium</i> .....	71
CITRACAL CAL TAB +D SLOW .....	145	CLORPACTIN WCS-90.....	211
CITRACAL TAB MAXIMUM .....	145	<i>clotrimazole</i> .....	223
CITRACAL TAB VIT D.....	145	<i>clotrimazole (topical)</i> .....	202
CITRACAL+D3 CHW 250-500.....	145	CLOTRIMAZOLE CRE 2% .....	116
CITRIC ACID GRA .....	132	<i>clotrimazole vaginal</i> .....	116
<i>citric acid granules</i> .....	132	<i>clotrimazole w/ betamethasone cream 1-0.05%</i> .....	202
<i>citric acid powder</i> .....	132	<i>clove oil</i> .....	132
CITRUCEL POW ORANGE.....	107	CLOVE OIL.....	132
CL PRENATAL TAB 28-0.8MG .....	161	CLOVERINE OIN SALVE.....	202
<i>claravis</i> .....	200	<i>clozapine</i> .....	67, 68
<i>clarithromycin</i> .....	31	CNTC CLD/FLU TAB DAY/NGHT.....	184
CLARITIN.....	179	CO Q10 .....	151
CLEAN START TAB VAPORIZE .....	184	CO Q-10 .....	151
CLEAR COUGH LIQ PM .....	184	COARTEM TAB 20-120MG .....	24
<i>clearlax</i> .....	107	COATS ALOE CREME .....	211
<i>clindamycin hcl</i> .....	20	COATS ALOE GELLY .....	211
<i>clindamycin palmitate hydrochloride</i> .....	20	COATS ALOE MOISTURIZING L.....	211
<i>clindamycin phosphate</i> .....	20	<i>cocoa butter</i> .....	132
<i>clindamycin phosphate (topical)</i> .....	200	COCOA BUTTER LOT.....	132
<i>clindamycin phosphate in d5w iv soln 300 mg/50ml</i> .....	20	<i>coconut oil</i> .....	132
<i>clindamycin phosphate in d5w iv soln 600 mg/50ml</i> .....	20	COD LIVER OIL.....	161
<i>clindamycin phosphate in d5w iv soln 900 mg/50ml</i> .....	20	<i>codar gf</i> .....	184
<i>clindamycin phosphate vaginal</i> .....	116	CODITUSSIN LIQ AC .....	184
CLINDMYC/NAC INJ 300/50ML .....	20	CODITUSSIN LIQ DAC.....	184
CLINDMYC/NAC INJ 600/50ML .....	20	COENZYME Q10 .....	151
CLINDMYC/NAC INJ 900/50ML .....	20	COENZYME Q-10.....	151
CLINIMIX INJ 4.25/D10.....	140	<i>coenzyme q10 (ubidecarenone)</i> .....	151
CLINIMIX INJ 4.25/D5W .....	139	CO-ENZYME WAF Q10/E .....	151
CLINIMIX INJ 5%/D15W .....	140	COLACE .....	107
CLINIMIX INJ 5%/D20W .....	140	<i>colace 2-in-1</i> .....	107
CLINIMIX INJ 6/5 .....	140	<i>colace adult</i> .....	107
		COLACE CAP 100MG.....	108
		COLACE LIQ 150/15ML.....	108
		<i>colace pediatric</i> .....	108

This document includes a list of drugs covered on our formulary as of July 1, 2024. You can find information on what the symbols and abbreviations on this table mean by going to page 7.

COLACE SYP 60/15ML.....	108	CORICIDN HBP TAB 2-325MG.....	185
<i>colchicine</i> .....	10	CORICIDN HBP TAB CGH&COLD.....	185
<i>colchicine w/ probenecid tab 0.5-500 mg</i>	10	CORLANOR.....	60, 61
<i>cold &amp; flu relief nightti</i> .....	184	<i>corn fix</i> .....	212
<i>cold head congestion day/</i> .....	184	COROMEGA EMU OMEGA 3.....	151
<i>cold head congestion dayt</i> .....	184	COROMEGA MIS.....	151
<i>cold relief plus</i> .....	184	CORTIZONE-10 CRE 1%.....	205
COLEMAN 100 MAX INSECT RE.....	211	<i>cortizone-10 eczema</i> .....	205
COLEMAN INSECT REPELLENT/.....	211	CORTIZONE-10 OIN 1%.....	205
COLEMN BOTAN LIQ INSECT.....	211	CORTIZONE-10 SOL SCALP 1%.....	205
COLEMN INSEC SPR SKINSMAR.....	211	COTELLIC.....	41
<i>colesevelam hcl</i> .....	56	COTTONSEED OIL.....	132
<i>colestipol hcl</i> .....	56	<i>cottontails diaper rash c</i> .....	212
<i>colistimethate sodium</i> .....	20	<i>cough &amp; chest congestion</i> .....	185
<i>collodion flexible</i> .....	132	<i>cough &amp; cold</i> .....	185
COLLODION LIQ FLEXIBLE.....	132	<i>cough cold &amp; sore throat</i> .....	185
COLLYRIUM SOL OP.....	174	<i>cough drops</i> .....	223
COMBIGAN SOL 0.2/0.5%.....	173	COUGH DROPS.....	223
COMBIVENT AER 20-100.....	177	<i>cough drops menthol</i> .....	223
COMETRIQ (60MG DOSE).....	41	<i>cough drops sugar free</i> .....	223
COMETRIQ KIT 100MG.....	41	<i>cough suppressant long-ac</i> .....	185
COMETRIQ KIT 140MG.....	41	<i>coughtab</i> .....	185
COMFEEL FILM MIS.....	211	COZIMA.....	212
COMFORT EZ MIS 33GX4MM.....	95	CRAMP TAB.....	12
COMMIT.....	83	CRANBERRY (VACCINIUM MACR.....	151
COMPLERA TAB.....	26	<i>cranberry (vaccinium macrocarpon)</i> .....	151
<i>complete lice treatment k</i> .....	220	CREON CAP 12000UNT.....	114
<i>complex b-100</i> .....	161	CREON CAP 24000UNT.....	114
COMPOUND W.....	211	CREON CAP 3000UNIT.....	114
COMPOUND W MAXIMUM STRENG.....	211	CREON CAP 36000UNT.....	114
<i>compoz</i> .....	83	CREON CAP 6000UNIT.....	114
<i>compro</i> .....	104	<i>critic-aid clear af</i> .....	202
COMTREX CLD/ PAK CGH D/NT.....	185	<i>cromolyn sodium</i> .....	196
COMTREX COLD TAB & COUGH.....	185	<i>cromolyn sodium (mastocytosis)</i> .....	112
<i>comtrex severe cold &amp; sin</i> .....	185	<i>cromolyn sodium (nasal)</i> .....	196
CONCEPTIONXR MIS MOTILITY.....	161	<i>cromolyn sodium (ophth)</i> .....	172
<i>constant-clens</i> .....	211	CROTON OIL.....	132
<i>constulose</i> .....	108	CRUEX CRE 1%.....	202
<i>contac cold+flu maximum s</i> .....	185	<i>crush vitamin c drops</i> .....	161
<i>contac-d</i> .....	185	CRYSTAL LAKE LIQ WATER.....	132
CONTROL DENT CRE ADHESIVE.....	223	CULTURELLE.....	102
COPIKTRA.....	41	CULTURELLE CAP.....	102
COPPER SULF CRY.....	140	CULTURELLE CHW DIGESTIV.....	102
COQ-10 TR.....	151	CULTURELLE CHW KIDS.....	102
COQ10/VIT E CAP 100-10.....	151	CULTURELLE KIDS.....	102
COQ10/VIT E CAP 200-200.....	151	CUTTER ALL FAMILY MOSQUIT.....	212
CORAL CALCIU CAP.....	145	<i>cvs acidophilus probiotic</i> .....	103
CORAL CALCIU CAP 1000MG.....	145	<i>cvs acne cleansing bar</i> .....	200
CORAL CAP CALCIUM.....	145	<i>cvs advanced 3-in-1 exfol</i> .....	200
<i>corfen-dm</i> .....	185	<i>cvs af spray powder</i> .....	202

This document includes a list of drugs covered on our formulary as of July 1, 2024. You can find information on what the symbols and abbreviations on this table mean by going to page 7.

<i>cv</i> s alcohol .....	212	<i>cv</i> s lubricant gel drops .....	174
<i>cv</i> s allergy relief d .....	185	<i>cv</i> s magnesium citrate .....	145
<i>cv</i> s antacid multi-symptom .....	100	<i>cv</i> s menthol drops .....	224
<i>cv</i> s anti-diarrheal .....	103	<i>cv</i> s miconazole 3 .....	116
<i>cv</i> s anti-itch .....	212	<i>cv</i> s mineral oil .....	108
<i>cv</i> s anti-itch sensitive s .....	212	<i>cv</i> s mini enema kids .....	108
<i>cv</i> s aspirin adult low str .....	12	<i>cv</i> s muscle rub .....	212
<i>cv</i> s aspirin ec .....	12	CVS NASAL MIST .....	196
<i>cv</i> s aspirin low dose .....	12	<i>cv</i> s nat fiber laxative .....	108
<i>cv</i> s aspirin low strength .....	12	<i>cv</i> s natural fiber supplem .....	108
<i>cv</i> s b-12 .....	161	<i>cv</i> s natural fish oil .....	151
CVS B12 .....	161	<i>cv</i> s niacin .....	162
<i>cv</i> s baby teething oral pa .....	223	<i>cv</i> s niacin flush free .....	162
<i>cv</i> s bismuth .....	103	<i>cv</i> s nicotine .....	83
<i>cv</i> s cherry menthol drops .....	223	<i>cv</i> s nicotine polacrilex .....	83
CVS CHEST CONGESTION CHIL .....	185	<i>cv</i> s nighttime cough .....	186
<i>cv</i> s chest congestion plus .....	185	<i>cv</i> s olopatadine hydrochlo .....	172
<i>cv</i> s chest rub medicated .....	185	<i>cv</i> s oral anesthetic maxim .....	224
<i>cv</i> s childrens vitamin d f .....	162	<i>cv</i> s oral pain reliever .....	224
<i>cv</i> s cold & cough children .....	185	<i>cv</i> s oral pain reliever ma .....	224
<i>cv</i> s cold & cough nighttim .....	185	<i>cv</i> s permethrin .....	220
<i>cv</i> s cold & flu bp .....	185	CVS PRENATAL TAB 27-0.8MG .....	162
<i>cv</i> s cold & sinus multi-sy .....	185	<i>cv</i> s quality sleep .....	152
<i>cv</i> s cough drops sugar fre .....	224	<i>cv</i> s selenium .....	145
<i>cv</i> s d3 .....	162	<i>cv</i> s selenium natural .....	145
<i>cv</i> s daily fiber .....	108	<i>cv</i> s senna .....	108
CVS DAIRY RELIEF EXTRA ST .....	105	<i>cv</i> s sore throat .....	224
<i>cv</i> s diclofenac sodiium .....	12	<i>cv</i> s sore throat maximum s .....	224
<i>cv</i> s diclofenac sodium .....	12	CVS SORE THROAT RELIEF PO .....	224
<i>cv</i> s digestive probiotic .....	103	<i>cv</i> s stuffy nose & cold ch .....	186
<i>cv</i> s disposable douche med .....	115	<i>cv</i> s throat relief pops ch .....	224
<i>cv</i> s e oil .....	162	<i>cv</i> s wart remover gel pen .....	212
<i>cv</i> s enema disposable .....	108	<i>cv</i> s zinc .....	145
CVS EPSOM GRA SALT .....	108	cyanocobalamin .....	162
<i>cv</i> s fiber .....	108	cyclobenzaprine hcl .....	81
<i>cv</i> s fiber laxative .....	108	cyclophosphamide .....	34
<i>cv</i> s flu & severe cold nig .....	185	CYCLOPHOSPHAMIDE .....	34
<i>cv</i> s gas relief drops extr .....	113	CYCLOPHOSPHAMIDE MONOHYDR .....	35
<i>cv</i> s gas relief extra stre .....	113	cycloserine .....	27
<i>cv</i> s gentle lubricant eye .....	174	cyclosporine .....	127
<i>cv</i> s glucose .....	93	cyclosporine modified (for microemulsion) .....	127
CVS GLUCOSE CHW FRUIT .....	93	<i>cy</i> proheptadine hcl .....	179
<i>cv</i> s glucose liquid shot .....	151	CYSTADROPS .....	175
<i>cv</i> s honey lemon drops .....	224	CYSTAGON .....	95
<i>cv</i> s hydrogen peroxide .....	212	CYSTARAN .....	175
<i>cv</i> s iron .....	119	<i>cy</i> tarabine .....	35
<i>cv</i> s lactase .....	105	<i>cy</i> to arg .....	152
<i>cv</i> s laxative dietary supp .....	108	CYTO B2 .....	162
<i>cv</i> s l-lysine .....	151	CYTO-Q .....	152
<i>cv</i> s lubricant eye drops .....	174		

This document includes a list of drugs covered on our formulary as of July 1, 2024. You can find information on what the symbols and abbreviations on this table mean by going to page 7.

CYTO-Q MAX.....	152
<b>D</b>	
<i>d 1000</i> .....	162
<i>d 2000</i> .....	162
<i>d 400</i> .....	162
D10W/NAACL INJ 0.2% .....	137
D2.5W/NAACL INJ 0.45%.....	137
D3 DOTS.....	162
<i>d3 maximum strength</i> .....	162
<i>d3 vitamin</i> .....	162
<i>d3-50</i> .....	162
D5W/LYTES INJ #48.....	137
DADS MENTHOL THROAT DROP.....	224
DAILY MULTI TAB VIT/IRON .....	162
<i>dairy digestive ultra</i> .....	105
DAKINS SOLUTION FULL STRE.....	212
DAKINS SOLUTION HALF STRE.....	212
DAKINS SOLUTION QUARTER S.....	212
DAKRINA SOL 2.7-2% .....	175
<i>dalfampridine</i> .....	81
<i>danazol</i> .....	91
<i>dantrolene sodium</i> .....	81
<i>dapsone</i> .....	20
DAPTACEL INJ .....	128
<i>daptomycin</i> .....	20
DAPTOMYCIN.....	20
<i>darunavir</i> .....	24
DAURISMO.....	41
DAY TIME CAP COLD/FLU .....	186
<i>daytime multi-symptom col</i> .....	186
DAYVIGO .....	78
D-BIOTIN CAP 10MG .....	162
DDROPS.....	162
DECARA .....	162
DECONEX DMX TAB.....	186
DECONEX IR TAB 10-385MG.....	186
<i>deferasirox</i> .....	91
DEKAS CAP ESSENTIA .....	163
DEKAS LIQ ESSENTIA .....	163
DEKAS PLUS LIQ .....	163
DELBASE OIN COMPOUND .....	132
DELSTRIGO TAB.....	26
DELSYM.....	186
DENGVAXIA SUS .....	128
DENTIVA LOZ .....	224
<i>dent-o-kain/20</i> .....	224
DENTS TOOTHACHE GUM.....	224
<i>depo-testosterone</i> .....	84
DERMAGRAN OIN.....	212

<i>dermamed</i> .....	212
DERMAZINC SPRAY .....	212
DESCOVY TAB 120-15MG.....	26
DESCOVY TAB 200/25MG.....	26
DESENEX MAX .....	202
<i>desipramine hcl</i> .....	64
<i>desitin</i> .....	212
DESITIN .....	212
DESITIN CREAMY .....	212
DESITIN MAXIMUM STRENGTH.....	212
<i>desitin rapid relief</i> .....	212
<i>desmopressin acetate</i> .....	95
<i>desmopressin acetate spray</i> .....	95
<i>desmopressin acetate spray refrigerated</i> .....	95
<i>despec</i> .....	186
<i>desvenlafaxine succinate</i> .....	64
DEWEES CARMINATIVE .....	100
DEX4.....	93
DEX4 FAST ACTING GLUCOSE .....	94
<i>dexamethasone</i> .....	92
DEXAMETHASONE INTENSOL.....	92
<i>dexamethasone sodium phosphate</i> .....	93
<i>dexamethasone sodium phosphate (ophth)</i> .....	172
<i>dexbrompheniramine-phenylephrine tab 2- 10 mg</i> .....	186
<i>dexmethylphenidate hcl</i> .....	77
<i>dextromethorphan hbr</i> .....	186
<i>dextromethorphan-guaifene</i> .....	186
<i>dextromethorphan-guaifenesin syrup 10- 100 mg/5ml</i> .....	186
<i>dextrose</i> .....	140
<i>dextrose (diabetic use)</i> .....	94
<i>dextrose 10% w/ sodium chloride 0.45%</i> .....	137
<i>dextrose 2.5% w/ sodium chloride 0.45%</i> .....	137
<i>dextrose 5% in lactated ringers</i> .....	137
<i>dextrose 5% w/ sodium chloride 0.2%</i> .....	137
<i>dextrose 5% w/ sodium chloride 0.225%</i> .....	137
<i>dextrose 5% w/ sodium chloride 0.3%</i> .....	137
<i>dextrose 5% w/ sodium chloride 0.45%</i> .....	137
<i>dextrose 5% w/ sodium chloride 0.9%</i> .....	137
DEXTROSE GRA ANHYDROU .....	152
DHS TAR .....	213
DHS ZINC SHA 2% .....	213
DIABETIC TUS LIQ DM .....	186
DIABETIC TUS LIQ EX .....	186
DIABETIC TUS LIQ MAX STR .....	186

This document includes a list of drugs covered on our formulary as of July 1, 2024. You can find information on what the symbols and abbreviations on this table mean by going to page 7.

