2027

Formulary

(List of Covered Drugs or "Drug List")

Wellcare Delaware First Health Dual Align (HMO-POS D-SNP)

08

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

HPMS Approved Formulary File Submission ID 27151

This formulary was updated on 10/15/2026. For more recent information or other questions, please contact us, Wellcare Member Services at **1-844-536-2167** (TTY users should call **711**), between October 1 and March 31, representatives are available seven days a week, 8 a.m. to 8 p.m., between April 1 and September 30, representatives are available Monday–Friday, 8 a.m. to 8 p.m., or visit **go.wellcare.com/DE**.

wellcare® With delaware first health®

Y0020_WCM_7042869_ENG_CV00_C 07012026 Final 08
7165518_DE7WCMFORENG_M_CV08
10/15/2026 ©Wellcare 2026

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

When this Drug List (formulary) refers to "we," "us" or "our," it means Wellcare. When it refers to "plan" or "our plan," it means Wellcare Delaware First Health Dual Align (HMO-POS D-SNP).

This document includes a Drug List (formulary) for our plan which is current as of 10/15/2026. For an updated Drug List (formulary), please contact us. Our contact information, along with the date we last updated the Drug List (formulary), appears on the front and back cover pages.

You must generally use network pharmacies to use your prescription drug benefit. Benefits, formulary, pharmacy network, and/or copayments/coinsurance may change on January 1, 2027, and from time to time during the year.

What is the Wellcare Delaware First Health Dual Align (HMO-POS D-SNP) formulary?

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

Can the formulary change?

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

Changes that can affect you this year: In the below cases, you will be affected by coverage changes during the year:

- **Immediate substitutions of certain new versions of brand name drugs and original biological products.** We may immediately remove a drug from our formulary if we are replacing it with a certain new version of that drug that will appear on the same or lower cost-sharing tier and with the same or fewer restrictions. When we add a new version of a drug to our formulary, we may decide to keep the brand name drug or original biological product on our formulary, but immediately move it to a different cost-sharing tier or add new restrictions.

  We can make these immediate changes only if we are adding a new generic version of a brand name drug, or adding certain new biosimilar versions of an original biological product, that was already on the formulary (for example, adding an interchangeable biosimilar that can be substituted for an original biological product by a pharmacy without a new prescription).

  If you are currently taking the brand name drug or original biological product, we may not tell you in advance before we make an immediate change, but we will later provide you with information about the specific change(s) we have made.

  If we make such a change, you or your prescriber can ask us to make an exception and continue to cover for you the drug that is being changed. For more information, see the section below titled “How do I request an exception to the Wellcare Delaware First Health Dual Align (HMO-POS D-SNP)’s formulary?”

  Some of these drug types may be new to you. For more information, see the section below titled “What are original biological products and how are they related to biosimilars?”

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

  If we make these other changes, you or your prescriber can ask us to make an exception for you and continue to cover the drug you have been taking. The notice we provide you will also include information on how to request an exception, and you can also find information in the section below entitled "How do I request an exception to the Wellcare Delaware First Health Dual Align (HMO-POS D-SNP)'s formulary?"

Changes that will not affect you if you are currently taking the drug. Generally, if you are taking a drug on our 2027 formulary that was covered at the beginning of the year, we will not discontinue or reduce coverage of the drug during the 2027 coverage year except as described above. This means these drugs will remain available at the same cost sharing and with no new restrictions for those members taking them for the remainder of the coverage year. You will not get direct notice this year about changes that do not affect you. However, on January 1 of the next year, such changes would affect you, and it is important to check the formulary for the new benefit year for any changes to drugs.

The enclosed formulary is current as of 10/15/2026. To get updated information about the drugs covered by our plan please contact us. Our contact information appears on the front and back cover pages.

The formulary will be updated monthly and posted on our website. To get an updated printed formulary or to get information about the drugs covered by our plan, please visit our website or call Member Services at our contact information on the front and back cover pages.

How do I use the formulary?

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

Medical Condition

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

Alphabetical Listing

If you are not sure what category to look under, you should look for your drug in the Index that begins on page INDEX-1. The Index provides an alphabetical list of all of the drugs included in this document. Both brand name drugs and generic drugs are listed in the Index. Look in the Index and find your drug. Next to your drug, you will see the page number where you can find coverage information. Turn to the page listed in the Index and find the name of your drug in the first column of the list.

What are generic drugs?

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

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

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

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

Are there any restrictions on my coverage?

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

- **Prior Authorization:** Our plan requires you or your prescriber to get prior authorization for certain drugs. This means that you will need to get approval from our plan based on specific criteria before you fill your prescriptions. If you don't get approval, our plan may not cover the drug.
- **Quantity Limits:** For certain drugs, our plan limits the amount of the drug that our plan will cover. For example, our plan provides 18 tablets per prescription for rizatriptan 5mg. This may be in addition to a standard one-month or three-month supply.
- **Step Therapy:** In some cases, our plan requires you to first try certain drugs to treat your medical condition before we will cover another drug for that condition. For example, if Drug A and Drug B both treat your medical condition, our plan may not cover Drug B unless you try Drug A first. If Drug A does not work for you, our plan will then cover Drug B.

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

You can ask our plan to make an exception to these restrictions or limits or for a list of other, similar drugs that may treat your health condition. See the section, "How do I request an exception to the Wellcare Delaware First Health Dual Align (HMO-POS D-SNP)'s formulary?" on page IX for information about how to request an exception.

What are over-the-counter (OTC) drugs?

OTC drugs are non-prescription drugs that are not normally covered by a Medicare Prescription Drug Plan. Our plan pays for certain OTC drugs. This includes OTC drugs like: vitamins, decongestants, antihistamines, pain relivers (acetaminophen, ibuprofen, aspirin), and supplements. Our plan will provide these OTC drugs at no cost to you. The cost to our plan of these OTC drugs will not count toward your total Part D drug costs.

What if my drug is not on the formulary?

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

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

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

How do I request an exception to the Wellcare Delaware First Health Dual Align (HMO-POS D-SNP)'s formulary?

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

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

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

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

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

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

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

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

If you experience a level of care change (such as being discharged or admitted to a long-term care facility), your physician or pharmacy can call our Provider Service Center and request a one-time override. This one-time override will be up to a 30-day supply (unless you have a prescription written for fewer days).

For more information

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

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

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

Our plan's formulary

The formulary below provides coverage information about the drugs covered by our plan. If you have trouble finding your drug in the list, turn to the Index that begins on page INDEX-1.

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

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

- **NM** means the drug is not available via your monthly mail service benefit. This is noted in the Requirements/ Limits column of your formulary. You may be able to receive more than one month's supply of most of the drugs on your formulary via mail service at a reduced cost share. Please see Chapter 5 of your Evidence of Coverage for more information.
- **PA** stands for Prior Authorization: Please see page VII for details.
- **PA-NS** stands for Prior Authorization for New Starts: This means that if this drug is new to you, you will need to get approval from us before you fill your prescription. If you are taking this drug at the time of enrollment, you will not be required to meet criteria for approval.

- **B/D** stands for Covered under Medicare B or D: This drug may be eligible for payment under Medicare Part B or Part D. You (or your physician) are required to get prior authorization from us to determine that this drug is covered under Medicare Part D before you fill your prescription for this drug. Without prior approval, we may not cover this drug.
- **QL** stands for Quantity Limits: Please see page VII for details.
- **LA** stands for Limited Access medication. This prescription may be available only at certain pharmacies. For more information consult your Pharmacy Directory or call Member Services at 1-844-536-2167. TTY users should call 711, between October 1 and March 31, representatives are available seven days a week, 8 a.m. to 8 p.m., between April 1 and September 30, representatives are available Monday–Friday, 8 a.m. to 8 p.m. or visit go.wellcare.com/DE.
- **ST** stands for Step Therapy: Please see page VII for details.
- **^** stands for Drug may be available for up to a 30-day supply only.

Drug tier copayment/coinsurance amounts

Prescription drugs are grouped into one of six tiers. To find out which tier your drug is in, look in the Drug Tier column of the formulary that begins on page 1. For more detailed information about your out-of-pocket costs for prescriptions, including any deductible that may apply, please refer to your Evidence of Coverage and other plan materials.

- Tier 0 (Non-Medicare Rx/OTC Drugs) includes some prescription and over-the-counter (OTC) drugs.
    - Copayment: $0
- Tier 1 (Generic) includes preferred generic drugs and may include some brand drugs.
    - Copayment: $0
- Tier 2 (Preferred Brand) includes preferred brand drugs and may include some generic drugs.
    - Copayment: $0
- Tier 3 (Non-Preferred Drug) includes non-preferred brand and generic drugs.
    - Copayment: $0
- Tier 4 (Injectable Drugs) includes select drugs that are administered by injection or used to prevent illness (vaccines).
    - Copayment: $0
- Tier 5 (Specialty Tier) includes high-cost brand and generic drugs. Drugs in this tier are not eligible for exceptions for payment at a lower tier.
    - Copayment: $0
- Tier 6 (Select Care Drugs) includes select generic and/or brand drugs used to treat specific conditions.
    - Copayment: $0

Consult your Evidence of Coverage or Summary of Benefits for your applicable co-pays/coinsurance and amounts.

Table of Contents

ANTI - INFECTIVES 3
ANTINEOPLASTIC / IMMUNOSUPPRESSANT DRUGS 18
AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH 35
CARDIOVASCULAR, HYPERTENSION / LIPIDS 60
DERMATOLOGICALS/TOPICAL THERAPY 72
DIAGNOSTICS / MISCELLANEOUS AGENTS 79
EAR, NOSE / THROAT MEDICATIONS 82
ENDOCRINE/DIABETES 83
GASTROENTEROLOGY 91
IMMUNOLOGY, VACCINES / BIOTECHNOLOGY 96
MISCELLANEOUS SUPPLIES 102
MUSCULOSKELETAL / RHEUMATOLOGY 102
OBSTETRICS / GYNECOLOGY 105
OPHTHALMOLOGY 114
OVER THE COUNTER (OTC) AND RX AGENTS 118
RESPIRATORY AND ALLERGY 200
UROLOGICALS 206
VITAMINS, HEMATINICS / ELECTROLYTES 207

Drug Name	Drug Tier	Requirements/Limits
ANTI - INFECTIVES		
ANTIFUNGAL AGENTS		
amphotericin b injection recon soln 50 mg	$0 (1)	B/D
amphotericin b liposome intravenous suspension for reconstitution 50 mg	$0 (5^)	B/D
caspofungin intravenous recon soln 50 mg, 70 mg	$0 (3)	
clotrimazole mucous membrane troche 10 mg	$0 (1)	
CRESEMBA ORAL CAPSULE 186 MG, 74.5 MG	$0 (5^)	PA
fluconazole in nacl (iso-osm) intravenous piggyback 200 mg/100 ml	$0 (3)	PA
fluconazole in nacl (iso-osm) intravenous piggyback 400 mg/200 ml	$0 (1)	PA
fluconazole oral suspension for reconstitution 10 mg/ml, 40 mg/ml	$0 (1)	
fluconazole oral tablet 100 mg, 150 mg, 200 mg, 50 mg	$0 (1)	
flucytosine oral capsule 250 mg, 500 mg	$0 (5^)	PA
griseofulvin microsize oral suspension 125 mg/5 ml	$0 (3)	
griseofulvin microsize oral tablet 500 mg	$0 (3)	
griseofulvin ultramicrosize oral tablet 125 mg, 250 mg	$0 (3)	
itraconazole oral capsule 100 mg	$0 (3)	QL (120 EA per 30 days)
ketoconazole oral tablet 200 mg	$0 (1)	PA
micafungin intravenous recon soln 100 mg, 50 mg	$0 (3)	

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table. 10/15/2026

Drug Name	Drug Tier	Requirements/Limits
nystatin oral suspension 100,000 unit/ml	$0 (1)	
nystatin oral tablet 500,000 unit	$0 (1)	
posaconazole oral tablet,delayed release (dr/ec) 100 mg	$0 (3)	PA; QL (96 EA per 30 days)
terbinafine hcl oral tablet 250 mg	$0 (1)	
voriconazole intravenous recon soln 200 mg	$0 (3)	PA
voriconazole oral suspension for reconstitution 200 mg/5 ml (40 mg/ml)	$0 (5^)	PA
voriconazole oral tablet 200 mg, 50 mg	$0 (3)	PA
ANTIVIRALS		
abacavir oral solution 20 mg/ml	$0 (1)	
abacavir oral tablet 300 mg	$0 (1)	
abacavir-lamivudine oral tablet 600-300 mg	$0 (1)	
acyclovir oral capsule 200 mg	$0 (1)	
acyclovir oral suspension 200 mg/5 ml	$0 (3)	
acyclovir oral tablet 400 mg, 800 mg	$0 (1)	
acyclovir sodium intravenous solution 50 mg/ml	$0 (3)	B/D
adefovir oral tablet 10 mg	$0 (3)	
amantadine hcl oral capsule 100 mg	$0 (1)	
amantadine hcl oral solution 50 mg/5 ml	$0 (1)	
amantadine hcl oral tablet 100 mg	$0 (1)	
APTIVUS ORAL CAPSULE 250 MG	$0 (5^)	
atazanavir oral capsule 150 mg, 200 mg, 300 mg	$0 (1)	
BARACLUDE ORAL SOLUTION 0.05 MG/ML	$0 (3)	

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table. 10/15/2026

Drug Name	Drug Tier	Requirements/Limits
BIKTARVY ORAL TABLET 30-120-15 MG, 50-200-25 MG	$0 (5^)	
CIMDUO ORAL TABLET 300-300 MG	$0 (5^)	
darunavir oral tablet 600 mg	$0 (3)	QL (60 EA per 30 days)
darunavir oral tablet 800 mg	$0 (3)	QL (30 EA per 30 days)
DELSTRIGO ORAL TABLET 100-300-300 MG	$0 (5^)	
DESCOVY ORAL TABLET 120-15 MG, 200-25 MG	$0 (5^)	QL (30 EA per 30 days)
DOVATO ORAL TABLET 50-300 MG	$0 (5^)	
EDURANT PED ORAL TABLET FOR SUSPENSION 2.5 MG	$0 (3)	
efavirenz oral tablet 600 mg	$0 (1)	
efavirenz-emtricitabin-tenofov oral tablet 600-200-300 mg	$0 (3)	
efavirenz-lamivu-tenofov disop oral tablet 400-300-300 mg, 600-300-300 mg	$0 (5^)	
emtricitabine oral capsule 200 mg	$0 (1)	
emtricitabine-tenofovir (tdf) oral tablet 100-150 mg, 167-250 mg, 200-300 mg	$0 (3)	QL (30 EA per 30 days)
emtricitabine-tenofovir (tdf) oral tablet 133-200 mg	$0 (5^)	QL (30 EA per 30 days)
emtricita-rilpivirine-tenof df oral tablet 200-25-300 mg	$0 (5^)	
EMTRIVA ORAL SOLUTION 10 MG/ML	$0 (3)	
entecavir oral tablet 0.5 mg, 1 mg	$0 (1)	
etravirine oral tablet 100 mg, 200 mg	$0 (3)	
EVOTAZ ORAL TABLET 300-150 MG	$0 (5^)	

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table. 10/15/2026

Drug Name	Drug Tier	Requirements/Limits
famciclovir oral tablet 125 mg, 250 mg, 500 mg	$0 (1)	
fosamprenavir oral tablet 700 mg	$0 (3)	
GENVOYA ORAL TABLET 150-150-200-10 MG	$0 (5^)	
IDVYNSO ORAL TABLET 100-0.25 MG	$0 (5^)	
INTELENCE ORAL TABLET 25 MG	$0 (2)	
ISENTRESS HD ORAL TABLET 600 MG	$0 (5^)	
ISENTRESS ORAL POWDER IN PACKET 100 MG	$0 (5^)	
ISENTRESS ORAL TABLET 400 MG	$0 (5^)	
ISENTRESS ORAL TABLET,CHEWABLE 100 MG	$0 (5^)	
ISENTRESS ORAL TABLET,CHEWABLE 25 MG	$0 (3)	
JULUCA ORAL TABLET 50-25 MG	$0 (5^)	
KALETRA ORAL SOLUTION 400-100 MG/5 ML	$0 (3)	
lamivudine oral solution 10 mg/ml	$0 (1)	
lamivudine oral tablet 100 mg, 150 mg, 300 mg	$0 (1)	
lamivudine-zidovudine oral tablet 150-300 mg	$0 (1)	
LEDIPASVIR-SOFOSBUVIR ORAL TABLET 90-400 MG	$0 (5^)	PA; QL (28 EA per 28 days)
LIVTENCITY ORAL TABLET 200 MG	$0 (5^)	PA; LA; QL (120 EA per 30 days)
lopinavir-ritonavir oral tablet 100-25 mg, 200-50 mg	$0 (1)	
maraviroc oral tablet 150 mg, 300 mg	$0 (5^)	
nevirapine oral suspension 50 mg/5 ml	$0 (1)	
nevirapine oral tablet 200 mg	$0 (1)	

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table. 10/15/2026

Drug Name	Drug Tier	Requirements/Limits
nevirapine oral tablet extended release 24 hr 400 mg	$0 (1)	
NORVIR ORAL POWDER IN PACKET 100 MG	$0 (2)	
ODEFSEY ORAL TABLET 200-25-25 MG	$0 (5^)	
oseltamivir oral capsule 30 mg	$0 (1)	QL (168 EA per 365 days)
oseltamivir oral capsule 45 mg, 75 mg	$0 (1)	QL (84 EA per 365 days)
oseltamivir oral suspension for reconstitution 6 mg/ml	$0 (1)	QL (1080 ML per 365 days)
PAXLOVID ORAL TABLETS,DOSE PACK 150 MG (10)- 100 MG (10)	$0 (2)	QL (20 EA per 30 days)
PAXLOVID ORAL TABLETS,DOSE PACK 150 MG (6)- 100 MG (5)	$0 (2)	QL (11 EA per 30 days)
PAXLOVID ORAL TABLETS,DOSE PACK 300 MG (150 MG X 2)-100 MG	$0 (2)	QL (30 EA per 30 days)
PIFELTRO ORAL TABLET 100 MG	$0 (5^)	
PREVYMIS ORAL TABLET 240 MG, 480 MG	$0 (5^)	PA; QL (28 EA per 28 days)
PREZCOBIX ORAL TABLET 675-150 MG, 800-150 MG-MG	$0 (5^)	
PREZISTA ORAL SUSPENSION 100 MG/ML	$0 (5^)	QL (400 ML per 30 days)
PREZISTA ORAL TABLET 150 MG	$0 (3)	QL (240 EA per 30 days)
PREZISTA ORAL TABLET 75 MG	$0 (3)	QL (480 EA per 30 days)
REYATAZ ORAL POWDER IN PACKET 50 MG	$0 (5^)	
ribavirin oral capsule 200 mg	$0 (1)	
ribavirin oral tablet 200 mg	$0 (1)	
rilpivirine hcl oral tablet 25 mg	$0 (3)	
rimantadine oral tablet 100 mg	$0 (3)	
ritonavir oral tablet 100 mg	$0 (1)	

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table. 10/15/2026

Drug Name	Drug Tier	Requirements/Limits
RUKOBIA ORAL TABLET EXTENDED RELEASE 12 HR 600 MG	$0 (5^)	
SELZENTRY ORAL SOLUTION 20 MG/ML	$0 (5^)	
SOFOSBUVIR-VELPATASVIR ORAL TABLET 400-100 MG	$0 (5^)	PA; QL (28 EA per 28 days)
STRIBILD ORAL TABLET 150-150-200-300 MG	$0 (5^)	
SUNLENCA ORAL TABLET 300 MG, 300 MG (4-TABLET PACK), 300 MG (5-TABLET PACK)	$0 (5^)	
SYMTUZA ORAL TABLET 800-150-200-10 MG	$0 (5^)	
tenofovir disoproxil fumarate oral tablet 300 mg	$0 (1)	
TIVICAY ORAL TABLET 50 MG	$0 (5^)	
TIVICAY PD ORAL TABLET FOR SUSPENSION 5 MG	$0 (5^)	
TRIUMEQ ORAL TABLET 600-50-300 MG	$0 (5^)	
TRIUMEQ PD ORAL TABLET FOR SUSPENSION 60-5-30 MG	$0 (3)	
valacyclovir oral tablet 1 gram, 500 mg	$0 (1)	
valganciclovir oral recon soln 50 mg/ml	$0 (5^)	
valganciclovir oral tablet 450 mg	$0 (2)	
VIRACEPT ORAL TABLET 250 MG, 625 MG	$0 (3)	
VIREAD ORAL POWDER 40 MG/SCOOP (40 MG/GRAM)	$0 (5^)	
VIREAD ORAL TABLET 150 MG, 250 MG	$0 (5^)	
VIREAD ORAL TABLET 200 MG	$0 (2)	
VOSEVI ORAL TABLET 400-100-100 MG	$0 (5^)	PA; QL (28 EA per 28 days)
XOFLUZA ORAL TABLET 40 MG, 80 MG	$0 (3)	
zidovudine oral capsule 100 mg	$0 (1)	

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table. 10/15/2026

Drug Name	Drug Tier	Requirements/Limits
zidovudine oral syrup 10 mg/ml	$0 (1)	
zidovudine oral tablet 300 mg	$0 (1)	
CEPHALOSPORINS		
cefaclor oral capsule 250 mg, 500 mg	$0 (1)	
cefaclor oral suspension for reconstitution 250 mg/5 ml	$0 (1)	
cefadroxil oral capsule 500 mg	$0 (1)	
cefadroxil oral suspension for reconstitution 250 mg/5 ml	$0 (3)	
cefadroxil oral suspension for reconstitution 500 mg/5 ml	$0 (1)	
cefazolin injection recon soln 1 gram	$0 (3)	
cefazolin injection recon soln 500 mg	$0 (1)	
cefazolin intravenous recon soln 10 gram	$0 (3)	
cefdinir oral capsule 300 mg	$0 (1)	
cefdinir oral suspension for reconstitution 125 mg/5 ml, 250 mg/5 ml	$0 (1)	
cefepime injection recon soln 1 gram, 2 gram	$0 (3)	
cefixime oral capsule 400 mg	$0 (1)	
cefixime oral suspension for reconstitution 100 mg/5 ml, 200 mg/5 ml	$0 (3)	
cefoxitin intravenous recon soln 1 gram, 10 gram, 2 gram	$0 (1)	
cefpodoxime oral suspension for reconstitution 100 mg/5 ml	$0 (3)	
cefpodoxime oral suspension for reconstitution 50 mg/5 ml	$0 (1)	
cefpodoxime oral tablet 100 mg, 200 mg	$0 (3)	

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table. 10/15/2026

Drug Name	Drug Tier	Requirements/Limits
cefprozil oral suspension for reconstitution 125 mg/5 ml	$0 (1)	
cefprozil oral suspension for reconstitution 250 mg/5 ml	$0 (3)	
cefprozil oral tablet 250 mg, 500 mg	$0 (1)	
ceftaroline fosamil intravenous recon soln 400 mg, 600 mg	$0 (5^)	
ceftazidime injection recon soln 1 gram, 2 gram, 6 gram	$0 (3)	
ceftriaxone injection recon soln 1 gram, 10 gram, 2 gram	$0 (3)	
ceftriaxone injection recon soln 250 mg, 500 mg	$0 (1)	
cefuroxime axetil oral tablet 250 mg, 500 mg	$0 (1)	
cefuroxime sodium injection recon soln 750 mg	$0 (1)	
cefuroxime sodium intravenous recon soln 1.5 gram	$0 (1)	
cephalexin oral capsule 250 mg, 500 mg	$0 (1)	
cephalexin oral suspension for reconstitution 125 mg/5 ml, 250 mg/5 ml	$0 (1)	
tazicef injection recon soln 1 gram, 2 gram, 6 gram	$0 (3)	
ERYTHROMYCINS / OTHER MACROLIDES		
azithromycin intravenous recon soln 500 mg	$0 (3)	
azithromycin oral suspension for reconstitution 100 mg/5 ml, 200 mg/5 ml	$0 (1)	
azithromycin oral tablet 250 mg, 250 mg (6 pack), 500 mg, 500 mg (3 pack), 600 mg	$0 (1)	

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table. 10/15/2026

Drug Name	Drug Tier	Requirements/Limits
clarithromycin oral suspension for reconstitution 125 mg/5 ml	$0 (1)	
clarithromycin oral suspension for reconstitution 250 mg/5 ml	$0 (3)	
clarithromycin oral tablet 250 mg, 500 mg	$0 (1)	
clarithromycin oral tablet extended release 24 hr 500 mg	$0 (1)	
erythromycin oral tablet 250 mg, 500 mg	$0 (3)	
erythromycin oral tablet,delayed release (dr/ec) 250 mg, 333 mg, 500 mg	$0 (1)	
fidaxomicin oral tablet 200 mg	$0 (5^)	QL (20 EA per 10 days)
MISCELLANEOUS ANTIINFECTIVES		
albendazole oral tablet 200 mg	$0 (3)	
amikacin injection solution 500 mg/2 ml	$0 (3)	
ARIKAYCE INHALATION SUSPENSION FOR NEBULIZATION 590 MG/8.4 ML	$0 (5^)	PA; LA
atovaquone oral suspension 750 mg/5 ml	$0 (1)	
atovaquone-proguanil oral tablet 250-100 mg	$0 (3)	
atovaquone-proguanil oral tablet 62.5-25 mg	$0 (1)	
aztreonam injection recon soln 1 gram, 2 gram	$0 (3)	
CAYSTON INHALATION SOLUTION FOR NEBULIZATION 75 MG/ML	$0 (5^)	PA; LA; QL (84 ML per 56 days)
chloroquine phosphate oral tablet 250 mg, 500 mg	$0 (3)	

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table. 10/15/2026

Drug Name	Drug Tier	Requirements/Limits
clindamycin hcl oral capsule 150 mg, 300 mg, 75 mg	$0 (1)	
clindamycin in 5 % dextrose intravenous piggyback 300 mg/50 ml, 900 mg/50 ml	$0 (1)	
clindamycin in 5 % dextrose intravenous piggyback 600 mg/50 ml	$0 (3)	
clindamycin phosphate injection solution 150 (mg/ml) (4 ml), 150 (mg/ml) (6 ml), 150 mg/ml	$0 (1)	
COARTEM ORAL TABLET 20-120 MG	$0 (3)	
colistin (colistimethate na) injection recon soln 150 mg	$0 (3)	QL (30 EA per 10 days)
dapsone oral tablet 100 mg, 25 mg	$0 (1)	
daptomycin intravenous recon soln 500 mg	$0 (3)	
ertapenem injection recon soln 1 gram	$0 (3)	QL (14 EA per 14 days)
ethambutol oral tablet 100 mg, 400 mg	$0 (1)	
gentamicin in nacl (iso-osm) intravenous piggyback 100 mg/100 ml, 60 mg/50 ml, 80 mg/100 ml, 80 mg/50 ml	$0 (1)	
gentamicin injection solution 40 mg/ml	$0 (1)	
hydroxychloroquine oral tablet 200 mg	$0 (1)	
imipenem-cilastatin intravenous recon soln 250 mg	$0 (1)	
imipenem-cilastatin intravenous recon soln 500 mg	$0 (3)	
IMPAVIDO ORAL CAPSULE 50 MG	$0 (5^)	PA
isoniazid oral solution 50 mg/5 ml	$0 (1)	
isoniazid oral tablet 100 mg, 300 mg	$0 (1)	

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table. 10/15/2026

Drug Name	Drug Tier	Requirements/Limits
ivermectin oral tablet 3 mg	$0 (2)	PA; QL (20 EA per 30 days)
ivermectin oral tablet 6 mg	$0 (2)	PA; QL (8 EA per 30 days)
linezolid in dextrose 5% intravenous piggyback 600 mg/300 ml	$0 (3)	
linezolid oral suspension for reconstitution 100 mg/5 ml	$0 (5^)	QL (1800 ML per 30 days)
linezolid oral tablet 600 mg	$0 (3)	QL (60 EA per 30 days)
mefloquine oral tablet 250 mg	$0 (1)	
meropenem intravenous recon soln 1 gram	$0 (2)	QL (30 EA per 10 days)
meropenem intravenous recon soln 500 mg	$0 (2)	QL (10 EA per 10 days)
metronidazole in nacl (iso-os) intravenous piggyback 500 mg/100 ml	$0 (1)	
metronidazole oral tablet 250 mg, 500 mg	$0 (1)	
neomycin oral tablet 500 mg	$0 (1)	
nitazoxanide oral tablet 500 mg	$0 (5^)	QL (12 EA per 30 days)
pentamidine inhalation recon soln 300 mg	$0 (1)	B/D; QL (1 EA per 28 days)
pentamidine injection recon soln 300 mg	$0 (1)	
praziquantel oral tablet 600 mg	$0 (3)	
PRIFTIN ORAL TABLET 150 MG	$0 (3)	
PRIMAQUINE ORAL TABLET 26.3 MG (15 MG BASE)	$0 (3)	
pyrazinamide oral tablet 500 mg	$0 (1)	
pyrimethamine oral tablet 25 mg	$0 (5^)	PA
quinine sulfate oral capsule 324 mg	$0 (3)	PA
rifabutin oral capsule 150 mg	$0 (1)	
rifampin intravenous recon soln 600 mg	$0 (1)	
rifampin oral capsule 150 mg, 300 mg	$0 (1)	

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table. 10/15/2026

Drug Name	Drug Tier	Requirements/Limits
SIRTURO ORAL TABLET 100 MG, 20 MG	$0 (5^)	PA; LA
STREPTOMYCIN INTRAMUSCULAR RECON SOLN 1 GRAM	$0 (5^)	QL (60 EA per 30 days)
tigecycline intravenous recon soln 50 mg	$0 (3)	
tinidazole oral tablet 250 mg, 500 mg	$0 (1)	
tobramycin in 0.225 % nacl inhalation solution for nebulization 300 mg/5 ml	$0 (5^)	PA; QL (280 ML per 28 days)
tobramycin sulfate injection solution 10 mg/ml, 40 mg/ml	$0 (1)	
vancomycin intravenous recon soln 1,000 mg	$0 (3)	QL (20 EA per 10 days)
vancomycin intravenous recon soln 10 gram	$0 (3)	QL (2 EA per 10 days)
vancomycin intravenous recon soln 500 mg	$0 (1)	QL (10 EA per 10 days)
vancomycin intravenous recon soln 750 mg	$0 (3)	QL (27 EA per 10 days)
vancomycin oral capsule 125 mg	$0 (3)	QL (40 EA per 10 days)
vancomycin oral capsule 250 mg	$0 (3)	QL (80 EA per 10 days)
XIFAXAN ORAL TABLET 200 MG	$0 (2)	PA; QL (9 EA per 30 days)
XIFAXAN ORAL TABLET 550 MG	$0 (2)	PA; QL (90 EA per 30 days)
PENICILLINS		
amoxicillin oral capsule 250 mg, 500 mg	$0 (1)	
amoxicillin oral suspension for reconstitution 125 mg/5 ml, 200 mg/5 ml, 250 mg/5 ml, 400 mg/5 ml	$0 (1)	
amoxicillin oral tablet 500 mg, 875 mg	$0 (1)	
amoxicillin oral tablet,chewable 125 mg, 250 mg	$0 (1)	

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table. 10/15/2026

Drug Name	Drug Tier	Requirements/Limits
amoxicillin-pot clavulanate oral suspension for reconstitution 200-28.5 mg/5 ml, 250-62.5 mg/5 ml, 400-57 mg/5 ml, 600-42.9 mg/5 ml	$0 (1)	
amoxicillin-pot clavulanate oral tablet 250-125 mg, 500-125 mg, 875-125 mg	$0 (1)	
amoxicillin-pot clavulanate oral tablet extended release 12 hr 1,000-62.5 mg	$0 (1)	
ampicillin oral capsule 500 mg	$0 (1)	
ampicillin sodium injection recon soln 1 gram, 2 gram	$0 (3)	
ampicillin sodium injection recon soln 10 gram	$0 (1)	
ampicillin-sulbactam injection recon soln 1.5 gram, 15 gram, 3 gram	$0 (1)	
BICILLIN L-A INTRAMUSCULAR SYRINGE 1,200,000 UNIT/2 ML, 2,400,000 UNIT/4 ML, 600,000 UNIT/ML	$0 (3)	
dicloxacillin oral capsule 250 mg, 500 mg	$0 (1)	
nafcillin injection recon soln 1 gram, 2 gram	$0 (1)	
nafcillin injection recon soln 10 gram	$0 (5^)	
oxacillin injection recon soln 1 gram	$0 (1)	
oxacillin injection recon soln 10 gram, 2 gram	$0 (3)	
PENICILLIN G POT IN DEXTROSE INTRAVENOUS PIGGYBACK 2 MILLION UNIT/50 ML, 3 MILLION UNIT/50 ML	$0 (3)	
penicillin g potassium injection recon soln 20 million unit	$0 (3)	

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table. 10/15/2026

Drug Name	Drug Tier	Requirements/Limits
penicillin g sodium injection recon soln 5 million unit	$0 (1)	
penicillin v potassium oral recon soln 125 mg/5 ml, 250 mg/5 ml	$0 (1)	
penicillin v potassium oral tablet 250 mg, 500 mg	$0 (1)	
piperacillin-tazobactam intravenous recon soln 2.25 gram, 3.375 gram, 4.5 gram, 40.5 gram	$0 (3)	
QUINOLONES		
ciprofloxacin hcl oral tablet 250 mg, 500 mg, 750 mg	$0 (1)	
ciprofloxacin in 5 % dextrose intravenous piggyback 200 mg/100 ml	$0 (1)	
levofloxacin in d5w intravenous piggyback 500 mg/100 ml, 750 mg/150 ml	$0 (1)	
levofloxacin oral solution 250 mg/10 ml	$0 (3)	
levofloxacin oral tablet 250 mg, 500 mg, 750 mg	$0 (1)	
moxifloxacin oral tablet 400 mg	$0 (1)	
moxifloxacin-sod.chloride(iso) intravenous piggyback 400 mg/250 ml	$0 (1)	
SULFA'S / RELATED AGENTS		
sulfadiazine oral tablet 500 mg	$0 (3)	
sulfamethoxazole-trimethoprim oral suspension 200-40 mg/5 ml	$0 (1)	
sulfamethoxazole-trimethoprim oral tablet 400-80 mg, 800-160 mg	$0 (1)	

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table. 10/15/2026

Drug Name	Drug Tier	Requirements/Limits
TETRACYCLINES		
demeclocycline oral tablet 150 mg, 300 mg	$0 (3)	
doxy-100 intravenous recon soln 100 mg	$0 (1)	
doxycycline hyclate intravenous recon soln 100 mg	$0 (1)	
doxycycline hyclate oral capsule 100 mg, 50 mg	$0 (1)	
doxycycline hyclate oral tablet 100 mg, 20 mg	$0 (1)	
doxycycline monohydrate oral capsule 100 mg, 50 mg	$0 (1)	
doxycycline monohydrate oral tablet 100 mg, 50 mg, 75 mg	$0 (1)	
minocycline oral capsule 100 mg, 50 mg, 75 mg	$0 (1)	
minocycline oral tablet 100 mg, 50 mg, 75 mg	$0 (3)	
tetracycline oral capsule 250 mg, 500 mg	$0 (3)	
URINARY TRACT AGENTS		
fosfomycin tromethamine oral packet 3 gram	$0 (3)	
methenamine hippurate oral tablet 1 gram	$0 (3)	
nitrofurantoin macrocrystal oral capsule 100 mg	$0 (3)	
nitrofurantoin macrocrystal oral capsule 50 mg	$0 (1)	
nitrofurantoin monohyd/m-cryst oral capsule 100 mg	$0 (3)	

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table. 10/15/2026

Drug Name	Drug Tier	Requirements/Limits
trimethoprim oral tablet 100 mg	$0 (1)	
ANTINEOPLASTIC / IMMUNOSUPPRESSANT DRUGS		
ADJUNCTIVE AGENTS		
BOMYNTRA SUBCUTANEOUS SOLUTION 120 MG/1.7 ML (70 MG/ML)	$0 (5^)	PA-NS
BOMYNTRA SUBCUTANEOUS SYRINGE 120 MG/1.7 ML (70 MG/ML)	$0 (5^)	PA-NS
leucovorin calcium oral tablet 10 mg, 15 mg, 25 mg, 5 mg	$0 (1)	
mesna oral tablet 400 mg	$0 (3)	
OSENVELT SUBCUTANEOUS SOLUTION 120 MG/1.7 ML (70 MG/ML)	$0 (5^)	PA-NS
ANTINEOPLASTIC / IMMUNOSUPPRESSANT DRUGS		
abiraterone oral tablet 250 mg	$0 (5^)	PA-NS; QL (120 EA per 30 days)
abirtega oral tablet 250 mg	$0 (3)	PA-NS; QL (120 EA per 30 days)
AKEEGA ORAL TABLET 100-500 MG, 50-500 MG	$0 (5^)	PA-NS; LA; QL (60 EA per 30 days)
ALECENSA ORAL CAPSULE 150 MG	$0 (5^)	PA-NS; QL (240 EA per 30 days)
ALUNBRIG ORAL TABLET 180 MG, 90 MG	$0 (5^)	PA-NS; QL (30 EA per 30 days)
ALUNBRIG ORAL TABLET 30 MG	$0 (5^)	PA-NS; QL (60 EA per 30 days)
ALUNBRIG ORAL TABLETS,DOSE PACK 90 MG (7)- 180 MG (23)	$0 (5^)	PA-NS; QL (30 EA per 180 days)

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table. 10/15/2026

Drug Name	Drug Tier	Requirements/Limits
anastrozole oral tablet 1 mg	$0 (1)	
AUGTYRO ORAL CAPSULE 160 MG	$0 (5^)	PA-NS; QL (60 EA per 30 days)
AUGTYRO ORAL CAPSULE 40 MG	$0 (5^)	PA-NS; QL (240 EA per 30 days)
AVMAPKI-FAKZYNJA ORAL COMBO PACK 0.8-200 MG	$0 (5^)	PA-NS; QL (66 EA per 28 days)
AYVAKIT ORAL TABLET 100 MG, 200 MG, 25 MG, 300 MG, 50 MG	$0 (5^)	PA-NS; LA; QL (30 EA per 30 days)
azathioprine oral tablet 50 mg	$0 (1)	B/D
BALVERSA ORAL TABLET 3 MG, 4 MG, 5 MG	$0 (5^)	PA-NS; LA
bexarotene oral capsule 75 mg	$0 (5^)	PA-NS
bexarotene topical gel 1 %	$0 (5^)	PA-NS; QL (60 GM per 30 days)
bicalutamide oral tablet 50 mg	$0 (1)	
BOSULIF ORAL CAPSULE 100 MG	$0 (5^)	PA-NS; QL (180 EA per 30 days)
BOSULIF ORAL CAPSULE 50 MG	$0 (5^)	PA-NS; QL (330 EA per 30 days)
BOSULIF ORAL TABLET 100 MG	$0 (5^)	PA-NS; QL (90 EA per 30 days)
BOSULIF ORAL TABLET 500 MG	$0 (5^)	PA-NS; QL (30 EA per 30 days)
bosutinib oral tablet 400 mg	$0 (5^)	PA-NS; QL (30 EA per 30 days)
BRAFTOVI ORAL CAPSULE 75 MG	$0 (5^)	PA-NS; LA; QL (180 EA per 30 days)
BRUKINSA ORAL TABLET 160 MG	$0 (5^)	PA-NS; LA; QL (60 EA per 30 days)

Drug Name	Drug Tier	Requirements/Limits
CABOMETYX ORAL TABLET 20 MG, 40 MG, 60 MG	$0 (5^)	PA-NS; LA; QL (30 EA per 30 days)
CALQUENCE (ACALABRUTINIB MAL) ORAL TABLET 100 MG	$0 (5^)	PA-NS; LA; QL (60 EA per 30 days)
CAPRELSA ORAL TABLET 100 MG	$0 (5^)	PA-NS; LA; QL (60 EA per 30 days)
CAPRELSA ORAL TABLET 300 MG	$0 (5^)	PA-NS; LA; QL (30 EA per 30 days)
COMETRIQ ORAL CAPSULE 100 MG/DAY(80 MG X1-20 MG X1)	$0 (5^)	PA-NS; QL (56 EA per 28 days)
COMETRIQ ORAL CAPSULE 140 MG/DAY(80 MG X1-20 MG X3)	$0 (5^)	PA-NS; QL (112 EA per 28 days)
COMETRIQ ORAL CAPSULE 60 MG/DAY (20 MG X 3/DAY)	$0 (5^)	PA-NS; QL (84 EA per 28 days)
COPIKTRA ORAL CAPSULE 15 MG, 25 MG	$0 (5^)	PA-NS; LA; QL (56 EA per 28 days)
COTELLIC ORAL TABLET 20 MG	$0 (5^)	PA-NS; LA; QL (63 EA per 28 days)
cyclophosphamide oral capsule 25 mg, 50 mg	$0 (1)	B/D
CYCLOPHOSPHAMIDE ORAL TABLET 50 MG	$0 (3)	B/D
cyclosporine modified oral capsule 100 mg, 25 mg, 50 mg	$0 (1)	B/D
cyclosporine modified oral solution 100 mg/ml	$0 (1)	B/D
cyclosporine oral capsule 100 mg, 25 mg	$0 (1)	B/D
DANZITEN ORAL TABLET 71 MG, 95 MG	$0 (5^)	PA-NS; QL (112 EA per 28 days)

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table. 10/15/2026

Drug Name	Drug Tier	Requirements/Limits
dasatinib oral tablet 100 mg, 140 mg, 50 mg, 80 mg	$0 (5^)	PA-NS; QL (30 EA per 30 days)
dasatinib oral tablet 20 mg	$0 (5^)	PA-NS; QL (90 EA per 30 days)
dasatinib oral tablet 70 mg	$0 (5^)	PA-NS; QL (60 EA per 30 days)
DAURISMO ORAL TABLET 100 MG	$0 (5^)	PA-NS; QL (30 EA per 30 days)
DAURISMO ORAL TABLET 25 MG	$0 (5^)	PA-NS; QL (60 EA per 30 days)
DROXIA ORAL CAPSULE 200 MG, 300 MG, 400 MG	$0 (2)	
ELIGARD (3 MONTH) SUBCUTANEOUS SYRINGE 22.5 MG	$0 (2)	PA-NS
ELIGARD (4 MONTH) SUBCUTANEOUS SYRINGE 30 MG	$0 (2)	PA-NS
ELIGARD (6 MONTH) SUBCUTANEOUS SYRINGE 45 MG	$0 (2)	PA-NS
ELIGARD SUBCUTANEOUS SYRINGE 7.5 MG (1 MONTH)	$0 (2)	PA-NS
ENSACOVE ORAL CAPSULE 100 MG, 25 MG	$0 (5^)	PA-NS; LA; QL (60 EA per 30 days)
ENVARSUS XR ORAL TABLET EXTENDED RELEASE 24 HR 0.75 MG, 1 MG, 4 MG	$0 (3)	B/D
ERIVEDGE ORAL CAPSULE 150 MG	$0 (5^)	PA-NS; QL (30 EA per 30 days)
ERLEADA ORAL TABLET 240 MG	$0 (5^)	PA-NS; QL (30 EA per 30 days)

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table. 10/15/2026

Drug Name	Drug Tier	Requirements/Limits
ERLEADA ORAL TABLET 60 MG	$0 (5^)	PA-NS; QL (120 EA per 30 days)
erlotinib oral tablet 100 mg, 150 mg	$0 (5^)	PA-NS; QL (30 EA per 30 days)
erlotinib oral tablet 25 mg	$0 (5^)	PA-NS; QL (60 EA per 30 days)
EULEXIN ORAL CAPSULE 125 MG	$0 (5^)	
everolimus (antineoplastic) oral tablet 10 mg, 2.5 mg, 5 mg, 7.5 mg	$0 (5^)	PA-NS; QL (30 EA per 30 days)
everolimus (antineoplastic) oral tablet for suspension 2 mg	$0 (5^)	PA-NS; QL (150 EA per 30 days)
everolimus (antineoplastic) oral tablet for suspension 3 mg	$0 (5^)	PA-NS; QL (90 EA per 30 days)
everolimus (antineoplastic) oral tablet for suspension 5 mg	$0 (5^)	PA-NS; QL (60 EA per 30 days)
everolimus (immunosuppressive) oral tablet 0.25 mg	$0 (2)	B/D
everolimus (immunosuppressive) oral tablet 0.5 mg, 0.75 mg, 1 mg	$0 (5^)	B/D
exemestane oral tablet 25 mg	$0 (1)	
FIRMAGON KIT W DILUENT SYRINGE SUBCUTANEOUS RECON SOLN 120 MG	$0 (5^)	PA-NS
FIRMAGON KIT W DILUENT SYRINGE SUBCUTANEOUS RECON SOLN 80 MG	$0 (3)	PA-NS
FOTIVDA ORAL CAPSULE 0.89 MG, 1.34 MG	$0 (5^)	PA-NS; LA; QL (21 EA per 28 days)
FRUZAQLA ORAL CAPSULE 1 MG	$0 (5^)	PA-NS; QL (84 EA per 28 days)

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table. 10/15/2026

Drug Name	Drug Tier	Requirements/Limits
FRUZAQLA ORAL CAPSULE 5 MG	$0 (5^)	PA-NS; QL (21 EA per 28 days)
GAVRETO ORAL CAPSULE 100 MG	$0 (5^)	PA-NS; LA; QL (120 EA per 30 days)
gefitinib oral tablet 250 mg	$0 (5^)	PA-NS; QL (30 EA per 30 days)
gengraf oral capsule 100 mg, 25 mg	$0 (1)	B/D
GILOTRIF ORAL TABLET 20 MG, 30 MG, 40 MG	$0 (5^)	PA-NS; QL (30 EA per 30 days)
GOMEKLI ORAL CAPSULE 1 MG	$0 (5^)	PA-NS; QL (126 EA per 28 days)
GOMEKLI ORAL CAPSULE 2 MG	$0 (5^)	PA-NS; QL (84 EA per 28 days)
GOMEKLI ORAL TABLET FOR SUSPENSION 1 MG	$0 (5^)	PA-NS; QL (168 EA per 28 days)
HERNEXEOS ORAL TABLET 60 MG	$0 (5^)	PA-NS; QL (90 EA per 30 days)
hydroxyurea oral capsule 500 mg	$0 (1)	
HYRNUO ORAL TABLET 10 MG	$0 (5^)	PA-NS; QL (120 EA per 30 days)
IBRANCE ORAL CAPSULE 125 MG	$0 (5^)	PA-NS; QL (21 EA per 28 days)
IBRANCE ORAL TABLET 100 MG, 125 MG, 75 MG	$0 (5^)	PA-NS; QL (21 EA per 28 days)
IBTROZI ORAL CAPSULE 200 MG	$0 (5^)	PA-NS; QL (90 EA per 30 days)
ICLUSIG ORAL TABLET 10 MG, 15 MG, 30 MG, 45 MG	$0 (5^)	PA-NS; QL (30 EA per 30 days)

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table. 10/15/2026

Drug Name	Drug Tier	Requirements/Limits
IDHIFA ORAL TABLET 100 MG, 50 MG	$0 (5^)	PA-NS; LA; QL (30 EA per 30 days)
imatinib oral tablet 100 mg	$0 (2)	PA-NS; QL (180 EA per 30 days)
imatinib oral tablet 400 mg	$0 (5^)	PA-NS; QL (60 EA per 30 days)
IMBRUVICA ORAL CAPSULE 140 MG	$0 (5^)	PA-NS; QL (90 EA per 30 days)
IMBRUVICA ORAL CAPSULE 70 MG	$0 (5^)	PA-NS; QL (28 EA per 28 days)
IMBRUVICA ORAL SUSPENSION 70 MG/ML	$0 (5^)	PA-NS; QL (324 ML per 30 days)
IMBRUVICA ORAL TABLET 140 MG, 280 MG, 420 MG	$0 (5^)	PA-NS; QL (28 EA per 28 days)
IMKELDI ORAL SOLUTION 80 MG/ML	$0 (5^)	PA-NS; QL (280 ML per 28 days)
INLURIYO ORAL TABLET 200 MG	$0 (5^)	PA-NS
INLYTA ORAL TABLET 1 MG	$0 (5^)	PA-NS; QL (180 EA per 30 days)
INLYTA ORAL TABLET 5 MG	$0 (5^)	PA-NS; QL (120 EA per 30 days)
INQOVI ORAL TABLET 35-100 MG	$0 (5^)	PA-NS; QL (5 EA per 28 days)
INREBIC ORAL CAPSULE 100 MG	$0 (5^)	PA-NS; LA; QL (120 EA per 30 days)
ITOVEBI ORAL TABLET 3 MG	$0 (5^)	PA-NS; QL (60 EA per 30 days)
ITOVEBI ORAL TABLET 9 MG	$0 (5^)	PA-NS; QL (30 EA per 30 days)

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table. 10/15/2026

Drug Name	Drug Tier	Requirements/Limits
IWILFIN ORAL TABLET 192 MG	$0 (5^)	PA-NS; LA; QL (240 EA per 30 days)
JAKAFI ORAL TABLET 10 MG, 15 MG, 20 MG, 25 MG, 5 MG	$0 (5^)	PA-NS; QL (60 EA per 30 days)
JAKAFI XR ORAL TABLET EXTENDED RELEASE 24 HR 11 MG, 22 MG, 33 MG, 44 MG, 55 MG	$0 (5^)	PA-NS; QL (30 EA per 30 days)
JAYPIRCA ORAL TABLET 100 MG	$0 (5^)	PA-NS; QL (60 EA per 30 days)
JAYPIRCA ORAL TABLET 50 MG	$0 (5^)	PA-NS; QL (30 EA per 30 days)
JIDEYTRO ORAL TABLET 100 MG	$0 (5^)	PA-NS; LA; QL (30 EA per 30 days)
JIDEYTRO ORAL TABLET 25 MG	$0 (5^)	PA-NS; LA; QL (90 EA per 30 days)
JYLAMVO ORAL SOLUTION 2 MG/ML	$0 (2)	
KISQALI ORAL TABLET 200 MG/DAY (200 MG X 1)	$0 (5^)	PA-NS; QL (21 EA per 28 days)
KISQALI ORAL TABLET 400 MG/DAY (200 MG X 2)	$0 (5^)	PA-NS; QL (42 EA per 28 days)
KISQALI ORAL TABLET 600 MG/DAY (200 MG X 3)	$0 (5^)	PA-NS; QL (63 EA per 28 days)
KOMZIFTI ORAL CAPSULE 200 MG	$0 (5^)	PA-NS; QL (90 EA per 30 days)
KOSELUGO ORAL CAPSULE 10 MG, 25 MG	$0 (5^)	PA-NS
KOSELUGO ORAL CAPSULE, SPRINKLE 5 MG, 7.5 MG	$0 (5^)	PA-NS
KRAZATI ORAL TABLET 200 MG	$0 (5^)	PA-NS; QL (180 EA per 30 days)

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table. 10/15/2026

Drug Name	Drug Tier	Requirements/Limits
lapatinib oral tablet 250 mg	$0 (5^)	PA-NS; QL (180 EA per 30 days)
LAZCLUZE ORAL TABLET 240 MG	$0 (5^)	PA-NS; LA; QL (30 EA per 30 days)
LAZCLUZE ORAL TABLET 80 MG	$0 (5^)	PA-NS; LA; QL (60 EA per 30 days)
lenalidomide oral capsule 10 mg, 15 mg, 2.5 mg, 20 mg, 25 mg, 5 mg	$0 (5^)	PA-NS; QL (28 EA per 28 days)
LENVIMA ORAL CAPSULE 10 MG/DAY (10 MG X 1), 4 MG	$0 (5^)	PA-NS; QL (30 EA per 30 days)
LENVIMA ORAL CAPSULE 12 MG/DAY (4 MG X 3), 18 MG/DAY (10 MG X 1-4 MG X2), 24 MG/DAY(10 MG X 2-4 MG X 1)	$0 (5^)	PA-NS; QL (90 EA per 30 days)
LENVIMA ORAL CAPSULE 14 MG/DAY(10 MG X 1-4 MG X 1), 20 MG/DAY (10 MG X 2), 8 MG/DAY (4 MG X 2)	$0 (5^)	PA-NS; QL (60 EA per 30 days)
letrozole oral tablet 2.5 mg	$0 (1)	
LEUKERAN ORAL TABLET 2 MG	$0 (5^)	
leuprolide subcutaneous kit 1 mg/0.2 ml	$0 (3)	PA-NS
LIFYORLI ORAL CAPSULE 125 MG/DAY(100 MG X1-25MG X1), 125 MG/DAY(100 MG X1-25MG X3), 125 MG/DAY(100 MG X1-25MG X9)	$0 (5^)	PA-NS; LA; QL (18 EA per 28 days)
LIFYORLI ORAL CAPSULE 150 MG/DAY(100 MG X1-25MG X2), 150 MG/DAY(100 MG X1-25MG X3), 150 MG/DAY(100 MG X1-25MG X9)	$0 (5^)	PA-NS; LA; QL (27 EA per 28 days)
lomustine oral capsule 10 mg, 40 mg	$0 (3)	
lomustine oral capsule 100 mg	$0 (5^)	

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table. 10/15/2026

Drug Name	Drug Tier	Requirements/Limits
LONSURF ORAL TABLET 15-6.14 MG, 20-8.19 MG	$0 (5^)	PA-NS
LORBRENA ORAL TABLET 100 MG	$0 (5^)	PA-NS; QL (30 EA per 30 days)
LORBRENA ORAL TABLET 25 MG	$0 (5^)	PA-NS; QL (90 EA per 30 days)
LUMAKRAS ORAL TABLET 120 MG	$0 (5^)	PA-NS; QL (240 EA per 30 days)
LUMAKRAS ORAL TABLET 240 MG	$0 (5^)	PA-NS; QL (120 EA per 30 days)
LUMAKRAS ORAL TABLET 320 MG	$0 (5^)	PA-NS; QL (90 EA per 30 days)
LUPRON DEPOT INTRAMUSCULAR SYRINGE KIT 3.75 MG, 7.5 MG	$0 (5^)	PA-NS
LYNPARZA ORAL TABLET 100 MG, 150 MG	$0 (5^)	PA-NS; QL (120 EA per 30 days)
LYSODREN ORAL TABLET 500 MG	$0 (5^)	
LYTGOBI ORAL TABLET 12 MG/DAY (4 MG X 3)	$0 (5^)	PA-NS; LA; QL (84 EA per 28 days)
LYTGOBI ORAL TABLET 16 MG/DAY (4 MG X 4)	$0 (5^)	PA-NS; LA; QL (112 EA per 28 days)
LYTGOBI ORAL TABLET 20 MG/DAY (4 MG X 5)	$0 (5^)	PA-NS; LA; QL (140 EA per 28 days)
MATULANE ORAL CAPSULE 50 MG	$0 (5^)	
megestrol oral suspension 400 mg/10 ml (40 mg/ml), 625 mg/5 ml (125 mg/ml)	$0 (3)	PA
megestrol oral tablet 20 mg, 40 mg	$0 (3)	
MEKINIST ORAL RECON SOLN 0.05 MG/ML	$0 (5^)	PA-NS; QL (1260 ML per 30 days)

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table. 10/15/2026

Drug Name	Drug Tier	Requirements/Limits
MEKINIST ORAL TABLET 0.5 MG	$0 (5^)	PA-NS; QL (90 EA per 30 days)
MEKINIST ORAL TABLET 2 MG	$0 (5^)	PA-NS; QL (30 EA per 30 days)
MEKTOVI ORAL TABLET 15 MG	$0 (5^)	PA-NS; LA; QL (180 EA per 30 days)
mercaptopurine oral suspension 20 mg/ml	$0 (5^)	
mercaptopurine oral tablet 50 mg	$0 (1)	
methotrexate sodium (pf) injection solution 25 mg/ml	$0 (1)	B/D
methotrexate sodium injection solution 25 mg/ml	$0 (1)	B/D
methotrexate sodium oral tablet 2.5 mg	$0 (1)	
MODEYSO ORAL CAPSULE 125 MG	$0 (5^)	PA-NS; QL (20 EA per 28 days)
mycophenolate mofetil oral capsule 250 mg	$0 (1)	B/D
mycophenolate mofetil oral suspension for reconstitution 200 mg/ml	$0 (5^)	B/D
mycophenolate mofetil oral tablet 500 mg	$0 (1)	B/D
mycophenolate sodium oral tablet,delayed release (dr/ec) 180 mg, 360 mg	$0 (1)	B/D; mycophenolate sodium = mycophenolic acid
mycophenolic acid dr 180 mg tb	$0 (1)	B/D
mycophenolic acid dr 360 mg tb	$0 (1)	B/D
NERLYNX ORAL TABLET 40 MG	$0 (5^)	PA-NS; LA
nilotinib hcl oral capsule 150 mg, 200 mg	$0 (5^)	PA-NS; QL (112 EA per 28 days)
nilotinib hcl oral capsule 50 mg	$0 (5^)	PA-NS; QL (120 EA per 30 days)

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table. 10/15/2026

Drug Name	Drug Tier	Requirements/Limits
nilutamide oral tablet 150 mg	$0 (5^)	
NINLARO ORAL CAPSULE 2.3 MG, 3 MG, 4 MG	$0 (5^)	PA-NS; QL (3 EA per 28 days)
NUBEQA ORAL TABLET 300 MG	$0 (5^)	PA-NS; LA; QL (120 EA per 30 days)
octreotide acetate injection solution 1,000 mcg/ml, 500 mcg/ml	$0 (5^)	PA
octreotide acetate injection solution 100 mcg/ml, 200 mcg/ml, 50 mcg/ml	$0 (3)	PA
ODOMZO ORAL CAPSULE 200 MG	$0 (5^)	PA-NS; LA; QL (30 EA per 30 days)
OGSIVEO ORAL TABLET 100 MG, 150 MG	$0 (5^)	PA-NS; QL (56 EA per 28 days)
OJEMDA ORAL SUSPENSION FOR RECONSTITUTION 25 MG/ML	$0 (5^)	PA-NS; QL (96 ML per 28 days)
OJEMDA ORAL TABLET 400 MG/WEEK (100 MG X 4)	$0 (5^)	PA-NS; QL (16 EA per 28 days)
OJEMDA ORAL TABLET 500 MG/WEEK (100 MG X 5)	$0 (5^)	PA-NS; QL (20 EA per 28 days)
OJEMDA ORAL TABLET 600 MG/WEEK (100 MG X 6)	$0 (5^)	PA-NS; QL (24 EA per 28 days)
OJJAARA ORAL TABLET 100 MG, 150 MG, 200 MG	$0 (5^)	PA-NS; QL (30 EA per 30 days)
ONUREG ORAL TABLET 200 MG, 300 MG	$0 (5^)	PA-NS; QL (14 EA per 28 days)
ORGOVYX ORAL TABLET 120 MG	$0 (5^)	PA-NS; LA; QL (30 EA per 28 days)
ORSERDU ORAL TABLET 345 MG	$0 (5^)	PA-NS; QL (30 EA per 30 days)

