

2022 Select Standard Formulary

Effective January 1, 2022



For the most current list of covered medications or if you have questions:



Call the number on your member ID card.



Visit your plan's website on your member ID card or log on to the OptumRx app to:

- Find a participating retail pharmacy by ZIP code.
- Look up possible lower-cost medication alternatives.
- Compare medication pricing and options.



Understanding your formulary

What is a formulary?

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

To create the list, OptumRx® is guided by the Pharmacy and Therapeutics Committee. This group of doctors and pharmacists reviews which medications will be covered, how well the drugs work, and overall value. They also make sure there are safe and covered options.

How do I use my formulary?

You and your doctor can use the formulary to help you choose the most cost-effective prescription medications. This guide tells you if a medication is generic or brand, and if special rules apply. If your medication is not listed here, please visit your plan's website or call the number on your member ID card.

What are tiers?

Tiers are the different cost levels you pay for a medication. Each tier is assigned a cost, set by your employer or plan sponsor.

Medication tips

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

Generic medications contain the same active ingredients (offer the same effect) as brand-name medications, but they often cost less. In some situations, brand-name medications could be lower in cost.

What if my doctor writes a brand-name prescription?

If your doctor gives you a prescription for a brand-name medication, ask if a lower-cost option could be right for you.

What if I am taking a specialty medication?

Specialty medications are used to treat complex conditions and are generally higher in cost. Please note, not all specialty medications are listed in the formulary. Our specialty pharmacy can provide most of your specialty medications along with helpful programs and services. Call **1-855-427-4682** and ask how you can have your prescriptions delivered right to your home or doctor's office.

About this formulary

Where differences exist between this list and your benefit plan, the benefit plan documents rule. This is not a complete list of your covered medications. Please review your benefit plan documents for full details. Not all formulary alternatives listed in this document may be appropriate for your specific condition. Please talk to your doctor.

When does the formulary change?

- Medications may move to a lower tier at any time.
- Medications may move to a higher tier when a generic equal becomes available.
- Medications may move to a higher tier or be excluded from coverage on January 1 or July 1 of each year.

If a medication changes tiers, you may have to pay a different amount for that medication.

Why are some medications excluded from coverage?

A medication may be excluded from coverage under your pharmacy benefit when it works the same as or is similar to another prescription or over-the-counter (OTC) medication.

What if I don't agree with a decision about an excluded medication?

You, your authorized representative, or your doctor can ask for a coverage request by calling the number on your member ID card.

Over-the-counter medications (OTC)

Talk to your doctor about OTC options. Even though OTC medications may not be covered by your pharmacy benefit, they may cost less than a prescription medication.

Reading your formulary

The formulary gives you choices so you and your doctor can decide your best course of treatment. In this formulary, brand-name medications are shown in UPPERCASE (for example, CLOBEX). Generic medications are shown in lowercase (for example, clobetasol).

Tier information

Using lower tier or preferred medications can help you lower your out-of-pocket cost. Your plan may have multiple or no tiers. Please note: If you have a high-deductible plan, the tier cost levels will apply once you meet your deductible.

Drug tier	Includes	Helpful tips
Tier 1	\$ Lower-cost generics and some brand name	Use tier 1 drugs for the lowest out-of-pocket costs.
Tier 2	\$\$ Mid-range cost preferred brand name	Use tier 2 drugs instead of tier 3 to help reduce your out-of-pocket costs.
Tier 3	\$\$\$ Higher-cost brand name and some generics	Many tier 3 drugs have lower-cost options in tier 1 or 2. Ask your doctor if they could work for you.

Drug list information

In this drug list, some medications are noted with letters next to them to help you see which ones may have coverage requirements or limits. Your benefit plan decides how these medications may be covered.

PA	Prior authorization – Your doctor is required to give OptumRx more information to determine coverage.
QL	Quantity limit – Medication may be limited to a certain quantity.
SP	Specialty medication – Medication is designated as specialty.
ST	Step therapy – Must try lower-cost medication(s) before a higher-cost medication can be covered.
3P	Tier 3 preferred
++	Benefit design options – Coverage is determined by your prescription medication benefit plan.

Select Standard Formulary

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Drug Name	Drug Tier	Notes
Analgesics - Drugs for Pain		
acetaminophen-codeine #2	1	QL
acetaminophen-codeine #3	1	QL
acetaminophen-codeine #4	1	QL
acetaminophen-codeine oral tablet 300-15 mg, 300-60 mg	1	QL
apap-caff-dihydrocodeine oral capsule	1	QL
BELBUCA	2	PA; QL
butalbital-apap-caffeine	1	
fentanyl	1	PA; QL
hydrocodone-acetaminophen oral tablet	1	QL
hydromorphone hcl oral tablet	1	QL
HYSINGLA ER	2	PA; QL
MORPHINE SULFATE (BULK)	3	
morphine sulfate (concentrate) oral solution 100 mg/5ml, 20 mg/ml	1	QL
morphine sulfate er oral tablet extended release	1	PA; QL
morphine sulfate oral solution	1	QL
NUCYNTA	3	QL
oxycodone hcl oral tablet	1	QL

Drug Name	Drug Tier	Notes
OXYCODONE-ACETAMINOPHEN ORAL TABLET 10-300 MG, 2.5-300 MG, 5-300 MG	3	QL
oxycodone-acetaminophen oral tablet 10-325 mg, 2.5-325 mg, 5-325 mg, 7.5-325 mg	1	QL
OXYCONTIN	2	PA; QL
tramadol hcl oral tablet 50 mg	1	QL
TREZIX	3	QL
XTAMPZA ER	2	PA; QL
Analgesics - Drugs for Pain and Inflammation		
celecoxib oral	1	QL
diclofenac sodium external gel 1 %	1	QL
diclofenac sodium oral	1	
etodolac oral tablet	1	
ibuprofen oral tablet	1	
INDOMETHACIN ORAL CAPSULE 20 MG	3	ST
indomethacin oral capsule 25 mg, 50 mg	1	
ketorolac tromethamine oral	1	QL
meloxicam oral tablet	1	
nabumetone oral	1	
NAPRELAN ORAL TABLET EXTENDED RELEASE 24 HOUR 375 MG, 500 MG	3	

For more information regarding the tiers and designations in this drug list, please see the *Reading your formulary* section of this booklet.

Drug Name	Drug Tier	Notes
NAPRELAN ORAL TABLET EXTENDED RELEASE 24 HOUR 750 MG	3	PA
naproxen oral tablet	1	
naproxen sodium oral tablet	1	
Anesthetics		
lidocaine external patch	1	
lidocaine-prilocaine external cream	1	
Anti-Addiction / Substance Abuse Treatment Agents		
buprenorphine hcl sublingual	1	QL
buprenorphine hcl-naloxone hcl	1	QL
CHANTIX STARTING MONTH PAK	3	++; QL
naltrexone hcl oral	1	
NARCAN	2	
ZUBSOLV	2	QL
Antibacterials		
amoxicillin oral capsule	1	
amoxicillin oral suspension reconstituted	1	
amoxicillin oral tablet	1	
amoxicillin-potassium clavulanate oral suspension reconstituted	1	
amoxicillin-potassium clavulanate oral tablet	1	
azithromycin oral suspension reconstituted	1	
azithromycin oral tablet	1	

Drug Name	Drug Tier	Notes
cefdinir	1	
cefuroxime axetil	1	
cephalexin oral capsule	1	
cephalexin oral suspension reconstituted	1	
ciprofloxacin hcl oral tablet 250 mg, 500 mg, 750 mg	1	
clarithromycin oral tablet	1	
clindamycin hcl oral	1	
CLINDESSE	3	
DIFICID	3	
doxycycline hyclate oral capsule	1	
doxycycline hyclate oral tablet	1	
doxycycline monohydrate oral capsule	1	
doxycycline monohydrate oral tablet	1	
levofloxacin oral tablet	1	
metronidazole oral tablet	1	
metronidazole vaginal	1	
minocycline hcl oral capsule	1	
mupirocin external	1	
nitrofurantoin macrocrystal	1	
nitrofurantoin monohydrate macrocrystals	1	
NUZYRA ORAL	3	
penicillin v potassium oral tablet	1	
SEYSARA	3	ST

For more information regarding the tiers and designations in this drug list, please see the *Reading your formulary* section of this booklet.

