2026 Premium Standard Formulary

Effective July 1, 2026

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

Call the number on your member ID card.

Visit your plan's website on your member ID card to:

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

Understanding your formulary

What is a formulary?

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

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

How do I use my formulary?

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

What are tiers?

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

About this formulary

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

When does the formulary change?

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

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

Why are some medications excluded from coverage?

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

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

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

Medication tips

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

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

What if my doctor writes a brand-name prescription?

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

What if I am taking a specialty medication?

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

Over-the-counter medications (OTC)

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

Reading your formulary

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

Tier information

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

Drug tier	Includes		Helpful tips
Tier 1	$	**Lower-cost** generics and some brand name	Use tier 1 drugs for the lowest out-of-pocket costs.
Tier 2	$$	**Mid-range cost** preferred brand name	Use tier 2 drugs instead of tier 3 to help reduce your out-of-pocket costs.
Tier 3	$$$	**Higher-cost** brand name and some generics	Many tier 3 drugs have lower-cost options in tier 1 or 2. Ask your doctor if they could work for you.
Tier 4	$	**Lower-cost** specialty	Use tier 4 for the lowest specialty out-of-pocket costs.
Tier 5	$$	**Mid-range cost** specialty	Use tier 5 drugs instead of tier 6 to help reduce your out-of-pocket costs.
Tier 6	$$$	**Higher-cost** specialty	Many tier 6 drugs have lower-cost options in tier 4 or 5. Ask your doctor if they could work for you.

Drug list information

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

PA	**Prior authorization** – Your doctor is required to give more information to determine coverage.
QL	**Quantity limit** – Medication may be limited to a certain quantity.
SP	**Specialty medication** – Medication is designated as specialty.
ST	**Step therapy** – Must try lower-cost medication(s) before a higher-cost medication can be covered.
++	**Benefit design options** – Coverage is determined by your prescription medication benefit plan.
HDHP	High deductible health plan preventive medication
FER	Fertility/Infertility medication
WM	Weight management
CP	Oral chemotherapy
VAX	Vaccines

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Table of Contents

Analgesics - Drugs for Pain 6
Analgesics - Drugs for Pain and Inflammation 9
Anesthetics 9
Anti-Addiction / Substance Abuse Treatment Agents 10
Antibacterials 10
Anticoagulants 13
Anticonvulsants - Drugs for Seizures 14
Antidementia Agents - Drugs for Alzheimer's Disease and Dementia 15
Antidepressants 16
Antiemetics - Drugs for Nausea and Vomiting 17
Antifungals 18
Antigout Agents 19
Antimigraine Agents 19
Antimyasthenic Agents 20
Antimycobacterials 20
Antineoplastics - Drugs for Cancer 20
Antiparasitics 24
Antiparkinson Agents 24
Antiplatelets 25
Antipsychotics - Drugs for Mood Disorders 25
Antivirals 27
Anxiolytics - Drugs for Anxiety 29
Bipolar Agents - Drugs for Mood Disorders 30
Blood Products and Modifiers - Drugs for Blood Disorders 30
Cardiovascular Agents - Drugs for Heart and Circulation Conditions 31
Central Nervous System Agents 36
Central Nervous System Agents - Drugs for Attention Deficit Disorder 36
Central Nervous System Agents - Drugs for Multiple Sclerosis 37
Central Nervous System Agents - Miscellaneous 38
Dental and Oral Agents - Drugs for Mouth and Throat Conditions 39
Dermatological Agents - Drugs for Skin Conditions 40
Diabetes - Antidiabetic Agents 43
Diabetes - Glucose Monitoring 44
Diabetes - Glycemic Agents 45
Diabetes - Insulins 46
Electrolytes / Minerals / Metals / Vitamins 47
Gastrointestinal Agents - Drugs for Acid Reflux and Ulcer 49
Gastrointestinal Agents - Drugs for Bowel, Intestine and Stomach Conditions 49
Genetic or Enzyme Disorder - Drugs for Replacement, Modification, Treatment 51
Genitourinary Agents - Drugs for Bladder, Genital and Kidney Conditions 51
Genitourinary Agents - Drugs for Prostate Conditions 52
Hormonal Agents - Adrenal 52
Hormonal Agents - Men's Health 53
Hormonal Agents - Pituitary 53
Hormonal Agents - Selective Estrogen Receptor Modifying Agents 55
Hormonal Agents - Sex Hormones and Birth Control 55
Hormonal Agents - Thyroid 59
Immunological Agents - Drugs for Immune System Stimulation or Suppression 59
Immunological Agents - Drugs for Vaccination 64
Inflammatory Bowel Disease Agents 65

Metabolic Bone Disease Agents 65
Metabolic Bone Disease Agents - Drugs for Osteoporosis 65
Metabolic Bone Disease Agents - Other 66
Miscellaneous Therapeutic Agents 66
Ophthalmic Agents - Drugs for Eye Allergy, Infection and Inflammation 70
Ophthalmic Agents - Drugs for Glaucoma 71
Ophthalmic Agents - Drugs for Miscellaneous Eye Conditions 72
Otic Agents - Drugs for Ear Conditions 72
Respiratory Tract / Pulmonary Agents - Drugs for Allergies, Cough, Cold 73
Respiratory Tract / Pulmonary Agents - Drugs for Asthma and Other Lung Conditions 73
Respiratory Tract / Pulmonary Agents - Drugs for Cystic Fibrosis 76
Respiratory Tract / Pulmonary Agents - Drugs for Pulmonary Hypertension 77
Skeletal Muscle Relaxants - Drugs for Muscle Pain and Spasm 77
Sleep Disorder Agents 78

Drug Name	Drug Tier	Notes
Analgesics - Drugs for Pain		
ACETAMINOPHEN-CODEINE ORAL SOLUTION	2	QL (136 ML per 1 day)
acetaminophen-codeine oral tablet 300-15 mg	1	QL (13 EA per 1 day)
acetaminophen-codeine oral tablet 300-30 mg	1	QL (10 EA per 1 day)
acetaminophen-codeine oral tablet 300-60 mg	1	QL (5 EA per 1 day)
APAP-CAFF-DIHYDROCODEINE	3	QL (12 EA per 1 day)
ascomp-codeine	1	
bac (butalbital-acetamin-caff)	1	
BELBUCA	2	PA; QL (2 EA per 1 day)
buprenorphine	1	PA; QL (0.15 EA per 1 day)
butalbital-acetaminophen oral tablet 50-325 mg	1	
butalbital-apap-caff-cod oral capsule 50-325-40-30 mg	1	
butalbital-apap-caffeine oral capsule 50-300-40 mg	1	
butalbital-apap-caffeine oral tablet	1	
butalbital-asa-caff-codeine	1	
butalbital-aspirin-caffeine	1	
butorphanol tartrate nasal	1	QL (2.5 ML per 1 fill)
CODEINE SULFATE ORAL TABLET 15 MG	2	QL (21 EA per 1 day)
CODEINE SULFATE ORAL TABLET 60 MG	2	QL (5 EA per 1 day)
codeine sulfate tablet 30 mg oral	1	QL (10 EA per 1 day)
CODEINE SULFATE TABLET 30 MG ORAL	3	QL (10 EA per 1 day)
endocet oral tablet 10-325 mg	1	QL (3 EA per 1 day)
endocet oral tablet 2.5-325 mg	1	QL (12 EA per 1 day)
endocet oral tablet 5-325 mg	1	QL (6 EA per 1 day)
endocet oral tablet 7.5-325 mg	1	QL (4 EA per 1 day)
FENTANYL CITRATE-NACL INTRAVENOUS SOLUTION 1.25-0.9 MG/250ML-%	3	
FENTANYL CITRATE-NACL INTRAVENOUS SOLUTION PREFILLED SYRINGE 10-0.9 MCG/2ML-%, 5-0.9 MCG/ML-%, 550-0.9 MCG/55ML-%	3	
FENTANYL CITRATE-NACL SOLUTION PREFILLED SYRINGE 10-0.9 MCG/ML-% INTRAVENOUS	3	
fentanyl transdermal patch 72 hour 100 mcg/hr, 75 mcg/hr	1	PA; QL (1 EA per 1 day)
fentanyl transdermal patch 72 hour 12 mcg/hr, 25 mcg/hr, 37.5 mcg/hr, 50 mcg/hr, 62.5 mcg/hr, 87.5 mcg/hr	1	PA; QL (0.5 EA per 1 day)
hydrocodone bitartrate er oral tablet er 24 hour abuse-deterrent 100 mg, 20 mg, 30 mg, 40 mg, 60 mg, 80 mg	1	PA; QL (1 EA per 1 day)
HYDROCODONE BITARTRATE ER ORAL TABLET ER 24 HOUR ABUSE-DETERRENT 120 MG	2	PA; QL (1 EA per 1 day)

Drug Name	Drug Tier	Notes
HYDROCODONE-ACETAMINOPHEN ORAL SOLUTION 10-300 MG/15ML	3	QL (73.5 ML per 1 day)
hydrocodone-acetaminophen oral solution 2.5-108 mg/5ml, 5-217 mg/10ml, 7.5-325 mg/15ml	1	QL (98 ML per 1 day)
hydrocodone-acetaminophen oral tablet 10-300 mg, 10-325 mg	1	QL (4 EA per 1 day)
HYDROCODONE-ACETAMINOPHEN ORAL TABLET 2.5-325 MG	3	QL (12 EA per 1 day)
hydrocodone-acetaminophen oral tablet 5-300 mg, 5-325 mg	1	QL (9 EA per 1 day)
hydrocodone-acetaminophen oral tablet 7.5-300 mg, 7.5-325 mg	1	QL (6 EA per 1 day)
HYDROCODONE-IBUPROFEN ORAL TABLET 10-200 MG	3	QL (4 EA per 1 day)
HYDROCODONE-IBUPROFEN ORAL TABLET 5-200 MG	3	QL (9 EA per 1 day)
hydrocodone-ibuprofen oral tablet 7.5-200 mg	1	QL (6 EA per 1 day)
hydromorphone hcl er	1	PA; QL (2 EA per 1 day)
hydromorphone hcl oral liquid	1	QL (10 ML per 1 day)
hydromorphone hcl oral tablet 2 mg	1	QL (5 EA per 1 day)
hydromorphone hcl oral tablet 4 mg	1	QL (2 EA per 1 day)
hydromorphone hcl oral tablet 8 mg	1	QL (1 EA per 1 day)

Drug Name	Drug Tier	Notes
HYDROMORPHONE HCL-NACL INTRAVENOUS SOLUTION 25-0.9 MG/50ML-%, 30-0.9 MG/30ML-%, 50-0.9 MG/50ML-%, 6-0.9 MG/30ML-%	3	
HYDROMORPHONE HCL-NACL INTRAVENOUS SOLUTION PREFILLED SYRINGE 0.2-0.9 MG/0.2ML-%, 0.5-0.9 MG/0.5ML-%, 1-0.9 MG/5ML-%, 1-0.9 MG/ML-%, 2-0.9 MG/ML-%, 50-0.9 MG/50ML-%, 55-0.9 MG/55ML-%	3	
HYDROMORPHONE HCL-NACL SOLUTION 20-0.9 MG/100ML-% INTRAVENOUS	3	
HYDROMORPHONE HCL-NACL SOLUTION PREFILLED SYRINGE 10-0.9 MG/50ML-% INTRAVENOUS	3	
HYDROMORPHONE HCL-NACL SOLUTION PREFILLED SYRINGE 6-0.9 MG/30ML-% INTRAVENOUS	3	
HYSINGLA ER	2	PA; QL (1 EA per 1 day)
JOURNAVX	3	QL (2.5 EA per 1 day)
MEPERIDINE HCL ORAL SOLUTION	3	QL (49 ML per 1 day)
meperidine hcl oral tablet	1	QL (9 EA per 1 day)
methadone hcl oral tablet	1	PA
morphine sulfate (concentrate) solution 100 mg/5ml oral	1	QL (2.4 ML per 1 day)

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Drug Name	Drug Tier	Notes
MORPHINE SULFATE (CONCENTRATE) SOLUTION 100 MG/5ML ORAL	3	QL (2.4 ML per 1 day)
morphine sulfate er	1	PA; QL (3 EA per 1 day)
MORPHINE SULFATE ER BEADS ORAL CAPSULE EXTENDED RELEASE 24 HOUR 120 MG	2	PA; QL (2 EA per 1 day)
MORPHINE SULFATE ER BEADS ORAL CAPSULE EXTENDED RELEASE 24 HOUR 30 MG, 45 MG, 60 MG, 75 MG, 90 MG	2	PA; QL (1 EA per 1 day)
MORPHINE SULFATE INTRAVENOUS SOLUTION 0.5 MG/ML	3	
MORPHINE SULFATE SOLUTION 1 MG/ML INJECTION	3	
MORPHINE SULFATE SOLUTION 1 MG/ML INTRAVENOUS	3	
morphine sulfate solution 10 mg/5ml oral	1	QL (24.5 ML per 1 day)
MORPHINE SULFATE SOLUTION 10 MG/5ML ORAL	3	QL (24.5 ML per 1 day)
morphine sulfate solution 20 mg/5ml oral	1	QL (12.25 ML per 1 day)
MORPHINE SULFATE SOLUTION 20 MG/5ML ORAL	3	QL (12.25 ML per 1 day)
morphine sulfate tablet 15 mg oral	1	QL (3 EA per 1 day)
MORPHINE SULFATE TABLET 15 MG ORAL	3	QL (3 EA per 1 day)
morphine sulfate tablet 30 mg oral	1	QL (1 EA per 1 day)
MORPHINE SULFATE TABLET 30 MG ORAL	3	QL (1 EA per 1 day)
MORPHINE SULFATE-NACL INTRAVENOUS SOLUTION 500-0.9 MG/100ML-%	3	
MORPHINE SULFATE-NACL INTRAVENOUS SOLUTION PREFILLED SYRINGE 150-0.9 MG/30ML-%, 2-0.9 MG/ML-%, 4-0.9 MG/ML-%, 55-0.9 MG/55ML-%	3	
oxycodone hcl oral capsule	1	QL (6 EA per 1 day)
oxycodone hcl oral concentrate	1	QL (1.6 ML per 1 day)
oxycodone hcl oral solution	1	QL (32.6 ML per 1 day)
oxycodone hcl oral tablet 10 mg	1	QL (3 EA per 1 day)
oxycodone hcl oral tablet 15 mg	1	QL (2 EA per 1 day)
oxycodone hcl oral tablet 20 mg, 30 mg	1	QL (1 EA per 1 day)
oxycodone hcl oral tablet 5 mg	1	QL (6 EA per 1 day)
OXYCODONE-ACETAMINOPHEN ORAL SOLUTION 5-325 MG/5ML	3	QL (32.6 ML per 1 day)
oxycodone-acetaminophen oral tablet 10-325 mg	1	QL (3 EA per 1 day)
oxycodone-acetaminophen oral tablet 2.5-325 mg	1	QL (12 EA per 1 day)
oxycodone-acetaminophen oral tablet 5-325 mg	1	QL (6 EA per 1 day)
oxycodone-acetaminophen oral tablet 7.5-325 mg	1	QL (4 EA per 1 day)
OXYCONTIN	2	PA; QL (4 EA per 1 day)
OXYMORPHONE HCL ER	3	PA; QL (4 EA per 1 day)

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Drug Name	Drug Tier	Notes
oxymorphone hcl oral tablet 10 mg	1	QL (1 EA per 1 day)
oxymorphone hcl oral tablet 5 mg	1	QL (3 EA per 1 day)
PENTAZOCINE-NALOXONE HCL	2	QL (5 EA per 1 day)
tapentadol hcl oral tablet 100 mg, 75 mg	1	QL (1 EA per 1 day)
tapentadol hcl oral tablet 50 mg	1	QL (2 EA per 1 day)
TENCON	3	
TRAMADOL HCL (ER BIPHASIC) ORAL TABLET EXTENDED RELEASE 24 HOUR	3	PA; QL (1 EA per 1 day)
tramadol hcl er	1	PA; QL (1 EA per 1 day)
tramadol hcl oral tablet 100 mg	1	QL (2 EA per 1 day)
tramadol hcl oral tablet 50 mg	1	QL (5 EA per 1 day)
tramadol-acetaminophen	1	QL (6 EA per 1 day)
TREZIX	3	QL (12 EA per 1 day)
XTAMPZA ER	2	PA; QL (4 EA per 1 day)
Analgesics - Drugs for Pain and Inflammation		
celecoxib oral	1	QL (2 EA per 1 day)
diclofenac potassium oral tablet 50 mg	1	
diclofenac sodium er	1	
diclofenac sodium oral	1	
diflunisal oral	1	
etodolac	1	
etodolac er	1	
FLURBIPROFEN ORAL TABLET 100 MG	3	

Drug Name	Drug Tier	Notes
FLURBIPROFEN ORAL TABLET 50 MG	2	
ibuprofen oral suspension 100 mg/5ml, 200 mg/10ml	1	
IBUPROFEN ORAL TABLET 300 MG	3	
ibuprofen oral tablet 400 mg, 600 mg, 800 mg	1	
indomethacin er	1	
indomethacin oral capsule	1	
KETOPROFEN ER	2	
KETOPROFEN ORAL CAPSULE 25 MG, 50 MG	2	
ketorolac tromethamine oral	1	QL (20 EA per 1 fill)
LODINE	3	
MECLOFENAMATE SODIUM ORAL	2	
meloxicam oral tablet	1	
nabumetone oral	1	
naproxen oral tablet	1	
naproxen sodium oral tablet 275 mg, 550 mg	1	
oxaprozin oral tablet	1	
piroxicam oral	1	
sulindac oral	1	
Anesthetics		
chloroprocaine hcl (pf)	1	
ETHYL CHLORIDE	3	
glydo	1	
lidocaine external ointment 5 %	1	
lidocaine external patch 5 %	1	
lidocaine hcl external solution	1	

Drug Name	Drug Tier	Notes
LIDOCAINE HCL SOLUTION PREFILLED SYRINGE 10 MG/ML INJECTION	3	
LIDOCAINE HCL URETHRAL/MUCOSAL EXTERNAL GEL	3	
lidocaine hcl urethral/mucosal external prefilled syringe	1	
lidocaine-prilocaine external cream	1	
LIDOCAINE-SODIUM BICARBONATE	3	
lidocan	1	
NESACAINE	3	
NESACAINE-MPF	3	
POLOCAINE INJECTION SOLUTION 2 %	3	
ROPIVACAINE HCL-NACL INJECTION SOLUTION 0.2-0.9 %	3	
tridacaine ii	1	
tridacaine iii	1	
VENIPUNCTURE PX1 PHLEBOTOMY	3	
Anti-Addiction / Substance Abuse Treatment Agents		
acamprosate calcium	1	
buprenorphine hcl sublingual	1	
buprenorphine hcl-naloxone hcl	1	
bupropion hcl er (smoking det)	1	ACA; HDHP; QL (180 day supply per 365 days)
disulfiram oral	1	
ft naloxone hcl	1	
KLOXXADO	2	

Drug Name	Drug Tier	Notes
lofexidine hcl	1	QL (16 EA per 1 day)
naloxone hcl injection solution	1	
NALOXONE HCL INJECTION SOLUTION CARTRIDGE	3	
naloxone hcl injection solution prefilled syringe	1	
naloxone hcl nasal	1	
naltrexone hcl oral	1	
narcan	1	
NICOTROL NS	3	ACA; HDHP; QL (180 day supply per 365 days)
OPVEE	2	
REXTOVY	2	
varenicline tartrate	1	ACA; HDHP; QL (180 day supply per 365 days)
varenicline tartrate (starter)	1	ACA; HDHP; QL (180 day supply per 365 days)
varenicline tartrate(continue)	1	ACA; HDHP; QL (180 day supply per 365 days)
VIVITROL	6	SP
ZUBSOLV	2	
Antibacterials		
amoxicillin oral capsule	1	
amoxicillin oral suspension reconstituted	1	
amoxicillin oral tablet	1	
AMOXICILLIN ORAL TABLET CHEWABLE	2	
amoxicillin-potassium clavulanate	1	

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Drug Name	Drug Tier	Notes
amoxicillin-potassium clavulanate er	1	
ampicillin	1	
ARIKAYCE	6	PA; SP
AUGMENTIN	3	
AUGMENTIN ES-600	3	
avidoxy	1	
azithromycin oral	1	
BACTRIM	3	
BACTRIM DS	3	
BENZALKONIUM CHLORIDE EXTERNAL SOLUTION	3	
BLUJEPA	3	ST; QL (20 EA per 28 days)
CEFACLOR ER	3	
CEFACLOR ORAL CAPSULE	2	
CEFACLOR ORAL SUSPENSION RECONSTITUTED	3	
cefadroxil oral capsule	1	
cefadroxil oral suspension reconstituted	1	
CEFADROXIL ORAL TABLET	2	
CEFAZOLIN IN SODIUM CHLORIDE SOLUTION 2-0.9 GM/100ML-% INTRAVENOUS	3	
CEFAZOLIN SODIUM SOLUTION PREFILLED SYRINGE 1 GM/10ML INTRAVENOUS	3	
CEFAZOLIN SODIUM SOLUTION PREFILLED SYRINGE 2 GM/20ML INTRAVENOUS	3	
CEFAZOLIN SODIUM SOLUTION PREFILLED SYRINGE 3 GM/30ML INJECTION	3	
cefdinir	1	
cefixime oral capsule	1	
CEFIXIME ORAL SUSPENSION RECONSTITUTED 100 MG/5ML	3	
cefixime oral suspension reconstituted 200 mg/5ml	1	
CEFPODOXIME PROXETIL ORAL SUSPENSION RECONSTITUTED	3	
cefpodoxime proxetil oral tablet	1	
cefprozil	1	
cefuroxime axetil	1	
cephalexin oral capsule 250 mg, 500 mg	1	
cephalexin oral suspension reconstituted	1	
cephalexin oral tablet	1	
CIPRO ORAL SUSPENSION RECONSTITUTED	3	
ciprofloxacin hcl oral	1	
clarithromycin er	1	
CLARITHROMYCIN ORAL SUSPENSION RECONSTITUTED	2	
clarithromycin oral tablet	1	
CLEOCIN ORAL	3	
clindamycin hcl oral	1	
clindamycin palmitate hcl	1	

Drug Name	Drug Tier	Notes
clindamycin phosphate vaginal	1	
CLINDESSE	3	
demeclocycline hcl	1	
dicloxacillin sodium	1	
DIFICID ORAL SUSPENSION RECONSTITUTED	3	
doxycycline hyclate oral capsule	1	
doxycycline hyclate oral tablet 100 mg, 20 mg	1	
doxycycline monohydrate oral capsule 100 mg, 50 mg	1	
doxycycline monohydrate oral suspension reconstituted	1	
doxycycline monohydrate oral tablet	1	
E.E.S. 400	3	
E.E.S. GRANULES	3	
EMBLAVEO	3	
ERYPED 400	3	
ERYTHROMYCIN BASE ORAL CAPSULE DELAYED RELEASE PARTICLES	2	
erythromycin base oral tablet	1	
erythromycin base oral tablet delayed release	1	
erythromycin ethylsuccinate oral suspension reconstituted	1	
erythromycin oral	1	
fidaxomicin	1	
FIRVANQ	3	
fosfomycin tromethamine	1	

Drug Name	Drug Tier	Notes
gentamicin sulfate external	1	
HIPREX	3	
HUMATIN	2	
HYDROGEN PEROXIDE	3	
levofloxacin oral	1	
linezolid oral suspension reconstituted	1	QL (65 ML per 1 day)
linezolid oral tablet	1	QL (2 EA per 1 day)
LUGOLS STRONG IODINE	3	
MACRODANTIN	3	
methenamine hippurate	1	
METRONIDAZOLE ORAL TABLET 125 MG	3	
metronidazole oral tablet 250 mg, 500 mg	1	
metronidazole vaginal	1	
minocycline hcl oral capsule	1	
mondoxyne nl	1	
moxifloxacin hcl oral	1	
mupirocin ointment	1	
neomycin sulfate oral	1	
nitrofurantoin macrocrystal	1	
nitrofurantoin monohydrate macrocrystals	1	
NUZYRA ORAL	3	QL (30 EA per 14 days)
OFLOXACIN ORAL	3	
PENICILLIN V POTASSIUM ORAL SOLUTION RECONSTITUTED	2	
penicillin v potassium oral tablet	1	

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Drug Name	Drug Tier	Notes
PIPERACILLIN-TAZOBACTAM-NACL	3	
SEYSARA	3	ST
silver sulfadiazine external	1	
SOLOSEC	3	ST
ssd	1	
sulfadiazine oral	1	
sulfamethoxazole-trimethoprim oral	1	
sulfatrim pediatric	1	
tetracycline hcl oral capsule	1	
tinidazole oral	1	
trimethoprim tablet 100 mg oral	1	
TRIMETHOPRIM TABLET 100 MG ORAL	3	
VANCOMYCIN HCL IN DEXTROSE INTRAVENOUS SOLUTION 1.5-5 GM/250ML-%	3	
VANCOMYCIN HCL IN NACL INTRAVENOUS SOLUTION 1.75-0.9 GM/250ML-%	3	
vancomycin hcl oral	1	
VANDAZOLE	3	ST
XACIATO	3	
XIFAXAN ORAL TABLET 550 MG	3	PA
ZITHROMAX ORAL	3	
ZITHROMAX TRI-PAK	3	
ZITHROMAX Z-PAK	3	
ZYVOX ORAL	3	QL (65 ML per 1 day)
Anticoagulants		
ARIXTRA	3	HDHP
dabigatran etexilate mesylate	1	HDHP; QL (2 EA per 1 day)
ELIQUIS (1.5 MG PACK)	2	HDHP; QL (12 EA per 1 day)
ELIQUIS (2 MG PACK)	2	HDHP; QL (16 EA per 1 day)
ELIQUIS DVT/PE STARTER PACK	2	HDHP; QL (148 EA per 365 days)
ELIQUIS ORAL CAPSULE SPRINKLE	2	HDHP; QL (2 EA per 1 day)
ELIQUIS ORAL TABLET	2	HDHP; QL (2 EA per 1 day)
ELIQUIS ORAL TABLET SOLUBLE	2	HDHP; QL (4 EA per 1 day)
enoxaparin sodium	1	HDHP
fondaparinux sodium	1	HDHP
FRAGMIN	3	HDHP
HEPARIN (PORCINE) IN NACL INTRAVENOUS SOLUTION 30000-0.9 UNIT/L-%, 500-0.9 UT/500ML-%, 5000-0.9 UNIT/L-%	3	HDHP
HEPARIN (PORCINE) IN NACL SOLUTION 2500-0.9 UT/500ML-% INTRAVENOUS	3	HDHP
HEPARIN (PORCINE) IN NACL SOLUTION 5000-0.9 UT/500ML-% INTRAVENOUS	3	HDHP
heparin sodium (porcine) +rfid	1	HDHP
heparin sodium (porcine) injection solution	1	HDHP
HEPARIN SODIUM (PORCINE) INJECTION SOLUTION PREFILLED SYRINGE	3	HDHP
heparin sodium (porcine) pf injection solution 1000 unit/ml, 5000 unit/0.5ml	1	HDHP

Drug Name	Drug Tier	Notes
HEPARIN SODIUM (PORCINE) PF INJECTION SOLUTION 5000 UNIT/ML	3	HDHP
jantoven oral tablet 1 mg, 10 mg, 2 mg, 2.5 mg, 3 mg, 4 mg, 5 mg, 6 mg, 7.5 mg	1	HDHP
LOVENOX INJECTION SOLUTION	3	HDHP
PRADAXA ORAL PACKET 110 MG, 30 MG, 40 MG, 50 MG	3	HDHP; QL (4 EA per 1 day)
PRADAXA ORAL PACKET 150 MG, 20 MG	3	HDHP; QL (2 EA per 1 day)
rivaroxaban oral suspension reconstituted	1	HDHP; QL (20 ML per 1 day)
rivaroxaban oral tablet	1	HDHP; QL (2 EA per 1 day)
SAVAYSA	3	HDHP; QL (1 EA per 1 day)
SODIUM CITRATE IN VITRO	3	
SODIUM CITRATE LOCK FLUSH INTRAVENOUS SOLUTION PREFILLED SYRINGE	3	
SODIUM CITRATE-GENTAMICIN SULF INTRAVENOUS SOLUTION	3	
warfarin sodium oral	1	HDHP
XARELTO ORAL SUSPENSION RECONSTITUTED	2	HDHP; QL (20 ML per 1 day)
XARELTO ORAL TABLET 10 MG, 20 MG	2	HDHP; QL (1 EA per 1 day)
XARELTO ORAL TABLET 15 MG, 2.5 MG	2	HDHP; QL (2 EA per 1 day)
XARELTO STARTER PACK	2	HDHP; QL (102 EA per 365 days)
Anticonvulsants - Drugs for Seizures		
brivaracetam oral	1	
BRIVIACT ORAL	3	ST
carbamazepine er	1	
carbamazepine oral suspension 100 mg/5ml	1	
carbamazepine oral tablet	1	
carbamazepine oral tablet chewable 100 mg	1	
CARBAMAZEPINE ORAL TABLET CHEWABLE 200 MG	3	
clobazam oral suspension 2.5 mg/ml	1	PA
clobazam oral tablet	1	PA
DIACOMIT	6	PA; SP
diazepam rectal	1	QL (2 EA per 1 fill)
DILANTIN ORAL CAPSULE 30 MG	3	
divalproex sodium er	1	
divalproex sodium oral	1	
EPIDIOLEX	6	PA; SP
eslicarbazepine acetate	1	
ethosuximide oral	1	
felbamate	1	
FINTEPLA	6	PA; SP
FYCOMPA	3	
gabapentin oral capsule	1	
gabapentin oral solution	1	
gabapentin oral tablet 600 mg, 800 mg	1	
lacosamide oral solution 10 mg/ml, 100 mg/10ml, 50 mg/5ml	1	

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Drug Name	Drug Tier	Notes
lacosamide oral tablet	1	
LAMICTAL XR ORAL KIT	3	
lamotrigine er	1	
lamotrigine oral	1	
lamotrigine starter kit-blue	1	
lamotrigine starter kit-green	1	
lamotrigine starter kit-orange	1	
levetiracetam er	1	
levetiracetam oral solution	1	
levetiracetam oral tablet	1	
methsuximide	1	
MOTPOLY XR	3	ST
NAYZILAM	3	QL (0.34 EA per 1 day)
oxcarbazepine	1	
oxcarbazepine er	1	ST
perampanel	1	
PHENOBARBITAL ORAL	2	
phenytek	1	
phenytoin infatabs	1	
phenytoin oral suspension 125 mg/5ml	1	
phenytoin oral tablet chewable	1	
phenytoin sodium extended	1	
PRIMIDONE ORAL TABLET 125 MG	3	
primidone oral tablet 250 mg, 50 mg	1	
roweepra	1	
rufinamide oral suspension 40 mg/ml	1	PA
rufinamide oral tablet	1	PA
subvenite oral tablet	1	
subvenite starter kit-blue	1	
subvenite starter kit-green	1	
subvenite starter kit-orange	1	
SYMPAZAN	3	PA
TIAGABINE HCL ORAL TABLET 12 MG, 16 MG	3	
tiagabine hcl oral tablet 2 mg, 4 mg	1	
topiramate er oral capsule er 24 hour sprinkle	1	
topiramate er oral capsule extended release 24 hour	1	ST
topiramate oral	1	
valproic acid oral	1	
VALTOCO 10 MG DOSE	3	QL (0.34 EA per 1 day)
VALTOCO 15 MG DOSE	3	QL (0.67 EA per 1 day)
VALTOCO 20 MG DOSE	3	QL (0.67 EA per 1 day)
VALTOCO 5 MG DOSE	3	QL (0.34 EA per 1 day)
vigabatrin	4	PA; SP
vigadrone	4	PA; SP
VIGAFYDE	6	PA; SP
XCOPRI	3	ST
ZARONTIN	3	
zonisamide oral	1	
ZTALMY	6	PA; SP
Antidementia Agents - Drugs for Alzheimer's Disease and Dementia		
donepezil hcl	1	
galantamine hydrobromide er	1	

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Drug Name	Drug Tier	Notes
GALANTAMINE HYDROBROMIDE ORAL SOLUTION	2	
galantamine hydrobromide oral tablet	1	
memantine hcl er	1	QL (1 EA per 1 day)
memantine hcl oral solution	1	
memantine hcl oral tablet 10 mg, 5 mg	1	
MEMANTINE HCL ORAL TABLET 28 X 5 MG & 21 X 10 MG	2	
memantine hcl-donepezil hcl er	1	QL (1 EA per 1 day)
rivastigmine tartrate	1	
Antidepressants		
amitriptyline hcl oral	1	
amoxapine	1	
bupropion hcl er (sr)	1	HDHP; QL (2 EA per 1 day)
bupropion hcl er (xl) oral tablet extended release 24 hour 150 mg	1	HDHP; QL (3 EA per 1 day)
bupropion hcl er (xl) oral tablet extended release 24 hour 300 mg	1	HDHP; QL (1 EA per 1 day)
bupropion hcl oral	1	HDHP
CHLORDIAZEPOXIDE-AMITRIPTYLINE	2	
citalopram hydrobromide oral solution	1	HDHP
citalopram hydrobromide oral tablet	1	HDHP
clomipramine hcl oral	1	
desipramine hcl oral	1	
DESVENLAFAXINE ER	3	ST; HDHP; QL (1 EA per 1 day)
desvenlafaxine succinate er	1	HDHP; QL (1 EA per 1 day)
doxepin hcl oral capsule	1	
DOXEPIN HCL ORAL CONCENTRATE	2	
duloxetine hcl oral capsule delayed release particles 20 mg, 40 mg, 60 mg	1	HDHP; QL (2 EA per 1 day)
duloxetine hcl oral capsule delayed release particles 30 mg	1	HDHP; QL (3 EA per 1 day)
EMSAM	3	QL (1 EA per 1 day)
escitalopram oxalate oral solution	1	HDHP
escitalopram oxalate oral tablet	1	HDHP
FETZIMA	3	ST; HDHP; QL (1 EA per 1 day)
FETZIMA TITRATION	3	ST; HDHP; QL (56 EA per 365 days)
FLUOXETINE HCL (PMDD)	3	
fluoxetine hcl oral capsule	1	HDHP
FLUOXETINE HCL ORAL CAPSULE DELAYED RELEASE	3	HDHP; QL (0.15 EA per 1 day)
fluoxetine hcl oral solution	1	HDHP
fluoxetine hcl oral tablet 10 mg, 60 mg	1	HDHP
fluvoxamine maleate	1	HDHP
fluvoxamine maleate er	1	HDHP; QL (2 EA per 1 day)
imipramine hcl oral	1	
imipramine pamoate	1	
MARPLAN	3	
mirtazapine oral	1	HDHP
NARDIL	2	

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Drug Name	Drug Tier	Notes
NEFAZODONE HCL	3	
NORPRAMIN	3	
nortriptyline hcl oral	1	
olanzapine-fluoxetine hcl oral capsule 12-25 mg, 12-50 mg, 6-50 mg	1	HDHP; QL (1 EA per 1 day)
olanzapine-fluoxetine hcl oral capsule 3-25 mg, 6-25 mg	1	HDHP; QL (3 EA per 1 day)
paroxetine hcl er	1	HDHP
PAROXETINE HCL ORAL SUSPENSION	3	ST; HDHP
paroxetine hcl oral tablet	1	HDHP
PERPHENAZINE-AMITRIPTYLINE	2	
PHENELZINE SULFATE ORAL	2	
protriptyline hcl	1	
RALDESY	3	PA
REMERON SOLTAB	3	HDHP
sertraline hcl oral concentrate	1	HDHP
sertraline hcl oral tablet	1	HDHP
tranylcypromine sulfate	1	
trazodone hcl oral	1	
trimipramine maleate oral	1	
TRINTELLIX	3	ST; QL (1 EA per 1 day)
venlafaxine hcl	1	HDHP
venlafaxine hcl er oral capsule extended release 24 hour 150 mg	1	HDHP; QL (2 EA per 1 day)
venlafaxine hcl er oral capsule extended release 24 hour 37.5 mg	1	HDHP; QL (1 EA per 1 day)
venlafaxine hcl er oral capsule extended release 24 hour 75 mg	1	HDHP; QL (3 EA per 1 day)
venlafaxine hcl er oral tablet extended release 24 hour 225 mg	1	HDHP
vilazodone hcl	1	QL (1 EA per 1 day)
ZURZUVAE	3	PA; QL (14 day supply per 1 fill)
Antiemetics - Drugs for Nausea and Vomiting		
AKYNZEO ORAL	3	QL (0.07 EA per 1 day)
ANZEMET	3	QL (0.07 EA per 1 day)
aprepitant oral capsule 125 mg	1	QL (6 EA per 30 days)
aprepitant oral capsule 40 mg	1	QL (1 EA per 30 days)
aprepitant oral capsule 80 mg	1	QL (4 EA per 30 days)
aprepitant oral capsule therapy pack	1	QL (6 EA per 30 days)
BONJESTA	3	PA; QL (2 EA per 1 day)
compro	1	HDHP
DICLEGIS	3	PA; QL (4 EA per 1 day)
doxylamine-pyridoxine	1	PA; QL (4 EA per 1 day)
dronabinol	1	PA; QL (2 EA per 1 day)
EMEND ORAL	3	QL (0.2 EA per 1 day)
granisetron hcl oral	1	QL (0.14 EA per 1 day)
meclizine hcl oral tablet	1	
MECLIZINE HCL ORAL TABLET CHEWABLE	3	
metoclopramide hcl oral	1	
ondansetron hcl oral solution 4 mg/5ml	1	QL (8 ML per 1 day)

