



Samaritan
Health Plans

2021 Formulary List of Covered Drugs

Samaritan Choice Health Plans

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

When this drug list (formulary) refers to “we,” “us,” or “our,” it means Samaritan Choice. When it refers to “plan” or “our plan,” it means Samaritan Choice. You must generally use network pharmacies to use your prescription drug benefit.

If you have any questions, please call Customer Service at 541-768-4550, toll free 800-832-4580 (TTY 800-735-2900), Monday through Friday, from 8 a.m. to 8 p.m.

This document includes a list of the drugs (formulary) for our plan which is current as of 12/01/2021.

What is a formulary (Drug List)?

A formulary is a list of covered drugs selected by our plan, 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. Our plan will generally cover the drugs listed in our formulary as long as the drug is medically necessary, the prescription is filled at a network pharmacy and other plan rules are followed. For more information on how to fill your prescriptions, please review your member materials.

Can the formulary (Drug List) change?

Most changes in drug coverage happen on January 1, but we may add or remove drugs on the Drug List during the year, move them to different cost-sharing tiers or add new restrictions. We must follow the plan rules in making these changes.

- **New generic drugs.** We may immediately remove a brand name drug on our Drug List if we are replacing it with a new generic drug that will appear on the same or lower cost sharing tier and with the same or fewer restrictions. Also, when adding the new generic drug, we may decide to keep the brand name drug on our Drug List, but immediately move it to a different cost-sharing tier or add new restrictions. If you are currently taking that brand name drug, we may not tell you in advance before we make that change, but we will later provide you with information about the specific change(s) we have made.
 - If we make such a change, you or your prescriber can ask us to make an exception and continue to cover the brand name drug for you. You can find information in the section titled “How do I request an exception to the Formulary?”

How do I use the formulary (Drug List)?

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. 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 at the end of the formulary. 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?

Our plan covers both brand name drugs and generic drugs. A generic drug is approved by the FDA as having the same active ingredient as the brand name drug. Generally, generic drugs cost less than brand name drugs.

Are there any restrictions on my coverage?

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

- **Prior authorization:** Our plan requires you [or your physician] to get prior authorization for certain drugs. This means that you will need to get approval from our plan before you fill your prescriptions. If you don't get approval, we may not cover the drug.
- **Quantity limits:** For certain drugs, our plan limits the amount of the drug that we will cover. For example, our plan provides 60 capsules per 30 days for Omeprazole Capsules.
- **Step therapy:** In some cases, our plan 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, we may not cover drug B unless you try drug A first. If drug A does not work for you, we will then cover drug B.
- **MED:** Morphine equivalent dose also known as MED allows prescribers, pharmacists and patients to compare different opioid medications to each other. We may use the MED calculation to limit the amount of opioid medication that is covered.

You can find out if your drug has any additional requirements or limits by looking in the formulary that begins on page 1. 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 cover.

Your prescriber can ask us to make an exception to these restrictions or limits or for a list of other, similar drugs that may treat your health condition. See the section "How do I request an exception to the formulary?" 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 Customer Service and ask if your drug is covered.

If you learn that our plan does not cover your drug, you have two options:

- Your prescriber can ask Customer Service for a list of similar drugs that are covered by our plan. When you receive the list, show it to your doctor and ask him or her to prescribe a similar drug that is covered by our plan.

- Your prescriber can ask us to make an exception and cover your drug. See below for information about how to request an exception.

How do I request an exception to the formulary?

Your prescriber can ask us to make an exception to our coverage rules by faxing a request to 844-611-3831. There are several types of exceptions that they can ask us to make.

- They 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.
- They can ask us to cover a formulary drug at a lower cost-sharing level if this drug is not on the specialty tier. If approved, this would lower the amount you must pay for your drug.
- They can ask us to waive coverage restrictions or limits on your drug. For example, for certain drugs, our plan limits the amount of the drug that we will cover. If your drug has a quantity limit, they can ask us to waive the limit and cover a greater amount.

Generally, we will only approve the request for an exception if the alternative drugs included on the plan's formulary, the lower cost-sharing drug or additional utilization restrictions would not be as effective in treating your condition and/or would cause you to have adverse medical effects.

We will make a coverage determination within 72 hours of receipt for standard requests and within 24 hours of receipt for expedited requests. Your provider can request an expedited (fast) exception if you or your doctor believe that your health could be seriously harmed by waiting up to 72 hours for a decision. If requested, we must give you a decision no later than 24 hours after receipt of request.

For more information

For more detailed information about your prescription drug coverage, please review your member materials.

If you have questions about our plan, please contact us. Our contact information, along with the date we last updated the formulary, appears on the front cover.

Formulary

The formulary below provides coverage information about the drugs covered by our plan. If you have trouble finding your drug in the list, turn to the index.

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

The information in the notes column tells you if our plan has any special requirements for coverage of your drug.

List of abbreviations

EA: Each.

PA: Prior authorization. Our plan requires you (or your physician) to get prior authorization for certain drugs. This means that you will need to get approval from our plan before you fill your prescriptions. If you don't get approval, we may not cover the drug.

QL: Quantity limit. For certain drugs, our plan limits the amount of the drug that we will cover. For example, our plan provides 60 capsules per 30 days for Omeprazole Capsules. This may be in addition to a standard one month or three-month supply.

ST: Step therapy. In some cases, our plan 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, we may not cover drug B unless you try drug A first. If drug A does not work for you, we will then cover drug B.

Opioid limits:

All opioid: Maximum of two fills in a 60-day period.

Opioid anti-tussive limits:

- Liquids:
 - Maximum of 240ML per fill.
- Tablets/capsules:
 - Maximum seven-day supply per fill.

Short-acting opioid (SAO) limits:

- New to therapy:
 - Maximum of 49 MED.
 - Maximum seven-day supply per fill.
- Experience with therapy:
 - Maximum of 90 MED.

Long-acting opioid limits:

- PA required.
- Maximum of 90 MED.

Table of Contents

Adhd/Anti-Narcolepsy/Anti-Obesity/Anorexiant	8
Allergenic Extracts/Biologicals Misc	9
Aminoglycosides	9
Analgesics - Anti-Inflammatory	10
Analgesics - Nonnarcotic	12
Analgesics - Opioid	15
Androgens-Anabolic	20
Anorectal And Related Products	21
Anthelmintics	21
Antianginal Agents	21
Antianxiety Agents	22
Antiarrhythmics	23
Antiasthmatic And Bronchodilator Agents	23
Anticoagulants	26
Anticonvulsants	27
Antidepressants	29
Antidiabetics	32
Antidiarrheal/Probiotic Agents	37
Antidotes And Specific Antagonists	37
Antiemetics	37
Antifungals	38
Antihistamines	38
Antihyperlipidemics	39
Antihypertensives	40
Anti-Infective Agents - Misc.	42
Antimalarials	44
Antimyasthenic/Cholinergic Agents	44
Antimycobacterial Agents	44
Antineoplastics And Adjunctive Therapies	44
Antiparkinson And Related Therapy Agents	50
Antipsychotics/Antimanic Agents	51
Antivirals	53
Beta Blockers	57
Calcium Channel Blockers	58
Cardiotonics	59
Cardiovascular Agents - Misc.	59
Cephalosporins	60
Contraceptives	61
Corticosteroids	73
Cough/Cold/Allergy	74
Dermatologicals	76
Diagnostic Products	81
Dietary Products/Dietary Management Products	90
Digestive Aids	90
Diuretics	91
Endocrine And Metabolic Agents - Misc.	92
Estrogens	94
Fluoroquinolones	95
Gastrointestinal Agents - Misc.	95
Genitourinary Agents - Miscellaneous	97

Gout Agents	97
Hematological Agents - Misc.	98
Hematopoietic Agents	98
Hypnotics/Sedatives/Sleep Disorder Agents	100
Laxatives	100
Macrolides	101
Medical Devices And Supplies	102
Migraine Products	149
Minerals & Electrolytes	150
Miscellaneous Therapeutic Classes	151
Mouth/Throat/Dental Agents	153
Multivitamins	153
Musculoskeletal Therapy Agents	159
Nasal Agents - Systemic And Topical	160
Neuromuscular Agents	161
Ophthalmic Agents	161
Otic Agents	165
Oxytocics	165
Passive Immunizing And Treatment Agents	165
Penicillins	165
Pharmaceutical Adjuvants	166
Progestins	166
Psychotherapeutic And Neurological Agents - Misc.	167
Respiratory Agents - Misc.	171
Tetracyclines	172
Thyroid Agents	172
Toxoids	173
Ulcer Drugs/Antispasmodics/Anticholinergics	173
Urinary Antispasmodics	175
Vaccines	176
Vaginal And Related Products	177
Vasopressors	178
Vitamins	178

Drug Name	Brand Tier	Generic Tier	Formulary Notes
Adhd/Anti-Narcolepsy/Anti-Obesity/Anorexiant			
*Adhd Agent - Selective Norepinephrine Reuptake Inhibitor***			
ATOMOXETINE HCL ORAL CAPSULE 10 MG, 100 MG, 18 MG, 25 MG, 40 MG, 60 MG, 80 MG		Tier 3	
*Amphetamine Mixtures***			
AMPHETAMINE-DEXTROAMPHET ER ORAL CAPSULE EXTENDED RELEASE 24 HOUR 10 MG, 15 MG, 20 MG, 25 MG, 30 MG, 5 MG		Tier 3	
AMPHETAMINE-DEXTROAMPHETAMINE ORAL TABLET 10 MG, 12.5 MG, 15 MG, 20 MG, 30 MG, 5 MG, 7.5 MG		Tier 3	
*Amphetamines***			
DEXTROAMPHETAMINE SULFATE ER ORAL CAPSULE EXTENDED RELEASE 24 HOUR 10 MG, 15 MG, 5 MG		Tier 3	
DEXTROAMPHETAMINE SULFATE ORAL TABLET 10 MG, 15 MG, 20 MG, 30 MG, 5 MG		Tier 3	
VYVANSE ORAL CAPSULE 10 MG, 20 MG, 30 MG, 40 MG, 50 MG, 60 MG, 70 MG	Tier 5		
*Stimulants - Misc.***			
DEXMETHYLPHENIDATE HCL ER ORAL CAPSULE EXTENDED RELEASE 24 HOUR 10 MG, 15 MG, 20 MG, 25 MG, 30 MG, 35 MG, 40 MG, 5 MG		Tier 3	
DEXMETHYLPHENIDATE HCL ORAL TABLET 10 MG, 2.5 MG, 5 MG		Tier 3	
METHYLPHENIDATE HCL ER (CD) ORAL CAPSULE EXTENDED RELEASE 10 MG, 20 MG, 30 MG, 40 MG, 50 MG, 60 MG		Tier 3	
METHYLPHENIDATE HCL ER (LA) ORAL CAPSULE EXTENDED RELEASE 24 HOUR 10 MG, 20 MG, 30 MG, 40 MG		Tier 3	
METHYLPHENIDATE HCL ER ORAL TABLET EXTENDED RELEASE 10 MG, 18 MG, 20 MG, 27 MG, 36 MG, 54 MG		Tier 3	
METHYLPHENIDATE HCL ER ORAL TABLET EXTENDED RELEASE 24 HOUR 18 MG, 27 MG, 36 MG, 54 MG		Tier 3	

Drug Name	Brand Tier	Generic Tier	Formulary Notes
METHYLPHENIDATE HCL ORAL SOLUTION 10 MG/5ML, 5 MG/5ML		Tier 3	PA
METHYLPHENIDATE HCL ORAL TABLET 10 MG, 20 MG, 5 MG		Tier 3	
METHYLPHENIDATE HCL ORAL TABLET CHEWABLE 10 MG, 5 MG		Tier 3	PA
MODAFINIL ORAL TABLET 100 MG, 200 MG		Tier 3	QL (30 EA per 30 days)
Allergenic Extracts/Biologicals Misc			
*Allergenic Extracts***			
GRASTEK SUBLINGUAL TABLET SUBLINGUAL 2800 BAU	Tier 5		PA
PALFORZIA (12 MG DAILY DOSE) ORAL 2 X 1 MG & 10 MG	Tier 6		PA
PALFORZIA (120 MG DAILY DOSE) ORAL 20 MG & 100 MG	Tier 6		PA
PALFORZIA (160 MG DAILY DOSE) ORAL 3 X 20 MG & 100 MG	Tier 6		PA
PALFORZIA (20 MG DAILY DOSE) ORAL 20 MG	Tier 6		PA
PALFORZIA (200 MG DAILY DOSE) ORAL 2 X 100 MG	Tier 6		PA
PALFORZIA (240 MG DAILY DOSE) ORAL 2 X 20 MG & 2 X 100 MG	Tier 6		PA
PALFORZIA (3 MG DAILY DOSE) ORAL 3 X 1 MG	Tier 6		PA
PALFORZIA (300 MG MAINTENANCE) ORAL PACKET 300 MG	Tier 6		PA
PALFORZIA (300 MG TITRATION) ORAL PACKET 300 MG	Tier 6		PA
PALFORZIA (40 MG DAILY DOSE) ORAL 2 X 20 MG	Tier 6		PA
PALFORZIA (6 MG DAILY DOSE) ORAL 6 X 1 MG	Tier 6		PA
PALFORZIA (80 MG DAILY DOSE) ORAL 4 X 20 MG	Tier 6		PA
PALFORZIA INITIAL ESCALATION ORAL 0.5 & 1 & 1.5 & 3 & 6 MG	Tier 6		PA
Aminoglycosides			
*Aminoglycosides***			
NEOMYCIN SULFATE ORAL TABLET 500 MG		Tier 3	

Drug Name	Brand Tier	Generic Tier	Formulary Notes
Analgesics - Anti-Inflammatory			
*Antirheumatic - Janus Kinase (Jak) Inhibitors***			
XELJANZ ORAL TABLET 5 MG	Tier 6		PA
XELJANZ XR ORAL TABLET EXTENDED RELEASE 24 HOUR 11 MG	Tier 6		PA
*Anti-Tnf-Alpha - Monoclonal Antibodies***			
HUMIRA PEDIATRIC CROHNS START SUBCUTANEOUS PREFILLED SYRINGE KIT 80 MG/0.8ML, 80 MG/0.8ML & 40MG/0.4ML	Tier 6		PA
HUMIRA PEN SUBCUTANEOUS PEN-INJECTOR KIT 40 MG/0.4ML, 40 MG/0.8ML, 80 MG/0.8ML	Tier 6		PA
HUMIRA PEN-CD/UC/HS STARTER SUBCUTANEOUS PEN-INJECTOR KIT 40 MG/0.8ML, 80 MG/0.8ML	Tier 6		PA
HUMIRA PEN-PEDIATRIC UC START SUBCUTANEOUS PEN-INJECTOR KIT 80 MG/0.8ML	Tier 6		PA
HUMIRA PEN-PS/UV/ADOL HS START SUBCUTANEOUS PEN-INJECTOR KIT 40 MG/0.8ML	Tier 6		PA
HUMIRA PEN-PSOR/UEVEIT STARTER SUBCUTANEOUS PEN-INJECTOR KIT 80 MG/0.8ML & 40MG/0.4ML	Tier 6		PA
HUMIRA SUBCUTANEOUS PREFILLED SYRINGE KIT 10 MG/0.1ML, 20 MG/0.2ML, 40 MG/0.4ML, 40 MG/0.8ML	Tier 6		PA
SIMPONI SUBCUTANEOUS SOLUTION AUTO-INJECTOR 100 MG/ML, 50 MG/0.5ML	Tier 6		PA
SIMPONI SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 100 MG/ML, 50 MG/0.5ML	Tier 6		PA
*Cyclooxygenase 2 (Cox-2) Inhibitors***			
CELECOXIB ORAL CAPSULE 100 MG, 200 MG, 400 MG, 50 MG		Tier 3	

Drug Name	Brand Tier	Generic Tier	Formulary Notes
*Nonsteroidal Anti-Inflammatory Agents (Nsaids)***			
DICLOFENAC POTASSIUM ORAL TABLET 50 MG		Tier 3	
DICLOFENAC SODIUM ER ORAL TABLET EXTENDED RELEASE 24 HOUR 100 MG		Tier 3	
DICLOFENAC SODIUM ORAL TABLET DELAYED RELEASE 25 MG, 50 MG, 75 MG		Tier 3	
EC-NAPROXEN ORAL TABLET DELAYED RELEASE 375 MG, 500 MG		Tier 3	
ETODOLAC ER ORAL TABLET EXTENDED RELEASE 24 HOUR 400 MG, 500 MG, 600 MG		Tier 3	
ETODOLAC ORAL CAPSULE 200 MG, 300 MG		Tier 3	
ETODOLAC ORAL TABLET 400 MG, 500 MG		Tier 3	
FLURBIPROFEN ORAL TABLET 100 MG, 50 MG		Tier 3	
IBU ORAL TABLET (IBUPROFEN) 400 MG, 600 MG, 800 MG	Tier 3	Tier 3	
INDOMETHACIN ER ORAL CAPSULE EXTENDED RELEASE 75 MG		Tier 3	
INDOMETHACIN ORAL CAPSULE 25 MG, 50 MG		Tier 3	
KETOPROFEN ORAL CAPSULE 50 MG, 75 MG		Tier 3	
KETOROLAC TROMETHAMINE INJECTION SOLUTION 15 MG/ML, 30 MG/ML		Tier 3	
KETOROLAC TROMETHAMINE ORAL TABLET 10 MG		Tier 3	
MELOXICAM ORAL TABLET 15 MG, 7.5 MG		Tier 3	
NABUMETONE ORAL TABLET 500 MG, 750 MG		Tier 3	
NAPROXEN ORAL TABLET 250 MG, 375 MG, 500 MG		Tier 3	
NAPROXEN ORAL TABLET DELAYED RELEASE 375 MG, 500 MG		Tier 3	
NAPROXEN SODIUM ORAL TABLET 275 MG, 550 MG		Tier 3	
OXAPROZIN ORAL TABLET 600 MG		Tier 3	
PIROXICAM ORAL CAPSULE 10 MG, 20 MG		Tier 3	
SULINDAC ORAL TABLET 150 MG, 200 MG		Tier 3	

Drug Name	Brand Tier	Generic Tier	Formulary Notes
*Phosphodiesterase 4 (Pde4) Inhibitors***			
OTEZLA ORAL TABLET 30 MG	Tier 6		PA
OTEZLA ORAL TABLET THERAPY PACK 10 & 20 & 30 MG	Tier 6		PA
*Pyrimidine Synthesis Inhibitors***			
LEFLUNOMIDE ORAL TABLET 10 MG, 20 MG		Tier 3	
*Selective Costimulation Modulators***			
ORENCIA CLICKJECT SUBCUTANEOUS SOLUTION AUTO-INJECTOR 125 MG/ML	Tier 6		PA
ORENCIA SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 125 MG/ML	Tier 6		PA
*Soluble Tumor Necrosis Factor Receptor Agents***			
ENBREL SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 25 MG/0.5ML, 50 MG/ML	Tier 6		PA
ENBREL SUBCUTANEOUS SOLUTION RECONSTITUTED 25 MG	Tier 6		PA
ENBREL SURECLICK SUBCUTANEOUS SOLUTION AUTO-INJECTOR 50 MG/ML	Tier 6		PA
Analgesics - Nonnarcotic			
*Analgesics-Sedatives***			
BAC ORAL TABLET (BUTALBITAL-APAP-CAFFEINE) 50-325-40 MG	Tier 3	Tier 3	
BUTALBITAL-APAP-CAFFEINE ORAL CAPSULE 50-325-40 MG		Tier 3	
BUTALBITAL-ASPIRIN-CAFFEINE ORAL CAPSULE 50-325-40 MG		Tier 3	
TENCON ORAL TABLET (BUTALBITAL-ACETAMINOPHEN) 50-325 MG	Tier 4	Tier 3	
*Salicylates***			
ADULT ASPIRIN REGIMEN ORAL TABLET DELAYED RELEASE 81 MG		Tier 1	
ASPIRIN 81 ORAL TABLET CHEWABLE 81 MG		Tier 1	
ASPIRIN ADULT LOW DOSE ORAL TABLET DELAYED RELEASE 81 MG		Tier 1	
ASPIRIN ADULT LOW STRENGTH ORAL TABLET DELAYED RELEASE 81 MG		Tier 1	

Drug Name	Brand Tier	Generic Tier	Formulary Notes
ASPIRIN CHILDRENS ORAL TABLET CHEWABLE 81 MG		Tier 1	
ASPIRIN EC ADULT LOW STRENGTH ORAL TABLET DELAYED RELEASE 81 MG		Tier 1	
ASPIRIN EC LOW DOSE ORAL TABLET DELAYED RELEASE 81 MG		Tier 1	
ASPIRIN EC LOW STRENGTH ORAL TABLET DELAYED RELEASE 81 MG		Tier 1	
ASPIRIN EC ORAL TABLET DELAYED RELEASE 81 MG		Tier 1	
ASPIRIN LOW DOSE ORAL TABLET CHEWABLE 81 MG		Tier 1	
ASPIRIN LOW DOSE ORAL TABLET DELAYED RELEASE 81 MG		Tier 1	
ASPIRIN LOW STRENGTH ORAL TABLET CHEWABLE 81 MG		Tier 1	
BAYER ASPIRIN EC LOW DOSE ORAL TABLET DELAYED RELEASE (ASPIRIN) 81 MG	Tier 1	Tier 1	
BAYER LOW DOSE ORAL TABLET CHEWABLE (ASPIRIN) 81 MG	Tier 1	Tier 1	
BAYER LOW DOSE ORAL TABLET DELAYED RELEASE (ASPIRIN) 81 MG	Tier 1	Tier 1	
CHILDRENS ASPIRIN ORAL TABLET CHEWABLE 81 MG		Tier 1	
CVS ASPIRIN ADULT LOW DOSE ORAL TABLET CHEWABLE 81 MG		Tier 1	
CVS ASPIRIN ADULT LOW STRENGTH ORAL TABLET DELAYED RELEASE 81 MG		Tier 1	
CVS ASPIRIN EC ORAL TABLET DELAYED RELEASE 81 MG		Tier 1	
CVS ASPIRIN LOW DOSE ORAL TABLET DELAYED RELEASE 81 MG		Tier 1	
CVS ASPIRIN LOW STRENGTH ORAL TABLET DELAYED RELEASE 81 MG		Tier 1	
DIFLUNISAL ORAL TABLET 500 MG		Tier 3	
ECOTRIN LOW STRENGTH ORAL TABLET DELAYED RELEASE (ASPIRIN) 81 MG	Tier 1	Tier 1	
EQ ASPIRIN ADULT LOW DOSE ORAL TABLET DELAYED RELEASE 81 MG		Tier 1	
EQ ASPIRIN LOW DOSE ORAL TABLET CHEWABLE 81 MG		Tier 1	

Drug Name	Brand Tier	Generic Tier	Formulary Notes
EQL ASPIRIN LOW DOSE ORAL TABLET CHEWABLE 81 MG		Tier 1	
EQL ASPIRIN LOW DOSE ORAL TABLET DELAYED RELEASE 81 MG		Tier 1	
GNP ADULT ASPIRIN LOW STRENGTH ORAL TABLET CHEWABLE 81 MG		Tier 1	
GNP ASPIRIN LOW DOSE ORAL TABLET DELAYED RELEASE 81 MG		Tier 1	
GNP ASPIRIN ORAL TABLET DELAYED RELEASE 81 MG		Tier 1	
GOODSENSE ASPIRIN ADULT LOW ST ORAL TABLET CHEWABLE 81 MG		Tier 1	
GOODSENSE ASPIRIN LOW DOSE ORAL TABLET DELAYED RELEASE 81 MG		Tier 1	
GOODSENSE ASPIRIN ORAL TABLET CHEWABLE 81 MG		Tier 1	
H-E-B ASPIRIN ORAL TABLET DELAYED RELEASE 81 MG		Tier 1	
HM ASPIRIN EC LOW DOSE ORAL TABLET DELAYED RELEASE 81 MG		Tier 1	
HM ASPIRIN ORAL TABLET CHEWABLE 81 MG		Tier 1	
KLS ASPIRIN LOW DOSE ORAL TABLET DELAYED RELEASE 81 MG		Tier 1	
KP ASPIRIN ORAL TABLET DELAYED RELEASE 81 MG		Tier 1	
PX ASPIRIN ORAL TABLET CHEWABLE 81 MG		Tier 1	
PX ENTERIC ASPIRIN ORAL TABLET DELAYED RELEASE 81 MG		Tier 1	
QC ASPIRIN LOW DOSE ORAL TABLET CHEWABLE 81 MG		Tier 1	
QC ASPIRIN LOW DOSE ORAL TABLET DELAYED RELEASE 81 MG		Tier 1	
QC CHILDRENS ASPIRIN ORAL TABLET CHEWABLE 81 MG		Tier 1	
RA ASPIRIN ADULT LOW DOSE ORAL TABLET CHEWABLE 81 MG		Tier 1	
RA ASPIRIN ADULT LOW STRENGTH ORAL TABLET CHEWABLE 81 MG		Tier 1	
RA ASPIRIN CHILDRENS ORAL TABLET CHEWABLE 81 MG		Tier 1	

Drug Name	Brand Tier	Generic Tier	Formulary Notes
RA ASPIRIN EC ADULT LOW ST ORAL TABLET DELAYED RELEASE 81 MG		Tier 1	
RA ASPIRIN EC ORAL TABLET DELAYED RELEASE 81 MG		Tier 1	
SB CHILDRENS ASPIRIN ORAL TABLET CHEWABLE 81 MG		Tier 1	
SB LOW DOSE ASA EC ORAL TABLET DELAYED RELEASE 81 MG		Tier 1	
SM ASPIRIN ADULT LOW STRENGTH ORAL TABLET CHEWABLE 81 MG		Tier 1	
SM ASPIRIN ADULT LOW STRENGTH ORAL TABLET DELAYED RELEASE 81 MG		Tier 1	
SM ASPIRIN EC LOW STRENGTH ORAL TABLET DELAYED RELEASE 81 MG		Tier 1	
SM ASPIRIN LOW DOSE ORAL TABLET CHEWABLE 81 MG		Tier 1	
SM CHILDRENS ASPIRIN ORAL TABLET CHEWABLE 81 MG		Tier 1	
ST JOSEPH ASPIRIN ORAL TABLET DELAYED RELEASE (ASPIRIN) 81 MG	Tier 1	Tier 1	
ST JOSEPH LOW DOSE ORAL TABLET CHEWABLE (ASPIRIN) 81 MG	Tier 1	Tier 1	
ST JOSEPH LOW DOSE ORAL TABLET DELAYED RELEASE (ASPIRIN) 81 MG	Tier 1	Tier 1	
Analgesics - Opioid			
*Codeine Combinations***			
ACETAMINOPHEN-CODEINE #2 ORAL TABLET 300-15 MG		Tier 3	QL (13 EA per 1 day)
ACETAMINOPHEN-CODEINE #3 ORAL TABLET 300-30 MG		Tier 3	QL (10 EA per 1 day)
ACETAMINOPHEN-CODEINE #4 ORAL TABLET 300-60 MG		Tier 3	QL (10 EA per 1 day)
ACETAMINOPHEN-CODEINE ORAL SOLUTION 120-12 MG/5ML		Tier 3	QL (136 ML per 1 day)
ACETAMINOPHEN-CODEINE TABLET 300-15 MG ORAL 300-15 MG		Tier 3	QL (13 EA per 1 day)
ACETAMINOPHEN-CODEINE TABLET 300-30 MG ORAL 300-30 MG		Tier 3	QL (10 EA per 1 day)
ACETAMINOPHEN-CODEINE TABLET 300-60 MG ORAL 300-60 MG		Tier 3	QL (10 EA per 1 day)
BUTALBITAL-APAP-CAFF-COD ORAL CAPSULE 50-325-40-30 MG		Tier 3	

Drug Name	Brand Tier	Generic Tier	Formulary Notes
BUTALBITAL-ASA-CAFF-CODEINE ORAL CAPSULE 50-325-40-30 MG		Tier 3	
*Dihydrocodeine Combinations***			
APAP-CAFF-DIHYDROCODEINE ORAL CAPSULE 320.5-30-16 MG		Tier 3	QL (12 EA per 1 day)
*Hydrocodone Combinations***			
HYDROCODONE-ACETAMINOPHEN SOLUTION 10-325 MG/15ML ORAL 10-325 MG/15ML		Tier 3	QL (73.5 ML per 1 day)
HYDROCODONE-ACETAMINOPHEN SOLUTION 2.5-108 MG/5ML ORAL 2.5-108 MG/5ML		Tier 3	QL (98 ML per 1 day)
HYDROCODONE-ACETAMINOPHEN SOLUTION 5-217 MG/10ML ORAL 5-217 MG/10ML		Tier 3	QL (98 ML per 1 day)
HYDROCODONE-ACETAMINOPHEN SOLUTION 7.5-325 MG/15ML ORAL 7.5-325 MG/15ML		Tier 3	QL (98 ML per 1 day)
HYDROCODONE-ACETAMINOPHEN TABLET 10-300 MG ORAL 10-300 MG		Tier 3	QL (4 EA per 1 day)
HYDROCODONE-ACETAMINOPHEN TABLET 10-325 MG ORAL 10-325 MG		Tier 3	QL (4 EA per 1 day)
HYDROCODONE-ACETAMINOPHEN TABLET 5-300 MG ORAL 5-300 MG		Tier 3	QL (9 EA per 1 day)
HYDROCODONE-ACETAMINOPHEN TABLET 5-325 MG ORAL 5-325 MG		Tier 3	QL (9 EA per 1 day)
HYDROCODONE-ACETAMINOPHEN TABLET 7.5-300 MG ORAL 7.5-300 MG		Tier 3	QL (6 EA per 1 day)
HYDROCODONE-ACETAMINOPHEN TABLET 7.5-325 MG ORAL 7.5-325 MG		Tier 3	QL (6 EA per 1 day)
HYDROCODONE-IBUPROFEN TABLET 10-200 MG ORAL 10-200 MG		Tier 3	QL (4 EA per 1 day)
HYDROCODONE-IBUPROFEN TABLET 5-200 MG ORAL 5-200 MG		Tier 3	QL (9 EA per 1 day)
HYDROCODONE-IBUPROFEN TABLET 7.5-200 MG ORAL 7.5-200 MG		Tier 3	QL (6 EA per 1 day)
LORTAB ORAL ELIXIR 10-300 MG/15ML	Tier 5		QL (73.5 ML per 1 day)
*Opioid Agonists***			
CODEINE SULFATE TABLET 15 MG ORAL 15 MG		Tier 3	QL (21 EA per 1 day)
CODEINE SULFATE TABLET 30 MG ORAL 30 MG		Tier 3	QL (10 EA per 1 day)

Drug Name	Brand Tier	Generic Tier	Formulary Notes
CODEINE SULFATE TABLET 60 MG ORAL 60 MG		Tier 3	QL (5 EA per 1 day)
FENTANYL CITRATE INJECTION SOLUTION PREFILLED SYRINGE 100 MCG/2ML		Tier 3	
FENTANYL PATCH 72 HOUR 100 MCG/HR TRANSDERMAL 100 MCG/HR		Tier 3	PA; QL (1 EA per 1 day)
FENTANYL PATCH 72 HOUR 12 MCG/HR TRANSDERMAL 12 MCG/HR		Tier 3	PA; QL (0.5 EA per 1 day)
FENTANYL PATCH 72 HOUR 25 MCG/HR TRANSDERMAL 25 MCG/HR		Tier 3	PA; QL (0.5 EA per 1 day)
FENTANYL PATCH 72 HOUR 37.5 MCG/HR TRANSDERMAL 37.5 MCG/HR		Tier 3	PA; QL (0.5 EA per 1 day)
FENTANYL PATCH 72 HOUR 50 MCG/HR TRANSDERMAL 50 MCG/HR		Tier 3	PA; QL (0.5 EA per 1 day)
FENTANYL PATCH 72 HOUR 62.5 MCG/HR TRANSDERMAL 62.5 MCG/HR		Tier 3	PA; QL (0.5 EA per 1 day)
FENTANYL PATCH 72 HOUR 75 MCG/HR TRANSDERMAL 75 MCG/HR		Tier 3	PA; QL (1 EA per 1 day)
FENTANYL PATCH 72 HOUR 87.5 MCG/HR TRANSDERMAL 87.5 MCG/HR		Tier 3	PA; QL (0.5 EA per 1 day)
HYDROCODONE BITARTRATE ER ORAL TABLET ER 24 HOUR ABUSE-DETERRENT 100 MG, 120 MG, 20 MG, 30 MG, 40 MG, 60 MG, 80 MG		Tier 3	PA; QL (1 EA per 1 day)
HYDROMORPHONE HCL ER ORAL TABLET EXTENDED RELEASE 24 HOUR 12 MG, 16 MG, 32 MG, 8 MG		Tier 3	PA; QL (2 EA per 1 day)
HYDROMORPHONE HCL ORAL LIQUID 1 MG/ML		Tier 3	QL (12.25 ML per 1 day)
HYDROMORPHONE HCL PF INJECTION SOLUTION 1 MG/ML		Tier 3	
HYDROMORPHONE HCL TABLET 2 MG ORAL 2 MG		Tier 3	QL (6 EA per 1 day)
HYDROMORPHONE HCL TABLET 4 MG ORAL 4 MG		Tier 3	QL (3 EA per 1 day)
HYDROMORPHONE HCL TABLET 8 MG ORAL 8 MG		Tier 3	QL (1 EA per 1 day)
MEPERIDINE HCL ORAL SOLUTION 50 MG/5ML		Tier 3	QL (49 ML per 1 day)
METHADONE HCL ORAL TABLET 10 MG, 5 MG		Tier 3	PA

Drug Name	Brand Tier	Generic Tier	Formulary Notes
MORPHINE SULFATE (CONCENTRATE) ORAL SOLUTION 100 MG/5ML, 20 MG/ML		Tier 3	QL (2.4 ML per 1 day)
MORPHINE SULFATE ER BEADS CAPSULE EXTENDED RELEASE 24 HOUR 120 MG ORAL 120 MG		Tier 3	PA; QL (2 EA per 1 day)
MORPHINE SULFATE ER BEADS CAPSULE EXTENDED RELEASE 24 HOUR 30 MG ORAL 30 MG		Tier 3	PA; QL (1 EA per 1 day)
MORPHINE SULFATE ER BEADS CAPSULE EXTENDED RELEASE 24 HOUR 45 MG ORAL 45 MG		Tier 3	PA; QL (1 EA per 1 day)
MORPHINE SULFATE ER BEADS CAPSULE EXTENDED RELEASE 24 HOUR 60 MG ORAL 60 MG		Tier 3	PA; QL (1 EA per 1 day)
MORPHINE SULFATE ER BEADS CAPSULE EXTENDED RELEASE 24 HOUR 75 MG ORAL 75 MG		Tier 3	PA; QL (1 EA per 1 day)
MORPHINE SULFATE ER BEADS CAPSULE EXTENDED RELEASE 24 HOUR 90 MG ORAL 90 MG		Tier 3	PA; QL (1 EA per 1 day)
MORPHINE SULFATE ER ORAL CAPSULE EXTENDED RELEASE 24 HOUR 10 MG, 100 MG, 20 MG, 30 MG, 50 MG, 60 MG, 80 MG		Tier 3	PA; QL (2 EA per 1 day)
MORPHINE SULFATE ER ORAL TABLET EXTENDED RELEASE 100 MG, 15 MG, 200 MG, 30 MG, 60 MG		Tier 3	PA; QL (3 EA per 1 day)
MORPHINE SULFATE SOLUTION 10 MG/5ML ORAL 10 MG/5ML		Tier 3	QL (24.5 ML per 1 day)
MORPHINE SULFATE SOLUTION 20 MG/5ML ORAL 20 MG/5ML		Tier 3	QL (12.25 ML per 1 day)
MORPHINE SULFATE TABLET 15 MG ORAL 15 MG		Tier 3	QL (3 EA per 1 day)
MORPHINE SULFATE TABLET 30 MG ORAL 30 MG		Tier 3	QL (1 EA per 1 day)
NUCYNTA ER ORAL TABLET EXTENDED RELEASE 12 HOUR 100 MG, 150 MG, 200 MG, 250 MG, 50 MG	Tier 4		PA; QL (2 EA per 1 day)
NUCYNTA TABLET 100 MG ORAL 100 MG	Tier 4		QL (1 EA per 1 day)
NUCYNTA TABLET 50 MG ORAL 50 MG	Tier 4		QL (2 EA per 1 day)
NUCYNTA TABLET 75 MG ORAL 75 MG	Tier 4		QL (1 EA per 1 day)
OXYCODONE HCL ORAL CAPSULE 5 MG		Tier 3	QL (6 EA per 1 day)
OXYCODONE HCL ORAL CONCENTRATE 100 MG/5ML		Tier 3	QL (1.6 ML per 1 day)

Drug Name	Brand Tier	Generic Tier	Formulary Notes
OXYCODONE HCL ORAL SOLUTION 5 MG/5ML		Tier 3	QL (32.6 ML per 1 day)
OXYCODONE HCL TABLET 10 MG ORAL 10 MG		Tier 3	QL (3 EA per 1 day)
OXYCODONE HCL TABLET 15 MG ORAL 15 MG		Tier 3	QL (2 EA per 1 day)
OXYCODONE HCL TABLET 20 MG ORAL 20 MG		Tier 3	QL (1 EA per 1 day)
OXYCODONE HCL TABLET 30 MG ORAL 30 MG		Tier 3	QL (1 EA per 1 day)
OXYCODONE HCL TABLET 5 MG ORAL 5 MG		Tier 3	QL (6 EA per 1 day)
OXYCONTIN ORAL TABLET ER 12 HOUR ABUSE-DETERRENT (OXYCODONE HCL ER) 10 MG, 20 MG, 40 MG	Tier 4	Tier 4	PA; QL (4 EA per 1 day)
OXYCONTIN ORAL TABLET ER 12 HOUR ABUSE-DETERRENT (OXYCODONE HCL ER) 15 MG, 30 MG, 60 MG, 80 MG	Tier 4	Tier 4	PA; QL (4 EA per 1 day)
OXYMORPHONE HCL ER ORAL TABLET EXTENDED RELEASE 12 HOUR 10 MG, 15 MG, 20 MG, 30 MG, 40 MG, 5 MG, 7.5 MG		Tier 3	PA; QL (4 EA per 1 day)
OXYMORPHONE HCL TABLET 10 MG ORAL 10 MG		Tier 3	QL (1 EA per 1 day)
OXYMORPHONE HCL TABLET 5 MG ORAL 5 MG		Tier 3	QL (3 EA per 1 day)
TRAMADOL HCL TABLET 100 MG ORAL 100 MG		Tier 3	QL (4 EA per 1 day)
TRAMADOL HCL TABLET 50 MG ORAL 50 MG		Tier 3	QL (8 EA per 1 day)
XTAMPZA ER ORAL CAPSULE ER 12 HOUR ABUSE-DETERRENT 13.5 MG, 18 MG, 27 MG, 36 MG, 9 MG	Tier 4		PA; QL (4 EA per 1 day)
*Opioid Combinations***			
ENDOCET TABLET 10-325 MG ORAL (OXYCODONE-ACETAMINOPHEN) 10-325 MG	Tier 3	Tier 3	QL (3 EA per 1 day)
ENDOCET TABLET 2.5-325 MG ORAL (OXYCODONE-ACETAMINOPHEN) 2.5-325 MG	Tier 3	Tier 3	QL (12 EA per 1 day)
ENDOCET TABLET 5-325 MG ORAL (OXYCODONE-ACETAMINOPHEN) 5-325 MG	Tier 3	Tier 3	QL (6 EA per 1 day)

Drug Name	Brand Tier	Generic Tier	Formulary Notes
ENDOCET TABLET 7.5-325 MG ORAL (OXYCODONE-ACETAMINOPHEN) 7.5-325 MG	Tier 3	Tier 3	QL (4 EA per 1 day)
*Opioid Partial Agonists***			
BELBUCA BUCCAL FILM 150 MCG, 300 MCG, 450 MCG, 600 MCG, 75 MCG, 750 MCG, 900 MCG	Tier 4		PA; QL (2 EA per 1 day)
BUPRENORPHINE HCL SUBLINGUAL TABLET SUBLINGUAL 2 MG, 8 MG		Tier 3	
BUPRENORPHINE HCL-NALOXONE HCL SUBLINGUAL FILM 12-3 MG, 2-0.5 MG, 4-1 MG, 8-2 MG		Tier 3	QL (90 EA per 30 days)
BUPRENORPHINE TRANSDERMAL PATCH WEEKLY 10 MCG/HR, 15 MCG/HR, 20 MCG/HR, 5 MCG/HR, 7.5 MCG/HR		Tier 3	PA; QL (0.15 EA per 1 day)
BUTORPHANOL TARTRATE NASAL SOLUTION 10 MG/ML		Tier 3	QL (2.5 ML per 1 day)
PENTAZOCINE-NALOXONE HCL ORAL TABLET 50-0.5 MG		Tier 3	QL (5 EA per 1 day)
ZUBSOLV SUBLINGUAL TABLET SUBLINGUAL 0.7-0.18 MG, 1.4-0.36 MG, 11.4-2.9 MG, 2.9-0.71 MG, 5.7-1.4 MG, 8.6-2.1 MG	Tier 4		
*Tramadol Combinations***			
TRAMADOL-ACETAMINOPHEN ORAL TABLET 37.5-325 MG		Tier 3	QL (8 EA per 1 day)
Androgens-Anabolic			
*Androgens***			
DANAZOL ORAL CAPSULE 200 MG		Tier 3	
TESTOSTERONE CYPIONATE INTRAMUSCULAR SOLUTION 100 MG/ML, 200 MG/ML		Tier 3	
TESTOSTERONE ENANTHATE INTRAMUSCULAR SOLUTION 200 MG/ML		Tier 3	
TESTOSTERONE GEL 12.5 MG/ACT (1%) TRANSDERMAL 12.5 MG/ACT (1%)		Tier 3	ST
TESTOSTERONE GEL 25 MG/2.5GM (1%) TRANSDERMAL 25 MG/2.5GM (1%)		Tier 3	
TESTOSTERONE GEL 40.5 MG/2.5GM (1.62%) TRANSDERMAL 40.5 MG/2.5GM (1.62%)		Tier 3	ST

Drug Name	Brand Tier	Generic Tier	Formulary Notes
TESTOSTERONE GEL 50 MG/5GM (1%) TRANSDERMAL 50 MG/5GM (1%)		Tier 3	ST
Anorectal And Related Products			
*Intrarectal Steroids***			
HYDROCORTISONE RECTAL ENEMA 100 MG/60ML		Tier 3	
*Rectal Anesthetic/Steroids***			
HYDROCORTISONE ACE-PRAMOXINE EXTERNAL CREAM 1-1 %		Tier 3	
*Rectal Steroids***			
PROCTO-MED HC EXTERNAL CREAM (HYDROCORTISONE (PERIANAL)) 2.5 %	Tier 3	Tier 3	
PROCTOSOL HC EXTERNAL CREAM (HYDROCORTISONE (PERIANAL)) 2.5 %	Tier 3	Tier 3	
PROCTOZONE-HC EXTERNAL CREAM (HYDROCORTISONE (PERIANAL)) 2.5 %	Tier 3	Tier 3	
Anthelmintics			
*Anthelmintics***			
EMVERM ORAL TABLET CHEWABLE 100 MG	Tier 5		
IVERMECTIN ORAL TABLET 3 MG		Tier 3	PA
Antianginal Agents			
*Antianginals-Other***			
RANOLAZINE ER ORAL TABLET EXTENDED RELEASE 12 HOUR 1000 MG, 500 MG		Tier 3	PA
*Nitrates***			
ISOSORBIDE DINITRATE ORAL TABLET 10 MG, 20 MG, 30 MG, 5 MG		Tier 3	
ISOSORBIDE MONONITRATE ER ORAL TABLET EXTENDED RELEASE 24 HOUR 120 MG, 30 MG, 60 MG		Tier 3	
ISOSORBIDE MONONITRATE ORAL TABLET 10 MG, 20 MG		Tier 3	
NITROGLYCERIN INTRAVENOUS SOLUTION 5 MG/ML		Tier 3	
NITROGLYCERIN SUBLINGUAL TABLET SUBLINGUAL 0.3 MG, 0.4 MG, 0.6 MG		Tier 3	

Drug Name	Brand Tier	Generic Tier	Formulary Notes
NITROGLYCERIN TRANSDERMAL PATCH 24 HOUR 0.1 MG/HR, 0.2 MG/HR, 0.4 MG/HR, 0.6 MG/HR		Tier 3	
NITROGLYCERIN TRANSLINGUAL SOLUTION 0.4 MG/SPRAY		Tier 3	
Antianxiety Agents			
*Antianxiety Agents - Misc.***			
BUSPIRONE HCL ORAL TABLET 10 MG, 15 MG, 30 MG, 5 MG, 7.5 MG		Tier 3	
HYDROXYZINE HCL ORAL SYRUP 10 MG/5ML		Tier 3	
HYDROXYZINE HCL ORAL TABLET 10 MG, 25 MG, 50 MG		Tier 3	
HYDROXYZINE PAMOATE ORAL CAPSULE 100 MG, 25 MG, 50 MG		Tier 3	
MEPROBAMATE ORAL TABLET 400 MG		Tier 3	
*Benzodiazepines***			
ALPRAZOLAM ER ORAL TABLET EXTENDED RELEASE 24 HOUR 0.5 MG, 1 MG, 2 MG, 3 MG		Tier 3	
ALPRAZOLAM INTENSOL ORAL CONCENTRATE 1 MG/ML	Tier 3		
ALPRAZOLAM ORAL TABLET 0.25 MG, 0.5 MG, 1 MG, 2 MG		Tier 3	
ALPRAZOLAM XR ORAL TABLET EXTENDED RELEASE 24 HOUR 0.5 MG, 1 MG, 2 MG, 3 MG		Tier 3	
CHLORDIAZEPOXIDE HCL ORAL CAPSULE 10 MG, 25 MG, 5 MG		Tier 3	
CLORAZEPATE DIPOTASSIUM ORAL TABLET 15 MG, 3.75 MG, 7.5 MG		Tier 3	
DIAZEPAM ORAL SOLUTION 5 MG/5ML		Tier 3	
DIAZEPAM ORAL TABLET 10 MG, 2 MG, 5 MG		Tier 3	
LORAZEPAM INTENSOL ORAL CONCENTRATE (LORAZEPAM) 2 MG/ML	Tier 3	Tier 3	
LORAZEPAM ORAL TABLET 0.5 MG, 1 MG, 2 MG		Tier 3	
OXAZEPAM ORAL CAPSULE 10 MG, 15 MG, 30 MG		Tier 3	

Drug Name	Brand Tier	Generic Tier	Formulary Notes
Antiarrhythmics			
*Antiarrhythmics Type I-A***			
DISOPYRAMIDE PHOSPHATE ORAL CAPSULE 150 MG		Tier 3	
QUINIDINE GLUCONATE ER ORAL TABLET EXTENDED RELEASE 324 MG		Tier 3	
QUINIDINE SULFATE ORAL TABLET 200 MG, 300 MG		Tier 3	
*Antiarrhythmics Type I-B***			
MEXILETINE HCL ORAL CAPSULE 150 MG, 200 MG		Tier 3	
*Antiarrhythmics Type I-C***			
FLECAINIDE ACETATE ORAL TABLET 100 MG, 150 MG, 50 MG		Tier 3	
PROPAFENONE HCL ORAL TABLET 150 MG, 225 MG		Tier 3	
*Antiarrhythmics Type Iii***			
AMIODARONE HCL ORAL TABLET 100 MG, 200 MG, 400 MG		Tier 3	
MULTAQ ORAL TABLET 400 MG	Tier 4		
Antiasthmatic And Bronchodilator Agents			
*Adrenergic Combinations***			
ADVAIR HFA INHALATION AEROSOL 115-21 MCG/ACT, 230-21 MCG/ACT, 45-21 MCG/ACT	Tier 3		QL (0.4 GM per 1 day)
ANORO ELLIPTA INHALATION AEROSOL POWDER BREATH ACTIVATED 62.5-25 MCG/INH	Tier 4		QL (1 EA per 30 days)
BREO ELLIPTA INHALATION AEROSOL POWDER BREATH ACTIVATED 100-25 MCG/INH, 200-25 MCG/INH	Tier 4		QL (1 EA per 30 days)
BUDESONIDE-FORMOTEROL FUMARATE INHALATION AEROSOL 160-4.5 MCG/ACT, 80-4.5 MCG/ACT		Tier 2	QL (10.2 GM per 30 days)
COMBIVENT RESPIMAT INHALATION AEROSOL SOLUTION 20-100 MCG/ACT	Tier 4		QL (4 GM per 30 days)
DULERA AEROSOL 100-5 MCG/ACT INHALATION 100-5 MCG/ACT	Tier 4		QL (1 GM per 30 days)
DULERA AEROSOL 200-5 MCG/ACT INHALATION 200-5 MCG/ACT	Tier 4		QL (1 GM per 30 days)

Drug Name	Brand Tier	Generic Tier	Formulary Notes
DULERA AEROSOL 50-5 MCG/ACT INHALATION 50-5 MCG/ACT	Tier 4		
IPRATROPIUM-ALBUTEROL INHALATION SOLUTION 0.5-2.5 (3) MG/3ML		Tier 3	QL (18 ML per 1 day)
TRELEGY ELLIPTA INHALATION AEROSOL POWDER BREATH ACTIVATED 100-62.5-25 MCG/INH, 200-62.5-25 MCG/INH	Tier 4		ST
WIXELA INHUB INHALATION AEROSOL POWDER BREATH ACTIVATED (FLUTICASONE-SALMETEROL) 100-50 MCG/DOSE, 250-50 MCG/DOSE, 500-50 MCG/DOSE	Tier 2	Tier 2	QL (1 EA per 30 days)
*Anti-Ige Monoclonal Antibodies***			
XOLAIR SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 150 MG/ML, 75 MG/0.5ML	Tier 6		PA
*Beta Adrenergics***			
ALBUTEROL SULFATE NEBULIZATION SOLUTION (2.5 MG/3ML) 0.083% INHALATION (2.5 MG/3ML) 0.083%		Tier 3	QL (18 ML per 1 day)
ALBUTEROL SULFATE NEBULIZATION SOLUTION (5 MG/ML) 0.5% INHALATION (5 MG/ML) 0.5%		Tier 3	
ALBUTEROL SULFATE NEBULIZATION SOLUTION 0.63 MG/3ML INHALATION 0.63 MG/3ML		Tier 3	QL (18 ML per 1 day)
ALBUTEROL SULFATE NEBULIZATION SOLUTION 1.25 MG/3ML INHALATION 1.25 MG/3ML		Tier 3	QL (18 ML per 1 day)
ALBUTEROL SULFATE NEBULIZATION SOLUTION 2.5 MG/0.5ML INHALATION 2.5 MG/0.5ML		Tier 3	
PROAIR HFA INHALATION AEROSOL SOLUTION (ALBUTEROL SULFATE HFA) 108 (90 BASE) MCG/ACT	Tier 4	Tier 2	QL (0.567 GM per 1 day)
PROVENTIL HFA AEROSOL SOLUTION 108 (90 BASE) MCG/ACT INHALATION (ALBUTEROL SULFATE HFA) 108 (90 BASE) MCG/ACT	Tier 4	Tier 2	
PROVENTIL HFA AEROSOL SOLUTION 108 (90 BASE) MCG/ACT INHALATION (ALBUTEROL SULFATE HFA) 108 (90 BASE) MCG/ACT	Tier 4	Tier 2	QL (0.447 GM per 1 day)

Drug Name	Brand Tier	Generic Tier	Formulary Notes
SEREVENT DISKUS INHALATION AEROSOL POWDER BREATH ACTIVATED 50 MCG/DOSE	Tier 4		QL (60 EA per 30 days)
TERBUTALINE SULFATE ORAL TABLET 2.5 MG, 5 MG		Tier 3	
VENTOLIN HFA AEROSOL SOLUTION 108 (90 BASE) MCG/ACT INHALATION (ALBUTEROL SULFATE HFA) 108 (90 BASE) MCG/ACT	Tier 4	Tier 2	QL (0.534 GM per 1 day)
VENTOLIN HFA AEROSOL SOLUTION 108 (90 BASE) MCG/ACT INHALATION (ALBUTEROL SULFATE HFA) 108 (90 BASE) MCG/ACT	Tier 4	Tier 2	QL (1.2 GM per 1 day)
XOPENEX HFA INHALATION AEROSOL (LEVALBUTEROL TARTRATE) 45 MCG/ACT	Tier 4	Tier 4	QL (2 GM per 30 days)
*Bronchodilators - Anticholinergics***			
ATROVENT HFA INHALATION AEROSOL SOLUTION 17 MCG/ACT	Tier 4		QL (2 GM per 30 days)
INCRUSE ELLIPTA INHALATION AEROSOL POWDER BREATH ACTIVATED 62.5 MCG/INH	Tier 4		QL (1 EA per 30 days)
SPIRIVA HANDIHALER INHALATION CAPSULE 18 MCG	Tier 4		QL (30 EA per 30 days)
*Leukotriene Receptor Antagonists***			
MONTELUKAST SODIUM ORAL PACKET 4 MG		Tier 3	
MONTELUKAST SODIUM ORAL TABLET 10 MG		Tier 3	
MONTELUKAST SODIUM ORAL TABLET CHEWABLE 4 MG, 5 MG		Tier 3	
*Selective Phosphodiesterase 4 (Pde4) Inhibitors***			
DALIRESP ORAL TABLET 250 MCG, 500 MCG	Tier 5		PA
*Steroid Inhalants***			
ASMANEX (120 METERED DOSES) INHALATION AEROSOL POWDER BREATH ACTIVATED 220 MCG/INH	Tier 4		QL (2 EA per 30 days)
ASMANEX (14 METERED DOSES) INHALATION AEROSOL POWDER BREATH ACTIVATED 220 MCG/INH	Tier 4		QL (2 EA per 30 days)

Drug Name	Brand Tier	Generic Tier	Formulary Notes
ASMANEX (30 METERED DOSES) INHALATION AEROSOL POWDER BREATH ACTIVATED 110 MCG/INH, 220 MCG/INH	Tier 4		QL (2 EA per 30 days)
ASMANEX (60 METERED DOSES) INHALATION AEROSOL POWDER BREATH ACTIVATED 220 MCG/INH	Tier 4		QL (2 EA per 30 days)
ASMANEX (7 METERED DOSES) INHALATION AEROSOL POWDER BREATH ACTIVATED 110 MCG/INH	Tier 4		QL (2 EA per 30 days)
ASMANEX HFA AEROSOL 100 MCG/ACT INHALATION 100 MCG/ACT	Tier 4		QL (2 GM per 30 days)
ASMANEX HFA AEROSOL 200 MCG/ACT INHALATION 200 MCG/ACT	Tier 4		QL (2 GM per 30 days)
ASMANEX HFA AEROSOL 50 MCG/ACT INHALATION 50 MCG/ACT	Tier 4		
BUDESONIDE SUSPENSION 0.25 MG/2ML INHALATION 0.25 MG/2ML		Tier 3	QL (8 ML per 1 day)
BUDESONIDE SUSPENSION 0.5 MG/2ML INHALATION 0.5 MG/2ML		Tier 3	QL (4 ML per 1 day)
BUDESONIDE SUSPENSION 1 MG/2ML INHALATION 1 MG/2ML		Tier 3	QL (2 ML per 1 day)
FLOVENT HFA AEROSOL 110 MCG/ACT INHALATION 110 MCG/ACT	Tier 2		QL (0.8 GM per 1 day)
FLOVENT HFA AEROSOL 220 MCG/ACT INHALATION 220 MCG/ACT	Tier 2		QL (0.8 GM per 1 day)
FLOVENT HFA AEROSOL 44 MCG/ACT INHALATION 44 MCG/ACT	Tier 2		QL (22 GM per 30 days)
PULMICORT FLEXHALER INHALATION AEROSOL POWDER BREATH ACTIVATED 180 MCG/ACT, 90 MCG/ACT	Tier 5		QL (1 EA per 30 days)
QVAR REDHALER INHALATION AEROSOL BREATH ACTIVATED 40 MCG/ACT, 80 MCG/ACT	Tier 2		QL (0.71 GM per 1 day)
*Xanthines***			
THEOPHYLLINE ER ORAL TABLET EXTENDED RELEASE 12 HOUR 300 MG, 450 MG		Tier 3	
Anticoagulants			
*Coumarin Anticoagulants***			
JANTOVEN ORAL TABLET (WARFARIN SODIUM) 1 MG, 10 MG, 2 MG, 2.5 MG, 3 MG, 4 MG, 5 MG, 6 MG, 7.5 MG	Tier 2	Tier 2	

Drug Name	Brand Tier	Generic Tier	Formulary Notes
*Direct Factor Xa Inhibitors***			
ELIQUIS DVT/PE STARTER PACK ORAL TABLET THERAPY PACK 5 MG	Tier 4		QL (3 EA per 1 day)
ELIQUIS TABLET 2.5 MG ORAL 2.5 MG	Tier 4		QL (2 EA per 1 day)
ELIQUIS TABLET 5 MG ORAL 5 MG	Tier 4		QL (3 EA per 1 day)
XARELTO TABLET 10 MG ORAL 10 MG	Tier 4		QL (1 EA per 1 day)
XARELTO TABLET 15 MG ORAL 15 MG	Tier 4		QL (2 EA per 1 day)
XARELTO TABLET 2.5 MG ORAL 2.5 MG	Tier 4		QL (2 EA per 1 day)
XARELTO TABLET 20 MG ORAL 20 MG	Tier 4		QL (1 EA per 1 day)
*Low Molecular Weight Heparins***			
ENOXAPARIN SODIUM INJECTION SOLUTION 300 MG/3ML		Tier 3	QL (35 ML per 180 days)
ENOXAPARIN SODIUM SUBCUTANEOUS SOLUTION 100 MG/ML, 120 MG/0.8ML, 150 MG/ML, 30 MG/0.3ML, 40 MG/0.4ML, 60 MG/0.6ML, 80 MG/0.8ML		Tier 3	QL (35 ML per 180 days)
FRAGMIN SUBCUTANEOUS SOLUTION 5000 UNIT/0.2ML	Tier 4		
*Thrombin Inhibitors - Selective Direct & Reversible***			
PRADAXA ORAL CAPSULE 110 MG	Tier 5		
Anticonvulsants			
*Anticonvulsants - Benzodiazepines***			
CLONAZEPAM ORAL TABLET 0.5 MG, 1 MG, 2 MG		Tier 3	
CLONAZEPAM ORAL TABLET DISPERSIBLE 0.125 MG, 0.25 MG, 0.5 MG, 1 MG, 2 MG		Tier 3	
DIAZEPAM RECTAL GEL 10 MG, 2.5 MG, 20 MG		Tier 3	
*Anticonvulsants - Misc.***			
CARBAMAZEPINE ER ORAL CAPSULE EXTENDED RELEASE 12 HOUR 100 MG, 200 MG, 300 MG		Tier 3	
CARBAMAZEPINE ER ORAL TABLET EXTENDED RELEASE 12 HOUR 100 MG, 200 MG, 400 MG		Tier 3	
CARBAMAZEPINE ORAL SUSPENSION 100 MG/5ML		Tier 3	
CARBAMAZEPINE ORAL TABLET CHEWABLE 100 MG		Tier 3	

Drug Name	Brand Tier	Generic Tier	Formulary Notes
EPITOL ORAL TABLET (CARBAMAZEPINE) 200 MG	Tier 3	Tier 3	
GABAPENTIN ORAL CAPSULE 100 MG, 300 MG, 400 MG		Tier 3	
GABAPENTIN ORAL TABLET 600 MG, 800 MG		Tier 3	
LAMICTAL STARTER ORAL KIT (LAMOTRIGINE STARTER KIT-BLUE) 35 X 25 MG	Tier 4	Tier 3	
LAMICTAL STARTER ORAL KIT (LAMOTRIGINE STARTER KIT-ORANGE) 42 X 25 MG & 7 X 100 MG	Tier 4	Tier 3	
LAMICTAL STARTER ORAL KIT (LAMOTRIGINE STARTER KIT-GREEN) 84 X 25 MG & 14X100 MG	Tier 4	Tier 3	
LAMOTRIGINE ORAL TABLET CHEWABLE 25 MG, 5 MG		Tier 3	
LEVETIRACETAM INTRAVENOUS SOLUTION 500 MG/5ML		Tier 3	
LEVETIRACETAM ORAL SOLUTION 100 MG/ML		Tier 3	
LEVETIRACETAM ORAL TABLET 1000 MG, 250 MG, 750 MG		Tier 3	
OXCARBAZEPINE ORAL SUSPENSION 300 MG/5ML		Tier 3	
OXCARBAZEPINE ORAL TABLET 150 MG, 300 MG, 600 MG		Tier 3	
PREGABALIN ORAL CAPSULE 100 MG, 150 MG, 200 MG, 225 MG, 25 MG, 300 MG, 50 MG, 75 MG		Tier 3	PA
PRIMIDONE ORAL TABLET 250 MG, 50 MG		Tier 3	
ROWEEPRA ORAL TABLET (LEVETIRACETAM) 500 MG	Tier 3	Tier 3	
SUBVENITE ORAL TABLET (LAMOTRIGINE) 100 MG, 150 MG, 25 MG	Tier 3	Tier 3	
SUBVENITE ORAL TABLET (LAMOTRIGINE) 200 MG	Tier 3	Tier 3	
SUBVENITE STARTER KIT-BLUE ORAL KIT (LAMOTRIGINE STARTER KIT-BLUE) 35 X 25 MG	Tier 3	Tier 3	
SUBVENITE STARTER KIT-GREEN ORAL KIT (LAMOTRIGINE STARTER KIT-GREEN) 84 X 25 MG & 14X100 MG	Tier 3	Tier 3	

Drug Name	Brand Tier	Generic Tier	Formulary Notes
SUBVENITE STARTER KIT-ORANGE ORAL KIT (LAMOTRIGINE STARTER KIT-ORANGE) 42 X 25 MG & 7 X 100 MG	Tier 3	Tier 3	
TOPIRAMATE ORAL CAPSULE SPRINKLE 15 MG, 25 MG		Tier 3	
TOPIRAMATE ORAL TABLET 100 MG, 200 MG, 25 MG, 50 MG		Tier 3	
ZONISAMIDE ORAL CAPSULE 100 MG, 25 MG, 50 MG		Tier 3	
*Gaba Modulators***			
TIAGABINE HCL ORAL TABLET 12 MG, 16 MG, 2 MG, 4 MG		Tier 3	
*Hydantoins***			
DILANTIN ORAL CAPSULE 30 MG	Tier 4		
PHENYTOIN INFATABS ORAL TABLET CHEWABLE (PHENYTOIN) 50 MG	Tier 3	Tier 3	
PHENYTOIN ORAL SUSPENSION 100 MG/4ML, 125 MG/5ML		Tier 3	
PHENYTOIN SODIUM EXTENDED ORAL CAPSULE 100 MG, 200 MG, 300 MG		Tier 3	
*Succinimides***			
ETHOSUXIMIDE ORAL CAPSULE 250 MG		Tier 3	
*Valproic Acid***			
DIVALPROEX SODIUM ER ORAL TABLET EXTENDED RELEASE 24 HOUR 250 MG, 500 MG		Tier 3	
DIVALPROEX SODIUM ORAL CAPSULE DELAYED RELEASE SPRINKLE 125 MG		Tier 3	
DIVALPROEX SODIUM ORAL TABLET DELAYED RELEASE 125 MG, 250 MG, 500 MG		Tier 3	
VALPROATE SODIUM INTRAVENOUS SOLUTION 100 MG/ML		Tier 3	
VALPROIC ACID ORAL CAPSULE 250 MG		Tier 3	
VALPROIC ACID ORAL SOLUTION 250 MG/5ML		Tier 3	
Antidepressants			
*Alpha-2 Receptor Antagonists (Tetracyclics)***			
MIRTAZAPINE ORAL TABLET 15 MG, 30 MG, 45 MG, 7.5 MG		Tier 3	

Drug Name	Brand Tier	Generic Tier	Formulary Notes
MIRTAZAPINE ORAL TABLET DISPERSIBLE 15 MG, 30 MG, 45 MG		Tier 3	
*Antidepressants - Misc.***			
BUPROPION HCL ER (SR) ORAL TABLET EXTENDED RELEASE 12 HOUR 100 MG, 150 MG, 200 MG		Tier 3	
BUPROPION HCL ER (XL) ORAL TABLET EXTENDED RELEASE 24 HOUR 150 MG, 300 MG		Tier 3	
BUPROPION HCL ORAL TABLET 100 MG, 75 MG		Tier 3	
*Monoamine Oxidase Inhibitors (Maois)***			
EMSAM TRANSDERMAL PATCH 24 HOUR 12 MG/24HR, 6 MG/24HR, 9 MG/24HR	Tier 4		
TRANLYCYPROMINE SULFATE ORAL TABLET 10 MG		Tier 3	
*Selective Serotonin Reuptake Inhibitors (Ssris)***			
CITALOPRAM HYDROBROMIDE ORAL SOLUTION 10 MG/5ML		Tier 3	
CITALOPRAM HYDROBROMIDE ORAL TABLET 10 MG, 20 MG, 40 MG		Tier 3	
ESCITALOPRAM OXALATE ORAL SOLUTION 5 MG/5ML		Tier 3	
ESCITALOPRAM OXALATE ORAL TABLET 10 MG, 20 MG, 5 MG		Tier 3	
FLUOXETINE HCL ORAL CAPSULE 10 MG, 20 MG, 40 MG		Tier 3	
FLUOXETINE HCL ORAL CAPSULE DELAYED RELEASE 90 MG		Tier 3	
FLUOXETINE HCL ORAL SOLUTION 20 MG/5ML		Tier 3	
FLUOXETINE HCL ORAL TABLET 10 MG		Tier 3	
FLUVOXAMINE MALEATE ORAL TABLET 100 MG, 25 MG, 50 MG		Tier 3	
PAROXETINE HCL ORAL TABLET 10 MG, 20 MG, 30 MG, 40 MG		Tier 3	
SERTRALINE HCL ORAL CONCENTRATE 20 MG/ML		Tier 3	
SERTRALINE HCL ORAL TABLET 100 MG, 25 MG, 50 MG		Tier 3	

Drug Name	Brand Tier	Generic Tier	Formulary Notes
*Serotonin Modulators***			
TRAZODONE HCL ORAL TABLET 100 MG, 150 MG, 300 MG, 50 MG		Tier 3	
TRINTELLIX ORAL TABLET 10 MG, 20 MG, 5 MG	Tier 4		ST
VIIBRYD ORAL TABLET 10 MG, 20 MG, 40 MG	Tier 4		ST
VIIBRYD STARTER PACK ORAL KIT 10 & 20 MG	Tier 4		ST
*Serotonin-Norepinephrine Reuptake Inhibitors (Snris)***			
DULOXETINE HCL ORAL CAPSULE DELAYED RELEASE PARTICLES 20 MG, 30 MG, 40 MG, 60 MG		Tier 3	
VENLAFAXINE HCL ER ORAL CAPSULE EXTENDED RELEASE 24 HOUR 150 MG, 37.5 MG, 75 MG		Tier 3	
VENLAFAXINE HCL ER ORAL TABLET EXTENDED RELEASE 24 HOUR 225 MG		Tier 3	
VENLAFAXINE HCL ORAL TABLET 100 MG, 25 MG, 37.5 MG, 50 MG, 75 MG		Tier 3	
*Tricyclic Agents***			
AMITRIPTYLINE HCL ORAL TABLET 10 MG, 100 MG, 150 MG, 25 MG, 50 MG, 75 MG		Tier 3	
CLOMIPRAMINE HCL ORAL CAPSULE 25 MG, 50 MG, 75 MG		Tier 3	
DESIPRAMINE HCL ORAL TABLET 10 MG, 100 MG, 150 MG, 25 MG, 50 MG, 75 MG		Tier 3	
DOXEPIN HCL ORAL CAPSULE 10 MG, 100 MG, 150 MG, 25 MG, 50 MG, 75 MG		Tier 3	
DOXEPIN HCL ORAL CONCENTRATE 10 MG/ML		Tier 3	
IMIPRAMINE HCL ORAL TABLET 10 MG, 25 MG, 50 MG		Tier 3	
IMIPRAMINE PAMOATE ORAL CAPSULE 100 MG, 125 MG, 150 MG, 75 MG		Tier 3	
NORTRIPTYLINE HCL ORAL CAPSULE 10 MG, 25 MG, 50 MG, 75 MG		Tier 3	
NORTRIPTYLINE HCL ORAL SOLUTION 10 MG/5ML		Tier 3	

