

## First Medicare Direct

# 2025 Formulary

## (List of Covered Drugs or “Drug List”)

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

This formulary was updated on 4/1/2025, Version 13. For more recent information or other questions, please contact First Medicare Direct Member Services at (877) 210-9167 (TTY user should call 711), 8 a.m. to 8 p.m., local time, 7 days a week. From April 1 – September 30 voicemail will be used on weekends and holidays, or visit [FirstMedicare.com](http://FirstMedicare.com).

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

When this document says “we,” “us,” or “our,” it means First CarolinaCare Insurance Company. When it says “plan” or “our plan,” it means First Medicare Direct.

This document includes a Drug List (formulary) for our plan which is current as of 4/1/2025. For an updated Drug List (formulary), please contact us. Our contact information, along with the date we last updated the Drug List (formulary), appears on the front and back cover pages.

You must generally use network pharmacies to use your prescription drug benefit. Benefits, formulary, pharmacy network and/or copayments/coinsurance may change on January 1, 2025, and from time to time during the year.

**ATTENTION:** If you speak Spanish, language assistance services, free of charge, are available to you. Call (877) 210-9167 (TTY: 711).

**ATENCIÓN:** Si habla Español, servicios de asistencia lingüística, de forma gratuita, están disponibles para usted. Llame (877) 210-9167 (TTY: 711).

## **What is the FirstMedicare Direct formulary?**

In this document, we use the terms Drug List and formulary to mean the same thing. A formulary is a list of covered drugs selected by FirstMedicare Direct in consultation with a team of health care providers, which represents the prescription therapies believed to be a necessary part of a quality treatment program. FirstMedicare Direct will generally cover the drugs listed in our formulary as long as the drug is medically necessary, the prescription is filled at a FirstMedicare Direct network pharmacy, and other plan rules are followed. For more information on how to fill your prescriptions, please review your Evidence of Coverage.

## **Can the formulary change?**

Most changes in drug coverage happen on January 1, but we may add or remove drugs on the formulary during the year, move them to different cost-sharing tiers, or add new restrictions. We must follow Medicare rules in making these changes. Updates to the formulary are posted monthly to our website here: [www.firstcarolinacare.com/medicare/pharmacy](http://www.firstcarolinacare.com/medicare/pharmacy).

### **Changes that can affect you this year:**

In the below cases, you will be affected by coverage changes during the year:

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In the below cases, you will be affected by coverage changes during the year:

- **Drugs removed from the market.** If a drug is withdrawn from sale by the manufacturer or the Food and Drug Administration (FDA) determines to be withdrawn for safety or effectiveness reasons, we may immediately remove the drug from our formulary and later provide notice to members who take the drug.
- **Other changes.** We may make other changes that affect members currently taking a drug. For instance, we may add a new generic drug to replace a brand-name drug currently on the formulary, or add a new biosimilar to replace an original biological product currently on the formulary, or add new restrictions or move a drug we are keeping on the formulary to a higher cost-sharing tier or both after we add a corresponding drug. We may make changes based on new clinical guidelines. If we remove drugs from our formulary, add prior authorization, quantity limits and/or step therapy restrictions on a drug, or move a drug to a higher cost-sharing tier, we must notify affected members of the change at least 30 days before the change becomes effective. Alternatively, when a member requests a refill of the drug, they may receive a 30 day supply of the drug and notice of the change.

If we make these other changes, you or your prescriber can ask us to make an exception for you and continue to cover the drug you have been taking. The notice we provide you will also include information on how to request an exception, and you can also find information in the section below entitled “How do I request an exception to the FirstMedicare Direct’s Formulary?”

### **Changes that will not affect you if you are currently taking the drug.**

Generally, if you are taking a drug on our 2025 formulary that was covered at the beginning of the year, we will not discontinue or reduce coverage of the drug during the 2025 coverage year except as described above. This means these drugs will remain available at the same cost sharing and with no new restrictions for those members taking them for the remainder of the coverage year. You will not get direct notice this year about changes that do not affect you. However, on January 1 of the next year, such changes would affect you, and it is important to check the formulary for the new benefit year for any changes to drugs.

The enclosed formulary is current as of 4/1/2025, Version 13. To get updated information about the drugs covered by FirstMedicare Direct, please contact us. Our contact information appears on the front and back cover pages. If there are negative changes made to the printed drug list within the covered year, you may be notified by mail identifying the changes. Drug lists located on our website are reviewed and updated on a monthly basis.

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

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

### **Medical Condition**

The formulary begins on page 1. The drugs in this formulary are grouped into categories depending on the type of medical conditions that they are used to treat. For example, drugs used to treat a heart condition are listed under the category, “Cardiovascular Agents.” If you know what your drug is used for, look for the category name in the list that begins on page 1. Then look under the category name for your drug.

### **Alphabetical Listing**

If you are not sure what category to look under, you should look for your drug in the Index that begins on page 73. The Index provides an alphabetical list of all of the drugs included in this document. Both brand name drugs and generic drugs are listed in the Index. Look in the Index and find your drug. Next to your drug, you will see the page number where you can find coverage information. Turn to the page listed in the Index and find the name of your drug in the first column of the list.

## **What are generic drugs?**

FirstMedicare Direct covers both brand name drugs and generic drugs. A generic drug is approved by the FDA as having the same active ingredient as the brand name drug. Generally, generic drugs work just as well as and usually cost less than brand name drugs. There are generic drug substitutes available for many brand name drugs. Generic drugs usually can be substituted for the brand name drug at the pharmacy without needing a new prescription, depending on state laws.

## **What are original biological products and how are they related to biosimilars?**

On the formulary, when we refer to drugs, this could mean a drug or a biological product. Biological products are drugs that are more complex than typical drugs. Since biological products are more complex than typical drugs, instead of having a generic form, they have alternatives that are called biosimilars. Generally, biosimilars work just as well as the original biological product and may cost less. There are biosimilar alternatives for some original biological products. Some biosimilars are interchangeable biosimilars and, depending on state laws, may be substituted for the original biological product at the pharmacy without needing a new prescription, just like generic drugs can be substituted for brand name drugs.

- For discussion of drug types, please see the Evidence of Coverage, Chapter 5, Section 3.1, “The ‘Drug List’ tells which Part D drugs are covered.

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

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

- **Prior Authorization:** FirstMedicare Direct requires you or your prescriber to get prior authorization for certain drugs. This means that you will need to get approval from FirstMedicare Direct before FirstMedicare Direct will cover your prescriptions. If you don’t get approval, FirstMedicare Direct may not cover the drug.
- **Quantity Limits:** For certain drugs, FirstMedicare Direct limits the amount of the drug that FirstMedicare Direct will cover. For example, FirstMedicare Direct provides 18 tablets per prescription for naratriptan hcl. This may be in addition to a standard one-month or three-month supply.

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

You can find out if your drug has any additional requirements or limits by looking in the formulary that begins on page 1. You can also get more information about the restrictions applied to specific covered drugs by visiting our website. We have posted documents that explain our prior authorization and step therapy restrictions. You may also ask us to send you a copy. Our contact information, along with the date we last updated the formulary, appears on the front and back cover pages.

You can ask FirstMedicare Direct to make an exception to these restrictions or limits or for a list of other, similar drugs that may treat your health condition. See the section, “How do I request an exception to FirstMedicare Direct’s formulary?” on page iii for information about how to request an exception.

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

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

If you learn that FirstMedicare Direct does not cover your drug, you have two options:

- You can ask Member Services for a list of similar drugs that are covered by FirstMedicare Direct. When you receive the list, show it to your doctor and ask them to prescribe a similar drug that is covered by FirstMedicare Direct.
- You can ask FirstMedicare Direct to make an exception and cover your drug. See below for information about how to request an exception.

## How do I request an exception to FirstMedicare Direct's formulary?

You can ask FirstMedicare Direct to make an exception to our coverage rules. There are several types of exceptions that you can ask us to make.

- You can ask us to cover a drug even if it is not on our formulary. If approved, this drug will be covered at a pre-determined cost-sharing level, and you would not be able to ask us to provide the drug at a lower cost-sharing level.
- You can ask us to waive a coverage restriction including prior authorization, step therapy, or a quantity limit on your drug. For example, for certain drugs, FirstMedicare Direct limits the amount of the drug that we will cover. If your drug has a quantity limit, you can ask us to waive the limit and cover a greater amount.
- You can ask us to cover a formulary drug at a lower cost-sharing level, unless the drug is on the specialty tier. If approved, this would lower the amount you must pay for your drug.

Generally, FirstMedicare Direct will only approve your request for an exception if the alternative drugs included on the plan's formulary, the lower cost-sharing drug, or applying the restriction would not be as effective for you and/or would cause you to have adverse effects.

You or your prescriber should contact us for a tiering or formulary exception, including an exception to a coverage restriction. **When you request an exception your prescriber will need to explain the medical reasons why you need the exception.** Generally, we must make our decision within 72 hours of getting your prescriber's supporting statement. You can ask for an expedited (fast) decision if you believe, and we agree, that your health could be seriously harmed by waiting up to 72 hours for a decision. If we agree, or if your prescriber asks for a fast decision, we must give you a decision no later than 24 hours after we get your prescriber's supporting statement.

## What can I do if my drug is not on the formulary or has a restriction?

As a new or continuing member in our plan you may be taking drugs that are not on our formulary. Or, you may be taking a drug that is on our formulary but has a coverage restriction, such as prior authorization. You should talk to your prescriber about requesting a coverage decision to show that you meet the criteria for approval, switching to an alternative drug that we cover, or requesting a formulary exception so that we will cover the drug you take. While you and your doctor determine the right course of action for you, we may cover your drug in certain cases during the first 90 days you are a member of our plan.

For each of your drugs that is not on our formulary or has a coverage restriction, we will cover a temporary 30-day supply. If your prescription is written for fewer days, we'll allow refills to provide up to a maximum 30-day supply of medication. If coverage is not approved after your first 30-day supply, we will not pay for these drugs, even if you have been a member of the plan less than 90 days.

If you are a resident of a long-term care facility, and you need a drug that is not on our formulary or if your ability to get your drugs is limited, but you are past the first 90 days of membership in our plan, we will cover a 31-day emergency supply of that drug while you pursue a formulary exception.

FirstMedicare Direct provides transition fills for members who have a level-of-care change from one treatment setting to another. Please visit our website at [FirstMedicare.com](http://FirstMedicare.com) for further details.

### For more information

For more detailed information about your FirstMedicare Direct prescription drug coverage, please review your Evidence of Coverage and other plan materials.

If you have questions about FirstMedicare Direct, please contact us. Our contact information, along with the date we last updated the formulary, appears on the front and back cover pages.

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

### FirstMedicare Direct Formulary

The formulary below provides coverage information about the drugs covered by FirstMedicare Direct. If you have trouble finding your drug in the list, turn to the Index which begins on page 73.

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

The information in the Requirements/Limits column tells you if FirstMedicare Direct has any special requirements for coverage of your drug.

Drug Name	Drug Tier	Requirements/Limits
<b>Ophthalmic Agents</b>		
<b>Ophthalmic Agents</b>		
CYSTARAN	5	PA, QL: 60 ML per 28 days

**B/D** This prescription drug has a Part B versus D administrative prior authorization requirement. This drug may be covered under Medicare Part B or D depending upon the circumstances. Information may need to be submitted describing the use and setting of the drug to make the determination.

**EA** Each.

**PA** Prior Authorization. FirstMedicare Direct requires you or your physician to get prior authorization for certain drugs. This means that you will need to get approval from FirstMedicare Direct before your prescription will be covered by FirstMedicare Direct. If you don't get approval, FirstMedicare Direct may not cover the drug.

- PANSO** Prior Authorization for New Starts Only
- QL** Quantity Limit. For certain drugs, FirstMedicare Direct limits the amount of the drug that FirstMedicare Direct will cover. For example, FirstMedicare Direct provides 18 tablets per prescription for naratriptan hcl. This may be in addition to a standard one-month or three- month supply.
- ST** Step Therapy. In some cases, FirstMedicare Direct requires you to first try certain drugs to treat your medical condition before we will cover another drug for that condition. For example, if Drug A and Drug B both treat your medical condition, FirstMedicare Direct may not cover Drug B unless you try Drug A first. If Drug A does not work for you, FirstMedicare Direct will then cover Drug B.
- ST NSO** Step Therapy for New Starts Only.

Drug Name	Drug Tier	Requirements/Limits
<b>Analgesics</b>		
<b>Nonsteroidal Anti-inflammatory Drugs</b>		
<i>celecoxib caps</i>	2	
<i>diclofenac sodium dr</i>	1	
<i>diclofenac sodium er</i>	1	
<i>diclofenac sodium/misoprostol tbec 75mg; 200mcg</i>	2	
<i>diclofenac sodium gel 1%</i>	2	
<i>diclofenac sodium external soln 1.5%</i>	4	PA
<i>etodolac er</i>	2	
<i>fenoprofen calcium caps 400mg</i>	1	
<i>fenoprofen calcium tabs</i>	1	
<i>flurbiprofen tabs</i>	1	
<i>ibu</i>	1	
<i>ibuprofen susp</i>	1	
<i>ibuprofen tabs 400mg, 600mg, 800mg</i>	1	
<i>ketorolac tromethamine inj 15mg/ml, 30mg/ml</i>	2	
<i>meclofenamate sodium caps</i>	1	
<i>mefenamic acid caps</i>	2	
<i>meloxicam tabs</i>	1	
<i>nabumetone tabs</i>	1	
<i>naproxen sodium tabs 550mg</i>	1	
<i>naproxen susp</i>	5	
<i>naproxen tabs 250mg, 375mg, 500mg</i>	1	
<i>oxaprozin tabs</i>	2	
<i>piroxicam caps</i>	2	
<i>salsalate tabs</i>	2	
<i>sulindac tabs</i>	1	
<b>Opioid Analgesics, Long-acting</b>		
<i>buprenorphine ptwk 10mcg/hr, 15mcg/hr, 5mcg/hr, 7.5mcg/hr</i>	2	
<i>buprenorphine ptwk 20mcg/hr</i>	4	
<i>fentanyl pt72 25mcg/hr</i>	2	QL(10 EA per 30 days)
<i>fentanyl pt72 12mcg/hr, 37.5mcg/hr, 50mcg/hr, 62.5mcg/hr, 75mcg/hr</i>	4	QL(10 EA per 30 days)
<i>fentanyl pt72 100mcg/hr</i>	4	QL(20 EA per 30 days)
<i>fentanyl pt72 87.5mcg/hr</i>	5	QL(10 EA per 30 days)
<i>methadone hcl inj</i>	2	
<i>methadone hcl oral soln</i>	2	QL(1800 ML per 30 days)
<i>methadone hcl tabs</i>	2	QL(360 EA per 30 days)
<i>methadone hydrochloride intensol</i>	2	QL(1800 ML per 30 days)
<i>methadone hydrochloride conc</i>	2	QL(1800 ML per 30 days)
<i>methadose sugar-free</i>	2	QL(1800 ML per 30 days)
<i>methadose conc 10mg/ml</i>	2	QL(1800 ML per 30 days)
<i>morphine sulfate er cp24 100mg, 10mg, 20mg, 30mg, 50mg, 60mg, 80mg</i>	2	QL(60 EA per 30 days)

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You can find information on what the symbols and abbreviations in this table mean by going to the introduction pages of this document.



Drug Name	Drug Tier	Requirements/Limits
<i>morphine sulfate er tbc</i>	2	QL(120 EA per 30 days)
OXYCODONE HYDROCHLORIDE ER T12A 40MG	2	QL(60 EA per 30 days)
OXYCODONE HYDROCHLORIDE ER T12A 80MG	5	QL(60 EA per 30 days)
<i>oxycodone hydrochloride er t12a 10mg, 20mg</i>	2	QL(60 EA per 30 days)
OXYCONTIN T12A	4	QL(60 EA per 30 days)
<i>oxymorphone hydrochloride er tb12 30mg</i>	4	QL(120 EA per 30 days)
<i>oxymorphone hydrochloride er tb12 10mg, 15mg, 20mg, 5mg, 7.5mg</i>	4	QL(60 EA per 30 days)
<i>oxymorphone hydrochloride er</i>	4	QL(120 EA per 30 days)
<i>tramadol hcl er cp24 100mg, 200mg, 300mg</i>	4	QL(60 EA per 30 days); ST
<i>tramadol hcl er tb24</i>	4	QL(30 EA per 30 days); ST
<i>tramadol hydrochloride er</i>	4	QL(30 EA per 30 days); ST
<b>Opioid Analgesics, Short-acting</b>		
<i>acetaminophen/codeine phosphate tabs 300mg; 60mg</i>	2	QL(180 EA per 30 days)
<i>acetaminophen/codeine phosphate tabs 300mg; 15mg, 300mg; 30mg</i>	2	QL(360 EA per 30 days)
<i>acetaminophen/codeine soln</i>	2	QL(4500 ML per 30 days)
<i>acetaminophen/codeine tabs 300mg; 60mg</i>	2	QL(180 EA per 30 days)
<i>acetaminophen/codeine tabs 300mg; 15mg, 300mg; 30mg</i>	2	QL(360 EA per 30 days)
<i>ascomp/codeine</i>	2	
<i>butalbital/acetaminophen/caffeine/codeine caps 325mg; 50mg; 40mg; 30mg</i>	2	
<i>butalbital/aspirin/caffeine/codeine</i>	2	
<i>butorphanol tartrate inj</i>	2	
<i>butorphanol tartrate nasal soln</i>	2	QL(5 ML per 28 days)
CODEINE SULFATE TABS 60MG	4	QL(180 EA per 30 days)
<i>codeine sulfate tabs 15mg, 30mg</i>	2	QL(180 EA per 30 days)
<i>duramorph</i>	2	
<i>endocet tabs 325mg; 10mg, 325mg; 2.5mg, 325mg; 5mg, 325mg; 7.5mg</i>	2	QL(240 EA per 30 days)
<i>fentanyl citrate oral transmucosal lpop 200mcg</i>	4	QL(120 EA per 30 days); PA
<i>fentanyl citrate oral transmucosal lpop 1200mcg, 1600mcg, 400mcg, 600mcg, 800mcg</i>	5	QL(120 EA per 30 days); PA
<i>hydrocodone bitartrate/acetaminophen soln 325mg/15ml; 7.5mg/15ml</i>	2	QL(2700 ML per 30 days)
<i>hydrocodone bitartrate/acetaminophen tabs 300mg; 10mg, 300mg; 5mg, 300mg; 7.5mg, 325mg; 10mg, 325mg; 5mg</i>	2	QL(240 EA per 30 days)
<i>hydrocodone/acetaminophen tabs 325mg; 7.5mg</i>	2	QL(240 EA per 30 days)
<i>hydrocodone/ibuprofen tabs 7.5mg; 200mg</i>	2	QL(150 EA per 30 days)
<i>hydrocodone/ibuprofen tabs 10mg; 200mg, 5mg; 200mg</i>	4	QL(150 EA per 30 days)
<i>hydromorphone hcl liqd</i>	2	QL(1200 ML per 30 days)
<i>hydromorphone hcl inj 10mg/ml, 1mg/ml, 4mg/ml</i>	2	
<i>hydromorphone hcl tabs 8mg</i>	2	QL(120 EA per 30 days)
<i>hydromorphone hcl tabs 2mg, 4mg</i>	2	QL(180 EA per 30 days)

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Drug Name	Drug Tier	Requirements/Limits
<i>hydromorphone hydrochloride inj 2mg/ml, 50mg/5ml</i>	2	
<i>morphine sulfate tabs</i>	2	QL(180 EA per 30 days)
MORPHINE SULFATE INJ 10MG/ML, 2MG/ML, 4MG/ML	2	
<i>morphine sulfate inj 10mg/ml, 4mg/ml, 5mg/ml, 8mg/ml</i>	2	B/D
<i>morphine sulfate inj 0.5mg/ml, 10mg/ml, 1mg/ml, 2mg/ml, 4mg/ml, 8mg/ml</i>	2	
<i>morphine sulfate oral soln 100mg/5ml</i>	2	QL(200 ML per 30 days)
<i>morphine sulfate oral soln 20mg/5ml</i>	2	QL(300 ML per 30 days)
<i>morphine sulfate oral soln 10mg/5ml</i>	2	QL(700 ML per 30 days)
<i>nalbuphine hydrochloride</i>	1	
<i>oxycodone hcl caps</i>	2	QL(180 EA per 30 days)
<i>oxycodone hydrochloride soln</i>	2	QL(1300 ML per 30 days)
<i>oxycodone hydrochloride caps, tabs</i>	2	QL(180 EA per 30 days)
<i>oxycodone hydrochloride conc</i>	2	QL(180 ML per 30 days)
<i>oxycodone/acetaminophen tabs 325mg; 10mg, 325mg; 2.5mg, 325mg; 5mg, 325mg; 7.5mg</i>	2	QL(240 EA per 30 days)
<i>oxymorphone hydrochloride</i>	2	QL(180 EA per 30 days)
<i>tramadol hydrochloride/acetaminophen</i>	2	QL(240 EA per 30 days)
<i>tramadol hydrochloride tabs 100mg</i>	2	QL(120 EA per 30 days)
<i>tramadol hydrochloride tabs 50mg</i>	2	QL(240 EA per 30 days)
<b>Anesthetics</b>		
<b>Local Anesthetics</b>		
<i>glydo</i>	1	QL(30 ML per 30 days); PA
<i>lidocaine hcl jelly prsy</i>	1	QL(30 ML per 30 days); PA
<i>lidocaine hcl inj 0.5%, 1.5%, 4%</i>	1	
<i>lidocaine hcl prsy 2%</i>	1	QL(30 ML per 30 days); PA
<i>lidocaine hydrochloride external soln</i>	1	QL(250 ML per 30 days); PA
<i>lidocaine hydrochloride inj 1%, 2%</i>	1	
<i>lidocaine/prilocaine crea</i>	2	QL(60 GM per 30 days); PA
<i>lidocaine oint 5%</i>	2	QL(150 GM per 30 days); PA
<i>lidocaine ptch 5%</i>	2	PA
<b>Anti-Addiction/Substance Abuse Treatment Agents</b>		
<b>Alcohol Deterrents/Anti-craving</b>		
<i>acamprosate calcium dr</i>	2	
<i>disulfiram tabs</i>	2	
<i>naltrexone hydrochloride tabs</i>	1	
VIVITROL	5	
<b>Opioid Dependence</b>		
<i>buprenorphine hcl/naloxone hcl</i>	2	QL(90 EA per 30 days)
<i>buprenorphine hcl subl</i>	2	QL(90 EA per 30 days)
<i>buprenorphine hcl inj</i>	4	
<i>buprenorphine hydrochloride/naloxone hydrochloride film</i>	2	QL(90 EA per 30 days)
<i>buprenorphine hydrochloride/naloxone hydrochloride subl 2mg; 0.5mg</i>	2	QL(90 EA per 30 days)

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Drug Name	Drug Tier	Requirements/Limits
<i>lofexidine hydrochloride</i>	5	
LUCEMYRA	5	
<b>Opioid Reversal Agents</b>		
<i>naloxone hcl inj 4mg/10ml</i>	1	
<i>naloxone hydrochloride liqd</i>	2	
<i>naloxone hydrochloride inj 0.4mg/ml, 2mg/2ml</i>	1	
OPVEE	3	
<b>Smoking Cessation Agents</b>		
<i>bupropion hydrochloride er (sr) tb12 150mg</i>	2	
NICOTROL INHALER	4	QL(480 EA per 30 days)
<i>varenicline starting month</i>	2	
<i>varenicline tartrate tabs 1mg</i>	2	
<i>varenicline tartrate tabs 0.5mg</i>	2	
<b>Antibacterials</b>		
<b>Aminoglycosides</b>		
<i>amikacin sulfate inj 1gm/4ml, 500mg/2ml</i>	2	
ARIKAYCE	5	QL(525 ML per 30 days); PA
<i>gentamicin sulfate pediatric</i>	1	
<i>gentamicin sulfate/0.9% sodium chloride inj 1.2mg/ml; 0.9%, 1.6mg/ml; 0.9%, 1mg/ml; 0.9%, 2mg/ml; 0.9%</i>	1	
<i>gentamicin sulfate crea 0.1%</i>	2	
<i>gentamicin sulfate inj 40mg/ml</i>	1	
<i>gentamicin sulfate oint 0.1%</i>	2	
<i>isotonic gentamicin inj 0.8mg/ml; 0.9%</i>	1	
<i>neomycin sulfate</i>	2	
<i>neomycin/polymyxin b sulfates</i>	2	
STREPTOMYCIN SULFATE INJ 1GM	5	
<i>tobramycin sulfate inj 1.2gm/30ml, 1.2gm, 40mg/ml</i>	2	
<i>tobramycin sulfate inj 10mg/ml, 80mg/2ml</i>	4	
ZEMDRI	5	
<b>Antibacterials, Other</b>		
<i>aztreonam inj 1gm</i>	2	
<i>aztreonam inj 2gm</i>	5	
<i>chloramphenicol sodium succinate</i>	1	
<i>clindacin etz pledgets</i>	2	
<i>clindamycin hcl caps 300mg</i>	1	
<i>clindamycin hydrochloride caps 150mg, 75mg</i>	1	
<i>clindamycin palmitate hydrochloride</i>	1	
<i>clindamycin phosphate/dextrose</i>	2	
<i>clindamycin phosphate crea 2%</i>	2	
<i>clindamycin phosphate inj 600mg/4ml, 9000mg/60ml, 900mg/6ml</i>	1	
<i>clindamycin phosphate swab 1%</i>	2	
<i>colistimethate sodium</i>	5	

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Drug Name	Drug Tier	Requirements/Limits
<i>daptomycin</i>	5	
DAPTOMYCIN/SODIUM CHLORIDE	4	
<i>fosfomicin tromethamine</i>	2	
IMPAVIDO	5	
KIMYRSA	5	
<i>lincomycin hydrochloride</i>	2	
<i>linezolid tabs</i>	4	QL(56 EA per 28 days)
<i>linezolid susr</i>	5	QL(1800 ML per 28 days)
<i>linezolid inj 600mg/300ml</i>	4	
<i>methenamine hippurate</i>	2	
<i>metronidazole vaginal</i>	2	
<i>metronidazole caps 375mg</i>	1	
<i>metronidazole inj 500mg/100ml</i>	1	
<i>metronidazole tabs 250mg, 500mg</i>	1	
<i>nitrofurantoin macrocrystals</i>	2	
<i>nitrofurantoin monohydrate/macrocrystals</i>	2	
<i>nitrofurantoin monohydrate caps</i>	2	
NUVESSA	4	
ORBACTIV	5	
<i>polymyxin b sulfate inj</i>	2	
SIVEXTRO INJ	5	QL(6 EA per 30 days)
<i>tigecycline</i>	5	
<i>tinidazole</i>	4	
<i>trimethoprim tabs</i>	1	
<i>vancomycin hcl inj 0.9%; 1gm/200ml, 10gm</i>	4	
<i>vancomycin hydrochloride/dextrose inj 5%; 1gm/200ml, 5%; 500mg/100ml, 5%; 750mg/150ml</i>	4	
<i>vancomycin hydrochloride caps</i>	4	
VANCOMYCIN HYDROCHLORIDE INJ 1250MG/250ML, 1750MG/350ML, 750MG/150ML	4	
<i>vancomycin hydrochloride inj 1.75gm, 1000mg/200ml, 1gm, 2gm, 500mg, 5gm, 750mg</i>	4	
<i>vancomycin inj 0.9%; 500mg/100ml, 0.9%; 750mg/150ml</i>	4	
<b>Beta-lactam, Cephalosporins</b>		
AVYCAZ	5	
<i>cefaclor er tb12 500mg</i>	2	
<i>cefaclor caps</i>	2	
<i>cefaclor susr 250mg/5ml</i>	2	
<i>cefadroxil</i>	2	
<i>cefazolin sodium/dextrose inj 1gm; 4%, 2gm; 3%</i>	2	
<i>cefazolin sodium inj 100gm, 10gm, 1gm/50ml; 4%, 1gm, 300gm, 500mg</i>	2	
CEFAZOLIN/DEXTROSE INJ 3GM/150ML; 4%	2	
CEFAZOLIN INJ 2GM	2	

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<i>cefazolin inj 2gm, 3gm</i>	2	
<i>cefdinir</i>	2	
CEFEPIME	3	
CEFEPIME HYDROCHLORIDE INJ 100GM, 2GM	3	
CEFEPIME/DEXTROSE	3	
<i>cefixime</i>	2	
CEFOTAXIME SODIUM INJ 1GM	1	
<i>cefotaxime sodium inj 2gm</i>	1	
<i>cefotetan inj 1gm, 2gm</i>	1	
<i>cefoxitin sodium</i>	1	
<i>cefpodoxime proxetil</i>	2	
<i>cefprozil</i>	2	
<i>ceftazidime inj 1gm, 2gm, 6gm</i>	1	
<i>ceftriaxone in iso-osmotic dextrose inj 20mg/ml; 0</i>	4	
<i>ceftriaxone sodium inj 10gm, 1gm, 250mg, 2gm, 500mg</i>	4	
<i>ceftriaxone/dextrose</i>	4	
<i>cefuroxime axetil tabs</i>	2	
<i>cefuroxime sodium inj 1.5gm, 750mg</i>	2	
<i>cephalexin</i>	1	
FETROJA	5	
<i>tazicef inj 1gm, 2gm, 6gm</i>	1	
TEFLARO	5	
<b>Beta-lactam, Penicillins</b>		
<i>amoxicillin/clavulanate potassium</i>	2	
<i>amoxicillin/clavulanate potassium er</i>	2	
<i>amoxicillin chew 125mg, 250mg</i>	1	
<i>amoxicillin caps, susr, tabs</i>	1	
<i>ampicillin sodium inj</i>	1	
<i>ampicillin-sulbactam inj 10gm; 5gm, 1gm; 0.5gm</i>	1	
<i>ampicillin/sulbactam inj 2gm; 1gm</i>	1	
<i>ampicillin caps 500mg</i>	1	
AUGMENTIN SUSR 125MG/5ML; 31.25MG/5ML	4	
BICILLIN C-R INJ 300000UNIT/ML; 300000UNIT/ML, 900000UNIT/2ML; 300000UNIT/2ML	3	
BICILLIN L-A INJ 1200000UNIT/2ML, 2400000UNIT/4ML, 600000UNIT/ML	4	
<i>dicloxacillin sodium</i>	1	
NAFCILLIN	5	
<i>naficillin sodium inj 10gm, 1gm, 2gm</i>	4	
<i>oxacillin sodium inj 1.5gm/50ml; 1gm/50ml, 10gm, 1gm, 2gm, 300mg/50ml; 2gm/50ml</i>	2	
<i>penicillin g potassium in iso-osmotic dextrose</i>	1	
<i>penicillin g potassium inj 20000000unit, 5000000unit</i>	1	
<i>penicillin v potassium</i>	1	

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<i>piperacillin sodium/tazobactam sodium</i>	2	
<b>Carbapenems</b>		
<i>ertapenem sodium</i>	4	
<i>imipenem/cilastatin inj 250mg; 250mg</i>	1	
<i>imipenem/cilastatin inj 500mg; 500mg</i>	3	
MEROPENEM/SODIUM CHLORIDE INJ 1GM/50ML; 0.9%	4	
<i>meropenem/sodium chloride inj 500mg; 0.9%</i>	4	
<i>meropenem inj 1gm, 500mg</i>	3	
<i>meropenem inj 2gm</i>	4	
<b>Macrolides</b>		
<i>azithromycin pack, susr, tabs</i>	2	
<i>azithromycin inj 500mg</i>	2	
<i>clarithromycin er</i>	2	
<i>clarithromycin susr, tabs</i>	2	
DIFICID	5	
ERYTHROCIN LACTOBIONATE INJ 500MG	3	
<i>erythrocin stearate tabs 250mg</i>	2	
<i>erythromycin base tabs</i>	4	
<i>erythromycin dr cpep</i>	2	
<i>erythromycin dr tbec 500mg</i>	2	
<i>erythromycin dr tbec 250mg, 333mg</i>	4	
<i>erythromycin ethylsuccinate tabs</i>	4	
<i>erythromycin ethylsuccinate susr 200mg/5ml</i>	2	
<i>erythromycin ethylsuccinate susr 400mg/5ml</i>	5	
<i>erythromycin lactobionate</i>	5	
<b>Quinolones</b>		
BAXDELA TABS	5	
<i>ciprofloxacin hcl tabs 750mg</i>	1	
<i>ciprofloxacin hydrochloride tabs 250mg, 500mg</i>	1	
<i>ciprofloxacin i.v.-in d5w inj 200mg/100ml; 5%</i>	1	
<i>levofloxacin in d5w</i>	2	
LEVOFLOXACIN INJ 25MG/ML	2	
<i>levofloxacin oral soln 25mg/ml</i>	2	
<i>levofloxacin tabs 250mg, 500mg, 750mg</i>	2	
<i>moxifloxacin hydrochloride/sodium hydrochloride</i>	2	
<i>moxifloxacin hydrochloride inj 400mg/250ml</i>	2	
<i>moxifloxacin hydrochloride tabs 400mg</i>	2	
<i>ofloxacin tabs 300mg, 400mg</i>	1	
<b>Sulfonamides</b>		
<i>sodium sulfacetamide</i>	2	
<i>sulfacetamide sodium lotn 10%</i>	2	
<i>sulfadiazine tabs</i>	4	
<i>sulfamethoxazole/trimethoprim</i>	1	

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<i>sulfamethoxazole/trimethoprim ds</i>	1	
<b>Tetracyclines</b>		
<i>demeclocycline hcl tabs</i>	4	
<i>demeclocycline hydrochloride tabs 300mg</i>	4	
<i>doxy 100</i>	2	
<i>doxycycline hyclate caps 100mg, 50mg</i>	2	
<i>doxycycline hyclate inj 100mg</i>	2	
<i>doxycycline hyclate tabs 100mg</i>	2	
<i>doxycycline monohydrate caps 100mg, 50mg</i>	2	
<i>doxycycline monohydrate tabs</i>	2	
<i>doxycycline susr</i>	2	
MINOCIN INJ	5	
<i>minocycline hcl caps 75mg</i>	1	
<i>minocycline hcl tabs 100mg, 75mg</i>	4	
<i>minocycline hydrochloride caps 100mg, 50mg</i>	1	
<i>minocycline hydrochloride tabs 50mg</i>	4	
<i>mondoxyne nl caps 100mg</i>	2	
NUZYRA INJ	5	
NUZYRA TABS	5	QL(30 EA per 30 days)
<i>tetracycline hydrochloride caps</i>	2	
VIBRAMYCIN SYRP	4	
XERAVA	5	
<b>Anticonvulsants</b>		
<b>Anticonvulsants, Other</b>		
BRIVIACT	5	ST NSO
ELEPSIA XR	5	ST NSO
EPIDIOLEX	5	PA NSO
EPRONTIA	4	
<i>felbamate tabs</i>	2	
<i>felbamate susp</i>	4	
FINTEPLA	5	PA NSO
FYCOMPA SUSP	5	
FYCOMPA TABS 2MG	4	
FYCOMPA TABS 10MG, 12MG, 4MG, 6MG, 8MG	5	
<i>lamotrigine er</i>	2	
<i>lamotrigine starter kit/blue</i>	4	
<i>lamotrigine starter kit/green</i>	4	
<i>lamotrigine starter kit/orange</i>	4	
<i>lamotrigine titration</i>	4	
<i>lamotrigine chew, tabs</i>	1	
<i>levetiracetam er</i>	1	
<i>levetiracetam/sodium chloride</i>	2	
LEVETIRACETAM TB3D	4	
<i>levetiracetam oral soln, tabs</i>	1	