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Drug Name	Drug Tier	Notes
ONDANSETRON HCL ORAL TABLET 24 MG	2	QL (0.07 EA per 1 day)
ondansetron hcl oral tablet 4 mg, 8 mg	1	
ONDANSETRON ODT ORAL TABLET DISPERSIBLE 16 MG	3	
ondansetron odt oral tablet dispersible 4 mg, 8 mg	1	
perphenazine oral	1	HDHP
prochlorperazine	1	HDHP
prochlorperazine edisylate injection	1	HDHP
prochlorperazine maleate oral	1	HDHP
promethazine hcl oral solution 6.25 mg/5ml	1	
promethazine hcl oral tablet	1	
promethazine hcl rectal	1	
promethegan rectal suppository 12.5 mg, 25 mg	1	
PROMETHEGAN RECTAL SUPPOSITORY 50 MG	3	
scopolamine	1	
SYNDROS	3	PA; QL (4 ML per 1 day)
TRANSDERM SCOP	3	
trimethobenzamide hcl oral	1	
VARUBI (180 MG DOSE)	3	QL (0.15 EA per 1 day)
Antifungals		
ANCOBON	3	
ciclodan	1	
ciclopirox external	1	
ciclopirox olamine external	1	
clotrimazole external	1	

Drug Name	Drug Tier	Notes
clotrimazole mouth/throat	1	
clotrimazole-betamethasone external cream	1	
CLOTRIMAZOLE-BETAMETHASONE EXTERNAL LOTION	2	
CRESEMBA ORAL	3	PA
DIFLUCAN	3	
econazole nitrate external cream	1	
EXODERM EXTERNAL LOTION	3	
fluconazole oral	1	
flucytosine oral	1	
griseofulvin microsize oral	1	
griseofulvin ultramicrosize oral tablet 125 mg, 250 mg	1	
GYNAZOLE-1	3	
itraconazole oral	1	PA
ketoconazole external cream	1	
ketoconazole external shampoo	1	
ketoconazole oral	1	
klayesta	1	
MICONAZOLE 3 VAGINAL SUPPOSITORY	3	
NAFTIFINE HCL EXTERNAL CREAM 1 %	3	
NOXAFIL ORAL	3	PA
nyamyc external powder 100000 unit/gm	1	
nystatin external	1	
nystatin oral	1	
nystatin suspension 100000 unit/ml mouth/throat	1	

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Drug Name	Drug Tier	Notes
NYSTATIN SUSPENSION 100000 UNIT/ML MOUTH/THROAT	3	
nystatin-triamcinolone	1	
nystop	1	
posaconazole oral	1	PA
SPORANOX	3	PA
tavaborole	1	PA
terbinafine hcl oral	1	QL (84 day supply per 180 days)
terconazole	1	
VFEND	3	PA
voriconazole oral	1	PA
Antigout Agents		
allopurinol oral tablet 100 mg, 300 mg	1	
colchicine oral	1	
colchicine-probenecid	1	
febuxostat	1	ST
probenecid	1	
Antimigraine Agents		
AIMOVIG SUBCUTANEOUS SOLUTION AUTO-INJECTOR 140 MG/ML	2	PA; QL (0.04 ML per 1 day)
AIMOVIG	2	PA; QL (0.07 ML per 1 day)
CAFERGOT	3	PA; QL (0.86 EA per 1 day)
dihydroergotamine mesylate injection	1	PA; QL (0.86 ML per 1 day)
dihydroergotamine mesylate nasal	1	PA; QL (0.27 ML per 1 day)
eletriptan hydrobromide	1	QL (12 EA per 30 days)
EMGALITY SUBCUTANEOUS SOLUTION AUTO-INJECTOR 120 MG/ML	2	PA; QL (0.04 ML per 1 day)
EMGALITY SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 100 MG/ML	2	PA; QL (0.1 ML per 1 day)
EMGALITY SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 120 MG/ML	2	PA; QL (0.04 ML per 1 day)
ERGOMAR	3	PA; QL (0.72 EA per 1 day)
ERGOTAMINE-CAFFEINE	3	PA; QL (0.86 EA per 1 day)
MIGERGOT	3	PA; QL (0.72 EA per 1 day)
naratriptan hcl	1	QL (0.3 EA per 1 day)
NURTEC	2	PA; QL (0.54 EA per 1 day)
QULIPTA	2	PA; QL (1 EA per 1 day)
rizatriptan benzoate oral tablet 10 mg	1	QL (0.4 EA per 1 day)
rizatriptan benzoate oral tablet 5 mg	1	QL (0.6 EA per 1 day)
rizatriptan benzoate oral tablet dispersible 10 mg	1	QL (0.4 EA per 1 day)
rizatriptan benzoate oral tablet dispersible 5 mg	1	QL (0.6 EA per 1 day)
sumatriptan nasal	1	QL (0.4 EA per 1 day)
sumatriptan succinate oral	1	QL (0.3 EA per 1 day)
sumatriptan succinate subcutaneous	1	QL (0.17 ML per 1 day)
UBRELVY	2	PA; QL (0.54 EA per 1 day)
ZAVZPRET	3	PA; QL (0.2 EA per 1 day)
zolmitriptan nasal solution 5 mg	1	QL (0.4 EA per 1 day)

Drug Name	Drug Tier	Notes
zolmitriptan oral	1	QL (0.4 EA per 1 day)
zomig oral	1	QL (0.4 EA per 1 day)
Antimyasthenic Agents		
NEOSTIGMINE METHYLSULFATE INTRAVENOUS SOLUTION 3 MG/3ML, 5 MG/5ML	3	
NEOSTIGMINE METHYLSULFATE INTRAVENOUS SOLUTION PREFILLED SYRINGE 2 MG/2ML	3	
pyridostigmine bromide er oral tablet extended release	1	
pyridostigmine bromide oral solution	1	
PYRIDOSTIGMINE BROMIDE ORAL TABLET 30 MG	3	
pyridostigmine bromide oral tablet 60 mg	1	
VYVGART HYTRULO SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	6	PA; SP; QL (0.8 ML per 1 day)
Antimycobacterials		
CYCLOSERINE ORAL	3	
dapsone oral	1	
ethambutol hcl oral	1	
isoniazid oral	1	
PRETOMANID	3	
PRIFTIN	3	
pyrazinamide oral	1	
rifabutin	1	
rifampin oral	1	
SIRTURO	3	

Drug Name	Drug Tier	Notes
Antineoplastics - Drugs for Cancer		
abiraterone acetate tablet 250 mg oral	4	SP; QL (4 EA per 1 day)
abiraterone acetate tablet 250 mg oral	4	PA; SP
abirtega	4	PA; SP
ALECENSA	5	PA; SP
ALUNBRIG ORAL TABLET 180 MG, 90 MG	5	PA; SP; QL (1 EA per 1 day)
ALUNBRIG ORAL TABLET 30 MG	5	PA; SP; QL (4 EA per 1 day)
ALUNBRIG ORAL TABLET THERAPY PACK	5	PA; SP; QL (30 EA per 365 days)
anastrozole oral	1	ACA; HDHP
AUGTYRO	6	PA; SP
AYVAKIT	6	PA; SP; QL (1 EA per 1 day)
BALVERSA	6	PA; SP
BESREMI	6	PA; SP
bexarotene	4	PA; SP
bicalutamide	1	
BOSULIF	6	PA; SP
BRAFTOVI	6	PA; SP
BRUKINSA	6	PA; SP
CABOMETYX ORAL TABLET 20 MG	5	PA; SP; QL (1 EA per 1 day)
CABOMETYX ORAL TABLET 40 MG, 60 MG	5	PA; SP
CALQUENCE	6	PA; SP
capecitabine	4	SP
CAPRELSA ORAL TABLET 100 MG	5	PA; SP; QL (2 EA per 1 day)
CAPRELSA ORAL TABLET 300 MG	5	PA; SP
CASODEX	3	
COMETRIQ	6	PA; SP
COPIKTRA	6	PA; SP
COTELLIC	6	PA; SP

Drug Name	Drug Tier	Notes
cyclophosphamide capsule 25 mg oral	1	
CYCLOPHOSPHAMIDE CAPSULE 25 MG ORAL	3	
cyclophosphamide capsule 50 mg oral	1	
CYCLOPHOSPHAMIDE CAPSULE 50 MG ORAL	3	
CYCLOPHOSPHAMIDE ORAL TABLET	2	
DANZITEN	6	PA; SP
dasatinib	4	PA; SP
DAURISMO	6	PA; SP
DROXIA	3	
EMRELIS	6	PA; SP
ENSACOVE	5	PA; SP
ERIVEDGE	6	PA; SP
ERLEADA	6	PA; SP
erlotinib hcl oral tablet 100 mg, 150 mg	4	PA; SP
erlotinib hcl oral tablet 25 mg	4	PA; SP; QL (3 EA per 1 day)
ETOPOSIDE ORAL	5	SP
EULEXIN	3	
everolimus oral tablet 10 mg, 2.5 mg, 5 mg, 7.5 mg	4	PA; SP; QL (1 EA per 1 day)
everolimus oral tablet soluble	4	PA; SP
exemestane	1	ACA; HDHP
FRUZAQLA	6	PA; SP
fulvestrant	4	SP
GAVRETO	6	PA; SP
gefitinib	4	PA; SP
GILOTRIF	6	PA; SP; QL (1 EA per 1 day)
GLEOSTINE	6	SP
GOMEKLI	6	PA; SP
HERNEXEOS	6	PA; SP
HYCAMTIN ORAL	6	SP
hydroxyurea oral	1	
HYRNUO	6	PA; SP
IBRANCE	6	PA; SP
ICLUSIG ORAL TABLET 10 MG, 15 MG	6	PA; SP; QL (1 EA per 1 day)
ICLUSIG ORAL TABLET 30 MG, 45 MG	6	PA; SP
IDHIFA	6	PA; SP; QL (1 EA per 1 day)
imatinib mesylate oral	4	PA; SP
IMBRUVICA ORAL CAPSULE 140 MG	6	PA; SP; QL (3 EA per 1 day)
IMBRUVICA ORAL CAPSULE 70 MG	6	PA; SP; QL (1 EA per 1 day)
IMBRUVICA ORAL SUSPENSION	6	PA; SP
IMBRUVICA ORAL TABLET 420 MG	6	PA; SP; QL (1 EA per 1 day)
IMKELDI	6	PA; SP
INLURIYO	6	PA; SP
INLYTA	6	PA; SP
INREBIC	6	PA; SP
ITOVEBI ORAL TABLET 3 MG	6	PA; SP; QL (2 EA per 1 day)
ITOVEBI ORAL TABLET 9 MG	6	PA; SP
JAKAFI ORAL TABLET 10 MG, 5 MG	5	PA; SP; QL (2 EA per 1 day)
JAKAFI ORAL TABLET 15 MG, 20 MG, 25 MG	5	PA; SP
JAYPIRCA ORAL TABLET 100 MG	6	PA; SP
JAYPIRCA ORAL TABLET 50 MG	6	PA; SP; QL (1 EA per 1 day)
KEYTRUDA QLEX	6	PA; SP
KISQALI (200 MG DOSE)	6	PA; SP
KISQALI (400 MG DOSE)	6	PA; SP

Drug Name	Drug Tier	Notes
KISQALI (600 MG DOSE)	6	PA; SP
KOMZIFTI	6	PA; SP
KOSELUGO	6	PA; SP
KRAZATI	6	PA; SP
lapatinib ditosylate	4	PA; SP
LAZCLUZE ORAL TABLET 240 MG	6	PA; SP
LAZCLUZE ORAL TABLET 80 MG	6	PA; SP; QL (2 EA per 1 day)
LEDERLE LEUCOVORIN	2	
lenalidomide	4	PA; SP
LENVIMA ORAL CAPSULE THERAPY PACK 10 & 4 MG, 10 MG, 10 MG & 2 X 4 MG, 2 X 10 MG, 2 X 10 MG & 4 MG, 2 X 4 MG, 3 X 4 MG, 4 MG	6	PA; SP
letrozole oral	1	HDHP
leucovorin calcium oral	1	
LEUKERAN	5	SP
lomustine	4	SP
LONSURF	6	PA; SP
LORBRENA	6	PA; SP
LUMAKRAS	6	PA; SP
LYNOZYFIC	6	PA; SP
LYNPARZA	5	PA; SP
LYSODREN	2	
LYTGOBI (12 MG DAILY DOSE)	6	PA; SP
LYTGOBI (16 MG DAILY DOSE)	6	PA; SP
LYTGOBI (20 MG DAILY DOSE)	6	PA; SP
MATULANE	5	SP
MEKINIST	6	PA; SP
MEKTOVI	6	PA; SP
mercaptopurine oral suspension	4	SP
mercaptopurine oral tablet	1	
mesna oral	4	SP
MESNEX ORAL	6	SP
MODEYSO	6	PA; SP
MYLERAN	2	
NERLYNX	6	PA; SP; QL (6 EA per 1 day)
nilotinib hcl	4	PA; SP
NILUTAMIDE	6	SP
NINLARO	6	PA; SP
NUBEQA	6	PA; SP
ODOMZO	6	PA; SP
OGSIVEO	6	PA; SP
OJEMDA	6	PA; SP
ONUREG	6	PA; SP
OPDIVO QVANTIG SUBCUTANEOUS SOLUTION 300-5000 MG -UT/2.5ML	6	PA; SP
ORGOVYX	6	PA; SP
ORSERDU	6	PA; SP
PANRETIN	3	
pazopanib hcl	4	PA; SP; QL (3 EA per 1 day)
PIQRAY	6	PA; SP
pomalidomide oral capsule 1 mg, 2 mg	4	PA; SP; QL (1 EA per 1 day)
pomalidomide oral capsule 3 mg, 4 mg	4	PA; SP
POMALYST ORAL CAPSULE 1 MG, 2 MG	6	PA; SP; QL (1 EA per 1 day)
POMALYST ORAL CAPSULE 3 MG, 4 MG	6	PA; SP
QINLOCK	6	PA; SP
RETEVMO ORAL TABLET 120 MG, 160 MG	6	PA; SP
RETEVMO ORAL TABLET 40 MG	6	PA; SP; QL (3 EA per 1 day)
RETEVMO ORAL TABLET 80 MG	6	PA; SP; QL (2 EA per 1 day)

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Drug Name	Drug Tier	Notes
REVLIMID	5	PA; SP
REVUFORJ	6	PA; SP
ROMVIMZA	6	PA; SP
ROZLYTREK	6	PA; SP
RYBREVANT FASPRO SUBCUTANEOUS SOLUTION 1600-20000 MG-UT/10ML, 2240-28000 MG-UT/14ML	6	PA; SP
RYBREVANT FASPRO SUBCUTANEOUS SOLUTION 2400-30000 MG-UT/15ML, 3520-44000 MG-UT/22ML	6	SP
RYDAPT	6	PA; SP
SCEMBLIX ORAL TABLET 100 MG	6	PA; SP
SCEMBLIX ORAL TABLET 20 MG	6	PA; SP; QL (2 EA per 1 day)
SCEMBLIX ORAL TABLET 40 MG	6	PA; SP; QL (8 EA per 1 day)
SOLTAMOX	3	ACA; HDHP
sorafenib tosylate	4	PA; SP
STIVARGA	5	PA; SP
sunitinib malate	4	PA; SP
TABLOID	5	SP
TABRECTA	6	PA; SP
TAFINLAR	6	PA; SP
TAGRISSO ORAL TABLET 40 MG	6	PA; SP; QL (1 EA per 1 day)
TAGRISSO ORAL TABLET 80 MG	6	PA; SP
tamoxifen citrate oral tablet 10 mg	1	HDHP
tamoxifen citrate oral tablet 20 mg	1	ACA; HDHP
temozolomide	4	PA; SP
TEPMETKO	6	PA; SP
THALOMID	5	PA; SP
TIBSOVO	6	PA; SP
toremifene citrate	1	HDHP
torpenz	4	PA; SP; QL (1 EA per 1 day)
tretinoin oral	4	SP
TRUQAP	6	PA; SP
TUKYSA	6	PA; SP
TURALIO	6	PA; SP
VALCHLOR	6	PA; SP
VANFLYTA	6	PA; SP
VENCLEXTA	6	PA; SP
VENCLEXTA STARTING PACK	6	PA; SP
VERZENIO	6	PA; SP
VIJOICE ORAL PACKET	6	PA; SP; QL (1 EA per 1 day)
VIJOICE ORAL TABLET THERAPY PACK 125 MG, 50 MG	6	PA; SP; QL (1 EA per 1 day)
VIJOICE ORAL TABLET THERAPY PACK 200 & 50 MG	6	PA; SP; QL (2 EA per 1 day)
VITRAKVI	6	PA; SP
VIZIMPRO ORAL TABLET 15 MG	6	PA; SP; QL (1 EA per 1 day)
VIZIMPRO ORAL TABLET 30 MG, 45 MG	6	PA; SP
VONJO	6	PA; SP
VORANIGO ORAL TABLET 10 MG	6	PA; SP; QL (2 EA per 1 day)
VORANIGO ORAL TABLET 40 MG	6	PA; SP
WELIREG	6	PA; SP
XOSPATA	6	PA; SP
XPOVIO (100 MG ONCE WEEKLY)	6	PA; SP
XPOVIO (40 MG ONCE WEEKLY)	6	PA; SP
XPOVIO (40 MG TWICE WEEKLY)	6	PA; SP
XPOVIO (60 MG ONCE WEEKLY)	6	PA; SP

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Drug Name	Drug Tier	Notes
XPOVIO (60 MG TWICE WEEKLY)	6	PA; SP
XPOVIO (80 MG ONCE WEEKLY)	6	PA; SP
XPOVIO (80 MG TWICE WEEKLY)	6	PA; SP
XROMI	3	PA
XTANDI	6	PA; SP
ZEJULA ORAL TABLET 100 MG	5	PA; SP; QL (1 EA per 1 day)
ZEJULA ORAL TABLET 200 MG, 300 MG	5	PA; SP
ZELBORAF	6	PA; SP
ZOLINZA	5	PA; SP
ZYDELIG	6	PA; SP
ZYKADIA	6	PA; SP
Antiparasitics		
albendazole oral	1	PA; QL (120 EA per 180 days)
ARAKODA	3	
atovaquone	1	
atovaquone-proguanil hcl	1	
BENZNIDAZOLE	3	
BILTRICIDE	3	QL (105 EA per 180 days)
CHLOROQUINE PHOSPHATE ORAL TABLET 250 MG	2	
chloroquine phosphate oral tablet 500 mg	1	
COARTEM	3	
EGATEN	3	
EMVERM	2	QL (6 EA per 180 days)
hydroxychloroquine sulfate oral	1	
IMPAVIDO	3	
ivermectin oral tablet 3 mg	1	QL (18 EA per 180 days)
IVERMECTIN ORAL TABLET 6 MG	3	QL (9 EA per 180 days)
KRINTAFEL	3	
LAMPIT	3	
MALARONE	3	
malathion	1	
mefloquine hcl	1	
MEPRON	3	
NEBUPENT	3	
nitazoxanide oral	1	
OVIDE	3	
pentamidine isethionate inhalation	1	
permethrin cream 5 % external	1	
PERMETHRIN CREAM 5 % EXTERNAL	3	
praziquantel oral	1	QL (105 EA per 180 days)
primaquine phosphate tablet 26.3 (15 base) mg oral	1	
PRIMAQUINE PHOSPHATE TABLET 26.3 (15 BASE) MG ORAL	3	
pyrimethamine oral	4	PA; SP
quinine sulfate	1	PA
STROMECTOL	3	QL (18 EA per 180 days)
SULFURATED LIME	3	
Antiparkinson Agents		
amantadine hcl oral	1	
apomorphine hcl subcutaneous	4	PA; SP; QL (3 ML per 1 day)
benztropine mesylate oral	1	
bromocriptine mesylate oral	1	
carbidopa oral	1	
carbidopa-levodopa	1	

Drug Name	Drug Tier	Notes
carbidopa-levodopa er oral tablet extended release	1	
carbidopa-levodopa-entacapone	1	
CREXONT	3	ST
DUOPA	3	PA
entacapone	1	
INBRIJA	6	PA; SP
NEUPRO	3	
NOURIANZ	3	PA
ONAPGO	6	PA; SP; QL (3 ML per 1 day)
ONGENTYS	3	ST
PARLODEL	3	
pramipexole dihydrochloride	1	
rasagiline mesylate oral	1	
ropinirole hcl	1	
ropinirole hcl er	1	
selegiline hcl oral	1	
TASMAR	3	
tolcapone	1	
TRIHEXYPHENIDYL HCL ORAL SOLUTION	2	
trihexyphenidyl hcl oral tablet	1	
Antiplatelets		
aspirin-dipyridamole er	1	HDHP
CABLIVI	6	PA; SP; QL (1 EA per 1 day)
cilostazol	1	HDHP
clopidogrel bisulfate oral	1	HDHP
dipyridamole oral	1	HDHP
prasugrel hcl	1	HDHP
ticagrelor	1	HDHP
ZONTIVITY	3	HDHP

Drug Name	Drug Tier	Notes
Antipsychotics - Drugs for Mood Disorders		
ABILIFY ASIMTUFII	3	HDHP
ABILIFY MAINTENA	3	HDHP
aripiprazole oral solution	1	HDHP; QL (25 ML per 1 day)
aripiprazole oral tablet	1	HDHP; QL (1 EA per 1 day)
aripiprazole oral tablet dispersible	1	HDHP; QL (2 EA per 1 day)
ARISTADA	3	HDHP
ARISTADA INITIO	3	HDHP
asenapine maleate	1	HDHP; QL (2 EA per 1 day)
CAPLYTA	3	ST; HDHP; QL (1 EA per 1 day)
chlorpromazine hcl injection	1	HDHP
chlorpromazine hcl oral	1	HDHP
clozapine oral tablet 100 mg, 25 mg	1	HDHP; QL (9 EA per 1 day)
clozapine oral tablet 200 mg	1	HDHP; QL (4 EA per 1 day)
clozapine oral tablet 50 mg	1	HDHP; QL (6 EA per 1 day)
clozapine oral tablet dispersible 100 mg, 25 mg	1	HDHP; QL (9 EA per 1 day)
clozapine oral tablet dispersible 12.5 mg	1	HDHP; QL (3 EA per 1 day)
clozapine oral tablet dispersible 150 mg	1	HDHP; QL (6 EA per 1 day)
clozapine oral tablet dispersible 200 mg	1	HDHP; QL (4 EA per 1 day)
COBENFY	3	ST; QL (2 EA per 1 day)
COBENFY STARTER PACK	3	ST; QL (102 EA per 365 days)
ERZOFRI	3	HDHP

Drug Name	Drug Tier	Notes
FANAPT	3	ST; HDHP; QL (2 EA per 1 day)
FANAPT TITRATION PACK A	3	ST; HDHP; QL (16 EA per 365 days)
FANAPT TITRATION PACK B	3	ST; HDHP; QL (24 EA per 365 days)
FANAPT TITRATION PACK C	3	ST; HDHP; QL (16 EA per 365 days)
fluphenazine decanoate injection	1	HDHP
FLUPHENAZINE HCL INJECTION	3	HDHP
FLUPHENAZINE HCL ORAL CONCENTRATE	2	HDHP
FLUPHENAZINE HCL ORAL ELIXIR	2	HDHP
fluphenazine hcl oral tablet	1	HDHP
GEODON INTRAMUSCULAR	3	HDHP
haloperidol lactate oral concentrate 2 mg/ml	1	HDHP
haloperidol oral	1	HDHP
INVEGA HAFYERA	3	ST; HDHP
INVEGA SUSTENNA	3	HDHP
INVEGA TRINZA	3	HDHP
loxapine succinate	1	HDHP
lurasidone hcl oral tablet 120 mg, 20 mg, 40 mg, 60 mg	1	HDHP; QL (1 EA per 1 day)
lurasidone hcl oral tablet 80 mg	1	HDHP; QL (2 EA per 1 day)
LYBALVI	3	ST; QL (1 EA per 1 day)
MOLINDONE HCL	3	HDHP
NUPLAZID	3	PA; HDHP
olanzapine intramuscular	1	HDHP
olanzapine oral	1	HDHP; QL (1 EA per 1 day)
OPIPZA ORAL FILM 10 MG, 5 MG	3	ST; HDHP; QL (3 EA per 1 day)
OPIPZA ORAL FILM 2 MG	3	ST; HDHP; QL (1 EA per 1 day)
paliperidone er oral tablet extended release 24 hour 1.5 mg, 3 mg, 9 mg	1	HDHP; QL (1 EA per 1 day)
paliperidone er oral tablet extended release 24 hour 6 mg	1	HDHP; QL (2 EA per 1 day)
PERSERIS	3	HDHP
PIMOZIDE	3	
quetiapine fumarate er	1	HDHP; QL (2 EA per 1 day)
quetiapine fumarate oral tablet 100 mg, 200 mg, 25 mg, 50 mg	1	HDHP; QL (3 EA per 1 day)
quetiapine fumarate oral tablet 300 mg, 400 mg	1	HDHP; QL (2 EA per 1 day)
REXULTI	3	HDHP; QL (1 EA per 1 day)
RISPERDAL CONSTA	3	ST; HDHP
risperidone microspheres er	1	HDHP
risperidone oral solution	1	HDHP; QL (8 ML per 1 day)
risperidone oral tablet	1	HDHP; QL (2 EA per 1 day)
RISPERIDONE ORAL TABLET DISPERSIBLE 0.25 MG	3	HDHP; QL (2 EA per 1 day)
risperidone oral tablet dispersible 0.5 mg, 1 mg, 2 mg, 3 mg, 4 mg	1	HDHP; QL (2 EA per 1 day)
RYKINDO	3	HDHP
thioridazine hcl oral	1	HDHP
thiothixene	1	HDHP

Drug Name	Drug Tier	Notes
trifluoperazine hcl	1	HDHP
UZEDY	3	HDHP
VERSACLOZ	3	HDHP; QL (18 ML per 1 day)
VRAYLAR	3	HDHP; QL (1 EA per 1 day)
ziprasidone hcl	1	HDHP; QL (2 EA per 1 day)
ziprasidone mesylate	1	HDHP
ZYPREXA RELPREVV	3	HDHP
Antivirals		
abacavir sulfate	1	HDHP
abacavir sulfate-lamivudine	1	HDHP
acyclovir external ointment	1	QL (1 GM per 1 day)
acyclovir oral capsule	1	
acyclovir oral tablet	1	
acyclovir suspension 200 mg/5ml oral	1	
adefovir dipivoxil	1	
APTIVUS	2	HDHP
atazanavir sulfate	1	HDHP
BARACLUDE ORAL SOLUTION	3	QL (630 ML per 30 days)
BIKTARVY	3	HDHP
CIMDUO	2	HDHP
darunavir	1	HDHP
DELSTRIGO	2	HDHP
DESCOVY ORAL TABLET 120-15 MG	3	HDHP
DESCOVY ORAL TABLET 200-25 MG	3	PA; ACA; HDHP
DOVATO	2	HDHP
EDURANT	3	HDHP
EDURANT PED	2	HDHP
efavirenz	1	HDHP
efavirenz-emtricitab-tenofo df	1	HDHP

Drug Name	Drug Tier	Notes
EFAVIRENZ-LAMIVUDINE-TENOFOVIR ORAL TABLET 400-300-300 MG	2	HDHP
efavirenz-lamivudine-tenofovir oral tablet 600-300-300 mg	1	HDHP
emtricitabine	1	HDHP
emtricitabine-tenofovir df oral tablet 100-150 mg, 133-200 mg, 167-250 mg	1	HDHP
emtricitabine-tenofovir df oral tablet 200-300 mg	1	ACA; HDHP
emtricitab-rilpivir-tenofov df	1	HDHP
EMTRIVA ORAL CAPSULE	3	HDHP
EMTRIVA ORAL SOLUTION	2	HDHP
entecavir	1	QL (1 EA per 1 day)
EPCLUSA ORAL PACKET 150-37.5 MG	5	PA; SP; QL (1 EA per 1 day)
EPCLUSA ORAL PACKET 200-50 MG	5	PA; SP; QL (2 EA per 1 day)
EPCLUSA ORAL TABLET	5	PA; SP; QL (1 EA per 1 day)
EPIVIR	3	HDHP
etravirine	1	HDHP
EVOTAZ	2	HDHP
famciclovir oral	1	
fosamprenavir calcium	1	HDHP
GENVOYA	3	HDHP
HARVONI ORAL PACKET 33.75-150 MG	5	PA; SP; QL (1 EA per 1 day)
HARVONI ORAL PACKET 45-200 MG	5	PA; SP; QL (2 EA per 1 day)
HARVONI ORAL TABLET 45-200 MG	5	PA; SP; QL (2 EA per 1 day)

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Drug Name	Drug Tier	Notes
HARVONI ORAL TABLET 90-400 MG	5	PA; SP; QL (1 EA per 1 day)
INTELENCE ORAL TABLET 25 MG	2	HDHP
ISENTRESS	2	HDHP
ISENTRESS HD	2	HDHP
JULUCA	2	HDHP
KALETRA ORAL SOLUTION	3	HDHP
LAGEVRIO	3	QL (8 EA per 1 day)
lamivudine oral solution	1	HDHP
lamivudine oral tablet 100 mg	1	
lamivudine oral tablet 150 mg, 300 mg	1	HDHP
lamivudine-zidovudine	1	HDHP
LIVTENCITY	6	PA; SP
lopinavir-ritonavir	1	HDHP
maraviroc	1	PA; HDHP
MAVYRET ORAL PACKET	5	PA; SP; QL (5 EA per 1 day)
MAVYRET ORAL TABLET	5	PA; SP; QL (3 EA per 1 day)
nevirapine er	1	HDHP
NEVIRAPINE ORAL SUSPENSION	2	HDHP
nevirapine oral tablet	1	HDHP
NORVIR ORAL PACKET	2	HDHP
NORVIR ORAL TABLET	3	HDHP
ODEFSEY	3	HDHP
oseltamivir phosphate oral capsule 30 mg	1	QL (40 EA per 365 days)
oseltamivir phosphate oral capsule 45 mg, 75 mg	1	QL (20 EA per 365 days)
oseltamivir phosphate oral suspension reconstituted	1	QL (360 ML per 365 days)

Drug Name	Drug Tier	Notes
PAXLOVID (150/100)	2	QL (4 EA per 1 day)
PAXLOVID (300/100 & 150/100)	2	QL (11 EA per 56 days)
PAXLOVID (300/100)	2	QL (6 EA per 1 day)
PEGASYS	5	PA; SP
PIFELTRO	2	HDHP
PREVYMIS ORAL	6	SP
PREZCOBIX	2	HDHP
PREZISTA ORAL SUSPENSION	2	HDHP
PREZISTA ORAL TABLET 150 MG, 75 MG	2	HDHP
RELENZA DISKHALER	3	QL (40 EA per 365 days)
RETROVIR ORAL	3	HDHP
REYATAZ ORAL PACKET	2	HDHP
RIBAVIRIN ORAL	6	SP
rilpivirine hcl	1	HDHP
RIMANTADINE HCL	2	
ritonavir	1	HDHP
RUKOBIA	2	HDHP
SELZENTRY ORAL SOLUTION	2	PA; HDHP
SELZENTRY ORAL TABLET	3	PA; HDHP
SOVALDI ORAL PACKET 150 MG	6	PA; SP; QL (1 EA per 1 day)
SOVALDI ORAL PACKET 200 MG	6	PA; SP; QL (2 EA per 1 day)
SOVALDI ORAL TABLET 200 MG	6	PA; SP; QL (2 EA per 1 day)
SOVALDI ORAL TABLET 400 MG	6	PA; SP; QL (1 EA per 1 day)
STRIBILD	3	HDHP
SUNLENCA ORAL TABLET	3	PA; HDHP; QL (8 EA per 365 days)

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Drug Name	Drug Tier	Notes
SUNLENCA ORAL TABLET THERAPY PACK 4 X 300 MG	3	PA; HDHP; QL (8 EA per 365 days)
SUNLENCA ORAL TABLET THERAPY PACK 5 X 300 MG	3	PA; HDHP; QL (10 EA per 365 days)
SUNLENCA SUBCUTANEOUS	3	PA; HDHP; QL (9 ML per 365 days)
SYMFI	2	HDHP
SYMTUZA	3	HDHP
TEMBEXA	3	
tenofovir disoproxil fumarate	1	ACA; HDHP
TIVICAY	3	HDHP
TIVICAY PD	3	HDHP
TPOXX ORAL	3	
TRIUMEQ	2	HDHP
TRIUMEQ PD	3	HDHP
valacyclovir hcl oral	1	QL (4 EA per 1 day)
valganciclovir hcl	1	
VIRACEPT	2	HDHP
VIREAD ORAL POWDER	2	HDHP
VIREAD ORAL TABLET 150 MG, 200 MG, 250 MG	2	HDHP
VOSEVI	5	PA; SP; QL (1 EA per 1 day)
XOFLUZA (40 MG DOSE)	3	QL (2 EA per 365 days)
XOFLUZA (80 MG DOSE)	3	QL (2 EA per 365 days)
ZEPATIER	6	PA; SP; QL (1 EA per 1 day)
ZIAGEN	3	HDHP
zidovudine	1	HDHP
Anxiolytics - Drugs for Anxiety		
alprazolam er oral tablet extended release 24 hour 0.5 mg, 1 mg	1	QL (1 EA per 1 day)
alprazolam er oral tablet extended release 24 hour 2 mg	1	QL (5 EA per 1 day)
alprazolam er oral tablet extended release 24 hour 3 mg	1	QL (3 EA per 1 day)
ALPRAZOLAM INTENSOL	3	QL (10 ML per 1 day)
alprazolam oral tablet 0.25 mg, 0.5 mg, 1 mg	1	QL (4 EA per 1 day)
alprazolam oral tablet 2 mg	1	QL (5 EA per 1 day)
alprazolam xr oral tablet extended release 24 hour 0.5 mg, 1 mg	1	QL (1 EA per 1 day)
alprazolam xr oral tablet extended release 24 hour 2 mg	1	QL (5 EA per 1 day)
alprazolam xr oral tablet extended release 24 hour 3 mg	1	QL (3 EA per 1 day)
ATIVAN INJECTION SOLUTION 4 MG/ML	3	
buspirone hcl oral	1	
chlordiazepoxide hcl oral capsule 10 mg	1	QL (30 EA per 1 day)
chlordiazepoxide hcl oral capsule 25 mg	1	QL (12 EA per 1 day)
chlordiazepoxide hcl oral capsule 5 mg	1	QL (4 EA per 1 day)
clonazepam oral tablet 0.5 mg, 1 mg	1	QL (3 EA per 1 day)
clonazepam oral tablet 2 mg	1	QL (10 EA per 1 day)
clonazepam oral tablet dispersible 0.125 mg, 0.25 mg, 0.5 mg, 1 mg	1	QL (3 EA per 1 day)
clonazepam oral tablet dispersible 2 mg	1	QL (10 EA per 1 day)
clorazepate dipotassium oral tablet 15 mg	1	QL (6 EA per 1 day)
clorazepate dipotassium oral tablet 3.75 mg	1	QL (24 EA per 1 day)