Drug Name	Brand Tier	Generic Tier	Formulary Notes
Antidiabetics			
*Alpha-Glucosidase Inhibitors***			
ACARBOSE ORAL TABLET 100 MG, 25 MG, 50 MG		Tier 3	
*Antidiabetic - Amylin Analogs***			
SYMLINPEN 120 SUBCUTANEOUS SOLUTION PEN-INJECTOR 2700 MCG/2.7ML	Tier 4		PA
SYMLINPEN 60 SUBCUTANEOUS SOLUTION PEN-INJECTOR 1500 MCG/1.5ML	Tier 4		PA
*Biguanides***			
METFORMIN HCL ER ORAL TABLET EXTENDED RELEASE 24 HOUR 500 MG, 750 MG		Tier 2	
METFORMIN HCL ORAL TABLET 1000 MG, 500 MG, 850 MG		Tier 2	
*Diabetic Other***			
BAQSIMI ONE PACK NASAL POWDER 3 MG/DOSE	Tier 4		QL (2 EA per 30 days)
BAQSIMI TWO PACK NASAL POWDER 3 MG/DOSE	Tier 4		QL (2 EA per 30 days)
GLUCAGON EMERGENCY KIT 1 MG INJECTION 1 MG		Tier 1	QL (2 EA per 30 days)
GLUCAGON EMERGENCY KIT 1 MG INJECTION 1 MG		Tier 2	QL (2 EA per 30 days)
*Dipeptidyl Peptidase-4 (Dpp-4) Inhibitors***			
JANUVIA ORAL TABLET 100 MG, 25 MG, 50 MG	Tier 4		ST
ONGLYZA ORAL TABLET 2.5 MG, 5 MG	Tier 5		ST
TRADJENTA ORAL TABLET 5 MG	Tier 5		ST
*Dipeptidyl Peptidase-4 Inhibitor-Biguanide Combinations***			
JANUMET ORAL TABLET 50-1000 MG, 50-500 MG	Tier 5		ST
JANUMET XR ORAL TABLET EXTENDED RELEASE 24 HOUR 100-1000 MG, 50-1000 MG, 50-500 MG	Tier 5		ST

Drug Name	Brand Tier	Generic Tier	Formulary Notes
KOMBIGLYZE XR ORAL TABLET EXTENDED RELEASE 24 HOUR 2.5-1000 MG, 5-1000 MG, 5-500 MG	Tier 5		ST
*Human Insulin***			
ADMELOG SOLOSTAR SUBCUTANEOUS SOLUTION PEN-INJECTOR (INSULIN LISPRO (1 UNIT DIAL)) 100 UNIT/ML	Tier 2	Tier 2	
ADMELOG SUBCUTANEOUS SOLUTION (INSULIN LISPRO) 100 UNIT/ML	Tier 2	Tier 2	
APIDRA INJECTION SOLUTION 100 UNIT/ML	Tier 2		
APIDRA SOLOSTAR SUBCUTANEOUS SOLUTION PEN-INJECTOR 100 UNIT/ML	Tier 2		
BASAGLAR KWIKPEN SUBCUTANEOUS SOLUTION PEN-INJECTOR 100 UNIT/ML	Tier 2		
FIASP FLEXTOUCH SUBCUTANEOUS SOLUTION PEN-INJECTOR 100 UNIT/ML	Tier 2		
FIASP SUBCUTANEOUS SOLUTION 100 UNIT/ML	Tier 2		
HUMALOG JUNIOR KWIKPEN SUBCUTANEOUS SOLUTION PEN-INJECTOR (INSULIN LISPRO JUNIOR KWIKPEN) 100 UNIT/ML	Tier 2	Tier 2	
HUMALOG KWIKPEN SUBCUTANEOUS SOLUTION PEN-INJECTOR (INSULIN LISPRO (1 UNIT DIAL)) 100 UNIT/ML	Tier 2	Tier 2	
HUMALOG KWIKPEN SUBCUTANEOUS SOLUTION PEN-INJECTOR 200 UNIT/ML	Tier 2		
HUMALOG MIX 50/50 KWIKPEN SUBCUTANEOUS SUSPENSION PEN-INJECTOR (50-50) 100 UNIT/ML	Tier 2		
HUMALOG MIX 50/50 SUBCUTANEOUS SUSPENSION (50-50) 100 UNIT/ML	Tier 2		
HUMALOG MIX 75/25 KWIKPEN SUBCUTANEOUS SUSPENSION PEN-INJECTOR (INSULIN LISPRO PROT & LISPRO) (75-25) 100 UNIT/ML	Tier 2	Tier 2	
HUMALOG MIX 75/25 SUBCUTANEOUS SUSPENSION (75-25) 100 UNIT/ML	Tier 2		
HUMALOG SUBCUTANEOUS SOLUTION (INSULIN LISPRO) 100 UNIT/ML	Tier 2	Tier 2	
HUMALOG SUBCUTANEOUS SOLUTION CARTRIDGE 100 UNIT/ML	Tier 2		

Drug Name	Brand Tier	Generic Tier	Formulary Notes
HUMULIN 70/30 KWIKPEN SUBCUTANEOUS SUSPENSION PEN-INJECTOR (70-30) 100 UNIT/ML	Tier 2		
HUMULIN 70/30 SUBCUTANEOUS SUSPENSION (70-30) 100 UNIT/ML	Tier 2		
HUMULIN N KWIKPEN SUBCUTANEOUS SUSPENSION PEN-INJECTOR 100 UNIT/ML	Tier 2		
HUMULIN N SUBCUTANEOUS SUSPENSION 100 UNIT/ML	Tier 2		
HUMULIN R INJECTION SOLUTION 100 UNIT/ML	Tier 2		
HUMULIN R U-500 (CONCENTRATED) SUBCUTANEOUS SOLUTION 500 UNIT/ML	Tier 2		
HUMULIN R U-500 KWIKPEN SUBCUTANEOUS SOLUTION PEN-INJECTOR 500 UNIT/ML	Tier 5		
INSULIN ASPART PENFILL SUBCUTANEOUS SOLUTION CARTRIDGE 100 UNIT/ML		Tier 2	
LEVEMIR FLEXTOUCH SUBCUTANEOUS SOLUTION PEN-INJECTOR 100 UNIT/ML	Tier 2		
LEVEMIR SUBCUTANEOUS SOLUTION 100 UNIT/ML	Tier 2		
NOVOLIN 70/30 FLEXPEN RELION SUBCUTANEOUS SUSPENSION PEN-INJECTOR (70-30) 100 UNIT/ML	Tier 2		
NOVOLIN 70/30 FLEXPEN SUBCUTANEOUS SUSPENSION PEN-INJECTOR (70-30) 100 UNIT/ML	Tier 2		
NOVOLIN 70/30 RELION SUBCUTANEOUS SUSPENSION (70-30) 100 UNIT/ML	Tier 2		
NOVOLIN 70/30 SUBCUTANEOUS SUSPENSION (70-30) 100 UNIT/ML	Tier 2		
NOVOLIN N FLEXPEN RELION SUBCUTANEOUS SUSPENSION PEN-INJECTOR 100 UNIT/ML	Tier 2		
NOVOLIN N FLEXPEN SUBCUTANEOUS SUSPENSION PEN-INJECTOR 100 UNIT/ML	Tier 2		
NOVOLIN N RELION SUBCUTANEOUS SUSPENSION 100 UNIT/ML	Tier 2		
NOVOLIN N SUBCUTANEOUS SUSPENSION 100 UNIT/ML	Tier 2		

Drug Name	Brand Tier	Generic Tier	Formulary Notes
NOVOLIN R FLEXPEN INJECTION SOLUTION PEN-INJECTOR 100 UNIT/ML	Tier 2		
NOVOLIN R FLEXPEN RELION INJECTION SOLUTION PEN-INJECTOR 100 UNIT/ML	Tier 2		
NOVOLIN R INJECTION SOLUTION 100 UNIT/ML	Tier 2		
NOVOLIN R RELION INJECTION SOLUTION 100 UNIT/ML	Tier 2		
NOVOLOG 70/30 FLEXPEN RELION SUBCUTANEOUS SUSPENSION PEN-INJECTOR (INSULIN ASP PROT & ASP FLEXPEN) (70-30) 100 UNIT/ML	Tier 2	Tier 2	
NOVOLOG FLEXPEN RELION SUBCUTANEOUS SOLUTION PEN-INJECTOR (INSULIN ASPART FLEXPEN) 100 UNIT/ML	Tier 2	Tier 2	
NOVOLOG MIX 70/30 RELION SUBCUTANEOUS SUSPENSION (INSULIN ASPART PROT & ASPART) (70-30) 100 UNIT/ML	Tier 2	Tier 2	
NOVOLOG RELION SUBCUTANEOUS SOLUTION (INSULIN ASPART) 100 UNIT/ML	Tier 2	Tier 2	
TOUJEO MAX SOLOSTAR SUBCUTANEOUS SOLUTION PEN-INJECTOR 300 UNIT/ML	Tier 5		ST
TOUJEO SOLOSTAR SUBCUTANEOUS SOLUTION PEN-INJECTOR 300 UNIT/ML	Tier 5		ST
TRESIBA FLEXTOUCH SUBCUTANEOUS SOLUTION PEN-INJECTOR 100 UNIT/ML, 200 UNIT/ML	Tier 4		PA
*Incretin Mimetic Agents (Glp-1 Receptor Agonists)***			
BYDUREON BCISE SUBCUTANEOUS AUTO-INJECTOR 2 MG/0.85ML	Tier 4		PA
BYETTA 10 MCG PEN SUBCUTANEOUS SOLUTION PEN-INJECTOR 10 MCG/0.04ML	Tier 4		PA
BYETTA 5 MCG PEN SUBCUTANEOUS SOLUTION PEN-INJECTOR 5 MCG/0.02ML	Tier 4		PA
TRULICITY SUBCUTANEOUS SOLUTION PEN-INJECTOR 0.75 MG/0.5ML, 1.5 MG/0.5ML, 3 MG/0.5ML, 4.5 MG/0.5ML	Tier 4		PA; QL (0.08 ML per 1 day)

Drug Name	Brand Tier	Generic Tier	Formulary Notes
VICTOZA SUBCUTANEOUS SOLUTION PEN-INJECTOR 18 MG/3ML	Tier 4		PA
*Meglitinide Analogues***			
NATEGLINIDE ORAL TABLET 120 MG, 60 MG		Tier 3	
REPAGLINIDE ORAL TABLET 0.5 MG, 1 MG, 2 MG		Tier 3	
*Sodium-Glucose Co-Transporter 2 (Sgt2) Inhibitors***			
FARXIGA ORAL TABLET 10 MG, 5 MG	Tier 4		ST
INVOKANA ORAL TABLET 100 MG, 300 MG	Tier 5		ST
JARDIANCE ORAL TABLET 10 MG, 25 MG	Tier 5		ST; QL (1 EA per 1 day)
*Sulfonylurea-Biguanide Combinations***			
GLIPIZIDE-METFORMIN HCL ORAL TABLET 2.5-250 MG, 2.5-500 MG, 5-500 MG		Tier 2	
GLYBURIDE-METFORMIN ORAL TABLET 1.25-250 MG, 2.5-500 MG, 5-500 MG		Tier 2	
*Sulfonylureas***			
GLIMEPIRIDE ORAL TABLET 1 MG, 2 MG, 4 MG		Tier 3	
GLIPIZIDE ER ORAL TABLET EXTENDED RELEASE 24 HOUR 10 MG, 2.5 MG, 5 MG		Tier 2	
GLIPIZIDE ORAL TABLET 10 MG, 5 MG		Tier 2	
GLIPIZIDE XL ORAL TABLET EXTENDED RELEASE 24 HOUR 10 MG, 2.5 MG, 5 MG		Tier 2	
GLYBURIDE MICRONIZED ORAL TABLET 1.5 MG, 3 MG, 6 MG		Tier 2	
GLYBURIDE ORAL TABLET 1.25 MG, 2.5 MG, 5 MG		Tier 2	
*Thiazolidinedione-Biguanide Combinations***			
PIOGLITAZONE HCL-METFORMIN HCL ORAL TABLET 15-500 MG, 15-850 MG		Tier 3	
*Thiazolidinediones***			
PIOGLITAZONE HCL ORAL TABLET 15 MG, 30 MG, 45 MG		Tier 3	

Drug Name	Brand Tier	Generic Tier	Formulary Notes
Antidiarrheal/Probiotic Agents			
*Antiperistaltic Agents***			
DIPHENOXYLATE-ATROPINE ORAL LIQUID 2.5-0.025 MG/5ML		Tier 3	
DIPHENOXYLATE-ATROPINE ORAL TABLET 2.5-0.025 MG		Tier 3	
Antidotes And Specific Antagonists			
*Antidotes - Chelating Agents***			
DEFERASIROX ORAL TABLET SOLUBLE 125 MG, 250 MG, 500 MG		Tier 6	
FERRIPROX ORAL SOLUTION 100 MG/ML	Tier 5		
*Opioid Antagonists***			
NALOXONE HCL INJECTION SOLUTION PREFILLED SYRINGE 2 MG/2ML		Tier 3	
NALTREXONE HCL ORAL TABLET 50 MG		Tier 3	
NARCAN NASAL LIQUID 4 MG/0.1ML	Tier 3		QL (2 EA per 365 days)
Antiemetics			
*5-Ht3 Receptor Antagonists***			
ONDANSETRON HCL ORAL SOLUTION 4 MG/5ML		Tier 3	QL (600 ML per 30 days)
ONDANSETRON HCL TABLET 4 MG ORAL 4 MG		Tier 3	QL (180 EA per 30 days)
ONDANSETRON HCL TABLET 8 MG ORAL 8 MG		Tier 3	QL (90 EA per 30 days)
ONDANSETRON TABLET DISPERSIBLE 4 MG ORAL 4 MG		Tier 3	QL (180 EA per 30 days)
ONDANSETRON TABLET DISPERSIBLE 8 MG ORAL 8 MG		Tier 3	QL (90 EA per 30 days)
PALONOSETRON HCL INTRAVENOUS SOLUTION PREFILLED SYRINGE 0.25 MG/5ML		Tier 3	
*Antiemetic Combinations***			
DOXYLAMINE-PYRIDOXINE ORAL TABLET DELAYED RELEASE 10-10 MG		Tier 3	
*Antiemetics - Anticholinergic***			
SCOPOLAMINE TRANSDERMAL PATCH 72 HOUR 1 MG/3DAYS		Tier 3	
TRIMETHOBENZAMIDE HCL ORAL CAPSULE 300 MG		Tier 3	

Drug Name	Brand Tier	Generic Tier	Formulary Notes
Antifungals			
*Antifungals***			
GRISEOFULVIN MICROSIZED ORAL SUSPENSION 125 MG/5ML		Tier 3	
GRISEOFULVIN ULTRAMICROSIZED ORAL TABLET 125 MG, 250 MG		Tier 3	
NYSTATIN ORAL TABLET 500000 UNIT		Tier 3	
TERBINAFINE HCL ORAL TABLET 250 MG		Tier 3	PA; QL (90 EA per 365 days)
*Imidazoles***			
KETOCONAZOLE ORAL TABLET 200 MG		Tier 3	
*Triazoles***			
FLUCONAZOLE ORAL SUSPENSION RECONSTITUTED 10 MG/ML, 40 MG/ML		Tier 3	
FLUCONAZOLE ORAL TABLET 100 MG, 150 MG, 200 MG, 50 MG		Tier 3	
ITRACONAZOLE ORAL CAPSULE 100 MG		Tier 3	
VORICONAZOLE ORAL SUSPENSION RECONSTITUTED 40 MG/ML		Tier 3	
VORICONAZOLE ORAL TABLET 200 MG, 50 MG		Tier 3	
Antihistamines			
*Antihistamines - Non-Sedating***			
DESLORATADINE ORAL TABLET DISPERSIBLE 5 MG		Tier 3	
*Antihistamines - Phenothiazines***			
PROMETHAZINE HCL ORAL SOLUTION 6.25 MG/5ML		Tier 3	
PROMETHAZINE HCL ORAL SYRUP 6.25 MG/5ML		Tier 3	
PROMETHAZINE HCL ORAL TABLET 12.5 MG, 25 MG, 50 MG		Tier 3	
PROMETHEGAN RECTAL SUPPOSITORY (PROMETHAZINE HCL) 12.5 MG, 25 MG	Tier 3	Tier 3	
PROMETHEGAN RECTAL SUPPOSITORY 50 MG	Tier 3		
*Antihistamines - Piperidines***			
CYPROHEPTADINE HCL ORAL SYRUP 2 MG/5ML		Tier 3	
CYPROHEPTADINE HCL ORAL TABLET 4 MG		Tier 3	

Drug Name	Brand Tier	Generic Tier	Formulary Notes
Antihyperlipidemics			
*Antihyperlipidemics - Misc.***			
OMEGA-3-ACID ETHYL ESTERS ORAL CAPSULE 1 GM		Tier 3	
*Bile Acid Sequestrants***			
CHOLESTYRAMINE LIGHT ORAL PACKET 4 GM		Tier 3	
CHOLESTYRAMINE LIGHT ORAL POWDER 4 GM/DOSE		Tier 3	
CHOLESTYRAMINE ORAL POWDER 4 GM/DOSE		Tier 3	
COLESEVELAM HCL ORAL TABLET 625 MG		Tier 3	
COLESTIPOL HCL ORAL GRANULES 5 GM		Tier 3	
COLESTIPOL HCL ORAL PACKET 5 GM		Tier 3	
COLESTIPOL HCL ORAL TABLET 1 GM		Tier 3	
*Fibric Acid Derivatives***			
FENOFIBRATE MICRONIZED ORAL CAPSULE 134 MG, 200 MG, 43 MG, 67 MG		Tier 3	
FENOFIBRATE ORAL CAPSULE 134 MG, 200 MG, 67 MG		Tier 3	
FENOFIBRATE ORAL TABLET 145 MG, 160 MG, 48 MG, 54 MG		Tier 3	
GEMFIBROZIL ORAL TABLET 600 MG		Tier 3	
*Hmg Coa Reductase Inhibitors***			
ATORVASTATIN CALCIUM ORAL TABLET 10 MG, 20 MG, 40 MG, 80 MG		Tier 1	
LOVASTATIN ORAL TABLET 10 MG, 20 MG, 40 MG		Tier 1	
PRAVASTATIN SODIUM ORAL TABLET 10 MG, 20 MG, 40 MG, 80 MG		Tier 1	
ROSUVASTATIN CALCIUM ORAL TABLET 10 MG, 20 MG, 40 MG, 5 MG		Tier 1	
SIMVASTATIN ORAL TABLET 10 MG, 20 MG, 40 MG, 5 MG, 80 MG		Tier 1	
*Intest Cholest Absorp Inhib-Hmg Coa Reductase Inhib Comb***			
EZETIMIBE-SIMVASTATIN ORAL TABLET 10-10 MG, 10-20 MG, 10-40 MG, 10-80 MG		Tier 3	

Drug Name	Brand Tier	Generic Tier	Formulary Notes
*Intestinal Cholesterol Absorption Inhibitors***			
EZETIMIBE ORAL TABLET 10 MG		Tier 3	PA
*Nicotinic Acid Derivatives***			
NIACIN ER (ANTHYPERLIPIDEMIC) ORAL TABLET EXTENDED RELEASE 1000 MG, 500 MG, 750 MG		Tier 3	
*Pcsk9 Inhibitors***			
PRALUENT SUBCUTANEOUS SOLUTION AUTO-INJECTOR 150 MG/ML, 75 MG/ML	Tier 6		PA
REPATHA PUSHTRONEX SYSTEM SUBCUTANEOUS SOLUTION CARTRIDGE 420 MG/3.5ML	Tier 6		PA
REPATHA SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 140 MG/ML	Tier 6		PA
REPATHA SURECLICK SUBCUTANEOUS SOLUTION AUTO-INJECTOR 140 MG/ML	Tier 6		PA
Antihypertensives			
*Ace Inhibitor & Calcium Channel Blocker Combinations***			
AMLODIPINE BESY-BENAZEPRIL HCL ORAL CAPSULE 10-20 MG, 10-40 MG, 2.5-10 MG, 5-10 MG, 5-20 MG, 5-40 MG		Tier 3	
*Ace Inhibitors & Thiazide/Thiazide-Like***			
BENAZEPRIL-HYDROCHLOROTHIAZIDE ORAL TABLET 10-12.5 MG, 20-12.5 MG, 20-25 MG, 5-6.25 MG		Tier 3	
ENALAPRIL-HYDROCHLOROTHIAZIDE ORAL TABLET 10-25 MG, 5-12.5 MG		Tier 2	
FOSINOPRIL SODIUM-HCTZ ORAL TABLET 10-12.5 MG, 20-12.5 MG		Tier 3	
LISINOPRIL-HYDROCHLOROTHIAZIDE ORAL TABLET 10-12.5 MG, 20-12.5 MG, 20-25 MG		Tier 2	
QUINAPRIL-HYDROCHLOROTHIAZIDE ORAL TABLET 10-12.5 MG, 20-12.5 MG, 20-25 MG		Tier 3	
*Ace Inhibitors***			
BENAZEPRIL HCL ORAL TABLET 10 MG, 20 MG, 40 MG, 5 MG		Tier 3	

Drug Name	Brand Tier	Generic Tier	Formulary Notes
CAPTOPRIL ORAL TABLET 100 MG, 12.5 MG, 25 MG, 50 MG		Tier 3	
ENALAPRIL MALEATE ORAL TABLET 10 MG, 2.5 MG, 20 MG, 5 MG		Tier 1	
FOSINOPRIL SODIUM ORAL TABLET 10 MG, 20 MG, 40 MG		Tier 3	
LISINOPRIL ORAL TABLET 10 MG, 2.5 MG, 20 MG, 30 MG, 40 MG, 5 MG		Tier 1	
MOEXIPRIL HCL ORAL TABLET 15 MG, 7.5 MG		Tier 3	
QUINAPRIL HCL ORAL TABLET 10 MG, 20 MG, 40 MG, 5 MG		Tier 3	
RAMIPRIL ORAL CAPSULE 1.25 MG, 10 MG, 2.5 MG, 5 MG		Tier 3	
*Angiotensin Ii Receptor Antag & Thiazide/Thiazide-Like***			
CANDESARTAN CILEXETIL-HCTZ ORAL TABLET 16-12.5 MG, 32-12.5 MG, 32-25 MG		Tier 3	
IRBESARTAN-HYDROCHLOROTHIAZIDE ORAL TABLET 150-12.5 MG, 300-12.5 MG		Tier 3	
LOSARTAN POTASSIUM-HCTZ ORAL TABLET 100-12.5 MG, 100-25 MG, 50-12.5 MG		Tier 3	
OLMESARTAN MEDOXOMIL-HCTZ ORAL TABLET 20-12.5 MG, 40-12.5 MG, 40-25 MG		Tier 3	
VALSARTAN-HYDROCHLOROTHIAZIDE ORAL TABLET 160-12.5 MG, 160-25 MG, 320-12.5 MG, 320-25 MG, 80-12.5 MG		Tier 3	
*Angiotensin Ii Receptor Antagonists***			
CANDESARTAN CILEXETIL ORAL TABLET 16 MG, 32 MG, 4 MG, 8 MG		Tier 3	
IRBESARTAN ORAL TABLET 150 MG, 300 MG, 75 MG		Tier 3	
LOSARTAN POTASSIUM ORAL TABLET 100 MG, 25 MG, 50 MG		Tier 3	
OLMESARTAN MEDOXOMIL ORAL TABLET 20 MG, 40 MG, 5 MG		Tier 3	
VALSARTAN ORAL TABLET 160 MG, 320 MG, 40 MG, 80 MG		Tier 3	
*Antiadrenergics - Centrally Acting***			
CLONIDINE HCL ORAL TABLET 0.1 MG, 0.2 MG, 0.3 MG		Tier 3	

Drug Name	Brand Tier	Generic Tier	Formulary Notes
CLONIDINE TRANSDERMAL PATCH WEEKLY 0.1 MG/24HR, 0.2 MG/24HR, 0.3 MG/24HR		Tier 3	
GUANFACINE HCL ORAL TABLET 1 MG, 2 MG		Tier 3	
METHYLDOPA ORAL TABLET 250 MG, 500 MG		Tier 3	
*Antiadrenergics - Peripherally Acting***			
DOXAZOSIN MESYLATE ORAL TABLET 1 MG, 2 MG, 4 MG, 8 MG		Tier 3	
PRAZOSIN HCL ORAL CAPSULE 1 MG, 2 MG, 5 MG		Tier 3	
TERAZOSIN HCL ORAL CAPSULE 1 MG, 10 MG, 2 MG, 5 MG		Tier 3	
*Beta Blocker & Diuretic Combinations***			
ATENOLOL-CHLORTHALIDONE ORAL TABLET 100-25 MG, 50-25 MG		Tier 3	
BISOPROLOL-HYDROCHLOROTHIAZIDE ORAL TABLET 10-6.25 MG, 2.5-6.25 MG, 5-6.25 MG		Tier 3	
METOPROLOL-HYDROCHLOROTHIAZIDE ORAL TABLET 100-25 MG, 100-50 MG, 50-25 MG		Tier 3	
*Vasodilators***			
HYDRALAZINE HCL ORAL TABLET 10 MG, 100 MG, 25 MG, 50 MG		Tier 3	
MINOXIDIL ORAL TABLET 10 MG, 2.5 MG		Tier 3	
Anti-Infective Agents - Misc.			
*Anti-Infective Agents - Misc.***			
METRONIDAZOLE ORAL CAPSULE 375 MG		Tier 3	
METRONIDAZOLE ORAL TABLET 250 MG, 500 MG		Tier 3	
PRIMSOL ORAL SOLUTION 50 MG/5ML	Tier 4		
TRIMETHOPRIM ORAL TABLET 100 MG		Tier 3	
XIFAXAN ORAL TABLET 550 MG	Tier 5		PA
*Anti-Infective Misc. - Combinations***			
SULFAMETHOXAZOLE-TRIMETHOPRIM INTRAVENOUS SOLUTION 400-80 MG/5ML		Tier 3	

Drug Name	Brand Tier	Generic Tier	Formulary Notes
SULFAMETHOXAZOLE-TRIMETHOPRIM ORAL TABLET 400-80 MG, 800-160 MG		Tier 3	
SULFATRIM PEDIATRIC ORAL SUSPENSION (SULFAMETHOXAZOLE-TRIMETHOPRIM) 200-40 MG/5ML	Tier 3	Tier 3	
*Cyclic Lipopeptides***			
DAPTOMYCIN INTRAVENOUS SOLUTION RECONSTITUTED 350 MG		Tier 3	
*Glycopeptides***			
VANCOMYCIN HCL IN NAACL INTRAVENOUS SOLUTION 1.25-0.9 GM/250ML-%		Tier 3	
VANCOMYCIN HCL INTRAVENOUS SOLUTION 1250 MG/250ML, 1750 MG/350ML, 500 MG/100ML, 750 MG/150ML		Tier 3	
VANCOMYCIN HCL INTRAVENOUS SOLUTION RECONSTITUTED 100 GM, 500 MG		Tier 3	
VANCOMYCIN HCL ORAL CAPSULE 125 MG, 250 MG		Tier 3	
*Lincosamides***			
CLINDAMYCIN HCL ORAL CAPSULE 150 MG, 300 MG		Tier 3	
CLINDAMYCIN PALMITATE HCL ORAL SOLUTION RECONSTITUTED 75 MG/5ML		Tier 3	
CLINDAMYCIN PHOSPHATE IN D5W INTRAVENOUS SOLUTION 300 MG/50ML, 600 MG/50ML, 900 MG/50ML		Tier 3	
*Oxazolidinones***			
LINEZOLID IN SODIUM CHLORIDE INTRAVENOUS SOLUTION 600-0.9 MG/300ML-%		Tier 3	PA
LINEZOLID INTRAVENOUS SOLUTION 600 MG/300ML		Tier 3	PA
LINEZOLID ORAL SUSPENSION RECONSTITUTED 100 MG/5ML		Tier 3	PA
LINEZOLID ORAL TABLET 600 MG		Tier 3	PA
*Urinary Anti-Infectives***			
NITROFURANTOIN MACROCRYSTAL ORAL CAPSULE 100 MG, 25 MG, 50 MG		Tier 3	
NITROFURANTOIN MONOHYD MACRO ORAL CAPSULE 100 MG		Tier 3	

Drug Name	Brand Tier	Generic Tier	Formulary Notes
Antimalarials			
*Antimalarial Combinations***			
ATOVAQUONE-PROGUANIL HCL ORAL TABLET 250-100 MG, 62.5-25 MG		Tier 3	
*Antimalarials***			
HYDROXYCHLOROQUINE SULFATE ORAL TABLET 100 MG, 200 MG, 300 MG, 400 MG		Tier 3	
MEFLOQUINE HCL ORAL TABLET 250 MG		Tier 3	
Antimyasthenic/Cholinergic Agents			
*Antimyasthenic/Cholinergic Agents***			
PYRIDOSTIGMINE BROMIDE ER ORAL TABLET EXTENDED RELEASE 180 MG		Tier 3	
PYRIDOSTIGMINE BROMIDE ORAL SOLUTION 60 MG/5ML		Tier 5	
PYRIDOSTIGMINE BROMIDE ORAL TABLET 30 MG, 60 MG		Tier 3	
Antimycobacterial Agents			
*Antimycobacterial Agents***			
ETHAMBUTOL HCL ORAL TABLET 400 MG		Tier 3	
ISONIAZID ORAL SYRUP 50 MG/5ML		Tier 3	
ISONIAZID ORAL TABLET 100 MG, 300 MG		Tier 3	
PYRAZINAMIDE ORAL TABLET 500 MG		Tier 3	
RIFAMPIN INTRAVENOUS SOLUTION RECONSTITUTED 600 MG		Tier 3	
RIFAMPIN ORAL CAPSULE 150 MG, 300 MG		Tier 3	
Antineoplastics And Adjunctive Therapies			
*Alkylating Agents***			
BELRAPZO INTRAVENOUS SOLUTION 100 MG/4ML	Tier 5		
BENDEKA INTRAVENOUS SOLUTION 100 MG/4ML	Tier 5		
BUSULFAN INTRAVENOUS SOLUTION 6 MG/ML		Tier 3	
OXALIPLATIN INTRAVENOUS SOLUTION RECONSTITUTED 100 MG, 50 MG		Tier 3	
*Antiadrenals***			
LYSODREN ORAL TABLET 500 MG	Tier 4		

Drug Name	Brand Tier	Generic Tier	Formulary Notes
*Antiandrogens***			
BICALUTAMIDE ORAL TABLET 50 MG		Tier 3	
FLUTAMIDE ORAL CAPSULE 125 MG		Tier 3	
NILUTAMIDE ORAL TABLET 150 MG		Tier 6	
*Antiestrogens***			
TAMOXIFEN CITRATE ORAL TABLET 10 MG, 20 MG		Tier 1	
TOREMIFENE CITRATE ORAL TABLET 60 MG		Tier 6	
*Antimetabolites***			
ALIMTA INTRAVENOUS SOLUTION RECONSTITUTED 100 MG, 500 MG	Tier 4		
AZACITIDINE INJECTION SUSPENSION RECONSTITUTED 100 MG		Tier 3	
CAPECITABINE ORAL TABLET 150 MG, 500 MG		Tier 6	
CLADRIBINE INTRAVENOUS SOLUTION 10 MG/10ML		Tier 3	
CLOFARABINE INTRAVENOUS SOLUTION 1 MG/ML		Tier 3	
CYTARABINE (PF) INJECTION SOLUTION 100 MG/ML, 20 MG/ML		Tier 3	
CYTARABINE INJECTION SOLUTION 20 MG/ML		Tier 3	
DECITABINE INTRAVENOUS SOLUTION RECONSTITUTED 50 MG		Tier 3	
FLOXURIDINE INJECTION SOLUTION RECONSTITUTED 0.5 GM		Tier 3	
FLUDARABINE PHOSPHATE INTRAVENOUS SOLUTION RECONSTITUTED 50 MG		Tier 3	
FOLOTYN INTRAVENOUS SOLUTION 20 MG/ML	Tier 4		
GEMCITABINE HCL INTRAVENOUS SOLUTION 1 GM/10ML, 1.5 GM/15ML, 2 GM/20ML, 200 MG/2ML		Tier 3	
MERCAPTOPYRINE ORAL TABLET 50 MG		Tier 6	
METHOTREXATE ORAL TABLET 2.5 MG		Tier 3	
METHOTREXATE SODIUM (PF) INJECTION SOLUTION 1 GM/40ML, 250 MG/10ML, 50 MG/2ML		Tier 3	

Drug Name	Brand Tier	Generic Tier	Formulary Notes
METHOTREXATE SODIUM INJECTION SOLUTION 250 MG/10ML, 50 MG/2ML		Tier 3	
METHOTREXATE SODIUM INJECTION SOLUTION RECONSTITUTED 1 GM		Tier 3	
METHOTREXATE SODIUM ORAL TABLET 2.5 MG		Tier 3	
*Antineoplastic - Alk Inhibitors***			
ALECENSA ORAL CAPSULE 150 MG	Tier 6		
*Antineoplastic - Anti-Slamf7 Antibodies***			
EMPLICITI INTRAVENOUS SOLUTION RECONSTITUTED 300 MG, 400 MG	Tier 5		
*Antineoplastic - Bcr-Abl Kinase Inhibitors***			
IMATINIB MESYLATE ORAL TABLET 100 MG, 400 MG		Tier 6	
SPRYCEL ORAL TABLET 100 MG, 140 MG, 20 MG, 50 MG, 70 MG, 80 MG	Tier 6		
TASIGNA ORAL CAPSULE 150 MG, 200 MG	Tier 6		
*Antineoplastic - Btk Inhibitors***			
IMBRUVICA ORAL CAPSULE 140 MG, 70 MG	Tier 6		PA
IMBRUVICA ORAL TABLET 420 MG, 560 MG	Tier 6		PA
*Antineoplastic - Egfr Inhibitors***			
ERLOTINIB HCL ORAL TABLET 100 MG, 150 MG, 25 MG		Tier 3	
PORTRAZZA INTRAVENOUS SOLUTION 800 MG/50ML	Tier 5		
*Antineoplastic - Hif-2-Alpha Inhibitors***			
WELIREG ORAL TABLET 40 MG	Tier 6		PA
*Antineoplastic - Histone Deacetylase Inhibitors***			
ZOLINZA ORAL CAPSULE 100 MG	Tier 6		
*Antineoplastic - Met Inhibitors***			
TEPMETKO ORAL TABLET 225 MG	Tier 6		PA; QL (2 EA per 1 day)

Drug Name	Brand Tier	Generic Tier	Formulary Notes
*Antineoplastic - Mtor Kinase Inhibitors***			
EVEROLIMUS ORAL TABLET 10 MG, 2.5 MG, 5 MG, 7.5 MG		Tier 6	
*Antineoplastic - Multikinase Inhibitors***			
FOTIVDA ORAL CAPSULE 1.34 MG	Tier 6		PA; QL (0.75 EA per 1 day)
LAPATINIB DITOSYLATE ORAL TABLET 250 MG		Tier 6	
SUNITINIB MALATE ORAL CAPSULE 12.5 MG, 25 MG, 37.5 MG, 50 MG		Tier 6	
UKONIQ ORAL TABLET 200 MG	Tier 6		PA; QL (4 EA per 1 day)
VOTRIENT ORAL TABLET 200 MG	Tier 6		
*Antineoplastic - Proteasome Inhibitors***			
NINLARO ORAL CAPSULE 2.3 MG, 3 MG, 4 MG	Tier 6		
*Antineoplastic Antibiotics***			
BLEOMYCIN SULFATE INJECTION SOLUTION RECONSTITUTED 15 UNIT, 30 UNIT		Tier 3	
DOXORUBICIN HCL LIPOSOMAL INTRAVENOUS INJECTABLE 2 MG/ML		Tier 3	
*Antineoplastic -Antibody For Radiopharmaceutical Therapy***			
ZEVALIN Y-90 INTRAVENOUS KIT 3.2 MG/2ML	Tier 4		
*Antineoplastic Enzymes***			
ONCASPAR INJECTION SOLUTION 750 UNIT/ML	Tier 4		
*Antineoplastics - Photoactivated Agents***			
UVADEX INJECTION SOLUTION 20 MCG/ML	Tier 4		
*Antineoplastics Misc.***			
ACTIMMUNE SUBCUTANEOUS SOLUTION 2000000 UNIT/0.5ML	Tier 6		
ALFERON N INJECTION SOLUTION 5000000 UNIT/ML	Tier 4		

Drug Name	Brand Tier	Generic Tier	Formulary Notes
DACARBAZINE INTRAVENOUS SOLUTION RECONSTITUTED 100 MG, 200 MG		Tier 3	
HYDROXYUREA ORAL CAPSULE 500 MG		Tier 3	
INTRON A INJECTION SOLUTION 10000000 UNIT/ML, 6000000 UNIT/ML	Tier 6		PA
INTRON A INJECTION SOLUTION RECONSTITUTED 10000000 UNIT, 18000000 UNIT, 50000000 UNIT	Tier 6		PA
MATULANE ORAL CAPSULE 50 MG	Tier 6		
*Aromatase Inhibitors***			
ANASTROZOLE ORAL TABLET 1 MG		Tier 1	
EXEMESTANE ORAL TABLET 25 MG		Tier 1	
LETROZOLE ORAL TABLET 2.5 MG		Tier 3	
*Cardiac Protective Agents***			
DEXRAZOXANE HCL INTRAVENOUS SOLUTION RECONSTITUTED 250 MG		Tier 3	
*Chemotherapy Adjuncts - Keratinocyte Growth Factors***			
KEPIVANCE INTRAVENOUS SOLUTION RECONSTITUTED 6.25 MG	Tier 4		
*Estrogens-Antineoplastic***			
EMCYT ORAL CAPSULE 140 MG	Tier 4		
*Folic Acid Antagonists Rescue Agents***			
LEUCOVORIN CALCIUM INJECTION SOLUTION 500 MG/50ML		Tier 3	
LEUCOVORIN CALCIUM INJECTION SOLUTION RECONSTITUTED 100 MG, 200 MG, 350 MG, 50 MG		Tier 3	
LEUCOVORIN CALCIUM ORAL TABLET 10 MG, 15 MG, 25 MG, 5 MG		Tier 3	
LEVOLEUCOVORIN CALCIUM INTRAVENOUS SOLUTION RECONSTITUTED 50 MG		Tier 3	
*Imidazotetrazines***			
TEMODAR INTRAVENOUS SOLUTION RECONSTITUTED 100 MG	Tier 6		
TEMOZOLOMIDE ORAL CAPSULE 100 MG, 140 MG, 180 MG, 20 MG, 250 MG, 5 MG		Tier 6	

Drug Name	Brand Tier	Generic Tier	Formulary Notes
*Lhrh Analogs***			
ELIGARD SUBCUTANEOUS KIT 22.5 MG, 30 MG, 45 MG, 7.5 MG	Tier 6		
LEUPROLIDE ACETATE INJECTION KIT 1 MG/0.2ML		Tier 6	
LUPRON DEPOT (1-MONTH) INTRAMUSCULAR KIT 3.75 MG, 7.5 MG	Tier 6		
LUPRON DEPOT (3-MONTH) INTRAMUSCULAR KIT 11.25 MG, 22.5 MG	Tier 6		
LUPRON DEPOT (4-MONTH) INTRAMUSCULAR KIT 30 MG	Tier 6		
*Mitotic Inhibitors***			
ABRAXANE INTRAVENOUS SUSPENSION RECONSTITUTED 100 MG	Tier 4		
DOCETAXEL INTRAVENOUS CONCENTRATE 20 MG/ML		Tier 3	
ETOPOPHOS INTRAVENOUS SOLUTION RECONSTITUTED 100 MG	Tier 4		
ETOPOSIDE ORAL CAPSULE 50 MG		Tier 6	
HALAVEN INTRAVENOUS SOLUTION 1 MG/2ML	Tier 4		
VINCRIStINE SULFATE INTRAVENOUS SOLUTION 1 MG/ML		Tier 3	
VINORELBINE TARTRATE INTRAVENOUS SOLUTION 10 MG/ML		Tier 3	
*Nitrogen Mustards And Related Analogues***			
MELPHALAN HCL INTRAVENOUS SOLUTION RECONSTITUTED 50 MG		Tier 3	
MELPHALAN ORAL TABLET 2 MG		Tier 3	
*Nitrosoureas***			
CARMUSTINE INTRAVENOUS SOLUTION RECONSTITUTED 100 MG		Tier 3	
GLEOSTINE ORAL CAPSULE 10 MG, 100 MG, 40 MG	Tier 6		
*Progestins-Antineoplastic***			
MEGESTROL ACETATE ORAL SUSPENSION 40 MG/ML, 400 MG/10ML		Tier 3	
MEGESTROL ACETATE ORAL TABLET 20 MG, 40 MG		Tier 3	

Drug Name	Brand Tier	Generic Tier	Formulary Notes
*Selective Retinoid X Receptor Agonists***			
BEXAROTENE ORAL CAPSULE 75 MG		Tier 6	
*Topoisomerase I Inhibitors***			
HYCAMTIN ORAL CAPSULE 0.25 MG, 1 MG	Tier 6		
*Urinary Tract Protective Agents***			
MESNA INTRAVENOUS SOLUTION 100 MG/ML		Tier 3	
MESNEX ORAL TABLET 400 MG	Tier 6		
Antiparkinson And Related Therapy Agents			
*Antiparkinson Anticholinergics***			
BENZTROPINE MESYLATE ORAL TABLET 0.5 MG, 1 MG, 2 MG		Tier 3	
TRIHEXYPHENIDYL HCL ORAL TABLET 2 MG, 5 MG		Tier 3	
*Antiparkinson Dopaminergics***			
AMANTADINE HCL ORAL CAPSULE 100 MG		Tier 3	
AMANTADINE HCL ORAL SOLUTION 50 MG/5ML		Tier 3	
AMANTADINE HCL ORAL TABLET 100 MG		Tier 3	
BROMOCRIPTINE MESYLATE ORAL CAPSULE 5 MG		Tier 3	
BROMOCRIPTINE MESYLATE ORAL TABLET 2.5 MG		Tier 3	
*Antiparkinson Monoamine Oxidase Inhibitors***			
SELEGILINE HCL ORAL CAPSULE 5 MG		Tier 3	
SELEGILINE HCL ORAL TABLET 5 MG		Tier 3	
ZELAPAR ORAL TABLET DISPERSIBLE 1.25 MG	Tier 4		
*Levodopa Combinations***			
CARBIDOPA-LEVODOPA ER ORAL TABLET EXTENDED RELEASE 25-100 MG, 50-200 MG		Tier 3	
CARBIDOPA-LEVODOPA ORAL TABLET 10-100 MG, 25-100 MG, 25-250 MG		Tier 3	

Drug Name	Brand Tier	Generic Tier	Formulary Notes
CARBIDOPA-LEVODOPA-ENTACAPONE ORAL TABLET 12.5-50-200 MG, 18.75-75-200 MG, 25-100-200 MG, 31.25-125-200 MG, 37.5-150-200 MG, 50-200-200 MG		Tier 3	
*Nonergoline Dopamine Receptor Agonists***			
APOKYN SUBCUTANEOUS SOLUTION CARTRIDGE 30 MG/3ML	Tier 4		
PRAMIPEXOLE DIHYDROCHLORIDE ORAL TABLET 0.125 MG, 0.25 MG, 0.5 MG, 0.75 MG, 1 MG, 1.5 MG		Tier 3	
ROPINIROLE HCL ORAL TABLET 0.25 MG, 0.5 MG, 1 MG, 2 MG, 3 MG, 4 MG, 5 MG		Tier 3	
*Peripheral Comt Inhibitors***			
ENTACAPONE ORAL TABLET 200 MG		Tier 3	
Antipsychotics/Antimanic Agents			
*Antimanic Agents***			
LITHIUM CARBONATE ER ORAL TABLET EXTENDED RELEASE 300 MG, 450 MG		Tier 3	
LITHIUM CARBONATE ORAL CAPSULE 150 MG, 300 MG, 600 MG		Tier 3	
*Antipsychotics - Misc.***			
VRAYLAR ORAL CAPSULE 1.5 MG, 3 MG, 4.5 MG, 6 MG	Tier 6		ST
VRAYLAR ORAL CAPSULE THERAPY PACK 1.5 & 3 MG	Tier 6		ST
ZIPRASIDONE HCL ORAL CAPSULE 20 MG, 40 MG, 60 MG, 80 MG		Tier 3	
*Benzisoxazoles***			
INVEGA HAFYERA INTRAMUSCULAR SUSPENSION PREFILLED SYRINGE 1092 MG/3.5ML, 1560 MG/5ML	Tier 6		PA; QL (2 ML per 365 days)
INVEGA SUSTENNA INTRAMUSCULAR SUSPENSION PREFILLED SYRINGE 117 MG/0.75ML, 156 MG/ML, 234 MG/1.5ML, 39 MG/0.25ML, 78 MG/0.5ML	Tier 6		
INVEGA TRINZA INTRAMUSCULAR SUSPENSION PREFILLED SYRINGE 273 MG/0.875ML, 410 MG/1.315ML, 546 MG/1.75ML, 819 MG/2.625ML	Tier 6		
RISPERIDONE ORAL SOLUTION 1 MG/ML		Tier 3	

Drug Name	Brand Tier	Generic Tier	Formulary Notes
RISPERIDONE ORAL TABLET 0.25 MG, 0.5 MG, 1 MG, 2 MG, 3 MG, 4 MG		Tier 3	
RISPERIDONE ORAL TABLET DISPERSIBLE 0.25 MG, 0.5 MG, 1 MG, 2 MG, 3 MG, 4 MG		Tier 3	
*Butyrophenones***			
HALOPERIDOL LACTATE ORAL CONCENTRATE 2 MG/ML		Tier 3	
HALOPERIDOL ORAL TABLET 0.5 MG, 1 MG, 10 MG, 2 MG, 20 MG, 5 MG		Tier 3	
*Dibenzodiazepines***			
CLOZAPINE ORAL TABLET 100 MG, 25 MG		Tier 3	
*Dibenzothiazepines***			
QUETIAPINE FUMARATE ORAL TABLET 100 MG, 200 MG, 25 MG, 300 MG, 400 MG, 50 MG		Tier 3	
*Dibenzoxazepines***			
LOXAPINE SUCCINATE ORAL CAPSULE 10 MG, 25 MG		Tier 3	
*Dihydroindolones***			
MOLINDONE HCL ORAL TABLET 10 MG, 25 MG, 5 MG		Tier 3	
*Phenothiazines***			
CHLORPROMAZINE HCL ORAL CONCENTRATE 100 MG/ML, 30 MG/ML		Tier 3	
CHLORPROMAZINE HCL ORAL TABLET 10 MG, 100 MG, 25 MG, 50 MG		Tier 3	
FLUPHENAZINE HCL ORAL TABLET 2.5 MG, 5 MG		Tier 3	
PERPHENAZINE ORAL TABLET 2 MG, 4 MG, 8 MG		Tier 3	
PROCHLORPERAZINE MALEATE ORAL TABLET 10 MG, 5 MG		Tier 3	
PROCHLORPERAZINE RECTAL SUPPOSITORY 25 MG		Tier 3	
THIORIDAZINE HCL ORAL TABLET 10 MG, 100 MG, 25 MG, 50 MG		Tier 3	
TRIFLUOPERAZINE HCL ORAL TABLET 1 MG, 10 MG, 2 MG, 5 MG		Tier 3	
*Quinolinone Derivatives***			
ARIPIRAZOLE ORAL SOLUTION 1 MG/ML		Tier 3	PA

Drug Name	Brand Tier	Generic Tier	Formulary Notes
ARIPIPRAZOLE ORAL TABLET 10 MG, 15 MG, 2 MG, 20 MG, 30 MG, 5 MG		Tier 3	PA
*Thienbenzodiazepines***			
OLANZAPINE INTRAMUSCULAR SOLUTION RECONSTITUTED 10 MG		Tier 3	
OLANZAPINE ORAL TABLET 10 MG, 15 MG, 2.5 MG, 20 MG, 5 MG, 7.5 MG		Tier 3	
OLANZAPINE ORAL TABLET DISPERSIBLE 10 MG, 15 MG, 20 MG, 5 MG		Tier 3	
*Thioxanthenes***			
THIOTHIXENE ORAL CAPSULE 1 MG, 2 MG, 5 MG		Tier 3	
Antivirals			
*Antiretroviral Combinations***			
ABACAVIR SULFATE-LAMIVUDINE ORAL TABLET 600-300 MG		Tier 6	
ABACAVIR-LAMIVUDINE-ZIDOVUDINE ORAL TABLET 300-150-300 MG		Tier 6	
BIKTARVY ORAL TABLET 50-200-25 MG	Tier 6		
COMPLERA ORAL TABLET 200-25-300 MG	Tier 6		
EFAVIRENZ-EMTRICITAB-TENOFOVIR ORAL TABLET 600-200-300 MG		Tier 6	
EFAVIRENZ-LAMIVUDINE-TENOFOVIR ORAL TABLET 400-300-300 MG, 600-300-300 MG		Tier 3	
EMTRICITABINE-TENOFOVIR DF ORAL TABLET 100-150 MG, 133-200 MG, 167-250 MG, 200-300 MG		Tier 1	
EVOTAZ ORAL TABLET 300-150 MG	Tier 6		
GENVOYA ORAL TABLET 150-150-200-10 MG	Tier 6		
JULUCA ORAL TABLET 50-25 MG	Tier 6		
LAMIVUDINE-ZIDOVUDINE ORAL TABLET 150-300 MG		Tier 6	
LOPINAVIR-RITONAVIR ORAL SOLUTION 400-100 MG/5ML		Tier 6	
LOPINAVIR-RITONAVIR ORAL TABLET 100-25 MG, 200-50 MG		Tier 6	
ODEFSEY ORAL TABLET 200-25-25 MG	Tier 6		

Drug Name	Brand Tier	Generic Tier	Formulary Notes
STRIBILD ORAL TABLET 150-150-200-300 MG	Tier 6		
TRIUMEQ ORAL TABLET 600-50-300 MG	Tier 6		
*Antiretrovirals - Ccr5 Antagonists (Entry Inhibitor)***			
SELZENTRY ORAL TABLET 150 MG, 300 MG	Tier 4		
*Antiretrovirals - Fusion Inhibitors***			
FUZEON SUBCUTANEOUS SOLUTION RECONSTITUTED 90 MG	Tier 6		
*Antiretrovirals - Integrase Inhibitors***			
ISENTRESS ORAL PACKET 100 MG	Tier 6		
ISENTRESS ORAL TABLET 400 MG	Tier 6		
ISENTRESS ORAL TABLET CHEWABLE 100 MG, 25 MG	Tier 6		
TIVICAY ORAL TABLET 10 MG, 25 MG, 50 MG	Tier 6		
*Antiretrovirals - Protease Inhibitors***			
APTIVUS ORAL CAPSULE 250 MG	Tier 6		
ATAZANAVIR SULFATE ORAL CAPSULE 150 MG, 200 MG, 300 MG		Tier 6	
CRIXIVAN ORAL CAPSULE 400 MG	Tier 6		
FOSAMPRENAVIR CALCIUM ORAL TABLET 700 MG		Tier 6	
INVIRASE ORAL TABLET 500 MG	Tier 6		
LEXIVA ORAL SUSPENSION 50 MG/ML	Tier 6		
NORVIR ORAL SOLUTION 80 MG/ML	Tier 6		
PREZISTA ORAL SUSPENSION 100 MG/ML	Tier 6		
PREZISTA ORAL TABLET 150 MG, 600 MG, 75 MG, 800 MG	Tier 6		
REYATAZ ORAL PACKET 50 MG	Tier 6		
RITONAVIR ORAL TABLET 100 MG		Tier 6	
VIRACEPT ORAL TABLET 250 MG, 625 MG	Tier 6		
*Antiretrovirals - Rti-Non-Nucleoside Analogues***			
EDURANT ORAL TABLET 25 MG	Tier 6		

Drug Name	Brand Tier	Generic Tier	Formulary Notes
EFAVIRENZ ORAL CAPSULE 200 MG, 50 MG		Tier 6	
EFAVIRENZ ORAL TABLET 600 MG		Tier 6	
ETRAVIRINE ORAL TABLET 100 MG, 200 MG		Tier 6	
INTELENCE ORAL TABLET 25 MG	Tier 6		
NEVIRAPINE ER ORAL TABLET EXTENDED RELEASE 24 HOUR 100 MG, 400 MG		Tier 3	
NEVIRAPINE ORAL SUSPENSION 50 MG/5ML		Tier 5	
NEVIRAPINE ORAL TABLET 200 MG		Tier 6	
*Antiretrovirals - Rti-Nucleoside Analogues-Purines***			
ABACAVIR SULFATE ORAL SOLUTION 20 MG/ML		Tier 6	
ABACAVIR SULFATE ORAL TABLET 300 MG		Tier 6	
*Antiretrovirals - Rti-Nucleoside Analogues-Pyrimidines***			
EMTRICITABINE ORAL CAPSULE 200 MG		Tier 6	
EMTRIVA ORAL SOLUTION 10 MG/ML	Tier 6		
LAMIVUDINE ORAL TABLET 150 MG, 300 MG		Tier 6	
*Antiretrovirals - Rti-Nucleoside Analogues-Thymidines***			
RETROVIR INTRAVENOUS SOLUTION 10 MG/ML	Tier 6		
STAVUDINE ORAL CAPSULE 15 MG, 20 MG, 30 MG, 40 MG		Tier 3	
ZIDOVUDINE ORAL CAPSULE 100 MG		Tier 3	
ZIDOVUDINE ORAL SYRUP 50 MG/5ML		Tier 3	
ZIDOVUDINE ORAL TABLET 300 MG		Tier 3	
*Antiretrovirals - Rti-Nucleotide Analogues***			
TENOFOVIR DISOPROXIL FUMARATE ORAL TABLET 300 MG		Tier 6	
VIREAD ORAL POWDER 40 MG/GM	Tier 6		
VIREAD ORAL TABLET 150 MG, 200 MG, 250 MG	Tier 6		

Drug Name	Brand Tier	Generic Tier	Formulary Notes
*Cmv Agents***			
GANCICLOVIR SODIUM INTRAVENOUS SOLUTION RECONSTITUTED 500 MG		Tier 3	
VALGANCICLOVIR HCL ORAL TABLET 450 MG		Tier 3	
*Hepatitis B Agents***			
ADEFOVIR DIPIVOXIL ORAL TABLET 10 MG		Tier 3	
*Hepatitis C Agent - Combinations***			
LEDIPASVIR-SOFOSBUVIR ORAL TABLET 90-400 MG		Tier 6	PA
MAVYRET ORAL TABLET 100-40 MG	Tier 6		PA
SOFOSBUVIR-VELPATASVIR ORAL TABLET 400-100 MG		Tier 6	PA
*Hepatitis C Agents***			
PEGASYS SUBCUTANEOUS SOLUTION 180 MCG/ML	Tier 6		
PEGASYS SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 180 MCG/0.5ML	Tier 6		
RIBAVIRIN ORAL CAPSULE 200 MG		Tier 3	
RIBAVIRIN ORAL TABLET 200 MG		Tier 3	
SOVALDI ORAL TABLET 400 MG	Tier 6		PA
*Herpes Agents - Purine Analogues***			
ACYCLOVIR ORAL CAPSULE 200 MG		Tier 3	
ACYCLOVIR ORAL SUSPENSION 200 MG/5ML		Tier 3	
ACYCLOVIR ORAL TABLET 400 MG, 800 MG		Tier 3	
VALACYCLOVIR HCL ORAL TABLET 1 GM, 500 MG		Tier 3	
*Herpes Agents - Thymidine Analogues***			
FAMCICLOVIR ORAL TABLET 125 MG, 250 MG, 500 MG		Tier 3	
*Influenza Agents***			
RIMANTADINE HCL ORAL TABLET 100 MG		Tier 3	
*Neuraminidase Inhibitors***			
OSELTAMIVIR PHOSPHATE ORAL CAPSULE 30 MG, 45 MG, 75 MG		Tier 3	

Drug Name	Brand Tier	Generic Tier	Formulary Notes
OSELTAMIVIR PHOSPHATE ORAL SUSPENSION RECONSTITUTED 6 MG/ML		Tier 3	
*Rsv Agents - Nucleoside Analogues***			
RIBAVIRIN INHALATION SOLUTION RECONSTITUTED 6 GM		Tier 6	PA
Beta Blockers			
*Alpha-Beta Blockers***			
CARVEDILOL ORAL TABLET 12.5 MG, 25 MG, 3.125 MG, 6.25 MG		Tier 3	
LABETALOL HCL ORAL TABLET 100 MG, 200 MG, 300 MG		Tier 3	
*Beta Blockers Cardio-Selective***			
ACEBUTOLOL HCL ORAL CAPSULE 200 MG, 400 MG		Tier 3	
ATENOLOL ORAL TABLET 100 MG, 25 MG, 50 MG		Tier 2	
BETAXOLOL HCL ORAL TABLET 10 MG		Tier 3	
BISOPROLOL FUMARATE ORAL TABLET 10 MG, 5 MG		Tier 3	
METOPROLOL SUCCINATE ER ORAL TABLET EXTENDED RELEASE 24 HOUR 100 MG, 200 MG, 25 MG, 50 MG		Tier 3	
METOPROLOL TARTRATE ORAL TABLET 100 MG, 25 MG, 50 MG		Tier 3	
*Beta Blockers Non-Selective***			
NADOLOL ORAL TABLET 20 MG, 40 MG, 80 MG		Tier 3	
PINDOLOL ORAL TABLET 10 MG, 5 MG		Tier 3	
PROPRANOLOL HCL ER ORAL CAPSULE EXTENDED RELEASE 24 HOUR 120 MG, 160 MG, 60 MG, 80 MG		Tier 2	
PROPRANOLOL HCL ORAL TABLET 10 MG, 20 MG, 40 MG, 60 MG, 80 MG		Tier 2	
SORINE ORAL TABLET (SOTALOL HCL) 120 MG, 160 MG, 240 MG, 80 MG	Tier 3	Tier 3	
SOTALOL HCL (AF) ORAL TABLET 120 MG, 160 MG, 80 MG		Tier 3	
TIMOLOL MALEATE ORAL TABLET 10 MG, 20 MG, 5 MG		Tier 3	

Drug Name	Brand Tier	Generic Tier	Formulary Notes
Calcium Channel Blockers			
*Calcium Channel Blockers***			
AMLODIPINE BESYLATE ORAL TABLET 10 MG, 2.5 MG, 5 MG		Tier 3	
CARTIA XT ORAL CAPSULE EXTENDED RELEASE 24 HOUR (DILTIAZEM HCL ER COATED BEADS) 120 MG	Tier 3	Tier 3	
CARTIA XT ORAL CAPSULE EXTENDED RELEASE 24 HOUR (DILTIAZEM HCL ER COATED BEADS) 180 MG, 240 MG, 300 MG	Tier 3	Tier 3	
DILTIAZEM HCL ER COATED BEADS ORAL CAPSULE EXTENDED RELEASE 24 HOUR 360 MG		Tier 3	
DILTIAZEM HCL ER ORAL CAPSULE EXTENDED RELEASE 12 HOUR 120 MG, 60 MG, 90 MG		Tier 3	
DILTIAZEM HCL ER ORAL CAPSULE EXTENDED RELEASE 24 HOUR 120 MG, 180 MG, 240 MG		Tier 3	
DILTIAZEM HCL ORAL TABLET 120 MG, 30 MG, 60 MG, 90 MG		Tier 3	
DILT-XR ORAL CAPSULE EXTENDED RELEASE 24 HOUR 120 MG, 180 MG, 240 MG		Tier 3	
FELODIPINE ER ORAL TABLET EXTENDED RELEASE 24 HOUR 10 MG, 2.5 MG, 5 MG		Tier 3	
ISRADIPINE ORAL CAPSULE 2.5 MG, 5 MG		Tier 3	
MATZIM LA ORAL TABLET EXTENDED RELEASE 24 HOUR (DILTIAZEM HCL ER COATED BEADS) 180 MG, 240 MG, 300 MG, 360 MG, 420 MG	Tier 3	Tier 3	
NIFEDIPINE ER ORAL TABLET EXTENDED RELEASE 24 HOUR 30 MG, 60 MG, 90 MG		Tier 3	
NIFEDIPINE ER OSMOTIC RELEASE ORAL TABLET EXTENDED RELEASE 24 HOUR 30 MG, 60 MG, 90 MG		Tier 3	
NIFEDIPINE ORAL CAPSULE 10 MG, 20 MG		Tier 3	
NISOLDIPINE ER ORAL TABLET EXTENDED RELEASE 24 HOUR 17 MG, 20 MG, 25.5 MG, 30 MG, 34 MG, 40 MG, 8.5 MG		Tier 3	
TAZTIA XT ORAL CAPSULE EXTENDED RELEASE 24 HOUR (DILTIAZEM HCL ER BEADS) 120 MG, 240 MG, 300 MG, 360 MG	Tier 3	Tier 3	

Drug Name	Brand Tier	Generic Tier	Formulary Notes
TAZTIA XT ORAL CAPSULE EXTENDED RELEASE 24 HOUR (DILTIAZEM HCL ER BEADS) 180 MG	Tier 3	Tier 3	
TIADYLT ER ORAL CAPSULE EXTENDED RELEASE 24 HOUR (DILTIAZEM HCL ER BEADS) 120 MG, 240 MG, 300 MG, 360 MG, 420 MG	Tier 3	Tier 3	
TIADYLT ER ORAL CAPSULE EXTENDED RELEASE 24 HOUR (DILTIAZEM HCL ER BEADS) 180 MG	Tier 3	Tier 3	
VERAPAMIL HCL ER ORAL CAPSULE EXTENDED RELEASE 24 HOUR 100 MG, 120 MG, 180 MG, 200 MG, 240 MG, 300 MG, 360 MG		Tier 3	
VERAPAMIL HCL ER ORAL TABLET EXTENDED RELEASE 120 MG, 180 MG, 240 MG		Tier 3	
VERAPAMIL HCL ORAL TABLET 120 MG, 40 MG, 80 MG		Tier 3	
Cardiotonics			
*Cardiac Glycosides***			
DIGITEK ORAL TABLET (DIGOXIN) 125 MCG, 250 MCG	Tier 3	Tier 3	
DIGOX ORAL TABLET (DIGOXIN) 125 MCG, 250 MCG	Tier 3	Tier 3	
DIGOXIN INJECTION SOLUTION 0.25 MG/ML		Tier 3	
DIGOXIN ORAL SOLUTION 0.05 MG/ML		Tier 3	
LANOXIN PEDIATRIC INJECTION SOLUTION 0.1 MG/ML	Tier 4		
Cardiovascular Agents - Misc.			
*Calcium Channel Blocker & Hmg Coa Reductase Inhibit Comb***			
AMLODIPINE-ATORVASTATIN ORAL TABLET 10-10 MG, 10-20 MG, 10-40 MG, 10-80 MG, 2.5-10 MG, 2.5-20 MG, 2.5-40 MG, 5-10 MG, 5-20 MG, 5-40 MG, 5-80 MG		Tier 3	
*Neprilysin Inhib (Arni)-Angiotensin Ii Recept Antag Comb***			
ENTRESTO ORAL TABLET 24-26 MG, 49-51 MG, 97-103 MG	Tier 5		PA

Drug Name	Brand Tier	Generic Tier	Formulary Notes
*Prostaglandin Vasodilators***			
ORENITRAM ORAL TABLET EXTENDED RELEASE 0.125 MG, 0.25 MG, 1 MG, 2.5 MG, 5 MG	Tier 6		PA
TREPROSTINIL INJECTION SOLUTION 100 MG/20ML, 20 MG/20ML, 200 MG/20ML, 50 MG/20ML		Tier 6	PA
TYVASO INHALATION SOLUTION 0.6 MG/ML	Tier 6		PA; QL (2.9 ML per 1 day)
TYVASO REFILL INHALATION SOLUTION 0.6 MG/ML	Tier 6		PA; QL (2.9 ML per 1 day)
TYVASO STARTER INHALATION SOLUTION 0.6 MG/ML	Tier 6		PA; QL (2.9 ML per 1 day)
*Pulmonary Hypertension - Endothelin Receptor Antagonists***			
AMBRISENTAN ORAL TABLET 10 MG, 5 MG		Tier 6	PA; QL (1 EA per 1 day)
BOSENTAN ORAL TABLET 125 MG, 62.5 MG		Tier 3	PA; QL (2 EA per 1 day)
*Pulmonary Hypertension - Phosphodiesterase Inhibitors***			
SILDENAFIL CITRATE INTRAVENOUS SOLUTION 10 MG/12.5ML		Tier 3	PA
SILDENAFIL CITRATE ORAL SUSPENSION RECONSTITUTED 10 MG/ML		Tier 3	PA
SILDENAFIL CITRATE ORAL TABLET 20 MG		Tier 3	PA; QL (3 EA per 1 day)
TADALAFIL (PAH) ORAL TABLET 20 MG		Tier 3	PA; QL (2 EA per 1 day)
*Pulmonary Hypertension - Prostacyclin Receptor Agonist***			
UPTRAVI ORAL TABLET 1000 MCG, 1200 MCG, 1400 MCG, 1600 MCG, 200 MCG, 400 MCG, 600 MCG, 800 MCG	Tier 6		
Cephalosporins			
*Cephalosporins - 1St Generation***			
CEFADROXIL ORAL CAPSULE 500 MG		Tier 3	
CEFADROXIL ORAL SUSPENSION RECONSTITUTED 250 MG/5ML, 500 MG/5ML		Tier 3	
CEFADROXIL ORAL TABLET 1 GM		Tier 3	
CEPHALEXIN ORAL CAPSULE 250 MG, 500 MG, 750 MG		Tier 3	

