



Preferred Drug List (PDL)

New Jersey – MLTSS

Effective Date: 1/1/2024



United
Healthcare
Community Plan



UnitedHealthcare Community Plan does not treat members differently because of sex, age, race, color, disability or national origin.

If you think you were treated unfairly because of your sex, age, race, color, disability or national origin, you can send a complaint to:

Civil Rights Coordinator
UnitedHealthcare Civil Rights Grievance
P.O. Box 30608
Salt Lake City, UTAH 84130
UHC_Civil_Rights@uhc.com

You must send the complaint within 60 days of when you found out about it. A decision will be sent to you within 30 days. If you disagree with the decision, you have 15 days to ask us to look at it again.

If you need help with your complaint, please call the toll-free member phone number listed on your health plan member ID card, TTY 711, 24 hours a day, 7 days a week.

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

Online:

<https://ocrportal.hhs.gov/ocr/portal/lobby.jsf>

Complaint forms are available at

<http://www.hhs.gov/ocr/office/file/index.html>

Phone:

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

Mail:

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

If you need help with your complaint, please call the toll-free member phone number listed on your member ID card.

We provide free services to help you communicate with us, such as letters in other languages or large print. You can also ask for an interpreter. To ask for help, please call the toll-free member phone number listed on your health plan member ID card, TTY 711, 24 hours a day, 7 days a week.



UnitedHealthcare Community Plan no da un tratamiento diferente a sus miembros en base a su sexo, edad, raza, color, discapacidad u origen nacional.

Si usted piensa que ha sido tratado injustamente por razones como su sexo, edad, raza, color, discapacidad o origen nacional, puede enviar una queja a:

Civil Rights Coordinator
UnitedHealthcare Civil Rights Grievance
P.O. Box 30608
Salt Lake City, UTAH 84130
UHC_Civil_Rights@uhc.com

Usted tiene que enviar la queja dentro de los 60 días de la fecha cuando se enteró de ella. Se le enviará la decisión en un plazo de 30 días. Si no está de acuerdo con la decisión, tiene 15 días para solicitar que la consideremos de nuevo.

Si usted necesita ayuda con su queja, por favor llame al número de teléfono gratuito para miembros que aparece en su tarjeta de identificación del plan de salud, TTY 711, 24 horas al día, 7 días a la semana.

Usted también puede presentar una queja con el Departamento de Salud y Servicios Humanos de los Estados Unidos.

Internet:

<https://ocrportal.hhs.gov/ocr/portal/lobby.jsf>

Formas para las quejas se encuentran disponibles en:

<http://www.hhs.gov/ocr/office/file/index.html>

Teléfono:

Llamada gratuita, **1-800-368-1019, 1-800-537-7697** (TDD)

Correo:

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

Si necesita ayuda para presentar su queja, por favor llame al número gratuito para miembros anotado en su tarjeta de identificación como miembro.

Ofrecemos servicios gratuitos para ayudarle a comunicarse con nosotros, tales como, cartas en otros idiomas o en letra grande. O bien, puede solicitar un intérprete. Para pedir ayuda, por favor llame al número de teléfono gratuito para miembros que aparece en su tarjeta de identificación del plan de salud, TTY 711, 24 horas al día, 7 días a la semana.

If the enclosed information is not in your primary language, please call UnitedHealthcare Community Plan at 1-800-941-4647, TTY 711

Yog cov ntaub ntawv muab tuaj hauv no tsis yog sau ua koj hom lus, thov hu rau UnitedHealthcare Community Plan ntawm 1-800-941-4647, TTY 711.

Afai o fa'amatalaga ua tuuina atu e le'o tusia i lau gagana masani, faamolemole fa'afesoota'i mai le vaega a le UnitedHealthcare Community Plan ile telefoni 1-800-941-4647, TTY 711.

Если прилагаемая информация представлена не на Вашем родном языке, позвоните представителю UnitedHealthcare Community Plan по тел. 1-800-941-4647, телетайп 711.

Якщо інформація, що додається, подана не на Вашій рідній мові, зателефонуйте до UnitedHealthcare Community Plan 1-800-941-4647 для осіб з порушеннями слуху 711.

동봉한 안내 자료가 귀하의 모국어로 준비되어 있지 않으면 1-800-941-4647, TTY 711로 UnitedHealthcare Community Plan에 전화하십시오.

Dacă informațiile alăturate nu sunt în limba dumneavoastră principală, vă rugăm să sunați la UnitedHealthcare Community Plan, la numărul 1-800-941-4647 TTY 711.

ተያይዞ ያለው መረጃ በቋንቋዎ ካልሆነ፤ እባክዎን በሚከተለው ስልክ ቁጥር ወደ UnitedHealthcare Community Plan ይደውሉ፡- 1-800-941-4647 መስማት ለተሳናቸው/TTY 711።

ተተላላዙ ዘሎ ሓበሬታ ብቋንቋዎ ተዘይኮይኑ፤ ብኽብረትኩም በዚ ዝሰጠኩ ቁጥር ስልክ ናብ UnitedHealthcare Community Plan ደውሉ፡- 1-800-941-4647 ምስማዕ ንተጻግሙ/TTY 711።

Si la información adjunta no está en su lengua materna, llame a Unitedhealthcare Community Plan al 1-800-941-4647, TTY 711.

ຖ້າຂໍ້ມູນທີ່ຕິດຄັດມານີ້ບໍ່ແມ່ນພາສາຕົ້ນຕໍຂອງທ່ານ, ກະລຸນາໂທຫາ UnitedHealthcare Community Plan ທີ່ເບີ 1-800-941-4647 TTY 711.

Nếu ngôn ngữ trong thông tin đính kèm này không phải là ngôn ngữ chánh của quý vị, xin gọi cho UnitedHealthcare Community Plan theo số 1-800-941-4647, TTY 711.

若隨附資訊的語言不屬於您主要使用語言，請致電 UnitedHealthcare Community Plan，電話號碼為 1-800-941-4647 聽障專線 TTY 711。

ប្រើសិនបើព័ត៌មានដែលភ្ជាប់មកនេះមិនមែនជាភាសារដើមរបស់អ្នកទេ សូមទូរស័ព្ទមកកាន់ UnitedHealthcare Community Plan លេខ 1-800-941-4647, សម្រាប់អ្នកថ្លង់ TTY 711។

Kung ang nakalakip na impormasyon ay wala sa iyong pangunahing wika, mangyaring tumawag sa UnitedHealthcare Community Plan sa 1-800-941-4647 (TTY: 711).

در صورت اینکه اطلاعات پیوست به زبان اولیه شما نمیباشد . لطفا با United Healthcare Community Plan با شماره 1-800-941-4647 تماس حاصل نمایید . وسیله ارتباطی برای نا شنوایان- TTY 711.



Preferred Drug List

INTRODUCTION

UnitedHealthcare Community Plan is pleased to provide this Preferred Drug List (**PDL**) to be used when prescribing for patients covered by the pharmacy benefit plan offered by UnitedHealthcare Community Plan. The drugs listed in this **PDL** are intended to provide sufficient options to treat patients who require treatment with a drug from that pharmacologic or therapeutic class. The drugs listed in the UnitedHealthcare Community Plan **PDL** have been reviewed and approved by the Pharmacy and Therapeutics Committee. The drugs have been selected to provide the most clinically appropriate and cost-effective medications for patients who have their drug benefit administered through UnitedHealthcare Community Plan. It is also recognized there may be occasions where an unlisted drug is desired for proper medical management of a specific patient. In those infrequent instances, the unlisted medication may be requested through the prior authorization process.

The drugs represented have been reviewed by the Pharmacy and Therapeutics (P&T) Committee and are approved for inclusion. The **PDL** is reflective of current medical practice as of the date of review.

This edition incorporates drugs added to the PDL since the last edition as well as numerous revisions to the prescribing information based on changes in pharmacotherapy. Comments and suggestions from practicing physicians have also been incorporated to ensure that the UnitedHealthcare Community Plan PDL is reflective of current medical practice.

NOTICE

The information contained in this PDL and its appendices is provided by UnitedHealthcare Community Plan, solely for the convenience of medical providers. UnitedHealthcare Community Plan does not warrant or assure accuracy of such information nor is it intended to be comprehensive in nature.

This PDL is not intended to be a substitute for the knowledge, expertise, skill and judgment of the medical provider in their choice of prescription drugs.

UnitedHealthcare Community Plan assumes no responsibility for the actions or omissions of any medical provider based upon reliance, in whole or in part, on the information contained herein. The medical provider should consult the drug manufacturer's product literature or standard references for more detailed information.

National guidelines can be found on the Web sites listed in the Web site section or go to the National Guideline Clearinghouse site at <http://www.guideline.gov>.

PREFACE

The UnitedHealthcare Community Plan PDL is organized by sections. Each section includes therapeutic groups identified by either a drug class or disease state.

Products are listed by generic name. Brand names are included as a reference to assist in product recognition. Unless exceptions are noted, generally all applicable dosage forms and strengths of the drug cited are included in the PDL. Generics should be considered the first line of prescribing.

PHARMACY AND THERAPEUTICS (P&T) COMMITTEE

The P&T Committee includes physicians and pharmacists who are not employees or agents of UnitedHealthcare Community Plan or its affiliates. They must adhere to the Ethics Policy standards of the P&T Committee. UnitedHealthcare Community Plan medical directors and pharmacists also participate in the P&T Committee. The P&T Committee meets quarterly to discuss a variety of issues. Those issues pertaining to pharmaceutical selection and pharmacy program management are communicated quarterly. This newsletter is distributed to all participating physicians who have received the PDL. PDL decisions are also communicated quarterly on the UnitedHealthcare Community Plan internet site.

OUTPATIENT PRESCRIPTION DRUG BENEFIT-COVERED MEDICATIONS

Medically necessary outpatient prescription drugs are covered when prescribed by a provider licensed to prescribe federal legend drugs or medicines. Some items are covered only with prior authorization. Eligibility for Outpatient Prescription Drug Benefits is based on the individual member's benefit plan.

PRODUCT SELECTION CRITERIA

The P&T Committee considers clinical information on new-to-market drugs that are typically included in an outpatient pharmacy benefit. The evaluation includes all or part of the following:

- Safety
- Efficacy
- Comparison studies
- Approved indications
- Adverse effects
- Contraindications/Warnings/Precautions
- Pharmacokinetics
- Patient administration/compliance considerations
- Medical outcome and pharmaco-economic studies

When a new drug is considered for PDL inclusion, it will be reviewed relative to similar drugs currently included in the UnitedHealthcare Community Plan PDL. This review process may result in deletion of drug(s) in a particular therapeutic class in an effort to continually promote the most clinically useful and cost-effective agents.

All the information in the PDL is provided as a reference for drug therapy selection. Specific drug selection for an individual patient rests solely with the prescriber.

PDL PRODUCT DESCRIPTIONS

To assist in understanding which specific strengths and dosage forms are covered on the PDL, examples are noted below. The general principles shown in the examples can then usually be extended to other entries in the book. Any exceptions are noted in the drug list. There may also be a statement associated with a drug list that gives additional information about which specific products or dosage forms are covered.

Products covered include all strengths associated with the dosage form of the cited brand name product.

carvedilol Coreg

All strengths of Coreg would be covered by this listing.

Extended-release and delayed-release products require their own entry.

diltiazem sustained release CARDIZEM SR

Dosage forms covered will be consistent with the category and use where listed.

Neomycin/polymyxin B/ Cortisporin Hydrocortisone

As listed in the OTIC section, this is limited to the otic solution and suspension. From this entry the ophthalmic solution and ointment, and the topical cream cannot be assumed to be on the list unless there are entries for these products in the OPTHALMIC and DERMATOLOGY sections of the PDL.

When a strength or dosage form is specified, only the specified strength and dosage form is on the PDL. Other strengths/dosage forms of the reference product are not

citalopram 40 mg tabs Celexa tabs

DRUG TIERS

The drugs listed in the PDL have different tiers. The tiers are listed in the grid below.

Tier Name	Drug Tier
Tier 1	Generic
Tier 2	Brand

GENERIC SUBSTITUTION

The UnitedHealthcare Community Plan PDL **requires** generic substitution on the majority of products when a generic equivalent is available.

Generic substitution is a pharmacy action whereby a generic equivalent is dispensed rather than the brand name product. The PDL indicates generic availability in the "Covered Drug" column.

If a brand name drug is medically necessary, please submit a prior authorization request.

The UnitedHealthcare Community Plan MAC list sets a ceiling price for the reimbursement of certain multisource prescription drugs. This price will typically cover the acquisition of most generics but not branded versions of the same drug. The products selected for inclusion on the MAC list are commonly prescribed and dispensed and have usually gone through the FDA's review and approval process. An important consideration for generic substitution is the knowledge that all approvals of generic drugs by the FDA since 1984, and many generic approvals prior to 1984, have a showing of bioequivalence between the generic versions and the reference brand product. To gain FDA approval:

1. The generic drug must contain the same active ingredient(s), be the same strength and the same dosage form as the brand name product.
2. The FDA has given the generic an “A” rating compared to the branded product indicating bioequivalence, and has determined the generic is therapeutically equivalent to the reference brand. The ratings of generic drugs are available by referring to the FDA reference, Approved Drug Products with Therapeutic Equivalence Evaluations (Orange Book).

When the above two criteria are met, a generic can be substituted with the full expectation that the substituted product will produce the same clinical effect and safety profile as the prescribed product. Drug products that have a narrow therapeutic index (NTI) can also be guided by these principles. It is not necessary for the health care provider to approach any one therapeutic class of drug products (e.g., NTI drugs) differently from any other class, when there has been a determination of therapeutic equivalence by the FDA for the drug products under consideration. Also, additional clinical tests or examinations by the physician are not needed when a therapeutically equivalent generic drug product is substituted for the brand name product.

There are now many brand name products that are repackaged or distributed under a generic label. The generic label version should always be considered therapeutically equivalent and substitutable for the source branded product.

DRUG EFFICACY STUDY IMPLEMENTATION (DESI) DRUGS

Drugs first marketed between 1938 and 1962 were approved as safe but required no showing of effectiveness for FDA approval. Beginning in 1962, all new drugs were required to be both safe and effective before they could be marketed. This legislation also applied retroactively to all drugs approved as safe from 1938-1962. The DESI program was established by the FDA to review the effectiveness of these pre-1962 drugs for their labeled indications, and a determination of “fully effective” was made for most of these products and they remain in the marketplace. A few DESI products remain classified as “less than fully effective” while awaiting final administrative disposition. Also, classified as DESI are many products listed as identical, similar, or related to actual DESI products. UnitedHealthcare Community Plan’s PDL does not cover DESI “less than fully effective” drug products.

PLAN EXCLUSIONS

The following drug categories are excluded from coverage under the outpatient pharmacy benefit and are not part of the UnitedHealthcare Community Plan PDL.

- DESI drugs
- Anti-obesity agents
- Experimental / research drugs

- Cosmetic drugs
- Nutritional / diet supplements
- Blood and blood plasma products
- Agents used to promote fertility
- Agents used for erectile dysfunction
- Agents used for cosmetic hair growth
- Drugs from manufacturers that do not participate in the FFS Medicaid Drug Rebate Program
- Diagnostic products
- Medical supplies and DME except as listed: insulin syringes, insulin needles, lancets, alcohol swabs, spacers, preferred diabetes test strips, peak flow meters (Astech, Assess, Peak Air brands, max two per year), vaporizer (limit of 1 per 3 years), humidifier (limit of 1 per 3 years)

DAYS SUPPLY DISPENSING LIMITATIONS

UnitedHealthcare Community Plan members may receive up to a 14-day supply of a specific medication per prescription order or prescription refill. UnitedHealthcare Community Plan members may receive up to a one-month supply of a specific medication per prescription order or prescription refill. A medication may be reordered or refilled when ninety percent (90%) of the medication has been utilized for a controlled substance and eighty-five percent (85%) of the medication has been utilized for a non-controlled substance. If a claim is submitted before 90% of the medication has been used for a controlled substance or submitted before 85% of the medication has been used for a non-controlled substance, based on the original day supply submitted on the claim, the claim will reject with a “refill too soon” message.

MANDATORY GENERIC SUBSTITUTION

The UnitedHealthcare Community Plan *PDL* requires mandatory generic substitution on the vast majority of products when a generic equivalent is available; however, brand name drugs may be covered in certain situations by requesting a prior authorization. The UnitedHealthcare Community Plan *PDL* prior authorization (PA) list does not include branded items where a generic equivalent is covered.

PRIOR AUTHORIZATION OF NON-PDL MEDICATIONS

The drugs in the UnitedHealthcare Community Plan PDL have been selected to provide the most clinically appropriate and cost-effective medications for patients who have their drug benefit administered through UnitedHealthcare Community Plan. It is also recognized that there may be occasions where an unlisted drug is desired for the proper medical management of a specific patient. In those infrequent instances, the prior authorization process reviews requests for unlisted medications the physician may consider medically necessary for patient management.

Requests for these exceptions should be either made in writing by the physician and faxed or called into:

**UnitedHealthcare Community Plan
Pharmacy Services Department
Fax 866-940-7328
Phone 800-310-6826**

A prior authorization request form is available in the UnitedHealthcare Community Plan provider manual and should be used for all prior authorization requests if possible. Appropriate documentation must be provided to support the medical necessity of the non-PDL request. The UnitedHealthcare Community Plan Pharmacy Department will respond to all requests in accordance with state requirements.

Physicians are requested to adhere to this PDL when prescribing for patients covered by their pharmacy benefit plan offered by UnitedHealthcare Community Plan. If a pharmacist receives a prescription for a non-PDL drug, the pharmacist should contact the prescribing physician and request that the prescription be changed to a medication included in this PDL. If a PDL alternative is not appropriate the physician should then be instructed to contact the Plan for a prior authorization.

Please contact the UnitedHealthcare Community Plan Pharmacy Prior Notification Service at 800-310-6826 with questions concerning the prior authorization process.

NON-PDL DRUGS 3-DAY TEMPORARY SUPPLY OVERRIDES

To ensure the use of PDL drugs, all non-PDL drugs should be discussed with the prescribing physician. **If you cannot speak to the physician immediately, and there is an immediate need for the medication, the claim processing system will accept an override to permit a one-time dispensing of a 3-day supply of the newly prescribed non-PDL drug.** The pharmacy should submit a claim for a 3 day supply, with a PA Type of 8 and Prior Authorization number of "00000000120". Please note that non-preferred drugs are available for a 3-day supply, however availability is subject to the benefit design. For assistance, pharmacies may call 800-310-6826.

The pharmacy should contact the physician to discuss a PDL drug or if a prior authorization request is warranted. If the prescribing physician feels a drug is medically necessary, the physician may fax a request for prior authorization to UnitedHealthcare Community Plan at 800-310-6826.

QUANTITY LIMITATIONS (QL)

Prescriptions for monthly quantities greater than the indicated limit require a prior authorization request.

Quantity limits based on Efficient Medication Dosing

The Efficient Medication Dosing Program is designed to consolidate medication dosage to the most efficient daily

quantity to increase adherence to therapy and also promote the efficient use of health care dollars.

The limits for the program are established based on FDA approval for dosing and the availability of the total daily dose in the least amount of tablets or capsules daily. Quantity Limits in the prescription claims processing system will limit the dispensing to consolidate dosing. The pharmacy claims processing system will prompt the pharmacist to request a new prescription order from the physician.

Specialty Pharmaceutical Management Program

UnitedHealthcare Community Plan is continuously looking for ways to provide high quality cost effective care for Plan members. The Specialty Pharmaceutical Management Program helps UnitedHealthcare Community Plan to achieve these goals. Injectable medications that are part of this program require plan authorization and are not available through the retail pharmacy network.

To obtain authorization, the provider must submit the appropriate Prior Authorization form to the UnitedHealthcare Community Plan Pharmacy Department via fax at 866-940-7328.

The UnitedHealthcare Community Plan Pharmacy Department will review and respond to all requests in accordance with state requirements, and if authorized for payment, UnitedHealthcare Community Plan will coordinate the delivery of the product to the member or provider.

Drugs that are part of this program and are on the PDL are identified in this booklet by the designation "SP".

Prior Authorization request forms can be requested by calling the UnitedHealthcare Community Plan Pharmacy Department at 800-310-6826.

MEDICATIONS REQUIRING DIAGNOSIS

UnitedHealthcare Community Plan requires that the diagnosis for prescriptions in certain classes match the FDA-approved use or a use supported by current published evidence. Drugs in scope will list "Diagnosis required" in the Requirements and Limits or with the drug class name on the PDL.

The diagnosis will be verified at the point-of-sale by the pharmacy claims processing system. If a matching diagnosis is not found in the medical claim file or on the pharmacy drug claim, the prescription will be rejected at the pharmacy. The pharmacist may then contact the prescriber to verify the diagnosis and submit it on the claim.

If the diagnosis provided still does not match the approved use, prior authorization may be requested through the standard process by faxing a request to 866-940-7328.

STEP THERAPY (ST)

The following PDL drugs are routinely covered only after a sufficient trial of an indicated first-line agent has been adequately tried and failed. These medications may also be requested through the Prior authorization process.

While lower cost PDL alternatives may be appropriate in many instances, other non- PDL alternatives are available with prior authorization (PA).

STEP Drug	First-Line Agent(s)
.Amerge	Trial at a minimum dose of 50mg of sumatriptan tablets.
Aricept 23mg	90 day trial of Aricept 10mg daily.
calcipotriene cream & oint 0.005%	trial of two medium to high potency corticosteroids
calcitriol 3mcg/gm	trial of two medium to high potency corticosteroids
DPP4 Inhibitors (Nesina, Kazano, Oseni)	At least a 90 day trial of 1500mg/day of metformin.
Elidel	Minimum age of 2. Trial of one topical corticosteroid.
Eucria	Trial of a topical steroid AND one of the following: Elidel cream or tacrolimus ointment
GLP-1 Agonists (Adlyxin, Victoza 2 pen pack)	At least a 90 day trial of 1500mg/day of metformin
GLP-1/Insulin Combinations (Soliqua)	Trial of one drug from the following classes: GLP-1 or Basal Insulin
lubiprostone	For opioid-induced constipation or chronic idiopathic constipation, trial of lactulose or polyethylene glycol
Motegrity	For chronic idiopathic constipation, trial of lactulose or polyethylene glycol and trial of lubiprostone (authorized generic of Amitiza)
Movantik	For opioid-induced constipation, trial of lactulose or polyethylene glycol and trial of lubiprostone (authorized generic of Amitiza)
Optivar	14 day trial of ketotifen within previous 90 days required first.
Renvela	8 week trial of calcium acetate
SGLT-2 Inhibitors (Steglatro, Segluromet)	At least a 90 day trial of 1500mg/day of metformin

tacrolimus 0.03% Minimum age of 2. Trial of one topical corticosteroid

tacrolimus 0.1% Minimum age of 16. Trial of one topical corticosteroid.

tolterodine 30 day trial of oxybutynin immediate or extended release. Step Therapy only applies to members less than 65 years of age.

trospium 30 day trial of oxybutynin immediate or extended release. Step Therapy only applies to members less than 65 years of age.

Trulance For chronic idiopathic constipation or irritable bowel syndrome- constipation, trial of lactulose or polyethylene glycol and trial of lubiprostone (authorized generic of Amitiza)

Uloric 8 week trial of up to 600mg of allopurinol required first.

Xopenex Respules 30 day trial of Albuterol .083% or .5% respules.

PDL SUGGESTIONS

Providers who wish to propose PDL suggestions should forward the information to the UnitedHealthcare Community Plan Director of Pharmacy Services by either mail or fax.

Attn: Director of Pharmacy Services
 UnitedHealthcare Community Plan
 2 Allegheny Center
 Suite 600
 Pittsburgh, PA 15212
 Phone: 800-310-6826
 Email: pdl_management@uhc.com

Providers should furnish adequate documentation, such as clinical studies from the medical literature, in order for the request to be considered for PDL addition. This literature should include information documenting clinical necessity as well as therapeutic advantages over current PDL products. Suggestions received by UnitedHealthcare Community Plan will be reviewed by the Pharmacy and Therapeutics Committee at the subsequent P&T Committee meeting.

EDITOR

Your comments and suggestions regarding the UnitedHealthcare Community Plan PDL are encouraged. Your input is vital to this PDL's continued success. All responses will be reviewed and considered. Please send your comments to:

UnitedHealthcare Community Plan by
UnitedHealthcare
Director of Pharmacy Services
2 Allegheny Center
Suite 600
Pittsburgh, PA 15212
Phone: 800-310-6826

LEGEND

#	Only the dosage forms/strengths of the brand name products noted are on the PDL
OTC	over-the-counter
delayed-rel	delayed-release (also known as enteric coated)
EC	enteric-coated
ext-rel	extended-release (also known as sustained-release)
PA	Prior Authorization required
QL	Quantity Limits apply
ST	Step Therapy, see pages V-VI for details
SP	Specialty Pharmaceuticals, see pages IV-V for details

NOTICE

The information contained in this document is proprietary information. The information may not be copied in whole or in part without the written permission of UnitedHealthcare Community Plan. All rights reserved.

The drug names listed here are the registered and/or unregistered trademarks of third-party pharmaceutical companies unrelated to and unaffiliated with UnitedHealthcare Community Plan. These trademarked brand names are included here for informational purposes only and are not intended to imply or suggest any affiliation between UnitedHealthcare Community Plan and such third-party pharmaceutical companies.

If viewing this PDL via the Internet, please be advised that the PDL is updated periodically and changes may appear prior to their effective date to allow for notification.

New Jersey – MLTSS

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Preferred Agents	Non-Preferred Agents
Analgesics	
Nonsteroidal Anti-inflammatory Drugs	
<p><i>ADVIL JUNIOR STRENGTH (brand for cvs ibuprofen childrens) - Tier 2; QL</i></p> <p><i>ADVIL ORAL TABLET (brand for cvs ibuprofen) - Tier 2; QL</i></p> <p><i>ALEVE ORAL TABLET (brand for all day pain relief) - Tier 2; QL</i></p> <p><i>all day pain relief (generic for MEDIPROXEN) - Tier 1; QL</i></p> <p><i>all day relief (generic for MEDIPROXEN) - Tier 1; QL</i></p> <p><i>celecoxib oral (generic for CELEBREX) - Tier 1; QL</i></p> <p><i>diclofenac potassium oral tablet 50 mg - Tier 1; QL</i></p> <p><i>diclofenac sodium er - Tier 1; QL</i></p> <p><i>diclofenac sodium external gel 1 % (generic for ALEVE ARTHRITIS PAIN) - Tier 1; Brand OTC and Generic; QL</i></p> <p><i>diclofenac sodium external solution 1.5 % - Tier 1; PA; QL</i></p> <p><i>diclofenac sodium oral - Tier 1; QL</i></p> <p><i>ec-naproxen (generic for EC-NAPROSYN) - Tier 1; QL</i></p> <p><i>etodolac (generic for LODINE) - Tier 1; QL</i></p> <p><i>ft ibuprofen oral tablet (generic for MEDI-FIRST IBUPROFEN) - Tier 1; QL</i></p> <p><i>ibuprofen (generic for IBU) - Tier 1; QL</i></p> <p><i>ibu-200 (generic for MEDI-FIRST IBUPROFEN) - Tier 1; QL</i></p> <p><i>ibuprofen childrens oral tablet chewable 100 mg (generic for ADVIL JUNIOR STRENGTH) - Tier 1; QL</i></p> <p><i>ibuprofen ib childrens (generic for ADVIL JUNIOR STRENGTH) - Tier 1; QL</i></p> <p><i>ibuprofen ib oral tablet 200 mg (generic for MEDI-FIRST IBUPROFEN) - Tier 1; QL</i></p> <p><i>ibuprofen infants oral suspension 50 mg/1.25ml (generic for INFANTS ADVIL) - Tier 1; QL</i></p> <p><i>ibuprofen jr oral tablet 100 mg (generic for ADVIL JUNIOR STRENGTH) - Tier 1; QL</i></p> <p><i>ibuprofen junior (generic for ADVIL JUNIOR STRENGTH) - Tier 1; QL</i></p>	<p><i>DUEXIS (brand for ibuprofen-famotidine) - Tier 2; PA; QL</i></p> <p><i>ELYXYB - Tier 2; PA; QL</i></p> <p><i>FLECTOR (brand for diclofenac epolamine) - Tier 2; PA; QL</i></p> <p><i>LICART - Tier 2; PA; QL</i></p> <p><i>NAPRELAN ORAL TABLET EXTENDED RELEASE 24 HOUR 375 MG, 750 MG (brand for naproxen sodium er) - Tier 2; PA</i></p> <p><i>NAPRELAN ORAL TABLET EXTENDED RELEASE 24 HOUR 500 MG (brand for naproxen sodium er) - Tier 2; PA; QL</i></p> <p><i>NAPROSYN ORAL SUSPENSION (brand for naproxen) - Tier 2; PA; QL; AL</i></p> <p><i>NAPROSYN ORAL TABLET (brand for naproxen) - Tier 2; PA; QL</i></p>

Tier 1: Generic; Tier 2: Brand; ^: Medical Office Attestation Needed if Prescribed by Behavioral Health Provider, Full Prior Authorization Needed if Prescribed by Non-Behavioral Health Provider; *: Available without PA for participating Behavioral Health Prescribers; AL: Limited to members of a certain age; DX2RX: Diagnosis Required; GE: Gender Limit; PA: Prior Auth Required; QL: Quantity Limit; SP: Specialty Medication; ST: Step Therapy

Preferred Agents

Non-Preferred Agents

ibuprofen junior strength (generic for ADVIL JUNIOR STRENGTH) - Tier 1; QL
ibuprofen oral suspension 100 mg/5ml (generic for CHILDRENS ADVIL) - Tier 1; QL
ibuprofen oral tablet 200 mg (generic for MEDI-FIRST IBUPROFEN) - Tier 1; QL
ibuprofen oral tablet 400 mg, 600 mg, 800 mg (generic for IBU) - Tier 1; QL
indomethacin oral - Tier 1; QL
INFANTS ADVIL (brand for cvs ibuprofen infants) - Tier 2; QL
infants ibuprofen (generic for INFANTS ADVIL) - Tier 1; QL
ketoprofen oral capsule 50 mg - Tier 1; QL
ketorolac tromethamine oral - Tier 1; QL
ketorolac tromethamine solution 30 mg/ml injection - Tier 1; QL
 KETOROLAC TROMETHAMINE SOLUTION 30 MG/ML INJECTION - Tier 2; QL
medi-first ibuprofen (generic for MEDI-FIRST IBUPROFEN) - Tier 1; QL
mediproxen (generic for MEDIPROXEN) - Tier 1; QL
meloxicam oral tablet - Tier 1; QL
mm ibuprofen (generic for MEDI-FIRST IBUPROFEN) - Tier 1; QL
MOTRIN CHILDRENS (brand for cvs ibuprofen childrens) - Tier 2; QL
MOTRIN IB ORAL TABLET (brand for cvs ibuprofen) - Tier 2; QL
MOTRIN INFANTS DROPS (brand for cvs ibuprofen infants) - Tier 2; QL
nabumetone oral - Tier 1; QL
naproxen dr (generic for EC-NAPROSYN) - Tier 1; QL
naproxen oral suspension (generic for NAPROSYN) - Tier 1; QL; AL
naproxen oral tablet (generic for NAPROSYN) - Tier 1; QL
naproxen oral tablet delayed release (generic for EC-NAPROSYN) - Tier 1; QL
naproxen sodium oral tablet 220 mg (generic for MEDIPROXEN) - Tier 1; QL
oxaprozin (generic for DAYPRO) - Tier 1; QL
piroxicam oral (generic for FELDENE) - Tier 1; QL
sulindac oral - Tier 1; QL

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Preferred Agents	Non-Preferred Agents
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Opioid Analgesics, Long-acting

buprenorphine (generic for BUTRANS) - Tier 1; PA; QL
fentanyl transdermal patch 72 hour 100 mcg/hr, 12 mcg/hr, 25 mcg/hr, 50 mcg/hr, 75 mcg/hr - Tier 1; PA; QL
methadone hcl oral tablet soluble (generic for METHADOSE) - Tier 1; DX2RX; QL
methadose oral tablet soluble (generic for METHADOSE) - Tier 1; DX2RX; QL
morphine sulfate er (generic for MS CONTIN) - Tier 1; PA; QL
morphine sulfate injection solution 2 mg/ml, 4 mg/ml - Tier 1
morphine sulfate intravenous solution 50 mg/ml - Tier 1
oxymorphone hcl er - Tier 1; PA; QL

BELBUCA - Tier 2; PA; QL
BUTRANS (brand for buprenorphine) - Tier 2; PA; QL
HYSINGLA ER (brand for hydrocodone bitartrate er) - Tier 2; PA; QL
morphine sulfate er beads - Tier 1; PA; QL
NUCYNTA ER - Tier 2; PA; QL
OXYCONTIN (brand for oxycodone hcl er) - Tier 2; PA; QL
ROXYBOND ORAL TABLET ABUSE-DETERRENT 15 MG, 30 MG, 5 MG - Tier 2; PA; QL
XTAMPZA ER - Tier 2; PA; QL

Opioid Analgesics, Short-acting

acetaminophen-codeine - Tier 1; QL
ascomp-codeine (generic for ASCOMP-CODEINE) - Tier 1; QL
bac (generic for BAC) - Tier 1; QL
butalbital-acetaminophen oral tablet 50-325 mg (generic for TENCON) - Tier 1; QL
butalbital-apap-caff-cod oral capsule 50-325-40-30 mg - Tier 1; QL
butalbital-apap-caffeine oral capsule 50-325-40 mg (generic for ESGIC) - Tier 1; QL
butalbital-apap-caffeine oral tablet (generic for BAC) - Tier 1; QL
butalbital-asa-caff-codeine (generic for ASCOMP-CODEINE) - Tier 1; QL
butalbital-aspirin-caffeine - Tier 1; QL
butorphanol tartrate nasal - Tier 1; QL
codeine sulfate oral tablet 30 mg, 60 mg - Tier 1; QL
endocet oral tablet 10-325 mg, 5-325 mg, 7.5-325 mg (generic for ENDOCET) - Tier 1; QL
fentanyl citrate (pf) - Tier 1; QL
hydrocodone-acetaminophen oral solution 7.5-325 mg/15ml - Tier 1; QL

apap-caff-dihydrocodeine (generic for TREZIX) - Tier 1; PA; QL
NUCYNTA - Tier 2; PA; QL
SEGLENTIS - Tier 2; PA; QL
TREZIX (brand for apap-caff-dihydrocodeine) - Tier 2; PA; QL

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Preferred Agents	Non-Preferred Agents
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hydrocodone-acetaminophen oral tablet 10-325 mg, 5-325 mg, 7.5-325 mg - Tier 1; QL
hydromorphone hcl oral (generic for DILAUDID) - Tier 1; QL
hydromorphone hcl rectal - Tier 1; QL
morphine sulfate (concentrate) - Tier 1; QL
morphine sulfate oral - Tier 1; QL
morphine sulfate rectal - Tier 1; QL
oxycodone hcl oral concentrate - Tier 1; QL
oxycodone hcl oral solution - Tier 1; QL
 OXYCODONE-ACETAMINOPHEN ORAL SOLUTION 5-325 MG/5ML - Tier 2; QL
oxycodone-acetaminophen oral tablet 10-325 mg, 5-325 mg, 7.5-325 mg (generic for ENDOCET) - Tier 1; QL
pentazocine-naloxone hcl - Tier 1; QL
TENCON (brand for butalbital-acetaminophen) - Tier 2; QL
tramadol hcl oral tablet 50 mg - Tier 1; QL

Opioid Dependence Treatments - Antidotes/Deterrents/Protectants

buprenorphine hcl sublingual - Tier 1; QL

Analgesics - Drugs to Treat Pain, Inflammation, and Muscle and Joint Conditions

Analgesics - Miscellaneous Analgesics

8 hour arthritis pain (generic for TYLENOL 8 HOUR) - Tier 1; QL
8 hour arthritis relief (generic for TYLENOL 8 HOUR) - Tier 1; QL
8 hour pain relief oral tablet extended release 650 mg (generic for TYLENOL 8 HOUR) - Tier 1; QL
8 hour pain reliever (generic for TYLENOL 8 HOUR) - Tier 1; QL
8 hr arthritis pain relief (generic for TYLENOL 8 HOUR) - Tier 1; QL
8hr arthritis pain relief (generic for TYLENOL 8 HOUR) - Tier 1; QL
8hr muscle aches & pain (generic for TYLENOL 8 HOUR) - Tier 1; QL
acetaminophen 8 hour (generic for TYLENOL 8 HOUR) - Tier 1; QL

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Preferred Agents

acetaminophen 8 hours (generic for *TYLENOL 8 HOUR*) - Tier 1; QL
acetaminophen 8hr arth pain (generic for *TYLENOL 8 HOUR*) - Tier 1; QL
acetaminophen 8hr musc ache (generic for *TYLENOL 8 HOUR*) - Tier 1; QL
acetaminophen childrens oral suspension 160 mg/5ml (generic for *PANADOL CHILDRENS*) - Tier 1; QL
acetaminophen childrens oral tablet chewable 160 mg (generic for *MAPAP CHILDRENS*) - Tier 1; QL
acetaminophen er (generic for *TYLENOL 8 HOUR*) - Tier 1; QL
acetaminophen ex st oral liquid 500 mg/15ml (generic for *MAPAP ACETAMINOPHEN EXTRA STR*) - Tier 1
acetaminophen ex st oral tablet 500 mg (generic for *MM ACETAMINOPHEN EX STR*) - Tier 1; QL
acetaminophen extra strength (generic for *MM ACETAMINOPHEN EX STR*) - Tier 1; QL
acetaminophen infants (generic for *PANADOL CHILDRENS*) - Tier 1; QL
acetaminophen oral liquid 160 mg/5ml (generic for *LITTLE REMEDIES FOR FEVER*) - Tier 1; QL
acetaminophen oral solution 160 mg/5ml, 325 mg/10.15ml, 650 mg/20.3ml - Tier 1; QL
acetaminophen oral suspension 160 mg/5ml, 650 mg/20.3ml (generic for *PANADOL CHILDRENS*) - Tier 1; QL
acetaminophen oral tablet 325 mg (generic for *PHARBETOL*) - Tier 1; QL
acetaminophen oral tablet 500 mg (generic for *MM ACETAMINOPHEN EX STR*) - Tier 1; QL
acetaminophen oral tablet chewable 160 mg (generic for *MAPAP CHILDRENS*) - Tier 1; QL
acetaminophen rectal suppository 120 mg (generic for *FEVERALL CHILDRENS*) - Tier 1; QL
acetaminophen rectal suppository 650 mg (generic for *FEVERALL ADULTS*) - Tier 1; QL
apra (generic for *MAX RELIEF JUNIOR*) - Tier 1; QL

Non-Preferred Agents

Tier 1: Generic; Tier 2: Brand; ^: Medical Office Attestation Needed if Prescribed by Behavioral Health Provider, Full Prior Authorization Needed if Prescribed by Non-Behavioral Health Provider; *: Available without PA for participating Behavioral Health Prescribers; AL: Limited to members of a certain age; DX2RX: Diagnosis Required; GE: Gender Limit; PA: Prior Auth Required; QL: Quantity Limit; SP: Specialty Medication; ST: Step Therapy

Preferred Agents

Non-Preferred Agents

arthritis pain oral tablet extended release 650 mg (generic for TYLENOL 8 HOUR) - Tier 1; QL
arthritis pain relief oral tablet extended release 650 mg (generic for TYLENOL 8 HOUR) - Tier 1; QL
arthritis pain reliever oral (generic for TYLENOL 8 HOUR) - Tier 1; QL
betatemp childrens (generic for PANADOL CHILDRENS) - Tier 1; QL
childrens acetaminophen (generic for PANADOL CHILDRENS) - Tier 1; QL
childrens apap (generic for MAPAP CHILDRENS) - Tier 1; QL
childrens non-aspirin (generic for MAPAP CHILDRENS) - Tier 1; QL
childrens silapap (generic for LITTLE REMEDIES FOR FEVER) - Tier 1; QL
childs non-aspirin (generic for MAPAP CHILDRENS) - Tier 1; QL
ed-apap (generic for LITTLE REMEDIES FOR FEVER) - Tier 1; QL
EXCEDRIN EXTRA STRENGTH (brand for cvs headache relief) - Tier 2
EXCEDRIN MIGRAINE (brand for cvs headache relief) - Tier 2
fever reducer/pain reliever (generic for PANADOL CHILDRENS) - Tier 1; QL
fever reducing childrens (generic for FEVERALL CHILDRENS) - Tier 1; QL
feverall adults (generic for FEVERALL ADULTS) - Tier 1; QL
feverall childrens (generic for FEVERALL CHILDRENS) - Tier 1; QL
FEVERALL INFANTS - Tier 2; QL
FEVERALL JUNIOR STRENGTH - Tier 2; QL
ft 8 hour pain relief (generic for TYLENOL 8 HOUR) - Tier 1; QL
ft children's pain/fever (generic for MAPAP CHILDRENS) - Tier 1; QL
ft pain relief (generic for PHARBETOL) - Tier 1; QL
ft pain relief adult extra st (generic for MM ACETAMINOPHEN EX STR) - Tier 1; QL
headache formula (generic for EXCEDRIN EXTRA STRENGTH) - Tier 1
headache relief (generic for EXCEDRIN EXTRA STRENGTH) - Tier 1
headache relief extra str (generic for EXCEDRIN EXTRA STRENGTH) - Tier 1
infants pain & fever (generic for PANADOL CHILDRENS) - Tier 1; QL

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Preferred Agents**Non-Preferred Agents**

infants pain relief drops (generic for PANADOL CHILDRENS) - Tier 1; QL
infants pain/fever (generic for PANADOL CHILDRENS) - Tier 1; QL
liquid acetaminophen (generic for LITTLE REMEDIES FOR FEVER) - Tier 1; QL
liquid pain relief (generic for LITTLE REMEDIES FOR FEVER) - Tier 1; QL
mapap acetaminophen extra str (generic for MAPAP ACETAMINOPHEN EXTRA STR) - Tier 1
mapap childrens (generic for MAPAP CHILDRENS) - Tier 1; QL
mapap oral capsule - Tier 1; QL
MAX RELIEF JUNIOR (brand for apra) - Tier 2; QL
migraine formula oral tablet 250-250-65 mg (generic for EXCEDRIN EXTRA STRENGTH) - Tier 1
migraine headache relief (generic for EXCEDRIN EXTRA STRENGTH) - Tier 1
migraine relief (generic for EXCEDRIN EXTRA STRENGTH) - Tier 1
mm acetaminophen ex str (generic for MM ACETAMINOPHEN EX STR) - Tier 1; QL
mm arthritis pain (generic for TYLENOL 8 HOUR) - Tier 1; QL
m-pap (generic for LITTLE REMEDIES FOR FEVER) - Tier 1; QL
non-aspirin (generic for MM ACETAMINOPHEN EX STR) - Tier 1; QL
non-aspirin 8 hour (generic for TYLENOL 8 HOUR) - Tier 1; QL
non-aspirin childrens (generic for MAPAP CHILDRENS) - Tier 1; QL
non-aspirin extra strength (generic for MM ACETAMINOPHEN EX STR) - Tier 1; QL
non-aspirin jr strength (generic for MAPAP CHILDRENS) - Tier 1; QL
non-aspirin pain relief (generic for PHARBETOL) - Tier 1; QL
pain & fever child (generic for PANADOL CHILDRENS) - Tier 1; QL
pain & fever childrens (generic for MAPAP CHILDRENS) - Tier 1; QL
pain & fever childrens oral suspension 160 mg/5ml (generic for PANADOL CHILDRENS) - Tier 1; QL
pain & fever infants oral suspension 160 mg/5ml (generic for PANADOL CHILDRENS) - Tier 1; QL

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Preferred Agents

pain relief childrens oral elixir 160 mg/5ml (generic for MAX RELIEF JUNIOR) - Tier 1; QL
pain relief childrens oral suspension (generic for PANADOL CHILDRENS) - Tier 1; QL
pain relief childrens oral tablet chewable 160 mg (generic for MAPAP CHILDRENS) - Tier 1; QL
pain relief extra st (generic for MM ACETAMINOPHEN EX STR) - Tier 1; QL
pain relief extra strength oral capsule 500 mg - Tier 1; QL
pain relief extra strength oral liquid 500 mg/15ml (generic for MAPAP ACETAMINOPHEN EXTRA STR) - Tier 1
pain relief extra strength oral tablet 500 mg (generic for MM ACETAMINOPHEN EX STR) - Tier 1; QL
pain relief oral liquid 500 mg/15ml (generic for MAPAP ACETAMINOPHEN EXTRA STR) - Tier 1
pain relief oral tablet 325 mg (generic for PHARBETOL) - Tier 1; QL
pain relief oral tablet 500 mg (generic for MM ACETAMINOPHEN EX STR) - Tier 1; QL
pain relief oral tablet extended release 650 mg (generic for TYLENOL 8 HOUR) - Tier 1; QL
pain relief regular strength (generic for PHARBETOL) - Tier 1; QL
pain relief/rapid burst (generic for MAPAP ACETAMINOPHEN EXTRA STR) - Tier 1
pain reliever (generic for MM ACETAMINOPHEN EX STR) - Tier 1; QL
pain reliever childrens oral suspension 160 mg/5ml (generic for PANADOL CHILDRENS) - Tier 1; QL
pain reliever ex st oral liquid 500 mg/15ml (generic for MAPAP ACETAMINOPHEN EXTRA STR) - Tier 1
pain reliever ex st oral tablet 500 mg (generic for MM ACETAMINOPHEN EX STR) - Tier 1; QL
pain reliever extra strength oral tablet 250-250-65 mg (generic for EXCEDRIN EXTRA STRENGTH) - Tier 1
pain reliever extra strength oral tablet 500 mg (generic for MM ACETAMINOPHEN EX STR) - Tier 1; QL
pain reliever plus (generic for EXCEDRIN EXTRA STRENGTH) - Tier 1

Non-Preferred Agents

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Preferred Agents	Non-Preferred Agents
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pain-off (generic for EXCEDRIN EXTRA STRENGTH) - Tier 1
PANADOL CHILDRENS (brand for acetaminophen) - Tier 2; QL
PANADOL EXTRA STRENGTH (brand for acetaminophen) - Tier 2; QL
PANADOL INFANTS (brand for acetaminophen) - Tier 2; QL
PHARBETOL (brand for acetaminophen) - Tier 2; QL
PHARBETOL EXTRA STRENGTH (brand for acetaminophen) - Tier 2; QL
sb arthritis pain relief (generic for TYLENOL 8 HOUR) - Tier 1; QL
sb pain reliever childrens (generic for PANADOL CHILDRENS) - Tier 1; QL
TYLENOL FOR CHILDREN + ADULTS (brand for acetaminophen) - Tier 2; QL
TYLENOL ORAL SUSPENSION 160 MG/5ML (brand for acetaminophen) - Tier 2; QL
TYLENOL ORAL TABLET 325 MG (brand for acetaminophen) - Tier 2; QL
TYLENOL ORAL TABLET 500 MG (brand for acetaminophen) - Tier 2; QL
TYLENOL ORAL TABLET CHEWABLE 160 MG (brand for acetaminophen) - Tier 2; QL
TYLENOL ORAL TABLET EXTENDED RELEASE 650 MG (brand for 8 hour arthritis pain) - Tier 2; QL

Nonsteroidal Anti-Inflammatory Drugs - Pain/Anti-Inflammatory Drugs

salsalate oral - Tier 1; QL

Opioid Analgesics, Short-acting

oxycodone hcl oral tablet 10 mg, 20 mg - Tier 1; QL
oxycodone hcl oral tablet 15 mg, 30 mg (generic for ROXICODONE) - Tier 1; QL

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Preferred Agents	Non-Preferred Agents
Anesthetics	
Local Anesthetics	
<p>7T LIDO - Tier 2; QL ANECREAM EXTERNAL CREAM (brand for lidocaine) - Tier 2; QL ASPERFLEX LIDOCAINE EXTERNAL CREAM (brand for lidocaine) - Tier 2; QL lidocaine external cream (generic for ANECREAM) - Tier 1; QL lidocaine external patch 5 % (generic for LIDOCAN) - Tier 1; DX2RX; QL lidocaine hcl external cream 3 % - Tier 1; QL lidocaine viscous hcl - Tier 1; QL lidocaine-prilocaine external cream - Tier 1; QL lidopin external cream 3 % - Tier 1; QL LMX 4 (brand for lidocaine) - Tier 2; QL PROXIVOL - Tier 2; QL</p>	
Anti-Addiction/Substance Abuse Treatment Agents	
Alcohol Deterrents/Anti-craving	
<p>acamprosate calcium - Tier 1; QL disulfiram oral tablet 250 mg - Tier 1; QL disulfiram oral tablet 500 mg - Tier 1 naltrexone hcl oral - Tier 1 VIVITROL - Tier 2; QL</p>	
Opioid Dependence	
<p>buprenorphine hcl-naloxone hcl (generic for SUBOXONE) - Tier 1; QL</p>	<p>SUBOXONE (brand for buprenorphine hcl-naloxone hcl) - Tier 2; PA; QL ZUBSOLV - Tier 2; PA; ^; QL</p>
Opioid Reversal Agents	
<p>naloxone hcl injection solution - Tier 1; QL</p>	<p>KLOXXADO - Tier 2; PA; ^; QL</p>

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Preferred Agents	Non-Preferred Agents
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naloxone hcl injection solution cartridge - Tier 1; QL
naloxone hcl injection solution prefilled syringe - Tier 1; ^; QL
naloxone hcl nasal (generic for NARCAN) - Tier 1; QL
NARCAN (brand for naloxone hcl) - Tier 2; QL

ZIMHI - Tier 2; PA; ^; QL

Smoking Cessation Agents	
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APO-VARENICLINE - Tier 2; QL
bupropion hcl er (smoking det) - Tier 1
habitrol (generic for HABITROL) - Tier 1; QL
NICODERM CQ (brand for cvs nicotine) - Tier 2; QL
nicotine step 1 (generic for HABITROL) - Tier 1; QL
nicotine step 2 (generic for NICODERM CQ) - Tier 1; QL
nicotine step 3 (generic for NICODERM CQ) - Tier 1; QL
nicotine transdermal patch 24 hour 14 mg/24hr, 7 mg/24hr (generic for NICODERM CQ) - Tier 1; QL
nicotine transdermal patch 24 hour 21 mg/24hr (generic for HABITROL) - Tier 1; QL
nicotine transdermal system (generic for HABITROL) - Tier 1; QL
NICOTROL - Tier 2; QL
NICOTROL NS - Tier 2; QL
varenicline tartrate - Tier 1; QL
varenicline tartrate (starter) - Tier 1; QL
varenicline tartrate(continue) - Tier 1; QL

Anti-Addiction/Substance Abuse Treatment Agents - Drugs for Overdose or Deterrence	
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Smoking Cessation Agents - Deterrents	
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mini nicotine (generic for KLS QUIT2) - Tier 1; QL
NICORETTE (brand for cvs nicotine) - Tier 2; QL
NICORETTE MINI (brand for cvs nicotine) - Tier 2; QL
NICORETTE STARTER KIT (brand for cvs nicotine) - Tier 2; QL

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Preferred Agents	Non-Preferred Agents
<p><i>nicotine gum mouth/throat gum 2 mg (generic for KLS QUIT2) - Tier 1; QL</i></p> <p><i>nicotine gum mouth/throat gum 4 mg (generic for KLS QUIT4) - Tier 1; QL</i></p> <p><i>nicotine gum mouth/throat lozenge 2 mg (generic for KLS QUIT2) - Tier 1; QL</i></p> <p><i>nicotine gum mouth/throat lozenge 4 mg (generic for KLS QUIT4) - Tier 1; QL</i></p> <p><i>nicotine mini (generic for KLS QUIT2) - Tier 1; QL</i></p> <p><i>nicotine mouth/throat gum 2 mg (generic for KLS QUIT2) - Tier 1; QL</i></p> <p><i>nicotine mouth/throat gum 4 mg (generic for KLS QUIT4) - Tier 1; QL</i></p> <p><i>nicotine mouth/throat lozenge 2 mg (generic for KLS QUIT2) - Tier 1; QL</i></p> <p><i>nicotine mouth/throat lozenge 4 mg (generic for KLS QUIT4) - Tier 1; QL</i></p> <p><i>nicotine polacrilex mini (generic for KLS QUIT2) - Tier 1; QL</i></p> <p><i>nicotine polacrilex mouth/throat (generic for KLS QUIT2) - Tier 1; QL</i></p> <p><i>quit2 (generic for KLS QUIT2) - Tier 1; QL</i></p> <p><i>quit4 (generic for KLS QUIT4) - Tier 1; QL</i></p> <p><i>THRIVE (brand for cvs nicotine) - Tier 2; QL</i></p>	
Antiandrogens - Hormone Suppressants	
Antineoplastics - Drugs to Treat Cancer	
	ORGOVYX - Tier 2; PA; SP; QL
Antibacterials	
Aminoglycosides	
<p><i>HUMATIN - Tier 2; QL</i></p> <p><i>neomycin sulfate oral - Tier 1; QL</i></p>	
Antibacterials, Other	

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Preferred Agents	Non-Preferred Agents
<p><i>clindamycin hcl oral capsule 150 mg, 300 mg (generic for CLEOCIN) - Tier 1; QL</i></p> <p><i>clindamycin palmitate hcl (generic for CLEOCIN) - Tier 1; QL</i></p> <p><i>clindamycin phosphate vaginal (generic for CLEOCIN) - Tier 1; QL</i></p> <p><i>colistimethate sodium (cba) (generic for COLY-MYCIN M) - Tier 1</i></p> <p><i>daptomycin solution reconstituted 500 mg intravenous (generic for CUBICIN RF) - Tier 1</i></p> <p><i>FIRVANQ (brand for vancomycin hcl) - Tier 2; DX2RX; QL</i></p> <p><i>linezolid oral suspension reconstituted (generic for ZYVOX) - Tier 1; DX2RX; QL</i></p> <p><i>linezolid oral tablet (generic for ZYVOX) - Tier 1; DX2RX</i></p> <p><i>methenamine hippurate (generic for HIPREX) - Tier 1; QL</i></p> <p><i>metronidazole external (generic for METROCREAM) - Tier 1; QL</i></p> <p><i>metronidazole oral tablet - Tier 1; QL</i></p> <p><i>metronidazole vaginal (generic for VANDAZOLE) - Tier 1; QL</i></p> <p><i>nitrofurantoin macrocrystal (generic for MACRODANTIN) - Tier 1; QL</i></p> <p><i>nitrofurantoin monohydrate macrocrystals (generic for MACROBID) - Tier 1; QL</i></p> <p><i>nitrofurantoin oral suspension 25 mg/5ml - Tier 1; Members >= 8 years of age will require PA; QL; AL</i></p> <p><i>tigecycline (generic for TYGACIL) - Tier 1</i></p> <p><i>tinidazole oral tablet 250 mg - Tier 1</i></p> <p><i>tinidazole oral tablet 500 mg - Tier 1; QL</i></p> <p><i>trimethoprim oral - Tier 1; QL</i></p> <p><i>vancomycin hcl oral solution reconstituted 25 mg/ml (generic for FIRVANQ) - Tier 1; DX2RX; QL</i></p> <p><i>VANDAZOLE (brand for metronidazole) - Tier 2; QL</i></p>	<p>CLINDESSE - Tier 2; PA; QL</p> <p>FLAGYL (brand for metronidazole) - Tier 2; PA; QL</p> <p>METROGEL (brand for metronidazole) - Tier 2; PA; QL</p> <p>NORITATE - Tier 2; PA; QL</p> <p>NUVESSA - Tier 2; PA; QL</p> <p>SOLOSEC - Tier 2; PA; QL</p> <p>VANCOCIN ORAL CAPSULE 250 MG (brand for vancomycin hcl) - Tier 2; PA; QL</p> <p>XENLETA ORAL - Tier 2; PA; QL</p> <p>XIFAXAN - Tier 2; PA; QL</p>
<p>Beta-lactam, Cephalosporins</p>	
<p><i>cefaclor oral capsule - Tier 1; QL</i></p> <p><i>cefadroxil - Tier 1; QL</i></p> <p><i>cefazolin sodium injection solution reconstituted 1 gm - Tier 1; QL</i></p> <p><i>cefazolin sodium solution reconstituted 10 gm injection - Tier 1</i></p> <p><i>cefdinir - Tier 1; QL</i></p>	

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Preferred Agents	Non-Preferred Agents
<p> <i>cefepime hcl solution reconstituted 2 gm intravenous - Tier 1</i> <i>cefixime oral capsule - Tier 1; QL</i> <i>cefepodoxime proxetil oral tablet - Tier 1; QL</i> <i>cefprozil - Tier 1; QL</i> <i>ceftriaxone sodium injection solution reconstituted 1 gm, 2 gm, 500 mg - Tier 1; QL</i> <i>cefuroxime axetil - Tier 1; QL</i> <i>cephalexin oral capsule 250 mg, 500 mg - Tier 1; QL</i> <i>cephalexin oral suspension reconstituted - Tier 1; QL</i> TEFLARO SOLUTION RECONSTITUTED 600 MG INTRAVENOUS - Tier 2 </p>	
Beta-lactam, Penicillins	
<p> <i>amoxicillin - Tier 1; QL</i> <i>amoxicillin-potassium clavulanate (generic for AUGMENTIN) - Tier 1; QL</i> <i>ampicillin - Tier 1; QL</i> <i>ampicillin-sulbactam sodium solution reconstituted 3 (2-1) gm injection (generic for UNASYN) - Tier 1</i> <i>dicloxacillin sodium - Tier 1; QL</i> <i>nafcillin sodium solution reconstituted 1 gm injection - Tier 1</i> <i>penicillin v potassium - Tier 1; QL</i> <i>piperacillin sod-tazobactam so intravenous solution reconstituted 4-0.5 gm, 4.5 (4-0.5) gm - Tier 1; QL</i> </p>	
Carbapenems	
<p> <i>ertapenem sodium - Tier 1</i> <i>meropenem solution reconstituted 500 mg intravenous - Tier 1</i> MEROPENEM-SODIUM CHLORIDE INTRAVENOUS SOLUTION RECONSTITUTED 1 GM/50ML - Tier 2 </p>	
Macrolides	

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Preferred Agents	Non-Preferred Agents
<p>azithromycin oral suspension reconstituted (generic for ZITHROMAX) - Tier 1; QL azithromycin oral tablet (generic for ZITHROMAX) - Tier 1; QL clarithromycin er - Tier 1; QL clarithromycin oral - Tier 1; QL DIFICID - Tier 2; PA; QL E.E.S. 400 (brand for erythromycin ethylsuccinate) - Tier 2; QL ERYTHROCIN STEARATE (brand for erythromycin stearate) - Tier 2; QL erythromycin base oral (generic for ERY-TAB) - Tier 1; QL erythromycin ethylsuccinate oral (generic for E.E.S. 400) - Tier 1; QL erythromycin oral (generic for ERY-TAB) - Tier 1; QL</p>	
Quinolones	
<p>CIPRO ORAL SUSPENSION RECONSTITUTED - Tier 2; QL ciprofloxacin hcl oral (generic for CIPRO) - Tier 1; QL levofloxacin oral tablet (generic for LEVAQUIN) - Tier 1; QL moxifloxacin hcl oral - Tier 1; QL ofloxacin oral - Tier 1; QL</p>	
Sulfonamides	
<p>sulfamethoxazole-trimethoprim oral (generic for BACTRIM) - Tier 1; QL sulfatrim pediatric (generic for SULFATRIM PEDIATRIC) - Tier 1; QL</p>	
Tetracyclines	
<p>doxy 100 - Tier 1 doxycycline hyclate oral capsule (generic for VIBRAMYCIN) - Tier 1; QL doxycycline hyclate oral tablet 100 mg - Tier 1; QL doxycycline monohydrate oral capsule 100 mg (generic for MONDOXYNE NL) - Tier 1; QL doxycycline monohydrate oral capsule 50 mg - Tier 1; QL minocycline hcl oral capsule 100 mg, 50 mg - Tier 1; QL</p>	<p>ORACEA (brand for doxycycline) - Tier 2; PA SOLODYN (brand for minocycline hcl er) - Tier 2; PA XIMINO (brand for minocycline hcl er) - Tier 2; PA; QL</p>

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Preferred Agents	Non-Preferred Agents
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mondoxyne nl (generic for MONDOXYNE NL) - Tier 1; QL
 NUZYRA ORAL - Tier 2; PA; QL

Antibacterials - Drugs to Treat Bacterial Infections	
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Antibacterials, Other - Antibiotics	
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antibiotic (generic for NEOSPORIN ORIGINAL) - Tier 1; QL
antiseptic (generic for BETADINE) - Tier 1; QL
BETADINE EXTERNAL SOLUTION 10 % (brand for cvs povidone-iodine) - Tier 2; QL
first aid antibiotic external ointment 3.5-400-5000 , 3.5-400-5000 mg-unit (generic for NEOSPORIN ORIGINAL) - Tier 1; QL
first aid antiseptic external solution 10 % (generic for BETADINE) - Tier 1; QL
medi-first triple antibiotic (generic for NEOSPORIN ORIGINAL) - Tier 1; QL
NEOSPORIN ORIGINAL (brand for cvs antibiotic) - Tier 2; QL
povidone iodine (generic for BETADINE) - Tier 1; QL
povidone-iodine external solution (generic for BETADINE) - Tier 1; QL
SCRUB CARE POVIDONE-IODINE (brand for cvs povidone-iodine) - Tier 2; QL
triple antibiotic external ointment , 3.5-400-5000 , 5-400-5000 , 5-400-5000 mg-unit (generic for NEOSPORIN ORIGINAL) - Tier 1; QL
triple antibiotic original (generic for NEOSPORIN ORIGINAL) - Tier 1; QL

SUTAB - Tier 2; PA

Anticonvulsants	
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Anticonvulsants, Other	
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felbamate oral suspension - Tier 1; Members >= 8 years of age will require PA; QL; AL
felbamate oral tablet (generic for FELBATOL) - Tier 1; QL
lamotrigine oral tablet (generic for SUBVENITE) - Tier 1; QL