DIABETIC TUSSIN COUGH DRO .....	224	<i>dipyridamole</i> .....	122
DIABETISWEET POW .....	152	<i>disopyramide phosphate</i> .....	55
DIACOMIT .....	71, 72	<i>disulfiram</i> .....	83
<i>dialyvite 800</i> .....	163	<i>divalproex sodium</i> .....	72
DIALYVITE WAF PLUS D .....	163	DL-MENTHOL CRY .....	132
DIALYVITE/ TAB ZINC.....	163	DL-METHIONIN POW .....	152
<i>diaper rash</i> .....	213	D-MANNOSE .....	152
DIASENSE MAGNESIUM .....	146	DOANS EXTRA STRENGH .....	12
<i>diazepam</i> .....	72	<i>docetaxel</i> .....	39
<i>diazepam (anticonvulsant)</i> .....	72	DOCETAXEL .....	39
<i>diazepam inj</i> .....	72	<i>docosanol</i> .....	213
<i>diazepam intensol</i> .....	72	<i>doculase</i> .....	108
<i>diazoxide</i> .....	94	<i>docusate calcium</i> .....	108
<i>dibucaine (rectal)</i> .....	213	<i>docusate sodium</i> .....	108
<i>dickinsons witch hazel</i> .....	213	DOCUSOL KIDS ENE 100MG/5M .....	108
<i>diclofenac potassium</i> .....	15	<i>docusol mini</i> .....	108
<i>diclofenac sodium</i> .....	16	<i>docusol plus mini-enema</i> .....	109
<i>diclofenac sodium (ophth)</i> .....	172	<i>dofetilide</i> .....	55
<i>diclofenac sodium (topical)</i> .....	12, 213	DOLOGEN TAB .....	186
<i>dicloxacillin sodium</i> .....	33	<i>donepezil hydrochloride</i> .....	62
<i>dicyclomine hcl</i> .....	105	DOPTLET .....	121
<i>dietary fiber laxative</i> .....	108	DORCOL LIQ DECONGES.....	186
DIFICID .....	31	<i>dorzolamide hcl</i> .....	173
<i>diflunisal</i> .....	16	<i>dorzolamide hcl-timolol maleate ophth soln</i> <i>2-0.5%</i> .....	173
<i>digoxin</i> .....	61	<i>dotti</i> .....	91
<i>dihydroergotamine mesylate</i> .....	79	DOVATO TAB 50-300MG.....	26
DILANTIN .....	72	<i>doxazosin mesylate</i> .....	52
DILANTIN INFATABS.....	72	<i>doxepin hcl</i> .....	64
DILANTIN-125 .....	72	<i>doxepin hcl (sleep)</i> .....	78
<i>diltiazem hcl</i> .....	59	<i>doxorubicin hcl</i> .....	35
<i>diltiazem hcl coated beads</i> .....	59	<i>doxorubicin hcl liposomal</i> .....	35
<i>diltiazem hcl extended release beads</i> .....	59	<i>doxy 100</i> .....	34
<i>dilt-xr</i> .....	59	<i>doxycycline (monohydrate)</i> .....	34
<i>dimenhydrinate</i> .....	104	<i>doxycycline hyclate</i> .....	34
DIMETAPP CLD ELX /ALLERGY .....	186	<i>doxylamine succinate (sleep)</i> .....	83
DIMETAPP ELX 1-15/5ML.....	186	<i>doxylamine-phenylephrine tab 7.5-10 mg</i> .....	186
DIMETAPP LIQ CHILD .....	186	DR SMITHS ADULT BARRIER .....	213
DINO-LIFE CHW IRON-ZIN .....	163	DR SMITHS ADULT BARRIER S .....	213
<i>diocto</i> .....	108	DRISDOL.....	163
DIP/TET PED INJ 25-5LFU .....	128	<i>dronabinol</i> .....	104
<i>diphenhydramine hcl</i> .....	179	DROXIA .....	122
<i>diphenhydramine hcl (sleep)</i> .....	83	<i>droxidopa</i> .....	61
<i>diphenhydramine hcl (topical)</i> .....	203	DRS CHOICE KIT CLOSURE.....	213
DIPHENHYDRAMINE HYDROCHLO .....	179	<i>dry e-synthetic</i> .....	163
<i>diphenhydramine-zinc acetate cream 2-</i> <i>0.1%</i> .....	203	DUAL RELIEF LIQ.....	224
<i>diphenoxylate w/ atropine liq 2.5-0.025</i> <i>mg/5ml</i> .....	113	DULCOLAX.....	109
<i>diphenoxylate w/ atropine tab 2.5-0.025</i> <i>mg</i> .....	113	<i>dulcolax milk of magnesia</i> .....	109
		DULERA AER 100-5MCG .....	199

This document includes a list of drugs covered on our formulary as of July 1, 2024. You can find information on what the symbols and abbreviations on this table mean by going to page 7.

DULERA AER 200-5MCG .....	199
DULERA AER 50-5MCG .....	199
<i>duloxetine hcl</i> .....	64
DUPIXENT .....	123
DURAFLU TAB .....	186
DURAVENT DM TAB .....	187
<i>dutasteride</i> .....	115
<i>dutasteride-tamsulosin hcl cap 0.5-0.4 mg</i> .....	115
D-VI-SOL .....	162
D-VITAMIN E POW SUCCINAT .....	132
DY-O-DERM VITILIGO STAIN .....	213
<b>E</b>	
<i>e.e.s. 400</i> .....	31
E600 .....	163
<i>eck a &amp; d</i> .....	213
ECK HI-CAL TAB 500MG .....	146
ECK IODINE TIN 2% .....	213
<i>eck soluble fiber</i> .....	109
<i>ec-naproxen</i> .....	16
<i>ecotrin low strength</i> .....	12
ECOTRIN LOW TAB 81MG EC .....	12
ECOTRIN MAXIMUM STRENGTH .....	12
ECOTRIN REGULAR STRENGTH .....	12
ED A-HIST DM TAB 10-4-10 .....	187
ED A-HIST LIQ 4-10/5ML .....	187
ED BRON GP LIQ .....	187
ED CHLORPED .....	179
ED CHLORPED DRO D .....	187
EDURANT .....	24
<i>efavirenz</i> .....	24
<i>efavirenz-emtricitabine-tenofovir df tab</i> <i>600-200-300 mg</i> .....	26
<i>efavirenz-lamivudine-tenofovir df tab 400-</i> <i>300-300 mg</i> .....	26
<i>efavirenz-lamivudine-tenofovir df tab 600-</i> <i>300-300 mg</i> .....	26
EFFERDENT PAK PWR CLN .....	224
EFFERDENT TAB PLUS .....	224
EHA LOTION 4% .....	213
ELA-MAX .....	213
ELA-MAX 5 .....	213
ELIGARD .....	36
ELIQUIS .....	117
ELIQUIS STARTER PACK .....	117
ELLENCÉ .....	35
ELTA SEAL MOISTURE BARRIE .....	213
EMETROL SOL .....	113
EMSAM .....	64

<i>emtricitabine</i> .....	24
<i>emtricitabine-tenofovir disoproxil fumarate</i> <i>tab 100-150 mg</i> .....	27
<i>emtricitabine-tenofovir disoproxil fumarate</i> <i>tab 133-200 mg</i> .....	27
<i>emtricitabine-tenofovir disoproxil fumarate</i> <i>tab 167-250 mg</i> .....	27
<i>emtricitabine-tenofovir disoproxil fumarate</i> <i>tab 200-300 mg</i> .....	27
EMTRIVA .....	24
<i>emulsified omega-3</i> .....	152
EMVERM .....	20
<i>enalapril maleate</i> .....	51
<i>enalapril maleate &amp; hydrochlorothiazide tab</i> <i>10-25 mg</i> .....	51
<i>enalapril maleate &amp; hydrochlorothiazide tab</i> <i>5-12.5 mg</i> .....	51
ENBREL .....	123
ENBREL MINI .....	123
ENBREL SURECLICK .....	123
END LICE M/S LIQ .....	220
ENDARI .....	122
<i>endocet tab 10-325mg</i> .....	18
<i>endocet tab 2.5-325mg</i> .....	18
<i>endocet tab 5-325mg</i> .....	18
<i>endocet tab 7.5-325mg</i> .....	18
<i>endur-acin</i> .....	163
ENDURACIN TAB 500MG SR .....	163
<i>endur-amide</i> .....	163
ENDUR-AMIDE .....	163
ENEGEL GEL .....	213
ENFAMIL MIS EXPECTA .....	163
ENGERIX-B .....	128
<i>enoxaparin sodium</i> .....	117
ENSTILAR AER .....	205
<i>entacapone</i> .....	66
<i>entecavir</i> .....	28
ENTRESTO TAB 24-26MG .....	53
ENTRESTO TAB 49-51MG .....	53
ENTRESTO TAB 97-103MG .....	53
<i>enulose</i> .....	109
<i>e-oil</i> .....	213
EPCLUSA PAK 150-37.5 .....	28
EPCLUSA PAK 200-50MG .....	28
EPCLUSA TAB 200-50MG .....	28
EPCLUSA TAB 400-100 .....	28
EPIDIOLEX .....	72
<i>epinephrine (anaphylaxis)</i> .....	61, 196
EPINEPHRINE AER MIST .....	196
<i>epitol</i> .....	72

This document includes a list of drugs covered on our formulary as of July 1, 2024. You can find information on what the symbols and abbreviations on this table mean by going to page 7.

<i>eplerenone</i> .....	52
EPRONTIA .....	72
EPSOM SALT GRA .....	109
EPSOM SALT POW.....	109
<i>eq antacid &amp; anti-gas max</i> .....	100
<i>eq arthritis pain</i> .....	12
<i>eq arthritis pain relieve</i> .....	13
<i>eq artificial tears</i> .....	175
<i>eq aspirin adult low dose</i> .....	13
<i>eq calcium 500+d</i> .....	146
<i>eq calcium 600+d+minerals</i> .....	146
<i>eq cold &amp; cough dm child</i> .....	187
<i>eq cough drops sugar free</i> .....	224
<i>eq hygienic cleansing wip</i> .....	213
<i>eq ibuprofen</i> .....	16
<i>eq lubricant eye drops hi</i> .....	175
<i>eq sleep-aid nighttime</i> .....	83
<i>eq tussin dm cough/chest</i> .....	187
<i>eql air protector</i> .....	163
<i>eql aloe after sun</i> .....	213
<i>eql antibiotic + pain rel</i> .....	201
<i>eql antifungal</i> .....	202
<i>eql anti-itch maximum str</i> .....	205
<i>eql aspirin low dose</i> .....	13
<i>eql b complex</i> .....	163
EQL CALCIUM CAP VIT D .....	146
<i>eql calcium gummies</i> .....	146
<i>eql calcium soft chews</i> .....	146
<i>eql carbonyl iron</i> .....	119
<i>eql cough drops</i> .....	224
<i>eql flu &amp; severe cold mul</i> .....	187
<i>eql gummies childrens</i> .....	163
<i>eql ibuprofen pm</i> .....	83
<i>eql lutein</i> .....	152
<i>eql naproxen sodium</i> .....	16
<i>eql niacin flush free</i> .....	163
EQL OMEGA 3 CAP 1400MG .....	152
<i>eql omega 3 fish oil</i> .....	152
<i>eql sleep aid nighttime</i> .....	83
<i>eql tussin dm cough/chest</i> .....	187
EQUALACTIN.....	109
<i>ergocalciferol</i> .....	163
<i>ergotamine w/ caffeine tab 1-100 mg</i> .....	79
ERIVEDGE .....	41
ERLEADA .....	36
<i>erlotinib hcl</i> .....	41
<i>ertapenem sodium</i> .....	20
<i>ery</i> .....	200
<i>ery-tab</i> .....	31
ERYTHROCIN LACTOBIONATE.....	31

<i>erythrocin stearate</i> .....	31
<i>erythromycin (acne aid)</i> .....	200
<i>erythromycin (ophth)</i> .....	171
<i>erythromycin base</i> .....	31
<i>erythromycin ethylsuccinate</i> .....	31
<i>erythromycin lactobionate</i> .....	31
<i>escitalopram oxalate</i> .....	64
<i>esomeprazole magnesium</i> .....	115
<i>estradiol</i> .....	92
<i>estradiol &amp; norethindrone acetate tab 0.5-0.1 mg</i> .....	92
<i>estradiol &amp; norethindrone acetate tab 1-0.5 mg</i> .....	92
<i>estradiol vaginal</i> .....	92
<i>estradiol valerate</i> .....	92
ESTROFACTORS TAB.....	163
ESTROVEN TAB ENERGY .....	152
<i>eszopiclone</i> .....	78
<i>ethambutol hcl</i> .....	27
<i>ethosuximide</i> .....	72
ETHY ALCOHOL SOL 70% .....	213
<i>etodolac</i> .....	16
<i>etoposide</i> .....	39
<i>etravirine</i> .....	24
EULEXIN.....	36
<i>euthyrox</i> .....	98
EVAC POW .....	109
<i>everolimus</i> .....	41
<i>everolimus (immunosuppressant)</i> .....	127
EVOTAZ TAB 300-150.....	27
EXCEDRIN SIN TAB HEADACHE.....	187
EXCEDRIN TAB .....	13
<i>exemestane</i> .....	36
EXKIVITY .....	41
EX-LAX.....	109
EX-LAX MILK SUS OF MAGNE.....	109
<i>extra strength bayer arth</i> .....	13
<i>eye allergy itch relief</i> .....	172
<i>eye allergy itch/redness</i> .....	173
EYE STREAM SOL OP.....	175
EYSUVIS.....	172
<i>ezetimibe</i> .....	57
<i>ezetimibe-simvastatin tab 10-10 mg</i> .....	57
<i>ezetimibe-simvastatin tab 10-20 mg</i> .....	57
<i>ezetimibe-simvastatin tab 10-40 mg</i> .....	57
<i>ezetimibe-simvastatin tab 10-80 mg</i> .....	57
EZFE 200 .....	119
EZFE FORTE CAP.....	163
EZO CUSHIONS MIS LOW REG .....	225

This document includes a list of drugs covered on our formulary as of July 1, 2024. You can find information on what the symbols and abbreviations on this table mean by going to page 7.

**F**

*fa-8*..... 163  
 FABRAZYME..... 96  
*famciclovir* ..... 28  
*famotidine*..... 106  
*famotidine in nacl 0.9% iv soln 20 mg/50ml*..... 106  
 FANAPT ..... 68  
 FANAPT PAK ..... 68  
 FARXIGA ..... 85  
 FASENRA ..... 196  
 FASENRA PEN ..... 196  
*fast acting dairy aid* ..... 105  
 FATIGUE REL TAB COMPLEX..... 152  
 FATTYBLEND MIS ..... 132  
 FD&C BLUE #2 POW ..... 132  
 FD&C RED 40 POW ..... 132  
 FDC BLUE 1 POW AL LAKE ..... 132  
 FDC RED #40 POW AL LAKE..... 133  
 FDC YELLOW 5 POW AL LAKE ..... 133  
*fe c*..... 119  
*fe c tab plus* ..... 119  
 FE SULFATE POW ..... 119  
*fe tabs* ..... 119  
*felbamate* ..... 73  
*felodipine*..... 59  
*fenofibrate* ..... 56  
*fenofibrate micronized* ..... 56  
*fentanyl*..... 17  
*fentanyl citrate*..... 18  
 FEOSOL ..... 119  
 FERGON ..... 119  
 FERGON TAB 320MG..... 119  
 FER-IN-SOL ..... 119  
*fer-iron* ..... 119  
 FERRETTS..... 119  
 FERRETTS IPS ..... 119  
 FERRIC POW SUBSULFA..... 133  
 FERRIMIN 150 ..... 119  
*ferrocite* ..... 119  
 FERRO-SEQUEL TAB 65-25MG..... 119  
*ferrous fumarate* ..... 119  
 FERROUS FUMARATE..... 119  
*ferrous gluconate* ..... 119  
 FERROUS GLUCONATE..... 120  
*ferrous sulfate* ..... 120  
 FERROUS SULFATE..... 120  
*ferrous sulfate dried*..... 120  
*ferrous sulfate elixir 22*..... 120

FERROUS SULFATE ELIXIR 22..... 120  
*ferrous sulfate iron* ..... 120  
 FETZIMA..... 64  
 FETZIMA CAP TITRATIO..... 64  
 FEVERALL JUNIOR STRENGTH..... 13  
 FEVERALL SUP 80MG ..... 13  
 FIASP..... 88  
 FIASP FLEXTOUCH ..... 88  
 FIASP PENFILL..... 88  
 FIASP PUMPCART ..... 88  
 FIBER LAX POW 95%..... 109  
*fiber therapy*..... 109  
 FIBERCON TAB 625MG ..... 109  
*finasteride* ..... 115  
*fingolimod hcl*..... 81  
 FINTEPLA ..... 73  
 FIRMAGON ..... 36  
 FIRST-MOUTHW SUS BLM..... 225  
*fish oil adult gummies* ..... 152  
 FISH OIL CAP 1360MG ..... 152  
 FISH OIL CAP 150MG..... 152  
 FISH OIL CAP 180MG..... 152  
 FISH OIL CAP 183.33MG ..... 152  
 FISH OIL CAP 900MG..... 152  
 FISH OIL CHW 875MG..... 152  
*fish oil maximum strength* ..... 152  
*fish oil pearls*..... 152  
*flac* ..... 177  
 FLAREX ..... 172  
 FLAVOR CONC LIQ GRAPE ..... 133  
 FLAX SEED CAP 1300MG ..... 153  
 FLAXSEED OIL ..... 153  
 FLEBOGAMMA DIF..... 126  
*flecainide acetate* ..... 55  
 FLEET BISACODYL..... 109  
 FLEET ENE ..... 109  
 FLEET ENE PED..... 109  
 FLEET LIQUID GLYCERIN SUP ..... 109  
 FLINTSTONES CHW COMPLETE..... 164  
 FLINTSTONES CHW TODDLER..... 164  
 FLONASE SENSIMIST..... 198  
*flora assist*..... 103  
 FLORAJEN CAP ACIDOPHI ..... 103  
 FLORASTOR ..... 103  
 FLOWTUSS SOL 2.5-200 ..... 187  
 FLU & SORE POW THROAT..... 187  
*fluconazole* ..... 23  
*fluconazole in nacl 0.9% inj 200 mg/100ml* ..... 23

This document includes a list of drugs covered on our formulary as of July 1, 2024. You can find information on what the symbols and abbreviations on this table mean by going to page 7.