Drug Name	Brand Tier	Generic Tier	Formulary Notes
CEPHALEXIN ORAL SUSPENSION RECONSTITUTED 125 MG/5ML, 250 MG/5ML		Tier 3	
CEPHALEXIN ORAL TABLET 250 MG, 500 MG		Tier 3	
*Cephalosporins - 2Nd Generation***			
CEFACLOR ER ORAL TABLET EXTENDED RELEASE 12 HOUR 500 MG		Tier 3	
CEFACLOR ORAL CAPSULE 250 MG, 500 MG		Tier 3	
CEFACLOR ORAL SUSPENSION RECONSTITUTED 125 MG/5ML, 250 MG/5ML, 375 MG/5ML		Tier 3	
CEFPROZIL ORAL SUSPENSION RECONSTITUTED 125 MG/5ML, 250 MG/5ML		Tier 3	
CEFPROZIL ORAL TABLET 250 MG, 500 MG		Tier 3	
CEFUROXIME AXETIL ORAL TABLET 250 MG, 500 MG		Tier 3	
CEFUROXIME SODIUM INJECTION SOLUTION RECONSTITUTED 750 MG		Tier 3	
CEFUROXIME SODIUM INTRAVENOUS SOLUTION RECONSTITUTED 1.5 GM		Tier 3	
*Cephalosporins - 3Rd Generation***			
CEFDINIR ORAL CAPSULE 300 MG		Tier 3	
CEFDINIR ORAL SUSPENSION RECONSTITUTED 125 MG/5ML, 250 MG/5ML		Tier 3	
CEFPODOXIME PROXETIL ORAL TABLET 200 MG		Tier 3	
Contraceptives			
*Biphasic Contraceptives - Oral***			
AZURETTE ORAL TABLET (DESOGESTREL-ETHINYL ESTRADIOL) 0.15-0.02/0.01 MG (21/5)	Tier 1	Tier 1	
KARIVA ORAL TABLET (DESOGESTREL-ETHINYL ESTRADIOL) 0.15-0.02/0.01 MG (21/5)	Tier 1	Tier 1	
LO LOESTRIN FE ORAL TABLET 1 MG-10 MCG / 10 MCG	Tier 1		

Drug Name	Brand Tier	Generic Tier	Formulary Notes
PIMTREA ORAL TABLET (DESOGESTREL-ETHINYL ESTRADIOL) 0.15-0.02/0.01 MG (21/5)	Tier 1	Tier 1	
SIMLIYA ORAL TABLET (DESOGESTREL-ETHINYL ESTRADIOL) 0.15-0.02/0.01 MG (21/5)	Tier 1	Tier 1	
VIORELE ORAL TABLET 0.15-0.02/0.01 MG (21/5)		Tier 1	
VOLNEA ORAL TABLET (DESOGESTREL-ETHINYL ESTRADIOL) 0.15-0.02/0.01 MG (21/5)	Tier 1	Tier 1	
*Combination Contraceptives - Oral***			
AFIRMELLE ORAL TABLET (LEVONORGESTREL-ETHINYL ESTRAD) 0.1-20 MG-MCG	Tier 1	Tier 1	
ALTAVERA ORAL TABLET (LEVONORGESTREL-ETHINYL ESTRAD) 0.15-30 MG-MCG	Tier 1	Tier 1	
APRI ORAL TABLET (DESOGESTREL-ETHINYL ESTRADIOL) 0.15-30 MG-MCG	Tier 1	Tier 1	
AUBRA EQ ORAL TABLET (LEVONORGESTREL-ETHINYL ESTRAD) 0.1-20 MG-MCG	Tier 1	Tier 1	
AUBRA ORAL TABLET (LEVONORGESTREL-ETHINYL ESTRAD) 0.1-20 MG-MCG	Tier 1	Tier 1	
AUROVELA 1.5/30 ORAL TABLET (NORETHINDRONE ACET-ETHINYL EST) 1.5-30 MG-MCG	Tier 1	Tier 1	
AUROVELA 1/20 ORAL TABLET (NORETHINDRONE ACET-ETHINYL EST) 1-20 MG-MCG	Tier 1	Tier 1	
AUROVELA 24 FE ORAL TABLET 1-20 MG-MCG(24)	Tier 1		
AUROVELA FE 1.5/30 ORAL TABLET (NORETHIN ACE-ETH ESTRAD-FE) 1.5-30 MG-MCG	Tier 1	Tier 1	
AUROVELA FE 1/20 ORAL TABLET (NORETHIN ACE-ETH ESTRAD-FE) 1-20 MG-MCG	Tier 1	Tier 1	
AVIANE ORAL TABLET (LEVONORGESTREL-ETHINYL ESTRAD) 0.1-20 MG-MCG	Tier 1	Tier 1	

Drug Name	Brand Tier	Generic Tier	Formulary Notes
AYUNA ORAL TABLET (LEVONORGESTREL-ETHINYL ESTRAD) 0.15-30 MG-MCG	Tier 1	Tier 1	
BALZIVA ORAL TABLET (BRIELLYN) 0.4-35 MG-MCG	Tier 1	Tier 1	
BLISOVI 24 FE ORAL TABLET 1-20 MG-MCG(24)	Tier 1		
BLISOVI FE 1.5/30 ORAL TABLET (NORETHIN ACE-ETH ESTRAD-FE) 1.5-30 MG-MCG	Tier 1	Tier 1	
BLISOVI FE 1/20 ORAL TABLET (NORETHIN ACE-ETH ESTRAD-FE) 1-20 MG-MCG	Tier 1	Tier 1	
CHARLOTTE 24 FE ORAL TABLET CHEWABLE (NORETHIN ACE-ETH ESTRAD-FE) 1-20 MG-MCG(24)	Tier 1	Tier 1	
CHATEAL EQ ORAL TABLET (LEVONORGESTREL-ETHINYL ESTRAD) 0.15-30 MG-MCG	Tier 1	Tier 1	
CHATEAL ORAL TABLET (LEVONORGESTREL-ETHINYL ESTRAD) 0.15-30 MG-MCG	Tier 1	Tier 1	
CRYSELLE-28 ORAL TABLET 0.3-30 MG-MCG	Tier 1		
CYCLAFEM 1/35 ORAL TABLET (ALYACEN 1/35) 1-35 MG-MCG	Tier 1	Tier 1	
CYRED EQ ORAL TABLET (DESOGESTREL-ETHINYL ESTRADIOL) 0.15-30 MG-MCG	Tier 1	Tier 1	
CYRED ORAL TABLET (DESOGESTREL-ETHINYL ESTRADIOL) 0.15-30 MG-MCG	Tier 1	Tier 1	
DASETTA 1/35 ORAL TABLET (ALYACEN 1/35) 1-35 MG-MCG	Tier 1	Tier 1	
DELYLA ORAL TABLET (LEVONORGESTREL-ETHINYL ESTRAD) 0.1-20 MG-MCG	Tier 1	Tier 1	
DROSPIREN-ETH ESTRAD-LEVOMEFOL ORAL TABLET 3-0.02-0.451 MG		Tier 1	
ELINEST ORAL TABLET 0.3-30 MG-MCG	Tier 1		
EMOQUETTE ORAL TABLET (DESOGESTREL-ETHINYL ESTRADIOL) 0.15-30 MG-MCG	Tier 1	Tier 1	

Drug Name	Brand Tier	Generic Tier	Formulary Notes
ENSKYCE ORAL TABLET (DESGESTREL-ETHINYL ESTRADIOL) 0.15-30 MG-MCG	Tier 1	Tier 1	
ESTARYLLA ORAL TABLET (NORGESTIMATE-ETH ESTRADIOL) 0.25-35 MG-MCG	Tier 1	Tier 1	
FALMINA ORAL TABLET (LEVONORGESTREL-ETHINYL ESTRAD) 0.1-20 MG-MCG	Tier 1	Tier 1	
FEMYNOR ORAL TABLET (NORGESTIMATE-ETH ESTRADIOL) 0.25-35 MG-MCG	Tier 1	Tier 1	
GEMMILY ORAL CAPSULE (NORETHIN ACE-ETH ESTRAD-FE) 1-20 MG-MCG(24)	Tier 3	Tier 3	
HAILEY 1.5/30 ORAL TABLET (NORETHINDRONE ACET-ETHINYL EST) 1.5-30 MG-MCG	Tier 1	Tier 1	
HAILEY 24 FE ORAL TABLET 1-20 MG-MCG(24)	Tier 1		
HAILEY FE 1.5/30 ORAL TABLET (NORETHIN ACE-ETH ESTRAD-FE) 1.5-30 MG-MCG	Tier 1	Tier 1	
HAILEY FE 1/20 ORAL TABLET (NORETHIN ACE-ETH ESTRAD-FE) 1-20 MG-MCG	Tier 1	Tier 1	
ISIBLOOM ORAL TABLET (DESGESTREL-ETHINYL ESTRADIOL) 0.15-30 MG-MCG	Tier 1	Tier 1	
JASMIEL ORAL TABLET (DROSPIRENONE-ETHINYL ESTRADIOL) 3-0.02 MG	Tier 1	Tier 1	
JULEBER ORAL TABLET (DESGESTREL-ETHINYL ESTRADIOL) 0.15-30 MG-MCG	Tier 1	Tier 1	
JUNEL 1.5/30 ORAL TABLET (NORETHINDRONE ACET-ETHINYL EST) 1.5-30 MG-MCG	Tier 1	Tier 1	
JUNEL 1/20 ORAL TABLET (NORETHINDRONE ACET-ETHINYL EST) 1-20 MG-MCG	Tier 1	Tier 1	
JUNEL FE 1.5/30 ORAL TABLET (NORETHIN ACE-ETH ESTRAD-FE) 1.5-30 MG-MCG	Tier 1	Tier 1	
JUNEL FE 1/20 ORAL TABLET (NORETHIN ACE-ETH ESTRAD-FE) 1-20 MG-MCG	Tier 1	Tier 1	

Drug Name	Brand Tier	Generic Tier	Formulary Notes
JUNEL FE 24 ORAL TABLET 1-20 MG-MCG(24)	Tier 1		
KAITLIB FE ORAL TABLET CHEWABLE (NORETHIN-ETH ESTRADIOL-FE) 0.8-25 MG-MCG	Tier 1	Tier 1	
KALLIGA ORAL TABLET (DESOGESTREL-ETHINYL ESTRADIOL) 0.15-30 MG-MCG	Tier 1	Tier 1	
KELNOR 1/35 ORAL TABLET (ETHYNODIOL DIAC-ETH ESTRADIOL) 1-35 MG-MCG	Tier 1	Tier 1	
KELNOR 1/50 ORAL TABLET (ETHYNODIOL DIAC-ETH ESTRADIOL) 1-50 MG-MCG	Tier 1	Tier 1	
KURVELO ORAL TABLET (LEVONORGESTREL-ETHINYL ESTRAD) 0.15-30 MG-MCG	Tier 1	Tier 1	
LARIN 1.5/30 ORAL TABLET (NORETHINDRONE ACET-ETHINYL EST) 1.5-30 MG-MCG	Tier 1	Tier 1	
LARIN 1/20 ORAL TABLET (NORETHINDRONE ACET-ETHINYL EST) 1-20 MG-MCG	Tier 1	Tier 1	
LARIN 24 FE ORAL TABLET 1-20 MG-MCG(24)	Tier 1		
LARIN FE 1.5/30 ORAL TABLET (NORETHIN ACE-ETH ESTRAD-FE) 1.5-30 MG-MCG	Tier 1	Tier 1	
LARIN FE 1/20 ORAL TABLET (NORETHIN ACE-ETH ESTRAD-FE) 1-20 MG-MCG	Tier 1	Tier 1	
LARISSIA ORAL TABLET (LEVONORGESTREL-ETHINYL ESTRAD) 0.1-20 MG-MCG	Tier 1	Tier 1	
LAYOLIS FE ORAL TABLET CHEWABLE (NORETHIN-ETH ESTRADIOL-FE) 0.8-25 MG-MCG	Tier 1	Tier 1	
LESSINA ORAL TABLET (LEVONORGESTREL-ETHINYL ESTRAD) 0.1-20 MG-MCG	Tier 1	Tier 1	
LEVORA 0.15/30 (28) ORAL TABLET (LEVONORGESTREL-ETHINYL ESTRAD) 0.15-30 MG-MCG	Tier 1	Tier 1	
LILLOW ORAL TABLET (LEVONORGESTREL-ETHINYL ESTRAD) 0.15-30 MG-MCG	Tier 1	Tier 1	

Drug Name	Brand Tier	Generic Tier	Formulary Notes
LORYNA ORAL TABLET (DROSPIRENONE-ETHINYL ESTRADIOL) 3-0.02 MG	Tier 1	Tier 1	
LOW-OGESTREL ORAL TABLET 0.3-30 MG-MCG	Tier 1		
LO-ZUMANDIMINE ORAL TABLET (DROSPIRENONE-ETHINYL ESTRADIOL) 3-0.02 MG	Tier 1	Tier 1	
LUTERA ORAL TABLET (LEVONORGESTREL-ETHINYL ESTRAD) 0.1-20 MG-MCG	Tier 1	Tier 1	
MARLISSA ORAL TABLET 0.15-30 MG-MCG		Tier 1	
MERZEE ORAL CAPSULE (NORETHIN ACE-ETH ESTRAD-FE) 1-20 MG-MCG(24)	Tier 3	Tier 3	
MIBELAS 24 FE ORAL TABLET CHEWABLE (NORETHIN ACE-ETH ESTRAD-FE) 1-20 MG-MCG(24)	Tier 1	Tier 1	
MICROGESTIN 1.5/30 ORAL TABLET (NORETHINDRONE ACET-ETHINYL EST) 1.5-30 MG-MCG	Tier 1	Tier 1	
MICROGESTIN 1/20 ORAL TABLET (NORETHINDRONE ACET-ETHINYL EST) 1-20 MG-MCG	Tier 1	Tier 1	
MICROGESTIN 24 FE ORAL TABLET 1-20 MG-MCG	Tier 1		
MICROGESTIN FE 1.5/30 ORAL TABLET (NORETHIN ACE-ETH ESTRAD-FE) 1.5-30 MG-MCG	Tier 1	Tier 1	
MICROGESTIN FE 1/20 ORAL TABLET (NORETHIN ACE-ETH ESTRAD-FE) 1-20 MG-MCG	Tier 1	Tier 1	
MILI ORAL TABLET (NORGESTIMATE-ETH ESTRADIOL) 0.25-35 MG-MCG	Tier 1	Tier 1	
MONO-LINYAH ORAL TABLET (NORGESTIMATE-ETH ESTRADIOL) 0.25-35 MG-MCG	Tier 1	Tier 1	
NECON 0.5/35 (28) ORAL TABLET 0.5-35 MG-MCG	Tier 1		
NIKKI ORAL TABLET (DROSPIRENONE-ETHINYL ESTRADIOL) 3-0.02 MG	Tier 1	Tier 1	
NORTREL 0.5/35 (28) ORAL TABLET 0.5-35 MG-MCG	Tier 1		
NORTREL 1/35 (21) ORAL TABLET (ALYACEN 1/35) 1-35 MG-MCG	Tier 1	Tier 1	

Drug Name	Brand Tier	Generic Tier	Formulary Notes
NORTREL 1/35 (28) ORAL TABLET (ALYACEN 1/35) 1-35 MG-MCG	Tier 1	Tier 1	
NYMYO ORAL TABLET (NORGESTIMATE-ETH ESTRADIOL) 0.25-35 MG-MCG	Tier 1	Tier 1	
OCELLA ORAL TABLET (DROSPIRENONE-ETHINYL ESTRADIOL) 3-0.03 MG	Tier 1	Tier 1	
ORSYTHIA ORAL TABLET (LEVONORGESTREL-ETHINYL ESTRAD) 0.1-20 MG-MCG	Tier 1	Tier 1	
PHILITH ORAL TABLET (BRIELLYN) 0.4-35 MG-MCG	Tier 1	Tier 1	
PIRMELLA 1/35 ORAL TABLET (ALYACEN 1/35) 1-35 MG-MCG	Tier 1	Tier 1	
PORTIA-28 ORAL TABLET (LEVONORGESTREL-ETHINYL ESTRAD) 0.15-30 MG-MCG	Tier 1	Tier 1	
PREVIFEM ORAL TABLET (NORGESTIMATE-ETH ESTRADIOL) 0.25-35 MG-MCG	Tier 1	Tier 1	
RECLIPSEN ORAL TABLET (DESOGESTREL-ETHINYL ESTRADIOL) 0.15-30 MG-MCG	Tier 1	Tier 1	
SPRINTEC 28 ORAL TABLET (NORGESTIMATE-ETH ESTRADIOL) 0.25-35 MG-MCG	Tier 1	Tier 1	
SRONYX ORAL TABLET (LEVONORGESTREL-ETHINYL ESTRAD) 0.1-20 MG-MCG	Tier 1	Tier 1	
SYEDA ORAL TABLET (DROSPIRENONE-ETHINYL ESTRADIOL) 3-0.03 MG	Tier 1	Tier 1	
TARINA 24 FE ORAL TABLET 1-20 MG-MCG(24)	Tier 1		
TARINA FE 1/20 EQ ORAL TABLET (NORETHIN ACE-ETH ESTRAD-FE) 1-20 MG-MCG	Tier 1	Tier 1	
TARINA FE 1/20 ORAL TABLET (NORETHIN ACE-ETH ESTRAD-FE) 1-20 MG-MCG	Tier 1	Tier 1	
TAYSOFY ORAL CAPSULE (NORETHIN ACE-ETH ESTRAD-FE) 1-20 MG-MCG(24)	Tier 3	Tier 3	
TYBLUME ORAL TABLET CHEWABLE 0.1-20 MG-MCG	Tier 1		

Drug Name	Brand Tier	Generic Tier	Formulary Notes
TYDEMY ORAL TABLET (DROSPIREN-ETH ESTRAD-LEVOMEFOL) 3-0.03-0.451 MG	Tier 1	Tier 1	
VESTURA ORAL TABLET (DROSPIRENONE-ETHINYL ESTRADIOL) 3-0.02 MG	Tier 1	Tier 1	
VIENVA ORAL TABLET (LEVONORGESTREL-ETHINYL ESTRAD) 0.1-20 MG-MCG	Tier 1	Tier 1	
VYFEMLA ORAL TABLET (BRIELLYN) 0.4-35 MG-MCG	Tier 1	Tier 1	
VYLIBRA ORAL TABLET (NORGESTIMATE-ETH ESTRADIOL) 0.25-35 MG-MCG	Tier 1	Tier 1	
WERA ORAL TABLET 0.5-35 MG-MCG	Tier 1		
WYMZYA FE ORAL TABLET CHEWABLE (NORETHIN-ETH ESTRADIOL-FE) 0.4-35 MG-MCG	Tier 1	Tier 1	
ZARAH ORAL TABLET (DROSPIRENONE-ETHINYL ESTRADIOL) 3-0.03 MG	Tier 1	Tier 1	
ZOVIA 1/35 (28) ORAL TABLET (ETHYNODIOL DIAC-ETH ESTRADIOL) 1-35 MG-MCG	Tier 1	Tier 1	
ZOVIA 1/35E (28) ORAL TABLET (ETHYNODIOL DIAC-ETH ESTRADIOL) 1-35 MG-MCG	Tier 1	Tier 1	
ZUMANDIMINE ORAL TABLET (DROSPIRENONE-ETHINYL ESTRADIOL) 3-0.03 MG	Tier 1	Tier 1	
*Combination Contraceptives - Transdermal***			
XULANE TRANSDERMAL PATCH WEEKLY 150-35 MCG/24HR	Tier 1		
ZAFEMY TRANSDERMAL PATCH WEEKLY 150-35 MCG/24HR	Tier 1		
*Combination Contraceptives - Vaginal***			
ELURYNG VAGINAL RING (ETONOGESTREL-ETHINYL ESTRADIOL) 0.12-0.015 MG/24HR	Tier 1	Tier 1	

Drug Name	Brand Tier	Generic Tier	Formulary Notes
*Continuous Contraceptives - Oral***			
AMETHYST ORAL TABLET (LEVONORGESTREL-ETHINYL ESTRAD) 90-20 MCG	Tier 1	Tier 1	
DOLISHALE ORAL TABLET (LEVONORGESTREL-ETHINYL ESTRAD) 90-20 MCG	Tier 1	Tier 1	
*Emergency Contraceptives***			
AFTERA ORAL TABLET (LEVONORGESTREL) 1.5 MG	Tier 1	Tier 1	
AFTERPILL ORAL TABLET (LEVONORGESTREL) 1.5 MG	Tier 1	Tier 1	
ECONTRA EZ ORAL TABLET (LEVONORGESTREL) 1.5 MG	Tier 1	Tier 1	
ECONTRA ONE-STEP ORAL TABLET (LEVONORGESTREL) 1.5 MG	Tier 1	Tier 1	
ELLA ORAL TABLET 30 MG	Tier 1		
MY CHOICE ORAL TABLET (LEVONORGESTREL) 1.5 MG	Tier 1	Tier 1	
MY WAY ORAL TABLET (LEVONORGESTREL) 1.5 MG	Tier 1	Tier 1	
NEW DAY ORAL TABLET (LEVONORGESTREL) 1.5 MG	Tier 1	Tier 1	
OPCICON ONE-STEP ORAL TABLET (LEVONORGESTREL) 1.5 MG	Tier 1	Tier 1	
OPTION 2 ORAL TABLET (LEVONORGESTREL) 1.5 MG	Tier 1	Tier 1	
PLAN B ONE-STEP ORAL TABLET (LEVONORGESTREL) 1.5 MG	Tier 1	Tier 1	
PREVENTEZA ORAL TABLET (LEVONORGESTREL) 1.5 MG	Tier 1	Tier 1	
REACT ORAL TABLET (LEVONORGESTREL) 1.5 MG	Tier 1	Tier 1	
TAKE ACTION ORAL TABLET (LEVONORGESTREL) 1.5 MG	Tier 1	Tier 1	
*Extended-Cycle Contraceptives - Oral***			
AMETHIA ORAL TABLET (LEVONORGEST-ETH ESTRAD 91-DAY) 0.15-0.03 &0.01 MG	Tier 1	Tier 1	

Drug Name	Brand Tier	Generic Tier	Formulary Notes
ASHLYNA ORAL TABLET (LEVONORGEST-ETH ESTRAD 91-DAY) 0.15-0.03 &0.01 MG	Tier 1	Tier 1	
CAMRESE LO ORAL TABLET (LEVONORGEST-ETH ESTRAD 91-DAY) 0.1-0.02 & 0.01 MG	Tier 1	Tier 1	
CAMRESE ORAL TABLET (LEVONORGEST-ETH ESTRAD 91-DAY) 0.15-0.03 &0.01 MG	Tier 1	Tier 1	
DAYSEE ORAL TABLET (LEVONORGEST-ETH ESTRAD 91-DAY) 0.15-0.03 &0.01 MG	Tier 1	Tier 1	
FAYOSIM ORAL TABLET (LEVONORGEST-ETH EST & ETH EST) 42-21-21-7 DAYS	Tier 1	Tier 1	
ICLEVIA ORAL TABLET (LEVONORGEST-ETH ESTRAD 91-DAY) 0.15-0.03 MG	Tier 1	Tier 1	
INTROVALE ORAL TABLET (LEVONORGEST-ETH ESTRAD 91-DAY) 0.15-0.03 MG	Tier 1	Tier 1	
JAIMIESS ORAL TABLET (LEVONORGEST-ETH ESTRAD 91-DAY) 0.15-0.03 &0.01 MG	Tier 1	Tier 1	
JOLESSA ORAL TABLET (LEVONORGEST-ETH ESTRAD 91-DAY) 0.15-0.03 MG	Tier 1	Tier 1	
LOJAIMIESS ORAL TABLET (LEVONORGEST-ETH ESTRAD 91-DAY) 0.1-0.02 & 0.01 MG	Tier 1	Tier 1	
RIVELSA ORAL TABLET (LEVONORGEST-ETH EST & ETH EST) 42-21-21-7 DAYS	Tier 1	Tier 1	
SETLAKIN ORAL TABLET (LEVONORGEST-ETH ESTRAD 91-DAY) 0.15-0.03 MG	Tier 1	Tier 1	
SIMPESSE ORAL TABLET (LEVONORGEST-ETH ESTRAD 91-DAY) 0.15-0.03 &0.01 MG	Tier 1	Tier 1	
*Progestin Contraceptives - Injectable***			
MEDROXYPROGESTERONE ACETATE INTRAMUSCULAR SUSPENSION 150 MG/ML		Tier 1	
MEDROXYPROGESTERONE ACETATE INTRAMUSCULAR SUSPENSION PREFILLED SYRINGE 150 MG/ML		Tier 1	

Drug Name	Brand Tier	Generic Tier	Formulary Notes
*Progestin Contraceptives - Oral***			
CAMILA ORAL TABLET (NORETHINDRONE) 0.35 MG	Tier 1	Tier 1	
DEBLITANE ORAL TABLET (NORETHINDRONE) 0.35 MG	Tier 1	Tier 1	
ERRIN ORAL TABLET (NORETHINDRONE) 0.35 MG	Tier 1	Tier 1	
HEATHER ORAL TABLET (NORETHINDRONE) 0.35 MG	Tier 1	Tier 1	
INCASSIA ORAL TABLET (NORETHINDRONE) 0.35 MG	Tier 1	Tier 1	
JENCYCLA ORAL TABLET (NORETHINDRONE) 0.35 MG	Tier 1	Tier 1	
LYLEQ ORAL TABLET (NORETHINDRONE) 0.35 MG	Tier 1	Tier 1	
LYZA ORAL TABLET (NORETHINDRONE) 0.35 MG	Tier 1	Tier 1	
NORA-BE ORAL TABLET (NORETHINDRONE) 0.35 MG	Tier 1	Tier 1	
NORLYDA ORAL TABLET (NORETHINDRONE) 0.35 MG	Tier 1	Tier 1	
NORLYROC ORAL TABLET (NORETHINDRONE) 0.35 MG	Tier 1	Tier 1	
SHAROBEL ORAL TABLET (NORETHINDRONE) 0.35 MG	Tier 1	Tier 1	
TULANA ORAL TABLET (NORETHINDRONE) 0.35 MG	Tier 1	Tier 1	
*Triphasic Contraceptives - Oral***			
ARANELLE ORAL TABLET 0.5/1/0.5-35 MG-MCG	Tier 1		
CAZIAN T ORAL TABLET 0.1/0.125/0.15 - 0.025 MG	Tier 1		
CYCLAFEM 7/7/7 ORAL TABLET (ALYACEN 7/7/7) 0.5/0.75/1-35 MG-MCG	Tier 1	Tier 1	
DASETTA 7/7/7 ORAL TABLET (ALYACEN 7/7/7) 0.5/0.75/1-35 MG-MCG	Tier 1	Tier 1	
ENPRESSE-28 ORAL TABLET (LEVONORG-ETH ESTRAD TRIPHASIC) 50-30/75-40/ 125-30 MCG	Tier 1	Tier 1	
LEENA ORAL TABLET 0.5/1/0.5-35 MG-MCG	Tier 1		

Drug Name	Brand Tier	Generic Tier	Formulary Notes
LEVONEST ORAL TABLET (LEVONORG-ETH ESTRAD TRIPHASIC) 50-30/75-40/ 125-30 MCG	Tier 1	Tier 1	
NORTREL 7/7/7 ORAL TABLET (ALYACEN 7/7/7) 0.5/0.75/1-35 MG-MCG	Tier 1	Tier 1	
NYLIA 7/7/7 ORAL TABLET (ALYACEN 7/7/7) 0.5/0.75/1-35 MG-MCG	Tier 1	Tier 1	
PIRMELLA 7/7/7 ORAL TABLET (ALYACEN 7/7/7) 0.5/0.75/1-35 MG-MCG	Tier 1	Tier 1	
TILIA FE ORAL TABLET 1-20/1-30/1-35 MG-MCG	Tier 1		
TRI FEMYNOR ORAL TABLET (NORGESTIM-ETH ESTRAD TRIPHASIC) 0.18/0.215/0.25 MG-35 MCG	Tier 1	Tier 1	
TRI-ESTARYLLA ORAL TABLET (NORGESTIM-ETH ESTRAD TRIPHASIC) 0.18/0.215/0.25 MG-35 MCG	Tier 1	Tier 1	
TRI-LEGEST FE ORAL TABLET 1-20/1-30/1-35 MG-MCG	Tier 1		
TRI-LINYAH ORAL TABLET (NORGESTIM-ETH ESTRAD TRIPHASIC) 0.18/0.215/0.25 MG-35 MCG	Tier 1	Tier 1	
TRI-LO-ESTARYLLA ORAL TABLET (NORGESTIM-ETH ESTRAD TRIPHASIC) 0.18/0.215/0.25 MG-25 MCG	Tier 1	Tier 1	
TRI-LO-MARZIA ORAL TABLET (NORGESTIM-ETH ESTRAD TRIPHASIC) 0.18/0.215/0.25 MG-25 MCG	Tier 1	Tier 1	
TRI-LO-MILI ORAL TABLET (NORGESTIM-ETH ESTRAD TRIPHASIC) 0.18/0.215/0.25 MG-25 MCG	Tier 1	Tier 1	
TRI-LO-SPRINTEC ORAL TABLET (NORGESTIM-ETH ESTRAD TRIPHASIC) 0.18/0.215/0.25 MG-25 MCG	Tier 1	Tier 1	
TRI-MILI ORAL TABLET (NORGESTIM-ETH ESTRAD TRIPHASIC) 0.18/0.215/0.25 MG-35 MCG	Tier 1	Tier 1	
TRI-NYMYO ORAL TABLET (NORGESTIM-ETH ESTRAD TRIPHASIC) 0.18/0.215/0.25 MG-35 MCG	Tier 1	Tier 1	
TRI-PREVIFEM ORAL TABLET (NORGESTIM-ETH ESTRAD TRIPHASIC) 0.18/0.215/0.25 MG-35 MCG	Tier 1	Tier 1	

Drug Name	Brand Tier	Generic Tier	Formulary Notes
TRI-SPRINTEC ORAL TABLET (NORGESTIM-ETH ESTRAD TRIPHASIC) 0.18/0.215/0.25 MG-35 MCG	Tier 1	Tier 1	
TRIVORA (28) ORAL TABLET (LEVONORG-ETH ESTRAD TRIPHASIC) 50-30/75-40/ 125-30 MCG	Tier 1	Tier 1	
TRI-VYLIBRA LO ORAL TABLET (NORGESTIM-ETH ESTRAD TRIPHASIC) 0.18/0.215/0.25 MG-25 MCG	Tier 1	Tier 1	
TRI-VYLIBRA ORAL TABLET (NORGESTIM-ETH ESTRAD TRIPHASIC) 0.18/0.215/0.25 MG-35 MCG	Tier 1	Tier 1	
VELIVET ORAL TABLET 0.1/0.125/0.15 - 0.025 MG	Tier 1		
Corticosteroids			
*Glucocorticosteroids***			
BUDESONIDE ORAL CAPSULE DELAYED RELEASE PARTICLES 3 MG		Tier 3	
DEXAMETHASONE INTENSOL ORAL CONCENTRATE 1 MG/ML	Tier 3		
DEXAMETHASONE ORAL ELIXIR 0.5 MG/5ML		Tier 3	
DEXAMETHASONE ORAL SOLUTION 0.5 MG/5ML		Tier 3	
DEXAMETHASONE ORAL TABLET 0.5 MG, 0.75 MG, 1 MG, 1.5 MG, 2 MG, 4 MG, 6 MG		Tier 3	
HYDROCORTISONE ORAL TABLET 10 MG, 20 MG, 5 MG		Tier 3	
METHYLPREDNISOLONE ORAL TABLET 16 MG, 32 MG, 4 MG, 8 MG		Tier 3	
METHYLPREDNISOLONE ORAL TABLET THERAPY PACK 4 MG		Tier 3	
METHYLPREDNISOLONE SODIUM SUCC INJECTION SOLUTION RECONSTITUTED 1000 MG, 125 MG, 40 MG		Tier 3	
PREDNISOLONE ORAL SOLUTION 15 MG/5ML		Tier 3	
PREDNISOLONE SODIUM PHOSPHATE ORAL SOLUTION 15 MG/5ML, 25 MG/5ML		Tier 3	
PREDNISONE INTENSOL ORAL CONCENTRATE 5 MG/ML	Tier 3		
PREDNISONE ORAL SOLUTION 5 MG/5ML		Tier 3	

Drug Name	Brand Tier	Generic Tier	Formulary Notes
PREDNISONE ORAL TABLET 1 MG, 10 MG, 2.5 MG, 20 MG, 5 MG, 50 MG		Tier 3	
PREDNISONE ORAL TABLET THERAPY PACK 10 MG (21), 10 MG (48), 5 MG (21), 5 MG (48)		Tier 3	
*Mineralocorticoids***			
FLUDROCORTISONE ACETATE ORAL TABLET 0.1 MG		Tier 3	
Cough/Cold/Allergy			
*Antitussive - Nonnarcotic***			
BENZONATATE ORAL CAPSULE 100 MG, 150 MG, 200 MG		Tier 3	
*Antitussive - Opioid***			
HYDROCODONE-HOMATROPINE ORAL SYRUP 5-1.5 MG/5ML		Tier 3	QL (240 ML Max Qty Per Fill Retail)
HYDROCODONE-HOMATROPINE ORAL TABLET 5-1.5 MG		Tier 3	QL (6 EA per 1 day)
HYDROMET ORAL SYRUP 5-1.5 MG/5ML		Tier 3	QL (240 ML Max Qty Per Fill Retail)
*Antitussive-Expectorant***			
CODITUSSIN AC ORAL LIQUID 200-10 MG/5ML		Tier 4	QL (240 ML Max Qty Per Fill Retail)
G TUSSIN AC ORAL SOLUTION 100-10 MG/5ML		Tier 3	QL (240 ML Max Qty Per Fill Retail)
GUAIATUSSIN AC ORAL SYRUP 100-10 MG/5ML		Tier 3	QL (240 ML Max Qty Per Fill Retail)
GUAIFENESIN AC ORAL SYRUP 100-10 MG/5ML		Tier 3	QL (240 ML Max Qty Per Fill Retail)
GUAIFENESIN-CODEINE ORAL SOLUTION 100-10 MG/5ML		Tier 3	QL (240 ML Max Qty Per Fill Retail)
MAXI-TUSS AC ORAL SOLUTION 100-10 MG/5ML		Tier 3	QL (240 ML Max Qty Per Fill Retail)
M-CLEAR WC ORAL SOLUTION 100-6.3 MG/5ML		Tier 4	QL (240 ML Max Qty Per Fill Retail)
TRYMINE CG ORAL LIQUID 225-7.5 MG/5ML		Tier 4	QL (240 ML Max Qty Per Fill Retail)
VIRTUSSIN A/C ORAL SOLUTION 100-10 MG/5ML		Tier 3	QL (240 ML Max Qty Per Fill Retail)
VIRTUSSIN AC W/ALC ORAL LIQUID 100-10 MG/5ML		Tier 3	QL (240 ML Max Qty Per Fill Retail)

Drug Name	Brand Tier	Generic Tier	Formulary Notes
*Antitussive-Expectorants-Decongestant***			
VIRTUSSIN DAC ORAL SOLUTION 30-10-100 MG/5ML		Tier 3	QL (240 ML Max Qty Per Fill Retail)
*Decongestant & Antihistamine***			
PROMETHAZINE VC ORAL SYRUP 6.25-5 MG/5ML		Tier 3	
PROMETHAZINE-PHENYLEPHRINE ORAL SYRUP 6.25-5 MG/5ML		Tier 3	
*Misc. Respiratory Inhalants***			
SODIUM CHLORIDE INHALATION NEBULIZATION SOLUTION 0.9 %		Tier 3	
*Non-Narc Antitussive-Antihistamine***			
PROMETHAZINE-DM ORAL SYRUP 6.25-15 MG/5ML		Tier 3	
*Non-Narc Antitussive-Decongestant-Antihistamine***			
PSEUDOEPH-BROMPHEN-DM ORAL SYRUP 30-2-10 MG/5ML		Tier 3	
*Opioid Antitussive-Antihistamine***			
HYDROCOD POLST-CPM POLST ER ORAL SUSPENSION EXTENDED RELEASE 10-8 MG/5ML		Tier 3	QL (240 ML Max Qty Per Fill Retail)
PROMETHAZINE-CODEINE ORAL SOLUTION 6.25-10 MG/5ML		Tier 3	QL (240 ML Max Qty Per Fill Retail)
PROMETHAZINE-CODEINE ORAL SYRUP 6.25-10 MG/5ML		Tier 3	QL (240 ML Max Qty Per Fill Retail)
*Opioid Antitussive-Decongestant-Antihistamine***			
CAPCOF ORAL SYRUP 5-2-10 MG/5ML		Tier 4	QL (240 ML Max Qty Per Fill Retail)
POLY-TUSSIN AC ORAL LIQUID 10-4-10 MG/5ML		Tier 4	QL (240 ML Max Qty Per Fill Retail)
PROMETHAZINE VC/CODEINE ORAL SYRUP 6.25-5-10 MG/5ML		Tier 3	QL (240 ML Max Qty Per Fill Retail)
PROMETHAZINE-PHENYLEPH-CODEINE ORAL SYRUP 6.25-5-10 MG/5ML		Tier 3	QL (240 ML Max Qty Per Fill Retail)

Drug Name	Brand Tier	Generic Tier	Formulary Notes
Dermatologicals			
*Acne Antibiotics***			
CLINDACIN ETZ EXTERNAL SWAB (CLINDAMYCIN PHOSPHATE) 1 %	Tier 3	Tier 3	
CLINDACIN-P EXTERNAL SWAB (CLINDAMYCIN PHOSPHATE) 1 %	Tier 3	Tier 3	
CLINDAMYCIN PHOSPHATE EXTERNAL FOAM 1 %		Tier 3	
CLINDAMYCIN PHOSPHATE EXTERNAL GEL 1 %		Tier 3	
CLINDAMYCIN PHOSPHATE EXTERNAL LOTION 1 %		Tier 3	
CLINDAMYCIN PHOSPHATE EXTERNAL SOLUTION 1 %		Tier 3	
ERY EXTERNAL PAD 2 %		Tier 3	
ERYTHROMYCIN EXTERNAL GEL 2 %		Tier 3	
ERYTHROMYCIN EXTERNAL SOLUTION 2 %		Tier 3	
*Acne Combinations***			
BENZOYL PEROXIDE-ERYTHROMYCIN EXTERNAL GEL 5-3 %		Tier 3	
CLINDAMYCIN PHOS-BENZOYL PEROX EXTERNAL GEL 1-5 %, 1.2-2.5 %		Tier 3	
*Acne Products***			
ACUTANE ORAL CAPSULE (ISOTRETINOIN) 20 MG, 30 MG, 40 MG	Tier 3	Tier 3	
ADAPALENE EXTERNAL CREAM 0.1 %		Tier 3	
ADAPALENE EXTERNAL GEL 0.1 %		Tier 3	
AMNESTEEM ORAL CAPSULE (ISOTRETINOIN) 10 MG, 20 MG, 40 MG	Tier 3	Tier 3	
AZELEX EXTERNAL CREAM 20 %	Tier 4		
CLARAVIS ORAL CAPSULE (ISOTRETINOIN) 10 MG, 20 MG, 30 MG, 40 MG	Tier 3	Tier 3	
ISOTRETINOIN ORAL CAPSULE 25 MG, 35 MG		Tier 3	
TRETINOIN EXTERNAL CREAM 0.025 %, 0.05 %, 0.1 %		Tier 3	
TRETINOIN EXTERNAL GEL 0.01 %, 0.025 %, 0.05 %		Tier 3	

Drug Name	Brand Tier	Generic Tier	Formulary Notes
TRETINOIN MICROSHERE EXTERNAL GEL 0.04 %, 0.1 %		Tier 3	
TRETINOIN MICROSHERE PUMP EXTERNAL GEL 0.04 %, 0.1 %		Tier 3	
*Antibiotics - Topical***			
ALTABAX EXTERNAL OINTMENT 1 %	Tier 4		
MUPIROCIN EXTERNAL OINTMENT 2 %		Tier 3	
*Antifungals - Topical Combinations***			
CLOTRIMAZOLE-BETAMETHASONE EXTERNAL CREAM 1-0.05 %		Tier 3	
CLOTRIMAZOLE-BETAMETHASONE EXTERNAL LOTION 1-0.05 %		Tier 3	
NYSTATIN-TRIAMCINOLONE EXTERNAL CREAM 100000-0.1 UNIT/GM-%		Tier 3	
NYSTATIN-TRIAMCINOLONE EXTERNAL OINTMENT 100000-0.1 UNIT/GM-%		Tier 3	
*Antifungals - Topical***			
CICLODAN EXTERNAL SOLUTION (CICLOPIROX) 8 %	Tier 3	Tier 3	
CICLOPIROX EXTERNAL GEL 0.77 %		Tier 3	
CICLOPIROX EXTERNAL SHAMPOO 1 %		Tier 3	
CICLOPIROX OLAMINE EXTERNAL CREAM 0.77 %		Tier 3	
CICLOPIROX OLAMINE EXTERNAL SUSPENSION 0.77 %		Tier 3	
NYSTATIN EXTERNAL CREAM 100000 UNIT/GM		Tier 3	
NYSTATIN EXTERNAL OINTMENT 100000 UNIT/GM		Tier 3	
NYSTOP EXTERNAL POWDER (NYSTATIN) 100000 UNIT/GM	Tier 3	Tier 3	
*Anti-Inflammatory Agents - Topical***			
DICLOFENAC SODIUM EXTERNAL GEL 1 %		Tier 3	
DICLOFONO EXTERNAL GEL 1.6 %	Tier 4		
*Antineoplastic Antimetabolites - Topical***			
FLUOROURACIL EXTERNAL CREAM 5 %		Tier 3	

Drug Name	Brand Tier	Generic Tier	Formulary Notes
FLUOROURACIL EXTERNAL SOLUTION 2 %, 5 %		Tier 3	
*Antipsoriatics - Systemic***			
ACITRETIN ORAL CAPSULE 10 MG, 17.5 MG, 25 MG		Tier 3	
COSENTYX (300 MG DOSE) SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 150 MG/ML	Tier 6		PA
COSENTYX SENSOREADY (300 MG) SUBCUTANEOUS SOLUTION AUTO-INJECTOR 150 MG/ML	Tier 6		PA
STELARA SUBCUTANEOUS SOLUTION 45 MG/0.5ML	Tier 6		PA
STELARA SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 45 MG/0.5ML, 90 MG/ML	Tier 6		PA
TALTZ SUBCUTANEOUS SOLUTION AUTO-INJECTOR 80 MG/ML	Tier 6		PA
TALTZ SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 80 MG/ML	Tier 6		PA
*Antipsoriatics***			
CALCIPOTRIENE EXTERNAL OINTMENT 0.005 %		Tier 3	
CALCIPOTRIENE EXTERNAL SOLUTION 0.005 %		Tier 3	
TAZAROTENE EXTERNAL CREAM 0.1 %		Tier 3	
TAZORAC EXTERNAL CREAM 0.05 %	Tier 4		
*Antiseborrheic Products***			
SELENIUM SULFIDE EXTERNAL LOTION 2.5 %		Tier 3	
*Antivirals - Topical***			
ACYCLOVIR EXTERNAL OINTMENT 5 %		Tier 3	
*Atopic Dermatitis - Monoclonal Antibodies***			
DUPIXENT SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 300 MG/2ML	Tier 6		PA
*Burn Products***			
SSD EXTERNAL CREAM (SILVER SULFADIAZINE) 1 %	Tier 3	Tier 3	

Drug Name	Brand Tier	Generic Tier	Formulary Notes
*Corticosteroids - Topical***			
ALA-CORT EXTERNAL CREAM 2.5 %		Tier 3	
BETAMETHASONE DIPROPIONATE AUG EXTERNAL CREAM 0.05 %		Tier 3	
BETAMETHASONE DIPROPIONATE AUG EXTERNAL LOTION 0.05 %		Tier 3	
BETAMETHASONE DIPROPIONATE AUG EXTERNAL OINTMENT 0.05 %		Tier 3	
BETAMETHASONE DIPROPIONATE EXTERNAL CREAM 0.05 %		Tier 3	
BETAMETHASONE DIPROPIONATE EXTERNAL LOTION 0.05 %		Tier 3	
BETAMETHASONE DIPROPIONATE EXTERNAL OINTMENT 0.05 %		Tier 3	
BETAMETHASONE VALERATE EXTERNAL LOTION 0.1 %		Tier 3	
CLOBETASOL PROP EMOLLIENT BASE EXTERNAL CREAM 0.05 %		Tier 3	
CLOBETASOL PROPIONATE E EXTERNAL CREAM 0.05 %		Tier 3	
CLOBETASOL PROPIONATE EXTERNAL CREAM 0.05 %		Tier 3	
CLOBETASOL PROPIONATE EXTERNAL FOAM 0.05 %		Tier 3	
CLOBETASOL PROPIONATE EXTERNAL GEL 0.05 %		Tier 3	
CLOBETASOL PROPIONATE EXTERNAL OINTMENT 0.05 %		Tier 3	
CLOBETASOL PROPIONATE EXTERNAL SOLUTION 0.05 %		Tier 3	
DESONIDE EXTERNAL CREAM 0.05 %		Tier 3	
DESONIDE EXTERNAL LOTION 0.05 %		Tier 3	
FLUOCINOLONE ACETONIDE BODY EXTERNAL OIL 0.01 %		Tier 3	
FLUOCINOLONE ACETONIDE EXTERNAL CREAM 0.025 %		Tier 3	
FLUOCINOLONE ACETONIDE EXTERNAL OINTMENT 0.025 %		Tier 3	
FLUOCINOLONE ACETONIDE EXTERNAL SOLUTION 0.01 %		Tier 3	
FLUOCINOLONE ACETONIDE SCALP EXTERNAL OIL 0.01 %		Tier 3	

Drug Name	Brand Tier	Generic Tier	Formulary Notes
FLUOCINONIDE EMULSIFIED BASE EXTERNAL CREAM 0.05 %		Tier 3	
FLUOCINONIDE EXTERNAL GEL 0.05 %		Tier 3	
FLUOCINONIDE EXTERNAL OINTMENT 0.05 %		Tier 3	
FLUOCINONIDE EXTERNAL SOLUTION 0.05 %		Tier 3	
FLUTICASONE PROPIONATE EXTERNAL CREAM 0.05 %		Tier 3	
HYDROCORTISONE EXTERNAL CREAM 2.5 %		Tier 3	
HYDROCORTISONE EXTERNAL OINTMENT 2.5 %		Tier 3	
HYDROCORTISONE VALERATE EXTERNAL CREAM 0.2 %		Tier 3	
HYDROCORTISONE VALERATE EXTERNAL OINTMENT 0.2 %		Tier 3	
MOMETASONE FUROATE EXTERNAL CREAM 0.1 %		Tier 3	
TRIAMCINOLONE ACETONIDE EXTERNAL CREAM 0.025 %, 0.1 %, 0.5 %		Tier 3	
TRIAMCINOLONE ACETONIDE EXTERNAL LOTION 0.025 %, 0.1 %		Tier 3	
TRIAMCINOLONE ACETONIDE EXTERNAL OINTMENT 0.025 %, 0.1 %, 0.5 %		Tier 3	
*Imidazole-Related Antifungals - Topical***			
ECONAZOLE NITRATE EXTERNAL CREAM 1 %		Tier 3	
KETOCONAZOLE EXTERNAL CREAM 2 %		Tier 3	
KETOCONAZOLE EXTERNAL SHAMPOO 2 %		Tier 3	
*Immunomodulators Imidazoquinolinamines - Topical***			
IMIQUIMOD CREAM 3.75 % EXTERNAL 3.75 %		Tier 6	
IMIQUIMOD CREAM 5 % EXTERNAL 5 %		Tier 3	
*Local Anesthetics - Topical***			
GLYDO EXTERNAL PREFILLED SYRINGE (LIDOCAINE HCL URETHRAL/MUCOSAL) 2 %	Tier 3	Tier 3	

Drug Name	Brand Tier	Generic Tier	Formulary Notes
LIDOCAINE EXTERNAL OINTMENT 5 %		Tier 3	
LIDOCAINE EXTERNAL PATCH 5 %		Tier 3	PA
LIDOCAINE HCL URETHRAL/MUCOSAL EXTERNAL GEL 2 %		Tier 3	
*Macrolide Immunosuppressants - Topical***			
PIMECROLIMUS EXTERNAL CREAM 1 %		Tier 3	
TACROLIMUS EXTERNAL OINTMENT 0.03 %, 0.1 %		Tier 3	
*Rosacea Agents***			
AZELAIC ACID EXTERNAL GEL 15 %		Tier 3	
METRONIDAZOLE EXTERNAL CREAM 0.75 %		Tier 3	
METRONIDAZOLE EXTERNAL GEL 0.75 %, 1 %		Tier 3	
METRONIDAZOLE EXTERNAL LOTION 0.75 %		Tier 3	
*Scabicides & Pediculicides***			
MALATHION EXTERNAL LOTION 0.5 %		Tier 3	
PERMETHRIN EXTERNAL CREAM 5 %		Tier 3	
*Topical Anesthetic Combinations***			
LIDOCAINE-PRILOCAINE EXTERNAL CREAM 2.5-2.5 %		Tier 3	
*Wound Care - Growth Factor Agents***			
REGRANEX EXTERNAL GEL 0.01 %	Tier 4		
Diagnostic Products			
*Diagnostic Biologicals***			
APLISOL INTRADERMAL SOLUTION 5 UNIT/0.1ML	Tier 4		QL (1 ML per 30 days)
CANDIN INTRADERMAL SOLUTION (CANDIDA ALBICANS SKN TST ANTGN)	Tier 4	Tier 4	QL (1 ML per 30 days)
TUBERSOL INTRADERMAL SOLUTION 5 UNIT/0.1ML	Tier 4		QL (1 ML per 30 days)
*Diagnostic Drugs***			
CHIRHOSTIM INTRAVENOUS SOLUTION RECONSTITUTED 16 MCG	Tier 4		QL (1 EA per 30 days)

Drug Name	Brand Tier	Generic Tier	Formulary Notes
*Diagnostic Tests***			
ACCU-CHEK AVIVA PLUS IN VITRO STRIP (BLOOD GLUCOSE TEST)	Tier 2	Tier 2	
ACCU-CHEK COMPACT PLUS IN VITRO STRIP (BLOOD GLUCOSE TEST)	Tier 2	Tier 2	
ACCU-CHEK GUIDE IN VITRO STRIP (BLOOD GLUCOSE TEST)	Tier 2	Tier 2	
ACCU-CHEK SMARTVIEW IN VITRO STRIP (BLOOD GLUCOSE TEST)	Tier 2	Tier 2	
ACCUTREND GLUCOSE IN VITRO STRIP (BLOOD GLUCOSE TEST)	Tier 2	Tier 2	
ADVANCE INTUITION TEST IN VITRO STRIP (BLOOD GLUCOSE TEST)	Tier 2	Tier 2	
ADVANCE MICRO-DRAW TEST IN VITRO STRIP (BLOOD GLUCOSE TEST)	Tier 2	Tier 2	
ADVOCATE REDI-CODE IN VITRO STRIP (BLOOD GLUCOSE TEST)	Tier 2	Tier 2	
ADVOCATE REDI-CODE+ TEST IN VITRO STRIP (BLOOD GLUCOSE TEST)	Tier 2	Tier 2	
ADVOCATE TEST IN VITRO STRIP (BLOOD GLUCOSE TEST)	Tier 2	Tier 2	
AGAMATRIX AMP TEST IN VITRO STRIP (BLOOD GLUCOSE TEST)	Tier 2	Tier 2	
AGAMATRIX JAZZ TEST IN VITRO STRIP (BLOOD GLUCOSE TEST)	Tier 2	Tier 2	
AGAMATRIX KEYNOTE TEST IN VITRO STRIP (BLOOD GLUCOSE TEST)	Tier 2	Tier 2	
AGAMATRIX PRESTO TEST IN VITRO STRIP (BLOOD GLUCOSE TEST)	Tier 2	Tier 2	
ASSURE 3 TEST IN VITRO STRIP (BLOOD GLUCOSE TEST)	Tier 2	Tier 2	
ASSURE 4 TEST IN VITRO STRIP (BLOOD GLUCOSE TEST)	Tier 2	Tier 2	
ASSURE II CHECK IN VITRO STRIP (BLOOD GLUCOSE TEST)	Tier 2	Tier 2	
ASSURE II IN VITRO STRIP (BLOOD GLUCOSE TEST)	Tier 2	Tier 2	
ASSURE PLATINUM IN VITRO STRIP (BLOOD GLUCOSE TEST)	Tier 2	Tier 2	
ASSURE PRISM MULTI TEST IN VITRO STRIP (BLOOD GLUCOSE TEST)	Tier 2	Tier 2	

Drug Name	Brand Tier	Generic Tier	Formulary Notes
ASSURE PRO TEST IN VITRO STRIP (BLOOD GLUCOSE TEST)	Tier 2	Tier 2	
BIOSCANNER GLUCOSE TEST IN VITRO STRIP (BLOOD GLUCOSE TEST)	Tier 2	Tier 2	
BLULINK GLUCOSE TEST IN VITRO STRIP (BLOOD GLUCOSE TEST)	Tier 2	Tier 2	
CAREONE BLOOD GLUCOSE TEST IN VITRO STRIP (BLOOD GLUCOSE TEST)	Tier 2	Tier 2	
CARESENS N GLUCOSE TEST IN VITRO STRIP (BLOOD GLUCOSE TEST)	Tier 2	Tier 2	
CARETOUCH TEST IN VITRO STRIP (BLOOD GLUCOSE TEST)	Tier 2	Tier 2	
CLEVER CHEK AUTO-CODE TEST IN VITRO STRIP (BLOOD GLUCOSE TEST)	Tier 2	Tier 2	
CLEVER CHEK AUTO-CODE VOICE IN VITRO STRIP (BLOOD GLUCOSE TEST)	Tier 2	Tier 2	
CLEVER CHEK TEST IN VITRO STRIP (BLOOD GLUCOSE TEST)	Tier 2	Tier 2	
CLEVER CHOICE AUTO-CODE TEST IN VITRO STRIP (BLOOD GLUCOSE TEST)	Tier 2	Tier 2	
CLEVER CHOICE MICRO TEST IN VITRO STRIP (BLOOD GLUCOSE TEST)	Tier 2	Tier 2	
CLEVER CHOICE NO CODING IN VITRO STRIP (BLOOD GLUCOSE TEST)	Tier 2	Tier 2	
CLEVER CHOICE TALK SYSTEM IN VITRO STRIP (BLOOD GLUCOSE TEST)	Tier 2	Tier 2	
CONTOUR NEXT TEST IN VITRO STRIP (BLOOD GLUCOSE TEST)	Tier 2	Tier 2	
CONTOUR TEST IN VITRO STRIP (BLOOD GLUCOSE TEST)	Tier 2	Tier 2	
COOL BLOOD GLUCOSE TEST STRIPS IN VITRO STRIP (BLOOD GLUCOSE TEST)	Tier 2	Tier 2	
CVS ADVANCED GLUCOSE TEST IN VITRO STRIP (BLOOD GLUCOSE TEST)	Tier 2	Tier 2	
CVS GLUCOSE METER TEST STRIPS IN VITRO STRIP		Tier 2	
D-CARE BLOOD GLUCOSE IN VITRO STRIP (BLOOD GLUCOSE TEST)	Tier 2	Tier 2	
DIASTIX IN VITRO STRIP	Tier 4		
DIATHRIVE BLOOD GLUCOSE TEST IN VITRO STRIP (BLOOD GLUCOSE TEST)	Tier 2	Tier 2	

Drug Name	Brand Tier	Generic Tier	Formulary Notes
DIATHRIVE GLUCOSE TEST IN VITRO STRIP (BLOOD GLUCOSE TEST)	Tier 2	Tier 2	
DIATHRIVE+ GLUCOSE TEST IN VITRO STRIP (BLOOD GLUCOSE TEST)	Tier 2	Tier 2	
DIATRUE PLUS TEST IN VITRO STRIP		Tier 2	
DUO-CARE TEST IN VITRO STRIP (BLOOD GLUCOSE TEST)	Tier 2	Tier 2	
EASY PLUS II GLUCOSE TEST IN VITRO STRIP		Tier 2	
EASY STEP TEST IN VITRO STRIP (BLOOD GLUCOSE TEST)	Tier 2	Tier 2	
EASY TALK BLOOD GLUCOSE TEST IN VITRO STRIP		Tier 2	
EASY TALK PLUS II TEST STRIPS IN VITRO STRIP		Tier 2	
EASY TOUCH HEALTHPRO GLUCOSE IN VITRO STRIP (BLOOD GLUCOSE TEST)	Tier 2	Tier 2	
EASY TOUCH TEST IN VITRO STRIP (BLOOD GLUCOSE TEST)	Tier 2	Tier 2	
EASY TRAK BLOOD GLUCOSE TEST IN VITRO STRIP		Tier 2	
EASY TRAK II GLUCOSE TEST IN VITRO STRIP		Tier 2	
EASYGLUCO IN VITRO STRIP (BLOOD GLUCOSE TEST)	Tier 2	Tier 2	
EASYMAX 15 TEST IN VITRO STRIP (BLOOD GLUCOSE TEST)	Tier 2	Tier 2	
EASYMAX TEST IN VITRO STRIP (BLOOD GLUCOSE TEST)	Tier 2	Tier 2	
EASYPRO BLOOD GLUCOSE TEST IN VITRO STRIP (BLOOD GLUCOSE TEST)	Tier 2	Tier 2	
EASYPRO PLUS IN VITRO STRIP (BLOOD GLUCOSE TEST)	Tier 2	Tier 2	
ELEMENT COMPACT TEST IN VITRO STRIP		Tier 2	
ELEMENT TEST IN VITRO STRIP (BLOOD GLUCOSE TEST)	Tier 2	Tier 2	
EMBRACE BLOOD GLUCOSE TEST IN VITRO STRIP (BLOOD GLUCOSE TEST)	Tier 2	Tier 2	
EMBRACE EVO BLOOD GLUCOSE TEST IN VITRO STRIP (BLOOD GLUCOSE TEST)	Tier 2	Tier 2	
EMBRACE PRO GLUCOSE TEST IN VITRO STRIP (BLOOD GLUCOSE TEST)	Tier 2	Tier 2	

Drug Name	Brand Tier	Generic Tier	Formulary Notes
EMBRACE TALK GLUCOSE TEST IN VITRO STRIP (BLOOD GLUCOSE TEST)	Tier 2	Tier 2	
EQ BLOOD GLUCOSE TEST IN VITRO STRIP		Tier 2	
EVOLUTION AUTOCODE IN VITRO STRIP (BLOOD GLUCOSE TEST)	Tier 2	Tier 2	
EXACTECH R-S-G TEST IN VITRO STRIP (BLOOD GLUCOSE TEST)	Tier 2	Tier 2	
EXACTECH TEST IN VITRO STRIP (BLOOD GLUCOSE TEST)	Tier 2	Tier 2	
FIFTY50 GLUCOSE TEST 2.0 IN VITRO STRIP (BLOOD GLUCOSE TEST)	Tier 2	Tier 2	
FORA 6 CONNECT IN VITRO STRIP (BLOOD GLUCOSE TEST)	Tier 2	Tier 2	
FORA BLOOD GLUCOSE TEST IN VITRO STRIP (BLOOD GLUCOSE TEST)	Tier 2	Tier 2	
FORA D15G BLOOD GLUCOSE TEST IN VITRO STRIP (BLOOD GLUCOSE TEST)	Tier 2	Tier 2	
FORA D20 BLOOD GLUCOSE TEST IN VITRO STRIP (BLOOD GLUCOSE TEST)	Tier 2	Tier 2	
FORA D40/G31 BLOOD GLUCOSE IN VITRO STRIP (BLOOD GLUCOSE TEST)	Tier 2	Tier 2	
FORA G20 BLOOD GLUCOSE TEST IN VITRO STRIP (BLOOD GLUCOSE TEST)	Tier 2	Tier 2	
FORA G30/PREM V10 GLUCOSE TEST IN VITRO STRIP (BLOOD GLUCOSE TEST)	Tier 2	Tier 2	
FORA GD20 TEST IN VITRO STRIP (BLOOD GLUCOSE TEST)	Tier 2	Tier 2	
FORA GD50 BLOOD GLUCOSE TEST IN VITRO STRIP (BLOOD GLUCOSE TEST)	Tier 2	Tier 2	
FORA GTEL BLOOD GLUCOSE TEST IN VITRO STRIP (BLOOD GLUCOSE TEST)	Tier 2	Tier 2	
FORA TN'G ADVANCE PRO IN VITRO STRIP (BLOOD GLUCOSE TEST)	Tier 2	Tier 2	
FORA TN'G/TN'G VOICE IN VITRO STRIP (BLOOD GLUCOSE TEST)	Tier 2	Tier 2	
FORA V10 BLOOD GLUCOSE TEST IN VITRO STRIP (BLOOD GLUCOSE TEST)	Tier 2	Tier 2	
FORA V12 BLOOD GLUCOSE TEST IN VITRO STRIP (BLOOD GLUCOSE TEST)	Tier 2	Tier 2	
FORA V20 BLOOD GLUCOSE TEST IN VITRO STRIP (BLOOD GLUCOSE TEST)	Tier 2	Tier 2	

Drug Name	Brand Tier	Generic Tier	Formulary Notes
FORA V30A BLOOD GLUCOSE TEST IN VITRO STRIP (BLOOD GLUCOSE TEST)	Tier 2	Tier 2	
FORACARE GD40 TEST IN VITRO STRIP (BLOOD GLUCOSE TEST)	Tier 2	Tier 2	
FORACARE PREMIUM V10 TEST IN VITRO STRIP (BLOOD GLUCOSE TEST)	Tier 2	Tier 2	
FORACARE TEST N GO TEST IN VITRO STRIP (BLOOD GLUCOSE TEST)	Tier 2	Tier 2	
FORTISCARE G1 TEST STRIP IN VITRO STRIP (BLOOD GLUCOSE TEST)	Tier 2	Tier 2	
FORTISCARE TEST IN VITRO STRIP (BLOOD GLUCOSE TEST)	Tier 2	Tier 2	
FREESTYLE INSULINX TEST IN VITRO STRIP (BLOOD GLUCOSE TEST)	Tier 2	Tier 2	
FREESTYLE LITE TEST IN VITRO STRIP (BLOOD GLUCOSE TEST)	Tier 2	Tier 2	
FREESTYLE PRECISION NEO TEST IN VITRO STRIP (BLOOD GLUCOSE TEST)	Tier 2	Tier 2	
FREESTYLE TEST IN VITRO STRIP (BLOOD GLUCOSE TEST)	Tier 2	Tier 2	
GE100 BLOOD GLUCOSE TEST IN VITRO STRIP		Tier 2	
GENULTIMATE TEST IN VITRO STRIP (BLOOD GLUCOSE TEST)	Tier 2	Tier 2	
GHT TEST IN VITRO STRIP		Tier 2	
GLUCO PERFECT 3 TEST IN VITRO STRIP (BLOOD GLUCOSE TEST)	Tier 2	Tier 2	
GLUCOCARD 01 SENSOR PLUS IN VITRO STRIP (BLOOD GLUCOSE TEST)	Tier 2	Tier 2	
GLUCOCARD EXPRESSION TEST IN VITRO STRIP (BLOOD GLUCOSE TEST)	Tier 2	Tier 2	
GLUCOCARD SHINE TEST IN VITRO STRIP (BLOOD GLUCOSE TEST)	Tier 2	Tier 2	
GLUCOCARD VITAL TEST IN VITRO STRIP (BLOOD GLUCOSE TEST)	Tier 2	Tier 2	
GLUCOCARD X-SENSOR IN VITRO STRIP (BLOOD GLUCOSE TEST)	Tier 2	Tier 2	
GLUCOCOM TEST IN VITRO STRIP (BLOOD GLUCOSE TEST)	Tier 2	Tier 2	
GLUCONAVII BLOOD GLUCOSE TEST IN VITRO STRIP (BLOOD GLUCOSE TEST)	Tier 2	Tier 2	
GLUCOSE METER TEST IN VITRO STRIP		Tier 2	

Drug Name	Brand Tier	Generic Tier	Formulary Notes
GNP EASY TOUCH GLUCOSE TEST IN VITRO STRIP		Tier 2	
GNP TRUE METRIX GLUCOSE STRIPS IN VITRO STRIP (BLOOD GLUCOSE TEST)	Tier 2	Tier 2	
GNP TRUETRACK SMART SYSTEM IN VITRO STRIP (BLOOD GLUCOSE TEST)	Tier 2	Tier 2	
GNP TRUETRACK TEST STRIPS IN VITRO STRIP (BLOOD GLUCOSE TEST)	Tier 2	Tier 2	
GOJJI BLOOD GLUCOSE TEST IN VITRO STRIP (BLOOD GLUCOSE TEST)	Tier 2	Tier 2	
GOJJI BLOOD TEST STRIP/LANCETS IN VITRO STRIP (BLOOD GLUCOSE TEST)	Tier 2	Tier 2	
GOODSENSE BLOOD GLUCOSE IN VITRO STRIP		Tier 2	
HW EMBRACE PRO GLUCOSE TEST IN VITRO STRIP (BLOOD GLUCOSE TEST)	Tier 2	Tier 2	
HW EMBRACE TALK GLUCOSE TEST IN VITRO STRIP (BLOOD GLUCOSE TEST)	Tier 2	Tier 2	
IGLUCOSE TEST STRIPS IN VITRO STRIP (BLOOD GLUCOSE TEST)	Tier 2	Tier 2	
IN TOUCH BLOOD GLUCOSE TEST IN VITRO STRIP (BLOOD GLUCOSE TEST)	Tier 2	Tier 2	
INFINITY BLOOD GLUCOSE TEST IN VITRO STRIP (BLOOD GLUCOSE TEST)	Tier 2	Tier 2	
INFINITY VOICE IN VITRO STRIP (BLOOD GLUCOSE TEST)	Tier 2	Tier 2	
KROGER BLOOD GLUCOSE TEST IN VITRO STRIP		Tier 2	
KROGER HEALTHPRO GLUCOSE TEST IN VITRO STRIP (BLOOD GLUCOSE TEST)	Tier 2	Tier 2	
KROGER PREMIUM GLUCOSE TEST IN VITRO STRIP		Tier 2	
KROGER TEST IN VITRO STRIP		Tier 2	
LIBERTY NEXT GENERATION TEST IN VITRO STRIP (BLOOD GLUCOSE TEST)	Tier 2	Tier 2	
LIBERTY TEST IN VITRO STRIP		Tier 2	
MEIJER BLOOD GLUCOSE TEST IN VITRO STRIP		Tier 2	
MEIJER ESSENTIAL GLUCOSE TEST IN VITRO STRIP		Tier 2	
MEIJER PREMIUM GLUCOSE TEST IN VITRO STRIP		Tier 2	

