

Plan for your best health

Aetna Premier Plus Plan

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Table of Contents

INFORMATIONAL SECTION.....	5
ADHD/ANTI-NARCOLEPSY/ANTI-OBESITY/ANOREXIANTS - DRUGS FOR THE NERVOUS SYSTEM.....	16
ALLERGENIC EXTRACTS/BIOLOGICALS MISC - BIOLOGICAL AGENTS.....	20
AMEBICIDES - DRUGS FOR INFECTIONS.....	21
AMINOGLYCOSIDES - DRUGS FOR INFECTIONS.....	21
ANALGESICS - ANTI-INFLAMMATORY - DRUGS FOR PAIN AND FEVER.....	21
ANALGESICS - NONNARCOTIC - DRUGS FOR PAIN AND FEVER.....	26
ANALGESICS - OPIOID - DRUGS FOR PAIN AND FEVER.....	27
ANDROGENS-ANABOLIC - HORMONES.....	35
ANORECTAL AND RELATED PRODUCTS - RECTAL PREPARATIONS.....	36
ANTHELMINTICS - DRUGS FOR INFECTIONS.....	36
ANTIANGINAL AGENTS - DRUGS FOR THE HEART	37
ANTIANXIETY AGENTS - DRUGS FOR THE NERVOUS SYSTEM.....	37
ANTIARRHYTHMICS - DRUGS FOR THE HEART.....	38
ANTIASTHMATIC AND BRONCHODILATOR AGENTS - DRUGS FOR THE LUNGS.....	39
ANTICOAGULANTS - DRUGS FOR THE BLOOD.....	44
ANTICONVULSANTS - DRUGS FOR THE NERVOUS SYSTEM.....	45
ANTIDEPRESSANTS - DRUGS FOR THE NERVOUS SYSTEM.....	50
ANTIDIABETICS - HORMONES.....	54
ANTIDIARRHEAL/PROBIOTIC AGENTS - DRUGS FOR THE STOMACH.....	63
ANTIDOTES AND SPECIFIC ANTAGONISTS - DRUGS FOR OVERDOSE OR POISONING...	63
ANTIEMETICS - DRUGS FOR THE STOMACH.....	64
ANTIFUNGALS - DRUGS FOR INFECTIONS.....	65
ANTIHISTAMINES - DRUGS FOR THE LUNGS.....	66
ANTIHYPERLIPIDEMICS - DRUGS FOR THE HEART.....	68
ANTIHYPERTENSIVES - DRUGS FOR THE HEART	71
ANTI-INFECTIVE AGENTS - MISC. - DRUGS FOR INFECTIONS.....	75
ANTIMALARIALS - DRUGS FOR INFECTIONS.....	77
ANTIMYASTHENIC/CHOLINERGIC AGENTS - DRUGS FOR NERVES AND MUSCLES.....	78
ANTIMYCOBACTERIAL AGENTS - DRUGS FOR INFECTIONS.....	78
ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES - DRUGS FOR CANCER	78
ANTIPARKINSON AND RELATED THERAPY AGENTS - DRUGS FOR THE NERVOUS SYSTEM.....	86
ANTIPSYCHOTICS/ANTIMANIC AGENTS - DRUGS FOR THE NERVOUS SYSTEM	88
ANTISEPTICS & DISINFECTANTS - ANTISEPTICS AND DISINFECTANTS.....	92
ANTIVIRALS - DRUGS FOR INFECTIONS.....	92
BETA BLOCKERS - DRUGS FOR THE HEART	97
CALCIUM CHANNEL BLOCKERS - DRUGS FOR THE HEART	99
CARDIOTONICS - DRUGS FOR THE HEART	101
CARDIOVASCULAR AGENTS - MISC. - DRUGS FOR THE HEART	101
CEPHALOSPORINS - DRUGS FOR INFECTIONS	103
CHEMICALS.....	104
CONTRACEPTIVES - DRUGS FOR WOMEN	104
CORTICOSTEROIDS - HORMONES.....	112
COUGH/COLD/ALLERGY - DRUGS FOR THE LUNGS	114
DERMATOLOGICALS - DRUGS FOR THE SKIN	115

DIAGNOSTIC PRODUCTS	129
DIGESTIVE AIDS - DRUGS FOR THE STOMACH	138
DIURETICS - DRUGS FOR THE HEART	138
ENDOCRINE AND METABOLIC AGENTS - MISC. - HORMONES	140
ESTROGENS - HORMONES	145
FLUOROQUINOLONES - DRUGS FOR INFECTIONS	147
GASTROINTESTINAL AGENTS - MISC. - DRUGS FOR THE STOMACH	147
GENERAL ANESTHETICS - DRUGS FOR PAIN AND FEVER	150
GENITOURINARY AGENTS - MISCELLANEOUS - DRUGS FOR THE URINARY SYSTEM	150
GOUT AGENTS - DRUGS FOR PAIN AND FEVER	152
HEMATOLOGICAL AGENTS - MISC. - DRUGS FOR THE BLOOD	152
HEMATOPOIETIC AGENTS - DRUGS FOR NUTRITION	156
HEMOSTATICS - DRUGS FOR THE BLOOD	159
HYPNOTICS/SEDATIVES/SLEEP DISORDER AGENTS - DRUGS FOR THE NERVOUS SYSTEM	159
LAXATIVES - DRUGS FOR THE STOMACH	160
MACROLIDES - DRUGS FOR INFECTIONS	161
MEDICAL DEVICES AND SUPPLIES - MEDICAL SUPPLIES AND DURABLE MEDICAL EQUIPMENT	162
MIGRAINE PRODUCTS - DRUGS FOR THE NERVOUS SYSTEM	182
MINERALS & ELECTROLYTES - DRUGS FOR NUTRITION	184
MISCELLANEOUS THERAPEUTIC CLASSES - VITAMINS AND MINERALS	186
MOUTH/THROAT/DENTAL AGENTS - DRUGS FOR THE MOUTH AND THROAT	189
MULTIVITAMINS - DRUGS FOR NUTRITION	189
MUSCULOSKELETAL THERAPY AGENTS - DRUGS FOR MUSCLES, LIGAMENTS, TENDONS, AND BONES	195
NASAL AGENTS - SYSTEMIC AND TOPICAL - DRUGS FOR THE NOSE	197
NEUROMUSCULAR AGENTS - DRUGS FOR NERVES AND MUSCLES	198
OPHTHALMIC AGENTS - DRUGS FOR THE EYE	199
OTIC AGENTS - DRUGS FOR THE EAR	206
OXYTOCICS - HORMONES	206
PASSIVE IMMUNIZING AND TREATMENT AGENTS - BIOLOGICAL AGENTS	206
PENICILLINS - DRUGS FOR INFECTIONS	208
PHARMACEUTICAL ADJUVANTS	209
PROGESTINS - HORMONES	209
PSYCHOTHERAPEUTIC AND NEUROLOGICAL AGENTS - MISC. - DRUGS FOR THE NERVOUS SYSTEM	210
RESPIRATORY AGENTS - MISC. - DRUGS FOR THE LUNGS	215
SULFONAMIDES - DRUGS FOR INFECTIONS	216
TETRACYCLINES - DRUGS FOR INFECTIONS	216
THYROID AGENTS - HORMONES	217
ULCER DRUGS/ANTISPASMODICS/ANTICHOLINERGICS - DRUGS FOR THE STOMACH	218
URINARY ANTISPASMODICS - DRUGS FOR THE URINARY SYSTEM	221
VAGINAL AND RELATED PRODUCTS - DRUGS FOR WOMEN	221
VASOPRESSORS - DRUGS FOR THE HEART	222
VITAMINS - DRUGS FOR NUTRITION	223

How to use this guide

Your guide includes a list of commonly used drugs covered on your pharmacy plan. The amount you pay depends on the drug your doctor prescribes. It's either a flat fee or a percentage of the prescription's price after you meet your deductible, if applicable. Preferred generic drugs cost less. Preferred brand drugs will have a higher cost.

Your plan includes

- Brand and generic drugs that are hand-picked for their quality and effectiveness
- A specialty pharmacy that fills specialty prescriptions (ones that are injected, infused or taken by mouth) — and provides services that include personal support, helpful resources and training, and free secure home delivery
- A home delivery pharmacy that delivers maintenance drugs to your home or wherever you choose (for drugs that are taken regularly to treat conditions like diabetes or asthma)

What you can expect to pay

With your pharmacy plan, the amount you pay depends on the drug your doctor prescribes. It's either a flat fee or a percentage of the drug's/medicine's price.

Each drug is grouped as a generic, a brand or a specialty drug. The preferred drugs within these groups will generally save you money compared to a non-preferred drug. Typically, generic drugs are less expensive than brands.

Specialty prescription drugs typically include higher-cost drugs that require special handling, special storage or monitoring. These types of drugs may include, but are not limited to, drugs that are injected, infused, inhaled or taken by mouth.

You're covered for all types of medicine — some more expensive, and some less.

- **Generic:** the lowest cost
- **Preferred brand:** a slightly higher cost
- **Non-preferred brand:** a higher cost
- **Preferred Specialty:** lower cost for specialty drugs
- **Non-preferred Specialty:** higher cost for non-preferred specialty drugs

Your pharmacy plan may not have all the coverage levels listed above so check your plan documents to see how much you will pay.

For your exact coverage and cost, and to learn more about your plan

Visit the website that's on your member ID card. Then log in to your account, where you can:

- Find out the coverage* and estimate of cost for specific drugs
- View your deductibles and plan limits
- Order medications
- Check your pharmacy order status
- Get a member ID card
- View your claims, Explanation of Benefits and more.

* Check your plan documents for coverage information. Your plan may not cover certain drugs such as infertility, erectile dysfunction, weight loss and smoking cessation.

Have more questions about your pharmacy benefits?

We're here to help. There are several ways you can learn more about your benefits:

- Check your Plan Design and Benefits Summary in your enrollment kit.
- Call the toll-free number on your member ID card.
- Review our pharmacy frequently asked questions (FAQs) and answers. Just visit the website that's on your member ID card to search for the "Pharmacy FAQ."

Specialty Pharmacy Network

An in-network specialty pharmacy can fill your prescriptions for specialty drugs. These are the types of drugs that may be injected, infused or taken by mouth. They often need special storage and handling. And they need to be delivered quickly. A nurse or pharmacist may monitor you during your treatment, if needed. With this type of pharmacy, you can get this medicine sent right to your home.

How to get started with a specialty pharmacy

Ordering your prescriptions through our specialty pharmacy is easy. And we typically offer a 30-day medicine supply.

- **To transfer your prescription**, just call us toll-free at **1-866-353-1892**.
- **For a new prescription**, your doctor can send it to us in one of four ways:
 - 1. Electronically:** Through e-prescribe
 - 2. Fax:** **1-866-329-2779**
 - 3. Phone:** **1-866-782-2779**, option 2

If you mail in your own prescription, please send it with a completed Patient Profile Form. To find this form, just visit the website that's on your member ID card, to search for the "Patient Profile Form."

CVS Caremark Mail Service Pharmacy™

You can have maintenance drugs sent right to your home or anywhere else you choose by CVS Caremark Mail Service Pharmacy. These are drugs that are taken regularly for chronic conditions like diabetes or asthma. Depending on your plan, you can get up to a 90-day supply of medicine for less cost. It's fast and convenient, and standard shipping is always free.

Get started right away

You can submit your order using one of these options:

- 1. Online** — Visit your secure member website and sign in to your account. There you can add or remove your prescriptions.
- 2. Phone** — Call us toll-free, 24/7 at **1-888-792-3862**. If you need the help of a telephone device for the hard of hearing, call **1-877-833-2779**.
- 3. Mail** — Get a new prescription from your doctor. Then mail it to us with a completed order form. You can find the form on your secure member website. The mailing address is on the form.

Your doctor can submit your order using one of these options:

- 1. Online** — They can submit your prescriptions using the e-prescribe services on our provider website.
- 2. Fax** — They can fax your prescription to **1-877-270-3317**. Make sure they include your member ID number, date of birth and mailing address on the fax cover sheet. Only a doctor may fax a prescription.

Frequently asked questions

How can I save on prescriptions?

Here are some tips to pay less out of pocket for your prescription drugs:

- Ask your doctor to consider prescribing drugs that are on the Pharmacy Drug Guide (formulary).
- Ask your doctor to consider prescribing generic drugs instead of brand-name drugs.
- Our home delivery pharmacy may save you money.

For more information, visit the website on your member ID card and log in to your account.

What are generic drugs?

Generic drugs are proven to be just as safe and effective as brand-name drugs. They contain the same active ingredients in the same amounts as the brand-name drugs and work the same way. So they have the same risks and benefits as brand-name drugs. However, they typically cost less.

When appropriate, your doctor may decide to prescribe a generic drug or allow the pharmacist to substitute a generic drug.

What is precertification?

Precertification is one way that we can help you and your doctor find safe, appropriate drugs and keep costs down. Precertification means that you or your doctor need to get approval from the plan before certain drugs will be covered. Generally, precertification applies to drugs that:

- Are often taken in the wrong way
- Should only be used for certain conditions
- Often cost more than other drugs that are proven to be just as effective

Keep in mind that your doctor must contact us to request approval of coverage for these drugs.

What is step therapy?

Some drugs require step therapy. This means that you must try one or more prerequisite drug(s) before a step therapy drug is covered.

The prerequisite drugs have U.S. Food and Drug Administration (FDA) approval and may cost less. They treat the same condition as the step therapy drug.

If you don't try the appropriate prerequisite drug first, you may need to pay full cost for the step-therapy drug.

What are quantity limits?

Quantity limits help your doctor and pharmacist make sure that you use your drug correctly and safely. We use medical guidelines and FDA-approved recommendations from drug makers to set these coverage limits. The quantity limit program includes:

- Dose efficiency edits** — Limits prescription coverage to one dose per day for drugs that have approval for once-daily dosing
- Maximum daily dose** — If a prescription is lower than the minimum or higher than the maximum allowed dose, a message is sent to the pharmacy
- Quantity limits over time** — Limits prescription coverage to a specific number of units over a specific amount of time

What if I need a drug that requires an exception to the precertification, step therapy or quantity limits requirements? Or what if I need a drug that's not covered under my plan?

In certain cases, you or your prescriber can request a medical exception to the precertification, step therapy or quantity limits requirements or for a drug that's not covered on your plan. You can ask for your request to be expedited. Expedited coverage decisions are made within 24 hours.

We'll then contact you or your prescriber with our decision. All medically necessary outpatient prescription drugs will be covered. If a medical exception is approved, you only need to pay the copay after the deductible. This amount is based on your pharmacy plan design.

How can your provider request a medical exception?

- Submit their request through our secure provider website on NaviNet®.
- Call the Aetna Pharmacy Precertification Unit:
Non-Specialty **1-800-294-5979** or
Specialty **1-866-814-5506**.
- Fax the completed request form to:
Non-Specialty **1-888-836-0730** or
Specialty **1-866-249-6155**.
- Mail the completed request form to:
Aetna Pharmacy Management
1300 East Campbell Road
Richardson, TX 75081

Pharmacy and Therapeutics (P&T) committee

The services of an independent National Pharmacy and Therapeutics Committee (“P&T Committee”) are utilized to approve safe and clinically effective drug therapies. The P&T Committee is an external advisory body of clinical professionals from across the United States. The P&T Committee’s voting members include physicians, pharmacists, a pharmacoeconomist and a medical ethicist, all of whom have a broad background of clinical and academic expertise regarding prescription drugs. Voting members of the P&T Committee are not employees of CVS Caremark and must disclose any financial relationship or conflicts of interest with any pharmaceutical manufacturers.

Can the formulary change during the year?

The formulary can change throughout the year. Some reasons why it can change include:

- New drugs are approved.
- Existing drugs are removed from the market.
- Prescription drugs may become available over the counter (without a prescription). Over-the-counter drugs are not generally covered in a formulary.
- Brand-name drugs lose patent protection and generic versions become available. When this happens, the generic drug will be covered in place of the brand-name drug. The brand-name drug is likely to become non-formulary or covered at a higher cost. See the “What are generic drugs?” section above for more information.

Commercial 1557 Nondiscrimination Notice

Aetna complies with applicable Federal civil rights laws and does not discriminate, exclude or treat people differently based on their race, color, national origin, sex, age, or disability.

Aetna provides free aids/services to people with disabilities and to people who need language assistance.

If you need a qualified interpreter, written information in other formats, translation or other services, call the number on your ID card.

If you believe we have failed to provide these services or otherwise discriminated based on a protected class noted above, you can also file a grievance with the Civil Rights Coordinator by contacting:

Civil Rights Coordinator,
P.O. Box 14462, Lexington, KY 40512 (CA HMO customers: PO Box 24030 Fresno, CA 93779),
1-800-648-7817, TTY: 711,
Fax: 859-425-3379 (CA HMO customers: 860-262-7705),
CRCCoordinator@aetna.com.

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

U.S. Department of Health and Human Services, 200 Independence Avenue SW., Room 509F, HHH Building, Washington, DC 20201, or at 1-800-368-1019, 800-537-7697 (TDD).

TTY: 711

To access language services at no cost to you, call the number on your ID card.

Para acceder a los servicios de idiomas sin costo, llame al número que figura en su tarjeta de identificación. (Spanish)

如欲使用免費語言服務，請致電您 ID 卡上的電話號碼 (Chinese)

Afin d'accéder aux services langagiers sans frais, veuillez composer le numéro inscrit sur votre carte d'identité. (French)

Para ma-access ang mga serbisyo sa wika nang wala kayong babayaran, tawagan ang numero sa inyong ID card. (Tagalog)

T'áá ni nizaad k'ehjí bee níká a'doowoł doo bágħi ilinígoo naaltoos bee atah níljiġi nanitínígíi bee néhéo'dólzinígíi béesh bee hane'í bikáá' áají' hólne'. (Navajo)

Um auf für Sie kostenlose Sprachdienstleistungen zuzugreifen, rufen Sie die Nummer auf Ihrer ID-Karte an. (German)

Për shërbime përkthimi falas për ju, telefononi në numrin që gjendet në kartën tuaj të identitetit. (Albanian)

የቁንቁ አገልግሎቶችን የለከናየ ለማግኘት፡ በመታወቂያዎች ላይ የለውን ቅጥር ይደውሉ፡ (Amharic)

للحصول على الخدمات اللغوية دون أي تكالفة، الرجاء الاتصال على الرقم الموجود على بطاقةك الشخصية. (Arabic)

Անվճար լեզվական ծառայություններից օգտվելու համար զանգահարեք ձեր ինքնության (ID) քարտի վրա նշված հեռախոսահամարով։ (Armenian)

Kugira uronke serivisi z'indimi atakiguzi, Hamagara inumero iri kuri karangamuntu kawe. (Bantu)

আপনাকে বিনামূলে ভাষা পরিষেবা পেতে হলে আপনার পরিচয়পত্রে দেওয়া নম্বের টেলিফোন করুন। (Bengali)

Ngadto maakes ang mga serbisyo sa pinulongan alang libre, tawagan sa numero sa nimong ID card. (Bisayan-Visayan)

သင့်အနေဖြင့် အခကြောင်းငွေ မပေးရပဲ ဘာသာစကား၏နောက်မူများ ရရှိနိုင်ရန်၊ သင့် ID ကတ်ပေါ်တွင်ရှိသော ဖုန်းနံပါတ်အား ခေါ်ဆိုပါ။ (Burmese)

Per accedir a serveis lingüístics sense cap cost per vostè, telefoni al número indicat a la seva targeta d'identificació. (Catalan)

Para un hago' i setbision lengguâhi ni dibâtde para hågu, ågang i numiru gi iyo-mu kard aidentifikasion. (Chamorro)

GyâñéL ShôhâñéL TóñéñéL L AñéñéL JGEGWLJ ñay, OñéñéWóñé ÑéñéY J4ñéñéL IrSAññP
ÓñéT ID ThñéñéL GIVPT. (Cherokee)

Anumpa tohsholi I toksvli ya peh pilla ho ish I paya hinla kvt chi holisso iskitini holtena takanli ma I paya. (Choctaw)

Tajaajiiloota afaanii gatii bilisaa ati argaachuuf,lakkoofsa duugda waraaqaa eenyummaa (ID) kee irraa jiruun bilbili. (Cushite-Oromo)

Voor gratis toegang tot taaldiensten, bel het nummer op uw ID-kaart. (Dutch)

Pou jwenn sèvis lang gratis, rele nimewo telefòn ki sou kat idantite ou a. (French Creole-Haitian)

Για να επικοινωνήσετε χωρίς χρέωση με το κέντρο υποστήριξης πελατών στη γλώσσα σας, τηλεφωνήστε στον αριθμό που αναγράφεται στην κάρτα σας προνομίων μέλους. (Greek)

તમારે કોઇ જતના ખર્ચ વિના ભાષાની સેવાઓની પહોંચ માટે, તમારા આઇડી કાર્ડ ઉપરના નંબરને કોલ કરો. (Gujarati)

No ka wala'au 'ana me ka lawelawe 'ōlelo e kahea aku i ka helu kelepona ma kāu kāleka ID. Kāki 'ole 'ia kēia kōkua nei. (Hawaiian)

आपके लिए बिना किसी कीमत के भाषा सेवाओं का उपयोग करने के लिए, अपने आईडी कार्ड पर दिये नम्बर पर कॉल करें। (Hindi)

Xav tau kev pab txhais lus tsis muaj nqi them rau koj, hu tus naj npawb ntawm koj daim npav ID.
(Hmong)

Iji nwetaòhèrè na ọru gasi asusu n'efu, kpoò nomba no na kaadị ID gi. (Ibo)

Tapno maaksesyo dagiti serbisio maipapan iti pagsasao nga awan ti bayadanyo, tawagan ti numero idiy ID cardyo. (Ilocano)

Untuk mengakses layanan bahasa tanpa dikenakan biaya, hubungi nomor telepon di kartu identitas Anda. (Indonesian)

Per accedere ai servizi linguistici, senza alcun costo per lei, chiami il numero sulla tessera identificativa.
(Italian)

言語サービスを無料でご利用いただくには、IDカードに記載の番号にお電話ください。
(Japanese)

လာတ်ကမ္ဘာရိုက်အတ်မှစ။အတ်ပံ့တ်မှတ်ဖုန်လာတအိုဒီးအပူလာနကာဘုရားဟန်နှင့်၊ ကိုဘုရားလိုတဲ့နှင့်ရိုက်လာအိုလာနတ်ဂါးမိုး (ID) အားလိုက်တော် (Karen)

무료언어 서비스를 이용하려면 보험 ID 카드에 수록된 번호로 전화해 주십시오. (Korean)

𝙈 dyi wuɖu-dù kà kò qò bě dyi móuń nì pídyi ní, níi, qá nòbà nià nì ID káàò kጀe. (Kru-Bassa)

بۇ دەسپىز اگەيشتن بە خزمەتگۈزارى زمان بېنى تىچۈن بۇ تو، پەيپەندى بىكە بە ژمارەسى سەر ئاي دى (ID) كارتى خوت.
(Kurdish)

ເຜົ້າຂ່າຍໃຊ້ການບໍລິການພາກສາໄດ້ລັບແລະຄ່າຕ່າງປ່າຍ,
ໃຫ້ໃຫຍ່ເປີໃຫຍ່ບອກໄວ້ໃນປັດປະລຳຕົວຂອງທ່ານ. (Laotian)

कोणत्याही शुल्काशिवाय भाषा सेवा प्राप्त करण्यासाठी, तुमच्या ID कार्डवरील क्रमांकावर फोन करा. (Marathi)

Nan etal nan jikin jiban ko ikijen kajin ilo an ejelok onen nan kwe, kirlok nomba eo ilo ID kaat eo am.
(Marshallese)

Pwehn alehdi sawas en lokaia kan ni sohte pweipwei, koahlih nempe nan amhw doaropwe en ID.
(Micronesian-Pohnpeian)

ເພື່ອຂໍ້ມູນລົດເສັກມູນກາສາແຈ້ລຄຕົກຕົກໄໝ້ສູມາບໍລາຍການມູນກາ ສູມເກມໂຮງຮັສຕູາຈີກາກ
ເລີຍແຈ້ລມາກໃຈໄສີບໍ່ມູນສູມາລໍ່ຂູ້ອະບສ່ຍາກມູນກາ (Mon-Khmer, Cambodian)

नि:शुल्क भाषा सेवा प्राप्त गर्न आफ्नो परिचयपत्रमा भएको नम्बरमा टेलिफोन गर्नुहोस् । (Nepali)

Të kör yin wëer de thokin ke cín wëu kör keek tënqen yin. Ke col koc ye koc kuony në nomba de abac tō
në ID kard du kou. (Nilotic-Dinka)

For tilgang til kostnadsfri språktjenester, ring nummeret på ID-kortet ditt. (Norwegian)

Um Schprooch Services zu griege mitaus Koscht, ruff die Nummer uff dei ID Kaart. (Pennsylvania Dutch)

برای دسترسی به خدمات زبان به طور رایگان، با شماره قید شده روی کارت شناسایی خود تماس بگیرید.
(Persian-Farsi)

Aby uzyskać dostęp do bezpłatnych usług językowych proszę zadzwonić numer telefonu na Twojej
Karcie Identykującej (Polish)

Para acessar os serviços de idiomas sem custo para você, ligue para o número que consta na sua
identidade. (Portuguese)

ਤੁਹਾਡੇ ਲਈ ਬਿਨਾਂ ਕਿਸੇ ਕੀਮਤ ਵਾਲੀਆਂ ਭਾਸ਼ਾ ਸੇਵਾਵਾਂ ਦੀ ਵਰਤੋਂ ਕਰਨ ਲਈ, ਆਪਣੇ ਆਈਡੀ ਕਾਰਡ 'ਤੇ ਦਿੱਤੇ ਨੰਬਰ ਤੇ ਛੋਨ
ਕਰੋ। (Punjabi)

Pentru a accesa gratuit serviciile de limbă, apelați numărul de pe cardul dvs. de identificare.
(Romanian)

Для того чтобы бесплатно получить помощь переводчика, позвоните по телефону, приведенному
на вашей карточке участника плана. (Russian)

Mo le mauaina o auaunaga tau gagana e aunoa ma se totogi, vala'au le numera I luga o lau pepa ID.
(Samoan)

Za besplatne prevodilačke usluge pozovite broj naveden na Vašoj identifikacionoj kartici. (Serbo-Croatian)

Heeba a hasta jangirde djey wolde, apelou lamba djey do windi ha dereji Maada. (Sudanic-Fulfulde)

Kupata huduma za lugha bila malipo kwako, piga nambari iliyo kwenye kadi yako ya kitambulisho. (Swahili)

، مصيغة تامه خل يليجية دينات حاليته مكتبة، مسبحة، مكتبة خل يليقة دينات مكتبة، مسبحة،
Syriac-) (Assyrian

మీరు భాష స్వవలను ఉచితంగా అందుకునేందుకు, మీ ID కార్యపై ఉన్న సంబంధాలకు కాల్ చేయండి. (Telugu)

หากท่านต้องการเข้าถึงการบริการทางด้านภาษาโดยไม่มีค่าใช้จ่าย โปรดโทรหมายเลขที่แสดงอยู่บนบัตรประจำตัวของท่าน (Thai)

Kapau 'oku ke fiema'u ta'etötöngi 'a e ngaahi sēvesi kotoa pē he ngaahi lea kotoa, telefoni ki he fika 'oku hā atu 'i ho'o ID kaati. (Tongan)

Ren omw kopwe angei aninisin eman chon awewei (ese kamo), kopwe kori ewe nampa mei mak won noum ena katen ID (Trukese)

Sizin için ücretsiz dil hizmetlerine erişebilmek için, kartınızdaki numarayı arayın. (Turkish)

Щоб отримати безкоштовний доступ до мовних послуг, задзвоніть за номером, вказаним на Вашій ідентифікайній картці. (Ukrainian)

بلاقیمت زبان سر متعلقہ خدمات حاصل کرنے کے لیے، اپنے شناختی کارڈ پر درج نمبر پر بات کریں۔ (Urdu)

Nếu quý vị muốn sử dụng miễn phí các dịch vụ ngôn ngữ, hãy gọi tới số điện thoại ghi trên thẻ ID (Nhận dạng) của quý vị. (Vietnamese)

צוטרייט שפראָך באַדינונגען אין קײַין פרײַז צו אַיר, רופֶן די נומער אוּפֶן דיין שיין קאָרט. (Yiddish)

Lati wonú awon isẹ èdè l'ofe fun o, pe nomba ori káádi idánimö re. (Yoruba)

Remember to visit the website on your member ID card. Then sign in to your account for the most up-to-date information.

Please note that if your prescription drug benefits plan changes, the information here may no longer apply.

Medications on the Aetna Drug Guide, precertification, step-therapy and quantity limits lists are subject to change.

A copayment is a flat fee. Coinsurance is a percentage of the rate that Aetna negotiates with the plan sponsor for covered prescriptions except as required by law to be otherwise. Some drugs on the Pharmacy Drug Guide (formulary) may be subject to manufacturer rebates. Coinsurance is calculated before any rebates are subtracted. That means it may be possible for your cost of a preferred drug to be higher than your cost of a non-preferred drug. Louisiana members: depending on your specific plan and the prescription medication in question, you may in some instances be subject to an excess consumer cost burden for prescription drugs as defined by your state.

Not all health services are covered. Your plan may not cover certain drugs such as infertility, erectile dysfunction, weight loss and smoking cessation. See plan documents for a complete description of benefits, exclusions, limitations and conditions of coverage. Plan features and availability may vary by location and are subject to change.

Aetna or its affiliate(s) may receive rebates from drug manufacturers. Rebates may reduce the amount a member pays the pharmacy for covered prescriptions. Information is subject to change. The drugs on the Pharmacy Drug Guide (formulary), Formulary Exclusions, Precertification, and Quantity Limit Lists are subject to change.

The quantity limits and step therapy drug coverage review programs are not available in all service areas. However, these programs are available to self-funded plans.

In accordance with state law, commercial fully insured members in Louisiana and Texas (except Federal Employee Health Benefit Plan members) who are receiving coverage for medications that are added or removed from the Pharmacy Drug Guide (formulary), Precertification, Quantity Limits or Step-Therapy Lists during the plan year will continue to have those medications covered at the same benefit level until their plan's renewal date. In Texas, precertification approval is known as "pre-service utilization review." It is not "verification" as defined by Texas law.

In accordance with state law, certain fully insured commercial California members (except Federal Employee Health Benefit Plan members) who obtained approval from an Aetna plan for coverage of drugs that are later added to the Preauthorization or Step Therapy Lists or removed from the Pharmacy Drug Guide will continue to have those drugs covered, for as long as the treating in-network provider continues prescribing them, provided that the drug is appropriately prescribed and is considered safe and effective for treating the enrollee's medical condition. Aetna reserves the right to periodically request clinical information from your provider to assess your medical condition and the appropriateness of your ongoing treatment. Failure to provide clinical information could result in subsequent denial of coverage for this medication.

In accordance with state law, fully insured Commercial Connecticut preferred provider organization (PPO) members (except Federal Employee Health Benefit Plan members) who are receiving coverage for medications that are added to the Precertification or Step-Therapy Lists will continue to have those medications covered for as long as the prescriber prescribes them, provided the drug is medically necessary and more medically beneficial than other covered drugs. Nothing in this section shall preclude the prescribing provider from prescribing another drug covered by the plan that is medically appropriate for the enrollee, nor shall anything in this section be construed to prohibit generic drug substitutions.

This material is for information only. It contains only a partial, general description of plan benefits or programs and does not constitute a contract. See plan documents for a complete description of benefits, exclusions, limitations and conditions of coverage. Plan features and availability may vary by location and are subject to change. Providers are independent contractors and are not agents of Aetna. Provider participation may change without notice. Aetna does not provide care or guarantee access to health services. Information is subject to change. CVS Caremark Mail Service Pharmacy is part of the CVS Health family of companies.

Coverage Requirements and Limits

= Brand-name drug expected to become available generically in the near future. After the generic drug becomes available, the brand-name drug may be covered at a higher non-preferred copay and/or added to the Formulary Exclusion List. The brand-name drug may also be subject to precertification and/or step-therapy.

AL = Age Limit

IBC = Indication Based Coverage

LGC = Lowest Generic Copay Applies

MPG = PG tier applies to members residing in Massachusetts.

N1 = Refer to member plan documents for Erectile Dysfunction use/coverage.

N2 = Drug tier when CE does not apply

NPL = (National Precertification List) – Prior authorization, also called preauthorization or precertification, is required for all plans. Your doctor must contact us to request approval for coverage.

PA = Prior Authorization

QL = Quantity Limit

Select OTC = Select OTC

Program if your pharmacy plan includes this program you may have coverage for products noted with a doctors prescription. Please see your plan benefit

Drug Tier

CE = Copay Exception: Available to some members at no cost with a prescription from your provider when obtained at an in-network pharmacy. Certain limitations may apply.

G = Generic

NPB = Non-Preferred Brand

NPSp = Non-Preferred Specialty

PB = Preferred Brand

PSP = Preferred Specialty

lowercase italics = Generic drugs

UPPERCASE = Brand name drugs

information for specific coverage details.

SP = You may pay higher out of pocket costs and may be required to get these products at an Aetna Specialty Pharmacy network provider, like Aetna Specialty Pharmacy. Specialty products are limited to a 30 day supply.

UF11 = Covered at preferred tier with no PA, no ST for members residing in Illinois

UF9 = Drug tier for Student Health members residing in Colorado

UN6 = Prior Authorization does not apply to members residing in Pennsylvania and Washington

Prescription Drug Name	Drug Tier	Coverage Requirements and Limits
ADHD/ANTI-NARCOLEPSY/ANTI-OBESITY/ANOREXIANTS - DRUGS FOR THE NERVOUS SYSTEM		
ADDERALL ORAL TABLET 10 MG, 12.5 MG, 15 MG, 20 MG, 30 MG, 5 MG, 7.5 MG (<i>amphetamine-dextroamphetamine</i>)	NPB	QL (4 tablets per 1 day)
ADDERALL XR ORAL CAPSULE EXTENDED RELEASE 24 HOUR 10 MG, 15 MG, 20 MG, 25 MG, 30 MG, 5 MG (<i>amphetamine-dextroamphetamine</i>)	NPB	QL (2 capsules per 1 day)
ADHANSIA XR ORAL CAPSULE EXTENDED RELEASE 24 HOUR 25 MG, 35 MG, 45 MG, 55 MG, 70 MG, 85 MG (<i>methylphenidate hcl</i>)	NPB	QL (1 capsule per 1 day)
ADZENYS ER ORAL SUSPENSION EXTENDED RELEASE 1.25 MG/ML (<i>amphetamine</i>)	NPB	QL (15 ml per 1 day)
ADZENYS XR-ODT ORAL TABLET EXTENDED RELEASE DISPERSIBLE 12.5 MG, 15.7 MG, 18.8 MG, 3.1 MG, 6.3 MG, 9.4 MG (<i>amphetamine</i>)	NPB	QL (1 tablet per 1 Day)
<i>amphetamine er oral suspension extended release 1.25 mg/ml</i>	G	QL (15 ML per 1 day)
<i>amphetamine sulfate oral tablet 10 mg, 5 mg</i>	G	QL (4 tablets per 1 Day)
<i>amphetamine-dextroamphet er oral capsule extended release 24 hour 10 mg, 15 mg, 20 mg, 25 mg, 30 mg, 5 mg</i>	G	QL (2 capsules per 1 day)
<i>amphetamine-dextroamphetamine oral tablet 10 mg, 12.5 mg, 15 mg, 20 mg, 30 mg, 5 mg, 7.5 mg</i>	G	QL (4 tablets per 1 day)

2020 Pharmacy Drug Guide - Premier Plus

The formulary is updated the first week of each month.

12/01/2020

Prescription Drug Name	Drug Tier	Coverage Requirements and Limits
APTENSIO XR ORAL CAPSULE EXTENDED RELEASE 24 HOUR 10 MG, 15 MG, 20 MG, 30 MG, 40 MG, 50 MG, 60 MG (<i>methylphenidate hcl</i>)	NPB	QL (1 capsule per 1 day)
<i>armodafinil oral tablet 150 mg, 200 mg, 250 mg, 50 mg</i>	G	
<i>atomoxetine hcl oral capsule 10 mg, 18 mg, 25 mg, 40 mg, 60 mg</i>	G	QL (2 capsules per 1 Day)
<i>atomoxetine hcl oral capsule 100 mg, 80 mg</i>	G	QL (1 capsule per 1 Day)
<i>caffeine citrate oral solution 20 mg/ml, 60 mg/3ml</i>	G	
<i>clonidine hcl er oral tablet extended release 12 hour 0.1 mg</i>	G	QL (4 tablets per 1 day)
CONCERTA ORAL TABLET EXTENDED RELEASE 18 MG, 27 MG, 54 MG (<i>methylphenidate hcl</i>)	NPB	QL (2 tablets per 1 day)
CONCERTA ORAL TABLET EXTENDED RELEASE 36 MG (<i>methylphenidate hcl</i>)	NPB	QL (4 tablets per 1 day)
COTEMPLA XR-ODT ORAL TABLET EXTENDED RELEASE DISPERSIBLE 17.3 MG, 25.9 MG, 8.6 MG (<i>methylphenidate</i>)	NPB	QL (1 tablet per 1 Day)
DAYTRANA TRANSDERMAL PATCH 10 MG/9HR, 15 MG/9HR, 20 MG/9HR, 30 MG/9HR (<i>methylphenidate</i>)	NPB	#; QL (1 patch per 1 day)
DESOXYN ORAL TABLET 5 MG (<i>methamphetamine hcl</i>)	NPB	QL (4 tablets per 1 day)
DEXEDRINE ORAL CAPSULE EXTENDED RELEASE 24 HOUR 10 MG, 15 MG, 5 MG (<i>dextroamphetamine sulfate</i>)	NPB	QL (3 capsules per 1 day)
<i>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</i>	G	QL (2 capsules per 1 day)
<i>dexmethylphenidate hcl oral tablet 10 mg, 2.5 mg, 5 mg</i>	G	QL (4 tablets per 1 day)
<i>dextroamphetamine sulfate er oral capsule extended release 24 hour 10 mg, 15 mg, 5 mg</i>	G	QL (3 capsules per 1 day)
<i>dextroamphetamine sulfate oral solution 5 mg/5ml</i>	G	QL (40 ML per 1 day)
<i>dextroamphetamine sulfate oral tablet 10 mg, 5 mg</i>	G	QL (4 tablets per 1 day)
DYANAVEL XR ORAL SUSPENSION EXTENDED RELEASE 2.5 MG/ML (<i>amphetamine</i>)	NPB	QL (240 ml per 30 Days)
EVEKEO ODT ORAL TABLET DISPERSIBLE 10 MG, 5 MG (<i>amphetamine sulfate</i>)	NPB	QL (4 tablets per 1 day)
EVEKEO ODT ORAL TABLET DISPERSIBLE 15 MG, 20 MG (<i>amphetamine sulfate</i>)	NPB	QL (2 tablets per 1 day)
EVEKEO ORAL TABLET 10 MG, 5 MG (<i>amphetamine sulfate</i>)	NPB	QL (120 tablets per 30 days)
FOCALIN ORAL TABLET 10 MG, 2.5 MG, 5 MG (<i>dexmethylphenidate hcl</i>)	NPB	QL (4 tablets per 1 day)

2020 Pharmacy Drug Guide - Premier Plus

The formulary is updated the first week of each month.

12/01/2020

Prescription Drug Name	Drug Tier	Coverage Requirements and Limits
FOCALIN XR ORAL CAPSULE EXTENDED RELEASE 24 HOUR 10 MG, 15 MG, 20 MG, 25 MG, 30 MG, 35 MG, 40 MG, 5 MG (<i>dexamethylphenidate hcl</i>)	NPB	QL (2 capsules per 1 day)
<i>guanfacine hcl er oral tablet extended release 24 hour 1 mg</i>	G	QL (1 tablet per 1 day)
<i>guanfacine hcl er oral tablet extended release 24 hour 2 mg, 3 mg, 4 mg</i>	G	QL (1 tablet per 1 Day)
INTUNIV ORAL TABLET EXTENDED RELEASE 24 HOUR 1 MG, 2 MG, 3 MG, 4 MG (<i>guanfacine hcl</i>)	NPB	QL (1 tablet per 1 day)
JORNAY PM ORAL CAPSULE EXTENDED RELEASE 24 HOUR 100 MG, 20 MG, 40 MG, 60 MG, 80 MG (<i>methylphenidate hcl</i>)	NPB	QL (1 capsule per 1 day)
KAPVAY ORAL TABLET EXTENDED RELEASE 12 HOUR 0.1 MG (<i>clonidine hcl</i>)	NPB	QL (4 tablets per 1 day)
<i>methylphenidate hcl</i> (Metadate Er Oral Tablet Extended Release 20 Mg)	G	QL (3 tablets per 1 day)
<i>methamphetamine hcl oral tablet 5 mg</i>	G	QL (4 tablets per 1 day)
METHYLIN ORAL SOLUTION 10 MG/5ML (<i>methylphenidate hcl</i>)	NPB	QL (30 ML per 1 day)
METHYLIN ORAL SOLUTION 5 MG/5ML (<i>methylphenidate hcl</i>)	NPB	QL (60 ML per 1 day)
<i>methylphenidate hcl er (cd) oral capsule extended release 10 mg, 20 mg, 30 mg, 40 mg, 50 mg, 60 mg</i>	G	QL (1 capsule per 1 day)
<i>methylphenidate hcl er (la) oral capsule extended release 24 hour 10 mg, 60 mg</i>	G	QL (1 capsule per 1 Day)
<i>methylphenidate hcl er (la) oral capsule extended release 24 hour 20 mg, 40 mg</i>	G	QL (1 capsule per 1 day)
<i>methylphenidate hcl er (la) oral capsule extended release 24 hour 30 mg</i>	G	QL (2 capsules per 1 day)
<i>methylphenidate hcl er (xr) oral capsule extended release 24 hour 10 mg, 15 mg, 20 mg, 30 mg, 40 mg, 50 mg, 60 mg</i>	G	QL (1 capsule per 1 day)
<i>methylphenidate hcl er oral tablet extended release 10 mg</i>	G	QL (3 tablets per 1 Day)
<i>methylphenidate hcl er oral tablet extended release 18 mg, 27 mg, 54 mg</i>	G	QL (2 tablets per 1 day)
<i>methylphenidate hcl er oral tablet extended release 20 mg</i>	G	QL (3 tablets per 1 day)
<i>methylphenidate hcl er oral tablet extended release 24 hour 18 mg, 27 mg, 54 mg</i>	G	QL (2 tablets per 1 day)
<i>methylphenidate hcl er oral tablet extended release 24 hour 36 mg</i>	G	QL (4 tablets per 1 day)

2020 Pharmacy Drug Guide - Premier Plus

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12/01/2020

Prescription Drug Name	Drug Tier	Coverage Requirements and Limits
methylphenidate hcl er oral tablet extended release 36 mg	G	QL (4 tablets per 1 day)
methylphenidate hcl er oral tablet extended release 72 mg	G	QL (1 tablet per 1 Day)
methylphenidate hcl oral solution 10 mg/5ml	G	QL (30 ML per 1 day)
methylphenidate hcl oral solution 5 mg/5ml	G	QL (60 ML per 1 day)
methylphenidate hcl oral tablet 10 mg, 20 mg, 5 mg	G	QL (6 tablets per 1 day)
methylphenidate hcl oral tablet chewable 10 mg, 2.5 mg, 5 mg	G	QL (6 tablets per 1 day)
modafinil oral tablet 100 mg, 200 mg	G	
MYDAYIS ORAL CAPSULE EXTENDED RELEASE 24 HOUR 12.5 MG, 25 MG, 37.5 MG, 50 MG (<i>amphetamine-dextroamphetamine</i>)	PB	#; QL (1 capsule per 1 Day)
NUVIGIL ORAL TABLET 150 MG, 200 MG, 250 MG, 50 MG (<i>armodafinil</i>)	NPB	
dextroamphetamine sulfate (Procentra Oral Solution 5 Mg/5ML)	G	QL (40 ML per 1 day)
PROVIGIL ORAL TABLET 100 MG, 200 MG (<i>modafinil</i>)	NPB	
QUILLICHEW ER ORAL TABLET CHEWABLE EXTENDED RELEASE 20 MG, 40 MG (<i>methylphenidate hcl</i>)	NPB	QL (1 tablet per 1 Day)
QUILLICHEW ER ORAL TABLET CHEWABLE EXTENDED RELEASE 30 MG (<i>methylphenidate hcl</i>)	NPB	QL (2 tablets per 1 Day)
QUILLIVANT XR ORAL SUSPENSION RECONSTITUTED ER 25 MG/5ML (<i>methylphenidate hcl</i>)	NPB	QL (12 ML per 1 day)
RELEXXII ORAL TABLET EXTENDED RELEASE 72 MG (<i>methylphenidate hcl</i>)	NPB	QL (1 tablet per 1 day)
RITALIN LA ORAL CAPSULE EXTENDED RELEASE 24 HOUR 10 MG, 20 MG, 40 MG (<i>methylphenidate hcl</i>)	NPB	QL (1 capsule per 1 day)
RITALIN LA ORAL CAPSULE EXTENDED RELEASE 24 HOUR 30 MG (<i>methylphenidate hcl</i>)	NPB	QL (2 capsules per 1 day)
RITALIN ORAL TABLET 10 MG, 20 MG, 5 MG (<i>methylphenidate hcl</i>)	NPB	QL (6 tablets per 1 day)
STRATTERA ORAL CAPSULE 10 MG, 18 MG, 25 MG, 40 MG, 60 MG (<i>atomoxetine hcl</i>)	NPB	QL (2 capsules per 1 day)
STRATTERA ORAL CAPSULE 100 MG, 80 MG (<i>atomoxetine hcl</i>)	NPB	QL (1 capsule per 1 day)
SUNOSI ORAL TABLET 150 MG, 75 MG (<i>solriamfetol hcl</i>)	NPB	
VYVANSE ORAL CAPSULE 10 MG, 20 MG, 30 MG, 40 MG, 50 MG, 60 MG, 70 MG (<i>lisdexamfetamine dimesylate</i>)	PB	QL (2 capsules per 1 day)

Prescription Drug Name	Drug Tier	Coverage Requirements and Limits
VYVANSE ORAL TABLET CHEWABLE 10 MG, 20 MG, 30 MG, 40 MG, 50 MG, 60 MG (<i>lisdexamfetamine dimesylate</i>)	PB	QL (2 tablets per 1 Day)
WAKIX ORAL TABLET 17.8 MG, 4.45 MG (<i>pitolisant hcl</i>)	NPSP	PA; SP
<i>dextroamphetamine sulfate</i> (Zenedi Oral Tablet 10 Mg, 5 Mg)	G	QL (4 tablets per 1 day)
ZENZEDI ORAL TABLET 15 MG, 2.5 MG, 20 MG, 30 MG, 7.5 MG (<i>dextroamphetamine sulfate</i>)	NPB	QL (4 tablets per 1 day)
ALLERGENIC EXTRACTS/BIOLOGICALS MISC - BIOLOGICAL AGENTS		
GRASTEK SUBLINGUAL TABLET SUBLINGUAL 2800 BAU (<i>timothy grass pollen allergen</i>)	PB	
ODACTRA SUBLINGUAL TABLET SUBLINGUAL 12 SQ-HDM (<i>dust mite mixed allergen ext</i>)	NPB	
ORALAIR ADULT SAMPLE KIT SUBLINGUAL TABLET SUBLINGUAL 300 IR (<i>grass mix pollens allergen ext</i>)	NPB	
ORALAIR ADULT STARTER PACK SUBLINGUAL TABLET SUBLINGUAL 300 IR (<i>grass mix pollens allergen ext</i>)	NPB	
ORALAIR CHILDRENS SAMPLE KIT SUBLINGUAL THERAPY PACK 3 X 100 IR & 6 X 300 IR (<i>grass mix pollens allergen ext</i>)	NPB	
ORALAIR CHILDRENS STARTER PACK SUBLINGUAL TABLET SUBLINGUAL 100 IR (<i>grass mix pollens allergen ext</i>)	NPB	
ORALAIR SUBLINGUAL TABLET SUBLINGUAL 300 IR (<i>grass mix pollens allergen ext</i>)	NPB	
PALFORZIA (12 MG DAILY DOSE) ORAL 2 X 1 MG & 10 MG (<i>peanut powder-dnfp</i>)	NPB	
PALFORZIA (120 MG DAILY DOSE) ORAL 20 MG & 100 MG (<i>peanut powder-dnfp</i>)	NPB	
PALFORZIA (160 MG DAILY DOSE) ORAL 3 X 20 MG & 100 MG (<i>peanut powder-dnfp</i>)	NPB	
PALFORZIA (20 MG DAILY DOSE) ORAL 20 MG (<i>peanut powder-dnfp</i>)	NPB	
PALFORZIA (200 MG DAILY DOSE) ORAL 2 X 100 MG (<i>peanut powder-dnfp</i>)	NPB	
PALFORZIA (240 MG DAILY DOSE) ORAL 2 X 20 MG & 2 X 100 MG (<i>peanut powder-dnfp</i>)	NPB	

2020 Pharmacy Drug Guide - Premier Plus

The formulary is updated the first week of each month.

12/01/2020

Prescription Drug Name	Drug Tier	Coverage Requirements and Limits
PALFORZIA (3 MG DAILY DOSE) ORAL 3 X 1 MG (peanut powder-dnfp)	NPB	
PALFORZIA (300 MG MAINTENANCE) ORAL PACKET 300 MG (peanut powder-dnfp)	NPB	
PALFORZIA (300 MG TITRATION) ORAL PACKET 300 MG (peanut powder-dnfp)	NPB	
PALFORZIA (40 MG DAILY DOSE) ORAL 2 X 20 MG (peanut powder-dnfp)	NPB	
PALFORZIA (6 MG DAILY DOSE) ORAL 6 X 1 MG (peanut powder-dnfp)	NPB	
PALFORZIA (80 MG DAILY DOSE) ORAL 4 X 20 MG (peanut powder-dnfp)	NPB	
PALFORZIA INITIAL ESCALATION ORAL 0.5 & 1 & 1.5 & 3 & 6 MG (peanut powder-dnfp)	NPB	
RAGWITEK SUBLINGUAL TABLET SUBLINGUAL 12 AMB A 1-U (short ragweed pollen ext)	NPB	
AMEBICIDES - DRUGS FOR INFECTIONS		
SOLOSEC ORAL PACKET 2 GM (secnidazole)	NPB	
AMINOGLYCOSIDES - DRUGS FOR INFECTIONS		
ARIKAYCE INHALATION SUSPENSION 590 MG/8.4ML (amikacin sulfate liposome)	NPSP	PA; SP
BETHKIS INHALATION NEBULIZATION SOLUTION 300 MG/4ML (tobramycin)	NPSP	#; SP
<i>neomycin sulfate oral tablet 500 mg</i>	G	
<i>paromomycin sulfate oral capsule 250 mg</i>	G	
TOBI INHALATION NEBULIZATION SOLUTION 300 MG/5ML (tobramycin)	NPSP	SP
TOBI PODHALER INHALATION CAPSULE 28 MG (tobramycin)	PSP	SP
<i>tobramycin inhalation nebulization solution 300 mg/4ml, 300 mg/5ml</i>	PSP	SP
ANALGESICS - ANTI-INFLAMMATORY - DRUGS FOR PAIN AND FEVER		
ACTEMRA ACTPEN SUBCUTANEOUS SOLUTION AUTO-Injector 162 MG/0.9ML (tocilizumab)	NPSP	PA; NPL; SP
ACTEMRA INTRAVENOUS SOLUTION 200 MG/10ML, 400 MG/20ML, 80 MG/4ML (tocilizumab)	NPSP	PA; NPL; SP

2020 Pharmacy Drug Guide - Premier Plus

The formulary is updated the first week of each month.

12/01/2020

Prescription Drug Name	Drug Tier	Coverage Requirements and Limits
ACTEMRA SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 162 MG/0.9ML (<i>tocilizumab</i>)	NPSP	PA; NPL; SP
ANAPROX DS ORAL TABLET 550 MG (<i>naproxen sodium</i>)	NPB	
ARCALYST SUBCUTANEOUS SOLUTION RECONSTITUTED 220 MG (<i>rilonacept</i>)	NPSP	PA; SP
ARTHROTEC ORAL TABLET DELAYED RELEASE 50-0.2 MG, 75-0.2 MG (<i>diclofenac-misoprostol</i>)	NPB	
CELEBREX ORAL CAPSULE 100 MG, 200 MG, 400 MG, 50 MG (<i>celecoxib</i>)	NPB	
<i>celecoxib oral capsule 100 mg, 200 mg, 400 mg, 50 mg</i>	G	
DAYPRO ORAL TABLET 600 MG (<i>oxaprozin</i>)	NPB	
<i>diclofenac oral capsule 35 mg</i>	G	
<i>diclofenac potassium oral tablet 50 mg</i>	G	
<i>diclofenac sodium er oral tablet extended release 24 hour 100 mg</i>	G	
<i>diclofenac sodium oral tablet delayed release 25 mg, 50 mg, 75 mg</i>	G	
<i>diclofenac-misoprostol oral tablet delayed release 50-0.2 mg, 75-0.2 mg</i>	G	
DUEXIS ORAL TABLET 800-26.6 MG (<i>ibuprofen-famotidine</i>)	NPB	
ENBREL MINI SUBCUTANEOUS SOLUTION CARTRIDGE 50 MG/ML (<i>etanercept</i>)	PSP	PA; IBC (Preferred agent for all conditions except Psoriasis); NPL; SP
ENBREL SUBCUTANEOUS SOLUTION 25 MG/0.5ML (<i>etanercept</i>)	PSP	PA; NPL; SP
ENBREL SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 25 MG/0.5ML, 50 MG/ML (<i>etanercept</i>)	PSP	PA; IBC (Preferred agent for all conditions except Psoriasis); NPL; SP
ENBREL SUBCUTANEOUS SOLUTION RECONSTITUTED 25 MG (<i>etanercept</i>)	PSP	PA; IBC (Preferred agent for all conditions except Psoriasis); NPL; SP
ENBREL SURECLICK SUBCUTANEOUS SOLUTION AUTO-INJECTOR 50 MG/ML (<i>etanercept</i>)	PSP	PA; IBC (Preferred agent for all conditions except Psoriasis); NPL; SP
<i>etodolac er oral tablet extended release 24 hour 400 mg, 500 mg, 600 mg</i>	G	
<i>etodolac oral capsule 200 mg, 300 mg</i>	G	

2020 Pharmacy Drug Guide - Premier Plus

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12/01/2020

Prescription Drug Name	Drug Tier	Coverage Requirements and Limits
<i>etodolac oral tablet 400 mg, 500 mg</i>	G	
FELDENE ORAL CAPSULE 10 MG, 20 MG (<i>piroxicam</i>)	NPB	
<i>fenoprofen calcium oral capsule 200 mg, 400 mg</i>	G	
<i>fenoprofen calcium oral tablet 600 mg</i>	G	
FENORTHO ORAL CAPSULE 200 MG (<i>fenoprofen calcium</i>)	NPB	
<i>flurbiprofen oral tablet 100 mg, 50 mg</i>	G	
HUMIRA PEDIATRIC CROHNS START SUBCUTANEOUS PREFILLED SYRINGE KIT 80 MG/0.8ML, 80 MG/0.8ML & 40MG/0.4ML (<i>adalimumab</i>)	PSP	PA; NPL; SP
HUMIRA PEN SUBCUTANEOUS PEN-INJECTOR KIT 40 MG/0.4ML, 40 MG/0.8ML (<i>adalimumab</i>)	PSP	PA; NPL; SP
HUMIRA PEN-CD/UC/HS STARTER SUBCUTANEOUS PEN-INJECTOR KIT 40 MG/0.8ML, 80 MG/0.8ML (<i>adalimumab</i>)	PSP	PA; NPL; SP
HUMIRA PEN-PS/UV/ADOL HS START SUBCUTANEOUS PEN-INJECTOR KIT 40 MG/0.8ML (<i>adalimumab</i>)	PSP	PA; NPL; SP
HUMIRA SUBCUTANEOUS PREFILLED SYRINGE KIT 10 MG/0.1ML, 10 MG/0.2ML, 20 MG/0.2ML, 20 MG/0.4ML, 40 MG/0.4ML, 40 MG/0.8ML (<i>adalimumab</i>)	PSP	PA; NPL; SP
<i>ibuprofen</i> (Ibu Oral Tablet 400 Mg, 600 Mg, 800 Mg)	G	
<i>ibuprofen</i> oral tablet 400 mg, 600 mg, 800 mg	G	
ILARIS SUBCUTANEOUS SOLUTION 150 MG/ML (<i>canakinumab</i>)	PSP	PA; NPL; SP
INDOCIN ORAL SUSPENSION 25 MG/5ML (<i>indomethacin</i>)	NPB	
INDOCIN RECTAL SUPPOSITORY 50 MG (<i>indomethacin</i>)	NPB	
<i>indomethacin er</i> oral capsule extended release 75 mg	G	
<i>indomethacin</i> oral capsule 20 mg, 25 mg, 50 mg	G	
<i>ketoprofen er</i> oral capsule extended release 24 hour 200 mg	G	
<i>ketoprofen</i> oral capsule 25 mg	G	
<i>ketorolac tromethamine</i> oral tablet 10 mg	G	
KEVZARA SUBCUTANEOUS SOLUTION AUTO-INJECTOR 150 MG/1.14ML, 200 MG/1.14ML (<i>sarilumab</i>)	PSP	PA; NPL; SP
KEVZARA SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 150 MG/1.14ML, 200 MG/1.14ML (<i>sarilumab</i>)	PSP	PA; NPL; SP

2020 Pharmacy Drug Guide - Premier Plus

The formulary is updated the first week of each month.

12/01/2020

Prescription Drug Name	Drug Tier	Coverage Requirements and Limits
KINERET SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 100 MG/0.67ML (<i>anakinra</i>)	NPSP	PA; NPL; SP
<i>leflunomide oral tablet 10 mg, 20 mg</i>	G	
LODINE ORAL TABLET 400 MG (<i>etodolac</i>)	NPB	
<i>meclofenamate sodium oral capsule 100 mg, 50 mg</i>	G	
<i>mefenamic acid oral capsule 250 mg</i>	G	
<i>meloxicam oral tablet 15 mg, 7.5 mg</i>	G	
MOBIC ORAL TABLET 15 MG, 7.5 MG (<i>meloxicam</i>)	NPB	
<i>nabumetone oral tablet 500 mg, 750 mg</i>	G	
NALFON ORAL CAPSULE 400 MG (<i>fenoprofen calcium</i>)	NPB	
NAPRELAN ORAL TABLET EXTENDED RELEASE 24 HOUR 375 MG, 500 MG, 750 MG (<i>naproxen sodium</i>)	NPB	
NAPROSYN ORAL SUSPENSION 125 MG/5ML (<i>naproxen</i>)	NPB	
<i>naproxen dr oral tablet delayed release 375 mg, 500 mg</i>	G	
<i>naproxen oral suspension 125 mg/5ml</i>	G	
<i>naproxen oral tablet 250 mg, 375 mg, 500 mg</i>	G	
<i>naproxen sodium er oral tablet extended release 24 hour 375 mg, 500 mg</i>	G	
<i>naproxen sodium oral tablet 275 mg, 550 mg</i>	G	
<i>naproxen-esomeprazole oral tablet delayed release 375-20 mg, 500-20 mg</i>	G	
OLUMIANT ORAL TABLET 1 MG, 2 MG (<i>baricitinib</i>)	NPSP	PA; NPL; SP
ORENCIA CLICKJECT SUBCUTANEOUS SOLUTION AUTO-INJECTOR 125 MG/ML (<i>abatacept</i>)	PSP	PA; IBC (Preferred agent for Rheumatoid Arthritis. Not covered for other conditions); NPL; SP
ORENCIA INTRAVENOUS SOLUTION RECONSTITUTED 250 MG (<i>abatacept</i>)	NPSP	PA; NPL; SP
ORENCIA SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 125 MG/ML, 50 MG/0.4ML, 87.5 MG/0.7ML (<i>abatacept</i>)	PSP	PA; IBC (Preferred agent for Rheumatoid Arthritis. Not covered for other conditions); NPL; SP
OTEZLA ORAL TABLET 30 MG (<i>apremilast</i>)	PSP	PA; IBC (Preferred agent for Psoriasis and Psoriatic Arthritis); NPL; SP

Prescription Drug Name	Drug Tier	Coverage Requirements and Limits
OTEZLA ORAL TABLET THERAPY PACK 10 & 20 & 30 MG (<i>apremilast</i>)	PSP	PA; IBC (Preferred agent for Psoriasis and Psoriatic Arthritis); NPL; SP
OTREXUP SUBCUTANEOUS SOLUTION AUTO-INJECTOR 10 MG/0.4ML, 15 MG/0.4ML, 17.5 MG/0.4ML, 20 MG/0.4ML, 22.5 MG/0.4ML, 25 MG/0.4ML (<i>methotrexate (anti-rheumatic)</i>)	PSP	SP
OTREXUP SUBCUTANEOUS SOLUTION AUTO-INJECTOR 12.5 MG/0.4ML (<i>methotrexate (anti-rheumatic)</i>)	PSP	
<i>oxaprozin oral tablet 600 mg</i>	G	
<i>piroxicam oral capsule 10 mg, 20 mg</i>	G	
QMIIZ ODT ORAL TABLET DISPERSIBLE 15 MG, 7.5 MG (<i>meloxicam</i>)	NPB	
RASUVO SUBCUTANEOUS SOLUTION AUTO-INJECTOR 10 MG/0.2ML, 12.5 MG/0.25ML, 15 MG/0.3ML, 17.5 MG/0.35ML, 20 MG/0.4ML, 22.5 MG/0.45ML, 25 MG/0.5ML, 30 MG/0.6ML, 7.5 MG/0.15ML (<i>methotrexate (anti-rheumatic)</i>)	PSP	SP
RELAFEN DS ORAL TABLET 1000 MG (<i>nabumetone</i>)	NPB	
RIDAURA ORAL CAPSULE 3 MG (<i>auranofin</i>)	NPB	UF9 (PB)
RINVOQ ORAL TABLET EXTENDED RELEASE 24 HOUR 15 MG (<i>upadacitinib</i>)	PSP	PA; IBC (Preferred agent for Rheumatoid Arthritis); SP
SIMPONI ARIA INTRAVENOUS SOLUTION 50 MG/4ML (<i>golimumab</i>)	PSP	PA; NPL; SP
SIMPONI SUBCUTANEOUS SOLUTION AUTO-INJECTOR 100 MG/ML, 50 MG/0.5ML (<i>golimumab</i>)	NPSP	PA; NPL; SP
SIMPONI SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 100 MG/ML, 50 MG/0.5ML (<i>golimumab</i>)	NPSP	PA; NPL; SP
SPRIX NASAL SOLUTION 15.75 MG/SPRAY (<i>ketorolac tromethamine</i>)	NPB	
<i>sulindac oral tablet 150 mg, 200 mg</i>	G	
<i>tolmetin sodium oral capsule 400 mg</i>	G	
<i>tolmetin sodium oral tablet 600 mg</i>	G	
VIMOVO ORAL TABLET DELAYED RELEASE 375-20 MG, 500-20 MG (<i>naproxen-esomeprazole</i>)	NPB	
VIVLODEX ORAL CAPSULE 10 MG, 5 MG (<i>meloxicam</i>)	NPB	#

2020 Pharmacy Drug Guide - Premier Plus

The formulary is updated the first week of each month.

12/01/2020

Prescription Drug Name	Drug Tier	Coverage Requirements and Limits
XELJANZ ORAL TABLET 10 MG (<i>tofacitinib citrate</i>)	PSP	PA; IBC (Preferred agent for Ulcerative Colitis (after failure of Humira)); NPL; SP
XELJANZ ORAL TABLET 5 MG (<i>tofacitinib citrate</i>)	PSP	PA; IBC (Preferred agent for Rheumatoid Arthritis and Ulcerative Colitis (after failure of Humira). Not covered for Psoriatic Arthritis.); NPL; SP
XELJANZ XR ORAL TABLET EXTENDED RELEASE 24 HOUR 11 MG (<i>tofacitinib citrate</i>)	PSP	PA; IBC (Preferred agent for Rheumatoid Arthritis. Not covered for Psoriatic Arthritis.); NPL; SP
XELJANZ XR ORAL TABLET EXTENDED RELEASE 24 HOUR 22 MG (<i>tofacitinib citrate</i>)	PSP	PA; IBC (Preferred agent for Ulcerative Colitis (after failure of Humira)); NPL; SP
ZIPSOR ORAL CAPSULE 25 MG (<i>diclofenac potassium</i>)	NPB	
ZORVOLEX ORAL CAPSULE 18 MG, 35 MG (<i>diclofenac</i>)	NPB	
ANALGESICS - NONNARCOTIC - DRUGS FOR PAIN AND FEVER		
ALLZITAL ORAL TABLET 25-325 MG (<i>butilbital-acetaminophen</i>)	NPB	
aspirin 81 oral tablet delayed release 81 mg	CE	N2 (Not Covered); AL
aspirin adult low dose oral tablet delayed release 81 mg	CE	N2 (Not Covered); AL
aspirin childrens oral tablet chewable 81 mg	CE	N2 (Not Covered); AL
aspirin low dose oral tablet chewable 81 mg	CE	N2 (Not Covered); AL
aspirin low dose oral tablet delayed release 81 mg	CE	N2 (Not Covered); AL
aspirin oral tablet chewable 81 mg	CE	N2 (Not Covered); AL
aspirin oral tablet delayed release 81 mg	CE	N2 (Not Covered); AL
ASPIR-LOW ORAL TABLET DELAYED RELEASE 81 MG (<i>aspirin</i>)	CE	N2 (Not Covered); AL
BAYER LOW DOSE ORAL TABLET CHEWABLE 81 MG (<i>aspirin</i>)	CE	N2 (Not Covered); AL
BAYER LOW DOSE ORAL TABLET DELAYED RELEASE 81 MG (<i>aspirin</i>)	CE	N2 (Not Covered); AL
<i>butilbital-acetaminophen</i> (Bupap Oral Tablet 50-300 Mg)	G	

2020 Pharmacy Drug Guide - Premier Plus

The formulary is updated the first week of each month.

12/01/2020

Prescription Drug Name	Drug Tier	Coverage Requirements and Limits
butalbital-acetaminophen oral capsule 50-300 mg	G	
butalbital-acetaminophen oral tablet 25-325 mg, 50-325 mg	G	
butalbital-apap-caffeine oral capsule 50-300-40 mg, 50-325-40 mg	G	
butalbital-apap-caffeine oral tablet 50-325-40 mg	G	
butalbital-asa-caffeine oral capsule 50-325-40 mg	G	
childrens aspirin low strength oral tablet chewable 81 mg	CE	N2 (Not Covered); AL
childrens aspirin oral tablet chewable 81 mg	CE	N2 (Not Covered); AL
diflunisal oral tablet 500 mg	G	
ECOTRIN LOW STRENGTH ORAL TABLET DELAYED RELEASE 81 MG (aspirin)	CE	N2 (Not Covered); AL
ESGIC ORAL TABLET 50-325-40 MG (butalbital-apap-caffeine)	NPB	
FIORICET ORAL CAPSULE 50-300-40 MG (butalbital-apap-caffeine)	NPB	
FIORINAL ORAL CAPSULE 50-325-40 MG (butalbital-aspirin-caffeine)	NPB	
MINIPRIN LOW DOSE ORAL TABLET DELAYED RELEASE 81 MG (aspirin)	CE	N2 (Not Covered); AL
PRIALT INTRATHECAL SOLUTION 100 MCG/ML, 500 MCG/20ML, 500 MCG/5ML (ziconotide acetate)	NPSP	SP
ST JOSEPH ASPIRIN ORAL TABLET DELAYED RELEASE 81 MG (aspirin)	CE	N2 (Not Covered); AL
ST JOSEPH LOW DOSE ORAL TABLET CHEWABLE 81 MG (aspirin)	CE	N2 (Not Covered); AL
TENCON ORAL TABLET 50-325 MG (butalbital-acetaminophen)	NPB	
butalbital-apap-caffeine (Vanatol Lq Oral Solution 50-325-40 Mg/15Ml)	G	
butalbital-apap-caffeine (Vtol Lq Oral Solution 50-325-40 Mg/15Ml)	G	
butalbital-apap-caffeine (Zebutal Oral Capsule 50-325-40 Mg)	G	
ANALGESICS - OPIOID - DRUGS FOR PAIN AND FEVER		
acetaminophen-codeine #2 oral tablet 300-15 mg	G	PA; QL (13 tablets per 1 day)

Prescription Drug Name	Drug Tier	Coverage Requirements and Limits
<i>acetaminophen-codeine #3 oral tablet 300-30 mg</i>	G	PA; QL (12 tablets per 1 day)
<i>acetaminophen-codeine #4 oral tablet 300-60 mg</i>	G	PA; QL (10 tablets per 1 day)
<i>acetaminophen-codeine oral solution 120-12 mg/5ml</i>	G	PA; QL (150 MLS per 1 day)
<i>acetaminophen-codeine oral tablet 300-15 mg</i>	G	PA; QL (13 tablets per 1 day)
<i>acetaminophen-codeine oral tablet 300-60 mg</i>	G	PA; QL (10 tablets per 1 day)
ACTIQ BUCCAL LOZENGE ON A HANDLE 1200 MCG, 1600 MCG, 200 MCG, 400 MCG, 600 MCG, 800 MCG (<i>fentanyl citrate</i>)	NPB	PA; QL (120 lozenges per 30 days)
APADAZ ORAL TABLET 4.08-325 MG, 6.12-325 MG, 8.16-325 MG (<i>benzhydrocodone-acetaminophen</i>)	NPB	PA; QL (12 tablets daily per 7 days)
<i>apap-caff-dihydrocodeine oral capsule 320.5-30-16 mg</i>	G	PA; QL (10 capsules per 1 day)
ARYMO ER ORAL TABLET EXTENDED RELEASE ABUSE-DETERRENT 15 MG, 30 MG (<i>morphine sulfate</i>)	NPB	PA; MPG; QL (3 tablets per 1 day)
ARYMO ER ORAL TABLET EXTENDED RELEASE ABUSE-DETERRENT 60 MG (<i>morphine sulfate</i>)	NPB	PA; MPG; QL (2 tablets per 1 day)
<i>butalbital-asa-caff-codeine (Ascomp-Codeine Oral Capsule 50-325-40-30 Mg)</i>	G	PA; QL (6 capsules per 1 day)
BELBUCA BUCCAL FILM 150 MCG, 300 MCG, 450 MCG, 600 MCG, 75 MCG, 750 MCG, 900 MCG (<i>buprenorphine hcl</i>)	NPB	PA; QL (2 films per 1 day)
<i>benzhydrocodone-acetaminophen oral tablet 4.08-325 mg, 6.12-325 mg, 8.16-325 mg</i>	G	PA; QL (12 tablets daily per 7 days)
BUNAVAIL BUCCAL FILM 2.1-0.3 MG (<i>buprenorphine hcl-naloxone hcl</i>)	NPB	UF11; QL (6 films per 1 day)
BUNAVAIL BUCCAL FILM 4.2-0.7 MG (<i>buprenorphine hcl-naloxone hcl</i>)	NPB	UF11; QL (3 films per 1 day)
BUNAVAIL BUCCAL FILM 6.3-1 MG (<i>buprenorphine hcl-naloxone hcl</i>)	NPB	UF11; QL (2 films per 1 day)
<i>buprenorphine hcl sublingual tablet sublingual 2 mg, 8 mg</i>	CE	N2 (G); UF11; QL (3 tablets per 1 day)
<i>buprenorphine hcl-naloxone hcl sublingual film 12-3 mg, 2-0.5 mg, 4-1 mg</i>	G	QL (3 films per 1 day)

2020 Pharmacy Drug Guide - Premier Plus

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12/01/2020

Prescription Drug Name	Drug Tier	Coverage Requirements and Limits
buprenorphine hcl-naloxone hcl sublingual film 8-2 mg	G	UF11; QL (3 films per 1 day)
buprenorphine hcl-naloxone hcl sublingual tablet sublingual 2-0.5 mg, 8-2 mg	CE	N2 (G); UF11; QL (90 tablets per 30 days)
buprenorphine transdermal patch weekly 10 mcg/hr, 15 mcg/hr, 20 mcg/hr, 5 mcg/hr, 7.5 mcg/hr	G	PA; QL (4 patches per 28 days)
butalbital-apap-caff-cod oral capsule 50-300-40-30 mg, 50-325-40-30 mg	G	PA; QL (6 capsules per 1 day)
butalbital-asa-caff-codeine oral capsule 50-325-40-30 mg	G	PA; QL (6 capsules per 1 day)
butorphanol tartrate nasal solution 10 mg/ml	G	PA; QL (2 bottles per 30 days)
BUTTRANS TRANSDERMAL PATCH WEEKLY 10 MCG/HR, 15 MCG/HR, 20 MCG/HR, 5 MCG/HR, 7.5 MCG/HR (buprenorphine)	NPB	PA; QL (4 patches per 28 days)
codeine sulfate oral tablet 15 mg, 30 mg, 60 mg	G	PA; QL (6 tablets per day for 7 days only per 90 days)
CONZIP ORAL CAPSULE EXTENDED RELEASE 24 HOUR 100 MG, 200 MG, 300 MG (tramadol hcl)	NPB	PA; QL (1 capsule per 1 day)
DILAUDID ORAL LIQUID 1 MG/ML (hydromorphone hcl)	NPB	PA; QL (20 ml per 1 day)
DILAUDID ORAL TABLET 2 MG (hydromorphone hcl)	NPB	PA; QL (6 tablets per 7 days)
DILAUDID ORAL TABLET 4 MG (hydromorphone hcl)	NPB	PA; QL (5 tablets per 1 day)
DILAUDID ORAL TABLET 8 MG (hydromorphone hcl)	NPB	PA; QL (2 tablets per 1 day)
DOLOPHINE ORAL TABLET 10 MG (methadone hcl)	NPB	PA; UN6; QL (2 tablets per 1 day)
DOLOPHINE ORAL TABLET 5 MG (methadone hcl)	NPB	PA; UN6; QL (3 tablets per 1 day)
DURAGESIC-100 TRANSDERMAL PATCH 72 HOUR 100 MCG/HR (fentanyl)	NPB	PA; QL (10 patches per 30 days)
DURAGESIC-12 TRANSDERMAL PATCH 72 HOUR 12 MCG/HR (fentanyl)	NPB	PA; QL (10 patches per 30 days)
DURAGESIC-25 TRANSDERMAL PATCH 72 HOUR 25 MCG/HR (fentanyl)	NPB	PA; QL (10 patches per 30 days)
DURAGESIC-50 TRANSDERMAL PATCH 72 HOUR 50 MCG/HR (fentanyl)	NPB	PA; QL (10 patches per 30 days)
DURAGESIC-75 TRANSDERMAL PATCH 72 HOUR 75 MCG/HR (fentanyl)	NPB	PA; QL (10 patches per 30 days)

2020 Pharmacy Drug Guide - Premier Plus

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12/01/2020

Prescription Drug Name	Drug Tier	Coverage Requirements and Limits
oxycodone-acetaminophen (Endocet Oral Tablet 10-325 Mg)	G	PA; QL (6 tablets per 1 day)
oxycodone-acetaminophen (Endocet Oral Tablet 2.5-325 Mg, 5-325 Mg)	G	PA; QL (12 tablets per 1 day)
oxycodone-acetaminophen (Endocet Oral Tablet 7.5-325 Mg)	G	PA; QL (8 tablets per 1 day)
fentanyl citrate buccal lozenge on a handle 1200 mcg, 1600 mcg, 200 mcg, 400 mcg, 600 mcg, 800 mcg	G	PA; QL (120 lozenges per 30 days)
fentanyl citrate buccal tablet 200 mcg, 400 mcg, 600 mcg, 800 mcg	G	PA; QL (120 tablets per 30 days)
fentanyl transdermal patch 72 hour 100 mcg/hr, 12 mcg/hr, 25 mcg/hr, 37.5 mcg/hr, 50 mcg/hr, 62.5 mcg/hr, 75 mcg/hr, 87.5 mcg/hr	G	PA; QL (10 patches per 30 days)
FENTORA BUCCAL TABLET 100 MCG, 200 MCG, 400 MCG, 600 MCG, 800 MCG (fentanyl citrate)	NPB	PA; QL (120 tablets per 30 days)
FIORICET/CODEINE ORAL CAPSULE 50-300-40-30 MG (butalbital-apap-caff-cod)	NPB	PA; QL (6 capsules per 1 day)
FIORINAL/CODEINE #3 ORAL CAPSULE 50-325-40-30 MG (butalbital-asa-caff-codeine)	NPB	PA; QL (6 capsules per 1 day)
hydrocodone bitartrate er oral capsule extended release 12 hour 10 mg, 15 mg, 20 mg, 30 mg, 40 mg, 50 mg	G	PA; QL (2 capsules per 1 day)
hydrocodone-acetaminophen oral solution 10-325 mg/15ml	G	QL (90 ml per 1 day)
hydrocodone-acetaminophen oral solution 2.5-108 mg/5ml, 5-217 mg/10ml	G	PA; QL (180 MLS per 1 day)
hydrocodone-acetaminophen oral solution 7.5-325 mg/15ml	G	PA; QL (90 ml per 1 day)
hydrocodone-acetaminophen oral tablet 10-300 mg, 10-325 mg, 7.5-300 mg, 7.5-325 mg	G	PA; QL (6 tablets per 1 day)
hydrocodone-acetaminophen oral tablet 5-300 mg, 5-325 mg	G	PA; QL (8 tablets per 1 day)
hydrocodone-ibuprofen oral tablet 10-200 mg, 5-200 mg, 7.5-200 mg	G	PA; QL (5 tablets per 1 day)
hydromorphone hcl er oral tablet extended release 24 hour 12 mg, 16 mg, 32 mg, 8 mg	G	PA; QL (1 tablet per 1 day)
hydromorphone hcl oral liquid 1 mg/ml	G	PA; QL (20 ml per 1 day)
hydromorphone hcl oral tablet 2 mg	G	PA; QL (6 tablets per 7 days)
hydromorphone hcl oral tablet 4 mg	G	PA; QL (5 tablets per 1 day)
hydromorphone hcl oral tablet 8 mg	G	PA; QL (2 tablets per 1 day)
hydromorphone hcl rectal suppository 3 mg	G	PA; QL (4 suppositories per 1 day)

2020 Pharmacy Drug Guide - Premier Plus

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12/01/2020

Prescription Drug Name	Drug Tier	Coverage Requirements and Limits
HYSINGLA ER ORAL TABLET ER 24 HOUR ABUSE-DETERRENT 100 MG, 120 MG, 20 MG, 30 MG, 40 MG, 60 MG, 80 MG (<i>hydrocodone bitartrate</i>)	PB	PA; #; QL (1 tablet per 1 day)
KADIAN ORAL CAPSULE EXTENDED RELEASE 24 HOUR 10 MG, 20 MG, 30 MG, 40 MG (<i>morphine sulfate</i>)	NPB	PA; QL (2 capsules per 1 day)
KADIAN ORAL CAPSULE EXTENDED RELEASE 24 HOUR 100 MG, 200 MG, 50 MG, 60 MG, 80 MG (<i>morphine sulfate</i>)	NPB	PA; QL (1 capsule per 1 day)
LAZANDA NASAL SOLUTION 100 MCG/ACT, 400 MCG/ACT (<i>fentanyl citrate</i>)	NPB	PA; QL (4 bottles per 30 days)
LAZANDA NASAL SOLUTION 300 MCG/ACT (<i>fentanyl citrate</i>)	NPB	PA; QL (4 bottles per 30 Days)
<i>levorphanol tartrate oral tablet 2 mg</i>	G	PA; QL (4 tablets per 1 day)
<i>levorphanol tartrate oral tablet 3 mg</i>	G	PA; QL (2 tablets per 1 day)
LORTAB ORAL ELIXIR 10-300 MG/15ML (<i>hydrocodone-acetaminophen</i>)	NPB	PA; QL (67.5 ml per 1 day)
<i>meperidine hcl oral solution 50 mg/5ml</i>	G	PA; QL (30 mls per 3 days only per 30 days)
<i>meperidine hcl oral tablet 50 mg</i>	G	PA; QL (6 tablets per day for 3 days only per 30 days)
<i>methadone hcl (Methadone Hcl Intensol Oral Concentrate 10 Mg/ML)</i>	G	PA; UN6; UF11; QL (3 MLS per 1 day)
<i>methadone hcl oral concentrate 10 mg/ml</i>	G	PA; UN6; UF11; QL (2 mls per 1 day)
<i>methadone hcl oral solution 10 mg/5ml</i>	G	PA; UN6; UF11; QL (10 ml per 1 day)
<i>methadone hcl oral solution 5 mg/5ml</i>	G	PA; UN6; UF11; QL (15 ml per 1 day)
<i>methadone hcl oral tablet 10 mg</i>	G	PA; UN6; UF11; QL (2 tablets per 1 day)
<i>methadone hcl oral tablet 5 mg</i>	G	PA; UN6; UF11; QL (3 tablets per 1 day)
METHADOSE ORAL CONCENTRATE 10 MG/ML (<i>methadone hcl</i>)	NPB	PA; UN6; UF11; QL (2 mls per 1 day)
METHADOSE SUGAR-FREE ORAL CONCENTRATE 10 MG/ML (<i>methadone hcl</i>)	NPB	PA; UN6; UF11; QL (2 mls per 1 day)
<i>morphine sulfate (concentrate) oral solution 100 mg/5ml</i>	G	PA; QL (4.5 MLS per 1 day)

Prescription Drug Name	Drug Tier	Coverage Requirements and Limits
morphine sulfate (concentrate) oral solution 20 mg/ml, 5 mg/0.25ml	G	PA; QL (90 MME per 1 day)
morphine sulfate er beads oral capsule extended release 24 hour 120 mg, 30 mg, 45 mg, 60 mg, 75 mg, 90 mg	G	PA; QL (1 capsule per 1 day)
morphine sulfate er oral capsule extended release 24 hour 10 mg, 20 mg, 30 mg, 40 mg	G	PA; QL (2 capsules per 1 day)
morphine sulfate er oral capsule extended release 24 hour 100 mg, 50 mg, 60 mg, 80 mg	G	PA; QL (1 capsule per 1 day)
morphine sulfate er oral tablet extended release 100 mg, 200 mg, 60 mg	G	PA; QL (2 tablets per 1 day)
morphine sulfate er oral tablet extended release 15 mg, 30 mg	G	PA; QL (3 tablets per 1 day)
morphine sulfate oral solution 10 mg/5ml	G	PA; QL (30 mls per 1 day)
morphine sulfate oral solution 20 mg/5ml	G	PA; QL (22.5 MLS per 1 day)
morphine sulfate oral tablet 15 mg	G	PA; QL (6 tablets per 1 day)
morphine sulfate oral tablet 30 mg	G	PA; QL (3 tablets per 1 day)
morphine sulfate rectal suppository 10 mg, 5 mg	G	PA; QL (6 suppositories per 1 day)
morphine sulfate rectal suppository 20 mg	G	PA; QL (4 suppositories per 1 day)
morphine sulfate rectal suppository 30 mg	G	PA; QL (3 suppositories per 1 day)
MS CONTIN ORAL TABLET EXTENDED RELEASE 100 MG, 200 MG, 60 MG (morphine sulfate)	NPB	PA; QL (2 tablets per 1 day)
MS CONTIN ORAL TABLET EXTENDED RELEASE 15 MG, 30 MG (morphine sulfate)	NPB	PA; QL (3 tablets per 1 day)
nalocet oral tablet 2.5-300 mg	G	PA; QL (12 tablets per 1 day)
NORCO ORAL TABLET 10-325 MG, 7.5-325 MG (hydrocodone-acetaminophen)	NPB	PA; QL (6 tablets per 1 day)
NORCO ORAL TABLET 5-325 MG (hydrocodone-acetaminophen)	NPB	PA; QL (8 tablets per 1 day)
NUCYNTA ER ORAL TABLET EXTENDED RELEASE 12 HOUR 100 MG, 150 MG, 200 MG, 250 MG, 50 MG (tapentadol hcl)	PB	PA; QL (2 tablets per 1 day)
NUCYNTA ORAL TABLET 100 MG (tapentadol hcl)	PB	PA; QL (2 tablets per 1 day)
NUCYNTA ORAL TABLET 50 MG (tapentadol hcl)	PB	PA; QL (4 tablets per 1 day)
NUCYNTA ORAL TABLET 75 MG (tapentadol hcl)	PB	PA; QL (3 tablets per 1 day)

2020 Pharmacy Drug Guide - Premier Plus

The formulary is updated the first week of each month.

12/01/2020

Prescription Drug Name	Drug Tier	Coverage Requirements and Limits
OPANA ORAL TABLET 10 MG (<i>oxymorphone hcl</i>)	NPB	PA; QL (3 tablets per 1 day)
OXAYDO ORAL TABLET 5 MG, 7.5 MG (<i>oxycodone hcl</i>)	PB	PA; QL (6 tablets per 1 day)
<i>oxycodone hcl er oral tablet er 12 hour abuse-deterrant 10 mg, 15 mg, 20 mg, 30 mg, 40 mg, 60 mg, 80 mg</i>	G	PA; QL (2 tablets per 1 day)
<i>oxycodone hcl oral capsule 5 mg</i>	G	PA; QL (6 capsules per 1 day)
<i>oxycodone hcl oral concentrate 100 mg/5ml</i>	G	PA; QL (3 MLS per 1 day)
<i>oxycodone hcl oral solution 5 mg/5ml</i>	G	PA; QL (30 mls per 1 day)
<i>oxycodone hcl oral tablet 10 mg, 5 mg</i>	G	PA; QL (6 tablets per 1 day)
<i>oxycodone hcl oral tablet 15 mg</i>	G	PA; QL (4 tablets per 1 day)
<i>oxycodone hcl oral tablet 20 mg</i>	G	PA; QL (3 tablets per 1 day)
<i>oxycodone hcl oral tablet 30 mg</i>	G	PA; QL (2 tablets per 1 day)
<i>oxycodone-acetaminophen oral tablet 10-300 mg, 5-300 mg</i>	G	QL (12 tablets per 1 day)
<i>oxycodone-acetaminophen oral tablet 10-325 mg</i>	G	PA; QL (6 tablets per 1 day)
<i>oxycodone-acetaminophen oral tablet 2.5-300 mg, 2.5-325 mg, 5-325 mg</i>	G	PA; QL (12 tablets per 1 day)
<i>oxycodone-acetaminophen oral tablet 7.5-325 mg</i>	G	PA; QL (8 tablets per 1 day)
<i>oxycodone-aspirin oral tablet 4.8355-325 mg</i>	G	PA; QL (12 tablets per 1 day)
OXYCONTIN ORAL TABLET ER 12 HOUR ABUSE-DETERRENT 10 MG, 15 MG, 20 MG, 30 MG, 40 MG, 60 MG, 80 MG (<i>oxycodone hcl</i>)	PB	PA; QL (2 tablets per 1 day)
<i>oxymorphone hcl er oral tablet extended release 12 hour 10 mg, 15 mg, 20 mg, 30 mg, 40 mg, 5 mg, 7.5 mg</i>	G	PA; QL (2 tablets per 1 day)
<i>oxymorphone hcl oral tablet 10 mg</i>	G	PA; QL (3 tablets per 1 day)
<i>oxymorphone hcl oral tablet 5 mg</i>	G	PA; QL (6 tablets per 1 day)
<i>pentazocine-naloxone hcl oral tablet 50-0.5 mg</i>	G	PA; QL (4 tablets per 1 day)
PERCOCET ORAL TABLET 10-325 MG (<i>oxycodone-acetaminophen</i>)	NPB	PA; QL (6 tablets per 1 day)
PERCOCET ORAL TABLET 2.5-325 MG, 5-325 MG (<i>oxycodone-acetaminophen</i>)	NPB	PA; QL (12 tablets per 1 day)
PERCOCET ORAL TABLET 7.5-325 MG (<i>oxycodone-acetaminophen</i>)	NPB	PA; QL (8 tablets per 1 day)
PRIMLEV ORAL TABLET 10-300 MG (<i>oxycodone-acetaminophen</i>)	NPB	PA; QL (6 tablets per 1 day)
PRIMLEV ORAL TABLET 5-300 MG (<i>oxycodone-acetaminophen</i>)	NPB	PA; QL (12 tablets per 1 day)

2020 Pharmacy Drug Guide - Premier Plus

The formulary is updated the first week of each month.

12/01/2020

Prescription Drug Name	Drug Tier	Coverage Requirements and Limits
PRIMLEV ORAL TABLET 7.5-300 MG (<i>oxycodone-acetaminophen</i>)	NPB	PA; QL (8 tablets per 1 day)
PROLATE ORAL TABLET 10-300 MG (<i>oxycodone-acetaminophen</i>)	NPB	PA; QL (6 tablets per 1 day)
PROLATE ORAL TABLET 5-300 MG (<i>oxycodone-acetaminophen</i>)	NPB	PA; QL (12 tablets per 1 day)
PROLATE ORAL TABLET 7.5-300 MG (<i>oxycodone-acetaminophen</i>)	NPB	PA; QL (8 tablets per 1 day)
ROXICODONE ORAL TABLET 15 MG (<i>oxycodone hcl</i>)	NPB	PA; QL (4 tablets per 1 day)
ROXICODONE ORAL TABLET 30 MG (<i>oxycodone hcl</i>)	NPB	PA; QL (2 tablets per 1 day)
ROXICODONE ORAL TABLET 5 MG (<i>oxycodone hcl</i>)	NPB	PA; QL (6 tablets per 1 day)
SUBLOCADE SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 100 MG/0.5ML, 300 MG/1.5ML (<i>buprenorphine</i>)	PSP	SP
SUBOXONE SUBLINGUAL FILM 12-3 MG, 2-0.5 MG, 4-1 MG, 8-2 MG (<i>buprenorphine hcl-naloxone hcl</i>)	NPB	UF11; QL (3 films per 1 day)
SUBSYS SUBLINGUAL LIQUID 100 MCG, 1200 (600 X 2) MCG, 1600 (800 X 2) MCG, 200 MCG, 400 MCG, 600 MCG, 800 MCG (<i>fentanyl</i>)	NPB	PA; QL (120 sprays per 30 days)
<i>tramadol hcl er (biphasic) oral tablet extended release 24 hour 100 mg, 200 mg, 300 mg</i>	G	PA; QL (1 tablet per 1 day)
<i>tramadol hcl er oral capsule extended release 24 hour 100 mg, 150 mg, 200 mg, 300 mg</i>	G	PA; QL (1 capsule per 1 day)
<i>tramadol hcl er oral tablet extended release 24 hour 100 mg, 200 mg, 300 mg</i>	G	PA; QL (1 tablet per 1 day)
<i>tramadol hcl oral tablet 100 mg</i>	G	PA; QL (3 tablets per 1 day)
<i>tramadol hcl oral tablet 50 mg</i>	G	PA; QL (6 tablets per 1 day)
<i>tramadol-acetaminophen oral tablet 37.5-325 mg</i>	G	PA; QL (8 tablets per 1 day)
TREZIX ORAL CAPSULE 320.5-30-16 MG (<i>apap-caff-dihydrocodeine</i>)	G	PA; QL (10 capsules per 1 day)
ULTRACET ORAL TABLET 37.5-325 MG (<i>tramadol-acetaminophen</i>)	NPB	PA; QL (8 tablets per 1 day)
ULTRAM ORAL TABLET 50 MG (<i>tramadol hcl</i>)	NPB	PA; QL (6 tablets per 1 day)
XODOL ORAL TABLET 5-300 MG (<i>hydrocodone-acetaminophen</i>)	NPB	PA; QL (8 tablets per 1 day)
XTAMPZA ER ORAL CAPSULE ER 12 HOUR ABUSE-DETERRENT 13.5 MG, 18 MG, 27 MG, 36 MG, 9 MG (<i>oxycodone</i>)	NPB	PA; QL (2 tablets per 1 day)

2020 Pharmacy Drug Guide - Premier Plus

The formulary is updated the first week of each month.

12/01/2020

Prescription Drug Name	Drug Tier	Coverage Requirements and Limits
ZOHYDRO ER ORAL CAPSULE EXTENDED RELEASE 12 HOUR 10 MG, 15 MG, 20 MG, 30 MG, 40 MG, 50 MG (<i>hydrocodone bitartrate</i>)	NPB	PA; QL (2 capsules per 1 day)
ZUBSOLV SUBLINGUAL TABLET SUBLINGUAL 0.7-0.18 MG, 2.9-0.71 MG (<i>buprenorphine hcl-naloxone hcl</i>)	PB	#; UF11; QL (3 tablets per 1 day)
ZUBSOLV SUBLINGUAL TABLET SUBLINGUAL 1.4-0.36 MG, 5.7-1.4 MG (<i>buprenorphine hcl-naloxone hcl</i>)	PB	#; UF11; QL (90 tablets per 30 days)
ZUBSOLV SUBLINGUAL TABLET SUBLINGUAL 11.4-2.9 MG (<i>buprenorphine hcl-naloxone hcl</i>)	PB	#; UF11; QL (1 tablet per 1 day)
ZUBSOLV SUBLINGUAL TABLET SUBLINGUAL 8.6-2.1 MG (<i>buprenorphine hcl-naloxone hcl</i>)	PB	#; UF11; QL (2 tablets per 1 day)
ANDROGENS-ANABOLIC - HORMONES		
ANADROL-50 ORAL TABLET 50 MG (<i>oxymetholone</i>)	NPB	
ANDRODERM TRANSDERMAL PATCH 24 HOUR 2 MG/24HR, 4 MG/24HR (<i>testosterone</i>)	NPB	
ANDROGEL PUMP TRANSDERMAL GEL 20.25 MG/ACT (1.62%) (<i>testosterone</i>)	NPB	
ANDROGEL TRANSDERMAL GEL 20.25 MG/1.25GM (1.62%), 25 MG/2.5GM (1%), 40.5 MG/2.5GM (1.62%), 50 MG/5GM (1%) (<i>testosterone</i>)	NPB	
<i>danazol oral capsule 100 mg, 200 mg, 50 mg</i>	G	
FORTESTA TRANSDERMAL GEL 10 MG/ACT (2%) (<i>testosterone</i>)	NPB	
JATENZO ORAL CAPSULE 158 MG, 198 MG, 237 MG (<i>testosterone undecanoate</i>)	NPB	
<i>methitest oral tablet 10 mg</i>	NPB	
<i>methyltestosterone oral capsule 10 mg</i>	G	
NATESTO NASAL GEL 5.5 MG/ACT (<i>testosterone</i>)	NPB	
<i>oxandrolone oral tablet 10 mg, 2.5 mg</i>	G	
TESTIM TRANSDERMAL GEL 50 MG/5GM (1%) (<i>testosterone</i>)	NPB	
<i>testosterone cypionate injection solution 200 mg/ml</i>	G	
<i>testosterone cypionate intramuscular solution 100 mg/ml, 200 mg/ml</i>	G	
<i>testosterone enanthate intramuscular solution 200 mg/ml</i>	G	
<i>testosterone transdermal gel 10 mg/act (2%), 12.5 mg/act (1%), 20.25 mg/1.25gm (1.62%), 20.25 mg/act (1.62%), 25 mg/2.5gm (1%), 40.5 mg/2.5gm (1.62%), 50 mg/5gm (1%)</i>	G	

2020 Pharmacy Drug Guide - Premier Plus

The formulary is updated the first week of each month.