Drug Name	Drug Tier	Notes
SOLOSEC	3	
sulfamethoxazole-trimethoprim oral tablet	1	
XENLETA	3	
XEPI	3	
XIMINO	3	
Anticoagulants		
ELIQUIS	2	QL
ELIQUIS DVT/PE STARTER PACK	2	QL
enoxaparin sodium	1	SP; QL
PRADAXA	2	QL
warfarin sodium oral	1	
XARELTO	2	QL
XARELTO STARTER PACK	2	QL
Anticonvulsants - Drugs for Seizures		
APTIOM	3	
BRIVIACT INTRAVENOUS	3	
BRIVIACT ORAL	3	ST
carbamazepine oral tablet	1	
divalproex sodium er	1	
divalproex sodium oral tablet delayed release	1	
EPIDIOLEX	3	PA; SP
FYCOMPA	3	
gabapentin oral capsule	1	
gabapentin oral tablet	1	
lamotrigine er	1	
lamotrigine oral tablet	1	
levetiracetam oral tablet	1	
NAYZILAM	3	QL

Drug Name	Drug Tier	Notes
oxcarbazepine oral tablet	1	
SYMPAZAN	3	PA
topiramate oral tablet	1	
TROKENDI XR	3	ST
VALTOCO	3	QL
VIMPAT	3	
XCOPRI	3	ST
zonisamide oral	1	
Antidementia Agents - Drugs for Alzheimer's Disease and Dementia		
donepezil hcl oral tablet 10 mg, 23 mg	1	
memantine hcl oral tablet 10 mg, 5 mg	1	
NAMZARIC	2	QL
Antidepressants		
amitriptyline hcl oral	1	
bupropion hcl er (sr)	1	QL
bupropion hcl er (xl) oral tablet extended release 24 hour 150 mg, 300 mg	1	QL
BUPROPION HCL ER (XL) ORAL TABLET EXTENDED RELEASE 24 HOUR 450 MG	3	ST; QL
bupropion hcl oral	1	
citalopram hydrobromide oral tablet	1	
desvenlafaxine succinate er	1	QL
doxepin hcl oral capsule 10 mg, 100 mg, 25 mg, 50 mg, 75 mg	1	

For more information regarding the tiers and designations in this drug list, please see the *Reading your formulary* section of this booklet.

Drug Name	Drug Tier	Notes
duloxetine hcl oral	1	QL
escitalopram oxalate oral tablet	1	
fluoxetine hcl oral capsule	1	
fluoxetine hcl oral tablet	1	
fluvoxamine maleate	1	
FORFIVO XL	3	ST; QL
mirtazapine oral tablet	1	
nortriptyline hcl oral capsule	1	
paroxetine hcl	1	
sertraline hcl oral tablet	1	
trazodone hcl oral	1	
TRINTELLIX	3	ST; QL
venlafaxine hcl	1	
venlafaxine hcl er	1	
VIIBRYD	3	QL
VIIBRYD STARTER PACK	3	QL
Antiemetics - Drugs for Nausea and Vomiting		
meclizine hcl oral tablet	1	++
metoclopramide hcl oral tablet 10 mg	1	
ondansetron hcl oral tablet 4 mg, 8 mg	1	
ondansetron odt	1	
prochlorperazine maleate oral	1	
scopolamine	1	
VARUBI (180 MG DOSE)	3	QL
Antifungals		
ciclopirox external solution	1	++

Drug Name	Drug Tier	Notes
clotrimazole external cream	1	
clotrimazole-betamethasone external cream	1	
CRESEMBA ORAL	3	PA
fluconazole oral tablet	1	
GYNAZOLE-1	3	
KERYDIN	3	PA; ++
ketoconazole external cream	1	
ketoconazole external shampoo	1	
nystatin external cream	1	
nystatin mouth/throat	1	
terbinafine hcl oral	1	QL
terconazole vaginal cream	1	
Antigout Agents		
allopurinol oral	1	
colchicine oral tablet	1	
febuxostat	1	ST
Antimigraine Agents		
AIMOVIG SUBCUTANEOUS SOLUTION AUTO-INJECTOR 140 MG/ML, 70 MG/ML	2	PA; QL
eletriptan hydrobromide	1	QL
EMGALITY	2	PA; QL
EMGALITY (300 MG DOSE)	2	PA; QL
NURTEC	2	PA; QL
rizatriptan benzoate	1	QL
sumatriptan succinate oral	1	QL
UBRELVY	2	PA; QL

For more information regarding the tiers and designations in this drug list, please see the *Reading your formulary* section of this booklet.

Drug Name	Drug Tier	Notes
Antineoplastics - Drugs for Cancer		
ALECENSA	2	PA; SP
ALUNBRIG	2	PA; SP; QL
anastrozole oral	1	
CABOMETYX	2	PA; SP
CALQUENCE	3	PA; SP
capecitabine	1	PA; SP
ERIVEDGE	3	PA; SP
IBRANCE ORAL TABLET	3	PA; SP
IDHIFA	3	PA; SP; QL
KANJINTI	2	PA; SP
KEYTRUDA	3	PA; SP
KISQALI FEMARA	3	PA; SP
KISQALI ORAL TABLET THERAPY PACK 200 MG	3	PA; SP
letrozole oral	1	
LYNPARZA	2	PA; SP
MVASI	2	PA; SP
NUBEQA	3	PA; SP
ODOMZO	3	PA; SP
ORGOVYX	3	PA; SP
PHESGO	2	PA; SP
RETEVMO	3	PA; SP
REVLIMID	2	PA; SP
ROZLYTREK	3	PA; SP
RUBRACA	2	PA; SP
RUXIENCE	2	PA; SP
SPRYCEL	2	PA; SP
TABRECTA	3	PA; SP
TAGRISSE ORAL TABLET 40 MG	3	PA; SP; QL
TAGRISSE ORAL TABLET 80 MG	3	PA; SP

Drug Name	Drug Tier	Notes
tamoxifen citrate oral	1	
TARGRETIN EXTERNAL	3	PA; SP
TRAZIMERA	2	PA; SP
UKONIQ	3	PA; SP
VELCADE	2	PA; SP
VITRAKVI	3	PA; SP
XTANDI	3	PA; SP
ZEJULA	2	PA; SP
ZIRABEV	2	PA; SP
Antiparasitics		
ARAKODA	3	
EMVERM	2	
hydroxychloroquine sulfate oral tablet 200 mg	1	
Antiparkinson Agents		
benztropine mesylate oral	1	
carbidopa-levodopa oral tablet	1	
INBRIJA	3	PA; SP
KYNMOBI	3	PA; SP; QL
KYNMOBI TITRATION KIT	3	PA; SP; QL
NEUPRO	3	ST
NOURIANZ	3	PA
ONGENTYS	3	ST
pramipexole dihydrochloride	1	
ropinirole hcl	1	
RYTARY	3	ST
Antiplatelets		
BRILINTA	2	
clopidogrel bisulfate oral	1	
prasugrel hcl	1	

For more information regarding the tiers and designations in this drug list, please see the *Reading your formulary* section of this booklet.