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<i>levetiracetam inj 500mg/5ml</i>	1	
<i>levetiracetam inj 1000mg/100ml; 750mg/100ml, 1500mg/100ml; 540mg/100ml, 500mg/100ml; 820mg/100ml</i>	2	
NAYZILAM	4	
<i>roweepra tabs 500mg</i>	1	
SPRITAM	4	ST NSO
<i>subvenite</i>	1	
<i>subvenite starter kit/blue</i>	4	
<i>subvenite starter kit/green</i>	4	
<i>subvenite starter kit/orange</i>	4	
<i>topiramate er cs24</i>	4	
TOPIRAMATE CPSP 50MG	3	
<i>topiramate cpsp 15mg, 25mg</i>	2	
<i>topiramate tabs</i>	2	
<i>valproate sodium inj 100mg/ml</i>	1	
<i>valproic acid</i>	1	
<b>Calcium Channel Modifying Agents</b>		
<i>ethosuximide</i>	2	
METHSUXIMIDE	3	
<b>Gamma-aminobutyric Acid (GABA) Modulating Agents</b>		
<i>clobazam</i>	4	
<i>clonazepam odt</i>	2	
<i>clonazepam tabs</i>	2	
DIACOMIT	5	PA NSO
<i>diazepam rectal gel</i>	4	
<i>divalproex sodium dr</i>	1	
<i>divalproex sodium er</i>	2	
<i>gabapentin caps, soln</i>	1	
<i>gabapentin tabs 600mg, 800mg</i>	1	
LIBERVANT	4	QL(10 EA per 30 days)
<i>phenobarbital sodium inj 130mg/ml, 65mg/ml</i>	2	
<i>phenobarbital elix 20mg/5ml</i>	2	
<i>phenobarbital tabs 100mg, 15mg, 16.2mg, 30mg, 32.4mg, 60mg, 64.8mg, 97.2mg</i>	2	
<i>pregabalin</i>	2	
<i>primidone tabs</i>	1	
SYMPAZAN	5	
<i>tiagabine hydrochloride</i>	4	
VALTOCO 10 MG DOSE	5	
VALTOCO 15 MG DOSE	5	
VALTOCO 20 MG DOSE	5	
VALTOCO 5 MG DOSE	5	
<i>vigabatrin</i>	5	
<i>vigadrone</i>	5	

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Drug Name	Drug Tier	Requirements/Limits
VIGAFYDE	5	PA NSO
<i>vigpoder</i>	5	
ZTALMY	5	PA NSO
<b>Sodium Channel Agents</b>		
APTIOM	5	ST NSO
<i>carbamazepine er</i>	2	
<i>carbamazepine chew 100mg</i>	1	
<i>carbamazepine tabs</i>	1	
<i>carbamazepine susp</i>	2	
DILANTIN INFATABS	4	
DILANTIN CAPS 30MG	4	
<i>epitol</i>	1	
<i>fosphenytoin sodium</i>	1	
<i>lacosamide oral soln, tabs</i>	2	
<i>lacosamide inj</i>	5	
<i>oxcarbazepine tabs</i>	3	
<i>oxcarbazepine susp</i>	4	
<i>phenytek</i>	2	
<i>phenytoin infatabs</i>	1	
<i>phenytoin sodium extended</i>	2	
<i>phenytoin sodium inj</i>	1	
<i>phenytoin chew, susp</i>	1	
<i>rufinamide susp</i>	5	
<i>rufinamide tabs 200mg</i>	4	
<i>rufinamide tabs 400mg</i>	5	
VIMPAT INJ	3	
XCOPRI TABS	5	
XCOPRI TBPK 0	4	
XCOPRI TBPK 0	5	
ZONISADE	4	ST NSO
<i>zonisamide</i>	1	
<b>Antidementia Agents</b>		
<b>Antidementia Agents, Other</b>		
ERGOLOID MESYLATES TABS	2	
<i>memantine/donepezil hydrochloride er</i>	4	QL(30 EA per 30 days)
NAMZARIC C4PK	4	
NAMZARIC CP24	4	QL(30 EA per 30 days)
<b>Cholinesterase Inhibitors</b>		
<i>donepezil hcl tbdp</i>	1	
<i>donepezil hcl tabs 10mg</i>	1	
<i>donepezil hydrochloride odt</i>	1	
<i>donepezil hydrochloride tabs 10mg, 5mg</i>	1	
<i>galantamine hydrobromide er</i>	2	
<i>galantamine hydrobromide soln, tabs</i>	2	

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<i>rivastigmine tartrate</i>	2	
<i>rivastigmine transdermal system</i>	4	
<b><i>N-methyl-D-aspartate (NMDA) Receptor Antagonist</i></b>		
<i>memantine hcl titration pak</i>	1	
<i>memantine hydrochloride er</i>	4	
<i>memantine hydrochloride tabs</i>	1	
<i>memantine hydrochloride soln</i>	4	
<b>Antidepressants</b>		
<b><i>Antidepressants, Other</i></b>		
AUVELITY	5	QL(60 EA per 30 days); ST NSO
<i>bupropion hydrochloride er (sr) tb12 100mg, 150mg, 200mg</i>	1	
<i>bupropion hydrochloride er (xl) tb24 150mg, 300mg</i>	2	
<i>bupropion hydrochloride tabs</i>	1	
<i>mirtazapine odt</i>	1	
<i>mirtazapine tabs</i>	1	
<i>olanzapine/fluoxetine</i>	4	
<i>perphenazine/amitriptyline</i>	4	PA NSO
<i>quetiapine fumarate tabs 150mg</i>	1	
SPRAVATO 56MG DOSE	5	PA NSO
SPRAVATO 84MG DOSE	5	PA NSO
ZURZUVAE CAPS 30MG	5	QL(14 EA per 14 days); PA NSO
ZURZUVAE CAPS 20MG, 25MG	5	QL(28 EA per 14 days); PA NSO
<b><i>Monoamine Oxidase Inhibitors</i></b>		
EMSAM	5	QL(30 EA per 30 days)
MARPLAN	4	
<i>phenelzine sulfate</i>	2	
<i>tranylcypromine sulfate</i>	4	
<b><i>SSRIs/SNRIs (Selective Serotonin Reuptake Inhibitors/Serotonin and Norepinephrine Reuptake Inhibitor)</i></b>		
<i>citalopram hydrobromide soln, tabs</i>	1	
<i>desvenlafaxine er</i>	2	QL(30 EA per 30 days)
DRIZALMA SPRINKLE	4	
<i>duloxetine hydrochloride cpep 20mg, 30mg, 60mg</i>	2	
<i>escitalopram oxalate tabs</i>	1	
<i>escitalopram oxalate soln</i>	4	
FETZIMA	4	ST NSO
FETZIMA TITRATION PACK	4	ST NSO
<i>fluoxetine dr</i>	1	
<i>fluoxetine hydrochloride caps, soln</i>	1	
<i>fluoxetine hydrochloride tabs 60mg</i>	4	
<i>fluvoxamine maleate er</i>	4	
<i>fluvoxamine maleate tabs 100mg, 50mg</i>	1	
<i>fluvoxamine maleate tabs 25mg</i>	3	
<i>nefazodone hydrochloride</i>	2	

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<i>paroxetine hcl er</i>	2	
<i>paroxetine hcl tabs 30mg, 40mg</i>	1	
<i>paroxetine hydrochloride er tb24 12.5mg, 25mg</i>	2	
<i>paroxetine hydrochloride susp</i>	1	
<i>paroxetine hydrochloride tabs 10mg, 20mg</i>	1	
<b>RALDESY</b>	5	
<i>sertraline hcl conc</i>	1	
<i>sertraline hcl tabs 50mg</i>	1	
<i>sertraline hydrochloride tabs 100mg, 25mg</i>	1	
<i>trazodone hydrochloride tabs 100mg, 150mg, 50mg</i>	1	
<i>trazodone hydrochloride tabs 300mg</i>	2	
<b>TRINTELLIX</b>	4	ST NSO
<b>VENLAFAXINE BESYLATE ER</b>	4	ST NSO
<i>venlafaxine hydrochloride</i>	1	
<i>venlafaxine hydrochloride er cp24</i>	1	
<i>venlafaxine hydrochloride er tb24 150mg, 75mg</i>	1	
<i>vilazodone hydrochloride</i>	2	QL(30 EA per 30 days)
<b>Tricyclics</b>		
<i>amitriptyline hcl tabs 100mg, 150mg, 25mg, 75mg</i>	4	PA NSO
<i>amitriptyline hydrochloride tabs 100mg, 10mg, 50mg</i>	4	PA NSO
<i>amoxapine</i>	2	
<i>clomipramine hydrochloride</i>	4	PA NSO
<i>desipramine hydrochloride</i>	2	
<i>doxepin hcl caps 75mg</i>	4	PA NSO
<i>doxepin hcl conc</i>	4	PA NSO
<i>doxepin hydrochloride caps 100mg, 10mg, 150mg, 25mg, 50mg</i>	4	PA NSO
<i>imipramine hcl tabs 25mg, 50mg</i>	4	PA NSO
<i>imipramine hydrochloride tabs 10mg</i>	4	PA NSO
<i>imipramine pamoate caps 150mg, 75mg</i>	4	PA NSO
<i>nortriptyline hcl caps 25mg, 75mg</i>	2	
<i>nortriptyline hcl soln</i>	2	
<i>nortriptyline hydrochloride caps 10mg, 50mg</i>	2	
<i>protriptyline hcl</i>	4	
<i>trimipramine maleate caps</i>	4	
<b>Antiemetics</b>		
<b>Antiemetics, Other</b>		
<i>compro</i>	2	
<i>dimenhydrinate inj</i>	1	
<i>droperidol inj</i>	1	
<i>meclizine hcl tabs 12.5mg</i>	2	
<i>prochlorperazine edisylate inj 10mg/2ml</i>	2	
<i>prochlorperazine maleate tabs</i>	2	
<i>prochlorperazine supp 25mg</i>	2	

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<i>promethazine hcl supp 12.5mg</i>	2	
<i>promethazine hydrochloride tabs</i>	4	PA
<i>promethazine hydrochloride supp 25mg</i>	2	
<i>promethegan supp 12.5mg, 25mg</i>	2	
<i>promethegan supp 50mg</i>	4	
<i>scopolamine</i>	2	
<b>Emetogenic Therapy Adjuncts</b>		
APONVIE	4	PA
<i>aprepitant</i>	4	PA
CINVANTI	4	PA
<i>dronabinol</i>	4	B/D
EMEND INJ, SUSR	4	PA
<i>fosaprepitant dimeglumine</i>	2	PA
<i>granisetron hcl inj 1mg/ml, 4mg/4ml</i>	2	
<i>granisetron hydrochloride tabs</i>	2	B/D
<i>granisetron hydrochloride inj</i>	2	
<i>ondansetron hcl soln</i>	2	B/D
<i>ondansetron hcl tabs 24mg</i>	2	B/D
<i>ondansetron hydrochloride tabs</i>	2	B/D
ONDANSETRON HYDROCHLORIDE INJ 4MG/2ML	2	
<i>ondansetron hydrochloride inj 40mg/20ml, 4mg/2ml</i>	2	
<i>ondansetron odt tbdp 4mg, 8mg</i>	2	B/D
<i>palonosetron hydrochloride</i>	4	
SANCUSO	5	
<b>Antifungals</b>		
<b>Antifungals</b>		
ABELCET	4	PA
<i>amphotericin b liposome</i>	5	PA
<i>amphotericin b inj</i>	4	B/D
<i>caspofungin acetate</i>	4	
<i>clotrimazole crea, soln, troc</i>	2	
CRESEMBA	5	PA
<i>econazole nitrate crea</i>	2	
<i>fluconazole in nacl inj 200mg/100ml; 0.9%</i>	2	
<i>fluconazole in sodium chloride</i>	2	
<i>fluconazole susr, tabs</i>	2	
<i>flucytosine caps</i>	5	
<i>griseofulvin microsize</i>	2	
<i>griseofulvin ultramicrosize tabs 125mg, 250mg</i>	2	
<i>itraconazole caps</i>	2	
<i>ketoconazole crea, sham, tabs</i>	2	
<i>klayesta</i>	2	
<i>micafungin</i>	4	
<i>miconazole 3 supp</i>	1	

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Drug Name	Drug Tier	Requirements/Limits
<i>naftifine hcl</i>	4	ST
<i>naftifine hydrochloride crea</i>	4	ST
NOXAFIL INJ	5	
<i>nyamyc</i>	2	
<i>nystatin crea, oint, powd, susp, tabs</i>	2	
<i>nystop</i>	2	
ORAVIG	4	
<i>posaconazole dr</i>	5	
<i>posaconazole inj</i>	5	
<i>terbinafine hcl tabs</i>	2	
<i>terconazole</i>	2	
<i>voriconazole tabs</i>	4	
<i>voriconazole susr</i>	5	
<i>voriconazole inj</i>	5	PA
<b>Antigout Agents</b>		
<i>Antigout Agents</i>		
<i>allopurinol tabs 100mg, 300mg</i>	1	
<i>colchicine tabs 0.6mg</i>	2	
<i>febuxostat tabs 80mg</i>	2	
KRYSTEXXA	5	PA
<i>probenecid/colchicine</i>	1	
<i>probenecid tabs</i>	1	
<b>Antimigraine Agents</b>		
<i>Calcitonin Gene-Related Peptide (CGRP) Receptor Antagonists</i>		
AIMOVIG	3	QL(2 ML per 30 days); PA
EMGALITY INJ 120MG/ML	3	QL(2 ML per 28 days); PA
EMGALITY INJ 100MG/ML	3	QL(3 ML per 30 days); PA
NURTEC	4	QL(18 EA per 30 days); PA
<i>Ergot Alkaloids</i>		
<i>dihydroergotamine mesylate soln</i>	5	QL(8 ML per 23 days)
ERGOMAR	4	
ERGOTAMINE TARTRATE/CAFFEINE	3	
MIGERGOT	5	
<i>Prophylactic</i>		
<i>timolol maleate tabs 10mg, 20mg, 5mg</i>	1	
VYEPTI	5	PA
<i>Serotonin (5-HT) Receptor Agonist</i>		
REYVOW TABS 50MG	4	QL(4 EA per 30 days); PA
REYVOW TABS 100MG	4	QL(8 EA per 30 days); PA
<i>rizatriptan benzoate</i>	2	QL(18 EA per 30 days)
<i>rizatriptan benzoate odt</i>	2	QL(18 EA per 30 days)
SUMATRIPTAN SUCCINATE REFILL	2	QL(4 ML per 30 days)
<i>sumatriptan succinate tabs</i>	2	QL(9 EA per 30 days)
<i>sumatriptan succinate inj 6mg/0.5ml</i>	2	QL(6 ML per 30 days)

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<i>sumatriptan succinate inj 4mg/0.5ml, 6mg/0.5ml</i>	4	QL(4 ML per 30 days)
<i>sumatriptan soln 20mg/act</i>	2	QL(12 EA per 30 days)
<i>sumatriptan soln 5mg/act</i>	2	QL(18 EA per 30 days)
<i>zolmitriptan tabs</i>	2	QL(9 EA per 30 days)
<b>Antimyasthenic Agents</b>		
<b><i>Parasympathomimetics</i></b>		
<i>pyridostigmine bromide er</i>	4	
<i>pyridostigmine bromide soln</i>	4	
<i>pyridostigmine bromide tabs 60mg</i>	2	
REGONOL INJ 10MG/2ML	3	
<b>Antimycobacterials</b>		
<b><i>Antimycobacterials, Other</i></b>		
<i>dapsone tabs</i>	2	
PRETOMANID	4	QL(30 EA per 30 days); PA
<i>rifabutin</i>	4	
<b><i>Antituberculars</i></b>		
CYCLOSERINE	5	
<i>ethambutol hydrochloride</i>	2	
<i>isoniazid inj, tabs</i>	1	
<i>isoniazid syrp</i>	4	
PRIFTIN	4	
<i>pyrazinamide tabs</i>	4	
<i>rifampin caps, inj</i>	2	
SIRTURO	5	PA
TRECTOR	4	
<b>Antineoplastics</b>		
<b><i>Alkylating Agents</i></b>		
<i>bendamustine hydrochloride</i>	5	PA NSO
BENDEKA	5	PA NSO
<i>busulfan</i>	5	
BUSULFEX	5	
<i>carboplatin inj 150mg/15ml, 450mg/45ml, 50mg/5ml, 600mg/60ml</i>	1	
CARMUSTINE INJ 300MG, 50MG	5	
<i>carmustine inj 100mg</i>	5	
<i>cisplatin inj 100mg/100ml, 200mg/200ml, 50mg/50ml</i>	1	
CYCLOPHOSPHAMIDE MONOHYDRATE INJ	5	
CYCLOPHOSPHAMIDE CAPS, TABS	3	B/D
CYCLOPHOSPHAMIDE INJ 2GM/10ML	5	
CYCLOPHOSPHAMIDE INJ 1GM/5ML, 500MG/2.5ML, 500MG/ML	5	
<i>cyclophosphamide inj 500mg</i>	2	
<i>cyclophosphamide inj 1000mg/10ml, 1gm/2ml, 1gm, 2000mg/20ml, 2gm/4ml, 2gm, 500mg/5ml</i>	5	

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<i>dacarbazine inj 100mg, 200mg</i>	1	
EVOMELA	5	PA NSO
FRINDOVYX	5	
GLEOSTINE CAPS 10MG, 40MG	4	
GLEOSTINE CAPS 100MG	5	
GRAFAPEX	5	PA NSO
IFOSFAMIDE INJ 1GM/20ML	1	
<i>ifosfamide inj 3gm/60ml</i>	1	
IVRA	5	PA NSO
<i>kemoplat</i>	1	
LEUKERAN	5	
MATULANE	5	PA NSO
<i>melphalan hydrochloride</i>	2	PA NSO
OPDIVO QVANTIG	5	PA NSO
<i>oxaliplatin inj 50mg/10ml</i>	2	
<i>oxaliplatin inj 100mg/20ml, 100mg, 50mg</i>	5	
<i>paraplatin inj 1000mg/100ml</i>	1	
TEMODAR INJ	5	PA NSO
<i>thiotepa inj 100mg, 15mg</i>	5	PA NSO
TREANDA INJ 100MG, 25MG	5	PA NSO
VALCHLOR	5	PA NSO
YONDELIS	5	PA NSO
ZANOSAR	5	
ZEPZELCA	5	PA NSO
<b>Antiandrogens</b>		
<i>abiraterone acetate tabs 250mg</i>	4	PA NSO
<i>abiraterone acetate tabs 500mg</i>	5	PA NSO
<i>abirtega</i>	4	PA NSO
<i>bicalutamide</i>	1	
ERLEADA	5	PA NSO
<i>nilutamide</i>	5	
NUBEQA	5	PA NSO
XTANDI	5	PA NSO
YONSA	5	PA NSO
<b>Antiangiogenic Agents</b>		
<i>lenalidomide</i>	5	PA NSO
POMALYST	5	QL(21 EA per 28 days); PA NSO
THALOMID	5	PA NSO
<b>Antiestrogens/Modifiers</b>		
EMCYT	5	
FASLODEX INJ 250MG/5ML	5	
<i>fulvestrant</i>	5	
ORSERDU	5	PA NSO
SOLTAMOX	5	

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<i>tamoxifen citrate tabs</i>	1	
<i>toremifene citrate</i>	5	PA NSO
<b>Antimetabolites</b>		
ALIMTA	5	PA NSO
ARRANON	5	
AXTLE	5	PA NSO
<i>cladribine</i>	5	B/D
<i>clofarabine</i>	5	
<i>cytarabine aqueous</i>	1	B/D
<i>cytarabine inj 100mg/ml, 20mg/ml</i>	1	B/D
DROXIA CAPS 200MG	3	
DROXIA CAPS 300MG, 400MG	4	
FLOXURIDINE INJ	5	B/D
<i>fluorouracil inj 1gm/20ml, 2.5gm/50ml, 500mg/10ml, 5gm/100ml</i>	2	B/D
FOLOTYN INJ 40MG/2ML	5	
<i>folotyn inj 20mg/ml</i>	5	
<i>gemcitabine hydrochloride inj 1gm/26.3ml, 200mg/5.26ml, 2gm/52.6ml</i>	2	
<i>gemcitabine hydrochloride inj 1gm/10ml, 200mg/2ml, 2gm/20ml</i>	5	
<i>hydroxyurea caps</i>	1	
<i>mercaptopurine tabs</i>	2	
<i>mercaptopurine susp</i>	5	
<i>nelarabine</i>	5	
<i>pemetrexed disodium</i>	5	PA NSO
PEMETREXED INJ 1GM/40ML	4	PA NSO
PEMETREXED INJ 100MG, 500MG	5	PA NSO
PEMETREXED INJ 100MG/4ML, 100MG, 1GM/40ML, 500MG/20ML, 500MG, 850MG/34ML	5	PA NSO
<i>pemetrexed inj 1000mg, 100mg, 500mg, 750mg</i>	5	PA NSO
PEMFEXY	5	PA NSO
PEMRYDI RTU	5	PA NSO
PRALATREXATE	5	
PURIXAN	5	
TABLOID	5	PA NSO
VYXEOS	5	PA NSO
<b>Antineoplastics, Other</b>		
ABRAXANE	5	
<i>adriamycin inj 50mg</i>	1	B/D
ADSTILADRIN	5	PA NSO
AKEEGA	5	PA NSO
ANKTIVA	5	PA NSO
<i>arsenic trioxide</i>	5	

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<i>azacitidine</i>	5	
<i>bleomycin sulfate</i>	1	B/D
BORTEZOMIB INJ 1MG, 2.5MG, 3.5MG/1.4ML	4	PA NSO
BORTEZOMIB INJ 3.5MG	5	PA NSO
<i>bortezomib inj 3.5mg</i>	5	PA NSO
COLUMVI	5	PA NSO
<i>dactinomycin</i>	5	PA NSO
<i>daunorubicin hydrochloride</i>	1	
<i>decitabine</i>	5	
DOCETAXEL INJ 80MG/8ML	5	
<i>docetaxel inj 160mg/16ml, 20mg/ml, 80mg/4ml</i>	2	
<i>docetaxel inj 160mg/8ml, 20mg/2ml</i>	5	
<i>doxorubicin hcl inj 2mg/ml, 50mg</i>	1	B/D
<i>doxorubicin hydrochloride liposomal</i>	5	
<i>doxorubicin hydrochloride inj 10mg</i>	1	B/D
ELREXFIO	5	PA NSO
ELZONRIS	5	PA NSO
EPKINLY	5	PA NSO
<i>eribulin mesylate</i>	5	
HALAVEN	5	
IBRANCE TABS 100MG, 125MG, 75MG	5	PA NSO
<i>idarubicin hcl</i>	5	
<i>idarubicin hydrochloride</i>	5	
IMDELLTRA	5	PA NSO
INREBIC	5	PA NSO
ISTODAX	5	
ITOVEBI	5	PA NSO
IWILFIN	5	PA NSO
IXEMPRA KIT	5	
JEVTANA	5	
KIMMTRAK	5	PA NSO
KISQALI FEMARA 200 DOSE	5	PA NSO
KISQALI FEMARA 400 DOSE	5	PA NSO
KISQALI FEMARA 600 DOSE	5	PA NSO
LAZCLUZE TABS 240MG	5	PA NSO
LAZCLUZE TABS 80MG	5	QL(60 EA per 30 days); PA NSO
<i>leucovorin calcium inj 100mg/10ml, 100mg, 200mg, 350mg, 500mg, 50mg</i>	1	
<i>leucovorin calcium tabs 5mg</i>	1	
<i>leucovorin calcium tabs 10mg, 15mg, 25mg</i>	4	
<i>levoleucovorin inj 50mg</i>	5	
LONSURF	5	PA NSO
LYSODREN	5	
<i>mitomycin inj 20mg, 40mg, 5mg</i>	5	

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<i>mutamycin</i>	5	
OGSIVEO	5	PA NSO
OJEMDA	5	PA NSO
ONCASPAR	5	
ONUREG	5	
<i>paclitaxel</i>	1	
<i>paclitaxel protein-bound particles</i>	5	
PEMETREXED INJ 100MG/4ML	5	PA NSO
PHEGO	5	PA NSO
PROLEUKIN	5	
REVUFORJ TABS 110MG, 160MG	5	PA NSO
ROMIDEPSIN INJ 27.5MG/5.5ML	5	
<i>romidepsin inj 10mg</i>	5	
RYLAZE	5	
TALVEY	5	PA NSO
TECVAYLI	5	PA NSO
TICE BCG	4	
TRISENOX INJ 12MG/6ML	5	
<i>valrubicin</i>	5	
VALSTAR	5	
VELCADE	5	PA NSO
<i>vinblastine sulfate inj 1mg/ml</i>	1	B/D
<i>vincristine sulfate inj 1mg/ml</i>	1	B/D
<i>vinorelbine tartrate</i>	1	
VONJO	5	PA NSO
ZALTRAP	5	
ZOLINZA	5	PA NSO
<b>Antineoplastics</b>		
OPDUALAG	5	PA NSO
<b>Aromatase Inhibitors, 3rd Generation</b>		
<i>anastrozole tabs</i>	1	
<i>exemestane</i>	2	
<i>letrozole</i>	2	
<b>Enzyme Inhibitors</b>		
ETOPOPHOS	5	
<i>etoposide inj 100mg/5ml, 1gm/50ml, 500mg/25ml</i>	1	
<i>irinotecan hydrochloride inj 100mg/5ml, 40mg/2ml</i>	1	
KYPROLIS	5	
<i>topotecan hcl inj 4mg/4ml</i>	2	
<i>topotecan hydrochloride</i>	2	
<b>Molecular Target Inhibitors</b>		
ALECENSA	5	PA NSO
ALIQOPA	5	PA NSO
ALUNBRIG	5	PA NSO

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AUGTYRO CAPS 160MG	5	PA NSO
AUGTYRO CAPS 40MG	5	PA NSO
AYVAKIT	5	PA NSO
BALVERSA	5	PA NSO
BELEODAQ	5	PA NSO
BOSULIF	5	PA NSO
BRAFTOVI CAPS 75MG	5	PA NSO
BRUKINSA	5	PA NSO
CABOMETYX	5	QL(30 EA per 30 days); PA NSO
CALQUENCE	5	PA NSO
CAPRELSA	5	PA NSO
COMETRIQ	5	PA NSO
COPIKTRA	5	PA NSO
COTELLIC	5	PA NSO
DANZITEN	5	PA NSO
<i>dasatinib</i>	5	PA NSO
DAURISMO	5	PA NSO
ERIVEDGE	5	PA NSO
<i>erlotinib hydrochloride tabs 100mg</i>	4	PA NSO
<i>erlotinib hydrochloride tabs 150mg, 25mg</i>	5	PA NSO
<i>everolimus tabs 10mg, 2.5mg, 5mg, 7.5mg</i>	5	PA NSO
<i>everolimus tbso 2mg, 3mg, 5mg</i>	5	PA NSO
EXKIVITY	5	PA NSO
FLUDARABINE PHOSPHATE INJ 50MG	5	
<i>fludarabine phosphate inj 50mg/2ml</i>	1	
FOTIVDA	5	PA NSO
FRUZAQLA	5	PA NSO
FYARRO	5	PA NSO
GAVRETO	5	PA NSO
<i>gefitinib</i>	5	PA NSO
GILOTRIF	5	PA NSO
GOMEKLI	5	PA NSO
IBRANCE CAPS 100MG, 125MG, 75MG	5	PA NSO
ICLUSIG	5	PA NSO
IDHIFA	5	PA NSO
<i>imatinib mesylate tabs 100mg</i>	3	PA NSO
<i>imatinib mesylate tabs 400mg</i>	4	PA NSO
IMBRUVICA CAPS, SUSP	5	PA NSO
IMBRUVICA TABS 420MG	5	PA NSO
IMKELDI	5	PA NSO
INLYTA	5	PA NSO
INQOVI	5	PA NSO
JAKAFI	5	QL(60 EA per 30 days); PA NSO
JAYPIRCA TABS 100MG	5	PA NSO

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JAYPIRCA TABS 50MG	5	QL(30 EA per 30 days); PA NSO
KISQALI	5	PA NSO
KOSELUGO	5	PA NSO
KRAZATI	5	PA NSO
<i>lapatinib ditosylate</i>	5	PA NSO
LENVIMA 10 MG DAILY DOSE	5	PA NSO
LENVIMA 12MG DAILY DOSE	5	PA NSO
LENVIMA 14 MG DAILY DOSE	5	PA NSO
LENVIMA 18 MG DAILY DOSE	5	PA NSO
LENVIMA 20 MG DAILY DOSE	5	PA NSO
LENVIMA 24 MG DAILY DOSE	5	PA NSO
LENVIMA 4 MG DAILY DOSE	5	PA NSO
LENVIMA 8 MG DAILY DOSE	5	PA NSO
LORBRENA	5	PA NSO
LUMAKRAS TABS 240MG	5	PA NSO
LUMAKRAS TABS 120MG, 320MG	5	PA NSO
LYNPARZA TABS	5	PA NSO
LYTGOBI	5	PA NSO
MEKINIST	5	PA NSO
MEKTOVI	5	PA NSO
NERLYNX	5	PA NSO
NINLARO	5	PA NSO
ODOMZO	5	PA NSO
OJJAARA	5	PA NSO
<i>pazopanib hydrochloride</i>	5	PA NSO
PEMAZYRE	5	PA NSO
PIQRAY 200MG DAILY DOSE	5	PA NSO
PIQRAY 250MG DAILY DOSE	5	PA NSO
PIQRAY 300MG DAILY DOSE	5	PA NSO
QINLOCK	5	PA NSO
RETEVMO TABS	5	PA NSO
RETEVMO CAPS	5	PA NSO
REZLIDHIA	5	PA NSO
ROMVIMZA	5	PA NSO
ROZLYTREK	5	PA NSO
RUBRACA	5	PA NSO
RYDAPT	5	PA NSO
SCEMBLIX TABS 100MG	5	PA NSO
SCEMBLIX TABS 20MG, 40MG	5	PA NSO
<i>sorafenib</i>	5	PA NSO
<i>sorafenib tosylate</i>	5	PA NSO
SPRYCEL	5	PA NSO
STIVARGA	5	PA NSO
<i>sunitinib malate</i>	5	PA NSO

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TABRECTA	5	PA NSO
TAFINLAR	5	PA NSO
TAGRISSE	5	PA NSO
TALZENNA	5	PA NSO
TASIGNA	5	PA NSO
TAZVERIK	5	PA NSO
<i>temsirolimus</i>	5	
TEPMETKO	5	PA NSO
TIBSOVO	5	PA NSO
TORISEL	5	
<i>torpenz</i>	5	PA NSO
TRUQAP	5	PA NSO
TUKYSA	5	PA NSO
TURALIO CAPS 125MG	5	PA NSO
VANFLYTA	5	PA NSO
VENCLEXTA STARTING PACK	5	PA NSO
VENCLEXTA TABS 10MG	3	PA NSO
VENCLEXTA TABS 100MG, 50MG	5	PA NSO
VERZENIO	5	PA NSO
VITRAKVI	5	PA NSO
VIZIMPRO	5	PA NSO
XALKORI	5	PA NSO
XOSPATA	5	PA NSO
XPOVIO 60 MG TWICE WEEKLY	5	PA NSO
XPOVIO 80 MG TWICE WEEKLY	5	PA NSO
XPOVIO TBPK 10MG	5	PA NSO
XPOVIO TBPK 40MG, 50MG, 60MG	5	PA NSO
ZEJULA CAPS	5	PA NSO
ZEJULA TABS 200MG, 300MG	5	PA NSO
ZEJULA TABS 100MG	5	QL(30 EA per 30 days); PA NSO
ZELBORAF	5	PA NSO
ZYDELIG	5	PA NSO
ZYKADIA TABS	5	PA NSO
<b><i>Monoclonal Antibodies/Antibody-Drug Conjugates</i></b>		
ADCETRIS	5	
ALYMSYS	5	PA NSO
ARZERRA	5	
AVASTIN	5	
BAVENCIO	5	PA NSO
BESPOUSA	5	PA NSO
BIZENGRI	5	PA NSO
BLINCYTO	5	PA NSO
CYRAMZA	5	PA NSO
DANYELZA	5	PA NSO

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DARZALEX	5	PA NSO
DARZALEX FASPRO	5	PA NSO
DATROWAY	5	PA NSO
ELAHERE	5	PA NSO
EMPLICITI	5	PA NSO
ENHERTU	5	PA NSO
ERBITUX	5	PA NSO
GAZYVA	5	PA NSO
HERCEPTIN HYLECTA	5	PA NSO
HERCEPTIN INJ 150MG	5	PA NSO
HERZUMA	5	PA NSO
IMFINZI	5	PA NSO
IMJUDO	5	PA NSO
JEMPERLI	5	PA NSO
KADCYLA	5	
KANJINTI	5	PA NSO
KEYTRUDA INJ 100MG/4ML	5	PA NSO
LIBTAYO	5	PA NSO
LOQTORZI	5	PA NSO
LUNSUMIO	5	PA NSO
MARGENZA	5	PA NSO
MONJUVI	5	PA NSO
MVASI	5	PA NSO
MYLOTARG	5	PA NSO
OGIVRI	5	PA NSO
ONTRUZANT	5	PA NSO
OPDIVO	5	PA NSO
PADCEV	5	PA NSO
PERJETA	5	PA NSO
POLIVY	5	PA NSO
PORTRAZZA	5	PA NSO
RIABNI	5	PA NSO
RITUXAN	5	PA NSO
RITUXAN HYCELA	5	PA NSO
RUXIENCE	5	PA NSO
RYBREVANT	5	PA NSO
SARCLISA	5	PA NSO
TECENTRIQ	5	PA NSO
TECENTRIQ HYBREZA	5	PA NSO
TEVIMBRA	5	PA NSO
TIVDAK	5	PA NSO
TRAZIMERA	5	PA NSO
TRODELVY	5	PA NSO
TRUXIMA	5	PA NSO