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table. 10/15/2026

Drug Name	Drug Tier	Requirements/Limits
ORSERDU ORAL TABLET 86 MG	$0 (5^)	PA-NS; QL (90 EA per 30 days)
pazopanib oral tablet 200 mg	$0 (5^)	PA-NS; QL (120 EA per 30 days)
PEMAZYRE ORAL TABLET 13.5 MG, 4.5 MG, 9 MG	$0 (5^)	PA-NS; LA; QL (28 EA per 28 days)
PIQRAY ORAL TABLET 200 MG/DAY (200 MG X 1)	$0 (5^)	PA-NS; QL (28 EA per 28 days)
PIQRAY ORAL TABLET 250 MG/DAY (200 MG X1-50 MG X1), 300 MG/DAY (150 MG X 2)	$0 (5^)	PA-NS; QL (56 EA per 28 days)
pomalidomide oral capsule 1 mg, 2 mg, 3 mg, 4 mg	$0 (5^)	PA-NS; QL (21 EA per 28 days)
POMALYST ORAL CAPSULE 1 MG, 2 MG, 3 MG, 4 MG	$0 (5^)	PA-NS; LA; QL (21 EA per 28 days)
PROGRAF ORAL GRANULES IN PACKET 0.2 MG, 1 MG	$0 (3)	B/D
QINLOCK ORAL TABLET 50 MG	$0 (5^)	PA-NS; LA; QL (90 EA per 30 days)
RETEVMO ORAL TABLET 120 MG, 160 MG, 80 MG	$0 (5^)	PA-NS; LA; QL (60 EA per 30 days)
RETEVMO ORAL TABLET 40 MG	$0 (5^)	PA-NS; LA; QL (90 EA per 30 days)
REVUFORJ ORAL TABLET 110 MG	$0 (5^)	PA-NS; QL (120 EA per 30 days)
REVUFORJ ORAL TABLET 160 MG	$0 (5^)	PA-NS; QL (60 EA per 30 days)
REVUFORJ ORAL TABLET 25 MG	$0 (5^)	PA-NS; QL (240 EA per 30 days)

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table. 10/15/2026

Drug Name	Drug Tier	Requirements/Limits
REZLIDHIA ORAL CAPSULE 150 MG	$0 (5^)	PA-NS; QL (60 EA per 30 days)
ROMVIMZA ORAL CAPSULE 14 MG, 20 MG, 30 MG	$0 (5^)	PA-NS; LA; QL (8 EA per 28 days)
ROZLYTREK ORAL CAPSULE 100 MG	$0 (5^)	PA-NS; QL (150 EA per 30 days)
ROZLYTREK ORAL CAPSULE 200 MG	$0 (5^)	PA-NS; QL (90 EA per 30 days)
ROZLYTREK ORAL PELLETS IN PACKET 50 MG	$0 (5^)	PA-NS; QL (336 EA per 28 days)
RUBRACA ORAL TABLET 200 MG, 250 MG, 300 MG	$0 (5^)	PA-NS; LA; QL (120 EA per 30 days)
RYDAPT ORAL CAPSULE 25 MG	$0 (5^)	PA-NS; QL (224 EA per 28 days)
SCEMBLIX ORAL TABLET 100 MG	$0 (5^)	PA-NS; QL (120 EA per 30 days)
SCEMBLIX ORAL TABLET 20 MG	$0 (5^)	PA-NS; QL (60 EA per 30 days)
SCEMBLIX ORAL TABLET 40 MG	$0 (5^)	PA-NS; QL (300 EA per 30 days)
SIGNIFOR SUBCUTANEOUS SOLUTION 0.3 MG/ML (1 ML), 0.6 MG/ML (1 ML), 0.9 MG/ML (1 ML)	$0 (5^)	PA
sirolimus oral solution 1 mg/ml	$0 (3)	B/D
sirolimus oral tablet 0.5 mg, 1 mg, 2 mg	$0 (1)	B/D
SOLTAMOX ORAL SOLUTION 20 MG/10 ML	$0 (5^)	
sorafenib oral tablet 200 mg	$0 (5^)	PA-NS; QL (120 EA per 30 days)

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table. 10/15/2026

Drug Name	Drug Tier	Requirements/Limits
STIVARGA ORAL TABLET 40 MG	$0 (5^)	PA-NS; QL (84 EA per 28 days)
sunitinib malate oral capsule 12.5 mg, 25 mg, 37.5 mg, 50 mg	$0 (5^)	PA-NS; QL (28 EA per 28 days)
TABLOID ORAL TABLET 40 MG	$0 (3)	
TABRECTA ORAL TABLET 150 MG, 200 MG	$0 (5^)	PA-NS
tacrolimus oral capsule 0.5 mg, 1 mg, 5 mg	$0 (1)	B/D
TAFINLAR ORAL CAPSULE 50 MG, 75 MG	$0 (5^)	PA-NS; QL (120 EA per 30 days)
TAFINLAR ORAL TABLET FOR SUSPENSION 10 MG	$0 (5^)	PA-NS; QL (840 EA per 28 days)
TAGRISSO ORAL TABLET 40 MG, 80 MG	$0 (5^)	PA-NS; LA; QL (30 EA per 30 days)
TALZENNA ORAL CAPSULE 0.1 MG, 0.25 MG, 0.35 MG, 0.5 MG, 0.75 MG, 1 MG	$0 (5^)	PA-NS; QL (30 EA per 30 days)
tamoxifen oral tablet 10 mg, 20 mg	$0 (1)	
TEPMETKO ORAL TABLET 225 MG	$0 (5^)	PA-NS; LA
THALOMID ORAL CAPSULE 100 MG	$0 (5^)	PA-NS; QL (112 EA per 28 days)
THALOMID ORAL CAPSULE 50 MG	$0 (5^)	PA-NS; QL (28 EA per 28 days)
TIBSOVO ORAL TABLET 250 MG	$0 (5^)	PA-NS
toremifene oral tablet 60 mg	$0 (3)	
tretinoin (antineoplastic) oral capsule 10 mg	$0 (5^)	
TRUQAP ORAL TABLET 160 MG, 200 MG	$0 (5^)	PA-NS; QL (64 EA per 28 days)
TUKYSA ORAL TABLET 150 MG	$0 (5^)	PA-NS; LA; QL (120 EA per 30 days)

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table. 10/15/2026

Drug Name	Drug Tier	Requirements/Limits
TUKYSA ORAL TABLET 50 MG	$0 (5^)	PA-NS; LA; QL (300 EA per 30 days)
TURALIO ORAL CAPSULE 125 MG	$0 (5^)	PA-NS; LA; QL (120 EA per 30 days)
VANFLYTA ORAL TABLET 17.7 MG, 26.5 MG	$0 (5^)	PA-NS; QL (56 EA per 28 days)
VENCLEXTA ORAL TABLET 10 MG	$0 (2)	PA-NS; LA; QL (14 EA per 7 days)
VENCLEXTA ORAL TABLET 100 MG	$0 (5^)	PA-NS; LA; QL (180 EA per 30 days)
VENCLEXTA ORAL TABLET 50 MG	$0 (5^)	PA-NS; LA; QL (7 EA per 7 days)
VENCLEXTA STARTING PACK ORAL TABLETS,DOSE PACK 10 MG-50 MG- 100 MG	$0 (5^)	PA-NS; LA; QL (42 EA per 180 days)
VERZENIO ORAL TABLET 100 MG, 150 MG, 200 MG, 50 MG	$0 (5^)	PA-NS; LA; QL (56 EA per 28 days)
VITRAKVI ORAL CAPSULE 100 MG	$0 (5^)	PA-NS; LA; QL (60 EA per 30 days)
VITRAKVI ORAL CAPSULE 25 MG	$0 (5^)	PA-NS; LA; QL (180 EA per 30 days)
VITRAKVI ORAL SOLUTION 20 MG/ML	$0 (5^)	PA-NS; LA; QL (300 ML per 30 days)
VIZIMPRO ORAL TABLET 15 MG, 30 MG, 45 MG	$0 (5^)	PA-NS; QL (30 EA per 30 days)
VONJO ORAL CAPSULE 100 MG	$0 (5^)	PA-NS; QL (120 EA per 30 days)
VORANIGO ORAL TABLET 10 MG	$0 (5^)	PA-NS; QL (60 EA per 30 days)

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table. 10/15/2026

Drug Name	Drug Tier	Requirements/Limits
VORANIGO ORAL TABLET 40 MG	$0 (5^)	PA-NS; QL (30 EA per 30 days)
WELIREG ORAL TABLET 40 MG	$0 (5^)	PA-NS; LA
XALKORI ORAL CAPSULE 200 MG, 250 MG	$0 (5^)	PA-NS; QL (60 EA per 30 days)
XALKORI ORAL PELLET 150 MG	$0 (5^)	PA-NS; QL (180 EA per 30 days)
XALKORI ORAL PELLET 20 MG, 50 MG	$0 (5^)	PA-NS; QL (120 EA per 30 days)
XATMEP ORAL SOLUTION 2.5 MG/ML	$0 (2)	
XERMELO ORAL TABLET 250 MG	$0 (5^)	PA; LA; QL (84 EA per 28 days)
XOSPATA ORAL TABLET 40 MG	$0 (5^)	PA-NS; LA; QL (90 EA per 30 days)
XPOVIO ORAL TABLET 100 MG/WEEK (50 MG X 2), 40 MG/WEEK (10 MG X 4), 40MG TWICE WEEK (40 MG X 2), 60 MG/WEEK (60 MG X 1), 60MG TWICE WEEK (120 MG/WEEK), 80 MG/WEEK (40 MG X 2), 80 MG/WEEK (80 MG X 1), 80MG TWICE WEEK (160 MG/WEEK)	$0 (5^)	PA-NS; LA
XTANDI ORAL CAPSULE 40 MG	$0 (5^)	PA-NS; QL (120 EA per 30 days)
XTANDI ORAL TABLET 40 MG	$0 (5^)	PA-NS; QL (120 EA per 30 days)
XTANDI ORAL TABLET 80 MG	$0 (5^)	PA-NS; QL (60 EA per 30 days)
yulithira oral tablet 10 mg, 2.5 mg, 5 mg, 7.5 mg	$0 (3)	PA-NS; QL (30 EA per 30 days)

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table. 10/15/2026

Drug Name	Drug Tier	Requirements/Limits
ZEJULA ORAL TABLET 100 MG, 200 MG, 300 MG	$0 (5^)	PA-NS; LA; QL (30 EA per 30 days)
ZELBORAF ORAL TABLET 240 MG	$0 (5^)	PA-NS; QL (224 EA per 28 days)
ZENBEXUS ORAL CAPSULE 0.75 MG, 1 MG	$0 (5^)	PA-NS; QL (21 EA per 28 days)
ZOLINZA ORAL CAPSULE 100 MG	$0 (5^)	PA-NS; QL (120 EA per 30 days)
ZYKADIA ORAL TABLET 150 MG	$0 (5^)	PA-NS; QL (90 EA per 30 days)
AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH		
ANTICONVULSANTS		
brivaracetam oral solution 10 mg/ml	$0 (5^)	QL (600 ML per 30 days)
brivaracetam oral tablet 10 mg, 100 mg, 25 mg, 50 mg, 75 mg	$0 (5^)	QL (60 EA per 30 days)
carbamazepine oral capsule, er multiphase 12 hr 100 mg, 200 mg, 300 mg	$0 (1)	
carbamazepine oral suspension 100 mg/5 ml	$0 (1)	
carbamazepine oral tablet 200 mg	$0 (1)	
carbamazepine oral tablet extended release 12 hr 100 mg, 200 mg, 400 mg	$0 (1)	
carbamazepine oral tablet,chewable 100 mg	$0 (1)	
clobazam oral suspension 2.5 mg/ml	$0 (3)	PA-NS; QL (480 ML per 30 days)
clobazam oral tablet 10 mg, 20 mg	$0 (3)	PA-NS; QL (60 EA per 30 days)
clonazepam oral tablet 0.5 mg, 1 mg	$0 (1)	QL (90 EA per 30 days)

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table. 10/15/2026

Drug Name	Drug Tier	Requirements/Limits
clonazepam oral tablet 2 mg	$0 (1)	QL (300 EA per 30 days)
clonazepam oral tablet,disintegrating 0.125 mg, 0.25 mg, 0.5 mg, 1 mg	$0 (1)	QL (90 EA per 30 days)
clonazepam oral tablet,disintegrating 2 mg	$0 (1)	QL (300 EA per 30 days)
DIACOMIT ORAL CAPSULE 250 MG	$0 (5^)	PA-NS; LA; QL (360 EA per 30 days)
DIACOMIT ORAL CAPSULE 500 MG	$0 (5^)	PA-NS; LA; QL (180 EA per 30 days)
DIACOMIT ORAL POWDER IN PACKET 250 MG	$0 (5^)	PA-NS; LA; QL (360 EA per 30 days)
DIACOMIT ORAL POWDER IN PACKET 500 MG	$0 (5^)	PA-NS; LA; QL (180 EA per 30 days)
diazepam rectal kit 12.5-15-17.5-20 mg, 2.5 mg, 5-7.5-10 mg	$0 (3)	
DILANTIN EXTENDED ORAL CAPSULE 100 MG	$0 (3)	
DILANTIN INFATABS ORAL TABLET,CHEWABLE 50 MG	$0 (3)	
DILANTIN ORAL CAPSULE 30 MG	$0 (3)	
DILANTIN-125 ORAL SUSPENSION 125 MG/5 ML	$0 (3)	
divalproex oral capsule, delayed rel sprinkle 125 mg	$0 (1)	
divalproex oral tablet extended release 24 hr 250 mg, 500 mg	$0 (1)	
divalproex oral tablet,delayed release (dr/ec) 125 mg, 250 mg, 500 mg	$0 (1)	
EPIDIOLEX ORAL SOLUTION 100 MG/ML	$0 (5^)	PA-NS; LA
eslicarbazepine oral tablet 200 mg, 400 mg	$0 (3)	QL (60 EA per 30 days)

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table. 10/15/2026

Drug Name	Drug Tier	Requirements/Limits
eslicarbazepine oral tablet 600 mg, 800 mg	$0 (5^)	QL (60 EA per 30 days)
ethosuximide oral capsule 250 mg	$0 (1)	
ethosuximide oral solution 250 mg/5 ml	$0 (1)	
felbamate oral suspension 600 mg/5 ml	$0 (3)	
felbamate oral tablet 400 mg, 600 mg	$0 (1)	
FINTEPLA ORAL SOLUTION 2.2 MG/ML	$0 (5^)	PA-NS; LA; QL (360 ML per 30 days)
gabapentin oral capsule 100 mg, 400 mg	$0 (1)	QL (270 EA per 30 days)
gabapentin oral capsule 300 mg	$0 (1)	QL (360 EA per 30 days)
gabapentin oral solution 250 mg/5 ml	$0 (1)	QL (2160 ML per 30 days)
gabapentin oral tablet 600 mg	$0 (1)	QL (180 EA per 30 days)
gabapentin oral tablet 800 mg	$0 (1)	QL (120 EA per 30 days)
gabapentin oral tablet extended release 24 hr 300 mg	$0 (3)	PA; QL (180 EA per 30 days)
gabapentin oral tablet extended release 24 hr 600 mg	$0 (3)	PA; QL (90 EA per 30 days)
lacosamide oral solution 10 mg/ml	$0 (1)	QL (1200 ML per 30 days)
lacosamide oral tablet 100 mg, 150 mg, 200 mg	$0 (1)	QL (60 EA per 30 days)
lacosamide oral tablet 50 mg	$0 (1)	QL (120 EA per 30 days)
lamotrigine oral tablet 100 mg, 150 mg, 200 mg, 25 mg	$0 (1)	
lamotrigine oral tablet extended release 24hr 100 mg, 200 mg, 25 mg, 250 mg, 300 mg, 50 mg	$0 (1)	
lamotrigine oral tablet, chewable dispersible 25 mg, 5 mg	$0 (1)	

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table. 10/15/2026

Drug Name	Drug Tier	Requirements/Limits
lamotrigine oral tablet,disintegrating 100 mg, 200 mg, 25 mg, 50 mg	$0 (1)	
levetiracetam oral solution 100 mg/ml	$0 (1)	
levetiracetam oral tablet 1,000 mg, 250 mg, 500 mg, 750 mg	$0 (1)	
levetiracetam oral tablet extended release 24 hr 500 mg, 750 mg	$0 (1)	
LEVETIRACETAM ORAL TABLET FOR SUSPENSION 250 MG, 500 MG	$0 (3)	
methsuximide oral capsule 300 mg	$0 (3)	
NAYZILAM NASAL SPRAY,NON-AEROSOL 5 MG/SPRAY (0.1 ML)	$0 (3)	PA-NS; QL (10 EA per 30 days)
oxcarbazepine oral suspension 300 mg/5 ml (60 mg/ml)	$0 (1)	
oxcarbazepine oral tablet 150 mg, 300 mg, 600 mg	$0 (1)	
perampanel oral suspension 0.5 mg/ml	$0 (5^)	QL (680 ML per 28 days)
perampanel oral tablet 10 mg, 12 mg, 2 mg, 4 mg, 6 mg, 8 mg	$0 (3)	QL (30 EA per 30 days)
phenobarbital oral elixir 20 mg/5 ml (4 mg/ml)	$0 (3)	PA-NS
phenobarbital oral tablet 100 mg, 15 mg, 16.2 mg, 30 mg, 32.4 mg, 60 mg, 64.8 mg, 97.2 mg	$0 (1)	PA-NS
phenytoin oral suspension 125 mg/5 ml	$0 (1)	
phenytoin oral tablet,chewable 50 mg	$0 (1)	
phenytoin sodium extended oral capsule 100 mg	$0 (1)	

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table. 10/15/2026

Drug Name	Drug Tier	Requirements/Limits
pregabalin oral capsule 100 mg, 150 mg, 200 mg, 25 mg, 50 mg, 75 mg	$0 (3)	QL (90 EA per 30 days)
pregabalin oral capsule 225 mg, 300 mg	$0 (3)	QL (60 EA per 30 days)
pregabalin oral solution 20 mg/ml	$0 (3)	QL (900 ML per 30 days)
PRIMIDONE ORAL TABLET 125 MG	$0 (3)	
primidone oral tablet 250 mg, 50 mg	$0 (1)	
roweepra oral tablet 500 mg	$0 (1)	
rufinamide oral suspension 40 mg/ml	$0 (5^)	PA-NS; QL (2760 ML per 30 days)
rufinamide oral tablet 200 mg	$0 (1)	PA-NS; QL (480 EA per 30 days)
rufinamide oral tablet 400 mg	$0 (5^)	PA-NS; QL (240 EA per 30 days)
SUBVENITE ORAL SUSPENSION 10 MG/ML	$0 (5^)	
SYMPAZAN ORAL FILM 10 MG, 20 MG	$0 (5^)	PA-NS; QL (60 EA per 30 days)
SYMPAZAN ORAL FILM 5 MG	$0 (3)	PA-NS; QL (60 EA per 30 days)
tiagabine oral tablet 12 mg, 16 mg, 2 mg, 4 mg	$0 (1)	
topiramate oral capsule, sprinkle 15 mg, 25 mg	$0 (1)	
topiramate oral solution 25 mg/ml	$0 (2)	PA-NS
topiramate oral tablet 100 mg, 200 mg, 25 mg, 50 mg	$0 (1)	
valproic acid (as sodium salt) oral solution 250 mg/5 ml	$0 (1)	
valproic acid oral capsule 250 mg	$0 (1)	

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table. 10/15/2026

Drug Name	Drug Tier	Requirements/Limits
VALTOCO NASAL SPRAY,NON-AEROSOL 10 MG/SPRAY (0.1 ML), 15 MG/2 SPRAY (7.5/0.1ML X 2), 20 MG/2 SPRAY (10MG/0.1ML X2), 5 MG/SPRAY (0.1 ML)	$0 (3)	PA-NS; QL (10 EA per 30 days)
vigabatrin oral powder in packet 500 mg	$0 (5^)	PA-NS; LA; QL (150 EA per 25 days)
vigabatrin oral tablet 500 mg	$0 (5^)	PA-NS; LA; QL (180 EA per 30 days)
vigadrone oral powder in packet 500 mg	$0 (5^)	PA-NS; LA; QL (150 EA per 25 days)
vigadrone oral tablet 500 mg	$0 (5^)	PA-NS; LA; QL (180 EA per 30 days)
XCOPRI MAINTENANCE PACK ORAL TABLET 250MG/DAY(150 MG X1-100MG X1), 350 MG/DAY (200 MG X1-150MG X1)	$0 (5^)	QL (56 EA per 28 days)
XCOPRI ORAL TABLET 100 MG, 25 MG, 50 MG	$0 (5^)	QL (30 EA per 30 days)
XCOPRI ORAL TABLET 150 MG, 200 MG	$0 (5^)	QL (60 EA per 30 days)
XCOPRI TITRATION PACK ORAL TABLETS,DOSE PACK 12.5 MG (14)- 25 MG (14)	$0 (3)	QL (28 EA per 180 days)
XCOPRI TITRATION PACK ORAL TABLETS,DOSE PACK 150 MG (14)- 200 MG (14), 50 MG (14)- 100 MG (14)	$0 (5^)	QL (28 EA per 180 days)
ZONISADE ORAL SUSPENSION 100 MG/5 ML	$0 (5^)	PA-NS
zonisamide oral capsule 100 mg, 25 mg, 50 mg	$0 (1)	
ZTALMY ORAL SUSPENSION 50 MG/ML	$0 (5^)	PA-NS; LA; QL (1100 ML per 30 days)

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table. 10/15/2026

Drug Name	Drug Tier	Requirements/Limits
ANTIPARKINSONISM AGENTS		
benztropine oral tablet 0.5 mg, 1 mg, 2 mg	$0 (3)	PA
bromocriptine oral capsule 5 mg	$0 (1)	
bromocriptine oral tablet 2.5 mg	$0 (1)	
carbidopa oral tablet 25 mg	$0 (1)	
carbidopa-levodopa oral tablet 10-100 mg, 25-100 mg, 25-250 mg	$0 (1)	
carbidopa-levodopa oral tablet extended release 25-100 mg, 50-200 mg	$0 (1)	
carbidopa-levodopa oral tablet,disintegrating 10-100 mg, 25-100 mg, 25-250 mg	$0 (1)	
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	$0 (1)	
entacapone oral tablet 200 mg	$0 (1)	
NEUPRO TRANSDERMAL PATCH 24 HOUR 1 MG/24 HOUR, 2 MG/24 HOUR, 3 MG/24 HOUR, 4 MG/24 HOUR, 6 MG/24 HOUR, 8 MG/24 HOUR	$0 (3)	
pramipexole oral tablet 0.125 mg, 0.25 mg, 0.5 mg, 0.75 mg, 1 mg, 1.5 mg	$0 (1)	
pramipexole oral tablet extended release 24 hr 0.375 mg, 0.75 mg, 1.5 mg, 2.25 mg, 3 mg	$0 (1)	
rasagiline oral tablet 0.5 mg, 1 mg	$0 (1)	
ropinirole oral tablet 0.25 mg, 0.5 mg, 1 mg, 2 mg, 3 mg, 4 mg, 5 mg	$0 (1)	

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table. 10/15/2026

Drug Name	Drug Tier	Requirements/Limits
ropinirole oral tablet extended release 24 hr 12 mg, 2 mg, 4 mg, 6 mg, 8 mg	$0 (1)	
selegiline hcl oral capsule 5 mg	$0 (1)	
selegiline hcl oral tablet 5 mg	$0 (1)	
trihexyphenidyl oral tablet 2 mg, 5 mg	$0 (2)	
MIGRAINE / CLUSTER HEADACHE THERAPY		
AIMOVIG AUTOINJECTOR SUBCUTANEOUS AUTO-INJECTOR 140 MG/ML, 70 MG/ML	$0 (2)	PA; QL (1 ML per 30 days)
dihydroergotamine nasal spray,non-aerosol 0.5 mg/pump act. (4 mg/ml)	$0 (3)	QL (8 ML per 28 days)
EMGALITY PEN SUBCUTANEOUS PEN INJECTOR 120 MG/ML	$0 (2)	PA; QL (2 ML per 30 days)
EMGALITY SYRINGE SUBCUTANEOUS SYRINGE 120 MG/ML	$0 (2)	PA; QL (2 ML per 30 days)
ergotamine-caffeine oral tablet 1-100 mg	$0 (1)	QL (40 EA per 28 days)
naratriptan oral tablet 1 mg, 2.5 mg	$0 (1)	QL (18 EA per 28 days)
NURTEC ODT ORAL TABLET,DISINTEGRATING 75 MG	$0 (2)	PA; QL (16 EA per 30 days)
rizatriptan oral tablet 10 mg, 5 mg	$0 (1)	QL (12 EA per 28 days)
rizatriptan oral tablet,disintegrating 10 mg, 5 mg	$0 (1)	QL (12 EA per 28 days)
sumatriptan nasal spray,non-aerosol 20 mg/actuation, 5 mg/actuation	$0 (1)	QL (18 EA per 28 days)
sumatriptan succinate oral tablet 100 mg, 25 mg, 50 mg	$0 (1)	QL (18 EA per 28 days)
sumatriptan succinate subcutaneous pen injector 6 mg/0.5 ml	$0 (1)	QL (8 ML per 28 days)

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table. 10/15/2026

Drug Name	Drug Tier	Requirements/Limits
sumatriptan succinate subcutaneous solution 6 mg/0.5 ml	$0 (1)	QL (8 ML per 28 days)
zolmitriptan oral tablet 2.5 mg, 5 mg	$0 (1)	QL (18 EA per 28 days)
zolmitriptan oral tablet,disintegrating 2.5 mg, 5 mg	$0 (1)	QL (18 EA per 28 days)
MISCELLANEOUS NEUROLOGICAL THERAPY		
AUSTEDO ORAL TABLET 12 MG, 9 MG	$0 (5^)	PA; QL (120 EA per 30 days)
AUSTEDO ORAL TABLET 6 MG	$0 (5^)	PA; QL (60 EA per 30 days)
AUSTEDO XR ORAL TABLET EXTENDED RELEASE 24 HR 12 MG, 18 MG, 24 MG, 30 MG, 36 MG, 42 MG, 48 MG, 6 MG	$0 (5^)	PA; QL (30 EA per 30 days)
AUSTEDO XR TITRATION KT(WK1-4) ORAL TABLET, EXT REL 24HR DOSE PACK 12-18-24-30 MG	$0 (5^)	PA; QL (28 EA per 180 days)
dalfampridine oral tablet extended release 12 hr 10 mg	$0 (1)	PA; QL (60 EA per 30 days)
dimethyl fumarate oral capsule,delayed release(dr/ec) 120 mg	$0 (3)	PA; QL (56 EA per 28 days)
dimethyl fumarate oral capsule,delayed release(dr/ec) 120 mg (14)- 240 mg (46)	$0 (3)	PA; QL (120 EA per 180 days)
dimethyl fumarate oral capsule,delayed release(dr/ec) 240 mg	$0 (3)	PA; QL (60 EA per 30 days)
donepezil oral tablet 10 mg, 5 mg	$0 (1)	
donepezil oral tablet 23 mg	$0 (3)	QL (30 EA per 30 days)
donepezil oral tablet,disintegrating 10 mg, 5 mg	$0 (1)	
fingolimod oral capsule 0.5 mg	$0 (5^)	PA; QL (30 EA per 30 days)
galantamine oral capsule,ext rel. pellets 24 hr 16 mg, 24 mg, 8 mg	$0 (1)	QL (30 EA per 30 days)

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table. 10/15/2026

Drug Name	Drug Tier	Requirements/Limits
galantamine oral solution 4 mg/ml	$0 (1)	QL (200 ML per 30 days)
galantamine oral tablet 12 mg, 4 mg, 8 mg	$0 (1)	QL (60 EA per 30 days)
glatiramer subcutaneous syringe 20 mg/ml	$0 (5^)	PA; QL (30 ML per 30 days)
glatiramer subcutaneous syringe 40 mg/ml	$0 (5^)	PA; QL (12 ML per 28 days)
glatopa subcutaneous syringe 20 mg/ml	$0 (5^)	PA; QL (30 ML per 30 days)
glatopa subcutaneous syringe 40 mg/ml	$0 (5^)	PA; QL (12 ML per 28 days)
INGREZZA INITIATION PK(TARDIV) ORAL CAPSULE,DOSE PACK 40 MG (7)- 80 MG (21)	$0 (5^)	PA; LA; QL (28 EA per 180 days)
INGREZZA ORAL CAPSULE 40 MG, 60 MG, 80 MG	$0 (5^)	PA; LA; QL (30 EA per 30 days)
LEQEMBI IQLIK SUBCUTANEOUS AUTO-INJECTOR 360 MG/1.8 ML	$0 (5^)	PA
memantine oral capsule,sprinkle,er 24hr 14 mg, 21 mg, 28 mg, 7 mg	$0 (1)	PA
memantine oral solution 2 mg/ml	$0 (1)	PA
memantine oral tablet 10 mg, 5 mg	$0 (1)	PA
NAMZARIC ORAL CAPSULE,SPRINKLE,ER 24HR 14-10 MG, 21-10 MG, 28-10 MG, 7-10 MG	$0 (2)	
NUEDEXTA ORAL CAPSULE 20-10 MG	$0 (2)	PA; QL (60 EA per 30 days)
rivastigmine tartrate oral capsule 1.5 mg, 3 mg, 4.5 mg, 6 mg	$0 (1)	QL (60 EA per 30 days)
rivastigmine transdermal patch 24 hour 13.3 mg/24 hour, 4.6 mg/24 hour, 9.5 mg/24 hour	$0 (1)	QL (30 EA per 30 days)
teriflunomide oral tablet 14 mg, 7 mg	$0 (5^)	PA; QL (30 EA per 30 days)
tetrabenazine oral tablet 12.5 mg	$0 (3)	PA; QL (240 EA per 30 days)
tetrabenazine oral tablet 25 mg	$0 (5^)	PA; QL (120 EA per 30 days)

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table. 10/15/2026

Drug Name	Drug Tier	Requirements/Limits
MUSCLE RELAXANTS / ANTISPASMODIC THERAPY		
baclofen oral tablet 10 mg, 20 mg, 5 mg	$0 (1)	
cyclobenzaprine oral tablet 10 mg, 5 mg	$0 (3)	PA
dantrolene oral capsule 100 mg, 25 mg, 50 mg	$0 (1)	
pyridostigmine bromide oral tablet 60 mg	$0 (1)	
tizanidine oral tablet 2 mg, 4 mg	$0 (1)	
NARCOTIC ANALGESICS		
acetaminophen-codeine oral solution 120-12 mg/5 ml	$0 (1)	QL (2700 ML per 30 days)
acetaminophen-codeine oral tablet 300-15 mg, 300-30 mg	$0 (1)	QL (360 EA per 30 days)
acetaminophen-codeine oral tablet 300-60 mg	$0 (1)	QL (180 EA per 30 days)
buprenorphine hcl sublingual tablet 2 mg, 8 mg	$0 (1)	
fentanyl transdermal patch 72 hour 100 mcg/hr, 12 mcg/hr, 25 mcg/hr, 50 mcg/hr, 75 mcg/hr	$0 (3)	PA; QL (10 EA per 30 days)
hydrocodone-acetaminophen oral solution 7.5-325 mg/15 ml	$0 (3)	QL (2700 ML per 30 days)
hydrocodone-acetaminophen oral tablet 10-325 mg, 7.5-325 mg	$0 (3)	QL (180 EA per 30 days)
hydrocodone-acetaminophen oral tablet 5-325 mg	$0 (3)	QL (240 EA per 30 days)
hydrocodone-ibuprofen oral tablet 7.5-200 mg	$0 (3)	QL (50 EA per 30 days)
hydromorphone oral liquid 1 mg/ml	$0 (1)	QL (600 ML per 30 days)

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table. 10/15/2026

Drug Name	Drug Tier	Requirements/Limits
hydromorphone oral tablet 2 mg, 4 mg, 8 mg	$0 (1)	QL (180 EA per 30 days)
methadone oral solution 10 mg/5 ml, 5 mg/5 ml	$0 (1)	PA; QL (450 ML per 30 days)
methadone oral tablet 10 mg, 5 mg	$0 (1)	PA; QL (90 EA per 30 days)
morphine concentrate oral solution 100 mg/5 ml (20 mg/ml)	$0 (1)	QL (180 ML per 30 days)
morphine oral solution 10 mg/5 ml (2 mg/ml), 20 mg/5 ml (4 mg/ml)	$0 (1)	QL (900 ML per 30 days)
morphine oral tablet 15 mg, 30 mg	$0 (1)	QL (180 EA per 30 days)
morphine oral tablet extended release 100 mg, 15 mg, 200 mg, 30 mg, 60 mg	$0 (1)	PA; QL (90 EA per 30 days)
oxycodone oral capsule 5 mg	$0 (1)	QL (180 EA per 30 days)
oxycodone oral concentrate 20 mg/ml	$0 (1)	QL (180 ML per 30 days)
oxycodone oral solution 5 mg/5 ml	$0 (1)	QL (900 ML per 30 days)
oxycodone oral tablet 10 mg, 15 mg, 20 mg, 30 mg, 5 mg	$0 (1)	QL (180 EA per 30 days)
oxycodone-acetaminophen oral tablet 10-325 mg	$0 (3)	QL (180 EA per 30 days)
oxycodone-acetaminophen oral tablet 2.5-325 mg, 5-325 mg	$0 (3)	QL (360 EA per 30 days)
oxycodone-acetaminophen oral tablet 7.5-325 mg	$0 (3)	QL (240 EA per 30 days)
NON-NARCOTIC ANALGESICS		
buprenorphine-naloxone sublingual film 12-3 mg, 2-0.5 mg, 4-1 mg, 8-2 mg	$0 (1)	
buprenorphine-naloxone sublingual tablet 2-0.5 mg, 8-2 mg	$0 (1)	

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table. 10/15/2026

Drug Name	Drug Tier	Requirements/Limits
butorphanol nasal spray,non-aerosol 10 mg/ml	$0 (1)	QL (10 ML per 28 days)
celecoxib oral capsule 100 mg, 200 mg, 400 mg, 50 mg	$0 (1)	
diclofenac potassium oral tablet 50 mg	$0 (1)	
diclofenac sodium oral tablet extended release 24 hr 100 mg	$0 (1)	
diclofenac sodium oral tablet,delayed release (dr/ec) 25 mg, 50 mg, 75 mg	$0 (1)	
diclofenac sodium topical drops 1.5 %	$0 (1)	QL (300 ML per 28 days)
diclofenac-misoprostol oral tablet,ir,delayed rel,biphasic 50-200 mg-mcg, 75-200 mg-mcg	$0 (1)	
diflunisal oral tablet 500 mg	$0 (1)	
etodolac oral capsule 200 mg, 300 mg	$0 (1)	
etodolac oral tablet 400 mg, 500 mg	$0 (1)	
etodolac oral tablet extended release 24 hr 400 mg, 500 mg, 600 mg	$0 (1)	
flurbiprofen oral tablet 100 mg	$0 (1)	
ibu oral tablet 600 mg, 800 mg	$0 (1)	
ibuprofen oral suspension 100 mg/5 ml	$0 (1)	
ibuprofen oral tablet 400 mg, 600 mg, 800 mg	$0 (1)	
JOURNAVX ORAL TABLET 50 MG	$0 (2)	QL (30 EA per 90 days)
KLOXXADO NASAL SPRAY,NON-AEROSOL 8 MG/ACTUATION	$0 (3)	
meloxicam oral tablet 15 mg, 7.5 mg	$0 (1)	
nabumetone oral tablet 500 mg, 750 mg	$0 (1)	
naloxone injection solution 0.4 mg/ml	$0 (1)	

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table. 10/15/2026

Drug Name	Drug Tier	Requirements/Limits
naloxone injection syringe 0.4 mg/ml, 1 mg/ml	$0 (1)	
naltrexone oral tablet 50 mg	$0 (1)	
naproxen oral tablet 250 mg, 375 mg, 500 mg	$0 (1)	
naproxen oral tablet,delayed release (dr/ec) 375 mg	$0 (1)	
naproxen sodium oral tablet 275 mg, 550 mg	$0 (1)	
oxaprozin oral tablet 600 mg	$0 (1)	
piroxicam oral capsule 10 mg, 20 mg	$0 (1)	
sulindac oral tablet 150 mg, 200 mg	$0 (1)	
tramadol oral tablet 50 mg	$0 (1)	QL (240 EA per 30 days)
tramadol-acetaminophen oral tablet 37.5-325 mg	$0 (1)	QL (240 EA per 30 days)
PSYCHOTHERAPEUTIC DRUGS		
ABILIFY ASIMTUFII INTRAMUSCULAR SUSPENSION,EXTENDED REL SYRING 720 MG/2.4 ML	$0 (5^)	QL (2.4 ML per 56 days)
ABILIFY ASIMTUFII INTRAMUSCULAR SUSPENSION,EXTENDED REL SYRING 960 MG/3.2 ML	$0 (5^)	QL (3.2 ML per 56 days)
ABILIFY MAINTENA INTRAMUSCULAR SUSPENSION,EXTENDED REL RECON 300 MG, 400 MG	$0 (5^)	QL (1 EA per 28 days)
ABILIFY MAINTENA INTRAMUSCULAR SUSPENSION,EXTENDED REL SYRING 300 MG, 400 MG	$0 (5^)	QL (1 EA per 28 days)
alprazolam oral tablet 0.25 mg, 0.5 mg, 1 mg	$0 (3)	PA; QL (120 EA per 30 days)

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table. 10/15/2026

Drug Name	Drug Tier	Requirements/Limits
alprazolam oral tablet 2 mg	$0 (3)	PA; QL (150 EA per 30 days)
amitriptyline oral tablet 10 mg, 100 mg, 150 mg, 25 mg, 50 mg, 75 mg	$0 (3)	
amoxapine oral tablet 100 mg, 150 mg, 25 mg, 50 mg	$0 (3)	
aripiprazole oral solution 1 mg/ml	$0 (3)	QL (900 ML per 30 days)
aripiprazole oral tablet 10 mg, 15 mg, 2 mg, 20 mg, 30 mg, 5 mg	$0 (3)	QL (30 EA per 30 days)
aripiprazole oral tablet,disintegrating 10 mg, 15 mg	$0 (3)	QL (60 EA per 30 days)
ARISTADA INITIO INTRAMUSCULAR SUSPENSION,EXTENDED REL SYRING 675 MG/2.4 ML	$0 (5^)	QL (2.4 ML per 180 days)
ARISTADA INTRAMUSCULAR SUSPENSION,EXTENDED REL SYRING 1,064 MG/3.9 ML	$0 (5^)	QL (3.9 ML per 56 days)
ARISTADA INTRAMUSCULAR SUSPENSION,EXTENDED REL SYRING 441 MG/1.6 ML	$0 (5^)	QL (1.6 ML per 28 days)
ARISTADA INTRAMUSCULAR SUSPENSION,EXTENDED REL SYRING 662 MG/2.4 ML	$0 (5^)	QL (2.4 ML per 28 days)
ARISTADA INTRAMUSCULAR SUSPENSION,EXTENDED REL SYRING 882 MG/3.2 ML	$0 (5^)	QL (3.2 ML per 28 days)
armodafinil oral tablet 150 mg, 200 mg, 250 mg	$0 (1)	PA; QL (30 EA per 30 days)
armodafinil oral tablet 50 mg	$0 (1)	PA; QL (60 EA per 30 days)

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table. 10/15/2026

Drug Name	Drug Tier	Requirements/Limits
asenapine maleate sublingual tablet 10 mg, 2.5 mg, 5 mg	$0 (1)	QL (60 EA per 30 days)
atomoxetine oral capsule 10 mg, 18 mg, 25 mg, 40 mg	$0 (1)	QL (60 EA per 30 days)
atomoxetine oral capsule 100 mg, 60 mg, 80 mg	$0 (1)	QL (30 EA per 30 days)
AUVELITY ORAL TABLET, IR AND ER, BIPHASIC 45-105 MG	$0 (3)	ST; QL (60 EA per 30 days)
BELSOMRA ORAL TABLET 10 MG, 15 MG, 20 MG, 5 MG	$0 (2)	QL (30 EA per 30 days)
bupropion hcl oral tablet 100 mg, 75 mg	$0 (1)	
bupropion hcl oral tablet extended release 24 hr 150 mg	$0 (1)	QL (90 EA per 30 days)
bupropion hcl oral tablet extended release 24 hr 300 mg	$0 (1)	QL (30 EA per 30 days)
bupropion hcl oral tablet sustained-release 12 hr 100 mg, 150 mg, 200 mg	$0 (1)	QL (60 EA per 30 days)
buspirone oral tablet 10 mg, 15 mg, 30 mg, 5 mg, 7.5 mg	$0 (1)	
CAPLYTA ORAL CAPSULE 10.5 MG, 21 MG, 42 MG	$0 (5^)	QL (30 EA per 30 days)
chlorpromazine oral concentrate 100 mg/ml, 30 mg/ml	$0 (3)	
chlorpromazine oral tablet 10 mg, 50 mg	$0 (1)	
chlorpromazine oral tablet 100 mg, 200 mg, 25 mg	$0 (3)	
citalopram oral solution 10 mg/5 ml	$0 (1)	
citalopram oral tablet 10 mg, 20 mg, 40 mg	$0 (1)	

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table. 10/15/2026

Drug Name	Drug Tier	Requirements/Limits
clomipramine oral capsule 25 mg, 50 mg, 75 mg	$0 (3)	PA-NS
clorazepate dipotassium oral tablet 15 mg	$0 (3)	PA-NS; QL (180 EA per 30 days)
clorazepate dipotassium oral tablet 3.75 mg	$0 (3)	PA-NS; QL (90 EA per 30 days)
clorazepate dipotassium oral tablet 7.5 mg	$0 (3)	PA-NS; QL (360 EA per 30 days)
clozapine oral tablet 100 mg, 200 mg, 25 mg, 50 mg	$0 (1)	
clozapine oral tablet,disintegrating 100 mg, 12.5 mg, 150 mg, 200 mg, 25 mg	$0 (3)	
COBENFY ORAL CAPSULE 100-20 MG, 125-30 MG, 50-20 MG	$0 (5^)	QL (60 EA per 30 days)
COBENFY STARTER PACK ORAL CAPSULE,DOSE PACK 50 MG-20 MG /100 MG-20 MG	$0 (5^)	QL (56 EA per 180 days)
desipramine oral tablet 10 mg, 100 mg, 150 mg, 25 mg, 50 mg, 75 mg	$0 (3)	
desvenlafaxine succinate oral tablet extended release 24 hr 100 mg, 25 mg, 50 mg	$0 (1)	QL (30 EA per 30 days)
dexmethylphenidate oral capsule,er biphasic 50-50 10 mg, 15 mg, 20 mg, 25 mg, 30 mg, 35 mg, 40 mg, 5 mg	$0 (1)	QL (30 EA per 30 days)
dexmethylphenidate oral tablet 10 mg, 2.5 mg, 5 mg	$0 (1)	QL (60 EA per 30 days)
dextroamphetamine sulfate oral capsule, extended release 10 mg, 15 mg, 5 mg	$0 (3)	QL (120 EA per 30 days)

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table. 10/15/2026

Drug Name	Drug Tier	Requirements/Limits
dextroamphetamine sulfate oral tablet 10 mg, 5 mg	$0 (1)	QL (180 EA per 30 days)
dextroamphetamine sulfate oral tablet 15 mg	$0 (1)	QL (120 EA per 30 days)
dextroamphetamine sulfate oral tablet 20 mg	$0 (1)	QL (90 EA per 30 days)
dextroamphetamine sulfate oral tablet 30 mg	$0 (1)	QL (60 EA per 30 days)
dextroamphetamine-amphetamine oral capsule,extended release 24hr 10 mg, 15 mg, 20 mg, 25 mg, 30 mg, 5 mg	$0 (1)	QL (30 EA per 30 days)
dextroamphetamine-amphetamine oral tablet 10 mg, 12.5 mg, 15 mg, 30 mg, 5 mg, 7.5 mg	$0 (1)	QL (60 EA per 30 days)
dextroamphetamine-amphetamine oral tablet 20 mg	$0 (1)	QL (90 EA per 30 days)
diazepam intensol oral concentrate 5 mg/ml	$0 (3)	PA-NS; QL (240 ML per 30 days)
diazepam oral solution 5 mg/5 ml (1 mg/ml)	$0 (3)	PA-NS; QL (1200 ML per 30 days)
diazepam oral tablet 10 mg, 2 mg, 5 mg	$0 (3)	PA-NS; QL (120 EA per 30 days)
doxepin oral capsule 10 mg, 100 mg, 150 mg, 25 mg, 50 mg, 75 mg	$0 (3)	
doxepin oral concentrate 10 mg/ml	$0 (3)	
doxepin oral tablet 3 mg, 6 mg	$0 (3)	QL (30 EA per 30 days)
DRIZALMA SPRINKLE ORAL CAPSULE, DELAYED REL SPRINKLE 20 MG, 30 MG, 40 MG, 60 MG	$0 (3)	QL (60 EA per 30 days)

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table. 10/15/2026

Drug Name	Drug Tier	Requirements/Limits
duloxetine oral capsule,delayed release(dr/ec) 20 mg, 30 mg, 40 mg, 60 mg	$0 (1)	QL (60 EA per 30 days)
EMSAM TRANSDERMAL PATCH 24 HOUR 12 MG/24 HR, 6 MG/24 HR, 9 MG/24 HR	$0 (5^)	QL (30 EA per 30 days)
escitalopram oxalate oral solution 5 mg/5 ml	$0 (1)	
escitalopram oxalate oral tablet 10 mg, 20 mg, 5 mg	$0 (1)	
EXXUA ORAL TABLET EXTENDED RELEASE 24 HR 18.2 MG, 36.3 MG, 54.5 MG, 72.6 MG	$0 (5^)	ST; QL (30 EA per 30 days)
EXXUA ORAL TABLET, EXT REL 24HR DOSE PACK 18.2 MG (32 TABS)	$0 (5^)	ST; QL (32 EA per 180 days)
FANAPT ORAL TABLET 1 MG, 10 MG, 12 MG, 2 MG, 4 MG, 6 MG, 8 MG	$0 (3)	ST; QL (60 EA per 30 days)
FANAPT TITRATION PACK A ORAL TABLETS,DOSE PACK 1MG(2)-2MG(2)-4MG(2)-6MG(2)	$0 (3)	ST; QL (8 EA per 180 days)
FANAPT TITRATION PACK B ORAL TABLETS,DOSE PACK 1 MG(6)-2MG(2)- 6 MG(2)-8 MG(2)	$0 (3)	ST; QL (12 EA per 180 days)
FANAPT TITRATION PACK C ORAL TABLETS,DOSE PACK 1 MG(4)-2 MG(2) -6 MG (2)	$0 (3)	ST; QL (8 EA per 180 days)
FETZIMA ORAL CAPSULE,EXT REL 24HR DOSE PACK 20 MG (2)- 40 MG (26)	$0 (2)	QL (28 EA per 180 days)
FETZIMA ORAL CAPSULE,EXTENDED RELEASE 24 HR 120 MG, 20 MG, 40 MG, 80 MG	$0 (2)	QL (30 EA per 30 days)
fluoxetine oral capsule 10 mg, 20 mg, 40 mg	$0 (1)	
fluoxetine oral solution 20 mg/5 ml (4 mg/ml)	$0 (1)	

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table. 10/15/2026

Drug Name	Drug Tier	Requirements/Limits
fluphenazine decanoate injection solution 25 mg/ml	$0 (1)	
fluphenazine hcl injection solution 2.5 mg/ml	$0 (1)	
fluphenazine hcl oral concentrate 5 mg/ml	$0 (1)	
fluphenazine hcl oral elixir 2.5 mg/5 ml	$0 (1)	
fluphenazine hcl oral tablet 1 mg, 10 mg, 2.5 mg, 5 mg	$0 (1)	
fluvoxamine oral tablet 100 mg, 25 mg, 50 mg	$0 (1)	
guanfacine oral tablet extended release 24 hr 1 mg, 2 mg, 4 mg	$0 (3)	QL (30 EA per 30 days)
guanfacine oral tablet extended release 24 hr 3 mg	$0 (3)	QL (60 EA per 30 days)
haloperidol decanoate intramuscular solution 100 mg/ml, 100 mg/ml (1 ml), 50 mg/ml, 50 mg/ml(1ml)	$0 (1)	
haloperidol lactate injection solution 5 mg/ml	$0 (1)	
haloperidol lactate oral concentrate 2 mg/ml	$0 (1)	
haloperidol oral tablet 0.5 mg, 1 mg, 10 mg, 2 mg, 20 mg, 5 mg	$0 (1)	
imipramine hcl oral tablet 10 mg, 25 mg, 50 mg	$0 (1)	
INVEGA HAFYERA INTRAMUSCULAR SYRINGE 1,092 MG/3.5 ML	$0 (5^)	QL (3.5 ML per 180 days)
INVEGA HAFYERA INTRAMUSCULAR SYRINGE 1,560 MG/5 ML	$0 (5^)	QL (5 ML per 180 days)
INVEGA SUSTENNA INTRAMUSCULAR SYRINGE 117 MG/0.75 ML	$0 (5^)	QL (0.75 ML per 28 days)

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table. 10/15/2026

Drug Name	Drug Tier	Requirements/Limits
INVEGA SUSTENNA INTRAMUSCULAR SYRINGE 156 MG/ML	$0 (5^)	QL (1 ML per 28 days)
INVEGA SUSTENNA INTRAMUSCULAR SYRINGE 234 MG/1.5 ML	$0 (5^)	QL (1.5 ML per 28 days)
INVEGA SUSTENNA INTRAMUSCULAR SYRINGE 39 MG/0.25 ML	$0 (2)	QL (0.25 ML per 28 days)
INVEGA SUSTENNA INTRAMUSCULAR SYRINGE 78 MG/0.5 ML	$0 (5^)	QL (0.5 ML per 28 days)
INVEGA TRINZA INTRAMUSCULAR SYRINGE 273 MG/0.88 ML	$0 (5^)	QL (0.88 ML per 90 days)
INVEGA TRINZA INTRAMUSCULAR SYRINGE 410 MG/1.32 ML	$0 (5^)	QL (1.32 ML per 90 days)
INVEGA TRINZA INTRAMUSCULAR SYRINGE 546 MG/1.75 ML	$0 (5^)	QL (1.75 ML per 90 days)
INVEGA TRINZA INTRAMUSCULAR SYRINGE 819 MG/2.63 ML	$0 (5^)	QL (2.63 ML per 90 days)
lisdexamfetamine oral capsule 10 mg, 20 mg, 30 mg, 40 mg, 50 mg, 60 mg, 70 mg	$0 (3)	QL (30 EA per 30 days)
lisdexamfetamine oral tablet,chewable 10 mg, 20 mg, 30 mg, 40 mg, 50 mg, 60 mg	$0 (3)	QL (30 EA per 30 days)
lithium carbonate oral capsule 150 mg, 300 mg, 600 mg	$0 (1)	
lithium carbonate oral tablet 300 mg	$0 (1)	
lithium carbonate oral tablet extended release 300 mg, 450 mg	$0 (1)	
lithium citrate oral solution 8 meq/5 ml	$0 (1)	
lorazepam intensol oral concentrate 2 mg/ml	$0 (1)	PA; QL (150 ML per 30 days)
lorazepam oral tablet 0.5 mg, 1 mg, 2 mg	$0 (1)	PA; QL (150 EA per 30 days)

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table. 10/15/2026

Drug Name	Drug Tier	Requirements/Limits
loxapine succinate oral capsule 10 mg, 25 mg, 5 mg, 50 mg	$0 (1)	
lurasidone oral tablet 120 mg, 20 mg, 40 mg, 60 mg	$0 (3)	QL (30 EA per 30 days)
lurasidone oral tablet 80 mg	$0 (3)	QL (60 EA per 30 days)
LYBALVI ORAL TABLET 10-10 MG, 15-10 MG, 20-10 MG, 5-10 MG	$0 (5^)	QL (30 EA per 30 days)
MARPLAN ORAL TABLET 10 MG	$0 (3)	
methylphenidate hcl oral solution 10 mg/5 ml	$0 (1)	QL (900 ML per 30 days)
methylphenidate hcl oral solution 5 mg/5 ml	$0 (1)	QL (1800 ML per 30 days)
methylphenidate hcl oral tablet 10 mg, 20 mg, 5 mg	$0 (1)	QL (90 EA per 30 days)
methylphenidate hcl oral tablet extended release 10 mg, 20 mg	$0 (1)	QL (90 EA per 30 days)
methylphenidate hcl oral tablet extended release 24hr 18 mg, 18 mg (bx rating), 27 mg, 36 mg, 54 mg	$0 (1)	QL (30 EA per 30 days)
methylphenidate hcl oral tablet,chewable 10 mg, 2.5 mg, 5 mg	$0 (1)	QL (180 EA per 30 days)
mirtazapine oral tablet 15 mg, 30 mg, 45 mg, 7.5 mg	$0 (1)	
mirtazapine oral tablet,disintegrating 15 mg, 30 mg, 45 mg	$0 (1)	
modafinil oral tablet 100 mg	$0 (1)	PA; QL (30 EA per 30 days)
modafinil oral tablet 200 mg	$0 (1)	PA; QL (60 EA per 30 days)
molindone oral tablet 10 mg, 25 mg, 5 mg	$0 (1)	
nefazodone oral tablet 100 mg, 150 mg, 200 mg, 250 mg, 50 mg	$0 (3)	

Drug Name	Drug Tier	Requirements/Limits
nortriptyline oral capsule 10 mg, 25 mg, 50 mg, 75 mg	$0 (1)	
nortriptyline oral solution 10 mg/5 ml	$0 (3)	
NUPLAZID ORAL CAPSULE 34 MG	$0 (5^)	PA-NS; QL (30 EA per 30 days)
NUPLAZID ORAL TABLET 10 MG	$0 (5^)	PA-NS; QL (30 EA per 30 days)
olanzapine intramuscular recon soln 10 mg	$0 (1)	QL (3 EA per 1 day)
olanzapine oral tablet 10 mg, 2.5 mg, 5 mg	$0 (1)	QL (60 EA per 30 days)
olanzapine oral tablet 15 mg, 20 mg, 7.5 mg	$0 (1)	QL (30 EA per 30 days)
olanzapine oral tablet,disintegrating 10 mg	$0 (3)	QL (60 EA per 30 days)
olanzapine oral tablet,disintegrating 15 mg, 20 mg, 5 mg	$0 (3)	QL (30 EA per 30 days)
OPIPZA ORAL FILM 10 MG	$0 (3)	QL (90 EA per 30 days)
OPIPZA ORAL FILM 2 MG	$0 (3)	QL (30 EA per 30 days)
OPIPZA ORAL FILM 5 MG	$0 (3)	QL (180 EA per 30 days)
paliperidone oral tablet extended release 24hr 1.5 mg, 3 mg, 9 mg	$0 (3)	QL (30 EA per 30 days)
paliperidone oral tablet extended release 24hr 6 mg	$0 (3)	QL (60 EA per 30 days)
paroxetine hcl oral suspension 10 mg/5 ml	$0 (3)	QL (900 ML per 30 days)
paroxetine hcl oral tablet 10 mg, 20 mg, 40 mg	$0 (3)	QL (30 EA per 30 days)
paroxetine hcl oral tablet 30 mg	$0 (3)	QL (60 EA per 30 days)
paroxetine hcl oral tablet extended release 24 hr 12.5 mg, 25 mg, 37.5 mg	$0 (3)	QL (60 EA per 30 days)
perphenazine oral tablet 16 mg, 2 mg, 4 mg, 8 mg	$0 (1)	

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table. 10/15/2026

Drug Name	Drug Tier	Requirements/Limits
phenelzine oral tablet 15 mg	$0 (1)	
pimozide oral tablet 1 mg, 2 mg	$0 (1)	
protriptyline oral tablet 10 mg, 5 mg	$0 (3)	
quetiapine oral tablet 100 mg, 200 mg, 25 mg, 300 mg, 400 mg, 50 mg	$0 (1)	
QUETIAPINE ORAL TABLET 150 MG	$0 (1)	
quetiapine oral tablet extended release 24 hr 150 mg, 200 mg	$0 (1)	QL (30 EA per 30 days)
quetiapine oral tablet extended release 24 hr 300 mg, 400 mg, 50 mg	$0 (1)	QL (60 EA per 30 days)
RALDESY ORAL SOLUTION 10 MG/ML	$0 (3)	ST
REXULTI ORAL TABLET 0.25 MG, 0.5 MG, 1 MG, 2 MG, 3 MG, 4 MG	$0 (5^)	QL (30 EA per 30 days)
risperidone microspheres intramuscular suspension,extended rel recon 12.5 mg/2 ml, 25 mg/2 ml	$0 (3)	QL (2 EA per 28 days)
risperidone microspheres intramuscular suspension,extended rel recon 37.5 mg/2 ml, 50 mg/2 ml	$0 (5^)	QL (2 EA per 28 days)
risperidone oral solution 1 mg/ml	$0 (1)	
risperidone oral tablet 0.25 mg, 0.5 mg, 1 mg, 2 mg, 3 mg, 4 mg	$0 (1)	
risperidone oral tablet,disintegrating 0.25 mg, 0.5 mg, 1 mg, 2 mg, 3 mg	$0 (1)	QL (60 EA per 30 days)
risperidone oral tablet,disintegrating 4 mg	$0 (1)	QL (120 EA per 30 days)
SECUADO TRANSDERMAL PATCH 24 HOUR 3.8 MG/24 HOUR, 5.7 MG/24 HOUR, 7.6 MG/24 HOUR	$0 (5^)	QL (30 EA per 30 days)
sertraline oral concentrate 20 mg/ml	$0 (1)	

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table. 10/15/2026

Drug Name	Drug Tier	Requirements/Limits
sertraline oral tablet 100 mg, 25 mg, 50 mg	$0 (1)	
sodium oxybate oral solution 500 mg/ml	$0 (5^)	PA; LA; QL (540 ML per 30 days)
temazepam oral capsule 15 mg, 30 mg, 7.5 mg	$0 (3)	PA; QL (30 EA per 30 days)
thioridazine oral tablet 10 mg, 100 mg, 25 mg, 50 mg	$0 (1)	
thiothixene oral capsule 1 mg, 10 mg, 2 mg, 5 mg	$0 (1)	
tranylcypromine oral tablet 10 mg	$0 (1)	
trazodone oral tablet 100 mg, 150 mg, 50 mg	$0 (1)	
trifluoperazine oral tablet 1 mg, 10 mg, 2 mg, 5 mg	$0 (1)	
trimipramine oral capsule 100 mg, 25 mg, 50 mg	$0 (3)	
TRINTELLIX ORAL TABLET 10 MG, 20 MG, 5 MG	$0 (3)	QL (30 EA per 30 days)
venlafaxine oral capsule,extended release 24hr 150 mg, 37.5 mg, 75 mg	$0 (1)	
venlafaxine oral tablet 100 mg, 25 mg, 37.5 mg, 50 mg, 75 mg	$0 (1)	
VERSACLOZ ORAL SUSPENSION 50 MG/ML	$0 (5^)	PA-NS; QL (600 ML per 30 days)
vilazodone oral tablet 10 mg, 20 mg, 40 mg	$0 (1)	QL (30 EA per 30 days)
VRAYLAR ORAL CAPSULE 0.5 MG, 0.75 MG, 1.5 MG, 3 MG, 4.5 MG, 6 MG	$0 (2)	QL (30 EA per 30 days)
ziprasidone hcl oral capsule 20 mg, 40 mg, 60 mg, 80 mg	$0 (1)	QL (60 EA per 30 days)