BRIVIACT ORAL - Tier 2; PA; QL
 EPIDIOLEX - Tier 2; PA; SP; QL
 FINTEPLA - Tier 2; PA; QL
 FYCOMPA - Tier 2; PA; QL

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Preferred Agents	Non-Preferred Agents
<p><i>lamotrigine oral tablet chewable (generic for LAMICTAL) - Tier 1; Members >= 8 years of age will require PA; QL; AL</i></p> <p><i>lamotrigine starter kit-blue (generic for SUBVENITE STARTER KIT-BLUE) - Tier 1; *, QL</i></p> <p><i>lamotrigine starter kit-green (generic for SUBVENITE STARTER KIT-GREEN) - Tier 1; *, QL</i></p> <p><i>lamotrigine starter kit-orange (generic for SUBVENITE STARTER KIT-ORANGE) - Tier 1; *, QL</i></p> <p><i>levetiracetam oral solution (generic for KEPPRA) - Tier 1; Maximum age of 9 years for solution; QL; AL</i></p> <p><i>levetiracetam oral tablet (generic for KEPPRA) - Tier 1; QL</i></p> <p><i>roweepra (generic for ROWEEPRA) - Tier 1; QL</i></p> <p><i>subvenite (generic for SUBVENITE) - Tier 1; QL</i></p> <p><i>subvenite starter kit-blue (generic for SUBVENITE STARTER KIT-BLUE) - Tier 1; *, QL</i></p> <p><i>subvenite starter kit-green (generic for SUBVENITE STARTER KIT-GREEN) - Tier 1; *, QL</i></p> <p><i>subvenite starter kit-orange (generic for SUBVENITE STARTER KIT-ORANGE) - Tier 1; *, QL</i></p> <p><i>topiramate oral capsule sprinkle (generic for TOPAMAX SPRINKLE) - Tier 1; Members >= 8 years of age will require PA; QL; AL</i></p> <p><i>topiramate oral tablet (generic for TOPAMAX) - Tier 1; QL</i></p> <p><i>valproic acid oral - Tier 1; QL</i></p>	<p><i>TOPAMAX (brand for topiramate) - Tier 2; PA; QL</i></p> <p><i>TOPAMAX SPRINKLE (brand for topiramate) - Tier 2; PA; Members >= 8 years of age will require PA; QL; AL</i></p> <p><i>TROKENDI XR (brand for topiramate er) - Tier 2; PA; QL</i></p> <p><i>XCOPRI (250 MG DAILY DOSE) - Tier 2; PA; QL</i></p> <p><i>XCOPRI (350 MG DAILY DOSE) - Tier 2; PA; QL</i></p> <p><i>XCOPRI ORAL TABLET - Tier 2; PA; QL</i></p> <p><i>XCOPRI ORAL TABLET THERAPY PACK - Tier 2; PA</i></p>
Calcium Channel Modifying Agents	
<p><i>ethosuximide oral (generic for ZARONTIN) - Tier 1; QL</i></p> <p><i>methsuximide (generic for CELONTIN) - Tier 1; QL</i></p>	
Gamma-aminobutyric Acid (GABA) Augmenting Agents	
<p><i>clobazam (generic for ONFI) - Tier 1; DX2RX; QL</i></p> <p><i>diazepam rectal (generic for DIASTAT ACUDIAL) - Tier 1; QL</i></p> <p><i>gabapentin oral capsule (generic for NEURONTIN) - Tier 1; QL</i></p>	<p><i>gabapentin oral solution 250 mg/5ml (generic for NEURONTIN) - Tier 1; PA; QL</i></p> <p><i>NEURONTIN (brand for gabapentin) - Tier 2; PA; QL</i></p> <p><i>SYMPAZAN - Tier 2; PA; QL</i></p>

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Preferred Agents	Non-Preferred Agents
<p><i>gabapentin oral tablet 600 mg, 800 mg (generic for NEURONTIN) - Tier 1; QL</i></p> <p><i>NAYZILAM - Tier 2; PA; QL</i></p> <p><i>phenobarbital oral - Tier 1; QL</i></p> <p><i>primidone oral tablet 250 mg, 50 mg (generic for MYSOLINE) - Tier 1; QL</i></p> <p><i>tiagabine hcl - Tier 1; PA; QL; AL</i></p> <p><i>vigabatrin oral packet (generic for VIGADRONE) - Tier 1; PA; SP; QL</i></p> <p><i>vigadrone oral packet (generic for VIGADRONE) - Tier 1; PA; SP; QL</i></p>	<p><i>VALTOCO 10 MG DOSE - Tier 2; PA; QL</i></p> <p><i>VALTOCO 15 MG DOSE - Tier 2; PA; QL</i></p> <p><i>VALTOCO 20 MG DOSE - Tier 2; PA; QL</i></p> <p><i>VALTOCO 5 MG DOSE - Tier 2; PA; QL</i></p>
Sodium Channel Agents	
<p><i>carbamazepine er (generic for CARBATROL) - Tier 1; QL</i></p> <p><i>carbamazepine oral (generic for EPITOL) - Tier 1; QL</i></p> <p><i>DILANTIN ORAL CAPSULE 30 MG - Tier 2</i></p> <p><i>epitol (generic for EPITOL) - Tier 1; QL</i></p> <p><i>lacosamide oral tablet (generic for VIMPAT) - Tier 1; PA; QL; AL</i></p> <p><i>oxcarbazepine oral suspension (generic for TRILEPTAL) - Tier 1; Maximum age of 9 years for solution; QL; AL</i></p> <p><i>oxcarbazepine oral tablet (generic for TRILEPTAL) - Tier 1; QL</i></p> <p><i>phenytek (generic for PHENYTEK) - Tier 1; QL</i></p> <p><i>phenytoin infatabs (generic for PHENYTOIN INFATABS) - Tier 1; QL</i></p> <p><i>phenytoin oral suspension 125 mg/5ml (generic for DILANTIN) - Tier 1; QL</i></p> <p><i>phenytoin oral tablet chewable (generic for PHENYTOIN INFATABS) - Tier 1; QL</i></p> <p><i>phenytoin sodium extended (generic for DILANTIN) - Tier 1; QL</i></p> <p><i>rufinamide (generic for BANZEL) - Tier 1; DX2RX; QL</i></p> <p><i>TEGRETOL ORAL SUSPENSION (brand for carbamazepine) - Tier 2; QL</i></p> <p><i>zonisamide oral (generic for ZONEGRAN) - Tier 1; QL</i></p>	<p><i>APTIOM - Tier 2; PA; QL</i></p> <p><i>OXTELLAR XR - Tier 2; PA; QL</i></p> <p><i>VIMPAT ORAL (brand for lacosamide) - Tier 2; PA; QL; AL</i></p> <p><i>ZONEGRAN (brand for zonisamide) - Tier 2; PA; QL</i></p>
Anticonvulsants - Drugs to Treat Seizures	

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Preferred Agents	Non-Preferred Agents
Anticonvulsants, Other	
	DIACOMIT - Tier 2; PA; SP; QL
Antidementia Agents	
Antidementia Agents, Other	
	NAMZARIC - Tier 2; PA; QL; AL
Cholinesterase Inhibitors	
<i>donepezil hcl oral tablet 10 mg, 5 mg (generic for ARICEPT) - Tier 1; Members <18 years of age will require PA; QL; AL</i> <i>donepezil hcl oral tablet 23 mg (generic for ARICEPT) - Tier 1; ST; Members <18 years of age will require PA; QL; AL</i> <i>galantamine hydrobromide oral solution - Tier 1; QL; AL</i> <i>galantamine hydrobromide oral tablet 12 mg, 8 mg - Tier 1; QL; AL</i> <i>galantamine hydrobromide oral tablet 4 mg - Tier 1; Members <18 years of age will require PA; QL; AL</i> <i>rivastigmine (generic for EXELON) - Tier 1; Members <18 years of age will require PA; QL; AL</i> <i>rivastigmine tartrate - Tier 1; QL; AL</i>	<i>EXELON (brand for rivastigmine) - Tier 2; PA; Members <18 years of age will require PA; QL; AL</i>
N-methyl-D-aspartate (NMDA) Receptor Antagonist	
<i>memantine hcl oral solution - Tier 1; QL</i> <i>memantine hcl oral tablet (generic for NAMENDA) - Tier 1; Members <18 years of age will require PA; QL; AL</i>	
Antidepressants	
Antidepressants, Other	
<i>bupropion hcl er (sr) (generic for WELLBUTRIN SR) - Tier 1; QL</i>	<i>FORFIVO XL (brand for bupropion hcl er (xl)) - Tier 2; PA; ^; QL</i> <i>SPRAVATO (84 MG DOSE) - Tier 2; PA; ^; QL</i>

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Preferred Agents	Non-Preferred Agents
<p><i>bupropion hcl er (xl) oral tablet extended release 24 hour 150 mg, 300 mg (generic for WELLBUTRIN XL) - Tier 1; ^; QL</i></p> <p><i>bupropion hcl oral - Tier 1; QL</i></p> <p><i>mirtazapine oral tablet 15 mg, 30 mg (generic for REMERON) - Tier 1; Tabs (not soltabs); QL</i></p> <p><i>mirtazapine oral tablet 45 mg, 7.5 mg - Tier 1; QL</i></p> <p><i>perphenazine-amitriptyline oral tablet 2-10 mg, 4-10 mg, 4-25 mg, 4-50 mg - Tier 1</i></p> <p><i>perphenazine-amitriptyline oral tablet 2-25 mg - Tier 1; QL</i></p> <p><i>ZULRESSO - Tier 2; ^</i></p>	<p><i>WELLBUTRIN XL (brand for bupropion hcl er (xl)) - Tier 2; PA; ^; QL</i></p>
Monoamine Oxidase Inhibitors	
<p><i>tranylcypromine sulfate (generic for PARNATE) - Tier 1; QL</i></p>	
SSRI/SNRI (Selective Serotonin Reuptake Inhibitors/Serotonin and Norepinephrine Reuptake Inhibitors)	
<p><i>citalopram hydrobromide oral solution - Tier 1; QL</i></p> <p><i>citalopram hydrobromide oral tablet (generic for CELEXA) - Tier 1; QL</i></p> <p><i>escitalopram oxalate oral tablet (generic for LEXAPRO) - Tier 1; QL</i></p> <p><i>fluoxetine hcl oral capsule (generic for PROZAC) - Tier 1; QL</i></p> <p><i>fluoxetine hcl oral solution - Tier 1; QL</i></p> <p><i>fluvoxamine maleate - Tier 1; QL</i></p> <p><i>paroxetine hcl oral tablet (generic for PAXIL) - Tier 1; QL</i></p> <p><i>sertraline hcl oral concentrate (generic for ZOLOFT) - Tier 1; QL</i></p> <p><i>sertraline hcl oral tablet (generic for ZOLOFT) - Tier 1; QL</i></p> <p><i>trazodone hcl oral tablet 100 mg, 150 mg, 50 mg - Tier 1; QL</i></p> <p><i>venlafaxine hcl - Tier 1; QL</i></p> <p><i>venlafaxine hcl er oral capsule extended release 24 hour (generic for EFFEXOR XR) - Tier 1; QL</i></p>	<p><i>CELEXA (brand for citalopram hydrobromide) - Tier 2; PA; QL</i></p> <p><i>FETZIMA - Tier 2; PA; ^; QL</i></p> <p><i>PAXIL ORAL SUSPENSION (brand for paroxetine hcl) - Tier 2; PA; ^; QL</i></p> <p><i>PAXIL ORAL TABLET (brand for paroxetine hcl) - Tier 2; PA; QL</i></p> <p><i>PRISTIQ (brand for desvenlafaxine succinate er) - Tier 2; PA; ^; QL</i></p> <p><i>TRINTELLIX - Tier 2; PA; ^; QL</i></p> <p><i>VIIBRYD (brand for vilazodone hcl) - Tier 2; PA; ^; QL</i></p> <p><i>VIIBRYD STARTER PACK - Tier 2; PA; ^; QL</i></p>
Tricyclics	

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Preferred Agents	Non-Preferred Agents
<p>amitriptyline hcl oral - Tier 1; QL amoxapine - Tier 1; QL clomipramine hcl oral (generic for ANAFRANIL) - Tier 1; ^ desipramine hcl oral (generic for NORPRAMIN) - Tier 1; QL doxepin hcl oral capsule - Tier 1; QL doxepin hcl oral concentrate - Tier 1; QL imipramine hcl oral - Tier 1; QL nortriptyline hcl oral (generic for PAMELOR) - Tier 1; QL</p>	

Antiemetics

Antiemetics, Other

<p>BONINE (brand for cvs motion sickness relief) - Tier 2 compro (generic for COMPRO) - Tier 1; QL driminate (generic for DRIMINATE) - Tier 1 ft motion sickness oral tablet 50 mg (generic for DRIMINATE) - Tier 1 meclizine hcl oral tablet 12.5 mg - Tier 1; QL meclizine hcl oral tablet 25 mg (generic for DRAMAMINE) - Tier 1; QL meclizine hcl oral tablet chewable (generic for BONINE) - Tier 1 metoclopramide hcl oral solution - Tier 1; QL metoclopramide hcl oral tablet (generic for REGLAN) - Tier 1; QL motion sickness oral tablet 50 mg (generic for DRIMINATE) - Tier 1 motion sickness relief oral tablet 50 mg (generic for DRIMINATE) - Tier 1 motion sickness relief oral tablet chewable 25 mg (generic for BONINE) - Tier 1 motion-time (generic for BONINE) - Tier 1 perphenazine oral - Tier 1; QL prochlorperazine (generic for COMPRO) - Tier 1; QL prochlorperazine maleate oral - Tier 1; QL promethazine hcl injection solution 25 mg/ml (generic for PHENERGAN) - Tier 1; QL promethazine hcl oral - Tier 1; QL promethazine hcl rectal (generic for PROMETHEGAN) - Tier 1; QL</p>	
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Preferred Agents	Non-Preferred Agents
<p><i>promethegan (generic for PROMETHEGAN) - Tier 1; QL</i> <i>travel ease (generic for BONINE) - Tier 1</i> <i>trimethobenzamide hcl oral - Tier 1; QL</i></p>	
Emetogenic Therapy Adjuncts	
<p><i>aprepitant (generic for EMEND) - Tier 1; QL</i> <i>dronabinol (generic for MARINOL) - Tier 1; PA; QL</i> <i>ondansetron hcl oral tablet 4 mg, 8 mg - Tier 1; QL</i> <i>ondansetron odt - Tier 1; QL</i></p>	<p><i>AKYNZEO ORAL - Tier 2; PA; QL</i> <i>EMEND ORAL (brand for aprepitant) - Tier 2; PA; QL</i> <i>SANCUSO - Tier 2; PA; QL</i></p>
Antiemetics - Drugs to Treat Nausea and Vomiting	
Antiemetics, Other - Nausea and Vomiting Drugs	
<p><i>anti-nausea (generic for EMETROL) - Tier 1</i> <i>anti-nausea relief (generic for EMETROL) - Tier 1</i> <i>EMETROL ORAL SOLUTION (brand for anti-nausea) - Tier 2</i> <i>nausea control (generic for EMETROL) - Tier 1</i> <i>nausea relief oral solution 1.87-1.87-21.5 (generic for EMETROL) - Tier 1</i></p>	
Antifungals	
<p><i>3 day (generic for MONISTAT 3) - Tier 1; QL</i> <i>clotrimazole mouth/throat troche 10 mg - Tier 1; QL</i> <i>fluconazole oral (generic for DIFLUCAN) - Tier 1; QL</i> <i>griseofulvin microsize oral - Tier 1; QL</i> <i>griseofulvin ultramicrosize - Tier 1; QL</i> <i>itraconazole oral (generic for SPORANOX) - Tier 1; PA; QL</i> <i>ketoconazole oral - Tier 1; QL</i> <i>miconazole 3 - Tier 1; QL</i> <i>miconazole 3 applicator vaginal kit 200 & 2 mg-% (9gm) (generic for MONISTAT 3 COMBO PACK APP) - Tier 1; QL</i></p>	<p><i>CRESEMBA ORAL CAPSULE 186 MG - Tier 2; PA; QL</i> <i>DIFLUCAN (brand for fluconazole) - Tier 2; PA; QL</i> <i>GYNAZOLE-1 - Tier 2; PA; QL</i> <i>NOXAFIL ORAL PACKET - Tier 2; PA; QL; AL</i> <i>NOXAFIL ORAL SUSPENSION (brand for posaconazole) - Tier 2; PA</i> <i>NOXAFIL ORAL TABLET DELAYED RELEASE (brand for posaconazole) - Tier 2; PA; QL</i> <i>VFEND (brand for voriconazole) - Tier 2; PA; QL</i></p>

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Preferred Agents	Non-Preferred Agents
<p><i>miconazole 3 combo pack app vaginal kit 200 & 2 mg-% (9gm) (generic for MONISTAT 3 COMBO PACK APP) - Tier 1; QL</i></p> <p><i>miconazole 3 combo pack vaginal kit 200 & 2 mg-% (9gm) (generic for MONISTAT 3 COMBO PACK APP) - Tier 1; QL</i></p> <p><i>miconazole 7 day treatment (generic for MONISTAT 7 SIMPLY CURE) - Tier 1; QL</i></p> <p><i>miconazole 7 vaginal cream 2 % (generic for MONISTAT 7 SIMPLY CURE) - Tier 1; QL</i></p> <p><i>miconazole 7 vaginal suppository 100 mg - Tier 1</i></p> <p><i>miconazole nitrate vaginal (generic for MONISTAT 7 SIMPLY CURE) - Tier 1; QL</i></p> <p><i>nystatin mouth/throat - Tier 1; QL</i></p> <p><i>nystatin oral - Tier 1; QL</i></p> <p><i>terbinafine hcl oral - Tier 1; QL</i></p> <p><i>terconazole vaginal cream - Tier 1; QL</i></p> <p><i>voriconazole oral tablet (generic for VFEND) - Tier 1; PA; QL</i></p>	

Antifungals - Drugs to Treat Fungal Infections

Antifungals - Fungal Infection Drugs

<p><i>3 day vaginal - Tier 1; QL</i></p> <p><i>3-day vaginal vaginal cream 2 % - Tier 1; QL</i></p> <p><i>antifungal (generic for DESENEX) - Tier 1; QL</i></p> <p><i>antifungal foot care (generic for LAMISIL AT) - Tier 1; QL</i></p> <p><i>antifungal miconazole (generic for MICATIN) - Tier 1; QL</i></p> <p><i>athlete's foot (generic for CRUEX PRESCRIPTION STRENGTH) - Tier 1; QL</i></p> <p><i>athlete's foot (terbinafine) (generic for LAMISIL AT) - Tier 1; QL</i></p> <p><i>athlete's foot external aerosol powder 2 % (generic for CRUEX PRESCRIPTION STRENGTH) - Tier 1; QL</i></p> <p><i>athlete's foot external cream 1 % (generic for LAMISIL AT) - Tier 1; QL</i></p> <p><i>athlete's foot powder spray external aerosol powder 2 % (generic for CRUEX PRESCRIPTION STRENGTH) - Tier 1; QL</i></p>	
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Preferred Agents	Non-Preferred Agents
<p><i>athletes foot spray external aerosol 2 % (generic for LOTRIMIN AF) - Tier 1; QL</i></p> <p><i>baza antifungal (generic for MICATIN) - Tier 1; QL</i></p> <p><i>clotrimazole 3 vaginal cream 2 % - Tier 1; QL</i></p> <p><i>clotrimazole 7 - Tier 1; QL</i></p> <p><i>clotrimazole vaginal - Tier 1; QL</i></p> <p><i>clotrimazole vaginal cream 1 % - Tier 1; QL</i></p> <p><i>critic-aid clear af - Tier 1; QL</i></p> <p><i>CRUEX PRESCRIPTION STRENGTH (brand for athletes foot powder spray) - Tier 2; QL</i></p> <p><i>DESENX EXTERNAL POWDER (brand for antifungal) - Tier 2; QL</i></p> <p><i>DESENX JOCK ITCH (brand for athletes foot powder spray) - Tier 2; QL</i></p> <p><i>foot care (terbinafine) (generic for LAMISIL AT) - Tier 1; QL</i></p> <p><i>ft antifungal external cream 2 % (generic for MICATIN) - Tier 1; QL</i></p> <p><i>ft athletes foot (terbinafine) (generic for LAMISIL AT) - Tier 1; QL</i></p> <p><i>jock itch external cream 1 % (generic for LAMISIL AT) - Tier 1; QL</i></p> <p><i>LAMISIL AT EXTERNAL CREAM (brand for athletes foot (terbinafine)) - Tier 2; QL</i></p> <p><i>LAMISIL AT JOCK ITCH (brand for athletes foot (terbinafine)) - Tier 2; QL</i></p> <p><i>micaderm (generic for MICATIN) - Tier 1; QL</i></p> <p><i>MICATIN (brand for antifungal) - Tier 2; QL</i></p> <p><i>miconazole antifungal (generic for MICATIN) - Tier 1; QL</i></p> <p><i>miconazole nitrate external cream (generic for MICATIN) - Tier 1; QL</i></p> <p><i>miconazorb af (generic for DESENX) - Tier 1; QL</i></p> <p><i>terbinafine hcl external (generic for LAMISIL AT) - Tier 1; QL</i></p> <p><i>terbinafine hydrochloride external cream 1 % (generic for LAMISIL AT) - Tier 1; QL</i></p> <p><i>ZEASORB-AF (brand for antifungal) - Tier 2; QL</i></p>	

Antigout Agents

<p><i>allopurinol oral tablet 100 mg, 300 mg - Tier 1; QL</i></p> <p><i>colchicine oral tablet (generic for COLCRYS) - Tier 1; QL</i></p>	<p><i>colchicine oral capsule (generic for MITIGARE) - Tier 1; PA; QL</i></p> <p><i>COLCRYS (brand for colchicine) - Tier 2; PA; QL</i></p>
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Preferred Agents	Non-Preferred Agents
<i>febuxostat (generic for ULORIC) - Tier 1; ST; QL</i> <i>probenecid - Tier 1; QL</i>	<i>MITIGARE (brand for colchicine) - Tier 2; PA; QL</i>
Antimigraine Agents	
Ergot Alkaloids	
<i>dihydroergotamine mesylate injection - Tier 1; QL</i> MIGERGOT - Tier 2; QL	<i>MIGRANAL (brand for dihydroergotamine mesylate) - Tier 2; PA; QL</i> QULIPTA - Tier 2; PA; QL
Prophylactic	
AIMOVIG - Tier 2; PA; QL EMGALITY - Tier 2; PA; QL EMGALITY (300 MG DOSE) - Tier 2; PA; QL	AJOVY - Tier 2; PA; QL
Antimigraine Agents - Drugs to Treat Migraines	
Calcitonin Gene-Related Peptide (CGRP) Receptor Antagonist - Migraine Drugs	
NURTEC - Tier 2; PA; QL	UBRELVY - Tier 2; PA; QL
Serotonin (5-HT) Receptor Agonists - Migraine Drugs	
<i>naratriptan hcl - Tier 1; ST; QL</i> <i>rizatriptan benzoate (generic for MAXALT) - Tier 1; QL</i> <i>sumatriptan nasal (generic for IMITREX) - Tier 1; QL</i> <i>sumatriptan succinate oral (generic for IMITREX) - Tier 1; QL</i> <i>sumatriptan succinate refill (generic for IMITREX STATDOSE REFILL) - Tier 1; QL</i> <i>sumatriptan succinate subcutaneous (generic for IMITREX STATDOSE SYSTEM) - Tier 1; QL</i>	<i>FROVA (brand for frovatriptan succinate) - Tier 2; PA; QL</i> <i>IMITREX (brand for sumatriptan) - Tier 2; PA; QL</i> <i>MAXALT (brand for rizatriptan benzoate) - Tier 2; PA; QL</i> <i>RELPAK (brand for eletriptan hydrobromide) - Tier 2; PA; QL</i> REYVOW - Tier 2; PA; QL <i>TREXIMET (brand for sumatriptan-naproxen sodium) - Tier 2; PA; QL</i> ZOMIG NASAL (brand for zolmitriptan) - Tier 2; PA; QL
Antimyasthenic Agents	

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Preferred Agents	Non-Preferred Agents
Parasympathomimetics	
<i>pyridostigmine bromide er (generic for MESTINON) - Tier 1; QL</i> <i>pyridostigmine bromide oral solution (generic for MESTINON) - Tier 1; QL</i> <i>pyridostigmine bromide oral tablet 60 mg (generic for MESTINON) - Tier 1; QL</i>	
Antimycobacterials	
Antimycobacterials, Other	
<i>dapsone oral - Tier 1; QL</i> <i>rifabutin (generic for MYCOBUTIN) - Tier 1; QL</i>	
Antituberculars	
<i>cycloserine oral - Tier 1; QL</i> <i>ethambutol hcl oral tablet 100 mg - Tier 1</i> <i>ethambutol hcl oral tablet 400 mg (generic for MYAMBUTOL) - Tier 1; QL</i> <i>isoniazid oral - Tier 1; QL</i> PRIFTIN - Tier 2; QL <i>pyrazinamide oral - Tier 1; QL</i> <i>rifampin oral - Tier 1; QL</i> SIRTURO - Tier 2; QL TRECATOR - Tier 2; QL	
Antineoplastics	
Alkylating Agents	
<i>cyclophosphamide oral capsule - Tier 1</i> CYCLOPHOSPHAMIDE ORAL TABLET - Tier 2 LEUKERAN - Tier 2 MATULANE - Tier 2; SP	

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Preferred Agents	Non-Preferred Agents
MYLERAN - Tier 2 <i>temozolomide oral capsule 100 mg, 180 mg, 20 mg, 250 mg, 5 mg - Tier 1; PA; SP; QL</i> <i>temozolomide oral capsule 140 mg - Tier 1; PA; SP</i>	
Antiandrogens	
<i>abiraterone acetate (generic for ZYTIGA) - Tier 1; PA; SP; QL</i> <i>bicalutamide (generic for CASODEX) - Tier 1; QL</i> ERLEADA - Tier 2; PA; SP; QL EULEXIN - Tier 2; QL NUBEQA - Tier 2; PA; SP; QL	XTANDI - Tier 2; PA; SP; QL ZYTIGA (brand for abiraterone acetate) - Tier 2; PA; SP; QL
Antiangiogenic Agents	
<i>lenalidomide (generic for REVLIMID) - Tier 1; PA; SP; QL</i> POMALYST - Tier 2; PA; SP; QL <i>REVLIMID (brand for lenalidomide) - Tier 2; PA; SP; QL</i> THALOMID - Tier 2; PA; SP; QL	
Antiestrogens/Modifiers	
<i>tamoxifen citrate oral - Tier 1; QL</i> <i>toremifene citrate (generic for FARESTON) - Tier 1; QL</i>	
Antimetabolites	
<i>hydroxyurea oral (generic for HYDREA) - Tier 1; QL</i> <i>mercaptopurine oral - Tier 1; QL</i> TABLOID - Tier 2; SP	PURIXAN - Tier 2; PA; QL
Antineoplastics, Other	
IDHIFA - Tier 2; PA; SP; QL LONSURF - Tier 2; PA; SP; QL	XPOVIO (100 MG ONCE WEEKLY) - Tier 2; PA; SP; QL XPOVIO (40 MG ONCE WEEKLY) - Tier 2; PA; SP; QL

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Preferred Agents	Non-Preferred Agents
NINLARO - Tier 2; PA; SP; QL ZOLINZA - Tier 2; PA; SP; QL	XPOVIO (40 MG TWICE WEEKLY) - Tier 2; PA; SP; QL XPOVIO (60 MG ONCE WEEKLY) - Tier 2; PA; SP; QL XPOVIO (80 MG ONCE WEEKLY) - Tier 2; PA; SP; QL
Aromatase Inhibitors, 3rd Generation	
<i>anastrozole oral (generic for ARIMIDEX) - Tier 1; QL</i> <i>exemestane (generic for AROMASIN) - Tier 1; QL</i> <i>letrozole oral (generic for FEMARA) - Tier 1; QL</i>	
Enzyme Inhibitors	
<i>etoposide oral - Tier 1</i> HYCAMTIN ORAL - Tier 2; PA; SP	
Molecular Target Inhibitors	
BALVERSA - Tier 2; PA; SP; QL COTELLIC - Tier 2; PA; SP; QL DAURISMO - Tier 2; PA; SP; QL ERIVEDGE - Tier 2; PA; SP; QL <i>everolimus oral tablet 10 mg, 2.5 mg, 5 mg, 7.5 mg (generic for AFINITOR) - Tier 1; PA; SP; QL</i> <i>everolimus oral tablet soluble (generic for AFINITOR DISPERZ) - Tier 1; PA; SP; QL</i> IBRANCE ORAL CAPSULE - Tier 2; PA; SP; QL IBRANCE ORAL TABLET - Tier 2; PA; QL JAKAFI - Tier 2; PA; SP; QL LYNPARZA - Tier 2; PA; SP; QL MEKINIST - Tier 2; PA; SP; QL ODOMZO - Tier 2; PA; SP; QL PIQRAY (200 MG DAILY DOSE) - Tier 2; PA; SP; QL PIQRAY (250 MG DAILY DOSE) - Tier 2; PA; SP; QL PIQRAY (300 MG DAILY DOSE) - Tier 2; PA; SP; QL ROZLYTREK ORAL CAPSULE - Tier 2; PA; SP; QL	<i>AFINITOR (brand for everolimus) - Tier 2; PA; SP; QL</i> BRAFTOVI - Tier 2; PA; SP; QL COPIKTRA - Tier 2; PA; SP; QL EXKIVITY - Tier 2; PA; SP; QL KISQALI (200 MG DOSE) - Tier 2; PA; SP; QL KISQALI (400 MG DOSE) - Tier 2; PA; SP; QL KISQALI (600 MG DOSE) - Tier 2; PA; SP; QL KISQALI FEMARA (200 MG DOSE) - Tier 2; PA; SP; QL KISQALI FEMARA (400 MG DOSE) - Tier 2; PA; SP; QL KISQALI FEMARA (600 MG DOSE) - Tier 2; PA; SP; QL KOSELUGO - Tier 2; PA; SP; QL MEKTOVI - Tier 2; PA; SP; QL <i>NEXAVAR (brand for sorafenib tosylate) - Tier 2; PA; SP; QL</i> <i>SUTENT (brand for sunitinib malate) - Tier 2; PA; SP; QL</i> TALZENNA ORAL CAPSULE 0.25 MG, 0.5 MG, 0.75 MG, 1 MG - Tier 2; PA; SP; QL TEPMETKO - Tier 2; PA; SP; QL

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Preferred Agents	Non-Preferred Agents
ROZLYTREK ORAL PACKET - Tier 2; PA; SP; QL; AL RUBRACA - Tier 2; PA; SP; QL RYDAPT - Tier 2; PA; SP; QL <i>sorafenib tosylate (generic for NEXAVAR) - Tier 1; PA; SP; QL</i> STIVARGA - Tier 2; PA; SP; QL <i>sunitinib malate (generic for SUTENT) - Tier 1; PA; SP; QL</i> TAFINLAR - Tier 2; PA; SP; QL TIBSOVO - Tier 2; PA; SP; QL VENCLEXTA - Tier 2; PA; SP; QL VENCLEXTA STARTING PACK - Tier 2; PA; SP; QL VERZENIO - Tier 2; PA; SP; QL VITRAKVI - Tier 2; PA; SP; QL ZEJULA - Tier 2; PA; SP; QL; AL ZELBORAF - Tier 2; PA; SP; QL ZYDELIG - Tier 2; PA; SP; QL	
Retinoids	
<i>bexarotene external (generic for TARGRETIN) - Tier 1; PA; SP; QL</i> <i>bexarotene oral (generic for TARGRETIN) - Tier 1; PA; SP</i> <i>tretinoin oral - Tier 1; SP; QL</i>	<i>TARGRETIN EXTERNAL (brand for bexarotene) - Tier 2; PA; SP; QL</i> <i>TARGRETIN ORAL (brand for bexarotene) - Tier 2; PA; SP</i>
Treatment Adjuncts	
<i>leucovorin calcium oral tablet 10 mg - Tier 1</i> <i>leucovorin calcium oral tablet 15 mg, 25 mg, 5 mg - Tier 1; QL</i> MESNEX ORAL - Tier 2; SP	
Antineoplastics - Drugs to Treat Cancer	
Alkylating Agents - Chemotherapy Agents	
<i>melphalan - Tier 1</i>	

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Preferred Agents	Non-Preferred Agents
Antimetabolites - Chemotherapy Agents	
<i>capecitabine (generic for XELODA) - Tier 1; SP</i>	
Molecular Target Inhibitors - Chemotherapy Agents	
	SCEMBLIX - Tier 2; PA; SP; QL
Antineoplastics, Other - Chemotherapy Agents	
Antineoplastics - Drugs to Treat Cancer	
ZYKADIA - Tier 2; PA; SP; QL	LUMAKRAS - Tier 2; PA; SP; QL
Antiparasitics	
Anthelmintics	
<i>albendazole oral - Tier 1; DX2RX; QL</i> <i>ivermectin oral (generic for STROMECTOL) - Tier 1; DX2RX; QL</i> <i>praziquantel oral (generic for BILTRICIDE) - Tier 1; DX2RX; QL</i>	EMVERM - Tier 2; PA; QL
Antiprotozoals	
<i>atovaquone (generic for MEPRON) - Tier 1; PA; QL</i> <i>atovaquone-proguanil hcl (generic for MALARONE) - Tier 1; QL</i> BENZNIDAZOLE - Tier 2; DX2RX; QL <i>chloroquine phosphate oral - Tier 1; DX2RX; QL</i> <i>hydroxychloroquine sulfate oral tablet 200 mg (generic for PLAQUENIL) - Tier 1; DX2RX; QL</i> KRINTAFEL - Tier 2; QL <i>mefloquine hcl - Tier 1; QL</i> <i>nitazoxanide oral (generic for ALINIA) - Tier 1; DX2RX; QL</i> <i>pentamidine isethionate inhalation (generic for NEBUPENT) - Tier 1; QL</i> <i>primaquine phosphate - Tier 1</i> <i>pyrimethamine oral (generic for DARAPRIM) - Tier 1; PA; SP; QL</i>	

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Preferred Agents	Non-Preferred Agents
Antiparasitics - Drugs to Treat Parasitic Infections	
Pediculicides/Scabicides - Scabies and Lice Drugs	
<i>lice killing (generic for RID LICE KILLING SHAMPOO) - Tier 1; QL</i> <i>lice killing max st external shampoo 0.33-4 % (generic for RID LICE KILLING SHAMPOO) - Tier 1; QL</i> <i>lice killing max strength (generic for RID LICE KILLING SHAMPOO) - Tier 1; QL</i> <i>lice killing maximum strength (generic for RID LICE KILLING SHAMPOO) - Tier 1; QL</i> <i>lice maximum strength (generic for RID LICE KILLING SHAMPOO) - Tier 1; QL</i> <i>lice treatment external shampoo 0.33-4 % (generic for RID LICE KILLING SHAMPOO) - Tier 1; QL</i> <i>sb lice killing max st (generic for RID LICE KILLING SHAMPOO) - Tier 1; QL</i>	
Antiparkinson Agents	
Anticholinergics	
<i>benztropine mesylate oral - Tier 1; QL</i> <i>trihexyphenidyl hcl - Tier 1; QL</i>	
Antiparkinson Agents, Other	
<i>amantadine hcl oral capsule - Tier 1; QL</i> <i>amantadine hcl oral solution - Tier 1; QL</i> <i>entacapone (generic for COMTAN) - Tier 1; QL</i> <i>tolcapone (generic for TASMAR) - Tier 1; QL</i>	<i>COMTAN (brand for entacapone) - Tier 2; PA; QL</i> <i>GOCOVRI - Tier 2; PA; QL</i> <i>NOURIANZ - Tier 2; PA; QL</i> <i>ONGENTYS - Tier 2; PA; QL</i> <i>OSMOLEX ER - Tier 2; PA; QL</i> <i>TASMAR (brand for tolcapone) - Tier 2; PA; QL</i>

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Preferred Agents	Non-Preferred Agents
Dopamine Agonists	
<i>pramipexole dihydrochloride oral tablet 0.125 mg, 0.25 mg, 0.5 mg, 1 mg, 1.5 mg - Tier 1; QL</i> <i>pramipexole dihydrochloride oral tablet 0.75 mg - Tier 1</i> <i>ropinirole hcl - Tier 1; QL</i>	<i>APOKYN (brand for apomorphine hcl) - Tier 2; PA; SP; QL</i> <i>NEUPRO - Tier 2; PA; QL</i>
Dopamine Precursors and/or L-Amino Acid Decarboxylase Inhibitors	
<i>carbidopa-levodopa er - Tier 1; QL</i> <i>carbidopa-levodopa oral tablet (generic for DHIVY) - Tier 1; QL</i> <i>DHIVY (brand for carbidopa-levodopa) - Tier 2; QL</i>	<i>carbidopa oral (generic for LODOSYN) - Tier 1; PA; QL</i> <i>DUOPA - Tier 2; PA</i> <i>INBRIJA - Tier 2; PA; SP; QL</i> <i>RYTARY ORAL CAPSULE EXTENDED RELEASE 23.75-95 MG, 36.25-145 MG, 61.25-245 MG - Tier 2; PA</i> <i>RYTARY ORAL CAPSULE EXTENDED RELEASE 48.75-195 MG - Tier 2; PA; QL</i> <i>SINEMET (brand for carbidopa-levodopa) - Tier 2; PA; QL</i>
Monoamine Oxidase B (MAO-B) Inhibitors	
<i>selegiline hcl oral - Tier 1; QL</i>	
Antipsychotics	
1st Generation/Typical	
<i>chlorpromazine hcl oral tablet - Tier 1; QL</i> <i>fluphenazine decanoate injection - Tier 1; QL</i> <i>fluphenazine hcl injection - Tier 1; QL</i> <i>fluphenazine hcl oral concentrate - Tier 1; QL</i> <i>fluphenazine hcl oral elixir - Tier 1</i> <i>fluphenazine hcl oral tablet - Tier 1; QL</i> <i>haloperidol decanoate intramuscular (generic for HALDOL DECANOATE) - Tier 1; QL</i>	

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Preferred Agents	Non-Preferred Agents
<p>haloperidol oral - Tier 1; QL loxapine succinate - Tier 1; QL pimozide - Tier 1; QL; AL thioridazine hcl oral - Tier 1; QL thiothixene - Tier 1; QL trifluoperazine hcl - Tier 1; QL</p>	
2nd Generation/Atypical	
<p>ABILIFY MAINTENA - Tier 2; DX2RX; ST; ^; QL; AL aripiprazole oral tablet (generic for ABILIFY) - Tier 1; QL; AL ARISTADA - Tier 2; DX2RX; ST; ^; QL; AL INVEGA HAFYERA - Tier 2; PA; ^; QL; AL INVEGA SUSTENNA - Tier 2; DX2RX; ST; ^; QL; AL INVEGA TRINZA - Tier 2; DX2RX; ST; ^; QL; AL lurasidone hcl (generic for LATUDA) - Tier 1; QL; AL olanzapine intramuscular (generic for ZYPREXA) - Tier 1; ^ olanzapine oral tablet (generic for ZYPREXA) - Tier 1; QL; AL PERSERIS - Tier 2; DX2RX; ST; ^; QL; AL quetiapine fumarate er (generic for SEROQUEL XR) - Tier 1; ^; AL quetiapine fumarate oral tablet 100 mg, 200 mg, 25 mg, 300 mg, 400 mg, 50 mg (generic for SEROQUEL) - Tier 1; QL; AL quetiapine fumarate oral tablet 150 mg - Tier 1; ^; AL RISPERDAL CONSTA - Tier 2; DX2RX; ST; ^; QL; AL risperidone oral solution (generic for RISPERDAL) - Tier 1; Members >= 8 years of age will require PA; QL; AL risperidone oral tablet (generic for RISPERDAL) - Tier 1; QL; AL ziprasidone hcl (generic for GEODON) - Tier 1; QL; AL</p>	<p>ABILIFY (brand for aripiprazole) - Tier 2; PA; QL; AL aripiprazole oral solution - Tier 1; DX2RX; ^; QL; AL aripiprazole oral tablet dispersible - Tier 1; DX2RX; ^; QL; AL ARISTADA INITIO - Tier 2; DX2RX; ^; QL; AL CAPLYTA - Tier 2; PA; ^; QL; AL FANAPT - Tier 2; DX2RX; ^; QL; AL FANAPT TITRATION PACK - Tier 2; DX2RX; ^; QL; AL GEODON ORAL (brand for ziprasidone hcl) - Tier 2; PA; QL; AL INVEGA (brand for paliperidone er) - Tier 2; DX2RX; ^; QL; AL LATUDA (brand for lurasidone hcl) - Tier 2; PA; QL; AL LYBALVI - Tier 2; PA; ^; QL; AL olanzapine oral tablet dispersible (generic for ZYPREXA ZYDIS) - Tier 1; DX2RX; ^; QL; AL paliperidone er (generic for INVEGA) - Tier 1; DX2RX; ^; QL; AL REXULTI - Tier 2; DX2RX; ^; QL; AL RISPERDAL ORAL SOLUTION (brand for risperidone) - Tier 2; PA; Members >= 8 years of age will require PA; QL; AL RISPERDAL ORAL TABLET (brand for risperidone) - Tier 2; PA; QL; AL risperidone oral tablet dispersible - Tier 1; DX2RX; ^; QL; AL SAPHRIS (brand for asenapine maleate) - Tier 2; DX2RX; ^; QL; AL SEROQUEL (brand for quetiapine fumarate) - Tier 2; PA; QL; AL SEROQUEL XR (brand for quetiapine fumarate er) - Tier 2; PA; ^; AL VRAYLAR - Tier 2; DX2RX; ^; QL; AL ZYPREXA ORAL (brand for olanzapine) - Tier 2; PA; QL; AL ZYPREXA ZYDIS (brand for olanzapine) - Tier 2; DX2RX; ^; QL; AL</p>

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Preferred Agents	Non-Preferred Agents
Treatment-Resistant	
<i>clozapine oral tablet 100 mg, 25 mg, 50 mg (generic for CLOZARIL) - Tier 1; QL; AL</i> <i>clozapine oral tablet 200 mg (generic for CLOZARIL) - Tier 1; ^; AL</i>	CLOZARIL ORAL TABLET 100 MG, 25 MG, 50 MG (brand for clozapine) - Tier 2; PA; QL; AL CLOZARIL ORAL TABLET 200 MG (brand for clozapine) - Tier 2; PA; ^; AL VERSACLOZ - Tier 2; DX2RX; ^; QL; AL
Antispasmodics, Urinary - Bladder Control Drugs	
Genitourinary Agents - Drugs to Treat Bladder, Genital and Kidney Conditions	
	GEMTESA - Tier 2; PA; QL
Antispasticity Agents	
<i>baclofen oral tablet - Tier 1; QL</i> <i>dantrolene sodium oral (generic for DANTRIUM) - Tier 1; QL</i> <i>tizanidine hcl oral tablet (generic for ZANAFLEX) - Tier 1; QL</i>	ZANAFLEX ORAL CAPSULE 2 MG (brand for tizanidine hcl) - Tier 2; PA; QL ZANAFLEX ORAL CAPSULE 4 MG, 6 MG (brand for tizanidine hcl) - Tier 2; PA ZANAFLEX ORAL TABLET (brand for tizanidine hcl) - Tier 2; PA; QL
Antivirals	
Anti-cytomegalovirus (CMV) Agents	
<i>valganciclovir hcl oral tablet (generic for VALCYTE) - Tier 1; QL</i>	
Anti-hepatitis B (HBV) Agents	
BARACLUDE ORAL SOLUTION - Tier 2; SP; QL <i>entecavir (generic for BARACLUDE) - Tier 1; SP; QL</i> <i>lamivudine oral tablet 100 mg - Tier 1; SP; QL</i>	VEMLIDY - Tier 2; PA; SP; QL
Anti-hepatitis C (HCV) Agents	

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Preferred Agents	Non-Preferred Agents
MAVYRET ORAL PACKET - Tier 2; PA; QL MAVYRET ORAL TABLET - Tier 2; PA; Preferred for Genotypes 1, 2, 3, 4, 5, & 6; QL <i>ribavirin oral</i> - Tier 1; QL SOFOSBUVIR-VELPATASVIR (brand for sofosbuvir-velpatasvir) - Tier 2; PA; QL ZEPATIER - Tier 2; PA; QL	EPCLUSA (brand for sofosbuvir-velpatasvir) - Tier 2; PA; QL HARVONI (brand for ledipasvir-sofosbuvir) - Tier 2; PA; QL LEDIPASVIR-SOFOSBUVIR (brand for ledipasvir-sofosbuvir) - Tier 2; PA; QL SOVALDI - Tier 2; PA; QL VOSEVI - Tier 2; PA; QL

Antiherpetic Agents

<i>acyclovir oral</i> - Tier 1; QL <i>valacyclovir hcl oral</i> (generic for VALTREX) - Tier 1; QL	
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Anti-HIV Agents, Integrase Inhibitors (INSTI)

BIKTARVY ORAL TABLET 30-120-15 MG - Tier 2 BIKTARVY ORAL TABLET 50-200-25 MG - Tier 2; QL DOVATO - Tier 2; QL GENVOYA - Tier 2; QL ISENTRESS HD - Tier 2; QL ISENTRESS ORAL PACKET - Tier 2; Members >= 2 years of age will require PA; QL; AL ISENTRESS ORAL TABLET - Tier 2; QL ISENTRESS ORAL TABLET CHEWABLE - Tier 2; QL JULUCA - Tier 2; QL STRIBILD - Tier 2; QL TIVICAY - Tier 2; QL TIVICAY PD - Tier 2; QL; AL	
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Anti-HIV Agents, Non-nucleoside Reverse Transcriptase Inhibitors (NNRTI)

COMPLERA - Tier 2; QL DELSTRIGO - Tier 2; QL	SYMFI (brand for efavirenz-lamivudine-tenofovir) - Tier 2; PA; QL SYMFI LO (brand for efavirenz-lamivudine-tenofovir) - Tier 2; PA; QL
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Preferred Agents	Non-Preferred Agents
<p>EDURANT - Tier 2; QL efavirenz (generic for SUSTIVA) - Tier 1; QL efavirenz-emtricitab-tenofo df (generic for ATRIPLA) - Tier 1; QL efavirenz-lamivudine-tenofovir (generic for SYMFI) - Tier 1; QL etravirine (generic for INTELENCE) - Tier 1; QL INTELENCE ORAL TABLET 25 MG - Tier 2; QL nevirapine - Tier 1; QL nevirapine er - Tier 1; QL PIFELTRO - Tier 2; QL</p>	
<p>Anti-HIV Agents, Nucleoside and Nucleotide Reverse Transcriptase Inhibitors (NRTI)</p>	
<p>abacavir sulfate (generic for ZIAGEN) - Tier 1; QL abacavir sulfate-lamivudine (generic for EPZICOM) - Tier 1; QL CIMDUO - Tier 2; QL DESCOVY - Tier 2; QL emtricitabine (generic for EMTRIVA) - Tier 1; QL emtricitabine-tenofovir df (generic for TRUVADA) - Tier 1; QL EMTRIVA ORAL SOLUTION - Tier 2; QL lamivudine oral solution (generic for EPIVIR) - Tier 1; QL lamivudine oral tablet 150 mg, 300 mg (generic for EPIVIR) - Tier 1; QL lamivudine-zidovudine (generic for COMBIVIR) - Tier 1; QL ODEFSEY - Tier 2; QL tenofovir disoproxil fumarate (generic for VIREAD) - Tier 1; QL TRIUMEQ - Tier 2; QL TRIUMEQ PD - Tier 2; QL TRIZIVIR ORAL TABLET 300-150-300 MG - Tier 2; QL VIREAD ORAL POWDER - Tier 2; QL VIREAD ORAL TABLET 150 MG, 200 MG, 250 MG - Tier 2; QL zidovudine (generic for RETROVIR) - Tier 1; QL</p>	<p>TRUVADA (brand for emtricitabine-tenofovir df) - Tier 2; PA; QL</p>
<p>Anti-HIV Agents, Other</p>	

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Preferred Agents	Non-Preferred Agents
FUZEON - Tier 2; QL <i>maraviroc (generic for SELZENTRY) - Tier 1; QL</i> RUKOBIA - Tier 2; QL SELZENTRY ORAL SOLUTION - Tier 2; QL SELZENTRY ORAL TABLET 25 MG, 75 MG - Tier 2; QL TYBOST - Tier 2; QL	
Anti-HIV Agents, Protease Inhibitors (PI)	
APTIVUS - Tier 2; QL <i>atazanavir sulfate (generic for REYATAZ) - Tier 1; QL</i> EVOTAZ - Tier 2; QL <i>fosamprenavir calcium (generic for LEXIVA) - Tier 1; QL</i> LEXIVA ORAL SUSPENSION - Tier 2; QL <i>lopinavir-ritonavir (generic for KALETRA) - Tier 1; QL</i> NORVIR ORAL PACKET - Tier 2; QL PREZCOBIX - Tier 2; QL REYATAZ ORAL PACKET - Tier 2; Members >= 8 years of age will require PA; QL; AL <i>ritonavir (generic for NORVIR) - Tier 1; QL</i> SYMTUZA - Tier 2; QL VIRACEPT - Tier 2; QL	<i>KALETRA (brand for lopinavir-ritonavir) - Tier 2; PA; QL</i> <i>REYATAZ ORAL CAPSULE (brand for atazanavir sulfate) - Tier 2; PA; QL</i>
Anti-influenza Agents	
<i>oseltamivir phosphate oral capsule (generic for TAMIFLU) - Tier 1; QL</i> <i>oseltamivir phosphate oral suspension reconstituted (generic for TAMIFLU) - Tier 1; QL; AL</i> RELENZA DISKHALER - Tier 2; QL <i>rimantadine hcl - Tier 1; QL</i>	<i>TAMIFLU ORAL CAPSULE (brand for oseltamivir phosphate) - Tier 2; PA; QL</i> <i>TAMIFLU ORAL SUSPENSION RECONSTITUTED (brand for oseltamivir phosphate) - Tier 2; PA; QL; AL</i> XOFLUZA (40 MG DOSE) - Tier 2; PA; QL XOFLUZA (80 MG DOSE) - Tier 2; PA; QL
Antivirals - Drugs to Treat Viral Infections	

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Preferred Agents	Non-Preferred Agents
Antivirals	
LAGEVRIO - Tier 2; QL PAXLOVID (150/100) - Tier 2; QL PAXLOVID (300/100) - Tier 2; QL	
Anxiolytics	
Anxiolytics, Other	
<i>buspirone hcl oral - Tier 1; QL</i> <i>hydroxyzine hcl oral - Tier 1; QL</i> <i>hydroxyzine pamoate oral (generic for VISTARIL) - Tier 1; QL</i>	
Benzodiazepines	
<i>alprazolam oral tablet (generic for XANAX) - Tier 1; QL</i> <i>chlordiazepoxide hcl - Tier 1; QL</i> <i>clonazepam oral tablet (generic for KLONOPIN) - Tier 1; QL</i> <i>clorazepate dipotassium - Tier 1; QL</i> <i>diazepam oral solution - Tier 1; QL</i> <i>diazepam oral tablet (generic for VALIUM) - Tier 1; QL</i> <i>lorazepam injection solution 2 mg/ml (generic for ATIVAN) - Tier 1; ^; QL</i> <i>lorazepam injection solution 4 mg/ml (generic for ATIVAN) - Tier 1; ^</i> <i>lorazepam oral tablet (generic for ATIVAN) - Tier 1; QL</i> <i>oxazepam - Tier 1; QL</i>	LOREEV XR - Tier 2; PA; ^; QL
Anxiolytics - Drugs to Treat Anxiety	
Benzodiazepines - Anxiety Drugs	
	<i>DORAL (brand for quazepam) - Tier 2; PA; QL</i> <i>quazepam (generic for DORAL) - Tier 1; PA; QL</i>

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Preferred Agents	Non-Preferred Agents
Attention Deficit Hyperactivity Disorder Agents, Non-amphetamines - ADHD Drugs	
Central Nervous System Agents - Drugs to Treat Nerve Conditions	
	QELBREE - Tier 2; PA; ^; QL; AL
Bipolar Agents	
Mood Stabilizers	
<i>divalproex sodium er (generic for DEPAKOTE ER) - Tier 1; *, QL</i> <i>divalproex sodium oral capsule delayed release sprinkle (generic for DEPAKOTE SPRINKLES) - Tier 1; Members >= 8 years of age will require PA; QL; AL</i> <i>divalproex sodium oral tablet delayed release (generic for DEPAKOTE) - Tier 1; Minimum age of 2 years; QL</i> <i>lithium - Tier 1; QL</i> <i>lithium carbonate er (generic for LITHOBID) - Tier 1; QL</i> <i>lithium carbonate oral - Tier 1; QL</i>	
Blood Glucose Regulators	
Antidiabetic Agents	
<i>acarbose oral - Tier 1; QL</i> <i>ALOGLIPTIN BENZOATE (brand for alogliptin benzoate) - Tier 2; ST; QL</i> <i>ALOGLIPTIN-METFORMIN HCL (brand for alogliptin-metformin hcl) - Tier 2; ST; QL</i> <i>ALOGLIPTIN-PIOGLITAZONE (brand for alogliptin-pioglitazone) - Tier 2; ST; QL</i> <i>FARXIGA - Tier 2; PA; QL</i> <i>glimepiride - Tier 1; QL</i> <i>glipizide er (generic for GLUCOTROL XL) - Tier 1; QL</i> <i>glipizide oral tablet 10 mg, 5 mg - Tier 1; QL</i>	BYDUREON BCISE AUTOINJECTOR - Tier 2; PA; QL BYETTA 10 MCG PEN - Tier 2; PA; QL BYETTA 5 MCG PEN - Tier 2; PA; QL GLYXAMBI - Tier 2; PA INVOKAMET - Tier 2; PA; QL INVOKAMET XR - Tier 2; PA; QL INVOKANA - Tier 2; PA; QL JANUMET - Tier 2; PA; QL JANUMET XR - Tier 2; PA; QL JANUVIA - Tier 2; PA; QL JARDIANCE - Tier 2; PA; QL

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Preferred Agents	Non-Preferred Agents
<p> <i>glipizide xl (generic for GLUCOTROL XL) - Tier 1; QL</i> <i>glyburide micronized (generic for GLYNASE) - Tier 1; QL</i> <i>glyburide oral - Tier 1; QL</i> <i>glyburide-metformin - Tier 1; QL</i> <i>metformin hcl er (osm) - Tier 1; PA; QL</i> <i>metformin hcl er oral tablet extended release 24 hour 500 mg - Tier 1; QL</i> <i>metformin hcl er oral tablet extended release 24 hour 750 mg - Tier 1</i> <i>metformin hcl oral tablet 1000 mg, 500 mg, 850 mg - Tier 1; QL</i> <i>nateglinide - Tier 1; QL</i> OZEMPIC - Tier 2; PA; QL OZEMPIC (2 MG/DOSE) - Tier 2; PA; QL <i>pioglitazone hcl (generic for ACTOS) - Tier 1; QL</i> <i>repaglinide - Tier 1; QL</i> RYBELSUS - Tier 2; PA; QL <i>saxagliptin hcl (generic for ONGLYZA) - Tier 1; QL</i> SEGLUROMET - Tier 2; ST; QL SOLIQUA - Tier 2; ST; QL STEGLATRO - Tier 2; ST; QL VICTOZA SOLUTION PEN-INJECTOR 18 MG/3ML SUBCUTANEOUS - Tier 2; PA; QL VICTOZA SOLUTION PEN-INJECTOR 18 MG/3ML SUBCUTANEOUS - Tier 2; PA; ST; QL </p>	<p> JENTADUETO - Tier 2; PA; QL JENTADUETO XR - Tier 2; PA; QL KAZANO (brand for alogliptin-metformin hcl) - Tier 2; PA; ST; QL KOMBIGLYZE XR (brand for saxagliptin-metformin er) - Tier 2; PA; QL NESINA (brand for alogliptin benzoate) - Tier 2; PA; ST; QL ONGLYZA (brand for saxagliptin hcl) - Tier 2; PA; QL OSENl (brand for alogliptin-pioglitazone) - Tier 2; PA; ST; QL QTERN - Tier 2; PA; QL STEGLUJAN - Tier 2; PA; QL SYMLINPEN 120 - Tier 2; PA; QL SYMLINPEN 60 - Tier 2; PA; QL SYNJARDY - Tier 2; PA; QL SYNJARDY XR - Tier 2; PA; QL TRADJENTA - Tier 2; PA; QL TRIJARDY XR - Tier 2; PA; QL TRULICITY - Tier 2; PA; QL XIGDUO XR ORAL TABLET EXTENDED RELEASE 24 HOUR 10-1000 MG, 10-500 MG - Tier 2; PA XIGDUO XR ORAL TABLET EXTENDED RELEASE 24 HOUR 2.5-1000 MG, 5-1000 MG, 5-500 MG - Tier 2; PA; QL XULTOPHY - Tier 2; PA; QL </p>

Glycemic Agents

<p> BAQSIMI ONE PACK - Tier 2; QL BAQSIMI TWO PACK - Tier 2; QL GLUCAGEN HYPOKIT - Tier 2; QL GLUCAGON EMERGENCY INJECTION SOLUTION RECONSTITUTED - Tier 2; QL <i>glucagon emergency kit 1 mg injection - Tier 1; QL</i> GVOKE HYPOPEN 1-PACK - Tier 2; QL GVOKE HYPOPEN 2-PACK - Tier 2; QL GVOKE KIT - Tier 2; QL </p>	<p> GLUCAGON EMERGENCY KIT 1 MG INJECTION - Tier 2; PA; QL </p>
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Preferred Agents	Non-Preferred Agents
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GVOKE PFS - Tier 2; QL	
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Insulins	
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<p>HUMALOG MIX 50/50 - Tier 2; QL HUMULIN 70/30 VIAL - Tier 2; QL HUMULIN N VIAL - Tier 2; QL HUMULIN R VIAL - Tier 2; QL INSULIN ASPART PROT & ASPART (brand for insulin aspart prot & aspart) - Tier 2; QL INSULIN LISPRO (brand for insulin lispro) - Tier 2; QL INSULIN LISPRO (1 UNIT DIAL) (brand for insulin lispro (1 unit dial)) - Tier 2; ST; QL INSULIN LISPRO JUNIOR KWIKPEN (brand for insulin lispro junior kwikpen) - Tier 2; ST; QL INSULIN LISPRO PROT & LISPRO (brand for insulin lispro prot & lispro) - Tier 2; QL LANTUS SOLOSTAR (brand for insulin glargine solostar) - Tier 2; QL LANTUS U-100 VIAL (brand for insulin glargine) - Tier 2; QL NOVOLIN 70/30 RELION - Tier 2; QL NOVOLIN 70/30 VIAL - Tier 2; QL NOVOLIN N RELION - Tier 2; QL NOVOLIN N VIAL - Tier 2; QL NOVOLIN R RELION - Tier 2; QL NOVOLIN R VIAL - Tier 2; QL NOVOLOG FLEXPEN RELION (brand for insulin aspart flexpen) - Tier 2; QL NOVOLOG RELION (brand for insulin aspart) - Tier 2; QL</p>	<p>ADMELOG (brand for insulin lispro) - Tier 2; PA; QL ADMELOG SOLOSTAR (brand for insulin lispro (1 unit dial)) - Tier 2; PA; ST; QL AFREZZA - Tier 2; PA; QL APIDRA SOLOSTAR - Tier 2; PA; QL APIDRA VIAL - Tier 2; PA; QL BASAGLAR KWIKPEN (brand for insulin glargine solostar) - Tier 2; PA; QL FIASP - Tier 2; PA; QL FIASP FLEXTOUCH - Tier 2; PA; QL FIASP PENFILL - Tier 2; PA; QL HUMALOG (brand for insulin lispro) - Tier 2; PA; QL HUMALOG JUNIOR KWIKPEN (brand for insulin lispro junior kwikpen) - Tier 2; PA; ST; QL HUMALOG KWIKPEN SUBCUTANEOUS SOLUTION PEN-INJECTOR 100 UNIT/ML (brand for insulin lispro (1 unit dial)) - Tier 2; PA; ST; QL HUMALOG KWIKPEN SUBCUTANEOUS SOLUTION PEN-INJECTOR 200 UNIT/ML - Tier 2; PA; QL HUMALOG MIX 50/50 KWIKPEN - Tier 2; PA; QL HUMALOG MIX 75/25 - Tier 2; PA; QL HUMALOG MIX 75/25 KWIKPEN (brand for insulin lispro prot & lispro) - Tier 2; PA; QL HUMULIN 70/30 KWIKPEN - Tier 2; PA; QL HUMULIN N KWIKPEN - Tier 2; PA; QL HUMULIN R U-500 KWIKPEN - Tier 2; PA; QL HUMULIN R U-500 VIAL (CONCENTRATED) - Tier 2; PA; QL INSULIN ASPART (brand for insulin aspart) - Tier 2; PA; QL INSULIN GLARGINE (brand for insulin glargine) - Tier 2; PA; QL INSULIN GLARGINE SOLOSTAR (brand for insulin glargine solostar) - Tier 2; PA; QL INSULIN GLARGINE-YFGN (brand for insulin glargine-yfgn) - Tier 2; PA; QL</p>
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Tier 1: Generic; Tier 2: Brand; ^: Medical Office Attestation Needed if Prescribed by Behavioral Health Provider, Full Prior Authorization Needed if Prescribed by Non-Behavioral Health Provider; *: Available without PA for participating Behavioral Health Prescribers; AL: Limited to members of a certain age; DX2RX: Diagnosis Required; GE: Gender Limit; PA: Prior Auth Required; QL: Quantity Limit; SP: Specialty Medication; ST: Step Therapy

Preferred Agents	Non-Preferred Agents
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LEVEMIR FLEXPEN - Tier 2; PA; QL
 LEVEMIR U-100 VIAL - Tier 2; PA; QL
 LYUMJEV - Tier 2; PA; QL
 LYUMJEV KWIKPEN - Tier 2; PA; QL
 NOVOLIN 70/30 FLEXPEN - Tier 2; PA; QL
 NOVOLIN N FLEXPEN - Tier 2; PA; QL
 NOVOLIN R FLEXPEN - Tier 2; PA; QL
 NOVOLOG FLEXPEN (brand for insulin aspart flexpen) - Tier 2; PA; QL
 NOVOLOG MIX 70/30 FLEXPEN (brand for insulin asp prot & asp flexpen) - Tier 2; PA; QL
 NOVOLOG MIX 70/30 VIAL (brand for insulin aspart prot & aspart) - Tier 2; PA; QL
 NOVOLOG PENFILL (brand for insulin aspart penfill) - Tier 2; PA; QL
 NOVOLOG U-100 VIAL (brand for insulin aspart) - Tier 2; PA; QL
 SEMGLEE (YFGN) (brand for insulin glargine-yfgn) - Tier 2; PA; QL
 TOUJEO MAX SOLOSTAR - Tier 2; PA; QL
 TOUJEO SOLOSTAR - Tier 2; PA; QL
 TRESIBA (brand for insulin degludec) - Tier 2; PA; QL
 TRESIBA FLEXTOUCH (brand for insulin degludec flextouch) - Tier 2; PA; QL

Blood Glucose Regulators - Drugs to Regulate Blood Sugar	
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Glycemic Agents - Diabetic Drugs	
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GLUCO TO GO (brand for cvs glucose) - Tier 2; QL
 glucose oral tablet chewable 4 gm (generic for GLUCO TO GO) - Tier 1; QL
 soft glucose (generic for GLUCO TO GO) - Tier 1; QL
 TRUEPLUS GLUCOSE ON THE GO (brand for cvs glucose) - Tier 2; QL
 TRUEPLUS GLUCOSE ORAL TABLET CHEWABLE (brand for cvs glucose) - Tier 2; QL

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Preferred Agents	Non-Preferred Agents
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Insulins - Diabetic Drugs

CAREPOINT POLY HUB NEEDLE 18G X 1" (brand for carepoint poly hub needle) - Tier 2; QL
 MONOJECT HYPODERMIC NEEDLE 18G X 1" (brand for carepoint poly hub needle) - Tier 2; QL
 NOKOR VENTED NEEDLE (brand for carepoint poly hub needle) - Tier 2; QL
 REZVOGLAR KWIKPEN - Tier 2; QL