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VECTIBIX INJ 100MG/5ML, 400MG/20ML	5	PA NSO
VEGZELMA	5	PA NSO
YERVOY	5	PA NSO
ZIIHERA	5	PA NSO
ZYNLONTA	5	PA NSO
ZYNYZ	5	PA NSO
<b>Retinoids</b>		
<i>bexarotene</i>	5	PA NSO
PANRETIN	5	
<i>tretinoin caps 10mg</i>	5	PA NSO
<b>Treatment Adjuncts</b>		
<i>dexrazoxane</i>	5	
ELITEK	5	PA
<i>mesna inj</i>	1	
<i>mesna tabs</i>	5	
MESNEX TABS	5	
VORANIGO TABS 40MG	5	PA NSO
VORANIGO TABS 10MG	5	QL(60 EA per 30 days); PA NSO
<b>Antiparasitics</b>		
<b>Anthelmintics</b>		
<i>albendazole tabs</i>	5	
<i>ivermectin tabs 3mg</i>	2	PA
<i>praziquantel tabs</i>	4	
<b>Antiprotozoals</b>		
<i>atovaquone</i>	4	
<i>atovaquone/proguanil hcl tabs 62.5mg; 25mg</i>	2	
<i>atovaquone/proguanil hydrochloride</i>	2	
<i>chloroquine phosphate tabs</i>	1	
COARTEM	4	
<i>hydroxychloroquine sulfate tabs</i>	1	
<i>mefloquine hydrochloride</i>	1	
<i>nitazoxanide</i>	5	
<i>pentamidine isethionate inhalation solr</i>	2	B/D
<i>pentamidine isethionate inj</i>	2	
PRIMAQUINE PHOSPHATE TABS	3	
<i>pyrimethamine tabs</i>	5	
<i>quinine sulfate caps 324mg</i>	2	PA
<b>Antiparkinson Agents</b>		
<b>Anticholinergics</b>		
<i>benztropine mesylate tabs</i>	1	
<i>trihexyphenidyl hydrochloride</i>	2	
<b>Antiparkinson Agents, Other</b>		
<i>carbidopa/levodopa/entacapone</i>	4	
<i>entacapone</i>	2	

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Drug Name	Drug Tier	Requirements/Limits
ONGENTYS	4	ST
<i>tolcapone</i>	5	
<b>Dopamine Agonists</b>		
<i>apomorphine hydrochloride inj</i>	5	PA
<i>bromocriptine mesylate caps, tabs</i>	2	
<i>pramipexole dihydrochloride</i>	1	
<i>ropinirole er</i>	2	
<i>ropinirole hcl tabs 0.5mg, 1mg, 2mg, 4mg, 5mg</i>	1	
<i>ropinirole hydrochloride tabs 0.25mg, 3mg</i>	1	
<b>Dopamine Precursors and/or L-Amino Acid Decarboxylase Inhibitors</b>		
<i>carbidopa/levodopa</i>	1	
<i>carbidopa/levodopa er</i>	2	
<i>carbidopa/levodopa odt</i>	1	
<i>carbidopa tabs</i>	4	
RYTARY	4	
<b>Monoamine Oxidase B (MAO-B) Inhibitors</b>		
<i>rasagiline mesylate tabs</i>	2	
<i>selegiline hcl caps, tabs</i>	2	
<b>Antipsychotics</b>		
<b>1st Generation/Typical</b>		
<i>chlorpromazine hcl inj</i>	2	
<i>chlorpromazine hydrochloride conc, tabs</i>	2	
<i>fluphenazine decanoate inj</i>	2	
<i>fluphenazine hcl conc</i>	2	
<i>fluphenazine hydrochloride</i>	2	
<i>haloperidol decanoate inj</i>	2	
<i>haloperidol lactate</i>	2	
<i>haloperidol conc, tabs</i>	2	
<i>loxapine</i>	1	
MOLINDONE HYDROCHLORIDE	3	
<i>perphenazine tabs</i>	2	
<i>pimozide</i>	2	
<i>thioridazine hydrochloride</i>	2	
<i>thiothixene caps 10mg, 1mg, 2mg, 5mg</i>	4	
<i>trifluoperazine hcl tabs 10mg, 2mg, 5mg</i>	1	
<i>trifluoperazine hydrochloride tabs 1mg</i>	1	
<b>2nd Generation/Atypical</b>		
ABILIFY MAINTENA	5	ST NSO
ABILIFY MYCITE MAINTENANCE KIT	5	QL(30 EA per 30 days); ST NSO
ABILIFY MYCITE STARTER KIT	5	QL(30 EA per 30 days); ST NSO
<i>aripiprazole</i>	2	
<i>aripiprazole odt tbdp 15mg</i>	4	
<i>aripiprazole odt tbdp 10mg</i>	5	

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Drug Name	Drug Tier	Requirements/Limits
ARISTADA	5	ST NSO
ARISTADA INITIO	5	ST NSO
ASENAPINE MALEATE SL	4	
CAPLYTA	5	QL(30 EA per 30 days); ST NSO
FANAPT	5	ST NSO
FANAPT TITRATION PACK	4	ST NSO
INVEGA HAFYERA	5	ST NSO
INVEGA SUSTENNA INJ 39MG/0.25ML	4	ST NSO
INVEGA SUSTENNA INJ 117MG/0.75ML, 156MG/ML, 234MG/1.5ML, 78MG/0.5ML	5	ST NSO
INVEGA TRINZA	5	ST NSO
<i>lurasidone hydrochloride</i>	2	
LYBALVI	5	QL(30 EA per 30 days); ST NSO
NUPLAZID CAPS	5	QL(30 EA per 30 days); PA NSO
NUPLAZID TABS 10MG	5	QL(90 EA per 30 days); PA NSO
<i>olanzapine odt</i>	2	
OLANZAPINE INJ	3	
<i>olanzapine tabs</i>	2	
<i>paliperidone er</i>	4	ST NSO
PERSERIS	5	ST NSO
<i>quetiapine fumarate er</i>	2	
<i>quetiapine fumarate tabs 100mg, 200mg, 25mg, 300mg, 400mg, 50mg</i>	1	
REXULTI	5	ST NSO
RISPERDAL CONSTA INJ 12.5MG, 25MG	4	ST NSO
RISPERDAL CONSTA INJ 37.5MG, 50MG	5	ST NSO
<i>risperidone</i>	2	
<i>risperidone er inj 12.5mg</i>	2	
<i>risperidone er inj 25mg</i>	4	
<i>risperidone er inj 37.5mg, 50mg</i>	5	
<i>risperidone odt</i>	2	
SECUADO	5	ST NSO
VRAYLAR CPPK	4	QL(14 EA per 365 days); ST NSO
VRAYLAR CAPS	5	QL(30 EA per 30 days); ST NSO
<i>ziprasidone hcl</i>	2	
<i>ziprasidone mesylate</i>	2	ST NSO
ZYPREXA RELPREVV INJ 210MG	4	ST NSO
ZYPREXA RELPREVV INJ 300MG, 405MG	5	ST NSO
<b>Treatment-Resistant</b>		
<i>clozapine odt</i>	4	
<i>clozapine tabs 100mg, 200mg, 25mg, 50mg</i>	2	
VERSACLOZ	5	
<b>Antispasticity Agents</b>		
<b>Antispasticity Agents</b>		

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<i>baclofen inj 500mcg/ml</i>	4	B/D
<i>baclofen inj 20000mcg/20ml, 40mg/20ml, 50mcg/ml</i>	5	B/D
<i>baclofen tabs 10mg, 20mg, 5mg</i>	2	
BOTOX	4	PA
<i>dantrolene sodium caps 100mg, 25mg</i>	1	
DYSPORT	4	PA
GABLOFEN INJ 10000MCG/20ML, 20000MCG/20ML, 40000MCG/20ML	4	B/D
GABLOFEN INJ 50MCG/ML	5	B/D
LIORESAL INTRATHECAL INJ 0.05MG/ML	3	B/D
LIORESAL INTRATHECAL INJ 10MG/20ML	4	B/D
LIORESAL INTRATHECAL INJ 10MG/5ML	5	B/D
MYOBLOC	5	PA
<i>tizanidine hcl tabs 2mg</i>	1	
<i>tizanidine hydrochloride tabs</i>	1	
<i>tizanidine hydrochloride caps</i>	2	
XEOMIN INJ 100UNIT, 50UNIT	4	PA
XEOMIN INJ 200UNIT	5	PA
<b>Antivirals</b>		
<b><i>Anti-cytomegalovirus (CMV) Agents</i></b>		
<i>cidofovir</i>	5	
<i>ganciclovir inj 500mg/10ml, 500mg</i>	1	B/D
LIVTENCITY	5	
PREVYMIS INJ, TABS	5	
PREVYMIS PACK 20MG	4	
PREVYMIS PACK 120MG	5	
<i>valganciclovir</i>	2	
<i>valganciclovir hydrochloride</i>	5	
<b><i>Anti-hepatitis B (HBV) Agents</i></b>		
<i>adefovir dipivoxil</i>	4	
BARACLUDE SOLN	4	
<i>entecavir</i>	4	
<i>lamivudine tabs 100mg</i>	2	
VEMLIDY	5	
<b><i>Anti-hepatitis C (HCV) Agents</i></b>		
EPCLUSA	5	PA
HARVONI	5	PA
LEDIPASVIR/SOFOSBUVIR	5	PA
MAVYRET	5	PA
<i>ribavirin tabs 200mg</i>	2	
SOFOSBUVIR/VELPATASVIR	5	PA
SOVALDI	5	PA
ZEPATIER	5	PA
<b><i>Anti-HIV Agents, Integrase Inhibitors (INSTI)</i></b>		

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BIKTARVY	5	
CABENUVA	5	
DOVATO	5	
GENVOYA	5	
ISENTRESS HD	5	
ISENTRESS PACK, TABS	5	
ISENTRESS CHEW 25MG	4	
ISENTRESS CHEW 100MG	5	
JULUCA	5	
STRIBILD	5	
TIVICAY PD	5	
TIVICAY TABS 10MG	4	
TIVICAY TABS 25MG, 50MG	5	
VOCABRIA	5	
<b><i>Anti-HIV Agents, Non-nucleoside Reverse Transcriptase Inhibitors (NNRTI)</i></b>		
COMPLERA	5	
DELSTRIGO	5	
EDURANT	5	
<i>efavirenz</i>	4	
<i>efavirenz/emtricitabine/tenofovir disoproxil fumarate</i>	4	
<i>efavirenz/lamivudine/tenofovir disoproxil fumarate</i>	5	
<i>etravirine</i>	5	
INTELENCE TABS 25MG	4	
<i>nevirapine</i>	2	
<i>nevirapine er tb24 400mg</i>	2	
PIFELTRO	5	
<b><i>Anti-HIV Agents, Nucleoside and Nucleotide Reverse Transcriptase Inhibitors (NRTI)</i></b>		
<i>abacavir sulfate</i>	2	
<i>abacavir sulfate/lamivudine</i>	4	
<i>abacavir tabs</i>	2	
<i>abacavir soln</i>	4	
CIMDUO	5	
DESCOVY	5	
<i>emtricitabine</i>	4	
<i>emtricitabine/tenofovir disoproxil</i>	5	
<i>emtricitabine/tenofovir disoproxil fumarate tabs 200mg; 300mg</i>	4	
<i>emtricitabine/tenofovir disoproxil fumarate tabs 100mg; 150mg, 133mg; 200mg</i>	5	
EMTRIVA SOLN	4	
<i>lamivudine/zidovudine</i>	4	
<i>lamivudine soln 10mg/ml</i>	2	

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<i>lamivudine tabs 150mg, 300mg</i>	2	
ODEFSEY	5	
RETROVIR IV INFUSION	4	
<i>tenofovir disoproxil fumarate</i>	4	
TRIUMEQ	5	
TRIUMEQ PD	4	
TRIZIVIR	5	QL(60 EA per 30 days)
VIREAD POWD	5	
VIREAD TABS 150MG, 200MG, 250MG	5	
<i>zidovudine</i>	1	
<b>Anti-HIV Agents, Other</b>		
FUZEON	5	
<i>maraviroc</i>	5	
RUKOBIA	5	
SELZENTRY SOLN	5	
SELZENTRY TABS 25MG	4	
SELZENTRY TABS 75MG	5	
SUNLENCA	5	
TROGARZO	5	
TYBOST	3	
<b>Anti-HIV Agents, Protease Inhibitors (PI)</b>		
APTIVUS CAPS	5	
<i>atazanavir</i>	4	
<i>atazanavir sulfate</i>	4	
<i>darunavir</i>	5	
EVOTAZ	5	
<i>fosamprenavir calcium</i>	5	
LEXIVA SUSP	4	
<i>lopinavir/ritonavir</i>	4	
NORVIR PACK	3	
PREZCOBIX	5	
PREZISTA SUSP	5	
PREZISTA TABS 75MG	4	
PREZISTA TABS 150MG	5	
REYATAZ PACK	5	
<i>ritonavir</i>	2	
SYMTUZA	5	
VIRACEPT	5	
<b>Anti-influenza Agents</b>		
<i>amantadine hcl caps, soln, tabs</i>	2	
<i>oseltamivir phosphate caps 75mg</i>	2	QL(110 EA per 365 days)
<i>oseltamivir phosphate caps 30mg</i>	2	QL(168 EA per 365 days)
<i>oseltamivir phosphate caps 45mg</i>	2	QL(84 EA per 365 days)
<i>oseltamivir phosphate susr</i>	2	QL(1080 ML per 365 days)

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RELENZA DISKHALER	3	
<i>rimantadine hydrochloride</i>	1	
XOFLUZA TBPK 40MG, 80MG	4	
<b>Antitherpetic Agents</b>		
<i>acyclovir sodium inj 50mg/ml</i>	2	B/D
<i>acyclovir caps 200mg</i>	2	
<i>acyclovir susp 200mg/5ml</i>	2	
<i>acyclovir tabs 400mg, 800mg</i>	2	
<i>famciclovir tabs</i>	2	
<i>valacyclovir hydrochloride</i>	2	
<b>Antiviral, Coronavirus Agents</b>		
LAGEVRIO	4	QL(40 EA per 5 days)
PAXLOVID TBPK 150MG; 100MG	3	QL(20 EA per 5 days)
PAXLOVID TBPK 150MG; 100MG	3	QL(30 EA per 5 days)
VEKLURY INJ 100MG	5	
<b>Anxiolytics</b>		
<b>Anxiolytics, Other</b>		
<i>bupirone hcl tabs 15mg</i>	2	
<i>bupirone hydrochloride tabs 10mg, 30mg, 5mg, 7.5mg</i>	2	
<i>meprobamate</i>	4	
<b>Benzodiazepines</b>		
<i>alprazolam er tb24 0.5mg, 1mg</i>	2	QL(120 EA per 30 days)
<i>alprazolam er tb24 2mg, 3mg</i>	2	QL(90 EA per 30 days)
<i>alprazolam odt tbdp 2mg</i>	2	
<i>alprazolam odt tbdp 0.25mg, 0.5mg, 1mg</i>	2	QL(120 EA per 30 days)
<i>alprazolam xr tb24 0.5mg, 1mg</i>	2	QL(120 EA per 30 days)
<i>alprazolam xr tb24 2mg, 3mg</i>	2	QL(90 EA per 30 days)
<i>alprazolam tabs 0.25mg, 0.5mg, 1mg</i>	2	QL(120 EA per 30 days)
<i>alprazolam tabs 2mg</i>	2	QL(150 EA per 30 days)
<i>chlordiazepoxide hcl caps 10mg, 5mg</i>	2	QL(120 EA per 30 days)
<i>chlordiazepoxide hydrochloride caps 25mg</i>	2	QL(120 EA per 30 days)
<i>clorazepate dipotassium tabs 15mg</i>	2	QL(180 EA per 30 days)
<i>clorazepate dipotassium tabs 7.5mg</i>	2	QL(360 EA per 30 days)
<i>clorazepate dipotassium tabs 3.75mg</i>	2	QL(720 EA per 30 days)
<i>diazepam intensol</i>	2	
<i>diazepam oral soln</i>	2	
<i>diazepam tabs</i>	2	QL(120 EA per 30 days)
<i>diazepam inj 5mg/ml</i>	2	
<i>lorazepam inj 2mg/ml, 4mg/ml</i>	2	
<i>lorazepam tabs 0.5mg</i>	2	QL(120 EA per 30 days)
<i>lorazepam tabs 2mg</i>	2	QL(150 EA per 30 days)
<i>lorazepam tabs 1mg</i>	2	QL(90 EA per 30 days)
<i>midazolam hcl syrp</i>	2	

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<i>midazolam hcl inj 10mg/10ml, 10mg/2ml, 50mg/10ml, 5mg/5ml, 5mg/ml</i>	2	
<i>midazolam hydrochloride inj 10mg/10ml, 10mg/2ml, 25mg/5ml, 2mg/2ml, 50mg/10ml, 5mg/5ml, 5mg/ml</i>	2	
<i>oxazepam</i>	2	QL(120 EA per 30 days)
<b>Bipolar Agents</b>		
<b>Mood Stabilizers</b>		
<i>lithium</i>	1	
<i>lithium carbonate er</i>	1	
<i>lithium carbonate caps, tabs</i>	1	
<b>Blood Glucose Regulators</b>		
<b>Antidiabetic Agents</b>		
<i>acarbose tabs</i>	1	
ALOGLIPTIN	4	QL(30 EA per 30 days); ST
ALOGLIPTIN/METFORMIN HCL	4	QL(60 EA per 30 days); ST
ALOGLIPTIN/METFORMIN HYDROCHLORIDE	4	QL(60 EA per 30 days); ST
ALOGLIPTIN/PIOGLITAZONE TABS 12.5MG; 30MG, 25MG; 15MG, 25MG; 30MG, 25MG; 45MG	4	QL(30 EA per 30 days); ST
<i>glimepiride tabs 1mg, 2mg, 4mg</i>	1	
<i>glipizide er</i>	1	
<i>glipizide xl</i>	1	
<i>glipizide/metformin hydrochloride</i>	2	
GLIPIZIDE TABS 2.5MG	1	
<i>glipizide tabs 10mg, 5mg</i>	1	
GLYXAMBI	3	
JANUMET	3	ST
JANUMET XR	3	ST
JANUVIA	3	ST
JENTADUETO	3	QL(60 EA per 30 days); ST
JENTADUETO XR TB24 5MG; 1000MG	3	QL(30 EA per 30 days); ST
JENTADUETO XR TB24 2.5MG; 1000MG	3	QL(60 EA per 30 days); ST
<i>metformin hydrochloride er tb24 500mg, 750mg</i>	1	
<i>metformin hydrochloride soln</i>	1	
<i>metformin hydrochloride tabs 1000mg, 500mg, 850mg</i>	1	
<i>miglitol</i>	2	
MOUNJARO	3	PA
<i>nateglinide</i>	2	
NESINA	4	QL(30 EA per 30 days); ST
OSENI TABS 12.5MG; 30MG, 25MG; 15MG, 25MG; 30MG, 25MG; 45MG	4	QL(30 EA per 30 days); ST
OZEMPIC INJ 2MG/3ML, 4MG/3ML, 8MG/3ML	3	PA
<i>pioglitazone hcl-glimepiride</i>	2	
<i>pioglitazone hcl/metformin hcl</i>	2	
<i>pioglitazone hcl tabs 45mg</i>	2	

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<i>pioglitazone hydrochloride tabs 15mg, 30mg</i>	2	
<i>repaglinide</i>	2	
RYBELSUS TABS 1.5MG, 4MG, 9MG	3	PA
RYBELSUS TABS 14MG, 3MG, 7MG	3	PA
SYMLINPEN 120	5	PA
SYMLINPEN 60	5	PA
SYNJARDY	3	
SYNJARDY XR	3	
TRADJENTA	3	QL(30 EA per 30 days); ST
TRIJARDY XR	3	
TRULICITY	3	PA
XIGDUO XR	3	
XULTOPHY 100/3.6	4	ST
<b><i>Glycemic Agents</i></b>		
<i>diazoxide susp</i>	5	
GLUCAGEN HYPOKIT	3	
GLUCAGON EMERGENCY KIT	3	
GLUCAGON EMERGENCY KIT FOR LOW BLOOD SUGAR	3	
GVOKE HYPOPEN 1-PACK	4	
GVOKE HYPOPEN 2-PACK	4	
GVOKE KIT	4	
GVOKE PFS INJ 1MG/0.2ML	4	
<b><i>Insulins</i></b>		
HUMALOG	3	QL(60 ML per 30 days)
HUMALOG JUNIOR KWIKPEN	3	QL(60 ML per 30 days)
HUMALOG KWIKPEN	3	QL(60 ML per 30 days)
HUMALOG MIX 50/50	3	QL(60 ML per 30 days)
HUMALOG MIX 50/50 KWIKPEN	3	QL(60 ML per 30 days)
HUMALOG MIX 75/25	3	QL(60 ML per 30 days)
HUMALOG MIX 75/25 KWIKPEN	3	QL(60 ML per 30 days)
<i>humulin 70/30</i>	2	QL(60 ML per 30 days)
HUMULIN 70/30 KWIKPEN	3	QL(60 ML per 30 days)
<i>humulin n</i>	2	QL(60 ML per 30 days)
HUMULIN N KWIKPEN	3	QL(60 ML per 30 days)
<i>humulin r</i>	2	QL(60 ML per 30 days)
HUMULIN R U-500 (CONCENTRATED)	3	QL(60 ML per 30 days)
HUMULIN R U-500 KWIKPEN	3	QL(60 ML per 30 days)
LANTUS	3	QL(60 ML per 30 days)
LANTUS SOLOSTAR	3	QL(60 ML per 30 days)
NOVOLOG	4	QL(60 ML per 30 days); ST
NOVOLOG FLEXPEN	4	QL(60 ML per 30 days); ST
NOVOLOG FLEXPEN RELION	4	QL(60 ML per 30 days); ST
NOVOLOG MIX 70/30	4	QL(60 ML per 30 days); ST

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NOVOLOG MIX 70/30 PREFILLED FLEXPEN	4	QL(60 ML per 30 days); ST
NOVOLOG MIX 70/30 PREFILLED FLEXPEN RELION	4	QL(60 ML per 30 days); ST
NOVOLOG MIX 70/30 RELION	4	QL(60 ML per 30 days); ST
NOVOLOG PENFILL	4	QL(60 ML per 30 days); ST
NOVOLOG RELION	4	QL(60 ML per 30 days); ST
TOUJEO MAX SOLOSTAR	3	QL(27 ML per 30 days)
TOUJEO SOLOSTAR	3	QL(27 ML per 30 days)
TRESIBA	3	QL(54 ML per 30 days)
TRESIBA FLEXTOUCH	3	QL(54 ML per 30 days)
<b>Blood Products and Modifiers</b>		
<i>Anticoagulants</i>		
<i>dabigatran etexilate caps 110mg</i>	2	
<i>dabigatran etexilate caps 150mg, 75mg</i>	4	
ELIQUIS STARTER PACK	3	QL(148 EA per 365 days)
ELIQUIS TABS 2.5MG	3	QL(60 EA per 30 days)
ELIQUIS TABS 5MG	3	QL(90 EA per 30 days)
<i>enoxaparin sodium</i>	4	
<i>fondaparinux sodium inj 2.5mg/0.5ml</i>	4	
<i>fondaparinux sodium inj 10mg/0.8ml, 5mg/0.4ml, 7.5mg/0.6ml</i>	5	
FRAGMIN INJ 10000UNIT/4ML, 2500UNIT/0.2ML	4	
FRAGMIN INJ 10000UNIT/ML, 12500UNIT/0.5ML, 15000UNIT/0.6ML, 18000UNIT/0.72ML, 5000UNIT/0.2ML, 7500UNIT/0.3ML, 95000UNIT/3.8ML	5	
<i>heparin sodium/d5w inj 5%; 100unit/ml, 5%; 25000unit/500ml, 5%; 40unit/ml</i>	2	
<i>heparin sodium/dextrose inj 5%; 25000unit/250ml, 5%; 25000unit/500ml</i>	2	
<i>heparin sodium/nacl 0.45% inj 25000unit/250ml; 0.45%</i>	2	
<i>heparin sodium/sodium chloride 0.9% premix inj 1000unit/500ml; 0.9%</i>	2	
<i>heparin sodium/sodium chloride 0.9% inj 1000unit/500ml; 0.9%</i>	2	
<i>heparin sodium/sodium chloride inj 25000unit/250ml; 0.45%, 25000unit/500ml; 0.45%</i>	2	
<i>heparin sodium inj 10000unit/ml, 1000unit/ml, 20000unit/ml, 5000unit/ml</i>	2	
<i>jantoven</i>	1	
<i>warfarin sodium tabs</i>	1	
XARELTO STARTER PACK	3	
XARELTO TABS	3	
XARELTO SUSR	5	
<b>Blood Products and Modifiers, Other</b>		
<i>anagrelide hydrochloride</i>	2	

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Drug Name	Drug Tier	Requirements/Limits
ARANESP ALBUMIN FREE INJ 10MCG/0.4ML, 25MCG/0.42ML, 25MCG/ML, 40MCG/0.4ML, 40MCG/ML, 60MCG/ML	4	PA
ARANESP ALBUMIN FREE INJ 100MCG/0.5ML, 100MCG/ML, 150MCG/0.3ML, 200MCG/0.4ML, 200MCG/ML, 300MCG/0.6ML, 500MCG/ML, 60MCG/0.3ML	5	PA
EPOGEN INJ 10000UNIT/ML, 20000UNIT/ML, 2000UNIT/ML, 3000UNIT/ML, 4000UNIT/ML	4	PA
FULPHILA	5	
FYLNETRA	5	
GRANIX	5	
MOZOBIL	5	PA
MULPLETA	5	PA
NEULASTA	5	
NEULASTA ONPRO KIT	5	
NEUPOGEN	5	
NIVESTYM	5	
NPLATE	5	PA
NYVEPRIA	5	
PLERIXAFOR	5	PA
PROCRIT INJ 10000UNIT/ML, 2000UNIT/ML, 3000UNIT/ML, 4000UNIT/ML	4	PA
PROCRIT INJ 20000UNIT/ML, 40000UNIT/ML	5	PA
PROMACTA	5	PA
REBLOZYL	5	PA
RETACRIT INJ 10000UNIT/ML, 20000UNIT/2ML, 20000UNIT/ML, 2000UNIT/ML, 3000UNIT/ML, 4000UNIT/ML	4	PA
RETACRIT INJ 40000UNIT/ML	5	PA
STIMUFEND	5	
UDENYCA	5	
UDENYCA ONBODY	5	
ZIEXTENZO	5	
<b>Hemostasis Agents</b>		
<i>aminocaproic acid inj</i>	1	
<i>aminocaproic acid tabs</i>	2	
<i>tranexamic acid inj, tabs</i>	2	
<b>Platelet Modifying Agents</b>		
<i>aspirin/dipyridamole</i>	2	
<i>aspirin/dipyridamole er</i>	2	
BRILINTA	3	
CABLIVI	5	PA
<i>cilostazol</i>	1	

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Drug Name	Drug Tier	Requirements/Limits
<i>clopidogrel</i>	1	
DOPTELET	5	PA
<i>prasugrel hydrochloride</i>	2	
<b>Cardiovascular Agents</b>		
<b>Alpha-adrenergic Agonists</b>		
<i>clonidine hydrochloride tabs 0.1mg, 0.2mg, 0.3mg</i>	1	
<i>clonidine ptwk 0.1mg/24hr</i>	2	
<i>droxidopa</i>	5	
<i>midodrine hydrochloride</i>	2	
<b>Alpha-adrenergic Blocking Agents</b>		
<i>phenoxybenzamine hydrochloride</i>	5	
<i>phentolamine mesylate inj 5mg</i>	1	
<i>prazosin hydrochloride caps</i>	2	
<b>Angiotensin II Receptor Antagonists</b>		
<i>candesartan cilexetil</i>	2	
<i>irbesartan</i>	1	
<i>losartan potassium tabs</i>	1	
<i>olmesartan medoxomil tabs</i>	2	
<i>telmisartan</i>	2	
<i>valsartan tabs</i>	2	
<b>Angiotensin-converting Enzyme (ACE) Inhibitors</b>		
<i>benazepril hydrochloride tabs</i>	1	
<i>captopril tabs</i>	2	
<i>enalapril maleate tabs</i>	1	
<i>enalapril maleate soln</i>	4	
<i>enalaprilat</i>	1	
<i>fosinopril sodium</i>	1	
<i>lisinopril tabs</i>	1	
<i>moexipril hydrochloride</i>	1	
<i>perindopril erbumine</i>	1	
<i>quinapril hydrochloride</i>	1	
<i>ramipril</i>	1	
<i>trandolapril</i>	1	
<b>Antiarrhythmics</b>		
<i>amiodarone hydrochloride inj</i>	1	
<i>amiodarone hydrochloride tabs 200mg</i>	1	
<i>amiodarone hydrochloride tabs 100mg</i>	2	
DIGOXIN SOLN	3	
<i>digoxin tabs 125mcg</i>	1	
<i>digoxin tabs 250mcg</i>	2	
<i>dofetilide</i>	2	
<i>flecainide acetate</i>	2	
LANOXIN PEDIATRIC	4	
<i>lidocaine hcl in d5w inj 5%; 4mg/ml, 5%; 8mg/ml</i>	2	

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Drug Name	Drug Tier	Requirements/Limits
<i>lidocaine hcl/dextrose inj 5%; 4mg/ml, 5%; 8mg/ml</i>	2	
<i>lidocaine hcl inj 100mg/5ml, 50mg/5ml</i>	1	
<i>mexiletine hydrochloride caps</i>	2	
MULTAQ	4	
NEXTERONE INJ 150MG/100ML; 42.1MG/ML	3	
NEXTERONE INJ 360MG/200ML; 41.4MG/ML	5	
<i>procainamide hydrochloride</i>	1	
<i>propafenone hcl</i>	2	
<i>propafenone hydrochloride er</i>	2	
<i>propafenone hydrochloride tabs 300mg</i>	2	
<i>quinidine gluconate cr</i>	2	
<i>quinidine gluconate er</i>	2	
<i>quinidine sulfate tabs</i>	2	
<i>sorine tabs 120mg, 160mg, 80mg</i>	1	
<i>sotalol hcl (af) tabs 80mg</i>	1	
<i>sotalol hcl af</i>	1	
<i>sotalol hcl tabs 120mg, 160mg, 240mg</i>	1	
<i>sotalol hydrochloride (af)</i>	1	
<i>sotalol hydrochloride tabs 120mg, 160mg, 80mg</i>	1	
SOTYLIZE	4	
<b>Beta-adrenergic Blocking Agents</b>		
<i>acebutolol hydrochloride</i>	1	
<i>atenolol tabs</i>	1	
<i>betaxolol hcl tabs 10mg, 20mg</i>	4	
<i>bisoprolol fumarate</i>	1	
<i>carvedilol</i>	1	
<i>carvedilol phosphate er</i>	4	
<i>esmolol hcl inj 100mg/10ml</i>	1	
<i>esmolol hydrochloride in sodium chloride</i>	2	
<i>esmolol hydrochloride in sodium chloride double strength</i>	2	
<i>esmolol hydrochloride/sodium chloride inj 2000mg/100ml; 4.1mg/ml, 2500mg/250ml; 5.9mg/ml</i>	2	
HEMANGEOL	4	
KAPSPARGO SPRINKLE	4	
<i>labetalol hydrochloride inj 5mg/ml</i>	1	
<i>labetalol hydrochloride tabs 100mg, 200mg, 300mg</i>	1	
<i>metoprolol succinate er</i>	1	
<i>metoprolol tartrate tabs</i>	1	
<i>metoprolol tartrate inj 5mg/5ml</i>	1	
<i>nadolol tabs 20mg, 40mg, 80mg</i>	2	
<i>nebivolol hydrochloride</i>	2	
<i>pindolol tabs</i>	2	
<i>propranolol hcl inj</i>	1	
<i>propranolol hcl oral soln 40mg/5ml</i>	1	

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Drug Name	Drug Tier	Requirements/Limits
<i>propranolol hcl tabs 40mg</i>	1	
<i>propranolol hydrochloride er</i>	2	
<i>propranolol hydrochloride soln</i>	1	
<i>propranolol hydrochloride tabs 10mg, 20mg, 60mg, 80mg</i>	1	
<b>Calcium Channel Blocking Agents, Dihydropyridines</b>		
<i>amlodipine besylate tabs</i>	1	
<i>felodipine er</i>	2	
<i>isradipine</i>	2	
<i>nicardipine hcl caps 20mg</i>	2	
<i>nicardipine hcl caps 30mg</i>	4	
NICARDIPINE HYDROCHLORIDE/SODIUM CHLORIDE INJ 40MG/200ML; 0.9%	3	
<i>nicardipine hydrochloride/sodium chloride inj 20mg/200ml; 0.9%, 40mg/200ml; 0.9%</i>	3	
NICARDIPINE HYDROCHLORIDE INJ 20MG/200ML; 0.9%	3	
<i>nicardipine hydrochloride inj 2.5mg/ml</i>	2	
<i>nifedipine er</i>	1	
<i>nimodipine caps</i>	4	
<b>Calcium Channel Blocking Agents, Nondihydropyridines</b>		
<i>cartia xt</i>	2	
<i>dilt-xr</i>	1	
<i>diltiazem hcl cd</i>	2	
<i>diltiazem hcl er cp12 90mg</i>	1	
<i>diltiazem hcl er cp24 120mg, 180mg, 240mg, 420mg</i>	2	
<i>diltiazem hcl er tb24</i>	2	
<i>diltiazem hcl inj 100mg, 50mg/10ml</i>	1	
<i>diltiazem hcl tabs 30mg, 60mg</i>	1	
<i>diltiazem hydrochloride er cp24 120mg, 180mg, 240mg</i>	1	
<i>diltiazem hydrochloride er cp24 120mg, 180mg, 240mg, 300mg, 360mg</i>	2	
<i>diltiazem hydrochloride er tb24 120mg, 180mg, 240mg, 300mg, 360mg</i>	2	
<i>diltiazem hydrochloride inj 125mg/25ml, 25mg/5ml</i>	1	
<i>diltiazem hydrochloride tabs 120mg, 90mg</i>	1	
<i>taztia xt</i>	2	
<i>tiadylt er</i>	2	
<i>verapamil hcl er cp24 100mg, 300mg</i>	2	
<i>verapamil hcl er cp24 120mg, 180mg, 240mg</i>	4	
<i>verapamil hcl er tbc 120mg</i>	1	
<i>verapamil hcl sr cp24 360mg</i>	2	
<i>verapamil hcl sr cp24 120mg, 180mg, 240mg</i>	4	
<i>verapamil hcl tabs 40mg, 80mg</i>	1	
<i>verapamil hydrochloride er cp24 200mg</i>	2	

