



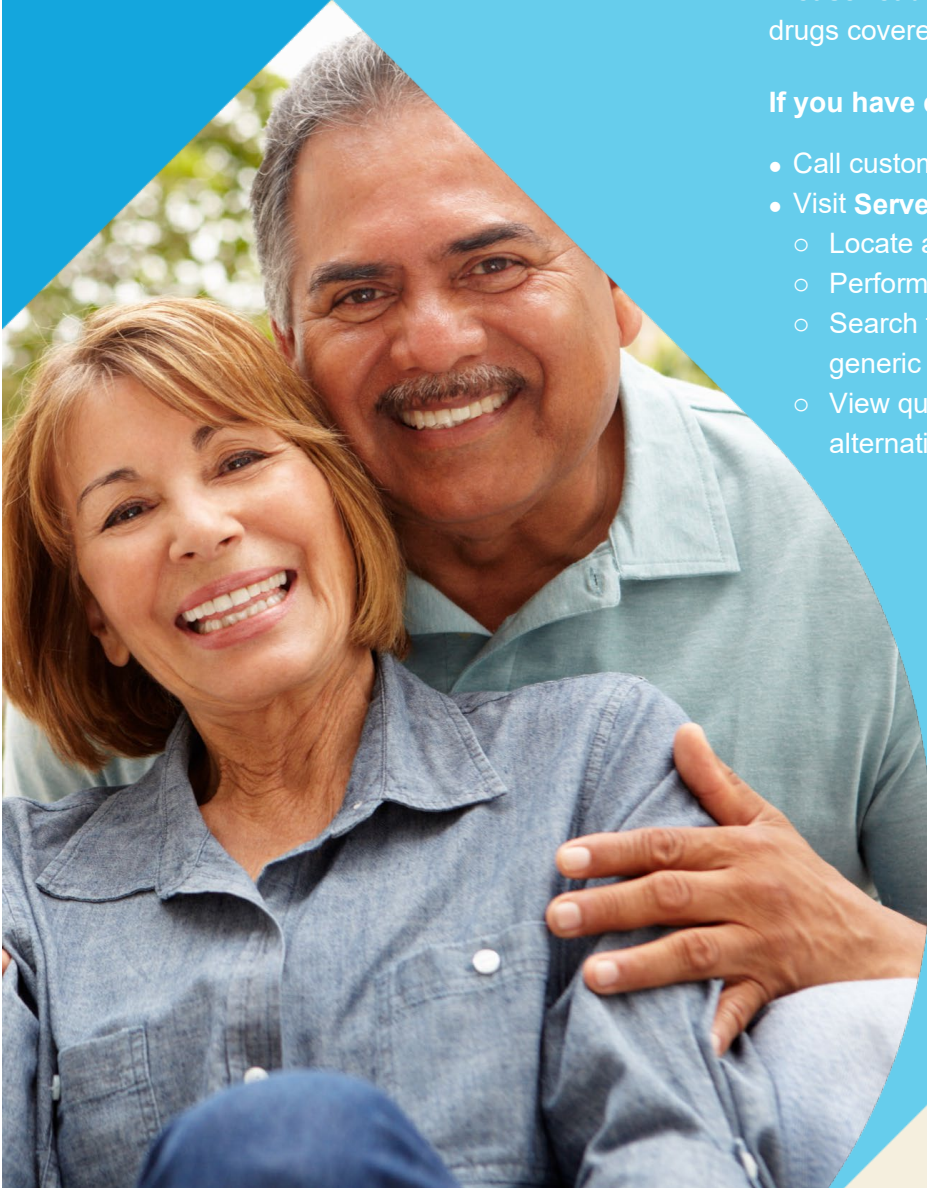
**Effective January 1, 2024**

## Your Prescription Drug List Serve You Rx Standard Formulary

**Please read:** This document contains information about the drugs covered under your pharmacy benefit plan.

### **If you have questions:**

- Call customer service at **800-759-3203**.
- Visit **ServeYouRx.com**
  - Locate a participating retail pharmacy by ZIP code
  - Perform drug cost comparisons
  - Search the drug database for generics, brand-names, generic equivalents and other drug information
  - View quality and safety information about prescription alternatives about prescription alternatives



## Your Prescription Drug List (PDL)

The Prescription Drug List, or formulary, is a listing of the most commonly prescribed medications sorted by therapeutic category. The PDL identifies the drugs available for certain conditions and organizes them into cost levels, also known as tiers. It is intended to be used as a guide to help you and your doctor choose the best course of treatment for you. Drug designation by category is for reference only and not clinical comparison. The PDL is not intended to be a substitute for the clinical knowledge and judgement of the medical practitioner in their choice of drug therapy. In all cases, the prescriber is expected to select appropriate drug therapy for the individual patient and provide high-quality healthcare.

### Please note

- Where differences are noted between this PDL and your benefit plan documents, the benefit plan documents will rule.
- This document is not intended to be a complete list of medications, and not all medications listed may be covered under your plan. Please look at your benefit plan documents provided by your employer or plan sponsor to see what medications are covered under your plan.
- You may also log on to [ServeYouRx.com](https://www.ServeYouRx.com) or call customer service at **800-759-3203** for more information.

## At Serve You Rx, we are committed to helping you better understand your medication options.

Your pharmacy benefit offers flexibility and choice in determining the right medication for you. To help you get the most out of your pharmacy benefit, we've included some of the most commonly asked questions about the PDL.

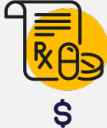


### HOW DO I USE MY PRESCRIPTION DRUG LIST?

Bring this PDL with you when you see your doctor. You and your doctor should consult it when choosing a medication. It is organized by common medical conditions. Medications are then listed alphabetically and identified as generic or brand, and if special rules apply. If your medication is not listed in this document, please visit [ServeYouRx.com](https://www.ServeYouRx.com) or call customer service at **800-759-3203**.

## WHAT ARE TIERS?

Tiers are the different cost levels you pay for a medication. Each tier is assigned a cost, which is determined by your employer or plan sponsor. Tier 1 medications are your lowest-cost options. If your medication is placed in Tier 2 or 3, look to see if there is a Tier 1 option available. Discuss these options with your doctor.

Check your benefit plan documents to find out your specific pharmacy plan costs.

\$	DRUG TIER	INCLUDES	HELPFUL TIPS
	<b>Tier 1 Lowest Cost</b>	Lower-cost, commonly used generic drugs	Use Tier 1 drugs for the lowest out-of-pocket costs.
	<b>Tier 2 Mid-Range Cost</b>	Many common brand-name drugs, called preferred brands	Use Tier 2 drugs, instead of Tier 3, to help reduce your out-of-pocket costs.
	<b>Tier 3 Highest Cost</b>	Mostly higher-cost brand drugs, also known as non-preferred brands	Many Tier 3 drugs have lower-cost options in Tier 1 or 2. Ask your doctor if they could work for you.

### Please Note

**Plans may have different tiers (4, none, etc.).** If your plan has a Tier 4, specialty drugs are included in this tier. If you have a high deductible plan, the tier cost levels may apply once you hit your deductible. Refer to your enrollment and plan documents or call customer service at **800-759-3203** for more information about your benefit plan.

## WHEN DOES THE PRESCRIPTION DRUG LIST CHANGE?

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

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

## PROGRAMS AND LIMITS

Some medications are noted with letters or symbols next to them. The letters and symbols refer to pharmacy benefit programs and are provided to help you check which medications may have a program or limit. Your benefit plan determines how these medications may be covered for you.