<i>fluconazole in nacl 0.9% inj 400 mg/200ml</i>	23
<i>flucytosine</i>	23
<i>fludrocortisone acetate</i>	93
<i>flunisolide (nasal)</i>	198
<i>fluocinolone acetonide</i>	205
<i>fluocinolone acetonide (otic)</i>	177
<i>fluocinonide</i>	205
<i>fluocinonide emulsified base</i>	205
<i>fluorometholone (ophth)</i>	172
<i>fluorouracil</i>	35
<i>fluorouracil (topical)</i>	214
<i>fluoxetine hcl</i>	64
<i>fluphenazine decanoate</i>	68
<i>fluphenazine hcl</i>	68
<i>flurbiprofen</i>	16
<i>flurbiprofen sodium</i>	172
<i>fluticasone propionate</i>	205
<i>fluticasone propionate (nasal)</i>	198
<i>fluticasone-salmeterol aer powder ba 100-50 mcg/act</i>	199
<i>fluticasone-salmeterol aer powder ba 250-50 mcg/act</i>	199
<i>fluticasone-salmeterol aer powder ba 500-50 mcg/act</i>	199
<i>fluvoxamine maleate</i>	62
FOLGARD TAB	164
FOLIC + B12 TAB	164
<i>folic acid</i>	164
FOLIC ACID	164
FOLIC ACID TAB 400MCG	164
FOLITAB 500 TAB	120
FOLTABS 800	164
<i>fondaparinux sodium</i>	117, 118
FORAXA EMU	214
<i>formaldehyde</i>	214
FORMALDEHYDE	214
<i>formulation r</i>	214
<i>fosamprenavir calcium</i>	25
<i>fosinopril sodium</i>	51
<i>fosinopril sodium &amp; hydrochlorothiazide tab 10-12.5 mg</i>	51
<i>fosinopril sodium &amp; hydrochlorothiazide tab 20-12.5 mg</i>	51
FOTIVDA	41
FP ANTI-ITCH CRE MEDICATE	214
FP DAIRY-REL TAB 3000UNIT	105
<i>fp fiber laxative</i>	109
FP FOMICON SUS	100
<i>fp glucosamine</i>	153

<i>fq breathable adult brief</i>	115
FREEZE IT GEL 0.2-3.5%	214
FRUIT C CHW 200MG	164
FRUIT FROSTERS	225
FRUZAQLA	42
<i>ft arthritis pain</i>	13
FULLERS POW EARTH	133
<i>fulvestrant</i>	36
FUNGOID TINCTURE	202
<i>furosemide</i>	60
<i>furosemide inj</i>	60
FUSION CAP	120
FUZEON	25
<i>fv iodine tincture</i>	214
FV MINERAL OIL HEAVY	109
FV VITAMIN E TAB 200IU	164
<i>fyavolv tab 0.5mg-2.5mcg</i>	92
<i>fyavolv tab 1mg-5mcg</i>	92
FYCOMPA	73

## G

<i>gabapentin</i>	73
<i>galantamine hydrobromide</i>	62, 63
GAMASTAN INJ	126
GAMMAGARD LIQUID	126
GAMMAGARD S/D IGA LESS TH	126
GAMMAKED	126
GAMMAPLEX	126
GAMUNEX-C	126
<i>ganciclovir sodium</i>	28
GARDASIL 9 INJ	128
GAS RELIEF CAP 125MG	113
GAS-X	113
GAS-X CAP PREVENT	105
GAS-X EXTRA STRENGTH	113
<i>gatifloxacin (ophth)</i>	171
GATTEX	113
GAUZE PADS 2	88
<i>gavilyte-c</i>	109
<i>gavilyte-g</i>	109
GAVISCON CHW	100
GAVISCON CHW EX-STR	100
GAVISCON SUS	100
GAVRETO	42
G-BUCAL-C SOL 0.15-0.1	225
<i>gefitinib</i>	42
GELUSIL CHW	100
<i>gemcitabine hcl</i>	35
<i>gemfibrozil</i>	56
GEMTESA	116

This document includes a list of drugs covered on our formulary as of July 1, 2024. You can find information on what the symbols and abbreviations on this table mean by going to page 7.

<i>generlac</i> .....	110	<i>glycerin topical liquid</i> .....	214
<i>gengraf</i> .....	127	GLYCINE POW.....	116
GENOTROPIN.....	96	<i>glycolic acid</i> .....	214
GENOTROPIN MINIQUICK.....	96	<i>glycolic acid crystals</i> .....	133
<i>gentamicin in saline inj 0.8 mg/ml</i> .....	20	<i>glycopyrrolate</i> .....	105
<i>gentamicin in saline inj 1 mg/ml</i> .....	20	<i>glydo</i> .....	206
<i>gentamicin in saline inj 1.2 mg/ml</i> .....	20	GLYXAMBI TAB 10-5 MG.....	85
<i>gentamicin in saline inj 1.6 mg/ml</i> .....	21	GLYXAMBI TAB 25-5 MG.....	85
<i>gentamicin in saline inj 2 mg/ml</i> .....	21	<i>gnp 24 hour nasal allerg</i> .....	198
<i>gentamicin sulfate</i> .....	21	<i>gnp acid control 150 maxi</i> .....	106
<i>gentamicin sulfate (ophth)</i> .....	171	<i>gnp acid control 75</i> .....	106
<i>gentamicin sulfate (topical)</i> .....	201	<i>gnp allergy &amp; congestion</i> .....	187
GENTEAL GEL.....	175	<i>gnp allergy plus sinus he</i> .....	187
GENTEAL MILD TO MODERATE.....	175	<i>gnp allergy sinus pe day</i> .....	187
GENTEAL SEVERE.....	175	<i>gnp arthritis pain</i> .....	13
GENTEAL TEAR SOL MOD PF.....	175	<i>gnp arthritis pain relief</i> .....	214
GENVOYA TAB.....	27	<i>gnp aspirin</i> .....	13
GERIATRIC LIQ VITAMIN.....	164	<i>gnp aspirin low dose</i> .....	13
<i>geri-hydrolac</i> .....	214	<i>gnp calcium 500 +d3</i> .....	146
GERITOL LIQ TONIC.....	164	<i>gnp calcium antacid child</i> .....	100
<i>geri-tussin dm</i> .....	187	<i>gnp cough drops</i> .....	225
GEVRABON LIQ.....	164	GNP DAILY MIS PRENATAL.....	164
GILOTRIF.....	42	<i>gnp diclofenac sodium</i> .....	13
GILTUSS SPR BUCALSEP.....	225	GNP FISH OIL CAP 840MG.....	153
GINKGO BILOB TAB PLUS.....	153	<i>gnp herbal</i> .....	225
<i>ginkgo biloba</i> .....	153	<i>gnp iron</i> .....	120
GINKGO BILOBA.....	153	<i>gnp isopropyl alcohol</i> .....	214
GINKGO PHYTOSOME.....	153	<i>gnp niacin</i> .....	164
<i>glatiramer acetate</i> .....	81	<i>gnp olopatadine hydrochlo</i> .....	173
<i>glatopa</i> .....	81	<i>gnp oral pain relief</i> .....	225
GLEN PE LIQ.....	187	GNP PETROLEU GEL JELLY.....	133
GLENAX PEB LIQ.....	187	<i>gnp throat drops</i> .....	225
GLENTUSS LIQ.....	187	<i>gnp vitamin b1</i> .....	164
GLEOSTINE.....	35	<i>gnp vitamin d super stren</i> .....	164
<i>glimepiride</i> .....	85	GOLD BOND POW.....	214
<i>glipizide</i> .....	85	<i>gold bond rapid relief</i> .....	214
<i>glipizide xl</i> .....	85	GOLD DUST POW WOUND.....	214
<i>glipizide-metformin hcl tab 2.5-250 mg</i> ...	85	GONAK.....	175
<i>glipizide-metformin hcl tab 2.5-500 mg</i> ...	85	<i>gonioscopic prism</i> .....	175
<i>glipizide-metformin hcl tab 5-500 mg</i> .....	85	<i>goodsense all day allergy</i> .....	179
GLUCOSAMINE CAP CHONDROI.....	153	<i>goodsense arthritis pain</i> .....	13
GLUCOSE.....	94	<i>goodsense aspirin</i> .....	13
GLUCOSE LIQ SHOT.....	153	<i>goodsense aspirin low dos</i> .....	13
GLUCOSSIN-DM.....	187	GOODSENSE CAPSAICIN ARTHR.....	214
GLUTAMINE POW RAP RLS.....	153	<i>goodsense clearlax</i> .....	110
<i>glutamine powder</i> .....	153	<i>goodsense cold &amp; head con</i> .....	187
<i>glycerin (laxative)</i> .....	110	<i>goodsense cough dm</i> .....	187
<i>glycerin adult</i> .....	110	<i>goodsense day time cold &amp;</i> .....	187
GLYCERIN ADULT.....	110	<i>goodsense fiber</i> .....	110
<i>glycerin liquid</i> .....	133	<i>goodsense hemorrhoidal</i> .....	214

This document includes a list of drugs covered on our formulary as of July 1, 2024. You can find information on what the symbols and abbreviations on this table mean by going to page 7.

<i>goodsense hemorrhoidal oi</i> .....	214
<i>goodsense lubricant eye d</i> .....	175
<i>goodsense nighttime cold</i> .....	188
<i>goodsense oral pain relie</i> .....	225
GOODYS POW EX ST .....	13
GOWEY TIN TINCTURE.....	153
<i>granisetron hcl</i> .....	104
GRAPE SEED OIL.....	133
GREEN TEA EXTRACT .....	133
<i>griseofulvin microsize</i> .....	23
<i>griseofulvin ultramicrosize</i> .....	23
<i>grx dyne swab</i> .....	214
GRX WHITE OIN PETROLAT .....	133
<i>grx wound</i> .....	214
<i>guaicon dms</i> .....	188
<i>guaifenesin liquid 100 mg</i> .....	188
GUAIFENESIN TAB 200 MG .....	188
<i>guanfacine hcl</i> .....	61
<i>guanfacine hcl (adhd)</i> .....	77
GUMMY BITES CHW .....	146
GUMSOL LIQ .....	225
GUMSOL SPR .....	225
GVOKE HYOPEN 2-PACK .....	94
GVOKE KIT.....	94
GVOKE PFS .....	94
GYNE-LOTRIMIN.....	117

## H

HAEGARDA .....	122
<i>halobetasol propionate</i> .....	205
<i>haloperidol</i> .....	68
<i>haloperidol decanoate</i> .....	68
<i>haloperidol lactate</i> .....	68
HARD NAILS.....	164
HARVONI PAK 33.75-150MG .....	28
HARVONI PAK 45-200MG.....	28
HARVONI TAB 45-200MG .....	28
HARVONI TAB 90-400MG .....	29
HAVRIX .....	128
<i>hca alcohol swabs</i> .....	215
HCA BISACODY SUP 10MG.....	110
HCA EAR WAX SOL 6.5% OT.....	228
HCA ELEMENTA CAP MAGNESIU .....	146
<i>hca elemental magnesium</i> .....	146
HCA GLYCERIN LIQ .....	215
HCA HEMORRHO OIN .....	215
HCA IBUPROFE CAP SOFTGEL.....	16
HCA LAX-X TAB 25MG.....	110
<i>hca lice shampoo</i> .....	220
HCA MOT SICK TAB 50MG.....	104

HCA NIACIN TAB 250MG TR.....	164
HCA NON-ASA TAB PM .....	83
HCA SUPHEDRI TAB PLUS.....	188
HCA TEARS SOL PLUS .....	175
HCA TUSSIN LIQ CF .....	188
HCA VIT B12 TAB 500MCG .....	164
HCA VIT C CHW 250MG .....	164
HCA VIT C CHW 500MG .....	164
HCA ZINC GLU TAB 50MG.....	146
<i>h-chlor 12</i> .....	214
<i>heartburn treatment 24 ho</i> .....	115
<i>h-e-b aspirin</i> .....	13
<i>hematron</i> .....	120
HEMOCYTE .....	120
<i>hemorrhoid</i> .....	215
<i>hemorrhoidal</i> .....	215
<i>hemorrhoidal cooling</i> .....	215
<i>hemorrhoidal suppositorie</i> .....	215
HEMORROID SUP 3% .....	215
HEP SOD/D5W INJ 20000UNT.....	118
HEP SOD/D5W INJ 25000UNT.....	118
HEP SOD/NACL INJ 12500UNT.....	118
HEP SOD/NACL INJ 25000UNT.....	118
<i>heparin sodium (porcine)</i> .....	118
<i>heparin sodium (porcine) lock flush</i> .....	130
HEPARIN/NACL INJ 25000UNT.....	118
HEPLISAV-B.....	128
HERCEP HYLEC SOL 60-10000 .....	42
HERCEPTIN .....	42
HERZUMA .....	42
HIBERIX .....	128
HIBICLENS LIQ 4%.....	215
HIBICLENS SOL 4%.....	215
HISTAFLEX TAB 325-25MG.....	13
HISTAGESIC TAB .....	188
HISTEX .....	179
HISTEX PD .....	179
HISTEX PDX.....	179
HISTEX-AC SYP .....	188
HISTEX-DM SYP .....	188
HISTEX-PE SYP 2.5-10/5.....	188
<i>hm advanced antacid maxim</i> .....	101
<i>hm anti-nausea</i> .....	113
<i>hm aspirin ec low dose</i> .....	13
<i>hm calcium 600 &amp; vitamin</i> .....	146
<i>hm eye allergy itch/redne</i> .....	173
<i>hm fiber</i> .....	110
HM FISH OIL CAP 554MG.....	153
HM IBUPROFEN SUS 100/5ML.....	16
<i>hm magnesium</i> .....	101

This document includes a list of drugs covered on our formulary as of July 1, 2024. You can find information on what the symbols and abbreviations on this table mean by going to page 7.

HM PAIN REL DRO 80/0.8ML.....	13
<i>hm potassium</i> .....	136
<i>hm probiotic digestive he</i> .....	103
<i>hm severe cold cough &amp; fl</i> .....	188
<i>hm severe cold/cough/flu</i> .....	188
HONEY BEARS CHW.....	164
HUGGIES DIAPER RASH CREAM.....	215
HUMIBID CS TAB 20-400MG.....	188
HUMIBID MAXIMUM STRENGTH.....	188
HUMIRA.....	123
HUMIRA PEDIA INJ CROHNS.....	123
HUMIRA PEDIATRIC CROHNS D.....	123
HUMIRA PEN.....	123
HUMIRA PEN KIT PS/UV.....	124
HUMIRA PEN-CD/UC/HS START.....	124
HUMIRA PEN-PEDIATRIC UC S.....	124
HUMIRA PEN-PS/UV STARTER.....	124
HUMULIN R U-500 (CONCENTR.....	88
HUMULIN R U-500 KWIKPEN.....	88
<i>hurricane</i> .....	225
HURRICAIN.....	225
HURRICAIN ONE.....	225
HURRICAIN SNAP-N-GO.....	225
HURRIPAK STARTER KIT.....	225
HYCOFENIX SOL.....	188
<i>hydralazine hcl</i> .....	61
<i>hydralife</i> .....	136
HYDROC/GUAIF SOL 2.5-200.....	188
<i>hydrochlorothiazide</i> .....	60
HYDROCIL INS POW 95%.....	110
<i>hydrocodone bitart-homatropine</i> <i>methylbrom soln 5-1.5 mg/5ml</i> .....	188
<i>hydrocodone bitartrate</i> .....	17
<i>hydrocodone w/ homatropine syrup 5-1.5</i> <i>mg/5ml</i> .....	188
<i>hydrocodone-acetaminophen soln 7.5-325</i> <i>mg/15ml</i> .....	18
<i>hydrocodone-acetaminophen tab 10-325</i> <i>mg</i> .....	18
<i>hydrocodone-acetaminophen tab 5-325 mg</i> .....	18
<i>hydrocodone-acetaminophen tab 7.5-325</i> <i>mg</i> .....	18
<i>hydrocodone-ibuprofen tab 7.5-200 mg</i> ...	18
HYDROCORT CRE 0.5%.....	205
HYDROCORT CRE 1%.....	205
<i>hydrocortisone</i> .....	93
<i>hydrocortisone (intra-rectal)</i> .....	106
<i>hydrocortisone (rectal)</i> .....	215
<i>hydrocortisone (topical)</i> .....	206

<i>hydrocortisone acetate w/ pramoxine</i> <i>perianal cream 2.5-1%</i> .....	215
<i>hydrocortisone-aloe vera cream 0.5%</i> .....	206
HYDROGEN PEROXIDE.....	215
<i>hydromet</i> .....	188
<i>hydromorphone hcl</i> .....	18
HYDROPHILIC OIN PETROLAT.....	133
<i>hydrophilic ointment</i> .....	133
<i>hydroxocobalamin acetate</i> .....	165
<i>hydroxychloroquine sulfate</i> .....	125
<i>hydroxyurea</i> .....	38
<i>hydroxyzine hcl</i> .....	179
<i>hydroxyzine pamoate</i> .....	179
<i>hysept</i> .....	215
HYSINGLA ER.....	17
HYVEE ADVCD SUS ANTACID.....	101
<b>I</b>	
<i>ibandronate sodium</i> .....	90
IBRANCE.....	42
<i>ibu</i> .....	16
<i>ibuprofen</i> .....	16
ICAPS LUTEIN TAB ZEAXANTH.....	165
ICAR PEDIATRIC.....	120
ICAR-C TAB.....	120
<i>icatibant acetate</i> .....	122
ICLUSIG.....	42
ICY HOT PAIN RELIEVING GE.....	215
IDACIO (2 PEN).....	124
IDACIO (2 SYRINGE).....	124
IDACIO CROHN INJ DISEASE.....	124
IDACIO PLAQU INJ PSORIASIS.....	124
IDHIFA.....	42
<i>imatinib mesylate</i> .....	42
IMBRUVICA.....	42, 43
<i>imipenem-cilastatin intravenous for soln</i> <i>250 mg</i> .....	21
<i>imipenem-cilastatin intravenous for soln</i> <i>500 mg</i> .....	21
<i>imipramine hcl</i> .....	64
<i>imiquimod</i> .....	215
<i>immune system booster</i> .....	165
IMODIUM A-D.....	103
IMODIUM A-D LIQ 1MG/5ML.....	103
IMODIUM ADV TAB.....	103
IMOVAX RABIES (H.D.C.V.).....	128
INBRIJA.....	66
INCRELEX.....	96
INCRUSE ELLIPTA.....	178
<i>indapamide</i> .....	60

This document includes a list of drugs covered on our formulary as of July 1, 2024. You can find information on what the symbols and abbreviations on this table mean by going to page 7.