Drug Name	Drug Tier	Notes
Antipsychotics - Drugs for Mood Disorders		
ABILIFY MAINTENA	3	
aripiprazole oral tablet	1	QL
ARISTADA	3	
ARISTADA INITIO	3	
INVEGA SUSTENNA	3	
INVEGA TRINZA	3	
LATUDA	3	QL
olanzapine oral tablet	1	QL
PERSERIS	3	
quetiapine fumarate	1	QL
quetiapine fumarate er	1	QL
REXULTI	3	QL
risperidone oral tablet	1	QL
VRAYLAR	3	ST; QL
ziprasidone hcl	1	QL
Antivirals		
acyclovir oral tablet	1	
BIKTARVY	3	
CIMDUO	2	
DESCOVY	3	PA
DOVATO	2	
entecavir	1	SP; QL
EPCLUSA	2	PA; SP; QL
GENVOYA	3	
HARVONI	2	PA; SP; QL
JULUCA	2	
MAVYRET	2	PA; SP; QL
ODEFSEY	3	
PREZCOBIX	2	
RUKOBIA	2	
SYMFI	2	
SYMFI LO	2	

Drug Name	Drug Tier	Notes
TIVICAY	2	
TRIUMEQ	2	
TRUVADA ORAL TABLET 100-150 MG, 133-200 MG, 167-250 MG	3	
TRUVADA ORAL TABLET 200-300 MG	3	PA
valacyclovir hcl oral	1	QL
VEMLIDY	3	SP
VOSEVI	2	PA; SP; QL
XOFLUZA (40 MG DOSE) ORAL TABLET THERAPY PACK 2 X 20 MG	3	QL
XOFLUZA (80 MG DOSE) ORAL TABLET THERAPY PACK 2 X 40 MG	3	QL
Anxiolytics - Drugs for Anxiety		
alprazolam oral tablet	1	QL
bupirone hcl oral	1	
clonazepam oral tablet	1	QL
diazepam oral tablet	1	
hydroxyzine hcl oral tablet	1	
hydroxyzine pamoate oral	1	
lorazepam oral tablet	1	QL
triazolam	1	QL
Bipolar Agents - Drugs for Mood Disorders		
lithium carbonate er	1	
lithium carbonate oral capsule	1	

For more information regarding the tiers and designations in this drug list, please see the *Reading your formulary* section of this booklet.

Drug Name	Drug Tier	Notes
Blood Products and Modifiers - Drugs for Blood Disorders		
ADVATE	2	SP
ADYNOVATE	3	SP
AFSTYLA	3	SP
ARANESP (ALBUMIN FREE)	2	PA; SP
ELOCTATE	3	SP
JIVI	3	SP
KOATE	2	SP
MULPLETA	2	PA; SP
NEULASTA	3	PA; SP
NEULASTA ONPRO	3	PA; SP
NIVESTYM	2	PA; SP
NOVOEIGHT	2	SP
NPLATE	3	PA; SP
NUWIQ	2	SP
RECOMBINATE	2	SP
RETACRIT	2	PA; SP
SOLIRIS	3	PA; SP
ULTOMIRIS	3	PA; SP
WILATE	2	SP
XYNTHA	2	SP
XYNTHA SOLOFUSE	2	SP
ZARXIO	2	PA; SP
ZIEXTENZO	3	PA; SP
Cardiovascular Agents - Drugs for Heart and Circulation Conditions		
amiodarone hcl oral	1	
amlodipine besylate oral	1	
amlodipine besylate-benazepril hcl	1	

Drug Name	Drug Tier	Notes
amlodipine besylate-valsartan	1	
amlodipine-olmesartan	1	
ANTARA	3	PA
atenolol oral	1	
atenolol-chlorthalidone	1	
atorvastatin calcium oral	1	
benazepril hcl oral	1	
BIDIL	3	
bisoprolol fumarate oral	1	
bisoprolol-hydrochlorothiazide	1	
bumetanide oral	1	
BYSTOLIC	3	ST
candesartan cilexetil	1	
cartia xt	1	
carvedilol	1	
chlorthalidone	1	
clonidine hcl oral	1	
CORLANOR	3	PA; QL
digoxin oral tablet	1	
diltiazem hcl er coated beads oral capsule extended release 24 hour	1	
doxazosin mesylate oral	1	
EDARBI	3	ST
EDARBYCLOR	3	ST
enalapril maleate oral tablet	1	
ENTRESTO	2	QL
ezetimibe	1	
ezetimibe-simvastatin	1	

For more information regarding the tiers and designations in this drug list, please see the *Reading your formulary* section of this booklet.

Drug Name	Drug Tier	Notes
fenofibrate micronized oral capsule 134 mg, 200 mg, 67 mg	1	
fenofibrate oral tablet	1	
fenofibric acid oral capsule delayed release	1	
flecainide acetate	1	
furosemide oral tablet	1	
gemfibrozil oral	1	
guanfacine hcl	1	
HEMANGEOL	3	
hydralazine hcl oral	1	
hydrochlorothiazide oral	1	
irbesartan	1	
irbesartan-hydrochlorothiazide	1	
isosorbide mononitrate er	1	
labetalol hcl oral	1	
lisinopril oral	1	
lisinopril-hydrochlorothiazide	1	
LIVALO	3	ST
losartan potassium oral	1	
losartan potassium-hctz	1	
lovastatin oral	1	
metoprolol succinate er	1	
metoprolol tartrate oral	1	
MULTAQ	3	
nadolol oral	1	
NEXLETOL	2	PA; QL
NEXLIZET	2	PA; QL
nifedipine er	1	
nifedipine er osmotic release	1	

Drug Name	Drug Tier	Notes
nitroglycerin sublingual	1	
olmesartan medoxomil oral	1	
olmesartan medoxomil-hctz	1	
olmesartan-amlodipine-hctz	1	
omega-3-acid ethyl esters	1	PA
pravastatin sodium	1	
prazosin hcl oral	1	
propranolol hcl er	1	
propranolol hcl oral tablet	1	
ramipril	1	
ranolazine er	1	
REPATHA	2	PA; QL
REPATHA PUSHTRONEX SYSTEM	2	PA; QL
REPATHA SURECLICK	2	PA; QL
rosuvastatin calcium	1	
simvastatin oral	1	
sotalol hcl oral	1	
spironolactone oral	1	
TEKTURNA	2	
TEKTURNA HCT	2	ST
telmisartan	1	
telmisartan-hctz	1	
toremide	1	
triamterene-hctz	1	
valsartan	1	
valsartan-hydrochlorothiazide	1	
VASCEPA	2	PA

For more information regarding the tiers and designations in this drug list, please see the *Reading your formulary* section of this booklet.

Drug Name	Drug Tier	Notes
verapamil hcl er oral tablet extended release	1	
VERQUVO	3	PA; QL
Central Nervous System Agents - Drugs for Attention Deficit Disorder		
ADDERALL XR	3	PA; ST; QL
amphetamine-dextroamphetamine	1	PA; QL
amphetamine-dextroamphetamine er	1	PA; QL
atomoxetine hcl	1	QL
dexmethylphenidate hcl er	1	PA; QL
dexmethylphenidate hcl oral tablet 10 mg, 5 mg	1	PA; QL
guanfacine hcl er	1	
JORNAY PM	3	PA; ST; QL
methylphenidate hcl er (la) oral capsule extended release 24 hour 10 mg, 20 mg, 30 mg, 40 mg	1	PA; QL
methylphenidate hcl er (xr)	1	PA; QL
methylphenidate hcl er oral tablet extended release	1	PA; QL
methylphenidate hcl oral tablet	1	PA; QL
VYVANSE	2	PA; QL
Central Nervous System Agents - Drugs for Multiple Sclerosis		
AMPYRA	3	PA; SP; QL
AUBAGIO	3	PA; SP; QL
AVONEX PEN	2	PA; SP; QL
AVONEX PREFILLED	2	PA; SP; QL

Drug Name	Drug Tier	Notes
BAFIERTAM	2	PA; SP; QL
BETASERON	2	PA; SP; QL
COPAXONE	2	PA; SP; QL
GILENYA	3	PA; SP; QL
KESIMPTA	2	PA; SP; QL
MAVENCLAD	3	PA; SP
MAYZENT	3	PA; SP; QL
REBIF	3	PA; SP; QL
REBIF REBIDOSE	3	PA; SP; QL
REBIF REBIDOSE TITRATION PACK	3	PA; SP; QL
REBIF TITRATION PACK	3	PA; SP; QL
TECFIDERA ORAL CAPSULE DELAYED RELEASE	3	PA; SP; QL
VUMERITY	2	PA; SP; QL
ZEPOSIA	3	PA; SP; QL
ZEPOSIA 7-DAY STARTER PACK	3	PA; SP; QL
ZEPOSIA STARTER KIT	3	PA; SP; QL
Central Nervous System Agents - Miscellaneous		
ADDYI	3	PA; ++; QL
AUSTEDO	3	PA; SP; QL
GRALISE	3	ST; QL
HORIZANT	3	PA; QL
INGREZZA	3	PA; SP; QL
phentermine hcl oral tablet	1	PA; ++
pregabalin oral capsule	1	QL
QSYMIA	3	PA; ++
SAXENDA	3	PA; ++; QL
TEGSEDI	3	PA; SP
TIGLUTIK	3	PA; QL

For more information regarding the tiers and designations in this drug list, please see the *Reading your formulary* section of this booklet.

