

Medicare Part D Formulary Changes

Please note the following revisions, additions and deletions from our 2024 Medicare Formulary (00024437) to our 2025 Medicare Formulary (00025411 Version 10). If you have any questions about the information here, please contact the number on your ID card.

HMO and HMO-POS Additions

Drug	Tier	Requirements/Limits
ARIKAYCE SUS	TIER 5	QL(525 ML per 30 days); PA
BREYNA AER 160/4.5	TIER 4	QL(10.3 GM per 30 days)
BREYNA AER 80/4.5	TIER 4	QL(10.3 GM per 30 days)
DICLOFENAC SOL 1.5%	TIER 4	PA
DRIZALMA SPRINKLE	TIER 4	
ERGOLOID MES TAB 1MG ORAL	TIER 2	
GVOKE HYPO 2 INJ .5/.1ML	TIER 4	
GVOKE HYPO 2 INJ 1MG/.2ML	TIER 4	
GVOKE KIT SOL 1MG/0.2M	TIER 4	
GVOKE PFS INJ	TIER 4	
IMPAVIDO CAP 50MG	TIER 4	
LILETTA IUD 52MG	TIER 3	
LOKELMA PAK 10GM	TIER 4	QL(90 EA per 30 days)
LOKELMA PAK 5GM	TIER 4	QL(90 EA per 30 days)
MESALAMINE CAP 500MG ER	TIER 4	
NAMZARIC CAP	TIER 4	
NAMZARIC CAP 14-10MG	TIER 4	QL(30 EA per 30 days)
NAMZARIC CAP 21-10MG	TIER 4	QL(30 EA per 30 days)
NAMZARIC CAP 28-10MG	TIER 4	QL(30 EA per 30 days)
NAMZARIC CAP 7-10MG	TIER 4	QL(30 EA per 30 days)
NEXPLANON IMP 68MG	TIER 3	
OPVEE SPR 2.7/0.1	TIER 3	
VEOZAH TAB 45MG	TIER 4	QL(30 EA per 30 days); PA
VIGAFYDE	TIER 5	PA
VOWST CAP	TIER 5	PA
XDEMVIY DRO 0.25%	TIER 5	QL(10 ML per 42 days)

HMO and HMO-POS Changes

Drug	Tier	Requirements/Limits
ADEFOV DIPIV TAB 10MG	TIER 4	
AIMOVIG INJ 140MG/ML	TIER 3	QL(2 ML per 30 days); PA
AIMOVIG INJ 70MG/ML	TIER 3	QL(2 ML per 30 days); PA
ALPRAZOLAM TAB 2MG ODT	TIER 2	QL Removal
AMPHOTERICIN INJ 50MG	TIER 4	B/D

Drug	Tier	Requirements/Limits
ARALAST NP INJ 500MG	TIER 5	PA
ARANESP INJ 60MCG	TIER 4	PA
ARIKAYCE SUS	TIER 5	QL(525 ML per 30 days); PA
ARIPIPRAZOLE TAB 15MG ODT	TIER 4	
ARSENIC TRIO INJ 10/10ML	TIER 5	
AUVELITY TAB 45-105MG	TIER 5	QL(60 EA per 30 days); ST NSO
AZATHIOPRINE INJ 100MG	TIER 5	B/D
BACLOFEN INJ 40/20ML	TIER 5	B/D
BACLOFEN INJ 40MG/20	TIER 5	B/D
BACLOFEN INJ 50MCG/ML	TIER 5	B/D
BETAXOLOL TAB 10MG	Tier 4	
BETAXOLOL TAB 20MG	Tier 4	
BICILLIN L-A INJ 1200000	TIER 4	
BICILLIN L-A INJ 2400000	TIER 4	
BICILLIN L-A INJ 600000	TIER 4	
BROMFENAC DRO 0.09% OP	TIER 4	
BROMFENAC SOL 0.09% OP	TIER 4	
BUPRENORPHIN DIS 20MCG/HR	TIER 4	
CABOMETYX TAB 20MG	TIER 5	QL(30 EA per 30 days); PA NSO
CABOMETYX TAB 40MG	TIER 5	QL(30 EA per 30 days); PA NSO
CABOMETYX TAB 60MG	TIER 5	QL(30 EA per 30 days); PA NSO
CARBAMAZEPIN SUS 100/5ML	TIER 2	
CARBAMAZEPIN SUS 200/10ML	TIER 2	
CARBIDOPA TAB 25MG	TIER 4	
CARVEDILOL CAP 10MG ER	TIER 4	
CARVEDILOL CAP 20MG ER	TIER 4	
CARVEDILOL CAP 40MG ER	TIER 4	
CARVEDILOL CAP 80MG ER	TIER 4	
CASPOFUNGIN INJ 50MG	TIER 4	
CLINDAMYCIN LOT 1%	TIER 2	QL(60 ML per 30 days)
CLINDAMYCIN LOT 10MG/ML	TIER 2	QL(60 ML per 30 days)
CODEINE SULF TAB 60MG	TIER 4	QL(180 EA per 30 days)
COMPRO SUP 25MG	TIER 2	PA
CROMOLYN SOD NEB 20MG/2ML	TIER 3	B/D
CYCLOPHOSPH INJ 1GM/5ML	TIER 5	
CYCLOSERINE CAP 250MG	TIER 5	
CYCLOSPORINE CAP 100MG	TIER 4	B/D
CYCLOSPORINE CAP 100MG MD	TIER 4	B/D
CYCLOSPORINE CAP 25MG	TIER 4	B/D
CYCLOSPORINE CAP 25MG MOD	TIER 4	B/D
CYCLOSPORINE CAP 50MG MOD	TIER 4	B/D
CYCLOSPORINE INJ 50MG/ML	TIER 5	
CYCLOSPORINE SOL MODIFIED	TIER 4	B/D