INDOLE-3- POW CARBINOL .....	133
INFANRIX INJ .....	128
INFLIXIMAB .....	124
INLYTA.....	43
INOSITOL POW HEXANICO .....	133
INQOVI TAB 35-100MG .....	35
INREBIC.....	43
INSTACLEAN LIQ.....	215
INSTA-GLUCOSE .....	94
<i>instant oral pain relief</i> .....	225
INSULIN PEN NEEDLES: BD/NOVO .....	88
INSULIN SAFETY NEEDLES .....	88
INSULIN SYRINGES: BD.....	88
INTEGRA CAP.....	120
INTELENCE .....	25
<i>intense toothache pain re</i> .....	225
INTRALIPID .....	140
INVEGA HAFYERA.....	68
INVEGA SUSTENNA .....	68
INVEGA TRINZA.....	68
<i>iodine (kelp)</i> .....	146
IODINE CRY.....	133
IODINE TIN 2% MILD.....	215
IODINE TIN STRONG .....	215
IODOFLEX .....	215
IODOSORB.....	216
<i>ionil-t</i> .....	216
IOSAT .....	96
IPOL INJ INACTIVE.....	128
<i>ipratropium bromide</i> .....	178
<i>ipratropium bromide (nasal)</i> .....	178
<i>ipratropium-albuterol nebu soln 0.5-2.5(3) mg/3ml</i> .....	177
<i>irbesartan</i> .....	55
<i>irbesartan-hydrochlorothiazide tab 150- 12.5 mg</i> .....	53
<i>irbesartan-hydrochlorothiazide tab 300- 12.5 mg</i> .....	53
<i>irinotecan hcl</i> .....	38
IRON .....	120
IRON 21/7 MIS.....	120
IRON CHEWS PEDIATRIC.....	120
<i>iron slow release</i> .....	120
IRON UP.....	121
IRO-PLEX LIQ .....	120
IRO-PLEX TAB 165-2MG.....	120
ISENTRESS .....	25
ISENTRESS HD.....	25
ISOLYTE-P INJ /D5W .....	137
ISOLYTE-S INJ .....	137

ISOLYTE-S INJ PH 7.4 .....	137
<i>isoniazid</i> .....	28
<i>isopropyl alcohol 70%</i> .....	216
ISOPROPYL ALCOHOL WIPES .....	216
ISOPTO TEARS .....	175
<i>isosorbide dinitrate</i> .....	61
<i>isosorbide mononitrate</i> .....	61
<i>isotretinoin</i> .....	200
<i>isradipine</i> .....	59
ITCH RELIEF .....	203
<i>itraconazole</i> .....	23
<i>ivermectin</i> .....	21
IWILFIN.....	38
IXCHIQ INJ.....	128
IXIARO INJ.....	128

## J

JAKAFI .....	43
<i>jantoven</i> .....	118
JANUMET TAB 50-1000 .....	85
JANUMET TAB 50-500MG .....	85
JANUMET XR TAB 100-1000.....	85
JANUMET XR TAB 50-1000 .....	85
JANUMET XR TAB 50-500MG .....	85
JANUVIA.....	85
JARDIANCE .....	85
<i>javvygtor</i> .....	96
JAYPIRCA .....	43
JENTADUETO TAB 2.5-1000.....	86
JENTADUETO TAB 2.5-500 .....	85
JENTADUETO TAB 2.5-850 .....	85
JENTADUETO TAB XR 2.5-1000MG.....	86
JENTADUETO TAB XR 5-1000MG.....	86
JESSNERS SOL .....	216
<i>jinteli</i> .....	92
JR NON-ASA TAB 160MG QM .....	13
JULUCA TAB 50-25MG .....	27
JYLAMVO .....	125
JYNNEOS.....	128

## K

<i>k 100</i> .....	165
KADCYLA.....	43
KALYDECO .....	196
KANJINTI .....	43
<i>kank-a mouth pain</i> .....	225
KAOLIN POW .....	103
<i>kaolin powder</i> .....	103
KAOPECTATE STOOL SOFTENER .....	110
KAOPECTATE SUS 262/15ML.....	103

This document includes a list of drugs covered on our formulary as of July 1, 2024. You can find information on what the symbols and abbreviations on this table mean by going to page 7.

KAOPECTATE SUS EX ST.....	103
KAOPECTATE TAB .....	103
karaya gum .....	133
KARAYA GUM .....	133
KC ALLERGY LIQ RELIEF .....	179
kcl 10 meq/l (0.075%) in dextrose 5% & nacl 0.45% inj.....	137
kcl 20 meq/l (0.149%) in nacl 0.45% inj.....	138
kcl 20 meq/l (0.15%) in dextrose 5% & nacl 0.2% inj.....	137
kcl 20 meq/l (0.15%) in dextrose 5% & nacl 0.45% inj.....	137
kcl 20 meq/l (0.15%) in dextrose 5% & nacl 0.9% inj.....	137
kcl 20 meq/l (0.15%) in nacl 0.45% inj.....	138
kcl 20 meq/l (0.15%) in nacl 0.9% inj.....	137
kcl 30 meq/l (0.224%) in dextrose 5% & nacl 0.45% inj.....	138
kcl 40 meq/l (0.3%) in dextrose 5% & nacl 0.45% inj.....	138
kcl 40 meq/l (0.3%) in dextrose 5% & nacl 0.9% inj.....	138
kcl 40 meq/l (0.3%) in nacl 0.9% inj.....	138
KCL/D5W/NAACL INJ 0.3/0.9% .....	138
KERENDIA .....	52
KESIMPTA .....	81
ketoconazole.....	23
ketoconazole (topical).....	202, 204
ketorolac tromethamine (ophth).....	172
KEVZARA.....	124
KEY-E.....	165
KEYTRUDA .....	43
KINRIX INJ.....	128
KISQALI 200 DOSE .....	43
KISQALI 200 PAK FEMARA .....	38
KISQALI 400 DOSE .....	43
KISQALI 400 PAK FEMARA .....	38
KISQALI 600 DOSE .....	43
KISQALI 600 PAK FEMARA .....	38
klayesta .....	202
klor-con.....	139
klor-con 10 .....	139
klor-con 8.....	139
klor-con m10 .....	139
klor-con m15 .....	139
klor-con m20 .....	139
kls acid controller compl .....	113
kls acid controller maxim.....	106
kls aller-flo.....	198
kls arthritis pain relief .....	13

kls aspirin low dose .....	13
kls diclofenac sodium.....	14
KONSYL.....	110
KONSYL DAILY FIBER .....	110
KONSYL POW 100% .....	110
KONSYL-D .....	110
KORLYM.....	96
KOSELUGO .....	43
kourzeq.....	225
kp aspirin.....	14
kp calcium 600+d3.....	146
kp cetirizine hcl .....	179
kp ferrous gluconate .....	121
kp folic acid.....	165
kp glucosamine chondroitin .....	153
kp mag-oxide magnesium .....	146
kp melatonin .....	153
kp niacin.....	165
kp vitamin e.....	165
KPN PRENATAL TAB.....	165
KRAZATI.....	43

#### L

labetalol hcl .....	58
lacosamide .....	73
lacosamide oral .....	73
LACTAID FAST ACT.....	105
lactated ringer's solution .....	138
lactic acid (ammonium lactate) .....	216
LACTIC ACID SOL.....	133
LACTICARE LOT 5% .....	216
LACTINEX CHW .....	103
LACTINEX GRA .....	103
LACTINEX TAB .....	103
LACTOSE POW .....	133
lactose powder .....	133
lactulose.....	110
lactulose (encephalopathy) .....	110
LAMISIL ADVANCED .....	202
lamivudine.....	25
lamivudine (hbv) .....	29
lamivudine-zidovudine tab 150-300 mg.....	27
lamotrigine.....	73
lansoprazole .....	115
lanthanum carbonate.....	98
LANTUS .....	88
LANTUS SOLOSTAR .....	88
lapatinib ditosylate.....	43
L-ARGININE .....	153
L-ARGININE POW .....	153

This document includes a list of drugs covered on our formulary as of July 1, 2024. You can find information on what the symbols and abbreviations on this table mean by going to page 7.

<i>larynex</i> .....	225	<i>linezolid</i> .....	21
<i>latanoprost</i> .....	173	LINEZOLID INJ 2MG/ML.....	21
<i>laxmar</i> .....	110	LINZESS .....	113
L-CARNITINE .....	154	<i>liothyronine sodium</i> .....	99
L-CYSTINE POW.....	154	LIP BALM OIN NATURAL .....	133
LECITHIN GRA.....	154	LIPOIC ACID .....	154
<i>leflunomide</i> .....	125	LIPOIL OIL.....	133
<i>lenalidomide</i> .....	37	LIPOVAN BASE CRE .....	134
LENVIMA 10 MG DAILY DOSE .....	44	LIQ-10 SYP.....	154
LENVIMA 12MG DAILY DOSE.....	44	LIQSORB .....	154
LENVIMA 20 MG DAILY DOSE .....	44	LIQUI C LIQ 500/5ML .....	165
LENVIMA 4 MG DAILY DOSE.....	44	LIQUID C LIQ .....	165
LENVIMA 8 MG DAILY DOSE.....	44	LIQUID CALCI CAP WITH D3.....	146
LENVIMA CAP 14 MG .....	44	<i>liqui-e</i> .....	165
LENVIMA CAP 18 MG .....	44	LIQUIFILM TEARS.....	175
LENVIMA CAP 24 MG .....	44	<i>lisinopril</i> .....	51
<i>letrozole</i> .....	36	<i>lisinopril &amp; hydrochlorothiazide tab 10-12.5</i> <i>mg</i> .....	51
<i>leucovorin calcium</i> .....	50	<i>lisinopril &amp; hydrochlorothiazide tab 20-12.5</i> <i>mg</i> .....	51
LEUKERAN.....	35	<i>lisinopril &amp; hydrochlorothiazide tab 20-25</i> <i>mg</i> .....	51
<i>leuprolide acetate</i> .....	37	L-ISOLEUCINE POW .....	154
<i>levabuterol hcl</i> .....	180	<i>lithium</i> .....	80
<i>levabuterol tartrate</i> .....	180	<i>lithium carbonate</i> .....	80
<i>levetiracetam</i> .....	73	LITTLE COLDS COLD RELIEF.....	226
<i>levetiracetam in sodium chloride iv soln</i> <i>1000 mg/100ml</i> .....	73	LITTLE COLDS SOOTHING THR.....	226
<i>levetiracetam in sodium chloride iv soln</i> <i>1500 mg/100ml</i> .....	74	LITTLE TEETH GEL 7.5% .....	226
<i>levetiracetam in sodium chloride iv soln</i> <i>500 mg/100ml</i> .....	73	LITTLE TUMMY DRO 20/0.3ML .....	113
<i>levobunolol hcl</i> .....	173	LMX 4 .....	216
<i>levocarnitine (metabolic modifiers)</i> .....	96	LOCALNESIUM TAB .....	146
<i>levocetirizine dihydrochloride</i> .....	179	LOCALNESIUM TAB -C.....	146
<i>levofloxacin</i> .....	31	LODRANE D CAP 4-60MG .....	188
<i>levofloxacin in d5w iv soln 250 mg/50ml</i> .....	31	LOHIST-DM SYP 5-2-10MG.....	189
<i>levofloxacin in d5w iv soln 500 mg/100ml</i> .....	32	<i>lohist-peb</i> .....	189
<i>levofloxacin in d5w iv soln 750 mg/150ml</i> .....	32	LOKELMA.....	91
<i>levo-t</i> .....	98	LOLLIBASE POW .....	134
<i>levothyroxine sodium</i> .....	98	<i>lollicaine</i> .....	226
<i>levoxyl</i> .....	99	<i>longs acid relief extra s</i> .....	101
<i>lexinal</i> .....	165	LONSURF TAB 15-6.14 .....	35
LEXIVA .....	25	LONSURF TAB 20-8.19 .....	35
<i>lidocaine</i> .....	206	<i>loperamide hcl</i> .....	113
<i>lidocaine hcl</i> .....	206	<i>lopinavir-ritonavir soln 400-100 mg/5ml</i> <i>(80-20 mg/ml)</i> .....	27
<i>lidocaine hcl (local anesth.)</i> .....	19	<i>lopinavir-ritonavir tab 100-25 mg</i> .....	27
<i>lidocaine hcl (mouth-throat)</i> .....	225	<i>lopinavir-ritonavir tab 200-50 mg</i> .....	27
<i>lidocaine pain relief pat</i> .....	216	<i>loratadine</i> .....	179
<i>lidocaine-prilocaine cream 2.5-2.5%</i> .....	206	<i>lorazepam</i> .....	62
<i>lidocan</i> .....	206	<i>lorazepam intensol</i> .....	62
		LORBRENA.....	44

This document includes a list of drugs covered on our formulary as of July 1, 2024. You can find information on what the symbols and abbreviations on this table mean by going to page 7.

LORTUSS DM LIQ.....	189
LORTUSS EX LIQ.....	189
LORTUSS LQ LIQ.....	189
<i>losartan potassium</i> .....	55
<i>losartan potassium &amp; hydrochlorothiazide</i> <i>tab 100-12.5 mg</i> .....	53
<i>losartan potassium &amp; hydrochlorothiazide</i> <i>tab 100-25 mg</i> .....	53
<i>losartan potassium &amp; hydrochlorothiazide</i> <i>tab 50-12.5 mg</i> .....	53
LOTEMAX.....	172
<i>loteprednol etabonate</i> .....	172
<i>lovastatin</i> .....	56
<i>loxapine succinate</i> .....	68
LOZIBASE MIS.....	134
L-TRYPTOPHAN TAB 500MG.....	154
L-TYROSINE POW.....	154
<i>lubricant eye drops</i> .....	175
<i>lubricant eye drops/dual-</i> .....	175
LUBRICNT GEL DRO 0.25-0.3.....	175
LUDENS DUAL LOZ RELIEF.....	226
LUDENS THROAT DROPS.....	226
LUMAKRAS.....	44
LUMIGAN.....	173
LUMIZYME.....	96
LUPRON DEPOT (1-MONTH).....	37
LUPRON DEPOT (3-MONTH).....	37
LUPRON DEPOT-PED (1-MONTH.....	96
LUPRON DEPOT-PED (3-MONTH.....	96
LUPRON DEPOT-PED (6-MONTH.....	96
<i>lurasidone hcl</i> .....	69
<i>lutein</i> .....	154
LUXAMEND CRE.....	216
L-VALINE POW.....	154
<i>lyllana</i> .....	92
LYNPARZA.....	44
LYSODREN.....	37
LYTGOBI (12 MG DAILY DOSE).....	44
LYTGOBI (16 MG DAILY DOSE).....	44
LYTGOBI (20 MG DAILY DOSE).....	44
<b>M</b>	
MAALOX MAX CHW 1000-60.....	101
MAALOX QUICK DISSOLVE MAX.....	101
MAG CARBONAT POW.....	146
MAG GLYCINATE.....	146
MAG-200.....	147
MAG64.....	146
MAG-AL LIQ.....	101
<i>magaldrate</i> .....	101

<i>magaldrate w/ simethicone susp 1080-30</i> <i>mg/5ml</i> .....	101
<i>magbee</i> .....	147
<i>mag-caps</i> .....	101
<i>magdelay</i> .....	147
MAGDELAY.....	147
MAG-G.....	147
MAGINEX.....	147
MAGNEBIND TAB 200.....	147
MAGNEBIND TAB 300.....	147
<i>magnesium</i> .....	147
MAGNESIUM.....	101, 147
<i>magnesium chloride</i> .....	147
MAGNESIUM CITRATE.....	147
MAGNESIUM ELEMENTAL.....	147
<i>magnesium gluconate</i> .....	147
MAGNESIUM GLUCONATE.....	147
<i>magnesium glycinate</i> .....	147
MAGNESIUM GLYCINATE.....	147
<i>magnesium lactate</i> .....	147
<i>magnesium oxide</i> .....	101
MAGNESIUM OXIDE.....	101, 147
<i>magnesium oxide (mg supplement)</i> .....	148
<i>magnesium salicylate</i> .....	14
<i>magnesium sulfate</i> .....	138
MAGNESIUM SULFATE.....	138, 148
<i>magnesium sulfate granules</i> .....	110
<i>magnesium sulfate in dextrose 5% iv soln</i> <i>1 gm/100ml</i> .....	138
<i>magnesium tab 200 mg</i> .....	148
<i>magnesium tab 400 mg</i> .....	148
MAGONATE LIQ 1000/5ML.....	148
MAG-OX 400 TAB 400MG.....	101
MAG-SR PLUS TAB CALCIUM.....	147
MAG-TAB SR.....	147
<i>malathion</i> .....	220
MANNITOL POW.....	134
<i>maox</i> .....	101
MAPAP SINUS TAB PE.....	189
<i>maraviroc</i> .....	25
MAR-COF BP LIQ 30-2-7.5.....	189
MAR-COF CG LIQ 225-7.5.....	189
MARPLAN.....	64
<i>mar-zinc</i> .....	148
MATULANE.....	38
MAVYRET PAK 50-20MG.....	29
MAVYRET TAB 100-40MG.....	29
MAXIPHEN DM TAB.....	189
M-CLEAR WC LIQ 100-6.33.....	189
<i>meclizine hcl</i> .....	104

This document includes a list of drugs covered on our formulary as of July 1, 2024. You can find information on what the symbols and abbreviations on this table mean by going to page 7.