Drug Name	Drug Tier	Notes
VYLEESI	3	PA; ++; QL
Dental and Oral Agents - Drugs for Mouth and Throat Conditions		
chlorhexidine gluconate mouth/throat	1	
lidocaine viscous hcl	1	
Dermatological Agents - Drugs for Skin Conditions		
ABSORICA LD	3	PA
ACZONE EXTERNAL GEL 7.5 %	2	
adapalene external gel	1	PA; ++
AMZEEQ	3	
betamethasone dipropionate external cream	1	
BRYHALI	3	PA
claravis	1	PA
clindamycin phosphate-benzoyl peroxide external gel 1-5 %	1	
clindamycin phosphate external lotion	1	
clindamycin phosphate external solution	1	
clindamycin phosphate external swab	1	
CLINDAMYCIN PHOSPHATE GEL 1 % EXTERNAL	3	ST
clindamycin phosphate gel 1 % external	1	
clobetasol propionate external cream	1	
clobetasol propionate external ointment	1	

Drug Name	Drug Tier	Notes
clobetasol propionate external solution	1	
DUPIXENT SUBCUTANEOUS SOLUTION PEN-INJECTOR 300 MG/2ML	2	PA; SP; QL
DUPIXENT SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	2	PA; SP; QL
ENSTILAR	3	PA; QL
EPIDUO FORTE	3	
EUCRISA	2	ST
FINACEA EXTERNAL FOAM	3	
FINACEA EXTERNAL GEL	3	ST
fluocinonide external cream	1	
fluocinonide external solution	1	
FLUOROPLEX	3	
FLUOROURACIL EXTERNAL CREAM 0.5 %	2	
fluorouracil external cream 5 %	1	
hydrocortisone external cream	1	
hydrocortisone external ointment 1 %, 2.5 %	1	
imiquimod external cream 3.75 %	1	ST
imiquimod external cream 5 %	1	
KLISYRI	3	ST
metronidazole external cream	1	

For more information regarding the tiers and designations in this drug list, please see the *Reading your formulary* section of this booklet.

Drug Name	Drug Tier	Notes
metronidazole external gel	1	
MIRVASO	3	
mometasone furoate external cream	1	
ONEXTON	3	
pimecrolimus	1	ST
QBREXZA	3	QL
RETIN-A MICRO PUMP EXTERNAL GEL 0.06 %, 0.08 %	2	PA; ++
RHOFADE	3	
SERNIVO	3	
SOOLANTRA	3	
TACLONEX	3	QL
tacrolimus external	1	
tretinoin external cream	1	PA; ++
triamcinolone acetonide external cream	1	
triamcinolone acetonide external ointment 0.025 %, 0.1 %, 0.5 %	1	
triamcinolone acetonide external ointment 0.05 %	1	PA
WYNZORA	3	PA; QL
ZILXI	3	ST
Diabetes - Antidiabetic Agents		
BYDUREON BCISE AUTOINJECTOR	2	ST; QL
BYETTA 10 MCG PEN	2	ST; QL
BYETTA 5 MCG PEN	2	ST; QL
FARXIGA	2	ST
glimepiride	1	
glipizide er	1	
glipizide ir	1	
glyburide oral	1	

Drug Name	Drug Tier	Notes
GLYXAMBI	2	ST
INVOKANA	3	ST
JANUMET	2	ST
JANUMET XR	2	ST
JANUVIA	2	ST
JARDIANCE	2	ST
JENTADUETO	2	ST
JENTADUETO XR	2	ST
metformin hcl er	1	
metformin hcl er (mod)	1	PA
metformin hcl er (osm)	1	
metformin hcl oral tablet	1	
OZEMPIC	2	ST; QL
pioglitazone hcl	1	
RYBELSUS	2	ST; QL
SOLIQUA	2	ST; QL
SYMLINPEN 120	3	PA
SYMLINPEN 60	3	PA
SYNJARDY	2	ST
SYNJARDY XR	2	ST
TRADJENTA	2	ST
TRIJARDY XR	2	ST
TRULICITY	2	ST; QL
VICTOZA	2	ST; QL
XIGDUO XR	2	ST
Diabetes - Glucose Monitoring		
ACCU-CHEK FASTCLIX LANCET KIT	2	++
ACCU-CHEK SOFTCLIX LANCET DEVICE KIT	2	++
CONTOUR MONITOR KIT W/DEVICE	2	++

For more information regarding the tiers and designations in this drug list, please see the *Reading your formulary* section of this booklet.

Drug Name	Drug Tier	Notes
CONTOUR NEXT EZ KIT W/DEVICE	2	++
CONTOUR NEXT LINK KIT W/DEVICE	2	++
CONTOUR NEXT MONITOR KIT W/DEVICE	2	++
CONTOUR NEXT ONE KIT	2	++
CONTOUR NEXT TEST STRIPS	2	++; QL
CONTOUR TEST STRIPS	2	++; QL
DEXCOM G4 / G5 / G6 RECEIVER, TRANSMITTER, SENSOR (INCLUDING PLATINUM, PLATINUM PEDIATRIC) DEVICE	2	PA; ++
FREESTYLE LIBRE 14 DAY READER	2	PA; ++
FREESTYLE LIBRE 14 DAY SENSOR	2	PA; ++
FREESTYLE LIBRE 2 READER	2	PA; ++
FREESTYLE LIBRE 2 SENSOR	2	PA; ++
GHT BLOOD GLUCOSE MONITOR	3	++
GUARDIAN CONNECT TRANSMITTER	3	PA; ++
GUARDIAN LINK 3 TRANSMITTER	3	PA; ++
GUARDIAN SENSOR (3)	3	PA; ++
ONETOUCH ULTRA TEST STRIPS	2	++; QL
ONETOUCH ULTRA 2 KIT W/DEVICE	2	++

Drug Name	Drug Tier	Notes
ONETOUCH ULTRA MINI KIT W/DEVICE	2	++
ONETOUCH VERIO FLEX SYSTEM	2	++
ONETOUCH VERIO TEST STRIPS	2	++; QL
ONETOUCH VERIO IQ SYSTEM	2	++
ONETOUCH VERIO REFLECT	2	++
V-GO 20	2	++
V-GO 30	2	++
V-GO 40	2	++
Diabetes - Glycemic Agents		
BAQSIMI ONE PACK	2	
BAQSIMI TWO PACK	2	
GLUCAGON EMERGENCY KIT INJECTION SOLUTION RECONSTITUTED	2	Made by Fresenius
GVOKE HYPOPEN 1-PACK	2	
GVOKE HYPOPEN 2-PACK	2	
GVOKE PFS	2	
Diabetes - Insulins		
BD AUTOSHIELD DUO PEN NEEDLES	2	++
BD ULTRA-FINE INSULIN SYRINGES	2	++
BD ULTRA-FINE PEN NEEDLES	2	++
HUMALOG	2	++
HUMALOG KWIKPEN	2	++
HUMALOG MIX 50/50 KWIKPEN	2	++

For more information regarding the tiers and designations in this drug list, please see the *Reading your formulary* section of this booklet.