Drug	Tier	Requirements/Limits
DABIGATRAN CAP 150MG	TIER 4	
DABIGATRAN CAP 75MG	TIER 4	
DANAZOL CAP 100MG	TIER 4	
DANAZOL CAP 200MG	TIER 4	
DANAZOL CAP 50MG	TIER 4	
DEFERASIROX TAB 125MG	TIER 3	PA
DEMECLOCYCL TAB 150MG	TIER 4	
DEMECLOCYCL TAB 300MG	TIER 4	
DESOXIMETAS CRE 0.05%	TIER 4	QL(15 GM per 30 days)
DEXMETHYLPH CAP 15MG ER	TIER 4	QL(30 EA per 30 days)
DEXMETHYLPH CAP 30MG ER	TIER 4	QL(30 EA per 30 days)
DEXMETHYLPH CAP 40MG ER	TIER 4	QL(30 EA per 30 days)
DEXMETHYLPH CAP 10MG ER	TIER 4	QL(30 EA per 30 days)
DEXMETHYLPH CAP 20MG ER	TIER 4	QL(30 EA per 30 days)
DEXMETHYLPH CAP 5MG ER	TIER 4	QL(30 EA per 30 days)
DEXMETHYLPH CAP ER 25MG	TIER 4	QL(30 EA per 30 days)
DEXMETHYLPH CAP ER 35MG	TIER 4	QL(30 EA per 30 days)
DEXTROAMPHET CAP 10MG ER	TIER 4	QL(180 EA per 30 days)
DEXTROAMPHET CAP 15MG ER	TIER 4	QL(180 EA per 30 days)
DEXTROAMPHET CAP 5MG ER	TIER 4	QL(180 EA per 30 days)
DEXTROAMPHET SOL 5MG/5ML	TIER 4	QL(1800 ML per 30 days)
DIAZEPAM GEL 10MG	TIER 4	
DIAZEPAM GEL 2.5MG	TIER 4	
DIAZEPAM GEL 20MG	TIER 4	
DIAZOXIDE SUS 50MG/ML	TIER 5	
DICLOFENAC GEL 3%	TIER 4	QL(100 GM per 30 days)
DICLOFENAC SOL 1.5%	TIER 4	PA
DIHYDROERGOT SPR 4MG/ML	TIER 5	QL(8 ML per 23 days)
DOCETAXEL INJ 160/8ML	TIER 5	
DOCETAXEL INJ 80MG/8ML	TIER 5	
DRONABINOL CAP 10MG	TIER 4	B/D
DRONABINOL CAP 2.5MG	TIER 4	B/D
DRONABINOL CAP 5MG	TIER 4	B/D
DROXIA CAP 200MG	TIER 3	
ELMIRON CAP 100MG	TIER 5	
EMGALITY INJ 100MG/ML	TIER 3	QL(3 ML per 30 days); PA
EMGALITY INJ 120MG/ML	TIER 3	QL(2 ML per 28 days); PA
EMTR/TEN DF TAB 100-150	TIER 5	
EMTRICITABIN CAP 200MG	TIER 4	
ENTRESTO TAB 24-26MG	TIER 3	QL(60 EA per 30 days)
ENTRESTO TAB 49-51MG	TIER 3	QL(60 EA per 30 days)
ENTRESTO TAB 97-103MG	TIER 3	QL(60 EA per 30 days)
EPOGEN INJ 20000/ML	TIER 4	PA