<p><b>PA</b></p>	<p><b>Prior Authorization</b> — Your doctor is required to provide additional information to determine coverage.</p>
<p><b>ST</b></p>	<p><b>Step Therapy</b> — Trial of lower cost medication(s) is required before a higher cost medication is covered, based on continually updated, evidenced-based research and widely accepted medical practices.</p>
<p><b>QL</b></p>	<p><b>Quantity Limits</b> — Amount of medication covered per copayment or in a specific time period. For selected medications, may include conversion from twice-daily dosing to one-time-daily dosing.</p>
<p><b>SP</b></p>	<p><b>Specialty Medication</b> — Medication is designated as a specialty pharmacy drug.</p>
<p><b>E</b></p>	<p><b>Excluded</b> — May be excluded from coverage or subject to prior authorization. Lower-cost options are available and covered. Authorized Brand Alternatives (ABAs) are excluded.</p>

## WHAT IS THE DIFFERENCE BETWEEN BRAND-NAME AND GENERIC MEDICATIONS?

Generic medications contain the same active ingredients (what makes the medication work) as brand-name medications, but they often cost less. Once the patent of a brand-name medication ends, the FDA can approve a generic version with the same active ingredients. These types of medications are known as generic medications. Sometimes the same company that makes a brand-name medication also makes the generic version.

## IS IT A GENERIC OR BRAND-NAME DRUG?

The drug list shows **brand-name** drugs in **bold** type (for example, **Crestor**) and generic drugs in plain type (for example, rosuvastatin).

## WHAT IF MY DOCTOR WRITES A BRAND-NAME PRESCRIPTION?

The next time your doctor gives you a prescription for a brand-name medication, ask if a generic equivalent or lower-cost option is available and if it might be right for you. Generic medications are usually your lowest-cost option, but not always. Visit the drug cost comparison tool in the Member Portal at [ServeYouRx.com](https://www.ServeYouRx.com) to be sure.

## ARE YOU TAKING A SPECIALTY MEDICATION?

Specialty medications treat rare or complex conditions and are typically higher cost medications. Specialty drugs have the following characteristics:

- Treat complex and often costly medical conditions such as: cancer, rheumatoid arthritis, multiple sclerosis, hepatitis C, and pulmonary hypertension
- Are often injected or infused (IV) medicines, but may also be taken orally
- Require close monitoring of response to drug therapy
- May require individualized dosing, medical devices to administer the medicine, and/or special handling and delivery
- Require additional education for safe and cost-effective use

### Please Note

**Not all specialty medications are listed in the PDL.**

Serve You Rx Specialty Pharmacy stocks most specialty medications and is committed to helping patients navigate the complexity of specialty drug therapy with helpful programs, services, and enhanced patient care. Call customer service at [800-759-3203](tel:800-759-3203) and have your prescriptions delivered right to your home or office.

## SHOULD I TALK TO MY DOCTOR ABOUT OTC MEDICATIONS?

An over-the-counter (OTC, no prescription required) medication may be the right treatment option for some conditions. Talk to your doctor about available OTC options. Even though these medications may not be covered under your pharmacy benefit, they may cost less than your out-of-pocket expense for prescription medications.

## HOW DO I GET UPDATED INFORMATION ABOUT MY PHARMACY BENEFIT?

Since the PDL may change during your plan year, we encourage you to visit [ServeYouRx.com](https://www.ServeYouRx.com) or call customer service at **800-759-3203** for more current information.

When you register at [ServeYouRx.com](https://www.ServeYouRx.com), you can use the website's helpful tools and features to:

- Perform drug cost comparisons;
- Learn how to use mail service for home delivery of your medications;
- View your medication history;
- Locate in-plan, out-of-plan, and 24-hour pharmacies near you;
- Refill your prescriptions;
- Search the drug database for generics, brand-names, generic equivalents, and other drug information;
- View quality and safety information about prescription alternatives; and
- View any plan-specific content.

If you need more information...

Call customer service at 800-759-3203

Visit the member portal at  
**ServeYouRx.com** to...

- Compare drug prices
- Find your lowest prescription cost
- Locate your pharmacy and get driving directions
- Keep track of your health history
- Learn more about your drugs

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**Bold type** = Brand name drug [Plain type = Generic drug]

**E** Excluded **PA** Prior Authorization **ST** Step Therapy **QL** Quantity Limits **SP** Specialty Program

DRUG NAME	DRUG TIER	PROGRAMS AND LIMITS	DRUG NAME	DRUG TIER	PROGRAMS AND LIMITS
<b>Acne/Rosacea</b>			Doxycycline Hyclate	1	
<b>Absorica LD</b>	3	PA	Doxycycline Monohydrate	1	
Accutane	1		Levofloxacin Tab	1	
Amnesteem	1		Metronidazole Tab	1	
Claravis	1		Minocycline Cap	1	
Isotretinoin	1		Mondoxyn NL	1	
<b>Seysara</b>	3	ST	Neomycin/Polymyxin/HC Otic	1	
Zenatane	1		Nitrofurantoin Macrocrystals	1	
<b>Addiction/Substance Abuse</b>			Nitrofurantoin Monohydrate Macrocrystals	1	
Buprenorphine SL	1	QL	<b>Nuzyra</b>	3	PA
Buprenorphine/Naloxone	1	QL	Ofloxacin Otic	1	
<b>Kloxxado</b>	2		Penicillin VK	1	
Naloxone Nasal Spray	1		Sulfamethoxazole/Trimethoprim	1	
Naltrexone Tab	1		Sulfatrim Pediatric	1	
<b>Narcan</b>	2		<b>TOBI Podhaler</b>	3	QL, SP
<b>Reset</b>	2	PA	<b>Xenleta</b>	3	
<b>Reset-O</b>	2	PA	<b>Anti-Infectives: Antifungals</b>		
<b>Sublocade</b>	3	SP	Ciclodan	1	
Varenicline	1		Clotrimazole Cream	1	
<b>Zimhi</b>	3		<b>Cresemba</b>	3	
<b>Zubsolv</b>	2	QL	Fluconazole	1	
<b>Anti-Infectives: Antibiotics</b>			<b>Jublia</b>	3	PA
Amoxicillin	1		Nyamyc	1	
Amoxicillin/Clavulanate	1		Nystatin Mouth/Throat	1	
Avidoxy	1		Nystop	1	
Azithromycin	1		Terbinafine Tab	1	QL
Cefadroxil	1		<b>Vivjoa</b>	3	PA, ST
Cefdinir	1		<b>Anti-Infectives: Antivirals</b>		
Cefuroxime	1		Acyclovir Tab	1	
Cephalexin	1		Entecavir	1	QL
Ciprofloxacin/Dexamethasone Otic	1		<b>Epclusa</b>	2	PA, QL, SP
Ciprofloxacin Tab	1		<b>Harvoni</b>	2	PA, QL, SP
Clarithromycin Tab	1		<b>Ledipasvir/Sofosbuvir (Harvoni ABA)</b>	E	SP
Clindamycin Cap	1				
<b>Dificid</b>	3				