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Drug Name	Drug Tier	Notes
clorazepate dipotassium oral tablet 7.5 mg	1	QL (12 EA per 1 day)
diazepam intensol	1	
diazepam oral	1	
estazolam	1	QL (1 EA per 1 day)
HALCION	3	QL (2 EA per 1 day)
hydroxyzine hcl oral tablet	1	
hydroxyzine hcl syrup 10 mg/5ml oral	1	
HYDROXYZINE PAMOATE ORAL CAPSULE 100 MG	2	
hydroxyzine pamoate oral capsule 25 mg, 50 mg	1	
lorazepam injection solution 4 mg/ml	1	
lorazepam intensol	1	QL (5 ML per 1 day)
lorazepam oral concentrate 2 mg/ml	1	QL (5 ML per 1 day)
lorazepam oral tablet 0.5 mg, 1 mg	1	QL (3 EA per 1 day)
lorazepam oral tablet 2 mg	1	QL (5 EA per 1 day)
meprobamate	1	
oxazepam	1	QL (4 EA per 1 day)
QUAZEPAM	3	QL (1 EA per 1 day)
triazolam	1	QL (2 EA per 1 day)
Bipolar Agents - Drugs for Mood Disorders		
EQUETRO	3	HDHP
lithium	1	
lithium carbonate capsule 150 mg oral	1	
LITHIUM CARBONATE CAPSULE 150 MG ORAL	3	
lithium carbonate capsule 300 mg oral	1	
LITHIUM CARBONATE CAPSULE 300 MG ORAL	3	
lithium carbonate capsule 600 mg oral	1	
LITHIUM CARBONATE CAPSULE 600 MG ORAL	3	
lithium carbonate er	1	
lithium carbonate oral tablet	1	
Blood Products and Modifiers - Drugs for Blood Disorders		
ALHEMO	6	SP
ALVAIZ	6	PA; SP
aminocaproic acid oral	1	
anagrelide hcl	1	
AQVESME	6	PA; SP; QL (2 EA per 1 day)
DOPTELET	6	PA; SP
DOPTELET SPRINKLE	6	PA; SP; QL (2 EA per 1 day)
eltrombopag olamine	4	PA; SP
EMPAVELI	6	PA; SP
FABHALTA	6	PA; SP; QL (2 EA per 1 day)
FIBRYGA INTRAVENOUS SOLUTION RECONSTITUTED 2 GM	5	SP
HEMLIBRA	6	SP
HYMPAVZI	6	SP
LEUKINE	6	PA; SP
MULPLETA	6	PA; SP
NEULASTA	6	PA; SP
NEULASTA ONPRO	6	PA; SP

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Drug Name	Drug Tier	Notes
NIVESTYM	5	PA; SP
NPLATE	6	PA; SP
PYRUKYND	6	PA; SP; QL (2 EA per 1 day)
PYRUKYND TAPER PACK	6	PA; SP; QL (1 EA per 1 day)
QFITLIA	6	PA; SP
TAVALISSE	6	PA; SP
tranexamic acid oral	1	
UDENYCA SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	6	PA; SP
VOYDEYA	6	PA; SP; QL (6 EA per 1 day)
XOLREMDI	6	PA; SP; QL (4 EA per 1 day)
ZARXIO	5	PA; SP
Cardiovascular Agents - Drugs for Heart and Circulation Conditions		
acebutolol hcl oral	1	HDHP
aliskiren fumarate	1	HDHP
amiloride hcl oral	1	HDHP
AMILORIDE-HYDROCHLOROTHIAZIDE	2	HDHP
amiodarone hcl oral	1	
amlodipine besylate oral	1	HDHP
amlodipine besylate-benazepril hcl	1	HDHP
amlodipine besylate-valsartan	1	HDHP
amlodipine-atorvastatin	1	HDHP
amlodipine-olmesartan	1	HDHP
amlodipine-valsartan-hctz	1	HDHP
ARBLI	3	PA; HDHP
atenolol oral	1	HDHP
atenolol-chlorthalidone	1	HDHP
atorvastatin calcium oral tablet 10 mg, 20 mg	1	ACA; HDHP
atorvastatin calcium oral tablet 40 mg, 80 mg	1	HDHP
benazepril hcl oral	1	HDHP
benazepril-hydrochlorothiazide	1	HDHP
betaxolol hcl oral	1	HDHP
BIDIL	3	HDHP
bisoprolol fumarate oral tablet 10 mg, 5 mg	1	HDHP
BISOPROLOL FUMARATE ORAL TABLET 2.5 MG	3	HDHP
bisoprolol-hydrochlorothiazide	1	HDHP
bumetanide oral	1	HDHP
BUMEX	3	HDHP
captopril oral	1	HDHP
CAPTOPRIL-HYDROCHLOROTHIAZIDE	2	HDHP
CARDAMYST	3	PA; HDHP; QL (0.14 EA per 1 day)
cartia xt	1	HDHP
carvedilol	1	HDHP
chlorthalidone	1	HDHP
cholestyramine light	1	HDHP
cholestyramine oral	1	HDHP
CLONIDINE HCL ORAL TABLET 0.05 MG	3	HDHP
clonidine hcl oral tablet 0.1 mg, 0.2 mg, 0.3 mg	1	HDHP
colesevelam hcl oral tablet	1	HDHP
colestipol hcl	1	HDHP
CORLANOR ORAL SOLUTION	3	QL (15 ML per 1 day)
digoxin oral tablet	1	HDHP

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Drug Name	Drug Tier	Notes
digoxin solution 0.05 mg/ml oral	1	HDHP
DIGOXIN SOLUTION 0.05 MG/ML ORAL	3	HDHP
diltiazem hcl er beads	1	HDHP
diltiazem hcl er coated beads oral capsule extended release 24 hour 120 mg, 180 mg, 240 mg, 300 mg	1	HDHP
diltiazem hcl er oral capsule extended release 12 hour 60 mg, 90 mg	1	HDHP
diltiazem hcl er oral capsule extended release 24 hour	1	HDHP
diltiazem hcl oral	1	HDHP
DILTIAZEM HCL-DEXTROSE SOLUTION 125-5 MG/125ML-% INTRAVENOUS	3	HDHP
dilt-xr	1	HDHP
disopyramide phosphate	1	
dofetilide	1	
doxazosin mesylate oral	1	HDHP
EDARBI	3	ST; HDHP
EDARBYCLOR	3	ST; HDHP
enalapril maleate oral tablet	1	HDHP
enalapril-hydrochlorothiazide	1	HDHP
ENTRESTO ORAL CAPSULE SPRINKLE	2	QL (8 EA per 1 day)
EPHEDRINE SULFATE-NACL	3	
EPINEPHRINE HCL-DEXTROSE	3	
EPINEPHRINE HCL-NACL INTRAVENOUS SOLUTION 8-0.9 MG/250ML-%	3	
EPINEPHRINE INJECTION SOLUTION PREFILLED SYRINGE 1 MG/ML	3	
epinephrine pf solution 1 mg/ml injection	1	
EPINEPHRINE PF SOLUTION 1 MG/ML INJECTION	3	
EPINEPHRINE-DEXTROSE INTRAVENOUS SOLUTION 2-5 MG/250ML-%	3	
EPINEPHRINE-NACL INTRAVENOUS SOLUTION PREFILLED SYRINGE	3	
eplerenone	1	HDHP
ethacrynic acid	1	HDHP
ezetimibe	1	HDHP
ezetimibe-simvastatin	1	HDHP
felodipine er	1	HDHP
fenofibrate micronized oral capsule 134 mg, 200 mg, 43 mg, 67 mg	1	HDHP
fenofibrate oral capsule 134 mg, 200 mg, 67 mg	1	HDHP
fenofibrate oral tablet 145 mg, 160 mg, 48 mg, 54 mg	1	HDHP
fenofibric acid oral capsule delayed release	1	HDHP
flecainide acetate	1	
fosinopril sodium	1	HDHP
fosinopril sodium-hctz	1	HDHP
FUROSEMIDE IN SODIUM CHLORIDE	3	HDHP

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Drug Name	Drug Tier	Notes
FUROSEMIDE ORAL SOLUTION	2	HDHP
furosemide oral tablet	1	HDHP
gemfibrozil oral	1	HDHP
guanfacine hcl	1	HDHP
HEMANGEOL	3	PA; HDHP
hydralazine hcl oral	1	HDHP
hydrochlorothiazide oral	1	HDHP
icosapent ethyl	1	PA; HDHP
indapamide	1	HDHP
irbesartan	1	HDHP
irbesartan-hydrochlorothiazide	1	HDHP
isosorb dinitrate-hydralazine	1	HDHP
isosorbide dinitrate oral tablet 10 mg, 20 mg, 30 mg, 5 mg	1	HDHP
isosorbide mononitrate	1	HDHP
isosorbide mononitrate er	1	HDHP
isradipine	1	HDHP
ivabradine hcl	1	QL (2 EA per 1 day)
JAVADIN	3	PA; HDHP
JUXTAPID ORAL CAPSULE 10 MG, 2 MG, 5 MG	3	PA; HDHP; QL (1 EA per 1 day)
JUXTAPID ORAL CAPSULE 20 MG, 30 MG	3	PA; HDHP; QL (2 EA per 1 day)
LABETALOL HCL INTRAVENOUS SOLUTION PREFILLED SYRINGE	3	HDHP
labetalol hcl oral tablet 100 mg, 200 mg, 300 mg	1	HDHP
LABETALOL HCL ORAL TABLET 400 MG	3	HDHP
lisinopril oral	1	HDHP
lisinopril-hydrochlorothiazide	1	HDHP
LOPID	3	HDHP
LOPRESSOR ORAL SOLUTION	3	PA; HDHP
LOPRESSOR ORAL TABLET	3	HDHP
losartan potassium oral	1	HDHP
losartan potassium-hctz	1	HDHP
LOTENSIN	3	HDHP
LOTENSIN HCT	3	HDHP
lovastatin oral	1	ACA; HDHP
methyldopa oral tablet 250 mg	1	HDHP
METHYLDOPA ORAL TABLET 500 MG	3	HDHP
metolazone	1	HDHP
metoprolol succinate er	1	HDHP
metoprolol tartrate oral tablet 100 mg, 25 mg, 37.5 mg, 50 mg, 75 mg	1	HDHP
METOPROLOL TARTRATE ORAL TABLET 12.5 MG	3	HDHP
metoprolol-hydrochlorothiazide	1	HDHP
metyrosine	1	PA; HDHP; QL (16 EA per 1 day)
mexiletine hcl oral	1	
midodrine hcl	1	
minoxidil oral	1	HDHP
moexipril hcl	1	HDHP
MULTAQ	3	
nadolol oral	1	HDHP
nebivolol hcl	1	HDHP
NEXLETOL	2	PA; HDHP; QL (1 EA per 1 day)
NEXLIZET	2	PA; HDHP; QL (1 EA per 1 day)

Drug Name	Drug Tier	Notes
NIACIN (ANTIHYPERLIPIDEMIC)	2	HDHP
niacin er (antihyperlipidemic)	1	HDHP
NIACOR	2	HDHP
NICARDIPINE HCL IN NACL INTRAVENOUS SOLUTION PREFILLED SYRINGE	3	HDHP
nifedipine er	1	HDHP
nifedipine er osmotic release	1	HDHP
nifedipine oral	1	HDHP
nimodipine oral capsule	1	HDHP
NIMODIPINE ORAL SOLUTION	3	HDHP
NISOLDIPINE ER	3	HDHP
nitro-bid	1	HDHP
nitroglycerin rectal	1	
nitroglycerin sublingual	1	HDHP
nitroglycerin transdermal	1	HDHP
nitroglycerin translingual	1	HDHP
NITROLINGUAL	3	HDHP
NOREPINEPHRINE-DEXTROSE INTRAVENOUS SOLUTION 8-5 MG/500ML-%	3	
NORLIQVA	3	PA; HDHP
NORPACE	3	
NORPACE CR	2	
NYMALIZE	3	HDHP
olmesartan medoxomil oral	1	HDHP
olmesartan medoxomil-hctz	1	HDHP
olmesartan-amlodipine-hctz	1	HDHP
omega-3-acid ethyl esters	1	HDHP

Drug Name	Drug Tier	Notes
pacerone	1	
pentoxifylline er	1	
PERINDOPRIL ERBUMINE ORAL TABLET 2 MG, 8 MG	2	HDHP
perindopril erbumine oral tablet 4 mg	1	HDHP
phenoxybenzamine hcl oral	1	PA; HDHP
PHENYLEPHRINE HCL SOLUTION PREFILLED SYRINGE 0.4 MG/10ML INTRAVENOUS	3	
PHENYLEPHRINE HCL SOLUTION PREFILLED SYRINGE 0.5 MG/5ML INTRAVENOUS	3	
PHENYLEPHRINE HCL SOLUTION PREFILLED SYRINGE 0.8 MG/10ML INTRAVENOUS	3	
PHENYLEPHRINE HCL SOLUTION PREFILLED SYRINGE 1 MG/10ML INTRAVENOUS	3	
PHENYLEPHRINE HCL-NACL INTRAVENOUS SOLUTION 20-0.9 MG/250ML-%, 40-0.9 MG/250ML-%, 50-0.9 MG/250ML-%, 80-0.9 MG/250ML-%	3	
PHENYLEPHRINE HCL-NACL INTRAVENOUS SOLUTION PREFILLED SYRINGE 20-0.9 MG/50ML-%	3	
PHENYLEPHRINE HCL-NACL SOLUTION 10-0.9 MG/250ML-% INTRAVENOUS	3	

Drug Name	Drug Tier	Notes
PHENYLEPHRINE HCL-NACL SOLUTION PREFILLED SYRINGE 0.5-0.9 MG/5ML-% INTRAVENOUS	3	
PHENYLEPHRINE HCL-NACL SOLUTION PREFILLED SYRINGE 0.8-0.9 MG/10ML-% INTRAVENOUS	3	
pindolol	1	HDHP
pravastatin sodium	1	ACA; HDHP
prazosin hcl oral	1	HDHP
PRESTALIA	3	HDHP
prevalite	1	HDHP
propafenone hcl	1	
propafenone hcl er	1	
propranolol hcl er	1	HDHP
PROPRANOLOL HCL ORAL SOLUTION	2	HDHP
propranolol hcl oral tablet	1	HDHP
quinapril hcl	1	HDHP
QUINAPRIL-HYDROCHLOROTHIAZIDE	3	HDHP
quinidine gluconate er	1	
QUINIDINE SULFATE	2	
ramipril	1	HDHP
ranolazine er	1	HDHP
REDEMPLO	6	PA; SP; QL (0.006 ML per 1 day)
REPATHA	2	HDHP; QL (0.11 ML per 1 day)
REPATHA SURECLICK	2	HDHP; QL (0.11 ML per 1 day)
rosuvastatin calcium oral tablet 10 mg, 5 mg	1	ACA; HDHP
rosuvastatin calcium oral tablet 20 mg, 40 mg	1	HDHP
sacubitril-valsartan	1	QL (2 EA per 1 day)
simvastatin oral tablet 10 mg, 20 mg, 40 mg, 5 mg	1	ACA; HDHP
simvastatin oral tablet 80 mg	1	HDHP
sotalol hcl (af)	1	HDHP
sotalol hcl oral	1	HDHP
SOTYLIZE	3	HDHP
spironolactone oral tablet	1	HDHP
spironolactone-hctz	1	HDHP
SULAR	3	HDHP
TEKTURNA	2	HDHP
telmisartan	1	HDHP
TELMISARTAN-AMLODIPINE	3	HDHP
tiadylt er	1	HDHP
timolol maleate oral tablet 10 mg	1	HDHP
TIMOLOL MALEATE ORAL TABLET 20 MG, 5 MG	2	HDHP
torsemide	1	HDHP
trandolapril	1	HDHP
TRANDOLAPRIL-VERAPAMIL HCL ER	2	HDHP
triamterene-hctz	1	HDHP
TRYNGOLZA	6	PA; SP; QL (0.03 ML per 1 day)
TRYVIO	3	PA; HDHP; QL (1 EA per 1 day)
valsartan oral tablet	1	HDHP
valsartan-hydrochlorothiazide	1	HDHP
VASCEPA	2	PA; HDHP

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Drug Name	Drug Tier	Notes
VECAMYL	3	HDHP
VERAPAMIL HCL ER ORAL CAPSULE EXTENDED RELEASE 24 HOUR 100 MG, 200 MG, 300 MG, 360 MG	2	HDHP
verapamil hcl er oral capsule extended release 24 hour 120 mg, 180 mg, 240 mg	1	HDHP
verapamil hcl er oral tablet extended release	1	HDHP
verapamil hcl oral	1	HDHP
VERQUVO	3	PA; QL (1 EA per 1 day)
VYNDAMAX	6	PA; SP; QL (1 EA per 1 day)
Central Nervous System Agents		
SKYCLARYS	6	PA; SP; QL (3 EA per 1 day)
Central Nervous System Agents - Drugs for Attention Deficit Disorder		
amphetamine er	1	QL (1 EA per 1 day)
amphetamine sulfate	1	QL (6 EA per 1 day)
amphetamine-dextroamphetamine er	1	QL (2 EA per 1 day)
amphetamine-dextroamphetamine oral tablet 10 mg, 12.5 mg, 15 mg, 20 mg, 5 mg, 7.5 mg	1	QL (3 EA per 1 day)
amphetamine-dextroamphetamine oral tablet 30 mg	1	QL (2 EA per 1 day)
amphet-dextroamphet 3-bead er	1	QL (1 EA per 1 day)
APTENSIO XR	3	ST; QL (1 EA per 1 day)
atomoxetine hcl	1	QL (1 EA per 1 day)
AZSTARYS	2	ST; QL (1 EA per 1 day)
clonidine hcl er	1	
dexmethylphenidate hcl	1	QL (2 EA per 1 day)
dexmethylphenidate hcl er	1	QL (1 EA per 1 day)
dextroamphetamine sulfate er oral capsule extended release 24 hour 10 mg	1	QL (6 EA per 1 day)
dextroamphetamine sulfate er oral capsule extended release 24 hour 15 mg	1	QL (4 EA per 1 day)
dextroamphetamine sulfate er oral capsule extended release 24 hour 5 mg	1	QL (3 EA per 1 day)
dextroamphetamine sulfate oral solution	1	QL (60 ML per 1 day)
dextroamphetamine sulfate oral tablet 10 mg	1	QL (6 EA per 1 day)
dextroamphetamine sulfate oral tablet 15 mg, 2.5 mg, 20 mg, 5 mg, 7.5 mg	1	QL (3 EA per 1 day)
dextroamphetamine sulfate oral tablet 30 mg	1	QL (2 EA per 1 day)
guanfacine hcl er	1	
JORNAY PM	3	ST; QL (1 EA per 1 day)
lisdexamfetamine dimesylate	1	QL (1 EA per 1 day)
METHYLIN ORAL SOLUTION 10 MG/5ML	3	ST; QL (30 ML per 1 day)
METHYLIN ORAL SOLUTION 5 MG/5ML	3	ST; QL (60 ML per 1 day)
methylphenidate hcl er (cd)	1	QL (1 EA per 1 day)
methylphenidate hcl er (la)	1	QL (1 EA per 1 day)

Drug Name	Drug Tier	Notes
methylphenidate hcl er (osm) oral tablet extended release 18 mg, 27 mg, 54 mg	1	QL (1 EA per 1 day)
methylphenidate hcl er (osm) oral tablet extended release 36 mg	1	QL (2 EA per 1 day)
methylphenidate hcl er (xr)	1	QL (1 EA per 1 day)
methylphenidate hcl er oral tablet extended release 10 mg	1	QL (2 EA per 1 day)
methylphenidate hcl er oral tablet extended release 20 mg	1	QL (3 EA per 1 day)
METHYLPHENIDATE HCL ER ORAL TABLET EXTENDED RELEASE 24 HOUR 18 MG, 27 MG, 54 MG	3	QL (1 EA per 1 day)
METHYLPHENIDATE HCL ER ORAL TABLET EXTENDED RELEASE 24 HOUR 36 MG	3	QL (2 EA per 1 day)
METHYLPHENIDATE HCL ER(DIFFUS) ORAL TABLET EXTENDED RELEASE 27 MG, 54 MG	3	ST; QL (1 EA per 1 day)
METHYLPHENIDATE HCL ER(DIFFUS) ORAL TABLET EXTENDED RELEASE 36 MG	3	ST; QL (2 EA per 1 day)
methylphenidate hcl oral solution 10 mg/5ml	1	QL (30 ML per 1 day)
methylphenidate hcl oral solution 5 mg/5ml	1	QL (60 ML per 1 day)
methylphenidate hcl oral tablet	1	QL (3 EA per 1 day)
methylphenidate hcl oral tablet chewable 10 mg	1	QL (6 EA per 1 day)
methylphenidate hcl oral tablet chewable 2.5 mg, 5 mg	1	QL (3 EA per 1 day)
ONYDA XR	3	ST; QL (4 ML per 1 day)
procentra	1	QL (60 ML per 1 day)
zenzedi oral tablet 10 mg	1	QL (6 EA per 1 day)
zenzedi oral tablet 15 mg, 2.5 mg, 20 mg, 5 mg, 7.5 mg	1	QL (3 EA per 1 day)
zenzedi oral tablet 30 mg	1	QL (2 EA per 1 day)
Central Nervous System Agents - Drugs for Multiple Sclerosis		
AVONEX PEN	5	PA; SP; QL (0.04 EA per 1 day)
AVONEX PREFILLED	5	PA; SP; QL (0.04 EA per 1 day)
BAFIERTAM	5	PA; SP; QL (4 EA per 1 day)
BETASERON	5	PA; SP; QL (0.5 EA per 1 day)
cladribine (10 tabs)	4	PA; SP; QL (40 EA per 1 lifetime)
cladribine (4 tabs)	4	PA; SP; QL (40 EA per 1 lifetime)
cladribine (5 tabs)	4	PA; SP; QL (40 EA per 1 lifetime)
cladribine (6 tabs)	4	PA; SP; QL (40 EA per 1 lifetime)
cladribine (7 tabs)	4	PA; SP; QL (40 EA per 1 lifetime)

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Drug Name	Drug Tier	Notes
cladribine (8 tabs)	4	PA; SP; QL (40 EA per 1 lifetime)
cladribine (9 tabs)	4	PA; SP; QL (40 EA per 1 lifetime)
dalfampridine er	4	PA; SP; QL (2 EA per 1 day)
dimethyl fumarate oral	4	PA; SP; QL (2 EA per 1 day)
dimethyl fumarate starter pack	4	PA; SP; QL (120 EA per 365 days)
fingolimod hcl	4	PA; SP; QL (1 EA per 1 day)
GILENYA ORAL CAPSULE 0.25 MG	6	PA; SP; QL (1 EA per 1 day)
glatiramer acetate subcutaneous solution prefilled syringe 20 mg/ml	4	PA; SP; QL (1 ML per 1 day)
glatiramer acetate subcutaneous solution prefilled syringe 40 mg/ml	4	PA; SP; QL (0.43 ML per 1 day)
glatopa subcutaneous solution prefilled syringe 20 mg/ml	4	PA; SP; QL (1 ML per 1 day)
glatopa subcutaneous solution prefilled syringe 40 mg/ml	4	PA; SP; QL (0.43 ML per 1 day)
KESIMPTA	5	PA; SP; QL (0.02 ML per 1 day)
MAVENCLAD	6	PA; SP; QL (40 EA per 1 lifetime)
MAYZENT ORAL TABLET 0.25 MG	6	PA; SP; QL (4 EA per 1 day)
MAYZENT ORAL TABLET 1 MG, 2 MG	6	PA; SP; QL (1 EA per 1 day)
MAYZENT STARTER PACK ORAL TABLET THERAPY PACK 12 X 0.25 MG	6	PA; SP; QL (24 EA per 365 days)
MAYZENT STARTER PACK ORAL TABLET THERAPY PACK 7 X 0.25 MG	6	PA; SP; QL (14 EA per 365 days)
teriflunomide	4	PA; SP; QL (1 EA per 1 day)
TYRUKO	6	PA; SP; QL (0.54 ML per 1 day)
VUMERITY	5	PA; SP; QL (4 EA per 1 day)
ZEPOSIA	6	PA; SP; QL (1 EA per 1 day)
ZEPOSIA 7-DAY STARTER PACK	6	PA; SP; QL (14 EA per 365 days)
ZEPOSIA STARTER KIT	6	PA; SP; QL (56 EA per 365 days)
Central Nervous System Agents - Miscellaneous		
AUSTEDO	6	PA; SP; QL (4 EA per 1 day)
AUSTEDO XR	6	PA; SP; QL (1 EA per 1 day)
AUSTEDO XR PATIENT TITRATION	6	PA; SP; QL (56 EA per 365 days)
caffeine citrate oral	1	
gabapentin (once-daily) oral tablet 300 mg	1	ST; QL (6 EA per 1 day)
gabapentin (once-daily) oral tablet 450 mg, 600 mg	1	ST; QL (3 EA per 1 day)
gabapentin (once-daily) oral tablet 750 mg, 900 mg	1	ST; QL (2 EA per 1 day)
GRALISE ORAL TABLET 300 MG	3	ST; QL (6 EA per 1 day)
GRALISE ORAL TABLET 450 MG, 600 MG	3	ST; QL (3 EA per 1 day)

Drug Name	Drug Tier	Notes
GRALISE ORAL TABLET 750 MG, 900 MG	3	ST; QL (2 EA per 1 day)
HORIZANT	3	PA; QL (2 EA per 1 day)
INGREZZA ORAL CAPSULE	6	PA; SP; QL (1 EA per 1 day)
INGREZZA ORAL CAPSULE SPRINKLE	6	PA; SP; QL (1 EA per 1 day)
INGREZZA ORAL CAPSULE THERAPY PACK	6	PA; SP; QL (56 EA per 365 days)
milnacipran hcl oral	1	QL (110 EA per 365 days)
milnacipran hcl oral tablet	1	QL (2 EA per 1 day)
NUEDEXTA	3	PA
pregabalin oral capsule 100 mg, 150 mg, 200 mg, 225 mg, 25 mg, 50 mg, 75 mg	1	QL (3 EA per 1 day)
pregabalin oral capsule 300 mg	1	QL (2 EA per 1 day)
pregabalin oral solution	1	QL (30 ML per 1 day)
RADICAVA ORS	5	PA; SP
RADICAVA ORS STARTER KIT	5	PA; SP
riluzole	1	
ROCURONIUM BROMIDE INTRAVENOUS SOLUTION PREFILLED SYRINGE 75 MG/7.5ML	3	
ROCURONIUM BROMIDE SOLUTION PREFILLED SYRINGE 100 MG/10ML INTRAVENOUS	3	
SAVELLA	3	ST; QL (2 EA per 1 day)
SAVELLA TITRATION PACK	3	ST; QL (110 EA per 365 days)
SUCCINYLCHOLINE CHLORIDE INJECTION SOLUTION PREFILLED SYRINGE 200 MG/10ML	3	
SUCCINYLCHOLINE CHLORIDE SOLUTION PREFILLED SYRINGE 140 MG/7ML INTRAVENOUS	3	
SUCCINYLCHOLINE CHLORIDE SOLUTION PREFILLED SYRINGE 200 MG/10ML INTRAVENOUS	3	
TEGLUTIK	2	ST; QL (20 ML per 1 day)
tetrabenazine	4	PA; SP
TIGLUTIK	2	ST; QL (20 ML per 1 day)
VECURONIUM BROMIDE INTRAVENOUS SOLUTION PREFILLED SYRINGE	3	
WAINUA SUBCUTANEOUS SOLUTION AUTO-INJECTOR	6	PA; SP; QL (0.03 ML per 1 day)
Dental and Oral Agents - Drugs for Mouth and Throat Conditions		
AQUORAL	3	
cevimeline hcl	1	
chlorhexidine gluconate mouth/throat	1	
kourzeq	1	
lidocaine viscous hcl	1	
oralone	1	
PERIDEX	3	
periogard	1	
pilocarpine hcl oral	1	

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Drug Name	Drug Tier	Notes
triamcinolone acetonide mouth/throat	1	
Dermatological Agents - Drugs for Skin Conditions		
ABSORICA LD	3	PA
accutane	1	
acitretin	1	
adapalene-benzoyl peroxide external gel	1	
ADBRY	5	PA; SP; QL (0.15 ML per 1 day)
AKLIEF	3	PA
ala-cort	1	
alclometasone dipropionate external cream	1	
ALCLOMETASONE DIPROPIONATE EXTERNAL OINTMENT	2	
AMCINONIDE	3	
ammonium lactate external	1	
amnesteem	1	
AMZEEQ	3	
ANZUPGO	3	PA; QL (1.1 GM per 1 day)
AQUACEL AG BURN	3	
ATRAPRO DERMAL SPRAY	3	
azelaic acid external	1	
benzoyl peroxide-erythromycin	1	
betamethasone dipropionate aug external cream	1	
BETAMETHASONE DIPROPIONATE AUG EXTERNAL GEL	2	

Drug Name	Drug Tier	Notes
betamethasone dipropionate aug external lotion	1	
betamethasone dipropionate aug external ointment	1	
betamethasone dipropionate external	1	
betamethasone valerate external cream	1	
betamethasone valerate external foam	1	
BETAMETHASONE VALERATE EXTERNAL LOTION	2	
betamethasone valerate external ointment	1	
brimonidine tartrate external	1	
calcipotriene external cream	1	
calcipotriene external ointment	1	
CALCIPOTRIENE EXTERNAL SOLUTION	3	
calcipotriene-betameth diprop external suspension	1	QL (4 GM per 1 day)
calcitrene	1	
CIBINQO	5	PA; SP; QL (1 EA per 1 day)
claravis	1	
CLEOCIN-T	3	
clindacin etz	1	
clindacin-p	1	
clindamycin phos (twice-daily)	1	
clindamycin phosphate-benzoyl peroxide	1	
clindamycin phosphate external lotion	1	

Drug Name	Drug Tier	Notes
clindamycin phosphate external solution	1	
clindamycin phosphate external swab	1	
clobetasol prop emollient base	1	
clobetasol propionate e	1	
clobetasol propionate external cream 0.05 %	1	
clobetasol propionate external foam	1	
clobetasol propionate external gel	1	
clobetasol propionate external liquid	1	
clobetasol propionate external lotion	1	
clobetasol propionate external ointment	1	
clobetasol propionate external shampoo	1	
clobetasol propionate external solution	1	
clodan	1	
COAL TAR EXTERNAL	3	
CONDYLOX	3	
DERMA-SMOOTHE/FS BODY	3	
DERMA-SMOOTHE/FS SCALP	3	
desonide external cream	1	
desonide external lotion	1	
desonide external ointment	1	
desoximetasone external cream 0.25 %	1	
DESOXIMETASONE EXTERNAL GEL	2	
desoximetasone external liquid	1	

Drug Name	Drug Tier	Notes
desoximetasone external ointment 0.25 %	1	
diclofenac sodium external gel 3 %	1	QL (10 GM per 1 day)
DIPROLENE	3	
DRYSOL	3	
DUPIXENT SUBCUTANEOUS SOLUTION AUTO-INJECTOR 200 MG/1.14ML	5	PA; SP; QL (0.17 ML per 1 day)
DUPIXENT SUBCUTANEOUS SOLUTION AUTO-INJECTOR 300 MG/2ML	5	PA; SP; QL (0.29 ML per 1 day)
DUPIXENT SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 200 MG/1.14ML	5	PA; SP; QL (0.17 ML per 1 day)
DUPIXENT SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 300 MG/2ML	5	PA; SP; QL (0.29 ML per 1 day)
EBGLYSS	5	PA; SP; QL (0.15 ML per 1 day)
ENSTILAR	3	QL (15 GM per 1 day)
EPIDUO FORTE	3	
EPIFOAM	3	
ERY PAD 2%	3	
ERYTHROMYCIN EXTERNAL GEL	2	
erythromycin external solution	1	
EUCRISA	2	ST
FILSUVEZ	6	PA; SP; QL (15 GM per 1 day)
FINACEA EXTERNAL FOAM	3	

Drug Name	Drug Tier	Notes
fluocinolone acetonide body	1	
fluocinolone acetonide external	1	
fluocinolone acetonide scalp	1	
fluocinonide emulsified base	1	
fluocinonide external	1	
fluorouracil external cream 5 %	1	
FLUOROURACIL EXTERNAL SOLUTION 2 %	2	
fluorouracil external solution 5 %	1	
FLURANDRENOLIDE	3	
fluticasone propionate external cream	1	
FLUTICASONE PROPIONATE EXTERNAL LOTION	3	
fluticasone propionate external ointment	1	
GORDOFILM	3	
halobetasol propionate external cream	1	
halobetasol propionate external ointment	1	
HYDROCORTISONE BUTYRATE EXTERNAL CREAM	2	
HYDROCORTISONE BUTYRATE EXTERNAL OINTMENT	2	
HYDROCORTISONE BUTYRATE EXTERNAL SOLUTION	2	
hydrocortisone cream 1 % external (rx)	1	
hydrocortisone external cream 2.5 %	1	
hydrocortisone external ointment 1 %, 2.5 %	1	
hydrocortisone valerate	1	
HYPOCYN ANTIPRURITIC	3	
imiquimod external cream 3.75 %	1	ST
imiquimod external cream 5 %	1	
imiquimod pump	1	ST
isotretinoin oral capsule 10 mg, 20 mg, 30 mg, 40 mg	1	
ivermectin external cream	1	
KERALYT EXTERNAL SHAMPOO	3	
KLARON	3	
KLISYRI (250 MG)	3	ST
KLISYRI (350 MG)	3	ST
LACTIC ACID E	3	
LEQSELVI	6	PA; SP; QL (2 EA per 1 day)
LITFULO	6	PA; SP; QL (1 EA per 1 day)
L-MESITRAN SOFT WOUND	3	
LUXAMEND	3	
MEDIHONEY WOUND/BURN DRESSING EXTERNAL GEL	3	
METHOXSALEN RAPID	3	
METROCREAM	3	
metronidazole external	1	
MICROCYN EXTERNAL LIQUID	3	
MIRVASO	2	
mometasone furoate external	1	

Drug Name	Drug Tier	Notes
NEMLUVIO	5	PA; SP; QL (0.08 EA per 1 day)
NEO-SYNALAR	3	
neuac	1	
ONEXTON	3	ST
OPZELURA	2	ST; QL (3.34 GM per 1 day)
PETROLEUM GAUZE NON-WOVEN 3X9"	3	
pimecrolimus	1	ST; QL (2 GM per 1 day)
PODOCON-25	3	
podofilox external gel	1	
PODOFILOX EXTERNAL SOLUTION	2	
PYROGALLIC ACID	3	
QBREXZA	3	QL (1 EA per 1 day)
RADIAPLEXRX	3	
REGENECARE	3	
RETIN-A MICRO PUMP	3	PA
SANTYL	3	QL (3 GM per 1 day)
SELENIUM SULFIDE EXTERNAL LOTION	2	
SOFDRA	3	QL (1.4 ML per 1 day)
SOOLANTRA	3	
sulfacetamide sodium (acne)	1	
SYNALAR	3	
TACLONEX	3	QL (4 GM per 1 day)
tacrolimus external	1	QL (2 GM per 1 day)
tazarotene external cream	1	PA
tazarotene external gel 0.05 %	1	PA

Drug Name	Drug Tier	Notes
TOLAK	3	
TOPICORT	3	
tretinoin microsphere external gel 0.08 %	1	
tretinoin microsphere pump external gel 0.08 %	1	
triamcinolone acetonide external cream	1	
TRIAMCINOLONE ACETONIDE EXTERNAL LOTION 0.025 %	2	
triamcinolone acetonide external lotion 0.1 %	1	
triamcinolone acetonide external ointment 0.025 %, 0.1 %, 0.5 %	1	
triderm	1	
UREA EXTERNAL CREAM 20 %, 40 %	3	
VTAMA	2	ST
WYNZORA	3	QL (15 GM per 1 day)
XALIX	3	
XERAC AC	3	
ZELSUVMI	3	PA
zenatane	1	
ZILXI	3	ST
ZORYVE	2	ST
Diabetes - Antidiabetic Agents		
acarbose oral	1	HDHP
CYCLOSET	3	ST; HDHP
dapaglifloz base-metformin er	1	HDHP
dapagliflozin	1	HDHP
DUETACT	3	HDHP
FARXIGA	2	HDHP
glimepiride oral tablet 1 mg, 2 mg, 4 mg	1	HDHP