Drug	Tier	Requirements/Limits
EPOPROSTENOL INJ 0.5MG	TIER 5	PA
ERLOTINIB TAB 25MG	TIER 5	PA NSO
ERYTHROM ETH TAB 400MG	TIER 4	
ERYTHROMYCIN TAB 250MG	TIER 4	
ERYTHROMYCIN TAB 250MG BS	TIER 4	
ERYTHROMYCIN TAB 250MG EC	TIER 4	
ERYTHROMYCIN TAB 333MG EC	TIER 4	
ERYTHROMYCIN TAB 500MG	TIER 4	
ERYTHROMYCIN TAB 500MG BS	TIER 4	
ETONOGESTREL MIS ETHY EST	TIER 4	
ETRAVIRINE TAB 100MG	TIER 5	
EUTHYROX TAB 88MCG	TIER 2	
EVEROLIMUS TAB 0.25MG	TIER 5	B/D
FANAPT TAB 4MG	TIER 5	ST NSO
FENTANYL DIS 100MCG/H	TIER 4	QL(20 EA per 30 days)
FENTANYL DIS 12MCG/HR	TIER 4	QL(10 EA per 30 days)
FENTANYL DIS 37.5MCG	TIER 4	QL(10 EA per 30 days)
FENTANYL DIS 50MCG/HR	TIER 4	QL(10 EA per 30 days)
FENTANYL DIS 62.5MCG	TIER 4	QL(10 EA per 30 days)
FENTANYL DIS 75MCG/HR	TIER 4	QL(10 EA per 30 days)
FLOXURIDINE INJ 0.5GM	TIER 5	B/D
FLUDARABINE INJ 50MG	TIER 5	
FLUOCINONIDE CRE 0.1%	TIER 4	QL(30 GM per 30 days)
FLUOROURACIL CRE 0.5%	TIER 5	QL(30 GM per 30 days)
FLUVOXAMINE TAB 25MG	TIER 3	
GABLOFEN INJ 50MCG/ML	TIER 5	B/D
GENGRAF CAP 100MG	TIER 4	B/D
GENGRAF CAP 25MG	TIER 4	B/D
GENGRAF SOL 100MG/ML	TIER 4	B/D
HYDROCOD/IBU TAB 10-200MG	TIER 4	QL(150 EA per 30 days)
HYDROCOD/IBU TAB 5-200MG	TIER 4	QL(150 EA per 30 days)
HYPERHEP B INJ	TIER 5	B/D
ICOSAPENT CAP 0.5GM	TIER 4	
ICOSAPENT CAP 1GM	TIER 4	
IDARUBICIN INJ 10/10ML	TIER 5	
IDARUBICIN INJ 20/20ML	TIER 5	
IDARUBICIN INJ 5MG/5ML	TIER 5	
IMATINIB MES TAB 100MG	TIER 3	PA NSO
IMIPENEM/CIL INJ 500MG	TIER 3	
ISONIAZID SYP 50MG/5ML	Tier 4	
ISOSO/HYDRAL TAB 20-37.5	TIER 4	
IVERMECTIN CRE 1%	TIER 4	QL(45 GM per 30 days)
JYLAMVO SOL 2MG/ML	TIER 5	

Drug	Tier	Requirements/Limits
LACOSAMIDE INJ 200/20ML	TIER 5	
LACOSAMIDE INJ 200MG/20	TIER 5	
LAGEVRIO CAP 200MG	TIER 4	QL(40 EA per 5 days)
LAMOTRIG ODT KIT 25/50MG	TIER 4	
LAMOTRIG ODT KIT 50/100MG	TIER 4	
LAMOTRIGINE KIT ODT	TIER 4	
LAMOTRIGINE KIT START 35	TIER 4	
LAMOTRIGINE KIT START 49	TIER 4	
LAMOTRIGINE KIT START 98	TIER 4	
LEUCOVOR CA TAB 10MG	TIER 4	
LEUCOVOR CA TAB 15MG	TIER 4	
LEUCOVOR CA TAB 25MG	TIER 4	
LEUPROLIDE INJ 14 DAY	TIER 4	PA NSO
LEUPROLIDE INJ 1MG/0.2	TIER 4	PA NSO
LEUPROLIDE KIT 14 DAY	TIER 4	PA NSO
LEUPROLIDE KIT 1MG/0.2	TIER 4	PA NSO
LINEZOLID INJ 2MG/ML	TIER 4	
LINZESS CAP 145MCG	TIER 3	QL(30 EA per 30 days)
LINZESS CAP 290MCG	TIER 3	QL(30 EA per 30 days)
LINZESS CAP 72MCG	TIER 3	QL(30 EA per 30 days)
LIOTHYRONINE INJ 10MCG/ML	TIER 5	
LOTEPREDNOL SUS 0.5%	TIER 4	
LUBIPROSTONE CAP 24MCG	TIER 4	QL(60 EA per 30 days)
LUBIPROSTONE CAP 8MCG	TIER 4	QL(60 EA per 30 days)
LYBALVI TAB 10-10MG	TIER 5	QL(30 EA per 30 days); ST NSO
LYBALVI TAB 15-10MG	TIER 5	QL(30 EA per 30 days); ST NSO
LYBALVI TAB 20-10MG	TIER 5	QL(30 EA per 30 days); ST NSO
LYBALVI TAB 5-10MG	TIER 5	QL(30 EA per 30 days); ST NSO
LYLLANA DIS 0.025MG	TIER 4	
LYLLANA DIS 0.0375MG	TIER 4	
LYLLANA DIS 0.05MG	TIER 4	
LYLLANA DIS 0.075MG	TIER 4	
LYLLANA DIS 0.1MG	TIER 4	
MEGESTROL SUS 625/5ML	TIER 4	PA NSO
MEGESTROL SUS 625MG/5M	TIER 4	PA NSO
MEGESTROL AC SUS 400MG/10	TIER 4	PA NSO
MEGESTROL AC SUS 40MG/ML	TIER 4	PA NSO
MEGESTROL AC SUS 800MG/20	TIER 4	PA NSO
MEMANTINE SOL 2MG/ML	TIER 4	
MEMANTINE HC CAP 21MG ER	TIER 4	
MEMANTINE HC CAP 28MG ER	TIER 4	
MEMANTINE HC CAP 7MG ER	TIER 4	
MEMANTINE HC SOL 2MG/ML	TIER 4	