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<b>Mavyret</b>	2	PA, QL, SP	<b>Tavalisse</b>	3	PA, SP
Oseltamivir Phosphate Cap	1	QL	Tranexamic Acid Tab	1	
<b>Paxlovid</b>	3		<b>Udenyca</b>	3	PA, SP
<b>Sofosbuvir/Velpatasvir (Epclusa ABA)</b>	E	SP	<b>Ultomiris</b>	3	PA, SP
Valacyclovir	1	QL	<b>Wilate</b>	2	SP
<b>Vemlidy</b>	3	ST	<b>Xyntha</b>	2	SP
<b>Vosevi</b>	2	PA, QL, SP	<b>Xyntha Solofuse</b>	2	SP
<b>Xofluza</b>	3	QL	<b>Zarxio</b>	2	PA, SP
<b>Blood Disorders</b>			<b>Cancer</b>		
<b>Advate</b>	2	SP	Abiraterone	1	PA, SP
<b>Adynovate</b>	3	SP	<b>Alecensa</b>	2	PA, SP
<b>Afstyla</b>	3	SP	<b>Alunbrig</b>	2	PA, QL, SP
<b>Alprolix</b>	3	SP	Anastrozole Tab	1	
<b>Aranesp</b>	2	PA, SP	<b>Cabometyx</b>	2	PA, SP
<b>Doptelet</b>	3	PA, SP	<b>Calquence</b>	3	PA, SP
<b>Eloctate</b>	3	SP	Capecitabine	1	SP
<b>Empaveli</b>	3	PA, SP	<b>Cotellic</b>	3	PA, SP
<b>Esperoct</b>	3	SP	<b>Erivedge</b>	3	PA, SP
<b>Idelvion</b>	3	SP	<b>Erleada</b>	3	PA, SP
<b>Jivi</b>	3	SP	<b>Exkivity</b>	3	PA, SP
<b>Koate</b>	2	SP	<b>Gavreto</b>	3	PA, SP
<b>Kogenate FS</b>	2	SP	<b>Ibrance</b>	3	PA, SP
<b>Kovaltry</b>	2	SP	<b>Iclusig</b>	3	PA, QL, SP
<b>Mulpleta</b>	2	PA, SP	<b>Idhifa</b>	3	PA, QL, SP
<b>Neulasta</b>	3	PA, SP	Imatinib Mesylate	1	PA, SP
<b>Neulasta Onpro</b>	3	PA, SP	<b>Imbruvica</b>	3	PA, QL, SP
<b>Nivestym</b>	2	PA, SP	<b>Kanjinti</b>	2	PA, SP
<b>Novoeight</b>	2	SP	<b>Kisqali</b>	3	PA, SP
<b>Nuwiq</b>	2	SP	<b>Kisqali Femara</b>	3	PA, SP
<b>Procrit</b>	2	PA, SP	<b>Koselugo</b>	3	PA, SP
<b>Promacta</b>	3	PA, SP	Letrozole	1	
<b>Rebinyn</b>	3	SP	<b>Lumakras</b>	3	PA, SP
<b>Recombinate</b>	2	SP	<b>Lynparza</b>	2	PA, SP
<b>Retacrit</b>	2	PA, SP	<b>Mekinist Tab</b>	3	PA, SP
<b>Soliris</b>	3	PA, SP	<b>Mvasi</b>	2	PA, SP
			<b>Nubeqa</b>	3	PA, SP

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<b>Odomzo</b>	3	PA, SP	Warfarin	1	
<b>Orgovyx</b>	3	PA, SP	<b>Xarelto</b>	2	QL
<b>Panretin</b>	3		<b>Cardiovascular/Heart Disease: High Blood Pressure</b>		
<b>Phesgo</b>	2	PA, SP	Amlodipine	1	
<b>Piqray</b>	3	PA, SP	Amlodipine/Benazepril	1	
<b>Pomalyst</b>	3	PA, SP	Amlodipine/Olmesartan	1	
<b>Retevmo</b>	3	PA, SP	Amlodipine/Valsartan	1	
<b>Revlimid</b>	2	PA, SP	Atenolol	1	
<b>Rozlytrek</b>	3	PA, SP	Atenolol/Chlorthalidone	1	
<b>Ruxience</b>	2	PA, SP	Benazepril	1	
<b>Rydapt</b>	3	PA, SP	Bisoprolol	1	
<b>Scemblix</b>	3	PA, QL, SP	Bisoprolol/HCTZ	1	
<b>Sprycel</b>	2	PA, SP	Bumetanide	1	
<b>Stivarga</b>	2	PA, SP	Candesartan	1	
<b>Tabrecta</b>	3	PA, SP	Cartia XT	1	
<b>Tafinlar</b>	3	PA, SP	Carvedilol	1	
<b>Tagrisso</b>	3	PA, SP	Chlorthalidone	1	
Tamoxifen Tab	1		Clonidine Tab	1	
<b>Tasigna</b>	3	PA, SP	Diltiazem ER	1	
Temozolomide	1	PA, SP	Doxazosin	1	
<b>Trazimera</b>	2	PA, SP	<b>Edarbi</b>	3	ST
<b>Verzenio</b>	3	PA, SP	<b>Edarbyclor</b>	3	ST
<b>Vitrakvi</b>	3	PA, SP	Enalapril	1	
<b>Xtandi</b>	3	PA, SP	<b>Furoscix</b>	3	
<b>Zejula</b>	2	PA, SP	Furosemide	1	
<b>Zelboraf</b>	3	PA, SP	Guanfacine	1	
<b>Zirabev</b>	2	PA, SP	Hydralazine	1	
<b>Cardiovascular/Heart Disease: Anticoagulants</b>			Hydrochlorothiazide	1	
<b>Brilinta</b>	2		Irbesartan	1	
Clopidogrel	1		Irbesartan/HCTZ	1	
<b>Eliquis</b>	2	QL	Labetalol	1	
Enoxaparin	1		Lisinopril	1	
Jantoven	1		Lisinopril/HCTZ	1	
<b>Pradaxa</b>	2	QL	Losartan	1	
Prasugrel	1		Losartan/HCTZ	1	

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DRUG NAME	DRUG TIER	PROGRAMS AND LIMITS	DRUG NAME	DRUG TIER	PROGRAMS AND LIMITS
Metoprolol Succinate ER	1		Pravastatin	1	
Metoprolol Tartrate	1		<b>Repatha</b>	2	PA, QL
Minoxidil	1		Rosuvastatin	1	
Nadolol	1		Simvastatin	1	
Nebivolol	1		<b>Vascepa</b>	2	
Nifedipine ER	1		<b>Cardiovascular/Heart Disease: Other</b>		
Nifedipine ER Osmotic	1		Amiodarone	1	
<b>Norliqva</b>	3	PA, QL	<b>Corlanor</b>	3	PA, QL
Olmesartan	1		Digoxin	1	
Olmesartan/HCTZ	1		<b>Entresto</b>	2	QL
Prazosin	1		Flecainide	1	
Propranolol	1		Isosorbide Mononitrate ER	1	
Propranolol ER	1		<b>Multaq</b>	3	
Ramipril	1		Nitroglycerin SL	1	
Spirolactone	1		Ranolazine ER	1	
<b>Tekturna</b>	2	ST	<b>Soanz</b>	3	
<b>Tekturna HCT</b>	2	ST	<b>Verquvo</b>	3	PA, QL
Telmisartan	1		<b>Cardiovascular/Heart Disease: Pulmonary Arterial Hypertension</b>		
Telmisartan/HCTZ	1		<b>Adempas</b>	2	PA, QL, SP
Torsemide	1		<b>Opsumit</b>	2	PA, QL, SP
Triamterene/HCTZ	1		<b>Orenitram</b>	3	PA, QL, SP
Valsartan Tab	1		Sildenafil Tab 20mg	1	PA, QL
Valsartan/HCTZ	1		<b>Tadliq</b>	3	PA, QL, SP
Verapamil ER	1		Treprostinil	1	PA, QL, SP
<b>Cardiovascular/Heart Disease: High Cholesterol</b>			<b>Tyvaso</b>	3	PA, QL, SP
Atorvastatin	1		<b>Tyvaso DPI</b>	3	PA, QL, SP
Ezetimibe	1		<b>Central Nervous System: Alzheimer's/Dementia</b>		
Fenofibrate	1		Donepezil	1	
Gemfibrozil	1		Memantine	1	
Icosapent Ethyl	1		<b>Namzaric</b>	2	QL
<b>Livalo</b>	3	ST	<b>Central Nervous System: Antipsychotics</b>		
Lovastatin	1		<b>Abilify Maintena</b>	3	
<b>Nexletol</b>	2	PA, QL	Aripiprazole	1	QL
<b>Nexlizet</b>	2	PA, QL	<b>Aristada</b>	3	
Omega-3 Acid	1				