Drug Name	Brand Tier	Generic Tier	Formulary Notes
MEIJER TRUETEST TEST IN VITRO STRIP (BLOOD GLUCOSE TEST)	Tier 2	Tier 2	
MEIJER TRUETRACK TEST IN VITRO STRIP (BLOOD GLUCOSE TEST)	Tier 2	Tier 2	
MICRODOT TEST IN VITRO STRIP (BLOOD GLUCOSE TEST)	Tier 2	Tier 2	
MM EASY TOUCH GLUCOSE IN VITRO STRIP (BLOOD GLUCOSE TEST)	Tier 2	Tier 2	
MYGLUCOHEALTH TEST IN VITRO STRIP (BLOOD GLUCOSE TEST)	Tier 2	Tier 2	
NEUTEK 2TEK TEST IN VITRO STRIP (BLOOD GLUCOSE TEST)	Tier 2	Tier 2	
NOVA MAX GLUCOSE TEST IN VITRO STRIP (BLOOD GLUCOSE TEST)	Tier 2	Tier 2	
ONE DROP TEST IN VITRO STRIP		Tier 2	
ONETOUCH ULTRA IN VITRO STRIP (BLOOD GLUCOSE TEST)	Tier 2	Tier 2	
ONETOUCH VERIO IN VITRO STRIP (BLOOD GLUCOSE TEST)	Tier 2	Tier 2	
OPTIUM TEST IN VITRO STRIP (BLOOD GLUCOSE TEST)	Tier 2	Tier 2	
OPTIUMEZ TEST IN VITRO STRIP (BLOOD GLUCOSE TEST)	Tier 2	Tier 2	
PHARMACIST CHOICE AUTOCODE IN VITRO STRIP (BLOOD GLUCOSE TEST)	Tier 2	Tier 2	
PHARMACIST CHOICE NO CODING IN VITRO STRIP		Tier 2	
POCKETCHEM EZ TEST IN VITRO STRIP (BLOOD GLUCOSE TEST)	Tier 2	Tier 2	
POGO AUTOMATIC TEST CARTRIDGES IN VITRO DIAGNOSTIC TEST	Tier 1		
PRECISION PCX IN VITRO STRIP (BLOOD GLUCOSE TEST)	Tier 2	Tier 2	
PRECISION PCX PLUS TEST IN VITRO STRIP (BLOOD GLUCOSE TEST)	Tier 2	Tier 2	
PRECISION POINT OF CARE TEST IN VITRO STRIP (BLOOD GLUCOSE TEST)	Tier 2	Tier 2	
PRECISION QID TEST IN VITRO STRIP (BLOOD GLUCOSE TEST)	Tier 2	Tier 2	
PRECISION SOF-TACT TEST IN VITRO STRIP (BLOOD GLUCOSE TEST)	Tier 2	Tier 2	

Drug Name	Brand Tier	Generic Tier	Formulary Notes
PRECISION XTRA BLOOD GLUCOSE IN VITRO STRIP (BLOOD GLUCOSE TEST)	Tier 2	Tier 2	
PREMIUM BLOOD GLUCOSE TEST IN VITRO STRIP		Tier 2	
PRO VOICE V8/V9 GLUCOSE IN VITRO STRIP		Tier 2	
PRODIGY NO CODING BLOOD GLUC IN VITRO STRIP (BLOOD GLUCOSE TEST)	Tier 2	Tier 2	
PTS PANELS GLUCOSE TEST IN VITRO STRIP (BLOOD GLUCOSE TEST)	Tier 2	Tier 2	
QUICKTEK TEST IN VITRO STRIP (BLOOD GLUCOSE TEST)	Tier 2	Tier 2	
QUINTET AC BLOOD GLUCOSE TEST IN VITRO STRIP (BLOOD GLUCOSE TEST)	Tier 2	Tier 2	
QUINTET BLOOD GLUCOSE TEST IN VITRO STRIP (BLOOD GLUCOSE TEST)	Tier 2	Tier 2	
REFUAH PLUS BLOOD GLUCOSE TEST IN VITRO STRIP (BLOOD GLUCOSE TEST)	Tier 2	Tier 2	
RELION BLOOD GLUCOSE TEST IN VITRO STRIP (BLOOD GLUCOSE TEST)	Tier 2	Tier 2	
RELION CONFIRM/MICRO TEST IN VITRO STRIP (BLOOD GLUCOSE TEST)	Tier 2	Tier 2	
RELION PREMIER TEST IN VITRO STRIP (BLOOD GLUCOSE TEST)	Tier 2	Tier 2	
RELION PRIME TEST IN VITRO STRIP (BLOOD GLUCOSE TEST)	Tier 2	Tier 2	
RELION TRUE METRIX TEST STRIPS IN VITRO STRIP (BLOOD GLUCOSE TEST)	Tier 2	Tier 2	
RELION ULTIMA TEST IN VITRO STRIP (BLOOD GLUCOSE TEST)	Tier 2	Tier 2	
REXALL BLOOD GLUCOSE TEST IN VITRO STRIP (BLOOD GLUCOSE TEST)	Tier 2	Tier 2	
RIGHTEST GS100 BLOOD GLUCOSE IN VITRO STRIP (BLOOD GLUCOSE TEST)	Tier 2	Tier 2	
RIGHTEST GS300 BLOOD GLUCOSE IN VITRO STRIP (BLOOD GLUCOSE TEST)	Tier 2	Tier 2	
RIGHTEST GS550 BLOOD GLUCOSE IN VITRO STRIP (BLOOD GLUCOSE TEST)	Tier 2	Tier 2	
RIGHTEST GT333 BLOOD GLUCOSE IN VITRO STRIP (BLOOD GLUCOSE TEST)	Tier 2	Tier 2	
SMART SENSE PREMIUM TEST IN VITRO STRIP (BLOOD GLUCOSE TEST)	Tier 2	Tier 2	

Drug Name	Brand Tier	Generic Tier	Formulary Notes
SMART SENSE VALUE TEST IN VITRO STRIP (BLOOD GLUCOSE TEST)	Tier 2	Tier 2	
SMARTEST BLOOD GLUCOSE TEST IN VITRO STRIP (BLOOD GLUCOSE TEST)	Tier 2	Tier 2	
SOLUS V2 TEST IN VITRO STRIP (BLOOD GLUCOSE TEST)	Tier 2	Tier 2	
SUPREME TEST IN VITRO STRIP (BLOOD GLUCOSE TEST)	Tier 2	Tier 2	
SURE-TEST EASYPLUS MINI TEST IN VITRO STRIP (BLOOD GLUCOSE TEST)	Tier 2	Tier 2	
TGT BLOOD GLUCOSE TEST IN VITRO STRIP		Tier 2	
TRUE FOCUS BLOOD GLUCOSE STRIP IN VITRO STRIP		Tier 2	
TRUE METRIX BLOOD GLUCOSE TEST IN VITRO STRIP (BLOOD GLUCOSE TEST)	Tier 2	Tier 2	
TRUE METRIX PRO BLOOD GLUCOSE IN VITRO STRIP (BLOOD GLUCOSE TEST)	Tier 2	Tier 2	
TRUETEST TEST IN VITRO STRIP (BLOOD GLUCOSE TEST)	Tier 2	Tier 2	
TRUETRACK TEST IN VITRO STRIP (BLOOD GLUCOSE TEST)	Tier 2	Tier 2	
UNISTRIP1 GENERIC IN VITRO STRIP (BLOOD GLUCOSE TEST)	Tier 2	Tier 2	
VERASENS BLOOD GLUCOSE TEST IN VITRO STRIP		Tier 2	
VIVAGUARD INO TEST STRIPS IN VITRO STRIP (BLOOD GLUCOSE TEST)	Tier 2	Tier 2	
Dietary Products/Dietary Management Products			
*Nutritional Supplements***			
ASILNASALRMS ORAL CAPSULE	Tier 3		
Digestive Aids			
*Digestive Enzymes***			
CREON ORAL CAPSULE DELAYED RELEASE PARTICLES 12000-38000 UNIT, 24000-76000 UNIT, 3000-9500 UNIT, 36000-114000 UNIT, 6000-19000 UNIT	Tier 4		
PANCREAZE ORAL CAPSULE DELAYED RELEASE PARTICLES 10500-35500 UNIT, 16800-56800 UNIT, 21000-54700 UNIT, 4200-14200 UNIT	Tier 4		

Drug Name	Brand Tier	Generic Tier	Formulary Notes
ZENPEP ORAL CAPSULE DELAYED RELEASE PARTICLES 10000-32000 UNIT, 15000-47000 UNIT, 20000-63000 UNIT, 5000-24000 UNIT	Tier 4		
Diuretics			
*Carbonic Anhydrase Inhibitors***			
ACETAZOLAMIDE ER ORAL CAPSULE EXTENDED RELEASE 12 HOUR 500 MG		Tier 3	
ACETAZOLAMIDE ORAL TABLET 125 MG, 250 MG		Tier 3	
ACETAZOLAMIDE SODIUM INJECTION SOLUTION RECONSTITUTED 500 MG		Tier 3	
METHAZOLAMIDE ORAL TABLET 50 MG		Tier 3	
*Diuretic Combinations***			
AMILORIDE-HYDROCHLOROTHIAZIDE ORAL TABLET 5-50 MG		Tier 3	
SPIRONOLACTONE-HCTZ ORAL TABLET 25-25 MG		Tier 3	
TRIAMTERENE-HCTZ ORAL CAPSULE 37.5-25 MG		Tier 3	
TRIAMTERENE-HCTZ ORAL TABLET 37.5-25 MG, 75-50 MG		Tier 3	
*Loop Diuretics***			
BUMETANIDE ORAL TABLET 0.5 MG, 1 MG, 2 MG		Tier 3	
FUROSEMIDE ORAL SOLUTION 10 MG/ML, 8 MG/ML		Tier 3	
FUROSEMIDE ORAL TABLET 20 MG, 40 MG, 80 MG		Tier 3	
TORSEMIDE ORAL TABLET 10 MG, 100 MG, 20 MG, 5 MG		Tier 3	
*Potassium Sparing Diuretics***			
AMILORIDE HCL ORAL TABLET 5 MG		Tier 3	
SPIRONOLACTONE ORAL TABLET 100 MG, 25 MG, 50 MG		Tier 3	
*Thiazides And Thiazide-Like Diuretics***			
CHLORTHALIDONE ORAL TABLET 25 MG, 50 MG		Tier 3	
HYDROCHLOROTHIAZIDE ORAL CAPSULE 12.5 MG		Tier 3	

Drug Name	Brand Tier	Generic Tier	Formulary Notes
HYDROCHLOROTHIAZIDE ORAL TABLET 12.5 MG, 25 MG, 50 MG		Tier 3	
INDAPAMIDE ORAL TABLET 1.25 MG, 2.5 MG		Tier 3	
METOLAZONE ORAL TABLET 10 MG, 2.5 MG, 5 MG		Tier 3	
Endocrine And Metabolic Agents - Misc.			
*Bisphosphonates***			
ALENDRONATE SODIUM TABLET 10 MG ORAL 10 MG		Tier 3	QL (30 EA per 30 days)
ALENDRONATE SODIUM TABLET 35 MG ORAL 35 MG		Tier 3	QL (8 EA per 28 days)
ALENDRONATE SODIUM TABLET 5 MG ORAL 5 MG		Tier 3	QL (30 EA per 30 days)
ALENDRONATE SODIUM TABLET 70 MG ORAL 70 MG		Tier 3	QL (0.143 EA per 1 day)
IBANDRONATE SODIUM ORAL TABLET 150 MG		Tier 3	QL (1 EA per 30 days)
RISEDRONATE SODIUM TABLET 150 MG ORAL 150 MG		Tier 3	QL (1 EA per 30 days)
RISEDRONATE SODIUM TABLET 35 MG ORAL 35 MG		Tier 3	QL (4 EA per 28 days)
*Calcitonins***			
CALCITONIN (SALMON) NASAL SOLUTION 200 UNIT/ACT		Tier 3	
*Carnitine Replenisher - Agents***			
LEVOCARNITINE ORAL SOLUTION 1 GM/10ML		Tier 3	
LEVOCARNITINE ORAL TABLET 330 MG		Tier 3	
LEVOCARNITINE SF ORAL SOLUTION 1 GM/10ML		Tier 3	
*Dopamine Receptor Agonists***			
CABERGOLINE ORAL TABLET 0.5 MG		Tier 3	
*Growth Hormones***			
GENOTROPIN MINIQUICK SUBCUTANEOUS SOLUTION RECONSTITUTED 0.2 MG, 0.4 MG, 0.6 MG, 0.8 MG, 1 MG, 1.2 MG, 1.4 MG, 1.6 MG, 1.8 MG, 2 MG	Tier 6		PA

Drug Name	Brand Tier	Generic Tier	Formulary Notes
GENOTROPIN SUBCUTANEOUS SOLUTION RECONSTITUTED 12 MG	Tier 6		PA
HUMATROPE INJECTION SOLUTION RECONSTITUTED 12 MG, 24 MG, 6 MG	Tier 6		PA
NORDITROPIN FLEXPRO SUBCUTANEOUS SOLUTION PEN-INJECTOR 10 MG/1.5ML, 15 MG/1.5ML, 5 MG/1.5ML	Tier 6		PA
NUTROPIN AQ NUSPIN 10 SUBCUTANEOUS SOLUTION PEN-INJECTOR 10 MG/2ML	Tier 6		PA
NUTROPIN AQ NUSPIN 20 SUBCUTANEOUS SOLUTION PEN-INJECTOR 20 MG/2ML	Tier 6		PA
NUTROPIN AQ NUSPIN 5 SUBCUTANEOUS SOLUTION PEN-INJECTOR 5 MG/2ML	Tier 6		PA
OMNITROPE SUBCUTANEOUS SOLUTION CARTRIDGE 10 MG/1.5ML, 5 MG/1.5ML	Tier 6		PA
OMNITROPE SUBCUTANEOUS SOLUTION RECONSTITUTED 5.8 MG	Tier 6		PA
SAIZEN INJECTION SOLUTION RECONSTITUTED 5 MG, 8.8 MG	Tier 6		PA
SAIZENPREP INJECTION SOLUTION RECONSTITUTED 8.8 MG	Tier 6		PA
SEROSTIM SUBCUTANEOUS SOLUTION RECONSTITUTED 4 MG, 5 MG, 6 MG	Tier 6		PA
ZORBTIVE SUBCUTANEOUS SOLUTION RECONSTITUTED 8.8 MG	Tier 6		PA
*Hyperparathyroid Treatment - Vitamin D Analogs***			
CALCITRIOL ORAL CAPSULE 0.25 MCG, 0.5 MCG		Tier 3	
*Lhrh/Gnrh Agonist Analog Pituitary Suppressants***			
FENSOLVI (6 MONTH) SUBCUTANEOUS KIT 45 MG (PED)	Tier 6		
LUPRON DEPOT-PED (1-MONTH) INTRAMUSCULAR KIT 11.25 MG, 15 MG, 7.5 MG	Tier 6		
LUPRON DEPOT-PED (3-MONTH) INTRAMUSCULAR KIT 30 MG (PED)	Tier 6		

Drug Name	Brand Tier	Generic Tier	Formulary Notes
*Lysosomal Acid Lipase (Lal) Deficiency - Agents***			
KANUMA INTRAVENOUS SOLUTION 20 MG/10ML	Tier 5		
*Selective Estrogen Receptor Modulators (Serms)***			
RALOXIFENE HCL ORAL TABLET 60 MG		Tier 1	
*Vasopressin***			
DESMOPRESSIN ACE SPRAY REFRIG NASAL SOLUTION 0.01 %		Tier 3	
DESMOPRESSIN ACETATE ORAL TABLET 0.1 MG, 0.2 MG		Tier 3	
DESMOPRESSIN ACETATE SPRAY NASAL SOLUTION 0.01 %		Tier 3	
Estrogens			
*Estrogen & Progestin***			
AMABELZ ORAL TABLET (ESTRADIOL-NORETHINDRONE ACET) 0.5-0.1 MG, 1-0.5 MG	Tier 3	Tier 3	
COMBIPATCH TRANSDERMAL PATCH TWICE WEEKLY 0.05-0.14 MG/DAY, 0.05-0.25 MG/DAY	Tier 4		
FYAVOLV ORAL TABLET (NORETHINDRONE-ETH ESTRADIOL) 0.5-2.5 MG-MCG, 1-5 MG-MCG	Tier 3	Tier 3	
JINTELI ORAL TABLET (NORETHINDRONE-ETH ESTRADIOL) 1-5 MG-MCG	Tier 3	Tier 3	
MIMVEY ORAL TABLET (ESTRADIOL-NORETHINDRONE ACET) 1-0.5 MG	Tier 3	Tier 3	
PREFEST ORAL TABLET 1/1-0.09 MG (15/15)	Tier 4		
PREMPHASE ORAL TABLET 0.625-5 MG	Tier 4		
PREMPRO ORAL TABLET 0.3-1.5 MG, 0.45-1.5 MG, 0.625-2.5 MG, 0.625-5 MG	Tier 4		
*Estrogens***			
ALORA TRANSDERMAL PATCH TWICE WEEKLY (ESTRADIOL) 0.025 MG/24HR, 0.05 MG/24HR, 0.075 MG/24HR, 0.1 MG/24HR	Tier 4	Tier 3	

Drug Name	Brand Tier	Generic Tier	Formulary Notes
DOTTI TRANSDERMAL PATCH TWICE WEEKLY (ESTRADIOL) 0.025 MG/24HR, 0.0375 MG/24HR, 0.05 MG/24HR, 0.075 MG/24HR, 0.1 MG/24HR	Tier 3	Tier 3	
ESTRADIOL ORAL TABLET 0.5 MG, 1 MG, 2 MG		Tier 3	
ESTRADIOL TRANSDERMAL PATCH WEEKLY 0.025 MG/24HR, 0.0375 MG/24HR, 0.05 MG/24HR, 0.06 MG/24HR, 0.075 MG/24HR, 0.1 MG/24HR		Tier 3	
ESTROGEL TRANSDERMAL GEL 0.75 MG/1.25 GM (0.06%)	Tier 4		
LYLLANA TRANSDERMAL PATCH TWICE WEEKLY (ESTRADIOL) 0.025 MG/24HR, 0.0375 MG/24HR, 0.05 MG/24HR, 0.075 MG/24HR, 0.1 MG/24HR	Tier 3	Tier 3	
MENEST ORAL TABLET 0.3 MG, 0.625 MG, 1.25 MG	Tier 4		
MENOSTAR TRANSDERMAL PATCH WEEKLY 14 MCG/24HR	Tier 4		
PREMARIN INJECTION SOLUTION RECONSTITUTED 25 MG	Tier 4		
PREMARIN ORAL TABLET 0.3 MG, 0.45 MG, 0.625 MG, 0.9 MG, 1.25 MG	Tier 4		
Fluoroquinolones			
*Fluoroquinolones***			
CIPROFLOXACIN HCL ORAL TABLET 100 MG, 250 MG, 500 MG, 750 MG		Tier 3	
LEVOFLOXACIN ORAL SOLUTION 25 MG/ML		Tier 3	
LEVOFLOXACIN ORAL TABLET 250 MG, 500 MG, 750 MG		Tier 3	
MOXIFLOXACIN HCL INTRAVENOUS SOLUTION 400 MG/250ML		Tier 3	
MOXIFLOXACIN HCL ORAL TABLET 400 MG		Tier 3	
OFLOXACIN ORAL TABLET 400 MG		Tier 3	
Gastrointestinal Agents - Misc.			
*Gallstone Solubilizing Agents***			
URSODIOL ORAL CAPSULE 300 MG		Tier 3	

Drug Name	Brand Tier	Generic Tier	Formulary Notes
*Gastrointestinal Antiallergy Agents***			
CROMOLYN SODIUM ORAL CONCENTRATE 100 MG/5ML		Tier 3	
*Gastrointestinal Chloride Channel Activators***			
AMITIZA ORAL CAPSULE (LUBIPROSTONE) 24 MCG	Tier 4	Tier 4	
*Gastrointestinal Stimulants***			
METOCLOPRAMIDE HCL INJECTION SOLUTION 5 MG/ML		Tier 3	
METOCLOPRAMIDE HCL ORAL SOLUTION 10 MG/10ML, 5 MG/5ML		Tier 3	
METOCLOPRAMIDE HCL ORAL TABLET 10 MG, 5 MG		Tier 3	
*Inflammatory Bowel Agents***			
BALSALAZIDE DISODIUM ORAL CAPSULE 750 MG		Tier 3	
MESALAMINE ORAL TABLET DELAYED RELEASE 1.2 GM, 800 MG		Tier 3	
MESALAMINE RECTAL ENEMA 4 GM		Tier 3	
MESALAMINE RECTAL SUPPOSITORY 1000 MG		Tier 3	
PENTASA ORAL CAPSULE EXTENDED RELEASE 250 MG, 500 MG	Tier 5		
SFROWASA RECTAL ENEMA 4 GM/60ML	Tier 4		
SULFASALAZINE ORAL TABLET 500 MG		Tier 3	
SULFASALAZINE ORAL TABLET DELAYED RELEASE 500 MG		Tier 3	
*Intestinal Acidifiers***			
ENULOSE ORAL SOLUTION 10 GM/15ML		Tier 3	
GENERLAC ORAL SOLUTION 10 GM/15ML		Tier 3	
LACTULOSE ENCEPHALOPATHY ORAL SOLUTION 10 GM/15ML		Tier 3	
*Phosphate Binder Agents***			
SEVELAMER CARBONATE ORAL PACKET 0.8 GM, 2.4 GM		Tier 3	
SEVELAMER CARBONATE ORAL TABLET 800 MG		Tier 3	
SEVELAMER HCL ORAL TABLET 400 MG, 800 MG		Tier 3	

Drug Name	Brand Tier	Generic Tier	Formulary Notes
*Tumor Necrosis Factor Alpha Blockers***			
CIMZIA PREFILLED SUBCUTANEOUS KIT 2 X 200 MG/ML	Tier 6		PA
CIMZIA STARTER KIT SUBCUTANEOUS KIT 6 X 200 MG/ML	Tier 6		PA
CIMZIA SUBCUTANEOUS KIT 2 X 200 MG	Tier 6		PA
REMICADE INTRAVENOUS SOLUTION RECONSTITUTED 100 MG	Tier 6		PA
Genitourinary Agents - Miscellaneous			
*5-Alpha Reductase Inhibitors***			
FINASTERIDE ORAL TABLET 5 MG		Tier 3	
*Alpha 1-Adrenoceptor Antagonists***			
TAMSULOSIN HCL ORAL CAPSULE 0.4 MG		Tier 3	
*Citrates***			
POTASSIUM CITRATE ER ORAL TABLET EXTENDED RELEASE 10 MEQ (1080 MG), 5 MEQ (540 MG)		Tier 3	
SOD CITRATE-CITRIC ACID ORAL SOLUTION 500-334 MG/5ML		Tier 3	
*Interstitial Cystitis Agents***			
ELMIRON ORAL CAPSULE 100 MG	Tier 4		
*Urinary Analgesics***			
PHENAZO ORAL TABLET (PHENAZOPYRIDINE HCL) 200 MG	Tier 3	Tier 3	
PHENAZOPYRIDINE HCL ORAL TABLET 100 MG		Tier 3	
Gout Agents			
*Gout Agent Combinations***			
COLCHICINE-PROBENECID ORAL TABLET 0.5-500 MG		Tier 3	
*Gout Agents***			
ALLOPURINOL ORAL TABLET 100 MG, 300 MG		Tier 3	
COLCHICINE ORAL TABLET 0.6 MG		Tier 3	
*Uricosurics***			
PROBENECID ORAL TABLET 500 MG		Tier 3	

Drug Name	Brand Tier	Generic Tier	Formulary Notes
Hematological Agents - Misc.			
*C1 Inhibitors***			
CINRYZE INTRAVENOUS SOLUTION RECONSTITUTED 500 UNIT	Tier 6		PA
*Hematorheologic Agents***			
PENTOXIFYLLINE ER ORAL TABLET EXTENDED RELEASE 400 MG		Tier 3	
*Phosphodiesterase Iii Inhibitors***			
CILOSTAZOL ORAL TABLET 100 MG, 50 MG		Tier 3	
*Platelet Aggregation Inhibitor Combinations***			
ASPIRIN-DIPYRIDAMOLE ER ORAL CAPSULE EXTENDED RELEASE 12 HOUR 25-200 MG		Tier 3	
*Platelet Aggregation Inhibitors***			
DIPYRIDAMOLE ORAL TABLET 25 MG, 50 MG, 75 MG		Tier 3	
*Quinazoline Agents***			
ANAGRELIDE HCL ORAL CAPSULE 0.5 MG, 1 MG		Tier 3	
*Thienopyridine Derivatives***			
CLOPIDOGREL BISULFATE ORAL TABLET 300 MG, 75 MG		Tier 3	
Hematopoietic Agents			
*Cobalamin Combinations***			
VIT B12-METHIONINE-INOS-CHOL INTRAMUSCULAR SOLUTION		Tier 3	
*Cobalamins***			
CYANOCOBALAMIN INJECTION SOLUTION 1000 MCG/ML		Tier 3	
*Erythropoiesis-Stimulating Agents (Esas)***			
ARANESP (ALBUMIN FREE) INJECTION SOLUTION 100 MCG/ML, 200 MCG/ML, 25 MCG/ML, 40 MCG/ML, 60 MCG/ML	Tier 6		
ARANESP (ALBUMIN FREE) SOLUTION PREFILLED SYRINGE 10 MCG/0.4ML INJECTION 10 MCG/0.4ML	Tier 6		

Drug Name	Brand Tier	Generic Tier	Formulary Notes
ARANESP (ALBUMIN FREE) SOLUTION PREFILLED SYRINGE 100 MCG/0.5ML INJECTION 100 MCG/0.5ML	Tier 4		
ARANESP (ALBUMIN FREE) SOLUTION PREFILLED SYRINGE 150 MCG/0.3ML INJECTION 150 MCG/0.3ML	Tier 4		
ARANESP (ALBUMIN FREE) SOLUTION PREFILLED SYRINGE 200 MCG/0.4ML INJECTION 200 MCG/0.4ML	Tier 4		
ARANESP (ALBUMIN FREE) SOLUTION PREFILLED SYRINGE 25 MCG/0.42ML INJECTION 25 MCG/0.42ML	Tier 6		
ARANESP (ALBUMIN FREE) SOLUTION PREFILLED SYRINGE 300 MCG/0.6ML INJECTION 300 MCG/0.6ML	Tier 4		
ARANESP (ALBUMIN FREE) SOLUTION PREFILLED SYRINGE 40 MCG/0.4ML INJECTION 40 MCG/0.4ML	Tier 6		
ARANESP (ALBUMIN FREE) SOLUTION PREFILLED SYRINGE 500 MCG/ML INJECTION 500 MCG/ML	Tier 4		
ARANESP (ALBUMIN FREE) SOLUTION PREFILLED SYRINGE 60 MCG/0.3ML INJECTION 60 MCG/0.3ML	Tier 6		
PROCRIT INJECTION SOLUTION 40000 UNIT/ML	Tier 6		PA
*Folic Acid/Folate Combinations***			
AIRAVITE ORAL TABLET (FOLBEE) 2.5-25-1 MG	Tier 3	Tier 3	
NUFOL ORAL TABLET (FOLBEE) 2.5-25-1 MG	Tier 3	Tier 3	
WESTAB ONE ORAL TABLET 2.5-25-1 MG		Tier 3	
*Folic Acid/Folates***			
FOLIC ACID ORAL TABLET 1 MG		Tier 3	
*Granulocyte Colony-Stimulating Factors (G-Csf)***			
NEUPOGEN INJECTION SOLUTION 300 MCG/ML, 480 MCG/1.6ML	Tier 6		
NEUPOGEN INJECTION SOLUTION PREFILLED SYRINGE 300 MCG/0.5ML, 480 MCG/0.8ML	Tier 6		

Drug Name	Brand Tier	Generic Tier	Formulary Notes
*Granulocyte/Macrophage Colony-Stimulating Factor(Gm-Csf)***			
LEUKINE INJECTION SOLUTION RECONSTITUTED 250 MCG	Tier 6		PA
Hypnotics/Sedatives/Sleep Disorder Agents			
*Barbiturate Hypnotics***			
PHENOBARBITAL ORAL ELIXIR 20 MG/5ML		Tier 3	
PHENOBARBITAL ORAL TABLET 100 MG, 15 MG, 16.2 MG, 30 MG, 32.4 MG, 60 MG, 64.8 MG, 97.2 MG		Tier 3	
*Benzodiazepine Hypnotics***			
ESTAZOLAM ORAL TABLET 1 MG, 2 MG		Tier 3	
FLURAZEPAM HCL ORAL CAPSULE 15 MG, 30 MG		Tier 3	
TEMAZEPAM ORAL CAPSULE 15 MG, 22.5 MG, 30 MG, 7.5 MG		Tier 3	
TRIAZOLAM ORAL TABLET 0.125 MG, 0.25 MG		Tier 3	
*Non-Benzodiazepine - Gaba-Receptor Modulators***			
ESZOPICLONE ORAL TABLET 1 MG, 2 MG, 3 MG		Tier 3	
ZALEPLON ORAL CAPSULE 10 MG, 5 MG		Tier 3	
ZOLPIDEM TARTRATE ER ORAL TABLET EXTENDED RELEASE 12.5 MG, 6.25 MG		Tier 3	QL (30 EA per 30 days)
ZOLPIDEM TARTRATE ORAL TABLET 10 MG, 5 MG		Tier 3	QL (30 EA per 30 days)
*Selective Melatonin Receptor Agonists***			
RAMELTEON ORAL TABLET 8 MG		Tier 3	
Laxatives			
*Bowel Evacuant Combinations***			
GAVILYTE-G ORAL SOLUTION RECONSTITUTED (PEG-3350/ELECTROLYTES) 236 GM	Tier 1	Tier 1	QL (236 ML per 30 days)
GAVILYTE-N WITH FLAVOR PACK ORAL SOLUTION RECONSTITUTED (PEG 3350-KCL-NA BICARB-NACL) 420 GM	Tier 1	Tier 1	QL (420 ML per 30 days)

Drug Name	Brand Tier	Generic Tier	Formulary Notes
PEG-3350/ELECTROLYTES/ASCORBAT ORAL SOLUTION RECONSTITUTED 100 GM		Tier 1	QL (100 EA per 30 days)
PEG-KCL-NACL-NASULF-NA ASC-C ORAL SOLUTION RECONSTITUTED 100 GM		Tier 1	QL (100 EA per 30 days)
*Laxatives - Miscellaneous***			
CONSTULOSE ORAL SOLUTION 10 GM/15ML		Tier 3	
LACTULOSE ORAL SOLUTION 10 GM/15ML, 20 GM/30ML		Tier 3	
*Saline Laxative Mixtures***			
OSMOPREP ORAL TABLET 1.102-0.398 GM	Tier 4		
Macrolides			
*Azithromycin***			
AZITHROMYCIN INTRAVENOUS SOLUTION RECONSTITUTED 500 MG		Tier 3	
AZITHROMYCIN ORAL PACKET 1 GM		Tier 3	
AZITHROMYCIN ORAL SUSPENSION RECONSTITUTED 100 MG/5ML, 200 MG/5ML		Tier 3	
AZITHROMYCIN ORAL TABLET 250 MG, 500 MG, 600 MG		Tier 3	
*Clarithromycin***			
CLARITHROMYCIN ER ORAL TABLET EXTENDED RELEASE 24 HOUR 500 MG		Tier 3	
CLARITHROMYCIN ORAL SUSPENSION RECONSTITUTED 125 MG/5ML, 250 MG/5ML		Tier 3	
CLARITHROMYCIN ORAL TABLET 250 MG, 500 MG		Tier 3	
*Erythromycins***			
E.E.S. 400 ORAL TABLET (ERYTHROMYCIN ETHYLSUCCINATE) 400 MG	Tier 4	Tier 3	
ERYTHROCIN STEARATE ORAL TABLET 250 MG	Tier 5		
ERYTHROMYCIN BASE ORAL CAPSULE DELAYED RELEASE PARTICLES 250 MG		Tier 3	
ERYTHROMYCIN BASE ORAL TABLET 250 MG, 500 MG		Tier 3	

Drug Name	Brand Tier	Generic Tier	Formulary Notes
ERYTHROMYCIN ETHYLSUCCINATE ORAL SUSPENSION RECONSTITUTED 400 MG/5ML		Tier 3	
Medical Devices And Supplies			
*Applicators,Cotton Balls,Etc***			
ADVOCATE ALCOHOL PREP PADS PAD (ALCOHOL PREP) 70 %	Tier 2	Tier 2	
ALCOH-GLOVE CONTOURED WIPE PAD (ALCOHOL PREP)	Tier 2	Tier 2	
ALCOHOL PADS PAD 70 %		Tier 2	
ALCOHOL PREP PAD 70 %		Tier 2	
ALCOHOL SWABS PAD , 70 %		Tier 2	
BD SWAB SINGLE USE REGULAR PAD (ALCOHOL PREP)	Tier 2	Tier 2	
BD SWABS SINGLE USE BUTTERFLY PAD (ALCOHOL PREP)	Tier 2	Tier 2	
CARETOUCH ALCOHOL PREP PAD (ALCOHOL PREP) 70 %	Tier 2	Tier 2	
COMFORT TOUCH ALCOHOL PREP PAD (ALCOHOL PREP) 70 %	Tier 2	Tier 2	
CURITY ALCOHOL PREPS PAD (ALCOHOL PREP) 70 %	Tier 2	Tier 2	
CURITY ALCOHOL SWABS PAD (ALCOHOL PREP)	Tier 2	Tier 2	
CVS ALCOHOL PREP PADS PAD 70 %		Tier 2	
CVS PREP PAD 70 %		Tier 2	
EASY COMFORT ALCOHOL PADS PAD		Tier 2	
EASY TOUCH ALCOHOL PREP MEDIUM PAD (ALCOHOL PREP) 70 %	Tier 2	Tier 2	
EQL ALCOHOL SWABS PAD 70 %		Tier 2	
FIFTY50 ALCOHOL PREP PAD (ALCOHOL PREP) 70 %	Tier 2	Tier 2	
GLOBAL ALCOHOL PREP EASE PAD 70 %		Tier 2	
GNP ALCOHOL SWABS PAD 70 %		Tier 2	
H-E-B INCONTROL ALCOHOL PAD		Tier 2	
HM STERILE ALCOHOL PREP PAD		Tier 2	
MEIJER ALCOHOL SWABS PAD 70 %		Tier 2	
PHARMACIST CHOICE ALCOHOL PAD (ALCOHOL PREP)	Tier 2	Tier 2	
PRO COMFORT ALCOHOL PAD 70 %		Tier 2	

Drug Name	Brand Tier	Generic Tier	Formulary Notes
PURE COMFORT ALCOHOL PREP PAD		Tier 2	
QC ALCOHOL SWABS PAD 70 %		Tier 2	
RA ALCOHOL SWABS PAD 70 %		Tier 2	
REALITY SWABS PAD		Tier 2	
RELION ALCOHOL SWABS PAD (ALCOHOL PREP) , 70 %	Tier 2	Tier 2	
SAPS CARE ALCOHOL PREP PAD 70 %		Tier 2	
SAPS HEALTH ALCOHOL PREP PAD , 70 %		Tier 2	
SAPS HEALTH CARE ALCOHOL PREP PAD 70 %		Tier 2	
SB ALCOHOL PREP PAD 70 %		Tier 2	
SM ALCOHOL PREP PAD , 70 %		Tier 2	
SURE COMFORT ALCOHOL PREP PAD 70 %		Tier 2	
SURE-PREP ALCOHOL PREP PAD (ALCOHOL PREP) 70 %	Tier 2	Tier 2	
TRUE COMFORT ALCOHOL PREP PADS PAD 70 %		Tier 2	
TRUE COMFORT PRO ALCOHOL PREP PAD 70 %		Tier 2	
ULTICARE ALCOHOL SWABS PAD (ALCOHOL PREP) , 70 %	Tier 2	Tier 2	
ULTILET ALCOHOL SWABS PAD		Tier 2	
ULTRA-CARE ALCOHOL PREP PADS PAD 70 %		Tier 2	
WEBCOL ALCOHOL PREP LARGE PAD (ALCOHOL PREP) 70 %	Tier 2	Tier 2	
WEBCOL ALCOHOL PREP MEDIUM PAD (ALCOHOL PREP) 70 %	Tier 2	Tier 2	
ZEVEX STERILE ALCOHOL PREP PAD PAD 70 %		Tier 2	
*Glucose Monitoring Test Supplies***			
1ST TIER UNILET COMFORTOUCH		Tier 2	
ACCU-CHEK AVIVA PLUS KIT W/DEVICE	Tier 2		
ACCU-CHEK FASTCLIX LANCET KIT (SELECT-LITE DEVICE/LANCETS)	Tier 2	Tier 2	
ACCU-CHEK FASTCLIX LANCETS (LANCETS)	Tier 2	Tier 2	
ACCU-CHEK GUIDE KIT W/DEVICE	Tier 2		
ACCU-CHEK GUIDE ME KIT W/DEVICE	Tier 2		

Drug Name	Brand Tier	Generic Tier	Formulary Notes
ACCU-CHEK MULTICLIX LANCETS (LANCETS)	Tier 2	Tier 2	
ACCU-CHEK SAFE-T PRO LANCETS (LANCETS)	Tier 2	Tier 2	
ACCU-CHEK SOFTCLIX LANCET DEV KIT (SELECT-LITE DEVICE/LANCETS)	Tier 2	Tier 2	
ACCU-CHEK SOFTCLIX LANCETS (LANCETS)	Tier 2	Tier 2	
ACTI-LANCE 28G		Tier 2	
ACTI-LANCE LITE LANCETS 28G		Tier 2	
ACTI-LANCE SPECIAL LANCETS 17G		Tier 2	
ACTI-LANCE UNIVERSAL 23G		Tier 2	
ADJUSTABLE LANCING DEVICE		Tier 2	
ADVANCED MOBILE LANCET		Tier 2	
ADVOCATE LANCETS (LANCETS)	Tier 2	Tier 2	
ADVOCATE LANCETS 30G (LANCETS)	Tier 2	Tier 2	
ADVOCATE LANCING DEVICE (LANCET DEVICE)	Tier 2	Tier 2	
ADVOCATE RAPID-SAFE LANCING (LANCET DEVICE)	Tier 2	Tier 2	
ADVOCATE SAFETY LANCETS (LANCETS)	Tier 2	Tier 2	
ADVOCATE SAFETY LANCETS 26G (LANCETS)	Tier 2	Tier 2	
AGAMATRIX ULTRA-THIN LANCETS (LANCETS)	Tier 2	Tier 2	
AIMSCO TWIST LANCETS 32G		Tier 2	
AIMSCO TWIST LANCETS 33G (LANCETS)	Tier 2	Tier 2	
AQUALANCE LANCETS 30G (LANCETS)	Tier 2	Tier 2	
ASSURE COMFORT LANCETS 28G		Tier 2	
ASSURE HAEMOLANCE PLUS HIGH (LANCETS)	Tier 2	Tier 2	
ASSURE HAEMOLANCE PLUS LOW (LANCETS)	Tier 2	Tier 2	
ASSURE HAEMOLANCE PLUS MICRO (LANCETS)	Tier 2	Tier 2	
ASSURE HAEMOLANCE PLUS NORMAL (LANCETS)	Tier 2	Tier 2	
ASSURE HAEMOLANCE PLUS PED (LANCETS)	Tier 2	Tier 2	

Drug Name	Brand Tier	Generic Tier	Formulary Notes
ASSURE LANCE LANCETS (LANCETS)	Tier 2	Tier 2	
ASSURE LANCE LANCETS 21G (LANCETS)	Tier 2	Tier 2	
ASSURE LANCE PLUS SAFETY 25G (LANCETS)	Tier 2	Tier 2	
ASSURE LANCE PLUS SAFETY 30G (LANCETS)	Tier 2	Tier 2	
ASSURE LANCE SAFETY LANCET 28G (LANCETS)	Tier 2	Tier 2	
AURORA LANCET SUPER THIN 30G		Tier 2	
AURORA LANCET THIN 23G		Tier 2	
AUTO-LANCET (LANCET DEVICE)	Tier 2	Tier 2	
AUTO-LANCET MINI (LANCET DEVICE)	Tier 2	Tier 2	
AUTOLET II CLINISAFE KIT (SELECT-LITE DEVICE/LANCETS)	Tier 2	Tier 2	
AUTOLET LANCING DEVICE (LANCET DEVICE)	Tier 2	Tier 2	
AUTOLET LITE CLINISAFE KIT (SELECT-LITE DEVICE/LANCETS)	Tier 2	Tier 2	
AUTOLET LITE STARTER PACK KIT (SELECT-LITE DEVICE/LANCETS)	Tier 2	Tier 2	
AUTOLET MINI (LANCET DEVICE)	Tier 2	Tier 2	
AUTOLET PLATFORMS (LANCET TRANSPORTER CASE)	Tier 2	Tier 2	
AUTOLET PLUS (LANCET DEVICE)	Tier 2	Tier 2	
BD LANCET ULTRAFINE 30G (LANCETS)	Tier 2	Tier 2	
BD LANCET ULTRAFINE 33G (LANCETS)	Tier 2	Tier 2	
BD MICROTAINER LANCETS (LANCETS)	Tier 2	Tier 2	
CARDIOCOM LANCING DEVICE (LANCET DEVICE)	Tier 2	Tier 2	
CAREONE ADVANCED LANCING DEV		Tier 2	
CAREONE LANCET SUPER THIN 30G (LANCETS)	Tier 2	Tier 2	
CAREONE LANCET THIN 23G		Tier 2	
CARESENS LANCETS (LANCETS)	Tier 2	Tier 2	
CARETOUCH LANCING/EJECTOR (LANCET DEVICE)	Tier 2	Tier 2	
CARETOUCH SAFETY LANCETS (LANCETS)	Tier 2	Tier 2	
CARETOUCH SAFETY LANCETS 26G (LANCETS)	Tier 2	Tier 2	

Drug Name	Brand Tier	Generic Tier	Formulary Notes
CARETOUCH TWIST LANCETS 28G (LANCETS)	Tier 2	Tier 2	
CARETOUCH TWIST LANCETS 30G (LANCETS)	Tier 2	Tier 2	
CARETOUCH TWIST LANCETS 33G (LANCETS)	Tier 2	Tier 2	
CLEANLET LANCETS 28G (LANCETS)	Tier 2	Tier 2	
CLEVER CHEK LANCETS (LANCETS)	Tier 2	Tier 2	
CLEVER CHOICE LANCETS 21G (LANCETS)	Tier 2	Tier 2	
CLEVER CHOICE LANCETS 23G (LANCETS)	Tier 2	Tier 2	
CLEVER CHOICE LANCETS 28G (LANCETS)	Tier 2	Tier 2	
COAGUCHEK LANCETS (LANCETS)	Tier 2	Tier 2	
COMFORT ASSURED LANCETS 28G		Tier 2	
COMFORT ASSURED LANCETS 33G		Tier 2	
COMFORT LANCETS		Tier 2	
COMFORT TOUCH LANCETS 31G (LANCETS)	Tier 2	Tier 2	
COMFORT TOUCH PLUS LANCETS 30G (LANCETS)	Tier 2	Tier 2	
CONTOUR MONITOR DEVICE	Tier 2		
CONTOUR NEXT LINK KIT W/DEVICE	Tier 2		
CONTOUR NEXT MONITOR KIT W/DEVICE	Tier 2		
CONTOUR NEXT ONE KIT	Tier 2		
CVS LANCETS 21G		Tier 2	
CVS LANCETS MICRO THIN 33G		Tier 2	
CVS LANCETS ORIGINAL		Tier 2	
CVS LANCETS THIN 26G		Tier 2	
CVS LANCETS ULTRA THIN 30G		Tier 2	
CVS LANCETS ULTRA-THIN 30G		Tier 2	
CVS LANCING DEVICE		Tier 2	
CVS ULTRA THIN LANCETS		Tier 2	
DEXCOM G6 RECEIVER DEVICE	Tier 3		PA
DEXCOM G6 SENSOR	Tier 3		PA
DEXCOM G6 TRANSMITTER	Tier 3		PA
DIATHRIVE LANCET ULTRA THIN 30 (LANCETS)	Tier 2	Tier 2	

Drug Name	Brand Tier	Generic Tier	Formulary Notes
DIATHRIVE LANCETS (LANCETS)	Tier 2	Tier 2	
DIATHRIVE LANCING DEVICE (LANCET DEVICE)	Tier 2	Tier 2	
DIATHRIVE+ GLUCOSE MONITOR DEVICE	Tier 2		
DROPLET GENTEEL LANCING DEVICE (LANCET DEVICE)	Tier 2	Tier 2	
DROPLET LANCETS ULTRA THIN 30G (LANCETS)	Tier 2	Tier 2	
DROPLET LANCING DEVICE (LANCET DEVICE)	Tier 2	Tier 2	
DROPLET PERSONAL LANCETS 30G (LANCETS)	Tier 2	Tier 2	
DRUG MART LANCETS THIN 26G		Tier 2	
DRUG MART LANCING DEVICE (LANCET DEVICE)	Tier 2	Tier 2	
DRUG MART ON-THE-GO LANCET 30G (LANCETS)	Tier 2	Tier 2	
DRUG MART UNILET LANCETS 28G (LANCETS)	Tier 2	Tier 2	
DRUG MART UNILET LANCETS 30G (LANCETS)	Tier 2	Tier 2	
DRUG MART UNILET LANCETS 33G (LANCETS)	Tier 2	Tier 2	
EASY COMFORT LANCETS		Tier 2	
EASY COMFORT LANCETS TWIST TOP		Tier 2	
EASY MINI EJECT LANCING DEVICE		Tier 2	
EASY MINI LANCING DEVICE		Tier 2	
EASY TOUCH LANCETS 21G (LANCETS)	Tier 2	Tier 2	
EASY TOUCH LANCETS 23G (LANCETS)	Tier 2	Tier 2	
EASY TOUCH LANCETS 26G (LANCETS)	Tier 2	Tier 2	
EASY TOUCH LANCETS 28G (LANCETS)	Tier 2	Tier 2	
EASY TOUCH LANCETS 28G/TWIST (LANCETS)	Tier 2	Tier 2	
EASY TOUCH LANCETS 30G (LANCETS)	Tier 2	Tier 2	
EASY TOUCH LANCETS 30G/TWIST (LANCETS)	Tier 2	Tier 2	
EASY TOUCH LANCETS 32G (LANCETS)	Tier 2	Tier 2	
EASY TOUCH LANCETS 32G/TWIST (LANCETS)	Tier 2	Tier 2	

Drug Name	Brand Tier	Generic Tier	Formulary Notes
EASY TOUCH LANCETS 33G/TWIST (LANCETS)	Tier 2	Tier 2	
EASY TOUCH LANCING DEVICE (LANCET DEVICE)	Tier 2	Tier 2	
EASY TOUCH SAFETY LANCETS 21G (LANCETS)	Tier 2	Tier 2	
EASY TOUCH SAFETY LANCETS 23G (LANCETS)	Tier 2	Tier 2	
EASY TOUCH SAFETY LANCETS 26G (LANCETS)	Tier 2	Tier 2	
EASY TOUCH SAFETY LANCETS 28G (LANCETS)	Tier 2	Tier 2	
EMBRACE LANCETS ULTRA THIN 30G (LANCETS)	Tier 2	Tier 2	
EMBRACE LANCING DEVICE/EJECTOR		Tier 2	
EMBRACE PRESSURE ACTIVATED 21G (LANCETS)	Tier 2	Tier 2	
EMBRACE PRESSURE ACTIVATED 28G (LANCETS)	Tier 2	Tier 2	
EQL COLOR LANCETS 21G		Tier 2	
EQL COLOR LANCETS MICRO 33G		Tier 2	
EQL SUPER THIN LANCETS 30G		Tier 2	
EQL THIN LANCETS 26G		Tier 2	
E-Z JECT LANCET MICRO-THIN 33G (LANCETS)	Tier 2	Tier 2	
E-Z JECT LANCET SUPER THIN 30G (LANCETS)	Tier 2	Tier 2	
E-Z JECT LANCETS (LANCETS)	Tier 2	Tier 2	
E-Z JECT LANCETS 21G (LANCETS)	Tier 2	Tier 2	
E-Z JECT LANCETS THIN 26G (LANCETS)	Tier 2	Tier 2	
EZ-LETS LANCETS 21G (LANCETS)	Tier 2	Tier 2	
EZ-LETS LANCETS 26G (LANCETS)	Tier 2	Tier 2	
EZ-LETS LANCETS 28G (LANCETS)	Tier 2	Tier 2	
EZ-LETS LANCETS 30G (LANCETS)	Tier 2	Tier 2	
FIFTY50 SAFETY SEAL LANCETS (LANCETS)	Tier 2	Tier 2	
FIFTY50 UNILET LANCETS 33G (LANCETS)	Tier 2	Tier 2	
FINE 30 (LANCETS)	Tier 2	Tier 2	
FINGERSTIX LANCETS (LANCETS)	Tier 2	Tier 2	

Drug Name	Brand Tier	Generic Tier	Formulary Notes
FORA LANCETS (LANCETS)	Tier 2	Tier 2	
FORA LANCING DEVICE (LANCET DEVICE)	Tier 2	Tier 2	
FREDS PHARMACY AUTOLET LANCING		Tier 2	
FREDS PHARMACY UNILET LANC 28G		Tier 2	
FREDS PHARMACY UNILET LANC 30G		Tier 2	
FREESTYLE LANCETS (LANCETS)	Tier 2	Tier 2	
FREESTYLE LIBRE 14 DAY READER DEVICE	Tier 3		PA
FREESTYLE LIBRE 14 DAY SENSOR	Tier 3		PA
FREESTYLE LIBRE 2 READER DEVICE	Tier 3		PA
FREESTYLE LIBRE 2 SENSOR	Tier 3		PA
FREESTYLE LIBRE READER DEVICE	Tier 3		PA
FREESTYLE UNISTICK II LANCETS (LANCETS)	Tier 2	Tier 2	
GENTEEL BUTTERFLY TOUCH LANCET (LANCETS)	Tier 2	Tier 2	
GENTEEL CONTACT TIPS (BLUE) (LANCET TRANSPORTER CASE)	Tier 2	Tier 2	
GENTEEL CONTACT TIPS (CLEAR) (LANCET TRANSPORTER CASE)	Tier 2	Tier 2	
GENTEEL CONTACT TIPS (GREEN) (LANCET TRANSPORTER CASE)	Tier 2	Tier 2	
GENTEEL CONTACT TIPS (ORANGE) (LANCET TRANSPORTER CASE)	Tier 2	Tier 2	
GENTEEL CONTACT TIPS (RAINBOW) (LANCET TRANSPORTER CASE)	Tier 2	Tier 2	
GENTEEL CONTACT TIPS (VIOLET) (LANCET TRANSPORTER CASE)	Tier 2	Tier 2	
GENTEEL CONTACT TIPS (YELLOW) (LANCET TRANSPORTER CASE)	Tier 2	Tier 2	
GENTEEL LANCING KIT (BLUE) KIT (SELECT-LITE DEVICE/LANCETS)	Tier 2	Tier 2	
GENTEEL NOZZLES (LANCET TRANSPORTER CASE)	Tier 2	Tier 2	
GENTEEL PLUS LANCING (BLACK) (LANCET DEVICE)	Tier 2	Tier 2	
GENTEEL PLUS LANCING (PURPLE) (LANCET DEVICE)	Tier 2	Tier 2	
GENTEEL PLUS LANCING (WHITE) (LANCET DEVICE)	Tier 2	Tier 2	

Drug Name	Brand Tier	Generic Tier	Formulary Notes
GENTEEL PLUS LANCING DEV(BLUE) (LANCET DEVICE)	Tier 2	Tier 2	
GENTEEL PLUS LANCING DEV(PINK) (LANCET DEVICE)	Tier 2	Tier 2	
GENTLE-LET GP LANCETS (LANCETS)	Tier 2	Tier 2	
GENTLE-LET LANCETS (LANCETS)	Tier 2	Tier 2	
GENTLE-LET PLATFORMS (LANCET TRANSPORTER CASE)	Tier 2	Tier 2	
GLOBAL INJECT EASE LANCETS 28G		Tier 2	
GLOBAL INJECT EASE LANCETS 30G		Tier 2	
GLOBAL LANCING DEVICE		Tier 2	
GLUCOCOM LANCETS 28G (LANCETS)	Tier 2	Tier 2	
GLUCOCOM LANCETS 30G (LANCETS)	Tier 2	Tier 2	
GLUCOCOM LANCETS 33G (LANCETS)	Tier 2	Tier 2	
GNP LANCETS 21G		Tier 2	
GNP LANCETS MICRO THIN 33G		Tier 2	
GNP LANCETS SUPER THIN 30G		Tier 2	
GNP LANCETS THIN 26G		Tier 2	
GNP LANCING SYSTEM DEVICE (LANCET DEVICE)	Tier 2	Tier 2	
GNP STERILE LANCETS 28G		Tier 2	
GNP STERILE LANCETS 30G		Tier 2	
GNP STERILE LANCETS 33G		Tier 2	
GOJJI LANCING DEVICE/CLEAR CAP (LANCET DEVICE)	Tier 2	Tier 2	
GOJJI STERILE LANCETS (LANCETS)	Tier 2	Tier 2	
GOODSENSE COLOR LANCETS 33G		Tier 2	
GOODSENSE LANCETS 26G UNIV		Tier 2	
GOODSENSE LANCETS 30G		Tier 2	
GOODSENSE LANCETS 30G UNIV		Tier 2	
GOODSENSE LANCETS 33G		Tier 2	
GOODSENSE LANCETS 33G UNIV		Tier 2	
GOODSENSE LANCING DEVICE		Tier 2	
HAEMOLANCE (LANCETS)	Tier 2	Tier 2	
HAEMOLANCE LOW FLOW LANCETS (LANCETS)	Tier 2	Tier 2	
HAEMOLANCE PLUS (LANCETS)	Tier 2	Tier 2	
HAEMOLANCE PLUS HIGH FLOW (LANCETS)	Tier 2	Tier 2	

Drug Name	Brand Tier	Generic Tier	Formulary Notes
HAEMOLANCE PLUS LOW FLOW (LANCETS)	Tier 2	Tier 2	
HAEMOLANCE PLUS MAX FLOW (LANCETS)	Tier 2	Tier 2	
HAEMOLANCE PLUS PEDIATRIC FLOW (LANCETS)	Tier 2	Tier 2	
HEALTH CARE LANCING DEVICE (LANCET DEVICE)	Tier 2	Tier 2	
HEALTHY ACCENTS LANCING DEVICE		Tier 2	
HEALTHY ACCENTS UNILET LANCETS		Tier 2	
H-E-B INCONTROL ADV LANCING		Tier 2	
H-E-B INCONTROL LANCETS 28G		Tier 2	
H-E-B INCONTROL LANCETS 30G		Tier 2	
H-E-B INCONTROL LANCETS 33G		Tier 2	
HYPOLANCE AST LANCING KIT (SELECT-LITE DEVICE/LANCETS)	Tier 2	Tier 2	
HY-VEE LANCETS (LANCETS)	Tier 2	Tier 2	
HY-VEE THIN LANCETS		Tier 2	
IN TOUCH LANCING DEVICE (LANCET DEVICE)	Tier 2	Tier 2	
IN TOUCH STERILE LANCETS 30G (LANCETS)	Tier 2	Tier 2	
KINNEY LANCETS		Tier 2	
KINNEY THIN LANCETS		Tier 2	
KROGER AUTOLET LANCING DEVICE (LANCET DEVICE)	Tier 2	Tier 2	
KROGER HEALTHPRO LANCET 26G (LANCETS)	Tier 2	Tier 2	
KROGER LANCETS		Tier 2	
KROGER LANCETS 21G		Tier 2	
KROGER LANCETS MICRO THIN 33G		Tier 2	
KROGER LANCETS SUPER THIN		Tier 2	
KROGER LANCETS THIN		Tier 2	
KROGER LANCETS THIN 26G		Tier 2	
KROGER LANCETS ULTRATHIN 30G		Tier 2	
KROGER LANCING DEVICE		Tier 2	
LANCET DEVICE WITH EJECTOR		Tier 2	
LANCETS 30G		Tier 2	
LANCETS 33G		Tier 2	

Drug Name	Brand Tier	Generic Tier	Formulary Notes
LANCETS MICRO THIN 33G		Tier 2	
LANCETS SUPER THIN 28G		Tier 2	
LANCETS THIN		Tier 2	
LANCETS ULTRA THIN (LANCETS)	Tier 2	Tier 2	
LANCETS ULTRA THIN 30G		Tier 2	
LANCING DEVICE		Tier 2	
LANZO (LANCET DEVICE)	Tier 2	Tier 2	
LEADER ADVANCED LANCING DEVICE		Tier 2	
LIBERTY MEDICAL LANCETS (LANCETS)	Tier 2	Tier 2	
LIBERTY MINI LANCING DEVICE (LANCET DEVICE)	Tier 2	Tier 2	
LIFESCAN UNISTIK 2 (LANCETS)	Tier 2	Tier 2	
LIFESCAN UNISTIK II LANCETS (LANCETS)	Tier 2	Tier 2	
LITE TOUCH LANCETS		Tier 2	
LITE TOUCH LANCING PEN (LANCET DEVICE)	Tier 2	Tier 2	
LITETOUCH LANCETS (LANCETS)	Tier 2	Tier 2	
LIVE BETTER ADV LANCING DEVICE		Tier 2	
LIVE BETTER LANCET SUPER THIN		Tier 2	
LIVE BETTER LANCET ULTRA THIN		Tier 2	
LONGS LANCETS STANDARD		Tier 2	
LONGS LANCETS THIN		Tier 2	
LONGS LANCETS ULTRA THIN		Tier 2	
MEDICHOICE SAFETY LANCET		Tier 2	
MEDICHOICE SAFETY LANCET EXTRA		Tier 2	
MEDICHOICE SAFETY LANCET NORM		Tier 2	
MEDISENSE THIN LANCETS (LANCETS)	Tier 2	Tier 2	
MEDLANCE EXTRA 21G (LANCETS)	Tier 2	Tier 2	
MEDLANCE LITE 25G (LANCETS)	Tier 2	Tier 2	
MEDLANCE PLUS EXTRA 21G (LANCETS)	Tier 2	Tier 2	
MEDLANCE PLUS LANCETS (LANCETS)	Tier 2	Tier 2	
MEDLANCE PLUS LITE 25G (LANCETS)	Tier 2	Tier 2	
MEDLANCE PLUS SPECIAL 0.8MM (LANCETS)	Tier 2	Tier 2	
MEDLANCE PLUS SUPERLITE 30G (LANCETS)	Tier 2	Tier 2	

Drug Name	Brand Tier	Generic Tier	Formulary Notes
MEDLANCE PLUS UNIVERSAL 21G (LANCETS)	Tier 2	Tier 2	
MEDLANCE UNIVERSAL 21G (LANCETS)	Tier 2	Tier 2	
MEIJER LANCETS (LANCETS)	Tier 2	Tier 2	
MEIJER LANCETS THIN (LANCETS)	Tier 2	Tier 2	
MEIJER LANCETS UNIVERSAL 21G (LANCETS)	Tier 2	Tier 2	
MEIJER LANCETS UNIVERSAL 30G (LANCETS)	Tier 2	Tier 2	
MEIJER LANCETS UNIVERSAL 33G (LANCETS)	Tier 2	Tier 2	
MEIJER SUPER THIN LANCETS (LANCETS)	Tier 2	Tier 2	
MICROLET LANCETS (LANCETS)	Tier 2	Tier 2	
MICROLET NEXT LANCING DEVICE (LANCET DEVICE)	Tier 2	Tier 2	
MINI LANCING DEVICE		Tier 2	
MM LANCING DEVICE (LANCET DEVICE)	Tier 2	Tier 2	
MM TWIST LANCETS (LANCETS)	Tier 2	Tier 2	
MONOLET LANCETS (LANCETS)	Tier 2	Tier 2	
MONOLET OPD LANCETS (LANCETS)	Tier 2	Tier 2	
MONOLETTOR SAFETY LANCETS (LANCETS)	Tier 2	Tier 2	
MPD SAFETY LANCET 21G		Tier 2	
MPD SAFETY LANCET 23G		Tier 2	
MPD SAFETY LANCET 28G		Tier 2	
MPD SAFETY LANCET 30G		Tier 2	
MULTI-LANCET DEVICE		Tier 2	
MULTI-LANCET DEVICE 2 KIT (SELECT- LITE DEVICE/LANCETS)	Tier 2	Tier 2	
MYGLUCOHEALTH LANCETS 30G (LANCETS)	Tier 2	Tier 2	
NOVA SAFETY LANCETS 23G (LANCETS)	Tier 2	Tier 2	
NOVA SAFETY LANCETS 28G (LANCETS)	Tier 2	Tier 2	
NOVA SUREFLEX LANCETS (LANCETS)	Tier 2	Tier 2	
NOVA SUREFLEX LANCING DEVICE (LANCET DEVICE)	Tier 2	Tier 2	
ONETOUCH CLUB LANCETS FINE PT (LANCETS)	Tier 2	Tier 2	

Drug Name	Brand Tier	Generic Tier	Formulary Notes
ONETOUCH DELICA LANCETS 30G (LANCETS)	Tier 2	Tier 2	
ONETOUCH DELICA LANCETS 33G (LANCETS)	Tier 2	Tier 2	
ONETOUCH DELICA LANCING DEV (LANCET DEVICE)	Tier 2	Tier 2	
ONETOUCH DELICA PLUS LANCET30G (LANCETS)	Tier 2	Tier 2	
ONETOUCH DELICA PLUS LANCET33G (LANCETS)	Tier 2	Tier 2	
ONETOUCH DELICA PLUS LANCING (LANCET DEVICE)	Tier 2	Tier 2	
ONETOUCH DELICA SAFETY LANCING (LANCET DEVICE)	Tier 2	Tier 2	
ONETOUCH FINEPOINT LANCETS (LANCETS)	Tier 2	Tier 2	
ONETOUCH SURESOFT LANCING DEV (LANCET TRANSPORTER CASE)	Tier 2	Tier 2	
ONETOUCH ULTRA 2 KIT W/DEVICE	Tier 2		
ONETOUCH ULTRA MINI KIT W/DEVICE	Tier 2		
ONETOUCH ULTRASOFT LANCETS (LANCETS)	Tier 2	Tier 2	
ONETOUCH VERIO FLEX SYSTEM KIT W/DEVICE	Tier 2		
ONETOUCH VERIO IQ SYSTEM KIT W/DEVICE	Tier 2		
ONETOUCH VERIO KIT W/DEVICE	Tier 2		
ONETOUCH VERIO REFLECT KIT W/DEVICE	Tier 2		
ONETOUCH VERIO SYNC SYSTEM KIT W/DEVICE	Tier 2		
PC LANCETS SUPER THIN 30G		Tier 2	
PENLET II BLOOD SAMPLER KIT (SELECT-LITE DEVICE/LANCETS)	Tier 2	Tier 2	
PENLET II REPLACEMENT CAP (LANCET TRANSPORTER CASE)	Tier 2	Tier 2	
PERFECT LANCETS 28G (LANCETS)	Tier 2	Tier 2	
PERFECT LANCETS 30G (LANCETS)	Tier 2	Tier 2	
PHARMACIST CHOICE LANCETS (LANCETS)	Tier 2	Tier 2	
PHARMACY COUNTER LANCETS (LANCETS)	Tier 2	Tier 2	

Drug Name	Brand Tier	Generic Tier	Formulary Notes
PIP LANCETS 28G		Tier 2	
PIP LANCETS 30G		Tier 2	
POGO AUTOMATIC BLOOD GLUCOSE DEVICE	Tier 1		
PRECISION THINS GP LANCETS (LANCETS)	Tier 2	Tier 2	
PREFERRED PLUS LANCETS COLORED		Tier 2	
PREFERRED PLUS LANCETS THIN		Tier 2	
PRO COMFORT LANCETS 30G		Tier 2	
PRO COMFORT LANCETS 31G		Tier 2	
PRODIGY LANCETS 28G (LANCETS)	Tier 2	Tier 2	
PRODIGY LANCING DEVICE (LANCET DEVICE)	Tier 2	Tier 2	
PRODIGY SAFETY LANCETS 26G (LANCETS)	Tier 2	Tier 2	
PRODIGY TWIST TOP LANCETS 28G (LANCETS)	Tier 2	Tier 2	
PSS SELECT GP LANCETS (LANCETS)	Tier 2	Tier 2	
PSS SELECT PLATFORMS (LANCET TRANSPORTER CASE)	Tier 2	Tier 2	
PSS SELECT SAFETY LANCETS (LANCETS)	Tier 2	Tier 2	
PURE COMFORT LANCETS 30G		Tier 2	
PX ADVANCED LANCING DEVICE		Tier 2	
PX LANCET AUTO INJECTOR		Tier 2	
PX LANCETS MICROTHIN 33G		Tier 2	
PX LANCETS ULTRA THIN		Tier 2	
PX LANCETS ULTRA THIN 28G		Tier 2	
QC ADVANCED LANCING DEVICE		Tier 2	
QC LANCETS SUPER THIN 30G		Tier 2	
QC LANCETS ULTRA THIN		Tier 2	
QC UNILET LANCETS 28G		Tier 2	
QC UNILET LANCETS MICRO THIN		Tier 2	
RA E-ZJECT LANCETS 28G (LANCETS)	Tier 2	Tier 2	
RA E-ZJECT LANCETS THIN 26G (LANCETS)	Tier 2	Tier 2	
RA E-ZJECT LANCETS THIN 28G (LANCETS)	Tier 2	Tier 2	
RA E-ZJECT LANCETS ULTRA THIN (LANCETS)	Tier 2	Tier 2	

Drug Name	Brand Tier	Generic Tier	Formulary Notes
READYLANCE SAFETY LANCETS (LANCETS)	Tier 2	Tier 2	
REALITY LANCETS		Tier 2	
REALITY TRIGGER LANCETS		Tier 2	
RELION LANCET DEVICES 30G (LANCET DEVICE)	Tier 2	Tier 2	
RELION LANCETS MICRO-THIN 33G (LANCETS)	Tier 2	Tier 2	
RELION LANCETS THIN 26G (LANCETS)	Tier 2	Tier 2	
RELION LANCETS ULTRA-THIN 30G (LANCETS)	Tier 2	Tier 2	
RELION LANCING DEVICE (LANCET DEVICE)	Tier 2	Tier 2	
RELION LANCING DEVICE KIT (SELECT-LITE DEVICE/LANCETS)	Tier 2	Tier 2	
RELION ULTRA THIN LANCETS 30G (LANCETS)	Tier 2	Tier 2	
RELION ULTRA THIN PLUS LANCETS (LANCETS)	Tier 2	Tier 2	
REXALL LANCETS ULTRA THIN 30G (LANCETS)	Tier 2	Tier 2	
RIGHTEST ALTERNATE SITE ADAPT (LANCET TRANSPORTER CASE)	Tier 2	Tier 2	
RIGHTEST GD500 LANCING DEVICE (LANCET DEVICE)	Tier 2	Tier 2	
RIGHTEST GL300 LANCETS (LANCETS)	Tier 2	Tier 2	
SAFE-T-LANCE (LANCETS)	Tier 2	Tier 2	
SAFE-T-LANCE PLUS (LANCETS)	Tier 2	Tier 2	
SAFETY LANCET 30G/PRESSURE ACT		Tier 2	
SAFETY LANCETS (LANCETS)	Tier 2	Tier 2	
SAFETY LANCETS 21G (LANCETS)	Tier 2	Tier 2	
SAFETY LANCETS 28G		Tier 2	
SAPS HEALTH TWIST TOP LANCETS		Tier 2	
SAPS TWIST TOP LANCETS		Tier 2	
SAPSCARE TWIST TOP LANCETS		Tier 2	
SB LANCETS THIN		Tier 2	
SB LANCETS ULTRA THIN		Tier 2	
SELECT-LITE LANCING DEVICE		Tier 2	
SHOPKO AUTOLET LANCING DEVICE (LANCET DEVICE)	Tier 2	Tier 2	