Drug	Tier	Requirements/Limits
MEPROBAMATE TAB 200MG	TIER 4	PA REMOVAL
MEPROBAMATE TAB 400MG	TIER 4	PA REMOVAL
MEROPENEM INJ 1GM	TIER 3	
MEROPENEM INJ 2GM	TIER 4	
MEROPENEM INJ 500MG	TIER 3	
MESALAMINE CAP 0.375GM	TIER 4	
MESALAMINE CAP 400MG DR	TIER 4	
MESALAMINE TAB 1.2GM	TIER 4	
MESALAMINE TAB 800MG DR	TIER 4	
METHAZOLAMID TAB 25MG	TIER 4	
METHAZOLAMID TAB 50MG	TIER 4	
METHYLPHENID CAP 10MG	TIER 4	QL(30 EA per 30 days)
METHYLPHENID CAP 20MG	TIER 4	QL(30 EA per 30 days)
METHYLPHENID CAP 30MG	TIER 4	QL(30 EA per 30 days)
METHYLPHENID CAP 40MG ER	TIER 4	QL(30 EA per 30 days)
METHYLPHENID CAP 50MG	TIER 4	QL(30 EA per 30 days)
METHYLPHENID CAP 60MG	TIER 4	QL(30 EA per 30 days)
METHYLPHENID CHW 10MG	TIER 4	QL(180 EA per 30 days)
METHYLPHENID CHW 2.5MG	TIER 4	QL(90 EA per 30 days)
METHYLPHENID CHW 5MG	TIER 4	QL(90 EA per 30 days)
METHYLPHENID TAB 72MG ER	TIER 4	QL(30 EA per 30 days)
MICAFUNGIN INJ 100MG	TIER 4	
MICAFUNGIN INJ 50MG	TIER 4	
MINOCYCLINE TAB 100MG	TIER 4	
MINOCYCLINE TAB 50MG	TIER 4	
MINOCYCLINE TAB 75MG	TIER 4	
NAFCILLIN INJ 10GM	TIER 4	
NAFCILLIN INJ 1GM	TIER 4	
NAFCILLIN INJ 2GM	TIER 4	
NAFTIFINE CRE HCL 1%	TIER 4	ST
NAFTIFINE CRE HCL 2%	TIER 4	ST
NAPROXEN SUS 125/5ML	TIER 5	
NATACYN SUS 5% OP	TIER 4	
NAYZILAM SPR 5MG	TIER 4	
NIACIN ER TAB 1000MG	TIER 4	
NIACIN ER TAB 500MG	TIER 4	
NIACIN ER TAB 500MG ER	TIER 4	
NIACIN ER TAB 750MG	TIER 4	
NICARDIPINE CAP 30MG	TIER 4	
NORETHINDRON TAB 0.35MG	TIER 1	
NP THYROID TAB 120MG	TIER 4	
NP THYROID TAB 15MG	TIER 4	
NP THYROID TAB 30MG	TIER 4	

Drug	Tier	Requirements/Limits
NP THYROID TAB 60MG	TIER 4	
NP THYROID TAB 90MG	TIER 4	
OCTREOTIDE INJ 1000MCG	TIER 5	PA
OCTREOTIDE INJ 5000/5ML	TIER 5	PA
OMEGA-3-ACID CAP 1GM	TIER 4	
OXCARBAZEPIN SUS 300/5ML	TIER 4	
OXCARBAZEPIN SUS 300MG/5M	TIER 4	
OXCARBAZEPIN TAB 150MG	TIER 3	
OXCARBAZEPIN TAB 300MG	TIER 3	
OXCARBAZEPIN TAB 600MG	TIER 3	
OXYMORPHONE TAB 10MG ER	TIER 4	QL(60 EA per 30 days)
OXYMORPHONE TAB 15MG ER	TIER 4	QL(60 EA per 30 days)
OXYMORPHONE TAB 20MG ER	TIER 4	QL(60 EA per 30 days)
OXYMORPHONE TAB 30MG ER	TIER 4	QL(120 EA per 30 days)
OXYMORPHONE TAB 40MG ER	TIER 4	QL(120 EA per 30 days)
OXYMORPHONE TAB 5MG ER	TIER 4	QL(60 EA per 30 days)
OXYMORPHONE TAB 7.5MG ER	TIER 4	QL(60 EA per 30 days)
PANCREAZE CAP 37000	TIER 5	
PARICALCITOL CAP 4 MCG	TIER 4	
PEMETREXED INJ 100MG	TIER 5	PA
PEMETREXED SOL 850/34ML	TIER 5	PA NSO
PIMECROLIMUS CRE 1%	TIER 4	
PRAZIQUANTEL TAB 600MG	TIER 4	
PREZISTA TAB 150MG	TIER 5	
PROCRIT INJ 10000/ML	TIER 4	PA
PROMETHEGAN SUP 12.5MG	TIER 2	PA
PROTRIPTYLIN TAB 10MG	TIER 4	
PROTRIPTYLIN TAB 5MG	TIER 4	
PYRAZINAMIDE TAB 500MG	TIER 4	
QUINIDINE SU TAB 200MG	TIER 2	
QUINIDINE SU TAB 300MG	TIER 2	
RIFABUTIN CAP 150MG	TIER 4	
RISPERDAL INJ 25MG	TIER 4	ST NSO
RISPERIDONE INJ 25MG ER	TIER 4	
ROFLUMILAST TAB 250MCG	TIER 4	ST
ROFLUMILAST TAB 500MCG	TIER 4	ST
RUFINAMIDE TAB 200MG	TIER 4	
SAVELLA MIS TITR PAK	TIER 3	PA NSO
SAVELLA TAB 100MG	TIER 3	PA NSO
SAVELLA TAB 12.5MG	TIER 3	PA NSO
SAVELLA TAB 25MG	TIER 3	PA NSO
SAVELLA TAB 50MG	TIER 3	PA NSO
SIROLIMUS SOL 1MG/ML	TIER 5	B/D