12/01/2020

Prescription Drug Name	Drug Tier	Coverage Requirements and Limits
<i>testosterone transdermal solution 30 mg/act</i>	G	
VOGELXO PUMP TRANSDERMAL GEL 12.5 MG/ACT (1%) (<i>testosterone</i>)	NPB	
VOGELXO TRANSDERMAL GEL 50 MG/5GM (1%) (<i>testosterone</i>)	NPB	
XYOSTED SUBCUTANEOUS SOLUTION AUTO-INJECTOR 100 MG/0.5ML, 50 MG/0.5ML, 75 MG/0.5ML (<i>testosterone enanthate</i>)	NPB	
ANORECTAL AND RELATED PRODUCTS - RECTAL PREPARATIONS		
ANUSOL-HC EXTERNAL CREAM 2.5 % (<i>hydrocortisone</i>)	NPB	
CORTENEMA RECTAL ENEMA 100 MG/60ML (<i>hydrocortisone</i>)	NPB	
CORTIFOAM EXTERNAL FOAM 10 % (<i>hydrocortisone acetate</i>)	NPB	
<i>hydrocortisone ace-pramoxine external cream 1-1 %</i>	G	
<i>hydrocortisone rectal enema 100 mg/60ml</i>	G	
<i>hydrocortisone</i> (Proctocare-Hc External Cream 2.5 %)	G	
PROCTOCORT EXTERNAL CREAM 1 % (<i>hydrocortisone</i>)	NPB	
PROCTOFOAM HC EXTERNAL FOAM 1-1 % (<i>hydrocortisone ace-pramoxine</i>)	NPB	
<i>hydrocortisone</i> (Procto-Pak External Cream 1 %)	G	
<i>hydrocortisone</i> (Proctozone-Hc External Cream 2.5 %)	G	
RECTIV RECTAL OINTMENT 0.4 % (<i>nitroglycerin</i>)	NPB	
UCERIS RECTAL FOAM 2 MG/ACT (<i>budesonide</i>)	NPB	#
ANTHELMINTICS - DRUGS FOR INFECTIONS		
<i>albendazole oral tablet 200 mg</i>	G	
ALBENZA ORAL TABLET 200 MG (<i>albendazole</i>)	NPB	
<i>benznidazole oral tablet 100 mg, 12.5 mg</i>	NPB	
BILTRICIDE ORAL TABLET 600 MG (<i>praziquantel</i>)	NPB	
EMVERM ORAL TABLET CHEWABLE 100 MG (<i>mebendazole</i>)	NPB	
<i>ivermectin oral tablet 3 mg</i>	G	
<i>praziquantel oral tablet 600 mg</i>	G	
STROMECTOL ORAL TABLET 3 MG (<i>ivermectin</i>)	NPB	

2020 Pharmacy Drug Guide - Premier Plus

The formulary is updated the first week of each month.

12/01/2020

Prescription Drug Name	Drug Tier	Coverage Requirements and Limits
ANTIANGINAL AGENTS - DRUGS FOR THE HEART		
DILATRATE-SR ORAL CAPSULE EXTENDED RELEASE 40 MG (<i>isosorbide dinitrate</i>)	NPB	
GONITRO SUBLINGUAL PACKET 400 MCG (<i>nitroglycerin</i>)	NPB	
ISORDIL TITRADOSE ORAL TABLET 40 MG, 5 MG (<i>isosorbide dinitrate</i>)	NPB	
<i>isosorbide dinitrate oral tablet 10 mg, 20 mg, 30 mg, 5 mg</i>	G	
<i>isosorbide mononitrate er oral tablet extended release 24 hour 120 mg, 30 mg, 60 mg</i>	G	
<i>isosorbide mononitrate oral tablet 10 mg, 20 mg</i>	G	
<i>nitroglycerin (Minitran Transdermal Patch 24 Hour 0.1 Mg/Hr, 0.2 Mg/Hr, 0.4 Mg/Hr, 0.6 Mg/Hr)</i>	G	
NITRO-BID TRANSDERMAL OINTMENT 2 % (<i>nitroglycerin</i>)	NPB	
NITRO-DUR TRANSDERMAL PATCH 24 HOUR 0.1 MG/HR, 0.2 MG/HR, 0.3 MG/HR, 0.4 MG/HR, 0.6 MG/HR, 0.8 MG/HR (<i>nitroglycerin</i>)	NPB	
<i>nitroglycerin sublingual tablet sublingual 0.3 mg, 0.4 mg, 0.6 mg</i>	G	
<i>nitroglycerin transdermal patch 24 hour 0.1 mg/hr, 0.2 mg/hr, 0.4 mg/hr, 0.6 mg/hr</i>	G	
<i>nitroglycerin translingual solution 0.4 mg/spray</i>	G	
NITROLINGUAL TRANSLINGUAL SOLUTION 0.4 MG/SPRAY (<i>nitroglycerin</i>)	NPB	
NITROMIST TRANSLINGUAL AEROSOL SOLUTION 400 MCG/SPRAY (<i>nitroglycerin</i>)	NPB	
NITROSTAT SUBLINGUAL TABLET SUBLINGUAL 0.3 MG, 0.4 MG, 0.6 MG (<i>nitroglycerin</i>)	NPB	
RANEXA ORAL TABLET EXTENDED RELEASE 12 HOUR 1000 MG, 500 MG (<i>ranolazine</i>)	NPB	
<i>ranolazine er oral tablet extended release 12 hour 1000 mg, 500 mg</i>	G	
ANTIANXIETY AGENTS - DRUGS FOR THE NERVOUS SYSTEM		
<i>alprazolam er oral tablet extended release 24 hour 0.5 mg, 1 mg, 2 mg, 3 mg</i>	G	
ALPRAZOLAM INTENSOL ORAL CONCENTRATE 1 MG/ML (<i>alprazolam</i>)	NPB	

2020 Pharmacy Drug Guide - Premier Plus

The formulary is updated the first week of each month.

12/01/2020

Prescription Drug Name	Drug Tier	Coverage Requirements and Limits
alprazolam oral tablet 0.25 mg, 0.5 mg, 1 mg, 2 mg	G	
alprazolam oral tablet dispersible 0.25 mg, 0.5 mg, 1 mg, 2 mg	G	
alprazolam xr oral tablet extended release 24 hour 0.5 mg, 1 mg, 2 mg, 3 mg	G	
ATIVAN ORAL TABLET 0.5 MG, 1 MG, 2 MG (lorazepam)	NPB	
buspirone hcl oral tablet 10 mg, 15 mg, 30 mg, 5 mg, 7.5 mg	G	
chlordiazepoxide hcl oral capsule 10 mg, 25 mg, 5 mg	G	
clorazepate dipotassium oral tablet 15 mg, 3.75 mg, 7.5 mg	G	
diazepam (Diazepam Intensol Oral Concentrate 5 Mg/Ml)	G	
diazepam oral solution 5 mg/5ml	G	
diazepam oral tablet 10 mg, 2 mg, 5 mg	G	
hydroxyzine hcl oral syrup 10 mg/5ml	G	
hydroxyzine hcl oral tablet 10 mg, 25 mg, 50 mg	G	
hydroxyzine pamoate oral capsule 100 mg, 25 mg, 50 mg	G	
hydroxyzine pamoate powder	G	
lorazepam (Lorazepam Intensol Oral Concentrate 2 Mg/Ml)	G	
lorazepam oral tablet 0.5 mg, 1 mg, 2 mg	G	
meprobamate oral tablet 200 mg, 400 mg	G	
oxazepam oral capsule 10 mg, 15 mg, 30 mg	G	
TRANXENE-T ORAL TABLET 7.5 MG (clorazepate dipotassium)	NPB	
VALIUM ORAL TABLET 10 MG, 2 MG, 5 MG (diazepam)	NPB	
VISTARIL ORAL CAPSULE 25 MG, 50 MG (hydroxyzine pamoate)	NPB	
XANAX ORAL TABLET 0.25 MG, 0.5 MG, 1 MG, 2 MG (alprazolam)	NPB	
XANAX XR ORAL TABLET EXTENDED RELEASE 24 HOUR 0.5 MG, 1 MG, 2 MG, 3 MG (alprazolam)	NPB	
ANTIARRHYTHMICS - DRUGS FOR THE HEART		
amiodarone hcl oral tablet 100 mg, 200 mg, 400 mg	G	
disopyramide phosphate oral capsule 100 mg, 150 mg	G	
dofetilide oral capsule 125 mcg, 250 mcg, 500 mcg	G	
flecainide acetate oral tablet 100 mg, 150 mg, 50 mg	G	
mexiletine hcl oral capsule 150 mg, 200 mg, 250 mg	G	

2020 Pharmacy Drug Guide - Premier Plus

The formulary is updated the first week of each month.

12/01/2020

Prescription Drug Name	Drug Tier	Coverage Requirements and Limits
MULTAQ ORAL TABLET 400 MG (<i>dronedarone hcl</i>)	PB	
NORPACE CR ORAL CAPSULE EXTENDED RELEASE 12 HOUR 100 MG, 150 MG (<i>disopyramide phosphate</i>)	NPB	
NORPACE ORAL CAPSULE 100 MG, 150 MG (<i>disopyramide phosphate</i>)	NPB	
<i>amiodarone hcl</i> (Pacerone Oral Tablet 100 Mg, 200 Mg, 400 Mg)	G	
<i>propafenone hcl er oral capsule extended release 12 hour 225 mg, 325 mg, 425 mg</i>	G	
<i>propafenone hcl oral tablet 150 mg, 225 mg, 300 mg</i>	G	
<i>quinidine gluconate er oral tablet extended release 324 mg</i>	G	
<i>quinidine sulfate oral tablet 200 mg, 300 mg</i>	G	
RYTHMOL SR ORAL CAPSULE EXTENDED RELEASE 12 HOUR 225 MG, 325 MG, 425 MG (<i>propafenone hcl</i>)	NPB	
TIKOSYN ORAL CAPSULE 125 MCG, 250 MCG, 500 MCG (<i>dofetilide</i>)	NPB	
ANTIASTHMATIC AND BRONCHODILATOR AGENTS - DRUGS FOR THE LUNGS		
ACCOLATE ORAL TABLET 10 MG, 20 MG (<i>zafirlukast</i>)	NPB	
ADVAIR DISKUS INHALATION AEROSOL POWDER BREATH ACTIVATED 100-50 MCG/DOSE, 250-50 MCG/DOSE, 500-50 MCG/DOSE (<i>fluticasone-salmeterol</i>)	PB	
ADVAIR HFA INHALATION AEROSOL 115-21 MCG/ACT, 230-21 MCG/ACT, 45-21 MCG/ACT (<i>fluticasone-salmeterol</i>)	PB	
AIRDUO DIGIHALER INHALATION AEROSOL POWDER BREATH ACTIVATED 113-14 MCG/ACT, 232-14 MCG/ACT, 55-14 MCG/ACT (<i>fluticasone-salmeterol</i>)	NPB	
AIRDUO RESPICLICK 113/14 INHALATION AEROSOL POWDER BREATH ACTIVATED 113-14 MCG/ACT (<i>fluticasone-salmeterol</i>)	NPB	
AIRDUO RESPICLICK 232/14 INHALATION AEROSOL POWDER BREATH ACTIVATED 232-14 MCG/ACT (<i>fluticasone-salmeterol</i>)	NPB	
AIRDUO RESPICLICK 55/14 INHALATION AEROSOL POWDER BREATH ACTIVATED 55-14 MCG/ACT (<i>fluticasone-salmeterol</i>)	NPB	
<i>albuterol sulfate er oral tablet extended release 12 hour 4 mg, 8 mg</i>	G	

2020 Pharmacy Drug Guide - Premier Plus

The formulary is updated the first week of each month.

12/01/2020

Prescription Drug Name	Drug Tier	Coverage Requirements and Limits
albuterol sulfate hfa inhalation aerosol solution 108 (90 base) mcg/act	G	
albuterol sulfate inhalation nebulization solution (2.5 mg/3ml) 0.083%, (5 mg/ml) 0.5%, 0.63 mg/3ml, 1.25 mg/3ml, 2.5 mg/0.5ml	G	
albuterol sulfate oral syrup 2 mg/5ml	G	
albuterol sulfate oral tablet 2 mg, 4 mg	G	
ALVESCO INHALATION AEROSOL SOLUTION 160 MCG/ACT, 80 MCG/ACT (<i>ciclesonide</i>)	NPB	
ANORO ELLIPTA INHALATION AEROSOL POWDER BREATH ACTIVATED 62.5-25 MCG/INH (<i>umeclidinium-vilanterol</i>)	PB	
ARCAPTA NEOHALER INHALATION CAPSULE 75 MCG (<i>indacaterol maleate</i>)	NPB	
ARMONAIR DIGIHALER INHALATION AEROSOL POWDER BREATH ACTIVATED 113 MCG/ACT, 232 MCG/ACT, 55 MCG/ACT (<i>fluticasone propionate (inhal)</i>)	NPB	
ARNUITY ELLIPTA INHALATION AEROSOL POWDER BREATH ACTIVATED 100 MCG/ACT, 200 MCG/ACT, 50 MCG/ACT (<i>fluticasone furoate</i>)	PB	
ASMANEX (120 METERED DOSES) INHALATION AEROSOL POWDER BREATH ACTIVATED 220 MCG/INH (<i>mometasone furoate</i>)	NPB	#
ASMANEX (14 METERED DOSES) INHALATION AEROSOL POWDER BREATH ACTIVATED 220 MCG/INH (<i>mometasone furoate</i>)	NPB	#
ASMANEX (30 METERED DOSES) INHALATION AEROSOL POWDER BREATH ACTIVATED 110 MCG/INH, 220 MCG/INH (<i>mometasone furoate</i>)	NPB	#
ASMANEX (60 METERED DOSES) INHALATION AEROSOL POWDER BREATH ACTIVATED 220 MCG/INH (<i>mometasone furoate</i>)	NPB	#
ASMANEX (7 METERED DOSES) INHALATION AEROSOL POWDER BREATH ACTIVATED 110 MCG/INH (<i>mometasone furoate</i>)	NPB	#
ASMANEX HFA INHALATION AEROSOL 100 MCG/ACT, 200 MCG/ACT, 50 MCG/ACT (<i>mometasone furoate</i>)	NPB	
ATROVENT HFA INHALATION AEROSOL SOLUTION 17 MCG/ACT (<i>ipratropium bromide hfa</i>)	NPB	

2020 Pharmacy Drug Guide - Premier Plus

The formulary is updated the first week of each month.

12/01/2020

Prescription Drug Name	Drug Tier	Coverage Requirements and Limits
BEVESPI AEROSPHERE INHALATION AEROSOL 9-4.8 MCG/ACT (<i>glycopyrrolate-formoterol</i>)	PB	
BREO ELLIPTA INHALATION AEROSOL POWDER BREATH ACTIVATED 100-25 MCG/INH, 200-25 MCG/INH (<i>fluticasone furoate-vilanterol</i>)	PB	
BREZTRI AEROSPHERE INHALATION AEROSOL 160-9-4.8 MCG/ACT (<i>budeson-glycopyrrol-formoterol</i>)	PB	
BROVANA INHALATION NEBULIZATION SOLUTION 15 MCG/2ML (<i>arformoterol tartrate</i>)	NPB	
<i>budesonide inhalation suspension 0.25 mg/2ml, 0.5 mg/2ml, 1 mg/2ml</i>	G	
<i>budesonide-formoterol fumarate inhalation aerosol 160-4.5 mcg/act, 80-4.5 mcg/act</i>	G	
CINQAIR INTRAVENOUS SOLUTION 100 MG/10ML (<i>reslizumab</i>)	NPSP	PA; NPL; SP
COMBIVENT RESPIMAT INHALATION AEROSOL SOLUTION 20-100 MCG/ACT (<i>ipratropium-albuterol</i>)	PB	
<i>cromolyn sodium inhalation nebulization solution 20 mg/2ml</i>	G	
DALIRESP ORAL TABLET 250 MCG, 500 MCG (<i>roflumilast</i>)	PB	#
DIFIL-G FORTE ORAL LIQUID 100-100 MG/5ML (<i>dyphylline-guaifenesin</i>)	G	
DUAKLIR PRESSAIR INHALATION AEROSOL POWDER BREATH ACTIVATED 400-12 MCG/ACT (<i>aclidinium br-formoterol fum</i>)	NPB	
DULERA INHALATION AEROSOL 100-5 MCG/ACT, 200-5 MCG/ACT, 50-5 MCG/ACT (<i>mometasone furo-formoterol fum</i>)	NPB	#
ELIXOPHYLLIN ORAL ELIXIR 80 MG/15ML (<i>theophylline</i>)	NPB	
FASENRA PEN SUBCUTANEOUS SOLUTION AUTO-INJECTOR 30 MG/ML (<i>benralizumab</i>)	PSP	PA; NPL; SP
FLOVENT DISKUS INHALATION AEROSOL POWDER BREATH ACTIVATED 100 MCG/BLIST, 250 MCG/BLIST, 50 MCG/BLIST (<i>fluticasone propionate (inhal)</i>)	PB	#
FLOVENT HFA INHALATION AEROSOL 110 MCG/ACT, 220 MCG/ACT, 44 MCG/ACT (<i>fluticasone propionate hfa</i>)	PB	#

2020 Pharmacy Drug Guide - Premier Plus

The formulary is updated the first week of each month.

12/01/2020

Prescription Drug Name	Drug Tier	Coverage Requirements and Limits
<i>fluticasone-salmeterol inhalation aerosol powder breath activated 100-50 mcg/dose, 113-14 mcg/act, 232-14 mcg/act, 250-50 mcg/dose, 500-50 mcg/dose, 55-14 mcg/act</i>	G	
INCRUSE ELLIPTA INHALATION AEROSOL POWDER BREATH ACTIVATED 62.5 MCG/INH (<i>umeclidinium bromide</i>)	PB	
<i>ipratropium bromide inhalation solution 0.02 %</i>	G	
<i>ipratropium-albuterol inhalation solution 0.5-2.5 (3) mg/3ml</i>	G	
<i>levalbuterol hcl inhalation nebulization solution 0.31 mg/3ml, 0.63 mg/3ml, 1.25 mg/0.5ml, 1.25 mg/3ml</i>	G	
LONHALA MAGNAIR REFILL KIT INHALATION SOLUTION 25 MCG/ML (<i>glycopyrrolate</i>)	NPB	
LONHALA MAGNAIR STARTER KIT INHALATION SOLUTION 25 MCG/ML (<i>glycopyrrolate</i>)	NPB	
<i>montelukast sodium oral packet 4 mg</i>	G	
<i>montelukast sodium oral tablet 10 mg</i>	G	
<i>montelukast sodium oral tablet chewable 4 mg, 5 mg</i>	G	
NUCALA SUBCUTANEOUS SOLUTION AUTO-INJECTOR 100 MG/ML (<i>mepolizumab</i>)	NPSP	PA; NPL
NUCALA SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 100 MG/ML (<i>mepolizumab</i>)	NPSP	PA; NPL
NUCALA SUBCUTANEOUS SOLUTION RECONSTITUTED 100 MG (<i>mepolizumab</i>)	NPSP	PA; NPL; SP
PERFOROMIST INHALATION NEBULIZATION SOLUTION 20 MCG/2ML (<i>formoterol fumarate</i>)	NPB	#
PROAIR DIGITALER INHALATION AEROSOL POWDER BREATH ACTIVATED 108 MCG/ACT (<i>albuterol sulfate</i>)	NPB	
PROAIR HFA INHALATION AEROSOL SOLUTION 108 (90 BASE) MCG/ACT (<i>albuterol sulfate</i>)	NPB	
PROAIR RESPICLICK INHALATION AEROSOL POWDER BREATH ACTIVATED 108 (90 BASE) MCG/ACT (<i>albuterol sulfate</i>)	NPB	
PROVENTIL HFA INHALATION AEROSOL SOLUTION 108 (90 BASE) MCG/ACT (<i>albuterol sulfate</i>)	NPB	
PULMICORT FLEXHALER INHALATION AEROSOL POWDER BREATH ACTIVATED 180 MCG/ACT, 90 MCG/ACT (<i>budesonide</i>)	PB	#

2020 Pharmacy Drug Guide - Premier Plus

The formulary is updated the first week of each month.

12/01/2020

Prescription Drug Name	Drug Tier	Coverage Requirements and Limits
PULMICORT INHALATION SUSPENSION 0.25 MG/2ML, 0.5 MG/2ML, 1 MG/2ML (<i>budesonide</i>)	NPB	
QVAR REDIHALER INHALATION AEROSOL BREATH ACTIVATED 40 MCG/ACT, 80 MCG/ACT (<i>beclomethasone diprop hfa</i>)	PB	
SEEBRI NEOHALER INHALATION CAPSULE 15.6 MCG (<i>glycopyrrolate</i>)	NPB	
SEREVENT DISKUS INHALATION AEROSOL POWDER BREATH ACTIVATED 50 MCG/DOSE (<i>salmeterol xinafoate</i>)	PB	
SINGULAIR ORAL PACKET 4 MG (<i>montelukast sodium</i>)	NPB	
SINGULAIR ORAL TABLET 10 MG (<i>montelukast sodium</i>)	NPB	
SINGULAIR ORAL TABLET CHEWABLE 4 MG, 5 MG (<i>montelukast sodium</i>)	NPB	
SPIRIVA HANDIHALER INHALATION CAPSULE 18 MCG (<i>tiotropium bromide monohydrate</i>)	PB	
SPIRIVA RESPIMAT INHALATION AEROSOL SOLUTION 1.25 MCG/ACT, 2.5 MCG/ACT (<i>tiotropium bromide monohydrate</i>)	PB	
STIOLTO RESPIMAT INHALATION AEROSOL SOLUTION 2.5-2.5 MCG/ACT (<i>tiotropium bromide-olodaterol</i>)	PB	
STRIVERDI RESPIMAT INHALATION AEROSOL SOLUTION 2.5 MCG/ACT (<i>olodaterol hcl</i>)	PB	
SYMBICORT INHALATION AEROSOL 160-4.5 MCG/ACT, 80-4.5 MCG/ACT (<i>budesonide-formoterol fumarate</i>)	PB	
<i>terbutaline sulfate oral tablet 2.5 mg, 5 mg</i>	G	
THEO-24 ORAL CAPSULE EXTENDED RELEASE 24 HOUR 100 MG, 200 MG, 300 MG, 400 MG (<i>theophylline</i>)	PB	
<i>theophylline er oral tablet extended release 12 hour 300 mg, 450 mg</i>	G	
<i>theophylline er oral tablet extended release 24 hour 400 mg, 600 mg</i>	G	
<i>theophylline oral solution 80 mg/15ml</i>	G	
TRELEGY ELLIPTA INHALATION AEROSOL POWDER BREATH ACTIVATED 100-62.5-25 MCG/INH, 200-62.5-25 MCG/INH (<i>fluticasone-umeclidin-vilant</i>)	PB	

Prescription Drug Name	Drug Tier	Coverage Requirements and Limits
TUDORZA PRESSAIR INHALATION AEROSOL POWDER BREATH ACTIVATED 400 MCG/ACT (<i>aclidinium bromide</i>)	NPB	
UTIBRON NEOHALER INHALATION CAPSULE 27.5-15.6 MCG (<i>indacaterol-glycopyrrolate</i>)	NPB	
VENTOLIN HFA INHALATION AEROSOL SOLUTION 108 (90 BASE) MCG/ACT (<i>albuterol sulfate</i>)	PB	
<i>fluticasone-salmeterol</i> (Wixela Inhub Inhalation Aerosol Powder Breath Activated 100-50 Mcg/Dose, 250-50 Mcg/Dose, 500-50 Mcg/Dose)	G	
XOLAIR SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 150 MG/ML, 75 MG/0.5ML (<i>omalizumab</i>)	PSP	PA; NPL; SP
XOLAIR SUBCUTANEOUS SOLUTION RECONSTITUTED 150 MG (<i>omalizumab</i>)	PSP	PA; NPL; SP
XOPENEX CONCENTRATE INHALATION NEBULIZATION SOLUTION 1.25 MG/0.5ML (<i>levalbuterol hcl</i>)	NPB	
XOPENEX HFA INHALATION AEROSOL 45 MCG/ACT (<i>levalbuterol tartrate</i>)	NPB	
XOPENEX INHALATION NEBULIZATION SOLUTION 0.31 MG/3ML, 0.63 MG/3ML, 1.25 MG/3ML (<i>levalbuterol hcl</i>)	NPB	
YUPELRI INHALATION SOLUTION 175 MCG/3ML (<i>revefenacin</i>)	PB	
<i>zafirlukast oral tablet 10 mg, 20 mg</i>	G	
<i>zileuton er oral tablet extended release 12 hour 600 mg</i>	G	
ZYFLO ORAL TABLET 600 MG (<i>zileuton</i>)	NPB	
ANTICOAGULANTS - DRUGS FOR THE BLOOD		
<i>acd formula a in vitro solution 0.73-2.45-2.2 gm/100ml</i>	NPB	
ACD-A NOCLOT-50 IN VITRO SOLUTION 0.73-2.45-2.2 GM/100ML (<i>anticoagulant cit dext soln a</i>)	NPB	
ARIXTRA SUBCUTANEOUS SOLUTION 10 MG/0.8ML, 2.5 MG/0.5ML, 5 MG/0.4ML, 7.5 MG/0.6ML (<i>fondaparinux sodium</i>)	NPB	
ELIQUIS DVT/PE STARTER PACK ORAL TABLET THERAPY PACK 5 MG (<i>apixaban</i>)	PB	
ELIQUIS ORAL TABLET 2.5 MG, 5 MG (<i>apixaban</i>)	PB	
<i>enoxaparin sodium injection solution 300 mg/3ml</i>	G	

2020 Pharmacy Drug Guide - Premier Plus

The formulary is updated the first week of each month.

12/01/2020

Prescription Drug Name	Drug Tier	Coverage Requirements and Limits
<i>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</i>	G	
<i>fondaparinux sodium subcutaneous solution 10 mg/0.8ml, 2.5 mg/0.5ml, 5 mg/0.4ml, 7.5 mg/0.6ml</i>	G	
FRAGMIN SUBCUTANEOUS SOLUTION 10000 UNIT/ML, 12500 UNIT/0.5ML, 15000 UNIT/0.6ML, 18000 UNT/0.72ML, 2500 UNIT/0.2ML, 5000 UNIT/0.2ML, 7500 UNIT/0.3ML, 95000 UNIT/3.8ML (dalteparin sodium)	NPB	
<i>heparin sodium (porcine) injection solution 1000 unit/ml, 10000 unit/ml, 20000 unit/ml, 5000 unit/ml</i>	G	
<i>heparin sodium (porcine) pf injection solution 5000 unit/0.5ml, 5000 unit/ml</i>	G	
<i>warfarin sodium (Jantoven Oral Tablet 1 Mg, 10 Mg, 2 Mg, 2.5 Mg, 3 Mg, 4 Mg, 5 Mg, 6 Mg, 7.5 Mg)</i>	G	
LOVENOX INJECTION SOLUTION 300 MG/3ML (enoxaparin sodium)	NPB	
LOVENOX 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 (enoxaparin sodium)	NPB	
PRADAXA ORAL CAPSULE 110 MG, 150 MG, 75 MG (dabigatran etexilate mesylate)	NPB	#; UF9 (PB)
SAVAYSA ORAL TABLET 15 MG, 30 MG, 60 MG (edoxaban tosylate)	NPB	
<i>warfarin sodium oral tablet 1 mg, 10 mg, 2 mg, 2.5 mg, 3 mg, 4 mg, 5 mg, 6 mg, 7.5 mg</i>	G	LGC
XARELTO ORAL TABLET 10 MG, 15 MG, 2.5 MG, 20 MG (rivaroxaban)	PB	
XARELTO STARTER PACK ORAL TABLET THERAPY PACK 15 & 20 MG (rivaroxaban)	PB	
ANTICONVULSANTS - DRUGS FOR THE NERVOUS SYSTEM		
APTIOM ORAL TABLET 200 MG, 400 MG, 600 MG, 800 MG (eslicarbazepine acetate)	NPB	#
BANZEL ORAL SUSPENSION 40 MG/ML (rufinamide)	NPB	
BANZEL ORAL TABLET 200 MG, 400 MG (rufinamide)	NPB	
BRIVIACT ORAL TABLET 10 MG, 100 MG, 25 MG, 50 MG, 75 MG (brivaracetam)	NPB	

2020 Pharmacy Drug Guide - Premier Plus

The formulary is updated the first week of each month.

12/01/2020

Prescription Drug Name	Drug Tier	Coverage Requirements and Limits
carbamazepine er oral capsule extended release 12 hour 100 mg, 200 mg, 300 mg	G	
carbamazepine er oral tablet extended release 12 hour 100 mg, 200 mg, 400 mg	G	
carbamazepine oral suspension 100 mg/5ml	G	
carbamazepine oral tablet 200 mg	G	
carbamazepine oral tablet chewable 100 mg	G	
CARBATROL ORAL CAPSULE EXTENDED RELEASE 12 HOUR 100 MG, 200 MG, 300 MG (carbamazepine)	PB	
CELONTIN ORAL CAPSULE 300 MG (methsuximide)	PB	
clobazam oral suspension 2.5 mg/ml	G	
clobazam oral tablet 10 mg, 20 mg	G	
clonazepam oral tablet 0.5 mg, 1 mg, 2 mg	G	
clonazepam oral tablet dispersible 0.125 mg, 0.25 mg, 0.5 mg, 1 mg, 2 mg	G	
DEPAKOTE ER ORAL TABLET EXTENDED RELEASE 24 HOUR 250 MG, 500 MG (divalproex sodium)	NPB	
DEPAKOTE ORAL TABLET DELAYED RELEASE 125 MG, 250 MG, 500 MG (divalproex sodium)	NPB	
DEPAKOTE SPRINKLES ORAL CAPSULE DELAYED RELEASE SPRINKLE 125 MG (divalproex sodium)	NPB	
DIACOMIT ORAL CAPSULE 250 MG, 500 MG (stiripentol)	NPSP	SP
DIACOMIT ORAL PACKET 250 MG, 500 MG (stiripentol)	NPSP	SP
DIASTAT ACUDIAL RECTAL GEL 10 MG, 20 MG (diazepam)	PB	
DIASSTAT PEDIATRIC RECTAL GEL 2.5 MG (diazepam)	PB	
DILANTIN INFATABS ORAL TABLET CHEWABLE 50 MG (phenytoin)	NPB	
DILANTIN ORAL CAPSULE 100 MG, 30 MG (phenytoin sodium extended)	NPB	
DILANTIN ORAL SUSPENSION 125 MG/5ML (phenytoin)	NPB	
divalproex sodium er oral tablet extended release 24 hour 250 mg, 500 mg	G	
divalproex sodium oral capsule delayed release sprinkle 125 mg	G	
divalproex sodium oral tablet delayed release 125 mg, 250 mg, 500 mg	G	

2020 Pharmacy Drug Guide - Premier Plus

The formulary is updated the first week of each month.

12/01/2020

Prescription Drug Name	Drug Tier	Coverage Requirements and Limits
EPIDIOLEX ORAL SOLUTION 100 MG/ML (<i>cannabidiol</i>)	NPSP	PA; SP
<i>carbamazepine</i> (Epitol Oral Tablet 200 Mg)	G	
<i>ethosuximide oral capsule 250 mg</i>	G	
<i>ethosuximide oral solution 250 mg/5ml</i>	G	
<i>felbamate oral suspension 600 mg/5ml</i>	G	
<i>felbamate oral tablet 400 mg, 600 mg</i>	G	
FELBATOL ORAL SUSPENSION 600 MG/5ML (<i>felbamate</i>)	NPB	
FELBATOL ORAL TABLET 400 MG, 600 MG (<i>felbamate</i>)	NPB	
FINTEPLA ORAL SOLUTION 2.2 MG/ML (<i>fenfluramine hcl</i>)	NPSP	PA; SP
FYCOMPA ORAL SUSPENSION 0.5 MG/ML (<i>perampanel</i>)	PB	
FYCOMPA ORAL TABLET 10 MG, 12 MG, 2 MG, 4 MG, 6 MG, 8 MG (<i>perampanel</i>)	PB	
<i>gabapentin oral capsule 100 mg, 300 mg, 400 mg</i>	G	
<i>gabapentin oral solution 250 mg/5ml, 300 mg/6ml</i>	G	
<i>gabapentin oral tablet 600 mg, 800 mg</i>	G	
GABITRIL ORAL TABLET 12 MG, 16 MG, 2 MG, 4 MG (<i>tiagabine hcl</i>)	NPB	
KEPPRA INTRAVENOUS SOLUTION 500 MG/5ML (<i>levetiracetam</i>)	NPB	
KEPPRA ORAL SOLUTION 100 MG/ML (<i>levetiracetam</i>)	NPB	
KEPPRA ORAL TABLET 1000 MG, 250 MG, 500 MG, 750 MG (<i>levetiracetam</i>)	NPB	
KEPPRA XR ORAL TABLET EXTENDED RELEASE 24 HOUR 500 MG, 750 MG (<i>levetiracetam</i>)	NPB	
KLONOPIN ORAL TABLET 0.5 MG, 1 MG, 2 MG (<i>clonazepam</i>)	NPB	
LAMICTAL ODT ORAL KIT 21 X 25 MG & 7 X 50 MG, 25 & 50 & 100 MG, 42 X 50 MG & 14X100 MG (<i>lamotrigine</i>)	NPB	
LAMICTAL ODT ORAL TABLET DISPERSIBLE 100 MG, 200 MG, 25 MG, 50 MG (<i>lamotrigine</i>)	NPB	
LAMICTAL ORAL TABLET 100 MG, 150 MG, 200 MG, 25 MG (<i>lamotrigine</i>)	NPB	
LAMICTAL ORAL TABLET CHEWABLE 25 MG, 5 MG (<i>lamotrigine</i>)	NPB	

2020 Pharmacy Drug Guide - Premier Plus

The formulary is updated the first week of each month.

12/01/2020

Prescription Drug Name	Drug Tier	Coverage Requirements and Limits
LAMICTAL STARTER ORAL KIT 35 X 25 MG, 42 X 25 MG & 7 X 100 MG, 84 X 25 MG & 14X100 MG (<i>lamotrigine</i>)	NPB	
LAMICTAL XR ORAL KIT 21 X 25 MG & 7 X 50 MG, 25 & 50 & 100 MG, 50 & 100 & 200 MG (<i>lamotrigine</i>)	NPB	
LAMICTAL XR ORAL TABLET EXTENDED RELEASE 24 HOUR 100 MG, 200 MG, 25 MG, 250 MG, 300 MG, 50 MG (<i>lamotrigine</i>)	NPB	
<i>lamotrigine er oral tablet extended release 24 hour 100 mg, 200 mg, 25 mg, 250 mg, 300 mg, 50 mg</i>	G	
<i>lamotrigine oral tablet 100 mg, 150 mg, 200 mg, 25 mg</i>	G	
<i>lamotrigine oral tablet chewable 25 mg, 5 mg</i>	G	
<i>lamotrigine oral tablet dispersible 100 mg, 200 mg, 25 mg, 50 mg</i>	G	
<i>lamotrigine starter kit-blue oral kit 35 x 25 mg</i>	G	
<i>lamotrigine starter kit-green oral kit 84 x 25 mg & 14x100 mg</i>	G	
<i>lamotrigine starter kit-orange oral kit 42 x 25 mg & 7 x 100 mg</i>	G	
<i>levetiracetam er oral tablet extended release 24 hour 500 mg, 750 mg</i>	G	
<i>levetiracetam oral solution 100 mg/ml</i>	G	
<i>levetiracetam oral tablet 1000 mg, 250 mg, 500 mg, 750 mg</i>	G	
LYRICA ORAL CAPSULE 100 MG, 150 MG, 200 MG, 225 MG, 25 MG, 300 MG, 50 MG, 75 MG (<i>pregabalin</i>)	NPB	
LYRICA ORAL SOLUTION 20 MG/ML (<i>pregabalin</i>)	NPB	
MYSOLINE ORAL TABLET 250 MG, 50 MG (<i>primidone</i>)	NPB	
NAYZILAM NASAL SOLUTION 5 MG/0.1ML (<i>midazolam (anticonvulsant)</i>)	NPB	
NEURONTIN ORAL CAPSULE 100 MG, 300 MG, 400 MG (<i> gabapentin</i>)	NPB	
NEURONTIN ORAL SOLUTION 250 MG/5ML (<i> gabapentin</i>)	NPB	
NEURONTIN ORAL TABLET 600 MG, 800 MG (<i> gabapentin</i>)	NPB	
ONFI ORAL SUSPENSION 2.5 MG/ML (<i>clobazam</i>)	NPB	
ONFI ORAL TABLET 10 MG, 20 MG (<i>clobazam</i>)	NPB	
<i>oxcarbazepine oral suspension 300 mg/5ml</i>	G	
<i>oxcarbazepine oral tablet 150 mg, 300 mg, 600 mg</i>	G	

2020 Pharmacy Drug Guide - Premier Plus

The formulary is updated the first week of each month.

12/01/2020

Prescription Drug Name	Drug Tier	Coverage Requirements and Limits
OXTELLAR XR ORAL TABLET EXTENDED RELEASE 24 HOUR 150 MG, 300 MG, 600 MG (<i>oxcarbazepine</i>)	PB	
PHENYTEK ORAL CAPSULE 200 MG, 300 MG (<i>phenytoin sodium extended</i>)	NPB	
<i>phenytoin</i> (Phenytoin Infatabs Oral Tablet Chewable 50 Mg)	G	
<i>phenytoin oral suspension 125 mg/5ml</i>	G	
<i>phenytoin oral tablet chewable 50 mg</i>	G	
<i>phenytoin sodium extended oral capsule 100 mg, 200 mg, 300 mg</i>	G	
<i>pregabalin oral solution 20 mg/ml</i>	G	
<i>primidone oral tablet 250 mg, 50 mg</i>	G	
QUDEXY XR ORAL CAPSULE ER 24 HOUR SPRINKLE 100 MG, 150 MG, 200 MG, 25 MG, 50 MG (<i>topiramate</i>)	NPB	
SABRIL ORAL PACKET 500 MG (<i>vigabatrin</i>)	NPSP	PA; SP
SABRIL ORAL TABLET 500 MG (<i>vigabatrin</i>)	NPSP	PA; SP
SYMPAZAN ORAL FILM 10 MG, 20 MG, 5 MG (<i>clobazam</i>)	NPB	
TEGRETOL ORAL SUSPENSION 100 MG/5ML (<i>carbamazepine</i>)	PB	
TEGRETOL ORAL TABLET 200 MG (<i>carbamazepine</i>)	PB	
TEGRETOL-XR ORAL TABLET EXTENDED RELEASE 12 HOUR 100 MG, 200 MG, 400 MG (<i>carbamazepine</i>)	NPB	
<i>tiagabine hcl oral tablet 12 mg, 16 mg, 2 mg, 4 mg</i>	G	
TOPAMAX ORAL TABLET 100 MG, 200 MG, 25 MG, 50 MG (<i>topiramate</i>)	NPB	
TOPAMAX SPRINKLE ORAL CAPSULE SPRINKLE 15 MG, 25 MG (<i>topiramate</i>)	NPB	
<i>topiramate oral capsule sprinkle 15 mg, 25 mg</i>	G	
<i>topiramate oral tablet 100 mg, 200 mg, 25 mg, 50 mg</i>	G	
TRILEPTAL ORAL SUSPENSION 300 MG/5ML (<i>oxcarbazepine</i>)	NPB	
TRILEPTAL ORAL TABLET 150 MG, 300 MG, 600 MG (<i>oxcarbazepine</i>)	NPB	
TROKENDI XR ORAL CAPSULE EXTENDED RELEASE 24 HOUR 100 MG, 200 MG, 25 MG, 50 MG (<i>topiramate</i>)	PB	#
<i>valproic acid oral capsule 250 mg</i>	G	

2020 Pharmacy Drug Guide - Premier Plus

The formulary is updated the first week of each month.

12/01/2020

Prescription Drug Name	Drug Tier	Coverage Requirements and Limits
<i>valproic acid oral solution 250 mg/5ml</i>	G	
VALTOCO 10 MG DOSE NASAL LIQUID 10 MG/0.1ML (<i>diazepam</i>)	NPB	
VALTOCO 15 MG DOSE NASAL LIQUID THERAPY PACK 7.5 MG/0.1ML (<i>diazepam</i>)	NPB	
VALTOCO 20 MG DOSE NASAL LIQUID THERAPY PACK 10 MG/0.1ML (<i>diazepam</i>)	NPB	
VALTOCO 5 MG DOSE NASAL LIQUID 5 MG/0.1ML (<i>diazepam</i>)	NPB	
<i>vigabatrin oral packet 500 mg</i>	PSP	PA; SP
<i>vigabatrin oral tablet 500 mg</i>	PSP	PA; SP
<i>vigabatrin</i> (Vigadron Oral Packet 500 Mg)	PSP	PA; SP
VIMPAT ORAL SOLUTION 10 MG/ML (<i>lacosamide</i>)	PB	#; UF9 (PB)
VIMPAT ORAL TABLET 100 MG, 150 MG, 200 MG, 50 MG (<i>lacosamide</i>)	PB	#; UF9 (PB)
XCOPRI (250 MG DAILY DOSE) ORAL TABLET THERAPY PACK 50 & 200 MG (<i>cenobamate</i>)	NPB	
XCOPRI (350 MG DAILY DOSE) ORAL TABLET THERAPY PACK 150 & 200 MG (<i>cenobamate</i>)	NPB	
XCOPRI ORAL TABLET 100 MG, 150 MG, 200 MG, 50 MG (<i>cenobamate</i>)	NPB	
XCOPRI ORAL TABLET THERAPY PACK 14 X 12.5 MG & 14 X 25 MG, 14 X 150 MG & 14 X 200 MG, 14 X 50 MG & 14 X 100 MG (<i>cenobamate</i>)	NPB	
ZARONTIN ORAL CAPSULE 250 MG (<i>ethosuximide</i>)	NPB	
ZARONTIN ORAL SOLUTION 250 MG/5ML (<i>ethosuximide</i>)	NPB	
ZONEGRAN ORAL CAPSULE 100 MG, 25 MG (<i>zonisamide</i>)	NPB	
<i>zonisamide oral capsule 100 mg, 25 mg, 50 mg</i>	G	
ANTIDEPRESSANTS - DRUGS FOR THE NERVOUS SYSTEM		
<i>amitriptyline hcl oral tablet 10 mg, 100 mg, 150 mg, 25 mg, 50 mg, 75 mg</i>	G	
<i>amoxapine oral tablet 100 mg, 150 mg, 25 mg, 50 mg</i>	G	
ANAFRANIL ORAL CAPSULE 25 MG, 50 MG, 75 MG (<i>clomipramine hcl</i>)	NPB	

2020 Pharmacy Drug Guide - Premier Plus

The formulary is updated the first week of each month.

12/01/2020

Prescription Drug Name	Drug Tier	Coverage Requirements and Limits
APLENZIN ORAL TABLET EXTENDED RELEASE 24 HOUR 174 MG, 348 MG, 522 MG (<i>bupropion hbr</i>)	NPB	
<i>bupropion hcl er (sr) oral tablet extended release 12 hour 100 mg, 150 mg, 200 mg</i>	G	
<i>bupropion hcl er (xl) oral tablet extended release 24 hour 150 mg, 300 mg, 450 mg</i>	G	
<i>bupropion hcl oral tablet 100 mg, 75 mg</i>	G	
CELEXA ORAL TABLET 10 MG, 20 MG, 40 MG (<i>citalopram hydrobromide</i>)	NPB	
<i>citalopram hydrobromide oral solution 10 mg/5ml</i>	G	
<i>citalopram hydrobromide oral tablet 10 mg, 20 mg, 40 mg</i>	G	LGC
<i>clomipramine hcl oral capsule 25 mg, 50 mg, 75 mg</i>	G	
CYMBALTA ORAL CAPSULE DELAYED RELEASE PARTICLES 20 MG, 30 MG, 60 MG (<i>duloxetine hcl</i>)	NPB	
<i>desipramine hcl oral tablet 10 mg, 100 mg, 150 mg, 25 mg, 50 mg, 75 mg</i>	G	
<i>desvenlafaxine er oral tablet extended release 24 hour 100 mg, 50 mg</i>	NPB	
<i>desvenlafaxine succinate er oral tablet extended release 24 hour 100 mg, 25 mg, 50 mg</i>	G	
<i>doxepin hcl oral capsule 10 mg, 100 mg, 150 mg, 25 mg, 50 mg, 75 mg</i>	G	
<i>doxepin hcl oral concentrate 10 mg/ml</i>	G	
DRIZALMA SPRINKLE ORAL CAPSULE DELAYED RELEASE SPRINKLE 20 MG, 30 MG, 40 MG, 60 MG (<i>duloxetine hcl</i>)	NPB	
<i>duloxetine hcl oral capsule delayed release particles 20 mg, 30 mg, 40 mg, 60 mg</i>	G	
EFFEXOR XR ORAL CAPSULE EXTENDED RELEASE 24 HOUR 150 MG, 37.5 MG, 75 MG (<i>venlafaxine hcl</i>)	NPB	
EMSAM TRANSDERMAL PATCH 24 HOUR 12 MG/24HR, 6 MG/24HR, 9 MG/24HR (<i>selegiline</i>)	NPB	#
<i>escitalopram oxalate oral solution 5 mg/5ml</i>	G	
<i>escitalopram oxalate oral tablet 10 mg, 20 mg, 5 mg</i>	G	
FETZIMA ORAL CAPSULE EXTENDED RELEASE 24 HOUR 120 MG, 20 MG, 40 MG, 80 MG (<i>levomilnacipran hcl</i>)	NPB	

Prescription Drug Name	Drug Tier	Coverage Requirements and Limits
FETZIMA TITRATION ORAL CAPSULE ER 24 HOUR THERAPY PACK 20 & 40 MG (<i>levomilnacipran hcl</i>)	NPB	
<i>fluoxetine hcl oral capsule 10 mg, 20 mg, 40 mg</i>	G	
<i>fluoxetine hcl oral capsule delayed release 90 mg</i>	G	
<i>fluoxetine hcl oral solution 20 mg/5ml</i>	G	
<i>fluoxetine hcl oral tablet 10 mg, 20 mg, 60 mg</i>	G	
<i>fluvoxamine maleate er oral capsule extended release 24 hour 100 mg, 150 mg</i>	G	
<i>fluvoxamine maleate oral tablet 100 mg, 25 mg, 50 mg</i>	G	
FORFIVO XL ORAL TABLET EXTENDED RELEASE 24 HOUR 450 MG (<i>bupropion hcl</i>)	NPB	
<i>imipramine hcl oral tablet 10 mg, 25 mg, 50 mg</i>	G	
<i>imipramine pamoate oral capsule 100 mg, 125 mg, 150 mg, 75 mg</i>	G	
LEXAPRO ORAL TABLET 10 MG, 20 MG, 5 MG (<i>escitalopram oxalate</i>)	NPB	
<i>maprotiline hcl oral tablet 25 mg, 50 mg, 75 mg</i>	G	
MARPLAN ORAL TABLET 10 MG (<i>isocarboxazid</i>)	NPB	
<i>mirtazapine oral tablet 15 mg, 30 mg, 45 mg, 7.5 mg</i>	G	
<i>mirtazapine oral tablet dispersible 15 mg, 30 mg, 45 mg</i>	G	
NARDIL ORAL TABLET 15 MG (<i>phenelzine sulfate</i>)	NPB	
<i>nefazodone hcl oral tablet 100 mg, 150 mg, 200 mg, 250 mg, 50 mg</i>	G	
NORPRAMIN ORAL TABLET 10 MG, 25 MG (<i>desipramine hcl</i>)	NPB	
<i>nortriptyline hcl oral capsule 10 mg, 25 mg, 50 mg, 75 mg</i>	G	
<i>nortriptyline hcl oral solution 10 mg/5ml</i>	G	
PAMELOR ORAL CAPSULE 10 MG, 25 MG, 50 MG, 75 MG (<i>nortriptyline hcl</i>)	NPB	
PARNATE ORAL TABLET 10 MG (<i>tranylcypromine sulfate</i>)	NPB	
<i>paroxetine hcl er oral tablet extended release 24 hour 12.5 mg, 25 mg, 37.5 mg</i>	G	
<i>paroxetine hcl oral tablet 10 mg, 20 mg, 30 mg, 40 mg</i>	G	LGC
PAXIL CR ORAL TABLET EXTENDED RELEASE 24 HOUR 12.5 MG, 25 MG, 37.5 MG (<i>paroxetine hcl</i>)	NPB	

2020 Pharmacy Drug Guide - Premier Plus

The formulary is updated the first week of each month.

12/01/2020

Prescription Drug Name	Drug Tier	Coverage Requirements and Limits
PAXIL ORAL SUSPENSION 10 MG/5ML (<i>paroxetine hcl</i>)	NPB	
PAXIL ORAL TABLET 10 MG, 20 MG, 30 MG, 40 MG (<i>paroxetine hcl</i>)	NPB	
PEXEVA ORAL TABLET 10 MG, 20 MG, 30 MG, 40 MG (<i>paroxetine mesylate</i>)	NPB	
<i>phenelzine sulfate oral tablet 15 mg</i>	G	
PRISTIQ ORAL TABLET EXTENDED RELEASE 24 HOUR 100 MG, 25 MG, 50 MG (<i>desvenlafaxine succinate</i>)	NPB	
<i>protriptyline hcl oral tablet 10 mg, 5 mg</i>	G	
PROZAC ORAL CAPSULE 10 MG, 20 MG, 40 MG (<i>fluoxetine hcl</i>)	NPB	
REMERON ORAL TABLET 15 MG, 30 MG (<i>mirtazapine</i>)	NPB	
REMERON SOLTAB ORAL TABLET DISPERSIBLE 15 MG, 30 MG, 45 MG (<i>mirtazapine</i>)	NPB	
<i>sertraline hcl oral concentrate 20 mg/ml</i>	G	
<i>sertraline hcl oral tablet 100 mg, 25 mg, 50 mg</i>	G	LGC
<i>tranylcypromine sulfate oral tablet 10 mg</i>	G	
<i>trazodone hcl oral tablet 100 mg, 150 mg, 300 mg, 50 mg</i>	G	
<i>trimipramine maleate oral capsule 100 mg, 25 mg, 50 mg</i>	G	
TRINTELLIX ORAL TABLET 10 MG, 20 MG, 5 MG (<i>vortioxetine hbr</i>)	PB	
<i>venlafaxine hcl er oral capsule extended release 24 hour 150 mg, 37.5 mg, 75 mg</i>	G	
<i>venlafaxine hcl er oral tablet extended release 24 hour 150 mg, 225 mg, 37.5 mg, 75 mg</i>	G	
<i>venlafaxine hcl oral tablet 100 mg, 25 mg, 37.5 mg, 50 mg, 75 mg</i>	G	
VIIIBRYD ORAL TABLET 10 MG, 20 MG, 40 MG (<i>vilazodone hcl</i>)	PB	#
VIIIBRYD STARTER PACK ORAL KIT 10 & 20 MG (<i>vilazodone hcl</i>)	PB	#
WELLBUTRIN SR ORAL TABLET EXTENDED RELEASE 12 HOUR 100 MG, 150 MG, 200 MG (<i>bupropion hcl</i>)	NPB	
WELLBUTRIN XL ORAL TABLET EXTENDED RELEASE 24 HOUR 150 MG, 300 MG (<i>bupropion hcl</i>)	NPB	

Prescription Drug Name	Drug Tier	Coverage Requirements and Limits
ZOLOFT ORAL TABLET 100 MG, 25 MG, 50 MG <i>(sertraline hcl)</i>	NPB	
ANTIDIABETICS - HORMONES		
acarbose oral tablet 100 mg, 25 mg, 50 mg	G	
ACTOPLUS MET ORAL TABLET 15-500 MG, 15-850 MG <i>(pioglitazone hcl-metformin hcl)</i>	NPB	
ACTOS ORAL TABLET 15 MG, 30 MG, 45 MG <i>(pioglitazone hcl)</i>	NPB	
ADLYXIN STARTER PACK SUBCUTANEOUS PEN-INJECTOR KIT 10 & 20 MCG/0.2ML <i>(lixisenatide)</i>	NPB	
ADLYXIN SUBCUTANEOUS SOLUTION PEN-INJECTOR 20 MCG/0.2ML <i>(lixisenatide)</i>	NPB	
ADMELOG SOLOSTAR SUBCUTANEOUS SOLUTION PEN-INJECTOR 100 UNIT/ML <i>(insulin lispro)</i>	NPB	
ADMELOG SUBCUTANEOUS SOLUTION 100 UNIT/ML <i>(insulin lispro)</i>	NPB	
AFREZZA INHALATION POWDER 12 UNIT, 4 & 8 & 12 UNIT, 4 UNIT, 8 UNIT, 90 X 4 UNIT & 90X8 UNIT, 90 X 8 UNIT & 90X12 UNIT <i>(insulin regular human)</i>	NPB	
alogliptin benzoate oral tablet 12.5 mg, 25 mg, 6.25 mg	G	
alogliptin-metformin hcl oral tablet 12.5-1000 mg, 12.5-500 mg	G	
alogliptin-pioglitazone oral tablet 12.5-15 mg, 12.5-30 mg, 12.5-45 mg, 25-15 mg, 25-30 mg, 25-45 mg	G	
AMARYL ORAL TABLET 1 MG, 2 MG, 4 MG <i>(glimepiride)</i>	NPB	
APIDRA INJECTION SOLUTION 100 UNIT/ML <i>(insulin glulisine)</i>	NPB	
APIDRA SOLOSTAR SUBCUTANEOUS SOLUTION PEN-INJECTOR 100 UNIT/ML <i>(insulin glulisine)</i>	NPB	
AVANDIA ORAL TABLET 2 MG, 4 MG <i>(rosiglitazone maleate)</i>	NPB	
BAQSIMI ONE PACK NASAL POWDER 3 MG/DOSE <i>(glucagon)</i>	PB	
BAQSIMI TWO PACK NASAL POWDER 3 MG/DOSE <i>(glucagon)</i>	PB	
BASAGLAR KWIKPEN SUBCUTANEOUS SOLUTION PEN-INJECTOR 100 UNIT/ML <i>(insulin glargine)</i>	PB	

2020 Pharmacy Drug Guide - Premier Plus

The formulary is updated the first week of each month.

12/01/2020

Prescription Drug Name	Drug Tier	Coverage Requirements and Limits
BD GLUCOSE ORAL TABLET CHEWABLE 5 GM (dextrose (diabetic use))	NPB	
BYDUREON BCISE SUBCUTANEOUS AUTO-INJECTOR 2 MG/0.85ML (exenatide)	NPB	
BYDUREON SUBCUTANEOUS PEN-INJECTOR 2 MG (exenatide)	NPB	
BYETTA 10 MCG PEN SUBCUTANEOUS SOLUTION PEN-INJECTOR 10 MCG/0.04ML (exenatide)	NPB	#
BYETTA 5 MCG PEN SUBCUTANEOUS SOLUTION PEN-INJECTOR 5 MCG/0.02ML (exenatide)	NPB	#
cvs glucose bits oral tablet chewable 1 gm	NPB	
cvs glucose oral gel 15 gm/38gm, 40 %	G	
cvs glucose oral tablet chewable 4 gm, 4-6 gm-mg	NPB	
cvs glucose shot oral liquid 15 gm/59ml	G	
CYCLOSET ORAL TABLET 0.8 MG (bromocriptine mesylate)	NPB	
DEX4 GLUCOSE ORAL LIQUID 15 GM/59ML (dextrose (diabetic use))	NPB	
DEX4 NATURALS ORAL TABLET CHEWABLE 4-6 GM-MG (glucose-vitamin c)	NPB	
DEX4 ORAL TABLET CHEWABLE 4-6 GM-MG (glucose-vitamin c)	NPB	
DEX4 POUCH PACK ORAL TABLET CHEWABLE 4-6 GM-MG (glucose-vitamin c)	NPB	
DEX4 QUICK DISSOLVE GLUCOSE ORAL TABLET CHEWABLE 4 GM (dextrose (diabetic use))	NPB	
diazoxide oral suspension 50 mg/ml	G	
DUETACT ORAL TABLET 30-2 MG, 30-4 MG (pioglitazone hcl-glimepiride)	NPB	
FARXIGA ORAL TABLET 10 MG, 5 MG (dapagliflozin propanediol)	PB	
FIASP FLEXTOUCH SUBCUTANEOUS SOLUTION PEN-INJECTOR 100 UNIT/ML (insulin aspart (w/niacinamide))	PB	
FIASP PENFILL SUBCUTANEOUS SOLUTION CARTRIDGE 100 UNIT/ML (insulin aspart (w/niacinamide))	PB	
FIASP SUBCUTANEOUS SOLUTION 100 UNIT/ML (insulin aspart (w/niacinamide))	PB	

2020 Pharmacy Drug Guide - Premier Plus

The formulary is updated the first week of each month.

12/01/2020

Prescription Drug Name	Drug Tier	Coverage Requirements and Limits
FORTAMET ORAL TABLET EXTENDED RELEASE 24 HOUR 1000 MG, 500 MG (<i>metformin hcl</i>)	NPB	
glimepiride oral tablet 1 mg, 2 mg, 4 mg	G	LGC
glipizide er oral tablet extended release 24 hour 10 mg, 2.5 mg, 5 mg	G	LGC
glipizide oral tablet 10 mg, 5 mg	G	LGC
glipizide xl oral tablet extended release 24 hour 10 mg, 5 mg	G	
glipizide xl oral tablet extended release 24 hour 2.5 mg	G	LGC
glipizide-metformin hcl oral tablet 2.5-250 mg, 2.5-500 mg, 5-500 mg	G	LGC
GLUCAGEN HYPOKIT INJECTION SOLUTION RECONSTITUTED 1 MG (<i>glucagon hcl (rdna)</i>)	NPB	
GLUCAGON EMERGENCY INJECTION KIT 1 MG	PB	
glucagon emergency injection solution reconstituted 1 mg/ml	NPB	
GLUCO BURST ORAL GEL 40 % (<i>dextrose (diabetic use)</i>)	G	
glucose oral gel 40 %	G	
glucose oral tablet chewable 4 gm, 4-6 gm-mg	G	
GLUCOTROL ORAL TABLET 10 MG, 5 MG (<i>glipizide</i>)	NPB	
GLUCOTROL XL ORAL TABLET EXTENDED RELEASE 24 HOUR 10 MG, 2.5 MG, 5 MG (<i>glipizide</i>)	NPB	
GLUMETZA ORAL TABLET EXTENDED RELEASE 24 HOUR 1000 MG, 500 MG (<i>metformin hcl</i>)	NPB	
glyburide micronized oral tablet 1.5 mg	G	
glyburide micronized oral tablet 3 mg, 6 mg	G	LGC
glyburide oral tablet 1.25 mg, 2.5 mg, 5 mg	G	LGC
glyburide-metformin oral tablet 1.25-250 mg, 2.5-500 mg, 5-500 mg	G	LGC
GLYNASE ORAL TABLET 1.5 MG, 3 MG, 6 MG (<i>glyburide micronized</i>)	NPB	
GLYSET ORAL TABLET 100 MG, 25 MG, 50 MG (<i>miglitol</i>)	NPB	
GLYXAMBI ORAL TABLET 10-5 MG, 25-5 MG (<i>empagliflozin-linagliptin</i>)	PB	
gnp glucose oral tablet chewable 4 gm, 4-6 gm-mg	NPB	
gnp quick dissolve glucose oral tablet chewable 4 gm	NPB	

2020 Pharmacy Drug Guide - Premier Plus

The formulary is updated the first week of each month.

12/01/2020

Prescription Drug Name	Drug Tier	Coverage Requirements and Limits
GVOKE HYPOOPEN 1-PACK SUBCUTANEOUS SOLUTION AUTO-INJECTOR 0.5 MG/0.1ML, 1 MG/0.2ML (<i>glucagon</i>)	NPB	
GVOKE HYPOOPEN 2-PACK SUBCUTANEOUS SOLUTION AUTO-INJECTOR 0.5 MG/0.1ML, 1 MG/0.2ML (<i>glucagon</i>)	NPB	
GVOKE PFS SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 0.5 MG/0.1ML, 1 MG/0.2ML (<i>glucagon</i>)	NPB	
<i>hm glucose oral tablet chewable 4-6 gm-mg</i>	NPB	
HUMALOG JUNIOR KWIKPEN SUBCUTANEOUS SOLUTION PEN-INJECTOR 100 UNIT/ML (<i>insulin lispro</i>)	NPB	
HUMALOG KWIKPEN SUBCUTANEOUS SOLUTION PEN-INJECTOR 100 UNIT/ML, 200 UNIT/ML (<i>insulin lispro</i>)	NPB	
HUMALOG MIX 50/50 KWIKPEN SUBCUTANEOUS SUSPENSION PEN-INJECTOR (50-50) 100 UNIT/ML (<i>insulin lispro prot & lispro</i>)	NPB	
HUMALOG MIX 50/50 SUBCUTANEOUS SUSPENSION (50-50) 100 UNIT/ML (<i>insulin lispro prot & lispro</i>)	NPB	
HUMALOG MIX 75/25 KWIKPEN SUBCUTANEOUS SUSPENSION PEN-INJECTOR (75-25) 100 UNIT/ML (<i>insulin lispro prot & lispro</i>)	NPB	
HUMALOG MIX 75/25 SUBCUTANEOUS SUSPENSION (75-25) 100 UNIT/ML (<i>insulin lispro prot & lispro</i>)	NPB	
HUMALOG SUBCUTANEOUS SOLUTION 100 UNIT/ML (<i>insulin lispro</i>)	NPB	
HUMALOG SUBCUTANEOUS SOLUTION CARTRIDGE 100 UNIT/ML (<i>insulin lispro</i>)	NPB	
HUMULIN 70/30 KWIKPEN SUBCUTANEOUS SUSPENSION PEN-INJECTOR (70-30) 100 UNIT/ML (<i>insulin nph isophane & regular</i>)	NPB	
HUMULIN 70/30 SUBCUTANEOUS SUSPENSION (70-30) 100 UNIT/ML (<i>insulin nph isophane & regular</i>)	NPB	
HUMULIN N KWIKPEN SUBCUTANEOUS SUSPENSION PEN-INJECTOR 100 UNIT/ML (<i>insulin nph human (isophane)</i>)	NPB	
HUMULIN N SUBCUTANEOUS SUSPENSION 100 UNIT/ML (<i>insulin nph human (isophane)</i>)	NPB	

Prescription Drug Name	Drug Tier	Coverage Requirements and Limits
HUMULIN R INJECTION SOLUTION 100 UNIT/ML <i>(insulin regular human)</i>	NPB	
HUMULIN R U-500 (CONCENTRATED) SUBCUTANEOUS SOLUTION 500 UNIT/ML <i>(insulin regular human)</i>	PB	
HUMULIN R U-500 KWIKPEN SUBCUTANEOUS SOLUTION PEN-INJECTOR 500 UNIT/ML <i>(insulin regular human)</i>	PB	
hy-vee glucose oral tablet chewable 4-6 gm-mg	NPB	
insulin asp prot & asp flexpen subcutaneous suspension pen-injector (70-30) 100 unit/ml	G	
insulin aspart flexpen subcutaneous solution pen-injector 100 unit/ml	G	
insulin aspart penfill subcutaneous solution cartridge 100 unit/ml	G	
insulin aspart prot & aspart subcutaneous suspension (70-30) 100 unit/ml	G	
insulin aspart subcutaneous solution 100 unit/ml	G	
insulin lispro (1 unit dial) subcutaneous solution pen-injector 100 unit/ml	G	
insulin lispro junior kwikpen subcutaneous solution pen-injector 100 unit/ml	G	
insulin lispro prot & lispro subcutaneous suspension pen-injector (75-25) 100 unit/ml	G	
insulin lispro subcutaneous solution 100 unit/ml	G	
INVOKAMET ORAL TABLET 150-1000 MG, 150-500 MG, 50-1000 MG, 50-500 MG <i>(canagliflozin-metformin hcl)</i>	NPB	
INVOKAMET XR ORAL TABLET EXTENDED RELEASE 24 HOUR 150-1000 MG, 150-500 MG, 50-1000 MG, 50-500 MG <i>(canagliflozin-metformin hcl)</i>	NPB	
INVOKANA ORAL TABLET 100 MG, 300 MG <i>(canagliflozin)</i>	NPB	
JANUMET ORAL TABLET 50-1000 MG, 50-500 MG <i>(sitagliptin-metformin hcl)</i>	PB	
JANUMET XR ORAL TABLET EXTENDED RELEASE 24 HOUR 100-1000 MG, 50-1000 MG, 50-500 MG <i>(sitagliptin-metformin hcl)</i>	PB	
JANUVIA ORAL TABLET 100 MG, 25 MG, 50 MG <i>(sitagliptin phosphate)</i>	PB	

2020 Pharmacy Drug Guide - Premier Plus

The formulary is updated the first week of each month.

12/01/2020

Prescription Drug Name	Drug Tier	Coverage Requirements and Limits
JARDIANCE ORAL TABLET 10 MG, 25 MG <i>(empagliflozin)</i>	PB	
JENTADUETO ORAL TABLET 2.5-1000 MG, 2.5-500 MG, 2.5-850 MG <i>(linagliptin-metformin hcl)</i>	NPB	
JENTADUETO XR ORAL TABLET EXTENDED RELEASE 24 HOUR 2.5-1000 MG, 5-1000 MG <i>(linagliptin- metformin hcl)</i>	NPB	
KAZANO ORAL TABLET 12.5-1000 MG, 12.5-500 MG <i>(alogliptin-metformin hcl)</i>	NPB	
KOMBIGLYZE XR ORAL TABLET EXTENDED RELEASE 24 HOUR 2.5-1000 MG, 5-1000 MG, 5-500 MG <i>(saxagliptin-metformin)</i>	NPB	
KORLYM ORAL TABLET 300 MG <i>(mifepristone)</i>	NPSP	PA; #; SP
<i>kroger glucose oral tablet chewable 4-6 gm-mg</i>	NPB	
LANTUS SOLOSTAR SUBCUTANEOUS SOLUTION PEN-INJECTOR 100 UNIT/ML <i>(insulin glargine)</i>	NPB	
LANTUS SUBCUTANEOUS SOLUTION 100 UNIT/ML <i>(insulin glargine)</i>	NPB	
<i>leader glucose oral tablet chewable 4-6 gm-mg</i>	NPB	
<i>leader quick dissolve glucose oral tablet chewable 4 gm</i>	NPB	
LEVEMIR FLEXTOUCH SUBCUTANEOUS SOLUTION PEN-INJECTOR 100 UNIT/ML <i>(insulin detemir)</i>	PB	
LEVEMIR SUBCUTANEOUS SOLUTION 100 UNIT/ML <i>(insulin detemir)</i>	PB	
<i>longs glucose oral tablet chewable 4-6 gm-mg</i>	NPB	
LYUMJEV INJECTION SOLUTION 100 UNIT/ML <i>(insulin lispro-aabc)</i>	NPB	
LYUMJEV KWIKPEN SUBCUTANEOUS SOLUTION PEN-INJECTOR 100 UNIT/ML, 200 UNIT/ML <i>(insulin lispro-aabc)</i>	NPB	
<i>meijer glucose oral tablet chewable 4-6 gm-mg</i>	NPB	
<i>metformin hcl er (mod) oral tablet extended release 24 hour 1000 mg, 500 mg</i>	G	
<i>metformin hcl er (osm) oral tablet extended release 24 hour 1000 mg, 500 mg</i>	G	
<i>metformin hcl er oral tablet extended release 24 hour 500 mg</i>	G	LGC
<i>metformin hcl er oral tablet extended release 24 hour 750 mg</i>	G	
<i>metformin hcl oral solution 500 mg/5ml</i>	G	

2020 Pharmacy Drug Guide - Premier Plus

The formulary is updated the first week of each month.

12/01/2020

Prescription Drug Name	Drug Tier	Coverage Requirements and Limits
<i>metformin hcl oral tablet 1000 mg, 500 mg, 850 mg</i>	G	LGC
<i>miglitol oral tablet 100 mg, 25 mg, 50 mg</i>	G	
<i>nateglinide oral tablet 120 mg, 60 mg</i>	G	LGC
NESINA ORAL TABLET 12.5 MG, 25 MG, 6.25 MG (alogliptin benzoate)	NPB	
NOVOLIN 70/30 FLEXPEN RELION SUBCUTANEOUS SUSPENSION PEN-INJECTOR (70-30) 100 UNIT/ML (insulin nph isophane & regular)	NPB	
NOVOLIN 70/30 FLEXPEN SUBCUTANEOUS SUSPENSION PEN-INJECTOR (70-30) 100 UNIT/ML (insulin nph isophane & regular)	PB	
NOVOLIN 70/30 RELION SUBCUTANEOUS SUSPENSION (70-30) 100 UNIT/ML (insulin nph isophane & regular)	NPB	
NOVOLIN 70/30 SUBCUTANEOUS SUSPENSION (70-30) 100 UNIT/ML (insulin nph isophane & regular)	PB	
NOVOLIN N FLEXPEN RELION SUBCUTANEOUS SUSPENSION PEN-INJECTOR 100 UNIT/ML (insulin nph human (isophane))	NPB	
NOVOLIN N FLEXPEN SUBCUTANEOUS SUSPENSION PEN-INJECTOR 100 UNIT/ML (insulin nph human (isophane))	PB	
NOVOLIN N RELION SUBCUTANEOUS SUSPENSION 100 UNIT/ML (insulin nph human (isophane))	NPB	
NOVOLIN N SUBCUTANEOUS SUSPENSION 100 UNIT/ML (insulin nph human (isophane))	PB	
NOVOLIN R FLEXPEN INJECTION SOLUTION PEN-INJECTOR 100 UNIT/ML (insulin regular human)	PB	
NOVOLIN R FLEXPEN RELION INJECTION SOLUTION PEN-INJECTOR 100 UNIT/ML (insulin regular human)	NPB	
NOVOLIN R INJECTION SOLUTION 100 UNIT/ML (insulin regular human)	PB	
NOVOLIN R RELION INJECTION SOLUTION 100 UNIT/ML (insulin regular human)	NPB	
NOVOLOG FLEXPEN SUBCUTANEOUS SOLUTION PEN-INJECTOR 100 UNIT/ML (insulin aspart)	PB	

2020 Pharmacy Drug Guide - Premier Plus

The formulary is updated the first week of each month.

12/01/2020

Prescription Drug Name	Drug Tier	Coverage Requirements and Limits
NOVOLOG MIX 70/30 FLEXPEN SUBCUTANEOUS SUSPENSION PEN-INJECTOR (70-30) 100 UNIT/ML (<i>insulin aspart prot & aspart</i>)	PB	
NOVOLOG MIX 70/30 SUBCUTANEOUS SUSPENSION (70-30) 100 UNIT/ML (<i>insulin aspart prot & aspart</i>)	PB	
NOVOLOG PENFILL SUBCUTANEOUS SOLUTION CARTRIDGE 100 UNIT/ML (<i>insulin aspart</i>)	PB	
NOVOLOG SUBCUTANEOUS SOLUTION 100 UNIT/ML (<i>insulin aspart</i>)	PB	
ONGLYZA ORAL TABLET 2.5 MG, 5 MG (<i>saxagliptin hcl</i>)	NPB	
OSENI ORAL TABLET 12.5-15 MG, 12.5-30 MG, 12.5-45 MG, 25-15 MG, 25-30 MG, 25-45 MG (<i>alogliptin-pioglitazone</i>)	NPB	
OZEMPIK (0.25 OR 0.5 MG/DOSE) SUBCUTANEOUS SOLUTION PEN-INJECTOR 2 MG/1.5ML (<i>semaglutide</i>)	PB	
OZEMPIK (1 MG/DOSE) SUBCUTANEOUS SOLUTION PEN-INJECTOR 2 MG/1.5ML (<i>semaglutide</i>)	PB	
<i>pioglitazone hcl oral tablet 15 mg, 30 mg, 45 mg</i>	G	LGC
<i>pioglitazone hcl-glimepiride oral tablet 30-2 mg, 30-4 mg</i>	G	
<i>pioglitazone hcl-metformin hcl oral tablet 15-500 mg, 15-850 mg</i>	G	LGC
PRECOSE ORAL TABLET 100 MG, 25 MG, 50 MG (<i>acarbose</i>)	NPB	
<i>preferred plus glucose oral tablet chewable 4-6 gm-mg</i>	NPB	
PROGLYCEM ORAL SUSPENSION 50 MG/ML (<i>diazoxide</i>)	NPB	
<i>px glucose oral tablet chewable 4-6 gm-mg</i>	NPB	
QTERN ORAL TABLET 10-5 MG, 5-5 MG (<i>dapagliflozin-saxagliptin</i>)	PB	
<i>ra glucose oral gel 40 %</i>	G	
<i>ra glucose oral tablet chewable 4-6 gm-mg, 6-4 mg-gm</i>	NPB	
RA TRUEPLUS GLUCOSE ORAL GEL 15 GM/32ML (<i>dextrose (diabetic use)</i>)	NPB	
RELION GLUCOSE DRINK ORAL LIQUID 15 GM/59ML (<i>dextrose (diabetic use)</i>)	G	
RELION GLUCOSE ORAL GEL 15 GM/38GM (<i>dextrose (diabetic use)</i>)	G	
RELION GLUCOSE ORAL TABLET CHEWABLE 4-6 GM-MG (<i>glucose-vitamin c</i>)	NPB	

2020 Pharmacy Drug Guide - Premier Plus

The formulary is updated the first week of each month.

12/01/2020

Prescription Drug Name	Drug Tier	Coverage Requirements and Limits
repaglinide oral tablet 0.5 mg, 1 mg, 2 mg	G	LGC
RIOMET ER ORAL SUSPENSION RECONSTITUTED ER 500 MG/5ML (<i>metformin hcl</i>)	NPB	
RIOMET ORAL SOLUTION 500 MG/5ML (<i>metformin hcl</i>)	NPB	
RYBELSUS ORAL TABLET 14 MG, 3 MG, 7 MG (<i>semaglutide</i>)	PB	
SEGLUROMET ORAL TABLET 2.5-1000 MG, 2.5-500 MG, 7.5-1000 MG, 7.5-500 MG (<i>ertugliflozin-metformin hcl</i>)	NPB	
SEMGLEE SUBCUTANEOUS SOLUTION 100 UNIT/ML (<i>insulin glargine</i>)	NPB	
SEMGLEE SUBCUTANEOUS SOLUTION PEN-INJECTOR 100 UNIT/ML (<i>insulin glargine</i>)	NPB	
sm glucose oral tablet chewable 4 gm, 4-6 gm-mg	NPB	
SMART SENSE GLUCOSE ORAL TABLET CHEWABLE 4-6 GM-MG (<i>glucose-vitamin c</i>)	NPB	
SOLIQUA SUBCUTANEOUS SOLUTION PEN-INJECTOR 100-33 UNT-MCG/ML (<i>insulin glargine-lixisenatide</i>)	PB	
STARLIX ORAL TABLET 120 MG, 60 MG (<i>nateglinide</i>)	NPB	
STEGLATRO ORAL TABLET 15 MG, 5 MG (<i>ertugliflozin-l-pyroglutamicac</i>)	NPB	
STEGLUJAN ORAL TABLET 15-100 MG, 5-100 MG (<i>ertugliflozin-sitagliptin</i>)	NPB	
SYMLINPEN 120 SUBCUTANEOUS SOLUTION PEN-INJECTOR 2700 MCG/2.7ML (<i>pramlintide acetate</i>)	PB	#
SYMLINPEN 60 SUBCUTANEOUS SOLUTION PEN-INJECTOR 1500 MCG/1.5ML (<i>pramlintide acetate</i>)	PB	#
SYNJARDY ORAL TABLET 12.5-1000 MG, 12.5-500 MG, 5-1000 MG, 5-500 MG (<i>empagliflozin-metformin hcl</i>)	PB	
SYNJARDY XR ORAL TABLET EXTENDED RELEASE 24 HOUR 10-1000 MG, 12.5-1000 MG, 25-1000 MG, 5-1000 MG (<i>empagliflozin-metformin hcl</i>)	PB	
tgt glucose oral tablet chewable 4-6 gm-mg	NPB	
tolbutamide oral tablet 500 mg	G	
TOUJEO MAX SOLOSTAR SUBCUTANEOUS SOLUTION PEN-INJECTOR 300 UNIT/ML (<i>insulin glargine</i>)	NPB	

2020 Pharmacy Drug Guide - Premier Plus

The formulary is updated the first week of each month.

12/01/2020

Prescription Drug Name	Drug Tier	Coverage Requirements and Limits
TOUJEO SOLOSTAR SUBCUTANEOUS SOLUTION PEN-INJECTOR 300 UNIT/ML (<i>insulin glargine</i>)	NPB	
TRADJENTA ORAL TABLET 5 MG (<i>linagliptin</i>)	NPB	
TRESIBA FLEXTOUCH SUBCUTANEOUS SOLUTION PEN-INJECTOR 100 UNIT/ML, 200 UNIT/ML (<i>insulin degludec</i>)	PB	
TRESIBA SUBCUTANEOUS SOLUTION 100 UNIT/ML (<i>insulin degludec</i>)	PB	
TRIARDY XR ORAL TABLET EXTENDED RELEASE 24 HOUR 10-5-1000 MG, 12.5-2.5-1000 MG, 25-5-1000 MG, 5-2.5-1000 MG (<i>empagliflozin-linagliptin-metformin</i>)	PB	
TRULICITY SUBCUTANEOUS SOLUTION PEN-INJECTOR 0.75 MG/0.5ML, 1.5 MG/0.5ML, 3 MG/0.5ML, 4.5 MG/0.5ML (<i>dulaglutide</i>)	PB	
<i>up & up glucose oral tablet chewable 4-6 gm-mg</i>	NPB	
<i>value plus glucose oral gel 40 %</i>	G	
<i>value plus glucose oral tablet chewable 4-6 gm-mg</i>	NPB	
VICTOZA SUBCUTANEOUS SOLUTION PEN-INJECTOR 18 MG/3ML (<i>liraglutide</i>)	PB	
<i>walgreens glucose oral tablet chewable 4 gm, 4-6 gm-mg</i>	NPB	
XIGDUO XR ORAL TABLET EXTENDED RELEASE 24 HOUR 10-1000 MG, 10-500 MG, 2.5-1000 MG, 5-1000 MG, 5-500 MG (<i>dapagliflozin-metformin hcl</i>)	PB	
XULTOPHY SUBCUTANEOUS SOLUTION PEN-INJECTOR 100-3.6 UNIT-MG/ML (<i>insulin degludec-liraglutide</i>)	PB	
ANTIDIARRHEAL/PROBIOTIC AGENTS - DRUGS FOR THE STOMACH		
<i>diphenoxylate-atropine oral tablet 2.5-0.025 mg</i>	G	
LOMOTIL ORAL TABLET 2.5-0.025 MG (<i>diphenoxylate-atropine</i>)	NPB	
MOTOFEN ORAL TABLET 1-0.025 MG (<i>difenoxin-atropine</i>)	NPB	
MYTESI ORAL TABLET DELAYED RELEASE 125 MG (<i>crofelemer</i>)	NPB	
ANTIDOTES AND SPECIFIC ANTAGONISTS - DRUGS FOR OVERDOSE OR POISONING		
CHEMET ORAL CAPSULE 100 MG (<i>succimer</i>)	PB	UF9 (PB)

2020 Pharmacy Drug Guide - Premier Plus

The formulary is updated the first week of each month.

12/01/2020

Prescription Drug Name	Drug Tier	Coverage Requirements and Limits
deferasirox granules oral packet 180 mg, 360 mg, 90 mg	PSP	PA; SP
deferasirox oral tablet 180 mg, 360 mg, 90 mg	PSP	PA; SP
deferasirox oral tablet soluble 125 mg, 250 mg, 500 mg	PSP	PA; SP
deferiprone oral tablet 500 mg	PSP	PA; SP
deferoxamine mesylate injection solution reconstituted 2 gm, 500 mg	PSP	SP
DESFERAL INJECTION SOLUTION RECONSTITUTED 500 MG (deferoxamine mesylate)	NPSP	SP
EXJADE ORAL TABLET SOLUBLE 125 MG, 250 MG, 500 MG (deferasirox)	NPSP	PA; SP
FERRIPROX ORAL SOLUTION 100 MG/ML (deferiprone)	NPSP	PA
FERRIPROX ORAL TABLET 1000 MG, 500 MG (deferiprone)	NPSP	PA; #; SP
FERRIPROX TWICE-A-DAY ORAL TABLET 1000 MG (deferiprone)	NPSP	PA; #; SP
JADENU ORAL TABLET 180 MG, 360 MG, 90 MG (deferasirox)	NPSP	PA; SP
JADENU SPRINKLE ORAL PACKET 180 MG, 360 MG, 90 MG (deferasirox)	NPSP	PA; #; SP
naloxone hcl injection solution auto-injector 2 mg/0.4ml	G	
naltrexone hcl oral tablet 50 mg	CE	N2 (G); UF11
NARCAN NASAL LIQUID 4 MG/0.1ML (naloxone hcl)	PB	#; UF11
RADIOGARDASE ORAL CAPSULE 0.5 GM (prussian blue insoluble)	PB	
VISTOGARD ORAL PACKET 10 GM (uridine triacetate)	PSP	SP
VIVITROL INTRAMUSCULAR SUSPENSION RECONSTITUTED 380 MG (naltrexone)	NPB	UF11
ANTIEMETICS - DRUGS FOR THE STOMACH		
AKYNZEO ORAL CAPSULE 300-0.5 MG (netupitant-palonosetron)	NPB	
ANZEMET ORAL TABLET 100 MG, 50 MG (dolasetron mesylate)	NPB	
aprepitant oral capsule 125 mg, 40 mg, 80 & 125 mg, 80 mg	G	
BONJESTA ORAL TABLET EXTENDED RELEASE 20-20 MG (doxylamine-pyridoxine)	NPB	#
DICLEGIS ORAL TABLET DELAYED RELEASE 10-10 MG (doxylamine-pyridoxine)	NPB	

2020 Pharmacy Drug Guide - Premier Plus

The formulary is updated the first week of each month.

12/01/2020

Prescription Drug Name	Drug Tier	Coverage Requirements and Limits
<i>doxylamine-pyridoxine oral tablet delayed release 10-10 mg</i>	G	
<i>dronabinol oral capsule 10 mg, 2.5 mg, 5 mg</i>	G	
EMEND ORAL CAPSULE 40 MG, 80 MG (aprepitant)	NPB	
EMEND ORAL SUSPENSION RECONSTITUTED 125 MG/5ML (aprepitant)	PB	#
<i>gransetron hcl oral tablet 1 mg</i>	G	
<i>ondansetron hcl oral solution 4 mg/5ml</i>	G	
<i>ondansetron hcl oral tablet 24 mg, 4 mg, 8 mg</i>	G	
<i>ondansetron oral tablet dispersible 4 mg, 8 mg</i>	G	
SANCUSO TRANSDERMAL PATCH 3.1 MG/24HR (gransetron)	NPB	
SYNDROS ORAL SOLUTION 5 MG/ML (dronabinol)	NPB	#
TIGAN ORAL CAPSULE 300 MG (trimethobenzamide hcl)	NPB	
TRANSDERM-SCOP (1.5 MG) TRANSDERMAL PATCH 72 HOUR 1 MG/3DAYS (scopolamine base)	NPB	
<i>trimethobenzamide hcl oral capsule 300 mg</i>	G	
VARUBI (180 MG DOSE) ORAL TABLET THERAPY PACK 2 X 90 MG (rolapitant hcl)	NPB	
ZOFTRAN ORAL TABLET 4 MG (ondansetron hcl)	NPB	
ZUPLENZ ORAL FILM 4 MG, 8 MG (ondansetron)	NPB	
ANTIFUNGALS - DRUGS FOR INFECTIONS		
ANCOBON ORAL CAPSULE 250 MG, 500 MG (flucytosine)	NPB	
<i>bio-statin oral capsule 1000000 unit, 500000 unit</i>	NPB	
<i>bio-statin oral powder</i>	G	
CRESEMBA ORAL CAPSULE 186 MG (isavuconazonium sulfate)	NPB	
DIFLUCAN ORAL SUSPENSION RECONSTITUTED 10 MG/ML, 40 MG/ML (fluconazole)	NPB	
DIFLUCAN ORAL TABLET 100 MG, 150 MG, 200 MG, 50 MG (fluconazole)	NPB	
<i>fluconazole oral suspension reconstituted 10 mg/ml, 40 mg/ml</i>	G	
<i>fluconazole oral tablet 100 mg, 150 mg, 200 mg, 50 mg</i>	G	
<i>flucytosine oral capsule 250 mg, 500 mg</i>	G	
<i>griseofulvin microsize oral suspension 125 mg/5ml</i>	G	
<i>griseofulvin microsize oral tablet 500 mg</i>	G	

2020 Pharmacy Drug Guide - Premier Plus

The formulary is updated the first week of each month.

12/01/2020

Prescription Drug Name	Drug Tier	Coverage Requirements and Limits
griseofulvin ultramicrosize oral tablet 125 mg, 250 mg	G	
itraconazole oral capsule 100 mg	G	
itraconazole oral solution 10 mg/ml	G	
ketoconazole oral tablet 200 mg	G	
LAMISIL ORAL TABLET 250 MG (<i>terbinafine hcl</i>)	NPB	
NOXAFL ORAL SUSPENSION 40 MG/ML (<i>posaconazole</i>)	NPB	#
NOXAFL ORAL TABLET DELAYED RELEASE 100 MG (<i>posaconazole</i>)	NPB	
nystatin oral tablet 500000 unit	G	
posaconazole oral tablet delayed release 100 mg	G	
SPORANOX ORAL CAPSULE 100 MG (<i>itraconazole</i>)	NPB	
SPORANOX ORAL SOLUTION 10 MG/ML (<i>itraconazole</i>)	NPB	
SPORANOX PULSEPAK ORAL CAPSULE 100 MG (<i>itraconazole</i>)	NPB	
terbinafine hcl oral tablet 250 mg	G	
tolsura oral capsule 65 mg	NPB	
VFEND ORAL SUSPENSION RECONSTITUTED 40 MG/ML (<i>voriconazole</i>)	NPB	
VFEND ORAL TABLET 200 MG, 50 MG (<i>voriconazole</i>)	NPB	
voriconazole oral suspension reconstituted 40 mg/ml	G	
voriconazole oral tablet 200 mg, 50 mg	G	
ANTIHISTAMINES - DRUGS FOR THE LUNGS		
ALAVER ORAL TABLET DISPERSIBLE 10 MG (<i>loratadine</i>)	G	Select OTC
ALLEGRA ALLERGY CHILDRENS ORAL SUSPENSION 30 MG/5ML (<i>sexfenadine hcl</i>)	G	Select OTC
ALLEGRA ALLERGY CHILDRENS ORAL TABLET DISPERSIBLE 30 MG (<i>sexfenadine hcl</i>)	G	Select OTC
ALLEGRA ALLERGY ORAL TABLET 180 MG, 60 MG (<i>sexfenadine hcl</i>)	G	Select OTC
allergy 24hour indoor/outdoor oral tablet 10 mg	G	Select OTC
allergy relief loratadine oral tablet 10 mg	G	
allergy relief oral tablet dispersible 10 mg	G	Select OTC
carbinoxamine maleate oral solution 4 mg/5ml	G	
carbinoxamine maleate oral tablet 4 mg, 6 mg	G	

2020 Pharmacy Drug Guide - Premier Plus

The formulary is updated the first week of each month.

12/01/2020

Prescription Drug Name	Drug Tier	Coverage Requirements and Limits
cetirizine hcl oral tablet 10 mg, 5 mg	G	Select OTC
cetirizine hcl oral tablet chewable 10 mg, 5 mg	G	Select OTC
childrens loratadine oral solution 5 mg/5ml	G	Select OTC
childrens loratadine oral syrup 5 mg/5ml	G	Select OTC
CLARINEX ORAL TABLET 5 MG (<i>desloratadine</i>)	NPB	
CLARITIN ORAL CAPSULE 10 MG (<i>loratadine</i>)	G	Select OTC
CLARITIN ORAL SYRUP 5 MG/5ML (<i>loratadine</i>)	G	Select OTC
CLARITIN ORAL TABLET 10 MG (<i>loratadine</i>)	G	Select OTC
CLARITIN ORAL TABLET CHEWABLE 5 MG (<i>loratadine</i>)	G	Select OTC
CLARITIN REDITABS ORAL TABLET DISPERSIBLE 10 MG, 5 MG (<i>loratadine</i>)	G	Select OTC
clemastine fumarate oral tablet 2.68 mg	G	
cyproheptadine hcl oral syrup 2 mg/5ml	G	
cyproheptadine hcl oral tablet 4 mg	G	
desloratadine oral tablet 5 mg	G	
desloratadine oral tablet dispersible 2.5 mg, 5 mg	G	
dexchlorpheniramine maleate oral solution 2 mg/5ml	G	
eq allergy relief oral tablet 10 mg	G	
fexofenadine hcl oral tablet 180 mg, 60 mg	G	Select OTC
KARBINAL ER ORAL SUSPENSION EXTENDED RELEASE 4 MG/5ML (<i>carbinoxamine maleate</i>)	NPB	
KLS ALLERCLEAR ORAL TABLET 10 MG (<i>loratadine</i>)	G	
loradamed oral tablet 10 mg	G	
loratadine childrens oral syrup 5 mg/5ml	G	Select OTC
loratadine oral tablet 10 mg	G	Select OTC
promethazine hcl oral solution 6.25 mg/5ml	G	
promethazine hcl oral syrup 6.25 mg/5ml	G	
promethazine hcl oral tablet 12.5 mg, 25 mg, 50 mg	G	
promethazine hcl rectal suppository 12.5 mg, 25 mg	G	
promethazine hcl (Promethegan Rectal Suppository 12.5 Mg, 25 Mg)	G	
PROMETHEGAN RECTAL SUPPOSITORY 50 MG (<i>promethazine hcl</i>)	G	
RYVENT ORAL TABLET 6 MG (<i>carbinoxamine maleate</i>)	NPB	

2020 Pharmacy Drug Guide - Premier Plus

The formulary is updated the first week of each month.

12/01/2020

Prescription Drug Name	Drug Tier	Coverage Requirements and Limits
<i>sm loratadine oral tablet 10 mg</i>	G	
WAL-ITIN ORAL TABLET 10 MG (<i>loratadine</i>)	G	
XYZAL ALLERGY 24HR CHILDRENS ORAL SOLUTION 2.5 MG/5ML (<i>levocetirizine dihydrochloride</i>)	G	Select OTC
XYZAL ALLERGY 24HR ORAL TABLET 5 MG (<i>levocetirizine dihydrochloride</i>)	G	Select OTC
ZYRTEC ALLERGY ORAL CAPSULE 10 MG (<i>cetirizine hcl</i>)	G	Select OTC
ZYRTEC ALLERGY ORAL TABLET 10 MG (<i>cetirizine hcl</i>)	G	Select OTC
ANTIHYPERTENSIVES - DRUGS FOR THE HEART		
ALTOPREV ORAL TABLET EXTENDED RELEASE 24 HOUR 20 MG, 40 MG, 60 MG (<i>lovastatin</i>)	NPB	#
ANTARA ORAL CAPSULE 30 MG, 90 MG (<i>fenofibrate micronized</i>)	NPB	#
<i>atorvastatin calcium oral tablet 10 mg, 20 mg</i>	CE	LGC; N2 (G); AL
<i>atorvastatin calcium oral tablet 40 mg, 80 mg</i>	G	LGC
<i>cholestyramine light oral packet 4 gm</i>	G	
<i>cholestyramine light oral powder 4 gm/dose</i>	G	
<i>cholestyramine oral packet 4 gm</i>	G	
<i>cholestyramine oral powder 4 gm/dose</i>	G	
<i>colesevelam hcl oral packet 3.75 gm</i>	G	
<i>colesevelam hcl oral tablet 625 mg</i>	G	
COLESTID FLAVORED ORAL PACKET 5 GM (<i>colestipol hcl</i>)	NPB	
COLESTID ORAL PACKET 5 GM (<i>colestipol hcl</i>)	NPB	
COLESTID ORAL TABLET 1 GM (<i>colestipol hcl</i>)	NPB	
<i>colestipol hcl oral granules 5 gm</i>	G	
<i>colestipol hcl oral packet 5 gm</i>	G	
<i>colestipol hcl oral tablet 1 gm</i>	G	
CRESTOR ORAL TABLET 10 MG, 20 MG, 40 MG, 5 MG (<i>rosuvastatin calcium</i>)	NPB	
EZALLOR SPRINKLE ORAL CAPSULE SPRINKLE 10 MG, 20 MG, 40 MG, 5 MG (<i>rosuvastatin calcium</i>)	NPB	
<i>ezetimibe oral tablet 10 mg</i>	G	

2020 Pharmacy Drug Guide - Premier Plus

The formulary is updated the first week of each month.

12/01/2020

Prescription Drug Name	Drug Tier	Coverage Requirements and Limits
<i>ezetimibe-simvastatin oral tablet 10-10 mg, 10-20 mg, 10-40 mg, 10-80 mg</i>	G	
<i>fenofibrate micronized oral capsule 130 mg, 134 mg, 200 mg, 43 mg, 67 mg</i>	G	
<i>fenofibrate oral tablet 120 mg, 145 mg, 160 mg, 40 mg, 48 mg, 54 mg</i>	G	
<i>fenofibric acid oral capsule delayed release 135 mg, 45 mg</i>	G	
<i>fenofibric acid oral tablet 105 mg</i>	NPB	
FENOGLIDE ORAL TABLET 120 MG, 40 MG (fenofibrate)	NPB	
<i>flolipid oral suspension 20 mg/5ml, 40 mg/5ml</i>	NPB	
<i>fluvastatin sodium er oral tablet extended release 24 hour 80 mg</i>	G	
<i>fluvastatin sodium oral capsule 20 mg, 40 mg</i>	G	
<i>gemfibrozil oral tablet 600 mg</i>	G	LGC
JUXTAPID ORAL CAPSULE 10 MG, 20 MG, 30 MG, 5 MG (lomitapide mesylate)	NPSP	PA; SP
LESCOL XL ORAL TABLET EXTENDED RELEASE 24 HOUR 80 MG (fluvastatin sodium)	NPB	
LIPITOR ORAL TABLET 10 MG, 20 MG, 40 MG, 80 MG (atorvastatin calcium)	NPB	
LIPOFEN ORAL CAPSULE 150 MG, 50 MG (fenofibrate)	NPB	
LIVALO ORAL TABLET 1 MG, 2 MG, 4 MG (pitavastatin calcium)	NPB	
LOPID ORAL TABLET 600 MG (gemfibrozil)	NPB	
<i>lovastatin oral tablet 10 mg, 20 mg, 40 mg</i>	G	LGC
LOVAZA ORAL CAPSULE 1 GM (omega-3-acid ethyl esters)	NPB	
NEXLETOL ORAL TABLET 180 MG (bempedoic acid)	NPB	
NEXLIZET ORAL TABLET 180-10 MG (bempedoic acid-ezetimibe)	NPB	
<i>niacin (antihyperlipidemic) oral tablet 500 mg</i>	G	
<i>niacin er (antihyperlipidemic) oral tablet extended release 1000 mg, 500 mg, 750 mg</i>	G	
NIACOR ORAL TABLET 500 MG (niacin (antihyperlipidemic))	NPB	
NIASPAN ORAL TABLET EXTENDED RELEASE 1000 MG, 500 MG, 750 MG (niacin (antihyperlipidemic))	NPB	

2020 Pharmacy Drug Guide - Premier Plus

The formulary is updated the first week of each month.