Drug Name	Brand Tier	Generic Tier	Formulary Notes
SHOPKO ON-THE-GO LANCETS 30G (LANCETS)	Tier 2	Tier 2	
SHOPKO UNILET LANCETS 28G (LANCETS)	Tier 2	Tier 2	
SHOPKO UNILET LANCETS 30G (LANCETS)	Tier 2	Tier 2	
SIMPLE DIAGNOSTICS LANCING DEV (LANCET DEVICE)	Tier 2	Tier 2	
SINGLE-LET (LANCETS)	Tier 2	Tier 2	
SM LANCETS 33G		Tier 2	
SM TRUEDRAW LANCING DEVICE (LANCET DEVICE)	Tier 2	Tier 2	
SMART DIABETES VANTAGE LANCING (LANCET DEVICE)	Tier 2	Tier 2	
SMART SENSE COLOR LANCETS 33G (LANCETS)	Tier 2	Tier 2	
SMART SENSE STANDARD LANCETS (LANCETS)	Tier 2	Tier 2	
SMART SENSE SUPER THIN LANCETS (LANCETS)	Tier 2	Tier 2	
SMART SENSE THIN LANCETS 26G (LANCETS)	Tier 2	Tier 2	
SMARTTEST LANCETS 28G (LANCETS)	Tier 2	Tier 2	
SOLUS V2 LANCETS 28G (LANCETS)	Tier 2	Tier 2	
SOLUS V2 LANCING DEVICE (LANCET DEVICE)	Tier 2	Tier 2	
SOLUS V2 TWIST LANCETS 30G (LANCETS)	Tier 2	Tier 2	
STERILANCE PA (LANCET TRANSPORTER CASE)	Tier 2	Tier 2	
STERILANCE TL (LANCETS)	Tier 2	Tier 2	
SUPER THIN LANCETS		Tier 2	
SURE COMFORT LANCETS 18G		Tier 2	
SURE COMFORT LANCETS 21G		Tier 2	
SURE COMFORT LANCETS 23G		Tier 2	
SURE COMFORT LANCETS 28G		Tier 2	
SURE COMFORT LANCETS 30G		Tier 2	
SURE COMFORT LANCING PEN		Tier 2	
SURE-LANCE FLAT LANCETS (LANCETS)	Tier 2	Tier 2	
SURE-LANCE LANCETS 26G (LANCETS)	Tier 2	Tier 2	

Drug Name	Brand Tier	Generic Tier	Formulary Notes
SURE-LANCE THIN LANCETS 28G (LANCETS)	Tier 2	Tier 2	
SURE-LANCE ULTRA THIN LANCETS (LANCETS)	Tier 2	Tier 2	
SURELITE LANCETS (LANCETS)	Tier 2	Tier 2	
SURE-PEN (LANCET DEVICE)	Tier 2	Tier 2	
SURE-TOUCH LANCETS UNIVERSAL (LANCETS)	Tier 2	Tier 2	
TECHLITE AST LANCETS (LANCETS)	Tier 2	Tier 2	
TECHLITE LANCETS (LANCETS)	Tier 2	Tier 2	
TECHLITE LANCETS 30G (LANCETS)	Tier 2	Tier 2	
TGT LANCET MICRO THIN 33G		Tier 2	
TGT LANCET THIN 26G		Tier 2	
TGT LANCET ULTRA THIN 30G		Tier 2	
TGT LANCING DEVICE		Tier 2	
THINLETS GP LANCETS (LANCETS)	Tier 2	Tier 2	
TODAYS HEALTH LANCING DEVICE		Tier 2	
TODAYS HEALTH THIN LANCETS 28G		Tier 2	
TODAYS HEALTH THIN LANCETS 30G		Tier 2	
TOPCARE LANCETS MICRO-THIN 33G		Tier 2	
TRAVEL LANCETS		Tier 2	
TRAVEL LANCETS ADVANCED 28G (LANCETS)	Tier 2	Tier 2	
TRUE COMFORT TWIST TOP LANCETS		Tier 2	
TRUEDRAW LANCING DEVICE (LANCET DEVICE)	Tier 2	Tier 2	
TRUEPLUS LANCETS 26G (LANCETS)	Tier 2	Tier 2	
TRUEPLUS LANCETS 28G (LANCETS)	Tier 2	Tier 2	
TRUEPLUS LANCETS 30G (LANCETS)	Tier 2	Tier 2	
TRUEPLUS LANCETS 33G (LANCETS)	Tier 2	Tier 2	
TRUEPLUS SAFETY LANCETS 28G (LANCETS)	Tier 2	Tier 2	
ULTI-LANCE AUTOMATIC (LANCET DEVICE)	Tier 2	Tier 2	
ULTILET CLASSIC LANCETS (LANCETS)	Tier 2	Tier 2	
ULTILET LANCETS (LANCETS)	Tier 2	Tier 2	
ULTILET SAFETY LANCETS (LANCETS)	Tier 2	Tier 2	
ULTILET SAFETY LANCETS 23G (LANCETS)	Tier 2	Tier 2	

Drug Name	Brand Tier	Generic Tier	Formulary Notes
ULTRA THIN LANCETS 31G		Tier 2	
ULTRA-CARE LANCETS 30G		Tier 2	
ULTRA-THIN II AUTO LANCET (LANCETS)	Tier 2	Tier 2	
ULTRA-THIN II LANCETS (LANCETS)	Tier 2	Tier 2	
UNILET COMFORTOUCH LANCET (LANCETS)	Tier 2	Tier 2	
UNILET EXCELITE (LANCETS)	Tier 2	Tier 2	
UNILET EXCELITE II (LANCETS)	Tier 2	Tier 2	
UNILET G.P. LANCET (LANCETS)	Tier 2	Tier 2	
UNILET G.P. SUPERLITE LANCET (LANCETS)	Tier 2	Tier 2	
UNILET GP 28 ULTRA THIN (LANCETS)	Tier 2	Tier 2	
UNILET LANCET (LANCETS)	Tier 2	Tier 2	
UNILET MICRO-THIN 33G (LANCETS)	Tier 2	Tier 2	
UNILET SUPERLITE LANCET (LANCETS)	Tier 2	Tier 2	
UNILET SUPER-THIN 30G (LANCETS)	Tier 2	Tier 2	
UNILET ULTRA-THIN 28G (LANCETS)	Tier 2	Tier 2	
UNISTIK 1 (LANCET TRANSPORTER CASE)	Tier 2	Tier 2	
UNISTIK 2 (LANCET TRANSPORTER CASE)	Tier 2	Tier 2	
UNISTIK 2 COMFORT (LANCET TRANSPORTER CASE)	Tier 2	Tier 2	
UNISTIK 2 EXTRA (LANCET TRANSPORTER CASE)	Tier 2	Tier 2	
UNISTIK 2 NEONATAL (LANCET TRANSPORTER CASE)	Tier 2	Tier 2	
UNISTIK 2 NORMAL (LANCET TRANSPORTER CASE)	Tier 2	Tier 2	
UNISTIK 2 SUPER (LANCET TRANSPORTER CASE)	Tier 2	Tier 2	
UNISTIK 3 (LANCET TRANSPORTER CASE)	Tier 2	Tier 2	
UNISTIK 3 COMFORT (LANCET TRANSPORTER CASE)	Tier 2	Tier 2	
UNISTIK 3 EXTRA (LANCET TRANSPORTER CASE)	Tier 2	Tier 2	
UNISTIK 3 GENTLE (LANCETS)	Tier 2	Tier 2	
UNISTIK 3 NEONATAL (LANCET TRANSPORTER CASE)	Tier 2	Tier 2	

Drug Name	Brand Tier	Generic Tier	Formulary Notes
UNISTIK 3 NORMAL (LANCET TRANSPORTER CASE)	Tier 2	Tier 2	
UNISTIK CZT COMFORT (LANCET TRANSPORTER CASE)	Tier 2	Tier 2	
UNISTIK CZT NORMAL (LANCET TRANSPORTER CASE)	Tier 2	Tier 2	
UNISTIK NORMAL (LANCET TRANSPORTER CASE)	Tier 2	Tier 2	
UNISTIK PRO SAFETY LANCET (LANCETS)	Tier 2	Tier 2	
UNISTIK SAFETY LANCETS 28G (LANCETS)	Tier 2	Tier 2	
UNISTIK SAFETY LANCETS 30G (LANCETS)	Tier 2	Tier 2	
UNISTIK TOUCH SAFETY LANC 21G (LANCETS)	Tier 2	Tier 2	
UNISTIK TOUCH SAFETY LANC 23G (LANCETS)	Tier 2	Tier 2	
UNISTIK TOUCH SAFETY LANC 28G (LANCETS)	Tier 2	Tier 2	
UNISTIK TOUCH SAFETY LANC 30G (LANCETS)	Tier 2	Tier 2	
UNIVERSAL 1 LANCETS THIN 26G (LANCETS)	Tier 2	Tier 2	
UNIVERSAL 1 LANCETS THIN 33G (LANCETS)	Tier 2	Tier 2	
UNIVERSAL 1 LANCETS ULTRA THIN (LANCETS)	Tier 2	Tier 2	
VALUE PLUS LANCET STANDARD 21G		Tier 2	
VALUE PLUS LANCETS SUPER THIN		Tier 2	
VALUE PLUS LANCETS THIN 26G		Tier 2	
VALUE PLUS LANCING DEVICE		Tier 2	
VALUMARK LANCET SUPER THIN 30G		Tier 2	
VALUMARK LANCET ULTRA THIN 28G		Tier 2	
VIDA MIA AUTOLET LANCING DEV (LANCET DEVICE)	Tier 2	Tier 2	
VIDA MIA UNILET LANCETS 28G (LANCETS)	Tier 2	Tier 2	
VIDA MIA UNILET LANCETS 30G (LANCETS)	Tier 2	Tier 2	
VIVAGUARD LANCETS (LANCETS)	Tier 2	Tier 2	

Drug Name	Brand Tier	Generic Tier	Formulary Notes
VIVAGUARD LANCING DEVICE (LANCET DEVICE)	Tier 2	Tier 2	
WALGREENS ADV TRAVEL LANCETS		Tier 2	
WALGREENS LANCETS (LANCETS)	Tier 2	Tier 2	
WALGREENS LANCETS MICRO THIN		Tier 2	
WALGREENS LANCETS SUPER THIN		Tier 2	
WALGREENS THIN LANCETS (LANCETS)	Tier 2	Tier 2	
WALGREENS ULTRA THIN LANCETS (LANCETS)	Tier 2	Tier 2	
ZEV RX TWIST TOP LANCETS 30G		Tier 2	
*Misc. Devices***			
FOLDING PADDLE WALKER		Tier 1	
*Needles & Syringes***			
1ST TIER UNIFINE PENTIPS 29G X 12MM , 31G X 5 MM , 31G X 6 MM , 31G X 8 MM , 32G X 4 MM , 32G X 6 MM , 33G X 4 MM		Tier 2	
1ST TIER UNIFINE PENTIPS PLUS 29G X 12MM , 31G X 5 MM , 31G X 6 MM , 31G X 8 MM , 32G X 4 MM , 33G X 4 MM		Tier 2	
ABOUTTIME PEN NEEDLE (SURE COMFORT PEN NEEDLES) 30G X 8 MM , 31G X 5 MM	Tier 2	Tier 2	
ABOUTTIME PEN NEEDLE (PEN NEEDLES 5/16") 31G X 8 MM	Tier 2	Tier 2	
ABOUTTIME PEN NEEDLE (INSUPEN PEN NEEDLES) 32G X 4 MM	Tier 2	Tier 2	
ADVOCATE INSULIN PEN NEEDLES (SURE COMFORT PEN NEEDLES) 29G X 12.7MM , 31G X 5 MM	Tier 2	Tier 2	
ADVOCATE INSULIN PEN NEEDLES (PEN NEEDLES 5/16") 31G X 8 MM	Tier 2	Tier 2	
ADVOCATE INSULIN PEN NEEDLES (INSUPEN PEN NEEDLES) 33G X 4 MM	Tier 2	Tier 2	
ADVOCATE INSULIN SYRINGE (KROGER INSULIN SYRINGE) 29G X 1/2" 0.3 ML	Tier 2	Tier 2	
ADVOCATE INSULIN SYRINGE (INSULIN SYRINGE) 29G X 1/2" 0.5 ML, 29G X 1/2" 1 ML	Tier 2	Tier 2	

Drug Name	Brand Tier	Generic Tier	Formulary Notes
ADVOCATE INSULIN SYRINGE (INSULIN SYRINGE-NEEDLE U-100) 30G X 5/16" 0.3 ML, 30G X 5/16" 0.5 ML, 30G X 5/16" 1 ML, 31G X 5/16" 0.3 ML, 31G X 5/16" 0.5 ML, 31G X 5/16" 1 ML	Tier 2	Tier 2	
ALLERGY SYRINGE 27G X 1/2" 1 ML		Tier 2	
ASSURE ID SAFETY PEN NEEDLES (PEN NEEDLES) 30G X 5 MM	Tier 2	Tier 2	
ASSURE ID SAFETY PEN NEEDLES (SURE COMFORT PEN NEEDLES) 30G X 8 MM , 31G X 5 MM	Tier 2	Tier 2	
AURORA PEN NEEDLES 29G X 12MM , 31G X 6 MM , 31G X 8 MM		Tier 2	
AURORA UNIFINE PENTIPS 31G X 5 MM , 32G X 4 MM		Tier 2	
BD AUTOSHIELD 29G X 5MM , 29G X 8MM	Tier 2		
BD AUTOSHIELD DUO (PEN NEEDLES) 30G X 5 MM	Tier 2	Tier 2	
BD HYPODERMIC NEEDLE 18G X 1" , 18G X 1-1/2" , 22G X 1"	Tier 2		
BD INSULIN SYR ULTRAFINE II (INSULIN SYRINGE-NEEDLE U-100) 31G X 5/16" 0.3 ML, 31G X 5/16" 0.5 ML	Tier 2	Tier 2	
BD INSULIN SYRINGE 25G X 1" 1 ML, 25G X 5/8" 1 ML, 26G X 1/2" 1 ML, 27.5G X 5/8" 2 ML	Tier 2		
BD INSULIN SYRINGE (SAFETY INSULIN SYRINGES) 27G X 1/2" 1 ML	Tier 2	Tier 2	
BD INSULIN SYRINGE (KROGER INSULIN SYRINGE) 29G X 1/2" 0.3 ML	Tier 2	Tier 2	
BD INSULIN SYRINGE (INSULIN SYRINGE) 29G X 1/2" 0.5 ML, 29G X 1/2" 1 ML	Tier 2	Tier 2	
BD INSULIN SYRINGE HALF-UNIT (INSULIN SYRINGE-NEEDLE U-100) 31G X 5/16" 0.3 ML	Tier 2	Tier 2	
BD INSULIN SYRINGE MICROFINE 27G X 5/8" 1 ML	Tier 2		
BD INSULIN SYRINGE MICROFINE (INSULIN SYRINGE/NEEDLE) 28G X 1/2" 0.5 ML, 28G X 1/2" 1 ML	Tier 2	Tier 2	
BD INSULIN SYRINGE U/F 1/2UNIT (INSULIN SYRINGE-NEEDLE U-100) 31G X 5/16" 0.3 ML	Tier 2	Tier 2	

Drug Name	Brand Tier	Generic Tier	Formulary Notes
BD INSULIN SYRINGE U/F (SURE COMFORT INSULIN SYRINGE) 30G X 1/2" 0.3 ML, 30G X 1/2" 0.5 ML	Tier 2	Tier 2	
BD INSULIN SYRINGE U/F (INSULIN SYRINGE) 30G X 1/2" 1 ML	Tier 2	Tier 2	
BD INSULIN SYRINGE U/F (INSULIN SYRINGE-NEEDLE U-100) 31G X 5/16" 0.3 ML, 31G X 5/16" 0.5 ML, 31G X 5/16" 1 ML	Tier 2	Tier 2	
BD INSULIN SYRINGE (KMART VALU INSULIN SYRINGE 29G) U-100 1 ML	Tier 2	Tier 2	
BD INSULIN SYRINGE U-500 31G X 6MM 0.5 ML	Tier 2		
BD INSULIN SYRINGE ULTRAFINE (KROGER INSULIN SYRINGE) 29G X 1/2" 0.3 ML	Tier 2	Tier 2	
BD INSULIN SYRINGE ULTRAFINE (INSULIN SYRINGE) 29G X 1/2" 0.5 ML, 29G X 1/2" 1 ML	Tier 2	Tier 2	
BD INSULIN SYRINGE ULTRAFINE (SURE COMFORT INSULIN SYRINGE) 30G X 1/2" 0.3 ML, 30G X 1/2" 0.5 ML	Tier 2	Tier 2	
BD INSULIN SYRINGE ULTRAFINE (INSULIN SYRINGE-NEEDLE U-100) 31G X 5/16" 0.5 ML	Tier 2	Tier 2	
BD INTEGRA SYRINGE (SYRINGE) 22G X 1-1/2" 3 ML	Tier 2	Tier 2	
BD LUER-LOK SYRINGE (SYRINGE) 22G X 1-1/2" 3 ML, 23G X 1" 3 ML, 25G X 5/8" 3 ML	Tier 2	Tier 2	
BD LUER-LOK SYRINGE (SYRINGE LUER SLIP) 25G X 5/8" 1 ML	Tier 2	Tier 2	
BD PEN NEEDLE MICRO U/F (SURE COMFORT PEN NEEDLES) 32G X 6 MM	Tier 2	Tier 2	
BD PEN NEEDLE MINI U/F (SURE COMFORT PEN NEEDLES) 31G X 5 MM	Tier 2	Tier 2	
BD PEN NEEDLE NANO 2ND GEN (INSUPEN PEN NEEDLES) 32G X 4 MM	Tier 2	Tier 2	
BD PEN NEEDLE NANO U/F (INSUPEN PEN NEEDLES) 32G X 4 MM	Tier 2	Tier 2	
BD PEN NEEDLE ORIGINAL U/F (SURE COMFORT PEN NEEDLES) 29G X 12.7MM	Tier 2	Tier 2	
BD PEN NEEDLE SHORT U/F (PEN NEEDLES 5/16") 31G X 8 MM	Tier 2	Tier 2	

Drug Name	Brand Tier	Generic Tier	Formulary Notes
BD SAFETYGLIDE INSULIN SYRINGE (KROGER INSULIN SYRINGE) 29G X 1/2" 0.3 ML	Tier 2	Tier 2	
BD SAFETYGLIDE INSULIN SYRINGE (INSULIN SYRINGE) 29G X 1/2" 0.5 ML	Tier 2	Tier 2	
BD SAFETYGLIDE INSULIN SYRINGE (INSULIN SYRINGE-NEEDLE U-100) 30G X 5/16" 0.5 ML, 31G X 5/16" 0.3 ML	Tier 2	Tier 2	
BD SAFETYGLIDE INSULIN SYRINGE (TECHLITE INSULIN SYRINGE) 31G X 15/64" 0.3 ML, 31G X 15/64" 0.5 ML, 31G X 15/64" 1 ML	Tier 2	Tier 2	
BD SAFETY-LOK INSULIN SYRINGE (INSULIN SYRINGE) 29G X 1/2" 1 ML	Tier 2	Tier 2	
BD SYRINGE/NEEDLE (SYRINGE) 22G X 1-1/2" 3 ML, 23G X 1" 3 ML	Tier 2	Tier 2	
BD TB SYRINGE (TUBERCULIN SYRINGE) 25G X 5/8" 1 ML, 27G X 1/2" 1 ML	Tier 2	Tier 2	
BD VEO INSULIN SYR U/F 1/2UNIT (TECHLITE INSULIN SYRINGE) 31G X 15/64" 0.3 ML	Tier 2	Tier 2	
BD VEO INSULIN SYRINGE U/F (TECHLITE INSULIN SYRINGE) 31G X 15/64" 0.3 ML, 31G X 15/64" 0.5 ML, 31G X 15/64" 1 ML	Tier 2	Tier 2	
CAREFINE PEN NEEDLES (PEN NEEDLES 1/2") 29G X 12MM	Tier 2	Tier 2	
CAREFINE PEN NEEDLES (SURE COMFORT PEN NEEDLES) 30G X 8 MM , 32G X 6 MM	Tier 2	Tier 2	
CAREFINE PEN NEEDLES (MEIJER PEN NEEDLES) 31G X 6 MM	Tier 2	Tier 2	
CAREFINE PEN NEEDLES (PEN NEEDLES 5/16") 31G X 8 MM	Tier 2	Tier 2	
CAREFINE PEN NEEDLES (INSUPEN PEN NEEDLES) 32G X 4 MM	Tier 2	Tier 2	
CAREFINE PEN NEEDLES (PRO COMFORT PEN NEEDLES) 32G X 5 MM	Tier 2	Tier 2	
CAREONE INSULIN SYRINGE 30G X 1/2" 0.3 ML, 30G X 1/2" 0.5 ML, 30G X 1/2" 1 ML, 31G X 5/16" 0.3 ML, 31G X 5/16" 0.5 ML, 31G X 5/16" 1 ML		Tier 2	

Drug Name	Brand Tier	Generic Tier	Formulary Notes
CAREONE UNIFINE PENTIPS 29G X 12MM , 31G X 5 MM , 31G X 6 MM , 31G X 8 MM , 32G X 4 MM		Tier 2	
CAREONE UNIFINE PENTIPS PLUS 29G X 12MM , 31G X 5 MM , 31G X 6 MM , 31G X 8 MM , 32G X 4 MM , 33G X 4 MM		Tier 2	
CAREPOINT SAFETY1ST SYR/NEEDLE (SYRINGE) 23G X 1" 3 ML, 25G X 5/8" 3 ML	Tier 2	Tier 2	
CARETOUCH INSULIN SYRINGE 28G X 5/16" 1 ML, 29G X 5/16" 1 ML	Tier 2		
CARETOUCH INSULIN SYRINGE (INSULIN SYRINGE-NEEDLE U-100) 30G X 5/16" 0.5 ML, 30G X 5/16" 1 ML, 31G X 5/16" 0.3 ML, 31G X 5/16" 0.5 ML, 31G X 5/16" 1 ML	Tier 2	Tier 2	
CARETOUCH LUER LOCK (SYRINGE) 23G X 1" 3 ML	Tier 2	Tier 2	
CARETOUCH LUER LOCK SYR/NEEDLE (SYRINGE) 22G X 1-1/2" 3 ML, 25G X 5/8" 3 ML	Tier 2	Tier 2	
CARETOUCH PEN NEEDLES (PEN NEEDLES 1/2") 29G X 12MM	Tier 2	Tier 2	
CARETOUCH PEN NEEDLES (SURE COMFORT PEN NEEDLES) 31G X 5 MM	Tier 2	Tier 2	
CARETOUCH PEN NEEDLES (MEIJER PEN NEEDLES) 31G X 6 MM	Tier 2	Tier 2	
CARETOUCH PEN NEEDLES (PEN NEEDLES 5/16") 31G X 8 MM	Tier 2	Tier 2	
CARETOUCH PEN NEEDLES (INSUPEN PEN NEEDLES) 32G X 4 MM	Tier 2	Tier 2	
CARETOUCH PEN NEEDLES (PRO COMFORT PEN NEEDLES) 32G X 5 MM	Tier 2	Tier 2	
CLEVER CHOICE COMFORT EZ (PEN NEEDLES 1/2") 29G X 12MM	Tier 2	Tier 2	
CLEVER CHOICE COMFORT EZ (INSUPEN PEN NEEDLES) 33G X 4 MM	Tier 2	Tier 2	
CLICKFINE PEN NEEDLES 31G X 5 MM (SURE COMFORT PEN NEEDLES) 31G X 5 MM	Tier 2	Tier 2	
CLICKFINE PEN NEEDLES 31G X 6 MM 31G X 6 MM		Tier 2	
CLICKFINE PEN NEEDLES 31G X 8 MM 31G X 8 MM		Tier 2	

Drug Name	Brand Tier	Generic Tier	Formulary Notes
CLICKFINE PEN NEEDLES 32G X 4 MM 32G X 4 MM		Tier 2	
COMFORT ASSIST INSULIN SYRINGE (INSULIN SYRINGE-NEEDLE U-100) 31G X 5/16" 0.3 ML	Tier 2	Tier 2	
COMFORT EZ INSULIN SYRINGE (INSULIN SYRINGE/NEEDLE) 28G X 1/2" 0.5 ML, 28G X 1/2" 1 ML	Tier 2	Tier 2	
COMFORT EZ INSULIN SYRINGE (KROGER INSULIN SYRINGE) 29G X 1/2" 0.3 ML	Tier 2	Tier 2	
COMFORT EZ INSULIN SYRINGE (INSULIN SYRINGE) 29G X 1/2" 0.5 ML, 29G X 1/2" 1 ML, 30G X 1/2" 1 ML	Tier 2	Tier 2	
COMFORT EZ INSULIN SYRINGE (SURE COMFORT INSULIN SYRINGE) 30G X 1/2" 0.3 ML, 30G X 1/2" 0.5 ML	Tier 2	Tier 2	
COMFORT EZ INSULIN SYRINGE (INSULIN SYRINGE-NEEDLE U-100) 30G X 5/16" 0.3 ML, 30G X 5/16" 0.5 ML, 30G X 5/16" 1 ML, 31G X 5/16" 0.3 ML, 31G X 5/16" 0.5 ML, 31G X 5/16" 1 ML	Tier 2	Tier 2	
COMFORT EZ MICRO PEN NEEDLES (INSUPEN PEN NEEDLES) 32G X 4 MM	Tier 2	Tier 2	
COMFORT EZ PEN NEEDLES (SURE COMFORT PEN NEEDLES) 31G X 5 MM , 32G X 6 MM	Tier 2	Tier 2	
COMFORT EZ PEN NEEDLES (MEIJER PEN NEEDLES) 31G X 6 MM	Tier 2	Tier 2	
COMFORT EZ PEN NEEDLES (PEN NEEDLES 5/16") 31G X 8 MM	Tier 2	Tier 2	
COMFORT EZ PEN NEEDLES (INSUPEN PEN NEEDLES) 32G X 4 MM , 33G X 4 MM	Tier 2	Tier 2	
COMFORT EZ PEN NEEDLES (PRO COMFORT PEN NEEDLES) 32G X 5 MM	Tier 2	Tier 2	
COMFORT EZ PEN NEEDLES (PURE COMFORT PEN NEEDLE) 32G X 8 MM	Tier 2	Tier 2	
COMFORT EZ PEN NEEDLES (EASY COMFORT PEN NEEDLES) 33G X 5 MM , 33G X 6 MM	Tier 2	Tier 2	
COMFORT EZ PEN NEEDLES 33G X 8 MM	Tier 2		
COMFORT EZ SHORT PEN NEEDLES (PEN NEEDLES 5/16") 31G X 8 MM	Tier 2	Tier 2	

Drug Name	Brand Tier	Generic Tier	Formulary Notes
COMFORT TOUCH INSULIN PEN NEED (SURE COMFORT PEN NEEDLES) 31G X 5 MM , 32G X 6 MM	Tier 2	Tier 2	
COMFORT TOUCH INSULIN PEN NEED (MEIJER PEN NEEDLES) 31G X 6 MM	Tier 2	Tier 2	
COMFORT TOUCH INSULIN PEN NEED (PEN NEEDLES 5/16") 31G X 8 MM	Tier 2	Tier 2	
COMFORT TOUCH INSULIN PEN NEED (INSUPEN PEN NEEDLES) 32G X 4 MM , 33G X 4 MM	Tier 2	Tier 2	
COMFORT TOUCH INSULIN PEN NEED (PRO COMFORT PEN NEEDLES) 32G X 5 MM	Tier 2	Tier 2	
COMFORT TOUCH INSULIN PEN NEED (PURE COMFORT PEN NEEDLE) 32G X 8 MM	Tier 2	Tier 2	
COMFORT TOUCH INSULIN PEN NEED (EASY COMFORT PEN NEEDLES) 33G X 5 MM , 33G X 6 MM	Tier 2	Tier 2	
DIALYSIS SAFETY SYRINGE/NEEDLE 22G X 1-1/2" 3 ML		Tier 2	
DIATHRIVE PEN NEEDLE (SURE COMFORT PEN NEEDLES) 31G X 5 MM	Tier 2	Tier 2	
DIATHRIVE PEN NEEDLE (MEIJER PEN NEEDLES) 31G X 6 MM	Tier 2	Tier 2	
DIATHRIVE PEN NEEDLE (PEN NEEDLES 5/16") 31G X 8 MM	Tier 2	Tier 2	
DIATHRIVE PEN NEEDLE (INSUPEN PEN NEEDLES) 32G X 4 MM	Tier 2	Tier 2	
DROPLET INSULIN SYRINGE (KROGER INSULIN SYRINGE) 29G X 1/2" 0.3 ML	Tier 2	Tier 2	
DROPLET INSULIN SYRINGE (INSULIN SYRINGE) 29G X 1/2" 0.5 ML, 29G X 1/2" 1 ML, 30G X 1/2" 1 ML	Tier 2	Tier 2	
DROPLET INSULIN SYRINGE (SURE COMFORT INSULIN SYRINGE) 30G X 1/2" 0.3 ML, 30G X 1/2" 0.5 ML	Tier 2	Tier 2	
DROPLET INSULIN SYRINGE 30G X 15/64" 0.3 ML, 30G X 15/64" 0.5 ML, 30G X 15/64" 1 ML	Tier 2		

Drug Name	Brand Tier	Generic Tier	Formulary Notes
DROPLET INSULIN SYRINGE (INSULIN SYRINGE-NEEDLE U-100) 30G X 5/16" 0.3 ML, 30G X 5/16" 0.5 ML, 30G X 5/16" 1 ML, 31G X 5/16" 0.3 ML, 31G X 5/16" 0.5 ML, 31G X 5/16" 1 ML	Tier 2	Tier 2	
DROPLET INSULIN SYRINGE (TECHLITE INSULIN SYRINGE) 31G X 15/64" 0.3 ML, 31G X 15/64" 0.5 ML, 31G X 15/64" 1 ML	Tier 2	Tier 2	
DROPLET PEN NEEDLES 29G X 10MM	Tier 2		
DROPLET PEN NEEDLES (PEN NEEDLES 1/2") 29G X 12MM	Tier 2	Tier 2	
DROPLET PEN NEEDLES (SURE COMFORT PEN NEEDLES) 30G X 8 MM , 31G X 5 MM , 32G X 6 MM	Tier 2	Tier 2	
DROPLET PEN NEEDLES (MEIJER PEN NEEDLES) 31G X 6 MM	Tier 2	Tier 2	
DROPLET PEN NEEDLES (PEN NEEDLES 5/16") 31G X 8 MM	Tier 2	Tier 2	
DROPLET PEN NEEDLES (INSUPEN PEN NEEDLES) 32G X 4 MM	Tier 2	Tier 2	
DROPLET PEN NEEDLES (PRO COMFORT PEN NEEDLES) 32G X 5 MM	Tier 2	Tier 2	
DROPLET PEN NEEDLES (PURE COMFORT PEN NEEDLE) 32G X 8 MM	Tier 2	Tier 2	
DROPSAFE SAFETY PEN NEEDLES 31G X 6 MM , 31G X 8 MM		Tier 2	
DRUG MART UNIFINE PENTIPS 29G X 12MM , 31G X 5 MM , 31G X 6 MM , 31G X 8 MM , 32G X 4 MM		Tier 2	
DRUG MART UNIFINE PENTIPS PLUS 32G X 4 MM		Tier 2	
EASY COMFORT INSULIN SYRINGE 30G X 1/2" 0.5 ML, 30G X 1/2" 1 ML, 30G X 5/16" 0.5 ML, 30G X 5/16" 1 ML, 31G X 5/16" 0.5 ML, 31G X 5/16" 1 ML, 32G X 5/16" 0.5 ML, 32G X 5/16" 1 ML		Tier 2	
EASY COMFORT PEN NEEDLES 31G X 5 MM , 31G X 6 MM , 31G X 8 MM , 32G X 4 MM , 33G X 4 MM		Tier 2	
EASY GLIDE PEN NEEDLES 33G X 4 MM		Tier 2	
EASY TOUCH ALLERGY SYRINGE (TUBERCULIN SYRINGE) 27G X 1/2" 1 ML	Tier 2	Tier 2	

Drug Name	Brand Tier	Generic Tier	Formulary Notes
EASY TOUCH FLIPLOCK INSULIN SY (INSULIN SYRINGE) 29G X 1/2" 1 ML, 30G X 1/2" 1 ML	Tier 2	Tier 2	
EASY TOUCH FLIPLOCK INSULIN SY (INSULIN SYRINGE-NEEDLE U-100) 30G X 5/16" 1 ML, 31G X 5/16" 1 ML	Tier 2	Tier 2	
EASY TOUCH FLIPLOCK SAFETY SYR (SYRINGE) 22G X 1-1/2" 3 ML, 23G X 1" 3 ML, 25G X 5/8" 3 ML	Tier 2	Tier 2	
EASY TOUCH FLURINGE (SYRINGE LUER SLIP) 25G X 5/8" 1 ML	Tier 2	Tier 2	
EASY TOUCH FLURINGE FLIPLOCK (SYRINGE LUER SLIP) 25G X 5/8" 1 ML	Tier 2	Tier 2	
EASY TOUCH FLURINGE SHEATHLOCK (SYRINGE LUER SLIP) 25G X 5/8" 1 ML	Tier 2	Tier 2	
EASY TOUCH INSULIN SAFETY SYR (INSULIN SYRINGE) 29G X 1/2" 0.5 ML, 29G X 1/2" 1 ML, 30G X 1/2" 1 ML	Tier 2	Tier 2	
EASY TOUCH INSULIN SAFETY SYR (INSULIN SYRINGE-NEEDLE U-100) 30G X 5/16" 0.5 ML	Tier 2	Tier 2	
EASY TOUCH INSULIN SYRINGE (INSULIN SYRINGE/NEEDLE) 27G X 1/2" 0.5 ML, 28G X 1/2" 0.5 ML, 28G X 1/2" 1 ML	Tier 2	Tier 2	
EASY TOUCH INSULIN SYRINGE (SAFETY INSULIN SYRINGES) 27G X 1/2" 1 ML	Tier 2	Tier 2	
EASY TOUCH INSULIN SYRINGE (INSULIN SYRINGE) 29G X 1/2" 0.5 ML, 29G X 1/2" 1 ML, 30G X 1/2" 1 ML	Tier 2	Tier 2	
EASY TOUCH INSULIN SYRINGE (SURE COMFORT INSULIN SYRINGE) 30G X 1/2" 0.3 ML, 30G X 1/2" 0.5 ML	Tier 2	Tier 2	
EASY TOUCH INSULIN SYRINGE (INSULIN SYRINGE-NEEDLE U-100) 30G X 5/16" 0.3 ML, 30G X 5/16" 0.5 ML, 30G X 5/16" 1 ML, 31G X 5/16" 0.3 ML, 31G X 5/16" 0.5 ML, 31G X 5/16" 1 ML	Tier 2	Tier 2	
EASY TOUCH PEN NEEDLES (PEN NEEDLES 1/2") 29G X 12MM	Tier 2	Tier 2	
EASY TOUCH PEN NEEDLES (PEN NEEDLES) 30G X 5 MM	Tier 2	Tier 2	

Drug Name	Brand Tier	Generic Tier	Formulary Notes
EASY TOUCH PEN NEEDLES (SURE COMFORT PEN NEEDLES) 30G X 8 MM , 31G X 5 MM , 32G X 6 MM	Tier 2	Tier 2	
EASY TOUCH PEN NEEDLES (MEIJER PEN NEEDLES) 31G X 6 MM	Tier 2	Tier 2	
EASY TOUCH PEN NEEDLES (PEN NEEDLES 5/16") 31G X 8 MM	Tier 2	Tier 2	
EASY TOUCH PEN NEEDLES (INSUPEN PEN NEEDLES) 32G X 4 MM	Tier 2	Tier 2	
EASY TOUCH PEN NEEDLES (PRO COMFORT PEN NEEDLES) 32G X 5 MM	Tier 2	Tier 2	
EASY TOUCH SAFETY PEN NEEDLES 29G X 5MM , 29G X 8MM	Tier 2		
EASY TOUCH SAFETY PEN NEEDLES (SURE COMFORT PEN NEEDLES) 30G X 8 MM	Tier 2	Tier 2	
EASY TOUCH SAFETY SYRINGE (SYRINGE) 22G X 1-1/2" 3 ML, 23G X 1" 3 ML, 25G X 5/8" 3 ML	Tier 2	Tier 2	
EASY TOUCH SAFETY SYRINGE (SYRINGE LUER SLIP) 25G X 5/8" 1 ML	Tier 2	Tier 2	
EASY TOUCH SHEATHLOCK SYRINGE (SYRINGE) 22G X 1-1/2" 3 ML, 23G X 1" 3 ML, 25G X 5/8" 3 ML	Tier 2	Tier 2	
EASY TOUCH SHEATHLOCK SYRINGE (INSULIN SYRINGE) 29G X 1/2" 1 ML, 30G X 1/2" 1 ML	Tier 2	Tier 2	
EASY TOUCH SHEATHLOCK SYRINGE (INSULIN SYRINGE-NEEDLE U-100) 30G X 5/16" 1 ML, 31G X 5/16" 1 ML	Tier 2	Tier 2	
EASY TOUCH TB FLIPLOCK SYRINGE (TUBERCULIN SYRINGE) 27G X 1/2" 1 ML	Tier 2	Tier 2	
EASY TOUCH TB SHEATHLOCK SYR (TUBERCULIN SYRINGE) 25G X 5/8" 1 ML, 27G X 1/2" 1 ML	Tier 2	Tier 2	
EASY TOUCH TB SHEATHLOCK SYR 26G X 5/8" 1 ML	Tier 2		
EASYPPOINT NEEDLE/SYRINGE (SYRINGE) 23G X 1" 3 ML, 25G X 5/8" 3 ML	Tier 2	Tier 2	
EQL INSULIN SYRINGE 29G X 1/2" 0.3 ML, 29G X 1/2" 0.5 ML, 29G X 1/2" 1 ML, 30G X 5/16" 0.3 ML, 30G X 5/16" 0.5 ML, 30G X 5/16" 1 ML, 31G X 5/16" 0.3 ML, 31G X 5/16" 0.5 ML, 31G X 5/16" 1 ML		Tier 2	

Drug Name	Brand Tier	Generic Tier	Formulary Notes
EXEL COMFORT POINT INSULIN SYR (INSULIN SYRINGE/NEEDLE) 28G X 1/2" 0.5 ML, 28G X 1/2" 1 ML	Tier 2	Tier 2	
EXEL COMFORT POINT INSULIN SYR (KROGER INSULIN SYRINGE) 29G X 1/2" 0.3 ML	Tier 2	Tier 2	
EXEL COMFORT POINT INSULIN SYR (INSULIN SYRINGE) 29G X 1/2" 0.5 ML, 29G X 1/2" 1 ML	Tier 2	Tier 2	
EXEL COMFORT POINT INSULIN SYR (INSULIN SYRINGE-NEEDLE U-100) 30G X 5/16" 0.3 ML, 30G X 5/16" 0.5 ML, 30G X 5/16" 1 ML	Tier 2	Tier 2	
EXEL COMFORT POINT PEN NEEDLE (PEN NEEDLES 1/2") 29G X 12MM	Tier 2	Tier 2	
EXEL COMFORT POINT PEN NEEDLE (MEIJER PEN NEEDLES) 31G X 6 MM	Tier 2	Tier 2	
EXEL COMFORT POINT PEN NEEDLE (PEN NEEDLES 5/16") 31G X 8 MM	Tier 2	Tier 2	
FIFTY50 PEN NEEDLES (SURE COMFORT PEN NEEDLES) 31G X 5 MM , 32G X 6 MM	Tier 2	Tier 2	
FIFTY50 PEN NEEDLES (PEN NEEDLES 5/16") 31G X 8 MM	Tier 2	Tier 2	
FIFTY50 PEN NEEDLES (INSUPEN PEN NEEDLES) 32G X 4 MM	Tier 2	Tier 2	
FIFTY50 SUPERIOR COMFORT SYR (INSULIN SYRINGE-NEEDLE U-100) 31G X 5/16" 0.3 ML, 31G X 5/16" 0.5 ML, 31G X 5/16" 1 ML	Tier 2	Tier 2	
FREDS PHARMACY UNIFINE PENTIP+ 31G X 5 MM , 31G X 8 MM		Tier 2	
FREDS PHARMACY UNIFINE PENTIPS 32G X 4 MM		Tier 2	
FREESTYLE PRECISION INS SYR (INSULIN SYRINGE-NEEDLE U-100) 30G X 5/16" 0.5 ML, 30G X 5/16" 1 ML, 31G X 5/16" 0.5 ML, 31G X 5/16" 1 ML	Tier 2	Tier 2	
GLOBAL EASE INJECT PEN NEEDLES 29G X 12MM , 31G X 5 MM , 31G X 8 MM , 32G X 4 MM		Tier 2	
GLOBAL EASY GLIDE INSULIN SYR 31G X 15/64" 0.3 ML, 31G X 15/64" 0.5 ML, 31G X 15/64" 1 ML, 31G X 5/16" 0.3 ML		Tier 2	

Drug Name	Brand Tier	Generic Tier	Formulary Notes
GLOBAL EASY GLIDE PEN NEEDLES 32G X 4 MM		Tier 2	
GLOBAL INJECT EASE INSULIN SYR 28G X 1/2" 0.5 ML, 28G X 1/2" 1 ML, 29G X 1/2" 0.3 ML, 29G X 1/2" 0.5 ML, 29G X 1/2" 1 ML, 30G X 1/2" 0.3 ML, 30G X 1/2" 0.5 ML, 30G X 1/2" 1 ML, 30G X 5/16" 0.3 ML, 30G X 5/16" 0.5 ML, 30G X 5/16" 1 ML, 31G X 5/16" 0.3 ML, 31G X 5/16" 0.5 ML, 31G X 5/16" 1 ML		Tier 2	
GLOBAL INSULIN SYRINGES 30G X 1/2" 0.3 ML, 30G X 5/16" 0.3 ML		Tier 2	
GLUCOPRO INSULIN SYRINGE (SURE COMFORT INSULIN SYRINGE) 30G X 1/2" 0.3 ML, 30G X 1/2" 0.5 ML	Tier 2	Tier 2	
GLUCOPRO INSULIN SYRINGE (INSULIN SYRINGE) 30G X 1/2" 1 ML	Tier 2	Tier 2	
GLUCOPRO INSULIN SYRINGE (INSULIN SYRINGE-NEEDLE U-100) 30G X 5/16" 0.3 ML, 30G X 5/16" 0.5 ML, 30G X 5/16" 1 ML, 31G X 5/16" 0.3 ML, 31G X 5/16" 0.5 ML, 31G X 5/16" 1 ML	Tier 2	Tier 2	
GNP CLICKFINE PEN NEEDLES 31G X 6 MM , 31G X 8 MM		Tier 2	
GNP INSULIN SYRINGE 28G X 1/2" 0.5 ML, 29G X 1/2" 0.3 ML, 29G X 1/2" 0.5 ML, 29G X 1/2" 1 ML, 30G X 5/16" 0.3 ML, 30G X 5/16" 0.5 ML, 30G X 5/16" 1 ML, 31G X 5/16" 0.3 ML, 31G X 5/16" 0.5 ML, 31G X 5/16" 1 ML		Tier 2	
GNP INSULIN SYRINGES 28GX1/2" 28G X 1/2" 1 ML		Tier 2	
GNP INSULIN SYRINGES 29GX1/2" 29G X 1/2" 0.5 ML, 29G X 1/2" 1 ML		Tier 2	
GNP INSULIN SYRINGES 30G X 5/16" 1 ML		Tier 2	
GNP INSULIN SYRINGES 30GX5/16" 30G X 5/16" 0.3 ML		Tier 2	
GNP INSULIN SYRINGES 31GX5/16" 31G X 5/16" 0.3 ML		Tier 2	
GNP ULTICARE PEN NEEDLES 31G X 5 MM , 31G X 8 MM , 32G X 4 MM , 32G X 6 MM		Tier 2	
GNP ULTRA COM INSULIN SYRINGE 28G X 1/2" 1 ML		Tier 2	
GOODSENSE CLICKFINE PEN NEEDLE 31G X 5 MM		Tier 2	

Drug Name	Brand Tier	Generic Tier	Formulary Notes
GOODSENSE PEN NEEDLE PENFINE (SURE COMFORT PEN NEEDLES) 31G X 5 MM , 32G X 6 MM	Tier 2	Tier 2	
GOODSENSE PEN NEEDLE PENFINE (PEN NEEDLES 5/16") 31G X 8 MM	Tier 2	Tier 2	
GOODSENSE PEN NEEDLE PENFINE (INSUPEN PEN NEEDLES) 32G X 4 MM	Tier 2	Tier 2	
HEALTHWISE INSULIN SYR/NEEDLE 30G X 5/16" 0.3 ML, 30G X 5/16" 0.5 ML, 30G X 5/16" 1 ML, 31G X 5/16" 0.3 ML, 31G X 5/16" 0.5 ML, 31G X 5/16" 1 ML		Tier 2	
HEALTHWISE MICRON PEN NEEDLES 32G X 4 MM		Tier 2	
HEALTHWISE MINI PEN NEEDLES 31G X 6 MM		Tier 2	
HEALTHWISE PEN NEEDLES 29G X 12MM		Tier 2	
HEALTHWISE SHORT PEN NEEDLES 31G X 5 MM , 31G X 8 MM		Tier 2	
HEALTHWISE UNIFINE PENTIPS 32G X 4 MM		Tier 2	
HEALTHY ACCENTS UNIFINE PENTIP 29G X 12MM , 31G X 5 MM , 31G X 6 MM , 31G X 8 MM , 32G X 4 MM		Tier 2	
H-E-B INCONTROL PEN NEEDLES 29G X 12MM , 31G X 5 MM , 31G X 6 MM , 31G X 8 MM , 32G X 4 MM		Tier 2	
H-E-B INCONTROL UNIFINE PENTIP (SURE COMFORT PEN NEEDLES) 31G X 5 MM	Tier 2	Tier 2	
H-E-B INCONTROL UNIFINE PENTIP (MEIJER PEN NEEDLES) 31G X 6 MM	Tier 2	Tier 2	
H-E-B INCONTROL UNIFINE PENTIP (PEN NEEDLES 5/16") 31G X 8 MM	Tier 2	Tier 2	
H-E-B INCONTROL UNIFINE PENTIP (INSUPEN PEN NEEDLES) 32G X 4 MM , 33G X 4 MM	Tier 2	Tier 2	
HM ULTICARE INSULIN SYRINGE (INSULIN SYRINGE) 30G X 1/2" 1 ML	Tier 2	Tier 2	
HM ULTICARE INSULIN SYRINGE (INSULIN SYRINGE-NEEDLE U-100) 31G X 5/16" 0.3 ML	Tier 2	Tier 2	
HM ULTICARE MINI PEN NEEDLES (SURE COMFORT PEN NEEDLES) 31G X 5 MM	Tier 2	Tier 2	

Drug Name	Brand Tier	Generic Tier	Formulary Notes
HM ULTICARE SHORT PEN NEEDLES (PEN NEEDLES 5/16") 31G X 8 MM	Tier 2	Tier 2	
INSULIN SYRINGE 27G X 1/2" 0.5 ML, 27G X 1/2" 1 ML, 28G X 1/2" 0.5 ML, 28G X 1/2" 1 ML, 29G X 1/2" 0.3 ML, 30G X 5/16" 0.3 ML, 30G X 5/16" 0.5 ML, 30G X 5/16" 1 ML, 31G X 5/16" 0.3 ML, 31G X 5/16" 0.5 ML, 31G X 5/16" 1 ML		Tier 2	
INSULIN SYRINGE-NEEDLE U-100 29G X 1/2" 0.5 ML, 29G X 1/2" 1 ML		Tier 2	
INSUPEN PEN NEEDLES 29G X 12MM , 31G X 5 MM , 31G X 8 MM		Tier 2	
INSUPEN SENSITIVE (SURE COMFORT PEN NEEDLES) 32G X 6 MM	Tier 2	Tier 2	
INSUPEN SENSITIVE (PURE COMFORT PEN NEEDLE) 32G X 8 MM	Tier 2	Tier 2	
INSUPEN ULTRAFIN (SURE COMFORT PEN NEEDLES) 30G X 8 MM	Tier 2	Tier 2	
INSUPEN ULTRAFIN (MEIJER PEN NEEDLES) 31G X 6 MM	Tier 2	Tier 2	
INSUPEN ULTRAFIN (PEN NEEDLES 5/16") 31G X 8 MM	Tier 2	Tier 2	
KINRAY INSULIN SYRINGE 29G X 1/2" 0.5 ML, 31G X 5/16" 0.3 ML, 31G X 5/16" 0.5 ML, 31G X 5/16" 1 ML		Tier 2	
KMART VALU INSULIN SYRINGE 30G U-100 1 ML		Tier 2	
KROGER INSULIN SYRINGE 29G X 1/2" 0.5 ML, 29G X 1/2" 1 ML, 30G X 5/16" 0.3 ML, 30G X 5/16" 0.5 ML, 30G X 5/16" 1 ML, 31G X 5/16" 0.3 ML, 31G X 5/16" 0.5 ML, 31G X 5/16" 1 ML		Tier 2	
KROGER PEN NEEDLES 29G X 12MM , 31G X 5 MM , 31G X 6 MM , 31G X 8 MM , 32G X 4 MM , 33G X 4 MM		Tier 2	
LEADER INSULIN SYRINGE 28G X 1/2" 0.5 ML, 28G X 1/2" 1 ML, 29G X 1/2" 0.3 ML, 29G X 1/2" 0.5 ML, 29G X 1/2" 1 ML, 30G X 5/16" 0.3 ML, 30G X 5/16" 0.5 ML, 30G X 5/16" 1 ML, 31G X 5/16" 0.3 ML, 31G X 5/16" 0.5 ML, 31G X 5/16" 1 ML		Tier 2	
LEADER UNIFINE PENTIPS (SURE COMFORT PEN NEEDLES) 31G X 5 MM	Tier 2	Tier 2	

Drug Name	Brand Tier	Generic Tier	Formulary Notes
LEADER UNIFINE PENTIPS (INSUPEN PEN NEEDLES) 32G X 4 MM	Tier 2	Tier 2	
LEADER UNIFINE PENTIPS PLUS (SURE COMFORT PEN NEEDLES) 31G X 5 MM	Tier 2	Tier 2	
LEADER UNIFINE PENTIPS PLUS (PEN NEEDLES 5/16") 31G X 8 MM	Tier 2	Tier 2	
LEADER UNIFINE PENTIPS PLUS (INSUPEN PEN NEEDLES) 32G X 4 MM	Tier 2	Tier 2	
LITETOUCH INSULIN SYRINGE (INSULIN SYRINGE/NEEDLE) 28G X 1/2" 0.5 ML, 28G X 1/2" 1 ML	Tier 2	Tier 2	
LITETOUCH INSULIN SYRINGE (KROGER INSULIN SYRINGE) 29G X 1/2" 0.3 ML	Tier 2	Tier 2	
LITETOUCH INSULIN SYRINGE (INSULIN SYRINGE) 29G X 1/2" 0.5 ML, 29G X 1/2" 1 ML	Tier 2	Tier 2	
LITETOUCH INSULIN SYRINGE (INSULIN SYRINGE-NEEDLE U-100) 30G X 5/16" 0.3 ML, 30G X 5/16" 0.5 ML, 30G X 5/16" 1 ML, 31G X 5/16" 0.3 ML, 31G X 5/16" 0.5 ML, 31G X 5/16" 1 ML	Tier 2	Tier 2	
LITETOUCH PEN NEEDLES (SURE COMFORT PEN NEEDLES) 29G X 12.7MM , 31G X 5 MM	Tier 2	Tier 2	
LITETOUCH PEN NEEDLES (MEIJER PEN NEEDLES) 31G X 6 MM	Tier 2	Tier 2	
LITETOUCH PEN NEEDLES (PEN NEEDLES 5/16") 31G X 8 MM	Tier 2	Tier 2	
LITETOUCH PEN NEEDLES (INSUPEN PEN NEEDLES) 32G X 4 MM	Tier 2	Tier 2	
LONGS INSULIN SYRINGE 31G X 5/16" 0.5 ML		Tier 2	
LUER LOCK SAFETY SYRINGES (SYRINGE) 22G X 1-1/2" 3 ML, 23G X 1" 3 ML, 25G X 5/8" 3 ML	Tier 2	Tier 2	
MAGELLAN INSULIN SAFETY SYR (KROGER INSULIN SYRINGE) 29G X 1/2" 0.3 ML	Tier 2	Tier 2	
MAGELLAN INSULIN SAFETY SYR (INSULIN SYRINGE) 29G X 1/2" 0.5 ML, 29G X 1/2" 1 ML	Tier 2	Tier 2	

Drug Name	Brand Tier	Generic Tier	Formulary Notes
MAGELLAN INSULIN SAFETY SYR (INSULIN SYRINGE-NEEDLE U-100) 30G X 5/16" 0.3 ML, 30G X 5/16" 0.5 ML, 30G X 5/16" 1 ML	Tier 2	Tier 2	
MAGELLAN TUBERCULIN SYRINGE (TUBERCULIN SYRINGE) 27G X 1/2" 1 ML	Tier 2	Tier 2	
MARATHON MEDICAL PENTIPS (PEN NEEDLES 1/2") 29G X 12MM	Tier 2	Tier 2	
MARATHON MEDICAL PENTIPS (SURE COMFORT PEN NEEDLES) 31G X 5 MM	Tier 2	Tier 2	
MARATHON MEDICAL PENTIPS (PEN NEEDLES 5/16") 31G X 8 MM	Tier 2	Tier 2	
MARATHON MEDICAL PENTIPS (INSUPEN PEN NEEDLES) 32G X 4 MM	Tier 2	Tier 2	
MAXICOMFORT II PEN NEEDLE (MEIJER PEN NEEDLES) 31G X 6 MM	Tier 2	Tier 2	
MAXI-COMFORT INSULIN SYRINGE (INSULIN SYRINGE/NEEDLE) 28G X 1/2" 0.5 ML, 28G X 1/2" 1 ML	Tier 2	Tier 2	
MAXI-COMFORT SAFETY PEN NEEDLE 29G X 5MM , 29G X 8MM	Tier 2		
MAXICOMFORT SYR 27G X 1/2" (INSULIN SYRINGE/NEEDLE) 27G X 1/2" 0.5 ML	Tier 2	Tier 2	
MAXICOMFORT SYR 27G X 1/2" (SAFETY INSULIN SYRINGES) 27G X 1/2" 1 ML	Tier 2	Tier 2	
MEDIC INSULIN SYRINGE 30G X 5/16" 0.3 ML, 30G X 5/16" 0.5 ML		Tier 2	
MEDICINE SHOPPE PEN NEEDLES 29G X 12MM , 31G X 6 MM , 31G X 8 MM		Tier 2	
MEIJER PEN NEEDLES 29G X 12MM , 31G X 8 MM		Tier 2	
MICRODOT PEN NEEDLE (MEIJER PEN NEEDLES) 31G X 6 MM	Tier 2	Tier 2	
MICRODOT PEN NEEDLE (INSUPEN PEN NEEDLES) 32G X 4 MM , 33G X 4 MM	Tier 2	Tier 2	
MM INSULIN SYRINGE/NEEDLE 30G X 5/16" 0.3 ML, 30G X 5/16" 0.5 ML, 30G X 5/16" 1 ML, 31G X 5/16" 0.3 ML, 31G X 5/16" 0.5 ML, 31G X 5/16" 1 ML		Tier 2	
MM PEN NEEDLES (SURE COMFORT PEN NEEDLES) 31G X 5 MM	Tier 2	Tier 2	
MM PEN NEEDLES (MEIJER PEN NEEDLES) 31G X 6 MM	Tier 2	Tier 2	

Drug Name	Brand Tier	Generic Tier	Formulary Notes
MM PEN NEEDLES (PEN NEEDLES 5/16") 31G X 8 MM	Tier 2	Tier 2	
MM PEN NEEDLES (INSUPEN PEN NEEDLES) 32G X 4 MM	Tier 2	Tier 2	
MONOJECT INSULIN SYRINGE 25G X 5/8" 1 ML	Tier 2		
MONOJECT INSULIN SYRINGE (SAFETY INSULIN SYRINGES) 27G X 1/2" 1 ML	Tier 2	Tier 2	
MONOJECT INSULIN SYRINGE (INSULIN SYRINGE/NEEDLE) 28G X 1/2" 0.5 ML, 28G X 1/2" 1 ML	Tier 2	Tier 2	
MONOJECT INSULIN SYRINGE (KROGER INSULIN SYRINGE) 29G X 1/2" 0.3 ML	Tier 2	Tier 2	
MONOJECT INSULIN SYRINGE (INSULIN SYRINGE) 29G X 1/2" 0.5 ML, 29G X 1/2" 1 ML	Tier 2	Tier 2	
MONOJECT INSULIN SYRINGE (INSULIN SYRINGE-NEEDLE U-100) 30G X 5/16" 0.3 ML, 30G X 5/16" 0.5 ML, 30G X 5/16" 1 ML, 31G X 5/16" 1 ML	Tier 2	Tier 2	
MONOJECT INSULIN SYRINGE (KMART VALU INSULIN SYRINGE 29G) U-100 1 ML	Tier 2	Tier 2	
MONOJECT MAGELLAN SYRINGE (SYRINGE) 22G X 1-1/2" 3 ML, 23G X 1" 3 ML, 25G X 5/8" 3 ML	Tier 2	Tier 2	
MONOJECT MAGELLAN SYRINGE (SYRINGE LUER SLIP) 25G X 5/8" 1 ML	Tier 2	Tier 2	
MONOJECT SYRINGE (SYRINGE) 22G X 1-1/2" 3 ML, 23G X 1" 3 ML, 25G X 5/8" 3 ML	Tier 2	Tier 2	
MONOJECT SYRINGE (TUBERCULIN SYRINGE) 27G X 1/2" 1 ML	Tier 2	Tier 2	
MONOJECT TB SAFETY SYRINGE (TUBERCULIN SYRINGE) 25G X 5/8" 1 ML	Tier 2	Tier 2	
MONOJECT TB SYRINGE (TUBERCULIN SYRINGE) 25G X 5/8" 1 ML, 27G X 1/2" 1 ML	Tier 2	Tier 2	
MONOJECT ULTRA COMFORT SYRINGE (INSULIN SYRINGE/NEEDLE) 28G X 1/2" 0.5 ML, 28G X 1/2" 1 ML	Tier 2	Tier 2	
MONOJECT ULTRA COMFORT SYRINGE (KROGER INSULIN SYRINGE) 29G X 1/2" 0.3 ML	Tier 2	Tier 2	

Drug Name	Brand Tier	Generic Tier	Formulary Notes
MONOJECT ULTRA COMFORT SYRINGE (INSULIN SYRINGE) 29G X 1/2" 0.5 ML, 29G X 1/2" 1 ML	Tier 2	Tier 2	
MONOJECT ULTRA COMFORT SYRINGE (INSULIN SYRINGE-NEEDLE U-100) 30G X 5/16" 0.3 ML, 30G X 5/16" 0.5 ML, 31G X 5/16" 0.3 ML, 31G X 5/16" 0.5 ML	Tier 2	Tier 2	
MS INSULIN SYRINGE 31G X 5/16" 0.3 ML, 31G X 5/16" 0.5 ML, 31G X 5/16" 1 ML		Tier 2	
NOVOFINE AUTOCOVER PEN NEEDLE (SURE COMFORT PEN NEEDLES) 30G X 8 MM	Tier 2	Tier 2	
NOVOFINE PEN NEEDLE (SURE COMFORT PEN NEEDLES) 32G X 6 MM	Tier 2	Tier 2	
NOVOFINE PLUS PEN NEEDLE (INSUPEN PEN NEEDLES) 32G X 4 MM	Tier 2	Tier 2	
NOVOTWIST PEN NEEDLE (PRO COMFORT PEN NEEDLES) 32G X 5 MM	Tier 2	Tier 2	
PC UNIFINE PENTIPS 29G X 12MM , 31G X 5 MM , 31G X 6 MM , 31G X 8 MM		Tier 2	
PEN NEEDLES 29G X 12MM , 30G X 8 MM , 31G X 5 MM , 31G X 6 MM , 31G X 8 MM , 32G X 4 MM , 32G X 5 MM , 32G X 6 MM , 33G X 4 MM		Tier 2	
PENTIPS (PEN NEEDLES 1/2") 29G X 12MM	Tier 2	Tier 2	
PENTIPS (SURE COMFORT PEN NEEDLES) 31G X 5 MM	Tier 2	Tier 2	
PENTIPS (MEIJER PEN NEEDLES) 31G X 6 MM	Tier 2	Tier 2	
PENTIPS (PEN NEEDLES 5/16") 31G X 8 MM	Tier 2	Tier 2	
PENTIPS (INSUPEN PEN NEEDLES) 32G X 4 MM	Tier 2	Tier 2	
PRECISION SUREDOSE PLUS SYR (KROGER INSULIN SYRINGE) 29G X 1/2" 0.3 ML	Tier 2	Tier 2	
PRECISION SUREDOSE PLUS SYR (INSULIN SYRINGE) 29G X 1/2" 1 ML	Tier 2	Tier 2	
PRECISION SURE-DOSE SYRINGE (INSULIN SYRINGE/NEEDLE) 28G X 1/2" 0.5 ML, 28G X 1/2" 1 ML	Tier 2	Tier 2	
PRECISION SURE-DOSE SYRINGE (INSULIN SYRINGE) 29G X 1/2" 0.5 ML	Tier 2	Tier 2	

Drug Name	Brand Tier	Generic Tier	Formulary Notes
PRECISION SURE-DOSE SYRINGE 30G X 3/8" 0.5 ML	Tier 2		
PRECISION SURE-DOSE SYRINGE (INSULIN SYRINGE-NEEDLE U-100) 30G X 5/16" 0.3 ML	Tier 2	Tier 2	
PREFERRED PLUS INSULIN SYRINGE 28G X 1/2" 0.5 ML, 28G X 1/2" 1 ML, 29G X 1/2" 0.3 ML, 29G X 1/2" 0.5 ML, 29G X 1/2" 1 ML, 30G X 5/16" 0.3 ML, 30G X 5/16" 0.5 ML, 30G X 5/16" 1 ML		Tier 2	
PREFERRED PLUS UNIFINE PENTIPS 29G X 12MM , 31G X 5 MM , 31G X 6 MM , 31G X 8 MM , 32G X 4 MM		Tier 2	
PREVENT DROPSAFE PEN NEEDLES (MEIJER PEN NEEDLES) 31G X 6 MM	Tier 2	Tier 2	
PREVENT DROPSAFE PEN NEEDLES (PEN NEEDLES 5/16") 31G X 8 MM	Tier 2	Tier 2	
PREVENT SAFETY PEN NEEDLES (MEIJER PEN NEEDLES) 31G X 6 MM	Tier 2	Tier 2	
PREVENT SAFETY PEN NEEDLES (PEN NEEDLES 5/16") 31G X 8 MM	Tier 2	Tier 2	
PRO COMFORT INSULIN SYRINGE (SURE COMFORT INSULIN SYRINGE) 30G X 1/2" 0.5 ML	Tier 2	Tier 2	
PRO COMFORT INSULIN SYRINGE (INSULIN SYRINGE) 30G X 1/2" 1 ML	Tier 2	Tier 2	
PRO COMFORT INSULIN SYRINGE (INSULIN SYRINGE-NEEDLE U-100) 30G X 5/16" 0.5 ML, 30G X 5/16" 1 ML, 31G X 5/16" 0.5 ML, 31G X 5/16" 1 ML	Tier 2	Tier 2	
PRO COMFORT PEN NEEDLES 31G X 8 MM , 32G X 4 MM , 32G X 6 MM		Tier 2	
PRODIGY INSULIN SYRINGE (INSULIN SYRINGE/NEEDLE) 28G X 1/2" 1 ML	Tier 2	Tier 2	
PRODIGY INSULIN SYRINGE (INSULIN SYRINGE-NEEDLE U-100) 31G X 5/16" 0.3 ML, 31G X 5/16" 0.5 ML	Tier 2	Tier 2	
PURE COMFORT PEN NEEDLE 32G X 4 MM , 32G X 5 MM , 32G X 6 MM		Tier 2	
PX EXTRA SHORT PEN NEEDLES 31G X 6 MM		Tier 2	
PX INSULIN SYRINGE 30G X 1/2" 0.5 ML		Tier 2	
PX MINI PEN NEEDLES 31G X 5 MM		Tier 2	

Drug Name	Brand Tier	Generic Tier	Formulary Notes
PX PEN NEEDLE 29G X 12MM , 31G X 8 MM		Tier 2	
PX SHORTLENGTH PEN NEEDLES 31G X 8 MM		Tier 2	
QC PEN NEEDLES 29G X 12MM , 31G X 6 MM , 31G X 8 MM		Tier 2	
QC UNIFINE PENTIPS 32G X 4 MM		Tier 2	
RA INSULIN SYRINGE 29G X 1/2" 0.5 ML, 29G X 1/2" 1 ML, 30G X 5/16" 0.5 ML, 30G X 5/16" 1 ML		Tier 2	
RA PEN NEEDLES 31G X 5 MM , 31G X 8 MM		Tier 2	
REALITY INSULIN SYRINGE 28G X 1/2" 0.5 ML, 28G X 1/2" 1 ML, 29G X 1/2" 0.5 ML, 29G X 1/2" 1 ML		Tier 2	
RELION INSULIN SYRINGE (INSULIN SYRINGE) 29G X 1/2" 0.5 ML	Tier 2	Tier 2	
RELION INSULIN SYRINGE (TECHLITE INSULIN SYRINGE) 31G X 15/64" 0.3 ML, 31G X 15/64" 0.5 ML, 31G X 15/64" 1 ML	Tier 2	Tier 2	
RELION INSULIN SYRINGE (INSULIN SYRINGE-NEEDLE U-100) 31G X 5/16" 0.3 ML, 31G X 5/16" 0.5 ML, 31G X 5/16" 1 ML	Tier 2	Tier 2	
RELION MINI PEN NEEDLES (MEIJER PEN NEEDLES) 31G X 6 MM	Tier 2	Tier 2	
RELION PEN NEEDLES (PEN NEEDLES 1/2") 29G X 12MM	Tier 2	Tier 2	
RELION PEN NEEDLES (MEIJER PEN NEEDLES) 31G X 6 MM	Tier 2	Tier 2	
RELION PEN NEEDLES (PEN NEEDLES 5/16") 31G X 8 MM	Tier 2	Tier 2	
RELION PEN NEEDLES (INSUPEN PEN NEEDLES) 32G X 4 MM	Tier 2	Tier 2	
RELION SHORT PEN NEEDLES (PEN NEEDLES 5/16") 31G X 8 MM	Tier 2	Tier 2	
SAFETY INSULIN SYRINGES 29G X 1/2" 0.5 ML, 29G X 1/2" 1 ML, 30G X 1/2" 1 ML, 30G X 5/16" 0.5 ML		Tier 2	
SAFETY SYRINGE/NEEDLE 22G X 1-1/2" 3 ML, 23G X 1" 3 ML, 25G X 5/8" 1 ML, 25G X 5/8" 3 ML		Tier 2	
SB INSULIN SYRINGE 29G X 1/2" 0.5 ML, 29G X 1/2" 1 ML, 30G X 5/16" 0.5 ML, 30G X 5/16" 1 ML, 31G X 5/16" 1 ML		Tier 2	