Drug Name	Drug Tier	Notes
HUMALOG MIX 50/50 VIAL	2	++
HUMALOG MIX 75/25 KWIKPEN	2	++
HUMALOG MIX 75/25 VIAL	2	++
HUMALOG U-100 JUNIOR KWIKPEN	2	++
HUMULIN 70/30 KWIKPEN	2	++
HUMULIN 70/30 VIAL	2	++
HUMULIN N KWIKPEN	2	++
HUMULIN N VIAL	2	++
HUMULIN R U-500 KWIKPEN	2	++
HUMULIN R U-500 VIAL	2	++
HUMULIN R VIAL	2	++
LANTUS SOLOSTAR	2	++
LANTUS U-100 VIAL	2	++
LEVEMIR U-100 FLEXTOUCH	2	++
LEVEMIR U-100 VIAL	2	++
LYUMJEV KWIKPEN	2	++
LYUMJEV VIAL	2	++
NOVOFINE AUTOCOVER PEN NEEDLE 30G X 8 MM	2	++
NOVOFINE PEN NEEDLE 32G X 6 MM	2	++
NOVOFINE PLUS PEN NEEDLE 32G X 4 MM	2	++
NOVOLIN 70/30 FLEXPEN	2	++
NOVOLIN 70/30 VIAL	2	++
NOVOLIN N FLEXPEN	2	++
NOVOLIN N VIAL	2	++
NOVOLIN R FLEXPEN	2	++

Drug Name	Drug Tier	Notes
NOVOLIN R VIAL	2	++
NOVOLOG FLEXPEN	2	++
NOVOLOG MIX 70/30 FLEXPEN	2	++
NOVOLOG MIX 70/30 VIAL	2	++
NOVOLOG PENFILL	2	++
NOVOLOG U-100 VIAL	2	++
NOVOTWIST PEN NEEDLE 32G X 5 MM	2	++
TOUJEO MAX SOLOSTAR	2	++
TOUJEO SOLOSTAR	2	++
TRESIBA	2	++
TRESIBA FLEXTOUCH	2	++
Electrolytes / Minerals / Metals / Vitamins		
cyanocobalamin injection solution 1000 mcg/ml	1	++
ergocalciferol oral capsule	1	++
folic acid oral tablet	1	++
klor-con m20	1	
LOKELMA	3	
NASCOBAL	3	++
potassium chloride crystal oral tablet extended release 10 meq, 20 meq	1	
potassium chloride er	1	
potassium citrate er	1	
sodium fluoride oral tablet chewable	1	++
VELTASSA	3	

For more information regarding the tiers and designations in this drug list, please see the *Reading your formulary* section of this booklet.

Drug Name	Drug Tier	Notes
vitamin d (ergocalciferol) oral capsule 1.25 mg (50000 ut)	1	++
Gastrointestinal Agents - Drugs for Acid Reflux and Ulcer		
DEXILANT	2	++; QL
esomeprazole magnesium oral capsule delayed release	1	++; QL
famotidine oral	1	++
lansoprazole oral capsule delayed release	1	++; QL
misoprostol oral	1	
omeprazole oral capsule delayed release	1	QL
pantoprazole sodium oral tablet delayed release	1	QL
rabeprazole sodium oral tablet delayed release	1	++; QL
sucralfate oral tablet	1	
Gastrointestinal Agents - Drugs for Bowel, Intestine and Stomach Conditions		
CLENPIQ	3	
dicyclomine hcl oral capsule	1	
dicyclomine hcl oral tablet	1	
diphenoxylate-atropine oral tablet	1	
glycopyrrolate oral tablet 1 mg, 2 mg	1	

Drug Name	Drug Tier	Notes
GLYCOPYRROLATE ORAL TABLET 1.5 MG	3	PA
hyoscyamine sulfate sl	1	
hyoscyamine sulfate sublingual	1	
lactulose oral solution	1	
LINZESS	2	ST; QL
MOTEGRITY	3	ST; QL
MOVANTIK	2	ST; QL
OMECLAMOX-PAK	2	
peg 3350-kcl-na bicarb-nacl	1	
PYLERA	2	
SUPREP BOWEL PREP KIT	3	
SUTAB	3	
SYMPROIC	2	ST; QL
TALICIA	3	
TRULANCE	3	ST; QL
VIBERZI	3	PA; QL
ZELNORM	3	PA; QL
Genetic or Enzyme Disorder - Drugs for Replacement, Modification, Treatment		
CERDELGA	3	PA; SP
CREON	2	
NITYR	3	PA; SP
ORFADIN	3	PA; SP
STRENSIQ	2	PA; SP
ZENPEP	2	
ZOLGENSMA	3	PA; SP
Genitourinary Agents - Drugs for Bladder, Genital and Kidney Conditions		
AURYXIA	3	

For more information regarding the tiers and designations in this drug list, please see the *Reading your formulary* section of this booklet.

Drug Name	Drug Tier	Notes
DEPEN TITRATABS	2	SP
MYRBETRIQ ORAL TABLET EXTENDED RELEASE 24 HOUR	2	
oxybutynin chloride er	1	
oxybutynin chloride oral tablet	1	
phenazopyridine hcl oral tablet 100 mg, 200 mg	1	
sildenafil citrate oral tablet 100 mg, 25 mg, 50 mg	1	++; QL
solifenacin succinate	1	
STENDRA	3	++; QL
tadalafil oral	1	++; QL
tolterodine tartrate er	1	
TOVIAZ	3	
VELPHORO	3	
Genitourinary Agents - Drugs for Prostate Conditions		
alfuzosin hcl er	1	
dutasteride oral	1	
finasteride oral tablet 5 mg	1	
tamsulosin hcl	1	
terazosin hcl oral capsule 1 mg, 10 mg, 5 mg	1	
Hormonal Agents - Adrenal		
dexamethasone oral tablet 0.5 mg, 0.75 mg, 4 mg, 6 mg	1	PA
dexamethasone oral tablet 1 mg, 1.5 mg, 2 mg	1	
hydrocortisone oral	1	

Drug Name	Drug Tier	Notes
methylprednisolone oral tablet therapy pack	1	
prednisolone sodium phosphate oral solution	1	
prednisone oral tablet	1	
prednisone oral tablet therapy pack	1	
TAPERDEX 12-DAY	3	PA
TAPERDEX 6-DAY	3	PA
TAPERDEX 7-DAY	3	PA
Hormonal Agents - Men's Health		
ANDRODERM	2	PA
testosterone cypionate intramuscular	1	PA
testosterone transdermal gel 1.62 %, 10 mg/act (2%), 20.25 mg/1.25gm (1.62%), 20.25 mg/act (1.62%), 25 mg/2.5gm (1%), 40.5 mg/2.5gm (1.62%), 50 mg/5gm (1%)	1	PA
XYOSTED	3	PA
Hormonal Agents - Osteoporosis		
OSPHENA	3	
Hormonal Agents - Pituitary		
ACTHAR	2	PA; SP
cabergoline	1	
clomiphene citrate oral	1	++
FENSOLVI (6 MONTH)	3	PA; SP; QL
FOLLISTIM AQ	2	PA; ++; SP
ganirelix acetate	1	PA; Made by Organon; ++; SP

For more information regarding the tiers and designations in this drug list, please see the *Reading your formulary* section of this booklet.