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table. 10/15/2026

Drug Name	Drug Tier	Requirements/Limits
ziprasidone mesylate intramuscular recon soln 20 mg/ml (final conc.)	$0 (1)	
zolpidem oral tablet 10 mg, 5 mg	$0 (1)	QL (30 EA per 30 days)
ZURZUVAE ORAL CAPSULE 20 MG, 25 MG	$0 (5^)	PA-NS; QL (28 EA per 365 days)
ZURZUVAE ORAL CAPSULE 30 MG	$0 (5^)	PA-NS; QL (14 EA per 365 days)
CARDIOVASCULAR, HYPERTENSION / LIPIDS		
ANTIARRHYTHMIC AGENTS		
amiodarone oral tablet 100 mg, 200 mg, 400 mg	$0 (1)	
disopyramide phosphate oral capsule 100 mg, 150 mg	$0 (3)	
dofetilide oral capsule 125 mcg, 250 mcg, 500 mcg	$0 (1)	
flecainide oral tablet 100 mg, 150 mg, 50 mg	$0 (1)	
mexiletine oral capsule 150 mg, 200 mg, 250 mg	$0 (3)	
MULTAQ ORAL TABLET 400 MG	$0 (3)	
pacerone oral tablet 100 mg, 200 mg	$0 (1)	
propafenone oral capsule,extended release 12 hr 225 mg, 325 mg, 425 mg	$0 (1)	
propafenone oral tablet 150 mg, 225 mg, 300 mg	$0 (1)	
quinidine sulfate oral tablet 200 mg, 300 mg	$0 (1)	
sotalol af oral tablet 120 mg, 160 mg, 80 mg	$0 (1)	
sotalol oral tablet 120 mg, 160 mg, 240 mg, 80 mg	$0 (1)	

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table. 10/15/2026

Drug Name	Drug Tier	Requirements/Limits
ANTIHYPERTENSIVE THERAPY		
acebutolol oral capsule 200 mg, 400 mg	$0 (1)	
aliskiren oral tablet 150 mg, 300 mg	$0 (1)	
amiloride oral tablet 5 mg	$0 (1)	
amiloride-hydrochlorothiazide oral tablet 5-50 mg	$0 (1)	
amlodipine oral tablet 10 mg, 2.5 mg, 5 mg	$0 (1)	
amlodipine-benazepril oral capsule 10-20 mg, 10-40 mg, 2.5-10 mg, 5-10 mg, 5-20 mg, 5-40 mg	$0 (6)	
amlodipine-olmesartan oral tablet 10-20 mg, 10-40 mg, 5-20 mg, 5-40 mg	$0 (6)	QL (30 EA per 30 days)
amlodipine-valsartan oral tablet 10-160 mg, 10-320 mg, 5-160 mg, 5-320 mg	$0 (6)	QL (30 EA per 30 days)
amlodipine-valsartan-hcthiazid oral tablet 10-160-12.5 mg, 10-160-25 mg, 10-320-25 mg, 5-160-12.5 mg, 5-160-25 mg	$0 (6)	QL (30 EA per 30 days)
atenolol oral tablet 100 mg, 25 mg, 50 mg	$0 (1)	
atenolol-chlorthalidone oral tablet 100-25 mg, 50-25 mg	$0 (1)	
benazepril oral tablet 10 mg, 20 mg, 40 mg, 5 mg	$0 (6)	
benazepril-hydrochlorothiazide oral tablet 10-12.5 mg, 20-12.5 mg, 20-25 mg, 5-6.25 mg	$0 (6)	
betaxolol oral tablet 10 mg, 20 mg	$0 (1)	
bisoprolol fumarate oral tablet 10 mg, 5 mg	$0 (1)	
bisoprolol-hydrochlorothiazide oral tablet 10-6.25 mg, 2.5-6.25 mg, 5-6.25 mg	$0 (1)	

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table. 10/15/2026

Drug Name	Drug Tier	Requirements/Limits
bumetanide injection solution 0.25 mg/ml	$0 (1)	
bumetanide oral tablet 0.5 mg, 1 mg, 2 mg	$0 (1)	
candesartan oral tablet 16 mg, 4 mg, 8 mg	$0 (6)	QL (60 EA per 30 days)
candesartan oral tablet 32 mg	$0 (6)	QL (30 EA per 30 days)
candesartan-hydrochlorothiazid oral tablet 16-12.5 mg	$0 (6)	QL (60 EA per 30 days)
candesartan-hydrochlorothiazid oral tablet 32-12.5 mg, 32-25 mg	$0 (6)	QL (30 EA per 30 days)
captopril oral tablet 100 mg, 12.5 mg, 25 mg, 50 mg	$0 (6)	
cartia xt oral capsule,extended release 24hr 120 mg, 180 mg, 240 mg, 300 mg	$0 (1)	
carvedilol oral tablet 12.5 mg, 25 mg, 3.125 mg, 6.25 mg	$0 (1)	
chlorthalidone oral tablet 25 mg, 50 mg	$0 (1)	
clonidine hcl oral tablet 0.1 mg, 0.2 mg, 0.3 mg	$0 (1)	
clonidine transdermal patch weekly 0.1 mg/24 hr, 0.2 mg/24 hr, 0.3 mg/24 hr	$0 (1)	QL (4 EA per 28 days)
diltiazem hcl oral capsule,extended release 12 hr 120 mg, 60 mg, 90 mg	$0 (1)	
diltiazem hcl oral capsule,extended release 24 hr 360 mg, 420 mg	$0 (1)	
diltiazem hcl oral capsule,extended release 24hr 120 mg, 180 mg, 240 mg, 300 mg	$0 (1)	
diltiazem hcl oral tablet 120 mg, 30 mg, 60 mg, 90 mg	$0 (1)	

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table. 10/15/2026

Drug Name	Drug Tier	Requirements/Limits
diltiazem hcl oral tablet extended release 24 hr 120 mg, 180 mg, 240 mg, 300 mg, 360 mg, 420 mg	$0 (1)	
dilt-xr oral capsule,ext.rel 24h degradable 120 mg, 180 mg, 240 mg	$0 (1)	
doxazosin oral tablet 1 mg, 2 mg, 4 mg, 8 mg	$0 (1)	
EDARBI ORAL TABLET 40 MG, 80 MG	$0 (2)	QL (30 EA per 30 days)
EDARBYCLOR ORAL TABLET 40-12.5 MG, 40-25 MG	$0 (2)	QL (30 EA per 30 days)
enalapril maleate oral tablet 10 mg, 2.5 mg, 20 mg, 5 mg	$0 (6)	
enalapril-hydrochlorothiazide oral tablet 10-25 mg, 5-12.5 mg	$0 (6)	
eplerenone oral tablet 25 mg, 50 mg	$0 (1)	
felodipine oral tablet extended release 24 hr 10 mg, 2.5 mg, 5 mg	$0 (1)	
fosinopril oral tablet 10 mg, 20 mg, 40 mg	$0 (6)	
fosinopril-hydrochlorothiazide oral tablet 10-12.5 mg, 20-12.5 mg	$0 (6)	
furosemide injection solution 10 mg/ml	$0 (1)	
furosemide oral solution 10 mg/ml, 40 mg/5 ml (8 mg/ml)	$0 (1)	
furosemide oral tablet 20 mg, 40 mg, 80 mg	$0 (1)	
guanfacine oral tablet 1 mg, 2 mg	$0 (3)	
hydralazine oral tablet 10 mg, 100 mg, 25 mg, 50 mg	$0 (1)	
hydrochlorothiazide oral capsule 12.5 mg	$0 (1)	

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table. 10/15/2026

Drug Name	Drug Tier	Requirements/Limits
hydrochlorothiazide oral tablet 12.5 mg, 25 mg, 50 mg	$0 (1)	
indapamide oral tablet 1.25 mg, 2.5 mg	$0 (1)	
irbesartan oral tablet 150 mg, 300 mg, 75 mg	$0 (6)	QL (30 EA per 30 days)
irbesartan-hydrochlorothiazide oral tablet 150-12.5 mg	$0 (6)	QL (60 EA per 30 days)
irbesartan-hydrochlorothiazide oral tablet 300-12.5 mg	$0 (6)	QL (30 EA per 30 days)
isradipine oral capsule 2.5 mg, 5 mg	$0 (1)	
KERENDIA ORAL TABLET 10 MG, 20 MG, 40 MG	$0 (2)	QL (30 EA per 30 days)
labetalol oral tablet 100 mg, 200 mg, 300 mg	$0 (1)	
lisinopril oral tablet 10 mg, 2.5 mg, 20 mg, 30 mg, 40 mg, 5 mg	$0 (6)	
lisinopril-hydrochlorothiazide oral tablet 10-12.5 mg, 20-12.5 mg, 20-25 mg	$0 (6)	
losartan oral tablet 100 mg	$0 (6)	QL (30 EA per 30 days)
losartan oral tablet 25 mg, 50 mg	$0 (6)	QL (60 EA per 30 days)
losartan-hydrochlorothiazide oral tablet 100-12.5 mg, 100-25 mg	$0 (6)	QL (30 EA per 30 days)
losartan-hydrochlorothiazide oral tablet 50-12.5 mg	$0 (6)	QL (60 EA per 30 days)
matzim la oral tablet extended release 24 hr 180 mg, 240 mg, 300 mg, 360 mg, 420 mg	$0 (1)	
metolazone oral tablet 10 mg, 2.5 mg, 5 mg	$0 (1)	
metoprolol succinate oral tablet extended release 24 hr 100 mg, 200 mg, 25 mg, 50 mg	$0 (1)	

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table. 10/15/2026

Drug Name	Drug Tier	Requirements/Limits
metoprolol ta-hydrochlorothiaz oral tablet 100-25 mg, 100-50 mg, 50-25 mg	$0 (1)	
metoprolol tartrate oral tablet 100 mg, 25 mg, 37.5 mg, 50 mg, 75 mg	$0 (1)	
metyrosine oral capsule 250 mg	$0 (5^)	PA
minoxidil oral tablet 10 mg, 2.5 mg	$0 (1)	
moexipril oral tablet 15 mg, 7.5 mg	$0 (6)	
nadolol oral tablet 20 mg, 40 mg, 80 mg	$0 (1)	
nebivolol oral tablet 10 mg, 2.5 mg, 20 mg, 5 mg	$0 (1)	
nicardipine oral capsule 20 mg, 30 mg	$0 (1)	
nifedipine oral tablet extended release 24hr 30 mg, 60 mg, 90 mg	$0 (1)	
nifedipine oral tablet extended release 30 mg, 60 mg, 90 mg	$0 (1)	
nimodipine oral capsule 30 mg	$0 (1)	
olmesartan oral tablet 20 mg, 40 mg	$0 (6)	QL (30 EA per 30 days)
olmesartan oral tablet 5 mg	$0 (6)	QL (60 EA per 30 days)
olmesartan-amlodipin-hcthiazid 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	$0 (6)	QL (30 EA per 30 days)
olmesartan-hydrochlorothiazide oral tablet 20-12.5 mg, 40-12.5 mg, 40-25 mg	$0 (6)	QL (30 EA per 30 days)
perindopril erbumine oral tablet 2 mg, 4 mg, 8 mg	$0 (6)	
pindolol oral tablet 10 mg, 5 mg	$0 (1)	
prazosin oral capsule 1 mg, 2 mg, 5 mg	$0 (1)	

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table. 10/15/2026

Drug Name	Drug Tier	Requirements/Limits
propranolol oral capsule,extended release 24 hr 120 mg, 160 mg, 60 mg, 80 mg	$0 (1)	
propranolol oral solution 20 mg/5 ml (4 mg/ml), 40 mg/5 ml (8 mg/ml)	$0 (1)	
propranolol oral tablet 10 mg, 20 mg, 40 mg, 60 mg, 80 mg	$0 (1)	
quinapril oral tablet 10 mg, 20 mg, 40 mg, 5 mg	$0 (6)	
quinapril-hydrochlorothiazide oral tablet 10-12.5 mg, 20-12.5 mg, 20-25 mg	$0 (6)	
ramipril oral capsule 1.25 mg, 10 mg, 2.5 mg, 5 mg	$0 (6)	
spironolactone oral tablet 100 mg, 25 mg, 50 mg	$0 (1)	
spironolacton-hydrochlorothiaz oral tablet 25-25 mg	$0 (1)	
telmisartan oral tablet 20 mg, 40 mg, 80 mg	$0 (6)	QL (30 EA per 30 days)
telmisartan-amlodipine oral tablet 40-10 mg, 40-5 mg, 80-10 mg, 80-5 mg	$0 (6)	QL (30 EA per 30 days)
telmisartan-hydrochlorothiazid oral tablet 40-12.5 mg, 80-25 mg	$0 (6)	QL (30 EA per 30 days)
telmisartan-hydrochlorothiazid oral tablet 80-12.5 mg	$0 (6)	QL (60 EA per 30 days)
terazosin oral capsule 1 mg, 10 mg, 2 mg, 5 mg	$0 (1)	
tiadylt er oral capsule,extended release 24 hr 120 mg, 180 mg, 240 mg, 300 mg, 360 mg, 420 mg	$0 (1)	

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table. 10/15/2026

Drug Name	Drug Tier	Requirements/Limits
timolol maleate oral tablet 10 mg, 20 mg, 5 mg	$0 (1)	
torsemide oral tablet 10 mg, 100 mg, 20 mg, 5 mg	$0 (1)	
trandolapril oral tablet 1 mg, 2 mg, 4 mg	$0 (6)	
triamterene-hydrochlorothiazid oral capsule 37.5-25 mg	$0 (1)	
triamterene-hydrochlorothiazid oral tablet 37.5-25 mg, 75-50 mg	$0 (1)	
valsartan oral tablet 160 mg, 40 mg, 80 mg	$0 (6)	QL (60 EA per 30 days)
valsartan oral tablet 320 mg	$0 (6)	QL (30 EA per 30 days)
valsartan-hydrochlorothiazide oral tablet 160-12.5 mg, 160-25 mg, 320-12.5 mg, 320-25 mg, 80-12.5 mg	$0 (6)	QL (30 EA per 30 days)
verapamil oral capsule, 24 hr er pellet ct 100 mg, 200 mg, 300 mg	$0 (1)	
verapamil oral capsule,ext rel. pellets 24 hr 120 mg, 180 mg, 240 mg, 360 mg	$0 (1)	
verapamil oral tablet 120 mg, 40 mg, 80 mg	$0 (1)	
verapamil oral tablet extended release 120 mg, 180 mg, 240 mg	$0 (1)	
COAGULATION THERAPY		
aspirin-dipyridamole oral capsule, er multiphase 12 hr 25-200 mg	$0 (1)	
cilostazol oral tablet 100 mg, 50 mg	$0 (1)	
clopidogrel oral tablet 75 mg	$0 (1)	
dabigatran etexilate oral capsule 110 mg, 150 mg, 75 mg	$0 (1)	QL (60 EA per 30 days)

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table. 10/15/2026

Drug Name	Drug Tier	Requirements/Limits
dipyridamole oral tablet 25 mg, 50 mg, 75 mg	$0 (3)	
ELIQUIS DVT-PE TREAT 30D START ORAL TABLETS,DOSE PACK 5 MG (74 TABS)	$0 (2)	QL (74 EA per 180 days)
ELIQUIS ORAL TABLET 2.5 MG	$0 (2)	QL (60 EA per 30 days)
ELIQUIS ORAL TABLET 5 MG	$0 (2)	QL (74 EA per 30 days)
ELIQUIS ORAL TABLET FOR SUSPENSION 0.5 MG	$0 (2)	QL (140 EA per 28 days)
ELIQUIS ORAL TABLET FOR SUSPENSION 1.5 MG (0.5 MG X 3)	$0 (2)	QL (420 EA per 28 days)
ELIQUIS ORAL TABLET FOR SUSPENSION 2 MG (0.5 MG X 4)	$0 (2)	QL (560 EA per 28 days)
ELIQUIS SPRINKLE ORAL CAPSULE, SPRINKLE 0.15 MG	$0 (2)	QL (70 EA per 28 days)
eltrombopag olamine oral powder in packet 12.5 mg, 25 mg	$0 (5^)	PA; QL (180 EA per 30 days)
eltrombopag olamine oral tablet 12.5 mg, 25 mg	$0 (5^)	PA; QL (30 EA per 30 days)
eltrombopag olamine oral tablet 50 mg, 75 mg	$0 (5^)	PA; QL (60 EA per 30 days)
enoxaparin subcutaneous syringe 100 mg/ml, 120 mg/0.8 ml, 150 mg/ml, 30 mg/0.3 ml, 40 mg/0.4 ml, 60 mg/0.6 ml, 80 mg/0.8 ml	$0 (3)	
heparin (porcine) injection solution 1,000 unit/ml, 10,000 unit/ml, 20,000 unit/ml, 5,000 unit/ml	$0 (1)	
jantoven oral tablet 1 mg, 10 mg, 2 mg, 2.5 mg, 3 mg, 4 mg, 5 mg, 6 mg, 7.5 mg	$0 (1)	

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table. 10/15/2026

Drug Name	Drug Tier	Requirements/Limits
pentoxifylline oral tablet extended release 400 mg	$0 (1)	
prasugrel hcl oral tablet 10 mg, 5 mg	$0 (1)	
rivaroxaban oral suspension for reconstitution 1 mg/ml	$0 (1)	
rivaroxaban oral tablet 2.5 mg	$0 (1)	
ticagrelor oral tablet 60 mg, 90 mg	$0 (2)	
warfarin oral tablet 1 mg, 10 mg, 2 mg, 2.5 mg, 3 mg, 4 mg, 5 mg, 6 mg, 7.5 mg	$0 (1)	
XARELTO DVT-PE TREAT 30D START ORAL TABLETS,DOSE PACK 15 MG (42)- 20 MG (9)	$0 (2)	QL (51 EA per 180 days)
XARELTO ORAL TABLET 10 MG, 20 MG	$0 (2)	QL (30 EA per 30 days)
XARELTO ORAL TABLET 15 MG	$0 (2)	QL (60 EA per 30 days)
LIPID/CHOLESTEROL LOWERING AGENTS		
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	$0 (6)	QL (30 EA per 30 days)
atorvastatin oral tablet 10 mg, 20 mg, 40 mg, 80 mg	$0 (6)	QL (30 EA per 30 days)
cholestyramine (with sugar) oral powder in packet 4 gram	$0 (1)	
cholestyramine light oral powder in packet 4 gram	$0 (1)	
colesevelam oral powder in packet 3.75 gram	$0 (1)	
colesevelam oral tablet 625 mg	$0 (1)	
colestipol oral packet 5 gram	$0 (1)	

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table. 10/15/2026

Drug Name	Drug Tier	Requirements/Limits
colestipol oral tablet 1 gram	$0 (1)	
ezetimibe oral tablet 10 mg	$0 (1)	
ezetimibe-simvastatin oral tablet 10-10 mg, 10-20 mg, 10-40 mg, 10-80 mg	$0 (6)	QL (30 EA per 30 days)
fenofibrate micronized oral capsule 134 mg, 200 mg, 43 mg, 67 mg	$0 (1)	
fenofibrate nanocrystallized oral tablet 145 mg, 48 mg	$0 (1)	
fenofibrate oral tablet 160 mg, 54 mg	$0 (1)	
fenofibric acid (choline) oral capsule,delayed release(dr/ec) 135 mg, 45 mg	$0 (1)	
fluvastatin oral capsule 20 mg, 40 mg	$0 (6)	QL (60 EA per 30 days)
fluvastatin oral tablet extended release 24 hr 80 mg	$0 (6)	QL (30 EA per 30 days)
gemfibrozil oral tablet 600 mg	$0 (1)	
icosapent ethyl oral capsule 0.5 gram, 1 gram	$0 (3)	
lovastatin oral tablet 10 mg, 20 mg, 40 mg	$0 (6)	QL (60 EA per 30 days)
NEXLETOL ORAL TABLET 180 MG	$0 (2)	PA
niacin oral tablet extended release 24 hr 1,000 mg, 500 mg, 750 mg	$0 (1)	
pitavastatin calcium oral tablet 1 mg, 2 mg, 4 mg	$0 (2)	QL (30 EA per 30 days)
PRALUENT PEN SUBCUTANEOUS PEN INJECTOR 150 MG/ML, 75 MG/ML	$0 (2)	PA
pravastatin oral tablet 10 mg, 20 mg, 40 mg, 80 mg	$0 (6)	QL (30 EA per 30 days)

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table. 10/15/2026

Drug Name	Drug Tier	Requirements/Limits
rosuvastatin oral tablet 10 mg, 20 mg, 40 mg, 5 mg	$0 (6)	QL (30 EA per 30 days)
simvastatin oral tablet 10 mg, 20 mg, 40 mg, 5 mg, 80 mg	$0 (6)	QL (30 EA per 30 days)
MISCELLANEOUS CARDIOVASCULAR AGENTS		
digoxin oral solution 50 mcg/ml (0.05 mg/ml)	$0 (1)	
digoxin oral tablet 125 mcg (0.125 mg), 250 mcg (0.25 mg), 62.5 mcg (0.0625 mg)	$0 (1)	QL (60 EA per 30 days)
FILSPARI ORAL TABLET 200 MG, 400 MG	$0 (5^)	PA; QL (30 EA per 30 days)
ivabradine oral tablet 5 mg, 7.5 mg	$0 (3)	QL (60 EA per 30 days)
ranolazine oral tablet extended release 12 hr 1,000 mg, 500 mg	$0 (3)	
sacubitril-valsartan oral tablet 24-26 mg	$0 (2)	QL (180 EA per 30 days)
sacubitril-valsartan oral tablet 49-51 mg, 97-103 mg	$0 (2)	QL (60 EA per 30 days)
VERQUVO ORAL TABLET 10 MG, 2.5 MG, 5 MG	$0 (2)	QL (30 EA per 30 days)
NITRATES		
isosorbide dinitrate oral tablet 10 mg, 20 mg, 30 mg, 5 mg	$0 (1)	
isosorbide mononitrate oral tablet 10 mg, 20 mg	$0 (1)	
isosorbide mononitrate oral tablet extended release 24 hr 120 mg, 30 mg, 60 mg	$0 (1)	
nitro-bid transdermal ointment 2 %	$0 (3)	
nitroglycerin sublingual tablet 0.3 mg, 0.4 mg, 0.6 mg	$0 (1)	

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table. 10/15/2026

Drug Name	Drug Tier	Requirements/Limits
nitroglycerin transdermal patch 24 hour 0.1 mg/hr, 0.2 mg/hr, 0.4 mg/hr, 0.6 mg/hr	$0 (1)	
DERMATOLOGICALS/TOPICAL THERAPY		
ANTIPSORIATIC / ANTISEBORRHEIC		
acitretin oral capsule 10 mg, 17.5 mg, 25 mg	$0 (3)	
calcipotriene scalp solution 0.005 %	$0 (3)	QL (120 ML per 30 days)
calcipotriene topical ointment 0.005 %	$0 (3)	QL (120 GM per 30 days)
COSENTYX (2 SYRINGES) SUBCUTANEOUS SYRINGE 150 MG/ML	$0 (5^)	PA; QL (10 ML per 28 days)
COSENTYX PEN (2 PENS) SUBCUTANEOUS PEN INJECTOR 150 MG/ML	$0 (5^)	PA; QL (10 ML per 28 days)
COSENTYX SUBCUTANEOUS SYRINGE 75 MG/0.5 ML	$0 (5^)	PA; QL (2.5 ML per 28 days)
COSENTYX UNOREADY PEN SUBCUTANEOUS PEN INJECTOR 300 MG/2 ML	$0 (5^)	PA; QL (10 ML per 28 days)
selenium sulfide topical lotion 2.5 %	$0 (1)	
SKYRIZI SUBCUTANEOUS PEN INJECTOR 150 MG/ML	$0 (5^)	PA; QL (6 ML per 365 days)
SKYRIZI SUBCUTANEOUS SYRINGE 150 MG/ML	$0 (5^)	PA; QL (6 ML per 365 days)
SKYRIZI SUBCUTANEOUS SYRINGE 55 MG/0.37 ML	$0 (5^)	PA; QL (0.74 ML per 84 days)
STEQEYMA SUBCUTANEOUS SOLUTION 45 MG/0.5 ML	$0 (2)	PA; QL (0.5 ML per 28 days)
STEQEYMA SUBCUTANEOUS SYRINGE 45 MG/0.5 ML	$0 (2)	PA; QL (0.5 ML per 28 days)
STEQEYMA SUBCUTANEOUS SYRINGE 90 MG/ML	$0 (5^)	PA; QL (1 ML per 28 days)

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table. 10/15/2026

Drug Name	Drug Tier	Requirements/Limits
TREMFYA ONE-PRESS SUBCUTANEOUS AUTO-INJECTOR 100 MG/ML	$0 (5^)	PA; QL (2 ML per 28 days)
TREMFYA PEN INDUCTION PK(2PEN) SUBCUTANEOUS PEN INJECTOR 200 MG/2 ML	$0 (5^)	PA; QL (12 ML per 180 days)
TREMFYA PEN SUBCUTANEOUS PEN INJECTOR 200 MG/2 ML	$0 (5^)	PA; QL (2 ML per 28 days)
TREMFYA SUBCUTANEOUS SYRINGE 100 MG/ML, 200 MG/2 ML	$0 (5^)	PA; QL (2 ML per 28 days)
USTEKINUMAB-TTWE SUBCUTANEOUS SOLUTION 45 MG/0.5 ML	$0 (2)	PA; QL (0.5 ML per 28 days)
USTEKINUMAB-TTWE SUBCUTANEOUS SYRINGE 45 MG/0.5 ML	$0 (2)	PA; QL (0.5 ML per 28 days)
USTEKINUMAB-TTWE SUBCUTANEOUS SYRINGE 90 MG/ML	$0 (5^)	PA; QL (1 ML per 28 days)
MISCELLANEOUS DERMATOLOGICALS		
ammonium lactate topical cream 12 %	$0 (1)	
ammonium lactate topical lotion 12 %	$0 (1)	
DUPIXENT PEN SUBCUTANEOUS PEN INJECTOR 200 MG/1.14 ML	$0 (5^)	PA; QL (4.56 ML per 28 days)
DUPIXENT PEN SUBCUTANEOUS PEN INJECTOR 300 MG/2 ML	$0 (5^)	PA; QL (8 ML per 28 days)
DUPIXENT SYRINGE SUBCUTANEOUS SYRINGE 200 MG/1.14 ML	$0 (5^)	PA; QL (4.56 ML per 28 days)
DUPIXENT SYRINGE SUBCUTANEOUS SYRINGE 300 MG/2 ML	$0 (5^)	PA; QL (8 ML per 28 days)
EUCRISA TOPICAL OINTMENT 2 %	$0 (3)	PA; QL (120 GM per 30 days)
fluorouracil topical cream 5 %	$0 (1)	QL (40 GM per 30 days)
fluorouracil topical solution 2 %, 5 %	$0 (1)	QL (10 ML per 30 days)

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table. 10/15/2026

Drug Name	Drug Tier	Requirements/Limits
imiquimod topical cream in packet 5 %	$0 (1)	QL (24 EA per 28 days)
lidocaine hcl mucous membrane solution 2 %	$0 (1)	
lidocaine hcl mucous membrane solution 4 % (40 mg/ml)	$0 (3)	QL (50 ML per 30 days)
lidocaine topical adhesive patch,medicated 5 %	$0 (3)	PA; QL (90 EA per 30 days)
lidocaine topical ointment 5 %	$0 (1)	QL (50 GM per 30 days)
lidocaine-prilocaine topical cream 2.5-2.5 %	$0 (1)	QL (30 GM per 30 days)
lidocan iii topical adhesive patch,medicated 5 %	$0 (3)	PA; QL (90 EA per 30 days)
PANRETIN TOPICAL GEL 0.1 %	$0 (5^)	PA-NS; QL (60 GM per 30 days)
pimecrolimus topical cream 1 %	$0 (3)	QL (100 GM per 30 days)
podofilox topical solution 0.5 %	$0 (3)	QL (7 ML per 28 days)
SANTYL TOPICAL OINTMENT 250 UNIT/GRAM	$0 (3)	QL (180 GM per 30 days)
silver sulfadiazine topical cream 1 %	$0 (1)	
ssd topical cream 1 %	$0 (1)	
tacrolimus topical ointment 0.03 %, 0.1 %	$0 (3)	QL (100 GM per 30 days)
tridacaine ii topical adhesive patch,medicated 5 %	$0 (3)	PA; QL (90 EA per 30 days)
VALCHLOR TOPICAL GEL 0.016 %	$0 (5^)	PA-NS; QL (60 GM per 30 days)
THERAPY FOR ACNE		
accutane oral capsule 10 mg, 20 mg, 40 mg	$0 (1)	
adapalene topical cream 0.1 %	$0 (3)	QL (45 GM per 30 days)
adapalene topical gel 0.3 %	$0 (3)	QL (45 GM per 30 days)

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table. 10/15/2026

Drug Name	Drug Tier	Requirements/Limits
amnesteem oral capsule 10 mg, 20 mg, 30 mg, 40 mg	$0 (1)	
azelaic acid topical gel 15 %	$0 (3)	QL (50 GM per 30 days)
claravis oral capsule 10 mg, 20 mg, 30 mg, 40 mg	$0 (1)	
clindamycin phosphate topical gel 1 %	$0 (3)	QL (120 GM per 30 days)
clindamycin phosphate topical gel, once daily 1 %	$0 (3)	QL (75 ML per 30 days)
clindamycin phosphate topical lotion 1 %	$0 (3)	QL (120 ML per 30 days)
clindamycin phosphate topical solution 1 %	$0 (1)	QL (120 ML per 30 days)
clindamycin phosphate topical swab 1 %	$0 (1)	QL (60 EA per 30 days)
clindamycin-benzoyl peroxide topical gel 1.2 %(1 % base) -5 %	$0 (1)	QL (45 GM per 30 days)
clindamycin-benzoyl peroxide topical gel 1-5 %	$0 (1)	QL (50 GM per 30 days)
ery pads topical swab 2 %	$0 (3)	QL (60 EA per 30 days)
erythromycin with ethanol topical solution 2 %	$0 (1)	QL (60 ML per 30 days)
erythromycin-benzoyl peroxide topical gel 3-5 %	$0 (1)	QL (46.6 GM per 30 days)
isotretinoin oral capsule 10 mg, 20 mg, 25 mg, 30 mg, 35 mg, 40 mg	$0 (3)	
metronidazole topical cream 0.75 %	$0 (3)	QL (45 GM per 30 days)
metronidazole topical gel 0.75 %	$0 (3)	QL (45 GM per 30 days)
metronidazole topical lotion 0.75 %	$0 (3)	QL (59 ML per 30 days)
neuac topical gel 1.2 %(1 % base) -5 %	$0 (1)	QL (45 GM per 30 days)
tazarotene topical cream 0.1 %	$0 (2)	PA; QL (60 GM per 30 days)
tazarotene topical gel 0.05 %, 0.1 %	$0 (3)	PA; QL (100 GM per 30 days)

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table. 10/15/2026

Drug Name	Drug Tier	Requirements/Limits
tretinoin microspheres topical gel 0.04 %, 0.1 %	$0 (3)	PA; QL (50 GM per 30 days)
tretinoin topical cream 0.025 %, 0.05 %, 0.1 %	$0 (3)	PA; QL (45 GM per 30 days)
tretinoin topical gel 0.01 %, 0.025 %, 0.05 %	$0 (3)	PA; QL (45 GM per 30 days)
trilitas topical gel 0.1 %	$0 (3)	PA; QL (90 GM per 30 days)
zenatane oral capsule 10 mg, 20 mg, 30 mg, 40 mg	$0 (1)	
TOPICAL ANTIBACTERIALS		
gentamicin topical cream 0.1 %	$0 (1)	QL (60 GM per 30 days)
gentamicin topical ointment 0.1 %	$0 (3)	QL (60 GM per 30 days)
mupirocin topical ointment 2 %	$0 (1)	QL (44 GM per 30 days)
sulfacetamide sodium (acne) topical suspension 10 %	$0 (3)	
TOPICAL ANTIFUNGALS		
ciclopirox topical cream 0.77 %	$0 (1)	QL (90 GM per 28 days)
ciclopirox topical gel 0.77 %	$0 (1)	QL (100 GM per 28 days)
ciclopirox topical suspension 0.77 %	$0 (3)	QL (60 ML per 28 days)
clotrimazole topical cream 1 %	$0 (1)	QL (45 GM per 28 days)
clotrimazole topical solution 1 %	$0 (1)	QL (30 ML per 28 days)
clotrimazole-betamethasone topical cream 1-0.05 %	$0 (3)	QL (45 GM per 28 days)
clotrimazole-betamethasone topical lotion 1-0.05 %	$0 (3)	QL (60 ML per 28 days)
ketoconazole topical cream 2 %	$0 (1)	QL (60 GM per 28 days)
ketoconazole topical shampoo 2 %	$0 (1)	QL (120 ML per 28 days)
naftifine topical cream 1 %	$0 (3)	QL (90 GM per 28 days)
naftifine topical cream 2 %	$0 (3)	QL (60 GM per 28 days)

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table. 10/15/2026

Drug Name	Drug Tier	Requirements/Limits
naftifine topical gel 2 %	$0 (3)	QL (60 GM per 28 days)
nyamyc topical powder 100,000 unit/gram	$0 (1)	QL (120 GM per 30 days)
nystatin topical cream 100,000 unit/gram	$0 (1)	QL (30 GM per 28 days)
nystatin topical ointment 100,000 unit/gram	$0 (1)	QL (30 GM per 28 days)
nystatin topical powder 100,000 unit/gram	$0 (1)	QL (120 GM per 30 days)
nystop topical powder 100,000 unit/gram	$0 (1)	QL (120 GM per 30 days)
TOPICAL CORTICOSTEROIDS		
ala-cort topical cream 1 %	$0 (1)	
alclometasone topical cream 0.05 %	$0 (3)	QL (120 GM per 30 days)
alclometasone topical ointment 0.05 %	$0 (3)	QL (120 GM per 30 days)
betamethasone dipropionate topical cream 0.05 %	$0 (1)	QL (135 GM per 30 days)
betamethasone dipropionate topical lotion 0.05 %	$0 (1)	QL (120 ML per 30 days)
betamethasone dipropionate topical ointment 0.05 %	$0 (3)	QL (135 GM per 30 days)
betamethasone valerate topical cream 0.1 %	$0 (1)	QL (135 GM per 30 days)
betamethasone valerate topical lotion 0.1 %	$0 (3)	QL (120 ML per 30 days)
betamethasone valerate topical ointment 0.1 %	$0 (1)	QL (135 GM per 30 days)
betamethasone, augmented topical cream 0.05 %	$0 (1)	QL (150 GM per 30 days)
betamethasone, augmented topical gel 0.05 %	$0 (1)	QL (150 GM per 30 days)
betamethasone, augmented topical lotion 0.05 %	$0 (1)	QL (120 ML per 30 days)
betamethasone, augmented topical ointment 0.05 %	$0 (1)	QL (150 GM per 30 days)

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table. 10/15/2026

Drug Name	Drug Tier	Requirements/Limits
clobetasol scalp solution 0.05 %	$0 (3)	QL (100 ML per 28 days)
clobetasol topical cream 0.05 %	$0 (3)	QL (120 GM per 28 days)
clobetasol topical gel 0.05 %	$0 (3)	QL (120 GM per 28 days)
clobetasol topical ointment 0.05 %	$0 (3)	QL (120 GM per 28 days)
clobetasol topical shampoo 0.05 %	$0 (3)	QL (236 ML per 28 days)
clobetasol-emollient topical cream 0.05 %	$0 (3)	QL (120 GM per 28 days)
clodan topical shampoo 0.05 %	$0 (3)	QL (236 ML per 28 days)
desonide topical cream 0.05 %	$0 (1)	QL (120 GM per 30 days)
desonide topical lotion 0.05 %	$0 (3)	QL (118 ML per 30 days)
desonide topical ointment 0.05 %	$0 (1)	QL (120 GM per 30 days)
fluocinolone and shower cap scalp oil 0.01 %	$0 (1)	QL (118.28 ML per 30 days)
fluocinolone topical cream 0.01 %, 0.025 %	$0 (3)	QL (120 GM per 30 days)
fluocinolone topical ointment 0.025 %	$0 (3)	QL (120 GM per 30 days)
fluocinolone topical solution 0.01 %	$0 (1)	QL (120 ML per 30 days)
fluocinonide topical cream 0.05 %	$0 (3)	QL (120 GM per 30 days)
fluocinonide topical gel 0.05 %	$0 (3)	QL (120 GM per 30 days)
fluocinonide topical ointment 0.05 %	$0 (1)	QL (120 GM per 30 days)
fluocinonide topical solution 0.05 %	$0 (1)	QL (120 ML per 30 days)
fluocinonide-emollient topical cream 0.05 %	$0 (3)	QL (120 GM per 30 days)
fluticasone propionate topical cream 0.05 %	$0 (1)	
halobetasol propionate topical cream 0.05 %	$0 (1)	QL (100 GM per 30 days)
halobetasol propionate topical ointment 0.05 %	$0 (3)	QL (100 GM per 30 days)
hydrocortisone topical cream 1 %	$0 (1)	
hydrocortisone topical lotion 2.5 %	$0 (1)	
hydrocortisone topical ointment 2.5 %	$0 (1)	
mometasone topical cream 0.1 %	$0 (1)	

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table. 10/15/2026

Drug Name	Drug Tier	Requirements/Limits
mometasone topical ointment 0.1 %	$0 (1)	
mometasone topical solution 0.1 %	$0 (1)	
triamcinolone acetonide topical cream 0.025 %, 0.1 %, 0.5 %	$0 (1)	
triamcinolone acetonide topical lotion 0.025 %, 0.1 %	$0 (1)	
triamcinolone acetonide topical ointment 0.025 %, 0.1 %, 0.5 %	$0 (1)	
triderm topical cream 0.5 %	$0 (1)	
TOPICAL SCABICIDES / PEDICULICIDES		
malathion topical lotion 0.5 %	$0 (1)	
permethrin topical cream 5 %	$0 (1)	QL (60 GM per 30 days)
DIAGNOSTICS / MISCELLANEOUS AGENTS		
MISCELLANEOUS AGENTS		
acamprosate oral tablet,delayed release (dr/ec) 333 mg	$0 (1)	
anagrelide oral capsule 0.5 mg, 1 mg	$0 (1)	
carglumic acid oral tablet, dispersible 200 mg	$0 (5^)	PA
cevimeline oral capsule 30 mg	$0 (1)	
CHEMET ORAL CAPSULE 100 MG	$0 (3)	PA
d10 %-0.45 % sodium chloride intravenous parenteral solution	$0 (1)	
d2.5 %-0.45 % sodium chloride intravenous parenteral solution	$0 (3)	
d5 % and 0.9 % sodium chloride intravenous parenteral solution	$0 (1)	

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table. 10/15/2026

Drug Name	Drug Tier	Requirements/Limits
d5 %-0.45 % sodium chloride intravenous parenteral solution	$0 (1)	
deferasirox oral tablet 180 mg, 360 mg	$0 (3)	PA
deferasirox oral tablet 90 mg	$0 (1)	PA
deferasirox oral tablet, dispersible 125 mg	$0 (3)	PA
deferasirox oral tablet, dispersible 250 mg, 500 mg	$0 (5^)	PA
dextrose 10 % and 0.2 % nacl intravenous parenteral solution	$0 (3)	
dextrose 10 % in water (d10w) intravenous parenteral solution 10 %	$0 (1)	
dextrose 5 % in water (d5w) intravenous parenteral solution	$0 (1)	
dextrose 5%-0.2 % sod chloride intravenous parenteral solution	$0 (1)	
disulfiram oral tablet 250 mg, 500 mg	$0 (1)	
glutamine (sickle cell) oral powder in packet 5 gram	$0 (5^)	PA
INCRELEX SUBCUTANEOUS SOLUTION 10 MG/ML	$0 (5^)	PA; LA
kionex oral suspension 15 gram/60 ml	$0 (1)	
levocarnitine (with sugar) oral solution 100 mg/ml	$0 (1)	
levocarnitine oral tablet 330 mg	$0 (1)	
LOKELMA ORAL POWDER IN PACKET 10 GRAM, 5 GRAM	$0 (2)	
midodrine oral tablet 10 mg, 2.5 mg, 5 mg	$0 (1)	

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table. 10/15/2026

Drug Name	Drug Tier	Requirements/Limits
nitisinone oral capsule 10 mg, 2 mg, 20 mg, 5 mg	$0 (5^)	PA
pilocarpine hcl oral tablet 5 mg, 7.5 mg	$0 (1)	
PROLASTIN-C INTRAVENOUS SOLUTION 1,000 MG (+/-)/20 ML	$0 (5^)	PA; LA
REVCOVI INTRAMUSCULAR SOLUTION 2.4 MG/1.5 ML (1.6 MG/ML)	$0 (5^)	PA; LA
REZDIFFRA ORAL TABLET 100 MG, 60 MG, 80 MG	$0 (5^)	PA; QL (30 EA per 30 days)
riluzole oral tablet 50 mg	$0 (1)	
risedronate oral tablet 30 mg	$0 (1)	QL (30 EA per 30 days)
sevelamer carbonate oral tablet 800 mg	$0 (3)	PA
sodium chloride 0.9 % intravenous parenteral solution	$0 (1)	
sodium chloride irrigation solution 0.9 %	$0 (1)	
sodium phenylbutyrate oral powder 0.94 gram/gram	$0 (5^)	PA
sodium phenylbutyrate oral tablet 500 mg	$0 (5^)	PA
sodium polystyrene sulfonate oral powder 15 gram	$0 (1)	
sodium polystyrene sulfonate oral suspension 15 gram/60 ml	$0 (1)	
sps (with sorbitol) oral suspension 15-20 gram/60 ml	$0 (1)	
trientine oral capsule 250 mg	$0 (5^)	PA
WEGOVY ORAL TABLET 1.5 MG, 25 MG, 4 MG, 9 MG	$0 (2)	PA; QL (30 EA per 30 days)

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table. 10/15/2026

Drug Name	Drug Tier	Requirements/Limits
WEGOVY SUBCUTANEOUS PEN INJECTOR 0.25 MG/0.5 ML, 0.5 MG/0.5 ML, 1 MG/0.5 ML	$0 (2)	PA; QL (2 ML per 28 days)
WEGOVY SUBCUTANEOUS PEN INJECTOR 1.7 MG/0.75 ML, 2.4 MG/0.75 ML	$0 (2)	PA; QL (3 ML per 28 days)
SMOKING DETERRENTS		
bupropion hcl (smoking deter) oral tablet extended release 12 hr 150 mg	$0 (1)	QL (60 EA per 30 days)
NICOTROL NS NASAL SPRAY,NON-AEROSOL 10 MG/ML	$0 (3)	
varenicline tartrate oral tablet 0.5 mg, 1 mg, 1 mg (56 pack)	$0 (1)	
varenicline tartrate oral tablets,dose pack 0.5 mg (11)- 1 mg (42)	$0 (1)	
EAR, NOSE / THROAT MEDICATIONS		
MISCELLANEOUS AGENTS		
azelastine nasal spray,non-aerosol 137 mcg (0.1 %)	$0 (1)	QL (60 ML per 30 days)
chlorhexidine gluconate mucous membrane mouthwash 0.12 %	$0 (1)	
ipratropium bromide nasal spray,non-aerosol 21 mcg (0.03 %)	$0 (1)	QL (30 ML per 28 days)
ipratropium bromide nasal spray,non-aerosol 42 mcg (0.06 %)	$0 (1)	QL (30 ML per 20 days)
kourzeq dental paste 0.1 %	$0 (2)	
olopatadine nasal spray,non-aerosol 0.6 %	$0 (1)	
periogard mucous membrane mouthwash 0.12 %	$0 (1)	
triamcinolone acetonide dental paste 0.1 %	$0 (2)	

Drug Name	Drug Tier	Requirements/Limits
MISCELLANEOUS OTIC PREPARATIONS		
acetic acid otic (ear) solution 2 %	$0 (1)	
fluocinolone acetonide oil otic (ear) drops 0.01 %	$0 (1)	
ofloxacin otic (ear) drops 0.3 %	$0 (1)	
OTIC STEROID / ANTIBIOTIC		
ciprofloxacin-dexamethasone otic (ear) drops,suspension 0.3-0.1 %	$0 (3)	QL (7.5 ML per 7 days)
neomycin-polymyxin-hc otic (ear) drops,suspension 3.5-10,000-1 mg/ml-unit/ml-%	$0 (1)	
neomycin-polymyxin-hc otic (ear) solution 3.5-10,000-1 mg/ml-unit/ml-%	$0 (1)	
ENDOCRINE/DIABETES		
ADRENAL HORMONES		
dexamethasone oral solution 0.5 mg/5 ml	$0 (1)	
dexamethasone oral tablet 0.5 mg, 0.75 mg, 1 mg, 1.5 mg, 2 mg, 4 mg, 6 mg	$0 (1)	
fludrocortisone oral tablet 0.1 mg	$0 (1)	
hydrocortisone oral tablet 10 mg, 20 mg, 5 mg	$0 (1)	
methylprednisolone oral tablet 16 mg, 32 mg, 4 mg, 8 mg	$0 (1)	B/D
methylprednisolone oral tablets,dose pack 4 mg	$0 (1)	
prednisolone oral solution 15 mg/5 ml	$0 (1)	

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table. 10/15/2026

Drug Name	Drug Tier	Requirements/Limits
prednisolone sodium phosphate oral solution 25 mg/5 ml (5 mg/ml), 5 mg base/5 ml (6.7 mg/5 ml)	$0 (1)	
prednisone intensol oral concentrate 5 mg/ml	$0 (3)	
prednisone oral solution 5 mg/5 ml	$0 (3)	
prednisone oral tablet 1 mg, 10 mg, 2.5 mg, 20 mg, 5 mg, 50 mg	$0 (1)	
prednisone oral tablets,dose pack 10 mg, 10 mg (48 pack), 5 mg, 5 mg (48 pack)	$0 (1)	
TARPEYO ORAL CAPSULE,DELAYED RELEASE(DR/EC) 4 MG	$0 (5^)	PA; QL (120 EA per 30 days)
ANTITHYROID AGENTS		
methimazole oral tablet 10 mg, 5 mg	$0 (1)	
propylthiouracil oral tablet 50 mg	$0 (1)	
DIABETES THERAPY		
acarbose oral tablet 100 mg	$0 (6)	QL (90 EA per 30 days)
acarbose oral tablet 25 mg	$0 (6)	QL (360 EA per 30 days)
acarbose oral tablet 50 mg	$0 (6)	QL (180 EA per 30 days)
alcohol pads topical pads, medicated	$0 (1)	
dapagliflozin oral tablet 10 mg, 5 mg	$0 (2)	QL (30 EA per 30 days)
dapagliflozin-metformin oral tablet, ir - er, biphasic 24hr 10-1,000 mg, 10-500 mg	$0 (2)	QL (30 EA per 30 days)
dapagliflozin-metformin oral tablet, ir - er, biphasic 24hr 5-1,000 mg, 5-500 mg	$0 (2)	QL (60 EA per 30 days)
diazoxide oral suspension 50 mg/ml	$0 (5^)	
FARXIGA ORAL TABLET 10 MG, 5 MG	$0 (2)	ST; QL (30 EA per 30 days)
glimepiride oral tablet 1 mg	$0 (6)	QL (240 EA per 30 days)

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table. 10/15/2026

Drug Name	Drug Tier	Requirements/Limits
glimepiride oral tablet 2 mg	$0 (6)	QL (120 EA per 30 days)
glimepiride oral tablet 4 mg	$0 (6)	QL (60 EA per 30 days)
glipizide oral tablet 10 mg	$0 (6)	QL (120 EA per 30 days)
glipizide oral tablet 5 mg	$0 (6)	QL (240 EA per 30 days)
glipizide oral tablet extended release 24hr 10 mg	$0 (6)	QL (60 EA per 30 days)
glipizide oral tablet extended release 24hr 2.5 mg	$0 (6)	QL (240 EA per 30 days)
glipizide oral tablet extended release 24hr 5 mg	$0 (6)	QL (120 EA per 30 days)
glipizide-metformin oral tablet 2.5-250 mg	$0 (6)	QL (240 EA per 30 days)
glipizide-metformin oral tablet 2.5-500 mg, 5-500 mg	$0 (6)	QL (120 EA per 30 days)
GLYXAMBI ORAL TABLET 10-5 MG, 25-5 MG	$0 (2)	QL (30 EA per 30 days)
GVOKE HYPOPEN 2-PACK SUBCUTANEOUS AUTO-INJECTOR 0.5 MG/0.1 ML, 1 MG/0.2 ML	$0 (2)	
GVOKE PFS 1-PACK SYRINGE SUBCUTANEOUS SYRINGE 1 MG/0.2 ML	$0 (2)	
GVOKE SUBCUTANEOUS SOLUTION 1 MG/0.2 ML	$0 (2)	
HUMULIN R U-500 (CONC) KWIKPEN SUBCUTANEOUS INSULIN PEN 500 UNIT/ML (3 ML)	$0 (2)	
INSULIN GLARGINE U-300 CONC SUBCUTANEOUS INSULIN PEN 300 UNIT/ML (1.5 ML), 300 UNIT/ML (3 ML)	$0 (2)	
INSULIN GLARGINE-YFGN SUBCUTANEOUS INSULIN PEN 100 UNIT/ML (3 ML)	$0 (2)	

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table. 10/15/2026

Drug Name	Drug Tier	Requirements/Limits
INSULIN GLARGINE-YFGN SUBCUTANEOUS SOLUTION 100 UNIT/ML	$0 (2)	
JANUVIA ORAL TABLET 100 MG, 25 MG, 50 MG	$0 (2)	QL (30 EA per 30 days)
JARDIANCE ORAL TABLET 10 MG, 25 MG	$0 (2)	QL (30 EA per 30 days)
KIRSTY PEN SUBCUTANEOUS INSULIN PEN 100 UNIT/ML (3 ML)	$0 (2)	
KIRSTY SUBCUTANEOUS SOLUTION 100 UNIT/ML	$0 (2)	
LANTUS SOLOSTAR U-100 INSULIN SUBCUTANEOUS INSULIN PEN 100 UNIT/ML (3 ML)	$0 (2)	
LANTUS U-100 INSULIN SUBCUTANEOUS SOLUTION 100 UNIT/ML	$0 (2)	
liraglutide subcutaneous pen injector 0.6 mg/0.1 ml (18 mg/3 ml)	$0 (2)	PA; QL (9 ML per 30 days)
MERILOG SOLOSTAR SUBCUTANEOUS INSULIN PEN 100 UNIT/ML (3 ML)	$0 (2)	
MERILOG SUBCUTANEOUS SOLUTION 100 UNIT/ML	$0 (2)	
metformin er 1,000 mg osm-tab	$0 (1)	generic of Fortamet; QL (60 EA per 30 days)
metformin er 500 mg osmotic tb	$0 (1)	generic of Fortamet; QL (120 EA per 30 days)
metformin oral tablet 1,000 mg	$0 (6)	QL (75 EA per 30 days)
metformin oral tablet 500 mg	$0 (6)	QL (150 EA per 30 days)
metformin oral tablet 850 mg	$0 (6)	QL (90 EA per 30 days)
metformin oral tablet extended release 24 hr 500 mg	$0 (6)	generic for Glucophage XR; QL (120 EA per 30 days)

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table. 10/15/2026

Drug Name	Drug Tier	Requirements/Limits
metformin oral tablet extended release 24 hr 750 mg	$0 (6)	generic for Glucophage XR; QL (60 EA per 30 days)
metformin oral tablet extended release 24hr 1,000 mg	$0 (1)	(osmotic) generic of Fortamet; QL (60 EA per 30 days)
metformin oral tablet extended release 24hr 500 mg	$0 (1)	(osmotic) generic of Fortamet; QL (120 EA per 30 days)
MOUNJARO SUBCUTANEOUS PEN INJECTOR 10 MG/0.5 ML, 12.5 MG/0.5 ML, 15 MG/0.5 ML, 2.5 MG/0.5 ML, 5 MG/0.5 ML, 7.5 MG/0.5 ML	$0 (4)	PA; QL (2 ML per 28 days)
nateglinide oral tablet 120 mg	$0 (6)	QL (90 EA per 30 days)
nateglinide oral tablet 60 mg	$0 (6)	QL (180 EA per 30 days)
NOVOLIN 70/30 U-100 INSULIN SUBCUTANEOUS SUSPENSION 100 UNIT/ML (70-30)	$0 (2)	
NOVOLIN 70-30 FLEXPEN U-100 SUBCUTANEOUS INSULIN PEN 100 UNIT/ML (70-30)	$0 (2)	
NOVOLIN N FLEXPEN SUBCUTANEOUS INSULIN PEN 100 UNIT/ML (3 ML)	$0 (2)	
NOVOLIN N NPH U-100 INSULIN SUBCUTANEOUS SUSPENSION 100 UNIT/ML	$0 (2)	
NOVOLIN R FLEXPEN SUBCUTANEOUS INSULIN PEN 100 UNIT/ML (3 ML)	$0 (2)	
NOVOLIN R REGULAR U100 INSULIN INJECTION SOLUTION 100 UNIT/ML	$0 (2)	

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table. 10/15/2026

Drug Name	Drug Tier	Requirements/Limits
NOVOLOG MIX 70-30 U-100 INSULN SUBCUTANEOUS SOLUTION 100 UNIT/ML (70-30)	$0 (2)	
NOVOLOG MIX 70-30FLEXPEN U-100 SUBCUTANEOUS INSULIN PEN 100 UNIT/ML (70-30)	$0 (2)	
OZEMPIC ORAL TABLET 1.5 MG, 4 MG, 9 MG	$0 (2)	PA; QL (30 EA per 30 days)
OZEMPIC SUBCUTANEOUS PEN INJECTOR 0.25 MG OR 0.5 MG (2 MG/3 ML), 1 MG/DOSE (4 MG/3 ML), 2 MG/DOSE (8 MG/3 ML)	$0 (2)	PA; QL (3 ML per 28 days)
pioglitazone oral tablet 15 mg, 30 mg, 45 mg	$0 (6)	QL (30 EA per 30 days)
pioglitazone-glimepiride oral tablet 30-2 mg, 30-4 mg	$0 (6)	QL (30 EA per 30 days)
pioglitazone-metformin oral tablet 15-500 mg, 15-850 mg	$0 (6)	QL (90 EA per 30 days)
repaglinide oral tablet 0.5 mg	$0 (6)	QL (960 EA per 30 days)
repaglinide oral tablet 1 mg	$0 (6)	QL (480 EA per 30 days)
repaglinide oral tablet 2 mg	$0 (6)	QL (240 EA per 30 days)
saxagliptin oral tablet 2.5 mg, 5 mg	$0 (2)	QL (30 EA per 30 days)
saxagliptin-metformin oral tablet, er multiphase 24 hr 2.5-1,000 mg	$0 (2)	QL (60 EA per 30 days)
saxagliptin-metformin oral tablet, er multiphase 24 hr 5-1,000 mg, 5-500 mg	$0 (2)	QL (30 EA per 30 days)
sitagliptin phos-metformin oral tablet 50-1,000 mg, 50-500 mg	$0 (2)	QL (60 EA per 30 days)
sitagliptin phos-metformin oral tablet, er multiphase 24 hr 100-1,000 mg	$0 (2)	QL (30 EA per 30 days)

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table. 10/15/2026

Drug Name	Drug Tier	Requirements/Limits
sitagliptin phos-metformin oral tablet, er multiphase 24 hr 50-1,000 mg, 50-500 mg	$0 (2)	QL (60 EA per 30 days)
SOLIQUA 100/33 SUBCUTANEOUS INSULIN PEN 100 UNIT-33 MCG/ML	$0 (2)	QL (15 ML per 25 days)
SYNJARDY ORAL TABLET 12.5-1,000 MG, 12.5-500 MG, 5-1,000 MG, 5-500 MG	$0 (2)	QL (60 EA per 30 days)
SYNJARDY XR ORAL TABLET, IR - ER, BIPHASIC 24HR 10-1,000 MG, 25-1,000 MG	$0 (2)	QL (30 EA per 30 days)
SYNJARDY XR ORAL TABLET, IR - ER, BIPHASIC 24HR 12.5-1,000 MG, 5-1,000 MG	$0 (2)	QL (60 EA per 30 days)
TRADJENTA ORAL TABLET 5 MG	$0 (2)	QL (30 EA per 30 days)
TRIJARDY XR ORAL TABLET, IR - ER, BIPHASIC 24HR 10-5-1,000 MG, 25-5-1,000 MG	$0 (2)	QL (30 EA per 30 days)
TRIJARDY XR ORAL TABLET, IR - ER, BIPHASIC 24HR 12.5-2.5-1,000 MG, 5-2.5-1,000 MG	$0 (2)	QL (60 EA per 30 days)
TRULICITY SUBCUTANEOUS PEN INJECTOR 0.75 MG/0.5 ML, 1.5 MG/0.5 ML, 3 MG/0.5 ML, 4.5 MG/0.5 ML	$0 (2)	PA; QL (2 ML per 28 days)
XIGDUO XR ORAL TABLET, IR - ER, BIPHASIC 24HR 2.5-1,000 MG	$0 (2)	QL (60 EA per 30 days)
MISCELLANEOUS HORMONES		
cabergoline oral tablet 0.5 mg	$0 (1)	
calcitonin (salmon) nasal spray,non-aerosol 200 unit/actuation	$0 (1)	
calcitriol oral capsule 0.25 mcg, 0.5 mcg	$0 (1)	
calcitriol oral solution 1 mcg/ml	$0 (1)	
cinacalcet oral tablet 30 mg	$0 (1)	PA; QL (60 EA per 30 days)
cinacalcet oral tablet 60 mg	$0 (3)	PA; QL (60 EA per 30 days)

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table. 10/15/2026

Drug Name	Drug Tier	Requirements/Limits
cinacalcet oral tablet 90 mg	$0 (3)	PA; QL (120 EA per 30 days)
danazol oral capsule 100 mg, 200 mg, 50 mg	$0 (1)	
desmopressin nasal spray,non-aerosol 10 mcg/spray (0.1 ml)	$0 (1)	
desmopressin oral tablet 0.1 mg, 0.2 mg	$0 (1)	
doxercalciferol oral capsule 0.5 mcg, 1 mcg, 2.5 mcg	$0 (1)	
mifepristone oral tablet 300 mg	$0 (5^)	PA
paricalcitol oral capsule 1 mcg, 2 mcg, 4 mcg	$0 (1)	
sapropterin oral powder in packet 100 mg	$0 (5^)	PA
SOMAVERT SUBCUTANEOUS RECON SOLN 10 MG, 15 MG, 20 MG, 25 MG, 30 MG	$0 (5^)	PA
testosterone cypionate intramuscular oil 100 mg/ml, 200 mg/ml, 200 mg/ml (1 ml)	$0 (1)	
testosterone enanthate intramuscular oil 200 mg/ml	$0 (1)	
testosterone transdermal gel in metered-dose pump 12.5 mg/ 1.25 gram (1 %)	$0 (1)	PA; QL (300 GM per 30 days)
testosterone transdermal gel in metered-dose pump 20.25 mg/1.25 gram (1.62 %)	$0 (1)	PA; QL (150 GM per 30 days)
testosterone transdermal gel in packet 1 % (25 mg/2.5gram), 1 % (50 mg/5 gram)	$0 (1)	PA; QL (300 GM per 30 days)
tolvaptan (polycys kidney dis) oral tablet 15 mg, 30 mg	$0 (5^)	PA
tolvaptan oral tablet 15 mg, 30 mg	$0 (5^)	PA