12/01/2020

Prescription Drug Name	Drug Tier	Coverage Requirements and Limits
<i>omega-3-acid ethyl esters oral capsule 1 gm</i>	G	
PRALUENT SUBCUTANEOUS SOLUTION AUTO-INJECTOR 150 MG/ML, 75 MG/ML (<i>alirocumab</i>)	PSP	PA; SP
PRAVACHOL ORAL TABLET 20 MG, 40 MG (<i>pravastatin sodium</i>)	NPB	
<i>pravastatin sodium oral tablet 10 mg, 20 mg, 40 mg, 80 mg</i>	G	LGC
<i>cholestyramine light</i> (Prevalite Oral Packet 4 Gm)	G	
<i>cholestyramine light</i> (Prevalite Oral Powder 4 Gm/Dose)	G	
QUESTRAN LIGHT ORAL POWDER 4 GM/DOSE (<i>cholestyramine light</i>)	NPB	
QUESTRAN ORAL PACKET 4 GM (<i>cholestyramine</i>)	NPB	
QUESTRAN ORAL POWDER 4 GM/DOSE (<i>cholestyramine</i>)	NPB	
REPATHA PUSHTRONEX SYSTEM SUBCUTANEOUS SOLUTION CARTRIDGE 420 MG/3.5ML (<i>evolocumab</i>)	NPSP	PA; NPL
REPATHA SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 140 MG/ML (<i>evolocumab</i>)	NPSP	PA; NPL
REPATHA SURECLICK SUBCUTANEOUS SOLUTION AUTO-INJECTOR 140 MG/ML (<i>evolocumab</i>)	NPSP	PA; NPL
<i>rosuvastatin calcium oral tablet 10 mg, 20 mg, 40 mg, 5 mg</i>	G	LGC
<i>simvastatin oral tablet 10 mg, 20 mg, 40 mg, 5 mg</i>	CE	LGC
<i>simvastatin oral tablet 80 mg</i>	G	LGC
TRICOR ORAL TABLET 145 MG, 48 MG (<i>fenofibrate</i>)	NPB	
TRILIPIX ORAL CAPSULE DELAYED RELEASE 135 MG, 45 MG (<i>choline fenofibrate</i>)	NPB	
VASCEPA ORAL CAPSULE 0.5 GM, 1 GM (<i>icosapent ethyl</i>)	PB	#
VYTORIN ORAL TABLET 10-10 MG, 10-20 MG, 10-40 MG, 10-80 MG (<i>ezetimibe-simvastatin</i>)	NPB	
WELCHOL ORAL PACKET 3.75 GM (<i>colesevelam hcl</i>)	NPB	
WELCHOL ORAL TABLET 625 MG (<i>colesevelam hcl</i>)	NPB	
ZETIA ORAL TABLET 10 MG (<i>ezetimibe</i>)	NPB	
ZOCOR ORAL TABLET 10 MG, 20 MG, 40 MG, 80 MG (<i>simvastatin</i>)	NPB	
ZYPITAMAG ORAL TABLET 2 MG, 4 MG (<i>pitavastatin magnesium</i>)	NPB	

2020 Pharmacy Drug Guide - Premier Plus

The formulary is updated the first week of each month.

12/01/2020

Prescription Drug Name	Drug Tier	Coverage Requirements and Limits
ANTIHYPERTENSIVES - DRUGS FOR THE HEART		
ACCUPRIL ORAL TABLET 10 MG, 20 MG, 40 MG, 5 MG (quinapril hcl)	NPB	
ACCURETIC ORAL TABLET 10-12.5 MG, 20-12.5 MG, 20-25 MG (quinapril-hydrochlorothiazide)	NPB	
aliskiren fumarate oral tablet 150 mg, 300 mg	G	
ALTACE ORAL CAPSULE 1.25 MG, 10 MG, 2.5 MG, 5 MG (ramipril)	NPB	
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	G	LGC
amlodipine besylate-valsartan oral tablet 10-160 mg, 10-320 mg, 5-160 mg, 5-320 mg	G	LGC
amlodipine-olmesartan oral tablet 10-20 mg, 10-40 mg, 5-20 mg, 5-40 mg	G	LGC
amlodipine-valsartan-hctz oral tablet 10-160-12.5 mg, 10-160-25 mg, 10-320-25 mg, 5-160-12.5 mg, 5-160-25 mg	G	LGC
ATACAND HCT ORAL TABLET 16-12.5 MG, 32-12.5 MG, 32-25 MG (candesartan cilexetil-hctz)	NPB	
ATACAND ORAL TABLET 16 MG, 32 MG, 4 MG, 8 MG (candesartan cilexetil)	NPB	
atenolol-chlorthalidone oral tablet 100-25 mg, 50-25 mg	G	
AVALIDE ORAL TABLET 150-12.5 MG, 300-12.5 MG (irbesartan-hydrochlorothiazide)	NPB	
AVAPRO ORAL TABLET 150 MG, 300 MG, 75 MG (irbesartan)	NPB	
AZOR ORAL TABLET 10-20 MG, 10-40 MG, 5-20 MG, 5-40 MG (amlodipine-olmesartan)	NPB	
benazepril hcl oral tablet 10 mg, 20 mg, 40 mg, 5 mg	G	LGC
benazepril-hydrochlorothiazide oral tablet 10-12.5 mg, 20-12.5 mg, 20-25 mg, 5-6.25 mg	G	LGC
BENICAR HCT ORAL TABLET 20-12.5 MG, 40-12.5 MG, 40-25 MG (olmesartan medoxomil-hctz)	NPB	
BENICAR ORAL TABLET 20 MG, 40 MG, 5 MG (olmesartan medoxomil)	NPB	
bisoprolol-hydrochlorothiazide oral tablet 10-6.25 mg, 2.5-6.25 mg, 5-6.25 mg	G	LGC
candesartan cilexetil oral tablet 16 mg, 32 mg, 4 mg, 8 mg	G	LGC

2020 Pharmacy Drug Guide - Premier Plus

The formulary is updated the first week of each month.

12/01/2020

Prescription Drug Name	Drug Tier	Coverage Requirements and Limits
candesartan cilexetil-hctz oral tablet 16-12.5 mg, 32-12.5 mg, 32-25 mg	G	LGC
captopril oral tablet 100 mg, 12.5 mg, 25 mg, 50 mg	G	LGC
CARDURA ORAL TABLET 1 MG, 2 MG, 4 MG, 8 MG <i>(doxazosin mesylate)</i>	NPB	
CATAPRES ORAL TABLET 0.1 MG, 0.2 MG, 0.3 MG <i>(clonidine hcl)</i>	NPB	
CATAPRES-TTS-1 TRANSDERMAL PATCH WEEKLY 0.1 MG/24HR <i>(clonidine)</i>	NPB	
CATAPRES-TTS-2 TRANSDERMAL PATCH WEEKLY 0.2 MG/24HR <i>(clonidine)</i>	NPB	
CATAPRES-TTS-3 TRANSDERMAL PATCH WEEKLY 0.3 MG/24HR <i>(clonidine)</i>	NPB	
clonidine hcl oral tablet 0.1 mg, 0.2 mg, 0.3 mg	G	LGC
COZAAR ORAL TABLET 25 MG, 50 MG <i>(losartan potassium)</i>	NPB	
DEMSER ORAL CAPSULE 250 MG <i>(metyrosine)</i>	NPSP	SP
DIBENZYLINE ORAL CAPSULE 10 MG <i>(phenoxybenzamine hcl)</i>	NPSP	
DIOVAN HCT ORAL TABLET 160-12.5 MG, 160-25 MG, 320-12.5 MG, 320-25 MG, 80-12.5 MG <i>(valsartan-hydrochlorothiazide)</i>	NPB	
DIOVAN ORAL TABLET 160 MG, 320 MG, 40 MG, 80 MG <i>(valsartan)</i>	NPB	
doxazosin mesylate oral tablet 1 mg, 2 mg, 4 mg, 8 mg	G	
DUTOPROL ORAL TABLET EXTENDED RELEASE 24 HOUR 100-12.5 MG, 25-12.5 MG, 50-12.5 MG <i>(metoprolol-hydrochlorothiazide)</i>	NPB	
EDARBI ORAL TABLET 40 MG, 80 MG <i>(azilsartan medoxomil)</i>	NPB	
EDARBYCLOR ORAL TABLET 40-12.5 MG, 40-25 MG <i>(azilsartan-chlorthalidone)</i>	NPB	
enalapril maleate oral tablet 10 mg, 2.5 mg, 20 mg, 5 mg	G	LGC
enalapril-hydrochlorothiazide oral tablet 10-25 mg, 5-12.5 mg	G	LGC
EPANED ORAL SOLUTION 1 MG/ML <i>(enalapril maleate)</i>	NPB	#
eplerenone oral tablet 25 mg, 50 mg	G	

2020 Pharmacy Drug Guide - Premier Plus

The formulary is updated the first week of each month.

12/01/2020

Prescription Drug Name	Drug Tier	Coverage Requirements and Limits
EXFORGE HCT ORAL TABLET 10-160-12.5 MG, 10-160-25 MG, 10-320-25 MG, 5-160-12.5 MG, 5-160-25 MG (amlodipine-valsartan-hctz)	NPB	
EXFORGE ORAL TABLET 10-160 MG, 10-320 MG, 5-160 MG, 5-320 MG (amlodipine besylate-valsartan)	NPB	
<i>fosinopril sodium oral tablet 10 mg, 20 mg, 40 mg</i>	G	LGC
<i>fosinopril sodium-hctz oral tablet 10-12.5 mg, 20-12.5 mg</i>	G	LGC
<i>guanfacine hcl oral tablet 1 mg, 2 mg</i>	G	
<i>hydralazine hcl oral tablet 10 mg, 100 mg, 50 mg</i>	G	
<i>hydralazine hcl oral tablet 25 mg</i>	G	LGC
HYZAAR ORAL TABLET 100-12.5 MG, 100-25 MG, 50-12.5 MG (losartan potassium-hctz)	NPB	
INSPRA ORAL TABLET 25 MG, 50 MG (eplerenone)	NPB	
<i>irbesartan oral tablet 150 mg, 300 mg, 75 mg</i>	G	LGC
<i>irbesartan-hydrochlorothiazide oral tablet 150-12.5 mg, 300-12.5 mg</i>	G	LGC
<i>lisinopril oral tablet 10 mg, 2.5 mg, 20 mg, 5 mg</i>	G	LGC
<i>lisinopril oral tablet 30 mg, 40 mg</i>	G	
<i>lisinopril-hydrochlorothiazide oral tablet 10-12.5 mg, 20-12.5 mg, 20-25 mg</i>	G	LGC
LOPRESSOR HCT ORAL TABLET 50-25 MG (metoprolol-hydrochlorothiazide)	NPB	
<i>losartan potassium oral tablet 100 mg, 25 mg, 50 mg</i>	G	LGC
<i>losartan potassium-hctz oral tablet 100-12.5 mg, 100-25 mg, 50-12.5 mg</i>	G	LGC
LOTENSIN HCT ORAL TABLET 10-12.5 MG, 20-12.5 MG, 20-25 MG (benazepril-hydrochlorothiazide)	NPB	
LOTENSIN ORAL TABLET 10 MG, 20 MG, 40 MG (benazepril hcl)	NPB	
LOTREL ORAL CAPSULE 10-20 MG, 10-40 MG, 5-10 MG, 5-20 MG (amlodipine besy-benazepril hcl)	NPB	
MAVIK ORAL TABLET 4 MG (trandolapril)	NPB	
<i>methyldopa oral tablet 250 mg, 500 mg</i>	G	
<i>metoprolol-hydrochlorothiazide oral tablet 100-25 mg, 100-50 mg, 50-25 mg</i>	G	
<i>metyrosine oral capsule 250 mg</i>	G	

Prescription Drug Name	Drug Tier	Coverage Requirements and Limits
MICARDIS HCT ORAL TABLET 40-12.5 MG, 80-12.5 MG, 80-25 MG (<i>telmisartan-hctz</i>)	NPB	
MICARDIS ORAL TABLET 20 MG, 40 MG, 80 MG (<i>telmisartan</i>)	NPB	
MINIPRESS ORAL CAPSULE 1 MG, 2 MG, 5 MG (<i>prazosin hcl</i>)	NPB	
<i>minoxidil oral tablet 10 mg, 2.5 mg</i>	G	
<i>moexipril hcl oral tablet 15 mg, 7.5 mg</i>	G	
<i>olmesartan medoxomil oral tablet 20 mg, 40 mg, 5 mg</i>	G	LGC
<i>olmesartan medoxomil-hctz oral tablet 20-12.5 mg, 40-12.5 mg, 40-25 mg</i>	G	LGC
<i>olmesartan-amlodipine-hctz oral tablet 20-5-12.5 mg, 40-10-12.5 mg, 40-10-25 mg, 40-5-12.5 mg, 40-5-25 mg</i>	G	LGC
<i>perindopril erbumine oral tablet 2 mg, 4 mg, 8 mg</i>	G	LGC
<i>phenoxybenzamine hcl oral capsule 10 mg</i>	PSP	
<i>prazosin hcl oral capsule 1 mg, 2 mg, 5 mg</i>	G	
PRESTALIA ORAL TABLET 14-10 MG, 3.5-2.5 MG, 7-5 MG (<i>perindopril arg-amlodipine</i>)	NPB	#
PRINIVIL ORAL TABLET 10 MG, 20 MG (<i>lisinopril</i>)	NPB	
QBRELIS ORAL SOLUTION 1 MG/ML (<i>lisinopril</i>)	NPB	
<i>quinapril hcl oral tablet 10 mg, 20 mg, 40 mg, 5 mg</i>	G	LGC
<i>quinapril-hydrochlorothiazide oral tablet 10-12.5 mg, 20-12.5 mg, 20-25 mg</i>	G	LGC
<i>ramipril oral capsule 1.25 mg, 10 mg, 2.5 mg, 5 mg</i>	G	LGC
TARKA ORAL TABLET EXTENDED RELEASE 2-180 MG, 2-240 MG, 4-240 MG (<i>trandolapril-verapamil hcl</i>)	NPB	
TEKTURNA HCT ORAL TABLET 150-12.5 MG, 150-25 MG, 300-12.5 MG, 300-25 MG (<i>aliskiren-hydrochlorothiazide</i>)	NPB	
TEKTURNA ORAL TABLET 150 MG, 300 MG (<i>aliskiren fumarate</i>)	NPB	
<i>telmisartan oral tablet 20 mg, 40 mg, 80 mg</i>	G	LGC
<i>telmisartan-amlodipine oral tablet 40-10 mg, 40-5 mg, 80-10 mg, 80-5 mg</i>	G	LGC
<i>telmisartan-hctz oral tablet 40-12.5 mg, 80-12.5 mg, 80-25 mg</i>	G	LGC
TENORETIC 100 ORAL TABLET 100-25 MG (<i>atenolol-chlorthalidone</i>)	NPB	

Prescription Drug Name	Drug Tier	Coverage Requirements and Limits
TENORETIC 50 ORAL TABLET 50-25 MG (<i>atenolol-chlorthalidone</i>)	NPB	
terazosin hcl oral capsule 1 mg, 10 mg, 2 mg, 5 mg	G	LGC
trandolapril oral tablet 1 mg, 2 mg, 4 mg	G	LGC
trandolapril-verapamil hcl er oral tablet extended release 1-240 mg, 2-180 mg, 2-240 mg, 4-240 mg	G	
TRIBENZOR ORAL TABLET 20-5-12.5 MG, 40-10-12.5 MG, 40-10-25 MG, 40-5-12.5 MG, 40-5-25 MG (<i>olmesartanamlodipine-hctz</i>)	NPB	
valsartan oral tablet 160 mg, 320 mg, 40 mg, 80 mg	G	LGC
valsartan-hydrochlorothiazide oral tablet 160-12.5 mg, 160-25 mg, 320-12.5 mg, 320-25 mg, 80-12.5 mg	G	LGC
VASERETIC ORAL TABLET 10-25 MG (<i>enalapril-hydrochlorothiazide</i>)	NPB	
VASOTEC ORAL TABLET 10 MG, 2.5 MG, 20 MG, 5 MG (<i>enalapril maleate</i>)	NPB	
VECAMYL ORAL TABLET 2.5 MG (<i>mecamylamine hcl</i>)	NPSP	PA; SP
ZESTORETIC ORAL TABLET 10-12.5 MG, 20-12.5 MG, 20-25 MG (<i>lisinopril-hydrochlorothiazide</i>)	NPB	
ZESTRIL ORAL TABLET 10 MG, 2.5 MG, 20 MG, 30 MG, 40 MG, 5 MG (<i>lisinopril</i>)	NPB	
ZIAC ORAL TABLET 10-6.25 MG, 2.5-6.25 MG, 5-6.25 MG (<i>bisoprolol-hydrochlorothiazide</i>)	NPB	
ANTI-INFECTIVE AGENTS - MISC. - DRUGS FOR INFECTIONS		
AEMCOLO ORAL TABLET DELAYED RELEASE 194 MG (<i>rifamycin sodium</i>)	NPB	
ALINIA ORAL SUSPENSION RECONSTITUTED 100 MG/5ML (<i>nitazoxanide</i>)	NPB	#
ALINIA ORAL TABLET 500 MG (<i>nitazoxanide</i>)	NPB	#
BACTRIM DS ORAL TABLET 800-160 MG (<i>sulfamethoxazole-trimethoprim</i>)	NPB	
BACTRIM ORAL TABLET 400-80 MG (<i>sulfamethoxazole-trimethoprim</i>)	NPB	
CAYSTON INHALATION SOLUTION RECONSTITUTED 75 MG (<i>aztreonam lysine</i>)	NPSP	SP
CLEOCIN ORAL CAPSULE 150 MG, 300 MG (<i>clindamycin hcl</i>)	NPB	

2020 Pharmacy Drug Guide - Premier Plus

The formulary is updated the first week of each month.

12/01/2020

Prescription Drug Name	Drug Tier	Coverage Requirements and Limits
CLEOCIN ORAL SOLUTION RECONSTITUTED 75 MG/5ML (<i>clindamycin palmitate hcl</i>)	NPB	
<i>clindamycin hcl oral capsule 150 mg, 300 mg, 75 mg</i>	G	
<i>clindamycin palmitate hcl oral solution reconstituted 75 mg/5ml</i>	G	
COLY-MYCIN M INJECTION SOLUTION RECONSTITUTED 150 MG (<i>colistimethate sodium</i>)	NPSP	SP
<i>dapsone oral tablet 100 mg, 25 mg</i>	G	
FIRVANQ ORAL SOLUTION RECONSTITUTED 25 MG/ML (<i>vancomycin hcl</i>)	NPB	
FLAGYL ORAL TABLET 500 MG (<i>metronidazole</i>)	NPB	
HIPREX ORAL TABLET 1 GM (<i>methenamine hippurate</i>)	NPB	
IMPAVIDO ORAL CAPSULE 50 MG (<i>miltefosine</i>)	NPB	#
LAMPIT ORAL TABLET 120 MG, 30 MG (<i>nifurtimox</i>)	NPB	
<i>linezolid oral suspension reconstituted 100 mg/5ml</i>	G	
<i>linezolid oral tablet 600 mg</i>	G	
MACROBID ORAL CAPSULE 100 MG (<i>nitrofurantoin monohyd macro</i>)	NPB	
MACRODANTIN ORAL CAPSULE 100 MG, 25 MG, 50 MG (<i>nitrofurantoin macrocrystal</i>)	NPB	
MEPRON ORAL SUSPENSION 750 MG/5ML (<i>atovaquone</i>)	NPB	
<i>methenamine hippurate oral tablet 1 gm</i>	G	
<i>methenamine mandelate oral tablet 1 gm</i>	G	
<i>metronidazole oral tablet 250 mg, 500 mg</i>	G	
NEBUPENT INHALATION SOLUTION RECONSTITUTED 300 MG (<i>pentamidine isethionate</i>)	PB	
<i>nitrofurantoin macrocrystal oral capsule 100 mg, 50 mg</i>	G	
<i>nitrofurantoin monohyd macro oral capsule 100 mg</i>	G	
<i>nitrofurantoin oral suspension 25 mg/5ml</i>	G	
<i>pentamidine isethionate inhalation solution reconstituted 300 mg</i>	G	
PRIMSOL ORAL SOLUTION 50 MG/5ML (<i>trimethoprim hcl</i>)	NPB	
SIVEXTRO ORAL TABLET 200 MG (<i>tedizolid phosphate</i>)	NPB	
<i>sulfamethoxazole-trimethoprim oral suspension 200-40 mg/5ml</i>	G	
<i>sulfamethoxazole-trimethoprim oral tablet 400-80 mg, 800-160 mg</i>	G	

Prescription Drug Name	Drug Tier	Coverage Requirements and Limits
<i>sulfamethoxazole-trimethoprim</i> (Sulfatrim Pediatric Oral Suspension 200-40 Mg/5ML)	G	
<i>tinidazole oral tablet</i> 250 mg, 500 mg	G	
<i>trimethoprim oral tablet</i> 100 mg	G	
VANCOCIN HCL ORAL CAPSULE 125 MG (<i>vancomycin hcl</i>)	NPB	
VANCOCIN ORAL CAPSULE 250 MG (<i>vancomycin hcl</i>)	NPB	
<i>vancomycin hcl oral capsule</i> 125 mg, 250 mg	G	
XENLETA ORAL TABLET 600 MG (<i>lefamulin acetate</i>)	NPB	
XIFAXAN ORAL TABLET 200 MG (<i>rifaximin</i>)	NPB	
XIFAXAN ORAL TABLET 550 MG (<i>rifaximin</i>)	PB	
ZYVOX ORAL SUSPENSION RECONSTITUTED 100 MG/5ML (<i>linezolid</i>)	NPB	
ZYVOX ORAL TABLET 600 MG (<i>linezolid</i>)	NPB	
ANTIMALARIALS - DRUGS FOR INFECTIONS		
ARAKODA ORAL TABLET 100 MG (<i>tafenoquine succinate</i>)	NPB	
<i>atovaquone-proguanil hcl oral tablet</i> 250-100 mg	G	
<i>chloroquine phosphate oral tablet</i> 250 mg, 500 mg	G	
COARTEM ORAL TABLET 20-120 MG (<i>artemether-lumefantrine</i>)	NPB	
DARAPRIM ORAL TABLET 25 MG (<i>pyrimethamine</i>)	PB	
<i>hydroxychloroquine sulfate oral tablet</i> 200 mg	G	
KRINTAFEL ORAL TABLET 150 MG (<i>tafenoquine succinate</i>)	NPB	
MALARONE ORAL TABLET 250-100 MG, 62.5-25 MG (<i>atovaquone-proguanil hcl</i>)	NPB	
<i>mefloquine hcl oral tablet</i> 250 mg	G	
PLAQUENIL ORAL TABLET 200 MG (<i>hydroxychloroquine sulfate</i>)	NPB	
<i>primaquine phosphate oral tablet</i> 26.3 mg	G	
<i>pyrimethamine oral tablet</i> 25 mg	G	
QUALAQUN ORAL CAPSULE 324 MG (<i>quinine sulfate</i>)	NPB	
<i>quinine sulfate oral capsule</i> 324 mg	G	

Prescription Drug Name	Drug Tier	Coverage Requirements and Limits
ANTIMYASTHENIC/CHOLINERGIC AGENTS - DRUGS FOR NERVES AND MUSCLES		
FIRDAPSE ORAL TABLET 10 MG (<i>amifampridine phosphate</i>)	NPSP	PA; SP
<i>guanidine hcl oral tablet 125 mg</i>	G	
MESTINON ORAL SOLUTION 60 MG/5ML (<i>pyridostigmine bromide</i>)	NPB	
MESTINON ORAL TABLET 60 MG (<i>pyridostigmine bromide</i>)	NPB	
MESTINON ORAL TABLET EXTENDED RELEASE 180 MG (<i>pyridostigmine bromide</i>)	NPB	
<i>pyridostigmine bromide er oral tablet extended release 180 mg</i>	G	
<i>pyridostigmine bromide oral solution 60 mg/5ml</i>	G	
<i>pyridostigmine bromide oral tablet 30 mg, 60 mg</i>	G	
RUZURGI ORAL TABLET 10 MG (<i>amifampridine</i>)	NPSP	PA; SP
ANTIMYCOBACTERIAL AGENTS - DRUGS FOR INFECTIONS		
<i>cycloserine oral capsule 250 mg</i>	G	
<i>ethambutol hcl oral tablet 100 mg, 400 mg</i>	G	
<i>isoniazid oral tablet 100 mg, 300 mg</i>	G	
MYAMBUTOL ORAL TABLET 400 MG (<i>ethambutol hcl</i>)	NPB	
PASER ORAL PACKET 4 GM (<i>aminosalicylic acid</i>)	NPB	
<i>pretomanid oral tablet 200 mg</i>	NPB	
PRIFTIN ORAL TABLET 150 MG (<i>rifapentine</i>)	NPB	UF9 (PB)
<i>pyrazinamide oral tablet 500 mg</i>	G	
<i>rifabutin oral capsule 150 mg</i>	G	
<i>rifampin oral capsule 150 mg, 300 mg</i>	G	
SIRTURO ORAL TABLET 100 MG, 20 MG (<i>bedaquiline fumarate</i>)	NPSP	PA; SP
TRECATOR ORAL TABLET 250 MG (<i>ethionamide</i>)	NPB	
ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES - DRUGS FOR CANCER		
<i>abiraterone acetate oral tablet 250 mg</i>	CE	PA; SP; N2 (PSP)
ACTIMMUNE SUBCUTANEOUS SOLUTION 2000000 UNIT/0.5ML (<i>interferon gamma-1b</i>)	NPSP	PA; SP

Prescription Drug Name	Drug Tier	Coverage Requirements and Limits
AFINITOR DISPERZ ORAL TABLET SOLUBLE 2 MG, 3 MG, 5 MG (<i>everolimus</i>)	CE	PA; #; SP; N2 (NPSP)
AFINITOR ORAL TABLET 10 MG (<i>everolimus</i>)	CE	PA; #; SP; N2 (NPSP)
AFINITOR ORAL TABLET 2.5 MG, 5 MG, 7.5 MG (<i>everolimus</i>)	CE	PA; SP; N2 (NPSP)
ALECENSA ORAL CAPSULE 150 MG (<i>alectinib hcl</i>)	CE	PA; SP; N2 (NPSP)
ALFERON N INJECTION SOLUTION 5000000 UNIT/ML (<i>interferon alfa-n3</i>)	NPSP	SP
ALKERAN ORAL TABLET 2 MG (<i>melphalan</i>)	CE	N2 (PB)
ALUNBRIG ORAL TABLET 180 MG, 30 MG, 90 MG (<i>brigatinib</i>)	CE	PA; SP; N2 (NPSP)
ALUNBRIG ORAL TABLET THERAPY PACK 90 & 180 MG (<i>brigatinib</i>)	CE	PA; SP; N2 (NPSP)
<i>anastrozole oral tablet 1 mg</i>	CE	N2 (G)
ARIMIDEX ORAL TABLET 1 MG (<i>anastrozole</i>)	CE	N2 (NPB)
AROMASIN ORAL TABLET 25 MG (<i>exemestane</i>)	CE	N2 (NPB)
AYVAKIT ORAL TABLET 100 MG, 200 MG, 300 MG (<i>avapritinib</i>)	CE	PA; SP; N2 (NPSP)
BALVERSA ORAL TABLET 3 MG, 4 MG, 5 MG (<i>erdafitinib</i>)	CE	PA; SP; N2 (NPSP)
<i>bexarotene oral capsule 75 mg</i>	CE	PA; SP; N2 (PSP)
<i>bicalutamide oral tablet 50 mg</i>	CE	N2 (G)
BOSULIF ORAL TABLET 100 MG, 400 MG, 500 MG (<i>bosutinib</i>)	CE	PA; SP; N2 (PSP)
BRAFTOVI ORAL CAPSULE 75 MG (<i>encorafenib</i>)	CE	PA; SP; N2 (NPSP)
BRUKINSA ORAL CAPSULE 80 MG (<i>zanubrutinib</i>)	CE	PA; SP; N2 (NPS)
CABOMETYX ORAL TABLET 20 MG, 40 MG, 60 MG (<i>cabozantinib s-malate</i>)	CE	PA; SP; N2 (PSP)
CALQUENCE ORAL CAPSULE 100 MG (<i>acalabrutinib</i>)	CE	PA; SP; N2 (NPSP)
<i>capecitabine oral tablet 150 mg, 500 mg</i>	CE	PA; SP; N2 (G)
CAPRELSA ORAL TABLET 100 MG, 300 MG (<i>vandetanib</i>)	CE	PA; SP; N2 (NPSP)
CASODEX ORAL TABLET 50 MG (<i>bicalutamide</i>)	CE	N2 (NPB)
COMETRIQ (100 MG DAILY DOSE) ORAL KIT 80 & 20 MG (<i>cabozantinib s-malate</i>)	CE	PA; SP; N2 (NPSP); QL (2 capsules per 1 day)
COMETRIQ (140 MG DAILY DOSE) ORAL KIT 3 X 20 MG & 80 MG (<i>cabozantinib s-malate</i>)	CE	PA; SP; N2 (NPSP); QL (4 capsules per 1 day)

2020 Pharmacy Drug Guide - Premier Plus

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12/01/2020

Prescription Drug Name	Drug Tier	Coverage Requirements and Limits
COMETRIQ (60 MG DAILY DOSE) ORAL KIT 20 MG (<i>cabozantinib s-malate</i>)	CE	PA; SP; N2 (NPSP)
COPIKTRA ORAL CAPSULE 15 MG, 25 MG (<i>duvelisib</i>)	CE	PA; SP; N2 (PSP)
COTELLIC ORAL TABLET 20 MG (<i>cobimetinib fumarate</i>)	CE	PA; SP; UF9 (PSP); N2 (NPSP)
<i>cyclophosphamide oral capsule 25 mg, 50 mg</i>	CE	N2 (G)
DAURISMO ORAL TABLET 100 MG, 25 MG (<i>glasdegib maleate</i>)	CE	PA; SP; N2 (NPSP)
ELIGARD SUBCUTANEOUS KIT 22.5 MG (<i>leuprolide acetate (3 month)</i>)	NPSP	PA; SP
ELIGARD SUBCUTANEOUS KIT 30 MG (<i>leuprolide acetate (4 month)</i>)	NPSP	PA; SP
ELIGARD SUBCUTANEOUS KIT 45 MG (<i>leuprolide acetate (6 month)</i>)	NPSP	PA; SP
ELIGARD SUBCUTANEOUS KIT 7.5 MG (<i>leuprolide acetate</i>)	NPSP	PA; SP
EMCYT ORAL CAPSULE 140 MG (<i>estramustine phosphate sodium</i>)	CE	N2 (PB)
ERIVEDGE ORAL CAPSULE 150 MG (<i>vismodegib</i>)	CE	PA; SP; N2 (NPSP)
ERLEADA ORAL TABLET 60 MG (<i>apalutamide</i>)	CE	PA; SP; N2 (NPSP)
<i>erlotinib hcl oral tablet 100 mg, 150 mg, 25 mg</i>	CE	PA; SP; N2 (PSP)
<i>etoposide oral capsule 50 mg</i>	CE	N2 (G)
<i>everolimus oral tablet 2.5 mg, 5 mg, 7.5 mg</i>	CE	PA; SP; N2 (PSP)
<i>exemestane oral tablet 25 mg</i>	CE	N2 (G)
FARESTON ORAL TABLET 60 MG (<i>toremifene citrate</i>)	CE	N2 (NPB)
FARYDAK ORAL CAPSULE 10 MG, 20 MG (<i>panobinostat lactate</i>)	CE	PA; SP; N2 (NPSP)
FASLODEX INTRAMUSCULAR SOLUTION 250 MG/5ML (<i>fulvestrant</i>)	NPSP	PA; SP
FEMARA ORAL TABLET 2.5 MG (<i>letrozole</i>)	CE	N2 (NPB)
FIRMAGON (240 MG DOSE) SUBCUTANEOUS SOLUTION RECONSTITUTED 120 MG/VIAL (<i>degarelix acetate</i>)	NPSP	PA
FIRMAGON SUBCUTANEOUS SOLUTION RECONSTITUTED 80 MG (<i>degarelix acetate</i>)	NPSP	PA; SP
<i>flutamide oral capsule 125 mg</i>	CE	N2 (G)
<i>fulvestrant intramuscular solution 250 mg/5ml</i>	PSP	PA; SP

2020 Pharmacy Drug Guide - Premier Plus

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12/01/2020

Prescription Drug Name	Drug Tier	Coverage Requirements and Limits
GAVRETO ORAL CAPSULE 100 MG (<i>pralsetinib</i>)	CE	N2 (NPSP)
GILOTRIF ORAL TABLET 20 MG, 30 MG, 40 MG (<i>afatinib dimaleate</i>)	CE	PA; SP; N2 (NPSP)
GLEEVEC ORAL TABLET 100 MG, 400 MG (<i>imatinib mesylate</i>)	CE	PA; SP; N2 (NPSP)
GLEOSTINE ORAL CAPSULE 10 MG, 100 MG, 40 MG (<i>lomustine</i>)	CE	N2 (NPB)
HYCAMTIN ORAL CAPSULE 0.25 MG, 1 MG (<i>topotecan hcl</i>)	CE	PA; SP; N2 (NPSP)
HYDREA ORAL CAPSULE 500 MG (<i>hydroxyurea</i>)	CE	N2 (NPB)
<i>hydroxyurea oral capsule 500 mg</i>	CE	N2 (G)
IBRANCE ORAL CAPSULE 100 MG, 125 MG, 75 MG (<i>palbociclib</i>)	CE	PA; SP; N2 (NPSP)
IBRANCE ORAL TABLET 100 MG, 125 MG, 75 MG (<i>palbociclib</i>)	CE	PA; SP; N2 (NPSP)
ICLUSIG ORAL TABLET 15 MG, 45 MG (<i>ponatinib hcl</i>)	CE	PA; SP; N2 (NPSP)
IDHIFA ORAL TABLET 100 MG, 50 MG (<i>enasidenib mesylate</i>)	CE	PA; SP; N2 (NPSP)
<i>imatinib mesylate oral tablet 100 mg, 400 mg</i>	CE	PA; SP; N2 (G)
IMBRUWICA ORAL CAPSULE 140 MG, 70 MG (<i>ibrutinib</i>)	CE	PA; SP; UF9 (PSP); N2 (NPSP)
IMBRUWICA ORAL TABLET 140 MG, 280 MG, 420 MG, 560 MG (<i>ibrutinib</i>)	CE	PA; SP; UF9 (PSP); N2 (NPSP)
INLYTA ORAL TABLET 1 MG, 5 MG (<i>axitinib</i>)	CE	PA; SP; N2 (NPSP)
INQOVI ORAL TABLET 35-100 MG (<i>decitabine-cedazuridine</i>)	NPSP	PA; SP
INREBIC ORAL CAPSULE 100 MG (<i>fedratinib hcl</i>)	CE	PA; SP; N2 (NPSP)
INTRON A INJECTION SOLUTION 10000000 UNIT/ML, 6000000 UNIT/ML (<i>interferon alfa-2b</i>)	PSP	PA; NPL; SP
INTRON A INJECTION SOLUTION RECONSTITUTED 10000000 UNIT, 18000000 UNIT, 50000000 UNIT (<i>interferon alfa-2b</i>)	PSP	PA; NPL; SP
IRESSA ORAL TABLET 250 MG (<i>gefitinib</i>)	CE	PA; N2 (NPSP)
JAKAFI ORAL TABLET 10 MG, 15 MG, 20 MG, 25 MG, 5 MG (<i>ruxolitinib phosphate</i>)	CE	PA; SP; UF9 (PSP); N2 (NPSP)
KISQALI FEMARA (400 MG DOSE) ORAL TABLET THERAPY PACK 200 & 2.5 MG (<i>ribociclib-letrazole</i>)	CE	PA; SP; N2 (NPSP)

2020 Pharmacy Drug Guide - Premier Plus

The formulary is updated the first week of each month.

12/01/2020

Prescription Drug Name	Drug Tier	Coverage Requirements and Limits
KISQALI FEMARA (600 MG DOSE) ORAL TABLET THERAPY PACK 200 & 2.5 MG (<i>ribociclib-letrazole</i>)	CE	PA; SP; N2 (NPSP)
KISQALI FEMARA(200 MG DOSE) ORAL TABLET THERAPY PACK 200 & 2.5 MG (<i>ribociclib-letrazole</i>)	CE	PA; SP; N2 (NPSP)
KOSELUGO ORAL CAPSULE 10 MG, 25 MG (<i>selumetinib sulfate</i>)	CE	PA; SP; N2 (NPS)
LENVIMA (10 MG DAILY DOSE) ORAL CAPSULE THERAPY PACK 10 MG (<i>lenvatinib mesylate</i>)	CE	PA; SP; UF9 (PSP); N2 (NPSP)
LENVIMA (12 MG DAILY DOSE) ORAL CAPSULE THERAPY PACK 3 X 4 MG (<i>lenvatinib mesylate</i>)	CE	PA; SP; UF9 (PSP); N2 (NPSP)
LENVIMA (14 MG DAILY DOSE) ORAL CAPSULE THERAPY PACK 10 & 4 MG (<i>lenvatinib mesylate</i>)	CE	PA; SP; UF9 (PSP); N2 (NPSP)
LENVIMA (18 MG DAILY DOSE) ORAL CAPSULE THERAPY PACK 10 MG & 2 X 4 MG (<i>lenvatinib mesylate</i>)	CE	PA; SP; UF9 (PSP); N2 (NPSP)
LENVIMA (20 MG DAILY DOSE) ORAL CAPSULE THERAPY PACK 2 X 10 MG (<i>lenvatinib mesylate</i>)	CE	PA; SP; UF9 (PSP); N2 (NPSP)
LENVIMA (24 MG DAILY DOSE) ORAL CAPSULE THERAPY PACK 2 X 10 MG & 4 MG (<i>lenvatinib mesylate</i>)	CE	PA; SP; UF9 (PSP); N2 (NPSP)
LENVIMA (4 MG DAILY DOSE) ORAL CAPSULE THERAPY PACK 4 MG (<i>lenvatinib mesylate</i>)	CE	PA; SP; UF9 (PSP); N2 (NPSP)
LENVIMA (8 MG DAILY DOSE) ORAL CAPSULE THERAPY PACK 2 X 4 MG (<i>lenvatinib mesylate</i>)	CE	PA; SP; UF9 (PSP); N2 (NPSP)
<i>letrozole oral tablet 2.5 mg</i>	CE	N2 (G)
<i>leucovorin calcium oral tablet 10 mg, 15 mg, 25 mg, 5 mg</i>	CE	N2 (G)
LEUKERAN ORAL TABLET 2 MG (<i>chlorambucil</i>)	CE	N2 (PB)
<i>leuprolide acetate injection kit 1 mg/0.2ml</i>	G	PA; SP
LONSURF ORAL TABLET 15-6.14 MG, 20-8.19 MG (<i>trifluridine-tipiracil</i>)	CE	PA; N2 (NPSP)
LORBRENA ORAL TABLET 100 MG, 25 MG (<i>lorlatinib</i>)	CE	PA; SP; N2 (NPSP)
LUPRON DEPOT (1-MONTH) INTRAMUSCULAR KIT 3.75 MG, 7.5 MG (<i>leuprolide acetate</i>)	PSP	PA; #; SP
LUPRON DEPOT (3-MONTH) INTRAMUSCULAR KIT 11.25 MG, 22.5 MG (<i>leuprolide acetate (3 month)</i>)	PSP	PA; #; SP
LUPRON DEPOT (4-MONTH) INTRAMUSCULAR KIT 30 MG (<i>leuprolide acetate (4 month)</i>)	PSP	PA; #; SP
LUPRON DEPOT (6-MONTH) INTRAMUSCULAR KIT 45 MG (<i>leuprolide acetate (6 month)</i>)	PSP	PA; #; SP
LYNPARZA ORAL TABLET 100 MG, 150 MG (<i>olaparib</i>)	CE	PA; SP; N2 (NPSP)

2020 Pharmacy Drug Guide - Premier Plus

The formulary is updated the first week of each month.

12/01/2020

Prescription Drug Name	Drug Tier	Coverage Requirements and Limits
LYSODREN ORAL TABLET 500 MG (<i>mitotane</i>)	CE	UF9 (PB); N2 (NPB)
MATULANE ORAL CAPSULE 50 MG (<i>procarbazine hcl</i>)	CE	N2 (PB)
<i>megestrol acetate oral suspension 40 mg/ml, 400 mg/10ml</i>	CE	N2 (G)
<i>megestrol acetate oral tablet 20 mg, 40 mg</i>	CE	N2 (G)
MEKINIST ORAL TABLET 0.5 MG, 2 MG (<i>trametinib dimethyl sulfoxide</i>)	CE	PA; SP; N2 (NPSP)
MEKTOVI ORAL TABLET 15 MG (<i>binimetinib</i>)	CE	PA; SP; N2 (NPSP)
<i>melphalan oral tablet 2 mg</i>	CE	N2 (G)
<i>mercaptopurine oral tablet 50 mg</i>	CE	N2 (G)
MESNEX ORAL TABLET 400 MG (<i>mesna</i>)	CE	N2 (NPB)
<i>methotrexate oral tablet 2.5 mg</i>	CE	N2 (G)
<i>methotrexate sodium oral tablet 2.5 mg</i>	CE	N2 (G)
MYLERAN ORAL TABLET 2 MG (<i>busulfan</i>)	CE	N2 (PB)
NERLYNX ORAL TABLET 40 MG (<i>neratinib maleate</i>)	CE	PA; SP; UF9 (PSP); N2 (NPSP)
NEXAVAR ORAL TABLET 200 MG (<i>sorafenib tosylate</i>)	CE	PA; SP; N2 (NPSP)
NILANDRON ORAL TABLET 150 MG (<i>nilutamide</i>)	CE	N2 (PB)
<i>nilutamide oral tablet 150 mg</i>	CE	N2 (G)
NINLARO ORAL CAPSULE 2.3 MG, 3 MG, 4 MG (<i>ixazomib citrate</i>)	CE	PA; UF9 (PSP); N2 (NPSP)
NUBEQA ORAL TABLET 300 MG (<i>darolutamide</i>)	CE	SP; N2 (NPSP)
ODOMZO ORAL CAPSULE 200 MG (<i>sonidegib phosphate</i>)	CE	PA; UF9 (PSP); N2 (NPSP)
ONUREG ORAL TABLET 200 MG, 300 MG (<i>azacitidine</i>)	CE	N2 (NPSP)
PEMAZYRE ORAL TABLET 13.5 MG, 4.5 MG, 9 MG (<i>pemigatinib</i>)	CE	PA; N2 (NPS)
PIQRAY (200 MG DAILY DOSE) ORAL TABLET THERAPY PACK 200 MG (<i>alpelisib</i>)	CE	PA; SP; N2 (NPSP)
PIQRAY (250 MG DAILY DOSE) ORAL TABLET THERAPY PACK 200 & 50 MG (<i>alpelisib</i>)	CE	PA; SP; N2 (NPSP)
PIQRAY (300 MG DAILY DOSE) ORAL TABLET THERAPY PACK 2 X 150 MG (<i>alpelisib</i>)	CE	PA; SP; N2 (NPSP)
POMALYST ORAL CAPSULE 1 MG, 2 MG, 3 MG, 4 MG (<i>pomalidomide</i>)	CE	PA; #; SP; N2 (NPSP)
PURIXAN ORAL SUSPENSION 2000 MG/100ML (<i>mercaptopurine</i>)	CE	PA; SP; N2 (NPSP)
QINLOCK ORAL TABLET 50 MG (<i>ripretinib</i>)	CE	PA; SP; N2 (NPSP)

2020 Pharmacy Drug Guide - Premier Plus

The formulary is updated the first week of each month.

12/01/2020

Prescription Drug Name	Drug Tier	Coverage Requirements and Limits
RETEVMO ORAL CAPSULE 40 MG, 80 MG (<i>selpercatinib</i>)	CE	PA; SP; N2 (NPSP)
ROZLYTREK ORAL CAPSULE 100 MG, 200 MG (<i>entrectinib</i>)	CE	PA; SP; N2 (NPSP)
RUBRACA ORAL TABLET 200 MG, 300 MG (<i>rucaparib camsylate</i>)	CE	PA; N2 (NPSP)
RUBRACA ORAL TABLET 250 MG (<i>rucaparib camsylate</i>)	CE	PA; SP; N2 (NPSP)
RYDAPT ORAL CAPSULE 25 MG (<i>midostaurin</i>)	CE	PA; SP; N2 (NPSP)
SOLTAMOX ORAL SOLUTION 10 MG/5ML (<i>tamoxifen citrate</i>)	CE	#; N2 (NPB)
SPRYCEL ORAL TABLET 100 MG, 140 MG, 20 MG, 50 MG, 70 MG, 80 MG (<i>dasatinib</i>)	CE	PA; SP; N2 (PSP)
STIVARGA ORAL TABLET 40 MG (<i>regorafenib</i>)	CE	PA; SP; N2 (NPSP)
SUTENT ORAL CAPSULE 12.5 MG, 25 MG, 37.5 MG, 50 MG (<i>sunitinib malate</i>)	CE	PA; #; SP; N2 (PSP)
TABLOID ORAL TABLET 40 MG (<i>thioguanine</i>)	CE	N2 (PB)
TABRECTA ORAL TABLET 150 MG, 200 MG (<i>capmatinib hcl</i>)	CE	PA; SP; N2 (NPSP)
TAFINLAR ORAL CAPSULE 50 MG, 75 MG (<i>dabrafenib mesylate</i>)	CE	PA; SP; N2 (NPSP)
TAGRISSO ORAL TABLET 40 MG, 80 MG (<i>osimertinib mesylate</i>)	CE	PA; SP; N2 (NPSP)
TALZENNA ORAL CAPSULE 0.25 MG, 1 MG (<i>talazoparib tosylate</i>)	CE	PA; SP; N2 (NPSP)
<i>tamoxifen citrate oral tablet 10 mg, 20 mg</i>	CE	N2 (G)
TARCEVA ORAL TABLET 100 MG, 150 MG, 25 MG (<i>erlotinib hcl</i>)	CE	PA; SP; N2 (NPSP)
TARGETIN ORAL CAPSULE 75 MG (<i>bexarotene</i>)	CE	PA; SP; N2 (NPSP)
TASIGNA ORAL CAPSULE 150 MG, 200 MG, 50 MG (<i>nilotinib hcl</i>)	CE	PA; SP; N2 (NPSP)
TAZVERIK ORAL TABLET 200 MG (<i>tazemetostat hbr</i>)	CE	PA; SP; N2 (NPSP)
TEMODAR ORAL CAPSULE 100 MG, 140 MG, 180 MG, 20 MG, 250 MG, 5 MG (<i>temozolomide</i>)	CE	PA; SP; N2 (NPSP)
<i>temozolomide oral capsule 100 mg, 140 mg, 180 mg, 20 mg, 250 mg, 5 mg</i>	CE	PA; SP; N2 (G)
TIBSOVO ORAL TABLET 250 MG (<i>ivosidenib</i>)	CE	PA; SP; N2 (NPSP)
<i>toremifene citrate oral tablet 60 mg</i>	CE	N2 (G)

2020 Pharmacy Drug Guide - Premier Plus

The formulary is updated the first week of each month.

12/01/2020

Prescription Drug Name	Drug Tier	Coverage Requirements and Limits
TRELSTAR MIXJECT INTRAMUSCULAR SUSPENSION RECONSTITUTED 11.25 MG, 22.5 MG, 3.75 MG (<i>triptorelin pamoate</i>)	NPSP	PA; #; SP
<i>tretinoin oral capsule 10 mg</i>	CE	SP; N2 (G)
TREXALL ORAL TABLET 10 MG, 15 MG, 5 MG, 7.5 MG (<i>methotrexate sodium</i>)	CE	N2 (NPB)
TUKYSA ORAL TABLET 150 MG, 50 MG (<i>tucatinib</i>)	CE	PA; SP; N2 (NPS)
TURALIO ORAL CAPSULE 200 MG (<i>pexidartinib hcl</i>)	CE	PA; SP; N2 (NPSP)
TYKERB ORAL TABLET 250 MG (<i>lapatinib ditosylate</i>)	CE	PA; #; SP; UF9 (PSP); N2 (NPSP)
VENCLEXTA ORAL TABLET 10 MG, 100 MG, 50 MG (<i>venetoclax</i>)	CE	PA; SP; N2 (NPSP)
VENCLEXTA STARTING PACK ORAL TABLET THERAPY PACK 10 & 50 & 100 MG (<i>venetoclax</i>)	CE	PA; SP; N2 (NPSP)
VERZENIO ORAL TABLET 100 MG, 150 MG, 200 MG, 50 MG (<i>abemaciclib</i>)	CE	PA; SP; N2 (NPSP)
VITRAKVI ORAL CAPSULE 100 MG, 25 MG (<i>larotrectinib sulfate</i>)	CE	PA; SP; N2 (NPSP)
VITRAKVI ORAL SOLUTION 20 MG/ML (<i>larotrectinib sulfate</i>)	CE	PA; SP; N2 (NPSP)
VIZIMPRO ORAL TABLET 15 MG, 30 MG, 45 MG (<i>dacomitinib</i>)	CE	PA; SP; N2 (NPSP)
VOTRIENT ORAL TABLET 200 MG (<i>pazopanib hcl</i>)	CE	PA; SP; UF9 (PSP); N2 (NPSP)
XALKORI ORAL CAPSULE 200 MG, 250 MG (<i>crizotinib</i>)	CE	PA; SP; N2 (NPSP)
XATMEP ORAL SOLUTION 2.5 MG/ML (<i>methotrexate</i>)	CE	N2 (NPB)
XELODA ORAL TABLET 150 MG, 500 MG (<i>capecitabine</i>)	CE	PA; SP; N2 (NPSP)
XOSPATA ORAL TABLET 40 MG (<i>gilteritinib fumarate</i>)	CE	PA; SP; N2 (NPSP)
XPOVIO (100 MG ONCE WEEKLY) ORAL TABLET THERAPY PACK 20 MG (<i>selinexor</i>)	CE	PA; SP; N2 (NPSP)
XPOVIO (40 MG ONCE WEEKLY) ORAL TABLET THERAPY PACK 20 MG (<i>selinexor</i>)	CE	PA; SP; N2 (NPSP)
XPOVIO (40 MG TWICE WEEKLY) ORAL TABLET THERAPY PACK 20 MG (<i>selinexor</i>)	CE	PA; SP; N2 (NPSP)
XPOVIO (60 MG ONCE WEEKLY) ORAL TABLET THERAPY PACK 20 MG (<i>selinexor</i>)	CE	PA; SP; N2 (NPSP)
XPOVIO (60 MG TWICE WEEKLY) ORAL TABLET THERAPY PACK 20 MG (<i>selinexor</i>)	CE	PA; SP; N2 (NPSP)

2020 Pharmacy Drug Guide - Premier Plus

The formulary is updated the first week of each month.

12/01/2020

Prescription Drug Name	Drug Tier	Coverage Requirements and Limits
XPOVIO (80 MG ONCE WEEKLY) ORAL TABLET THERAPY PACK 20 MG (<i>selinexor</i>)	CE	PA; SP; N2 (NPSP)
XPOVIO (80 MG TWICE WEEKLY) ORAL TABLET THERAPY PACK 20 MG (<i>selinexor</i>)	CE	PA; SP; N2 (NPSP)
XTANDI ORAL CAPSULE 40 MG (<i>enzalutamide</i>)	CE	PA; SP; N2 (NPSP)
YONSA ORAL TABLET 125 MG (<i>abiraterone acetate</i>)	CE	PA; #; SP; N2 (NPSP)
ZEJULA ORAL CAPSULE 100 MG (<i>niraparib tosylate</i>)	CE	PA; SP; UF9 (PSP); N2 (NPSP)
ZELBORAF ORAL TABLET 240 MG (<i>vemurafenib</i>)	CE	PA; SP; N2 (NPSP)
ZOLINZA ORAL CAPSULE 100 MG (<i>vorinostat</i>)	CE	PA; SP; N2 (NPSP)
ZYDELIG ORAL TABLET 100 MG, 150 MG (<i>idelalisib</i>)	CE	PA; SP; UF9 (PSP); N2 (NPSP)
ZYKADIA ORAL TABLET 150 MG (<i>ceritinib</i>)	CE	PA; SP; N2 (NPSP)
ZYTIGA ORAL TABLET 250 MG (<i>abiraterone acetate</i>)	CE	PA; SP; N2 (NPSP)
ZYTIGA ORAL TABLET 500 MG (<i>abiraterone acetate</i>)	CE	PA; #; SP; N2 (PSP)
ANTIPARKINSON AND RELATED THERAPY AGENTS - DRUGS FOR THE NERVOUS SYSTEM		
<i>amantadine hcl oral capsule 100 mg</i>	G	
<i>amantadine hcl oral syrup 50 mg/5ml</i>	G	
APOKYN SUBCUTANEOUS SOLUTION CARTRIDGE 30 MG/3ML (<i>apomorphine hcl</i>)	NPSP	PA; SP
AZILECT ORAL TABLET 0.5 MG, 1 MG (<i>rasagiline mesylate</i>)	NPB	
<i>benztropine mesylate oral tablet 0.5 mg, 1 mg, 2 mg</i>	G	
<i>bromocriptine mesylate oral capsule 5 mg</i>	G	
<i>bromocriptine mesylate oral tablet 2.5 mg</i>	G	
<i>carbidopa oral tablet 25 mg</i>	G	
<i>carbidopa-levodopa er oral tablet extended release 25-100 mg, 50-200 mg</i>	G	
<i>carbidopa-levodopa oral tablet 10-100 mg, 25-100 mg, 25-250 mg</i>	G	
<i>carbidopa-levodopa oral tablet dispersible 10-100 mg, 25-100 mg, 25-250 mg</i>	G	
<i>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</i>	G	
COMTAN ORAL TABLET 200 MG (<i>entacapone</i>)	NPB	

2020 Pharmacy Drug Guide - Premier Plus

The formulary is updated the first week of each month.

12/01/2020

Prescription Drug Name	Drug Tier	Coverage Requirements and Limits
DUOPA ENTERAL SUSPENSION 4.63-20 MG/ML (carbidopa-levodopa)	NPSP	PA
entacapone oral tablet 200 mg	G	
GOCOVRI ORAL CAPSULE EXTENDED RELEASE 24 HOUR 137 MG, 68.5 MG (amantadine hcl)	NPB	
INBRIJA INHALATION CAPSULE 42 MG (levodopa)	NPSP	PA; SP
KYNMOBI SUBLINGUAL FILM 10 MG, 15 MG, 20 MG, 25 MG, 30 MG (apomorphine hcl)	NPSP	PA; SP
LODOSYN ORAL TABLET 25 MG (carbidopa)	NPB	
MIRAPEX ER ORAL TABLET EXTENDED RELEASE 24 HOUR 0.375 MG, 0.75 MG, 1.5 MG, 2.25 MG, 3 MG, 3.75 MG, 4.5 MG (pramipexole dihydrochloride)	NPB	
MIRAPEX ORAL TABLET 0.125 MG, 0.5 MG, 0.75 MG, 1 MG (pramipexole dihydrochloride)	NPB	
NEUPRO TRANSDERMAL PATCH 24 HOUR 1 MG/24HR, 2 MG/24HR, 3 MG/24HR, 4 MG/24HR, 6 MG/24HR, 8 MG/24HR (rotigotine)	NPB	#
NOURIANZ ORAL TABLET 20 MG, 40 MG (istradefylline)	NPB	
ONGENTYS ORAL CAPSULE 50 MG (opicapone)	NPB	
OSMOLEX ER ORAL TABLET ER 24 HOUR THERAPY PACK 129 & 193 MG (amantadine hcl)	NPB	
OSMOLEX ER ORAL TABLET EXTENDED RELEASE 24 HOUR 129 MG, 193 MG, 258 MG (amantadine hcl)	NPB	
PARLODEL ORAL CAPSULE 5 MG (bromocriptine mesylate)	NPB	
pramipexole dihydrochloride er oral tablet extended release 24 hour 0.375 mg, 0.75 mg, 1.5 mg, 2.25 mg, 3 mg, 3.75 mg, 4.5 mg	G	
pramipexole dihydrochloride oral tablet 0.125 mg, 0.25 mg, 0.5 mg, 0.75 mg, 1 mg, 1.5 mg	G	
rasagiline mesylate oral tablet 0.5 mg, 1 mg	G	
ropinirole hcl er oral tablet extended release 24 hour 12 mg, 2 mg, 4 mg, 6 mg, 8 mg	G	
ropinirole hcl oral tablet 0.25 mg, 0.5 mg, 1 mg, 2 mg, 3 mg, 4 mg, 5 mg	G	
RYTARY ORAL CAPSULE EXTENDED RELEASE 23.75-95 MG, 36.25-145 MG, 48.75-195 MG, 61.25-245 MG (carbidopa-levodopa)	NPB	#
selegiline hcl oral capsule 5 mg	G	

2020 Pharmacy Drug Guide - Premier Plus

The formulary is updated the first week of each month.

12/01/2020

Prescription Drug Name	Drug Tier	Coverage Requirements and Limits
selegiline hcl oral tablet 5 mg	G	
SINEMET ORAL TABLET 10-100 MG, 25-100 MG, 25-250 MG (<i>carbidopa-levodopa</i>)	NPB	
STALEVO 100 ORAL TABLET 25-100-200 MG (<i>carbidopa-levodopa-entacapone</i>)	NPB	
STALEVO 125 ORAL TABLET 31.25-125-200 MG (<i>carbidopa-levodopa-entacapone</i>)	NPB	
STALEVO 150 ORAL TABLET 37.5-150-200 MG (<i>carbidopa-levodopa-entacapone</i>)	NPB	
STALEVO 200 ORAL TABLET 50-200-200 MG (<i>carbidopa-levodopa-entacapone</i>)	NPB	
STALEVO 50 ORAL TABLET 12.5-50-200 MG (<i>carbidopa-levodopa-entacapone</i>)	NPB	
STALEVO 75 ORAL TABLET 18.75-75-200 MG (<i>carbidopa-levodopa-entacapone</i>)	NPB	
TASMAR ORAL TABLET 100 MG (<i>tolcapone</i>)	NPB	
<i>tolcapone</i> oral tablet 100 mg	G	
trihexyphenidyl hcl oral tablet 2 mg, 5 mg	G	
XADAGO ORAL TABLET 100 MG, 50 MG (<i>safinamide mesylate</i>)	NPB	
ZELAPAR ORAL TABLET DISPERSIBLE 1.25 MG (<i>selegiline hcl</i>)	NPB	
ANTIPSYCHOTICS/ANTIMANIC AGENTS - DRUGS FOR THE NERVOUS SYSTEM		
ABILIFY MAINTENA INTRAMUSCULAR PREFILLED SYRINGE 300 MG, 400 MG (<i>aripiprazole</i>)	PB	
ABILIFY MAINTENA INTRAMUSCULAR SUSPENSION RECONSTITUTED ER 300 MG, 400 MG (<i>aripiprazole</i>)	PB	
ABILIFY ORAL TABLET 10 MG, 15 MG, 2 MG, 20 MG, 30 MG, 5 MG (<i>aripiprazole</i>)	NPB	
<i>aripiprazole</i> oral solution 1 mg/ml	G	
<i>aripiprazole</i> oral tablet 10 mg, 15 mg, 2 mg, 20 mg, 30 mg, 5 mg	G	
<i>aripiprazole</i> oral tablet dispersible 10 mg, 15 mg	G	
ARISTADA INITIO INTRAMUSCULAR PREFILLED SYRINGE 675 MG/2.4ML (<i>aripiprazole lauroxil</i>)	PB	

Prescription Drug Name	Drug Tier	Coverage Requirements and Limits
ARISTADA INTRAMUSCULAR PREFILLED SYRINGE 1064 MG/3.9ML, 441 MG/1.6ML, 662 MG/2.4ML, 882 MG/3.2ML (<i>aripiprazole lauroxil</i>)	PB	
CAPLYTA ORAL CAPSULE 42 MG (<i>lumateperone tosylate</i>)	NPB	
<i>chlorpromazine hcl injection solution 25 mg/ml, 50 mg/2ml</i>	G	
<i>chlorpromazine hcl oral tablet 10 mg, 100 mg, 200 mg, 25 mg, 50 mg</i>	G	
<i>clozapine oral tablet 100 mg, 200 mg, 25 mg, 50 mg</i>	G	
<i>clozapine oral tablet dispersible 100 mg, 12.5 mg, 150 mg, 200 mg, 25 mg</i>	G	
CLOZARIL ORAL TABLET 100 MG, 25 MG (<i>clozapine</i>)	NPB	
<i>prochlorperazine (Compro Rectal Suppository 25 Mg)</i>	G	
EQUETRO ORAL CAPSULE EXTENDED RELEASE 12 HOUR 100 MG, 200 MG, 300 MG (<i>carbamazepine (antipsychotic)</i>)	NPB	
FANAPT ORAL TABLET 1 MG, 10 MG, 12 MG, 2 MG, 4 MG, 6 MG, 8 MG (<i>iloperidone</i>)	NPB	
FANAPT TITRATION PACK ORAL TABLET 1 & 2 & 4 & 6 MG (<i>iloperidone</i>)	NPB	
<i>fluphenazine decanoate injection solution 25 mg/ml</i>	G	
<i>fluphenazine hcl injection solution 2.5 mg/ml</i>	G	
<i>fluphenazine hcl oral tablet 1 mg, 10 mg, 2.5 mg, 5 mg</i>	G	
GEODON INTRAMUSCULAR SOLUTION RECONSTITUTED 20 MG (<i>ziprasidone mesylate</i>)	NPB	
GEODON ORAL CAPSULE 20 MG, 40 MG, 60 MG, 80 MG (<i>ziprasidone hcl</i>)	NPB	
HALDOL DECANOATE INTRAMUSCULAR SOLUTION 100 MG/ML, 50 MG/ML (<i>haloperidol decanoate</i>)	NPB	
HALDOL INJECTION SOLUTION 5 MG/ML (<i>haloperidol lactate</i>)	NPB	
<i>haloperidol decanoate intramuscular solution 100 mg/ml, 50 mg/ml</i>	G	
<i>haloperidol lactate injection solution 5 mg/ml</i>	G	
<i>haloperidol lactate oral concentrate 2 mg/ml</i>	G	
<i>haloperidol oral tablet 0.5 mg, 1 mg, 10 mg, 2 mg, 20 mg, 5 mg</i>	G	

Prescription Drug Name	Drug Tier	Coverage Requirements and Limits
INVEGA ORAL TABLET EXTENDED RELEASE 24 HOUR 1.5 MG, 3 MG, 6 MG, 9 MG (<i>paliperidone</i>)	NPB	
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 (<i>paliperidone palmitate</i>)	NPB	
INVEGA TRINZA INTRAMUSCULAR SUSPENSION PREFILLED SYRINGE 273 MG/0.875ML, 410 MG/1.315ML, 546 MG/1.75ML, 819 MG/2.625ML (<i>paliperidone palmitate</i>)	NPB	
LATUDA ORAL TABLET 120 MG, 20 MG, 40 MG, 60 MG, 80 MG (<i>lurasidone hcl</i>)	PB	#
<i>lithium carbonate er oral tablet extended release 300 mg, 450 mg</i>	G	
<i>lithium carbonate oral capsule 150 mg, 300 mg, 600 mg</i>	G	
<i>lithium carbonate oral tablet 300 mg</i>	G	
<i>lithium oral solution 8 meq/5ml</i>	G	
LITHOBID ORAL TABLET EXTENDED RELEASE 300 MG (<i>lithium carbonate</i>)	NPB	
<i>loxapine succinate oral capsule 10 mg, 25 mg, 5 mg, 50 mg</i>	G	
NUPLAZID ORAL CAPSULE 34 MG (<i>pimavanserin tartrate</i>)	NPSP	PA; SP
NUPLAZID ORAL TABLET 10 MG (<i>pimavanserin tartrate</i>)	NPSP	PA; SP
<i>olanzapine intramuscular solution reconstituted 10 mg</i>	G	
<i>olanzapine oral tablet 10 mg, 15 mg, 2.5 mg, 20 mg, 5 mg, 7.5 mg</i>	G	
<i>olanzapine oral tablet dispersible 10 mg, 15 mg, 20 mg, 5 mg</i>	G	
<i>paliperidone er oral tablet extended release 24 hour 1.5 mg, 3 mg, 6 mg, 9 mg</i>	G	
<i>perphenazine oral tablet 16 mg, 2 mg, 4 mg, 8 mg</i>	G	
PERSERIS SUBCUTANEOUS PREFILLED SYRINGE 120 MG, 90 MG (<i>risperidone</i>)	NPB	
<i>prochlorperazine edisylate injection solution 10 mg/2ml, 50 mg/10ml</i>	G	
<i>prochlorperazine maleate oral tablet 10 mg, 5 mg</i>	G	
<i>prochlorperazine rectal suppository 25 mg</i>	G	
<i>quetiapine fumarate er oral tablet extended release 24 hour 150 mg, 200 mg, 300 mg, 400 mg, 50 mg</i>	G	

2020 Pharmacy Drug Guide - Premier Plus

The formulary is updated the first week of each month.

12/01/2020

Prescription Drug Name	Drug Tier	Coverage Requirements and Limits
quetiapine fumarate oral tablet 100 mg, 200 mg, 25 mg, 300 mg, 400 mg, 50 mg	G	
REXULTI ORAL TABLET 0.25 MG, 0.5 MG, 1 MG, 2 MG, 3 MG, 4 MG (<i>brexpiprazole</i>)	NPB	
RISPERDAL CONSTA INTRAMUSCULAR SUSPENSION RECONSTITUTED ER 12.5 MG, 25 MG, 37.5 MG, 50 MG (<i>risperidone microspheres</i>)	PB	#
RISPERDAL ORAL SOLUTION 1 MG/ML (<i>risperidone</i>)	NPB	
RISPERDAL ORAL TABLET 0.5 MG, 1 MG, 2 MG, 3 MG, 4 MG (<i>risperidone</i>)	NPB	
<i>risperidone oral solution 1 mg/ml</i>	G	
<i>risperidone oral tablet 0.25 mg, 0.5 mg, 1 mg, 2 mg, 3 mg, 4 mg</i>	G	
<i>risperidone oral tablet dispersible 0.25 mg, 0.5 mg, 1 mg, 2 mg, 3 mg, 4 mg</i>	G	
SAPHRIS SUBLINGUAL TABLET SUBLINGUAL 10 MG, 2.5 MG, 5 MG (<i>asenapine maleate</i>)	NPB	#
SECUADO TRANSDERMAL PATCH 24 HOUR 3.8 MG/24HR, 5.7 MG/24HR, 7.6 MG/24HR (<i>asenapine</i>)	NPB	
SEROQUEL ORAL TABLET 100 MG, 200 MG, 25 MG, 300 MG, 400 MG, 50 MG (<i>quetiapine fumarate</i>)	NPB	
SEROQUEL XR ORAL TABLET EXTENDED RELEASE 24 HOUR 150 MG, 200 MG, 300 MG, 400 MG, 50 MG (<i>quetiapine fumarate</i>)	NPB	
<i>thioridazine hcl oral tablet 10 mg, 100 mg, 25 mg, 50 mg</i>	G	
<i>thiothixene oral capsule 1 mg, 10 mg, 2 mg, 5 mg</i>	G	
<i>trifluoperazine hcl oral tablet 1 mg, 10 mg, 2 mg, 5 mg</i>	G	
VERSACLOZ ORAL SUSPENSION 50 MG/ML (<i>clozapine</i>)	NPB	
VRAYLAR ORAL CAPSULE 1.5 MG, 3 MG, 4.5 MG, 6 MG (<i>cariprazine hcl</i>)	PB	
VRAYLAR ORAL CAPSULE THERAPY PACK 1.5 & 3 MG (<i>cariprazine hcl</i>)	PB	
<i>ziprasidone hcl oral capsule 20 mg, 40 mg, 60 mg, 80 mg</i>	G	
<i>ziprasidone mesylate intramuscular solution reconstituted 20 mg</i>	G	
ZYPREXA INTRAMUSCULAR SOLUTION RECONSTITUTED 10 MG (<i>olanzapine</i>)	NPB	
ZYPREXA ORAL TABLET 10 MG, 15 MG, 2.5 MG, 20 MG, 5 MG, 7.5 MG (<i>olanzapine</i>)	NPB	

2020 Pharmacy Drug Guide - Premier Plus

The formulary is updated the first week of each month.

12/01/2020

Prescription Drug Name	Drug Tier	Coverage Requirements and Limits
ZYPREXA RELPREVV INTRAMUSCULAR SUSPENSION RECONSTITUTED 210 MG, 300 MG, 405 MG (<i>olanzapine pamoate</i>)	NPB	
ZYPREXA ZYDIS ORAL TABLET DISPERSIBLE 10 MG, 15 MG, 20 MG, 5 MG (<i>olanzapine</i>)	NPB	
ANTISEPTICS & DISINFECTANTS - ANTISEPTICS AND DISINFECTANTS		
KERR TRIPLE DYE SWABS EXTERNAL SWAB (<i>triple dye</i>)	NPB	
ANTIVIRALS - DRUGS FOR INFECTIONS		
<i>abacavir sulfate oral solution 20 mg/ml</i>	G	
<i>abacavir sulfate oral tablet 300 mg</i>	G	
<i>abacavir sulfate-lamivudine oral tablet 600-300 mg</i>	G	
<i>abacavir-lamivudine-zidovudine oral tablet 300-150-300 mg</i>	G	
<i>acyclovir oral capsule 200 mg</i>	G	
<i>acyclovir oral suspension 200 mg/5ml</i>	G	
<i>acyclovir oral tablet 400 mg, 800 mg</i>	G	
<i>adefovir dipivoxil oral tablet 10 mg</i>	G	SP
APTIVUS ORAL CAPSULE 250 MG (<i>tipranavir</i>)	PB	#
APTIVUS ORAL SOLUTION 100 MG/ML (<i>tipranavir</i>)	PB	#
<i>atazanavir sulfate oral capsule 150 mg, 200 mg, 300 mg</i>	G	
ATRIPLA ORAL TABLET 600-200-300 MG (<i>efavirenz-emtricitab-tenofovir</i>)	PB	#
BARACLUDE ORAL SOLUTION 0.05 MG/ML (<i>entecavir</i>)	NPSP	SP
BARACLUDE ORAL TABLET 0.5 MG, 1 MG (<i>entecavir</i>)	NPSP	SP
BIKTARVY ORAL TABLET 50-200-25 MG (<i>bictegravir-emtricitab-tenofov</i>)	PB	
<i>cidofovir intravenous solution 75 mg/ml</i>	PSP	SP
CIMDUO ORAL TABLET 300-300 MG (<i>lamivudine-tenofovir</i>)	NPB	
COMBIVIR ORAL TABLET 150-300 MG (<i>lamivudine-zidovudine</i>)	NPB	
COMPLERA ORAL TABLET 200-25-300 MG (<i>emtricitabrilpivir-tenofovir</i>)	PB	
CRIXIVAN ORAL CAPSULE 200 MG, 400 MG (<i>indinavir sulfate</i>)	NPB	#

2020 Pharmacy Drug Guide - Premier Plus

The formulary is updated the first week of each month.

12/01/2020

Prescription Drug Name	Drug Tier	Coverage Requirements and Limits
DELSTRIGO ORAL TABLET 100-300-300 MG (<i>doravirin-lamivudin-tenofovir df</i>)	NPB	
DESCOVY ORAL TABLET 200-25 MG (<i>emtricitabine-tenofovir af</i>)	NPB	
<i>didanosine oral capsule delayed release 200 mg, 250 mg, 400 mg</i>	G	
DOVATO ORAL TABLET 50-300 MG (<i>dolutegravir-lamivudine</i>)	PB	
EDURANT ORAL TABLET 25 MG (<i>rilpivirine hcl</i>)	NPB	UF9 (PB)
<i>efavirenz oral capsule 200 mg, 50 mg</i>	G	
<i>efavirenz oral tablet 600 mg</i>	G	
<i>efavirenz-emtricitab-tenofovir oral tablet 600-200-300 mg</i>	G	
<i>efavirenz-lamivudine-tenofovir oral tablet 400-300-300 mg, 600-300-300 mg</i>	G	
<i>emtricitabine oral capsule 200 mg</i>	G	
<i>emtricitabine-tenofovir df oral tablet 200-300 mg</i>	G	
EMTRIVA ORAL CAPSULE 200 MG (<i>emtricitabine</i>)	PB	#
EMTRIVA ORAL SOLUTION 10 MG/ML (<i>emtricitabine</i>)	PB	#
<i>entecavir oral tablet 0.5 mg, 1 mg</i>	G	SP
EPCLUSA ORAL TABLET 400-100 MG (<i>sofosbuvir-velpatasvir</i>)	PSP	PA; IBC (Preferred for all genotypes); NPL; SP
EPIVIR HBV ORAL SOLUTION 5 MG/ML (<i>lamivudine</i>)	PB	#
EPIVIR HBV ORAL TABLET 100 MG (<i>lamivudine</i>)	NPB	
EPIVIR ORAL SOLUTION 10 MG/ML (<i>lamivudine</i>)	NPB	
EPIVIR ORAL TABLET 150 MG, 300 MG (<i>lamivudine</i>)	NPB	
EPZICOM ORAL TABLET 600-300 MG (<i>abacavir sulfate-lamivudine</i>)	NPB	
EVOTAZ ORAL TABLET 300-150 MG (<i>atazanavir-cobicistat</i>)	NPB	UF9 (PB)
<i>famciclovir oral tablet 125 mg, 250 mg, 500 mg</i>	G	
<i>favipiravir oral tablet 200 mg</i>	NPB	
<i>fosamprenavir calcium oral tablet 700 mg</i>	G	
FUZEON SUBCUTANEOUS SOLUTION RECONSTITUTED 90 MG (<i>enfuvirtide</i>)	NPSP	PA; #; SP
<i>ganciclovir sodium intravenous solution reconstituted 500 mg</i>	PSP	SP
GENVOYA ORAL TABLET 150-150-200-10 MG (<i>elviteg-cobic-emtricit-tenoaf</i>)	NPB	

2020 Pharmacy Drug Guide - Premier Plus

The formulary is updated the first week of each month.

12/01/2020

Prescription Drug Name	Drug Tier	Coverage Requirements and Limits
HARVONI ORAL PACKET 33.75-150 MG, 45-200 MG (<i>ledipasvir-sofosbuvir</i>)	PSP	PA; NPL; SP
HARVONI ORAL TABLET 45-200 MG, 90-400 MG (<i>ledipasvir-sofosbuvir</i>)	PSP	PA; IBC (Preferred for genotypes 1,4,5,6); NPL; SP
HEPSERA ORAL TABLET 10 MG (<i>adefovir dipivoxil</i>)	NPSP	SP
INTELENCE ORAL TABLET 100 MG, 200 MG, 25 MG (<i>etravirine</i>)	NPB	#
INVIRASE ORAL TABLET 500 MG (<i>saquinavir mesylate</i>)	NPB	
ISENTRESS HD ORAL TABLET 600 MG (<i>raltegravir potassium</i>)	PB	
ISENTRESS ORAL PACKET 100 MG (<i>raltegravir potassium</i>)	PB	
ISENTRESS ORAL TABLET 400 MG (<i>raltegravir potassium</i>)	PB	
ISENTRESS ORAL TABLET CHEWABLE 100 MG, 25 MG (<i>raltegravir potassium</i>)	PB	
JULUCA ORAL TABLET 50-25 MG (<i>dolutegravir-rilpivirine</i>)	NPB	
KALETRA ORAL SOLUTION 400-100 MG/5ML (<i>lopinavir-ritonavir</i>)	NPB	
KALETRA ORAL TABLET 100-25 MG, 200-50 MG (<i>lopinavir-ritonavir</i>)	PB	#
<i>lamivudine oral solution 10 mg/ml</i>	G	
<i>lamivudine oral tablet 100 mg, 150 mg, 300 mg</i>	G	
<i>lamivudine-zidovudine oral tablet 150-300 mg</i>	G	
<i>ledipasvir-sofosbuvir oral tablet 90-400 mg</i>	PSP	PA; NPL; SP
LEXIVA ORAL SUSPENSION 50 MG/ML (<i>fosamprenavir calcium</i>)	PB	#
LEXIVA ORAL TABLET 700 MG (<i>fosamprenavir calcium</i>)	NPB	
<i>lopinavir-ritonavir oral solution 400-100 mg/5ml</i>	G	
MAVYRET ORAL TABLET 100-40 MG (<i>glecaprevir-pibrentasvir</i>)	NPSP	PA; NPL; SP
<i>nevirapine er oral tablet extended release 24 hour 100 mg, 400 mg</i>	G	
<i>nevirapine oral tablet 200 mg</i>	G	
NORVIR ORAL PACKET 100 MG (<i>ritonavir</i>)	PB	
NORVIR ORAL SOLUTION 80 MG/ML (<i>ritonavir</i>)	PB	#

2020 Pharmacy Drug Guide - Premier Plus

The formulary is updated the first week of each month.

12/01/2020

Prescription Drug Name	Drug Tier	Coverage Requirements and Limits
NORVIR ORAL TABLET 100 MG (<i>ritonavir</i>)	NPB	
ODEFSEY ORAL TABLET 200-25-25 MG (<i>emtricitabrilopivir-tenofovir af</i>)	NPB	
<i>oseltamivir phosphate oral capsule 30 mg, 45 mg, 75 mg</i>	G	
<i>oseltamivir phosphate oral suspension reconstituted 6 mg/ml</i>	G	
PEGASYS SUBCUTANEOUS SOLUTION 180 MCG/0.5ML, 180 MCG/ML (<i>peginterferon alfa-2a</i>)	PSP	PA; SP
PIFELTRO ORAL TABLET 100 MG (<i>doravirine</i>)	NPB	
PREVYMIS ORAL TABLET 240 MG, 480 MG (<i>letermovir</i>)	NPSP	SP
PREZCOBIX ORAL TABLET 800-150 MG (<i>darunavircobicistat</i>)	PB	
PREZISTA ORAL SUSPENSION 100 MG/ML (<i>darunavir ethanolate</i>)	PB	
PREZISTA ORAL TABLET 150 MG, 600 MG, 75 MG, 800 MG (<i>darunavir ethanolate</i>)	PB	
RELENZA DISKHALER INHALATION AEROSOL POWDER BREATH ACTIVATED 5 MG/BLISTER (<i>zanamivir</i>)	NPB	
RETROVIR ORAL CAPSULE 100 MG (<i>zidovudine</i>)	NPB	
RETROVIR ORAL SYRUP 50 MG/5ML (<i>zidovudine</i>)	NPB	
REYATAZ ORAL CAPSULE 150 MG, 200 MG, 300 MG (<i>atazanavir sulfate</i>)	NPB	
REYATAZ ORAL PACKET 50 MG (<i>atazanavir sulfate</i>)	PB	#
<i>ribavirin oral capsule 200 mg</i>	G	SP
<i>ribavirin oral tablet 200 mg</i>	G	SP
<i>rimantadine hcl oral tablet 100 mg</i>	G	
<i>ritonavir oral tablet 100 mg</i>	G	
<i>rukobia oral tablet extended release 12 hour 600 mg</i>	NPB	
SELZENTRY ORAL SOLUTION 20 MG/ML (<i>maraviroc</i>)	NPB	
SELZENTRY ORAL TABLET 150 MG, 25 MG, 300 MG, 75 MG (<i>maraviroc</i>)	NPB	#
<i>sofosbuvir-velpatasvir oral tablet 400-100 mg</i>	PSP	PA; NPL; SP
SOVALDI ORAL PACKET 150 MG, 200 MG (<i>sofosbuvir</i>)	NPSP	PA; NPL; SP
SOVALDI ORAL TABLET 200 MG, 400 MG (<i>sofosbuvir</i>)	NPSP	PA; NPL; SP
<i>stavudine oral capsule 15 mg, 20 mg, 30 mg, 40 mg</i>	G	

Prescription Drug Name	Drug Tier	Coverage Requirements and Limits
STRIBILD ORAL TABLET 150-150-200-300 MG (<i>elviteg-cobic-emtricit-tenofovir</i>)	NPB	
SUSTIVA ORAL CAPSULE 200 MG, 50 MG (<i>efavirenz</i>)	NPB	
SUSTIVA ORAL TABLET 600 MG (<i>efavirenz</i>)	NPB	
SYMFI LO ORAL TABLET 400-300-300 MG (<i>efavirenz-lamivudine-tenofovir</i>)	NPB	#
SYMFI ORAL TABLET 600-300-300 MG (<i>efavirenz-lamivudine-tenofovir</i>)	NPB	#
SYMTUZA ORAL TABLET 800-150-200-10 MG (<i>darun-cobic-emtricit-tenofovir</i>)	PB	
TAMIFLU ORAL CAPSULE 30 MG, 45 MG, 75 MG (<i>oseltamivir phosphate</i>)	NPB	
TAMIFLU ORAL SUSPENSION RECONSTITUTED 6 MG/ML (<i>oseltamivir phosphate</i>)	NPB	
TEMIXYS ORAL TABLET 300-300 MG (<i>lamivudine-tenofovir</i>)	NPB	
<i>tenofovir disoproxil fumarate oral tablet 300 mg</i>	G	
TIVICAY ORAL TABLET 10 MG, 25 MG, 50 MG (<i>dolutegravir sodium</i>)	PB	
TIVICAY PD ORAL TABLET SOLUBLE 5 MG (<i>dolutegravir sodium</i>)	PB	
TRIUMEQ ORAL TABLET 600-50-300 MG (<i>abacavir-dolutegravir-lamivudine</i>)	PB	
TRIZIVIR ORAL TABLET 300-150-300 MG (<i>abacavir-lamivudine-zidovudine</i>)	NPB	
TRUVADA ORAL TABLET 100-150 MG, 133-200 MG, 167-250 MG, 200-300 MG (<i>emtricitabine-tenofovir df</i>)	PB	#
TYBOST ORAL TABLET 150 MG (<i>cobicistat</i>)	NPB	UF9 (PB)
<i>valacyclovir hcl oral tablet 1 gm, 500 mg</i>	G	
VALCYTE ORAL SOLUTION RECONSTITUTED 50 MG/ML (<i>valganciclovir hcl</i>)	NPSP	PA; SP
VALCYTE ORAL TABLET 450 MG (<i>valganciclovir hcl</i>)	NPSP	PA; SP
<i>valganciclovir hcl oral solution reconstituted 50 mg/ml</i>	G	PA
<i>valganciclovir hcl oral tablet 450 mg</i>	G	PA; SP
VALTREX ORAL TABLET 1 GM, 500 MG (<i>valacyclovir hcl</i>)	NPB	

Prescription Drug Name	Drug Tier	Coverage Requirements and Limits
VEMLIDY ORAL TABLET 25 MG (<i>tenofovir alafenamide fumarate</i>)	NPSP	PA; SP
VIEKIRA PAK ORAL TABLET THERAPY PACK 12.5-75-50 &250 MG (<i>ombitas-paritapre-ritona-dasab</i>)	NPSP	PA; NPL; SP
VIRACEPT ORAL TABLET 250 MG, 625 MG (<i>nelfinavir mesylate</i>)	NPB	
VIRAMUNE ORAL SUSPENSION 50 MG/5ML (<i>nevirapine</i>)	NPB	
VIRAMUNE XR ORAL TABLET EXTENDED RELEASE 24 HOUR 400 MG (<i>nevirapine</i>)	NPB	
VIREAD ORAL POWDER 40 MG/GM (<i>tenofovir disoproxil fumarate</i>)	PB	#
VIREAD ORAL TABLET 150 MG, 200 MG, 250 MG (<i>tenofovir disoproxil fumarate</i>)	PB	#
VIREAD ORAL TABLET 300 MG (<i>tenofovir disoproxil fumarate</i>)	NPB	
VOSEVI ORAL TABLET 400-100-100 MG (<i>sofosbuv-velpatasv-voxilaprev</i>)	PSP	PA; IBC (Preferred for all genotypes); NPL; SP
XOFLUZA (40 MG DOSE) ORAL TABLET THERAPY PACK 2 X 20 MG (<i>baloxavir marboxil</i>)	NPB	
XOFLUZA (80 MG DOSE) ORAL TABLET THERAPY PACK 2 X 40 MG (<i>baloxavir marboxil</i>)	NPB	
ZEPATIER ORAL TABLET 50-100 MG (<i>elbasvir-grazoprevir</i>)	NPSP	PA; NPL; SP
ZERIT ORAL CAPSULE 30 MG, 40 MG (<i>stavudine</i>)	NPB	
ZIAGEN ORAL SOLUTION 20 MG/ML (<i>abacavir sulfate</i>)	NPB	
ZIAGEN ORAL TABLET 300 MG (<i>abacavir sulfate</i>)	NPB	
<i>zidovudine oral capsule 100 mg</i>	G	
<i>zidovudine oral syrup 50 mg/5ml</i>	G	
<i>zidovudine oral tablet 300 mg</i>	G	
ZOVIRAX ORAL SUSPENSION 200 MG/5ML (<i>acyclovir</i>)	NPB	
BETA BLOCKERS - DRUGS FOR THE HEART		
<i>acebutolol hcl oral capsule 200 mg, 400 mg</i>	G	
<i>atenolol oral tablet 100 mg, 25 mg, 50 mg</i>	G	LGC
BETAPACE AF ORAL TABLET 120 MG, 160 MG, 80 MG (<i>sotalol hcl af</i>)	NPB	

Prescription Drug Name	Drug Tier	Coverage Requirements and Limits
BETAPACE ORAL TABLET 120 MG, 160 MG, 80 MG (<i>sotalol hcl</i>)	NPB	
<i>betaxolol hcl oral tablet 10 mg, 20 mg</i>	G	
<i>bisoprolol fumarate oral tablet 10 mg, 5 mg</i>	G	
BYSTOLIC ORAL TABLET 10 MG, 2.5 MG, 20 MG, 5 MG (<i>nebivolol hcl</i>)	PB	#
<i>carvedilol oral tablet 12.5 mg, 25 mg, 3.125 mg, 6.25 mg</i>	G	LGC
<i>carvedilol phosphate er oral capsule extended release 24 hour 10 mg, 20 mg, 40 mg, 80 mg</i>	G	
COREG CR ORAL CAPSULE EXTENDED RELEASE 24 HOUR 10 MG, 20 MG, 40 MG, 80 MG (<i>carvedilol phosphate</i>)	NPB	
COREG ORAL TABLET 12.5 MG, 25 MG, 3.125 MG, 6.25 MG (<i>carvedilol</i>)	NPB	
CORGARD ORAL TABLET 20 MG, 40 MG, 80 MG (<i>nadolol</i>)	NPB	
HEMANGEOL ORAL SOLUTION 4.28 MG/ML (<i>propranolol hcl</i>)	NPB	
INDERAL LA ORAL CAPSULE EXTENDED RELEASE 24 HOUR 120 MG, 160 MG, 60 MG, 80 MG (<i>propranolol hcl</i>)	NPB	
INDERAL XL ORAL CAPSULE EXTENDED RELEASE 24 HOUR 120 MG, 80 MG (<i>propranolol hcl sr beads</i>)	NPB	
INNOPRAN XL ORAL CAPSULE EXTENDED RELEASE 24 HOUR 120 MG, 80 MG (<i>propranolol hcl sr beads</i>)	NPB	#
KAPSPARGO SPRINKLE ORAL CAPSULE ER 24 HOUR SPRINKLE 100 MG, 200 MG, 25 MG, 50 MG (<i>metoprolol succinate</i>)	NPB	
<i>labetalol hcl oral tablet 100 mg, 200 mg, 300 mg</i>	G	
LOPRESSOR ORAL TABLET 100 MG, 50 MG (<i>metoprolol tartrate</i>)	NPB	
<i>metoprolol succinate er oral tablet extended release 24 hour 100 mg, 200 mg, 25 mg, 50 mg</i>	G	
<i>metoprolol tartrate oral tablet 100 mg, 25 mg, 50 mg</i>	G	LGC
<i>metoprolol tartrate oral tablet 37.5 mg, 75 mg</i>	G	
<i>nadolol oral tablet 20 mg, 40 mg, 80 mg</i>	G	
<i>pindolol oral tablet 10 mg, 5 mg</i>	G	

2020 Pharmacy Drug Guide - Premier Plus

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12/01/2020

Prescription Drug Name	Drug Tier	Coverage Requirements and Limits
<i>propranolol hcl er oral capsule extended release 24 hour 120 mg, 160 mg, 60 mg, 80 mg</i>	G	
<i>propranolol hcl oral solution 20 mg/5ml, 40 mg/5ml</i>	G	
<i>propranolol hcl oral tablet 10 mg, 20 mg, 40 mg, 80 mg</i>	G	LGC
<i>propranolol hcl oral tablet 60 mg</i>	G	
<i>sotalol hcl (Sorine Oral Tablet 120 Mg, 160 Mg, 240 Mg, 80 Mg)</i>	G	
<i>sotalol hcl (af) oral tablet 120 mg</i>	G	LGC
<i>sotalol hcl (af) oral tablet 160 mg, 80 mg</i>	G	
<i>sotalol hcl oral tablet 120 mg, 80 mg</i>	G	LGC
<i>sotalol hcl oral tablet 160 mg, 240 mg</i>	G	
SOTYLIZE ORAL SOLUTION 5 MG/ML (<i>sotalol hcl</i>)	NPB	
TENORMIN ORAL TABLET 100 MG, 25 MG, 50 MG (<i>atenolol</i>)	NPB	
<i>timolol maleate oral tablet 10 mg, 20 mg, 5 mg</i>	G	
TOPROL XL ORAL TABLET EXTENDED RELEASE 24 HOUR 100 MG, 200 MG, 25 MG, 50 MG (<i>metoprolol succinate</i>)	NPB	
CALCIUM CHANNEL BLOCKERS - DRUGS FOR THE HEART		
<i>nifedipine (Afeditab Cr Oral Tablet Extended Release 24 Hour 30 Mg, 60 Mg)</i>	G	
<i>amlodipine besylate oral tablet 10 mg, 2.5 mg, 5 mg</i>	G	LGC
CALAN SR ORAL TABLET EXTENDED RELEASE 120 MG, 180 MG, 240 MG (<i>verapamil hcl</i>)	NPB	
CARDIZEM CD ORAL CAPSULE EXTENDED RELEASE 24 HOUR 120 MG, 180 MG, 240 MG, 360 MG (<i>diltiazem hcl coated beads</i>)	NPB	
CARDIZEM LA ORAL TABLET EXTENDED RELEASE 24 HOUR 120 MG, 180 MG, 240 MG, 300 MG, 360 MG, 420 MG (<i>diltiazem hcl coated beads</i>)	NPB	
CARDIZEM ORAL TABLET 120 MG, 30 MG, 60 MG (<i>diltiazem hcl</i>)	NPB	
<i>diltiazem hcl coated beads (Cartia Xt Oral Capsule Extended Release 24 Hour 120 Mg, 180 Mg, 240 Mg, 300 Mg)</i>	G	
CONJUPRI ORAL TABLET 2.5 MG, 5 MG (<i>levamlodipine maleate</i>)	NPB	

2020 Pharmacy Drug Guide - Premier Plus

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12/01/2020

Prescription Drug Name	Drug Tier	Coverage Requirements and Limits
CONSENSI ORAL TABLET 10-200 MG, 2.5-200 MG, 5-200 MG (<i>amlodipine besylate-celecoxib</i>)	NPB	
<i>diltiazem hcl er beads oral capsule extended release 24 hour 120 mg, 180 mg, 240 mg, 300 mg, 360 mg, 420 mg</i>	G	
<i>diltiazem hcl er coated beads oral capsule extended release 24 hour 120 mg, 180 mg, 240 mg, 300 mg, 360 mg</i>	G	
<i>diltiazem hcl er coated beads oral tablet extended release 24 hour 180 mg, 240 mg, 300 mg, 360 mg, 420 mg</i>	G	
<i>diltiazem hcl er oral capsule extended release 12 hour 120 mg, 60 mg, 90 mg</i>	G	
<i>diltiazem hcl er oral capsule extended release 24 hour 120 mg</i>	G	
<i>diltiazem hcl oral tablet 120 mg, 30 mg, 60 mg, 90 mg</i>	G	LGC
<i>dilt-xr oral capsule extended release 24 hour 120 mg, 180 mg, 240 mg</i>	G	
<i>felodipine er oral tablet extended release 24 hour 10 mg, 2.5 mg, 5 mg</i>	G	
<i>isradipine oral capsule 2.5 mg, 5 mg</i>	G	
KATERZIA ORAL SUSPENSION 1 MG/ML (<i>amlodipine benzoate</i>)	NPB	
<i>diltiazem hcl coated beads (Matzim La Oral Tablet Extended Release 24 Hour 180 Mg, 240 Mg, 300 Mg, 360 Mg, 420 Mg)</i>	G	
<i>nicardipine hcl oral capsule 20 mg, 30 mg</i>	G	
<i>nifedipine er oral tablet extended release 24 hour 30 mg, 60 mg, 90 mg</i>	G	
<i>nifedipine er osmotic release oral tablet extended release 24 hour 30 mg, 60 mg, 90 mg</i>	G	
<i>nifedipine oral capsule 10 mg, 20 mg</i>	G	
<i>nimodipine oral capsule 30 mg</i>	G	
<i>nisoldipine er oral tablet extended release 24 hour 17 mg, 34 mg, 8.5 mg</i>	G	
NORVASC ORAL TABLET 10 MG, 2.5 MG, 5 MG (<i>amlodipine besylate</i>)	NPB	
NYMALIZE ORAL SOLUTION 6 MG/ML (<i>nimodipine</i>)	NPB	
PROCARDIA ORAL CAPSULE 10 MG (<i>nifedipine</i>)	NPB	
PROCARDIA XL ORAL TABLET EXTENDED RELEASE 24 HOUR 30 MG, 60 MG, 90 MG (<i>nifedipine</i>)	NPB	

2020 Pharmacy Drug Guide - Premier Plus

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12/01/2020

Prescription Drug Name	Drug Tier	Coverage Requirements and Limits
SULAR ORAL TABLET EXTENDED RELEASE 24 HOUR 17 MG, 34 MG, 8.5 MG (<i>nisoldipine</i>)	NPB	
<i>diltiazem hcl er beads</i> (Taztia Xt Oral Capsule Extended Release 24 Hour 120 Mg, 180 Mg, 240 Mg, 300 Mg, 360 Mg)	G	
TIAZAC ORAL CAPSULE EXTENDED RELEASE 24 HOUR 120 MG, 180 MG, 240 MG, 300 MG, 360 MG, 420 MG (<i>diltiazem hcl er beads</i>)	NPB	
<i>verapamil hcl er oral capsule extended release 24 hour 100 mg, 120 mg, 180 mg, 200 mg, 240 mg, 300 mg, 360 mg</i>	G	
<i>verapamil hcl er oral tablet extended release 120 mg</i>	G	LGC
<i>verapamil hcl er oral tablet extended release 180 mg, 240 mg</i>	G	
<i>verapamil hcl oral tablet 120 mg, 40 mg, 80 mg</i>	G	LGC
VERELAN ORAL CAPSULE EXTENDED RELEASE 24 HOUR 120 MG, 180 MG, 240 MG, 360 MG (<i>verapamil hcl</i>)	NPB	
VERELAN PM ORAL CAPSULE EXTENDED RELEASE 24 HOUR 100 MG, 200 MG, 300 MG (<i>verapamil hcl</i>)	NPB	
CARDIOTONICS - DRUGS FOR THE HEART		
<i>digoxin</i> (Digitek Oral Tablet 125 Mcg, 250 Mcg)	G	
<i>digoxin</i> (Digox Oral Tablet 125 Mcg, 250 Mcg)	G	
<i>digoxin oral tablet 125 mcg, 250 mcg</i>	G	
LANOXIN ORAL TABLET 125 MCG, 250 MCG, 62.5 MCG (<i>digoxin</i>)	NPB	
CARDIOVASCULAR AGENTS - MISC. - DRUGS FOR THE HEART		
ADCIRCA ORAL TABLET 20 MG (<i>tadalafil (pah)</i>)	NPSP	PA; NPL; SP
ADEMPAS ORAL TABLET 0.5 MG, 1 MG, 1.5 MG, 2 MG, 2.5 MG (<i>riociguat</i>)	NPSP	PA; NPL; SP; UF9 (PSP)
<i>tadalafil (pah)</i> (Alyq Oral Tablet 20 Mg)	PSP	PA; NPL; SP
<i>ambrisentan oral tablet 10 mg, 5 mg</i>	PSP	PA; NPL; SP
<i>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</i>	G	LGC
BIDIL ORAL TABLET 20-37.5 MG (<i>isosorb dinitrate-hydralazine</i>)	NPB	#
<i>bosentan oral tablet 125 mg, 62.5 mg</i>	PSP	PA; NPL; SP
CORLANOR ORAL SOLUTION 5 MG/5ML (<i>ivabradine hcl</i>)	PB	

2020 Pharmacy Drug Guide - Premier Plus

The formulary is updated the first week of each month.