Drug Name	Drug Tier	Notes
LUPRON DEPOT (1-MONTH) INTRAMUSCULAR KIT 7.5 MG	2	PA; SP
LUPRON DEPOT (3-MONTH) INTRAMUSCULAR KIT 22.5 MG	2	PA; SP
LUPRON DEPOT (4-MONTH) INTRAMUSCULAR KIT 30MG	2	PA; SP
LUPRON DEPOT (6-MONTH) INTRAMUSCULAR KIT 45MG	2	PA; SP
NOCDURNA	3	
NORDITROPIN FLEXPRO	2	PA; ++; SP
NUTROPIN AQ NUSPIN 10	2	PA; ++; SP
NUTROPIN AQ NUSPIN 20	2	PA; ++; SP
NUTROPIN AQ NUSPIN 5	2	PA; ++; SP
ORLISSA	2	PA; QL
SOMATULINE DEPOT	3	PA; SP
SUPPRELIN LA	2	PA; SP; QL
TRIPTODUR	3	PA; SP; QL
Hormonal Agents - Sex Hormones and Birth Control		
apri	1	++
aurovela fe 1/20	1	++
aviane	1	++
BIJUVA	3	
blisovi 24 fe	1	++
blisovi fe 1.5/30	1	++
blisovi fe 1/20	1	++

Drug Name	Drug Tier	Notes
CLIMARA PRO	2	
cryselle-28	1	++
DIVIGEL	3	
dotti	1	
drospirenone-ethinyl estradiol	1	++
DUAVEE	2	
ELESTRIN	3	
eluryng	1	++
ENDOMETRIN	2	++
enskyce	1	++
estarylla	1	++
estradiol oral	1	
estradiol transdermal	1	
estradiol vaginal	1	
estradiol-norethindrone acet	1	
ESTROGEL	3	
etonogestrel-ethinyl estradiol	1	++
EVAMIST	3	
IMVEXXY MAINTENANCE PACK	3	
IMVEXXY STARTER PACK	3	
isibloom	1	++
junel 1.5/30	1	++
junel 1/20	1	++
junel fe 1.5/30	1	++
junel fe 1/20	1	++
junel fe 24	1	++
kurvelo	1	++
larin fe 1/20	1	++
larissia	1	++
lessina	1	++

For more information regarding the tiers and designations in this drug list, please see the *Reading your formulary* section of this booklet.

Drug Name	Drug Tier	Notes
levonorgest-eth est & eth est	1	++; QL
levonorgest-eth estrad 91-day oral tablet 0.15-0.03 & 0.01 mg, 0.15-0.03 mg	1	++; QL
levonorgestrel-ethinyl estrad oral tablet 0.1-20 mg-mcg, 0.15-30 mg-mcg	1	++
LO LOESTRIN FE	3	++
loryna	1	++
MAKENA	2	PA; SP
medroxyprogesterone acetate intramuscular	1	++; QL
medroxyprogesterone acetate oral	1	
MIRENA (52 MG)	3	++
mono-linyah	1	++
NATAZIA	2	++
nikki	1	++
norethin ace-eth estrad-fe oral tablet	1	++
norethindrone acetate oral	1	
norethindrone acet-ethinyl est	1	++
norethindrone oral	1	++
norgestimate-ethinyl estradiol triphasic	1	++
nortrel 1/35 (21)	1	++
nortrel 1/35 (28)	1	++
ORIAHNN	2	PA; QL
PREMARIN ORAL	2	
PREMARIN VAGINAL	2	
PREMPHASE	2	
PREMPRO	2	
sprintec 28	1	++

Drug Name	Drug Tier	Notes
syeda	1	++
tri femynor	1	++
tri-estarylla	1	++
tri-lo-marzia	1	++
tri-lo-mili	1	++
tri-lo-sprintec	1	++
tri-sprintec	1	++
vienva	1	++
xulane	1	++
Hormonal Agents - Thyroid		
ARMOUR THYROID	3	ST
euthyrox	1	
levothyroxine sodium oral tablet	1	
levoxyl	1	
liothyronine sodium oral	1	
methimazole oral	1	
np thyroid oral tablet 30 mg, 60 mg	1	
SYNTHROID	3	ST
TIROSINT	3	
TIROSINT-SOL	3	
Immunological Agents - Drugs for Immune System Stimulation or Suppression		
ACTEMRA ACTPEN	3	PA; 3P; SP
ACTEMRA SUBCUTANEOUS	3	PA; 3P; SP
AVSOLA	2	PA; SP
azathioprine oral	1	
CIMZIA	2	PA; SP
CIMZIA PREFILLED KIT	2	PA; SP
CIMZIA STARTER KIT	2	PA; SP

For more information regarding the tiers and designations in this drug list, please see the *Reading your formulary* section of this booklet.

Drug Name	Drug Tier	Notes
COSENTYX SENSOREADY (300 MG)	3	PA; SP
COSENTYX SENSOREADY PEN	3	PA; SP
cyclosporine modified oral capsule	1	SP
ENBREL MINI	3	PA; SP
ENBREL SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	3	PA; SP
ENBREL SURECLICK	3	PA; SP
GAMMAGARD	3	PA; SP
HAEGARDA	3	PA; SP
HUMIRA	2	PA; SP
HUMIRA PEDIATRIC CROHNS START	2	PA; SP
HUMIRA PEN	2	PA; SP
HUMIRA PEN-CD/UC/HS STARTER	2	PA; SP
HUMIRA PEN-PEDIATRIC UC START	2	PA; SP
HUMIRA PEN-PS/UV/ADOL HS START	2	PA; SP
HUMIRA PEN-PSOR/UEIT STARTER	2	PA; SP
INFLECTRA	2	PA; SP
leflunomide oral	1	
LUPKYNIS	3	PA; SP; QL
methotrexate oral	1	
methotrexate sodium oral	1	
mycophenolate mofetil oral capsule	1	SP

Drug Name	Drug Tier	Notes
mycophenolate mofetil oral tablet	1	SP
mycophenolate sodium	1	SP
ORENCIA	3	PA; 3P; SP
ORENCIA CLICKJECT	3	PA; 3P; SP
ORLADEYO	3	PA; SP; QL
OTEZLA	2	PA; SP
RASUVO	2	PA; QL
REDITREX	3	PA; QL
RINVOQ	2	PA; SP
RUCONEST	3	PA; SP; QL
SIMPONI	2	PA; SP
SIMPONI ARIA	2	PA; SP
SKYRIZI	2	PA; SP
SKYRIZI (150 MG DOSE)	2	PA; SP
SKYRIZI PEN	2	PA; SP
STELARA INTRAVENOUS	2	PA; SP
STELARA SUBCUTANEOUS	2	PA; SP; QL
tacrolimus oral	1	SP
TALTZ	3	PA; 3P; SP
TREMFYA	2	PA; SP
TREXALL	3	
XELJANZ	2	PA; SP
XELJANZ XR	2	PA; SP
XEMBIFY	3	PA; SP
Inflammatory Bowel Disease Agents		
APRISO	2	
CORTIFOAM	3	
DIPENTUM	3	
hydrocortisone (perianal)	1	
LIALDA	3	ST

For more information regarding the tiers and designations in this drug list, please see the *Reading your formulary* section of this booklet.

Drug Name	Drug Tier	Notes
mesalamine er oral capsule 0.375 gm	1	
mesalamine oral tablet delayed release	1	
PENTASA	3	
PROCTOFOAM HC	2	
sulfasalazine oral tablet	1	
UCERIS RECTAL	3	
Metabolic Bone Disease Agents - Drugs for Osteoporosis		
alendronate sodium oral tablet 10 mg, 5 mg	1	
alendronate sodium oral tablet 35 mg, 70 mg	1	QL
BINOSTO	3	QL
FORTEO	3	PA; SP
ibandronate sodium oral	1	QL
PROLIA	2	PA; SP; QL
RAYALDEE	3	
TERIPARATIDE (RECOMBINANT)	2	PA; SP
TYMLOS	2	PA; SP
XGEVA	2	PA; SP
Metabolic Bone Disease Agents - Other		
calcitriol oral capsule	1	
Miscellaneous Therapeutic Agents		
BOTOX	2	PA; Non-Cosmetic; SP
DUROLANE	2	PA; SP
ENDARI	3	PA
EUFLEXXA	2	PA; SP

Drug Name	Drug Tier	Notes
GELSYN-3	2	PA; SP
Ophthalmic Agents - Drugs for Eye Allergy, Infection and Inflammation		
AZASITE	3	
BESIVANCE	3	
ciprofloxacin hcl ophthalmic	1	
erythromycin ophthalmic	1	
EYSUVIS	3	PA
FLAREX	3	
INVELTYS	3	
ketorolac tromethamine ophthalmic	1	
LOTEMAX OPHTHALMIC GEL	3	PA; QL
LOTEMAX OPHTHALMIC OINTMENT	3	PA; QL
LOTEMAX SM	3	
MOXEZA	2	
MOXIFLOXACIN HCL INTRAOCULAR SOLUTION	3	
moxifloxacin hcl ophthalmic solution	1	
ofloxacin ophthalmic	1	
olopatadine hcl ophthalmic	1	
prednisolone acetate ophthalmic	1	
PROLENSA	2	QL
Ophthalmic Agents - Drugs for Glaucoma		
ALPHAGAN P	2	
BETIMOL	3	

For more information regarding the tiers and designations in this drug list, please see the *Reading your formulary* section of this booklet.