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table. 10/15/2026

Drug Name	Drug Tier	Requirements/Limits
THYROID HORMONES		
levothyroxine 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	$0 (1)	
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	$0 (1)	
liomny oral tablet 25 mcg, 5 mcg, 50 mcg	$0 (1)	
liothyronine oral tablet 25 mcg, 5 mcg, 50 mcg	$0 (1)	
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	$0 (2)	
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	$0 (1)	
GASTROENTEROLOGY		
ANTIDIARRHEALS / ANTISPASMODICS		
dicyclomine oral capsule 10 mg	$0 (3)	PA
dicyclomine oral solution 10 mg/5 ml	$0 (3)	PA
dicyclomine oral tablet 20 mg	$0 (3)	PA
diphenoxylate-atropine oral liquid 2.5-0.025 mg/5 ml	$0 (3)	
diphenoxylate-atropine oral tablet 2.5-0.025 mg	$0 (3)	
glycopyrrolate oral tablet 1 mg, 2 mg	$0 (1)	
loperamide oral capsule 2 mg	$0 (1)	

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table. 10/15/2026

Drug Name	Drug Tier	Requirements/Limits
MISCELLANEOUS GASTROINTESTINAL AGENTS		
alosetron oral tablet 0.5 mg, 1 mg	$0 (3)	PA; QL (60 EA per 30 days)
aprepitant oral capsule 125 mg, 40 mg, 80 mg	$0 (1)	B/D
aprepitant oral capsule,dose pack 125 mg (1)- 80 mg (2)	$0 (1)	B/D
balsalazide oral capsule 750 mg	$0 (1)	
betaine oral powder 1 gram/scoop	$0 (5^)	
budesonide oral capsule,delayed,extend.release 3 mg	$0 (1)	
budesonide oral tablet,delayed and ext.release 9 mg	$0 (5^)	PA; QL (30 EA per 30 days)
compro rectal suppository 25 mg	$0 (1)	
constulose oral solution 10 gram/15 ml	$0 (1)	
CREON ORAL CAPSULE,DELAYED RELEASE(DR/EC) 12,000-38,000 -60,000 UNIT, 24,000-76,000 -120,000 UNIT, 3,000-9,500- 15,000 UNIT, 36,000-114,000-180,000 UNIT, 6,000-19,000 -30,000 UNIT	$0 (2)	
cromolyn oral concentrate 100 mg/5 ml	$0 (1)	
dronabinol oral capsule 10 mg, 2.5 mg, 5 mg	$0 (1)	PA; QL (60 EA per 30 days)
ENTYVIO PEN SUBCUTANEOUS PEN INJECTOR 108 MG/0.68 ML	$0 (5^)	PA; QL (1.36 ML per 28 days)
enulose oral solution 10 gram/15 ml	$0 (1)	
gavilyte-c oral recon soln 240-22.72-6.72 -5.84 gram	$0 (1)	
gavilyte-g oral recon soln 236-22.74-6.74 -5.86 gram	$0 (1)	

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table. 10/15/2026

Drug Name	Drug Tier	Requirements/Limits
gavilyte-n oral recon soln 420 gram	$0 (1)	
generlac oral solution 10 gram/15 ml	$0 (1)	
granisetron hcl oral tablet 1 mg	$0 (1)	B/D
hydrocortisone rectal enema 100 mg/60 ml	$0 (1)	
hydrocortisone topical cream with perineal applicator 2.5 %	$0 (1)	
lactulose oral solution 10 gram/15 ml	$0 (1)	
LINZESS ORAL CAPSULE 145 MCG, 290 MCG, 72 MCG	$0 (2)	QL (30 EA per 30 days)
lubiprostone oral capsule 24 mcg	$0 (2)	QL (60 EA per 30 days)
lubiprostone oral capsule 8 mcg	$0 (2)	QL (120 EA per 30 days)
meclizine oral tablet 12.5 mg, 25 mg	$0 (1)	PA
mesalamine oral capsule (with del rel tablets) 400 mg	$0 (1)	
mesalamine oral capsule,extended release 24hr 0.375 gram	$0 (1)	
mesalamine oral tablet,delayed release (dr/ec) 1.2 gram	$0 (1)	
mesalamine oral tablet,delayed release (dr/ec) 800 mg	$0 (3)	
mesalamine rectal enema 4 gram/60 ml	$0 (1)	
mesalamine rectal suppository 1,000 mg	$0 (1)	
metoclopramide hcl oral solution 5 mg/5 ml	$0 (1)	
metoclopramide hcl oral tablet 10 mg, 5 mg	$0 (1)	
MOVANTIK ORAL TABLET 12.5 MG, 25 MG	$0 (2)	QL (30 EA per 30 days)
nitroglycerin rectal ointment 0.4 % (w/w)	$0 (3)	QL (30 GM per 30 days)
ondansetron hcl oral solution 4 mg/5 ml	$0 (1)	
ondansetron hcl oral tablet 4 mg, 8 mg	$0 (1)	

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table. 10/15/2026

Drug Name	Drug Tier	Requirements/Limits
ondansetron oral tablet,disintegrating 4 mg, 8 mg	$0 (1)	
peg 3350-electrolytes oral recon soln 236-22.74-6.74 -5.86 gram	$0 (1)	
peg-electrolyte soln oral recon soln 420 gram	$0 (1)	
PLENVU ORAL POWDER IN PACKET, SEQUENTIAL 140-9-5.2 GRAM	$0 (3)	
prochlorperazine maleate oral tablet 10 mg, 5 mg	$0 (1)	
prochlorperazine rectal suppository 25 mg	$0 (1)	
procto-med hc topical cream with perineal applicator 2.5 %	$0 (1)	
proctosol hc topical cream with perineal applicator 2.5 %	$0 (1)	
proctozone-hc topical cream with perineal applicator 2.5 %	$0 (1)	
scopolamine base transdermal patch 3 day 1 mg over 3 days	$0 (3)	QL (10 EA per 30 days)
SKYRIZI SUBCUTANEOUS WEARABLE INJECTOR 180 MG/1.2 ML (150 MG/ML)	$0 (5^)	PA; QL (1.2 ML per 56 days)
SKYRIZI SUBCUTANEOUS WEARABLE INJECTOR 360 MG/2.4 ML (150 MG/ML)	$0 (5^)	PA; QL (2.4 ML per 56 days)
sodium,potassium,mag sulfates oral recon soln 17.5-3.13-1.6 gram, 17.5-3.13-1.6 gram 2 pack (480ml)	$0 (1)	
sulfasalazine oral tablet 500 mg	$0 (1)	
sulfasalazine oral tablet,delayed release (dr/ec) 500 mg	$0 (1)	
ursodiol oral capsule 300 mg	$0 (2)	

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table. 10/15/2026

Drug Name	Drug Tier	Requirements/Limits
ursodiol oral tablet 250 mg, 500 mg	$0 (3)	
VELSIPITY ORAL TABLET 2 MG	$0 (3)	PA; QL (30 EA per 30 days)
VOWST ORAL CAPSULE 1 X 10EXP6 TO 3 X 10EXP7 CELL	$0 (5^)	PA; LA
ZENPEP ORAL CAPSULE,DELAYED RELEASE(DR/EC) 10,000-32,000 -42,000 UNIT, 15,000-47,000 -63,000 UNIT, 20,000-63,000- 84,000 UNIT, 25,000-79,000-105,000 UNIT, 3,000-10,000 -14,000-UNIT, 40,000-126,000- 168,000 UNIT, 5,000-17,000- 24,000 UNIT, 60,000-189,600-252,600 UNIT	$0 (2)	
ZYMFENTRA SUBCUTANEOUS PEN INJECTOR KIT 120 MG/ML	$0 (5^)	PA; QL (2 EA per 28 days)
ZYMFENTRA SUBCUTANEOUS SYRINGE KIT 120 MG/ML	$0 (5^)	PA; QL (2 EA per 28 days)
ULCER THERAPY		
bismuth subcit k-metronidz-tcn oral capsule 140-125-125 mg	$0 (3)	QL (120 EA per 180 days)
dexlansoprazole oral capsule,biphase delayed releas 30 mg, 60 mg	$0 (1)	QL (30 EA per 30 days)
esomeprazole magnesium oral capsule,delayed release(dr/ec) 20 mg, 40 mg	$0 (3)	QL (60 EA per 30 days)
famotidine oral suspension for reconstitution 40 mg/5 ml (8 mg/ml)	$0 (1)	
famotidine oral tablet 20 mg, 40 mg	$0 (1)	
lansoprazole oral capsule,delayed release(dr/ec) 15 mg, 30 mg	$0 (1)	QL (60 EA per 30 days)
misoprostol oral tablet 100 mcg, 200 mcg	$0 (1)	

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table. 10/15/2026

Drug Name	Drug Tier	Requirements/Limits
omeprazole oral capsule,delayed release(dr/ec) 10 mg, 20 mg, 40 mg	$0 (1)	QL (60 EA per 30 days)
pantoprazole oral tablet,delayed release (dr/ec) 20 mg, 40 mg	$0 (1)	QL (60 EA per 30 days)
rabeprazole oral tablet,delayed release (dr/ec) 20 mg	$0 (1)	QL (60 EA per 30 days)
sucralfate oral suspension 100 mg/ml	$0 (3)	
sucralfate oral tablet 1 gram	$0 (1)	
VOQUEZNA DUAL PAK ORAL COMBO PACK 20 MG (28)- 500 MG (84)	$0 (3)	QL (112 EA per 180 days)
VOQUEZNA TRIPLE PAK ORAL COMBO PACK 20-500-500 MG	$0 (3)	QL (112 EA per 180 days)
IMMUNOLOGY, VACCINES / BIOTECHNOLOGY		
BIOTECHNOLOGY DRUGS		
ACTIMMUNE SUBCUTANEOUS SOLUTION 100 MCG/0.5 ML	$0 (5^)	PA
ARCALYST SUBCUTANEOUS RECON SOLN 220 MG	$0 (5^)	PA
BESREMI PEN SUBCUTANEOUS PEN INJECTOR 500 MCG/0.5 ML	$0 (5^)	PA-NS; LA
BESREMI SUBCUTANEOUS SYRINGE 500 MCG/ML	$0 (5^)	PA-NS; LA
BETASERON SUBCUTANEOUS KIT 0.3 MG	$0 (5^)	PA; QL (14 EA per 28 days)
FULPHILA SUBCUTANEOUS SYRINGE 6 MG/0.6 ML	$0 (5^)	PA
LEUKINE INJECTION RECON SOLN 250 MCG	$0 (5^)	PA
NIVESTYM INJECTION SOLUTION 300 MCG/ML, 480 MCG/1.6 ML	$0 (5^)	PA

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table. 10/15/2026

Drug Name	Drug Tier	Requirements/Limits
NIVESTYM SUBCUTANEOUS SYRINGE 300 MCG/0.5 ML, 480 MCG/0.8 ML	$0 (5^)	PA
OMNITROPE SUBCUTANEOUS CARTRIDGE 10 MG/1.5 ML (6.7 MG/ML), 5 MG/1.5 ML (3.3 MG/ML)	$0 (5^)	PA
OMNITROPE SUBCUTANEOUS RECON SOLN 5.8 MG	$0 (5^)	PA
PEGASYS SUBCUTANEOUS SOLUTION 180 MCG/ML	$0 (5^)	QL (4 ML per 28 days)
PEGASYS SUBCUTANEOUS SYRINGE 180 MCG/0.5 ML	$0 (5^)	QL (2 ML per 28 days)
RETACRIT INJECTION SOLUTION 10,000 UNIT/ML, 2,000 UNIT/ML, 20,000 UNIT/2 ML, 20,000 UNIT/ML, 3,000 UNIT/ML, 4,000 UNIT/ML	$0 (2)	PA
RETACRIT INJECTION SOLUTION 40,000 UNIT/ML	$0 (5^)	PA
VACCINES / MISCELLANEOUS IMMUNOLOGICALS		
ABRYSVO (PF) INTRAMUSCULAR RECON SOLN 120 MCG/0.5 ML	$0 (4)	NM; IRA $0 for age 19 and older
ACTHIB (PF) INTRAMUSCULAR RECON SOLN 10 MCG/0.5 ML	$0 (4)	NM
ADACEL(TDAP ADOLESN/ADULT)(PF) INTRAMUSCULAR SUSPENSION 2 LF-(2.5-5-3-5 MCG)-5LF/0.5 ML	$0 (4)	NM
ADACEL(TDAP ADOLESN/ADULT)(PF) INTRAMUSCULAR SYRINGE 2 LF-(2.5-5-3-5 MCG)-5LF/0.5 ML	$0 (4)	NM

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table. 10/15/2026

Drug Name	Drug Tier	Requirements/Limits
AREXVY (PF) INTRAMUSCULAR SUSPENSION FOR RECONSTITUTION 120 MCG/0.5 ML	$0 (4)	NM; IRA $0 for age 50 and older only
BCG VACCINE, LIVE (PF) PERCUTANEOUS SUSPENSION FOR RECONSTITUTION 50 MG	$0 (4)	NM
BEXSERO INTRAMUSCULAR SYRINGE 50-50-50-25 MCG/0.5 ML	$0 (4)	NM
BOOSTRIX TDAP INTRAMUSCULAR SUSPENSION 2.5-8-5 LF-MCG-LF/0.5ML	$0 (4)	NM
BOOSTRIX TDAP INTRAMUSCULAR SYRINGE 2.5-8-5 LF-MCG-LF/0.5ML	$0 (4)	NM
DAPTACEL (DTAP PEDIATRIC) (PF) INTRAMUSCULAR SUSPENSION 15-10-5 LF-MCG-LF/0.5ML	$0 (4)	NM
ENGERIX-B (PF) INTRAMUSCULAR SUSPENSION 20 MCG/ML	$0 (4)	B/D; NM
ENGERIX-B (PF) INTRAMUSCULAR SYRINGE 20 MCG/ML	$0 (4)	B/D; NM
ENGERIX-B PEDIATRIC (PF) INTRAMUSCULAR SYRINGE 10 MCG/0.5 ML	$0 (4)	B/D; NM
GAMUNEX-C INJECTION SOLUTION 1 GRAM/10 ML (10 %)	$0 (5^)	PA; NM
GARDASIL 9 (PF) INTRAMUSCULAR SUSPENSION 0.5 ML	$0 (4)	NM; IRA $0 up to age 45
GARDASIL 9 (PF) INTRAMUSCULAR SYRINGE 0.5 ML	$0 (4)	NM; IRA $0 up to age 45
HAVRIX (PF) INTRAMUSCULAR SYRINGE 1,440 ELISA UNIT/ML, 720 ELISA UNIT/0.5 ML	$0 (4)	NM

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table. 10/15/2026

Drug Name	Drug Tier	Requirements/Limits
HEPLISAV-B (PF) INTRAMUSCULAR SYRINGE 20 MCG/0.5 ML	$0 (4)	B/D; NM
HIBERIX (PF) INTRAMUSCULAR RECON SOLN 10 MCG/0.5 ML	$0 (4)	NM
IMOVAX RABIES VACCINE (PF) INTRAMUSCULAR RECON SOLN 2.5 UNIT	$0 (4)	B/D; NM
INFANRIX (DTAP) (PF) INTRAMUSCULAR SYRINGE 25-58-10 LF-MCG-LF/0.5ML	$0 (4)	NM
IPOL INJECTION SUSPENSION 40-8-32 UNIT/0.5 ML	$0 (4)	NM
IXIARO (PF) INTRAMUSCULAR SYRINGE 6 MCG/0.5 ML	$0 (4)	NM
JYNNEOS (PF) SUBCUTANEOUS SUSPENSION 0.5X TO 3.95X 10EXP8 UNIT/0.5	$0 (4)	B/D; NM
KINRIX (PF) INTRAMUSCULAR SYRINGE 25 LF-58 MCG-10 LF/0.5 ML	$0 (4)	NM
MENQUADFI (PF) INTRAMUSCULAR SOLUTION 10 MCG/0.5 ML	$0 (4)	NM
MENVEO A-C-Y-W-135-DIP (PF) INTRAMUSCULAR KIT 10-5 MCG/0.5 ML	$0 (4)	NM
M-M-R II (PF) SUBCUTANEOUS RECON SOLN 1,000-12,500 TCID50/0.5 ML	$0 (4)	NM
MRESVIA (PF) INTRAMUSCULAR SYRINGE 50 MCG/0.5 ML	$0 (4)	NM; IRA $0 for age 50 and older only
PEDIARIX (PF) INTRAMUSCULAR SYRINGE 10 MCG-25LF-25 MCG-10LF/0.5 ML	$0 (4)	NM
PEDVAX HIB (PF) INTRAMUSCULAR SOLUTION 7.5 MCG/0.5 ML	$0 (4)	NM

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table. 10/15/2026

Drug Name	Drug Tier	Requirements/Limits
PENBRAYA (PF) INTRAMUSCULAR KIT 5-120 MCG/0.5 ML	$0 (4)	NM
PENMENVY MEN A-B-C-W-Y (PF) INTRAMUSCULAR KIT 0.5 ML	$0 (4)	NM
PENTACEL (PF) INTRAMUSCULAR KIT 15LF-20MCG-5LF- 62 DU/0.5 ML	$0 (4)	NM
PRIORIX (PF) SUBCUTANEOUS SUSPENSION FOR RECONSTITUTION 10EXP3.4-4.2-3.3CCID50/0.5ML	$0 (4)	NM
PROQUAD (PF) SUBCUTANEOUS SUSPENSION FOR RECONSTITUTION 10EXP3-4.3-3- 3.99 TCID50/0.5	$0 (4)	NM
QUADRACEL (PF) INTRAMUSCULAR SUSPENSION 15 LF-48 MCG- 5 LF UNIT/0.5ML	$0 (4)	NM
QUADRACEL (PF) INTRAMUSCULAR SYRINGE 15 LF-48 MCG- 5 LF UNIT/0.5ML	$0 (4)	NM
RABAVERT (PF) INTRAMUSCULAR SUSPENSION FOR RECONSTITUTION 2.5 UNIT	$0 (4)	B/D; NM
RECOMBIVAX HB (PF) INTRAMUSCULAR SUSPENSION 10 MCG/ML, 40 MCG/ML, 5 MCG/0.5 ML	$0 (4)	B/D; NM
RECOMBIVAX HB (PF) INTRAMUSCULAR SYRINGE 10 MCG/ML, 5 MCG/0.5 ML	$0 (4)	B/D; NM
ROTARIX ORAL SUSPENSION 10EXP6 CCID50 /1.5 ML	$0 (6)	NM
ROTATEQ VACCINE ORAL SOLUTION 2 ML	$0 (6)	NM

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table. 10/15/2026

Drug Name	Drug Tier	Requirements/Limits
SHINGRIX (PF) INTRAMUSCULAR SUSPENSION FOR RECONSTITUTION 50 MCG/0.5 ML	$0 (4)	NM; A third dose may be considered in post-transplant members (PA required).; QL (2 EA per 720 days)
SHINGRIX (PF) INTRAMUSCULAR SYRINGE 50 MCG/0.5 ML	$0 (4)	NM; A third dose may be considered in post-transplant members (PA required).; QL (1 ML per 720 days)
TENIVAC (PF) INTRAMUSCULAR SUSPENSION 5 LF UNIT- 2 LF UNIT/0.5ML	$0 (4)	NM
TENIVAC (PF) INTRAMUSCULAR SYRINGE 5-2 LF UNIT/0.5 ML	$0 (4)	NM
TICOVAC INTRAMUSCULAR SYRINGE 1.2 MCG/0.25 ML, 2.4 MCG/0.5 ML	$0 (4)	NM
TRUMENBA INTRAMUSCULAR SYRINGE 120 MCG/0.5 ML	$0 (4)	NM
TWINRIX (PF) INTRAMUSCULAR SYRINGE 720 ELISA UNIT- 20 MCG/ML	$0 (4)	NM
TYPHIM VI INTRAMUSCULAR SYRINGE 25 MCG/0.5 ML	$0 (4)	NM
VAQTA (PF) INTRAMUSCULAR SUSPENSION 25 UNIT/0.5 ML, 50 UNIT/ML	$0 (4)	NM
VAQTA (PF) INTRAMUSCULAR SYRINGE 25 UNIT/0.5 ML, 50 UNIT/ML	$0 (4)	NM
VARIVAX (PF) SUBCUTANEOUS SUSPENSION FOR RECONSTITUTION 1,350 UNIT/0.5 ML	$0 (4)	NM
VAXCHORA VACCINE ORAL SUSPENSION FOR RECONSTITUTION 4X10EXP8 TO 2X 10EXP9 CF UNIT	$0 (6)	NM

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table. 10/15/2026

Drug Name	Drug Tier	Requirements/Limits
VIMKUNYA (PF) INTRAMUSCULAR SYRINGE 40 MCG/0.8 ML	$0 (4)	NM
VIVOTIF ORAL CAPSULE,DELAYED RELEASE(DR/EC) 2 BILLION UNIT	$0 (6)	NM
YF-VAX (PF) SUBCUTANEOUS SUSPENSION FOR RECONSTITUTION 10 EXP4.74 UNIT/0.5 ML	$0 (4)	NM
MISCELLANEOUS SUPPLIES		
MISCELLANEOUS SUPPLIES		
ASSURE ID INSULIN SAFETY SYRINGE 1 ML 29 GAUGE X 1/2"	$0 (1)	
GAUZE PAD TOPICAL BANDAGE 2 X 2 "	$0 (2)	
INSULIN SYRINGE-NEEDLE U-100 SYRINGE 0.3 ML 29 GAUGE, 1 ML 29 GAUGE X 1/2", 1/2 ML 28 GAUGE	$0 (1)	BD or Embecta preferred
PEN NEEDLE, DIABETIC NEEDLE 29 GAUGE X 1/2"	$0 (1)	BD or Embecta preferred
MUSCULOSKELETAL / RHEUMATOLOGY		
GOUT THERAPY		
allopurinol oral tablet 100 mg, 300 mg	$0 (1)	
colchicine oral capsule 0.6 mg	$0 (3)	QL (120 EA per 30 days)
colchicine oral tablet 0.6 mg	$0 (3)	QL (120 EA per 30 days)
febuxostat oral tablet 40 mg, 80 mg	$0 (1)	
probenecid oral tablet 500 mg	$0 (1)	
probenecid-colchicine oral tablet 500-0.5 mg	$0 (1)	
OSTEOPOROSIS THERAPY		
alendronate oral solution 70 mg/75 ml	$0 (1)	QL (300 ML per 28 days)
alendronate oral tablet 10 mg	$0 (1)	QL (30 EA per 30 days)

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table. 10/15/2026

Drug Name	Drug Tier	Requirements/Limits
alendronate oral tablet 35 mg, 70 mg	$0 (1)	QL (4 EA per 28 days)
BONSITY SUBCUTANEOUS PEN INJECTOR 20 MCG/DOSE (560MCG/2.24ML)	$0 (5^)	PA; QL (2.24 ML per 28 days)
CONEXXENCE SUBCUTANEOUS SYRINGE 60 MG/ML	$0 (3)	QL (1 ML per 180 days)
ibandronate oral tablet 150 mg	$0 (1)	QL (1 EA per 30 days)
raloxifene oral tablet 60 mg	$0 (1)	
risedronate oral tablet 150 mg	$0 (1)	QL (1 EA per 30 days)
risedronate oral tablet 35 mg, 35 mg (12 pack), 35 mg (4 pack)	$0 (1)	QL (4 EA per 28 days)
risedronate oral tablet 5 mg	$0 (1)	QL (30 EA per 30 days)
risedronate oral tablet,delayed release (dr/ec) 35 mg	$0 (1)	QL (4 EA per 28 days)
STOBOCLO SUBCUTANEOUS SYRINGE 60 MG/ML	$0 (3)	QL (1 ML per 180 days)
teriparatide subcutaneous pen injector 20 mcg/dose (560mcg/2.24ml)	$0 (5^)	PA; Only Teriparatide NDC 47781065289 is covered; QL (2.24 ML per 28 days)
OTHER RHEUMATOLOGICALS		
ADALIMUMAB-AATY SUBCUTANEOUS AUTO-INJECTOR, KIT 40 MG/0.4 ML	$0 (5^)	PA; QL (4 EA per 28 days)
ADALIMUMAB-AATY SUBCUTANEOUS AUTO-INJECTOR, KIT 80 MG/0.8 ML	$0 (5^)	PA; QL (2 EA per 28 days)
ADALIMUMAB-AATY SUBCUTANEOUS SYRINGE KIT 20 MG/0.2 ML	$0 (5^)	PA; QL (2 EA per 28 days)
ADALIMUMAB-AATY SUBCUTANEOUS SYRINGE KIT 40 MG/0.4 ML	$0 (5^)	PA; QL (4 EA per 28 days)

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table. 10/15/2026

Drug Name	Drug Tier	Requirements/Limits
ADALIMUMAB-AATY(CF) AI CROHNS SUBCUTANEOUS AUTO-INJECTOR, KIT 80 MG/0.8 ML	$0 (5^)	PA; QL (3 EA per 180 days)
ADALIMUMAB-ADBM SUBCUTANEOUS PEN INJECTOR KIT 40 MG/0.4 ML, 40 MG/0.8 ML	$0 (5^)	PA; QL (4 EA per 28 days)
ADALIMUMAB-ADBM SUBCUTANEOUS SYRINGE KIT 40 MG/0.4 ML, 40 MG/0.8 ML	$0 (5^)	PA; QL (4 EA per 28 days)
AVTOZMA AUTOINJECTOR SUBCUTANEOUS PEN INJECTOR 162 MG/0.9 ML	$0 (5^)	PA; QL (3.6 ML per 28 days)
AVTOZMA SUBCUTANEOUS SYRINGE 162 MG/0.9 ML	$0 (5^)	PA; QL (3.6 ML per 28 days)
BENLYSTA SUBCUTANEOUS AUTO-INJECTOR 200 MG/ML	$0 (5^)	PA; QL (8 ML per 28 days)
BENLYSTA SUBCUTANEOUS SYRINGE 200 MG/ML	$0 (5^)	PA; QL (8 ML per 28 days)
ENBREL MINI SUBCUTANEOUS CARTRIDGE 50 MG/ML (1 ML)	$0 (5^)	PA; QL (8 ML per 28 days)
ENBREL SUBCUTANEOUS SOLUTION 25 MG/0.5 ML	$0 (5^)	PA; QL (8 ML per 28 days)
ENBREL SUBCUTANEOUS SYRINGE 25 MG/0.5 ML (0.5), 50 MG/ML (1 ML)	$0 (5^)	PA; QL (8 ML per 28 days)
ENBREL SURECLICK SUBCUTANEOUS PEN INJECTOR 50 MG/ML (1 ML)	$0 (5^)	PA; QL (8 ML per 28 days)
leflunomide oral tablet 10 mg, 20 mg	$0 (1)	QL (30 EA per 30 days)
milnacipran oral tablet 100 mg, 12.5 mg, 25 mg, 50 mg	$0 (2)	QL (60 EA per 30 days)
OTEZLA ORAL TABLET 20 MG, 30 MG	$0 (5^)	PA; QL (60 EA per 30 days)

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table. 10/15/2026

Drug Name	Drug Tier	Requirements/Limits
OTEZLA STARTER ORAL TABLETS,DOSE PACK 10 MG (4)- 20 MG (51), 10 MG (4)-20 MG (4)-30 MG (47)	$0 (5^)	PA; QL (55 EA per 180 days)
OTEZLA XR INITIATION ORAL TABLET AND TABLET ER DOSE PACK 10-20-30-75 MG	$0 (5^)	PA; QL (41 EA per 180 days)
OTEZLA XR ORAL TABLET EXTENDED RELEASE 24 HR 75 MG	$0 (5^)	PA; QL (30 EA per 30 days)
penicillamine oral tablet 250 mg	$0 (5^)	PA
RINVOQ LQ ORAL SOLUTION 1 MG/ML	$0 (5^)	PA; QL (360 ML per 30 days)
RINVOQ ORAL TABLET EXTENDED RELEASE 24 HR 15 MG, 30 MG	$0 (5^)	PA; QL (30 EA per 30 days)
RINVOQ ORAL TABLET EXTENDED RELEASE 24 HR 45 MG	$0 (5^)	PA; QL (84 EA per 180 days)
tofacitinib oral solution 1 mg/ml	$0 (5^)	PA; QL (480 ML per 30 days)
tofacitinib oral tablet 10 mg, 5 mg	$0 (5^)	PA; QL (60 EA per 30 days)
tofacitinib oral tablet extended release 24 hr 11 mg, 22 mg	$0 (5^)	PA; QL (30 EA per 30 days)
TYENNE AUTOINJECTOR SUBCUTANEOUS PEN INJECTOR 162 MG/0.9 ML	$0 (5^)	PA; QL (3.6 ML per 28 days)
TYENNE SUBCUTANEOUS SYRINGE 162 MG/0.9 ML	$0 (5^)	PA; QL (3.6 ML per 28 days)
OBSTETRICS / GYNECOLOGY		
ESTROGENS / PROGESTINS		
abigale lo oral tablet 0.5-0.1 mg	$0 (3)	
abigale oral tablet 1-0.5 mg	$0 (3)	
camila oral tablet 0.35 mg	$0 (1)	
deblitane oral tablet 0.35 mg	$0 (1)	

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table. 10/15/2026

Drug Name	Drug Tier	Requirements/Limits
DEPO-SUBQ PROVERA 104 SUBCUTANEOUS SYRINGE 104 MG/0.65 ML	$0 (2)	
dotti transdermal patch semiweekly 0.025 mg/24 hr, 0.0375 mg/24 hr, 0.05 mg/24 hr, 0.075 mg/24 hr, 0.1 mg/24 hr	$0 (3)	QL (8 EA per 28 days)
errin oral tablet 0.35 mg	$0 (1)	
estradiol oral tablet 0.5 mg, 1 mg, 2 mg	$0 (1)	
estradiol transdermal patch semiweekly 0.025 mg/24 hr, 0.0375 mg/24 hr, 0.05 mg/24 hr, 0.075 mg/24 hr, 0.1 mg/24 hr	$0 (3)	QL (8 EA per 28 days)
estradiol transdermal patch weekly 0.025 mg/24 hr, 0.0375 mg/24 hr, 0.05 mg/24 hr, 0.06 mg/24 hr, 0.075 mg/24 hr, 0.1 mg/24 hr	$0 (3)	QL (4 EA per 28 days)
estradiol vaginal cream 0.01 % (0.1 mg/gram)	$0 (3)	
estradiol vaginal tablet 10 mcg	$0 (1)	
estradiol valerate intramuscular oil 10 mg/ml, 20 mg/ml, 40 mg/ml	$0 (1)	
estradiol-norethindrone acet oral tablet 0.5-0.1 mg, 1-0.5 mg	$0 (3)	
fyavolv oral tablet 0.5-2.5 mg-mcg, 1-5 mg-mcg	$0 (3)	
gallifrey oral tablet 5 mg	$0 (1)	
heather oral tablet 0.35 mg	$0 (1)	
incassia oral tablet 0.35 mg	$0 (1)	
jinteli oral tablet 1-5 mg-mcg	$0 (3)	
lyleq oral tablet 0.35 mg	$0 (1)	

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table. 10/15/2026

Drug Name	Drug Tier	Requirements/Limits
lyllana transdermal patch semiweekly 0.025 mg/24 hr, 0.0375 mg/24 hr, 0.05 mg/24 hr, 0.075 mg/24 hr, 0.1 mg/24 hr	$0 (3)	QL (8 EA per 28 days)
lyza oral tablet 0.35 mg	$0 (1)	
medroxyprogesterone intramuscular suspension 150 mg/ml	$0 (1)	
medroxyprogesterone intramuscular syringe 150 mg/ml	$0 (1)	
medroxyprogesterone oral tablet 10 mg, 2.5 mg, 5 mg	$0 (1)	
meleya oral tablet 0.35 mg	$0 (1)	
mimvey oral tablet 1-0.5 mg	$0 (3)	
nora-be oral tablet 0.35 mg	$0 (1)	
norethindrone (contraceptive) oral tablet 0.35 mg	$0 (1)	
norethindrone acetate oral tablet 5 mg	$0 (1)	
norethindrone ac-eth estradiol oral tablet 0.5-2.5 mg-mcg, 1-5 mg-mcg	$0 (3)	
orquidea oral tablet 0.35 mg	$0 (1)	
PREMARIN VAGINAL CREAM 0.625 MG/GRAM	$0 (2)	
progesterone micronized oral capsule 100 mg, 200 mg	$0 (1)	
sharobel oral tablet 0.35 mg	$0 (1)	
yuvafem vaginal tablet 10 mcg	$0 (1)	
MISCELLANEOUS OB/GYN		
clindamycin phosphate vaginal cream 2 %	$0 (3)	
eluryng vaginal ring 0.12-0.015 mg/24 hr	$0 (1)	

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table. 10/15/2026

Drug Name	Drug Tier	Requirements/Limits
enilloring vaginal ring 0.12-0.015 mg/24 hr	$0 (1)	
etonogestrel-ethinyl estradiol vaginal ring 0.12-0.015 mg/24 hr	$0 (1)	
LILETTA INTRAUTERINE INTRAUTERINE DEVICE 20.4 MCG/24 HR (8 YRS) 52 MG	$0 (2)	
metronidazole vaginal gel 0.75 % (37.5mg/5 gram)	$0 (1)	
NEXPLANON SUBDERMAL IMPLANT 68 MG	$0 (2)	
norelgestromin-ethin.estradiol transdermal patch weekly 150-35 mcg/24 hr	$0 (1)	
terconazole vaginal cream 0.4 %, 0.8 %	$0 (1)	
terconazole vaginal suppository 80 mg	$0 (3)	
tranexamic acid oral tablet 650 mg	$0 (1)	
xulane transdermal patch weekly 150-35 mcg/24 hr	$0 (1)	
zafemy transdermal patch weekly 150-35 mcg/24 hr	$0 (1)	
ORAL CONTRACEPTIVES / RELATED AGENTS		
altavera (28) oral tablet 0.15-0.03 mg	$0 (1)	
alyacen 1/35 (28) oral tablet 1-35 mg-mcg	$0 (1)	
apri oral tablet 0.15-0.03 mg	$0 (1)	
aranelle (28) oral tablet 0.5/1/0.5-35 mg-mcg	$0 (1)	
ashlyna oral tablets,dose pack,3 month 0.15 mg-30 mcg (84)/10 mcg (7)	$0 (1)	
aubra eq oral tablet 0.1-20 mg-mcg	$0 (1)	
aviane oral tablet 0.1-20 mg-mcg	$0 (1)	

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table. 10/15/2026

Drug Name	Drug Tier	Requirements/Limits
azurette (28) oral tablet 0.15-0.02 mgx21 /0.01 mg x 5	$0 (1)	
balziva (28) oral tablet 0.4-35 mg-mcg	$0 (1)	
blisovi 24 fe oral tablet 1 mg-20 mcg (24)/75 mg (4)	$0 (1)	
blisovi fe 1.5/30 (28) oral tablet 1.5 mg-30 mcg (21)/75 mg (7)	$0 (1)	
briellyn oral tablet 0.4-35 mg-mcg	$0 (1)	
camrese lo oral tablets,dose pack,3 month 0.1 mg-20 mcg (84)/10 mcg (7)	$0 (1)	
cryselle (28) oral tablet 0.3-30 mg-mcg	$0 (1)	
cyred eq oral tablet 0.15-0.03 mg	$0 (1)	
dolishale oral tablet 90-20 mcg (28)	$0 (1)	
drospirenone-e.estradiol-lm.fa oral tablet 3-0.02-0.451 mg (24) (4)	$0 (1)	
drospirenone-ethinyl estradiol oral tablet 3-0.02 mg, 3-0.03 mg	$0 (1)	
enskyce oral tablet 0.15-0.03 mg	$0 (1)	
estarylla oral tablet 0.25-0.035 mg	$0 (1)	
falmina (28) oral tablet 0.1-20 mg-mcg	$0 (1)	
feirza oral tablet 1 mg-20 mcg (21)/75 mg (7), 1.5 mg-30 mcg (21)/75 mg (7)	$0 (1)	
finzala oral tablet,chewable 1 mg-20 mcg(24) /75 mg (4)	$0 (1)	
galbriela oral tablet,chewable 0.8mg-25mcg(24) and 75 mg (4)	$0 (1)	
hailey 24 fe oral tablet 1 mg-20 mcg (24)/75 mg (4)	$0 (1)	

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table. 10/15/2026

Drug Name	Drug Tier	Requirements/Limits
hailey fe 1/20 (28) oral tablet 1 mg-20 mcg (21)/75 mg (7)	$0 (1)	
iclevia oral tablets,dose pack,3 month 0.15 mg-30 mcg (91)	$0 (1)	
introvale oral tablets,dose pack,3 month 0.15 mg-30 mcg (91)	$0 (1)	
isibloom oral tablet 0.15-0.03 mg	$0 (1)	
jaimiess oral tablets,dose pack,3 month 0.15 mg-30 mcg (84)/10 mcg (7)	$0 (1)	
jasmiel (28) oral tablet 3-0.02 mg	$0 (1)	
juleber oral tablet 0.15-0.03 mg	$0 (1)	
junel 1.5/30 (21) oral tablet 1.5-30 mg-mcg	$0 (1)	
junel 1/20 (21) oral tablet 1-20 mg-mcg	$0 (1)	
junel fe 1.5/30 (28) oral tablet 1.5 mg-30 mcg (21)/75 mg (7)	$0 (1)	
junel fe 1/20 (28) oral tablet 1 mg-20 mcg (21)/75 mg (7)	$0 (1)	
junel fe 24 oral tablet 1 mg-20 mcg (24)/75 mg (4)	$0 (1)	
kaitlib fe oral tablet,chewable 0.8mg-25mcg(24) and 75 mg (4)	$0 (1)	
kariva (28) oral tablet 0.15-0.02 mgx21 /0.01 mg x 5	$0 (1)	
kelnor 1/35 (28) oral tablet 1-35 mg-mcg	$0 (1)	
kurvelo (28) oral tablet 0.15-0.03 mg	$0 (1)	
l norgest/e.estradiol-e.estrad oral tablets,dose pack,3 month 0.1 mg-20 mcg (84)/10 mcg (7)	$0 (1)	

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table. 10/15/2026

Drug Name	Drug Tier	Requirements/Limits
larin 1.5/30 (21) oral tablet 1.5-30 mg-mcg	$0 (1)	
larin 1/20 (21) oral tablet 1-20 mg-mcg	$0 (1)	
larin fe 1.5/30 (28) oral tablet 1.5 mg-30 mcg (21)/75 mg (7)	$0 (1)	
larin fe 1/20 (28) oral tablet 1 mg-20 mcg (21)/75 mg (7)	$0 (1)	
lessina oral tablet 0.1-20 mg-mcg	$0 (1)	
levonest (28) oral tablet 50-30 (6)/75-40 (5)/125-30(10)	$0 (1)	
levonorgestrel-ethinyl estrad oral tablet 0.1-20 mg-mcg, 90-20 mcg (28)	$0 (1)	
levonorgestrel-ethinyl estrad oral tablets,dose pack,3 month 0.15 mg-30 mcg (91)	$0 (1)	
levonorg-eth estrad triphasic oral tablet 50-30 (6)/75-40 (5)/125-30(10)	$0 (1)	
lojaimiess oral tablets,dose pack,3 month 0.1 mg-20 mcg (84)/10 mcg (7)	$0 (1)	
loryna (28) oral tablet 3-0.02 mg	$0 (1)	
luizza oral tablet 1-20 mg-mcg, 1.5-30 mg-mcg	$0 (1)	
marlissa (28) oral tablet 0.15-0.03 mg	$0 (1)	
mibelas 24 fe oral tablet,chewable 1 mg-20 mcg(24) /75 mg (4)	$0 (1)	
microgestin 1.5/30 (21) oral tablet 1.5-30 mg-mcg	$0 (1)	
microgestin 1/20 (21) oral tablet 1-20 mg-mcg	$0 (1)	

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table. 10/15/2026

Drug Name	Drug Tier	Requirements/Limits
microgestin fe 1.5/30 (28) oral tablet 1.5 mg-30 mcg (21)/75 mg (7)	$0 (1)	
microgestin fe 1/20 (28) oral tablet 1 mg-20 mcg (21)/75 mg (7)	$0 (1)	
mili oral tablet 0.25-0.035 mg	$0 (1)	
necon 0.5/35 (28) oral tablet 0.5-35 mg-mcg	$0 (1)	
nikki (28) oral tablet 3-0.02 mg	$0 (1)	
norethindrone ac-eth estradiol oral tablet 1-20 mg-mcg	$0 (1)	
norethindrone-e.estradiol-iron oral tablet,chewable 1 mg-20 mcg(24) /75 mg (4)	$0 (1)	
norgestimate-ethinyl estradiol oral tablet 0.18/0.215/0.25 mg-0.025 mg, 0.18/0.215/0.25 mg-0.035mg (28), 0.25-0.035 mg	$0 (1)	
nortrel 0.5/35 (28) oral tablet 0.5-35 mg-mcg	$0 (1)	
nortrel 1/35 (21) oral tablet 1-35 mg-mcg (21)	$0 (1)	
nortrel 1/35 (28) oral tablet 1-35 mg-mcg	$0 (1)	
nortrel 7/7/7 (28) oral tablet 0.5/0.75/1 mg-35 mcg	$0 (1)	
nylia 1/35 (28) oral tablet 1-35 mg-mcg	$0 (1)	
nylia 7/7/7 (28) oral tablet 0.5/0.75/1 mg-35 mcg	$0 (1)	
pimtrea (28) oral tablet 0.15-0.02 mgx21 /0.01 mg x 5	$0 (1)	
portia 28 oral tablet 0.15-0.03 mg	$0 (1)	
reclipsen (28) oral tablet 0.15-0.03 mg	$0 (1)	

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table. 10/15/2026

Drug Name	Drug Tier	Requirements/Limits
rivelsa oral tablets,dose pack,3 month 0.15 mg-20 mcg/ 0.15 mg-25 mcg	$0 (1)	
rosyrah oral tablets,dose pack,3 month 0.15 mg-20 mcg/ 0.15 mg-25 mcg	$0 (1)	
setlakin oral tablets,dose pack,3 month 0.15 mg-30 mcg (91)	$0 (1)	
sprintec (28) oral tablet 0.25-0.035 mg	$0 (1)	
syeda oral tablet 3-0.03 mg	$0 (1)	
tarina 24 fe oral tablet 1 mg-20 mcg (24)/75 mg (4)	$0 (1)	
tarina fe 1-20 eq (28) oral tablet 1 mg-20 mcg (21)/75 mg (7)	$0 (1)	
tilia fe oral tablet 1-20(5)/1-30(7) /1mg-35mcg (9)	$0 (1)	
tri-estarylla oral tablet 0.18/0.215/0.25 mg-0.035mg (28)	$0 (1)	
tri-legest fe oral tablet 1-20(5)/1-30(7) /1mg-35mcg (9)	$0 (1)	
tri-lo-estarylla oral tablet 0.18/0.215/0.25 mg-0.025 mg	$0 (1)	
tri-lo-sprintec oral tablet 0.18/0.215/0.25 mg-0.025 mg	$0 (1)	
tri-mili oral tablet 0.18/0.215/0.25 mg-0.035mg (28)	$0 (1)	
tri-sprintec (28) oral tablet 0.18/0.215/0.25 mg-0.035mg (28)	$0 (1)	
tri-vylibra lo oral tablet 0.18/0.215/0.25 mg-0.025 mg	$0 (1)	

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table. 10/15/2026

Drug Name	Drug Tier	Requirements/Limits
tri-vylibra oral tablet 0.18/0.215/0.25 mg-0.035mg (28)	$0 (1)	
turqoz (28) oral tablet 0.3-30 mg-mcg	$0 (1)	
valtya oral tablet 1-35 mg-mcg, 1-50 mg-mcg	$0 (1)	
velivet triphasic regimen (28) oral tablet 0.1/.125/.15-25 mg-mcg	$0 (1)	
vestura (28) oral tablet 3-0.02 mg	$0 (1)	
vienva oral tablet 0.1-20 mg-mcg	$0 (1)	
viorele (28) oral tablet 0.15-0.02 mgx21 /0.01 mg x 5	$0 (1)	
vyfemla (28) oral tablet 0.4-35 mg-mcg	$0 (1)	
vylibra oral tablet 0.25-0.035 mg	$0 (1)	
wymzya fe oral tablet,chewable 0.4mg-35mcg(21) and 75 mg (7)	$0 (1)	
xarah fe oral tablet 1-20(5)/1-30(7) /1mg-35mcg (9)	$0 (1)	
xelria fe oral tablet,chewable 0.4mg-35mcg(21) and 75 mg (7)	$0 (1)	
zovia 1-35 (28) oral tablet 1-35 mg-mcg	$0 (1)	
OPHTHALMOLOGY		
ANTIBIOTICS		
bacitracin-polymyxin b ophthalmic (eye) ointment 500-10,000 unit/gram	$0 (1)	
ciprofloxacin hcl ophthalmic (eye) drops 0.3 %	$0 (1)	
erythromycin ophthalmic (eye) ointment 5 mg/gram (0.5 %)	$0 (1)	

Drug Name	Drug Tier	Requirements/Limits
gatifloxacin ophthalmic (eye) drops 0.5 %	$0 (1)	
gentamicin ophthalmic (eye) drops 0.3 %	$0 (1)	
moxifloxacin ophthalmic (eye) drops 0.5 %	$0 (1)	
NATACYN OPHTHALMIC (EYE) DROPS,SUSPENSION 5 %	$0 (3)	
neomycin-bacitracin-polymyxin ophthalmic (eye) ointment 3.5-400-10,000 mg-unit-unit/g	$0 (1)	
neomycin-polymyxin-gramicidin ophthalmic (eye) drops 1.75 mg-10,000 unit-0.025mg/ml	$0 (1)	
ofloxacin ophthalmic (eye) drops 0.3 %	$0 (1)	
polymyxin b sulf-trimethoprim ophthalmic (eye) drops 10,000 unit- 1 mg/ml	$0 (1)	
tobramycin ophthalmic (eye) drops 0.3 %	$0 (1)	
ANTIVIRALS		
trifluridine ophthalmic (eye) drops 1 %	$0 (1)	
ZIRGAN OPHTHALMIC (EYE) GEL 0.15 %	$0 (3)	
BETA-BLOCKERS		
betaxolol ophthalmic (eye) drops 0.5 %	$0 (1)	
carteolol ophthalmic (eye) drops 1 %	$0 (1)	
levobunolol ophthalmic (eye) drops 0.5 %	$0 (1)	
timolol maleate ophthalmic (eye) drops 0.25 %, 0.5 %	$0 (1)	
timolol maleate ophthalmic (eye) gel forming solution 0.25 %, 0.5 %	$0 (1)	
MISCELLANEOUS OPHTHALMOLOGICS		
atropine ophthalmic (eye) drops 1 %	$0 (1)	
azelastine ophthalmic (eye) drops 0.05 %	$0 (1)	

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table. 10/15/2026

Drug Name	Drug Tier	Requirements/Limits
cromolyn ophthalmic (eye) drops 4 %	$0 (1)	
cyclosporine ophthalmic (eye) dropperette 0.05 %	$0 (2)	QL (60 EA per 30 days)
CYSTARAN OPHTHALMIC (EYE) DROPS 0.44 %	$0 (5^)	PA
pilocarpine hcl ophthalmic (eye) drops 1 %, 2 %, 4 %	$0 (1)	
sulfacetamide sodium ophthalmic (eye) drops 10 %	$0 (1)	
sulfacetamide-prednisolone ophthalmic (eye) drops 10 %-0.23 % (0.25 %)	$0 (1)	
XDEMVY OPHTHALMIC (EYE) DROPS 0.25 %	$0 (5^)	PA; QL (10 ML per 42 days)
NON-STEROIDAL ANTI-INFLAMMATORY AGENTS		
bromfenac ophthalmic (eye) drops 0.075 %, 0.09 %	$0 (3)	
diclofenac sodium ophthalmic (eye) drops 0.1 %	$0 (1)	
flurbiprofen sodium ophthalmic (eye) drops 0.03 %	$0 (1)	
ketorolac ophthalmic (eye) drops 0.4 %, 0.5 %	$0 (1)	
PROLENSA OPHTHALMIC (EYE) DROPS 0.07 %	$0 (2)	
ORAL DRUGS FOR GLAUCOMA		
acetazolamide oral capsule, extended release 500 mg	$0 (1)	
acetazolamide oral tablet 125 mg, 250 mg	$0 (1)	
methazolamide oral tablet 25 mg, 50 mg	$0 (1)	

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table. 10/15/2026

Drug Name	Drug Tier	Requirements/Limits
OTHER GLAUCOMA DRUGS		
bimatoprost ophthalmic (eye) drops 0.01 %	$0 (2)	
brinzolamide ophthalmic (eye) drops,suspension 1 %	$0 (1)	
COMBIGAN OPHTHALMIC (EYE) DROPS 0.2-0.5 %	$0 (2)	
dorzolamide ophthalmic (eye) drops 2 %	$0 (1)	
dorzolamide-timolol ophthalmic (eye) drops 22.3-6.8 mg/ml	$0 (1)	
latanoprost ophthalmic (eye) drops 0.005 %	$0 (1)	
RHOPRESSA OPHTHALMIC (EYE) DROPS 0.02 %	$0 (2)	
ROCKLATAN OPHTHALMIC (EYE) DROPS 0.02-0.005 %	$0 (2)	
travoprost ophthalmic (eye) drops 0.004 %	$0 (1)	
VYZULTA OPHTHALMIC (EYE) DROPS 0.024 %	$0 (3)	
STEROID-ANTIBIOTIC COMBINATIONS		
neomycin-bacitracin-poly-hc ophthalmic (eye) ointment 3.5-400-10,000 mg-unit/g-1%	$0 (1)	
neomycin-polymyxin b-dexameth ophthalmic (eye) drops,suspension 3.5mg/ml-10,000 unit/ml-0.1 %	$0 (1)	
neomycin-polymyxin b-dexameth ophthalmic (eye) ointment 3.5 mg/g-10,000 unit/g-0.1 %	$0 (1)	
neomycin-polymyxin-hc ophthalmic (eye) drops,suspension 3.5-10,000-10 mg-unit-mg/ml	$0 (1)	
TOBRADEX OPHTHALMIC (EYE) OINTMENT 0.3-0.1 %	$0 (2)	

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table. 10/15/2026

Drug Name	Drug Tier	Requirements/Limits
tobramycin-dexamethasone ophthalmic (eye) drops,suspension 0.3-0.1 %	$0 (3)	
STEROIDS		
dexamethasone sodium phosphate ophthalmic (eye) drops 0.1 %	$0 (3)	
difluprednate ophthalmic (eye) drops 0.05 %	$0 (3)	
fluorometholone ophthalmic (eye) drops,suspension 0.1 %	$0 (1)	
loteprednol etabonate ophthalmic (eye) drops,suspension 0.2 %	$0 (3)	
prednisolone acetate ophthalmic (eye) drops,suspension 1 %	$0 (1)	
prednisolone sodium phosphate ophthalmic (eye) drops 1 %	$0 (3)	
SYMPATHOMIMETICS		
ALPHAGAN P OPHTHALMIC (EYE) DROPS 0.1 %	$0 (2)	
apraclonidine ophthalmic (eye) drops 0.5 %	$0 (3)	
brimonidine ophthalmic (eye) drops 0.15 %, 0.2 %	$0 (1)	
OVER THE COUNTER (OTC) AND RX AGENTS		
OVER THE COUNTER (OTC) AND RX AGENTS		
12 hour allergy-d 5-120 mg tab	$0 (0)	
12-hr decongest 120 mg caplet coated cplt, max str	$0 (0)	
12hr nasal decongest er 120 mg	$0 (0)	
24 hour allergy 50 mcg spray 50 mcg/actuation	$0 (0)	

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table. 10/15/2026

Drug Name	Drug Tier	Requirements/Limits
24hour allergy 10 mg tablet	$0 (0)	
24hr allergy-congst 180-240 mg	$0 (0)	
5-htp time release 100 mg tab	$0 (0)	
5-mthf 1,700 mcg dfe capsule	$0 (0)	
5-mthf es 8,500 mcg dfe cap	$0 (0)	
8 hour acetaminophen er 650 mg	$0 (0)	
a thru z advanced formula tab advanced formula 18-400 mg-mcg	$0 (0)	
a thru z advanced formula tab new formula (rx)	$0 (0)	
a thru z advanced formula tab w/lutein & lycopene (rx) 18-500-300-250 mg-mcg-mcg-mcg	$0 (0)	
a thru z select 50 plus tablet advanced formula 0.4 mg-300 mcg- 250 mcg	$0 (0)	
a thru z select men 50+ tablet 300-60-600-300 mcg	$0 (0)	
a thru z select multivit tab 500-300-250 mcg	$0 (0)	
a thru z select multivit tab iron-free, 50+ form 0.4 mg-300 mcg- 250 mcg	$0 (0)	
a thru z select tablet new formulation (rx)	$0 (0)	
a thru z select women's tablet	$0 (0)	
a.i.r.s. nebulizer replace kit (rx)	$0 (0)	
abc cmplt senior 50 plus cplt 0.4 mg-300 mcg- 250 mcg	$0 (0)	
abc complete senior men's cplt 300-60-600-300 mcg	$0 (0)	

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table. 10/15/2026

Drug Name	Drug Tier	Requirements/Limits
abc complete senior women cplt 8 mg iron-400 mcg-50 mcg	$0 (0)	
abc complete women's caplet 18-400 mg-mcg	$0 (0)	
abc plus tablet 0.4 mg-300 mcg- 250 mcg	$0 (0)	
ace aerosol cloud enhancer	$0 (0)	
acerola c 500 mg wafer (rx)	$0 (0)	
acetadryl 500-25 mg caplet 25-500 mg	$0 (0)	
acetaminophen 160 mg/5 ml liq	$0 (0)	
acetaminophen 160 mg/5 ml solution cup outer 160 mg/5 ml (5 ml)	$0 (0)	
acetaminophen 160 mg/5 ml susp	$0 (0)	
acetaminophen 160 mg/5 ml suspension cup outer 160 mg/5 ml (5 ml)	$0 (0)	
acetaminophen 160 mg/5 ml syr outer 32 mg/ml	$0 (0)	
acetaminophen 325 mg tablet	$0 (0)	
acetaminophen 325 mg/10.15 ml cup outer	$0 (0)	
acetaminophen 325 mg/10.15 ml cup outer	$0 (0)	
acetaminophen 500 mg tablet	$0 (0)	
acetaminophen 650 mg suppos	$0 (0)	
acetaminophen 650 mg/20.3 ml cup outer	$0 (0)	
acetaminophen 650 mg/20.3 ml cup outer	$0 (0)	
acetaminophen 80 mg/2.5 ml syr outer 32 mg/ml	$0 (0)	
acetaminophen er 650 mg tablet	$0 (0)	
acetaminophen pm caplet 25-500 mg	$0 (0)	

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table. 10/15/2026

Drug Name	Drug Tier	Requirements/Limits
acetaminophen pm geltab ex-strength, geltab 25-500 mg	$0 (0)	
acid controller 10 mg tablet	$0 (0)	
acid gone tablet chew 160-105 mg	$0 (0)	
acid reducer 10 mg tablet	$0 (0)	
acne medication 5% lotion	$0 (0)	
actiflovit ear health caplet 200-100 mg	$0 (0)	
addaprin 200 mg tablet	$0 (0)	
adt robitussin peak cld m-s lq non-drowsy 5-10-100 mg/5 ml	$0 (0)	
adult aerosol mask	$0 (0)	
adult disposable mouthpiece	$0 (0)	
adult tussin multi-symp cold oral liquid 5-10-100 mg/5 ml	$0 (0)	
adult wal-tussin dm max liq cherry menthol 10-200 mg/5 ml	$0 (0)	
adult wal-tussin dm max liq gluten-free 10-200 mg/5 ml	$0 (0)	
adult wal-tussin dm syrup cherry,adult 10-100 mg/5 ml	$0 (0)	
adult wal-tussin dm syrup chry-menthol 10-100 mg/5 ml	$0 (0)	
adult wal-tussin liquid 100 mg/5 ml	$0 (0)	
adults 50 plus multivitamin 0.4 mg-300 mcg-250 mcg	$0 (0)	
adults' daily formula tablet 18 mg iron-25 mcg	$0 (0)	

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table. 10/15/2026

Drug Name	Drug Tier	Requirements/Limits
adults multivitamin caplet 18 mg iron-400 mcg-25 mcg	$0 (0)	
adults multivitamin tablet 18 mg iron-400 mcg-25 mcg	$0 (0)	
adv antacid-antigas liquid 400-400-40 mg/5 ml	$0 (0)	
advanced herbals ginger chew 15 mg	$0 (0)	
aerobika oscillating pep systm	$0 (0)	
aerochamber mechanical vent	$0 (0)	
aerochamber mini	$0 (0)	
aerochamber mv hold chamber	$0 (0)	
aerochamber plus flow-vu	$0 (0)	
aerochamber plus flow-vu large	$0 (0)	
aerochamber plus flow-vu med	$0 (0)	
aerochamber plus flow-vu med with mask	$0 (0)	
aerochamber plus flow-vu small	$0 (0)	
aerochamber z-stat plus large w/mask, large	$0 (0)	
aerochamber z-stat plus w-flow	$0 (0)	
aerochamber z-stat plus w-flow w/flowsignal	$0 (0)	
aerochamber z-stat plus-med w/mask-med,cmft seal	$0 (0)	
aerochamber z-stat plus-small w/mask-sm,cmft seal	$0 (0)	
aerochamber2go	$0 (0)	
aeroeclipse ii nebulizer	$0 (0)	
aeroeclipse xl nebulizer	$0 (0)	
aeroneb go neb handset & cable	$0 (0)	

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table. 10/15/2026

Drug Name	Drug Tier	Requirements/Limits
aeroneb go nebulizer	$0 (0)	
aeroneb go nebulizer handset	$0 (0)	
aerotrach holding chamber	$0 (0)	
aerovent plus holding chamber	$0 (0)	
aflora tablet 20 mg iron- 1,670 mcg dfe	$0 (0)	
air filter	$0 (0)	
air tube with air plugs	$0 (0)	
airborne natural energy liquid 500-175 mg/30 ml	$0 (0)	
airs adult aerosol mask	$0 (0)	
airs disposable nebulizer kit (rx)	$0 (0)	
airs pediatric disposable mask	$0 (0)	
airzone peak flow meter adults & children	$0 (0)	
alamax cr 450 mcg-600 mg tab 600 mg- 450 mcg	$0 (0)	
alamax protect capsule 125 mg-95 mcg- 250 mg	$0 (0)	
alavert 10 mg odt	$0 (0)	
alavert d-12 allergy-cong tab 5-120 mg	$0 (0)	
alavert d-12 allergy-sinus tab 5-120 mg	$0 (0)	
alaway 0.025% eye drops 0.025 % (0.035 %)	$0 (0)	
algae based calcium oral tablet 333.33 mg-6.67 mcg-32 mg	$0 (0)	
alive diabetic multivitamin tb 120-100 mcg	$0 (0)	
alive max potency multivit liq 300-80 mcg/30 ml	$0 (0)	
alive men 50 plus multivit tb 240-120-300 mcg	$0 (0)	