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Drug Name	Drug Tier	Requirements/Limits
<i>verapamil hydrochloride er tbc</i> 180mg, 240mg	1	
<i>verapamil hydrochloride inj</i>	1	
<i>verapamil hydrochloride tabs</i> 120mg	1	
<b>Cardiovascular Agents, Other</b>		
<i>acetazolamide sodium</i>	5	
<i>aliskiren</i>	4	
<i>amiloride/hydrochlorothiazide</i>	1	
<i>amlodipine besylate/benazepril hcl caps</i> 10mg; 40mg	1	
<i>amlodipine besylate/benazepril hydrochloride</i>	1	
<i>amlodipine besylate/valsartan</i>	2	
<i>atenolol/chlorthalidone</i>	1	
<i>benazepril hydrochloride/hydrochlorothiazide</i>	1	
<i>bisoprolol fumarate/hydrochlorothiazide</i>	1	
<i>candesartan cilexetil/hydrochlorothiazide</i>	2	
CORLANOR TABS	4	
CORLANOR SOLN	4	
<i>dobutamine hcl/d5w inj</i> 5%; 1mg/ml	1	B/D
<i>dobutamine hcl inj</i> 250mg/20ml	1	B/D
<i>dobutamine hydrochloride/dextrose</i> 5%	1	B/D
<i>dopamine hydrochloride</i>	1	B/D
<i>dopamine hydrochloride/dextrose</i>	1	B/D
<i>dopamine/d5w inj</i> 5%; 3.2mg/ml	1	B/D
<i>enalapril maleate/hydrochlorothiazide</i>	1	
ENTRESTO CPSP	3	
ENTRESTO TABS	3	QL(60 EA per 30 days)
<i>fosinopril sodium/hydrochlorothiazide</i>	2	
<i>irbesartan/hydrochlorothiazide</i>	1	
<i>isosorbide dinitrate/hydralazine hydrochloride</i>	4	
<i>ivabradine hydrochloride</i>	4	
<i>lisinopril/hydrochlorothiazide</i>	1	
<i>losartan potassium/hydrochlorothiazide</i>	1	
<i>metoprolol/hydrochlorothiazide</i>	1	
<i>metyrosine</i>	5	
<i>milrinone lactate in dextrose</i>	1	B/D
<i>norepinephrine bitartrate inj</i> 1mg/ml	2	
<i>olmesartan medoxomil/hydrochlorothiazide</i>	2	
<i>pentoxifylline er</i>	1	
QUINAPRIL/HYDROCHLOROTHIAZIDE TABS 25MG; 20MG	1	
<i>quinapril/hydrochlorothiazide tabs</i> 12.5mg; 10mg, 12.5mg; 20mg	1	
<i>ranolazine er</i>	2	
<i>spironolactone/hydrochlorothiazide</i>	1	
<i>telmisartan/hydrochlorothiazide</i>	2	

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Drug Name	Drug Tier	Requirements/Limits
<i>trandolapril/verapamil hcl er</i>	2	
<i>triamterene/hydrochlorothiazide caps 25mg; 37.5mg</i>	1	
<i>triamterene/hydrochlorothiazide tabs</i>	1	
<i>valsartan/hydrochlorothiazide</i>	1	
VYNDAMAX	5	PA
<b>Diuretics, Loop</b>		
<i>bumetanide inj, tabs</i>	2	
<i>ethacrynate sodium</i>	5	
<i>furosemide inj, oral soln, tabs</i>	1	
<i>toremide tabs</i>	1	
<b>Diuretics, Potassium-sparing</b>		
<i>amiloride hcl tabs</i>	1	
<i>triamterene caps</i>	4	
<b>Diuretics, Thiazide</b>		
<i>chlorothiazide sodium</i>	1	
<i>chlorthalidone tabs 25mg, 50mg</i>	1	
DIURIL SUSP	4	
<i>hydrochlorothiazide caps, tabs</i>	1	
<i>indapamide tabs</i>	1	
<i>metolazone</i>	2	
<b>Dyslipidemics, Fibric Acid Derivatives</b>		
<i>fenofibrate micronized caps 134mg, 200mg, 67mg</i>	2	
<i>fenofibrate caps 200mg, 43mg, 67mg</i>	2	
<i>fenofibrate tabs 120mg, 145mg, 160mg, 48mg, 54mg</i>	2	
<i>fenofibric acid</i>	2	
<i>fenofibric acid dr</i>	2	
<i>gemfibrozil tabs</i>	2	
<b>Dyslipidemics, HMG CoA Reductase Inhibitors</b>		
<i>atorvastatin calcium</i>	1	
<i>lovastatin tabs</i>	1	
<i>pravastatin sodium</i>	1	
<i>rosuvastatin calcium tabs</i>	2	
<i>simvastatin tabs</i>	1	
<b>Dyslipidemics, Other</b>		
<i>cholestyramine light</i>	2	
<i>cholestyramine pack, powd</i>	2	
<i>colesevelam hydrochloride pack</i>	2	
<i>colestipol hcl gran, tabs</i>	2	
<i>ezetimibe</i>	2	
<i>icosapent ethyl</i>	4	
JUXTAPID CAPS 10MG, 20MG, 30MG, 5MG	5	PA
<i>niacin er</i>	4	
<i>niacin tabs 500mg</i>	2	
<i>niacor</i>	2	

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Drug Name	Drug Tier	Requirements/Limits
<i>omega-3-acid ethyl esters</i>	4	
PRALUENT	3	QL(2 ML per 28 days)
<i>prevalite</i>	2	
REPATHA	3	QL(3 ML per 28 days)
REPATHA PUSHTRONEX SYSTEM	3	QL(3.5 ML per 28 days)
REPATHA SURECLICK	3	QL(3 ML per 28 days)
<b>Mineralocorticoid Receptor Antagonists</b>		
<i>eplerenone</i>	2	
KERENDIA	4	QL(30 EA per 30 days); PA
<i>spironolactone tabs</i>	1	
<b>Sodium-Glucose Co-Transporter 2 Inhibitors (SGLT2i)</b>		
FARXIGA	3	
JARDIANCE	3	
<b>Vasodilators, Direct-acting Arterial/Venous</b>		
<i>isosorbide dinitrate tabs 10mg, 20mg, 30mg, 5mg</i>	1	
<i>isosorbide mononitrate</i>	1	
<i>isosorbide mononitrate er</i>	1	
NITRO-BID	3	
<i>nitroglycerin in dextrose 5%</i>	2	
<i>nitroglycerin transdermal</i>	1	
<i>nitroglycerin inj 5mg/ml</i>	2	
<i>nitroglycerin translingual soln 0.4mg/spray</i>	2	
<i>nitroglycerin sublingual 0.3mg, 0.4mg, 0.6mg</i>	2	
VERQUVO	3	QL(30 EA per 30 days); PA
<b>Vasodilators, Direct-acting Arterial</b>		
<i>hydralazine hcl inj</i>	1	
<i>hydralazine hydrochloride tabs</i>	1	
<i>minoxidil tabs</i>	1	
<b>Central Nervous System Agents</b>		
<b>Attention Deficit Hyperactivity Disorder Agents, Amphetamines</b>		
<i>amphetamine/dextroamphetamine cp24</i>	2	QL(120 EA per 30 days)
<i>amphetamine/dextroamphetamine tabs</i>	2	QL(60 EA per 30 days)
<i>dextroamphetamine sulfate er</i>	4	QL(180 EA per 30 days)
<i>dextroamphetamine sulfate soln</i>	4	QL(1800 ML per 30 days)
<i>dextroamphetamine sulfate tabs 10mg, 5mg</i>	2	QL(180 EA per 30 days)
<b>Attention Deficit Hyperactivity Disorder Agents, Non-amphetamines</b>		
<i>atomoxetine</i>	2	
<i>atomoxetine hydrochloride caps 10mg, 25mg, 40mg, 60mg, 80mg</i>	2	
<i>clonidine hydrochloride er</i>	2	
<i>clonidine hydrochloride tb12 0.1mg</i>	2	
<i>dexmethylphenidate hcl er cp24 15mg, 20mg, 30mg, 35mg</i>	4	QL(30 EA per 30 days)
<i>dexmethylphenidate hcl tabs 10mg, 5mg</i>	2	QL(60 EA per 30 days)

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<i>dexmethylphenidate hydrochloride er cp24 10mg, 15mg, 30mg, 40mg, 5mg</i>	4	QL(30 EA per 30 days)
<i>dexmethylphenidate hydrochloride cp24</i>	4	QL(30 EA per 30 days)
<i>dexmethylphenidate hydrochloride tabs 2.5mg</i>	2	QL(60 EA per 30 days)
<i>methylphenidate hydrochloride cd cpcr 10mg, 20mg, 30mg, 50mg, 60mg</i>	4	QL(30 EA per 30 days)
<i>methylphenidate hydrochloride er cp24 10mg, 20mg, 30mg, 40mg</i>	4	QL(30 EA per 30 days)
<i>methylphenidate hydrochloride er cpcr 20mg, 30mg, 40mg, 50mg</i>	4	QL(30 EA per 30 days)
<i>methylphenidate hydrochloride er tb24 18mg</i>	4	QL(30 EA per 30 days)
<i>methylphenidate hydrochloride er tbcr 10mg, 20mg</i>	2	QL(90 EA per 30 days)
<i>methylphenidate hydrochloride er tbcr 27mg, 36mg, 54mg, 72mg</i>	4	QL(30 EA per 30 days)
<i>methylphenidate hydrochloride er tbcr 18mg</i>	4	QL(90 EA per 30 days)
<i>methylphenidate hydrochloride chew 10mg</i>	4	QL(180 EA per 30 days)
<i>methylphenidate hydrochloride chew 2.5mg, 5mg</i>	4	QL(90 EA per 30 days)
<i>methylphenidate hydrochloride tabs</i>	2	QL(90 EA per 30 days)
<i>methylphenidate hydrochloride soln</i>	2	QL(900 ML per 30 days)
<b>Central Nervous System, Other</b>		
<i>butalbital/acetaminophen/caffeine caps</i>	2	
<i>butalbital/acetaminophen/caffeine tabs 325mg; 50mg; 40mg</i>	2	
<i>butalbital/aspirin/caffeine caps</i>	2	
<i>caffeine citrate inj</i>	2	
<i>caffeine citrate oral soln 20mg/ml</i>	2	
COBENFY	5	QL(60 EA per 30 days); PA NSO
COBENFY STARTER PACK	5	QL(112 EA per 365 days); PA NSO
EXSERVAN	5	
INGREZZA	5	PA
NUEDEXTA	5	PA
<i>riluzole</i>	4	
<i>tetrabenazine tabs 12.5mg</i>	4	PA
<i>tetrabenazine tabs 25mg</i>	5	PA
VEOZAH	4	QL(30 EA per 30 days); PA
<b>Fibromyalgia Agents</b>		
SAVELLA	3	PA NSO
SAVELLA TITRATION PACK	3	PA NSO
<b>Multiple Sclerosis Agents</b>		
AVONEX PEN	5	
AVONEX INJ 30MCG/0.5ML	5	
BETASERON	5	
<i>dalfampridine er</i>	3	PA
<i>dimethyl fumarate</i>	4	QL(60 EA per 30 days)
<i>dimethyl fumarate starterpack</i>	5	QL(120 EA per 365 days)

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EXTAVIA	5	
<i>fingolimod hydrochloride</i>	5	
GILENYA CAPS 0.25MG	5	
<i>glatiramer acetate</i>	5	
<i>glatopa</i>	5	
MAVENCLAD	5	PA
MAYZENT STARTER PACK TBPK 0.25MG	4	QL(14 EA per 365 days)
MAYZENT STARTER PACK TBPK 0.25MG	5	QL(24 EA per 365 days)
MAYZENT TABS 0.25MG	5	QL(120 EA per 30 days)
MAYZENT TABS 1MG, 2MG	5	QL(30 EA per 30 days)
<i>mitoxantrone hcl inj 2mg/ml</i>	2	
PLEGRIDY	5	
PLEGRIDY STARTER PACK	5	
REBIF	5	
REBIF REBIDOSE	5	
REBIF REBIDOSE TITRATION PACK	5	
REBIF TITRATION PACK	5	
<i>teriflunomide</i>	5	
TYSABRI	5	PA
VUMERITY	5	
ZEPOSIA	5	PA
ZEPOSIA 7-DAY STARTER PACK	5	PA
ZEPOSIA STARTER KIT	5	PA
<b>Dental and Oral Agents</b>		
<i>Dental and Oral Agents</i>		
<i>cevimeline hydrochloride</i>	2	
<i>chlorhexidine gluconate soln</i>	1	
<i>doxycycline hyclate tabs 20mg</i>	2	
KEPIVANCE INJ 5.16MG	5	PA
<i>kourzeq</i>	2	
<i>lidocaine hcl mouth/throat soln 4%</i>	1	
<i>lidocaine hydrochloride viscous</i>	1	
<i>lidocaine viscous</i>	1	
<i>oralone dental paste</i>	2	
<i>perio gard</i>	1	
<i>pilocarpine hydrochloride</i>	2	
<i>triamcinolone acetonide dental paste</i>	2	
<b>Dermatological Agents</b>		
<i>Acne and Rosacea Agents</i>		
<i>acutane</i>	4	
<i>acitretin</i>	4	
<i>adapalene gel 0.1%</i>	2	
<i>amnestem</i>	4	
<i>azelaic acid</i>	2	

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Drug Name	Drug Tier	Requirements/Limits
AZELEX	4	PA
<i>claravis</i>	4	
<i>isotretinoin caps 10mg, 20mg, 30mg, 40mg</i>	4	
<i>isotretinoin caps 25mg, 35mg</i>	5	
<i>metronidazole crea 0.75%</i>	2	
<i>metronidazole gel 0.75%, 1%</i>	2	
<i>metronidazole lotn 0.75%</i>	2	
<i>tazarotene crea 0.05%</i>	4	PA
<i>tazarotene crea 0.1%</i>	4	PA
<i>tazarotene gel</i>	4	PA
<i>tretinoin crea 0.025%</i>	2	PA
<i>tretinoin crea 0.05%, 0.1%</i>	4	PA
<i>tretinoin gel 0.05%</i>	2	PA
<i>tretinoin gel 0.01%, 0.025%</i>	4	PA
<i>zenatane</i>	4	
<b>Dermatitis and Pruritus Agents</b>		
ADBRY INJ 300MG/2ML	5	PA
<i>ala-cort</i>	1	
<i>alclometasone dipropionate</i>	1	
<i>amcinonide oint</i>	1	
<i>ammonium lactate lotn</i>	1	QL(400 GM per 30 days)
<i>betamethasone dipropionate augmented</i>	2	
<i>betamethasone dipropionate crea, lotn, oint</i>	2	
<i>betamethasone valerate crea, lotn, oint</i>	2	
<i>clobetasol propionate e</i>	2	
<i>clobetasol propionate emollient crea</i>	2	
<i>clobetasol propionate emollient foam</i>	4	
<i>clobetasol propionate crea 0.05%</i>	2	
<i>clobetasol propionate foam 0.05%</i>	2	
<i>clobetasol propionate foam 0.05%</i>	4	
<i>clobetasol propionate gel, oint, soln</i>	2	
<i>desonide crea, lotn, oint</i>	2	
<i>desoximetasone crea 0.25%</i>	2	
<i>desoximetasone crea 0.05%</i>	4	QL(15 GM per 30 days)
DOXEPIN HYDROCHLORIDE CREA 5%	3	QL(90 GM per 30 days)
<i>fluocinolone acetonide body</i>	2	
<i>fluocinolone acetonide scalp</i>	2	
<i>fluocinolone acetonide topical</i>	2	
<i>fluocinolone acetonide crea 0.01%, 0.025%</i>	2	
<i>fluocinolone acetonide oint 0.025%</i>	2	
<i>fluocinolone acetonide soln 0.01%</i>	2	
<i>fluocinonide crea 0.05%</i>	4	
<i>fluocinonide crea 0.1%</i>	4	QL(30 GM per 30 days)
<i>fluocinonide soln</i>	2	

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<i>fluocinonide gel, oint</i>	4	
<i>fluticasone propionate crea 0.05%</i>	1	
<i>fluticasone propionate oint 0.005%</i>	1	
<i>halobetasol propionate crea, oint</i>	2	
<i>hydrocortisone butyrate (lipid)</i>	1	
<i>hydrocortisone butyrate (lipophilic)</i>	1	
<i>hydrocortisone butyrate crea, oint, soln</i>	1	
<i>hydrocortisone crea 1%, 2.5%</i>	1	
<i>hydrocortisone lotn 2.5%</i>	1	
<i>hydrocortisone oint 1%, 2.5%</i>	1	
<i>mometasone furoate</i>	1	
<i>pimecrolimus</i>	4	
<i>selenium sulfide</i>	1	
<i>tacrolimus oint 0.03%</i>	2	
<i>tacrolimus oint 0.1%</i>	2	QL(30 GM per 30 days)
<i>triamcinolone acetonide aers, crea, lotn</i>	1	
<i>triamcinolone acetonide oint 0.025%, 0.1%, 0.5%</i>	1	
<i>triderm</i>	1	
<b>Dermatological Agents, Other</b>		
<i>calcipotriene soln</i>	2	
<i>calcipotriene crea, oint</i>	4	
<i>calcitriol oint 3mcg/gm</i>	2	
<i>clotrimazole/betamethasone dipropionate</i>	2	
<i>diclofenac sodium gel 3%</i>	4	QL(100 GM per 30 days)
FLUOROURACIL CREA 0.5%	5	QL(30 GM per 30 days)
<i>fluorouracil crea 5%</i>	2	
<i>fluorouracil external soln 2%, 5%</i>	2	
<i>imiquimod crea 5%</i>	2	
<i>methoxsalen caps</i>	5	
<i>nystatin/triamcinolone</i>	2	
<i>nystatin/triamcinolone acetonide oint</i>	2	
OTEZLA TABS 20MG, 30MG	5	PA
<i>podofilox soln</i>	1	
REGRANEX	5	PA
SANTYL	4	
<i>silver sulfadiazine</i>	1	
<i>ssd</i>	1	
<b>Pediculicides/Scabicides</b>		
<i>ivermectin crea 1%</i>	4	QL(45 GM per 30 days)
<i>malathion</i>	1	
<i>permethrin crea</i>	2	
<b>Topical Anti-infectives</b>		
<i>acyclovir oint 5%</i>	4	
<i>ciclodan soln</i>	2	

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<i>ciclopirox nail lacquer</i>	2	
<i>ciclopirox olamine</i>	2	
<i>ciclopirox gel, sham, susp</i>	2	
<i>clindacin</i>	2	
<i>clindamycin phosphate gel 1%</i>	2	
<i>clindamycin phosphate lotn 1%</i>	2	QL(60 ML per 30 days)
<i>clindamycin phosphate external soln 1%</i>	2	
<i>ery</i>	2	
<i>erythromycin gel 2%</i>	2	
<i>erythromycin soln 2%</i>	2	
<i>mupirocin oint</i>	2	
SULFAMYLON CREA	4	
<b>Electrolytes/Minerals/Metals/Vitamins</b>		
<b><i>Electrolyte/Mineral Replacement</i></b>		
AMINOSYN II INJ 107.6MEQ/L; 1490MG/100ML; 1527MG/100ML; 1050MG/100ML; 1107MG/100ML; 750MG/100ML; 450MG/100ML; 990MG/100ML; 1500MG/100ML; 1575MG/100ML; 258MG/100ML; 405MG/100ML; 447MG/100ML; 1083MG/100ML; 795MG/100ML; 50MEQ/L; 600MG/100ML; 300MG/100ML; 750MG/100ML, 993MG/100ML; 1018MG/100ML; 700MG/100ML; 738MG/100ML; 500MG/100ML; 300MG/100ML; 660MG/100ML; 1000MG/100ML; 1050MG/100ML; 172MG/100ML; 270MG/100ML; 298MG/100ML; 722MG/100ML; 530MG/100ML; 400MG/100ML; 200MG/100ML; 500MG/100ML	3	B/D
AMINOSYN-PF 7% INJ 32.5MEQ/L; 490MG/100ML; 861MG/100ML; 370MG/100ML; 576MG/100ML; 270MG/100ML; 220MG/100ML; 534MG/100ML; 831MG/100ML; 475MG/100ML; 125MG/100ML; 300MG/100ML; 570MG/100ML; 347MG/100ML; 50MG/100ML; 360MG/100ML; 125MG/100ML; 44MG/100ML; 452MG/100ML	3	B/D
AMINOSYN-PF INJ 46MEQ/L; 698MG/100ML; 1227MG/100ML; 527MG/100ML; 820MG/100ML; 385MG/100ML; 312MG/100ML; 760MG/100ML; 1200MG/100ML; 677MG/100ML; 180MG/100ML; 427MG/100ML; 812MG/100ML; 495MG/100ML; 70MG/100ML; 512MG/100ML; 180MG/100ML; 44MG/100ML; 673MG/100ML	3	B/D
<i>carglumic acid</i>	5	PA
CLINIMIX 4.25%/DEXTROSE 10%	3	B/D
CLINIMIX 4.25%/DEXTROSE 5%	3	B/D
CLINIMIX 5%/DEXTROSE 15%	3	B/D

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CLINIMIX 5%/DEXTROSE 20%	3	B/D
CLINIMIX 6/5	3	B/D
CLINIMIX 8/10	3	B/D
CLINIMIX 8/14	3	B/D
CLINIMIX E 2.75%/DEXTROSE 5%	3	B/D
CLINIMIX E 4.25%/DEXTROSE 10%	3	B/D
CLINIMIX E 4.25%/DEXTROSE 5%	3	B/D
CLINIMIX E 5%/DEXTROSE 15%	3	B/D
CLINIMIX E 5%/DEXTROSE 20%	3	B/D
CLINIMIX E 8/10	3	B/D
CLINIMIX E 8/14	3	B/D
CLINISOL SF 15%	3	B/D
<i>dextrose 5% /electrolyte #48 viaflex</i>	1	
<i>dextrose 10%</i>	1	
<i>dextrose 10%/sodium chloride 0.2%</i>	1	
<i>dextrose 10%/sodium chloride 0.45%</i>	1	
<i>dextrose 2.5%/sodium chloride 0.45%</i>	1	
<i>dextrose 25% inj 250mg/ml</i>	1	
<i>dextrose 5%</i>	1	
<i>dextrose 5%/lactated ringers inj 2.7meq/l; 109meq/l; 5%; 28meq/l; 4meq/l; 130meq/l</i>	1	
<i>dextrose 5%/sodium chloride 0.2%</i>	1	
<i>dextrose 5%/sodium chloride 0.3%</i>	1	
<i>dextrose 5%/sodium chloride 0.33%</i>	1	
<i>dextrose 5%/sodium chloride 0.45%</i>	1	
<i>dextrose 5%/sodium chloride 0.9%</i>	1	
<i>dextrose 50%</i>	1	
<i>dextrose/sodium chloride</i>	1	
<i>dextrose inj 20%</i>	1	
<i>fluoride chew 0.25mg, 0.5mg, 1mg</i>	2	
<i>glucose (dextrose) 50%</i>	1	
IONOSOL-MB/DEXTROSE 5% INJ 22MEQ/L; 5%; 23MEQ/L; 3MEQ/L; 3MMOLE/L; 20MEQ/L; 25MEQ/L	3	
ISOLYTE-P/DEXTROSE 5%	3	
ISOLYTE-S PH 7.4	3	
ISOLYTE-S INJ 27MEQ/L; 98MEQ/L; 23MEQ/L; 3MEQ/L; 5MEQ/L; 140MEQ/L	3	
<i>kcl 0.075%/d5w/nacl 0.45% inj 5%; 10meq/l; 0.45%</i>	1	
<i>kcl 0.15%/d5w/nacl 0.2%</i>	1	
<i>kcl 0.15%/d5w/nacl 0.225% inj 5%; 20meq/l; 0.225%</i>	1	
<i>kcl 0.15%/d5w/nacl 0.45% inj 5%; 20meq/l; 0.45%</i>	1	
<i>kcl 0.15%/d5w/nacl 0.9% inj 5%; 20meq/l; 0.9%</i>	1	
<i>kcl 0.3%/d5w/nacl 0.45% inj 5%; 40meq/l; 0.45%</i>	1	
<i>kcl 0.3%/d5w/nacl 0.9% inj 5%; 40meq/l; 0.9%</i>	1	

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<i>klor-con 10</i>	1	
<i>klor-con 8</i>	1	
<i>klor-con m10</i>	1	
<i>klor-con m15</i>	1	
<i>klor-con m20</i>	1	
<i>magnesium sulfate in d5w inj 5%; 1gm/100ml</i>	1	
<i>magnesium sulfate/dextrose inj 5%; 1gm/100ml</i>	1	
MAGNESIUM SULFATE INJ 20GM/500ML	1	
<i>magnesium sulfate inj 2gm/50ml, 40gm/1000ml, 4gm/100ml, 4gm/50ml</i>	1	
<i>magnesium sulfate inj 50%</i>	2	
<i>multiple electrolytes injection type 1</i>	1	
NORMOSOL-M/D5W	3	
NORMOSOL-R	3	
PLENAMINE	3	B/D
<i>potassium chloride er cpcr</i>	1	
POTASSIUM CHLORIDE ER TBCR 15MEQ	1	
<i>potassium chloride er tbcr 10meq, 15meq, 20meq, 8meq</i>	1	
<i>potassium chloride/dextrose/lactated ringers inj 3meq/l; 149meq/l; 5%; 28meq/l; 24meq/l; 130meq/l</i>	1	
<i>potassium chloride/dextrose/sodium chloride inj 5%; 10meq/l; 0.45%, 5%; 20meq/l; 0.225%, 5%; 20meq/l; 0.45%, 5%; 20meq/l; 0.9%, 5%; 30meq/l; 0.45%, 5%; 40meq/l; 0.45%, 5%; 40meq/l; 0.9%</i>	1	
<i>potassium chloride/dextrose inj 5%; 20meq/l</i>	1	
<i>potassium chloride/sodium chloride inj 20meq/l; 0.45%, 20meq/l; 0.9%, 40meq/l; 0.9%</i>	1	
<i>potassium chloride inj 10meq/100ml, 10meq/50ml, 20meq/100ml, 20meq/50ml, 2meq/ml, 40meq/100ml</i>	1	
<i>potassium chloride oral soln 10%</i>	2	
<i>potassium citrate er</i>	1	
PREMASOL INJ 52MEQ/L; 1760MG/100ML; 880MG/100ML; 34MEQ/L; 1760MG/100ML; 372MG/100ML; 406MG/100ML; 526MG/100ML; 492MG/100ML; 492MG/100ML; 526MG/100ML; 356MG/100ML; 356MG/100ML; 390MG/100ML; 34MG/100ML; 152MG/100ML	3	B/D
PROSOL	3	B/D
<i>ringers injection inj 4.5meq/l; 156meq/l; 4meq/l; 147meq/l</i>	1	
<i>sodium chloride 0.45% inj</i>	2	
<i>sodium chloride inj 0.45%, 0.9%, 3%, 5%</i>	2	
<i>sodium fluoride chew 0.25mg, 0.5mg, 1mg</i>	2	
SODIUM FLUORIDE SOLN 0.5MG/ML	2	

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TRAVASOL INJ 52MEQ/L; 1760MG/100ML; 880MG/100ML; 34MEQ/L; 1760MG/100ML; 372MG/100ML; 406MG/100ML; 526MG/100ML; 492MG/100ML; 492MG/100ML; 526MG/100ML; 356MG/100ML; 500MG/100ML; 356MG/100ML; 390MG/100ML; 34MG/100ML; 152MG/100ML	3	B/D
TROPHAMINE INJ 0.54GM/100ML; 1.2GM/100ML; 0.32GM/100ML; 0; 0; 0.5GM/100ML; 0.36GM/100ML; 0.48GM/100ML; 0.82GM/100ML; 1.4GM/100ML; 1.2GM/100ML; 0.34GM/100ML; 0.48GM/100ML; 0.68GM/100ML; 0.38GM/100ML; 5MEQ/L; 0.025GM/100ML; 0.42GM/100ML; 0.2GM/100ML; 0.24GM/100ML; 0.78GM/100ML	3	B/D
<b>Electrolyte/Mineral/Metal Modifiers</b>		
CHEMET	5	
<i>deferasirox tbso 125mg</i>	3	PA
<i>deferasirox tbso 250mg, 500mg</i>	5	PA
<i>deferiprone</i>	5	
FERRIPROX TWICE-A-DAY	5	
FERRIPROX SOLN	5	
FERRIPROX TABS 1000MG	5	
JYNARQUE TABS	5	QL(120 EA per 30 days); PA
JYNARQUE TBPK	5	QL(56 EA per 28 days); PA
<i>penicillamine tabs</i>	5	
TOLVAPTAN TABS 15MG	5	QL(30 EA per 30 days); PA
<i>tolvaptan tabs 30mg</i>	5	QL(60 EA per 30 days); PA
<i>trientine hydrochloride caps 250mg</i>	5	
<b>Phosphate Binders</b>		
<i>calcium acetate tabs 667mg</i>	2	
FOSRENOL PACK	5	
<i>lanthanum carbonate chew 1000mg</i>	5	
<i>sevelamer carbonate tabs</i>	4	
<i>sevelamer carbonate pack 2.4gm</i>	4	
<i>sevelamer hydrochloride</i>	4	
<b>Potassium Binders</b>		
<i>kionex susp</i>	1	
LOKELMA	4	QL(90 EA per 30 days)
<i>sodium polystyrene sulfonate powd</i>	1	
<i>sps</i>	1	
VELTASSA PACK 1GM	4	
VELTASSA PACK 16.8GM, 25.2GM, 8.4GM	4	
<b>Vitamins</b>		

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<i>prenatal 19 tabs 100mg; 1000unit; 200mg; 7mg; 400unit; 12mcg; 25mg; 29mg; 1mg; 15mg; 20mg; 3mg; 3mg; 30unit; 20mg</i>	2	
<i>prenatal tabs 120mg; 0; 200mg; 10mcg; 2mg; 12mcg; 27mg; 1mg; 20mg; 10mg; 1200mcg; 3mg; 1.84mg; 10mg; 25mg</i>	2	
<b>Gastrointestinal Agents</b>		
<b>Anti-Constipation Agents</b>		
<i>constulose</i>	2	
<i>enulose</i>	2	
<i>generlac</i>	2	
KRISTALOSE PACK 10GM	3	
<i>lactulose soln</i>	2	
LINZESS	3	QL(30 EA per 30 days)
LUBIPROSTONE	4	QL(60 EA per 30 days)
MOVANTIK	4	QL(30 EA per 30 days)
RELISTOR INJ	5	PA
SYMPROIC	4	QL(30 EA per 30 days)
<b>Anti-Diarrheal Agents</b>		
<i>alosetron hydrochloride tabs 1mg</i>	5	
<i>diphenoxylate hydrochloride/atropine sulfate</i>	4	
<i>diphenoxylate/atropine liqd</i>	4	
<i>loperamide hydrochloride caps</i>	2	
VIBERZI	5	PA
XERMELO	5	QL(90 EA per 30 days); PA
<b>Antispasmodics, Gastrointestinal</b>		
<i>dicyclomine hcl soln</i>	2	
<i>dicyclomine hydrochloride caps, tabs</i>	2	
<i>glycopyrrolate oral soln</i>	2	
<i>glycopyrrolate inj 0.2mg/ml, 0.4mg/2ml, 1mg/5ml, 4mg/20ml</i>	2	
GLYCOPYRROLATE TABS 1.5MG	4	
<i>glycopyrrolate tabs 1mg, 2mg</i>	2	
<i>methscopolamine bromide tabs</i>	2	
<b>Gastrointestinal Agents, Other</b>		
GATTEX	5	PA
<i>gavilyte-c</i>	2	
<i>gavilyte-g</i>	2	
<i>gavilyte-n/flavor pack</i>	2	
<i>metoclopramide hcl soln</i>	2	
<i>metoclopramide hydrochloride inj, tabs</i>	2	
<i>metoclopramide odt tbdp 5mg</i>	2	
NITROGLYCERIN OINT 0.4%	4	
OICALIVA	5	QL(30 EA per 30 days); PA
<i>peg-3350/electrolytes</i>	2	
<i>peg-3350/electrolytes/ascorbate</i>	2	

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<i>peg-3350/nacl/na bicarbonate/kcl</i>	2	
RECTIV	4	
SODIUM SULFATE/POTASSIUM SULFATE/MAGNESIUM SULFATE SOLN 1.6GM/177ML; 3.13GM/177ML; 17.5GM/177ML	4	
<i>sodium sulfate/potassium sulfate/magnesium sulfate soln 1.6gm/177ml; 3.13gm/177ml; 17.5gm/177ml</i>	4	
<i>ursodiol caps 300mg</i>	4	
<i>ursodiol tabs</i>	3	
VOWST	5	PA
XIFAXAN TABS 200MG	4	PA
XIFAXAN TABS 550MG	5	PA
<b>Histamine2 (H2) Receptor Antagonists</b>		
<i>cimetidine tabs</i>	2	
<i>famotidine premixed</i>	2	
<i>famotidine inj 200mg/20ml, 20mg/2ml, 40mg/4ml</i>	2	
<i>famotidine tabs 20mg, 40mg</i>	2	
<i>nizatidine caps</i>	2	
<b>Protectants</b>		
<i>misoprostol</i>	1	
<i>sucralfate tabs</i>	2	
<b>Proton Pump Inhibitors</b>		
<i>esomeprazole magnesium cpdr</i>	2	
<i>lansoprazole cpdr</i>	2	
<i>omeprazole dr cpdr 10mg, 40mg</i>	2	
<i>omeprazole cpdr 20mg, 40mg</i>	2	
<i>pantoprazole sodium inj, tbec</i>	2	
<i>rabeprazole sodium</i>	2	
<b>Genetic or Enzyme or Protein Disorder: Replacement, Modifiers, Treatment</b>		
<b>Genetic or Enzyme or Protein Disorder: Replacement, Modifiers, Treatment</b>		
ALDURAZYME	5	PA
ARALAST NP INJ 1000MG, 500MG	5	PA
<i>betaine anhydrous</i>	5	
CERDELGA	5	PA
CEREZYME	5	PA
CHOLBAM	5	PA
CREON CPEP 120000UNIT; 24000UNIT; 76000UNIT, 15000UNIT; 3000UNIT; 9500UNIT, 180000UNIT; 36000UNIT; 114000UNIT, 30000UNIT; 6000UNIT; 19000UNIT, 60000UNIT; 12000UNIT; 38000UNIT	3	
<i>cromolyn sodium conc 100mg/5ml</i>	4	
CRYSVITA	5	PA