Blood Products and Modifiers

Anticoagulants

ELIQUIS - Tier 2; QL
 ELIQUIS DVT/PE STARTER PACK - Tier 2; QL
 enoxaparin sodium (generic for LOVENOX) - Tier 1; QL
 heparin sodium (porcine) - Tier 1; QL
 heparin sodium (porcine) pf injection solution 5000 unit/0.5ml - Tier 1; QL
 heparin sodium (porcine) pf injection solution 5000 unit/ml - Tier 1
 jantoven oral tablet 1 mg, 10 mg, 2 mg, 2.5 mg, 3 mg, 4 mg, 5 mg, 7.5 mg (generic for JANTOVEN) - Tier 1; QL
 jantoven oral tablet 6 mg (generic for JANTOVEN) - Tier 1
 SAVAYSA - Tier 2; QL
 warfarin sodium oral tablet 1 mg, 10 mg, 2 mg, 2.5 mg, 3 mg, 4 mg, 5 mg, 7.5 mg (generic for JANTOVEN) - Tier 1; QL
 warfarin sodium oral tablet 6 mg (generic for JANTOVEN) - Tier 1

PRADAXA ORAL CAPSULE (brand for dabigatran etexilate mesylate) - Tier 2; PA; QL
 PRADAXA ORAL PACKET - Tier 2; PA; QL; AL
 XARELTO - Tier 2; PA; QL
 XARELTO STARTER PACK - Tier 2; PA; QL

Blood Products and Modifiers, Other

anagrelide hcl (generic for AGRYLIN) - Tier 1
 ARANESP (ALBUMIN FREE) INJECTION SOLUTION - Tier 2; PA; SP
 ARANESP (ALBUMIN FREE) INJECTION SOLUTION PREFILLED SYRINGE 10 MCG/0.4ML - Tier 2; PA; SP; QL

EPOGEN - Tier 2; PA; SP
 FULPHILA - Tier 2; PA; SP
 GRANIX - Tier 2; PA; SP
 NEUPOGEN INJECTION SOLUTION 300 MCG/ML - Tier 2; PA; SP

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Preferred Agents	Non-Preferred Agents
<p>ARANESP (ALBUMIN FREE) INJECTION SOLUTION PREFILLED SYRINGE 100 MCG/0.5ML, 150 MCG/0.3ML, 200 MCG/0.4ML, 25 MCG/0.42ML, 300 MCG/0.6ML, 40 MCG/0.4ML, 500 MCG/ML, 60 MCG/0.3ML - Tier 2; PA; SP</p> <p>DROXIA ORAL CAPSULE 200 MG, 300 MG - Tier 2</p> <p>DROXIA ORAL CAPSULE 400 MG - Tier 2; QL</p> <p>LEUKINE - Tier 2; PA; SP</p> <p>MULPLETA - Tier 2; PA; SP; QL</p> <p>NEULASTA - Tier 2; PA; SP</p> <p>NEULASTA ONPRO - Tier 2; PA; SP</p> <p><i>plerixafor (generic for MOZOBIL)</i> - Tier 1; PA; SP; QL</p> <p>PROMACTA - Tier 2; PA; SP; QL</p> <p>RETACRIT - Tier 2; PA; SP</p> <p>ZARXIO - Tier 2; PA; SP</p> <p>ZIEXTENZO - Tier 2; PA; SP</p>	<p>NEUPOGEN INJECTION SOLUTION 480 MCG/1.6ML - Tier 2; PA; SP; QL</p> <p>NEUPOGEN INJECTION SOLUTION PREFILLED SYRINGE - Tier 2; PA; SP</p> <p>NIVESTYM - Tier 2; PA; SP</p> <p>NYVEPRIA - Tier 2; PA; SP</p> <p>OXBRYTA ORAL TABLET 300 MG - Tier 2; PA; SP; QL; AL</p> <p>OXBRYTA ORAL TABLET 500 MG - Tier 2; PA; QL</p> <p>OXBRYTA ORAL TABLET SOLUBLE - Tier 2; PA; SP; QL</p> <p>PROCRIT - Tier 2; PA; SP</p> <p>SIKLOS - Tier 2; PA; QL</p> <p>UDENYCA SUBCUTANEOUS SOLUTION PREFILLED SYRINGE - Tier 2; PA; SP</p>

Hemostasis Agents

<p><i>aminocaproic acid oral</i> - Tier 1; QL</p> <p><i>tranexamic acid oral</i> - Tier 1; DX2RX; QL</p>	
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Platelet Modifying Agents

<p>BRILINTA - Tier 2; DX2RX; QL</p> <p>CABLIVI - Tier 2; PA; SP; QL</p> <p><i>cilostazol</i> - Tier 1; QL</p> <p><i>clopidogrel bisulfate oral (generic for PLAVIX)</i> - Tier 1; QL</p> <p><i>dipyridamole oral</i> - Tier 1; QL</p> <p><i>prasugrel hcl (generic for EFFIENT)</i> - Tier 1; DX2RX; QL</p>	<p>DOPTELET - Tier 2; PA; SP; QL</p> <p><i>EFFIENT (brand for prasugrel hcl)</i> - Tier 2; DX2RX; QL</p> <p>TAVALISSE - Tier 2; PA; SP; QL</p>
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Blood Products/Modifiers/Volume Expanders - Drugs to Treat Blood Disorders

Anticoagulants - Blood Thinners

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Preferred Agents	Non-Preferred Agents
CATHFLO ACTIVASE - Tier 2	
Hemostasis Agents - Drugs to Stop Bleeding	
HEMLIBRA - Tier 2; PA; SP; QL	
Cardiovascular Agents	
Alpha-adrenergic Agonists	
<i>clonidine hcl oral - Tier 1; QL</i> <i>guanfacine hcl - Tier 1; QL</i> METHYLDOPA - Tier 2; QL <i>midodrine hcl - Tier 1; QL</i>	<i>droxidopa oral capsule 100 mg (generic for NORTHERA) - Tier 1; PA; SP; QL</i>
Alpha-adrenergic Blocking Agents	
<i>doxazosin mesylate oral (generic for CARDURA) - Tier 1; QL</i> <i>prazosin hcl oral (generic for MINIPRESS) - Tier 1; QL</i>	
Angiotensin II Receptor Antagonists	
<i>irbesartan (generic for AVAPRO) - Tier 1; QL</i> <i>losartan potassium oral (generic for COZAAR) - Tier 1; QL</i> <i>olmesartan medoxomil oral (generic for BENICAR) - Tier 1; QL</i> <i>telmisartan (generic for MICARDIS) - Tier 1; QL</i> <i>valsartan oral tablet (generic for DIOVAN) - Tier 1; QL</i>	EDARBI - Tier 2; PA; QL
Angiotensin-converting Enzyme (ACE) Inhibitors	
<i>benazepril hcl oral (generic for LOTENSIN) - Tier 1; QL</i> <i>captopril oral - Tier 1; QL</i> <i>enalapril maleate oral solution (generic for EPANED) - Tier 1; Members >= 8 years of age will require PA; QL; AL</i> <i>enalapril maleate oral tablet (generic for VASOTEC) - Tier 1; QL</i>	

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Preferred Agents	Non-Preferred Agents
<p><i>fosinopril sodium - Tier 1; QL</i> <i>lisinopril oral (generic for ZESTRIL) - Tier 1; QL</i> <i>quinapril hcl (generic for ACCUPRIL) - Tier 1; QL</i> <i>ramipril (generic for ALTACE) - Tier 1; QL</i> <i>trandolapril - Tier 1; QL</i></p>	
Antiarrhythmics	
<p><i>amiodarone hcl oral tablet 200 mg, 400 mg (generic for PACERONE) - Tier 1; QL</i> <i>disopyramide phosphate (generic for NORPACE) - Tier 1; QL</i> <i>dofetilide (generic for TIKOSYN) - Tier 1; QL</i> <i>flecainide acetate - Tier 1; QL</i> <i>mexiletine hcl oral - Tier 1; QL</i> <i>NORPACE CR - Tier 2</i> <i>propafenone hcl - Tier 1; QL</i> <i>quinidine gluconate er - Tier 1; QL</i> <i>quinidine sulfate - Tier 1; QL</i> <i>sotalol hcl (af) (generic for BETAPACE AF) - Tier 1; QL</i> <i>sotalol hcl oral (generic for BETAPACE) - Tier 1; QL</i></p>	<p><i>BETAPACE (brand for sotalol hcl) - Tier 2; PA; QL</i> <i>BETAPACE AF (brand for sotalol hcl (af)) - Tier 2; PA; QL</i> <i>MULTAQ - Tier 2; PA; QL</i> <i>PACERONE (brand for amiodarone hcl) - Tier 2; PA; QL</i> <i>RYTHMOL SR ORAL CAPSULE EXTENDED RELEASE 12 HOUR 225 MG, 325 MG (brand for propafenone hcl er) - Tier 2; PA; QL</i> <i>RYTHMOL SR ORAL CAPSULE EXTENDED RELEASE 12 HOUR 425 MG (brand for propafenone hcl er) - Tier 2; PA</i> <i>TIKOSYN (brand for dofetilide) - Tier 2; PA; QL</i></p>
Beta-adrenergic Blocking Agents	
<p><i>acebutolol hcl oral - Tier 1; QL</i> <i>atenolol oral (generic for TENORMIN) - Tier 1; QL</i> <i>betaxolol hcl oral - Tier 1; QL</i> <i>bisoprolol fumarate oral - Tier 1; QL</i> <i>carvedilol (generic for COREG) - Tier 1; QL</i> <i>labetalol hcl oral - Tier 1; QL</i> <i>metoprolol succinate er (generic for TOPROL XL) - Tier 1; QL</i> <i>metoprolol tartrate oral tablet 100 mg, 50 mg (generic for LOPRESSOR) - Tier 1; QL</i> <i>metoprolol tartrate oral tablet 25 mg - Tier 1; QL</i> <i>metoprolol tartrate oral tablet 37.5 mg, 75 mg - Tier 1</i> <i>nadolol oral (generic for CORGARD) - Tier 1; QL</i></p>	<p><i>HEMANGEOL - Tier 2; PA; QL</i></p>

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Preferred Agents	Non-Preferred Agents
<p><i>propranolol hcl er (generic for INDERAL LA) - Tier 1; QL</i> <i>propranolol hcl oral solution 20 mg/5ml - Tier 1; QL</i> <i>propranolol hcl oral solution 40 mg/5ml - Tier 1</i> <i>propranolol hcl oral tablet - Tier 1; QL</i></p>	
<p>Calcium Channel Blocking Agents, Dihydropyridines</p>	
<p><i>amlodipine besylate oral (generic for NORVASC) - Tier 1; QL</i> <i>felodipine er - Tier 1; QL</i> <i>nifedipine er - Tier 1; QL</i> <i>nifedipine er osmotic release (generic for PROCARDIA XL) - Tier 1; QL</i> <i>nifedipine oral - Tier 1; QL</i> <i>nimodipine oral - Tier 1; QL</i> NYMALIZE - Tier 2; QL</p>	<p>KATERZIA - Tier 2; PA; QL NORLIQVA - Tier 2; PA</p>
<p>Calcium Channel Blocking Agents, Nondihydropyridines</p>	
<p><i>cartia xt (generic for CARTIA XT) - Tier 1; QL</i> <i>diltiazem hcl er beads (generic for TAZTIA XT) - Tier 1; QL</i> <i>diltiazem hcl er coated beads (generic for CARDIZEM CD) - Tier 1; QL</i> <i>diltiazem hcl er oral capsule extended release 12 hour - Tier 1; QL</i> <i>diltiazem hcl er oral capsule extended release 24 hour - Tier 1; QL</i> <i>diltiazem hcl oral (generic for CARDIZEM) - Tier 1; QL</i> <i>dilt-xr - Tier 1; QL</i> <i>taztia xt (generic for TAZTIA XT) - Tier 1; QL</i> <i>tiadylt er (generic for TAZTIA XT) - Tier 1; QL</i> <i>verapamil hcl er oral capsule extended release 24 hour 120 mg, 180 mg, 240 mg, 360 mg (generic for VERELAN) - Tier 1; QL</i> <i>verapamil hcl er oral tablet extended release - Tier 1; QL</i> <i>verapamil hcl oral - Tier 1; QL</i></p>	
<p>Cardiovascular Agents, Other</p>	
<p>ACCURETIC ORAL TABLET 10-12.5 MG - Tier 2; QL <i>acetazolamide er - Tier 1; QL</i></p>	<p><i>BIDIL (brand for isosorb dinitrate-hydralazine) - Tier 2; PA; QL</i> CORLANOR - Tier 2; PA; QL</p>

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Preferred Agents	Non-Preferred Agents
<p>acetazolamide oral - Tier 1; QL amiloride-hydrochlorothiazide - Tier 1; QL atenolol-chlorthalidone (generic for TENORETIC 100) - Tier 1; QL benazepril-hydrochlorothiazide (generic for LOTENSIN HCT) - Tier 1; QL bisoprolol-hydrochlorothiazide - Tier 1; QL captopril-hydrochlorothiazide - Tier 1; QL digoxin oral solution - Tier 1 digoxin oral tablet 125 mcg, 250 mcg (generic for DIGOX) - Tier 1; QL enalapril-hydrochlorothiazide (generic for VASERETIC) - Tier 1; QL ENTRESTO - Tier 2; PA; QL fosinopril sodium-hctz - Tier 1; QL lisinopril-hydrochlorothiazide (generic for ZESTORETIC) - Tier 1; QL losartan potassium-hctz (generic for HYZAAR) - Tier 1; QL pentoxifylline er - Tier 1; QL quinapril-hydrochlorothiazide (generic for ACCURETIC) - Tier 1; QL ranolazine er - Tier 1; QL spironolactone-hctz - Tier 1; QL triamterene-hctz (generic for MAXZIDE) - Tier 1; QL</p>	<p>EDARBYCLOR - Tier 2; PA; QL KERENDIA - Tier 2; PA; QL TEKTURNA (brand for aliskiren fumarate) - Tier 2; PA; QL</p>
Diuretics, Loop	
<p>bumetanide oral (generic for BUMEX) - Tier 1; QL furosemide oral solution 10 mg/ml - Tier 1; QL furosemide oral tablet (generic for LASIX) - Tier 1; QL SOAANZ ORAL TABLET 20 MG (brand for torsemide) - Tier 2; QL torsemide (generic for SOAANZ) - Tier 1; QL</p>	<p>FUROSCIX - Tier 2; PA; QL</p>
Diuretics, Potassium-sparing	
<p>amiloride hcl oral - Tier 1; QL spironolactone oral tablet (generic for ALDACTONE) - Tier 1; QL</p>	
Diuretics, Thiazide	

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Preferred Agents	Non-Preferred Agents
<p><i>chlorthalidone - Tier 1; QL</i> DIURIL - Tier 2; QL <i>hydrochlorothiazide oral capsule - Tier 1; QL</i> <i>hydrochlorothiazide oral tablet 12.5 mg - Tier 1</i> <i>hydrochlorothiazide oral tablet 25 mg, 50 mg - Tier 1; QL</i> <i>indapamide - Tier 1; QL</i> <i>metolazone - Tier 1; QL</i></p>	
Dyslipidemics, Fibric Acid Derivatives	
<p><i>fenofibrate micronized oral capsule 134 mg, 200 mg, 67 mg - Tier 1; QL</i> <i>fenofibrate oral capsule 134 mg, 200 mg, 67 mg - Tier 1; QL</i> <i>fenofibrate oral tablet 145 mg, 48 mg (generic for TRICOR) - Tier 1; QL</i> <i>fenofibrate oral tablet 160 mg, 54 mg - Tier 1; QL</i> <i>gemfibrozil oral (generic for LOPID) - Tier 1; QL</i></p>	<p><i>FENOGLIDE (brand for fenofibrate) - Tier 2; PA; QL</i> <i>LIPOFEN (brand for fenofibrate) - Tier 2; PA</i> <i>TRICOR (brand for fenofibrate) - Tier 2; PA; QL</i> <i>TRILIPIX (brand for fenofibric acid) - Tier 2; PA; QL</i></p>
Dyslipidemics, HMG CoA Reductase Inhibitors	
<p><i>atorvastatin calcium oral (generic for LIPITOR) - Tier 1; QL</i> <i>lovastatin oral - Tier 1; QL; AL</i> <i>pravastatin sodium - Tier 1; QL</i> <i>rosuvastatin calcium (generic for CRESTOR) - Tier 1; QL</i> <i>simvastatin oral (generic for ZOCOR) - Tier 1; QL</i></p>	<p><i>ALTOPREV - Tier 2; PA; QL</i> <i>ATORVALIQ - Tier 2; PA; QL</i> <i>CRESTOR (brand for rosuvastatin calcium) - Tier 2; PA; QL</i> <i>LESCOL XL (brand for fluvastatin sodium er) - Tier 2; PA</i> <i>LIPITOR (brand for atorvastatin calcium) - Tier 2; PA; QL</i> <i>LIVALO (brand for pitavastatin calcium) - Tier 2; PA; QL</i> <i>ZOCOR (brand for simvastatin) - Tier 2; PA; QL</i> <i>ZYPITAMAG - Tier 2; PA; QL</i></p>
Dyslipidemics, Other	
<p><i>cholestyramine light oral powder (generic for PREVALITE) - Tier 1; QL</i> <i>cholestyramine oral powder (generic for QUESTRAN) - Tier 1; Only the bulk products are covered (cans) Individual packets are not covered; QL</i> <i>ezetimibe (generic for ZETIA) - Tier 1; QL</i> <i>niacin (antihyperlipidemic) (generic for NIACOR) - Tier 1; QL</i> <i>niacin er (antihyperlipidemic) - Tier 1; QL</i></p>	<p><i>LOVAZA (brand for omega-3-acid ethyl esters) - Tier 2; PA; QL</i> <i>NEXLETOL - Tier 2; PA; QL</i> <i>NEXLIZET - Tier 2; PA; QL</i> <i>PRALUENT - Tier 2; PA; NDC starting w/72733 Preferred w/PA; SP; QL</i> <i>VASCEPA (brand for icosapent ethyl) - Tier 2; PA; QL</i> <i>VYTORIN (brand for ezetimibe-simvastatin) - Tier 2; PA; QL</i></p>

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Preferred Agents	Non-Preferred Agents
<i>niacor (generic for NIACOR) - Tier 1; QL</i> <i>omega-3-acid ethyl esters (generic for LOVAZA) - Tier 1; PA; QL</i> <i>prevalite oral powder (generic for PREVALITE) - Tier 1; QL</i> REPATHA - Tier 2; PA; NDC starting w/72511 Preferred w/PA; SP; QL	
Vasodilators, Direct-acting Arterial	
<i>hydralazine hcl oral - Tier 1; QL</i> <i>minoxidil oral - Tier 1; QL</i>	
Vasodilators, Direct-acting Arterial/Venous	
<i>isosorbide dinitrate (generic for ISORDIL TITRADOSE) - Tier 1; QL</i> <i>isosorbide mononitrate - Tier 1; QL</i> <i>isosorbide mononitrate er - Tier 1; QL</i> NITRO-BID - Tier 2; QL <i>nitroglycerin sublingual (generic for NITROSTAT) - Tier 1; QL</i> <i>nitroglycerin transdermal (generic for NITRO-DUR) - Tier 1; QL</i> <i>nitroglycerin translingual (generic for NITROLINGUAL) - Tier 1; QL</i> RECTIV - Tier 2; DX2RX; QL	
Cardiovascular Agents, Other - Miscellaneous Cardiac Drugs	
Cardiovascular Agents - Drugs to Treat Heart and Circulation Conditions	
	VERQUVO - Tier 2; PA; QL
Central Nervous System Agents	
Attention Deficit Hyperactivity Disorder Agents, Non-amphetamines	
<i>atomoxetine hcl (generic for STRATTERA) - Tier 1; DX2RX; Dx required for 18 years and older ^; QL; AL</i>	<i>APTENSIO XR (brand for methylphenidate hcl er (xr)) - Tier 2; DX2RX; ^; QL; AL</i>

Tier 1: Generic; Tier 2: Brand; ^: Medical Office Attestation Needed if Prescribed by Behavioral Health Provider, Full Prior Authorization Needed if Prescribed by Non-Behavioral Health Provider; *: Available without PA for participating Behavioral Health Prescribers; AL: Limited to members of a certain age; DX2RX: Diagnosis Required; GE: Gender Limit; PA: Prior Auth Required; QL: Quantity Limit; SP: Specialty Medication; ST: Step Therapy

Preferred Agents	Non-Preferred Agents
<p>CONCERTA (brand for methylphenidate hcl er (osm)) - Tier 2; DX2RX; Dx required for 18 years and older ^; QL; AL</p> <p>dexmethylphenidate hcl (generic for FOCALIN) - Tier 1; DX2RX; Dx required for 18 years and older ^; QL; AL</p> <p>dexmethylphenidate hcl er (generic for FOCALIN XR) - Tier 1; DX2RX; Dx required for 18 years and older ^; QL; AL</p> <p>guanfacine hcl er (generic for INTUNIV) - Tier 1; DX2RX; Dx required for 18 years and older ^; QL; AL</p> <p>methylphenidate hcl er (cd) - Tier 1; DX2RX; Dx required for 18 years and older ^; QL; AL</p> <p>methylphenidate hcl er (la) oral capsule extended release 24 hour 20 mg, 30 mg, 40 mg (generic for RITALIN LA) - Tier 1; DX2RX; Dx required for 18 years and older ^; QL; AL</p> <p>methylphenidate hcl er (osm) oral tablet extended release 18 mg, 27 mg, 36 mg, 54 mg (generic for CONCERTA) - Tier 1; DX2RX; Dx required for 18 years and older ^; QL; AL</p> <p>methylphenidate hcl er oral tablet extended release - Tier 1; DX2RX; Dx required for 18 years and older ^; QL; AL</p> <p>methylphenidate hcl er oral tablet extended release 24 hour - Tier 1; DX2RX; Medical office attestation needed if prescribed by behavioral health provider Full Prior Authorization needed if prescribed by non-behavioral health provider|Mallinckrodt and Kremers Urban labelers; Dx required for 18 years and older ^; QL; AL</p> <p>methylphenidate hcl oral tablet (generic for RITALIN) - Tier 1; DX2RX; Dx required for 18 years and older ^; QL; AL</p> <p>RELEXXII ORAL TABLET EXTENDED RELEASE 18 MG, 27 MG, 36 MG, 54 MG (brand for methylphenidate hcl er (osm)) - Tier 2; DX2RX; Dx required for 18 years and older ^; QL; AL</p>	<p>DAYTRANA (brand for methylphenidate) - Tier 2; DX2RX; ^; QL; AL</p> <p>FOCALIN (brand for dexmethylphenidate hcl) - Tier 2; DX2RX; ^; QL; AL</p> <p>INTUNIV (brand for guanfacine hcl er) - Tier 2; DX2RX; ^; QL; AL</p> <p>JORNAY PM - Tier 2; PA; ^; QL; AL</p> <p>KAPVAY (brand for clonidine hcl er) - Tier 2; DX2RX; ^; QL; AL</p> <p>METHYLIN (brand for methylphenidate hcl) - Tier 2; DX2RX; ^; QL; AL</p> <p>RELEXXII ORAL TABLET EXTENDED RELEASE 45 MG, 63 MG (brand for methylphenidate hcl er (osm)) - Tier 2; PA; ^; QL; AL</p> <p>RELEXXII ORAL TABLET EXTENDED RELEASE 72 MG (brand for methylphenidate hcl er (osm)) - Tier 2; DX2RX; ^; QL; AL</p> <p>RITALIN (brand for methylphenidate hcl) - Tier 2; DX2RX; ^; QL; AL</p> <p>STRATTERA (brand for atomoxetine hcl) - Tier 2; DX2RX; ^; QL; AL</p>

Attention Deficit Hyperactivity Disorder Agents, Amphetamines

<p>amphetamine-dextroamphetamine (generic for ADDERALL) - Tier 1; DX2RX; Dx required for 18 years and older ^; QL; AL</p> <p>amphetamine-dextroamphetamine er (generic for ADDERALL XR) - Tier 1; DX2RX; Dx required for 18 years and older ^; QL; AL</p>	<p>ADDERALL XR (brand for amphetamine-dextroamphet er) - Tier 2; DX2RX; ^; QL; AL</p> <p>AZSTARYS - Tier 2; PA; ^; QL; AL</p>
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Preferred Agents	Non-Preferred Agents
<p><i>dextroamphetamine sulfate er (generic for DEXEDRINE) - Tier 1; DX2RX; Dx required for 18 years and older ^; QL; AL</i></p> <p><i>dextroamphetamine sulfate oral tablet 10 mg, 5 mg (generic for ZENZEDI) - Tier 1; DX2RX; Dx required for 18 years and older ^; QL; AL</i></p> <p><i>lisdexamfetamine dimesylate oral capsule (generic for VYVANSE) - Tier 1; DX2RX; Dx required for 18 years and older ST; ^; QL; AL</i></p> <p><i>VYVANSE ORAL CAPSULE (brand for lisdexamfetamine dimesylate) - Tier 2; DX2RX; Dx required for 18 years and older ST; ^; QL; AL</i></p>	<p><i>DYANAVAL XR ORAL SUSPENSION EXTENDED RELEASE - Tier 2; DX2RX; ^; QL; AL</i></p> <p><i>DYANAVAL XR ORAL TABLET CHEWABLE EXTENDED RELEASE - Tier 2; PA; ^; QL; AL</i></p> <p><i>EVEKEO (brand for amphetamine sulfate) - Tier 2; DX2RX; ^; QL; AL</i></p> <p><i>EVEKEO ODT - Tier 2; PA; ^; QL; AL</i></p> <p><i>MYDAYIS (brand for amphet-dextroamphet 3-bead er) - Tier 2; DX2RX; ^; QL; AL</i></p> <p><i>VYVANSE ORAL TABLET CHEWABLE (brand for lisdexamfetamine dimesylate) - Tier 2; PA; ^; QL</i></p> <p><i>ZENZEDI (brand for dextroamphetamine sulfate) - Tier 2; DX2RX; ^; QL; AL</i></p>

Central Nervous System, Other

<p><i>AUSTEDO - Tier 2; PA; SP; QL</i></p> <p><i>caffeine citrate oral - Tier 1; QL; AL</i></p> <p><i>INGREZZA - Tier 2; PA; SP; QL</i></p> <p><i>NUEDEXTA - Tier 2; DX2RX; QL</i></p> <p><i>riluzole (generic for RILUTEK) - Tier 1; QL</i></p> <p><i>tetrabenazine (generic for XENAZINE) - Tier 1; DX2RX; SP; QL</i></p>	<p><i>GRALISE ORAL TABLET 300 MG, 600 MG - Tier 2; PA; QL</i></p> <p><i>HORIZANT - Tier 2; PA; QL</i></p> <p><i>RADICAVA ORS - Tier 2; PA; SP; QL</i></p> <p><i>RADICAVA ORS STARTER KIT - Tier 2; PA; SP; QL</i></p> <p><i>TIGLUTIK - Tier 2; PA; QL</i></p> <p><i>XENAZINE (brand for tetrabenazine) - Tier 2; DX2RX; SP; QL</i></p>
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Fibromyalgia Agents

<p><i>duloxetine hcl oral capsule delayed release particles 20 mg, 30 mg, 60 mg (generic for CYMBALTA) - Tier 1; QL</i></p> <p><i>pregabalin (generic for LYRICA) - Tier 1; QL</i></p>	<p><i>CYMBALTA (brand for duloxetine hcl) - Tier 2; PA; QL</i></p> <p><i>LYRICA CR (brand for pregabalin er) - Tier 2; PA; QL</i></p>
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Multiple Sclerosis Agents

<p><i>dalfampridine er (generic for AMPYRA) - Tier 1; DX2RX; SP; QL</i></p> <p><i>dimethyl fumarate oral (generic for TECFIDERA) - Tier 1; DX2RX; SP; QL</i></p> <p><i>dimethyl fumarate starter pack (generic for TECFIDERA) - Tier 1; DX2RX; SP; QL</i></p>	<p><i>AMPYRA (brand for dalfampridine er) - Tier 2; DX2RX; SP; QL</i></p> <p><i>AUBAGIO (brand for teriflunomide) - Tier 2; DX2RX; SP; QL</i></p> <p><i>AVONEX PEN - Tier 2; PA; SP; QL</i></p> <p><i>AVONEX PREFILLED - Tier 2; PA; SP; QL</i></p> <p><i>BAFIERTAM - Tier 2; PA; SP; QL</i></p>
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Preferred Agents	Non-Preferred Agents
<p><i> fingolimod hcl (generic for GILENYA) - Tier 1; DX2RX; SP; QL</i> <i> glatiramer acetate (generic for GLATOPA) - Tier 1; DX2RX; SP; QL</i> <i> glatopa (generic for GLATOPA) - Tier 1; DX2RX; SP; QL</i> MAYZENT - Tier 2; PA; SP; QL MAYZENT STARTER PACK - Tier 2; PA; SP; QL PLEGRIDY STARTER PACK - Tier 2; DX2RX; SP; QL PLEGRIDY SUBCUTANEOUS - Tier 2; DX2RX; SP; QL <i> teriflunomide (generic for AUBAGIO) - Tier 1; DX2RX; SP; QL</i></p>	<p>BETASERON - Tier 2; PA; SP; QL COPAXONE (brand for glatiramer acetate) - Tier 2; DX2RX; SP; QL EXTAVIA - Tier 2; PA; SP; QL GILENYA (brand for fingolimod hcl) - Tier 2; DX2RX; SP; QL KESIMPTA - Tier 2; PA; SP; QL MAVENCLAD (10 TABS) - Tier 2; PA; SP; QL MAVENCLAD (4 TABS) - Tier 2; PA; SP; QL MAVENCLAD (5 TABS) - Tier 2; PA; SP; QL MAVENCLAD (6 TABS) - Tier 2; PA; SP; QL MAVENCLAD (7 TABS) - Tier 2; PA; SP; QL MAVENCLAD (8 TABS) - Tier 2; PA; SP; QL MAVENCLAD (9 TABS) - Tier 2; PA; SP; QL PLEGRIDY INTRAMUSCULAR - Tier 2; PA; SP; QL REBIF - Tier 2; PA; SP; QL REBIF REBIDOSE - Tier 2; PA; SP; QL REBIF REBIDOSE TITRATION PACK - Tier 2; PA; SP; QL REBIF TITRATION PACK - Tier 2; PA; SP; QL TECFIDERA ORAL CAPSULE DELAYED RELEASE (brand for dimethyl fumarate) - Tier 2; DX2RX; SP; QL VUMERITY - Tier 2; PA; SP; QL ZEPOSIA - Tier 2; PA; SP; QL ZEPOSIA 7-DAY STARTER PACK - Tier 2; PA; SP; QL</p>
Cystic Fibrosis Agents - Drugs to treat Cystic Fibrosis	
Respiratory Tract/Pulmonary Agents - Drugs to Treat Allergies, Cough, Cold and Lung Conditions	
	BRONCHITOL - Tier 2; PA; QL
Dental and Oral Agents	
<p><i> chlorhexidine gluconate mouth/throat (generic for PERIOGARD) - Tier 1; QL</i> <i> kourzeq (generic for KOURZEQ) - Tier 1; QL</i></p>	

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Preferred Agents	Non-Preferred Agents
<p><i>oralone (generic for KOURZEQ) - Tier 1; QL</i> <i>periogard (generic for PERIOGARD) - Tier 1; QL</i> <i>pilocarpine hcl oral tablet 5 mg (generic for SALAGEN) - Tier 1; QL</i> <i>pilocarpine hcl oral tablet 7.5 mg (generic for SALAGEN) - Tier 1</i> <i>triamcinolone acetonide mouth/throat (generic for KOURZEQ) - Tier 1; QL</i></p>	

Dermatological Agents

Acne and Rosacea Agents	
<p><i>accutane (generic for ACCUTANE) - Tier 1; PA; QL</i> <i>acitretin - Tier 1; PA; QL</i> <i>amnesteam (generic for ACCUTANE) - Tier 1; PA; QL</i> <i>azelaic acid external (generic for FINACEA) - Tier 1; QL</i> <i>claravis (generic for ACCUTANE) - Tier 1; PA; QL</i> <i>DIFFERIN EXTERNAL GEL 0.1 % (brand for adapalene) - Tier 2; QL</i> <i>isotretinoin oral capsule 10 mg, 20 mg, 30 mg, 40 mg (generic for ACCUTANE) - Tier 1; PA; QL</i> <i>tretinoin external cream (generic for RETIN-A) - Tier 1; ST; QL; AL</i> <i>zenatane (generic for ACCUTANE) - Tier 1; PA; QL</i></p>	<p><i>ABSORICA (brand for isotretinoin) - Tier 2; PA; QL</i> <i>ABSORICA LD - Tier 2; PA; QL</i> <i>ACANYA (brand for clindamycin phos-benzoyl perox) - Tier 2; PA; QL</i> <i>ALTRENO - Tier 2; PA; QL; AL</i> <i>ARAZLO - Tier 2; PA; QL</i> <i>ATRALIN (brand for tretinoin) - Tier 2; PA; QL; AL</i> <i>BENZAMYCIN (brand for benzoyl peroxide-erythromycin) - Tier 2; PA; QL</i> <i>DIFFERIN EXTERNAL CREAM (brand for adapalene) - Tier 2; PA; QL</i> <i>DIFFERIN EXTERNAL GEL 0.3 % (brand for adapalene) - Tier 2; PA; QL</i> <i>EPIDUO (brand for adapalene-benzoyl peroxide) - Tier 2; PA; QL</i> <i>EPIDUO FORTE (brand for adapalene-benzoyl peroxide) - Tier 2; PA; QL</i> <i>FINACEA (brand for azelaic acid) - Tier 2; PA; QL</i> <i>MIRVASO (brand for brimonidine tartrate) - Tier 2; PA; QL</i> <i>ONEXTON (brand for clindamycin phos-benzoyl perox) - Tier 2; PA; QL</i> <i>RETIN-A EXTERNAL CREAM (brand for tretinoin) - Tier 2; PA; ST; QL; AL</i> <i>RETIN-A EXTERNAL GEL (brand for tretinoin) - Tier 2; PA; QL; AL</i> <i>RETIN-A MICRO GEL 0.04 %, 0.1 % (brand for tretinoin microsphere) - Tier 2; PA; QL; AL</i> <i>RETIN-A MICRO PUMP EXTERNAL GEL 0.06 % - Tier 2; PA; QL; AL</i> <i>RETIN-A MICRO PUMP EXTERNAL GEL 0.08 % (brand for tretinoin microsphere pump) - Tier 2; PA; QL; AL</i> <i>RHOFADE - Tier 2; PA; QL</i> <i>TAZORAC EXTERNAL CREAM 0.1 % (brand for tazarotene) - Tier 2; PA; QL</i></p>

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Preferred Agents	Non-Preferred Agents
	TAZORAC EXTERNAL GEL (brand for tazarotene) - Tier 2; PA; QL VELTIN (brand for clindamycin-tretinoin) - Tier 2; PA; QL ZIANA (brand for clindamycin-tretinoin) - Tier 2; PA; QL

Dermatitis and Pruitus Agents

<p><i>ala-cort (generic for PREPARATION H) - Tier 1; QL</i> <i>alclometasone dipropionate external ointment - Tier 1; QL</i> <i>amcinonide external ointment - Tier 1; QL</i> <i>ammonium lactate external (generic for AL12) - Tier 1; QL</i> <i>anti-itch aloe (generic for PREPARATION H) - Tier 1; QL</i> <i>anti-itch intensive heal (generic for PREPARATION H) - Tier 1; QL</i> <i>anti-itch max str external cream 1 % (generic for PREPARATION H) - Tier 1; QL</i> <i>anti-itch maximum strength external cream 1 % (generic for PREPARATION H) - Tier 1; QL</i> <i>betamethasone dipropionate aug (generic for DIPROLENE) - Tier 1; QL</i> <i>betamethasone dipropionate external lotion - Tier 1; QL</i> <i>betamethasone dipropionate external ointment - Tier 1; QL</i> <i>betamethasone valerate external cream - Tier 1; QL</i> <i>betamethasone valerate external lotion - Tier 1; QL</i> <i>betamethasone valerate external ointment - Tier 1; QL</i> <i>clobetasol prop emollient base - Tier 1; QL</i> <i>clobetasol propionate e - Tier 1; QL</i> <i>clobetasol propionate external cream - Tier 1; QL</i> <i>clobetasol propionate external ointment - Tier 1; QL</i> <i>clobetasol propionate external solution - Tier 1; QL</i> <i>cortisone maximum strength external cream (generic for PREPARATION H) - Tier 1; QL</i> EUCRISA - Tier 2; ST; QL <i>fluocinolone acetonide body (generic for DERMA-SMOOTH/FS BODY) - Tier 1; QL</i> <i>fluocinolone acetonide external cream 0.025 % (generic for SYNALAR) - Tier 1; QL</i></p>	<p>BRYHALI - Tier 2; PA; QL CLOBEX (brand for clobetasol propionate) - Tier 2; PA; QL CLOBEX SPRAY (brand for clobetasol propionate) - Tier 2; PA; QL doxepin hcl external (generic for PRUDOXIN) - Tier 1; PA; QL OLUX-E (brand for clobetasol propionate emulsion) - Tier 2; PA; QL</p>
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Preferred Agents**Non-Preferred Agents**

fluocinolone acetonide external ointment (generic for SYNALAR) - Tier 1; QL
fluocinolone acetonide external solution (generic for SYNALAR) - Tier 1; QL
fluocinolone acetonide scalp (generic for DERMA-SMOOTH/FS SCALP) - Tier 1; QL
fluocinonide emulsified base - Tier 1; QL
fluocinonide external cream (generic for VANOS) - Tier 1; QL
fluocinonide external solution - Tier 1; QL
fluticasone propionate external cream - Tier 1; QL
fluticasone propionate external ointment - Tier 1; QL
halobetasol propionate external cream - Tier 1; QL
hydrocortisone anti-itch (generic for PREPARATION H) - Tier 1; QL
hydrocortisone butyrate external ointment - Tier 1; QL
hydrocortisone butyrate external solution - Tier 1; QL
hydrocortisone external cream (generic for PREPARATION H) - Tier 1; QL
hydrocortisone external lotion 2.5 % - Tier 1; QL
hydrocortisone external ointment (generic for AQUAPHOR ITCH RELIEF CHILDREN) - Tier 1; QL
hydrocortisone max st external cream (generic for PREPARATION H) - Tier 1; QL
hydrocortisone max st/12 moist (generic for PREPARATION H) - Tier 1; QL
hydrocortisone plus 12 external cream 1 % (generic for PREPARATION H) - Tier 1; QL
hydrocortisone plus external cream 1 % (generic for PREPARATION H) - Tier 1; QL
hydrocortisone ultra-moisture (generic for PREPARATION H) - Tier 1; QL
hydrocortisone/aloe (generic for PREPARATION H) - Tier 1; QL
hydrocortisone/aloe max str (generic for PREPARATION H) - Tier 1; QL
hydrocortisone-aloe max st external cream 1 % (generic for PREPARATION H) - Tier 1; QL
instacort 5 - Tier 1; QL

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Preferred Agents	Non-Preferred Agents
<p>LAC-HYDRIN FIVE - Tier 2; QL <i>mometasone furoate external</i> - Tier 1; QL <i>pimecrolimus (generic for ELIDEL)</i> - Tier 1; ST; Minimum age of 2 years; QL; AL <i>PREPARATION H EXTERNAL CREAM 1 % (brand for ala-cort)</i> - Tier 2; QL <i>selenium sulfide external lotion</i> - Tier 1; QL <i>tacrolimus external ointment 0.03 %</i> - Tier 1; ST; Minimum age of 2 years; QL; AL <i>tacrolimus external ointment 0.1 %</i> - Tier 1; ST; Minimum age of 16 years; QL; AL <i>triamcinolone acetonide external cream (generic for TRIDERM)</i> - Tier 1; QL <i>triamcinolone acetonide external lotion</i> - Tier 1; QL <i>triamcinolone acetonide external ointment 0.025 %, 0.1 %, 0.5 %</i> - Tier 1; QL <i>triderm (generic for TRIDERM)</i> - Tier 1; QL</p>	
Dermatological Agents, Other	
<p><i>calcipotriene external cream</i> - Tier 1; ST; QL <i>calcipotriene external ointment (generic for CALCITRENE)</i> - Tier 1; ST; QL <i>calcipotriene external solution</i> - Tier 1; QL <i>calcitriol external (generic for VECTICAL)</i> - Tier 1; ST; QL <i>clotrimazole-betamethasone</i> - Tier 1; QL <i>fluorouracil external cream 5 % (generic for EFUDEX)</i> - Tier 1; QL <i>fluorouracil external solution</i> - Tier 1; QL <i>imiquimod external cream 5 %</i> - Tier 1; QL <i>methoxsalen rapid</i> - Tier 1 <i>podofilox external</i> - Tier 1; QL <i>silver sulfadiazine external (generic for SSD)</i> - Tier 1; QL <i>ssd (generic for SSD)</i> - Tier 1; QL</p>	<p>CARAC (brand for fluorouracil) - Tier 2; PA; QL DUOBRII - Tier 2; PA; QL EFUDEX (brand for fluorouracil) - Tier 2; PA; QL ENSTILAR - Tier 2; PA; QL PROCTOFOAM HC - Tier 2; PA; QL QBREXZA - Tier 2; PA; QL SORILUX - Tier 2; PA; QL TACLONEX (brand for calcipotriene-betameth diprop) - Tier 2; PA; QL VECTICAL (brand for calcitriol) - Tier 2; PA; ST; QL ZYCLARA (brand for imiquimod) - Tier 2; PA; QL</p>

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Preferred Agents	Non-Preferred Agents
Pediculicides/Scabicides	
<p>CROTAN - Tier 2; QL <i>lice killing (generic for NIX CREME RINSE) - Tier 1; QL</i> <i>lice treatment external liquid 1 % (generic for NIX CREME RINSE) - Tier 1; QL</i> <i>lice treatment external lotion 1 % - Tier 1; QL</i> <i>malathion (generic for OVIDE) - Tier 1; QL</i> <i>permethrin external - Tier 1; QL</i> <i>spinosad (generic for NATROBA) - Tier 1; QL</i></p>	<p>SOOLANTRA (<i>brand for ivermectin</i>) - Tier 2; PA; QL</p>
Topical Anti-infectives	
<p><i>ciclodan (generic for CICLODAN) - Tier 1; QL</i> <i>ciclopirox external solution (generic for CICLODAN) - Tier 1; QL</i> <i>clindacin etz external swab (generic for CLINDACIN ETZ) - Tier 1; QL</i> <i>clindacin-p (generic for CLINDACIN ETZ) - Tier 1; QL</i> <i>clindamycin phosphate external gel (generic for CLINDAGEL) - Tier 1; QL</i> <i>clindamycin phosphate external lotion (generic for CLEOCIN-T) - Tier 1; QL</i> <i>clindamycin phosphate external solution - Tier 1; QL</i> <i>clindamycin phosphate external swab (generic for CLINDACIN ETZ) - Tier 1; QL</i> <i>clotrimazole external cream 1 % (generic for DESENEX) - Tier 1; QL</i> <i>clotrimazole external solution 1 % - Tier 1; QL</i> <i>erythromycin external (generic for ERYGEL) - Tier 1; QL</i> <i>gentamicin sulfate external - Tier 1; QL</i> <i>ketoconazole external cream - Tier 1; QL</i> <i>ketoconazole external shampoo - Tier 1; QL</i> <i>mupirocin external - Tier 1; QL</i> <i>nyamyc (generic for NYAMYC) - Tier 1; QL</i> <i>nystatin external (generic for NYAMYC) - Tier 1; QL</i> <i>nystop (generic for NYAMYC) - Tier 1; QL</i></p>	<p>AMZEEQ - Tier 2; PA JUBLIA - Tier 2; PA; QL KERYDIN (<i>brand for tavaborole</i>) - Tier 2; PA; QL XEPI - Tier 2; PA; QL</p>

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Preferred Agents	Non-Preferred Agents
Dermatological Agents - Drugs to Treat Skin Conditions	
<p>advanced healing external ointment (generic for HYDROLATUM) - Tier 1; QL</p> <p>astringent solution (generic for DOMEBORO) - Tier 1; QL</p> <p>AVAR-E EMOLLIENT (brand for sss 10-5) - Tier 2; QL</p> <p>AVAR-E GREEN (brand for sss 10-5) - Tier 2; QL</p> <p>baby basics diaper rash (generic for BOUDREAUXS BUTT PASTE) - Tier 1; QL</p> <p>beauty 360 pure glycerin - Tier 1</p> <p>beauty 360 soothing bath (generic for AVEENO BABY BATH TREATMENT) - Tier 1; QL</p> <p>boro-packs (generic for DOMEBORO) - Tier 1; QL</p> <p>boudreauxs butt paste ointment 40 % external (generic for BOUDREAUXS BUTT PASTE) - Tier 1; QL</p> <p>BOUDREAUXS BUTT PASTE OINTMENT 40 % EXTERNAL (brand for cvs diaper rash) - Tier 2; QL</p> <p>bp 10-1 - Tier 1; QL</p> <p>diaper rash external ointment (generic for BOUDREAUXS BUTT PASTE) - Tier 1; QL</p> <p>DR SMITHS ADULT BARRIER EXTERNAL OINTMENT 10 % - Tier 2; QL</p> <p>DR SMITHS DIAPER - Tier 2; QL</p> <p>glycerin external - Tier 1</p> <p>glycerin external liquid 99.5 % - Tier 1</p> <p>hydrolatum (generic for HYDROLATUM) - Tier 1; QL</p> <p>hydrophor (generic for HYDROLATUM) - Tier 1; QL</p> <p>ointment base (generic for HYDROLATUM) - Tier 1; QL</p> <p>renewal soothing bath (generic for AVEENO BABY BATH TREATMENT) - Tier 1; QL</p> <p>sss 10-5 external cream (generic for AVAR-E EMOLLIENT) - Tier 1; QL</p> <p>sulfacetamide sodium-sulfur external cream 10-5 % (generic for AVAR-E EMOLLIENT) - Tier 1; QL</p> <p>sulfacetamide sodium-sulfur external liquid 9-4.5 % (generic for SUMADAN WASH) - Tier 1; QL</p>	

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Preferred Agents	Non-Preferred Agents
<p><i>sulfacetamide sod-sulfur wash external liquid 9-4.5 % (generic for SUMADAN WASH) - Tier 1; QL</i> <i>sulfamez wash - Tier 1; QL</i> <i>SUMADAN WASH (brand for sulfacetamide sod-sulfur wash) - Tier 2; QL</i> <i>zinc oxide external ointment 40 % (generic for BOUDREAUXS BUTT PASTE) - Tier 1; QL</i></p>	

Dermatological Agents - Skin Agents

<p><i>ABREVA (brand for docosanol) - Tier 2; QL</i> <i>cerovel (generic for CEROVEL) - Tier 1; QL</i> <i>docosanol external (generic for ABREVA) - Tier 1; QL</i> <i>ft docosanol (generic for ABREVA) - Tier 1; QL</i> <i>gormel - Tier 1; QL</i> <i>gormel 10 (generic for NUTRAPLUS) - Tier 1; QL</i> <i>hemorrhoidal rectal suppository 0.25-3-85.5 % - Tier 1</i> <i>NUTRAPLUS (brand for gormel 10) - Tier 2; QL</i> <i>urea 20 intensive hydrating - Tier 1; QL</i> <i>urea external cream 10 % (generic for NUTRAPLUS) - Tier 1; QL</i> <i>urea external cream 20 % - Tier 1; QL</i> <i>urea external lotion (generic for CEROVEL) - Tier 1; QL</i> <i>ureacin-10 (generic for NUTRAPLUS) - Tier 1; QL</i> <i>ureacin-20 - Tier 1; QL</i> <i>XERAC AC - Tier 2; QL</i></p>	<p><i>CIBINQO - Tier 2; PA; SP; QL</i> <i>OPZELURA - Tier 2; PA; SP; QL</i> <i>ZILXI - Tier 2; PA; QL</i></p>
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DEVICES

MEDICAL SUPPLIES

<p><i>PEAK FLOW METER UNIVERSAL RANG (brand for peak flow meter universal rang) - Tier 2; QL</i> <i>PURE COMFORT FLOW METER ADULT (brand for peak flow meter universal rang) - Tier 2; QL</i></p>	
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Preferred Agents	Non-Preferred Agents
<p><i>PURE COMFORT FLOW METER CHILD (brand for peak flow meter universal rang) - Tier 2; QL</i></p>	
<p>Diabetes - Glucose Monitoring</p>	
<p><i>ACCU-CHEK AVIVA DEVICE (brand for element compact control 2) - Tier 2; QL</i></p> <p><i>ACCU-CHEK GUIDE CONTROL (brand for element compact control 2) - Tier 2; QL</i></p> <p><i>ACCU-CHEK SMARTVIEW CONTROL (brand for element compact control 2) - Tier 2; QL</i></p> <p><i>ACCUTREND GLUCOSE CONTROL (brand for element compact control 2) - Tier 2; QL</i></p> <p><i>BD AUTOSHIELD DUO PEN NEEDLES (brand for pen needles) - Tier 2; QL</i></p> <p><i>BD ULTRA-FINE INSULIN SYRINGES - Tier 2; QL</i></p> <p><i>BD ULTRA-FINE PEN NEEDLES (brand for 1st tier unifine pentips) - Tier 2; QL</i></p> <p><i>CARESENS CONTROL SOLUTION A/B (brand for element compact control 2) - Tier 2; QL</i></p> <p><i>CARETOUCH CONTROL SOL LEVEL 2 (brand for element compact control 2) - Tier 2; QL</i></p> <p><i>CHEMSTRIP 10 MD - Tier 2; QL</i></p> <p><i>CHEMSTRIP 10/SG - Tier 2; QL</i></p> <p><i>CHEMSTRIP 2 GP - Tier 2; QL</i></p> <p><i>CHEMSTRIP 5 OB - Tier 2; QL</i></p> <p><i>CHEMSTRIP 7 - Tier 2; QL</i></p> <p><i>CHEMSTRIP 9 - Tier 2; QL</i></p> <p><i>CHEMSTRIP K (brand for ketone test) - Tier 2; QL</i></p> <p><i>CHEMSTRIP UGK - Tier 2; QL</i></p> <p><i>DEXCOM G6 RECEIVER - Tier 2; PA; QL</i></p> <p><i>DEXCOM G6 SENSOR (brand for guardian sensor 3) - Tier 2; PA; QL</i></p> <p><i>DEXCOM G7 RECEIVER - Tier 2; PA; QL</i></p> <p><i>DEXCOM G7 SENSOR (brand for guardian sensor 3) - Tier 2; PA; QL</i></p>	<p><i>ACCU-CHEK AVIVA PLUS TEST STRIPS (brand for blood glucose test) - Tier 2; PA; QL</i></p> <p><i>ACCU-CHEK FASTCLIX LANCET KIT (brand for select-lite device/lancets) - Tier 2; PA; QL</i></p> <p><i>ACCU-CHEK GUIDE TEST STRIPS (brand for blood glucose monitor system) - Tier 2; PA; QL</i></p> <p><i>ACCU-CHEK GUIDE KIT W/DEVICE (brand for blood glucose monitor system) - Tier 2; PA; QL</i></p> <p><i>ACCU-CHEK SMARTVIEW (brand for blood glucose test) - Tier 2; PA; QL</i></p> <p><i>ACCU-CHEK SOFTCLIX LANCET DEVICE KIT (brand for select-lite device/lancets) - Tier 2; PA; QL</i></p> <p><i>BD ULTRA-FINE PEN NEEDLES (brand for 1st tier unifine pentips) - Tier 2; PA; QL</i></p> <p><i>BLOOD GLUCOSE TEST STRIPS (brand for blood glucose test) - Tier 2; PA; QL</i></p> <p><i>CONTOUR NEXT EZ KIT W/DEVICE (brand for blood glucose monitor system) - Tier 2; PA; QL</i></p> <p><i>CONTOUR NEXT GEN MONITOR KIT (brand for blood glucose monitor system) - Tier 2; PA; QL</i></p> <p><i>CONTOUR NEXT MONITOR KIT W/DEVICE (brand for blood glucose monitor system) - Tier 2; PA; QL</i></p> <p><i>CONTOUR NEXT ONE KIT (brand for blood glucose monitoring 333) - Tier 2; PA; QL</i></p> <p><i>CONTOUR NEXT GEN TEST STRIPS (brand for blood glucose test) - Tier 2; PA; QL</i></p> <p><i>CONTOUR TEST STRIPS (brand for blood glucose test) - Tier 2; PA; QL</i></p> <p><i>FREESTYLE LIBRE 3 SENSOR (brand for guardian sensor 3) - Tier 2; PA; QL</i></p> <p><i>FREESTYLE PRECISION NEO TEST (brand for blood glucose test) - Tier 2; PA; QL</i></p>

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Preferred Agents	Non-Preferred Agents
<p>EASYMAX 15 LEVEL 2 CONTROL (brand for element compact control 2) - Tier 2; QL</p> <p>EASYMAX 15 LEVEL 2-3 CONTROL (brand for element compact control 2) - Tier 2; QL</p> <p>GLUCOSE CONTROL SOLUTIONS (brand for element compact control 2) - Tier 2; QL</p> <p>FREESTYLE LIBRE 14 DAY READER - Tier 2; PA; QL</p> <p>FREESTYLE LIBRE 14 DAY SENSOR (brand for guardian sensor 3) - Tier 2; PA; QL</p> <p>FREESTYLE LIBRE 2 READER - Tier 2; PA; QL</p> <p>FREESTYLE LIBRE 2 SENSOR (brand for guardian sensor 3) - Tier 2; PA; QL</p> <p>FREESTYLE LIBRE READER - Tier 2; PA; QL</p> <p>KETO-DIASTIX - Tier 2; QL</p> <p>KETONE CARE - Tier 2; QL</p> <p>KETONE TEST (brand for ketone test) - Tier 2; QL</p> <p>KETOSTIX (brand for ketone test) - Tier 2; QL</p> <p>LANCETS (brand for cvs lancets original) - Tier 2; QL</p> <p>MEDISENSE GLUCOSE KETONE CONTR (brand for element compact control 2) - Tier 2; QL</p> <p>MEDISENSE HI/MID/LOW CONTROL (brand for element compact control 2) - Tier 2; QL</p> <p>NEUTEK 2TEK CONTROL (brand for element compact control 2) - Tier 2; QL</p> <p>ONETOUCH ULTRA 2 KIT W/DEVICE (brand for blood glucose monitor system) - Tier 2; QL</p> <p>ONETOUCH ULTRA IN VITRO LIQUID (brand for element compact control 2) - Tier 2; QL</p> <p>ONETOUCH ULTRA STRIP IN VITRO (brand for blood glucose test) - Tier 2; QL for non-insulin dependent members: allow twice daily testing; QL</p> <p>ONETOUCH VERIO FLEX SYSTEM KIT W/DEVICE (brand for blood glucose monitor system) - Tier 2; QL</p> <p>ONETOUCH VERIO IN VITRO LIQUID (brand for element compact control 2) - Tier 2; QL</p>	<p>FREESTYLE TEST (brand for blood glucose test) - Tier 2; PA; QL</p> <p>GUARDIAN SENSOR (3) (brand for guardian sensor 3) - Tier 2; PA; QL</p> <p>GUARDIAN SENSOR 3 (brand for guardian sensor 3) - Tier 2; PA; QL</p> <p>INSULIN PEN NEEDLES (brand for pen needles) - Tier 2; PA; QL</p> <p>INSULIN PEN NEEDLES 32G X 4 MM , 32G X 6 MM (brand for 1st tier unifine pentips) - Tier 2; PA; QL</p> <p>ONETOUCH ULTRA 2 KIT W/DEVICE (brand for blood glucose monitor system) - Tier 2; PA; QL</p> <p>ONETOUCH ULTRA STRIP IN VITRO (brand for blood glucose test) - Tier 2; PA; QL</p> <p>ONETOUCH VERIO FLEX SYSTEM KIT W/DEVICE (brand for blood glucose monitor system) - Tier 2; PA; QL</p> <p>ONETOUCH VERIO REFLECT KIT W/DEVICE (brand for blood glucose monitor system) - Tier 2; PA; QL</p> <p>ONETOUCH VERIO STRIP IN VITRO (brand for blood glucose test) - Tier 2; PA; QL</p> <p>PRECISION XTRA BLOOD GLUCOSE (brand for blood glucose test) - Tier 2; PA; QL</p> <p>RELION TRUE METRIX TEST STRIPS (brand for blood glucose test) - Tier 2; PA; QL</p>

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Preferred Agents	Non-Preferred Agents
<p>ONETOUCH VERIO REFLECT KIT W/DEVICE (brand for blood glucose monitor system) - Tier 2; QL</p> <p>ONETOUCH VERIO STRIP IN VITRO (brand for blood glucose test) - Tier 2; QL for non-insulin dependent members: allow twice daily testing; QL</p> <p>PIP GLUCOSE CONTROL SOLUTION (brand for element compact control 2) - Tier 2; QL</p> <p>PRECISION GLUCOSE KETONE CONTR (brand for element compact control 2) - Tier 2; QL</p> <p>QUINTET CONTROL HIGH/NORMAL (brand for element compact control 2) - Tier 2; QL</p> <p>TRUECONTROL GLUCOSE CONT LEV 0 (brand for element compact control 2) - Tier 2; QL</p> <p>TRUECONTROL GLUCOSE CONT LEV 1 (brand for element compact control 2) - Tier 2; QL</p>	
<p>Electrolyte/Mineral Replacement - Vitamin, Mineral and Body Fluid Deficiency Drugs</p>	
<p>Therapeutic Nutrients/Minerals/Electrolytes - Drugs to Treat Vitamin, Mineral and Body Fluid Deficiencies</p>	
	<p>ACCRUFER - Tier 2; PA; QL</p>
<p>Electrolytes/Minerals/Metals/Vitamins</p>	
<p>Electrolyte/Mineral Replacement</p>	
<p>carglumic acid (generic for CARBAGLU) - Tier 1; PA; SP</p> <p>DENTA 5000 PLUS (brand for sf 5000 plus) - Tier 2; QL</p> <p>DENTAGEL (brand for sf) - Tier 2; QL</p> <p>easygel - Tier 1; QL</p> <p>fluoridex daily renewal - Tier 1; QL</p> <p>klor-con (generic for KLOR-CON) - Tier 1; QL</p> <p>klor-con 10 (generic for KLOR-CON 10) - Tier 1; QL</p>	<p>ENDARI - Tier 2; PA; QL</p>

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Preferred Agents**Non-Preferred Agents**

klor-con m10 (generic for KLOR-CON M10) - Tier 1; QL
klor-con m20 (generic for KLOR-CON M20) - Tier 1; QL
potassium chloride crys er oral tablet extended release 10 meq (generic for KLOR-CON M10) - Tier 1; QL
potassium chloride crys er oral tablet extended release 20 meq (generic for KLOR-CON M20) - Tier 1; QL
potassium chloride er oral capsule extended release 10 meq - Tier 1; QL
potassium chloride er oral tablet extended release 10 meq (generic for KLOR-CON 10) - Tier 1; QL
potassium chloride er oral tablet extended release 20 meq (generic for K-TAB) - Tier 1; QL
potassium chloride er oral tablet extended release 8 meq (generic for KLOR-CON) - Tier 1; QL
potassium chloride oral (generic for KLOR-CON) - Tier 1; QL
potassium citrate er oral tablet extended release 10 meq (1080 mg) (generic for UROCIT-K 10) - Tier 1; QL
potassium citrate er oral tablet extended release 15 meq (1620 mg) (generic for UROCIT-K 15) - Tier 1
potassium citrate er oral tablet extended release 5 meq (540 mg) (generic for UROCIT-K 5) - Tier 1
PREVIDENT (brand for sf) - Tier 2; QL
PREVIDENT 5000 DRY MOUTH (brand for sf) - Tier 2; QL
PREVIDENT 5000 PLUS (brand for sf 5000 plus) - Tier 2; QL
sf (generic for DENTAGEL) - Tier 1; QL
sf 5000 plus (generic for DENTA 5000 PLUS) - Tier 1; QL
sodium chloride (pf) - Tier 1; QL
sodium chloride intravenous solution 0.45 %, 0.9 % - Tier 1; QL
sodium fluoride 5000 plus (generic for DENTA 5000 PLUS) - Tier 1; QL
sodium fluoride 5000 ppm dental cream (generic for DENTA 5000 PLUS) - Tier 1; QL
sodium fluoride dental (generic for DENTA 5000 PLUS) - Tier 1; QL
sodium fluoride oral solution - Tier 1; QL
sodium fluoride oral tablet chewable - Tier 1; QL

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Preferred Agents	Non-Preferred Agents
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Electrolyte/Mineral Replacement - Vitamin, Mineral and Body Fluid Deficiency Drugs

BIOLYTE (brand for cvs electrolyte solution) - Tier 2; QL
BPROTECTED PEDIA IRON (brand for fe-vite iron) - Tier 2; QL
cal mag zinc +d3 (generic for ADVANCED CALCIUM/D/MAGNESIUM) - Tier 1; QL
calcium + vitamin d3 oral tablet 500-5 mg-mcg (generic for OYSCO 500+D) - Tier 1; QL
calcium 600/vit d/minerals oral tablet 600-200 mg-unit - Tier 1; QL
calcium 600/vit d/minerals oral tablet chewable 600-400 mg-unit - Tier 1
calcium 600/vitamin d - Tier 1; QL
calcium 600/vitamin d-3 - Tier 1; QL
calcium 600+d oral tablet 600-10 mg-mcg - Tier 1; QL
calcium carb-cholecalciferol oral tablet 600-10 mg-mcg, 600-5 mg-mcg - Tier 1; QL
calcium cit plus vit d-3 (generic for CALCITRATE) - Tier 1
calcium citrate + d3 maximum (generic for CALCITRATE) - Tier 1
calcium citrate +d3 (generic for CALCITRATE) - Tier 1
calcium citrate oral tablet 950 (200 ca) mg - Tier 1
calcium citrate plus vit d - Tier 1; QL
calcium citrate+d oral tablet 315-6.25 mg-mcg (generic for CALCITRATE) - Tier 1
calcium citrate+d3 oral tablet (generic for ADVANCED CALCIUM/D/MAGNESIUM) - Tier 1; QL
calcium citrate+d3 w/magne (generic for ADVANCED CALCIUM/D/MAGNESIUM) - Tier 1; QL
calcium citrate-vit d - Tier 1; QL
calcium citrate-vitamin d oral tablet 315-5 mg-mcg - Tier 1; QL
calcium high potency/vitamin d - Tier 1; QL
calcium plus vitamin d (generic for OYSCO 500+D) - Tier 1; QL
calcium plus vitamin d3 - Tier 1; QL
calcium/minerals/vitamin d - Tier 1
calcium-magnesium-zinc oral tablet 333-133-5 mg, 333.33-133.33-5 mg - Tier 1