MEDERMA CRE SPF 30 .....	216	<i>methadone hcl</i> .....	17
MEDICATED OIN RUB .....	189	<i>methadone hydrochloride i</i> .....	17
MEDIFIN PE TAB 10-400MG.....	189	<i>methazolamide</i> .....	60
<i>medikoff drops</i> .....	226	<i>methenamine hippurate</i> .....	21
MEDI-LYTE TAB.....	136	<i>methimazole</i> .....	99
MEDI-TABS TAB 500MG .....	14	METHISCOL CAP .....	165
<i>medi-tussin dm</i> .....	189	<i>methocarbamol</i> .....	81, 82
<i>medroxyprogesterone acetate</i> .....	98	<i>methotrexate sodium</i> .....	35, 125
<i>mefloquine hcl</i> .....	24	<i>methsuximide</i> .....	74
<i>megestrol acetate</i> .....	37, 98	METHYLCELLULOSE .....	134
<i>megestrol acetate (appetite)</i> .....	98	<i>methylcellulose powder</i> .....	134
MEKINIST .....	45	<i>methylcobalamin</i> .....	165
MEKTOVI .....	45	<i>methylphenidate hcl</i> .....	77, 78
<i>melatonin</i> .....	154	<i>methylprednisolone</i> .....	93
MELATONIN .....	154	<i>methylprednisolone acetate</i> .....	93
MELATONIN TAB 1-10MG.....	154	<i>methylprednisolone sod succ</i> .....	93
MELATONIN TAB 3-10MG.....	154	<i>methyltestosterone</i> .....	84
<i>melatonin tr</i> .....	154	<i>metoclopramide hcl</i> .....	104
<i>melatonin-pyridoxine tab 3-10 mg</i> .....	154	<i>metolazone</i> .....	60
<i>melatonin-pyridoxine tab 5-10 mg</i> .....	154	<i>metoprolol &amp; hydrochlorothiazide tab 100-</i> <i>25 mg</i> .....	58
<i>meloxicam</i> .....	16	<i>metoprolol &amp; hydrochlorothiazide tab 100-</i> <i>50 mg</i> .....	58
<i>memantine hcl</i> .....	63	<i>metoprolol &amp; hydrochlorothiazide tab 50-25</i> <i>mg</i> .....	57
<i>memantine hcl tab 28 x 5 mg &amp; 21 x 10</i> <i>mg titration pack</i> .....	63	<i>metoprolol succinate</i> .....	58
MENACTRA INJ.....	129	<i>metoprolol tartrate</i> .....	58
M-END DMX LIQ .....	189	<i>metronidazole</i> .....	21
M-END PE LIQ.....	189	<i>metronidazole (topical)</i> .....	216
<i>m-end wc</i> .....	189	<i>metronidazole vaginal</i> .....	117
MENQUADFI INJ.....	129	<i>metyrosine</i> .....	61
<i>menthol cough drops</i> .....	226	MG SO4/D5W INJ 10MG/ML.....	138
<i>menthol crystals</i> .....	134	<i>m-hist pd</i> .....	180
MENVEO INJ.....	129	MI-ACID CHW .....	101
MENVEO SOL .....	129	<i>micafungin sodium</i> .....	23
MEPHYTON.....	165	MICATIN.....	202
<i>mercaptopurine</i> .....	35	MICATIN CRE 2% .....	202
<i>meropenem</i> .....	21	MICATIN POW 2%.....	202
<i>mesalamine</i> .....	106, 107	<i>miconazole 3 combination</i> .....	117
<i>mesalamine w/ cleanser</i> .....	107	MICONAZOLE KIT 200MG/2% .....	117
MESNEX .....	50	<i>miconazole nitrate vaginal</i> .....	117
METAMUCIL.....	110	<i>miconazole nitrate vaginal supp 1200 mg &amp;</i> <i>2% cream kit</i> .....	117
<i>metamucil 3-in-1 daily fi</i> .....	110	MICROSPACER MIS.....	189
METAMUCIL 4-IN-1 FIBER.....	110	<i>midodrine hcl</i> .....	61
METAMUCIL POW 28% CIT .....	111	MIEBO .....	175
METAMUCIL POW 48.57% .....	111	<i>mifepristone (hyperglycemia)</i> .....	96
METAMUCIL POW 58.6 CIT .....	111	<i>miglustat</i> .....	96
METAMUCIL POW 58.6%.....	111	MIL-A-MULSIO EMU.....	165
METAMUCIL POW 63% .....	111	<i>milk of magnesia concentr</i> .....	111
METAMUCIL POW ORANGE.....	111		
METAMUCIL WAF.....	111		
<i>metformin hcl</i> .....	86		

This document includes a list of drugs covered on our formulary as of July 1, 2024. You can find information on what the symbols and abbreviations on this table mean by going to page 7.

<i>mimvey</i> .....	92
MINERAL OIL .....	111
<i>mineral oil (bulk)</i> .....	111
MINERAL OIL ENE .....	111
MINERAL OIL LIGHT.....	111
<i>mineral oil light (bulk)</i> .....	111
<i>miniprin low dose</i> .....	14
<i>minocycline hcl</i> .....	34
<i>minoxidil</i> .....	61
MIRALAX.....	111
<i>mirtazapine</i> .....	64
<i>misoprostol</i> .....	113
MITIGARE.....	10
<i>mm aspirin</i> .....	14
M-M-R II INJ .....	129
M-NATAL PLUS TAB.....	139
<i>modafinil</i> .....	82
<i>moexipril hcl</i> .....	52
MOISTURE BARRIER .....	216
MOISTURE EYE DRO .....	175
<i>moisturel therapeutic</i> .....	216
<i>moisturizing lotion</i> .....	216
<i>moisturizing lubricant ey</i> .....	175
<i>molindone hcl</i> .....	69
<i>mometasone furoate</i> .....	206
<i>monistat 1-day</i> .....	117
MONISTAT 3.....	117
MONISTAT 3 KIT COMBINAT .....	117
MONISTAT 7.....	117
MONJUVI .....	45
MONOCAL TAB 3-250 .....	148
<i>montelukast sodium</i> .....	195
MORE-DOPHILUS ACIDOPHILUS.....	103
<i>morphine sulfate</i> .....	17, 18
MORPHINE SULFATE .....	18
MORPHINE SULFATE/SODIUM C .....	18
<i>motrin arthritis pain</i> .....	14
MOTRIN MIGRA TAB 200MG .....	16
MOUNJARO .....	86
MOVANTIK .....	113
<i>moxifloxacin hcl</i> .....	32
<i>moxifloxacin hcl (ophth)</i> .....	171
<i>moxifloxacin hcl 400 mg/250ml in sodium chloride 0.8% inj</i> .....	32
<i>mp triple antibiotic plus</i> .....	201
MS COLD MIS DAY/NITE .....	189
MTERYTI TAB.....	165
MTERYTI TAB FOLIC 5.....	165
MUCINEX .....	189
MUCINEX CAP DAY/NGHT.....	189

MUCINEX CAP FAST-MAX.....	189
MUCINEX CGH GRA 5-100MG.....	189
MUCINEX CHLD LIQ MULTISYM .....	190
MUCINEX COLD LIQ /KIDS .....	190
MUCINEX COLD LIQ CHILD .....	190
MUCINEX COLD LIQ SINUS .....	190
MUCINEX D TAB 60-600MG.....	190
MUCINEX D/N PAK FAST/MAX.....	190
MUCINEX FAST MIS DAY/NGHT .....	190
MUCINEX FAST TAB 5-10-200.....	190
<i>mucinex fast-max day time</i> .....	190
MUCINEX LIQ INSTASOO .....	226
<i>mucinex sinus-max day/nig</i> .....	190
<i>mucus congestion &amp; cough</i> .....	190
<i>mucus relief dm</i> .....	190
<i>mucus relief dm maximum s</i> .....	190
MULTAQ.....	55
<i>multi-delyn</i> .....	165
MULTI-DELYN LIQ /IRON.....	165
<i>multiple electrolytes ph 5.5</i> .....	138
<i>multiple electrolytes ph 7.4</i> .....	138
<i>mupirocin</i> .....	201
MURO 128 .....	175
MUSCLE RUB CRE ULT STR .....	216
MUSCLE RUB OIN.....	216
MVW COMPLETE DRO PEDIATRI.....	166
MYCITRACIN OIN.....	201
<i>mycophenolate mofetil</i> .....	127
<i>mycophenolate sodium</i> .....	127
MYLANTA CHW 400MG .....	101
MYLANTA SUS.....	101
MYLANTA SUS SUPREME .....	101
MYRBETRIQ.....	116

## N

<i>nabumetone</i> .....	16
<i>nac</i> .....	154
NAC.....	154
<i>nadolol</i> .....	58
<i>nafcillin sodium</i> .....	33
NAGLAZYME.....	96
<i>nalbuphine hcl</i> .....	19
<i>naloxone hcl</i> .....	83
<i>naltrexone hcl</i> .....	83
NAMZARIC CAP 14-10MG.....	63
NAMZARIC CAP 21-10MG.....	63
NAMZARIC CAP 28-10MG.....	63
NAMZARIC CAP 7-10MG .....	63
NAMZARIC CAP PACK .....	63
NANOVM POW 1-3 YRS .....	166

This document includes a list of drugs covered on our formulary as of July 1, 2024. You can find information on what the symbols and abbreviations on this table mean by going to page 7.

NAPHCN-A SOL OP .....	173	<i>niacin (antihyperlipidemic)</i> .....	57
<i>naproxen</i> .....	16	NIACIN FLUSH-FREE EXTRA S.....	166
<i>naproxen sodium</i> .....	16	<i>niacin tab cr 500 mg</i> .....	166
<i>naratriptan hcl</i> .....	79	NIACIN TR.....	166
NASACORT ALR SPR 55MCG/AC .....	198	<i>niacinamide</i> .....	166
NASADROPS SALINE ON THE G .....	196	NIACINOL .....	166
NASAL DECONGESTANT .....	190	<i>nicardipine hcl</i> .....	59
NASCOBAL .....	166	NICE PURE POW BAK SODA .....	134
NASOGEL GEL .....	196	NICOBID CAP 125MG CR.....	166
NASOPEN PE LIQ.....	190	NICOBID CAP 250MG CR.....	166
NATACYN .....	171	NICOBID CAP 500MG CR.....	166
<i>nateglinide</i> .....	86	<i>nicotine polacrilex</i> .....	14
NATPARA .....	90	NICOTINE SYS KIT TRANSDER .....	83
NATRAPEL .....	217	NICOTROL INHALER .....	84
NATRAPEL 12-HOUR TICK & I.....	217	NICOTROL NS .....	84
<i>nat-rul antioxidants c+e</i> .....	166	<i>nifedipine</i> .....	59
<i>natural herb cough drops</i> .....	226	NIGHT TIME CAP COLD/FLU .....	190
<i>natural vegetable fiber</i> .....	111	<i>nighttime cold &amp; flu</i> .....	190
NAYZILAM .....	74	<i>nighttime sinus &amp; congest</i> .....	190
<i>nebivolol hcl</i> .....	58	<i>nilutamide</i> .....	37
<i>nefazodone hcl</i> .....	64	<i>nimodipine</i> .....	59
<i>neomycin sulfate</i> .....	21	NINJACOF LIQ.....	190
<i>neomycin-bacitrac zn-polymyx 5(3.5)mg-</i> <i>400unt-10000unt op oin</i> .....	171	NINJACOF-A LIQ .....	190
<i>neomycin-polymy-gramicid op sol 1.75-</i> <i>10000-0.025mg-unt-mg/ml</i> .....	171	NINJACOF-XG LIQ 200-8/5 .....	190
<i>neomycin-polymyxin-dexamethasone</i> <i>ophth oint 0.1%</i> .....	170	NINLARO .....	45
<i>neomycin-polymyxin-dexamethasone</i> <i>ophth susp 0.1%</i> .....	170	<i>nitazoxanide</i> .....	21
<i>neomycin-polymyxin-hc ophth susp</i> .....	170	<i>nitisinone</i> .....	96
<i>neomycin-polymyxin-hc otic soln 1%</i> .....	177	NITRO-BID .....	61
<i>neomycin-polymyxin-hc otic susp 3.5</i> <i>mg/ml-10000 unit/ml-1%</i> .....	177	<i>nitrofurantoin macrocrystal</i> .....	21
<i>neo-polycin 5(3.5)mg-400unt-10000unt op</i> <i>oin</i> .....	171	<i>nitrofurantoin monohyd macro</i> .....	21
<i>neo-polycin hc ophth oint 1%</i> .....	170	<i>nitroglycerin</i> .....	61
NEOQ10 .....	154	<i>nitroglycerin (intra-anal)</i> .....	217
NEO-SYNEPHRINE.....	190	NIVANEX DMX TAB .....	191
NEPHRONEX LIQ 0.9/5ML.....	166	NIX COMPLETE KIT LICE 1% .....	220
NEPHRO-VITE TAB RX.....	166	NIX CREME LIQ RINSE 1% .....	220
NERLYNX .....	45	<i>nizatidine</i> .....	106
<i>nestrex</i> .....	166	<i>noble formula</i> .....	217
NEUPRO .....	66	<i>non-asa severe allergy</i> .....	191
<i>nevirapine</i> .....	25	<i>norethindrone acetate</i> .....	98
NEXAFED SINS TAB + PAIN.....	190	<i>norethindrone acetate-ethinyl estradiol tab</i> <i>0.5 mg-2.5 mcg</i> .....	92
NEXAVAR.....	45	<i>norethindrone acetate-ethinyl estradiol tab</i> <i>1 mg-5 mcg</i> .....	92
NEXLETOL .....	57	NORPACE CR .....	55
NEXLIZET TAB 180/10MG.....	57	<i>nortriptyline hcl</i> .....	64
<i>niacin</i> .....	166	NORVIR .....	25
		NOVAFERRUM 50 .....	121
		NOVAFERRUM LIQ 125 .....	121
		NOVAFERRUM PEDIATRIC DROP .....	121
		NOVOLIN INJ 70/30 .....	88

This document includes a list of drugs covered on our formulary as of July 1, 2024. You can find information on what the symbols and abbreviations on this table mean by going to page 7.

NOVOLIN INJ 70/30 FP	88
NOVOLIN N	88
NOVOLIN N FLEXPEN	88
NOVOLIN R	89
NOVOLIN R FLEXPEN	89
NOVOLOG	89
NOVOLOG FLEXPEN	89
NOVOLOG MIX INJ 70/30	89
NOVOLOG MIX INJ FLEXPEN	89
NOVOLOG PENFILL	89
NP-27	203
NP-27 SOL 1%	203
NUBEQA	37
NUDEXTA CAP 20-10MG	80
NULOJIX	127
NU-MAG TAB 71.5-119	148
NUPERCAINAL	217
NUPLAZID	69
NURTEC	79
NUTRILIPID	140
NUZYRA	34
<i>nyamyc</i>	203
<i>nycoff</i>	226
NYMALIZE	59
NYQUIL COUGH LIQ 6.25-15	191
NYQUIL SINEX CAP NT RELF	191
<i>nystatin</i>	23
<i>nystatin (mouth-throat)</i>	226
<i>nystatin (topical)</i>	203
<i>nystop</i>	203
<b>o</b>	
OBREDON SOL 2.5-200	191
OCEAN NASAL SPRAY	196
OCTAGAM	126
<i>octreotide acetate</i>	97
OCUSOFT LID AER ORIGINAL	217
ODEFSEY TAB	27
ODOMZO	45
<i>odorless coated fish oil/</i>	155
OFEV	196
<i>ofloxacin (ophth)</i>	171
<i>ofloxacin (otic)</i>	177
OGIVRI	45
OGIVRI INJ 420MG	45
OGSIVEO	45
OJJAARA	45
<i>olanzapine</i>	69
<i>olmesartan medoxomil</i>	55

<i>olmesartan medoxomil-hydrochlorothiazide tab 20-12.5 mg</i>	53
<i>olmesartan medoxomil-hydrochlorothiazide tab 40-12.5 mg</i>	53
<i>olmesartan medoxomil-hydrochlorothiazide tab 40-25 mg</i>	53
<i>olmesartan-amlodipine-hydrochlorothiazide tab 20-5-12.5 mg</i>	53
<i>olmesartan-amlodipine-hydrochlorothiazide tab 40-10-12.5 mg</i>	54
<i>olmesartan-amlodipine-hydrochlorothiazide tab 40-10-25 mg</i>	54
<i>olmesartan-amlodipine-hydrochlorothiazide tab 40-5-12.5 mg</i>	54
<i>olmesartan-amlodipine-hydrochlorothiazide tab 40-5-25 mg</i>	54
<i>olopatadine hcl</i>	173
OMEGA POWER CAP 1050MG	155
OMEGA-3 CAP 350MG	155
OMEGA-3 CAP FISH OIL	155
<i>omega-3 fatty acids</i>	155
OMEGA-3 IQ CHW 240MG	155
<i>omega-3-acid ethyl esters cap 1 gm</i>	57
OMEGAPURE CAP 780 EC	155
<i>omeprazole</i>	115
OMNIPOD 5 G6 KIT INTRO	89
OMNIPOD 5 G6 MIS PODS	89
OMNIPOD 5 G7 KIT INTRO	89
OMNIPOD 5 G7 MIS PODS	89
OMNIPOD DASH KIT INTRO	89
OMNIPOD DASH MIS PODS	89
OMNIPOD GO KIT 10UNT/DY	89
OMNIPOD GO KIT 15UNT/DY	89
OMNIPOD GO KIT 20UNT/DY	89
OMNIPOD GO KIT 25UNT/DY	89
OMNIPOD GO KIT 30UNT/DY	90
OMNIPOD GO KIT 35UNT/DY	90
OMNIPOD GO KIT 40UNT/DY	90
OMNIPOD MIS CLASSIC	90
<i>ondansetron</i>	104
<i>ondansetron hcl</i>	104, 105
ONE A DAY CAP PRENATAL	166
ONTRUZANT	45
ONUREG	36
OPCON-A SOL OP	173
OPERAND CHLORHEXIDINE GLU	217
OPSUMIT	62
<i>optics mini drops</i>	176
OPTIMAL D3 M	166
ORA-FILM	226

This document includes a list of drugs covered on our formulary as of July 1, 2024. You can find information on what the symbols and abbreviations on this table mean by going to page 7.