12/01/2020

Prescription Drug Name	Drug Tier	Coverage Requirements and Limits
CORLANOR ORAL TABLET 5 MG, 7.5 MG (<i>ivabradine hcl</i>)	PB	
ENTRESTO ORAL TABLET 24-26 MG, 49-51 MG, 97-103 MG (<i>sacubitril-valsartan</i>)	PB	
<i>epoprostenol sodium intravenous solution reconstituted 0.5 mg, 1.5 mg</i>	G	PA; NPL; SP
FLOLAN INTRAVENOUS SOLUTION RECONSTITUTED 0.5 MG, 1.5 MG (<i>epoprostenol sodium</i>)	NPSP	PA; NPL; SP
LETAIRIS ORAL TABLET 10 MG, 5 MG (<i>ambrisentan</i>)	NPSP	PA; NPL; SP
OPSUMIT ORAL TABLET 10 MG (<i>macitentan</i>)	PSP	PA; NPL; SP
ORENITRAM ORAL TABLET EXTENDED RELEASE 0.125 MG, 0.25 MG, 1 MG, 2.5 MG, 5 MG (<i>treprostинil diolamine</i>)	NPSP	PA; NPL; SP
REVATIO INTRAVENOUS SOLUTION 10 MG/12.5ML (<i>sildenafil citrate</i>)	NPSP	PA; NPL; SP
REVATIO ORAL SUSPENSION RECONSTITUTED 10 MG/ML (<i>sildenafil citrate</i>)	NPSP	PA; NPL; SP
REVATIO ORAL TABLET 20 MG (<i>sildenafil citrate</i>)	NPSP	PA; NPL; SP
<i>sildenafil citrate oral tablet 20 mg</i>	G	PA; NPL; SP
<i>tadalafil (pah) oral tablet 20 mg</i>	PSP	PA; NPL; SP
<i>tadalafil oral tablet 2.5 mg, 5 mg</i>	G	
TRACLEER ORAL TABLET 125 MG, 62.5 MG (<i>bosentan</i>)	NPSP	PA; NPL; SP
TRACLEER ORAL TABLET SOLUBLE 32 MG (<i>bosentan</i>)	PSP	PA; NPL; SP
<i>treprostинil injection solution 100 mg/20ml, 20 mg/20ml, 200 mg/20ml, 50 mg/20ml</i>	PSP	PA; NPL; SP
TYVASO INHALATION SOLUTION 0.6 MG/ML (<i>treprostинil</i>)	NPSP	PA; NPL; SP
TYVASO REFILL INHALATION SOLUTION 0.6 MG/ML (<i>treprostинil</i>)	NPSP	PA; NPL; SP
TYVASO STARTER INHALATION SOLUTION 0.6 MG/ML (<i>treprostинil</i>)	NPSP	PA; NPL; SP
UPTRAVI ORAL TABLET 1000 MCG, 1200 MCG, 1400 MCG, 1600 MCG, 200 MCG, 400 MCG, 600 MCG, 800 MCG (<i>selexipag</i>)	NPSP	PA; NPL; SP
UPTRAVI ORAL TABLET THERAPY PACK 200 & 800 MCG (<i>selexipag</i>)	NPSP	PA; NPL; SP
VELETRI INTRAVENOUS SOLUTION RECONSTITUTED 0.5 MG (<i>epoprostenol sodium</i>)	NPSP	PA; NPL; #; SP

2020 Pharmacy Drug Guide - Premier Plus

The formulary is updated the first week of each month.

12/01/2020

Prescription Drug Name	Drug Tier	Coverage Requirements and Limits
VELETRI INTRAVENOUS SOLUTION RECONSTITUTED 1.5 MG (<i>epoprostenol sodium</i>)	NPSP	PA; NPL; SP
VENTAVIS INHALATION SOLUTION 10 MCG/ML, 20 MCG/ML (<i>iloprost</i>)	NPSP	PA; NPL; SP
VYNDAMAX ORAL CAPSULE 61 MG (<i>tafamidis</i>)	NPSP	PA; SP
VYNDAQEL ORAL CAPSULE 20 MG (<i>tafamidis meglumine (cardiac)</i>)	NPSP	PA; SP
CEPHALOSPORINS - DRUGS FOR INFECTIONS		
<i>cefaclor er oral tablet extended release 12 hour 500 mg</i>	G	
<i>cefaclor oral capsule 250 mg, 500 mg</i>	G	
<i>cefaclor oral suspension reconstituted 125 mg/5ml, 250 mg/5ml, 375 mg/5ml</i>	G	
<i>cefadroxil oral capsule 500 mg</i>	G	
<i>cefadroxil oral suspension reconstituted 250 mg/5ml, 500 mg/5ml</i>	G	
<i>cefadroxil oral tablet 1 gm</i>	G	
<i>cefdinir oral capsule 300 mg</i>	G	
<i>cefdinir oral suspension reconstituted 125 mg/5ml, 250 mg/5ml</i>	G	
<i>cefixime oral capsule 400 mg</i>	G	
<i>cefixime oral suspension reconstituted 100 mg/5ml, 200 mg/5ml</i>	G	
<i>cefpodoxime proxetil oral suspension reconstituted 100 mg/5ml, 50 mg/5ml</i>	G	
<i>cefpodoxime proxetil oral tablet 100 mg, 200 mg</i>	G	
<i>cefprozil oral suspension reconstituted 125 mg/5ml, 250 mg/5ml</i>	G	
<i>cefprozil oral tablet 250 mg, 500 mg</i>	G	
<i>cefuroxime axetil oral tablet 250 mg, 500 mg</i>	G	
<i>cephalexin oral capsule 250 mg, 500 mg, 750 mg</i>	G	
<i>cephalexin oral suspension reconstituted 125 mg/5ml, 250 mg/5ml</i>	G	
<i>cephalexin oral tablet 250 mg, 500 mg</i>	G	
KEFLEX ORAL CAPSULE 250 MG, 500 MG, 750 MG (<i>cephalexin</i>)	NPB	
SUPRAX ORAL CAPSULE 400 MG (<i>cefixime</i>)	NPB	
SUPRAX ORAL SUSPENSION RECONSTITUTED 100 MG/5ML, 200 MG/5ML, 500 MG/5ML (<i>cefixime</i>)	NPB	

Prescription Drug Name	Drug Tier	Coverage Requirements and Limits
SUPRAX ORAL TABLET CHEWABLE 100 MG, 200 MG (<i>cefixime</i>)	NPB	#
CHEMICALS		
<i>ethosuximide powder</i>	G	
<i>hydroxyzine hcl powder</i>	G	
CONTRACEPTIVES - DRUGS FOR WOMEN		
<i>levonorgestrel-ethinyl estrad (Afirmelle Oral Tablet 0.1-20 Mg-Mcg)</i>	CE	N2 (G)
<i>levonorgestrel-ethinyl estrad (Altavera Oral Tablet 0.15-30 Mg-Mcg)</i>	CE	N2 (G)
<i>alyacen 1/35 oral tablet 1-35 mg-mcg</i>	CE	N2 (G)
<i>alyacen 7/7/7 oral tablet 0.5/0.75/1-35 mg-mcg</i>	CE	N2 (G)
<i>levonorgest-eth estrad 91-day (Amethia Lo Oral Tablet 0.1-0.02 & 0.01 Mg)</i>	CE	N2 (G)
<i>levonorgest-eth estrad 91-day (Amethia Oral Tablet 0.15-0.03 &0.01 Mg)</i>	CE	N2 (G)
<i>ANNOVERA VAGINAL RING 0.013-0.15 MG/24HR (segesterone-ethinyl estradiol)</i>	CE	N2 (NPB); QL (1 ring per 365 days)
<i>desogestrel-ethinyl estradiol (Apri Oral Tablet 0.15-30 Mg-Mcg)</i>	CE	N2 (G)
<i>norethin-eth estrad triphasic (Aranelle Oral Tablet 0.5/1/0.5-35 Mg-Mcg)</i>	CE	N2 (G)
<i>levonorgestrel-ethinyl estrad (Aubra Eq Oral Tablet 0.1-20 Mg-Mcg)</i>	CE	N2 (G)
<i>levonorgestrel-ethinyl estrad (Aubra Oral Tablet 0.1-20 Mg-Mcg)</i>	CE	N2 (G)
<i>norethindrone acet-ethinyl est (Aurovela 1.5/30 Oral Tablet 1.5-30 Mg-Mcg)</i>	CE	N2 (G)
<i>norethindrone acet-ethinyl est (Aurovela 1/20 Oral Tablet 1-20 Mg-Mcg)</i>	CE	N2 (G)
<i>norethin ace-eth estrad-fe (Aurovela 24 Fe Oral Tablet 1-20 Mg-Mcg(24))</i>	CE	N2 (G)
<i>norethin ace-eth estrad-fe (Aurovela Fe 1/20 Oral Tablet 1-20 Mg-Mcg)</i>	CE	N2 (G)
<i>levonorgestrel-ethinyl estrad (Aviane Oral Tablet 0.1-20 Mg-Mcg)</i>	CE	N2 (G)
<i>levonorgestrel-ethinyl estrad (Ayuna Oral Tablet 0.15-30 Mg-Mcg)</i>	CE	N2 (G)

2020 Pharmacy Drug Guide - Premier Plus

The formulary is updated the first week of each month.

12/01/2020

104

Prescription Drug Name	Drug Tier	Coverage Requirements and Limits
<i>desogestrel-ethinyl estradiol</i> (Azurette Oral Tablet 0.15-0.02/0.01 Mg (21/5))	CE	N2 (G)
BALCOLTRA ORAL TABLET 0.1-20 MG-MCG(21) (<i>levonorgest-eth estrad-fe bisg</i>)	CE	N2 (NPB)
<i>norethindrone-eth estradiol</i> (Balziva Oral Tablet 0.4-35 Mg-Mcg)	CE	N2 (G)
BEYAZ ORAL TABLET 3-0.02-0.451 MG (<i>drospiren-eth estrad-levomefol</i>)	NPB	
<i>brielllyn oral tablet 0.4-35 mg-mcg</i>	CE	N2 (G)
<i>norethindrone</i> (Camila Oral Tablet 0.35 Mg)	CE	N2 (G)
<i>levonorgest-eth estrad 91-day</i> (Camrese Lo Oral Tablet 0.1-0.02 & 0.01 Mg)	CE	N2 (G)
<i>levonorgest-eth estrad 91-day</i> (Camrese Oral Tablet 0.15-0.03 &0.01 Mg)	CE	N2 (G)
<i>desogestrel-ethinyl estradiol</i> (Caziant Oral Tablet 0.1/0.125/0.15 -0.025 Mg)	CE	N2 (G)
<i>desogestrel-ethinyl estradiol</i> (Cesia Oral Tablet 0.1/0.125/0.15 -0.025 Mg)	CE	N2 (G)
<i>levonorgestrel-ethinyl estrad</i> (Chateal Eq Oral Tablet 0.15-30 Mg-Mcg)	CE	N2 (G)
<i>levonorgestrel-ethinyl estrad</i> (Chateal Oral Tablet 0.15-30 Mg-Mcg)	CE	N2 (G)
<i>norgestrel-ethinyl estradiol</i> (Cryselle-28 Oral Tablet 0.3-30 Mg-Mcg)	CE	N2 (G)
<i>norethindrone-eth estradiol</i> (Cyclafem 1/35 Oral Tablet 1-35 Mg-Mcg)	CE	N2 (G)
<i>norethin-eth estrad triphasic</i> (Cyclafem 7/7/7 Oral Tablet 0.5/0.75/1-35 Mg-Mcg)	CE	N2 (G)
<i>norethindrone-eth estradiol</i> (Dasetta 1/35 Oral Tablet 1-35 Mg-Mcg)	CE	N2 (G)
<i>norethin-eth estrad triphasic</i> (Dasetta 7/7/7 Oral Tablet 0.5/0.75/1-35 Mg-Mcg)	CE	N2 (G)
<i>levonorgest-eth estrad 91-day</i> (Daysee Oral Tablet 0.15-0.03 &0.01 Mg)	CE	N2 (G)
DEPO-PROVERA INTRAMUSCULAR SUSPENSION 150 MG/ML (<i>medroxyprogesterone acetate</i>)	NPB	QL (1 injection/75 days or 4 injections per 300 days)

Prescription Drug Name	Drug Tier	Coverage Requirements and Limits
DEPO-PROVERA INTRAMUSCULAR SUSPENSION PREFILLED SYRINGE 150 MG/ML (<i>medroxyprogesterone acetate</i>)	NPB	QL (1 injection/75 days or 4 injections per 300 days)
DEPO-SUBQ PROVERA 104 SUBCUTANEOUS SUSPENSION PREFILLED SYRINGE 104 MG/0.65ML (<i>medroxyprogesterone acetate</i>)	CE	#; N2 (NPB); QL (1 injection/75 days or 4 injections per 300 days)
<i>desogestrel-ethinyl estradiol oral tablet 0.15-0.02/0.01 mg (21/5)</i>	CE	N2 (G)
<i>drospirene-eth estrad-levomefol oral tablet 3-0.02-0.451 mg</i>	CE	N2 (G)
<i>drospirenone-ethinyl estradiol oral tablet 3-0.02 mg, 3-0.03 mg</i>	CE	N2 (G)
<i>norgestrel-ethinyl estradiol (Elinest Oral Tablet 0.3-30 Mg-Mcg)</i>	CE	N2 (G)
ELLA ORAL TABLET 30 MG (<i>ulipristal acetate</i>)	CE	#; N2 (NPB)
<i>etonogestrel-ethinyl estradiol (Eluryng Vaginal Ring 0.12-0.015 Mg/24Hr)</i>	CE	N2 (G)
<i>desogestrel-ethinyl estradiol (Emoquette Oral Tablet 0.15-30 Mg-Mcg)</i>	CE	N2 (G)
<i>levonorg-eth estrad triphasic (Enpresse-28 Oral Tablet 50-30/75-40/ 125-30 Mcg)</i>	CE	N2 (G)
<i>desogestrel-ethinyl estradiol (Enskyce Oral Tablet 0.15-30 Mg-Mcg)</i>	CE	N2 (G)
<i>norethindrone (Errin Oral Tablet 0.35 Mg)</i>	CE	N2 (G)
<i>norgestimate-eth estradiol (Estarylla Oral Tablet 0.25-35 Mg-Mcg)</i>	CE	N2 (G)
ESTROSTEP FE ORAL TABLET 1-20/1-30/1-35 MG-MCG (<i>norethindron-ethinyl estrad-fe</i>)	NPB	
<i>levonorgestrel-ethinyl estrad (Falmina Oral Tablet 0.1-20 Mg-Mcg)</i>	CE	N2 (G)
<i>levonorgest-eth estrad 91-day (Fayosim Oral Tablet 42-21-21-7 Days)</i>	CE	N2 (G)
GENERESS FE ORAL TABLET CHEWABLE 0.8-25 MG-MCG (<i>norethin-eth estradiol-fe</i>)	NPB	
<i>drospirenone-ethinyl estradiol (Gianvi Oral Tablet 3-0.02 Mg)</i>	CE	N2 (G)
<i>norethin ace-eth estrad-fe (Hailey 24 Fe Oral Tablet 1-20 Mg-Mcg(24))</i>	CE	N2 (G)
<i>norethindrone (Heather Oral Tablet 0.35 Mg)</i>	CE	N2 (G)
<i>levonorgest-eth estrad 91-day (Introvale Oral Tablet 0.15-0.03 Mg)</i>	CE	N2 (G)

2020 Pharmacy Drug Guide - Premier Plus

The formulary is updated the first week of each month.

12/01/2020

106

Prescription Drug Name	Drug Tier	Coverage Requirements and Limits
<i>desogestrel-ethinyl estradiol</i> (Isibloom Oral Tablet 0.15-30 Mg-Mcg)	CE	N2 (G)
<i>drosipренone-ethinyl estradiol</i> (Jasmiel Oral Tablet 3-0.02 Mg)	CE	N2 (G)
<i>norethindrone</i> (Jencycla Oral Tablet 0.35 Mg)	CE	N2 (G)
<i>levonorgestrel-eth estrad 91-day</i> (Jolessa Oral Tablet 0.15-0.03 Mg)	CE	N2 (G)
<i>norethindrone acet-ethinyl est</i> (Junel 1.5/30 Oral Tablet 1.5-30 Mg-Mcg)	CE	N2 (G)
<i>norethindrone acet-ethinyl est</i> (Junel 1/20 Oral Tablet 1-20 Mg-Mcg)	CE	N2 (G)
<i>norethin ace-eth estrad-fe</i> (Junel Fe 1.5/30 Oral Tablet 1.5-30 Mg-Mcg)	CE	N2 (G)
<i>norethin ace-eth estrad-fe</i> (Junel Fe 1/20 Oral Tablet 1-20 Mg-Mcg)	CE	N2 (G)
<i>desogestrel-ethinyl estradiol</i> (Kariva Oral Tablet 0.15-0.02/0.01 Mg (21/5))	CE	N2 (G)
<i>ethynodiol diac-eth estradiol</i> (Kelnor 1/35 Oral Tablet 1-35 Mg-Mcg)	CE	N2 (G)
<i>levonorgestrel-ethinyl estrad</i> (Kurvelo Oral Tablet 0.15-30 Mg-Mcg)	CE	N2 (G)
KYLEENA INTRAUTERINE INTRAUTERINE DEVICE 19.5 MG (<i>levonorgestrel</i>)	CE	N2 (NPB); QL (1 device per 300 days)
<i>norethindrone acet-ethinyl est</i> (Larin 1/20 Oral Tablet 1-20 Mg-Mcg)	CE	N2 (G)
<i>norethin ace-eth estrad-fe</i> (Larin Fe 1.5/30 Oral Tablet 1.5-30 Mg-Mcg)	CE	N2 (G)
<i>norethin ace-eth estrad-fe</i> (Larin Fe 1/20 Oral Tablet 1-20 Mg-Mcg)	CE	N2 (G)
<i>norethin-eth estrad triphasic</i> (Leena Oral Tablet 0.5/1/0.5-35 Mg-Mcg)	CE	N2 (G)
<i>levonorgestrel-ethinyl estrad</i> (Lessina Oral Tablet 0.1-20 Mg-Mcg)	CE	N2 (G)
<i>levonorg-eth estrad triphasic</i> (Levonest Oral Tablet 50-30/75-40/ 125-30 Mcg)	CE	N2 (G)
<i>levonorgest-eth estrad 91-day oral tablet 0.1-0.02 & 0.01 mg, 0.15-0.03 mg</i>	CE	N2 (G)
<i>levonorgestrel-ethinyl estrad oral tablet 0.1-20 mg-mcg, 0.15-30 mg-mcg</i>	CE	N2 (G)

2020 Pharmacy Drug Guide - Premier Plus

The formulary is updated the first week of each month.

12/01/2020

Prescription Drug Name	Drug Tier	Coverage Requirements and Limits
<i>levonorgestrel-ethinyl estrad</i> (Levora 0.15/30 (28) Oral Tablet 0.15-30 Mg-Mcg)	CE	N2 (G)
LILETTA (52 MG) INTRAUTERINE INTRAUTERINE DEVICE 19.5 MCG/DAY (<i>levonorgestrel</i>)	CE	N2 (NPB); QL (1 device per 300 days)
LO LOESTRIN FE ORAL TABLET 1 MG-10 MCG / 10 MCG (<i>norethin-eth estrad-fe biphase</i>)	CE	N2 (NPB)
<i>norethindrone acet-ethinyl est</i> (Loestrin 1.5/30 (21) Oral Tablet 1.5-30 Mg-Mcg)	NPB	
<i>norethindrone acet-ethinyl est</i> (Loestrin 1/20 (21) Oral Tablet 1-20 Mg-Mcg)	NPB	
<i>drosipreronone-ethinyl estradiol</i> (Loryna Oral Tablet 3-0.02 Mg)	CE	N2 (G)
LOSEASONIQUE ORAL TABLET 0.1-0.02 & 0.01 MG (<i>levonorgest-eth estrad 91-day</i>)	NPB	
<i>norgestrel-ethinyl estradiol</i> (Low-Ogestrel Oral Tablet 0.3-30 Mg-Mcg)	CE	N2 (G)
<i>drosipreronone-ethinyl estradiol</i> (Lo-Zumandimine Oral Tablet 3-0.02 Mg)	CE	N2 (G)
<i>levonorgestrel-ethinyl estrad</i> (Lutera Oral Tablet 0.1-20 Mg-Mcg)	CE	N2 (G)
<i>norethindrone</i> (Lyza Oral Tablet 0.35 Mg)	CE	N2 (G)
<i>marlissa oral tablet 0.15-30 mg-mcg</i>	CE	N2 (G)
<i>medroxyprogesterone acetate intramuscular suspension 150 mg/ml</i>	CE	N2 (G); QL (1 injection/75 days or 4 injections per 300 days)
<i>medroxyprogesterone acetate intramuscular suspension prefilled syringe 150 mg/ml</i>	CE	N2 (G); QL (1 injection/75 days or 4 injections per 300 days)
<i>norethin ace-eth estrad-fe</i> (Mibelas 24 Fe Oral Tablet Chewable 1-20 Mg-Mcg(24))	CE	N2 (G)
<i>norethindrone acet-ethinyl est</i> (Microgestin 1.5/30 Oral Tablet 1.5-30 Mg-Mcg)	CE	N2 (G)
<i>norethindrone acet-ethinyl est</i> (Microgestin 1/20 Oral Tablet 1-20 Mg-Mcg)	CE	N2 (G)
<i>norethin ace-eth estrad-fe</i> (Microgestin Fe 1.5/30 Oral Tablet 1.5-30 Mg-Mcg)	CE	N2 (G)
<i>norethin ace-eth estrad-fe</i> (Microgestin Fe 1/20 Oral Tablet 1-20 Mg-Mcg)	CE	N2 (G)

2020 Pharmacy Drug Guide - Premier Plus

The formulary is updated the first week of each month.

12/01/2020

Prescription Drug Name	Drug Tier	Coverage Requirements and Limits
MINASTRIN 24 FE ORAL TABLET CHEWABLE 1-20 MG-MCG(24) (<i>norethin ace-eth estrad-fe</i>)	NPB	
MIRCETTE ORAL TABLET 0.15-0.02/0.01 MG (21/5) (<i>desogestrel-ethinyl estradiol</i>)	NPB	
MIRENA (52 MG) INTRAUTERINE INTRAUTERINE DEVICE 20 MCG/24HR (<i>levonorgestrel</i>)	CE	#; N2 (NPB); QL (1 device per 300 days)
<i>norgestimate-eth estradiol</i> (Mono-Linyah Oral Tablet 0.25-35 Mg-Mcg)	CE	N2 (G)
<i>norgestimate-eth estradiol</i> (Mononessa Oral Tablet 0.25-35 Mg-Mcg)	G	
NATAZIA ORAL TABLET 3/2-2/2-3/1 MG (<i>estradiol valerate-dienogest</i>)	CE	N2 (NPB)
<i>norethindrone-eth estradiol</i> (Necon 0.5/35 (28) Oral Tablet 0.5-35 Mg-Mcg)	CE	N2 (G)
<i>norethindrone-eth estradiol</i> (Necon 1/35 (28) Oral Tablet 1-35 Mg-Mcg)	CE	N2 (G)
NEXPLANON SUBCUTANEOUS IMPLANT 68 MG (<i>etonogestrel</i>)	CE	N2 (NPB); QL (1 device per 300 days)
<i>drospirenone-ethinyl estradiol</i> (Nikki Oral Tablet 3-0.02 Mg)	CE	N2 (G)
<i>norethindrone</i> (Nora-Be Oral Tablet 0.35 Mg)	CE	N2 (G)
<i>norethin ace-eth estrad-fe oral tablet chewable 1-20 mg-mcg(24)</i>	CE	N2 (G)
<i>norethindrone oral tablet 0.35 mg</i>	CE	N2 (G)
<i>norethin-eth estradiol-fe oral tablet chewable 0.4-35 mg-mcg, 0.8-25 mg-mcg</i>	CE	N2 (G)
<i>norgestimate-eth estradiol oral tablet 0.25-35 mg-mcg</i>	CE	N2 (G)
<i>norgestim-eth estrad triphasic oral tablet 0.18/0.215/0.25 mg-35 mcg</i>	CE	N2 (G)
<i>norethindrone-eth estradiol</i> (Nortrel 0.5/35 (28) Oral Tablet 0.5-35 Mg-Mcg)	CE	N2 (G)
<i>norethindrone-eth estradiol</i> (Nortrel 1/35 (21) Oral Tablet 1-35 Mg-Mcg)	CE	N2 (G)
<i>norethindrone-eth estradiol</i> (Nortrel 1/35 (28) Oral Tablet 1-35 Mg-Mcg)	CE	N2 (G)
<i>norethin-eth estrad triphasic</i> (Nortrel 7/7/7 Oral Tablet 0.5/0.75/1-35 Mg-Mcg)	CE	N2 (G)
NUVARING VAGINAL RING 0.12-0.015 MG/24HR (<i>etonogestrel-ethinyl estradiol</i>)	NPB	

2020 Pharmacy Drug Guide - Premier Plus

The formulary is updated the first week of each month.

12/01/2020

Prescription Drug Name	Drug Tier	Coverage Requirements and Limits
<i>drospirenone-ethinyl estradiol</i> (Ocella Oral Tablet 3-0.03 Mg)	CE	N2 (G)
<i>levonorgestrel-ethinyl estrad</i> (Orsythia Oral Tablet 0.1-20 Mg-Mcg)	CE	N2 (G)
ORTHO MICRONOR ORAL TABLET 0.35 MG (<i>norethindrone</i>)	NPB	
ORTHO TRI-CYCLEN LO ORAL TABLET 0.18/0.215/0.25 MG-25 MCG (<i>norgestim-eth estrad triphasic</i>)	NPB	
PARAGARD INTRAUTERINE COPPER INTRAUTERINE INTRAUTERINE DEVICE (<i>copper</i>)	CE	N2 (NPB); QL (1 device per 300 days)
<i>norethindrone-eth estradiol</i> (Philith Oral Tablet 0.4-35 Mg-Mcg)	CE	N2 (G)
<i>desogestrel-ethinyl estradiol</i> (Pimtrea Oral Tablet 0.15-0.02/0.01 Mg (21/5))	CE	N2 (G)
<i>norethindrone-eth estradiol</i> (Pirmella 1/35 Oral Tablet 1-35 Mg-Mcg)	CE	N2 (G)
<i>norethin-eth estrad triphasic</i> (Pirmella 7/7/7 Oral Tablet 0.5/0.75/1-35 Mg-Mcg)	CE	N2 (G)
<i>levonorgestrel-ethinyl estrad</i> (Portia-28 Oral Tablet 0.15-30 Mg-Mcg)	CE	N2 (G)
<i>norgestimate-eth estradiol</i> (Previfem Oral Tablet 0.25-35 Mg-Mcg)	CE	N2 (G)
QUARTETTE ORAL TABLET 42-21-21-7 DAYS (<i>levonorgest-eth estrad 91-day</i>)	NPB	
<i>desogestrel-ethinyl estradiol</i> (Reclipsen Oral Tablet 0.15-30 Mg-Mcg)	CE	N2 (G)
<i>levonorgest-eth estrad 91-day</i> (Rivelsa Oral Tablet 42-21-21-7 Days)	CE	N2 (G)
SAFYRAL ORAL TABLET 3-0.03-0.451 MG (<i>drospiren-eth estrad-levomefol</i>)	NPB	
SEASONIQUE ORAL TABLET 0.15-0.03 &0.01 MG (<i>levonorgest-eth estrad 91-day</i>)	NPB	
<i>desogestrel-ethinyl estradiol</i> (Simliya Oral Tablet 0.15-0.02/0.01 Mg (21/5))	CE	N2 (G)
<i>levonorgest-eth estrad 91-day</i> (Simpesse Oral Tablet 0.15-0.03 &0.01 Mg)	CE	N2 (G)
SKYLA INTRAUTERINE INTRAUTERINE DEVICE 13.5 MG (<i>levonorgestrel</i>)	CE	N2 (NPB); QL (1 device per 300 days)
SLYND ORAL TABLET 4 MG (<i>drospirenone</i>)	CE	N2 (NPB)

2020 Pharmacy Drug Guide - Premier Plus

The formulary is updated the first week of each month.

12/01/2020

110

Prescription Drug Name	Drug Tier	Coverage Requirements and Limits
<i>desogestrel-ethinyl estradiol</i> (Solia Oral Tablet 0.15-30 Mg-Mcg)	G	
<i>norgestimate-eth estradiol</i> (Sprintec 28 Oral Tablet 0.25-35 Mg-Mcg)	CE	N2 (G)
<i>levonorgestrel-ethinyl estrad</i> (Sronyx Oral Tablet 0.1-20 Mg-Mcg)	CE	N2 (G)
<i>drospirenone-ethinyl estradiol</i> (Syeda Oral Tablet 3-0.03 Mg)	CE	N2 (G)
<i>norethin ace-eth estrad-fe</i> (Tarina 24 Fe Oral Tablet 1-20 Mg-Mcg(24))	CE	N2 (G)
TAYTULLA ORAL CAPSULE 1-20 MG-MCG(24) (<i>norethin ace-eth estrad-fe</i>)	CE	#; N2 (NPB)
<i>norethindron-ethinyl estrad-fe</i> (Tilia Fe Oral Tablet 1-20/1-30/1-35 Mg-Mcg)	CE	N2 (G)
<i>norgestim-eth estrad triphasic</i> (Tri Femynor Oral Tablet 0.18/0.215/0.25 Mg-35 Mcg)	CE	N2 (G)
<i>norgestim-eth estrad triphasic</i> (Tri-Estarylla Oral Tablet 0.18/0.215/0.25 Mg-35 Mcg)	CE	N2 (G)
<i>norethindron-ethinyl estrad-fe</i> (Tri-Legest Fe Oral Tablet 1-20/1-30/1-35 Mg-Mcg)	CE	N2 (G)
<i>norgestim-eth estrad triphasic</i> (Tri-Linyah Oral Tablet 0.18/0.215/0.25 Mg-35 Mcg)	CE	N2 (G)
<i>norgestim-eth estrad triphasic</i> (Tri-Mili Oral Tablet 0.18/0.215/0.25 Mg-35 Mcg)	CE	N2 (G)
<i>norgestim-eth estrad triphasic</i> (Trinessa (28) Oral Tablet 0.18/0.215/0.25 Mg-35 Mcg)	G	
<i>norgestim-eth estrad triphasic</i> (Tri-Previfem Oral Tablet 0.18/0.215/0.25 Mg-35 Mcg)	CE	N2 (G)
<i>norgestim-eth estrad triphasic</i> (Tri-Sprintec Oral Tablet 0.18/0.215/0.25 Mg-35 Mcg)	CE	N2 (G)
<i>levonorg-eth estrad triphasic</i> (Trivora (28) Oral Tablet 50-30/75-40/ 125-30 Mcg)	CE	N2 (G)
<i>norgestim-eth estrad triphasic</i> (Tri-Vylibra Lo Oral Tablet 0.18/0.215/0.25 Mg-25 Mcg)	CE	N2 (G)
<i>norethindrone</i> (Tulana Oral Tablet 0.35 Mg)	CE	N2 (G)
TWIRLA TRANSDERMAL PATCH WEEKLY 120-30 MCG/24HR (<i>levonorgestrel-eth estradiol</i>)	NPB	
<i>drospiren-eth estrad-levomefol</i> (Tydemy Oral Tablet 3-0.03-0.451 Mg)	CE	N2 (G)

2020 Pharmacy Drug Guide - Premier Plus

The formulary is updated the first week of each month.

12/01/2020

Prescription Drug Name	Drug Tier	Coverage Requirements and Limits
<i>desogestrel-ethinyl estradiol</i> (Velvet Oral Tablet 0.1/0.125/0.15-0.025 Mg)	CE	N2 (G)
<i>viorele oral tablet 0.15-0.02/0.01 mg (21/5)</i>	CE	N2 (G)
<i>norethindrone-eth estradiol</i> (Vyfemla Oral Tablet 0.4-35 Mg-Mcg)	CE	N2 (G)
<i>norethindrone-eth estradiol</i> (Wera Oral Tablet 0.5-35 Mg-Mcg)	CE	N2 (G)
<i>norethin-eth estradiol-fe</i> (Wymzya Fe Oral Tablet Chewable 0.4-35 Mg-Mcg)	CE	N2 (G)
XULANE TRANSDERMAL PATCH WEEKLY 150-35 MCG/24HR (<i>norelgestromin-eth estradiol</i>)	CE	N2 (G)
YASMIN 28 ORAL TABLET 3-0.03 MG (<i>drospirenone-ethinyl estradiol</i>)	NPB	
YAZ ORAL TABLET 3-0.02 MG (<i>drospirenone-ethinyl estradiol</i>)	NPB	
<i>drospirenone-ethinyl estradiol</i> (Zarah Oral Tablet 3-0.03 Mg)	CE	N2 (G)
<i>ethynodiol diac-eth estradiol</i> (Zovia 1/35E (28) Oral Tablet 1-35 Mg-Mcg)	CE	N2 (G)
<i>drospirenone-ethinyl estradiol</i> (Zumandimine Oral Tablet 3-0.03 Mg)	CE	N2 (G)
CORTICOSTEROIDS - HORMONES		
ALKINDI SPRINKLE ORAL CAPSULE SPRINKLE 0.5 MG, 1 MG, 2 MG, 5 MG (<i>hydrocortisone</i>)	NPB	
<i>budesonide er oral tablet extended release 24 hour 9 mg</i>	G	
<i>budesonide oral capsule delayed release particles 3 mg</i>	G	
CORTEF ORAL TABLET 10 MG, 20 MG, 5 MG (<i>hydrocortisone</i>)	NPB	
<i>cortisone acetate oral tablet 25 mg</i>	G	
DEXAMETHASONE INTENSOL ORAL CONCENTRATE 1 MG/ML (<i>dexamethasone</i>)	NPB	
<i>dexamethasone oral elixir 0.5 mg/5ml</i>	G	
<i>dexamethasone oral tablet 0.5 mg, 0.75 mg, 1.5 mg, 4 mg, 6 mg</i>	G	
<i>dexamethasone oral tablet therapy pack 1.5 mg (21), 1.5 mg (35), 1.5 mg (51)</i>	G	
DXEVO 11-DAY ORAL TABLET THERAPY PACK 1.5 MG (<i>dexamethasone</i>)	NPB	
EMFLAZA ORAL SUSPENSION 22.75 MG/ML (<i>deflazacort</i>)	NPSP	PA; NPL; SP

2020 Pharmacy Drug Guide - Premier Plus

The formulary is updated the first week of each month.

12/01/2020

Prescription Drug Name	Drug Tier	Coverage Requirements and Limits
EMFLAZA ORAL TABLET 18 MG, 30 MG, 36 MG, 6 MG <i>(deflazacort)</i>	NPSP	PA; NPL; SP
ENTOCORT EC ORAL CAPSULE DELAYED RELEASE PARTICLES 3 MG <i>(budesonide)</i>	NPB	
<i>fudrocortisone acetate oral tablet 0.1 mg</i>	G	
HEMADY ORAL TABLET 20 MG <i>(dexamethasone)</i>	NPB	
<i>dexamethasone (Hidex 6-Day Oral Tablet Therapy Pack 1.5 Mg (21))</i>	G	
<i>hydrocortisone oral tablet 10 mg, 20 mg, 5 mg</i>	G	
MEDROL ORAL TABLET 16 MG, 2 MG, 32 MG, 4 MG, 8 MG <i>(methylprednisolone)</i>	NPB	
MEDROL ORAL TABLET THERAPY PACK 4 MG <i>(methylprednisolone)</i>	NPB	
<i>methylprednisolone oral tablet 16 mg, 32 mg, 4 mg, 8 mg</i>	G	
<i>methylprednisolone oral tablet therapy pack 4 mg</i>	G	
MILLIPRED ORAL TABLET 5 MG <i>(prednisolone)</i>	NPB	
ORAPRED ODT ORAL TABLET DISPERSIBLE 10 MG, 15 MG, 30 MG <i>(prednisolone sodium phosphate)</i>	NPB	
ORTIKOS ORAL CAPSULE EXTENDED RELEASE 24 HOUR 6 MG, 9 MG <i>(budesonide)</i>	NPB	
<i>prednisolone oral solution 15 mg/5ml</i>	G	
<i>prednisolone oral syrup 15 mg/5ml</i>	G	
<i>prednisolone sodium phosphate oral solution 10 mg/5ml, 15 mg/5ml, 20 mg/5ml, 25 mg/5ml, 6.7 (5 base) mg/5ml</i>	G	
<i>prednisolone sodium phosphate oral tablet dispersible 10 mg, 15 mg, 30 mg</i>	G	
PREDNISONE INTENSOL ORAL CONCENTRATE 5 MG/ML <i>(prednisone)</i>	NPB	
<i>prednisone oral solution 5 mg/5ml</i>	G	
<i>prednisone oral tablet 1 mg, 10 mg, 2.5 mg, 20 mg, 5 mg, 50 mg</i>	G	
<i>prednisone oral tablet therapy pack 10 mg (21), 10 mg (48), 5 mg (21), 5 mg (48)</i>	G	
RAYOS ORAL TABLET DELAYED RELEASE 1 MG, 2 MG, 5 MG <i>(prednisone)</i>	NPB	
TAPERDEX 12-DAY ORAL TABLET THERAPY PACK 1.5 MG (49) <i>(dexamethasone)</i>	NPB	

Prescription Drug Name	Drug Tier	Coverage Requirements and Limits
TAPERDEX 7-DAY ORAL TABLET THERAPY PACK 1.5 MG (27) (<i>dexamethasone</i>)	NPB	
UCERIS ORAL TABLET EXTENDED RELEASE 24 HOUR 9 MG (<i>budesonide</i>)	NPB	
<i>zcort 7-day oral tablet therapy pack 1.5 mg (25)</i>	NPB	
COUGH/COLD/ALLERGY - DRUGS FOR THE LUNGS		
<i>acetylcysteine inhalation solution 10 %, 20 %</i>	G	
ALAVERT ALLERGY/SINUS ORAL TABLET EXTENDED RELEASE 12 HOUR 5-120 MG (<i>loratadine-pseudoephedrine</i>)	G	Select OTC
ALLEGRA-D ALLERGY & CONGESTION ORAL TABLET EXTENDED RELEASE 12 HOUR 60-120 MG (<i>sexfenadine-pseudoephedrine</i>)	G	Select OTC
ALLEGRA-D ALLERGY & CONGESTION ORAL TABLET EXTENDED RELEASE 24 HOUR 180-240 MG (<i>sexfenadine-pseudoephedrine</i>)	G	Select OTC
<i>benzonatate oral capsule 100 mg, 150 mg, 200 mg</i>	G	
<i>cetirizine-pseudoephedrine er oral tablet extended release 12 hour 5-120 mg</i>	G	Select OTC
CLARINEX-D 12 HOUR ORAL TABLET EXTENDED RELEASE 12 HOUR 2.5-120 MG (<i>desloratadine-pseudoephedrine</i>)	NPB	
CLARITIN-D 12 HOUR ORAL TABLET EXTENDED RELEASE 12 HOUR 5-120 MG (<i>loratadine-pseudoephedrine</i>)	G	Select OTC
CLARITIN-D 24 HOUR ORAL TABLET EXTENDED RELEASE 24 HOUR 10-240 MG (<i>loratadine-pseudoephedrine</i>)	G	Select OTC
<i>coditussin ac oral liquid 200-10 mg/5ml</i>	G	PA; QL (60 ml/day over 5 days per 30 days)
<i>sexfenadine-pseudoephed er oral tablet extended release 24 hour 180-240 mg</i>	G	Select OTC
<i>hydrocod polst-cpm polst er oral suspension extended release 10-8 mg/5ml</i>	G	
<i>hydrocodone-homatropine oral syrup 5-1.5 mg/5ml</i>	G	
<i>hydrocodone-homatropine oral tablet 5-1.5 mg</i>	G	
<i>hydromet oral syrup 5-1.5 mg/5ml</i>	G	
HYPERSAL INHALATION NEBULIZATION SOLUTION 3.5 % (<i>sodium chloride</i>)	NPB	

2020 Pharmacy Drug Guide - Premier Plus

The formulary is updated the first week of each month.

12/01/2020

Prescription Drug Name	Drug Tier	Coverage Requirements and Limits
<i>loratadine-d 12hr oral tablet extended release 12 hour 5-120 mg</i>	G	Select OTC
<i>loratadine-d 24hr oral tablet extended release 24 hour 10-240 mg</i>	G	Select OTC
NEOTUSS PLUS ORAL LIQUID 7.5-4-30 MG/5ML (phenylephrine-chlorphen-dm)	NPB	
<i>promethazine-dm oral syrup 6.25-15 mg/5ml</i>	G	
SEMPREX-D ORAL CAPSULE 8-60 MG (acrivastine-pseudoephedrine)	NPB	
<i>sodium chloride inhalation nebulization solution 10 %, 3 %, 7 %</i>	G	
SSKI ORAL SOLUTION 1 GM/ML (potassium iodide (expectorant))	NPB	
TESSALON PERLES ORAL CAPSULE 100 MG (benzonatate)	NPB	
TUSSICAPS ORAL CAPSULE EXTENDED RELEASE 12 HOUR 10-8 MG (hydrocod polst-chlorphen polst)	NPB	PA; QL (2 capsules per day, max 20 per 30 days)
TUXARIN ER ORAL TABLET EXTENDED RELEASE 12 HOUR 54.3-8 MG (chlorpheniramine-codeine)	NPB	PA; QL (2 tablets per day max 20 tablets per 30 days)
TUZISTRA XR ORAL SUSPENSION EXTENDED RELEASE 14.7-2.8 MG/5ML (codeine polst-chlorphen polst)	NPB	
ZYRTEC-D ALLERGY & CONGESTION ORAL TABLET EXTENDED RELEASE 12 HOUR 5-120 MG (cetirizine-pseudoephedrine)	G	Select OTC
DERMATOLOGICALS - DRUGS FOR THE SKIN		
ABREVA EXTERNAL CREAM 10 % (docosanol)	G	Select OTC
ABSORICA LD ORAL CAPSULE 16 MG, 24 MG, 32 MG, 8 MG (isotretinoin micronized)	NPB	PA; QL (1 capsule per 1 day)
ABSORICA ORAL CAPSULE 10 MG, 20 MG, 30 MG, 40 MG (isotretinoin)	NPB	PA; QL (2 capsules per 1 day)
ABSORICA ORAL CAPSULE 25 MG, 35 MG (isotretinoin)	NPB	PA; #: QL (2 capsules per 1 day)
ACANYA EXTERNAL GEL 1.2-2.5 % (clindamycin phos-benzoyl perox)	NPB	
<i>acitretin oral capsule 10 mg, 17.5 mg, 25 mg</i>	G	
<i>acyclovir external cream 5 %</i>	G	
<i>acyclovir external ointment 5 %</i>	G	
ACZONE EXTERNAL GEL 5 %, 7.5 % (dapsone)	NPB	
<i>adapalene external cream 0.1 %</i>	G	PA; AL

Prescription Drug Name	Drug Tier	Coverage Requirements and Limits
adapalene external gel 0.3 %	G	PA; AL
adapalene external pad 0.1 %	G	PA; AL
adapalene external solution 0.1 %	G	PA; AL
adapalene-benzoyl peroxide external gel 0.1-2.5 %	G	PA; AL
aif #2 drug preparation kit external cream	NPB	
AKLIEF EXTERNAL CREAM 0.005 % (<i>trifarotene</i>)	NPB	
alclometasone dipropionate external cream 0.05 %	G	
alclometasone dipropionate external ointment 0.05 %	G	
ALDARA EXTERNAL CREAM 5 % (<i>imiquimod</i>)	NPB	
ALTABAX EXTERNAL OINTMENT 1 % (<i>retapamulin</i>)	NPB	
ALTRENO EXTERNAL LOTION 0.05 % (<i>tretinoin</i>)	NPB	PA; #; AL
amcinonide external cream 0.1 %	G	
AMELUZ EXTERNAL GEL 10 % (<i>aminolevulinic acid hcl</i>)	NPB	#
isotretinoin (Amnesteem Oral Capsule 10 Mg, 20 Mg, 40 Mg)	G	PA; QL (2 capsules per 1 day)
AMZEEQ EXTERNAL FOAM 4 % (<i>minocycline hcl micronized</i>)	NPB	
ANACAINE EXTERNAL OINTMENT 10 % (<i>benzocaine</i>)	NPB	
APEXICON E EXTERNAL CREAM 0.05 % (<i>diflorasone diacet emoll base</i>)	NPB	
ARAZLO EXTERNAL LOTION 0.045 % (<i>tazarotene</i>)	NPB	
ATRALIN EXTERNAL GEL 0.05 % (<i>tretinoin</i>)	NPB	AL
<i>tretinoin</i> (Avita External Cream 0.025 %)	G	AL
<i>tretinoin</i> (Avita External Gel 0.025 %)	G	AL
azelaic acid external gel 15 %	G	
AZELEX EXTERNAL CREAM 20 % (<i>azelaic acid</i>)	NPB	
BENZACLIN EXTERNAL GEL 1-5 % (<i>clindamycin phos-benzoyl peroxy</i>)	NPB	
BENZACLIN WITH PUMP EXTERNAL GEL 1-5 % (<i>clindamycin phos-benzoyl peroxy</i>)	NPB	
BENZAMYCIN EXTERNAL GEL 5-3 % (<i>benzoyl peroxide-erythromycin</i>)	NPB	
<i>benzoyl peroxide-erythromycin</i> external gel 5-3 %	G	
betamethasone dipropionate aug external cream 0.05 %	G	
betamethasone dipropionate aug external gel 0.05 %	G	

2020 Pharmacy Drug Guide - Premier Plus

The formulary is updated the first week of each month.

12/01/2020

Prescription Drug Name	Drug Tier	Coverage Requirements and Limits
<i>betamethasone dipropionate aug external lotion 0.05 %</i>	G	
<i>betamethasone dipropionate aug external ointment 0.05 %</i>	G	
<i>betamethasone dipropionate external cream 0.05 %</i>	G	
<i>betamethasone dipropionate external lotion 0.05 %</i>	G	
<i>betamethasone dipropionate external ointment 0.05 %</i>	G	
<i>betamethasone valerate external cream 0.1 %</i>	G	
<i>betamethasone valerate external foam 0.12 %</i>	G	
<i>betamethasone valerate external lotion 0.1 %</i>	G	
<i>betamethasone valerate external ointment 0.1 %</i>	G	
BRYHALI EXTERNAL LOTION 0.01 % (<i>halobetasol propionate</i>)	NPB	
<i>calcipotriene external cream 0.005 %</i>	G	
<i>calcipotriene external ointment 0.005 %</i>	G	
<i>calcipotriene external solution 0.005 %</i>	G	
<i>calcipotriene-betameth diprop external suspension 0.005-0.064 %</i>	G	
<i>calcipotriene (Calcitrene External Ointment 0.005 %)</i>	G	
CAPEX EXTERNAL SHAMPOO 0.01 % (<i>fluocinolone acetonide</i>)	NPB	
CARAC EXTERNAL CREAM 0.5 % (<i>fluorouracil</i>)	NPB	
CENTANY EXTERNAL OINTMENT 2 % (<i>mupirocin</i>)	NPB	
<i>ciclopirox (Ciclodan External Solution 8 %)</i>	G	
<i>ciclopirox external gel 0.77 %</i>	G	
<i>ciclopirox external shampoo 1 %</i>	G	
<i>ciclopirox external solution 8 %</i>	G	
<i>ciclopirox olamine external cream 0.77 %</i>	G	
<i>ciclopirox olamine external suspension 0.77 %</i>	G	
<i>isotretinoin (Claravis Oral Capsule 10 Mg)</i>	G	PA; QL (2 capsules per 1 day)
CLEOCIN-T EXTERNAL LOTION 1 % (<i>clindamycin phosphate</i>)	NPB	
<i>clindamycin phosphate (Clindacin Etz External Swab 1 %)</i>	G	
<i>clindamycin phosphate (Clindacin-P External Swab 1 %)</i>	G	
CLINDAGEL EXTERNAL GEL 1 % (<i>clindamycin phosphate</i>)	NPB	

2020 Pharmacy Drug Guide - Premier Plus

The formulary is updated the first week of each month.

12/01/2020

Prescription Drug Name	Drug Tier	Coverage Requirements and Limits
clindamycin phos-benzoyl perox external gel 1-5 %, 1.2-2.5 %, 1.2-5 %	G	
clindamycin phosphate external foam 1 %	G	
clindamycin phosphate external gel 1 %	G	
clindamycin phosphate external lotion 1 %	G	
clindamycin phosphate external solution 1 %	G	
clindamycin phosphate external swab 1 %	G	
clindamycin-tretinoi external gel 1.2-0.025 %	G	PA; AL
clobetasol propionate e external cream 0.05 %	G	
clobetasol propionate emulsion external foam 0.05 %	G	
clobetasol propionate external cream 0.05 %	G	
clobetasol propionate external foam 0.05 %	G	
clobetasol propionate external gel 0.05 %	G	
clobetasol propionate external lotion 0.05 %	G	
clobetasol propionate external ointment 0.05 %	G	
clobetasol propionate external shampoo 0.05 %	G	
clobetasol propionate external solution 0.05 %	G	
CLOBEX EXTERNAL LOTION 0.05 % (clobetasol propionate)	NPB	
CLOBEX EXTERNAL SHAMPOO 0.05 % (clobetasol propionate)	NPB	
CLOBEX SPRAY EXTERNAL LIQUID 0.05 % (clobetasol propionate)	NPB	
CLODERM EXTERNAL CREAM 0.1 % (clocortolone pivalate)	NPB	
clotrimazole-betamethasone external cream 1-0.05 %	G	
clotrimazole-betamethasone external lotion 1-0.05 %	G	
CONDYLOX EXTERNAL GEL 0.5 % (podofilox)	NPB	
CORDRAN EXTERNAL LOTION 0.05 % (flurandrenolide)	NPB	
CORDRAN EXTERNAL TAPE 4 MCG/SQCM (flurandrenolide)	NPB	#
CORTANE-B EXTERNAL LOTION 10-10-1 MG/ML (hc-pramoxine-chloroxylenol)	NPB	
CORTISPORIN EXTERNAL CREAM 3.5-10000-0.5 (neomycin-polymyxin-hc)	PB	

2020 Pharmacy Drug Guide - Premier Plus

The formulary is updated the first week of each month.

12/01/2020

Prescription Drug Name	Drug Tier	Coverage Requirements and Limits
CORTISPORIN EXTERNAL OINTMENT 1 % (<i>bacit-poly-neo hc</i>)	PB	
COSENTYX (300 MG DOSE) SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 150 MG/ML (<i>secukinumab</i>)	PSP	PA; IBC (Preferred agent for Ankylosing Spondylitis and Psoriatic Arthritis. Not covered for Psoriasis); SP
COSENTYX SENSOREADY (300 MG) SUBCUTANEOUS SOLUTION AUTO-INJECTOR 150 MG/ML (<i>secukinumab</i>)	PSP	PA; IBC (Preferred agent for Ankylosing Spondylitis and Psoriatic Arthritis. Not covered for Psoriasis); SP
COSENTYX SENSOREADY PEN SUBCUTANEOUS SOLUTION AUTO-INJECTOR 150 MG/ML (<i>secukinumab</i>)	PSP	PA; IBC (Preferred agent for Ankylosing Spondylitis and Psoriatic Arthritis. Not covered for Psoriasis); NPL; SP
COSENTYX SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 150 MG/ML (<i>secukinumab</i>)	PSP	PA; IBC (Preferred agent for Ankylosing Spondylitis and Psoriatic Arthritis. Not covered for Psoriasis); NPL; SP
CROTAN EXTERNAL LOTION 10 % (<i>crotamiton</i>)	G	
CUTIVATE EXTERNAL LOTION 0.05 % (<i>fluticasone propionate</i>)	NPB	
<i>dapsone external gel 5 %, 7.5 %</i>	G	
DENAVIR EXTERNAL CREAM 1 % (<i>penciclovir</i>)	NPB	#
DERMA-SMOOTH/FS BODY EXTERNAL OIL 0.01 % (<i>fluocinolone acetonide</i>)	NPB	
DERMA-SMOOTH/FS SCALP EXTERNAL OIL 0.01 % (<i>fluocinolone acetonide</i>)	NPB	
<i>hydrocortisone-iodoquinol</i> (Dermazene External Cream 1-1 %)	G	
DESONATE EXTERNAL GEL 0.05 % (<i>desonide</i>)	NPB	#
<i>desonide external cream 0.05 %</i>	G	
<i>desonide external gel 0.05 %</i>	G	
<i>desonide external lotion 0.05 %</i>	G	
<i>desonide external ointment 0.05 %</i>	G	
DESOWEN EXTERNAL CREAM 0.05 % (<i>desonide</i>)	NPB	
<i>desoximetasone external cream 0.25 %</i>	G	
<i>desoximetasone external gel 0.05 %</i>	G	

2020 Pharmacy Drug Guide - Premier Plus

The formulary is updated the first week of each month.

12/01/2020

Prescription Drug Name	Drug Tier	Coverage Requirements and Limits
<i>desoximetasone external liquid 0.25 %</i>	G	
<i>desoximetasone external ointment 0.25 %</i>	G	
<i>diclofenac epolamine external patch 1.3 %</i>	G	
<i>diclofenac sodium external gel 3 %</i>	G	PA; QL (100 GM per 30 days)
<i>diclofenac sodium external solution 1.5 %</i>	G	QL (10 ML per 1 day)
DIFFERIN EXTERNAL CREAM 0.1 % (<i>adapalene</i>)	NPB	PA; AL
DIFFERIN EXTERNAL GEL 0.1 % (<i>adapalene</i>)	G	PA; Select OTC; AL
DIFFERIN EXTERNAL GEL 0.3 % (<i>adapalene</i>)	NPB	PA; AL
DIFFERIN EXTERNAL LOTION 0.1 % (<i>adapalene</i>)	NPB	PA; AL
<i>diflorasone diacetate external ointment 0.05 %</i>	G	
DIPROLENE AF EXTERNAL CREAM 0.05 % (<i>betamethasone dipropionate aug</i>)	NPB	
DIPROLENE EXTERNAL OINTMENT 0.05 % (<i>betamethasone dipropionate aug</i>)	NPB	
<i>docosanol external cream 10 %</i>	G	Select OTC
DOVONEX EXTERNAL CREAM 0.005 % (<i>calcipotriene</i>)	NPB	
<i>doxepin hcl external cream 5 %</i>	G	QL (45 grams per 30 days)
<i>doxycycline oral capsule delayed release 40 mg</i>	G	
DUOBRII EXTERNAL LOTION 0.01-0.045 % (<i>halobetasol prop-tazarotene</i>)	NPB	
DUPIXENT SUBCUTANEOUS SOLUTION PEN- INJECTOR 300 MG/2ML (<i>dupilumab</i>)	NPSP	PA; NPL; SP
DUPIXENT SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 200 MG/1.14ML, 300 MG/2ML (<i>dupilumab</i>)	NPSP	PA; NPL; SP
<i>econazole nitrate external cream 1 %</i>	G	
ECOZA EXTERNAL FOAM 1 % (<i>econazole nitrate</i>)	NPB	
EFUDEX EXTERNAL CREAM 5 % (<i>fluorouracil</i>)	NPB	
ELIDEL EXTERNAL CREAM 1 % (<i>pimecrolimus</i>)	NPB	
ELIMITE EXTERNAL CREAM 5 % (<i>permethrin</i>)	NPB	
ENSTILAR EXTERNAL FOAM 0.005-0.064 % (<i>calcipotriene-betameth diprop</i>)	NPB	
EPIDUO EXTERNAL GEL 0.1-2.5 % (<i>adapalene-benzoyl peroxide</i>)	NPB	
EPIDUO FORTE EXTERNAL GEL 0.3-2.5 % (<i>adapalene-benzoyl peroxide</i>)	PB	#

2020 Pharmacy Drug Guide - Premier Plus

The formulary is updated the first week of each month.

12/01/2020

Prescription Drug Name	Drug Tier	Coverage Requirements and Limits
EPIFOAM EXTERNAL FOAM 1-1 % (<i>pramoxine-hc</i>)	NPB	
ERTACZO EXTERNAL CREAM 2 % (<i>sertaconazole nitrate</i>)	NPB	
<i>ery external pad 2 %</i>	G	
ERYGEL EXTERNAL GEL 2 % (<i>erythromycin</i>)	NPB	
<i>erythromycin external solution 2 %</i>	G	
EUCRISA EXTERNAL OINTMENT 2 % (<i>crisaborole</i>)	NPB	
EVOCLIN EXTERNAL FOAM 1 % (<i>clindamycin phosphate</i>)	NPB	
EXELDERM EXTERNAL CREAM 1 % (<i>sulconazole nitrate</i>)	NPB	
EXELDERM EXTERNAL SOLUTION 1 % (<i>sulconazole nitrate</i>)	NPB	
EXTINA EXTERNAL FOAM 2 % (<i>ketoconazole</i>)	NPB	
FABIOR EXTERNAL FOAM 0.1 % (<i>tazarotene</i>)	NPB	PA; AL
FINACEA EXTERNAL FOAM 15 % (<i>azelaic acid</i>)	NPB	
FINACEA EXTERNAL GEL 15 % (<i>azelaic acid</i>)	NPB	
FLECTOR EXTERNAL PATCH 1.3 % (<i>diclofenac epolamine</i>)	NPB	
<i>fluocinolone acetonide body external oil 0.01 %</i>	G	
<i>fluocinolone acetonide external cream 0.01 %, 0.025 %</i>	G	
<i>fluocinolone acetonide external ointment 0.025 %</i>	G	
<i>fluocinolone acetonide external solution 0.01 %</i>	G	
<i>fluocinolone acetonide scalp external oil 0.01 %</i>	G	
<i>fluocinonide external cream 0.05 %</i>	G	
<i>fluocinonide external gel 0.05 %</i>	G	
<i>fluocinonide external ointment 0.05 %</i>	G	
<i>fluocinonide external solution 0.05 %</i>	G	
FLUOROPLEX EXTERNAL CREAM 1 % (<i>fluorouracil</i>)	NPB	
<i>fluorouracil external cream 0.5 %, 5 %</i>	G	
<i>fluorouracil external solution 2 %, 5 %</i>	G	
<i>flurandrenolide external cream 0.05 %</i>	G	
<i>flurandrenolide external lotion 0.05 %</i>	G	
<i>flurandrenolide external ointment 0.05 %</i>	G	
<i>fluticasone propionate external cream 0.05 %</i>	G	
<i>fluticasone propionate external lotion 0.05 %</i>	G	
<i>fluticasone propionate external ointment 0.005 %</i>	G	

2020 Pharmacy Drug Guide - Premier Plus

The formulary is updated the first week of each month.

12/01/2020

Prescription Drug Name	Drug Tier	Coverage Requirements and Limits
GEBAUERS PAIN EASE EXTERNAL AEROSOL (pentafluoroprop-tetrafluoroeth)	NPB	
gentamicin sulfate external cream 0.1 %	G	
gentamicin sulfate external ointment 0.1 %	G	
GORDOFILM EXTERNAL SOLUTION 16.7-16.7 % (salicylic acid-lactic acid)	NPB	
halcinonide external cream 0.1 %	G	
halobetasol propionate external cream 0.05 %	G	
halobetasol propionate external foam 0.05 %	NPB	
halobetasol propionate external ointment 0.05 %	G	
HALOG EXTERNAL CREAM 0.1 % (halcinonide)	NPB	
HALOG EXTERNAL OINTMENT 0.1 % (halcinonide)	NPB	
HALOG EXTERNAL SOLUTION 0.1 % (halcinonide)	NPB	
hydrocortisone butyr lipo base external cream 0.1 %	G	
hydrocortisone butyrate external cream 0.1 %	G	
hydrocortisone butyrate external lotion 0.1 %	G	
hydrocortisone butyrate external ointment 0.1 %	G	
hydrocortisone butyrate external solution 0.1 %	G	
hydrocortisone external cream 2.5 %	G	
hydrocortisone external lotion 2.5 %	G	
hydrocortisone external ointment 2.5 %	G	
hydrocortisone valerate external cream 0.2 %	G	
hydrocortisone valerate external ointment 0.2 %	G	
ILUMYA SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 100 MG/ML (tildrakizumab-asmn)	NPSP	PA; NPL; SP
imiquimod external cream 5 %	G	
imiquimod pump external cream 3.75 %	G	
IMPOYZ EXTERNAL CREAM 0.025 % (clobetasol propionate)	NPB	
isotretinoin oral capsule 10 mg, 20 mg, 30 mg, 40 mg	G	PA; QL (2 capsules per 1 day)
JUBLIA EXTERNAL SOLUTION 10 % (efinaconazole)	PB	
KENALOG EXTERNAL AEROSOL SOLUTION 0.147 MG/GM (triamcinolone acetonide)	NPB	
ketoconazole external cream 2 %	G	

2020 Pharmacy Drug Guide - Premier Plus

The formulary is updated the first week of each month.

12/01/2020

Prescription Drug Name	Drug Tier	Coverage Requirements and Limits
<i>ketoconazole external foam 2 %</i>	G	
<i>ketoconazole external shampoo 2 %</i>	G	
KLARON EXTERNAL LOTION 10 % (sulfacetamide sodium (acne))	NPB	
<i>lavare wound wash external gel</i>	NPB	
LEVULAN KERASTICK EXTERNAL SOLUTION RECONSTITUTED 20 % (aminolevulinic acid hcl)	NPB	
LEXETTE EXTERNAL FOAM 0.05 % (halobetasol propionate)	NPB	#
LICART EXTERNAL PATCH 24 HOUR 1.3 % (diclofenac epolamine)	NPB	
<i>lidocaine external ointment 5 %</i>	G	PA; QL (50 grams per 30 days)
<i>lidocaine external patch 5 %</i>	G	
<i>lidocaine hcl external solution 4 %</i>	G	PA; QL (50 ml per 30 days)
<i>lidocaine-prilocaine external cream 2.5-2.5 %</i>	G	PA; QL (30 grams per 30 days)
<i>lidocaine-tetracaine external cream 7-7 %</i>	G	PA; QL (30 grams per 30 days)
LIDODERM EXTERNAL PATCH 5 % (lidocaine)	NPB	
<i>lindane external shampoo 1 %</i>	G	
LOCOID EXTERNAL LOTION 0.1 % (hydrocortisone butyrate)	NPB	
LOCOID LIPOCREAM EXTERNAL CREAM 0.1 % (hydrocortisone butyr lipo base)	NPB	
LOPROX EXTERNAL SHAMPOO 1 % (ciclopirox)	NPB	
<i>luliconazole external cream 1 %</i>	G	
LUXIQ EXTERNAL FOAM 0.12 % (betamethasone valerate)	NPB	
LUZU EXTERNAL CREAM 1 % (luliconazole)	NPB	
<i>malathion external lotion 0.5 %</i>	G	
METROCREAM EXTERNAL CREAM 0.75 % (metronidazole)	NPB	
METROGEL EXTERNAL GEL 1 % (metronidazole)	NPB	
METROLOTION EXTERNAL LOTION 0.75 % (metronidazole)	NPB	
<i>metronidazole external cream 0.75 %</i>	G	

2020 Pharmacy Drug Guide - Premier Plus

The formulary is updated the first week of each month.

12/01/2020

Prescription Drug Name	Drug Tier	Coverage Requirements and Limits
<i>metronidazole external gel 0.75 %, 1 %</i>	G	
<i>metronidazole external lotion 0.75 %</i>	G	
<i>miconazole-zinc oxide-petrolat external ointment 0.25-15-81.35 %</i>	G	
MIRVASO EXTERNAL GEL 0.33 % (brimonidine tartrate)	NPB	
<i>mometasone furoate external cream 0.1 %</i>	G	
<i>mometasone furoate external ointment 0.1 %</i>	G	
<i>mometasone furoate external solution 0.1 %</i>	G	
<i>mupirocin calcium external cream 2 %</i>	G	
<i>mupirocin external ointment 2 %</i>	G	
<i>isotretinoin (Myorisan Oral Capsule 10 Mg, 20 Mg, 30 Mg, 40 Mg)</i>	G	PA; QL (2 capsules per 1 day)
<i>naftifine hcl external cream 1 %, 2 %</i>	G	
NAFTIN EXTERNAL CREAM 2 % (naftifine hcl)	NPB	
NAFTIN EXTERNAL GEL 1 % (naftifine hcl)	NPB	
NAFTIN EXTERNAL GEL 2 % (naftifine hcl)	NPB	#
NATROBA EXTERNAL SUSPENSION 0.9 % (spinosad)	NPB	
NEO-SYNALAR EXTERNAL CREAM 0.5-0.025 % (neomycin-fluocinolone)	NPB	
<i>clindamycin-benzoyl per (refr) (Neuac External Gel 1.2-5 %)</i>	G	
NORITATE EXTERNAL CREAM 1 % (metronidazole)	NPB	
<i>nystatin (Nyamyc External Powder 100000 Unit/Gm)</i>	G	
<i>nystatin external cream 100000 unit/gm</i>	G	
<i>nystatin external ointment 100000 unit/gm</i>	G	
<i>nystatin external powder 100000 unit/gm</i>	G	
<i>nystatin-triamcinolone external cream 100000-0.1 unit/gm-%</i>	G	
<i>nystatin-triamcinolone external ointment 100000-0.1 unit/gm-%</i>	G	
<i>nystatin (Nystop External Powder 100000 Unit/Gm)</i>	G	
OLUX EXTERNAL FOAM 0.05 % (clobetasol propionate)	NPB	
OLUX-E EXTERNAL FOAM 0.05 % (clobetasol propionate emulsion)	NPB	
ONEXTON EXTERNAL GEL 1.2-3.75 % (clindamycin phos-benzoyl perox)	NPB	#
ORACEA ORAL CAPSULE DELAYED RELEASE 40 MG (doxycycline)	PB	

2020 Pharmacy Drug Guide - Premier Plus

The formulary is updated the first week of each month.

12/01/2020

Prescription Drug Name	Drug Tier	Coverage Requirements and Limits
OVIDE EXTERNAL LOTION 0.5 % (<i>malathion</i>)	NPB	
<i>oxiconazole nitrate external cream 1 %</i>	G	
OXISTAT EXTERNAL CREAM 1 % (<i>oxiconazole nitrate</i>)	NPB	
OXISTAT EXTERNAL LOTION 1 % (<i>oxiconazole nitrate</i>)	NPB	
OXSORALEN ULTRA ORAL CAPSULE 10 MG (<i>methoxsalen rapid</i>)	NPB	
PANDEL EXTERNAL CREAM 0.1 % (<i>hydrocortisone probutate</i>)	NPB	
PANRETIN EXTERNAL GEL 0.1 % (<i>alitretinoin</i>)	PB	
PENNSAID EXTERNAL SOLUTION 2 % (<i>diclofenac sodium</i>)	NPB	
<i>permethrin external cream 5 %</i>	G	
PICATO EXTERNAL GEL 0.015 %, 0.05 % (<i>ingenol mebutate</i>)	PB	
<i>pimecrolimus external cream 1 %</i>	G	
PLIAGLIS EXTERNAL CREAM 7-7 % (<i>lidocaine-tetracaine</i>)	NPB	PA; QL (30 grams per 30 days)
<i>podofilox external solution 0.5 %</i>	G	
PRAMOSONE EXTERNAL CREAM 1-1 % (<i>pramoxine-hc</i>)	NPB	
PRAMOSONE EXTERNAL LOTION 1-1 %, 1-2.5 % (<i>pramoxine-hc</i>)	NPB	
<i>prednicarbate external cream 0.1 %</i>	G	
<i>prednicarbate external ointment 0.1 %</i>	G	
PROTOPIC EXTERNAL OINTMENT 0.03 %, 0.1 % (<i>tacrolimus</i>)	NPB	
PRUDOXIN EXTERNAL CREAM 5 % (<i>doxepin hcl (antipruritic)</i>)	NPB	QL (45 grams per 30 days)
QBREXZA EXTERNAL PAD 2.4 % (<i>glycopyrronium tosylate</i>)	NPB	
REGENECARE EXTERNAL GEL 2 % (<i>lidocaine-collagen-aloe vera</i>)	NPB	
REGRANEX EXTERNAL GEL 0.01 % (<i>becaplermin</i>)	NPB	
RETIN-A EXTERNAL CREAM 0.025 %, 0.05 %, 0.1 % (<i>tretinoin</i>)	NPB	AL
RETIN-A EXTERNAL GEL 0.01 %, 0.025 % (<i>tretinoin</i>)	NPB	AL
RETIN-A MICRO EXTERNAL GEL 0.04 %, 0.1 % (<i>tretinoin microsphere</i>)	NPB	AL

2020 Pharmacy Drug Guide - Premier Plus

The formulary is updated the first week of each month.

12/01/2020

Prescription Drug Name	Drug Tier	Coverage Requirements and Limits
RETIN-A MICRO PUMP EXTERNAL GEL 0.04 %, 0.06 %, 0.1 % (<i>tretinoin microsphere</i>)	NPB	AL
RETIN-A MICRO PUMP EXTERNAL GEL 0.08 % (<i>tretinoin microsphere</i>)	PB	AL
RHOFADE EXTERNAL CREAM 1 % (<i>oxymetazoline hcl</i>)	NPB	
<i>metronidazole</i> (Rosadan External Cream 0.75 %)	G	
<i>metronidazole</i> (Rosadan External Gel 0.75 %)	G	
SANTYL EXTERNAL OINTMENT 250 UNIT/GM (<i>collagenase</i>)	NPB	
<i>selenium sulfide external lotion 2.5 %</i>	G	
SERNIVO EXTERNAL EMULSION 0.05 % (<i>betamethasone dipropionate</i>)	NPB	
SILIQ SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 210 MG/1.5ML (<i>brodalumab</i>)	NPSP	PA; NPL; SP
SILVADENE EXTERNAL CREAM 1 % (<i>silver sulfadiazine</i>)	NPB	
<i>silver sulfadiazine external cream 1 %</i>	G	
SKLICE EXTERNAL LOTION 0.5 % (<i>ivermectin</i>)	NPB	#
SKYRIZI (150 MG DOSE) SUBCUTANEOUS PREFILLED SYRINGE KIT 75 MG/0.83ML (<i>risankizumab-rzaa</i>)	PSP	PA; IBC (Preferred agent for Psoriasis); NPL; SP
SOOLANTRA EXTERNAL CREAM 1 % (<i>ivermectin</i>)	NPB	
SORIATANE ORAL CAPSULE 10 MG, 25 MG (<i>acitretin</i>)	NPB	
SORILUX EXTERNAL FOAM 0.005 % (<i>calcipotriene</i>)	NPB	
<i>silver sulfadiazine</i> (Ssd External Cream 1 %)	G	
STELARA SUBCUTANEOUS SOLUTION 45 MG/0.5ML (<i>ustekinumab</i>)	PSP	PA; IBC (Preferred agent for Psoriasis. Preferred agent for Crohn's Disease and Ulcerative Colitis after failure of Humira. Not covered for Psoriatic Arthritis.); NPL; SP
STELARA SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 45 MG/0.5ML, 90 MG/ML (<i>ustekinumab</i>)	PSP	PA; IBC (Preferred agent for Psoriasis. Preferred agent for Crohn's Disease and Ulcerative Colitis after failure of Humira. Not covered for Psoriatic Arthritis.); NPL; SP

2020 Pharmacy Drug Guide - Premier Plus

The formulary is updated the first week of each month.

12/01/2020

Prescription Drug Name	Drug Tier	Coverage Requirements and Limits
sulconazole nitrate external cream 1 %	G	
sulconazole nitrate external solution 1 %	G	
sulfacetamide sodium (acne) external lotion 10 %	G	
SULFAMYLON EXTERNAL CREAM 85 MG/GM (mafenide acetate)	NPB	
SULFAMYLON EXTERNAL PACKET 5 % (mafenide acetate)	NPB	
SYNALAR EXTERNAL CREAM 0.025 % (fluocinolone acetonide)	NPB	
SYNALAR EXTERNAL OINTMENT 0.025 % (fluocinolone acetonide)	NPB	
SYNALAR EXTERNAL SOLUTION 0.01 % (fluocinolone acetonide)	NPB	
SYNERA EXTERNAL PATCH 70-70 MG (lidocaine-tetracaine)	NPB	PA; QL (10 patches per 30 days)
TACLONEX EXTERNAL OINTMENT 0.005-0.064 % (calcipotriene-betameth diprop)	NPB	
TACLONEX EXTERNAL SUSPENSION 0.005-0.064 % (calcipotriene-betameth diprop)	NPB	
tacrolimus external ointment 0.03 %, 0.1 %	G	
TALTZ SUBCUTANEOUS SOLUTION AUTO-INJECTOR 80 MG/ML (ixekizumab)	PSP	PA; IBC (Preferred agent for Psoriasis. Not covered for Psoriatic Arthritis or Ankylosing Spondylitis); NPL; SP
TALTZ SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 80 MG/ML (ixekizumab)	PSP	PA; IBC (Preferred agent for Psoriasis. Not covered for Psoriatic Arthritis or Ankylosing Spondylitis); NPL; SP
TARGETIN EXTERNAL GEL 1 % (bexarotene)	PSP	SP
tavaborole external solution 5 %	G	
tazarotene external cream 0.1 %	G	AL
TAZORAC EXTERNAL CREAM 0.05 %, 0.1 % (tazarotene)	PB	AL
TAZORAC EXTERNAL GEL 0.05 %, 0.1 % (tazarotene)	PB	AL
TEMOVATE EXTERNAL CREAM 0.05 % (clobetasol propionate)	NPB	

Prescription Drug Name	Drug Tier	Coverage Requirements and Limits
TEMOVATE EXTERNAL OINTMENT 0.05 % (<i>clobetasol propionate</i>)	NPB	
TEXACORT EXTERNAL SOLUTION 2.5 % (<i>hydrocortisone</i>)	NPB	
<i>silver sulfadiazine</i> (Thermazene External Cream 1 %)	G	
TOLAK EXTERNAL CREAM 4 % (<i>fluorouracil</i>)	PB	#
TOPICORT EXTERNAL CREAM 0.05 %, 0.25 % (<i>desoximetasone</i>)	NPB	
TOPICORT EXTERNAL GEL 0.05 % (<i>desoximetasone</i>)	NPB	
TOPICORT EXTERNAL OINTMENT 0.05 %, 0.25 % (<i>desoximetasone</i>)	NPB	
TOPICORT SPRAY EXTERNAL LIQUID 0.25 % (<i>desoximetasone</i>)	NPB	
TREMFYA SUBCUTANEOUS SOLUTION PEN-INJECTOR 100 MG/ML (<i>guselkumab</i>)	PSP	PA; IBC (Preferred agent for Psoriasis. Not covered for Psoriatic Arthritis.); NPL; SP
TREMFYA SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 100 MG/ML (<i>guselkumab</i>)	PSP	PA; IBC (Preferred agent for Psoriasis. Not covered for Psoriatic Arthritis.); NPL; SP
<i>tretinoin external cream 0.025 %, 0.05 %, 0.1 %</i>	G	AL
<i>tretinoin external gel 0.01 %, 0.025 %, 0.05 %</i>	G	AL
<i>tretinoin microsphere external gel 0.04 %, 0.1 %</i>	G	AL
<i>tretinoin microsphere pump external gel 0.04 %</i>	G	AL
<i>triamcinolone acetonide external aerosol solution 0.147 mg/gm</i>	G	
<i>triamcinolone acetonide external cream 0.025 %, 0.1 %, 0.5 %</i>	G	
<i>triamcinolone acetonide external lotion 0.025 %, 0.1 %</i>	G	
<i>triamcinolone acetonide external ointment 0.025 %, 0.1 %, 0.5 %</i>	G	
<i>triamcinolone acetonide (Triderm External Cream 0.1 %, 0.5 %)</i>	G	
ULTRAVATE EXTERNAL LOTION 0.05 % (<i>halobetasol propionate</i>)	NPB	#
VALCHLOR EXTERNAL GEL 0.016 % (<i>mechlorethamine hcl (topical)</i>)	NPSP	PA; #; SP
<i>benzoyl perox-hydrocortisone</i> (Vanoxide-Hc External Lotion 5-0.5 %)	NPB	

2020 Pharmacy Drug Guide - Premier Plus

The formulary is updated the first week of each month.

12/01/2020

Prescription Drug Name	Drug Tier	Coverage Requirements and Limits
VECTICAL EXTERNAL OINTMENT 3 MCG/GM (<i>calcitriol</i>)	NPB	
VELTIN EXTERNAL GEL 1.2-0.025 % (<i>clindamycin-tretinoin</i>)	NPB	PA; AL
VERDESO EXTERNAL FOAM 0.05 % (<i>desonide</i>)	NPB	
VEREGEN EXTERNAL OINTMENT 15 % (<i>sinecatechins</i>)	NPB	
VUSION EXTERNAL OINTMENT 0.25-15-81.35 % (<i>miconazole-zinc oxide-petrolat</i>)	NPB	
VYTONE EXTERNAL CREAM 1-1.9 % (<i>iodoquinol-hydrocortisone-aloe</i>)	NPB	
XEPI EXTERNAL CREAM 1 % (<i>ozenoxacin</i>)	NPB	
XERAC AC EXTERNAL SOLUTION 6.25 % (<i>aluminum chloride in alcohol</i>)	PB	
XERESE EXTERNAL CREAM 5-1 % (<i>acyclovir-hydrocortisone</i>)	NPB	
XOLEGEL EXTERNAL GEL 2 % (<i>ketoconazole</i>)	NPB	
<i>isotretinoin</i> (Zenatane Oral Capsule 10 Mg, 20 Mg, 30 Mg, 40 Mg)	G	PA; QL (2 capsules per 1 day)
ZIANA EXTERNAL GEL 1.2-0.025 % (<i>clindamycin-tretinoin</i>)	NPB	PA; AL
ZILXI EXTERNAL FOAM 1.5 % (<i>minocycline hcl micronized</i>)	NPB	
ZONALON EXTERNAL CREAM 5 % (<i>doxepin hcl (antipruritic)</i>)	NPB	QL (45 grams per 30 days)
ZOVIRAX EXTERNAL CREAM 5 % (<i>acyclovir</i>)	NPB	
ZOVIRAX EXTERNAL OINTMENT 5 % (<i>acyclovir</i>)	NPB	
ZYCLARA EXTERNAL CREAM 3.75 % (<i>imiquimod</i>)	NPB	
ZYCLARA PUMP EXTERNAL CREAM 2.5 %, 3.75 % (<i>imiquimod</i>)	NPB	
DIAGNOSTIC PRODUCTS		
ACCU-CHEK AVIVA PLUS IN VITRO STRIP (<i>glucose blood</i>)	PB	
ACCU-CHEK COMPACT PLUS IN VITRO STRIP (<i>glucose blood</i>)	PB	
ACCU-CHEK GUIDE IN VITRO STRIP (<i>glucose blood</i>)	PB	
ACCU-CHEK SMARTVIEW IN VITRO STRIP (<i>glucose blood</i>)	PB	

2020 Pharmacy Drug Guide - Premier Plus

The formulary is updated the first week of each month.

12/01/2020

Prescription Drug Name	Drug Tier	Coverage Requirements and Limits
ACCUTREND GLUCOSE IN VITRO STRIP (<i>glucose blood</i>)	NPB	
<i>active-medicated spec collect combination kit</i>	NPB	
ADVANCE INTUITION TEST IN VITRO STRIP (<i>glucose blood</i>)	NPB	
ADVANCE MICRO-DRAW TEST IN VITRO STRIP (<i>glucose blood</i>)	NPB	
ADVOCATE REDI-CODE IN VITRO STRIP (<i>glucose blood</i>)	NPB	
ADVOCATE REDI-CODE+ TEST IN VITRO STRIP (<i>glucose blood</i>)	NPB	
ADVOCATE TEST IN VITRO STRIP (<i>glucose blood</i>)	NPB	
AGAMATRIX AMP TEST IN VITRO STRIP (<i>glucose blood</i>)	NPB	
AGAMATRIX JAZZ TEST IN VITRO STRIP (<i>glucose blood</i>)	NPB	
AGAMATRIX KEYNOTE TEST IN VITRO STRIP (<i>glucose blood</i>)	NPB	
AGAMATRIX PRESTO TEST IN VITRO STRIP (<i>glucose blood</i>)	NPB	
ASSURE 3 TEST IN VITRO STRIP (<i>glucose blood</i>)	NPB	
ASSURE 4 TEST IN VITRO STRIP (<i>glucose blood</i>)	NPB	
ASSURE II CHECK IN VITRO STRIP (<i>glucose blood</i>)	NPB	
ASSURE II IN VITRO STRIP (<i>glucose blood</i>)	NPB	
ASSURE PLATINUM IN VITRO STRIP (<i>glucose blood</i>)	NPB	
ASSURE PRISM MULTI TEST IN VITRO STRIP (<i>glucose blood</i>)	NPB	
ASSURE PRO TEST IN VITRO STRIP (<i>glucose blood</i>)	NPB	
BIOSCANNER GLUCOSE TEST IN VITRO STRIP (<i>glucose blood</i>)	NPB	
<i>blood glucose test in vitro strip</i>	NPB	
CAREONE BLOOD GLUCOSE TEST IN VITRO STRIP (<i>glucose blood</i>)	NPB	
CARESENS N GLUCOSE TEST IN VITRO STRIP (<i>glucose blood</i>)	NPB	
CARETOUCH TEST IN VITRO STRIP (<i>glucose blood</i>)	NPB	
CHEMSTRIP 10 MD IN VITRO STRIP (<i>multiple urine tests</i>)	NPB	

2020 Pharmacy Drug Guide - Premier Plus

The formulary is updated the first week of each month.

12/01/2020

130

Prescription Drug Name	Drug Tier	Coverage Requirements and Limits
CHEMSTRIP 10/SG IN VITRO STRIP (<i>multiple urine tests</i>)	NPB	
CHEMSTRIP 2 GP IN VITRO STRIP (<i>multiple urine tests</i>)	NPB	
CHEMSTRIP 5 OB IN VITRO STRIP (<i>multiple urine tests</i>)	NPB	
CHEMSTRIP 7 IN VITRO STRIP (<i>multiple urine tests</i>)	NPB	
CHEMSTRIP 9 IN VITRO STRIP (<i>multiple urine tests</i>)	NPB	
CHEMSTRIP K IN VITRO STRIP (<i>acetone (urine) test</i>)	NPB	
CHEMSTRIP MICRAL IN VITRO STRIP (<i>albumin (urine) test</i>)	NPB	
CHEMSTRIP UGK IN VITRO STRIP (<i>urine glucose-ketones test</i>)	NPB	
CLEVER CHEK AUTO-CODE TEST IN VITRO STRIP (<i>glucose blood</i>)	NPB	
CLEVER CHEK AUTO-CODE VOICE IN VITRO STRIP (<i>glucose blood</i>)	NPB	
CLEVER CHEK TEST IN VITRO STRIP (<i>glucose blood</i>)	NPB	
CLEVER CHOICE AUTO-CODE TEST IN VITRO STRIP (<i>glucose blood</i>)	NPB	
CLEVER CHOICE MICRO TEST IN VITRO STRIP (<i>glucose blood</i>)	NPB	
CLEVER CHOICE NO CODING IN VITRO STRIP (<i>glucose blood</i>)	NPB	
CLEVER CHOICE TALK SYSTEM IN VITRO STRIP (<i>glucose blood</i>)	NPB	
CONTOUR NEXT TEST IN VITRO STRIP (<i>glucose blood</i>)	NPB	
CONTOUR TEST IN VITRO STRIP (<i>glucose blood</i>)	NPB	
COOL BLOOD GLUCOSE TEST STRIPS IN VITRO STRIP (<i>glucose blood</i>)	NPB	
CVS ADVANCED GLUCOSE TEST IN VITRO STRIP (<i>glucose blood</i>)	NPB	
CVS KETONE CARE IN VITRO STRIP (<i>urine glucose-ketones test</i>)	NPB	
CYSTOGRAPHIN-DILUTE URETHRAL SOLUTION 18 % (<i>diatrizoate meglumine</i>)	NPB	
D-CARE BLOOD GLUCOSE IN VITRO STRIP (<i>glucose blood</i>)	NPB	
DIASTIX IN VITRO STRIP (<i>glucose urine test-glucose ox</i>)	NPB	

Prescription Drug Name	Drug Tier	Coverage Requirements and Limits
DIATHRIVE BLOOD GLUCOSE TEST IN VITRO STRIP <i>(glucose blood)</i>	NPB	
<i>diattrue plus test in vitro strip</i>	NPB	
DUO-CARE TEST IN VITRO STRIP <i>(glucose blood)</i>	NPB	
<i>easy plus ii glucose test in vitro strip</i>	NPB	
EASY STEP TEST IN VITRO STRIP <i>(glucose blood)</i>	NPB	
<i>easy talk blood glucose test in vitro strip</i>	NPB	
EASY TOUCH TEST IN VITRO STRIP <i>(glucose blood)</i>	NPB	
<i>easy trak blood glucose test in vitro strip</i>	NPB	
EASYGLUCO IN VITRO STRIP <i>(glucose blood)</i>	NPB	
EASYGLUCO PLUS IN VITRO STRIP <i>(glucose blood)</i>	NPB	
EASYMAX 15 TEST IN VITRO STRIP <i>(glucose blood)</i>	NPB	
EASYMAX TEST IN VITRO STRIP <i>(glucose blood)</i>	NPB	
EASYPROM BLOOD GLUCOSE TEST IN VITRO STRIP <i>(glucose blood)</i>	NPB	
EASYPROM PLUS IN VITRO STRIP <i>(glucose blood)</i>	NPB	
<i>element compact test in vitro strip</i>	NPB	
ELEMENT TEST IN VITRO STRIP <i>(glucose blood)</i>	NPB	
EMBRACE BLOOD GLUCOSE TEST IN VITRO STRIP <i>(glucose blood)</i>	NPB	
EMBRACE EVO BLOOD GLUCOSE TEST IN VITRO STRIP <i>(glucose blood)</i>	NPB	
EMBRACE PRO GLUCOSE TEST IN VITRO STRIP <i>(glucose blood)</i>	NPB	
EMBRACE TALK GLUCOSE TEST IN VITRO STRIP <i>(glucose blood)</i>	NPB	
<i>eq blood glucose test in vitro strip</i>	NPB	
EVENCARE + BLOOD GLUCOSE TEST IN VITRO STRIP <i>(glucose blood)</i>	NPB	
EVENCARE BLOOD GLUCOSE TEST IN VITRO STRIP <i>(glucose blood)</i>	NPB	
EVENCARE G2 TEST IN VITRO STRIP <i>(glucose blood)</i>	NPB	
EVENCARE G3 TEST IN VITRO STRIP <i>(glucose blood)</i>	NPB	
EVENCARE MINI GLUCOSE TEST IN VITRO STRIP <i>(glucose blood)</i>	NPB	

Prescription Drug Name	Drug Tier	Coverage Requirements and Limits
EVOLUTION AUTOCODE IN VITRO STRIP (<i>glucose blood</i>)	NPB	
EXACTECH R-S-G TEST IN VITRO STRIP (<i>glucose blood</i>)	NPB	
EXACTECH TEST IN VITRO STRIP (<i>glucose blood</i>)	NPB	
EZ SMART BLOOD GLUCOSE TEST IN VITRO STRIP (<i>glucose blood</i>)	NPB	
EZ SMART PLUS GLUCOSE TEST IN VITRO STRIP (<i>glucose blood</i>)	NPB	
E-Z-HD ORAL SUSPENSION RECONSTITUTED 98 % (<i>barium sulfate</i>)	NPB	
E-Z-PAQUE ORAL SUSPENSION RECONSTITUTED 96 % (<i>barium sulfate</i>)	NPB	
FIFTY50 GLUCOSE TEST 2.0 IN VITRO STRIP (<i>glucose blood</i>)	NPB	
FORA BLOOD GLUCOSE TEST IN VITRO STRIP (<i>glucose blood</i>)	NPB	
FORA D15G BLOOD GLUCOSE TEST IN VITRO STRIP (<i>glucose blood</i>)	NPB	
FORA D20 BLOOD GLUCOSE TEST IN VITRO STRIP (<i>glucose blood</i>)	NPB	
FORA D40/G31 BLOOD GLUCOSE IN VITRO STRIP (<i>glucose blood</i>)	NPB	
FORA G20 BLOOD GLUCOSE TEST IN VITRO STRIP (<i>glucose blood</i>)	NPB	
FORA G30/PREM V10 GLUCOSE TEST IN VITRO STRIP (<i>glucose blood</i>)	NPB	
FORA GD20 TEST IN VITRO STRIP (<i>glucose blood</i>)	NPB	
FORA GD50 BLOOD GLUCOSE TEST IN VITRO STRIP (<i>glucose blood</i>)	NPB	
FORA GTEL BLOOD GLUCOSE TEST IN VITRO STRIP (<i>glucose blood</i>)	NPB	
FORA TN'G/TN'G VOICE IN VITRO STRIP (<i>glucose blood</i>)	NPB	
FORA V10 BLOOD GLUCOSE TEST IN VITRO STRIP (<i>glucose blood</i>)	NPB	
FORA V12 BLOOD GLUCOSE TEST IN VITRO STRIP (<i>glucose blood</i>)	NPB	

Prescription Drug Name	Drug Tier	Coverage Requirements and Limits
FORA V20 BLOOD GLUCOSE TEST IN VITRO STRIP <i>(glucose blood)</i>	NPB	
FORA V30A BLOOD GLUCOSE TEST IN VITRO STRIP <i>(glucose blood)</i>	NPB	
FORACARE GD40 TEST IN VITRO STRIP <i>(glucose blood)</i>	NPB	
FORACARE PREMIUM V10 TEST IN VITRO STRIP <i>(glucose blood)</i>	NPB	
FORACARE TEST N GO TEST IN VITRO STRIP <i>(glucose blood)</i>	NPB	
FORTISCARE TEST IN VITRO STRIP <i>(glucose blood)</i>	NPB	
FREESTYLE INSULINX TEST IN VITRO STRIP <i>(glucose blood)</i>	NPB	
FREESTYLE LITE TEST IN VITRO STRIP <i>(glucose blood)</i>	NPB	
FREESTYLE PRECISION NEO TEST IN VITRO STRIP <i>(glucose blood)</i>	NPB	
FREESTYLE TEST IN VITRO STRIP <i>(glucose blood)</i>	NPB	
ge100 blood glucose test in vitro strip	NPB	
GENULTIMATE TEST IN VITRO STRIP <i>(glucose blood)</i>	NPB	
ght test in vitro strip	NPB	
GLUCO PERFECT 3 TEST IN VITRO STRIP <i>(glucose blood)</i>	NPB	
GLUCOCARD 01 SENSOR PLUS IN VITRO STRIP <i>(glucose blood)</i>	NPB	
GLUCOCARD EXPRESSION TEST IN VITRO STRIP <i>(glucose blood)</i>	NPB	
GLUCOCARD SHINE TEST IN VITRO STRIP <i>(glucose blood)</i>	NPB	
GLUCOCARD VITAL TEST IN VITRO STRIP <i>(glucose blood)</i>	NPB	
GLUCOCARD X-SENSOR IN VITRO STRIP <i>(glucose blood)</i>	NPB	
GLUCOCOM TEST IN VITRO STRIP <i>(glucose blood)</i>	NPB	
GLUCONAVII BLOOD GLUCOSE TEST IN VITRO STRIP <i>(glucose blood)</i>	NPB	
glucose meter test in vitro strip	NPB	
gnp easy touch glucose test in vitro strip	NPB	

2020 Pharmacy Drug Guide - Premier Plus

The formulary is updated the first week of each month.