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Drug Name	Drug Tier	Notes
GLIMEPIRIDE ORAL TABLET 3 MG	2	HDHP
glipizide er	1	HDHP
glipizide oral tablet 10 mg, 5 mg	1	HDHP
GLIPIZIDE ORAL TABLET 2.5 MG	3	HDHP
glipizide-metformin hcl	1	HDHP
GLUCOTROL XL	3	HDHP
glyburide	1	HDHP
glyburide-metformin	1	HDHP
GLYXAMBI	2	HDHP
JANUMET	2	HDHP
JANUMET XR	2	HDHP
JANUVIA	2	HDHP
JARDIANCE	2	HDHP
JENTADUETO	2	HDHP
JENTADUETO XR	2	HDHP
liraglutide	2	PA; QL (0.3 ML per 1 day)
metformin hcl er	1	HDHP
metformin hcl oral solution	1	HDHP
metformin hcl oral tablet 1000 mg, 500 mg, 850 mg	1	HDHP
MIGLITOL	3	HDHP
MOUNJARO	2	PA; QL (0.08 ML per 1 day)
nateglinide	1	HDHP
OZEMPIC	2	PA; QL (0.11 ML per 1 day)
pioglitazone hcl	1	HDHP
pioglitazone hcl-glimepiride	1	HDHP
pioglitazone hcl-metformin hcl	1	HDHP
repaglinide	1	HDHP
RIOMET	3	ST; HDHP
RYBELSUS ORAL TABLET 14 MG, 7 MG	2	PA; QL (1 EA per 1 day)
RYBELSUS ORAL TABLET 3 MG	2	PA; QL (60 EA per 365 days)
saxagliptin hcl	1	HDHP
saxagliptin-metformin er	1	HDHP
SOLIQUA	2	HDHP
SYNJARDY	2	HDHP
SYNJARDY XR	2	HDHP
TRADJENTA	2	HDHP
TRIJARDY XR	2	HDHP
TRULICITY	2	PA; QL (0.08 ML per 1 day)
XIGDUO XR	2	HDHP
XULTOPHY	3	HDHP
Diabetes - Glucose Monitoring		
ADVANTAGE SAFETY LANCETS 28G	2	HDHP
ADVOCATE SAFETY LANCETS 21G	2	HDHP
ADVOCATE SAFETY LANCETS 23G	2	HDHP
ADVOCATE SAFETY LANCETS 28G	2	HDHP
CARESENS LANCETS 30G	2	HDHP
CHEMSTRIP K	3	
CHEMSTRIP UGK	3	
CHOSEN LANCETS 30G	2	HDHP
CHOSEN SAFETY LANCETS 28G	2	HDHP
CLEVER CHOICE COMFORT EZ	2	HDHP
COMFORT TOUCH TWIST LANCET 30G	2	HDHP
CONTOUR CONTROL SOLUTION	2	
CONTOUR NEXT CONTROL SOLUTION	2	
CONTOUR NEXT GEN TEST STRIPS	2	HDHP; QL (10 EA per 1 day)

Drug Name	Drug Tier	Notes
CONTOUR PLUS CONTROL SOLUTION	3	
CONTOUR PLUS TEST STRIP	2	HDHP; QL (10 EA per 1 day)
CONTOUR TEST STRIPS	2	HDHP; QL (10 EA per 1 day)
DEXCOM G6 RECEIVER	2	PA
DEXCOM G6 SENSOR	2	PA
DEXCOM G6 TRANSMITTER	2	PA
DEXCOM G7 15 DAY SENSOR	2	PA
DEXCOM G7 RECEIVER	2	PA
DEXCOM G7 SENSOR	2	PA
DIASTIX REAGENT	2	
DROPSAFE ACTI-LANCE 23G	2	HDHP
DROPSAFE MEDLANCE LANCET 30G	2	HDHP
FONDCIRCLE SINGLE USE LANCETS	2	HDHP
GUARDIAN REAL-TIME CHARGER	3	
GUARDIAN REAL-TIME TEST PLUG	3	
KETO-DIASTIX	3	
KETONE CARE	3	
KETOSTIX	3	
KT TAPE CGM PATCH	3	
LANCETS	2	HDHP
LANCETS 28G THIN	2	HDHP
LANCETS SUPER THIN	2	HDHP
MICROLET NEXT LANCETS	2	HDHP
MINIMED INSTINCT GLUC SENSOR	3	PA
MOBILE LANCETS 30G	2	HDHP
ONETOUCH DELICA SAFETY LANCING	2	HDHP
PERFECT POINT SAFETY LANCETS	2	HDHP
PURE COMFORT SAFETY LANCET 30G	2	HDHP
SENSILANCE SAFETY LANCETS 21G	2	HDHP
SENSILANCE SAFETY LANCETS 26G	2	HDHP
SENSILANCE SAFETY LANCETS 28G	2	HDHP
SIMPLERA SYNC SENSOR	3	PA
TECHLITE LANCETS 26G	2	HDHP
VERIFINE SAFE LANCET MINI 21G	2	HDHP
VERIFINE SAFE LANCET MINI 23G	2	HDHP
VERIFINE SAFE LANCET MINI 28G	2	HDHP
VERIFINE SAFE LANCET MINI 30G	2	HDHP
VIVAGUARD LANCETS 30G	2	HDHP
VIVAGUARD SAFETY LANCETS 28G	2	HDHP
Diabetes - Glycemic Agents		
BAQSIMI ONE PACK	2	
BAQSIMI TWO PACK	2	
diazoxide oral	1	
glucagon emergency kit injection solution reconstituted 1 mg	1	
GLUCAGON EMERGENCY KIT	2	
GVOKE HYPOPEN 1-PACK	2	
GVOKE HYPOPEN 2-PACK	2	
GVOKE PFS	2	

Drug Name	Drug Tier	Notes
Diabetes - Insulins		
ADMELOG	1	HDHP
ADMELOG SOLOSTAR	1	HDHP
AFREZZA	3	PA; HDHP
APIDRA SOLOSTAR	1	HDHP
APIDRA VIAL	1	HDHP
AQ INSULIN SYRINGE	2	HDHP
BASAGLAR KWIKPEN	1	HDHP
BD ULTRA-FINE INSULIN SYRINGES 27G X 1/2" 1 ML, 29G X 1/2" 0.3 ML, 29G X 1/2" 0.5 ML, 29G X 1/2" 1 ML, 30G X 1/2" 0.3 ML, 30G X 1/2" 0.5 ML, 30G X 1/2" 1 ML, 31G X 15/64" 0.3 ML, 31G X 5/16" 0.3 ML, 31G X 5/16" 0.5 ML, 31G X 5/16" 1 ML, 31G X 6MM 0.5 ML	2	HDHP
BD VEO INSULIN SYR ULTRAFINE	2	HDHP
DROPSAFE SAFETY SYRINGE/NEEDLE	2	HDHP
EMBECTA INS SYR U/F 1/2 UNIT	2	HDHP
EMBECTA INSULIN SYR ULTRAFINE	2	HDHP
EMBECTA INSULIN SYRINGE	2	HDHP
EMBECTA INSULIN SYRINGE U-100	2	HDHP
EMBECTA INSULIN SYRINGE U-500	2	HDHP
FIASP	1	HDHP
FIASP FLEXTOUCH	1	HDHP
FIASP PENFILL	1	HDHP
FIASP PUMPCART	1	HDHP
HUMALOG	1	HDHP
HUMALOG KWIKPEN	1	HDHP

Drug Name	Drug Tier	Notes
HUMALOG MIX 50/50 KWIKPEN	1	HDHP
HUMALOG MIX 75/25 KWIKPEN	1	HDHP
HUMALOG MIX 75/25 VIAL	1	HDHP
HUMALOG U-100 JUNIOR KWIKPEN	1	HDHP
HUMULIN 70/30 KWIKPEN	1	HDHP
HUMULIN 70/30 VIAL	1	HDHP
HUMULIN N KWIKPEN	1	HDHP
HUMULIN N VIAL	1	HDHP
HUMULIN R U-500 KWIKPEN	1	HDHP
HUMULIN R VIAL	1	HDHP
INSULIN GLARGINE-YFGN SUBCUTANEOUS SOLUTION PEN-INJECTOR	1	HDHP
INSULIN LISPRO	1	HDHP
INSULIN LISPRO (1 UNIT DIAL)	1	HDHP
INSULIN LISPRO JUNIOR KWIKPEN	1	HDHP
INSULIN LISPRO PROT & LISPRO	1	HDHP

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Drug Name	Drug Tier	Notes
INSULIN SYRINGES 27G X 1/2" 0.5 ML, 27G X 1/2" 1 ML, 27G X 5/8" 1 ML, 28G X 1/2" 0.5 ML, 28G X 1/2" 1 ML, 29G X 1/2" 0.3 ML, 29G X 1/2" 0.5 ML, 29G X 1/2" 1 ML, 29G X 5/16" 0.5 ML, 29G X 5/16" 1 ML, 30G X 1/2" 0.3 ML, 30G X 1/2" 0.5 ML, 30G X 1/2" 1 ML, 30G X 5/16" 0.3 ML, 30G X 5/16" 0.5 ML, 30G X 5/16" 1 ML, 31G X 1/2" 0.3 ML, 31G X 15/64" 0.3 ML, 31G X 15/64" 0.5 ML, 31G X 15/64" 1 ML, 31G X 5/16" 0.3 ML, 31G X 5/16" 0.5 ML, 31G X 5/16" 1 ML, 32G X 5/16" 0.5 ML, 32G X 5/16" 1 ML	2	HDHP
LANTUS SOLOSTAR	1	HDHP
LANTUS U-100 VIAL	1	HDHP
LYUMJEV KWIKPEN	1	HDHP
LYUMJEV VIAL	1	HDHP
MERILOG	1	HDHP
MERILOG SOLOSTAR	1	HDHP
NOVOLIN 70/30 FLEXPEN	1	HDHP
NOVOLIN 70/30 VIAL	1	HDHP
NOVOLIN N FLEXPEN	1	HDHP
NOVOLIN N VIAL	1	HDHP
NOVOLIN R FLEXPEN	1	HDHP
NOVOLIN R VIAL	1	HDHP
NOVOLOG FLEXPEN	1	HDHP
NOVOLOG MIX 70/30 FLEXPEN	1	HDHP
NOVOLOG MIX 70/30 VIAL	1	HDHP
NOVOLOG PENFILL	1	HDHP
NOVOLOG U-100 VIAL	1	HDHP
REZVOGLAR KWIKPEN	1	HDHP
TOUJEO MAX SOLOSTAR	1	HDHP
TOUJEO SOLOSTAR	1	HDHP
ULTIGUARD SAFEPACK SYR/NEEDLE	2	HDHP
VERIFINE INSULIN SYRINGE	2	HDHP
Electrolytes / Minerals / Metals / Vitamins		
AMINO ACID	3	
AMINO ACID-CALCIUM-HEP IN D10W INTRAVENOUS SOLUTION 3 %	3	
AMINOPROTECT	3	
ARGININE HCL INJECTION	3	
ARGYLE STERILE SALINE	3	
CALCIUM GLUCONATE-NACL INTRAVENOUS SOLUTION 1-0.9 GM/100ML-%, 2-0.9 GM/100ML-%	3	
carglumic acid	4	PA; SP
CHEMET	3	
CURITY STERILE SALINE	3	
cyanocobalamin injection solution 1000 mcg/ml	1	
cyanocobalamin nasal	1	
deferasirox	1	PA
deferasirox granules	1	PA
DEXPANTHENOL INJECTION	3	
DRISDOL	3	
EDETATE DISODIUM INTRAVENOUS	3	

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Drug Name	Drug Tier	Notes
EFFER-K	3	
ergocalciferol oral capsule	1	
FERRIPROX ORAL SOLUTION	3	PA
folic acid tablet 1 mg oral (rx)	1	
GALZIN	3	
GLUTATHIONE INJECTION SOLUTION 200 MG/ML	3	
GLUTATHIONE INTRAVENOUS	3	
GLYCINE INJECTION	3	
HEMATINIC/FOLIC ACID	3	
INFED	3	
INJECTAFER INTRAVENOUS SOLUTION 1000 MG/20ML	3	ST
IODINE STRONG	3	
kionex	1	
klor-con	1	
klor-con 10	1	
klor-con m10	1	
klor-con m15	1	
klor-con m20	1	
K-PHOS	3	
LEVOCARNITINE INJECTION	3	
levocarnitine oral solution	1	
levocarnitine oral tablet	1	
levocarnitine sf	1	
LIPO	3	
LIPO-C	3	
LOKELMA	3	
LYSINE HCL INJECTION	3	

Drug Name	Drug Tier	Notes
MAGNESIUM SULFATE INTRAVENOUS SOLUTION 3 GM/100ML	3	
MAGNESIUM SULFATE-NACL	3	
METHYLCOBALAMIN INJECTION SOLUTION RECONSTITUTED	3	
NASCOBAL	3	
PHOSPHOROUS	3	
PHOSPHO-TRIN 250 NEUTRAL	3	
PHOSPHO-TRIN K500	3	
phytonadione oral	1	
potassium chloride crys er	1	
potassium chloride er oral capsule extended release	1	
potassium chloride er oral tablet extended release 10 meq, 20 meq, 8 meq	1	
potassium chloride oral packet 20 meq	1	
POTASSIUM CHLORIDE ORAL PACKET 40 MEQ	3	
potassium chloride oral solution	1	
potassium citrate er	1	
PRISMASOL B22GK 4/0	3	
PRISMASOL BGK 0/2.5	3	
PRISMASOL BGK 2/0	3	
PRISMASOL BGK 2/3.5	3	
PRISMASOL BGK 4/2.5	3	

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Drug Name	Drug Tier	Notes
PRISMASOL BK 0/0/1.2	3	
PYRIDOXINE HCL INJECTION	3	
SOD CITRATE-CITRIC ACID SOLUTION 500-334 MG/5ML ORAL (RX)	3	
SODIUM CHLORIDE SOLUTION 0.9 % IRRIGATION	3	
sodium chloride solution 0.9 % irrigation	1	
SODIUM CITRATE-CITRIC ACID	3	
sodium polystyrene sulfonate	1	
sps (sodium polystyrene sulf) combination	1	
SPS (SODIUM POLYSTYRENE SULF) RECTAL	3	
TAURINE INJECTION	3	
tolvaptan	4	PA; SP; QL (2 EA per 1 day)
tolvaptan (hyponatremia)	4	PA; SP; QL (2 EA per 1 day)
TRI-AMINO	3	
trientine hcl oral capsule 250 mg	4	PA; SP
TRIENTINE HCL ORAL CAPSULE 500 MG	6	PA; SP
VELTASSA	3	
vitamin d (ergocalciferol) oral capsule 1.25 mg (50000 ut)	1	
Gastrointestinal Agents - Drugs for Acid Reflux and Ulcer		
CYTOTEC	3	HDHP
esomeprazole magnesium oral packet	1	HDHP; QL (1 EA per 1 day)
famotidine oral suspension reconstituted	1	HDHP
misoprostol oral	1	HDHP
NEXIUM ORAL PACKET	3	HDHP; QL (1 EA per 1 day)
omeprazole oral capsule delayed release	1	HDHP; QL (1 EA per 1 day)
pantoprazole sodium oral tablet delayed release	1	HDHP; QL (1 EA per 1 day)
sucralfate oral tablet	1	HDHP
Gastrointestinal Agents - Drugs for Bowel, Intestine and Stomach Conditions		
alosetron hcl	1	PA
ATROPINE SULFATE INTRAVENOUS SOLUTION PREFILLED SYRINGE 1.2 MG/3ML	3	
ATROPINE SULFATE SOLUTION PREFILLED SYRINGE 1 MG/2.5ML INTRAVENOUS	3	
bis subcit-metronid-tetracyc	1	HDHP
bismuth/metronidaz/tetracyclin	1	HDHP
CLENPIQ	3	HDHP
constulose	1	
cromolyn sodium oral	1	
CTEXLI	6	PA; SP
dicyclomine hcl oral capsule	1	
dicyclomine hcl oral solution 10 mg/5ml	1	
dicyclomine hcl oral tablet 20 mg	1	
DICYCLOMINE HCL ORAL TABLET 40 MG	3	

Drug Name	Drug Tier	Notes
DIPHENOXYLATE-ATROPINE ORAL LIQUID	2	
diphenoxylate-atropine oral tablet	1	
enulose	1	
GATTEX	6	PA; SP
GAVILYTE-C	2	HDHP
gavilyte-g	1	ACA; HDHP
gavilyte-n with flavor pack	1	ACA; HDHP
generlac	1	
glycopyrrolate oral solution	1	PA
glycopyrrolate oral tablet 1 mg, 2 mg	1	QL (4 EA per 1 day)
GLYCOPYRROLATE SOLUTION PREFILLED SYRINGE 0.6 MG/3ML INJECTION	3	
HYOSCYAMINE SULFATE ER	3	
HYOSCYAMINE SULFATE ORAL ELIXIR	2	
HYOSCYAMINE SULFATE ORAL TABLET	3	
HYOSCYAMINE SULFATE ORAL TABLET DISPERSIBLE	3	
HYOSCYAMINE SULFATE SL	3	
HYOSCYAMINE SULFATE SUBLINGUAL	3	
IQIRVO	6	PA; SP; QL (1 EA per 1 day)
lactulose encephalopathy	1	
lactulose oral solution	1	

Drug Name	Drug Tier	Notes
LINZESS	2	ST; QL (1 EA per 1 day)
LIVDELZI	6	PA; SP; QL (1 EA per 1 day)
loperamide hcl oral capsule	1	
lubiprostone	1	QL (2 EA per 1 day)
methscopolamine bromide oral	1	
MYTESI	3	QL (2 EA per 1 day)
na sulfate-k sulfate-mg sulf	1	ACA; HDHP
OSCIMIN	3	
peg 3350-kcl-na bicarb-nacl	1	ACA; HDHP
peg-3350/electrolytes	1	ACA; HDHP
peg-3350/electrolytes/ascorbat	1	HDHP
peg-kcl-nacl-nasulf-na asc-c	1	HDHP
PEG-PREP	3	HDHP
prucalopride succinate	1	ST; QL (1 EA per 1 day)
PYLERA	2	HDHP
RESTORA RX	3	
SEROSTIM	6	PA; SP
SUFLAVE	3	HDHP
SUPREP BOWEL PREP KIT	3	HDHP
SUTAB	3	HDHP
SYMPROIC	2	ST; QL (1 EA per 1 day)
TALICIA	2	HDHP
ursodiol oral capsule 300 mg	1	
ursodiol oral tablet	1	
VIBERZI	3	PA; QL (2 EA per 1 day)

Drug Name	Drug Tier	Notes
XERMELO	6	PA; SP; QL (3 EA per 1 day)
Genetic or Enzyme Disorder - Drugs for Replacement, Modification, Treatment		
betaine	4	SP
CERDELGA	6	PA; SP
CHOLBAM	6	PA; SP
CREON	2	
CYSTADANE	6	SP
CYSTAGON	6	SP
EVRYSDI ORAL SOLUTION RECONSTITUTED	6	PA; SP; QL (8 ML per 1 day)
EVRYSDI ORAL TABLET	6	PA; SP; QL (1 EA per 1 day)
FORZINITY	6	PA; SP; QL (0.5 ML per 1 day)
GALAFOLD	6	PA; SP; QL (0.5 EA per 1 day)
javygtor	4	PA; SP
miglustat	4	PA; SP
MYALEPT	6	PA; SP
nitisinone	4	PA; SP
NITYR	6	PA; SP
OPFOLDA	6	PA; SP; QL (0.3 EA per 1 day)
ORFADIN	6	PA; SP
PHEBURANE	6	PA; SP
sapropterin dihydrochloride	4	PA; SP
sodium phenylbutyrate oral	4	PA; SP
STRENSIQ	5	PA; SP
SUCRAID	6	PA; SP
VOXZOGO	6	PA; SP; QL (1 EA per 1 day)

Drug Name	Drug Tier	Notes
XURIDEN	6	PA; SP; QL (4 EA per 1 day)
yargesa	4	PA; SP
zelvysia	4	PA; SP
ZENPEP	2	
Genitourinary Agents - Drugs for Bladder, Genital and Kidney Conditions		
bethanechol chloride oral	1	
calcium acetate (phos binder)	1	
calcium acetate oral tablet 667 mg	1	
darifenacin hydrobromide er	1	
DEPEN TITRATABS	6	PA; SP
FILSPARI	6	PA; SP; QL (1 EA per 1 day)
flavoxate hcl	1	
FOSRENOL ORAL PACKET	3	ST
glycine irrigation	1	
glycine urologic	1	
INTRAROSA	3	ST
LITHOSTAT	3	
mirabegron er	1	
MYRBETRIQ ORAL TABLET EXTENDED RELEASE 24 HOUR	2	
oxybutynin chloride er	1	
oxybutynin chloride oral solution	1	
OXYBUTYNIN CHLORIDE ORAL TABLET 2.5 MG	3	
oxybutynin chloride oral tablet 5 mg	1	
OXYTROL	3	ST; QL (0.29 EA per 1 day)
penicillamine oral tablet	4	PA; SP

Drug Name	Drug Tier	Notes
PHENAZOPYRIDINE HCL ORAL TABLET 100 MG, 200 MG	3	
RENACIDIN	3	
RIVFLOZA SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 128 MG/0.8ML	6	PA; SP; QL (0.03 ML per 1 day)
RIVFLOZA SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 160 MG/ML	6	PA; SP; QL (0.04 ML per 1 day)
sevelamer carbonate	1	
sevelamer hcl	1	
solifenacin succinate	1	
THIOLA	6	SP
THIOLA EC	6	SP
tiopronin	4	SP
tolterodine tartrate	1	
tolterodine tartrate er	1	
trospium chloride	1	
trospium chloride er	1	
VANRAFIA	6	PA; SP; QL (1 EA per 1 day)
VOYXACT	6	PA; SP; QL (0.8 ML per 1 day)
Genitourinary Agents - Drugs for Prostate Conditions		
alfuzosin hcl er	1	
dutasteride oral	1	
dutasteride-tamsulosin hcl	1	
finasteride oral tablet 5 mg	1	
silodosin	1	
tamsulosin hcl	1	
terazosin hcl	1	HDHP

Drug Name	Drug Tier	Notes
Hormonal Agents - Adrenal		
AGAMREE	6	PA; SP
betamethasone sod phos & acet injection suspension 6 (3-3) mg/ml	1	
BETAMETHASONE SODIUM PHOSPHATE INJECTION	3	
BLT-25	3	
CELESTONE SOLUSPAN	3	
DEXAMETHASONE (LA) INJECTION SUSPENSION 16 MG/ML	3	
DEXAMETHASONE INTENSOL	3	
dexamethasone oral elixir	1	
DEXAMETHASONE ORAL SOLUTION	2	
dexamethasone oral tablet	1	
dexamethasone oral tablet therapy pack 1.5 mg (21)	1	
dexamethasone sodium phosphate injection solution 120 mg/30ml	1	
fludrocortisone acetate oral	1	
hidex 6-day	1	
hydrocortisone oral	1	
hydrocortisone sod suc (pf)	1	
MEDROL ORAL TABLET 16 MG, 4 MG, 8 MG	3	
MEDROL ORAL TABLET 2 MG	2	

Drug Name	Drug Tier	Notes
MEDROL ORAL TABLET THERAPY PACK	3	
METHYLPREDNISOLONE ACETATE INJECTION SUSPENSION 50 MG/ML	3	
methylprednisolone oral	1	
METHYLPREDNISOLONE-BUPIVACAINE	3	
ORAPRED ODT	3	
prednisolone oral solution	1	
prednisolone sodium phosphate oral solution 15 mg/5ml, 25 mg/5ml, 5 mg/5ml	1	
PREDNISOLONE SODIUM PHOSPHATE ORAL TABLET DISPERSIBLE	3	
PREDNISONE INTENSOL	2	
PREDNISONE ORAL SOLUTION	2	
prednisone oral tablet	1	
prednisone oral tablet therapy pack	1	
SOLU-CORTEF	3	
taperdex 6-day	1	
TRIAMCINOLONE DIACETATE INJECTION SUSPENSION 80 MG/ML	3	
TRIAMCINOLONE-BUPIVACAINE	3	
Hormonal Agents - Men's Health		
danazol oral	1	
depo-testosterone	1	PA; QL (0.4 ML per 1 day)
METHITEST	3	PA; QL (20 EA per 1 day)
testosterone cypionate intramuscular	1	PA; QL (0.4 ML per 1 day)
TESTOSTERONE ENANTHATE INTRAMUSCULAR	3	PA; QL (0.2 ML per 1 day)
testosterone gel 12.5 mg/act (1%) transdermal	1	PA; QL (10 GM per 1 day)
testosterone gel 50 mg/5gm (1%) transdermal	1	PA; QL (10 GM per 1 day)
testosterone transdermal gel 1.62 %, 20.25 mg/act (1.62%), 40.5 mg/2.5gm (1.62%)	1	PA; QL (5 GM per 1 day)
testosterone transdermal gel 25 mg/2.5gm (1%)	1	PA; QL (10 GM per 1 day)
testosterone transdermal solution	1	PA; QL (6 ML per 1 day)
Hormonal Agents - Pituitary		
ACTHAR	5	PA; SP
ACTHAR GEL	5	PA; SP
cabergoline	1	
CORTROPHIN	5	PA; SP
CORTROPHIN GEL	5	PA; SP
CRENESSITY ORAL CAPSULE 100 MG	6	PA; SP; QL (4 EA per 1 day)
CRENESSITY ORAL CAPSULE 25 MG, 50 MG	6	PA; SP; QL (3 EA per 1 day)
CRENESSITY ORAL SOLUTION	6	PA; SP; QL (8 ML per 1 day)
desmopressin ace spray refrig	1	
desmopressin acetate oral	1	
DESMOPRESSIN ACETATE SPRAY	3	
EGRIFTA SV	6	PA; SP; QL (1 EA per 1 day)

Drug Name	Drug Tier	Notes
EGRIFTA WR	6	PA; SP; QL (0.04 EA per 1 day)
ELIGARD SUBCUTANEOUS KIT 22.5 MG	6	PA; SP; QL (0.012 EA per 1 day)
ELIGARD SUBCUTANEOUS KIT 30 MG	6	PA; SP; QL (0.009 EA per 1 day)
ELIGARD SUBCUTANEOUS KIT 45 MG	6	PA; SP; QL (0.006 EA per 1 day)
ELIGARD SUBCUTANEOUS KIT 7.5 MG	6	PA; SP; QL (0.04 EA per 1 day)
FIRMAGON	6	PA; SP; QL (0.04 EA per 1 day)
FIRMAGON (240 MG DOSE)	6	PA; SP; QL (2 EA per 365 days)
INCRELEX	5	PA; SP
leuprolide acetate injection	4	PA; SP
LEUPROLIDE ACETATE-BUPIVACAINE	3	
LUPRON DEPOT (1-MONTH) INTRAMUSCULAR KIT 3.75 MG	6	PA; SP
LUPRON DEPOT (1-MONTH) INTRAMUSCULAR KIT 7.5 MG	5	PA; SP
LUPRON DEPOT (3-MONTH) INTRAMUSCULAR KIT 11.25 MG	6	PA; SP
LUPRON DEPOT (3-MONTH) INTRAMUSCULAR KIT 22.5 MG	5	PA; SP
LUPRON DEPOT (4-MONTH) INTRAMUSCULAR KIT 30MG	5	PA; SP
LUPRON DEPOT (6-MONTH) INTRAMUSCULAR KIT 45MG	5	PA; SP
LUPRON DEPOT-PED (1-MONTH)	5	PA; SP; QL (0.04 EA per 1 day)
LUPRON DEPOT-PED (3-MONTH)	5	PA; SP; QL (0.02 EA per 1 day)
LUPRON DEPOT-PED (6-MONTH)	5	PA; SP; QL (0.01 EA per 1 day)
NGENLA	6	PA; SP
NORDITROPIN FLEXPRO	5	PA; SP
NUTROPIN AQ NUSPIN 10	6	PA; SP
octreotide acetate injection	4	PA; SP
OCTREOTIDE ACETATE SUBCUTANEOUS	6	PA; SP
OMNITROPE	5	PA; SP
ORILISSA ORAL TABLET 150 MG	2	PA; QL (1 EA per 1 day)
ORILISSA ORAL TABLET 200 MG	2	PA; QL (2 EA per 1 day)
oxytocin +rfid	1	
oxytocin solution 10 unit/ml injection	1	
OXYTOCIN SOLUTION 10 UNIT/ML INJECTION	3	
OXYTOCIN-LACTATED RINGERS INTRAVENOUS SOLUTION 15 UNIT/250ML	3	

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Drug Name	Drug Tier	Notes
OXYTOCIN-LACTATED RINGERS SOLUTION 20 UNIT/L INTRAVENOUS	3	
OXYTOCIN-LACTATED RINGERS SOLUTION 30 UNIT/500ML INTRAVENOUS	3	
OXYTOCIN-SODIUM CHLORIDE INTRAVENOUS SOLUTION 15-0.9 UT/250ML-%	3	
OXYTOCIN-SODIUM CHLORIDE SOLUTION 30-0.9 UT/500ML-% INTRAVENOUS	3	
PITOCIN	3	
SKYTROFA	6	PA; SP
SOGROYA	6	PA; SP
SOMAVERT	6	PA; SP
SYNAREL	2	
TRELSTAR MIXJECT INTRAMUSCULAR SUSPENSION RECONSTITUTED 11.25 MG	6	PA; SP; QL (0.012 EA per 1 day)
TRELSTAR MIXJECT INTRAMUSCULAR SUSPENSION RECONSTITUTED 22.5 MG	6	PA; SP; QL (0.006 EA per 1 day)
TRELSTAR MIXJECT INTRAMUSCULAR SUSPENSION RECONSTITUTED 3.75 MG	6	PA; SP; QL (0.04 EA per 1 day)
ZOLADEX SUBCUTANEOUS IMPLANT 10.8 MG	6	SP; QL (0.012 EA per 1 day)
ZOLADEX SUBCUTANEOUS IMPLANT 3.6 MG	5	SP; QL (0.036 EA per 1 day)

Drug Name	Drug Tier	Notes
Hormonal Agents - Selective Estrogen Receptor Modifying Agents		
OSPHENA	3	HDHP
raloxifene hcl	1	ACA; HDHP
Hormonal Agents - Sex Hormones and Birth Control		
abigale	1	HDHP
abigale lo	1	HDHP
afirmelle	1	ACA; HDHP
ALORA	3	HDHP
altavera	1	ACA; HDHP
alyacen 1/35	1	ACA; HDHP
alyacen 7/7/7	1	ACA; HDHP
amethyst	1	ACA; HDHP
ANGELIQ	3	HDHP
ANNOVERA	3	ACA; HDHP; QL (1 EA per 350 days)
apri	1	ACA; HDHP
ARANELLE	3	ACA; HDHP
ashlyna	1	ACA; HDHP; QL (1 EA per 1 day)
aubra eq	1	ACA; HDHP
aurovela 1.5/30	1	ACA; HDHP
aurovela 1/20	1	ACA; HDHP
aurovela 24 fe	1	ACA; HDHP
aurovela fe 1.5/30	1	ACA; HDHP
aurovela fe 1/20	1	ACA; HDHP
AVERI	3	ACA; HDHP
aviane	1	ACA; HDHP
ayuna	1	ACA; HDHP
azurette	1	ACA; HDHP
BALCOLTRA	3	ACA; HDHP
balziva	1	ACA; HDHP
BIJUVA	3	HDHP
blisovi 24 fe	1	ACA; HDHP

Drug Name	Drug Tier	Notes
blisovi fe 1.5/30	1	ACA; HDHP
blisovi fe 1/20	1	ACA; HDHP
briellyn	1	ACA; HDHP
camila	1	ACA; HDHP
camrese	1	ACA; HDHP; QL (1 EA per 1 day)
camrese lo	1	ACA; HDHP; QL (1 EA per 1 day)
charlotte 24 fe	1	ACA; HDHP
chateal eq	1	ACA; HDHP
CLIMARA PRO	2	HDHP
COMBIPATCH	3	HDHP
CRINONE	3	QL (0.6 GM per 1 day)
cryselle	1	ACA; HDHP
cyred eq	1	ACA; HDHP
dasetta 1/35 (28)	1	ACA; HDHP
dasetta 7/7/7	1	ACA; HDHP
daysee	1	ACA; HDHP; QL (1 EA per 1 day)
deblitane	1	ACA; HDHP
delyla	1	ACA; HDHP
DEPO-ESTRADIOL	3	HDHP
DEPO-PROVERA	3	ACA; HDHP; QL (0.02 ML per 1 day)
DEPO-SUBQ PROVERA 104	3	ACA; HDHP; QL (0.02 ML per 1 day)
desogestrel-ethinyl estradiol	1	ACA; HDHP
DIVIGEL	3	HDHP
dolishale	1	ACA; HDHP
dotti	1	HDHP
drospiren-eth estrad-levomefol	1	ACA; HDHP
drospirenone-ethinyl estradiol	1	ACA; HDHP
DUAVEE	2	HDHP

Drug Name	Drug Tier	Notes
ELESTRIN	3	HDHP
elinest	1	ACA; HDHP
ELLA	3	ACA; HDHP
eluryng	1	ACA; HDHP
emzahh	1	ACA; HDHP
ENDOMETRIN	2	
enilloring	1	ACA; HDHP
enskyce	1	ACA; HDHP
errin	1	ACA; HDHP
EST ESTROGENS-METHYLTEST HS	3	HDHP
estarylla	1	ACA; HDHP
estradiol oral	1	HDHP
estradiol transdermal	1	HDHP
estradiol vaginal	1	
estradiol valerate intramuscular	1	HDHP
estradiol-norethindrone acet	1	HDHP
ESTRING	3	QL (0.012 EA per 1 day)
estrogens conjugated	1	HDHP
ethynodiol diac-eth estradiol oral tablet 1-35 mg-mcg, 1-50 mg-mcg	1	ACA; HDHP
etonogestrel-ethinyl estradiol	1	ACA; HDHP
EVAMIST	3	HDHP
falmina	1	ACA; HDHP
feirza 1.5/30	1	ACA; HDHP
feirza 1/20	1	ACA; HDHP
FEMLYV	3	ST; ACA; HDHP
FEMRING	3	ST; QL (0.012 EA per 1 day)
finzala	1	ACA; HDHP
fyavolv	1	HDHP
galbriela	1	ACA; HDHP
gallifrey	1	
gemmily	1	ACA; HDHP

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Drug Name	Drug Tier	Notes
hailey 1.5/30	1	ACA; HDHP
hailey 24 fe	1	ACA; HDHP
hailey fe 1.5/30	1	ACA; HDHP
hailey fe 1/20	1	ACA; HDHP
heather	1	ACA; HDHP
iclevia	1	ACA; HDHP; QL (1 EA per 1 day)
IMVEXXY MAINTENANCE PACK	2	
IMVEXXY STARTER PACK	2	
incassia	1	ACA; HDHP
introvale	1	ACA; HDHP; QL (1 EA per 1 day)
isibloom	1	ACA; HDHP
jaimiess	1	ACA; HDHP; QL (1 EA per 1 day)
jasmiel	1	ACA; HDHP
jencycla	1	ACA; HDHP
jinteli	1	HDHP
jolessa	1	ACA; HDHP; QL (1 EA per 1 day)
joyeaux	1	ACA; HDHP
juleber	1	ACA; HDHP
junel 1.5/30	1	ACA; HDHP
junel 1/20	1	ACA; HDHP
junel fe 1.5/30	1	ACA; HDHP
junel fe 1/20	1	ACA; HDHP
junel fe 24	1	ACA; HDHP
kaitlib fe	1	ACA; HDHP
kalliga	1	ACA; HDHP
kariva	1	ACA; HDHP
kelnor 1/35	1	ACA; HDHP
kurvelo	1	ACA; HDHP
larin 1.5/30	1	ACA; HDHP
larin 1/20	1	ACA; HDHP
larin 24 fe	1	ACA; HDHP
larin fe 1.5/30	1	ACA; HDHP
larin fe 1/20	1	ACA; HDHP
lessina	1	ACA; HDHP
levonest	1	ACA; HDHP
levonorgest-eth est & eth est oral tablet 42-21-21-7 days	1	ACA; HDHP; QL (1 EA per 1 day)
levonorgest-eth estrad 91-day oral tablet 0.1-0.02 & 0.01 mg, 0.15-0.03 mg	1	ACA; HDHP; QL (1 EA per 1 day)
levonorgest-eth estradiol-iron	1	ACA; HDHP
levonorgestrel-ethinyl estrad	1	ACA; HDHP
levonorg-eth estrad triphasic	1	ACA; HDHP
loestrin 1.5/30 (21)	1	ACA; HDHP
loestrin 1/20 (21)	1	ACA; HDHP
loestrin fe 1.5/30	1	ACA; HDHP
loestrin fe 1/20	1	ACA; HDHP
lojaimiess	1	ACA; HDHP; QL (1 EA per 1 day)
loryna	1	ACA; HDHP
low-ogestrel	1	ACA; HDHP
lo-zumandimine	1	ACA; HDHP
luizza 1.5/30	1	ACA; HDHP
luizza 1/20	1	ACA; HDHP
lutera oral tablet 0.1-20 mg-mcg	1	ACA; HDHP
lyleq	1	ACA; HDHP
lyllana	1	HDHP
lyza	1	ACA; HDHP
marlissa	1	ACA; HDHP
medroxyprogesterone acetate intramuscular	1	ACA; HDHP; QL (0.02 ML per 1 day)
medroxyprogesterone acetate oral	1	HDHP