ORA-HESIVE PST BASE .....	134
<i>oral analgesic maximum st</i> .....	226
<i>oral anesthetic maximum s</i> .....	226
ORAMAGIC PLUS .....	226
ORASEP SPR .....	226
<i>orastat maximum strength</i> .....	226
ORAZINC .....	148
ORGOVYX .....	37
<i>original ointment</i> .....	203
ORKAMBI GRA 100-125 .....	196
ORKAMBI GRA 150-188 .....	197
ORKAMBI GRA 75-94MG .....	196
ORKAMBI TAB 100-125 .....	197
ORKAMBI TAB 200-125 .....	197
ORSERDU .....	37
<i>os-cal</i> .....	148
OS-CAL .....	148
OS-CAL TAB 500 + D .....	148
OS-CAL ULTRA TAB .....	148
<i>osco natural fiber laxati</i> .....	111
<i>osco potassium gluconate</i> .....	136
<i>oseltamivir phosphate</i> .....	29
OSTEO-PORETI TAB .....	148
OTEZLA .....	124
OTEZLA TAB 10/20/30 .....	124
<i>oxacillin sodium</i> .....	33
OXALIC ACID CRY .....	134
<i>oxalic acid crystals</i> .....	134
<i>oxaliplatin</i> .....	35
<i>oxcarbazepine</i> .....	74
OXIPOR VHC LOT .....	217
<i>oxybutynin chloride</i> .....	116
<i>oxycodone hcl</i> .....	19
<i>oxycodone w/ acetaminophen tab 10-325</i> <i>mg</i> .....	19
<i>oxycodone w/ acetaminophen tab 2.5-325</i> <i>mg</i> .....	19
<i>oxycodone w/ acetaminophen tab 5-325</i> <i>mg</i> .....	19
<i>oxycodone w/ acetaminophen tab 7.5-325</i> <i>mg</i> .....	19
OXYCONTIN .....	17
<i>oxymetazoline hcl</i> .....	191
<i>oyster shell</i> .....	148
OYSTER SHELL CALCIUM .....	148
OZEMPIC (0.25 OR 0.5 MG/DOSE) .....	86
OZEMPIC (0.25 OR 0.5MG/DOSE) .....	86
OZEMPIC (1MG/DOSE) .....	86
OZEMPIC (2MG/DOSE) .....	86

## P

P D NATAL/FA TAB .....	167
<i>pacerone</i> .....	55
<i>paclitaxel</i> .....	39
<i>paclitaxel protein-bound particles for iv</i> <i>susp 100 mg</i> .....	39
PAIN RELIEF TAB .....	14
<i>painaid</i> .....	14
<i>paliperidone</i> .....	69
PALMITATE-A .....	167
<i>pamidronate disodium</i> .....	91
PAMIDRONATE DISODIUM .....	91
PANRETIN .....	217
<i>pantoprazole sodium</i> .....	115
PANZYGA .....	126
<i>paraplatin</i> .....	35
<i>paricalcitol</i> .....	99
<i>paroxetine hcl</i> .....	64, 65
PARVA-CAL TAB 250-100 .....	148
PARVA-CAL TAB 500MG .....	148
PATADAY .....	173
PATADAY EXTRA STRENGTH .....	173
PAXLOVID TAB 150-100 .....	29
PAXLOVID TAB 300-100 .....	29
<i>pazopanib hcl</i> .....	45
PCCA MBK MIS FAT ACID .....	134
PEDIACARE INFANT .....	191
PEDIACARE LIQ CGH/COLD .....	191
PEDIA-LAX .....	111
PEDIARIX INJ 0.5ML .....	129
<i>pediatric enema</i> .....	111
PEDIATRIC MIS MASK .....	191
PEDIAVENT .....	180
PEDVAX HIB .....	129
PEG 1000 LIQ .....	134
<i>peg 3350-kcl-na bicarb-nacl-na sulfate for</i> <i>soln 236 gm</i> .....	111
<i>peg 3350-kcl-sod bicarb-nacl for soln 420</i> <i>gm</i> .....	111
PEGASYS .....	29
PEMAZYRE .....	45
<i>pemetrexed disodium</i> .....	36
PEN GK/DEXTR INJ 40000/ML .....	33
PEN GK/DEXTR INJ 60000/ML .....	33
PENBRAYA INJ .....	129
<i>penicillamine</i> .....	91
<i>penicillin g potassium</i> .....	33
<i>penicillin g sodium</i> .....	33
<i>penicillin v potassium</i> .....	33

This document includes a list of drugs covered on our formulary as of July 1, 2024. You can find information on what the symbols and abbreviations on this table mean by going to page 7.

PENTACEL INJ.....	129
<i>pentamidine isethionate inh</i> .....	21
<i>pentamidine isethionate inj</i> .....	21
<i>pentoxifylline</i> .....	122
PEPCID AC .....	106
PEPCID CHW COMPLETE .....	113
PEPTO-BISMOL TO-GO.....	104
PERCOGESIC TAB 12.5-325.....	191
PERFECT IRON .....	121
<i>perindopril erbumine</i> .....	52
<i>perio gard</i> .....	226
PERMA-GRIP POW .....	226
<i>permethrin</i> .....	220
PERMETHRIN LOT 1% .....	220
<i>perox-a-mint</i> .....	227
<i>perphenazine</i> .....	69
PERSERIS.....	69
PERUVIAN LIQ BALSAM .....	134
PETROLATUM OIN .....	217
<i>petrolatum ointment</i> .....	134
<i>petrolatum, hydrophilic ointment</i> .....	134
<i>pfizerpen</i> .....	33
PHANATUSS SYP .....	191
PHARMABASE BARRIER .....	217
PHAZYME.....	113
PHAZYME MAXIMUM STRENGTH .....	113
PHAZYME MS CAP 166MG.....	113
<i>phenelzine sulfate</i> .....	65
<i>phenobarbital</i> .....	74
<i>phenobarbital sodium</i> .....	74
PHENOL LIQ .....	217
<i>phenol liquid</i> .....	217
<i>phenylephrine in hard fat</i> .....	217
<i>phenylephrine w/ dm-gg liqd 10-18-200</i> <i>mg/15ml</i> .....	191
<i>phenylephrine w/ dm-gg syrup 5-10-100</i> <i>mg/5ml</i> .....	191
<i>phenylephrine w/ dm-gg tab 10-17.5-385</i> <i>mg</i> .....	191
<i>phenytek</i> .....	74
<i>phenytoin</i> .....	74
<i>phenytoin sodium</i> .....	74
<i>phenytoin sodium extended</i> .....	74
PHESGO SOL.....	45
PHILLIPS.....	111
PHOS-NAK POW CONCENTR.....	148
PHOSPHATIDYL POW 20% .....	134
<i>phytonadione</i> .....	167
PIFELTRO.....	25
<i>pilocarpine hcl</i> .....	174

<i>pilocarpine hcl (oral)</i> .....	227
<i>pimozide</i> .....	69
<i>pindolol</i> .....	58
<i>pioglitazone hcl</i> .....	86
<i>pioglitazone hcl-metformin hcl tab 15-500</i> <i>mg</i> .....	86
<i>pioglitazone hcl-metformin hcl tab 15-850</i> <i>mg</i> .....	86
<i>piperacillin sod-tazobactam na for inj 3.375</i> <i>gm (3-0.375 gm)</i> .....	33
<i>piperacillin sod-tazobactam sod for inj 13.5</i> <i>gm (12-1.5 gm)</i> .....	34
<i>piperacillin sod-tazobactam sod for inj 2.25</i> <i>gm (2-0.25 gm)</i> .....	33
<i>piperacillin sod-tazobactam sod for inj 4.5</i> <i>gm (4-0.5 gm)</i> .....	34
<i>piperacillin sod-tazobactam sod for inj 40.5</i> <i>gm (36-4.5 gm)</i> .....	34
PIQRAY 200MG DAILY DOSE.....	46
PIQRAY 250MG TAB DOSE.....	46
PIQRAY 300MG DAILY DOSE.....	46
<i>pirfenidone</i> .....	197
<i>piroxicam</i> .....	16
PLASMA-LYTE INJ -148 .....	138
PLASMA-LYTE INJ -A .....	138
<i>plenamine</i> .....	140
PLENVU SOL .....	112
PLURONIC.....	134
<i>podofilox</i> .....	217
POLAR FROST .....	217
POLIGRIP MIS COMFORT.....	227
POLIGRIP SUP CRE STRNG FR .....	227
POLY HIST TAB 7.5-10MG.....	191
<i>poly-c</i> .....	167
<i>polycin ophth oint</i> .....	171
POLY-HIST DM LIQ 5-25-10.....	191
POLY-HIST PD LIQ .....	191
<i>polymyxin b-trimethoprim ophth soln</i> <i>10000 unit/ml-0.1%</i> .....	171
POLYSORBATE SOL 20 .....	134
POLYSPORIN OIN .....	201
POLY-TUSSIN LIQ 10-4-10 .....	191
POLY-VENT DM TAB.....	191
POLY-VENT IR TAB 60-380MG .....	191
POLY-VI-SOL SOL 50MG/ML.....	167
POLY-VI-SOL SOL IRON.....	167
POMALYST .....	38
<i>posaconazole</i> .....	23
POSTURE-D TAB 600MG .....	148
POSTURE-D TAB CALC/MAG.....	148

This document includes a list of drugs covered on our formulary as of July 1, 2024. You can find information on what the symbols and abbreviations on this table mean by going to page 7.

POT CHL 20MEQ/L IN NAACL 0.45% INJ...	138	PRENATAL TAB PLUS.....	139
POT CHL 20MEQ/L IN NAACL 0.9% INJ .....	138	PREPARATIO H CRE TOTABLE.....	217
POT CHL 40MEQ/L IN NAACL 0.9% INJ .....	138	PREPARATIO H GEL .....	218
POT GLUCONAT TAB 500MG.....	136	PREPARATION OIN H .....	218
POT NITRATE GRA .....	134	<i>prevalite</i> .....	57
POT SORBATE CRY .....	134	PREVYMIS.....	29
<i>potassium</i> .....	136	PREZCOBIX TAB 800-150 .....	27
<i>potassium &amp; sodium phosphates powder</i>		PREZISTA .....	25
<i>pack 280-160-250 mg</i> .....	149	PRIFTIN .....	28
<i>potassium chloride</i> .....	139	PRIOLOSEC OTC .....	115
POTASSIUM CHLORIDE .....	139	<i>primaquine phosphate</i> .....	24
<i>potassium chloride 20 meq/l (0.15%) in</i>		PRIMAQUINE PHOSPHATE.....	24
<i>dextrose 5% inj</i> .....	139	<i>primidone</i> .....	74
<i>potassium chloride microencapsulated</i>		PRIORIX INJ .....	129
<i>crystals er</i> .....	139	PRIVIGEN.....	126
<i>potassium citrate (alkalinizer)</i> .....	116	PRO NUTRIENT CAP OMEGA3 .....	155
<i>potassium gluconate</i> .....	136	<i>probenecid</i> .....	10
POTASSIUM GLUCONATE.....	136	<i>prochlorperazine</i> .....	105
POTASSIUM GLUCONATE ER.....	136	<i>prochlorperazine edisylate</i> .....	105
POTASSIUM HYDROXIDE .....	134	<i>prochlorperazine maleate</i> .....	105
POTASSIUM IODIDE .....	97	PROCORT CRE.....	218
POTASSIUM TAB CHELATED .....	137	PROCRIT .....	118
<i>povidone-iodine</i> .....	217	PROCTOCORT.....	218
POVIDONE-IODINE PREP PAD.....	217	PROCTOFOAM AER HC 1%.....	218
<i>powders</i> .....	217	PROCTOFOAM AER NS 1%.....	218
<i>pramipexole dihydrochloride</i> .....	67	<i>procto-med hc</i> .....	218
<i>pramoxine hcl (rectal)</i> .....	217	<i>proctosol hc</i> .....	218
<i>prasterone (dhea)</i> .....	155	<i>proctozone-hc</i> .....	218
PRASTERONE (DHEA) CAP 25 .....	155	PROFE .....	121
<i>prasugrel hcl</i> .....	122	PROFERRIN ES TAB 12 MG .....	121
<i>pravastatin sodium</i> .....	56	<i>progesterone</i> .....	98
<i>praziquantel</i> .....	21	PROGRAF .....	127
<i>prazosin hcl</i> .....	52	PROLASTIN-C.....	197
PREDATOR .....	217	PROLENSA .....	172
<i>prednisolone</i> .....	93	PROLIA.....	91
<i>prednisolone acetate (ophth)</i> .....	172	PROMACTA .....	122
PREDNISOLONE SODIUM PHOSP.....	172	<i>promethazine hcl</i> .....	105
<i>prednisolone sodium phosphate</i> .....	93	<i>promethazine vc/codeine</i> .....	191
<i>prednisone</i> .....	93	<i>promethazine w/ codeine syrup 6.25-10</i>	
PREDNISONE INTENSOL .....	93	<i>mg/5ml</i> .....	192
<i>pregabalin</i> .....	74	<i>promethazine-dm syrup 6.25-15 mg/5ml</i>	
PREHEVBRIO.....	129	.....	192
PREMASOL SOL 10% .....	140	<i>promethazine-phenylephrine-codeine syrup</i>	
PRENAT MULTI CAP +DHA.....	167	<i>6.25-5-10 mg/5ml</i> .....	192
PRENATAL CAP FORMULA .....	167	PRONTO SHA 0.33-4%.....	220
PRENATAL DHA PAK MULTI.....	167	<i>propafenone hcl</i> .....	55
PRENATAL FRM TAB A-FREE .....	167	<i>proparacaine hcl</i> .....	176
PRENATAL GUM CHW 0.4-32.5.....	167	<i>propranolol hcl</i> .....	58
PRENATAL TAB.....	167	PROPYLENE GL SOL.....	135
PRENATAL TAB 27-1MG.....	139	<i>propylene glycol</i> .....	135

This document includes a list of drugs covered on our formulary as of July 1, 2024. You can find information on what the symbols and abbreviations on this table mean by going to page 7.