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Preferred Agents**Non-Preferred Agents**

electrolyte solution (generic for BIOLYTE) - Tier 1; QL
ENFAMIL ENFALYTE (brand for cvs electrolyte solution) - Tier 2; QL
EZFE 200 - Tier 2
ferate (generic for FERATE) - Tier 1
FER-IN-SOL (brand for fe-vite iron) - Tier 2; QL
ferocon (generic for TRICON) - Tier 1
ferosul (generic for FEROSUL) - Tier 1; QL
ferottrinsic (generic for TRICON) - Tier 1
ferretts - Tier 1
ferrex 150 capsule 150 mg oral (generic for FERREX 150) - Tier 1
FERREX 150 CAPSULE 150 MG ORAL (brand for polysaccharide iron complex) - Tier 2
FERRIC X-150 (brand for polysaccharide iron complex) - Tier 2
ferrous fumarate oral tablet 324 (106 fe) mg, 324 mg (generic for FERROCITE) - Tier 1
ferrous gluconate oral tablet 240 (27 fe) mg (generic for FERATE) - Tier 1
ferrous gluconate oral tablet 324 (37.5 fe) mg - Tier 1
ferrous gluconate oral tablet 324 (38 fe) mg - Tier 1; QL
ferrous sulfate oral solution 75 (15 fe) mg/ml (generic for BPROTECTED PEDIA IRON) - Tier 1; QL
ferrous sulfate oral tablet 325 (65 fe) mg (generic for FEROSUL) - Tier 1; QL
ferrous sulfate oral tablet delayed release - Tier 1; QL
fe-vite iron (generic for BPROTECTED PEDIA IRON) - Tier 1; QL
foltrin (generic for TRICON) - Tier 1
hi cal (generic for OYSCO 500+D) - Tier 1; QL
iferex 150 (generic for FERREX 150) - Tier 1
iferex 150 forte (generic for IFEREX 150 FORTE) - Tier 1
iron (ferrous sulfate) oral solution (generic for BPROTECTED PEDIA IRON) - Tier 1; QL
iron infant/toddler (generic for BPROTECTED PEDIA IRON) - Tier 1; QL
iron oral tablet 240 (27 fe) mg (generic for FERATE) - Tier 1
iron oral tablet 325 (65 fe) mg (generic for FEROSUL) - Tier 1; QL

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Preferred Agents**Non-Preferred Agents**

iron supplement childrens (generic for BPROTECTED PEDIA IRON) - Tier 1; QL
K-PHOS - Tier 2; QL
magnesium oral tablet 500 mg - Tier 1
magnesium oxide -mg supplement oral tablet 400 (240 mg) mg (generic for MAGNESIUM-OXIDE) - Tier 1
magnesium oxide -mg supplement oral tablet 500 mg - Tier 1
magnesium-oxide (generic for MAGNESIUM-OXIDE) - Tier 1
NU-IRON (brand for polysaccharide iron complex) - Tier 2
OS-CAL CALCIUM + D3 (brand for calcium + vitamin d3) - Tier 2; QL
oysco 500+d (generic for OYSCO 500+D) - Tier 1; QL
oyster shell calcium plus d (generic for OYSCO 500+D) - Tier 1; QL
oyster shell calcium w/d (generic for OYSCO 500+D) - Tier 1; QL
oyster shell calcium/d oral tablet 250-6.25 mg-mcg - Tier 1
oyster shell calcium/vit d (generic for OYSCO 500+D) - Tier 1; QL
oyster shell calcium/vit d3 oral tablet 500-5 mg-mcg (generic for OYSCO 500+D) - Tier 1; QL
oyster shell calcium/vitamin d oral tablet 500-5 mg-mcg (generic for OYSCO 500+D) - Tier 1; QL
ped electrolyte freeze pop (generic for BIOLYTE) - Tier 1; QL
PEDIALYTE FREEZER POPS (brand for cvs electrolyte solution) - Tier 2; QL
PEDIALYTE ORAL SOLUTION (brand for cvs electrolyte solution) - Tier 2; QL
PEDIALYTE SINGLES (brand for cvs electrolyte solution) - Tier 2; QL
pediatric electrolyte oral solution (generic for BIOLYTE) - Tier 1; QL
PHOSPHA 250 NEUTRAL (brand for phosphorous) - Tier 2; QL
phosphorous (generic for PHOSPHO-TRIN 250 NEUTRAL) - Tier 1; QL
phospho-trin 250 neutral (generic for PHOSPHO-TRIN 250 NEUTRAL) - Tier 1; QL
PHOSPHO-TRIN K500 - Tier 2; QL
poly-iron 150 (generic for FERREX 150) - Tier 1
poly-iron 150 forte (generic for IFEREX 150 FORTE) - Tier 1
polysaccharide iron complex (generic for FERREX 150) - Tier 1
polysaccharide iron forte (generic for IFEREX 150 FORTE) - Tier 1

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Preferred Agents	Non-Preferred Agents
<p><i>polysaccharide-iron complex (generic for FERREX 150) - Tier 1</i> <i>potassium citrate-citric acid - Tier 1</i> <i>REHYDRALYTE (brand for cvs electrolyte solution) - Tier 2; QL</i> <i>sod citrate-citric acid oral solution 500-334 mg/5ml - Tier 1</i> <i>TRICON (brand for ferocon) - Tier 2</i> <i>TRUELYTE (brand for cvs electrolyte solution) - Tier 2; QL</i> <i>wes-phos 250 neutral (generic for PHOSPHO-TRIN 250 NEUTRAL) - Tier 1; QL</i></p>	
Electrolyte/Mineral/Metal Modifiers	
<p><i>CHEMET - Tier 2; QL</i> <i>deferasirox granules (generic for JADENU SPRINKLE) - Tier 1; PA; SP; QL</i> <i>deferasirox oral packet (generic for JADENU SPRINKLE) - Tier 1; PA; SP; QL</i> <i>deferasirox oral tablet (generic for JADENU) - Tier 1; PA; SP; QL</i> <i>deferasirox oral tablet soluble (generic for EXJADE) - Tier 1; PA; SP</i></p>	<p><i>FERRIPROX TWICE-A-DAY - Tier 2; PA; SP; QL</i> <i>JYNARQUE ORAL TABLET THERAPY PACK 15 MG - Tier 2; PA; SP; QL</i> <i>tolvaptan oral tablet 15 mg (generic for JYNARQUE) - Tier 1; PA; SP; QL</i></p>
Phosphate Binders	
<p><i>calcium acetate (phos binder) (generic for CALPHRON) - Tier 1; QL</i> <i>calcium acetate oral tablet 667 mg (generic for CALPHRON) - Tier 1; QL</i> <i>sevelamer carbonate oral tablet (generic for RENVELA) - Tier 1; ST; QL</i></p>	<p><i>AURYXIA - Tier 2; PA; QL</i> <i>VELPHORO - Tier 2; PA; QL</i></p>
Potassium Binders	
<p><i>LOKELMA - Tier 2; PA; QL</i> <i>sps - Tier 1; QL</i> <i>VELTASSA - Tier 2; PA; QL</i></p>	
Vitamins	
<p><i>a-25 - Tier 1; QL</i></p>	

Tier 1: Generic; Tier 2: Brand; ^: Medical Office Attestation Needed if Prescribed by Behavioral Health Provider, Full Prior Authorization Needed if Prescribed by Non-Behavioral Health Provider; *: Available without PA for participating Behavioral Health Prescribers; AL: Limited to members of a certain age; DX2RX: Diagnosis Required; GE: Gender Limit; PA: Prior Auth Required; QL: Quantity Limit; SP: Specialty Medication; ST: Step Therapy

Preferred Agents

Non-Preferred Agents

aqueous vitamin d (generic for BPROTECTED PEDIA D-VITE) - Tier 1; QL
b-complex oral tablet - Tier 1
b-complex with b-12 - Tier 1
b-complex/b-12 oral - Tier 1
BPROTECTED PEDIA D-VITE (brand for aqueous vitamin d) - Tier 2; QL
CENTRUM SPECIALIST PRENATAL - Tier 2
classic prenatal - Tier 1; QL
COMPLETE NATAL DHA - Tier 2; QL
CO-NATAL FA (brand for neonatal complete) - Tier 2; QL
d3 high potency oral capsule 25 mcg (1000 ut) (generic for PRONUTRIENTS VITAMIN D3) - Tier 1
d3 oral capsule 10 mcg (400 unit), 50 mcg (2000 ut) - Tier 1; QL
d3 oral capsule 125 mcg (5000 ut) (generic for DIALYVITE VITAMIN D 5000) - Tier 1
d3 oral capsule 25 mcg (1000 ut) (generic for PRONUTRIENTS VITAMIN D3) - Tier 1
d-3-5 (generic for DIALYVITE VITAMIN D 5000) - Tier 1
d3-50 (generic for D3-50) - Tier 1; QL
daily multiple vitamins (generic for TAB-A-VITE/BETA CAROTENE) - Tier 1
daily vitamins (generic for TAB-A-VITE/BETA CAROTENE) - Tier 1
daily vite (generic for TAB-A-VITE/BETA CAROTENE) - Tier 1
daily vites (generic for TAB-A-VITE/BETA CAROTENE) - Tier 1
daily-vite (generic for TAB-A-VITE/BETA CAROTENE) - Tier 1
DECARA ORAL CAPSULE 1.25 MG (50000 UT) (brand for vitamin d3) - Tier 2; QL
DECARA ORAL CAPSULE 625 MCG (25000 UT) - Tier 2
DIALYVITE 800 ORAL TABLET (brand for full spectrum b/vitamin c) - Tier 2; QL
DIALYVITE VITAMIN D 5000 (brand for cvs d3) - Tier 2
D-VI-SOL (brand for aqueous vitamin d) - Tier 2; QL
d-vite pediatric (generic for BPROTECTED PEDIA D-VITE) - Tier 1; QL
ENFAMIL EXPECTA - Tier 2; QL

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Preferred Agents

essential one daily (generic for TAB-A-VITE/BETA CAROTENE) - Tier 1
essentials (generic for TAB-A-VITE/BETA CAROTENE) - Tier 1
FOLCYTEINE (brand for daily multiple vitamins) - Tier 2
full spectrum b/vitamin c (generic for DIALYVITE 800) - Tier 1; QL
healthy hair/skin/nails (generic for TAB-A-VITE/BETA CAROTENE) - Tier 1
INFUVITE ADULT - Tier 2
M-NATAL PLUS (brand for prenatal) - Tier 2; QL
multi vitamin (generic for TAB-A-VITE/BETA CAROTENE) - Tier 1
multi vitamin w/d-3 (generic for TAB-A-VITE/BETA CAROTENE) - Tier 1
multiple vitamin-folic acid (generic for TAB-A-VITE/BETA CAROTENE) - Tier 1
multiple vitamins essential (generic for TAB-A-VITE/BETA CAROTENE) - Tier 1
multi-vitamin (generic for TAB-A-VITE/BETA CAROTENE) - Tier 1
multivitamin w/fluoride (generic for MULTI-VIT-FLOR) - Tier 1; QL
multi-vitamin/fluoride (generic for FLORIVA PLUS) - Tier 1; QL
multivitamin/fluoride oral tablet chewable (generic for MULTI-VIT-FLOR) - Tier 1; QL
multi-vitamin/fluoride/iron - Tier 1; QL
mynephrocaps oral capsule 1 mg (generic for MYNEPHRON) - Tier 1
MYNEPHRON (brand for triphrocaps) - Tier 2
NEOMULTIVITE (brand for daily multiple vitamins) - Tier 2
NEONATAL PLUS (brand for prenatal) - Tier 2; QL
nephro vitamins (generic for DIALYVITE 800) - Tier 1; QL
NEPHRO-VITE (brand for full spectrum b/vitamin c) - Tier 2; QL
niacin er oral capsule extended release 250 mg - Tier 1; QL
niacin er oral capsule extended release 500 mg - Tier 1
niacin er oral tablet extended release 1000 mg - Tier 1
niacin er oral tablet extended release 250 mg, 500 mg (generic for SLO-NIACIN) - Tier 1
niacin oral tablet 100 mg, 250 mg, 50 mg - Tier 1
NIVA-PLUS (brand for prenatal) - Tier 2; QL
OBSTETRIX DHA - Tier 2; QL
once daily (generic for TAB-A-VITE/BETA CAROTENE) - Tier 1

Non-Preferred Agents

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Preferred Agents

one daily (generic for TAB-A-VITE/BETA CAROTENE) - Tier 1
ONE VITE DAILY MULTIVITAMIN (brand for daily multiple vitamins) - Tier 2
ONE VITE WOMENS - Tier 2; QL
ONE VITE WOMENS PLUS (brand for prenatal) - Tier 2; QL
one-daily multi vitamins (generic for TAB-A-VITE/BETA CAROTENE) - Tier 1
one-daily multi-vitamin (generic for TAB-A-VITE/BETA CAROTENE) - Tier 1
phytonadione injection solution 10 mg/ml - Tier 1; QL
phytonadione oral - Tier 1; QL
prenatal formula oral tablet 28-0.8 mg - Tier 1; QL
prenatal gummy oral tablet chewable 0.4-25 mg (generic for ONE A DAY PRENATAL) - Tier 1; QL
prenatal multi+dha - Tier 1; QL
prenatal multivitamins - Tier 1; QL
prenatal oral tablet 27-0.8 mg (generic for NEONATAL VITAMIN) - Tier 1; QL
prenatal oral tablet 27-1 mg (generic for NEONATAL PLUS) - Tier 1; QL
prenatal oral tablet 28-0.8 mg - Tier 1; QL
prenatal vitamins - Tier 1; QL
prenatal/iron - Tier 1; QL
PRONUTRIENTS VITAMIN D3 (brand for cvs d3) - Tier 2
QUFLORA PEDIATRIC ORAL SOLUTION 0.5 MG/ML (brand for multi-vitamin/fluoride) - Tier 2; QL
radiance platinum vitamin d3 (generic for RADIANCE PLATINUM VITAMIN D3) - Tier 1
RENAL (brand for triphrocaps) - Tier 2
rena-vite (generic for DIALYVITE 800) - Tier 1; QL
SLO-NIACIN (brand for niacin er) - Tier 2
stress formula (generic for TAB-A-VITE/BETA CAROTENE) - Tier 1
STUART ONE - Tier 2
tab-a-vite/beta carotene (generic for TAB-A-VITE/BETA CAROTENE) - Tier 1
THERA (brand for daily multiple vitamins) - Tier 2

Non-Preferred Agents

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Preferred Agents

thera-tabs (generic for TAB-A-VITE/BETA CAROTENE) - Tier 1
thiamine mononitrate oral - Tier 1; QL
 THRIVITE RX - Tier 2; QL
TM-DAILY VITE (brand for daily multiple vitamins) - Tier 2
triphrocaps (generic for MYNEPHRON) - Tier 1
tri-vite pediatric - Tier 1; QL
virt-caps (generic for MYNEPHRON) - Tier 1
vitachew vitamin d3 (generic for KIDS FIRST VITAMIN D3 GUMMIES) - Tier 1
vitamin a oral capsule 2400 mcg (8000 ut), 3 mg (10000 ut) - Tier 1; QL
vitamin b-1 oral tablet 100 mg - Tier 1; QL
vitamin d (cholecalciferol) oral tablet 10 mcg (400 unit) - Tier 1; QL
vitamin d (cholecalciferol) oral tablet 25 mcg (1000 ut) (generic for VITAMIN D-1000 MAX ST) - Tier 1
vitamin d oral capsule 25 mcg (1000 ut) (generic for PRONUTRIENTS VITAMIN D3) - Tier 1
vitamin d oral liquid (generic for BPROTECTED PEDIA D-VITE) - Tier 1; QL
vitamin d oral tablet chewable 10 mcg (400 unit) (generic for HEALTHY KIDS VITAMIN D3) - Tier 1
vitamin d3 oral capsule 1.25 mg (50000 ut) (generic for D3-50) - Tier 1; QL
vitamin d3 oral capsule 1000 unit, 25 mcg (1000 ut) (generic for PRONUTRIENTS VITAMIN D3) - Tier 1
vitamin d3 oral capsule 125 mcg (5000 ut) (generic for DIALYVITE VITAMIN D 5000) - Tier 1
vitamin d-3 oral capsule 125 mcg (5000 ut) (generic for DIALYVITE VITAMIN D 5000) - Tier 1
vitamin d3 oral capsule 250 mcg (10000 ut) (generic for IS-D 10,000) - Tier 1
vitamin d3 oral capsule 50 mcg (2000 ut) - Tier 1; QL
vitamin d-3 oral capsule 50 mcg (2000 ut) - Tier 1; QL
vitamin d3 oral liquid 10 mcg/ml (generic for BPROTECTED PEDIA D-VITE) - Tier 1; QL
vitamin d3 oral tablet 10 mcg (400 unit) - Tier 1; QL

Non-Preferred Agents

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Preferred Agents	Non-Preferred Agents
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vitamin d3 oral tablet 125 mcg (5000 ut) (generic for RADIANCE PLATINUM VITAMIN D3) - Tier 1
vitamin d3 oral tablet 25 mcg (1000 ut) (generic for VITAMIN D-1000 MAX ST) - Tier 1
vitamin d-3 oral tablet 25 mcg (1000 ut) (generic for VITAMIN D-1000 MAX ST) - Tier 1
vitamin d3 oral tablet 50 mcg (2000 ut) (generic for THERA-D 2000) - Tier 1; QL
vitamin d3 oral tablet chewable 10 mcg (400 unit) (generic for HEALTHY KIDS VITAMIN D3) - Tier 1
vitamin d3 oral tablet chewable 25 mcg (1000 ut) (generic for KIDS FIRST VITAMIN D3 GUMMIES) - Tier 1
vitamin d-400 oral tablet 10 mcg (400 unit) - Tier 1; QL
vitamin k1 injection solution 10 mg/ml - Tier 1; QL
vitamin-b complex - Tier 1
weekly-d (generic for D3-50) - Tier 1; QL
wescaps (generic for MYNEPHRON) - Tier 1
WESNATAL DHA COMPLETE - Tier 2; QL
WESTAB PLUS (brand for prenatal) - Tier 2; QL
womens prenatal+dha - Tier 1; QL

Estrogens - Hormone Replacement/Modifying Drugs	
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Hormonal Agents, Stimulant/Replacement/Modifying (Sex Hormones/Modifiers) - Drugs to Regulate Hormones

MYFEMBREE - Tier 2; PA; QL
NEXTSTELLIS - Tier 2; PA; QL

Gastrointestinal Agents	
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Anti-Constipation Agents

constulose - Tier 1; QL
enulose - Tier 1; QL

AMITIZA (brand for lubiprostone) - Tier 2; DX2RX; ST; QL
LINZESS - Tier 2; PA; QL

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Preferred Agents	Non-Preferred Agents
<i>generlac - Tier 1; QL</i> <i>lactulose encephalopathy - Tier 1; QL</i> <i>lactulose oral solution - Tier 1; QL</i> <i>lubiprostone (generic for AMITIZA) - Tier 1; DX2RX; ST; QL</i> MOTTEGRITY - Tier 2; ST; QL MOVANTIK - Tier 2; DX2RX; ST; QL	RELISTOR - Tier 2; PA; QL SYMPROIC - Tier 2; PA; QL TRULANCE - Tier 2; DX2RX; ST; QL
Anti-Constipation AgentsOther	
	IBSRELA - Tier 2; PA; QL
Anti-Diarrheal Agents	
<i>anti-diarrheal oral tablet 2 mg (generic for IMODIUM A-D) - Tier 1</i> <i>diamode (generic for IMODIUM A-D) - Tier 1</i> <i>diphenoxylate-atropine (generic for LOMOTIL) - Tier 1; QL</i> IMODIUM A-D ORAL TABLET (brand for anti-diarrheal) - Tier 2 <i>loperamide hcl oral capsule (generic for IMODIUM A-D) - Tier 1; QL</i> <i>loperamide hcl oral tablet (generic for IMODIUM A-D) - Tier 1</i> <i>meijer anti-diarrheal (generic for IMODIUM A-D) - Tier 1</i> MYTESI - Tier 2; DX2RX; QL	VIBERZI - Tier 2; PA; QL
Antispasmodics, Gastrointestinal	
<i>dicyclomine hcl oral - Tier 1; QL</i> <i>glycopyrrolate oral tablet 1 mg (generic for ROBINUL) - Tier 1</i> <i>glycopyrrolate oral tablet 2 mg (generic for ROBINUL-FORTE) - Tier 1</i>	
Gastrointestinal Agents, Other	
GATTEX - Tier 2; PA; SP; QL <i>gavilyte-c - Tier 1; QL</i> <i>gavilyte-g (generic for GAVILYTE-G) - Tier 1; QL</i> HELIDAC THERAPY - Tier 2; QL <i>peg 3350-kcl-na bicarb-nacl - Tier 1; QL</i>	CLENPIQ - Tier 2; PA; QL MOVIPREP (brand for peg-3350/electrolytes/ascorbat) - Tier 2; PA; QL OMECLAMOX-PAK - Tier 2; PA PLENVU - Tier 2; PA; QL PYLERA (brand for bis subcit-metronid-tetracyc) - Tier 2; PA

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Preferred Agents	Non-Preferred Agents
<p>peg-3350/electrolytes (generic for GAVILYTE-G) - Tier 1; QL ursodiol oral capsule 300 mg - Tier 1; QL ursodiol oral tablet (generic for URSO 250) - Tier 1</p>	<p>SUPREP BOWEL PREP KIT (brand for na sulfate-k sulfate-mg sulf) - Tier 2; PA; QL TALICIA - Tier 2; PA; QL</p>
Histamine2 (H2) Receptor Antagonists	
<p>acid controller (generic for PEPCID AC) - Tier 1; QL acid reducer oral tablet 10 mg (generic for PEPCID AC) - Tier 1; QL acid reducer oral tablet 200 mg (generic for TAGAMET HB 200) - Tier 1 cimetidine oral tablet 200 mg (generic for TAGAMET HB 200) - Tier 1 cimetidine oral tablet 300 mg, 400 mg, 800 mg - Tier 1; QL famotidine acid reducer oral tablet 10 mg (generic for PEPCID AC) - Tier 1; QL famotidine oral suspension reconstituted - Tier 1; QL; AL famotidine oral tablet (generic for MM ACID-PEP MAXIMUM STRENGTH) - Tier 1; QL famotidine orig st (generic for PEPCID AC) - Tier 1; QL ft acid reducer oral tablet (generic for PEPCID AC) - Tier 1; QL heartburn prevention oral tablet 10 mg (generic for PEPCID AC) - Tier 1; QL heartburn relief oral tablet 10 mg (generic for PEPCID AC) - Tier 1; QL heartburn relief oral tablet 200 mg (generic for TAGAMET HB 200) - Tier 1 TAGAMET HB 200 (brand for cimetidine) - Tier 2</p>	
Protectants	
<p>misoprostol oral (generic for CYTOTEC) - Tier 1; QL sucralfate oral suspension (generic for CARAFATE) - Tier 1; Members 10 years of age up to 65 years of age will require PA; QL sucralfate oral tablet (generic for CARAFATE) - Tier 1; QL</p>	
Proton Pump Inhibitors	

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Preferred Agents	Non-Preferred Agents
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acid reducer oral capsule delayed release 20.6 (20 base) mg - Tier 1; QL
esomeprazole magnesium oral packet (generic for NEXIUM) - Tier 1; Members >= 2 years of age will require PA; QL; AL
ft acid reducer oral capsule delayed release (generic for PREVACID 24HR) - Tier 1; QL
lansoprazole oral capsule delayed release 15 mg (generic for PREVACID 24HR) - Tier 1; QL
lansoprazole oral capsule delayed release 30 mg (generic for PREVACID) - Tier 1; QL
lansoprazole oral tablet delayed release dispersible 15 mg (generic for PREVACID SOLUTAB) - Tier 1; QL; AL
NEXIUM ORAL PACKET 2.5 MG, 5 MG - Tier 2; Members >= 2 years of age will require PA; QL; AL
omeprazole magnesium oral capsule delayed release - Tier 1; QL
omeprazole oral capsule delayed release 10 mg, 20 mg, 20.6 (20 base) mg, 40 mg - Tier 1; QL
pantoprazole sodium oral tablet delayed release (generic for PROTONIX) - Tier 1; QL
PREVACID 24HR (brand for eq lansoprazole) - Tier 2; QL

Gastrointestinal Agents - Drugs to Treat Bowel, Intestine and Stomach Conditions

Gastrointestinal Agents, Other - Miscellaneous Gastrointestinal Drugs

abatinex (generic for ABATINEX) - Tier 1
acid gone (generic for ACID GONE) - Tier 1
acidophilus lactobacillus oral (generic for ABATINEX) - Tier 1
acidophilus oral capsule , 10 mg (generic for ABATINEX) - Tier 1
acidophilus probiotic oral capsule 10 mg (generic for ABATINEX) - Tier 1
acidophilus probiotic oral tablet , 0.5 mg (generic for FLORANEX) - Tier 1

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Preferred Agents

acidophilus/l-sporogenes (generic for FLORANEX) - Tier 1
adult 50+ probiotic (generic for FLORA VANCE) - Tier 1; QL
adult probiotic (generic for FLORA VANCE) - Tier 1; QL
advanced antacid (generic for MINTOX) - Tier 1; QL
almacone double strength (generic for ALMACONE DOUBLE STRENGTH) - Tier 1; QL
alum & mag hydroxide-simeth (generic for MINTOX) - Tier 1; QL
antacid & anti-gas oral suspension 200-200-20 mg/5ml (generic for MINTOX) - Tier 1; QL
antacid & antigas oral suspension 2400-2400-240 mg/30ml (generic for ALMACONE DOUBLE STRENGTH) - Tier 1; QL
antacid & anti-gas oral suspension 400-400-40 mg/5ml (generic for ALMACONE DOUBLE STRENGTH) - Tier 1; QL
antacid & gas relief (generic for ALMACONE DOUBLE STRENGTH) - Tier 1; QL
antacid advanced (generic for ALMACONE DOUBLE STRENGTH) - Tier 1; QL
antacid advanced max st oral suspension 400-400-40 mg/5ml (generic for ALMACONE DOUBLE STRENGTH) - Tier 1; QL
antacid anti-gas (generic for MINTOX) - Tier 1; QL
antacid anti-gas ex st oral suspension 400-400-40 mg/5ml (generic for ALMACONE DOUBLE STRENGTH) - Tier 1; QL
antacid anti-gas max strength (generic for ALMACONE DOUBLE STRENGTH) - Tier 1; QL
antacid calcium (generic for CAL-GEST ANTACID) - Tier 1
antacid calcium rich (generic for CAL-GEST ANTACID) - Tier 1
antacid extra strength oral suspension (generic for ALMACONE DOUBLE STRENGTH) - Tier 1; QL
antacid extra strength oral tablet chewable 160-105 mg (generic for ACID GONE) - Tier 1
antacid extra strength oral tablet chewable 750 mg (generic for CVS CHEWY NOT CHALKY FLAVOR) - Tier 1
antacid fast relief (generic for MINTOX) - Tier 1; QL
antacid i (generic for MINTOX) - Tier 1; QL
antacid iii (generic for ALMACONE DOUBLE STRENGTH) - Tier 1; QL

Non-Preferred Agents

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Preferred Agents

Non-Preferred Agents

antacid kids (generic for CVS CHEWY NOT CHALKY FLAVOR) - Tier 1
antacid liquid (generic for MINTOX) - Tier 1; QL
antacid m (generic for MINTOX) - Tier 1; QL
antacid maximum (generic for TUMS ULTRA 1000) - Tier 1
antacid maximum strength oral suspension 400-400-40 mg/5ml (generic for ALMACONE DOUBLE STRENGTH) - Tier 1; QL
antacid maximum strength oral tablet chewable 1000 mg (generic for TUMS ULTRA 1000) - Tier 1
antacid oral suspension 200-200-20 mg/5ml, 400-400-40 mg/10ml (generic for MINTOX) - Tier 1; QL
antacid oral tablet chewable 1000 mg (generic for TUMS ULTRA 1000) - Tier 1
antacid oral tablet chewable 500 mg (generic for CAL-GEST ANTACID) - Tier 1
antacid oral tablet chewable 750 mg (generic for CVS CHEWY NOT CHALKY FLAVOR) - Tier 1
antacid plus antigas (generic for ALMACONE DOUBLE STRENGTH) - Tier 1; QL
antacid regular strength oral suspension (generic for MINTOX) - Tier 1; QL
antacid regular strength oral tablet chewable (generic for CAL-GEST ANTACID) - Tier 1
antacid supreme - Tier 1
antacid ultra strength (generic for TUMS ULTRA 1000) - Tier 1
antacid ultra strength oral tablet chewable 1000 mg (generic for TUMS ULTRA 1000) - Tier 1
antacid/antigas (generic for MINTOX) - Tier 1; QL
antacid/anti-gas max st (generic for ALMACONE DOUBLE STRENGTH) - Tier 1; QL
antacid/anti-gas oral suspension 200-200-20 mg/5ml, 400-400-40 mg/10ml (generic for MINTOX) - Tier 1; QL
antacid/anti-gas oral suspension 400-400-40 mg/5ml (generic for ALMACONE DOUBLE STRENGTH) - Tier 1; QL
antacid/gas relief max st (generic for ALMACONE DOUBLE STRENGTH) - Tier 1; QL

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Preferred Agents

Non-Preferred Agents

anti-diarr/ant-gas (generic for IMODIUM MULTI-SYMPTOM RELIEF) - Tier 1
anti-diarrheal anti-gas (generic for IMODIUM MULTI-SYMPTOM RELIEF) - Tier 1
anti-diarrheal oral suspension 262 mg/15ml (generic for SOOTHE) - Tier 1
anti-diarrheal/anti-gas (generic for IMODIUM MULTI-SYMPTOM RELIEF) - Tier 1
anti-gas oral capsule 180 mg (generic for GAS-X ULTRA STRENGTH) - Tier 1
biotinex (generic for ABATINEX) - Tier 1
bismuth (generic for SOOTHE) - Tier 1; QL
bismuth subsalicylate oral (generic for SOOTHE) - Tier 1; QL
calcium antacid (generic for CAL-GEST ANTACID) - Tier 1
calcium antacid ex st oral tablet chewable 750 mg (generic for CVS CHEWY NOT CHALKY FLAVOR) - Tier 1
calcium antacid extra strength (generic for CVS CHEWY NOT CHALKY FLAVOR) - Tier 1
calcium carbonate antacid oral suspension - Tier 1; QL
calcium carbonate antacid oral tablet - Tier 1
calcium carbonate antacid oral tablet chewable (generic for CAL-GEST ANTACID) - Tier 1
cal-gest antacid (generic for CAL-GEST ANTACID) - Tier 1
chewy not chalky flavor (generic for CVS CHEWY NOT CHALKY FLAVOR) - Tier 1
childrens soothe - Tier 1
comfort gel (generic for MINTOX) - Tier 1; QL
comfort gel antacid anti-gas oral suspension 400-400-40 mg/5ml (generic for ALMACONE DOUBLE STRENGTH) - Tier 1; QL
diarrhea (generic for SOOTHE) - Tier 1
diarrhea relief (generic for SOOTHE) - Tier 1
digestive probiotic oral capsule (generic for FLORA VANCE) - Tier 1; QL
digestive probiotic oral capsule 250 mg (generic for FLORASTOR) - Tier 1

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Preferred Agents

Non-Preferred Agents

diotame instydose (generic for SOOTHE) - Tier 1
enema (generic for FLEET ENEMA) - Tier 1; QL
enema disposable (generic for FLEET ENEMA) - Tier 1; QL
enema ready-to-use (generic for FLEET ENEMA) - Tier 1; QL
enema rectal enema 16-6 gm/133ml, 19-7 gm/118ml (generic for FLEET ENEMA) - Tier 1; QL
FLEET ENEMA (brand for cvs enema disposable) - Tier 2; QL
FLEET PEDIATRIC (brand for enema pediatric) - Tier 2; QL
FLORA VANCE (brand for cvs adult 50+ probiotic) - Tier 2; QL
floranex tablet oral (generic for FLORANEX) - Tier 1
FLORANEX TABLET ORAL (brand for acidophilus/l-sporogenes) - Tier 2
FLORASTOR (brand for cvs digestive probiotic) - Tier 2
foaming antacid oral tablet chewable 80-20 mg - Tier 1
freeze dried acidophilus (generic for ABATINEX) - Tier 1
ft antacid & antigas (generic for ALMACONE DOUBLE STRENGTH) - Tier 1; QL
ft antacid extra strength (generic for CVS CHEWY NOT CHALKY FLAVOR) - Tier 1
ft antacid regular strength (generic for CAL-GEST ANTACID) - Tier 1
ft gas relief - Tier 1
ft gas relief extra strength (generic for GAS-X EXTRA STRENGTH) - Tier 1
ft gas relief infants (generic for MYLICON INFANTS GAS RELIEF) - Tier 1; QL
ft gas relief ultra strength (generic for GAS-X ULTRA STRENGTH) - Tier 1
ft milk of magnesia (generic for DULCOLAX) - Tier 1
ft stomach relief oral suspension (generic for SOOTHE) - Tier 1
ft stomach relief oral tablet chewable (generic for SOOTHE) - Tier 1; QL
gas relief extra strength (generic for GAS-X EXTRA STRENGTH) - Tier 1
gas relief extra strength oral tablet chewable 125 mg (generic for GAS-X EXTRA STRENGTH) - Tier 1
gas relief extstrength (generic for GAS-X EXTRA STRENGTH) - Tier 1

Tier 1: Generic; Tier 2: Brand; ^: Medical Office Attestation Needed if Prescribed by Behavioral Health Provider, Full Prior Authorization Needed if Prescribed by Non-Behavioral Health Provider; *: Available without PA for participating Behavioral Health Prescribers; AL: Limited to members of a certain age; DX2RX: Diagnosis Required; GE: Gender Limit; PA: Prior Auth Required; QL: Quantity Limit; SP: Specialty Medication; ST: Step Therapy

Preferred Agents**Non-Preferred Agents**

gas relief infants (generic for MYLICON INFANTS GAS RELIEF) - Tier 1; QL
gas relief infants drops oral suspension 40 mg/0.6ml (generic for MYLICON INFANTS GAS RELIEF) - Tier 1; QL
gas relief infants oral suspension 20 mg/0.3ml (generic for MYLICON INFANTS GAS RELIEF) - Tier 1; QL
gas relief oral capsule 125 mg (generic for GAS-X EXTRA STRENGTH) - Tier 1
gas relief oral capsule 180 mg (generic for GAS-X ULTRA STRENGTH) - Tier 1
gas relief oral tablet chewable 125 mg (generic for GAS-X EXTRA STRENGTH) - Tier 1
gas relief oral tablet chewable 80 mg - Tier 1
gas relief ultra strength (generic for GAS-X ULTRA STRENGTH) - Tier 1
gas relief ultstrength (generic for GAS-X ULTRA STRENGTH) - Tier 1
GAS-X EXTRA STRENGTH ORAL CAPSULE (brand for eq gas relief) - Tier 2
GAS-X EXTRA STRENGTH ORAL TABLET CHEWABLE (brand for cvs gas relief extra strength) - Tier 2
GAS-X ULTRA STRENGTH (brand for cvs gas relief ultra strength) - Tier 2
GAVISCON - Tier 2
GAVISCON EXTRA RELIEF FORMULA (brand for cvs heartburn relief ex st) - Tier 2
GAVISCON EXTRA STRENGTH (brand for antacid extra strength) - Tier 2
GELUSIL - Tier 2
geri-lanta (generic for MINTOX) - Tier 1; QL
geri-lanta maximum strength (generic for ALMACONE DOUBLE STRENGTH) - Tier 1; QL
geri-lanta supreme - Tier 1
geri-mox (generic for MINTOX) - Tier 1; QL
heartburn antacid (generic for ACID GONE) - Tier 1
heartburn antacid ex st (generic for ACID GONE) - Tier 1

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Preferred Agents

Non-Preferred Agents

heartburn relief ex st (generic for GAVISCON EXTRA RELIEF FORMULA) - Tier 1
heartburn relief oral tablet chewable 160-105 mg (generic for ACID GONE) - Tier 1
heartland gas relief - Tier 1
high potency probiotic (generic for FLORA VANCE) - Tier 1; QL
IMODIUM MULTI-SYMPTOM RELIEF (brand for eq1 anti-diarrheal anti-gas) - Tier 2
infant gas relief (generic for MYLICON INFANTS GAS RELIEF) - Tier 1; QL
infants gas relief (generic for MYLICON INFANTS GAS RELIEF) - Tier 1; QL
intestinex (generic for ABATINEX) - Tier 1
KAOPECTATE ORAL SUSPENSION (brand for cvs anti-diarrheal) - Tier 2
lactobacillus oral tablet (generic for FLORANEX) - Tier 1
lacto-pectin (generic for FLORA VANCE) - Tier 1; QL
long lasting antacid (generic for CAL-GEST ANTACID) - Tier 1
loperamide-simethicone (generic for IMODIUM MULTI-SYMPTOM RELIEF) - Tier 1
MAALOX - Tier 2
MAALOX CHILDRENS (brand for childrens pepto) - Tier 2
MAALOX MAX ORAL SUSPENSION (brand for antacid & antigas) - Tier 2; QL
MAALOX MULTI SYMPTOM MAX ST (brand for antacid & antigas) - Tier 2; QL
mag-al plus (generic for MINTOX) - Tier 1; QL
mag-al plus xs (generic for ALMACONE DOUBLE STRENGTH) - Tier 1; QL
magnesium-aluminum-simethicone (generic for ALMACONE DOUBLE STRENGTH) - Tier 1; QL
mega probiotic (generic for FLORA VANCE) - Tier 1; QL
meijer antacid (generic for ALMACONE DOUBLE STRENGTH) - Tier 1; QL
milk of magnesia (generic for DULCOLAX) - Tier 1

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Preferred Agents**Non-Preferred Agents**

milk of magnesia oral suspension 1200 mg/15ml (generic for DULCOLAX) - Tier 1
mintox maximum strength (generic for ALMACONE DOUBLE STRENGTH) - Tier 1; QL
mintox plus - Tier 1
mood support probiotic (generic for FLORA VANCE) - Tier 1; QL
MYLICON INFANTS GAS RELIEF (brand for cvs gas relief infants) - Tier 2; QL
PEPTO-BISMOL ORAL SUSPENSION 524 MG/30ML (brand for cvs anti-diarrheal) - Tier 2
PHAZYME (brand for cvs gas relief extra strength) - Tier 2
PHAZYME ULTRA STRENGTH (brand for cvs gas relief ultra strength) - Tier 2
pink bismuth maximum strength (generic for SOOTHE MAXIMUM STRENGTH) - Tier 1
pink bismuth oral suspension 262 mg/15ml (generic for SOOTHE) - Tier 1
pink bismuth oral suspension 525 mg/15ml (generic for SOOTHE MAXIMUM STRENGTH) - Tier 1
pink bismuth oral tablet 262 mg (generic for KAOPECTATE) - Tier 1
pink bismuth oral tablet chewable 262 mg (generic for SOOTHE) - Tier 1; QL
pink bismuth ultra str (generic for SOOTHE MAXIMUM STRENGTH) - Tier 1
pink-bismuth (generic for SOOTHE) - Tier 1; QL
PROBIOMAX SERENITY (brand for acidophilus) - Tier 2
probiotic blend (generic for FLORA VANCE) - Tier 1; QL
probiotic colon care (generic for FLORA VANCE) - Tier 1; QL
probiotic complex (generic for FLORA VANCE) - Tier 1; QL
probiotic extra strength (generic for ABATINEX) - Tier 1
probiotic maximum strength (generic for FLORA VANCE) - Tier 1; QL
probiotic oral capsule (generic for FLORA VANCE) - Tier 1; QL
probiotic oral capsule 250 mg (generic for FLORASTOR) - Tier 1
probiotic pearls ex st (generic for FLORA VANCE) - Tier 1; QL

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Preferred Agents**Non-Preferred Agents**

ready-to-use enema rectal enema (generic for FLEET ENEMA) - Tier 1; QL
REPHRESH PRO-B (brand for acidophilus) - Tier 2
RESTORA (brand for cvs adult 50+ probiotic) - Tier 2; QL
REVITAFLO (brand for acidophilus) - Tier 2
RISAQUAD (brand for cvs adult 50+ probiotic) - Tier 2; QL
RISAQUAD-2 (brand for cvs adult 50+ probiotic) - Tier 2; QL
saccharomyces boulardii (generic for FLORASTOR) - Tier 1
saline enema (generic for FLEET ENEMA) - Tier 1; QL
senior probiotic (generic for FLORA VANCE) - Tier 1; QL
simaped (generic for MYLICON INFANTS GAS RELIEF) - Tier 1; QL
simethicone drops infants (generic for MYLICON INFANTS GAS RELIEF) - Tier 1; QL
simethicone oral capsule (generic for GAS-X EXTRA STRENGTH) - Tier 1
simethicone oral suspension (generic for MYLICON INFANTS GAS RELIEF) - Tier 1; QL
simethicone oral tablet chewable (generic for GAS-X EXTRA STRENGTH) - Tier 1
simethicone ultra strength (generic for GAS-X ULTRA STRENGTH) - Tier 1
smooth antacid ex st oral tablet chewable 750 mg (generic for CVS CHEWY NOT CHALKY FLAVOR) - Tier 1
smooth antacid extra st (generic for CVS CHEWY NOT CHALKY FLAVOR) - Tier 1
smooth antacid extra strength (generic for CVS CHEWY NOT CHALKY FLAVOR) - Tier 1
sodium bicarbonate oral tablet - Tier 1
soothe maximum strength (generic for SOOTHE MAXIMUM STRENGTH) - Tier 1
soothe oral suspension (generic for SOOTHE) - Tier 1
soothe oral tablet chewable (generic for SOOTHE) - Tier 1; QL
stomach relief extra strength (generic for SOOTHE MAXIMUM STRENGTH) - Tier 1

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Preferred Agents	Non-Preferred Agents
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stomach relief max st oral suspension 525 mg/15ml (generic for SOOTHE MAXIMUM STRENGTH) - Tier 1
stomach relief oral suspension 1050 mg/30ml, 525 mg/15ml (generic for SOOTHE MAXIMUM STRENGTH) - Tier 1
stomach relief oral suspension 262 mg/15ml, 525 mg/30ml, 527 mg/30ml (generic for SOOTHE) - Tier 1
stomach relief oral tablet 262 mg (generic for KAOPECTATE) - Tier 1
stomach relief oral tablet chewable 262 mg (generic for SOOTHE) - Tier 1; QL
stomach relief plus (generic for SOOTHE MAXIMUM STRENGTH) - Tier 1
stomach relief ultra oral suspension 525 mg/15ml (generic for SOOTHE MAXIMUM STRENGTH) - Tier 1
TEENY TUMMY GAS RELIEF DROPS (brand for cvs gas relief infants) - Tier 2; QL
TUMS (brand for antacid) - Tier 2
TUMS CHEWY BITES (brand for antacid) - Tier 2
TUMS E-X 750 (brand for antacid) - Tier 2
TUMS EXTRA STRENGTH 750 (brand for antacid) - Tier 2
TUMS LASTING EFFECTS (brand for antacid) - Tier 2
TUMS SMOOTHIES (brand for antacid) - Tier 2
TUMS ULTRA 1000 (brand for antacid maximum) - Tier 2
ZELAC (brand for cvs adult 50+ probiotic) - Tier 2; QL

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Laxatives - Bowel Treatment Drugs

clearlax oral powder 17 gm/scoop (generic for CLEARLAX) - Tier 1; ONLY powder bottle; QL
daily fiber oral capsule 0.52 gm (generic for MEDI-MUCIL) - Tier 1
enema mineral oil (generic for FLEET OIL) - Tier 1; QL
EVAC (brand for cvs natural fiber supplement) - Tier 2; QL
fiber laxative oral capsule 0.52 gm (generic for MEDI-MUCIL) - Tier 1
fiber oral capsule 0.52 gm (generic for MEDI-MUCIL) - Tier 1
fiber oral powder 28.3 %, 58.6 % (generic for METAMUCIL SMOOTH TEXTURE) - Tier 1; QL

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Preferred Agents**Non-Preferred Agents**

fiber oral powder 48.57 % (generic for REGULOID) - Tier 1; QL
fiber therapy oral capsule 0.52 gm (generic for MEDI-MUCIL) - Tier 1
fiber therapy oral powder 28.3 % (generic for METAMUCIL SMOOTH TEXTURE) - Tier 1; QL
FLEET OIL (brand for cvs mineral oil enema) - Tier 2; QL
ft clearlax (generic for CLEARLAX) - Tier 1; ONLY powder bottle; QL
ft mineral oil - Tier 1
gavilax oral powder (generic for CLEARLAX) - Tier 1; ONLY powder bottle; QL
gentlelax (generic for CLEARLAX) - Tier 1; ONLY powder bottle; QL
glycolax (generic for CLEARLAX) - Tier 1; ONLY powder bottle; QL
konsyl daily fiber oral powder 28.3 % (generic for METAMUCIL SMOOTH TEXTURE) - Tier 1; QL
laxaclear (generic for CLEARLAX) - Tier 1; ONLY powder bottle; QL
laxative oral powder 17 gm/scoop (generic for CLEARLAX) - Tier 1; ONLY powder bottle; QL
mineral oil enema (generic for FLEET OIL) - Tier 1; QL
mineral oil heavy oral - Tier 1
mineral oil oral oil - Tier 1
mineral oil rectal enema (generic for FLEET OIL) - Tier 1; QL
MIRALAX ORAL POWDER (brand for ft clearlax) - Tier 2; ONLY powder bottle; QL
mm clearlax (generic for CLEARLAX) - Tier 1; ONLY powder bottle; QL
natural daily fiber (generic for METAMUCIL SMOOTH TEXTURE) - Tier 1; QL
natural fiber oral capsule 0.52 gm (generic for MEDI-MUCIL) - Tier 1
natural fiber oral powder 28.3 %, 58.6 % (generic for METAMUCIL SMOOTH TEXTURE) - Tier 1; QL
natural fiber supplement (generic for EVAC) - Tier 1; QL
natural vegetable (generic for HYDROCIL) - Tier 1; QL
natura-lax (generic for CLEARLAX) - Tier 1; ONLY powder bottle; QL
peg 3350 oral powder (generic for CLEARLAX) - Tier 1; ONLY powder bottle; QL
polyethylene glycol 3350 oral powder (generic for CLEARLAX) - Tier 1; ONLY powder bottle; QL

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Preferred Agents	Non-Preferred Agents
<p>polyethylene glycol 3350-grx oral powder (generic for CLEARLAX) - Tier 1; ONLY powder bottle; QL</p> <p>psyldex - Tier 1; QL</p> <p>purelax oral powder (generic for CLEARLAX) - Tier 1; ONLY powder bottle; QL</p> <p>smooth lax oral powder (generic for CLEARLAX) - Tier 1; ONLY powder bottle; QL</p> <p>sorbitol oral - Tier 1</p>	

Laxatives - Drugs to treat Constipation

<p>AVEDANA GLYCERIN (ADULT) (brand for cvs glycerin adult) - Tier 2</p> <p>citroma (generic for CITROMA) - Tier 1</p> <p>CITRUCCEL ORAL POWDER - Tier 2; QL</p> <p>CITRUCCEL ORAL TABLET (brand for cvs soluble fiber therapy) - Tier 2</p> <p>COLACE (brand for cvs stool softener) - Tier 2; QL</p> <p>col-rite oral capsule 250 mg - Tier 1; QL</p> <p>docusate calcium (generic for SURFAK) - Tier 1</p> <p>docusate mini (generic for DOCUSOL MINI) - Tier 1; QL</p> <p>docusate sodium oral capsule (generic for COLACE) - Tier 1; QL</p> <p>docusate sodium oral liquid (generic for ONELAX DOCUSATE SODIUM) - Tier 1; QL</p> <p>docusate sodium oral syrup - Tier 1</p> <p>DOCUSOL MINI (brand for docusate mini) - Tier 2; QL</p> <p>docuzen (generic for SENEXON-S) - Tier 1</p> <p>dss (generic for COLACE) - Tier 1; QL</p> <p>easy-lax plus (generic for SENEXON-S) - Tier 1</p> <p>ENEMEEZ MINI (brand for docusate mini) - Tier 2; QL</p> <p>EX-LAX MAXIMUM STRENGTH (brand for cvs laxative pills max st) - Tier 2</p> <p>fiber laxative + calcium (generic for FIBERCON) - Tier 1</p> <p>fiber laxative oral tablet 500 mg (generic for CITRUCCEL) - Tier 1</p> <p>fiber oral tablet 500 mg (generic for CITRUCCEL) - Tier 1</p> <p>fiber oral tablet 625 mg (generic for FIBERCON) - Tier 1</p> <p>fiber therapy oral tablet 500 mg (generic for CITRUCCEL) - Tier 1</p>	
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Preferred Agents**Non-Preferred Agents**

fiber therapy oral tablet 625 mg (generic for FIBERCON) - Tier 1
fiber-caps (generic for FIBERCON) - Tier 1
fiber-lax (generic for FIBERCON) - Tier 1
*FRESKARO MAGNESIUM CITRATE (brand for cvs magnesium citrate)
- Tier 2*
ft fiber laxative (generic for CITRUCEL) - Tier 1
ft magnesium citrate (generic for CITROMA) - Tier 1
ft senna laxatives (generic for SENOKOT) - Tier 1; QL
ft senna-s (generic for SENEXON-S) - Tier 1
ft stool softener oral capsule (generic for COLACE) - Tier 1; QL
ft stool softener oral tablet 50-8.6 mg (generic for SENEXON-S) - Tier 1
geri-kot (generic for SENOKOT) - Tier 1; QL
*glycerin (adult) rectal suppository 2 gm (generic for AVEDANA
GLYCERIN (ADULT)) - Tier 1*
glycerin (infants & children) rectal suppository 1 gm - Tier 1
*glycerin adult rectal suppository 2 gm (generic for AVEDANA
GLYCERIN (ADULT)) - Tier 1*
glycerin child rectal suppository 1 gm, 1.2 gm - Tier 1
glycerin childrens - Tier 1
glycerin pediatric rectal suppository 1.2 gm - Tier 1
laxacin (generic for SENEXON-S) - Tier 1
laxative max str (generic for EX-LAX MAXIMUM STRENGTH) - Tier 1
*laxative maximum strength oral tablet 25 mg (generic for EX-LAX
MAXIMUM STRENGTH) - Tier 1*
*laxative pills max st (generic for EX-LAX MAXIMUM STRENGTH) - Tier
1*
*laxative pills oral tablet 25 mg (generic for EX-LAX MAXIMUM
STRENGTH) - Tier 1*
laxative regular strength (generic for SENNA SMOOTH) - Tier 1
magnesium citrate oral solution (generic for CITROMA) - Tier 1
mm stool softener laxative (generic for COLACE) - Tier 1; QL
natural senna laxative (generic for SENOKOT) - Tier 1; QL
*natural vegetable laxative oral tablet 8.6 mg (generic for SENOKOT) -
Tier 1; QL*

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Preferred Agents

ONELAX DOCUSATE SODIUM (brand for docusate sodium) - Tier 2; QL
 ONELAX MAGNESIUM CITRATE (brand for cvs magnesium citrate) - Tier 2
 ONELAX SENNA (brand for senna) - Tier 2
 p col-rite (generic for SENEXON-S) - Tier 1
 PEDIA-LAX ORAL LIQUID - Tier 2
 PERDIEM OVERNIGHT RELIEF (brand for laxative regular strength) - Tier 2
 sb docusate sodium/senna (generic for SENEXON-S) - Tier 1
 senexon-s (generic for SENEXON-S) - Tier 1
 senna lax (generic for SENOKOT) - Tier 1; QL
 senna laxative (generic for SENOKOT) - Tier 1; QL
 senna oral liquid (generic for ONELAX SENNA) - Tier 1
 senna oral syrup (generic for ONELAX SENNA) - Tier 1
 senna oral tablet (generic for SENOKOT) - Tier 1; QL
 senna plus oral tablet (generic for SENEXON-S) - Tier 1
 senna s (generic for SENEXON-S) - Tier 1
 senna smooth (generic for SENNA SMOOTH) - Tier 1
 senna-docusate sodium (generic for SENEXON-S) - Tier 1
 senna-lax (generic for SENOKOT) - Tier 1; QL
 senna-plus (generic for SENEXON-S) - Tier 1
 senna-s oral tablet 8.6-50 mg (generic for SENEXON-S) - Tier 1
 senna-tabs (generic for SENOKOT) - Tier 1; QL
 senna-time (generic for SENOKOT) - Tier 1; QL
 senna-time s (generic for SENEXON-S) - Tier 1
 sennazon (generic for ONELAX SENNA) - Tier 1
 SENOKOT (brand for cvs senna) - Tier 2; QL
 SENOKOT S (brand for cvs senna plus) - Tier 2
 soluble fiber therapy (generic for CITRUCCEL) - Tier 1
 stimulant laxative oral tablet 8.6-50 mg (generic for SENEXON-S) - Tier 1
 stool softener laxative oral capsule (generic for COLACE) - Tier 1; QL
 stool softener oral capsule 100 mg (generic for COLACE) - Tier 1; QL
 stool softener oral capsule 240 mg (generic for SURFAK) - Tier 1

Non-Preferred Agents

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Preferred Agents	Non-Preferred Agents
<p><i>stool softener oral capsule 250 mg - Tier 1; QL</i> <i>stool softener oral capsule 50 mg (generic for COLACE CLEAR) - Tier 1</i> <i>stool softener pls laxative (generic for SENEXON-S) - Tier 1</i> <i>stool softener plus laxative (generic for SENEXON-S) - Tier 1</i> <i>stool softener/laxative (generic for SENEXON-S) - Tier 1</i> <i>stool softener/laxative oral tablet (generic for SENEXON-S) - Tier 1</i> <i>vegetable lax+stool softener (generic for SENEXON-S) - Tier 1</i> <i>vegetable laxative (generic for SENOKOT) - Tier 1; QL</i></p>	
<p>Genetic or Enzyme or Protein Disorder: Replacement, Modifiers, Treatment</p>	
<p>CHOLBAM - Tier 2; PA; SP; QL CREON - Tier 2 CYSTAGON - Tier 2; SP; QL NITYR - Tier 2; DX2RX; SP; QL RAVICTI - Tier 2; PA; SP; QL <i>sapropterin dihydrochloride (generic for JAVYGTOR) - Tier 1; DX2RX; SP; QL</i> <i>sodium phenylbutyrate oral powder (generic for BUPHENYL) - Tier 1; DX2RX; SP; QL</i> STRENSIQ - Tier 2; PA; SP TEGSEDI - Tier 2; PA; SP; QL VYNDAMAX - Tier 2; PA; SP; QL VYNDAQEL - Tier 2; PA; SP; QL</p>	<p><i>betaine (generic for CYSTADANE) - Tier 1; PA; SP; QL</i> CERDELGA - Tier 2; PA; SP; QL <i>ORFADIN (brand for nitisinone) - Tier 2; PA; SP; QL</i> PERTZYE - Tier 2; PA VIOKACE - Tier 2; PA <i>ZAVESCA (brand for miglustat) - Tier 2; PA; SP; QL</i> ZENPEP - Tier 2; PA</p>
<p>Genitourinary Agents</p>	
<p>Antispasmodics, Urinary</p>	
<p><i>oxybutynin chloride er - Tier 1; QL</i> <i>oxybutynin chloride oral tablet 5 mg - Tier 1; QL</i> OXYTROL FOR WOMEN - Tier 2; QL <i>tolterodine tartrate (generic for DETROL) - Tier 1; ST; QL</i> <i>tropium chloride - Tier 1; ST; QL</i></p>	<p><i>DETROL (brand for tolterodine tartrate) - Tier 2; PA; ST; QL</i> <i>DETROL LA (brand for tolterodine tartrate er) - Tier 2; PA; QL</i> MYRBETRIQ ORAL SUSPENSION RECONSTITUTED ER - Tier 2; PA; QL; AL</p>

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Preferred Agents	Non-Preferred Agents
	MYRBETRIQ ORAL TABLET EXTENDED RELEASE 24 HOUR - Tier 2; PA; QL TOVIAZ (brand for fesoterodine fumarate er) - Tier 2; PA; QL VESICARE (brand for solifenacin succinate) - Tier 2; PA; QL
Benign Prostatic Hypertrophy Agents	
alfuzosin hcl er (generic for UROXATRAL) - Tier 1; QL finasteride oral tablet 5 mg (generic for PROSCAR) - Tier 1; QL tamsulosin hcl (generic for FLOMAX) - Tier 1; QL terazosin hcl - Tier 1; QL	
Genitourinary Agents, Other	
bethanechol chloride oral - Tier 1 ELMIRON - Tier 2; DX2RX; QL penicillamine oral tablet (generic for DEPEN TITRATABS) - Tier 1; DX2RX; SP; QL	CUPRIMINE (brand for penicillamine) - Tier 2; PA; SP DEPEN TITRATABS (brand for penicillamine) - Tier 2; DX2RX; SP; QL THIOLA (brand for tiopronin) - Tier 2; PA; SP; QL THIOLA EC - Tier 2; PA; SP; QL
Genitourinary Agents - Drugs to Treat Bladder, Genital and Kidney Conditions	
Genitourinary Agents, Other - Miscellaneous Bladder, Genital, and Kidney Conditions Drugs	
azo (generic for PHENAZO) - Tier 1 phenazo oral tablet 200 mg (generic for PHENAZO) - Tier 1; QL phenazo oral tablet 95 mg (generic for PHENAZO) - Tier 1 phenazopyridine hcl oral (generic for PHENAZO) - Tier 1; QL PYRIDIDIUM (brand for phenazopyridine hcl) - Tier 2; QL urinary pain relief oral tablet 95 mg (generic for PHENAZO) - Tier 1	
Glycemic Agents - Diabetic Drugs	

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Preferred Agents	Non-Preferred Agents
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Blood Glucose Regulators - Drugs to Regulate Blood Sugar

ZEGALOGUE - Tier 2; QL

Hormonal Agents, Stimulant/Replacement/Modifying (Adrenal)

dexamethasone intensol - Tier 1; QL
dexamethasone oral elixir - Tier 1; QL
dexamethasone oral solution - Tier 1; QL
dexamethasone oral tablet 0.5 mg, 0.75 mg, 1 mg, 2 mg - Tier 1
dexamethasone oral tablet 1.5 mg, 4 mg, 6 mg - Tier 1; QL
fludrocortisone acetate oral - Tier 1; QL
hydrocortisone oral (generic for CORTEF) - Tier 1; QL
 MEDROL ORAL TABLET 2 MG - Tier 2
methylprednisolone oral (generic for MEDROL) - Tier 1; QL
prednisolone oral solution - Tier 1; QL
prednisolone sodium phosphate oral solution 15 mg/5ml - Tier 1
prednisolone sodium phosphate oral solution 6.7 (5 base) mg/5ml (generic for PEDIAPRED) - Tier 1; QL
prednisone oral - Tier 1; QL

ACTHAR - Tier 2; PA; SP; QL
 CORTROPHIN - Tier 2; PA; SP; QL
 EMFLAZA ORAL SUSPENSION - Tier 2; PA; SP; QL
 TAPERDEX 12-DAY - Tier 2; PA; QL
 TAPERDEX 6-DAY (brand for dexamethasone) - Tier 2; PA; QL
 TAPERDEX 7-DAY - Tier 2; PA; QL

Hormonal Agents, Stimulant/Replacement/Modifying (Pituitary)

CHORIONIC GONADOTROPIN INTRAMUSCULAR (brand for chorionic gonadotropin) - Tier 2; DX2RX; QL
desmopressin ace spray refrig - Tier 1; QL
desmopressin acetate oral (generic for DDAVP) - Tier 1; QL
desmopressin acetate spray - Tier 1; QL
 EGRIFTA SV - Tier 2; DX2RX; SP; QL
 INCRELEX - Tier 2; PA; SP
 NOCDURNA - Tier 2; PA; QL
 NORDITROPIN FLEXPPO - Tier 2; PA; SP
 NOVAREL INTRAMUSCULAR SOLUTION RECONSTITUTED 10000 UNIT (brand for chorionic gonadotropin) - Tier 2; DX2RX; QL

GENOTROPIN - Tier 2; PA; SP
 GENOTROPIN MINIQUICK - Tier 2; PA; SP
 HUMATROPE - Tier 2; PA; SP
 OMNITROPE - Tier 2; PA; SP
 SAIZEN - Tier 2; PA; SP
 ZOMACTON - Tier 2; PA; SP

Tier 1: Generic; Tier 2: Brand; ^: Medical Office Attestation Needed if Prescribed by Behavioral Health Provider, Full Prior Authorization Needed if Prescribed by Non-Behavioral Health Provider; *: Available without PA for participating Behavioral Health Prescribers; AL: Limited to members of a certain age; DX2RX: Diagnosis Required; GE: Gender Limit; PA: Prior Auth Required; QL: Quantity Limit; SP: Specialty Medication; ST: Step Therapy

Preferred Agents	Non-Preferred Agents
NOVAREL INTRAMUSCULAR SOLUTION RECONSTITUTED 5000 UNIT - Tier 2; DX2RX NUTROPIN AQ NUSPIN 10 - Tier 2; PA; SP NUTROPIN AQ NUSPIN 20 - Tier 2; PA; SP NUTROPIN AQ NUSPIN 5 - Tier 2; PA; SP PREGNYL (brand for chorionic gonadotropin) - Tier 2; DX2RX; QL	
Hormonal Agents, Stimulant/Replacement/Modifying (Pituitary) - Drugs to Regulate Hormones	
Hormonal Agents, Stimulant/Replacement/Modifying (Pituitary) - Hormone Replacement/Modifying Drugs	
OVIDREL - Tier 2; DX2RX	SKYTROFA SUBCUTANEOUS CARTRIDGE 4.3 MG - Tier 2; PA; SP; QL
Hormonal Agents, Stimulant/Replacement/Modifying (Prostaglandins)	
KORLYM - Tier 2; PA; SP; QL <i>methergine (generic for METHERGINE) - Tier 1; QL</i> <i>methylergonovine maleate oral (generic for METHERGINE) - Tier 1; QL</i>	
Hormonal Agents, Stimulant/Replacement/Modifying (Sex Hormones/Modifiers)	
Androgens	
<i>danazol oral - Tier 1; QL</i> <i>testosterone cypionate intramuscular (generic for DEPO-TESTOSTERONE) - Tier 1; QL</i> <i>testosterone enanthate intramuscular - Tier 1; QL</i> <i>testosterone transdermal gel 12.5 mg/act (1%) (generic for VOGELXO PUMP) - Tier 1; PA; QL</i> <i>testosterone transdermal gel 25 mg/2.5gm (1%) - Tier 1; PA; QL</i>	ANDRODERM - Tier 2; PA; QL <i>FORTESTA (brand for testosterone) - Tier 2; PA; QL</i> NATESTO - Tier 2; PA; QL <i>TESTIM (brand for testosterone) - Tier 2; PA; QL</i> <i>VOGELXO (brand for testosterone) - Tier 2; PA; QL</i> XYOSTED - Tier 2; PA; QL

Tier 1: Generic; Tier 2: Brand; ^: Medical Office Attestation Needed if Prescribed by Behavioral Health Provider, Full Prior Authorization Needed if Prescribed by Non-Behavioral Health Provider; *: Available without PA for participating Behavioral Health Prescribers; AL: Limited to members of a certain age; DX2RX: Diagnosis Required; GE: Gender Limit; PA: Prior Auth Required; QL: Quantity Limit; SP: Specialty Medication; ST: Step Therapy