12/01/2020

134

Prescription Drug Name	Drug Tier	Coverage Requirements and Limits
GOJJI BLOOD GLUCOSE TEST IN VITRO STRIP <i>(glucose blood)</i>	NPB	
<i>goodsense blood glucose in vitro strip</i>	NPB	
HW EMBRACE PRO GLUCOSE TEST IN VITRO STRIP <i>(glucose blood)</i>	NPB	
HW EMBRACE TALK GLUCOSE TEST IN VITRO STRIP <i>(glucose blood)</i>	NPB	
IGLUCOSE TEST STRIPS IN VITRO STRIP <i>(glucose blood)</i>	NPB	
IN TOUCH BLOOD GLUCOSE TEST IN VITRO STRIP <i>(glucose blood)</i>	NPB	
INFINITY BLOOD GLUCOSE TEST IN VITRO STRIP <i>(glucose blood)</i>	NPB	
INFINITY VOICE IN VITRO STRIP <i>(glucose blood)</i>	NPB	
KETO-DIASTIX IN VITRO STRIP <i>(urine glucose-ketones test)</i>	NPB	
KETOSTIX IN VITRO STRIP <i>(acetone (urine) test)</i>	NPB	
<i>kroger blood glucose test in vitro strip</i>	NPB	
<i>kroger premium glucose test in vitro strip</i>	NPB	
<i>kroger test in vitro strip</i>	NPB	
LIBERTY NEXT GENERATION TEST IN VITRO STRIP <i>(glucose blood)</i>	NPB	
<i>liberty test in vitro strip</i>	NPB	
LIQUID E-Z-PAQUE ORAL SUSPENSION 60 % <i>(barium sulfate)</i>	NPB	
<i>meijer blood glucose test in vitro strip</i>	NPB	
<i>meijer essential glucose test in vitro strip</i>	NPB	
<i>meijer premium glucose test in vitro strip</i>	NPB	
MEIJER TRUETEST TEST IN VITRO STRIP <i>(glucose blood)</i>	NPB	
MEIJER TRUETRACK TEST IN VITRO STRIP <i>(glucose blood)</i>	NPB	
MICRODOT TEST IN VITRO STRIP <i>(glucose blood)</i>	NPB	
MM EASY TOUCH GLUCOSE IN VITRO STRIP <i>(glucose blood)</i>	NPB	
MYGLUCOHEALTH TEST IN VITRO STRIP <i>(glucose blood)</i>	NPB	

2020 Pharmacy Drug Guide - Premier Plus

The formulary is updated the first week of each month.

12/01/2020

Prescription Drug Name	Drug Tier	Coverage Requirements and Limits
NEUTEK 2TEK TEST IN VITRO STRIP (<i>glucose blood</i>)	NPB	
NOVA MAX GLUCOSE TEST IN VITRO STRIP (<i>glucose blood</i>)	NPB	
<i>one drop test in vitro strip</i>	NPB	
ONETOUCH ULTRA IN VITRO STRIP (<i>glucose blood</i>)	NPB	
ONETOUCH VERIO IN VITRO STRIP (<i>glucose blood</i>)	NPB	
OPTIUM TEST IN VITRO STRIP (<i>glucose blood</i>)	NPB	
OPTIUMEZ TEST IN VITRO STRIP (<i>glucose blood</i>)	NPB	
PHARMACIST CHOICE AUTOCODE IN VITRO STRIP (<i>glucose blood</i>)	NPB	
<i>pharmacist choice no coding in vitro strip</i>	NPB	
POCKETCHEM EZ TEST IN VITRO STRIP (<i>glucose blood</i>)	NPB	
PRECISION PCX IN VITRO STRIP (<i>glucose blood</i>)	NPB	
PRECISION PCX PLUS TEST IN VITRO STRIP (<i>glucose blood</i>)	NPB	
PRECISION POINT OF CARE TEST IN VITRO STRIP (<i>glucose blood</i>)	NPB	
PRECISION QID TEST IN VITRO STRIP (<i>glucose blood</i>)	NPB	
PRECISION SOF-TACT TEST IN VITRO STRIP (<i>glucose blood</i>)	NPB	
PRECISION XTRA BLOOD GLUCOSE IN VITRO STRIP (<i>glucose blood</i>)	NPB	
PRECISION XTRA KETONE IN VITRO STRIP (<i>ketone blood test</i>)	PB	
<i>premium blood glucose test in vitro strip</i>	NPB	
<i>pro voice v8/v9 glucose in vitro strip</i>	NPB	
PRODIGY NO CODING BLOOD GLUC IN VITRO STRIP (<i>glucose blood</i>)	NPB	
PTS PANELS GLUCOSE TEST IN VITRO STRIP (<i>glucose blood</i>)	NPB	
QUICKTEK TEST IN VITRO STRIP (<i>glucose blood</i>)	NPB	
QUINTET AC BLOOD GLUCOSE TEST IN VITRO STRIP (<i>glucose blood</i>)	NPB	
QUINTET BLOOD GLUCOSE TEST IN VITRO STRIP (<i>glucose blood</i>)	NPB	
RA TRUETEST TEST IN VITRO STRIP (<i>glucose blood</i>)	NPB	

2020 Pharmacy Drug Guide - Premier Plus

The formulary is updated the first week of each month.

12/01/2020

136

Prescription Drug Name	Drug Tier	Coverage Requirements and Limits
REFUAH PLUS BLOOD GLUCOSE TEST IN VITRO STRIP (<i>glucose blood</i>)	NPB	
RELION BLOOD GLUCOSE TEST IN VITRO STRIP (<i>glucose blood</i>)	NPB	
RELION CONFIRM/MICRO TEST IN VITRO STRIP (<i>glucose blood</i>)	NPB	
RELION KETONE IN VITRO STRIP (<i>acetone (urine) test</i>)	NPB	
RELION PRIME TEST IN VITRO STRIP (<i>glucose blood</i>)	NPB	
RELION ULTIMA TEST IN VITRO STRIP (<i>glucose blood</i>)	NPB	
REXALL BLOOD GLUCOSE TEST IN VITRO STRIP (<i>glucose blood</i>)	NPB	
RIGHTEST GS100 BLOOD GLUCOSE IN VITRO STRIP (<i>glucose blood</i>)	NPB	
RIGHTEST GS300 BLOOD GLUCOSE IN VITRO STRIP (<i>glucose blood</i>)	NPB	
RIGHTEST GS550 BLOOD GLUCOSE IN VITRO STRIP (<i>glucose blood</i>)	NPB	
SITZMARKS ORAL CAPSULE (<i>barium sulfate</i>)	NPB	
SMART SENSE PREMIUM TEST IN VITRO STRIP (<i>glucose blood</i>)	NPB	
SMART SENSE VALUE TEST IN VITRO STRIP (<i>glucose blood</i>)	NPB	
SMARTTEST BLOOD GLUCOSE TEST IN VITRO STRIP (<i>glucose blood</i>)	NPB	
SOLUS V2 TEST IN VITRO STRIP (<i>glucose blood</i>)	NPB	
SUPREME TEST IN VITRO STRIP (<i>glucose blood</i>)	NPB	
SURE EDGE TEST IN VITRO STRIP (<i>glucose blood</i>)	NPB	
SURECHEK BLOOD GLUCOSE TEST IN VITRO STRIP (<i>glucose blood</i>)	NPB	
SURE-TEST EASYPLUS MINI TEST IN VITRO STRIP (<i>glucose blood</i>)	NPB	
TELCARE BLOOD GLUCOSE TEST IN VITRO STRIP (<i>glucose blood</i>)	NPB	
<i>tgt blood glucose test in vitro strip</i>	NPB	
THYROGEN INTRAMUSCULAR SOLUTION RECONSTITUTED 1.1 MG (<i>thyrotropin alfa</i>)	PSP	SP

Prescription Drug Name	Drug Tier	Coverage Requirements and Limits
TRUE METRIX BLOOD GLUCOSE TEST IN VITRO STRIP (<i>glucose blood</i>)	NPB	
TRUETEST TEST IN VITRO STRIP (<i>glucose blood</i>)	NPB	
TRUETRACK TEST IN VITRO STRIP (<i>glucose blood</i>)	NPB	
ULTIMA TEST IN VITRO STRIP (<i>glucose blood</i>)	NPB	
ULTRATRAK PRO TEST IN VITRO STRIP (<i>glucose blood</i>)	NPB	
ULTRATRAK ULTIMATE TEST IN VITRO STRIP (<i>glucose blood</i>)	NPB	
UNISTRIP1 GENERIC IN VITRO STRIP (<i>glucose blood</i>)	NPB	
VARIBAR PUDDING ORAL PASTE 40 % (<i>barium sulfate</i>)	NPB	
verasens blood glucose test in vitro strip	NPB	
VIVAGUARD INO TEST STRIPS IN VITRO STRIP (<i>glucose blood</i>)	NPB	
VOCAL POINT BLOOD GLUCOSE TEST IN VITRO STRIP (<i>glucose blood</i>)	NPB	
DIGESTIVE AIDS - DRUGS FOR THE STOMACH		
CREON ORAL CAPSULE DELAYED RELEASE PARTICLES 12000 UNIT, 24000-76000 UNIT, 3000-9500 UNIT, 36000 UNIT, 6000 UNIT (<i>pancrelipase (lip-prot-amyl)</i>)	PB	
PANCREAZE ORAL CAPSULE DELAYED RELEASE PARTICLES 10500 UNIT, 16800 UNIT, 21000 UNIT, 2600 UNIT, 4200 UNIT (<i>pancrelipase (lip-prot-amyl)</i>)	NPB	
PERTZYE ORAL CAPSULE DELAYED RELEASE PARTICLES 16000 UNIT, 24000-86250 UNIT, 4000 UNIT, 8000 UNIT (<i>pancrelipase (lip-prot-amyl)</i>)	NPB	
SUCRAID ORAL SOLUTION 8500 UNIT/ML (<i>sacrosidase</i>)	NPSP	SP
VIOKACE ORAL TABLET 10440 UNIT, 20880 UNIT (<i>pancrelipase (lip-prot-amyl)</i>)	PB	
ZENPEP ORAL CAPSULE DELAYED RELEASE PARTICLES 10000-32000 UNIT, 15000-47000 UNIT, 20000-63000 UNIT, 25000-79000 UNIT, 3000-14000 UNIT, 40000-126000 UNIT, 5000-24000 UNIT (<i>pancrelipase (lip-prot-amyl)</i>)	PB	
DIURETICS - DRUGS FOR THE HEART		
acetazolamide er oral capsule extended release 12 hour 500 mg	G	
acetazolamide oral tablet 250 mg	G	

2020 Pharmacy Drug Guide - Premier Plus

The formulary is updated the first week of each month.

12/01/2020

Prescription Drug Name	Drug Tier	Coverage Requirements and Limits
ALDACTAZIDE ORAL TABLET 25-25 MG, 50-50 MG (spironolactone-hctz)	NPB	
ALDACTONE ORAL TABLET 100 MG, 25 MG, 50 MG (spironolactone)	NPB	
<i>amiloride hcl oral tablet 5 mg</i>	G	
<i>amiloride-hydrochlorothiazide oral tablet 5-50 mg</i>	G	LGC
<i>bumetanide oral tablet 0.5 mg, 1 mg, 2 mg</i>	G	
CAROSPIR ORAL SUSPENSION 25 MG/5ML (spironolactone)	NPB	
<i>chlorthalidone oral tablet 25 mg, 50 mg</i>	G	
DIURIL ORAL SUSPENSION 250 MG/5ML (chlorothiazide)	NPB	
DYAZIDE ORAL CAPSULE 37.5-25 MG (triamterene-hctz)	NPB	
DYRENIUM ORAL CAPSULE 100 MG, 50 MG (triamterene)	NPB	
EDECIN ORAL TABLET 25 MG (ethacrynic acid)	NPB	
<i>ethacrynic acid oral tablet 25 mg</i>	G	
<i>furosemide oral solution 10 mg/ml</i>	G	
<i>furosemide oral tablet 20 mg, 40 mg, 80 mg</i>	G	LGC
<i>hydrochlorothiazide oral capsule 12.5 mg</i>	G	LGC
<i>hydrochlorothiazide oral tablet 12.5 mg</i>	G	
<i>hydrochlorothiazide oral tablet 25 mg, 50 mg</i>	G	LGC
<i>indapamide oral tablet 1.25 mg, 2.5 mg</i>	G	
KEVEYIS ORAL TABLET 50 MG (dichlorphenamide)	NPSP	PA
LASIX ORAL TABLET 20 MG, 40 MG, 80 MG (furosemide)	NPB	
MAXZIDE ORAL TABLET 75-50 MG (triamterene-hctz)	NPB	
MAXZIDE-25 ORAL TABLET 37.5-25 MG (triamterene-hctz)	NPB	
<i>methazolamide oral tablet 25 mg, 50 mg</i>	G	
<i>metolazone oral tablet 10 mg, 2.5 mg, 5 mg</i>	G	
<i>spironolactone oral tablet 100 mg, 50 mg</i>	G	
<i>spironolactone oral tablet 25 mg</i>	G	LGC
<i>spironolactone-hctz oral tablet 25-25 mg</i>	G	
<i>torsemide oral tablet 10 mg, 100 mg, 20 mg, 5 mg</i>	G	
<i>triamterene oral capsule 100 mg, 50 mg</i>	G	

2020 Pharmacy Drug Guide - Premier Plus

The formulary is updated the first week of each month.

12/01/2020

Prescription Drug Name	Drug Tier	Coverage Requirements and Limits
triamterene-hctz oral capsule 37.5-25 mg	G	LGC
triamterene-hctz oral tablet 37.5-25 mg, 75-50 mg	G	LGC
ENDOCRINE AND METABOLIC AGENTS - MISC. - HORMONES		
ACTHAR INJECTION GEL 80 UNIT/ML (<i>corticotropin</i>)	NPSP	PA; NPL; SP
ACTONEL ORAL TABLET 150 MG, 35 MG (<i>risedronate sodium</i>)	NPB	
ALDURAZYME INTRAVENOUS SOLUTION 2.9 MG/5ML (<i>laronidase</i>)	PSP	PA; NPL; SP
<i>alendronate sodium oral solution 70 mg/75ml</i>	G	
<i>alendronate sodium oral tablet 10 mg, 35 mg, 5 mg, 70 mg</i>	G	
AMMONUL INTRAVENOUS SOLUTION 10-10 % (<i>sod benz-sod phenylacet</i>)	NPSP	SP
ATELVIA ORAL TABLET DELAYED RELEASE 35 MG (<i>risedronate sodium</i>)	NPB	
BINOSTO ORAL TABLET EFFERVESCENT 70 MG (<i>alendronate sodium</i>)	NPB	
BONIVA INTRAVENOUS SOLUTION 3 MG/3ML (<i>ibandronate sodium</i>)	NPSP	SP
BONIVA ORAL TABLET 150 MG (<i>ibandronate sodium</i>)	NPB	
BUPHENYL ORAL POWDER 3 GM/TSP (<i>sodium phenylbutyrate</i>)	NPSP	PA; SP
BUPHENYL ORAL TABLET 500 MG (<i>sodium phenylbutyrate</i>)	NPSP	PA; SP
BYNFEZIA PEN SUBCUTANEOUS SOLUTION PEN- INJECTOR 2500 MCG/ML (2.8 ML) (<i>octreotide acetate</i>)	NPSP	PA; SP
<i>cabergoline oral tablet 0.5 mg</i>	G	
<i>calcitonin (salmon) nasal solution 200 unit/act</i>	G	
<i>calcitriol oral capsule 0.25 mcg, 0.5 mcg</i>	G	
<i>calcitriol oral solution 1 mcg/ml</i>	G	
CARBAGLU ORAL TABLET 200 MG (<i>carglumic acid</i>)	NPSP	PA; #; SP
CARNITOR ORAL SOLUTION 1 GM/10ML (<i>levocarnitine</i>)	NPB	
CARNITOR SF ORAL SOLUTION 1 GM/10ML (<i>levocarnitine</i>)	NPB	
CYSTADANE ORAL POWDER (<i>betaine</i>)	PSP	PA; SP; UF9 (PSP)
DDAVP NASAL SOLUTION 0.01 % (<i>desmopressin acetate spray</i>)	NPB	

2020 Pharmacy Drug Guide - Premier Plus

The formulary is updated the first week of each month.

12/01/2020

Prescription Drug Name	Drug Tier	Coverage Requirements and Limits
DDAVP ORAL TABLET 0.1 MG, 0.2 MG (<i>desmopressin acetate</i>)	NPB	
<i>desmopressin ace spray refrig nasal solution 0.01 %</i>	G	
<i>desmopressin acetate oral tablet 0.1 mg, 0.2 mg</i>	G	
<i>desmopressin acetate spray nasal solution 0.01 %</i>	G	
<i>doxercalciferol oral capsule 0.5 mcg, 1 mcg, 2.5 mcg</i>	G	
ELAPRASE INTRAVENOUS SOLUTION 6 MG/3ML (<i>idursulfase</i>)	PSP	PA; NPL; SP
EVENITY SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 105 MG/1.17ML (<i>romosozumab-aqqg</i>)	NPSP	PA; NPL; SP
EVISTA ORAL TABLET 60 MG (<i>raloxifene hcl</i>)	NPB	
FABRAZYME INTRAVENOUS SOLUTION RECONSTITUTED 35 MG, 5 MG (<i>agalsidase beta</i>)	PSP	PA; NPL; SP
FENSOLVI (6 MONTH) SUBCUTANEOUS KIT 45 MG (PED) (<i>leuprolide acetate (6 month)</i>)	NPSP	PA; SP
FORTEO SUBCUTANEOUS SOLUTION PEN-INJECTOR 600 MCG/2.4ML (<i>teriparatide (recombinant)</i>)	PSP	PA; #
FOSAMAX ORAL TABLET 70 MG (<i>alendronate sodium</i>)	NPB	
FOSAMAX PLUS D ORAL TABLET 70-2800 MG-UNIT, 70-5600 MG-UNIT (<i>alendronate-cholecalciferol</i>)	NPB	#
GALAFOLD ORAL CAPSULE 123 MG (<i>migalastat hcl</i>)	NPSP	PA; SP
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 (<i>somatropin</i>)	NPSP	PA; NPL; SP
GENOTROPIN SUBCUTANEOUS SOLUTION RECONSTITUTED 12 MG, 5 MG (<i>somatropin</i>)	NPSP	PA; NPL; SP
HUMATROPE INJECTION SOLUTION RECONSTITUTED 12 MG, 24 MG, 5 MG, 6 MG (<i>somatropin</i>)	PSP	PA; NPL; SP
<i>ibandronate sodium intravenous solution 3 mg/3ml</i>	PSP	SP
<i>ibandronate sodium oral tablet 150 mg</i>	G	
INCRELEX SUBCUTANEOUS SOLUTION 40 MG/4ML (<i>mecasermin</i>)	PSP	PA; NPL; SP
ISTURISA ORAL TABLET 1 MG, 10 MG, 5 MG (<i>osilodrostat phosphate</i>)	NPSP	PA; SP

Prescription Drug Name	Drug Tier	Coverage Requirements and Limits
JYNARQUE ORAL TABLET THERAPY PACK 15 MG, 30 & 15 MG, 45 & 15 MG, 60 & 30 MG, 90 & 30 MG (<i>tolvaptan</i>)	PSP	PA; SP
KANUMA INTRAVENOUS SOLUTION 20 MG/10ML (<i>sebelipase alfa</i>)	PSP	PA; NPL; SP
KUVAN ORAL PACKET 100 MG, 500 MG (<i>sapropterin dihydrochloride</i>)	PSP	PA; #; SP; UF9 (PSP)
KUVAN ORAL TABLET SOLUBLE 100 MG (<i>sapropterin dihydrochloride</i>)	PSP	PA; #; SP; UF9 (PSP)
<i>levocarnitine oral solution 1 gm/10ml</i>	G	
LUMIZYME INTRAVENOUS SOLUTION RECONSTITUTED 50 MG (<i>alglucosidase alfa</i>)	NPSP	PA; NPL; SP
LUPANETA PACK COMBINATION KIT 11.25 & 5 MG, 3.75 & 5 MG (<i>leuprolide & norethindrone</i>)	NPSP	PA; SP
LUPRON DEPOT-PED (1-MONTH) INTRAMUSCULAR KIT 11.25 MG, 15 MG, 7.5 MG (<i>leuprolide acetate</i>)	PSP	PA; #; SP
LUPRON DEPOT-PED (3-MONTH) INTRAMUSCULAR KIT 11.25 MG (PED), 30 MG (PED) (<i>leuprolide acetate (3 month)</i>)	PSP	PA; #; SP
MIACALCIN NASAL SOLUTION 200 UNIT/ACT (<i>calcitonin (salmon)</i>)	NPB	
MYALEPT SUBCUTANEOUS SOLUTION RECONSTITUTED 11.3 MG (<i>metreleptin</i>)	PSP	PA; NPL; SP
MYCAPSSA ORAL CAPSULE DELAYED RELEASE 20 MG (<i>octreotide acetate</i>)	NPSP	PA; SP
NAGLAZYME INTRAVENOUS SOLUTION 1 MG/ML (<i>galsulfase</i>)	PSP	PA; NPL; SP
NATPARA SUBCUTANEOUS CARTRIDGE 100 MCG, 25 MCG, 50 MCG, 75 MCG (<i>parathyroid hormone (recomb)</i>)	NPSP	PA; NPL
<i>nitisinone oral capsule 10 mg, 2 mg, 5 mg</i>	PSP	PA; SP
NITYR ORAL TABLET 10 MG, 2 MG, 5 MG (<i>nitisinone</i>)	NPSP	PA; SP
NOCDURNA SUBLINGUAL TABLET SUBLINGUAL 27.7 MCG, 55.3 MCG (<i>desmopressin acetate</i>)	NPB	
NORDITROPIN FLEXPRO SUBCUTANEOUS SOLUTION PEN-INJECTOR 10 MG/1.5ML, 15 MG/1.5ML, 30 MG/3ML, 5 MG/1.5ML (<i>somatropin</i>)	NPSP	PA
NUTROPIN AQ NUSPIN 10 SUBCUTANEOUS SOLUTION PEN-INJECTOR 10 MG/2ML (<i>somatropin</i>)	NPSP	PA

2020 Pharmacy Drug Guide - Premier Plus

The formulary is updated the first week of each month.

12/01/2020

142

Prescription Drug Name	Drug Tier	Coverage Requirements and Limits
NUTROPIN AQ NUSPIN 20 SUBCUTANEOUS SOLUTION PEN-INJECTOR 20 MG/2ML (<i>somatropin</i>)	NPSP	PA
NUTROPIN AQ NUSPIN 5 SUBCUTANEOUS SOLUTION PEN-INJECTOR 5 MG/2ML (<i>somatropin</i>)	NPSP	PA
<i>octreotide acetate injection solution 100 mcg/ml, 1000 mcg/ml, 200 mcg/ml, 50 mcg/ml, 500 mcg/ml</i>	G	PA; SP
OMNITROPE SUBCUTANEOUS SOLUTION CARTRIDGE 10 MG/1.5ML, 5 MG/1.5ML (<i>somatropin</i>)	NPSP	PA
OMNITROPE SUBCUTANEOUS SOLUTION RECONSTITUTED 5.8 MG (<i>somatropin</i>)	NPSP	PA; NPL; SP
ORFADIN ORAL CAPSULE 10 MG, 2 MG, 5 MG (<i>nitisinone</i>)	PSP	PA; SP
ORFADIN ORAL CAPSULE 20 MG (<i>nitisinone</i>)	PSP	PA
ORFADIN ORAL SUSPENSION 4 MG/ML (<i>nitisinone</i>)	PSP	PA; SP
ORILISSA ORAL TABLET 150 MG, 200 MG (<i>elagolix sodium</i>)	NPSP	PA; SP
OSPHENA ORAL TABLET 60 MG (<i>ospemifene</i>)	NPB	
PALYNZIQ SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 10 MG/0.5ML, 2.5 MG/0.5ML, 20 MG/ML (<i>pegvaliase-pqpz</i>)	NPSP	PA; SP
<i>pamidronate disodium intravenous solution 30 mg/10ml, 6 mg/ml, 90 mg/10ml</i>	PSP	SP
<i>pamidronate disodium intravenous solution reconstituted 30 mg, 90 mg</i>	PSP	SP
<i>paricalcitol oral capsule 1 mcg, 2 mcg, 4 mcg</i>	G	
<i>raloxifene hcl oral tablet 60 mg</i>	CE	N2 (G)
RAVICTI ORAL LIQUID 1.1 GM/ML (<i>glycerol phenylbutyrate</i>)	NPSP	PA; SP
RAYALDEE ORAL CAPSULE EXTENDED RELEASE 30 MCG (<i>calcifediol</i>)	NPB	
RECLAST INTRAVENOUS SOLUTION 5 MG/100ML (<i>zoledronic acid</i>)	NPSP	SP
<i>risedronate sodium oral tablet 150 mg, 30 mg, 35 mg, 5 mg</i>	G	
<i>risedronate sodium oral tablet delayed release 35 mg</i>	G	
ROCALTROL ORAL CAPSULE 0.25 MCG, 0.5 MCG (<i>calcitriol</i>)	NPB	
ROCALTROL ORAL SOLUTION 1 MCG/ML (<i>calcitriol</i>)	NPB	

2020 Pharmacy Drug Guide - Premier Plus

The formulary is updated the first week of each month.

12/01/2020

Prescription Drug Name	Drug Tier	Coverage Requirements and Limits
SAIZEN INJECTION SOLUTION RECONSTITUTED 5 MG, 8.8 MG (<i>somatropin (non-refrigerated)</i>)	NPSP	PA; NPL; SP
SAIZENPREP INJECTION SOLUTION RECONSTITUTED 8.8 MG (<i>somatropin (non-refrigerated)</i>)	NPSP	PA; SP
SAMSCA ORAL TABLET 15 MG, 30 MG (<i>tolvaptan</i>)	PSP	PA; #; SP
SANDOSTATIN INJECTION SOLUTION 100 MCG/ML, 50 MCG/ML, 500 MCG/ML (<i>octreotide acetate</i>)	NPSP	PA; SP
SANDOSTATIN LAR DEPOT INTRAMUSCULAR KIT 10 MG, 20 MG, 30 MG (<i>octreotide acetate</i>)	NPSP	PA; #; SP
<i>sapropterin dihydrochloride oral packet 100 mg, 500 mg</i>	PSP	PA; SP
<i>sapropterin dihydrochloride oral tablet soluble 100 mg</i>	PSP	PA; SP
SENSIPAR ORAL TABLET 30 MG, 60 MG, 90 MG (<i>cinacalcet hcl</i>)	NPB	
SEROSTIM SUBCUTANEOUS SOLUTION RECONSTITUTED 4 MG, 5 MG, 6 MG (<i>somatropin (non-refrigerated)</i>)	NPSP	PA; NPL; SP
SIGNIFOR LAR INTRAMUSCULAR SUSPENSION RECONSTITUTED ER 10 MG, 20 MG, 30 MG, 40 MG, 60 MG (<i>pasireotide pamoate</i>)	NPSP	PA; SP
SIGNIFOR SUBCUTANEOUS SOLUTION 0.3 MG/ML, 0.6 MG/ML, 0.9 MG/ML (<i>pasireotide diaspartate</i>)	NPSP	PA; SP; UF9 (PSP)
<i>sod benz-sod phenylacet intravenous solution 10-10 %</i>	G	
<i>sodium phenylbutyrate oral powder 3 gm/tsp</i>	PSP	PA; SP
<i>sodium phenylbutyrate oral tablet 500 mg</i>	PSP	PA; SP
SOMATULINE DEPOT SUBCUTANEOUS SOLUTION 120 MG/0.5ML, 60 MG/0.2ML, 90 MG/0.3ML (<i>lanreotide acetate</i>)	NPSP	PA; #; SP
SOMAVERT SUBCUTANEOUS SOLUTION RECONSTITUTED 10 MG, 15 MG, 20 MG, 25 MG, 30 MG (<i>pegvisomant</i>)	NPSP	PA; #; SP
STIMATE NASAL SOLUTION 1.5 MG/ML (<i>desmopressin acetate</i>)	NPB	
STRENSIQ SUBCUTANEOUS SOLUTION 18 MG/0.45ML, 28 MG/0.7ML, 40 MG/ML, 80 MG/0.8ML (<i>asfotase alfa</i>)	NPSP	PA; NPL; SP
SYNAREL NASAL SOLUTION 2 MG/ML (<i>nafarelin acetate</i>)	NPSP	PA; SP; UF9 (PSP)

2020 Pharmacy Drug Guide - Premier Plus

The formulary is updated the first week of each month.

12/01/2020

Prescription Drug Name	Drug Tier	Coverage Requirements and Limits
<i>teriparatide (recombinant) subcutaneous solution pen-injector 620 mcg/2.48ml</i>	NPSP	PA; NPL; SP
<i>tolvaptan oral tablet 30 mg</i>	PSP	PA; SP
TRIPTODUR INTRAMUSCULAR SUSPENSION RECONSTITUTED ER 22.5 MG (<i>triptorelin pamoate</i>)	NPSP	PA; SP
TYMLOS SUBCUTANEOUS SOLUTION PEN-INJECTOR 3120 MCG/1.56ML (<i>abaloparatide</i>)	PSP	PA; NPL; SP
VIMIZIM INTRAVENOUS SOLUTION 5 MG/5ML (<i>elosulfase alfa</i>)	PSP	PA; NPL; SP
XGEVA SUBCUTANEOUS SOLUTION 120 MG/1.7ML (<i>denosumab</i>)	NPSP	PA; NPL; SP
XURIDEN ORAL PACKET 2 GM (<i>uridine triacetate</i>)	PSP	PA; SP
ZEMPLAR ORAL CAPSULE 1 MCG, 2 MCG (<i>paricalcitol</i>)	NPB	
<i>zoledronic acid intravenous concentrate 4 mg/5ml</i>	PSP	SP
<i>zoledronic acid intravenous solution 4 mg/100ml, 5 mg/100ml</i>	PSP	SP
ZOMACTON (FOR ZOMA-JET 10) SUBCUTANEOUS SOLUTION RECONSTITUTED 10 MG (<i>somatropin</i>)	NPSP	PA; SP
ZOMACTON SUBCUTANEOUS SOLUTION RECONSTITUTED 10 MG, 5 MG (<i>somatropin</i>)	NPSP	PA; NPL
ZORBTIVE SUBCUTANEOUS SOLUTION RECONSTITUTED 8.8 MG (<i>somatropin (non-refrigerated)</i>)	NPSP	PA; NPL; SP
ESTROGENS - HORMONES		
ACTIVELLA ORAL TABLET 1-0.5 MG (<i>estradiol-norethindrone acet</i>)	NPB	
ALORA TRANSDERMAL PATCH TWICE WEEKLY 0.025 MG/24HR, 0.05 MG/24HR, 0.075 MG/24HR, 0.1 MG/24HR (<i>estradiol</i>)	NPB	
<i>estradiol-norethindrone acet</i> (Amabelz Oral Tablet 0.5-0.1 Mg, 1-0.5 Mg)	G	
ANGELIQ ORAL TABLET 0.25-0.5 MG, 0.5-1 MG (<i>drospirenone-estradiol</i>)	NPB	
BIJUVA ORAL CAPSULE 1-100 MG (<i>estradiol-progesterone</i>)	NPB	
CLIMARA PRO TRANSDERMAL PATCH WEEKLY 0.045-0.015 MG/DAY (<i>estradiol-levonorgestrel</i>)	NPB	#
CLIMARA 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 (<i>estradiol</i>)	NPB	

2020 Pharmacy Drug Guide - Premier Plus

The formulary is updated the first week of each month.

12/01/2020

Prescription Drug Name	Drug Tier	Coverage Requirements and Limits
COMBIPATCH TRANSDERMAL PATCH TWICE WEEKLY 0.05-0.14 MG/DAY, 0.05-0.25 MG/DAY (<i>estradiol-norethindrone acet</i>)	NPB	
DIVIGEL TRANSDERMAL GEL 0.25 MG/0.25GM, 0.5 MG/0.5GM, 0.75 MG/0.75GM, 1 MG/GM (<i>estradiol</i>)	NPB	
DIVIGEL TRANSDERMAL GEL 1.25 MG/1.25GM (<i>estradiol</i>)	PB	
DUAVEE ORAL TABLET 0.45-20 MG (<i>conj estrogens-bazedoxifene</i>)	PB	
ELESTRIN TRANSDERMAL GEL 0.52 MG/0.87 GM (0.06%) (<i>estradiol</i>)	NPB	
ESTRACE ORAL TABLET 0.5 MG, 1 MG, 2 MG (<i>estradiol</i>) <i>estradiol oral tablet 0.5 mg, 1 mg, 2 mg</i>	NPB	
<i>estradiol transdermal patch twice weekly 0.025 mg/24hr, 0.0375 mg/24hr, 0.05 mg/24hr, 0.075 mg/24hr, 0.1 mg/24hr</i>	G	
<i>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</i>	G	
<i>estradiol-norethindrone acet oral tablet 0.5-0.1 mg, 1-0.5 mg</i>	G	
ESTROGEL TRANSDERMAL GEL 0.75 MG/1.25 GM (0.06%) (<i>estradiol</i>)	NPB	
EVAMIST TRANSDERMAL SOLUTION 1.53 MG/SPRAY (<i>estradiol</i>)	NPB	
FEMHRT LOW DOSE ORAL TABLET 0.5-2.5 MG-MCG (<i>norethindrone-eth estradiol</i>)	NPB	
MENEST ORAL TABLET 0.3 MG, 0.625 MG, 1.25 MG (<i>esterified estrogens</i>)	NPB	
MENOSTAR TRANSDERMAL PATCH WEEKLY 14 MCG/24HR (<i>estradiol</i>)	NPB	#
<i>estradiol-norethindrone acet (Mimvey Oral Tablet 1-0.5 Mg)</i>	G	
MINIVELLE TRANSDERMAL PATCH TWICE WEEKLY 0.025 MG/24HR, 0.0375 MG/24HR, 0.05 MG/24HR, 0.075 MG/24HR, 0.1 MG/24HR (<i>estradiol</i>)	NPB	
<i>norethindrone-eth estradiol oral tablet 0.5-2.5 mg-mcg, 1-5 mg-mcg</i>	G	
ORIAHNN ORAL CAPSULE THERAPY PACK 300-1-0.5 & 300 MG (<i>elagolix-estradiol-norethind</i>)	PB	

2020 Pharmacy Drug Guide - Premier Plus

The formulary is updated the first week of each month.

12/01/2020

146

Prescription Drug Name	Drug Tier	Coverage Requirements and Limits
PREFEST ORAL TABLET 1/1-0.09 MG (15/15) (<i>estradiol-norgestimate</i>)	NPB	
PREMARIN ORAL TABLET 0.3 MG, 0.45 MG, 0.625 MG, 0.9 MG, 1.25 MG (<i>estrogens conjugated</i>)	PB	
PREMPHASE ORAL TABLET 0.625-5 MG (<i>conj estrog-medroxyprogesterone acetate</i>)	PB	
PREMPRO ORAL TABLET 0.3-1.5 MG, 0.45-1.5 MG, 0.625-2.5 MG, 0.625-5 MG (<i>conj estrog-medroxyprogesterone acetate</i>)	PB	
VIVELLE-DOT TRANSDERMAL PATCH TWICE WEEKLY 0.025 MG/24HR, 0.0375 MG/24HR, 0.05 MG/24HR, 0.075 MG/24HR, 0.1 MG/24HR (<i>estradiol</i>)	NPB	
FLUOROQUINOLONES - DRUGS FOR INFECTIONS		
BAXDELA ORAL TABLET 450 MG (<i>delafloxacin meglumine</i>)	NPB	
CIPRO ORAL SUSPENSION RECONSTITUTED 250 MG/5ML (5%), 500 MG/5ML (10%) (<i>ciprofloxacin</i>)	NPB	
CIPRO ORAL TABLET 250 MG, 500 MG (<i>ciprofloxacin hcl</i>)	NPB	
<i>ciprofloxacin hcl oral tablet 100 mg, 250 mg, 500 mg, 750 mg</i>	G	
LEVAQUIN ORAL TABLET 250 MG (<i>levofloxacin</i>)	NPB	AL
LEVAQUIN ORAL TABLET 500 MG, 750 MG (<i>levofloxacin</i>)	NPB	
<i>levofloxacin oral solution 25 mg/ml</i>	G	
<i>levofloxacin oral tablet 250 mg, 500 mg, 750 mg</i>	G	
<i>moxifloxacin hcl oral tablet 400 mg</i>	G	
<i>ofloxacin oral tablet 300 mg, 400 mg</i>	G	
GASTROINTESTINAL AGENTS - MISC. - DRUGS FOR THE STOMACH		
ACTIGALL ORAL CAPSULE 300 MG (<i>ursodiol</i>)	NPB	
<i>alosetron hcl oral tablet 0.5 mg, 1 mg</i>	G	
AMITIZA ORAL CAPSULE 24 MCG, 8 MCG (<i>lubiprostone</i>)	PB	#
APRISO ORAL CAPSULE EXTENDED RELEASE 24 HOUR 0.375 GM (<i>mesalamine</i>)	NPB	
AURYXIA ORAL TABLET 1 GM 210 MG(FE) (<i>ferric citrate</i>)	NPB	
AVSOLA INTRAVENOUS SOLUTION RECONSTITUTED 100 MG (<i>infliximab-axxq</i>)	NPSP	PA; SP

2020 Pharmacy Drug Guide - Premier Plus

The formulary is updated the first week of each month.

12/01/2020

Prescription Drug Name	Drug Tier	Coverage Requirements and Limits
AZULFIDINE EN-TABS ORAL TABLET DELAYED RELEASE 500 MG (<i>sulfasalazine</i>)	NPB	
AZULFIDINE ORAL TABLET 500 MG (<i>sulfasalazine</i>)	NPB	
<i>balsalazide disodium oral capsule 750 mg</i>	G	
CANASA RECTAL SUPPOSITORY 1000 MG (<i>mesalamine</i>)	NPB	
CHENODAL ORAL TABLET 250 MG (<i>chenodiol</i>)	NPB	
CHOLBAM ORAL CAPSULE 250 MG, 50 MG (<i>cholic acid</i>)	NPSP	PA
CIMZIA PREFILLED SUBCUTANEOUS KIT 2 X 200 MG/ML (<i>certolizumab pegol</i>)	NPSP	PA; NPL; SP
CIMZIA STARTER KIT SUBCUTANEOUS KIT 6 X 200 MG/ML (<i>certolizumab pegol</i>)	NPSP	PA; NPL; SP
CIMZIA SUBCUTANEOUS KIT 2 X 200 MG (<i>certolizumab pegol</i>)	NPSP	PA; NPL; SP
COLAZAL ORAL CAPSULE 750 MG (<i>balsalazide disodium</i>)	NPB	
<i>cromolyn sodium oral concentrate 100 mg/5ml</i>	G	
DELZICOL ORAL CAPSULE DELAYED RELEASE 400 MG (<i>mesalamine</i>)	NPB	
DIPENTUM ORAL CAPSULE 250 MG (<i>olsalazine sodium</i>)	NPB	
ENTYVIO INTRAVENOUS SOLUTION RECONSTITUTED 300 MG (<i>vedolizumab</i>)	NPSP	PA; NPL; SP
<i>enulose oral solution 10 gm/15ml</i>	G	
FOSRENOL ORAL PACKET 1000 MG, 750 MG (<i>lanthanum carbonate</i>)	PB	
FOSRENOL ORAL TABLET CHEWABLE 1000 MG, 500 MG, 750 MG (<i>lanthanum carbonate</i>)	NPB	
GASTROCROM ORAL CONCENTRATE 100 MG/5ML (<i>cromolyn sodium</i>)	NPB	
GATTEX SUBCUTANEOUS KIT 5 MG (<i>teduglutide (rdna)</i>)	NPSP	PA; NPL; SP
<i>generlac oral solution 10 gm/15ml</i>	G	
GIMOTI NASAL SOLUTION 15 MG/ACT (<i>metoclopramide hcl</i>)	NPB	
INFLECTRA INTRAVENOUS SOLUTION RECONSTITUTED 100 MG (<i>infliximab-dyyb</i>)	NPSP	PA; NPL; SP
<i>lactulose encephalopathy oral solution 10 gm/15ml</i>	G	
<i>lanthanum carbonate oral tablet chewable 1000 mg, 500 mg, 750 mg</i>	G	

2020 Pharmacy Drug Guide - Premier Plus

The formulary is updated the first week of each month.

12/01/2020

Prescription Drug Name	Drug Tier	Coverage Requirements and Limits
LIALDA ORAL TABLET DELAYED RELEASE 1.2 GM (mesalamine)	NPB	
LINZESS ORAL CAPSULE 145 MCG, 290 MCG, 72 MCG (linaclotide)	PB	
LOTRONEX ORAL TABLET 0.5 MG, 1 MG (<i>alosetron hcl</i>)	NPB	
<i>mesalamine er oral capsule extended release 24 hour 0.375 gm</i>	G	
<i>mesalamine oral capsule delayed release 400 mg</i>	G	
<i>mesalamine oral tablet delayed release 1.2 gm, 800 mg</i>	G	
<i>mesalamine rectal enema 4 gm</i>	G	
<i>mesalamine rectal suppository 1000 mg</i>	G	
<i>metoclopramide hcl oral solution 10 mg/10ml, 5 mg/5ml</i>	G	
<i>metoclopramide hcl oral tablet 10 mg, 5 mg</i>	G	
<i>metoclopramide hcl oral tablet dispersible 10 mg, 5 mg</i>	G	
MOTEGRITY ORAL TABLET 1 MG, 2 MG (<i>prucalopride succinate</i>)	NPB	
MOVANTIK ORAL TABLET 12.5 MG, 25 MG (<i>naloxegol oxalate</i>)	PB	
OCALIVA ORAL TABLET 10 MG, 5 MG (<i>obeticholic acid</i>)	NPSP	PA; SP
PENTASA ORAL CAPSULE EXTENDED RELEASE 250 MG, 500 MG (mesalamine)	PB	
PHOSLO ORAL CAPSULE 667 MG (<i>calcium acetate (phos binder)</i>)	NPB	
PHOSLYRA ORAL SOLUTION 667 MG/5ML (<i>calcium acetate (phos binder)</i>)	PB	
REGLAN ORAL TABLET 10 MG, 5 MG (<i>metoclopramide hcl</i>)	NPB	
RELISTOR ORAL TABLET 150 MG (<i>methylnaltrexone bromide</i>)	PB	#
RELISTOR SUBCUTANEOUS SOLUTION 12 MG/0.6ML, 8 MG/0.4ML (<i>methylnaltrexone bromide</i>)	PB	
REMICADE INTRAVENOUS SOLUTION RECONSTITUTED 100 MG (<i>infliximab</i>)	PSP	PA; NPL; SP
RENAGEL ORAL TABLET 800 MG (<i>sevelamer hcl</i>)	NPB	
RENFLEXIS INTRAVENOUS SOLUTION RECONSTITUTED 100 MG (<i>infliximab-abda</i>)	NPSP	PA; NPL; SP
RENVELA ORAL PACKET 0.8 GM, 2.4 GM (<i>sevelamer carbonate</i>)	NPB	

2020 Pharmacy Drug Guide - Premier Plus

The formulary is updated the first week of each month.

12/01/2020

Prescription Drug Name	Drug Tier	Coverage Requirements and Limits
RENELA ORAL TABLET 800 MG (<i>sevelamer carbonate</i>)	NPB	
<i>sevelamer carbonate oral packet 0.8 gm, 2.4 gm</i>	G	
<i>sevelamer carbonate oral tablet 800 mg</i>	G	
<i>sevelamer hcl oral tablet 400 mg, 800 mg</i>	G	
SFROWASA RECTAL ENEMA 4 GM/60ML (<i>mesalamine</i>)	NPB	
STELARA INTRAVENOUS SOLUTION 130 MG/26ML (<i>ustekinumab</i>)	PSP	PA; IBC (Preferred agent for Psoriasis. Preferred agent for Crohn's Disease and Ulcerative Colitis after failure of Humira. Not covered for Psoriatic Arthritis.); NPL
<i>sulfasalazine oral tablet 500 mg</i>	G	
<i>sulfasalazine oral tablet delayed release 500 mg</i>	G	
SYMPROIC ORAL TABLET 0.2 MG (<i>naldemedine tosylate</i>)	NPB	
TRULANCE ORAL TABLET 3 MG (<i>plecanatide</i>)	NPB	
URSO 250 ORAL TABLET 250 MG (<i>ursodiol</i>)	NPB	
URSO FORTE ORAL TABLET 500 MG (<i>ursodiol</i>)	NPB	
<i>ursodiol oral capsule 300 mg</i>	G	
<i>ursodiol oral tablet 250 mg, 500 mg</i>	G	
VELPHORO ORAL TABLET CHEWABLE 500 MG (<i>sucroferric oxyhydroxide</i>)	NPB	#
VIBERZI ORAL TABLET 100 MG, 75 MG (<i>eluxadoline</i>)	PB	
XERMELO ORAL TABLET 250 MG (<i>telotristat etiprate</i>)	NPSP	PA; SP
ZELNORM ORAL TABLET 6 MG (<i>tegaserod maleate</i>)	NPB	
GENERAL ANESTHETICS - DRUGS FOR PAIN AND FEVER		
FORANE INHALATION SOLUTION (<i>isoflurane</i>)	NPB	
<i>isoflurane inhalation solution</i>	G	
<i>sevoflurane inhalation solution</i>	G	
<i>isoflurane (Terrell Inhalation Solution)</i>	G	
ULTANE INHALATION SOLUTION (<i>sevoflurane</i>)	NPB	
GENITOURINARY AGENTS - MISCELLANEOUS - DRUGS FOR THE URINARY SYSTEM		
<i>acetic acid irrigation solution 0.25 %</i>	G	
<i>alfuzosin hcl er oral tablet extended release 24 hour 10 mg</i>	G	

2020 Pharmacy Drug Guide - Premier Plus

The formulary is updated the first week of each month.

12/01/2020

150

Prescription Drug Name	Drug Tier	Coverage Requirements and Limits
<i>aminoacetic acid irrigation solution 1.5 %</i>	G	
<i>sodium chloride (gu irrigant) (Argyle Sterile Saline Irrigation Solution 0.9 %)</i>	G	
AVODART ORAL CAPSULE 0.5 MG (<i>dutasteride</i>)	NPB	
CARDURA XL ORAL TABLET EXTENDED RELEASE 24 HOUR 4 MG, 8 MG (<i>doxazosin mesylate</i>)	NPB	
<i>sodium chloride (gu irrigant) (Curity Sterile Saline Irrigation Solution 0.9 %)</i>	G	
CYSTAGON ORAL CAPSULE 150 MG, 50 MG (<i>cysteamine bitartrate</i>)	NPB	
<i>cytra k crystals oral packet 3300-1002 mg</i>	G	
CYTRA-3 ORAL SYRUP 550-500-334 MG/5ML (<i>pot & sod cit-cit ac</i>)	NPB	
<i>dutasteride oral capsule 0.5 mg</i>	G	
<i>dutasteride-tamsulosin hcl oral capsule 0.5-0.4 mg</i>	G	
ELMIRON ORAL CAPSULE 100 MG (<i>pentosan polysulfate sodium</i>)	PB	
<i>finasteride oral tablet 5 mg</i>	G	
FLOMAX ORAL CAPSULE 0.4 MG (<i>tamsulosin hcl</i>)	NPB	
<i>glycine irrigation solution 1.5 %</i>	G	
<i>glycine urologic irrigation solution 1.5 %</i>	G	
JALYN ORAL CAPSULE 0.5-0.4 MG (<i>dutasteride-tamsulosin hcl</i>)	NPB	
K-PHOS NO 2 ORAL TABLET 305-700 MG (<i>pot & sod ac phosphates</i>)	NPB	
LITHOSTAT ORAL TABLET 250 MG (<i>acetohydroxamic acid</i>)	NPB	
<i>neomycin-polymyxin b gu irrigation solution 40-200000</i>	G	
ORACIT ORAL SOLUTION 490-640 MG/5ML (<i>sod citrate-citric acid</i>)	NPB	
PROCYSSI ORAL CAPSULE DELAYED RELEASE 25 MG, 75 MG (<i>cysteamine bitartrate</i>)	NPSP	PA; SP
PROCYSSI ORAL PACKET 300 MG, 75 MG (<i>cysteamine bitartrate</i>)	NPSP	PA; SP
PROSCAR ORAL TABLET 5 MG (<i>finasteride</i>)	NPB	
RAPAFLO ORAL CAPSULE 4 MG, 8 MG (<i>silodosin</i>)	NPB	

Prescription Drug Name	Drug Tier	Coverage Requirements and Limits
RENACIDIN IRRIGATION SOLUTION (<i>citric acid-gluconolact-mg carb</i>)	NPB	
RESECTISOL IRRIGATION SOLUTION 5 % (<i>mannitol (gu irrigant)</i>)	NPB	
<i>silodosin oral capsule 4 mg, 8 mg</i>	G	
<i>sodium chloride irrigation solution 0.9 %</i>	G	
<i>tamsulosin hcl oral capsule 0.4 mg</i>	G	
<i>potassium citrate-citric acid (Taron-Crystals Oral Packet 3300-1002 Mg)</i>	G	
THIOLA EC ORAL TABLET DELAYED RELEASE 100 MG, 300 MG (<i>tiopronin</i>)	NPSP	PA; SP
THIOLA ORAL TABLET 100 MG (<i>tiopronin</i>)	NPSP	PA
UROCIT-K 10 ORAL TABLET EXTENDED RELEASE 10 MEQ (1080 MG) (<i>potassium citrate</i>)	NPB	
UROCIT-K 5 ORAL TABLET EXTENDED RELEASE 5 MEQ (540 MG) (<i>potassium citrate</i>)	NPB	
UROXATRAL ORAL TABLET EXTENDED RELEASE 24 HOUR 10 MG (<i>alfuzosin hcl</i>)	NPB	
GOUT AGENTS - DRUGS FOR PAIN AND FEVER		
<i>allopurinol oral tablet 100 mg, 300 mg</i>	G	
<i>colchicine oral tablet 0.6 mg</i>	G	
<i>colchicine-probenecid oral tablet 0.5-500 mg</i>	G	
COLCRYS ORAL TABLET 0.6 MG (<i>colchicine</i>)	NPB	
<i>febuxostat oral tablet 40 mg, 80 mg</i>	G	
GLOPERBA ORAL SOLUTION 0.6 MG/5ML (<i>colchicine</i>)	NPB	
KRYSTEXXA INTRAVENOUS SOLUTION 8 MG/ML (<i>pegloticase</i>)	NPSP	PA; SP
MITIGARE ORAL CAPSULE 0.6 MG (<i>colchicine</i>)	PB	
<i>probenecid oral tablet 500 mg</i>	G	
ULORIC ORAL TABLET 40 MG, 80 MG (<i>febuxostat</i>)	NPB	
ZYLOPRIM ORAL TABLET 100 MG, 300 MG (<i>allopurinol</i>)	NPB	
HEMATOLOGICAL AGENTS - MISC. - DRUGS FOR THE BLOOD		
ADVATE INTRAVENOUS SOLUTION RECONSTITUTED 1000 UNIT, 1500 UNIT, 2000 UNIT, 250 UNIT, 3000 UNIT, 4000 UNIT, 500 UNIT (<i>antihemophil factor (rahf-pfm)</i>)	PSP	PA; NPL; SP

2020 Pharmacy Drug Guide - Premier Plus

The formulary is updated the first week of each month.

12/01/2020

Prescription Drug Name	Drug Tier	Coverage Requirements and Limits
ADYNOVATE INTRAVENOUS SOLUTION RECONSTITUTED 1000 UNIT, 1500 UNIT, 2000 UNIT, 250 UNIT, 500 UNIT, 750 UNIT	NPSP	PA; NPL
ADYNOVATE INTRAVENOUS SOLUTION RECONSTITUTED 3000 UNIT	NPSP	PA; NPL; SP
AFSTYLA INTRAVENOUS KIT 1000 UNIT, 1500 UNIT, 2000 UNIT, 250 UNIT, 2500 UNIT, 3000 UNIT, 500 UNIT <i>(antihemophilic factor single chain)</i>	NPSP	PA; NPL; SP
AGRYLIN ORAL CAPSULE 0.5 MG (<i>anagrelide hcl</i>)	NPB	
ALPHANATE/VWF COMPLEX/HUMAN INTRAVENOUS SOLUTION RECONSTITUTED 1000 UNIT, 1500 UNIT, 2000 UNIT, 250 UNIT, 500 UNIT <i>(antihemophilic factor-vwf)</i>	NPSP	PA; NPL; SP
ALPHANINE SD INTRAVENOUS SOLUTION RECONSTITUTED 1000 UNIT, 1500 UNIT, 500 UNIT <i>(coagulation factor ix)</i>	NPSP	PA; NPL; SP
ALPROLIX INTRAVENOUS SOLUTION RECONSTITUTED 1000 UNIT, 2000 UNIT, 250 UNIT, 3000 UNIT, 4000 UNIT, 500 UNIT <i>(coagulation factor ix (rfixfc))</i>	NPSP	PA; NPL; SP
<i>anagrelide hcl oral capsule 0.5 mg, 1 mg</i>	G	
<i>aspirin-dipyridamole er oral capsule extended release 12 hour 25-200 mg</i>	G	
<i>aspirin-omeprazole oral tablet delayed release 325-40 mg</i>	G	
BENEFIX INTRAVENOUS KIT 1000 UNIT, 2000 UNIT, 250 UNIT, 3000 UNIT, 500 UNIT <i>(coagulation factor ix (recomb))</i>	PSP	PA; NPL; SP
BERINERT INTRAVENOUS KIT 500 UNIT <i>(c1 esterase inhibitor (human))</i>	NPSP	PA; NPL; SP
BRILINTA ORAL TABLET 60 MG, 90 MG (<i>ticagrelor</i>)	PB	
CABLIVI INJECTION KIT 11 MG (<i>caplacizumab-yhdp</i>)	NPSP	PA; NPL; SP
<i>cilostazol oral tablet 100 mg, 50 mg</i>	G	
CINRYZE INTRAVENOUS SOLUTION RECONSTITUTED 500 UNIT <i>(c1 esterase inhibitor (human))</i>	NPSP	PA; NPL; SP
<i>clopidogrel bisulfate oral tablet 300 mg, 75 mg</i>	G	
COAGADEX INTRAVENOUS SOLUTION RECONSTITUTED 250 UNIT, 500 UNIT <i>(coagulation factor x (human))</i>	NPSP	PA; NPL

2020 Pharmacy Drug Guide - Premier Plus

The formulary is updated the first week of each month.

12/01/2020

Prescription Drug Name	Drug Tier	Coverage Requirements and Limits
CORIFACT INTRAVENOUS KIT 1000-1600 UNIT (<i>factor xiii concentrate human</i>)	NPSP	PA; NPL; SP
dipyridamole oral tablet 25 mg, 50 mg, 75 mg	G	
DURLAZA ORAL CAPSULE EXTENDED RELEASE 24 HOUR 162.5 MG (<i>aspirin</i>)	NPB	
EFFIENT ORAL TABLET 10 MG, 5 MG (<i>prasugrel hcl</i>)	NPB	
ELOCTATE INTRAVENOUS SOLUTION RECONSTITUTED 1000 UNIT, 1500 UNIT, 2000 UNIT, 250 UNIT, 3000 UNIT, 4000 UNIT, 500 UNIT, 5000 UNIT, 6000 UNIT, 750 UNIT (<i>antihem fact (bdd-rfviiifc)</i>)	NPSP	PA; NPL; SP
ESPEROCT INTRAVENOUS SOLUTION RECONSTITUTED 1000 UNIT, 1500 UNIT, 2000 UNIT, 3000 UNIT, 500 UNIT (<i>antihemoph fact rcmb gpeg-exei</i>)	NPSP	PA; NPL; SP
FIBRYGA INTRAVENOUS SOLUTION RECONSTITUTED (<i>fibrinogen concentrate (human)</i>)	PSP	PA; NPL; SP
FIRAZYR SUBCUTANEOUS SOLUTION 30 MG/3ML (<i>icatibant acetate</i>)	PSP	PA; NPL; SP
HAEGARDA SUBCUTANEOUS SOLUTION RECONSTITUTED 2000 UNIT, 3000 UNIT (<i>c1 esterase inhibitor (human)</i>)	PSP	PA; NPL; SP
HEMLIBRA SUBCUTANEOUS SOLUTION 105 MG/0.7ML, 150 MG/ML, 30 MG/ML, 60 MG/0.4ML (<i>emicizumab-kxwh</i>)	NPSP	PA; NPL; SP
HEMOFIL M INTRAVENOUS SOLUTION RECONSTITUTED 1000 UNIT, 1700 UNIT, 250 UNIT, 500 UNIT (<i>antihemophilic factor</i>)	NPSP	PA; NPL; SP
HUMATE-P INTRAVENOUS SOLUTION RECONSTITUTED 1000-2400 UNIT, 250-600 UNIT, 500-1200 UNIT (<i>antihemophilic factor-vwf</i>)	NPSP	PA; NPL; SP
<i>icatibant acetate subcutaneous solution 30 mg/3ml</i>	PSP	PA; NPL; SP
IDEVION INTRAVENOUS SOLUTION RECONSTITUTED 1000 UNIT, 2000 UNIT, 250 UNIT, 3500 UNIT, 500 UNIT (<i>coagulation factor ix (rix-fp)</i>)	NPSP	PA; NPL; SP
IXINITY INTRAVENOUS SOLUTION RECONSTITUTED 1000 UNIT, 1500 UNIT, 2000 UNIT, 250 UNIT, 3000 UNIT, 500 UNIT (<i>coagulation factor ix (recomb)</i>)	NPSP	PA; NPL
JIVI INTRAVENOUS SOLUTION RECONSTITUTED 1000 UNIT, 2000 UNIT, 3000 UNIT, 500 UNIT (<i>ahf (bdd-rfviii peg-auc1)</i>)	NPSP	PA; NPL; SP

2020 Pharmacy Drug Guide - Premier Plus

The formulary is updated the first week of each month.

12/01/2020

Prescription Drug Name	Drug Tier	Coverage Requirements and Limits
KALBITOR SUBCUTANEOUS SOLUTION 10 MG/ML <i>(ecallantide)</i>	NPSP	PA; NPL; SP
KCENTRA INTRAVENOUS KIT 1000 UNIT, 500 UNIT <i>(prothrombin complex conc human)</i>	NPSP	PA; NPL; SP
KOATE INTRAVENOUS SOLUTION RECONSTITUTED 1000 UNIT, 250 UNIT, 500 UNIT <i>(antihemophilic factor)</i>	NPSP	PA; NPL
KOATE-DVI INTRAVENOUS SOLUTION RECONSTITUTED 1000 UNIT, 250 UNIT, 500 UNIT <i>(antihemophilic factor)</i>	NPSP	PA; NPL; SP
KOGENATE FS INTRAVENOUS KIT 1000 UNIT, 2000 UNIT, 250 UNIT, 3000 UNIT, 500 UNIT <i>(antihemophilic factor (recomb))</i>	NPSP	PA; NPL; SP
KOVALTRY INTRAVENOUS SOLUTION RECONSTITUTED 1000 UNIT, 2000 UNIT, 250 UNIT, 3000 UNIT, 500 UNIT <i>(antihemophil factor (rahf-pfm))</i>	NPSP	PA; NPL; SP
MONONINE INTRAVENOUS SOLUTION RECONSTITUTED 1000 UNIT <i>(coagulation factor ix)</i>	PSP	PA; NPL; SP
NOVOEIGHT INTRAVENOUS SOLUTION RECONSTITUTED 1000 UNIT, 1500 UNIT, 2000 UNIT, 250 UNIT, 3000 UNIT, 500 UNIT <i>(antihemophil fact bd truncated)</i>	NPSP	PA; NPL; SP
NOVOSEVEN RT INTRAVENOUS SOLUTION RECONSTITUTED 1 MG, 2 MG, 5 MG, 8 MG <i>(coagulation factor viia recomb)</i>	PSP	PA; NPL; SP
NUWIQ INTRAVENOUS KIT 1000 UNIT, 2000 UNIT, 250 UNIT, 2500 UNIT, 3000 UNIT, 4000 UNIT, 500 UNIT <i>(antihem fact (bdd-rfviii,sim))</i>	NPSP	PA; NPL; SP
NUWIQ INTRAVENOUS SOLUTION RECONSTITUTED 1000 UNIT, 2000 UNIT, 250 UNIT, 2500 UNIT, 3000 UNIT, 4000 UNIT, 500 UNIT <i>(antihem fact (bdd-rfviii,sim))</i>	NPSP	PA; NPL; SP
<i>pentoxifylline er oral tablet extended release 400 mg</i>	G	
PLAVIX ORAL TABLET 75 MG <i>(clopidogrel bisulfate)</i>	NPB	
<i>prasugrel hcl oral tablet 10 mg, 5 mg</i>	G	
REBINYN INTRAVENOUS SOLUTION RECONSTITUTED 1000 UNIT, 2000 UNIT, 500 UNIT <i>(coagulation factor ix glycopeg)</i>	NPSP	PA; NPL; SP

Prescription Drug Name	Drug Tier	Coverage Requirements and Limits
RECOMBINATE INTRAVENOUS SOLUTION RECONSTITUTED 1241-1800 UNIT, 1801-2400 UNIT, 220-400 UNIT, 401-800 UNIT, 801-1240 UNIT (<i>antihemophilic factor (recomb)</i>)	NPSP	PA; NPL; SP
RIASTAP INTRAVENOUS SOLUTION RECONSTITUTED (<i>fibrinogen concentrate (human)</i>)	PSP	PA; NPL; SP
RIXUBIS INTRAVENOUS SOLUTION RECONSTITUTED 1000 UNIT, 2000 UNIT, 250 UNIT, 3000 UNIT, 500 UNIT	NPSP	PA; NPL; SP
RUCONEST INTRAVENOUS SOLUTION RECONSTITUTED 2100 UNIT (<i>c1 esterase inhibitor (recomb)</i>)	NPSP	PA; NPL; SP
SEVENFACT INTRAVENOUS SOLUTION RECONSTITUTED 1 MG, 5 MG (<i>coagulation factor viia-jncw</i>)	NPSP	PA; NPL; SP
TAKHZYRO SUBCUTANEOUS SOLUTION 300 MG/2ML (<i>lanadelumab-flyo</i>)	NPSP	PA; NPL; SP
TAVALISSE ORAL TABLET 100 MG, 150 MG (<i>fostamatinib disodium</i>)	NPSP	PA; SP
TRETEN INTRAVENOUS SOLUTION RECONSTITUTED 2000-3125 UNIT (<i>coagulation factor xiii a-sub</i>)	NPSP	PA; NPL; SP
VONVENDI INTRAVENOUS SOLUTION RECONSTITUTED 1300 UNIT, 650 UNIT (<i>von willebrand factor (recomb)</i>)	NPSP	PA; NPL
WILATE INTRAVENOUS KIT 1000-1000 UNIT, 500-500 UNIT (<i>antihemophilic factor-vwf</i>)	NPSP	PA; NPL; SP
XYNTHA INTRAVENOUS KIT 1000 UNIT, 2000 UNIT, 250 UNIT, 500 UNIT (<i>antihem fact (bdd-rfviii,mor)</i>)	NPSP	PA; NPL; SP
XYNTHA SOLOFUSE INTRAVENOUS KIT 1000 UNIT, 2000 UNIT, 250 UNIT, 3000 UNIT, 500 UNIT (<i>antihem fact (bdd-rfviii,mor)</i>)	NPSP	PA; NPL; SP
YOSPRALA ORAL TABLET DELAYED RELEASE 325-40 MG, 81-40 MG (<i>aspirin-omeprazole</i>)	NPB	
ZONTIVITY ORAL TABLET 2.08 MG (<i>vorapaxar sulfate</i>)	NPB	
HEMATOPOIETIC AGENTS - DRUGS FOR NUTRITION		
ARANESP (ALBUMIN FREE) INJECTION SOLUTION 100 MCG/ML, 200 MCG/ML, 25 MCG/ML, 300 MCG/ML, 40 MCG/ML, 60 MCG/ML (<i>darbepoetin alfa</i>)	PSP	PA; NPL; SP

2020 Pharmacy Drug Guide - Premier Plus

The formulary is updated the first week of each month.

12/01/2020

156

Prescription Drug Name	Drug Tier	Coverage Requirements and Limits
ARANESP (ALBUMIN FREE) INJECTION SOLUTION PREFILLED SYRINGE 100 MCG/0.5ML, 150 MCG/0.3ML, 200 MCG/0.4ML, 25 MCG/0.42ML, 300 MCG/0.6ML, 40 MCG/0.4ML, 500 MCG/ML, 60 MCG/0.3ML (<i>darbepoetin alfa</i>)	PSP	PA; NPL; SP
CERDELGA ORAL CAPSULE 84 MG (<i>eliglustat tartrate</i>)	PSP	PA; SP
CEREZYME INTRAVENOUS SOLUTION RECONSTITUTED 400 UNIT (<i>imiglucerase</i>)	PSP	PA; NPL; SP
DOPTELET ORAL TABLET 20 MG (<i>avatrombopag maleate</i>)	NPSP	PA; SP
DROXIA ORAL CAPSULE 200 MG, 300 MG, 400 MG (<i>hydroxyurea</i>)	NPB	
ELELYSO INTRAVENOUS SOLUTION RECONSTITUTED 200 UNIT (<i>taliglucerase alfa</i>)	NPSP	PA; NPL; SP
ENDARI ORAL PACKET 5 GM (<i>glutamine (sickle cell)</i>)	NPB	
EPOGEN INJECTION SOLUTION 10000 UNIT/ML, 2000 UNIT/ML, 20000 UNIT/ML, 3000 UNIT/ML, 4000 UNIT/ML (<i>epoetin alfa</i>)	NPSP	PA; NPL; SP
FA-8 ORAL CAPSULE 0.8 MG (<i>folic acid</i>)	CE	N2 (Not Covered); QL (100 capsules per 1 fill); AL
FA-8 ORAL TABLET 800 MCG (<i>folic acid</i>)	CE	N2 (Not Covered); QL (100 capsules per 1 fill); AL
FERREX 150 FORTE PLUS ORAL CAPSULE 50-100 MG (<i>fe-succ ac-c-thre ac-b12-fa</i>)	NPB	
FERRLECIT INTRAVENOUS SOLUTION 12.5 MG/ML (<i>na ferric gluc cplx in sucrose</i>)	NPSP	SP
<i>folate oral tablet 400 mcg</i>	CE	N2 (Not Covered); QL (100 tablets per 1 fill); AL
<i>folic acid oral capsule 0.8 mg</i>	CE	N2 (Not Covered); QL (100 capsules per 1 fill); AL
<i>folic acid oral tablet 400 mcg, 800 mcg</i>	CE	N2 (Not Covered); QL (100 capsules per 1 fill); AL
FULPHILA SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 6 MG/0.6ML (<i>pegfilgrastim-jmdb</i>)	NPSP	PA; NPL; SP
GRANIX SUBCUTANEOUS SOLUTION 300 MCG/ML, 480 MCG/1.6ML (<i>tbo-filgrastim</i>)	NPSP	PA; NPL; SP
GRANIX SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 300 MCG/0.5ML, 480 MCG/0.8ML (<i>tbo-filgrastim</i>)	NPSP	PA; NPL; SP

2020 Pharmacy Drug Guide - Premier Plus

The formulary is updated the first week of each month.

12/01/2020

Prescription Drug Name	Drug Tier	Coverage Requirements and Limits
<i>miglustat oral capsule 100 mg</i>	PSP	PA; SP
MIRCERA INJECTION SOLUTION PREFILLED SYRINGE 100 MCG/0.3ML, 150 MCG/0.3ML, 200 MCG/0.3ML, 30 MCG/0.3ML, 50 MCG/0.3ML, 75 MCG/0.3ML (<i>methoxy peg-epoetin beta</i>)	NPSP	PA; NPL
MULPLETA ORAL TABLET 3 MG (<i>lusutrombopag</i>)	NPSP	PA; SP
<i>na ferric gluc cplx in sucrose intravenous solution 12.5 mg/ml</i>	PSP	SP
NASCOBAL NASAL SOLUTION 500 MCG/0.1ML (<i>cyanocobalamin</i>)	NPB	
NEULASTA ONPRO SUBCUTANEOUS PREFILLED SYRINGE KIT 6 MG/0.6ML (<i>pegfilgrastim</i>)	PSP	PA; NPL; SP
NEULASTA SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 6 MG/0.6ML (<i>pegfilgrastim</i>)	PSP	PA; NPL; SP
NEUPOGEN INJECTION SOLUTION 300 MCG/ML, 480 MCG/1.6ML (<i>filgrastim</i>)	NPSP	PA; NPL; SP
NEUPOGEN INJECTION SOLUTION PREFILLED SYRINGE 300 MCG/0.5ML, 480 MCG/0.8ML (<i>filgrastim</i>)	NPSP	PA; NPL
NIVESTYM INJECTION SOLUTION 300 MCG/ML, 480 MCG/1.6ML (<i>filgrastim-aafi</i>)	PSP	PA; NPL; SP
NIVESTYM INJECTION SOLUTION PREFILLED SYRINGE 300 MCG/0.5ML, 480 MCG/0.8ML (<i>filgrastim-aafi</i>)	PSP	PA; NPL; SP
NPLATE SUBCUTANEOUS SOLUTION RECONSTITUTED 125 MCG, 250 MCG, 500 MCG (<i>romiplostim</i>)	NPSP	PA; SP
OXBRYTA ORAL TABLET 500 MG (<i>voxeletor</i>)	NPSP	PA; SP
PROCERIT INJECTION SOLUTION 10000 UNIT/ML, 2000 UNIT/ML, 20000 UNIT/ML, 3000 UNIT/ML, 4000 UNIT/ML, 40000 UNIT/ML (<i>epoetin alfa</i>)	NPSP	PA; NPL; SP
PROMACTA ORAL PACKET 12.5 MG, 25 MG (<i>eltrombopag olamine</i>)	NPSP	PA; SP
PROMACTA ORAL TABLET 12.5 MG, 25 MG, 50 MG, 75 MG (<i>eltrombopag olamine</i>)	NPSP	PA; SP
RETACRIT INJECTION SOLUTION 10000 UNIT/ML, 2000 UNIT/ML, 3000 UNIT/ML, 4000 UNIT/ML, 40000 UNIT/ML (<i>epoetin alfa-epbx</i>)	PSP	PA; NPL; SP
SIKLOS ORAL TABLET 100 MG, 1000 MG (<i>hydroxyurea</i>)	NPB	
<i>sm folic acid oral tablet 400 mcg</i>	CE	N2 (Not Covered); QL (100 capsules per 1 fill); AL

2020 Pharmacy Drug Guide - Premier Plus

The formulary is updated the first week of each month.

12/01/2020

158

Prescription Drug Name	Drug Tier	Coverage Requirements and Limits
UDENYCA SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 6 MG/0.6ML (<i>pegfilgrastim-cbqv</i>)	PSP	PA; NPL; SP
VENOFER INTRAVENOUS SOLUTION 20 MG/ML (<i>iron sucrose</i>)	NPSP	SP
VPRIV INTRAVENOUS SOLUTION RECONSTITUTED 400 UNIT (<i>velaglucerase alfa</i>)	PSP	PA; NPL; SP
<i>yl folic acid oral tablet 400 mcg</i>	CE	N2 (Not Covered); QL (100 capsules per 1 fill); AL
ZARXIO INJECTION SOLUTION PREFILLED SYRINGE 300 MCG/0.5ML, 480 MCG/0.8ML (<i>filgrastim-sndz</i>)	PSP	PA; NPL
ZAVESCA ORAL CAPSULE 100 MG (<i>miglustat</i>)	NPSP	PA; SP
ZIEXTENZO SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 6 MG/0.6ML (<i>pegfilgrastim-bmez</i>)	NPSP	PA; NPL; SP
HEMOSTATICS - DRUGS FOR THE BLOOD		
AMICAR ORAL SOLUTION 0.25 GM/ML (<i>aminocaproic acid</i>)	NPB	
AMICAR ORAL TABLET 1000 MG, 500 MG (<i>aminocaproic acid</i>)	PB	
<i>aminocaproic acid oral solution 0.25 g/ml/ml</i>	G	
<i>aminocaproic acid oral tablet 1000 mg, 500 mg</i>	G	
ARTISS EXTERNAL SOLUTION (<i>fibrin sealant component</i>)	NPB	
LYSTEDA ORAL TABLET 650 MG (<i>tranexamic acid</i>)	NPB	
<i>tranexamic acid oral tablet 650 mg</i>	G	
HYPNOTICS/SEDATIVES/SLEEP DISORDER AGENTS - DRUGS FOR THE NERVOUS SYSTEM		
AMBIEN CR ORAL TABLET EXTENDED RELEASE 12.5 MG, 6.25 MG (<i>zolpidem tartrate</i>)	NPB	
AMBIEN ORAL TABLET 10 MG, 5 MG (<i>zolpidem tartrate</i>)	NPB	
BELSOMRA ORAL TABLET 10 MG, 15 MG, 20 MG, 5 MG (<i>suvorexant</i>)	NPB	
DAYVIGO ORAL TABLET 10 MG, 5 MG (<i>lemborexant</i>)	NPB	
DORAL ORAL TABLET 15 MG (<i>quazepam</i>)	NPB	
<i>doxepin hcl oral tablet 3 mg, 6 mg</i>	G	
EDLUAR SUBLINGUAL TABLET SUBLINGUAL 10 MG, 5 MG (<i>zolpidem tartrate</i>)	NPB	
<i>estazolam oral tablet 1 mg, 2 mg</i>	G	

2020 Pharmacy Drug Guide - Premier Plus

The formulary is updated the first week of each month.

12/01/2020

Prescription Drug Name	Drug Tier	Coverage Requirements and Limits
<i>eszopiclone oral tablet 1 mg, 2 mg, 3 mg</i>	G	
<i>flurazepam hcl oral capsule 15 mg, 30 mg</i>	G	
HALCION ORAL TABLET 0.25 MG (triazolam)	NPB	
HETLIOZ ORAL CAPSULE 20 MG (tasimelteon)	NPSP	PA; SP
INTERMEZZO SUBLINGUAL TABLET SUBLINGUAL 1.75 MG (zolpidem tartrate)	NPB	
LUNESTA ORAL TABLET 1 MG, 2 MG, 3 MG (eszopiclone)	NPB	
<i>midazolam hcl oral syrup 2 mg/ml</i>	G	
<i>phenobarbital oral elixir 20 mg/5ml</i>	G	
<i>phenobarbital oral solution 20 mg/5ml</i>	G	
<i>phenobarbital oral tablet 16.2 mg, 32.4 mg</i>	G	
<i>quazepam oral tablet 15 mg</i>	G	
<i>ramelteon oral tablet 8 mg</i>	G	
RESTORIL ORAL CAPSULE 15 MG, 22.5 MG, 30 MG, 7.5 MG (temazepam)	NPB	
ROZEREM ORAL TABLET 8 MG (ramelteon)	NPB	
SECONAL ORAL CAPSULE 100 MG (secobarbital sodium)	NPB	
SILENOR ORAL TABLET 3 MG, 6 MG (doxepin hcl)	NPB	
<i>temazepam oral capsule 15 mg, 22.5 mg, 30 mg, 7.5 mg</i>	G	
<i>triazolam oral tablet 0.125 mg, 0.25 mg</i>	G	
<i>zaleplon oral capsule 10 mg, 5 mg</i>	G	
<i>zolpidem tartrate er oral tablet extended release 12.5 mg, 6.25 mg</i>	G	
<i>zolpidem tartrate oral tablet 10 mg, 5 mg</i>	G	
<i>zolpidem tartrate sublingual tablet sublingual 1.75 mg, 3.5 mg</i>	G	
LAXATIVES - DRUGS FOR THE STOMACH		
CLENPIQ ORAL SOLUTION 10-3.5-12 MG-GM - GM/160ML (sod picosulfate-mag ox-cit acd)	CE	N2 (NPB); AL
<i>constulose oral solution 10 gm/15ml</i>	G	
<i>gavilax oral packet 17 gm</i>	CE	N2 (Not Covered); AL
GAVILYTE-C ORAL SOLUTION RECONSTITUTED 240 GM (peg 3350-kcl-nabcb-nacl-nasulf)	G	
<i>bisacodyl-peg-kcl-nabicar-nacl (Gavilyte-H Oral Kit 5-210 Mg-Gm)</i>	CE	N2 (G); AL

2020 Pharmacy Drug Guide - Premier Plus

The formulary is updated the first week of each month.

12/01/2020

160

Prescription Drug Name	Drug Tier	Coverage Requirements and Limits
peg 3350-kcl-na bicarb-nacl (Gavilyte-N With Flavor Pack Oral Solution Reconstituted 420 Gm)	G	
GOLYTELY ORAL SOLUTION RECONSTITUTED 236 GM (peg 3350-kcl-nabcb-nacl-nasulf)	NPB	
KRISTALOSE ORAL PACKET 10 GM (<i>lactulose</i>)	G	
KRISTALOSE ORAL PACKET 20 GM (<i>lactulose</i>)	NPB	
<i>lactulose oral packet 10 gm</i>	G	
<i>lactulose oral solution 10 gm/15ml, 20 gm/30ml</i>	G	
MOVIPREP ORAL SOLUTION RECONSTITUTED 100 GM (peg-kcl-nacl-nasulf-na asc-c)	NPB	#
NULYTELY WITH FLAVOR PACKS ORAL SOLUTION RECONSTITUTED 420 GM (peg 3350-kcl-na bicarb-nacl)	NPB	
OSMOPREP ORAL TABLET 1.102-0.398 GM (<i>sod phos mono-sod phos dibasic</i>)	NPB	#
PCP 100 COMBINATION KIT (<i>mgcit-bisacod-pet-peg-metoclop</i>)	NPB	
<i>peg 3350-kcl-na bicarb-nacl oral solution reconstituted 420 gm</i>	G	
<i>peg-3350/electrolytes oral solution reconstituted 236 gm</i>	G	
<i>peg-kcl-nacl-nasulf-na asc-c oral solution reconstituted 100 gm</i>	CE	N2 (G)
<i>bisacodyl-peg-kcl-nabicar-nacl</i> (Peg-Prep Oral Kit 5-210 Mg-Gm)	CE	N2 (G); AL
PLENUV ORAL SOLUTION RECONSTITUTED 140 GM (peg-kcl-nacl-nasulf-na asc-c)	CE	N2 (NPB); AL
SUPREP BOWEL PREP KIT ORAL SOLUTION 17.5-3.13-1.6 GM/177ML (<i>na sulfate-k sulfate-mg sulf</i>)	CE	#; N2 (PB); AL
<i>peg 3350-kcl-na bicarb-nacl</i> (Trilyte Oral Solution Reconstituted 420 Gm)	G	N2 (G)
MACROLIDES - DRUGS FOR INFECTIONS		
<i>azithromycin oral packet 1 gm</i>	G	
<i>azithromycin oral suspension reconstituted 100 mg/5ml, 200 mg/5ml</i>	G	
<i>azithromycin oral tablet 250 mg, 500 mg, 600 mg</i>	G	
<i>clarithromycin er oral tablet extended release 24 hour 500 mg</i>	G	
<i>clarithromycin oral suspension reconstituted 125 mg/5ml, 250 mg/5ml</i>	G	
<i>clarithromycin oral tablet 250 mg, 500 mg</i>	G	
DIFICID ORAL TABLET 200 MG (<i>fidaxomicin</i>)	NPB	

2020 Pharmacy Drug Guide - Premier Plus

The formulary is updated the first week of each month.

12/01/2020

Prescription Drug Name	Drug Tier	Coverage Requirements and Limits
E.E.S. 400 ORAL TABLET 400 MG (<i>erythromycin ethylsuccinate</i>)	NPB	
E.E.S. GRANULES ORAL SUSPENSION RECONSTITUTED 200 MG/5ML (<i>erythromycin ethylsuccinate</i>)	NPB	
ERYPED 200 ORAL SUSPENSION RECONSTITUTED 200 MG/5ML (<i>erythromycin ethylsuccinate</i>)	NPB	
ERYPED 400 ORAL SUSPENSION RECONSTITUTED 400 MG/5ML (<i>erythromycin ethylsuccinate</i>)	NPB	
<i>erythromycin base</i> (Ery-Tab Oral Tablet Delayed Release 250 Mg, 333 Mg, 500 Mg)	G	
ERYTHROCIN STEARATE ORAL TABLET 250 MG (<i>erythromycin stearate</i>)	NPB	
<i>erythromycin base oral capsule delayed release particles 250 mg</i>	G	
<i>erythromycin base oral tablet 250 mg, 500 mg</i>	G	
<i>erythromycin ethylsuccinate oral suspension reconstituted 400 mg/5ml</i>	G	
<i>erythromycin ethylsuccinate oral tablet 400 mg</i>	G	
<i>erythromycin stearate oral tablet 250 mg</i>	G	
ZITHROMAX ORAL PACKET 1 GM (<i>azithromycin</i>)	NPB	
ZITHROMAX ORAL SUSPENSION RECONSTITUTED 100 MG/5ML, 200 MG/5ML (<i>azithromycin</i>)	NPB	
ZITHROMAX ORAL TABLET 250 MG, 500 MG (<i>azithromycin</i>)	NPB	
ZITHROMAX TRI-PAK ORAL TABLET 500 MG (<i>azithromycin</i>)	NPB	
ZITHROMAX Z-PAK ORAL TABLET 250 MG (<i>azithromycin</i>)	NPB	
MEDICAL DEVICES AND SUPPLIES - MEDICAL SUPPLIES AND DURABLE MEDICAL EQUIPMENT		
1st tier unifine pentips 29g x 12mm , 31g x 5 mm , 31g x 6 mm , 31g x 8 mm , 32g x 4 mm	NPB	
1st tier unifine pentips plus 29g x 12mm , 31g x 5 mm , 31g x 6 mm , 31g x 8 mm , 32g x 4 mm	NPB	
ACCU-CHEK AVIVA IN VITRO SOLUTION (<i>blood glucose calibration</i>)	NPB	
ACCU-CHEK COMPACT PLUS CONTROL IN VITRO SOLUTION (<i>blood glucose calibration</i>)	NPB	

2020 Pharmacy Drug Guide - Premier Plus

The formulary is updated the first week of each month.

12/01/2020

Prescription Drug Name	Drug Tier	Coverage Requirements and Limits
ACCU-CHEK FASTCLIX LANCET KIT (<i>lancets misc.</i>)	PB	
ACCU-CHEK FASTCLIX LANCETS (<i>lancets</i>)	PB	
ACCU-CHEK MULTICLIX LANCET DEV KIT (<i>lancets misc.</i>)	PB	
ACCU-CHEK MULTICLIX LANCETS (<i>lancets</i>)	PB	
ACCU-CHEK SAFE-T PRO LANCETS (<i>lancets</i>)	PB	
ACCU-CHEK SMARTVIEW CONTROL IN VITRO LIQUID (<i>blood glucose calibration</i>)	NPB	
ACCU-CHEK SOFTCLIX LANCET DEV KIT (<i>lancets misc.</i>)	PB	
ACCU-CHEK SOFTCLIX LANCETS (<i>lancets</i>)	PB	
ACCUTREND GLUCOSE CONTROL IN VITRO SOLUTION (<i>blood glucose calibration</i>)	NPB	
ACE AEROSOL CLOUD ENHANCER (<i>respiratory therapy supplies</i>)	NPB	
ACTIVITY POUCH (<i>respiratory therapy supplies</i>)	NPB	
ADAPTER PED DISPOSABLE MOUTHPIECE (<i>respiratory therapy supplies</i>)	NPB	
<i>adjustable lancing device</i>	G	
adult aerosol mask	NPB	
adult mask	NPB	
adult mask large	NPB	
ADVANCE INTUITION CONTROL IN VITRO LIQUID NORMAL (<i>blood glucose calibration</i>)	NPB	
ADVANCE MICRO-DRAW CONTROL IN VITRO LIQUID (<i>blood glucose calibration</i>)	NPB	
ADVANCE MICRO-DRAW NORMAL IN VITRO LIQUID (<i>blood glucose calibration</i>)	NPB	
ADVOCATE CONTROL SOLUTION IN VITRO LIQUID HIGH , LOW (<i>blood glucose calibration</i>)	NPB	
ADVOCATE INSULIN PEN NEEDLES 31G X 5 MM , 31G X 8 MM (<i>insulin pen needle</i>)	NPB	
ADVOCATE 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 (<i>insulin syringe-needle u-100</i>)	NPB	

2020 Pharmacy Drug Guide - Premier Plus

The formulary is updated the first week of each month.

12/01/2020

Prescription Drug Name	Drug Tier	Coverage Requirements and Limits
ADVOCATE LANCING DEVICE (<i>lancet devices</i>)	NPB	
ADVOCATE RAPID-SAFE LANCING (<i>lancet devices</i>)	NPB	
ADVOCATE REDI-CODE+ CONTROL IN VITRO SOLUTION HIGH , LOW (<i>blood glucose calibration</i>)	NPB	
AEROTRACH PLUS (<i>respiratory therapy supplies</i>)	NPB	
AGAMATRIX CONTROL IN VITRO SOLUTION , HIGH , NORMAL (<i>blood glucose calibration</i>)	NPB	
AIRS PEDIATRIC AEROSOL MASK (<i>respiratory therapy supplies</i>)	NPB	
AIRZONE PEAK FLOW METER DEVICE (<i>peak flow meter</i>)	NPB	
ALCOH-GLOVE CONTOURED WIPE PAD (<i>alcohol swabs</i>)	NPB	
<i>alcohol pads pad 70 %</i>	G	
<i>alcohol prep pad 70 %</i>	G	
<i>alcohol swabs pad , 70 %</i>	G	
<i>alcohol wipes pad 70 %</i>	G	
ALL FLOW 1000 PFT FILTER (<i>respiratory therapy supplies</i>)	NPB	
<i>alternate site lancing device</i>	G	
<i>aqua lance adjustable lancing device</i>	NPB	
ASSESS FULL RANGE PEAK METER DEVICE (<i>peak flow meter</i>)	NPB	
ASSESS LOW RANGE PEAK METER DEVICE (<i>peak flow meter</i>)	NPB	
ASSESS PEAK FLOW METER DEVICE (<i>peak flow meter</i>)	NPB	
ASSURE 3 CONTROL IN VITRO LIQUID (<i>blood glucose calibration</i>)	NPB	
ASSURE 4 CONTROL LEVEL 1 & 2 IN VITRO LIQUID (<i>blood glucose calibration</i>)	NPB	
ASSURE DOSE CONTROL IN VITRO SOLUTION NORMAL (<i>blood glucose calibration</i>)	NPB	
ASSURE DOSE NORM/HIGH CONTROL IN VITRO SOLUTION (<i>blood glucose calibration</i>)	NPB	
ASSURE ID INSULIN SAFETY SYR 29G X 1/2" 0.5 ML, 29G X 1/2" 1 ML (<i>insulin syringe-needle u-100</i>)	NPB	
ASSURE II CONTROL IN VITRO LIQUID (<i>blood glucose calibration</i>)	NPB	

2020 Pharmacy Drug Guide - Premier Plus

The formulary is updated the first week of each month.

12/01/2020

Prescription Drug Name	Drug Tier	Coverage Requirements and Limits
ASSURE II CONTROL LEVEL 1 & 2 IN VITRO LIQUID <i>(blood glucose calibration)</i>	NPB	
ASSURE PRO CONTROL LEVEL 1 & 2 IN VITRO LIQUID <i>(blood glucose calibration)</i>	NPB	
ASTHMA CHECK METER-ZONE SYSTEM DEVICE <i>(peak flow meter)</i>	NPB	
ASTHMAMENTOR DEVICE <i>(peak flow meter)</i>	NPB	
aurora pen needles 29g x 12mm , 31g x 6 mm , 31g x 8 mm	NPB	
aurora unifine pentips 31g x 5 mm , 32g x 4 mm	NPB	
AUTOJECT 2 <i>(injection device)</i>	NPB	
AUTO-LANCET <i>(lancet devices)</i>	NPB	
AUTO-LANCET MINI <i>(lancet devices)</i>	NPB	
AUTOLET II CLINISAFE KIT <i>(lancets misc.)</i>	NPB	
AUTOLET LANCING DEVICE <i>(lancet devices)</i>	NPB	
AUTOLET LITE CLINISAFE KIT <i>(lancets misc.)</i>	NPB	
AUTOLET LITE STARTER PACK KIT <i>(lancets misc.)</i>	NPB	
AUTOLET MINI <i>(lancet devices)</i>	NPB	
AUTOLET PLATFORMS <i>(lancets misc.)</i>	NPB	
BD AUTOSHIELD 29G X 5MM , 29G X 8MM <i>(insulin pen needle)</i>	PB	
BD AUTOSHIELD DUO 30G X 5 MM <i>(insulin pen needle)</i>	PB	
BD INSULIN SYR ULTRAFINE II 31G X 5/16" 0.3 ML, 31G X 5/16" 0.5 ML <i>(insulin syringe-needle u-100)</i>	PB	
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, 27G X 1/2" 1 ML, 29G X 1/2" 1 ML <i>(insulin syringe-needle u-100)</i>	PB	
BD INSULIN SYRINGE MICROFINE 27G X 5/8" 1 ML, 28G X 1/2" 0.5 ML, 28G X 1/2" 1 ML <i>(insulin syringe-needle u-100)</i>	PB	
BD INSULIN SYRINGE U/F 30G X 1/2" 1 ML, 31G X 5/16" 0.3 ML <i>(insulin syringe-needle u-100)</i>	PB	
BD INSULIN SYRINGE U-100 1 ML <i>(insulin syringes (disposable))</i>	PB	
BD INSULIN SYRINGE ULTRAFINE 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, 31G X 5/16" 0.5 ML <i>(insulin syringe-needle u-100)</i>	PB	
BD LANCET ULTRAFINE 30G <i>(lancets)</i>	NPB	

2020 Pharmacy Drug Guide - Premier Plus

The formulary is updated the first week of each month.

12/01/2020

Prescription Drug Name	Drug Tier	Coverage Requirements and Limits
BD LANCET ULTRAFINE 33G (<i>lancets</i>)	NPB	
BD MICROAINER LANCETS (<i>lancets</i>)	NPB	
BD PEN (<i>injection device for insulin</i>)	PB	
BD PEN MINI (<i>injection device for insulin</i>)	PB	
BD PEN NEEDLE MINI U/F 31G X 5 MM (<i>insulin pen needle</i>)	PB	
BD PEN NEEDLE NANO U/F 32G X 4 MM (<i>insulin pen needle</i>)	PB	
BD PEN NEEDLE ORIGINAL U/F 29G X 12.7MM (<i>insulin pen needle</i>)	PB	
BD PEN NEEDLE SHORT U/F 31G X 8 MM (<i>insulin pen needle</i>)	PB	
BD SAFETYGLIDE INSULIN SYRINGE 30G X 5/16" 0.5 ML, 31G X 5/16" 0.3 ML (<i>insulin syringe-needle u-100</i>)	PB	
BD SAFETY-LOK INSULIN SYRINGE 29G X 1/2" 1 ML (<i>insulin syringe-needle u-100</i>)	PB	
BD SWABS SINGLE USE BUTTERFLY PAD (<i>alcohol swabs</i>)	NPB	
BUBBLES THE FISH II PEDI MASK (<i>respiratory therapy supplies</i>)	NPB	
CARDIOCOM LANCING DEVICE (<i>lancet devices</i>)	NPB	
<i>careone advanced lancing dev</i>	NPB	
<i>careone unifine pentips 29g x 12mm , 31g x 5 mm , 31g x 6 mm , 31g x 8 mm , 32g x 4 mm</i>	NPB	
<i>careone unifine pentips plus 29g x 12mm , 31g x 5 mm , 31g x 6 mm , 31g x 8 mm , 32g x 4 mm</i>	NPB	
CARESENS CONTROL A IN VITRO SOLUTION (<i>blood glucose calibration</i>)	NPB	
CAYA VAGINAL DIAPHRAGM (<i>diaphragm arc-spring</i>)	CE	N2 (NPB); QL (1 device per 300 days)
CLEVER CHOICE GLUCOSE CONTROL IN VITRO LIQUID HIGH , LOW (<i>blood glucose calibration</i>)	NPB	
<i>clickfine pen needles 31g x 6 mm , 31g x 8 mm , 32g x 4 mm</i>	NPB	
<i>co monitor replacement pieces</i>	NPB	
COAGUCHEK LANCETS (<i>lancets</i>)	PB	

Prescription Drug Name	Drug Tier	Coverage Requirements and Limits
COMFORT EZ 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" 0.3 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 (<i>insulin syringe-needle u-100</i>)	NPB	
COMFORT EZ PEN NEEDLES 31G X 5 MM , 31G X 6 MM , 31G X 8 MM , 32G X 4 MM (<i>insulin pen needle</i>)	NPB	
<i>control in vitro solution normal</i>	NPB	
CURITY ALCOHOL PREPS PAD 70 % (<i>alcohol swabs</i>)	NPB	
CURITY ALCOHOL SWABS PAD (<i>alcohol swabs</i>)	NPB	
<i>cvs lancing device</i>	NPB	
DEXCOM G4 PLAT PED RCV/Sshare DEVICE (<i>continuous blood gluc receiver</i>)	PB	
DEXCOM G4 PLAT PED RECEIVER DEVICE (<i>continuous blood gluc receiver</i>)	PB	
DEXCOM G4 PLATINUM RCV/Sshare DEVICE (<i>continuous blood gluc receiver</i>)	PB	
DEXCOM G4 PLATINUM RECEIVER DEVICE (<i>continuous blood gluc receiver</i>)	PB	
DEXCOM G4 PLATINUM TRANSMITTER (<i>continuous blood gluc transmit</i>)	PB	
DEXCOM G4 SENSOR (<i>continuous blood gluc sensor</i>)	PB	
DEXCOM G5 MOB/G4 PLAT SENSOR (<i>continuous blood gluc sensor</i>)	PB	
DEXCOM G5 MOBILE RECEIVER DEVICE (<i>continuous blood gluc receiver</i>)	PB	
DEXCOM G5 MOBILE TRANSMITTER (<i>continuous blood gluc transmit</i>)	PB	
DEXCOM G5 RECEIVER KIT DEVICE (<i>continuous blood gluc receiver</i>)	PB	
DEXCOM G6 RECEIVER DEVICE (<i>continuous blood gluc receiver</i>)	PB	
DEXCOM G6 SENSOR (<i>continuous blood gluc sensor</i>)	PB	
DEXCOM G6 TRANSMITTER (<i>continuous blood gluc transmit</i>)	PB	
<i>diatru control level 1 in vitro solution low</i>	NPB	
<i>diatru control level 2 in vitro solution normal</i>	NPB	

2020 Pharmacy Drug Guide - Premier Plus

The formulary is updated the first week of each month.