Drug Name	Drug Tier	Notes
megestrol acetate oral suspension 40 mg/ml, 400 mg/10ml, 800 mg/20ml	1	
MEGESTROL ACETATE ORAL SUSPENSION 625 MG/5ML	3	
megestrol acetate oral tablet	1	
meleya	1	ACA; HDHP
MENOSTAR	3	ST; HDHP
mibelas 24 fe	1	ACA; HDHP
microgestin 1.5/30	1	ACA; HDHP
microgestin 1/20	1	ACA; HDHP
microgestin fe 1.5/30	1	ACA; HDHP
microgestin fe 1/20	1	ACA; HDHP
mili	1	ACA; HDHP
mimvey	1	HDHP
minzoya	1	ACA; HDHP
mono-linyah	1	ACA; HDHP
MYFEMBREE	2	PA; HDHP; QL (1 EA per 1 day)
NATAZIA	2	ACA; HDHP
necon 0.5/35 (28)	1	ACA; HDHP
nikki	1	ACA; HDHP
nora-be	1	ACA; HDHP
norelgestromin-eth estradiol	1	ACA; HDHP
norethin ace-eth estrad-fe	1	ACA; HDHP
norethin ace-eth estrad-fe oral tablet 1.5-30 mg-mcg	1	ACA; HDHP
norethindrone acetate oral	1	
norethindrone acet-ethinyl est	1	ACA; HDHP
norethindrone oral	1	ACA; HDHP
norethindrone-eth estradiol	1	HDHP
norethin-eth estradiol-fe oral tablet chewable 0.4-35 mg-mcg	1	ACA; HDHP
norgestimate-eth estradiol oral tablet 0.25-35 mg-mcg	1	ACA; HDHP
norgestimate-ethinyl estradiol triphasic	1	ACA; HDHP
norlyroc	1	ACA; HDHP
nortrel 0.5/35 (28)	1	ACA; HDHP
nortrel 1/35 (21)	1	ACA; HDHP
nortrel 1/35 (28)	1	ACA; HDHP
nortrel 7/7/7	1	ACA; HDHP
nylia 1/35	1	ACA; HDHP
nylia 7/7/7	1	ACA; HDHP
ORIAHNN	2	PA; HDHP; QL (2 EA per 1 day)
orquidea	1	ACA; HDHP
philith	1	ACA; HDHP
pimtrea	1	ACA; HDHP
portia-28	1	ACA; HDHP
PREMARIN INJECTION	3	HDHP
PREMARIN VAGINAL	2	
PREMPHASE	2	HDHP
PREMPRO	2	HDHP
progesterone intramuscular	1	
progesterone oral	1	HDHP
progesterone vaginal	1	
PROVERA	3	
reclipsen	1	ACA; HDHP
rivelsa	1	ACA; HDHP; QL (1 EA per 1 day)
rosyrah	1	ACA; HDHP; QL (1 EA per 1 day)
setlakin	1	ACA; HDHP; QL (1 EA per 1 day)

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Drug Name	Drug Tier	Notes
sharobel	1	ACA; HDHP
simliya	1	ACA; HDHP
simpesse	1	ACA; HDHP; QL (1 EA per 1 day)
sprintec 28	1	ACA; HDHP
syeda	1	ACA; HDHP
tarina 24 fe	1	ACA; HDHP
tarina fe 1/20 eq	1	ACA; HDHP
taysofy	1	ACA; HDHP
TAYTULLA	3	ACA; HDHP
tilia fe	1	ACA; HDHP
tri-estarylla	1	ACA; HDHP
tri-legest fe	1	ACA; HDHP
tri-linyah	1	ACA; HDHP
tri-lo-estarylla	1	ACA; HDHP
tri-lo-marzia	1	ACA; HDHP
tri-lo-mili	1	ACA; HDHP
tri-lo-sprintec	1	ACA; HDHP
tri-mili	1	ACA; HDHP
tri-sprintec	1	ACA; HDHP
tri-vylibra	1	ACA; HDHP
tri-vylibra lo	1	ACA; HDHP
turqoz	1	ACA; HDHP
TYBLUME	3	ACA; HDHP
tydemy	1	ACA; HDHP
valtya 1/35	1	ACA; HDHP
valtya 1/50	1	ACA; HDHP
VELIVET	2	ACA; HDHP
vestura	1	ACA; HDHP
vienva	1	ACA; HDHP
viorele	1	ACA; HDHP
volnea	1	ACA; HDHP
vyfemla	1	ACA; HDHP
vylibra	1	ACA; HDHP
wera	1	ACA; HDHP
wymzya fe	1	ACA; HDHP
xarah fe	1	ACA; HDHP
xelria fe	1	ACA; HDHP
xulane	1	ACA; HDHP
yuvafem	1	
zafemy	1	ACA; HDHP
zovia 1/35 (28)	1	ACA; HDHP
zumandimine	1	ACA; HDHP
Hormonal Agents - Thyroid		
levo-t	1	
levothyroxine sodium oral tablet	1	
levoxyl	1	
liomny	1	
liothyronine sodium oral	1	
methimazole oral	1	
propylthiouracil oral	1	
unithroid	1	
Immunological Agents - Drugs for Immune System Stimulation or Suppression		
ACTEMRA ACTPEN	6	PA; SP; QL (0.13 ML per 1 day)
ACTEMRA SUBCUTANEOUS	6	PA; SP; QL (0.13 ML per 1 day)
ACTIMMUNE	5	PA; SP
AMJEVITA SOLUTION AUTO-INJECTOR 40 MG/0.4ML SUBCUTANEOUS	5	PA; SP; QL (0.06 ML per 1 day)
AMJEVITA SOLUTION AUTO-INJECTOR 80 MG/0.8ML SUBCUTANEOUS	5	PA; SP; QL (0.06 ML per 1 day)
AMJEVITA SOLUTION PREFILLED SYRINGE 40 MG/0.4ML SUBCUTANEOUS	5	PA; SP; QL (0.06 ML per 1 day)
AMJEVITA-PED 15KG TO <30KG	5	PA; SP; QL (0.03 ML per 1 day)

Drug Name	Drug Tier	Notes
ANDEMBRY	6	PA; SP; QL (0.05 ML per 1 day)
ARCALYST	6	PA; SP
ASTAGRAF XL	3	HDHP
AURANOFIN	6	SP
AVTOZMA INTRAVENOUS	6	PA; SP
AVTOZMA SUBCUTANEOUS	6	PA; SP; QL (0.13 ML per 1 day)
azasan	1	HDHP
azathioprine oral	1	HDHP
BENLYSTA SUBCUTANEOUS	6	PA; SP
BERINERT	6	PA; SP; QL (0.34 EA per 1 day)
BIMZELX SUBCUTANEOUS SOLUTION AUTO-INJECTOR 160 MG/ML	6	PA; SP; QL (0.04 ML per 1 day)
BIMZELX SUBCUTANEOUS SOLUTION AUTO-INJECTOR 320 MG/2ML	6	PA; SP; QL (0.08 ML per 1 day)
BIMZELX SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 160 MG/ML	6	PA; SP; QL (0.04 ML per 1 day)
BIMZELX SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 320 MG/2ML	6	PA; SP; QL (0.08 ML per 1 day)
CELLCEPT	3	HDHP
CIMZIA	5	PA; SP; QL (0.08 EA per 1 day)
CIMZIA (1 SYRINGE)	5	PA; SP; QL (0.08 EA per 1 day)
CIMZIA (2 SYRINGE)	5	PA; SP; QL (0.08 EA per 1 day)
CIMZIA-STARTER	5	PA; SP; QL (0.08 EA per 1 day)
cyclosporine modified	1	HDHP
cyclosporine oral	1	HDHP
DAWNZERA	6	PA; SP; QL (0.03 ML per 1 day)
ENBREL	5	PA; SP; QL (0.15 ML per 1 day)
ENBREL MINI	5	PA; SP; QL (0.15 ML per 1 day)
ENBREL SURECLICK	5	PA; SP; QL (0.15 ML per 1 day)
ENFLONSIA	2	ACA; QL (0.7 ML per 300 days)
ENSPRYNG	6	PA; SP
ENTYVIO PEN	6	PA; SP; QL (0.05 ML per 1 day)
ENVARSUS XR	3	HDHP
everolimus oral tablet 0.25 mg, 0.5 mg, 0.75 mg, 1 mg	1	HDHP
gengraf	1	HDHP
HAEGARDA SUBCUTANEOUS SOLUTION RECONSTITUTED 2000 UNIT	6	PA; SP; QL (0.9 EA per 1 day)
HAEGARDA SUBCUTANEOUS SOLUTION RECONSTITUTED 3000 UNIT	6	PA; SP; QL (0.6 EA per 1 day)

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Drug Name	Drug Tier	Notes
HIZENTRA SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 1 GM/5ML, 2 GM/10ML, 4 GM/20ML	6	PA; SP
icatibant acetate	4	PA; SP; QL (0.6 ML per 1 day)
ILARIS	5	PA; SP; QL (0.08 ML per 1 day)
IMURAN	3	HDHP
JYLAMVO	3	PA
KALBITOR	6	PA; SP; QL (0.4 ML per 1 day)
KEVZARA	6	PA; SP; QL (0.09 ML per 1 day)
KINERET	6	PA; SP
leflunomide oral	1	
METHOTREXATE SODIUM (PF) INJECTION SOLUTION 1000 MG/40ML	3	
methotrexate sodium (pf) injection solution 250 mg/10ml, 50 mg/2ml	1	
methotrexate sodium (pf) solution 1 gm/40ml injection	1	
METHOTREXATE SODIUM (PF) SOLUTION 1 GM/40ML INJECTION	3	
METHOTREXATE SODIUM INJECTION SOLUTION	3	
methotrexate sodium injection solution reconstituted	1	
methotrexate sodium oral	1	
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Drug Name	Drug Tier	Notes
mycophenolate mofetil oral	1	HDHP
mycophenolate sodium	1	HDHP
mycophenolic acid	1	HDHP
MYFORTIC	3	HDHP
MYHIBBIN	3	HDHP
NEORAL	3	HDHP
OLUMIANT	6	PA; SP; QL (1 EA per 1 day)
OMVOH (300 MG DOSE) SUBCUTANEOUS SOLUTION AUTO-INJECTOR	5	PA; SP; QL (0.11 ML per 1 day)
OMVOH (300 MG DOSE) SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	5	PA; SP; QL (0.18 ML per 1 day)
OMVOH SUBCUTANEOUS	5	PA; SP; QL (0.08 ML per 1 day)
ORENCIA CLICKJECT	6	PA; SP; QL (0.15 ML per 1 day)
ORENCIA SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 125 MG/ML	6	PA; SP; QL (0.15 ML per 1 day)
ORENCIA SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 50 MG/0.4ML	6	PA; SP; QL (0.06 ML per 1 day)
ORENCIA SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 87.5 MG/0.7ML	6	PA; SP; QL (0.1 ML per 1 day)
ORLADEYO	6	PA; SP; QL (1 EA per 1 day)
OTEZLA ORAL TABLET	5	PA; SP; QL (2 EA per 1 day)

Drug Name	Drug Tier	Notes
OTEZLA ORAL TABLET THERAPY PACK	5	PA; SP; QL (55 EA per 365 days)
OTEZLA XR	5	PA; SP; QL (1 EA per 1 day)
OTEZLA/OTEZLA XR INITIATION PK	5	PA; SP; QL (55 EA per 365 days)
PROGRAF ORAL	3	HDHP
RASUVO SUBCUTANEOUS SOLUTION AUTO-INJECTOR 10 MG/0.2ML, 7.5 MG/0.15ML	2	PA; QL (0.84 ML per 28 days)
RASUVO SUBCUTANEOUS SOLUTION AUTO-INJECTOR 12.5 MG/0.25ML	2	PA; QL (1.12 ML per 28 days)
RASUVO SUBCUTANEOUS SOLUTION AUTO-INJECTOR 15 MG/0.3ML, 17.5 MG/0.35ML	2	PA; QL (1.4 ML per 28 days)
RASUVO SUBCUTANEOUS SOLUTION AUTO-INJECTOR 20 MG/0.4ML	2	PA; QL (1.68 ML per 28 days)
RASUVO SUBCUTANEOUS SOLUTION AUTO-INJECTOR 22.5 MG/0.45ML	2	PA; QL (1.96 ML per 28 days)
RASUVO SUBCUTANEOUS SOLUTION AUTO-INJECTOR 25 MG/0.5ML	2	PA; QL (2.24 ML per 28 days)
RASUVO SUBCUTANEOUS SOLUTION AUTO-INJECTOR 30 MG/0.6ML	2	PA; QL (2.52 ML per 28 days)
RHAPSIDO	5	PA; SP; QL (2 EA per 1 day)
RIDAURA	6	SP
RINVOQ	5	PA; SP; QL (1 EA per 1 day)
RINVOQ LQ	5	PA; SP; QL (12 ML per 1 day)
RUCONEST	6	PA; SP; QL (0.27 EA per 1 day)
SANDIMMUNE ORAL	3	HDHP
SILIQ	6	PA; SP; QL (0.11 ML per 1 day)
SIMPONI SUBCUTANEOUS SOLUTION AUTO-INJECTOR 100 MG/ML	5	PA; SP; QL (0.04 ML per 1 day)
SIMPONI SUBCUTANEOUS SOLUTION AUTO-INJECTOR 50 MG/0.5ML	5	PA; SP; QL (0.02 ML per 1 day)
SIMPONI SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 100 MG/ML	5	PA; SP; QL (0.04 ML per 1 day)
SIMPONI SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 50 MG/0.5ML	5	PA; SP; QL (0.02 ML per 1 day)
sirolimus oral	1	HDHP
SKYRIZI PEN	5	PA; SP; QL (0.02 ML per 1 day)
SKYRIZI SUBCUTANEOUS SOLUTION CARTRIDGE 180 MG/1.2ML	5	PA; SP; QL (0.03 ML per 1 day)

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Drug Name	Drug Tier	Notes
SKYRIZI SUBCUTANEOUS SOLUTION CARTRIDGE 360 MG/2.4ML	5	PA; SP; QL (0.05 ML per 1 day)
SKYRIZI SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	5	PA; SP; QL (0.02 ML per 1 day)
SOTYKTU	5	PA; SP; QL (1 EA per 1 day)
SPEVIGO SUBCUTANEOUS	6	PA; SP; QL (0.08 ML per 1 day)
STARJEMZA INTRAVENOUS	5	PA; SP
STARJEMZA SUBCUTANEOUS SOLUTION	5	PA; SP; QL (0.009 ML per 1 day)
STARJEMZA SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 45 MG/0.5ML	5	PA; SP; QL (0.009 ML per 1 day)
STARJEMZA SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 90 MG/ML	5	PA; SP; QL (0.002 ML per 1 day)
tacrolimus oral	1	HDHP
TAKHZYRO SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 150 MG/ML	6	PA; SP; QL (0.08 ML per 1 day)
TAKHZYRO SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 300 MG/2ML	6	PA; SP; QL (0.15 ML per 1 day)
TALTZ SUBCUTANEOUS SOLUTION AUTO-INJECTOR	5	PA; SP; QL (0.04 ML per 1 day)
TALTZ SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 20 MG/0.25ML	5	PA; SP; QL (0.01 ML per 1 day)
TALTZ SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 40 MG/0.5ML	5	PA; SP; QL (0.02 ML per 1 day)
TALTZ SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 80 MG/ML	5	PA; SP; QL (0.04 ML per 1 day)
TREMFYA ONE-PRESS	5	PA; SP; QL (0.02 ML per 1 day)
TREMFYA PEN SUBCUTANEOUS SOLUTION AUTO-INJECTOR 100 MG/ML	5	PA; SP; QL (0.02 ML per 1 day)
TREMFYA PEN SUBCUTANEOUS SOLUTION AUTO-INJECTOR 200 MG/2ML	5	PA; SP; QL (0.08 ML per 1 day)
TREMFYA SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 100 MG/ML	5	PA; SP; QL (0.02 ML per 1 day)
TREMFYA SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 200 MG/2ML	5	PA; SP; QL (0.08 ML per 1 day)
TREMFYA-CD/UC INDUCTION	5	PA; SP; QL (0.08 ML per 1 day)
TREXALL	3	
VELSIPITY	5	PA; SP; QL (1 EA per 1 day)
WEZLANA SOLUTION PREFILLED SYRINGE 45 MG/0.5ML SUBCUTANEOUS	5	PA; SP; QL (0.009 ML per 1 day)

BAZIWEHY

Drug Name	Drug Tier	Notes
WEZLANA SUBCUTANEOUS SOLUTION	5	PA; SP; QL (0.009 ML per 1 day)
WEZLANA SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 90 MG/ML	5	PA; SP; QL (0.02 ML per 1 day)
XATMEP	3	PA
XELJANZ ORAL SOLUTION	5	PA; SP; QL (10 ML per 1 day)
XELJANZ ORAL TABLET	5	PA; SP; QL (2 EA per 1 day)
XELJANZ XR	5	PA; SP; QL (1 EA per 1 day)
YESINTEK SUBCUTANEOUS SOLUTION	5	PA; SP; QL (0.009 ML per 1 day)
YESINTEK SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 45 MG/0.5ML	5	PA; SP; QL (0.009 ML per 1 day)
YESINTEK SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 90 MG/ML	5	PA; SP; QL (0.02 ML per 1 day)
ZORTRESS	3	HDHP
Immunological Agents - Drugs for Vaccination		
ABRYSVO	$0	VAX; QL (1 EA per 999 days)
ACTHIB	$0	VAX
ADACEL	$0	VAX
AFLURIA	$0	VAX
AFLURIA PRESERVATIVE FREE	$0	VAX
AREXVY	$0	VAX; QL (1 EA per 999 days)
BEXSERO	$0	VAX
BOOSTRIX	$0	VAX

Drug Name	Drug Tier	Notes
CAPVAXIVE	$0	VAX
COMIRNATY	$0	VAX
COMIRNATY 5-11 YEARS	$0	VAX
DAPTACEL	$0	VAX
DENGVAXIA	$0	VAX
ENGERIX-B	$0	VAX
FLUAD	$0	VAX
FLUARIX	$0	VAX
FLUBLOK	$0	VAX
FLUCELVAX	$0	VAX
FLULAVAL	$0	VAX
FLUMIST	$0	VAX
FLUZONE HIGH-DOSE	$0	VAX
FLUZONE INTRAMUSCULAR SUSPENSION PREFILLED SYRINGE	$0	VAX
GARDASIL 9	$0	VAX
HAVRIX	$0	VAX
HEPLISAV-B	$0	VAX
HIBERIX	$0	VAX
INFANRIX	$0	VAX
IPOL	$0	VAX
JYNNEOS	$0	VAX
KINRIX	$0	VAX
MENQUADFI	$0	VAX
MENVEO	$0	VAX
M-M-R II	$0	VAX
MNEXSPIKE	$0	VAX
MRESVIA	$0	VAX; QL (0.5 ML per 999 days)
NUVAXOVID COVID-19 VACCINE	$0	VAX
PEDIARIX	$0	VAX
PEDVAX HIB	$0	VAX
PENBRAYA	$0	VAX
PENMENVY	$0	VAX

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Drug Name	Drug Tier	Notes
PENTACEL	$0	VAX
PNEUMOVAX 23	$0	VAX
PREVNAR 20	$0	VAX
PRIORIX	$0	VAX
PROQUAD	$0	VAX
QUADRACEL	$0	VAX
RECOMBIVAX HB	$0	VAX
ROTARIX	$0	VAX
ROTATEQ	$0	VAX
SHINGRIX	$0	VAX
SPIKEVAX	$0	VAX
SPIKEVAX 6M-11Y	$0	VAX
TENIVAC	$0	VAX
TRUMENBA	$0	VAX
TWINRIX	$0	VAX
VAQTA	$0	VAX
VARIVAX	$0	VAX
VAXELIS	$0	VAX
VAXNEUVANCE	$0	VAX
Inflammatory Bowel Disease Agents		
ANALPRAM HC EXTERNAL CREAM 1-1 %	3	
APRISO	2	
AZULFIDINE EN-TABS	3	
balsalazide disodium	1	
budesonide oral	1	
budesonide rectal	1	
CORTENEMA	3	
CORTIFOAM	3	
EOHILIA	3	PA; QL (20 ML per 1 day)
HYDROCORTISONE (PERIANAL) EXTERNAL CREAM 1 %	2	
hydrocortisone (perianal) external cream 2.5 %	1	
HYDROCORTISONE ACE-PRAMOXINE EXTERNAL CREAM 1-1 %	3	
hydrocortisone rectal	1	
mesalamine er oral capsule 0.375 gm	1	
mesalamine oral tablet delayed release 1.2 gm	1	
mesalamine rectal	1	
PROCTOCORT EXTERNAL	2	
PROCTOFOAM HC	2	
procto-med hc	1	
proctosol hc	1	
proctozone-hc	1	
sulfasalazine oral	1	
UCERIS RECTAL	3	
Metabolic Bone Disease Agents		
OSENVELT	5	PA; SP
Metabolic Bone Disease Agents - Drugs for Osteoporosis		
alendronate sodium oral solution	1	HDHP
alendronate sodium oral tablet 10 mg	1	HDHP
alendronate sodium oral tablet 35 mg, 70 mg	1	HDHP; QL (0.15 EA per 1 day)
ATELVIA	3	HDHP; QL (0.15 EA per 1 day)
BONSITY	2	PA; HDHP
calcitonin (salmon) injection	1	HDHP
calcitonin (salmon) nasal	1	HDHP; QL (0.13 ML per 1 day)

Drug Name	Drug Tier	Notes
ibandronate sodium oral	1	HDHP; QL (0.04 EA per 1 day)
MIACALCIN	3	HDHP
risedronate sodium oral tablet 150 mg	1	HDHP; QL (0.04 EA per 1 day)
risedronate sodium oral tablet 30 mg, 5 mg	1	HDHP
risedronate sodium oral tablet 35 mg	1	HDHP; QL (0.15 EA per 1 day)
risedronate sodium oral tablet delayed release	1	HDHP; QL (0.15 EA per 1 day)
STOBOCLO	2	PA; HDHP; QL (2 ML per 250 days)
teriparatide solution pen-injector 560 mcg/2.24ml subcutaneous	1	PA; HDHP
TERIPARATIDE SOLUTION PEN-INJECTOR 560 MCG/2.24ML SUBCUTANEOUS	2	PA; HDHP
TYMLOS	2	PA; HDHP
Metabolic Bone Disease Agents - Other		
calcitriol oral	1	
cinacalcet hcl	1	PA
DOXERCALCIFEROL ORAL	3	
paricalcitol oral	1	
RAYALDEE	3	
ROCALTROL	3	
ZEMPLAR ORAL	3	
Miscellaneous Therapeutic Agents		
AEROCHAMBER HOLDING CHAMBER	2	

Drug Name	Drug Tier	Notes
AEROCHAMBER MINI CHAMBER	2	
AEROCHAMBER MV	2	
AEROCHAMBER PLS FLOVU MTHPIECE	2	
AEROCHAMBER PLUS FLO-VU INTERM	2	
AEROCHAMBER PLUS FLO-VU LARGE DEVICE	2	
AEROCHAMBER PLUS FLO-VU MEDIUM DEVICE	2	
AEROCHAMBER PLUS FLO-VU SMALL DEVICE	2	
AEROCHAMBER PLUS FLOW VU	2	
AEROCHAMBER2GO ANTI-STATIC	2	
ALCOHOL PREP PADS SHEET 70 %	3	
ALPHA-LIPOIC ACID INJECTION	3	
ANTICHOLIUM	3	
AQINJECT PEN NEEDLE	2	HDHP
AQNEURSA	6	PA; SP; QL (4 EA per 1 day)
ASSURE ID DUO PRO PEN NEEDLES	2	HDHP
ASSURE ID PRO PEN NEEDLES	2	HDHP
AUM INSULIN SAFETY PEN NEEDLE 31G X 4 MM	2	HDHP
AUM MINI INSULIN PEN NEEDLE	2	HDHP
AUM PEN NEEDLE 32G X 5 MM , 33G X 4 MM , 33G X 5 MM , 33G X 6 MM	2	HDHP

Drug Name	Drug Tier	Notes
AUM READYGARD DUO PEN NEEDLE	2	HDHP
AUM SAFETY PEN NEEDLE	2	HDHP
BD AUTOSHIELD DUO PEN NEEDLES	2	HDHP
BD PEN NEEDLE MICRO ULTRAFINE	2	HDHP
BD PEN NEEDLE MINI ULTRAFINE	2	HDHP
BD PEN NEEDLE NANO ULTRAFINE	2	HDHP
BD PEN NEEDLE ORIG ULTRAFINE	2	HDHP
BD PEN NEEDLE SHORT ULTRAFINE	2	HDHP
BD ULTRA-FINE PEN NEEDLES	2	HDHP
BREATHE COMFORT CHAMBER/ADULT	2	
BREATHE COMFORT CHAMBER/CHILD	2	
BREATHE EASE LARGE	2	
BREATHE EASE MEDIUM	2	
BREATHE EASE SMALL	2	
BREATHERITE VALVED MDI CHAMBER	2	
BYLVAY	6	PA; SP
BYLVAY (PELLETS)	6	PA; SP
CAYA	3	ACA
CHLORHEXIDINE GLUCONATE SOLUTION 20 %	3	
CLEVER CHOICE HOLDING CHAMBER	2	
COMFORT EZ PRO PEN NEEDLES	2	HDHP
COMPACT SPACE CHAMBER	2	
COMPACT SPACE CHAMBER/LG MASK	2	
COMPACT SPACE CHAMBER/MED MASK	2	
COMPACT SPACE CHAMBER/SM MASK	2	
CYTOTINE ORAL POWDER	3	
DEXMEDETOMIDINE HCL IN NACL INTRAVENOUS SOLUTION PREFILLED SYRINGE	3	
DIASCREEN 10	3	
DIASCREEN 1B	3	
DIASCREEN 1G	3	
DIASCREEN 1K	3	
DIASCREEN 2GK	3	
DIASCREEN 2GP	3	
DIASCREEN 3	3	
DIASCREEN 4NL	3	
DIASCREEN 4OBL	3	
DIASCREEN 4PH	3	
DIASCREEN 5	3	
DIASCREEN 6	3	
DIASCREEN 7	3	
DIASCREEN 8	3	
DIASCREEN 9	3	
DIASCREEN LIQUID URINE CONTROL	3	
DROPLET MICRON	2	HDHP
DROPSAFE AUTOPROTECT DUO	2	HDHP
EASIVENT	2	
EMBECTA AUTOSHIELD DUO	2	HDHP
EMBECTA PEN NEEDLE NANO	2	HDHP
EMBECTA PEN NEEDLE NANO 2 GEN	2	HDHP

Drug Name	Drug Tier	Notes
EMBECTA PEN NEEDLE ULTRAFINE	2	HDHP
EMBRACE PEN NEEDLES 30G X 5 MM , 30G X 8 MM , 31G X 6 MM , 31G X 8 MM , 32G X 4 MM	2	HDHP
ENDARI	3	PA
EUA PATIENT ASSESSMENT	3	
FEMCAP	3	ACA
FLEXICHAMBER	2	
FLEXICHAMBER ADULT MASK/SMALL	2	
FLEXICHAMBER CHILD MASK/LARGE	2	
FLEXICHAMBER CHILD MASK/SMALL	2	
FORMALDEHYDE	3	
GLUTARALDEHYDE EXTERNAL	3	
GRASTEK	3	PA; QL (1 EA per 1 day)
INCONTROL ULTICARE PEN NEEDLES	2	HDHP
INSPIREASE RESERVOIR BAGS	2	
INSULIN PEN NEEDLES 29G X 10MM , 29G X 12.7MM , 29G X 12MM , 29G X 4MM , 29G X 5MM , 29G X 8MM , 30G X 5 MM , 30G X 6 MM , 30G X 8 MM , 31G X 4 MM , 31G X 5 MM , 31G X 6 MM , 31G X 8 MM , 32G X 4 MM , 32G X 5 MM , 32G X 6 MM , 32G X 8 MM , 33G X 4 MM , 33G X 5 MM , 33G X 6 MM	2	HDHP
INSUPEN32G EXTR3ME	2	HDHP

Drug Name	Drug Tier	Notes
IWILFIN	6	PA; SP
KERENDIA	3	PA; QL (1 EA per 1 day)
l-glutamine oral packet	1	PA
LYNKUET	3	PA; QL (2 EA per 1 day)
methergine	1	QL (28 EA per 1 fill)
methylergonovine maleate oral	1	QL (28 EA per 1 fill)
MICROCHAMBER DEVICE	2	
MIPLYFFA	6	PA; SP; QL (3 EA per 1 day)
NEOKE RA LIPOIC	3	
NOVOFINE PEN NEEDLE	2	HDHP
NOVOFINE PLUS PEN NEEDLE	2	HDHP
ODACTRA	3	PA; QL (1 EA per 1 day)
OPTICHAMBER DIAMOND	2	
OPTICHAMBER DIAMOND-LG MASK	2	
OPTICHAMBER DIAMOND-MD MASK	2	
OPTICHAMBER DIAMOND-SM MASK	2	
ORALAIR	3	PA; QL (1 EA per 1 day)
ORALAIR ADULT STARTER PACK	3	PA; QL (1 EA per 1 day)
ORALAIR CHILDRENS STARTER PACK	3	PA; QL (6 EA per 365 days)
PANDA MASK LARGE	2	
PANDA MASK MEDIUM	2	
PANDA MASK SMALL	2	
PARI VORTEX ADULT MASK	2	
PARI VORTEX PEDIATRIC MASK	2	

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Drug Name	Drug Tier	Notes
PEDIATRIC PANDA MASK	2	
PEN NEEDLE/5-BEVEL TIP	2	HDHP
PENTETATE CALCIUM TRISODIUM	3	
PENTETATE ZINC TRISODIUM	3	
PENTIPS GENERIC PEN NEEDLES 32G X 6 MM	2	HDHP
PIP PEN NEEDLES 32G X 4MM	2	HDHP
POCKET SPACER	2	
PRO COMFORT SPACER ADULT	2	
PRO COMFORT SPACER CHILD	2	
PRO COMFORT SPACER INFANT	2	
PROCARE SPACER/ADULT MASK	2	
PROCARE SPACER/CHILD MASK	2	
PURE COMFORT SAFETY PEN NEEDLE	2	HDHP
PURE COMFORT SPACER CHAMBER	2	
PYRIDOSTIGMINE BROMIDE ER ORAL TABLET EXTENDED RELEASE 24 HOUR	3	
QUICK TOUCH INSULIN PEN NEEDLE	2	HDHP
RADIOGARDASE	3	
RAGWITEK	3	PA; QL (1 EA per 1 day)
RAYA SURE PEN NEEDLE	2	HDHP
SAFETY PEN NEEDLES	2	HDHP
SODIUM SACCHARIN POWDER	3	
SOHONOS ORAL CAPSULE 1 MG	6	PA; SP; QL (20 EA per 1 day)
SOHONOS ORAL CAPSULE 1.5 MG	6	PA; SP; QL (13 EA per 1 day)
SOHONOS ORAL CAPSULE 10 MG	6	PA; SP; QL (2 EA per 1 day)
SOHONOS ORAL CAPSULE 2.5 MG	6	PA; SP; QL (8 EA per 1 day)
SOHONOS ORAL CAPSULE 5 MG	6	PA; SP; QL (4 EA per 1 day)
SORBITOL IRRIGATION	3	
TECHLITE PLUS PEN NEEDLES	2	HDHP
TRUE COMFORT SAFETY PEN NEEDLE	2	HDHP
UDSX MEDICATED SYSTEM	3	
UDSXMP MEDICATED SYSTEM	3	
UNIFINE OTC PEN NEEDLES	2	HDHP
UNIFINE PROTECT PEN NEEDLE	2	HDHP
VEOZAH	3	PA; QL (1 EA per 1 day)
VERIFINE INSULIN PEN NEEDLE	2	HDHP
VERIFINE PLUS PEN NEEDLE	2	HDHP
VISTOGARD	3	
VORTEX VALVE CHAMBER-PEDI MASK	2	
VORTEX VALVED HOLDING CHAMBER	2	
VYKAT XR ORAL TABLET EXTENDED RELEASE 24 HOUR 150 MG	6	PA; SP; QL (3 EA per 1 day)
VYKAT XR ORAL TABLET EXTENDED RELEASE 24 HOUR 25 MG	6	PA; SP; QL (4 EA per 1 day)

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Drug Name	Drug Tier	Notes
VYKAT XR ORAL TABLET EXTENDED RELEASE 24 HOUR 75 MG	6	PA; SP; QL (7 EA per 1 day)
WIDE-SEAL DIAPHRAGM 60	3	ACA
WIDE-SEAL DIAPHRAGM 65	3	ACA
WIDE-SEAL DIAPHRAGM 70	3	ACA
WIDE-SEAL DIAPHRAGM 75	3	ACA
WIDE-SEAL DIAPHRAGM 80	3	ACA
WIDE-SEAL DIAPHRAGM 85	3	ACA
WIDE-SEAL DIAPHRAGM 90	3	ACA
WIDE-SEAL DIAPHRAGM 95	3	ACA
YORVIPATH SUBCUTANEOUS SOLUTION PEN-INJECTOR 168 MCG/0.56ML	6	PA; SP; QL (0.04 ML per 1 day)
YORVIPATH SUBCUTANEOUS SOLUTION PEN-INJECTOR 294 MCG/0.98ML	6	PA; SP; QL (0.07 ML per 1 day)
YORVIPATH SUBCUTANEOUS SOLUTION PEN-INJECTOR 420 MCG/1.4ML	6	PA; SP; QL (0.1 ML per 1 day)
ZILBRYSQ	6	PA; SP
ZOKINVY	6	PA; SP; QL (4 EA per 1 day)
Ophthalmic Agents - Drugs for Eye Allergy, Infection and Inflammation		
ACULAR LS	3	
AZASITE	3	
BESIVANCE	3	

Drug Name	Drug Tier	Notes
BETADINE OPHTHALMIC PREP	3	
bromfenac sodium (once-daily)	1	QL (6.8 ML per 365 days)
bromfenac sodium ophthalmic solution 0.07 %	1	ST; QL (12 ML per 365 days)
ciprofloxacin hcl ophthalmic	1	
CROMOLYN SODIUM OPHTHALMIC	2	
DEXAMETHASONE SODIUM PHOSPHATE OPHTHALMIC	2	
diclofenac sodium ophthalmic	1	
difluprednate	1	
epinastine hcl	1	
ERYTHROMYCIN OINTMENT 5 MG/GM OPHTHALMIC	2	
erythromycin ointment 5 mg/gm ophthalmic	1	
EYSUVIS	3	PA; QL (0.3 ML per 1 day)
FLAREX	3	
fluorometholone	1	
FLURBIPROFEN SODIUM	2	
FML FORTE	3	
FML LIQUIFILM	3	
gatifloxacin ophthalmic	1	
gentamicin sulfate ophthalmic	1	
INVELTYS	3	
ketorolac tromethamine ophthalmic	1	
LEVOFLOXACIN OPHTHALMIC	3	
LOTEMAX SM	3	
loteprednol etabonate ophthalmic gel	1	QL (20 GM per 365 days)
MAXIDEX	3	