Preferred Agents	Non-Preferred Agents
<p>testosterone transdermal gel 50 mg/5gm (1%) (generic for TESTIM) - Tier 1; PA; QL</p>	
<p>Estrogens</p>	
<p>afirmelle (generic for AFIRMELLE) - Tier 1; QL; GE ALORA (brand for estradiol) - Tier 2; QL altavera (generic for ALTAVERA) - Tier 1; QL; GE alyacen 1/35 (generic for DASETTA 1/35) - Tier 1; QL; GE alyacen 7/7/7 (generic for DASETTA 7/7/7) - Tier 1; QL; GE amethia (generic for AMETHIA) - Tier 1; QL apri - Tier 1; QL; GE aranelle - Tier 1; QL; GE ashlyna (generic for AMETHIA) - Tier 1; QL aubra eq (generic for AFIRMELLE) - Tier 1; QL; GE aurovela 1.5/30 (generic for AUROVELA 1.5/30) - Tier 1; QL; GE aurovela 1/20 (generic for AUROVELA 1/20) - Tier 1; QL; GE aurovela 24 fe - Tier 1; QL aurovela fe 1.5/30 (generic for AUROVELA FE 1.5/30) - Tier 1; QL; GE aurovela fe 1/20 (generic for AUROVELA FE 1/20) - Tier 1; QL; GE aviane (generic for AFIRMELLE) - Tier 1; QL; GE ayuna (generic for ALTAVERA) - Tier 1; QL; GE azurette (generic for AZURETTE) - Tier 1; QL; GE balziva (generic for BALZIVA) - Tier 1; QL; GE blisovi 24 fe - Tier 1; QL blisovi fe 1.5/30 (generic for AUROVELA FE 1.5/30) - Tier 1; QL; GE blisovi fe 1/20 (generic for AUROVELA FE 1/20) - Tier 1; QL; GE briellyn (generic for BALZIVA) - Tier 1; QL; GE camrese (generic for AMETHIA) - Tier 1; QL camrese lo (generic for CAMRESE LO) - Tier 1; QL charlotte 24 fe (generic for CHARLOTTE 24 FE) - Tier 1; QL; GE chateal eq (generic for ALTAVERA) - Tier 1; QL; GE cryselle-28 - Tier 1; QL; GE cyred eq - Tier 1; QL; GE dasetta 1/35 (generic for DASETTA 1/35) - Tier 1; QL; GE</p>	<p>ACTIVEVELLA (brand for estradiol-norethindrone acet) - Tier 2; PA; QL ANGELIQ - Tier 2; PA; QL ANNOVERA - Tier 2; PA; QL BALCOLTRA (brand for levonorgest-eth estradiol-iron) - Tier 2; PA; QL BEYAZ (brand for drospiren-eth estrad-levomefol) - Tier 2; PA; QL BIJUVA ORAL CAPSULE 1-100 MG - Tier 2; PA; QL CLIMARA (brand for estradiol) - Tier 2; PA; QL CLIMARA PRO - Tier 2; PA; QL COMBIPATCH - Tier 2; PA; QL DIVIGEL (brand for estradiol) - Tier 2; PA; QL ELESTRIN - Tier 2; PA; QL ESTRACE (brand for estradiol) - Tier 2; PA; QL estradiol transdermal gel (generic for DIVIGEL) - Tier 1; PA; QL EVAMIST - Tier 2; PA; QL FEMRING - Tier 2; PA; QL fyavolv - Tier 1; PA; QL jinteli - Tier 1; PA; QL LO LOESTRIN FE - Tier 2; PA; QL MENEST - Tier 2; PA; QL mimvey - Tier 1; PA; QL MINIVELLE (brand for estradiol) - Tier 2; PA; QL NATAZIA - Tier 2; PA; QL NUVARING (brand for etonogestrel-ethinyl estradiol) - Tier 2; PA; QL; GE PREMARIN VAGINAL - Tier 2; PA; QL SAFYRAL (brand for drospiren-eth estrad-levomefol) - Tier 2; PA; QL VAGIFEM (brand for estradiol) - Tier 2; PA; QL VIVELLE-DOT (brand for estradiol) - Tier 2; PA; QL YASMIN 28 (brand for drospirenone-ethinyl estradiol) - Tier 2; PA; QL YAZ (brand for drospirenone-ethinyl estradiol) - Tier 2; PA; QL</p>

Tier 1: Generic; Tier 2: Brand; ^: Medical Office Attestation Needed if Prescribed by Behavioral Health Provider, Full Prior Authorization Needed if Prescribed by Non-Behavioral Health Provider; *: Available without PA for participating Behavioral Health Prescribers; AL: Limited to members of a certain age; DX2RX: Diagnosis Required; GE: Gender Limit; PA: Prior Auth Required; QL: Quantity Limit; SP: Specialty Medication; ST: Step Therapy

Preferred Agents

dasetta 7/7/7 (generic for DASETTA 7/7/7) - Tier 1; QL; GE
daysee (generic for AMETHIA) - Tier 1; QL
delyla (generic for AFIRMELLE) - Tier 1; QL; GE
 DEPO-ESTRADIOL - Tier 2; QL
desogestrel-ethinyl estradiol oral tablet 0.15-0.02/0.01 mg (21/5) (generic for AZURETTE) - Tier 1; QL; GE
dotti (generic for DOTTI) - Tier 1; QL
drospirenone-ethinyl estradiol (generic for JASMIEL) - Tier 1; QL
 DUAVEE - Tier 2; QL
elinest - Tier 1; QL; GE
eluryng (generic for ELURYNG) - Tier 1; QL; GE
enilloring (generic for ELURYNG) - Tier 1; QL; GE
enpresse-28 (generic for ENPRESSE-28) - Tier 1; QL; GE
enskyce - Tier 1; QL; GE
estarylla (generic for ESTARYLLA) - Tier 1; QL; GE
estradiol oral (generic for ESTRACE) - Tier 1; QL
estradiol transdermal patch twice weekly (generic for DOTTI) - Tier 1; QL
estradiol transdermal patch weekly (generic for CLIMARA) - Tier 1; QL
estradiol vaginal (generic for ESTRACE) - Tier 1; QL
ethynodiol diac-eth estradiol (generic for KELNOR 1/35) - Tier 1; QL; GE
etonogestrel-ethinyl estradiol (generic for ELURYNG) - Tier 1; QL; GE
falmina (generic for AFIRMELLE) - Tier 1; QL; GE
finzala (generic for CHARLOTTE 24 FE) - Tier 1; QL; GE
hailey 1.5/30 (generic for AUROVELA 1.5/30) - Tier 1; QL; GE
hailey 24 fe - Tier 1; QL
hailey fe 1.5/30 (generic for AUROVELA FE 1.5/30) - Tier 1; QL; GE
hailey fe 1/20 (generic for AUROVELA FE 1/20) - Tier 1; QL; GE
haloette (generic for ELURYNG) - Tier 1; QL; GE
iclevia (generic for ICLEVIA) - Tier 1; QL
introvale (generic for ICLEVIA) - Tier 1; QL
isibloom - Tier 1; QL; GE
jaimiess (generic for AMETHIA) - Tier 1; QL
jasmiel (generic for JASMIEL) - Tier 1; QL
jolessa (generic for ICLEVIA) - Tier 1; QL

Non-Preferred Agents

Tier 1: Generic; Tier 2: Brand; ^: Medical Office Attestation Needed if Prescribed by Behavioral Health Provider, Full Prior Authorization Needed if Prescribed by Non-Behavioral Health Provider; *: Available without PA for participating Behavioral Health Prescribers; AL: Limited to members of a certain age; DX2RX: Diagnosis Required; GE: Gender Limit; PA: Prior Auth Required; QL: Quantity Limit; SP: Specialty Medication; ST: Step Therapy

Preferred Agents**Non-Preferred Agents**

juleber - Tier 1; QL; GE
junel 1.5/30 (generic for AUROVELA 1.5/30) - Tier 1; QL; GE
junel 1/20 (generic for AUROVELA 1/20) - Tier 1; QL; GE
junel fe oral tablet 1.5-30 mg-mcg (generic for AUROVELA FE 1.5/30) - Tier 1; QL; GE
junel fe oral tablet 1-20 mg-mcg (generic for AUROVELA FE 1/20) - Tier 1; QL; GE
junel fe oral tablet 1-20 mg-mcg(24) - Tier 1; QL
kalliga - Tier 1; QL; GE
kariva (generic for AZURETTE) - Tier 1; QL; GE
kelnor 1/35 (generic for KELNOR 1/35) - Tier 1; QL; GE
kelnor 1/50 (generic for KELNOR 1/50) - Tier 1; QL; GE
kurvelo (generic for ALTAVERA) - Tier 1; QL; GE
larin 1.5/30 (generic for AUROVELA 1.5/30) - Tier 1; QL; GE
larin 1/20 (generic for AUROVELA 1/20) - Tier 1; QL; GE
larin 24 fe - Tier 1; QL
larin fe 1.5/30 (generic for AUROVELA FE 1.5/30) - Tier 1; QL; GE
larin fe 1/20 (generic for AUROVELA FE 1/20) - Tier 1; QL; GE
leena - Tier 1; QL; GE
lessina (generic for AFIRMELLE) - Tier 1; QL; GE
levonest (generic for ENPRESSE-28) - Tier 1; QL; GE
levonorgest-eth estrad 91-day (generic for AMETHIA) - Tier 1; QL
levonorgestrel-ethinyl estrad oral tablet 0.1-20 mg-mcg (generic for AFIRMELLE) - Tier 1; QL; GE
levonorgestrel-ethinyl estrad oral tablet 0.15-30 mg-mcg (generic for ALTAVERA) - Tier 1; QL; GE
levonorg-eth estrad triphasic (generic for ENPRESSE-28) - Tier 1; QL; GE
levora 0.15/30 (28) (generic for ALTAVERA) - Tier 1; QL; GE
lojaimiess (generic for CAMRESE LO) - Tier 1; QL
loryna (generic for JASMIEL) - Tier 1; QL
low-ogestrel - Tier 1; QL; GE
lo-zumandimine (generic for JASMIEL) - Tier 1; QL
lutera (generic for AFIRMELLE) - Tier 1; QL; GE
lyllana (generic for DOTTI) - Tier 1; QL

Tier 1: Generic; Tier 2: Brand; ^: Medical Office Attestation Needed if Prescribed by Behavioral Health Provider, Full Prior Authorization Needed if Prescribed by Non-Behavioral Health Provider; *: Available without PA for participating Behavioral Health Prescribers; AL: Limited to members of a certain age; DX2RX: Diagnosis Required; GE: Gender Limit; PA: Prior Auth Required; QL: Quantity Limit; SP: Specialty Medication; ST: Step Therapy

Preferred Agents**Non-Preferred Agents**

marlissa (generic for ALTAVERA) - Tier 1; QL; GE
mibelas 24 fe (generic for CHARLOTTE 24 FE) - Tier 1; QL; GE
microgestin 1.5/30 (generic for AUROVELA 1.5/30) - Tier 1; QL; GE
microgestin 1/20 (generic for AUROVELA 1/20) - Tier 1; QL; GE
microgestin 24 fe - Tier 1; QL
microgestin fe 1.5/30 (generic for AUROVELA FE 1.5/30) - Tier 1; QL; GE
microgestin fe 1/20 (generic for AUROVELA FE 1/20) - Tier 1; QL; GE
mili (generic for ESTARYLLA) - Tier 1; QL; GE
mono-linyah (generic for ESTARYLLA) - Tier 1; QL; GE
necon 0.5/35 (28) - Tier 1; QL; GE
nikki (generic for JASMIEL) - Tier 1; QL
norethin ace-eth estrad-fe oral tablet (generic for AUROVELA FE 1.5/30) - Tier 1; QL; GE
norethin ace-eth estrad-fe oral tablet chewable (generic for CHARLOTTE 24 FE) - Tier 1; QL; GE
norethindrone acet-ethinyl est (generic for AUROVELA 1.5/30) - Tier 1; QL; GE
norethindron-ethinyl estrad-fe (generic for TILIA FE) - Tier 1; QL; GE
norethin-eth estradiol-fe oral tablet chewable 0.4-35 mg-mcg (generic for WYMZYA FE) - Tier 1; QL
norgestimate-eth estradiol (generic for ESTARYLLA) - Tier 1; QL; GE
norgestimate-ethinyl estradiol triphasic (generic for TRI-ESTARYLLA) - Tier 1; QL; GE
nortrel 0.5/35 (28) - Tier 1; QL; GE
nortrel 1/35 (21) (generic for DASETTA 1/35) - Tier 1; QL; GE
nortrel 1/35 (28) (generic for DASETTA 1/35) - Tier 1; QL; GE
nortrel 7/7/7 (generic for DASETTA 7/7/7) - Tier 1; QL; GE
nylia 1/35 (generic for DASETTA 1/35) - Tier 1; QL; GE
nylia 7/7/7 (generic for DASETTA 7/7/7) - Tier 1; QL; GE
nymyo (generic for ESTARYLLA) - Tier 1; QL; GE
ocella (generic for OCELLA) - Tier 1; QL
philith (generic for BALZIVA) - Tier 1; QL; GE
pimtree (generic for AZURETTE) - Tier 1; QL; GE
portia-28 (generic for ALTAVERA) - Tier 1; QL; GE

Tier 1: Generic; Tier 2: Brand; ^: Medical Office Attestation Needed if Prescribed by Behavioral Health Provider, Full Prior Authorization Needed if Prescribed by Non-Behavioral Health Provider; *: Available without PA for participating Behavioral Health Prescribers; AL: Limited to members of a certain age; DX2RX: Diagnosis Required; GE: Gender Limit; PA: Prior Auth Required; QL: Quantity Limit; SP: Specialty Medication; ST: Step Therapy

Preferred Agents

Non-Preferred Agents

PREMARIN ORAL - Tier 2; QL
 PREMPHASE - Tier 2; QL
 PREMPRO - Tier 2; QL
reclipsen - Tier 1; QL; GE
setlakin (generic for ICLEVIA) - Tier 1; QL
simliya (generic for AZURETTE) - Tier 1; QL; GE
simpesse (generic for AMETHIA) - Tier 1; QL
sprintec 28 (generic for ESTARYLLA) - Tier 1; QL; GE
sronyx (generic for AFIRMELLE) - Tier 1; QL; GE
syeda (generic for OCELLA) - Tier 1; QL
tarina 24 fe - Tier 1; QL
tarina fe 1/20 eq (generic for AUROVELA FE 1/20) - Tier 1; QL; GE
tilia fe (generic for TILIA FE) - Tier 1; QL; GE
tri-estarylla (generic for TRI-ESTARYLLA) - Tier 1; QL; GE
tri-legest fe (generic for TILIA FE) - Tier 1; QL; GE
tri-linyah (generic for TRI-ESTARYLLA) - Tier 1; QL; GE
tri-lo-estarylla (generic for TRI-LO-ESTARYLLA) - Tier 1; QL; GE
tri-lo-marzia (generic for TRI-LO-ESTARYLLA) - Tier 1; QL; GE
tri-mili (generic for TRI-ESTARYLLA) - Tier 1; QL; GE
tri-nymyo (generic for TRI-ESTARYLLA) - Tier 1; QL; GE
tri-sprintec (generic for TRI-ESTARYLLA) - Tier 1; QL; GE
trivora (28) (generic for ENPRESSE-28) - Tier 1; QL; GE
tri-vylibra (generic for TRI-ESTARYLLA) - Tier 1; QL; GE
tri-vylibra lo (generic for TRI-LO-ESTARYLLA) - Tier 1; QL; GE
turqoz - Tier 1; QL; GE
tyblume - Tier 1; QL; GE
velivet - Tier 1; QL
vestura (generic for JASMIEL) - Tier 1; QL
vienva (generic for AFIRMELLE) - Tier 1; QL; GE
viorele (generic for AZURETTE) - Tier 1; QL; GE
volnea (generic for AZURETTE) - Tier 1; QL; GE
vyfemla (generic for BALZIVA) - Tier 1; QL; GE
vylibra (generic for ESTARYLLA) - Tier 1; QL; GE
wera - Tier 1; QL; GE
wymzya fe (generic for WYMZYA FE) - Tier 1; QL

Tier 1: Generic; Tier 2: Brand; ^: Medical Office Attestation Needed if Prescribed by Behavioral Health Provider, Full Prior Authorization Needed if Prescribed by Non-Behavioral Health Provider; *: Available without PA for participating Behavioral Health Prescribers; AL: Limited to members of a certain age; DX2RX: Diagnosis Required; GE: Gender Limit; PA: Prior Auth Required; QL: Quantity Limit; SP: Specialty Medication; ST: Step Therapy

Preferred Agents	Non-Preferred Agents
<p><i>xulane</i> - Tier 1; QL; GE <i>yuvaferm</i> (generic for YUVAFERM) - Tier 1; QL <i>zafemy</i> - Tier 1; QL; GE <i>zovia 1/35 (28)</i> (generic for KELNOR 1/35) - Tier 1; QL; GE <i>zumandimine</i> (generic for OCELLA) - Tier 1; QL</p>	
Progestins	
<p><i>camila</i> (generic for CAMILA) - Tier 1; QL; GE <i>deblitane</i> (generic for CAMILA) - Tier 1; QL; GE ELLA - Tier 2; QL <i>errin</i> (generic for CAMILA) - Tier 1; QL; GE <i>heather</i> (generic for CAMILA) - Tier 1; QL; GE <i>incassia</i> (generic for CAMILA) - Tier 1; QL; GE <i>jencycla</i> (generic for CAMILA) - Tier 1; QL; GE <i>lyleq</i> (generic for CAMILA) - Tier 1; QL; GE <i>lyza</i> (generic for CAMILA) - Tier 1; QL; GE <i>medroxyprogesterone acetate intramuscular</i> (generic for DEPO-PROVERA) - Tier 1; QL; GE <i>medroxyprogesterone acetate oral</i> (generic for PROVERA) - Tier 1; QL <i>megestrol acetate oral suspension 40 mg/ml</i> - Tier 1; QL <i>megestrol acetate oral tablet 20 mg</i> - Tier 1 <i>megestrol acetate oral tablet 40 mg</i> - Tier 1; QL <i>nora-be</i> (generic for CAMILA) - Tier 1; QL; GE <i>norethindrone acetate oral</i> - Tier 1; QL <i>norethindrone oral</i> (generic for CAMILA) - Tier 1; QL; GE <i>norlyroc</i> (generic for CAMILA) - Tier 1; QL; GE <i>progesterone oral</i> (generic for PROMETRIUM) - Tier 1; DX2RX; QL <i>sharobel</i> (generic for CAMILA) - Tier 1; QL; GE</p>	<p>DEPO-SUBQ PROVERA 104 - Tier 2; PA; QL ENDOMETRIN - Tier 2; PA</p>
Selective Estrogen Receptor Modifying Agents	
<p><i>raloxifene hcl</i> (generic for EVISTA) - Tier 1; QL</p>	<p>EVISTA (brand for raloxifene hcl) - Tier 2; PA; QL OSPHENA - Tier 2; PA; QL; GE</p>

Tier 1: Generic; Tier 2: Brand; ^: Medical Office Attestation Needed if Prescribed by Behavioral Health Provider, Full Prior Authorization Needed if Prescribed by Non-Behavioral Health Provider; *: Available without PA for participating Behavioral Health Prescribers; AL: Limited to members of a certain age; DX2RX: Diagnosis Required; GE: Gender Limit; PA: Prior Auth Required; QL: Quantity Limit; SP: Specialty Medication; ST: Step Therapy

Preferred Agents	Non-Preferred Agents
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Hormonal Agents, Stimulant/Replacement/Modifying (Sex Hormones/Modifiers) - Drugs to Regulate Hormones	
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Progestins - Hormone Replacement/Modifying Drugs	
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<p><i>aftera (generic for AFTERA) - Tier 1; QL; GE</i> <i>curae (generic for AFTERA) - Tier 1; QL; GE</i> <i>econtra one-step (generic for AFTERA) - Tier 1; QL; GE</i> <i>her style (generic for AFTERA) - Tier 1; QL; GE</i> <i>levonorgestrel (generic for AFTERA) - Tier 1; QL; GE</i> <i>my choice (generic for AFTERA) - Tier 1; QL; GE</i> <i>my way (generic for AFTERA) - Tier 1; QL; GE</i> <i>new day (generic for AFTERA) - Tier 1; QL; GE</i> <i>opcicon one-step (generic for AFTERA) - Tier 1; QL; GE</i> <i>option 2 (generic for AFTERA) - Tier 1; QL; GE</i> <i>PLAN B ONE-STEP (brand for levonorgestrel) - Tier 2; QL; GE</i> <i>react (generic for AFTERA) - Tier 1; QL; GE</i> <i>take action (generic for AFTERA) - Tier 1; QL; GE</i></p>	
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Hormonal Agents, Stimulant/Replacement/Modifying (Thyroid)	
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<p><i>euthyrox (generic for EUTHYROX) - Tier 1; QL</i> <i>levo-t (generic for EUTHYROX) - Tier 1; QL</i> <i>levothyroxine sodium oral tablet (generic for EUTHYROX) - Tier 1; QL</i> <i>levoxyl (generic for EUTHYROX) - Tier 1; QL</i> <i>liothyronine sodium oral (generic for CYTOMEL) - Tier 1; QL</i> <i>unithroid (generic for EUTHYROX) - Tier 1; QL</i></p>	<p>ERMEZA - Tier 2; PA; QL TIROSINT ORAL CAPSULE 100 MCG, 112 MCG, 125 MCG, 13 MCG, 137 MCG, 150 MCG, 175 MCG, 200 MCG, 25 MCG, 50 MCG, 75 MCG, 88 MCG (brand for levothyroxine sodium) - Tier 2; PA; QL TIROSINT-SOL - Tier 2; PA; QL</p>
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Hormonal Agents, Stimulant/Replacement/Modifying (Thyroid) - Drugs to Replace Thyroid Hormones	
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Hormonal Agents, Stimulant/Replacement/Modifying (Thyroid) - Thyroid Replacement Drugs	
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	<p><i>ARMOUR THYROID (brand for niva thyroid) - Tier 2; PA; QL</i></p>
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Preferred Agents	Non-Preferred Agents
Hormonal Agents, Suppressant (Adrenal)	
LYSODREN - Tier 2; QL	
Hormonal Agents, Suppressant (Pituitary)	
<i>cabergoline</i> - Tier 1; QL <i>leuprolide acetate injection</i> - Tier 1; PA; SP LUPRON DEPOT (1-MONTH) - Tier 2; PA; SP; QL LUPRON DEPOT (3-MONTH) - Tier 2; PA; SP; QL LUPRON DEPOT (4-MONTH) INTRAMUSCULAR KIT 30MG - Tier 2; PA; SP; QL LUPRON DEPOT (6-MONTH) INTRAMUSCULAR KIT 45MG - Tier 2; PA; SP; QL LUPRON DEPOT-PED (1-MONTH) - Tier 2; PA; SP; QL LUPRON DEPOT-PED (3-MONTH) - Tier 2; PA; SP; QL LUPRON DEPOT-PED (6-MONTH) - Tier 2; PA; SP; QL <i>octreotide acetate (generic for SANDOSTATIN)</i> - Tier 1; SP; QL ORLISSA - Tier 2; PA; QL SIGNIFOR - Tier 2; PA; SP; QL SOMAVERT - Tier 2; PA; SP; QL	FENSOLVI (6 MONTH) - Tier 2; PA; SP; QL ORIAHNN - Tier 2; PA; QL SYNAREL - Tier 2; PA; QL TRIPTODUR - Tier 2; PA; SP; QL
Hormonal Agents, Suppressant (Thyroid)	
Antithyroid Agents	
<i>methimazole oral</i> - Tier 1; QL <i>propylthiouracil oral</i> - Tier 1; QL	
Immune Suppressants - Immune System Drugs	
Immunological Agents - Drugs that Stimulate or Suppress the Immune System	

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Preferred Agents	Non-Preferred Agents
	LUPKYNIS - Tier 2; PA; QL
Immunological Agents	
Angioedema Agents	
HAEGARDA - Tier 2; PA; SP; QL <i>icatibant acetate (generic for SAJAZIR)</i> - Tier 1; PA; SP; QL RUCONEST - Tier 2; PA; SP; QL <i>sajazir (generic for SAJAZIR)</i> - Tier 1; PA; SP; QL	BERINERT - Tier 2; PA; SP TAKHZYRO SUBCUTANEOUS SOLUTION - Tier 2; PA; SP; QL TAKHZYRO SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 150 MG/ML - Tier 2; PA; SP; QL; AL TAKHZYRO SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 300 MG/2ML - Tier 2; PA; SP; QL
Immunological Agents, Other	
COSENTYX SUBCUTANEOUS SOLUTION AUTO-INJECTOR 150 MG/ML - Tier 2; PA; SP; QL COSENTYX SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 150 MG/ML, 75 MG/0.5ML - Tier 2; PA; SP; QL COSENTYX UNOREADY - Tier 2; PA; QL ILARIS - Tier 2; PA; SP; QL ILUMYA - Tier 2; PA; SP; QL KEVZARA - Tier 2; PA; SP; QL KINERET - Tier 2; PA; SP; QL OLUMIANT ORAL TABLET 1 MG, 2 MG - Tier 2; PA; SP; QL OLUMIANT ORAL TABLET 4 MG - Tier 2; PA; SP OTEZLA - Tier 2; PA; SP; QL SYNAGIS INTRAMUSCULAR SOLUTION 100 MG/ML - Tier 2; PA; SP SYNAGIS INTRAMUSCULAR SOLUTION 50 MG/0.5ML - Tier 2; PA; SP; QL XOLAIR - Tier 2; PA; SP; QL	ACTEMRA ACTPEN - Tier 2; PA; SP; QL ACTEMRA SUBCUTANEOUS - Tier 2; PA; SP; QL ADBRY - Tier 2; PA; SP; QL BENLYSTA SUBCUTANEOUS SOLUTION AUTO-INJECTOR - Tier 2; PA; SP; QL DUPIXENT - Tier 2; PA; SP; QL ORENCIA CLICKJECT - Tier 2; PA; SP; QL ORENCIA SUBCUTANEOUS - Tier 2; PA; SP; QL RINVOQ - Tier 2; PA; SP; QL SILIQ - Tier 2; PA; SP; QL SKYRIZI PEN - Tier 2; PA; SP; QL SKYRIZI SUBCUTANEOUS SOLUTION PREFILLED SYRINGE - Tier 2; PA; SP; QL STELARA SUBCUTANEOUS - Tier 2; PA; SP; QL TALTZ - Tier 2; PA; SP; QL TREMFYA - Tier 2; PA; SP; QL XELJANZ - Tier 2; PA; SP; QL XELJANZ XR - Tier 2; PA; SP; QL

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Preferred Agents	Non-Preferred Agents
Immunostimulants	
ACTIMMUNE - Tier 2; PA; SP PEGASYS - Tier 2; PA; SP; QL	
Immunosuppressants	
<i>azathioprine oral tablet 50 mg (generic for IMURAN) - Tier 1; QL</i> <i>CIMZIA VIAL KIT - Tier 2; PA; SP; QL</i> <i>CIMZIA SUBCUTANEOUS PREFILLED SYRINGE KIT 2 X 200 MG/ML, 6 X 200 MG/ML - Tier 2; PA; SP; QL</i> <i>cyclosporine modified (generic for GENGRAF) - Tier 1; QL</i> <i>cyclosporine oral (generic for SANDIMMUNE) - Tier 1; QL</i> <i>ENBREL - Tier 2; PA; SP; QL</i> <i>everolimus oral tablet 0.25 mg, 0.5 mg, 0.75 mg, 1 mg (generic for ZORTRESS) - Tier 1</i> <i>gengraf oral capsule (generic for GENGRAF) - Tier 1; QL</i> <i>leflunomide oral (generic for ARAVA) - Tier 1; QL</i> <i>methotrexate sodium (pf) - Tier 1; QL</i> <i>methotrexate sodium injection - Tier 1; QL</i> <i>methotrexate sodium oral - Tier 1</i> <i>mycophenolate mofetil oral (generic for CELLCEPT) - Tier 1; QL</i> <i>mycophenolate sodium (generic for MYFORTIC) - Tier 1; QL</i> <i>sirolimus oral solution (generic for RAPAMUNE) - Tier 1; QL</i> <i>sirolimus oral tablet 0.5 mg, 1 mg (generic for RAPAMUNE) - Tier 1; QL</i> <i>sirolimus oral tablet 2 mg (generic for RAPAMUNE) - Tier 1</i> <i>tacrolimus oral capsule 0.5 mg, 5 mg (generic for PROGRAF) - Tier 1</i> <i>tacrolimus oral capsule 1 mg (generic for PROGRAF) - Tier 1; QL</i>	ENSPRYNG - Tier 2; PA; SP; QL HUMIRA PEN-PEDIATRIC UC START - Tier 2; PA; SP; QL HUMIRA PEN-PSOR/UEVIT STARTER - Tier 2; PA; SP; QL HUMIRA SUBCUTANEOUS PEN-INJECTOR KIT 40 MG/0.4ML, 40 MG/0.8ML - Tier 2; PA; SP; QL HUMIRA SUBCUTANEOUS PEN-INJECTOR KIT 80 MG/0.8ML - Tier 2; PA; SP; QL HUMIRA SUBCUTANEOUS PREFILLED SYRINGE KIT 10 MG/0.1ML, 20 MG/0.2ML, 40 MG/0.4ML, 40 MG/0.8ML, 80 MG/0.8ML, 80 MG/0.8ML & 40MG/0.4ML - Tier 2; PA; SP; QL OTREXUP - Tier 2; PA; QL RASUVO - Tier 2; PA; QL SIMPONI - Tier 2; PA; SP; QL TREXALL - Tier 2; PA
Vaccines	
ACTHIB - Tier 2; QL ADACEL - Tier 2; QL BEXSERO - Tier 2; QL BOOSTRIX - Tier 2; QL	

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Preferred Agents	Non-Preferred Agents
<p>DAPTACEL - Tier 2; QL ENGERIX-B - Tier 2; QL GARDASIL 9 - Tier 2; QL HAVRIX - Tier 2; QL HIBERIX - Tier 2; QL INFANRIX - Tier 2; QL IPOL - Tier 2; QL MENACTRA - Tier 2; QL MENQUADFI - Tier 2; QL MENVEO - Tier 2; QL M-M-R II - Tier 2; QL PEDIARIX - Tier 2; QL PEDVAX HIB - Tier 2; QL PENTACEL - Tier 2; QL PREHEVBRIO - Tier 2; QL PRIORIX - Tier 2; QL PROQUAD - Tier 2; QL QUADRACEL INTRAMUSCULAR SUSPENSION - Tier 2; QL RECOMBIVAX HB - Tier 2; QL ROTARIX - Tier 2; AL ROTATEQ - Tier 2; QL SHINGRIX - Tier 2; QL; AL <i>TDVAX (brand for tetanus-diphtheria toxoids td) - Tier 2; QL</i> TENIVAC - Tier 2; QL <i>TETANUS-DIPHTHERIA TOXOIDS TD (brand for tetanus-diphtheria toxoids td) - Tier 2; QL</i> TRUMENBA - Tier 2; QL TWINRIX - Tier 2; QL VAQTA - Tier 2; QL VARIVAX - Tier 2; QL VAXNEUVANCE - Tier 2; QL</p>	

Immunological Agents - Drugs that Stimulate or Suppress the Immune System

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Preferred Agents	Non-Preferred Agents
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Vaccines

AFLURIA QUADRIVALENT - Tier 2; QL
 DENGVAXIA - Tier 2; QL
 FLUAD QUADRIVALENT - Tier 2; QL
 FLUARIX QUADRIVALENT - Tier 2; QL
 FLUBLOK QUADRIVALENT - Tier 2; QL
 FLUCELVAX QUADRIVALENT - Tier 2; QL
 FLULAVAL QUADRIVALENT - Tier 2; QL
 FLUMIST QUADRIVALENT - Tier 2; QL
 FLUZONE HIGH-DOSE QUADRIVALENT - Tier 2; QL
 FLUZONE QUADRIVALENT - Tier 2; QL
 HEPLISAV-B - Tier 2; QL; AL
 HYPERTET - Tier 2; QL
 NOVAVAX COVID-19 VACCINE - Tier 2; QL
 PNEUMOVAX 23 - Tier 2; QL
 PREVNAR 13 - Tier 2; QL
 PREVNAR 20 - Tier 2; QL

Inflammatory Bowel Disease Agents

Aminosalicylates

balsalazide disodium (generic for COLAZAL) - Tier 1; QL
mesalamine oral capsule delayed release 400 mg (generic for DELZICOL) - Tier 1; QL
mesalamine rectal (generic for CANASA) - Tier 1; QL
 SFROWASA - Tier 2; QL
sulfasalazine oral (generic for AZULFIDINE) - Tier 1; QL

APRISO (brand for mesalamine er) - Tier 2; PA; QL
CANASA (brand for mesalamine) - Tier 2; PA; QL
COLAZAL (brand for balsalazide disodium) - Tier 2; PA; QL
DELZICOL (brand for mesalamine) - Tier 2; PA; QL
 DIPENTUM - Tier 2; PA; QL
LIALDA (brand for mesalamine) - Tier 2; PA; QL
PENTASA (brand for mesalamine er) - Tier 2; PA; QL

Glucocorticoids

budesonide oral - Tier 1; DX2RX; QL

CORTIFOAM - Tier 2; PA; QL
UCERIS (brand for budesonide) - Tier 2; PA; QL

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Preferred Agents	Non-Preferred Agents
<p>hydrocortisone (perianal) external cream 2.5 % (generic for PROCTO-MED HC) - Tier 1; QL</p> <p>hydrocortisone rectal (generic for CORTENEMA) - Tier 1; QL</p> <p>procto-med hc (generic for PROCTO-MED HC) - Tier 1; QL</p> <p>proctosol hc (generic for PROCTO-MED HC) - Tier 1; QL</p> <p>proctozone-hc (generic for PROCTO-MED HC) - Tier 1; QL</p>	
Metabolic Bone Disease Agents	
<p>alendronate sodium oral solution - Tier 1; QL</p> <p>alendronate sodium oral tablet 10 mg, 35 mg - Tier 1; QL</p> <p>alendronate sodium oral tablet 70 mg (generic for FOSAMAX) - Tier 1; QL</p> <p>calcitonin (salmon) nasal - Tier 1; QL</p> <p>calcitriol oral capsule (generic for ROCALTROL) - Tier 1; QL</p> <p>calcitriol oral solution (generic for ROCALTROL) - Tier 1; Members >= 8 years of age will require PA; QL; AL</p> <p>cinacalcet hcl (generic for SENSIPAR) - Tier 1; PA; QL</p> <p>TYMLOS - Tier 2; PA; SP; QL</p>	<p>ACTONEL ORAL TABLET 150 MG (brand for risedronate sodium) - Tier 2; PA</p> <p>ACTONEL ORAL TABLET 35 MG (brand for risedronate sodium) - Tier 2; PA; QL</p> <p>ATELVIA (brand for risedronate sodium) - Tier 2; PA</p> <p>FORTEO (brand for teriparatide (recombinant)) - Tier 2; PA; SP; QL</p> <p>FOSAMAX (brand for alendronate sodium) - Tier 2; PA; QL</p> <p>FOSAMAX PLUS D - Tier 2; PA; QL</p> <p>RAYALDEE - Tier 2; PA; QL</p> <p>TERIPARATIDE (RECOMBINANT) SUBCUTANEOUS SOLUTION PEN-INJECTOR 620 MCG/2.48ML - Tier 2; PA; SP; QL</p>
Miscellaneous Therapeutic Agents	
<p>ABRYSVO - Tier 2; QL</p> <p>acne control cleanser (generic for CLEARSKIN) - Tier 1; QL</p> <p>acne medication 10 external lotion - Tier 1; QL</p> <p>acne medication 5 external lotion - Tier 1; QL</p> <p>acne treatment external cream 10 % (generic for CLEARSKIN) - Tier 1; QL</p> <p>adv acne spot treatment (generic for NEUTROGENA OIL-FREE ACNE WASH) - Tier 1; QL</p> <p>ALCOHOL PREP PADS PAD , 70 % (brand for alcohol prep) - Tier 2; QL</p> <p>ANASPAZ (brand for hyoscyamine sulfate) - Tier 2; QL</p> <p>antibiotic (generic for BACITRAYCIN PLUS) - Tier 1; QL</p>	<p>AMJEVITA SOLUTION AUTO-INJECTOR 40 MG/0.8ML SUBCUTANEOUS - Tier 2; PA; NDC(s) starting w/72511 Preferred w/PA; SP; QL</p> <p>AMJEVITA SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 20 MG/0.4ML, 40 MG/0.8ML - Tier 2; PA; SP; QL</p> <p>ARMONAIR DIGIHALER - Tier 2; PA; QL</p> <p>AUVELITY - Tier 2; PA; ^; QL</p> <p>BD ULTRA-FINE INSULIN SYRINGES (brand for careone insulin syringe) - Tier 2; PA; QL</p> <p>BD ULTRA-FINE INSULIN SYRINGES 30G X 1/2" 0.5 ML, 30G X 1/2" 1 ML, 31G X 15/64" 0.3 ML, 31G X 5/16" 0.3 ML, 31G X 5/16" 0.5 ML, 31G X 5/16" 1 ML (brand for techlite insulin syringe) - Tier 2; PA; QL</p>

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Preferred Agents	Non-Preferred Agents
<p>antifungal (tolnaftate) (generic for TINACTIN) - Tier 1; QL antifungal tolnaftate (generic for TINACTIN) - Tier 1; QL AREXVY - Tier 2; QL arthritis pain relieving - Tier 1; QL aspirin adults (generic for MEDI-FIRST ASPIRIN) - Tier 1; QL aspirin childrens (generic for BAYER LOW DOSE) - Tier 1; QL aspirin ec oral tablet 325 mg (generic for MEDI-FIRST ASPIRIN) - Tier 1; QL aspirin ec oral tablet delayed release 325 mg (generic for BAYER ASPIRIN) - Tier 1; QL aspirin ec oral tablet delayed release 81 mg (generic for BAYER ASPIRIN EC LOW DOSE) - Tier 1; QL aspirin oral tablet 325 mg (generic for MEDI-FIRST ASPIRIN) - Tier 1; QL aspirin oral tablet chewable 81 mg (generic for BAYER LOW DOSE) - Tier 1; QL aspirin oral tablet delayed release 325 mg (generic for BAYER ASPIRIN) - Tier 1; QL aspirin oral tablet delayed release 81 mg (generic for BAYER ASPIRIN EC LOW DOSE) - Tier 1; QL ASPIRIN ORAL TABLET DELAYED RELEASE 81 MG (brand for adult aspirin regimen) - Tier 2; QL aspirin rectal suppository 300 mg - Tier 1 aspirin regimen (generic for BAYER ASPIRIN EC LOW DOSE) - Tier 1; QL athletes foot (tolnaftate) external aerosol powder 1 % (generic for ODOR EATERS FOOT/SNEAKER SPRAY) - Tier 1; QL athletes foot (tolnaftate) external cream 1 % (generic for TINACTIN) - Tier 1; QL athletes foot powder spray external aerosol powder 1 % (generic for ODOR EATERS FOOT/SNEAKER SPRAY) - Tier 1; QL athletes foot relief (generic for TINACTIN) - Tier 1; QL bacitracin external (generic for BACITRAYCIN PLUS) - Tier 1; QL bacitracin zinc external - Tier 1; QL bacitracin zinc first aid - Tier 1; QL</p>	<p>BD ULTRA-FINE INSULIN SYRINGES 31G X 15/64" 0.5 ML, 31G X 15/64" 1 ML (brand for global easy glide insulin syr) - Tier 2; PA; QL BD ULTRA-FINE PEN NEEDLES 29G X 12.7MM (brand for sure comfort pen needles) - Tier 2; PA; QL BD ULTRA-FINE PEN NEEDLES 31G X 8 MM (brand for 1st tier unifine pentips) - Tier 2; PA; QL EMPAVELI - Tier 2; PA; SP; QL GUARDIAN CONNECT TRANSMITTER - Tier 2; PA; QL GUARDIAN LINK 3 TRANSMITTER - Tier 2; PA; QL HYFTOR - Tier 2; PA; QL INSULIN PEN NEEDLES 29G X 12.7MM (brand for sure comfort pen needles) - Tier 2; PA; QL INSULIN PEN NEEDLES 29G X 12MM , 31G X 5 MM , 31G X 6 MM , 31G X 8 MM (brand for 1st tier unifine pentips) - Tier 2; PA; QL INSULIN SYRINGES 28G X 1/2" 0.5 ML, 28G X 1/2" 1 ML (brand for global inject ease insulin syr) - Tier 2; PA; QL INSULIN SYRINGES 29G X 1/2" 0.3 ML, 29G X 1/2" 0.5 ML, 30G X 5/16" 0.3 ML (brand for eql insulin syringe) - Tier 2; PA; QL INSULIN SYRINGES 29G X 1/2" 1 ML, 30G X 5/16" 0.5 ML (brand for aq insulin syringe) - Tier 2; PA; QL INSULIN SYRINGES 30G X 1/2" 0.5 ML, 30G X 1/2" 1 ML, 31G X 15/64" 0.3 ML, 31G X 5/16" 0.3 ML, 31G X 5/16" 0.5 ML, 31G X 5/16" 1 ML (brand for techlite insulin syringe) - Tier 2; PA; QL INSULIN SYRINGES 30G X 5/16" 1 ML (brand for easy comfort insulin syringe) - Tier 2; PA; QL OMNIPOD 5 G6 INTRO (GEN 5) - Tier 2; PA; QL OMNIPOD 5 G6 POD (GEN 5) - Tier 2; PA; QL ORLADEYO - Tier 2; PA; SP; QL PREZISTA ORAL TABLET 600 MG, 800 MG (brand for darunavir) - Tier 2; PA; QL QUVIVIQ - Tier 2; PA; QL RELYVRIO - Tier 2; PA; SP; QL RYALTRIS - Tier 2; PA; QL; AL SKYRIZI SUBCUTANEOUS SOLUTION CARTRIDGE - Tier 2; PA; SP; QL SOTYKTU - Tier 2; PA; SP; QL</p>

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Preferred Agents

bacitracin zinc-aloë - Tier 1; QL
BAYER ASPIRIN ORAL TABLET (brand for aspirin) - Tier 2; QL
BAYER LOW DOSE ORAL TABLET CHEWABLE (brand for aspirin) - Tier 2; QL
BD ECLIPSE NEEDLE 25G X 5/8" (brand for carepoint poly hub needle) - Tier 2; QL
BD ULTRA-FINE INSULIN SYRINGES 31G X 5/16" 0.3 ML (brand for techlite insulin syringe) - Tier 2; QL
BD ULTRA-FINE PEN NEEDLES 31G X 5 MM (brand for 1st tier unifine pentips) - Tier 2; QL
BENZAC AC WASH (brand for benzoyl peroxide wash) - Tier 2; QL
BINAXNOW COVID-19 AG HOME TEST (brand for covid-19 at home antigen test) - Tier 2; QL
bisacodyl ec (generic for EX-LAX ULTRA) - Tier 1; QL
bisacodyl laxative (generic for EX-LAX ULTRA) - Tier 1; QL
bisacodyl oral (generic for EX-LAX ULTRA) - Tier 1; QL
bisacodyl rectal (generic for THE MAGIC BULLET) - Tier 1; QL
bp wash external liquid 2.5 % (generic for PANOXYL) - Tier 1; QL
BREATHE COMFORT HUMIDIFIER (brand for cvs cool mist humidifer) - Tier 2; QL
calamine external lotion - Tier 1; QL
CALQUENCE - Tier 2; PA; SP; QL
capsaicin external cream 0.025 % (generic for DERMACINRX PENETRAL) - Tier 1; QL
capsaicin external cream 0.1 % (generic for CAPZASIN-HP) - Tier 1; QL
capsaicin hp (generic for CAPZASIN-HP) - Tier 1; QL
capsaicin pain relief (generic for CAPZASIN-HP) - Tier 1; QL
CAPZASIN-HP (brand for capsaicin) - Tier 2; QL
capzix (generic for CAPZASIN-HP) - Tier 1; QL
CAREPOINT POLY HUB NEEDLE 25G X 5/8" (brand for carepoint poly hub needle) - Tier 2; QL
CAREPOINT SAFETY 1ST NEEDLE 25G X 5/8" (brand for carepoint poly hub needle) - Tier 2; QL
CARESTART COVID-19 HOME TEST (brand for covid-19 at home antigen test) - Tier 2; QL

Non-Preferred Agents

STIMUFEND - Tier 2; PA; SP
VIVJOA - Tier 2; PA; QL
VTAMA - Tier 2; PA; QL
WINLEVI - Tier 2; PA; QL
YONSA - Tier 2; PA; SP; QL
ZORYVE - Tier 2; PA; QL; AL

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Preferred Agents

Non-Preferred Agents

CARETOUCH HYPODERMIC NEEDLE 25G X 5/8" (brand for carepoint poly hub needle) - Tier 2; QL
 CASTIVA WARMING - Tier 2; QL
 CAYA - Tier 2; QL
 childrens aspirin oral tablet chewable 81 mg (generic for BAYER LOW DOSE) - Tier 1; QL
 c-lax laxative (generic for EX-LAX ULTRA) - Tier 1; QL
 CLEARDETECT COVID-19 AG HOME (brand for covid-19 at home antigen test) - Tier 2; QL
 clearskin (generic for CLEARSKIN) - Tier 1; QL
 CLINITEST RAPID COVID-19 TEST KIT IN VITRO (brand for covid-19 at home antigen test) - Tier 2; AL
 CLINITEST RAPID COVID-19 TEST KIT IN VITRO (brand for covid-19 at home antigen test) - Tier 2; QL
 COMIRNATY - Tier 2; QL
 CONDOMS - Tier 2; QL
 COOL MIST HUMIDIFER (brand for cvs cool mist humidifer) - Tier 2; QL
 COOL MIST HUMIDIFIER (brand for cvs cool mist humidifer) - Tier 2; QL
 corn & callus remover (generic for COMPOUND W) - Tier 1; QL
 corn and callus remover (generic for COMPOUND W) - Tier 1; QL
 COVID-19 AT HOME ANTIGEN TEST (brand for covid-19 at home antigen test) - Tier 2; AL
 COVID-19 AT HOME TEST KIT (brand for covid-19 at home antigen test) - Tier 2; AL
 COVID-19 AT-HOME TEST KIT IN VITRO (brand for covid-19 at home antigen test) - Tier 2; AL
 COVID-19 AT-HOME TEST KIT IN VITRO (brand for covid-19 at home antigen test) - Tier 2; QL
 daily acne wash (generic for NEUTROGENA OIL-FREE ACNE WASH) - Tier 1; QL
 darunavir (generic for PREZISTA) - Tier 1; QL
 DERMELEVE ADVANCED FORMULA - Tier 2; QL
 DERMELEVE ANTI-ITCH SCALP (brand for aluminum acetate) - Tier 2
 DEXCOM G6 TRANSMITTER - Tier 2; PA; QL

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Preferred Agents

Non-Preferred Agents

DIATRUST COVID-19 HOME TEST (brand for covid-19 at home antigen test) - Tier 2; QL
double antibiotic external ointment 500-10000 unit/gm (generic for POLYSPORIN) - Tier 1; QL
DROPSAFE ALCOHOL PREP (brand for alcohol prep) - Tier 2; QL
DUREX EXTRA SENSITIVE THIN (brand for aimsco lubricated) - Tier 2; QL
EASIVENT (brand for breathe comfort chamber/adult) - Tier 2; QL
EASIVENT MASK LARGE (brand for breathe comfort chamber/adult) - Tier 2; QL
EASIVENT MASK MEDIUM (brand for breathe comfort chamber/adult) - Tier 2; QL
EASIVENT MASK SMALL (brand for breathe comfort chamber/adult) - Tier 2; QL
ELLUME COVID-19 HOME TEST (brand for covid-19 at home antigen test) - Tier 2; QL
enteric aspirin (generic for BAYER ASPIRIN) - Tier 1; QL
EX-LAX ULTRA (brand for bisacodyl) - Tier 2; QL
fast relief laxative (generic for THE MAGIC BULLET) - Tier 1; QL
FASTEP COVID-19 ANTIGEN TEST (brand for covid-19 at home antigen test) - Tier 2; AL
FLEET BISACODYL - Tier 2; QL
FLOWFLEX COVID-19 AG HOME TEST (brand for covid-19 at home antigen test) - Tier 2; QL
folic acid oral tablet 1 mg - Tier 1; QL
folic acid oral tablet 400 mcg, 800 mcg - Tier 1
foot & sneaker (generic for ODOR EATERS FOOT/SNEAKER SPRAY) - Tier 1; QL
FORMULA 3 THE TREATMENT (brand for tinaspore) - Tier 2; QL
FORMULA 7 THE SOLUTION (brand for tinaspore) - Tier 2; QL
ft antifungal external cream 1 % (generic for TINACTIN) - Tier 1; QL
ft aspirin (generic for MEDI-FIRST ASPIRIN) - Tier 1; QL
ft aspirin low dose (generic for BAYER ASPIRIN EC LOW DOSE) - Tier 1; QL
ft enteric coated aspirin (generic for BAYER ASPIRIN) - Tier 1; QL

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Preferred Agents

Non-Preferred Agents

ft gentle laxative (generic for THE MAGIC BULLET) - Tier 1; QL
ft laxative (generic for EX-LAX ULTRA) - Tier 1; QL
fungi-guard (generic for TINACTIN) - Tier 1; QL
gentle laxative (generic for EX-LAX ULTRA) - Tier 1; QL
gentle laxative womens (generic for EX-LAX ULTRA) - Tier 1; QL
genuine aspirin (generic for MEDI-FIRST ASPIRIN) - Tier 1; QL
HADLIMA - Tier 2; PA; SP; QL
HADLIMA PUSHTOUCH - Tier 2; PA; SP; QL
h-e-b aspirin (generic for BAYER ASPIRIN EC LOW DOSE) - Tier 1; QL
hydrocodone bit-homatrop mbr (generic for HYCODAN) - Tier 1; QL; AL
hydromet (generic for HYCODAN) - Tier 1; QL; AL
hyoscyamine sulfate er (generic for LEVBID) - Tier 1; QL
hyoscyamine sulfate oral (generic for ANASPAZ) - Tier 1; QL
hyoscyamine sulfate sl (generic for LEVSIN/SL) - Tier 1; QL
hyoscyamine sulfate sublingual (generic for LEVSIN/SL) - Tier 1; QL
hyosyne - Tier 1; QL
IHEALTH COVID-19 RAPID TEST (brand for covid-19 at home antigen test) - Tier 2; QL
INDICAID COVID-19 RAPID TEST (brand for covid-19 at home antigen test) - Tier 2; QL
INSPIREASE (brand for breathe comfort chamber/adult) - Tier 2; QL
INSPIREASE RESERVOIR BAGS - Tier 2; QL
INTELISWAB COVID-19 RAPID TEST (brand for covid-19 at home antigen test) - Tier 2; QL
jock itch max st (generic for ODOR EATERS FOOT/SNEAKER SPRAY) - Tier 1; QL
jock itch spray powder (generic for ODOR EATERS FOOT/SNEAKER SPRAY) - Tier 1; QL
laxative oral tablet delayed release 5 mg (generic for EX-LAX ULTRA) - Tier 1; QL
laxative rectal suppository 10 mg (generic for THE MAGIC BULLET) - Tier 1; QL
LEVBID (brand for hyoscyamine sulfate er) - Tier 2; QL
liquid corn & callus rem (generic for COMPOUND W) - Tier 1; QL
liquid wart remover max st (generic for COMPOUND W) - Tier 1; QL

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Preferred Agents

magnesium oxide (antacid) oral tablet 400 mg - Tier 1
magnesium oxide oral tablet 400 mg - Tier 1
magnesium oxide oral tablet 420 mg (generic for MAOX) - Tier 1
MAOX (brand for magnesium oxide) - Tier 2
 MASK VORTEX/CHILD/FROG - Tier 2; QL
 MASK VORTEX/TODDLER/LADYBUG - Tier 2; QL
medi-first aspirin (generic for MEDI-FIRST ASPIRIN) - Tier 1; QL
medique aspirin (generic for MEDI-FIRST ASPIRIN) - Tier 1; QL
MICOMITIN (brand for tinaspore) - Tier 2; QL
mm aspirin (generic for BAYER ASPIRIN EC LOW DOSE) - Tier 1; QL
 MODERNA COVID-19 VAC 6M-11Y - Tier 2; QL
 MOUNJARO - Tier 2; PA; QL
MYCOZYL AL (brand for tinaspore) - Tier 2; QL
 NEODOT THERMOMETER - Tier 2; QL
NEUTROGENA OIL-FREE ACNE WASH (brand for cvs adv acne spot treatment) - Tier 2; QL
NULEV (brand for hyoscyamine sulfate) - Tier 2; QL
 OMNIFLEX DIAPHRAGM - Tier 2; QL; GE
ON/GO COVID-19 ANTIGEN TEST (brand for covid-19 at home antigen test) - Tier 2; QL
ON/GO ONE COVID-19 HOME TEST (brand for covid-19 at home antigen test) - Tier 2; QL; AL
ONELAX (brand for bisacodyl) - Tier 2; QL
OVACE PLUS WASH EXTERNAL LIQUID (brand for sodium sulfacetamide wash) - Tier 2; QL
OVACE WASH (brand for sodium sulfacetamide wash) - Tier 2; QL
PANOXYL (brand for bp wash) - Tier 2; QL
 PFIZER COVID-19 VAC-TRIS 5-11Y - Tier 2; QL
 PFIZER COVID-19 VAC-TRIS 6M-4Y - Tier 2; QL
PILOT COVID-19 AT-HOME TEST (brand for covid-19 at home antigen test) - Tier 2; AL
poly bacitracin (generic for POLYSPORIN) - Tier 1; QL
POLYSPORIN (brand for cvs poly bacitracin) - Tier 2; QL
 PREZISTA ORAL SUSPENSION - Tier 2; QL
 PREZISTA ORAL TABLET 150 MG, 75 MG - Tier 2; QL

Non-Preferred Agents

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Preferred Agents

Non-Preferred Agents

QUICKVUE AT-HOME COVID-19 TEST (brand for covid-19 at home antigen test) - Tier 2; QL
 scalp relief external liquid 3 % (generic for SCALPICIN) - Tier 1; QL
 sodium sulfacetamide wash (generic for OVACE PLUS WASH) - Tier 1; QL
 SPEEDY SWAB COVID-19 ANTIGEN (brand for covid-19 at home antigen test) - Tier 2; AL
 SPIKEVAX - Tier 2; QL
 ST JOSEPH LOW DOSE ORAL TABLET CHEWABLE (brand for aspirin) - Tier 2; QL
 STRIVE DUAL ZONE PEAK FLOW MTR (brand for peak flow meter universal rang) - Tier 2; QL
 sulfacetamide sodium external (generic for OVACE PLUS WASH) - Tier 1; QL
 SUNLENCA ORAL - Tier 2; QL
 sure result sr relief (generic for DERMACINRX PENETRAL) - Tier 1; QL
 the magic bullet (generic for THE MAGIC BULLET) - Tier 1; QL
 TINACTIN EXTERNAL CREAM (brand for antifungal (tolnaftate)) - Tier 2; QL
 tinaspore (generic for FORMULA 3 THE TREATMENT) - Tier 1; QL
 tm-tolnaftate (generic for FORMULA 3 THE TREATMENT) - Tier 1; QL
 tm-tolnaftate lr (generic for FORMULA 3 THE TREATMENT) - Tier 1; QL
 TOLNAFI-AL (brand for tinaspore) - Tier 2; QL
 tolnaftate antifungal (generic for TINACTIN) - Tier 1; QL
 tolnaftate external cream (generic for TINACTIN) - Tier 1; QL
 tolnaftate external powder (generic for LOTRIMIN AF) - Tier 1; QL
 VAPORIZER WARM STEAM - Tier 2; QL
 VAXELIS - Tier 2; QL
 wart remover external liquid 17 % (generic for COMPOUND W) - Tier 1; QL
 wart remover maximum strength external liquid (generic for COMPOUND W) - Tier 1; QL
 WIDE-SEAL DIAPHRAGM 60 - Tier 2; QL
 WIDE-SEAL DIAPHRAGM 65 - Tier 2; QL
 WIDE-SEAL DIAPHRAGM 70 - Tier 2; QL

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Preferred Agents	Non-Preferred Agents
<p>WIDE-SEAL DIAPHRAGM 75 - Tier 2; QL WIDE-SEAL DIAPHRAGM 80 - Tier 2; QL WIDE-SEAL DIAPHRAGM 85 - Tier 2; QL WIDE-SEAL DIAPHRAGM 90 - Tier 2; QL WIDE-SEAL DIAPHRAGM 95 - Tier 2; QL <i>womans laxative (generic for EX-LAX ULTRA) - Tier 1; QL</i> <i>womens gentle laxative (generic for EX-LAX ULTRA) - Tier 1; QL</i> <i>womens laxative oral tablet delayed release 5 mg (generic for EX-LAX ULTRA) - Tier 1; QL</i> ZOSTRIX HP (brand for capsaicin) - Tier 2; QL ZURZUVAE ORAL CAPSULE 20 MG, 30 MG - Tier 2; QL; AL</p>	

Molecular Target Inhibitors - Chemotherapy Agents

Antineoplastics - Drugs to Treat Cancer

<p>ALECENSA - Tier 2; PA; SP; QL ALUNBRIG - Tier 2; PA; SP; QL BOSULIF - Tier 2; PA; SP; QL BRUKINSA - Tier 2; PA; SP CABOMETYX - Tier 2; PA; SP; QL CAPRELSA - Tier 2; PA; SP; QL COMETRIQ (100 MG DAILY DOSE) - Tier 2; PA; SP; QL COMETRIQ (140 MG DAILY DOSE) - Tier 2; PA; SP; QL COMETRIQ (60 MG DAILY DOSE) - Tier 2; PA; SP; QL <i>erlotinib hcl (generic for TARCEVA) - Tier 1; PA; SP; QL</i> <i>gefitinib (generic for IRESSA) - Tier 1; PA; SP; QL</i> GILOTRIF - Tier 2; PA; SP; QL ICLUSIG - Tier 2; PA; SP; QL <i>imatinib mesylate (generic for GLEEVEC) - Tier 1; PA; SP; QL</i> IMBRUVICA - Tier 2; PA; SP; QL INLYTA - Tier 2; PA; SP; QL <i>lapatinib ditosylate (generic for TYKERB) - Tier 1; PA; SP; QL</i> LENVIMA (10 MG DAILY DOSE) - Tier 2; PA; SP; QL LENVIMA (12 MG DAILY DOSE) - Tier 2; PA; SP; QL</p>	<p>GAVRETO - Tier 2; PA; SP; QL GLEEVEC (brand for imatinib mesylate) - Tier 2; PA; SP; QL IRESSA (brand for gefitinib) - Tier 2; PA; SP; QL LORBRENA - Tier 2; PA; SP; QL RETEVMO - Tier 2; PA; SP; QL TABRECTA - Tier 2; PA; SP; QL TAGRISSO - Tier 2; PA; SP; QL TARCEVA (brand for erlotinib hcl) - Tier 2; PA; SP; QL VIZIMPRO - Tier 2; PA; SP; QL VOTRIENT (brand for pazopanib hcl) - Tier 2; PA; SP; QL</p>
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Preferred Agents	Non-Preferred Agents
LENVIMA (14 MG DAILY DOSE) - Tier 2; PA; SP; QL LENVIMA (18 MG DAILY DOSE) - Tier 2; PA; SP; QL LENVIMA (20 MG DAILY DOSE) - Tier 2; PA; SP; QL LENVIMA (24 MG DAILY DOSE) - Tier 2; PA; SP; QL LENVIMA (4 MG DAILY DOSE) - Tier 2; PA; SP; QL LENVIMA (8 MG DAILY DOSE) - Tier 2; PA; SP; QL <i>pazopanib hcl (generic for VOTRIENT) - Tier 1; PA; SP; QL</i> SPRYCEL - Tier 2; PA; SP; QL TASIGNA - Tier 2; PA; SP; QL TURALIO - Tier 2; SP; QL; AL XALKORI ORAL CAPSULE - Tier 2; PA; SP; QL	
Multiple Sclerosis Agents - Multiple Sclerosis Drugs	
Central Nervous System Agents - Drugs to Treat Nerve Conditions	
	PONVORY - Tier 2; PA; SP; QL PONVORY STARTER PACK - Tier 2; PA; SP; QL
Ophthalmic Agents	
Ophthalmic Prostaglandin and Prostaglandin Analogs	
<i>latanoprost ophthalmic (generic for XALATAN) - Tier 1; QL</i>	LUMIGAN - Tier 2; PA; QL TRAVATAN Z (brand for travoprost (bak free)) - Tier 2; PA; QL VYZULTA - Tier 2; PA; QL XALATAN (brand for latanoprost) - Tier 2; PA; QL XELPROS - Tier 2; PA; QL ZIOPTAN (brand for tafluprost (pf)) - Tier 2; PA; QL
Ophthalmic Agents, Other	
<i>altafrin (generic for ALTAFRIN) - Tier 1; QL</i> <i>atropine sulfate ophthalmic ointment - Tier 1; QL</i> <i>atropine sulfate ophthalmic solution 1 % - Tier 1; QL</i>	CEQUA - Tier 2; PA; QL COMBIGAN (brand for brimonidine tartrate-timolol) - Tier 2; PA; QL COSOPT (brand for dorzolamide hcl-timolol mal) - Tier 2; PA; QL

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Preferred Agents	Non-Preferred Agents
<p><i>bacitra-neomycin-polymyxin-hc (generic for NEO-POLYCIN HC) - Tier 1; QL</i></p> <p><i>cyclopentolate hcl ophthalmic (generic for CYCLOGYL) - Tier 1; QL</i></p> <p><i>CYSTARAN - Tier 2; DX2RX; SP; QL</i></p> <p><i>dorzolamide hcl-timolol mal (generic for COSOPT) - Tier 1; QL</i></p> <p><i>neomycin-polymyxin-dexameth ophthalmic ointment (generic for MAXITROL) - Tier 1; QL</i></p> <p><i>neomycin-polymyxin-dexameth ophthalmic suspension 3.5-10000-0.1 (generic for MAXITROL) - Tier 1; QL</i></p> <p><i>neo-polycin hc (generic for NEO-POLYCIN HC) - Tier 1; QL</i></p> <p><i>phenylephrine hcl ophthalmic (generic for ALTAFRIN) - Tier 1; QL</i></p> <p><i>sulfacetamide-prednisolone - Tier 1; QL</i></p> <p><i>TOBRADEX - Tier 2; QL</i></p> <p><i>tobramycin-dexamethasone - Tier 1; QL</i></p> <p><i>XIIDRA - Tier 2; PA; QL</i></p>	<p><i>COSOPT PF (brand for dorzolamide hcl-timolol mal pf) - Tier 2; PA; QL</i></p> <p><i>RESTASIS (brand for cyclosporine) - Tier 2; PA; QL</i></p> <p><i>RESTASIS MULTIDOSE (brand for cyclosporine) - Tier 2; PA; QL</i></p> <p><i>ROCKLATAN - Tier 2; PA; QL</i></p> <p><i>TOBRADEX ST - Tier 2; PA; QL</i></p> <p><i>TYRVAYA - Tier 2; PA; QL</i></p> <p><i>VERKAZIA - Tier 2; PA; QL</i></p> <p><i>ZYLET - Tier 2; PA; QL</i></p>