Drug Name	Brand Tier	Generic Tier	Formulary Notes
SECURES SAFE INSULIN SYRINGE (INSULIN SYRINGE) 29G X 1/2" 0.5 ML, 29G X 1/2" 1 ML	Tier 2	Tier 2	
SECURES SAFE SAFETY PEN NEEDLES (SURE COMFORT PEN NEEDLES) 30G X 8 MM	Tier 2	Tier 2	
SECURES SAFE SYRINGE/NEEDLE (SYRINGE) 22G X 1-1/2" 3 ML, 23G X 1" 3 ML, 25G X 5/8" 3 ML	Tier 2	Tier 2	
SECURES SAFE SYRINGE/NEEDLE 25G X 1-1/2" 1 ML	Tier 2		
SECURES SAFE SYRINGE/NEEDLE (SYRINGE LUER SLIP) 25G X 5/8" 1 ML	Tier 2	Tier 2	
SECURES SAFE TUBERCULIN SYRINGE (TUBERCULIN SYRINGE) 25G X 5/8" 1 ML, 27G X 1/2" 1 ML	Tier 2	Tier 2	
SHOPKO UNIFINE PENTIPS (PEN NEEDLES 1/2") 29G X 12MM	Tier 2	Tier 2	
SHOPKO UNIFINE PENTIPS (SURE COMFORT PEN NEEDLES) 31G X 5 MM	Tier 2	Tier 2	
SHOPKO UNIFINE PENTIPS (PEN NEEDLES 5/16") 31G X 8 MM	Tier 2	Tier 2	
SHOPKO UNIFINE PENTIPS (INSUPEN PEN NEEDLES) 32G X 4 MM	Tier 2	Tier 2	
SHOPKO UNIFINE PENTIPS PLUS (PEN NEEDLES 1/2") 29G X 12MM	Tier 2	Tier 2	
SHOPKO UNIFINE PENTIPS PLUS (SURE COMFORT PEN NEEDLES) 31G X 5 MM	Tier 2	Tier 2	
SHOPKO UNIFINE PENTIPS PLUS (PEN NEEDLES 5/16") 31G X 8 MM	Tier 2	Tier 2	
SHOPKO UNIFINE PENTIPS PLUS (INSUPEN PEN NEEDLES) 32G X 4 MM	Tier 2	Tier 2	
SURE COMFORT INSULIN SYRINGE 28G X 1/2" 0.5 ML, 28G X 1/2" 1 ML, 29G X 1/2" 0.3 ML, 29G X 1/2" 0.5 ML, 29G X 1/2" 1 ML, 30G X 1/2" 1 ML, 30G X 5/16" 0.3 ML, 30G X 5/16" 0.5 ML, 30G X 5/16" 1 ML, 31G X 1/4" 0.3 ML, 31G X 1/4" 0.5 ML, 31G X 1/4" 1 ML, 31G X 5/16" 0.3 ML, 31G X 5/16" 0.5 ML, 31G X 5/16" 1 ML		Tier 2	
SURE COMFORT PEN NEEDLES 31G X 8 MM , 32G X 4 MM		Tier 2	

Drug Name	Brand Tier	Generic Tier	Formulary Notes
SURE-FINE PEN NEEDLES (SURE COMFORT PEN NEEDLES) 29G X 12.7MM , 31G X 5 MM	Tier 2	Tier 2	
SURE-FINE PEN NEEDLES (PEN NEEDLES 5/16") 31G X 8 MM	Tier 2	Tier 2	
SURE-JECT INSULIN SYRINGE (INSULIN SYRINGE/NEEDLE) 28G X 1/2" 0.5 ML, 28G X 1/2" 1 ML	Tier 2	Tier 2	
SURE-JECT INSULIN SYRINGE (KROGER INSULIN SYRINGE) 29G X 1/2" 0.3 ML	Tier 2	Tier 2	
SURE-JECT INSULIN SYRINGE (INSULIN SYRINGE) 29G X 1/2" 0.5 ML, 29G X 1/2" 1 ML	Tier 2	Tier 2	
SURE-JECT INSULIN SYRINGE (INSULIN SYRINGE-NEEDLE U-100) 30G X 5/16" 0.3 ML, 30G X 5/16" 0.5 ML, 30G X 5/16" 1 ML, 31G X 5/16" 0.3 ML, 31G X 5/16" 0.5 ML, 31G X 5/16" 1 ML	Tier 2	Tier 2	
SYRINGE LUER LOCK 22G X 1-1/2" 3 ML, 23G X 1" 3 ML, 25G X 5/8" 3 ML		Tier 2	
TECHLITE INSULIN SYRINGE 29G X 1/2" 0.3 ML, 29G X 1/2" 0.5 ML, 29G X 1/2" 1 ML, 30G X 1/2" 0.5 ML, 30G X 1/2" 1 ML, 30G X 5/16" 0.3 ML, 30G X 5/16" 0.5 ML, 31G X 5/16" 0.3 ML, 31G X 5/16" 0.5 ML, 31G X 5/16" 1 ML		Tier 2	
TECHLITE PEN NEEDLES 29G X 10MM	Tier 2		
TECHLITE PEN NEEDLES (PEN NEEDLES 1/2") 29G X 12MM	Tier 2	Tier 2	
TECHLITE PEN NEEDLES (SURE COMFORT PEN NEEDLES) 31G X 5 MM , 32G X 6 MM	Tier 2	Tier 2	
TECHLITE PEN NEEDLES (MEIJER PEN NEEDLES) 31G X 6 MM	Tier 2	Tier 2	
TECHLITE PEN NEEDLES (PEN NEEDLES 5/16") 31G X 8 MM	Tier 2	Tier 2	
TECHLITE PEN NEEDLES (INSUPEN PEN NEEDLES) 32G X 4 MM	Tier 2	Tier 2	
TECHLITE PEN NEEDLES (PURE COMFORT PEN NEEDLE) 32G X 8 MM	Tier 2	Tier 2	
TODAYS HEALTH MINI PEN NEEDLES 31G X 6 MM		Tier 2	
TODAYS HEALTH PEN NEEDLES 29G X 12MM		Tier 2	

Drug Name	Brand Tier	Generic Tier	Formulary Notes
TODAYS HEALTH SHORT PEN NEEDLE 31G X 8 MM		Tier 2	
TOPCARE CLICKFINE PEN NEEDLES 31G X 6 MM , 31G X 8 MM		Tier 2	
TOPCARE ULTRA COMFORT INS SYR 29G X 1/2" 0.3 ML, 29G X 1/2" 0.5 ML, 29G X 1/2" 1 ML, 30G X 5/16" 0.3 ML, 30G X 5/16" 0.5 ML, 30G X 5/16" 1 ML, 31G X 5/16" 0.3 ML, 31G X 5/16" 0.5 ML, 31G X 5/16" 1 ML		Tier 2	
TRUE COMFORT INSULIN SYRINGE 31G X 5/16" 0.5 ML, 31G X 5/16" 1 ML		Tier 2	
TRUE COMFORT PEN NEEDLES 31G X 5 MM , 31G X 6 MM , 32G X 4 MM		Tier 2	
TRUE COMFORT PRO INSULIN SYR 30G X 1/2" 0.5 ML, 30G X 1/2" 1 ML, 30G X 5/16" 0.5 ML, 30G X 5/16" 1 ML, 31G X 5/16" 0.5 ML, 31G X 5/16" 1 ML, 32G X 5/16" 0.5 ML, 32G X 5/16" 1 ML		Tier 2	
TRUE COMFORT PRO PEN NEEDLES 31G X 5 MM , 31G X 6 MM , 31G X 8 MM , 32G X 4 MM , 32G X 5 MM , 32G X 6 MM , 33G X 4 MM , 33G X 5 MM , 33G X 6 MM		Tier 2	
TRUEPLUS 5-BEVEL PEN NEEDLES (SURE COMFORT PEN NEEDLES) 29G X 12.7MM , 31G X 5 MM	Tier 2	Tier 2	
TRUEPLUS 5-BEVEL PEN NEEDLES (MEIJER PEN NEEDLES) 31G X 6 MM	Tier 2	Tier 2	
TRUEPLUS 5-BEVEL PEN NEEDLES (PEN NEEDLES 5/16") 31G X 8 MM	Tier 2	Tier 2	
TRUEPLUS 5-BEVEL PEN NEEDLES (INSUPEN PEN NEEDLES) 32G X 4 MM	Tier 2	Tier 2	
TRUEPLUS INSULIN SYRINGE (INSULIN SYRINGE/NEEDLE) 28G X 1/2" 0.5 ML, 28G X 1/2" 1 ML	Tier 2	Tier 2	
TRUEPLUS INSULIN SYRINGE (KROGER INSULIN SYRINGE) 29G X 1/2" 0.3 ML	Tier 2	Tier 2	
TRUEPLUS INSULIN SYRINGE (INSULIN SYRINGE) 29G X 1/2" 0.5 ML, 29G X 1/2" 1 ML	Tier 2	Tier 2	
TRUEPLUS INSULIN SYRINGE (INSULIN SYRINGE-NEEDLE U-100) 30G X 5/16" 0.3 ML, 30G X 5/16" 0.5 ML, 30G X 5/16" 1 ML, 31G X 5/16" 0.3 ML, 31G X 5/16" 0.5 ML, 31G X 5/16" 1 ML	Tier 2	Tier 2	

Drug Name	Brand Tier	Generic Tier	Formulary Notes
TRUEPLUS PEN NEEDLES (MEIJER PEN NEEDLES) 31G X 6 MM	Tier 2	Tier 2	
TRUEPLUS PEN NEEDLES (INSUPEN PEN NEEDLES) 32G X 4 MM	Tier 2	Tier 2	
ULTICARE INSULIN SAFETY SYR (INSULIN SYRINGE) 29G X 1/2" 0.5 ML, 29G X 1/2" 1 ML	Tier 2	Tier 2	
ULTICARE INSULIN SYRINGE (INSULIN SYRINGE/NEEDLE) 28G X 1/2" 0.5 ML, 28G X 1/2" 1 ML	Tier 2	Tier 2	
ULTICARE INSULIN SYRINGE (KROGER INSULIN SYRINGE) 29G X 1/2" 0.3 ML	Tier 2	Tier 2	
ULTICARE INSULIN SYRINGE (INSULIN SYRINGE) 29G X 1/2" 0.5 ML, 29G X 1/2" 1 ML, 30G X 1/2" 1 ML	Tier 2	Tier 2	
ULTICARE INSULIN SYRINGE (SURE COMFORT INSULIN SYRINGE) 30G X 1/2" 0.3 ML, 30G X 1/2" 0.5 ML	Tier 2	Tier 2	
ULTICARE INSULIN SYRINGE (INSULIN SYRINGE-NEEDLE U-100) 30G X 5/16" 0.3 ML, 30G X 5/16" 0.5 ML, 30G X 5/16" 1 ML, 31G X 1/4" 0.3 ML, 31G X 1/4" 0.5 ML, 31G X 1/4" 1 ML, 31G X 5/16" 0.3 ML, 31G X 5/16" 0.5 ML, 31G X 5/16" 1 ML	Tier 2	Tier 2	
ULTICARE MICRO PEN NEEDLES (MEIJER PEN NEEDLES) 31G X 6 MM	Tier 2	Tier 2	
ULTICARE MICRO PEN NEEDLES (PEN NEEDLES 5/16") 31G X 8 MM	Tier 2	Tier 2	
ULTICARE MICRO PEN NEEDLES (INSUPEN PEN NEEDLES) 32G X 4 MM	Tier 2	Tier 2	
ULTICARE MINI PEN NEEDLES (PEN NEEDLES) 30G X 5 MM	Tier 2	Tier 2	
ULTICARE MINI PEN NEEDLES (MEIJER PEN NEEDLES) 31G X 6 MM	Tier 2	Tier 2	
ULTICARE MINI PEN NEEDLES (SURE COMFORT PEN NEEDLES) 32G X 6 MM	Tier 2	Tier 2	
ULTICARE PEN NEEDLES (SURE COMFORT PEN NEEDLES) 29G X 12.7MM , 31G X 5 MM	Tier 2	Tier 2	
ULTICARE SHORT PEN NEEDLES (SURE COMFORT PEN NEEDLES) 30G X 8 MM	Tier 2	Tier 2	
ULTICARE SHORT PEN NEEDLES (PEN NEEDLES 5/16") 31G X 8 MM	Tier 2	Tier 2	

Drug Name	Brand Tier	Generic Tier	Formulary Notes
ULTICARE SYRINGE (SYRINGE) 22G X 1-1/2" 3 ML	Tier 2	Tier 2	
ULTICARE TUBERCULIN SAFETY SYR (TUBERCULIN SYRINGE) 25G X 5/8" 1 ML	Tier 2	Tier 2	
ULTIGUARD SAFEPACK PEN NEEDLE 29G X 12.7MM , 31G X 5 MM , 31G X 6 MM , 31G X 8 MM , 32G X 4 MM , 32G X 6 MM		Tier 2	
ULTIGUARD SAFEPACK SYR/NEEDLE (SURE COMFORT INSULIN SYRINGE) 30G X 1/2" 0.3 ML, 30G X 1/2" 0.5 ML	Tier 2	Tier 2	
ULTIGUARD SAFEPACK SYR/NEEDLE (INSULIN SYRINGE) 30G X 1/2" 1 ML	Tier 2	Tier 2	
ULTIGUARD SAFEPACK SYR/NEEDLE (INSULIN SYRINGE-NEEDLE U-100) 31G X 5/16" 0.3 ML, 31G X 5/16" 0.5 ML, 31G X 5/16" 1 ML	Tier 2	Tier 2	
ULTILET PEN NEEDLE (SURE COMFORT PEN NEEDLES) 29G X 12.7MM , 31G X 5 MM	Tier 2	Tier 2	
ULTILET PEN NEEDLE (PEN NEEDLES 5/16") 31G X 8 MM	Tier 2	Tier 2	
ULTILET PEN NEEDLE (INSUPEN PEN NEEDLES) 32G X 4 MM	Tier 2	Tier 2	
ULTRA COMFORT INSULIN SYRINGE 30G X 5/16" 0.3 ML		Tier 2	
ULTRA FLO INSULIN PEN NEEDLES (PEN NEEDLES 1/2") 29G X 12MM	Tier 2	Tier 2	
ULTRA FLO INSULIN PEN NEEDLES (SURE COMFORT PEN NEEDLES) 31G X 5 MM	Tier 2	Tier 2	
ULTRA FLO INSULIN PEN NEEDLES (PEN NEEDLES 5/16") 31G X 8 MM	Tier 2	Tier 2	
ULTRA FLO INSULIN PEN NEEDLES (INSUPEN PEN NEEDLES) 32G X 4 MM , 33G X 4 MM	Tier 2	Tier 2	
ULTRA FLO INSULIN SYR 1/2 UNIT (SURE COMFORT INSULIN SYRINGE) 30G X 1/2" 0.3 ML	Tier 2	Tier 2	
ULTRA FLO INSULIN SYR 1/2 UNIT (INSULIN SYRINGE-NEEDLE U-100) 30G X 5/16" 0.3 ML, 31G X 5/16" 0.3 ML	Tier 2	Tier 2	
ULTRA FLO INSULIN SYRINGE (KROGER INSULIN SYRINGE) 29G X 1/2" 0.3 ML	Tier 2	Tier 2	

Drug Name	Brand Tier	Generic Tier	Formulary Notes
ULTRA FLO INSULIN SYRINGE (INSULIN SYRINGE) 29G X 1/2" 0.5 ML, 29G X 1/2" 1 ML, 30G X 1/2" 1 ML	Tier 2	Tier 2	
ULTRA FLO INSULIN SYRINGE (SURE COMFORT INSULIN SYRINGE) 30G X 1/2" 0.3 ML, 30G X 1/2" 0.5 ML	Tier 2	Tier 2	
ULTRA FLO INSULIN SYRINGE (INSULIN SYRINGE-NEEDLE U-100) 30G X 5/16" 0.3 ML, 30G X 5/16" 0.5 ML, 30G X 5/16" 1 ML, 31G X 5/16" 0.3 ML, 31G X 5/16" 0.5 ML, 31G X 5/16" 1 ML	Tier 2	Tier 2	
ULTRA THIN PEN NEEDLES (INSUPEN PEN NEEDLES) 32G X 4 MM	Tier 2	Tier 2	
ULTRACARE INSULIN SYRINGE 30G X 1/2" 0.5 ML, 30G X 1/2" 1 ML, 30G X 5/16" 0.3 ML, 30G X 5/16" 0.5 ML, 30G X 5/16" 1 ML, 31G X 5/16" 0.3 ML, 31G X 5/16" 0.5 ML, 31G X 5/16" 1 ML		Tier 2	
ULTRACARE PEN NEEDLES 31G X 5 MM , 31G X 6 MM , 31G X 8 MM , 32G X 4 MM , 32G X 5 MM , 32G X 6 MM , 33G X 4 MM		Tier 2	
ULTRA-THIN II INS SYR SHORT (INSULIN SYRINGE-NEEDLE U-100) 30G X 5/16" 0.3 ML, 30G X 5/16" 0.5 ML, 30G X 5/16" 1 ML, 31G X 5/16" 0.3 ML, 31G X 5/16" 0.5 ML, 31G X 5/16" 1 ML	Tier 2	Tier 2	
ULTRA-THIN II INSULIN SYRINGE (INSULIN SYRINGE) 29G X 1/2" 0.5 ML, 29G X 1/2" 1 ML	Tier 2	Tier 2	
ULTRA-THIN II MINI PEN NEEDLE (SURE COMFORT PEN NEEDLES) 31G X 5 MM	Tier 2	Tier 2	
ULTRA-THIN II PEN NEEDLE SHORT (PEN NEEDLES 5/16") 31G X 8 MM	Tier 2	Tier 2	
ULTRA-THIN II PEN NEEDLES (SURE COMFORT PEN NEEDLES) 29G X 12.7MM	Tier 2	Tier 2	
UNIFINE PEN NEEDLES (INSUPEN PEN NEEDLES) 32G X 4 MM	Tier 2	Tier 2	
UNIFINE PENTIPS (PEN NEEDLES 1/2") 29G X 12MM	Tier 2	Tier 2	
UNIFINE PENTIPS (PEN NEEDLES) 30G X 5 MM	Tier 2	Tier 2	
UNIFINE PENTIPS (SURE COMFORT PEN NEEDLES) 31G X 5 MM , 32G X 6 MM	Tier 2	Tier 2	

Drug Name	Brand Tier	Generic Tier	Formulary Notes
UNIFINE PENTIPS (MEIJER PEN NEEDLES) 31G X 6 MM	Tier 2	Tier 2	
UNIFINE PENTIPS (PEN NEEDLES 5/16") 31G X 8 MM	Tier 2	Tier 2	
UNIFINE PENTIPS (INSUPEN PEN NEEDLES) 32G X 4 MM , 33G X 4 MM	Tier 2	Tier 2	
UNIFINE PENTIPS PLUS (PEN NEEDLES 1/2") 29G X 12MM	Tier 2	Tier 2	
UNIFINE PENTIPS PLUS (PEN NEEDLES) 30G X 5 MM	Tier 2	Tier 2	
UNIFINE PENTIPS PLUS (SURE COMFORT PEN NEEDLES) 31G X 5 MM	Tier 2	Tier 2	
UNIFINE PENTIPS PLUS (MEIJER PEN NEEDLES) 31G X 6 MM	Tier 2	Tier 2	
UNIFINE PENTIPS PLUS (PEN NEEDLES 5/16") 31G X 8 MM	Tier 2	Tier 2	
UNIFINE PENTIPS PLUS (INSUPEN PEN NEEDLES) 32G X 4 MM , 33G X 4 MM	Tier 2	Tier 2	
UNIFINE SAFECONTROL PEN NEEDLE (PEN NEEDLES) 30G X 5 MM	Tier 2	Tier 2	
UNIFINE SAFECONTROL PEN NEEDLE (SURE COMFORT PEN NEEDLES) 30G X 8 MM	Tier 2	Tier 2	
UNIFINE ULTRA PEN NEEDLE (SURE COMFORT PEN NEEDLES) 31G X 5 MM	Tier 2	Tier 2	
UNIFINE ULTRA PEN NEEDLE (MEIJER PEN NEEDLES) 31G X 6 MM	Tier 2	Tier 2	
UNIFINE ULTRA PEN NEEDLE (PEN NEEDLES 5/16") 31G X 8 MM	Tier 2	Tier 2	
UNIFINE ULTRA PEN NEEDLE (INSUPEN PEN NEEDLES) 32G X 4 MM	Tier 2	Tier 2	
VALUE HEALTH INSULIN SYRINGE 29G X 1/2" 0.5 ML, 29G X 1/2" 1 ML		Tier 2	
VALUMARK PEN NEEDLES 29G X 12MM , 31G X 6 MM , 31G X 8 MM		Tier 2	
VANISHPOINT INSULIN SYRINGE (INSULIN SYRINGE) 29G X 1/2" 1 ML	Tier 2	Tier 2	
VANISHPOINT INSULIN SYRINGE 29G X 5/16" 1 ML, 30G X 3/16" 0.5 ML, 30G X 3/16" 1 ML	Tier 2		
VANISHPOINT INSULIN SYRINGE (SURE COMFORT INSULIN SYRINGE) 30G X 1/2" 0.5 ML	Tier 2	Tier 2	

Drug Name	Brand Tier	Generic Tier	Formulary Notes
VANISHPOINT INSULIN SYRINGE (INSULIN SYRINGE-NEEDLE U-100) 30G X 5/16" 0.5 ML, 30G X 5/16" 1 ML	Tier 2	Tier 2	
VANISHPOINT SAFETY SYRINGE (SYRINGE) 22G X 1-1/2" 3 ML, 23G X 1" 3 ML, 25G X 5/8" 3 ML	Tier 2	Tier 2	
VANISHPOINT SYRINGE (SYRINGE) 22G X 1-1/2" 3 ML, 23G X 1" 3 ML, 25G X 5/8" 3 ML	Tier 2	Tier 2	
VANISHPOINT TUBERCULIN SYRINGE (TUBERCULIN SYRINGE) 25G X 5/8" 1 ML, 27G X 1/2" 1 ML	Tier 2	Tier 2	
VIDA MIA UNIFINE PENTIPS (PEN NEEDLES 1/2") 29G X 12MM	Tier 2	Tier 2	
VIDA MIA UNIFINE PENTIPS (MEIJER PEN NEEDLES) 31G X 6 MM	Tier 2	Tier 2	
VIDA MIA UNIFINE PENTIPS (PEN NEEDLES 5/16") 31G X 8 MM	Tier 2	Tier 2	
VIDA MIA UNIFINE PENTIPS (INSUPEN PEN NEEDLES) 32G X 4 MM	Tier 2	Tier 2	
VP INSULIN SYRINGE 29G X 1/2" 0.3 ML		Tier 2	
WEGMANS UNIFINE PENTIPS PLUS 31G X 5 MM , 31G X 6 MM , 31G X 8 MM , 32G X 4 MM		Tier 2	
ZEV RX INSULIN SYRINGE 30G X 1/2" 0.5 ML, 30G X 1/2" 1 ML, 30G X 5/16" 0.5 ML, 30G X 5/16" 1 ML		Tier 2	
ZEV RX PEN NEEDLES 31G X 5 MM , 31G X 6 MM , 31G X 8 MM , 32G X 4 MM		Tier 2	
*Spacer/Aerosol-Holding Chambers & Supplies***			
AEROCHAMBER MINI CHAMBER DEVICE	Tier 4		
AEROCHAMBER MV	Tier 4		
AEROCHAMBER PLUS FLO-VU	Tier 4		
AEROCHAMBER PLUS FLO-VU LARGE	Tier 4		
AEROCHAMBER PLUS FLO-VU MEDIUM	Tier 4		
AEROCHAMBER PLUS FLO-VU SMALL	Tier 4		
AEROCHAMBER PLUS FLO-VU W/MASK	Tier 4		
AEROCHAMBER PLUS FLOW VU	Tier 4		
AEROCHAMBER W/FLOWSIGNAL	Tier 4		
AEROCHAMBER Z-STAT PLUS	Tier 4		

Drug Name	Brand Tier	Generic Tier	Formulary Notes
AEROCHAMBER Z-STAT PLUS CHAMBR	Tier 4		
AEROCHAMBER Z-STAT PLUS/LARGE	Tier 4		
AEROCHAMBER Z-STAT PLUS/MEDIUM	Tier 4		
AEROCHAMBER Z-STAT PLUS/SMALL	Tier 4		
EASIVENT	Tier 4		
EASIVENT MASK LARGE	Tier 4		
EASIVENT MASK MEDIUM	Tier 4		
EASIVENT MASK SMALL	Tier 4		
Migraine Products			
*Cgrp Receptor Antagonists - Monocolonal Antibodies***			
AIMOVIG SUBCUTANEOUS SOLUTION AUTO-INJECTOR 70 MG/ML	Tier 5		PA
*Ergot Combinations***			
MIGERGOT RECTAL SUPPOSITORY 2-100 MG	Tier 4		
*Migraine Products***			
DIHYDROERGOTAMINE MESYLATE NASAL SOLUTION 4 MG/ML		Tier 3	QL (12 ML per 30 days)
*Selective Serotonin Agonists 5-Ht(1)***			
ALMOTRIPTAN MALATE ORAL TABLET 12.5 MG, 6.25 MG		Tier 3	QL (12 EA per 30 days)
ELETRIPTAN HYDROBROMIDE ORAL TABLET 20 MG, 40 MG		Tier 3	QL (12 EA per 30 days)
NARATRIPTAN HCL ORAL TABLET 1 MG, 2.5 MG		Tier 3	QL (12 EA per 30 days)
RIZATRIPTAN BENZOATE ORAL TABLET 10 MG, 5 MG		Tier 3	QL (12 EA per 30 days)
RIZATRIPTAN BENZOATE ORAL TABLET DISPERSIBLE 10 MG, 5 MG		Tier 3	QL (12 EA per 30 days)
SUMATRIPTAN NASAL SOLUTION 20 MG/ACT, 5 MG/ACT		Tier 3	
SUMATRIPTAN SUCCINATE ORAL TABLET 100 MG, 25 MG, 50 MG		Tier 3	QL (12 EA per 30 days)
SUMATRIPTAN SUCCINATE REFILL SOLUTION CARTRIDGE 4 MG/0.5ML SUBCUTANEOUS 4 MG/0.5ML		Tier 3	QL (12 ML per 30 days)

Drug Name	Brand Tier	Generic Tier	Formulary Notes
SUMATRIPTAN SUCCINATE REFILL SOLUTION CARTRIDGE 6 MG/0.5ML SUBCUTANEOUS 6 MG/0.5ML		Tier 3	QL (8 ML per 30 days)
SUMATRIPTAN SUCCINATE SOLUTION AUTO-INJECTOR 4 MG/0.5ML SUBCUTANEOUS 4 MG/0.5ML		Tier 3	QL (12 ML per 30 days)
SUMATRIPTAN SUCCINATE SOLUTION AUTO-INJECTOR 6 MG/0.5ML SUBCUTANEOUS 6 MG/0.5ML		Tier 3	QL (8 ML per 30 days)
SUMATRIPTAN SUCCINATE SUBCUTANEOUS SOLUTION 6 MG/0.5ML		Tier 3	QL (8 ML per 30 days)
ZOLMITRIPTAN ORAL TABLET 2.5 MG, 5 MG		Tier 3	QL (12 EA per 30 days)
ZOLMITRIPTAN ORAL TABLET DISPERSIBLE 2.5 MG, 5 MG		Tier 3	QL (12 EA per 30 days)
ZOMIG NASAL SOLUTION (ZOLMITRIPTAN) 5 MG	Tier 4	Tier 3	
Minerals & Electrolytes			
*Electrolytes Parenteral***			
KCL-LIDOCAINE-NACL INTRAVENOUS SOLUTION 10-10 MEQ-MG /100ML		Tier 3	
*Fluoride***			
NAFRINSE DROPS ORAL SOLUTION (FLUORITAB) 0.275 (0.125 F) MG/DROP	Tier 1	Tier 1	
NAFRINSE ORAL TABLET CHEWABLE (SODIUM FLUORIDE) 2.2 (1 F) MG	Tier 1	Tier 1	
SODIUM FLUORIDE ORAL SOLUTION 0.5 MG/ML, 1.1 (0.5 F) MG/ML		Tier 1	
SODIUM FLUORIDE ORAL TABLET CHEWABLE 0.55 (0.25 F) MG, 1.1 (0.5 F) MG		Tier 1	
*Phosphate***			
PHOSPHOROUS ORAL TABLET 155-852-130 MG		Tier 3	
PHOSPHO-TRIN 250 NEUTRAL ORAL TABLET (VIRT-PHOS 250 NEUTRAL) 155-852-130 MG	Tier 3	Tier 3	
POTASSIUM PHOSPHATES(71 MEQ K) INTRAVENOUS SOLUTION 45 MMOLE/15ML		Tier 3	

Drug Name	Brand Tier	Generic Tier	Formulary Notes
*Potassium***			
KLOR-CON 10 ORAL TABLET EXTENDED RELEASE (POTASSIUM CHLORIDE ER) 10 MEQ	Tier 3	Tier 3	
KLOR-CON M10 ORAL TABLET EXTENDED RELEASE (POTASSIUM CHLORIDE CRYST ER) 10 MEQ	Tier 3	Tier 3	
KLOR-CON M15 ORAL TABLET EXTENDED RELEASE (POTASSIUM CHLORIDE CRYST ER) 15 MEQ	Tier 3	Tier 3	
KLOR-CON M20 ORAL TABLET EXTENDED RELEASE (POTASSIUM CHLORIDE CRYST ER) 20 MEQ	Tier 3	Tier 3	
KLOR-CON ORAL PACKET (POTASSIUM CHLORIDE) 20 MEQ	Tier 3	Tier 3	
KLOR-CON ORAL TABLET EXTENDED RELEASE (POTASSIUM CHLORIDE ER) 8 MEQ	Tier 3	Tier 3	
KLOR-CON/EF ORAL TABLET EFFERVESCENT 25 MEQ	Tier 3		
K-PRIME ORAL TABLET EFFERVESCENT 25 MEQ	Tier 3		
POTASSIUM CHLORIDE ER ORAL CAPSULE EXTENDED RELEASE 10 MEQ		Tier 3	
POTASSIUM CHLORIDE ER ORAL TABLET EXTENDED RELEASE 20 MEQ		Tier 3	
POTASSIUM CHLORIDE ORAL SOLUTION 10 %, 20 MEQ/15ML (10%), 40 MEQ/15ML (20%)		Tier 3	
Miscellaneous Therapeutic Classes			
*Cyclosporine Analogs***			
CYCLOSPORINE INTRAVENOUS SOLUTION 50 MG/ML		Tier 3	
CYCLOSPORINE MODIFIED ORAL CAPSULE 50 MG		Tier 3	
CYCLOSPORINE ORAL CAPSULE 100 MG, 25 MG		Tier 3	
GENGRAF ORAL CAPSULE (CYCLOSPORINE MODIFIED) 100 MG, 25 MG	Tier 3	Tier 3	
GENGRAF ORAL SOLUTION (CYCLOSPORINE MODIFIED) 100 MG/ML	Tier 3	Tier 3	

Drug Name	Brand Tier	Generic Tier	Formulary Notes
SANDIMMUNE ORAL SOLUTION 100 MG/ML	Tier 4		
*Homeopathic Products***			
HYLAFEM VAGINAL SUPPOSITORY	Tier 5		
*Immune Globulin Immunosuppressants***			
ATGAM INTRAVENOUS INJECTABLE 50 MG/ML	Tier 4		
*Inosine Monophosphate Dehydrogenase Inhibitors***			
MYCOPHENOLATE MOFETIL HCL INTRAVENOUS SOLUTION RECONSTITUTED 500 MG		Tier 3	
MYCOPHENOLATE MOFETIL INTRAVENOUS SOLUTION RECONSTITUTED 500 MG		Tier 3	
MYCOPHENOLATE MOFETIL ORAL CAPSULE 250 MG		Tier 3	
MYCOPHENOLATE MOFETIL ORAL SUSPENSION RECONSTITUTED 200 MG/ML		Tier 3	
MYCOPHENOLATE MOFETIL ORAL TABLET 500 MG		Tier 3	
*Macrolide Immunosuppressants***			
EVEROLIMUS ORAL TABLET 0.25 MG, 0.5 MG, 0.75 MG		Tier 3	
SIROLIMUS ORAL SOLUTION 1 MG/ML		Tier 3	
SIROLIMUS ORAL TABLET 0.5 MG, 1 MG, 2 MG		Tier 3	
TACROLIMUS ORAL CAPSULE 0.5 MG, 1 MG, 5 MG		Tier 3	
*Monoclonal Antibodies***			
SIMULECT INTRAVENOUS SOLUTION RECONSTITUTED 10 MG, 20 MG	Tier 4		
*Potassium Removing Agents***			
VELTASSA ORAL PACKET 16.8 GM, 25.2 GM, 8.4 GM	Tier 5		
*Purine Analogs***			
AZASAN ORAL TABLET (AZATHIOPRINE) 100 MG, 75 MG	Tier 4	Tier 3	
AZATHIOPRINE ORAL TABLET 50 MG		Tier 3	

Drug Name	Brand Tier	Generic Tier	Formulary Notes
Mouth/Throat/Dental Agents			
*Anesthetics Topical Oral***			
LIDOCAINE VISCOUS HCL MOUTH/THROAT SOLUTION 2 %		Tier 3	
*Anti-Infectives - Throat***			
CLOTRIMAZOLE MOUTH/THROAT TROCHE 10 MG		Tier 3	
NYSTATIN MOUTH/THROAT SUSPENSION 100000 UNIT/ML		Tier 3	
*Antiseptics - Mouth/Throat***			
PERIOGARD MOUTH/THROAT SOLUTION (CHLORHEXIDINE GLUCONATE) 0.12 %	Tier 3	Tier 3	
*Fluoride Dental Products***			
DENTA 5000 PLUS DENTAL CREAM (SODIUM FLUORIDE) 1.1 %	Tier 1	Tier 1	
PREVIDENT 5000 PLUS DENTAL CREAM (SODIUM FLUORIDE) 1.1 %	Tier 1	Tier 1	
SF 5000 PLUS DENTAL CREAM 1.1 %		Tier 1	
SODIUM FLUORIDE 5000 PLUS DENTAL CREAM 1.1 %		Tier 1	
SODIUM FLUORIDE 5000 PPM DENTAL CREAM 1.1 %		Tier 1	
*Saliva Stimulants***			
CEVIMELINE HCL ORAL CAPSULE 30 MG		Tier 3	
PILOCARPINE HCL ORAL TABLET 5 MG, 7.5 MG		Tier 3	
*Steroids - Mouth/Throat/Dental***			
ORALONE MOUTH/THROAT PASTE (TRIAMCINOLONE ACETONIDE) 0.1 %	Tier 3	Tier 3	
Multivitamins			
*Multiple Vitamins W/ Minerals & Folic Acid***			
UDAMIN SP ORAL TABLET (THRIVITE 19) 1 MG	Tier 2	Tier 2	
*Multivitamins***			
DAILY MULTIPLE VITAMINS ORAL TABLET		Tier 2	
DAILY VALUE MULTIVITAMIN ORAL TABLET		Tier 2	

Drug Name	Brand Tier	Generic Tier	Formulary Notes
DAILY VITAMIN FORMULA ORAL TABLET		Tier 2	
DAILY VITAMIN ORAL TABLET		Tier 2	
DAILY VITAMINS ORAL TABLET		Tier 2	
DAILY VITE ORAL TABLET		Tier 2	
DAILY VITES ORAL TABLET		Tier 2	
DAILY-VITAMIN ORAL TABLET		Tier 2	
DAILY-VITE MULTIVITAMIN ORAL TABLET		Tier 2	
DAILY-VITE ORAL TABLET		Tier 2	
ESTROFACTORS ORAL TABLET (ANTI-OXIDANT)	Tier 2	Tier 2	
GNP ESSENTIAL ONE DAILY ORAL TABLET		Tier 2	
HEALTHY HAIR/SKIN/NAILS ORAL TABLET		Tier 2	
HIGH POTENCY MULTIVITAMIN ORAL TABLET		Tier 2	
MULTI VITAMIN DAILY ORAL TABLET		Tier 2	
MULTI VITAMIN ORAL TABLET		Tier 2	
MULTI VITAMIN W/D-3 ORAL TABLET		Tier 2	
MULTI-DAY ORAL TABLET		Tier 2	
MULTIPLE VITAMIN-FOLIC ACID ORAL TABLET		Tier 2	
MULTIPLE VITAMINS ESSENTIAL ORAL TABLET		Tier 2	
MULTIPLE VITAMINS ORAL TABLET		Tier 2	
MULTIVITAMIN ADULT ORAL TABLET		Tier 2	
MULTI-VITAMIN DAILY ORAL TABLET		Tier 2	
MULTIVITAMIN IRON-FREE ORAL TABLET		Tier 2	
MULTIVITAMIN ORAL TABLET		Tier 2	
MULTI-VITAMIN ORAL TABLET		Tier 2	
NEOMULTIVITE ORAL TABLET (ANTI-OXIDANT)	Tier 2	Tier 2	
OMNICAP ORAL TABLET		Tier 2	
ONCE DAILY ORAL TABLET		Tier 2	
ONE DAILY ESSENTIAL ORAL TABLET (ANTI-OXIDANT)	Tier 2	Tier 2	
ONE DAILY MULTIVITAMIN ADULT ORAL TABLET		Tier 2	
ONE DAILY ORAL TABLET		Tier 2	

Drug Name	Brand Tier	Generic Tier	Formulary Notes
ONE-A-DAY ESSENTIAL ORAL TABLET (ANTI-OXIDANT)	Tier 2	Tier 2	
ONE-A-DAY MENS ORAL TABLET (ANTI-OXIDANT)	Tier 2	Tier 2	
ONE-DAILY MULTI VITAMINS ORAL TABLET		Tier 2	
ONE-DAILY MULTI-VITAMIN ORAL TABLET		Tier 2	
QC ESSENTIALS ORAL TABLET		Tier 2	
QUINTABS ORAL TABLET		Tier 2	
SM MULTIPLE VITAMINS ESSENTIAL ORAL TABLET		Tier 2	
STRESS FORMULA ORAL TABLET		Tier 2	
STRESSTABS ENERGY ORAL TABLET (ANTI-OXIDANT)	Tier 2	Tier 2	
TAB-A-VITE ORAL TABLET (ANTI-OXIDANT)	Tier 2	Tier 2	
TAB-A-VITE/BETA CAROTENE ORAL TABLET (ANTI-OXIDANT)	Tier 2	Tier 2	
THERA ORAL TABLET (ANTI-OXIDANT)	Tier 2	Tier 2	
THERA-MILL ORAL TABLET		Tier 2	
THERA-TABS ORAL TABLET		Tier 2	
THEREMS ORAL TABLET (ANTI-OXIDANT)	Tier 2	Tier 2	
VIT E-VIT C-BETA CAROTENE ORAL TABLET 200-250-5000		Tier 2	
VITALEE ORAL TABLET		Tier 2	
*Ped Multi Vitamins W/Fl & Fe***			
MULTI-VITAMIN/FLUORIDE/IRON ORAL SOLUTION 0.25-10 MG/ML		Tier 3	
*Ped Mv W/ Fluoride***			
MULTI-VITAMIN/FLUORIDE ORAL SOLUTION 0.25 MG/ML, 0.5 MG/ML		Tier 3	
MULTIVITAMIN/FLUORIDE TABLET CHEWABLE 0.25 MG ORAL (RX) 0.25 MG		Tier 3	
MULTIVITAMIN/FLUORIDE TABLET CHEWABLE 0.25 MG ORAL (RX) 0.25 MG		Tier 4	
MULTIVITAMIN/FLUORIDE TABLET CHEWABLE 0.5 MG ORAL 0.5 MG		Tier 3	
MULTIVITAMIN/FLUORIDE TABLET CHEWABLE 0.5 MG ORAL 0.5 MG		Tier 4	

Drug Name	Brand Tier	Generic Tier	Formulary Notes
MULTIVITAMIN/FLUORIDE TABLET CHEWABLE 1 MG ORAL 1 MG		Tier 3	
MULTIVITAMIN/FLUORIDE TABLET CHEWABLE 1 MG ORAL 1 MG		Tier 4	
*Ped Vitamins Acd W/ Fluoride***			
ADC/F (0.5MG/ML) ORAL SOLUTION 0.5 MG/ML		Tier 3	
TRI-VITE/FLUORIDE ORAL SOLUTION 0.25 MG/ML, 0.5 MG/ML		Tier 3	
VITAMINS ACD-FLUORIDE ORAL SOLUTION 0.25 MG/ML		Tier 3	
*Prenatal Mv & Min W/Fe-Fa***			
ATABEX EC ORAL TABLET DELAYED RELEASE 29-1 MG	Tier 4		
ATABEX OB ORAL TABLET 29-1 MG	Tier 2		
CLASSIC PRENATAL ORAL TABLET 28-0.8 MG		Tier 2	
C-NATE DHA ORAL CAPSULE 28-1-200 MG		Tier 2	
COMPLETENATE ORAL TABLET CHEWABLE 29-1 MG		Tier 2	
CO-NATAL FA ORAL TABLET (PRENATABS FA)	Tier 2	Tier 1	
CONCEPT DHA ORAL CAPSULE (VIRT-C DHA) 53.5-38-1 MG	Tier 2	Tier 2	
CONCEPT OB ORAL CAPSULE 130-92.4-1 MG	Tier 4		
CVS PRENATAL ORAL TABLET 27-0.8 MG		Tier 2	
ELITE-OB ORAL TABLET 50-1.25 MG	Tier 4		
EQL PRENATAL FORMULA ORAL TABLET 28-0.8 MG		Tier 2	
FOLIVANE-OB ORAL CAPSULE 85-1 MG	Tier 4		
GNP PRENATAL ORAL TABLET 28-0.8 MG		Tier 2	
KP PRENATAL MULTIVITAMINS ORAL TABLET 28-0.8 MG		Tier 2	
KPN PRENATAL ORAL TABLET 0.1 MG		Tier 2	
M-NATAL PLUS ORAL TABLET 27-1 MG		Tier 2	
MULTI PRENATAL ORAL TABLET 27-0.8 MG		Tier 2	
NATALVIT ORAL TABLET	Tier 4		
NEONATAL PLUS ORAL TABLET (PRENATAL) 27-1 MG	Tier 2	Tier 2	

Drug Name	Brand Tier	Generic Tier	Formulary Notes
NEONATAL VITAMIN ORAL TABLET (PRENATAL) 27-0.8 MG	Tier 2	Tier 2	
NIVA-PLUS ORAL TABLET (PRENATAL) 27-1 MG	Tier 2	Tier 2	
OB COMPLETE ORAL TABLET 50-1.25 MG	Tier 4		
OBSTETRIX DHA ORAL 29-1 & 387 MG	Tier 4		
OBSTETRIX EC ORAL TABLET 29-1 MG	Tier 2		
OBTREX ORAL TABLET	Tier 2		
ONE VITE WOMENS ORAL TABLET 27-0.8 MG		Tier 2	
ONE-A-DAY WOMENS PRENATAL ORAL (SM ONE DAILY PRENATAL) 28-0.8 & 440 MG	Tier 2	Tier 2	
PNV TABS 29-1 ORAL TABLET 29-1 MG		Tier 2	
PNV-SELECT ORAL TABLET 27-0.6-0.4 MG		Tier 2	
PRENATABS RX ORAL TABLET (PRENATAL PLUS IRON) 29-1 MG	Tier 2	Tier 2	
PRENATAL (W/IRON & FA) ORAL TABLET 27-0.8 MG		Tier 2	
PRENATAL 19 ORAL TABLET 29-1 MG		Tier 2	
PRENATAL 19 ORAL TABLET CHEWABLE , 29-1 MG		Tier 2	
PRENATAL COMPLETE ORAL TABLET 14-0.4 MG		Tier 2	
PRENATAL FORMULA A-FREE ORAL TABLET 9-0.267 MG		Tier 2	
PRE-NATAL FORMULA ORAL TABLET		Tier 2	
PRENATAL FORTE ORAL TABLET		Tier 2	
PRENATAL ONE DAILY ORAL TABLET 27-0.8 MG		Tier 2	
PRENATAL ORAL TABLET 28-0.8 MG		Tier 2	
PRENATAL VITAMIN AND MINERAL ORAL TABLET 28-0.8 MG		Tier 2	
PRENATAL VITAMIN ORAL TABLET 27-0.8 MG		Tier 2	
PRENATAL VITAMIN PLUS LOW IRON ORAL TABLET 27-1 MG		Tier 2	
PRENATAL VITAMINS ORAL TABLET 28-0.8 MG		Tier 2	

Drug Name	Brand Tier	Generic Tier	Formulary Notes
PRENATAL/IRON ORAL TABLET , 28-0.8 MG		Tier 2	
PRENATAL-U ORAL CAPSULE 106.5-1 MG	Tier 2		
PRENATVITE PLUS ORAL TABLET 1 MG		Tier 1	
PRENATVITE RX ORAL TABLET 0.8 MG		Tier 1	
PREPLUS ORAL TABLET 27-1 MG		Tier 2	
PRETAB ORAL TABLET 29-1 MG		Tier 2	
PX PRENATAL MULTIVITAMINS ORAL TABLET 28-0.8 MG		Tier 2	
QC PRENATAL ORAL TABLET 28-0.8 MG		Tier 2	
RA PRENATAL FORMULA ORAL TABLET 28-0.8 MG		Tier 2	
RA PRENATAL ORAL TABLET 28-0.8 MG		Tier 2	
SE-NATAL 19 ORAL TABLET 29-1 MG		Tier 2	
SE-NATAL 19 ORAL TABLET CHEWABLE 29-1 MG		Tier 2	
SM PRENATAL VITAMINS ORAL TABLET 28-0.8 MG		Tier 2	
TARON-C DHA ORAL CAPSULE 35-1 MG	Tier 2		
THERANATAL CORE NUTRITION ORAL TABLET (PRENATAL) 27-1 MG	Tier 2	Tier 2	
THRIVITE RX ORAL TABLET 29-1 MG		Tier 2	
TRICARE ORAL TABLET (PRENATAL)	Tier 2	Tier 2	
TRICARE PRENATAL DHA ONE ORAL CAPSULE 27-1-500 MG	Tier 2		
VINATE II ORAL TABLET 29-1 MG	Tier 2		
VIRT-NATE DHA ORAL CAPSULE 28-1-200 MG		Tier 2	
VIRT-PN PLUS ORAL CAPSULE 28-0.6-0.4-340 MG		Tier 2	
VIVA DHA ORAL CAPSULE (RELNATE DHA) 28-1-200 MG	Tier 2	Tier 2	
WESTAB PLUS ORAL TABLET 27-1 MG		Tier 2	
ZATEAN-PN PLUS ORAL CAPSULE (PNV-OMEGA) 28-0.6-0.4-340 MG	Tier 2	Tier 2	
*Prenatal Mv & Min W/Fe-Fa-Ca-Omega 3 Fish Oil***			
COMPLETE NATAL DHA ORAL 29-1-200 & 200 MG		Tier 2	

Drug Name	Brand Tier	Generic Tier	Formulary Notes
*Prenatal Mv & Min W/Fe-Fa-Dha***			
CADEAU DHA ORAL CAPSULE 29-0.4-0.8-375 MG		Tier 2	
CVS WOMENS PRENATAL+DHA ORAL 28-0.975 & 200 MG		Tier 2	
PNV-DHA+DOCUSATE ORAL CAPSULE 27-1.25-300 MG		Tier 2	
PRENA 1 TRUE ORAL 30-1.4 & 300 MG		Tier 5	
PRENATAL VITAMIN/MIN +DHA ORAL CAPSULE 27-0.8-200 MG		Tier 1	
PRENATAL+DHA ORAL 28-0.975 & 200 MG		Tier 2	
TARON-PREX ORAL CAPSULE 30-1.2-265 MG	Tier 2		
ULTRA PRENATAL + DHA ORAL CAPSULE 27-0.8-200 MG		Tier 1	
VIRT-PN DHA ORAL CAPSULE 27-0.6-0.4-300 MG		Tier 2	
ZATEAN-PN DHA ORAL CAPSULE (PNV-DHA) 27-0.6-0.4-300 MG	Tier 2	Tier 2	
Musculoskeletal Therapy Agents			
*Central Muscle Relaxants***			
BACLOFEN ORAL TABLET 10 MG, 20 MG, 5 MG		Tier 3	
CHLORZOXAZONE ORAL TABLET 250 MG, 500 MG		Tier 3	
CYCLOBENZAPRINE HCL ORAL TABLET 10 MG, 5 MG		Tier 3	
METAXALONE ORAL TABLET 800 MG		Tier 3	
METHOCARBAMOL ORAL TABLET 500 MG, 750 MG		Tier 3	
ORPHENADRINE CITRATE ER ORAL TABLET EXTENDED RELEASE 12 HOUR 100 MG		Tier 3	
TIZANIDINE HCL ORAL CAPSULE 2 MG, 4 MG, 6 MG		Tier 3	
TIZANIDINE HCL ORAL TABLET 2 MG, 4 MG		Tier 3	
*Direct Muscle Relaxants***			
DANTROLENE SODIUM ORAL CAPSULE 100 MG, 25 MG, 50 MG		Tier 3	

Drug Name	Brand Tier	Generic Tier	Formulary Notes
*Muscle Relaxant Combinations***			
CARISOPRODOL-ASPIRIN-CODEINE ORAL TABLET 200-325-16 MG		Tier 3	
Nasal Agents - Systemic And Topical			
*Nasal Agents - Misc.***			
NOZIN NASAL SANITIZER NASAL KIT 62 %	Tier 2		
NOZIN NASAL SANITIZER POPSWAB NASAL SWAB	Tier 2		
*Nasal Anticholinergics***			
IPRATROPIUM BROMIDE NASAL SOLUTION 0.03 %, 0.06 %		Tier 3	
*Nasal Antihistamines***			
AZELASTINE HCL NASAL SOLUTION 0.1 %, 0.15 %, 137 MCG/SPRAY		Tier 3	
*Nasal Steroids***			
BECONASE AQ NASAL SUSPENSION 42 MCG/SPRAY	Tier 4		
FLUNISOLIDE NASAL SOLUTION 25 MCG/ACT (0.025%)		Tier 3	
FLUTICASONE PROPIONATE NASAL SUSPENSION 50 MCG/ACT		Tier 3	
MOMETASONE FUROATE NASAL SUSPENSION 50 MCG/ACT		Tier 3	
*Systemic Decongestants***			
CVS NASAL DECONGESTANT ORAL TABLET 30 MG		Tier 3	
EQL NASAL DECONGESTANT ORAL TABLET 30 MG		Tier 3	
GNP NASAL DECONGESTANT ORAL TABLET 30 MG		Tier 3	
HM NASAL DECONGESTANT ORAL TABLET 30 MG		Tier 3	
KP PSEUDOEPHEDRINE HCL ORAL TABLET 30 MG, 60 MG		Tier 3	
MEIJER NASAL DECONGESTANT ORAL TABLET 30 MG		Tier 3	
NASAL DECONGESTANT MAX ST ORAL TABLET 30 MG		Tier 3	
NASAL DECONGESTANT ORAL TABLET 30 MG		Tier 3	

Drug Name	Brand Tier	Generic Tier	Formulary Notes
PSEUDOEPHEDRINE HCL ORAL TABLET 30 MG		Tier 3	
PX NASAL DECONGESTANT ORAL TABLET 30 MG		Tier 3	
RA SINUS/CONGESTION RELIEF ORAL TABLET 30 MG		Tier 3	
RA SUPHEDRINE ORAL TABLET 30 MG		Tier 3	
SINUS CONGESTION MAX STRENGTH ORAL TABLET 30 MG		Tier 3	
SM NASAL DECONGESTANT MAX ST ORAL TABLET 30 MG		Tier 3	
SUDAFED ORAL TABLET (DECONGESTANT) 30 MG	Tier 4	Tier 3	
SUDAFED SINUS CONGESTION 12HR ORAL TABLET EXTENDED RELEASE 12 HOUR 120 MG	Tier 4		
SUDAFED SINUS CONGESTION ORAL TABLET (DECONGESTANT) 30 MG	Tier 4	Tier 3	
SUDOGEST MAXIMUM STRENGTH ORAL TABLET (DECONGESTANT) 30 MG	Tier 3	Tier 3	
SUDOGEST ORAL TABLET (DECONGESTANT) 30 MG	Tier 3	Tier 3	
SUDOGEST ORAL TABLET (PSEUDOEPHEDRINE HCL) 60 MG	Tier 3	Tier 3	
WAL-PHED ORAL TABLET (DECONGESTANT) 30 MG	Tier 3	Tier 3	
Neuromuscular Agents			
*Depolarizing Muscle Relaxants***			
SUCCINYLBOLINE CHLORIDE INJECTION SOLUTION 20 MG/ML		Tier 3	
Ophthalmic Agents			
*Beta-Blockers - Ophthalmic Combinations***			
DORZOLAMIDE HCL-TIMOLOL MAL OPHTHALMIC SOLUTION 22.3-6.8 MG/ML		Tier 3	
*Beta-Blockers - Ophthalmic***			
BETOPTIC-S OPHTHALMIC SUSPENSION 0.25 %	Tier 4		
CARTEOLOL HCL OPHTHALMIC SOLUTION 1 %		Tier 3	

Drug Name	Brand Tier	Generic Tier	Formulary Notes
LEVOBUNOLOL HCL OPHTHALMIC SOLUTION 0.5 %		Tier 3	
TIMOLOL MALEATE (ONCE-DAILY) OPHTHALMIC SOLUTION 0.5 %		Tier 3	
TIMOLOL MALEATE OPHTHALMIC SOLUTION 0.25 %, 0.5 %		Tier 3	
*Cycloplegic Mydriatics***			
ATROPINE SULFATE OPHTHALMIC OINTMENT 1 %		Tier 3	
ATROPINE SULFATE OPHTHALMIC SOLUTION 1 %		Tier 3	
*Lymphocyte Function-Associated Antigen-1 (Lfa-1) Antag***			
XIIDRA OPHTHALMIC SOLUTION 5 %	Tier 5		PA
*Miotics - Direct Acting***			
PILOCARPINE HCL OPHTHALMIC SOLUTION 1 %, 2 %, 4 %		Tier 3	
*Ophthalmic Antiallergic***			
AZELASTINE HCL OPHTHALMIC SOLUTION 0.05 %		Tier 3	
CROMOLYN SODIUM OPHTHALMIC SOLUTION 4 %		Tier 3	
OLOPATADINE HCL OPHTHALMIC SOLUTION 0.1 %, 0.2 %		Tier 3	
*Ophthalmic Antibiotics***			
BACITRACIN OPHTHALMIC OINTMENT 500 UNIT/GM		Tier 3	
CILOXAN OPHTHALMIC OINTMENT 0.3 %	Tier 4		
CIPROFLOXACIN HCL OPHTHALMIC SOLUTION 0.3 %		Tier 3	
ERYTHROMYCIN OPHTHALMIC OINTMENT 5 MG/GM		Tier 3	
GATIFLOXACIN OPHTHALMIC SOLUTION 0.5 %		Tier 3	
GENTAK OPHTHALMIC OINTMENT 0.3 %	Tier 3		
GENTAMICIN SULFATE OPHTHALMIC SOLUTION 0.3 %		Tier 3	
LEVOFLOXACIN OPHTHALMIC SOLUTION 0.5 %		Tier 3	

Drug Name	Brand Tier	Generic Tier	Formulary Notes
MOXIFLOXACIN HCL (2X DAY) OPHTHALMIC SOLUTION 0.5 %		Tier 3	
MOXIFLOXACIN HCL OPHTHALMIC SOLUTION 0.5 %		Tier 3	
OFLOXACIN OPHTHALMIC SOLUTION 0.3 %		Tier 3	
TOBRAMYCIN OPHTHALMIC SOLUTION 0.3 %		Tier 3	
*Ophthalmic Anti-Infective Combinations***			
BACITRACIN-POLYMYXIN B OPHTHALMIC OINTMENT 500-10000 UNIT/GM		Tier 3	
NEOMYCIN-BACITRACIN ZN-POLYMYX OPHTHALMIC OINTMENT 3.5-400-10000		Tier 3	
NEOMYCIN-POLYMYXIN-GRAMICIDIN OPHTHALMIC SOLUTION 1.75-10000-.025		Tier 3	
NEO-POLYCIN OPHTHALMIC OINTMENT (NEOMYCIN-BACITRACIN ZN- POLYMYX) 3.5-400-10000	Tier 3	Tier 3	
POLYCIN OPHTHALMIC OINTMENT (AK- POLY-BAC) 500-10000 UNIT/GM	Tier 3	Tier 3	
POLYMYXIN B-TRIMETHOPRIM OPHTHALMIC SOLUTION 10000-0.1 UNIT/ML-%		Tier 3	
*Ophthalmic Antivirals***			
TRIFLURIDINE OPHTHALMIC SOLUTION 1 %		Tier 3	
*Ophthalmic Carbonic Anhydrase Inhibitors***			
DORZOLAMIDE HCL OPHTHALMIC SOLUTION 2 %		Tier 3	
*Ophthalmic Immunomodulators***			
RESTASIS MULTIDOSE OPHTHALMIC EMULSION 0.05 %	Tier 5		PA
RESTASIS OPHTHALMIC EMULSION 0.05 %	Tier 5		PA
*Ophthalmic Local Anesthetics***			
ALTACAINE OPHTHALMIC SOLUTION (TETRACAINE HCL) 0.5 %	Tier 4	Tier 3	

Drug Name	Brand Tier	Generic Tier	Formulary Notes
*Ophthalmic Nonsteroidal Anti-Inflammatory Agents***			
DICLOFENAC SODIUM OPHTHALMIC SOLUTION 0.1 %		Tier 3	
FLURBIPROFEN SODIUM OPHTHALMIC SOLUTION 0.03 %		Tier 3	
KETOROLAC TROMETHAMINE OPHTHALMIC SOLUTION 0.4 %, 0.5 %		Tier 3	
*Ophthalmic Selective Alpha Adrenergic Agonists***			
BRIMONIDINE TARTRATE OPHTHALMIC SOLUTION 0.15 %, 0.2 %		Tier 3	
*Ophthalmic Steroid Combinations***			
NEOMYCIN-POLYMYXIN-DEXAMETH OPHTHALMIC OINTMENT 3.5-10000-0.1		Tier 3	
NEOMYCIN-POLYMYXIN-DEXAMETH OPHTHALMIC SUSPENSION 3.5-10000-0.1		Tier 3	
NEOMYCIN-POLYMYXIN-HC OPHTHALMIC SUSPENSION 3.5-10000-1		Tier 3	
TOBRADEX OPHTHALMIC OINTMENT 0.3-0.1 %	Tier 4		
TOBRAMYCIN-DEXAMETHASONE OPHTHALMIC SUSPENSION 0.3-0.1 %		Tier 3	
*Ophthalmic Steroids***			
DEXAMETHASONE SODIUM PHOSPHATE OPHTHALMIC SOLUTION 0.1 %		Tier 3	
FLUOROMETHOLONE OPHTHALMIC SUSPENSION 0.1 %		Tier 3	
LOTEPREDNOL ETABONATE OPHTHALMIC SUSPENSION 0.5 %		Tier 3	
PREDNISOLONE ACETATE OPHTHALMIC SUSPENSION 1 %		Tier 3	
PREDNISOLONE SODIUM PHOSPHATE OPHTHALMIC SOLUTION 1 %		Tier 3	
*Ophthalmic Sulfonamides***			
SULFACETAMIDE SODIUM OPHTHALMIC OINTMENT 10 %		Tier 3	
SULFACETAMIDE SODIUM OPHTHALMIC SOLUTION 10 %		Tier 3	

Drug Name	Brand Tier	Generic Tier	Formulary Notes
*Prostaglandins - Ophthalmic***			
LATANOPROST OPHTHALMIC SOLUTION 0.005 %		Tier 3	
LUMIGAN OPHTHALMIC SOLUTION 0.01 %	Tier 4		
TRAVOPROST (BAK FREE) OPHTHALMIC SOLUTION 0.004 %		Tier 5	
Otic Agents			
*Otic Anti-Infectives***			
OFLOXACIN OTIC SOLUTION 0.3 %		Tier 3	
*Otic Steroid-Anti-Infective Combinations***			
CIPROFLOXACIN-DEXAMETHASONE OTIC SUSPENSION 0.3-0.1 %		Tier 3	
NEOMYCIN-POLYMYXIN-HC OTIC SOLUTION 1 %, 3.5-10000-1		Tier 3	
NEOMYCIN-POLYMYXIN-HC OTIC SUSPENSION 3.5-10000-1		Tier 3	
*Otic Steroids***			
HYDROCORTISONE-ACETIC ACID OTIC SOLUTION 1-2 %		Tier 3	
Oxytocics			
*Oxytocics***			
METHERGINE ORAL TABLET (METHYLERGONOVINE MALEATE) 0.2 MG	Tier 3	Tier 3	
Passive Immunizing And Treatment Agents			
*Antiviral Monoclonal Antibodies***			
SYNAGIS INTRAMUSCULAR SOLUTION 100 MG/ML, 50 MG/0.5ML	Tier 6		PA
Penicillins			
*Aminopenicillins***			
AMOXICILLIN ORAL CAPSULE 250 MG, 500 MG		Tier 3	
AMOXICILLIN ORAL SUSPENSION RECONSTITUTED 125 MG/5ML, 200 MG/5ML, 250 MG/5ML, 400 MG/5ML		Tier 3	
AMOXICILLIN ORAL TABLET 500 MG, 875 MG		Tier 3	

Drug Name	Brand Tier	Generic Tier	Formulary Notes
AMOXICILLIN ORAL TABLET CHEWABLE 125 MG, 250 MG		Tier 3	
AMPICILLIN ORAL CAPSULE 500 MG		Tier 3	
AMPICILLIN SODIUM INJECTION SOLUTION RECONSTITUTED 1 GM, 125 MG, 2 GM, 250 MG, 500 MG		Tier 3	
*Natural Penicillins***			
PENICILLIN V POTASSIUM ORAL SOLUTION RECONSTITUTED 125 MG/5ML, 250 MG/5ML		Tier 3	
PENICILLIN V POTASSIUM ORAL TABLET 250 MG, 500 MG		Tier 3	
*Penicillin Combinations***			
AMOXICILLIN-POT CLAVULANATE ER ORAL TABLET EXTENDED RELEASE 12 HOUR 1000-62.5 MG		Tier 3	
AMOXICILLIN-POT CLAVULANATE ORAL SUSPENSION RECONSTITUTED 200-28.5 MG/5ML, 250-62.5 MG/5ML, 400-57 MG/5ML, 600-42.9 MG/5ML		Tier 3	
AMOXICILLIN-POT CLAVULANATE ORAL TABLET 250-125 MG, 500-125 MG, 875-125 MG		Tier 3	
AMOXICILLIN-POT CLAVULANATE ORAL TABLET CHEWABLE 200-28.5 MG, 400-57 MG		Tier 3	
PIPERACILLIN SOD-TAZOBACTAM SO INTRAVENOUS SOLUTION RECONSTITUTED 4.5 (4-0.5) GM		Tier 3	
*Penicillinase-Resistant Penicillins***			
DICLOXACILLIN SODIUM ORAL CAPSULE 250 MG, 500 MG		Tier 3	
Pharmaceutical Adjuvants			
*Semi Solid Vehicles***			
OCCLUVAN EXTERNAL OINTMENT	Tier 3		
Progestins			
*Progestins***			
MEDROXYPROGESTERONE ACETATE ORAL TABLET 10 MG, 2.5 MG, 5 MG		Tier 3	
NORETHINDRONE ACETATE ORAL TABLET 5 MG		Tier 3	

Drug Name	Brand Tier	Generic Tier	Formulary Notes
PROGESTERONE ORAL CAPSULE 100 MG, 200 MG		Tier 3	
Psychotherapeutic And Neurological Agents - Misc.			
*Alcohol Deterrents***			
ACAMPROSATE CALCIUM ORAL TABLET DELAYED RELEASE 333 MG		Tier 3	
DISULFIRAM ORAL TABLET 250 MG, 500 MG		Tier 3	
*Cholinomimetics - Ache Inhibitors***			
DONEPEZIL HCL ORAL TABLET 10 MG, 23 MG, 5 MG		Tier 3	
DONEPEZIL HCL ORAL TABLET DISPERSIBLE 10 MG, 5 MG		Tier 3	
GALANTAMINE HYDROBROMIDE ER ORAL CAPSULE EXTENDED RELEASE 24 HOUR 16 MG, 24 MG, 8 MG		Tier 3	
GALANTAMINE HYDROBROMIDE ORAL TABLET 12 MG, 4 MG, 8 MG		Tier 3	
RIVASTIGMINE TARTRATE ORAL CAPSULE 1.5 MG, 3 MG, 4.5 MG, 6 MG		Tier 3	
*Multiple Sclerosis Agents - Interferons***			
AVONEX PEN INTRAMUSCULAR AUTO-INJECTOR KIT 30 MCG/0.5ML	Tier 6		PA; QL (4 EA per 28 days)
AVONEX PREFILLED INTRAMUSCULAR PREFILLED SYRINGE KIT 30 MCG/0.5ML	Tier 6		PA; QL (4 EA per 28 days)
REBIF REBIDOSE SUBCUTANEOUS SOLUTION AUTO-INJECTOR 22 MCG/0.5ML, 44 MCG/0.5ML	Tier 6		
REBIF REBIDOSE TITRATION PACK SUBCUTANEOUS SOLUTION AUTO-INJECTOR 6X8.8 & 6X22 MCG	Tier 6		
REBIF SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 22 MCG/0.5ML, 44 MCG/0.5ML	Tier 6		
REBIF TITRATION PACK SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 6X8.8 & 6X22 MCG	Tier 6		

Drug Name	Brand Tier	Generic Tier	Formulary Notes
*Multiple Sclerosis Agents - Nrf2 Pathway Activators***			
DIMETHYL FUMARATE ORAL CAPSULE DELAYED RELEASE 120 MG, 240 MG		Tier 6	PA
DIMETHYL FUMARATE STARTER PACK ORAL 120 & 240 MG		Tier 6	PA
*Multiple Sclerosis Agents - Potassium Channel Blockers***			
DALFAMPRIDINE ER ORAL TABLET EXTENDED RELEASE 12 HOUR 10 MG		Tier 6	
*Multiple Sclerosis Agents***			
GLATOPA SUBCUTANEOUS SOLUTION PREFILLED SYRINGE (GLATIRAMER ACETATE) 20 MG/ML, 40 MG/ML	Tier 6	Tier 6	
*N-Methyl-D-Aspartate (Nmda) Receptor Antagonists***			
MEMANTINE HCL ER ORAL CAPSULE EXTENDED RELEASE 24 HOUR 14 MG, 21 MG, 28 MG, 7 MG		Tier 3	
MEMANTINE HCL ORAL SOLUTION 10 MG/5ML, 2 MG/ML		Tier 3	
MEMANTINE HCL ORAL TABLET 10 MG, 28 X 5 MG & 21 X 10 MG, 5 MG		Tier 3	
*Postherpetic Neuralgia (Phn)/Neuropathic Pain Agents***			
PREGABALIN ER ORAL TABLET EXTENDED RELEASE 24 HOUR 165 MG, 330 MG, 82.5 MG		Tier 3	
*Psychotherapeutic And Neurological Agents - Misc.***			
ERGOLOID MESYLATES ORAL TABLET 1 MG		Tier 3	
*Smoking Deterrents***			
APO-VARENICLINE ORAL TABLET 0.5 MG, 1 MG		Tier 1	
BUPROPION HCL ER (SMOKING DET) ORAL TABLET EXTENDED RELEASE 12 HOUR 150 MG		Tier 1	
CVS NICOTINE MOUTH/THROAT GUM 2 MG, 4 MG		Tier 1	