Drug	Tier	Requirements/Limits
SIROLIMUS TAB 0.5MG	TIER 4	B/D
SIROLIMUS TAB 1MG	TIER 4	B/D
SIROLIMUS TAB 2MG	TIER 4	B/D
STREPTOMYCIN INJ 1GM	TIER 5	
SUBVENITE KIT START 35	TIER 4	
SUBVENITE KIT START 49	TIER 4	
SUBVENITE KIT START 98	TIER 4	
SULFADIAZINE TAB 500MG	TIER 4	
SULFASALAZIN TAB 500MG DR	TIER 2	
SUMATRIPTAN INJ 4MG/0.5	TIER 4	QL(4 ML per 30 days)
SUMATRIPTAN INJ 6MG/0.5	TIER 4	QL(4 ML per 30 days)
SYMPAZAN MIS 5MG	TIER 5	
TABLOID TAB 40MG	TIER 5	PA NSO
TACROLIMUS OIN 0.1%	TIER 2	QL(30 GM per 30 days)
TADALAFIL TAB 2.5MG	TIER 4	QL(30 EA per 30 days); PA
TADALAFIL TAB 5MG	TIER 4	QL(30 EA per 30 days); PA
TERIFLUNOMID TAB 14MG	TIER 5	
TERIFLUNOMID TAB 7MG	TIER 5	
TESTOSTERONE GEL 1%(25MG)	TIER 4	PA
TESTOSTERONE GEL 1%(50MG)	TIER 4	PA
TESTOSTERONE GEL 1.62%	TIER 4	PA
TESTOSTERONE GEL PUMP 1%	TIER 4	PA
TETRABENAZIN TAB 25MG	TIER 5	PA
THIOTHIXENE CAP 10MG	TIER 4	
THIOTHIXENE CAP 1MG	TIER 4	
THIOTHIXENE CAP 2MG	TIER 4	
THIOTHIXENE CAP 5MG	TIER 4	
TIAGABINE TAB 12MG	TIER 4	
TIAGABINE TAB 16MG	TIER 4	
TIAGABINE TAB 2MG	TIER 4	
TIAGABINE TAB 4MG	TIER 4	
TIGECYCLINE INJ 50MG	TIER 5	
TIMOLOL GEL SOL 0.5% OP	TIER 4	
TINIDAZOLE TAB 250MG	TIER 4	
TINIDAZOLE TAB 500MG	TIER 4	
TIOTROP BROM CAP 18MCG	TIER 4	
TIVICAY PD TAB 5MG	TIER 5	
TOBRAMYCIN INJ 10MG/ML	TIER 4	
TOBRAMYCIN INJ 80MG/2ML	TIER 4	
TOPIRAMATE CAP 200MG	TIER 4	
TOPIRAMATE CAP ER 150MG	TIER 4	
TOPIRAMATE CAP ER 200MG	TIER 4	
TRAMADOL HCL CAP ER 100MG	TIER 4	QL(60 EA per 30 days); ST

Drug	Tier	Requirements/Limits
TRAMADOL HCL CAP ER 200MG	TIER 4	QL(60 EA per 30 days); ST
TRAMADOL HCL CAP ER 300MG	TIER 4	QL(60 EA per 30 days); ST
TRAMADOL HCL TAB 100MG ER	TIER 4	QL(30 EA per 30 days); ST
TRAMADOL HCL TAB 200MG ER	TIER 4	QL(30 EA per 30 days); ST
TRAMADOL HCL TAB 300MG ER	TIER 4	QL(30 EA per 30 days); ST
TRANLYCYPROM TAB 10MG	TIER 4	
TRETINOIN CRE 0.05%	TIER 4	PA
TRETINOIN CRE 0.1%	TIER 4	PA
TRETINOIN GEL 0.01%	TIER 4	PA
TRETINOIN GEL 0.025%	TIER 4	PA
TRIAMTERENE CAP 100MG	TIER 4	
TRIAMTERENE CAP 50MG	TIER 4	
TRIMIPRAMINE CAP 100MG	TIER 4	
TRIMIPRAMINE CAP 25MG	TIER 4	
TRIMIPRAMINE CAP 50MG	TIER 4	
TRIUMEQ PD TAB	TIER 4	
URSODIOL CAP 300MG	TIER 4	
URSODIOL TAB 250MG	TIER 3	
URSODIOL TAB 500MG	TIER 3	
VEOZAH TAB 45MG	TIER 4	QL(30 EA per 30 days); PA
VERAPAMIL CAP 100MG ER	TIER 2	
VERAPAMIL CAP 120MG ER	TIER 4	
VERAPAMIL CAP 120MG SR	TIER 4	
VERAPAMIL CAP 180MG ER	TIER 4	
VERAPAMIL CAP 180MG SR	TIER 4	
VERAPAMIL CAP 200MG ER	TIER 2	
VERAPAMIL CAP 240MG ER	TIER 4	
VERAPAMIL CAP 240MG SR	TIER 4	
VERAPAMIL CAP 300MG ER	TIER 2	
VERAPAMIL CAP 360MG SR	TIER 2	
VOWST CAP	TIER 5	PA
WINRHO SDF INJ 15000UNT	TIER 5	
WINRHO SDF INJ 1500UNIT	TIER 5	
XCOPRI TAB 100MG	TIER 5	
XCOPRI TAB 150MG	TIER 5	
XCOPRI TAB 50MG	TIER 5	
XEOMIN INJ 200UNIT	TIER 5	PA
XOFLUZA TAB 40MG	TIER 4	QL Removal
XOFLUZA TAB 80MG	TIER 4	QL Removal
ZAFEMY DIS 150/35	TIER 4	