12/01/2020

Prescription Drug Name	Drug Tier	Coverage Requirements and Limits
diatruie control level 3 in vitro solution high	NPB	
DROPLET LANCING DEVICE (<i>lancet devices</i>)	NPB	
DRUG MART LANCING DEVICE (<i>lancet devices</i>)	NPB	
drug mart unifine pentips 29g x 12mm , 31g x 5 mm , 31g x 6 mm , 31g x 8 mm , 32g x 4 mm	NPB	
DUO-CARE CONTROL SOLUTION IN VITRO LIQUID (<i>blood glucose calibration</i>)	NPB	
easy comfort insulin syringe 30g x 1/2" 1 ml	NPB	
easy comfort pen needles 31g x 5 mm , 31g x 8 mm	NPB	
easy mini lancing device	NPB	
easy plus ii control in vitro solution high , low	NPB	
EASY STEP CONTROL IN VITRO SOLUTION HIGH , LOW , NORMAL (<i>blood glucose calibration</i>)	NPB	
easy talk control in vitro solution high , low , normal	NPB	
EASY TOUCH ALCOHOL PREP MEDIUM PAD 70 % (<i>alcohol swabs</i>)	NPB	
EASY TOUCH CONTROL HIGH & LOW IN VITRO SOLUTION (<i>blood glucose calibration</i>)	NPB	
EASY TOUCH INSULIN SAFETY SYR 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 (<i>insulin syringe-needle u-100</i>)	NPB	
EASY TOUCH INSULIN SYRINGE 27G X 1/2" 1 ML, 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, 30G X 1/2" 0.3 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 (<i>insulin syringe-needle u-100</i>)	NPB	
EASY TOUCH LANCING DEVICE (<i>lancet devices</i>)	NPB	
EASY TOUCH PEN NEEDLES 29G X 12MM , 31G X 5 MM , 31G X 6 MM , 31G X 8 MM , 32G X 5 MM , 32G X 6 MM (<i>insulin pen needle</i>)	NPB	
easy trak control in vitro solution high , low , normal	NPB	
EASYGLUCO CONTROL IN VITRO SOLUTION HIGH , LOW , NORMAL (<i>blood glucose calibration</i>)	NPB	
EASYMAX 15 LEVEL 2 CONTROL IN VITRO SOLUTION (<i>blood glucose calibration</i>)	NPB	
EASYMAX CONTROL IN VITRO SOLUTION NORMAL (<i>blood glucose calibration</i>)	NPB	

2020 Pharmacy Drug Guide - Premier Plus

The formulary is updated the first week of each month.

12/01/2020

Prescription Drug Name	Drug Tier	Coverage Requirements and Limits
EFLOW SCF AEROSOL HEAD (<i>respiratory therapy supplies</i>)	NPB	
element compact control 2 in vitro solution	NPB	
element compact control 3 in vitro solution	NPB	
ELEMENT CONTROL IN VITRO LIQUID HIGH , LOW , NORMAL (<i>blood glucose calibration</i>)	NPB	
EMBRACE CONTROL IN VITRO SOLUTION LOW (<i>blood glucose calibration</i>)	NPB	
ENLITE GLUCOSE SENSOR (<i>continuous blood gluc sensor</i>)	NPB	
EVENCARE CONTROL LOW/HIGH IN VITRO LIQUID (<i>blood glucose calibration</i>)	NPB	
EVENCARE G2 LOW/HIGH CONTROL IN VITRO SOLUTION (<i>blood glucose calibration</i>)	NPB	
EVENCARE G3 LOW/HIGH CONTROL IN VITRO SOLUTION (<i>blood glucose calibration</i>)	NPB	
EVOLUTION CONTROL IN VITRO SOLUTION NORMAL (<i>blood glucose calibration</i>)	NPB	
FC FEMALE CONDOM (<i>condoms - female</i>)	CE	N2 (Not Covered)
FC2 FEMALE CONDOM (<i>condoms - female</i>)	CE	N2 (Not Covered)
FEMCAP VAGINAL DEVICE 22 MM, 26 MM, 30 MM (<i>cervical caps</i>)	CE	N2 (NPB); QL (1 device per 300 days)
FIFTY50 ALCOHOL PREP PAD 70 % (<i>alcohol swabs</i>)	NPB	
FIFTY50 PEN NEEDLES 31G X 5 MM , 31G X 8 MM (<i>insulin pen needle</i>)	NPB	
FIFTY50 SUPERIOR COMFORT SYR 31G X 5/16" 0.3 ML, 31G X 5/16" 0.5 ML, 31G X 5/16" 1 ML (<i>insulin syringe-needle u-100</i>)	NPB	
filter air pp	NPB	
FORA CONTROL IN VITRO SOLUTION HIGH , LOW , NORMAL (<i>blood glucose calibration</i>)	NPB	
FORA LANCING DEVICE (<i>lancet devices</i>)	NPB	
FORACARE GDH CONTROL IN VITRO SOLUTION HIGH , LOW , NORMAL (<i>blood glucose calibration</i>)	NPB	
freds pharmacy autolet lancing	NPB	
freds pharmacy unifine pentip+ 31g x 5 mm , 31g x 8 mm	NPB	
freds pharmacy unifine pentips 32g x 4 mm	NPB	

2020 Pharmacy Drug Guide - Premier Plus

The formulary is updated the first week of each month.

12/01/2020

Prescription Drug Name	Drug Tier	Coverage Requirements and Limits
FREESTYLE CONTROL SOLUTION IN VITRO LIQUID <i>(blood glucose calibration)</i>	NPB	
FREESTYLE LANCETS (<i>lancets</i>)	NPB	
FREESTYLE LIBRE 14 DAY READER DEVICE <i>(continuous blood gluc receiver)</i>	NPB	
FREESTYLE LIBRE 14 DAY SENSOR (<i>continuous blood gluc sensor</i>)	NPB	
FREESTYLE PRECISION INS SYR 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 <i>(insulin syringe-needle u-100)</i>	NPB	
<i>full kit nebulizer set</i>	NPB	
<i>ge100 control in vitro solution normal</i>	NPB	
GENTLE-LET PLATFORMS (<i>lancets misc.</i>)	NPB	
<i>global alcohol prep ease pad 70 %</i>	NPB	
<i>global ease inject pen needles 29g x 12mm , 31g x 5 mm , 31g x 8 mm , 32g x 4 mm</i>	NPB	
<i>global inject ease insulin syr 30g x 1/2" 0.3 ml, 30g x 1/2" 1 ml</i>	NPB	
<i>global lancing device</i>	NPB	
GLUCOCARD 01 CONTROL IN VITRO LIQUID (<i>blood glucose calibration</i>)	NPB	
GLUCOCARD 01 CONTROL IN VITRO SOLUTION NORMAL (<i>blood glucose calibration</i>)	NPB	
GLUCOCARD EXPRESSION CONTROL IN VITRO SOLUTION (<i>blood glucose calibration</i>)	NPB	
GLUCOCARD SHINE CONTROL IN VITRO SOLUTION <i>(blood glucose calibration)</i>	NPB	
GLUCOCARD X-SENSOR CONTROL IN VITRO SOLUTION NORMAL (<i>blood glucose calibration</i>)	NPB	
GLUCOCOM CONTROL IN VITRO LIQUID HIGH , NORMAL (<i>blood glucose calibration</i>)	NPB	
GLUCOPRO INSULIN SYRINGE 30G X 1/2" 0.3 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 (<i>insulin syringe-needle u-100</i>)	NPB	
<i>glucose control in vitro solution , normal</i>	G	
<i>gnp alcohol swabs pad 70 %</i>	NPB	
<i>gnp clickfine pen needles 31g x 6 mm , 31g x 8 mm</i>	NPB	

2020 Pharmacy Drug Guide - Premier Plus

The formulary is updated the first week of each month.

12/01/2020

170

Prescription Drug Name	Drug Tier	Coverage Requirements and Limits
GUARDIAN CONNECT TRANSMITTER (<i>continuous blood gluc transmit</i>)	NPB	
GUARDIAN LINK 3 TRANSMITTER (<i>continuous blood gluc transmit</i>)	NPB	
GUARDIAN REAL-TIME REPLACE PED DEVICE (<i>continuous blood gluc receiver</i>)	NPB	
GUARDIAN SENSOR (3) (<i>continuous blood gluc sensor</i>)	NPB	
HEALTH CARE LANCING DEVICE (<i>lancet devices</i>)	NPB	
<i>healthwise mini pen needles 31g x 6 mm</i>	NPB	
<i>healthwise pen needles 29g x 12mm</i>	NPB	
<i>healthwise short pen needles 31g x 8 mm</i>	NPB	
<i>healthwise unifine pentips 32g x 4 mm</i>	NPB	
<i>healthy accents lancing device</i>	NPB	
<i>healthy accents unifine pentip 29g x 12mm , 31g x 5 mm , 31g x 6 mm , 31g x 8 mm , 32g x 4 mm</i>	NPB	
<i>h-e-b incontrol adv lancing</i>	NPB	
<i>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</i>	NPB	
HM ULTICARE INSULIN SYRINGE 31G X 5/16" 0.3 ML (<i>insulin syringe-needle u-100</i>)	NPB	
HYPOLANCE AST LANCING KIT (<i>lancets misc.</i>)	NPB	
INFINITY CONTROL IN VITRO SOLUTION HIGH , LOW , NORMAL (<i>blood glucose calibration</i>)	NPB	
<i>inject-ease</i>	NPB	
INNOSPIRE REPLACEMENT FILTER (<i>respiratory therapy supplies</i>)	NPB	
INSPIREASE RESERVOIR BAGS (<i>spacer/aero-hold chamber bags</i>)	NPB	
<i>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" 0.3 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" 0.5 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</i>	G	
<i>insulin syringe/needle 27g x 1/2" 0.5 ml, 28g x 1/2" 0.5 ml, 28g x 1/2" 1 ml</i>	G	
<i>insulin syringe-needle u-100 31g x 1/4" 0.3 ml, 31g x 1/4" 0.5 ml, 31g x 1/4" 1 ml</i>	G	

Prescription Drug Name	Drug Tier	Coverage Requirements and Limits
insupen pen needles 32g x 4 mm	NPB	
INSUPEN SENSITIVE 32G X 6 MM , 32G X 8 MM (<i>insulin pen needle</i>)	NPB	
INSUPEN ULTRAFIN 30G X 8 MM , 31G X 6 MM , 31G X 8 MM (<i>insulin pen needle</i>)	NPB	
J-TIP KIT W/VIAL ADAPTERS KIT (<i>injection device</i>)	NPB	
kmart valu insulin syringe 29g u-100 0.5 ml, u-100 1 ml	NPB	
kmart valu insulin syringe 30g u-100 0.3 ml, u-100 0.5 ml, u-100 1 ml	NPB	
KOKO PEAK PRO MOUTHPIECE (<i>respiratory therapy supplies</i>)	NPB	
kroger lancing device	NPB	
kroger pen needles 29g x 12mm , 31g x 6 mm , 31g x 8 mm	NPB	
lancet device	G	
lancets	G	
LANCETS ULTRA THIN (<i>lancets</i>)	NPB	
lancing device	G	
leader advanced lancing device	NPB	
LEADER UNIFINE PENTIPS 31G X 5 MM , 32G X 4 MM (<i>insulin pen needle</i>)	NPB	
LEADER UNIFINE PENTIPS PLUS 31G X 5 MM , 31G X 8 MM , 32G X 4 MM (<i>insulin pen needle</i>)	NPB	
LIBERTY GLUCOSE CONTROL IN VITRO LIQUID NORMAL (<i>blood glucose calibration</i>)	NPB	
LIBERTY GLUCOSE CONTROL IN VITRO SOLUTION HIGH , NORMAL (<i>blood glucose calibration</i>)	NPB	
LIBERTY GLUCOSE CONTROL MID IN VITRO SOLUTION (<i>blood glucose calibration</i>)	NPB	
LIBERTY MINI LANCING DEVICE (<i>lancet devices</i>)	NPB	
LITE TOUCH LANCING PEN (<i>lancet devices</i>)	NPB	
LITETOUCH 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 (<i>insulin syringe-needle u-100</i>)	NPB	
LITETOUCH MASK LARGE (<i>respiratory therapy supplies</i>)	NPB	

2020 Pharmacy Drug Guide - Premier Plus

The formulary is updated the first week of each month.

12/01/2020

Prescription Drug Name	Drug Tier	Coverage Requirements and Limits
LITETOUCH MASK MEDIUM (<i>respiratory therapy supplies</i>)	NPB	
LITETOUCH MASK SMALL (<i>respiratory therapy supplies</i>)	NPB	
LITETOUCH PEN NEEDLES 29G X 12.7MM , 31G X 6 MM , 31G X 8 MM (<i>insulin pen needle</i>)	NPB	
<i>live better adv lancing device</i>	NPB	
MAGELLAN INSULIN SAFETY 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 (<i>insulin syringe-needle u-100</i>)	NPB	
MASK VORTEX (<i>spacer/aero-hold chamber mask</i>)	NPB	
MAXI-COMFORT INSULIN SYRINGE 28G X 1/2" 0.5 ML, 28G X 1/2" 1 ML (<i>insulin syringe-needle u-100</i>)	NPB	
<i>medicine shoppe pen needles 29g x 12mm , 31g x 6 mm , 31g x 8 mm</i>	NPB	
MEDISENSE GLUCOSE KETONE CONTR IN VITRO LIQUID (<i>blood glucose calibration</i>)	NPB	
MEDISENSE HI/MID/LOW CONTROL IN VITRO LIQUID (<i>blood glucose calibration</i>)	NPB	
MEDISENSE HIGH/LOW CONTROL IN VITRO LIQUID (<i>blood glucose calibration</i>)	NPB	
MEDISENSE MID CONTROL IN VITRO LIQUID (<i>blood glucose calibration</i>)	NPB	
<i>meijer alcohol swabs pad 70 %</i>	NPB	
<i>meijer pen needles 29g x 12mm , 31g x 6 mm , 31g x 8 mm</i>	NPB	
MICRODOT CONTROL HIGH/LOW IN VITRO SOLUTION (<i>blood glucose calibration</i>)	NPB	
MICROELITE BATTERY (<i>respiratory therapy supplies</i>)	NPB	
MICROELITE FILTER REPLACEMENTS (<i>respiratory therapy supplies</i>)	NPB	
MICROLET LANCETS (<i>lancets</i>)	NPB	
MICROLIFE DIGITAL PEAK FLOW DEVICE (<i>peak flow meter</i>)	NPB	
<i>mini lancing device</i>	NPB	
MINI WRIGHT PEAK FLOW METER DEVICE (<i>peak flow meter</i>)	NPB	
MINIELITE FILTER REPLACEMENTS (<i>respiratory therapy supplies</i>)	NPB	

2020 Pharmacy Drug Guide - Premier Plus

The formulary is updated the first week of each month.

12/01/2020

Prescription Drug Name	Drug Tier	Coverage Requirements and Limits
MINIELITE RECHARGEABLE BATTERY (<i>respiratory therapy supplies</i>)	NPB	
MINIMED GUARDIAN SENSOR 3 (<i>continuous blood glucose sensor</i>)	NPB	
MONOJECT INSULIN SYRINGE 25G X 5/8" 1 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, 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" 1 ML (<i>insulin syringe-needle u-100</i>)	NPB	
MONOJECT INSULIN SYRINGE U-100 1 ML (<i>insulin syringes (disposable)</i>)	NPB	
MONOJECT ULTRA COMFORT 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, 31G X 5/16" 0.3 ML, 31G X 5/16" 0.5 ML (<i>insulin syringe-needle u-100</i>)	NPB	
<i>multi-lancet device</i>	G	
MYGLUCOHEALTH CONTROL IN VITRO SOLUTION (<i>blood glucose calibration</i>)	NPB	
<i>nebulizer air tube/plugs</i>	NPB	
NEUTEK 2TEK CONTROL IN VITRO SOLUTION (<i>blood glucose calibration</i>)	NPB	
NORDIPEN 5 INJECTION DEVICE (<i>injection device</i>)	NPB	
NORDIPEN DELIVERY SYSTEM (<i>injection device</i>)	NPB	
<i>nose clip</i>	NPB	
NOVA MAX PLUS GLU/KET CONTROL IN VITRO LIQUID (<i>blood glucose calibration</i>)	NPB	
NOVA SUREFLEX LANCING DEVICE (<i>lancet devices</i>)	NPB	
NOVOFINE 32G X 6 MM (<i>insulin pen needle</i>)	NPB	
NOVOFINE AUTOCOVER 30G X 8 MM (<i>insulin pen needle</i>)	NPB	
NOVOTWIST 32G X 5 MM (<i>insulin pen needle</i>)	NPB	
OMNIFLEX DIAPHRAGM VAGINAL DIAPHRAGM (<i>diaphragms</i>)	CE	N2 (NPB); QL (1 device per 300 days)
ONE FLOW TESTER MOUTHPIECE (<i>respiratory therapy supplies</i>)	NPB	
ONETOUCH DELICA LANCING DEV (<i>lancet devices</i>)	NPB	
ONETOUCH SURESOFT LANCING DEV (<i>lancets misc.</i>)	NPB	

2020 Pharmacy Drug Guide - Premier Plus

The formulary is updated the first week of each month.

12/01/2020

Prescription Drug Name	Drug Tier	Coverage Requirements and Limits
ONETOUCH ULTRA CONTROL IN VITRO SOLUTION (blood glucose calibration)	NPB	
ONETOUCH VERIO IN VITRO SOLUTION , HIGH (blood glucose calibration)	NPB	
PANDA MASK LARGE (spacer/aero-hold chamber mask)	NPB	
PANDA MASK MEDIUM (spacer/aero-hold chamber mask)	NPB	
PANDA MASK SMALL (spacer/aero-hold chamber mask)	NPB	
PARI ALTERA NEBULIZER HANDSET (respiratory therapy supplies)	NPB	
PARI BABY CONVERSION KIT (respiratory therapy supplies)	NPB	
PARI ERAPID NEBULIZER HANDSET (respiratory therapy supplies)	NPB	
PARI EXPIRATORY FILTER SET DEVICE (respiratory therapy supplies)	NPB	
PARI MASK SET (respiratory therapy supplies)	NPB	
PARI SOFT PLASTIC ADULT MASK (respiratory therapy supplies)	NPB	
PARI SOFT PLASTIC PED MASK (respiratory therapy supplies)	NPB	
pc unifine pentips 29g x 12mm , 31g x 5 mm , 31g x 6 mm , 31g x 8 mm	NPB	
PEAK AIR PEAK FLOW METER DEVICE (peak flow meter)	NPB	
pediatric mouthpiece	NPB	
PEDIATRIC PANDA MASK (spacer/aero-hold chamber mask)	NPB	
pen needles 1/2" 29g x 12mm	G	
pen needles 29g x 12mm , 30g x 5 mm , 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	G	
pen needles 3/16" 31g x 5 mm	G	
pen needles 5/16" 30g x 8 mm , 31g x 8 mm	G	
PENLET II BLOOD SAMPLER KIT (lancets misc.)	NPB	
PENLET II REPLACEMENT CAP (lancets misc.)	NPB	
PERSONAL BEST FULL RANGE DEVICE (peak flow meter)	NPB	

2020 Pharmacy Drug Guide - Premier Plus

The formulary is updated the first week of each month.

12/01/2020

Prescription Drug Name	Drug Tier	Coverage Requirements and Limits
PERSONAL BEST LOW RANGE DEVICE (<i>peak flow meter</i>)	NPB	
PFLEX (<i>respiratory therapy supplies</i>)	NPB	
PHARMACIST CHOICE ALCOHOL PAD (<i>alcohol swabs</i>)	NPB	
PIKO 1 DEVICE (<i>peak flow meter</i>)	NPB	
<i>pillow mask/adult</i>	NPB	
<i>pillow mask/child</i>	NPB	
<i>pillow mask/pediatric</i>	NPB	
POCKET PEAK FLOW METER DEVICE (<i>peak flow meter</i>)	NPB	
POCKETCHEM EZ CONTROL IN VITRO SOLUTION (<i>blood glucose calibration</i>)	NPB	
POCKETPEAK PEAK FLOW METER DEVICE (<i>peak flow meter</i>)	NPB	
PRECISION GLUCOSE CONTROL IN VITRO LIQUID (<i>blood glucose calibration</i>)	NPB	
PRECISION GLUCOSE CONTROL SOLN IN VITRO SOLUTION (<i>blood glucose calibration</i>)	NPB	
PRECISION GLUCOSE KETONE CONTR IN VITRO LIQUID (<i>blood glucose calibration</i>)	NPB	
PRECISION GLUCOSE/KETONE CONTR IN VITRO LIQUID (<i>blood glucose calibration</i>)	NPB	
PRECISION SUREDOSE PLUS SYR 29G X 1/2" 0.3 ML, 29G X 1/2" 1 ML (<i>insulin syringe-needle u-100</i>)	NPB	
PRECISION SURE-DOSE SYRINGE 28G X 1/2" 0.5 ML, 28G X 1/2" 1 ML, 29G X 1/2" 0.5 ML, 30G X 3/8" 0.5 ML, 30G X 5/16" 0.3 ML (<i>insulin syringe-needle u-100</i>)	NPB	
<i>preferred plus unifine pentips 29g x 12mm , 31g x 5 mm , 31g x 6 mm , 31g x 8 mm , 32g x 4 mm</i>	NPB	
PRODIGY CONTROL SOLUTION IN VITRO SOLUTION HIGH , LOW (<i>blood glucose calibration</i>)	NPB	
PRODIGY INSULIN SYRINGE 28G X 1/2" 1 ML, 31G X 5/16" 0.3 ML, 31G X 5/16" 0.5 ML (<i>insulin syringe-needle u-100</i>)	NPB	
PRODIGY LANCING DEVICE (<i>lancet devices</i>)	NPB	
PSS SELECT PLATFORMS (<i>lancets misc.</i>)	NPB	
<i>px advanced lancing device</i>	NPB	
<i>px extra short pen needles 31g x 6 mm</i>	NPB	

2020 Pharmacy Drug Guide - Premier Plus

The formulary is updated the first week of each month.

12/01/2020

Prescription Drug Name	Drug Tier	Coverage Requirements and Limits
<i>px lancet auto injector</i>	NPB	
<i>px pen needle 29g x 12mm , 31g x 8 mm</i>	NPB	
<i>px shortlength pen needles 31g x 8 mm</i>	NPB	
<i>qc advanced lancing device</i>	NPB	
<i>qc alcohol swabs pad 70 %</i>	NPB	
<i>qc pen needles 29g x 12mm , 31g x 6 mm , 31g x 8 mm</i>	NPB	
<i>qc unifine pentips 32g x 4 mm</i>	NPB	
QUICKTEK CONTROL SOLUTION IN VITRO LIQUID (blood glucose calibration)	NPB	
QUINTET CONTROL HIGH/NORMAL IN VITRO SOLUTION (blood glucose calibration)	NPB	
<i>ra alcohol swabs pad 70 %</i>	NPB	
<i>ra lancing device</i>	NPB	
<i>ra pen needles 31g x 5 mm , 31g x 8 mm</i>	NPB	
<i>reality swabs pad</i>	NPB	
REFUAH PLUS GLUCOSE CONTROL IN VITRO SOLUTION (blood glucose calibration)	NPB	
RELION ALCOHOL SWABS PAD , 70 % (alcohol swabs)	NPB	
RELI-ON INSULIN SYRINGE 29G 0.3 ML, 29G 0.5 ML, 29G X 1/2" 1 ML, 30G 0.3 ML, 30G 0.5 ML, 30G 1 ML (insulin syringe-needle u-100)	NPB	
RELION 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 (insulin syringe-needle u- 100)	NPB	
RELION LANCING DEVICE (lancet devices)	NPB	
RELION MINI PEN NEEDLES 31G X 6 MM (insulin pen needle)	NPB	
RELION PEN NEEDLES 29G X 12MM , 31G X 8 MM , 32G X 4 MM (insulin pen needle)	NPB	
RELION SHORT PEN NEEDLES 31G X 8 MM (insulin pen needle)	NPB	
<i>replacement air filter</i>	NPB	
<i>replacement filters</i>	NPB	
RIGHTEST ALTERNATE SITE ADAPT (lancets misc.)	NPB	

2020 Pharmacy Drug Guide - Premier Plus

The formulary is updated the first week of each month.

12/01/2020

Prescription Drug Name	Drug Tier	Coverage Requirements and Limits
RIGHTEST GC300 CONTROL IN VITRO LIQUID HIGH , NORMAL (<i>blood glucose calibration</i>)	NPB	
RIGHTEST GD500 LANCING DEVICE (<i>lancet devices</i>)	NPB	
SAFESNAP INSULIN SYRINGE 28G X 1/2" 1 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 (<i>insulin syringe-needle u-100</i>)	NPB	
SAMI THE SEAL FILTERS (<i>respiratory therapy supplies</i>)	NPB	
<i>sb alcohol prep pad 70 %</i>	NPB	
<i>select-lite device/lancets kit</i>	NPB	
<i>select-lite lancing device</i>	NPB	
SHOPKO ALCOHOL SWABS PAD 70 % (<i>alcohol swabs</i>)	NPB	
SHOPKO AUTOLET LANCING DEVICE (<i>lancet devices</i>)	NPB	
SHOPKO UNIFINE PENTIPS 29G X 12MM , 31G X 5 MM , 31G X 8 MM , 32G X 4 MM (<i>insulin pen needle</i>)	NPB	
SIDESTREAM ADULT FACE MASK (<i>respiratory therapy supplies</i>)	NPB	
SIDESTREAM PEDIATRIC FACE MASK (<i>respiratory therapy supplies</i>)	NPB	
SIDESTREAM PLS ADULT FACE MASK (<i>respiratory therapy supplies</i>)	NPB	
<i>silicone mask/adult</i>	NPB	
<i>silicone mask/infant</i>	NPB	
<i>silicone mask/pediatric</i>	NPB	
SIMPLE DIAGNOSTICS LANCING DEV (<i>lancet devices</i>)	NPB	
<i>sm alcohol prep pad , 70 %</i>	NPB	
SMART DIABETES VANTAGE LANCING (<i>lancet devices</i>)	NPB	
SMARTEST CONTROL MEDIUM IN VITRO SOLUTION (<i>blood glucose calibration</i>)	NPB	
SOLARTEK GLUCOSE CONTROL IN VITRO LIQUID (<i>blood glucose calibration</i>)	NPB	
SOLUS V2 CONTROL IN VITRO SOLUTION HIGH , LOW (<i>blood glucose calibration</i>)	NPB	
SOLUS V2 LANCING DEVICE (<i>lancet devices</i>)	NPB	
STERILANCE PA (<i>lancets misc.</i>)	NPB	
<i>supreme ii high/low control in vitro liquid</i>	NPB	
<i>sure comfort alcohol prep pad 70 %</i>	NPB	

2020 Pharmacy Drug Guide - Premier Plus

The formulary is updated the first week of each month.

12/01/2020

Prescription Drug Name	Drug Tier	Coverage Requirements and Limits
sure comfort insulin syringe 30g x 1/2" 0.3 ml, 30g x 1/2" 1 ml	NPB	
sure comfort lancing pen	NPB	
sure comfort pen needles 29g x 12.7mm , 30g x 8 mm , 31g x 5 mm , 31g x 8 mm	NPB	
SURE-FINE PEN NEEDLES 29G X 12.7MM , 31G X 5 MM , 31G X 8 MM (<i>insulin pen needle</i>)	NPB	
SURE-JECT 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 (<i>insulin syringe-needle u-100</i>)	NPB	
SURE-PEN (<i>lancet devices</i>)	NPB	
SURE-PREP ALCOHOL PREP PAD 70 % (<i>alcohol swabs</i>)	NPB	
SURESTEP GLUCOSE CONTROL IN VITRO SOLUTION (<i>blood glucose calibration</i>)	NPB	
SURESTEP PRO HIGH GLUCOSE IN VITRO LIQUID (<i>blood glucose calibration</i>)	NPB	
SURESTEP PRO LOW GLUCOSE IN VITRO LIQUID (<i>blood glucose calibration</i>)	NPB	
SURESTEP PRO NORMAL GLUCOSE IN VITRO LIQUID (<i>blood glucose calibration</i>)	NPB	
TAI DOC CONTROL IN VITRO SOLUTION NORMAL (<i>blood glucose calibration</i>)	NPB	
TELCARE GLUCOSE CONTROL IN VITRO SOLUTION (<i>blood glucose calibration</i>)	NPB	
tgt lancing device	NPB	
THRESHOLD IMT (<i>respiratory therapy supplies</i>)	NPB	
todays health lancing device	NPB	
todays health mini pen needles 31g x 6 mm	NPB	
todays health pen needles 29g x 12mm	NPB	
todays health short pen needle 31g x 8 mm	NPB	
topcare clickfine pen needles 31g x 6 mm , 31g x 8 mm	NPB	
TRUECONTROL GLUCOSE CONT LEV 0 IN VITRO LIQUID (<i>blood glucose calibration</i>)	NPB	
TRUECONTROL GLUCOSE CONT LEV 1 IN VITRO LIQUID (<i>blood glucose calibration</i>)	NPB	
TRUEDRAW LANCING DEVICE (<i>lancet devices</i>)	NPB	

2020 Pharmacy Drug Guide - Premier Plus

The formulary is updated the first week of each month.

12/01/2020

Prescription Drug Name	Drug Tier	Coverage Requirements and Limits
TRUEPLUS 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 (<i>insulin syringe-needle u-100</i>)	NPB	
TRUEPLUS LANCETS 30G (<i>lancets</i>)	NPB	
TRUZONE PEAK FLOW METER DEVICE (<i>peak flow meter</i>)	NPB	
tubing/wing tip	NPB	
ULTICARE INSULIN SAFETY SYR 29G X 1/2" 0.5 ML, 29G X 1/2" 1 ML (<i>insulin syringe-needle u-100</i>)	NPB	
ULTICARE 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" 0.3 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" 0.5 ML, 31G X 5/16" 1 ML (<i>insulin syringe-needle u-100</i>)	NPB	
ULTICARE MICRO PEN NEEDLES 32G X 4 MM (<i>insulin pen needle</i>)	NPB	
ULTICARE MINI PEN NEEDLES 31G X 6 MM (<i>insulin pen needle</i>)	NPB	
ULTICARE PEN NEEDLES 29G X 12.7MM (<i>insulin pen needle</i>)	NPB	
ULTICARE SHORT PEN NEEDLES 31G X 8 MM (<i>insulin pen needle</i>)	NPB	
ULTI-LANCE AUTOMATIC (<i>lancet devices</i>)	NPB	
ULTILET INSULIN SYRINGE SHORT 30G X 5/16" 0.3 ML, 30G X 5/16" 0.5 ML, 30G X 5/16" 1 ML (<i>insulin syringe-needle u-100</i>)	NPB	
ULTRALANCE (<i>lancets misc.</i>)	NPB	
ULTRA-THIN II INS SYR SHORT 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 (<i>insulin syringe-needle u-100</i>)	NPB	
ULTRA-THIN II INSULIN SYRINGE 29G X 1/2" 0.5 ML, 29G X 1/2" 1 ML (<i>insulin syringe-needle u-100</i>)	NPB	
ULTRA-THIN II MINI PEN NEEDLE 31G X 5 MM (<i>insulin pen needle</i>)	NPB	

Prescription Drug Name	Drug Tier	Coverage Requirements and Limits
ULTRA-THIN II PEN NEEDLE SHORT 31G X 8 MM (insulin pen needle)	NPB	
ULTRA-THIN II PEN NEEDLES 29G X 12.7MM (insulin pen needle)	NPB	
ULTRATRAK PRO CONTROL IN VITRO SOLUTION , NORMAL (blood glucose calibration)	NPB	
ULTRATRAK ULTIMATE CONTROL IN VITRO SOLUTION (blood glucose calibration)	NPB	
UNIFINE PENTIPS 29G X 12MM , 31G X 5 MM , 31G X 6 MM , 31G X 8 MM , 32G X 4 MM (insulin pen needle)	NPB	
UNIFINE PENTIPS PLUS 31G X 5 MM , 31G X 6 MM , 31G X 8 MM , 32G X 4 MM (insulin pen needle)	NPB	
UNISTIK 1 (lancets misc.)	NPB	
UNISTIK 2 (lancets misc.)	NPB	
UNISTIK 2 COMFORT (lancets misc.)	NPB	
UNISTIK 2 EXTRA (lancets misc.)	NPB	
UNISTIK 2 NEONATAL (lancets misc.)	NPB	
UNISTIK 2 NORMAL (lancets misc.)	NPB	
UNISTIK 2 SUPER (lancets misc.)	NPB	
UNISTIK 3 (lancets misc.)	NPB	
UNISTIK 3 COMFORT (lancets misc.)	NPB	
UNISTIK 3 EXTRA (lancets misc.)	NPB	
UNISTIK 3 NEONATAL (lancets misc.)	NPB	
UNISTIK 3 NORMAL (lancets misc.)	NPB	
UNISTIK CZT COMFORT (lancets misc.)	NPB	
UNISTIK CZT NORMAL (lancets misc.)	NPB	
UNISTRIP CONTROL IN VITRO SOLUTION HIGH , LOW (blood glucose calibration)	NPB	
value plus lancing device	NPB	
valumark pen needles 29g x 12mm , 31g x 6 mm , 31g x 8 mm	NPB	
VANISHPOINT INSULIN SYRINGE 29G X 1/2" 1 ML, 30G X 3/16" 0.5 ML, 30G X 3/16" 1 ML (insulin syringe-needle u-100)	NPB	
VIDA MIA AUTOLET LANCING DEV (lancet devices)	NPB	
VIDA MIA UNIFINE PENTIPS 29G X 12MM , 31G X 6 MM , 31G X 8 MM , 32G X 4 MM (insulin pen needle)	NPB	

2020 Pharmacy Drug Guide - Premier Plus

The formulary is updated the first week of each month.

12/01/2020

Prescription Drug Name	Drug Tier	Coverage Requirements and Limits
WEBCOL ALCOHOL PREP LARGE PAD 70 % (<i>alcohol swabs</i>)	NPB	
WEBCOL ALCOHOL PREP MEDIUM PAD 70 % (<i>alcohol swabs</i>)	NPB	
wegmans unifine pentips plus 31g x 5 mm , 31g x 6 mm , 31g x 8 mm , 32g x 4 mm	NPB	
WIDE-SEAL DIAPHRAGM 60 VAGINAL DIAPHRAGM 2 % (<i>diaphragm wide seal</i>)	CE	N2 (NPB); QL (1 device per 300 days)
WIDE-SEAL DIAPHRAGM 65 VAGINAL DIAPHRAGM 2 % (<i>diaphragm wide seal</i>)	CE	N2 (NPB); QL (1 device per 300 days)
WIDE-SEAL DIAPHRAGM 70 VAGINAL DIAPHRAGM 2 % (<i>diaphragm wide seal</i>)	CE	N2 (NPB); QL (1 device per 300 days)
WIDE-SEAL DIAPHRAGM 75 VAGINAL DIAPHRAGM 2 % (<i>diaphragm wide seal</i>)	CE	N2 (NPB); QL (1 device per 300 days)
WIDE-SEAL DIAPHRAGM 80 VAGINAL DIAPHRAGM 2 % (<i>diaphragm wide seal</i>)	CE	N2 (NPB); QL (1 device per 300 days)
WIDE-SEAL DIAPHRAGM 85 VAGINAL DIAPHRAGM 2 % (<i>diaphragm wide seal</i>)	CE	N2 (NPB); QL (1 device per 300 days)
WIDE-SEAL DIAPHRAGM 90 VAGINAL DIAPHRAGM 2 % (<i>diaphragm wide seal</i>)	CE	N2 (NPB); QL (1 device per 300 days)
WIDE-SEAL DIAPHRAGM 95 VAGINAL DIAPHRAGM 2 % (<i>diaphragm wide seal</i>)	CE	N2 (NPB); QL (1 device per 300 days)
WINDMILL TRAINER (<i>respiratory therapy supplies</i>)	NPB	
MIGRAINE PRODUCTS - DRUGS FOR THE NERVOUS SYSTEM		
AIMOVIG SUBCUTANEOUS SOLUTION AUTO-INJECTOR 140 MG/ML, 70 MG/ML (<i>erenumab-aooe</i>)	PB	
AJOVY SUBCUTANEOUS SOLUTION AUTO-INJECTOR 225 MG/1.5ML (<i>fremanezumab-vfrm</i>)	PB	
AJOVY SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 225 MG/1.5ML (<i>fremanezumab-vfrm</i>)	PB	
<i>almotriptan malate oral tablet 12.5 mg, 6.25 mg</i>	G	
AMERGE ORAL TABLET 1 MG, 2.5 MG (<i>naratriptan hcl</i>)	NPB	
CAFERGOT ORAL TABLET 1-100 MG (<i>ergotamine-caffeine</i>)	NPB	
CAMBIA ORAL PACKET 50 MG (<i>diclofenac potassium(migraine)</i>)	NPB	

2020 Pharmacy Drug Guide - Premier Plus

The formulary is updated the first week of each month.

12/01/2020

Prescription Drug Name	Drug Tier	Coverage Requirements and Limits
D.H.E. 45 INJECTION SOLUTION 1 MG/ML <i>(dihydroergotamine mesylate)</i>	NPB	
<i>dihydroergotamine mesylate injection solution 1 mg/ml</i>	G	
<i>eletiptan hydrobromide oral tablet 20 mg, 40 mg</i>	G	
EMGALITY (300 MG DOSE) SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 100 MG/ML <i>(galcanezumab-gnlm)</i>	PB	
EMGALITY SUBCUTANEOUS SOLUTION AUTO-INJECTOR 120 MG/ML <i>(galcanezumab-gnlm)</i>	PB	
EMGALITY SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 120 MG/ML <i>(galcanezumab-gnlm)</i>	PB	
ERGOMAR SUBLINGUAL TABLET SUBLINGUAL 2 MG <i>(ergotamine tartrate)</i>	NPB	
<i>ergotamine-caffeine oral tablet 1-100 mg</i>	G	
FROVA ORAL TABLET 2.5 MG <i>(frovatriptan succinate)</i>	NPB	
<i>frovatriptan succinate oral tablet 2.5 mg</i>	G	
IMITREX NASAL SOLUTION 20 MG/ACT, 5 MG/ACT <i>(sumatriptan)</i>	NPB	
IMITREX ORAL TABLET 100 MG, 25 MG, 50 MG <i>(sumatriptan succinate)</i>	NPB	
IMITREX STATDOSE REFILL SUBCUTANEOUS SOLUTION CARTRIDGE 4 MG/0.5ML, 6 MG/0.5ML <i>(sumatriptan succinate)</i>	NPB	
IMITREX STATDOSE SYSTEM SUBCUTANEOUS SOLUTION AUTO-INJECTOR 4 MG/0.5ML, 6 MG/0.5ML <i>(sumatriptan succinate)</i>	NPB	
IMITREX SUBCUTANEOUS SOLUTION 6 MG/0.5ML <i>(sumatriptan succinate)</i>	NPB	
MAXALT ORAL TABLET 10 MG <i>(rizatriptan benzoate)</i>	NPB	
MAXALT-MLT ORAL TABLET DISPERSIBLE 10 MG <i>(rizatriptan benzoate)</i>	NPB	
MIGERGOT RECTAL SUPPOSITORY 2-100 MG <i>(ergotamine-caffeine)</i>	NPB	
MIGRANAL NASAL SOLUTION 4 MG/ML <i>(dihydroergotamine mesylate)</i>	NPB	
<i>naratriptan hcl oral tablet 1 mg, 2.5 mg</i>	G	
NURTEC ORAL TABLET DISPERSIBLE 75 MG <i>(rimegepant sulfate)</i>	PB	

2020 Pharmacy Drug Guide - Premier Plus

The formulary is updated the first week of each month.

12/01/2020

Prescription Drug Name	Drug Tier	Coverage Requirements and Limits
ONZETRA XSAIL NASAL EXHALER POWDER 11 MG/NOSEPC (<i>sumatriptan succinate</i>)	NPB	
RELPAX ORAL TABLET 20 MG, 40 MG (<i>eletriptan hydrobromide</i>)	NPB	
REYVOW ORAL TABLET 100 MG, 50 MG (<i>lasmiditan succinate</i>)	PB	
<i>rizatriptan benzoate oral tablet 10 mg, 5 mg</i>	G	
<i>rizatriptan benzoate oral tablet dispersible 10 mg, 5 mg</i>	G	
<i>sumatriptan nasal solution 20 mg/act, 5 mg/act</i>	G	
<i>sumatriptan succinate oral tablet 100 mg, 25 mg, 50 mg</i>	G	
<i>sumatriptan succinate refill subcutaneous solution cartridge 4 mg/0.5ml, 6 mg/0.5ml</i>	G	
<i>sumatriptan succinate subcutaneous solution 6 mg/0.5ml</i>	G	
<i>sumatriptan succinate subcutaneous solution auto-injector 4 mg/0.5ml, 6 mg/0.5ml</i>	G	
<i>sumatriptan-naproxen sodium oral tablet 85-500 mg</i>	G	
TOSYMRA NASAL SOLUTION 10 MG/ACT (<i>sumatriptan</i>)	NPB	
TREXIMET ORAL TABLET 85-500 MG (<i>sumatriptan-naproxen sodium</i>)	NPB	
UBRELVY ORAL TABLET 100 MG, 50 MG (<i>ubrogepant</i>)	PB	
ZEMBRACE SYMTOUCH SUBCUTANEOUS SOLUTION AUTO-INJECTOR 3 MG/0.5ML (<i>sumatriptan succinate</i>)	NPB	
<i>zolmitriptan oral tablet 2.5 mg, 5 mg</i>	G	
<i>zolmitriptan oral tablet dispersible 2.5 mg, 5 mg</i>	G	
ZOMIG NASAL SOLUTION 2.5 MG, 5 MG (<i>zolmitriptan</i>)	NPB	#
ZOMIG ORAL TABLET 2.5 MG, 5 MG (<i>zolmitriptan</i>)	NPB	
ZOMIG ZMT ORAL TABLET DISPERSIBLE 2.5 MG, 5 MG (<i>zolmitriptan</i>)	NPB	
MINERALS & ELECTROLYTES - DRUGS FOR NUTRITION		
CALCIFOL ORAL WAFER 1342-1.6 MG (<i>ca carb-fa-d-b6-b12-boron-mg</i>)	NPB	
<i>calcium-folic acid plus d oral wafer 1342-1 mg</i>	NPB	
EFFER-K ORAL TABLET EFFERVESCENT 10 MEQ, 20 MEQ (<i>potassium bicarb-citric acid</i>)	NPB	

2020 Pharmacy Drug Guide - Premier Plus

The formulary is updated the first week of each month.

12/01/2020

Prescription Drug Name	Drug Tier	Coverage Requirements and Limits
<i>potassium bicarbonate (Effer-K Oral Tablet Effervescent 25 Meq)</i>	G	
<i>FLORIVA ORAL LIQUID 0.25-400 MG-UNIT/ML (sodium fluoride-vitamin d)</i>	NPB	
<i>FLUORABON ORAL SOLUTION 0.55 (0.25 F) MG/0.6ML (sodium fluoride)</i>	CE	N2 (NPB); AL
<i>fluoritab oral solution 0.275 (0.125 f) mg/drop</i>	CE	N2 (G); AL
<i>fluoritab oral tablet chewable 0.55 (0.25 f) mg, 1.1 (0.5 f) mg</i>	CE	N2 (G); AL
<i>fluoritab oral tablet chewable 2.2 (1 f) mg</i>	G	
<i>FLURA-DROPS ORAL SOLUTION 0.55 (0.25 F) MG/DROP (sodium fluoride)</i>	CE	N2 (NPB); AL
<i>GALZIN ORAL CAPSULE 25 MG, 50 MG (zinc acetate (oral))</i>	NPB	
<i>potassium chloride (Klor-Con 10 Oral Tablet Extended Release 10 Meq)</i>	G	
<i>potassium chloride crys er (Klor-Con M10 Oral Tablet Extended Release 10 Meq)</i>	G	
<i>KLOR-CON M15 ORAL TABLET EXTENDED RELEASE 15 MEQ (potassium chloride crys er)</i>	NPB	
<i>potassium chloride crys er (Klor-Con M20 Oral Tablet Extended Release 20 Meq)</i>	G	
<i>potassium chloride (Klor-Con Oral Tablet Extended Release 8 Meq)</i>	G	
<i>potassium chloride (Klor-Con Sprinkle Oral Capsule Extended Release 10 Meq)</i>	G	
<i>potassium bicarbonate (Klor-Con/Ef Oral Tablet Effervescent 25 Meq)</i>	G	
<i>K-PHOS ORAL TABLET 500 MG (potassium phosphate monobasic)</i>	NPB	
<i>potassium bicarbonate (K-Prime Oral Tablet Effervescent 25 Meq)</i>	G	
<i>sodium fluoride (Nafrinse Drops Oral Solution 0.275 (0.125 F) Mg/Drop)</i>	CE	N2 (G); AL
<i>sodium fluoride (Nafrinse Oral Tablet Chewable 2.2 (1 F) Mg)</i>	G	
<i>k phos mono-sod phos di & mono (Phospha 250 Neutral Oral Tablet 155-852-130 Mg)</i>	G	
<i>potassium chloride crys er oral tablet extended release 10 meq, 20 meq</i>	G	

2020 Pharmacy Drug Guide - Premier Plus

The formulary is updated the first week of each month.

12/01/2020

Prescription Drug Name	Drug Tier	Coverage Requirements and Limits
<i>potassium chloride er oral capsule extended release 10 meq, 8 meq</i>	G	
<i>potassium chloride er oral tablet extended release 10 meq, 8 meq</i>	G	
<i>potassium chloride oral packet 20 meq</i>	G	
<i>potassium chloride oral solution 20 meq/15ml (10%)</i>	G	LGC
<i>sodium fluoride oral solution 1.1 (0.5 f) mg/ml</i>	CE	N2 (G); AL
<i>sodium fluoride oral tablet 1.1 (0.5 f) mg</i>	CE	N2 (G); AL
<i>sodium fluoride oral tablet 2.2 (1 f) mg</i>	G	
<i>sodium fluoride oral tablet chewable 0.55 (0.25 f) mg</i>	CE	LGC; N2 (G); AL
<i>sodium fluoride oral tablet chewable 1.1 (0.5 f) mg</i>	CE	N2 (G); AL
<i>sodium fluoride oral tablet chewable 2.2 (1 f) mg</i>	G	
MISCELLANEOUS THERAPEUTIC CLASSES - VITAMINS AND MINERALS		
<i>water for irrigation, sterile (Argyle Sterile Water Irrigation Solution)</i>	G	
<i>ASTAGRAF XL ORAL CAPSULE EXTENDED RELEASE 24 HOUR 0.5 MG, 1 MG, 5 MG (tacrolimus)</i>	NPSP	#; SP
<i>ATGAM INTRAVENOUS INJECTABLE 50 MG/ML (lymphocyte,anti-thymo imm glob)</i>	NPSP	SP
<i>AZASAN ORAL TABLET 100 MG, 75 MG (azathioprine)</i>	NPB	
<i>azathioprine oral tablet 50 mg</i>	G	
<i>BENLYSTA INTRAVENOUS SOLUTION RECONSTITUTED 120 MG, 400 MG (belimumab)</i>	NPSP	PA; NPL; SP
<i>BENLYSTA SUBCUTANEOUS SOLUTION AUTO-INJECTOR 200 MG/ML (belimumab)</i>	NPSP	PA; NPL; SP
<i>BENLYSTA SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 200 MG/ML (belimumab)</i>	NPSP	PA; NPL; SP
<i>CELLCEPT ORAL CAPSULE 250 MG (mycophenolate mofetil)</i>	NPSP	SP
<i>CELLCEPT ORAL SUSPENSION RECONSTITUTED 200 MG/ML (mycophenolate mofetil)</i>	NPSP	SP
<i>CELLCEPT ORAL TABLET 500 MG (mycophenolate mofetil)</i>	NPSP	SP
<i>CUPRIMINE ORAL CAPSULE 250 MG (penicillamine)</i>	NPSP	PA
<i>cyclosporine intravenous solution 50 mg/ml</i>	PSP	SP
<i>cyclosporine modified oral capsule 100 mg, 25 mg, 50 mg</i>	G	

2020 Pharmacy Drug Guide - Premier Plus

The formulary is updated the first week of each month.

12/01/2020

186

Prescription Drug Name	Drug Tier	Coverage Requirements and Limits
cyclosporine modified oral solution 100 mg/ml	G	
cyclosporine oral capsule 100 mg, 25 mg	G	
DEPEN TITRATABS ORAL TABLET 250 MG (penicillamine)	NPSP	PA; SP
ENSPRYNG SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 120 MG/ML (satralizumab-mwge)	NPSP	PA; NPL; SP
ENVARSUS XR ORAL TABLET EXTENDED RELEASE 24 HOUR 0.75 MG, 1 MG, 4 MG (tacrolimus)	NPSP	
everolimus oral tablet 0.25 mg, 0.5 mg, 0.75 mg	G	
cyclosporine modified (Gengraf Oral Capsule 100 Mg, 25 Mg)	G	
cyclosporine modified (Gengraf Oral Solution 100 Mg/Ml)	G	
IMURAN ORAL TABLET 50 MG (azathioprine)	NPB	
sodium polystyrene sulfonate (Kionex Oral Suspension 15 Gm/60Ml)	G	
lactated ringers irrigation solution	G	
LOKELMA ORAL PACKET 10 GM, 5 GM (sodium zirconium cyclosilicate)	NPB	
mycophenolate mofetil oral capsule 250 mg	G	SP
mycophenolate mofetil oral suspension reconstituted 200 mg/ml	G	SP
mycophenolate mofetil oral tablet 500 mg	G	SP
mycophenolate sodium oral tablet delayed release 180 mg, 360 mg	G	SP
MYFORTIC ORAL TABLET DELAYED RELEASE 180 MG, 360 MG (mycophenolate sodium)	NPSP	SP
NEORAL ORAL CAPSULE 100 MG, 25 MG (cyclosporine modified)	NPSP	SP
NEORAL ORAL SOLUTION 100 MG/ML (cyclosporine modified)	NPSP	SP
NULOJIX INTRAVENOUS SOLUTION RECONSTITUTED 250 MG (belatacept)	NPSP	SP
penicillamine oral capsule 250 mg	PSP	PA; SP
penicillamine oral tablet 250 mg	G	
irrigation solns physiological (Physiolyte Irrigation Solution)	G	
irrigation solns physiological (Physiosol Irrigation Irrigation Solution)	G	
PROGRAF INTRAVENOUS SOLUTION 5 MG/ML (tacrolimus)	NPSP	SP

2020 Pharmacy Drug Guide - Premier Plus

The formulary is updated the first week of each month.

12/01/2020

Prescription Drug Name	Drug Tier	Coverage Requirements and Limits
PROGRAF ORAL CAPSULE 0.5 MG, 1 MG, 5 MG <i>(tacrolimus)</i>	NPSP	SP
PROGRAF ORAL PACKET 0.2 MG, 1 MG (<i>tacrolimus</i>)	NPSP	SP
RAPAMUNE ORAL SOLUTION 1 MG/ML (<i>sirolimus</i>)	NPSP	SP
RAPAMUNE ORAL TABLET 0.5 MG, 1 MG, 2 MG <i>(sirolimus)</i>	NPSP	SP
REVLIMID ORAL CAPSULE 10 MG, 15 MG, 2.5 MG, 20 MG, 25 MG, 5 MG (<i>lenalidomide</i>)	CE	PA; #; SP; N2 (NPSP)
<i>ringers irrigation irrigation solution</i>	G	
SANDIMMUNE INTRAVENOUS SOLUTION 50 MG/ML <i>(cyclosporine)</i>	NPSP	SP
SANDIMMUNE ORAL CAPSULE 100 MG, 25 MG <i>(cyclosporine)</i>	NPSP	SP
SANDIMMUNE ORAL SOLUTION 100 MG/ML <i>(cyclosporine)</i>	NPSP	SP
SIMULECT INTRAVENOUS SOLUTION RECONSTITUTED 10 MG, 20 MG (<i>basiliximab</i>)	NPSP	SP
<i>sirolimus oral solution 1 mg/ml</i>	PSP	SP
<i>sirolimus oral tablet 0.5 mg, 1 mg, 2 mg</i>	G	SP
<i>sodium polystyrene sulfonate oral powder</i>	G	
<i>sodium polystyrene sulfonate oral suspension 15 gm/60ml</i>	G	
<i>sodium polystyrene sulfonate rectal suspension 30 gm/120ml, 50 gm/200ml</i>	G	
<i>sodium polystyrene sulfonate (Sps Oral Suspension 15 Gm/60ML)</i>	G	
<i>sterile water for irrigation irrigation solution</i>	G	
SYPRINE ORAL CAPSULE 250 MG (<i>trientine hcl</i>)	NPSP	PA; SP
<i>tacrolimus oral capsule 0.5 mg, 1 mg, 5 mg</i>	G	SP
THALOMID ORAL CAPSULE 100 MG, 150 MG, 200 MG, 50 MG (<i>thalidomide</i>)	NPSP	PA; #; SP; UF9 (PSP)
THYMOGLOBULIN INTRAVENOUS SOLUTION RECONSTITUTED 25 MG (<i>anti-thymocyte glob (rabbit)</i>)	NPSP	SP
<i>ringers irrigation (Tis-U-Sol Irrigation Solution)</i>	G	
<i>trientine hcl oral capsule 250 mg</i>	PSP	PA; SP; UF9 (G)
VELTASSA ORAL PACKET 16.8 GM, 25.2 GM, 8.4 GM <i>(patiromer sorbitex calcium)</i>	NPB	

2020 Pharmacy Drug Guide - Premier Plus

The formulary is updated the first week of each month.

12/01/2020

Prescription Drug Name	Drug Tier	Coverage Requirements and Limits
XIAFLEX INJECTION SOLUTION RECONSTITUTED 0.9 MG (<i>collagenase clostrid histolyt</i>)	PSP	SP
ZORTRESS ORAL TABLET 0.25 MG, 0.5 MG, 0.75 MG, 1 MG (<i>everolimus</i>)	NPSP	SP
MOUTH/THROAT/DENTAL AGENTS - DRUGS FOR THE MOUTH AND THROAT		
<i>cevimeline hcl oral capsule 30 mg</i>	G	
<i>chlorhexidine gluconate mouth/throat solution 0.12 %</i>	G	
<i>clotrimazole mouth/throat troche 10 mg</i>	G	
EVOXAC ORAL CAPSULE 30 MG (<i>cevimeline hcl</i>)	NPB	
<i>nystatin mouth/throat suspension 100000 unit/ml</i>	G	
<i>triamcinolone acetonide (Oralone Mouth/Throat Paste 0.1 %)</i>	G	
ORAMAGICRX MOUTH/THROAT SUSPENSION RECONSTITUTED (<i>oral wound care products</i>)	NPB	
ORAVIG BUCCAL TABLET 50 MG (<i>miconazole</i>)	NPB	
PERIDEX MOUTH/THROAT SOLUTION 0.12 % (<i>chlorhexidine gluconate</i>)	NPB	
<i>pilocarpine hcl oral tablet 5 mg, 7.5 mg</i>	G	
SALAGEN ORAL TABLET 5 MG, 7.5 MG (<i>pilocarpine hcl</i>)	NPB	
SALICEPT MOUTH/THROAT SUSPENSION RECONSTITUTED (<i>oral wound care products</i>)	NPB	
<i>triamcinolone acetonide mouth/throat paste 0.1 %</i>	G	
MULTIVITAMINS - DRUGS FOR NUTRITION		
ALIVE PRENATAL ORAL TABLET CHEWABLE 0.4-25 MG (<i>prenatal mv & min w/fa-dha</i>)	G	
ATABEX EC ORAL TABLET DELAYED RELEASE 29-1 MG (<i>prenatal vit-dss-fe cbn-fa</i>)	NPB	
ATABEX ORAL TABLET CHEWABLE 18-0.8 MG (<i>prenatal w/o a vit-fe cbn-fa</i>)	G	
<i>azeschew prenatal/postnatal oral tablet chewable 13-1 mg</i>	NPB	
<i>azesco oral tablet 13-1 mg</i>	NPB	
CENTRUM SPECIALIST PRENATAL ORAL 27-0.8 & 200 MG (<i>prenatal mv-min-fe fum-fa-dha</i>)	G	
CITRANATAL 90 DHA ORAL 90-1 & 300 MG (<i>prenat w/o a-fecbgl-dss-fa-dha</i>)	NPB	
CITRANATAL B-CALM ORAL 20-1 MG & 2 X 25 MG (<i>prenat w/o a fecbnfeglu-fa &b6</i>)	NPB	

2020 Pharmacy Drug Guide - Premier Plus

The formulary is updated the first week of each month.

12/01/2020

Prescription Drug Name	Drug Tier	Coverage Requirements and Limits
CITRANATAL BLOOM ORAL TABLET 90-1 MG (<i>prenatal-dss-fecb-fegl-fa</i>)	NPB	
CITRANATAL DHA ORAL 27-1 & 250 MG (<i>prenat w/o a-fecbgl-dss-fa-dha</i>)	NPB	
CITRANATAL ESSENCE ORAL THERAPY PACK 35-1 & 300 MG (<i>prenat w/o a-fecbgl-fa-dha</i>)	NPB	
CITRANATAL HARMONY ORAL CAPSULE 27-1-260 MG (<i>prenat-fefmcb-dss-fa-dha w/o a</i>)	NPB	
CITRANATAL MEDLEY ORAL CAPSULE 27-1-200 MG (<i>prenat-fecb-fefum-fa-dha w/o a</i>)	NPB	
CITRANATAL RX ORAL TABLET 27-1 MG (<i>prenat w/o a-fecb-fegl-dss-fa</i>)	NPB	
<i>c-nate dha oral capsule 28-1-200 mg</i>	NPB	
<i>completenate oral tablet chewable 29-1 mg</i>	G	
CO-NATAL FA ORAL TABLET (<i>prenatal vit-fe fumarate-fa</i>)	G	
CONCEPT DHA ORAL CAPSULE 53.5-38-1 MG (<i>prenat-fefum-fepo-fa-omega 3</i>)	NPB	
CONCEPT OB ORAL CAPSULE 130-92.4-1 MG (<i>prenat w/o a vit-fefum-fepo-fa</i>)	NPB	
CORVITA ORAL TABLET 1.25 MG (<i>multiple vitamins-minerals-fa</i>)	G	
<i>cvs prenatal gummy oral tablet chewable 0.4-113.5 mg</i>	G	
DIALYVITE 3000 ORAL TABLET 3 MG (<i>b complex-c-biotin-e-min-fa</i>)	NPB	
DIALYVITE 5000 ORAL TABLET 5 MG (<i>b complex-c-biotin-e-min-fa</i>)	NPB	
<i>b complex-c-folic acid (Dalyvite Oral Tablet)</i>	G	
DIALYVITE SUPREME D ORAL TABLET 3 MG (<i>multiple vitamins-minerals-fa</i>)	NPB	
DIALYVITE/ZINC ORAL TABLET (<i>b complex-c-zn-folic acid</i>)	NPB	
DUET DHA 400 ORAL 25-1 & 400 MG (<i>prenat-sepoly-fered-fa-omega 3</i>)	NPB	
DUET DHA BALANCED ORAL 25-1 & 267 MG (<i>prenat-sepoly-fered-fa-omega 3</i>)	NPB	
ELITE-OB ORAL TABLET 50-1.25 MG (<i>prenatal vit-iron carbonyl-fa</i>)	G	

2020 Pharmacy Drug Guide - Premier Plus

The formulary is updated the first week of each month.

12/01/2020

190

Prescription Drug Name	Drug Tier	Coverage Requirements and Limits
FOLBEE PLUS CZ ORAL TABLET 5 MG (<i>b-complex-c-biotin-minerals-fa</i>)	NPB	
<i>folbee plus oral tablet</i>	G	
FOLGARD OS ORAL TABLET 500-1.1 MG (<i>multiple vit-min-calcium-fa</i>)	NPB	
FOLIVANE-OB ORAL CAPSULE 130-92.4-1 MG (<i>prenat w/o a vit-fefum-fepo-fa</i>)	NPB	
GENICIN VITA-Q ORAL TABLET 1 MG (<i>multiple vitamins with fa</i>)	NPB	
INATAL GT ORAL TABLET (<i>prenatal vit-dss-fe cbn-fa</i>)	G	
MARNATAL-F ORAL CAPSULE 60-1 MG (<i>prenat w/o a-fe poly complx-fa</i>)	NPB	
<i>multi-vitamin/fluoride oral solution 0.25 mg/ml</i>	G	
<i>multivitamin/fluoride oral tablet chewable 0.25 mg, 0.5 mg, 1 mg</i>	NPB	
<i>multi-vitamin/fluoride/iron oral solution 0.25-10 mg/ml</i>	G	
<i>multivitamins/fluoride oral tablet chewable 0.5 mg</i>	G	
<i>mynatal plus oral tablet</i>	G	
<i>mynatal-z oral tablet</i>	G	
NATACHEW ORAL TABLET CHEWABLE 28-1 MG (<i>prenatal vit-fe fum-fe bisg-fa</i>)	NPB	
NATALVIT ORAL TABLET (<i>prenatal vit-fe fumarate-fa</i>)	NPB	
NEEVO DHA ORAL CAPSULE 27-1.13 MG (<i>prenat w/o-a-fefum-methf-omegas</i>)	NPB	
<i>neonatal + dha oral 29-1 & 200 mg</i>	NPB	
<i>neonatal 19 oral tablet 1 mg</i>	NPB	
<i>neonatal fe oral tablet 90-1 mg</i>	NPB	
NEPHPLEX RX ORAL TABLET (<i>b complex-c-zn-folic acid</i>)	NPB	
<i>b complex-c-folic acid (Nephronex Oral Tablet)</i>	G	
NESTABS DHA ORAL 32-1 MG (<i>prenat-w/o-a-fe bisgly-fa-omega</i>)	NPB	
NESTABS ONE ORAL CAPSULE 38-1-225 MG (<i>prenat-fe-methylfol-dha w/o a</i>)	NPB	
NESTABS ORAL TABLET 32-1 MG (<i>prenat-fe bisgly-fa-w/o vit a</i>)	NPB	
NICOMIDE ORAL TABLET 750-27-2-0.5 MG (<i>niacinamide-zn-cu-methfo-se-cr</i>)	NPB	

2020 Pharmacy Drug Guide - Premier Plus

The formulary is updated the first week of each month.

12/01/2020

Prescription Drug Name	Drug Tier	Coverage Requirements and Limits
NUTRIVIT ORAL LIQUID (<i>b complex-lysine-min-fe-fa</i>)	NPB	
OB COMPLETE ORAL TABLET 50-1.25 MG (<i>prenatal vit-iron carbonyl-fa</i>)	NPB	
OB COMPLETE PETITE ORAL CAPSULE 35-5-1-200 MG (<i>prenat-fecbn-feaspgl-fa-omega</i>)	NPB	
OB COMPLETE PREMIER ORAL TABLET 30-20-1 MG (<i>prenatal-fe cbn-fe asp gly-fa</i>)	NPB	
OB COMPLETE/DHA ORAL CAPSULE 30-10-1-200 MG (<i>prenat-fecbn-feaspgl-fa-omega</i>)	NPB	
O-CAL PRENATAL ORAL TABLET (<i>prenatal vit-fe fumarate-fa</i>)	NPB	
OCUVEL ORAL CAPSULE 0.5 MG (<i>multiple vitamins-minerals-fa</i>)	NPB	
<i>pnv-dha oral capsule 27-0.6-0.4-300 mg</i>	G	
<i>pnv-dha+docusate oral capsule 27-1.25-300 mg</i>	NPB	
<i>pnv-omega oral capsule 28-0.6-0.4-340 mg</i>	NPB	
<i>pnv-select oral tablet 27-0.6-0.4 mg</i>	G	
POLY-VI-FLOR ORAL SUSPENSION 0.25 MG/ML (<i>pediatric multivitamins-fl</i>)	NPB	
POLY-VI-FLOR ORAL TABLET CHEWABLE 0.25 MG, 0.5 MG, 1 MG (<i>pediatric multivitamins-fl</i>)	NPB	
POLY-VI-FLOR/IRON ORAL SUSPENSION 0.25-7 MG/ML (<i>ped multivitamins-fl-iron</i>)	NPB	
POLY-VI-FLOR/IRON ORAL TABLET CHEWABLE 0.5-10 MG (<i>ped multivitamins-fl-iron</i>)	NPB	
<i>polyvitamin/fluoride oral solution 0.25 mg/ml</i>	G	
<i>poly-vitamin/fluoride oral solution 0.5 mg/ml</i>	G	
<i>polyvitamin/fluoride oral tablet chewable 0.5 mg</i>	G	
<i>pregenna oral tablet 20-1 mg</i>	NPB	
<i>prena1 pearl oral capsule extended release 30-1.4-200 mg</i>	NPB	
<i>prenaissance oral capsule 29-1.25-325 mg</i>	NPB	
<i>prenaissance plus oral capsule 28-1-250 mg</i>	NPB	
<i>prenara oral capsule 15-1 mg</i>	NPB	
PRENATABS RX ORAL TABLET 29-1 MG (<i>prenatal vit-iron carbonyl-fa</i>)	G	
<i>prenatal + complete multi oral therapy pack 0.267 & 373 mg</i>	G	

2020 Pharmacy Drug Guide - Premier Plus

The formulary is updated the first week of each month.

12/01/2020

Prescription Drug Name	Drug Tier	Coverage Requirements and Limits
prenatal 19 oral tablet	G	
prenatal 19 oral tablet 29-1 mg	NPB	
prenatal 19 oral tablet chewable	G	
prenatal 19 oral tablet chewable 29-1 mg	NPB	
prenatal adult gummy/dha/fa oral tablet chewable 0.4-25 mg	G	
prenatal gummies/dha & fa oral tablet chewable 0.4-32.5 mg	G	
prenatal plus iron oral tablet 29-1 mg	NPB	
PRENATAL-U ORAL CAPSULE 106.5-1 MG (prenatal w/o a vit-fe fum-fa)	NPB	
PRENATE AM ORAL TABLET 1 MG (prenatal ca-b6-b12-fa-ginger)	NPB	
PRENATE ENHANCE ORAL CAPSULE 28-0.6-0.4-400 MG (prenat w/o a-fe-methfol-fa-dha)	NPB	
PRENATE MINI ORAL CAPSULE 18-0.6-0.4-350 MG (prenat-fecbn-feasp-meth-fa-dha)	NPB	
PRENATE ORAL TABLET CHEWABLE 0.6-0.4 MG (prenat mv-min-methylfolate-fa)	NPB	
PRENATE RESTORE ORAL CAPSULE 27-0.6-0.4-400 MG (prenat w/o a-fe-methfol-fa-dha)	NPB	
prenativite complete oral tablet 1 mg	NPB	
prenativite plus oral tablet 1 mg	NPB	
prenativite rx oral tablet 0.8 mg	NPB	
PRIMACARE ORAL CAPSULE 30-1-470 MG (pren-fe-meth-fa-omeg w/o a)	NPB	
PROVIDA OB ORAL CAPSULE 20-20-1.25 MG (prenat w/o a vit-fefum-fepo-fa)	NPB	
QUFLORA FE ORAL TABLET CHEWABLE 0.25 MG (multi vit-min-fluoride-fe-fa)	NPB	
QUFLORA FE PEDIATRIC ORAL LIQUID 0.25-9.5 MG/ML (ped multivitamins-fl-iron)	NPB	
QUFLORA PEDIATRIC ORAL SOLUTION 0.25 MG/ML, 0.5 MG/ML (pediatric multivitamins-fl)	NPB	
QUFLORA PEDIATRIC ORAL TABLET CHEWABLE 0.25 MG, 0.5 MG, 1 MG (pediatric multivitamins-fl)	NPB	
RENATABS ORAL TABLET 1 MG (b complex-c-biotin-e-fa)	NPB	
RENATABS WITH IRON ORAL 1 & 100 MG (b complex-c-biotin-e-fa-fe cbn)	NPB	

2020 Pharmacy Drug Guide - Premier Plus

The formulary is updated the first week of each month.

12/01/2020

Prescription Drug Name	Drug Tier	Coverage Requirements and Limits
rena-vite rx oral tablet 1 mg	G	
SELECT-OB ORAL TABLET CHEWABLE 29-1 MG (prenatal vit-fe psac complx-fa)	NPB	
se-natal 19 oral tablet 29-1 mg	G	
se-natal 19 oral tablet chewable 29-1 mg	G	
STROVITE FORTE ORAL SYRUP (multiple vitamins-minerals-fa)	PB	
TARON-C DHA ORAL CAPSULE 53.5-38-1 MG (prenat-fefum-fepo-fa-omega 3)	NPB	
TARON-PREX ORAL CAPSULE 30-1.2-265 MG (prenat-fefum-dss-fa-dha w/o a)	NPB	
THERANATAL ONE ORAL CAPSULE 27-1-300 MG (prenatal-fefum-fa-dha w/o a)	G	
TRICARE PRENATAL DHA ONE ORAL CAPSULE 27-1-500 MG (prenatal-fefum-fa-dss-fish oil)	NPB	
TRINATE ORAL TABLET (prenatal vit-fe fumarate-fa)	NPB	
trinaz oral tablet 12-1 mg	NPB	
TRISTART ONE ORAL CAPSULE 35-1-215 MG (prenat w/o a-fecbn-meth-fa-dha)	NPB	
tri-tabs dha oral 32-1 mg	NPB	
TRI-VI-FLOR ORAL SUSPENSION 0.25 MG/ML, 0.5 MG/ML (ped vit a-c-d-methylfolate-fl)	NPB	
tri-vi-floro oral suspension 0.25 mg/ml, 0.5 mg/ml	NPB	
tri-vitamin/fluoride oral solution 0.25 mg/ml	G	
VINATE DHA RF ORAL CAPSULE 27-1.13 MG (prenat w/oa-fefum-methf-omegas)	NPB	
VINATE II ORAL TABLET 29-1 MG (prenatal vit w/ fe bisg-fa)	G	
virt-pn dha oral capsule 27-0.6-0.4-300 mg	NPB	
virt-pn plus oral capsule 28-0.6-0.4-340 mg	NPB	
VITAFOL FE+ ORAL CAPSULE 90-0.6-0.4-200 MG (prenat-fe poly-methfol-fa-dha)	NPB	
VITAFOL GUMMIES ORAL TABLET CHEWABLE 3.33-0.333-34.8 MG (prenatal vit-fe phos-fa-omega)	NPB	
VITAFOL STRIPS ORAL FILM 1 MG (prenatal-b6-b12-d3-folic acid)	NPB	

2020 Pharmacy Drug Guide - Premier Plus

The formulary is updated the first week of each month.

12/01/2020

Prescription Drug Name	Drug Tier	Coverage Requirements and Limits
VITAFOL-NANO ORAL TABLET 18-0.6-0.4 MG (<i>prenatal-fe fum-methf-fa w/o a</i>)	NPB	
VITAFOL-OB ORAL TABLET (<i>prenatal vit-fe fumarate-fa</i>)	NPB	
VITAFOL-OB+DHA ORAL 65-1 & 250 MG (<i>prenatal mv-min-fe fum-fa-dha</i>)	NPB	
VITAFOL-ONE ORAL CAPSULE 29-1-200 MG (<i>prenatal vit-fepoly-fa-dha</i>)	NPB	
VITAL-D RX ORAL TABLET 1 MG (<i>b complex-c-biotin-d-zinc-fa</i>)	NPB	
VITAMEDMD ONE RX/QUATREFOLIC ORAL CAPSULE 30-0.6-0.4-200 MG (<i>prenat w/o a-fe-methfol-fa-dha</i>)	NPB	
<i>vitamin b-complex 100 injection injectable</i>	G	
<i>vitamins acd-fluoride oral solution 0.25 mg/ml</i>	G	
VITAPEARL ORAL CAPSULE EXTENDED RELEASE 30-1.4-200 MG (<i>prenat-fefum-fered-fa-dha w/o a</i>)	NPB	
VIVA DHA ORAL CAPSULE 28-1-200 MG (<i>prenatal vit-fe fum-fa-omega</i>)	NPB	
<i>vol-tab rx oral tablet 29-1 mg</i>	NPB	
<i>vp-heme ob + dha oral 28-6-1 & 203 mg</i>	NPB	
<i>vp-pnv-dha oral capsule 28-1-215.8 mg</i>	NPB	
ZATEAN-PN DHA ORAL CAPSULE 27-0.6-0.4-300 MG (<i>prenat w/o a-fe-methfol-fa-dha</i>)	NPB	
ZATEAN-PN PLUS ORAL CAPSULE 28-0.6-0.4-340 MG (<i>prenat w/o a-fe-methf-fa-omega</i>)	NPB	
MUSCULOSKELETAL THERAPY AGENTS - DRUGS FOR MUSCLES, LIGAMENTS, TENDONS, AND BONES		
AMRIX ORAL CAPSULE EXTENDED RELEASE 24 HOUR 15 MG, 30 MG (<i>cyclobenzaprine hcl</i>)	NPB	
<i>baclofen oral tablet 10 mg, 20 mg, 5 mg</i>	G	
<i>carisoprodol oral tablet 350 mg</i>	G	
<i>carisoprodol-aspirin-codeine oral tablet 200-325-16 mg</i>	G	
<i>chlorzoxazone oral tablet 250 mg, 375 mg, 500 mg, 750 mg</i>	G	
<i>cyclobenzaprine hcl er oral capsule extended release 24 hour 15 mg, 30 mg</i>	G	
<i>cyclobenzaprine hcl oral tablet 10 mg, 5 mg, 7.5 mg</i>	G	

Prescription Drug Name	Drug Tier	Coverage Requirements and Limits
DANTRIUM ORAL CAPSULE 25 MG, 50 MG (<i>dantrolene sodium</i>)	NPB	
<i>dantrolene sodium oral capsule 100 mg, 25 mg, 50 mg</i>	G	
DUROLANE INTRA-ARTICULAR PREFILLED SYRINGE 60 MG/3ML (<i>sodium hyaluronate (viscosup)</i>)	NPSP	PA; NPL; SP
EUFLEXXA INTRA-ARTICULAR SOLUTION PREFILLED SYRINGE 20 MG/2ML (<i>sodium hyaluronate (viscosup)</i>)	PSP	PA; NPL; SP
FEXMID ORAL TABLET 7.5 MG (<i>cyclobenzaprine hcl</i>)	NPB	
GEL-ONE INTRA-ARTICULAR PREFILLED SYRINGE 30 MG/3ML (<i>cross-linked hyaluronate</i>)	NPSP	PA; NPL; SP
GELSYN-3 INTRA-ARTICULAR SOLUTION PREFILLED SYRINGE 16.8 MG/2ML (<i>sodium hyaluronate (viscosup)</i>)	NPSP	PA; NPL
HYALGAN INTRA-ARTICULAR SOLUTION 20 MG/2ML (<i>sodium hyaluronate (viscosup)</i>)	NPSP	PA; NPL; SP
HYALGAN INTRA-ARTICULAR SOLUTION PREFILLED SYRINGE 20 MG/2ML (<i>sodium hyaluronate (viscosup)</i>)	NPSP	PA; NPL; SP
HYMOVIS INTRA-ARTICULAR SOLUTION PREFILLED SYRINGE 24 MG/3ML (<i>hyaluronan</i>)	NPSP	PA; NPL; SP
<i>chlorzoxazone (Lorzone Oral Tablet 375 Mg, 750 Mg)</i>	G	
<i>metaxalone oral tablet 400 mg, 800 mg</i>	G	
<i>methocarbamol oral tablet 500 mg, 750 mg</i>	G	
MONOVISC INTRA-ARTICULAR SOLUTION PREFILLED SYRINGE 88 MG/4ML (<i>hyaluronan</i>)	PSP	PA; NPL; SP
<i>norgesic forte oral tablet 50-770-60 mg</i>	NPB	
<i>orphenadrine citrate er oral tablet extended release 12 hour 100 mg</i>	G	
<i>orphenadrine-asa-caffeine oral tablet 50-770-60 mg</i>	G	
<i>orphenadrine-aspirin-caffeine (Orphengesic Forte Oral Tablet 50-770-60 Mg)</i>	G	
ORTHOVISC INTRA-ARTICULAR SOLUTION PREFILLED SYRINGE 30 MG/2ML (<i>hyaluronan</i>)	PSP	PA; NPL; SP
OZOBAX ORAL SOLUTION 5 MG/5ML (<i>baclofen</i>)	NPB	
ROBAXIN-750 ORAL TABLET 750 MG (<i>methocarbamol</i>)	NPB	
SKELAXIN ORAL TABLET 800 MG (<i>metaxalone</i>)	NPB	

2020 Pharmacy Drug Guide - Premier Plus

The formulary is updated the first week of each month.

12/01/2020

Prescription Drug Name	Drug Tier	Coverage Requirements and Limits
sodium hyaluronate intra-articular solution prefilled syringe 20 mg/2ml	PSP	PA; NPL; SP
SOMA ORAL TABLET 250 MG, 350 MG (<i>carisoprodol</i>)	NPB	
SYNVISC INTRA-ARTICULAR SOLUTION PREFILLED SYRINGE 16 MG/2ML (<i>hyylan</i>)	NPSP	PA; NPL; SP
SYNVISC ONE INTRA-ARTICULAR SOLUTION PREFILLED SYRINGE 48 MG/6ML (<i>hyylan</i>)	NPSP	PA; NPL; SP
<i>tizanidine hcl</i> oral capsule 2 mg, 4 mg, 6 mg	G	
<i>tizanidine hcl</i> oral tablet 2 mg, 4 mg	G	
TRILURON INTRA-ARTICULAR SOLUTION PREFILLED SYRINGE 20 MG/2ML (<i>sodium hyaluronate (viscosup)</i>)	NPSP	PA; NPL; SP
TRIVISC INTRA-ARTICULAR SOLUTION PREFILLED SYRINGE 25 MG/2.5ML (<i>sodium hyaluronate (viscosup)</i>)	NPSP	PA; NPL; SP
<i>carisoprodol</i> (Vanadom Oral Tablet 350 Mg)	G	
VISCO-3 INTRA-ARTICULAR SOLUTION PREFILLED SYRINGE 25 MG/2.5ML (<i>sodium hyaluronate (viscosup)</i>)	NPSP	PA; NPL; SP
ZANAFLEX ORAL CAPSULE 2 MG, 4 MG, 6 MG (<i>tizanidine hcl</i>)	NPB	
ZANAFLEX ORAL TABLET 4 MG (<i>tizanidine hcl</i>)	NPB	
NASAL AGENTS - SYSTEMIC AND TOPICAL - DRUGS FOR THE NOSE		
ADRENALIN NASAL SOLUTION 0.1 % (<i>epinephrine hcl (nasal)</i>)	NPB	#
<i>azelastine hcl</i> nasal solution 0.1 %, 0.15 %	G	
<i>azelastine-fluticasone</i> nasal suspension 137-50 mcg/act	G	
BECONASE AQ NASAL SUSPENSION 42 MCG/SPRAY (<i>beclomethasone diprop monohyd</i>)	NPB	
<i>budesonide</i> nasal suspension 32 mcg/act	G	Select OTC
DYMISTA NASAL SUSPENSION 137-50 MCG/ACT (<i>azelastine-fluticasone</i>)	PB	
FLONASE ALLERGY RELIEF NASAL SUSPENSION 50 MCG/ACT (<i>fluticasone propionate</i>)	G	Select OTC
<i>flunisolide</i> nasal solution 25 mcg/act (0.025%)	G	
<i>ipratropium bromide</i> nasal solution 0.03 %, 0.06 %	G	
<i>mometasone furoate</i> nasal suspension 50 mcg/act	G	

2020 Pharmacy Drug Guide - Premier Plus

The formulary is updated the first week of each month.

12/01/2020

Prescription Drug Name	Drug Tier	Coverage Requirements and Limits
NASACORT ALLERGY 24HR CHILDREN NASAL AEROSOL 55 MCG/ACT (<i>triamcinolone acetonide</i>)	G	Select OTC
NASACORT ALLERGY 24HR NASAL AEROSOL 55 MCG/ACT (<i>triamcinolone acetonide</i>)	G	Select OTC
NASONEX NASAL SUSPENSION 50 MCG/ACT (<i>mometasone furoate</i>)	NPB	
<i>olopatadine hcl nasal solution 0.6 %</i>	G	
OMNARIS NASAL SUSPENSION 50 MCG/ACT (<i>ciclesonide</i>)	NPB	#
PATANASE NASAL SOLUTION 0.6 % (<i>olopatadine hcl</i>)	NPB	
QNASL CHILDRENS NASAL AEROSOL SOLUTION 40 MCG/ACT (<i>beclomethasone diprop (nasal)</i>)	NPB	
QNASL NASAL AEROSOL SOLUTION 80 MCG/ACT (<i>beclomethasone diprop (nasal)</i>)	NPB	
RHINOCORT ALLERGY NASAL SUSPENSION 32 MCG/ACT (<i>budesonide</i>)	G	Select OTC
<i>triamcinolone acetonide nasal aerosol 55 mcg/act</i>	G	Select OTC
XHANCE NASAL EXHALER SUSPENSION 93 MCG/ACT (<i>fluticasone propionate</i>)	NPB	
ZETONNA NASAL AEROSOL SOLUTION 37 MCG/ACT (<i>ciclesonide</i>)	NPB	
NEUROMUSCULAR AGENTS - DRUGS FOR NERVES AND MUSCLES		
BOTOX INJECTION SOLUTION RECONSTITUTED 100 UNIT, 200 UNIT (<i>onabotulinumtoxina</i>)	PSP	PA; NPL; SP
DYSPORT INTRAMUSCULAR SOLUTION RECONSTITUTED 300 UNIT, 500 UNIT (<i>abobotulinumtoxina</i>)	NPSP	PA; NPL; SP
EVRYSDI ORAL SOLUTION RECONSTITUTED 0.75 MG/ML (<i>risdiplam</i>)	NPSP	PA; NPL; SP
RILUTEK ORAL TABLET 50 MG (<i>riluzole</i>)	NPB	
<i>riluzole oral tablet 50 mg</i>	G	
TIGLUTIK ORAL SUSPENSION 50 MG/10ML (<i>riluzole</i>)	NPB	
XEOMIN INTRAMUSCULAR SOLUTION RECONSTITUTED 100 UNIT, 200 UNIT, 50 UNIT (<i>incobotulinumtoxina</i>)	NPSP	PA; NPL; SP

Prescription Drug Name	Drug Tier	Coverage Requirements and Limits
OPHTHALMIC AGENTS - DRUGS FOR THE EYE		
ACULAR LS OPHTHALMIC SOLUTION 0.4 % (<i>ketorolac tromethamine</i>)	NPB	
ACULAR OPHTHALMIC SOLUTION 0.5 % (<i>ketorolac tromethamine</i>)	NPB	
ALAWAY CHILDRENS ALLERGY OPHTHALMIC SOLUTION 0.025 % (<i>ketotifen fumarate</i>)	G	Select OTC
ALAWAY OPHTHALMIC SOLUTION 0.025 % (<i>ketotifen fumarate</i>)	G	Select OTC
ALCAINE OPHTHALMIC SOLUTION 0.5 % (<i>proparacaine hcl</i>)	NPB	
ALOCRIL OPHTHALMIC SOLUTION 2 % (<i>nedocromil sodium</i>)	NPB	
ALOMIDE OPHTHALMIC SOLUTION 0.1 % (<i>lodoxamide tromethamine</i>)	NPB	UF9 (PB)
ALPHAGAN P OPHTHALMIC SOLUTION 0.1 % (<i>brimonidine tartrate</i>)	PB	
ALPHAGAN P OPHTHALMIC SOLUTION 0.15 % (<i>brimonidine tartrate</i>)	NPB	
ALREX OPHTHALMIC SUSPENSION 0.2 % (<i>loteprednol etabonate</i>)	PB	
<i>phenylephrine hcl</i> (Altafrin Ophthalmic Solution 10 %, 2.5 %)	G	
<i>apraclonidine hcl ophthalmic solution</i> 0.5 %	G	
<i>atropine sulfate ophthalmic solution</i> 1 %	G	
AZASITE OPHTHALMIC SOLUTION 1 % (<i>azithromycin</i>)	PB	#
<i>azelastine hcl ophthalmic solution</i> 0.05 %	G	
AZOPT OPHTHALMIC SUSPENSION 1 % (<i>brinzolamide</i>)	PB	
<i>bacitracin ophthalmic ointment</i> 500 unit/gm	G	
<i>bacitracin-polymyxin b ophthalmic ointment</i> 500-10000 unit/gm	G	
<i>bacitra-neomycin-polymyxin-hc ophthalmic ointment</i> 1 %	G	
BEOVU INTRAVITREAL SOLUTION 6 MG/0.05ML (<i>brolucizumab-dbl</i>)	NPSP	PA; NPL; SP
BEPREVE OPHTHALMIC SOLUTION 1.5 % (<i>bepotastine besilate</i>)	NPB	#
BESIVANCE OPHTHALMIC SUSPENSION 0.6 % (<i>besifloxacin hcl</i>)	NPB	

Prescription Drug Name	Drug Tier	Coverage Requirements and Limits
BETADINE OPHTHALMIC PREP OPHTHALMIC SOLUTION 5 % (<i>povidone-iodine</i>)	NPB	
<i>betaxolol hcl ophthalmic solution 0.5 %</i>	G	
BETIMOL OPHTHALMIC SOLUTION 0.25 %, 0.5 % (<i>timolol hemihydrate</i>)	PB	
BETOPTIC-S OPHTHALMIC SUSPENSION 0.25 % (<i>betaxolol hcl</i>)	NPB	
<i>bimatoprost ophthalmic solution 0.03 %</i>	G	
BLEPHAMIDE OPHTHALMIC SUSPENSION 10-0.2 % (<i>sulfacetamide-prednisolone</i>)	NPB	
BLEPHAMIDE S.O.P. OPHTHALMIC OINTMENT 10-0.2 % (<i>sulfacetamide-prednisolone</i>)	NPB	
<i>brimonidine tartrate ophthalmic solution 0.15 %, 0.2 %</i>	G	
<i>bromfenac sodium (once-daily) ophthalmic solution 0.09 %</i>	G	
BROMSITE OPHTHALMIC SOLUTION 0.075 % (<i>bromfenac sodium</i>)	NPB	
<i>carteolol hcl ophthalmic solution 1 %</i>	G	
CEQUA OPHTHALMIC SOLUTION 0.09 % (<i>cyclosporine</i>)	NPB	
CILOXAN OPHTHALMIC OINTMENT 0.3 % (<i>ciprofloxacin hcl</i>)	NPB	
CILOXAN OPHTHALMIC SOLUTION 0.3 % (<i>ciprofloxacin hcl</i>)	NPB	
<i>ciprofloxacin hcl ophthalmic solution 0.3 %</i>	G	
CLARITIN EYE OPHTHALMIC SOLUTION 0.025 % (<i>ketotifen fumarate</i>)	G	
COMBIGAN OPHTHALMIC SOLUTION 0.2-0.5 % (<i>brimonidine tartrate-timolol</i>)	PB	
COSOPT OPHTHALMIC SOLUTION 22.3-6.8 MG/ML (<i>dorzolamide hcl-timolol mal</i>)	NPB	
COSOPT PF OPHTHALMIC SOLUTION 2-0.5 % (<i>dorzolamide hcl-timolol mal</i>)	NPB	
<i>cromolyn sodium ophthalmic solution 4 %</i>	G	
<i>cvs allergy eye drops ophthalmic solution 0.025 %</i>	G	
CYCLOGYL OPHTHALMIC SOLUTION 0.5 %, 2 % (<i>cyclopentolate hcl</i>)	NPB	
CYCLOMYDRIL OPHTHALMIC SOLUTION 0.2-1 % (<i>cyclopentolate-phenylephrine</i>)	NPB	

2020 Pharmacy Drug Guide - Premier Plus

The formulary is updated the first week of each month.

12/01/2020

200

Prescription Drug Name	Drug Tier	Coverage Requirements and Limits
cyclopentolate hcl ophthalmic solution 0.5 %, 1 %, 2 %	G	
CYSTADROPS OPHTHALMIC SOLUTION 0.37 % (cysteamine hcl)	NPSP	PA; SP
CYSTARAN OPHTHALMIC SOLUTION 0.44 % (cysteamine hcl)	NPSP	PA; #; SP
dexamethasone sodium phosphate ophthalmic solution 0.1 %	G	
diclofenac sodium ophthalmic solution 0.1 %	G	
dorzolamide hcl ophthalmic solution 2 %	G	
dorzolamide hcl-timolol mal ophthalmic solution 22.3-6.8 mg/ml	G	
dorzolamide hcl-timolol mal pf ophthalmic solution 2-0.5 %	G	
DUREZOL OPHTHALMIC EMULSION 0.05 % (difluprednate)	PB	#
epinastine hcl ophthalmic solution 0.05 %	G	
erythromycin ophthalmic ointment 5 mg/gm	G	
eye itch relief ophthalmic solution 0.025 %	G	
EYLEA INTRAVITREAL SOLUTION 2 MG/0.05ML (afibercept)	NPSP	PA; NPL; SP
EYLEA INTRAVITREAL SOLUTION PREFILLED SYRINGE 2 MG/0.05ML (afibercept)	NPSP	PA; NPL; SP
FLAREX OPHTHALMIC SUSPENSION 0.1 % (fluorometholone acetate)	NPB	
fluorometholone ophthalmic suspension 0.1 %	G	
FLURA-SAFE OPHTHALMIC SOLUTION 0.35-0.4 % (fluorexon-benoxinate)	NPB	
flurbiprofen sodium ophthalmic solution 0.03 %	G	
FML FORTE OPHTHALMIC SUSPENSION 0.25 % (fluorometholone)	NPB	
FML LIQUIFILM OPHTHALMIC SUSPENSION 0.1 % (fluorometholone)	NPB	
FML OPHTHALMIC OINTMENT 0.1 % (fluorometholone)	NPB	
gatifloxacin ophthalmic solution 0.5 %	G	
GELFILM OPHTHALMIC FILM (gelatin adsorbable)	NPB	
GENTAK OPHTHALMIC OINTMENT 0.3 % (gentamicin sulfate)	NPB	
gentamicin sulfate ophthalmic solution 0.3 %	G	

Prescription Drug Name	Drug Tier	Coverage Requirements and Limits
HOMATROPAIRE OPHTHALMIC SOLUTION 5 % (<i>homatropine hbr</i>)	NPB	
ILEVRO OPHTHALMIC SUSPENSION 0.3 % (<i>nepafenac</i>)	NPB	
INVELTYS OPHTHALMIC SUSPENSION 1 % (<i>loteprednol etabonate</i>)	NPB	
IOPIDINE OPHTHALMIC SOLUTION 1 % (<i>apraclonidine hcl</i>)	NPB	
ISTALOL OPHTHALMIC SOLUTION 0.5 % (<i>timolol maleate</i>)	NPB	
<i>ketorolac tromethamine ophthalmic solution 0.4 %, 0.5 %</i>	G	
<i>ketotifen fumarate ophthalmic solution 0.025 %</i>	G	Select OTC
LACRISERT OPHTHALMIC INSERT 5 MG (<i>artificial tear insert</i>)	NPB	
LASTACAFT OPHTHALMIC SOLUTION 0.25 % (<i>alcaftadine</i>)	NPB	
<i>latanoprost ophthalmic solution 0.005 %</i>	G	
<i>levobunolol hcl ophthalmic solution 0.5 %</i>	G	
<i>levofloxacin ophthalmic solution 0.5 %</i>	G	
LOTEMAX OPHTHALMIC GEL 0.5 % (<i>loteprednol etabonate</i>)	PB	#
LOTEMAX OPHTHALMIC OINTMENT 0.5 % (<i>loteprednol etabonate</i>)	PB	
LOTEMAX OPHTHALMIC SUSPENSION 0.5 % (<i>loteprednol etabonate</i>)	NPB	
LOTEMAX SM OPHTHALMIC GEL 0.38 % (<i>loteprednol etabonate</i>)	PB	#
<i>loteprednol etabonate ophthalmic suspension 0.5 %</i>	G	
LUCENTIS INTRAVITREAL SOLUTION PREFILLED SYRINGE 0.3 MG/0.05ML, 0.5 MG/0.05ML (<i>ranibizumab</i>)	NPSP	PA; NPL; SP
LUMIGAN OPHTHALMIC SOLUTION 0.01 % (<i>bimatoprost</i>)	PB	
MAXIDEX OPHTHALMIC SUSPENSION 0.1 % (<i>dexamethasone</i>)	NPB	
MAXITROL OPHTHALMIC OINTMENT 3.5-10000-0.1 (<i>neomycin-polymyxin-dexameth</i>)	NPB	
MAXITROL OPHTHALMIC SUSPENSION 3.5-10000-0.1 (<i>neomycin-polymyxin-dexameth</i>)	NPB	

2020 Pharmacy Drug Guide - Premier Plus

The formulary is updated the first week of each month.