Drug Name	Drug Tier	Requirements/Limits
alive premium prenatal gummy 120 mcg-25 mg- 66.7 mg	$0 (0)	
alive women's 50 plus ultra tb 800 mcg dfe-150 mcg	$0 (0)	
alive women's energy mv tablet 18 mg iron-240 mcg-120 mcg	$0 (0)	
alive women's ultra potency tb 18 mg-800 mcg dfe-150 mcg	$0 (0)	
alka-seltzer heartburn chew 300 mg (750 mg)	$0 (0)	
alka-seltzer plus allergy tab 25 mg	$0 (0)	
all day allergy 10 mg tablet	$0 (0)	
all day allergy-d tablet 5-120 mg	$0 (0)	
all day pain relief 220 mg tab	$0 (0)	
all day relief 220 mg tablet	$0 (0)	
all flow 1000 kit	$0 (0)	
all flow 1000 pft filter	$0 (0)	
all flow 3000 kit	$0 (0)	
all flow 3000 pft filter	$0 (0)	
all flow 4000 kit	$0 (0)	
all flow 4000 pft filter	$0 (0)	
all flow 4000 pft filter	$0 (0)	
all flow 5000 kit	$0 (0)	
all flow 5000 pft filter	$0 (0)	
all flow 6000 pft filter yellow	$0 (0)	
allegra-d 12 hour tablet (otc) 60-120 mg	$0 (0)	
aller-chlor 4 mg tablet	$0 (0)	

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table. 10/15/2026

Drug Name	Drug Tier	Requirements/Limits
allerclear 10 mg tablet non-drowsy, 24hr	$0 (0)	
allerclear d-12hr tablet 5-120 mg	$0 (0)	
allerclear d-24hr er tablet 10-240 mg	$0 (0)	
aller-fex 180 mg tablet	$0 (0)	
aller-flo 50 mcg spray 50 mcg/actuation	$0 (0)	
aller-g-time 25 mg caplet	$0 (0)	
allergy (diphen) 25 mg tablet	$0 (0)	
allergy (loratadine) 10 mg tab	$0 (0)	
allergy 25 mg tablet	$0 (0)	
allergy 4 mg tablet	$0 (0)	
allergy 50 mg/20 ml solution 12.5 mg/5 ml	$0 (0)	
allergy complete-d oral tablet extended release 12 hr 5-120 mg	$0 (0)	
allergy medicine 25 mg tablet	$0 (0)	
allergy relief 12.5 mg/5 ml	$0 (0)	
allergy relief 180 mg tablet	$0 (0)	
allergy relief 4 mg tablet	$0 (0)	
allergy relief 5 mg/5 ml soln	$0 (0)	
allergy relief 50 mcg spray 50 mcg/actuation	$0 (0)	
allergy relief d 12-hour tab non-drowsy 5-120 mg	$0 (0)	
allergy relief d-12 tablet 5-120 mg	$0 (0)	
allergy relief d-24hr tablet 10-240 mg	$0 (0)	
allergy relief-d tablet 5-120 mg	$0 (0)	
allergy relief-nasal decong tb 10-240 mg	$0 (0)	
allergy rlf (cetrzn) 10 mg tab	$0 (0)	
allergy rlf (cetrzn) 5 mg tab	$0 (0)	

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table. 10/15/2026

Drug Name	Drug Tier	Requirements/Limits
allergy rlf (fexo) 60 mg tab	$0 (0)	
allergy-conges relf er tablet non-drowsy,24 hr rlf 10-240 mg	$0 (0)	
allergy-congest rlf-d 24hr tab 10-240 mg	$0 (0)	
allergy-congestion rlf 12h tab 5-120 mg	$0 (0)	
allergy-time 4 mg tablet	$0 (0)	
aller-tec 10 mg tablet	$0 (0)	
aller-tec d 5-120 mg tablet	$0 (0)	
all-in-one nebulizer system	$0 (0)	
almacone-2 liquid 400-400-40 mg/5 ml	$0 (0)	
alophen pills 5 mg	$0 (0)	
alpha lipoic acid 600 mg cap	$0 (0)	
altamist 0.65% nose spray	$0 (0)	
altera nebulizer handset	$0 (0)	
altera nebulizer system	$0 (0)	
altituss 15-150 mg/7.5 ml liq 10-100 mg/5 ml	$0 (0)	
aluminum hydroxide gel 320 mg/5 ml	$0 (0)	
alum-mag hydroxide-simeth 1,200-1,200-120 mg/30 ml cup 200-200-20 mg/5 ml	$0 (0)	
alum-mag hydroxide-simeth 2,400-2,400-240 mg/30 ml cup 400-400-40 mg/5 ml	$0 (0)	
aminofen 325 mg tablet	$0 (0)	
amlactin 12% lotion (rx)	$0 (0)	
ammonium lactate 12% cream (otc)	$0 (0)	
ammonium lactate 12% cream (rx)	$0 (0)	
ammonium lactate 12% cream fragrance free (otc)	$0 (0)	

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table. 10/15/2026

Drug Name	Drug Tier	Requirements/Limits
ammonium lactate 12% lotion (otc)	$0 (0)	
ammonium lactate 12% lotion fragrance free (rx)	$0 (0)	
animal chews tablet	$0 (0)	
antacid 500 mg chewable tablet 200 mg calcium (500 mg)	$0 (0)	
antacid 750 mg chewable tablet 300 mg (750 mg)	$0 (0)	
antacid anti-gas liquid 400-400-40 mg/5 ml	$0 (0)	
antacid anti-gas max str liq 400-400-40 mg/5 ml	$0 (0)	
antacid calcium 500 mg chw tab 215 mg calcium (500 mg)	$0 (0)	
antacid extra strength chw tab 160-105 mg	$0 (0)	
antacid liquid 200-200-20 mg/5 ml	$0 (0)	
antacid liquid regular str, mint 200-200-20 mg/5 ml	$0 (0)	
antacid m liquid n 200-200-20 mg/5 ml	$0 (0)	
antacid plus anti-gas liquid regular strength 200-200-20 mg/5 ml	$0 (0)	
antacid plus anti-gas susp cherry,max-strength 400-400-40 mg/5 ml	$0 (0)	
antacid suspension max str, fast acting 400-400-40 mg/5 ml	$0 (0)	
antacid xtra strength chew tab 300 mg (750 mg)	$0 (0)	
antacid-antigas liquid 200-200-20 mg/5 ml	$0 (0)	

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table. 10/15/2026

Drug Name	Drug Tier	Requirements/Limits
antioxidant formula tablet 8,333-167-133 unit-mg-unit	$0 (0)	
antiseptic skin cleanser 4%	$0 (0)	
aphen 325 mg tablet	$0 (0)	
aprodine tablet 2.5-60 mg	$0 (0)	
arthritis pain er 650 mg caplt	$0 (0)	
arthritis pain er 650 mg caplt 8 hour temp relief	$0 (0)	
arthritis pain relief 0.1% crm high potency str	$0 (0)	
artificial eye lub 15-83% oint 83-15 %	$0 (0)	
artificial tears	$0 (0)	
artificial tears 0.1-0.2-0.3% 0.1-0.3-0.2 %	$0 (0)	
artificial tears drops sterile, p/f 0.1-0.3 %	$0 (0)	
artificial tears drops u-d, 32x.6ml 0.1-0.3 %	$0 (0)	
artificial tears eye drops	$0 (0)	
artificial tears eye drops strl 0.1-0.3 %	$0 (0)	
ascorbic acid 500 mg tablet (rx)	$0 (0)	
aspirin 300 mg suppository	$0 (0)	
aspirin 325 mg tablet	$0 (0)	
aspirin 81 mg chewable tablet	$0 (0)	
aspirin ec 325 mg tablet	$0 (0)	
aspirin ec 81 mg tablet	$0 (0)	
aspirin ec 81 mg tablet	$0 (0)	
aspirin regimen 81 mg ec tab	$0 (0)	
asthma check peak flow mtr	$0 (0)	
athletes foot 1% cream	$0 (0)	

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table. 10/15/2026

Drug Name	Drug Tier	Requirements/Limits
aura portaneb mesh nebulizer	$0 (0)	
ayr saline 0.65% nose drops	$0 (0)	
ayr saline 0.65% nose spray	$0 (0)	
azo hormonal health cycle care 100 mg-50 mg- 50 mg-15 mg	$0 (0)	
azo hormonal hlth happy cycle 100 mg-50 mg- 50 mg-50 mg	$0 (0)	
azo urinary pain rlf 99.5 mg	$0 (0)	
b complex with vitamin c cap p/f (rx) 15-10-50-5-300 mg	$0 (0)	
b complex with vitamin c tab 18-10-45-5-250 mg	$0 (0)	
b-12 dots 500 mcg tablet	$0 (0)	
baby ayr saline 0.65% drops	$0 (0)	
bacitracin 500 unit/gm ointmnt 500 unit/gram	$0 (0)	
bacitracin 500 unit/gm ointmnt 500 unit/gram	$0 (0)	
bacitracin zn 500 unit/gm oint 500 unit/gram	$0 (0)	
bacitracin zn 500 unit/gm oint 500 unit/gram	$0 (0)	
bacitraycin plus 500 unit/gm 500 unit/gram	$0 (0)	
bacmin caplet 27 mg iron- 1 mg	$0 (0)	
banophen 25 mg tablet	$0 (0)	
banophen 50 mg capsule	$0 (0)	
bayer aspirin 325 mg caplet	$0 (0)	
bayer aspirin ec 325 mg tablet	$0 (0)	
bayer low dose ec 81 mg tab	$0 (0)	
bc max str 500-500-65 mg pwd pk	$0 (0)	

Drug Name	Drug Tier	Requirements/Limits
benadryl allergy 25 mg ultratb	$0 (0)	
benadryl itch stopping 2% gel	$0 (0)	
benzonatate 100 mg capsule	$0 (0)	
benzonatate 200 mg capsule	$0 (0)	
benzoyl peroxide 6% cleanser (otc)	$0 (0)	
bergacor 650 mg tablet	$0 (0)	
beta hc 1% lotion	$0 (0)	
betasept 4% surgical scrub	$0 (0)	
betatemp 160 mg/5 ml susp	$0 (0)	
biocel tablet 800-250-750 mcg	$0 (0)	
biocotron liquid 10-100 mg/5 ml	$0 (0)	
biofreeze 10% cream	$0 (0)	
biofreeze 10% overnight cream	$0 (0)	
biolyte liquid berry, outer	$0 (0)	
biolyte liquid citrus, outer	$0 (0)	
biolyte liquid fruit punch, outer	$0 (0)	
biolyte liquid melon, outer	$0 (0)	
biolyte liquid tropical, outer	$0 (0)	
bisacodyl 10 mg suppository	$0 (0)	
bisacodyl ec 5 mg tablet	$0 (0)	
bismuth 262 mg tablet chew	$0 (0)	
bismuth 262 mg tablet chew	$0 (0)	
bismuth subsalicylate oral suspension 262 mg/15 ml	$0 (0)	
brain might-dha-co q10 tablet 140-10-10 mg	$0 (0)	
breatherite mdi spacer	$0 (0)	
breatherite spacer-adult mask	$0 (0)	

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table. 10/15/2026

Drug Name	Drug Tier	Requirements/Limits
breatherite spacer-infant mask	$0 (0)	
breatherite spacer-lg chld msk	$0 (0)	
breatherite spacer-neonate msk	$0 (0)	
breatherite spacer-sm chld msk	$0 (0)	
breathrite valved mdi chamber	$0 (0)	
breathrite valved mdi spacer	$0 (0)	
bubbles the fish ii pedi mask (otc)	$0 (0)	
buffered aspirin 325 mg tb	$0 (0)	
buffered c powder 3,000 mg pkt	$0 (0)	
bufferin 325 mg tablet coated	$0 (0)	
c complex 1,000 mg tablet sa	$0 (0)	
c-1,000 mg tablet (rx)	$0 (0)	
c-1,000 mg with rose hips cplt caplet	$0 (0)	
c-1,000 mg with rose hips tab p/f	$0 (0)	
c-1000 er caplet	$0 (0)	
c-500 mg tablet (rx)	$0 (0)	
c-500 mg tablet rose hips (rx)	$0 (0)	
calcidol drops 200 mcg/ml (8,000 unit/ml)	$0 (0)	
calcium 250-d tablet oyster shell (rx) 250 mg-3.125 mcg (125 unit)	$0 (0)	
calcium 500 mg chewable tablet outer (rx) 500 mg calcium (1,250 mg)	$0 (0)	
calcium 500 mg tablet (rx) 500 mg calcium (1,250 mg)	$0 (0)	
calcium 500 mg-vit d3 10 mcg tab (rx) 500 mg-10 mcg (400 unit)	$0 (0)	

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table. 10/15/2026

Drug Name	Drug Tier	Requirements/Limits
calcium 500 mg-vit d3 5 mcg tb (rx) 500 mg-5 mcg (200 unit)	$0 (0)	
calcium 500-vit d3 125 caplet 500 mg-3.125 mcg (125 unit)	$0 (0)	
calcium 500-vit d3 200 tablet (rx) 500 mg-5 mcg (200 unit)	$0 (0)	
calcium 500-vit d3 400 tablet (rx) 500 mg-10 mcg (400 unit)	$0 (0)	
calcium 500-vit d3 400 tablet p/f,n,no lactose (rx) 500 mg-10 mcg (400 unit)	$0 (0)	
calcium 600 mg tablet (rx) 600 mg calcium (1,500 mg)	$0 (0)	
calcium 600 mg tablet (rx) 600 mg calcium (1,500 mg)	$0 (0)	
calcium 600 mg-d3 20 mcg tab (rx) 600 mg-20 mcg (800 unit)	$0 (0)	
calcium 600 mg-vit d3 10 mcg tb (rx) 600 mg-10 mcg (400 unit)	$0 (0)	
calcium 600 mg-vit d3 5 mcg tb (rx) 600 mg-5 mcg (200 unit)	$0 (0)	
calcium 600+d softgel 600 mg-5 mcg (200 unit)	$0 (0)	
calcium 600-vit d3 200 tablet (rx) 600 mg-5 mcg (200 unit)	$0 (0)	
calcium 600-vit d3 400 tablet (rx) 600 mg-10 mcg (400 unit)	$0 (0)	
calcium 600-vit d3 400 tablet (rx) 600 mg-10 mcg (400 unit)	$0 (0)	

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table. 10/15/2026

Drug Name	Drug Tier	Requirements/Limits
calcium antacid 500 mg chw tab 200 mg calcium (500 mg)	$0 (0)	
calcium antacid 750 mg chew tab 300 mg (750 mg)	$0 (0)	
calcium antacid 750 mg tb chew 320 mg calcium (750 mg)	$0 (0)	
calcium carb 1,250 mg/5 ml sus n (otc) 500 mg/5 ml (1,250 mg/5 ml)	$0 (0)	
calcium carb 500 mg tab chew 200 mg calcium (500 mg)	$0 (0)	
calcium carbonate 648 mg tab 260 mg calcium (648 mg)	$0 (0)	
calcium d-glucarate 500 mg cap	$0 (0)	
cal-gest 500 mg tablet chew 200 mg calcium (500 mg)	$0 (0)	
callus removers patch 40 %	$0 (0)	
capsaicin 0.025% cream	$0 (0)	
capsaicin 0.025% hot patch	$0 (0)	
capsaicin 0.05% cream	$0 (0)	
capsaicin 0.075% cream	$0 (0)	
capsaicin 0.1% cream	$0 (0)	
capsaicin 0.15% liquid	$0 (0)	
capsaicin powder usp (rx)	$0 (0)	
capsaid es 0.1% cream	$0 (0)	
capzasin 0.15% liquid	$0 (0)	
capzasin-hp 0.1% cream	$0 (0)	
capzix 0.1% cream	$0 (0)	
carnitex 340 mg capsule	$0 (0)	

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table. 10/15/2026

Drug Name	Drug Tier	Requirements/Limits
castiva warming 0.035% lotion	$0 (0)	
centravites 50 plus tablet	$0 (0)	
centravites 50 plus tablet outer 0.4 mg-300 mcg- 250 mcg	$0 (0)	
centravites adults tablet outer 18 mg iron-400 mcg-25 mcg	$0 (0)	
centrum adults tablet 18-400 mg-mcg	$0 (0)	
centrum specialist energy tab (rx) 18 mg iron-400 mcg-25 mcg-75mg	$0 (0)	
centrum specialist heart tab (rx) 3-200-400 mg-mcg-mg	$0 (0)	
centrum women tablet 18-400 mg-mcg	$0 (0)	
ceralyte-70 electrolyte drink (rx) 70-60-20-30 meq/l	$0 (0)	
cerovite senior tablet 0.4 mg-300 mcg- 250 mcg	$0 (0)	
certa plus tablet 18-0.4-250 mg-mg-mcg	$0 (0)	
certavite senior tablet 0.4 mg-300 mcg- 250 mcg	$0 (0)	
certavite-antioxidant tablet (rx) 18-400 mg-mcg	$0 (0)	
cetirizine hcl 1 mg/ml soln (otc)	$0 (0)	
cetirizine hcl 1 mg/ml soln (rx)	$0 (0)	
cetirizine hcl 10 mg tablet	$0 (0)	
cetirizine hcl 5 mg tablet	$0 (0)	
cetirizine hcl 5 mg/5 ml solution cup outer	$0 (0)	
cetirizine-pse er 5-120 mg tab	$0 (0)	
chest cong rlf dm 400-20 mg tb 20-400 mg	$0 (0)	

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table. 10/15/2026

Drug Name	Drug Tier	Requirements/Limits
chest congest rlf 400 mg tab	$0 (0)	
chest congestion relief dm syr 10-100 mg/5 ml	$0 (0)	
chest congst-cough relief tab 20-400 mg	$0 (0)	
child acetaminophen 325 mg/10.15 ml cup outer	$0 (0)	
child acetaminophen 650 mg/20.3 ml cup inner	$0 (0)	
child acetaminophen 650 mg/20.3 ml cup outer	$0 (0)	
child acetaminophen 80 mg chew	$0 (0)	
child acetaminophen 80 mg/2.5 ml oral syringe oral syringe 32 mg/ml	$0 (0)	
child all day allergy 1 mg/ml	$0 (0)	
child all day allergy 1 mg/ml	$0 (0)	
child allergy 12.5 mg/5 ml	$0 (0)	
child allergy 5 mg/5 ml soln	$0 (0)	
child allergy relief 1 mg/ml	$0 (0)	
child aspirin 81 mg chew tab u-d	$0 (0)	
child aspirin 81 mg tab chew	$0 (0)	
child cetirizine hcl 1 mg/ml	$0 (0)	
child delsym cough-chest dm lq 5-100 mg/5 ml	$0 (0)	
child fluticasone prop 50 mcg 50 mcg/actuation	$0 (0)	
child giltuss cough-chest liq 10-100 mg/5 ml	$0 (0)	
child mucus-cough relief liq 5-100 mg/5 ml	$0 (0)	
child pain rlf 160 mg/5 ml sus gluten/f	$0 (0)	

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table. 10/15/2026

Drug Name	Drug Tier	Requirements/Limits
child pain-fever 160 mg/5 ml	$0 (0)	
child pain-fever 160 mg/5 ml	$0 (0)	
child robitussin elderberry dm 5-100 mg/5 ml	$0 (0)	
child saline 0.65% nasal spray	$0 (0)	
child wal-itin 5 mg/5 ml soln	$0 (0)	
child wal-zyr 1 mg/ml solution	$0 (0)	
children ibuprofen 100 mg/5 ml	$0 (0)	
children multivitamin chew tab	$0 (0)	
children's advil 100 mg/5 ml (otc)	$0 (0)	
children's chest congest liq 100 mg/5 ml	$0 (0)	
children's chew multivitamin	$0 (0)	
children's chewables 300 mcg	$0 (0)	
children's chewables 300 mcg	$0 (0)	
children's cold-cough liquid 1-2.5-5 mg/5 ml	$0 (0)	
children's cough liquid cherry 5-100 mg/5 ml	$0 (0)	
children's diphenhydramine oral liquid 12.5 mg/5 ml	$0 (0)	
children's mapap 80 mg tab chw	$0 (0)	
children's mucinex cough liq 5-100 mg/5 ml	$0 (0)	
children's mucus relief liq grape,child 100 mg/5 ml	$0 (0)	
child's alaway 0.025% eye drop 0.025 % (0.035 %)	$0 (0)	
child's aller-tec 1 mg/ml soln	$0 (0)	
child's chewable multivit tab 300 mcg	$0 (0)	
child's chewable vitamin tab outer (rx)	$0 (0)	

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table. 10/15/2026

Drug Name	Drug Tier	Requirements/Limits
child's pain reliever susp children's 160 mg/5 ml	$0 (0)	
child's wal-dryl 12.5 mg/5 ml	$0 (0)	
child's wal-dryl 12.5 mg/5 ml single dose	$0 (0)	
chld acetaminophen 160 mg/5 ml	$0 (0)	
chld acetaminophen 160 mg/5 ml	$0 (0)	
chld acetaminophen 160 mg/5 ml cup outer 160 mg/5 ml (5 ml)	$0 (0)	
chld robitussin cough-chest dm 5-100 mg/5 ml	$0 (0)	
chlophedianol-dexchlorp-pse lq 1-30-12.5 mg/5 ml	$0 (0)	
chlor a-hist dm liquid 4-10-15 mg/5 ml	$0 (0)	
chlorhexidine 4% liquid	$0 (0)	
chlorhexidine 4% scrub	$0 (0)	
chlorpheniramine 4 mg tablet	$0 (0)	
chocolated laxative 15 mg	$0 (0)	
cidatrine-tm 975-232 mg tablet	$0 (0)	
citroma solution	$0 (0)	
clear eyes dry itchy 0.25% drp	$0 (0)	
clear eyes nighttime 0.25% drp	$0 (0)	
clear eyes sensitive 0.2-0.25%	$0 (0)	
clearcanal earwax softener drp 6.5 %	$0 (0)	
clever choice chamber-lrg mask	$0 (0)	
clever choice chamber-med mask	$0 (0)	
clever choice chamber-sm mask	$0 (0)	
clever choice neb kit-adult	$0 (0)	

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table. 10/15/2026

Drug Name	Drug Tier	Requirements/Limits
clever choice neb kit-child	$0 (0)	
clever choice nebulizer	$0 (0)	
clever choice peak flow meter	$0 (0)	
clever choice whisper aire ped	$0 (0)	
clinere earwax removal 6.5% kt	$0 (0)	
cold-cough elixir 1-2.5-5 mg/5 ml	$0 (0)	
col-rite 250 mg softgel	$0 (0)	
comfort gel max str susp max-str 400-400-40 mg/5 ml	$0 (0)	
comfort gel suspension regular str, cherry 200-200-20 mg/5 ml	$0 (0)	
comfortseal large mask	$0 (0)	
comfortseal medium mask	$0 (0)	
comfortseal small mask	$0 (0)	
compact compress nebul kit	$0 (0)	
compact space chamber	$0 (0)	
compact space chamber-lrg mask	$0 (0)	
compact space chamber-med mask	$0 (0)	
compact space chamber-sm mask	$0 (0)	
compact ultrason nebul kit	$0 (0)	
comp-air nebulizer system model ne-c801 (rx)	$0 (0)	
companion tablet 0.4 mg	$0 (0)	
complete allergy 25 mg caplet	$0 (0)	
complete multivit-mineral liq 9 mg iron/15 ml	$0 (0)	
compound w liquid 17 %	$0 (0)	

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table. 10/15/2026

Drug Name	Drug Tier	Requirements/Limits
compressor nebulizer system (rx)	$0 (0)	
coqmax-omega 100 mg softgel 348-500-100 mg	$0 (0)	
coqmax-omega 50 mg softgel 174-50-115-250 mg	$0 (0)	
corn remover 40% patch	$0 (0)	
corvita tablet 1.25-2.5-7 mg	$0 (0)	
cough dm 20-200 mg/20 ml syrup 5-50 mg/5 ml	$0 (0)	
cough dm er 30 mg/5 ml susp 12 hour	$0 (0)	
cough-chest congestion dm liq 5-100 mg/5 ml	$0 (0)	
cranrx vit c-mannose gummy 250-30-50 mg	$0 (0)	
cromolyn sodium nasal spray 5.2 mg/spray (4 %)	$0 (0)	
culturelle kid prob-mv 5b chew 5 billion cell	$0 (0)	
culturelle kid pro-mv 2.5b chw 2.5 billion cell	$0 (0)	
culturelle kid pro-mv-lut gmmy 500 million cell	$0 (0)	
cvs 8hr muscle aches er 650 mg	$0 (0)	
cvs adult dm maximum liquid 5-100 mg/5 ml	$0 (0)	
cvs allergy (lorat) 10 mg odt	$0 (0)	
cvs allergy 0.025% eye drops 0.025 % (0.035 %)	$0 (0)	
cvs allergy rlf d24 180-240 mg	$0 (0)	
cvs allergy rlf-d 60-120 mg tb	$0 (0)	
cvs allergy-hives 180 mg tab	$0 (0)	

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table. 10/15/2026

Drug Name	Drug Tier	Requirements/Limits
cvs antibiotic ointment 3.5mg-400 unit-5,000 unit/gram	$0 (0)	
cvs anti-diarrheal suspension 262 mg/15 ml	$0 (0)	
cvs child chest congest-cough 5-100 mg/5 ml	$0 (0)	
cvs child cough-chest cong dm 5-100 mg/5 ml	$0 (0)	
cvs daily fiber 0.52 gram cap	$0 (0)	
cvs daily multiple tablet 18 mg iron-400 mcg-500 mg ca	$0 (0)	
cvs enema disposable 19-7 gram/118 ml	$0 (0)	
cvs fiber 0.52 g capsule 0.52 gram	$0 (0)	
cvs fiber therapy capsule 0.52 gram	$0 (0)	
cvs flavor chew antacid 750 mg 300 mg (750 mg)	$0 (0)	
cvs hair, skin and nails cplt (rx)	$0 (0)	
cvs hair-skin-nails soft chew 10,000 mcg	$0 (0)	
cvs heartburn relief chew tab 160-105 mg	$0 (0)	
cvs itch relief 2% gel	$0 (0)	
cvs jock itch 1% cream	$0 (0)	
cvs lubricant eye ointment 94-3 %	$0 (0)	
cvs menopause support caplet 30-400-80 unit-mcg-mg	$0 (0)	
cvs mens 50 plus advanced tab 400-20-370 mcg	$0 (0)	
cvs motion sickness 25 mg tab	$0 (0)	
cvs one daily men's health tab 240 mcg-30 mcg- 300 mcg	$0 (0)	

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table. 10/15/2026

Drug Name	Drug Tier	Requirements/Limits
cvs one daily men's health tab 400-20-300 mcg	$0 (0)	
cvs one daily women's 50 plus 400 mcg-500 mg calcium-20 mcg	$0 (0)	
cvs plantar 40% wart remover	$0 (0)	
cvs skin treatment body lotion 12 %	$0 (0)	
cvs spectravite adult 50 plus (rx) 0.4 mg-300 mcg- 250 mcg	$0 (0)	
cvs spectravite adult tablet 18-400 mg-mcg	$0 (0)	
cvs spectravite advanced tab 18-400 mg-mcg	$0 (0)	
cvs spectravite men 50plus tab 300-60-600-300 mcg	$0 (0)	
cvs spectravite men's tablet 8 mg iron- 200 mcg-600 mcg	$0 (0)	
cvs spectravite women 50 plus 8 mg iron-400 mcg-50 mcg	$0 (0)	
cvs spectravite women tablet 18-400 mg-mcg	$0 (0)	
cvs therapeutic 1% shampoo	$0 (0)	
cvs therapeutic shampoo 0.5%	$0 (0)	
cvs vit c-rose hip 500 mg chew	$0 (0)	
cvs women's daily multivit tab (rx) 18-400 mg-mcg	$0 (0)	
cystex max uti pain rlf 99.5 mg	$0 (0)	
d3 liquid 25 mcg drop 25 mcg/drop (1000 unit/drop)	$0 (0)	
d3-2000 unit softgel 50 mcg (2,000 unit)	$0 (0)	
daily fiber capsule 0.4 gram	$0 (0)	

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table. 10/15/2026

Drug Name	Drug Tier	Requirements/Limits
daily fiber powder 3 gram/7 gram	$0 (0)	
daily multivitamin with d3 tab 0.4 mg	$0 (0)	
daily multivitamin-mineral tab 18-400 mg-mcg	$0 (0)	
daily multivit-minerals tab (rx)	$0 (0)	
daily value multivitamin tab	$0 (0)	
daily vitamin formula tablet	$0 (0)	
daily vitamin formula tablet	$0 (0)	
daily vitamin formula-iron tab 18-400 mg-mcg	$0 (0)	
daily vite tablet (rx)	$0 (0)	
daily-vite tablet 400 mcg	$0 (0)	
dakin's 0.5% solution	$0 (0)	
dandelion root 525 mg capsule	$0 (0)	
dayavite tablet 1-75-10 mg	$0 (0)	
ddrops 1,000 unit/drop 25 mcg/drop (1000 unit/drop)	$0 (0)	
deep sea 0.65% nose spray	$0 (0)	
delsym cough+chest cngst dm lq 5-100 mg/5 ml	$0 (0)	
delta d3 400 unit tablet lactose free 10 mcg (400 unit)	$0 (0)	
delta d3 400 unit tablet y/f,gluten/f 10 mcg (400 unit)	$0 (0)	
dermacinrx circata 0.05% cream	$0 (0)	
dermacinrx circatrix 0.05% crm	$0 (0)	
dermacinrx foliflex caplet 9 mg iron- 500 mcg	$0 (0)	

Drug Name	Drug Tier	Requirements/Limits
dermacinrx folitin-z caplet 9 mg iron- 500 mcg	$0 (0)	
dermacinrx multitam caplet 1,000 mcg	$0 (0)	
dermacinrx penetral 0.025% crm	$0 (0)	
dermacinrx ribotin-e caplet 9 mg iron- 500 mcg	$0 (0)	
dermacinrx venexa caplet 1,000 mcg	$0 (0)	
dermacinrx venexa fe caplet 27 mg iron- 1 mg	$0 (0)	
dermacinrx ventrixyl caplet 1,000 mcg	$0 (0)	
dermacinrx ventrixyl fe caplet 27 mg iron- 1 mg	$0 (0)	
dermacinrx vitramyn caplet 1,000 mcg	$0 (0)	
dermacinrx vitranol caplet 1,000 mcg	$0 (0)	
dermacinrx vitranol fe caplet 27 mg iron- 1 mg	$0 (0)	
dermacinrx vitrexate caplet 1,000 mcg	$0 (0)	
dermacinrx vitrexate fe caplet 27 mg iron- 1 mg	$0 (0)	
dermacinrx zintrexyl-c caplet 9 mg iron- 500 mcg	$0 (0)	
dermarest eczema 1% lotion	$0 (0)	
desgen dm liquid 5-10-100 mg/5 ml	$0 (0)	
despec dm syrup 5-10-100 mg/5 ml	$0 (0)	
despec dm-g syrup 5-10-100 mg/5 ml	$0 (0)	
devilbiss disposable nebulizer (rx)	$0 (0)	
devilbiss pulmo-aide comprs	$0 (0)	
devilbiss pulmomate compressor	$0 (0)	

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table. 10/15/2026

Drug Name	Drug Tier	Requirements/Limits
devilbiss travel compres-nebul portable	$0 (0)	
devilbiss travel compres-nebul portable,w/battery	$0 (0)	
dexifol caplet 5 mg	$0 (0)	
dextromethorphan er 30 mg/5 ml	$0 (0)	
diabetaid 0.025% lotion	$0 (0)	
diabetes health formula caplet 500-250 mcg	$0 (0)	
diabetic tussin dm liquid 10-100 mg/5 ml	$0 (0)	
diabetic tussin dm max-str liq 10-200 mg/5 ml	$0 (0)	
diabetic tussin ex liquid d/f,n 100 mg/5 ml	$0 (0)	
dialyvite 800 tablet 0.8 mg	$0 (0)	
dialyvite 800-ultra d tablet 0.8-2,000 mg-unit	$0 (0)	
dialyvite supreme d tablet 3-2,000 mg-unit	$0 (0)	
dialyvite tablet 100-1 mg	$0 (0)	
diarrhea relief suspension 262 mg/15 ml	$0 (0)	
dimaphen dm elixir grape,gluten-f 1-2.5-5 mg/5 ml	$0 (0)	
dimetane 50 mg softgel	$0 (0)	
dimetapp cold-cough liquid children's 1-2.5-5 mg/5 ml	$0 (0)	
diotame 262 mg tablet chew outer	$0 (0)	
diotame instydose 524 mg/30 ml	$0 (0)	
diphedryl 12.5 mg/5 ml elixir	$0 (0)	
diphen 12.5 mg/5 ml solution	$0 (0)	
diphen 25 mg caplet outer	$0 (0)	
diphenhydramine 12.5 mg/5 ml	$0 (0)	

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table. 10/15/2026

Drug Name	Drug Tier	Requirements/Limits
diphenhydramine 25 mg tablet	$0 (0)	
diphenhydramine 50 mg capsule (otc)	$0 (0)	
dm-guaifenesin 5-100 mg/5 ml cup outer	$0 (0)	
docuprene 100 mg tablet	$0 (0)	
docusate cal 240 mg capsule	$0 (0)	
docusate sod 60 mg/15 ml syrp	$0 (0)	
docusate sodium 100 mg capsule	$0 (0)	
docusate sodium 100 mg tablet crushable	$0 (0)	
docusate sodium 250 mg softgel	$0 (0)	
docusate sodium 50 mg/5 ml liq	$0 (0)	
docuzen 8.6-50 mg tablet	$0 (0)	
dok 100 mg tablet	$0 (0)	
dr scholl's clear away strips 40 %	$0 (0)	
dramamine 25 mg tablet	$0 (0)	
dramamine 25 mg tablet chew	$0 (0)	
dramamine ginger 15 mg chew	$0 (0)	
dramamine less drowsy 25 mg tb	$0 (0)	
dulcolax 1,200 mg/15 ml liquid 400 mg/5 ml	$0 (0)	
dulcolax ss 100 mg softgel	$0 (0)	
duofilm liquid w/20 cover-up discs 17 %	$0 (0)	
duragel callus removers 40%	$0 (0)	
d-vi-sol 10 mcg/ml drop (rx) 10 mcg/ml (400 unit/ml)	$0 (0)	
dyna-hex 4% liquid	$0 (0)	
e-400 c-500 & beta caro tab	$0 (0)	
ear drops 6.5%	$0 (0)	
ear health formula caplet 200-100 mg	$0 (0)	

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table. 10/15/2026

Drug Name	Drug Tier	Requirements/Limits
ear wax drops 6.5%	$0 (0)	
ear wax removal 6.5% drops	$0 (0)	
ear wax removal 6.5% kit incl. washer bulb	$0 (0)	
earloop-style face mask	$0 (0)	
easivent holding chamber hospital pack	$0 (0)	
easivent holding chamber retail pack	$0 (0)	
easivent mask-large	$0 (0)	
easivent mask-medium	$0 (0)	
easivent mask-small	$0 (0)	
easy air compressor nebulizer	$0 (0)	
easy air filter	$0 (0)	
easy neb compressor nebulizer	$0 (0)	
easy neb filter	$0 (0)	
eazzze the pain 25-500 mg cplt	$0 (0)	
ebase controller w-conn cord	$0 (0)	
ecotrin ec 325 mg tablet safety coated	$0 (0)	
ecotrin ec 81 mg tablet sfty coated,low str	$0 (0)	
ed bron gp liquid 5-100 mg/5 ml	$0 (0)	
ed chlorped jr syrup 2 mg/5 ml	$0 (0)	
ed-a-hist dm liquid banana flavor (otc) 4-10-15 mg/5 ml	$0 (0)	
ed-apap 160 mg/5 ml liquid	$0 (0)	
electronic peak flow meter	$0 (0)	
elon matrix 5000 complete tab 33-5,000-250 mcg	$0 (0)	
elon matrix 5000 er tablet	$0 (0)	

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table. 10/15/2026

Drug Name	Drug Tier	Requirements/Limits
elon matrix plus er tablet 3,000 mcg -100 mg-50 mg	$0 (0)	
elon r3 extra strength tablet 2,500 mcg-50 mg -25 mg-300 mg	$0 (0)	
emetrol chewable 230 mg tab	$0 (0)	
endacof-dm liquid 1-2.5-5 mg/5 ml	$0 (0)	
endur-acin er 250 mg tablet	$0 (0)	
endur-acin er 500 mg tablet	$0 (0)	
endur-c rose hips sr 1,000 mg	$0 (0)	
enema ready to use 19-7 gram/118 ml	$0 (0)	
enema ready to use 19-7 gram/118 ml	$0 (0)	
eq acetaminophen 500 mg caplet	$0 (0)	
eq allergy relief 1 mg/ml soln	$0 (0)	
eq antacid liquid reg str,original 200-200-20 mg/5 ml	$0 (0)	
eq chlortabs 4 mg tablet	$0 (0)	
eq complete multivitamin tab gluten-free 18-400 mg-mcg	$0 (0)	
eq complete mv adlt 50 plus tb 0.4 mg-300 mcg- 250 mcg	$0 (0)	
eq daily fiber 0.52 gram cap	$0 (0)	
eq fiber therapy 0.52 gram cap	$0 (0)	
eq fiber therapy 625 mg caplet	$0 (0)	
eq first aid antiseptic soln 10 %	$0 (0)	
eq liquid antacid susp maximum strength 400-400-40 mg/5 ml	$0 (0)	
eq nasal 0.65% spray	$0 (0)	
eq natural laxative 8.6 mg tab	$0 (0)	

Drug Name	Drug Tier	Requirements/Limits
eq one daily men's tablet gluten free 400-20-300 mcg	$0 (0)	
eq one daily women's health tb 18 mg iron-400 mcg-500 mg ca	$0 (0)	
eq space chamber	$0 (0)	
eq space chamber-large mask	$0 (0)	
eq space chamber-medium mask	$0 (0)	
eq space chamber-small mask	$0 (0)	
eq tussin dm cough-chest syr 10-100 mg/5 ml	$0 (0)	
eq vegetable laxative 8.6 mg tb	$0 (0)	
eql callus remover 40% pad	$0 (0)	
eql eye health plus lutein tab 300 mcg-200 mg-27 mg-2 mg	$0 (0)	
eql slow release iron 50 mg tb 250 mg (50 mg iron)	$0 (0)	
ergocalciferol 8,000 unit/ml (rx) 200 mcg/ml (8,000 unit/ml)	$0 (0)	
essentia tablet 18-400 mg-mcg	$0 (0)	
essential man 50+ tablet 0.4-2-250 mg-mg-mcg	$0 (0)	
essential man tablet 0.4-2-250 mg-mg-mcg	$0 (0)	
evac-u-gen 8.6 mg tablet	$0 (0)	
expiratory mouthpiece	$0 (0)	
eye allergy itch-red 0.1% drop	$0 (0)	
eye itch relief 0.025% drops 12 hours 0.025 % (0.035 %)	$0 (0)	

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table. 10/15/2026

Drug Name	Drug Tier	Requirements/Limits
eye multivitamin tablet 2,148 mcg-113 mg-45 mg-17.4mg	$0 (0)	
eyeprotect tablet 7,160-113-100 unit-mg-unit	$0 (0)	
ez twist tubing-aeroeclipse xl	$0 (0)	
famotidine 10 mg tablet	$0 (0)	
fenesin dm ir tablet 20-400 mg	$0 (0)	
fenesin ir 400 mg tablet	$0 (0)	
feosol 65 mg tablet (rx) 325 mg (65 mg iron)	$0 (0)	
fer-in-sol 15 mg/ml drops 15 mg iron (75 mg)/ml	$0 (0)	
ferosul 325 mg tablet (rx) 325 mg (65 mg iron)	$0 (0)	
ferrex 150 capsule 150 mg iron	$0 (0)	
ferric x-150 capsule 150 mg iron	$0 (0)	
ferro-time 325 mg tablet f/c, green 325 mg (65 mg iron)	$0 (0)	
ferro-time 325 mg tablet f/c, red 325 mg (65 mg iron)	$0 (0)	
ferrous sulf 220 mg/5 ml elix (rx) 220 mg (44 mg iron)/5 ml	$0 (0)	
ferrous sulf 220 mg/5 ml elix (rx) 220 mg (44 mg iron)/5 ml	$0 (0)	
ferrous sulf ec 324 mg tablet 324 mg (65 mg iron)	$0 (0)	
ferrous sulf ec 325 mg tablet (rx) 325 mg (65 mg iron)	$0 (0)	

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table. 10/15/2026

Drug Name	Drug Tier	Requirements/Limits
ferrous sulfate 325 mg tablet (rx) 325 mg (65 mg iron)	$0 (0)	
feverall 325 mg suppository junior str, outer	$0 (0)	
feverall 650 mg suppository adult, outer	$0 (0)	
fexofenadine hcl 180 mg tablet (otc)	$0 (0)	
fexofenadine hcl 60 mg tablet (otc)	$0 (0)	
fexofenadine hcl 60 mg tablet (rx)	$0 (0)	
fexofenadine-pse er 180-240 tb (otc) 180-240 mg	$0 (0)	
fexofenadine-pse er 60-120 tab (otc) 60-120 mg	$0 (0)	
fiber 625 mg caplet	$0 (0)	
fiber laxative 625 mg tablet	$0 (0)	
fiber powder 3 gram/12 gram	$0 (0)	
fiber tabs 625 mg	$0 (0)	
fiber therapy powder (otc) 3.4 gram/12 gram	$0 (0)	
fiber therapy powder 3.4 gram/5.8 gram	$0 (0)	
fiber-caps (psyllium husk) oral capsule 0.52 gram	$0 (0)	
fiber-lax 625 mg caplet	$0 (0)	
filters replacement	$0 (0)	
first aid antibiotic ointment 3.5-500-10,000 mg-unit-unit	$0 (0)	
flanax 220 mg tablet	$0 (0)	
fleet bisacodyl ec 5 mg tab	$0 (0)	
fleet docusate 100 mg softgel	$0 (0)	
fleet enema 19-7 gram/118 ml	$0 (0)	

Drug Name	Drug Tier	Requirements/Limits
fleet glycerin 2 gm adult supp	$0 (0)	
flexichamber	$0 (0)	
flexichamber-lg child mask	$0 (0)	
flexichamber-sm adult mask	$0 (0)	
flexichamber-sm child mask	$0 (0)	
flintstones + calcium tab	$0 (0)	
flintstones gummies chew tab 16 mg	$0 (0)	
floriva plus 0.25 mg/ml drop 0.25mg fluoride (0.55 mg)/ml	$0 (0)	
florraxyl tablet 20 mg iron- 1,670 mcg dfe	$0 (0)	
flotrex 0.25 mg tablet chew	$0 (0)	
flotrex 0.5 mg tablet chew	$0 (0)	
flotrex 1 mg tablet chew	$0 (0)	
flovent hfa 110 mcg inhaler 110 mcg/actuation	$0 (0)	
flovent hfa 220 mcg inhaler 220 mcg/actuation	$0 (0)	
flovent hfa 44 mcg inhaler 44 mcg/actuation	$0 (0)	
fluticasone prop 50 mcg spray (otc) 50 mcg/actuation	$0 (0)	
fluticasone propionate hfa 110 mcg inhaler 110 mcg/actuation	$0 (0)	
fluticasone propionate hfa 220 mcg inhaler 220 mcg/actuation	$0 (0)	
fluticasone propionate hfa 44 mcg inhaler 44 mcg/actuation	$0 (0)	
folaten tablet 20 mg iron- 1,670 mcg dfe	$0 (0)	
folbee plus tablet 5 mg	$0 (0)	

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table. 10/15/2026

Drug Name	Drug Tier	Requirements/Limits
folic acid 0.4 mg tablet (rx) 400 mcg	$0 (0)	
folic acid 0.8 mg tablet (rx) 800 mcg	$0 (0)	
folic acid 1 mg tablet (rx)	$0 (0)	
folixia tablet 20 mg iron- 1,670 mcg dfe	$0 (0)	
for sty relief eye ointment	$0 (0)	
freedavite tablet 1.8 mg iron-400 mcg	$0 (0)	
fruit c-100 tablet chewable 100 mg	$0 (0)	
fruit c-100 tablet chewable y/f,gluten/f (rx) 100 mg	$0 (0)	
fruit c-500 tablet chewable 500 mg	$0 (0)	
ft adult tussin 200 mg/10 ml 100 mg/5 ml	$0 (0)	
ft adult tussin cf liquid 5-10-100 mg/5 ml	$0 (0)	
ft allergy-congest er 60-120 mg	$0 (0)	
ft antibiotic 500 unit/gm oint 500 unit/gram	$0 (0)	
ft century 50 plus tablet 0.4 mg-300 mcg-250 mcg	$0 (0)	
ft century adults tablet 18-400 mg-mcg	$0 (0)	
ft century men 50 plus tablet 300-60-600-300 mcg	$0 (0)	
ft century men tablet 8 mg iron-200 mcg-60 mcg	$0 (0)	
ft century women 50 plus tab 8 mg iron-400 mcg-50 mcg	$0 (0)	
ft century women tablet 18 mg iron-400 mcg-50 mcg	$0 (0)	
ft child cold-cough relief dm 1-2.5-5 mg/5 ml	$0 (0)	
ft fiber powder 3 gram/7 gram	$0 (0)	
ft fiber supplement capsule 0.4 gram	$0 (0)	

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table. 10/15/2026

Drug Name	Drug Tier	Requirements/Limits
ft miconazole 3 combo pack 4 % (200 mg)- 2 % (9 gram)	$0 (0)	
ft motion sickness 25 mg tab	$0 (0)	
ft nasal decongest er 120 mg	$0 (0)	
ft pain relief 200 mg tablet	$0 (0)	
ft pain reliever 500 mg caplet	$0 (0)	
ft pain reliever 650 mg suppos	$0 (0)	
full spectrum b with vit c tab 0.8 mg	$0 (0)	
g tussin ac liquid 10-100 mg/5 ml	$0 (0)	
gas relief (simeth) 80 mg chew	$0 (0)	
gas-x ultim str 500 mg softgel	$0 (0)	
genicin vita-s tablet 1 mg-100 mg- 300 mcg	$0 (0)	
genteal tears severe 3-94% oin 94-3 %	$0 (0)	
gentle laxative 1,200 mg/15 ml 400 mg/5 ml	$0 (0)	
gentle laxative 10 mg supposit	$0 (0)	
gentle laxative ec 5 mg tablet	$0 (0)	
geri-dryl 12.5 mg/5 ml liquid	$0 (0)	
geri-dryl 25 mg tablet	$0 (0)	
geri-kot 8.6 mg tablet	$0 (0)	
geri-lanta liquid 200-200-20 mg/5 ml, 400-400-40 mg/5 ml	$0 (0)	
geri-mox antacid-antigas max 400-400-40 mg/5 ml	$0 (0)	
geri-mox antacid-antigas susp 200-200-20 mg/5 ml	$0 (0)	
geri-mucil powder 3 gram/12 gram	$0 (0)	
geri-pectate 262 mg/15 ml susp	$0 (0)	

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table. 10/15/2026

Drug Name	Drug Tier	Requirements/Limits
geri-tussin 100 mg/5 ml soln	$0 (0)	
geri-tussin dm 200-20 mg/10 ml 10-100 mg/5 ml	$0 (0)	
gets-it corn-callus remove liq 13.9 %	$0 (0)	
gilphex tr 390 mg-10 mg tablet 10-390 mg	$0 (0)	
giltuss diabetic 200-20 mg/10 ml 10-100 mg/5 ml	$0 (0)	
giltuss hbp 200-20 mg/10 ml lq 10-100 mg/5 ml	$0 (0)	
giltuss honey cough-congest lq 10-100 mg/5 ml	$0 (0)	
ginkgo biloba 125 mg capsule	$0 (0)	
glucose 3.75 gram tablet chew	$0 (0)	
glucose 4 gram tablet chew (rx)	$0 (0)	
glutathione reduced 500 mg cap	$0 (0)	
glycerin 2 gm adult suppository	$0 (0)	
gnp century adult formula tab 18 mg iron-400 mcg-25 mcg	$0 (0)	
gnp century adult formula tab 18-400 mg-mcg	$0 (0)	
gnp century mature formula tab (rx) 0.4 mg-300 mcg- 250 mcg	$0 (0)	
gnp century men 50 plus tab 300-60-600-300 mcg	$0 (0)	
gnp century women 50 plus tab 8 mg iron-400 mcg-50 mcg	$0 (0)	
gnp gas rlf(simeth) 80 mg chew	$0 (0)	

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table. 10/15/2026

Drug Name	Drug Tier	Requirements/Limits
gnp hair, skin and nails tab vitamins & minerals 3.3 mg iron-25 mcg	$0 (0)	
gnp nighttime sleep aid 50 mg	$0 (0)	
gnp one daily maximum tablet 18 mg iron-400 mcg-25 mcg	$0 (0)	
gnp one daily men's health tab 240 mcg-30 mcg- 300 mcg	$0 (0)	
gnp one daily multivit women 18-400 mg-mcg	$0 (0)	
gnp pink bismuth 525 mg/15 ml	$0 (0)	
gnp pm pain rlf 25-500 mg cplt	$0 (0)	
goody's hangover powder packet 1,000-150 mg	$0 (0)	
goody's plus 1000-150 mg pwd pk	$0 (0)	
green tea 600 mg capsule	$0 (0)	
gs adv antacid-antigas liquid 200-200-20 mg/5 ml	$0 (0)	
gs aller-ease 180 mg tablet	$0 (0)	
gs lice killing 1 % crm rinse	$0 (0)	
gs suphedrine 12hr 120 mg cplt	$0 (0)	
guaiasorb dm liquid 10-100 mg/5 ml	$0 (0)	
guaicon dms liquid packet 20-200 mg/10 ml	$0 (0)	
guaifed 200 mg/10 ml oral soln 100 mg/5 ml	$0 (0)	
guaifed-dm 200-20 mg/10 ml sol 10-100 mg/5 ml	$0 (0)	
guaifenesin 100 mg/5 ml soln	$0 (0)	
guaifenesin 200 mg tablet (otc)	$0 (0)	
guaifenesin 400 mg tablet	$0 (0)	

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table. 10/15/2026

Drug Name	Drug Tier	Requirements/Limits
guaifenesin ac cough syrup (otc) 10-100 mg/5 ml	$0 (0)	
guaifenesin dac oral solution 30-10-100 mg/5 ml	$0 (0)	
guaifenesin-codeine 100-10 mg/5 ml cup outer (otc) 10-100 mg/5 ml	$0 (0)	
guaifenesin-dm 100-10 mg/5 ml (otc) 10-100 mg/5 ml	$0 (0)	
guaifenesin-dm 100-10 mg/5 ml (otc) 10-100 mg/5 ml	$0 (0)	
guaifenesin-dm 100-10 mg/5 ml 10-100 mg/5 ml	$0 (0)	
guaifenesin-dm 200-10 mg/5 ml 10-200 mg/5 ml	$0 (0)	
guaifenesin-dm 400-20 mg tab 20-400 mg	$0 (0)	
gummi bear multivit tab chew multivit & minerals (rx)	$0 (0)	
hair, skin and nails caplet 66.7-1,000 mcg, 66.7-1,666.7 mcg	$0 (0)	
hair, skin and nails softgel 66.7-1,666.7 mcg	$0 (0)	
hair, skin and nails tablet 400-2,000 mcg	$0 (0)	
h-chlor 12 0.125% solution	$0 (0)	
headache pm formula 25-500 mg asprin-free	$0 (0)	
healthy eyes tablet advanced antioxidant (rx) 300 mcg-200 mg-27 mg-2 mg	$0 (0)	
healthy heart complex tablet 100-800-200-100 mg-mcg-mcg-mg	$0 (0)	
heartburn antacid chew tablet 160-105 mg	$0 (0)	

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table. 10/15/2026

Drug Name	Drug Tier	Requirements/Limits
heartburn relief 10 mg tablet	$0 (0)	
heliocare advanced capsule 120-250 mg	$0 (0)	
hibiclens 4% liquid	$0 (0)	
hibiclens 4% with foam pump	$0 (0)	
high potency multivitamin tab 18-400 mg-mcg, 9 mg iron-400 mcg	$0 (0)	
hm adt tussin cough cong dm lq 10-100 mg/5 ml	$0 (0)	
hm adult tussin dm syrup 10-100 mg/5 ml	$0 (0)	
home nebulizer plus sidestream	$0 (0)	
honey bears chewable tablet	$0 (0)	
hydrocortisone 0.5% cream (otc)	$0 (0)	
hydrocortisone 0.5% cream	$0 (0)	
hydrocortisone 0.5% ointment	$0 (0)	
hydrocortisone 1% lotion (otc)	$0 (0)	
hydrocortisone-aloe 0.5% cream	$0 (0)	
hylavite tablet 1 mg	$0 (0)	
hylazinc tablet 1 mg-1.5 mg- 1.7 mg-50 mg	$0 (0)	
hysept 0.25% solution	$0 (0)	
hysept 0.50% solution 0.5 %	$0 (0)	
ibu-200 200 mg tablet	$0 (0)	
ibuprofen 100 mg/5 ml susp (otc)	$0 (0)	
ibuprofen 100 mg/5 ml susp (rx)	$0 (0)	
ibuprofen 200 mg tablet	$0 (0)	
iferex 150 capsule 150 mg iron	$0 (0)	
in-check dial training device	$0 (0)	
in-check nasal with mask	$0 (0)	

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table. 10/15/2026

Drug Name	Drug Tier	Requirements/Limits
in-check oral flow meter	$0 (0)	
inf acetaminophen 160 mg/5 ml	$0 (0)	
inf simethicone 20 mg/0.3 ml syr	$0 (0)	
infant ibuprofen 50 mg/1.25 ml	$0 (0)	
infant ibuprofen 50 mg/1.25 ml d/f	$0 (0)	
infant pain-fever 160 mg/5 ml	$0 (0)	
infant pain-fever 160 mg/5 ml grape	$0 (0)	
infant pain-fever 160 mg/5 ml w/syringe, cherry	$0 (0)	
infant pain-fever 160 mg/5 ml w/syringe, grape	$0 (0)	
infants' advil 50 mg/1.25 ml	$0 (0)	
infants' gas relief 20 mg/0.3 ml oral syringe	$0 (0)	
infants' gas rlf 20 mg/0.3 ml 40 mg/0.6 ml	$0 (0)	
infant's gas rlf 20 mg/0.3 ml 40 mg/0.6 ml	$0 (0)	
infant's motrin 50 mg/1.25 ml berry flavor	$0 (0)	
infants' mylicon 20 mg/0.3 ml 40 mg/0.6 ml	$0 (0)	
infants' simethicone drops 40 mg/0.6 ml	$0 (0)	
innospire deluxe compres neb	$0 (0)	
innospire elegance compres neb	$0 (0)	
innospire essence compress neb	$0 (0)	
innospire go nebulizer	$0 (0)	
innospire mini compressor neb portable,w/accessori	$0 (0)	
innospire mini compressor neb portable,w/battery	$0 (0)	
innospire replacement filter	$0 (0)	

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table. 10/15/2026

Drug Name	Drug Tier	Requirements/Limits
insp. elite replacement filter	$0 (0)	
ionil t shampoo 1 %	$0 (0)	
i-prin 200 mg tablet u-d, 100's	$0 (0)	
i-prin 200 mg tablet u-d, 250's	$0 (0)	
i-prin 200 mg tablet u-d, 2x12	$0 (0)	
i-prin 200 mg tablet u-d,3's,f/c	$0 (0)	
iron 65 mg tablet (rx) 325 mg (65 mg iron)	$0 (0)	
iron 65 mg tablet (rx) 325 mg (65 mg iron)	$0 (0)	
iron 65 mg tablet p/f, gluten-free (rx) 325 mg (65 mg iron)	$0 (0)	
is-zc 50 mg tablet	$0 (0)	
i-vite tablet 300 mcg-200 mg- 27 mg	$0 (0)	
k2 liquid 90 mcg/0.5 ml drop	$0 (0)	
k2-45 mcg capsule	$0 (0)	
kaopectate 262 mg soft chew	$0 (0)	
kaopectate 262 mg/15 ml susp	$0 (0)	
kaopectate max 525 mg/15 ml susp	$0 (0)	
ketotifen 0.025% (0.035%) drop (otc)	$0 (0)	
kids vitamin d3 tab chew 10 mcg (400 unit)	$0 (0)	
kindermed infant pain 160 mg/5 ml	$0 (0)	
kindermed kid cough 100-5 mg/5 5-100 mg/5 ml	$0 (0)	
kindermed kids pain 160 mg/5 ml	$0 (0)	
k-mg citrate 99-70 mg capsule 70-99 mg	$0 (0)	
konsyl daily fiber powder pkt outer (rx) 6 gram	$0 (0)	

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table. 10/15/2026

Drug Name	Drug Tier	Requirements/Limits
konsyl daily psyllium powder 3 gram/12 gram	$0 (0)	
konsyl psyllium fiber powder orange, gluten free 3.4 gram/12 gram	$0 (0)	
k-pax immune support tablet 30 packets of 4 tabs 2.25 mg iron- 100 mcg	$0 (0)	
k-pax immune support tablet 60 packets of 4 tabs 2.25 mg iron- 100 mcg	$0 (0)	
k-pec suspension 262 mg/15 ml	$0 (0)	
lamisil at 1% cream	$0 (0)	
laxa basic 100 mg softgel	$0 (0)	
laxacin tablet 8.6-50 mg	$0 (0)	
laxative 10 mg suppository	$0 (0)	
laxative 15 mg pills	$0 (0)	
laxative 15 mg tablet	$0 (0)	
laxative 25 mg pills	$0 (0)	
laxative 25 mg tablet	$0 (0)	
laxative 5 mg tablet	$0 (0)	
laxative ec 5 mg tablet	$0 (0)	
lc d nebulizer set	$0 (0)	
lc plus nebulizer-ped mask	$0 (0)	
lice treatment 1% creme rinse	$0 (0)	
lice treatment 1% creme rinse 1 nit removal comb	$0 (0)	
lice treatment 1% creme rinse famly pk,creme rinse	$0 (0)	
lice treatment 1% creme rinse multi-pack, 2x59ml	$0 (0)	

Drug Name	Drug Tier	Requirements/Limits
liquid corn-callus remover 17 %	$0 (0)	
liquid corn-callus remover 17 %	$0 (0)	
liquid multivitamin 15 ml cup 9 mg iron/ 15 ml (15 ml)	$0 (0)	
liteaire mdi chamber	$0 (0)	
litetouch large mask	$0 (0)	
litetouch medium mask	$0 (0)	
litetouch small mask	$0 (0)	
little animals child tb chw	$0 (0)	
little remedies 0.65% spray for noses	$0 (0)	
little remedies fever 160 mg/5 berry, gluten-f 160 mg/5 ml	$0 (0)	
little remedies fever 160 mg/5 grape, gluten-f 160 mg/5 ml	$0 (0)	
little remedies gas relief drp 40 mg/0.6 ml	$0 (0)	
little remedies gas relief drp 40 mg/0.6 ml	$0 (0)	
little remedies saline spray 0.65 %	$0 (0)	
loradamed 10 mg tablet outer	$0 (0)	
loratadine 10 mg odt	$0 (0)	
loratadine 10 mg tablet	$0 (0)	
loratadine 5 mg/5 ml solution	$0 (0)	
loratadine-d 12 hour tablet 5-120 mg	$0 (0)	
loratadine-d 24hr tablet 10-240 mg	$0 (0)	
lubricant eye ointment 57.3-42.5 %, 57.7-31.9 %	$0 (0)	
lubrifresh pm eye 15-83% oint 83-15 %	$0 (0)	
lysiplex plus liquid	$0 (0)	