Ophthalmic Anti-allergy Agents

<p><i>azelastine hcl ophthalmic - Tier 1; ST; QL</i></p> <p><i>cromolyn sodium ophthalmic - Tier 1; QL</i></p> <p><i>olopatadine hcl ophthalmic (generic for PATADAY) - Tier 1; QL</i></p> <p><i>PATADAY OPHTHALMIC SOLUTION 0.1 %, 0.2 % (brand for olopatadine hcl) - Tier 2; QL</i></p>	
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Ophthalmic Anti-Infectives

<p><i>bacitracin ophthalmic - Tier 1; QL</i></p> <p><i>bacitracin-polymyxin b ophthalmic (generic for POLYCIN) - Tier 1; QL</i></p> <p><i>ciprofloxacin hcl ophthalmic - Tier 1; QL</i></p> <p><i>erythromycin ophthalmic - Tier 1; QL</i></p> <p><i>gentamicin sulfate ophthalmic - Tier 1; QL</i></p> <p><i>neomycin-bacitracin zn-polymyx (generic for NEO-POLYCIN) - Tier 1; QL</i></p> <p><i>neomycin-polymyxin-gramicidin - Tier 1; QL</i></p> <p><i>neo-polycin (generic for NEO-POLYCIN) - Tier 1; QL</i></p>	<p><i>AZASITE - Tier 2; PA; QL</i></p> <p><i>BESIVANCE - Tier 2; PA; QL</i></p> <p><i>VIGAMOX (brand for moxifloxacin hcl) - Tier 2; PA; QL</i></p> <p><i>ZYMAXID (brand for gatifloxacin) - Tier 2; PA; QL</i></p>
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Preferred Agents	Non-Preferred Agents
<p><i>ofloxacin ophthalmic (generic for OCUFLOX) - Tier 1; QL</i> <i>polycin (generic for POLYCIN) - Tier 1; QL</i> <i>polymyxin b-trimethoprim - Tier 1; QL</i> <i>sulfacetamide sodium ophthalmic - Tier 1; QL</i> <i>tobramycin ophthalmic - Tier 1; QL</i> <i>trifluridine - Tier 1; QL</i></p>	
Ophthalmic Anti-inflammatories	
<p><i>dexamethasone sodium phosphate ophthalmic - Tier 1; QL</i> <i>diclofenac sodium ophthalmic - Tier 1; QL</i> <i>fluorometholone (generic for FML LIQUIFILM) - Tier 1; QL</i> <i>flurbiprofen sodium - Tier 1; QL</i> <i>ketorolac tromethamine ophthalmic (generic for ACULAR) - Tier 1; QL</i> <i>PRED MILD - Tier 2; QL</i> <i>prednisolone acetate ophthalmic (generic for PRED FORTE) - Tier 1; QL</i> <i>PREDNISOLONE ACETATE P-F (brand for prednisolone acetate) - Tier 2; QL</i> <i>prednisolone sodium phosphate ophthalmic - Tier 1; QL</i></p>	<p><i>ACULAR LS (brand for ketorolac tromethamine) - Tier 2; PA; QL</i> <i>ACUVAIL - Tier 2; PA; QL</i> <i>BROMSITE - Tier 2; PA; QL</i> <i>EYSUVIS - Tier 2; PA; QL</i> <i>FLAREX - Tier 2; PA; QL</i> <i>FML FORTE - Tier 2; PA; QL</i> <i>ILEVRO - Tier 2; PA; QL</i> <i>INVELTYS - Tier 2; PA; QL</i> <i>LOTEMAX (brand for loteprednol etabonate) - Tier 2; PA; QL</i> <i>LOTEMAX SM - Tier 2; PA; QL</i> <i>NEVANAC - Tier 2; PA; QL</i> <i>PRED FORTE (brand for prednisolone acetate) - Tier 2; PA; QL</i> <i>PROLENSA - Tier 2; PA; QL</i></p>
Ophthalmic Beta-Adrenergic Blocking Agents	
<p><i>betaxolol hcl ophthalmic - Tier 1; QL</i> <i>carteolol hcl - Tier 1; QL</i> <i>levobunolol hcl - Tier 1; QL</i> <i>timolol maleate ophthalmic solution - Tier 1; QL</i></p>	<p><i>BETIMOL - Tier 2; PA; QL</i> <i>BETOPTIC-S - Tier 2; PA; QL</i> <i>ISTALOL (brand for timolol maleate (once-daily)) - Tier 2; PA; QL</i> <i>TIMOPTIC OCUDOSE (brand for timolol maleate pf) - Tier 2; PA; QL</i></p>
Ophthalmic Intraocular Pressure Lowering Agents, Other	
<p><i>apraclonidine hcl - Tier 1; QL</i> <i>brimonidine tartrate ophthalmic solution 0.15 % (generic for ALPHAGAN P) - Tier 1; QL</i></p>	<p><i>ALPHAGAN P (brand for brimonidine tartrate) - Tier 2; PA; QL</i> <i>AZOPT (brand for brinzolamide) - Tier 2; PA; QL</i> <i>RHOPRESSA - Tier 2; PA; QL</i></p>

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Preferred Agents	Non-Preferred Agents
<p><i>brimonidine tartrate ophthalmic solution 0.2 % - Tier 1; QL</i> DORZOLAMIDE HCL SOLUTION 2 % OPHTHALMIC - Tier 2; QL <i>dorzolamide hcl solution 2 % ophthalmic - Tier 1; QL</i> <i>methazolamide oral - Tier 1; QL</i> PHOSPHOLINE IODIDE - Tier 2; QL <i>pilocarpine hcl ophthalmic - Tier 1; QL</i></p>	<p>SIMBRINZA - Tier 2; PA; QL</p>

Ophthalmic Agents - Drugs to Treat Eye Conditions

Ophthalmic Agents, Other - Miscellaneous Eye Drugs

<p><i>altachlore (generic for ALTACHLORE) - Tier 1; QL</i> <i>altalube (generic for ALTALUBE) - Tier 1; QL</i> <i>artificial tears ophthalmic solution (generic for GENTEAL TEARS) - Tier 1; QL</i> <i>astringent eye drops (generic for VISINE-AC) - Tier 1; QL</i> BIOLLE TEARS (brand for cvs lubricant eye drops (pf)) - Tier 2; QL BION TEARS PF (brand for cvs natural tears pf) - Tier 2; QL <i>carboxymethylcellulose sodium ophthalmic solution (generic for ULTRA FRESH) - Tier 1; QL</i> <i>dry eye relief ophthalmic gel 0.4-0.3 % (generic for GENTEAL TEARS SEVERE DAY/NIGHT) - Tier 1; QL</i> <i>dry-eye relief nighttime (generic for ALTALUBE) - Tier 1; QL</i> <i>eye drops advanced relief - Tier 1; QL</i> <i>eye drops long lasting (generic for SYSTANE) - Tier 1; QL</i> <i>eye drops ophthalmic solution 0.05 % (generic for VISINE RED EYE COMFORT) - Tier 1; QL</i> <i>eye drops ophthalmic solution 0.05-0.1-1-1 % - Tier 1; QL</i> <i>eye drops ophthalmic solution 0.05-0.25 % (generic for VISINE-AC) - Tier 1; QL</i> <i>eye irritation relief drops (generic for VISINE-AC) - Tier 1; QL</i> <i>eye lubricant (generic for ALTALUBE) - Tier 1; QL</i> <i>for sty relief (generic for ALTALUBE) - Tier 1; QL</i> GENTEAL SEVERE - Tier 2; QL</p>	
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Preferred Agents

Non-Preferred Agents

GENTEAL TEARS MODERATE PF (brand for cvs natural tears pf) - Tier 2; QL
 GENTEAL TEARS NIGHT-TIME (brand for cvs dry-eye relief nighttime) - Tier 2; QL
 GENTEAL TEARS OPHTHALMIC SOLUTION 0.1-0.2-0.3 % (brand for artificial tears) - Tier 2; QL
 GENTEAL TEARS PF (brand for cvs natural tears pf) - Tier 2; QL
 GENTEAL TEARS SEVERE DAY/NIGHT (brand for dry eye relief) - Tier 2; QL
 HYPOTEARs (brand for cvs dry-eye relief nighttime) - Tier 2; QL
 lubricant drops fast act (generic for SYSTANE) - Tier 1; QL
 lubricant drops ophthalmic gel 0.25-0.3 % - Tier 1; QL
 lubricant drops ophthalmic solution (generic for SYSTANE BALANCE) - Tier 1; QL
 lubricant eye drops (pf) (generic for BIOLLE TEARS) - Tier 1; QL
 lubricant eye drops (pf) ophthalmic solution 0.4-0.3 % (generic for SYSTANE HYDRATION PF) - Tier 1; QL
 lubricant eye drops ophthalmic solution 0.4-0.3 % (generic for SYSTANE) - Tier 1; QL
 lubricant eye drops ophthalmic solution 0.5 % (generic for ULTRA FRESH) - Tier 1; QL
 lubricant eye drops ophthalmic solution 0.6 % (generic for SYSTANE BALANCE) - Tier 1; QL
 lubricant eye drops pf (generic for BIOLLE TEARS) - Tier 1; QL
 lubricant eye nighttime (generic for ALTALUBE) - Tier 1; QL
 lubricant eye ophthalmic solution 0.4-0.3 % (generic for SYSTANE) - Tier 1; QL
 lubricant pm (generic for ALTALUBE) - Tier 1; QL
 lubricating eye drop (generic for BIOLLE TEARS) - Tier 1; QL
 lubricating eye drops (generic for SYSTANE) - Tier 1; QL
 lubricating eye/overnight (generic for ALTALUBE) - Tier 1; QL
 lubricating plus eye drops (generic for BIOLLE TEARS) - Tier 1; QL
 lubricating plus ophthalmic solution 0.5 % (generic for BIOLLE TEARS) - Tier 1; QL

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Preferred Agents

lubricating tears ophthalmic solution 0.4-0.3 % (generic for SYSTANE) - Tier 1; QL
lubrifresh p.m. (generic for ALTALUBE) - Tier 1; QL
MURO 128 OPHTHALMIC OINTMENT (brand for cvs sod chloride hypertonicity) - Tier 2; QL
MURO 128 OPHTHALMIC SOLUTION 5 % (brand for cvs sodium chloride) - Tier 2; QL
natural tears pf (generic for BION TEARS PF) - Tier 1; QL
nighttime dry-eye relief (generic for ALTALUBE) - Tier 1; QL
nighttime relief lub eye (generic for ALTALUBE) - Tier 1; QL
polyvinyl alcohol ophthalmic - Tier 1; QL
pure & gentle lubricant - Tier 1; QL
REFRESH LACRI-LUBE (brand for cvs dry-eye relief nighttime) - Tier 2; QL
REFRESH PLUS (brand for cvs lubricant eye drops (pf)) - Tier 2; QL
REFRESH TEARS (brand for carboxymethylcellulose sodium) - Tier 2; QL
relief eye drops (generic for VISINE-AC) - Tier 1; QL
restore plus lubricant eye (generic for BIOLLE TEARS) - Tier 1; QL
restore pm (generic for ALTALUBE) - Tier 1; QL
sod chloride hypertonicity (generic for ALTACHLORE) - Tier 1; QL
sodium chloride (generic for ALTACHLORE) - Tier 1; QL
sodium chloride (hypertonic) (generic for ALTACHLORE) - Tier 1; QL
SYSTANE (brand for cvs lubricant drops fast act) - Tier 2; QL
SYSTANE BALANCE (brand for cvs lubricant drops) - Tier 2; QL
SYSTANE COMPLETE (brand for cvs lubricant drops) - Tier 2; QL
SYSTANE CONTACTS (brand for artificial tears) - Tier 2; QL
SYSTANE HYDRATION PF (brand for cvs lubricant eye drops (pf)) - Tier 2; QL
SYSTANE NIGHTTIME (brand for cvs dry-eye relief nighttime) - Tier 2; QL
SYSTANE PRESERVATIVE FREE (brand for cvs lubricant eye drops (pf)) - Tier 2; QL
SYSTANE ULTRA (brand for cvs lubricant drops fast act) - Tier 2; QL

Non-Preferred Agents

Tier 1: Generic; Tier 2: Brand; ^: Medical Office Attestation Needed if Prescribed by Behavioral Health Provider, Full Prior Authorization Needed if Prescribed by Non-Behavioral Health Provider; *: Available without PA for participating Behavioral Health Prescribers; AL: Limited to members of a certain age; DX2RX: Diagnosis Required; GE: Gender Limit; PA: Prior Auth Required; QL: Quantity Limit; SP: Specialty Medication; ST: Step Therapy

Preferred Agents	Non-Preferred Agents
<p><i>SYSTANE ULTRA PF (brand for cvs lubricant eye drops (pf)) - Tier 2; QL</i></p> <p><i>ultra fresh (generic for ULTRA FRESH) - Tier 1; QL</i></p> <p><i>ultra fresh pm (generic for ALTALUBE) - Tier 1; QL</i></p> <p><i>ultra lubricant drop (generic for SYSTANE) - Tier 1; QL</i></p> <p><i>ultra lubricating eye drops (generic for SYSTANE) - Tier 1; QL</i></p> <p><i>ultra lubricating eye drops pf (generic for SYSTANE HYDRATION PF) - Tier 1; QL</i></p>	
<p>Ophthalmic Anti-allergy Agents - Allergy, Infection and Inflammation Drugs</p>	
<p><i>NAPHCON-A (brand for allergy eye) - Tier 2; QL</i></p> <p><i>VASOCLEAR-A - Tier 2; QL</i></p> <p><i>VISINE (brand for allergy eye) - Tier 2; QL</i></p>	
<p>Ophthalmic Anti-Inflammatories - Allergy, Infection and Inflammation Drugs</p>	
<p><i>ALAWAY (brand for cvs allergy eye drops) - Tier 2; QL</i></p> <p><i>ALAWAY CHILDRENS ALLERGY (brand for cvs allergy eye drops) - Tier 2; QL</i></p> <p><i>allergy eye drops (generic for ALAWAY) - Tier 1; QL</i></p> <p><i>eye itch relief ophthalmic solution 0.035 % (generic for ALAWAY) - Tier 1; QL</i></p> <p><i>ketotifen fumarate ophthalmic (generic for ALAWAY) - Tier 1; QL</i></p> <p><i>ZADITOR (brand for cvs allergy eye drops) - Tier 2; QL</i></p>	
<p>Otic Agents</p>	
<p><i>acetic acid otic - Tier 1; QL</i></p> <p><i>ciprofloxacin-dexamethasone - Tier 1; DX2RX; QL</i></p> <p><i>hydrocortisone-acetic acid (generic for ACETASOL HC) - Tier 1; QL</i></p> <p><i>neomycin-polymyxin-hc otic - Tier 1; QL</i></p>	<p><i>CETRAXAL (brand for ciprofloxacin hcl) - Tier 2; PA; QL</i></p> <p><i>CIPRO HC - Tier 2; PA; QL</i></p> <p><i>OTOVEL (brand for ciprofloxacin-fluocinolone pf) - Tier 2; PA; QL</i></p>

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Preferred Agents	Non-Preferred Agents
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ofloxacin otic - Tier 1; QL

Otic Agents - Drugs to Treat Ear Conditions

Otic Agents - Drugs for the Ear

CLEARCANAL EARWAX SOFTENER (brand for cvs ear drops) - Tier 2; QL
CLINERE EARWAX REMOVAL KIT OTIC SOLUTION (brand for cvs ear drops) - Tier 2; QL
ear drops otic solution 6.5 % (generic for CLEARCANAL EARWAX SOFTENER) - Tier 1; QL
ear wax kit (generic for CLEARCANAL EARWAX SOFTENER) - Tier 1; QL
ear wax removal (generic for CLEARCANAL EARWAX SOFTENER) - Tier 1; QL
ear wax removal system (generic for CLEARCANAL EARWAX SOFTENER) - Tier 1; QL
earwax removal (generic for CLEARCANAL EARWAX SOFTENER) - Tier 1; QL
earwax removal drops (generic for CLEARCANAL EARWAX SOFTENER) - Tier 1; QL
earwax removal kit (generic for CLEARCANAL EARWAX SOFTENER) - Tier 1; QL
ft earwax removal (generic for CLEARCANAL EARWAX SOFTENER) - Tier 1; QL
ft earwax removal kit (generic for CLEARCANAL EARWAX SOFTENER) - Tier 1; QL

Respiratory Tract/Pulmonary Agents

Antihistamines

all day allergy oral tablet 10 mg (generic for KLS ALLER-TEC) - Tier 1; QL

DYMISTA (brand for azelastine-fluticasone) - Tier 2; PA; QL

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Preferred Agents**Non-Preferred Agents**

allergy (cetirizine) (generic for KLS ALLER-TEC) - Tier 1; QL
allergy 24hour indoor/outdoor (generic for KLS ALLER-TEC) - Tier 1; QL
allergy childrens oral liquid (generic for RA DIPHEDRYL ALLERGY) - Tier 1; QL
allergy medication (generic for BANOPHEN) - Tier 1; QL
allergy medicine (generic for BANOPHEN) - Tier 1; QL
allergy oral capsule 25 mg (generic for BANOPHEN) - Tier 1; QL
allergy oral liquid 12.5 mg/5ml (generic for RA DIPHEDRYL ALLERGY) - Tier 1; QL
allergy oral tablet 25 mg (generic for BANOPHEN) - Tier 1; QL
allergy relief (cetirizine) oral tablet 10 mg (generic for KLS ALLER-TEC) - Tier 1; QL
allergy relief adult (generic for RA DIPHEDRYL ALLERGY) - Tier 1; QL
allergy relief cetirizine (generic for KLS ALLER-TEC) - Tier 1; QL
allergy relief childrens oral liquid 12.5 mg/5ml (generic for RA DIPHEDRYL ALLERGY) - Tier 1; QL
allergy relief childrens oral tablet chewable 12.5 mg (generic for BENADRYL ALLERGY CHILDRENS) - Tier 1; QL
allergy relief max st (generic for RA DIPHEDRYL ALLERGY) - Tier 1; QL
allergy relief oral capsule 25 mg (generic for BANOPHEN) - Tier 1; QL
allergy relief oral liquid 25 mg/10ml (generic for RA DIPHEDRYL ALLERGY) - Tier 1; QL
allergy relief oral tablet 25 mg (generic for BANOPHEN) - Tier 1; QL
allergy relief oral tablet chewable 12.5 mg (generic for BENADRYL ALLERGY CHILDRENS) - Tier 1; QL
allergy relief(cetirizine) (generic for KLS ALLER-TEC) - Tier 1; QL
allergy relief/indoor/outdoor oral tablet 10 mg (generic for KLS ALLER-TEC) - Tier 1; QL
aller-tec (generic for KLS ALLER-TEC) - Tier 1; QL
anti-hist allergy (generic for BANOPHEN) - Tier 1; QL
azelastine hcl nasal solution 0.1 %, 137 mcg/spray - Tier 1; QL
banophen oral capsule 25 mg (generic for BANOPHEN) - Tier 1; QL
banophen oral tablet (generic for BANOPHEN) - Tier 1; QL

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Preferred Agents**Non-Preferred Agents**

BENADRYL ALLERGY CHILDRENS ORAL LIQUID (brand for allergy childrens) - Tier 2; QL

BENADRYL ALLERGY CHILDRENS ORAL TABLET CHEWABLE (brand for cvs allergy relief childrens) - Tier 2; QL

BENADRYL ALLERGY ORAL TABLET (brand for allergy relief) - Tier 2; QL

BENADRYL ALLERGY ULTRATABS (brand for allergy relief) - Tier 2; QL

cetirizine allergy relief (generic for KLS ALLER-TEC) - Tier 1; QL

cetirizine hcl oral solution 1 mg/ml (generic for KLS ALLER-TEC CHILDRENS) - Tier 1; QL

cetirizine hcl oral tablet (generic for KLS ALLER-TEC) - Tier 1; QL

childrens allergy oral liquid 12.5 mg/5ml (generic for RA DIPHEDRYL ALLERGY) - Tier 1; QL

clemastine fumarate oral syrup - Tier 1; QL

clemastine fumarate oral tablet 2.68 mg - Tier 1; QL

complete allergy (generic for BANOPHEN) - Tier 1; QL

complete allergy medicine oral capsule (generic for BANOPHEN) - Tier 1; QL

complete allergy relief (generic for BANOPHEN) - Tier 1; QL

cyproheptadine hcl oral - Tier 1; QL

DAYHIST ALLERGY 12 HOUR RELIEF (brand for clemastine fumarate) - Tier 2; QL

diphenhydramine hcl childrens (generic for RA DIPHEDRYL ALLERGY) - Tier 1; QL

diphenhydramine hcl injection - Tier 1; QL

diphenhydramine hcl oral (generic for BANOPHEN) - Tier 1; QL

ft all day allergy (generic for KLS ALLER-TEC) - Tier 1; QL

ft all day allergy 24 hour (generic for KLS ALLER-TEC) - Tier 1; QL

ft allergy relief childrens oral liquid (generic for RA DIPHEDRYL ALLERGY) - Tier 1; QL

ft allergy relief oral capsule (generic for BANOPHEN) - Tier 1; QL

ft allergy relief oral tablet 25 mg (generic for BANOPHEN) - Tier 1; QL

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Preferred Agents	Non-Preferred Agents
<p><i>geri-dryl (generic for BANOPHEN) - Tier 1; QL</i> <i>h-e-b childrens allergy (generic for RA DIPHEDRYL ALLERGY) - Tier 1; QL</i> <i>indoor/outdoor allergy rlf (generic for KLS ALLER-TEC) - Tier 1; QL</i> <i>levocetirizine dihydrochloride oral tablet (generic for XYZAL ALLERGY 24HR) - Tier 1; QL</i> <i>liquid allergy relief (generic for RA DIPHEDRYL ALLERGY) - Tier 1; QL</i> <i>m-dryl (generic for RA DIPHEDRYL ALLERGY) - Tier 1; QL</i> <i>MM ALLER-BEN (brand for allergy relief) - Tier 2; QL</i> <i>NARAMIN (brand for allergy childrens) - Tier 2; QL</i> <i>pharbedryl (generic for BANOPHEN) - Tier 1; QL</i> <i>siladryl allergy (generic for RA DIPHEDRYL ALLERGY) - Tier 1; QL</i> <i>total allergy (generic for BANOPHEN) - Tier 1; QL</i> <i>total allergy medicine (generic for RA DIPHEDRYL ALLERGY) - Tier 1; QL</i> <i>ZYRTEC ALLERGY ORAL TABLET (brand for all day allergy) - Tier 2; QL</i></p>	

Anti-inflammatories, Inhaled Corticosteroids	
<p>ASMANEX (120 METERED DOSES) - Tier 2; PA; QL ASMANEX (14 METERED DOSES) - Tier 2; PA; QL ASMANEX (30 METERED DOSES) - Tier 2; PA; QL ASMANEX (60 METERED DOSES) - Tier 2; PA; QL ASMANEX HFA - Tier 2; PA; Members >= 8 years of age will require PA; QL <i>budesonide inhalation (generic for PULMICORT) - Tier 1; Members >= 5 years of age will require PA; QL; AL</i> <i>FLUTICASONE PROPIONATE HFA (brand for fluticasone propionate hfa) - Tier 2; QL</i> <i>fluticasone propionate nasal (generic for CLARISPRAY) - Tier 1; QL</i></p>	<p>ALVESCO - Tier 2; PA; QL ARNUITY ELLIPTA - Tier 2; PA; QL BECONASE AQ NASAL SUSPENSION 42 MCG/SPRAY - Tier 2; PA; QL <i>FLOVENT DISKUS (brand for fluticasone propionate diskus) - Tier 2; PA; QL</i> <i>FLOVENT HFA (brand for fluticasone propionate hfa) - Tier 2; PA; QL</i> OMNARIS - Tier 2; PA; QL PULMICORT FLEXHALER - Tier 2; PA; QL <i>PULMICORT SUSPENSION (brand for budesonide) - Tier 2; PA; Members >= 5 years of age will require PA; QL; AL</i> QNASL - Tier 2; PA; QL QNASL CHILDRENS - Tier 2; PA; QL QVAR REDHALER - Tier 2; PA; QL XHANCE - Tier 2; PA; QL ZETONNA - Tier 2; PA; QL</p>

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Preferred Agents	Non-Preferred Agents
Antileukotrienes	
<i>montelukast sodium oral (generic for SINGULAIR) - Tier 1; QL</i>	<i>ACCOLATE (brand for zafirlukast) - Tier 2; PA; QL</i> <i>SINGULAIR (brand for montelukast sodium) - Tier 2; PA; QL</i> <i>zafirlukast (generic for ACCOLATE) - Tier 1; PA; QL</i> <i>ZYFLO - Tier 2; PA</i>
Bronchodilators, Anticholinergic	
<i>ATROVENT HFA - Tier 2; QL</i> <i>INCRUSE ELLIPTA - Tier 2; QL</i> <i>ipratropium bromide inhalation - Tier 1; QL</i> <i>ipratropium bromide nasal - Tier 1; QL</i>	<i>SPIRIVA HANDIHALER (brand for tiotropium bromide monohydrate) - Tier 2; PA; QL</i> <i>SPIRIVA RESPIMAT - Tier 2; PA; QL</i> <i>YUPELRI - Tier 2; PA; QL</i>
Bronchodilators, Sympathomimetic	
<i>albuterol sulfate hfa aerosol solution 108 (90 base) mcg/act inhalation (generic for PROVENTIL HFA) - Tier 1; QL</i> <i>ALBUTEROL SULFATE HFA AEROSOL SOLUTION 108 (90 BASE) MCG/ACT INHALATION (brand for albuterol sulfate hfa) - Tier 2; QL</i> <i>albuterol sulfate inhalation nebulization solution (2.5 mg/3ml) 0.083%, 2.5 mg/0.5ml - Tier 1; QL</i> <i>ALBUTEROL SULFATE INHALATION NEBULIZATION SOLUTION (5 MG/ML) 0.5% - Tier 2; QL</i> <i>albuterol sulfate inhalation nebulization solution 0.63 mg/3ml, 1.25 mg/3ml - Tier 1; Members >= 8 years of age will require PA; QL; AL</i> <i>albuterol sulfate oral syrup - Tier 1; QL</i> <i>epinephrine injection solution auto-injector (generic for AUVI-Q) - Tier 1; QL</i> <i>levalbuterol hcl inhalation - Tier 1; ST; QL</i> <i>STRIVERDI RESPIMAT - Tier 2; QL</i> <i>SYMJEPI - Tier 2; QL</i>	<i>AUVI-Q (brand for epinephrine) - Tier 2; PA; QL</i> <i>BROVANA (brand for arformoterol tartrate) - Tier 2; PA; QL</i> <i>EPIPEN 2-PAK (brand for epinephrine) - Tier 2; PA; QL</i> <i>EPIPEN JR 2-PAK (brand for epinephrine) - Tier 2; PA; QL</i> <i>PERFOROMIST (brand for formoterol fumarate) - Tier 2; PA; QL</i> <i>PROAIR RESPICLICK - Tier 2; PA; QL</i> <i>PROVENTIL HFA (brand for albuterol sulfate hfa) - Tier 2; PA; QL</i> <i>SEREVENT DISKUS - Tier 2; PA; QL</i> <i>VENTOLIN HFA (brand for albuterol sulfate hfa) - Tier 2; PA; QL</i> <i>XOPENEX HFA (brand for levalbuterol tartrate) - Tier 2; PA; QL</i>

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Preferred Agents	Non-Preferred Agents
Cystic Fibrosis Agents	
CAYSTON - Tier 2; DX2RX; SP; QL KALYDECO - Tier 2; PA; SP; QL ORKAMBI - Tier 2; PA; SP; QL PULMOZYME - Tier 2; DX2RX; SP; QL SYMDEKO - Tier 2; PA; SP; QL <i>tobramycin inhalation nebulization solution 300 mg/4ml (generic for BETHKIS)</i> - Tier 1; DX2RX; SP; QL TRIKAFTA ORAL TABLET THERAPY PACK - Tier 2; PA; SP; QL TRIKAFTA ORAL THERAPY PACK - Tier 2; PA; SP; QL; AL	<i>BETHKIS (brand for tobramycin)</i> - Tier 2; DX2RX; SP; QL TOBI PODHALER - Tier 2; PA; SP; QL
Mast Cell Stabilizers	
<i>cromolyn sodium inhalation</i> - Tier 1; QL	
Phosphodiesterase Inhibitors, Airways Disease	
<i>elixophyllin (generic for ELIXOPHYLLIN)</i> - Tier 1; QL THEO-24 - Tier 2 <i>theophylline (generic for ELIXOPHYLLIN)</i> - Tier 1; QL <i>theophylline er oral tablet extended release 12 hour 100 mg, 200 mg, 300 mg</i> - Tier 1; QL <i>theophylline er oral tablet extended release 12 hour 450 mg</i> - Tier 1 <i>theophylline er oral tablet extended release 24 hour 400 mg</i> - Tier 1; QL <i>theophylline er oral tablet extended release 24 hour 600 mg</i> - Tier 1	
Pulmonary Antihypertensives	
ADEMPAS - Tier 2; DX2RX; SP; QL <i>ambrisentan (generic for LETAIRIS)</i> - Tier 1; DX2RX; SP; QL <i>bosentan (generic for TRACLEER)</i> - Tier 1; DX2RX; SP; QL OPSUMIT - Tier 2; DX2RX; SP; QL <i>sildenafil citrate oral suspension reconstituted (generic for REVATIO)</i> - Tier 1; DX2RX; SP; QL	<i>ADCIRCA (brand for tadalafil (pah))</i> - Tier 2; PA; SP; QL <i>LETAIRIS (brand for ambrisentan)</i> - Tier 2; DX2RX; SP; QL ORENITRAM MONTH 1 - Tier 2; PA; SP; QL; AL ORENITRAM MONTH 2 - Tier 2; PA; SP; QL; AL ORENITRAM MONTH 3 - Tier 2; PA; SP; QL; AL

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Preferred Agents	Non-Preferred Agents
<p><i>sildenafil citrate oral tablet 20 mg (generic for REVATIO) - Tier 1; DX2RX; SP; QL</i></p>	<p>ORENITRAM ORAL TABLET EXTENDED RELEASE 0.125 MG, 0.25 MG, 1 MG - Tier 2; PA; SP ORENITRAM ORAL TABLET EXTENDED RELEASE 2.5 MG, 5 MG - Tier 2; PA; SP; QL REVATIO ORAL (brand for sildenafil citrate) - Tier 2; DX2RX; SP; QL tadalafil (pah) (generic for ADCIRCA) - Tier 1; PA; SP; QL TADLIQ - Tier 2; PA; SP; QL TRACLEER (brand for bosentan) - Tier 2; DX2RX; SP; QL TYVASO DPI MAINTENANCE KIT - Tier 2; PA; SP; QL TYVASO DPI TITRATION KIT - Tier 2; PA; SP; QL UPTRAVI ORAL - Tier 2; PA; SP; QL</p>

Pulmonary Fibrosis Agents

<p>OFEV - Tier 2; PA; SP; QL <i>pirfenidone oral capsule (generic for ESBRIET) - Tier 1; PA; SP; QL</i> <i>pirfenidone oral tablet 267 mg, 801 mg (generic for ESBRIET) - Tier 1; PA; SP; QL</i></p>	<p><i>ESBRIET (brand for pirfenidone) - Tier 2; PA; SP; QL</i></p>
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Respiratory Tract Agents, Other

<p><i>acetylcysteine inhalation - Tier 1; QL</i> FASENRA PEN - Tier 2; PA; SP; QL NUCALA SUBCUTANEOUS SOLUTION AUTO-INJECTOR - Tier 2; PA; SP; QL NUCALA SUBCUTANEOUS SOLUTION PREFILLED SYRINGE - Tier 2; PA; SP; QL <i>promethazine vc - Tier 1; QL; AL</i></p>	<p>TEZSPIRE SUBCUTANEOUS SOLUTION AUTO-INJECTOR - Tier 2; PA; SP; QL</p>
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Respiratory Tract/Pulmonary Agents - Drugs to Treat Allergies, Cough, Cold and Lung Conditions

<p><i>4-WAY FAST ACTING (brand for cvs nasal spray) - Tier 2; QL</i> <i>4-WAY MENTHOL (brand for cvs nasal spray) - Tier 2; QL</i></p>	
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Preferred Agents

AFRIN SALINE NASAL MIST (brand for altamist spray) - Tier 2; QL
 altamist spray (generic for AFRIN SALINE NASAL MIST) - Tier 1; QL
 altarussin (generic for TUSNEL-EX) - Tier 1; QL; AL
 AYR (brand for altamist spray) - Tier 2; QL
 AYR SALINE NASAL DROPS - Tier 2; QL
 BABY AYR SALINE (brand for altamist spray) - Tier 2; QL
 BROMFED DM (brand for pseudoeph-bromphen-dm) - Tier 2; QL; AL
 BUCKLEYS CHEST CONGESTION (brand for altarussin) - Tier 2; QL;
 AL
 chest congestion relief child (generic for TUSNEL-EX) - Tier 1; QL; AL
 chest congestion relief oral liquid (generic for TUSNEL-EX) - Tier 1; QL;
 AL
 chest congestion relief oral tablet (generic for XPECT) - Tier 1
 CORICIDIN HBP COUGH/COLD (brand for cough & cold) - Tier 2; AL
 cough & cold (generic for CORICIDIN HBP COUGH/COLD) - Tier 1; AL
 cough & cold hbp (generic for CORICIDIN HBP COUGH/COLD) - Tier 1;
 AL
 cough relief oral syrup 15 mg/5ml (generic for WAL-TUSSIN COUGH
 LONG ACTING) - Tier 1; AL
 cough/cold hbp (generic for CORICIDIN HBP COUGH/COLD) - Tier 1;
 AL
 deep sea nasal spray (generic for AFRIN SALINE NASAL MIST) - Tier
 1; QL
 ed bron gp - Tier 1; AL
 ephrine nose drops (generic for 4-WAY FAST ACTING) - Tier 1; QL
 ft chest congestion relief (generic for XPECT) - Tier 1
 ft mucus relief 12hr oral tablet extended release 12 hour 1200 mg
 (generic for EQ MUCUS ER) - Tier 1; QL; AL
 ft nasal decongestant pe (generic for SUDAFED PE SINUS
 CONGESTION) - Tier 1
 ft tussin adult (generic for TUSNEL-EX) - Tier 1; QL; AL
 geri-tussin oral liquid (generic for TUSNEL-EX) - Tier 1; QL; AL
 guaifenesin er oral tablet extended release 12 hour 1200 mg (generic for
 EQ MUCUS ER) - Tier 1; QL; AL
 guaifenesin oral liquid (generic for TUSNEL-EX) - Tier 1; QL; AL

Non-Preferred Agents

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Preferred Agents**Non-Preferred Agents**

guaifenesin oral tablet 400 mg (generic for XPECT) - Tier 1
MAX TUSSIN MUCUS & CHEST CONG (brand for altarussin) - Tier 2; QL; AL
maxi-tuss pe max - Tier 1; AL
medifin 400 (generic for XPECT) - Tier 1
medifin mucus relief child (generic for TUSNEL-EX) - Tier 1; QL; AL
MUCINEX FAST-MAX CHEST CONG MS (brand for altarussin) - Tier 2; QL; AL
MUCINEX MAXIMUM STRENGTH (brand for cvs mucus extended release) - Tier 2; QL; AL
mucus er maximum str (generic for EQ MUCUS ER) - Tier 1; QL; AL
mucus er oral tablet extended release 12 hour 1200 mg (generic for EQ MUCUS ER) - Tier 1; QL; AL
mucus extended release oral tablet extended release 12 hour 1200 mg (generic for EQ MUCUS ER) - Tier 1; QL; AL
mucus relief 12 hour max st (generic for EQ MUCUS ER) - Tier 1; QL; AL
mucus relief chest oral tablet 400 mg (generic for XPECT) - Tier 1
mucus relief childrens oral liquid 100 mg/5ml (generic for TUSNEL-EX) - Tier 1; QL; AL
mucus relief er oral tablet extended release 12 hour 1200 mg (generic for EQ MUCUS ER) - Tier 1; QL; AL
mucus relief max st (generic for EQ MUCUS ER) - Tier 1; QL; AL
mucus relief max strength oral tablet extended release 12 hour 1200 mg (generic for EQ MUCUS ER) - Tier 1; QL; AL
mucus relief oral tablet 400 mg (generic for XPECT) - Tier 1
mucus relief oral tablet extended release 12 hour 1200 mg (generic for EQ MUCUS ER) - Tier 1; QL; AL
mucus+chest congestion (generic for TUSNEL-EX) - Tier 1; QL; AL
mucus-er oral tablet extended release 12 hour 1200 mg (generic for EQ MUCUS ER) - Tier 1; QL; AL
nasal decongestant pe max st (generic for SUDAFED PE SINUS CONGESTION) - Tier 1
nasal decongestant pe oral tablet 10 mg (generic for SUDAFED PE SINUS CONGESTION) - Tier 1

Tier 1: Generic; Tier 2: Brand; ^: Medical Office Attestation Needed if Prescribed by Behavioral Health Provider, Full Prior Authorization Needed if Prescribed by Non-Behavioral Health Provider; *: Available without PA for participating Behavioral Health Prescribers; AL: Limited to members of a certain age; DX2RX: Diagnosis Required; GE: Gender Limit; PA: Prior Auth Required; QL: Quantity Limit; SP: Specialty Medication; ST: Step Therapy

Preferred Agents

nasal four (generic for 4-WAY FAST ACTING) - Tier 1; QL
nasal four spray (generic for 4-WAY FAST ACTING) - Tier 1; QL
NASAL MOIST NASAL SOLUTION (brand for altamist spray) - Tier 2; QL
nasal moisturizing spray (generic for AFRIN SALINE NASAL MIST) - Tier 1; QL
nasal spray fast acting (generic for 4-WAY FAST ACTING) - Tier 1; QL
nasal spray nasal solution 1 % (generic for 4-WAY FAST ACTING) - Tier 1; QL
nasal spray saline (generic for AFRIN SALINE NASAL MIST) - Tier 1; QL
NEO-SYNEPHRINE COLD/ALLRG MILD - Tier 2; QL
NEO-SYNEPHRINE COLD/ALLRGY EXT (brand for cvs nasal spray) - Tier 2; QL
NEO-SYNEPHRINE COLD/ALLRGY REG - Tier 2; QL
non-pseudo sinus decongestant (generic for SUDAFED PE SINUS CONGESTION) - Tier 1
nose drops extstrength (generic for 4-WAY FAST ACTING) - Tier 1; QL
nose drops nasal solution 1 % (generic for 4-WAY FAST ACTING) - Tier 1; QL
OCEAN FOR KIDS (brand for altamist spray) - Tier 2; QL
OCEAN NASAL SPRAY (brand for altamist spray) - Tier 2; QL
pharbinex (generic for XPECT) - Tier 1
phenylephrine hcl oral (generic for SUDAFED PE SINUS CONGESTION) - Tier 1
pseudoephedrine-bromphen-dm (generic for BROMFED DM) - Tier 1; QL; AL
refenesen 400 (generic for XPECT) - Tier 1
ROBITUSSIN CHILD COUGH/COLD LA - Tier 2; AL
ROBITUSSIN CHILDRENS COUGH LA - Tier 2; AL
ROBITUSSIN NIGHTTIME COUGH - Tier 2; AL
saline mist spray (generic for AFRIN SALINE NASAL MIST) - Tier 1; QL
saline nasal spray (generic for AFRIN SALINE NASAL MIST) - Tier 1; QL
sb mucus relief (generic for XPECT) - Tier 1

Non-Preferred Agents

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Preferred Agents

Non-Preferred Agents

siltussin sa (generic for TUSNEL-EX) - Tier 1; QL; AL
sinus pe decongestant (generic for SUDAFED PE SINUS CONGESTION) - Tier 1
sinus relief extra strength (generic for 4-WAY FAST ACTING) - Tier 1; QL
sinus/congestion relief pe (generic for SUDAFED PE SINUS CONGESTION) - Tier 1
SUDAFED PE CONGESTION ORAL TABLET 10 MG (brand for cvs sinus pe decongestant) - Tier 2
SUDAFED PE SINUS CONGESTION (brand for cvs sinus pe decongestant) - Tier 2
tab tussin (generic for XPECT) - Tier 1
tusnel-ex (generic for TUSNEL-EX) - Tier 1; QL; AL
tussin adult chest congest (generic for TUSNEL-EX) - Tier 1; QL; AL
tussin chest congestion oral liquid 100 mg/5ml (generic for TUSNEL-EX) - Tier 1; QL; AL
tussin cough long acting (generic for WAL-TUSSIN COUGH LONG ACTING) - Tier 1; AL
tussin cough oral syrup (generic for WAL-TUSSIN COUGH LONG ACTING) - Tier 1; AL
tussin expectorant adult (generic for TUSNEL-EX) - Tier 1; QL; AL
tussin maximum strength oral syrup 15 mg/5ml (generic for WAL-TUSSIN COUGH LONG ACTING) - Tier 1; AL
tussin mucus & chest cong (generic for TUSNEL-EX) - Tier 1; QL; AL
tussin mucus & chest congest (generic for TUSNEL-EX) - Tier 1; QL; AL
tussin mucus/chest congest (generic for TUSNEL-EX) - Tier 1; QL; AL
tussin mucus/congestion (generic for TUSNEL-EX) - Tier 1; QL; AL
tussin mucus+chest congest (generic for TUSNEL-EX) - Tier 1; QL; AL
tussin mucus+chest congest sf (generic for TUSNEL-EX) - Tier 1; QL; AL
tussin mucus+chest congestion (generic for TUSNEL-EX) - Tier 1; QL; AL
tussin oral liquid 100 mg/5ml (generic for TUSNEL-EX) - Tier 1; QL; AL
XPECT (brand for chest congestion relief) - Tier 2

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Preferred Agents	Non-Preferred Agents
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Antihistamines - Allergy Drugs

12 hour allergy-d (generic for KLS ALLER-TEC D) - Tier 1; QL; AL
all day allergy d (generic for KLS ALLER-TEC D) - Tier 1; QL; AL
all day allergy-d oral tablet extended release 12 hour 5-120 mg (generic for KLS ALLER-TEC D) - Tier 1; QL; AL
allergy relief d oral tablet extended release 12 hour 5-120 mg (generic for KLS ALLER-TEC D) - Tier 1; QL; AL
allergy relief oral tablet extended release 12 hour 5-120 mg (generic for KLS ALLER-TEC D) - Tier 1; QL; AL
allergy relief/nasal decongest oral tablet extended release 12 hour (generic for KLS ALLER-TEC D) - Tier 1; QL; AL
allergy relief-d oral tablet extended release 12 hour 5-120 mg (generic for KLS ALLER-TEC D) - Tier 1; QL; AL
aller-tec d (generic for KLS ALLER-TEC D) - Tier 1; QL; AL
cetiri-d (generic for KLS ALLER-TEC D) - Tier 1; QL; AL
cetirizine-pseudoephedrine er (generic for KLS ALLER-TEC D) - Tier 1; QL; AL
desgen dm oral liquid (generic for DESGEN DM) - Tier 1; AL
ED A-HIST ORAL LIQUID (brand for nohist-lq) - Tier 2; QL; AL
ft tussin cf adult (generic for DESGEN DM) - Tier 1; AL
nohist-lq (generic for ED A-HIST) - Tier 1; QL; AL
robafen cf multi-symptom cold (generic for DESGEN DM) - Tier 1; AL
ROBITUSSIN PEAK COLD MULTI-SYM (brand for ft tussin cf adult) - Tier 2; AL
tussin cf oral liquid 5-10-100 mg/5ml (generic for DESGEN DM) - Tier 1; AL
tussin multi-symptom cold cf (generic for DESGEN DM) - Tier 1; AL
ZYRTEC-D ALLERGY & CONGESTION (brand for 12 hour allergy-d) - Tier 2; QL; AL
ZYRTEC-D ALLERGY & SINUS (brand for 12 hour allergy-d) - Tier 2; QL; AL

Antihistamines - Drugs to Treat Allergies

Tier 1: Generic; Tier 2: Brand; ^: Medical Office Attestation Needed if Prescribed by Behavioral Health Provider, Full Prior Authorization Needed if Prescribed by Non-Behavioral Health Provider; *: Available without PA for participating Behavioral Health Prescribers; AL: Limited to members of a certain age; DX2RX: Diagnosis Required; GE: Gender Limit; PA: Prior Auth Required; QL: Quantity Limit; SP: Specialty Medication; ST: Step Therapy

Preferred Agents**Non-Preferred Agents**

12hr allergy relief (generic for ALLEGRA ALLERGY) - Tier 1; QL
 24hr allergy relief (generic for KLS ALLER-FEX) - Tier 1; QL
 all day allergy relief oral tablet 10 mg (generic for KLS ALLERCLEAR) - Tier 1; QL
 ALLEGRA ALLERGY (brand for 12hr allergy relief) - Tier 2; QL
 ALLEGRA HIVES 24HR (brand for 24hr allergy relief) - Tier 2; QL
 allerclear (generic for KLS ALLERCLEAR) - Tier 1; QL
 aller-ease oral tablet 180 mg (generic for KLS ALLER-FEX) - Tier 1; QL
 aller-fex (generic for KLS ALLER-FEX) - Tier 1; QL
 allerg rel child (lorat) (generic for CLARITIN ALLERGY CHILDRENS) - Tier 1; QL
 allerg relief child (lorat) (generic for CLARITIN ALLERGY CHILDRENS) - Tier 1; QL
 allergy 24-hr (generic for KLS ALLER-FEX) - Tier 1; QL
 allergy childrens oral solution (generic for CLARITIN ALLERGY CHILDRENS) - Tier 1; QL
 allergy rel child (loratadine) (generic for CLARITIN ALLERGY CHILDRENS) - Tier 1; QL
 allergy relief (loratadine) oral tablet (generic for KLS ALLERCLEAR) - Tier 1; QL
 allergy relief child (generic for CLARITIN ALLERGY CHILDRENS) - Tier 1; QL
 allergy relief childrens oral solution 5 mg/5ml (generic for CLARITIN ALLERGY CHILDRENS) - Tier 1; QL
 allergy relief oral tablet 10 mg (generic for KLS ALLERCLEAR) - Tier 1; QL
 allergy relief oral tablet 180 mg (generic for KLS ALLER-FEX) - Tier 1; QL
 allergy relief oral tablet 60 mg (generic for ALLEGRA ALLERGY) - Tier 1; QL
 allergy relief oral tablet dispersible 10 mg (generic for CLARITIN REDITABS) - Tier 1; QL
 allergy relief oral tablet extended release 12 mg (generic for CHLOR-TRIMETON ALLERGY) - Tier 1; QL

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Preferred Agents**Non-Preferred Agents**

allergy relief/indoor/outdoor oral tablet 180 mg (generic for KLS ALLER-FEX) - Tier 1; QL

childrens loratadine (generic for CLARITIN ALLERGY CHILDRENS) - Tier 1; QL

chlorpheniramine maleate er (generic for CHLOR-TRIMETON ALLERGY) - Tier 1; QL

CHLOR-TRIMETON ALLERGY (brand for chlorpheniramine maleate er) - Tier 2; QL

CLARITIN ALLERGY CHILDRENS (brand for allergy childrens) - Tier 2; QL

CLARITIN ORAL TABLET (brand for allergy relief) - Tier 2; QL

CLARITIN REDITABS JUNIORS (brand for cvs allergy relief) - Tier 2; QL

CLARITIN REDITABS ORAL TABLET DISPERSIBLE 10 MG (brand for cvs allergy relief) - Tier 2; QL

ed chlorped jr (generic for DIABETIC TUSSIN ALLERGY) - Tier 1; QL

fexofenadine hcl oral (generic for ALLEGRA ALLERGY) - Tier 1; QL

ft all day allergy relief (generic for KLS ALLERCLEAR) - Tier 1; QL

ft allergy relief 12 hour (generic for ALLEGRA ALLERGY) - Tier 1; QL

ft allergy relief 24 hour (generic for KLS ALLER-FEX) - Tier 1; QL

loradamed (generic for KLS ALLERCLEAR) - Tier 1; QL

loratadine allergy relief oral tablet 10 mg (generic for KLS ALLERCLEAR) - Tier 1; QL

loratadine allergy relief oral tablet dispersible 10 mg (generic for CLARITIN REDITABS) - Tier 1; QL

loratadine childrens oral solution (generic for CLARITIN ALLERGY CHILDRENS) - Tier 1; QL

loratadine oral solution (generic for CLARITIN ALLERGY CHILDRENS) - Tier 1; QL

loratadine oral tablet (generic for KLS ALLERCLEAR) - Tier 1; QL

loratadine oral tablet dispersible (generic for CLARITIN REDITABS) - Tier 1; QL

TRIAMINIC ALLERCHEWS (brand for cvs allergy relief) - Tier 2; QL

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Preferred Agents	Non-Preferred Agents
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Anti-Inflammatories, Inhaled Corticosteroids - Asthma/Lung Drugs

24 hour nasal allergy (generic for NASACORT ALLERGY 24HR) - Tier 1; QL
 allergy spray 24 hour nasal aerosol (generic for NASACORT ALLERGY 24HR) - Tier 1; QL
 NASACORT ALLERGY 24HR (brand for allergy spray 24 hour) - Tier 2; QL
 nasal allergy 24 hour (generic for NASACORT ALLERGY 24HR) - Tier 1; QL
 nasal allergy nasal aerosol 55 mcg/act (generic for NASACORT ALLERGY 24HR) - Tier 1; QL
 nasal allergy spray (generic for NASACORT ALLERGY 24HR) - Tier 1; QL

Bronchodilators, Sympathomimetic - Asthma/Lung Drugs

ANORO ELLIPTA - Tier 2; QL
 breyna (generic for BREYNA) - Tier 1; PA; ST; QL
 budesonide-formoterol fumarate (generic for BREYNA) - Tier 1; PA; ST; QL
 COMBIVENT RESPIMAT - Tier 2; QL
 FLUTICASON FUROATE-VILANTEROL (brand for fluticasone furoate-vilanterol) - Tier 2; PA; QL
 fluticasone-salmeterol inhalation aerosol powder breath activated 100-50 mcg/act, 250-50 mcg/act, 500-50 mcg/act (generic for WIXELA INHUB) - Tier 1; QL
 FLUTICASON-SALMETEROL INHALATION AEROSOL POWDER BREATH ACTIVATED 113-14 MCG/ACT, 232-14 MCG/ACT, 55-14 MCG/ACT - Tier 2; QL
 ipratropium-albuterol - Tier 1; QL
 STIOLTO RESPIMAT - Tier 2; QL
 wixela inhub (generic for WIXELA INHUB) - Tier 1; QL

ADVAIR DISKUS (brand for fluticasone-salmeterol) - Tier 2; PA; QL
 ADVAIR HFA (brand for fluticasone-salmeterol) - Tier 2; PA; QL
 BEVESPI AEROSPHERE - Tier 2; PA; QL
 BREO ELLIPTA INHALATION AEROSOL POWDER BREATH ACTIVATED 100-25 MCG/ACT, 200-25 MCG/ACT (brand for fluticasone furoate-vilanterol) - Tier 2; PA; QL
 BREZTRI AEROSPHERE - Tier 2; PA; QL
 DUAKLIR PRESSAIR - Tier 2; PA; QL
 DULERA - Tier 2; PA; QL
 SYMBICORT (brand for budesonide-formoterol fumarate) - Tier 2; PA; ST; QL
 TRELEGY ELLIPTA - Tier 2; PA; QL

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Preferred Agents	Non-Preferred Agents
Mast Cell Stabilizers - Drugs for the Lungs	
<i>cromolyn sodium nasal (generic for NASALCROM) - Tier 1; QL</i> <i>NASALCROM (brand for cromolyn sodium) - Tier 2; QL</i>	
Respiratory Tract Agents, Other - Asthma/Lung Drugs	
<i>12 hour decongestant nasal (generic for GILTUSS SEVERE SINUS) - Tier 1; QL</i> <i>12 hour decongestant oral (generic for SUDAFED SINUS CONGESTION 12HR) - Tier 1</i> <i>12 hour nasal decongestant nasal (generic for GILTUSS SEVERE SINUS) - Tier 1; QL</i> <i>12 hour nasal decongestant oral (generic for SUDAFED SINUS CONGESTION 12HR) - Tier 1</i> <i>12 hour nasal relief spray (generic for GILTUSS SEVERE SINUS) - Tier 1; QL</i> <i>12 hour nasal spray (generic for GILTUSS SEVERE SINUS) - Tier 1; QL</i> <i>ADVIL COLD/SINUS (brand for cold & sinus) - Tier 2; AL</i> <i>AFRIN NODRIP ORIGINAL (brand for 12 hour decongestant) - Tier 2; QL</i> <i>ALAVERT ALLERGY/SINUS (brand for allergy relief d-12) - Tier 2; QL; AL</i> <i>allerclear d-12hr (generic for KLS ALLERCLEAR D-12HR) - Tier 1; QL; AL</i> <i>allerclear d-24hr (generic for EQ ALLERGY RELIEF NASAL DECONG) - Tier 1; QL; AL</i> <i>allergy & congestion oral tablet extended release 24 hour 10-240 mg (generic for EQ ALLERGY RELIEF NASAL DECONG) - Tier 1; QL; AL</i> <i>allergy & congestion relief (generic for KLS ALLERCLEAR D-12HR) - Tier 1; QL; AL</i> <i>allergy nasal mist no drip (generic for GILTUSS SEVERE SINUS) - Tier 1; QL</i> <i>allergy relief d-12 (generic for KLS ALLERCLEAR D-12HR) - Tier 1; QL; AL</i>	

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Preferred Agents

Non-Preferred Agents

allergy relief d-24 (generic for EQ ALLERGY RELIEF NASAL DECONG)
 - Tier 1; QL; AL
allergy relief nasal decong (generic for EQ ALLERGY RELIEF NASAL DECONG) - Tier 1; QL; AL
allergy relief/nasal decong (generic for EQ ALLERGY RELIEF NASAL DECONG) - Tier 1; QL; AL
allergy relief/nasal decongest oral tablet extended release 24 hour (generic for EQ ALLERGY RELIEF NASAL DECONG) - Tier 1; QL; AL
allergy relief-d oral tablet extended release 12 hour 5-120 mg (generic for KLS ALLERCLEAR D-12HR) - Tier 1; QL; AL
allergy relief-d oral tablet extended release 24 hour 10-240 mg (generic for EQ ALLERGY RELIEF NASAL DECONG) - Tier 1; QL; AL
allergy relief-d12 (generic for KLS ALLERCLEAR D-12HR) - Tier 1; QL; AL
allergy/congestion relief (generic for EQ ALLERGY RELIEF NASAL DECONG) - Tier 1; QL; AL
altarussin dm (generic for ROBAFEN DM COUGH CLEAR) - Tier 1; QL; AL
altarussin-pe - Tier 1; AL
anefrin spray (generic for GILTUSS SEVERE SINUS) - Tier 1; QL
APRODINE (brand for cold & allergy d) - Tier 2; AL
benzonatate oral capsule 100 mg, 200 mg - Tier 1; QL; AL
chest congest/cough child (generic for DELSYM CGH/CHEST CONG DM CHILD) - Tier 1
chest congestion relief dm oral syrup (generic for ROBAFEN DM COUGH CLEAR) - Tier 1; QL; AL
childrens cold & allergy - Tier 1; AL
childrens cough (generic for DELSYM CGH/CHEST CONG DM CHILD) - Tier 1
childrens mucus relief cough (generic for DELSYM CGH/CHEST CONG DM CHILD) - Tier 1
CLARITIN-D 12 HOUR (brand for allergy relief d-12) - Tier 2; QL; AL
CLARITIN-D 24 HOUR (brand for allergy relief d-24) - Tier 2; QL; AL
cold & allergy - Tier 1; AL
cold & allergy childrens oral elixir 1-15 mg/5ml - Tier 1; AL

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Preferred Agents

Non-Preferred Agents

cold & cough childrens oral liquid 1-5-2.5 mg/5ml, 2.5-1-5 mg/5ml (generic for DIMAPHEN DM COLD/COUGH) - Tier 1; QL; AL
cold & sinus (generic for ADVIL COLD/SINUS) - Tier 1; AL
cold & sinus relief oral tablet 30-200 mg (generic for ADVIL COLD/SINUS) - Tier 1; AL
cold/cough (generic for DIMAPHEN DM COLD/COUGH) - Tier 1; QL; AL
cold/cough childrens (generic for DIMAPHEN DM COLD/COUGH) - Tier 1; QL; AL
cold/cough dm childrens oral liquid 2.5-1-5 mg/5ml (generic for DIMAPHEN DM COLD/COUGH) - Tier 1; QL; AL
cold/cough dm oral liquid 2.5-1-5 mg/5ml (generic for DIMAPHEN DM COLD/COUGH) - Tier 1; QL; AL
cough & chest congestion (generic for DELSYM CGH/CHEST CONG DM CHILD) - Tier 1
cough childrens (generic for DELSYM CGH/CHEST CONG DM CHILD) - Tier 1
cough dm childrens oral suspension extended release 30 mg/5ml (generic for DELSYM) - Tier 1; QL; AL
cough dm er (generic for DELSYM) - Tier 1; QL; AL
cough dm oral suspension extended release 30 mg/5ml (generic for DELSYM) - Tier 1; QL; AL
DELSYM CGH/CHEST CONG DM CHILD (brand for childrens cough) - Tier 2
DELSYM COUGH CHILDRENS (brand for cough dm) - Tier 2; QL; AL
DELSYM COUGH/CHEST CONGEST DM (brand for childrens cough) - Tier 2
DELSYM ORAL SUSPENSION EXTENDED RELEASE (brand for cough dm) - Tier 2; QL; AL
dextromethorphan polistirex er (generic for DELSYM) - Tier 1; QL; AL
dextromethorphan-guaifenesin oral syrup (generic for ROBAFEN DM COUGH CLEAR) - Tier 1; QL; AL
dibromm childrens cold/cgh (generic for DIMAPHEN DM COLD/COUGH) - Tier 1; QL; AL
dimaphen dm cold/cough (generic for DIMAPHEN DM COLD/COUGH) - Tier 1; QL; AL

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Preferred Agents

Non-Preferred Agents

dm maximum adult (generic for DELSYM CGH/CHEST CONG DM CHILD) - Tier 1
ENDACOF-DM (brand for cold & cough childrens) - Tier 2; QL; AL
ft mucus relief d 12 hour (generic for MUCINEX D) - Tier 1; AL
ft mucus relief dm oral tablet extended release 12 hour 30-600 mg (generic for MUCINEX DM) - Tier 1; QL; AL
ft nasal decongestant max str (generic for SUDOGEST) - Tier 1; QL
g tussin ac - Tier 1; QL; AL
geri-tussin dm oral syrup (generic for ROBAFEN DM COUGH CLEAR) - Tier 1; QL; AL
giltuss severe sinus (generic for GILTUSS SEVERE SINUS) - Tier 1; QL
guaifenesin ac - Tier 1; QL; AL
guaifenesin-codeine - Tier 1; QL; AL
guaifenesin-dm oral syrup (generic for ROBAFEN DM COUGH CLEAR) - Tier 1; QL; AL
HYPERSAL INHALATION NEBULIZATION SOLUTION 7 % (brand for sodium chloride) - Tier 2; QL
ibuprofen cold & sinus (generic for ADVIL COLD/SINUS) - Tier 1; AL
ibuprofen cold/sinus oral tablet 30-200 mg (generic for ADVIL COLD/SINUS) - Tier 1; AL
ibu-profen cold/sinus oral tablet 30-200 mg (generic for ADVIL COLD/SINUS) - Tier 1; AL
long acting nasal spray (generic for GILTUSS SEVERE SINUS) - Tier 1; QL
long lasting nasal spray (generic for GILTUSS SEVERE SINUS) - Tier 1; QL
lorata-d (generic for EQ ALLERGY RELIEF NASAL DECONG) - Tier 1; QL; AL
lorata-dine d (generic for EQ ALLERGY RELIEF NASAL DECONG) - Tier 1; QL; AL
loratadine d 12hr (generic for KLS ALLERCLEAR D-12HR) - Tier 1; QL; AL
loratadine-d (generic for EQ ALLERGY RELIEF NASAL DECONG) - Tier 1; QL; AL

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Preferred Agents

Non-Preferred Agents

loratadine-d 12hr (generic for KLS ALLERCLEAR D-12HR) - Tier 1; QL; AL
 loratadine-d 24hr (generic for EQ ALLERGY RELIEF NASAL DECONG) - Tier 1; QL; AL
 maxi-tuss ac - Tier 1; QL; AL
 maxi-tuss gmx (generic for DIABETIC TUSSIN DM MAX ST) - Tier 1; AL
 meijer allergy relief-d (generic for KLS ALLERCLEAR D-12HR) - Tier 1; QL; AL
 MUCINEX CHILDRENS FREEFROM ORAL LIQUID 5-100 MG/5ML (brand for childrens cough) - Tier 2
 MUCINEX CHILDRENS STUFFY NOSE (brand for 12 hour decongestant) - Tier 2; QL
 MUCINEX COUGH CHILDRENS (brand for childrens cough) - Tier 2
 MUCINEX D (brand for cvs mucus d extended release) - Tier 2; AL
 MUCINEX D MAX STRENGTH (brand for cvs mucus d max st er) - Tier 2; AL
 MUCINEX DM (brand for cvs mucus dm extended release) - Tier 2; QL; AL
 MUCINEX FAST-MAX DM MAX (brand for childrens cough) - Tier 2
 MUCINEX SINUS-MAX CLEAR & COOL (brand for 12 hour decongestant) - Tier 2; QL
 MUCINEX SINUS-MAX SINUS/ALLRGY (brand for 12 hour decongestant) - Tier 2; QL
 mucus & cough relief child (generic for DELSYM CGH/CHEST CONG DM CHILD) - Tier 1
 mucus d (generic for MUCINEX D MAX STRENGTH) - Tier 1; AL
 mucus d extended release (generic for MUCINEX D) - Tier 1; AL
 mucus d max st er (generic for MUCINEX D MAX STRENGTH) - Tier 1; AL
 mucus dm (generic for MUCINEX DM) - Tier 1; QL; AL
 mucus dm extended release oral tablet extended release 12 hour 30-600 mg (generic for MUCINEX DM) - Tier 1; QL; AL
 mucus relief cough childrens (generic for DELSYM CGH/CHEST CONG DM CHILD) - Tier 1

Tier 1: Generic; Tier 2: Brand; ^: Medical Office Attestation Needed if Prescribed by Behavioral Health Provider, Full Prior Authorization Needed if Prescribed by Non-Behavioral Health Provider; *: Available without PA for participating Behavioral Health Prescribers; AL: Limited to members of a certain age; DX2RX: Diagnosis Required; GE: Gender Limit; PA: Prior Auth Required; QL: Quantity Limit; SP: Specialty Medication; ST: Step Therapy