HMO and HMO-POS Deletions

Drug Name	
ACYCLOVIR	CRE 5%
ADAPALENE	CRE 0.1%
ADAPALENE	GEL 0.3%
ADAPALENE	GEL PMP 0.3%
AEMCOLO	TAB 194MG
ALENDRONATE	SOL 70/75ML
ALOSETRON	TAB 0.5MG
AMETHIA	TAB
AMIODARONE	TAB 400MG
AMOXICILLIN/CLAVULANATE POTASSIUM TABS	200MG/ 28.5MG
APO-VARENICL	TAB 0.5MG
APO-VARENICL	TAB 1MG
APRETUDE	SUS 600MG ER
AVITA	CRE 0.025%
AVITA	GEL 0.025%
BACITRACIN	INJ 50000UNT
BAFIERTAM	CAP 95MG
BAXDELA	INJ 300MG
BELBUCA	MIS 150MCG
BELBUCA	MIS 300MCG
BELBUCA	MIS 450MCG
BELBUCA	MIS 600MCG
BELBUCA	MIS 750MCG
BELBUCA	MIS 75MCG
BELBUCA	MIS 900MCG
BICNU	INJ 100MG
BRINZOLAMIDE	SUS 1%
BRINZOLAMIDE	SUS 1% OP
BROMSITE	DRO 0.075%
BUDESONIDE	TAB ER 9MG
CALC ACETATE	CAP 667MG
CAMZYOS	CAP 10MG
CAMZYOS	CAP 15MG
CAMZYOS	CAP 2.5MG
CAMZYOS	CAP 5MG
CDP/AMITRIP	TAB 10-25MG
CDP/AMITRIP	TAB 5-12.5MG
CEFACLOR	SUS 125/5ML
CEFACLOR	SUS 375/5ML
CEFTAZIDIME/	SOL D5W 1GM

Drug Name

CEFTAZIDIME/ SOL D5W 2GM

CHENODAL TAB 250MG

CIMETIDINE SOL 300/5ML

CIPRO/DEXA SUS 0.3-0.1%

CIPROFLOXACN INJ 400MG

CIPROFLOXACN SOL 0.2%

CIPROFLOXACN TAB 100MG

CLEOCIN SUP 100MG

CLINDAMYCIN AER 1%

CLINDAMYCIN INJ 300/2ML

CLONIDINE DIS 0.2/24HR

CLONIDINE DIS 0.3/24HR

COLESTIPOL GRA 5GM

CORDRAN 80X3 TAP 4MCG/CM

CORTIFOAM AER 90MG

CROTAN LOT 10%

CYCLOBENZAPR TAB 7.5MG

CYCLOPENTOL SOL 2% OP

CYCLOSET TAB 0.8MG

DALVANCE SOL 500MG

DANTROLENE CAP 50MG

DEXLANSOPRAZ CAP 30MG

DEXLANSOPRAZ CAP 30MG DR

DEXLANSOPRAZ CAP 60MG DR

DICLO/MISOPR TAB 50-0.2MG

DICLOFEN POT TAB 50MG

DIFLUNISAL TAB 500MG

DIGITEK TAB 0.125MG

DIGITEK TAB 0.25MG

DILANTIN CAP 100MG

DILTIAZEM CAP 60MG ER

DIPENTUM CAP 250MG

DONEPEZIL TAB 23MG

DOXYCYC MONO CAP 150MG

DOXYCYCL HYC TAB 150MG DR

DOXYCYCL HYC TAB 75MG DR

DRIZALMA CAP 20MG DR

DRIZALMA CAP 30MG DR

DRIZALMA CAP 40MG DR

DULOXETINE CAP 40MG

EC-NAPROXEN TAB 375MG

EC-NAPROXEN TAB 500MG

ELLA TAB 30MG

Drug Name

EPINASTINE DRO 0.05%
EPIVIR HBV SOL 5MG/ML
EQUETRO CAP 100MG
EQUETRO CAP 200MG
EQUETRO CAP 300MG
ERAXIS INJ 100MG
ERAXIS INJ 50MG
ESTAZOLAM TAB 1MG
ESTAZOLAM TAB 2MG
ETHACRYNIC TAB ACD 25MG
ETODOLAC CAP 200MG
ETODOLAC CAP 300MG
ETODOLAC TAB 400MG
ETODOLAC TAB 500MG
FAMOTIDINE SUS 40MG/5ML
FEBUXOSTAT TAB 40MG
FEMYNOR TAB 0.25-35
FENOFIBRATE CAP 150MG
FENOFIBRATE CAP 50MG
FENOFIBRATE TAB 40MG
FINACEA AER 15%
FLOVENT DISK AER 100MCG
FLOVENT DISK AER 250MCG
FLOVENT DISK AER 50MCG
FLOVENT HFA AER 110MCG
FLOVENT HFA AER 220MCG
FLOVENT HFA AER 44MCG
FLUORITAB DRO 0.125MG
FLUOROMETHOL SUS 0.1% OP
FLURANDRENOL CRE 0.05%
FLURANDRENOL LOT 0.05%
FLUTAMIDE CAP 125MG
FLUVASTATIN TAB 80MG ER
GAMMAKED INJ 1GM/10ML
GAMUNEX-C INJ 1GM/10ML
GENTAK OIN 0.3% OP
Gleevec
GRASTEK SUB 2800BAU
HALOETTE MIS
HC/ACET ACID SOL OTIC
HEPARIN SOD INJ 1000/ML
HEPARIN SOD INJ 2000/2ML
HUMIRA INJ 10/0.1ML