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table. 10/15/2026

Drug Name	Drug Tier	Requirements/Limits
lysiplex plus tablet	$0 (0)	
maalox maximum strength susp mint, max strength 400-400-40 mg/5 ml	$0 (0)	
macuvite eye care tablet 7,160 unit- 113 mg-1 mg	$0 (0)	
macuvite with lutein tablet 5,000-60-30-2 unit-mg-unit-mg	$0 (0)	
mag64 dr 64 mg tablet (rx)	$0 (0)	
mag-al plus suspens 30 ml cup 100's,u-d,10x10 200-200-20 mg/5 ml	$0 (0)	
mag-al plus xs susp 30 ml cup 100's,u-d,10x10 400-400-40 mg/5 ml	$0 (0)	
magic bullet 10 mg suppos	$0 (0)	
magnesium citrate 100 mg cap	$0 (0)	
magnesium citrate solution saline laxative	$0 (0)	
magnesium glycinate 100 mg cap 100 mg magnesium	$0 (0)	
magnesium lactate sr 84 mg cpt	$0 (0)	
magnesium oxide 250 mg tablet (rx) 250 mg magnesium	$0 (0)	
magnesium oxide 400 mg tablet (otc) 400 mg (241.3 mg magnesium)	$0 (0)	
magnesium oxide 400 mg tablet (rx) 400 mg (241.3 mg magnesium)	$0 (0)	
magnesium oxide 400 mg tablet 400 mg magnesium	$0 (0)	
magnesium oxide 420 mg tablet (rx)	$0 (0)	
mag-tab sr 84 mg caplet	$0 (0)	

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table. 10/15/2026

Drug Name	Drug Tier	Requirements/Limits
mapap (acetaminophen) oral tablet 325 mg	$0 (0)	
mapap 22.4 mg/0.7 ml oral syrn 32 mg/ml	$0 (0)	
mapap 500 mg capsule	$0 (0)	
mapap arthritis pain oral tablet extended release 650 mg	$0 (0)	
maxallergy kids 12.5 mg/5 ml	$0 (0)	
maxichlor peh dm tablet 4-10-18 mg	$0 (0)	
maxifed tablet 60-360 mg	$0 (0)	
maxifed tr 30-1.25 mg tablet 1.25-30 mg	$0 (0)	
maxi-tuss ac liquid 10-100 mg/5 ml	$0 (0)	
maxi-tuss cd liquid 4-10-10 mg/5 ml	$0 (0)	
maxi-tuss dm 1-2.5-5 mg/5 ml liq	$0 (0)	
maxi-tuss g liquid 10-100 mg/5 ml	$0 (0)	
maxi-tuss gmx liquid 10-200 mg/5 ml	$0 (0)	
maxi-tuss pe max liquid 5-100 mg/5 ml	$0 (0)	
maxrelief jr 160 mg/5 ml susp	$0 (0)	
maxtussin 200 mg/10 ml liquid 100 mg/5 ml	$0 (0)	
maxtussin dm 200-20 mg/10 ml 10-100 mg/5 ml	$0 (0)	
mc 300 nebulizer w-mouthpiece	$0 (0)	
mc 300 nebulizer-unvrsl tubing	$0 (0)	
mcm 76.8 mg-57.6 mg-96 mg patch 57.6-76.8-96 mg	$0 (0)	
m-dryl 12.5 mg/5 ml solution	$0 (0)	
meclizine 12.5 mg tablet (otc)	$0 (0)	
meclizine 12.5 mg tablet (rx)	$0 (0)	
meclizine 25 mg tablet (otc)	$0 (0)	

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table. 10/15/2026

Drug Name	Drug Tier	Requirements/Limits
meclizine 25 mg tablet (rx)	$0 (0)	
meclizine 25 mg tablet chew (otc)	$0 (0)	
medicated corn removers topical adhesive patch,medicated 40 %	$0 (0)	
medi-meclizine 25 mg tablet outer, f/c	$0 (0)	
mediplast corn-callus-wart pad 40 %	$0 (0)	
mediproxen 220 mg tablet	$0 (0)	
mega multi for men tablet high potency (rx) 200-175-250 mcg	$0 (0)	
mega multi for women tab 13.5-200-250 mg-mcg-mcg	$0 (0)	
mega multivit-chelated min tab	$0 (0)	
megavite caplet 18 mg iron-800 mcg-150 mg	$0 (0)	
megavite golden years caplet 800-150-25 mcg-mg-mg	$0 (0)	
melatonin 12 mg tablet	$0 (0)	
melatonin 5 mg tablet (rx)	$0 (0)	
men 50 plus multivitamin tab 300-60-600-300 mcg	$0 (0)	
men's 50 plus daily formula tb 400-20-370 mcg	$0 (0)	
men's 50 plus multivitamin tab 400-20-370 mcg	$0 (0)	
men's daily formula tablet (rx) 400-20-300 mcg	$0 (0)	
metamucil capsule 0.4 gram	$0 (0)	
metamucil fiber thin 2 gram, 2.5 gram	$0 (0)	
metamucil free powder 3 gram/7 gram	$0 (0)	

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table. 10/15/2026

Drug Name	Drug Tier	Requirements/Limits
metamucil packet gluten-free 3.4 gram	$0 (0)	
metamucil powder 3 gram/7 gram	$0 (0)	
methyl b-12 5,000 mcg chew tab	$0 (0)	
methyl salicylate 40% oil	$0 (0)	
methylfolate 1,700 mcg dfe cap	$0 (0)	
mgo-400 tablet 400 mg (241.3 mg magnesium)	$0 (0)	
mg-plus-protein tablet (rx) 133 mg	$0 (0)	
miconazole 2% vaginal cream	$0 (0)	
miconazole 3 combo pack 4 % (200 mg)- 2 % (9 gram)	$0 (0)	
miconazole 3 kit 3pref app w/crm+3wip 4 % (200 mg)- 2 % (9 gram)	$0 (0)	
miconazole 7 100 mg vag supp	$0 (0)	
miconazole 7 cream 2 %	$0 (0)	
micro elite replacement filter	$0 (0)	
microair mesh nebulizer	$0 (0)	
microchamber	$0 (0)	
microlife peak flow meter	$0 (0)	
microspacer for aerosol device	$0 (0)	
milk of magnesia suspension 400 mg/5 ml	$0 (0)	
milk of magnesia suspension 400 mg/5 ml	$0 (0)	
milltrium senior multivit tab	$0 (0)	
mineral oil enema	$0 (0)	
mini elite filter replacement	$0 (0)	
mini multivitamins-iron tablet 18-400 mg-mcg	$0 (0)	

Drug Name	Drug Tier	Requirements/Limits
mini plus nebulizer	$0 (0)	
mini wright peak flow meter afs, (30-400)	$0 (0)	
mini wright peak flow meter standard, (60-800)	$0 (0)	
mintox maximum str 30 ml cup ud, 50x30ml cups 400-400-40 mg/5 ml	$0 (0)	
mintox maximum strength susp max str, lemon creme 400-400-40 mg/5 ml	$0 (0)	
mintox plus tablet chewable 200-200-25 mg	$0 (0)	
monistat 3 4% cream 3 pref-applicators 200 mg/5 gram (4 %)	$0 (0)	
monistat maintain uti kit 99.5 mg	$0 (0)	
monocaps tablet (rx) 14 mg iron- 400 mcg	$0 (0)	
motion sickness 25 mg chew tab chewable tablet	$0 (0)	
motion sickness rlf 25 mg tab	$0 (0)	
motion-time 25 mg tablet chew	$0 (0)	
motrin ib 200 mg caplet	$0 (0)	
move it along 100 mg tablet	$0 (0)	
m-pap 160 mg/5 ml liquid	$0 (0)	
mucinex cold-flu hbp liq gel 325-200 mg	$0 (0)	
mucinex fast-max dm max liquid 5-100 mg/5 ml	$0 (0)	
mucinex fastmx kick cng-cgh lq 5-100 mg/5 ml	$0 (0)	
mucolyte 100 mg/5 ml liquid	$0 (0)	
mucolyte-dm 100-10 mg/5 ml liq 10-100 mg/5 ml	$0 (0)	

Drug Name	Drug Tier	Requirements/Limits
mucosa 400 mg tablet	$0 (0)	
mucosa dm 400-20 mg tablet 20-400 mg	$0 (0)	
mucus relief 400 mg tablet expectorant	$0 (0)	
mucus relief dm cough tablet 20-400 mg	$0 (0)	
mucus relief dm max liquid 5-100 mg/5 ml	$0 (0)	
mucus relief dm tablet 20-400 mg	$0 (0)	
multi complete-iron tablet 18-400 mg-mcg	$0 (0)	
multi for her tablet 18 mg iron-600 mcg-80 mcg	$0 (0)	
multi-day plus iron tablet 18-400 mg-mcg	$0 (0)	
multi-day plus minerals tablet 18 mg iron-400 mcg-25 mcg	$0 (0)	
multiple vitamin tablet 400 mcg	$0 (0)	
multiple vitamin w-minerals tb	$0 (0)	
multiple vitamins tablet one daily	$0 (0)	
multi-vitamin daily tablet (rx)	$0 (0)	
multivitamin liquid 9 mg iron/15 ml	$0 (0)	
multivitamin tablet (rx)	$0 (0)	
multivitamin with iron tablet (rx) 18-400 mg-mcg	$0 (0)	
multivitamin with minerals tab 15 mg iron	$0 (0)	
multivitamin women 50 plus tab 8 mg iron-400 mcg-50 mcg	$0 (0)	
multivitamin-mineral liquid 9 mg iron/15 ml	$0 (0)	
multivitamin-minerals tablet 7.5 mg iron-400 mcg	$0 (0)	
multivitamin-zinc-stress tab 500 mg-400 mcg- 23.9 mg-3 mg	$0 (0)	

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table. 10/15/2026

Drug Name	Drug Tier	Requirements/Limits
multi-vite liquid 15 ml cup 9 mg iron/ 15 ml (15 ml)	$0 (0)	
multivit-fluor 0.25 mg tab chw (rx)	$0 (0)	
multivit-fluor 0.25 mg/ml drop (rx)	$0 (0)	
multivit-fluor 0.5 mg tab chew (rx)	$0 (0)	
multivit-fluor 0.5 mg/ml drop (rx)	$0 (0)	
multivit-fluoride 1 mg tab chw (rx)	$0 (0)	
murine ear wax removal system 6.5 %	$0 (0)	
myferon 150 capsule 150 mg iron	$0 (0)	
mylanta maximum strength liq 400-400-40 mg/5 ml	$0 (0)	
mynephrocaps softgel 1 mg	$0 (0)	
mynephron capsule 1 mg	$0 (0)	
n.o.max er tablet 660 mg	$0 (0)	
n-acetyl tyrosine 350-5 mg cap	$0 (0)	
naloxone hcl 4 mg nasal spray (otc) 4 mg/actuation	$0 (0)	
naproxen sodium 220 mg tablet	$0 (0)	
naramin 12.5 mg oral solution 12.5 mg/5 ml	$0 (0)	
nasal mist 0.9% spray	$0 (0)	
nasal moisturizing 0.65% spray	$0 (0)	
nattokinase 50 mg capsule	$0 (0)	
natural fiber laxative capsule 0.52 gram	$0 (0)	
natural fiber powder smooth texture	$0 (0)	
natural fiber powder smooth texture	$0 (0)	
nauzene stomach-nausea tab chw 230 mg	$0 (0)	
navage portable nebulizer	$0 (0)	

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table. 10/15/2026

Drug Name	Drug Tier	Requirements/Limits
neb200 nebulizer	$0 (0)	
neosporin ointment packet outer 3.5-400-5,000 mg-unit-unit	$0 (0)	
neovite tablet 1-100-1 mg	$0 (0)	
nephro vitamins tablet 0.8 mg	$0 (0)	
nephronex-sl tablet 800-2,000 mcg-unit	$0 (0)	
nexcare all purpose mask	$0 (0)	
niacin 100 mg tablet (rx)	$0 (0)	
niacin 250 mg tablet (rx)	$0 (0)	
niacin 50 mg tablet (rx)	$0 (0)	
niacin 500 mg capsule sa (rx)	$0 (0)	
niacin 500 mg tablet (rx)	$0 (0)	
niacin tr 250 mg capsule (rx)	$0 (0)	
niacin tr 250 mg tablet (rx)	$0 (0)	
niacin tr 500 mg tablet (rx)	$0 (0)	
niavasc sr 500 mg tablet	$0 (0)	
nicadan tablet 800 mg-10 mg- 100 mg-500 mcg	$0 (0)	
nicazel forte tablet 700-500-8-12 mg-mcg-mg-mg	$0 (0)	
nicazel tablet 600-5-10-5-1.5 mg	$0 (0)	
nicorette 4 mg chewing gum white ice mint	$0 (0)	
nicotine 14 mg/24hr patch (otc)	$0 (0)	
nicotine 2 mg chewing gum	$0 (0)	
nicotine 2 mg chewing gum refill	$0 (0)	
nicotine 2 mg chewing gum starter kit w/cd	$0 (0)	
nicotine 21 mg/24hr patch (otc)	$0 (0)	

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table. 10/15/2026

Drug Name	Drug Tier	Requirements/Limits
nicotine 4 mg chewing gum original	$0 (0)	
nicotine 4 mg chewing gum original refill	$0 (0)	
nicotine 4 mg chewing gum original starter kit	$0 (0)	
nicotine 7 mg/24hr patch (otc)	$0 (0)	
night allergy rlf 25 mg caplet	$0 (0)	
night time cold-flu liquid multi-sympt, cherry 6.25-15-325 mg/15 ml	$0 (0)	
night time pain 25-500 mg cplt	$0 (0)	
nighttime sleep aid 25 mg cplt caplet	$0 (0)	
nitroval blue 3.7 % cream	$0 (0)	
nohist-dm liquid 4-10-15 mg/5 ml	$0 (0)	
non-aspirin 160 mg/5 ml susp children's	$0 (0)	
non-aspirin 325 mg tablet	$0 (0)	
non-aspirin 500 mg tablet	$0 (0)	
non-aspirin 80 mg tab chew children's	$0 (0)	
non-aspirin pm caplet 25-500 mg	$0 (0)	
nortemp 160 mg/5 ml susp	$0 (0)	
nose clip	$0 (0)	
nutralyn tablet 20 mg iron- 1,670 mcg dfe	$0 (0)	
nytol 25 mg quickcaps caplet	$0 (0)	
ocular vitamins tablet 7,160 unit- 113 mg-0.5 mg	$0 (0)	
ocutabs tablet (rx)	$0 (0)	
ocuvite eye plus multi tablet 200-15-150 mcg	$0 (0)	
olopatadine hcl 0.1% eye drops (otc)	$0 (0)	

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table. 10/15/2026

Drug Name	Drug Tier	Requirements/Limits
olopatadine hcl 0.1% eye drops (rx)	$0 (0)	
ombra compressor system	$0 (0)	
omega monopure 650 ec softgel 430-130-650 mg	$0 (0)	
omega monopure curcumin ec sfg 417 mg-120 mg- 276 mg-600 mg	$0 (0)	
omegapure 900-tg softgel 964-257-643 mg	$0 (0)	
omeprazole dr 20 mg tablet	$0 (0)	
omnicap tablet 0.4 mg	$0 (0)	
oncoplex 30 mg capsule	$0 (0)	
oncoplex es 100 mg capsule	$0 (0)	
one daily essential tablet (rx)	$0 (0)	
one daily essential tablet 0.5 mg, 400 mcg	$0 (0)	
one daily for men 50+ adv tab 400-600-120 mcg-mcg-mg	$0 (0)	
one daily for men tablet 0.4-600 mg-mcg	$0 (0)	
one daily for women 50+ adv tb w/ginkgo,50+advanced 400-120 mcg-mg	$0 (0)	
one daily for women tablet 18-0.4 mg	$0 (0)	
one daily healthy weight tab 200-18-0.4 mg	$0 (0)	
one daily maximum tablet (rx) 18-0.4 mg	$0 (0)	
one daily men's 50 plus d3 tab 400-20-370 mcg	$0 (0)	
one daily men's 50+ tablet 400-600-120 mcg-mcg-mg	$0 (0)	
one daily men's multivitamin 240 mcg-30 mcg- 300 mcg	$0 (0)	
one daily multivitamin tablet 400 mcg	$0 (0)	

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table. 10/15/2026

Drug Name	Drug Tier	Requirements/Limits
one daily multivitamin-iron tb 18-400 mg-mcg	$0 (0)	
one daily multivit-mineral tab 4.5 mg iron	$0 (0)	
one daily plus iron tablet (rx) 18-400 mg-mcg	$0 (0)	
one daily tablet 0.4-600 mg-mcg	$0 (0)	
one daily tablet 300-18-400-50 mg-mg-mcg-mg	$0 (0)	
one daily with minerals tablet (rx)	$0 (0)	
one daily womens 50 plus tab (rx) 0.4 mg	$0 (0)	
one daily women's multivitamin 18 mg iron-400 mcg-25 mcg	$0 (0)	
one way valved mouthpiece	$0 (0)	
one-a-day energy tablet 9 mg iron-400 mcg-200 mg	$0 (0)	
one-a-day essential tablet (rx)	$0 (0)	
one-a-day max formula tab	$0 (0)	
one-a-day menopause formula tb 400-60 mcg-mg	$0 (0)	
one-a-day men's 50 plus tablet 400-300-120 mcg-mcg-mg	$0 (0)	
one-a-day men's 50 plus tablet 400-370 mcg	$0 (0)	
one-a-day men's complete tab 240 mcg-30 mcg- 300 mcg	$0 (0)	
one-a-day men's pro edge tablt 0.4 mg	$0 (0)	
one-a-day men's tablet 400-20-300 mcg	$0 (0)	
one-a-day proactive 65 plus tb 200 mcg	$0 (0)	
one-a-day teen advantage tab 18-400 mg-mcg, 9 mg iron-400 mcg	$0 (0)	

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table. 10/15/2026

Drug Name	Drug Tier	Requirements/Limits
one-a-day triple immune tablet 400-370 mcg	$0 (0)	
one-a-day vitacraves omega-3 200-16 mcg-mg	$0 (0)	
one-a-day weightsmart tablet 200-18-0.4 mg	$0 (0)	
one-a-day women's 50 plus tab 0.4 mg	$0 (0)	
one-a-day women's complete tab 18 mg iron- 400 mcg	$0 (0)	
one-a-day women's healthy skin 18 mg iron-400 mcg-6 mg	$0 (0)	
one-a-day women's petites tab 9 mg iron-200 mcg	$0 (0)	
one-a-day women's tablet 18 mg iron- 400 mcg-180 mg	$0 (0)	
one-a-day women's tablet 18 mg iron-400 mcg-500 mg, 18 mg iron-400 mcg-500 mg ca	$0 (0)	
one-daily multi-vitamin tab (rx)	$0 (0)	
onelax 10 mg suppository	$0 (0)	
onelax docusate sod 50 mg/5 ml	$0 (0)	
onelax magnesium citrate soln outer	$0 (0)	
onelax senna 8.8 mg/5 ml syrup	$0 (0)	
onevite calcium 500 mg-d3 5 mcg 500 mg-5 mcg (200 unit)	$0 (0)	
onevite calcium 600 mg-d3 10 mcg 600 mg-10 mcg (400 unit)	$0 (0)	
onevite calcium 600 mg-d3 5 mcg 600 mg-5 mcg (200 unit)	$0 (0)	
onevite ferrous sulf 325 mg tb 325 mg (65 mg iron)	$0 (0)	

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table. 10/15/2026

Drug Name	Drug Tier	Requirements/Limits
onevite tablet 1-100-1 mg	$0 (0)	
optichamber adult mask-large	$0 (0)	
optichamber diamond vhc	$0 (0)	
optichamber diamond w-lrg mask	$0 (0)	
optichamber diamond w-med mask	$0 (0)	
optichamber diamond w-sml mask	$0 (0)	
optifiber lean 500 mg capsule	$0 (0)	
optimag plus calcium powder 600 mg calcium- 300 mg/scoop	$0 (0)	
ossopan 1100 capsule 275 mg calcium (1,100 mg)	$0 (0)	
ossopan md capsule 200 mg calcium- 1.25 mcg	$0 (0)	
osteo-vit3 1,250 mcg/3 ml drop	$0 (0)	
oysco 500-vit d3 200 tablet 500 mg-5 mcg (200 unit)	$0 (0)	
oyster shell 250 mg-d3 3.12 mcg 250 mg-3.125 mcg (125 unit)	$0 (0)	
oyster shell 250-vit d3 125 tb (rx) 250 mg-3.125 mcg (125 unit)	$0 (0)	
oyster shell 500 mg-vit d3 5 mcg (rx) 500 mg-5 mcg (200 unit)	$0 (0)	
oyster shell calcium 500 mg tb (rx) 500 mg calcium (1,250 mg)	$0 (0)	
oyster shell calcium 500 mg tb (rx) 500 mg calcium (1,250 mg)	$0 (0)	
oyster shell calcium 500 mg tb oyster shell (rx) 500 mg calcium (1,250 mg)	$0 (0)	

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table. 10/15/2026

Drug Name	Drug Tier	Requirements/Limits
oyster shell calcium-vit d tab p/f (rx) 500 mg-10 mcg (400 unit)	$0 (0)	
oystercal-d 500 mg-400 unit tb 500 mg-10 mcg (400 unit)	$0 (0)	
pain relief 160 mg/5 ml liquid	$0 (0)	
pain relief 325 mg tablet	$0 (0)	
pain relief 500 mg tablet extra strength	$0 (0)	
pain relief 500 mg tablet extra strength	$0 (0)	
pain relief pm 25-500 mg cplt caplet,ex-strength	$0 (0)	
pain relief pm gelcap 25-500 mg	$0 (0)	
pain reliever 325 mg tablet regular strength	$0 (0)	
pain reliever 500 mg tablet extra strength	$0 (0)	
pain reliever er 650 mg caplet 8 hour, caplet	$0 (0)	
pain reliever pm caplet 25-500 mg	$0 (0)	
panda mask large	$0 (0)	
panda mask medium	$0 (0)	
panda mask small	$0 (0)	
pari baby conversion kit	$0 (0)	
pari baby conversion kit	$0 (0)	
pari baby conversion kit	$0 (0)	
pari bubbles pedi aerosol mask	$0 (0)	
pari lc plus nebulizer kit reusable	$0 (0)	
pari lc plus nebulizer set	$0 (0)	
pari lc sprint nebulizer set	$0 (0)	
pari lc sprint sinus nebulizer	$0 (0)	
pari sinus aerosol system	$0 (0)	

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table. 10/15/2026

Drug Name	Drug Tier	Requirements/Limits
pari trek s combo pack	$0 (0)	
pari trek s compact compressor	$0 (0)	
pari trek s portable pwr kit	$0 (0)	
parvlex tablet 29 mg iron- 400 mcg	$0 (0)	
peak-air peak flow meter	$0 (0)	
pedia d-vite 400 unit/ml liq 10 mcg/ml (400 unit/ml)	$0 (0)	
pedia poly-vite with iron drop 11 mg iron/ml	$0 (0)	
pediatric bear nebulizer	$0 (0)	
pediatric comp-air compres neb	$0 (0)	
pediatric d-vite 10 mcg/ml liq 10 mcg/ml (400 unit/ml)	$0 (0)	
pediatric enema 9.5-3.5 gram/59 ml	$0 (0)	
pediatric medium mask	$0 (0)	
pediatric mouthpiece	$0 (0)	
pediatric panda mask	$0 (0)	
pediatric small mask	$0 (0)	
pediavance liquid stick apple, 10x120ml 5.3-2.35-4.15 meq	$0 (0)	
pediavance liquid stick grape, 10x120ml 5.3-2.35-4.15 meq	$0 (0)	
pepto-bismol 262 mg chew tab	$0 (0)	
pepto-bismol to-go 262 mg chew cherry flavor	$0 (0)	
personal best peak flow mtr	$0 (0)	
personal best peak flow mtr	$0 (0)	
pflex inspiratory trainer	$0 (0)	

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table. 10/15/2026

Drug Name	Drug Tier	Requirements/Limits
pharbechlor 4 mg tablet	$0 (0)	
pharbedryl 50 mg capsule	$0 (0)	
pharbetol 325 mg tablet	$0 (0)	
pharbetol 500 mg tablet	$0 (0)	
pharbinex-dm 400-20 mg tablet 20-400 mg	$0 (0)	
pharm choice poly-vit-iron drp 10 mg iron/ml	$0 (0)	
phazyme 500 mg softgel	$0 (0)	
phenazopyridine 100 mg tab	$0 (0)	
phenazopyridine 200 mg tab	$0 (0)	
phenazopyridine hcl 95 mg tab	$0 (0)	
phytomulti tablet 3-3-200 mg	$0 (0)	
piko 1 flow meter	$0 (0)	
pillow mask adult	$0 (0)	
pillow mask, pediatric	$0 (0)	
pillow mask-child	$0 (0)	
pinaway 50 mg/ml suspension	$0 (0)	
pink bismuth 262 mg tab chew	$0 (0)	
pinworm medicine 144 mg/ml 50 mg/ml	$0 (0)	
pocket chamber	$0 (0)	
pocket peak flow meter 12's	$0 (0)	
poly-iron 150 mg capsule 150 mg iron	$0 (0)	
polysaccharide iron 150 mg cap (rx) 150 mg iron	$0 (0)	
polysporin ointment packet 500-10,000 unit/gram	$0 (0)	

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table. 10/15/2026

Drug Name	Drug Tier	Requirements/Limits
polysporin(bacitracin base) topical ointment 500-10,000 unit/gram	$0 (0)	
poly-vi-flor gummy (arcofolin) oral tablet,chewable 0.5 mg	$0 (0)	
poly-vita with iron drops 10 mg/ml	$0 (0)	
povidone-iodine 10% soln pkt	$0 (0)	
povidone-iodine 10% solution	$0 (0)	
povidone-iodine 10% solution	$0 (0)	
prebiotic inulin-fos powder 3 gram/ 3.8gram (scoop)	$0 (0)	
preservision areds tablet 2,148 mcg-113 mg-45 mg-17.4mg	$0 (0)	
primeaire chamber	$0 (0)	
pro comfort spacer-adult mask	$0 (0)	
pro comfort spacer-child mask	$0 (0)	
pro comfort spacer-infant mask	$0 (0)	
pro-cal tablet 187.5-40-7.5 mg	$0 (0)	
procare compressor nebulizer	$0 (0)	
procare pediatric neb bear	$0 (0)	
procare pediatric neb dog	$0 (0)	
procare pediatric neb eagle	$0 (0)	
procare spacer with adult mask	$0 (0)	
procare spacer with child mask	$0 (0)	
procerv hp tablet 9 mg iron- 300 mcg-50 mcg	$0 (0)	
prochamber holding chamber	$0 (0)	
proctozone-b 10 mg suppository outer	$0 (0)	

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table. 10/15/2026

Drug Name	Drug Tier	Requirements/Limits
proctozone-gmax 2 gm supposit outer	$0 (0)	
prodigy mini-mist nebulizer	$0 (0)	
prolaxa 250 mg softgel	$0 (0)	
promethazine vc-codeine soln 6.25-5-10 mg/5 ml	$0 (0)	
promethazine-codeine solution 6.25-10 mg/5 ml	$0 (0)	
promethazine-codeine syrup 6.25-10 mg/5 ml	$0 (0)	
promethazine-dm 6.25-15 mg/5 ml solution	$0 (0)	
promethazine-dm 6.25-15 mg/5 ml syrup	$0 (0)	
promolaxin 100 mg tablet	$0 (0)	
proneb max compressor-lc plus	$0 (0)	
proneb max compressr-lc sprint	$0 (0)	
proneb ultra filter set	$0 (0)	
prorenal multivitamin tablet 8 mg iron-800 mcg-1,000 unit	$0 (0)	
prosight tablet 1,500 mcg-60 mg -13.5 mg	$0 (0)	
proteoxyme capsule 50 mg	$0 (0)	
pseudoephedrine 60 mg tablet (otc)	$0 (0)	
pseudoephedrine er 120 mg tab	$0 (0)	
psyllium fiber 0.52 g capsule 0.52 gram	$0 (0)	
psyllium fiber capsule 0.4 gram	$0 (0)	
pub allergy 12.5 mg/5 ml liq cherry flavor	$0 (0)	
pub children's allergy 1 mg/ml	$0 (0)	
pub children's profen ib susp berry flavor 100 mg/5 ml	$0 (0)	

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table. 10/15/2026

Drug Name	Drug Tier	Requirements/Limits
pub children's profenib susp bubble gum flavor 100 mg/5 ml	$0 (0)	
pub child's dibromm dm liquid 1-2.5-5 mg/5 ml	$0 (0)	
pub fiber capsule 0.52 gram	$0 (0)	
pub hemorrhoidal suppositories 0.25-3 %	$0 (0)	
pub inf profenib 50 mg/1.25 ml	$0 (0)	
pub multivitamin 50 plus tab	$0 (0)	
pub pink bismuth max str liq 525 mg/15 ml	$0 (0)	
pulmo-aide compact compressor compressor/nebulizer	$0 (0)	
pulmo-aide compressor-nebuliz 2 plug, disp nebuliz	$0 (0)	
pulmoneb lt compressor nebul	$0 (0)	
pure and gentle saline enema 19-7 gram/118 ml	$0 (0)	
pure comfort spacer-adult mask	$0 (0)	
pureair mini nebulizer	$0 (0)	
purecomfort peak flow mouthpce	$0 (0)	
purecomfort peak flow mtr adlt	$0 (0)	
purecomfort peak flow mtr chld	$0 (0)	
purevita folic acid 400 mcg tb	$0 (0)	
purevita magnesium oxide 400 mg 400 mg (241.3 mg magnesium)	$0 (0)	
purevita vitamin d3 25 mcg tab 25 mcg (1,000 unit)	$0 (0)	
pyridoxine 25 mg tablet (rx)	$0 (0)	
pyridoxine 250 mg tablet	$0 (0)	

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table. 10/15/2026

Drug Name	Drug Tier	Requirements/Limits
pyridoxine 50 mg tablet (rx)	$0 (0)	
qc adult tussin cf liquid 5-10-100 mg/5 ml	$0 (0)	
qc itch stopping 2% gel	$0 (0)	
qc laxative 8.6 mg tablet	$0 (0)	
qc non-aspirin 500 mg caplet caplet,ex-strength	$0 (0)	
qc rest simply 25 mg caplet	$0 (0)	
qc travel ease 25 mg chew tab	$0 (0)	
qc vegetable laxative 8.6 mg tb	$0 (0)	
q-gel mega 100 mg softgel 100-150 mg-unit	$0 (0)	
quake vibratory pep device	$0 (0)	
quercetin 500 mg capsule	$0 (0)	
quin b strong with c & zinc tb 500-400-15 mg-mcg-mg	$0 (0)	
quintabs-m iron free tablet 0.4 mg	$0 (0)	
quintabs-m tablet (rx) 10 mg iron-400 mcg	$0 (0)	
quit 2 mg chewing gum	$0 (0)	
quit 4 mg chewing gum	$0 (0)	
ra 2-in-1 laxative 8.6-50 mg tb	$0 (0)	
ra acetaminophen 500 mg gelcap gelcap, pain relief	$0 (0)	
ra antacid 500 mg chewable tab 215 mg calcium (500 mg)	$0 (0)	
ra antacid-antigas liquid 200-200-20 mg/5 ml	$0 (0)	
ra antifungal 1% cream	$0 (0)	
ra anti-itch gel extra strength 2 %	$0 (0)	
ra antiseptic 10% solution	$0 (0)	

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table. 10/15/2026

Drug Name	Drug Tier	Requirements/Limits
ra anti-tussive dm syrup 10-100 mg/5 ml	$0 (0)	
ra athenol 325 mg tablet	$0 (0)	
ra capsicum 0.025% hot patch	$0 (0)	
ra central-vite tablet 18 mg iron-400 mcg-25 mcg	$0 (0)	
ra cetiri-d er tablet 5-120 mg	$0 (0)	
ra child fever-pain 160 mg/5 ml	$0 (0)	
ra citrate of magnesia soln	$0 (0)	
ra col-rite 100 mg softgel	$0 (0)	
ra col-rite 250 mg softgel	$0 (0)	
ra complete allergy 25 mg cplt coated caplet	$0 (0)	
ra diphedryl 12.5 mg/5 ml liq	$0 (0)	
ra ear care tablet 200-100 mg	$0 (0)	
ra expectorant cough syrup 100 mg/5 ml	$0 (0)	
ra expectorant cough syrup 100 mg/5 ml	$0 (0)	
ra fever reducer-pain 160 mg/5 infant w/syr,d/f 160 mg/5 ml	$0 (0)	
ra hemorrhoidal h supp	$0 (0)	
ra hi-cal plus vitamin d tab (rx) 500 mg-5 mcg (200 unit)	$0 (0)	
ra lorata-d 24-hour tablet 10-240 mg	$0 (0)	
ra magnesium 250 mg tablet (rx)	$0 (0)	
ra niacin 500 mg tablet no flush (rx)	$0 (0)	
ra nighttime sleep gel softgel, max str 50 mg	$0 (0)	
ra non-aspirin 160 mg/5 ml children's,cherry	$0 (0)	
ra one daily energy tablet	$0 (0)	
ra one daily essential tablet (rx) 0.4 mg	$0 (0)	

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table. 10/15/2026

Drug Name	Drug Tier	Requirements/Limits
ra p-col rite tablet 8.6-50 mg	$0 (0)	
ra pink bismuth 262 mg/15 ml	$0 (0)	
ra saline 0.65% nose spray	$0 (0)	
ra sleep tablet 25 mg	$0 (0)	
ra tussin cough liquid d/f 10-100 mg/5 ml	$0 (0)	
ra wart remover 40 %	$0 (0)	
ready to use mineral oil enema	$0 (0)	
reese's pinworm 144 mg/ml susp 50 mg/ml	$0 (0)	
refenesen 400 mg tablet	$0 (0)	
refenesen dm caplet 20-400 mg	$0 (0)	
refresh lacri-lube ointment 56.8-42.5 %	$0 (0)	
regenemax plus capsule 5,000 mcg-100 mg-5 mg	$0 (0)	
reguloid capsule 0.4 gram	$0 (0)	
reguloid powder 3 gram/12 gram, 3 gram/7 gram	$0 (0)	
renal caps softgel 1 mg	$0 (0)	
renal vitamin tablet 0.8 mg	$0 (0)	
renal-vite tablet 0.8 mg	$0 (0)	
renaplex tablet 800 mcg- 12.5 mg	$0 (0)	
renaplex-d tablet 800 mcg-12.5 mg -2,000 unit	$0 (0)	
rena-vite rx tablet (rx) 1-60-300 mg-mg-mcg	$0 (0)	
rena-vite tablet (rx) 0.8 mg	$0 (0)	
reno caps softgel 1 mg	$0 (0)	
req49+ tablet 200-1.5-1.5 mcg-mg-mg	$0 (0)	
rescon-gg liquid 5-100 mg/5 ml	$0 (0)	

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table. 10/15/2026

Drug Name	Drug Tier	Requirements/Limits
retaine pm eye ointment 80-20 %	$0 (0)	
reusable nebulizer kit model-c900	$0 (0)	
riteflo spacer	$0 (0)	
robafen cf liquid multi-cld symptm 5-10-100 mg/5 ml	$0 (0)	
robafen dm cgh-chest cong syrp 10-100 mg/5 ml	$0 (0)	
robitussin cough-chest dm liq 5-100 mg/5 ml	$0 (0)	
robitussin elderberry max dm 5-100 mg/5 ml	$0 (0)	
robitussin honey max dm liquid 5-100 mg/5 ml	$0 (0)	
robitussin long-acting liq 1-7.5 mg/5 ml	$0 (0)	
rubber mouthpiece	$0 (0)	
rynex dm liquid gluten/f 1-2.5-5 mg/5 ml	$0 (0)	
rynex dm liquid prof use only 1-2.5-5 mg/5 ml	$0 (0)	
rynex pse liquid 1-15 mg/5 ml	$0 (0)	
s-acetyl glutathione 100 mg cp	$0 (0)	
safetussin dm 100-10 mg/5 ml 10-100 mg/5 ml	$0 (0)	
saline 0.65% nasal spray	$0 (0)	
saline 0.65% nose spray	$0 (0)	
saline mist 0.65% nose spry	$0 (0)	
sam-e dr 200 mg capsule	$0 (0)	
sam-e-tmg powder stick pack 400-600 mg	$0 (0)	
sami the seal compressor nebul w/accessories	$0 (0)	
sami the seal pediatric mask	$0 (0)	

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table. 10/15/2026

Drug Name	Drug Tier	Requirements/Limits
sami the seal replacemt filter	$0 (0)	
scot-tussin 100 mg/5 ml liq d/f,n,ksh	$0 (0)	
senexon-s 50-8.6 mg tablet 8.6-50 mg	$0 (0)	
senior tabs 0.4 mg-300 mcg- 250 mcg	$0 (0)	
senna 8.6 mg tablet (otc)	$0 (0)	
senna 8.8 mg/5 ml syrup	$0 (0)	
senna 8.8 mg/5 ml syrup	$0 (0)	
senna laxative 8.6 mg tablet	$0 (0)	
senna plus tablet 8.6-50 mg	$0 (0)	
senna-docusate sodium tablet 8.6-50 mg	$0 (0)	
senna-lax 8.6 mg tablet	$0 (0)	
senna-s 8.6-50 mg tablet	$0 (0)	
senna-time s tablet 8.6-50 mg	$0 (0)	
sennosides 8.6 mg tablet	$0 (0)	
sennosides-docusate sodium tab 8.6-50 mg	$0 (0)	
sentry senior multivitamin tab sodium/f,yeast/f (rx) 500-300-250 mcg	$0 (0)	
sentry senior tablet 0.4 mg-300 mcg- 250 mcg	$0 (0)	
sentry tablet 18-400 mg-mcg	$0 (0)	
shake that ache 500 mg caplet	$0 (0)	
siderol tablet	$0 (0)	
sidestream adult face mask	$0 (0)	
sidestream custom nebulizer	$0 (0)	
sidestream dispos nebulizer disposable	$0 (0)	
sidestream disposable mask (otc)	$0 (0)	

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table. 10/15/2026

Drug Name	Drug Tier	Requirements/Limits
sidestream nebulizer pediatric with mask & tubing	$0 (0)	
sidestream pediatric face mask	$0 (0)	
sidestream plus adult mask (rx)	$0 (0)	
sidestream plus nebulizer	$0 (0)	
sidestream reusable nebulizer with tubing	$0 (0)	
siladryl 12.5 mg/5 ml liquid	$0 (0)	
silicone mask-adult	$0 (0)	
silicone mask-adult breathrite chamber	$0 (0)	
silicone mask-infant	$0 (0)	
silicone mask-pediatric	$0 (0)	
silicone mask-pediatric for breathrite chamb	$0 (0)	
siltussin sa 100 mg/5 ml liquid cup	$0 (0)	
simethicone 80 mg tab chew anti gas	$0 (0)	
simply sleep 25 mg caplet	$0 (0)	
sintra-es 975 mg-232 mg tablet 975-232 mg	$0 (0)	
sinus 12 hour 120 mg caplet	$0 (0)	
sinustar reusable nebulizer	$0 (0)	
sleep aid 25 mg caplet nighttime	$0 (0)	
sleep aid 50 mg softgel	$0 (0)	
sleep ii 25 mg tablet	$0 (0)	
sleep tabs 25 mg tablet	$0 (0)	
slo-niacin 500 mg tablet (rx)	$0 (0)	
slow release iron 160 mg tab p/f,gluten-free (rx) 160 mg (50 mg iron)	$0 (0)	
sm antibiotic 500 unit/gm oint 500 unit/gram	$0 (0)	

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table. 10/15/2026

Drug Name	Drug Tier	Requirements/Limits
sm double antibiotic oint 500-10,000 unit/gram	$0 (0)	
sm ibuprofen ib 200 mg tablet	$0 (0)	
sm lorata-dine d 24hr tablet 10-240 mg	$0 (0)	
sm miconazole 7 100 mg vag sup	$0 (0)	
sm mucus relief cough liquid childrens 5-100 mg/5 ml	$0 (0)	
smartneb compressor nebulizer	$0 (0)	
smooth antacid 750 mg chew tab 300 mg (750 mg)	$0 (0)	
sodium bicarb 325 mg tablet	$0 (0)	
sodium bicarb 650 mg tablet	$0 (0)	
sodium chloride 1 gm tablet (otc)	$0 (0)	
sodium chloride 1 gm tablet (rx)	$0 (0)	
sodium fluoride 0.5 mg/ml drop (rx) 0.5 mg (1.1 mg sod.fluorid)/ml	$0 (0)	
solo tablet 400-80 mcg	$0 (0)	
sominex 25 mg tablet	$0 (0)	
soothe 262 mg chewable tablet	$0 (0)	
soothe 262 mg/15 ml suspension	$0 (0)	
soothe hydration 1.25% eye drp	$0 (0)	
soothe night time lub eye oint 80-20 %	$0 (0)	
soothe xp 1%-4.5% eye drops 1-4.5 %	$0 (0)	
soothe xp 1%-4.5% eye drops 1-4.5 %	$0 (0)	
sootheneb compressor nebulizer	$0 (0)	
sootheneb mesh nebulizer	$0 (0)	
sootheneb nbl100 adult mask	$0 (0)	

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table. 10/15/2026

Drug Name	Drug Tier	Requirements/Limits
sootheneb nbl100 child mask	$0 (0)	
sootheneb nbl100 med cup	$0 (0)	
sootheneb nbl100 mesh cap	$0 (0)	
soothing pureway-c 500 mg tab	$0 (0)	
sorbitol 70% solution (otc)	$0 (0)	
sorbitol 70% solution (rx)	$0 (0)	
sorbugen nr 150-15 mg/7.5 ml 10-100 mg/5 ml	$0 (0)	
sorbutuss liquid dye/f (otc) 10-100-85 mg/5 ml	$0 (0)	
st. joseph aspirin 81 mg chew	$0 (0)	
st. joseph aspirin ec 81 mg tb	$0 (0)	
stimulant laxative plus tablet 8.6-50 mg	$0 (0)	
stomach relief 262 mg chew tab	$0 (0)	
stomach relief 525 mg/15 ml	$0 (0)	
stomach relief 525 mg/30 ml 262 mg/15 ml	$0 (0)	
stomach relief max str liquid max-strength 525 mg/15 ml	$0 (0)	
stomach rlf 262 mg/15 ml susp original strength	$0 (0)	
stool softener 100 mg softgel	$0 (0)	
stool softener 100 mg tablet	$0 (0)	
stool softener 240 mg softgel softgel	$0 (0)	
stool softener 250 mg softgel	$0 (0)	
stool softener 50 mg/5 ml liq	$0 (0)	
stool softener 60 mg/15 ml syr	$0 (0)	
stool softener-laxative tablet 8.6-50 mg	$0 (0)	

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table. 10/15/2026

Drug Name	Drug Tier	Requirements/Limits
stool softener-stim lax tablet 8.6-50 mg	$0 (0)	
stress b with zinc tablet	$0 (0)	
stress formula tablet (rx)	$0 (0)	
stress formula with zinc tab (rx)	$0 (0)	
strive dual zone peak flow meter	$0 (0)	
strovite forte caplet 10-1 mg	$0 (0)	
strovite one caplet 1-1,000-15-5 mg-unit-mg-mg	$0 (0)	
stye lubricant eye ointment 57.7-31.9 %	$0 (0)	
sucrets sorethroat-cgh-dry loz 2-5-6 mg	$0 (0)	
sudogest 12 hour 120 mg caplet	$0 (0)	
sudogest 60 mg tablet	$0 (0)	
super antioxidant capsule p/f (rx)	$0 (0)	
super antioxidant softgel sftgl,n,p/f	$0 (0)	
super b with vit c capsule (rx)	$0 (0)	
super calcium 600 mg tablet 600 mg calcium (1,500 mg)	$0 (0)	
super daily d3 1,000 unit/drop 25 mcg/drop (1000 unit/drop)	$0 (0)	
super multiple-low iron tablet 400 mcg	$0 (0)	
super multivitamin tablet	$0 (0)	
super thera vite m tablet (rx)	$0 (0)	
surfak 240 mg softgel softgel	$0 (0)	
synovx recovery capsule 375-300-237.5 mg	$0 (0)	
systane complete pf 0.6% drop	$0 (0)	
systane contacts drops	$0 (0)	

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table. 10/15/2026

Drug Name	Drug Tier	Requirements/Limits
systane nighttime ophthalmic (eye) ointment 94-3 %	$0 (0)	
systane pro pf 0.6% eye drop	$0 (0)	
tab-a-vite tablet 400 mcg	$0 (0)	
tame the flame 500 mg chew tab 195 mg calcium (500 mg)	$0 (0)	
teeny tummy inf gas 20 mg/0.3 ml 40 mg/0.6 ml	$0 (0)	
terbinafine 1% cream antifungal	$0 (0)	
thera m plus tablet 9 mg iron-400 mcg	$0 (0)	
thera tablet 400 mcg	$0 (0)	
thera-gel 0.5% shampoo	$0 (0)	
theragran-m premier 50+ caplet 400-250-375 mcg	$0 (0)	
thera-m caplet caplet (rx) 27-0.4 mg	$0 (0)	
thera-m tablet 9 mg iron- 400 mcg-28 mcg	$0 (0)	
thera-m tablet w/beta carotene 9 mg iron-400 mcg	$0 (0)	
therapeutic-m caplet 19 mg iron- 400 mcg	$0 (0)	
therapeutic-m tablet 9 mg iron-400 mcg	$0 (0)	
thera-tabs caplet	$0 (0)	
theratrum complete 50 plus tab	$0 (0)	
theratrum complete 50 plus tab 0.4 mg-300 mcg- 250 mcg	$0 (0)	
theratrum complete tablet w/lutein, p/f (rx)	$0 (0)	
thera-vite max-m tablet outer 9 mg iron-400 mcg	$0 (0)	
therems multivitamin tablet 400 mcg	$0 (0)	

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table. 10/15/2026

Drug Name	Drug Tier	Requirements/Limits
therems-m tablet 9 mg iron-400 mcg	$0 (0)	
thiamine 100 mg tablet (rx)	$0 (0)	
thiamine 250 mg tablet (rx)	$0 (0)	
threshold imt trainer	$0 (0)	
threshold pep device	$0 (0)	
thrivite-19 oral tablet 29 mg iron-1 mg -25 mg	$0 (0)	
tolnaftate 1% powder	$0 (0)	
t-plus 0.5% therapeutic shmpoo	$0 (0)	
travel-ease 25 mg chew tablet	$0 (0)	
travel-ease 25 mg tablet	$0 (0)	
tri-buffered aspirin 325 mg tb	$0 (0)	
triphrocaps softgel softgel (rx) 1 mg	$0 (0)	
triple antibiotic ointment 3.5mg-400 unit-5,000 unit/gram	$0 (0)	
triple antibiotic ointment pkt outer (otc) 3.5-400-5,000 mg-unit-unit	$0 (0)	
tronvite tablet 1 mg-100 mg- 300 mcg	$0 (0)	
tropical liquid nutrition	$0 (0)	
truzone peak flow meter adult/pediatric	$0 (0)	
tum-ease antacid 500 mg chw tab 200 mg calcium (500 mg)	$0 (0)	
tusnel diabetic liquid 10-100 mg/5 ml	$0 (0)	
tusnel-ex 100 mg/5 ml liquid	$0 (0)	
tussin 100 mg/5 ml liquid	$0 (0)	
tussin 400 mg tablet	$0 (0)	

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table. 10/15/2026

Drug Name	Drug Tier	Requirements/Limits
tussin cf cough-cold liquid non-drowsy 5-10-100 mg/5 ml	$0 (0)	
tussin cf cough-cold syrup non-drowsy 5-10-100 mg/5 ml	$0 (0)	
tussin chest congestion liquid non-drowsy 100 mg/5 ml	$0 (0)	
tussin dm 10-100 mg/5 ml liq cup	$0 (0)	
tussin dm 400-20 mg tablet 20-400 mg	$0 (0)	
tussin dm 400-20 mg/20 ml liq 5-100 mg/5 ml	$0 (0)	
tussin dm clear 20-200 mg/10 ml 10-100 mg/5 ml	$0 (0)	
tussin dm clear syrup d/f 10-100 mg/5 ml	$0 (0)	
tussin dm liquid 10-100 mg/5 ml	$0 (0)	
tussin dm max 400-20 mg/20 ml lq 5-100 mg/5 ml	$0 (0)	
tussin dm max liquid 10-200 mg/5 ml	$0 (0)	
tussin dm syrup 10-100 mg/5 ml	$0 (0)	
tussin mucus-cong 200 mg/10 ml 100 mg/5 ml	$0 (0)	
udamin sp caplet (rx) 1,000 mcg- 320 mg	$0 (0)	
ultra freeda tablet 267 mcg	$0 (0)	
ultra freeda with iron tablet 6 mg iron-267 mcg	$0 (0)	
ultra fresh pm ointment	$0 (0)	
ultrasonic mini nebulizer	$0 (0)	
unisom 50 mg sleepgels	$0 (0)	
unisom simple slumbers gummy 2.5 mg	$0 (0)	

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table. 10/15/2026

Drug Name	Drug Tier	Requirements/Limits
urea 39.5% cream	$0 (0)	
urinary pain relief 95 mg tab	$0 (0)	
urinary pain relief 97.5 mg tb	$0 (0)	
urinary pain relief 99.5 mg tb	$0 (0)	
uristat ultra 99.5 mg tablet	$0 (0)	
uristat ultra 99.5 mg uti pak	$0 (0)	
uro-pain 95 mg tablet	$0 (0)	
uro-pain 99.5 mg tablet	$0 (0)	
vanacof liquid 1-30-12.5 mg/5 ml	$0 (0)	
vegetable lax-stool softnr tab 8.6-50 mg	$0 (0)	
vios aerosol delivery system	$0 (0)	
vios aerosol delivery system lc plus, pediatric	$0 (0)	
vios aerosol delivery system lc sprint, pediatric	$0 (0)	
vios aerosol delivery system lc sprint, standard	$0 (0)	
virt-caps softgel (rx) 1 mg	$0 (0)	
virtussin ac oral liquid 10-100 mg/5 ml	$0 (0)	
vision formula tablet 1,000 unit-60 mg-30 unit	$0 (0)	
vit c-rose hips 500 mg tablet (rx)	$0 (0)	
vit c-rose hips tr 1,000 mg (rx)	$0 (0)	
vitacel tablet 800-250-750 mcg	$0 (0)	
vitacore tablet 20 mg iron- 1,670 mcg dfe	$0 (0)	
vitalee tablet 0.4 mg	$0 (0)	
vitamin a 10,000 unit softgel (rx) 3,000 mcg (10,000 unit)	$0 (0)	

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table. 10/15/2026

Drug Name	Drug Tier	Requirements/Limits
vitamin a 3,000 mcg softgel (rx)	$0 (0)	
vitamin a 8,000 unit capsule (rx) 2,400 mcg	$0 (0)	
vitamin b complex-vit c cap (rx)	$0 (0)	
vitamin b complex-vitamin c tb (rx) 400 mcg	$0 (0)	
vitamin b-1 100 mg tablet (rx)	$0 (0)	
vitamin b-1 100 mg tablet (rx)	$0 (0)	
vitamin b-1 100 mg tablet (rx)	$0 (0)	
vitamin b-1 100 mg tablet	$0 (0)	
vitamin b-1 250 mg tablet (rx)	$0 (0)	
vitamin b-1 50 mg tablet (rx)	$0 (0)	
vitamin b-1 50 mg tablet gluten free (rx)	$0 (0)	
vitamin b-12 1,000 mcg tab sl	$0 (0)	
vitamin b-12 1,000 mcg tablet (rx)	$0 (0)	
vitamin b-12 1,000 mcg tablet (rx)	$0 (0)	
vitamin b-12 250 mcg tablet (rx)	$0 (0)	
vitamin b-12 250 mcg tablet (rx)	$0 (0)	
vitamin b12 500 mcg tablet (rx)	$0 (0)	
vitamin b-12 500 mcg tablet (rx)	$0 (0)	
vitamin b-12 500 mcg tablet	$0 (0)	
vitamin b-12 er 1,000 mcg tab (rx)	$0 (0)	
vitamin b-12 tr 1,000 mcg tab p/f (rx)	$0 (0)	
vitamin b-2 100 mg tablet	$0 (0)	
vitamin b-2 100 mg tablet p/f (rx)	$0 (0)	
vitamin b-6 100 mg tablet (rx)	$0 (0)	
vitamin b-6 100 mg tablet (rx)	$0 (0)	
vitamin b-6 25 mg tablet (rx)	$0 (0)	

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table. 10/15/2026

Drug Name	Drug Tier	Requirements/Limits
vitamin b-6 250 mg tablet (rx)	$0 (0)	
vitamin b-6 50 mg tablet (rx)	$0 (0)	
vitamin b-6 50 mg tablet (rx)	$0 (0)	
vitamin b-complex & c caplet p/f, caplet 400-500 mcg-mg	$0 (0)	
vitamin c 1,000 mg tablet (rx)	$0 (0)	
vitamin c 1,000 mg tablet n,caplet (rx)	$0 (0)	
vitamin c 100 mg tablet (rx)	$0 (0)	
vitamin c 250 mg tablet (rx)	$0 (0)	
vitamin c 250 mg tablet (rx)	$0 (0)	
vitamin c 250 mg tablet chew	$0 (0)	
vitamin c 250 mg tablet chew p/f (rx)	$0 (0)	
vitamin c 500 mg tablet (rx)	$0 (0)	
vitamin c 500 mg tablet (rx)	$0 (0)	
vitamin c 500 mg tablet chew (rx)	$0 (0)	
vitamin c 500 mg tablet chew (rx)	$0 (0)	
vitamin c 500 mg tablet chew (rx)	$0 (0)	
vitamin c 500 mg tablet chew	$0 (0)	
vitamin c 500 mg tablet chew	$0 (0)	
vitamin c tr 1,000 mg tablet timed release (rx)	$0 (0)	
vitamin c-rose hip 1,000 mg tb (rx)	$0 (0)	
vitamin d2 1.25 mg(50,000 unit) capsule	$0 (0)	
vitamin d2 1.25 mg(50,000 unit) softgel	$0 (0)	
vitamin d3 1,000 unit softgel (rx) 25 mcg (1,000 unit)	$0 (0)	

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table. 10/15/2026

Drug Name	Drug Tier	Requirements/Limits
vitamin d3 1,000 unit tablet (rx) 25 mcg (1,000 unit)	$0 (0)	
vitamin d3 10 mcg/ml drop (rx) 10 mcg/ml (400 unit/ml)	$0 (0)	
vitamin d3 2,000 unit softgel softgel (rx) 50 mcg (2,000 unit)	$0 (0)	
vitamin d3 25 mcg (1,000 unit) (rx)	$0 (0)	
vitamin d3 25 mcg tablet (rx) 25 mcg (1,000 unit)	$0 (0)	
vitamin d3 400 unit softgel (rx) 10 mcg (400 unit)	$0 (0)	
vitamin d3 400 unit softgel softgel (rx) 10 mcg (400 unit)	$0 (0)	
vitamin d3 400 unit tab chew (rx) 10 mcg (400 unit)	$0 (0)	
vitamin d3 400 unit tab chew vanilla 10 mcg (400 unit)	$0 (0)	
vitamin d3 400 unit tablet (rx) 10 mcg (400 unit)	$0 (0)	
vitamin d3 400 unit tablet 10 mcg (400 unit)	$0 (0)	
vitamin d3 50 mcg (2,000 unit)	$0 (0)	
vitamin d3 complete caplet 18 mg iron-800 mcg-150 mg	$0 (0)	
vitamin e 180 mg softgel (rx) 180 mg (400 unit)	$0 (0)	
vitamin e 400 unit softgel p/f,softgel (rx)	$0 (0)	
vitamin e 400 unit softgel softgel,100% natural (rx) 268 mg (400 unit)	$0 (0)	
vitamin k 100 mcg tablet	$0 (0)	

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table. 10/15/2026

Drug Name	Drug Tier	Requirements/Limits
vitamins a-d-e tablet 10,000-400 unit-unit	$0 (0)	
vitasure tablet 1 mg-100 mg- 300 mcg	$0 (0)	
vitatrum tablet 18-500-300-250 mg-mcg-mcg-mcg	$0 (0)	
vitrexyl caplet 1,000 mcg	$0 (0)	
vitrexyl plus iron caplet 27 mg iron- 1 mg	$0 (0)	
vitrum senior tablet f/f,p/f (rx)	$0 (0)	
vortex adult mask	$0 (0)	
vortex holding chamber	$0 (0)	
vortex holding chamber hri	$0 (0)	
vortex vhc frog child mask hri	$0 (0)	
vortex vhc ladybug toddler msk hri	$0 (0)	
vortex vhc pediatric med mask	$0 (0)	
vp-vite rx tablet 1-60-300 mg-mg-mcg	$0 (0)	
wal-act d cold & allergy tab 2.5-60 mg	$0 (0)	
wal-dram-2 25 mg tablet	$0 (0)	
wal-dryl allergy 12.5 mg/5 ml	$0 (0)	
wal-dryl allergy 25 mg minitab coated,gluten-free	$0 (0)	
wal-fex allergy 180 mg tablet	$0 (0)	
wal-fex allergy 60 mg tablet	$0 (0)	
wal-fex d 12 hour 60-120 tab 60-120 mg	$0 (0)	
wal-fex d 24 hour 180-240 tab allergy/congest 180-240 mg	$0 (0)	
wal-finate 4 mg tablet	$0 (0)	
wal-itin 10 mg tablet non-drowsy, 24 hr	$0 (0)	
wal-itin d 12 hour tablet 5-120 mg	$0 (0)	

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table. 10/15/2026

Drug Name	Drug Tier	Requirements/Limits
wal-itin d 24 hour tablet 10-240 mg	$0 (0)	
wal-mucil 0.52 g capsule 0.52 gram	$0 (0)	
wal-mucil 100% natural fiber 114 doses,orange 3.4 gram/5.8 gram	$0 (0)	
wal-mucil 100% natural fiber 180 doses,orange 3.4 gram/5.8 gram	$0 (0)	
wal-mucil 100% natural fiber 3.4 gram/7 gram	$0 (0)	
wal-mucil ntrl fiber lax powd 3.4 gram/12 gram	$0 (0)	
wal-phed 12 hour 120 mg caplet caplet, non-drowsy	$0 (0)	
wal-phed d er 120 mg tablet	$0 (0)	
wal-profen 200 mg caplet f/c, caplet	$0 (0)	
wal-profen 200 mg tablet f/c	$0 (0)	
wal-proxen 220 mg tablet	$0 (0)	
wal-som 50 mg softgel softgel	$0 (0)	
wal-sporin first aid ointment 500-10,000 unit/gram	$0 (0)	
wal-tap dm cold-cough elixir 1-2.5-5 mg/5 ml	$0 (0)	
wal-tussin cough-cold cf liq cherry 5-10-100 mg/5 ml	$0 (0)	
wal-zyr 0.025% eye drops 0.025 % (0.035 %)	$0 (0)	
wal-zyr 10 mg tablet	$0 (0)	
wal-zyr d tablet 12 hr 5-120 mg	$0 (0)	
wal-zyr solution 1 mg/ml	$0 (0)	
wart remover 17% gel maximum strength	$0 (0)	
wart remover 17% liquid	$0 (0)	