Preferred Agents

Non-Preferred Agents

mucus relief d max strength (generic for MUCINEX D MAX STRENGTH) - Tier 1; AL
mucus relief d oral tablet extended release 12 hour 120-1200 mg (generic for MUCINEX D MAX STRENGTH) - Tier 1; AL
mucus relief d oral tablet extended release 12 hour 60-600 mg (generic for MUCINEX D) - Tier 1; AL
mucus relief dm max oral liquid 20-400 mg/20ml, 5-100 mg/5ml (generic for DELSYM CGH/CHEST CONG DM CHILD) - Tier 1
mucus relief dm oral liquid 20-400 mg/20ml (generic for DELSYM CGH/CHEST CONG DM CHILD) - Tier 1
mucus relief dm oral tablet extended release 12 hour 30-600 mg (generic for MUCINEX DM) - Tier 1; QL; AL
mucus-d (generic for MUCINEX D) - Tier 1; AL
mucus-dm (generic for MUCINEX DM) - Tier 1; QL; AL
nasal decongestant 12 hour (generic for SUDAFED SINUS CONGESTION 12HR) - Tier 1
nasal decongestant 12hr (generic for SUDAFED SINUS CONGESTION 12HR) - Tier 1
nasal decongestant max st (generic for SUDOGEST) - Tier 1; QL
nasal decongestant oral tablet 30 mg (generic for SUDOGEST) - Tier 1; QL
nasal decongestant oral tablet extended release 12 hour 120 mg (generic for SUDAFED SINUS CONGESTION 12HR) - Tier 1
nasal decongestant pe oral tablet 30 mg (generic for SUDOGEST) - Tier 1; QL
nasal decongestant spray (generic for GILTUSS SEVERE SINUS) - Tier 1; QL
nasal mist nasal solution (generic for GILTUSS SEVERE SINUS) - Tier 1; QL
nasal mist no drip (generic for GILTUSS SEVERE SINUS) - Tier 1; QL
nasal relief (generic for GILTUSS SEVERE SINUS) - Tier 1; QL
nasal spray 12 hour (generic for GILTUSS SEVERE SINUS) - Tier 1; QL
nasal spray extra moist (generic for GILTUSS SEVERE SINUS) - Tier 1; QL

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Preferred Agents

Non-Preferred Agents

nasal spray extra moisturizing (generic for GILTUSS SEVERE SINUS) - Tier 1; QL
 nasal spray nasal solution 0.05 % (generic for GILTUSS SEVERE SINUS) - Tier 1; QL
 nasal spray no drip (generic for GILTUSS SEVERE SINUS) - Tier 1; QL
 nasal spray sinus (generic for GILTUSS SEVERE SINUS) - Tier 1; QL
 nebusal inhalation nebulization solution 3 % (generic for NEBUSAL) - Tier 1; QL
 no drip extra moisturizing (generic for GILTUSS SEVERE SINUS) - Tier 1; QL
 no drip nasal relief (generic for GILTUSS SEVERE SINUS) - Tier 1; QL
 no drip nasal spray (generic for GILTUSS SEVERE SINUS) - Tier 1; QL
 no drip original 12 hours (generic for GILTUSS SEVERE SINUS) - Tier 1; QL
 promethazine vc/codeine - Tier 1; QL; AL
 promethazine-codeine - Tier 1; QL; AL
 promethazine-dm - Tier 1; QL; AL
 pseudoephedrine hcl 12 hr (generic for SUDAFED SINUS CONGESTION 12HR) - Tier 1
 pseudoephedrine hcl er (generic for SUDAFED SINUS CONGESTION 12HR) - Tier 1
 pseudoephedrine hcl oral tablet 30 mg (generic for SUDOGEST) - Tier 1; QL
 pseudoephedrine-guaifenesin er (generic for MUCINEX D) - Tier 1; AL
 pulmosal (generic for PULMOSAL) - Tier 1; QL
 ROBITUSSIN 12 HOUR COUGH (brand for cough dm) - Tier 2; QL; AL
 ROBITUSSIN 12 HOUR COUGH CHILD (brand for cough dm) - Tier 2; QL; AL
 ROBITUSSIN COUGH+CHEST CONG DM ORAL LIQUID 20-400 MG/20ML (brand for childrens cough) - Tier 2
 rynex dm (generic for DIMAPHEN DM COLD/COUGH) - Tier 1; QL; AL
 rynex pe - Tier 1; AL
 rynex pse - Tier 1; AL
 siltussin-dm alcohol free (generic for ROBAFEN DM COUGH CLEAR) - Tier 1; QL; AL

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Preferred Agents

sinus 12 hour (generic for SUDAFED SINUS CONGESTION 12HR) - Tier 1
sinus 12-hour (generic for SUDAFED SINUS CONGESTION 12HR) - Tier 1
sinus congestion max strength (generic for SUDOGEST) - Tier 1; QL
sinus nasal spray (generic for GILTUSS SEVERE SINUS) - Tier 1; QL
sodium chloride inhalation (generic for NEBUSAL) - Tier 1; QL
SUDAFED (brand for cvs nasal decongestant) - Tier 2; QL
SUDAFED CHILDRENS - Tier 2; QL
SUDAFED SINUS CONGESTION (brand for cvs nasal decongestant) - Tier 2; QL
SUDAFED SINUS CONGESTION 12HR (brand for 12 hour decongestant) - Tier 2
sudogest 12 hour (generic for SUDAFED SINUS CONGESTION 12HR) - Tier 1
sudogest maximum strength (generic for SUDOGEST) - Tier 1; QL
sudogest oral tablet 30 mg (generic for SUDOGEST) - Tier 1; QL
suphedrine 12hour (generic for SUDAFED SINUS CONGESTION 12HR) - Tier 1
suphedrine maximum strength (generic for SUDAFED SINUS CONGESTION 12HR) - Tier 1
suphedrine oral tablet 30 mg (generic for SUDOGEST) - Tier 1; QL
suphedrine oral tablet extended release 12 hour 120 mg (generic for SUDAFED SINUS CONGESTION 12HR) - Tier 1
tussin cf oral liquid 30-10-100 mg/5ml - Tier 1
tussin cough dm sugar free (generic for ROBAFEN DM COUGH CLEAR) - Tier 1; QL; AL
tussin cough/chest congest oral syrup 100-10 mg/5ml (generic for ROBAFEN DM COUGH CLEAR) - Tier 1; QL; AL
tussin cough/chest dm max oral liquid 10-200 mg/5ml (generic for DIABETIC TUSSIN DM MAX ST) - Tier 1; AL
tussin cough/chest dm max oral liquid 20-400 mg/20ml (generic for DELSYM CGH/CHEST CONG DM CHILD) - Tier 1
tussin dm cough + chest oral liquid 20-400 mg/20ml (generic for DELSYM CGH/CHEST CONG DM CHILD) - Tier 1

Non-Preferred Agents

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Preferred Agents	Non-Preferred Agents
<p><i>tussin dm cough/chest cong (generic for ROBAFEN DM COUGH CLEAR) - Tier 1; QL; AL</i></p> <p><i>tussin dm cough/chest oral syrup 10-100 mg/5ml (generic for ROBAFEN DM COUGH CLEAR) - Tier 1; QL; AL</i></p> <p><i>tussin dm max adult (generic for DELSYM CGH/CHEST CONG DM CHILD) - Tier 1</i></p> <p><i>tussin dm max daytime (generic for DELSYM CGH/CHEST CONG DM CHILD) - Tier 1</i></p> <p><i>tussin dm max oral liquid 20-400 mg/20ml (generic for DELSYM CGH/CHEST CONG DM CHILD) - Tier 1</i></p> <p><i>tussin dm max st (generic for DELSYM CGH/CHEST CONG DM CHILD) - Tier 1</i></p> <p><i>tussin dm oral syrup 100-10 mg/5ml (generic for ROBAFEN DM COUGH CLEAR) - Tier 1; QL; AL</i></p>	
Sedatives/Hypnotics - Drugs for Sedation and Sleep	
Sleep Disorders, Other - Miscellaneous Sedation and Sleep Drugs	
	XYWAV - Tier 2; PA; QL
Skeletal Muscle Relaxants	
<p><i>chlorzoxazone oral tablet 500 mg - Tier 1; QL</i></p> <p><i>cyclobenzaprine hcl oral tablet 10 mg, 5 mg - Tier 1; QL</i></p> <p><i>methocarbamol oral - Tier 1; QL</i></p> <p><i>orphenadrine citrate er - Tier 1; QL</i></p>	<p><i>AMRIX (brand for cyclobenzaprine hcl er) - Tier 2; PA; QL</i></p> <p><i>LORZONE (brand for chlorzoxazone) - Tier 2; PA</i></p>
Sleep Disorder Agents	
Sleep Promoting Agents	
<p><i>eszopiclone (generic for LUNESTA) - Tier 1; QL</i></p> <p><i>temazepam oral capsule 15 mg, 30 mg (generic for RESTORIL) - Tier 1; QL</i></p>	<p><i>AMBIEN (brand for zolpidem tartrate) - Tier 2; PA; QL</i></p> <p><i>AMBIEN CR (brand for zolpidem tartrate er) - Tier 2; PA</i></p> <p><i>BELSOMRA - Tier 2; PA</i></p>

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Preferred Agents	Non-Preferred Agents
<p> <i>triazolam (generic for HALCION) - Tier 1; QL</i> <i>zaleplon - Tier 1; QL</i> <i>zolpidem tartrate er (generic for AMBIEN CR) - Tier 1</i> <i>zolpidem tartrate oral tablet (generic for AMBIEN) - Tier 1; QL</i> </p>	<p> DAYVIGO - Tier 2; PA; ^; QL <i>doxepin hcl oral tablet (generic for SILENOR) - Tier 1; PA; QL</i> EDLUAR - Tier 2; PA; QL <i>estazolam - Tier 1; PA; QL</i> <i>HALCION (brand for triazolam) - Tier 2; PA; QL</i> <i>LUNESTA (brand for eszopiclone) - Tier 2; PA; QL</i> <i>ramelteon (generic for ROZEREM) - Tier 1; PA; QL</i> <i>RESTORIL ORAL CAPSULE 15 MG, 30 MG, 7.5 MG (brand for temazepam) - Tier 2; PA; QL</i> <i>RESTORIL ORAL CAPSULE 22.5 MG (brand for temazepam) - Tier 2; PA</i> <i>ROZEREM (brand for ramelteon) - Tier 2; PA; QL</i> <i>SILENOR (brand for doxepin hcl) - Tier 2; PA; QL</i> <i>temazepam oral capsule 22.5 mg (generic for RESTORIL) - Tier 1; PA</i> <i>temazepam oral capsule 7.5 mg (generic for RESTORIL) - Tier 1; PA; QL</i> </p>
<p>Wakefulness Promoting Agents</p>	
<p> <i>armodafinil (generic for NUVIGIL) - Tier 1; DX2RX; QL</i> <i>modafinil (generic for PROVIGIL) - Tier 1; DX2RX; QL</i> </p>	<p> SODIUM OXYBATE (brand for sodium oxybate) - Tier 2; PA; SP; QL SUNOSI - Tier 2; PA; QL WAKIX - Tier 2; PA; QL XYREM (brand for sodium oxybate) - Tier 2; PA; SP; QL </p>
<p>Therapeutic Nutrients/Minerals/Electrolytes - Drugs to Treat Vitamin, Mineral and Body Fluid Deficiencies</p>	
<p>Electrolyte/Mineral Replacement - Vitamin, Mineral and Body Fluid Deficiency Drugs</p>	
<p> <i>adc/f (0.5mg/ml) - Tier 1; QL</i> <i>animal shapes complete (generic for CEROVITE JR) - Tier 1; QL</i> <i>ascorbic acid oral tablet 500 mg (generic for PUREWAY-C) - Tier 1; QL</i> <i>biocel (generic for LYSIPLEX PLUS) - Tier 1; QL</i> <i>b-plex plus (generic for LYSIPLEX PLUS) - Tier 1; QL</i> <i>BPROTECTED PEDIA POLY-VITE/FE (brand for pc pediatric poly-vita/fe drop) - Tier 2; QL</i> </p>	

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Preferred Agents**Non-Preferred Agents**

BPROTECTED VITAMIN C (brand for vitamin c) - Tier 2; QL
CADEAU DHA - Tier 2
calcidol (generic for CALCIDOL) - Tier 1; QL
calcium 600 oral tablet 1500 (600 ca) mg - Tier 1; QL
calcium 600+d oral tablet 600-5 mg-mcg - Tier 1; QL
calcium carbonate oral tablet 1500 (600 ca) mg - Tier 1; QL
calcium carbonate oral tablet chewable 1250 (500 ca) mg - Tier 1; QL
calcium fast dissolution - Tier 1; QL
calcium high potency - Tier 1; QL
calcium oral tablet 1500 (600 ca) mg - Tier 1; QL
calcium oyster shell oral tablet 1250 (500 ca) mg - Tier 1; QL
calcium soft chews oral tablet chewable 500-200-40 mg-unt-mcg - Tier 1
cerovite jr (generic for CEROVITE JR) - Tier 1; QL
chewable c (generic for SUNKIST VITAMIN C) - Tier 1; QL
chewable c with rose hips (generic for SUNKIST VITAMIN C) - Tier 1; QL
chewable childrens vitamin (generic for CEROVITE JR) - Tier 1; QL
childrens animal shapes (generic for CEROVITE JR) - Tier 1; QL
childrens chewables/iron (generic for LAND BEFORE TIME MULTIVITAMIN) - Tier 1; QL
childrens complete oral tablet chewable 18 mg (generic for CEROVITE JR) - Tier 1; QL
childrens vitamins/iron (generic for LAND BEFORE TIME MULTIVITAMIN) - Tier 1; QL
daily multivitamins/iron (generic for TAB-A-VITE/IRON/BETA CAROTENE) - Tier 1; QL
effer-k oral tablet effervescent 25 meq - Tier 1; QL
ergocalciferol oral (generic for CALCIDOL) - Tier 1; QL
FLINTSTONES PLUS EXTRA IRON (brand for childrens animal shapes) - Tier 2; QL
FOLAGENT DHA (brand for v-c forte) - Tier 2
FOLAMED DHA (brand for v-c forte) - Tier 2
fruity c - Tier 1; QL
klor-con/ef - Tier 1; QL
k-prime - Tier 1; QL

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Preferred Agents

Non-Preferred Agents

lysiplex plus oral tablet (generic for LYSIPLEX PLUS) - Tier 1; QL
multiple vitamins/iron (generic for TAB-A-VITE/IRON/BETA CAROTENE) - Tier 1; QL
MULTIPRO (brand for v-c forte) - Tier 2
multi-vitamin/iron (generic for TAB-A-VITE/IRON/BETA CAROTENE) - Tier 1; QL
NOVAMV PEDIATRIC MULTI-VITAMIN - Tier 2; QL
nutrifac zx (generic for LYSIPLEX PLUS) - Tier 1; QL
OBTREX - Tier 2
OCUVEL (brand for v-c forte) - Tier 2
one-daily multi-vitamin/iron (generic for TAB-A-VITE/IRON/BETA CAROTENE) - Tier 1; QL
one-daily/iron (generic for TAB-A-VITE/IRON/BETA CAROTENE) - Tier 1; QL
oyster shell calcium oral tablet 500 mg - Tier 1; QL
oyster shell calcium/d oral tablet 250-3.125 mg-mcg - Tier 1; QL
oyster shell calcium/vitamin d oral tablet 250-3.125 mg-mcg - Tier 1; QL
prenatal gummy oral tablet chewable 0.4-113.5 mg - Tier 1
stress formula/iron (generic for TAB-A-VITE/IRON/BETA CAROTENE) - Tier 1; QL
SUPPORT - Tier 2; QL
tri-vite/fluoride - Tier 1; QL
v-c forte (generic for VIC-FORTE) - Tier 1
vic-forde (generic for VIC-FORTE) - Tier 1
vit c/rose hips - Tier 1; QL
vita s forte (generic for LYSIPLEX PLUS) - Tier 1; QL
vitacel (generic for LYSIPLEX PLUS) - Tier 1; QL
vitamin c cr oral tablet extended release 500 mg (generic for ENDUR-C) - Tier 1; QL
vitamin c er oral tablet extended release 1500 mg - Tier 1; QL
vitamin c oral liquid 500 mg/5ml (generic for BPROTECTED VITAMIN C) - Tier 1; QL
vitamin c oral tablet 1000 mg, 250 mg - Tier 1; QL
vitamin c oral tablet 500 mg (generic for PUREWAY-C) - Tier 1; QL
vitamin c oral tablet chewable 100 mg, 250 mg - Tier 1; QL

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Preferred Agents	Non-Preferred Agents
<p> <i>vitamin c oral tablet chewable 500 mg (generic for SUNKIST VITAMIN C) - Tier 1; QL</i> <i>vitamin c/acerola (generic for SUNKIST VITAMIN C) - Tier 1; QL</i> <i>vitamin c/rose hips (generic for PUREWAY-C) - Tier 1; QL</i> <i>vitamin c/rose hips oral tablet 1000 mg - Tier 1; QL</i> <i>vitamin c-rose hips oral tablet (generic for PUREWAY-C) - Tier 1; QL</i> <i>vitamin d (ergocalciferol) oral capsule 1.25 mg (50000 ut), 50000 unit (generic for DRISDOL) - Tier 1; QL</i> <i>vitamins acd-fluoride - Tier 1; QL</i> <i>vitamins complete childrens (generic for CEROVITE JR) - Tier 1; QL</i> <i>zinc oral tablet 50 mg (generic for IS-ZC 50) - Tier 1; QL</i> </p>	

Vitamins - Vitamin, Mineral and Body Fluid Deficiency Drugs

<p> <i>b-1 - Tier 1; QL</i> <i>b6 - Tier 1; QL</i> <i>cyanocobalamin injection solution 1000 mcg/ml (generic for DODEX) - Tier 1; QL</i> <i>DODEX (brand for cyanocobalamin) - Tier 2; QL</i> <i>e - Tier 1</i> <i>e-400-clear - Tier 1; QL</i> <i>natural vitamin e - Tier 1; QL</i> <i>pyridoxine hcl oral - Tier 1; QL</i> <i>thiamine hcl oral - Tier 1; QL</i> <i>vitamin b1 - Tier 1; QL</i> <i>vitamin b-1 oral tablet 250 mg - Tier 1; QL</i> <i>vitamin b-12 er oral tablet extended release 1000 mcg - Tier 1</i> <i>vitamin b12 oral tablet extended release 1000 mcg - Tier 1</i> <i>vitamin b-12 tr oral tablet extended release 1000 mcg - Tier 1</i> <i>vitamin b-6 - Tier 1; QL</i> <i>vitamin b-6 er - Tier 1; QL</i> <i>vitamin e natural - Tier 1</i> <i>vitamin e oral capsule 134 mg (200 unit), 45 mg (100 unit), 450 mg (1000 ut), 90 mg (200 unit) - Tier 1</i> <i>vitamin e oral capsule 268 mg (400 unit) - Tier 1; QL</i> </p>	<p>NASCOBAL - Tier 2; PA; QL</p>
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Preferred Agents	Non-Preferred Agents
Vitamins	
Electrolytes/Minerals/Metals/Vitamins	
<i>prenatal gummy oral tablet chewable 0.4 mg - Tier 1; QL</i>	

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Prior Authorization / Class Criteria

Title	Drugs Impacted	Prior Authorization Criteria / Class Criteria
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adc/f (0.5mg/ml)	150	ALECENSA	118	allergy medicine	126
ADCIRCA	131	alendronate sodium oral solution	109	allergy medicine	126
ADDERALL XR	55	alendronate sodium oral tablet 10 mg, 35 mg	109	allergy nasal mist no drip	141
ADEMPAS	131	alendronate sodium oral tablet 70 mg	109	allergy oral capsule 25 mg	126
ADMELOG	45	ALEVE ORAL TABLET	5	allergy oral liquid 12.5 mg/5ml	126
ADMELOG SOLOSTAR	45	alfuzosin hcl er	94	allergy oral tablet 25 mg	126
adult 50+ probiotic	80	all day allergy d	136	allergy rel child (loratadine)	137
adult probiotic	80	all day allergy oral tablet 10 mg	126	allergy relief (cetirizine) oral tablet 10 mg	126
adv acne spot treatment	110	all day allergy relief oral tablet 10 mg	137	allergy relief (loratadine) oral tablet	138
ADVAIR DISKUS	139	all day allergy-d oral tablet extended release 12 hour 5-120 mg	136	allergy relief adult	126
ADVAIR HFA	139	all day pain relief	5	allergy relief cetirizine	126
advanced antacid	80	all day relief	5	allergy relief child	138
advanced healing external ointment	62	ALLEGRA ALLERGY	137	allergy relief childrens oral liquid 12.5 mg/5ml	126
ADVIL COLD/SINUS	140	ALLEGRA HIVES 24HR	137	allergy relief childrens oral solution 5 mg/5ml	138
ADVIL JUNIOR STRENGTH	5	allerclear	137	allergy relief childrens oral tablet chewable 12.5 mg	127
ADVIL ORAL TABLET	5	allerclear d-12hr	141	allergy relief d oral tablet extended release 12 hour 5-120 mg	136
AFINITOR	32	allerclear d-24hr	141	allergy relief d-12	141
afirmelle	97	aller-ease oral tablet 180 mg	137	allergy relief d-24	141
AFLURIA QUADRIVALENT	108	aller-fex	137	allergy relief max st	127
AFREZZA	45	allerg rel child (lorat)	137	allergy relief nasal decong	141
AFRIN NODRIP ORIGINAL	141	allerg relief child (lorat)	137	allergy relief oral capsule 25 mg	127
AFRIN SALINE NASAL MIST	132	allergy & congestion oral tablet extended release 24 hour 10-240 mg	141	allergy relief oral liquid 25 mg/10ml	127
aftera	103	allergy & congestion relief	141	allergy relief oral tablet 10 mg	138
AIMOVIG	29			allergy relief oral tablet 180 mg	138
AJOVY	29			allergy relief oral tablet 25 mg	127
AKYNZEO ORAL	26			allergy relief oral tablet 60 mg	138
ala-cort	59			allergy relief oral tablet chewable 12.5 mg	127
ALAVERT ALLERGY/SINUS	141			allergy relief oral tablet dispersible 10 mg	138
ALAWAY	125			allergy relief oral tablet extended release 12 hour 5-120 mg	136
ALAWAY CHILDRENS ALLERGY	125				
albendazole oral	34				
albuterol sulfate hfa aerosol solution 108 (90 base) mcg/act inhalation	130				

<i>allergy relief oral tablet extended release 12 mg</i>	138	ALVESCO.....	129	<i>anefrin spray</i>	142
<i>allergy relief(cetirizine)</i>	127	<i>alyacen 1/35</i>	97	ANGELIQ.....	97
<i>allergy relief/indoor/outdoor oral tablet 10 mg</i>	127	<i>alyacen 7/7/7</i>	97	<i>animal shapes complete</i>	150
<i>allergy relief/indoor/outdoor oral tablet 180 mg</i>	138	<i>amantadine hcl oral capsule</i>	35	ANNOVERA.....	97
<i>allergy relief/nasal decong</i>	141	<i>amantadine hcl oral solution</i>	35	ANORO ELLIPTA.....	139
<i>allergy relief/nasal decongest oral tablet extended release 12 hour</i>	136	AMBIEN.....	149	<i>antacid & anti-gas oral suspension 200-200-20 mg/5ml</i>	81
<i>allergy relief/nasal decongest oral tablet extended release 24 hour</i>	141	AMBIEN CR.....	149	<i>antacid & antigas oral suspension 2400-2400-240 mg/30ml</i>	81
<i>allergy relief-d oral tablet extended release 12 hour 5-120 mg</i>	136, 141	<i>ambrisentan</i>	131	<i>antacid & anti-gas oral suspension 400-400-40 mg/5ml</i>	81
<i>allergy relief-d oral tablet extended release 24 hour 10-240 mg</i>	141	<i>amcinonide external ointment</i>	59	<i>antacid & gas relief</i>	81
<i>allergy relief-d12</i>	141	<i>amethia</i>	97	<i>antacid advanced</i>	81
<i>allergy spray 24 hour nasal aerosol</i>	139	<i>amiloride hcl oral</i>	52	<i>antacid advanced max st oral suspension 400-400-40 mg/5ml</i>	81
<i>allergy/congestion relief</i>	141	<i>amiloride-hydrochlorothiazide</i>	52	<i>antacid anti-gas</i>	81
<i>aller-tec</i>	127	<i>aminocaproic acid oral</i>	48	<i>antacid anti-gas ex st oral suspension 400-400-40 mg/5ml</i>	81
<i>aller-tec d</i>	136	<i>amiodarone hcl oral tablet 200 mg, 400 mg</i>	50	<i>antacid anti-gas max strength</i>	81
<i>allopurinol oral tablet 100 mg, 300 mg</i>	28	AMITIZA.....	77	<i>antacid calcium</i>	81
<i>almacone double strength</i>	81	<i>amitriptyline hcl oral</i>	25	<i>antacid calcium rich</i>	81
ALOGLIPTIN BENZOATE.....	43	AMJEVITA SOLUTION AUTO-INJECTOR 40 MG/0.8ML SUBCUTANEOUS.....	110	<i>antacid extra strength oral suspension</i>	81
ALOGLIPTIN-METFORMIN HCL.....	43	AMJEVITA SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 20 MG/0.4ML, 40 MG/0.8ML.....	110	<i>antacid extra strength oral tablet chewable 160-105 mg</i>	81
ALOGLIPTIN-PIOGLITAZONE.....	43	<i>amlodipine besylate oral</i>	51	<i>antacid extra strength oral tablet chewable 750 mg</i>	81
ALORA.....	97	<i>ammonium lactate external</i>	59	<i>antacid fast relief</i>	81
ALPHAGAN P.....	121	<i>amnestem</i>	58	<i>antacid i</i>	81
<i>alprazolam oral tablet</i>	42	<i>amoxapine</i>	25	<i>antacid iii</i>	81
<i>altachlore</i>	121	<i>amoxicillin</i>	18	<i>antacid kids</i>	81
<i>altafrin</i>	119	<i>amoxicillin-potassium clavulanate</i>	18	<i>antacid liquid</i>	81
<i>altalube</i>	121	<i>amphetamine-dextroamphetamine</i>	55	<i>antacid m</i>	81
<i>altamist spray</i>	132	<i>amphetamine-dextroamphetamine er</i>	55	<i>antacid maximum</i>	81
<i>altarussin</i>	132	<i>ampicillin</i>	18	<i>antacid maximum strength oral suspension 400-400-40 mg/5ml</i>	82
<i>altarussin dm</i>	141	<i>ampicillin-sulbactam sodium solution reconstituted 3 (2-1) gm injection</i>	18	<i>antacid maximum strength oral tablet chewable 1000 mg</i>	82
<i>altarussin-pe</i>	141	AMPYRA.....	56	<i>antacid oral suspension 200-200-20 mg/5ml, 400-400-40 mg/10ml</i>	82
<i>altavera</i>	97	AMRIX.....	149	<i>antacid oral tablet chewable 1000 mg</i>	82
ALTOPREV.....	53	AMZEEQ.....	62	<i>antacid oral tablet chewable 500 mg</i>	82
ALTRENO.....	58	<i>anagrelide hcl</i>	47		
<i>alum & mag hydroxide-simeth</i>	81	ANASPAZ.....	110		
ALUNBRIG.....	118	<i>anastrozole oral</i>	32		
		ANDRODERM.....	97		
		ANECREAM EXTERNAL CREAM.....	14		

<i>antacid oral tablet chewable 750 mg</i>	82	<i>APOKYN</i>	36	<i>artificial tears ophthalmic solution</i>	122
<i>antacid plus antigas</i>	82	<i>APO-VARENICLINE</i>	15	<i>ascomp-codeine</i>	7
<i>antacid regular strength oral suspension</i> ..	82	<i>apra</i>	9	<i>ascorbic acid oral tablet 500 mg</i>	150
<i>antacid regular strength oral tablet chewable</i>	82	<i>apraclonidine hcl</i>	121	<i>ashlyna</i>	98
.....	82	<i>aprepitant</i>	26	<i>ASMANEX (120 METERED DOSES)</i>	129
<i>antacid supreme</i>	82	<i>apri</i>	98	<i>ASMANEX (14 METERED DOSES)</i>	129
<i>antacid ultra strength</i>	82	<i>APRISO</i>	109	<i>ASMANEX (30 METERED DOSES)</i>	129
<i>antacid ultra strength oral tablet chewable</i>	82	<i>APRODINE</i>	142	<i>ASMANEX (60 METERED DOSES)</i>	129
<i>1000 mg</i>	82	<i>APTENSIO XR</i>	54	<i>ASMANEX HFA</i>	129
<i>antacid/antigas</i>	82	<i>APTIOM</i>	22	<i>ASPERFLEX LIDOCAINE EXTERNAL</i>	
<i>antacid/anti-gas max st</i>	82	<i>APTIVUS</i>	41	<i>CREAM</i>	14
<i>antacid/anti-gas oral suspension 200-200-20</i>	82	<i>aqueous vitamin d</i>	72	<i>aspirin adults</i>	110
<i>mg/5ml, 400-400-40 mg/10ml</i>	82	<i>aranelle</i>	98	<i>aspirin childrens</i>	110
<i>antacid/anti-gas oral suspension 400-400-40</i>	82	<i>ARANESP (ALBUMIN FREE) INJECTION</i>		<i>aspirin ec oral tablet 325 mg</i>	110
<i>mg/5ml</i>	82	<i>SOLUTION</i>	47	<i>aspirin ec oral tablet delayed release 325</i>	
<i>antacid/gas relief max st</i>	82	<i>ARANESP (ALBUMIN FREE) INJECTION</i>		<i>mg</i>	110
<i>antibiotic</i>	20, 110	<i>SOLUTION PREFILLED SYRINGE 10</i>		<i>aspirin ec oral tablet delayed release 81 mg</i>	
<i>anti-diarr/ant-gas</i>	82	<i>MCG/0.4ML</i>	47	.....	110
<i>anti-diarrheal anti-gas</i>	82	<i>ARANESP (ALBUMIN FREE) INJECTION</i>		<i>aspirin oral tablet 325 mg</i>	110
<i>anti-diarrheal oral suspension 262 mg/15ml</i>	83	<i>SOLUTION PREFILLED SYRINGE 100</i>		<i>aspirin oral tablet chewable 81 mg</i>	111
.....	83	<i>MCG/0.5ML, 150 MCG/0.3ML, 200</i>		<i>aspirin oral tablet delayed release 325 mg</i>	
<i>anti-diarrheal oral tablet 2 mg</i>	78	<i>MCG/0.4ML, 25 MCG/0.42ML, 300</i>		.....	111
<i>anti-diarrheal/anti-gas</i>	83	<i>MCG/0.6ML, 40 MCG/0.4ML, 500</i>		<i>aspirin oral tablet delayed release 81 mg</i> 111	
<i>antifungal</i>	27	<i>MCG/ML, 60 MCG/0.3ML</i>	48	<i>ASPIRIN ORAL TABLET DELAYED</i>	
<i>antifungal (tolnaftate)</i>	110	<i>ARAZLO</i>	58	<i>RELEASE 81 MG</i>	111
<i>antifungal foot care</i>	27	<i>AREXVY</i>	110	<i>aspirin rectal suppository 300 mg</i>	111
<i>antifungal miconazole</i>	27	<i>aripiprazole oral solution</i>	37	<i>aspirin regimen</i>	111
<i>antifungal tolinaftate</i>	110	<i>aripiprazole oral tablet</i>	37	<i>astrigent eye drops</i>	122
<i>anti-gas oral capsule 180 mg</i>	83	<i>aripiprazole oral tablet dispersible</i>	37	<i>astrigent solution</i>	63
<i>anti-hist allergy</i>	127	<i>ARISTADA</i>	37	<i>atazanavir sulfate</i>	41
<i>anti-itch aloe</i>	59	<i>ARISTADA INITIO</i>	37	<i>ATELVIA</i>	109
<i>anti-itch intensive heal</i>	59	<i>armodafinil</i>	149	<i>atenolol oral</i>	50
<i>anti-itch max str external cream 1 %</i>	59	<i>ARMONAIR DIGIHALER</i>	110	<i>atenolol-chlorthalidone</i>	52
<i>anti-itch maximum strength external cream 1</i>	59	<i>ARMOUR THYROID</i>	104	<i>athletes foot</i>	27
<i>%</i>	59	<i>ARNUITY ELLIPTA</i>	129	<i>athletes foot (terbinafine)</i>	27
<i>anti-nausea</i>	26	<i>arthritis pain oral tablet extended release</i>		<i>athletes foot (tolnaftate) external aerosol</i>	
<i>anti-nausea relief</i>	26	<i>650 mg</i>	10	<i>powder 1 %</i>	111
<i>antiseptic</i>	20	<i>arthritis pain relief oral tablet extended</i>		<i>athletes foot (tolnaftate) external cream 1 %</i>	
<i>apap-caff-dihydrocodeine</i>	7	<i>release 650 mg</i>	10	.....	111
<i>APIDRA SOLOSTAR</i>	45	<i>arthritis pain reliever oral</i>	10	<i>athletes foot external aerosol powder 2 %</i> 27	
<i>APIDRA VIAL</i>	45	<i>arthritis pain relieving</i>	110	<i>athletes foot external cream 1 %</i>	27

<i>athletes foot powder spray external aerosol powder 1 %</i>	111	<i>azithromycin oral suspension reconstituted</i>	19	BD ULTRA-FINE INSULIN SYRINGES....	65, 110
<i>athletes foot powder spray external aerosol powder 2 %</i>	27	<i>azithromycin oral tablet</i>	19	BD ULTRA-FINE INSULIN SYRINGES 30G X 1/2	110
<i>athletes foot relief</i>	111	<i>azo</i>	95	BD ULTRA-FINE INSULIN SYRINGES 31G X 15/64	110
<i>athletes foot spray external aerosol 2 %</i> ...	28	<i>AZOPT</i>	121	BD ULTRA-FINE INSULIN SYRINGES 31G X 5/16	110
<i>atomoxetine hcl</i>	54	<i>AZSTARYS</i>	55	BD ULTRA-FINE PEN NEEDLES	65, 65
ATORVALIQ.....	53	<i>azurette</i>	98	BD ULTRA-FINE PEN NEEDLES 29G X 12.7MM	110
<i>atorvastatin calcium oral</i>	53	B		BD ULTRA-FINE PEN NEEDLES 31G X 5 MM	111
<i>atovaquone</i>	34	<i>b-1</i>	152	BD ULTRA-FINE PEN NEEDLES 31G X 8 MM	110
<i>atovaquone-proguanil hcl</i>	34	<i>b6</i>	152	<i>beauty 360 pure glycerin</i>	63
ATRALIN.....	58	<i>BABY AYR SALINE</i>	132	<i>beauty 360 soothing bath</i>	63
<i>atropine sulfate ophthalmic ointment</i>	119	<i>baby basics diaper rash</i>	63	BECONASE AQ NASAL SUSPENSION 42 MCG/SPRAY	129
<i>atropine sulfate ophthalmic solution 1 %</i>	119	<i>bac</i>	7	BELBUCA.....	7
ATROVENT HFA.....	129	<i>bacitracin external</i>	111	BELSOMRA.....	149
AUBAGIO.....	56	<i>bacitracin ophthalmic</i>	120	BENADRYL ALLERGY CHILDRENS ORAL LIQUID	127
<i>aubra eq</i>	98	<i>bacitracin zinc external</i>	111	BENADRYL ALLERGY CHILDRENS ORAL TABLET CHEWABLE	127
<i>aurovela 1.5/30</i>	98	<i>bacitracin zinc first aid</i>	111	BENADRYL ALLERGY ORAL TABLET	127
<i>aurovela 1/20</i>	98	<i>bacitracin zinc-aloe</i>	111	BENADRYL ALLERGY ULTRATABS	127
<i>aurovela 24 fe</i>	98	<i>bacitracin-polymyxin b ophthalmic</i>	120	<i>benazepril hcl oral</i>	49
<i>aurovela fe 1.5/30</i>	98	<i>bacitra-neomycin-polymyxin-hc</i>	119	<i>benazepril-hydrochlorothiazide</i>	52
<i>aurovela fe 1/20</i>	98	<i>baclofen oral tablet</i>	38	BENLYSTA SUBCUTANEOUS SOLUTION AUTO-INJECTOR	106
AURYXIA.....	72	BAFIERTAM.....	56	BENZAC AC WASH.....	111
AUSTEDO.....	56	BALCOLTRA.....	97	BENZAMYCIN.....	58
AUVELITY.....	110	<i>balsalazide disodium</i>	109	BENZNIDAZOLE.....	34
AUVI-Q.....	130	BALVERSA.....	32	<i>benzonatate oral capsule 100 mg, 200 mg</i>	142
<i>AVAR-E EMOLLIENT</i>	63	<i>balziva</i>	98	<i>benztropine mesylate oral</i>	35
<i>AVAR-E GREEN</i>	63	<i>banophen oral capsule 25 mg</i>	127	BERINERT.....	105
<i>AVEDANA GLYCERIN (ADULT)</i>	91	<i>banophen oral tablet</i>	127	BESIVANCE.....	120
<i>aviane</i>	98	BAQSIMI ONE PACK.....	44	BETADINE EXTERNAL SOLUTION 10 % 20	
AVONEX PEN.....	56	BAQSIMI TWO PACK.....	44	<i>betaine</i>	94
AVONEX PREFILLED.....	56	BARACLUDGE ORAL SOLUTION.....	38		
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AYR SALINE NASAL DROPS.....	132	BAYER ASPIRIN ORAL TABLET.....	111		
<i>ayuna</i>	98	BAYER LOW DOSE ORAL TABLET CHEWABLE	111		
AZASITE.....	120	<i>baza antifungal</i>	28		
<i>azathioprine oral tablet 50 mg</i>	106	<i>b-complex oral tablet</i>	72		
<i>azelaic acid external</i>	58	<i>b-complex with b-12</i>	72		
<i>azelastine hcl nasal solution 0.1 %, 137 mcg/spray</i>	127	<i>b-complex/b-12 oral</i>	72		
<i>azelastine hcl ophthalmic</i>	120	BD AUTOSHIELD DUO PEN NEEDLES..	65		
		BD ECLIPSE NEEDLE 25G X 5/8.....	110		

<i>betamethasone dipropionate aug</i>	59	<i>bisoprolol-hydrochlorothiazide</i>	52	BUCKLEYS CHEST CONGESTION	132
<i>betamethasone dipropionate external lotion</i>	59	<i>blisovi 24 fe</i>	98	<i>budesonide inhalation</i>	129
<i>betamethasone dipropionate external ointment</i>	59	<i>blisovi fe 1.5/30</i>	98	<i>budesonide oral</i>	109
<i>betamethasone valerate external cream</i> ...	59	<i>blisovi fe 1/20</i>	98	<i>budesonide-formoterol fumarate</i>	140
<i>betamethasone valerate external lotion</i>	59	BLOOD GLUCOSE TEST STRIPS	65	<i>bumetanide oral</i>	52
<i>betamethasone valerate external ointment</i>	59	BONINE	25	<i>buprenorphine</i>	7
BETAPACE	50	BOOSTRIX	107	<i>buprenorphine hcl sublingual</i>	8
BETAPACE AF	50	<i>boro-packs</i>	63	<i>buprenorphine hcl-naloxone hcl</i>	14
BETASERON	56	<i>bosentan</i>	131	<i>bupropion hcl er (smoking det)</i>	15
<i>betatemp childrens</i>	10	BOSULIF	118	<i>bupropion hcl er (sr)</i>	23
<i>betaxolol hcl ophthalmic</i>	121	<i>boudreauxs butt paste ointment 40 % external</i>	63	<i>bupropion hcl er (xl) oral tablet extended release 24 hour 150 mg, 300 mg</i>	24
<i>betaxolol hcl oral</i>	50	BOUDREAUXS BUTT PASTE OINTMENT 40 % EXTERNAL	63	<i>bupropion hcl oral</i>	24
<i>bethanechol chloride oral</i>	95	<i>bp 10-1</i>	63	<i>buspirone hcl oral</i>	42
BETHKIS	130	<i>bp wash external liquid 2.5 %</i>	112	<i>butalbital-acetaminophen oral tablet 50-325 mg</i>	7
BETIMOL	121	<i>b-plex plus</i>	150	<i>butalbital-apap-caff-cod oral capsule 50-325-40-30 mg</i>	7
BETOPTIC-S	121	BPROTECTED PEDIA D-VITE	73	<i>butalbital-apap-caffeine oral capsule 50-325-40 mg</i>	7
BEVESPI AEROSPHERE	139	BPROTECTED PEDIA IRON	69	<i>butalbital-apap-caffeine oral tablet</i>	7
<i>bexarotene external</i>	33	BPROTECTED PEDIA POLY-VITE/FE ..	150	<i>butalbital-asa-caff-codeine</i>	7
<i>bexarotene oral</i>	33	BPROTECTED VITAMIN C	150	<i>butalbital-aspirin-caffeine</i>	7
BEXSERO	107	BRAFTOVI	32	<i>butorphanol tartrate nasal</i>	7
BEYAZ	97	BREATHE COMFORT HUMIDIFIER	112	BUTRANS	7
<i>bicalutamide</i>	31	BREO ELLIPTA INHALATION AEROSOL POWDER BREATH ACTIVATED 100-25 MCG/ACT, 200-25 MCG/ACT	140	BYDUREON BCISE AUTOINJECTOR	43
BIDIL	51	<i>breyana</i>	139	BYETTA 10 MCG PEN	43
BIJUVA ORAL CAPSULE 1-100 MG	97	BREZTRI AEROSPHERE	140	BYETTA 5 MCG PEN	43
BIKTARVY ORAL TABLET 30-120-15 MG	39	<i>briellyn</i>	98	C	
BIKTARVY ORAL TABLET 50-200-25 MG	39	BRILINTA	48	<i>cabergoline</i>	104
BINAXNOW COVID-19 AG HOME TEST	111	<i>brimonidine tartrate ophthalmic solution 0.15 %</i>	121	CABLIVI	48
<i>biocel</i>	150	<i>brimonidine tartrate ophthalmic solution 0.2 %</i>	121	CABOMETYX	118
BIOLLE TEARS	122	BRIVIACT ORAL	20	CADEAU DHA	150
BIOLYTE	69	BROMFED DM	132	<i>caffeine citrate oral</i>	56
BION TEARS PF	122	BROMSITE	120	<i>cal mag zinc +d3</i>	69
<i>biotinex</i>	83	BRONCHITOL	57	<i>calamine external lotion</i>	112
<i>bisacodyl ec</i>	111	BROVANA	130	<i>calcidol</i>	150
<i>bisacodyl laxative</i>	112	BRUKINSA	118	<i>calcipotriene external cream</i>	61
<i>bisacodyl oral</i>	112	BRYHALI	59	<i>calcipotriene external ointment</i>	61
<i>bisacodyl rectal</i>	112			<i>calcipotriene external solution</i>	61
<i>bismuth</i>	83			<i>calcitonin (salmon) nasal</i>	109
<i>bismuth subsalicylate oral</i>	83				
<i>bisoprolol fumarate oral</i>	50				

<i>calcitriol external</i>	61	<i>calcium citrate-vitamin d oral tablet 315-5</i>		<i>CAREPOINT POLY HUB NEEDLE 18G X 1</i>	
<i>calcitriol oral capsule</i>	110	<i>mg-mcg</i>	69	.....	47
<i>calcitriol oral solution</i>	110	<i>calcium fast dissolution</i>	150	<i>CAREPOINT POLY HUB NEEDLE 25G X</i>	
<i>calcium + vitamin d3 oral tablet 500-5 mg-</i>		<i>calcium high potency</i>	150	<i>5/8</i>	110
<i>mcg</i>	69	<i>calcium high potency/vitamin d</i>	69	<i>CAREPOINT SAFETY 1ST NEEDLE 25G X</i>	
<i>calcium 600 oral tablet 1500 (600 ca) mg</i>	150	<i>calcium oral tablet 1500 (600 ca) mg</i>	150	<i>5/8</i>	110
<i>calcium 600/vit d/minerals oral tablet 600-</i>		<i>calcium oyster shell oral tablet 1250 (500 ca)</i>		<i>CARESENS CONTROL SOLUTION A/B</i> ..	65
<i>200 mg-unit</i>	69	<i>mg</i>	150	<i>CARESTART COVID-19 HOME TEST</i> ..	112
<i>calcium 600/vit d/minerals oral tablet</i>		<i>calcium plus vitamin d</i>	69	<i>CARETOUCH CONTROL SOL LEVEL 2</i> ..	65
<i>chewable 600-400 mg-unit</i>	69	<i>calcium plus vitamin d3</i>	69	<i>CARETOUCH HYPODERMIC NEEDLE 25G</i>	
<i>calcium 600/vitamin d</i>	69	<i>calcium soft chews oral tablet chewable 500-</i>		<i>X 5/8</i>	110
<i>calcium 600/vitamin d-3</i>	69	<i>200-40 mg-unt-mcg</i>	150	<i>carglumic acid</i>	67
<i>calcium 600+d oral tablet 600-10 mg-mcg</i>	69	<i>calcium/minerals/vitamin d</i>	69	<i>carteolol hcl</i>	121
<i>calcium 600+d oral tablet 600-5 mg-mcg</i>	150	<i>calcium-magnesium-zinc oral tablet 333-</i>		<i>cartia xt</i>	51
<i>calcium acetate (phos binder)</i>	72	<i>133-5 mg, 333.33-133.33-5 mg</i>	69	<i>carvedilol</i>	50
<i>calcium acetate oral tablet 667 mg</i>	72	<i>cal-gest antacid</i>	83	<i>CASTIVA WARMING</i>	112
<i>calcium antacid</i>	83	<i>CALQUENCE</i>	112	<i>CATHFLO ACTIVASE</i>	49
<i>calcium antacid ex st oral tablet chewable</i>		<i>camila</i>	102	<i>CAYA</i>	112
<i>750 mg</i>	83	<i>camrese</i>	98	<i>CAYSTON</i>	130
<i>calcium antacid extra strength</i>	83	<i>camrese lo</i>	98	<i>cefaclor oral capsule</i>	17
<i>calcium carb-cholecalciferol oral tablet 600-</i>		<i>CANASA</i>	109	<i>cefadroxil</i>	17
<i>10 mg-mcg, 600-5 mg-mcg</i>	69	<i>capecitabine</i>	34	<i>cefazolin sodium injection solution</i>	
<i>calcium carbonate antacid oral suspension</i>		<i>CAPLYTA</i>	37	<i>reconstituted 1 gm</i>	17
.....	83	<i>CAPRELSA</i>	118	<i>cefazolin sodium solution reconstituted 10</i>	
<i>calcium carbonate antacid oral tablet</i>	83	<i>capsaicin external cream 0.025 %</i>	112	<i>gm injection</i>	17
<i>calcium carbonate antacid oral tablet</i>		<i>capsaicin external cream 0.1 %</i>	112	<i>cefdinir</i>	17
<i>chewable</i>	83	<i>capsaicin hp</i>	112	<i>cefepime hcl solution reconstituted 2 gm</i>	
<i>calcium carbonate oral tablet 1500 (600 ca)</i>		<i>capsaicin pain relief</i>	112	<i>intravenous</i>	18
<i>mg</i>	150	<i>captopril oral</i>	49	<i>cefixime oral capsule</i>	18
<i>calcium carbonate oral tablet chewable 1250</i>		<i>captopril-hydrochlorothiazide</i>	52	<i>cefpodoxime proxetil oral tablet</i>	18
<i>(500 ca) mg</i>	150	<i>CAPZASIN-HP</i>	112	<i>cefprozil</i>	18
<i>calcium cit plus vit d-3</i>	69	<i>capzix</i>	112	<i>ceftriaxone sodium injection solution</i>	
<i>calcium citrate + d3 maximum</i>	69	<i>CARAC</i>	61	<i>reconstituted 1 gm, 2 gm, 500 mg</i>	18
<i>calcium citrate +d3</i>	69	<i>carbamazepine er</i>	22	<i>cefuroxime axetil</i>	18
<i>calcium citrate oral tablet 950 (200 ca) mg</i>	69	<i>carbamazepine oral</i>	22	<i>celecoxib oral</i>	5
<i>calcium citrate plus vit d</i>	69	<i>carbidopa oral</i>	36	<i>CELEXA</i>	24
<i>calcium citrate+d oral tablet 315-6.25 mg-</i>		<i>carbidopa-levodopa er</i>	36	<i>CENTRUM SPECIALIST PRENATAL</i>	73
<i>mcg</i>	69	<i>carbidopa-levodopa oral tablet</i>	36	<i>cephalexin oral capsule 250 mg, 500 mg</i> ..	18
<i>calcium citrate+d3 oral tablet</i>	69	<i>carboxymethylcellulose sodium ophthalmic</i>		<i>cephalexin oral suspension reconstituted</i> ..	18
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<i>calcium citrate-vit d</i>	69			<i>CERDELGA</i>	94

<i>cerovel</i>	64	<i>childrens non-aspirin</i>	10	<i>CITRUCEL ORAL TABLET</i>	91
<i>cerovite jr</i>	150	<i>childrens silapap</i>	10	<i>claravis</i>	58
<i>cetiri-d</i>	136	<i>childrens soothe</i>	83	<i>clarithromycin er</i>	19
<i>cetirizine allergy relief</i>	127	<i>childrens vitamins/iron</i>	151	<i>clarithromycin oral</i>	19
<i>cetirizine hcl oral solution 1 mg/ml</i>	127	<i>childs non-aspirin</i>	10	<i>CLARITIN ALLERGY CHILDRENS</i>	138
<i>cetirizine hcl oral tablet</i>	127	<i>chlordiazepoxide hcl</i>	42	<i>CLARITIN ORAL TABLET</i>	138
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<i>CETRAXAL</i>	125	<i>chloroquine phosphate oral</i>	34	<i>CLARITIN REDITABS ORAL TABLET</i>	
<i>charlotte 24 fe</i>	98	<i>chlorpheniramine maleate er</i>	138	<i>DISPERSIBLE 10 MG</i>	138
<i>chateal eq</i>	98	<i>chlorpromazine hcl oral tablet</i>	36	<i>CLARITIN-D 12 HOUR</i>	142
<i>CHEMET</i>	72	<i>chlorthalidone</i>	53	<i>CLARITIN-D 24 HOUR</i>	142
<i>CHEMSTRIP 10 MD</i>	65	<i>CHLOR-TRIMETON ALLERGY</i>	138	<i>classic prenatal</i>	73
<i>CHEMSTRIP 10/SG</i>	65	<i>chlorzoxazone oral tablet 500 mg</i>	149	<i>c-lax laxative</i>	112
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<i>chest congestion relief child</i>	132	<i>ciclopirox external solution</i>	62	<i>CLIMARA</i>	98
<i>chest congestion relief dm oral syrup</i>	142	<i>cilostazol</i>	48	<i>CLIMARA PRO</i>	98
<i>chest congestion relief oral liquid</i>	132	<i>CIMDUO</i>	40	<i>clindacin etz external swab</i>	62
<i>chest congestion relief oral tablet</i>	132	<i>cimetidine oral tablet 200 mg</i>	79	<i>clindacin-p</i>	62
<i>chewable c</i>	150	<i>cimetidine oral tablet 300 mg, 400 mg, 800</i>		<i>clindamycin hcl oral capsule 150 mg, 300</i>	
<i>chewable c with rose hips</i>	150	<i>mg</i>	79	<i>mg</i>	17
<i>chewable childrens vitamin</i>	150	<i>CIMZIA SUBCUTANEOUS PREFILLED</i>		<i>clindamycin palmitate hcl</i>	17
<i>chewy not chalky flavor</i>	83	<i>SYRINGE KIT 2 X 200 MG/ML, 6 X 200</i>		<i>clindamycin phosphate external gel</i>	62
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<i>childrens animal shapes</i>	150	<i>cinacalcet hcl</i>	110	<i>clindamycin phosphate external swab</i>	62
<i>childrens apap</i>	10	<i>CIPRO HC</i>	125	<i>clindamycin phosphate vaginal</i>	17
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<i>clonazepam oral tablet</i>	42	COMETRIQ (100 MG DAILY DOSE)	118	COSOFT PF	119
<i>clonidine hcl oral</i>	49	COMETRIQ (140 MG DAILY DOSE)	118	COTELLIC	32
<i>clopidogrel bisulfate oral</i>	48	COMETRIQ (60 MG DAILY DOSE)	118	<i>cough & chest congestion</i>	142
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<i>cold/cough dm oral liquid 2.5-1-5 mg/5ml</i> 142		<i>corn and callus remover</i>	113		
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<i>cyclosporine modified</i>	106	<i>UT)</i>	73	<i>dexamethasone oral tablet 0.5 mg, 0.75 mg,</i>	
<i>cyclosporine oral</i>	106	<i>DECARA ORAL CAPSULE 625 MCG</i>		<i>1 mg, 2 mg</i>	96
<i>CYMBALTA</i>	56	<i>(25000 UT)</i>	73	<i>dexamethasone oral tablet 1.5 mg, 4 mg, 6</i>	
<i>cyproheptadine hcl oral</i>	128	<i>deep sea nasal spray</i>	133	<i>mg</i>	96
<i>cyred eq</i>	98	<i>deferasirox granules</i>	72	<i>dexamethasone sodium phosphate</i>	
<i>CYSTAGON</i>	94	<i>deferasirox oral packet</i>	72	<i>ophthalmic</i>	120
<i>CYSTARAN</i>	119	<i>deferasirox oral tablet</i>	72	<i>DEXCOM G6 RECEIVER</i>	65
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<i>(2000 ut)</i>	73	<i>DELSYM COUGH CHILDRENS</i>	143	<i>dexmethylphenidate hcl</i>	55
<i>d3 oral capsule 125 mcg (5000 ut)</i>	73	<i>DELSYM COUGH/CHEST CONGEST DM</i>		<i>dexmethylphenidate hcl er</i>	55
<i>d3 oral capsule 25 mcg (1000 ut)</i>	73	<i>.....</i>	143	<i>dextroamphetamine sulfate er</i>	55
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<i>d3-50</i>	73	<i>RELEASE</i>	143	<i>mg, 5 mg</i>	55
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<i>daily fiber oral capsule 0.52 gm</i>	89	<i>DELZICOL</i>	109	<i>dextromethorphan-guaifenesin oral syrup</i>	
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<i>daily vites</i>	73	<i>DEPO-ESTRADIOL</i>	98	<i>DIALYVITE VITAMIN D 5000</i>	73
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<i>darunavir</i>	113	<i>desmopressin ace spray refrig</i>	96	<i>dibromm childrens cold/cgh</i>	143
<i>dasetta 1/35</i>	98	<i>desmopressin acetate oral</i>	96	<i>diclofenac potassium oral tablet 50 mg</i>	5
<i>dasetta 7/7/7</i>	98	<i>desmopressin acetate spray</i>	96	<i>diclofenac sodium er</i>	5
<i>DAURISMO</i>	32	<i>desogestrel-ethinyl estradiol oral tablet 0.15-</i>		<i>diclofenac sodium external gel 1 %</i>	5
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<i>daysee</i>	98	<i>DETROL</i>	94	<i>diclofenac sodium ophthalmic</i>	120

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<i>dicloxacillin sodium</i>	18	<i>release</i>	43	<i>dronabinol</i>	26
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<i>dimethyl fumarate starter pack</i>	56	<i>10000 unit/gm</i>	113	<i>EXTENDED RELEASE</i>	55
<i>diotame instydose</i>	83	<i>DOVATO</i>	39	<i>DYANAVEL XR ORAL TABLET</i>	
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<i>diphenhydramine hcl childrens</i>	128	<i>doxepin hcl oral concentrate</i>	25	<i>e 153</i>	
<i>diphenhydramine hcl injection</i>	128	<i>doxepin hcl oral tablet</i>	149	<i>E.E.S. 400</i>	19
<i>diphenhydramine hcl oral</i>	128	<i>doxy 100</i>	19	<i>e-400-clear</i>	153
<i>diphenoxylate-atropine</i>	78	<i>doxycycline hyclate oral capsule</i>	19	<i>ear drops otic solution 6.5 %</i>	125
<i>dipyridamole oral</i>	48	<i>doxycycline hyclate oral tablet 100 mg</i>	19	<i>ear wax kit</i>	125
<i>disopyramide phosphate</i>	50	<i>doxycycline monohydrate oral capsule 100</i>		<i>ear wax removal</i>	125
<i>disulfiram oral tablet 250 mg</i>	14	<i>mg</i>	19	<i>ear wax removal system</i>	126
<i>disulfiram oral tablet 500 mg</i>	14	<i>doxycycline monohydrate oral capsule 50</i>		<i>earwax removal</i>	126
<i>DIURIL</i>	53	<i>mg</i>	19	<i>earwax removal drops</i>	126
<i>divalproex sodium er</i>	43	<i>DR SMITHS ADULT BARRIER EXTERNAL</i>		<i>earwax removal kit</i>	126
<i>divalproex sodium oral capsule delayed</i>		<i>OINTMENT 10 %</i>	63	<i>EASIVENT</i>	113
<i>release sprinkle</i>	43	<i>DR SMITHS DIAPER</i>	63	<i>EASIVENT MASK LARGE</i>	113

<i>EASIVENT MASK MEDIUM</i>	113	<i>emtricitabine-tenofovir df</i>	40	<i>EPIPEN JR 2-PAK</i>	130
<i>EASIVENT MASK SMALL</i>	113	<i>EMTRIVA ORAL SOLUTION</i>	40	<i>epitol</i>	22
<i>easygel</i>	67	<i>EMVERM</i>	34	<i>EPOGEN</i>	47
<i>easy-lax plus</i>	91	<i>enalapril maleate oral solution</i>	49	<i>ergocalciferol oral</i>	151
<i>EASYMAX 15 LEVEL 2 CONTROL</i>	65	<i>enalapril maleate oral tablet</i>	49	<i>ERIVEDGE</i>	32
<i>EASYMAX 15 LEVEL 2-3 CONTROL</i>	65	<i>enalapril-hydrochlorothiazide</i>	52	<i>ERLEADA</i>	31
<i>ec-naproxen</i>	5	<i>ENBREL</i>	107	<i>erlotinib hcl</i>	118
<i>econtra one-step</i>	103	<i>ENDACOF-DM</i>	143	<i>ERMEZA</i>	104
<i>ED A-HIST ORAL LIQUID</i>	137	<i>ENDARI</i>	67	<i>errin</i>	103
<i>ed bron gp</i>	133	<i>endocet oral tablet 10-325 mg, 5-325 mg,</i> <i>7.5-325 mg</i>	7	<i>ertapenem sodium</i>	18
<i>ed chlorped jr</i>	138	<i>ENDOMETRIN</i>	102	<i>ERYTHROCIN STEARATE</i>	19
<i>ed-apap</i>	10	<i>enema</i>	83	<i>erythromycin base oral</i>	19
<i>EDARBI</i>	49	<i>enema disposable</i>	83	<i>erythromycin ethylsuccinate oral</i>	19
<i>EDARBYCLOR</i>	52	<i>enema mineral oil</i>	89	<i>erythromycin external</i>	62
<i>EDLUAR</i>	149	<i>enema ready-to-use</i>	83	<i>erythromycin ophthalmic</i>	120
<i>EDURANT</i>	40	<i>enema rectal enema 16-6 gm/133ml, 19-7</i> <i>gm/118ml</i>	84	<i>erythromycin oral</i>	19
<i>efavirenz</i>	40	<i>ENEMEEZ MINI</i>	91	<i>ESBRIET</i>	131
<i>efavirenz-emtricitab-tenofo df</i>	40	<i>ENFAMIL ENFALYTE</i>	69	<i>escitalopram oxalate oral tablet</i>	24
<i>efavirenz-lamivudine-tenofovir</i>	40	<i>ENFAMIL EXPECTA</i>	73	<i>esomeprazole magnesium oral packet</i>	79
<i>effe-k oral tablet effervescent 25 meq</i>	151	<i>ENGERIX-B</i>	107	<i>essential one daily</i>	73
<i>EFFIENT</i>	48	<i>enilloring</i>	99	<i>essentials</i>	73
<i>EFUDEX</i>	61	<i>enoxaparin sodium</i>	47	<i>estarylla</i>	99
<i>EGRIFTA SV</i>	96	<i>enpresse-28</i>	99	<i>estazolam</i>	149
<i>electrolyte solution</i>	69	<i>enskyce</i>	99	<i>ESTRACE</i>	98
<i>ELESTRIN</i>	98	<i>ENSPRYNG</i>	106	<i>estradiol oral</i>	99
<i>elinest</i>	98	<i>ENSTILAR</i>	61	<i>estradiol transdermal gel</i>	98
<i>ELIQUIS</i>	47	<i>entacapone</i>	35	<i>estradiol transdermal patch twice weekly</i> ..	99
<i>ELIQUIS DVT/PE STARTER PACK</i>	47	<i>entecavir</i>	38	<i>estradiol transdermal patch weekly</i>	99
<i>elixophyllin</i>	131	<i>enteric aspirin</i>	114	<i>estradiol vaginal</i>	99
<i>ELLA</i>	102	<i>ENTRESTO</i>	52	<i>eszopiclone</i>	149
<i>ELLUME COVID-19 HOME TEST</i>	114	<i>enulose</i>	77	<i>ethambutol hcl oral tablet 100 mg</i>	30
<i>ELMIRON</i>	95	<i>EPCLUSA</i>	39	<i>ethambutol hcl oral tablet 400 mg</i>	30
<i>eluryng</i>	98	<i>ephrine nose drops</i>	133	<i>ethosuximide oral</i>	21
<i>ELYXYB</i>	5	<i>EPIDIOLEX</i>	20	<i>ethynodiol diac-eth estradiol</i>	99
<i>EMEND ORAL</i>	26	<i>EPIDUO</i>	58	<i>etodolac</i>	5
<i>EMETROL ORAL SOLUTION</i>	26	<i>EPIDUO FORTE</i>	58	<i>etonogestrel-ethinyl estradiol</i>	99
<i>EMFLAZA ORAL SUSPENSION</i>	95	<i>epinephrine injection solution auto-injector</i>	130	<i>etoposide oral</i>	32
<i>EMGALITY</i>	29	<i>EPIPEN 2-PAK</i>	130	<i>etravirine</i>	40
<i>EMGALITY (300 MG DOSE)</i>	29			<i>EUCRISA</i>	59
<i>EMPAVELI</i>	110			<i>EULEXIN</i>	31
<i>emtricitabine</i>	40			<i>euthyrox</i>	104