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DRUG NAME	DRUG TIER	PROGRAMS AND LIMITS	DRUG NAME	DRUG TIER	PROGRAMS AND LIMITS
<b>Aristada Initio</b>	3		<b>Central Nervous System: Depression</b>		
<b>Invega Hafyera</b>	3	ST	Amitriptyline	1	
<b>Invega Sustenna</b>	3		Bupropion	1	
<b>Invega Trinza</b>	3		Bupropion SR	1	QL
<b>Latuda</b>	3	QL, ST	Bupropion XL 150mg, 300mg	1	QL
Lurasidone	1	QL	Citalopram Tab	1	
<b>Lybalvi</b>	3	QL, ST	Desvenlafaxine ER	1	QL
Olanzapine	1		Doxepin	1	
<b>Perseris</b>	3		Duloxetine	1	QL
Quetiapine	1		Escitalopram Tab	1	
Quetiapine ER	1	QL	Fluoxetine	1	
<b>Rexulti</b>	3	QL	Fluvoxamine	1	
Risperidone	1		Mirtazapine	1	
<b>Vraylar</b>	3	QL	Nortriptyline	1	
Ziprasidone	1		Paroxetine Tab	1	
<b>Central Nervous System: Attention Deficit Disorder</b>			Sertraline Tab	1	
<b>Adderall XR</b>	3	ST	<b>Spravato</b>	3	PA, SP
Amphetamine/ Dextroamphetamine	1		Trazodone	1	
Amphetamine/ Dextroamphetamine ER	1		<b>Trintellix</b>	3	QL, ST
Atomoxetine	1		Venlafaxine	1	
<b>Azstarys</b>	2	ST	Venlafaxine ER	1	
Dexmethylphenidate	1		Vilazodone	1	QL
Dexmethylphenidate ER	1		<b>Central Nervous System: Migraine</b>		
Guanfacine ER	1		<b>Aimovig</b>	2	PA, QL
<b>Jornay PM</b>	3	ST	<b>Ajovy</b>	2	PA, QL
Methylphenidate CD	1		Bac	1	
Methylphenidate ER	1		Butalbital/Acetaminophen/ Caffeine	1	
Methylphenidate LA	1		Eletriptan	1	QL
Methylphenidate OSM	1		<b>Emgality 100mg/mL</b>	2	PA, QL
Methylphenidate Tab	1		<b>Emgality 120mg/mL</b>	3	PA, QL
Methylphenidate XR	1		Naratriptan	1	QL
<b>Vyvanse</b>	3	ST	<b>Nurtec</b>	2	PA, QL
			<b>Qulipta</b>	2	PA, QL
			Rizatriptan	1	QL

**Bold type** = Brand name drug [Plain type = Generic drug]

**E** Excluded **PA** Prior Authorization **ST** Step Therapy **QL** Quantity Limits **SP** Specialty Program

DRUG NAME	DRUG TIER	PROGRAMS AND LIMITS
Sumatriptan Tab	1	QL
<b>Ubrelvy</b>	2	PA, QL
<b>Central Nervous System: Multiple Sclerosis</b>		
<b>Aubagio</b>	3	PA, QL, SP
<b>Avonex</b>	2	PA, QL, SP
<b>Bafiertam</b>	2	PA, QL, SP
<b>Betaseron</b>	2	PA, QL, SP
<b>Copaxone 20mg/mL</b>	3	PA, QL, SP
<b>Copaxone 40mg/mL</b>	2	PA, QL, SP
Dimethyl Fumarate	1	PA, QL, SP
Glatiramer Acetate	1	PA, QL, SP
Glatopa	1	PA, QL, SP
<b>Kesimpta</b>	2	PA, QL, SP
<b>Mavenclad</b>	3	PA, SP
<b>Mayzent</b>	3	PA, QL, SP
<b>Rebif</b>	3	PA, QL, SP
<b>Vumerity</b>	2	PA, QL, SP
<b>Zeposia</b>	3	PA, QL, SP
<b>Central Nervous System: Other</b>		
Alprazolam Tab	1	QL
Armodafinil	1	
<b>Austedo</b>	3	PA, QL, SP
<b>Austedo XR</b>	3	PA, QL, SP
Buspirone	1	
Diazepam Tab	1	
<b>Gralise</b>	3	PA, QL, ST
<b>Horizant</b>	3	PA, QL
Hydroxyzine HCL	1	
Hydroxyzine Pamoate	1	
Lithium	1	
Lithium ER	1	
Lorazepam Tab	1	
Modafinil	1	
<b>Radicava ORS</b>	2	PA, QL, SP

DRUG NAME	DRUG TIER	PROGRAMS AND LIMITS
<b>Sodium Oxybate</b> (Hikma manufacturer)	3	PA, QL, SP
<b>Sunosi</b>	2	PA, QL
<b>Tegsedi</b>	3	PA, SP
<b>Tiglutik</b>	2	PA, QL
<b>Wakix</b>	3	PA, QL, SP
<b>Xywav</b>	3	PA, QL, SP
<b>Central Nervous System: Parkinson's Disease</b>		
Benzotropine	1	
Carbidopa/Levodopa	1	
<b>Inbrija</b>	3	PA, SP
<b>Neupro</b>	3	
<b>Nourianz</b>	3	
<b>Ongentys</b>	3	QL, ST
Pramipexole	1	
Ropinirole	1	
<b>Rytary</b>	3	ST
<b>Central Nervous System: Sedatives/Hypnotics</b>		
<b>Belsomra</b>	3	QL, ST
<b>Dayvigo</b>	3	QL, ST
Eszopiclone	1	QL
Temazepam	1	
Triazolam	1	QL
Zolpidem	1	QL
Zolpidem ER	1	QL
<b>Central Nervous System: Seizure Disorders</b>		
<b>Aptiom</b>	3	
<b>Briviact</b>	3	ST
Clonazepam	1	QL
Divalproex DR	1	
Divalproex ER	1	
<b>Epidiolex</b>	3	PA, SP
<b>Fycompa</b>	3	
Gabapentin	1	