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table. 10/15/2026

Drug Name	Drug Tier	Requirements/Limits
wart remover 40% patch w/20 pads, medicated	$0 (0)	
wart remover clear strip 40 %	$0 (0)	
wescaps capsule 1 mg	$0 (0)	
willis the whale compressr neb	$0 (0)	
windmill trainer for mini wright pfm	$0 (0)	
wing tip tubing	$0 (0)	
womans laxative tablet 5 mg	$0 (0)	
women's 50 plus advanced mv tb 400-20 mcg	$0 (0)	
women's 50 plus daily formula (rx) 400 mcg-500 mg calcium-20 mcg	$0 (0)	
women's 50 plus multivit tab 400 mcg-500 mg calcium-20 mcg	$0 (0)	
women's daily formula caplet (rx) 18 mg iron-400 mcg-500 mg ca	$0 (0)	
women's daily formula caplet 27-0.4 mg	$0 (0)	
women's daily formula tablet 18 mg iron-400 mcg-500 mg	$0 (0)	
women's gentle lax ec 5 mg tab	$0 (0)	
women's laxative 5 mg tablet	$0 (0)	
women's multivitamin tablet 18 mg-400 mcg- 500 mg-50 mcg	$0 (0)	
xcellent a 3000 mcg capsule	$0 (0)	
xcellent c 750 mg-7.5 mg cap 750-7.5 mg	$0 (0)	
xcellent e softgel 33.5-125-25 mg	$0 (0)	
xvite tablet 1 mg-100 mg- 300 mcg	$0 (0)	

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table. 10/15/2026

Drug Name	Drug Tier	Requirements/Limits
xymodine 12,500 mcg capsule 7,500-5,000 mcg	$0 (0)	
yelets tablet 18-400 mg-mcg	$0 (0)	
zantac-360(famotidine) 10 mg tb	$0 (0)	
zinc 50 mg tablet (rx)	$0 (0)	
zinc 50 mg tablet (rx) 50 mg zinc (220 mg)	$0 (0)	
zinc chelated 50 mg tablet (rx)	$0 (0)	
zinc gluconate 50 mg tablet (rx)	$0 (0)	
zoo friends tablet chewable (rx)	$0 (0)	
zostrix 0.033% cream	$0 (0)	
zostrix hp 0.1% cream	$0 (0)	
zostrix-hp foot topical cream 0.1 %	$0 (0)	
zyncof 400-20 mg tablet 20-400 mg	$0 (0)	
RESPIRATORY AND ALLERGY		
ANTIHISTAMINE / ANTIALLERGENIC AGENTS		
cetirizine oral solution 1 mg/ml	$0 (1)	
cyproheptadine oral tablet 4 mg	$0 (3)	PA
desloratadine oral tablet 5 mg	$0 (1)	
epinephrine injection auto-injector 0.15 mg/0.3 ml, 0.3 mg/0.3 ml	$0 (1)	Only Epinephrine NDCs starting with 00093 and 49502 are covered; QL (4 EA per 30 days)
hydroxyzine hcl oral tablet 10 mg, 25 mg, 50 mg	$0 (3)	PA
hydroxyzine pamoate oral capsule 25 mg, 50 mg	$0 (3)	PA
levocetirizine oral solution 2.5 mg/5 ml	$0 (1)	

Drug Name	Drug Tier	Requirements/Limits
levocetirizine oral tablet 5 mg	$0 (1)	
promethazine oral syrup 6.25 mg/5 ml	$0 (3)	PA
promethazine oral tablet 12.5 mg, 25 mg, 50 mg	$0 (3)	PA
PULMONARY AGENTS		
acetylcysteine solution 100 mg/ml (10 %), 200 mg/ml (20 %)	$0 (1)	B/D
ADEMPAS ORAL TABLET 0.5 MG, 1 MG, 1.5 MG, 2 MG, 2.5 MG	$0 (5^)	PA; LA; QL (90 EA per 30 days)
ADVAIR HFA INHALATION HFA AEROSOL INHALER 115-21 MCG/ACTUATION, 230-21 MCG/ACTUATION, 45-21 MCG/ACTUATION	$0 (2)	QL (12 GM per 30 days)
AIRSUPRA INHALATION HFA AEROSOL INHALER 90-80 MCG/ACTUATION	$0 (2)	QL (32.1 GM per 30 days)
albuterol sulfate inhalation hfa aerosol inhaler 90 mcg/actuation	$0 (1)	8.5 gm inhaler; QL (17 GM per 30 days)
albuterol sulfate inhalation hfa aerosol inhaler 90 mcg/actuation (nda020503)	$0 (1)	6.7 gm inhaler; QL (13.4 GM per 30 days)
albuterol sulfate inhalation hfa aerosol inhaler 90 mcg/actuation (nda020983)	$0 (1)	18 gm inhaler; QL (36 GM per 30 days)
albuterol sulfate inhalation solution for nebulization 0.63 mg/3 ml, 1.25 mg/3 ml, 2.5 mg /3 ml (0.083 %), 2.5 mg/0.5 ml	$0 (1)	B/D
albuterol sulfate oral syrup 2 mg/5 ml	$0 (1)	
albuterol sulfate oral tablet 2 mg, 4 mg	$0 (1)	
ambrisentan oral tablet 10 mg, 5 mg	$0 (5^)	PA; LA; QL (30 EA per 30 days)
ANORO ELLIPTA INHALATION BLISTER WITH DEVICE 62.5-25 MCG/ACTUATION	$0 (2)	QL (60 EA per 30 days)

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table. 10/15/2026

Drug Name	Drug Tier	Requirements/Limits
arformoterol inhalation solution for nebulization 15 mcg/2 ml	$0 (3)	B/D; QL (120 ML per 30 days)
ARNUITY ELLIPTA INHALATION BLISTER WITH DEVICE 100 MCG/ACTUATION, 200 MCG/ACTUATION, 50 MCG/ACTUATION	$0 (2)	QL (30 EA per 30 days)
ATROVENT HFA INHALATION HFA AEROSOL INHALER 17 MCG/ACTUATION	$0 (3)	QL (25.8 GM per 30 days)
BEVESPI AEROSPHERE INHALATION HFA AEROSOL INHALER 9-4.8 MCG	$0 (2)	QL (10.7 GM per 30 days)
bosentan oral tablet 125 mg, 62.5 mg	$0 (5^)	PA; LA; QL (60 EA per 30 days)
BREO ELLIPTA INHALATION BLISTER WITH DEVICE 100-25 MCG/DOSE, 200-25 MCG/DOSE, 50-25 MCG/DOSE	$0 (2)	QL (60 EA per 30 days)
breyna inhalation hfa aerosol inhaler 160-4.5 mcg/actuation, 80-4.5 mcg/actuation	$0 (2)	Breyna is generic for Symbicort; QL (30.9 GM per 30 days)
BREZTRI AEROSPHERE INHALATION HFA AEROSOL INHALER 160-18-4.8 MCG/ACTUATION, 160-9-4.8 MCG/ACTUATION	$0 (2)	QL (10.7 GM per 30 days)
budesonide inhalation suspension for nebulization 0.25 mg/2 ml, 0.5 mg/2 ml	$0 (3)	B/D; QL (120 ML per 30 days)
COMBIVENT RESPIMAT INHALATION MIST 20-100 MCG/ACTUATION	$0 (2)	QL (8 GM per 30 days)
cromolyn inhalation solution for nebulization 20 mg/2 ml	$0 (2)	B/D
FASENRA PEN SUBCUTANEOUS AUTO-INJECTOR 30 MG/ML	$0 (5^)	PA; QL (1 ML per 28 days)

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table. 10/15/2026

Drug Name	Drug Tier	Requirements/Limits
FASENRA SUBCUTANEOUS SYRINGE 10 MG/0.5 ML	$0 (5^)	PA; QL (0.5 ML per 28 days)
FASENRA SUBCUTANEOUS SYRINGE 30 MG/ML	$0 (5^)	PA; QL (1 ML per 28 days)
flunisolide nasal spray,non-aerosol 25 mcg (0.025 %)	$0 (1)	QL (50 ML per 30 days)
FLUTICASONE FUROATE-VILANTEROL INHALATION BLISTER WITH DEVICE 100-25 MCG/DOSE, 200-25 MCG/DOSE	$0 (2)	QL (60 EA per 30 days)
fluticasone propionate nasal spray,suspension 50 mcg/actuation	$0 (1)	QL (16 GM per 30 days)
fluticasone propion-salmeterol inhalation blister with device 100-50 mcg/dose, 250-50 mcg/dose, 500-50 mcg/dose	$0 (1)	QL (60 EA per 30 days)
formoterol fumarate inhalation solution for nebulization 20 mcg/2 ml	$0 (3)	B/D; QL (120 ML per 30 days)
HAEGARDA SUBCUTANEOUS RECON SOLN 2,000 UNIT	$0 (5^)	PA; LA; QL (30 EA per 30 days)
HAEGARDA SUBCUTANEOUS RECON SOLN 3,000 UNIT	$0 (5^)	PA; LA; QL (20 EA per 30 days)
icatibant subcutaneous syringe 30 mg/3 ml	$0 (5^)	PA; QL (27 ML per 30 days)
INCRUSE ELLIPTA INHALATION BLISTER WITH DEVICE 62.5 MCG/ACTUATION	$0 (2)	QL (30 EA per 30 days)
ipratropium bromide inhalation solution 0.02 %	$0 (1)	B/D
ipratropium-albuterol inhalation solution for nebulization 0.5 mg-3 mg(2.5 mg base)/3 ml	$0 (1)	B/D

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table. 10/15/2026

Drug Name	Drug Tier	Requirements/Limits
levalbuterol hcl inhalation solution for nebulization 0.31 mg/3 ml, 0.63 mg/3 ml, 1.25 mg/0.5 ml, 1.25 mg/3 ml	$0 (1)	B/D
mometasone nasal spray,non-aerosol 50 mcg/actuation	$0 (1)	QL (34 GM per 30 days)
montelukast oral granules in packet 4 mg	$0 (1)	
montelukast oral tablet 10 mg	$0 (1)	
montelukast oral tablet,chewable 4 mg, 5 mg	$0 (1)	
nintedanib oral capsule 100 mg, 150 mg	$0 (5^)	PA; QL (60 EA per 30 days)
NUCALA SUBCUTANEOUS AUTO-INJECTOR 100 MG/ML	$0 (5^)	PA; LA; QL (3 ML per 28 days)
NUCALA SUBCUTANEOUS RECON SOLN 100 MG	$0 (5^)	PA; LA; QL (3 EA per 28 days)
NUCALA SUBCUTANEOUS SYRINGE 100 MG/ML	$0 (5^)	PA; LA; QL (3 ML per 28 days)
NUCALA SUBCUTANEOUS SYRINGE 40 MG/0.4 ML	$0 (5^)	PA; LA; QL (0.4 ML per 28 days)
OFEV ORAL CAPSULE 100 MG, 150 MG	$0 (5^)	PA; QL (60 EA per 30 days)
pirfenidone oral tablet 267 mg	$0 (5^)	PA; QL (270 EA per 30 days)
pirfenidone oral tablet 801 mg	$0 (5^)	PA; QL (90 EA per 30 days)
PULMOZYME INHALATION SOLUTION 1 MG/ML	$0 (5^)	B/D
roflumilast oral tablet 250 mcg, 500 mcg	$0 (1)	QL (30 EA per 30 days)
SEREVENT DISKUS INHALATION BLISTER WITH DEVICE 50 MCG/DOSE	$0 (2)	QL (60 EA per 30 days)
sildenafil (pulm.hypertension) oral tablet 20 mg	$0 (1)	PA; generic for Revatio; QL (90 EA per 30 days)

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table. 10/15/2026

Drug Name	Drug Tier	Requirements/Limits
SPIRIVA RESPIMAT INHALATION MIST 1.25 MCG/ACTUATION, 2.5 MCG/ACTUATION	$0 (3)	QL (4 GM per 30 days)
tadalafil (pulm. hypertension) oral tablet 20 mg	$0 (3)	PA; generic for Adcirca; QL (60 EA per 30 days)
terbutaline oral tablet 2.5 mg, 5 mg	$0 (1)	
THEO-24 ORAL CAPSULE,EXTENDED RELEASE 24HR 100 MG, 200 MG, 300 MG, 400 MG	$0 (3)	
theophylline oral solution 80 mg/15 ml	$0 (1)	
theophylline oral tablet extended release 12 hr 100 mg, 200 mg, 300 mg, 450 mg	$0 (1)	
theophylline oral tablet extended release 24 hr 400 mg, 600 mg	$0 (1)	
TRELEGY ELLIPTA INHALATION BLISTER WITH DEVICE 100-62.5-25 MCG, 200-62.5-25 MCG	$0 (2)	QL (60 EA per 30 days)
TRIKAFTA ORAL GRANULES IN PACKET, SEQUENTIAL 100-50-75MG (D) /75 MG (N), 80-40-60 MG (D) /59.5 MG (N)	$0 (5^)	PA; QL (56 EA per 28 days)
TRIKAFTA ORAL TABLETS, SEQUENTIAL 100-50-75 MG(D) /150 MG (N), 50-25-37.5 MG (D)/75 MG (N)	$0 (5^)	PA; QL (84 EA per 28 days)
WINREVAIR SUBCUTANEOUS KIT 120 MG (60 MG X 2), 45 MG, 60 MG, 90 MG (45 MG X 2)	$0 (5^)	PA; QL (1 EA per 21 days)
XOLAIR SUBCUTANEOUS AUTO-INJECTOR 150 MG/ML, 300 MG/2 ML	$0 (5^)	PA; LA; QL (8 ML per 28 days)
XOLAIR SUBCUTANEOUS AUTO-INJECTOR 75 MG/0.5 ML	$0 (5^)	PA; LA; QL (1 ML per 28 days)
XOLAIR SUBCUTANEOUS RECON SOLN 150 MG	$0 (5^)	PA; LA; QL (8 EA per 28 days)

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table. 10/15/2026

Drug Name	Drug Tier	Requirements/Limits
XOLAIR SUBCUTANEOUS SYRINGE 150 MG/ML, 300 MG/2 ML	$0 (5^)	PA; LA; QL (8 ML per 28 days)
XOLAIR SUBCUTANEOUS SYRINGE 75 MG/0.5 ML	$0 (5^)	PA; LA; QL (1 ML per 28 days)
zafirlukast oral tablet 10 mg, 20 mg	$0 (1)	
UROLOGICALS		
ANTICHOLINERGICS / ANTISPASMODICS		
mirabegron oral tablet extended release 24 hr 25 mg, 50 mg	$0 (2)	QL (30 EA per 30 days)
oxybutynin chloride oral syrup 5 mg/5 ml	$0 (1)	QL (600 ML per 30 days)
oxybutynin chloride oral tablet 5 mg	$0 (1)	QL (120 EA per 30 days)
oxybutynin chloride oral tablet extended release 24hr 10 mg, 15 mg	$0 (3)	QL (60 EA per 30 days)
oxybutynin chloride oral tablet extended release 24hr 5 mg	$0 (3)	QL (30 EA per 30 days)
solifenacin oral tablet 10 mg, 5 mg	$0 (3)	QL (30 EA per 30 days)
tolterodine oral capsule,extended release 24hr 2 mg, 4 mg	$0 (3)	QL (30 EA per 30 days)
tolterodine oral tablet 1 mg, 2 mg	$0 (3)	QL (60 EA per 30 days)
trospium oral capsule,extended release 24hr 60 mg	$0 (3)	QL (30 EA per 30 days)
trospium oral tablet 20 mg	$0 (3)	QL (60 EA per 30 days)
BENIGN PROSTATIC HYPERPLASIA(BPH) THERAPY		
alfuzosin oral tablet extended release 24 hr 10 mg	$0 (1)	
dutasteride oral capsule 0.5 mg	$0 (1)	

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table. 10/15/2026

Drug Name	Drug Tier	Requirements/Limits
dutasteride-tamsulosin oral capsule, er multiphase 24 hr 0.5-0.4 mg	$0 (1)	
finasteride oral tablet 5 mg	$0 (1)	
tamsulosin oral capsule 0.4 mg	$0 (1)	
MISCELLANEOUS UROLOGICALS		
bethanechol chloride oral tablet 10 mg, 25 mg, 5 mg, 50 mg	$0 (1)	
CYSTAGON ORAL CAPSULE 150 MG, 50 MG	$0 (3)	PA; LA
ELMIRON ORAL CAPSULE 100 MG	$0 (3)	
potassium citrate oral tablet extended release 10 meq (1,080 mg), 15 meq, 5 meq (540 mg)	$0 (1)	
tadalafil oral tablet 2.5 mg	$0 (3)	PA; QL (60 EA per 30 days)
tadalafil oral tablet 5 mg	$0 (3)	PA; QL (30 EA per 30 days)
VITAMINS, HEMATINICS / ELECTROLYTES		
ELECTROLYTES		
calcium acetate(phosphat bind) oral capsule 667 mg	$0 (2)	PA
calcium acetate(phosphat bind) oral tablet 667 mg	$0 (2)	PA
klor-con 10 oral tablet extended release 10 meq	$0 (1)	
klor-con 8 oral tablet extended release 8 meq	$0 (1)	
klor-con m10 oral tablet,er particles/crystals 10 meq	$0 (1)	
klor-con m15 oral tablet,er particles/crystals 15 meq	$0 (1)	

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table. 10/15/2026

Drug Name	Drug Tier	Requirements/Limits
klor-con m20 oral tablet,er particles/crystals 20 meq	$0 (1)	
klor-con oral packet 20 meq	$0 (1)	
magnesium sulfate injection solution 500 mg/ml (50 %)	$0 (3)	
magnesium sulfate injection syringe 500 mg/ml (50 %)	$0 (3)	
potassium chlorid-d5-0.45%nacl intravenous parenteral solution 10 meq/l, 20 meq/l, 40 meq/l	$0 (1)	
potassium chloride in 0.9%nacl intravenous parenteral solution 20 meq/l, 40 meq/l	$0 (1)	
potassium chloride intravenous solution 2 meq/ml, 2 meq/ml (20 ml)	$0 (1)	
potassium chloride oral capsule, extended release 10 meq, 8 meq	$0 (1)	
potassium chloride oral liquid 20 meq/15 ml, 40 meq/15 ml	$0 (1)	
potassium chloride oral packet 20 meq	$0 (1)	
potassium chloride oral tablet extended release 10 meq, 20 meq, 8 meq	$0 (1)	
potassium chloride oral tablet,er particles/crystals 10 meq, 15 meq, 20 meq	$0 (1)	
potassium chloride-0.45 % nacl intravenous parenteral solution 20 meq/l	$0 (1)	
sodium chloride 0.45 % intravenous parenteral solution 0.45 %	$0 (1)	
sodium chloride 3 % hypertonic intravenous parenteral solution 3 %	$0 (1)	

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table. 10/15/2026

Drug Name	Drug Tier	Requirements/Limits
sodium chloride 5 % hypertonic intravenous parenteral solution 5 %	$0 (1)	
MISCELLANEOUS NUTRITION PRODUCTS		
electrolyte-a intravenous parenteral solution	$0 (1)	
PLENAMINE INTRAVENOUS PARENTERAL SOLUTION 15 %	$0 (3)	B/D
premasol 10 % intravenous parenteral solution 10 %	$0 (3)	B/D
travasol 10 % intravenous parenteral solution 10 %	$0 (3)	B/D
TROPHAMINE 10 % INTRAVENOUS PARENTERAL SOLUTION 10 %	$0 (3)	B/D
VITAMINS / HEMATINICS		
fluoride (sodium) oral tablet 1 mg (2.2 mg sod. fluoride)	$0 (1)	
prenatal vitamin plus low iron oral tablet 27 mg iron- 1 mg	$0 (1)	

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table. 10/15/2026

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table. 10/15/2026

12 hour decongestant 118
12 hour nasal decongest (pse)..... 118
24 hour allergy relief.. 118
24hour allergy..... 119
24hr allergy-congestion relief.....119
2-in-1 laxative.....181
5-hydroxytryptophan (5-htp)..... 119
8 hour pain reliever.... 119
8hr muscle aches-pain 139
a thru z..... 119
a thru z advanced formula.....119
a thru z high potency..119
a thru z select..... 119
a thru z select 50plus formula.....119
a thru z select women's.....119
a.i.r.s. nebulizer replacement..... 119
abacavir.....4
abacavir-lamivudine.....4
abc complete senior 50 plus..... 119
abc complete senior men's.....119
abc complete senior women's.....120
abc complete women's 120
abc plus..... 120
abigale.....105
abigale lo.....105
ABILIFY ASIMTUFII.....48
ABILIFY MAINTENA.....48
abiraterone.....18
abirtega.....18
ABRYSVO (PF)..... 97
acamprosate..... 79
acarbose.....84
accutane.....74
ace aerosol cloud enhancer..... 120
acebutolol.....61
acerola c-500.....120
acetadryl.....120
acetaminophen..... 120
acetaminophen extra strength.....147
acetaminophen pain relief..... 181
acetaminophen pm.... 120
acetaminophen pm extra str..... 121
acetaminophen-codeine..... 45
acetazolamide..... 116
acetic acid.....83
acetylcysteine.....201
acetyltyrosine-vitamin b6..... 168
acid controller..... 121
acid gone antacid e.strength.....121
acid reducer (famotidine)..... 121
acitretin..... 72
acne medication.....121
ACTHIB (PF)..... 97
actiflovit..... 121
ACTIMMUNE..... 96
acyclovir..... 4
acyclovir sodium.....4
ADACEL(TDAP ADOLESN/ADULT)(PF).. 97
ADALIMUMAB-AATY.. 103
ADALIMUMAB-AATY(CF) AI CROHNS..104
ADALIMUMAB-ADBM.104
adapalene.....74
addaprin..... 121
adefovir..... 4
ADEMPAS..... 201
adult aerosol mask..... 121
adult aspirin regimen. 128
adult disposable mouthpiece..... 121
adult robitussin peak cold m-s.....121
adult tussin cf..... 152, 181
adult tussin chest congestion.....152
adult tussin cough congest dm.....157
adult tussin dm.....157
adult tussin multi-symp cold..... 121
adult wal-tussin.....121
adult wal-tussin dm max.....121
adults 50 plus..... 121
adults' daily formula...121

adults multivitamin.... 122
ADVAIR HFA.....201
advanced antacid-antigas..... 122, 155
advanced herbals ginger..... 122
aerobika oscillating pep systm..... 122
aerochamber mechanical vent..... 122
aerochamber mini..... 122
aerochamber mv..... 122
aerochamber plus flow-vu..... 122
aerochamber plus flow-vu,l msk..... 122
aerochamber plus flow-vu,m msk.....122
aerochamber plus flow-vu,s msk..... 122
aerochamber plus z stat..... 122
aerochamber plus z stat lg msk..... 122
aerochamber plus z stat md msk.....122
aerochamber plus z stat sm msk..... 122
aerochamber z-stat plus-flw sg..... 122
aerochamber2go.....122
aeroeclipse ii nebulizer 122
aeroeclipse xl nebulizer.....122
aeroneb go..... 122, 123
aeroneb go nebulizer. 123
aerotrach plus..... 123
aerovent plus..... 123
aflora..... 123
AIMOVIG AUTOINJECTOR.....42
air tube with air plugs 123
airborne natural energy..... 123
airs adult aerosol mask 123
airs disposable nebulizer.....123
airs pediatric disposable mask..... 123
AIRSUPRA..... 201
airzone peak flow meter.....123
AKEEGA.....18
ala-cort..... 77
alamax cr..... 123
alamax protect..... 123
alavert..... 123
alavert d-12 allergy-sinus..... 123
alaway..... 123
albendazole..... 11
albuterol sulfate..... 201
alclometasone..... 77
alcohol pads..... 84
ALECENSA.....18
alendronate..... 102, 103
alfuzosin..... 206
algae based calcium... 123
aliskiren..... 61
alive diabetic multivitamin..... 123
alive max potency..... 123
alive men's 50 plus mv (vit k)..... 123
alive premium prenatal.....124
alive women 50 pls ult potency..... 124
alive women's energy.124
alive women's ultra potency..... 124
alka-seltzer heartburn chew.....124
alka-seltzer plus allergy.....124
all day allergy (cetirizine)..... 124, 135
all day allergy-d..... 124
all day pain relief..... 124
all day relief.....124
all flow 1000 kit..... 124
all flow 1000 pft filter. 124
all flow 3000 kit..... 124
all flow 3000 pft filter. 124
all flow 4000 kit..... 124
all flow 4000 pft filter. 124
all flow 5000 kit..... 124
all flow 5000 pft filter. 124
all flow 6000 pft filter. 124
allegra-d 12 hour..... 124
aller-chlor..... 124
allerclear.....125
allerclear d-12hr..... 125
allerclear d-24hr..... 125
aller-ease.....155

aller-fex..... 125
aller-flo..... 125
aller-g-time..... 125
allergy..... 125
allergy (chlorpheniramine).... 125
allergy (diphenhydramine) 125, 179
allergy and congestion relief..... 126
allergy complete-d..... 125
allergy d-12..... 118
allergy eye (ketotifen) 139
allergy medicine..... 125
allergy relief (cetirizine)..... 125, 147
allergy relief (fexofenadine).... 125, 126
allergy relief (fluticasone)..... 125
allergy relief (loratadine).....125, 139
allergy relief d12.....125
allergy relief d-24hr.... 125
allergy relief(chlorpheniramn) 125
allergy relief(diphenhydramin)..... 125
allergy relief,nasal decongest..... 125
allergy relief-d (cetirizine)..... 125
allergy relief-d (loratadine)..... 125
allergy relief-d(fexofenadine)..... 139
allergy-congest relief-d(fexo)..... 152
allergy-congestion relief-d..... 126
allergy-hives relief..... 139
allergy-time..... 126
aller-tec..... 126
aller-tec d..... 126
all-in-one nebulizer system..... 126
allopurinol..... 102
almacone-2..... 126
alophen (bisacodyl).... 126
alosetron..... 92
alpha lipoic acid..... 126
ALPHAGAN P..... 118
alprazolam.....48, 49
altamist..... 126
altavera (28)..... 108
altera nebulizer handset..... 126
altera nebulizer system..... 126
altituss..... 126
aluminum hydroxide gel..... 126
alum-mag hydroxide-simeth..... 126
ALUNBRIG..... 18
alyacen 1/35 (28)..... 108
amantadine hcl..... 4
ambrisentan..... 201
amikacin..... 11
amiloride..... 61
amiloride-hydrochlorothiazide..... 61
aminofen..... 126
amiodarone..... 60
amitriptyline..... 49
amlactin..... 126
amlodipine..... 61
amlodipine-atorvastatin..... 69
amlodipine-benazepril.. 61
amlodipine-olmesartan..... 61
amlodipine-valsartan... 61
amlodipine-valsartan-hcthiazid..... 61
ammonium lactate..... 73
ammonium lactate 126, 127
amnesteem..... 75
amoxapine..... 49
amoxicillin..... 14
amoxicillin-pot clavulanate..... 15
amphotericin b..... 3
amphotericin b liposome..... 3
ampicillin..... 15
ampicillin sodium..... 15
ampicillin-sulbactam.... 15
anagrelide..... 79
anastrozole..... 19
animal chews..... 127
ANORO ELLIPTA..... 201
antacid..... 147

antacid (calcium carbonate)..... 127, 181
antacid anti-gas.. 127, 181
antacid calcium..... 127
antacid exst (mag carb-al hyd)..... 127
antacid ext str (calcium carb)..... 127
antacid liquid..... 127
antacid m..... 127
antacid maximum strength..... 127
antacid plus anti-gas.. 127
antacid regular strength..... 127
antacid-antigas..... 127
antibiotic (bacitracin zinc)..... 152, 186
antibiotic (neomy-bacit-polym)..... 140
anti-diarrheal..... 140
antifungal (terbinafine)..... 181
anti-itch (diphenhydramine)..... 181
antioxidant a/c/e/selenium..... 189
antioxidant formula (selenium)..... 128
antiseptic..... 181
antiseptic skin clnsr(chlorhe)..... 128
antitussive dm..... 182
aphen..... 128
apraclonidine..... 118
aprepitant..... 92
apri..... 108
aprodine..... 128
APTIVUS..... 4
aranelle (28)..... 108
ARCALYST..... 96
AREXVY (PF)..... 98
arformoterol..... 202
ARIKAYCE..... 11
aripiprazole..... 49
ARISTADA..... 49
ARISTADA INITIO..... 49
armodafinil..... 49
ARNUITY ELLIPTA..... 202
arthritis pain relief (acetam)..... 128
arthritis pain relief(capsaic)..... 128
arthritis pain reliever.. 128
artificial eye lubricant. 128
artificial tear(dxtrn-hpm-gly)..... 128
artificial tears (pf)..... 128
artificial tears(dext70-hypro)..... 128
ascorbic acid (vitamin c)..... 128, 195
ascorbic acid-ascorbate sodium..... 195
asenapine maleate..... 50
ashlyna..... 108
aspirin..... 128
aspirin childrens..... 135
aspirin,buffd-calcium carb-mag..... 131
aspirin-dipyridamole.... 67
ASSURE ID INSULIN SAFETY..... 102
asthma check meter... 128
atazanavir..... 4
atenolol..... 61
atenolol-chlorthalidone..... 61
athenol..... 182
athlete's foot (terbinafine)..... 128
atomoxetine..... 50
atorvastatin..... 69
atovaquone..... 11
atovaquone-proguanil.. 11
atropine..... 115
ATROVENT HFA..... 202
aubra eq..... 108
AUGTYRO..... 19
aura portaneb..... 129
AUSTEDO..... 43
AUSTEDO XR..... 43
AUSTEDO XR TITRATION KT(WK1-4).. 43
AUVELITY..... 50
aviane..... 108
AVMAPKI-FAKZYNJA..... 19
AVTOZMA..... 104
AVTOZMA AUTOINJECTOR..... 104
ayr saline..... 129
AYVAKIT..... 19
azathioprine..... 19
azelaic acid..... 75
azelastine..... 82, 115
azithromycin..... 10

azo hormonal health cycle care....129
azo hormonal hlth happy cycle....129
azo urinary pain relief 129
aztreonam.... 11
azurette (28)....109
b complex plus vitamin c....129
b complex w-vit c.... 129
b complex-vitamin c-folic acid.... 194
b-12 dots.... 129
baby ayr saline.... 129
bacitracin....129
bacitracin zinc....129
bacitracin-polymyxin b 114
bacitraycin plus.... 129
baclofen....45
bacmin....129
balsalazide....92
BALVERSA....19
balziva (28)....109
banophen.... 129
BARACLUDE....4
bayer aspirin....129
bayer low dose aspirin129
bc max strength....129
BCG VACCINE, LIVE (PF).... 98
b-complex with vitamin c....194, 195
BELSOMRA.... 50
benadryl.... 130
benadryl allergy....130
benazepril....61
benazepril-hydrochlorothiazide....61
BENLYSTA.... 104
benzonatate.... 130
benzoyl peroxide....130
benztropine.... 41
bergacor.... 130
BESREMI.... 96
BESREMI PEN....96
beta-hc.... 130
betaine.... 92
betamethasone dipropionate....77
betamethasone valerate.... 77
betamethasone, augmented.... 77
betasept surgical scrub 130
BETASERON.... 96
betatemp....130
betaxolol....61, 115
bethanechol chloride..207
BEVESPI AEROSPHERE 202
bexarotene.... 19
BEXSERO....98
bicalutamide....19
BICILLIN L-A.... 15
BIKTARVY....5
bimatoprost....117
biocel (with lutein)..... 130
biocotron....130
biofreeze (menthol)... 130
biofreeze overnight....130
biolyte.... 130
bisacodyl....130
bismuth..... 130
bismuth subcit k-metronidz-tcn.....95
bismuth subsalicylate.130
bisoprolol fumarate.....61
bisoprolol-hydrochlorothiazide.....61
blisovi 24 fe..... 109
blisovi fe 1.5/30 (28)...109
BOMYNTRA..... 18
BONSITY..... 103
BOOSTRIX TDAP.....98
bosentan.....202
BOSULIF....19
bosutinib....19
BRAFTOVI..... 19
brain might-dha-co q10..... 130
breatherite mdi spacer 130
breatherite spacer-mask, neo..... 131
breatherite spacer-mask,adult.....130
breatherite spacer-mask,child..... 131
breatherite spacer-mask,infant.....131
breatherite spacer-mask,s.chld.....131
breatherite valved mdi chamber..... 131
breatherite valved mdi spacer.....131
BREO ELLIPTA..... 202

breyna 202
BREZTRI AEROSPHERE 202
briellyn 109
brimonidine 118
brinzolamide 117
brivaracetam 35
bromfenac 116
bromocriptine 41
BRUKINSA 19
bubbles the fish pedi mask 131
budesonide 92, 202
buffered c powder 131
bufferin 131
bumetanide 62
buprenorphine hcl 45
buprenorphine-naloxone 46
bupropion hcl 50
bupropion hcl (smoking deter) 82
buspirone 50
butorphanol 47
c complex 131
c-1000 131
c-1000 with rose hips 131
c-500 ..... 131, 195
cabergoline 89
CABOMETYX 20
calcidol 131
calcipotriene 72
calcitonin (salmon) 89
calcitriol 89
calcium 500 + d 132
calcium 500 with d 132
calcium 600 132
calcium 600 + d(3) 132
calcium acetate(phosphat bind) 207
calcium antacid 133
calcium carbonate 131, 132, 133, 174
calcium carbonate-vitamin d3 ..... 131, 132, 174
calcium glucarate 133
calcium with vitamin d 132
cal-gest antacid 133
callus remover 148
callus removers 133
CALQUENCE (ACALABRUTINIB MAL) 20
camila 105
camrese lo 109
candesartan 62
candesartan-hydrochlorothiazid 62
CAPLYTA 50
CAPRELSA 20
capsaicin 133
capsaicin (bulk) 133
capsaid es 133
capsicum 182
capsicum oleoresin 133
captopril 62
capzasin 133
capzasin-hp 133
capzix 133
carbamazepine 35
carbidopa 41
carbidopa-levodopa 41
carbidopa-levodopa-entacapone 41
carglumic acid 79
carnitex 133
carteolol 115
cartia xt 62
carvedilol 62
caspofungin 3
castiva warming 134
CAYSTON 11
cefaclor 9
cefadroxil 9
cefazolin 9
cefdinir 9
cefepime 9
cefixime 9
cefoxitin 9
cefpodoxime 9
cefprozil 10
ceftaroline fosamil 10
ceftazidime 10
ceftriaxone 10
cefuroxime axetil 10
cefuroxime sodium 10
celecoxib 47
central-vite 182
centravites 50 plus 134
centravites adults 134
centrum 134
centrum specialist energy 134
centrum specialist heart 134
centrum women 134
century 152, 154
century adult formula 154

century adults 50 plus 152
century mature..... 154
century men..... 152
century men 50 plus
.....152, 154
century women..... 152
century women 50
plus.....152, 154
cephalexin..... 10
ceralyte-70..... 134
cerovite senior.....134
certa plus.....134
certavite senior..... 134
certavite-antioxidant..134
cetiri-d..... 182
cetirizine.....134
cetirizine..... 200
cetirizine-
pseudoephedrine..... 134
cevimeline.....79
CHEMET.....79
chest congestion relief
.....135
chest congestion relief
dm..... 134, 135
chest congestion-
cough relief..... 135
child allergy
relf(cetirizine).....135
child chest congestion-
cough.....140
child cough-chest
congest dm.....140
child delsym cough-
chest dm.....135
child fever reducer-
pain relvr..... 182
child mucus relief
cough.....135
child mucus relief
expectorant.....136
child robitussin
elderberry dm..... 136
children's
acetaminophen.. 135, 137
children's advil.....136
children's alaway.....136
children's allergy
(diphenhyd).....135
children's allergy
relief(lor)..... 135
children's
allergy(cetirizine).....179
children's aller-tec.....136
children's aspirin..... 135
children's cetirizine.... 135
children's chest
congestion.....136
children's chew
multivitamin.....136
children's chewable
multivitmn.....136
children's chewable
vitamin..... 136
children's chewables..136
children's chewables
extra c.....136
children's cold and
cough (pe)..... 136
children's cold and
cough dm.....152
children's cough..... 136
children's dibromm
dm cold-cou.....180
children's
diphenhydramine.....136
children's fluticasone. 135
children's giltuss
cough-chest.....135
children's ibuprofen... 136
children's mapap.....136
children's mucinex
cough.....136
children's multivitamin
.....136
children's non-aspirin.170
children's pain relief...135
children's pain reliever
.....137
children's pain-fever
relief..... 136
children's profen ib
.....179, 180
children's saline nasal
spray.....136
children's wal-dryl
allergy.....137
children's wal-zyr..... 136
child's all day
allergy(cetir)..... 135
chld robitussin cough-
chest dm.....137
chlor a-hist dm..... 137
*chlorhexidine
gluconate*.....82
chlorhexidine
gluconate.....137

chloroquine phosphate .11
chlorpheniramine maleate 137
chlorpromazine 50
chlortabs 147
chlorthalidone 62
chocolate laxative 137
cholecalciferol (vitamin d3) 141, 196
cholestyramine (with sugar) 69
cholestyramine light 69
ciclopirox 76
cidatrine-tm 137
cilostazol 67
CIMDUO 5
cinacalcet 89, 90
ciprofloxacin hcl 16, 114
ciprofloxacin in 5 % dextrose 16
ciprofloxacin-dexamethasone 83
citalopram 50
citrate of magnesia 182
citroma 137
claravis 75
clarithromycin 11
clear eyes dry itchy relief 137
clear eyes nighttime ... 137
clear eyes sensitive 137
clearcanal earwax softener 137
clever choice chamber-lrg mask 137
clever choice chamber-med mask ... 137
clever choice chamber-sm mask 137
clever choice neb kit-adult 137
clever choice neb kit-child 138
clever choice nebulizer 138
clever choice peak flow meter 138
clever choice whisper aire ped 138
clindamycin hcl 12
clindamycin in 5 % dextrose 12
clindamycin phosphate 12, 75, 107
clindamycin-benzoyl peroxide 75
clinere ear wax removal 138
clobazam 35
clobetasol 78
clobetasol-emollient 78
clodan 78
clomipramine 51
clonazepam 35, 36
clonidine 62
clonidine hcl 62
clopidogrel 67
clorazepate dipotassium 51
clotrimazole 3, 76
clotrimazole-betamethasone 76
clozapine 51
COARTEM 12
COBENFY 51
COBENFY STARTER PACK 51
codeine-guaifenesin ... 156
colchicine 102
cold and cough elixir .. 138
colesevelam 69
colestipol 69, 70
colistin (colistimethate na) 12
col-rite 138, 182
COMBIGAN 117
COMBIVENT RESPIMAT 202
COMETRIQ 20
comfort gel 138
comfort gel extra strength 138
comfortseal large mask 138
comfortseal medium mask 138
comfortseal small mask 138
compact compressor nebulizer 138
compact space chamber 138
compact space chamber-lrg mask 138
compact space chamber-med mask ... 138

compact space chamber-sm mask..... 138
compact ultrasonic nebulizer.....138
comp-air nebulizer compressor.....138
complete allergy.....138
complete allergy medicine.....182
complete multivitamin-mineral 138, 147
complete mv adult 50 plus.....147
compound w..... 138
compro..... 92
CONEXXENCE.....103
constulose.....92
COPIKTRA..... 20
coqmax omega.....139
corn remover.....139
corn-callus remover... 161
corvita..... 139
COSENTYX.....72
COSENTYX (2 SYRINGES).....72
COSENTYX PEN (2 PENS).....72
COSENTYX UNOREADY PEN.....72
COTELLIC..... 20
cough dm er..... 139
cough syrup dm.....139
cough-chest congestion dm.....139
cranrx with vit c-mannose.....139
CREON..... 92
CRESEMBA.....3
cromolyn.....92, 116, 202
cromolyn..... 139
cryselle (28)..... 109
culturelle kids probiotic-mv.....139
culturelle kids pro-mv-lutein..... 139
cyanocobalamin (vitamin b-12).....194
cyclobenzaprine.....45
cyclophosphamide.....20
CYCLOPHOSPHAMIDE...20
cyclosporine.....20, 116
cyclosporine modified...20
cyproheptadine..... 200
cyred eq.....109
CYSTAGON.....207
CYSTARAN..... 116
cystex max uti pain relief..... 141
d10 %-0.45 % sodium chloride.....79
d2.5 %-0.45 % sodium chloride.....79
d3-2000..... 141
d5 % and 0.9 % sodium chloride.....79
d5 %-0.45 % sodium chloride.....80
dabigatran etexilate.....67
daily fiber....140, 141, 147
daily fiber (psyllium-sucrose)..... 142
daily multiple for women..... 140
daily multi-vitamin..... 167
daily multivitamin with iron..... 167
daily multivitamin-minerals.....142
daily value..... 142
daily vitamin formula. 142
daily vitamin formula-iron..... 142
daily vitamin formula-minerals.....142
daily-vite.....142
daily-vite (with folic acid).....142
dakin's solution..... 142
dalfampridine.....43
danazol.....90
dandelion root.....142
dantrolene.....45
DANZITEN.....20
dapagliflozin.....84
dapagliflozin-metformin..... 84
dapsone.....12
DAPTACEL (DTAP PEDIATRIC) (PF)..... 98
daptomycin.....12
darunavir.....5
dasatinib.....21
DAURISMO..... 21
dayavite.....142
ddrops..... 142

deblitane 105
deep sea nasal 142
deferasirox 80
DELSTRIGO 5
delsym cough-chest congest dm 142
delta d3 142
demeclocycline 17
DEPO-SUBQ PROVERA 104 106
dermacinrx circata 142
dermacinrx circatrix ... 142
dermacinrx foliflex 142
dermacinrx folitin-z 143
dermacinrx multitam .. 143
dermacinrx penetral ... 143
dermacinrx ribotin-e .. 143
dermacinrx venexa 143
dermacinrx venexa fe . 143
dermacinrx ventrixyl .. 143
dermacinrx ventrixyl fe 143
dermacinrx vitramyn .. 143
dermacinrx vitranol 143
dermacinrx vitranol fe 143
dermacinrx vitrexate .. 143
dermacinrx vitrexate fe 143
dermacinrx zintrexyl-c 143
dermarest eczema (hydrocort) 143
DESCOVY 5
desgen dm 143
desipramine 51
desloratadine 200
desmopressin 90
desonide 78
despec dm-g 143
despec-dm (phenyleph-dm-guaif) 143
desvenlafaxine succinate 51
devilbiss disposable nebulizer 143
devilbiss pulmo-aide compressr 143
devilbiss pulmomate compressor 143
devilbiss traveler compressor 144
dexamethasone 83
dexamethasone sodium phosphate 118
dexchlorphen-pse-chlophedianol 137
dexifol 144
dexlansoprazole 95
dexmethylphenidate 51
dextroamphetamine sulfate 51, 52
dextroamphetamine-amphetamine 52
dextromethorphan polistirex 144
dextromethorphan-guaifenesin 145, 156
dextrose 10 % and 0.2 % nacl 80
dextrose 10 % in water (d10w) 80
dextrose 5 % in water (d5w) 80
dextrose 5%-0.2 % sod chloride 80
diabetaid 144
diabetes health formula 144
diabetic tussin dm 144
diabetic tussin ex 144
DIACOMIT 36
dialyvite 144
dialyvite 800 144
dialyvite 800-ultra d ... 144
dialyvite supreme d 144
diarrhea relief (bismuth subs) 144
diazepam 36, 52
diazepam intensol 52
diazoxide 84
diclofenac potassium 47
diclofenac sodium .47, 116
diclofenac-misoprostol . 47
dicloxacillin 15
dicyclomine 91
diflunisal 47
difluprednate 118
digoxin 71
dihydroergotamine 42
DILANTIN 36
DILANTIN EXTENDED 36
DILANTIN INFATABS 36
DILANTIN-125 36
diltiazem hcl 62, 63
dilt-xr 63
dimaphen dm 144

dimetane (diphenhydramine hcl) 144
dimetapp dm cold-cough (pe) 144
dimethyl fumarate 43
diotame 144
diotame instydose 144
diphedryl 144
diphedryl allergy 182
diphen 144
diphenhydramine hcl 144, 145
diphenoxylate-atropine 91
dipyridamole 68
disopyramide phosphate 60
disulfiram 80
divalproex 36
dm max 139
docuprene 145
docusate calcium 145
docusate sodium 145
docuzen 145
dofetilide 60
dok 145
dolishale 109
donepezil 43
dorzolamide 117
dorzolamide-timolol 117
dotti 106
double antibiotic (b.tracn zn) 187
DOVATO 5
doxazosin 63
doxepin 52
doxercalciferol 90
doxy-100 17
doxycycline hyclate 17
doxycycline monohydrate 17
dr scholl's clear away 145
dramamine (meclizine) 145
dramamine ginger 145
dramamine less drowsy 145
DRIZALMA SPRINKLE 52
dronabinol 92
drospirenone-e.estradiol-lm.fa 109
drospirenone-ethinyl estradiol 109
DROXIA 21
dulcolax (magnesium hydroxide) 145
dulcolax stool softener (dss) 145
duloxetine 53
duofilm 145
DUPIXENT PEN 73
DUPIXENT SYRINGE 73
duragel callus removers 145
dutasteride 206
dutasteride-tamsulosin 207
d-vi-sol 145
dyna-hex 145
e-400 c-500 and beta carotene 145
ear care 182
ear drops (carbamide peroxide) 145
ear health formula 145
ear wax drops 146
ear wax removal drops 146
ear wax removal kit 146
easivent holding chamber 146
easivent mask large 146
easivent mask medium 146
easivent mask small 146
easy air filter 146
easy neb compressor nebulizer 146
easy neb filter 146
easyair compressor nebulizer 146
eazzze the pain 146
ebase controller 146
ecotrin 146
ecotrin low strength 146
ed a-hist dm 146
ed bron gp 146
ed chlorped jr 146
ed-apap 146
EDARBI 63
EDARBYCLOR 63
EDURANT PED 5
efavirenz 5
efavirenz-emtricitabin-tenofov 5
efavirenz-lamivu-tenofov disop 5

electrolyte-a 209
ELIGARD 21
ELIGARD (3 MONTH) 21
ELIGARD (4 MONTH) 21
ELIGARD (6 MONTH) 21
ELIQUIS 68
ELIQUIS DVT-PE TREAT 30D START 68
ELIQUIS SPRINKLE 68
ELMIRON 207
elon matrix 5000 146
elon matrix 5000 complete 146
elon matrix plus 147
elon r3 147
eltrombopag olamine ... 68
eluryng 107
emetrol chewable 147
EMGALITY PEN 42
EMGALITY SYRINGE 42
EMSAM 53
emtricitabine 5
emtricitabine-tenofovir (tdf) 5
emtricita-rilpivirine-tenof df 5
EMTRIVA 5
enalapril maleate 63
enalapril-hydrochlorothiazide 63
ENBREL 104
ENBREL MINI 104
ENBREL SURECLICK 104
endacof - dm 147
endur-acin 147
endur-c with rose hips 147
enema 147
enema disposable 140
ENGERIX-B (PF) 98
ENGERIX-B PEDIATRIC (PF) 98
enilloring 108
enoxaparin 68
ENSACOVE 21
enskyce 109
entacapone 41
entecavir 5
enteric coated aspirin .128
ENTYVIO PEN 92
enulose 92
ENVARSUS XR 21
EPIDIOLEX 36
epinephrine 200
eplerenone 63
ergocalciferol (vitamin d2) 148, 195
ergotamine-caffeine 42
ERIVEDGE 21
ERLEADA 21, 22
erlotinib 22
errin 106
ertapenem 12
ery pads 75
erythromycin 11, 114
erythromycin with ethanol 75
erythromycin-benzoyl peroxide 75
escitalopram oxalate 53
eslicarbazepine 36, 37
esomeprazole magnesium 95
essentia 148
essential man 148
essential man 50 plus . 148
estarylla 109
estradiol 106
estradiol valerate 106
estradiol-norethindrone acet 106
ethambutol 12
ethosuximide 37
etodolac 47
etonogestrel-ethinyl estradiol 108
etravirine 5
EUCRISA 73
EULEXIN 22
evac-u-gen (sennosides) 148
everolimus (antineoplastic) 22
everolimus (immunosuppressive) ... 22
EVOTAZ 5
exemestane 22
expectorant 182
expectorant cough syrup 182
expiratory mouthpiece 148
EXXUA 53
eye allergy itch-redness rlf 148
eye health plus lutein . 148
eye itch relief 148
eye multivitamin 149
eyeprotect 149

ez twist tubing..... 149
ezetimibe..... 70
ezetimibe-simvastatin.. 70
face mask,earloop-style..... 146
falmina (28)..... 109
famciclovir..... 6
famotidine..... 95
famotidine..... 149
FANAPT..... 53
FANAPT TITRATION PACK A..... 53
FANAPT TITRATION PACK B..... 53
FANAPT TITRATION PACK C..... 53
FARXIGA..... 84
FASENRA..... 203
FASENRA PEN..... 202
febuxostat..... 102
feirza..... 109
felbamate..... 37
felodipine..... 63
fenesin dm ir..... 149
fenesin ir..... 149
fenofibrate..... 70
fenofibrate micronized. 70
fenofibrate nanocrystallized..... 70
fenofibric acid (choline)..... 70
fentanyl..... 45
feosol..... 149
fer-in-sol..... 149
ferosul..... 149
ferrex 150..... 149
ferric x-150..... 149
ferro-time..... 149
ferrous sulfate 149, 150, 159
FETZIMA..... 53
feverall..... 150
fexofenadine..... 150
fexofenadine-pseudoephedrine..... 150
fiber (calcium polycarbophil)..... 150
fiber (psyllium husk) 152, 180
fiber (psyllium husk-sugar)..... 150
fiber (with aspartame) 150
fiber laxative (ca polycarbo)..... 150
fiber laxative (psyllium husk)..... 140
fiber therapy (ca polycarboph)..... 147
fiber therapy (psyllium-sucro).. 150, 152
fiber therapy laxative (husk)..... 140, 147
fiber-caps (psyllium husk)..... 150
fiber-lax..... 150
fiber-tabs..... 150
fidaxomicin..... 11
FILSPARI..... 71
filters replacement..... 150
finasteride..... 207
fingolimod..... 43
FINTEPLA..... 37
finzala..... 109
FIRMAGON KIT W DILUENT SYRINGE..... 22
first aid antibiotic..... 150
first aid antiseptic(povidone).. 147
flanax (naproxen)..... 150
flavor chews antacid.. 140
flecainide..... 60
fleet bisacodyl..... 150
fleet docusate..... 150
fleet enema..... 150
fleet glycerin (adult)... 151
flexichamber..... 151
flexichamber-lg child mask..... 151
flexichamber-sm adult mask..... 151
flexichamber-sm child mask..... 151
flintstones gummies omega-3..... 151
flintstones plus calcium..... 151
floriva plus..... 151
florraxyl..... 151
flotrex..... 151
flovent hfa..... 151
fluconazole..... 3
fluconazole in nacl (iso-osm)..... 3
flucytosine..... 3
fludrocortisone..... 83
flunisolide..... 203
fluocinolone..... 78

fluocinolone acetonide oil.....83
fluocinolone and shower cap..... 78
fluocinonide.....78
fluocinonide-emollient..78
fluoride (sodium).....187
fluoride (sodium)..... 209
fluorometholone.....118
fluorouracil..... 73
fluoxetine.....53
fluphenazine decanoate.....54
fluphenazine hcl..... 54
flurbiprofen..... 47
flurbiprofen sodium....116
FLUTICASONE FUROATE-VILANTEROL 203
fluticasone propionate 78, 203
fluticasone propionate 151
fluticasone propion-salmeterol..... 203
fluvastatin..... 70
fluvoxamine.....54
folaten..... 151
folbee plus.....151
folic acid..... 152
folixia.....152
for sty relief..... 152
formoterol fumarate.. 203
fosamprenavir..... 6
fosfomycin tromethamine..... 17
fosinopril.....63
fosinopril-hydrochlorothiazide.....63
FOTIVDA..... 22
freedavite.....152
fruit c.....152
fruit c-100.....152
fruit c-500.....152
FRUZAQLA..... 22, 23
full spectrum b-vitamin c.....153
FULPHILA.....96
furosemide..... 63
fyavolv.....106
g tussin ac.....153
gabapentin..... 37
galantamine..... 43, 44
galbriela..... 109
gallifrey..... 106
GAMUNEX-C.....98
GARDASIL 9 (PF)..... 98
gas relief (simethicone)..... 153
gas relief 80 (simethicone)..... 154
gas-x..... 153
gatifloxacin.....115
GAUZE PAD.....102
gavilyte-c.....92
gavilyte-g.....92
gavilyte-n.....93
GAVRETO.....23
gefitinib..... 23
gemfibrozil.....70
generlac.....93
gengraf.....23
genicin vita-s..... 153
gentamicin.....12, 76, 115
gentamicin in nacl (iso-osm).....12
genteal tears severe(petrolat)..... 153
gentle laxative (bisacodyl)..... 153
gentle laxative (mag hydrox)..... 153
GENVOYA..... 6
geri-dryl..... 153
geri-kot..... 153
geri-lanta..... 153
geri-mox antacid-antigas..... 153
geri-mucil (sugar)..... 153
geri-pectate..... 153
geri-tussin.....154
geri-tussin dm.....154
gets-it corn callus remover.....154
GILOTRIF.....23
gilphex tr..... 154
giltuss cough-congestion.....154
giltuss diabetic.....154
giltuss hbp..... 154
ginkgo biloba leaf extract..... 154
glatiramer.....44
glatopa..... 44
glimepiride.....84, 85
glipizide..... 85
glipizide-metformin..... 85
glucose..... 154

glutamine (sickle cell) ... 80
glutathione 154
glycerin (adult) 154
glycopyrrolate 91
GLYXAMBI 85
GOMEKLI 23
goody's hangover 155
goody's plus 155
granisetron hcl 93
green tea-600 155
griseofulvin microsize 3
griseofulvin ultramicrosize 3
guaiasorb dm 155
guaicon dms 155
guaifed (guaifenesin) .. 155
guaifed-dm 155
guaifenesin 155
guaifenesin ac 156
guaifenesin dac 156
guaifenesin-dm 156
guanfacine 54, 63
gummi bear multivitamin 156
GVOKE 85
GVOKE HYPOPEN 2-PACK 85
GVOKE PFS 1-PACK SYRINGE 85
HAEGARDA 203
hailey 24 fe 109
hailey fe 1/20 (28) 110
hair, skin and nails (biotin) 140
hair, skin and nails advanced 155
hair, skin and nails-argan oil 156
hair,skin and nails 140
hair,skin and nails(fa-biotin) 156
hair-skin-nails (mv-fa-biotin) 156
halobetasol propionate 78
haloperidol 54
haloperidol decanoate . 54
haloperidol lactate 54
HAVRIX (PF) 98
h-chlor 12 156
headache pm 156
healthy eyes 156
healthy heart complex 156
heartburn antacid 156
heartburn relief 140
heartburn relief (famotidine) 157
heather 106
heliocare advanced 157
hemorrhoidal 180
hemorrhoidal h 182
heparin (porcine) 68
HEPLISAV-B (PF) 99
HERNEXEOS 23
HIBERIX (PF) 99
hibiclens 157
hi-cal plus vit d 182
high potency multivit (w-iron) 157
home nebulizer plus sidestream 157
honey bears multivitamin 157
HUMULIN R U-500 (CONC) KWIKPEN 85
hydralazine 63
hydrochlorothiazide 63, 64
hydrocodone-acetaminophen 45
hydrocodone-ibuprofen 45
hydrocortisone .. 78, 83, 93
hydrocortisone 157
hydrocortisone acetate 157
hydrocortisone-aloe vera 157
hydromorphone 45, 46
hydroxychloroquine 12
hydroxyurea 23
hydroxyzine hcl 200
hydroxyzine pamoate . 200
hylavite 157
hylazinc 157
HYRNUO 23
hysept 157
ibandronate 103
IBRANCE 23
IBTROZI 23
ibu 47
ibu-200 157
ibuprofen 47
ibuprofen 157, 158
ibuprofen ib 187
icatibant 203
iclevia 110
ICLUSIG 23

icosapent ethyl 70
IDHIFA 24
IDVYNSO 6
iferex 150 157
imatinib 24
IMBRUVICA 24
imipenem-cilastatin 12
imipramine hcl 54
imiquimod 74
IMKELDI 24
IMOVAX RABIES VACCINE (PF) 99
IMPAVIDO 12
incassia 106
in-check dial training device 157
in-check nasal with mask 157
in-check oral flow meter 158
INCRELEX 80
INCRUSE ELLIPTA 203
indapamide 64
INFANRIX (DTAP) (PF) ... 99
infant fever reducer-pain relf 182
infant pain reliever 158
infant's acetaminophen 158
infant's advil 158
infants gas relief 158
infant's ibuprofen 158
infant's motrin 158
infants' mylicon 158
infants' pain and fever 158
infants' pain relief 158
infants profenib 180
infants simethicone 158
INGREZZA 44
INGREZZA INITIATION PK(TARDIV) 44
INLURIYO 24
INLYTA 24
innospire deluxe 158
innospire elegance 158
innospire essence 158
innospire go nebulizer 158
innospire mini 158
innospire replacement filter 158
INQOVI 24
INREBIC 24
inspiration elite filter .. 159
INSULIN GLARGINE U-300 CONC 85
INSULIN GLARGINE-YFGN 85, 86
INSULIN SYRINGE-NEEDLE U-100 102
INTELENCE 6
introvale 110
INVEGA HAFYERA 54
INVEGA SUSTENNA . 54, 55
INVEGA TRINZA 55
ionil t 159
IPOL 99
ipratropium bromide 82, 203
ipratropium-albuterol . 203
i-prin 159
irbesartan 64
irbesartan-hydrochlorothiazide 64
iron 159
iron (ferrous sulfate) .. 159
ISENTRESS 6
ISENTRESS HD 6
isibloom 110
isoniazid 12
isosorbide dinitrate 71
isosorbide mononitrate 71
isotretinoin 75
isradipine 64
is-zc 50 159
itch relief (diphenhydramine) 140
itch stopping(diphenhydramine) 181
ITOVEBI 24
itraconazole 3
ivabradine 71
ivermectin 13
i-vite 159
IWILFIN 25
IXIARO (PF) 99
jaimiess 110
JAKAFI 25
JAKAFI XR 25
jantoven 68
JANUVIA 86
JARDIANCE 86
jasmiel (28) 110
JAYPIRCA 25
JIDEYTRO 25
jinteli 106