Drug Name	Brand Tier	Generic Tier	Formulary Notes
CVS NICOTINE MOUTH/THROAT LOZENGE 2 MG		Tier 1	
CVS NICOTINE POLACRILEX MOUTH/THROAT GUM 2 MG, 4 MG		Tier 1	
CVS NICOTINE POLACRILEX MOUTH/THROAT LOZENGE 2 MG, 4 MG		Tier 1	
CVS NICOTINE TRANSDERMAL PATCH 24 HOUR 14 MG/24HR, 21 MG/24HR, 7 MG/24HR		Tier 1	
EQ NICOTINE MOUTH/THROAT GUM 4 MG		Tier 1	
EQ NICOTINE MOUTH/THROAT LOZENGE 4 MG		Tier 1	
EQ NICOTINE POLACRILEX MOUTH/THROAT GUM 2 MG, 4 MG		Tier 1	
EQ NICOTINE POLACRILEX MOUTH/THROAT LOZENGE 2 MG, 4 MG		Tier 1	
EQ NICOTINE STEP 3 TRANSDERMAL PATCH 24 HOUR 7 MG/24HR		Tier 1	
EQ NICOTINE TRANSDERMAL PATCH 24 HOUR 14 MG/24HR, 21 MG/24HR		Tier 1	
EQL NICOTINE POLACRILEX MOUTH/THROAT LOZENGE 2 MG, 4 MG		Tier 1	
GNP NICOTINE MINI MOUTH/THROAT LOZENGE 2 MG, 4 MG		Tier 1	
GNP NICOTINE MOUTH/THROAT GUM 2 MG, 4 MG		Tier 1	
GNP NICOTINE POLACRILEX MOUTH/THROAT GUM 2 MG, 4 MG		Tier 1	
GNP NICOTINE POLACRILEX MOUTH/THROAT LOZENGE 2 MG, 4 MG		Tier 1	
GNP NICOTINE TRANSDERMAL PATCH 24 HOUR 14 MG/24HR, 21 MG/24HR, 7 MG/24HR		Tier 1	
GOODSENSE NICOTINE MOUTH/THROAT GUM 2 MG, 4 MG		Tier 1	
GOODSENSE NICOTINE MOUTH/THROAT LOZENGE 2 MG, 4 MG		Tier 1	
HABITROL TRANSDERMAL PATCH 24 HOUR (NICOTINE) 21 MG/24HR	Tier 1	Tier 1	
HM NICOTINE POLACRILEX MOUTH/THROAT GUM 2 MG, 4 MG		Tier 1	
HM NICOTINE POLACRILEX MOUTH/THROAT LOZENGE 2 MG, 4 MG		Tier 1	

Drug Name	Brand Tier	Generic Tier	Formulary Notes
HM NICOTINE TRANSDERMAL PATCH 24 HOUR 14 MG/24HR, 21 MG/24HR, 7 MG/24HR		Tier 1	
KLS QUIT2 MOUTH/THROAT GUM (NICOTINE POLACRILEX) 2 MG	Tier 1	Tier 1	
KLS QUIT2 MOUTH/THROAT LOZENGE (NICOTINE POLACRILEX) 2 MG	Tier 1	Tier 1	
KLS QUIT4 MOUTH/THROAT GUM (NICOTINE POLACRILEX) 4 MG	Tier 1	Tier 1	
KLS QUIT4 MOUTH/THROAT LOZENGE (NICOTINE POLACRILEX) 4 MG	Tier 1	Tier 1	
NICODERM CQ TRANSDERMAL PATCH 24 HOUR (NICOTINE) 14 MG/24HR, 21 MG/24HR, 7 MG/24HR	Tier 1	Tier 1	
NICORETTE MINI MOUTH/THROAT LOZENGE (NICOTINE POLACRILEX) 2 MG, 4 MG	Tier 1	Tier 1	
NICORETTE MOUTH/THROAT GUM (NICOTINE POLACRILEX) 2 MG, 4 MG	Tier 1	Tier 1	
NICORETTE MOUTH/THROAT LOZENGE (NICOTINE POLACRILEX) 2 MG, 4 MG	Tier 1	Tier 1	
NICORETTE STARTER KIT MOUTH/THROAT GUM (NICOTINE POLACRILEX) 2 MG, 4 MG	Tier 1	Tier 1	
NICOTINE MINI MOUTH/THROAT LOZENGE 2 MG, 4 MG		Tier 1	
NICOTINE POLACRILEX MINI MOUTH/THROAT LOZENGE 2 MG		Tier 1	
NICOTINE STEP 1 TRANSDERMAL PATCH 24 HOUR 21 MG/24HR		Tier 1	
NICOTINE STEP 2 TRANSDERMAL PATCH 24 HOUR 14 MG/24HR		Tier 1	
NICOTINE STEP 3 TRANSDERMAL PATCH 24 HOUR 7 MG/24HR		Tier 1	
NICOTINE TRANSDERMAL KIT 21-14-7 MG/24HR		Tier 1	
NICOTROL INHALATION INHALER 10 MG	Tier 1		
NICOTROL NS NASAL SOLUTION 10 MG/ML	Tier 1		
PX STOP SMOKING AID MOUTH/THROAT GUM 2 MG, 4 MG		Tier 1	

Drug Name	Brand Tier	Generic Tier	Formulary Notes
PX STOP SMOKING AID MOUTH/THROAT LOZENGE 2 MG, 4 MG		Tier 1	
QC NICOTINE TRANSDERMAL SYSTEM TRANSDERMAL PATCH 24 HOUR 14 MG/24HR, 21 MG/24HR		Tier 1	
RA MINI NICOTINE MOUTH/THROAT LOZENGE 2 MG, 4 MG		Tier 1	
RA NICOTINE GUM MOUTH/THROAT GUM 2 MG, 4 MG		Tier 1	
RA NICOTINE MOUTH/THROAT GUM 2 MG, 4 MG		Tier 1	
RA NICOTINE POLACRILEX MOUTH/THROAT LOZENGE 2 MG, 4 MG		Tier 1	
RA NICOTINE TRANSDERMAL PATCH 24 HOUR 14 MG/24HR, 21 MG/24HR		Tier 1	
SM NICOTINE MOUTH/THROAT GUM 4 MG		Tier 1	
SM NICOTINE MOUTH/THROAT LOZENGE 2 MG		Tier 1	
SM NICOTINE POLACRILEX MOUTH/THROAT GUM 2 MG, 4 MG		Tier 1	
SM NICOTINE POLACRILEX MOUTH/THROAT LOZENGE 2 MG, 4 MG		Tier 1	
SM NICOTINE TRANSDERMAL PATCH 24 HOUR 14 MG/24HR, 21 MG/24HR, 7 MG/24HR		Tier 1	
THRIVE MOUTH/THROAT GUM (NICOTINE POLACRILEX) 2 MG	Tier 1	Tier 1	
VARENICLINE TARTRATE ORAL TABLET 0.5 MG, 1 MG		Tier 1	
*Sphingosine 1-Phosphate (S1p) Receptor Modulators***			
GILENYA ORAL CAPSULE 0.5 MG	Tier 6		PA
Respiratory Agents - Misc.			
*Cftr Potentiators***			
KALYDECO ORAL PACKET 25 MG, 50 MG, 75 MG	Tier 6		PA; QL (2 EA per 1 day)
KALYDECO ORAL TABLET 150 MG	Tier 6		PA; QL (2 EA per 1 day)
*Cystic Fibrosis Agent - Combinations***			
ORKAMBI ORAL PACKET 100-125 MG, 150-188 MG	Tier 6		PA; QL (2 EA per 1 day)

Drug Name	Brand Tier	Generic Tier	Formulary Notes
ORKAMBI ORAL TABLET 100-125 MG, 200-125 MG	Tier 6		PA; QL (4 EA per 1 day)
SYMDEKO ORAL TABLET THERAPY PACK 100-150 & 150 MG, 50-75 & 75 MG	Tier 6		PA; QL (2 EA per 1 day)
TRIKAFTA ORAL TABLET THERAPY PACK 100-50-75 & 150 MG, 50-25-37.5 & 75 MG	Tier 6		PA; QL (3 EA per 1 day)
Tetracyclines			
*Tetracyclines***			
AVIDOXY ORAL TABLET 100 MG		Tier 3	
DOXYCYCLINE HYCLATE INTRAVENOUS SOLUTION RECONSTITUTED 100 MG		Tier 3	
DOXYCYCLINE HYCLATE ORAL CAPSULE 100 MG, 50 MG		Tier 3	
DOXYCYCLINE HYCLATE ORAL TABLET 100 MG, 20 MG		Tier 3	
DOXYCYCLINE MONOHYDRATE ORAL CAPSULE 100 MG, 50 MG		Tier 3	
DOXYCYCLINE MONOHYDRATE ORAL SUSPENSION RECONSTITUTED 25 MG/5ML		Tier 3	
DOXYCYCLINE MONOHYDRATE ORAL TABLET 100 MG, 150 MG, 50 MG, 75 MG		Tier 3	
MINOCYCLINE HCL ORAL CAPSULE 100 MG, 50 MG, 75 MG		Tier 3	
MINOCYCLINE HCL ORAL TABLET 100 MG, 50 MG, 75 MG		Tier 3	
Thyroid Agents			
*Antithyroid Agents***			
METHIMAZOLE ORAL TABLET 10 MG, 5 MG		Tier 3	
PROPYLTHIOURACIL ORAL TABLET 50 MG		Tier 3	
*Thyroid Hormones***			
ARMOUR THYROID ORAL TABLET (NP THYROID) 120 MG, 15 MG	Tier 4	Tier 3	
ARMOUR THYROID ORAL TABLET 180 MG, 240 MG, 30 MG, 300 MG, 60 MG, 90 MG	Tier 4		
EUTHYROX ORAL TABLET (LEVOTHYROXINE SODIUM) 100 MCG, 112 MCG, 125 MCG, 137 MCG, 150 MCG, 175 MCG, 200 MCG, 25 MCG, 50 MCG, 75 MCG, 88 MCG	Tier 3	Tier 3	

Drug Name	Brand Tier	Generic Tier	Formulary Notes
LEVOTHYROXINE SODIUM INTRAVENOUS SOLUTION 100 MCG/5ML, 200 MCG/5ML, 500 MCG/5ML		Tier 3	
LEVOXYL ORAL TABLET (LEVOTHYROXINE SODIUM) 100 MCG, 112 MCG, 125 MCG, 137 MCG, 150 MCG, 175 MCG, 200 MCG, 25 MCG, 50 MCG, 75 MCG, 88 MCG	Tier 3	Tier 3	
LIOthyronine SODIUM ORAL TABLET 25 MCG, 5 MCG, 50 MCG		Tier 3	
SYNTHROID ORAL TABLET (LEVOTHYROXINE SODIUM) 100 MCG, 112 MCG, 125 MCG, 137 MCG, 150 MCG, 175 MCG, 200 MCG, 25 MCG, 300 MCG, 50 MCG, 75 MCG, 88 MCG	Tier 4	Tier 3	
UNITHROID ORAL TABLET (LEVOTHYROXINE SODIUM) 100 MCG, 112 MCG, 125 MCG, 137 MCG, 150 MCG, 175 MCG, 200 MCG, 25 MCG, 300 MCG, 50 MCG, 75 MCG, 88 MCG	Tier 3	Tier 3	
Toxoids			
*Toxoid Combinations***			
ADACEL INTRAMUSCULAR SUSPENSION 5-2-15.5 LF-MCG/0.5	Tier 1		
BOOSTRIX INTRAMUSCULAR SUSPENSION 5-2.5-18.5 LF-MCG/0.5	Tier 1		
BOOSTRIX INTRAMUSCULAR SUSPENSION PREFILLED SYRINGE 5-2.5-18.5 LF-MCG/0.5	Tier 1		
TDVAX INTRAMUSCULAR SUSPENSION (TETANUS-DIPHThERIA TOXOIDS TD) 2-2 LF/0.5ML	Tier 1	Tier 1	
TENIVAC INTRAMUSCULAR INJECTABLE 5-2 LFU	Tier 1		
*Ulcer Drugs/Antispasmodics/Anticholinergics *			
*Anticholinergic Combinations***			
CHLORDIAZEPOXIDE-CLIDINIUM ORAL CAPSULE 5-2.5 MG		Tier 3	
*Antispasmodics***			
DICYCLOMINE HCL ORAL CAPSULE 10 MG		Tier 3	
DICYCLOMINE HCL ORAL TABLET 20 MG		Tier 3	

Drug Name	Brand Tier	Generic Tier	Formulary Notes
*Belladonna Alkaloids***			
ATROPINE SULFATE INTRAVENOUS SOLUTION 0.4 MG/ML, 1 MG/ML		Tier 3	
HYOSCYAMINE SULFATE ORAL ELIXIR 0.125 MG/5ML		Tier 3	
HYOSCYAMINE SULFATE ORAL TABLET 0.125 MG		Tier 3	
HYOSCYAMINE SULFATE ORAL TABLET DISPERSIBLE 0.125 MG		Tier 3	
HYOSCYAMINE SULFATE SL SUBLINGUAL TABLET SUBLINGUAL 0.125 MG		Tier 3	
HYOSCYAMINE SULFATE SUBLINGUAL TABLET SUBLINGUAL 0.125 MG		Tier 3	
HYOSYNE ORAL ELIXIR 0.125 MG/5ML		Tier 3	
OSCIMIN ORAL TABLET 0.125 MG		Tier 3	
OSCIMIN SUBLINGUAL TABLET SUBLINGUAL 0.125 MG		Tier 3	
*H-2 Antagonists***			
CIMETIDINE HCL ORAL SOLUTION 300 MG/5ML, 400 MG/6.67ML		Tier 3	
CIMETIDINE ORAL TABLET 300 MG, 400 MG, 800 MG		Tier 3	
FAMOTIDINE ORAL SUSPENSION RECONSTITUTED 40 MG/5ML		Tier 3	
FAMOTIDINE ORAL TABLET 40 MG		Tier 3	
NIZATIDINE ORAL CAPSULE 150 MG, 300 MG		Tier 3	
NIZATIDINE ORAL SOLUTION 15 MG/ML		Tier 3	
*Misc. Anti-Ulcer***			
SUCRALFATE ORAL SUSPENSION 1 GM/10ML		Tier 3	
SUCRALFATE ORAL TABLET 1 GM		Tier 3	
*Proton Pump Inhibitors***			
DEXILANT ORAL CAPSULE DELAYED RELEASE 30 MG, 60 MG	Tier 4		ST
FIRST-OMEPRAZOLE ORAL SUSPENSION 2 MG/ML	Tier 4		
LANSOPRAZOLE ORAL CAPSULE DELAYED RELEASE 30 MG		Tier 3	QL (60 EA per 30 days)
LANSOPRAZOLE ORAL TABLET DELAYED RELEASE DISPERSIBLE 15 MG		Tier 3	QL (2 EA per 1 day)

Drug Name	Brand Tier	Generic Tier	Formulary Notes
OMEPRAZOLE CAPSULE DELAYED RELEASE 10 MG ORAL 10 MG		Tier 3	QL (2 EA per 1 day)
OMEPRAZOLE CAPSULE DELAYED RELEASE 20 MG ORAL (RX) 20 MG		Tier 3	QL (60 EA per 30 days)
OMEPRAZOLE CAPSULE DELAYED RELEASE 40 MG ORAL 40 MG		Tier 3	QL (60 EA per 30 days)
PANTOPRAZOLE SODIUM ORAL TABLET DELAYED RELEASE 20 MG, 40 MG		Tier 3	QL (60 EA per 30 days)
RABEPRAZOLE SODIUM ORAL TABLET DELAYED RELEASE 20 MG		Tier 3	
*Quaternary Anticholinergics***			
GLYCOPYRROLATE ORAL TABLET 1 MG, 2 MG		Tier 3	
METHSCOPOLAMINE BROMIDE ORAL TABLET 2.5 MG		Tier 3	
*Ulcer Anti-Infective W/ Proton Pump Inhibitors***			
AMOXICILL-CLARITHRO-LANSOPRAZ ORAL		Tier 3	
*Ulcer Drugs - Prostaglandins***			
MISOPROSTOL ORAL TABLET 100 MCG, 200 MCG		Tier 3	
Urinary Antispasmodics			
*Urinary Antispasmodic - Antimuscarinic (Anticholinergic)***			
DARIFENACIN HYDROBROMIDE ER ORAL TABLET EXTENDED RELEASE 24 HOUR 15 MG, 7.5 MG		Tier 3	
OXYBUTYNIN CHLORIDE ER ORAL TABLET EXTENDED RELEASE 24 HOUR 10 MG, 15 MG, 5 MG		Tier 3	
OXYBUTYNIN CHLORIDE ORAL SYRUP 5 MG/5ML		Tier 3	
OXYBUTYNIN CHLORIDE ORAL TABLET 5 MG		Tier 3	
OXYTROL TRANSDERMAL PATCH TWICE WEEKLY 3.9 MG/24HR	Tier 4		
SOLIFENACIN SUCCINATE ORAL TABLET 10 MG, 5 MG		Tier 3	
TOLTERODINE TARTRATE ER ORAL CAPSULE EXTENDED RELEASE 24 HOUR 2 MG, 4 MG		Tier 3	

Drug Name	Brand Tier	Generic Tier	Formulary Notes
TOLTERODINE TARTRATE ORAL TABLET 1 MG, 2 MG		Tier 3	
*Urinary Antispasmodics - Cholinergic Agonists***			
BETHANECHOL CHLORIDE ORAL TABLET 10 MG, 25 MG, 5 MG, 50 MG		Tier 3	
*Urinary Antispasmodics - Direct Muscle Relaxants***			
FLAVOXATE HCL ORAL TABLET 100 MG		Tier 3	
Vaccines			
*Bacterial Vaccines***			
BEXSERO INTRAMUSCULAR SUSPENSION PREFILLED SYRINGE	Tier 1		AGE (Max 25 Years)
MENACTRA INTRAMUSCULAR SOLUTION	Tier 1		
MENQUADFI INTRAMUSCULAR SOLUTION	Tier 1		
MENVEO INTRAMUSCULAR SOLUTION RECONSTITUTED	Tier 1		
PNEUMOVAX 23 INJECTION INJECTABLE 25 MCG/0.5ML	Tier 1		
PREVNAR 13 INTRAMUSCULAR SUSPENSION	Tier 1		
TRUMENBA INTRAMUSCULAR SUSPENSION PREFILLED SYRINGE	Tier 1		AGE (Max 25 Years)
*Viral Vaccine Combinations***			
M-M-R II INJECTION SOLUTION RECONSTITUTED	Tier 1		
*Viral Vaccines***			
AFLURIA QUADRIVALENT INTRAMUSCULAR SUSPENSION	Tier 1		
AFLURIA QUADRIVALENT INTRAMUSCULAR SUSPENSION PREFILLED SYRINGE 0.25 ML, 0.5 ML	Tier 1		
ENGERIX-B INJECTION SUSPENSION 10 MCG/0.5ML, 20 MCG/ML	Tier 1		
FLUARIX QUADRIVALENT INTRAMUSCULAR SUSPENSION PREFILLED SYRINGE 0.5 ML	Tier 1		

Drug Name	Brand Tier	Generic Tier	Formulary Notes
FLUBLOK QUADRIVALENT INTRAMUSCULAR SOLUTION PREFILLED SYRINGE 0.5 ML	Tier 1		
FLUCELVAX QUADRIVALENT INTRAMUSCULAR SUSPENSION	Tier 1		
FLUCELVAX QUADRIVALENT INTRAMUSCULAR SUSPENSION PREFILLED SYRINGE 0.5 ML	Tier 1		
FLULAVAL QUADRIVALENT INTRAMUSCULAR SUSPENSION PREFILLED SYRINGE 0.5 ML	Tier 1		
FLUMIST QUADRIVALENT NASAL SUSPENSION	Tier 1		
FLUZONE HIGH-DOSE QUADRIVALENT INTRAMUSCULAR SUSPENSION PREFILLED SYRINGE 0.7 ML	Tier 1		AGE (Min 65 Years)
FLUZONE QUADRIVALENT INTRAMUSCULAR SUSPENSION , 0.5 ML	Tier 1		
FLUZONE QUADRIVALENT INTRAMUSCULAR SUSPENSION PREFILLED SYRINGE 0.5 ML	Tier 1		
GARDASIL 9 INTRAMUSCULAR SUSPENSION	Tier 1		AGE (Min 9 Years and Max 26 Years)
GARDASIL 9 INTRAMUSCULAR SUSPENSION PREFILLED SYRINGE	Tier 1		AGE (Min 9 Years and Max 26 Years)
HAVRIX INTRAMUSCULAR SUSPENSION 1440 EL U/ML, 720 EL U/0.5ML	Tier 1		
HEPLISAV-B INTRAMUSCULAR SOLUTION PREFILLED SYRINGE 20 MCG/0.5ML	Tier 1		AGE (Min 18 Years)
RECOMBIVAX HB INJECTION SUSPENSION 10 MCG/ML, 5 MCG/0.5ML	Tier 1		
SHINGRIX INTRAMUSCULAR SUSPENSION RECONSTITUTED 50 MCG/0.5ML	Tier 1		AGE (Min 50 Years)
VAQTA INTRAMUSCULAR SUSPENSION 25 UNIT/0.5ML, 50 UNIT/ML	Tier 1		
VARIVAX SUBCUTANEOUS INJECTABLE 1350 PFU/0.5ML	Tier 1		
Vaginal And Related Products			
*Imidazole-Related Antifungals***			
TERCONAZOLE VAGINAL CREAM 0.4 %, 0.8 %		Tier 3	

Drug Name	Brand Tier	Generic Tier	Formulary Notes
TERCONAZOLE VAGINAL SUPPOSITORY 80 MG		Tier 3	
*Vaginal Anti-Infectives***			
CLINDAMYCIN PHOSPHATE VAGINAL CREAM 2 %		Tier 3	
VANAZOLE VAGINAL GEL (METRONIDAZOLE) 0.75 %	Tier 3	Tier 3	
*Vaginal Estrogens***			
ESTRADIOL VAGINAL CREAM 0.1 MG/GM		Tier 3	
ESTRING VAGINAL RING 2 MG	Tier 4		
FEMRING VAGINAL RING 0.05 MG/24HR, 0.1 MG/24HR	Tier 4		
PREMARIN VAGINAL CREAM 0.625 MG/GM	Tier 4		
YUVAFEM VAGINAL TABLET (ESTRADIOL) 10 MCG	Tier 3	Tier 3	
Vasopressors			
*Anaphylaxis Therapy Agents***			
EPINEPHRINE INJECTION SOLUTION AUTO-INJECTOR 0.3 MG/0.3ML		Tier 3	
EPIPEN JR 2-PAK INJECTION SOLUTION AUTO-INJECTOR (EPINEPHRINE) 0.15 MG/0.3ML	Tier 3	Tier 3	
*Vasopressors***			
EPHEDRINE SULFATE INTRAVENOUS SOLUTION 50 MG/ML		Tier 3	
EPINEPHRINE INTRAVENOUS SOLUTION PREFILLED SYRINGE 1 MG/10ML		Tier 3	
MIDODRINE HCL ORAL TABLET 5 MG		Tier 3	
NOREPINEPHRINE-SODIUM CHLORIDE INTRAVENOUS SOLUTION 8-0.9 MG/250ML-%		Tier 3	
Vitamins			
*Vitamin D***			
ERGOCALCIFEROL ORAL CAPSULE 1.25 MG (50000 UT)		Tier 3	
VITAMIN D (ERGOCALCIFEROL) ORAL CAPSULE 1.25 MG (50000 UT)		Tier 3	

Drug Name	Brand Tier	Generic Tier	Formulary Notes
*Vitamin K***			
MEPHYTON ORAL TABLET (PHYTONADIONE) 5 MG	Tier 4	Tier 3	

Index

1ST TIER UNIFINE PENTIPS 121 PLUS.....121	ACTI-LANCE LITE LANCETS 28G..... 104	AEROCHAMBER PLUS FLO-VU MEDIUM.....148
1ST TIER UNILET COMFORTOUCH.....103	ACTI-LANCE SPECIAL LANCETS 17G..... 104	AEROCHAMBER PLUS FLO-VU SMALL..... 148
ABACAVIR SULFATE.....55	ACTI-LANCE UNIVERSAL 23G..... 104	AEROCHAMBER PLUS FLO-VU W/MASK..... 148
ABACAVIR SULFATE-LAMIVUDINE.....53	ACTIMMUNE..... 47	AEROCHAMBER PLUS FLOW VU..... 148
ABACAVIR-LAMIVUDINE-ZIDOVUDINE.....53	ACYCLOVIR..... 56, 78	AEROCHAMBER W/FLOWSIGNAL.....148
ABOUTTIME PEN NEEDLE.....121	ADACEL..... 173	AEROCHAMBER Z-STAT PLUS..... 148
ABRAXANE.....49	ADAPALENE..... 76	AEROCHAMBER Z-STAT PLUS CHAMBR..... 149
ACAMPROSATE CALCIUM. 167	ADC/F (0.5MG/ML)..... 156	AEROCHAMBER Z-STAT PLUS/LARGE.....149
ACARBOSE..... 32	ADEFOVIR DIPIVOXIL..... 56	AEROCHAMBER Z-STAT PLUS/MEDIUM..... 149
ACCU-CHEK AVIVA PLUS.....82, 103	ADJUSTABLE LANCING DEVICE.....104	AEROCHAMBER Z-STAT PLUS/SMALL.....149
ACCU-CHEK COMPACT PLUS..... 82	ADMELOG..... 33	AFIRMELLE..... 62
ACCU-CHEK FASTCLIX LANCET.....103	ADMELOG SOLOSTAR..... 33	AFLURIA QUADRIVALENT.....176
ACCU-CHEK FASTCLIX LANCETS..... 103	ADULT ASPIRIN REGIMEN... 12	AFTERA..... 69
ACCU-CHEK GUIDE..... 82, 103	ADVAIR HFA..... 23	AFTERPILL..... 69
ACCU-CHEK GUIDE ME... 103	ADVANCE INTUITION TEST..... 82	AGAMATRIX AMP TEST.... 82
ACCU-CHEK MULTICLIX LANCETS..... 104	ADVANCE MICRO-DRAW TEST..... 82	AGAMATRIX JAZZ TEST... 82
ACCU-CHEK SAFE-T PRO LANCETS..... 104	ADVANCED MOBILE LANCET.....104	AGAMATRIX KEYNOTE TEST..... 82
ACCU-CHEK SMARTVIEW. 82	ADVOCATE ALCOHOL PREP PADS..... 102	AGAMATRIX PRESTO TEST..... 82
ACCU-CHEK SOFTCLIX LANCET DEV..... 104	ADVOCATE INSULIN PEN NEEDLES.....121	AGAMATRIX ULTRA-THIN LANCETS..... 104
ACCU-CHEK SOFTCLIX LANCETS..... 104	ADVOCATE INSULIN SYRINGE..... 121, 122	AIMOVIG..... 149
ACCUTANE.....76	ADVOCATE LANCETS.....104	AIMSCO TWIST LANCETS 32G..... 104
ACCUTREND GLUCOSE..... 82	ADVOCATE LANCETS 30G.....104	AIMSCO TWIST LANCETS 33G..... 104
ACEBUTOLOL HCL.....57	ADVOCATE LANCING DEVICE..... 104	AIRAVITE..... 99
ACETAMINOPHEN-CODEINE..... 15	ADVOCATE RAPID-SAFE LANCING..... 104	ALA-CORT..... 79
ACETAMINOPHEN-CODEINE #2..... 15	ADVOCATE REDI-CODE.....82	ALBUTEROL SULFATE..... 24
ACETAMINOPHEN-CODEINE #3..... 15	ADVOCATE REDI-CODE+ TEST..... 82	ALCOH-GLOVE CONTOURED WIPE.....102
ACETAMINOPHEN-CODEINE #4..... 15	ADVOCATE SAFETY LANCETS..... 104	ALCOHOL PADS..... 102
ACETAZOLAMIDE..... 91	ADVOCATE SAFETY LANCETS 26G..... 104	ALCOHOL PREP.....102
ACETAZOLAMIDE ER..... 91	ADVOCATE TEST..... 82	ALCOHOL SWABS..... 102
ACETAZOLAMIDE SODIUM. 91	AEROCHAMBER MINI CHAMBER..... 148	ALECENSA.....46
ACITRETIN..... 78	AEROCHAMBER MV..... 148	ALENDRONATE SODIUM.....92
ACTI-LANCE 28G.....104	AEROCHAMBER PLUS FLO-VU..... 148	ALFERON N.....47
	AEROCHAMBER PLUS FLO-VU LARGE..... 148	ALIMTA.....45
		ALLERGY SYRINGE..... 122

ALLOPURINOL.....	97	AQUALANCE LANCETS		ASSURE II CHECK.....	82
ALMOTRIPTAN MALATE....	149	30G.....	104	ASSURE LANCE LANCETS	105
ALORA.....	94	ARANELLE.....	71	ASSURE LANCE LANCETS	
ALPRAZOLAM.....	22	ARANESP (ALBUMIN		21G.....	105
ALPRAZOLAM ER.....	22	FREE).....	98, 99	ASSURE LANCE PLUS	
ALPRAZOLAM INTENSOL..	22	ARIPRAZOLE.....	52, 53	SAFETY 25G.....	105
ALPRAZOLAM XR.....	22	ARMOUR THYROID.....	172	ASSURE LANCE PLUS	
ALTABAX.....	77	ASHLYNA.....	70	SAFETY 30G.....	105
ALTACAINE.....	163	ASILNASALRMS.....	90	ASSURE LANCE SAFETY	
ALTAVERA.....	62	ASMANEX (120 METERED		LANCET 28G.....	105
AMABELZ.....	94	DOSES).....	25	ASSURE PLATINUM.....	82
AMANTADINE HCL.....	50	ASMANEX (14 METERED		ASSURE PRISM MULTI	
AMBRISENTAN.....	60	DOSES).....	25	TEST.....	82
AMETHIA.....	69	ASMANEX (30 METERED		ASSURE PRO TEST.....	83
AMETHYST.....	69	DOSES).....	26	ATABEX EC.....	156
AMILORIDE HCL.....	91	ASMANEX (60 METERED		ATABEX OB.....	156
AMILORIDE-		DOSES).....	26	ATAZANAVIR SULFATE.....	54
HYDROCHLOROTHIAZIDE... 91		ASMANEX (7 METERED		ATENOLOL.....	57
AMIODARONE HCL.....	23	DOSES).....	26	ATENOLOL-	
AMITIZA.....	96	ASMANEX HFA.....	26	CHLORTHALIDONE.....	42
AMITRIPTYLINE HCL.....	31	ASPIRIN 81.....	12	ATGAM.....	152
AMLODIPINE BESY-		ASPIRIN ADULT LOW DOSE..	12	ATOMOXETINE HCL.....	8
BENZAEPRIIL HCL.....	40	ASPIRIN ADULT LOW		ATORVASTATIN CALCIUM..	39
AMLODIPINE BESYLATE.....	58	STRENGTH.....	12	ATOVAQUONE-	
AMLODIPINE-		ASPIRIN CHILDRENS.....	13	PROGUANIL HCL.....	44
ATORVASTATIN.....	59	ASPIRIN EC.....	13	ATROPINE SULFATE....	162, 174
AMNESTEEM.....	76	ASPIRIN EC ADULT LOW		ATROVENT HFA.....	25
AMOXICILL-CLARITHRO-		STRENGTH.....	13	AUBRA.....	62
LANSOPRAZ.....	175	ASPIRIN EC LOW DOSE.....	13	AUBRA EQ.....	62
AMOXICILLIN.....	165, 166	ASPIRIN EC LOW		AURORA LANCET SUPER	
AMOXICILLIN-POT		STRENGTH.....	13	THIN 30G.....	105
CLAVULANATE.....	166	ASPIRIN LOW DOSE.....	13	AURORA LANCET THIN 23G	
AMOXICILLIN-POT		ASPIRIN LOW STRENGTH....	13	.....	105
CLAVULANATE ER.....	166	ASPIRIN-DIPYRIDAMOLE		AURORA PEN NEEDLES.....	122
AMPHETAMINE-		ER.....	98	AURORA UNIFINE PENTIPS	122
DEXTROAMPHET ER.....	8	ASSURE 3 TEST.....	82	AUROVELA 1.5/30.....	62
AMPHETAMINE-		ASSURE 4 TEST.....	82	AUROVELA 1/20.....	62
DEXTROAMPHETAMINE.....	8	ASSURE COMFORT		AUROVELA 24 FE.....	62
AMPICILLIN.....	166	LANCETS 28G.....	104	AUROVELA FE 1.5/30.....	62
AMPICILLIN SODIUM.....	166	ASSURE HAEMOLANCE		AUROVELA FE 1/20.....	62
ANAGRELIDE HCL.....	98	PLUS HIGH.....	104	AUTO-LANCET.....	105
ANASTROZOLE.....	48	ASSURE HAEMOLANCE		AUTO-LANCET MINI.....	105
ANORO ELLIPTA.....	23	PLUS LOW.....	104	AUTOLET II CLINISAFE....	105
APAP-CAFF-		ASSURE HAEMOLANCE		AUTOLET LANCING	
DIHYDROCODEINE.....	16	PLUS MICRO.....	104	DEVICE.....	105
APIDRA.....	33	ASSURE HAEMOLANCE		AUTOLET LITE	
APIDRA SOLOSTAR.....	33	PLUS NORMAL.....	104	CLINISAFE.....	105
APLISOL.....	81	ASSURE HAEMOLANCE		AUTOLET LITE STARTER	
APOKYN.....	51	PLUS PED.....	104	PACK.....	105
APO-VARENICLINE.....	168	ASSURE ID SAFETY PEN		AUTOLET MINI.....	105
APRI.....	62	NEEDLES.....	122	AUTOLET PLATFORMS....	105
APTIVUS.....	54	ASSURE II.....	82	AUTOLET PLUS.....	105

AVIANE.....	62	BD PEN NEEDLE MICRO		BISOPROLOL-	
AVIDOXY	172	U/F	123	HYDROCHLOROTHIAZIDE...	42
AVONEX PEN.....	167	BD PEN NEEDLE MINI U/F	123	BLEOMYCIN SULFATE.....	47
AVONEX PREFILLED.....	167	BD PEN NEEDLE NANO		BLISOVI 24 FE.....	63
AYUNA.....	63	2ND GEN.....	123	BLISOVI FE 1.5/30.....	63
AZACITIDINE.....	45	BD PEN NEEDLE NANO		BLISOVI FE 1/20.....	63
AZASAN.....	152	U/F	123	BLULINK GLUCOSE TEST..	83
AZATHIOPRINE.....	152	BD PEN NEEDLE		BOOSTRIX.....	173
AZELAIC ACID.....	81	ORIGINAL U/F.....	123	BOSENTAN.....	60
AZELASTINE HCL.....	160, 162	BD PEN NEEDLE SHORT		BREO ELLIPTA.....	23
AZELEX.....	76	U/F	123	BRIMONIDINE TARTRATE..	164
AZITHROMYCIN.....	101	BD SAFETYGLIDE		BROMOCRIPTINE	
AZURETTE.....	61	INSULIN SYRINGE.....	124	MESYLATE.....	50
BAC.....	12	BD SAFETY-LOK INSULIN		BUDESONIDE.....	26, 73
BACITRACIN.....	162	SYRINGE.....	124	BUDESONIDE-	
BACITRACIN-POLYMYXIN		BD SWAB SINGLE USE		FORMOTEROL FUMARATE..	23
B.....	163	REGULAR.....	102	BUMETANIDE.....	91
BACLOFEN.....	159	BD SWABS SINGLE USE		BUPRENORPHINE.....	20
BALSALAZIDE DISODIUM...	96	BUTTERFLY.....	102	BUPRENORPHINE HCL.....	20
BALZIVA.....	63	BD SYRINGE/NEEDLE.....	124	BUPRENORPHINE HCL-	
BAQSIMI ONE PACK.....	32	BD TB SYRINGE.....	124	NALOXONE HCL.....	20
BAQSIMI TWO PACK.....	32	BD VEO INSULIN SYR U/F		BUPROPION HCL.....	30
BASAGLAR KWIKPEN.....	33	1/2UNIT.....	124	BUPROPION HCL ER	
BAYER ASPIRIN EC LOW		BD VEO INSULIN SYRINGE		(SMOKING DET).....	168
DOSE.....	13	U/F	124	BUPROPION HCL ER (SR).....	30
BAYER LOW DOSE.....	13	BECONASE AQ.....	160	BUPROPION HCL ER (XL).....	30
BD AUTOSHIELD.....	122	BELBUCA.....	20	BUSPIRONE HCL.....	22
BD AUTOSHIELD DUO.....	122	BELRAPZO.....	44	BUSULFAN.....	44
BD HYPODERMIC		BENAZEPRIL HCL.....	40	BUTALBITAL-APAP-CAFF-	
NEEDLE.....	122	BENAZEPRIL-		COD.....	15
BD INSULIN SYR		HYDROCHLOROTHIAZIDE... 40		BUTALBITAL-APAP-	
ULTRAFINE II.....	122	BENDEKA.....	44	CAFFEINE.....	12
BD INSULIN SYRINGE	122, 123	BENZONATATE.....	74	BUTALBITAL-ASA-CAFF-	
BD INSULIN SYRINGE		BENZOYL PEROXIDE-		CODEINE.....	16
HALF-UNIT.....	122	ERYTHROMYCIN.....	76	BUTALBITAL-ASPIRIN-	
BD INSULIN SYRINGE		BENZTROPINE MESYLATE... 50		CAFFEINE.....	12
MICROFINE.....	122	BETAMETHASONE		BUTORPHANOL TARTRATE..	20
BD INSULIN SYRINGE U/F	123	DIPROPIONATE.....	79	BYDUREON BCISE.....	35
BD INSULIN SYRINGE U/F		BETAMETHASONE		BYETTA 10 MCG PEN.....	35
1/2UNIT.....	122	DIPROPIONATE AUG.....	79	BYETTA 5 MCG PEN.....	35
BD INSULIN SYRINGE U-		BETAMETHASONE		CABERGOLINE.....	92
500.....	123	VALERATE.....	79	CADEAU DHA.....	159
BD INSULIN SYRINGE		BETAXOLOL HCL.....	57	CALCIPOTRIENE.....	78
ULTRAFINE.....	123	BETHANECHOL CHLORIDE	176	CALCITONIN (SALMON).....	92
BD INTEGRA SYRINGE.....	123	BETOPTIC-S.....	161	CALCITRIOL.....	93
BD LANCET ULTRAFINE		BEXAROTENE.....	50	CAMILA.....	71
30G.....	105	BEXSERO.....	176	CAMRESE.....	70
BD LANCET ULTRAFINE		BICALUTAMIDE.....	45	CAMRESE LO.....	70
33G.....	105	BIKTARVY.....	53	CANDESARTAN CILEXETIL..	41
BD LUER-LOK SYRINGE... 123		BIOSCANNER GLUCOSE		CANDESARTAN	
BD MICROTAINER		TEST.....	83	CILEXETIL-HCTZ.....	41
LANCETS.....	105	BISOPROLOL FUMARATE....	57	CANDIN.....	81

CAPCOF.....	75	CARETOUCH TWIST		CLARITHROMYCIN ER.....	101
CAPECITABINE.....	45	LANCETS 33G	106	CLASSIC PRENATAL.....	156
CAPTOPRIL.....	41	CARISOPRODOL-ASPIRIN-		CLEANLET LANCETS 28G	106
CARBAMAZEPINE.....	27	CODEINE.....	160	CLEVER CHEK AUTO-	
CARBAMAZEPINE ER.....	27	CARMUSTINE.....	49	CODE TEST	83
CARBIDOPA-LEVODOPA.....	50	CARTEOLOL HCL.....	161	CLEVER CHEK AUTO-	
CARBIDOPA-LEVODOPA ER	50	CARTIA XT	58	CODE VOICE	83
CARBIDOPA-LEVODOPA-		CARVEDILOL.....	57	CLEVER CHEK LANCETS	106
ENTACAPONE.....	51	CAZANT	71	CLEVER CHEK TEST	83
CARDIOCOM LANCING		CEFACLOR.....	61	CLEVER CHOICE AUTO-	
DEVICE	105	CEFACLOR ER.....	61	CODE TEST	83
CAREFINE PEN NEEDLES	124	CEFADROXIL.....	60	CLEVER CHOICE	
CAREONE ADVANCED		CEFDINIR.....	61	COMFORT EZ	125
LANCING DEV.....	105	CEFPODOXIME PROXETIL...	61	CLEVER CHOICE	
CAREONE BLOOD		CEFPROZIL.....	61	LANCETS 21G	106
GLUCOSE TEST	83	CEFUROXIME AXETIL.....	61	CLEVER CHOICE	
CAREONE INSULIN		CEFUROXIME SODIUM.....	61	LANCETS 23G	106
SYRINGE.....	124	CELECOXIB.....	10	CLEVER CHOICE	
CAREONE LANCET SUPER		CEPHALEXIN.....	60, 61	LANCETS 28G	106
THIN 30G	105	CEVIMELINE HCL.....	153	CLEVER CHOICE MICRO	
CAREONE LANCET THIN		CHARLOTTE 24 FE	63	TEST	83
23G.....	105	CHATEAL	63	CLEVER CHOICE NO	
CAREONE UNIFINE		CHATEAL EQ	63	CODING	83
PENTIPS.....	125	CHILDRENS ASPIRIN.....	13	CLEVER CHOICE TALK	
CAREONE UNIFINE		CHIRHOSTIM	81	SYSTEM	83
PENTIPS PLUS.....	125	CHLORDIAZEPOXIDE HCL... 22		CLICKFINE PEN NEEDLES	
CAREPOINT SAFETY1ST		CHLORDIAZEPOXIDE-		.....	125
SYR/NEEDLE	125	CLIDINIUM.....	173	CLICKFINE PEN NEEDLES	
CARESENS LANCETS	105	CHLORPROMAZINE HCL.....	52	.....	125, 126
CARESENS N GLUCOSE		CHLORTHALIDONE.....	91	CLINDACIN ETZ	76
TEST	83	CHLORZOXAZONE.....	159	CLINDACIN-P	76
CARETOUCH ALCOHOL		CHOLESTYRAMINE.....	39	CLINDAMYCIN HCL.....	43
PREP	102	CHOLESTYRAMINE LIGHT... 39		CLINDAMYCIN PALMITATE	
CARETOUCH INSULIN		CICLODAN	77	HCL.....	43
SYRINGE.....	125	CICLOPIROX.....	77	CLINDAMYCIN PHOS-	
CARETOUCH		CICLOPIROX OLAMINE.....	77	BENZOYL PEROX	76
LANCING/EJECTOR	105	CILOSTAZOL.....	98	CLINDAMYCIN	
CARETOUCH LUER LOCK	125	CILOXAN	162	PHOSPHATE.....	76, 178
CARETOUCH LUER LOCK		CIMETIDINE.....	174	CLINDAMYCIN	
SYR/NEEDLE	125	CIMETIDINE HCL.....	174	PHOSPHATE IN D5W.....	43
CARETOUCH PEN		CIMZIA	97	CLOBETASOL PROP	
NEEDLES	125	CIMZIA PREFILLED	97	EMOLLIENT BASE.....	79
CARETOUCH SAFETY		CIMZIA STARTER KIT	97	CLOBETASOL PROPIONATE	79
LANCETS	105	CINRYZE	98	CLOBETASOL PROPIONATE	
CARETOUCH SAFETY		CIPROFLOXACIN HCL... 95, 162		E.....	79
LANCETS 26G	105	CIPROFLOXACIN-		CLOFARABINE.....	45
CARETOUCH TEST	83	DEXAMETHASONE.....	165	CLOMIPRAMINE HCL.....	31
CARETOUCH TWIST		CITALOPRAM		CLONAZEPAM.....	27
LANCETS 28G	106	HYDROBROMIDE.....	30	CLONIDINE.....	42
CARETOUCH TWIST		CLADRIBINE.....	45	CLONIDINE HCL.....	41
LANCETS 30G	106	CLARAVIS	76	CLOPIDOGREL BISULFATE.. 98	
		CLARITHROMYCIN.....	101		

CLORAZEPATE		CYCLOSPORINE MODIFIED	151
DIPOTASSIUM	22	CYPROHEPTADINE HCL	38
CLOTTRIMAZOLE	153	CYRED	63
CLOTTRIMAZOLE-		CYRED EQ	63
BETAMETHASONE	77	CYTARABINE	45
CLOZAPINE	52	CYTARABINE (PF)	45
C-NATE DHA	156	DACARBAZINE	48
COAGUCHEK LANCETS	106	DAILY MULTIPLE	
CODEINE SULFATE	16, 17	VITAMINS	153
CODITUSSIN AC	74	DAILY VALUE	
COLCHICINE	97	MULTIVITAMIN	153
COLCHICINE-PROBENECID	97	DAILY VITAMIN	154
COLESEVELAM HCL	39	DAILY VITAMIN FORMULA	
COLESTIPOL HCL	39		154
COMBIPATCH	94	DAILY VITAMINS	154
COMBIVENT RESPIMAT	23	DAILY VITE	154
COMFORT ASSIST		DAILY VITES	154
INSULIN SYRINGE	126	DAILY-VITAMIN	154
COMFORT ASSURED		DAILY-VITE	154
LANCETS 28G	106	DAILY-VITE	
COMFORT ASSURED		MULTIVITAMIN	154
LANCETS 33G	106	DALFAMPRIDINE ER	168
COMFORT EZ INSULIN		DALIRESP	25
SYRINGE	126	DANAZOL	20
COMFORT EZ MICRO PEN		DANTROLENE SODIUM	159
NEEDLES	126	DAPTOMYCIN	43
COMFORT EZ PEN		DARIFENACIN	
NEEDLES	126	HYDROBROMIDE ER	175
COMFORT EZ SHORT PEN		DASSETTA 1/35	63
NEEDLES	126	DASSETTA 7/7/7	71
COMFORT LANCETS	106	DAYSEE	70
COMFORT TOUCH		D-CARE BLOOD GLUCOSE	83
ALCOHOL PREP	102	DEBLITANE	71
COMFORT TOUCH		DECITABINE	45
INSULIN PEN NEED	127	DEFERASIROX	37
COMFORT TOUCH		DELYLA	63
LANCETS 31G	106	DENTA 5000 PLUS	153
COMFORT TOUCH PLUS		DESIPRAMINE HCL	31
LANCETS 30G	106	DESLORATADINE	38
COMPLERA	53	DESMOPRESSIN ACE	
COMPLETE NATAL DHA	158	SPRAY REFRIG	94
COMPLETENATE	156	DESMOPRESSIN ACETATE	94
CO-NATAL FA	156	DESMOPRESSIN ACETATE	
CONCEPT DHA	156	SPRAY	94
CONCEPT OB	156	DESONIDE	79
CONSTULOSE	101	DEXAMETHASONE	73
CONTOUR MONITOR	106	DEXAMETHASONE	
CONTOUR NEXT LINK	106	INTENSOL	73
CONTOUR NEXT		DEXAMETHASONE	
MONITOR	106	SODIUM PHOSPHATE	164
CONTOUR NEXT ONE	106	DEXCOM G6 RECEIVER	106
CONTOUR NEXT TEST	83	DEXCOM G6 SENSOR	106
CONTOUR TEST	83		
COOL BLOOD GLUCOSE			
TEST STRIPS	83		
COSENTYX (300 MG DOSE)	78		
COSENTYX SENSOREADY			
(300 MG)	78		
CREON	90		
CRIXIVAN	54		
CROMOLYN SODIUM	96, 162		
CRYSELLE-28	63		
CURITY ALCOHOL PREPS	102		
CURITY ALCOHOL			
SWABS	102		
CVS ADVANCED			
GLUCOSE TEST	83		
CVS ALCOHOL PREP PADS	102		
CVS ASPIRIN ADULT LOW			
DOSE	13		
CVS ASPIRIN ADULT LOW			
STRENGTH	13		
CVS ASPIRIN EC	13		
CVS ASPIRIN LOW DOSE	13		
CVS ASPIRIN LOW			
STRENGTH	13		
CVS GLUCOSE METER			
TEST STRIPS	83		
CVS LANCETS 21G	106		
CVS LANCETS MICRO THIN			
33G	106		
CVS LANCETS ORIGINAL	106		
CVS LANCETS THIN 26G	106		
CVS LANCETS ULTRA THIN			
30G	106		
CVS LANCETS ULTRA-THIN			
30G	106		
CVS LANCING DEVICE	106		
CVS NASAL			
DECONGESTANT	160		
CVS NICOTINE	168, 169		
CVS NICOTINE			
POLACRILEX	169		
CVS PRENATAL	156		
CVS PREP	102		
CVS ULTRA THIN LANCETS			
	106		
CVS WOMENS			
PRENATAL+DHA	159		
CYANOCOBALAMIN	98		
CYCLAFEM 1/35	63		
CYCLAFEM 7/7/7	71		
CYCLOBENZAPRINE HCL	159		
CYCLOSPORINE	151		

DEXCOM G6 TRANSMITTER	106	DIMETHYL FUMARATE STARTER PACK	168	DRUG MART UNILET LANCETS 28G	107
DEXILANT	174	DIPHENOXYLATE-ATROPINE	37	DRUG MART UNILET LANCETS 30G	107
DEXMETHYLPHENIDATE HCL	8	DIPYRIDAMOLE	98	DRUG MART UNILET LANCETS 33G	107
DEXMETHYLPHENIDATE HCL ER	8	DISOPYRAMIDE PHOSPHATE	23	DULERA	23, 24
DEXRAZOXANE HCL	48	DISULFIRAM	167	DULOXETINE HCL	31
DEXTROAMPHETAMINE SULFATE	8	DIVALPROEX SODIUM	29	DUO-CARE TEST	84
DEXTROAMPHETAMINE SULFATE ER	8	DIVALPROEX SODIUM ER ...	29	DUPIXENT	78
DIALYSIS SAFETY SYRINGE/NEEDLE	127	DOCETAXEL	49	E.E.S. 400	101
DIASITX	83	DOLISHALE	69	EASIVENT	149
DIATHRIVE BLOOD GLUCOSE TEST	83	DONEPEZIL HCL	167	EASIVENT MASK LARGE ..	149
DIATHRIVE GLUCOSE TEST	84	DORZOLAMIDE HCL	163	EASIVENT MASK MEDIUM	149
DIATHRIVE LANCET ULTRA THIN 30	106	DORZOLAMIDE HCL-TIMOLOL MAL	161	EASIVENT MASK SMALL ..	149
DIATHRIVE LANCETS	107	DOTTI	95	EASY COMFORT ALCOHOL PADS	102
DIATHRIVE LANCING DEVICE	107	DOXAZOSIN MESYLATE	42	EASY COMFORT INSULIN SYRINGE	128
DIATHRIVE PEN NEEDLE ..	127	DOXEPIN HCL	31	EASY COMFORT LANCETS ..	107
DIATHRIVE+ GLUCOSE MONITOR	107	DOXORUBICIN HCL LIPOSOMAL	47	EASY COMFORT LANCETS TWIST TOP	107
DIATHRIVE+ GLUCOSE TEST	84	DOXYCYCLINE HYCLATE ..	172	EASY COMFORT PEN NEEDLES	128
DIATRUE PLUS TEST	84	DOXYCYCLINE MONOHYDRATE	172	EASY GLIDE PEN NEEDLES ..	128
DIAZEPAM	22, 27	DOXYLAMINE-PYRIDOXINE	37	EASY MINI EJECT LANCING DEVICE	107
DICLOFENAC POTASSIUM ... 11		DROPLET GENTEEL LANCING DEVICE	107	EASY MINI LANCING DEVICE	107
DICLOFENAC SODIUM	11, 77, 164	DROPLET INSULIN SYRINGE	127, 128	EASY PLUS II GLUCOSE TEST	84
DICLOFENAC SODIUM ER ... 11		DROPLET LANCETS ULTRA THIN 30G	107	EASY STEP TEST	84
DICLOFONO	77	DROPLET LANCING DEVICE	107	EASY TALK BLOOD GLUCOSE TEST	84
DICLOXACILLIN SODIUM ...166		DROPLET PEN NEEDLES ..	128	EASY TALK PLUS II TEST STRIPS	84
DICYCLOMINE HCL	173	DROPLET PERSONAL LANCETS 30G	107	EASY TOUCH ALCOHOL PREP MEDIUM	102
DIFLUNISAL	13	DROPSAFE SAFETY PEN NEEDLES	128	EASY TOUCH ALLERGY SYRINGE	128
DIGITEK	59	DROSPIREN-ETH ESTRAD-LEVOMEFOL	63	EASY TOUCH FLIPLOCK INSULIN SY	129
DIGOX	59	DRUG MART LANCETS THIN 26G	107	EASY TOUCH FLIPLOCK SAFETY SYR	129
DIGOXIN	59	DRUG MART LANCING DEVICE	107	EASY TOUCH FLURINGE ..	129
DIHYDROERGOTAMINE MESYLATE	149	DRUG MART ON-THE-GO LANCET 30G	107	EASY TOUCH FLURINGE FLIPLOCK	129
DILANTIN	29	DRUG MART UNIFINE PENTIPS	128	EASY TOUCH FLURINGE SHEATHLOCK	129
DILTIAZEM HCL	58	DRUG MART UNIFINE PENTIPS PLUS	128	EASY TOUCH HEALTHPRO GLUCOSE	84
DILTIAZEM HCL ER	58				
DILTIAZEM HCL ER COATED BEADS	58				
DILT-XR	58				
DIMETHYL FUMARATE	168				

EASY TOUCH INSULIN SAFETY SYR.....	129	EASYMAX 15 TEST.....	84	EMTRICITABINE.....	55
EASY TOUCH INSULIN SYRINGE.....	129	EASYMAX TEST.....	84	EMTRICITABINE-TENOFOVIR DF.....	53
EASY TOUCH LANCETS 21G.....	107	EASYPOINT NEEDLE/SYRINGE.....	130	EMTRIVA.....	55
EASY TOUCH LANCETS 23G.....	107	EASYPRO BLOOD GLUCOSE TEST.....	84	EMVERM.....	21
EASY TOUCH LANCETS 26G.....	107	EASYPRO PLUS.....	84	ENALAPRIL MALEATE.....	41
EASY TOUCH LANCETS 28G.....	107	EC-NAPROXEN.....	11	ENALAPRIL-HYDROCHLOROTHIAZIDE...	40
EASY TOUCH LANCETS 28G/TWIST.....	107	ECONAZOLE NITRATE.....	80	ENBREL.....	12
EASY TOUCH LANCETS 30G.....	107	ECONTRA EZ.....	69	ENBREL SURECLICK.....	12
EASY TOUCH LANCETS 30G/TWIST.....	107	ECONTRA ONE-STEP.....	69	ENDOCET.....	19, 20
EASY TOUCH LANCETS 32G.....	107	ECOTRIN LOW STRENGTH.....	13	ENGERIX-B.....	176
EASY TOUCH LANCETS 32G/TWIST.....	107	EDURANT.....	54	ENOXAPARIN SODIUM.....	27
EASY TOUCH LANCETS 33G/TWIST.....	108	EFAVIRENZ.....	55	ENPRESSE-28.....	71
EASY TOUCH LANCING DEVICE.....	108	EFAVIRENZ-EMTRICITAB-TENOFOVIR.....	53	ENSKYCE.....	64
EASY TOUCH PEN NEEDLES.....	129, 130	EFAVIRENZ-LAMIVUDINE-TENOFOVIR.....	53	ENTACAPONE.....	51
EASY TOUCH SAFETY LANCETS 21G.....	108	ELEMENT COMPACT TEST..	84	ENTRESTO.....	59
EASY TOUCH SAFETY LANCETS 23G.....	108	ELEMENT TEST.....	84	ENULOSE.....	96
EASY TOUCH SAFETY LANCETS 26G.....	108	ELETRIPTAN HYDROBROMIDE.....	149	EPHEDRINE SULFATE.....	178
EASY TOUCH SAFETY LANCETS 28G.....	108	ELIGARD.....	49	EPINEPHRINE.....	178
EASY TOUCH SAFETY PEN NEEDLES.....	130	ELINEST.....	63	EPIPEN JR 2-PAK.....	178
EASY TOUCH SAFETY SYRINGE.....	130	ELIQUIS.....	27	EPITOL.....	28
EASY TOUCH SHEATHLOCK SYRINGE...	130	ELIQUIS DVT/PE STARTER PACK.....	27	EQ ASPIRIN ADULT LOW DOSE.....	13
EASY TOUCH TB FLIPLOCK SYRINGE.....	130	ELITE-OB.....	156	EQ ASPIRIN LOW DOSE.....	13
EASY TOUCH TB SHEATHLOCK SYR.....	130	ELLA.....	69	EQ BLOOD GLUCOSE TEST..	85
EASY TOUCH TEST.....	84	ELMIRON.....	97	EQ NICOTINE.....	169
EASY TRAK BLOOD GLUCOSE TEST.....	84	ELURYNG.....	68	EQ NICOTINE POLACRILEX.....	169
EASY TRAK II GLUCOSE TEST.....	84	EMBRACE BLOOD GLUCOSE TEST.....	84	EQ NICOTINE STEP 3.....	169
EASYGLUCO.....	84	EMBRACE EVO BLOOD GLUCOSE TEST.....	84	EQL ALCOHOL SWABS.....	102
		EMBRACE LANCETS ULTRA THIN 30G.....	108	EQL ASPIRIN LOW DOSE.....	14
		EMBRACE LANCING DEVICE/EJECTOR.....	108	EQL COLOR LANCETS 21G.....	108
		EMBRACE PRESSURE ACTIVATED 21G.....	108	EQL COLOR LANCETS MICRO 33G.....	108
		EMBRACE PRESSURE ACTIVATED 28G.....	108	EQL INSULIN SYRINGE.....	130
		EMBRACE PRO GLUCOSE TEST.....	84	EQL NASAL DECONGESTANT.....	160
		EMBRACE TALK GLUCOSE TEST.....	85	EQL NICOTINE POLACRILEX.....	169
		EMCYT.....	48	EQL PRENATAL FORMULA.....	156
		EMOQUETTE.....	63	EQL SUPER THIN LANCETS 30G.....	108
		EMPLICITI.....	46	EQL THIN LANCETS 26G.....	108
		EMSAM.....	30	ERGOCALCIFEROL.....	178
				ERGOLOID MESYLATES.....	168
				ERLOTINIB HCL.....	46
				ERRIN.....	71
				ERY.....	76
				ERYTHROCIN STEARATE.....	101
				ERYTHROMYCIN.....	76, 162
				ERYTHROMYCIN BASE.....	101

ERYTHROMYCIN		FLUOROURACIL.....	77, 78
ETHYLSUCCINATE.....	102	FLUOXETINE HCL.....	30
ESCITALOPRAM OXALATE..	30	FLUPHENAZINE HCL.....	52
ESTARYLLA	64	FLURAZEPAM HCL.....	100
ESTAZOLAM.....	100	FLURBIPROFEN.....	11
ESTRADIOL.....	95, 178	FLURBIPROFEN SODIUM...	164
ESTRING	178	FLUTAMIDE.....	45
ESTROFACTORS	154	FLUTICASONE	
ESTROGEL	95	PROPIONATE.....	80, 160
ESZOPICLONE.....	100	FLUVOXAMINE MALEATE... 30	
ETHAMBUTOL HCL.....	44	FLUZONE HIGH-DOSE	
ETHOSUXIMIDE.....	29	QUADRIVALENT	177
ETODOLAC.....	11	FLUZONE	
ETODOLAC ER.....	11	QUADRIVALENT	177
ETOPOPHOS	49	FOLDING PADDLE	
ETOPOSIDE.....	49	WALKER.....	121
ETRAVIRINE.....	55	FOLIC ACID.....	99
EUTHYROX	172	FOLIVANE-OB	156
EVEROLIMUS.....	47, 152	FOLOTYN	45
EVOLUTION AUTOCODE ...	85	FORA 6 CONNECT	85
EVOTAZ	53	FORA BLOOD GLUCOSE	
EXACTECH R-S-G TEST	85	TEST	85
EXACTECH TEST	85	FORA D15G BLOOD	
EXEL COMFORT POINT		GLUCOSE TEST	85
INSULIN SYR	131	FORA D20 BLOOD	
EXEL COMFORT POINT		GLUCOSE TEST	85
PEN NEEDLE	131	FORA D40/G31 BLOOD	
EXEMESTANE.....	48	GLUCOSE	85
E-Z JECT LANCET MICRO-		FORA G20 BLOOD	
THIN 33G	108	GLUCOSE TEST	85
E-Z JECT LANCET SUPER		FORA G30/PREM V10	
THIN 30G	108	GLUCOSE TEST	85
E-Z JECT LANCETS	108	FORA GD20 TEST	85
E-Z JECT LANCETS 21G	108	FORA GD50 BLOOD	
E-Z JECT LANCETS THIN		GLUCOSE TEST	85
26G	108	FORA GTEL BLOOD	
EZETIMIBE.....	40	GLUCOSE TEST	85
EZETIMIBE-SIMVASTATIN... 39		FORA LANCETS	109
EZ-LETS LANCETS 21G	108	FORA LANCING DEVICE ... 109	
EZ-LETS LANCETS 26G	108	FORA TN'G ADVANCE	
EZ-LETS LANCETS 28G	108	PRO	85
EZ-LETS LANCETS 30G	108	FORA TN'G/TN'G VOICE	85
FALMINA	64	FORA V10 BLOOD	
FAMCICLOVIR.....	56	GLUCOSE TEST	85
FAMOTIDINE.....	174	FORA V12 BLOOD	
FARXIGA	36	GLUCOSE TEST	85
FAYOSIM	70	FORA V20 BLOOD	
FELODIPINE ER.....	58	GLUCOSE TEST	85
FEMRING	178	FORA V30A BLOOD	
FEMYNOR	64	GLUCOSE TEST	86
FENOFIBRATE.....	39	FORACARE GD40 TEST	86
FENOFIBRATE			
MICRONIZED.....	39		
FENSOLVI (6 MONTH)	93		
FENTANYL.....	17		
FENTANYL CITRATE.....	17		
FERRIPROX	37		
FIASP	33		
FIASP FLEXTOUCH	33		
FIFTY50 ALCOHOL PREP	102		
FIFTY50 GLUCOSE TEST			
2.0	85		
FIFTY50 PEN NEEDLES	131		
FIFTY50 SAFETY SEAL			
LANCETS	108		
FIFTY50 SUPERIOR			
COMFORT SYR	131		
FIFTY50 UNILET			
LANCETS 33G	108		
FINASTERIDE.....	97		
FINE 30	108		
FINGERSTIX LANCETS	108		
FIRST-OMEPRAZOLE	174		
FLAVOXATE HCL.....	176		
FLECAINIDE ACETATE.....	23		
FLOVENT HFA	26		
FLOXURIDINE.....	45		
FLUARIX QUADRIVALENT			
.....	176		
FLUBLOK			
QUADRIVALENT	177		
FLUCELVAX			
QUADRIVALENT	177		
FLUCONAZOLE.....	38		
FLUDARABINE			
PHOSPHATE.....	45		
FLUDROCORTISONE			
ACETATE.....	74		
FLULAVAL			
QUADRIVALENT	177		
FLUMIST QUADRIVALENT			
.....	177		
FLUNISOLIDE.....	160		
FLUOCINOLONE			
ACETONIDE.....	79		
FLUOCINOLONE			
ACETONIDE BODY.....	79		
FLUOCINOLONE			
ACETONIDE SCALP.....	79		
FLUOCINONIDE.....	80		
FLUOCINONIDE			
EMULSIFIED BASE.....	80		
FLUOROMETHOLONE.....	164		

FORACARE PREMIUM V10 TEST	86	GALANTAMINE HYDROBROMIDE ER	167	GENTLE-LET PLATFORMS	110
FORACARE TEST N GO TEST	86	GANCICLOVIR SODIUM	56	GENULTIMATE TEST	86
FORTISCARE G1 TEST STRIP	86	GARDASIL 9	177	GENVOYA	53
FORTISCARE TEST	86	GATIFLOXACIN	162	GHT TEST	86
FOSAMPRENAVIR CALCIUM	54	GAVILYTE-G	100	GILENYA	171
FOSINOPRIL SODIUM	41	GAVILYTE-N WITH FLAVOR PACK	100	GLATOPA	168
FOSINOPRIL SODIUM-HCTZ	40	GE100 BLOOD GLUCOSE TEST	86	GLEOSTINE	49
FOTIVDA	47	GEMCITABINE HCL	45	GLIMEPIRIDE	36
FRAGMIN	27	GEMFIBROZIL	39	GLIPIZIDE	36
FREDS PHARMACY AUTOLET LANCING	109	GEMMILY	64	GLIPIZIDE ER	36
FREDS PHARMACY UNIFINE PENTIP+	131	GENERLAC	96	GLIPIZIDE XL	36
FREDS PHARMACY UNIFINE PENTIPS	131	GENGRAF	151	GLIPIZIDE-METFORMIN HCL	36
FREDS PHARMACY UNILET LANC 28G	109	GENOTROPIN	93	GLOBAL ALCOHOL PREP EASE	102
FREDS PHARMACY UNILET LANC 30G	109	GENOTROPIN MINIQUICK	92	GLOBAL EASE INJECT PEN NEEDLES	131
FREESTYLE INSULINX TEST	86	GENTAK	162	GLOBAL EASY GLIDE INSULIN SYR	131
FREESTYLE LANCETS	109	GENTAMICIN SULFATE	162	GLOBAL EASY GLIDE PEN NEEDLES	132
FREESTYLE LIBRE 14 DAY READER	109	GENTEEL BUTTERFLY TOUCH LANCET	109	GLOBAL INJECT EASE INSULIN SYR	132
FREESTYLE LIBRE 14 DAY SENSOR	109	GENTEEL CONTACT TIPS (BLUE)	109	GLOBAL INJECT EASE LANCETS 28G	110
FREESTYLE LIBRE 2 READER	109	GENTEEL CONTACT TIPS (CLEAR)	109	GLOBAL INJECT EASE LANCETS 30G	110
FREESTYLE LIBRE 2 SENSOR	109	GENTEEL CONTACT TIPS (GREEN)	109	GLOBAL INSULIN SYRINGES	132
FREESTYLE LIBRE READER	109	GENTEEL CONTACT TIPS (ORANGE)	109	GLOBAL LANCING DEVICE	110
FREESTYLE LITE TEST	86	GENTEEL CONTACT TIPS (RAINBOW)	109	GLUCAGON EMERGENCY	32
FREESTYLE PRECISION INS SYR	131	GENTEEL CONTACT TIPS (VIOLET)	109	GLUCO PERFECT 3 TEST	86
FREESTYLE PRECISION NEO TEST	86	GENTEEL CONTACT TIPS (YELLOW)	109	GLUCOCARD 01 SENSOR PLUS	86
FREESTYLE TEST	86	GENTEEL LANCING KIT (BLUE)	109	GLUCOCARD EXPRESSION TEST	86
FREESTYLE UNISTICK II LANCETS	109	GENTEEL NOZZLES	109	GLUCOCARD SHINE TEST	86
FUROSEMIDE	91	GENTEEL PLUS LANCING (BLACK)	109	GLUCOCARD VITAL TEST	86
FUZEON	54	GENTEEL PLUS LANCING (PURPLE)	109	GLUCOCARD X-SENSOR	86
FYAVOLV	94	GENTEEL PLUS LANCING (WHITE)	109	GLUCOCOM LANCETS 28G	110
G TUSSIN AC	74	GENTEEL PLUS LANCING (BLACK)	109	GLUCOCOM LANCETS 30G	110
GABAPENTIN	28	GENTEEL PLUS LANCING (PURPLE)	109	GLUCOCOM LANCETS 33G	110
GALANTAMINE HYDROBROMIDE	167	GENTEEL PLUS LANCING (WHITE)	109	GLUCOCOM TEST	86
		GENTEEL PLUS LANCING DEV(BLUE)	110	GLUCONAVII BLOOD GLUCOSE TEST	86
		GENTEEL PLUS LANCING DEV(PINK)	110	GLUCOPRO INSULIN SYRINGE	132
		GENTLE-LET GP LANCETS	110	GLUCOSE METER TEST	86
		GENTLE-LET LANCETS	110		