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Drug Name	Drug Tier	Notes
MAXITROL OPHTHALMIC OINTMENT	3	
MITOSOL	3	
MOXIFLOXACIN HCL (2X DAY)	2	
moxifloxacin hcl ophthalmic	1	
NATACYN	2	
neomycin-polymyxin-dexameth	1	
NEOMYCIN-POLYMYXIN-HC OPHTHALMIC	3	
ofloxacin ophthalmic	1	
POVIDONE-IODINE OPHTHALMIC	3	
PRED MILD	3	
prednisolone acetate ophthalmic	1	
PREDNISOLONE SODIUM PHOSPHATE OPHTHALMIC	2	
SULFACETAMIDE SODIUM OPHTHALMIC	2	
TOBRADEX	3	
TOBRADEX ST	3	
tobramycin ophthalmic	1	
tobramycin-dexamethasone	1	
TOBREX	3	
TRIFLURIDINE	2	
UPNEEQ	3	PA
ZIRGAN	3	
Ophthalmic Agents - Drugs for Glaucoma		
acetazolamide er	1	
acetazolamide oral	1	
APRACLONIDINE HCL	3	
BETAXOLOL HCL OPHTHALMIC	2	
BETIMOL	3	
bimatoprost ophthalmic	1	QL (0.1 ML per 1 day)
brimonidine tartrate ophthalmic	1	
brimonidine tartrate-timolol	1	
brinzolamide	1	
CARTEOLOL HCL	2	
dichlorphenamide	4	PA; SP; QL (4 EA per 1 day)
dorzolamide hcl ophthalmic	1	
dorzolamide hcl-timolol mal	1	
dorzolamide hcl-timolol mal pf	1	
IOPIDINE	3	
KEVEYIS	6	PA; SP; QL (4 EA per 1 day)
latanoprost ophthalmic	1	
LEVOBUNOLOL HCL	2	
LUMIGAN	2	QL (0.1 ML per 1 day)
methazolamide oral	1	
ormalvi	4	PA; SP; QL (4 EA per 1 day)
pilocarpine hcl ophthalmic solution 1 %, 2 %, 4 %	1	
RHOPRESSA	3	QL (0.1 ML per 1 day)
ROCKLATAN	3	QL (0.1 ML per 1 day)
SIMBRINZA	2	
tafluprost (pf)	1	QL (1 EA per 1 day)
timolol hemihydrate	1	
timolol maleate (once-daily)	1	
timolol maleate ophthalmic solution	1	

Drug Name	Drug Tier	Notes
travoprost (bak free)	1	QL (0.12 ML per 1 day)
XELPROS	3	ST; QL (0.1 ML per 1 day)
Ophthalmic Agents - Drugs for Miscellaneous Eye Conditions		
AKTEN	3	
ALCAINE	3	
ALTACAINE	3	
ALTAFRIN OPHTHALMIC SOLUTION 10 %, 2.5 %	2	
ATROPINE SULFATE OPHTHALMIC SOLUTION 0.025 %, 0.05 %	3	
atropine sulfate solution 1 % ophthalmic	1	
ATROPINE SULFATE SOLUTION 1 % OPHTHALMIC	3	
BACITRACIN-POLYMYXIN B	3	
BACITRA-NEOMYCIN-POLYMYXIN-HC	3	
CEQUA	3	PA; QL (2 EA per 1 day)
CYCLOGYL	3	
CYCLOMYDRIL	3	
cyclopentolate hcl ophthalmic	1	
cyclosporine (pf)	1	PA; QL (2 EA per 1 day)
CYSTADROPS	6	SP; QL (0.72 ML per 1 day)
CYSTARAN	6	SP; QL (2.15 ML per 1 day)
HOMATROPAIRE	3	
loteprednol-tobramycin	1	
MIEBO	2	PA; QL (0.1 ML per 1 day)
NEOMYCIN-BACITRACIN ZN-POLYMYX	3	
NEOMYCIN-POLYMYXIN-GRAMICIDIN	2	
OXERVATE	6	PA; SP; QL (2 ML per 1 day)
phenylephrine hcl ophthalmic solution 10 %	1	
phenylephrine hcl solution 2.5 % ophthalmic	1	
PHENYLEPHRINE HCL SOLUTION 2.5 % OPHTHALMIC	3	
polymyxin b-trimethoprim	1	
proparacaine hcl ophthalmic	1	
RESTASIS	2	PA; QL (2 EA per 1 day)
RESTASIS MULTIDOSE	2	PA; QL (2 ML per 1 day)
SULFACETAMIDE-PREDNISOLONE	2	
tetracaine hcl solution 0.5 % ophthalmic	1	
TETRACAINE HCL SOLUTION 0.5 % OPHTHALMIC	3	
TRYPTYR	2	PA; QL (2 EA per 1 day)
TYRVAYA	3	PA; QL (0.3 ML per 1 day)
XIIDRA	2	PA; QL (2 EA per 1 day)
ZYLET	3	
Otic Agents - Drugs for Ear Conditions		
acetic acid otic	1	
CETRAXAL	3	ST
ciprofloxacin hcl otic	1	

Drug Name	Drug Tier	Notes
ciprofloxacin-dexamethasone	1	
CORTISPORIN-TC	3	
DERMOTIC	3	
fluocinolone acetonide otic	1	
hydrocortisone-acetic acid	1	
neomycin-polymyxin-hc otic	1	
ofloxacin otic	1	
PRAMOTIC	3	
Respiratory Tract / Pulmonary Agents - Drugs for Allergies, Cough, Cold		
azelastine hcl nasal	1	QL (2 ML per 1 day)
azelastine-fluticasone	1	QL (0.77 GM per 1 day)
benzonatate	1	
CARBINOXAMINE MALEATE ORAL SOLUTION	2	
carbinoxamine maleate oral tablet 4 mg	1	
CARBZAH	2	
CLEMASTINE FUMARATE ORAL SYRUP	2	
CLEMASTINE FUMARATE ORAL TABLET	3	
cyproheptadine hcl oral	1	
diphenhydramine hcl injection	1	
DIPHENHYDRAMINE HCL ORAL ELIXIR	3	
HYCODAN ORAL SOLUTION 5-1.5 MG/5ML	3	PA; QL (240 ML per 1 fill)
HYCODAN ORAL TABLET 5-1.5 MG	3	PA; QL (6 EA per 1 day)
hydrocodone bit-homatrop mbr oral solution	1	PA; QL (240 ML per 1 fill)
hydrocodone bit-homatrop mbr oral tablet	1	PA; QL (6 EA per 1 day)
hydromet oral solution 5-1.5 mg/5ml	1	PA; QL (240 ML per 1 fill)
HYPERSAL	3	
ipratropium bromide nasal	1	
NEBUSAL INHALATION NEBULIZATION SOLUTION 6 %	3	
promethazine-codeine	1	PA; QL (240 ML per 1 fill)
promethazine-dm	1	
pseudoephedrine-bromphen-dm	1	
PULMOSAL	3	
RYALTRIS	3	QL (1.1 GM per 1 day)
RYCLORA	3	
SODIUM CHLORIDE INHALATION NEBULIZATION SOLUTION 0.9 %	2	
SODIUM CHLORIDE INHALATION NEBULIZATION SOLUTION 10 %, 3 %, 7 %	3	
Respiratory Tract / Pulmonary Agents - Drugs for Asthma and Other Lung Conditions		
acetylcysteine inhalation	1	
ADVAIR HFA	1	HDHP; QL (0.4 GM per 1 day)
AIRSUPRA	2	HDHP; QL (1.1 GM per 1 day)

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Drug Name	Drug Tier	Notes
albuterol sulfate hfa	1	HDHP; QL (1.2 GM per 1 day)
albuterol sulfate inhalation nebulization solution (2.5 mg/3ml) 0.083%	1	HDHP; QL (18 ML per 1 day)
albuterol sulfate inhalation nebulization solution 0.63 mg/3ml, 1.25 mg/3ml	1	HDHP; QL (12.5 ML per 1 day)
albuterol sulfate inhalation nebulization solution 2.5 mg/0.5ml	1	HDHP; QL (5 EA per 1 day)
albuterol sulfate nebulization solution (5 mg/ml) 0.5% inhalation	1	HDHP; QL (5 EA per 1 day)
albuterol sulfate oral	1	HDHP
ANORO ELLIPTA	2	HDHP; QL (2 EA per 1 day)
arformoterol tartrate	1	HDHP; QL (4 ML per 1 day)
ARNUITY ELLIPTA	2	HDHP; QL (1 EA per 1 day)
ATROVENT HFA	3	HDHP; QL (0.86 GM per 1 day)
AUVI-Q	3	
BREO ELLIPTA	1	HDHP; QL (2 EA per 1 day)
breyna	1	HDHP; QL (0.35 GM per 1 day)
BREZTRI AEROSPHERE	2	HDHP; QL (0.36 GM per 1 day)
budesonide inhalation	1	HDHP; QL (4 ML per 1 day)
budesonide-formoterol fumarate	1	HDHP; QL (0.35 GM per 1 day)
COMBIVENT RESPIMAT	2	HDHP; QL (0.27 GM per 1 day)
cromolyn sodium inhalation	1	HDHP
elixophyllin	1	HDHP
epinephrine injection solution auto-injector 0.15 mg/0.3ml	1	
EPINEPHRINE SOLUTION AUTO-INJECTOR 0.15 MG/0.15ML INJECTION	1	
EPINEPHRINE SOLUTION AUTO-INJECTOR 0.15 MG/0.15ML INJECTION	3	
EPINEPHRINE SOLUTION AUTO-INJECTOR 0.3 MG/0.3ML INJECTION	1	
epinephrine solution auto-injector 0.3 mg/0.3ml injection	1	
EPINEPHRINE SOLUTION AUTO-INJECTOR 0.3 MG/0.3ML INJECTION	3	
EPIPEN 2-PAK	3	ST
EXDENSUR	6	PA; SP; QL (0.006 ML per 1 day)
FASENRA PEN	5	PA; SP; QL (0.02 ML per 1 day)
FASENRA SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 10 MG/0.5ML	5	PA; SP; QL (0.01 ML per 1 day)
FASENRA SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 30 MG/ML	5	PA; SP; QL (0.02 ML per 1 day)
fluticasone propionate hfa aerosol 44 mcg/act inhalation	1	HDHP; QL (0.71 GM per 1 day)

BAZIWEHY

Drug Name	Drug Tier	Notes
fluticasone-salmeterol inhalation aerosol powder breath activated 100-50 mcg/act, 250-50 mcg/act, 500-50 mcg/act	1	HDHP; QL (2 EA per 1 day)
formoterol fumarate inhalation	1	HDHP; QL (4 ML per 1 day)
GLASSIA INTRAVENOUS SOLUTION 4 GM/200ML, 5 GM/250ML	6	PA; SP
ipratropium bromide hfa	1	HDHP; QL (0.86 GM per 1 day)
ipratropium bromide inhalation	1	HDHP; QL (10.42 ML per 1 day)
ipratropium-albuterol	1	HDHP; QL (18 ML per 1 day)
levalbuterol hcl inhalation nebulization solution 0.31 mg/3ml, 0.63 mg/3ml	1	HDHP; QL (18 ML per 1 day)
levalbuterol hcl inhalation nebulization solution 1.25 mg/0.5ml	1	HDHP; QL (3 EA per 1 day)
levalbuterol hcl inhalation nebulization solution 1.25 mg/3ml	1	HDHP; QL (9 ML per 1 day)
montelukast sodium oral	1	HDHP
NEFFY	3	
nintedanib esylate	4	PA; SP; QL (2 EA per 1 day)
NUCALA SUBCUTANEOUS SOLUTION AUTO-INJECTOR	5	PA; SP; QL (0.11 ML per 1 day)
NUCALA SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 100 MG/ML	5	PA; SP; QL (0.11 ML per 1 day)
NUCALA SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 40 MG/0.4ML	5	PA; SP; QL (0.02 ML per 1 day)
NUCALA SUBCUTANEOUS SOLUTION RECONSTITUTED	5	PA; SP; QL (0.11 EA per 1 day)
OFEV	6	PA; SP; QL (2 EA per 1 day)
PERFOROMIST	3	HDHP; QL (4 ML per 1 day)
pirfenidone oral capsule	4	PA; SP; QL (9 EA per 1 day)
pirfenidone oral tablet 267 mg	4	PA; SP; QL (9 EA per 1 day)
pirfenidone oral tablet 801 mg	4	PA; SP; QL (3 EA per 1 day)
QVAR REDIHALER	2	HDHP; QL (0.71 GM per 1 day)
roflumilast	1	PA; HDHP
SEREVENT DISKUS	2	HDHP; QL (2 EA per 1 day)
SPIRIVA RESPIMAT	2	HDHP; QL (0.14 GM per 1 day)
STIOLTO RESPIMAT	2	HDHP; QL (0.14 GM per 1 day)
STRIVERDI RESPIMAT	2	HDHP; QL (4.2 GM per 30 days)
SYMBICORT	3	ST; HDHP; QL (0.35 GM per 1 day)
terbutaline sulfate injection	1	HDHP
terbutaline sulfate oral	1	HDHP
TEZSPIRE	5	PA; SP; QL (0.07 ML per 1 day)
THEO-24	3	HDHP

BAZIWEHY

Drug Name	Drug Tier	Notes
THEOPHYLLINE ER ORAL TABLET EXTENDED RELEASE 12 HOUR 100 MG, 200 MG	2	HDHP
theophylline er oral tablet extended release 12 hour 300 mg, 450 mg	1	HDHP
theophylline er oral tablet extended release 24 hour	1	HDHP
theophylline oral	1	HDHP
tiotropium bromide	1	HDHP; QL (1 EA per 1 day)
TRELEGY ELLIPTA	2	HDHP; QL (2 EA per 1 day)
wixela inhub	1	HDHP; QL (2 EA per 1 day)
XOLAIR SUBCUTANEOUS SOLUTION AUTO-INJECTOR 150 MG/ML	5	PA; SP; QL (0.08 ML per 1 day)
XOLAIR SUBCUTANEOUS SOLUTION AUTO-INJECTOR 300 MG/2ML	5	PA; SP; QL (0.3 ML per 1 day)
XOLAIR SUBCUTANEOUS SOLUTION AUTO-INJECTOR 75 MG/0.5ML	5	PA; SP; QL (0.04 ML per 1 day)
XOLAIR SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 150 MG/ML	5	PA; SP; QL (0.08 ML per 1 day)
XOLAIR SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 300 MG/2ML	5	PA; SP; QL (0.3 ML per 1 day)
XOLAIR SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 75 MG/0.5ML	5	PA; SP; QL (0.04 ML per 1 day)
XOLAIR SUBCUTANEOUS SOLUTION RECONSTITUTED	5	PA; SP
YUPELRI	3	HDHP; QL (3 ML per 1 day)
zafirlukast	1	HDHP
Respiratory Tract / Pulmonary Agents - Drugs for Cystic Fibrosis		
ALYFTREK ORAL TABLET 10-50-125 MG	6	PA; SP; QL (2 EA per 1 day)
ALYFTREK ORAL TABLET 4-20-50 MG	6	PA; SP; QL (3 EA per 1 day)
KALYDECO ORAL PACKET	6	PA; SP; QL (2 EA per 1 day)
KALYDECO ORAL TABLET	6	PA; SP
ORKAMBI ORAL PACKET 100-125 MG, 150-188 MG	6	PA; SP; QL (2 EA per 1 day)
ORKAMBI ORAL PACKET 75-94 MG	6	SP
ORKAMBI ORAL TABLET	6	PA; SP; QL (4 EA per 1 day)
PULMOZYME	5	PA; SP
SYMDEKO	6	PA; SP; QL (2 EA per 1 day)
TOBI PODHALER	6	SP; QL (224 EA per 40 days)
tobramycin inhalation nebulization solution 300 mg/4ml	4	SP; QL (8 ML per 1 day)
tobramycin nebulization solution 300 mg/5ml inhalation	4	SP; QL (10 ML per 1 day)

Drug Name	Drug Tier	Notes
TRIKAFTA ORAL TABLET THERAPY PACK	6	PA; SP; QL (3 EA per 1 day)
Respiratory Tract / Pulmonary Agents - Drugs for Pulmonary Hypertension		
ADEMPAS	5	PA; SP; QL (90 EA per 30 days)
alyq	4	PA; SP; QL (2 EA per 1 day)
ambrisentan	4	PA; SP; QL (1 EA per 1 day)
bosentan oral tablet	4	PA; SP; QL (2 EA per 1 day)
bosentan oral tablet soluble	4	PA; SP; QL (4 EA per 1 day)
OPSUMIT	5	PA; SP; QL (1 EA per 1 day)
ORENITRAM	6	PA; SP
ORENITRAM MONTH 1	6	PA; SP; QL (336 EA per 365 days)
ORENITRAM MONTH 2	6	PA; SP; QL (672 EA per 365 days)
ORENITRAM MONTH 3	6	PA; SP; QL (504 EA per 365 days)
sildenafil citrate oral suspension reconstituted	4	PA; SP; QL (7.5 ML per 1 day)
sildenafil citrate oral tablet 20 mg	4	PA; SP; QL (3 EA per 1 day)
tadalafil (pah)	4	PA; SP; QL (2 EA per 1 day)
TYVASO	6	PA; SP; QL (2.9 ML per 1 day)
TYVASO DPI INSTITUTIONAL KIT	6	PA; SP; QL (4 EA per 1 day)
TYVASO DPI MAINTENANCE KIT INHALATION POWDER 112 X 32MCG & 112 X64MCG, 112 X 48MCG & 112 X64MCG	6	PA; SP; QL (8 EA per 1 day)
TYVASO DPI MAINTENANCE KIT INHALATION POWDER 16 MCG, 32 MCG, 48 MCG, 64 MCG, 80 MCG	6	PA; SP; QL (4 EA per 1 day)
TYVASO DPI TITRATION KIT	6	PA; SP; QL (2 EA per 365 days)
TYVASO REFILL KIT	6	PA; SP; QL (2.9 ML per 1 day)
TYVASO STARTER KIT	6	PA; SP; QL (2.9 ML per 1 day)
UPTRAVI ORAL	6	PA; SP; QL (2 EA per 1 day)
UPTRAVI TITRATION	6	PA; SP; QL (400 EA per 365 days)
WINREVAIR	6	PA; SP; QL (0.05 EA per 1 day)
YUTREPIA INHALATION CAPSULE 106 MCG	6	PA; SP; QL (8 EA per 1 day)
YUTREPIA INHALATION CAPSULE 26.5 MCG, 53 MCG	6	PA; SP; QL (5 EA per 1 day)
YUTREPIA INHALATION CAPSULE 79.5 MCG	6	PA; SP; QL (10 EA per 1 day)
Skeletal Muscle Relaxants - Drugs for Muscle Pain and Spasm		
baclofen oral tablet	1	

Drug Name	Drug Tier	Notes
carisoprodol oral	1	
chlorzoxazone oral tablet 500 mg	1	
cyclobenzaprine hcl oral tablet 10 mg, 5 mg	1	
dantrolene sodium oral	1	
methocarbamol oral tablet 500 mg, 750 mg	1	
orphenadrine citrate er	1	QL (2 EA per 1 day)
tizanidine hcl oral capsule 6 mg	1	
tizanidine hcl oral tablet	1	
Sleep Disorder Agents		
armodafinil oral tablet 150 mg, 200 mg, 250 mg	1	PA; QL (1 EA per 1 day)
armodafinil oral tablet 50 mg	1	PA; QL (2 EA per 1 day)
BELSOMRA	3	QL (1 EA per 1 day)
doxepin hcl oral tablet	1	QL (1 EA per 1 day)
eszopiclone	1	QL (1 EA per 1 day)
FLURAZEPAM HCL	2	PA; QL (1 EA per 1 day)
modafinil oral	1	PA; QL (1 EA per 1 day)
ramelteon	1	QL (1 EA per 1 day)
sodium oxybate	4	PA; SP; QL (18 ML per 1 day)
SUNOSI	2	PA; QL (1 EA per 1 day)
tasimelteon	4	PA; SP; QL (1 EA per 1 day)
temazepam	1	QL (1 EA per 1 day)
WAKIX	6	PA; SP; QL (2 EA per 1 day)

Drug Name	Drug Tier	Notes
XYWAV	6	PA; SP; QL (18 ML per 1 day)
zaleplon oral capsule 10 mg	1	QL (2 EA per 1 day)
zaleplon oral capsule 5 mg	1	QL (1 EA per 1 day)
zolpidem tartrate er	1	QL (1 EA per 1 day)
zolpidem tartrate oral tablet	1	QL (1 EA per 1 day)
ZOLPIDEM TARTRATE SUBLINGUAL	3	QL (1 EA per 1 day)

BAZIWEHY

Index of Drugs

abacavir sulfate 27
abacavir sulfate-lamivudine 27
abigale 55
abigale lo 55
ABILIFY ASIMTUFII 25
ABILIFY MAINTENA 25
abiraterone acetate 20
abirtega 20
ABRYSVO 64
ABSORICA LD 40
acamprosate calcium 10
acarbose 43
accutane 40
acebutolol hcl 31
ACETAMINOPHEN-CODEINE ... 6
acetaminophen-codeine 6
acetazolamide 71
acetazolamide er 71
acetic acid 72
acetylcysteine 73
acitretin 40
ACTEMRA 59
ACTEMRA ACTPEN 59
ACTHAR 53
ACTHAR GEL 53
ACTHIB 64
ACTIMMUNE 59
ACULAR LS 70
acyclovir 27
ADACEL 64
adapalene-benzoyl peroxide 40
ADBRY 40
adefovir dipivoxil 27
ADEMPAS 77
ADMELOG 46
ADMELOG SOLOSTAR 46
ADVAIR HFA 73
ADVANTAGE SAFETY LANCETS 28G 44
ADVOCATE SAFETY LANCETS 21G 44
ADVOCATE SAFETY LANCETS 23G 44
ADVOCATE SAFETY LANCETS 28G 44
AEROCHAMBER HOLDING CHAMBER 66
AEROCHAMBER MINI CHAMBER 66
AEROCHAMBER MV 66
AEROCHAMBER PLS FLOVU MTHPIECE 66
AEROCHAMBER PLUS FLO-VU INTERM 66
AEROCHAMBER PLUS FLO-VU LARGE 66
AEROCHAMBER PLUS FLO-VU MEDIUM 66
AEROCHAMBER PLUS FLO-VU SMALL 66
AEROCHAMBER PLUS FLOW VU 66
AEROCHAMBER2GO ANTI-STATIC 66
afirmelle 55
AFLURIA 64
AFLURIA PRESERVATIVE FREE 64
AFREZZA 46
AGAMREE 52
AIMOVIG 19
AIRSUPRA 73
AKLIEF 40
AKTEN 72
AKYNZEO 17
ala-cort 40
albendazole 24
albuterol sulfate 74
albuterol sulfate hfa 74
ALCAINE 72
alclometasone dipropionate 40
ALCLOMETASONE DIPROPIONATE 40
ALCOHOL PREP PADS 66
ALECENSA 20
alendronate sodium 65
alfuzosin hcl er 52
ALHEMO 30
aliskiren fumarate 31
allopurinol 19
ALORA 55
alosetron hcl 49
ALPHA-LIPOIC ACID 66
alprazolam 29
alprazolam er 29
ALPRAZOLAM INTENSOL 29
alprazolam xr 29
ALTACAINE 72
ALTAFRIN 72
altavera 55
ALUNBRIG 20
ALVAIZ 30
alyacen 1/35 55
alyacen 7/7/7 55
ALYFTREK 76
alyq 77
amantadine hcl 24
ambrisentan 77
AMCINONIDE 40
amethyst 55
amiloride hcl 31
AMILORIDE-HYDROCHLOROTHIAZIDE 31
AMINO ACID 47
AMINO ACID-CALCIUM-HEP IN D10W 47
aminocaproic acid 30
AMINOPROTECT 47
amiodarone hcl 31
amitriptyline hcl 16
AMJEVITA 59
AMJEVITA-PED 15KG TO <30KG 59
amlodipine besylate 31
amlodipine besylate-benazepril hcl 31
amlodipine besylate-valsartan 31
amlodipine-atorvastatin 31
amlodipine-olmesartan 31
amlodipine-valsartan-hctz 31
ammonium lactate 40
amnesteem 40
amoxapine 16
amoxicillin 10
AMOXICILLIN 10
amoxicillin-potassium clavulanate 10
amoxicillin-potassium clavulanate er 11
amphetamine er 36
amphetamine sulfate 36
amphetamine-dextroamphetamine 36
amphetamine-dextroamphetamine er 36
amphet-dextroamphet 3-bead er 36
ampicillin 11
AMZEEQ 40
anagrelide hcl 30
ANALPRAM HC 65
anastrozole 20
ANCOBON 18
ANDEMBRY 60
ANGELIQ 55
ANNOVERA 55
ANORO ELLIPTA 74
ANTICHOLIUM 66

ANZEMET 17
ANZUPGO 40
APAP-CAFF-DIHYDROCODEINE 6
APIDRA SOLOSTAR 46
APIDRA VIAL 46
apomorphine hcl 24
APRACLONIDINE HCL 71
aprepitant 17
apri 55
APRISO 65
APTENSIO XR 36
APTIVUS 27
AQ INSULIN SYRINGE 46
AQINJECT PEN NEEDLE 66
AQNEURSA 66
AQUACEL AG BURN 40
AQUORAL 39
AQVESME 30
ARAKODA 24
ARANELLE 55
ARBLI 31
ARCALYST 60
AREXVY 64
arformoterol tartrate 74
ARGININE HCL 47
ARGYLE STERILE SALINE 47
ARIKAYCE 11
aripiprazole 25
ARISTADA 25
ARISTADA INITIO 25
ARIXTRA 13
armodafinil 78
ARNUITY ELLIPTA 74
ascomp-codeine 6
asenapine maleate 25
ashlyna 55
aspirin-dipyridamole er 25
ASSURE ID DUO PRO PEN NEEDLES 66
ASSURE ID PRO PEN NEEDLES 66
ASTAGRAF XL 60
atazanavir sulfate 27
ATELVIA 65
atenolol 31
atenolol-chlorthalidone 31
ATIVAN 29
atomoxetine hcl 36
atorvastatin calcium 31
atovaquone 24
atovaquone-proguanil hcl 24
ATRAPRO DERMAL SPRAY ... 40
ATROPINE SULFATE 49, 72
atropine sulfate 72
ATROVENT HFA 74
aubra eq 55
AUGMENTIN 11
AUGMENTIN ES-600 11
AUGTYRO 20
AUM INSULIN SAFETY PEN NEEDLE 66
AUM MINI INSULIN PEN NEEDLE 66
AUM PEN NEEDLE 66
AUM READYGARD DUO PEN NEEDLE 67
AUM SAFETY PEN NEEDLE ... 67
AURANOFIN 60
aurovela 1.5/30 55
aurovela 1/20 55
aurovela 24 fe 55
aurovela fe 1.5/30 55
aurovela fe 1/20 55
AUSTEDO 38
AUSTEDO XR 38
AUSTEDO XR PATIENT TITRATION 38
AUVI-Q 74
AVERI 55
aviane 55
avidoxy 11
AVONEX PEN 37
AVONEX PREFILLED 37
AVTOZMA 60
ayuna 55
AYVAKIT 20
azasan 60
AZASITE 70
azathioprine 60
azelaic acid 40
azelastine hcl 73
azelastine-fluticasone 73
azithromycin 11
AZSTARYS 36
AZULFIDINE EN-TABS 65
azurette 55
bac (butalbital-acetamin-caff) 6
BACITRACIN-POLYMYXIN B ... 72
BACITRA-NEOMYCIN-POLYMYXIN-HC 72
baclofen 77
BACTRIM 11
BACTRIM DS 11
BAFIERTAM 37
BALCOLTRA 55
balsalazide disodium 65
BALVERSA 20
balziva 55
BAQSIMI ONE PACK 45
BAQSIMI TWO PACK 45
BARACLUDE 27
BASAGLAR KWIKPEN 46
BD AUTOSHIELD DUO PEN NEEDLES 67
BD PEN NEEDLE MICRO ULTRAFINE 67
BD PEN NEEDLE MINI ULTRAFINE 67
BD PEN NEEDLE NANO ULTRAFINE 67
BD PEN NEEDLE ORIG ULTRAFINE 67
BD PEN NEEDLE SHORT ULTRAFINE 67
BD ULTRA-FINE INSULIN SYRINGES 46
BD ULTRA-FINE PEN NEEDLES 67
BD VEO INSULIN SYR ULTRAFINE 46
BELBUCA 6
BELSOMRA 78
benazepril hcl 31
benazepril-hydrochlorothiazide . 31
BENLYSTA 60
BENZALKONIUM CHLORIDE .. 11
BENZNIDAZOLE 24
benzonatate 73
benzoyl peroxide-erythromycin . 40
benztropine mesylate 24
BERINERT 60
BESIVANCE 70
BESREMI 20
BETADINE OPHTHALMIC PREP 70
betaine 51
betamethasone dipropionate 40
betamethasone dipropionate aug 40
BETAMETHASONE DIPROPIONATE AUG 40
betamethasone sod phos & acet 52
BETAMETHASONE SODIUM PHOSPHATE 52
betamethasone valerate 40
BETAMETHASONE VALERATE 40

BETASERON 37
betaxolol hcl 31
BETAXOLOL HCL 71
bethanechol chloride 51
BETIMOL 71
bexarotene 20
BEXSERO 64
bicalutamide 20
BIDIL 31
BIJUVA 55
BIKTARVY 27
BILTRICIDE 24
bimatoprost 71
BIMZELX 60
bis subcit-metronid-tetracyc 49
bismuth/metronidaz/tetracyclin . 49
bisoprolol fumarate 31
BISOPROLOL FUMARATE 31
bisoprolol-hydrochlorothiazide .. 31
blisovi 24 fe 55
blisovi fe 1.5/30 56
blisovi fe 1/20 56
BLT-25 52
BLUJEPA 11
BONJESTA 17
BONSITY 65
BOOSTRIX 64
bosentan 77
BOSULIF 20
BRAFTOVI 20
BREATHE COMFORT CHAMBER/ADULT 67
BREATHE COMFORT CHAMBER/CHILD 67
BREATHE EASE LARGE 67
BREATHE EASE MEDIUM 67
BREATHE EASE SMALL 67
BREATHERITE VALVED MDI CHAMBER 67
BREO ELLIPTA 74
breyna 74
BREZTRI AEROSPHERE 74
briellyn 56
brimonidine tartrate 40, 71
brimonidine tartrate-timolol 71
brinzolamide 71
brivaracetam 14
BRIVIACT 14
bromfenac sodium 70
bromfenac sodium (once-daily) . 70
bromocriptine mesylate 24
BRUKINSA 20
budesonide 65, 74
budesonide-formoterol fumarate 74
bumetanide 31
BUMEX 31
buprenorphine 6
buprenorphine hcl 10
buprenorphine hcl-naloxone hcl 10
bupropion hcl 16
bupropion hcl er (smoking det) . 10
bupropion hcl er (sr) 16
bupropion hcl er (xl) 16
buspirone hcl 29
butalbital-acetaminophen 6
butalbital-apap-caff-cod 6
butalbital-apap-caffeine 6
butalbital-asa-caff-codeine 6
butalbital-aspirin-caffeine 6
butorphanol tartrate 6
BYLVAY 67
BYLVAY (PELLETS) 67
cabergoline 53
CABLIVI 25
CABOMETYX 20
CAFERGOT 19
caffeine citrate 38
calcipotriene 40
CALCIPOTRIENE 40
calcipotriene-betameth diprop ... 40
calcitonin (salmon) 65
calcitrene 40
calcitriol 66
calcium acetate 51
calcium acetate (phos binder) ... 51
CALCIUM GLUCONATE-NACL 47
CALQUENCE 20
camila 56
camrese 56
camrese lo 56
capecitabine 20
CAPLYTA 25
CAPRELSA 20
captopril 31
CAPTOPRIL-HYDROCHLOROTHIAZIDE 31
CAPVAXIVE 64
carbamazepine 14
CARBAMAZEPINE 14
carbamazepine er 14
carbidopa 24
carbidopa-levodopa 24
carbidopa-levodopa er 25
carbidopa-levodopa-entacapone 25
CARBINOXAMINE MALEATE .. 73
carbinoxamine maleate 73
CARBZAH 73
CARDAMYST 31
CARESENS LANCETS 30G 44
carglumic acid 47
carisoprodol 78
CARTEOLOL HCL 71
cartia xt 31
carvedilol 31
CASODEX 20
CAYA 67
CEFACLOR 11
CEFACLOR ER 11
cefadroxil 11
CEFADROXIL 11
CEFAZOLIN IN SODIUM CHLORIDE 11
CEFAZOLIN SODIUM 11
cefdinir 11
cefixime 11
CEFIXIME 11
CEFPODOXIME PROXETIL 11
cefpodoxime proxetil 11
cefprozil 11
cefuroxime axetil 11
celecoxib 9
CELESTONE SOLUSPAN 52
CELLCEPT 60
cephalexin 11
CEQUA 72
CERDELGA 51
CETRAXAL 72
cevimeline hcl 39
charlotte 24 fe 56
chateal eq 56
CHEMET 47
CHEMSTRIP K 44
CHEMSTRIP UGK 44
chlordiazepoxide hcl 29
CHLORDIAZEPOXIDE-AMITRIPTYLINE 16
chlorhexidine gluconate 39
CHLORHEXIDINE GLUCONATE 67
chloroprocaine hcl (pf) 9
CHLOROQUINE PHOSPHATE 24
chloroquine phosphate 24
chlorpromazine hcl 25
chlorthalidone 31

chlorzoxazone 78
CHOLBAM 51
cholestyramine 31
cholestyramine light 31
CHOSEN LANCETS 30G 44
CHOSEN SAFETY LANCETS 28G 44
CIBINQO 40
ciclodan 18
ciclopirox 18
ciclopirox olamine 18
cilostazol 25
CIMDUO 27
CIMZIA 60
CIMZIA (1 SYRINGE) 60
CIMZIA (2 SYRINGE) 60
CIMZIA-STARTER 60
cinacalcet hcl 66
CIPRO 11
ciprofloxacin hcl 11, 70, 72
ciprofloxacin-dexamethasone ... 73
citalopram hydrobromide 16
cladribine (10 tabs) 37
cladribine (4 tabs) 37
cladribine (5 tabs) 37
cladribine (6 tabs) 37
cladribine (7 tabs) 37
cladribine (8 tabs) 38
cladribine (9 tabs) 38
claravis 40
CLARITHROMYCIN 11
clarithromycin 11
clarithromycin er 11
CLEMASTINE FUMARATE 73
CLENPIQ 49
CLEOCIN 11
CLEOCIN-T 40
CLEVER CHOICE COMFORT EZ 44
CLEVER CHOICE HOLDING CHAMBER 67
CLIMARA PRO 56
clindacin etz 40
clindacin-p 40
clindamycin hcl 11
clindamycin palmitate hcl 11
clindamycin phos (twice-daily) .. 40
clindamycin phosphate . 12, 40, 41
clindamycin phosphate-benzoyl peroxide 40
CLINDESSE 12
clobazam 14
clobetasol prop emollient base . 41
clobetasol propionate 41
clobetasol propionate e 41
clodan 41
clomipramine hcl 16
clonazepam 29
CLONIDINE HCL 31
clonidine hcl 31
clonidine hcl er 36
clopidogrel bisulfate 25
clorazepate dipotassium 29, 30
clotrimazole 18
clotrimazole-betamethasone 18
CLOTRIMAZOLE-BETAMETHASONE 18
clozapine 25
COAL TAR 41
COARTEM 24
COBENFY 25
COBENFY STARTER PACK 25
CODEINE SULFATE 6
codeine sulfate 6
colchicine 19
colchicine-probenecid 19
colesevelam hcl 31
colestipol hcl 31
COMBIPATCH 56
COMBIVENT RESPIMAT 74
COMETRIQ 20
COMFORT EZ PRO PEN NEEDLES 67
COMFORT TOUCH TWIST LANCET 30G 44
COMIRNATY 64
COMIRNATY 5-11 YEARS 64
COMPACT SPACE CHAMBER 67
COMPACT SPACE CHAMBER/LG MASK 67
COMPACT SPACE CHAMBER/MED MASK 67
COMPACT SPACE CHAMBER/SM MASK 67
compro 17
CONDYLOX 41
constulose 49
CONTOUR CONTROL SOLUTION 44
CONTOUR NEXT CONTROL SOLUTION 44
CONTOUR NEXT GEN TEST STRIPS 44
CONTOUR PLUS CONTROL SOLUTION 45
CONTOUR PLUS TEST STRIP 45
CONTOUR TEST STRIPS 45
COPIKTRA 20
CORLANOR 31
CORTENEMA 65
CORTIFOAM 65
CORTISPORIN-TC 73
CORTROPHIN 53
CORTROPHIN GEL 53
COTELLIC 20
CRENESSITY 53
CREON 51
CRESEMBA 18
CREXONT 25
CRINONE 56
cromolyn sodium 49, 74
CROMOLYN SODIUM 70
cryselle 56
CTEXLI 49
CURITY STERILE SALINE 47
cyanocobalamin 47
cyclobenzaprine hcl 78
CYCLOGYL 72
CYCLOMYDRIL 72
cyclopentolate hcl 72
cyclophosphamide 21
CYCLOPHOSPHAMIDE 21
CYCLOSERINE 20
CYCLOSET 43
cyclosporine 60
cyclosporine (pf) 72
cyclosporine modified 60
cyproheptadine hcl 73
cyred eq 56
CYSTADANE 51
CYSTADROPS 72
CYSTAGON 51
CYSTARAN 72
CYTOTEC 49
CYTOTINE 67
dabigatran etexilate mesylate ... 13
dalfampridine er 38
danazol 53
dantrolene sodium 78
DANZITEN 21
dapaglifloz base-metformin er ... 43
dapagliflozin 43
dapsone 20
DAPTACEL 64
darifenacin hydrobromide er 51
darunavir 27
dasatinib 21