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Lacosamide	1		<b>Enstilar</b>	3	QL
Lamotrigine	1		<b>Epiduo Forte</b>	3	
Lamotrigine ER	1		<b>Eucrisa</b>	2	QL, ST
Levetiracetam	1		<b>Finacea Foam</b>	3	ST
<b>Nayzilam</b>	3	QL	Fluocinonide Solution	1	
Oxcarbazepine	1		Fluorouracil Cream 5%	1	
Pregabalin	1	QL	Hydrocortisone Cream, Ointment	1	
Primidone	1		<b>Hyftor</b>	3	PA
Roweepra	1		Imiquimod Cream	1	
Subvenite	1		Ketoconazole Cream, Shampoo	1	
<b>Sympazan</b>	3	PA	<b>Klisyri</b>	3	ST
<b>Topamax</b>	3	ST	Lidocaine/Prilocaine Cream	1	
<b>Topamax Sprinkle</b>	3	ST	Metronidazole Cream, Gel	1	
Topiramate	1		<b>Mirvaso</b>	3	
<b>Valtoco</b>	3	QL	Mometasone Cream	1	
<b>Xcopri</b>	3	ST	Mupirocin Ointment	1	
<b>Zonegran</b>	3	ST	Nystatin Cream, Ointment	1	
<b>Zonisamide</b>	1		<b>Onexton</b>	3	
<b>Dermatology</b>			<b>Opzelura</b>	2	QL, ST
Adapalene/Benzoyl Peroxide Gel	1		<b>Retin-A Micro 0.06%, 0.08%</b>	3	PA
<b>Aklief</b>	3	PA	<b>Rhofade</b>	3	PA
Ala-Cort Cream	1		<b>Santyl</b>	3	
<b>Amzeeq</b>	3		<b>Soolantra</b>	3	
Azelaic Acid Gel	1		<b>Taclonex Suspension</b>	3	QL
Betamethasone Cream	1		Tacrolimus Ointment	1	
Ciclopirox Solution	1		Tretinoin Cream	1	PA
Clindacin ETZ Swab	1		Triamcinolone Cream, Ointment	1	
Clindacin-P	1		Triamcinolone in Absorbase	1	
Clindamycin Gel, Lotion, Solution, Swab	1		Triderm	1	
Clindamycin/Benzoyl Peroxide Gel 1-5%, 1.2-2.5%	1		Tritocin	1	
Clobetasol Cream, Ointment, Solution	1		<b>Twyneo</b>	3	PA
Clotrimazole/ Betamethasone Cream	1		<b>Vtama</b>	3	PA
			<b>Winlevi</b>	3	PA
			<b>Wynzora</b>	3	PA, QL

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DRUG NAME	DRUG TIER	PROGRAMS AND LIMITS	DRUG NAME	DRUG TIER	PROGRAMS AND LIMITS
Xepi	3		<b>Guardian Link 3 Transmitter</b>	3	
Ximino	3		<b>Guardian Sensor 3</b>	3	
Zilxi	3	ST	<b>Novofine Autocover Pen Needles</b>	2	
Zoryve	3		<b>Novofine Pen Needles</b>	2	
<b>Diabetes/Endocrine Blood: Glucose Monitoring</b>			<b>Novofine Plus Pen Needles</b>	2	
<b>Accu-Chek FastClix Lancet Kit</b>	2		<b>Omnipod 5 G6 Intro (Gen 5)</b>	2	PA, QL
<b>Accu-Chek Softclix Lancet Device Kit</b>	2		<b>Omnipod 5 G6 Pod (Gen 5)</b>	2	PA, QL
<b>BD Ultra-Fine Insulin Syringes</b>	2		<b>Omnipod Classic Pods (Gen 3)</b>	2	PA, QL
<b>BD Ultra-Fine Pen Needles</b>	2		<b>Omnipod Dash Intro (Gen 4)</b>	2	PA, QL
<b>CeQur Simplicity 2U</b>	2		<b>Omnipod Dash Pods (Gen 4)</b>	2	PA, QL
<b>CeQur Simplicity Inserter</b>	2		<b>OneTouch Ultra In Vitro Strips</b>	2	
<b>Contour Next EZ Kit w/ Device</b>	2		<b>OneTouch Ultra 2 Kit w/ Device</b>	2	
<b>Contour Next Gen Monitor</b>	2		<b>OneTouch Verio Flex System</b>	2	
<b>Contour Next One Kit</b>	2		<b>OneTouch Verio Reflect Kit w/Device</b>	2	
<b>Contour Next Gen Test Strips</b>	2		<b>OneTouch Verio Test Strips</b>	2	
<b>Dexcom G6 Receiver, Sensor, Transmitter</b>	2		<b>V-Go 20</b>	2	PA, QL
<b>Dexcom G7 Receiver, Sensor</b>	2		<b>V-Go 30</b>	2	PA, QL
<b>Enlite Glucose Sensor</b>	3		<b>V-Go 40</b>	2	PA, QL
<b>Eversense E3 Sensor/Holder</b>	3		<b>Diabetes/Endocrine: Insulin</b>		
<b>Eversense E3 Smart Transmitter</b>	3		<b>Admelog</b>	1	
<b>Eversense Sensor/Holder</b>	3		<b>Admelog SoloStar</b>	1	
<b>Eversense Smart Transmitter</b>	3		<b>Apidra</b>	1	
<b>FreeStyle Libre 2 Reader, Sensor</b>	2		<b>Apidra SoloStar</b>	1	
<b>FreeStyle Libre 3 Sensor</b>	2		<b>Basaglar KwikPen</b>	1	
<b>FreeStyle Libre 14 Day Reader, Sensor</b>	2		<b>Basaglar Tempo</b>	3	ST
<b>Guardian 4 Glucose Sensor</b>	3		<b>Fiasp</b>	1	
<b>Guardian 4 Transmitter</b>	3		<b>Fiasp FlexTouch</b>	1	
<b>Guardian Connect Transmitter</b>	3		<b>Fiasp Penfill</b>	1	
			<b>Humalog Mix 50/50 Vials and KwikPen</b>	1	
			<b>Humalog Mix 75/25 Vials and KwikPen</b>	1	
			<b>Humalog Tempo</b>	3	ST

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<b>Humalog U-100 Junior KwikPen</b>	1		<b>Novolin 70/30 Vials and FlexPen</b>	1	
<b>Humalog Vials and KwikPen</b>	1		<b>Novolin N FlexPen Relion</b>	1	
<b>Humulin 70/30 Vials and KwikPen</b>	1		<b>Novolin N Vials and FlexPen</b>	1	
<b>Humulin N Vials and KwikPen</b>	1		<b>Novolin R FlexPen Relion</b>	1	
<b>Humulin R U-500 Vials and KwikPen</b>	1		<b>Novolin R Vials and FlexPen</b>	1	
<b>Humulin R Vials</b>	1		<b>Novolog FlexPen</b>	1	
<b>Insulin Aspart (Novolog ABA)</b>	E		<b>Novolog Mix 70/30 Vials and FlexPen</b>	1	
<b>Insulin Aspart Flexpen (Novolog FlexPen ABA)</b>	E		<b>Novolog Penfill</b>	1	
<b>Insulin Aspart Mix 70/30 (Novolog Mix 70/30 ABA)</b>	E		<b>Novolog Relion Mix 70/30 Vials and FlexPen</b>	E	
<b>Insulin Aspart Mix 70/30 FlexPen (Novolog Mix 70/30 FlexPen ABA)</b>	E		<b>Novolog Relion Vials and FlexPen</b>	E	
<b>Insulin Aspart Penfill (Novolog Penfill ABA)</b>	E		<b>Novolog U-100 Vials</b>	1	
<b>Insulin Degludec (Tresiba ABA)</b>	E		<b>Rezvoglar KwikPen</b>	1	
<b>Insulin Degludec FlexTouch (Tresiba FlexTouch ABA)</b>	E		<b>Soliqua</b>	2	QL, ST
<b>Insulin Glargine (Lantus ABA)</b>	E		<b>Toujeo Max SoloStar</b>	1	
<b>Insulin Glargine Solostar (Lantus SoloStar ABA)</b>	E		<b>Toujeo SoloStar</b>	1	
<b>Insulin Lispro</b>	1		<b>Tresiba</b>	1	
<b>Insulin Lispro Junior KwikPen</b>	1		<b>Tresiba FlexTouch</b>	1	
<b>Insulin Lispro KwikPen</b>	1		<b>Diabetes/Endocrine: Non-Insulin</b>		
<b>Insulin Lispro Mix 75/25 KwikPen</b>	1		<b>Baqsimi</b>	2	
<b>Lantus Solostar</b>	1		<b>Bydureon BCise</b>	2	PA, QL
<b>Lantus U-100 Vials</b>	1		<b>Byetta</b>	2	PA, QL
<b>Levemir U-100 Vials and FlexPen</b>	1		<b>Farxiga</b>	2	
<b>Lyumjev Vials and KwikPen</b>	1		Glimepiride	1	
<b>Novolin 70/30 FlexPen Relion</b>	1		Glipizide	1	
			Glipizide ER	1	
			Glipizide XL	1	
			<b>Glucagon Emergency Kit (Fresenius manufacturer)</b>	2	
			Glyburide	1	
			<b>Glyxambi</b>	2	
			<b>Janumet</b>	2	ST
			<b>Janumet XR</b>	2	ST
			<b>Januvia</b>	2	ST