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CYSTAGON	4	PA
<i>dichlorphenamide</i>	5	PA
ELAPRASE	5	PA
ELELYSO	5	PA
ENDARI	5	
EXONDYS 51	5	PA
FABRAZYME	5	PA
GALAFOLD	5	PA
GLASSIA	5	PA
KANUMA	5	PA
<i>l-glutamine</i>	5	
LUMIZYME	5	PA
<i>miglustat</i>	5	PA
NAGLAZYME	5	PA
<i>nitisinone</i>	5	PA
ORFADIN SUSP	5	PA
PANCREAZE CPEP 15200UNIT; 2600UNIT; 8800UNIT, 24600UNIT; 4200UNIT; 14200UNIT, 61500UNIT; 10500UNIT; 35500UNIT, 98400UNIT; 16800UNIT; 56800UNIT	3	
PANCREAZE CPEP 149900UNIT; 37000UNIT; 97300UNIT, 83900UNIT; 21000UNIT; 54700UNIT	5	
PROCYSBI	5	PA
PROLASTIN-C	5	PA
RAVICTI	5	PA
<i>sapropterin dihydrochloride</i>	5	PA
<i>sodium phenylbutyrate tabs</i>	5	
STRENSIQ	5	PA
SUCRAID	5	PA
VIMIZIM	5	PA
VPRIV	5	PA
VYNDAQEL	5	PA
WELIREG	5	PA NSO
XIAFLEX	5	PA
XURIDEN	5	QL(120 EA per 30 days); PA
<i>yargesa</i>	5	PA
ZEMAIRA	5	PA
ZENPEP CPEP 105000UNIT; 25000UNIT; 79000UNIT, 14000UNIT; 3000UNIT; 10000UNIT, 168000UNIT; 40000UNIT; 126000UNIT, 24000UNIT; 5000UNIT; 17000UNIT, 252600UNIT; 60000UNIT; 189600UNIT, 42000UNIT; 10000UNIT; 32000UNIT, 63000UNIT; 15000UNIT; 47000UNIT, 84000UNIT; 20000UNIT; 63000UNIT	3	

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<b>Genitourinary Agents</b>		
<b><i>Antispasmodics, Urinary</i></b>		
DARIFENACIN HYDROBROMIDE ER	3	
<i>fesoterodine fumarate er</i>	2	
<i>flavoxate hcl</i>	1	
GEMTESA	4	
MYRBETRIQ	3	
<i>oxybutynin chloride er</i>	2	
<i>oxybutynin chloride soln, tabs</i>	2	
<i>solifenacin succinate</i>	2	
<i>tolterodine tartrate er cp24 2mg</i>	2	
<i>tolterodine tartrate tabs 1mg</i>	2	
<i>tolterodine tartrate tabs 2mg</i>	4	
<i>tropium chloride</i>	2	
<b><i>Benign Prostatic Hypertrophy Agents</i></b>		
<i>alfuzosin hcl er</i>	2	
<i>doxazosin mesylate</i>	1	
<i>doxazosin tabs 2mg</i>	1	
<i>dutasteride caps</i>	2	
<i>finasteride tabs</i>	1	
<i>silodosin caps 4mg</i>	2	
<i>tadalafil tabs 2.5mg, 5mg</i>	4	QL(30 EA per 30 days); PA
<i>tamsulosin hydrochloride</i>	1	
<i>terazosin hcl caps 10mg, 1mg, 5mg</i>	1	
<i>terazosin hydrochloride caps 2mg</i>	1	
<b><i>Genitourinary Agents, Other</i></b>		
<i>acetic acid 0.25%</i>	2	
<i>bethanechol chloride tabs</i>	2	
ELMIRON	5	
LITHOSTAT	4	
PHEXXI	4	
RENACIDIN SOLN 1980.6MG/30ML; 59.4MG/30ML; 980.4MG/30ML	4	
RIMSO-50	4	
THIOLA EC	5	
<i>tiopronin</i>	5	
<i>tiopronin dr</i>	5	
<i>venxxiva</i>	5	
<b>Hormonal Agents, Stimulant/Replacement/Modifying (Adrenal)</b>		
<b><i>Hormonal Agents, Stimulant/Replacement/Modifying (Adrenal)</i></b>		
<i>betamethasone sodium phosphate/betamethasone acetate</i>	1	
DEXAMETHASONE INTENSOL	3	
DEXAMETHASONE SODIUM PHOSPHATE +RFID	2	

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<i>dexamethasone sodium phosphate inj 100mg/10ml, 10mg/ml, 120mg/30ml, 20mg/5ml, 4mg/ml</i>	2	
<i>dexamethasone elix, soln</i>	2	
<i>dexamethasone tabs 0.5mg, 0.75mg, 1.5mg, 1mg, 2mg, 4mg, 6mg</i>	2	
<i>fludrocortisone acetate tabs</i>	1	
<i>hydrocortisone tabs 10mg, 20mg, 5mg</i>	2	
<i>methylprednisolone acetate inj 40mg/ml, 50mg/ml, 80mg/ml</i>	2	
<i>methylprednisolone dose pack tbpk</i>	2	
<i>methylprednisolone sodium succinate</i>	2	
<i>methylprednisolone sodiumsuccinate inj 40mg</i>	2	
<i>methylprednisolone tabs</i>	2	
<i>prednisolone sodium phosphate odt</i>	2	
<i>prednisolone sodium phosphate oral soln 10mg/5ml, 15mg/5ml, 20mg/5ml, 25mg/5ml, 5mg/5ml</i>	2	
<i>prednisolone soln</i>	2	
<i>prednisone tbpk</i>	1	
<i>prednisone tabs 10mg, 1mg, 2.5mg, 20mg, 50mg, 5mg</i>	1	
<b>Hormonal Agents, Stimulant/Replacement/Modifying (Pituitary)</b>		
<i>Hormonal Agents, Stimulant/Replacement/Modifying (Pituitary)</i>		
<i>chorionic gonadotropin</i>	4	PA
<i>desmopressin acetate tabs</i>	2	
<i>desmopressin acetate inj</i>	5	
DESMOPRESSIN ACETATE NASAL SOLN 1.5MG/ML	5	
<i>desmopressin acetate nasal soln 0.01%</i>	2	
INCRELEX	5	PA
ISTURISA TABS 1MG, 5MG	5	PA
LUPRON DEPOT-PED (6-MONTH)	5	PA
NORDITROPIN FLEXPRO	5	PA
NOVAREL INJ 5000UNIT	4	PA
OMNITROPE	5	PA
PREGNYL	4	PA
<i>pregnyl w/diluent benzyl alcohol/nacl</i>	4	PA
SEROSTIM	5	PA
<i>vasopressin +rfid</i>	2	
<i>vasopressin inj 20unit/ml</i>	2	
<i>vasostrict</i>	2	
<b>Hormonal Agents, Stimulant/Replacement/Modifying (Sex Hormones/Modifiers)</b>		
<i>Androgens</i>		
<i>danazol caps</i>	4	
<i>testosterone cypionate inj 100mg/ml, 200mg/ml</i>	2	
<i>testosterone enanthate inj</i>	2	
<i>testosterone pump</i>	4	PA

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<i>testosterone gel 10mg/act</i>	2	PA
<i>testosterone gel 20.25mg/1.25gm, 25mg/2.5gm, 40.5mg/2.5gm, 50mg/5gm</i>	4	PA
<b>Estrogens</b>		
<i>afirmelle</i>	2	
<i>altavera</i>	2	
<i>alyacen 1/35</i>	2	
<i>alyacen 7/7/7</i>	2	
<i>amabelz tabs 1mg; 0.5mg</i>	2	
<i>amethyst</i>	2	
ANNOVERA	4	
<i>apri</i>	2	
<i>aranelle</i>	2	
<i>ashlyna</i>	2	
<i>aubra eq</i>	2	
<i>aurovela 1.5/30</i>	2	
<i>aurovela 1/20</i>	2	
<i>aurovela 24 fe</i>	2	
<i>aurovela fe 1.5/30</i>	2	
<i>aurovela fe 1/20</i>	2	
<i>aviane</i>	2	
<i>ayuna</i>	2	
<i>azurette</i>	2	
<i>balziva</i>	2	
<i>blisovi 24 fe</i>	2	
<i>blisovi fe 1.5/30</i>	2	
<i>blisovi fe 1/20</i>	2	
<i>briellyn</i>	2	
<i>camrese</i>	2	
<i>camrese lo</i>	2	
<i>charlotte 24 fe</i>	2	
<i>chateal eq</i>	2	
<i>cryselle-28</i>	2	
<i>cyred eq</i>	2	
<i>dasetta 1/35</i>	2	
<i>dasetta 7/7/7</i>	2	
<i>daysee</i>	2	
<i>delyla</i>	2	
DEPO-ESTRADIOL INJ 5MG/ML	4	
<i>desogestrel/ethinyl estradiol</i>	2	
<i>dolishale</i>	2	
<i>dotti</i>	2	
<i>drospirenone/ethinyl estradiol</i>	2	

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Drug Name	Drug Tier	Requirements/Limits
DROSPIRENONE/ETHINYL ESTRADIOL/LEVOMEFOLATE CALCIUM TABS 3MG; 0.03MG; 0.451MG	2	
<i>drospirenone/ethinyl estradiol/levomefolate calcium tabs 3mg; 0.02mg; 0.451mg</i>	2	
<i>elinest</i>	2	
<i>eluryng</i>	2	
<i>enilloring</i>	2	
<i>enpresse-28</i>	2	
<i>enskyce</i>	2	
<i>estarylla</i>	2	
<i>estradiol valerate inj 20mg/ml, 40mg/ml</i>	1	
<i>estradiol/norethindrone acetate tabs 1mg; 0.5mg</i>	2	
ESTRADIOL VAGINAL TABS	3	
<i>estradiol crea, pttw, pttw, oral tabs</i>	2	
ESTRING	3	
<i>ethynodiol diacetate/ethinyl estradiol</i>	2	
<i>etonogestrel/ethinyl estradiol</i>	4	
<i>falmina</i>	2	
<i>feirza 1.5/30</i>	2	
<i>feirza 1/20</i>	2	
FEMRING	4	
<i>finzala</i>	2	
<i>fyavolv</i>	2	
<i>gemmily</i>	2	
<i>hailey 1.5/30</i>	2	
<i>hailey 24 fe</i>	2	
<i>hailey fe 1.5/30</i>	2	
<i>hailey fe 1/20</i>	2	
<i>iclevia</i>	2	
IMVEXXY MAINTENANCE PACK	4	PA
IMVEXXY STARTER PACK	4	PA
<i>introvale</i>	2	
<i>isibloom</i>	2	
<i>jaimiess</i>	2	
<i>jasmiel</i>	2	
<i>jinteli</i>	2	
<i>jolessa</i>	2	
<i>joyeaux</i>	2	
<i>juleber</i>	2	
<i>junel 1.5/30</i>	2	
<i>junel 1/20</i>	2	
<i>junel fe 1.5/30</i>	2	
<i>junel fe 1/20</i>	2	

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<i>junel fe 24</i>	2	
<i>kaitlib fe</i>	2	
<i>kalliga</i>	2	
<i>kariva</i>	2	
<i>kelnor 1/35</i>	2	
<i>kelnor 1/50</i>	2	
<i>kurvelo</i>	2	
<i>larin 1.5/30</i>	2	
<i>larin 1/20</i>	2	
<i>larin 24 fe</i>	2	
<i>larin fe 1.5/30</i>	2	
<i>larin fe 1/20</i>	2	
<i>layolis fe</i>	2	
<i>leena</i>	2	
<i>lessina</i>	2	
<i>levonest</i>	2	
<i>levonorgestrel and ethinyl estradiol</i>	2	
<i>levonorgestrel/ethinyl estradiol</i>	2	
<i>levonorgestrel/ethinyl estradiol/ferrous bisglycinate</i>	2	
<i>levora 0.15/30-28</i>	2	
<b>LO LOESTRIN FE</b>	4	
<i>lo-zumandimine</i>	2	
<i>lojaimiess</i>	2	
<i>loryna</i>	2	
<i>low-ogestrel</i>	2	
<i>lutra</i>	2	
<i>lyllana</i>	4	
<i>marlissa</i>	2	
<i>merzee</i>	2	
<i>mibelas 24 fe</i>	2	
<i>microgestin 1.5/30</i>	2	
<i>microgestin 1/20</i>	2	
<i>microgestin 24 fe</i>	2	
<i>microgestin fe 1.5/30</i>	2	
<i>microgestin fe 1/20</i>	2	
<i>mili</i>	2	
<i>mimvey</i>	2	
<i>minzoya</i>	2	
<i>mono-linyah</i>	2	
<b>NATAZIA</b>	4	
<i>necon 0.5/35-28</i>	2	
<b>NEXTSTELLIS</b>	4	
<i>nikki</i>	2	
<i>norelgestromin/ethinyl estradiol</i>	2	

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<i>norethindrone &amp; ethinyl estradiol ferrous fumarate</i>	2	
<i>norethindrone acetate/ethinyl estradiol/ferrous fumarate</i>	2	
<i>norethindrone acetate/ethinyl estradiol tabs</i>	2	
<i>norethindrone/ethinyl estradiol/ferrous fumarate</i>	2	
<i>norgestimate/ethinyl estradiol</i>	2	
<i>nortrel 0.5/35 (28)</i>	2	
<i>nortrel 1/35</i>	2	
<i>nortrel 7/7/7</i>	2	
<i>nylia 1/35</i>	2	
<i>nylia 7/7/7</i>	2	
<i>nymyo</i>	2	
<i>ocella</i>	2	
<i>philith</i>	2	
<i>pimtrea</i>	2	
<i>portia-28</i>	2	
PREMARIN CREA	3	
PREMARIN INJ	4	
PREMPRO	4	
<i>reclipsen</i>	2	
<i>rivelsa</i>	2	
<i>setlakin</i>	2	
<i>simliya</i>	2	
<i>simpesse</i>	2	
<i>sprintec 28</i>	2	
<i>sronyx</i>	2	
<i>syeda</i>	2	
<i>tarina 24 fe</i>	2	
<i>tarina fe 1/20 eq</i>	2	
<i>taysofy</i>	2	
<i>tilia fe</i>	2	
<i>tri-estarylla</i>	2	
<i>tri-legest fe</i>	2	
<i>tri-linyah</i>	2	
<i>tri-lo-estarylla</i>	2	
<i>tri-lo-marzia</i>	2	
<i>tri-lo-mili</i>	2	
<i>tri-lo-sprintec</i>	2	
<i>tri-mili</i>	2	
<i>tri-nymyo</i>	2	
<i>tri-sprintec</i>	2	
<i>tri-vylibra</i>	2	
<i>tri-vylibra lo</i>	2	
<i>trivora-28</i>	2	
<i>turqoz</i>	2	

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TWIRLA	4	
TYBLUME	2	
<i>tydemy</i>	2	
<i>valtya 1/50</i>	2	
VELIVET	2	
<i>vestura</i>	2	
<i>vienva</i>	2	
<i>viorele</i>	2	
<i>volnea</i>	2	
<i>vyfemla</i>	2	
<i>vylibra</i>	2	
<i>wera</i>	2	
<i>wymzya fe</i>	2	
<i>xarah fe</i>	2	
<i>xulane</i>	2	
YUVAFEM	3	
<i>zafemy</i>	4	
<i>zovia 1/35</i>	2	
<i>zumandimine</i>	2	
<b>Progestins</b>		
<i>camila</i>	2	
CRINONE	4	PA
<i>deblitane</i>	2	
DEPO-SUBQ PROVERA 104	3	
<i>emzahh</i>	2	
<i>errin</i>	2	
<i>gallifrey</i>	1	
<i>heather</i>	2	
<i>incassia</i>	2	
<i>jencycla</i>	2	
LILETTA	3	
<i>lyleq</i>	2	
<i>lyza</i>	2	
<i>medroxyprogesterone acetate inj, tabs</i>	1	
<i>megestrol acetate tabs</i>	2	PA NSO
MEGESTROL ACETATE SUSP 625MG/5ML	4	PA NSO
<i>megestrol acetate susp 40mg/ml</i>	4	PA NSO
NEXPLANON	3	
<i>nora-be</i>	2	
<i>norethindrone acetate tabs</i>	1	
<i>norethindrone tabs</i>	1	
<i>norlyroc</i>	2	
<i>progesterone caps, inj</i>	1	
<i>sharobel</i>	2	

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SLYND	4	
<b>Selective Estrogen Receptor Modifying Agents</b>		
OSPHENA	4	QL(30 EA per 30 days); PA
<i>raloxifene hydrochloride</i>	2	
<b>Hormonal Agents, Stimulant/Replacement/Modifying (Thyroid)</b>		
<b>Hormonal Agents, Stimulant/Replacement/Modifying (Thyroid)</b>		
ADTHYZA TABS 120MG, 15MG, 30MG, 60MG, 90MG	4	
ARMOUR THYROID	4	
<i>euthyrox tabs 100mcg, 112mcg, 125mcg, 137mcg, 150mcg, 175mcg, 200mcg, 25mcg, 50mcg, 75mcg</i>	1	
<i>euthyrox tabs 88mcg</i>	2	
<i>levo-t</i>	1	
<i>levothyroxine sodium tabs</i>	1	
<i>levothyroxine sodium caps</i>	4	
LEVOTHYROXINE SODIUM INJ 100MCG/ML	5	
<i>levothyroxine sodium inj 100mcg/5ml, 100mcg, 200mcg/5ml, 200mcg, 500mcg/5ml, 500mcg</i>	5	
<i>levoxyl tabs 100mcg, 112mcg, 125mcg, 137mcg, 150mcg, 175mcg, 200mcg, 25mcg, 50mcg, 75mcg, 88mcg</i>	2	
LIOthyRONINE SODIUM INJ	5	
<i>liothyronine sodium tabs</i>	2	
NIVA THYROID	4	
<i>np thyroid 120</i>	4	
<i>np thyroid 15</i>	4	
<i>np thyroid 30</i>	4	
<i>np thyroid 60</i>	4	
<i>np thyroid 90</i>	4	
SYNTHROID TABS	3	
THYROID TABS 120MG, 15MG, 30MG, 60MG, 90MG	4	
<i>unithroid</i>	2	
<b>Hormonal Agents, Suppressant (Adrenal or Pituitary)</b>		
<b>Hormonal Agents, Suppressant (Adrenal or Pituitary)</b>		
<i>cabergoline</i>	2	
ELIGARD	4	PA NSO
FIRMAGON INJ 80MG	4	
FIRMAGON INJ 120MG/VIAL	5	
LANREOTIDE ACETATE INJ 120MG/0.5ML	5	PA NSO
<i>lanreotide acetate inj 120mg/0.5ml</i>	5	PA NSO
LEUPROLIDE ACETATE INJ 22.5MG	4	PA NSO
<i>leuprolide acetate inj 1mg/0.2ml</i>	4	PA NSO
LUPRON DEPOT (1-MONTH)	5	PA NSO
LUPRON DEPOT (3-MONTH)	5	PA NSO
LUPRON DEPOT (4-MONTH)	5	PA NSO
LUPRON DEPOT (6-MONTH)	5	PA NSO

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LUPRON DEPOT-PED (1-MONTH)	5	PA
LUPRON DEPOT-PED (3-MONTH)	5	PA
<i>mifepristone tabs 300mg</i>	5	PA
<i>octreotide acetate inj 100mcg/ml, 200mcg/ml, 50mcg/ml</i>	4	PA
<i>octreotide acetate inj 1000mcg/ml, 20mg, 30mg, 500mcg/ml</i>	5	PA
ORGOVYX	5	PA NSO
SANDOSTATIN LAR DEPOT	5	PA
SIGNIFOR	5	PA
SIGNIFOR LAR	5	PA
SOMATULINE DEPOT INJ 120MG/0.5ML	5	PA NSO
SOMATULINE DEPOT INJ 60MG/0.2ML, 90MG/0.3ML	5	PA
SOMAVERT	5	PA
SYNAREL	5	
TRELSTAR MIXJECT	4	PA NSO
ZOLADEX INJ 3.6MG	4	PA NSO
ZOLADEX INJ 10.8MG	5	PA NSO
<b>Hormonal Agents, Suppressant (Thyroid)</b>		
<i>Antithyroid Agents</i>		
<i>methimazole tabs 10mg, 5mg</i>	1	
<i>propylthiouracil tabs</i>	1	
<b>Immunological Agents</b>		
<i>Angioedema Agents</i>		
BERINERT	5	PA
CINRYZE	5	PA
HAEGARDA	5	PA
<i>icatibant acetate</i>	5	PA
KALBITOR	5	PA
ORLADEYO	5	PA
RUCONEST	5	PA
<i>sajazir</i>	5	PA
TAKHZYRO	5	PA
<i>Immunoglobulins</i>		
ALYGLO	5	B/D
ASCENIV	5	B/D
ATGAM	5	
BEYFORTUS	4	
BIVIGAM INJ 10%, 5GM/50ML	5	B/D
CUVITRU	5	PA
CYTOGAM INJ 50MG/ML	5	
FLEBOGAMMA DIF INJ 10GM/100ML, 10GM/200ML, 2.5GM/50ML, 20GM/200ML, 20GM/400ML, 5GM/100ML, 5GM/50ML	5	B/D
GAMASTAN	4	
GAMMAGARD LIQUID	5	B/D

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Drug Name	Drug Tier	Requirements/Limits
GAMMAGARD S/D IGA LESS THAN 1MCG/ML	5	B/D
GAMMAKED INJ 10GM/100ML, 20GM/200ML, 5GM/50ML	5	B/D
GAMMAPLEX INJ 10GM/100ML, 10GM/200ML, 20GM/200ML, 20GM/400ML, 5GM/100ML, 5GM/50ML	5	B/D
GAMUNEX-C INJ 10GM/100ML, 2.5GM/25ML, 20GM/200ML, 40GM/400ML, 5GM/50ML	5	B/D
HEPAGAM B INJ 312UNIT/ML	5	B/D
HIZENTRA INJ 10GM/50ML	5	PA
HIZENTRA INJ 10GM/50ML, 1GM/5ML, 2GM/10ML, 4GM/20ML	5	PA
HYPERHEP B	5	B/D
HYPERRHO S/D MINI-DOSE	4	
HYPERRHO S/D INJ 1500UNIT	4	
HYQVIA	5	B/D
MICRHOGAM ULTRA-FILTERED PLUS	4	
NABI-HB INJ 312UNIT/ML	5	B/D
OCTAGAM INJ 10GM/100ML, 10GM/200ML, 1GM/20ML, 2.5GM/50ML, 20GM/200ML, 2GM/20ML, 30GM/300ML, 5GM/100ML, 5GM/50ML	5	B/D
PRIVIGEN	5	B/D
RHOGAM ULTRA-FILTERED PLUS	4	
RHOPHYLAC	4	
SYNAGIS INJ 100MG/ML, 50MG/0.5ML	5	PA
THYMOGLOBULIN	5	
VARIZIG INJ 125UNIT/1.2ML	5	
WINRHO SDF INJ 15000UNIT/13ML, 1500UNIT/1.3ML, 2500UNIT/2.2ML, 5000UNIT/4.4ML	5	
XEMBIFY	5	B/D
<b><i>Immunological Agents, Other</i></b>		
ACTEMRA	5	PA
ACTEMRA ACTPEN	5	PA
ARCALYST	5	PA
<i>auranofin</i>	5	
BENLYSTA INJ 200MG/ML	5	
COSENTYX	5	PA
COSENTYX SENSOREADY PEN	5	PA
COSENTYX UNOREADY	5	PA
DUPIXENT INJ 100MG/0.67ML	5	QL(1.34 ML per 28 days); PA
DUPIXENT INJ 200MG/1.14ML	5	QL(4.56 ML per 28 days); PA
DUPIXENT INJ 300MG/2ML	5	QL(8 ML per 28 days); PA
EMPAVELI	5	PA
ILARIS INJ 150MG/ML	5	PA
KINERET	5	PA

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Drug Name	Drug Tier	Requirements/Limits
LEMTRADA	5	PA
ORENCIA CLICKJECT	5	PA
ORENCIA INJ 125MG/ML, 50MG/0.4ML, 87.5MG/0.7ML	5	PA
OTEZLA TBPK 0	5	PA
OTULFI INJ 45MG/0.5ML	4	PA
OTULFI INJ 130MG/26ML, 90MG/ML	5	PA
PYZCHIVA	5	PA
RAGWITEK	4	
RIDAURA	5	
RINVOQ	5	PA
RINVOQ LQ	5	QL(360 ML per 30 days); PA
SELARSDI INJ 45MG/0.5ML	4	PA
SELARSDI INJ 90MG/ML	5	PA
SIMULECT	5	
SKYRIZI PEN	5	PA
SKYRIZI INJ 150MG/ML, 180MG/1.2ML, 360MG/2.4ML	5	PA
SOLIRIS	5	PA
STELARA INJ 45MG/0.5ML, 90MG/ML	5	PA
STEQEYMA INJ 130MG/26ML, 45MG/0.5ML	4	PA
STEQEYMA INJ 90MG/ML	5	PA
SYLVANT	5	PA
TALTZ	5	PA
TAVNEOS	5	QL(180 EA per 30 days); PA
TYENNE INJ 162MG/0.9ML	5	PA
TYENNE INJ 162MG/0.9ML, 200MG/10ML, 400MG/20ML, 80MG/4ML	5	PA
ULTOMIRIS INJ 1100MG/11ML, 300MG/3ML	5	PA
WEZLANA	5	PA
XELJANZ	5	PA
XELJANZ XR	5	PA
XOLAIR	5	PA
YESINTEK INJ 45MG/0.5ML	4	PA
YESINTEK INJ 130MG/26ML, 90MG/ML	5	PA
<b>Immunostimulants</b>		
ACTIMMUNE	5	
BESREMI	5	PA NSO
PEGASYS INJ 180MCG/ML	5	
<b>Immunosuppressants</b>		
ADALIMUMAB-ADAZ INJ 40MG/0.4ML	5	PA
ADALIMUMAB-ADBM STARTER PACKAGE FOR CROHNS DISEASE/UC/HS	5	PA
ADALIMUMAB-ADBM STARTER PACKAGE FOR PSORIASIS/UVEITIS	5	PA
ADALIMUMAB-ADBM INJ 40MG/0.4ML	5	PA

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Drug Name	Drug Tier	Requirements/Limits
AMJEVITA INJ 20MG/0.2ML, 40MG/0.4ML, 40MG/0.8ML, 80MG/0.8ML	5	PA
ASTAGRAF XL	4	B/D
AVSOLA	5	PA
AZATHIOPRINE INJ	5	B/D
<i>azathioprine tabs 50mg</i>	1	B/D
<i>azathioprine tabs 100mg, 75mg</i>	2	B/D
BENLYSTA INJ 120MG, 400MG	5	
CIMZIA	5	PA
CIMZIA STARTER KIT	5	PA
<i>cyclosporine modified</i>	4	B/D
<i>cyclosporine caps 100mg, 25mg</i>	4	B/D
<i>cyclosporine inj 50mg/ml</i>	5	
ENBREL MINI	5	PA
ENBREL SURECLICK	5	PA
ENBREL INJ 25MG/0.5ML, 50MG/ML	5	PA
<i>everolimus tabs 0.25mg, 0.5mg, 0.75mg, 1mg</i>	5	B/D
<i>gengraf caps 100mg, 25mg</i>	4	B/D
<i>gengraf soln</i>	4	B/D
HADLIMA	5	PA
HADLIMA PUSH TOUCH	5	PA
INFLECTRA	5	PA
<i>infliximab</i>	5	PA
JYLAMVO	5	
<i>leflunomide</i>	2	
LUPKYNIS	5	QL(180 EA per 30 days); PA
<i>methotrexate sodium tabs</i>	1	
<i>methotrexate sodium inj 1gm/40ml, 1gm, 250mg/10ml, 50mg/2ml</i>	1	
<i>methotrexate inj 50mg/2ml</i>	1	
MYCOPHENOLATE MOFETIL INJ	3	B/D
<i>mycophenolate mofetil caps, tabs</i>	2	B/D
<i>mycophenolate mofetil susr</i>	5	B/D
<i>mycophenolic acid dr</i>	2	B/D
NULOJIX	5	
ORENCIA INJ 250MG	5	PA
PEGASYS INJ 180MCG/0.5ML	5	
PROGRAF PACK	4	B/D
REMICADE	5	PA
RENFLEXIS	5	PA
REZUROCK	5	QL(60 EA per 30 days); PA
<i>sirolimus tabs</i>	4	B/D
<i>sirolimus soln</i>	5	B/D
<i>tacrolimus caps 0.5mg, 1mg, 5mg</i>	2	B/D

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Drug Name	Drug Tier	Requirements/Limits
XATMEP	4	
<b>Vaccines</b>		
ABRYSVO	3	
ACTHIB INJ 0	3	
ADACEL	3	
AREXVY	3	
BCG VACCINE INJ 50MG	4	
BEXSERO	3	
BOOSTRIX	3	
DAPTACEL INJ 15LF/0.5ML; 23MCG/0.5ML; 5LF/0.5ML	3	
DENGVAXIA	4	
DIPHThERIA/TETANUS TOXOIDS ADSORBED PEDIATRIC	4	
ENGERIX-B	3	B/D
GARDASIL 9	4	
HAVRIX INJ 1440ELU/ML, 720ELU/0.5ML	3	
HEPLISAV-B	3	B/D
HIBERIX	3	
IMOVAX RABIES (H.D.C.V.)	4	B/D
INFANRIX	3	
IPOL INACTIVATED IPV	4	
IXCHIQ	4	
IXIARO	4	
JYNNEOS	3	
KINRIX INJ 25LFU/0.5ML; 58MCG/0.5ML; 0; 10LFU/0.5ML	4	
M-M-R II	4	
MENACTRA	3	
MENQUADFI	3	
MENVEO	3	
MRESVIA	3	
PEDIARIX INJ 25LFU/0.5ML; 10MCG/0.5ML; 58MCG/0.5ML; 0; 10LFU/0.5ML	4	
PEDVAX HIB INJ 7.5MCG/0.5ML	3	
PENBRAYA	3	
PENTACEL	4	
PREHEVBRIO	3	B/D
PRIORIX	4	
PROQUAD	3	
QUADRACEL	4	
RABAVERT	4	B/D
RECOMBIVAX HB	3	B/D
ROTARIX	4	
ROTATEQ SOLN	4	

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SHINGRIX	3	
STAMARIL	4	
TDVAX	3	
TENIVAC	3	
TETANUS/DIPHThERIA TOXOIDS-ADSORBED ADULT	3	
TICOVAC	3	
TRUMENBA	3	
TWINRIX	4	
TYPHIM VI	4	
VAQTA	3	
VARIVAX	3	
VAXELIS	4	
VIMKUNYA	4	
VIVOTIF	4	QL(4 EA per 365 days)
YF-VAX	4	
<b>Inflammatory Bowel Disease Agents</b>		
<i>Aminosalicylates</i>		
<i>balsalazide disodium</i>	2	
<i>mesalamine dr</i>	4	
<i>mesalamine er cpcr</i>	4	
<i>mesalamine er cp24</i>	4	
<i>mesalamine enem, kit</i>	4	
<i>sulfasalazine tabs</i>	1	
<i>sulfasalazine tbec</i>	2	
<i>Glucocorticoids</i>		
<i>budesonide cpep 3mg</i>	4	
BUDESONIDE FOAM 2MG	3	
<i>hydrocortisone crea 1%, 2.5%</i>	1	
<i>hydrocortisone enem 100mg/60ml</i>	4	
<i>procto-med hc</i>	1	
<i>proctosol hc</i>	1	
<i>proctozone-hc</i>	1	
<b>Metabolic Bone Disease Agents</b>		
<i>Metabolic Bone Disease Agents</i>		
<i>alendronate sodium tabs 10mg, 35mg, 5mg, 70mg</i>	1	
<i>calcitonin salmon nasal soln</i>	2	
<i>calcitonin salmon inj</i>	5	
<i>calcitonin-salmon soln</i>	2	
<i>calcitriol caps 0.25mcg, 0.5mcg</i>	1	
CALCITRIOL INJ 1MCG/ML	1	
<i>calcitriol oral soln 1mcg/ml</i>	1	
<i>cinacalcet hydrochloride</i>	4	
<i>doxercalciferol inj</i>	2	PA
<i>doxercalciferol caps</i>	4	PA

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Drug Name	Drug Tier	Requirements/Limits
FORTEO INJ 600MCG/2.4ML	5	PA
<i>ibandronate sodium tabs</i>	2	
MIACALCIN INJ	5	
<i>pamidronate disodium inj 30mg/10ml, 6mg/ml, 90mg/10ml</i>	1	
PARICALCITOL CAPS 1MCG, 2MCG	3	
PARICALCITOL CAPS 4MCG	4	
<i>paricalcitol inj</i>	4	
PROLIA	4	
<i>risedronate sodium</i>	2	
<i>risedronate sodium dr</i>	2	
TERIPARATIDE INJ 620MCG/2.48ML	5	PA
<i>teriparatide inj 600mcg/2.4ml</i>	5	PA
XGEVA	5	PA NSO
<i>zoledronic acid inj 4mg/100ml, 4mg/5ml, 5mg/100ml</i>	4	
<b>Miscellaneous Therapeutic Agents</b>		
<i>Miscellaneous Therapeutic Agents</i>		
ALCOHOL PREP PADS	3	
<i>atropine sulfate inj 0.25mg/5ml</i>	1	
B-D INSULIN SYRINGE ULTRAFINE II/0.3ML/31G X 5/16"	3	
BD INSULIN SYRINGE SAFETYGLIDE/1ML/29G X 1/2"	3	
BD INSULIN SYRINGE ULTRA-FINE/0.5ML/30G X 12.7MM	3	
BD INSULIN SYRINGE ULTRA-FINE/1ML/31G X 8MM	3	
BD PEN NEEDLE/ORIGINAL/ULTRA-FINE/29G X 12.7MM	3	
CLINOLIPID	3	B/D
COSELA	5	PA
CURITY ALL PURPOSE SPONGES 2"X2"	3	
CURITY GAUZE PADS 2"X2" 12 PLY	3	
<i>deferoxamine mesylate inj 2gm</i>	2	PA
<i>deferoxamine mesylate inj 500mg</i>	5	PA
DROPLET PEN NEEDLES 29GX10MM	3	
EASY COMFORT INSULIN SYRINGE/1ML/32GX5/16"	3	
EASY COMFORT INSULIN SYRINGES/0.5ML/32GX5/16"	3	
<i>fomepizole inj 1.5gm/1.5ml</i>	5	
GLOBAL ALCOHOL PREP EASE PADS	3	
INTRALIPID INJ 20GM/100ML, 30GM/100ML	3	B/D
<i>lactated ringers irrigation soln 3meq/l; 109meq/l; 28meq/l; 4meq/l; 130meq/l</i>	3	
<i>levocarnitine soln, tabs</i>	1	
<i>methergine tabs</i>	5	
<i>methylergonovine maleate inj</i>	1	
<i>methylergonovine maleate tabs</i>	5	