dasetta 1/35 (28) 56
dasetta 7/7/7 56
DAURISMO 21
DAWNZERA 60
daysee 56
deblitane 56
deferasirox 47
deferasirox granules 47
DELSTRIGO 27
delyla 56
demeclocycline hcl 12
DENGVAXIA 64
DEPEN TITRATABS 51
DEPO-ESTRADIOL 56
DEPO-PROVERA 56
DEPO-SUBQ PROVERA 104 ... 56
depo-testosterone 53
DERMA-SMOOTHE/FS BODY . 41
DERMA-SMOOTHE/FS SCALP 41
DERMOTIC 73
DESCOVY 27
desipramine hcl 16
desmopressin ace spray refrig .. 53
desmopressin acetate 53
DESMOPRESSIN ACETATE SPRAY 53
desogestrel-ethinyl estradiol 56
desonide 41
desoximetasone 41
DESOXIMETASONE 41
DESVENLAFAXINE ER 16
desvenlafaxine succinate er 16
dexamethasone 52
DEXAMETHASONE 52
DEXAMETHASONE (LA) 52
DEXAMETHASONE INTENSOL 52
dexamethasone sodium phosphate 52
DEXAMETHASONE SODIUM PHOSPHATE 70
DEXCOM G6 RECEIVER 45
DEXCOM G6 SENSOR 45
DEXCOM G6 TRANSMITTER .. 45
DEXCOM G7 15 DAY SENSOR 45
DEXCOM G7 RECEIVER 45
DEXCOM G7 SENSOR 45
DEXMEDETOMIDINE HCL IN NACL 67
dexmethylphenidate hcl 36
dexmethylphenidate hcl er 36
DEXPANTHENOL 47
dextroamphetamine sulfate 36
dextroamphetamine sulfate er .. 36
DIACOMIT 14
DIASCREEN 10 67
DIASCREEN 1B 67
DIASCREEN 1G 67
DIASCREEN 1K 67
DIASCREEN 2GK 67
DIASCREEN 2GP 67
DIASCREEN 3 67
DIASCREEN 4NL 67
DIASCREEN 4OBL 67
DIASCREEN 4PH 67
DIASCREEN 5 67
DIASCREEN 6 67
DIASCREEN 7 67
DIASCREEN 8 67
DIASCREEN 9 67
DIASCREEN LIQUID URINE CONTROL 67
DIASTIX REAGENT 45
diazepam 14, 30
diazepam intensol 30
diazoxide 45
dichlorphenamide 71
DICLEGIS 17
diclofenac potassium 9
diclofenac sodium 9, 41, 70
diclofenac sodium er 9
dicloxacillin sodium 12
dicyclomine hcl 49
DICYCLOMINE HCL 49
DIFICID 12
DIFLUCAN 18
diflunisal 9
difluprednate 70
digoxin 31, 32
DIGOXIN 32
dihydroergotamine mesylate 19
DILANTIN 14
diltiazem hcl 32
diltiazem hcl er 32
diltiazem hcl er beads 32
diltiazem hcl er coated beads ... 32
DILTIAZEM HCL-DEXTROSE .. 32
dilt-xr 32
dimethyl fumarate 38
dimethyl fumarate starter pack .. 38
diphenhydramine hcl 73
DIPHENHYDRAMINE HCL 73
DIPHENOXYLATE-ATROPINE 50
diphenoxylate-atropine 50
DIPROLENE 41
dipyridamole 25
disopyramide phosphate 32
disulfiram 10
divalproex sodium 14
divalproex sodium er 14
DIVIGEL 56
dofetilide 32
dolishale 56
donepezil hcl 15
DOPTELET 30
DOPTELET SPRINKLE 30
dorzolamide hcl 71
dorzolamide hcl-timolol mal 71
dorzolamide hcl-timolol mal pf .. 71
dotti 56
DOVATO 27
doxazosin mesylate 32
doxepin hcl 16, 78
DOXEPIN HCL 16
DOXERCALCIFEROL 66
doxycycline hyclate 12
doxycycline monohydrate 12
doxylamine-pyridoxine 17
DRISDOL 47
dronabinol 17
DROPLET MICRON 67
DROPSAFE ACTI-LANCE 23G 45
DROPSAFE AUTOPROTECT DUO 67
DROPSAFE MEDLANCE LANCET 30G 45
DROPSAFE SAFETY SYRINGE/NEEDLE 46
drospiren-eth estrad-levomefol . 56
drospirenone-ethinyl estradiol ... 56
DROXIA 21
DRYSOL 41
DUAVEE 56
DUETACT 43
duloxetine hcl 16
DUOPA 25
DUPIXENT 41
dutasteride 52
dutasteride-tamsulosin hcl 52
E.E.S. 400 12
E.E.S. GRANULES 12
EASIVENT 67
EBGLYSS 41
econazole nitrate 18
EDARBI 32
EDARBYCLOR 32

EDETATE DISODIUM 47
EDURANT 27
EDURANT PED 27
efavirenz 27
efavirenz-emtricitab-tenofo df ... 27
EFAVIRENZ-LAMIVUDINE-TENOFOVIR 27
efavirenz-lamivudine-tenofovir .. 27
EFFER-K 48
EGATEN 24
EGRIFTA SV 53
EGRIFTA WR 54
ELESTRIN 56
eletriptan hydrobromide 19
ELIGARD 54
elinest 56
ELIQUIS 13
ELIQUIS (1.5 MG PACK) 13
ELIQUIS (2 MG PACK) 13
ELIQUIS DVT/PE STARTER PACK 13
elixophyllin 74
ELLA 56
eltrombopag olamine 30
eluryng 56
EMBECTA AUTOSHIELD DUO 67
EMBECTA INS SYR U/F 1/2 UNIT 46
EMBECTA INSULIN SYR ULTRAFINE 46
EMBECTA INSULIN SYRINGE 46
EMBECTA INSULIN SYRINGE U-100 46
EMBECTA INSULIN SYRINGE U-500 46
EMBECTA PEN NEEDLE NANO 67
EMBECTA PEN NEEDLE NANO 2 GEN 67
EMBECTA PEN NEEDLE ULTRAFINE 68
EMBLAVEO 12
EMBRACE PEN NEEDLES 68
EMEND 17
EMGALITY 19
EMPAVELI 30
EMRELIS 21
EMSAM 16
emtricitabine 27
emtricitabine-tenofovir df 27
emtricitab-rilpivir-tenofov df 27
EMTRIVA 27
EMVERM 24
emzahh 56
enalapril maleate 32
enalapril-hydrochlorothiazide 32
ENBREL 60
ENBREL MINI 60
ENBREL SURECLICK 60
ENDARI 68
endocet 6
ENDOMETRIN 56
ENFLONSIA 60
ENGERIX-B 64
enilloring 56
enoxaparin sodium 13
ENSACOVE 21
enskyce 56
ENSPRYNG 60
ENSTILAR 41
entacapone 25
entecavir 27
ENTRESTO 32
ENTYVIO PEN 60
enulose 50
ENVARSUS XR 60
EOHILIA 65
EPCLUSA 27
EPHEDRINE SULFATE-NACL . 32
EPIDIOLEX 14
EPIDUO FORTE 41
EPIFOAM 41
epinastine hcl 70
EPINEPHRINE 32, 74
epinephrine 74
EPINEPHRINE HCL-DEXTROSE 32
EPINEPHRINE HCL-NACL 32
epinephrine pf 32
EPINEPHRINE PF 32
EPINEPHRINE-DEXTROSE 32
EPINEPHRINE-NACL 32
EPIPEN 2-PAK 74
EPIVIR 27
eplerenone 32
EQUETRO 30
ergocalciferol 48
ERGOMAR 19
ERGOTAMINE-CAFFEINE 19
ERIVEDGE 21
ERLEADA 21
erlotinib hcl 21
errin 56
ERY PAD 2% 41
ERYPED 400 12
erythromycin 12, 41, 70
ERYTHROMYCIN 41, 70
ERYTHROMYCIN BASE 12
erythromycin base 12
erythromycin ethylsuccinate 12
ERZOFRI 25
escitalopram oxalate 16
eslicarbazepine acetate 14
esomeprazole magnesium 49
EST ESTROGENS-METHYLTEST HS 56
estarylla 56
estazolam 30
estradiol 56
estradiol valerate 56
estradiol-norethindrone acet 56
ESTRING 56
estrogens conjugated 56
eszopiclone 78
ethacrynic acid 32
ethambutol hcl 20
ethosuximide 14
ETHYL CHLORIDE 9
ethynodiol diac-eth estradiol 56
etodolac 9
etodolac er 9
etonogestrel-ethinyl estradiol 56
ETOPOSIDE 21
etravirine 27
EUA PATIENT ASSESSMENT . 68
EUCRISA 41
EULEXIN 21
EVAMIST 56
everolimus 21, 60
EVOTAZ 27
EVRYSDI 51
EXDENSUR 74
exemestane 21
EXODERM 18
EYSUVIS 70
ezetimibe 32
ezetimibe-simvastatin 32
FABHALTA 30
falmina 56
famciclovir 27
famotidine 49
FANAPT 26
FANAPT TITRATION PACK A .. 26
FANAPT TITRATION PACK B .. 26
FANAPT TITRATION PACK C . 26
FARXIGA 43
FASENRA 74
FASENRA PEN 74

febuxostat 19
feirza 1.5/30 56
feirza 1/20 56
felbamate 14
felodipine er 32
FEMCAP 68
FEMLYV 56
FEMRING 56
fenofibrate 32
fenofibrate micronized 32
fenofibric acid 32
fentanyl 6
FENTANYL CITRATE-NACL 6
FERRIPROX 48
FETZIMA 16
FETZIMA TITRATION 16
FIASP 46
FIASP FLEXTOUCH 46
FIASP PENFILL 46
FIASP PUMPCART 46
FIBRYGA 30
fidaxomicin 12
FILSPARI 51
FILSUVEZ 41
FINACEA 41
finasteride 52
fingolimod hcl 38
FINTEPLA 14
finzala 56
FIRMAGON 54
FIRMAGON (240 MG DOSE) ... 54
FIRVANQ 12
FLAREX 70
flavoxate hcl 51
flecainide acetate 32
FLEXICHAMBER 68
FLEXICHAMBER ADULT MASK/SMALL 68
FLEXICHAMBER CHILD MASK/LARGE 68
FLEXICHAMBER CHILD MASK/SMALL 68
FLUAD 64
FLUARIX 64
FLUBLOK 64
FLUCELVAX 64
fluconazole 18
flucytosine 18
fludrocortisone acetate 52
FLULAVAL 64
FLUMIST 64
fluocinolone acetonide 42, 73
fluocinolone acetonide body 42
fluocinolone acetonide scalp 42
fluocinonide 42
fluocinonide emulsified base 42
fluorometholone 70
fluorouracil 42
FLUOROURACIL 42
fluoxetine hcl 16
FLUOXETINE HCL 16
FLUOXETINE HCL (PMDD) 16
fluphenazine decanoate 26
FLUPHENAZINE HCL 26
fluphenazine hcl 26
FLURANDRENOLIDE 42
FLURAZEPAM HCL 78
FLURBIPROFEN 9
FLURBIPROFEN SODIUM 70
fluticasone propionate 42
FLUTICASONE PROPIONATE 42
fluticasone propionate hfa 74
fluticasone-salmeterol 75
fluvoxamine maleate 16
fluvoxamine maleate er 16
FLUZONE 64
FLUZONE HIGH-DOSE 64
FML FORTE 70
FML LIQUIFILM 70
folic acid 48
fondaparinux sodium 13
FONDCIRCLE SINGLE USE LANCETS 45
FORMALDEHYDE 68
formoterol fumarate 75
FORZINITY 51
fosamprenavir calcium 27
fosfomycin tromethamine 12
fosinopril sodium 32
fosinopril sodium-hctz 32
FOSRENOL 51
FRAGMIN 13
FRUZAQLA 21
ft naloxone hcl 10
fulvestrant 21
FUROSEMIDE 33
furosemide 33
FUROSEMIDE IN SODIUM CHLORIDE 32
fyavolv 56
FYCOMPA 14
gabapentin 14
gabapentin (once-daily) 38
GALAFOLD 51
GALANTAMINE HYDROBROMIDE 16
galantamine hydrobromide 16
galantamine hydrobromide er ... 15
galbriela 56
gallifrey 56
GALZIN 48
GARDASIL 9 64
gatifloxacin 70
GATTEX 50
GAVILYTE-C 50
gavilyte-g 50
gavilyte-n with flavor pack 50
GAVRETO 21
gefitinib 21
gemfibrozil 33
gemmily 56
generlac 50
gengraf 60
gentamicin sulfate 12, 70
GENVOYA 27
GEODON 26
GILENYA 38
GILOTRIF 21
GLASSIA 75
glatiramer acetate 38
glatopa 38
GLEOSTINE 21
glimepiride 43
GLIMEPIRIDE 44
glipizide er 44
glipizide ir 44
GLIPIZIDE IR 44
glipizide-metformin hcl 44
glucagon emergency kit 45
GLUCAGON EMERGENCY KIT 45
GLUCOTROL XL 44
GLUTARALDEHYDE 68
GLUTATHIONE 48
glyburide 44
glyburide-metformin 44
GLYCINE 48
glycine 51
glycine urologic 51
glycopyrrolate 50
GLYCOPYRROLATE 50
glydo 9
GLYXAMBI 44
GOMEKLI 21
GORDOFILM 42
GRALISE 38, 39
granisetron hcl 17
GRASTEK 68
griseofulvin microsize 18

griseofulvin ultramicrosize.....18
guanfacine hcl.....33
guanfacine hcl er.....36
GUARDIAN REAL-TIME CHARGER.....45
GUARDIAN REAL-TIME TEST PLUG.....45
GVOKE HYPOPEN 1-PACK.....45
GVOKE HYPOPEN 2-PACK.....45
GVOKE PFS.....45
GYNAZOLE-1.....18
HAEGARDA.....60
hailey 1.5/30.....57
hailey 24 fe.....57
hailey fe 1.5/30.....57
hailey fe 1/20.....57
HALCION.....30
halobetasol propionate.....42
haloperidol.....26
haloperidol lactate.....26
HARVONI.....27, 28
HAVRIX.....64
heather.....57
HEMANGEOL.....33
HEMATINIC/FOLIC ACID.....48
HEMLIBRA.....30
HEPARIN (PORCINE) IN NACL.....13
heparin sodium (porcine).....13
HEPARIN SODIUM (PORCINE).....13
heparin sodium (porcine) +rfid.....13
heparin sodium (porcine) pf.....13
HEPARIN SODIUM (PORCINE) PF.....14
HEPLISAV-B.....64
HERNEXEOS.....21
HIBERIX.....64
hidex 6-day.....52
HIPREX.....12
HIZENTRA.....61
HOMATROPAIRE.....72
HORIZANT.....39
HUMALOG.....46
HUMALOG KWIKPEN.....46
HUMALOG MIX 50/50 KWIKPEN.....46
HUMALOG MIX 75/25 KWIKPEN.....46
HUMALOG MIX 75/25 VIAL.....46
HUMALOG U-100 JUNIOR KWIKPEN.....46
HUMATIN.....12
HUMULIN 70/30 KWIKPEN.....46
HUMULIN 70/30 VIAL.....46
HUMULIN N KWIKPEN.....46
HUMULIN N VIAL.....46
HUMULIN R U-500 KWIKPEN.....46
HUMULIN R VIAL.....46
HYCAMTIN.....21
HYCODAN.....73
hydralazine hcl.....33
hydrochlorothiazide.....33
hydrocodone bitartrate er.....6
HYDROCODONE BITARTRATE ER.....6
hydrocodone bit-homatrop mbr.....73
HYDROCODONE-ACETAMINOPHEN.....7
hydrocodone-acetaminophen.....7
HYDROCODONE-IBUPROFEN.....7
hydrocodone-ibuprofen.....7
hydrocortisone.....42, 52, 65
HYDROCORTISONE (PERIANAL).....65
hydrocortisone (perianal).....65
HYDROCORTISONE ACE-PRAMOXINE.....65
HYDROCORTISONE BUTYRATE.....42
hydrocortisone sod suc (pf).....52
hydrocortisone valerate.....42
hydrocortisone-acetic acid.....73
HYDROGEN PEROXIDE.....12
hydromet.....73
hydromorphone hcl.....7
hydromorphone hcl er.....7
HYDROMORPHONE HCL-NACL.....7
hydroxychloroquine sulfate.....24
hydroxyurea.....21
hydroxyzine hcl.....30
HYDROXYZINE PAMOATE.....30
hydroxyzine pamoate.....30
HYMPAVZI.....30
HYOSCYAMINE SULFATE.....50
HYOSCYAMINE SULFATE ER.....50
HYOSCYAMINE SULFATE SL.....50
HYPERSAL.....73
HYPOCYN ANTIPRURITIC.....42
HYRNUO.....21
HYSINGLA ER.....7
ibandronate sodium.....66
IBRANCE.....21
ibuprofen.....9
IBUPROFEN.....9
icatibant acetate.....61
iclevia.....57
ICLUSIG.....21
icosapent ethyl.....33
IDHIFA.....21
ILARIS.....61
imatinib mesylate.....21
IMBRUVICA.....21
imipramine hcl.....16
imipramine pamoate.....16
imiquimod.....42
imiquimod pump.....42
IMKELDI.....21
IMPAVIDO.....24
IMURAN.....61
IMVEXXY MAINTENANCE PACK.....57
IMVEXXY STARTER PACK.....57
INBRIJA.....25
incassia.....57
INCONTROL ULTICARE PEN NEEDLES.....68
INCRELEX.....54
indapamide.....33
indomethacin.....9
indomethacin er.....9
INFANRIX.....64
INFED.....48
INGREZZA.....39
INJECTAFER.....48
INLURIYO.....21
INLYTA.....21
INREBIC.....21
INSPIREASE RESERVOIR BAGS.....68
INSULIN GLARGINE-YFGN.....46
INSULIN LISPRO.....46
INSULIN LISPRO (1 UNIT DIAL).....46
INSULIN LISPRO JUNIOR KWIKPEN.....46
INSULIN LISPRO PROT & LISPRO.....46
INSULIN PEN NEEDLES.....68
INSULIN SYRINGES.....47
INSUPEN32G EXTR3ME.....68
INTELENCE.....28
INTRAROSA.....51
introvale.....57
INVEGA HAFYERA.....26
INVEGA SUSTENNA.....26
INVEGA TRINZA.....26

INVELTYS 70
IODINE STRONG 48
IOPIDINE 71
IPOL 64
ipratropium bromide 73, 75
ipratropium bromide hfa 75
ipratropium-albuterol 75
IQIRVO 50
irbesartan 33
irbesartan-hydrochlorothiazide 33
ISENTRESS 28
ISENTRESS HD 28
isibloom 57
isoniazid 20
isosorb dinitrate-hydralazine 33
isosorbide dinitrate 33
isosorbide mononitrate 33
isosorbide mononitrate er 33
isotretinoin 42
isradipine 33
ITOVEBI 21
itraconazole 18
ivabradine hcl 33
ivermectin 24, 42
IVERMECTIN 24
IWILFIN 68
jaimiess 57
JAKAFI 21
jantoven 14
JANUMET 44
JANUMET XR 44
JANUVIA 44
JARDIANCE 44
jasmiel 57
JAVADIN 33
javygtor 51
JAYPIRCA 21
jencycla 57
JENTADUETO 44
JENTADUETO XR 44
jinteli 57
jolessa 57
JORNAY PM 36
JOURNAVX 7
joyeaux 57
juleber 57
JULUCA 28
junel 1.5/30 57
junel 1/20 57
junel fe 1.5/30 57
junel fe 1/20 57
junel fe 24 57
JUXTAPID 33
JYLAMVO 61
JYNNEOS 64
kaitlib fe 57
KALBITOR 61
KALETRA 28
kalliga 57
KALYDECO 76
kariva 57
kelnor 1/35 57
KERALYT 42
KERENDIA 68
KESIMPTA 38
ketoconazole 18
KETO-DIASTIX 45
KETONE CARE 45
KETOPROFEN 9
KETOPROFEN ER 9
ketorolac tromethamine 9, 70
KETOSTIX 45
KEVEYIS 71
KEVZARA 61
KEYTRUDA QLEX 21
KINERET 61
KINRIX 64
kionex 48
KISQALI (200 MG DOSE) 21
KISQALI (400 MG DOSE) 21
KISQALI (600 MG DOSE) 22
KLARON 42
klayesta 18
KLISYRI (250 MG) 42
KLISYRI (350 MG) 42
klor-con 48
klor-con 10 48
klor-con m10 48
klor-con m15 48
klor-con m20 48
KLOXXADO 10
KOMZIFTI 22
KOSELUGO 22
kourzeq 39
K-PHOS 48
KRAZATI 22
KRINTAFEL 24
KT TAPE CGM PATCH 45
kurvelo 57
LABETALOL HCL 33
labetalol hcl 33
lacosamide 14, 15
LACTIC ACID E 42
lactulose 50
lactulose encephalopathy 50
LAGEVRIO 28
LAMICTAL XR 15
lamivudine 28
lamivudine-zidovudine 28
lamotrigine 15
lamotrigine er 15
lamotrigine starter kit-blue 15
lamotrigine starter kit-green 15
lamotrigine starter kit-orange 15
LAMPIT 24
LANCETS 45
LANCETS 28G THIN 45
LANCETS SUPER THIN 45
LANTUS SOLOSTAR 47
LANTUS U-100 VIAL 47
lapatinib ditosylate 22
larin 1.5/30 57
larin 1/20 57
larin 24 fe 57
larin fe 1.5/30 57
larin fe 1/20 57
latanoprost 71
LAZCLUZE 22
LEDERLE LEUCOVORIN 22
leflunomide 61
lenalidomide 22
LENVIMA 22
LEQSELVI 42
lessina 57
letrozole 22
leucovorin calcium 22
LEUKERAN 22
LEUKINE 30
leuprolide acetate 54
LEUPROLIDE ACETATE-BUPIVACAINE 54
levalbuterol hcl 75
levetiracetam 15
levetiracetam er 15
LEVOBUNOLOL HCL 71
LEVOCARNITINE 48
levocarnitine 48
levocarnitine sf 48
levofloxacin 12
LEVOFLOXACIN 70
levonest 57
levonorgest-eth est & eth est 57
levonorgest-eth estrad 91-day 57
levonorgest-eth estradiol-iron 57
levonorgestrel-ethinyl estrad 57
levonorg-eth estrad triphasic 57
levo-t 59
levothyroxine sodium 59
levoxyl 59

l-glutamine 68
lidocaine 9
lidocaine hcl 9
LIDOCAINE HCL 10
LIDOCAINE HCL URETHRAL/MUCOSAL 10
lidocaine hcl urethral/mucosal ... 10
lidocaine viscous hcl 39
lidocaine-prilocaine 10
LIDOCAINE-SODIUM BICARBONATE 10
lidocan 10
linezolid 12
LINZESS 50
liomny 59
liothyronine sodium 59
LIPO 48
LIPO-C 48
liraglutide 44
lisdexamfetamine dimesylate 36
lisinopril 33
lisinopril-hydrochlorothiazide 33
LITFULO 42
lithium 30
lithium carbonate 30
LITHIUM CARBONATE 30
lithium carbonate er 30
LITHOSTAT 51
LIVDELZI 50
LIVTENCITY 28
L-MESITRAN SOFT WOUND ... 42
LODINE 9
loestrin 1.5/30 (21) 57
loestrin 1/20 (21) 57
loestrin fe 1.5/30 57
loestrin fe 1/20 57
lofexidine hcl 10
lojaimiess 57
LOKELMA 48
lomustine 22
LONSURF 22
loperamide hcl 50
LOPID 33
lopinavir-ritonavir 28
LOPRESSOR 33
lorazepam 30
lorazepam intensol 30
LORBRENA 22
loryna 57
losartan potassium 33
losartan potassium-hctz 33
LOTEMAX SM 70
LOTENSIN 33
LOTENSIN HCT 33
loteprednol etabonate 70
loteprednol-tobramycin 72
lovastatin 33
LOVENOX 14
low-ogestrel 57
loxapine succinate 26
lo-zumandimine 57
lubiprostone 50
LUGOLS STRONG IODINE 12
luizza 1.5/30 57
luizza 1/20 57
LUMAKRAS 22
LUMIGAN 71
LUPRON DEPOT (1-MONTH) .. 54
LUPRON DEPOT (3-MONTH) .. 54
LUPRON DEPOT (4-MONTH) INTRAMUSCULAR KIT 30MG .. 54
LUPRON DEPOT (6-MONTH) INTRAMUSCULAR KIT 45MG .. 54
LUPRON DEPOT-PED (1-MONTH) 54
LUPRON DEPOT-PED (3-MONTH) 54
LUPRON DEPOT-PED (6-MONTH) 54
lurasidone hcl 26
lutera 57
LUXAMEND 42
LYBALVI 26
lyleq 57
lyllana 57
LYNKUET 68
LYNOZYFIC 22
LYNPARZA 22
LYSINE HCL 48
LYSODREN 22
LYTGOBI (12 MG DAILY DOSE) 22
LYTGOBI (16 MG DAILY DOSE) 22
LYTGOBI (20 MG DAILY DOSE) 22
LYUMJEV KWIKPEN 47
LYUMJEV VIAL 47
lyza 57
MACRODANTIN 12
MAGNESIUM SULFATE 48
MAGNESIUM SULFATE-NACL 48
MALARONE 24
malathion 24
maraviroc 28
marlissa 57
MARPLAN 16
MATULANE 22
MAVENCLAD 38
MAVYRET 28
MAXIDEX 70
MAXITROL 71
MAYZENT 38
MAYZENT STARTER PACK 38
meclizine hcl 17
MECLIZINE HCL 17
MECLOFENAMATE SODIUM 9
MEDIHONEY WOUND/BURN DRESSING 42
MEDROL 52, 53
medroxyprogesterone acetate .. 57
mefloquine hcl 24
megestrol acetate 58
MEGESTROL ACETATE 58
MEKINIST 22
MEKTOVI 22
meleya 58
meloxicam 9
memantine hcl 16
MEMANTINE HCL 16
memantine hcl er 16
memantine hcl-donepezil hcl er 16
MENOSTAR 58
MENQUADFI 64
MENVEO 64
MEPERIDINE HCL 7
meperidine hcl 7
meprobamate 30
MEPRON 24
mercaptopurine 22
MERILOG 47
MERILOG SOLOSTAR 47
mesalamine 65
mesalamine er oral capsule 0.375 gm 65
mesna 22
MESNEX 22
metformin hcl er 44
metformin hcl ir 44
methadone hcl 7
methazolamide 71
methenamine hippurate 12
methergine 68
methimazole 59
METHITEST 53
methocarbamol 78
METHOTREXATE SODIUM 61
methotrexate sodium 61

METHOTREXATE SODIUM (PF) 61
methotrexate sodium (pf) 61
METHOXSALEN RAPID 42
methscopolamine bromide 50
methsuximide 15
METHYLCOBALAMIN 48
methyldopa 33
METHYLDOPA 33
methylergonovine maleate 68
METHYLIN 36
methylphenidate hcl 37
methylphenidate hcl er 37
METHYLPHENIDATE HCL ER 37
methylphenidate hcl er (cd) 36
methylphenidate hcl er (la) 36
methylphenidate hcl er (osm) 37
methylphenidate hcl er (xr) 37
METHYLPHENIDATE HCL ER(DIFFUS) 37
methylprednisolone 53
METHYLPREDNISOLONE ACETATE 53
METHYLPREDNISOLONE-BUPIVACAINE 53
metoclopramide hcl 17
metolazone 33
metoprolol succinate er 33
metoprolol tartrate 33
METOPROLOL TARTRATE 33
metoprolol-hydrochlorothiazide 33
METROCREAM 42
METRONIDAZOLE 12
metronidazole 12, 42
metyrosine 33
mexiletine hcl 33
MIACALCIN 66
mibelas 24 fe 58
MICONAZOLE 3 18
MICROCHAMBER 68
MICROCYN 42
microgestin 1.5/30 58
microgestin 1/20 58
microgestin fe 1.5/30 58
microgestin fe 1/20 58
MICROLET NEXT LANCETS 45
midodrine hcl 33
MIEBO 72
MIGERGOT 19
MIGLITOL 44
miglustat 51
mili 58
milnacipran hcl 39
mimvey 58
MINIMED INSTINCT GLUC SENSOR 45
minocycline hcl 12
minoxidil 33
minzoya 58
MIPLYFFA 68
mirabegron er 51
mirtazapine 16
MIRVASO 42
misoprostol 49
MITOSOL 71
M-M-R II 64
MNEXSPIKE 64
MOBILE LANCETS 30G 45
modafinil 78
MODEYSO 22
moexipril hcl 33
MOLINDONE HCL 26
mometasone furoate 42
mondoxyne nl 12
mono-linyah 58
montelukast sodium 75
MORPHINE SULFATE 8
morphine sulfate 8
morphine sulfate (concentrate) 7
MORPHINE SULFATE (CONCENTRATE) 8
morphine sulfate er 8
MORPHINE SULFATE ER BEADS 8
MORPHINE SULFATE-NACL 8
MOTPOLY XR 15
MOUNJARO 44
moxifloxacin hcl 12, 71
MOXIFLOXACIN HCL (2X DAY) 71
MRESVIA 64
MULPLETA 30
MULTAQ 33
mupirocin 12
MYALEPT 51
mycophenolate mofetil 61
mycophenolate sodium 61
mycophenolic acid 61
MYFEMBREE 58
MYFORTIC 61
MYHIBBIN 61
MYLERAN 22
MYRBETRIQ 51
MYTESI 50
na sulfate-k sulfate-mg sulf 50
nabumetone 9
nadolol 33
NAFTIFINE HCL 18
naloxone hcl 10
NALOXONE HCL 10
naltrexone hcl 10
naproxen 9
naproxen sodium 9
naratriptan hcl 19
narcan 10
NARDIL 16
NASCOBAL 48
NATACYN 71
NATAZIA 58
nateglinide 44
NAYZILAM 15
nebivolol hcl 33
NEBUPENT 24
NEBUSAL 73
necon 0.5/35 (28) 58
NEFAZODONE HCL 17
NEFFY 75
NEMLUVIO 43
NEOKE RA LIPOIC 68
neomycin sulfate 12
NEOMYCIN-BACITRACIN ZN-POLYMYX 72
neomycin-polymyxin-dexameth 71
NEOMYCIN-POLYMYXIN-GRAMICIDIN 72
NEOMYCIN-POLYMYXIN-HC 71
neomycin-polymyxin-hc 73
NEORAL 61
NEOSTIGMINE METHYLSULFATE 20
NEO-SYNALAR 43
NERLYNX 22
NESACAINE 10
NESACAINE-MPF 10
neuac 43
NEULASTA 30
NEULASTA ONPRO 30
NEUPRO 25
NEVIRAPINE 28
nevirapine 28
nevirapine er 28
NEXIUM 49
NEXLETOL 33
NEXLIZET 33
NGENLA 54
NIACIN (ANTIHYPERLIPIDEMIC) 34
niacin er (antihyperlipidemic) 34
NIACOR 34

NICARDIPINE HCL IN NACL ... 34
NICOTROL NS ... 10
nifedipine ... 34
nifedipine er ... 34
nifedipine er osmotic release ... 34
nikki ... 58
nilotinib hcl ... 22
NILUTAMIDE ... 22
nimodipine ... 34
NIMODIPINE ... 34
NINLARO ... 22
nintedanib esylate ... 75
NISOLDIPINE ER ... 34
nitazoxanide ... 24
nitisinone ... 51
nitro-bid ... 34
nitrofurantoin macrocrystal ... 12
nitrofurantoin monohydrate macrocrystals ... 12
nitroglycerin ... 34
NITROLINGUAL ... 34
NITYR ... 51
NIVESTYM ... 31
nora-be ... 58
NORDITROPIN FLEXPRO ... 54
norelgestromin-eth estradiol ... 58
NOREPINEPHRINE-DEXTROSE ... 34
norethin ace-eth estrad-fe ... 58
norethindrone ... 58
norethindrone acetate ... 58
norethindrone acet-ethinyl est ... 58
norethindrone-eth estradiol ... 58
norethin-eth estradiol-fe ... 58
norgestimate-eth estradiol ... 58
norgestimate-ethinyl estradiol triphasic ... 58
NORLIQVA ... 34
norlyroc ... 58
NORPACE ... 34
NORPACE CR ... 34
NORPRAMIN ... 17
nortrel 0.5/35 (28) ... 58
nortrel 1/35 (21) ... 58
nortrel 1/35 (28) ... 58
nortrel 7/7/7 ... 58
nortriptyline hcl ... 17
NORVIR ... 28
NOURIANZ ... 25
NOVOFINE PEN NEEDLE ... 68
NOVOFINE PLUS PEN NEEDLE ... 68
NOVOLIN 70/30 FLEXPEN ... 47
NOVOLIN 70/30 VIAL ... 47
NOVOLIN N FLEXPEN ... 47
NOVOLIN N VIAL ... 47
NOVOLIN R FLEXPEN ... 47
NOVOLIN R VIAL ... 47
NOVOLOG FLEXPEN ... 47
NOVOLOG MIX 70/30 FLEXPEN ... 47
NOVOLOG MIX 70/30 VIAL ... 47
NOVOLOG PENFILL ... 47
NOVOLOG U-100 VIAL ... 47
NOXAFIL ... 18
NPLATE ... 31
NUBEQA ... 22
NUCALA ... 75
NUEDEXTA ... 39
NUPLAZID ... 26
NURTEC ... 19
NUTROPIN AQ NUSPIN 10 ... 54
NUVAXOVID COVID-19 VACCINE ... 64
NUZYRA ... 12
nyamyc ... 18
nylia 1/35 ... 58
nylia 7/7/7 ... 58
NYMALIZE ... 34
nystatin ... 18
NYSTATIN ... 19
nystatin-triamcinolone ... 19
nystop ... 19
octreotide acetate ... 54
OCTREOTIDE ACETATE ... 54
ODACTRA ... 68
ODEFSEY ... 28
ODOMZO ... 22
OFEV ... 75
OFLOXACIN ... 12
ofloxacin ... 71, 73
OGSIVEO ... 22
OJEMDA ... 22
olanzapine ... 26
olanzapine-fluoxetine hcl ... 17
olmesartan medoxomil ... 34
olmesartan medoxomil-hctz ... 34
olmesartan-amlodipine-hctz ... 34
OLUMIANT ... 61
omega-3-acid ethyl esters ... 34
omeprazole ... 49
OMNITROPE ... 54
OMVOH ... 61
OMVOH (300 MG DOSE) ... 61
ONAPGO ... 25
ondansetron hcl ... 17, 18
ONDANSETRON HCL ... 18
ONDANSETRON ODT ... 18
ondansetron odt ... 18
ONETOUCH DELICA SAFETY LANCING ... 45
ONEXTON ... 43
ONGENTYS ... 25
ONUREG ... 22
ONYDA XR ... 37
OPDIVO QVANTIG ... 22
OPFOLDA ... 51
OPIPZA ... 26
OPSUMIT ... 77
OPTICHAMBER DIAMOND ... 68
OPTICHAMBER DIAMOND-LG MASK ... 68
OPTICHAMBER DIAMOND-MD MASK ... 68
OPTICHAMBER DIAMOND-SM MASK ... 68
OPVEE ... 10
OPZELURA ... 43
ORALAIR ... 68
ORALAIR ADULT STARTER PACK ... 68
ORALAIR CHILDRENS STARTER PACK ... 68
oralone ... 39
ORAPRED ODT ... 53
ORENCIA ... 61
ORENCIA CLICKJECT ... 61
ORENITRAM ... 77
ORENITRAM MONTH 1 ... 77
ORENITRAM MONTH 2 ... 77
ORENITRAM MONTH 3 ... 77
ORFADIN ... 51
ORGOVYX ... 22
ORIAHNN ... 58
ORILISSA ... 54
ORKAMBI ... 76
ORLADEYO ... 61
ormalvi ... 71
orphenadrine citrate er ... 78
orquidea ... 58
ORSERDU ... 22
OSCIMIN ... 50
oseltamivir phosphate ... 28
OSENVELT ... 65
OSPHENA ... 55
OTEZLA ... 61, 62
OTEZLA XR ... 62
OTEZLA/OTEZLA XR INITIATION PK ... 62