EVAC	89	FARXIGA.....	43	<i>ferrous sulfate oral tablet 325 (65 fe) mg...</i>	70
EVAMIST	98	FASENRA PEN	132	<i>ferrous sulfate oral tablet delayed release.</i>	70
EVEKEO	55	<i>fast relief laxative</i>	114	FETZIMA	24
EVEKEO ODT.....	56	FASTEP COVID-19 ANTIGEN TEST.....	114	<i>fever reducer/pain reliever</i>	10
<i>everolimus oral tablet 0.25 mg, 0.5 mg, 0.75 mg, 1 mg</i>	107	<i>febuxostat</i>	29	<i>fever reducing childrens</i>	10
<i>everolimus oral tablet 10 mg, 2.5 mg, 5 mg, 7.5 mg</i>	32	<i>felbamate oral suspension</i>	20	<i>feverall adults</i>	10
<i>everolimus oral tablet soluble</i>	32	<i>felbamate oral tablet</i>	20	<i>feverall childrens</i>	10
EVISTA	103	<i>felodipine er</i>	51	FEVERALL INFANTS.....	10
EVOTAZ.....	41	FEMRING	98	FEVERALL JUNIOR STRENGTH	10
EXCEDRIN EXTRA STRENGTH.....	10	<i>fenofibrate micronized oral capsule 134 mg, 200 mg, 67 mg</i>	53	<i>fe-vite iron</i>	70
EXCEDRIN MIGRAINE.....	10	<i>fenofibrate oral capsule 134 mg, 200 mg, 67 mg</i>	53	<i>fexofenadine hcl oral</i>	138
EXELON	23	<i>fenofibrate oral tablet 145 mg, 48 mg</i>	53	FIASP	45
<i>exemestane</i>	32	<i>fenofibrate oral tablet 160 mg, 54 mg</i>	53	FIASP FLEXTOUCH	45
EXKIVITY	32	FENOGLIDE.....	53	FIASP PENFILL.....	45
EX-LAX MAXIMUM STRENGTH	91	FENSOLVI (6 MONTH)	104	<i>fiber laxative + calcium</i>	91
EX-LAX ULTRA	114	<i>fentanyl citrate (pf)</i>	7	<i>fiber laxative oral capsule 0.52 gm</i>	89
EXTAVIA.....	56	<i>fentanyl transdermal patch 72 hour 100 mcg/hr, 12 mcg/hr, 25 mcg/hr, 50 mcg/hr, 75 mcg/hr</i>	7	<i>fiber laxative oral tablet 500 mg</i>	91
<i>eye drops advanced relief</i>	122	<i>ferate</i>	70	<i>fiber oral capsule 0.52 gm</i>	89
<i>eye drops long lasting</i>	122	FER-IN-SOL	70	<i>fiber oral powder 28.3 %, 58.6 %</i>	89
<i>eye drops ophthalmic solution 0.05 %</i>	122	<i>ferocon</i>	70	<i>fiber oral powder 48.57 %</i>	89
<i>eye drops ophthalmic solution 0.05-0.1-1-1 %</i>	122	<i>ferosul</i>	70	<i>fiber oral tablet 500 mg</i>	91
<i>eye drops ophthalmic solution 0.05-0.25 %</i>	122	<i>ferotinsic</i>	70	<i>fiber oral tablet 625 mg</i>	91
<i>eye irritation relief drops</i>	122	<i>ferretts</i>	70	<i>fiber therapy oral capsule 0.52 gm</i>	89
<i>eye itch relief ophthalmic solution 0.035 %</i>	125	<i>ferrex 150 capsule 150 mg oral</i>	70	<i>fiber therapy oral powder 28.3 %</i>	89
<i>eye lubricant</i>	122	FERREX 150 CAPSULE 150 MG ORAL..	70	<i>fiber therapy oral tablet 500 mg</i>	91
EYSUVIS	120	FERRIC X-150.....	70	<i>fiber therapy oral tablet 625 mg</i>	91
<i>ezetimibe</i>	53	FERRIPROX TWICE-A-DAY	72	<i>fiber-caps</i>	91
EZFE 200	69	<i>ferrous fumarate oral tablet 324 (106 fe) mg, 324 mg</i>	70	<i>fiber-lax</i>	91
F		<i>ferrous gluconate oral tablet 240 (27 fe) mg</i>	70	FINACEA	58
<i>falmina</i>	99	<i>ferrous gluconate oral tablet 324 (37.5 fe) mg</i>	70	<i>finasteride oral tablet 5 mg</i>	95
<i>famotidine acid reducer oral tablet 10 mg</i> ..	79	<i>ferrous gluconate oral tablet 324 (38 fe) mg</i>	70	<i>finolimod hcl</i>	56
<i>famotidine oral suspension reconstituted</i> ..	79	<i>ferrous sulfate oral solution 75 (15 fe) mg/ml</i>	70	FINTEPLA	20
<i>famotidine oral tablet</i>	79			<i>finzala</i>	99
<i>famotidine orig st</i>	79			<i>first aid antibiotic external ointment 3.5-400-5000 , 3.5-400-5000 mg-unit</i>	20
FANAPT	37			<i>first aid antiseptic external solution 10 %</i> ..	20
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				FLAGYL	17
				FLAREX.....	120
				<i>flecainide acetate</i>	50
				FLECTOR.....	5

FLEET BISACODYL	114	<i>FLUTICASON FUROATE-VILANTEROL</i>		<i>FREESTYLE LIBRE 14 DAY SENSOR</i>	66
FLEET ENEMA	84	.....	140	<i>FREESTYLE LIBRE 2 READER</i>	66
FLEET OIL	89	<i>fluticasone propionate external cream</i>	60	<i>FREESTYLE LIBRE 2 SENSOR</i>	66
FLEET PEDIATRIC	84	<i>fluticasone propionate external ointment</i> ..	60	<i>FREESTYLE LIBRE 3 SENSOR</i>	65
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FLORA VANCE	84	<i>fluticasone propionate nasal</i>	129	<i>FREESTYLE PRECISION NEO TEST</i>	65
<i>floranex tablet oral</i>	84	<i>fluticasone-salmeterol inhalation aerosol</i>		<i>FREESTYLE TEST</i>	65
FLORANEX TABLET ORAL	84	<i>powder breath activated 100-50 mcg/act,</i>		<i>freeze dried acidophilus</i>	84
FLORASTOR	84	<i>250-50 mcg/act, 500-50 mcg/act</i>	140	<i>FRESKARO MAGNESIUM CITRATE</i>	91
FLOVENT DISKUS	129	<i>FLUTICASON-SALMETEROL</i>		<i>FROVA</i>	29
FLOVENT HFA	129	<i>INHALATION AEROSOL POWDER</i>		<i>fruity c</i>	151
FLOWFLEX COVID-19 AG HOME TEST	114	<i>BREATH ACTIVATED 113-14 MCG/ACT,</i>		<i>ft 8 hour pain relief</i>	10
FLUAD QUADRIVALENT	108	<i>232-14 MCG/ACT, 55-14 MCG/ACT</i> ..	140	<i>ft acid reducer oral capsule delayed release</i>	
FLUARIX QUADRIVALENT	108	<i>flvoxamine maleate</i>	24	.....	80
FLUBLOK QUADRIVALENT	108	<i>FLUZONE HIGH-DOSE QUADRIVALENT</i>		<i>ft acid reducer oral tablet</i>	79
FLUCELVAX QUADRIVALENT	108	.....	108	<i>ft all day allergy</i>	128
<i>fluconazole oral</i>	26	<i>FLUZONE QUADRIVALENT</i>	108	<i>ft all day allergy 24 hour</i>	128
<i>fludrocortisone acetate oral</i>	96	<i>FML FORTE</i>	121	<i>ft all day allergy relief</i>	138
FLULAVAL QUADRIVALENT	108	<i>foaming antacid oral tablet chewable 80-20</i>		<i>ft allergy relief 12 hour</i>	138
FLUMIST QUADRIVALENT	108	<i>mg</i>	84	<i>ft allergy relief 24 hour</i>	139
<i>fluocinolone acetonide body</i>	59	<i>FOCALIN</i>	55	<i>ft allergy relief childrens oral liquid</i>	128
<i>fluocinolone acetonide external cream 0.025</i>		<i>FOLAGENT DHA</i>	151	<i>ft allergy relief oral capsule</i>	128
<i>%</i>	59	<i>FOLAMED DHA</i>	151	<i>ft allergy relief oral tablet 25 mg</i>	128
<i>fluocinolone acetonide external ointment</i> ..	59	<i>FOLCYTEINE</i>	73	<i>ft antacid & antigas</i>	84
<i>fluocinolone acetonide external solution</i> ...	59	<i>folic acid oral tablet 1 mg</i>	114	<i>ft antacid extra strength</i>	84
<i>fluocinolone acetonide scalp</i>	60	<i>folic acid oral tablet 400 mcg, 800 mcg</i> ..	114	<i>ft antacid regular strength</i>	84
<i>fluocinonide emulsified base</i>	60	<i>foltrin</i>	70	<i>ft antifungal external cream 1 %</i>	114
<i>fluocinonide external cream</i>	60	<i>foot & sneaker</i>	114	<i>ft antifungal external cream 2 %</i>	28
<i>fluocinonide external solution</i>	60	<i>foot care (terbinafine)</i>	28	<i>ft aspirin</i>	114
<i>fluoridex daily renewal</i>	67	<i>for sty relief</i>	122	<i>ft aspirin low dose</i>	114
<i>fluorometholone</i>	120	<i>FORFIVO XL</i>	23	<i>ft athletes foot (terbinafine)</i>	28
<i>fluorouracil external cream 5 %</i>	61	<i>FORMULA 3 THE TREATMENT</i>	114	<i>ft chest congestion relief</i>	133
<i>fluorouracil external solution</i>	61	<i>FORMULA 7 THE SOLUTION</i>	114	<i>ft children's pain/fever</i>	10
<i>fluoxetine hcl oral capsule</i>	24	<i>FORTEO</i>	110	<i>ft clearlax</i>	89
<i>fluoxetine hcl oral solution</i>	24	<i>FORTESTA</i>	97	<i>ft docosanol</i>	64
<i>fluphenazine decanoate injection</i>	36	<i>FOSAMAX</i>	110	<i>ft earwax removal</i>	126
<i>fluphenazine hcl injection</i>	36	<i>FOSAMAX PLUS D</i>	110	<i>ft earwax removal kit</i>	126
<i>fluphenazine hcl oral concentrate</i>	36	<i>fosamprenavir calcium</i>	41	<i>ft enteric coated aspirin</i>	114
<i>fluphenazine hcl oral elixir</i>	36	<i>fosinopril sodium</i>	50	<i>ft fiber laxative</i>	91
<i>fluphenazine hcl oral tablet</i>	36	<i>fosinopril sodium-hctz</i>	52	<i>ft gas relief</i>	84
<i>flurbiprofen sodium</i>	120	<i>FREESTYLE LIBRE 14 DAY READER</i>	66	<i>ft gas relief extra strength</i>	84

<i>ft gas relief infants</i>	84	<i>galantamine hydrobromide oral tablet 12 mg, 8 mg</i>	23	<i>gentamicin sulfate external</i>	62
<i>ft gas relief ultra strength</i>	84	<i>galantamine hydrobromide oral tablet 4 mg</i>	23	<i>gentamicin sulfate ophthalmic</i>	120
<i>ft gentle laxative</i>	114	GARDASIL 9.....	107	GENTEAL SEVERE	122
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<i>ft laxative</i>	114	<i>gas relief extra strength oral tablet chewable 125 mg</i>	84	GENTEAL TEARS NIGHT-TIME	122
<i>ft magnesium citrate</i>	91	<i>gas relief extstrength</i>	84	GENTEAL TEARS OPHTHALMIC SOLUTION 0.1-0.2-0.3 %.....	122
<i>ft milk of magnesia</i>	84	<i>gas relief infants</i>	84	GENTEAL TEARS PF	122
<i>ft mineral oil</i>	89	<i>gas relief infants drops oral suspension 40 mg/0.6ml</i>	84	GENTEAL TEARS SEVERE DAY/NIGHT	122
<i>ft motion sickness oral tablet 50 mg</i>	25	<i>gas relief infants oral suspension 20 mg/0.3ml</i>	85	<i>gentle laxative</i>	114
<i>ft mucus relief 12hr oral tablet extended release 12 hour 1200 mg</i>	133	<i>gas relief oral capsule 125 mg</i>	85	<i>gentle laxative womens</i>	114
<i>ft mucus relief d 12 hour</i>	143	<i>gas relief oral capsule 180 mg</i>	85	<i>gentlelax</i>	90
<i>ft mucus relief dm oral tablet extended release 12 hour 30-600 mg</i>	143	<i>gas relief oral tablet chewable 125 mg</i>	85	<i>genuine aspirin</i>	114
<i>ft nasal decongestant max str</i>	143	<i>gas relief oral tablet chewable 80 mg</i>	85	GENVOYA.....	39
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<i>ft senna-s</i>	92	GAS-X ULTRA STRENGTH	85	<i>geri-lanta maximum strength</i>	85
<i>ft stomach relief oral suspension</i>	84	GATTEX	78	<i>geri-lanta supreme</i>	85
<i>ft stomach relief oral tablet chewable</i>	84	<i>gavilax oral powder</i>	90	<i>geri-mox</i>	85
<i>ft stool softener oral capsule</i>	92	<i>gavilyte-c</i>	78	<i>geri-tussin dm oral syrup</i>	143
<i>ft stool softener oral tablet 50-8.6 mg</i>	92	<i>gavilyte-g</i>	78	<i>geri-tussin oral liquid</i>	133
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<i>furosemide oral solution 10 mg/ml</i>	52	<i>gemfibrozil oral</i>	53	<i>glimepiride</i>	43
<i>furosemide oral tablet</i>	52	GEMTESA	38	<i>glipizide er</i>	43
FUZEON	41	<i>generlac</i>	77	<i>glipizide oral tablet 10 mg, 5 mg</i>	43
<i>fyavolv</i>	98	<i>gengraf oral capsule</i>	107	<i>glipizide xl</i>	44
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<i>gabapentin oral capsule</i>	21			GLUCAGON EMERGENCY KIT 1 MG INJECTION.....	44
<i>gabapentin oral solution 250 mg/5ml</i>	21			GLUCO TO GO	46
<i>gabapentin oral tablet 600 mg, 800 mg</i>	22				
<i>galantamine hydrobromide oral solution</i> ...	23				

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glucose oral tablet chewable 4 gm	46	GVOKE HYPOPEN 2-PACK	44	%	64
glyburide micronized	44	GVOKE KIT	44	heparin sodium (porcine)	47
glyburide oral	44	GVOKE PFS	45	heparin sodium (porcine) pf injection solution	
glyburide-metformin	44	GYNAZOLE-1	26	5000 unit/0.5ml	47
glycerin (adult) rectal suppository 2 gm	92	H		heparin sodium (porcine) pf injection solution	
glycerin (infants & children) rectal		habitrol	15	5000 unit/ml	47
suppository 1 gm	92	HADLIMA	114	HEPLISAV-B	108
glycerin adult rectal suppository 2 gm	92	HADLIMA PUSH TOUCH	114	her style	103
glycerin child rectal suppository 1 gm, 1.2		HAEGARDA	105	hi cal	70
gm	92	hailey 1.5/30	99	HIBERIX	107
glycerin childrens	92	hailey 24 fe	99	high potency probiotic	86
glycerin external	63	hailey fe 1.5/30	99	HORIZANT	56
glycerin external liquid 99.5 %	63	hailey fe 1/20	99	HUMALOG	45
glycerin pediatric rectal suppository 1.2 gm		HALCION	149	HUMALOG JUNIOR KWIKPEN	45
.....	92	halobetasol propionate external cream	60	HUMALOG KWIKPEN SUBCUTANEOUS	
glycolax	90	haloette	99	SOLUTION PEN-INJECTOR 100	
glycopyrrolate oral tablet 1 mg	78	haloperidol decanoate intramuscular	36	UNIT/ML	45
glycopyrrolate oral tablet 2 mg	78	haloperidol oral	37	HUMALOG KWIKPEN SUBCUTANEOUS	
GLYXAMBI	43	HARVONI	39	SOLUTION PEN-INJECTOR 200	
GOCOVRI	35	HAVRIX	107	UNIT/ML	45
gormel	64	headache formula	10	HUMALOG MIX 50/50	45
gormel 10	64	headache relief	10	HUMALOG MIX 50/50 KWIKPEN	45
GRALISE ORAL TABLET 300 MG, 600 MG		headache relief extra str	10	HUMALOG MIX 75/25	45
.....	56	healthy hair/skin/nails	74	HUMALOG MIX 75/25 KWIKPEN	45
GRANIX	47	heartburn antacid	85	HUMATIN	16
griseofulvin microsize oral	26	heartburn antacid ex st	85	HUMATROPE	96
griseofulvin ultramicrosize	26	heartburn prevention oral tablet 10 mg	79	HUMIRA PEN-PEDIATRIC UC START	106
guaifenesin ac	143	heartburn relief ex st	85	HUMIRA PEN-PSOR/UEVIT STARTER	106
guaifenesin er oral tablet extended release		heartburn relief oral tablet 10 mg	79	HUMIRA SUBCUTANEOUS PEN-	
12 hour 1200 mg	133	heartburn relief oral tablet 200 mg	79	INJECTOR KIT 40 MG/0.4ML, 40	
guaifenesin oral liquid	133	heartburn relief oral tablet chewable 160-105		MG/0.8ML	106
guaifenesin oral tablet 400 mg	133	mg	85	HUMIRA SUBCUTANEOUS PEN-	
guaifenesin-codeine	143	heartland gas relief	85	INJECTOR KIT 80 MG/0.8ML	107
guaifenesin-dm oral syrup	143	heather	103	HUMIRA SUBCUTANEOUS PREFILLED	
guanfacine hcl	49	h-e-b aspirin	114	SYRINGE KIT 10 MG/0.1ML, 20	
guanfacine hcl er	55	h-e-b childrens allergy	128	MG/0.2ML, 40 MG/0.4ML, 40 MG/0.8ML,	
GUARDIAN CONNECT TRANSMITTER	110	HELIDAC THERAPY	78	80 MG/0.8ML, 80 MG/0.8ML &	
GUARDIAN LINK 3 TRANSMITTER	110	HEMANGEOL	50	40MG/0.4ML	107
GUARDIAN SENSOR (3)	65	HEMLIBRA	49	HUMULIN 70/30 KWIKPEN	45
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HUMULIN N VIAL	45	<i>hydrophor</i>	63	<i>mg</i>	6
HUMULIN R U-500 KWIKPEN.....	45	<i>hydroxychloroquine sulfate oral tablet 200</i>		<i>icatibant acetate</i>	105
HUMULIN R U-500 VIAL		<i>mg</i>	34	<i>iclevia</i>	99
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<i>hydralazine hcl oral</i>	54	HYFTOR	110	<i>iferex 150 forte</i>	70
<i>hydrochlorothiazide oral capsule</i>	53	<i>hyoscyamine sulfate er</i>	114	IHEALTH COVID-19 RAPID TEST	115
<i>hydrochlorothiazide oral tablet 12.5 mg</i>	53	<i>hyoscyamine sulfate oral</i>	114	ILARIS	106
<i>hydrochlorothiazide oral tablet 25 mg, 50 mg</i>		<i>hyoscyamine sulfate sl</i>	114	ILEVRO	121
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<i>hydrocodone-acetaminophen oral solution</i>		HYPERSAL INHALATION NEBULIZATION		IMBRUVICA.....	118
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<i>hydrocodone-acetaminophen oral tablet 10-</i>		HYPERTET.....	109	<i>imiquimod external cream 5 %</i>	61
<i>325 mg, 5-325 mg, 7.5-325 mg</i>	8	HYPOTEARs.....	122	IMITREX.....	29
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<i>%</i>	109	I		IMODIUM MULTI-SYMPTOM RELIEF	86
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<i>hydrocortisone butyrate external ointment</i>	60	IBRANCE ORAL TABLET	32	<i>incassia</i>	103
<i>hydrocortisone butyrate external solution</i> .	60	IBSRELA.....	78	INCRELEX.....	96
<i>hydrocortisone external cream</i>	60	<i>ibu-200</i>	5	INCRUSE ELLIPTA	129
<i>hydrocortisone external lotion 2.5 %</i>	60	<i>ibuprofen</i>	5	<i>indapamide</i>	53
<i>hydrocortisone external ointment</i>	60	<i>ibuprofen childrens oral tablet chewable 100</i>		INDICAID COVID-19 RAPID TEST	115
<i>hydrocortisone max st external cream</i>	60	<i>mg</i>	5	<i>indomethacin oral</i>	6
<i>hydrocortisone max st/12 moist</i>	60	<i>ibuprofen cold & sinus</i>	143	<i>indoor/outdoor allergy rlf</i>	128
<i>hydrocortisone oral</i>	96	<i>ibuprofen cold/sinus oral tablet 30-200 mg</i>		INFANRIX.....	107
<i>hydrocortisone plus 12 external cream 1 %</i>		144	<i>infant gas relief</i>	86
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<i>hydrocortisone rectal</i>	109	<i>ibuprofen ib childrens</i>	5	<i>infants ibuprofen</i>	6
<i>hydrocortisone ultra-moisture</i>	60	<i>ibuprofen ib oral tablet 200 mg</i>	5	<i>infants pain & fever</i>	10
<i>hydrocortisone/aloe</i>	60	<i>ibuprofen infants oral suspension 50</i>		<i>infants pain relief drops</i>	11
<i>hydrocortisone/aloe max str</i>	60	<i>mg/1.25ml</i>	5	<i>infants pain/fever</i>	11
<i>hydrocortisone-acetic acid</i>	125	<i>ibuprofen jr oral tablet 100 mg</i>	5	INFUVITE ADULT	74
<i>hydrocortisone-aloe max st external cream 1</i>		<i>ibuprofen junior</i>	5	INGREZZA	56
<i>%</i>	60	<i>ibuprofen junior strength</i>	6	INLYTA	118
<i>hydrolatum</i>	63	<i>ibuprofen oral suspension 100 mg/5ml</i>	6	INSPIREASE	115
<i>hydromet</i>	114	<i>ibuprofen oral tablet 200 mg</i>	6	INSPIREASE RESERVOIR BAGS	115
<i>hydromorphone hcl oral</i>	8			<i>instacort 5</i>	60

INSULIN ASPART	45	<i>iron infant/toddler</i>	70	<i>junel 1.5/30</i>	99
INSULIN ASPART PROT & ASPART	45	<i>iron oral tablet 240 (27 fe) mg</i>	70	<i>junel 1/20</i>	99
INSULIN GLARGINE	45	<i>iron oral tablet 325 (65 fe) mg</i>	70	<i>junel fe oral tablet 1.5-30 mg-mcg</i>	99
INSULIN GLARGINE SOLOSTAR	45	<i>iron supplement childrens</i>	70	<i>junel fe oral tablet 1-20 mg-mcg</i>	99
INSULIN GLARGINE-YFGN	45	ISENTRESS HD	39	<i>junel fe oral tablet 1-20 mg-mcg(24)</i>	99
INSULIN LISPRO	45	ISENTRESS ORAL PACKET	39	JYNARQUE ORAL TABLET THERAPY	
INSULIN LISPRO (1 UNIT DIAL)	45	ISENTRESS ORAL TABLET	39	PACK 15 MG	72
INSULIN LISPRO JUNIOR KWIKPEN	45	ISENTRESS ORAL TABLET CHEWABLE	39	K	
INSULIN LISPRO PROT & LISPRO	45	<i>isibloom</i>	99	KALETRA	41
INSULIN PEN NEEDLES	66	<i>isoniazid oral</i>	30	<i>kalliga</i>	99
INSULIN PEN NEEDLES 29G X 12.7MM		<i>isosorbide dinitrate</i>	54	KALYDECO	130
.....	110	<i>isosorbide mononitrate</i>	54	KAOPECTATE ORAL SUSPENSION	86
INSULIN PEN NEEDLES 29G X 12MM ,		<i>isosorbide mononitrate er</i>	54	KAPVAY	55
31G X 5 MM , 31G X 6 MM , 31G X 8 MM		<i>isotretinoin oral capsule 10 mg, 20 mg, 30</i>		<i>kariva</i>	99
.....	110	mg, 40 mg	58	KATERZIA	51
INSULIN PEN NEEDLES 32G X 4 MM , 32G		ISTALOL	121	KAZANO	44
X 6 MM	66	<i>itraconazole oral</i>	26	<i>kelnor 1/35</i>	99
INSULIN SYRINGES 28G X 1/2	111	<i>ivermectin oral</i>	34	<i>kelnor 1/50</i>	100
INSULIN SYRINGES 29G X 1/2	111, 111	J		KERENDIA	52
INSULIN SYRINGES 30G X 1/2	111	<i>jaimiess</i>	99	KERYDIN	62
INSULIN SYRINGES 30G X 5/16	111	JAKAFI	32	KESIMPTA	56
INTELENCE ORAL TABLET 25 MG	40	<i>jantoven oral tablet 1 mg, 10 mg, 2 mg, 2.5</i>		<i>ketoconazole external cream</i>	62
INTELISWAB COVID-19 RAPID TEST	115	mg, 3 mg, 4 mg, 5 mg, 7.5 mg	47	<i>ketoconazole external shampoo</i>	62
<i>intestinex</i>	86	<i>jantoven oral tablet 6 mg</i>	47	<i>ketoconazole oral</i>	26
<i>introvale</i>	99	JANUMET	43	KETO-DIASTIX	66
INTUNIV	55	JANUMET XR	43	KETONE CARE	66
INVEGA	37	JANUVIA	43	KETONE TEST	66
INVEGA HAFYERA	37	JARDIANCE	43	<i>ketoprofen oral capsule 50 mg</i>	6
INVEGA SUSTENNA	37	<i>jasmiel</i>	99	<i>ketorolac tromethamine ophthalmic</i>	120
INVEGA TRINZA	37	<i>jencycla</i>	103	<i>ketorolac tromethamine oral</i>	6
INVELTYS	121	JENTADUETO	44	<i>ketorolac tromethamine solution 30 mg/ml</i>	
INVOKAMET	43	JENTADUETO XR	44	<i>injection</i>	6
INVOKAMET XR	43	<i>jinteli</i>	98	KETOROLAC TROMETHAMINE	
INVOKANA	43	<i>jock itch external cream 1 %</i>	28	SOLUTION 30 MG/ML INJECTION	6
IPOL	107	<i>jock itch max st</i>	115	KETOSTIX	66
<i>ipratropium bromide inhalation</i>	129	<i>jock itch spray powder</i>	115	<i>ketotifen fumarate ophthalmic</i>	125
<i>ipratropium bromide nasal</i>	129	<i>jolessa</i>	99	KEVZARA	106
<i>ipratropium-albuterol</i>	140	JORNAY PM	55	KINERET	106
<i>irbesartan</i>	49	JUBLIA	62	KISQALI (200 MG DOSE)	32
IRESSA	118	<i>juleber</i>	99	KISQALI (400 MG DOSE)	32
<i>iron (ferrous sulfate) oral solution</i>	70	JULUCA	39	KISQALI (600 MG DOSE)	32

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KISQALI FEMARA (400 MG DOSE).....	32	30 mg	80	<i>leucovorin calcium oral tablet 15 mg, 25 mg,</i>	
KISQALI FEMARA (600 MG DOSE).....	32	<i>lansoprazole oral tablet delayed release</i>		5 mg.....	33
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<i>klor-con m10</i>	67	LANTUS U-100 VIAL	45	<i>leuprolide acetate injection</i>	104
<i>klor-con m20</i>	67	<i>lapatinib ditosylate</i>	118	<i>levabuterol hcl inhalation</i>	130
<i>klor-con/ef</i>	151	<i>larin 1.5/30</i>	100	LEVBID.....	115
KLOXXADO	14	<i>larin 1/20</i>	100	LEVEMIR FLEXPEN	46
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<i>konsyl daily fiber oral powder 28.3 %</i>	90	<i>larin fe 1.5/30</i>	100	<i>levetiracetam oral solution</i>	21
KORLYM.....	97	<i>larin fe 1/20</i>	100	<i>levetiracetam oral tablet</i>	21
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<i>kourzeq</i>	57	LATUDA.....	37	<i>levocetirizine dihydrochloride oral tablet</i> ..	128
K-PHOS	70	<i>laxacin</i>	92	<i>levofloxacin oral tablet</i>	19
<i>k-prime</i>	151	<i>laxaclear</i>	90	<i>levonest</i>	100
KRINTAFEL	34	<i>laxative max str</i>	92	<i>levonorgest-eth estrad 91-day</i>	100
<i>kurvelo</i>	100	<i>laxative maximum strength oral tablet 25 mg</i>		<i>levonorgestrel</i>	103
L		.....	92	<i>levonorgestrel-ethinyl estrad oral tablet 0.1-</i>	
<i>labetalol hcl oral</i>	50	<i>laxative oral powder 17 gm/scoop</i>	90	20 mg-mcg.....	100
LAC-HYDRIN FIVE	60	<i>laxative oral tablet delayed release 5 mg</i>	115	<i>levonorgestrel-ethinyl estrad oral tablet 0.15-</i>	
<i>lacosamide oral tablet</i>	22	<i>laxative pills max st</i>	92	30 mg-mcg.....	100
<i>lactobacillus oral tablet</i>	86	<i>laxative pills oral tablet 25 mg</i>	92	<i>levonorg-eth estrad triphasic</i>	100
<i>lacto-pectin</i>	86	<i>laxative rectal suppository 10 mg</i>	115	<i>levora 0.15/30 (28)</i>	100
<i>lactulose encephalopathy</i>	77	<i>laxative regular strength</i>	92	<i>levo-t</i>	104
<i>lactulose oral solution</i>	77	LEDIPASVIR-SOFOSBUVIR.....	39	<i>levothyroxine sodium oral tablet</i>	104
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<i>lamivudine oral tablet 150 mg, 300 mg</i>	40	LENVIMA (14 MG DAILY DOSE)	118	<i>lice killing max st external shampoo 0.33-4</i>	
<i>lamivudine-zidovudine</i>	40	LENVIMA (18 MG DAILY DOSE)	118	%	35
<i>lamotrigine oral tablet</i>	20	LENVIMA (20 MG DAILY DOSE)	118	<i>lice killing max strength</i>	35
<i>lamotrigine oral tablet chewable</i>	21	LENVIMA (24 MG DAILY DOSE)	118	<i>lice killing maximum strength</i>	35
<i>lamotrigine starter kit-blue</i>	21	LENVIMA (4 MG DAILY DOSE)	118	<i>lice maximum strength</i>	35
<i>lamotrigine starter kit-green</i>	21	LENVIMA (8 MG DAILY DOSE)	118	<i>lice treatment external liquid 1 %</i>	62
<i>lamotrigine starter kit-orange</i>	21	LESCOL XL	53	<i>lice treatment external lotion 1 %</i>	62
LANCETS	66	<i>lessina</i>	100	<i>lice treatment external shampoo 0.33-4 %</i>	35
<i>lansoprazole oral capsule delayed release</i>		LETAIRIS.....	131	<i>lidocaine external cream</i>	14
15 mg	80	<i>letrozole oral</i>	32	<i>lidocaine external patch 5 %</i>	14

<i>lidocaine hcl external cream 3 %</i>	14	<i>loratadine d 12hr</i>	144	<i>lubricant pm</i>	123
<i>lidocaine viscous hcl</i>	14	<i>loratadine oral solution</i>	139	<i>lubricating eye drop</i>	123
<i>lidocaine-prilocaine external cream</i>	14	<i>loratadine oral tablet</i>	139	<i>lubricating eye drops</i>	123
<i>lidopin external cream 3 %</i>	14	<i>loratadine oral tablet dispersible</i>	139	<i>lubricating eye/overnight</i>	123
<i>linezolid oral suspension reconstituted</i>	17	<i>loratadine-d</i>	144	<i>lubricating plus eye drops</i>	123
<i>linezolid oral tablet</i>	17	<i>loratadine-d 12hr</i>	144	<i>lubricating plus ophthalmic solution 0.5 %</i>	123
LINZESS	77	<i>loratadine-d 24hr</i>	144	<i>lubricating tears ophthalmic solution 0.4-0.3</i> %	123
<i>liothyronine sodium oral</i>	104	<i>lorazepam injection solution 2 mg/ml</i>	42	<i>lubrifresh p.m.</i>	123
LIPITOR	53	<i>lorazepam injection solution 4 mg/ml</i>	42	LUMAKRAS	34
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<i>liquid pain relief</i>	11	LORZONE	149	LUPRON DEPOT (3-MONTH)	104
<i>liquid wart remover max st</i>	115	<i>losartan potassium oral</i>	49	LUPRON DEPOT (4-MONTH) INTRAMUSCULAR KIT 30MG	105
<i>lisdexamfetamine dimesylate oral capsule</i> 56		<i>losartan potassium-hctz</i>	52	LUPRON DEPOT (6-MONTH) INTRAMUSCULAR KIT 45MG	105
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<i>lithium carbonate oral</i>	43	<i>low-ogestrel</i>	100	<i>lutera</i>	100
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<i>lojaimiess</i>	100	<i>lubricant drops fast act</i>	122	LYNPARZA.....	32
LOKELMA	72	<i>lubricant drops ophthalmic gel 0.25-0.3 %</i>	122	LYRICA CR	56
<i>long acting nasal spray</i>	144	<i>lubricant drops ophthalmic solution</i>	122	<i>lysiplex plus oral tablet</i>	151
<i>long lasting antacid</i>	86	<i>lubricant eye drops (pf)</i>	123	LYSODREN.....	104
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LONSURF	31	<i>lubricant eye drops ophthalmic solution 0.4-</i> 0.3 %.....	123	LYUMJEV KWIKPEN	46
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<i>loratadine childrens oral solution</i>	139				
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<i>magnesium oral tablet 500 mg</i>	70
<i>magnesium oxide (antacid) oral tablet 400 mg</i>	115
<i>magnesium oxide -mg supplement oral tablet 400 (240 mg) mg</i>	71
<i>magnesium oxide -mg supplement oral tablet 500 mg</i>	71
<i>magnesium oxide oral tablet 400 mg</i>	115
<i>magnesium oxide oral tablet 420 mg</i>	115
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<i>meclizine hcl oral tablet 25 mg</i>	25
<i>meclizine hcl oral tablet chewable</i>	25
<i>medifin 400</i>	133
<i>medifin mucus relief child</i>	133
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<i>medi-first ibuprofen</i>	6
<i>medi-first triple antibiotic</i>	20
<i>mediproxen</i>	6
<i>medique aspirin</i>	115
<i>MEDISENSE GLUCOSE KETONE CONTR</i>	66
<i>MEDISENSE HI/MID/LOW CONTROL</i>	66
<i>MEDROL ORAL TABLET 2 MG</i>	96
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<i>medroxyprogesterone acetate oral</i>	103
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<i>mega probiotic</i>	86
<i>megestrol acetate oral suspension 40 mg/ml</i>	103
<i>megestrol acetate oral tablet 20 mg</i>	103
<i>megestrol acetate oral tablet 40 mg</i>	103
<i>meijer allergy relief-d</i>	144
<i>meijer antacid</i>	86
<i>meijer anti-diarrheal</i>	78
<i>MEKINIST</i>	32
<i>MEKTOVI</i>	32
<i>meloxicam oral tablet</i>	6
<i>melphalan</i>	33
<i>memantine hcl oral solution</i>	23
<i>memantine hcl oral tablet</i>	23
<i>MENACTRA</i>	107
<i>MENEST</i>	98
<i>MENQUADFI</i>	107
<i>MENVEO</i>	107
<i>mercaptopurine oral</i>	31
<i>meropenem solution reconstituted 500 mg intravenous</i>	18

MEROPENEM-SODIUM CHLORIDE	
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RECONSTITUTED 1 GM/50ML	18
<i>mesalamine oral capsule delayed release 400 mg</i>	109
<i>mesalamine rectal</i>	109
MESNEX ORAL	33
<i>metformin hcl er (osm)</i>	44
<i>metformin hcl er oral tablet extended release 24 hour 500 mg</i>	44
<i>metformin hcl er oral tablet extended release 24 hour 750 mg</i>	44
<i>metformin hcl oral tablet 1000 mg, 500 mg, 850 mg</i>	44
<i>methadone hcl oral tablet soluble</i>	7
<i>methadose oral tablet soluble</i>	7
<i>methazolamide oral</i>	121
<i>methenamine hippurate</i>	17
<i>methergine</i>	97
<i>methimazole oral</i>	105
<i>methocarbamol oral</i>	149
<i>methotrexate sodium (pf)</i>	107
<i>methotrexate sodium injection</i>	107
<i>methotrexate sodium oral</i>	107
<i>methoxsalen rapid</i>	61
<i>methsuximide</i>	21
METHYLDOPA	49
<i>methylergonovine maleate oral</i>	97
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<i>methylphenidate hcl er (cd)</i>	55
<i>methylphenidate hcl er (la) oral capsule extended release 24 hour 20 mg, 30 mg, 40 mg</i>	55
<i>methylphenidate hcl er (osm) oral tablet extended release 18 mg, 27 mg, 36 mg, 54 mg</i>	55
<i>methylphenidate hcl er oral tablet extended release</i>	55
<i>methylphenidate hcl er oral tablet extended release 24 hour</i>	55
<i>methylphenidate hcl oral tablet</i>	55

<i>methylprednisolone oral</i>	96	<i>migraine formula oral tablet 250-250-65 mg</i>	11	MONOJECT HYPODERMIC NEEDLE 18G X 1	47
<i>metoclopramide hcl oral solution</i>	25	<i>migraine headache relief</i>	11	<i>mono-lynyah</i>	100
<i>metoclopramide hcl oral tablet</i>	25	<i>migraine relief</i>	11	<i>montelukast sodium oral</i>	129
<i>metolazone</i>	53	MIGRANAL	29	<i>mood support probiotic</i>	87
<i>metoprolol succinate er</i>	50	<i>mili</i>	100	<i>morphine sulfate (concentrate)</i>	8
<i>metoprolol tartrate oral tablet 100 mg, 50 mg</i>	50	<i>milk of magnesia</i>	86	<i>morphine sulfate er</i>	7
<i>metoprolol tartrate oral tablet 25 mg</i>	50	<i>milk of magnesia oral suspension 1200</i> <i>mg/15ml</i>	86	<i>morphine sulfate er beads</i>	7
<i>metoprolol tartrate oral tablet 37.5 mg, 75</i> <i>mg</i>	50	<i>mimvey</i>	98	<i>morphine sulfate injection solution 2 mg/ml,</i> <i>4 mg/ml</i>	7
METROGEL	17	<i>mineral oil enema</i>	90	<i>morphine sulfate intravenous solution 50</i> <i>mg/ml</i>	7
<i>metronidazole external</i>	17	<i>mineral oil heavy oral</i>	90	<i>morphine sulfate oral</i>	8
<i>metronidazole oral tablet</i>	17	<i>mineral oil oral oil</i>	90	<i>morphine sulfate rectal</i>	8
<i>metronidazole vaginal</i>	17	<i>mineral oil rectal enema</i>	90	MOTEGRITY	78
<i>mexiletine hcl oral</i>	50	<i>mini nicotine</i>	15	<i>motion sickness oral tablet 50 mg</i>	25
<i>mibelas 24 fe</i>	100	MINIVELLE	98	<i>motion sickness relief oral tablet 50 mg</i>	25
<i>micaderm</i>	28	<i>minocycline hcl oral capsule 100 mg, 50 mg</i>	19	<i>motion sickness relief oral tablet chewable</i> <i>25 mg</i>	25
MICATIN	28	<i>minoxidil oral</i>	54	<i>motion-time</i>	25
MICOMITIN	115	<i>mintox maximum strength</i>	86	MOTRIN CHILDRENS	6
<i>miconazole 3</i>	26	<i>mintox plus</i>	86	MOTRIN IB ORAL TABLET	6
<i>miconazole 3 applicator vaginal kit 200 & 2</i> <i>mg-% (9gm)</i>	26	MIRALAX ORAL POWDER	90	MOTRIN INFANTS DROPS	6
<i>miconazole 3 combo pack app vaginal kit</i> <i>200 & 2 mg-% (9gm)</i>	27	<i>mirtazapine oral tablet 15 mg, 30 mg</i>	24	MOUNJARO	115
<i>miconazole 3 combo pack vaginal kit 200 &</i> <i>2 mg-% (9gm)</i>	27	<i>mirtazapine oral tablet 45 mg, 7.5 mg</i>	24	MOVANTIK	78
<i>miconazole 7 day treatment</i>	27	MIRVASO	58	MOVIPREP	78
<i>miconazole 7 vaginal cream 2 %</i>	27	<i>misoprostol oral</i>	79	<i>moxifloxacin hcl oral</i>	19
<i>miconazole 7 vaginal suppository 100 mg</i>	27	MITIGARE	29	<i>m-pap</i>	11
<i>miconazole antifungal</i>	28	<i>mm acetaminophen ex str</i>	11	MUCINEX CHILDRENS FREEFROM ORAL LIQUID 5-100 MG/5ML	144
<i>miconazole nitrate external cream</i>	28	MM ALLER-BEN	128	MUCINEX CHILDRENS STUFFY NOSE	144
<i>miconazole nitrate vaginal</i>	27	<i>mm arthritis pain</i>	11	MUCINEX COUGH CHILDRENS	144
<i>miconazorb af</i>	28	<i>mm aspirin</i>	115	MUCINEX D	144
<i>microgestin 1.5/30</i>	100	<i>mm clearlax</i>	90	MUCINEX D MAX STRENGTH	144
<i>microgestin 1/20</i>	100	<i>mm ibuprofen</i>	6	MUCINEX DM	144
<i>microgestin 24 fe</i>	100	<i>mm stool softener laxative</i>	92	MUCINEX FAST-MAX CHEST CONG MS	133
<i>microgestin fe 1.5/30</i>	100	M-M-R II	107	MUCINEX FAST-MAX DM MAX	144
<i>microgestin fe 1/20</i>	100	M-NATAL PLUS	74	MUCINEX MAXIMUM STRENGTH	133
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MIGERGOT	29	MODERNA COVID-19 VAC 6M-11Y	115	MUCINEX SINUS-MAX SINUS/ALLRGY	145
		<i>mometasone furoate external</i>	60		
		<i>mondoxyne nl</i>	20		

<i>mucus & cough relief child</i>	145	MULPLETA	48	<i>naloxone hcl injection solution prefilled</i>	
<i>mucus d</i>	145	MULTAQ	50	<i>syringe</i>	15
<i>mucus d extended release</i>	145	<i>multi vitamin</i>	74	<i>naloxone hcl nasal</i>	15
<i>mucus d max st er</i>	145	<i>multi vitamin w/d-3</i>	74	<i>naltrexone hcl oral</i>	14
<i>mucus dm</i>	145	<i>multiple vitamin-folic acid</i>	74	NAMZARIC	23
<i>mucus dm extended release oral tablet</i>		<i>multiple vitamins essential</i>	74	NAPHCON-A	124
<i>extended release 12 hour 30-600 mg</i> .	145	<i>multiple vitamins/iron</i>	151	NAPRELAN ORAL TABLET EXTENDED	
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<i>hour 1200 mg</i>	133	<i>multivitamin w/fluoride</i>	74	RELEASE 24 HOUR 500 MG	5
<i>mucus extended release oral tablet</i>		<i>multi-vitamin/fluoride</i>	74	NAPROSYN ORAL SUSPENSION	5
<i>extended release 12 hour 1200 mg</i>	133	<i>multivitamin/fluoride oral tablet chewable</i> .	74	NAPROSYN ORAL TABLET	5
<i>mucus relief 12 hour max st</i>	133	<i>multi-vitamin/fluoride/iron</i>	74	<i>naproxen dr</i>	6
<i>mucus relief chest oral tablet 400 mg</i>	133	<i>multi-vitamin/iron</i>	151	<i>naproxen oral suspension</i>	6
<i>mucus relief childrens oral liquid 100 mg/5ml</i>		<i>mupirocin external</i>	62	<i>naproxen oral tablet</i>	6
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<i>mucus relief cough childrens</i>	145	MURO 128 OPHTHALMIC SOLUTION 5 %		<i>naproxen sodium oral tablet 220 mg</i>	6
<i>mucus relief d max strength</i>	145	123	NARAMIN	128
<i>mucus relief d oral tablet extended release</i>		<i>my choice</i>	103	<i>naratriptan hcl</i>	29
<i>12 hour 120-1200 mg</i>	145	<i>my way</i>	104	NARCAN	15
<i>mucus relief d oral tablet extended release</i>		<i>mycophenolate mofetil oral</i>	107	NASACORT ALLERGY 24HR	139
<i>12 hour 60-600 mg</i>	145	<i>mycophenolate sodium</i>	107	<i>nasal allergy 24 hour</i>	139
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<i>mg/20ml, 5-100 mg/5ml</i>	145	MYDAYIS	56	<i>nasal allergy spray</i>	139
<i>mucus relief dm oral liquid 20-400 mg/20ml</i>		MYFEMBREE	77	<i>nasal decongestant 12 hour</i>	145
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<i>mucus relief dm oral tablet extended release</i>		MYLICON INFANTS GAS RELIEF	87	<i>nasal decongestant max st</i>	145
<i>12 hour 30-600 mg</i>	145	<i>mynephrocaps oral capsule 1 mg</i>	74	<i>nasal decongestant oral tablet 30 mg</i>	146
<i>mucus relief er oral tablet extended release</i>		MYNEPHRON	74	<i>nasal decongestant oral tablet extended</i>	
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<i>extended release 12 hour 1200 mg</i>	134	RELEASE 24 HOUR	94	<i>nasal decongestant pe oral tablet 30 mg</i> .	146
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<i>mucus+chest congestion</i>	134	<i>nadolol oral</i>	50	<i>nasal mist nasal solution</i>	146
<i>mucus-d</i>	145	<i>nafcillin sodium solution reconstituted 1 gm</i>		<i>nasal mist no drip</i>	146
<i>mucus-dm</i>	145	<i>injection</i>	18	NASAL MOIST NASAL SOLUTION	134
<i>mucus-er oral tablet extended release 12</i>		<i>naloxone hcl injection solution</i>	14	<i>nasal moisturizing spray</i>	134
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<i>nasal spray 12 hour</i>	146	<i>NEONATAL PLUS</i>	74	<i>niacin er oral tablet extended release 1000 mg</i>	74
<i>nasal spray extra moist</i>	146	<i>neo-polycin</i>	120	<i>niacin er oral tablet extended release 250 mg, 500 mg</i>	74
<i>nasal spray extra moisturizing</i>	146	<i>neo-polycin hc</i>	119	<i>niacin oral tablet 100 mg, 250 mg, 50 mg</i>	74
<i>nasal spray fast acting</i>	134	<i>NEOSPORIN ORIGINAL</i>	20	<i>niacor</i>	54
<i>nasal spray nasal solution 0.05 %</i>	146	<i>NEO-SYNEPHRINE COLD/ALLRG MILD</i>	134	<i>NICODERM CQ</i>	15
<i>nasal spray nasal solution 1 %</i>	134	<i>NEO-SYNEPHRINE COLD/ALLRGY EXT</i>	134	<i>NICORETTE</i>	15
<i>nasal spray no drip</i>	146	<i>NEO-SYNEPHRINE COLD/ALLRGY REG</i>	134	<i>NICORETTE MINI</i>	15
<i>nasal spray saline</i>	134	<i>nephro vitamins</i>	74	<i>NICORETTE STARTER KIT</i>	15
<i>nasal spray sinus</i>	146	<i>NEPHRO-VITE</i>	74	<i>nicotine gum mouth/throat gum 2 mg</i>	16
<i>NASALCROM</i>	140	<i>NESINA</i>	44	<i>nicotine gum mouth/throat gum 4 mg</i>	16
<i>NASCOBAL</i>	152	<i>NEULASTA</i>	48	<i>nicotine gum mouth/throat lozenge 2 mg</i>	16
<i>NATAZIA</i>	98	<i>NEULASTA ONPRO</i>	48	<i>nicotine gum mouth/throat lozenge 4 mg</i>	16
<i>nateglinide</i>	44	<i>NEUPOGEN INJECTION SOLUTION 300 MCG/ML</i>	47	<i>nicotine mini</i>	16
<i>NATESTO</i>	97	<i>NEUPOGEN INJECTION SOLUTION 480 MCG/1.6ML</i>	48	<i>nicotine mouth/throat gum 2 mg</i>	16
<i>natural daily fiber</i>	90	<i>NEUPOGEN INJECTION SOLUTION 480 MCG/1.6ML</i>	48	<i>nicotine mouth/throat gum 4 mg</i>	16
<i>natural fiber oral capsule 0.52 gm</i>	90	<i>NEUPOGEN INJECTION SOLUTION 480 MCG/1.6ML</i>	48	<i>nicotine mouth/throat lozenge 2 mg</i>	16
<i>natural fiber oral powder 28.3 %, 58.6 %</i>	90	<i>NEUPOGEN INJECTION SOLUTION 480 MCG/1.6ML</i>	48	<i>nicotine mouth/throat lozenge 4 mg</i>	16
<i>natural fiber supplement</i>	90	<i>NEUPOGEN INJECTION SOLUTION 480 MCG/1.6ML</i>	48	<i>nicotine polacrilex mini</i>	16
<i>natural senna laxative</i>	92	<i>NEUPOGEN INJECTION SOLUTION 480 MCG/1.6ML</i>	48	<i>nicotine polacrilex mouth/throat</i>	16
<i>natural tears pf</i>	123	<i>NEUPOGEN INJECTION SOLUTION 480 MCG/1.6ML</i>	48	<i>nicotine step 1</i>	15
<i>natural vegetable</i>	90	<i>NEUPOGEN INJECTION SOLUTION 480 MCG/1.6ML</i>	48	<i>nicotine step 2</i>	15
<i>natural vegetable laxative oral tablet 8.6 mg</i>	92	<i>NEUPRO</i>	36	<i>nicotine step 3</i>	15
<i>natural vitamin e</i>	153	<i>NEURONTIN</i>	21	<i>nicotine transdermal patch 24 hour 14 mg/24hr, 7 mg/24hr</i>	15
<i>natura-lax</i>	90	<i>NEUTEK 2TEK CONTROL</i>	66	<i>nicotine transdermal patch 24 hour 21 mg/24hr</i>	15
<i>nausea control</i>	26	<i>NEUTROGENA OIL-FREE ACNE WASH</i>	116	<i>nicotine transdermal system</i>	15
<i>nausea relief oral solution 1.87-1.87-21.5</i>	26	<i>NEVANAC</i>	121	<i>NICOTROL</i>	15
<i>NAYZILAM</i>	22	<i>nevirapine</i>	40	<i>NICOTROL NS</i>	15
<i>nebulal inhalation nebulization solution 3 %</i>	146	<i>nevirapine er</i>	40	<i>nifedipine er</i>	51
<i>necon 0.5/35 (28)</i>	100	<i>new day</i>	104	<i>nifedipine er osmotic release</i>	51
<i>NEODOT THERMOMETER</i>	115	<i>NEXAVAR</i>	32	<i>nifedipine oral</i>	51
<i>NEOMULTIVITE</i>	74	<i>NEXIUM ORAL PACKET 2.5 MG, 5 MG</i>	80	<i>nighttime dry-eye relief</i>	123
<i>neomycin sulfate oral</i>	16	<i>NEXLETOL</i>	53	<i>nighttime relief lub eye</i>	123
<i>neomycin-bacitracin zn-polymyx</i>	120	<i>NEXLIZET</i>	53	<i>nikki</i>	101
<i>neomycin-polymyxin-dexameth ophthalmic ointment</i>	119	<i>NEXTSTELLIS</i>	77	<i>nimodipine oral</i>	51
<i>neomycin-polymyxin-dexameth ophthalmic suspension 3.5-10000-0.1</i>	119	<i>niacin (antihyperlipidemic)</i>	53	<i>NINLARO</i>	32
<i>neomycin-polymyxin-gramicidin</i>	120	<i>niacin er (antihyperlipidemic)</i>	53	<i>nitazoxanide oral</i>	34
<i>neomycin-polymyxin-hc otic</i>	125	<i>niacin er oral capsule extended release 250 mg</i>	74	<i>NITRO-BID</i>	54
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<i>no drip nasal spray</i>	146	NOVAREL INTRAMUSCULAR SOLUTION		NUZYRA ORAL	20
<i>no drip original 12 hours</i>	146	RECONSTITUTED 5000 UNIT	96	<i>nyamyc</i>	62
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<i>pain relief childrens oral suspension</i>	12	<i>PAXLOVID (300/100)</i>	42	<i>PHAZYME</i>	87
<i>pain relief childrens oral tablet chewable 160</i>		<i>pazopanib hcl</i>	118	<i>PHAZYME ULTRA STRENGTH</i>	87
<i>mg</i>	12	<i>PEAK FLOW METER UNIVERSAL RANG64</i>		<i>phenazo oral tablet 200 mg</i>	95
<i>pain relief extra st</i>	12	<i>ped electrolyte freeze pop</i>	71	<i>phenazo oral tablet 95 mg</i>	95
<i>pain relief extra strength oral capsule 500</i>		<i>PEDIA-LAX ORAL LIQUID</i>	92	<i>phenazopyridine hcl oral</i>	95
<i>mg</i>	12	<i>PEDIALYTE FREEZER POPS</i>	71	<i>phenobarbital oral</i>	22
<i>pain relief extra strength oral liquid 500</i>		<i>PEDIALYTE ORAL SOLUTION</i>	71	<i>phenylephrine hcl ophthalmic</i>	119
<i>mg/15ml</i>	12	<i>PEDIALYTE SINGLES</i>	71	<i>phenylephrine hcl oral</i>	135
<i>pain relief extra strength oral tablet 500 mg</i>		<i>PEDIARIX</i>	107	<i>phenytek</i>	22
.....	12	<i>pediatric electrolyte oral solution</i>	71	<i>phenytoin infatabs</i>	22
<i>pain relief oral liquid 500 mg/15ml</i>	12	<i>PEDVAX HIB</i>	107	<i>phenytoin oral suspension 125 mg/5ml</i>	22
<i>pain relief oral tablet 325 mg</i>	12	<i>peg 3350 oral powder</i>	90	<i>phenytoin oral tablet chewable</i>	22
<i>pain relief oral tablet 500 mg</i>	12	<i>peg 3350-kcl-na bicarb-nacl</i>	78	<i>phenytoin sodium extended</i>	22
<i>pain relief oral tablet extended release 650</i>		<i>peg-3350/electrolytes</i>	78	<i>philith</i>	101
<i>mg</i>	12	<i>PEGASYS</i>	106	<i>PHOSPHA 250 NEUTRAL</i>	71
<i>pain relief regular strength</i>	12	<i>penicillamine oral tablet</i>	95	<i>PHOSPHOLINE IODIDE</i>	121
<i>pain relief/rapid burst</i>	12	<i>penicillin v potassium</i>	18	<i>phosphorous</i>	71
<i>pain reliever</i>	12	<i>PENTACEL</i>	108	<i>phospho-trin 250 neutral</i>	71
<i>pain reliever childrens oral suspension 160</i>		<i>pentamidine isethionate inhalation</i>	34	<i>PHOSPHO-TRIN K500</i>	71
<i>mg/5ml</i>	12	<i>PENTASA</i>	109	<i>phytonadione injection solution 10 mg/ml</i> ..	75
<i>pain reliever ex st oral liquid 500 mg/15ml</i>	12	<i>pentazocine-naloxone hcl</i>	8	<i>phytonadione oral</i>	75
<i>pain reliever ex st oral tablet 500 mg</i>	12	<i>pentoxifylline er</i>	52	<i>PIFELTRO</i>	40
<i>pain reliever extra strength oral tablet 250-</i>		<i>PEPTO-BISMOL ORAL SUSPENSION 524</i>		<i>pilocarpine hcl ophthalmic</i>	121
<i>250-65 mg</i>	12	<i>MG/30ML</i>	87	<i>pilocarpine hcl oral tablet 5 mg</i>	57
<i>pain reliever extra strength oral tablet 500</i>		<i>PERDIEM OVERNIGHT RELIEF</i>	93	<i>pilocarpine hcl oral tablet 7.5 mg</i>	57
<i>mg</i>	12	<i>PERFOROMIST</i>	130	<i>PILOT COVID-19 AT-HOME TEST</i>	116
<i>pain reliever plus</i>	12	<i>perigard</i>	57	<i>pimecrolimus</i>	60
<i>pain-off</i>	13	<i>permethrin external</i>	62	<i>pimozide</i>	37
<i>paliperidone er</i>	37	<i>perphenazine oral</i>	25	<i>pimtrea</i>	101
<i>PANADOL CHILDRENS</i>	13	<i>perphenazine-amitriptyline oral tablet 2-10</i>		<i>pink bismuth maximum strength</i>	87
<i>PANADOL EXTRA STRENGTH</i>	13	<i>mg, 4-10 mg, 4-25 mg, 4-50 mg</i>	24	<i>pink bismuth oral suspension 262 mg/15ml</i>	
<i>PANADOL INFANTS</i>	13	<i>perphenazine-amitriptyline oral tablet 2-25</i>		.....	87
<i>PANOXYL</i>	116	<i>mg</i>	24		

<i>pink bismuth oral suspension 525 mg/15ml</i>	<i>potassium chloride crys er oral tablet</i>	<i>prednisolone oral solution</i>	96
.....	<i>extended release 10 meq</i>	<i>prednisolone sodium phosphate ophthalmic</i>	121
<i>pink bismuth oral tablet 262 mg</i>	<i>potassium chloride crys er oral tablet</i>	<i>prednisolone sodium phosphate oral solution</i>	96
<i>pink bismuth oral tablet chewable 262 mg</i>	<i>extended release 20 meq</i>	<i>15 mg/5ml</i>	96
<i>pink bismuth ultra str</i>	<i>potassium chloride er oral capsule extended</i>	<i>prednisolone sodium phosphate oral solution</i>	96
<i>pink-bismuth</i>	<i>release 10 meq</i>	<i>6.7 (5 base) mg/5ml</i>	96
<i>pioglitazone hcl</i>	<i>potassium chloride er oral tablet extended</i>	<i>prednisone oral</i>	96
<i>PIP GLUCOSE CONTROL SOLUTION</i>	<i>release 10 meq</i>	<i>pregabalin</i>	56
<i>piperacillin sod-tazobactam so intravenous</i>	<i>potassium chloride er oral tablet extended</i>	<i>PREGNYL</i>	96
<i>solution reconstituted 4-0.5 gm, 4.5 (4-</i>	<i>release 20 meq</i>	<i>PREHEVBRIO</i>	108
<i>0.5) gm</i>	<i>potassium chloride er oral tablet extended</i>	<i>PREMARIN ORAL</i>	101
<i>PIQRAY (200 MG DAILY DOSE)</i>	<i>release 8 meq</i>	<i>PREMARIN VAGINAL</i>	98
<i>PIQRAY (250 MG DAILY DOSE)</i>	<i>potassium chloride oral</i>	<i>PREMPHASE</i>	101
<i>PIQRAY (300 MG DAILY DOSE)</i>	<i>potassium citrate er oral tablet extended</i>	<i>PREMPRO</i>	101
<i>pirfenidone oral capsule</i>	<i>release 10 meq (1080 mg)</i>	<i>prenatal formula oral tablet 28-0.8 mg</i>	75
<i>pirfenidone oral tablet 267 mg, 801 mg</i> ...	<i>potassium citrate er oral tablet extended</i>	<i>prenatal gummy oral tablet chewable 0.4 mg</i>	153
<i>piroxicam oral</i>	<i>release 15 meq (1620 mg)</i>.....	.....	153
<i>PLAN B ONE-STEP</i>	<i>potassium citrate er oral tablet extended</i>	<i>prenatal gummy oral tablet chewable 0.4-</i>	151
<i>PLEGRIDY INTRAMUSCULAR</i>	<i>release 5 meq (540 mg)</i>	<i>113.5 mg</i>	151
<i>PLEGRIDY STARTER PACK</i>	<i>potassium citrate-citric acid</i>	<i>prenatal gummy oral tablet chewable 0.4-25</i>	75
<i>PLEGRIDY SUBCUTANEOUS</i>	<i>povidone iodine</i>	<i>mg</i>	75
<i>PLENVU</i>	<i>povidone-iodine external solution</i>	<i>prenatal multi+dha</i>	75
<i>plerixafor</i>	<i>PRADAXA ORAL CAPSULE</i>	<i>prenatal multivitamins</i>	75
<i>PNEUMOVAX 23</i>	<i>PRADAXA ORAL PACKET</i>	<i>prenatal oral tablet 27-0.8 mg</i>	75
<i>podofilox external</i>	<i>PRALUENT</i>	<i>prenatal oral tablet 27-1 mg</i>	75
<i>poly bacitracin</i>	<i>pramipexole dihydrochloride oral tablet</i>	<i>prenatal oral tablet 28-0.8 mg</i>	75
<i>polycin</i>	<i>0.125 mg, 0.25 mg, 0.5 mg, 1 mg, 1.5 mg</i>	<i>prenatal vitamins</i>	75
<i>polyethylene glycol 3350 oral powder</i>.....	.....	<i>prenatal/iron</i>	75
<i>polyethylene glycol 3350-grx oral powder</i>	<i>pramipexole dihydrochloride oral tablet 0.75</i>	<i>PREPARATION H EXTERNAL CREAM 1 %</i>	61
<i>poly-iron 150</i>	<i>mg</i>.....	.....	61
<i>poly-iron 150 forte</i>	<i>prasugrel hcl</i>	<i>PREVACID 24HR</i>	80
<i>polymyxin b-trimethoprim</i>	<i>pravastatin sodium</i>	<i>prevalite oral powder</i>	54
<i>polysaccharide iron complex</i>	<i>praziquantel oral</i>	<i>PREVIDENT</i>	68
<i>polysaccharide iron forte</i>	<i>prazosin hcl oral</i>	<i>PREVIDENT 5000 DRY MOUTH</i>	68
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<i>portia-28</i>	<i>PREDNISOLONE ACETATE P-F</i>		

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PREZISTA ORAL TABLET 600 MG, 800 MG	111	<i>propranolol hcl oral solution 20 mg/5ml</i>	51	<i>quetiapine fumarate oral tablet 150 mg</i>	37
PRIFTIN	30	<i>propranolol hcl oral solution 40 mg/5ml</i>	51	QUFLORA PEDIATRIC ORAL SOLUTION 0.5 MG/ML	75
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<i>probenecid</i>	29	<i>pseudoephedrine hcl 12 hr</i>	146	QUINTET CONTROL HIGH/NORMAL	67
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<i>probiotic oral capsule 250 mg</i>	87	<i>pulmosal</i>	147	RADICAVA ORS	56
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<i>procto-med hc</i>	109	PURIXAN.....	31	RASUVO	107
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<i>progesterone oral</i>	103	PYRIDIUM	95	<i>react</i>	104
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<i>promethazine hcl injection solution 25 mg/ml</i>	25	<i>pyridostigmine bromide oral tablet 60 mg</i> .	30	REBIF REBIDOSE	57
<i>promethazine hcl oral</i>	25	<i>pyridoxine hcl oral</i>	153	REBIF REBIDOSE TITRATION PACK.....	57
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RELEASE 45 MG, 63 MG	55	<i>ribavirin oral</i>	39	<i>rufinamide</i>	22
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<i>senna oral tablet</i>	93	<i>simethicone oral suspension</i>	88	<i>sodium chloride (pf)</i>	68
<i>senna plus oral tablet</i>	93	<i>simethicone oral tablet chewable</i>	88	<i>sodium chloride inhalation</i>	147
<i>senna s</i>	93	<i>simethicone ultra strength</i>	88	<i>sodium chloride intravenous solution 0.45 %,</i>	
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<i>sorafenib tosylate</i>	33	<i>stomach relief ultra oral suspension 525</i>		<i>9-4.5 %</i>	63
<i>sorbitol oral</i>	91	<i>mg/15ml</i>	89	<i>sulfacetamide sod-sulfur wash external</i>	
SORILUX	61	<i>stool softener laxative oral capsule</i>	93	<i>liquid 9-4.5 %</i>	63
<i>sotalol hcl (af)</i>	50	<i>stool softener oral capsule 100 mg</i>	93	<i>sulfacetamide-prednisolone</i>	119
<i>sotalol hcl oral</i>	50	<i>stool softener oral capsule 240 mg</i>	93	<i>sulfamethoxazole-trimethoprim oral</i>	19
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<i>spironolactone-hctz</i>	52	<i>stress formula</i>	75	<i>sumatriptan succinate subcutaneous</i>	29
<i>SPRAVATO (84 MG DOSE)</i>	23	<i>stress formula/iron</i>	152	<i>sunitinib malate</i>	33
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