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<b>Jardiance</b>	2		Methylprednisolone Tab	1	
<b>Jentaduetto</b>	2	ST	<b>Osphena</b>	3	
<b>Jentaduetto XR</b>	2	ST	Prednisone	1	
Metformin	1		Prednisolone	1	
Metformin ER	1		Prednisolone Sodium Phosphate Solution	1	
Metformin ER Modified Release (generic <b>Glumetza</b> )	1	PA	<b>Somatuline Depot</b>	3	PA, SP
Metformin ER Osmotic (generic <b>Fortamet</b> )	1		<b>Supprelin LA</b>	2	PA, QL, SP
<b>Mounjaro</b>	2	PA, QL	<b>Triptodur</b>	3	PA, QL, SP
<b>Ozempic</b>	2	PA, QL	<b>Endocrine: Thyroid Hormone Replacement</b>		
Pioglitazone	1		<b>Adthyza</b>	3	
<b>Rybelsus</b>	2	PA, QL	<b>Armour Thyroid</b>	3	ST
<b>SymlinPen</b>	3		<b>Ermeza</b>	3	ST
<b>Synjardy</b>	2		Euthyrox	1	
<b>Synjardy XR</b>	2		Levo-T	1	
<b>Tradjenta</b>	2	ST	<b>Levothyroxine Cap (Tirosint ABA)</b>	3	ST
<b>Trijardy XR</b>	2		Levothyroxine Tab	1	
<b>Trulicity</b>	2	PA, QL	Levoxyl	1	
<b>Victoza</b>	2	PA, QL	Liothyronine	1	
<b>Xigduo XR</b>	2		Methimazole	1	
<b>Zegalogue</b>	2		NP Thyroid	1	
<b>Endocrine: Growth Hormone</b>			<b>Synthroid</b>	3	ST
<b>Norditropin FlexPro</b>	2	PA, SP	<b>Tirosint</b>	3	ST
<b>Nutropin AQ NuSpin</b>	2	PA, SP	<b>Tirosint-Sol</b>	3	ST
<b>Endocrine: Other</b>			Unithroid	1	
<b>Acthar</b>	2	PA, SP	<b>Eye Conditions: Antibiotics</b>		
Cabergoline	1		<b>Azasite</b>	3	
Calcitriol Cap	1		<b>Besivance</b>	3	
<b>Cortrophin</b>	2	PA, SP	Ciprofloxacin Ophthalmic	1	
Dexamethasone Tab	1		Erythromycin Ophthalmic	1	
Fludrocortisone Acetate Tab	1		Gentamicin Ophthalmic	1	
<b>Hemady</b>	3		Moxifloxacin Ophthalmic	1	
Hydrocortisone Tab	1		Ofloxacin Ophthalmic	1	
<b>Lupron Depot 7.5mg, 22.5mg, 30mg, 45mg</b>	2	PA, SP	Polymyxin B/Trimethoprim Ophthalmic	1	

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<b>Tobradex ST</b>	3		<b>Prolensa</b>	2	QL
Tobramycin Ophthalmic	1		<b>Restasis</b>	2	PA
Tobramycin/Dexamethasone Ophthalmic	1		<b>Restasis Multidose</b>	2	PA
<b>Zylet</b>	3		<b>Tyrvaya</b>	3	PA, QL
<b>Eye Conditions: Glaucoma</b>			<b>Verkazia</b>	3	PA, QL
<b>Alphagan P</b>	2		<b>Xiidra</b>	2	PA
<b>Betimol</b>	3		<b>Gastrointestinal: Acid Suppression</b>		
Brimonidine Ophthalmic	1		Dexlansoprazole	1	QL
Dorzolamide/Timolol Ophthalmic	1		Esomeprazole Magnesium (Rx only)	1	QL
Dorzolamide/Timolol Ophthalmic PF	1		Famotidine (Rx only)	1	
Latanoprost Ophthalmic	1	QL	Lansoprazole (Rx only)	1	QL
<b>Lumigan</b>	2	QL	Misoprostol	1	
<b>Rhopressa</b>	3		Omeprazole (Rx only)	1	QL
<b>Rocklatan</b>	3	QL	Pantoprazole	1	QL
<b>Simbrinza</b>	2		Rabeprazole	1	QL
Timolol Maleate Ophthalmic (Once-Daily)	1		Sucralfate Tab	1	
Timolol Maleate Ocular	1		<b>Gastrointestinal: Inflammatory Bowel Disease</b>		
Timolol Maleate Ophthalmic PF	1		<b>Apriso</b>	2	
<b>Zioptan</b>	3	QL	<b>Cortifoam</b>	3	
<b>Eye Conditions: Other</b>			<b>Dipentum</b>	3	
<b>Cimerli</b>	2	PA, SP	Hydrocortisone (Perianal)	1	
Cyclosporine Ophthalmic	1	PA	<b>Lialda</b>	3	ST
<b>Eysuvis</b>	3	PA, QL	Mesalamine DR	1	
<b>Flarex</b>	3		Mesalamine ER 0.375gm	1	
<b>Inveltys</b>	3		<b>Proctofoam-HC</b>	2	
Ketorolac Ophthalmic	1		Procto-Med HC	1	
<b>Lotemax SM</b>	3		Proctosol HC	1	
Neomycin/Polymyxin/Dexamethasone Ophthalmic Ointment, Suspension	1		Proctozone-HC	1	
Olopatadine Ophthalmic	1		Sulfasalazine	1	
<b>Pred Mild</b>	3		<b>Uceris Rectal</b>	3	
			<b>Gastrointestinal: Nausea/Vomiting</b>		
			Meclizine	1	
			Metoclopramide	1	
			Ondansetron ODT	1	