Drug Name	Drug Tier	Notes
brimonidine tartrate ophthalmic	1	
COMBIGAN	2	
dorzolamide hcl-timolol mal	1	
latanoprost ophthalmic	1	
LUMIGAN	2	QL
RHOPRESSA	3	QL
ROCKLATAN	3	QL
SIMBRINZA	2	
timolol maleate ophthalmic solution	1	
timolol maleate pf	1	
ZIOPTAN	3	QL
Ophthalmic Agents - Drugs for Miscellaneous Eye Conditions		
neomycin-polymyxin-dexameth ophthalmic suspension 3.5-10000-0.1	1	
polymyxin b-trimethoprim	1	
RESTASIS	2	PA
RESTASIS MULTIDOSE	2	PA
TOBRADEX ST	3	
tobramycin-dexamethasone	1	
XIIDRA	2	PA
ZYLET	3	
Otic Agents - Drugs for Ear Conditions		
CIPRODEX	3	ST
ciprofloxacin-dexamethasone	1	
neomycin-polymyxin-hc otic	1	

Drug Name	Drug Tier	Notes
ofloxacin otic	1	
OTOVEL	3	PA
Respiratory Tract / Pulmonary Agents - Drugs for Allergies, Cough, Cold		
allergy relief oral tablet 5 mg	1	++
azelastine hcl nasal	1	QL
azelastine-fluticasone	1	QL
benzonatate	1	
cetirizine hcl oral solution	1	++
cyproheptadine hcl oral tablet	1	
DYMISTA	2	QL
FASENRA	2	PA; SP
FASENRA PEN	2	PA; SP
fluticasone propionate nasal	1	++
ipratropium bromide nasal	1	
levocetirizine dihydrochloride oral tablet	1	++
mometasone furoate nasal	1	++; QL
NUCALA	2	PA; SP; QL
OMNARIS	3	++; QL
promethazine hcl oral tablet	1	
promethazine-dm	1	
pseudoephedrine-bromphen-dm	1	
QNASL	3	++; QL
QNASL CHILDRENS	3	++; QL
XHANCE	3	ST; ++; QL
XOLAIR	2	PA; SP

For more information regarding the tiers and designations in this drug list, please see the *Reading your formulary* section of this booklet.

Drug Name	Drug Tier	Notes
ZETONNA	3	++; QL
Respiratory Tract / Pulmonary Agents - Drugs for Asthma and Other Lung Conditions		
ADVAIR DISKUS	2	QL
ADVAIR HFA	2	QL
albuterol sulfate hfa aerosol solution 108 (90 base) mcg/act inhalation	1	QL
ALBUTEROL SULFATE HFA AEROSOL SOLUTION 108 (90 BASE) MCG/ACT INHALATION	3	ST; QL
albuterol sulfate inhalation	1	QL
ALVESCO	3	ST; QL
ANORO ELLIPTA	2	QL
ARNUITY ELLIPTA	2	QL
ATROVENT HFA	3	QL
BREO ELLIPTA	2	QL
BREZTRI AEROSPHERE	2	QL
budesonide inhalation	1	QL
BUDESONIDE-FORMOTEROL FUMARATE	3	PA; QL
COMBIVENT RESPIMAT	2	QL
epinephrine injection solution auto-injector	1	
EPIPEN 2-PAK	3	ST
EPIPEN JR 2-PAK	3	ST
ESBRIET	3	PA; SP
FLOVENT DISKUS	2	QL

Drug Name	Drug Tier	Notes
FLOVENT HFA	2	QL
fluticasone-salmeterol inhalation aerosol powder breath activated 100-50 mcg/dose, 250-50 mcg/dose, 500-50 mcg/dose	1	QL
ipratropium-albuterol	1	QL
LONHALA MAGNAIR REFILL KIT	3	QL
LONHALA MAGNAIR STARTER KIT	3	QL
montelukast sodium oral tablet	1	
montelukast sodium oral tablet chewable	1	
OFEV	3	PA; SP
PERFOROMIST	3	QL
PROAIR HFA	3	ST; QL
PROAIR RESPICLICK	3	ST; QL
PULMICORT FLEXHALER	2	QL
QVAR REDHALER	2	QL
SEREVENT DISKUS	2	QL
SPIRIVA HANDHALER	2	QL
SPIRIVA RESPIMAT	2	QL
STIOLTO RESPIMAT	2	QL
STRIVERDI RESPIMAT	2	QL
SYMBICORT	2	QL
SYMJEPI	3	
TRELEGY ELLIPTA	2	QL
VENTOLIN HFA	3	ST; QL
wixela inhub	1	QL
YUPELRI	3	QL

For more information regarding the tiers and designations in this drug list, please see the *Reading your formulary* section of this booklet.

Drug Name	Drug Tier	Notes
Respiratory Tract / Pulmonary Agents - Drugs for Cystic Fibrosis		
BRONCHITOL	3	PA; QL
PULMOZYME	2	PA; SP
TOBI PODHALER	3	SP; QL
TRIKAFTA	3	PA; SP; QL
Respiratory Tract / Pulmonary Agents - Drugs for Pulmonary Hypertension		
ADEMPAS	2	PA; SP; QL
OPSUMIT	2	PA; SP; QL
ORENITRAM	3	PA; SP
sildenafil citrate oral tablet 20 mg	1	PA; SP; QL
Skeletal Muscle Relaxants - Drugs for Muscle Pain and Spasm		
baclofen oral	1	
carisoprodol oral	1	
cyclobenzaprine hcl oral	1	
LORZONE	3	
metaxalone	1	
methocarbamol oral	1	
tizanidine hcl oral tablet	1	
Sleep Disorder Agents		
armodafinil	1	PA; QL
BELSOMRA	3	ST; QL
DAYVIGO	3	ST; QL
eszopiclone	1	QL
modafinil	1	PA; QL
SILENOR	3	QL
SUNOSI	2	PA; QL

Drug Name	Drug Tier	Notes
temazepam	1	QL
WAKIX	3	PA; SP; QL
XYREM	3	PA; SP; QL
XYWAV	3	PA; SP; QL
zolpidem tartrate er	1	QL
zolpidem tartrate oral	1	QL
Stimulation or Suppression		
TAKHZYRO	3	PA; SP

For more information regarding the tiers and designations in this drug list, please see the *Reading your formulary* section of this booklet.