OVIDE 24
oxaprozin 9
oxazepam 30
oxcarbazepine 15
oxcarbazepine er 15
OXERVATE 72
oxybutynin chloride 51
OXYBUTYNIN CHLORIDE 51
oxybutynin chloride er 51
oxycodone hcl 8
OXYCODONE-ACETAMINOPHEN 8
oxycodone-acetaminophen 8
OXYCONTIN 8
oxymorphone hcl 9
OXYMORPHONE HCL ER 8
oxytocin 54
OXYTOCIN 54
oxytocin +rfid 54
OXYTOCIN-LACTATED RINGERS 54, 55
OXYTOCIN-SODIUM CHLORIDE 55
OXYTROL 51
OZEMPIC 44
pacerone 34
paliperidone er 26
PANDA MASK LARGE 68
PANDA MASK MEDIUM 68
PANDA MASK SMALL 68
PANRETIN 22
pantoprazole sodium 49
PARI VORTEX ADULT MASK 68
PARI VORTEX PEDIATRIC MASK 68
paricalcitol 66
PARLODEL 25
PAROXETINE HCL 17
paroxetine hcl 17
paroxetine hcl er 17
PAXLOVID (150/100) 28
PAXLOVID (300/100 & 150/100) 28
PAXLOVID (300/100) 28
pazopanib hcl 22
PEDIARIX 64
PEDIATRIC PANDA MASK 69
PEDVAX HIB 64
peg 3350-kcl-na bicarb-nacl 50
peg-3350/electrolytes 50
peg-3350/electrolytes/ascorbat 50
PEGASYS 28
peg-kcl-nacl-nasulf-na asc-c 50
PEG-PREP 50
PEN NEEDLE/5-BEVEL TIP 69
PENBRAYA 64
penicillamine 51
PENICILLIN V POTASSIUM 12
penicillin v potassium 12
PENMENVY 64
PENTACEL 65
pentamidine isethionate 24
PENTAZOCINE-NALOXONE HCL 9
PENTETATE CALCIUM TRISODIUM 69
PENTETATE ZINC TRISODIUM 69
PENTIPS GENERIC PEN NEEDLES 69
pentoxifylline er 34
perampanel 15
PERFECT POINT SAFETY LANCETS 45
PERFOROMIST 75
PERIDEX 39
PERINDOPRIL ERBUMINE 34
perindopril erbumine 34
periogard 39
permethrin 24
PERMETHRIN 24
perphenazine 18
PERPHENAZINE-AMITRIPTYLINE 17
PERSERIS 26
PETROLEUM GAUZE NON-WOVEN 3X9" 43
PHEBURANE 51
PHENAZOPYRIDINE HCL 52
PHENELZINE SULFATE 17
PHENOBARBITAL 15
phenoxybenzamine hcl 34
PHENYLEPHRINE HCL 34, 72
phenylephrine hcl 72
PHENYLEPHRINE HCL-NACL 34, 35
phenytek 15
phenytoin 15
phenytoin infatabs 15
phenytoin sodium extended 15
philith 58
PHOSPHOROUS 48
PHOSPHO-TRIN 250 NEUTRAL 48
PHOSPHO-TRIN K500 48
phytonadione 48
PIFELTRO 28
pilocarpine hcl 39, 71
pimecrolimus 43
PIMOZIDE 26
pimtrea 58
pindolol 35
pioglitazone hcl 44
pioglitazone hcl-glimepiride 44
pioglitazone hcl-metformin hcl 44
PIP PEN NEEDLES 32G X 4MM 69
PIPERACILLIN-TAZOBACTAM-NACL 13
PIQRAY 22
pirfenidone 75
piroxicam 9
PITOCIN 55
PNEUMOVAX 23 65
POCKET SPACER 69
PODOCON-25 43
podofilox 43
PODOFILOX 43
POLOCAINE 10
polymyxin b-trimethoprim 72
pomalidomide 22
POMALYST 22
portia-28 58
posaconazole 19
potassium chloride 48
POTASSIUM CHLORIDE 48
potassium chloride crys er 48
potassium chloride er 48
potassium citrate er 48
POVIDONE-IODINE 71
PRADAXA 14
pramipexole dihydrochloride 25
PRAMOTIC 73
prasugrel hcl 25
pravastatin sodium 35
praziquantel 24
prazosin hcl 35
PRED MILD 71
prednisolone 53
prednisolone acetate 71
prednisolone sodium phosphate 53
PREDNISOLONE SODIUM PHOSPHATE 53, 71
PREDNISONE 53
prednisone 53
PREDNISONE INTENSOL 53
pregabalin 39
PREMARIN 58

PREMPHASE 58
PREMPRO 58
PRESTALIA 35
PRETOMANID 20
prevalite 35
PREVNAR 20 65
PREVYMIS 28
PREZCOBIX 28
PREZISTA 28
PRIFTIN 20
primaquine phosphate 24
PRIMAQUINE PHOSPHATE 24
PRIMIDONE 15
primidone 15
PRIORIX 65
PRISMASOL B22GK 4/0 48
PRISMASOL BGK 0/2.5 48
PRISMASOL BGK 2/0 48
PRISMASOL BGK 2/3.5 48
PRISMASOL BGK 4/2.5 48
PRISMASOL BK 0/0/1.2 49
PRO COMFORT SPACER ADULT 69
PRO COMFORT SPACER CHILD 69
PRO COMFORT SPACER INFANT 69
probenecid 19
PROCARE SPACER/ADULT MASK 69
PROCARE SPACER/CHILD MASK 69
procentra 37
prochlorperazine 18
prochlorperazine edisylate 18
prochlorperazine maleate 18
PROCTOCORT 65
PROCTOFOAM HC 65
procto-med hc 65
proctosol hc 65
proctozone-hc 65
progesterone 58
PROGRAF 62
promethazine hcl 18
promethazine-codeine 73
promethazine-dm 73
promethegan 18
PROMETHEGAN 18
propafenone hcl 35
propafenone hcl er 35
proparacaine hcl 72
PROPRANOLOL HCL 35
propranolol hcl 35
propranolol hcl er 35
propylthiouracil 59
PROQUAD 65
protriptyline hcl 17
PROVERA 58
prucalopride succinate 50
pseudoephedrine-bromphen-dm 73
PULMOSAL 73
PULMOZYME 76
PURE COMFORT SAFETY LANCET 30G 45
PURE COMFORT SAFETY PEN NEEDLE 69
PURE COMFORT SPACER CHAMBER 69
PYLERA 50
pyrazinamide 20
pyridostigmine bromide 20
PYRIDOSTIGMINE BROMIDE 20
pyridostigmine bromide er 20
PYRIDOSTIGMINE BROMIDE ER 69
PYRIDOXINE HCL 49
pyrimethamine 24
PYROGALLIC ACID 43
PYRUKYND 31
PYRUKYND TAPER PACK 31
QBREXZA 43
QFITLIA 31
QINLOCK 22
QUADRACEL 65
QUAZEPAM 30
quetiapine fumarate 26
quetiapine fumarate er 26
QUICK TOUCH INSULIN PEN NEEDLE 69
quinapril hcl 35
QUINAPRIL-HYDROCHLOROTHIAZIDE 35
quinidine gluconate er 35
QUINIDINE SULFATE 35
quinine sulfate 24
QULIPTA 19
QVAR REDIHALER 75
RADIAPLEXRX 43
RADICAVA ORS 39
RADICAVA ORS STARTER KIT 39
RADIOGARDASE 69
RAGWITEK 69
RALDESY 17
raloxifene hcl 55
ramelteon 78
ramipril 35
ranolazine er 35
rasagiline mesylate 25
RASUVO 62
RAYA SURE PEN NEEDLE 69
RAYALDEE 66
reclipsen 58
RECOMBIVAX HB 65
REDEMPLO 35
REGENECARE 43
RELENZA DISKHALER 28
REMERON SOLTAB 17
RENACIDIN 52
repaglinide 44
REPATHA 35
REPATHA SURECLICK 35
RESTASIS 72
RESTASIS MULTIDOSE 72
RESTORA RX 50
RETEVMO 22
RETIN-A MICRO PUMP 43
RETROVIR 28
REVLIMID 23
REVUFORJ 23
REXTOVY 10
REXULTI 26
REYATAZ 28
REZVOGLAR KWIKPEN 47
RHAPSIDO 62
RHOPRESSA 71
RIBAVIRIN 28
RIDAURA 62
rifabutin 20
rifampin 20
rilpivirine hcl 28
riluzole 39
RIMANTADINE HCL 28
RINVOQ 62
RINVOQ LQ 62
RIOMET 44
risedronate sodium 66
RISPERDAL CONSTA 26
risperidone 26
RISPERIDONE 26
risperidone microspheres er 26
ritonavir 28
rivaroxaban 14
rivastigmine tartrate 16
rivelsa 58
RIVFLOZA 52
rizatriptan benzoate 19
ROCALTROL 66

ROCKLATAN 71
ROCURONIUM BROMIDE 39
roflumilast 75
ROMVIMZA 23
ropinirole hcl 25
ropinirole hcl er 25
ROPIVACAINE HCL-NACL 10
rosuvastatin calcium 35
rosyrah 58
ROTARIX 65
ROTATEQ 65
roweepra 15
ROZLYTREK 23
RUCONEST 62
rufinamide 15
RUKOBIA 28
RYALTRIS 73
RYBELSUS 44
RYBREVANT FASPRO 23
RYCLORA 73
RYDAPT 23
RYKINDO 26
sacubitril-valsartan 35
SAFETY PEN NEEDLES 69
SANDIMMUNE 62
SANTYL 43
sapropterin dihydrochloride 51
SAVAYSA 14
SAVELLA 39
SAVELLA TITRATION PACK 39
saxagliptin hcl 44
saxagliptin-metformin er 44
SCEMBLIX 23
scopolamine 18
selegiline hcl 25
SELENIUM SULFIDE 43
SELZENTRY 28
SENSILANCE SAFETY LANCETS 21G 45
SENSILANCE SAFETY LANCETS 26G 45
SENSILANCE SAFETY LANCETS 28G 45
SEREVENT DISKUS 75
SEROSTIM 50
sertraline hcl 17
setlakin 58
sevelamer carbonate 52
sevelamer hcl 52
SEYSARA 13
sharobel 59
SHINGRIX 65
sildenafil citrate 77
SILIQ 62
silodosin 52
silver sulfadiazine 13
SIMBRINZA 71
simliya 59
simpesse 59
SIMPLERA SYNC SENSOR 45
SIMPONI 62
simvastatin 35
sirolimus 62
SIRTURO 20
SKYCLARYS 36
SKYRIZI 62, 63
SKYRIZI PEN 62
SKYTROFA 55
SOD CITRATE-CITRIC ACID 49
SODIUM CHLORIDE 49, 73
sodium chloride 49
SODIUM CITRATE 14
SODIUM CITRATE LOCK FLUSH 14
SODIUM CITRATE-CITRIC ACID 49
SODIUM CITRATE-GENTAMICIN SULF 14
sodium oxybate 78
sodium phenylbutyrate 51
sodium polystyrene sulfonate 49
SODIUM SACCHARIN 69
SOFDRA 43
SOGROYA 55
SOHONOS 69
solifenacin succinate 52
SOLIQUA 44
SOLOSEC 13
SOLTAMOX 23
SOLU-CORTEF 53
SOMAVERT 55
SOOLANTRA 43
sorafenib tosylate 23
SORBITOL 69
sotalol hcl 35
sotalol hcl (af) 35
SOTYKTU 63
SOTYLIZE 35
SOVALDI 28
SPEVIGO 63
SPIKEVAX 65
SPIKEVAX 6M-11Y 65
SPIRIVA RESPIMAT 75
spironolactone 35
spironolactone-hctz 35
SPORANOX 19
sprintec 28 59
sps (sodium polystyrene sulf) 49
SPS (SODIUM POLYSTYRENE SULF) 49
ssd 13
STARJEMZA 63
STIOLTO RESPIMAT 75
STIVARGA 23
STOBOCLO 66
STRENSIQ 51
STRIBILD 28
STRIVERDI RESPIMAT 75
STROMECTOL 24
subvenite 15
subvenite starter kit-blue 15
subvenite starter kit-green 15
subvenite starter kit-orange 15
SUCCINYLCHOLINE CHLORIDE 39
SUCRAID 51
sucralfate 49
SUFLAVE 50
SULAR 35
SULFACETAMIDE SODIUM 71
sulfacetamide sodium (acne) 43
SULFACETAMIDE-PREDNISOLONE 72
sulfadiazine 13
sulfamethoxazole-trimethoprim 13
sulfasalazine 65
sulfatrim pediatric 13
SULFURATED LIME 24
sulindac 9
sumatriptan 19
sumatriptan succinate 19
sunitinib malate 23
SUNLENCA 28, 29
SUNOSI 78
SUPREP BOWEL PREP KIT 50
SUTAB 50
syeda 59
SYMBICORT 75
SYMDEKO 76
SYMFI 29
SYMPAZAN 15
SYMPROIC 50
SYMTUZA 29
SYNALAR 43
SYNAREL 55
SYNDROS 18
SYNJARDY 44
SYNJARDY XR 44
TABLOID 23

TABRECTA 23
TACLONEX 43
tacrolimus 43, 63
tadalafil (pah) 77
TAFINLAR 23
tafluprost (pf) 71
TAGRISSO 23
TAKHZYRO 63
TALICIA 50
TALTZ 63
tamoxifen citrate 23
tamsulosin hcl 52
tapentadol hcl 9
taperdex 6-day 53
tarina 24 fe 59
tarina fe 1/20 eq 59
tasimelteon 78
TASMAR 25
TAURINE 49
tavaborole 19
TAVALISSE 31
taysofy 59
TAYTULLA 59
tazarotene 43
TECHLITE LANCETS 26G 45
TECHLITE PLUS PEN NEEDLES 69
TEGLUTIK 39
TEKTURNA 35
telmisartan 35
TELMISARTAN-AMLODIPINE 35
temazepam 78
TEMBEXA 29
temozolomide 23
TENCON 9
TENIVAC 65
tenofovir disoproxil fumarate 29
TEPMETKO 23
terazosin hcl 52
terbinafine hcl 19
terbutaline sulfate 75
terconazole 19
teriflunomide 38
teriparatide 66
TERIPARATIDE 66
testosterone 53
testosterone cypionate 53
TESTOSTERONE ENANTHATE 53
tetrabenazine 39
tetracaine hcl 72
TETRACAINE HCL 72
tetracycline hcl 13
TEZSPIRE 75
THALOMID 23
THEO-24 75
theophylline 76
THEOPHYLLINE ER 76
theophylline er 76
THIOLA 52
THIOLA EC 52
thioridazine hcl 26
thiothixene 26
tiadylt er 35
TIAGABINE HCL 15
tiagabine hcl 15
TIBSOVO 23
ticagrelor 25
TIGLUTIK 39
tilia fe 59
timolol hemihydrate 71
timolol maleate 35, 71
TIMOLOL MALEATE 35
timolol maleate (once-daily) 71
tinidazole 13
tiopronin 52
tiotropium bromide 76
TIVICAY 29
TIVICAY PD 29
tizanidine hcl 78
TOBI PODHALER 76
TOBRADEX 71
TOBRADEX ST 71
tobramycin 71, 76
tobramycin-dexamethasone 71
TOBREX 71
TOLAK 43
tolcapone 25
tolterodine tartrate 52
tolterodine tartrate er 52
tolvaptan 49
tolvaptan (hyponatremia) 49
TOPICORT 43
topiramate 15
topiramate er 15
toremifene citrate 23
torpenz 23
torsemide 35
TOUJEO MAX SOLOSTAR 47
TOUJEO SOLOSTAR 47
TPOXX 29
TRADJENTA 44
TRAMADOL HCL (ER BIPHASIC) 9
tramadol hcl er 9
tramadol hcl ir 9
tramadol-acetaminophen 9
trandolapril 35
TRANDOLAPRIL-VERAPAMIL HCL ER 35
tranexamic acid 31
TRANSDERM SCOP 18
tranylcypromine sulfate 17
travoprost (bak free) 72
trazodone hcl 17
TRELEGY ELLIPTA 76
TRELSTAR MIXJECT 55
TREMFYA 63
TREMFYA ONE-PRESS 63
TREMFYA PEN 63
TREMFYA-CD/UC INDUCTION 63
tretinoin 23
tretinoin microsphere 43
tretinoin microsphere pump 43
TREXALL 63
TREZIX 9
triamcinolone acetonide 40, 43
TRIAMCINOLONE ACETONIDE 43
TRIAMCINOLONE DIACETATE 53
TRIAMCINOLONE-BUPIVACAINE 53
TRI-AMINO 49
triamterene-hctz 35
triazolam 30
tridacaine ii 10
tridacaine iii 10
triderm 43
trientine hcl 49
TRIENTINE HCL 49
tri-estarylla 59
trifluoperazine hcl 27
TRIFLURIDINE 71
TRIHEXYPHENIDYL HCL 25
trihexyphenidyl hcl 25
TRIJARDY XR 44
TRIKAFTA 77
tri-legest fe 59
tri-linyah 59
tri-lo-estarylla 59
tri-lo-marzia 59
tri-lo-mili 59
tri-lo-sprintec 59
trimethobenzamide hcl 18
trimethoprim 13
TRIMETHOPRIM 13
tri-mili 59

trimipramine maleate 17
TRINTELLIX 17
tri-sprintec 59
TRIUMEQ 29
TRIUMEQ PD 29
tri-vylibra 59
tri-vylibra lo 59
trospium chloride 52
trospium chloride er 52
TRUE COMFORT SAFETY PEN NEEDLE 69
TRULICITY 44
TRUMENBA 65
TRUQAP 23
TRYNGOLZA 35
TRYPTYR 72
TRYVIO 35
TUKYSA 23
TURALIO 23
turqoz 59
TWINRIX 65
TYBLUME 59
tydemy 59
TYMLOS 66
TYRUKO 38
TYRVAYA 72
TYVASO 77
TYVASO DPI INSTITUTIONAL KIT 77
TYVASO DPI MAINTENANCE KIT 77
TYVASO DPI TITRATION KIT 77
TYVASO REFILL KIT 77
TYVASO STARTER KIT 77
UBRELVY 19
UCERIS 65
UDENYCA 31
UDSX MEDICATED SYSTEM 69
UDSXMP MEDICATED SYSTEM 69
ULTIGUARD SAFEPACK SYR/NEEDLE 47
UNIFINE OTC PEN NEEDLES 69
UNIFINE PROTECT PEN NEEDLE 69
unithroid 59
UPNEEQ 71
UPTRAVI 77
UPTRAVI TITRATION 77
UREA 43
ursodiol 50
UZEDY 27
valacyclovir hcl 29
VALCHLOR 23
valganciclovir hcl 29
valproic acid 15
valsartan 35
valsartan-hydrochlorothiazide 35
VALTOCO 10 MG DOSE 15
VALTOCO 15 MG DOSE 15
VALTOCO 20 MG DOSE 15
VALTOCO 5 MG DOSE 15
valtya 1/35 59
valtya 1/50 59
vancomycin hcl 13
VANCOMYCIN HCL IN DEXTROSE 13
VANCOMYCIN HCL IN NACL 13
VANDAZOLE 13
VANFLYTA 23
VANRAFIA 52
VAQTA 65
varenicline tartrate 10
varenicline tartrate (starter) 10
varenicline tartrate(continue) 10
VARIVAX 65
VARUBI (180 MG DOSE) 18
VASCEPA 35
VAXELIS 65
VAXNEUVANCE 65
VECAMYL 36
VECURONIUM BROMIDE 39
VELIVET 59
VELSIPITY 63
VELTASSA 49
VENCLEXTA 23
VENCLEXTA STARTING PACK 23
VENIPUNCTURE PX1 PHLEBOTOMY 10
venlafaxine hcl 17
venlafaxine hcl er 17
VEOZAH 69
verapamil hcl 36
VERAPAMIL HCL ER 36
verapamil hcl er 36
VERIFINE INSULIN PEN NEEDLE 69
VERIFINE INSULIN SYRINGE 47
VERIFINE PLUS PEN NEEDLE 69
VERIFINE SAFE LANCET MINI 21G 45
VERIFINE SAFE LANCET MINI 23G 45
VERIFINE SAFE LANCET MINI 28G 45
VERIFINE SAFE LANCET MINI 30G 45
VERQUVO 36
VERSACLOZ 27
VERZENIO 23
vestura 59
VFEND 19
VIBERZI 50
vienva 59
vigabatrin 15
vigadrone 15
VIGAFYDE 15
VIJOICE 23
vilazodone hcl 17
viorele 59
VIRACEPT 29
VIREAD 29
VISTOGARD 69
vitamin d (ergocalciferol) 49
VITRAKVI 23
VIVAGUARD LANCETS 30G 45
VIVAGUARD SAFETY LANCETS 28G 45
VIVITROL 10
VIZIMPRO 23
volnea 59
VONJO 23
VORANIGO 23
voriconazole 19
VORTEX VALVE CHAMBER-PEDI MASK 69
VORTEX VALVED HOLDING CHAMBER 69
VOSEVI 29
VOXZOGO 51
VOYDEYA 31
VOYXACT 52
VRAYLAR 27
VTAMA 43
VUMERITY 38
vyfemla 59
VYKAT XR 69, 70
vylibra 59
VYNDAMAX 36
VYVGART HYTRULO 20
WAINUA 39
WAKIX 78
warfarin sodium 14
WELIREG 23
wera 59
WEZLANA 63, 64

WIDE-SEAL DIAPHRAGM 60 .. 70
WIDE-SEAL DIAPHRAGM 65 .. 70
WIDE-SEAL DIAPHRAGM 70 .. 70
WIDE-SEAL DIAPHRAGM 75 .. 70
WIDE-SEAL DIAPHRAGM 80 .. 70
WIDE-SEAL DIAPHRAGM 85 .. 70
WIDE-SEAL DIAPHRAGM 90 .. 70
WIDE-SEAL DIAPHRAGM 95 .. 70
WINREVAIR 77
wixela inhub 76
wymzya fe 59
WYNZORA 43
XACIATO 13
XALIX 43
xarah fe 59
XARELTO 14
XARELTO STARTER PACK 14
XATMEP 64
XCOPRI 15
XELJANZ 64
XELJANZ XR 64
XELPROS 72
xelria fe 59
XERAC AC 43
XERMELO 51
XIFAXAN 13
XIGDUO XR 44
XIIDRA 72
XOFLUZA (40 MG DOSE) 29
XOFLUZA (80 MG DOSE) 29
XOLAIR 76
XOLREMDI 31
XOSPATA 23
XPOVIO (100 MG ONCE WEEKLY) 23
XPOVIO (40 MG ONCE WEEKLY) 23
XPOVIO (40 MG TWICE WEEKLY) 23
XPOVIO (60 MG ONCE WEEKLY) 23
XPOVIO (60 MG TWICE WEEKLY) 24
XPOVIO (80 MG ONCE WEEKLY) 24
XPOVIO (80 MG TWICE WEEKLY) 24
XROMI 24
XTAMPZA ER 9
XTANDI 24
xulane 59
XULTOPHY 44
XURIDEN 51
XYWAV 78
yargesa 51
YESINTEK 64
YORVIPATH 70
YUPELRI 76
YUTREPIA 77
yuvafem 59
zafemy 59
zafirlukast 76
zaleplon 78
ZARONTIN 15
ZARXIO 31
ZAVZPRET 19
ZEJULA 24
ZELBORAF 24
ZELSUVMI 43
zelvysia 51
ZEMPLAR 66
zenatane 43
ZENPEP 51
zenzedi 37
ZEPATIER 29
ZEPOSIA 38
ZEPOSIA 7-DAY STARTER PACK 38
ZEPOSIA STARTER KIT 38
ZIAGEN 29
zidovudine 29
ZILBRYSQ 70
ZILXI 43
ziprasidone hcl 27
ziprasidone mesylate 27
ZIRGAN 71
ZITHROMAX 13
ZITHROMAX TRI-PAK 13
ZITHROMAX Z-PAK 13
ZOKINVY 70
ZOLADEX 55
ZOLINZA 24
zolmitriptan 19, 20
zolpidem tartrate 78
ZOLPIDEM TARTRATE 78
zolpidem tartrate er 78
zomig 20
zonisamide 15
ZONTIVITY 25
ZORTRESS 64
ZORYVE 43
zovia 1/35 (28) 59
ZTALMY 15
ZUBSOLV 10
zumandimine 59
ZURZUVAE 17
ZYDELIG 24
ZYKADIA 24
ZYLET 72
ZYPREXA RELPREVV 27
ZYVOX 13

The company does not discriminate on the basis of race, color, national origin, sex, age, or disability in health programs and activities.

Free services are provided to help you communicate with us, such as letters in other languages or large print. You may also ask to speak with an interpreter. To ask for help, please call the toll-free phone number listed on your ID card.

ATENCIÓN: Si habla español (Spanish), La compañía no discrimina por raza, color, nacionalidad, sexo, edad o discapacidad en actividades y programas de salud.

Se brindan servicios gratuitos para ayudarle a comunicarse con nosotros, como cartas en otros idiomas o en letra grande. También puede solicitar comunicarse con un intérprete. Para solicitar ayuda, llame al número de teléfono gratuito que figura en su tarjeta de identificación.

請注意：如果您說中文 (Chinese)，公司不会基于种族、肤色、国籍、性别、年龄或残疾而在健康计划和活动中歧视任何人。

为帮助您与我们沟通，我们提供一些免费服务，例如用其他语言书写的信件或大字体。您也可以要求与口译员对话。欲寻求帮助，请拨打您的 ID 卡上列出的免费电话号码。

BlueCross BlueShield Arizona

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Notice of Nondiscrimination

Discrimination Is Against the Law

Blue Cross® Blue Shield® of Arizona (AZ Blue) complies with applicable Federal civil rights laws and does not discriminate on the basis of race, color, national origin, age, disability, or sex (including sex characteristics, intersex traits, pregnancy or related conditions, sexual orientation, gender identity, and sex stereotypes). **AZ Blue** does not exclude people or treat them less favorably because of race, color, national origin, age, disability, or sex.

AZ Blue:

- Provides people with disabilities reasonable modifications and free appropriate auxiliary aids and services to communicate effectively with us, such as:
  - Qualified sign language interpreters
  - Written information in other formats (large print, audio, accessible electronic formats, other formats)
- Provides free language assistance services to people whose primary language is not English, which may include:
  - Qualified interpreters
  - Information written in other languages

If you need reasonable modifications, appropriate auxiliary aids and services, or language assistance services, call 602-864-4884 for Spanish and 1-877-475-4799 for all other languages and other aids and services.

If you believe that **AZ Blue** has failed to provide these services or discriminated in another way on the basis of race, color, national origin, age, disability, or sex, you can file a grievance with:

Section 1557 Coordinator
P.O. Box 13466
Phoenix, AZ 85002-3466; Call 602-864-2288, TTY: 711
or email us at **crc@azblue.com**

You can file a grievance in person or by mail, fax, or email. If you need help filing a grievance, **AZ Blue Section 1557 Coordinator** is available to help you.

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

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

Complaint forms are available at http://www.hhs.gov/ocr/office/file/index.html.
This notice is available at AZ Blue's website: azblue.com/nondiscrimination-notice.

BlueCross BlueShield Arizona

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Aviso de no discriminación

La discriminación es ilegal

Blue Cross® Blue Shield® of Arizona (AZ Blue) cumple con las leyes federales de derechos civiles vigentes y no discrimina por motivos de raza, color, origen nacional, edad, discapacidad ni sexo (de conformidad con el alcance de la discriminación sexual descrita en la Sección 92.101[a][2] del Título 45 del Código de Regulaciones Federales [CFR]) (o sexo, que incluye las características sexuales, como rasgos intersexuales, embarazo o condiciones relacionadas, orientación sexual, identidad de género y estereotipos sexuales). **AZ Blue** no excluye a las personas ni las trata de manera menos favorable por motivos de raza, color, nacionalidad, edad, discapacidad ni sexo.

AZ Blue:

- Brinda a las personas con discapacidades modificaciones razonables y ayudas y servicios auxiliares gratuitos y apropiados para comunicarse de manera eficaz con nosotros, tales como:
  - Intérpretes de lenguaje de señas calificados.
  - Información escrita en otros formatos (letra grande, audio, formatos electrónicos accesibles, otros formatos)
- Ofrece servicios gratuitos de asistencia lingüística a personas cuyo idioma principal no es el inglés, que pueden incluir:
  - Intérpretes calificados.
  - Información escrita en otros idiomas

Si necesita modificaciones razonables, ayudas y servicios auxiliares apropiados o servicios de asistencia lingüística, llame al 602-864-4884 para español y al 1-877-475-4799 para todos los demás idiomas y otras ayudas y servicios**.**

Si considera que **AZ Blue** no ha proporcionado estos servicios o ha discriminado de cualquier otra manera por motivos de raza, color, nacionalidad, edad, discapacidad o sexo, puede presentar una queja ante:

Section 1557 Coordinator
P.O. Box 13466
Phoenix, AZ 85002-3466; Call 602-864-2288, TTY: 711

o bien, envíenos un correo electrónico a **crc@azblue.com**

Puede presentar una queja en persona o por correo postal, fax o correo electrónico. Si necesita ayuda para presentar una queja, el **Coordinador de la Sección 1557 de AZ Blue** está disponible para ayudar.

También puede presentar un reclamo de derechos civiles ante la Oficina de Derechos Civiles del Departamento de Salud y Servicios Humanos de los EE. UU. de manera electrónica a través del Portal de reclamos de la Oficina de Derechos Civiles, disponible en https://ocrportal.hhs.gov/ocr/portal/lobby.jsf, o por correo o teléfono a:

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

Los formularios de reclamos están disponibles en http://www.hhs.gov/ocr/office/file/index.html. Este aviso está disponible en el sitio web de AZ Blue: azblue.com/nondiscrimination-notice.

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

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 1-877-475-4799.

Spanish: Si habla español, tiene a su disposición servicios gratuitos de asistencia lingüística. También están disponibles de forma gratuita ayuda y servicios auxiliares apropiados para proporcionar información en formatos accesibles. Llame al 602-864-4884.

Navajo: Diné bee yáníłti'gogo, saad bee aná'awo' bee áka'anída'awo'ít'áá jiik'eh ná hóló. Bee ahił hane'go bee nida'anishí t'áá ákodaat'éhígíí dóó bee áka'anída'wo'í áko bee baa hane'í bee hadadilyaa bich'į' ahoot'i'ígíí éí t'áá jiik'eh hóló. Kohjį' 1-877-475-4799.

Chinese Simplified: 如果您说[中文]，我们将免费为您提供语言协助服务。我们还免费提供适当的辅助工具和服务，以无障碍格式提供信息。致电 1-877-475-4799 。

Chinese Traditional: 如果您說[中文]，我們可以為您提供免費語言協助服務。也可以免費提供適當的輔助工具與服務，以無障礙格式提供資訊。請致電 1-877-475-4799。

Tagalog: Kung nagsasalita ka ng Tagalog, magagamit mo ang mga libreng serbisyong tulong sa wika. Magagamit din nang libre ang mga naaangkop na auxiliary na tulong at serbisyo upang magbigay ng impormasyon sa mga naa-access na format. Tumawag sa 1-877-475-4799.

French: Si vous parlez Français, des services d'assistance linguistique gratuits sont à votre disposition. Des aides et services auxiliaires appropriés pour fournir des informations dans des formats accessibles sont également disponibles gratuitement. Appelez le 1-877-475-4799.

Vietnamese: Nếu bạn nói tiếng Việt, chúng tôi cung cấp miễn phí các dịch vụ hỗ trợ ngôn ngữ. Các hỗ trợ dịch vụ phù hợp để cung cấp thông tin theo các định dạng dễ tiếp cận cũng được cung cấp miễn phí. Vui lòng gọi theo số 1-877-475-4799.

German: Wenn Sie Deutsch sprechen, stehen Ihnen kostenlose Sprachassistenzdienste zur Verfügung. Entsprechende Hilfsmittel und Dienste zur Bereitstellung von Informationen in barrierefreien Formaten stehen ebenfalls kostenlos zur Verfügung. Rufen Sie 1-877-475-4799.

Korean: 한국어 를 사용하시는 경우 무료 언어 지원 서비스를 이용하실 수 있습니다. 이용 가능한 형식으로 정보를 제공하는 적절한 보조 기구 및 서비스도 무료로 제공됩니다. 1-877-475-4799.

Russian: Если вы говорите на русский, вам доступны бесплатные услуги языковой поддержки. Соответствующие вспомогательные средства и услуги по предоставлению информации в доступных форматах также предоставляются бесплатно. Позвоните по телефону 1-877-475-4799.

Arabic

تنبيه: إذا كنت تتحدث اللغة العربية، فستتوفر لك خدمات المساعدة اللغوية المجانية. كما تتوفر وسائل مساعدة وخدمات مناسبة لتوفير المعلومات بتنسيقات يمكن الوصول إليها مجانًا. اتصل على الرقم 1-877-475-4799.

Hindi: यदि आप हिंदी बोलते हैं, तो आपके लिए निःशुल्क भाषा सहायता सेवाएं उपलब्ध होती हैं। सुलभ प्रारूपों में जानकारी प्रदान करने के लिए उपयुक्त सहायक साधन और सेवाएँ भी निःशुल्क उपलब्ध हैं। 1-877-475-4799 ।

Farsi (Persian)

توجه: اگر فارسی صحبت می‌کنید، خدمات پشتیبانی زبانی رایگان در دسترس شما قرار دارد. همچنین کمک‌ها و خدمات پشتیبانی مناسب برای ارائه اطلاعات در قالب‌های قابل دسترس، به‌طور رایگان موجود می‌باشند. با شماره 1-877-475-4799.

Thai: หมายเหตุ: หากคุณใช้ภาษา ไทย เรามีบริการความช่วยเหลือด้านภาษาฟรี นอกจากนี้ ยังมีเครื่องมือและบริการช่วยเหลือเพื่อให้ข้อมูลในรูปแบบที่เข้าถึงได้โดยไม่เสียค่าใช้จ่าย โปรดโทรติดต่อ 1-877-475-4799 หรือปรึกษาผู้ให้บริการของคุณ”

Japanese: 日本語を話される場合、無料の言語支援サービスをご利用いただけます。アクセシブル（誰もが利用できるよう配慮された）な形式で情報を提供するための適切な補助支援やサービスも無料でご利用いただけます。1-877-475-4799 。

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