Drug Name

HUMIRA	INJ 20/0.2ML
HUMIRA	INJ 40/0.4ML
HUMIRA	KIT 40MG/0.8
HUMIRA PEDIA	INJ CROHNS
HUMIRA PEN	INJ 40/0.4ML
HUMIRA PEN	INJ 40MG/0.8
HUMIRA PEN	INJ 80/0.8ML
HUMIRA PEN	INJ CD/UC/HS
HUMIRA PEN	INJ PS/UV
HUMIRA PEN	KIT CD/UC/HS
HUMIRA PEN	KIT PED UC
HUMIRA PEN	KIT PS/UV
HYDROCORTISO	LOT 0.1%
HYDROXY CAPR	INJ 1.25/5ML
IBU/FAMOT	TAB 800-26.6
ILEVRO	DRO 0.3% OP
IMBRUVICA	TAB 140MG
IMBRUVICA	TAB 280MG
IMBRUVICA	TAB 560MG
IMIPRAM PAM	CAP 100MG
IMIPRAM PAM	CAP 125MG
IMIQUIMOD	CRE 3.75%
IMIQUIMOD	CRE 3.75%PMP
INFUGEM	SOL 1200MG
INFUGEM	SOL 1300MG
INFUGEM	SOL 1400MG
INFUGEM	SOL 1500MG
INFUGEM	SOL 1600MG
INFUGEM	SOL 1700MG
INFUGEM	SOL 1800MG
INFUGEM	SOL 1900MG
INFUGEM	SOL 2000MG
INFUGEM	SOL 2200MG
ISOSORB DIN	TAB 40MG
ISTURISA	TAB 10MG
ITRACONAZOLE	SOL 100/10ML
ITRACONAZOLE	SOL 10MG/ML
KAZANO 12.5-	TAB 1000MG
KAZANO 12.5-	TAB 500MG
KEPIVANCE	INJ 6.25MG
KETOROLAC	SOL 0.4%
KLOR-CON	PAK 20MEQ
KORLYM	TAB 300MG

Drug Name

KRINTAFEL TAB 150MG
KRISTALOSE PAK 20GM
LANTHANUM CHW 500MG
LANTHANUM CHW 750MG
LEUKINE INJ 250MCG
LEVALBUTEROL NEB 0.31MG
LEVALBUTEROL NEB 1.25MG
LEVEMIR INJ
LEVEMIR INJ FLEXPEN
LEVEMIR INJ FLEXTOUC
LIDOCAINE GEL 2% JELLY
LONHALA MAGN SOL 25MCG
LUMOXITI SOL 1MG
MAFENIDE ACE PAK 5%
MATZIM LA TAB 180MG/24
MATZIM LA TAB 240MG/24
MATZIM LA TAB 300MG/24
MATZIM LA TAB 360MG/24
MATZIM LA TAB 420MG/24
MECLIZINE TAB 25MG
MENTAX CRE 1%
MINOCYCLINE TAB 135MG ER
MINOCYCLINE TAB 45MG ER
MINOCYCLINE TAB 90MG ER
MYALEPT INJ 11.3MG
MYORISAN CAP 10MG
MYORISAN CAP 20MG
MYORISAN CAP 30MG
MYORISAN CAP 40MG
NAFRINSE CHW 1MG F
NAFTIFINE GEL 2%
NAPROXEN DR TAB 375MG
NAPROXEN DR TAB 500MG
NAPROXEN SOD TAB 275MG
NARATRIPTAN TAB 1MG
NARATRIPTAN TAB 2.5MG
NARCAN SPR 4MG
NEMBUTAL SOD INJ 50MG/ML
NEUPRO DIS 1MG/24HR
NEUPRO DIS 2MG/24HR
NEUPRO DIS 3MG/24HR
NEUPRO DIS 4MG/24HR
NEUPRO DIS 6MG/24HR

Drug Name

NEUPRO DIS 8MG/24HR
NEVIRAPINE TAB 100MG
NEXLETOL TAB 180MG
NEXLIZET TAB 180/10MG
NICOTROL NS SPR 10MG/ML
NITRO-DUR DIS 0.3MG/HR
NITRO-DUR DIS 0.8MG/HR
NORVIR SOL 80MG/ML
NUCALA INJ 100MG/ML
NUCYNTA ER TAB 100MG
NUCYNTA ER TAB 150MG
NUCYNTA ER TAB 200MG
NUCYNTA ER TAB 250MG
NUCYNTA ER TAB 50MG
NYMALIZE SOL
OMNIPOD PDM KIT CLASSIC
ORALAIR SUB 300 IR
ORALAIR ADLT SUB 300 IR
ORTIKOS CAP 6MG ER
ORTIKOS CAP 9MG ER
OSMOPREP TAB 1.5GM
OXTELLAR XR TAB 150MG
OXTELLAR XR TAB 300MG
OXTELLAR XR TAB 600MG
OXYCONTIN TAB 10MG ER
OXYCONTIN TAB 15MG ER
OXYCONTIN TAB 20MG ER
OXYCONTIN TAB 30MG ER
OXYCONTIN TAB 40MG ER
OXYCONTIN TAB 60MG ER
OXYCONTIN TAB 80MG ER
OZEMPIC INJ 2/1.5ML
PANZYGA SOL 10/100ML
PANZYGA SOL 1GM/10ML
PANZYGA SOL 2.5/25ML
PANZYGA SOL 20/200ML
PANZYGA SOL 30/300ML
PANZYGA SOL 5GM/50ML
PARAPLATIN INJ 450/45ML
PARAPLATIN INJ 600/60ML
PAROXETINE CAP 7.5MG
PEN G PROC INJ 600000
PENICILLAMIN CAP 250MG