<i>propylthiouracil</i> .....	99
PROQUAD INJ.....	129
PRO-RED AC SYP 5-1-9/5.....	191
PROSOL INJ 20%.....	140
PROTO-CHOL CAP 1000MG.....	155
<i>protriptyline hcl</i> .....	65
<i>pseudoeph-chlorphen w/ hydrocodone soln</i> <i>60-4-5 mg/5ml</i> .....	192
<i>pseudoephed-bromphen-dm syrup 30-2-10</i> <i>mg/5ml</i> .....	192
<i>pseudoephedrine hcl</i> .....	192
<i>psoriasis</i> .....	218
PSORIASIS MEDICATED SKIN.....	218
<i>psyllium</i> .....	112
PULMOZYME.....	197
PURE L-CITRULLINE.....	155
PURIXAN.....	36
<i>px enteric aspirin</i> .....	14
<i>px fish oil</i> .....	155
<i>pyrazinamide</i> .....	28
<i>pyrethrins-piperonyl butoxide liq 0.3-3%</i> .....	220
<i>pyridostigmine bromide</i> .....	80
<i>pyridoxine hcl</i> .....	167
PYRILAMIN/PE TAB 25-10MG.....	192
<i>pyrithione zinc</i> .....	218
<b>Q</b>	
<i>qc 3 day vaginal cream</i> .....	117
<i>qc anti-diarrheal advance</i> .....	104
<i>qc aspirin low dose</i> .....	14
<i>qc b-complex + vitamin c</i> .....	167
<i>qc cough drops</i> .....	227
<i>qc diclofenac sodiium</i> .....	14
<i>qc sore throat</i> .....	227
Q-GEL.....	155
QINLOCK.....	46
<i>q-tussin dm</i> .....	192
QUADRACEL INJ.....	129
QUADRACEL INJ 0.5ML.....	129
<i>quetiapine fumarate</i> .....	69
<i>quinapril hcl</i> .....	52
<i>quinidine sulfate</i> .....	55
<i>quinine sulfate</i> .....	24
QULIPTA.....	79
<i>qunol coq10/ubiquinol/meg</i> .....	155
<i>q-up</i> .....	155
<b>R</b>	
<i>ra allergy</i> .....	180

<i>ra antacid pain relief</i> .....	14
<i>ra antibiotic/pain relief</i> .....	201
<i>ra antifungal foot care</i> .....	203
<i>ra aspirin ec</i> .....	14
<i>ra aspirin ec adult low s</i> .....	14
<i>ra body powder medicated</i> .....	218
RA CA/BORON TAB.....	149
<i>ra calcium 600</i> .....	149
<i>ra cleaning/disinfecting</i> .....	176
<i>ra cough drops</i> .....	227
<i>ra day/night maximum stre</i> .....	192
<i>ra ginkgo biloba</i> .....	155
RA HIGH POTENCY IRON.....	121
<i>ra l-arginine</i> .....	155
<i>ra laxative extra strengt</i> .....	112
<i>ra medicated first aid sp</i> .....	218
<i>ra mouth pain anesthetic</i> .....	227
RA OYS SHL/D TAB 500MG.....	149
<i>ra potassium/magnesium as</i> .....	149
<i>ra severe cold/night time</i> .....	192
<i>ra slow release iron</i> .....	121
RA TRUEPLUS GLUCOSE.....	94
<i>ra tussin cough dm sugar</i> .....	192
RA VITAMIN B-1.....	167
RA VITAMIN B-12.....	167
RABAVERT INJ.....	129
<i>rabeprazole sodium</i> .....	115
<i>raloxifene hcl</i> .....	97
<i>ramipril</i> .....	52
<i>ranolazine</i> .....	61
<i>rasagiline mesylate</i> .....	67
<i>raspberry syrup</i> .....	135
RAYALDEE.....	99
RECOMBIVAX HB.....	129
RECTIV.....	218
RED YEAST POW RICE.....	135
REESES PINWORM MEDICINE.....	22
REFENESEN TAB CHST CNG.....	192
REFRESH DRO OP.....	176
REFRESH GEL OPTIVE.....	176
REFRESH LIQUIGEL.....	176
REFRESH OPTI DRO 0.5-0.9%.....	176
REFRESH PLUS.....	176
REFRESH SOL OPTIVE.....	176
REGANEX.....	221
<i>relcof c</i> .....	192
RELENZA DISKHALER.....	29
RELION ALL- MIS IN-ONE.....	97
RELISTOR.....	113
REMEDY CLEANSING BODY LOT.....	218

This document includes a list of drugs covered on our formulary as of July 1, 2024. You can find information on what the symbols and abbreviations on this table mean by going to page 7.



<i>remedy phytoplex antifung</i> .....	203	<i>rimantadine hydrochloride</i> .....	29
REMEDY PST CALAZIME .....	218	RINVOQ .....	124
REMEDY SKIN REPAIR .....	218	RISACAL-D TAB .....	149
REMICADE .....	124	RISAMINE OIN .....	218
RENFLEXIS .....	124	<i>risedronate sodium</i> .....	91
<i>repaglinide</i> .....	86, 87	<i>risperidone</i> .....	70
REPATHA .....	57	<i>risperidone microspheres</i> .....	70
REPATHA PUSHTRONEX SYSTEM .....	57	<i>ritonavir</i> .....	25
REPATHA SURECLICK .....	57	<i>rivastigmine</i> .....	63
REPEL SPORTSMEN MAX .....	218	<i>rivastigmine tartrate</i> .....	63
REPLACE TAB SR .....	137	<i>rizatriptan benzoate</i> .....	79
REPLESTA .....	167	<i>robafen dm clear</i> .....	192
REPLESTA CHILDRENS .....	168	<i>robafen dm cough clear</i> .....	192
RESCON TAB 2-60MG .....	192	ROBITUSSIN COUGHGELS .....	192
RESCON-DM SYP .....	192	ROBITUSSIN LIQ CGH/CLD .....	192
RESPIRE-30 CAP .....	192	ROBITUSSIN SYP 100/5ML .....	193
RESTASIS .....	176	ROCKLATAN DRO .....	174
RESTASIS MULTIDOSE .....	176	<i>roflumilast</i> .....	197
RESTORE PAK .....	104	ROLAIDS CHW .....	101
RETAINÉ HPMC .....	176	ROLAIDS CHW EX ST .....	102
RETAINÉ MGD EMU 0.5-0.5% .....	176	ROLAIDS MULT CHW SYMPTOM .....	102
RETEVMO .....	46	<i>ropinirole hydrochloride</i> .....	67
REVLIMID .....	38	<i>rosuvastatin calcium</i> .....	56
REXULTI .....	69, 70	ROTARIX SUS .....	129
REYATAZ .....	25	ROTATEQ SOL .....	129
REZLIDHIA .....	46	<i>roweepra</i> .....	74
REZUROCK .....	127	ROZLYTREK .....	46
RHINARIS .....	197	RUBRACA .....	46
RHOPRESSA .....	174	<i>rufinamide</i> .....	75
<i>ribavirin (hepatitis c)</i> .....	29	RUKOBIA .....	25
<i>riboflavin</i> .....	168	RYBELSUS .....	87
RIBOFLAVIN .....	168	RYDAPT .....	46
RICOLA CHERRY HERB SUGAR .....	227	RYDEX LIQ .....	193
RICOLA CHERRY HONEY HERB .....	227	RYMED TAB 2-10MG .....	193
<i>ricola honey lemon w/echi</i> .....	227		
RICOLA HONEY-HERB .....	227	<b>s</b>	
RICOLA LEMON MINT .....	227	S2 .....	197
RICOLA LEMON MINT HERB SU .....	227	<i>sajazir</i> .....	122
RICOLA LOZ .....	227	SALESE LOZ .....	227
<i>ricola mountain herb suga</i> .....	227	SALMON CAP 200MG .....	155
<i>ricola natural herb</i> .....	227	SANDIMMUNE .....	127
RID .....	221	SANTYL .....	221
RID COMPLETE KIT LICE .....	221	<i>sapropterin dihydrochloride</i> .....	97
RID ESS LICE KIT 0.33-4% .....	221	SARNA LOT .....	218
RID LIQ .....	221	<i>saw palmetto (serenoa repens)</i> .....	155
<i>rifabutin</i> .....	28	SAW PALMETTO CAP 450MG .....	155
<i>rifampin</i> .....	28	<i>sb anti-gas</i> .....	114
<i>riluzole</i> .....	80	<i>sb aspirin</i> .....	14
RI-MAG .....	101	<i>sb aspirin adult low stre</i> .....	14
RI-MAG PLUS SUS .....	101	<i>sb childrens ibuprofen</i> .....	16

This document includes a list of drugs covered on our formulary as of July 1, 2024. You can find information on what the symbols and abbreviations on this table mean by going to page 7.

<i>sb cough control</i> .....	193
<i>sb cough control cf</i> .....	193
<i>sb cough relief</i> .....	193
<i>sb lactase</i> .....	105
<i>sb low dose asa ec</i> .....	14
SCSEMBLIX.....	46
<i>scholls for her cracked s</i> .....	218
SCOOBY-DOO CHW.....	168
<i>scopolamine</i> .....	105
SCYTERA.....	219
SE PLUS PROTEIN.....	149
SEA BOND BRI GEL CLEANSER.....	227
SEA BOND WAF.....	227
SEBULEX SHA.....	219
SECUADO.....	70
SECURA EXTRA PROTECTIVE.....	219
<i>selegiline hcl</i> .....	67
<i>selenium</i> .....	149
SELENIUM.....	149
<i>selenium sulfide</i> .....	204
SELENIUM TAB 50MCG.....	149
SELSUN BLUE.....	219
SELZENTRY.....	25
<i>senexon</i> .....	112
SENNA.....	112
SENNA LEAVES MIS.....	112
SEKOKOT.....	112
SEKOKOT S TAB 8.6-50MG.....	112
SEKOKOT XTRA.....	112
SEREVENT DISKUS.....	181
<i>sertraline hcl</i> .....	65
SESAME ST CHW VITAMINS.....	168
<i>sevelamer carbonate</i> .....	98
SHINGRIX.....	129
SIGNIFOR.....	97
<i>sildenafil citrate (pulmonary hypertension)</i> .....	62
<i>siltussin-dm</i> .....	193
<i>silver sulfadiazine</i> .....	201
SIMBRINZA SUS 1-0.2%.....	174
<i>simethicone</i> .....	114
<i>simethicone susp 40 mg/0</i> .....	114
<i>simple - syrup</i> .....	135
<i>simvastatin</i> .....	56
SINUS RELIEF TAB DAY/NGHT.....	193
SINUS WASH CRY SALT.....	197
<i>sirolimus</i> .....	127
SIRTURO.....	28
SIVEXTRO.....	22
SKIN PROTECTANT MOISTURE.....	219

SKYRIZI.....	125
SKYRIZI PEN.....	125
SLO-NIACIN.....	168
SLOW FE.....	121
SLOW MAGNESIUM CHLORIDE/ <i>sm 3-day vaginal</i> .....	149 117
<i>sm 8 hour pain relief</i> .....	14
<i>sm allergy relief</i> .....	180
<i>sm anti-dandruff coal tar</i> .....	219
<i>sm arthritis pain</i> .....	14
<i>sm aspirin adult low stre</i> .....	14
<i>sm aspirin ec low strengt</i> .....	14
<i>sm aspirin low dose</i> .....	15
SM B-COMPLEX TAB /VIT C.....	168
<i>sm biotin</i> .....	168
<i>sm calcium plus/vitamin d</i> .....	149
SM CORAL CALCIUM.....	149
<i>sm cough drops</i> .....	227
<i>sm fiber</i> .....	112
<i>sm flax seed oil</i> .....	155
<i>sm fruit coolers</i> .....	228
<i>sm ginkgo biloba</i> .....	156
SM LAXATIVE TAB REGULAR.....	112
<i>sm natural herb cough dro</i> .....	228
SM SLOW RELEASE IRON.....	121
<i>sm tussin dm</i> .....	193
<i>sm tussin dm cough/chest</i> .....	193
SM VITAMIN D3 MAXIMUM STR.....	168
SOD BENZOATE POW.....	135
SOD CHLORIDE GRA.....	149
SOD METABISU GRA.....	135
SOD PERBORAT CRY.....	135
SOD PROPION POW.....	135
<i>sod sulfate-pot sulf-mg sulf oral sol 17.5- 3.13-1.6 gm/177ml</i> .....	112
SOD SULFITE POW.....	135
<i>sodium benzoate powder</i> .....	135
<i>sodium bicarbonate (antacid)</i> .....	102
SODIUM BORAT POW.....	135
<i>sodium chloride</i> .....	139, 149
SODIUM CHLORIDE.....	149
<i>sodium chloride (gu irrigant)</i> .....	221
<i>sodium chloride hypertonic</i> .....	176
SODIUM CITRA GRA.....	135
<i>sodium fluoride chew; tab; 1.1 (0.5 f) mg/ml soln</i> .....	139
SODIUM OXYBATE.....	82
<i>sodium phenylbutyrate</i> .....	97
<i>sodium polystyrene sulfonate powder</i> .....	91
SODIUM POW BICARBON.....	102

This document includes a list of drugs covered on our formulary as of July 1, 2024. You can find information on what the symbols and abbreviations on this table mean by going to page 7.

<i>sodium saccharin powder</i> .....	156
<i>solifenacin succinate</i> .....	116
SOLIQUA INJ 100/33 .....	90
SOLTAMOX .....	37
SOLU-CORTEF .....	93
SOMATULINE DEPOT .....	97
SOMAVERT .....	97
SOOTH-IT PAD .....	219
<i>sorafenib tosylate</i> .....	46
<i>sorbitol</i> .....	135
SORBITOL .....	112
<i>sore throat</i> .....	228
SORE THROAT LOLLIPOPS .....	228
<i>sore throat lozenges</i> .....	228
<i>sorine</i> .....	56
<i>sotalol hcl</i> .....	56
<i>sotalol hcl (afib/af)</i> .....	56
SPECTROCIN OIN PLUS .....	201
<i>spironolactone</i> .....	52
<i>spironolactone &amp; hydrochlorothiazide tab</i> <i>25-25 mg</i> .....	60
SPRITAM .....	75
SPRYCEL .....	46, 47
<i>sps</i> .....	91
<i>ssd</i> .....	201
<i>st joseph aspirin</i> .....	15
<i>st joseph low dose aspirin</i> .....	15
STAHIST AD LIQ .....	193
STAHIST AD TAB 25-60MG .....	193
STELARA .....	125
STERILE LUBRICANT DROPS .....	176
STEVIA EXTRACT .....	135
STIMULEN LOT .....	219
STIVARGA .....	47
STOPAIN .....	219
<i>streptomycin sulfate</i> .....	22
STRESS B CMP TAB /C TR .....	168
STRESSCAPS CAP .....	168
STRIBILD TAB .....	27
STUART ONE CAP .....	168
<i>subvenite</i> .....	75
<i>sucralfate</i> .....	114
SUCRETS SORE THROAT .....	228
SUDAFED PE MAXIMUM STRENG .....	193
SUDAFED PE PAK COLD .....	193
SUDAFED SINUS CONGESTION .....	193
SUDAFED TAB 60MG .....	193
<i>sulfacetamide sodium (acne)</i> .....	200
<i>sulfacetamide sodium (ophth)</i> .....	171

<i>sulfacetamide sodium-prednisolone ophth</i> <i>soln 10-0.23(0.25)%</i> .....	170
<i>sulfadiazine</i> .....	22
<i>sulfamethoxazole-trimethoprim iv soln</i> <i>400-80 mg/5ml</i> .....	22
<i>sulfamethoxazole-trimethoprim susp 200-</i> <i>40 mg/5ml</i> .....	22
<i>sulfamethoxazole-trimethoprim tab 400-80</i> <i>mg</i> .....	22
<i>sulfamethoxazole-trimethoprim tab 800-</i> <i>160 mg</i> .....	22
SULFAMYLON .....	201
<i>sulfasalazine</i> .....	107
SULFUR POW .....	135
<i>sulindac</i> .....	17
<i>sumatriptan</i> .....	79
<i>sumatriptan succinate</i> .....	79
SUMMERS EVE SOL 0.3% .....	116
<i>sunitinib malate</i> .....	47
SUNLENCA .....	25
SUPER DAILY D3 .....	168
SUPER TWIN CAP EPA/DHA .....	156
SUPERIORSOURCE K1 .....	168
SUSPENDOL-S LIQ .....	135
<i>sv d-mannose</i> .....	156
SWEEN CRE .....	219
SWIM EAR .....	228
SYMDEKO TAB 100-150 .....	197
SYMDEKO TAB 50-75MG .....	197
SYMPAZAN .....	75
SYMTUZA TAB .....	27
SYNAREL .....	91
SYNJARDY TAB 12.5-1000MG .....	87
SYNJARDY TAB 12.5-500 .....	87
SYNJARDY TAB 5-1000MG .....	87
SYNJARDY TAB 5-500MG .....	87
SYNJARDY XR TAB 10-1000 .....	87
SYNJARDY XR TAB 12.5-1000 .....	87
SYNJARDY XR TAB 25-1000 .....	87
SYNJARDY XR TAB 5-1000MG .....	87
SYNTHROID .....	99
SYSTANE BALANCE RESTORATI .....	176
SYSTANE FREE GEL .....	176
SYSTANE PF SOL .....	176
<b>T</b>	
TABLOID .....	36
TABRECTA .....	47
<i>tacrolimus</i> .....	127
<i>tacrolimus (topical)</i> .....	219

This document includes a list of drugs covered on our formulary as of July 1, 2024. You can find information on what the symbols and abbreviations on this table mean by going to page 7.