jock itch (terbinafine). 140
JOURNAVX..... 47
juleber..... 110
JULUCA..... 6
junel 1.5/30 (21)..... 110
junel 1/20 (21)..... 110
junel fe 1.5/30 (28)..... 110
junel fe 1/20 (28)..... 110
junel fe 24..... 110
JYLAMVO..... 25
JYNNEOS (PF)..... 99
kaitlib fe..... 110
KALETRA..... 6
kaopectate (bismuth subsalicy)..... 159
kaopectate max..... 159
kariva (28)..... 110
kelnor 1/35 (28)..... 110
KERENDIA..... 64
ketoconazole..... 3, 76
ketorolac..... 116
ketotifen fumarate..... 159
kids vitamin d3..... 159
kindermed infants pain-fever..... 159
kindermed kids cough-congest..... 159
kindermed kids pain-fever..... 159
KINRIX (PF)..... 99
kionex..... 80
KIRSTY..... 86
KIRSTY PEN..... 86
KISQALI..... 25
klor-con..... 208
klor-con 10..... 207
klor-con 8..... 207
klor-con m10..... 207
klor-con m15..... 207
klor-con m20..... 208
KLOXXADO..... 47
KOMZIFTI..... 25
konsyl (sugar)..... 160
konsyl sugar-free..... 159
KOSELUGO..... 25
kourzeq..... 82
k-pax immune support..... 160
k-pec antidiarrheal (bism sub)..... 160
KRAZATI..... 25
kurvelo (28)..... 110
l norgest/e.estradiol-e.estrad..... 110
labetalol..... 64
lacosamide..... 37
lactulose..... 93
lamisil at..... 160
lamivudine..... 6
lamivudine-zidovudine... 6
lamotrigine..... 37, 38
lansoprazole..... 95
LANTUS SOLOSTAR U-100 INSULIN..... 86
LANTUS U-100 INSULIN..... 86
lapatinib..... 26
larin 1.5/30 (21)..... 111
larin 1/20 (21)..... 111
larin fe 1.5/30 (28)..... 111
larin fe 1/20 (28)..... 111
latanoprost..... 117
laxa basic..... 160
laxacin..... 160
laxative (bisacodyl)..... 160
laxative (sennosides)..... 160, 181
laxative pills..... 160
laxative pills regular... 160
LAZCLUZE..... 26
lc d nebulizer set..... 160
lc plus..... 175
lc plus nebulizer-ped mask..... 160
LEDIPASVIR-SOFOSBUVIR..... 6
leflunomide..... 104
lenalidomide..... 26
LENVIMA..... 26
LEQEMBI IQLIK..... 44
lessina..... 111
letrozole..... 26
leucovorin calcium..... 18
LEUKERAN..... 26
LEUKINE..... 96
leuprolide..... 26
levalbuterol hcl..... 204
levetiracetam..... 38
LEVETIRACETAM..... 38
levobunolol..... 115
levocarnitine..... 80
levocarnitine (with sugar)..... 80
levocetirizine..... 200, 201
levofloxacin..... 16
levofloxacin in d5w..... 16
levonest (28)..... 111

levonorgestrel-ethinyl estrad 111
levonorg-eth estrad triphasic 111
levothyroxine 91
levoxyl 91
lice killing (permethrin) 155
lice treatment 160
lice treatment (permethrin) 160
lidocaine 74
lidocaine hcl 74
lidocaine-prilocaine 74
lidocan iii 74
LIFYORLI 26
LILETTA 108
linezolid 13
linezolid in dextrose 5% 13
LINZESS 93
liomny 91
liothyronine 91
liquid antacid 147
liquid corn and callus remover 161
liquid multivitamin 161
liraglutide 86
lisdexamfetamine 55
lisinopril 64
lisinopril-hydrochlorothiazide 64
lite touch-medium mask 161
liteaire mdi chamber .. 161
litetouch-large mask ... 161
litetouch-small mask .. 161
lithium carbonate 55
lithium citrate 55
little animals 161
little remedies 161
little remedies fever and pain 161
little remedies gas relief 161
little remedies saline .. 161
little tummys gas relief 161
LIVTENCITY 6
lojaimiess 111
LOKELMA 80
lomustine 26
LONSURF 27
loperamide 91
lopinavir-ritonavir 6
loradamed 161
lorata-d 182
loratadine 161
lorata-dine d 187
loratadine-d 161
lorazepam 55
lorazepam intensol 55
LORBRENA 27
loryna (28) 111
losartan 64
losartan-hydrochlorothiazide 64
loteprednol etabonate 118
lovastatin 70
loxapine succinate 56
lubiprostone 93
lubricant eye 161
lubrifresh pm 161
luizza 111
LUMAKRAS 27
LUPRON DEPOT 27
lurasidone 56
LYBALVI 56
lyleq 106
lyllana 107
LYNPARZA 27
lysiplex plus 161, 162
LYSODREN 27
LYTGOBI 27
lyza 107
maalox maximum strength 162
macuvite eye care 162
macuvite with lutein .. 162
mag 64 162
mag citrate-potassium citrate 159
mag-al plus 162
mag-al plus extra strength 162
magnesium 182
magnesium citrate 162
magnesium glycinate . 162
magnesium hydroxide 165
magnesium l-lactate ... 162
magnesium oxide 162
magnesium sulfate 208
magtab 162
malathion 79
mapap (acetaminophen) 163
mapap arthritis pain ... 163
maraviroc 6

marlissa (28).....111
MARPLAN..... 56
MATULANE.....27
matzim la.....64
maxallergy kids.....163
maxichlor peh dm..... 163
maxifed.....163
maxifed tr.....163
maxi-tuss ac.....163
maxi-tuss cd..... 163
maxi-tuss dm (bromphen-pe-dm).... 163
maxi-tuss g..... 163
maxi-tuss gmx..... 163
maxi-tuss pe max..... 163
maxrelief junior.....163
maxtussin..... 163
maxtussin dm..... 163
mc 300 nebulizer w-mouthpiece..... 163
mc 300 nebulizer-unvrsl tubing..... 163
mcm.....163
m-dryl..... 163
meclizine.....93
meclizine..... 163, 164
mecobalamin (vitamin b12)..... 165
medicated corn removers..... 164
medi-meclizine.....164
mediplast corn-callus-wart..... 164
mediproxen.....164
medroxyprogesterone 107
mefloquine..... 13
mega multi for women 164
mega multiple/chelated mineral..... 164
mega multivitamin for men..... 164
megavite.....164
megavite golden years 55 plus.....164
megestrol..... 27
MEKINIST.....27, 28
MEKTOVI..... 28
melatonin.....164
meleya.....107
meloxicam..... 47
memantine..... 44
men 50 plus advanced one daily.....140
men 50 plus multivitamin.....164
menopause support... 140
MENQUADFI (PF).....99
men's 50 plus daily formula.....164
men's 50 plus multivitamin.....164
men's daily formula....164
men's one daily.. 141, 148
MENVEO A-C-Y-W-135-DIP (PF).....99
mercaptopurine.....28
MERILOG..... 86
MERILOG SOLOSTAR.... 86
meropenem..... 13
mesalamine.....93
mesna.....18
metamucil..... 164
metamucil (with sugar) 165
metamucil fiber thin...164
metamucil free (with sugar).....164
metformin.....86, 87
methadone..... 46
methazolamide.....116
methenamine hippurate.....17
methimazole.....84
methotrexate sodium...28
methotrexate sodium (pf).....28
methsuximide.....38
methyl salicylate.....165
methylphenidate hcl.....56
methylprednisolone.....83
methyltetrahydrofolate glucos.....119, 165
metoclopramide hcl.....93
metolazone.....64
metoprolol succinate....64
metoprolol ta-hydrochlorothiaz..... 65
metoprolol tartrate..... 65
metronidazole.13, 75, 108
metronidazole in nacl (iso-os).....13
metyrosine.....65
mexiletine.....60
mgo..... 165
mg-plus-protein.....165
mibelas 24 fe..... 111

micafungin.....3
miconazole nitrate..... 165
miconazole-3..... 153
miconazole-3 prefil,cream,wipe..... 165
miconazole-7..... 165, 187
micro elite replacement filter..... 165
microair mesh nebulizer.....165
microchamber..... 165
microgestin 1.5/30 (21)..... 111
microgestin 1/20 (21). 111
microgestin fe 1.5/30 (28)..... 112
microgestin fe 1/20 (28)..... 112
microlife peak flow meter.....165
microspacer.....165
midodrine..... 80
mifepristone..... 90
mili.....112
milk of magnesia..... 165
milltrium senior.....165
milnacipran..... 104
mimvey.....107
mineral oil..... 165
mini elite filter replacement..... 165
mini multivitamins-iron..... 165
mini plus nebulizer..... 166
mini wright peak flow meter.....166
minocycline.....17
minoxidil..... 65
mintox maximum strength.....166
mintox plus.....166
mirabegron.....206
mirtazapine..... 56
misoprostol.....95
M-M-R II (PF)..... 99
modafinil..... 56
MODEYSO.....28
moexipril.....65
molindone.....56
mometasone...78, 79, 204
monistat 3..... 166
monistat maintain uti. 166
monocaps.....166
montelukast..... 204
morphine..... 46
morphine concentrate.. 46
motion sickness (meclizine)..... 140, 153
motion sickness relief(mecliz).....166
motion-time..... 166
motrin ib.....166
MOUNJARO..... 87
mouthpiece..... 176
MOVANTIK..... 93
move it along.....166
moxifloxacin..... 16, 115
moxifloxacin-sod.chloride(iso)..... 16
m-pap..... 166
MRESVIA (PF).....99
mucinex cold-flu hbp.. 166
mucinex fast-max dm max.....166
mucinex fast-max kick cong-cgh..... 166
mucolyte (guaifenesin) 166
mucolyte-dm..... 166
mucosa..... 167
mucosa dm..... 167
mucus relief.....167
mucus relief cough..... 187
mucus relief dm.....167
mucus relief dm cough 167
mucus relief dm max.. 167
MULTAQ..... 60
multi complete with iron..... 167
multi for her..... 167
multi vitamin..... 167
multi-day plus minerals.....167
multi-day with iron.....167
multiple vitamin-minerals.....167
multiple vitamins.....167
multivit with min-folic acid..... 142
multivit,calc,min-fa-k1-lycop..... 171
multivitamin..... 167
multivitamin 50 plus...180
multi-vitamin with fluoride.....168
multivitamin with folic acid..... 167

multivitamin with minerals.....167
multivitamin women 50 plus.....167
multivitamin-zinc-stress.....167
multi-vite.....168
multivit-min-ferrous fumarate.....167
multivit-min-iron fum-folic ac.....167
mupirocin.....76
murine ear wax removal system.....168
mycophenolate mofetil 28
mycophenolate sodium.....28
myferon 150.....168
mylanta maximum strength.....168
mynephrocaps.....168
mynephron.....168
n.o.max er.....168
nabumetone.....47
nadolol.....65
nafcillin.....15
naftifine.....76, 77
naloxone.....47, 48
naloxone.....168
naltrexone.....48
NAMZARIC.....44
naproxen.....48
naproxen sodium.....48
naproxen sodium.....168
naramin.....168
naratriptan.....42
nasal decongestant (pseudoeph).....153
nasal mist.....168
nasal moisturizing.....168
nasal spray (sodium chloride).....147
NATACYN.....115
nateglinide.....87
nattokinase.....168
natural fiber laxative..168
natural fiber laxative (sugar).....168
natural fiber laxative(aspart).....168
natural veg laxative(sennosid).....147
nauzene upset stomach-nausea.....168
navage portable nebulizer.....168
NAYZILAM.....38
neb200 nebulizer.....169
nebivolol.....65
nebulizer and compressor.....139
nebulizers.....192
necon 0.5/35 (28).....112
nefazodone.....56
neomycin.....13
neomycin-bacitracin-poly-hc.....117
neomycin-bacitracin-polymyxin.....115
neomycin-polymyxin b-dexameth.....117
neomycin-polymyxin-gramicidin.....115
neomycin-polymyxin-hc.....83, 117
neosporin (neo-bac-polym).....169
neovite.....169
nephro vitamins.....169
nephronex-sl.....169
NERLYNX.....28
neuac.....75
NEUPRO.....41
nevirapine.....6, 7
nexcare all purpose mask.....169
NEXLETOL.....70
NEXPLANON.....108
niacin.....70
niacin.....169
niacin (inositol niacinate).....182
niavasc.....169
nicadan.....169
nicardipine.....65
nicazel.....169
nicazel forte.....169
nicorette.....169
nicotine.....169, 170
nicotine (polacrilex).....169, 170
NICOTROL NS.....82
nifedipine.....65
night time cold and flu relief.....170
night time pain medicine.....170

nightime sleep.....182
nighttime allergy relief 170
nighttime sleep aid (diphen).....155, 170
nikki (28).....112
nilotinib hcl.....28
nilutamide..... 29
nimodipine.....65
NINLARO.....29
nintedanib..... 204
nitazoxanide.....13
nitisinone.....81
nitro-bid.....71
nitrofurantoin macrocrystal.....17
nitrofurantoin monohyd/m-cryst.....17
nitroglycerin..... 71, 72, 93
nitroval blue..... 170
NIVESTYM.....96, 97
nohist-dm..... 170
non-aspirin..... 170, 182
non-aspirin extra strength.....170
non-aspirin pain relief 181
non-aspirin pm..... 170
nora-be.....107
norelgestromin-ethin.estradiol..... 108
norethindrone (contraceptive)..... 107
*norethindrone acetate*107
norethindrone ac-eth estradiol.....107, 112
norethindrone-e.estradiol-iron.....112
norgestimate-ethinyl estradiol..... 112
nortemp..... 170
nortrel 0.5/35 (28).....112
nortrel 1/35 (21).....112
nortrel 1/35 (28).....112
nortrel 7/7/7 (28)..... 112
nortriptyline.....57
NORVIR.....7
nose clip..... 170
NOVOLIN 70/30 U-100 INSULIN..... 87
NOVOLIN 70-30 FLEXPEN U-100.....87
NOVOLIN N FLEXPEN....87
NOVOLIN N NPH U-100 INSULIN..... 87
NOVOLIN R FLEXPEN.... 87
NOVOLIN R REGULAR U100 INSULIN.....87
NOVOLOG MIX 70-30 U-100 INSULN.....88
NOVOLOG MIX 70-30FLEXPEN U-100.....88
NUBEQA..... 29
NUCALA..... 204
NUEDEXTA.....44
NUPLAZID..... 57
NURTEC ODT..... 42
nutralyn.....170
nyamyc..... 77
nylia 1/35 (28).....112
nylia 7/7/7 (28).....112
nystatin.....4, 77
nystop.....77
nytol..... 170
octreotide acetate..... 29
ocular vitamins.....170
ocutabs.....170
ocuvite eye plus multi 170
ODEFSEY..... 7
ODOMZO..... 29
OFEV.....204
ofloxacin..... 83, 115
OGSIVEO.....29
OJEMDA.....29
OJJAARA..... 29
olanzapine.....57
olmesartan..... 65
olmesartan-amlodipin-hcthiazid.....65
olmesartan-hydrochlorothiazide.....65
olopatadine..... 82
olopatadine..... 170, 171
ombra compressor system..... 171
omega monopure.....171
omega monopure curcumin ec.....171
omegapure 900-tg.....171
omeprazole.....96
omeprazole..... 171
omnicap.....171
OMNITROPE..... 97
oncoplex.....171
oncoplex es..... 171
ondansetron..... 94
ondansetron hcl.....93
one daily.....172

one daily energy.....182
one daily essential 171, 182
one daily for men..... 171
one daily for men 50 plus adv..... 171
one daily for women.. 171
one daily healthy weight.....171
one daily maximum 155, 171
one daily men's 50 plus memory..... 171
one daily men's 50 plus w-d3.....171
one daily men's health 140, 155
one daily multi-vit w-mineral..... 172
one daily multivitamin 171, 173
one daily multivitamin women..... 155
one daily multivit-iron(folic).....172
one daily plus iron..... 172
one daily plus minerals 172
one daily women 50 plus.....171
one daily women 50 plus(vit k).....141
one daily women's..... 172
one daily womens 50 plus.....172
one daily women's metabolism..... 172
one way valved mouthpiece..... 172
one-a-day energy..... 172
one-a-day essential.... 172
one-a-day maximum formula.....172
one-a-day menopause formula.....172
one-a-day men's 50 plus.....172
one-a-day men's 50plus(ginkgo).....172
one-a-day men's complete..... 172
one-a-day men's multivitamin.....172
one-a-day men's pro edge.....172
one-a-day proactive 65 plus.....172
one-a-day teen advantage.....172
one-a-day triple immune supprt.....173
one-a-day vitacraves omega-3..... 173
one-a-day weightsmart..... 173
one-a-day women's 50 plus.....173
one-a-day women's active.....173
one-a-day women's complete..... 173
one-a-day womens formula.....173
one-a-day women's healthy skin..... 173
one-a-day women's petites..... 173
onelax bisacodyl.....173
onelax docusate sodium.....173
onelax magnesium citrate..... 173
onelax senna..... 173
onevite calcium-d3.....173
onevite ferrous sulfate 173
onevite(with lutein)....174
ONUREG..... 29
OPIPZA.....57
optichamber adult mask-large.....174
optichamber diamond lg mask..... 174
optichamber diamond vhc.....174
optichamber diamond-med msk.....174
optichamber diamond-sml mask.....174
optifiber lean.....174
optimag plus calcium. 174
ORGOVYX..... 29
orquidea..... 107
ORSERDU.....29, 30
oseltamivir.....7
OSENVELT.....18
ossopan md..... 174

ossopan-1100 174
osteo-vit3 174
OTEZLA 104
OTEZLA STARTER 105
OTEZLA XR 105
OTEZLA XR INITIATION 105
overnight lubricating eye 140
oxacillin 15
oxaprozin 48
oxcarbazepine 38
oxybutynin chloride 206
oxycodone 46
oxycodone-acetaminophen 46
oysco 500/d 174
oyster shell + d3 131
oyster shell calcium 174
oyster shell calcium 500 174
oyster shell calcium-vit d3 ..... 174, 175
oystercal-d 175
OZEMPIC 88
pacerone 60
pain relief (acetaminophen) 175
pain relief (ibuprofen) 153
pain relief es (acetaminophen) 175
pain relief pm 175
pain relief pm rapid release 175
pain reliever (acetaminophen) 153, 175
pain reliever es(acetaminophn) 175
pain reliever pm ex-strength 175
paliperidone 57
panda mask 175
PANRETIN 74
pantoprazole 96
pari baby conv kit - size 1 175
pari baby conv kit - size 2 175
pari baby conv kit - size 3 175
pari bubbles pedi aerosol mask 175
pari lc sprint nebulizer set 175
pari lc sprint sinus 175
pari sinus aerosol system 175
pari trek s combo pack 176
pari trek s compact compressor 176
pari trek s portable pwr kit 176
paricalcitol 90
paroxetine hcl 57
parvlex 176
PAXLOVID 7
pazopanib 30
p-col rite 183
peak air peak flow meter 176
peak flow meter 146
pedi multivit no.194-iron sulf 177
pedia d-vite 176
pedia poly-vite with iron 176
PEDIARIX (PF) 99
pediatric bear nebulizer 176
pediatric comp-air compres neb 176
pediatric d-vite 176
pediatric enema 176
pediatric medium mask 176
pediatric panda mask 176
pediatric small mask 176
pediavance 176
PEDVAX HIB (PF) 99
peg 3350-electrolytes 94
PEGASYS 97
peg-electrolyte soln 94
PEMAZYRE 30
PEN NEEDLE, DIABETIC 102
PENBRAYA (PF) 100
penicillamine 105
PENICILLIN G POT IN DEXTROSE 15
penicillin g potassium 15
penicillin g sodium 16
penicillin v potassium 16
PENMENVY MEN A-B-C-W-Y (PF) 100
PENTACEL (PF) 100
pentamidine 13
pentoxifylline 69

pepto-bismol 176
pepto-bismol to-go 176
perampanel 38
perindopril erbumine 65
periogard 82
permethrin 79
perphenazine 57
personal best full range 176
personal best low range 176
pflex inspiratory trainer 176
pharbechlor 177
pharbedryl 177
pharbetol 177
pharbinex-dm 177
phazyme 177
phenazopyridine 177
phenelzine 58
phenobarbital 38
phenytoin 38
phenytoin sodium extended 38
phytomulti 177
phytonadione (vitamin k1) 196
PIFELTRO 7
piko 1 177
pillow mask adult 177
pillow mask child 177
pillow mask pediatric 177
pilocarpine hcl 81, 116
pimecrolimus 74
pimozide 58
pimtrea (28) 112
pinaway 177
pindolol 65
pink bismuth 155, 177, 183
pink bismuth maximum strength 180
pinworm treatment 177
pioglitazone 88
pioglitazone-glimepiride 88
pioglitazone-metformin 88
piperacillin-tazobactam 16
PIQRAY 30
pirfenidone 204
piroxicam 48
pitavastatin calcium 70
plantar wart remover 141
PLENAMINE 209
PLENVU 94
pm pain relief 155
pocket chamber 177
pocket peak flow meter 177
podofilox 74
poly-iron 177
polymyxin b sulf-trimethoprim 115
polysaccharide iron complex 177
polysporin 177
polysporin(bacitracin base) 178
poly-vi-flor gummy (arcofolin) 178
poly-vita with iron 178
pomalidomide 30
POMALYST 30
portia 28 112
posaconazole 4
potassium chlorid-d5-0.45%nacl 208
potassium chloride 208
potassium chloride in 0.9%nacl 208
potassium chloride-0.45 % nacl 208
potassium citrate 207
povidone-iodine 178
PRALUENT PEN 70
pramipexole 41
prasugrel hcl 69
pravastatin 70
praziquantel 13
prazosin 65
prebiotic inulin-fos 178
prednisolone 83
prednisolone acetate 118
prednisolone sodium phosphate 84, 118
prednisone 84
prednisone intensol 84
pregabalin 39
PREMARIN 107
premasol 10 % 209
prenatal vitamin plus low iron 209
preservision areds 178
PREVYMIS 7
PREZCOBIX 7
PREZISTA 7

PRIFTIN 13
PRIMAQUINE 13
primeaire 178
PRIMIDONE 39
primidone 39
PRIORIX (PF) 100
pro comfort spacer-adult mask 178
pro comfort spacer-child mask 178
pro comfort spacer-infant mask 178
probenecid 102
probenecid-colchicine . 102
pro-cal 178
procare compressor nebulizer 178
procare pediatric nebulizer 178
procare spacer with adult mask 178
procare spacer with child mask 178
procerv hp 178
prochamber 178
prochlorperazine 94
prochlorperazine maleate 94
procto-med hc 94
proctosol hc 94
proctozone-b 178
proctozone-gmax 179
proctozone-hc 94
prodigy mini-mist nebulizer 179
progesterone micronized 107
PROGRAF 30
PROLASTIN-C 81
prolaxa 179
PROLENSA 116
promethazine 201
promethazine vc-codeine 179
promethazine-codeine 179
promethazine-dm 179
promolaxin 179
proneb max compressor-lc plus 179
proneb max compressr-lc sprint 179
proneb ultra filter set . 179
proneb ultra ii filter assem 123
propafenone 60
propranolol 66
propylthiouracil 84
PROQUAD (PF) 100
prorenal 179
prosight 179
proteoxyme 179
protriptyline 58
pseudoephedrine hcl .. 179
psyllium husk 179
pulmo-aide compressor 180
pulmoneb lt compressor nebul 180
PULMOZYME 204
pure and gentle (saline) 180
pure comfort spacer-adult mask 180
pureair mini nebulizer 180
purecomfort peak flow meter 180
purecomfort peak flow mouthpce 180
purevita folic acid 180
purevita magnesium oxide 180
purevita vitamin d3 180
pyrazinamide 13
pyridostigmine bromide 45
pyridoxine (vitamin b6) 180, 181, 194, 195
pyrimethamine 13
q-gel mega 181
QINLOCK 30
QUADRACEL (PF) 100
quake vibratory pep ... 181
quercetin 181
quetiapine 58
QUETIAPINE 58
quin b strong 181
quinapril 66
quinapril-hydrochlorothiazide 66
quinidine sulfate 60
quinine sulfate 13
quintabs-m 181
quintabs-m iron free .. 181
quit 2 181
quit 4 181

RABAVERT (PF)..... 100
rabeprazole..... 96
RALDESY..... 58
raloxifene.....103
ramipril.....66
ranolazine.....71
rasagiline.....41
ready-to-use enema...147
ready-to-use enema (min oil)..... 183
reclipsen (28).....112
RECOMBIVAX HB (PF).100
reese's pinworm medicine.....183
refenesen..... 183
refenesen dm..... 183
refresh lacri-lube..... 183
regenemax plus..... 183
reguloid (psyllium husk).....183
reguloid (psyllium husk-sucro).....183
renal caps..... 183
renal vitamin..... 183
renal-vite..... 183
renaplex.....183
renaplex-d..... 183
rena-vite.....183
rena-vite rx.....183
reno caps.....183
repaglinide..... 88
req49 plus.....183
rescon-gg.....183
rest simply nighttime sleep.....181
RETACRIT.....97
retaine pm.....184
RETEVMO..... 30
reusable nebulizer kit 175, 184
REVCOVI..... 81
REVUFORJ.....30
REXULTI..... 58
REYATAZ..... 7
REZDIFFRA..... 81
REZLIDHIA.....31
RHOPRESSA..... 117
ribavirin..... 7
riboflavin (vitamin b2) 194
rifabutin.....13
rifampin.....13
rilpivirine hcl..... 7
riluzole.....81
rimantadine.....7
RINVOQ..... 105
RINVOQ LQ..... 105
risedronate..... 81, 103
risperidone.....58
risperidone microspheres..... 58
riteflo aerochamber... 184
ritonavir.....7
rivaroxaban..... 69
rivastigmine.....44
rivastigmine tartrate.... 44
rivelsa..... 113
rizatriptan.....42
robafen cf (phenylephrine).....184
robafen dm cough-chest congest..... 184
robitussin cough-chest cong dm.....184
robitussin elderberry max dm.....184
robitussin honey max dm..... 184
robitussin long-acting.184
ROCKLATAN.....117
roflumilast..... 204
ROMVIMZA.....31
ropinirole..... 41, 42
rosuvastatin.....71
rosyrah..... 113
ROTARIX..... 100
ROTATEQ VACCINE.....100
roweepra..... 39
ROZLYTREK..... 31
rubber mouthpiece.... 184
RUBRACA.....31
rufinamide.....39
RUKOBIA.....8
RYDAPT.....31
rynex dm..... 184
rynex pse..... 184
s-acetylglutathione.....184
sacubitril-valsartan.....71
safe tussin dm..... 184
saline mist..... 184
saline nasal..... 184
saline nasal mist..... 184
saline nose.....183
sam-e (enteric coated) 184
sam-e-tmg..... 184
sami the seal..... 184
sami the seal filter.....185

sami the seal mask..... 184
SANTYL..... 74
sapropterin.....90
saxagliptin.....88
saxagliptin-metformin..88
SCEMBLIX..... 31
scopolamine base.....94
scot-tussin expectorant.....185
SECUADO.....58
selegiline hcl..... 42
selenium sulfide.....72
SELZENTRY.....8
senexon-s..... 185
senior tabs.....185
senna.....185
senna lax.....185
senna laxative.....185
senna plus..... 185
senna with docusate sodium.....185
senna-s..... 185
senna-time s.....185
sennosides.....185
sennosides-docusate sodium.....185
sentry..... 185
sentry senior.....185
SEREVENT DISKUS..... 204
sertraline..... 58, 59
setlakin..... 113
sevelamer carbonate....81
shake that ache..... 185
sharobel.....107
SHINGRIX (PF).....101
siderol.....185
sidestream.....185
sidestream adult face mask..... 185
sidestream mask 185, 186
sidestream nebulizer..186
sidestream pediatric face mask..... 186
sidestream plus..... 186
SIGNIFOR..... 31
siladryl sa.....186
sildenafil (pulm.hypertension)... 204
silicone mask..... 186
silicone mask - infant..186
silicone mask - pediatric..... 186
siltussin sa..... 186
silver sulfadiazine..... 74
simethicone.....186
simply sleep.....186
simvastatin..... 71
sintra-es.....186
sinus 12 hour.....186
sinustar nebulizer.....186
sirolimus..... 31
SIRTURO..... 14
sitagliptin phos-metformin.....88, 89
skin treatment.....141
SKYRIZI.....72, 94
sleep aid (diphenhydramine).....186
sleep ii..... 186
sleep tablet (diphenhydramine).....183
sleep-tabs..... 186
slo-niacin..... 186
slow release iron 148, 186
smartneb compressor nebulizer.....187
smooth antacid..... 187
sodium bicarbonate... 187
sodium chloride..... 81
sodium chloride.....187
sodium chloride 0.45 % 208
sodium chloride 0.9 %.. 81
sodium chloride 3 % hypertonic..... 208
sodium chloride 5 % hypertonic..... 209
sodium oxybate..... 59
sodium phenylbutyrate 81
sodium polystyrene sulfonate.....81
sodium,potassium,mag sulfates..... 94
SOFOSBUVIR-VELPATASVIR.....8
solifenacin..... 206
SOLIQUA 100/33..... 89
solo.....187
SOLTAMOX..... 31
SOMAVERT..... 90
sominex..... 187
soothe (bismuth subsalicylate).....187
soothe hydration.....187
soothe night time lubricant..... 187
soothe regular strength..... 187

soothe xp.....187
soothe xp (pf)..... 187
sootheneb compressor nebulizer.....187
sootheneb mesh nebulizer.....187
sootheneb nbl100 adult mask.....187
sootheneb nbl100 child mask.....188
sootheneb nbl100 med cup.....188
sootheneb nbl100 mesh cap..... 188
soothing pureway-c....188
sorafenib..... 31
sorbitol..... 188
sorbugen nr..... 188
sorbutuss.....188
sotalol.....60
sotalol af.....60
space chamber..... 148
space chamber with large mask..... 148
space chamber with medium mask.....148
space chamber with small mask.....148
spectravite adult..... 141
spectravite adult 50 plus.....141
spectravite advanced formula.....141
spectravite men 50 plus.....141
spectravite men's..... 141
spectravite women.....141
spectravite women 50 plus.....141
SPIRIVA RESPIMAT..... 205
spironolactone.....66
spironolacton-hydrochlorothiaz..... 66
sprintec (28)..... 113
sps (with sorbitol).....81
ssd..... 74
st joseph aspirin..... 188
st. joseph aspirin..... 188
STEQEYMA.....72
stimulant laxative plus188
STIVARGA..... 32
STOBOCLO.....103
stomach relief..... 188
stomach relief max strength.....188
stomach relief original188
stool softener..... 188
stool softener (docusate cal)..... 188
stool softener-laxative188
stool softener-stimulant laxat.....189
strawberry c..... 195
STREPTOMYCIN..... 14
stress b with zinc..... 189
stress formula.....189
stress formula with zinc..... 189
STRIBILD..... 8
strive peak flow meter 189
strovite forte..... 189
strovite one..... 189
stye lubricant.....189
SUBVENITE..... 39
sucralfate.....96
sucrets sore throat-cough-dry..... 189
sudogest.....189
sudogest 12-hour..... 189
sulfacetamide sodium 116
sulfacetamide sodium (acne).....76
sulfacetamide-prednisolone.....116
sulfadiazine..... 16
sulfamethoxazole-trimethoprim.....16
sulfasalazine.....94
sulindac..... 48
sumatriptan.....42
sumatriptan succinate 42, 43
sunitinib malate.....32
SUNLENCA.....8
super antioxidant..... 189
super b/c..... 189
super calcium..... 189
super daily d3.....189
super multiple - low iron..... 189
super multivitamin..... 189
super thera vite m.....189
suphedrine 12 hour....155
surfak.....189
syeda..... 113
SYMPAZAN..... 39
SYMTUZA.....8

SYNJARDY 89
SYNJARDY XR 89
synovx recovery 189
SYNTHROID 91
systane complete pf ... 189
systane contacts 189
systane nighttime 190
systane pro pf 190
tab-a-vite 190
TABLOID 32
TABRECTA 32
tacrolimus 32, 74
tadalafil 207
tadalafil (pulm. hypertension) 205
TAFINLAR 32
TAGRISSO 32
TALZENNA 32
tame the flame 190
tamoxifen 32
tamsulosin 207
tarina 24 fe 113
tarina fe 1-20 eq (28) .. 113
TARPEYO 84
tazarotene 75
tazicef 10
teeny tummy infant gas relief 190
telmisartan 66
telmisartan-amlodipine 66
telmisartan-hydrochlorothiazid 66
temazepam 59
TENIVAC (PF) 101
tenofovir disoproxil fumarate 8
TEPMETKO 32
terazosin 66
terbinafine hcl 4
terbinafine hcl 190
terbutaline 205
terconazole 108
teriflunomide 44
teriparatide 103
testosterone 90
testosterone cypionate .. 90
testosterone enanthate 90
tetrabenazine 44
tetracycline 17
THALOMID 32
the magic bullet 162
THEO-24 205
theophylline 205
thera 190
thera m plus (ferrous fumarat) 190
thera-gel 190
theragran-m premier 50 plus 190
theralogix companion 138
thera-m 190
thera-m (with vitamin k) 190
therapeutic shampoo .. 141
therapeutic-m 190
thera-tabs 190
theratrum complete 50 plus/lut 190
theratrum complete 50 plus-lyc 190
theratrum complete with lutein 190
thera-vite max-m 190
therems multivitamin .. 190
therems-m 191
thiamine hcl (vitamin b1) 191, 194
thiamine mononitrate (vit b1) 194
thioridazine 59
thiothixene 59
threshold imt trainer .. 191
threshold pep device .. 191
thrivite-19 191
tiadylt er 66
tiagabine 39
TIBSOVO 32
ticagrelor 69
TICOVAC 101
tigecycline 14
tilia fe 113
timolol maleate 67, 115
tinidazole 14
TIVICAY 8
TIVICAY PD 8
tizanidine 45
TOBRADEX 117
tobramycin 115
tobramycin in 0.225 % nacl 14
tobramycin sulfate 14
tobramycin-dexamethasone 118
tofacitinib 105

tolnaftate 191
tolterodine 206
tolvaptan 90
tolvaptan (polycys kidney dis) 90
topiramate 39
toremifene 32
torsemide 67
t-plus 191
TRADJENTA 89
tramadol 48
tramadol-acetaminophen 48
trandolapril 67
tranexamic acid 108
tranylcypromine 59
travasol 10 % 209
travel-ease (meclizine) 181, 191
travoprost 117
trazodone 59
TRELEGY ELLIPTA 205
TREMFYA 73
TREMFYA ONE-PRESS 73
TREMFYA PEN 73
TREMFYA PEN INDUCTION PK(2PEN) 73
tretinoin 76
tretinoin (antineoplastic) 32
tretinoin microspheres 76
triamcinolone acetonide 79, 82
triamterene-hydrochlorothiazid 67
tri-buffered aspirin 191
tridacaine ii 74
triderm 79
trientine 81
tri-estarylla 113
trifluoperazine 59
trifluridine 115
trihexyphenidyl 42
TRIJARDY XR 89
TRIKAFTA 205
tri-legest fe 113
trilitas 76
tri-lo-estarylla 113
tri-lo-sprintec 113
trimethoprim 18
tri-mili 113
trimipramine 59
TRINTELLIX 59
triphrocaps 191
triple antibiotic 191
tri-sprintec (28) 113
TRIUMEQ 8
TRIUMEQ PD 8
tri-vylibra 114
tri-vylibra lo 113
tronvite 191
TROPHAMINE 10 % 209
tropical liquid nutrition 191
trospium 206
TRULICITY 89
TRUMENBA 101
TRUQAP 32
truzone peak flow meter 191
TUKYSA 32, 33
tum-ease 191
TURALIO 33
turqoz (28) 114
tusnel diabetic 191
tusnel-ex 191
tussin 191
tussin cf (pe-dm-guaif) 192
tussin cf cough-cold 192
tussin chest congestion 192
tussin cough-chest congestion 183
tussin dm 192
tussin dm clear 192
tussin dm cough and chest 148, 192
tussin dm max 192
tussin mucus-chest congestion 192
TWINRIX (PF) 101
TYENNE 105
TYENNE AUTOINJECTOR 105
TYPHIM VI 101
udamin sp 192
ultra freeda 192
ultra fresh pm 192
unisom simple slumbers 192
unisom sleepgels 192
unithroid 91
urea 193
urinary pain relief 193
uristat ultra 193
uristat ultra (with uti strip) 193

uro-pain 193
ursodiol 94, 95
USTEKINUMAB-TTWE ... 73
valacyclovir 8
VALCHLOR 74
valganciclovir 8
valproic acid 39
valproic acid (as sodium salt) 39
valsartan 67
valsartan-hydrochlorothiazide 67
VALTOCO 40
valtya 114
vanacof 193
vancomycin 14
VANFLYTA 33
VAQTA (PF) 101
varenicline tartrate 82
VARIVAX (PF) 101
VAXCHORA VACCINE .. 101
vegetable laxative 148, 181
vegetable lax-stool softener 193
velivet triphasic regimen (28) 114
VELSIPITY 95
VENCLEXTA 33
VENCLEXTA STARTING PACK 33
venlafaxine 59
verapamil 67
VERQUVO 71
VERSACLOZ 59
VERZENIO 33
vestura (28) 114
vienva 114
vigabatrin 40
vigadrone 40
vilazodone 59
VIMKUNYA (PF) 102
viorele (28) 114
vios aerosol delivery system 193
VIRACEPT 8
VIREAD 8
virt-caps 193
virtussin ac 193
vision formula(a-c-e-zn-se-cu) 193
vitacel (with lutein) 193
vitacore 193
vitalee 193
vitamin a 194
vitamin a palmitate 193
vitamin b-1 194
vitamin b-1 (mononitrate) 194
vitamin b-12 194
vitamin b-2 194
vitamin b-6 ..... 194, 195
vitamin c 195
vitamin c with rose hips 141, 193, 195
vitamin d2 195
vitamin d3 ..... 195, 196
vitamin d3 complete .. 196
vitamin e 196
vitamin e (dl, acetate) 196
vitamin e mixed 196
vitamin k2 159
vitamins a-d-e selenium 197
vitasure 197
vitatrum 197
VITRAKVI 33
vitrexyl 197
vitrexyl plus iron 197
vitrum senior 197
VIVOTIF 102
VIZIMPRO 33
VONJO 33
VOQUEZNA DUAL PAK .. 96
VOQUEZNA TRIPLE PAK 96
VORANIGO 33, 34
voriconazole 4
vortex adult mask 197
vortex holding chamber 197
vortex vhc frog mask-child 197
vortex vhc ladybug mask-toddlr 197
vortex vhc pediatric mask 197
VOSEVI 8
VOWST 95
vp-vite rx 197
VRAYLAR 59
vyfemla (28) 114
vylibra 114
VYZULTA 117
wal-act d cold and allergy 197
wal-dram 2 197
wal-dryl allergy 197

wal-fex allergy..... 197
wal-fex d 12 hour..... 197
wal-fex d 24 hour..... 197
wal-finate..... 197
wal-itin.....136, 197
wal-itin d..... 198
wal-itin d 12 hour..... 197
wal-mucil fiber..... 198
wal-mucil fiber (aspartame).....198
wal-mucil fiber (sugar)198
wal-mucil natural fiber lax.....198
wal-phed 12 hour..... 198
wal-phed d..... 198
wal-profen.....198
wal-proxen..... 198
wal-som (diphenhydramine).....198
wal-sporin.....198
wal-tap dm..... 198
wal-tussin cough and cold cf.....198
wal-tussin dm..... 121
wal-zyr (cetirizine)..... 198
wal-zyr (ketotifen)..... 198
wal-zyr d.....198
warfarin.....69
wart remover 183, 198, 199
WEGOVY.....81, 82
WELIREG.....34
wescaps.....199
willis the whale compressr neb.....199
windmill trainer.....199
wing tip tubing..... 199
WINREVAIR.....205
woman's laxative (bisacodyl)..... 199
women's 50 plus advanced.....199
women's 50 plus daily formula.....199
women's 50 plus multivitamin..... 199
women's daily formula 199
women's daily multivitamin..... 141
women's gentle laxative(bisac).....199
women's laxative (bisacodyl)..... 199
women's multivitamin 199
women's one daily..... 148
wymzya fe..... 114
XALKORI.....34
xarah fe..... 114
XARELTO.....69
XARELTO DVT-PE TREAT 30D START.....69
XATMEP.....34
xcellent a 3000..... 199
xcellent c..... 199
xcellent e..... 199
XCOPRI.....40
XCOPRI MAINTENANCE PACK....40
XCOPRI TITRATION PACK..... 40
XDEMVY.....116
xelria fe.....114
XERMELO.....34
XIFAXAN..... 14
XIGDUO XR..... 89
XOFLUZA.....8
XOLAIR.....205, 206
XOSPATA..... 34
XPOVIO.....34
XTANDI..... 34
xulane.....108
xvite.....199
xymodine.....200
yelets..... 200
YF-VAX (PF).....102
yulithira..... 34
yuvafem.....107
zafemy.....108
zafirlukast.....206
zantac-360 (famotidine)..... 200
ZEJULA.....35
ZELBORAF.....35
zenatane.....76
ZENBEXUS.....35
ZENPEP..... 95
zidovudine..... 8, 9
zinc amino acid chelate.....200
zinc gluconate..... 200
zinc sulfate..... 200
ziprasidone hcl.....59
ziprasidone mesylate....60
ZIRGAN..... 115
ZOLINZA.....35
zolmitriptan.....43
zolpidem.....60

ZONISADE..... 40
zonisamide..... 40
zoo friends.....200
zostrix..... 200
zostrix-hp.....200
zostrix-hp foot..... 200
zovia 1-35 (28).....114
ZTALMY..... 40
ZURZUVAE..... 60
ZYKADIA.....35
ZYMFENTRA.....95
zyncof..... 200

Notice of Availability of Language Assistance Services and Auxiliary Aids and Services

ATTENTION: If you speak a language other than English, free language assistance services are available to you. Appropriate auxiliary aids and services to provide information in accessible formats are also available free of charge. Call 1-844-428-2224 (TTY: 711).

አማርኛ ይነበብ፦ ነጻ የቋንቋ እገዛ አገልግሎቶች ለእርስዎ ይገኛሉ። በተጨማሪም አግባብነት ያላቸው ለእርስዎ ተደራሽ በሆኑ ቅርጸቶች መረጃ የሚያቀርቡልዎ አጋዥ መሳሪያዎች እና አገልግሎቶችን ከክፍያ ነጻ ያገኛሉ። ወደ 1-844-428-2224 (TTY: 711) ይደውሉ።

العربية انتباه: تتوفر لك خدمات مساعدة لغوية مجانية. تتوفر كذلك مجانًا مساعِدات وخدمات إضافية ملائمة لتزويد المعلومات بتنسيقات قابلة للوصول إليها. اتصل على الرقم 1-844-428-2224 (TTY: 711).

Հայերեն ՈՒՇԱԴՐՈՒԹՅՈՒՆ. Դուք կարող եք օգտվել անվճար լեզվական ծառայություններից: Անվճար հասանելի են նաև համապատասխան օժանդակ միջոցներ և ծառայություններ՝ մատչելի ձևաչափերով տեղեկություններ տրամադրելու համար: Զանգահարեք 1-844-428-2224 (TTY՝ 711):

বাংলা খেয়াল করুন: আপনার জন্য বিনামূল্যে ভাষা পরিষেবার সুবিধা রয়েছে। বিনামূল্যে অ্যাক্সেসযোগ্য ফর্ম্যাটে তথ্য দিতে উপযুক্ত সহায়ক উপকরণ এবং পরিষেবাও উপলব্ধ রয়েছে। এখানে কল করুন

1-844-428-2224 (TTY: 711)।

Français cadien COMMUNIQUE: Des services d’aide linguistique sans frais sont à votre disposition. Des aides et services auxiliaires appropriés pour fournir des informations en formats accessibles sont également proposés sans frais. Composez le 1-844-428-2224 (TTY : 711).

简体中文 注意：我们为您提供免费的语言协助服务，同时也可免费提供适当的辅助设施与服务，以便提供无障碍格式的信息。请致电 1-844-428-2224（TTY：711）。

Y0020_WCM_4336850_MLT_NAMA_C Internal Approved 06162025 NA LCnC 7273360_NA7WCMINSMLT_M_NAMI_LP

繁體中文 注意：我們爲您提供免費的語言協助服務，還免費提供適當的輔助工具和服務，以無障礙格式提供資訊。請致電 1-844-428-2224 (TTY：711)。

دری توجه: خدمات رایگان کمک زبانی برای شما فراهم است. وسایل و خدمات کمکی مناسب برای ارائه اطلاعات به شکل قابل دسترس نیز به طور رایگان در دسترس می‌باشند. لطفاً با شماره 1-844-428-2224 (TTY: 711) تماس بگیرید.

فارسی توجه: خدمات کمک زبانی رایگان برای شما دردسترس است. ابزارها و خدمات کمکی مناسب برای ارائه اطلاعات در قالب‌های قابل‌دسترس نیز به‌صورت رایگان ارائه می‌شوند. لطفاً با شماره 1-844-428-2224 (TTY: 711) تماس بگیرید.

Français REMARQUE : des services d’assistance linguistique gratuits sont à votre disposition. Des services et aides pour obtenir des informations dans des formats accessibles sont également disponibles gratuitement. Appelez le 1-844-428-2224 (TTY : 711).

Deutsch ACHTUNG: Sprachdienstleistungen stehen Ihnen kostenlos zur Verfügung. Geeignete zusätzliche Unterstützung und Dienstleistungen für Informationen in zugänglichen Formaten stehen Ihnen ebenfalls kostenlos zur Verfügung. Rufen Sie folgende Nummer an: 1-844-428-2224 (TTY: 711).

ગુજરાતી ધ્યાન આપવાની જરૂર છે: તમારા માટે ભાષા સંબંધી સહાયતાની મફત સેવાઓ ઉપલબ્ધ છે. ઍક્સેસ કરી શકાય તેવાં ફોર્મેટમાં માહિતી પ્રદાન કરવા માટે યોગ્ય સહાયક સહાય અને સેવાઓ પણ મફતમાં ઉપલબ્ધ છે.
1-844-428-2224 (TTY: 711) પર કૉલ કરો.

Kreyòl Ayisyen ATANSYON: Sèvis èd gratis pou lang disponib pou ou. Aparèy oksilyè ki bay asistans ak sèvis ki apwopriye pou bay enfòmasyon nan fòma aksesib yo disponib gratis tou. Rele nan 1-844-428-2224 (TTY: 711).

ʻŌlelo Hawaiʻi HOʻĀKAKA: Loaʻa iā ʻoe ke kōkua manuahi no ka unuhi ʻōlelo. Loaʻa pū kekahi mau pono kōkua kūpono a me nā lawelawe e hāʻawi ai i ka ʻike i nā ʻano ʻano hiki ke kiʻi ʻia, me ka uku ʻole. Kelepona i 1-844-428-2224 (TTY: 711).

हिंदी ध्यान दें: आपके लिए निःशुल्क भाषा सहायता सेवाएं उपलब्ध हैं. एक्सेस करने योग्य फ़ॉर्मेट में जानकारी प्रदान करने के लिए उपयुक्त सहायक साधन और सेवाएं भी निःशुल्क उपलब्ध हैं. 1-844-428-2224 (TTY: 711) पर कॉल करें.

Lus Hmoob TSEEM CEEB: Muaj cov kev pab txhais lus pub dawb rau koj. Tsis tas li ntawd, kuj tseem yuav muaj cov kev pab thiab cov kev pab cuam tsim nyog los ua hom ntaub ntawv uas siv tau pub dawb rau koj thiab. Hu rau 1-844-428-2224 (TTY: 711).

Igbo NLERUANYA: A na-enye gị ọrụ enyemaka asụsụ n’efu. Enyemaka na ọrụ ndị kwesịrị ekwesị iji nye ozi n’ụdị ndị dị mfe inweta dikrawa n’akwụghị ụgwọ. Kpọọ 1-844-428-2224 (TTY: 711).

Iloko PALIIWEN: Adda dagiti libre a serbisio a tulong iti pagsasao. Dagiti maitutop a katulongan ken serbisio a mangipaay iti impormasion kadagiti nalaka a maawatan a pormat ket libre met a magun-odan. Tawagan ti 1-844-428-2224 (TTY: 711).

Italiano ATTENZIONE: sono disponibili servizi di assistenza linguistica gratuiti. Sono inoltre disponibili supporti e servizi ausiliari gratuiti adatti a fornire le informazioni in formati accessibili. Chiamare il numero 1-844-428-2224 (TTY: 711).

日本語 注意：言語支援サービスを無料で提供しています。情報をアクセシビリティに対応した形式で提供する各種補助支援およびサービスも無料です。1-844-428-2224 (TTY: 711) にお電話ください。

ಕನ್ನಡ ನಿಮ್ಮ ಗಮನಕ್ಕೆ: ನಿಮಗೆ ಉಚಿತ ಭಾಷಾ ಸಹಾಯ ಸೇವೆಗಳು ಲಭ್ಯವಿದೆ. ಪ್ರವೇಶಿಸಬಹುದಾದ ಸ್ವರೂಪಗಳಲ್ಲಿ ಮಾಹಿತಿಯನ್ನು ಒದಗಿಸಲು ಸೂಕ್ತವಾದ ಸಹಾಯಕ ಸಾಧನಗಳು ಮತ್ತು ಸೇವೆಗಳು ಸಹ ಉಚಿತವಾಗಿ ಲಭ್ಯವಿದೆ. ಕರೆ ಮಾಡಿ 1-844-428-2224 (TTY: 711).

한국어 주의: 무료 언어 지원 서비스를 이용하실 수 있습니다. 정보 제공을 위해 적합한 보조 도구 및 서비스 또한 액세스 가능한 형식으로 무료 이용이 가능합니다. 1-844-428-2224 (TTY: 711)번으로 전화해 주십시오.

ພາສາລາວ ໝາຍເຫດ: ມີບໍລິການຊ່ວຍເຫຼືອດ້ານພາສາຟຣີສຳລັບທ່ານ ນອກຈາກນີ້ຍັງມີ ບໍລິການຊ່ວຍເຫຼືອ ແລະ ບໍລິການເສີມທີ່ເໝາະສົມເພື່ອໃຫ້ຂໍ້ມູນທີ່ສາມາດເຂົ້າເຖິງໄດ້ໂດຍ ບໍ່ຕ້ອງເສຍຄ່າໃຊ້ຈ່າຍເພີ່ມເຕີມ. ໂທ 1-844-428-2224 (TTY: 711).

മലയാളം ശ്രദ്ധിക്കൂ: നിങ്ങൾക്ക് സൗജന്യ ഭാഷാ സഹായ സേവനങ്ങൾ ലഭ്യമാണ്. ആക്സസ് ചെയ്യാവുന്ന ഫോർമാറ്റുകളിൽ വിവരങ്ങൾ നൽകുന്നതിന്, സൗജന്യമായി അനുയോജ്യമായ ഓക്സിലിയറി സഹായങ്ങളും സേവനങ്ങളും ലഭ്യമാണ്. 1-844-428-2224 (TTY: 711) എന്ന നമ്പറിൽ വിളിക്കുക.

तुमच्यासाठी विनामूल्य भाषा सहाय्य सेवा उपलब्ध आहेत. सुलभ स्वरूपात माहिती प्रदान करण्यासाठी योग्य अतिरिक्त मदत आणि सेवादेखील विनामूल्य उपलब्ध आहेत. 1-844-428-2224 (TTY: 711) वर कॉल करा.

Diné Bizaad BAA NAANISH'AGHA: T'aadoo baabhilinigoo saad 'ahiilka 'ana'alwo' biniit'aa bineesh'a bil hadlee' goo ni. Ch'idi'nishaah t'aala'i bi'aa yilts'ilgo bika 'iishyeed 'aadoo biniit'aa goo bik'inaasdzil bil ch'idaash'a di baa honit'l' ya'akogoo bineesh'a aldo' bil hadlee' t'aadoo baabhilinigoo 'at'e yeel. Bika 'adishni 1-844-428-2224 (TTY: 711).

नेपाली ध्यान दिनुहोस्: तपाईंका लागि भाषासम्बन्धी सहायता सेवाहरू निःशुल्क रूपमा उपलब्ध छन्। सुलभ फर्म्याटहरूमा जानकारी प्रदान गर्नका निम्ति उचित सहायक सामग्री र सेवाहरू पनि निःशुल्क रूपमा उपलब्ध छन्। 1-844-428-2224 (TTY: 711) मा कल गर्नुहोस्।

Pennsylvania Deitsch GEB ACHT: Schprooch Helfe sin meeglich mitaus Koscht. Rechtliche Auxiliary Aids un Helfe um Information zu gewwe in helfreiche Formats sin aa meeglich mit aus Koscht. Ruf 1-844-428-2224 (TTY: 711).

Polski UWAGA: usługi wsparcia językowego są dostępne nieodpłatnie. Bezpłatnie oferowane są również dodatkowe pomoce i usługi pozwalające na przekazanie informacji w formacie przystępnym dla odbiorcy. Zadzwoń pod numer 1-844-428-2224 (TTY: 711).

Português ATENÇÃO: estão disponíveis serviços de assistência gratuitos no seu idioma. Também estão disponíveis apoios auxiliares e serviços adequados que oferecem informações em formatos acessíveis e sem custos. Ligue para 1-844-428-2224 (TTY: 711).

ਮੁਫ਼ਤ ਭਾਸ਼ਾ ਸਹਾਇਤਾ ਸੇਵਾਵਾਂ ਤੁਹਾਡੇ ਲਈ ਉਪਲਬਧ ਹਨ। ਪਹੁੰਚਣਯੋਗ ਫਾਰਮੈਟਾਂ ਵਿੱਚ ਜਾਣਕਾਰੀ ਪ੍ਰਦਾਨ ਕਰਨ ਲਈ ਢੁਕਵੇਂ ਸਹਾਇਕ ਸਾਧਨ ਅਤੇ ਸੇਵਾਵਾਂ ਵੀ ਮੁਫ਼ਤ ਵਿੱਚ ਉਪਲਬਧ ਹਨ। 1-844-428-2224 (TTY: 711) 'ਤੇ ਕਾਲ ਕਰੋ।

Русский ВНИМАНИЕ! Вам доступны бесплатные услуги языковой поддержки. Вы также можете бесплатно получить соответствующие вспомогательные средства и услуги, направленные на предоставление информации в доступных форматах. Позвоните по номеру 1-844-428-2224 (TTY: 711).

Gagana Sāmoa FA'AALIGA: O lo'o avanoa fua ia te oe auaunaga fesoasoani i le gagana. E avanoa fo'i fua fesoasoani ma meafaigaluega talafeagai e tu'uina atu ai fa'amatalaga i auala faigofie ona malamalama ai. Vala'au 1-844-428-2224 (TTY: 711).

Srpski PAŽNJA: Dostupne su vam besplatne usluge jezičke pomoći. Odgovarajuća pomagala i pomoćne usluge koje nude informacije o pristupačnim formatima takođe su besplatne. Pozovite broj 1-844-428-2224 (TTY: 711).

Soomaali DIGNIIN: Adeegyada kaalmada luqadda bilaashka ah ayaa kuu diyaar ah. Sidoo kale, qalab iyo adeegyo kaabayaal ku habboon ayaa diyaar ah si macluumaadka loogu helo qaabab sahlan oo la heli karo, iyadoo aan wax kharash ah lagaaga qaadin. Wac 1-844-428-2224 (TTY: 711).

Español ATENCIÓN: Contamos con servicios de asistencia lingüística que se encuentran disponibles para usted de manera gratuita. También se encuentran disponibles de manera gratuita ayudas y servicios auxiliares adecuados para proporcionar información en formatos accesibles. Llame al 1-844-428-2224 (TTY: 711).

Kiswahili TANBIHI: Huduma za usaidizi wa lugha zinapatikana bila malipo kwako. Nyenzo na huduma sahihi za usaidizi za kutoa maelezo katika miundo inayoweza kufikiwa pia zinapatikana bila malipo. Piga simu 1-844-428-2224 (TTY: 711).

Tagalog ATENSYON: May mga libreng serbisyo ng tulong sa wika na available para sa inyo. Available din nang libre ang mga naaangkop na karagdagang tulong at serbisyo para makapagbigay ng impormasyon sa mga accessible na format. Tumawag sa 1-844-428-2224 (TTY: 711).

தமிழ் உங்களின் கவனத்திற்கு: உங்களுக்கு மொழி உதவிக்கான இலவச சேவைகள் கிடைக்கின்றன. பயன்படுத்தக்கூடிய வடிவங்களில் தகவல்களை வழங்குவதற்குப் பொருத்தமான புலன் உணர்வுக் கருவிகளும் சேவைகளும் இலவசமாகக் கிடைக்கின்றன. 1-844-428-2224 (TTY: 711) **என்ற எண்ணை அழைத்திடுங்கள்.**

తెలుగు గమనిక: మీకు ఉచిత భాష సంబంధ సహాయక సేవలు అందుబాటులో ఉన్నాయి. యాక్సెస్ చేయదగిన ఫార్మాట్‌లలో సమాచారాన్ని అందించడానికి తగిన సహాయక టూల్‌లు, సేవలు కూడా ఉచితంగా అందుబాటులో ఉన్నాయి.

1-844-428-2224 (TTY: 711) **నంబర్‌కి కాల్ చేయండి.**

ไทย โปรดทราบ: พร้อมให้บริการความช่วยเหลือทางภาษาฟรีแก่คุณ และมีความช่วยเหลือและบริการเสริมที่เหมาะสมเพื่อให้ข้อมูลในรูปแบบที่เข้าถึงได้โดยไม่มีค่าใช้จ่ายด้วยเช่นกัน โทร 1-844-428-2224 (TTY: 711)

Twi HYƐ NO NSO: Kasa ho mmoa dwumadie ahodoɔ wɔ hɔ ma wo a wontua hwee. Nneɛma a ɛbɛboa wo ama wate nsɛm ne dwumadie ahodoɔ a ɛde nsɛm bɛma wo wɔ akwan bebree so nso wɔ hɔ a wontua hwee. Frɛ 1-844-428-2224 (TTY: 711).

Українська УВАГА! Вам доступні безкоштовні послуги мовної допомоги. Відповідні допоміжні засоби та послуги для надання інформації у доступних форматах також доступні безкоштовно. Зателефонуйте за номером 1-844-428-2224 (TTY: 711).

اردو توجہ: زبان معاونت کی خدمات آپ کے لیے مفت دستیاب ہیں۔ معلومات کو قابلِ رسائی شکل میں فراہم کرنے کے لیے مناسب معاون امداد اور خدمات بھی مفت دستیاب ہیں۔
1-844-428-2224 (TTY: 711) پر کال کریں۔

Tiếng Việt LƯU Ý: Chúng tôi có cung cấp dịch vụ hỗ trợ ngôn ngữ miễn phí. Các dịch vụ và trợ giúp bổ trợ phù hợp để cung cấp thông tin ở các định dạng có thể truy cập cũng được cung cấp miễn phí. Gọi 1-844-428-2224 (TTY: 711).

ייִדיש אויפֿמערקזאַמקייט: פרייע שפּראַך הילף סערוויסעס זענען פֿאַר אײַך פֿאַראַן. פֿאַסיקע הילפסמיטלען און סערוויסעס צו צושטעלן אינפֿאָרמאַציע אין צוגענגלעכע פֿאָרמאַטן זענען אויך פֿאַראַן פריי פֿון אָפּצאָל.
רופֿט 1-844-428-2224 (TTY: 711).

Yorùbá ÀKÍYÈSÍ: Àwọn iṣẹ́ ìránlọ́wọ́ ti èdè wà nílẹ̀ fún ọ lọ́fẹ̀ẹ́. Àwọn iṣẹ́ àti àwọn ìrànwọ́ arannílọ́wọ́ tóyẹ láti pèsè ìwífúnni ní àwọn ọ̀nà kíkọsílẹ̀ tóṣeé ráàyè sí tún wà nílẹ̀ bákan náà lọ́fẹ̀ẹ́ láisan owó rárá. Pe 1-844-428-2224 (TTY: 711).



This formulary was updated on 10/15/2026.

For more recent information or other questions, please contact us, Wellcare Member Services at **1-844-536-2167** (TTY users should call **711**), between October 1 and March 31, representatives are available seven days a week, 8 a.m. to 8 p.m., between April 1 and September 30, representatives are available Monday–Friday, 8 a.m. to 8 p.m., or visit **go.wellcare.com/DE**.