GLYBURIDE.....	36	GNP TRUETRACK TEST STRIPS.....	87	HAEMOLANCE PLUS LOW FLOW.....	111
GLYBURIDE MICRONIZED... 36		GNP ULTICARE PEN		HAEMOLANCE PLUS MAX FLOW.....	111
GLYBURIDE-METFORMIN.... 36		NEEDLES.....	132	HAEMOLANCE PLUS PEDIATRIC FLOW.....	111
GLYCOPYRROLATE.....	175	GNP ULTRA COM INSULIN		HAILEY 1.5/30.....	64
GLYDO.....	80	SYRINGE.....	132	HAILEY 24 FE.....	64
GNP ADULT ASPIRIN LOW STRENGTH.....	14	GOJJI BLOOD GLUCOSE TEST.....	87	HAILEY FE 1.5/30.....	64
GNP ALCOHOL SWABS.....	102	GOJJI BLOOD TEST STRIP/LANCETS.....	87	HAILEY FE 1/20.....	64
GNP ASPIRIN.....	14	GOJJI LANCING DEVICE/CLEAR CAP.....	110	HALAVEN.....	49
GNP ASPIRIN LOW DOSE.....	14	GOJJI STERILE LANCETS	110	HALOPERIDOL.....	52
GNP CLICKFINE PEN		GOODSENSE ASPIRIN.....	14	HALOPERIDOL LACTATE....	52
NEEDLES.....	132	GOODSENSE ASPIRIN ADULT LOW ST.....	14	HAVRIX.....	177
GNP EASY TOUCH		GOODSENSE ASPIRIN LOW DOSE.....	14	HEALTH CARE LANCING DEVICE.....	111
GLUCOSE TEST.....	87	GOODSENSE BLOOD GLUCOSE.....	87	HEALTHWISE INSULIN SYR/NEEDLE.....	133
GNP ESSENTIAL ONE DAILY.....	154	GOODSENSE CLICKFINE PEN NEEDLE.....	132	HEALTHWISE MICRON PEN NEEDLES.....	133
GNP INSULIN SYRINGE.....	132	GOODSENSE COLOR LANCETS 33G.....	110	HEALTHWISE MINI PEN NEEDLES.....	133
GNP INSULIN SYRINGES.....	132	GOODSENSE LANCETS 26G UNIV.....	110	HEALTHWISE PEN NEEDLES.....	133
GNP INSULIN SYRINGES 28GX1/2".....	132	GOODSENSE LANCETS 30G UNIV.....	110	HEALTHWISE SHORT PEN NEEDLES.....	133
GNP INSULIN SYRINGES 29GX1/2".....	132	GOODSENSE LANCETS 30G UNIV.....	110	HEALTHWISE UNIFINE PENTIPS.....	133
GNP INSULIN SYRINGES 30GX5/16".....	132	GOODSENSE LANCETS 33G UNIV.....	110	HEALTHY ACCENTS LANCING DEVICE.....	111
GNP INSULIN SYRINGES 31GX5/16".....	132	GOODSENSE LANCING DEVICE.....	110	HEALTHY ACCENTS UNIFINE PENTIP.....	133
GNP LANCETS 21G.....	110	GOODSENSE NICOTINE.....	169	HEALTHY ACCENTS UNILET LANCETS.....	111
GNP LANCETS MICRO THIN 33G.....	110	GOODSENSE PEN NEEDLE PENFINE.....	133	HEALTHY HAIR/SKIN/NAILS.....	154
GNP LANCETS SUPER THIN 30G.....	110	GRASTEK.....	9	HEATHER.....	71
GNP LANCETS THIN 26G....	110	GRISEOFULVIN MICROSIZ	38	H-E-B ASPIRIN.....	14
GNP LANCING SYSTEM DEVICE.....	110	GRISEOFULVIN ULTRAMICROSIZ	38	H-E-B INCONTROL ADV LANCING.....	111
GNP NASAL DECONGESTANT.....	160	GUAIA TUSSIN AC.....	74	H-E-B INCONTROL ALCOHOL.....	102
GNP NICOTINE.....	169	GUAIFENESIN AC.....	74	H-E-B INCONTROL LANCETS 28G.....	111
GNP NICOTINE MINI.....	169	GUAIFENESIN-CODEINE.....	74	H-E-B INCONTROL LANCETS 30G.....	111
GNP NICOTINE POLACRILEX.....	169	GUANFACINE HCL.....	42	H-E-B INCONTROL LANCETS 33G.....	111
GNP PRENATAL.....	156	HABITROL.....	169	H-E-B INCONTROL LANCETS 33G.....	111
GNP STERILE LANCETS 28G.....	110	HAEMOLANCE.....	110	H-E-B INCONTROL PEN NEEDLES.....	133
GNP STERILE LANCETS 30G.....	110	HAEMOLANCE LOW FLOW LANCETS.....	110	H-E-B INCONTROL UNIFINE PENTIP.....	133
GNP STERILE LANCETS 33G.....	110	HAEMOLANCE PLUS.....	110		
GNP TRUE METRIX GLUCOSE STRIPS.....	87	HAEMOLANCE PLUS HIGH FLOW.....	110		
GNP TRUETRACK SMART SYSTEM.....	87				

HEPLISAV-B	177	HW EMBRACE TALK		IN TOUCH LANCING	
HIGH POTENCY		GLUCOSE TEST	87	DEVICE	111
MULTIVITAMIN.....	154	HYCAMTIN	50	IN TOUCH STERILE	
HM ASPIRIN.....	14	HYDRALAZINE HCL.....	42	LANCETS 30G	111
HM ASPIRIN EC LOW DOSE..	14	HYDROCHLOROTHIAZIDE		INCASSIA	71
HM NASAL		.....	91, 92	INCRUSE ELLIPTA	25
DECONGESTANT.....	160	HYDROCOD POLST-CPM		INDAPAMIDE.....	92
HM NICOTINE.....	170	POLST ER.....	75	INDOMETHACIN.....	11
HM NICOTINE POLACRILEX		HYDROCODONE		INDOMETHACIN ER.....	11
.....	169	BITARTRATE ER.....	17	INFINITY BLOOD	
HM STERILE ALCOHOL		HYDROCODONE-		GLUCOSE TEST	87
PREP.....	102	ACETAMINOPHEN.....	16	INFINITY VOICE	87
HM ULTICARE INSULIN		HYDROCODONE-		INSULIN ASPART PENFILL... 34	
SYRINGE	133	HOMATROPINE.....	74	INSULIN SYRINGE.....	134
HM ULTICARE MINI PEN		HYDROCODONE-		INSULIN SYRINGE-NEEDLE	
NEEDLES	133	IBUPROFEN.....	16	U-100.....	134
HM ULTICARE SHORT		HYDROCORTISONE....	21, 73, 80	INSUPEN PEN NEEDLES.....	134
PEN NEEDLES	134	HYDROCORTISONE ACE-		INSUPEN SENSITIVE	134
HUMALOG	33	PRAMOXINE.....	21	INSUPEN ULTRAFIN	134
HUMALOG JUNIOR		HYDROCORTISONE		INTELENCE	55
KWIKPEN	33	VALERATE.....	80	INTRON A	48
HUMALOG KWIKPEN	33	HYDROCORTISONE-		INTROVALE	70
HUMALOG MIX 50/50	33	ACETIC ACID.....	165	INVEGA HAFYERA	51
HUMALOG MIX 50/50		HYDROMET.....	74	INVEGA SUSTENNA	51
KWIKPEN	33	HYDROMORPHONE HCL.....	17	INVEGA TRINZA	51
HUMALOG MIX 75/25	33	HYDROMORPHONE HCL ER..	17	INVIRASE	54
HUMALOG MIX 75/25		HYDROMORPHONE HCL PF..	17	INVOKANA	36
KWIKPEN	33	HYDROXYCHLOROQUINE		IPRATROPIUM BROMIDE... 160	
HUMATROPE	93	SULFATE.....	44	IPRATROPIUM-ALBUTEROL 24	
HUMIRA	10	HYDROXYUREA.....	48	IRBESARTAN.....	41
HUMIRA PEDIATRIC		HYDROXYZINE HCL.....	22	IRBESARTAN-	
CROHNS START	10	HYDROXYZINE PAMOATE... 22		HYDROCHLOROTHIAZIDE... 41	
HUMIRA PEN	10	HYLAFEM	152	ISENTRESS	54
HUMIRA PEN-CD/UC/HS		HYOSCYAMINE SULFATE.. 174		ISIBLOOM	64
STARTER	10	HYOSCYAMINE SULFATE		ISONIAZID.....	44
HUMIRA PEN-PEDIATRIC		SL.....	174	ISOSORBIDE DINITRATE.....21	
UC START	10	HYOSYNE.....	174	ISOSORBIDE	
HUMIRA PEN-PS/UV/ADOL		HYPOLANCE AST		MONONITRATE.....	21
HS START	10	LANCING	111	ISOSORBIDE	
HUMIRA PEN-PSOR/VEIT		HY-VEE LANCETS	111	MONONITRATE ER.....	21
STARTER	10	HY-VEE THIN LANCETS.....	111	ISOTRETINOIN.....	76
HUMULIN 70/30	34	IBANDRONATE SODIUM.....	92	ISRADIPINE.....	58
HUMULIN 70/30 KWIKPEN ..	34	IBU	11	ITRACONAZOLE.....	38
HUMULIN N	34	ICLEVIA	70	IVERMECTIN.....	21
HUMULIN N KWIKPEN	34	IGLUCOSE TEST STRIPS	87	JAIMIESS	70
HUMULIN R	34	IMATINIB MESYLATE.....	46	JANTOVEN	26
HUMULIN R U-500		IMBRUVICA	46	JANUMET	32
(CONCENTRATED)	34	IMIPRAMINE HCL.....	31	JANUMET XR	32
HUMULIN R U-500		IMIPRAMINE PAMOATE.....	31	JANUVIA	32
KWIKPEN	34	IMIQUIMOD.....	80	JARDIANCE	36
HW EMBRACE PRO		IN TOUCH BLOOD		JASMIEL	64
GLUCOSE TEST	87	GLUCOSE TEST	87	JENCYCLA	71

JINTELI	94	KROGER INSULIN SYRINGE		LEADER UNIFINE	
JOLESSA	70	.....	134	PENTIPS	134, 135
JULEBER	64	KROGER LANCETS	111	LEADER UNIFINE	
JULUCA	53	KROGER LANCETS 21G	111	PENTIPS PLUS	135
JUNEL 1.5/30	64	KROGER LANCETS MICRO		LEDIPASVIR-SOFOSBUVIR ...	56
JUNEL 1/20	64	THIN 33G	111	LEENA	71
JUNEL FE 1.5/30	64	KROGER LANCETS SUPER		LEFLUNOMIDE	12
JUNEL FE 1/20	64	THIN	111	LESSINA	65
JUNEL FE 24	65	KROGER LANCETS THIN ...	111	LETROZOLE	48
KAITLIB FE	65	KROGER LANCETS THIN		LEUCOVORIN CALCIUM	48
KALLIGA	65	26G	111	LEUKINE	100
KALYDECO	171	KROGER LANCETS		LEUPROLIDE ACETATE	49
KANUMA	94	ULTRATHIN 30G	111	LEVEMIR	34
KARIVA	61	KROGER LANCING DEVICE	111	LEVEMIR FLEXTOUCH	34
KCL-LIDOCAINE-NACL	150	KROGER PEN NEEDLES	134	LEVETIRACETAM	28
KELNOR 1/35	65	KROGER PREMIUM		LEVOBUNOLOL HCL	162
KELNOR 1/50	65	GLUCOSE TEST	87	LEVOCARNITINE	92
KEPIVANCE	48	KROGER TEST	87	LEVOCARNITINE SF	92
KETOCONAZOLE	38, 80	KURVELO	65	LEVOFLOXACIN	95, 162
KETOPROFEN	11	LABETALOL HCL	57	LEVOLEUCOVORIN	
KETOROLAC		LACTULOSE	101	CALCIUM	48
TROMETHAMINE	11, 164	LACTULOSE		LEVONEST	72
KINNEY LANCETS	111	ENCEPHALOPATHY	96	LEVORA 0.15/30 (28)	65
KINNEY THIN LANCETS	111	LAMICTAL STARTER	28	LEVOTHYROXINE SODIUM	173
KINRAY INSULIN SYRINGE	134	LAMIVUDINE	55	LEVOXYL	173
KLOR-CON	151	LAMIVUDINE-ZIDOVUDINE	53	LEXIVA	54
KLOR-CON 10	151	LAMOTRIGINE	28	LIBERTY MEDICAL	
KLOR-CON M10	151	LANCET DEVICE WITH		LANCETS	112
KLOR-CON M15	151	EJECTOR	111	LIBERTY MINI LANCING	
KLOR-CON M20	151	LANCETS 30G	111	DEVICE	112
KLOR-CON/EF	151	LANCETS 33G	111	LIBERTY NEXT	
KLS ASPIRIN LOW DOSE	14	LANCETS MICRO THIN 33G	112	GENERATION TEST	87
KLS QUIT2	170	LANCETS SUPER THIN 28G	112	LIBERTY TEST	87
KLS QUIT4	170	LANCETS THIN	112	LIDOCAINE	81
KMART VALU INSULIN		LANCETS ULTRA THIN	112	LIDOCAINE HCL	
SYRINGE 30G	134	LANCETS ULTRA THIN 30G	112	URETHRAL/MUCOSAL	81
KOMBIGLYZE XR	33	LANCING DEVICE	112	LIDOCAINE VISCOUS HCL ..	153
KP ASPIRIN	14	LANOXIN PEDIATRIC	59	LIDOCAINE-PRILOCAINE	81
KP PRENATAL		LANSOPRAZOLE	174	LIFESCAN UNISTIK 2	112
MULTIVITAMINS	156	LANZO	112	LIFESCAN UNISTIK II	
KP PSEUDOEPHEDRINE		LAPATINIB DITOSYLATE	47	LANCETS	112
HCL	160	LARIN 1.5/30	65	LILLOW	65
KPN PRENATAL	156	LARIN 1/20	65	LINEZOLID	43
K-PRIME	151	LARIN 24 FE	65	LINEZOLID IN SODIUM	
KROGER AUTOLET		LARIN FE 1.5/30	65	CHLORIDE	43
LANCING DEVICE	111	LARIN FE 1/20	65	LIOthyRONINE SODIUM ...	173
KROGER BLOOD GLUCOSE		LARISSIA	65	LISINOPRIL	41
TEST	87	LATANOPROST	165	LISINOPRIL-	
KROGER HEALTHPRO		LAYOLIS FE	65	HYDROCHLOROTHIAZIDE ...	40
GLUCOSE TEST	87	LEADER ADVANCED		LITE TOUCH LANCETS	112
KROGER HEALTHPRO		LANCING DEVICE	112	LITE TOUCH LANCING	
LANCET 26G	111	LEADER INSULIN SYRINGE	134	PEN	112

LITETOUCH INSULIN SYRINGE	135	LYZA	71	MEGESTROL ACETATE	49
LITETOUCH LANCETS	112	MAGELLAN INSULIN SAFETY SYR	135, 136	MEIJER ALCOHOL SWABS ..	102
LITETOUCH PEN NEEDLES	135	MAGELLAN TUBERCULIN SYRINGE	136	MEIJER BLOOD GLUCOSE TEST	87
LITHIUM CARBONATE	51	MALATHION	81	MEIJER ESSENTIAL GLUCOSE TEST	87
LITHIUM CARBONATE ER	51	MARATHON MEDICAL PENTIPS	136	MEIJER LANCETS	113
LIVE BETTER ADV LANCING DEVICE	112	MARLISSA	66	MEIJER LANCETS THIN	113
LIVE BETTER LANCET SUPER THIN	112	MATULANE	48	MEIJER LANCETS UNIVERSAL 21G	113
LIVE BETTER LANCET ULTRA THIN	112	MATZIM LA	58	MEIJER LANCETS UNIVERSAL 30G	113
LO LOESTRIN FE	61	MAVYRET	56	MEIJER LANCETS UNIVERSAL 33G	113
LOJAIMIESS	70	MAXICOMFORT II PEN NEEDLE	136	MEIJER NASAL DECONGESTANT	160
LONGS INSULIN SYRINGE ..	135	MAXI-COMFORT INSULIN SYRINGE	136	MEIJER PEN NEEDLES	136
LONGS LANCETS STANDARD	112	MAXI-COMFORT SAFETY PEN NEEDLE	136	MEIJER PREMIUM GLUCOSE TEST	87
LONGS LANCETS THIN	112	MAXICOMFORT SYR 27G X 1/2"	136	MEIJER SUPER THIN LANCETS	113
LONGS LANCETS ULTRA THIN	112	MAXI-TUSS AC	74	MEIJER TRUETEST TEST ..	88
LOPINAVIR-RITONAVIR	53	M-CLEAR WC	74	MEIJER TRUETRACK TEST	88
LORAZEPAM	22	MEDIC INSULIN SYRINGE ..	136	MELOXICAM	11
LORAZEPAM INTENSOL	22	MEDICHOICE SAFETY LANCET	112	MELPHALAN	49
LORTAB	16	MEDICHOICE SAFETY LANCET EXTRA	112	MELPHALAN HCL	49
LORYNA	66	MEDICHOICE SAFETY LANCET NORM	112	MEMANTINE HCL	168
LOSARTAN POTASSIUM	41	MEDICHOICE SAFETY LANCET NORM	112	MEMANTINE HCL ER	168
LOSARTAN POTASSIUM-HCTZ	41	MEDICINE SHOPPE PEN NEEDLES	136	MENACTRA	176
LOTEPREDNOL ETABONATE	164	MEDISENSE THIN LANCETS	112	MENEST	95
LOVASTATIN	39	MEDLANCE EXTRA 21G	112	MENOSTAR	95
LOW-OGESTREL	66	MEDLANCE LITE 25G	112	MENQUADFI	176
LOXAPINE SUCCINATE	52	MEDLANCE PLUS EXTRA 21G	112	MENVEO	176
LO-ZUMANDIMINE	66	MEDLANCE PLUS LANCETS	112	MEPERIDINE HCL	17
LUER LOCK SAFETY SYRINGES	135	MEDLANCE PLUS LANCETS	112	MEPHYTON	179
LUMIGAN	165	MEDLANCE PLUS LANCETS	112	MEPROMAMATE	22
LUPRON DEPOT (1-MONTH)	49	MEDLANCE PLUS LANCETS	112	MERCAPTOPYRINE	45
LUPRON DEPOT (3-MONTH)	49	MEDLANCE PLUS LANCETS	112	MERZEE	66
LUPRON DEPOT (4-MONTH)	49	MEDLANCE PLUS LANCETS	112	MESALAMINE	96
LUPRON DEPOT-PED (1-MONTH)	93	MEDLANCE PLUS LANCETS	112	MESNA	50
LUPRON DEPOT-PED (3-MONTH)	93	MEDLANCE PLUS LANCETS	112	MESNEX	50
LUTERA	66	MEDLANCE PLUS LANCETS	112	METAXALONE	159
LYLEQ	71	MEDLANCE PLUS LANCETS	112	METFORMIN HCL	32
LYLLANA	95	MEDLANCE PLUS LANCETS	112	METFORMIN HCL ER	32
LYSODREN	44	MEDLANCE PLUS LANCETS	112	METHADONE HCL	17
		MEDLANCE PLUS LANCETS	112	METHAZOLAMIDE	91
		MEDLANCE UNIVERSAL 21G	113	METHERGINE	165
		MEDLANCE UNIVERSAL 21G	113	METHIMAZOLE	172
		MEDROXYPROGESTERONE ACETATE	70, 166	METHOCARBAMOL	159
		MEFLOQUINE HCL	44	METHOTREXATE	45
				METHOTREXATE SODIUM ..	46

METHOTREXATE SODIUM (PF).....	45	M-NATAL PLUS	156	MULTI-VITAMIN DAILY	154
METHSCOPOLAMINE BROMIDE.....	175	MODAFINIL	9	MULTIVITAMIN IRON-FREE	154
METHYLDOPA	42	MOEXIPRIL HCL.....	41	MULTIVITAMIN/FLUORIDE	155, 156
METHYLPHENIDATE HCL.....	9	MOLINDONE HCL.....	52	MULTI-VITAMIN/FLUORIDE	155
METHYLPHENIDATE HCL ER.....	8	MOMETASONE FUROATE	80, 160	MULTI-VITAMIN/FLUORIDE/IRON ..	155
METHYLPHENIDATE HCL ER (CD).....	8	MONOJECT INSULIN SYRINGE.....	137	MUPIROCIN.....	77
METHYLPHENIDATE HCL ER (LA).....	8	MONOJECT MAGELLAN SYRINGE.....	137	MY CHOICE.....	69
METHYLPREDNISOLONE.....	73	MONOJECT SYRINGE.....	137	MY WAY	69
METHYLPREDNISOLONE SODIUM SUCC.....	73	MONOJECT TB SAFETY SYRINGE.....	137	MYCOPHENOLATE MOFETIL.....	152
METOCLOPRAMIDE HCL.....	96	MONOJECT TB SYRINGE..	137	MYCOPHENOLATE MOFETIL HCL.....	152
METOLAZONE.....	92	MONOJECT ULTRA COMFORT SYRINGE..	137, 138	MYGLUCOHEALTH LANCETS 30G.....	113
METOPROLOL SUCCINATE ER.....	57	MONOLET LANCETS.....	113	MYGLUCOHEALTH TEST ...	88
METOPROLOL TARTRATE...57		MONOLET OPD LANCETS	113	NABUMETONE.....	11
METOPROLOL-HYDROCHLOROTHIAZIDE... 42		MONOLETTOR SAFETY LANCETS.....	113	NADOLOL.....	57
METRONIDAZOLE.....	42, 81	MONO-LINYAH.....	66	NAFRINSE.....	150
MEXILETINE HCL.....	23	MONTELUKAST SODIUM.....	25	NAFRINSE DROPS.....	150
MIBELAS 24 FE.....	66	MORPHINE SULFATE.....	18	NALOXONE HCL.....	37
MICRODOT PEN NEEDLE.	136	MORPHINE SULFATE (CONCENTRATE).....	18	NALTREXONE HCL.....	37
MICRODOT TEST.....	88	MORPHINE SULFATE ER.....	18	NAPROXEN.....	11
MICROGESTIN 1.5/30.....	66	MORPHINE SULFATE ER BEADS.....	18	NAPROXEN SODIUM.....	11
MICROGESTIN 1/20.....	66	MOXIFLOXACIN HCL.....	95, 163	NARATRIPTAN HCL.....	149
MICROGESTIN 24 FE.....	66	MOXIFLOXACIN HCL (2X DAY).....	163	NARCAN.....	37
MICROGESTIN FE 1.5/30.....	66	MPD SAFETY LANCET 21G.	113	NASAL DECONGESTANT ...	160
MICROGESTIN FE 1/20.....	66	MPD SAFETY LANCET 23G.	113	NASAL DECONGESTANT MAX ST.....	160
MICROLET LANCETS.....	113	MPD SAFETY LANCET 28G.	113	NATALVIT.....	156
MICROLET NEXT LANCING DEVICE.....	113	MPD SAFETY LANCET 30G.	113	NATEGLINIDE.....	36
MIDODRINE HCL.....	178	MS INSULIN SYRINGE.....	138	NECON 0.5/35 (28).....	66
MIGERGOT.....	149	MULTAQ.....	23	NEOMULTIVITE.....	154
MILI.....	66	MULTI PRENATAL.....	156	NEOMYCIN SULFATE.....	9
MIMVEY.....	94	MULTI VITAMIN.....	154	NEOMYCIN-BACITRACIN ZN-POLYMYX.....	163
MINI LANCING DEVICE.....	113	MULTI VITAMIN DAILY	154	NEOMYCIN-POLYMYXIN-DEXAMETH.....	164
MINOCYCLINE HCL.....	172	MULTI VITAMIN W/D-3.....	154	NEOMYCIN-POLYMYXIN-GRAMICIDIN.....	163
MINOXIDIL.....	42	MULTI-DAY	154	NEOMYCIN-POLYMYXIN-HC.....	164, 165
MIRTAZAPINE.....	29, 30	MULTI-LANCET DEVICE.....	113	NEONATAL PLUS.....	156
MISOPROSTOL.....	175	MULTI-LANCET DEVICE 2	113	NEONATAL VITAMIN.....	157
MM EASY TOUCH GLUCOSE.....	88	MULTIPLE VITAMIN-FOLIC ACID.....	154	NEO-POLYCIN.....	163
MM INSULIN SYRINGE/NEEDLE.....	136	MULTIPLE VITAMINS.....	154	NEUPOGEN.....	99
MM LANCING DEVICE.....	113	MULTIPLE VITAMINS ESSENTIAL.....	154	NEUTEK 2TEK TEST.....	88
MM PEN NEEDLES.....	136, 137	MULTIVITAMIN.....	154	NEVIRAPINE.....	55
MM TWIST LANCETS.....	113	MULTI-VITAMIN.....	154	NEVIRAPINE ER.....	55
M-M-R II.....	176	MULTIVITAMIN ADULT	154		

NEW DAY	69	NOVA SUREFLEX		OCCLUVAN	166
NIACIN ER		LANCETS	113	OCELLA	67
(ANTIHYPERLIPIDEMIC).....	40	NOVA SUREFLEX		ODEFSEY	53
NICODERM CQ	170	LANCING DEVICE	113	OFLOXACIN	95, 163, 165
NICORETTE	170	NOVOFINE AUTOCOVER		OLANZAPINE	53
NICORETTE MINI	170	PEN NEEDLE	138	OLMESARTAN	
NICORETTE STARTER		NOVOFINE PEN NEEDLE ..	138	MEDOXOMIL	41
KIT	170	NOVOFINE PLUS PEN		OLMESARTAN	
NICOTINE	170	NEEDLE	138	MEDOXOMIL-HCTZ	41
NICOTINE MINI	170	NOVOLIN 70/30	34	OLOPATADINE HCL	162
NICOTINE POLACRILEX		NOVOLIN 70/30 FLEXPEN ...	34	OMEGA-3-ACID ETHYL	
MINI	170	NOVOLIN 70/30 FLEXPEN		ESTERS	39
NICOTINE STEP 1	170	RELION	34	OMEPRAZOLE	175
NICOTINE STEP 2	170	NOVOLIN 70/30 RELION	34	OMNICAP	154
NICOTINE STEP 3	170	NOVOLIN N	34	OMNITROPE	93
NICOTROL	170	NOVOLIN N FLEXPEN	34	ONCASPAR	47
NICOTROL NS	170	NOVOLIN N FLEXPEN		ONCE DAILY	154
NIFEDIPINE	58	RELION	34	ONDANSETRON	37
NIFEDIPINE ER	58	NOVOLIN N RELION	34	ONDANSETRON HCL	37
NIFEDIPINE ER OSMOTIC		NOVOLIN R	35	ONE DAILY	154
RELEASE	58	NOVOLIN R FLEXPEN	35	ONE DAILY ESSENTIAL	154
NIKKI	66	NOVOLIN R FLEXPEN		ONE DAILY	
NILUTAMIDE	45	RELION	35	MULTIVITAMIN ADULT	154
NINLARO	47	NOVOLIN R RELION	35	ONE DROP TEST	88
NISOLDIPINE ER	58	NOVOLOG 70/30 FLEXPEN		ONE VITE WOMENS	157
NITROFURANTOIN		RELION	35	ONE-A-DAY ESSENTIAL	155
MACROCRYSTAL	43	NOVOLOG FLEXPEN		ONE-A-DAY MENS	155
NITROFURANTOIN		RELION	35	ONE-A-DAY WOMENS	
MONOHD MACRO	43	NOVOLOG MIX 70/30		PRENATAL	157
NITROGLYCERIN	21, 22	RELION	35	ONE-DAILY MULTI	
NIVA-PLUS	157	NOVOLOG RELION	35	VITAMINS	155
NIZATIDINE	174	NOVOTWIST PEN NEEDLE		ONE-DAILY MULTI-	
NORA-BE	71	.....	138	VITAMIN	155
NORDITROPIN FLEXPRO ...	93	NOZIN NASAL SANITIZER	160	ONETOUCH CLUB	
NOREPINEPHRINE-SODIUM		NOZIN NASAL SANITIZER		LANCETS FINE PT	113
CHLORIDE	178	POPSWAB	160	ONETOUCH DELICA	
NORETHINDRONE		NUCYNTA	18	LANCETS 30G	114
ACETATE	166	NUCYNTA ER	18	ONETOUCH DELICA	
NORLYDA	71	NUFOL	99	LANCETS 33G	114
NORLYROC	71	NUTROPIN AQ NUSPIN 10 ...	93	ONETOUCH DELICA	
NORTREL 0.5/35 (28)	66	NUTROPIN AQ NUSPIN 20 ...	93	LANCING DEV	114
NORTREL 1/35 (21)	66	NUTROPIN AQ NUSPIN 5	93	ONETOUCH DELICA PLUS	
NORTREL 1/35 (28)	67	NYLIA 7/7/7	72	LANCET30G	114
NORTREL 7/7/7	72	NYMYO	67	ONETOUCH DELICA PLUS	
NORTRIPTYLINE HCL	31	NYSTATIN	38, 77, 153	LANCET33G	114
NORVIR	54	NYSTATIN-		ONETOUCH DELICA PLUS	
NOVA MAX GLUCOSE		TRIAMCINOLONE	77	LANCING	114
TEST	88	NYSTOP	77	ONETOUCH DELICA	
NOVA SAFETY LANCETS		OB COMPLETE	157	SAFETY LANCING	114
23G	113	OBSTETRIX DHA	157	ONETOUCH FINEPOINT	
NOVA SAFETY LANCETS		OBSTETRIX EC	157	LANCETS	114
28G	113	OBTREX	157		

ONETOUCH SURESOFT		PALFORZIA (20 MG DAILY DOSE) 9	PHARMACIST CHOICE
LANCING DEV 114		PALFORZIA (200 MG DAILY DOSE) 9	AUTOCODE 88
ONETOUCH ULTRA 88		PALFORZIA (240 MG DAILY DOSE) 9	PHARMACIST CHOICE
ONETOUCH ULTRA 2 114		PALFORZIA (3 MG DAILY DOSE) 9	LANCETS 114
ONETOUCH ULTRA MINI 114		PALFORZIA (300 MG MAINTENANCE) 9	PHARMACIST CHOICE NO
ONETOUCH ULTRASOFT		PALFORZIA (300 MG TITRATION) 9	CODING 88
LANCETS 114		PALFORZIA (40 MG DAILY DOSE) 9	PHARMACY COUNTER
ONETOUCH VERIO 88, 114		PALFORZIA (6 MG DAILY DOSE) 9	LANCETS 114
ONETOUCH VERIO FLEX		PALFORZIA (80 MG DAILY DOSE) 9	PHENAZO 97
SYSTEM 114		PALFORZIA INITIAL	PHENAZOPYRIDINE HCL 97
ONETOUCH VERIO IQ		ESCALATION 9	PHENOBARBITAL 100
SYSTEM 114		PALONOSETRON HCL 37	PHENYTOIN 29
ONETOUCH VERIO		PANCREAZE 90	PHENYTOIN INFATABS 29
REFLECT 114		PANTOPRAZOLE SODIUM .. 175	PHENYTOIN SODIUM
ONETOUCH VERIO SYNC		PAROXETINE HCL 30	EXTENDED 29
SYSTEM 114		PC LANCETS SUPER THIN	PHILITH 67
ONGLYZA 32		30G 114	PHOSPHOROUS 150
OPCICON ONE-STEP 69		PC UNIFINE PENTIPS 138	PHOSPHO-TRIN 250
OPTION 2 69		PEG-	NEUTRAL 150
OPTIUM TEST 88		3350/ELECTROLYTES/ASCO	PILOCARPINE HCL 153, 162
OPTIUMEZ TEST 88		RBAT 101	PIMECROLIMUS 81
ORALONE 153		PEGASYS 56	PIMTREA 62
ORENCIA 12		PEG-KCL-NACL-NASULF-	PINDOLOL 57
ORENCIA CLICKJECT 12		NA ASC-C 101	PIOGLITAZONE HCL 36
ORENITRAM 60		PEN NEEDLES 138	PIOGLITAZONE HCL-
ORKAMBI 171, 172		PENICILLIN V POTASSIUM .. 166	METFORMIN HCL 36
ORPHENADRINE CITRATE		PENLET II BLOOD	PIP LANCETS 28G 115
ER 159		SAMPLER 114	PIP LANCETS 30G 115
ORSYTHIA 67		PENLET II	PIPERACILLIN SOD-
OSCIMIN 174		REPLACEMENT CAP 114	TAZOBACTAM SO 166
OSELTAMIVIR PHOSPHATE		PENTASA 96	PIRMELLA 1/35 67
..... 56, 57		PENTAZOCINE-NALOXONE	PIRMELLA 7/7/7 72
OSMOPREP 101		HCL 20	PIROXICAM 11
OTEZLA 12		PENTIPS 138	PLAN B ONE-STEP 69
OXALIPLATIN 44		PENTOXIFYLLINE ER 98	PNEUMOVAX 23 176
OXAPROZIN 11		PERMETHRIN 81	PNV TABS 29-1 157
OXAZEPAM 22		PERPHENAZINE 52	PNV-DHA+DOCUSATE 159
OXCARBAZEPINE 28		PHARMACIST CHOICE	PNV-SELECT 157
OXYBUTYNIN CHLORIDE ... 175		ALCOHOL 102	POCKETCHEM EZ TEST 88
OXYBUTYNIN CHLORIDE			POGO AUTOMATIC
ER 175			BLOOD GLUCOSE 115
OXYCODONE HCL 18, 19			POGO AUTOMATIC TEST
OXYCONTIN 19			CARTRIDGES 88
OXYMORPHONE HCL 19			POLYCIN 163
OXYMORPHONE HCL ER 19			POLYMYXIN B-
OXYTROL 175			TRIMETHOPRIM 163
PALFORZIA (12 MG DAILY DOSE) 9			POLY-TUSSIN AC 75
PALFORZIA (120 MG DAILY DOSE) 9			PORTIA-28 67
PALFORZIA (160 MG DAILY DOSE) 9			PORTRAZZA 46

POTASSIUM		
PHOSPHATES(71 MEQ K).....	150	
PRADAXA	27	
PRALUENT	40	
PRAMIPEXOLE		
DIHYDROCHLORIDE.....	51	
PRAVASTATIN SODIUM.....	39	
PRAZOSIN HCL.....	42	
PRECISION PCX	88	
PRECISION PCX PLUS TEST	88	
PRECISION POINT OF CARE TEST	88	
PRECISION QID TEST	88	
PRECISION SOF-TACT TEST	88	
PRECISION SUREDOSE PLUS SYR	138	
PRECISION SURE-DOSE SYRINGE	138, 139	
PRECISION THINS GP LANCETS	115	
PRECISION XTRA BLOOD GLUCOSE	89	
PREDNISOLONE.....	73	
PREDNISOLONE ACETATE.....	164	
PREDNISOLONE SODIUM PHOSPHATE.....	73, 164	
PREDNISONONE.....	73, 74	
PREDNISONONE INTENSOL	73	
PREFERRED PLUS INSULIN SYRINGE.....	139	
PREFERRED PLUS LANCETS COLORED.....	115	
PREFERRED PLUS LANCETS THIN.....	115	
PREFERRED PLUS UNIFINE PENTIPS.....	139	
PREFEST	94	
PREGABALIN.....	28	
PREGABALIN ER.....	168	
PREMARIN	95, 178	
PREMIUM BLOOD GLUCOSE TEST.....	89	
PREMPHASE	94	
PREMPRO	94	
PRENA 1 TRUE.....	159	
PRENATABS RX	157	
PRENATAL.....	157	
PRENATAL (W/IRON & FA).....	157	
PRENATAL 19.....	157	
PRENATAL COMPLETE.....	157	
PRE-NATAL FORMULA.....	157	
PRENATAL FORMULA A-FREE.....	157	
PRENATAL FORTE.....	157	
PRENATAL ONE DAILY.....	157	
PRENATAL VITAMIN.....	157	
PRENATAL VITAMIN AND MINERAL.....	157	
PRENATAL VITAMIN PLUS LOW IRON.....	157	
PRENATAL VITAMIN/MIN +DHA.....	159	
PRENATAL VITAMINS.....	157	
PRENATAL/IRON.....	158	
PRENATAL+DHA.....	159	
PRENATAL-U	158	
PRENATVITE PLUS.....	158	
PRENATVITE RX.....	158	
PREPLUS.....	158	
PRETAB.....	158	
PREVENT DROPSAFE PEN NEEDLES	139	
PREVENT SAFETY PEN NEEDLES	139	
PREVENTEZA	69	
PREVIDENT 5000 PLUS	153	
PREVIFEM	67	
PREVNAR 13	176	
PREZISTA	54	
PRIMIDONE.....	28	
PRIMSOL	42	
PRO COMFORT ALCOHOL..	102	
PRO COMFORT INSULIN SYRINGE	139	
PRO COMFORT LANCETS 30G.....	115	
PRO COMFORT LANCETS 31G.....	115	
PRO COMFORT PEN NEEDLES.....	139	
PRO VOICE V8/V9 GLUCOSE.....	89	
PROAIR HFA	24	
PROBENECID.....	97	
PROCHLORPERAZINE.....	52	
PROCHLORPERAZINE MALEATE.....	52	
PROCRIT	99	
PROCTO-MED HC	21	
PROCTOSOL HC	21	
PROCTOZONE-HC	21	
PRODIGY INSULIN SYRINGE	139	
PRODIGY LANCETS 28G	115	
PRODIGY LANCING DEVICE	115	
PRODIGY NO CODING BLOOD GLUC	89	
PRODIGY SAFETY LANCETS 26G	115	
PRODIGY TWIST TOP LANCETS 28G	115	
PROGESTERONE.....	167	
PROMETHAZINE HCL.....	38	
PROMETHAZINE VC.....	75	
PROMETHAZINE VC/CODEINE.....	75	
PROMETHAZINE-CODEINE..	75	
PROMETHAZINE-DM.....	75	
PROMETHAZINE-PHENYLEPH-CODEINE.....	75	
PROMETHAZINE-PHENYLEPHRINE.....	75	
PROMETHEGAN	38	
PROPAFENONE HCL.....	23	
PROPRANOLOL HCL.....	57	
PROPRANOLOL HCL ER.....	57	
PROPYLTHIOURACIL.....	172	
PROVENTIL HFA	24	
PSEUDOEPH-BROMPHEN-DM.....	75	
PSEUDOEPHEDRINE HCL....	161	
PSS SELECT GP LANCETS	115	
PSS SELECT PLATFORMS	115	
PSS SELECT SAFETY LANCETS	115	
PTS PANELS GLUCOSE TEST	89	
PULMICORT FLEXHALER ..	26	
PURE COMFORT ALCOHOL PREP.....	103	
PURE COMFORT LANCETS 30G.....	115	
PURE COMFORT PEN NEEDLE.....	139	
PX ADVANCED LANCING DEVICE.....	115	
PX ASPIRIN.....	14	
PX ENTERIC ASPIRIN.....	14	
PX EXTRA SHORT PEN NEEDLES.....	139	
PX INSULIN SYRINGE.....	139	

PX LANCET AUTO INJECTOR.....	115	QVAR REDIHALER	26	REFUAH PLUS BLOOD GLUCOSE TEST	89
PX LANCETS MICROTHIN 33G.....	115	RA ALCOHOL SWABS.....	103	REGRANEX	81
PX LANCETS ULTRA THIN 28G.....	115	RA ASPIRIN ADULT LOW DOSE.....	14	RELION ALCOHOL SWABS	103
PX LANCETS ULTRA THIN 28G.....	115	RA ASPIRIN ADULT LOW STRENGTH.....	14	RELION BLOOD GLUCOSE TEST	89
PX MINI PEN NEEDLES.....	139	RA ASPIRIN CHILDRENS.....	14	RELION CONFIRM/MICRO TEST	89
PX NASAL DECONGESTANT.....	161	RA ASPIRIN EC.....	15	RELION INSULIN SYRINGE	140
PX PEN NEEDLE.....	140	RA ASPIRIN EC ADULT LOW ST.....	15	RELION LANCET DEVICES 30G	116
PX PRENATAL MULTIVITAMINS.....	158	RA E-ZJECT LANCETS 28G	115	RELION LANCETS MICRO-THIN 33G	116
PX SHORTLENGTH PEN NEEDLES.....	140	RA E-ZJECT LANCETS THIN 26G	115	RELION LANCETS THIN 26G	116
PX STOP SMOKING AID.....	170, 171	RA E-ZJECT LANCETS THIN 28G	115	RELION LANCETS ULTRA-THIN 30G	116
PYRAZINAMIDE.....	44	RA E-ZJECT LANCETS ULTRA THIN	115	RELION LANCING DEVICE	116
PYRIDOSTIGMINE BROMIDE.....	44	RA INSULIN SYRINGE.....	140	RELION MINI PEN NEEDLES	140
PYRIDOSTIGMINE BROMIDE ER.....	44	RA MINI NICOTINE.....	171	RELION PEN NEEDLES	140
QC ADVANCED LANCING DEVICE.....	115	RA NICOTINE.....	171	RELION PREMIER TEST	89
QC ALCOHOL SWABS.....	103	RA NICOTINE GUM.....	171	RELION PRIME TEST	89
QC ASPIRIN LOW DOSE.....	14	RA NICOTINE POLACRILEX.....	171	RELION SHORT PEN NEEDLES	140
QC CHILDRENS ASPIRIN.....	14	.....	171	RELION TRUE METRIX TEST STRIPS	89
QC ESSENTIALS.....	155	RA PEN NEEDLES.....	140	RELION ULTIMA TEST	89
QC LANCETS SUPER THIN 30G.....	115	RA PRENATAL.....	158	RELION ULTRA THIN LANCETS 30G	116
QC LANCETS ULTRA THIN 30G.....	115	RA PRENATAL FORMULA..	158	RELION ULTRA THIN PLUS LANCETS	116
QC NICOTINE TRANSDERMAL SYSTEM.....	171	RA SINUS/CONGESTION RELIEF.....	161	REMICADE	97
QC PEN NEEDLES.....	140	RA SUPHEDRINE.....	161	REPAGLINIDE.....	36
QC PRENATAL.....	158	RABEPRAZOLE SODIUM....	175	REPATHA	40
QC UNIFINE PENTIPS.....	140	RALOXIFENE HCL.....	94	REPATHA PUSHTRONEX SYSTEM	40
QC UNILET LANCETS 28G...115		RAMELTEON.....	100	REPATHA SURECLICK	40
QC UNILET LANCETS MICRO THIN.....	115	RAMIPRIL.....	41	RESTASIS	163
QUETIAPINE FUMARATE.....	52	RANOLAZINE ER.....	21	RESTASIS MULTIDOSE	163
QUICKTEK TEST	89	REACT	69	RETROVIR	55
QUINAPRIL HCL.....	41	READYLANCE SAFETY LANCETS	116	REXALL BLOOD GLUCOSE TEST	89
QUINAPRIL-HYDROCHLOROTHIAZIDE... 40		REALITY INSULIN SYRINGE.....	140	REXALL LANCETS ULTRA THIN 30G	116
QUINIDINE GLUCONATE ER.....	23	REALITY LANCETS.....	116	REYATAZ	54
QUINIDINE SULFATE.....	23	REALITY SWABS.....	103	RIBAVIRIN.....	56, 57
QUINTABS.....	155	REALITY TRIGGER LANCETS.....	116	RIFAMPIN.....	44
QUINTET AC BLOOD GLUCOSE TEST	89	REBIF	167		
QUINTET BLOOD GLUCOSE TEST	89	REBIF REBIDOSE	167		
		REBIF REBIDOSE TITRATION PACK	167		
		REBIF TITRATION PACK ..	167		
		RECLIPSEN	67		
		RECOMBIVAX HB	177		

RIGHTEST ALTERNATE			
SITE ADAPT	116	SB LANCETS ULTRA THIN..	116
RIGHTEST GD500		SB LOW DOSE ASA EC.....	15
LANCING DEVICE	116	SCOPOLAMINE.....	37
RIGHTEST GL300		SECURESAFE INSULIN	
LANCETS	116	SYRINGE	141
RIGHTEST GS100 BLOOD		SECURESAFE SAFETY	
GLUCOSE	89	PEN NEEDLES	141
RIGHTEST GS300 BLOOD		SECURESAFE	
GLUCOSE	89	SYRINGE/NEEDLE	141
RIGHTEST GS550 BLOOD		SECURESAFE	
GLUCOSE	89	TUBERCULIN SYRINGE	141
RIGHTEST GT333 BLOOD		SELECT-LITE LANCING	
GLUCOSE	89	DEVICE.....	116
RIMANTADINE HCL.....	56	SELEGILINE HCL.....	50
RISEDRONATE SODIUM.....	92	SELENIUM SULFIDE.....	78
RISPERIDONE.....	51, 52	SELZENTRY	54
RITONAVIR.....	54	SE-NATAL 19.....	158
RIVASTIGMINE TARTRATE	167	SEREVENT DISKUS	25
RIVELSA	70	SEROSTIM	93
RIZATRIPTAN BENZOATE..	149	SERTRALINE HCL.....	30
ROPINIROLE HCL.....	51	SETLAKIN	70
ROSUVASTATIN CALCIUM..	39	SEVELAMER CARBONATE...	96
ROWEEPRA	28	SEVELAMER HCL.....	96
SAFE-T-LANCE	116	SF 5000 PLUS.....	153
SAFE-T-LANCE PLUS	116	SFROWASA	96
SAFETY INSULIN		SHAROBEL	71
SYRINGES.....	140	SHINGRIX	177
SAFETY LANCET		SHOPKO AUTOLET	
30G/PRESSURE ACT.....	116	LANCING DEVICE	116
SAFETY LANCETS	116	SHOPKO ON-THE-GO	
SAFETY LANCETS 21G	116	LANCETS 30G	117
SAFETY LANCETS 28G	116	SHOPKO UNIFINE	
SAFETY SYRINGE/NEEDLE	140	PENTIPS	141
SAIZEN	93	SHOPKO UNIFINE	
SAIZENPREP	93	PENTIPS PLUS	141
SANDIMMUNE	152	SHOPKO UNILET	
SAPS CARE ALCOHOL PREP		LANCETS 28G	117
.....	103	SHOPKO UNILET	
SAPS HEALTH ALCOHOL		LANCETS 30G	117
PREP.....	103	SILDENAFIL CITRATE.....	60
SAPS HEALTH CARE		SIMLIYA	62
ALCOHOL PREP.....	103	SIMPESSE	70
SAPS HEALTH TWIST TOP		SIMPLE DIAGNOSTICS	
LANCETS.....	116	LANCING DEV	117
SAPS TWIST TOP LANCETS		SIMPONI	10
116		SIMULECT	152
SAPSCARE TWIST TOP		SIMVASTATIN.....	39
LANCETS.....	116	SINGLE-LET	117
SB ALCOHOL PREP.....	103	SINUS CONGESTION MAX	
SB CHILDRENS ASPIRIN.....	15	STRENGTH.....	161
SB INSULIN SYRINGE.....	140	SIROLIMUS.....	152
SB LANCETS THIN.....	116	SM ALCOHOL PREP.....	103
		SM ASPIRIN ADULT LOW	
		STRENGTH.....	15
		SM ASPIRIN EC LOW	
		STRENGTH.....	15
		SM ASPIRIN LOW DOSE.....	15
		SM CHILDRENS ASPIRIN.....	15
		SM LANCETS 33G.....	117
		SM MULTIPLE VITAMINS	
		ESSENTIAL.....	155
		SM NASAL	
		DECONGESTANT MAX ST..	161
		SM NICOTINE.....	171
		SM NICOTINE POLACRILEX	
		.....	171
		SM PRENATAL VITAMINS..	158
		SM TRUEDRAW LANCING	
		DEVICE	117
		SMART DIABETES	
		VANTAGE LANCING	117
		SMART SENSE COLOR	
		LANCETS 33G	117
		SMART SENSE PREMIUM	
		TEST	89
		SMART SENSE STANDARD	
		LANCETS	117
		SMART SENSE SUPER	
		THIN LANCETS	117
		SMART SENSE THIN	
		LANCETS 26G	117
		SMART SENSE VALUE	
		TEST	90
		SMARTEST BLOOD	
		GLUCOSE TEST	90
		SMARTEST LANCETS 28G	117
		SOD CITRATE-CITRIC ACID.	97
		SODIUM CHLORIDE.....	75
		SODIUM FLUORIDE.....	150
		SODIUM FLUORIDE 5000	
		PLUS.....	153
		SODIUM FLUORIDE 5000	
		PPM.....	153
		SOFOSBUVIR-	
		VELPATASVIR.....	56
		SOLIFENACIN SUCCINATE.	175
		SOLUS V2 LANCETS 28G ...	117
		SOLUS V2 LANCING	
		DEVICE	117
		SOLUS V2 TEST	90
		SOLUS V2 TWIST	
		LANCETS 30G	117
		SORINE	57
		SOTALOL HCL (AF).....	57

SOVALDI	56	SURE COMFORT INSULIN		TARINA FE 1/20	67
SPIRIVA HANDHALER	25	SYRINGE	141	TARINA FE 1/20 EQ	67
SPIRONOLACTONE	91	SURE COMFORT LANCETS		TARON-C DHA	158
SPIRONOLACTONE-HCTZ	91	18G	117	TARON-PREX	159
SPRINTEC 28	67	SURE COMFORT LANCETS		TASIGNA	46
SPRYCEL	46	21G	117	TAYSOFY	67
SRONYX	67	SURE COMFORT LANCETS		TAZAROTENE	78
SSD	78	23G	117	TAZORAC	78
ST JOSEPH ASPIRIN	15	SURE COMFORT LANCETS		TAZTIA XT	58, 59
ST JOSEPH LOW DOSE	15	28G	117	TDVAX	173
STAVUDINE	55	SURE COMFORT LANCETS		TECHLITE AST LANCETS	118
STELARA	78	30G	117	TECHLITE INSULIN	
STERILANCE PA	117	SURE COMFORT LANCING		SYRINGE	142
STERILANCE TL	117	PEN	117	TECHLITE LANCETS	118
STRESS FORMULA	155	SURE COMFORT LANCING		TECHLITE LANCETS 30G	118
STRESSTABS ENERGY	155	NEEDLES	141	TECHLITE PEN NEEDLES	142
STRIBILD	54	SURE-FINE PEN NEEDLES	142	TEMAZEPAM	100
SUBVENITE	28	SURE-JECT INSULIN		TEMODAR	48
SUBVENITE STARTER		SYRINGE	142	TEMOZOLOMIDE	48
KIT-BLUE	28	SURE-LANCE FLAT		TENCON	12
SUBVENITE STARTER		LANCETS	117	TENIVAC	173
KIT-GREEN	28	SURE-LANCE LANCETS		TENOFOVIR DISOPROXIL	
SUBVENITE STARTER		26G	117	FUMARATE	55
KIT-ORANGE	29	SURE-LANCE THIN		TEPMETKO	46
SUCCINYLMCHOLINE		LANCETS 28G	118	TERAZOSIN HCL	42
CHLORIDE	161	SURE-LANCE ULTRA		TERBINAFINE HCL	38
SUCRALFATE	174	THIN LANCETS	118	TERBUTALINE SULFATE	25
SUDAFED	161	SURELITE LANCETS	118	TERCONAZOLE	177, 178
SUDAFED SINUS		SURE-PEN	118	TESTOSTERONE	20, 21
CONGESTION	161	SURE-PREP ALCOHOL		TESTOSTERONE	
SUDAFED SINUS		PREP	103	CYPIONATE	20
CONGESTION 12HR	161	SURE-TEST EASYPLUS		TESTOSTERONE	
SUDOGEST	161	MINI TEST	90	ENANTHATE	20
SUDOGEST MAXIMUM		SURE-TOUCH LANCETS		TGT BLOOD GLUCOSE	
STRENGTH	161	UNIVERSAL	118	TEST	90
SULFACETAMIDE SODIUM	164	SYEDA	67	TGT LANCET MICRO THIN	
SULFAMETHOXAZOLE-		SYMDEKO	172	33G	118
TRIMETHOPRIM	42, 43	SYMLINPEN 120	32	TGT LANCET THIN 26G	118
SULFASALAZINE	96	SYMLINPEN 60	32	TGT LANCET ULTRA THIN	
SULFATRIM PEDIATRIC	43	SYNAGIS	165	30G	118
SULINDAC	11	SYNTHROID	173	TGT LANCING DEVICE	118
SUMATRIPTAN	149	SYRINGE LUER LOCK	142	THEOPHYLLINE ER	26
SUMATRIPTAN SUCCINATE		TAB-A-VITE	155	THERA	155
.....	149, 150	TAB-A-VITE/BETA		THERA-MILL	155
SUMATRIPTAN SUCCINATE		CAROTENE	155	THERANATAL CORE	
REFILL	149, 150	TACROLIMUS	81, 152	NUTRITION	158
SUNITINIB MALATE	47	TADALAFIL (PAH)	60	THERA-TABS	155
SUPER THIN LANCETS	117	TAKE ACTION	69	THEREMS	155
SUPREME TEST	90	TALTZ	78	THINLETS GP LANCETS	118
SURE COMFORT ALCOHOL		TAMOXIFEN CITRATE	45	THIORIDAZINE HCL	52
PREP	103	TAMSULOSIN HCL	97	THIOTHIXENE	53
		TARINA 24 FE	67	THRIVE	171

THRIVITE RX.....	158	TRESIBA FLEXTOUCH.....	35	TRUE FOCUS BLOOD	
TIADYL T ER.....	59	TRETINOIN.....	76	GLUCOSE STRIP.....	90
TIAGABINE HCL.....	29	TRETINOIN MICROSPHERE..	77	TRUE METRIX BLOOD	
TILIA FE.....	72	TRETINOIN MICROSPHERE		GLUCOSE TEST.....	90
TIMOLOL MALEATE.....	57, 162	PUMP.....	77	TRUE METRIX PRO	
TIMOLOL MALEATE		TRI FEMYNOR.....	72	BLOOD GLUCOSE.....	90
(ONCE-DAILY).....	162	TRIAMCINOLONE		TRUEDRAW LANCING	
TIVICAY.....	54	ACETONIDE.....	80	DEVICE.....	118
TIZANIDINE HCL.....	159	TRIAMTERENE-HCTZ.....	91	TRUEPLUS 5-BEVEL PEN	
TOBRADEX.....	164	TRIAZOLAM.....	100	NEEDLES.....	143
TOBRAMYCIN.....	163	TRICARE.....	158	TRUEPLUS INSULIN	
TOBRAMYCIN-		TRICARE PRENATAL DHA		SYRINGE.....	143
DEXAMETHASONE.....	164	ONE.....	158	TRUEPLUS LANCETS 26G.	118
TODAYS HEALTH LANCING		TRI-ESTARYLLA.....	72	TRUEPLUS LANCETS 28G.	118
DEVICE.....	118	TRIFLUOPERAZINE HCL.....	52	TRUEPLUS LANCETS 30G.	118
TODAYS HEALTH MINI PEN		TRIFLURIDINE.....	163	TRUEPLUS LANCETS 33G.	118
NEEDLES.....	142	TRIHEXYPHENIDYL HCL.....	50	TRUEPLUS PEN NEEDLES	144
TODAYS HEALTH PEN		TRIKAFTA.....	172	TRUEPLUS SAFETY	
NEEDLES.....	142	TRI-LEGEST FE.....	72	LANCETS 28G.....	118
TODAYS HEALTH SHORT		TRI-LINYAH.....	72	TRUETEST TEST.....	90
PEN NEEDLE.....	143	TRI-LO-ESTARYLLA.....	72	TRUETRACK TEST.....	90
TODAYS HEALTH THIN		TRI-LO-MARZIA.....	72	TRULICITY.....	35
LANCETS 28G.....	118	TRI-LO-MILI.....	72	TRUMENBA.....	176
TODAYS HEALTH THIN		TRI-LO-SPRINTEC.....	72	TRYMINE CG.....	74
LANCETS 30G.....	118	TRIMETHOBENZAMIDE		TUBERSOL.....	81
TOLTERODINE TARTRATE.	176	HCL.....	37	TULANA.....	71
TOLTERODINE TARTRATE		TRIMETHOPRIM.....	42	TYBLUME.....	67
ER.....	175	TRI-MILI.....	72	TYDEMY.....	68
TOPCARE CLICKFINE PEN		TRINTELLIX.....	31	TYVASO.....	60
NEEDLES.....	143	TRI-NYMYO.....	72	TYVASO REFILL.....	60
TOPCARE LANCETS		TRI-PREVIFEM.....	72	TYVASO STARTER.....	60
MICRO-THIN 33G.....	118	TRI-SPRINTEC.....	73	UDAMIN SP.....	153
TOPCARE ULTRA		TRIUMEQ.....	54	UKONIQ.....	47
COMFORT INS SYR.....	143	TRI-VITE/FLUORIDE.....	156	ULTICARE ALCOHOL	
TOPIRAMATE.....	29	TRIVORA (28).....	73	SWABS.....	103
TOREMIFENE CITRATE.....	45	TRI-VYLIBRA.....	73	ULTICARE INSULIN	
TORSEMIDE.....	91	TRI-VYLIBRA LO.....	73	SAFETY SYR.....	144
TOUJEO MAX SOLOSTAR...35		TRUE COMFORT ALCOHOL		ULTICARE INSULIN	
TOUJEO SOLOSTAR.....	35	PREP PADS.....	103	SYRINGE.....	144
TRADJENTA.....	32	TRUE COMFORT INSULIN		ULTICARE MICRO PEN	
TRAMADOL HCL.....	19	SYRINGE.....	143	NEEDLES.....	144
TRAMADOL-		TRUE COMFORT PEN		ULTICARE MINI PEN	
ACETAMINOPHEN.....	20	NEEDLES.....	143	NEEDLES.....	144
TRANLYCYPROMINE		TRUE COMFORT PRO		ULTICARE PEN NEEDLES.	144
SULFATE.....	30	ALCOHOL PREP.....	103	ULTICARE SHORT PEN	
TRAVEL LANCETS.....	118	TRUE COMFORT PRO		NEEDLES.....	144
TRAVEL LANCETS		INSULIN SYR.....	143	ULTICARE SYRINGE.....	145
ADVANCED 28G.....	118	TRUE COMFORT PRO PEN		ULTICARE TUBERCULIN	
TRAVOPROST (BAK FREE). 165		NEEDLES.....	143	SAFETY SYR.....	145
TRAZODONE HCL.....	31	TRUE COMFORT TWIST		ULTIGUARD SAFEPACK	
TRELEGY ELLIPTA.....	24	TOP LANCETS.....	118	PEN NEEDLE.....	145
TREPROSTINIL.....	60				

ULTIGUARD SAFEPACK		UNIFINE ULTRA PEN		UNIVERSAL 1 LANCETS	
SYR/NEEDLE	145	NEEDLE	147	THIN 33G	120
ULTI-LANCE AUTOMATIC		UNILET COMFORTOUCH		UNIVERSAL 1 LANCETS	
.....	118	LANCET	119	ULTRA THIN	120
ULILET ALCOHOL SWABS		UNILET EXCELITE	119	UPTRAVI	60
.....	103	UNILET EXCELITE II	119	URSODIOL	95
ULILET CLASSIC		UNILET G.P. LANCET	119	UVADEX	47
LANCETS	118	UNILET G.P. SUPERLITE		VALACYCLOVIR HCL	56
ULILET LANCETS	118	LANCET	119	VALGANCICLOVIR HCL	56
ULILET PEN NEEDLE	145	UNILET GP 28 ULTRA		VALPROATE SODIUM	29
ULILET SAFETY		THIN	119	VALPROIC ACID	29
LANCETS	118	UNILET LANCET	119	VALSARTAN	41
ULILET SAFETY		UNILET MICRO-THIN 33G	119	VALSARTAN-	
LANCETS 23G	118	UNILET SUPERLITE		HYDROCHLOROTHIAZIDE ... 41	
ULTRA COMFORT INSULIN		LANCET	119	VALUE HEALTH INSULIN	
SYRINGE	145	UNILET SUPER-THIN 30G	119	SYRINGE	147
ULTRA FLO INSULIN PEN		UNILET ULTRA-THIN 28G	119	VALUE PLUS LANCET	
NEEDLES	145	UNISTIK 1	119	STANDARD 21G	120
ULTRA FLO INSULIN SYR		UNISTIK 2	119	VALUE PLUS LANCETS	
1/2 UNIT	145	UNISTIK 2 COMFORT	119	SUPER THIN	120
ULTRA FLO INSULIN		UNISTIK 2 EXTRA	119	VALUE PLUS LANCETS	
SYRINGE	145, 146	UNISTIK 2 NEONATAL	119	THIN 26G	120
ULTRA PRENATAL + DHA ..	159	UNISTIK 2 NORMAL	119	VALUE PLUS LANCING	
ULTRA THIN LANCETS 31G	119	UNISTIK 2 SUPER	119	DEVICE	120
ULTRA THIN PEN		UNISTIK 3	119	VALUMARK LANCET	
NEEDLES	146	UNISTIK 3 COMFORT	119	SUPER THIN 30G	120
ULTRA-CARE ALCOHOL		UNISTIK 3 EXTRA	119	VALUMARK LANCET	
PREP PADS	103	UNISTIK 3 GENTLE	119	ULTRA THIN 28G	120
ULTRACARE INSULIN		UNISTIK 3 NEONATAL	119	VALUMARK PEN NEEDLES	147
SYRINGE	146	UNISTIK 3 NORMAL	120	VANCOMYCIN HCL	43
ULTRA-CARE LANCETS 30G		UNISTIK CZT COMFORT ..	120	VANCOMYCIN HCL IN	
.....	119	UNISTIK CZT NORMAL	120	NACL	43
ULTRACARE PEN NEEDLES		UNISTIK NORMAL	120	VANDAZOLE	178
.....	146	UNISTIK PRO SAFETY		VANISHPOINT INSULIN	
ULTRA-THIN II AUTO		LANCET	120	SYRINGE	147, 148
LANCET	119	UNISTIK SAFETY		VANISHPOINT SAFETY	
ULTRA-THIN II INS SYR		LANCETS 28G	120	SYRINGE	148
SHORT	146	UNISTIK SAFETY		VANISHPOINT SYRINGE ... 148	
ULTRA-THIN II INSULIN		LANCETS 30G	120	VANISHPOINT	
SYRINGE	146	UNISTIK TOUCH SAFETY		TUBERCULIN SYRINGE 148	
ULTRA-THIN II LANCETS	119	LANC 21G	120	VAQTA	177
ULTRA-THIN II MINI PEN		UNISTIK TOUCH SAFETY		VARENICLINE TARTRATE ..171	
NEEDLE	146	LANC 23G	120	VARIVAX	177
ULTRA-THIN II PEN		UNISTIK TOUCH SAFETY		VELIVET	73
NEEDLE SHORT	146	LANC 28G	120	VELTASSA	152
ULTRA-THIN II PEN		UNISTIK TOUCH SAFETY		VENLAFAXINE HCL	31
NEEDLES	146	LANC 30G	120	VENLAFAXINE HCL ER	31
UNIFINE PEN NEEDLES	146	UNISTRIP1 GENERIC	90	VENTOLIN HFA	25
UNIFINE PENTIPS	146, 147	UNITHROID	173	VERAPAMIL HCL	59
UNIFINE PENTIPS PLUS	147	UNIVERSAL 1 LANCETS		VERAPAMIL HCL ER	59
UNIFINE SAFECONTROL		THIN 26G	120	VERASENS BLOOD	
PEN NEEDLE	147			GLUCOSE TEST	90

VESTURA	68	WALGREENS LANCETS	ZOVIA 1/35 (28)	68
VICTOZA	36	SUPER THIN	ZOVIA 1/35E (28)	68
VIDA MIA AUTOLET		WALGREENS THIN	ZUBSOLV	20
LANCING DEV	120	LANCETS	ZUMANDIMINE	68
VIDA MIA UNIFINE		WALGREENS ULTRA		
PENTIPS	148	THIN LANCETS		
VIDA MIA UNILET		WAL-PHED		
LANCETS 28G	120	WEBCOL ALCOHOL PREP		
VIDA MIA UNILET		LARGE		
LANCETS 30G	120	WEBCOL ALCOHOL PREP		
VIENVA	68	MEDIUM		
VIIBRYD	31	WEGMANS UNIFINE		
VIIBRYD STARTER PACK ...	31	PENTIPS PLUS		
VINATE II	158	WELIREG		
VINCRISTINE SULFATE	49	WERA		
VINORELBINE TARTRATE ...	49	WESTAB ONE		
VIORELE	62	WESTAB PLUS		
VIRACEPT	54	WIXELA INHUB		
VIREAD	55	WYMZYA FE		
VIRT-NATE DHA	158	XARELTO		
VIRT-PN DHA	159	XELJANZ		
VIRT-PN PLUS	158	XELJANZ XR		
VIRTUSSIN A/C	74	XIFAXAN		
VIRTUSSIN AC W/ALC	74	XIIDRA		
VIRTUSSIN DAC	75	XOLAIR		
VIT B12-METHIONINE-		XOPENEX HFA		
INOS-CHOL	98	XTAMPZA ER		
VIT E-VIT C-BETA		XULANE		
CAROTENE	155	YUVAFEM		
VITALEE	155	ZAFEMY		
VITAMIN D		ZALEPLON		
(ERGOCALCIFEROL)	178	ZARAH		
VITAMINS ACD-FLUORIDE	156	ZATEAN-PN DHA		
VIVA DHA	158	ZATEAN-PN PLUS		
VIVAGUARD INO TEST		ZELAPAR		
STRIPS	90	ZENPEP		
VIVAGUARD LANCETS	120	ZEVALIN Y-90		
VIVAGUARD LANCING		ZEVXR INSULIN SYRINGE ..		
DEVICE	121	ZEVXR PEN NEEDLES		
VOLNEA	62	ZEVXR STERILE ALCOHOL		
VORICONAZOLE	38	PREP PAD		
VOTRIENT	47	ZEVXR TWIST TOP		
VP INSULIN SYRINGE	148	LANCETS 30G		
VRAYLAR	51	ZIDOVUDINE		
VYFEMLA	68	ZIPRASIDONE HCL		
VYLIBRA	68	ZOLINZA		
VYVANSE	8	ZOLMITRIPTAN		
WALGREENS ADV TRAVEL		ZOLPIDEM TARTRATE		
LANCETS	121	ZOLPIDEM TARTRATE ER ..		
WALGREENS LANCETS ...	121	ZOMIG		
WALGREENS LANCETS		ZONISAMIDE		
MICRO THIN	121	ZORBTIVE		