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OMNARIS.....	25	potassium chloride crys er.....	18	RESTASIS.....	25
ondansetron hcl.....	9	potassium chloride er.....	18	RESTASIS MULTIDOSE.....	25
ondansetron odt.....	9	potassium citrate er.....	18	RETACRIT.....	12
ONETOUCH ULTRA 2 KIT W/DEVICE.....	17	PRADAXA.....	8	RETEVMO.....	10
ONETOUCH ULTRA MINI KIT W/DEVICE.....	17	pramipexole dihydrochloride.....	10	RETIN-A MICRO PUMP.....	16
ONETOUCH ULTRA TEST STRIPS.....	17	prasugrel hcl.....	10	REVLIMID.....	10
ONETOUCH VERIO FLEX SYSTEM.....	17	pravastatin sodium.....	13	REXULTI.....	11
ONETOUCH VERIO IQ SYSTEM.....	17	prazosin hcl.....	13	RHOFADE.....	16
ONETOUCH VERIO KIT W/DEVICE.....	17	prednisolone acetate.....	24	RHOPRESSA.....	25
ONETOUCH VERIO REFLECT.....	17	prednisolone sodium phosphate.....	20	RINVOQ.....	23
ONEXTON.....	16	prednisone.....	20	risperidone.....	11
ONGENTYS.....	10	pregabalin.....	14	rizatriptan benzoate.....	9
OPSUMIT.....	27	PREMARIN.....	22	ROCKLATAN.....	25
ORENCIA.....	23	PREMPRO.....	22	ropinirole hcl.....	10
ORENCIA CLICKJECT.....	23	PREZCOBIX.....	11	rosuvastatin calcium.....	13
		PROAIR HFA.....	26	ROZLYTREK.....	10
		PROAIR RESPICLICK.....	26	RUBRACA.....	10
		prochlorperazine maleate.....	9	RUCONEST.....	23
		PROCTOFOAM HC.....	24	RUKOBIA.....	11
		PROLENSA.....	24	RUXIENCE.....	10

RYBELSUS.....	16	SYNJARDY XR.....	16	TRESIBA FLEXTOUCH.....	18
RYTARY.....	10	SYNTHROID.....	22	tretinoin.....	16
SAXENDA.....	14	TABRECTA.....	10	TREXALL.....	23
scopolamine.....	9	TACLONEX.....	16	TREZIX.....	6
SEREVENT DISKUS.....	26	tacrolimus.....	16, 23	tri femynor.....	22
SERNIVO.....	16	tadalafil.....	20	triamcinolone acetonide.....	16
sertraline hcl.....	9	TAGRISSE.....	10	triamterene-hctz.....	13
SEYSARA.....	7	TAKHZYRO.....	27	triazolam.....	11
sildenafil citrate.....	20, 27	TALICIA.....	19	tri-estarylla.....	22
SILENOR.....	27	TALTZ.....	23	TRIJARDY XR.....	16
SIMBRINZA.....	25	tamoxifen citrate.....	10	TRIKAFTA.....	27
SIMPONI.....	23	tamsulosin hcl.....	20	tri-lo-marzia.....	22
SIMPONI ARIA.....	23	TAPERDEX 12-DAY.....	20	tri-lo-mili.....	22
simvastatin.....	13	TAPERDEX 6-DAY.....	20	tri-lo-sprintec.....	22
SKYRIZI.....	23	TAPERDEX 7-DAY.....	20	TRINTELLIX.....	9
SKYRIZI (150 MG DOSE).....	23	TARGRETIN.....	10	TRIPTODUR.....	21
SKYRIZI PEN.....	23	TECFIDERA.....	14	tri-sprintec.....	22
sodium fluoride.....	18	TEGSEDI.....	14	TRIUMEQ.....	11
solifenacin succinate.....	20	TEKTURNA.....	13	TROKENDI XR.....	8
SOLIQUA.....	16	TEKTURNA HCT.....	13	TRULANCE.....	19
SOLIRIS.....	12	telmisartan.....	13	TRULICITY.....	16
SOLOSEC.....	8	telmisartan-hctz.....	13	TRUVADA.....	11
SOMATULINE DEPOT.....	21	temazepam.....	27	TYMLOS.....	24
SOOLANTRA.....	16	terazosin hcl.....	20	UBRELVY.....	9
sotalol hcl.....	13	terbinafine hcl.....	9	UCERIS.....	24
SPIRIVA HANDIHALER.....	26	terconazole.....	9	UKONIQ.....	10
SPIRIVA RESPIMAT.....	26	TERIPARATIDE		ULTOMIRIS.....	12
spironolactone.....	13	(RECOMBINANT).....	24	valacyclovir hcl.....	11
sprintec 28.....	22	testosterone.....	20	valsartan.....	13
SPRYCEL.....	10	testosterone cypionate.....	20	valsartan-hydrochlorothiazide... 13	
STELARA.....	23	TIGLUTIK.....	14	VALTOCO.....	8
STENDRA.....	20	timolol maleate.....	25	VARUBI (180 MG DOSE).....	9
STIOLTO RESPIMAT.....	26	timolol maleate pf.....	25	VASCEPA.....	13
STRENSIQ.....	19	TIROSINT.....	22	VELCADE.....	10
STRIVERDI RESPIMAT.....	26	TIROSINT-SOL.....	22	VELPHORO.....	20
sucralfate.....	19	TIVICAY.....	11	VELTASSA.....	18
sulfamethoxazole-trimethoprim... 8		tizanidine hcl.....	27	VEMLIDY.....	11
sulfasalazine.....	24	TOBI PODHALER.....	27	venlafaxine hcl.....	9
sumatriptan succinate.....	9	TOBRADEX ST.....	25	venlafaxine hcl er.....	9
SUNOSI.....	27	tobramycin-dexamethasone..... 25		VENTOLIN HFA.....	26
SUPPRELIN LA.....	21	tolterodine tartrate er.....	20	verapamil hcl er.....	14
SUPREP BOWEL PREP KIT....	19	topiramate.....	8	VERQUVO.....	14
SUTAB.....	19	torseamide.....	13	V-GO 20.....	17
syeda.....	22	TOUJEO MAX SOLOSTAR.....	18	V-GO 30.....	17
SYMBICORT.....	26	TOUJEO SOLOSTAR.....	18	V-GO 40.....	17
SYMFI.....	11	TOVIAZ.....	20	VIBERZI.....	19
SYMFI LO.....	11	TRADJENTA.....	16	VICTOZA.....	16
SYMJEPI.....	26	tramadol hcl ir.....	6	vienna.....	22
SYMLINPEN 120.....	16	TRAZIMERA.....	10	VIIBRYD.....	9
SYMLINPEN 60.....	16	trazodone hcl.....	9	VIIBRYD STARTER PACK.....	9
SYMPAZAN.....	8	TRELEGY ELLIPTA.....	26	VIMPAT.....	8
SYMPROIC.....	19	TREMFYA.....	23	vitamin d (ergocalciferol).....	19
SYNJARDY.....	16	TRESIBA.....	18	VITRAKVI.....	10

VOSEVI.....	11	ZUBSOLV.....	7
VRAYLAR.....	11	ZYLET.....	25
VUMERITY.....	14		
VYLEESI.....	15		
VYVANSE.....	14		
WAKIX.....	27		
warfarin sodium.....	8		
WILATE.....	12		
wixela inhub.....	26		
WYNZORA.....	16		
XARELTO.....	8		
XARELTO STARTER PACK.....	8		
XCOPRI.....	8		
XELJANZ.....	23		
XELJANZ XR.....	23		
XEMBIFY.....	23		
XENLETA.....	8		
XEPI.....	8		
XGEVA.....	24		
XHANCE.....	25		
XIGDUO XR.....	16		
XIIDRA.....	25		
XIMINO.....	8		
XOFLUZA (40 MG DOSE).....	11		
XOFLUZA (80 MG DOSE).....	11		
XOLAIR.....	25		
XTAMPZA ER.....	6		
XTANDI.....	10		
xulane.....	22		
XYNTHA.....	12		
XYNTHA SOLOFUSE.....	12		
XYOSTED.....	20		
XYREM.....	27		
XYWAV.....	27		
YUPELRI.....	26		
ZARXIO.....	12		
ZEJULA.....	10		
ZELNORM.....	19		
ZENPEP.....	19		
ZEPOSIA.....	14		
ZEPOSIA 7-DAY STARTER PACK.....	14		
ZEPOSIA STARTER KIT.....	14		
ZETONNA.....	26		
ZIEXTENZO.....	12		
ZILXI.....	16		
ZIOPTAN.....	25		
ziprasidone hcl.....	11		
ZIRABEV.....	10		
ZOLGENSMA.....	19		
zolpidem tartrate.....	27		
zolpidem tartrate er.....	27		
zonisamide.....	8		

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