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Ondansetron Tab	1		Colchicine Tab	1	
Prochlorperazine	1		<b>HIV/AIDS</b>		
<b>Sancuso</b>	3	QL	<b>Biktarvy</b>	3	
Scopolamine	1		<b>Cimduo</b>	2	
<b>Varubi</b>	3	QL	<b>Descovy</b>	3	
<b>Gastrointestinal: Other</b>			<b>Dovato</b>	2	
<b>Clenpiq</b>	3		Emtricitabine/Tenofovir Disoproxil Fumarate	1	
Constulose	1		<b>Juluca</b>	2	
<b>Creon</b>	2		<b>Prezcobix</b>	2	
Dicyclomine	1		<b>Symfi</b>	2	
Diphenoxylate/Atropine	1		<b>Symfi Lo</b>	2	
Gavilyte-C	1		<b>Symtuza</b>	3	
Gavilyte-G	1		<b>Triumeq</b>	2	
Glycopyrrolate Tab 1mg, 2mg	1		<b>Infertility</b>		
Hyoscyamine Sulfate SL	1		<b>Follistim AQ</b>	2	PA, SP
Lactulose	1		Ganirelix (Organon/Merck manufacturer)	1	SP
<b>Linzess</b>	2	QL, ST	<b>Ovidrel</b>	3	SP
<b>Motegrity</b>	3	QL, ST	<b>Inflammatory Conditions</b>		
<b>Movantik</b>	2	QL, ST	<b>Actemra<sup>+</sup></b>	3	PA, QL, SP
Na Sulfate-K Sulfate-Mg Sulfate	1		<b>Adalimumab-adaz</b>	2	PA, QL, SP
<b>Omeclamox-Pak</b>	2		<b>Amjevita</b>	2	PA, QL, SP
<b>Pancreaze</b>	3	ST	<b>Avsola</b>	2	PA, SP
PEG 3350-KCl-Na Bicarb-NaCl	1		<b>Cimzia</b>	2	PA, QL, SP
PEG-3350/Electrolytes	1		<b>Cosentyx</b>	3	PA, QL, SP
<b>Pertzye</b>	3	ST	<b>Cyltezo</b>	2	PA, QL, SP
<b>Suprep Bowel Prep</b>	3		<b>Enbrel</b>	2	PA, QL, SP
<b>Sutab</b>	3		<b>Humira</b>	2	PA, QL, SP
<b>Symproic</b>	2	QL, ST	Hydroxychloroquine	1	
<b>Talicia</b>	3		<b>Hyrmoz</b>	2	PA, QL, SP
<b>Trulance</b>	3	QL, ST	<b>Inflectra</b>	2	PA, SP
<b>Viberzi</b>	3	PA, QL	Leflunomide	1	
<b>Zenpep</b>	2		Methotrexate	1	
<b>Gout</b>			Methotrexate Sodium	1	
Allopurinol 100mg, 300mg	1		<b>Olumiant</b>	3	PA, QL, SP

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<b>Orencia<sup>+</sup></b>	3	PA, QL, SP	<b>Benlysta</b>	3	PA, SP
<b>Otezla</b>	2	PA, QL, SP	Benzonatate	1	
<b>Rasuvo</b>	2	PA, QL	<b>Botox</b> (non-cosmetic)	2	PA
<b>RediTrex</b>	3	PA, QL	<b>Bronchitol</b>	3	PA, QL
<b>Rinvoq</b>	2	PA, QL, SP	<b>Cerdelga</b>	3	PA, SP
<b>Simponi</b>	2	PA, QL, SP	Chlorhexidine Gluconate Mouth/Throat	1	
<b>Simponi Aria</b>	2	PA, SP	<b>Cibinqo</b>	2	PA, QL, SP
<b>Skyrizi</b>	2	PA, QL, SP	<b>Depen Titratabs</b>	2	SP
<b>Stelara</b>	2	PA, QL, SP	Desmopressin Acetate Tab	1	
<b>Taltz<sup>+</sup></b>	3	PA, QL, SP	<b>Dupixent</b>	2	PA, QL, SP
<b>Tremfya</b>	2	PA, QL, SP	<b>Dysport</b>	2	PA
<b>Trexall</b>	3		<b>Emverm</b>	2	
<b>Xeljanz</b>	2	PA, QL, SP	<b>Endari</b>	3	PA
<b>Xeljanz XR</b>	2	PA, QL, SP	Epinephrine Auto-Injector	1	
+Tier 3 Preferred			<b>Epipen</b>	3	ST
<b>Men's Health: Erectile Dysfunction</b>			<b>Epipen Jr</b>	3	ST
Sildenafil 25mg, 50mg, 100mg	1	QL	<b>Fabrazyme</b>	2	PA, SP
<b>Stendra</b>	3	QL	<b>Fasenra</b>	2	PA, SP
Tadalafil	1	QL	<b>Fasenra Pen</b>	2	PA, SP
<b>Men's Health: Prostate</b>			<b>Haegarda</b>	3	PA, SP
Alfuzosin ER	1		<b>Hemangeol</b>	3	
Dutasteride	1		<b>Hizentra</b>	3	PA, SP
Finasteride 5mg	1		<b>Ingrezza</b>	3	PA, QL, SP
Tamsulosin	1		<b>Kerendia</b>	3	PA, QL
<b>Men's Health: Testosterone Therapy</b>			Lidocaine Mouth/Throat	1	
<b>Androderm</b>	2	PA	Lidocaine Viscous	1	
Testosterone Cypionate IM Injection	1		<b>Lupkynis</b>	3	PA, QL, SP
Testosterone Gel	1		<b>Myobloc</b>	2	PA
<b>Xyosted</b>	3	PA	<b>Nityr</b>	3	PA, SP
<b>Miscellaneous</b>			<b>Nocdurna</b>	3	
<b>Adbry</b>	2	PA, QL, SP	<b>Nucala</b>	2	PA, QL, SP
<b>Addyi</b>	3	PA, QL	<b>Ofev</b>	3	PA, SP
<b>Arakoda</b>	3		<b>Orfadin</b>	3	PA, SP
<b>Auvi-Q 0.1mg</b>	3		<b>Oriahnn</b>	2	PA, QL
			<b>Orilissa</b>	2	PA, QL

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DRUG NAME	DRUG TIER	PROGRAMS AND LIMITS	DRUG NAME	DRUG TIER	PROGRAMS AND LIMITS
<b>Orladeyo</b>	3	PA, QL, SP	Carisoprodol	1	
PerioGard	1		Cyclobenzaprine Tab	1	
Phenazo 200mg Tab	1		<b>Lorzone</b>	3	
Phenazopyridine (Rx only)	1		Methocarbamol	1	
Promethazine	1		Tizanidine Tab	1	
Promethazine DM	1		<b>Musculoskeletal: Pain Relief</b>		
Pseudoephedrine/Brompheniramine/DM	1		Acetaminophen w/ Codeine	1	QL
<b>Pulmozyme</b>	2	PA, SP	Acetaminophen/Caffeine/Dihydrocodeine	1	QL
<b>Qbrexza</b>	3	QL	<b>Belbuca</b>	2	PA, QL
<b>Rayaldee</b>	3	PA	Celecoxib	1	QL
<b>Ruconest</b>	3	PA, SP	Diclofenac Gel 1%	1	QL
<b>Strensiq</b>	2	PA, SP	Diclofenac Potassium Tab	1	
<b>Symjepi</b>	3		Diclofenac Sodium Tab	1	
<b>Takhzyro</b>	3	PA, SP	<b>Elyxyb</b>	3	PA, QL
<b>Thiola</b>	3	SP	Endocet	1	
<b>Thiola EC</b>	3	SP	Etodolac	1	
<b>Trikafta</b>	3	PA, QL, SP	Fentanyl Patch	1	PA, QL
<b>Velphoro</b>	3		Hydrocodone/Acetaminophen	1	QL
<b>Vyleesi</b>	3	PA, QL	Hydromorphone Tab	1	QL
<b>Xembify</b>	3	PA, SP	<b>Hysingla ER</b>	2	PA, QL
<b>Xhance</b>	3	QL, ST	Ibuprofen Suspension 100mg/5mL	1	
<b>Xeomin</b>	2	PA	Ibuprofen Tab (Rx only)	1	
<b>Zolgensma</b>	3	SP	Indomethacin Cap	1	
<b>Musculoskeletal: Osteoarthritis</b>			Ketorolac Tab	1	QL
<b>Durolane</b>	2	PA	Lidocaine Patch	1	
<b>Euflexxa</b>	2	PA	Meloxicam	1	
<b>Gelsyn-3</b>	2	PA	Morphine Sulfate ER	1	PA, QL
<b>Musculoskeletal: Osteoporosis</b>			Nabumetone	1	
Alendronate Tab	1	QL	Naproxen (Rx only)	1	
Ibandronate	1	QL	<b>Nucynta</b>	3	QL
<b>Teriparatide (Recombinant)</b>	2	PA, QL, SP	Oxycodone w/ Acetaminophen	1	QL
<b>Tymlos</b>	2	PA, SP	Oxycodone Tab	1	QL
<b>Musculoskeletal: Other</b>			<b>Oxycontin</b>	2	PA, QL
Baclofen Tab	1				