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Drug Name	Drug Tier	Requirements/Limits
NUTRILIPID	3	B/D
OMNIPOD 5 DEXCOM G7G6 INTRO KIT (GEN 5)	4	PA
OMNIPOD 5 DEXCOM G7G6 PODS (GEN 5)	4	PA
OMNIPOD 5 G7 INTRO KIT (GEN 5)	4	PA
OMNIPOD 5 G7 PODS (GEN 5)	4	PA
OMNIPOD 5 LIBRE2 PLUS G6	4	PA
OMNIPOD 5 LIBRE2 PLUS G6 PODS	4	PA
OMNIPOD CLASSIC PDM STARTER KIT (GEN 3)	4	PA
OMNIPOD CLASSIC PODS (GEN 3)	4	PA
OMNIPOD DASH INTRO KIT (GEN 4)	4	PA
OMNIPOD DASH PDM KIT (GEN 4)	4	PA
OMNIPOD DASH PODS (GEN 4)	4	PA
PROTOPAM CHLORIDE INJ	4	
<i>ringers irrigation soln 4.5meq/l; 156meq/l; 4meq/l; 147meq/l</i>	1	
<i>sodium chloride 0.9%</i>	2	
<i>sodium phenylacetate/sodium benzoate</i>	5	
<i>sterile water for irrigation</i>	1	
SURE COMFORT INSULIN SYRINGE/U-100/0.5ML/29G X 1/2"	3	
<i>tis-u-sol</i>	1	
TODAYS HEALTH ORIGINAL PEN NEEDLES 29G X 1/2"	3	
VISTOGARD	5	
<b>Ophthalmic Agents</b>		
<b><i>Ophthalmic Agents, Other</i></b>		
<i>atropine sulfate soln 1%</i>	1	
<i>bacitracin/polymyxin b</i>	2	
<i>brimonidine tartrate/timolol maleate</i>	2	
<i>cyclopentolate hcl soln 1%</i>	1	
<i>cyclopentolate hydrochloride soln 1%</i>	1	
<i>cyclosporine emul 0.05%</i>	4	
CYSTADROPS	5	QL(20 ML per 28 days); PA
CYSTARAN	5	QL(60 ML per 28 days); PA
<i>dorzolamide hcl/timolol maleate</i>	1	
<i>dorzolamide hydrochloride/timolol maleate pf</i>	1	
<i>neo-polycin</i>	2	
<i>neo-polycin hc</i>	2	
<i>neomycin/bacitracin/polymyxin</i>	2	
<i>neomycin/polymyxin/bacitracin/hydrocortisone</i>	2	
<i>neomycin/polymyxin/dexamethasone</i>	1	
<i>neomycin/polymyxin/gramicidin</i>	1	
<i>neomycin/polymyxin/hydrocortisone ophthalmic susp 1%; 3.5mg/ml; 10000unit/ml</i>	2	
OXERVATE	5	PA
<i>phenylephrine hydrochloride soln 10%</i>	1	

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Drug Name	Drug Tier	Requirements/Limits
<i>polycin</i>	2	
<i>polymyxin b sulfate/trimethoprim sulfate</i>	1	
<i>proparacaine hcl</i>	1	
RESTASIS	4	
RESTASIS MULTIDOSE	4	
ROCKLATAN	4	
SIMBRINZA	3	
<i>sulfacetamide sodium/prednisolone sodium phosphate</i>	1	
<i>tobramycin/dexamethasone</i>	2	
VABYSMO SOSY	5	
VABYSMO SOLN	5	
XIIDRA	3	
<b>Ophthalmic Anti-allergy Agents</b>		
ALOCRIL	4	
<i>azelastine hcl ophthalmic soln 0.05%</i>	2	
<i>cromolyn sodium soln 4%</i>	1	
<i>olopatadine hydrochloride soln 0.2%</i>	2	
<b>Ophthalmic Anti-Infectives</b>		
<i>bacitracin</i>	2	
<i>ciprofloxacin hydrochloride soln 0.3%</i>	1	
<i>erythromycin oint 5mg/gm</i>	1	
<i>gatifloxacin</i>	2	
<i>gentamicin sulfate ophthalmic soln 0.3%</i>	1	
<i>levofloxacin ophthalmic soln 0.5%</i>	2	
<i>moxifloxacin hydrochloride ophthalmic soln 0.5%</i>	2	
NATACYN	4	
<i>ofloxacin ophthalmic soln 0.3%</i>	1	
<i>sulfacetamide sodium oint 10%</i>	2	
<i>sulfacetamide sodium soln 10%</i>	1	
<i>tobramycin soln 0.3%</i>	1	
<i>trifluridine</i>	2	
XDEMVY	5	QL(10 ML per 42 days)
ZIRGAN	4	
<b>Ophthalmic Anti-inflammatory</b>		
<i>bromfenac</i>	4	
BROMFENAC SODIUM SOLN 0.075%	4	
<i>dexamethasone sodium phosphate ophthalmic soln 0.1%</i>	1	
<i>diclofenac sodium ophthalmic soln 0.1%</i>	2	
<i>flurbiprofen sodium</i>	1	
<i>ketorolac tromethamine ophthalmic soln 0.5%</i>	1	
<i>loteprednol etabonate susp 0.5%</i>	4	
<i>prednisolone acetate</i>	1	
<i>prednisolone sodium phosphate ophthalmic soln 1%</i>	1	
<b>Ophthalmic Beta-Adrenergic Blocking Agents</b>		

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Drug Name	Drug Tier	Requirements/Limits
<i>betaxolol hcl soln 0.5%</i>	1	
<i>carteolol hcl</i>	1	
<i>levobunolol hcl soln 0.5%</i>	1	
<i>timolol maleate ophthalmic gel forming solg 0.25%</i>	2	
<i>timolol maleate ophthalmic gel forming solg 0.5%</i>	4	
<i>timolol maleate soln 0.25%, 0.5%</i>	1	
<i>timolol maleate soln 0.5%</i>	2	; Once Daily
<b>Ophthalmic Intraocular Pressure Lowering Agents, Other</b>		
<i>acetazolamide</i>	2	
<i>acetazolamide er</i>	2	
<i>apraclonidine</i>	1	
<i>brimonidine tartrate soln 0.15%, 0.2%</i>	2	
<i>dorzolamide hydrochloride</i>	1	
<i>methazolamide tabs</i>	4	
<i>pilocarpine hcl soln 1%, 2%, 4%</i>	2	
RHOPRESSA	4	
<b>Ophthalmic Prostaglandin and Prostanoid Analogs</b>		
<i>latanoprost soln</i>	1	
LUMIGAN	3	
<i>tafluprost</i>	4	
<i>travoprost</i>	2	
VYZULTA	4	
<b>Otic Agents</b>		
<b>Otic Agents</b>		
<i>acetic acid</i>	2	
<i>flac</i>	2	
<i>fluocinolone acetonide ear drops</i>	2	
<i>fluocinolone acetonide oil 0.01%</i>	2	
<i>neomycin/polymyxin/hc</i>	2	
<i>neomycin/polymyxin/hydrocortisone soln 1%; 3.5mg/ml; 10000unit/ml</i>	2	
<i>neomycin/polymyxin/hydrocortisone otic susp 1%; 3.5mg/ml; 10000unit/ml</i>	2	
<i>ofloxacin otic soln 0.3%</i>	1	
<b>Respiratory Tract/Pulmonary Agents</b>		
<b>Anti-inflammatories, Inhaled Corticosteroids</b>		
ARNUITY ELLIPTA	3	
<i>budesonide susp 0.25mg/2ml, 0.5mg/2ml, 1mg/2ml</i>	2	B/D
<i>flunisolide soln 0.025%</i>	1	
<i>fluticasone propionate susp 50mcg/act</i>	2	
QVAR REDHALER	3	
<b>Antihistamines</b>		
<i>azelastine hcl nasal soln 0.15%</i>	2	
<i>azelastine hydrochloride soln 0.1%</i>	2	

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<i>cetirizine hydrochloride soln 5mg/5ml</i>	2	
<i>cyproheptadine hcl syrp</i>	2	
<i>cyproheptadine hydrochloride tabs</i>	2	
<i>desloratadine</i>	2	
<i>diphenhydramine hcl elix</i>	2	PA
<i>diphenhydramine hydrochloride inj</i>	2	
<i>hydroxyzine hcl tabs 50mg</i>	4	PA
<i>hydroxyzine hydrochloride tabs 10mg, 25mg</i>	4	PA
<i>hydroxyzine pamoate caps</i>	4	PA
<i>levocetirizine dihydrochloride tabs</i>	2	
<b>Antileukotrienes</b>		
<i>montelukast sodium chew, pack, tabs</i>	1	
<i>zafirlukast</i>	2	
<b>Bronchodilators, Anticholinergic</b>		
ATROVENT HFA	3	
<i>ipratropium bromide inhalation soln</i>	1	B/D
<i>ipratropium bromide nasal soln</i>	1	
SPIRIVA RESPIMAT	3	
<i>tiotropium bromide</i>	4	
TUDORZA PRESSAIR	3	
<b>Bronchodilators, Sympathomimetic</b>		
<i>albuterol sulfate hfa aers 108mcg/act</i>	1	
<i>albuterol sulfate hfa aers 108mcg/act</i>	2	
<i>albuterol sulfate syrp</i>	1	
<i>albuterol sulfate nebu</i>	2	B/D
<i>albuterol sulfate tabs</i>	2	
<i>arformoterol tartrate</i>	4	B/D
<i>epinephrine inj 0.15mg/0.15ml, 0.15mg/0.3ml, 0.3mg/0.3ml</i>	2	
<i>isoproterenol hydrochloride</i>	2	
<i>levalbuterol hcl nebu 0.63mg/3ml</i>	4	B/D
<i>levalbuterol hydrochloride nebu 0.63mg/3ml</i>	4	B/D
<i>levalbuterol tartrate hfa</i>	2	
PROAIR DIGIHALER	3	
PROAIR RESPICLICK	3	
SEREVENT DISKUS	3	
<i>terbutaline sulfate tabs</i>	2	
<i>terbutaline sulfate inj</i>	5	
<i>ventolin hfa</i>	2	
<b>Cystic Fibrosis Agents</b>		
CAYSTON	5	PA
KALYDECO	5	PA
ORKAMBI	5	PA
PULMOZYME	5	PA
SYMDEKO	5	PA

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TOBI PODHALER	5	PA
<i>tobramycin nebu 300mg/5ml</i>	5	PA
TRIKAFTA THPK	5	PA
TRIKAFTA TBPk 100MG; 0; 50MG	5	PA
<b>Mast Cell Stabilizers</b>		
<i>cromolyn sodium nebu 20mg/2ml</i>	3	B/D
<b>Phosphodiesterase Inhibitors, Airways Disease</b>		
<i>aminophylline inj</i>	1	
<i>elixophyllin</i>	1	
<i>roflumilast</i>	4	ST
<i>theophylline</i>	1	
<i>theophylline er tb24</i>	2	
<i>theophylline er tb12 300mg, 450mg</i>	2	
<b>Pulmonary Antihypertensives</b>		
ADEMPAS	5	PA
<i>alyq</i>	4	PA
<i>ambrisentan</i>	5	PA
<i>epoprostenol sodium</i>	5	PA
OPSUMIT	5	PA
ORENITRAM TITRATION KIT MONTH 1	5	QL(336 EA per 365 days); PA
ORENITRAM TITRATION KIT MONTH 2	5	QL(672 EA per 365 days); PA
ORENITRAM TITRATION KIT MONTH 3	5	QL(504 EA per 365 days); PA
ORENITRAM TBCR 0.125MG	3	PA
ORENITRAM TBCR 0.25MG, 1MG, 2.5MG, 5MG	5	PA
REMODULIN	5	PA
SILDENAFIL CITRATE TABS	3	PA
<i>sildenafil inj</i>	5	PA
<i>tadalafil tabs 20mg</i>	4	PA
<i>treprostinil</i>	5	PA
TYVASO	5	PA
TYVASO DPI INSTITUTIONAL KIT	5	PA
TYVASO DPI MAINTENANCE KIT	5	PA
TYVASO DPI TITRATION KIT	5	PA
TYVASO REFILL KIT	5	PA
TYVASO STARTER KIT	5	PA
UPTRAVI	5	QL(60 EA per 30 days); PA
UPTRAVI TITRATION PACK	5	QL(400 EA per 365 days); PA
VENTAVIS	5	PA
<b>Pulmonary Fibrosis Agents</b>		
OFEV	5	QL(60 EA per 30 days); PA
<i>pirfenidone caps</i>	5	PA
PIRFENIDONE TABS 534MG	5	PA
<i>pirfenidone tabs 267mg, 801mg</i>	5	PA
<b>Respiratory Tract Agents, Other</b>		

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<i>acetylcysteine inhalation soln</i>	2	B/D
<i>acetylcysteine inj</i>	2	
ANORO ELLIPTA	3	
BEVESPI AEROSPHERE	4	
BREO ELLIPTA	3	
<i>breynd</i>	4	QL(10.3 GM per 30 days)
BREZTRI AEROSPHERE	3	
BRONCHITOL	5	QL(560 EA per 28 days); PA
COMBIVENT RESPIMAT	3	
DULERA	3	
<i>fluticasone propionate/salmeterol diskus</i>	2	
<i>fluticasone propionate/salmeterol aepb 113mcg/act; 14mcg/act, 232mcg/act; 14mcg/act, 500mcg/act; 50mcg/act, 55mcg/act; 14mcg/act</i>	2	
<i>ipratropium bromide/albuterol sulfate</i>	1	B/D
NUCALA VIAL; PREFILLED SYRINGE	5	PA
<i>ribavirin solr 6gm</i>	5	PA
STIOLTO RESPIMAT	3	
TEZSPIRE	5	QL(1.91 ML per 28 days); PA
TRELEGY ELLIPTA	3	
<i>wixela inhub</i>	2	
<b>Skeletal Muscle Relaxants</b>		
<i>Skeletal Muscle Relaxants</i>		
<i>cyclobenzaprine hydrochloride tabs 10mg, 5mg</i>	2	PA
<i>methocarbamol tabs 500mg, 750mg</i>	2	
<b>Sleep Disorder Agents</b>		
<i>Sleep Promoting Agents</i>		
BELSOMRA	3	
DAYVIGO	3	
<i>doxepin hydrochloride tabs 3mg, 6mg</i>	2	
<i>flurazepam hydrochloride</i>	2	QL(30 EA per 30 days)
HETLIOZ LQ	5	PA
<i>pentobarbital sodium</i>	4	
<i>ramelteon</i>	4	QL(30 EA per 30 days)
<i>tasimelteon</i>	5	PA
<i>temazepam</i>	2	QL(30 EA per 30 days)
<i>triazolam</i>	2	QL(30 EA per 30 days)
<i>zolpidem tartrate tabs</i>	2	
<b>Wakefulness Promoting Agents</b>		
<i>armodafinil</i>	2	PA
MODAFINIL TABS	3	PA
SODIUM OXYBATE	5	PA
SUNOSI	4	QL(30 EA per 30 days); PA

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		<i>albendazole</i>	24
		<i>albuterol sulfate</i>	70
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<i>acamprosate calcium dr</i>	3		
<i>acarbose</i>	31		
<i>accutane</i>	42		
<i>acebutolol hydrochloride</i>	36		
<i>acetaminophen/codeine</i>	2		
<i>acetaminophen/codeine phosphate</i>	2		
<i>acetazolamide</i>	69		
<i>acetazolamide er</i>	69		
<i>acetazolamide sodium</i>	38		
<i>acetic acid</i>	69		
<i>acetic acid 0.25%</i>	52		
<i>acetylcysteine</i>	72		
<i>acitretin</i>	42		
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<i>amiloride/hydrochlorothiazide</i>	38	<i>arformoterol tartrate</i>	70
<i>aminocaproic acid</i>	34	ARIKAYCE	4
<i>aminophylline</i>	71	<i>aripiprazole</i>	25
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AMINOSYN-PF	45	ARISTADA	26
AMINOSYN-PF 7%	45	ARISTADA INITIO	26
<i>amiodarone hydrochloride</i>	35	<i>armodafinil</i>	72
<i>amitriptyline hcl</i>	12	ARMOUR THYROID	59
<i>amitriptyline hydrochloride</i>	12	ARNUITY ELLIPTA	69
AMJEVITA	63	ARRANON	17
<i>amlodipine besylate</i>	37	<i>arsenic trioxide</i>	17
<i>amlodipine besylate/benazepril hcl</i>	38	ARZERRA	22
<i>amlodipine besylate/benazepril hydrochloride</i>	38	ASCENIV	60
<i>amlodipine besylate/valsartan</i>	38	<i>ascomp/codeine</i>	2
<i>ammonium lactate</i>	43	ASENAPINE MALEATE SL	26
<i>amnestem</i>	42	<i>ashlyna</i>	54
<i>amoxapine</i>	12	<i>aspirin/dipyridamole</i>	34
<i>amoxicillin</i>	6	<i>aspirin/dipyridamole er</i>	34
<i>amoxicillin/clavulanate potassium</i>	6	ASTAGRAF XL	63
<i>amoxicillin/clavulanate potassium er</i>	6	<i>atazanavir</i>	29
<i>amphetamine/dextroamphetamine</i>	40	<i>atazanavir sulfate</i>	29
<i>amphotericin b</i>	13	<i>atenolol</i>	36
<i>amphotericin b liposome</i>	13	<i>atenolol/chlorthalidone</i>	38
<i>ampicillin</i>	6	ATGAM	60
<i>ampicillin sodium</i>	6	<i>atomoxetine</i>	40
<i>ampicillin/sulbactam</i>	6	<i>atomoxetine hydrochloride</i>	40
<i>ampicillin-sulbactam</i>	6	<i>atorvastatin calcium</i>	39
<i>anagrelide hydrochloride</i>	33	<i>atovaquone</i>	24
<i>anastrozole</i>	19	<i>atovaquone/proguanil hcl</i>	24
ANKTIVA	17	<i>atovaquone/proguanil hydrochloride</i>	24
ANNOVERA	54	<i>atropine sulfate</i>	66
ANORO ELLIPTA	72	<i>atropine sulfate</i>	67
<i>apomorphine hydrochloride</i>	25	ATROVENT HFA	70
APONVIE	13	<i>aubra eq</i>	54
<i>apraclonidine</i>	69	AUGMENTIN	6
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AVSOLA	63	BERINERT	60
AVYCAZ	5	BESPONSA	22
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<i>azacitidine</i>	18	<i>betamethasone dipropionate augmented</i>	43
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<i>azelaic acid</i>	42	<i>phosphate/betamethasone acetate</i>	
<i>azelastine hcl</i>	68	<i>betamethasone valerate</i>	43
<i>azelastine hcl</i>	69	BETASERON	41
<i>azelastine hydrochloride</i>	69	<i>betaxolol hcl</i>	36
AZELEX	43	<i>betaxolol hcl</i>	69
<i>azithromycin</i>	7	<i>bethanechol chloride</i>	52
<i>aztreonam</i>	4	BEVESPI AEROSPHERE	72
<i>azurette</i>	54	<i>bexarotene</i>	24
<i>bacitracin</i>	68	BEXSERO	64
<i>bacitracin/polymyxin b</i>	67	BEYFORTUS	60
<i>baclofen</i>	27	<i>bicalutamide</i>	16
<i>balsalazide disodium</i>	65	BICILLIN C-R	6
BALVERSA	20	BICILLIN L-A	6
<i>balziva</i>	54	BIKTARVY	28
BARACLUDGE	27	<i>bisoprolol fumarate</i>	36
BAVENCIO	22	<i>bisoprolol fumarate/hydrochlorothiazide</i>	38
BAXDELA	7	BIVIGAM	60
BCG VACCINE	64	BIZENGRI	22
BD INSULIN SYRINGE	66	<i>bleomycin sulfate</i>	18
SAFETYGLIDE/1ML/29G X 1/2"		BLINCYTO	22
B-D INSULIN SYRINGE ULTRAFINE	66	<i>blisovi 24 fe</i>	54
II/0.3ML/31G X 5/16"		<i>blisovi fe 1.5/30</i>	54
BD INSULIN SYRINGE ULTRA-	66	<i>blisovi fe 1/20</i>	54
FINE/0.5ML/30G X 12.7MM		BOOSTRIX	64
BD INSULIN SYRINGE ULTRA-	66	BORTEZOMIB	18
FINE/1ML/31G X 8MM		BOSULIF	20
BD PEN NEEDLE/ORIGINAL/ULTRA-	66	BOTOX	27
FINE/29G X 12.7MM		BRAFTOVI	20
BELEODAQ	20	BREO ELLIPTA	72
BELSOMRA	72	<i>breyana</i>	72
<i>benazepril hydrochloride</i>	35	BREZTRI AEROSPHERE	72
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BROMFENAC SODIUM	68	<i>carbamazepine</i>	10
<i>bromocriptine mesylate</i>	25	<i>carbamazepine er</i>	10
BRONCHITOL	72	<i>carbidopa</i>	25
BRUKINSA	20	<i>carbidopa/levodopa</i>	25
<i>budesonide</i>	65	<i>carbidopa/levodopa er</i>	25
<i>budesonide</i>	69	<i>carbidopa/levodopa odt</i>	25
<i>bumetanide</i>	39	<i>carbidopa/levodopa/entacapone</i>	24
<i>buprenorphine</i>	1	<i>carboplatin</i>	15
<i>buprenorphine hcl</i>	3	<i>carglumic acid</i>	45
<i>buprenorphine hcl/naloxone hcl</i>	3	CARMUSTINE	15
<i>buprenorphine hydrochloride/naloxone</i>	3	<i>carteolol hcl</i>	69
<i>hydrochloride</i>		<i>cartia xt</i>	37
<i>bupropion hydrochloride</i>	11	<i>carvedilol</i>	36
<i>bupropion hydrochloride er (sr)</i>	4	<i>carvedilol phosphate er</i>	36
<i>bupropion hydrochloride er (sr)</i>	11	<i>caspofungin acetate</i>	13
<i>bupropion hydrochloride er (xl)</i>	11	CAYSTON	70
<i>bupirone hcl</i>	30	<i>cefaclor</i>	5
<i>bupirone hydrochloride</i>	30	<i>cefaclor er</i>	5
<i>busulfan</i>	15	<i>cefadroxil</i>	5
BUSULFEX	15	CEFAZOLIN	5
<i>butalbital/acetaminophen/caffeine</i>	41	<i>cefazolin sodium</i>	5
<i>butalbital/acetaminophen/caffeine/codeine</i>	2	<i>cefazolin sodium/dextrose</i>	5
<i>butalbital/aspirin/caffeine</i>	41	CEFAZOLIN/DEXTROSE	5
<i>butalbital/aspirin/caffeine/codeine</i>	2	<i>cefdinir</i>	6
<i>butorphanol tartrate</i>	2	CEFEPIME	6
CABENUVA	28	CEFEPIME HYDROCHLORIDE	6
<i>cabergoline</i>	59	CEFEPIME/DEXTROSE	6
CABLIVI	34	<i>cefixime</i>	6
CABOMETYX	20	CEFOTAXIME SODIUM	6
<i>caffeine citrate</i>	41	<i>cefotetan</i>	6
<i>calcipotriene</i>	44	<i>cefoxitin sodium</i>	6
<i>calcitonin salmon</i>	65	<i>cefpodoxime proxetil</i>	6
<i>calcitonin-salmon</i>	65	<i>cefprozil</i>	6
<i>calcitriol</i>	44	<i>ceftazidime</i>	6
<i>calcitriol</i>	65	<i>ceftriaxone in iso-osmotic dextrose</i>	6
<i>calcium acetate</i>	48	<i>ceftriaxone sodium</i>	6
CALQUENCE	20	<i>ceftriaxone/dextrose</i>	6
<i>camila</i>	58	<i>cefuroxime axetil</i>	6
<i>camrese</i>	54	<i>cefuroxime sodium</i>	6
<i>camrese lo</i>	54	<i>celecoxib</i>	1
<i>candesartan cilexetil</i>	35	<i>cephalexin</i>	6
<i>candesartan cilexetil/hydrochlorothiazide</i>	38	CERDELGA	50

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<i>cevimeline hydrochloride</i>	42	<i>clindamycin phosphate</i>	4
<i>charlotte 24 fe</i>	54	<i>clindamycin phosphate</i>	45
<i>chateal eq</i>	54	<i>clindamycin phosphate/dextrose</i>	4
CHEMET	48	CLINIMIX 4.25%/DEXTROSE 10%	45
<i>chloramphenicol sodium succinate</i>	4	CLINIMIX 4.25%/DEXTROSE 5%	45
<i>chlordiazepoxide hcl</i>	30	CLINIMIX 5%/DEXTROSE 15%	45
<i>chlordiazepoxide hydrochloride</i>	30	CLINIMIX 5%/DEXTROSE 20%	46
<i>chlorhexidine gluconate</i>	42	CLINIMIX 6/5	46
<i>chloroquine phosphate</i>	24	CLINIMIX 8/10	46
<i>chlorothiazide sodium</i>	39	CLINIMIX 8/14	46
<i>chlorpromazine hcl</i>	25	CLINIMIX E 2.75%/DEXTROSE 5%	46
<i>chlorpromazine hydrochloride</i>	25	CLINIMIX E 4.25%/DEXTROSE 10%	46
<i>chlorthalidone</i>	39	CLINIMIX E 4.25%/DEXTROSE 5%	46
CHOLBAM	50	CLINIMIX E 5%/DEXTROSE 15%	46
<i>cholestyramine</i>	39	CLINIMIX E 5%/DEXTROSE 20%	46
<i>cholestyramine light</i>	39	CLINIMIX E 8/10	46
<i>chorionic gonadotropin</i>	53	CLINIMIX E 8/14	46
<i>ciclodan</i>	44	CLINISOL SF 15%	46
<i>ciclopirox</i>	45	CLINOLIPID	66
<i>ciclopirox nail lacquer</i>	45	<i>clobazam</i>	9
<i>ciclopirox olamine</i>	45	<i>clobetasol propionate</i>	43
<i>cidofovir</i>	27	<i>clobetasol propionate e</i>	43
<i>cilostazol</i>	34	<i>clobetasol propionate emollient</i>	43
CIMDUO	28	<i>clofarabine</i>	17
<i>cimetidine</i>	50	<i>clomipramine hydrochloride</i>	12
CIMZIA	63	<i>clonazepam</i>	9
CIMZIA STARTER KIT	63	<i>clonazepam odt</i>	9
<i>cinacalcet hydrochloride</i>	65	<i>clonidine</i>	35
CINRYZE	60	<i>clonidine hydrochloride</i>	35
CINVANTI	13	<i>clonidine hydrochloride</i>	40
<i>ciprofloxacin hcl</i>	7	<i>clonidine hydrochloride er</i>	40
<i>ciprofloxacin hydrochloride</i>	7	<i>clopidogrel</i>	35
<i>ciprofloxacin hydrochloride</i>	68	<i>clorazepate dipotassium</i>	30
<i>ciprofloxacin i.v.-in d5w</i>	7	<i>clotrimazole</i>	13
<i>cisplatin</i>	15	<i>clotrimazole/betamethasone dipropionate</i>	44
<i>citalopram hydrobromide</i>	11	<i>clozapine</i>	26
<i>cladribine</i>	17	<i>clozapine odt</i>	26
<i>claravis</i>	43	COARTEM	24
<i>clarithromycin</i>	7	COBENFY	41
<i>clarithromycin er</i>	7	COBENFY STARTER PACK	41
<i>clindacin</i>	45	CODEINE SULFATE	2
<i>clindacin etz pledgets</i>	4	<i>colchicine</i>	14
<i>clindamycin hcl</i>	4	<i>colesevelam hydrochloride</i>	39

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<i>colistimethate sodium</i>	4	CYTOGAM	60
COLUMVI	18	<i>dabigatran etexilate</i>	33
COMBIVENT RESPIMAT	72	<i>dacarbazine</i>	16
COMETRIQ	20	<i>dactinomycin</i>	18
COMPLERA	28	<i>dalfampridine er</i>	41
<i>compro</i>	12	<i>danazol</i>	53
<i>constulose</i>	49	<i>dantrolene sodium</i>	27
COPIKTRA	20	DANYELZA	22
CORLANOR	38	DANZITEN	20
COSELA	66	<i>dapsone</i>	15
COSENTYX	61	DAPTACEL	64
COSENTYX SENSOREADY PEN	61	<i>daptomycin</i>	5
COSENTYX UNOREADY	61	DAPTOMYCIN/SODIUM CHLORIDE	5
COTELLIC	20	DARIFENACIN HYDROBROMIDE ER	52
CREON	50	<i>darunavir</i>	29
CRESEMBA	13	DARZALEX	23
CRINONE	58	DARZALEX FASPRO	23
<i>cromolyn sodium</i>	50	<i>dasatinib</i>	20
<i>cromolyn sodium</i>	68	<i>dasetta 1/35</i>	54
<i>cromolyn sodium</i>	71	<i>dasetta 7/7/7</i>	54
<i>cryselle-28</i>	54	DATROWAY	23
CRYSVITA	50	<i>daunorubicin hydrochloride</i>	18
CURITY ALL PURPOSE SPONGES 2"X2"	66	DAURISMO	20
CURITY GAUZE PADS 2"X2" 12 PLY	66	<i>daysee</i>	54
CUVITRU	60	DAYVIGO	72
<i>cyclobenzaprine hydrochloride</i>	72	<i>deblitane</i>	58
<i>cyclopentolate hcl</i>	67	<i>decitabine</i>	18
<i>cyclopentolate hydrochloride</i>	67	<i>deferasirox</i>	48
CYCLOPHOSPHAMIDE	15	<i>deferiprone</i>	48
CYCLOPHOSPHAMIDE MONOHYDRATE	15	<i>deferoxamine mesylate</i>	66
CYCLOSERINE	15	DELSTRIGO	28
<i>cyclosporine</i>	63	<i>delyla</i>	54
<i>cyclosporine</i>	67	<i>demeclocycline hcl</i>	8
<i>cyclosporine modified</i>	63	<i>demeclocycline hydrochloride</i>	8
<i>cyproheptadine hcl</i>	70	DENGVAXIA	64
<i>cyproheptadine hydrochloride</i>	70	DEPO-ESTRADIOL	54
CYRAMZA	22	DEPO-SUBQ PROVERA 104	58
<i>cyred eq</i>	54	DESCOVY	28
CYSTADROPS	67	<i>desipramine hydrochloride</i>	12
CYSTAGON	51	<i>desloratadine</i>	70
CYSTARAN	67	<i>desmopressin acetate</i>	53
<i>cytarabine</i>	17	<i>desogestrel/ethinyl estradiol</i>	54
		<i>desonide</i>	43
		<i>desoximetasone</i>	43

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<i>desvenlafaxine er</i>	11	DIFICID	7
<i>dexamethasone</i>	53	DIGOXIN	35
DEXAMETHASONE INTENSOL	52	<i>dihydroergotamine mesylate</i>	14
<i>dexamethasone sodium phosphate</i>	53	DILANTIN	10
<i>dexamethasone sodium phosphate</i>	68	DILANTIN INFATABS	10
DEXAMETHASONE SODIUM	52	<i>diltiazem hcl</i>	37
PHOSPHATE +RFID		<i>diltiazem hcl cd</i>	37
<i>dexmethylphenidate hcl</i>	40	<i>diltiazem hcl er</i>	37
<i>dexmethylphenidate hcl er</i>	40	<i>diltiazem hydrochloride</i>	37
<i>dexmethylphenidate hydrochloride</i>	41	<i>diltiazem hydrochloride er</i>	37
<i>dexmethylphenidate hydrochloride er</i>	41	<i>dilt-xr</i>	37
<i>dexrazoxane</i>	24	<i>dimenhydrinate</i>	12
<i>dextroamphetamine sulfate</i>	40	<i>dimethyl fumarate</i>	41
<i>dextroamphetamine sulfate er</i>	40	<i>dimethyl fumarate starterpack</i>	41
<i>dextrose</i>	46	<i>diphenhydramine hcl</i>	70
<i>dextrose 5% /electrolyte #48 viaflex</i>	46	<i>diphenhydramine hydrochloride</i>	70
<i>dextrose 10%</i>	46	<i>diphenoxylate hydrochloride/atropine</i>	49
<i>dextrose 10%/sodium chloride 0.2%</i>	46	<i>sulfate</i>	
<i>dextrose 10%/sodium chloride 0.45%</i>	46	<i>diphenoxylate/atropine</i>	49
<i>dextrose 2.5%/sodium chloride 0.45%</i>	46	DIPHThERIA/TETANUS TOXOIDS	64
<i>dextrose 25%</i>	46	ADSORBED PEDIATRIC	
<i>dextrose 5%</i>	46	<i>disulfiram</i>	3
<i>dextrose 5%/lactated ringers</i>	46	DIURIL	39
<i>dextrose 5%/sodium chloride 0.2%</i>	46	<i>divalproex sodium dr</i>	9
<i>dextrose 5%/sodium chloride 0.3%</i>	46	<i>divalproex sodium er</i>	9
<i>dextrose 5%/sodium chloride 0.33%</i>	46	<i>dobutamine hcl</i>	38
<i>dextrose 5%/sodium chloride 0.45%</i>	46	<i>dobutamine hcl/d5w</i>	38
<i>dextrose 5%/sodium chloride 0.9%</i>	46	<i>dobutamine hydrochloride/dextrose 5%</i>	38
<i>dextrose 50%</i>	46	DOCETAXEL	18
<i>dextrose/sodium chloride</i>	46	<i>dofetilide</i>	35
DIACOMIT	9	<i>dolishale</i>	54
<i>diazepam</i>	30	<i>donepezil hcl</i>	10
<i>diazepam intensol</i>	30	<i>donepezil hydrochloride</i>	10
<i>diazepam rectal gel</i>	9	<i>donepezil hydrochloride odt</i>	10
<i>diazoxide</i>	32	<i>dopamine hydrochloride</i>	38
<i>dichlorphenamide</i>	51	<i>dopamine hydrochloride/dextrose</i>	38
<i>diclofenac sodium</i>	1	<i>dopamine/d5w</i>	38
<i>diclofenac sodium</i>	44	DOPTELET	35
<i>diclofenac sodium</i>	68	<i>dorzolamide hcl/timolol maleate</i>	67
<i>diclofenac sodium dr</i>	1	<i>dorzolamide hydrochloride</i>	69
<i>diclofenac sodium er</i>	1	<i>dorzolamide hydrochloride/timolol maleate</i>	67
<i>diclofenac sodium/misoprostol</i>	1	<i>pf</i>	
<i>dicloxacillin sodium</i>	6	<i>dotti</i>	54
<i>dicyclomine hcl</i>	49	DOVATO	28
<i>dicyclomine hydrochloride</i>	49	<i>doxazosin</i>	52