12/01/2020

202

Prescription Drug Name	Drug Tier	Coverage Requirements and Limits
MOXEZA OPHTHALMIC SOLUTION 0.5 % (<i>moxifloxacin hcl</i>)	NPB	
<i>moxifloxacin hcl (2x day) ophthalmic solution 0.5 %</i>	G	
MYDRIACYL OPHTHALMIC SOLUTION 1 % (<i>tropicamide</i>)	NPB	
NATACYN OPHTHALMIC SUSPENSION 5 % (<i>natamycin</i>)	NPB	
<i>neomycin-bacitracin zn-polymyx ophthalmic ointment 5-400-10000</i>	G	
<i>neomycin-polymyxin-dexameth ophthalmic ointment 3.5-10000-0.1</i>	G	
<i>neomycin-polymyxin-dexameth ophthalmic suspension 0.1 %, 3.5-10000-0.1</i>	G	
<i>neomycin-polymyxin-gramicidin ophthalmic solution 1.75-10000-.025</i>	G	
<i>bacitracin-polymyx-neo-hc (Neo-Polycin Hc Ophthalmic Ointment 1 %)</i>	G	
<i>neomycin-bacitracin zn-polymyx (Neo-Polycin Ophthalmic Ointment 3.5-400-10000)</i>	G	
NEVANAC OPHTHALMIC SUSPENSION 0.1 % (<i>nepafenac</i>)	NPB	
OCUFLOX OPHTHALMIC SOLUTION 0.3 % (<i>ofloxacin</i>)	NPB	
<i>ofloxacin ophthalmic solution 0.3 %</i>	G	
<i>olopatadine hcl ophthalmic solution 0.1 %, 0.2 %</i>	G	
PAREMYD OPHTHALMIC SOLUTION 1-0.25 % (<i>hydroxyamphetamine-tropicamide</i>)	NPB	
PATADAY OPHTHALMIC SOLUTION 0.2 % (<i>olopatadine hcl</i>)	NPB	
PAZEO OPHTHALMIC SOLUTION 0.7 % (<i>olopatadine hcl</i>)	PB	
<i>phenylephrine hcl ophthalmic solution 10 %, 2.5 %</i>	G	
PHOSPHOLINE IODIDE OPHTHALMIC SOLUTION RECONSTITUTED 0.125 % (<i>echothiophate iodide</i>)	PB	
<i>pilocarpine hcl ophthalmic solution 1 %, 2 %, 4 %</i>	G	
<i>bacitracin-polymyxin b (Polycin Ophthalmic Ointment 500-10000 Unit/Gm)</i>	G	
<i>polymyxin b-trimethoprim ophthalmic solution 10000-0.1 unit/ml-%</i>	G	

Prescription Drug Name	Drug Tier	Coverage Requirements and Limits
POLYTRIM OPHTHALMIC SOLUTION 10000-0.1 UNIT/ML-% (<i>polymyxin b-trimethoprim</i>)	NPB	
PRED FORTE OPHTHALMIC SUSPENSION 1 % (<i>prednisolone acetate</i>)	NPB	
PRED MILD OPHTHALMIC SUSPENSION 0.12 % (<i>prednisolone acetate</i>)	NPB	
PRED-G OPHTHALMIC SUSPENSION 0.3-1 % (<i>gentamicin-prednisolone acet</i>)	NPB	
PRED-G S.O.P. OPHTHALMIC OINTMENT 0.3-0.6 % (<i>gentamicin-prednisolone acet</i>)	NPB	
<i>prednisolone acetate ophthalmic suspension 1 %</i>	G	
<i>prednisolone sodium phosphate ophthalmic solution 1 %</i>	G	
PROLENSA OPHTHALMIC SOLUTION 0.07 % (<i>bromfenac sodium</i>)	NPB	
<i>proparacaine hcl ophthalmic solution 0.5 %</i>	G	
RESTASIS OPHTHALMIC EMULSION 0.05 % (<i>cyclosporine</i>)	PB	#
RHOPRESSA OPHTHALMIC SOLUTION 0.02 % (<i>netarsudil dimesylate</i>)	NPB	
ROCKLATAN OPHTHALMIC SOLUTION 0.02-0.005 % (<i>netarsudil-latanoprost</i>)	NPB	
SIMBRINZA OPHTHALMIC SUSPENSION 1-0.2 % (<i>brinzolamide-brimonidine</i>)	NPB	
<i>sulfacetamide sodium ophthalmic solution 10 %</i>	G	
<i>sulfacetamide-prednisolone ophthalmic solution 10-0.23 %</i>	G	
<i>timolol maleate ophthalmic gel forming solution 0.25 %, 0.5 %</i>	G	
<i>timolol maleate ophthalmic solution 0.25 %, 0.5 %, 0.5 % (daily)</i>	G	
TIMOPTIC OCUDOSE OPHTHALMIC SOLUTION 0.25 %, 0.5 % (<i>timolol maleate</i>)	NPB	
TIMOPTIC OPHTHALMIC SOLUTION 0.25 %, 0.5 % (<i>timolol maleate</i>)	NPB	
TIMOPTIC-XE OPHTHALMIC GEL FORMING SOLUTION 0.5 % (<i>timolol maleate</i>)	NPB	
TOBRADEX OPHTHALMIC OINTMENT 0.3-0.1 % (<i>tobramycin-dexamethasone</i>)	NPB	
TOBRADEX OPHTHALMIC SUSPENSION 0.3-0.1 % (<i>tobramycin-dexamethasone</i>)	NPB	

2020 Pharmacy Drug Guide - Premier Plus

The formulary is updated the first week of each month.

12/01/2020

Prescription Drug Name	Drug Tier	Coverage Requirements and Limits
TOBRADEX ST OPHTHALMIC SUSPENSION 0.3-0.05 % <i>(tobramycin-dexamethasone)</i>	NPB	
<i>tobramycin ophthalmic solution 0.3 %</i>	G	
<i>tobramycin-dexamethasone ophthalmic suspension 0.3-0.1 %</i>	G	
TOBREX OPHTHALMIC OINTMENT 0.3 % (<i>tobramycin</i>)	NPB	
TOBREX OPHTHALMIC SOLUTION 0.3 % (<i>tobramycin</i>)	NPB	
TRAVATAN Z OPHTHALMIC SOLUTION 0.004 % <i>(travoprost)</i>	NPB	
<i>travoprost (bak free) ophthalmic solution 0.004 %</i>	G	
<i>trifluridine ophthalmic solution 1 %</i>	G	
<i>tropicamide ophthalmic solution 0.5 %, 1 %</i>	G	
TRUSOPT OPHTHALMIC SOLUTION 2 % (<i>dorzolamide hcl</i>)	NPB	
UPNEEQ OPHTHALMIC SOLUTION 0.1 % <i>(oxymetazoline hcl)</i>	NPB	
VIGAMOX OPHTHALMIC SOLUTION 0.5 % <i>(moxifloxacin hcl)</i>	NPB	
VISUDYNE INTRAVENOUS SOLUTION RECONSTITUTED 15 MG (<i>verteporfin</i>)	NPSP	PA; #; SP
VYZULTA OPHTHALMIC SOLUTION 0.024 % <i>(latanoprostene bunod)</i>	NPB	
XALATAN OPHTHALMIC SOLUTION 0.005 % <i>(latanoprost)</i>	NPB	
XELPROS OPHTHALMIC EMULSION 0.005 % <i>(latanoprost)</i>	NPB	
IIDRA OPHTHALMIC SOLUTION 5 % (<i>lifitegrast</i>)	PB	
ZADITOR OPHTHALMIC SOLUTION 0.025 % (<i>ketotifen fumarate</i>)	G	Select OTC
ZERVIATE OPHTHALMIC SOLUTION 0.24 % (<i>cetirizine hcl</i>)	NPB	
ZIOPTAN OPHTHALMIC SOLUTION 0.0015 % <i>(tafluprost)</i>	NPB	
ZIRGAN OPHTHALMIC GEL 0.15 % (<i>ganciclovir</i>)	NPB	#
ZYLET OPHTHALMIC SUSPENSION 0.5-0.3 % <i>(loteprednol-tobramycin)</i>	NPB	
ZYMAXID OPHTHALMIC SOLUTION 0.5 % <i>(gatifloxacin)</i>	NPB	

2020 Pharmacy Drug Guide - Premier Plus

The formulary is updated the first week of each month.

12/01/2020

Prescription Drug Name	Drug Tier	Coverage Requirements and Limits
OTIC AGENTS - DRUGS FOR THE EAR		
hydrocortisone-acetic acid (Acetasol Hc Otic Solution 2-1 %)	G	
acetic acid otic solution 2 %	G	
antibiotic ear otic solution 3.5-10000-1	G	
CETRAXAL OTIC SOLUTION 0.2 % (<i>ciprofloxacin hcl</i>)	NPB	
CIPRO HC OTIC SUSPENSION 0.2-1 % (<i>ciprofloxacin-hydrocortisone</i>)	NPB	#
CIPRODEX OTIC SUSPENSION 0.3-0.1 % (<i>ciprofloxacin-dexamethasone</i>)	PB	#
<i>ciprofloxacin-dexamethasone otic suspension 0.3-0.1 %</i>	G	
<i>ciprofloxacin-fluocinolone pf otic solution 0.3-0.025 %</i>	G	
DERMOTIC OTIC OIL 0.01 % (<i>fluocinolone acetonide</i>)	NPB	
<i>fluocinolone acetonide otic oil 0.01 %</i>	G	
<i>hydrocortisone-acetic acid otic solution 1-2 %</i>	G	
<i>neomycin-polymyxin-hc otic solution 1 %, 3.5-10000-1</i>	G	
<i>neomycin-polymyxin-hc otic suspension 3.5-10000-1</i>	G	
<i>ofloxacin otic solution 0.3 %</i>	G	
OTIPRIO INTRATYMPANIC SUSPENSION 6 % (<i>ciprofloxacin</i>)	NPB	
OTOVEL OTIC SOLUTION 0.3-0.025 % (<i>ciprofloxacin-fluocinolone</i>)	NPB	
OXYTOCICS - HORMONES		
CERVIDIL VAGINAL INSERT 10 MG (<i>dinoprostone</i>)	NPB	
<i>methylergonovine maleate</i> (Methergine Oral Tablet 0.2 Mg)	G	
PREPIDIL VAGINAL GEL 0.5 MG/3GM (<i>dinoprostone</i>)	NPB	
PROSTIN E2 VAGINAL SUPPOSITORY 20 MG (<i>dinoprostone</i>)	NPB	
PASSIVE IMMUNIZING AND TREATMENT AGENTS		
- BIOLOGICAL AGENTS		
ASCENIV INTRAVENOUS SOLUTION 5 GM/50ML (<i>immune globulin (human)-sra</i>)	NPSP	PA; NPL; SP
BIVIGAM INTRAVENOUS SOLUTION 5 GM/50ML (<i>immune globulin (human)</i>)	NPSP	PA; NPL; SP
CARIMUNE NF INTRAVENOUS SOLUTION RECONSTITUTED 12 GM, 6 GM (<i>immune globulin (human)</i>)	NPSP	PA; NPL; SP

2020 Pharmacy Drug Guide - Premier Plus

The formulary is updated the first week of each month.

12/01/2020

Prescription Drug Name	Drug Tier	Coverage Requirements and Limits
CUTAQUIG SUBCUTANEOUS SOLUTION 1 GM/6ML, 1.65 GM/10ML, 2 GM/12ML, 3.3 GM/20ML, 4 GM/24ML, 8 GM/48ML (<i>immune globulin (human)-ipp</i>)	NPSP	PA; NPL; SP
CUVITRU SUBCUTANEOUS SOLUTION 1 GM/5ML, 10 GM/50ML, 2 GM/10ML, 4 GM/20ML, 8 GM/40ML (<i>immune globulin (human)</i>)	NPSP	PA; NPL
CYTOGAM INTRAVENOUS INJECTABLE 50 MG/ML (<i>cytomegalovirus immune glob</i>)	PSP	SP
FLEBOGAMMA DIF INTRAVENOUS SOLUTION 0.5 GM/10ML, 10 GM/100ML, 10 GM/200ML, 2.5 GM/50ML, 20 GM/200ML, 20 GM/400ML, 5 GM/100ML, 5 GM/50ML (<i>immune globulin (human)</i>)	PSP	PA; NPL; SP
GAMASTAN INTRAMUSCULAR INJECTABLE (<i>immune globulin (human)</i>)	NPSP	SP
GAMMAGARD INJECTION SOLUTION 1 GM/10ML, 10 GM/100ML, 2.5 GM/25ML, 20 GM/200ML, 30 GM/300ML, 5 GM/50ML (<i>immune globulin (human)</i>)	NPSP	PA; NPL; SP
GAMMAGARD S/D LESS IGA INTRAVENOUS SOLUTION RECONSTITUTED 10 GM, 5 GM (<i>immune globulin (human)</i>)	NPSP	PA; NPL; SP
GAMMAKED INJECTION SOLUTION 10 GM/100ML, 20 GM/200ML, 5 GM/50ML (<i>immune globulin (human)</i>)	NPSP	PA; NPL; SP
GAMMAPLEX INTRAVENOUS SOLUTION 10 GM/200ML, 20 GM/400ML, 5 GM/100ML (<i>immune globulin (human)</i>)	PSP	PA; NPL; SP
GAMUNEX-C INJECTION SOLUTION 1 GM/10ML, 10 GM/100ML, 2.5 GM/25ML, 20 GM/200ML, 40 GM/400ML, 5 GM/50ML (<i>immune globulin (human)</i>)	PSP	PA; NPL; SP
HEPAGAM B INJECTION SOLUTION (<i>hepatitis b immune globulin</i>)	PSP	
HIZENTRA SUBCUTANEOUS SOLUTION 1 GM/5ML, 10 GM/50ML, 2 GM/10ML, 4 GM/20ML (<i>immune globulin (human)</i>)	PSP	PA; NPL; SP
HIZENTRA SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 1 GM/5ML, 2 GM/10ML, 4 GM/20ML (<i>immune globulin (human)</i>)	NPSP	PA; NPL; SP
HYPERHEP B S/D INTRAMUSCULAR SOLUTION (<i>hepatitis b immune globulin</i>)	NPSP	SP
HYPERRAB INJECTION SOLUTION 1500 UNIT/5ML, 300 UNIT/ML, 900 UNIT/3ML (<i>rabies immune globulin</i>)	NPSP	SP

2020 Pharmacy Drug Guide - Premier Plus

The formulary is updated the first week of each month.

12/01/2020

Prescription Drug Name	Drug Tier	Coverage Requirements and Limits
HYPERRHO S/D INTRAMUSCULAR SOLUTION PREFILLED SYRINGE 1500 UNIT, 250 UNIT (<i>rho d immune globulin</i>)	NPSP	SP
HYPERTET S/D INTRAMUSCULAR INJECTABLE 250 UNIT/ML (<i>tetanus immune globulin</i>)	PSP	SP
HYQVIA SUBCUTANEOUS KIT 10 GM/100ML, 2.5 GM/25ML, 20 GM/200ML, 30 GM/300ML, 5 GM/50ML (<i>immune globulin-hyaluronidase</i>)	NPSP	PA; NPL; SP
MICRHOGAM ULTRA-FILTERED PLUS INTRAMUSCULAR SOLUTION PREFILLED SYRINGE 250 UNIT (<i>rho d immune globulin</i>)	NPSP	SP
NABI-HB INTRAMUSCULAR SOLUTION (<i>hepatitis b immune globulin</i>)	NPSP	SP
OCTAGAM INTRAVENOUS SOLUTION 1 GM/20ML, 10 GM/100ML, 10 GM/200ML, 2 GM/20ML, 2.5 GM/50ML, 20 GM/200ML, 25 GM/500ML, 5 GM/100ML, 5 GM/50ML (<i>immune globulin (human)</i>)	PSP	PA; NPL; SP
OCTAGAM INTRAVENOUS SOLUTION 30 GM/300ML (<i>immune globulin (human)</i>)	NPSP	PA; NPL; SP
PANZYGA INTRAVENOUS SOLUTION 1 GM/10ML, 10 GM/100ML, 2.5 GM/25ML, 20 GM/200ML, 30 GM/300ML, 5 GM/50ML (<i>immune globulin (human)-ifas</i>)	NPSP	PA; NPL; SP
PRIVIGEN INTRAVENOUS SOLUTION 10 GM/100ML, 20 GM/200ML, 40 GM/400ML, 5 GM/50ML (<i>immune globulin (human)</i>)	NPSP	PA; NPL; SP
RHOGAM ULTRA-FILTERED PLUS INTRAMUSCULAR SOLUTION PREFILLED SYRINGE 1500 UNIT (<i>rho d immune globulin</i>)	NPSP	SP
RHOPHYLAC INJECTION SOLUTION PREFILLED SYRINGE 1500 UNIT/2ML (<i>rho d immune globulin</i>)	PSP	SP
SYNAGIS INTRAMUSCULAR SOLUTION 100 MG/ML, 50 MG/0.5ML (<i>palivizumab</i>)	PSP	PA; NPL; SP
WINRHO SDF INJECTION SOLUTION 1500 UNIT/1.3ML, 15000 UNIT/13ML, 2500 UNIT/2.2ML, 5000 UNIT/4.4ML (<i>rho d immune globulin</i>)	NPSP	SP
XEMBIFY SUBCUTANEOUS SOLUTION 1 GM/5ML, 10 GM/50ML, 2 GM/10ML, 4 GM/20ML (<i>immune globulin (human)-klhw</i>)	NPSP	PA; NPL; SP
PENICILLINS - DRUGS FOR INFECTIONS		
amoxicillin oral capsule 250 mg, 500 mg	G	

2020 Pharmacy Drug Guide - Premier Plus

The formulary is updated the first week of each month.

12/01/2020

208

Prescription Drug Name	Drug Tier	Coverage Requirements and Limits
amoxicillin oral suspension reconstituted 125 mg/5ml, 200 mg/5ml, 250 mg/5ml, 400 mg/5ml	G	
amoxicillin oral tablet 500 mg, 875 mg	G	
amoxicillin-pot clavulanate er oral tablet extended release 12 hour 1000-62.5 mg	G	
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	G	
amoxicillin-pot clavulanate oral tablet 250-125 mg, 500-125 mg, 875-125 mg	G	
amoxicillin-pot clavulanate oral tablet chewable 200-28.5 mg, 400-57 mg	G	
ampicillin oral capsule 500 mg	G	
AUGMENTIN ES-600 ORAL SUSPENSION RECONSTITUTED 600-42.9 MG/5ML (<i>amoxicillin-pot clavulanate</i>)	NPB	
AUGMENTIN ORAL SUSPENSION RECONSTITUTED 125-31.25 MG/5ML (<i>amoxicillin-pot clavulanate</i>)	PB	
AUGMENTIN ORAL SUSPENSION RECONSTITUTED 250-62.5 MG/5ML (<i>amoxicillin-pot clavulanate</i>)	NPB	
AUGMENTIN ORAL TABLET 500-125 MG (<i>amoxicillin-pot clavulanate</i>)	NPB	
dicloxacillin sodium oral capsule 250 mg, 500 mg	G	
penicillin v potassium oral solution reconstituted 125 mg/5ml, 250 mg/5ml	G	
penicillin v potassium oral tablet 250 mg, 500 mg	G	
PHARMACEUTICAL ADJUVANTS		
PCCA ACACIA SYRUP BASE ORAL SYRUP (<i>acacia syrup</i>)	NPB	
PROGESTINS - HORMONES		
AYGESTIN ORAL TABLET 5 MG (<i>norethindrone acetate</i>)	NPB	
hydroxyprogesterone caproate intramuscular oil 250 mg/ml	PSP	PA; SP
MAKENA INTRAMUSCULAR OIL 250 MG/ML (<i>hydroxyprogesterone caproate</i>)	PSP	PA; NPL; SP
MAKENA SUBCUTANEOUS SOLUTION AUTO-INJECTOR 275 MG/1.1ML (<i>hydroxyprogesterone caproate</i>)	PSP	PA; NPL; SP
medroxyprogesterone acetate oral tablet 10 mg, 2.5 mg, 5 mg	G	

2020 Pharmacy Drug Guide - Premier Plus

The formulary is updated the first week of each month.

12/01/2020

Prescription Drug Name	Drug Tier	Coverage Requirements and Limits
<i>megestrol acetate oral suspension 625 mg/5ml</i>	CE	N2 (G)
<i>norethindrone acetate oral tablet 5 mg</i>	G	
<i>progesterone intramuscular oil 50 mg/ml</i>	G	
<i>progesterone micronized oral capsule 100 mg, 200 mg</i>	G	
PROMETRIUM ORAL CAPSULE 100 MG, 200 MG <i>(progesterone micronized)</i>	NPB	
PROVERA ORAL TABLET 10 MG, 2.5 MG, 5 MG <i>(medroxyprogesterone acetate)</i>	NPB	
PSYCHOTHERAPEUTIC AND NEUROLOGICAL AGENTS - MISC. - DRUGS FOR THE NERVOUS SYSTEM		
<i>acamprosate calcium oral tablet delayed release 333 mg</i>	G	
AMPYRA ORAL TABLET EXTENDED RELEASE 12 HOUR 10 MG (<i>dalfampridine</i>)	NPSP	PA; SP
ARICEPT ORAL TABLET 10 MG, 23 MG, 5 MG (<i>donepezil hcl</i>)	NPB	
AUBAGIO ORAL TABLET 14 MG, 7 MG (<i>teriflunomide</i>)	PSP	PA; NPL; SP
AUSTEDO ORAL TABLET 12 MG, 6 MG, 9 MG (<i>deutetrabenazine</i>)	NPSP	PA; SP
AVONEX PEN INTRAMUSCULAR AUTO-INJECTOR KIT 30 MCG/0.5ML (<i>interferon beta-1a</i>)	NPSP	PA; NPL; SP
AVONEX PREFILLED INTRAMUSCULAR PREFILLED SYRINGE KIT 30 MCG/0.5ML (<i>interferon beta-1a</i>)	NPSP	PA; NPL; SP
BAFIERTAM ORAL CAPSULE DELAYED RELEASE 95 MG (<i>monomethyl fumarate</i>)	NPSP	PA; NPL; SP
BETASERON SUBCUTANEOUS KIT 0.3 MG (<i>interferon beta-1b</i>)	PSP	PA; NPL; SP
BRISDELLE ORAL CAPSULE 7.5 MG (<i>paroxetine mesylate</i>)	NPB	
<i>bupropion hcl er (smoking det) oral tablet extended release 12 hour 150 mg</i>	CE	N2 (G); QL (168 day supply per 365 days)
CHANTIX CONTINUING MONTH PAK ORAL TABLET 1 MG (<i>varenicline tartrate</i>)	CE	#; N2 (Not Covered); QL (168 day supply per 365 days)
CHANTIX ORAL TABLET 0.5 MG, 1 MG (<i>varenicline tartrate</i>)	CE	#; N2 (Not Covered); QL (168 day supply per 365 days)

2020 Pharmacy Drug Guide - Premier Plus

The formulary is updated the first week of each month.

12/01/2020

210

Prescription Drug Name	Drug Tier	Coverage Requirements and Limits
CHANTIX STARTING MONTH PAK ORAL TABLET 0.5 MG X 11 & 1 MG X 42 (<i>varenicline tartrate</i>)	CE	#; N2 (Not Covered); QL (168 day supply per 365 days)
COPAXONE SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 20 MG/ML, 40 MG/ML (<i>glatiramer acetate</i>)	PSP	PA; NPL; SP
<i>dalfampridine er oral tablet extended release 12 hour 10 mg</i>	PSP	PA; SP
<i>dimethyl fumarate oral capsule delayed release 120 mg, 240 mg</i>	PSP	PA; NPL; SP
<i>disulfiram oral tablet 250 mg, 500 mg</i>	G	
<i>donepezil hcl oral tablet 10 mg, 23 mg, 5 mg</i>	G	
<i>donepezil hcl oral tablet dispersible 10 mg, 5 mg</i>	G	
<i>ergoloid mesylates oral tablet 1 mg</i>	G	
EXELON TRANSDERMAL PATCH 24 HOUR 13.3 MG/24HR, 4.6 MG/24HR, 9.5 MG/24HR (<i>rivastigmine</i>)	NPB	
EXTAVIA SUBCUTANEOUS KIT 0.3 MG (<i>interferon beta-1b</i>)	NPSP	PA; NPL; SP
<i>fluoxetine hcl (pmdd) oral tablet 10 mg, 20 mg</i>	G	
<i>galantamine hydrobromide er oral capsule extended release 24 hour 16 mg, 24 mg, 8 mg</i>	G	
<i>galantamine hydrobromide oral solution 4 mg/ml</i>	G	
<i>galantamine hydrobromide oral tablet 12 mg, 4 mg, 8 mg</i>	G	
GILENYA ORAL CAPSULE 0.25 MG, 0.5 MG (<i>fingolimod hcl</i>)	PSP	PA; NPL; #; SP
<i>glatiramer acetate subcutaneous solution prefilled syringe 20 mg/ml, 40 mg/ml</i>	PSP	PA; NPL; SP
<i>glatiramer acetate (Glatopa Subcutaneous Solution Prefilled Syringe 20 Mg/Ml, 40 Mg/Ml)</i>	PSP	PA; NPL; SP
<i>goodsense nicotine mouth/throat gum 4 mg</i>	CE	N2 (Not Covered); QL (180 day supply per 365 days)
GRALISE ORAL TABLET 300 MG, 600 MG (<i> gabapentin (once-daily)</i>)	NPB	
HORIZANT ORAL TABLET EXTENDED RELEASE 300 MG, 600 MG (<i> gabapentin enacarbil</i>)	NPB	
INGREZZA ORAL CAPSULE 40 MG, 80 MG (<i> valbenazine tosylate</i>)	NPSP	PA; SP
INGREZZA ORAL CAPSULE THERAPY PACK 40 & 80 MG (<i> valbenazine tosylate</i>)	NPSP	PA; SP

2020 Pharmacy Drug Guide - Premier Plus

The formulary is updated the first week of each month.

12/01/2020

Prescription Drug Name	Drug Tier	Coverage Requirements and Limits
LEMTRADA INTRAVENOUS SOLUTION 12 MG/1.2ML <i>(alemtuzumab)</i>	PSP	PA; NPL; SP
LUCEMYRA ORAL TABLET 0.18 MG (<i>lofexidine hcl</i>)	NPB	UF11
LYRICA CR ORAL TABLET EXTENDED RELEASE 24 HOUR 165 MG, 330 MG, 82.5 MG (<i>pregabalin</i>)	PB	#
MAVENCLAD (10 TABS) ORAL TABLET THERAPY PACK 10 MG (<i>cladribine</i>)	NPSP	PA; NPL; SP
MAVENCLAD (4 TABS) ORAL TABLET THERAPY PACK 10 MG (<i>cladribine</i>)	NPSP	PA; NPL; SP
MAVENCLAD (5 TABS) ORAL TABLET THERAPY PACK 10 MG (<i>cladribine</i>)	NPSP	PA; NPL; SP
MAVENCLAD (6 TABS) ORAL TABLET THERAPY PACK 10 MG (<i>cladribine</i>)	NPSP	PA; NPL; SP
MAVENCLAD (7 TABS) ORAL TABLET THERAPY PACK 10 MG (<i>cladribine</i>)	NPSP	PA; NPL; SP
MAVENCLAD (8 TABS) ORAL TABLET THERAPY PACK 10 MG (<i>cladribine</i>)	NPSP	PA; NPL; SP
MAVENCLAD (9 TABS) ORAL TABLET THERAPY PACK 10 MG (<i>cladribine</i>)	NPSP	PA; NPL; SP
MAYZENT ORAL TABLET 0.25 MG, 2 MG (<i>siponimod fumarate</i>)	PSP	PA; NPL; SP
MAYZENT STARTER PACK ORAL TABLET THERAPY PACK 0.25 MG (<i>siponimod fumarate</i>)	PSP	PA; NPL; SP
<i>memantine hcl er oral capsule extended release 24 hour 14 mg, 21 mg, 28 mg, 7 mg</i>	G	
<i>memantine hcl oral tablet 10 mg, 28 x 5 mg & 21 x 10 mg, 5 mg</i>	G	
NAMENDA ORAL TABLET 10 MG, 5 MG (<i>memantine hcl</i>)	NPB	
NAMENDA TITRATION PAK ORAL TABLET 28 X 5 MG & 21 X 10 MG (<i>memantine hcl</i>)	NPB	
NAMENDA XR ORAL CAPSULE EXTENDED RELEASE 24 HOUR 14 MG, 21 MG, 28 MG, 7 MG (<i>memantine hcl</i>)	NPB	
NAMENDA XR TITRATION PACK ORAL CAPSULE EXTENDED RELEASE 24 HOUR 7 & 14 & 21 & 28 MG (<i>memantine hcl</i>)	NPB	#
NAMZARIC ORAL CAPSULE ER 24 HOUR THERAPY PACK 7 & 14 & 21 & 28 -10 MG (<i>memantine hcl-donepezil hcl</i>)	PB	

2020 Pharmacy Drug Guide - Premier Plus

The formulary is updated the first week of each month.

12/01/2020

212

Prescription Drug Name	Drug Tier	Coverage Requirements and Limits
NAMZARIC ORAL CAPSULE EXTENDED RELEASE 24 HOUR 14-10 MG, 21-10 MG, 28-10 MG, 7-10 MG <i>(memantine hcl-donepezil hcl)</i>	PB	
nicotine polacrilex mouth/throat gum 2 mg, 4 mg	CE	N2 (Not Covered); QL (168 day supply per 365 days)
nicotine polacrilex mouth/throat lozenge 2 mg, 4 mg	CE	N2 (Not Covered); QL (168 day supply per 365 days)
nicotine transdermal kit 21-14-7 mg/24hr	CE	N2 (Not Covered); QL (168 day supply per 365 days)
nicotine transdermal patch 24 hour 14 mg/24hr, 21 mg/24hr, 7 mg/24hr	CE	N2 (Not Covered); QL (168 day supply per 365 days)
NICOTROL INHALATION INHALER 10 MG (nicotine)	CE	N2 (Not Covered); QL (168 day supply per 365 days)
NICOTROL NS NASAL SOLUTION 10 MG/ML (nicotine)	CE	N2 (Not Covered); QL (168 day supply per 365 days)
NUEDEXTA ORAL CAPSULE 20-10 MG <i>(dextromethorphan-quinidine)</i>	PB	
olanzapine-fluoxetine hcl oral capsule 12-25 mg, 12-50 mg, 3-25 mg, 6-25 mg, 6-50 mg	G	
paroxetine mesylate oral capsule 7.5 mg	G	
pimozide oral tablet 1 mg, 2 mg	G	
PLEGRIDY STARTER PACK SUBCUTANEOUS SOLUTION PEN-INJECTOR 63 & 94 MCG/0.5ML <i>(peginterferon beta-1a)</i>	NPSP	PA; NPL; SP
PLEGRIDY STARTER PACK SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 63 & 94 MCG/0.5ML <i>(peginterferon beta-1a)</i>	NPSP	PA; NPL; SP
PLEGRIDY SUBCUTANEOUS SOLUTION PEN-INJECTOR 125 MCG/0.5ML <i>(peginterferon beta-1a)</i>	NPSP	PA; NPL; SP
PLEGRIDY SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 125 MCG/0.5ML <i>(peginterferon beta-1a)</i>	NPSP	PA; NPL; SP
RAZADYNE ER ORAL CAPSULE EXTENDED RELEASE 24 HOUR 16 MG, 24 MG, 8 MG <i>(galantamine hydrobromide)</i>	NPB	
REBIF REBIDOSE SUBCUTANEOUS SOLUTION AUTO-INJECTOR 22 MCG/0.5ML, 44 MCG/0.5ML <i>(interferon beta-1a)</i>	PSP	PA; NPL; SP

Prescription Drug Name	Drug Tier	Coverage Requirements and Limits
REBIF REBIDOSE TITRATION PACK SUBCUTANEOUS SOLUTION AUTO-INJECTOR 6X8.8 & 6X22 MCG (<i>interferon beta-1a</i>)	PSP	PA; NPL; SP
REBIF SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 22 MCG/0.5ML, 44 MCG/0.5ML (<i>interferon beta-1a</i>)	PSP	PA; NPL; SP
REBIF TITRATION PACK SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 6X8.8 & 6X22 MCG (<i>interferon beta-1a</i>)	PSP	PA; NPL; SP
<i>rivastigmine tartrate oral capsule 1.5 mg, 3 mg, 4.5 mg, 6 mg</i>	G	
<i>rivastigmine transdermal patch 24 hour 13.3 mg/24hr, 4.6 mg/24hr, 9.5 mg/24hr</i>	G	
SARAFEM ORAL TABLET 10 MG, 20 MG (<i>fluoxetine hcl (pmdd)</i>)	NPB	
SAVELLA ORAL TABLET 100 MG, 12.5 MG, 25 MG, 50 MG (<i>milnacipran hcl</i>)	NPB	UF9 (PB)
SAVELLA TITRATION PACK ORAL 12.5 & 25 & 50 MG (<i>milnacipran hcl</i>)	NPB	UF9 (PB)
SYMBYAX ORAL CAPSULE 12-50 MG, 3-25 MG, 6-25 MG, 6-50 MG (<i>olanzapine-fluoxetine hcl</i>)	NPB	
TECFIDERA ORAL 120 & 240 MG (<i>dimethyl fumarate</i>)	PSP	PA; NPL; #; SP
TECFIDERA ORAL CAPSULE DELAYED RELEASE 120 MG, 240 MG (<i>dimethyl fumarate</i>)	PSP	PA; NPL; #; SP
TEGSEDI SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 284 MG/1.5ML (<i>inotersen sodium</i>)	NPSP	PA; NPL; SP
<i>tetrabenazine oral tablet 12.5 mg, 25 mg</i>	PSP	PA
TYSABRI INTRAVENOUS CONCENTRATE 300 MG/15ML (<i>natalizumab</i>)	NPSP	PA; NPL; SP
VUMERITY ORAL CAPSULE DELAYED RELEASE 231 MG (<i>diroximel fumarate</i>)	PSP	PA; NPL; SP
VYLEESI SUBCUTANEOUS SOLUTION AUTO-INJECTOR 1.75 MG/0.3ML (<i>bremelanotide acetate</i>)	NPB	
XENAZINE ORAL TABLET 12.5 MG, 25 MG (<i>tetrabenazine</i>)	NPSP	PA; SP
XYREM ORAL SOLUTION 500 MG/ML (<i>sodium oxybate</i>)	NPSP	PA; SP
XYWAV ORAL SOLUTION 500 MG/ML (<i>ca, mg, k, and na oxybates</i>)	NPSP	SP

2020 Pharmacy Drug Guide - Premier Plus

The formulary is updated the first week of each month.

12/01/2020

Prescription Drug Name	Drug Tier	Coverage Requirements and Limits
ZEPOSIA 7-DAY STARTER PACK ORAL CAPSULE THERAPY PACK 4 X 0.23MG & 3 X 0.46MG (<i>ozanimod hcl</i>)	NPSP	PA; NPL; SP
ZEPOSIA ORAL CAPSULE 0.92 MG (<i>ozanimod hcl</i>)	NPSP	PA; NPL; SP
ZEPOSIA STARTER KIT ORAL CAPSULE THERAPY PACK 0.23MG & 0.46MG & 0.92MG (<i>ozanimod hcl</i>)	NPSP	PA; NPL; SP
RESPIRATORY AGENTS - MISC. - DRUGS FOR THE LUNGS		
ARALAST NP INTRAVENOUS SOLUTION RECONSTITUTED 1000 MG, 500 MG (<i>alpha1-proteinase inhibitor</i>)	NPSP	PA; NPL; SP
ESBRIET ORAL CAPSULE 267 MG (<i>pirfenidone</i>)	NPSP	PA; SP; UF9 (PSP)
ESBRIET ORAL TABLET 267 MG, 801 MG (<i>pirfenidone</i>)	NPSP	PA; SP; UF9 (PSP)
GLASSIA INTRAVENOUS SOLUTION 1000 MG/50ML (<i>alpha1-proteinase inhibitor</i>)	NPSP	PA; NPL; SP
KALYDECO ORAL PACKET 25 MG, 50 MG, 75 MG (<i>ivacaftor</i>)	NPSP	PA; SP; UF9 (PSP)
KALYDECO ORAL TABLET 150 MG (<i>ivacaftor</i>)	NPSP	PA; SP; UF9 (PSP)
OFEV ORAL CAPSULE 100 MG, 150 MG (<i>nintedanib esylate</i>)	NPSP	PA; SP
ORKAMBI ORAL PACKET 100-125 MG, 150-188 MG (<i>lumacaftor-ivacaftor</i>)	NPSP	PA; SP
ORKAMBI ORAL TABLET 100-125 MG, 200-125 MG (<i>lumacaftor-ivacaftor</i>)	NPSP	PA
PROLASTIN-C INTRAVENOUS SOLUTION 1000 MG/20ML (<i>alpha1-proteinase inhibitor</i>)	NPSP	PA; NPL; SP
PROLASTIN-C INTRAVENOUS SOLUTION RECONSTITUTED 1000 MG (<i>alpha1-proteinase inhibitor</i>)	NPSP	PA; NPL; SP
PULMOZYME INHALATION SOLUTION 1 MG/ML (<i>dornase alfa</i>)	PSP	PA; SP
SCLEROSOL INTRAPLEURAL INTRAPLEURAL AEROSOL POWDER 4 GM (<i>talc</i>)	NPB	
STERILE TALC POWDER INTRAPLEURAL SUSPENSION RECONSTITUTED 5 GM (<i>talc</i>)	NPB	
SYMDEKO ORAL TABLET THERAPY PACK 100-150 & 150 MG, 50-75 & 75 MG (<i>tezacaftor-ivacaftor</i>)	NPSP	PA; SP
TRIKAFTA ORAL TABLET THERAPY PACK 100-50-75 & 150 MG (<i>elexacaftor-tezacaftor-ivacaft</i>)	NPSP	PA; SP

2020 Pharmacy Drug Guide - Premier Plus

The formulary is updated the first week of each month.

12/01/2020

Prescription Drug Name	Drug Tier	Coverage Requirements and Limits
ZEMAIRA INTRAVENOUS SOLUTION RECONSTITUTED 1000 MG (<i>alpha1-proteinase inhibitor</i>)	NPSP	PA; NPL; SP
SULFONAMIDES - DRUGS FOR INFECTIONS		
sulfadiazine oral tablet 500 mg	G	
TETRACYCLINES - DRUGS FOR INFECTIONS		
ACTICLATE ORAL TABLET 150 MG, 75 MG (<i>doxycycline hyclate</i>)	NPB	
avidoxy oral tablet 100 mg	G	
minocycline hcl (Coremino Oral Tablet Extended Release 24 Hour 135 Mg, 45 Mg, 90 Mg)	G	
demeclocycline hcl oral tablet 150 mg, 300 mg	G	
DORYX MPC ORAL TABLET DELAYED RELEASE 120 MG (<i>doxycycline hyclate</i>)	NPB	#
DORYX ORAL TABLET DELAYED RELEASE 200 MG, 50 MG (<i>doxycycline hyclate</i>)	NPB	
doxycycline hyclate oral capsule 100 mg, 50 mg	G	
doxycycline hyclate oral tablet 100 mg, 150 mg, 20 mg, 50 mg, 75 mg	G	
doxycycline hyclate oral tablet delayed release 100 mg, 150 mg, 200 mg, 50 mg, 75 mg	G	
doxycycline monohydrate oral capsule 100 mg, 150 mg, 50 mg, 75 mg	G	
doxycycline monohydrate oral suspension reconstituted 25 mg/5ml	G	
doxycycline monohydrate oral tablet 100 mg, 150 mg, 50 mg, 75 mg	G	
MINOCIN ORAL CAPSULE 100 MG (<i>minocycline hcl</i>)	NPB	AL
minocycline hcl er oral capsule extended release 24 hour 135 mg, 45 mg, 90 mg	G	
minocycline hcl er oral tablet extended release 24 hour 105 mg, 115 mg, 135 mg, 45 mg, 55 mg, 65 mg, 80 mg, 90 mg	G	
minocycline hcl oral capsule 100 mg, 50 mg, 75 mg	G	
minocycline hcl oral tablet 100 mg, 50 mg, 75 mg	G	
MINOLIRA ORAL TABLET EXTENDED RELEASE 24 HOUR 105 MG, 135 MG (<i>minocycline hcl</i>)	NPB	
doxycycline hyclate (Morgidox Oral Capsule 100 Mg)	G	
NUZYRA ORAL TABLET 150 MG (<i>omadacycline tosylate</i>)	NPB	

2020 Pharmacy Drug Guide - Premier Plus

The formulary is updated the first week of each month.

12/01/2020

216

Prescription Drug Name	Drug Tier	Coverage Requirements and Limits
SEYSARA ORAL TABLET 100 MG, 150 MG, 60 MG <i>(sarecycline hcl)</i>	NPB	
SOLODYN ORAL TABLET EXTENDED RELEASE 24 HOUR 105 MG, 115 MG, 55 MG, 65 MG, 80 MG <i>(minocycline hcl)</i>	NPB	
TARGADOX ORAL TABLET 50 MG (<i>doxycycline hyolate</i>)	NPB	
<i>tetracycline hcl oral capsule 250 mg, 500 mg</i>	G	
VIBRAMYCIN ORAL CAPSULE 100 MG (<i>doxycycline hyolate</i>)	NPB	
VIBRAMYCIN ORAL SUSPENSION RECONSTITUTED 25 MG/5ML (<i>doxycycline monohydrate</i>)	NPB	
VIBRAMYCIN ORAL SYRUP 50 MG/5ML (<i>doxycycline calcium</i>)	NPB	
XIMINO ORAL CAPSULE EXTENDED RELEASE 24 HOUR 135 MG, 45 MG, 90 MG (<i>minocycline hcl</i>)	NPB	
THYROID AGENTS - HORMONES		
ARMOUR THYROID ORAL TABLET 120 MG, 15 MG, 180 MG, 240 MG, 300 MG (<i>thyroid</i>)	NPB	
CYTOMEL ORAL TABLET 25 MCG, 5 MCG, 50 MCG <i>(liothyronine sodium)</i>	NPB	
<i>levothyroxine sodium</i> (Euthyrox Oral Tablet 100 Mcg, 112 Mcg, 125 Mcg, 137 Mcg, 150 Mcg, 175 Mcg, 200 Mcg, 25 Mcg, 50 Mcg, 75 Mcg, 88 Mcg)	G	
<i>levothyroxine sodium</i> (Levo-T Oral Tablet 100 Mcg, 112 Mcg, 125 Mcg, 137 Mcg, 150 Mcg, 175 Mcg, 200 Mcg, 25 Mcg, 50 Mcg, 75 Mcg, 88 Mcg)	G	
<i>levothyroxine sodium oral tablet 100 mcg, 112 mcg, 125 mcg, 137 mcg, 150 mcg, 175 mcg, 200 mcg, 25 mcg, 300 mcg, 50 mcg, 75 mcg, 88 mcg</i>	G	
<i>levothyroxine sodium</i> (Levoxyl Oral Tablet 100 Mcg, 112 Mcg, 125 Mcg, 137 Mcg, 150 Mcg, 175 Mcg, 200 Mcg, 25 Mcg, 50 Mcg, 75 Mcg, 88 Mcg)	G	
<i>liothyronine sodium oral tablet 25 mcg, 5 mcg, 50 mcg</i>	G	
<i>methimazole oral tablet 10 mg, 5 mg</i>	G	
NATURE-THROID ORAL TABLET 113.75 MG, 130 MG, 146.25 MG, 16.25 MG, 162.5 MG, 195 MG, 260 MG, 32.5 MG, 325 MG, 48.75 MG, 65 MG, 81.25 MG, 97.5 MG <i>(thyroid)</i>	NPB	
<i>np thyroid oral tablet 30 mg, 60 mg, 90 mg</i>	G	

2020 Pharmacy Drug Guide - Premier Plus

The formulary is updated the first week of each month.

12/01/2020

Prescription Drug Name	Drug Tier	Coverage Requirements and Limits
<i>propylthiouracil oral tablet 50 mg</i>	G	
SYNTHROID ORAL TABLET 100 MCG, 112 MCG, 125 MCG, 137 MCG, 150 MCG, 175 MCG, 200 MCG, 25 MCG, 300 MCG, 50 MCG, 75 MCG, 88 MCG (<i>levothyroxine sodium</i>)	NPB	
TAPAZOLE ORAL TABLET 10 MG, 5 MG (<i>methimazole</i>)	NPB	
TIROSINT ORAL CAPSULE 100 MCG, 112 MCG, 125 MCG, 13 MCG, 137 MCG, 150 MCG, 175 MCG, 200 MCG, 25 MCG, 50 MCG, 75 MCG, 88 MCG (<i>levothyroxine sodium</i>)	NPB	#
TIROSINT-SOL ORAL SOLUTION 100 MCG/ML, 112 MCG/ML, 125 MCG/ML, 13 MCG/ML, 137 MCG/ML, 150 MCG/ML, 175 MCG/ML, 200 MCG/ML, 25 MCG/ML, 50 MCG/ML, 75 MCG/ML, 88 MCG/ML (<i>levothyroxine sodium</i>)	NPB	#
<i>levothyroxine sodium</i> (Unithroid Oral Tablet 100 Mcg, 112 Mcg, 125 Mcg, 137 Mcg, 150 Mcg, 175 Mcg, 200 Mcg, 25 Mcg, 300 Mcg, 50 Mcg, 75 Mcg, 88 Mcg)	G	
WESTHROID ORAL TABLET 130 MG, 195 MG, 32.5 MG, 65 MG, 97.5 MG (<i>thyroid</i>)	NPB	
WP THYROID ORAL TABLET 113.75 MG, 130 MG, 16.25 MG, 32.5 MG, 48.75 MG, 65 MG, 97.5 MG (<i>thyroid</i>)	NPB	
ULCER DRUGS/ANTISPASMODICS/ANTICHOLINERGICS - DRUGS FOR THE STOMACH		
ACIPHEX ORAL TABLET DELAYED RELEASE 20 MG (<i>rabeprazole sodium</i>)	NPB	
ACIPHEX SPRINKLE ORAL CAPSULE SPRINKLE 10 MG (<i>rabeprazole sodium</i>)	NPB	
ACIPHEX SPRINKLE ORAL CAPSULE SPRINKLE 5 MG (<i>rabeprazole sodium</i>)	NPB	#
<i>amoxicill-clarithro-lansopraz oral</i>	G	
CARAFATE ORAL SUSPENSION 1 GM/10ML (<i>sucralfate</i>)	NPB	
CARAFATE ORAL TABLET 1 GM (<i>sucralfate</i>)	NPB	
<i>cimetidine hcl oral solution 300 mg/5ml</i>	G	
<i>cimetidine oral tablet 300 mg, 400 mg, 800 mg</i>	G	
CUVPOSA ORAL SOLUTION 1 MG/5ML (<i>glycopyrrolate</i>)	NPB	#
CYTOTEC ORAL TABLET 100 MCG, 200 MCG (<i>misoprostol</i>)	NPB	

2020 Pharmacy Drug Guide - Premier Plus

The formulary is updated the first week of each month.

12/01/2020

Prescription Drug Name	Drug Tier	Coverage Requirements and Limits
DEXILANT ORAL CAPSULE DELAYED RELEASE 30 MG, 60 MG (<i>dexlansoprazole</i>)	PB	#
<i>dicyclomine hcl oral capsule 10 mg</i>	G	
<i>dicyclomine hcl oral tablet 20 mg</i>	G	
<i>esomeprazole magnesium oral capsule delayed release 20 mg</i>	G	Select OTC
<i>esomeprazole magnesium oral capsule delayed release 40 mg</i>	G	
<i>esomeprazole magnesium oral packet 10 mg, 20 mg, 40 mg</i>	G	
<i>famotidine oral suspension reconstituted 40 mg/5ml</i>	G	
<i>famotidine oral tablet 40 mg</i>	G	
<i>glycopyrrolate oral tablet 1 mg, 1.5 mg, 2 mg</i>	G	
HELIDAC THERAPY ORAL (<i>metronid-tetracyc-bis subsal</i>)	NPB	
<i>kp omeprazole magnesium oral capsule delayed release 20.6 (20 base) mg</i>	G	
<i>lansoprazole oral capsule delayed release 15 mg</i>	G	Select OTC
<i>lansoprazole oral capsule delayed release 30 mg</i>	G	
<i>lansoprazole oral tablet delayed release dispersible 15 mg, 30 mg</i>	G	
LIBRAX ORAL CAPSULE 5-2.5 MG (<i>chlordiazepoxide-clidinium</i>)	NPB	
<i>methscopolamine bromide oral tablet 2.5 mg, 5 mg</i>	G	
<i>misoprostol oral tablet 100 mcg, 200 mcg</i>	G	
NEXIUM 24HR CLEAR MINIS ORAL CAPSULE DELAYED RELEASE 20 MG (<i>esomeprazole magnesium</i>)	G	
NEXIUM 24HR ORAL CAPSULE DELAYED RELEASE 20 MG (<i>esomeprazole magnesium</i>)	G	Select OTC
NEXIUM 24HR ORAL TABLET DELAYED RELEASE 20 MG (<i>esomeprazole magnesium</i>)	G	Select OTC
NEXIUM ORAL CAPSULE DELAYED RELEASE 40 MG (<i>esomeprazole magnesium</i>)	NPB	
NEXIUM ORAL PACKET 10 MG, 20 MG, 40 MG (<i>esomeprazole magnesium</i>)	NPB	
NEXIUM ORAL PACKET 2.5 MG, 5 MG (<i>esomeprazole magnesium</i>)	NPB	#
<i>nizatidine oral capsule 150 mg, 300 mg</i>	G	
<i>nizatidine oral solution 15 mg/ml</i>	G	
OMECLAMOX-PAK ORAL 500-500-20 MG (<i>amoxicill-clarithro-omeprazole</i>)	PB	

2020 Pharmacy Drug Guide - Premier Plus

The formulary is updated the first week of each month.

12/01/2020

Prescription Drug Name	Drug Tier	Coverage Requirements and Limits
omeprazole magnesium oral capsule delayed release 20.6 (20 base) mg	G	Select OTC
omeprazole oral capsule delayed release 10 mg, 40 mg	G	
omeprazole oral tablet delayed release 20 mg	G	Select OTC
omeprazole-sodium bicarbonate oral capsule 20-1100 mg	G	Select OTC
omeprazole-sodium bicarbonate oral capsule 40-1100 mg	G	
omeprazole-sodium bicarbonate oral packet 20-1680 mg, 40-1680 mg	G	
pantoprazole sodium oral packet 40 mg	G	
pantoprazole sodium oral tablet delayed release 20 mg, 40 mg	G	
PEPCID ORAL TABLET 40 MG (<i>famotidine</i>)	NPB	
PREVACID 24HR ORAL CAPSULE DELAYED RELEASE 15 MG (<i>lansoprazole</i>)	G	Select OTC
PREVACID ORAL CAPSULE DELAYED RELEASE 30 MG (<i>lansoprazole</i>)	NPB	
PREVACID SOLUTAB ORAL TABLET DELAYED RELEASE DISPERSIBLE 15 MG, 30 MG (<i>lansoprazole</i>)	NPB	
PRILOSEC ORAL PACKET 10 MG, 2.5 MG (<i>omeprazole magnesium</i>)	NPB	#
PRILOSEC OTC ORAL TABLET DELAYED RELEASE 20 MG (<i>omeprazole magnesium</i>)	G	Select OTC
PROTONIX ORAL PACKET 40 MG (<i>pantoprazole sodium</i>)	NPB	
PROTONIX ORAL TABLET DELAYED RELEASE 20 MG, 40 MG (<i>pantoprazole sodium</i>)	NPB	
PYLERA ORAL CAPSULE 140-125-125 MG (<i>bis subcit-metronid-tetracyc</i>)	PB	#
rabeprazole sodium oral capsule sprinkle 10 mg	G	
rabeprazole sodium oral tablet delayed release 20 mg	G	
sucralfate oral suspension 1 gm/10ml	G	
sucralfate oral tablet 1 gm	G	
TALICIA ORAL CAPSULE DELAYED RELEASE 250-12.5-10 MG (<i>amoxicill-rifabutin-omeprazole</i>)	NPB	
ZEGERID ORAL CAPSULE 40-1100 MG (<i>omeprazole-sodium bicarbonate</i>)	NPB	
ZEGERID ORAL PACKET 20-1680 MG, 40-1680 MG (<i>omeprazole-sodium bicarbonate</i>)	NPB	

2020 Pharmacy Drug Guide - Premier Plus

The formulary is updated the first week of each month.

12/01/2020

Prescription Drug Name	Drug Tier	Coverage Requirements and Limits
ZEGERID OTC ORAL CAPSULE 20-1100 MG (omeprazole-sodium bicarbonate)	G	Select OTC
URINARY ANTISPASMODICS - DRUGS FOR THE URINARY SYSTEM		
bethanechol chloride oral tablet 25 mg	G	
darifenacin hydrobromide er oral tablet extended release 24 hour 15 mg, 7.5 mg	G	
DETROL LA ORAL CAPSULE EXTENDED RELEASE 24 HOUR 2 MG, 4 MG (tolterodine tartrate)	NPB	
DETROL ORAL TABLET 1 MG, 2 MG (tolterodine tartrate)	NPB	
DITROPAN XL ORAL TABLET EXTENDED RELEASE 24 HOUR 10 MG, 5 MG (oxybutynin chloride)	NPB	
ENABLEX ORAL TABLET EXTENDED RELEASE 24 HOUR 15 MG, 7.5 MG (darifenacin hydrobromide)	NPB	
flavoxate hcl oral tablet 100 mg	G	
GELNIQUE TRANSDERMAL GEL 10 % (oxybutynin chloride)	NPB	#
MYRBETRIQ ORAL TABLET EXTENDED RELEASE 24 HOUR 25 MG, 50 MG (mirabegron)	PB	
oxybutynin chloride oral tablet 5 mg	G	
OXYTROL FOR WOMEN TRANSDERMAL PATCH TWICE WEEKLY 3.9 MG/24HR (oxybutynin)	NPB	#
solifenacin succinate oral tablet 10 mg, 5 mg	G	
tolterodine tartrate er oral capsule extended release 24 hour 2 mg, 4 mg	G	
TOVIAZ ORAL TABLET EXTENDED RELEASE 24 HOUR 4 MG, 8 MG (fesoterodine fumarate)	PB	#
trospium chloride er oral capsule extended release 24 hour 60 mg	G	
VESICARE ORAL TABLET 10 MG, 5 MG (solifenacin succinate)	PB	
VAGINAL AND RELATED PRODUCTS - DRUGS FOR WOMEN		
CLEOCIN VAGINAL CREAM 2 % (clindamycin phosphate)	NPB	
CLEOCIN VAGINAL SUPPOSITORY 100 MG (clindamycin phosphate)	NPB	
clindamycin phosphate vaginal cream 2 %	G	

2020 Pharmacy Drug Guide - Premier Plus

The formulary is updated the first week of each month.

12/01/2020

Prescription Drug Name	Drug Tier	Coverage Requirements and Limits
CLINDESSE VAGINAL CREAM 2 % (<i>clindamycin phosphate (1 dose)</i>)	NPB	
CRINONE VAGINAL GEL 4 %, 8 % (<i>progesterone</i>)	PB	
ENDOMETRIN VAGINAL INSERT 100 MG (<i>progesterone</i>)	PB	#
ESTRACE VAGINAL CREAM 0.1 MG/GM (<i>estradiol</i>)	NPB	
<i>estradiol vaginal cream 0.1 mg/gm</i>	G	
<i>estradiol vaginal tablet 10 mcg</i>	G	
ESTRING VAGINAL RING 2 MG (<i>estradiol</i>)	NPB	
FEMRING VAGINAL RING 0.05 MG/24HR, 0.1 MG/24HR (<i>estradiol acetate</i>)	NPB	#
GYNAZOLE-1 VAGINAL CREAM 2 % (<i>butoconazole nitrate (1 dose)</i>)	NPB	
IMVEXXY MAINTENANCE PACK VAGINAL INSERT 10 MCG, 4 MCG (<i>estradiol</i>)	NPB	
IMVEXXY STARTER PACK VAGINAL INSERT 10 MCG, 4 MCG (<i>estradiol</i>)	NPB	
INTRAROSA VAGINAL INSERT 6.5 MG (<i>prasterone</i>)	NPB	
<i>metronidazole vaginal gel 0.75 %</i>	G	
NUVESSA VAGINAL GEL 1.3 % (<i>metronidazole</i>)	NPB	
PHEXXI VAGINAL GEL 1.8-1-0.4 % (<i>lactic ac-citric ac-pot bitart</i>)	NPB	
PREMARIN VAGINAL CREAM 0.625 MG/GM (<i>estrogens, conjugated</i>)	PB	
<i>terconazole vaginal cream 0.4 %, 0.8 %</i>	G	
<i>terconazole vaginal suppository 80 mg</i>	G	
TODAY SPONGE VAGINAL 1000 MG (<i>nonoxynol-9</i>)	CE	N2 (Not Covered)
VAGIFEM VAGINAL TABLET 10 MCG (<i>estradiol</i>)	NPB	
<i>metronidazole (Vandazole Vaginal Gel 0.75 %)</i>	G	
VCF VAGINAL CONTRACEPTIVE VAGINAL FILM 28 % (<i>nonoxynol-9</i>)	CE	N2 (Not Covered)
<i>estradiol (Yuvafem Vaginal Tablet 10 Mcg)</i>	G	
VASOPRESSORS - DRUGS FOR THE HEART		
AUVI-Q INJECTION SOLUTION AUTO-INJECTOR 0.1 MG/0.1ML, 0.15 MG/0.15ML, 0.3 MG/0.3ML (<i>epinephrine</i>)	NPB	

2020 Pharmacy Drug Guide - Premier Plus

The formulary is updated the first week of each month.

12/01/2020

Prescription Drug Name	Drug Tier	Coverage Requirements and Limits
<i>epinephrine injection solution auto-injector 0.15 mg/0.15ml, 0.15 mg/0.3ml, 0.3 mg/0.3ml</i>	G	
EPIPEN 2-PAK INJECTION SOLUTION AUTO-INJECTOR 0.3 MG/0.3ML (<i>epinephrine</i>)	NPB	
EPIPEN JR 2-PAK INJECTION SOLUTION AUTO-INJECTOR 0.15 MG/0.3ML (<i>epinephrine</i>)	NPB	
<i>midodrine hcl oral tablet 10 mg, 2.5 mg, 5 mg</i>	G	
NORTHERA ORAL CAPSULE 100 MG, 200 MG, 300 MG (<i>droxidopa</i>)	NPSP	PA; #; SP
SYMJEPI INJECTION SOLUTION PREFILLED SYRINGE 0.15 MG/0.3ML, 0.3 MG/0.3ML (<i>epinephrine</i>)	PB	
VITAMINS - DRUGS FOR NUTRITION		
DRISDOL ORAL CAPSULE 1.25 MG (50000 UT) (<i>ergocalciferol</i>)	NPB	
<i>ergocal oral capsule 62.5 mcg (2500 ut)</i>	NPB	
<i>ergocalciferol oral capsule 1.25 mg (50000 ut)</i>	G	
MEPHYTON ORAL TABLET 5 MG (<i>phytonadione</i>)	NPB	
<i>niacin er oral tablet extended release 1000 mg, 250 mg, 750 mg</i>	G	
<i>phytonadione injection solution 1 mg/0.5ml</i>	G	
<i>phytonadione oral tablet 5 mg</i>	G	
<i>vitamin d (ergocalciferol) oral capsule 1.25 mg (50000 ut)</i>	G	
<i>vitamin k1 injection solution 1 mg/0.5ml</i>	G	

Index

<i>1st tier unifine pentips</i>	162	ACE AEROSOL CLOUD ENHANCER	163	<i>adult aerosol mask</i>	163
<i>1st tier unifine pentips plus</i>	162	<i>acebutolol hcl</i>	97	<i>adult mask</i>	163
<i>abacavir sulfate</i>	92	<i>acetaminophen-codeine</i>	28	<i>adult mask large</i>	163
<i>abacavir sulfate-lamivudine</i>	92	<i>acetaminophen-codeine #2</i>	27	ADVAIR DISKUS.....	39
<i>abacavir-lamivudine-zidovudine</i>	92	<i>acetaminophen-codeine #3</i>	28	ADVAIR HFA.....	39
ABILITY	88	<i>acetaminophen-codeine #4</i>	28	ADVANCE INTUITION	
ABILITY MAINTENA.....	88	Acetasol Hc.....	206	CONTROL	163
<i>abiraterone acetate</i>	78	<i>acetazolamide</i>	138	ADVANCE INTUITION	
ABREVA.....	115	<i>acetazolamide er</i>	138	TEST	130
ABSORICA.....	115	<i>acetic acid</i>	150, 206	ADVANCE MICRO-DRAW	
ABSORICA LD.....	115	<i>acetylcysteine</i>	114	CONTROL	163
<i>acamprosate calcium</i>	210	ACIPHEX.....	218	ADVANCE MICRO-DRAW	
ACANYA.....	115	ACIPHEX SPRINKLE.....	218	NORMAL	163
<i>acarbose</i>	54	<i>acitretin</i>	115	ADVANCE MICRO-DRAW	
ACCOLATE	39	ACTEMRA.....	21, 22	TEST	130
ACCU-CHEK AVIVA	162	ACTEMRA ACTPEN.....	21	ADVATE	152
ACCU-CHEK AVIVA PLUS	129	ACTHAR	140	ADVOCATE CONTROL	
ACCU-CHEK COMPACT PLUS	129	ACTICLATE	216	SOLUTION	163
ACCU-CHEK COMPACT PLUS CONTROL	162	ACTIGALL	147	ADVOCATE INSULIN PEN	
ACCU-CHEK FASTCLIX LANCET	163	ACTIMMUNE	78	NEEDLES	163
ACCU-CHEK FASTCLIX LANCETS	163	ACTIQ	28	ADVOCATE INSULIN	
ACCU-CHEK GUIDE	129	ACTIVELLA	145	SYRINGE	163
ACCU-CHEK MULTICLIX LANCET DEV	163	<i>active-medicated spec collect</i> ..	130	ADVOCATE LANCING	
ACCU-CHEK MULTICLIX LANCETS	163	ACTIVITY POUCH	163	DEVICE	164
ACCU-CHEK SAFE-T PRO LANCETS	163	ACTONEL	140	ADVOCATE RAPID-SAFE	
ACCU-CHEK SMARTVIEW	129	ACTOPLUS MET	54	LANCING	164
ACCU-CHEK SMARTVIEW CONTROL ..	163	ACTOS	54	ADVOCATE REDI-CODE..	130
ACCU-CHEK SOFTCLIX LANCET DEV	163	ACULAR	199	ADVOCATE REDI-CODE+	
ACCU-CHEK SOFTCLIX LANCETS	163	ACULAR LS	199	CONTROL	164
ACCU-CHEK SMARTVIEW	129	<i>acyclovir</i>	92, 115	ADVOCATE REDI-CODE+	
ACCU-CHEK SMARTVIEW CONTROL ..	163	ACZONE	115	TEST	130
ACCU-CHEK SOFTCLIX LANCET DEV	163	<i>adapalene</i>	115, 116	ADVOCATE TEST	130
ACCU-CHEK SOFTCLIX LANCETS	163	<i>adapalene-benzoyl peroxide</i>	116	ADYNOVATE	153
ACCPURIL	71	ADAPTER PED		ADZENYS ER	16
ACCURETIC	71	DISPOSABLE	163	ADZENYS XR-ODT	16
ACCUTREND GLUCOSE ..	130	ADCIRCA	101	AEMCOLO	75
ACCUTREND GLUCOSE CONTROL	163	ADDERALL	16	AEROTRACH PLUS	164
<i>acd formula a</i>	44	ADDERALL XR	16	Afeditab Cr	99
ACD-A NOCLOT-50	44	<i>adefovir dipivoxil</i>	92	AFINITOR	79
		ADEMPAS	101	AFINITOR DISPERZ	79
		ADHANSIA XR	16	Afirmelle	104
		<i>adjustable lancing device</i>	163	AFREZZA	54
		ADLYXIN	54	AFSTYLA	153
		ADLYXIN STARTER		AGAMATRIX AMP TEST ..	130
		PACK	54	AGAMATRIX CONTROL ..	164
		ADMELOG	54	AGAMATRIX JAZZ TEST ..	130
		ADMELOG SOLOSTAR	54	AGAMATRIX KEYNOTE	
		ADRENALIN	197	TEST	130

AGAMATRIX PRESTO	
TEST	130
AGRYLIN	153
<i>aif #2 drug preparation kit</i>	116
AIMOVIG	182
AIRDUO DIGIHALER	39
AIRDUO RESPICLICK 113/14	39
AIRDUO RESPICLICK 232/14	39
AIRDUO RESPICLICK 55/14	39
AIRS PEDIATRIC	
AEROSOL MASK	164
AIRZONE PEAK FLOW METER	164
AJOVY	182
AKLIEF	116
AKYNZEO	64
ALAVERT	66
ALAVERT ALLERGY/SINUS	114
ALAWAY	199
ALAWAY CHILDRENS ALLERGY	199
<i>albendazole</i>	36
ALBENZA	36
<i>albuterol sulfate</i>	40
<i>albuterol sulfate er</i>	39
<i>albuterol sulfate hfa</i>	40
ALCAINE	199
<i>alclometasone dipropionate</i>	116
ALCOH-GLOVE	
CONTOURED WIPE	164
<i>alcohol pads</i>	164
<i>alcohol prep</i>	164
<i>alcohol swabs</i>	164
<i>alcohol wipes</i>	164
ALDACTAZIDE	139
ALDACTONE	139
ALDARA	116
ALDURAZYME	140
ALECENSA	79
<i>alendronate sodium</i>	140
ALFERON N	79
<i>alfuzosin hcl er</i>	150
ALINIA	75
<i>aliskiren fumarate</i>	71
ALIVE PRENATAL	189
ALKERAN	79
ALKINDI SPRINKLE	112
ALL FLOW 1000 PFT	
FILTER	164
ALLEGRA ALLERGY	66
ALLEGRA ALLERGY CHILDRENS	66
ALLEGRA-D ALLERGY & CONGESTION	114
<i>allergy 24hour indoor/outdoor</i>	66
<i>allergy relief</i>	66
<i>allergy relief loratadine</i>	66
<i>allopurinol</i>	152
ALLZITAL	26
<i>almotriptan malate</i>	182
ALOCRIL	199
<i>alogliptin benzoate</i>	54
<i>alogliptin-metformin hcl</i>	54
<i>alogliptin-pioglitazone</i>	54
ALOMIDE	199
ALORA	145
<i>alosetron hcl</i>	147
ALPHAGAN P	199
ALPHANATE/VWF COMPLEX/HUMAN	153
ALPHANINE SD	153
<i>alprazolam</i>	38
<i>alprazolam er</i>	37
ALPRAZOLAM INTENSOL	37
<i>alprazolam xr</i>	38
ALPROLIX	153
ALREX	199
ALTABAX	116
ALTACE	71
Altafrin	199
Altavera	104
<i>alternate site lancing device</i>	164
ALTOPREV	68
ALTRENO	116
ALUNBRIG	79
ALVESCO	40
<i>alyacen 1/35</i>	104
<i>alyacen 7/7/7</i>	104
Alyq	101
Amabelz	145
<i>amantadine hcl</i>	86
AMARYL	54
AMBIEN	159
AMBIEN CR	159
<i>ambrisentan</i>	101
amcinonide	116
AMELUZ	116
AMERGE	182
Amethia	104
Amethia Lo	104
AMICAR	159
<i>amiloride hcl</i>	139
<i>amiloride-hydrochlorothiazide</i>	139
<i>aminoacetic acid</i>	151
<i>aminocaproic acid</i>	159
<i>amiodarone hcl</i>	38
AMITIZA	147
<i>amitriptyline hcl</i>	50
<i>amlodipine besy-benazepril hcl</i>	71
<i>amlodipine besylate</i>	99
<i>amlodipine besylate-valsartan</i>	71
<i>amlodipine-atorvastatin</i>	101
<i>amlodipine-olmesartan</i>	71
<i>amlodipine-valsartan-hctz</i>	71
AMMONUL	140
Amnesteem	116
<i>amoxapine</i>	50
<i>amoxicill-clarithro-lansopraz</i>	218
<i>amoxicillin</i>	208, 209
<i>amoxicillin-pot clavulanate</i>	209
<i>amoxicillin-pot clavulanate er</i>	209
<i>amphetamine er</i>	16
<i>amphetamine sulfate</i>	16
<i>amphetamine-dextroamphetamine</i>	16
<i>ampicillin</i>	209
AMPYRA	210
AMRIX	195
AMZEEQ	116
ANACAINE	116
ANADROL-50	35
ANAFRANIL	50
<i>anagrelide hcl</i>	153
ANAPROX DS	22
<i>anastrozole</i>	79
ANCOBON	65
ANDRODERM	35
ANDROGEL	35
ANDROGEL PUMP	35
ANGELIQ	145
ANNOVERA	104
ANORO ELLIPTA	40
ANTARA	68
<i>antibiotic ear</i>	206
ANUSOL-HC	36

ANZEMET	64	ASMANEX (60 METERED DOSES)	40	atenolol	97
APADAZ	28	ASMANEX (7 METERED DOSES)	40	atenolol-chlorthalidone	71
<i>apap-caff-dihydrocodeine</i>	28	ASMANEX HFA	40	ATGAM	186
APEXICON E	116	<i>aspirin</i>	26	ATIVAN	38
APIDRA	54	<i>aspirin 81</i>	26	<i>atomoxetine hcl</i>	17
APIDRA SOLOSTAR	54	<i>aspirin adult low dose</i>	26	<i>atorvastatin calcium</i>	68
APLENZIN	51	<i>aspirin childrens</i>	26	<i>atovaquone-proguanil hcl</i>	77
APOKYN	86	<i>aspirin low dose</i>	26	ATRALIN	116
<i>apraclonidine hcl</i>	199	<i>aspirin-dipyridamole er</i>	153	ATRIPLA	92
<i>aprepitant</i>	64	<i>aspirin-omeprazole</i>	153	<i>atropine sulfate</i>	199
Apri	104	ASPIR-LOW	26	ATROVENT HFA	40
APRISO	147	ASSESS FULL RANGE		AUBAGIO	210
APTENSIO XR	17	PEAK METER	164	Aubra	104
APTIOM	45	ASSESS LOW RANGE		Aubra Eq	104
APTIVUS	92	PEAK METER	164	AUGMENTIN	209
<i>aqua lance adjustable lancing</i>	164	ASSESS PEAK FLOW		AUGMENTIN ES-600	209
ARAKODA	77	METER	164	<i>aurora pen needles</i>	165
ARALAST NP	215	ASSURE 3 CONTROL	164	<i>aurora unifine pentips</i>	165
Aranelle	104	ASSURE 3 TEST	130	Aurovela 1.5/30	104
ARANESP (ALBUMIN FREE)	156, 157	ASSURE 4 CONTROL		Aurovela 1/20	104
ARAZLO	116	LEVEL 1 & 2	164	Aurovela 24 Fe	104
ARCALYST	22	ASSURE 4 TEST	130	Aurovela Fe 1/20	104
ARCAPTA NEOHALER	40	ASSURE DOSE CONTROL	164	AURYXIA	147
Argyle Sterile Saline	151	ASSURE DOSE		AUSTEDO	210
Argyle Sterile Water	186	NORM/HIGH CONTROL..	164	AUTOJECT 2	165
ARICEPT	210	ASSURE ID INSULIN		AUTO-LANCET	165
ARIKAYCE	21	SAFETY SYR	164	AUTO-LANCET MINI	165
ARIMIDEX	79	ASSURE II	130	AUTOLET II CLINISAFE..	165
<i>aripiprazole</i>	88	ASSURE II CHECK	130	AUTOLET LANCING DEVICE	165
ARISTADA	89	ASSURE II CONTROL	164	AUTOLET LITE	
ARISTADA INITIO	88	ASSURE II CONTROL		CLINISAFE	165
ARIIXTRA	44	LEVEL 1 & 2	165	AUTOLET LITE STARTER	
<i>armodafinil</i>	17	ASSURE PLATINUM	130	PACK	165
ARMONAIR DIGIHALER	40	ASSURE PRISM MULTI		AUTOLET MINI	165
ARMOUR THYROID	217	TEST	130	AUTOLET PLATFORMS	165
ARNUITY ELLIPTA	40	ASSURE PRO CONTROL		AUVI-Q	222
AROMASIN	79	LEVEL 1 & 2	165	AVALIDE	71
ARTHROTEC	22	ASSURE PRO TEST	130	AVANDIA	54
ARTISS	159	ASTAGRAF XL	186	AVAPRO	71
ARYMO ER	28	ASTHMA CHECK METER-ZONE SYSTEM	165	Aviane	104
ASCENIV	206	ASTHMAMENTOR	165	<i>avidoxyl</i>	216
Ascomp-Codeine	28	ATABEX	189	Avita	116
ASMANEX (120 METERED DOSES)	40	ATABEX EC	189	AVODART	151
ASMANEX (14 METERED DOSES)	40	ATACAND	71	AVONEX PEN	210
ASMANEX (30 METERED DOSES)	40	ATACAND HCT	71	AVONEX PREFILLED	210
		<i>atazanavir sulfate</i>	92	AVSOLA	147
		ATELVIA	140	AYGESTIN	209
				Ayuna	104
				AYVAKIT	79

AZASAN	186	BD LANCET ULTRAFINE	97
AZASITE	199	33G	166
<i>azathioprine</i>	186	BD MICROAINER	210
<i>azelaic acid</i>	116	LANCETS	98, 200
<i>azelastine hcl</i>	197, 199	BD PEN	221
<i>azelastine-fluticasone</i>	197	BD PEN MINI	21
AZELEX	116	BD PEN NEEDLE MINI	200
<i>azeschew prenatal/postnatal</i>	189	U/F	200
<i>azesco</i>	189	BD PEN NEEDLE NANO	200
AZILECT	86	U/F	200
<i>azithromycin</i>	161	BD PEN NEEDLE	200
AZOPT	199	ORIGINAL U/F	200
AZOR	71	BD PEN NEEDLE SHORT	200
AZULFIDINE	148	U/F	200
AZULFIDINE EN-TABS	148	BD SAFETYGLIDE	200
Azurette	105	INSULIN SYRINGE	200
<i>bacitracin</i>	199	BD SAFETY-LOK	200
<i>bacitracin-polymyxin b</i>	199	INSULIN SYRINGE	200
<i>bacitra-neomycin-polymyxin-hc</i>	199	BD SWABS SINGLE USE	200
<i>baclofen</i>	195	BUTTERFLY	200
BACTRIM	75	BECONASE AQ	200
BACTRIM DS	75	BELBUCA	28
BAFIERTAM	210	BELSOMRA	159
BALCOLTRA	105	<i>benazepril hcl</i>	71
<i>balsalazide disodium</i>	148	BEFIX	153
BALVERSA	79	BENICAR	71
Balziva	105	BENICAR HCT	71
BANZEL	45	BENLYSTA	186
BAQSIMI ONE PACK	54	BENZACLIN	116
BAQSIMI TWO PACK	54	BENZACLIN WITH PUMP	116
BARACLUDE	92	BENZAMYCIN	116
BASAGLAR KWIKPEN	54	<i>benhydrocodone-acetaminophen</i>	28
BAXDELA	147	<i>benznidazole</i>	36
BAYER LOW DOSE	26	<i>benzonatate</i>	114
BD AUTOSHIELD	165	<i>benzoyl peroxide-erythromycin</i>	116
BD AUTOSHIELD DUO	165	<i>benztropine mesylate</i>	86
BD GLUCOSE	55	BEOVU	199
BD INSULIN SYR		BEPREVE	199
ULTRAFINE II	165	BERINERT	153
BD INSULIN SYRINGE	165	BESIVANCE	199
BD INSULIN SYRINGE		BETADINE OPHTHALMIC	200
MICROFINE	165	PREP	200
BD INSULIN SYRINGE		<i>betamethasone dipropionate</i>	117
U/F	165	<i>betamethasone dipropionate aug</i>	116, 117
BD INSULIN SYRINGE		<i>betamethasone valerate</i>	117
ULTRAFINE	165	BETAPACE	98
BD LANCET ULTRAFINE			
30G	165		
		BETAPACE AF	
		BETASERON	
		<i>betaxolol hcl</i>	
		<i>bethanechol chloride</i>	
		BETHKIS	
		BETIMOL	
		BETOPTIC-S	
		BEVESPI AEROSPHERE	
		<i>bexarotene</i>	
		BEYAZ	
		<i>bicalutamide</i>	
		BIDIL	
		BIJUVA	
		BIKTARVY	
		BILTRICIDE	
		<i>bimatoprost</i>	
		BINOSTO	
		BIOSANNER GLUCOSE TEST	
		<i>bio-statin</i>	
		<i>bisoprolol fumarate</i>	
		<i>bisoprolol-hydrochlorothiazide</i>	
		BIVIGAM	
		BLEPHAMIDE	
		BLEPHAMIDE S.O.P.	
		<i>blood glucose test</i>	
		BONIVA	
		BONJESTA	
		<i>bosentan</i>	
		BOSULIF	
		BOTOX	
		BRAFTOVI	
		BREO ELLIPTA	
		BREZTRI AEROSPHERE	
		<i>briellyn</i>	
		BRILINTA	
		<i>brimonidine tartrate</i>	
		BRISDELLE	
		BRIVIACT	
		<i>bromfenac sodium (once-daily)</i>	
			200
		<i>bromocriptine mesylate</i>	
		BROMSITE	
		BROVANA	
		BRUKINSA	
		BRYHALI	
		BUBBLES THE FISH II	
		PEDI MASK	
		<i>budesonide</i>	
		<i>budesonide er</i>	
			112

<i>budesonide-formoterol</i>		
<i>fumarate</i>	41	
<i>bumetanide</i>	139	
<i>BUNAVAIL</i>	28	
<i>Bupap</i>	26	
<i>BUPHENYL</i>	140	
<i>buprenorphine</i>	29	
<i>buprenorphine hcl</i>	28	
<i>buprenorphine hcl-naloxone hcl</i>		
	28, 29	
<i>bupropion hcl</i>	51	
<i>bupropion hcl er (smoking det)</i>		
	210	
<i>bupropion hcl er (sr)</i>	51	
<i>bupropion hcl er (xl)</i>	51	
<i>buspirone hcl</i>	38	
<i>butalbital-acetaminophen</i>	27	
<i>butalbital-apap-caff-cod</i>	29	
<i>butalbital-apap-caffeine</i>	27	
<i>butalbital-asa-caff-codeine</i>	29	
<i>butalbital-asa-caffeine</i>	27	
<i>butorphanol tartrate</i>	29	
<i>BUTRANS</i>	29	
<i>BYDUREON</i>	55	
<i>BYDUREON BCISE</i>	55	
<i>BYETTA 10 MCG PEN</i>	55	
<i>BYETTA 5 MCG PEN</i>	55	
<i>BYNFEZIA PEN</i>	140	
<i>BYSTOLIC</i>	98	
<i>cabergoline</i>	140	
<i>CABLIVI</i>	153	
<i>CABOMETYX</i>	79	
<i>CAFERGOT</i>	182	
<i>caffeine citrate</i>	17	
<i>CALAN SR</i>	99	
<i>CALCIFOL</i>	184	
<i>calcipotriene</i>	117	
<i>calcipotriene-betameth diprop.</i>	117	
<i>calcitonin (salmon)</i>	140	
<i>Calcitrene</i>	117	
<i>calcitriol</i>	140	
<i>calcium-folic acid plus d</i>	184	
<i>CALQUENCE</i>	79	
<i>CAMBIA</i>	182	
<i>Camila</i>	105	
<i>Camrese</i>	105	
<i>Camrese Lo</i>	105	
<i>CANASA</i>	148	
<i>candesartan cilexetil</i>	71	
<i>candesartan cilexetil-hctz</i>	72	
<i>capecitabine</i>	79	
<i>CAPEX</i>	117	
<i>CAPLYTA</i>	89	
<i>CAPRELSA</i>	79	
<i>captopril</i>	72	
<i>CARAC</i>	117	
<i>CARAFAFE</i>	218	
<i>CARBAGLU</i>	140	
<i>carbamazepine</i>	46	
<i>carbamazepine er</i>	46	
<i>CARBATROL</i>	46	
<i>carbidopa</i>	86	
<i>carbidopa-levodopa</i>	86	
<i>carbidopa-levodopa er</i>	86	
<i>carbidopa-levodopa-entacapone</i>	86	
<i>carbinoxamine maleate</i>	66	
CARDIOCOM LANCING		
<i>DEVICE</i>	166	
<i>CARDIZEM</i>	99	
<i>CARDIZEM CD</i>	99	
<i>CARDIZEM LA</i>	99	
<i>CARDURA</i>	72	
<i>CARDURA XL</i>	151	
<i>careone advanced lancing dev</i>	166	
CAREONE BLOOD		
<i>GLUCOSE TEST</i>	130	
<i>careone unifine pentips</i>	166	
<i>careone unifine pentips plus</i>	166	
<i>CARESENS CONTROL A</i>	166	
CARESENS N GLUCOSE		
<i>TEST</i>	130	
<i>CARETOUCH TEST</i>	130	
<i>CARIMUNE NF</i>	206	
<i>carisoprodol</i>	195	
<i>carisoprodol-aspirin-codeine</i>	195	
<i>CARNITOR</i>	140	
<i>CARNITOR SF</i>	140	
<i>CAROSPIR</i>	139	
<i>carteolol hcl</i>	200	
<i>Cartia Xt</i>	99	
<i>carvedilol</i>	98	
<i>carvedilol phosphate er</i>	98	
<i>CASODEX</i>	79	
<i>CATAPRES</i>	72	
<i>CATAPRES-TTS-1</i>	72	
<i>CATAPRES-TTS-2</i>	72	
<i>CATAPRES-TTS-3</i>	72	
<i>CAYA</i>	166	
<i>CAYSTON</i>	75	
<i>Caziant</i>	105	
<i>cefaclor</i>	103	
<i>cefaclor er</i>	103	
<i>cefadroxil</i>	103	
<i>cefdinir</i>	103	
<i>cefixime</i>	103	
<i>cefodoxime proxetil</i>	103	
<i>cefprozil</i>	103	
<i>cefuroxime axetil</i>	103	
<i>CELEBREX</i>	22	
<i>celecoxib</i>	22	
<i>CELEXA</i>	51	
<i>CELLCEPT</i>	186	
<i>CELONTIN</i>	46	
<i>CENTANY</i>	117	
CENTRUM SPECIALIST		
<i>PRENATAL</i>	189	
<i>cephalexin</i>	103	
<i>CEQUA</i>	200	
<i>CERDELGA</i>	157	
<i>CEREZYME</i>	157	
<i>CERVIDIL</i>	206	
<i>Cesia</i>	105	
<i>cetirizine hcl</i>	67	
<i>cetirizine-pseudoephedrine er</i>	114	
<i>CETRAXAL</i>	206	
<i>cevimeline hcl</i>	189	
<i>CHANTIX</i>	210	
CHANTIX CONTINUING		
<i>MONTH PAK</i>	210	
CHANTIX STARTING		
<i>MONTH PAK</i>	211	
<i>Chateal</i>	105	
<i>Chateal Eq</i>	105	
<i>CHEMET</i>	63	
<i>CHEMSTRIP 10 MD</i>	130	
<i>CHEMSTRIP 10/SG</i>	131	
<i>CHEMSTRIP 2 GP</i>	131	
<i>CHEMSTRIP 5 OB</i>	131	
<i>CHEMSTRIP 7</i>	131	
<i>CHEMSTRIP 9</i>	131	
<i>CHEMSTRIP K</i>	131	
<i>CHEMSTRIP MICRAL</i>	131	
<i>CHEMSTRIP UGK</i>	131	
<i>CHENODAL</i>	148	
<i>childrens aspirin</i>	27	
<i>childrens aspirin low strength</i>	27	
<i>childrens loratadine</i>	67	
<i>chlordiazepoxide hcl</i>	38	
<i>chlorhexidine gluconate</i>	189	
<i>chloroquine phosphate</i>	77	

<i>chlorpromazine hcl</i>	89	CLEVER CHEK AUTO-	<i>codeine sulfate</i>	29
<i>chlorthalidone</i>	139	CODE TEST	<i>coditussin ac</i>	114
<i>chlorzoxazone</i>	195	CLEVER CHEK AUTO-	COLAZAL	148
CHOLBAM	148	CODE VOICE	<i>colchicine</i>	152
<i>cholestyramine</i>	68	CLEVER CHEK TEST	<i>colchicine-probenecid</i>	152
<i>cholestyramine light</i>	68	CLEVER CHOICE AUTO-	COLCRYS	152
Ciclodan	117	CODE TEST	<i>colesevelam hcl</i>	68
<i>ciclopirox</i>	117	CLEVER CHOICE	COLESTID	68
<i>ciclopirox olamine</i>	117	GLUCOSE CONTROL	COLESTID FLAVORED	68
<i>cidofovir</i>	92	CLEVER CHOICE MICRO	<i>colestipol hcl</i>	68
<i>cilostazol</i>	153	TEST	COLY-MYCIN M	76
CILOXAN	200	CLEVER CHOICE NO	COMBIGAN	200
CIMDUO	92	CODING	COMBIPATCH	146
<i>cimetidine</i>	218	CLEVER CHOICE TALK	COMBIVENT RESPIMAT	41
<i>cimetidine hcl</i>	218	SYSTEM	COMBIVIR	92
CIMZIA	148	<i>clickfine pen needles</i>	COMETRIQ (100 MG	
CIMZIA PREFILLED	148	CLIMARA	DAILY DOSE)	79
CIMZIA STARTER KIT	148	CLIMARA PRO	COMETRIQ (140 MG	
CINQAIR	41	Clindacin Etz	DAILY DOSE)	79
CINRYZE	153	Clindacin-P	COMETRIQ (60 MG DAILY	
CIPRO	147	CLINDAGEL	DOSE)	80
CIPRO HC	206	<i>clindamycin hcl</i>	COMFORT EZ INSULIN	
CIPRODEX	206	<i>clindamycin palmitate hcl</i>	SYRINGE	167
<i>ciprofloxacin hcl</i>	147, 200	<i>clindamycin phos-benzoyl</i>	COMFORT EZ PEN	
<i>ciprofloxacin-dexamethasone</i>	206	perox	NEEDLES	167
<i>ciprofloxacin-fluocinolone pf</i>	206	<i>clindamycin phosphate</i>	COMPLERA	92
<i>citalopram hydrobromide</i>	51	<i>clindamycin-tretinoin</i>	<i>completenate</i>	190
CITRANATAL 90 DHA	189	CLINDESSE	Compro	89
CITRANATAL B-CALM	189	<i>clobazam</i>	COMTAN	86
CITRANATAL BLOOM	190	<i>clobetasol propionate</i>	CO-NATAL FA	190
CITRANATAL DHA	190	<i>clobetasol propionate e</i>	CONCEPT DHA	190
CITRANATAL ESSENCE	190	<i>clobetasol propionate emulsion</i>	CONCEPT OB	190
CITRANATAL HARMONY	190	CLOBEX	CONCERTA	17
CITRANATAL MEDLEY	190	CLOBEX SPRAY	CONDYLOX	118
CITRANATAL RX	190	CLODERM	CONJUPRI	99
Claravis	117	<i>clomipramine hcl</i>	CONSENSI	100
CLARINEX	67	<i>clonazepam</i>	<i>constulose</i>	160
CLARINEX-D 12 HOUR	114	<i>clonidine hcl</i>	CONTOUR NEXT TEST	131
<i>clarithromycin</i>	161	<i>clonidine hcl er</i>	CONTOUR TEST	131
<i>clarithromycin er</i>	161	<i>clopidogrel bisulfate</i>	<i>control</i>	167
CLARITIN	67	<i>clorazepate dipotassium</i>	CONZIP	29
CLARITIN EYE	200	<i>clotrimazole</i>	COOL BLOOD GLUCOSE	
CLARITIN REDITABS	67	<i>clotrimazole-betamethasone</i>	TEST STRIPS	131
CLARITIN-D 12 HOUR	114	<i>clozapine</i>	COPAXONE	211
CLARITIN-D 24 HOUR	114	CLOZARIL	COPIKTRA	80
<i>clemastine fumarate</i>	67	<i>c-nate dha</i>	CORDRAN	118
CLENPIQ	160	<i>co monitor replacement pieces</i>	COREG	98
CLEOCIN	75, 76, 221	COAGADEX	COREG CR	98
CLEOCIN-T	117	COAGUCHEK LANCETS..	Coremino	216
		COARTEM	CORGARD	98

CORIFACT	154	cyclobenzaprine hcl.....	195	DEPAKOTE.....	46
CORLANOR	101, 102	cyclobenzaprine hcl er.....	195	DEPAKOTE ER	46
CORTANE-B.....	118	CYCLOGYL.....	200	DEPAKOTE SPRINKLES....	46
CORTEF	112	CYCLOMYDRIL.....	200	DEPEN TITRATABS.....	187
CORTENEMA.....	36	cyclopentolate hcl.....	201	DEPO-PROVERA.....	105, 106
CORTIFOAM.....	36	cyclophosphamide.....	80	DEPO-SUBQ PROVERA	
<i>cortisone acetate</i>	112	cycloserine.....	78	104.....	106
CORTISPORIN.....	118, 119	CYCLOSET.....	55	DERMA-SMOOTH/E/FS	
CORVITA.....	190	cyclosporine.....	186, 187	BODY	119
COSENTYX.....	119	cyclosporine modified.....	186, 187	DERMA-SMOOTH/E/FS	
COSENTYX (300 MG		CYMBALTA.....	51	SCALP	119
DOSE).....	119	cyproheptadine hcl.....	67	Dermazene.....	119
COSENTYX		CYSTADANE.....	140	DERMOTIC	206
SENSOREADY (300 MG)...	119	CYSTADROPS.....	201	DESCOZY	93
COSENTYX		CYSTAGON.....	151	DESFERAL	64
SENSOREADY PEN.....	119	CYSTARAN.....	201	<i>desipramine hcl</i>	51
COSOPT	200	CYSTOGRAFIN-DILUTE..	131	<i>desloratadine</i>	67
COSOPT PF.....	200	CYTOGAM.....	207	<i>desmopressin ace spray refrigerated</i>	141
COTELLIC.....	80	CYTOMEL.....	217	<i>desmopressin acetate</i>	141
COTEMPLA XR-ODT	17	CYTOTEC	218	<i>desmopressin acetate spray</i>	141
COZAAR	72	<i>cytra k crystals</i>	151	<i>desogestrel-ethynodiol dihydrogesterone</i>	106
CREON	138	CYTRA-3.....	151	DESONATE	119
CRESEMBA	65	D.H.E. 45.....	183	<i>desonide</i>	119
CRESTOR	68	<i>dalfampridine er</i>	211	DESOWEN	119
CRINONE	222	DALIRESP	41	<i>desoximetasone</i>	119, 120
CRIXIVAN	92	<i>danazol</i>	35	DESOXYN	17
<i>cromolyn sodium</i>	41, 148, 200	DANTRIUM.....	196	<i>desvenlafaxine er</i>	51
CROTAN.....	119	<i>dantrolene sodium</i>	196	<i>desvenlafaxine succinate er</i>	51
Cryselle-28.....	105	<i>dapsone</i>	76, 119	DETROL	221
CUPRIMINE	186	DARAPRIM	77	DETROL LA	221
CURITY ALCOHOL PREPS		<i>darifenacin hydrobromide er</i> ...	221	DEX4	55
.....	167	Dasetta 1/35.....	105	DEX4 GLUCOSE	55
CURITY ALCOHOL		Dasetta 7/7/7.....	105	DEX4 NATURALS	55
SWABS.....	167	DAURISMO	80	DEX4 POUCH PACK	55
Curity Sterile Saline.....	151	DAYPRO	22	DEX4 QUICK DISSOLVE	
CUTAQUIG	207	Daysee	105	GLUCOSE	55
CUTIVATE	119	DAYTRANA	17	<i>dexamethasone</i>	112
CUVITRU	207	DAYVIGO	159	DEXAMETHASONE	
CUVPOSA	218	D-CARE BLOOD		INTENSOL	112
CVS ADVANCED		GLUCOSE	131	<i>dexamethasone sodium</i>	
GLUCOSE TEST	131	DDAVP	140, 141	<i>phosphate</i>	201
<i>cvs allergy eye drops</i>	200	deferasirox	64	<i>dexchlorpheniramine maleate</i>	67
<i>cvs glucose</i>	55	deferasirox granules	64	DEXCOM G4 PLAT PED	
<i>cvs glucose bits</i>	55	defeprinol	64	RCV/S/SHARE	167
<i>cvs glucose shot</i>	55	deferoxamine mesylate	64	DEXCOM G4 PLAT PED	
CVS KETONE CARE	131	DELSTRIGO	93	RECEIVER	167
<i>cvs lancing device</i>	167	DELZICOL	148	DEXCOM G4 PLATINUM	
<i>cvs prenatal gummy</i>	190	<i>demeclocycline hcl</i>	216	RCV/S/SHARE	167
Cyclafem 1/35.....	105	DEM SER	72	DEXCOM G4 PLATINUM	
Cyclafem 7/7/7	105	DENA VIR	119	RECEIVER	167