Drug Name

PEXEVA	TAB 10MG
PEXEVA	TAB 20MG
PEXEVA	TAB 30MG
PHOSLYRA	SOL
PLASMA-LYTE	INJ -148
PLASMA-LYTE	INJ -A
PLIAGLIS	CRE 7-7%
POT CHLORIDE	POW 20MEQ
POT CHLORIDE	SOL 20%
PRADAXA	CAP 110MG
PRADAXA	PAK 110MG
PRADAXA	PAK 150MG
PRADAXA	PAK 20MG
PRADAXA	PAK 30MG
PRADAXA	PAK 40MG
PRADAXA	PAK 50MG
PRAMIPEXOLE	TAB 0.75 ER
PRAMIPEXOLE	TAB 1.5MG ER
PRAMIPEXOLE	TAB 2.25 ER
PRAMIPEXOLE	TAB 3.75 ER
PRAMIPEXOLE	TAB 3MG ER
PRAMIPEXOLE	TAB 4.5MG ER
PREDNICARBAT	OIN 0.1%
PREDNISONE	CON 5MG/ML
PREDNISONE	SOL 5MG/5ML
RELISTOR	TAB 150MG
REVLIMID	CAP 10MG
REVLIMID	CAP 15MG
REVLIMID	CAP 2.5MG
REVLIMID	CAP 20MG
REVLIMID	CAP 25MG
REVLIMID	CAP 5MG
ROSDAN	CRE 0.75%
ROSDAN	GEL 0.75%
SEVELAM CARB	POW 0.8GM
SIKLOS	TAB 1000MG
SIKLOS	TAB 100MG
SILDENAFIL	SUS 10MG/ML
SILODOSIN	CAP 8MG
SIVEXTRO	TAB 200MG
SORINE	TAB 240MG
SPIRIVA	CAP HANDIHLR
STAVUDINE	CAP 15MG

Drug Name

STAVUDINE	CAP 20MG
STAVUDINE	CAP 30MG
STAVUDINE	CAP 40MG
STRIVERDI	AER 2.5MCG
SUCRALFATE	SUS 1GM/10ML
SUPREP BOWEL SOL	PREP KIT
SYNRIBO	INJ 3.5MG
TAZORAC	CRE 0.05%
THEO-24	CAP 100MG CR
THEO-24	CAP 200MG CR
THEO-24	CAP 300MG CR
THEO-24	CAP 400MG ER
TIROSINT	CAP 100MCG
TIROSINT	CAP 112MCG
TIROSINT	CAP 125MCG
TIROSINT	CAP 137MCG
TIROSINT	CAP 13MCG
TIROSINT	CAP 150MCG
TIROSINT	CAP 175MCG
TIROSINT	CAP 200
TIROSINT	CAP 25MCG
TIROSINT	CAP 37.5MCG
TIROSINT	CAP 44MCG
TIROSINT	CAP 50MCG
TIROSINT	CAP 62.5MCG
TIROSINT	CAP 75MCG
TIROSINT	CAP 88MCG
TOLTERODINE	CAP 4MG ER
TOPOSAR	INJ 100/5ML
TOPOSAR	INJ 1GM/50ML
TOPOSAR	INJ 500/25ML
TOVET	AER 0.05%
TRETINOIN	GEL 0.04%
TRETINOIN	GEL 0.04%PMP
TRETINOIN	GEL 0.1%
TRETINOIN	GEL 0.1%PUMP
TRIKAFTA	TAB
TROSPIUM CHL	CAP 60MG ER
TRUSELTIQ	CAP 100MG
TRUSELTIQ	CAP 125MG
TRUSELTIQ	CAP 50MG
TRUSELTIQ	CAP 75MG
TURALIO	CAP 200MG

Drug Name	
VASCEPA	CAP 0.5GM
VEREGEN	OIN 15%
VIIBRYD	KIT STARTER
VINCASAR PFS	INJ 1MG/ML
VOTRIENT	TAB 200MG
XELPROS	EMU 0.005%
XYREM	SOL 500MG/ML
ZELAPAR	TAB 1.25MG
ZERBAXA	INJ 1.5GM
ZOLMITRIPTAN	TAB 5MG ODT

- + This prescription may be available only at certain pharmacies. For more information, consult your Pharmacy Directory or call Member Services at the number on your member ID card.
- ^ We provide coverage of this prescription drug in the coverage gap. Please refer to our Evidence of Coverage for more information.
- * This prescription drug will be provided at zero cost-sharing the first time you fill it.

PA This means the drug needs **Prior Authorization** from your plan before a prescription can be filled.

ST This means the drug is subject to **Step Therapy** requirements.

QL This means the drug has a **Quantity Limit** per prescription.