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<i>doxepin hcl</i>	12	<i>elinest</i>	55
<i>doxepin hydrochloride</i>	12	ELIQUIS	33
DOXEPIN HYDROCHLORIDE	43	ELIQUIS STARTER PACK	33
<i>doxepin hydrochloride</i>	72	ELITEK	24
<i>doxercalciferol</i>	65	<i>elixophyllin</i>	71
<i>doxorubicin hcl</i>	18	ELMIRON	52
<i>doxorubicin hydrochloride</i>	18	ELREXFIO	18
<i>doxorubicin hydrochloride liposomal</i>	18	<i>eluryng</i>	55
<i>doxy 100</i>	8	ELZONRIS	18
<i>doxycycline</i>	8	EMCYT	16
<i>doxycycline hyclate</i>	8	EMEND	13
<i>doxycycline hyclate</i>	42	EMGALITY	14
<i>doxycycline monohydrate</i>	8	EMPAVELI	61
DRIZALMA SPRINKLE	11	EMPLICITI	23
<i>dronabinol</i>	13	EMSAM	11
<i>droperidol</i>	12	<i>emtricitabine</i>	28
DROPLET PEN NEEDLES 29GX10MM	66	<i>emtricitabine/tenofovir disoproxil</i>	28
<i>drospirenone/ethinyl estradiol</i>	54	<i>emtricitabine/tenofovir disoproxil fumarate</i>	28
DROSPIRENONE/ETHINYL	55	EMTRIVA	28
ESTRADIOL/LEVOMEFOLATE		<i>emzahh</i>	58
CALCIUM		<i>enalapril maleate</i>	35
DROXIA	17	<i>enalapril maleate/hydrochlorothiazide</i>	38
<i>droxidopa</i>	35	<i>enalaprilat</i>	35
DULERA	72	ENBREL	63
<i>duloxetine hydrochloride</i>	11	ENBREL MINI	63
DUPIXENT	61	ENBREL SURECLICK	63
<i>duramorph</i>	2	ENDARI	51
<i>dutasteride</i>	52	<i>endocet</i>	2
DYSPORT	27	ENGERIX-B	64
EASY COMFORT INSULIN	66	ENHERTU	23
SYRINGE/1ML/32GX5/16"		<i>enilloring</i>	55
EASY COMFORT INSULIN	66	<i>enoxaparin sodium</i>	33
SYRINGES/0.5ML/32GX5/16"		<i>enpresse-28</i>	55
<i>econazole nitrate</i>	13	<i>enskyce</i>	55
EDURANT	28	<i>entacapone</i>	24
<i>efavirenz</i>	28	<i>entecavir</i>	27
<i>efavirenz/emtricitabine/tenofovir disoproxil fumarate</i>	28	ENTRESTO	38
<i>efavirenz/lamivudine/tenofovir disoproxil fumarate</i>	28	<i>enulose</i>	49
ELAHERE	23	EPCLUSA	27
ELAPRASE	51	EPIDIOLEX	8
ELELYSO	51	<i>epinephrine</i>	70
ELEPSIA XR	8	<i>epitol</i>	10
		EPKINLY	18
		<i>eplerenone</i>	40

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<i>epoprostenol sodium</i>	71	EVOMELA	16
EPRONTIA	8	EVOTAZ	29
ERBITUX	23	<i>exemestane</i>	19
ERGOLOID MESYLATES	10	EXKIVITY	20
ERGOMAR	14	EXONDYS 51	51
ERGOTAMINE TARTRATE/CAFFEINE	14	EXSERVAN	41
<i>eribulin mesylate</i>	18	EXTAVIA	42
ERIVEDGE	20	<i>ezetimibe</i>	39
ERLEADA	16	FABRAZYME	51
<i>erlotinib hydrochloride</i>	20	<i>falmina</i>	55
<i>errin</i>	58	<i>famciclovir</i>	30
<i>ertapenem sodium</i>	7	<i>famotidine</i>	50
<i>ery</i>	45	<i>famotidine premixed</i>	50
ERYTHROCIN LACTOBIONATE	7	FANAPT	26
<i>erythrocin stearate</i>	7	FANAPT TITRATION PACK	26
<i>erythromycin</i>	45	FARXIGA	40
<i>erythromycin</i>	68	FASLODEX	16
<i>erythromycin base</i>	7	<i>febuxostat</i>	14
<i>erythromycin dr</i>	7	<i>feirza 1.5/30</i>	55
<i>erythromycin ethylsuccinate</i>	7	<i>feirza 1/20</i>	55
<i>erythromycin lactobionate</i>	7	<i>felbamate</i>	8
<i>escitalopram oxalate</i>	11	<i>felodipine er</i>	37
<i>esmolol hcl</i>	36	FEMRING	55
<i>esmolol hydrochloride in sodium chloride</i>	36	<i>fenofibrate</i>	39
<i>esmolol hydrochloride in sodium chloride</i>	36	<i>fenofibrate micronized</i>	39
<i>double strength</i>		<i>fenofibric acid</i>	39
<i>esmolol hydrochloride/sodium chloride</i>	36	<i>fenofibric acid dr</i>	39
<i>esomeprazole magnesium</i>	50	<i>fenopropfen calcium</i>	1
<i>estarylla</i>	55	<i>fentanyl</i>	1
ESTRADIOL	55	<i>fentanyl citrate oral transmucosal</i>	2
<i>estradiol valerate</i>	55	FERRIPROX	48
<i>estradiol/norethindrone acetate</i>	55	FERRIPROX TWICE-A-DAY	48
ESTRING	55	<i>fesoterodine fumarate er</i>	52
<i>ethacrynate sodium</i>	39	FETROJA	6
<i>ethambutol hydrochloride</i>	15	FETZIMA	11
<i>ethosuximide</i>	9	FETZIMA TITRATION PACK	11
<i>ethynodiol diacetate/ethinyl estradiol</i>	55	<i>finasteride</i>	52
<i>etodolac er</i>	1	<i> fingolimod hydrochloride</i>	42
<i>etonogestrel/ethinyl estradiol</i>	55	FINTEPLA	8
ETOPOPHOS	19	<i>finzala</i>	55
<i>etoposide</i>	19	FIRMAGON	59
<i>etravirine</i>	28	<i>flac</i>	69
<i>euthyrox</i>	59	<i>flavoxate hcl</i>	52
<i>everolimus</i>	20	FLEBOGAMMA DIF	60

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<i>flecainide acetate</i>	35	FRAGMIN	33
FLOXURIDINE	17	FRINDOVYX	16
<i>fluconazole</i>	13	FRUZAQLA	20
<i>fluconazole in nacl</i>	13	FULPHILA	34
<i>fluconazole in sodium chloride</i>	13	<i>fulvestrant</i>	16
<i>flucytosine</i>	13	<i>furosemide</i>	39
FLUDARABINE PHOSPHATE	20	FUZEON	29
<i>fludrocortisone acetate</i>	53	FYARRO	20
<i>flunisolide</i>	69	<i>fyavolv</i>	55
<i>fluocinolone acetonide</i>	43	FYCOMPA	8
<i>fluocinolone acetonide</i>	69	FYLNETRA	34
<i>fluocinolone acetonide body</i>	43	<i>gabapentin</i>	9
<i>fluocinolone acetonide ear drops</i>	69	GABLOFEN	27
<i>fluocinolone acetonide scalp</i>	43	GALAFOLD	51
<i>fluocinolone acetonide topical</i>	43	<i>galantamine hydrobromide</i>	10
<i>fluocinonide</i>	43	<i>galantamine hydrobromide er</i>	10
<i>fluoride</i>	46	<i>gallifrey</i>	58
<i>fluorouracil</i>	17	GAMASTAN	60
FLUOROURACIL	44	GAMMAGARD LIQUID	60
<i>fluoxetine dr</i>	11	GAMMAGARD S/D IGA LESS THAN	61
<i>fluoxetine hydrochloride</i>	11	1MCG/ML	
<i>fluphenazine decanoate</i>	25	GAMMAKED	61
<i>fluphenazine hcl</i>	25	GAMMAPLEX	61
<i>fluphenazine hydrochloride</i>	25	GAMUNEX-C	61
<i>flurazepam hydrochloride</i>	72	<i>ganciclovir</i>	27
<i>flurbiprofen</i>	1	GARDASIL 9	64
<i>flurbiprofen sodium</i>	68	<i>gatifloxacin</i>	68
<i>fluticasone propionate</i>	44	GATTEX	49
<i>fluticasone propionate</i>	69	<i>gavilyte-c</i>	49
<i>fluticasone propionate/salmeterol</i>	72	<i>gavilyte-g</i>	49
<i>fluticasone propionate/salmeterol diskus</i>	72	<i>gavilyte-n/flavor pack</i>	49
<i>fluvoxamine maleate</i>	11	GAVRETO	20
<i>fluvoxamine maleate er</i>	11	GAZYVA	23
FOLOTYN	17	<i>gefitinib</i>	20
<i>fomepizole</i>	66	<i>gemcitabine hydrochloride</i>	17
<i>fondaparinux sodium</i>	33	<i>gemfibrozil</i>	39
FORTEO	66	<i>gemmily</i>	55
<i>fosamprenavir calcium</i>	29	GEMTESA	52
<i>fosaprepitant dimeglumine</i>	13	<i>generlac</i>	49
<i>fosfomycin tromethamine</i>	5	<i>gengraf</i>	63
<i>fosinopril sodium</i>	35	<i>gentamicin sulfate</i>	4
<i>fosinopril sodium/hydrochlorothiazide</i>	38	<i>gentamicin sulfate</i>	68
<i>fosphenytoin sodium</i>	10	<i>gentamicin sulfate pediatric</i>	4
FOSRENOL	48	<i>gentamicin sulfate/0.9% sodium chloride</i>	4
FOTIVDA	20	GENVOYA	28

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GILENYA	42	<i>heather</i>	58
GILOTRIF	20	HEMANGEOL	36
GLASSIA	51	HEPAGAM B	61
<i>glatiramer acetate</i>	42	<i>heparin sodium</i>	33
<i>glatopa</i>	42	<i>heparin sodium/d5w</i>	33
GLEOSTINE	16	<i>heparin sodium/dextrose</i>	33
<i>glimepiride</i>	31	<i>heparin sodium/nacl 0.45%</i>	33
GLIPIZIDE	31	<i>heparin sodium/sodium chloride</i>	33
<i>glipizide er</i>	31	<i>heparin sodium/sodium chloride 0.9%</i>	33
<i>glipizide xl</i>	31	<i>heparin sodium/sodium chloride 0.9%</i>	33
<i>glipizide/metformin hydrochloride</i>	31	<i>premix</i>	
GLOBAL ALCOHOL PREP EASE PADS	66	HEPLISAV-B	64
GLUCAGEN HYPOKIT	32	HERCEPTIN	23
GLUCAGON EMERGENCY KIT	32	HERCEPTIN HYLECTA	23
GLUCAGON EMERGENCY KIT FOR	32	HERZUMA	23
LOW BLOOD SUGAR		HETLIOZ LQ	72
<i>glucose (dextrose) 50%</i>	46	HIBERIX	64
<i>glycopyrrolate</i>	49	HIZENTRA	61
<i>glydo</i>	3	HUMALOG	32
GLYXAMBI	31	HUMALOG JUNIOR KWIKPEN	32
GOMEKLI	20	HUMALOG KWIKPEN	32
GRAFAPEX	16	HUMALOG MIX 50/50	32
<i>granisetron hcl</i>	13	HUMALOG MIX 50/50 KWIKPEN	32
<i>granisetron hydrochloride</i>	13	HUMALOG MIX 75/25	32
GRANIX	34	HUMALOG MIX 75/25 KWIKPEN	32
<i>griseofulvin microsize</i>	13	<i>humulin 70/30</i>	32
<i>griseofulvin ultramicrosize</i>	13	HUMULIN 70/30 KWIKPEN	32
GVOKE HYPOPEN 1-PACK	32	<i>humulin n</i>	32
GVOKE HYPOPEN 2-PACK	32	HUMULIN N KWIKPEN	32
GVOKE KIT	32	<i>humulin r</i>	32
GVOKE PFS	32	HUMULIN R U-500 (CONCENTRATED)	32
HADLIMA	63	HUMULIN R U-500 KWIKPEN	32
HADLIMA PUSHTOUCH	63	<i>hydralazine hcl</i>	40
HAEGARDA	60	<i>hydralazine hydrochloride</i>	40
<i>hailey 1.5/30</i>	55	<i>hydrochlorothiazide</i>	39
<i>hailey 24 fe</i>	55	<i>hydrocodone bitartrate/acetaminophen</i>	2
<i>hailey fe 1.5/30</i>	55	<i>hydrocodone/acetaminophen</i>	2
<i>hailey fe 1/20</i>	55	<i>hydrocodone/ibuprofen</i>	2
HALAVEN	18	<i>hydrocortisone</i>	44
<i>halobetasol propionate</i>	44	<i>hydrocortisone</i>	53
<i>haloperidol</i>	25	<i>hydrocortisone</i>	65
<i>haloperidol decanoate</i>	25	<i>hydrocortisone butyrate</i>	44
<i>haloperidol lactate</i>	25	<i>hydrocortisone butyrate (lipid)</i>	44
HARVONI	27	<i>hydrocortisone butyrate (lipophilic)</i>	44
HAVRIX	64	<i>hydromorphone hcl</i>	2

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<i>hydroxychloroquine sulfate</i>	24	INLYTA	20
<i>hydroxyurea</i>	17	INQOVI	20
<i>hydroxyzine hcl</i>	70	INREBIC	18
<i>hydroxyzine hydrochloride</i>	70	INTELENCE	28
<i>hydroxyzine pamoate</i>	70	INTRALIPID	66
HYPERHEP B	61	<i>introvale</i>	55
HYPERRHO S/D	61	INVEGA HAFYERA	26
HYPERRHO S/D MINI-DOSE	61	INVEGA SUSTENNA	26
HYQVIA	61	INVEGA TRINZA	26
<i>ibandronate sodium</i>	66	IONOSOL-MB/DEXTROSE 5%	46
IBRANCE	18	IPOL INACTIVATED IPV	64
IBRANCE	20	<i>ipratropium bromide</i>	70
<i>ibu</i>	1	<i>ipratropium bromide/albuterol sulfate</i>	72
<i>ibuprofen</i>	1	<i>irbesartan</i>	35
<i>icatibant acetate</i>	60	<i>irbesartan/hydrochlorothiazide</i>	38
<i>iclevia</i>	55	<i>irinotecan hydrochloride</i>	19
ICLUSIG	20	ISENTRESS	28
<i>icosapent ethyl</i>	39	ISENTRESS HD	28
<i>idarubicin hcl</i>	18	<i>isibloom</i>	55
<i>idarubicin hydrochloride</i>	18	ISOLYTE-P/DEXTROSE 5%	46
IDHIFA	20	ISOLYTE-S	46
IFOSFAMIDE	16	ISOLYTE-S PH 7.4	46
ILARIS	61	<i>isoniazid</i>	15
<i>imatinib mesylate</i>	20	<i>isoproterenol hydrochloride</i>	70
IMBRUVICA	20	<i>isosorbide dinitrate</i>	40
IMDELLTRA	18	<i>isosorbide dinitrate/hydralazine</i>	38
IMFINZI	23	<i>hydrochloride</i>	
<i>imipenem/cilastatin</i>	7	<i>isosorbide mononitrate</i>	40
<i>imipramine hcl</i>	12	<i>isosorbide mononitrate er</i>	40
<i>imipramine hydrochloride</i>	12	<i>isotonic gentamicin</i>	4
<i>imipramine pamoate</i>	12	<i>isotretinoin</i>	43
<i>imiquimod</i>	44	<i>isradipine</i>	37
IMJUDO	23	ISTODAX	18
IMKELDI	20	ISTURISA	53
IMOVAX RABIES (H.D.C.V.)	64	ITOVEBI	18
IMPAVIDO	5	<i>itraconazole</i>	13
IMVEXXY MAINTENANCE PACK	55	<i>ivabradine hydrochloride</i>	38
IMVEXXY STARTER PACK	55	<i>ivermectin</i>	24
<i>incassia</i>	58	<i>ivermectin</i>	44
INCRELEX	53	IVRA	16
<i>indapamide</i>	39	IWILFIN	18
INFANRIX	64	IXCHIQ	64
INFLECTRA	63	IXEMPRA KIT	18
<i>infliximab</i>	63	IXIARO	64

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JAKAFI	20	<i>kemoplat</i>	16
<i>jantoven</i>	33	KEPIVANCE	42
JANUMET	31	KERENDIA	40
JANUMET XR	31	<i>ketoconazole</i>	13
JANUVIA	31	<i>ketorolac tromethamine</i>	1
JARDIANCE	40	<i>ketorolac tromethamine</i>	68
<i>jasmiel</i>	55	KEYTRUDA	23
JAYPIRCA	20	KIMMTRAK	18
JEMPERLI	23	KIMYRSA	5
<i>jencycla</i>	58	KINERET	61
JENTADUETO	31	KINRIX	64
JENTADUETO XR	31	<i>kionex</i>	48
JEVTANA	18	KISQALI	21
<i>jinteli</i>	55	KISQALI FEMARA 200 DOSE	18
<i>jolessa</i>	55	KISQALI FEMARA 400 DOSE	18
<i>joyeaux</i>	55	KISQALI FEMARA 600 DOSE	18
<i>juleber</i>	55	<i>klayesta</i>	13
JULUCA	28	<i>klor-con 10</i>	47
<i>junel 1.5/30</i>	55	<i>klor-con 8</i>	47
<i>junel 1/20</i>	55	<i>klor-con m10</i>	47
<i>junel fe 1.5/30</i>	55	<i>klor-con m15</i>	47
<i>junel fe 1/20</i>	55	<i>klor-con m20</i>	47
<i>junel fe 24</i>	56	KOSELUGO	21
JUXTAPID	39	<i>kourzeq</i>	42
JYLAMVO	63	KRAZATI	21
JYNARQUE	48	KRISTALOSE	49
JYNNEOS	64	KRYSTEXXA	14
KADCYLA	23	<i>kurvelo</i>	56
<i>kaitlib fe</i>	56	KYPROLIS	19
KALBITOR	60	<i>labetalol hydrochloride</i>	36
<i>kalliga</i>	56	<i>lacosamide</i>	10
KALYDECO	70	<i>lactated ringers irrigation</i>	66
KANJINTI	23	<i>lactulose</i>	49
KANUMA	51	LAGEVRIO	30
KAPSPARGO SPRINKLE	36	<i>lamivudine</i>	27
<i>kariva</i>	56	<i>lamivudine</i>	28
<i>kcl 0.075%/d5w/nacl 0.45%</i>	46	<i>lamivudine/zidovudine</i>	28
<i>kcl 0.15%/d5w/nacl 0.2%</i>	46	<i>lamotrigine</i>	8
<i>kcl 0.15%/d5w/nacl 0.225%</i>	46	<i>lamotrigine er</i>	8
<i>kcl 0.15%/d5w/nacl 0.45%</i>	46	<i>lamotrigine starter kit/blue</i>	8
<i>kcl 0.15%/d5w/nacl 0.9%</i>	46	<i>lamotrigine starter kit/green</i>	8
<i>kcl 0.3%/d5w/nacl 0.45%</i>	46	<i>lamotrigine starter kit/orange</i>	8
<i>kcl 0.3%/d5w/nacl 0.9%</i>	46	<i>lamotrigine titration</i>	8
<i>kelnor 1/35</i>	56	LANOXIN PEDIATRIC	35

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<i>lanthanum carbonate</i>	48	<i>levonorgestrel/ethinyl estradiol</i>	56
LANTUS	32	<i>levonorgestrel/ethinyl estradiol/ferrous</i>	56
LANTUS SOLOSTAR	32	<i>bisglycinate</i>	
<i>lapatinib ditosylate</i>	21	<i>levora 0.15/30-28</i>	56
<i>larin 1.5/30</i>	56	<i>levo-t</i>	59
<i>larin 1/20</i>	56	<i>levothyroxine sodium</i>	59
<i>larin 24 fe</i>	56	<i>levoxyl</i>	59
<i>larin fe 1.5/30</i>	56	LEXIVA	29
<i>larin fe 1/20</i>	56	<i>l-glutamine</i>	51
<i>latanoprost</i>	69	LIBERVANT	9
<i>layolis fe</i>	56	LIBTAYO	23
LAZCLUZE	18	<i>lidocaine</i>	3
LEDIPASVIR/SOFOSBUVIR	27	<i>lidocaine hcl</i>	3
<i>leena</i>	56	<i>lidocaine hcl</i>	36
<i>leflunomide</i>	63	<i>lidocaine hcl</i>	42
LEMTRADA	62	<i>lidocaine hcl in d5w</i>	35
<i>lenalidomide</i>	16	<i>lidocaine hcl jelly</i>	3
LENVIMA 10 MG DAILY DOSE	21	<i>lidocaine hcl/dextrose</i>	36
LENVIMA 12MG DAILY DOSE	21	<i>lidocaine hydrochloride</i>	3
LENVIMA 14 MG DAILY DOSE	21	<i>lidocaine hydrochloride viscous</i>	42
LENVIMA 18 MG DAILY DOSE	21	<i>lidocaine viscous</i>	42
LENVIMA 20 MG DAILY DOSE	21	<i>lidocaine/prilocaine</i>	3
LENVIMA 24 MG DAILY DOSE	21	LILETTA	58
LENVIMA 4 MG DAILY DOSE	21	<i>lincomycin hydrochloride</i>	5
LENVIMA 8 MG DAILY DOSE	21	<i>linezolid</i>	5
<i>lessina</i>	56	LINZESS	49
<i>letrozole</i>	19	LIORESAL INTRATHECAL	27
<i>leucovorin calcium</i>	18	LIOTHYRONINE SODIUM	59
LEUKERAN	16	<i>lisinopril</i>	35
LEUPROLIDE ACETATE	59	<i>lisinopril/hydrochlorothiazide</i>	38
<i>levalbuterol hcl</i>	70	<i>lithium</i>	31
<i>levalbuterol hydrochloride</i>	70	<i>lithium carbonate</i>	31
<i>levalbuterol tartrate hfa</i>	70	<i>lithium carbonate er</i>	31
LEVETIRACETAM	8	LITHOSTAT	52
<i>levetiracetam er</i>	8	LIVTENCITY	27
<i>levetiracetam/sodium chloride</i>	8	LO LOESTRIN FE	56
<i>levobunolol hcl</i>	69	<i>lofexidine hydrochloride</i>	4
<i>levocarnitine</i>	66	<i>lojaimiess</i>	56
<i>levocetirizine dihydrochloride</i>	70	LOKELMA	48
LEVOFLOXACIN	7	LONSURF	18
<i>levofloxacin</i>	68	<i>loperamide hydrochloride</i>	49
<i>levofloxacin in d5w</i>	7	<i>lopinavir/ritonavir</i>	29
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<i>loryna</i>	56	<i>meclofenamate sodium</i>	1
<i>losartan potassium</i>	35	<i>medroxyprogesterone acetate</i>	58
<i>losartan potassium/hydrochlorothiazide</i>	38	<i>mefenamic acid</i>	1
<i>loteprednol etabonate</i>	68	<i>mefloquine hydrochloride</i>	24
<i>lovastatin</i>	39	<i>megestrol acetate</i>	58
<i>low-ogestrel</i>	56	MEKINIST	21
<i>loxapine</i>	25	MEKTOVI	21
<i>lo-zumandimine</i>	56	<i>meloxicam</i>	1
LUBIPROSTONE	49	<i>melphalan hydrochloride</i>	16
LUCEMYRA	4	<i>memantine hcl titration pak</i>	11
LUMAKRAS	21	<i>memantine hydrochloride</i>	11
LUMIGAN	69	<i>memantine hydrochloride er</i>	11
LUMIZYME	51	<i>memantine/donepezil hydrochloride er</i>	10
LUNSUMIO	23	MENACTRA	64
LUPKYNIS	63	MENQUADFI	64
LUPRON DEPOT (1-MONTH)	59	MENVEO	64
LUPRON DEPOT (3-MONTH)	59	<i>meprobamate</i>	30
LUPRON DEPOT (4-MONTH)	59	<i>mercaptopurine</i>	17
LUPRON DEPOT (6-MONTH)	59	<i>meropenem</i>	7
LUPRON DEPOT-PED (1-MONTH)	60	MEROPENEM/SODIUM CHLORIDE	7
LUPRON DEPOT-PED (3-MONTH)	60	<i>merzee</i>	56
LUPRON DEPOT-PED (6-MONTH)	53	<i>mesalamine</i>	65
<i>lurasidone hydrochloride</i>	26	<i>mesalamine dr</i>	65
<i>lutra</i>	56	<i>mesalamine er</i>	65
LYBALVI	26	<i>mesna</i>	24
<i>lyleq</i>	58	MESNEX	24
<i>lyllana</i>	56	<i>metformin hydrochloride</i>	31
LYNPARZA	21	<i>metformin hydrochloride er</i>	31
LYSODREN	18	<i>methadone hcl</i>	1
LYTGOBI	21	<i>methadone hydrochloride</i>	1
<i>lyza</i>	58	<i>methadone hydrochloride intensol</i>	1
MAGNESIUM SULFATE	47	<i>methadose</i>	1
<i>magnesium sulfate in d5w</i>	47	<i>methadose sugar-free</i>	1
<i>magnesium sulfate/dextrose</i>	47	<i>methazolamide</i>	69
<i>malathion</i>	44	<i>methenamine hippurate</i>	5
<i>maraviroc</i>	29	<i>methergine</i>	66
MARGENZA	23	<i>methimazole</i>	60
<i>marlissa</i>	56	<i>methocarbamol</i>	72
MARPLAN	11	<i>methotrexate</i>	63
MATULANE	16	<i>methotrexate sodium</i>	63
MAVENCLAD	42	<i>methoxsalen</i>	44
MAVYRET	27	<i>methscopolamine bromide</i>	49
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<i>methylphenidate hydrochloride cd</i>	41	<i>mirtazapine odt</i>	11
<i>methylphenidate hydrochloride er</i>	41	<i>misoprostol</i>	50
<i>methylprednisolone</i>	53	<i>mitomycin</i>	18
<i>methylprednisolone acetate</i>	53	<i>mitoxantrone hcl</i>	42
<i>methylprednisolone dose pack</i>	53	M-M-R II	64
<i>methylprednisolone sodium succinate</i>	53	MODAFINIL	72
<i>methylprednisolone sodiumsuccinate</i>	53	<i>moexipril hydrochloride</i>	35
<i>metoclopramide hcl</i>	49	MOLINDONE HYDROCHLORIDE	25
<i>metoclopramide hydrochloride</i>	49	<i>mometasone furoate</i>	44
<i>metoclopramide odt</i>	49	<i>mondoxylene nl</i>	8
<i>metolazone</i>	39	MONJUVI	23
<i>metoprolol succinate er</i>	36	<i>mono-lynyah</i>	56
<i>metoprolol tartrate</i>	36	<i>montelukast sodium</i>	70
<i>metoprolol/hydrochlorothiazide</i>	38	<i>morphine sulfate</i>	3
<i>metronidazole</i>	5	<i>morphine sulfate er</i>	1
<i>metronidazole</i>	43	MOUNJARO	31
<i>metronidazole vaginal</i>	5	MOVANTIK	49
<i>metyrosine</i>	38	<i>moxifloxacin hydrochloride/sodium</i>	7
<i>mexiletine hydrochloride</i>	36	<i>hydrochloride</i>	
MIACALCIN	66	<i>moxifloxacin hydrochloride</i>	7
<i>mibelas 24 fe</i>	56	<i>moxifloxacin hydrochloride</i>	68
<i>micafungin</i>	13	MOZOBIL	34
<i>miconazole 3</i>	13	MRESVIA	64
MICRHOGAM ULTRA-FILTERED PLUS	61	MULPLETA	34
<i>microgestin 1.5/30</i>	56	MULTAQ	36
<i>microgestin 1/20</i>	56	<i>multiple electrolytes injection type 1</i>	47
<i>microgestin 24 fe</i>	56	<i>mupirocin</i>	45
<i>microgestin fe 1.5/30</i>	56	<i>mutamycin</i>	19
<i>microgestin fe 1/20</i>	56	MVASI	23
<i>midazolam hcl</i>	30	MYCOPHENOLATE MOFETIL	63
<i>midazolam hydrochloride</i>	31	<i>mycophenolic acid dr</i>	63
<i>midodrine hydrochloride</i>	35	MYLOTARG	23
<i>mifepristone</i>	60	MYOBLOC	27
MIGERGOT	14	MYRBETRIQ	52
<i>miglitol</i>	31	NABI-HB	61
<i>miglustat</i>	51	<i>nabumetone</i>	1
<i>mili</i>	56	<i>nadolol</i>	36
<i>milrinone lactate in dextrose</i>	38	NAFCILLIN	6
<i>mimvey</i>	56	<i>nafcillin sodium</i>	6
MINOCIN	8	<i>naftifine hcl</i>	14
<i>minocycline hcl</i>	8	<i>naftifine hydrochloride</i>	14
<i>minocycline hydrochloride</i>	8	NAGLAZYME	51
<i>minoxidil</i>	40	<i>nalbuphine hydrochloride</i>	3

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<i>naloxone hydrochloride</i>	4	<i>nikki</i>	56
<i>naltrexone hydrochloride</i>	3	<i>nilutamide</i>	16
NAMZARIC	10	<i>nimodipine</i>	37
<i>naproxen</i>	1	NINLARO	21
<i>naproxen sodium</i>	1	<i>nitazoxanide</i>	24
NATACYN	68	<i>nitisinone</i>	51
NATAZIA	56	NITRO-BID	40
<i>nateglinide</i>	31	<i>nitrofurantoin macrocrystals</i>	5
NAYZILAM	9	<i>nitrofurantoin monohydrate</i>	5
<i>nebivolol hydrochloride</i>	36	<i>nitrofurantoin monohydrate/macrocrystals</i>	5
<i>necon 0.5/35-28</i>	56	<i>nitroglycerin</i>	40
<i>nefazodone hydrochloride</i>	11	NITROGLYCERIN	49
<i>nelarabine</i>	17	<i>nitroglycerin in dextrose 5%</i>	40
<i>neomycin sulfate</i>	4	<i>nitroglycerin transdermal</i>	40
<i>neomycin/bacitracin/polymyxin</i>	67	NIVA THYROID	59
<i>neomycin/polymyxin b sulfates</i>	4	NIVESTYM	34
<i>neomycin/polymyxin/bacitracin/hydrocortisone</i>	67	<i>nizatidine</i>	50
<i>neomycin/polymyxin/dexamethasone</i>	67	<i>nora-be</i>	58
<i>neomycin/polymyxin/gramicidin</i>	67	NORDITROPIN FLEXPRO	53
<i>neomycin/polymyxin/hc</i>	69	<i>norelgestromin/ethinyl estradiol</i>	56
<i>neomycin/polymyxin/hydrocortisone</i>	67	<i>norepinephrine bitartrate</i>	38
<i>neomycin/polymyxin/hydrocortisone</i>	69	<i>norethindrone</i>	58
<i>neo-polycin</i>	67	<i>norethindrone &amp; ethinyl estradiol ferrous fumarate</i>	57
<i>neo-polycin hc</i>	67	<i>norethindrone acetate</i>	58
NERLYNX	21	<i>norethindrone acetate/ethinyl estradiol</i>	57
NESINA	31	<i>norethindrone acetate/ethinyl estradiol/ferrous fumarate</i>	57
NEULASTA	34	<i>norethindrone/ethinyl estradiol/ferrous fumarate</i>	57
NEULASTA ONPRO KIT	34	<i>norgestimate/ethinyl estradiol</i>	57
NEUPOGEN	34	<i>norlyroc</i>	58
<i>nevirapine</i>	28	NORMOSOL-M/D5W	47
<i>nevirapine er</i>	28	NORMOSOL-R	47
NEXPLANON	58	<i>nortrel 0.5/35 (28)</i>	57
NEXTERONE	36	<i>nortrel 1/35</i>	57
NEXTSTELLIS	56	<i>nortrel 7/7/7</i>	57
<i>niacin</i>	39	<i>nortriptyline hcl</i>	12
<i>niacin er</i>	39	<i>nortriptyline hydrochloride</i>	12
<i>niacor</i>	39	NORVIR	29
<i>nicardipine hcl</i>	37	NOVAREL	53
NICARDIPINE HYDROCHLORIDE	37	NOVOLOG	32
NICARDIPINE HYDROCHLORIDE/SODIUM CHLORIDE	37	NOVOLOG FLEXPEN	32
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NOVOLOG MIX 70/30 PREFILLED	33	<i>olanzapine odt</i>	26
FLEXPEN RELION		<i>olanzapine/fluoxetine</i>	11
NOVOLOG MIX 70/30 RELION	33	<i>olmesartan medoxomil</i>	35
NOVOLOG PENFILL	33	<i>olmesartan medoxomil/hydrochlorothiazide</i>	38
NOVOLOG RELION	33	<i>olopatadine hydrochloride</i>	68
NOXAFIL	14	<i>omega-3-acid ethyl esters</i>	40
<i>np thyroid 120</i>	59	<i>omeprazole</i>	50
<i>np thyroid 15</i>	59	<i>omeprazole dr</i>	50
<i>np thyroid 30</i>	59	OMNIPOD 5 DEXCOM G7G6 INTRO KIT	67
<i>np thyroid 60</i>	59	(GEN 5)	
<i>np thyroid 90</i>	59	OMNIPOD 5 DEXCOM G7G6 PODS	67
NPLATE	34	(GEN 5)	
NUBEQA	16	OMNIPOD 5 G7 INTRO KIT (GEN 5)	67
NUCALA VIAL; PREFILLED SYRINGE	72	OMNIPOD 5 G7 PODS (GEN 5)	67
NUEDEXTA	41	OMNIPOD 5 LIBRE2 PLUS G6	67
NULOJIX	63	OMNIPOD 5 LIBRE2 PLUS G6 PODS	67
NUPLAZID	26	OMNIPOD CLASSIC PDM STARTER	67
NURTEC	14	KIT (GEN 3)	
NUTRILIPID	67	OMNIPOD CLASSIC PODS (GEN 3)	67
NUVESSA	5	OMNIPOD DASH INTRO KIT (GEN 4)	67
NUZYRA	8	OMNIPOD DASH PDM KIT (GEN 4)	67
<i>nyamyc</i>	14	OMNIPOD DASH PODS (GEN 4)	67
<i>nylia 1/35</i>	57	OMNITROPE	53
<i>nylia 7/7/7</i>	57	ONCASPAR	19
<i>nymyo</i>	57	<i>ondansetron hcl</i>	13
<i>nystatin</i>	14	<i>ondansetron hydrochloride</i>	13
<i>nystatin/triamcinolone</i>	44	<i>ondansetron odt</i>	13
<i>nystatin/triamcinolone acetate</i>	44	ONGENTYS	25
<i>nystop</i>	14	ONTRUZANT	23
NYVEPRIA	34	ONUREG	19
OALIVA	49	OPDIVO	23
<i>ocella</i>	57	OPDIVO QVANTIG	16
OCTAGAM	61	OPDUALAG	19
<i>octreotide acetate</i>	60	OPSUMIT	71
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ODOMZO	21	<i>oralone dental paste</i>	42
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<i>ofloxacin</i>	7	ORBACTIV	5
<i>ofloxacin</i>	68	ORENCIA	62
<i>ofloxacin</i>	69	ORENCIA	63
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ORENITRAM TITRATION KIT MONTH 2	71	<i>paroxetine hcl er</i>	12
ORENITRAM TITRATION KIT MONTH 3	71	<i>paroxetine hydrochloride</i>	12
		<i>paroxetine hydrochloride er</i>	12
ORFADIN	51	PAXLOVID	30
ORGOVYX	60	<i>pazopanib hydrochloride</i>	21
ORKAMBI	70	PEDIARIX	64
ORLADEYO	60	PEDVAX HIB	64
ORSERDU	16	<i>peg-3350/electrolytes</i>	49
<i>oseltamivir phosphate</i>	29	<i>peg-3350/electrolytes/ascorbate</i>	49
OSENI	31	<i>peg-3350/nacl/na bicarbonate/kcl</i>	50
OSPHENA	59	PEGASYS	62
OTEZLA	44	PEGASYS	63
OTEZLA	62	PEMAZYRE	21
OTULFI	62	PEMETREXED	17
<i>oxacillin sodium</i>	6	PEMETREXED	19
<i>oxaliplatin</i>	16	<i>pemetrexed disodium</i>	17
<i>oxaprozin</i>	1	PEMFEXY	17
<i>oxazepam</i>	31	PEMRYDI RTU	17
<i>oxcarbazepine</i>	10	PENBRAYA	64
OXERVATE	67	<i>penicillamine</i>	48
<i>oxybutynin chloride</i>	52	<i>penicillin g potassium</i>	6
<i>oxybutynin chloride er</i>	52	<i>penicillin g potassium in iso-osmotic dextrose</i>	6
<i>oxycodone hcl</i>	3	PENTACEL	64
<i>oxycodone hydrochloride</i>	3	<i>pentamidine isethionate</i>	24
OXYCODONE HYDROCHLORIDE ER	2	<i>pentobarbital sodium</i>	72
<i>oxycodone/acetaminophen</i>	3	<i>pentoxifylline er</i>	38
OXYCONTIN	2	<i>perindopril erbumine</i>	35
<i>oxymorphone hydrochloride</i>	3	<i>perio gard</i>	42
<i>oxymorphone hydrochloride er</i>	2	PERJETA	23
<i>oxymorphone hydrochloride er</i>	2	<i>permethrin</i>	44
OZEMPIC	31	<i>perphenazine</i>	25
<i>paclitaxel</i>	19	<i>perphenazine/amitriptyline</i>	11
<i>paclitaxel protein-bound particles</i>	19	PERSERIS	26
PADCEV	23	<i>phenelzine sulfate</i>	11
<i>paliperidone er</i>	26	<i>phenobarbital</i>	9
<i>palonosetron hydrochloride</i>	13	<i>phenobarbital sodium</i>	9
<i>pamidronate disodium</i>	66	<i>phenoxybenzamine hydrochloride</i>	35
PANCREAZE	51	<i>phentolamine mesylate</i>	35
PANRETIN	24	<i>phenylephrine hydrochloride</i>	67
<i>pantoprazole sodium</i>	50	<i>phenytek</i>	10
<i>paraplatin</i>	16	<i>phenytoin</i>	10
PARICALCITOL	66	<i>phenytoin infatabs</i>	10