TAFINLAR .....	47	<i>tg 10peh/380gfn/15dm</i> .....	193
TAGRISSO .....	47	<i>tgt acetaminophen melts c</i> .....	15
TALC POW .....	135	<i>tgt antacid extra strengt</i> .....	102
<i>talc powder</i> .....	135	<i>tgt anti-itch/aloe maximu</i> .....	206
TALTZ .....	125	<i>tgt cough drops</i> .....	228
TALZENNA.....	47	<i>tgt cough formula dm max</i> .....	193
<i>tamoxifen citrate</i> .....	37	<i>tgt eye allergy relief</i> .....	173
<i>tamsulosin hcl</i> .....	115	<i>tgt hemorrhoidal supposit</i> .....	219
TANDEM CAP.....	121	<i>th b complex/iron/vitamin</i> .....	168
TANNIC ACID POW.....	219	<i>th cold &amp; allergy</i> .....	193
<i>tannic acid powder</i> .....	219	THALOMID.....	38
TASIGNA.....	47	<i>theophylline</i> .....	197
<i>tasimelteon</i> .....	78	THER B COMPL TAB W/C.....	168
TAVIST ALLERGY.....	180	THERA MULTI LIQ.....	168
<i>tazarotene</i> .....	204	THERA-D 4000.....	168
<i>tazicef</i> .....	31	THERAFLU PAK SEV COLD .....	193
TAZORAC.....	204	THERAFLU SEV POW COLD/CGH .....	193
<i>taztia xt</i> .....	59	THERANATAL CAP ONE.....	168
TAZVERIK.....	47	THERANATAL MIS COMPLETE .....	168
TDVAX INJ 2-2 LF .....	129	THERANATAL PAK OVAVITE .....	168
TEARS NATURA OIN PM.....	176	THERAPLEX T .....	219
TECENTRIQ.....	47	THERASEAL.....	219
TEFLARO.....	31	THERATEARS.....	176
<i>telmisartan</i> .....	55	<i>thiamine hcl</i> .....	168
<i>telmisartan-amlodipine tab 40-10 mg</i> .....	54	<i>thioridazine hcl</i> .....	70
<i>telmisartan-amlodipine tab 40-5 mg</i> .....	54	<i>thiothixene</i> .....	70
<i>telmisartan-amlodipine tab 80-10 mg</i> .....	54	<i>throat discs</i> .....	228
<i>telmisartan-amlodipine tab 80-5 mg</i> .....	54	THYMOL CRY .....	135
<i>telmisartan-hydrochlorothiazide tab 40-</i>		THYROSAFE .....	97
<i>12.5 mg</i> .....	54	<i>tiadylt er</i> .....	59
<i>telmisartan-hydrochlorothiazide tab 80-</i>		<i>tiagabine hcl</i> .....	75
<i>12.5 mg</i> .....	54	TIBSOVO.....	47
<i>telmisartan-hydrochlorothiazide tab 80-25</i>		TICOVAC.....	129
<i>mg</i> .....	54	<i>tigecycline</i> .....	34
<i>temazepam</i> .....	78	<i>timolol maleate</i> .....	58
TEMPRA 3 CHW 160MG .....	15	<i>timolol maleate (ophth)</i> .....	174
TENIVAC INJ 5-2LF.....	129	TINACTIN.....	203
<i>tenofovir disoproxil fumarate</i> .....	25	<i>tinidazole</i> .....	22
TEPMETKO .....	47	TIOCONAZOLE OIN -1 .....	117
<i>terazosin hcl</i> .....	52	TIVICAY.....	26
<i>terbinafine hcl</i> .....	23	TIVICAY PD.....	26
<i>terbutaline sulfate</i> .....	181	<i>tizanidine hcl</i> .....	82
<i>terconazole vaginal</i> .....	117	TOBRADEX OIN 0.3-0.1%.....	170
TERIPARATIDE .....	91	TOBRADEX ST SUS 0.3-0.05 .....	170
TESSALON PERLES .....	193	<i>tobramycin</i> .....	22
<i>testosterone</i> .....	84	<i>tobramycin (ophth)</i> .....	171
<i>testosterone cypionate</i> .....	84	<i>tobramycin sulfate</i> .....	22
<i>testosterone enanthate</i> .....	84	<i>tobramycin-dexamethasone ophth susp</i>	
<i>tetrabenazine</i> .....	80	<i>0.3-0.1%</i> .....	170
<i>tetracycline hcl</i> .....	34	<i>tolnaftate</i> .....	203

This document includes a list of drugs covered on our formulary as of July 1, 2024. You can find information on what the symbols and abbreviations on this table mean by going to page 7.

<i>tolterodine tartrate</i> .....	116	TRIJARDY XR TAB ER 24HR 25-5-1000MG	87
TOOTHACHE GEL 20-0.26% .....	228	.....	87
<i>topiramate</i> .....	75	TRIJARDY XR TAB ER 24HR 5-2.5-1000MG	87
<i>toremifene citrate</i> .....	37	.....	87
<i>torseamide</i> .....	60	TRIKAFTA PAK 59.5MG.....	197
TOUJEO MAX SOLOSTAR.....	90	TRIKAFTA PAK 75MG .....	197
TOUJEO SOLOSTAR.....	90	TRIKAFTA TAB 100-50-75MG & 150MG...	198
TPN ELECTROL INJ .....	139	TRIKAFTA TAB 50-25-37.5MG & 75MG...	198
TR MAG COMPL CAP 400MG .....	149	<i>trimethoprim</i> .....	22
TRADJENTA.....	87	<i>trimipramine maleate</i> .....	65
<i>tramadol hcl</i> .....	19	TRINTELLIX.....	65
<i>tramadol-acetaminophen tab 37.5-325 mg</i>	19	TRIPLE PASTE .....	219
.....	19	<i>triprolidine &amp; pseudoephedrine tab 2.5-60</i>	194
<i>trandolapril</i> .....	52	<i>mg</i> .....	194
<i>tranexamic acid</i> .....	122	TRIPROLIDINE HYDROCHLORID .....	180
<i>tranylcypromine sulfate</i> .....	65	TRIUMEQ PD TAB.....	27
TRAVASOL INJ 10% .....	140	TRIUMEQ TAB .....	27
TRAZIMERA .....	47	TRI-VI-SOL SOL A/C/D .....	169
<i>trazodone hcl</i> .....	65	TRIZIVIR TAB.....	27
TRECTOR .....	28	TROCHIBASE S MIS.....	135
TRELEGY AER ELLIPTA 100-62.5-25 MCG	177	TROGARZO.....	26
.....	177	TROPHAMINE INJ 10% .....	140
TRELEGY AER ELLIPTA 200-62.5-25 MCG	177	<i>tropium chloride</i> .....	116
.....	177	TRUEPLUS GEL GLUCOSE.....	156
TREMFYA .....	125	TRUEPLUS GLUCOSE.....	156
<i>treprostinil</i> .....	62	TRULICITY .....	87
TRESIBA .....	90	TRUMENBA INJ .....	130
TRESIBA FLEXTOUCH .....	90	TRUQAP .....	48
<i>tretinoin</i> .....	200	TRUXIMA.....	48
<i>tretinoin (chemotherapy)</i> .....	38	<i>trymine cg</i> .....	194
<i>triamcinolone acetonide (mouth)</i> .....	228	<i>tryptophan</i> .....	156
<i>triamcinolone acetonide (topical)</i> .....	206	TUKYSA .....	48
TRIAMINIC NT LIQ COLD/CGH.....	194	TUMS .....	102
TRIAMINIC SOL COLD/CGH .....	194	TUMS CALCIUM FOR LIFE BON .....	102
TRIAMINIC SYP CLD/ALRG .....	194	<i>tums gas relief chewy bit</i> .....	102
TRIAMINIC SYP COLD/CGH.....	194	TURALIO.....	48
<i>triamterene &amp; hydrochlorothiazide cap</i>	60	<i>turpentine liq</i> .....	135
<i>37.5-25 mg</i> .....	60	TUSNEL C SYP.....	194
<i>triamterene &amp; hydrochlorothiazide tab</i>	60	TUSNEL PED DRO 7.5-50 .....	194
<i>37.5-25 mg</i> .....	60	TUSNEL TAB .....	194
<i>triamterene &amp; hydrochlorothiazide tab 75-</i>	60	TUSNEL-DM DRO PEDIATRC .....	194
<i>50 mg</i> .....	60	<i>tussin dm</i> .....	194
<i>trientine hcl</i> .....	91	TWINRIX INJ .....	130
<i>trifluoperazine hcl</i> .....	70	TYBOST .....	26
<i>trifluridine</i> .....	171	TYL ALLERGY TAB SINUS .....	194
<i>trihexyphenidyl hcl</i> .....	67	TYLENOL ALLE TAB MULTI-SY .....	194
TRIJARDY XR TAB ER 24HR 10-5-1000MG	87	TYLENOL CAP 500MG.....	15
.....	87	TYLENOL CAPLETS .....	15
TRIJARDY XR TAB ER 24HR 12.5-2.5-	87	TYLENOL CHILDRENS .....	15
1000MG.....	87	TYLENOL CHLD SUS COLD FLU .....	194

This document includes a list of drugs covered on our formulary as of July 1, 2024. You can find information on what the symbols and abbreviations on this table mean by going to page 7.

TYLENOL COLD LIQ MAX.....	194
TYLENOL COLD LIQ MULTI-S.....	194
TYLENOL COLD LIQ MULTI-SY.....	194
TYLENOL COLD TAB HEAD CON.....	194
TYLENOL COLD TAB RELIEF.....	194
TYLENOL ER TAB 650MG.....	15
TYLENOL EXTRA STRENGTH.....	15
TYLENOL SINU PAK CNG/PAIN.....	194
TYLENOL TAB CLD/HD.....	194
TYPHIM VI.....	130
TYRVAYA.....	176

**U**

UBRELVY.....	79
ULTRA COQ10.....	156
<i>ultra throat lozenges</i> .....	228
UNIBASE CRE.....	135
UNISOM.....	84
UNISOM SLEEPGELS.....	84
<i>unithroid</i> .....	99
UPCAL D POW.....	149
UPSPRING BABY VITAMIN D.....	169
UREA BEA.....	136
URO MAG.....	102
URO-TRIN TAB 95MG.....	116
<i>ursodiol</i> .....	114

**V**

<i>vacuant mini-enema</i> .....	112
<i>vacuant plus mini-enema</i> .....	112
<i>valacyclovir hcl</i> .....	29
VALCHLOR.....	219
<i>valganciclovir hcl</i> .....	29
<i>valine powder</i> .....	156
<i>valproate sodium</i> .....	75
<i>valproic acid</i> .....	75
<i>valsartan</i> .....	55
<i>valsartan-hydrochlorothiazide tab 160-12.5 mg</i> .....	54
<i>valsartan-hydrochlorothiazide tab 160-25 mg</i> .....	54
<i>valsartan-hydrochlorothiazide tab 320-12.5 mg</i> .....	54
<i>valsartan-hydrochlorothiazide tab 320-25 mg</i> .....	54
<i>valsartan-hydrochlorothiazide tab 80-12.5 mg</i> .....	54
VALTOCO 10 MG DOSE.....	75
VALTOCO 15 MG DOSE.....	75
VALTOCO 20 MG DOSE.....	75

VALTOCO 5 MG DOSE.....	75
VANACLEAR PD.....	180
VANACOF AC LIQ 12.5-25.....	194
VANACOF DM LIQ.....	194
VANACOF LIQ.....	195
VANACOF-8 LIQ 25-50/15.....	195
VANAHIST PD.....	180
VANAMINE PD.....	180
VANATAB AC TAB 12.5-25.....	195
VANATAB DM TAB 5-9-198.....	195
<i>vancomycin hcl</i> .....	22
VANCOMYCIN HYDROCHLORIDE.....	22
VANCOMYCIN INJ 1 GM.....	22
VANCOMYCIN INJ 500MG.....	22
VANCOMYCIN INJ 750MG.....	22
VANFLYTA.....	48
VAQTA.....	130
<i>varenicline tartrate</i> .....	84
<i>varenicline tartrate tab 11 x 0.5 mg &amp; 42 x 1 mg start pack</i> .....	84
VARIVAX.....	130
VASCEPA.....	57
<i>vazotab</i> .....	195
VEEGUM MIS LUMP.....	136
VELPHORO.....	98
VELTASSA.....	91
VEMLIDY.....	29
VENCLEXTA.....	48
VENCLEXTA TAB START PK.....	48
<i>venlafaxine hcl</i> .....	65
VENTAVIS.....	62
VENTOLIN HFA.....	181
VENTOLIN HFA (INSTITUTIONAL PACK).....	181
<i>verapamil hcl</i> .....	59
VERQUVO.....	61
VERSACLOZ.....	70
VERZENIO.....	48
V-GO 20 KIT.....	90
V-GO 30 KIT.....	90
V-GO 40 KIT.....	90
VIActiv CHW CARAMEL.....	149
<i>vicks dayquil severe cold</i> .....	195
VICKS NYQUIL LIQ COLD/FLU.....	195
VICKS OIN VAPORUB.....	195
VICKS VAPODROPS.....	228
VICKS VITAMIN C DROPS.....	169
<i>vigabatrin</i> .....	75
<i>vigadrone</i> .....	76
<i>vigpoder</i> .....	76
<i>vilazodone hcl</i> .....	65

This document includes a list of drugs covered on our formulary as of July 1, 2024. You can find information on what the symbols and abbreviations on this table mean by going to page 7.

<i>vincristine sulfate</i> .....	39
<i>vinorelbine tartrate</i> .....	39
VIRACEPT .....	26
VIREAD.....	26
VISINE.....	173
VISINE PURE DRO TEARS.....	176
VISINE TIRED EYE RELIEF.....	176
VIT C+ZINC TAB 15-60MG.....	169
VITA-C CRY .....	169
VITACRAVES CHW +OMEGA-3 .....	169
VITALINE COQ10.....	156
VITAMAX CHW.....	169
<i>vitamin a</i> .....	169
VITAMIN A CAP 8000UNIT.....	169
VITAMIN A&D OIN .....	219
VITAMIN B 12.....	169
VITAMIN B12 .....	169
VITAMIN B-12 .....	169
VITAMIN B-12 SUB 1000MCG .....	169
VITAMIN C .....	169
VITAMIN C SOL.....	169
VITAMIN D .....	169
VITAMIN D2 .....	169
VITAMIN D3 .....	169
VITAMIN D3 IMMUNE HEALTH .....	169
<i>vitamin d3 ultra potency</i> .....	169
<i>vitamin e</i> .....	170
VITAMIN E.....	170
<i>vitamin e-100</i> .....	170
VITAMIN K .....	170
VITAMIN K2.....	170
VITRAKVI.....	48
VITRON-C TAB 65-125MG .....	121
VIVITROL.....	84
VIZIMPRO.....	48
VOLTAREN ARTHRITIS PAIN.....	15
VONJO .....	48
<i>voriconazole</i> .....	23, 24
VOSEVI TAB .....	29
VRAYLAR.....	70
VYZULTA.....	174

**W**

WAL-FLU COLD POW SORE THR .....	195
WALGREENS GLUCOSE.....	94
<i>wal-tussin cough &amp; chest</i> .....	195
<i>warfarin sodium</i> .....	118
WART OFF SOL 17%.....	219
<i>water for injection</i> .....	130

<i>water for irrigation, sterile irrigation soln</i> .....	221
<i>water for iv injection</i> .....	130
<i>wee care</i> .....	121
WELIREG.....	39
<i>white petrolatum gel</i> .....	136
<i>white petrolatum ointment</i> .....	136
<i>white petrolatum topical gel</i> .....	220
WITEPSOL MIS .....	136
<i>wixela inhub</i> .....	199
WOUN'DRES GEL .....	220

**X**

XALKORI .....	48, 49
XARELTO .....	118
XARELTO STAR TAB 15/20MG.....	118
XATMEP .....	126
XCOPRI.....	76
XCOPRI PAK 100-150 .....	76
XCOPRI PAK 12.5-25 .....	76
XCOPRI PAK 150-200MG (MAINTENANCE) .....	76
XCOPRI PAK 150-200MG (TITRATION).....	76
XCOPRI PAK 50-100MG .....	76
XELJANZ.....	125
XELJANZ XR.....	125
XERMELO .....	114
XGEVA.....	91
XHANCE.....	198
XIFAXAN.....	114
XIGDUO XR TAB 10-1000 .....	87
XIGDUO XR TAB 10-500MG .....	87
XIGDUO XR TAB 2.5-1000.....	87
XIGDUO XR TAB 5-1000MG .....	87
XIGDUO XR TAB 5-500MG .....	87
XIIDRA.....	177
XOFLUZA.....	29
XOLAIR .....	198
XOSPATA.....	49
XPOVIO 100 MG ONCE WEEKLY .....	49
XPOVIO 40 MG ONCE WEEKLY.....	49
XPOVIO 40 MG TWICE WEEKLY.....	49
XPOVIO 60 MG ONCE WEEKLY.....	49
XPOVIO 60 MG TWICE WEEKLY.....	49
XPOVIO 80 MG ONCE WEEKLY.....	49
XPOVIO 80 MG TWICE WEEKLY.....	49
XTANDI.....	37
XULTOPHY INJ 100/3.6 .....	90

This document includes a list of drugs covered on our formulary as of July 1, 2024. You can find information on what the symbols and abbreviations on this table mean by going to page 7.

<b>Y</b>	
<i>yargesa</i> .....	97
YF-VAX INJ .....	130
<i>yuvafem</i> .....	92
<b>Z</b>	
<i>zafirlukast</i> .....	195
<i>zaleplon</i> .....	78
ZANTAC TAB 75MG .....	106
ZARXIO .....	118
Z-BUM .....	220
ZEJULA .....	49
ZELBORAF .....	49
ZEMAIRA .....	198
<i>zenatane</i> .....	200
ZENPEP CAP 10000UNT .....	114
ZENPEP CAP 15000UNT .....	114
ZENPEP CAP 20000UNT .....	114
ZENPEP CAP 25000UNT .....	114
ZENPEP CAP 3000UNIT .....	114
ZENPEP CAP 40000UNT .....	114
ZENPEP CAP 5000UNIT .....	114
ZENPEP CAP 60000UNT .....	114
ZERVIATE .....	173
<i>zidovudine</i> .....	26
ZIEXTENZO .....	118
ZIKS ARTHRIT CRE RELIEF .....	220
ZILACTIN BABY .....	228
<i>zilactin-b</i> .....	228
<i>zinc</i> .....	149
ZINC .....	149
ZINC & C LOZ 20-120MG .....	170
ZINC 15 .....	149
ZINC CHLORID GRA .....	136
<i>zinc gluconate</i> .....	149
ZINC OXIDE .....	220
<i>zinc oxide (topical)</i> .....	220
ZINC OXIDE POW .....	136
<i>zinc sulfate</i> .....	150
ZINC SULFATE .....	150
ZINC SULFATE POW .....	150
<i>zinc sulfate powder</i> .....	150
ZINC W/A&C LOZ .....	228
<i>ziprasidone hcl</i> .....	70
<i>ziprasidone mesylate</i> .....	70
ZIRABEV .....	49
ZIRGAN .....	171
<i>zoledronic acid</i> .....	91
ZOLINZA .....	49
<i>zolpidem tartrate</i> .....	79
ZONISADE .....	76
<i>zonisamide</i> .....	76
ZOSTRIX NATURAL PAIN RELI .....	220
ZTALMY .....	76
ZURZUVAE .....	65
ZUTRIPRO LIQ 60-4-5MG .....	195
ZYDELIG .....	49
ZYKADIA .....	49
ZYLET SUS 0.5-0.3% .....	170
ZYPREXA RELPREVV .....	70, 71
ZYRTEC CHILDRENS ALLERGY .....	180
ZZZQUIL .....	84