DEXCOM G4 PLATINUM TRANSMITTER	167	DIFFERIN	120	doxycycline	120
DEXCOM G4 SENSOR	167	DIFICID	161	doxycycline hyclate	216
DEXCOM G5 MOB/G4 PLAT SENSOR	167	DIFIL-G FORTE	41	doxycycline monohydrate	216
DEXCOM G5 MOBILE RECEIVER	167	<i>diflorasone diacetate</i>	120	doxylamine-pyridoxine	65
DEXCOM G5 MOBILE TRANSMITTER	167	DIFLUCAN	65	DRISDOL	223
DEXCOM G5 RECEIVER KIT	167	<i>dilfunisal</i>	27	DRIZALMA SPRINKLE	51
DEXCOM G6 RECEIVER..	167	Digitek	101	<i>dronabinol</i>	65
DEXCOM G6 SENSOR	167	Digox	101	DROPLET LANCING DEVICE	168
DEXCOM G6 TRANSMITTER.....	167	<i>digoxin</i>	101	<i>drospiren-eth estrad-levomefol</i>	106
DEXEDRINE	17	<i>dihydroergotamine mesylate</i>	183	<i>drospirenone-ethinyl estradiol.</i>	106
DEXILANT	219	DILANTIN	46	DROXIA	157
<i>dexamethylphenidate hcl</i>	17	DILANTIN INFATABS	46	DRUG MART LANCING DEVICE	168
<i>dexamethylphenidate hcl er</i>	17	DILATRATE-SR	37	<i>drug mart unifine pentips</i>	168
<i>dextroamphetamine sulfate</i>	17	DILAUDID	29	DUAKLIR PRESSAIR	41
<i>dextroamphetamine sulfate er</i>	17	<i>diltiazem hcl</i>	100	DUAVEE	146
DIACOMIT	46	<i>diltiazem hcl er</i>	100	DUET DHA 400	190
Dialyvite	190	<i>diltiazem hcl er beads</i>	100	DUET DHA BALANCED	190
DIALYVITE 3000	190	<i>diltiazem hcl er coated beads</i>	100	DUETACT	55
DIALYVITE 5000	190	<i>dilt-xr</i>	100	DUEXIS	22
DIALYVITE SUPREME D.	190	<i>dimethyl fumarate</i>	211	DULERA	41
DIALYVITE/ZINC	190	DIOVAN	72	<i>duloxetine hcl</i>	51
DIASTAT ACUDIAL	46	DIOVAN HCT	72	DUOBRII	120
DIASTAT PEDIATRIC	46	DIPENTUM	148	DUO-CARE CONTROL SOLUTION	168
DIASTIX	131	<i>diphenoxylate-atropine</i>	63	DUO-CARE TEST	132
DIATHRIVE BLOOD GLUCOSE TEST	132	DIPROLENE	120	DUOPA	87
<i>diatruie control level 1</i>	167	DIPROLENE AF	120	DUPIXENT	120
<i>diatruie control level 2</i>	167	<i>dipyridamole</i>	154	DURAGESIC-100	29
<i>diatruie control level 3</i>	168	<i>disopyramide phosphate</i>	38	DURAGESIC-12	29
<i>diatruie plus test</i>	132	<i>disulfiram</i>	211	DURAGESIC-25	29
<i>diazepam</i>	38	DITROPAN XL	221	DURAGESIC-50	29
Diazepam Intensol	38	DIURIL	139	DURAGESIC-75	29
<i>diazoxide</i>	55	<i>divalproex sodium</i>	46	DUREZOL	201
DIBENZYLINE	72	<i>divalproex sodium er</i>	46	DURLAZA	154
DICLEGIS	64	DIVIGEL	146	DUROLANE	196
<i>diclofenac</i>	22	<i>docosanol</i>	120	<i>dutasteride</i>	151
<i>diclofenac epolamine</i>	120	<i>dofetilide</i>	38	<i>dutasteride-tamsulosin hcl</i>	151
<i>diclofenac potassium</i>	22	DOLOPHINE	29	DUTOPROL	72
<i>diclofenac sodium</i>	22, 120, 201	<i>donepezil hcl</i>	211	DXEVO 11-DAY	112
<i>diclofenac sodium er</i>	22	DOPTELET	157	DYANAVEL XR	17
<i>diclofenac-misoprostol</i>	22	DORAL	159	DYAZIDE	139
<i>dicloxacillin sodium</i>	209	DORYX	216	DYMISTA	197
<i>dicyclomine hcl</i>	219	DORYX MPC	216	DYRENIUM	139
<i>didanosine</i>	93	<i>dorzolamide hcl</i>	201	DYSPORT	198
		<i>dorzolamide hcl-timolol mal</i>	201	E.E.S. 400	162
		<i>dorzolamide hcl-timolol mal pf</i>	201	E.E.S. GRANULES	162
		DOVATO	93	<i>easy comfort insulin syringe</i>	168
		DOVONEX	120	<i>easy comfort pen needles</i>	168
		<i>doxazosin mesylate</i>	72		
		<i>doxepin hcl</i>	51, 120, 159		
		<i>doxercalciferol</i>	141		

easy mini lancing device	168	EFLOW SCF AEROSOL	
easy plus ii control.....	168	HEAD.....	169
easy plus ii glucose test	132	EFUDEX.....	120
EASY STEP CONTROL.....	168	ELAPRASE.....	141
EASY STEP TEST.....	132	ELELYSO.....	157
easy talk blood glucose test	132	element compact control 2	169
easy talk control.....	168	element compact control 3	169
EASY TOUCH ALCOHOL		element compact test	132
PREP MEDIUM.....	168	ELEMENT CONTROL.....	169
EASY TOUCH CONTROL		ELEMENT TEST.....	132
HIGH & LOW	168	ELESTRIN.....	146
EASY TOUCH INSULIN		eletriptan hydrobromide	183
SAFETY SYR	168	ELIDEL.....	120
EASY TOUCH INSULIN		ELIGARD.....	80
SYRINGE.....	168	ELIMITE.....	120
EASY TOUCH LANCING		Elinest.....	106
DEVICE.....	168	ELIQUIS.....	44
EASY TOUCH PEN		ELIQUIS DVT/PE	
NEEDLES.....	168	STARTER PACK.....	44
EASY TOUCH TEST	132	ELITE-OB.....	190
easy trak blood glucose test	132	ELIXOPHYLLIN.....	41
easy trak control.....	168	ELLA.....	106
EASYGLUCO	132	ELMIRON.....	151
EASYGLUCO CONTROL..	168	ELOCTATE.....	154
EASYGLUCO PLUS.....	132	Eluryng.....	106
EASymax 15 LEVEL 2		EMBRACE BLOOD	
CONTROL.....	168	GLUCOSE TEST	132
EASymax 15 TEST	132	EMBRACE CONTROL.....	169
EASymax CONTROL.....	168	EMBRACE EVO BLOOD	
EASymax TEST	132	GLUCOSE TEST	132
EASyPRO BLOOD		EMBRACE PRO GLUCOSE	
GLUCOSE TEST	132	TEST.....	132
EASyPRO PLUS.....	132	EMBRACE TALK	
econazole nitrate.....	120	GLUCOSE TEST	132
ECOTRIN LOW		EMCYT.....	80
STRENGTH.....	27	EMEND.....	65
ECOZA.....	120	EMFLAZA.....	112, 113
EDARBI.....	72	EMGALITY	183
EDARBYCLOR.....	72	EMGALITY (300 MG	
EDECRIN.....	139	DOSE).....	183
EDLUAR.....	159	Emoquette.....	106
EDURANT.....	93	EMSAM.....	51
efavirenz.....	93	emtricitabine	93
efavirenz-emtricitab-tenofovir ..	93	emtricitabine-tenofovir df	93
efavirenz-lamivudine-tenofovir ..	93	EMTRIVA.....	93
EFFER-K.....	184	EMVERM.....	36
Effer-K.....	185	ENABLEX.....	221
EFFEXOR XR.....	51	enalapril maleate	72
EFFIENT	154	enalapril-hydrochlorothiazide ...	72
		ENBREL.....	22
		ENBREL MINI.....	22
		ENBREL SURECLICK	22
		ENDARI.....	157
		Endocet.....	30
		ENDOMETRIN	222
		ENLITE GLUCOSE	
		SENSOR.....	169
		enoxaparin sodium	44, 45
		Enpresse-28	106
		Enskyce	106
		ENSPRYNG	187
		ENSTILAR	120
		entacapone	87
		entecavir	93
		ENTOCORT EC	113
		ENTRESTO	102
		ENTYVIO	148
		enulose	148
		ENVARSUS XR	187
		EPANED	72
		EPCLUSA	93
		EPIDIOLEX	47
		EPIDUO	120
		EPIDUO FORTE	120
		EPIFOAM	121
		epinastine hcl	201
		epinephrine	223
		EPIPEN 2-PAK	223
		EPIPEN JR 2-PAK	223
		Epitol	47
		EPIVIR	93
		EPIVIR HBV	93
		eplerenone	72
		EPOGEN	157
		epoprostenol sodium	102
		EPZICOM	93
		eq allergy relief	67
		eq blood glucose test	132
		EQUETRO	89
		ergocal	223
		ergocalciferol	223
		ergoloid mesylates	211
		ERGOMAR	183
		ergotamine-caffeine	183
		ERIVEDGE	80
		ERLEADA	80
		erlotinib hcl	80
		Errin	106
		ERTACZO	121
		ery	121

ERYGEL	121	EVENITY	141	FELBATOL	47
ERYPED 200	162	<i>everolimus</i>	80, 187	FELDENE	23
ERYPED 400	162	EVISTA	141	<i>felodipine er</i>	100
Ery-Tab	162	EVOCLIN	121	FEMARA	80
ERYTHROCIN STEARATE	162	EVOLUTION AUTOCODE	133	FEMCAP	169
<i>erythromycin</i>	121, 201	EVOLUTION CONTROL	169	FEMHRT LOW DOSE	146
<i>erythromycin base</i>	162	EVOTAZ	93	FEMRING	222
<i>erythromycin ethylsuccinate</i>	162	EVOXAC	189	<i>fenofibrate</i>	69
<i>erythromycin stearate</i>	162	EVRYSDI	198	<i>fenofibrate micronized</i>	69
ESBRIET	215	EXACTECH R-S-G TEST	133	<i>fenofibric acid</i>	69
<i>escitalopram oxalate</i>	51	EXACTECH TEST	133	FENOGLIDE	69
ESGIC	27	EXELDERM	121	<i>fenoprofen calcium</i>	23
<i>esomeprazole magnesium</i>	219	EXELON	211	FENORTHO	23
ESPEROCT	154	<i>exemestane</i>	80	FENSOLVI (6 MONTH)	141
Estarrylla	106	EXFORGE	73	fentanyl	30
<i>estazolam</i>	159	EXFORGE HCT	73	<i>fentanyl citrate</i>	30
ESTRACE	146, 222	EXJADE	64	FENTORA	30
<i>estradiol</i>	146, 222	EXTAVIA	211	FERREX 150 FORTE PLUS	157
<i>estradiol-norethindrone acet</i>	146	EXTINA	121	FERRIPROX	64
ESTRING	222	<i>eye itch relief</i>	201	FERRIPROX TWICE-A-	
ESTROGEL	146	EYLEA	201	DAY	64
ESTROSTEP FE	106	EZ SMART BLOOD		FERRLECIT	157
<i>eszopiclone</i>	160	GLUCOSE TEST	133	FETZIMA	51
<i>ethacrylic acid</i>	139	EZ SMART PLUS		FETZIMA TITRATION	52
<i>ethambutol hcl</i>	78	GLUCOSE TEST	133	FEXMID	196
<i>ethosuximide</i>	47, 104	EZALLOR SPRINKLE	68	<i>fexofenadine hcl</i>	67
<i>etodolac</i>	22, 23	<i>ezetimibe</i>	68	<i>fexofenadine-pseudoephed er</i>	114
<i>etodolac er</i>	22	<i>ezetimibe-simvastatin</i>	69	FIASP	55
<i>etoposide</i>	80	E-Z-HD	133	FIASP FLEXTOUCH	55
EUCRISA	121	E-Z-PAQUE	133	FIASP PENFILL	55
EUFLEXXA	196	FA-8	157	FIBRYGA	154
Euthyrox	217	FABIOR	121	FIFTY50 ALCOHOL PREP	169
EVAMIST	146	FABRAZYME	141	FIFTY50 GLUCOSE TEST	
EVEKEO	17	Falmina	106	2.0	133
EVEKEO ODT	17	<i>famciclovir</i>	93	FIFTY50 PEN NEEDLES	169
EVCARE + BLOOD		<i>famotidine</i>	219	FIFTY50 SUPERIOR	
GLUCOSE TEST	132	FANAPT	89	COMFORT SYR	169
EVCARE BLOOD		FANAPT TITRATION		<i>filter air pp</i>	169
GLUCOSE TEST	132	PACK	89	FINACEA	121
EVCARE CONTROL		FARESTON	80	<i>finasteride</i>	151
LOW/HIGH	169	FARXIGA	55	FINTEPLA	47
EVCARE G2		FARYDAK	80	FIORICET	27
LOW/HIGH CONTROL	169	FASENRA PEN	41	FIORICET/CODEINE	30
EVCARE G2 TEST	132	FASLODEX	80	FIORINAL	27
EVCARE G3		<i>favipiravir</i>	93	FIORINAL/CODEINE #3	30
LOW/HIGH CONTROL	169	Fayosim	106	FIRAZYR	154
EVCARE G3 TEST	132	FC FEMALE CONDOM	169	FIRDAPSE	78
EVCARE MINI		FC2 FEMALE CONDOM	169	FIRMAGON	80
GLUCOSE TEST	132	<i>febuxostat</i>	152	FIRMAGON (240 MG	
		<i>felbamate</i>	47	DOSE)	80

FIRVANQ.....	76	folate.....	157	fosamprenavir calcium.....	93
FLAGYL.....	76	folbee plus.....	191	fosinopril sodium.....	73
FLAREX.....	201	FOLBEE PLUS CZ.....	191	fosinopril sodium-hctz	73
flavoxate hcl.....	221	FOLGARD OS.....	191	FOSRENOL.....	148
FLEBOGAMMA DIF	207	folic acid.....	157	FRAGMIN	45
flecainide acetate.....	38	FOLIVANE-OB.....	191	freds pharmacy autolet lancing	169
FLECTOR.....	121	fondaparinux sodium.....	45	freds pharmacy unifine pentip+	
FLOLAN.....	102	FORA BLOOD GLUCOSE		.....	169
flolipid.....	69	TEST	133	freds pharmacy unifine pentips	169
FLOMAX.....	151	FORA CONTROL.....	169	FREESTYLE CONTROL	
FLONASE ALLERGY		FORA D15G BLOOD		SOLUTION	170
RELIEF.....	197	GLUCOSE TEST	133	FREESTYLE INSULINX	
FLORIVA.....	185	FORA D20 BLOOD		TEST	134
FLOVENT DISKUS.....	41	GLUCOSE TEST	133	FREESTYLE LANCETS....	170
FLOVENT HFA.....	41	FORA D40/G31 BLOOD		FREESTYLE LIBRE 14	
fluconazole.....	65	GLUCOSE	133	DAY READER	170
flucytosine.....	65	FORA G20 BLOOD		FREESTYLE LIBRE 14	
fludrocortisone acetate	113	GLUCOSE TEST	133	DAY SENSOR	170
flunisolide	197	FORA G30/PREM V10		FREESTYLE LITE TEST ...	134
fluocinolone acetonide	121, 206	GLUCOSE TEST	133	FREESTYLE PRECISION	
fluocinolone acetonide body....	121	FORA GD20 TEST	133	INS SYR	170
fluocinolone acetonide scalp....	121	FORA GD50 BLOOD		FREESTYLE PRECISION	
fluocinonide	121	GLUCOSE TEST	133	NEO TEST	134
FLUORABON.....	185	FORA GTEL BLOOD		FREESTYLE TEST	134
fluoritab.....	185	GLUCOSE TEST	133	FROVA	183
fluorometholone	201	FORA LANCING DEVICE	169	frovatriptan succinate	183
FLUOROPLEX.....	121	FORA TN'G/TN'G VOICE..	133	full kit nebulizer set	170
fluorouracil.....	121	FORA V10 BLOOD		FULPHILA	157
fluoxetine hcl.....	52	GLUCOSE TEST	133	fulvestrant	80
fluoxetine hcl (pmdd)	211	FORA V12 BLOOD		furosemide	139
fluphenazine decanoate	89	GLUCOSE TEST	133	FUZEON	93
fluphenazine hcl.....	89	FORA V20 BLOOD		FYCOMPA	47
FLURA-DROPS.....	185	GLUCOSE TEST	134	gabapentin	47
flurandrenolide	121	FORA V30A BLOOD		GABITRIL	47
FLURA-SAFE.....	201	GLUCOSE TEST	134	GALAFOLD	141
flurazepam hcl.....	160	FORACARE GD40 TEST	134	galantamine hydrobromide	211
flurbiprofen.....	23	FORACARE GDH		galantamine hydrobromide er ..	211
flurbiprofen sodium.....	201	CONTROL	169	GALZIN	185
flutamide	80	FORACARE PREMIUM		GAMASTAN	207
fluticasone propionate	121	V10 TEST	134	GAMMAGARD	207
fluticasone-salmeterol.....	42	FORACARE TEST N GO		GAMMAGARD S/D LESS	
fluvastatin sodium.....	69	TEST	134	IGA	207
fluvastatin sodium er	69	FORANE	150	GAMMAKED	207
fluvoxamine maleate	52	FORFIVO XL	52	GAMMAPLEX	207
fluvoxamine maleate er	52	FORTAMET	56	GAMUNEX-C	207
FML.....	201	FORTEO	141	ganciclovir sodium	93
FML FORTE.....	201	FORTESTA	35	GASTROCROM	148
FML LIQUIFILM.....	201	FORTISCARE TEST	134	gatifloxacin	201
FOCALIN.....	17	FOSAMAX	141	GATTEX	148
FOCALIN XR.....	18	FOSAMAX PLUS D	141	gavilax	160

GAVILYTE-C.....	160	GLUCO BURST	56	<i>goodsense blood glucose</i>	135
Gavilyte-H.....	160	GLUCO PERFECT 3 TEST.	134	<i>goodsense nicotine</i>	211
Gavilyte-N With Flavor Pack	161	GLUCOCARD 01		GORDOFILM.....	122
GAVRETO.....	81	CONTROL.....	170	GRALISE.....	211
<i>ge100 blood glucose test</i>	134	GLUCOCARD 01 SENSOR		<i>gransetron hcl</i>	65
<i>ge100 control</i>	170	PLUS.....	134	GRANIX.....	157
GEBAUERS PAIN EASE....	122	GLUCOCARD		GRASTEK.....	20
GELFILM.....	201	EXPRESSION CONTROL..	170	<i>griseofulvin microsize</i>	65
GELNIQUE.....	221	GLUCOCARD		<i>griseofulvin ultramicrosize</i>	66
GEL-ONE.....	196	EXPRESSION TEST	134	<i>guanfacine hcl</i>	73
GELSYN-3.....	196	GLUCOCARD SHINE		<i>guanfacine hcl er</i>	18
<i>gemfibrozil</i>	69	CONTROL.....	170	<i>guanidine hcl</i>	78
GENERESS FE.....	106	GLUCOCARD SHINE		GUARDIAN CONNECT	
<i>generlac</i>	148	TEST.....	134	TRANSMITTER.....	171
Gengraf.....	187	GLUCOCARD VITAL		GUARDIAN LINK 3	
GENICIN VITA-Q.....	191	TEST.....	134	TRANSMITTER.....	171
GENOTROPIN.....	141	GLUCOCARD X-SENSOR.	134	GUARDIAN REAL-TIME	
GENOTROPIN		GLUCOCARD X-SENSOR		REPLACE PED.....	171
MINIQUICK.....	141	CONTROL.....	170	GUARDIAN SENSOR (3)...	171
GENTAK.....	201	GLUCOCOM CONTROL...	170	GVOKE HYPOOPEN 1-	
<i>gentamicin sulfate</i>	122, 201	GLUCOCOM TEST	134	PACK.....	57
GENTLE-LET		GLUCONAVII BLOOD		GVOKE HYPOOPEN 2-	
PLATFORMS.....	170	GLUCOSE TEST	134	PACK.....	57
GENULTIMATE TEST.....	134	GLUCOPRO INSULIN		GVOKE PFS.....	57
GENVOYA.....	93	SYRINGE.....	170	GYNAZOLE-1.....	222
GEODON.....	89	<i>glucose</i>	56	HAEGARDA.....	154
<i>ght test</i>	134	<i>glucose control</i>	170	Hailey 24 Fe.....	106
Gianvi.....	106	<i>glucose meter test</i>	134	<i>halcinonide</i>	122
GILENYA.....	211	GLUCOTROL.....	56	HALCION.....	160
GILOTRIF.....	81	GLUCOTROL XL.....	56	HALDOL.....	89
GIMOTI.....	148	GLUMETZA.....	56	HALDOL DECANOATE.....	89
GLASSIA.....	215	<i>glyburide</i>	56	<i>halobetasol propionate</i>	122
<i>glatiramer acetate</i>	211	<i>glyburide micronized</i>	56	HALOG.....	122
Glatopa.....	211	<i>glyburide-metformin</i>	56	<i>haloperidol</i>	89
GLEEVEC.....	81	<i>glycine</i>	151	<i>haloperidol decanoate</i>	89
GLEOSTINE.....	81	<i>glycine urologic</i>	151	<i>haloperidol lactate</i>	89
<i>glimepiride</i>	56	<i>glycopyrrolate</i>	219	HARVONI.....	94
<i>glipizide</i>	56	GLYNASE.....	56	HEALTH CARE LANCING	
<i>glipizide er</i>	56	GLYSET	56	DEVICE.....	171
<i>glipizide xl</i>	56	GLYXAMBI.....	56	<i>healthwise mini pen needles</i>	171
<i>glipizide-metformin hcl</i>	56	<i>gnp alcohol swabs</i>	170	<i>healthwise pen needles</i>	171
<i>global alcohol prep ease</i>	170	<i>gnp clickfine pen needles</i>	170	<i>healthwise short pen needles</i>	171
<i>global ease inject pen needles</i> ..	170	<i>gnp easy touch glucose test</i>	134	<i>healthwise unifine pentips</i>	171
<i>global inject ease insulin syr</i>	170	<i>gnp glucose</i>	56	<i>healthy accents lancing device</i> ..	171
<i>global lancing device</i>	170	<i>gnp quick dissolve glucose</i>	56	<i>healthy accents unifine pentip</i> . 171	
GLOPERBA.....	152	GOCOVRI.....	87	Heather.....	106
GLUCAGEN HYPOKIT.....	56	GOJJI BLOOD GLUCOSE		<i>h-e-b incontrol adv lancing</i>	171
GLUCAGON		TEST.....	135	<i>h-e-b incontrol pen needles</i>	171
EMERGENCY.....	56	GOLYTELY	161	HELIDAC THERAPY	219
<i>glucagon emergency</i>	56	GONITRO.....	37	HEMADY	113

HEMANGEOL	98	HYALGAN	196	<i>imipramine hcl</i>	52
HEMLIBRA	154	HYCAMTIN	81	<i>imipramine pamoate</i>	52
HEMOFIL M	154	<i>hydralazine hcl</i>	73	<i>imiquimod</i>	122
HEPAGAM B	207	HYDREA	81	<i>imiquimod pump</i>	122
<i>heparin sodium (porcine)</i>	45	<i>hydrochlorothiazide</i>	139	IMITREX	183
<i>heparin sodium (porcine) pf</i>	45	<i>hydrocod polst-cpm polst er</i>	114	IMITREX STATDOSE	
HEPSERA	94	<i>hydrocodone bitartrate er</i>	30	REFILL	183
HETLIOZ	160	<i>hydrocodone-acetaminophen</i>	30	IMITREX STATDOSE	
Hidex 6-Day	113	<i>hydrocodone-homatropine</i>	114	SYSTEM	183
HIPREX	76	<i>hydrocodone-ibuprofen</i>	30	IMPAVIDO	76
HIZENTRA	207	<i>hydrocortisone</i>	36, 113, 122	IMPOYZ	122
<i>hm glucose</i>	57	<i>hydrocortisone ace-pramoxine</i>	36	IMURAN	187
HM ULTICARE INSULIN		<i>hydrocortisone butyr lipo base</i>	122	IMVEXXY	
SYRINGE	171	<i>hydrocortisone butyrate</i>	122	MAINTENANCE PACK	222
HOMATROPAIRE	202	<i>hydrocortisone valerate</i>	122	IMVEXXY STARTER	
HORIZANT	211	<i>hydrocortisone-acetic acid</i>	206	PACK	222
HUMALOG	57	<i>hydromet</i>	114	IN TOUCH BLOOD	
HUMALOG JUNIOR		<i>hydromorphone hcl</i>	30	GLUCOSE TEST	135
KWIKPEN	57	<i>hydromorphone hcl er</i>	30	INATAL GT	191
HUMALOG KWIKPEN	57	<i>hydroxychloroquine sulfate</i>	77	INBRIJA	87
HUMALOG MIX 50/50	57	<i>hydroxyprogesterone caproate</i>	209	INCRELEX	141
HUMALOG MIX 50/50		<i>hydroxyurea</i>	81	INCRUSE ELLIPTA	42
KWIKPEN	57	<i>hydroxyzine hcl</i>	38, 104	<i>indapamide</i>	139
HUMALOG MIX 75/25	57	<i>hydroxyzine pamoate</i>	38	INDERAL LA	98
HUMALOG MIX 75/25		HYMOVIS	196	INDERAL XL	98
KWIKPEN	57	HYPERHEP B S/D	207	INDOCIN	23
HUMATE-P	154	HYPERRAB	207	<i>indomethacin</i>	23
HUMATROPE	141	HYPERRHO S/D	208	<i>indomethacin er</i>	23
HUMIRA	23	HYPERSAL	114	INFINITY BLOOD	
HUMIRA PEDIATRIC		HYPERTET S/D	208	GLUCOSE TEST	135
CROHNS START	23	HYPOLANCE AST		INFINITY CONTROL	171
HUMIRA PEN	23	LANCING	171	INFINITY VOICE	135
HUMIRA PEN-CD/UC/HS		HYQVIA	208	INFLECTRA	148
STARTER	23	HYSINGLA ER	31	INGREZZA	211
HUMIRA PEN-		<i>hy-vee glucose</i>	58	<i>inject-ease</i>	171
PS/UV/ADOL HS START	23	HYZAAR	73	INLYTA	81
HUMULIN 70/30	57	<i>ibandronate sodium</i>	141	INNOPRAN XL	98
HUMULIN 70/30		IBRANCE	81	INNOSPIRE	
KWIKPEN	57	Ibu	23	REPLACEMENT FILTER	171
HUMULIN N	57	<i>ibuprofen</i>	23	INQOVI	81
HUMULIN N KWIKPEN	57	<i>icatibant acetate</i>	154	INREBIC	81
HUMULIN R	58	ICLUSIG	81	INSPIREASE RESERVOIR	
HUMULIN R U-500		IDELVION	154	BAGS	171
(CONCENTRATED)	58	IDHIFA	81	INSPRA	73
HUMULIN R U-500		IGLUCOSE TEST STRIPS	135	<i>insulin asp prot & asp flexpen</i>	58
KWIKPEN	58	ILARIS	23	<i>insulin aspart</i>	58
HW EMBRACE PRO		ILEVRO	202	<i>insulin aspart flexpen</i>	58
GLUCOSE TEST	135	ILUMYA	122	<i>insulin aspart penfill</i>	58
HW EMBRACE TALK		<i>imatinib mesylate</i>	81	<i>insulin aspart prot & aspart</i>	58
GLUCOSE TEST	135	IMBRUVICA	81	<i>insulin lispro</i>	58

<i>insulin lispro (1 unit dial)</i>	58	JANUMET	58	KINERET	24
<i>insulin lispro junior kwikpen</i>	58	JANUMET XR	58	Kionex	187
<i>insulin lispro prot & lispro</i>	58	JANUVIA	58	KISQALI FEMARA (400 MG DOSE)	81
<i>insulin syringe</i>	171	JARDIANC	59	KISQALI FEMARA (600 MG DOSE)	82
<i>insulin syringe/needle</i>	171	Jasmiel	107	KISQALI FEMARA(200 MG DOSE)	82
<i>insulin syringe-needle u-100</i>	171	JATENZO	35	KLARON	123
<i>insupen pen needles</i>	172	Jencycla	107	KLONOPIN	47
INSUPEN SENSITIVE	172	JENTADUETO	59	Klor-Con	185
INSUPEN ULTRAFIN	172	JENTADUETO XR	59	Klor-Con 10	185
INTELENCE	94	JIVI	154	Klor-Con M10	185
INTERMEZZO	160	Jolessa	107	KLOR-CON M15	185
INTRAROSA	222	JORNAY PM	18	Klor-Con M20	185
INTRON A	81	J-TIP KIT W/VIAL		Klor-Con Sprinkle	185
Introvale	106	ADAPTERS	172	Klor-Con/Ef	185
INTUNIV	18	JUBLIA	122	KLS ALLERCLEAR	67
INVEGA	90	JULUCA	94	<i>kmart valu insulin syringe 29g</i>	172
INVEGA SUSTENNA	90	Junel 1.5/30	107	<i>kmart valu insulin syringe 30g</i>	172
INVEGA TRINZA	90	Junel 1/20	107	KOATE	155
INVELTYS	202	Junel Fe 1.5/30	107	KOATE-DVI	155
INVIRASE	94	Junel Fe 1/20	107	KOGENATE FS	155
INVOKAMET	58	JUXTAPID	69	KOKO PEAK PRO	
INVOKAMET XR	58	JYNARQUE	142	MOUTHPIECE	172
INVOKANA	58	KADIAN	31	KOMBIGLYZE XR	59
IOPIDINE	202	KALBITOR	155	KORLYM	59
<i>ipratropium bromide</i>	42, 197	KALETRA	94	KOSELUGO	82
<i>ipratropium-albuterol</i>	42	KALYDECO	215	KOVALTRY	155
<i>irbesartan</i>	73	KANUMA	142	<i>kp omeprazole magnesium</i>	219
<i>irbesartan-hydrochlorothiazide</i>	73	KAPSPARGO SPRINKLE	98	K-PHOS	185
IRESSA	81	KAPVAY	18	K-PHOS NO 2	151
ISENTRESS	94	KARBINAL ER	67	K-Prime	185
ISENTRESS HD	94	Kariva	107	KRINTAFEL	77
Isibloom	107	KATERZIA	100	KRISTALOSE	161
<i>isoflurane</i>	150	KAZANO	59	<i>kroger blood glucose test</i>	135
<i>isoniazid</i>	78	KCENTRA	155	<i>kroger glucose</i>	59
ISORDIL TITRADOSE	37	KEFLEX	103	<i>kroger lancing device</i>	172
<i>isosorbide dinitrate</i>	37	Kelnor 1/35	107	<i>kroger pen needles</i>	172
<i>isosorbide mononitrate</i>	37	KENALOG	122	<i>kroger premium glucose test</i>	135
<i>isosorbide mononitrate er</i>	37	KEPPRA	47	<i>kroger test</i>	135
<i>isotretinoin</i>	122	KEPPRA XR	47	KRYSTEXXA	152
<i>isradipine</i>	100	KERR TRIPLE DYE		Kurvelo	107
INSTALOL	202	SWABS	92	KUVAN	142
ISTURISA	141	<i>ketoconazole</i>	66, 122, 123	KYLEENA	107
<i>itraconazole</i>	66	KETO-DIASTIX	135	KYNMOBI	87
<i>ivermectin</i>	36	<i>ketoprofen</i>	23	<i>labetalol hcl</i>	98
IXINITY	154	<i>ketoprofen er</i>	23	LACRISERT	202
JADENU	64	<i>ketorolac tromethamine</i>	23, 202	<i>lactated ringers</i>	187
JADENU SPRINKLE	64	KETOSTIX	135	<i>lactulose</i>	161
JAKAFI	81	<i>ketotifen fumarate</i>	202		
JALYN	151	KEVEYIS	139		
Jantoven	45	KEVZARA	23		

<i>lactulose encephalopathy</i>	148	LENVIMA (18 MG DAILY DOSE)	82	<i>lidocaine</i>	123
LAMICTAL	47	LENVIMA (20 MG DAILY DOSE)	82	<i>lidocaine hcl</i>	123
LAMICTAL ODT	47	LENVIMA (24 MG DAILY DOSE)	82	<i>lidocaine-prilocaine</i>	123
LAMICTAL STARTER	48	LENVIMA (4 MG DAILY DOSE)	82	<i>lidocaine-tetracaine</i>	123
LAMICTAL XR	48	LENVIMA (8 MG DAILY DOSE)	82	LIDODERM	123
LAMISIL	66	LESCOL XL	69	LILETTA (52 MG)	108
<i>lamivudine</i>	94	Lessina	107	<i>lindane</i>	123
<i>lamivudine-zidovudine</i>	94	LETAIRIS	102	<i>linezolid</i>	76
<i>lamotrigine</i>	48	<i>letrozole</i>	82	LINZESS	149
<i>lamotrigine er</i>	48	<i>leucovorin calcium</i>	82	<i>liothyronine sodium</i>	217
<i>lamotrigine starter kit-blue</i>	48	LEUKERAN	82	LIPITOR	69
<i>lamotrigine starter kit-green</i>	48	LEVAQUIN	147	LIPOFEN	69
<i>lamotrigine starter kit-orange</i>	48	LEVEMIR	59	LIQUID E-Z-PAQUE	135
LAMPIT	76	LEVEMIR FLEXTOUCH	59	<i>lisinopril</i>	73
<i>lancet device</i>	172	<i>levetiracetam</i>	48	<i>lisinopril-hydrochlorothiazide</i>	73
<i>lancets</i>	172	<i>levetiracetam er</i>	48	LITE TOUCH LANCING PEN	172
LANCETS ULTRA THIN	172	<i>levobunolol hcl</i>	202	LITETOUCH INSULIN SYRINGE	172
<i>lancing device</i>	172	<i>levocarnitine</i>	142	LITETOUCH MASK	
LANOXIN	101	<i>levofloxacin</i>	147, 202	LARGE	172
<i>lansoprazole</i>	219	Levonest	107	LITETOUCH MASK	
<i>lanthanum carbonate</i>	148	<i>levonorgest-eth estrad 91-day</i>	107	MEDIUM	173
LANTUS	59	<i>levonorgestrel-ethinyl estrad</i>	107	LITETOUCH MASK	
LANTUS SOLOSTAR	59	Levora 0.15/30 (28)	108	SMALL	173
Larin 1/20	107	<i>levorphanol tartrate</i>	31	LITETOUCH PEN	
Larin Fe 1.5/30	107	Levo-T	217	NEEDLES	173
Larin Fe 1/20	107	<i>levothyroxine sodium</i>	217	<i>lithium</i>	90
LASIX	139	Levoxyl	217	<i>lithium carbonate</i>	90
LASTACRAFT	202	LEVULAN KERASTICK	123	<i>lithium carbonate er</i>	90
<i>latanoprost</i>	202	LEXAPRO	52	LITHOBID	90
LATUDA	90	LEXETTE	123	LITHOSTAT	151
<i>lavare wound wash</i>	123	LEXIVA	94	LIVALO	69
LAZANDA	31	LIALDA	149	<i>live better adv lancing device</i>	173
<i>leader advanced lancing device</i>	172	LIBERTY GLUCOSE		LO LOESTRIN FE	108
<i>leader glucose</i>	59	CONTROL	172	LOCOID	123
<i>leader quick dissolve glucose</i>	59	LIBERTY GLUCOSE		LOCOID LIPOCREAM	123
LEADER UNIFINE		CONTROL MID	172	LODINE	24
PENTIPS	172	LIBERTY MINI LANCING		LODOSYN	87
LEADER UNIFINE		DEVICE	172	<i>Loestrin 1.5/30 (21)</i>	108
PENTIPS PLUS	172	LIBERTY NEXT		<i>Loestrin 1/20 (21)</i>	108
<i>ledipasvir-sofosbuvir</i>	94	GENERATION TEST	135	LOKELMA	187
Leena	107	<i>liberty test</i>	135	LOMOTIL	63
<i>leflunomide</i>	24	LIBRAX	219	<i>longs glucose</i>	59
LEMTRADA	212	LICART	123	LONHALA MAGNAIR	
LENVIMA (10 MG DAILY DOSE)	82			REFILL KIT	42
LENVIMA (12 MG DAILY DOSE)	82			LONHALA MAGNAIR	
LENVIMA (14 MG DAILY DOSE)	82			STARTER KIT	42
				LONSURF	82
				LOPID	69

<i>lopinavir-ritonavir</i>	94	Lutera	108	MEDISENSE HI/MID/LOW	
LOPRESSOR	98	LUXIQ	123	CONTROL	173
LOPRESSOR HCT	73	LUZU	123	MEDISENSE HIGH/LOW	
LOPROX	123	LYNPARZA	82	CONTROL	173
<i>loradamed</i>	67	LYRICA	48	MEDISENSE MID	
<i>loratadine</i>	67	LYRICA CR	212	CONTROL	173
<i>loratadine childrens</i>	67	LYSODREN	83	MEDROL	113
<i>loratadine-d 12hr</i>	115	LYSTEDA	159	<i>medroxyprogesterone acetate</i>	
<i>loratadine-d 24hr</i>	115	LYUMJEV	59	.....	108, 209
<i>lorazepam</i>	38	LYUMJEV KWIKPEN	59	<i>mefenamic acid</i>	24
Lorazepam Intensol	38	Lyza	108	<i>mefloquine hcl</i>	77
LORBRENA	82	MACROBID	76	<i>megestrol acetate</i>	83, 210
LORTAB	31	MACRODANTIN	76	<i>meijer alcohol swabs</i>	173
Loryna	108	MAGELLAN INSULIN		<i>meijer blood glucose test</i>	135
Lorzone	196	SAFETY SYR	173	<i>meijer essential glucose test</i>	135
<i>losartan potassium</i>	73	MAKENA	209	<i>meijer glucose</i>	59
<i>losartan potassium-hctz</i>	73	MALARONE	77	<i>meijer pen needles</i>	173
LOSEASONIQUE	108	<i>malathion</i>	123	<i>meijer premium glucose test</i>	135
LOTEMAX	202	<i>maprotiline hcl</i>	52	MEIJER TRUETEST TEST	135
LOTEMAX SM	202	<i>marlissa</i>	108	MEIJER TRUETRACK	
LOTENSIN	73	MARNATAL-F	191	TEST	135
LOTENSIN HCT	73	MARPLAN	52	MEKINIST	83
<i>loteprednol etabonate</i>	202	MASK VORTEX	173	MEKTOVI	83
LOTREL	73	MATULANE	83	<i>meloxicam</i>	24
LOTRONEX	149	Matzim La	100	<i>melphalan</i>	83
<i>lovastatin</i>	69	MAVENCLAD (10 TABS)	212	<i>memantine hcl</i>	212
LOVAZA	69	MAVENCLAD (4 TABS)	212	<i>memantine hcl er</i>	212
LOVENOX	45	MAVENCLAD (5 TABS)	212	MENEST	146
Low-Ogestrel	108	MAVENCLAD (6 TABS)	212	MENOSTAR	146
<i>loxapine succinate</i>	90	MAVENCLAD (7 TABS)	212	<i>meperidine hcl</i>	31
Lo-Zumandimine	108	MAVENCLAD (8 TABS)	212	MEPHYTON	223
LUCEMYRA	212	MAVENCLAD (9 TABS)	212	<i>meprobamate</i>	38
LUCENTIS	202	MAVIK	73	MEPRON	76
<i>luliconazole</i>	123	MAVYRET	94	<i>mercaptopurine</i>	83
LUMIGAN	202	MAXALT	183	<i>mesalamine</i>	149
LUMIZYME	142	MAXALT-MLT	183	<i>mesalamine er</i>	149
LUNESTA	160	MAXI-COMFORT		MESNEX	83
LUPANETA PACK	142	INSULIN SYRINGE	173	MESTINON	78
LUPRON DEPOT (1-MONTH)	82	MAXIDEX	202	Metadate Er	18
LUPRON DEPOT (3-MONTH)	82	MAXITROL	202	<i>metaxalone</i>	196
LUPRON DEPOT (4-MONTH)	82	MAXZIDE	139	<i>metformin hcl</i>	59, 60
LUPRON DEPOT (6-MONTH)	82	MAXZIDE-25	139	<i>metformin hcl er</i>	59
LUPRON DEPOT-PED (1-MONTH)	142	MAYZENT	212	<i>metformin hcl er (mod)</i>	59
LUPRON DEPOT-PED (3-MONTH)	142	MAYZENT STARTER		<i>metformin hcl er (osm)</i>	59
		PACK	212	<i>methadone hcl</i>	31
		<i>meclofenamate sodium</i>	24	Methadone Hcl Intensol	31
		<i>medicine shoppe pen needles</i>	173	METHADOSE	31
		MEDISENSE GLUCOSE		METHADOSE SUGAR-FREE	31
		KETONE CONTR	173	<i>methamphetamine hcl</i>	18

<i>methazolamide</i>	139	<i>midazolam hcl</i>	160	MONOVISC	196
<i>methenamine hippurate</i>	76	<i>midodrine hcl</i>	223	<i>montelukast sodium</i>	42
<i>methenamine mandelate</i>	76	MIGERGOT	183	Morgidox	216
Methergine	206	<i>miglitol</i>	60	<i>morphine sulfate</i>	32
<i>methimazole</i>	217	<i>miglustat</i>	158	<i>morphine sulfate (concentrate)</i>	32
<i>methitest</i>	35	MIGRANAL	183	<i>morphine sulfate er</i>	32
<i>methocarbamol</i>	196	MILLIPRED	113	<i>morphine sulfate er beads</i>	32
<i>methotrexate</i>	83	<i>Mimvey</i>	146	MOTEGRITY	149
<i>methotrexate sodium</i>	83	MINASTRIN 24 FE	109	MOTOFEN	63
<i>methscopolamine bromide</i>	219	<i>mini lancing device</i>	173	MOVANTIK	149
<i>methyldopa</i>	73	MINI WRIGHT PEAK FLOW METER	173	MOVIPREP	161
METHYLIN	18	MINIELITE FILTER		MOXEZA	203
<i>methylphenidate hcl</i>	19	REPLACEMENTS	173	<i>moxifloxacin hcl</i>	147
<i>methylphenidate hcl er</i>	18, 19	MINIELITE RECHARGEABLE BATTERY	174	<i>moxifloxacin hcl (2x day)</i>	203
<i>methylphenidate hcl er (cd)</i>	18	MINIMED GUARDIAN SENSOR 3	174	MS CONTIN	32
<i>methylphenidate hcl er (la)</i>	18	MINIPRESS	74	MULPLETA	158
<i>methylphenidate hcl er (xr)</i>	18	MINIPRIN LOW DOSE	27	MULTAQ	39
<i>methylprednisolone</i>	113	<i>Minitran</i>	37	<i>multi-lancet device</i>	174
<i>methyltestosterone</i>	35	MINIVELLE	146	<i>multivitamin/fluoride</i>	191
<i>metoclopramide hcl</i>	149	MINOCIN	216	<i>multi-vitamin/fluoride</i>	191
<i>metolazone</i>	139	<i>minocycline hcl</i>	216	<i>multi-vitamin/fluoride/iron</i>	191
<i>metoprolol succinate er</i>	98	<i>minocycline hcl er</i>	216	<i>multivitamins/fluoride</i>	191
<i>metoprolol tartrate</i>	98	MINOLIRA	216	<i>mupirocin</i>	124
<i>metoprolol-hydrochlorothiazide</i>	73	<i>minoxidil</i>	74	<i>mupirocin calcium</i>	124
METROCREAM	123	MIRAPEX	87	MYALEPT	142
METROGEL	123	MIRAPEX ER	87	MYAMBUTOL	78
METROLOTION	123	MIRCERA	158	MYCAPSSA	142
<i>metronidazole</i>	76, 123, 124, 222	MIRCETTE	109	<i>mycophenolate mofetil</i>	187
<i>metyrosine</i>	73	MIRENA (52 MG)	109	<i>mycophenolate sodium</i>	187
<i>mexiletine hcl</i>	38	<i>mirtazapine</i>	52	MYDAYIS	19
MIACALCIN	142	MIRVASO	124	MYDRIACYL	203
<i>Mibelas 24 Fe</i>	108	<i>misoprostol</i>	219	MYFORTIC	187
MICARDIS	74	MITIGARE	152	MYGLUCOHEALTH CONTROL	174
MICARDIS HCT	74	MM EASY TOUCH GLUCOSE	135	MYGLUCOHEALTH TEST	
<i>miconazole-zinc oxide-petrolatum</i>	124	MOBIC	24	MYLERAN	83
MICRHOGAM ULTRA-FILTERED PLUS	208	<i>modafinil</i>	19	<i>mynatal plus</i>	191
MICRODOT CONTROL HIGH/LOW	173	<i>moexipril hcl</i>	74	<i>mynatal-z</i>	191
MICRODOT TEST	135	<i>mometasone furoate</i>	124, 197	Myorisan	124
MICROELITE BATTERY	173	MONOJECT INSULIN SYRINGE	174	MYRBETRIQ	221
MICROELITE FILTER REPLACEMENTS	173	MONOJECT ULTRA COMFORT SYRINGE	174	MYSOLINE	48
<i>Microgestin 1.5/30</i>	108	<i>Mono-Linyah</i>	109	MYTESI	63
<i>Microgestin 1/20</i>	108	<i>Mononessa</i>	109	<i>na ferric gluc cplx in sucrose</i>	158
<i>Microgestin Fe 1.5/30</i>	108	MONONINE	155	NABI-HB	208
<i>Microgestin Fe 1/20</i>	108			<i>nabumetone</i>	24
MICROLET LANCETS	173			<i>nadolol</i>	98
MICROLIFE DIGITAL PEAK FLOW	173			Nafrinse	185
				Nafrinse Drops	185

<i>naftifine hcl</i>	124	<i>neomycin-polymyxin-dexameth</i>	NICOTROL NS	213
NAFTIN	124	.....	<i>nifedipine</i>	100
NAGLAZYME	142	<i>neomycin-polymyxin-</i>	<i>nifedipine er</i>	100
NALFON	24	<i>gramicidin</i>	<i>nifedipine er osmotic release</i>	100
<i>nalocet</i>	32	<i>neomycin-polymyxin-hc</i>	Nikki	109
<i>naloxone hcl</i>	64	<i>neonatal + dha</i>	NILANDRON	83
<i>naltrexone hcl</i>	64	<i>neonatal 19</i>	<i>nilutamide</i>	83
NAMENDA	212	<i>neonatal fe</i>	<i>nimodipine</i>	100
NAMENDA TITRATION		Neo-Polycin	NINLARO	83
PAK	212	.....	<i>nisoldipine er</i>	100
NAMENDA XR	212	Neo-Polycin Hc	<i>nitisinone</i>	142
NAMENDA XR		NEORAL	NITRO-BID	37
TITRATION PACK	212	.....	NITRO-DUR	37
NAMZARIC	212, 213	NEOTUSS PLUS	<i>nitrofurantoin</i>	76
NAPRELAN	24	NEPHPLEX RX	<i>nitrofurantoin macrocrystal</i>	76
NAPROSYN	24	Nephronex	<i>nitrofurantoin monohyd macro</i>	76
<i>naproxen</i>	24	NERLYNX	<i>nitroglycerin</i>	37
<i>naproxen dr</i>	24	NESINA	NITROLINGUAL	37
<i>naproxen sodium</i>	24	NESTABS	NITROMIST	37
<i>naproxen sodium er</i>	24	NESTABS DHA	NITROSTAT	37
<i>naproxen-esomeprazole</i>	24	NESTABS ONE	NITYR	142
<i>naratriptan hcl</i>	183	Neuac	NIVESTYM	158
NARCAN	64	NEULASTA	<i>nizatidine</i>	219
NARDIL	52	NEULASTA ONPRO	NOCDURNA	142
NASACORT ALLERGY		NEUPOGEN	Nora-Be	109
24HR	198	NEUPRO	NORCO	32
NASACORT ALLERGY		NEURONTIN	NORDIPEN 5 INJECTION	
24HR CHILDREN	198	NEUTEK 2TEK CONTROL	DEVICE	174
NASCOBAL	158	.....	NORDIPEN DELIVERY	
NASONEX	198	NEUTEK 2TEK TEST	SYSTEM	174
NATACHEW	191	NEVANAC	NORDITROPIN FLEXPRO	142
NATACYN	203	<i>nevirapine</i>	<i>norethin ace-eth estrad-fe</i>	109
NATALVIT	191	<i>nevirapine er</i>	<i>norethindrone</i>	109
NATAZIA	109	NEXAVAR	<i>norethindrone acetate</i>	210
<i>nateglinide</i>	60	NEXIUM	<i>norethindrone-eth estradiol</i>	146
NATESTO	35	NEXIUM 24HR	<i>norethin-eth estradiol-fe</i>	109
NATPARA	142	NEXIUM 24HR CLEAR	<i>norgesic forte</i>	196
NATROBA	124	MINIS	<i>norgestimate-eth estradiol</i>	109
NATURE-THROID	217	NEXLETOL	<i>norgestim-eth estrad triphasic</i>	109
NAYZILAM	48	NEXLIZET	NORITATE	124
<i>nebulizer air tube/plugs</i>	174	NEXPLANON	NORPACE	39
NEBUPENT	76	<i>niacin (antihyperlipidemic)</i>	NORPACE CR	39
Necon 0.5/35 (28)	109	<i>niacin er</i>	NORPRAMIN	52
Necon 1/35 (28)	109	<i>niacin er (antihyperlipidemic)</i>	NORTHERA	223
NEEVO DHA	191	NIACOR	Nortrel 0.5/35 (28)	109
<i>nefazodone hcl</i>	52	NIASPAN	Nortrel 1/35 (21)	109
<i>neomycin sulfate</i>	21	nicardipine hcl	Nortrel 1/35 (28)	109
<i>neomycin-bacitracin zn-</i>		NICOMIDE	Nortrel 7/7/7	109
<i>polymyx</i>	203	<i>nicotine</i>	<i>nortriptyline hcl</i>	52
<i>neomycin-polymyxin b gu</i>	151	<i>nicotine polacrilex</i>	NORVASC	100

NORVIR	94, 95	NUTROPIN AQ NUSPIN 10	142	ondansetron hcl	65
nose clip	174	NUTROPIN AQ NUSPIN 20	143	one drop test	136
NOURIANZ	87	NUTROPIN AQ NUSPIN 5	143	ONE FLOW TESTER	174
NOVA MAX GLUCOSE TEST	136	NUVARING	109	ONETOUCH DELICA	
NOVA MAX PLUS GLU/KET CONTROL	174	NUVESSA	222	LANCING DEV	174
NOVA SUREFLEX LANCING DEVICE	174	NUVIGIL	19	ONETOUCH SURESOFT	
NOVOEIGHT	155	NUWIQ	155	LANCING DEV	174
NOVOFINE	174	NUZYRA	216	ONETOUCH ULTRA	136
NOVOFINE AUTOCOVER	174	Nyamyc	124	ONETOUCH ULTRA	
NOVOLIN 70/30	60	NYMALIZE	100	CONTROL	175
NOVOLIN 70/30 FLEXPEN	60	nystatin	66, 124, 189	ONETOUCH VERIO	136, 175
NOVOLIN 70/30 FLEXPEN RELION	60	nystatin-triamcinolone	124	ONEXTON	124
NOVOLIN N	60	Nystop	124	ONFI	48
NOVOLIN N FLEXPEN	60	OB COMPLETE	192	ONGENTYS	87
NOVOLIN N FLEXPEN RELION	60	OB COMPLETE PETITE	192	ONGLYZA	61
NOVOLIN N RELION	60	OB COMPLETE PREMIER	192	ONUREG	83
NOVOLIN R	60	OB COMPLETE/DHA	192	ONZETRA XSAIL	184
NOVOLIN R FLEXPEN	60	O-CAL PRENATAL	192	OPANA	33
NOVOLIN R FLEXPEN RELION	60	OCALIVA	149	OPSUMIT	102
NOVOLOG	61	Ocella	110	OPTIUM TEST	136
NOVOLOG FLEXPEN	60	OCTAGAM	208	OPTIUMEZ TEST	136
NOVOLOG MIX 70/30	61	octreotide acetate	143	ORACEA	124
NOVOLOG MIX 70/30 FLEXPEN	61	OCUFLOX	203	ORACIT	151
NOVOLOG PENFILL	61	OCUVEL	192	ORALAIR	20
NOVOSEVEN RT	155	ODACTRA	20	ORALAIR ADULT	
NOVOTWIST	174	ODEFSEY	95	SAMPLE KIT	20
NOXAFIL	66	ODOMZO	83	ORALAIR ADULT	
np thyroid	217	OFEV	215	STARTER PACK	20
NPLATE	158	ofloxacin	147, 203, 206	ORALAIR CHILDRENS	
NUBEQA	83	olanzapine	90	SAMPLE KIT	20
NUCALA	42	olanzapine-fluoxetine hcl	213	ORALAIR CHILDRENS	
NUCYNTA	32	olmesartan medoxomil	74	STARTER PACK	20
NUCYNTA ER	32	olmesartan medoxomil-hctz	74	Oralone	189
NUEDEXTA	213	olmesartan-amldipine-hctz	74	ORAMAGICRX	189
NULOJIX	187	olopatadine hcl	198, 203	ORAPRED ODT	113
NULYTELY WITH FLAVOR PACKS	161	OLUMIANT	24	ORAVIG	189
NUPLAZID	90	OLUX	124	ORENCIA	24
NURTEC	183	OLUX-E	124	ORENCIA CLICKJECT	24
NUTRIVIT	192	OMECLAMOX-PAK	219	ORENITRAM	102
		omega-3-acid ethyl esters	70	ORFADIN	143
		omeprazole	220	ORIAHNN	146
		omeprazole magnesium	220	ORILISSA	143
		omeprazole-sodium bicarbonate	220	ORKAMBI	215
		OMNARIS	198	orphenadrine citrate er	196
		OMNIFLEX DIAPHRAGM	174	orphenadrine-asa-caffeine	196
		OMNITROPE	143	Orphengesic Forte	196
		ondansetron	65	Orsythia	110
				ORTHO MICRONOR	110
				ORTHO TRI-CYCLEN LO.	110
				ORTHOVISC	196

ORTIKOS.....	113	PALFORZIA (300 MG MAINTENANCE).....	21	PAXIL.....	53
<i>oseltamivir phosphate</i>	95	PALFORZIA (300 MG TITRATION).....	21	PAXIL CR.....	52
OSENI.....	61	PALFORZIA (40 MG DAILY DOSE).....	21	PAZEO.....	203
OSMOLEX ER.....	87	PALFORZIA (6 MG DAILY DOSE).....	21	<i>pc unifine pentips</i>	175
OSMOPREP.....	161	PALFORZIA INITIAL ESCALATION.....	21	PCCA ACACIA SYRUP BASE.....	209
OSPHENA.....	143	<i>paliperidone er</i>	90	PCP 100.....	161
OTEZLA.....	24, 25	PALYNZIQ.....	143	PEAK AIR PEAK FLOW METER.....	175
OTIPRIO.....	206	PAMELOR.....	52	<i>pediatric mouthpiece</i>	175
OTOVEL.....	206	<i>pamidronate disodium</i>	143	PEDIATRIC PANDA MASK.....	175
OTREXUP.....	25	PANCREAZE.....	138	<i>peg 3350-kcl-na bicarb-nacl</i>	161
OVIDE.....	125	PANDA MASK LARGE.....	175	<i>peg-3350/electrolytes</i>	161
<i>oxandrolone</i>	35	PANDA MASK MEDIUM.....	175	PEGASYS.....	95
<i>oxaprozin</i>	25	PANDA MASK SMALL.....	175	<i>peg-kcl-nacl-nasulf-na asc-c</i>	161
OXAYDO.....	33	PANDEL.....	125	Peg-Prep.....	161
<i>oxazepam</i>	38	PANRETIN.....	125	PEMAZYRE.....	83
OXBRYTA.....	158	<i>pantoprazole sodium</i>	220	<i>pen needles</i>	175
<i>oxcarbazepine</i>	48	PANZYGA.....	208	<i>pen needles 1/2"</i>	175
<i>oxiconazole nitrate</i>	125	PARAGARD INTRAUTERINE COPPER 110		<i>pen needles 3/16"</i>	175
OXISTAT.....	125	PAREMYD.....	203	<i>pen needles 5/16"</i>	175
OXSORALEN ULTRA.....	125	PARI ALTERA NEBULIZER HANDSET	175	penicillamine.....	187
OXTELLAR XR.....	49	PARI BABY CONVERSION KIT.....	175	penicillin v potassium.....	209
<i>oxybutynin chloride</i>	221	PARI ERAPID NEBULIZER HANDSET	175	PENLET II BLOOD SAMPLER.....	175
<i>oxycodone hcl</i>	33	PARI EXPIRATORY FILTER SET.....	175	PENLET II REPLACEMENT CAP	175
<i>oxycodone hcl er</i>	33	PARI MASK SET.....	175	PENNSAID.....	125
<i>oxycodone-acetaminophen</i>	33	PARI SOFT PLASTIC ADULT MASK	175	<i>pentamidine isethionate</i>	76
<i>oxycodone-aspirin</i>	33	PARI SOFT PLASTIC PED MASK	175	PENTASA.....	149
OXYCONTIN.....	33	<i>paricalcitol</i>	143	<i>pentazocine-naloxone hcl</i>	33
<i>oxymorphone hcl</i>	33	PARLODEL.....	87	<i>pentoxifylline er</i>	155
<i>oxymorphone hcl er</i>	33	PARNATE.....	52	PEPCID.....	220
OXYTROL FOR WOMEN..	221	<i>paramomycin sulfate</i>	21	PERCOCET.....	33
OZEMPIC (0.25 OR 0.5 MG/DOSE).....	61	<i>paroxetine hcl</i>	52	PERFOROMIST.....	42
OZEMPIC (1 MG/DOSE).....	61	<i>paroxetine hcl er</i>	52	PERIDEX.....	189
OZOBAX.....	196	<i>paroxetine mesylate</i>	213	<i>perindopril erbumine</i>	74
Pacerone.....	39	PASER.....	78	<i>permethrin</i>	125
PALFORZIA (12 MG DAILY DOSE).....	20	PATADAY.....	203	<i>perphenazine</i>	90
PALFORZIA (120 MG DAILY DOSE).....	20	PATANASE.....	198	PERSERIS.....	90
PALFORZIA (160 MG DAILY DOSE).....	20			PERSONAL BEST FULL RANGE.....	175
PALFORZIA (20 MG DAILY DOSE).....	20			PERSONAL BEST LOW RANGE.....	176
PALFORZIA (200 MG DAILY DOSE).....	20			PERTZYE.....	138
PALFORZIA (240 MG DAILY DOSE).....	20			PEXEVA.....	53
PALFORZIA (3 MG DAILY DOSE).....	21			PFLEX.....	176
				PHARMACIST CHOICE ALCOHOL.....	176

PHARMACIST CHOICE		
AUTOCODE	136	
<i>pharmacist choice no coding</i>	136	
<i>phenelzine sulfate</i>	53	
<i>phenobarbital</i>	160	
<i>phenoxybenzamine hcl</i>	74	
<i>phenylephrine hcl</i>	203	
PHENYTEK	49	
<i>phenytoin</i>	49	
Phenytoin Infatabs	49	
<i>phenytoin sodium extended</i>	49	
PHEXXI	222	
Philith	110	
PHOSLO	149	
PHOSLYRA	149	
Phospha 250 Neutral	185	
PHOSPHOLINE IODIDE	203	
Physiolyte	187	
Physiosol Irrigation	187	
<i>phytonadione</i>	223	
PICATO	125	
PIFELTRO	95	
PIKO 1	176	
<i>pillow mask/adult</i>	176	
<i>pillow mask/child</i>	176	
<i>pillow mask/pediatric</i>	176	
<i>pilocarpine hcl</i>	189, 203	
<i>pimecrolimus</i>	125	
<i>pimozide</i>	213	
Pimtrea	110	
<i>pindolol</i>	98	
<i>pioglitazone hcl</i>	61	
<i>pioglitazone hcl-glimepiride</i>	61	
<i>pioglitazone hcl-metformin hcl</i>	61	
PIQRAY (200 MG DAILY DOSE)	83	
PIQRAY (250 MG DAILY DOSE)	83	
PIQRAY (300 MG DAILY DOSE)	83	
Pirmella 1/35	110	
Pirmella 7/7/7	110	
<i>piroxicam</i>	25	
PLAQUENIL	77	
PLAVIX	155	
PLEGRIDY	213	
PLEGRIDY STARTER PACK	213	
PLENVU	161	
PLIAGLIS	125	
<i>pnv-dha</i>	192	
<i>pnv-dha+docusate</i>	192	
<i>pnv-omega</i>	192	
<i>pnv-select</i>	192	
POCKET PEAK FLOW METER	176	
POCKETCHEM EZ CONTROL	176	
POCKETCHEM EZ TEST	136	
POCKETPEAK PEAK FLOW METER	176	
<i>podofilox</i>	125	
Polycin	203	
<i>polymyxin b-trimethoprim</i>	203	
POLYTRIM	204	
POLY-VI-FLOR	192	
POLY-VI-FLOR/IRON	192	
<i>polyvitamin/fluoride</i>	192	
<i>poly-vitamin/fluoride</i>	192	
POMALYST	83	
Portia-28	110	
<i>posaconazole</i>	66	
<i>potassium chloride</i>	186	
<i>potassium chloride crys er</i>	185	
<i>potassium chloride er</i>	186	
PRADAXA	45	
PRALUENT	70	
<i>pramipexole dihydrochloride</i>	87	
<i>pramipexole dihydrochloride er</i>	87	
PRAMOSONE	125	
<i>prasugrel hcl</i>	155	
PRAVACHOL	70	
<i>pravastatin sodium</i>	70	
<i>praziquantel</i>	36	
<i>prazosin hcl</i>	74	
PRECISION GLUCOSE CONTROL	176	
PRECISION GLUCOSE CONTROL SOLN	176	
PRECISION GLUCOSE KETONE CONTR	176	
PRECISION GLUCOSE/KETONE CONTR	176	
PRECISION PCX	136	
PRECISION PCX PLUS TEST	136	
PRECISION POINT OF CARE TEST	136	
PRECISION QID TEST	136	
PRECISION SOF-TACT TEST	136	
PRECISION SUREDOSE PLUS SYR	176	
PRECISION SURE-DOSE SYRINGE	176	
PRECISION XTRA BLOOD GLUCOSE	136	
PRECISION XTRA KETONE	136	
PRECOSE	61	
PRED FORTE	204	
PRED MILD	204	
PRED-G	204	
PRED-G S.O.P.	204	
<i>prednicarbate</i>	125	
<i>prednisolone</i>	113	
<i>prednisolone acetate</i>	204	
<i>prednisolone sodium phosphate</i>	113, 204	
<i>prednisone</i>	113	
PREDNISONE INTENSOL	113	
<i>preferred plus glucose</i>	61	
<i>preferred plus unifine pentips</i>	176	
PREFEST	147	
<i>pregabalin</i>	49	
<i>pregenna</i>	192	
PREMARIN	147, 222	
<i>premium blood glucose test</i>	136	
PREMPHASE	147	
PREMPRO	147	
<i>prenal pearl</i>	192	
<i>prenaissance</i>	192	
<i>prenaissance plus</i>	192	
<i>prenara</i>	192	
PRENATABS RX	192	
<i>prenatal + complete multi</i>	192	
<i>prenatal 19</i>	193	
<i>prenatal adult gummy/dhalfa</i>	193	
<i>prenatal gummies/dha & fa</i>	193	
<i>prenatal plus iron</i>	193	
PRENATAL-U	193	
PRENATE	193	
PRENATE AM	193	
PRENATE ENHANCE	193	
PRENATE MINI	193	
PRENATE RESTORE	193	
<i>prenatvite complete</i>	193	
<i>prenatvite plus</i>	193	
<i>prenatvite rx</i>	193	

PREPIDIL	206	<i>progesterone micronized</i>	210	<i>qc advanced lancing device</i>	177
PRESTALIA	74	PROGLYCEM	61	<i>qc alcohol swabs</i>	177
<i>pretomanid</i>	78	PROGRAF	187, 188	<i>qc pen needles</i>	177
PREVACID	220	PROLASTIN-C	215	<i>qc unifine pentips</i>	177
PREVACID 24HR	220	PROLATE	34	QINLOCK	83
PREVACID SOLUTAB	220	PROLENSA	204	QMIIZ ODT	25
Prevalite	70	PROMACTA	158	QNDSL	198
Previfem	110	<i>promethazine hcl</i>	67	QNDSL CHILDRENS	198
PREVYMIS	95	<i>promethazine-dm</i>	115	QTERN	61
PREZCOBIX	95	Promethegan	67	QUALAQUIN	77
PREZISTA	95	PROMETHEGAN	67	QUARTETTE	110
PRIALT	27	PROMETRIUM	210	<i>quazepam</i>	160
PRIFTIN	78	<i>propafenone hcl</i>	39	QUDEXY XR	49
PRILOSEC	220	<i>propafenone hcl er</i>	39	QUESTRAN	70
PRILOSEC OTC	220	<i>proparacaine hcl</i>	204	QUESTRAN LIGHT	70
PRIMACARE	193	<i>propranolol hcl</i>	99	<i>quetiapine fumarate</i>	91
<i>primaquine phosphate</i>	77	<i>propranolol hcl er</i>	99	<i>quetiapine fumarate er</i>	90
<i>primidone</i>	49	<i>propylthiouracil</i>	218	QUFLORA FE	193
PRIMLEV	33, 34	PROSCAR	151	QUFLORA FE PEDIATRIC	
PRIMSOL	76	PROSTIN E2	206		193
PRINVIL	74	PROTONIX	220	QUFLORA PEDIATRIC	193
PRISTIQ	53	PROTOPIC	125	QUICKTEK CONTROL	
PRIVIGEN	208	<i>protriptyline hcl</i>	53	SOLUTION	177
<i>pro voice v8/v9 glucose</i>	136	PROVENTIL HFA	42	QUICKTEK TEST	136
PROAIR DIGIHALER	42	PROVERA	210	QUILLICHEW ER	19
PROAIR HFA	42	PROVIDA OB	193	QUILLIVANT XR	19
PROAIR RESPICLICK	42	PROVIGIL	19	<i>quinapril hcl</i>	74
<i>probenecid</i>	152	PROZAC	53	<i>quinapril-hydrochlorothiazide</i>	74
PROCARDIA	100	PRUDOXIN	125	<i>quinidine gluconate er</i>	39
PROCARDIA XL	100	PSS SELECT PLATFORMS	176	<i>quinidine sulfate</i>	39
Procentra	19	PTS PANELS GLUCOSE		<i>quinine sulfate</i>	77
<i>procloperazine</i>	90	TEST	136	QUINTET AC BLOOD	
<i>procloperazine edisylate</i>	90	PULMICORT	43	GLUCOSE TEST	136
<i>procloperazine maleate</i>	90	PULMICORT		QUINTET BLOOD	
PROCIT	158	FLEXHALER	42	GLUCOSE TEST	136
Proctocare-Hc	36	PULMOZYME	215	QUINTET CONTROL	
PROCTOCORT	36	PURIXAN	83	HIGH/NORMAL	177
PROCTOFOAM HC	36	<i>px advanced lancing device</i>	176	QVAR REDIHALER	43
Procto-Pak	36	<i>px extra short pen needles</i>	176	<i>ra alcohol swabs</i>	177
Proctozone-Hc	36	<i>px glucose</i>	61	<i>ra glucose</i>	61
PROSYSBI	151	<i>px lancet auto injector</i>	177	<i>ra lancing device</i>	177
PRODIGY CONTROL		<i>px pen needle</i>	177	<i>ra pen needles</i>	177
SOLUTION	176	<i>px shortlength pen needles</i>	177	RA TRUEPLUS GLUCOSE	61
PRODIGY INSULIN		PYLERA	220	RA TRUETEST TEST	136
SYRINGE	176	<i>pyrazinamide</i>	78	<i>rabeprazole sodium</i>	220
PRODIGY LANCING		<i>pyridostigmine bromide</i>	78	RADIOGARDASE	64
DEVICE	176	<i>pyridostigmine bromide er</i>	78	RAGWITEK	21
PRODIGY NO CODING		<i>pyrimethamine</i>	77	<i>raloxifene hcl</i>	143
BLOOD GLUC	136	QBRELIS	74	<i>ramelteon</i>	160
<i>progesterone</i>	210	QBREXZA	125	<i>ramipril</i>	74

RANEXA	37	RELION PRIME TEST	137	RIGHTEST ALTERNATE	
<i>ranolazine er</i>	37	RELION SHORT PEN		SITE ADAPT	177
RAPAFLO	151	NEEDLES	177	RIGHTEST GC300	
RAPAMUNE	188	RELION ULTIMA TEST	137	CONTROL	178
<i>rasagiline mesylate</i>	87	RELISTOR	149	RIGHTEST GD500	
RASUVO	25	RELPAX	184	LANCING DEVICE	178
RAVICTI	143	REMERON	53	RIGHTEST GS100 BLOOD	
RAYALDEE	143	REMICADE	149	GLUCOSE	137
RAYOS	113	RENACIDIN	152	RIGHTEST GS300 BLOOD	
RAZADYNE ER	213	RENAGEL	149	GLUCOSE	137
<i>reality swabs</i>	177	RENATABS	193	RIGHTEST GS550 BLOOD	
REBIF	214	RENATABS WITH IRON	193	GLUCOSE	137
REBIF REBIDOSE	213	<i>rena-vite rx</i>	194	RILUTEK	198
REBIF REBIDOSE		RENFLEXIS	149	<i>riluzole</i>	198
TITRATION PACK	214	RENVELA	149, 150	<i>rimantadine hcl</i>	95
REBIF TITRATION PACK	214	<i>repaglinide</i>	62	<i>ringers irrigation</i>	188
REBINYN	155	REPATHA	70	RINVOQ	25
RECLAST	143	REPATHA PUSHTRONEX		RIOMET	62
Reclipsen	110	SYSTEM	70	RIOMET ER	62
RECOMBINATE	156	REPATHA SURECLICK	70	<i>risedronate sodium</i>	143
RECTIV	36	<i>replacement air filter</i>	177	RISPERDAL	91
REFUAH PLUS BLOOD		<i>replacement filters</i>	177	RISPERDAL CONSTA	91
GLUCOSE TEST	137	RESECTISOL	152	<i>risperidone</i>	91
REFUAH PLUS GLUCOSE		RESTASIS	204	RITALIN	19
CONTROL	177	RESTORIL	160	RITALIN LA	19
REGENECARE	125	RETACRIT	158	<i>ritonavir</i>	95
REGLAN	149	RETEVMO	84	<i>rivastigmine</i>	214
REGRANEX	125	RETIN-A	125	<i>rivastigmine tartrate</i>	214
RELAFEN DS	25	RETIN-A MICRO	125	Rivelsa	110
RELENZA DISKHALER	95	RETIN-A MICRO PUMP	126	RIXUBIS	156
RELEXXII	19	RETROVIR	95	<i>rizatriptan benzoate</i>	184
RELION ALCOHOL		REVATIO	102	ROBAXIN-750	196
SWABS	177	REVLIMID	188	ROCALTROL	143
RELION BLOOD		REXALL BLOOD		ROCKLATAN	204
GLUCOSE TEST	137	GLUCOSE TEST	137	<i>ropinirole hcl</i>	87
RELION		REXULTI	91	<i>ropinirole hcl er</i>	87
CONFIRM/MICRO TEST	137	REYATAZ	95	Rosadan	126
RELION GLUCOSE	61	REYVOW	184	<i>rosuvastatin calcium</i>	70
RELION GLUCOSE		RHINOCORT ALLERGY	198	ROXICODONE	34
DRINK	61	RHOFADE	126	ROZEREM	160
RELION INSULIN		RHOGAM ULTRA-		ROZLYTREK	84
SYRINGE	177	FILTERED PLUS	208	RUBRACA	84
RELI-ON INSULIN		RHOPHYLAC	208	RUCONEST	156
SYRINGE	177	RHOPRESSA	204	<i>rukobia</i>	95
RELION KETONE	137	RIASTAP	156	RUZURGI	78
RELION LANCING		<i>ribavirin</i>	95	RYBELSUS	62
DEVICE	177	RIDAURA	25	RYDAPT	84
RELION MINI PEN		<i>rifabutin</i>	78	RYTARY	87
NEEDLES	177	<i>rifampin</i>	78	RYTHMOL SR	39
RELION PEN NEEDLES	177			RYVENT	67

SABRIL	49	sevoflurane	150	sm loratadine	68
SAFESNAP INSULIN		SEYSARA	217	SMART DIABETES	
SYRINGE	178	SFROWASA	150	VANTAGE LANCING	178
SAFYRAL	110	SHOPKO ALCOHOL		SMART SENSE GLUCOSE	62
SAIZEN	144	SWABS	178	SMART SENSE PREMIUM	
SAIZENPREP	144	SHOPKO AUTOLET		TEST	137
SALAGEN	189	LANCING DEVICE	178	SMART SENSE VALUE	
SALICEPT	189	SHOPKO UNIFINE		TEST	137
SAMI THE SEAL FILTERS	178	PENTIPS	178	SMARTEST BLOOD	
SAMSCA	144	SIDESTREAM ADULT		GLUCOSE TEST	137
SANCUSO	65	FACE MASK	178	SMARTEST CONTROL	
SANDIMMUNE	188	SIDESTREAM PEDIATRIC		MEDIUM	178
SANDOSTATIN	144	FACE MASK	178	sod benz-sod phenylacet	144
SANDOSTATIN LAR		SIDESTREAM PLS ADULT		sodium chloride	115, 152
DEPOT	144	FACE MASK	178	sodium fluoride	186
SANTYL	126	SIGNIFOR	144	sodium hyaluronate	197
SAPHRIS	91	SIGNIFOR LAR	144	sodium phenylbutyrate	144
sapropterin dihydrochloride	144	SIKLOS	158	sodium polystyrene sulfonate	188
SARAFEM	214	sildenafil citrate	102	sofosbuvir-velpatasvir	95
SAVAYSA	45	SILENOR	160	SOLARTEK GLUCOSE	
SAVELLA	214	silicone mask/adult	178	CONTROL	178
SAVELLA TITRATION		silicone mask/infant	178	Solia	111
PACK	214	silicone mask/pediatric	178	solifenacin succinate	221
sb alcohol prep	178	SILIQ	126	SOLIQUA	62
SCLEROSOL		silodosin	152	SOLODYN	217
INTRAPLEURAL	215	SILVADENE	126	SOLOSEC	21
SEASONIQUE	110	silver sulfadiazine	126	SOLTAMOX	84
SECONAL	160	SIMBRINZA	204	SOLUS V2 CONTROL	178
SECUADO	91	Simliya	110	SOLUS V2 LANCING	
SEEBRI NEOHALER	43	Simpesse	110	DEVICE	178
SEGLUROMET	62	SIMPLE DIAGNOSTICS		SOLUS V2 TEST	137
select-lite device/lancets	178	LANCING DEV	178	SOMA	197
select-lite lancing device	178	SIMPONI	25	SOMATULINE DEPOT	144
SELECT-OB	194	SIMPONI ARIA	25	SOMAVERT	144
selegiline hcl	87, 88	SIMULECT	188	SOOLANTRA	126
selenium sulfide	126	simvastatin	70	SORIATANE	126
SELZENTRY	95	SINEMET	88	SORILUX	126
SEMGLEE	62	SINGULAIR	43	Sorine	99
SEMPREX-D	115	sirolimus	188	sotalol hcl	99
se-natal 19	194	SIRTURO	78	sotalol hcl (af)	99
SENSIPAR	144	SITZMARKS	137	SOTYLIZE	99
SEREVENT DISKUS	43	SIVEXTRO	76	SOVALDI	95
SERNIVO	126	SKELAXIN	196	SPIRIVA HANDIHALER	43
SEROQUEL	91	SKLICE	126	SPIRIVA RESPIMAT	43
SEROQUEL XR	91	SKYLA	110	spironolactone	139
SEROSTIM	144	SKYRIZI (150 MG DOSE)	126	spironolactone-hctz	139
sertraline hcl	53	SLYND	110	SPORANOX	66
sevelamer carbonate	150	sm alcohol prep	178	SPORANOX PULSEPAK	66
sevelamer hcl	150	sm folic acid	158	Sprintec 28	111
SEVENFACT	156	sm glucose	62	SPRIX	25

SPRYCEL	84	SUNOSI	19	SYNJARDY XR	62
Sps	188	SUPRAX	103, 104	SYNTHROID	218
Sronyx	111	<i>supreme ii high/low control</i>	178	SYNVISC	197
Ssd	126	SUPREME TEST	137	SYNVISC ONE	197
SSKI	115	SUPREP BOWEL PREP KIT		SYPRINE	188
ST JOSEPH ASPIRIN	27		161	TABLOID	84
ST JOSEPH LOW DOSE	27	<i>sure comfort alcohol prep</i>	178	TABRECTA	84
STALEVO 100	88	<i>sure comfort insulin syringe</i>	179	TACLONEX	127
STALEVO 125	88	<i>sure comfort lancing pen</i>	179	tacrolimus	127, 188
STALEVO 150	88	<i>sure comfort pen needles</i>	179	tadalafil	102
STALEVO 200	88	SURE EDGE TEST	137	<i>tadalafil (pah)</i>	102
STALEVO 50	88	SURECHECK BLOOD		TAFINLAR	84
STALEVO 75	88	GLUCOSE TEST	137	TAGRISSO	84
STARLIX	62	SURE-FINE PEN		TAI DOC CONTROL	179
<i>stavudine</i>	95	NEEDLES	179	TAKHZYRO	156
STEGLATRO	62	SURE-JECT INSULIN		TALICIA	220
STEGLUJAN	62	SYRINGE	179	TALTZ	127
STELARA	126, 150	SURE-PEN	179	TALZENNA	84
STERILANCE PA	178	SURE-PREP ALCOHOL		TAMIFLU	96
STERILE TALC POWDER	215	PREP	179	<i>tamoxifen citrate</i>	84
<i>sterile water for irrigation</i>	188	SURESTEP GLUCOSE		<i>tamsulosin hcl</i>	152
STIMATE	144	CONTROL	179	TAPAZOLE	218
STIOLTO RESPIMAT	43	SURESTEP PRO HIGH		TAPERDEX 12-DAY	113
STIVARGA	84	GLUCOSE	179	TAPERDEX 7-DAY	114
STRATTERA	19	SURESTEP PRO LOW		TARCEVA	84
STRENSIQ	144	GLUCOSE	179	TARGADOX	217
STRIBILD	96	SURESTEP PRO NORMAL		TARGRETIN	84, 127
STRIVERDI RESPIMAT	43	GLUCOSE	179	Tarina 24 Fe	111
STROMECTOL	36	SURE-TEST EASYPLUS		TARKA	74
STROVITE FORTE	194	MINI TEST	137	TARON-C DHA	194
SUBLOCADE	34	SUSTIVA	96	Taron-Crystals	152
SUBOXONE	34	SUTENT	84	TARON-PREX	194
SUBSYS	34	Syeda	111	TASIGNA	84
SUCRAID	138	SYMBICORT	43	TASMAR	88
<i>sucralfate</i>	220	SYMBYAX	214	<i>tavaborole</i>	127
SULAR	101	SYMDEKO	215	TAVALISSE	156
<i>sulconazole nitrate</i>	127	SYMFI	96	TAYTULLA	111
<i>sulfacetamide sodium</i>	204	SYMFI LO	96	<i>tazarotene</i>	127
<i>sulfacetamide sodium (acne)</i>	127	SYMJEPI	223	TAZORAC	127
<i>sulfacetamide-prednisolone</i>	204	SYMLINPEN 120	62	Taztia Xt	101
<i>sulfadiazine</i>	216	SYMLINPEN 60	62	TAZVERIK	84
<i>sulfamethoxazole-trimethoprim</i>	76	SYMPAZAN	49	TECFIDERA	214
SULFAMYLYON	127	SYMPROIC	150	TEGRETOL	49
<i>sulfasalazine</i>	150	SYMTUZA	96	TEGRETOL-XR	49
Sulfatrim Pediatric	77	SYNAGIS	208	TEGSEDI	214
<i>sulindac</i>	25	SYNALAR	127	TEKTURNA	74
sumatriptan	184	SYNAREL	144	TEKTURNA HCT	74
<i>sumatriptan succinate</i>	184	SYNDROS	65	TEL CARE BLOOD	
<i>sumatriptan succinate refill</i>	184	SYNERA	127	GLUCOSE TEST	137
<i>sumatriptan-naproxen sodium</i>	184	SYNJARDY	62		

TELCARE GLUCOSE	
CONTROL	179
telmisartan	74
telmisartan-amlodipine	74
telmisartan-hctz	74
temazepam	160
TEMIXYS	96
TEMODAR	84
TEMOVATE	127, 128
temozolomide	84
TENCON	27
tenofovir disoproxil fumarate	96
TENORETIC 100	74
TENORETIC 50	75
TENORMIN	99
terazosin hcl	75
terbinafine hcl	66
terbutaline sulfate	43
terconazole	222
teriparatide (recombinant)	145
Terrell	150
TESSALON PERLES	115
TESTIM	35
testosterone	35, 36
testosterone cypionate	35
testosterone enanthate	35
tetrabenazine	214
tetracycline hcl	217
TEXACORT	128
tgt blood glucose test	137
tgt glucose	62
tgt lancing device	179
THALOMID	188
THEO-24	43
theophylline	43
theophylline er	43
THERANATAL ONE	194
Thermazene	128
THIOLA	152
THIOLA EC	152
thioridazine hcl	91
thiothixene	91
THRESHOLD IMT	179
THYMOGLOBULIN	188
THYROGEN	137
tiagabine hcl	49
TAZAC	101
TIBSOVO	84
TIGAN	65
TIGLUTIK	198
TIKOSYN	39
Tilia Fe	111
timolol maleate	99, 204
TIMOPTIC	204
TIMOPTIC OCUDOSE	204
TIMOPTIC-XE	204
tinidazole	77
TIROSINT	218
TIROSINT-SOL	218
Tis-U-Sol	188
TIVICAY	96
TIVICAY PD	96
tizanidine hcl	197
TOBI	21
TOBI PODHALER	21
TOBRADEX	204
TOBRADEX ST	205
tobramycin	21, 205
tobramycin-dexamethasone	205
TOBREX	205
TODAY SPONGE	222
todays health lancing device	179
todays health mini pen needles	179
todays health pen needles	179
todays health short pen needle	179
TOLAK	128
tolbutamide	62
tolcapone	88
tolmetin sodium	25
tolsura	66
tolterodine tartrate er	221
tolvaptan	145
TOPAMAX	49
TOPAMAX SPRINKLE	49
topcare clickfine pen needles	179
TOPICORT	128
TOPICORT SPRAY	128
topiramate	49
TOPROL XL	99
toremifene citrate	84
torsemide	139
TOSYMRA	184
TOUJEO MAX SOLOSTAR	62
TOUJEO SOLOSTAR	63
TOVIAZ	221
TRACLEER	102
TRADJENTA	63
tramadol hcl	34
tramadol hcl er	34
tramadol hcl er (biphasic)	34
tramadol-acetaminophen	34
trandolapril	75
trandolapril-verapamil hcl er	75
tranexamic acid	159
TRANSDERM-SCOP (1.5 MG)	65
TRANXENE-T	38
tranylcypromine sulfate	53
TRAVATAN Z	205
travoprost (bak free)	205
trazodone hcl	53
TRECATOR	78
TRELEGY ELLIPTA	43
TRELSTAR MIXJECT	85
TREMFYA	128
treprostinil	102
TRESIBA	63
TRESIBA FLEXTOUCH	63
tretinoin	85, 128
tretinoin microsphere	128
tretinoin microsphere pump	128
TRETEN	156
TREXALL	85
TREXIMET	184
TREZIX	34
Tri Femynor	111
triamcinolone acetonide	128, 189, 198
triامترنے	139
triامترنے-ہتس	140
triazolam	160
TRIBENZOR	75
TRICARE PRENATAL	
DHA ONE	194
TRICOR	70
Triderm	128
trientine hcl	188
Tri-Estarylla	111
trifluoperazine hcl	91
trifluridine	205
trihexyphenidyl hcl	88
TRIJARDY XR	63
TRIKAFTA	215
Tri-Legest Fe	111
TRILEPTAL	49
Tri-Linyah	111
TRILIPIX	70
TRILURON	197
Trilyte	161
trimethobenzamide hcl	65

<i>trimethoprim</i>	77	TWIRLA	111	ULTRATRAK ULTIMATE	
Tri-Mili	111	TYBOST	96	TEST	138
<i>trimipramine maleate</i>	53	Tydemey	111	ULTRAVATE	128
TRINATE	194	TYKERB	85	UNIFINE PENTIPS	181
<i>trinaz</i>	194	TYMLOS	145	UNIFINE PENTIPS PLUS	181
Trinessa (28)	111	TYSABRI	214	UNISTIK 1	181
TRINTELLIX	53	TYVASO	102	UNISTIK 2	181
Tri-Previfem	111	TYVASO REFILL	102	UNISTIK 2 COMFORT	181
TRIPTODUR	145	TYVASO STARTER	102	UNISTIK 2 EXTRA	181
Tri-Sprintec	111	UBRELVY	184	UNISTIK 2 NEONATAL	181
TRISTART ONE	194	UCERIS	36, 114	UNISTIK 2 NORMAL	181
<i>tri-tabs dha</i>	194	UDENYCA	159	UNISTIK 2 SUPER	181
TRIUMEQ	96	ULORIC	152	UNISTIK 3	181
TRI-VI-FLOR	194	ULTANE	150	UNISTIK 3 COMFORT	181
<i>tri-vi-floro</i>	194	ULTICARE INSULIN		UNISTIK 3 EXTRA	181
TRIVISC	197	SAFETY SYR	180	UNISTIK 3 NEONATAL	181
<i>tri-vitamin fluoride</i>	194	ULTICARE INSULIN		UNISTIK 3 NORMAL	181
Trivora (28)	111	SYRINGE	180	UNISTIK CZT COMFORT	181
Tri-Vylibra Lo	111	ULTICARE MICRO PEN		UNISTIK CZT NORMAL	181
TRIZIVIR	96	NEEDLES	180	UNISTRIP CONTROL	181
TROKENDI XR	49	ULTICARE MINI PEN		UNISTRIP1 GENERIC	138
<i>tropicamide</i>	205	NEEDLES	180	Unithroid	218
<i>trospium chloride er</i>	221	ULTICARE PEN NEEDLES		<i>up & up glucose</i>	63
TRUE METRIX BLOOD		.....	180	UPNEEQ	205
GLUCOSE TEST	138	ULTICARE SHORT PEN		UPTRAVI	102
TRUECONTROL		NEEDLES	180	UROCIT-K 10	152
GLUCOSE CONT LEV 0	179	ULTI-LANCE		UROCIT-K 5	152
TRUECONTROL		AUTOMATIC	180	UROXATRAL	152
GLUCOSE CONT LEV 1	179	ULTILET INSULIN		URSO 250	150
TRUEDRAW LANCING		SYRINGE SHORT	180	URSO FORTE	150
DEVICE	179	ULTIMA TEST	138	<i>ursodiol</i>	150
TRUEPLUS INSULIN		ULTRACET	34	UTIBRON NEOHALER	44
SYRINGE	180	ULTRALANCE	180	VAGIFEM	222
TRUEPLUS LANCETS 30G	180	ULTRAM	34	<i>valacyclovir hcl</i>	96
TRUETEST TEST	138	ULTRA-THIN II INS SYR		VALCHLOR	128
TRUETRACK TEST	138	SHORT	180	VALCYTE	96
TRULANCE	150	ULTRA-THIN II INSULIN		<i>valganciclovir hcl</i>	96
TRULICITY	63	SYRINGE	180	VALIUM	38
TRUSOPT	205	ULTRA-THIN II MINI PEN		<i>valproic acid</i>	49, 50
TRUVADA	96	NEEDLE	180	<i>valsartan</i>	75
TRUZONE PEAK FLOW		ULTRA-THIN II PEN		<i>valsartan-hydrochlorothiazide</i>	75
METER	180	NEEDLE SHORT	181	VALTOCO 10 MG DOSE	50
<i>tubing/wing tip</i>	180	ULTRA-THIN II PEN		VALTOCO 15 MG DOSE	50
TUDORZA PRESSAIR	44	NEEDLES	181	VALTOCO 20 MG DOSE	50
TUKYSA	85	ULTRATRAK PRO		VALTOCO 5 MG DOSE	50
Tulana	111	CONTROL	181	VALTREX	96
TURALIO	85	ULTRATRAK PRO TEST	138	<i>value plus glucose</i>	63
TUSSICAPS	115	ULTRATRAK ULTIMATE		<i>value plus lancing device</i>	181
TUXARIN ER	115	CONTROL	181	<i>valumark pen needles</i>	181
TUZISTRA XR	115			Vanadom	197

Vanatol Lq.....	27	vigabatrin.....	50	VONVENDI.....	156
VANCOCIN.....	77	Vigadrone.....	50	voriconazole.....	66
VANCOCIN HCL.....	77	VIGAMOX.....	205	VOSEVI.....	97
<i>vancomycin hcl</i>	77	VIIBRYD.....	53	VOTRIENT.....	85
Vandazole.....	222	VIIBRYD STARTER PACK	53	<i>vp-heme ob + dha</i>	195
VANISHPOINT INSULIN SYRINGE.....	181	VIMIZIM.....	145	<i>vp-pnv-dha</i>	195
Vanoxide-Hc.....	128	VIMOVO.....	25	VPRI.....	159
VARIBAR PUDDING.....	138	VIMPAT.....	50	VRAYLAR.....	91
VARUBI (180 MG DOSE)....	65	VINATE DHA RF.....	194	Vtol Lq.....	27
VASCEPA.....	70	VINATE II.....	194	VUMERITY.....	214
VASERETIC.....	75	VIOKACE.....	138	VUSION.....	129
VASOTEC.....	75	<i>viorele</i>	112	Vyfemla.....	112
VCF VAGINAL CONTRACEPTIVE.....	222	VIRACEPT.....	97	VYLEESI.....	214
VECAMYL.....	75	VIRAMUNE.....	97	VYNDAMAX.....	103
VECTICAL.....	129	VIRAMUNE XR.....	97	VYNDAQEL.....	103
VELETRI.....	102, 103	VIREAD.....	97	VYTONE.....	129
Velivet.....	112	<i>virt-pn dha</i>	194	VYTORIN.....	70
VELPHORO.....	150	<i>virt-pn plus</i>	194	VYVANSE.....	19, 20
VELTASSA.....	188	VISCO-3.....	197	VYZULTA.....	205
VELTIN.....	129	VISTARIL.....	38	WAKIX.....	20
VEMLIDY.....	97	VISTOGARD.....	64	<i>walgreens glucose</i>	63
VENCLEXTA.....	85	VISUDYNE.....	205	WAL-ITIN.....	68
VENCLEXTA STARTING PACK.....	85	VITAFOL FE+.....	194	<i>warfarin sodium</i>	45
<i>venlafaxine hcl</i>	53	VITAFOL GUMMIES.....	194	WEBCOL ALCOHOL PREP	
<i>venlafaxine hcl er</i>	53	VITAFOL STRIPS.....	194	LARGE.....	182
VENOFER.....	159	VITAFOL-NANO.....	195	WEBCOL ALCOHOL PREP	
VENTAVIS.....	103	VITAFOL-OB.....	195	MEDIUM.....	182
VENTOLIN HFA.....	44	VITAFOL-OB+DHA.....	195	<i>wegmans unifine pentips plus</i> ..	182
<i>verapamil hcl</i>	101	VITAFOL-ONE.....	195	WELCHOL.....	70
<i>verapamil hcl er</i>	101	VITAL-D RX.....	195	WELLBUTRIN SR.....	53
<i>verasens blood glucose test</i>	138	VITAMEDMD ONE		WELLBUTRIN XL.....	53
VERDESO.....	129	RX/QUATREFOLIC.....	195	Wera.....	112
VEREGEN.....	129	<i>vitamin b-complex 100</i>	195	WESTHROID.....	218
VERELAN.....	101	<i>vitamin d (ergocalciferol)</i>	223	WIDE-SEAL DIAPHRAGM	
VERELAN PM.....	101	<i>vitamin k1</i>	223	60.....	182
VERSACLOZ.....	91	<i>vitamins acd-fluoride</i>	195	WIDE-SEAL DIAPHRAGM	
VERZENIO.....	85	VITAPEARL.....	195	65.....	182
VESICARE.....	221	VITRAKVI.....	85	WIDE-SEAL DIAPHRAGM	
VFEND.....	66	VIVA DHA.....	195	70.....	182
VIBERZI.....	150	VIVAGUARD INO TEST		WIDE-SEAL DIAPHRAGM	
VIBRAMYCIN.....	217	STRIPS.....	138	75.....	182
VICTOZA.....	63	VIVELLE-DOT.....	147	WIDE-SEAL DIAPHRAGM	
VIDA MIA AUTOLET LANCING DEV.....	181	VIVITROL.....	64	80.....	182
VIDA MIA UNIFINE PENTIPS.....	181	VIVLODEX.....	25	WIDE-SEAL DIAPHRAGM	
VIEKIRA PAK.....	97	VIZIMPRO.....	85	85.....	182
		VOCAL POINT BLOOD		WIDE-SEAL DIAPHRAGM	
		GLUCOSE TEST.....	138	90.....	182
		VOGELXO.....	36	WIDE-SEAL DIAPHRAGM	
		VOGELXO PUMP.....	36	95.....	182
		<i>vol-tab rx</i>	195	WILATE.....	156

WINDMILL TRAINER	182	XPOVIO (40 MG ONCE WEEKLY).....	85	ZEMAIRA	216
WINRHO SDF	208	XPOVIO (40 MG TWICE WEEKLY).....	85	ZEMBRACE SYMTOUCH	184
Wixela Inhub	44	XPOVIO (40 MG TWICE WEEKLY).....	85	ZEMPLAR	145
WP THYROID	218	XPOVIO (60 MG ONCE WEEKLY).....	85	Zenatane	129
Wymzya Fe	112	XPOVIO (60 MG TWICE WEEKLY).....	85	ZENPEP	138
XADAGO	88	XPOVIO (80 MG ONCE WEEKLY).....	86	Zenedi	20
XALATAN	205	XPOVIO (80 MG TWICE WEEKLY).....	86	ZENZEDI	20
XALKORI	85	XTAMPZA ER	34	ZEPATIER	97
XANAX	38	XTANDI	86	ZEPOSIA	215
XANAX XR	38	XULANE	112	ZEPOSIA 7-DAY STARTER PACK	215
XARELTO	45	XULTOPHY	63	ZEPOSIA STARTER KIT	215
XARELTO STARTER PACK	45	XURIDEN	145	ZERIT	97
XATMEP	85	XYNTHA	156	ZERVIA TE	205
XCOPRI	50	XYNTHA SOLOFUSE	156	ZESTORETIC	75
XCOPRI (250 MG DAILY DOSE)	50	XYOSTED	36	ZESTRIL	75
XCOPRI (350 MG DAILY DOSE)	50	XYREM	214	ZETIA	70
XELJANZ	26	XYWAV	214	ZETONNA	198
XELJANZ XR	26	XYZAL ALLERGY 24HR	68	ZIAC	75
XELODA	85	XYZAL ALLERGY 24HR	68	ZIAGEN	97
XELPROS	205	CHILDRENS	68	ZIANA	129
XEMBIFY	208	YASMIN 28	112	zidovudine	97
XENAZINE	214	YAZ	112	ZIEXTENZO	159
XENLETA	77	yl folic acid	159	zileuton er	44
XEOMIN	198	YONSA	86	ZILXI	129
XEPI	129	YOSPRALA	156	ZIOPTAN	205
XERAC AC	129	YUPELRI	44	ziprasidone hcl	91
XERESE	129	Yuvafem	222	ziprasidone mesylate	91
XERMELO	150	ZADITOR	205	ZIPSOR	26
XGEVA	145	zafirlukast	44	ZIRGAN	205
XHANCE	198	zaleplon	160	ZITHROMAX	162
XIAFLEX	189	ZANAFLEX	197	ZITHROMAX TRI-PAK	162
XIFAXAN	77	Zarah	112	ZITHROMAX Z-PAK	162
XIGDUO XR	63	ZARONTIN	50	ZOCOR	70
XXIIDRA	205	ZARXIO	159	ZOFRAN	65
XIMINO	217	ZATEAN-PN DHA	195	ZOHYDRO ER	35
XODOL	34	ZATEAN-PN PLUS	195	zoledronic acid	145
XOFLUZA (40 MG DOSE)	97	ZAVESCA	159	ZOLINZA	86
XOFLUZA (80 MG DOSE)	97	zcort 7-day	114	zolmitriptan	184
XOLAIR	44	Zebutal	27	ZOLOFT	54
XOLEGEL	129	ZEGERID	220	zolpidem tartrate	160
XOPENEX	44	ZEGERID OTC	221	zolpidem tartrate er	160
XOPENEX CONCENTRATE	44	ZEJULA	86	ZOMACTON	145
XOPENEX HFA	44	ZELAPAR	88	ZOMACTON (FOR ZOMA- JET 10)	145
XOSPATA	85	ZELBORAF	86	ZOMIG	184
XPOVIO (100 MG ONCE WEEKLY)	85	ZELNORM	150	ZOMIG ZMT	184
				ZONALON	129
				ZONEGRAN	50
				zonisamide	50

ZONTIVITY	156
ZORBTIVE	145
ZORTRESS	189
ZORVOLEX	26
Zovia 1/35E (28)	112
ZOVIRAX	97, 129
ZUBSOLV	35
Zumandimine	112
ZUPLENZ	65
ZYCLARA	129
ZYCLARA PUMP	129
ZYDELIG	86
ZYFLO	44
ZYKADIA	86
ZYLET	205
ZYLOPRIM	152
ZYMAXID	205
ZYPITAMAG	70
ZYPREXA	91
ZYPREXA RELPREVV	92
ZYPREXA ZYDIS	92
ZYRTEC ALLERGY	68
ZYRTEC-D ALLERGY & CONGESTION	115
ZYTIGA	86
ZYVOX	77