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Drug Name	Page #	Drug Name	Page #
<i>phenytoin sodium</i>	10	PRALATREXATE	17
<i>phenytoin sodium extended</i>	10	PRALUENT	40
PHESGO	19	<i>pramipexole dihydrochloride</i>	25
PHEXXI	52	<i>prasugrel hydrochloride</i>	35
<i>philith</i>	57	<i>pravastatin sodium</i>	39
PIFELTRO	28	<i>praziquantel</i>	24
<i>pilocarpine hcl</i>	69	<i>prazosin hydrochloride</i>	35
<i>pilocarpine hydrochloride</i>	42	<i>prednisolone</i>	53
<i>pimecrolimus</i>	44	<i>prednisolone acetate</i>	68
<i>pimozide</i>	25	<i>prednisolone sodium phosphate</i>	53
<i>pimtree</i>	57	<i>prednisolone sodium phosphate</i>	68
<i>pindolol</i>	36	<i>prednisolone sodium phosphate odt</i>	53
<i>pioglitazone hcl</i>	31	<i>prednisone</i>	53
<i>pioglitazone hcl/metformin hcl</i>	31	<i>pregabalin</i>	9
<i>pioglitazone hcl-glimepiride</i>	31	PREGNYL	53
<i>pioglitazone hydrochloride</i>	32	<i>pregnyl w/diluent benzyl alcohol/nacl</i>	53
<i>piperacillin sodium/tazobactam sodium</i>	7	PREHEVBRIO	64
PIQRAY 200MG DAILY DOSE	21	PREMARIN	57
PIQRAY 250MG DAILY DOSE	21	PREMASOL	47
PIQRAY 300MG DAILY DOSE	21	PREMPRO	57
<i>pirfenidone</i>	71	<i>prenatal</i>	49
<i>piroxicam</i>	1	<i>prenatal 19</i>	49
PLEGRIDY	42	PRETOMANID	15
PLEGRIDY STARTER PACK	42	<i>prevalite</i>	40
PLENAMINE	47	PREVYMIS	27
PLERIXAFOR	34	PREZCOBIX	29
<i>podofilox</i>	44	PREZISTA	29
POLIVY	23	PRIFTIN	15
<i>polycin</i>	68	PRIMAQUINE PHOSPHATE	24
<i>polymyxin b sulfate</i>	5	<i>primidone</i>	9
<i>polymyxin b sulfate/trimethoprim sulfate</i>	68	PRIORIX	64
POMALYST	16	PRIVIGEN	61
<i>portia-28</i>	57	PROAIR DIGIHALER	70
PORTRAZZA	23	PROAIR RESPICLICK	70
<i>posaconazole</i>	14	<i>probenecid</i>	14
<i>posaconazole dr</i>	14	<i>probenecid/colchicine</i>	14
<i>potassium chloride</i>	47	<i>procainamide hydrochloride</i>	36
<i>potassium chloride er</i>	47	<i>prochlorperazine</i>	12
<i>potassium chloride/dextrose</i>	47	<i>prochlorperazine edisylate</i>	12
<i>potassium chloride/dextrose/lactated</i>	47	<i>prochlorperazine maleate</i>	12
<i>ringers</i>		PROCRIT	34
<i>potassium chloride/dextrose/sodium</i>	47	<i>procto-med hc</i>	65
<i>chloride</i>		<i>proctosol hc</i>	65
<i>potassium chloride/sodium chloride</i>	47	<i>proctozone-hc</i>	65
<i>potassium citrate er</i>	47	PROCYSBI	51

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<i>progesterone</i>	58	<i>raloxifene hydrochloride</i>	59
PROGRAF	63	<i>ramelteon</i>	72
PROLASTIN-C	51	<i>ramipril</i>	35
PROLEUKIN	19	<i>ranolazine er</i>	38
PROLIA	66	<i>rasagiline mesylate</i>	25
PROMACTA	34	RAVICTI	51
<i>promethazine hcl</i>	13	REBIF	42
<i>promethazine hydrochloride</i>	13	REBIF REBIDOSE	42
<i>promethegan</i>	13	REBIF REBIDOSE TITRATION PACK	42
<i>propafenone hcl</i>	36	REBIF TITRATION PACK	42
<i>propafenone hydrochloride</i>	36	REBLOZYL	34
<i>propafenone hydrochloride er</i>	36	<i>reclipsen</i>	57
<i>proparacaine hcl</i>	68	RECOMBIVAX HB	64
<i>propranolol hcl</i>	36	RECTIV	50
<i>propranolol hydrochloride</i>	37	REGONOL	15
<i>propranolol hydrochloride er</i>	37	REGRANEX	44
<i>propylthiouracil</i>	60	RELENZA DISKHALER	30
PROQUAD	64	RELISTOR	49
PROSOL	47	REMICADE	63
PROTOPAM CHLORIDE	67	REMODULIN	71
<i>protriptyline hcl</i>	12	RENACIDIN	52
PULMOZYME	70	RENFLEXIS	63
PURIXAN	17	<i>repaglinide</i>	32
<i>pyrazinamide</i>	15	REPATHA	40
<i>pyridostigmine bromide</i>	15	REPATHA PUSHTRONEX SYSTEM	40
<i>pyridostigmine bromide er</i>	15	REPATHA SURECLICK	40
<i>pyrimethamine</i>	24	RESTASIS	68
PYZCHIVA	62	RESTASIS MULTIDOSE	68
QINLOCK	21	RETACRIT	34
QUADRACEL	64	RETEVMO	21
<i>quetiapine fumarate</i>	11	RETROVIR IV INFUSION	29
<i>quetiapine fumarate</i>	26	REVUFORJ	19
<i>quetiapine fumarate er</i>	26	REXULTI	26
<i>quinapril hydrochloride</i>	35	REYATAZ	29
QUINAPRIL/HYDROCHLOROTHIAZID	38	REYVOW	14
E		REZLIDHIA	21
<i>quinidine gluconate cr</i>	36	REZUROCK	63
<i>quinidine gluconate er</i>	36	RHOGAM ULTRA-FILTERED PLUS	61
<i>quinidine sulfate</i>	36	RHOPHYLAC	61
<i>quinine sulfate</i>	24	RHOPRESSA	69
QVAR REDIHALER	69	RIABNI	23
RABAVERT	64	<i>ribavirin</i>	27
<i>rabeprazole sodium</i>	50	<i>ribavirin</i>	72
RAGWITEK	62	RIDAURA	62
RALDESY	12	<i>rifabutin</i>	15

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<i>rifampin</i>	15	<i>salsalate</i>	1
<i>riluzole</i>	41	SANCUSO	13
<i>rimantadine hydrochloride</i>	30	SANDOSTATIN LAR DEPOT	60
RIMSO-50	52	SANTYL	44
<i>ringers injection</i>	47	<i>sapropterin dihydrochloride</i>	51
<i>ringers irrigation</i>	67	SARCLISA	23
RINVOQ	62	SAVELLA	41
RINVOQ LQ	62	SAVELLA TITRATION PACK	41
<i>risedronate sodium</i>	66	SCEMBLIX	21
<i>risedronate sodium dr</i>	66	<i>scopolamine</i>	13
RISPERDAL CONSTA	26	SECUADO	26
<i>risperidone</i>	26	SELARSDI	62
<i>risperidone er</i>	26	<i>selegiline hcl</i>	25
<i>risperidone odt</i>	26	<i>selenium sulfide</i>	44
<i>ritonavir</i>	29	SELZENTRY	29
RITUXAN	23	SEREVENT DISKUS	70
RITUXAN HYCELA	23	SEROSTIM	53
<i>rivastigmine tartrate</i>	11	<i>sertraline hcl</i>	12
<i>rivastigmine transdermal system</i>	11	<i>sertraline hydrochloride</i>	12
<i>rivelsa</i>	57	<i>setlakin</i>	57
<i>rizatriptan benzoate</i>	14	<i>sevelamer carbonate</i>	48
<i>rizatriptan benzoate odt</i>	14	<i>sevelamer hydrochloride</i>	48
ROCKLATAN	68	<i>sharobel</i>	58
<i>roflumilast</i>	71	SHINGRIX	65
ROMIDEPSIN	19	SIGNIFOR	60
ROMVIMZA	21	SIGNIFOR LAR	60
<i>ropinirole er</i>	25	<i>sildenafil</i>	71
<i>ropinirole hcl</i>	25	SILDENAFIL CITRATE	71
<i>ropinirole hydrochloride</i>	25	<i>silodosin</i>	52
<i>rosuvastatin calcium</i>	39	<i>silver sulfadiazine</i>	44
ROTARIX	64	SIMBRINZA	68
ROTATEQ	64	<i>simliya</i>	57
<i>roweepra</i>	9	<i>simpesse</i>	57
ROZLYTREK	21	SIMULECT	62
RUBRACA	21	<i>simvastatin</i>	39
RUCONEST	60	<i>sirolimus</i>	63
<i>rufinamide</i>	10	SIRTURO	15
RUKOBIA	29	SIVEXTRO	5
RUXIENCE	23	SKYRIZI	62
RYBELSUS	32	SKYRIZI PEN	62
RYBREVANT	23	SLYND	59
RYDAPT	21	<i>sodium chloride</i>	47
RYLAZE	19	<i>sodium chloride 0.45%</i>	47
RYTARY	25	<i>sodium chloride 0.9%</i>	67
<i>sajazir</i>	60	<i>sodium fluoride</i>	47

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SODIUM OXYBATE	72	<i>subvenite starter kit/blue</i>	9
<i>sodium phenylacetate/sodium benzoate</i>	67	<i>subvenite starter kit/green</i>	9
<i>sodium phenylbutyrate</i>	51	<i>subvenite starter kit/orange</i>	9
<i>sodium polystyrene sulfonate</i>	48	SUCRAID	51
<i>sodium sulfacetamide</i>	7	<i>sucralfate</i>	50
SODIUM SULFATE/POTASSIUM	50	<i>sulfacetamide sodium</i>	7
SULFATE/MAGNESIUM SULFATE		<i>sulfacetamide sodium</i>	68
SOFOSBUVIR/VELPATASVIR	27	<i>sulfacetamide sodium/prednisolone sodium</i>	68
<i>solifenacin succinate</i>	52	<i>phosphate</i>	
SOLIRIS	62	<i>sulfadiazine</i>	7
SOLTAMOX	16	<i>sulfamethoxazole/trimethoprim</i>	7
SOMATULINE DEPOT	60	<i>sulfamethoxazole/trimethoprim ds</i>	8
SOMAVERT	60	SULFAMYLON	45
<i>sorafenib</i>	21	<i>sulfasalazine</i>	65
<i>sorafenib tosylate</i>	21	<i>sulindac</i>	1
<i>sorine</i>	36	<i>sumatriptan</i>	15
<i>sotalol hcl</i>	36	<i>sumatriptan succinate</i>	14
<i>sotalol hcl (af)</i>	36	SUMATRIPTAN SUCCINATE REFILL	14
<i>sotalol hcl af</i>	36	<i>sunitinib malate</i>	21
<i>sotalol hydrochloride</i>	36	SUNLENCA	29
<i>sotalol hydrochloride (af)</i>	36	SUNOSI	72
SOTYLIZE	36	SURE COMFORT INSULIN SYRINGE/U-	67
SOVALDI	27	100/0.5ML/29G X 1/2"	
SPIRIVA RESPIMAT	70	<i>syeda</i>	57
<i>spironolactone</i>	40	SYLVANT	62
<i>spironolactone/hydrochlorothiazide</i>	38	SYMDEKO	70
SPRAVATO 56MG DOSE	11	SYMLINPEN 120	32
SPRAVATO 84MG DOSE	11	SYMLINPEN 60	32
<i>sprintec 28</i>	57	SYMPAZAN	9
SPRITAM	9	SYMPROIC	49
SPRYCEL	21	SYMTUZA	29
<i>sps</i>	48	SYNAGIS	61
<i>sronyx</i>	57	SYNAREL	60
<i>ssd</i>	44	SYNJARDY	32
STAMARIL	65	SYNJARDY XR	32
STELARA	62	SYNTHROID	59
STEQEYMA	62	TABLOID	17
<i>sterile water for irrigation</i>	67	TABRECTA	22
STIMUFEND	34	<i>tacrolimus</i>	44
STIOLTO RESPIMAT	72	<i>tacrolimus</i>	63
STIVARGA	21	<i>tadalafil</i>	52
STRENSIQ	51	<i>tadalafil</i>	71
STREPTOMYCIN SULFATE	4	TAFINLAR	22
STRIBILD	28	<i>tafluprost</i>	69
<i>subvenite</i>	9	TAGRISSO	22

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TAKHZYRO	60	TEZSPIRE	72
TALTZ	62	THALOMID	16
TALVEY	19	<i>theophylline</i>	71
TALZENNA	22	<i>theophylline er</i>	71
<i>tamoxifen citrate</i>	17	THIOLA EC	52
<i>tamsulosin hydrochloride</i>	52	<i>thioridazine hydrochloride</i>	25
<i>tarina 24 fe</i>	57	<i>thiotepa</i>	16
<i>tarina fe 1/20 eq</i>	57	<i>thiothixene</i>	25
TASIGNA	22	THYMOGLOBULIN	61
<i>tasimelton</i>	72	THYROID	59
TAVNEOS	62	<i>tiadylt er</i>	37
<i>taysofy</i>	57	<i>tiagabine hydrochloride</i>	9
<i>tazarotene</i>	43	TIBSOVO	22
<i>tazicef</i>	6	TICE BCG	19
<i>taztia xt</i>	37	TICOVAC	65
TAZVERIK	22	<i>tigecycline</i>	5
TDVAX	65	<i>tilia fe</i>	57
TECENTRIQ	23	<i>timolol maleate</i>	14
TECENTRIQ HYBREZA	23	<i>timolol maleate</i>	69
TECVAYLI	19	<i>timolol maleate ophthalmic gel forming</i>	69
TEFLARO	6	<i>tinidazole</i>	5
<i>telmisartan</i>	35	<i>tiopronin</i>	52
<i>telmisartan/hydrochlorothiazide</i>	38	<i>tiopronin dr</i>	52
<i>temazepam</i>	72	<i>tiotropium bromide</i>	70
TEMODAR	16	<i>tis-u-sol</i>	67
<i>temsirolimus</i>	22	TIVDAK	23
TENIVAC	65	TIVICAY	28
<i>tenofovir disoproxil fumarate</i>	29	TIVICAY PD	28
TEPMETKO	22	<i>tizanidine hcl</i>	27
<i>terazosin hcl</i>	52	<i>tizanidine hydrochloride</i>	27
<i>terazosin hydrochloride</i>	52	TOBI PODHALER	71
<i>terbinafine hcl</i>	14	<i>tobramycin</i>	68
<i>terbutaline sulfate</i>	70	<i>tobramycin</i>	71
<i>terconazole</i>	14	<i>tobramycin sulfate</i>	4
<i>teriflunomide</i>	42	<i>tobramycin/dexamethasone</i>	68
TERIPARATIDE	66	TODAYS HEALTH ORIGINAL PEN	67
<i>testosterone</i>	54	NEEDLES 29G X 1/2"	
<i>testosterone cypionate</i>	53	<i>tolcapone</i>	25
<i>testosterone enanthate</i>	53	<i>tolterodine tartrate</i>	52
<i>testosterone pump</i>	53	<i>tolterodine tartrate er</i>	52
TETANUS/DIPHTHERIA TOXOIDS- ADSORBED ADULT	65	TOLVAPTAN	48
<i>tetrabenazine</i>	41	TOPIRAMATE	9
<i>tetracycline hydrochloride</i>	8	<i>topiramate er</i>	9
TEVIMBRA	23	<i>topotecan hcl</i>	19
		<i>topotecan hydrochloride</i>	19

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<i>toremifene citrate</i>	17	<i>tri-lo-marzia</i>	57
TORISEL	22	<i>tri-lo-mili</i>	57
<i>torpenz</i>	22	<i>tri-lo-sprintec</i>	57
<i>torse mide</i>	39	<i>trimethoprim</i>	5
TOUJEO MAX SOLOSTAR	33	<i>tri-mili</i>	57
TOUJEO SOLOSTAR	33	<i>trimipramine maleate</i>	12
TRADJENTA	32	TRINTELLIX	12
<i>tramadol hcl er</i>	2	<i>tri-nymyo</i>	57
<i>tramadol hydrochloride</i>	3	TRISENOX	19
<i>tramadol hydrochloride er</i>	2	<i>tri-sprintec</i>	57
<i>tramadol hydrochloride/acetaminophen</i>	3	TRIUMEQ	29
<i>trandolapril</i>	35	TRIUMEQ PD	29
<i>trandolapril/verapamil hcl er</i>	39	<i>trivora-28</i>	57
<i>tranexamic acid</i>	34	<i>tri-vylibra</i>	57
<i>tranylcypromine sulfate</i>	11	<i>tri-vylibra lo</i>	57
TRAVASOL	48	TRIZIVIR	29
<i>travoprost</i>	69	TRODELVY	23
TRAZIMERA	23	TROGARZO	29
<i>trazodone hydrochloride</i>	12	TROPHAMINE	48
TREANDA	16	<i>trospium chloride</i>	52
TRECTOR	15	TRULICITY	32
TRELEGY ELLIPTA	72	TRUMENBA	65
TRELSTAR MIXJECT	60	TRUQAP	22
<i>treprostinil</i>	71	TRUXIMA	23
TRESIBA	33	TUDORZA PRESSAIR	70
TRESIBA FLEXTOUCH	33	TUKYSA	22
<i>tretinoin</i>	24	TURALIO	22
<i>tretinoin</i>	43	<i>turqoz</i>	57
<i>triamcinolone acetonide</i>	44	TWINRIX	65
<i>triamcinolone acetonide dental paste</i>	42	TWIRLA	58
<i>triamterene</i>	39	TYBLUME	58
<i>triamterene/hydrochlorothiazide</i>	39	TYBOST	29
<i>triazolam</i>	72	<i>tydemy</i>	58
<i>triderm</i>	44	TYENNE	62
<i>trientine hydrochloride</i>	48	TYPHIM VI	65
<i>tri-estarylla</i>	57	TYSABRI	42
<i>trifluoperazine hcl</i>	25	TYVASO	71
<i>trifluoperazine hydrochloride</i>	25	TYVASO DPI INSTITUTIONAL KIT	71
<i>trifluridine</i>	68	TYVASO DPI MAINTENANCE KIT	71
<i>trihexyphenidyl hydrochloride</i>	24	TYVASO DPI TITRATION KIT	71
TRIJARDY XR	32	TYVASO REFILL KIT	71
TRIKAFTA	71	TYVASO STARTER KIT	71
<i>tri-legest fe</i>	57	UDENYCA	34
<i>tri-linyah</i>	57	UDENYCA ONBODY	34
<i>tri-lo-estarylla</i>	57	ULTOMIRIS	62

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<i>unithroid</i>	59	<i>venlafaxine hydrochloride er</i>	12
UPTRAVI	71	VENTAVIS	71
UPTRAVI TITRATION PACK	71	<i>ventolin hfa</i>	70
<i>ursodiol</i>	50	<i>venxxiva</i>	52
VABYSMO	68	VEOZAH	41
<i>valacyclovir hydrochloride</i>	30	<i>verapamil hcl</i>	37
VALCHLOR	16	<i>verapamil hcl er</i>	37
<i>valganciclovir</i>	27	<i>verapamil hcl sr</i>	37
<i>valganciclovir hydrochloride</i>	27	<i>verapamil hydrochloride</i>	38
<i>valproate sodium</i>	9	<i>verapamil hydrochloride er</i>	37
<i>valproic acid</i>	9	VERQUVO	40
<i>valrubicin</i>	19	VERSACLOZ	26
<i>valsartan</i>	35	VERZENIO	22
<i>valsartan/hydrochlorothiazide</i>	39	<i>vestura</i>	58
VALSTAR	19	VIBERZI	49
VALTOCO 10 MG DOSE	9	VIBRAMYCIN	8
VALTOCO 15 MG DOSE	9	<i>vienna</i>	58
VALTOCO 20 MG DOSE	9	<i>vigabatrin</i>	9
VALTOCO 5 MG DOSE	9	<i>vigadrone</i>	9
<i>valtya 1/50</i>	58	VIGAFYDE	10
<i>vancomycin</i>	5	<i>vigpoder</i>	10
<i>vancomycin hcl</i>	5	<i>vilazodone hydrochloride</i>	12
<i>vancomycin hydrochloride</i>	5	VIMIZIM	51
<i>vancomycin hydrochloride/dextrose</i>	5	VIMKUNYA	65
VANFLYTA	22	VIMPAT	10
VAQTA	65	<i>vinblastine sulfate</i>	19
<i>varenicline starting month</i>	4	<i>vincristine sulfate</i>	19
<i>varenicline tartrate</i>	4	<i>vinorelbine tartrate</i>	19
VARIVAX	65	<i>viorele</i>	58
VARIZIG	61	VIRACEPT	29
<i>vasopressin</i>	53	VIREAD	29
<i>vasopressin + rfid</i>	53	VISTOGARD	67
<i>vasostrict</i>	53	VITRAKVI	22
VAXELIS	65	VIVITROL	3
VECTIBIX	24	VIVOTIF	65
VEGZELMA	24	VIZIMPRO	22
VEKLURY	30	VOCABRIA	28
VELCADE	19	<i>volnea</i>	58
VELIVET	58	VONJO	19
VELTASSA	48	VORANIGO	24
VEMLIDY	27	<i>voriconazole</i>	14
VENCLEXTA	22	VOWST	50
VENCLEXTA STARTING PACK	22	VPRIV	51
VENLAFAXINE BESYLATE ER	12	VRAYLAR	26
<i>venlafaxine hydrochloride</i>	12	VUMERITY	42

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You can find information on what the symbols and abbreviations in this table mean by going to the introduction pages of this document.

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## Multi-Language Insert

### Multi-Language Interpreter Services

**English:** We have free interpreter services to answer any questions you may have about our health or drug plan. To get an interpreter, just call us at (877) 210-9167 (TTY: 711). Someone who speaks English/Language can help you. This is a free service.

**Spanish:** Tenemos servicios de intérprete sin costo alguno para responder cualquier pregunta que pueda tener sobre nuestro plan de salud o medicamentos. Para hablar con un intérprete, por favor llame al (877) 210-9167 (TTY: 711). Alguien que hable español le podrá ayudar. Este es un servicio gratuito.

**Chinese Mandarin:** 我们提供免费的翻译服务，帮助您解答关于健康或药物保险的任何疑问。如果您需要此翻译服务，请致电 (877) 210-9167 (TTY: 711)。我们的中文工作人员很乐意帮助您。这是一项免费服务。

**Chinese Cantonese:** 您對我們的健康或藥物保險可能存有疑問，為此我們提供免費的翻譯服務。如需翻譯服務，請致電 (877) 210-9167 (TTY: 711)。我們講中文的人員將樂意為您提供幫助。這是一項免費服務。

**Tagalog:** Mayroon kaming libreng serbisyo sa pagsasaling-wika upang masagot ang anumang mga katanungan ninyo hinggil sa aming planong pangkalusugan o panggagamot. Upang makakuha ng tagasaling-wika, tawagan lamang kami sa (877) 210-9167 (TTY: 711). Maaari kayong tulungan ng isang nakakapagsalita ng Tagalog. Ito ay libreng serbisyo.

**French:** Nous proposons des services gratuits d'interprétation pour répondre à toutes vos questions relatives à notre régime de santé ou d'assurance-médicaments. Pour accéder au service d'interprétation, il vous suffit de nous appeler au (877) 210-9167 (TTY: 711). Un interlocuteur parlant Français pourra vous aider. Ce service est gratuit.

**Vietnamese:** Chúng tôi có dịch vụ thông dịch miễn phí để trả lời các câu hỏi về chương sức khỏe và chương trình thuốc men. Nếu quý vị cần thông dịch viên xin gọi (877) 210-9167 (TTY: 711) sẽ có nhân viên nói tiếng Việt giúp đỡ quý vị. Đây là dịch vụ miễn phí.

**German:** Unser kostenloser Dolmetscherservice beantwortet Ihren Fragen zu unserem Gesundheits- und Arzneimittelplan. Unsere Dolmetscher

erreichen Sie unter (877) 210-9167 (TTY: 711). Man wird Ihnen dort auf Deutsch weiterhelfen. Dieser Service ist kostenlos.

**Korean:** 당사는 의료 보험 또는 약품 보험에 관한 질문에 대해 드리고자 무료 통역 서비스를 제공하고 있습니다. 통역 서비스를 이용하려면 전화 (877) 210-9167 (TTY: 711)번으로 문의해 주십시오. 한국어를 하는 담당자가 도와 드릴 것입니다. 이 서비스는 무료로 운영됩니다.

**Russian:** Если у вас возникнут вопросы относительно страхового или медикаментного плана, вы можете воспользоваться нашими бесплатными услугами переводчиков. Чтобы воспользоваться услугами переводчика, позвоните нам по телефону (877) 210-9167 (TTY: 711). Вам окажет помощь сотрудник, который говорит по-русски. Данная услуга бесплатная.

**Arabic:** إننا نقدم خدمات المترجم الفوري المجانية للإجابة عن أي أسئلة تتعلق بالصحة أو جدول الأدوية لدينا. للحصول على مترجم فوري، ليس عليك سوى الاتصال بنا على (877-210-9167)TTY:711. سيقوم شخص ما يتحدث العربية بمساعدتك. هذه خدمة مجانية.

**Hindi:** हमारे स्वास्थ्य या दवा की योजना के बारे में आपके किसी भी प्रश्न के जवाब देने के लिए हमारे पास मुफ्त दुभाषिया सेवाएँ उपलब्ध हैं. एक दुभाषिया प्राप्त करने के लिए, बस हमें (877) 210-9167 (TTY: 711) पर फोन करें. कोई व्यक्ति जो हिन्दी बोलता है आपकी मदद कर सकता है. यह एक मुफ्त सेवा है.

**Italian:** È disponibile un servizio di interpretariato gratuito per rispondere a eventuali domande sul nostro piano sanitario e farmaceutico. Per un interprete, contattare il numero (877) 210-9167 (TTY: 711). Un nostro incaricato che parla Italianovi fornirà l'assistenza necessaria. È un servizio gratuito.

**Portugués:** Dispomos de serviços de interpretação gratuitos para responder a qualquer questão que tenha acerca do nosso plano de saúde ou de medicação. Para obter um intérprete, contacte-nos através do número (877) 210-9167 (TTY: 711). Irá encontrar alguém que fale o idioma Português para o ajudar. Este serviço é gratuito.

**French Creole:** Nou genyen sèvis entèprèt gratis pou reponn tout kesyon ou ta genyen konsènan plan medikal oswa dwòg nou an. Pou jwenn yon entèprèt, jis rele nou nan (877) 210-9167 (TTY: 711). Yon moun ki pale Kreyòl kapab ede w. Sa a se yon sèvis ki gratis.

**Polish:** Umożliwiamy bezpłatne skorzystanie z usług tłumacza ustnego, który pomoże w uzyskaniu odpowiedzi na temat planu zdrowotnego lub

dawkowania leków. Aby skorzystać z pomocy tłumacza znającego język polski, należy zadzwonić pod numer (877) 210-9167 (TTY: 711). Ta usługa jest bezpłatna.

**Japanese:** 当社の健康 健康保険と薬品 処方薬プランに関するご質問にお答えするために、無料の通訳サービスがあります。通訳をご用命になるには、(877) 210-9167 (TTY: 711)にお電話ください。日本語を話す人者が支援いたします。これは無料のサービスです。

Form CMS-10802  
(Expires 12/31/25)

## Discrimination is Against the Law

FirstCarolinaCare Insurance Company complies with applicable Federal Civil Rights laws and does not discriminate on the basis of race, color, national origin, age, disability or sex (including discrimination on the basis of sex characteristics, including intersex traits; pregnancy or related conditions; sexual orientation; gender identity; and sex stereotypes).

FirstCarolinaCare Insurance Company does not exclude people or treat them differently because of race, color, national origin, age, disability or sex (including discrimination on the basis of sex characteristics, including intersex traits; pregnancy or related conditions; sexual orientation; gender identity; and sex stereotypes).

FirstCarolinaCare Insurance Company provides free aids and services to people with disabilities to communicate effectively with us, such as:

Qualified sign language interpreters.

Written information in other formats (large print, audio, accessible electronic formats, other formats).

Provides free language services to people whose primary language is not English, such as:

Qualified interpreters.

Information written in other languages.

If you need these services, contact Customer Service. If you believe that FirstCarolinaCare Insurance Company has failed to provide these services or discriminated in another way on the basis of race, color, national origin, age, disability or sex (including discrimination on the basis of sex characteristics, including intersex traits; pregnancy or related conditions; sexual orientation; gender identity; and sex stereotypes), you can file a grievance with: FirstCarolinaCare Insurance Company, Customer Service, 3310 Fields South Drive, Champaign, Illinois 61822, telephone: (800) 481-1092, fax: (217) 902-9705, [CustomerService@FirstCarolinaCare.com](mailto:CustomerService@FirstCarolinaCare.com).

You can file a grievance in person or by mail, fax or email. If you need help filing a grievance, Customer Service is available to help you.

You can also file a Civil Rights complaint with the U.S. Department of Health and Human Services, Office for Civil Rights electronically through the Office for Civil Rights Complaint Portal, available at <https://ocrportal.hhs.gov/ocr/portal/lobby.jsf>, or by mail or phone at:

U.S. Department of  
Health and Human  
Services, 200  
Independence Avenue  
SW., Room 509F, HHS  
Building, Washington,  
DC 20201, (800) 368-  
1019, (800) 537-7697  
(TDD). Complaint forms  
are available at

<http://www.hhs.gov/ocr/office/file/index.html>.FCC  
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This formulary was updated on 04/1/2025. For more recent information or other questions, please contact FirstMedicare Direct Member Services, at (877) 210-9167 or, for TTY users, 711, 8 a.m. to 8 p.m., local time, 7 days a week. From April 1 – September 30 voicemail will be used on weekends and holidays, or visit FirstMedicare.com.

***FirstMedicare Direct***

FIRSTCAROLINACARE INSURANCE COMPANY

**(877) 210-9167, TTY/TDD 711**

**FirstMedicare.com**

Last Updated 04/1/2025