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<b>Roxybond</b>	3	QL	<b>Fluticasone/Salmeterol (Advair HFA ABA)</b>	E	
Tramadol	1	QL	Ipratropium/Albuterol	1	QL
<b>Trezix</b>	3	QL	Montelukast	1	
<b>Xtampza ER</b>	2	PA, QL	<b>Perforomist</b>	3	QL
<b>ZTlido</b>	3	ST	<b>Pulmicort Flexhaler</b>	3	QL, ST
<b>Overactive Bladder</b>			<b>Qvar Redihaler</b>	2	QL
<b>Myrbetriq</b>	2		<b>Serevent Diskus</b>	2	QL
Oxybutynin	1		<b>Spiriva Handihaler</b>	2	QL
Oxybutynin ER	1		<b>Spiriva Respimat</b>	2	QL
Solifenacin	1		<b>Stiolto Respimat</b>	2	QL
Tolterodine ER	1		<b>Striverdi Respimat</b>	2	QL
<b>Respiratory: Asthma/COPD</b>			<b>Symbicort</b>	3	QL, ST
<b>Advair Diskus</b>	3	QL, ST	<b>Tezspire</b>	2	PA, QL, SP
<b>Advair HFA</b>	1	QL	<b>Trelegy Ellipta</b>	2	QL
Albuterol HFA	1	QL	<b>Ventolin HFA</b>	3	QL, ST
<b>Albuterol HFA (Ventolin HFA ABA)</b>	E		Wixela Inhub	1	QL, ST
Albuterol Inhalation Solution	1	QL	<b>Xolair</b>	2	PA, SP
<b>Alvesco</b>	3	QL, ST	<b>Yupelri</b>	3	QL
<b>Anoro Ellipta</b>	2	QL	<b>Respiratory: Nasal Allergies</b>		
<b>Arnuity Ellipta</b>	2	QL	Azelastine Nasal Spray	1	QL
<b>Atrovent HFA</b>	3	QL	Azelastine/Fluticasone Nasal Spray	1	QL
<b>Breo Ellipta</b>	1	QL	<b>Dymista</b>	2	QL
Breyna	1		Fluticasone Propionate Nasal Spray (Rx only)	1	
<b>Breztri Aerosphere</b>	2	QL	Ipratropium Nasal Spray	1	
Budesonide Inhalation Suspension	1	QL	Mometasone Nasal Spray	1	QL
Budesonide/Formoterol	1		<b>Omnamis</b>	3	QL
<b>Combivent Respimat</b>	2	QL	<b>QNasi</b>	3	QL
<b>Flovent HFA</b>	3	QL, ST	<b>QNasi Childrens</b>	3	QL
<b>Fluticasone Furoate/Vilanterol (Breo Ellipta ABA)</b>	E		<b>Ryaltris</b>	3	
<b>Fluticasone Propionate HFA (Flovent HFA ABA)</b>	E		<b>Zetonna</b>	3	QL
Fluticasone/Salmeterol 100/50, 250/50, 500/50	1	ST	<b>Respiratory: Oral Allergies</b>		
			Cetirizine Solution (Rx only)	1	
			Cyproheptadine Tab	1	

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Levocetirizine Tab (Rx only)	1		<b>Annovera</b>	3	
<b>Transplant</b>			Apri	1	
Azathioprine Tab	1		Ashlyna	1	
Cyclosporine Modified Cap	1		Aubra EQ	1	
<b>Envarsus XR</b>	3		Aurovela 1/20	1	
Gengraf	1		Aurovela 1.5/30	1	
Mycophenolate Mofetil	1		Aurovela 24 Fe	1	
Mycophenolate Sodium	1		Aurovela Fe 1/20	1	
Sirolimus Tab	1		Aurovela Fe 1.5/30	1	
Tacrolimus Cap	1		Aviane	1	
<b>Vitamins/Electrolytes</b>			Ayuna	1	
<b>Accrufer</b>	3	QL, ST	<b>Balcoltra</b>	3	
Cyanocobalamin Injection 1000 mcg/mL	1		Balziva	1	
Folic Acid 1mg Tab	1		Blisovi 24 Fe	1	
Klor-Con 10	1		Blisovi Fe 1/20	1	
Klor-Con Extended Release	1		Blisovi Fe 1.5/30	1	
Klor-Con m10, m15, m20	1		Briellyn	1	
<b>Lokelma</b>	3		Camila	1	
<b>Nascobal</b>	3		Camrese	1	
Potassium Chloride Crys ER	1		Camrese Lo	1	
Potassium Chloride ER	1		Chateal EQ	1	
Potassium Citrate ER	1		Cryselles-28	1	
<b>Veltassa</b>	3		Cyred EQ	1	
Vitamin D (ergocalciferol) (Rx only)	1		Dasetta 1/35	1	
<b>Weight Loss Management</b>			Daysee	1	
Phentermine	1	PA	Deblitane	1	
<b>Qsymia</b>	3	PA	Delyla	1	
<b>Saxenda</b>	3	PA	Drospirenone/Ethinyl Estradiol	1	
<b>Wegovy</b>	3	PA	Elinest	1	
<b>Women's Health: Birth Control</b>			Eluryng	1	
Afirmelle	1		Enskyce	1	
Altavera	1		Errin	1	
Alyacen 1/35	1		Estarylla	1	
Amethia	1		Estradiol/Norethindrone Acetate	1	
			Etonogestrel/Ethinyl Estradiol	1	

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Falmina	1		Levora-28 0.15/30	1	
Fayosim	1		<b>Lo Loestrin Fe</b>	3	
Hailey 1.5/30	1		Lojaimiess	1	
Hailey 24 Fe	1		Loryna	1	
Hailey Fe 1/20	1		Low-Ogestrel	1	
Hailey Fe 1.5/30	1		Lo-Zumandimine	1	
Haloette	1		Lutera	1	
Heather	1		Lyleq	1	
Iclevia	1		Lyza	1	
Incassia	1		Marlissa	1	
Introvale	1		Medroxyprogesterone Acetate IM Injection	1	QL
Isibloom	1		Microgestin 1/20	1	
Jaimiess	1		Microgestin 1.5/30	1	
Jasmiel	1		Microgestin 24 Fe	1	
Jencycla	1		Microgestin Fe 1/20	1	
Jolessa	1		Microgestin Fe 1.5/30	1	
Juleber	1		Mili	1	
Junel 1/20	1		<b>Mirena</b>	3	
Junel 1.5/30	1		Mono-Linyah	1	
Junel Fe 1/20	1		<b>Natazia</b>	2	
Junel Fe 1.5/30	1		Necon 0.5/35-28	1	
Junel Fe 24	1		<b>Nextstellis</b>	3	
Kalliga	1		Nikki	1	
Kurvelo	1		Nora-BE	1	
Larin 1/20	1		Norethindrone	1	
Larin 1.5/30	1		Norethindrone Acetate	1	
Larin 24 Fe	1		Norethindrone Acetate/Ethinyl Estradiol	1	
Larin Fe 1/20	1		Norethindrone Acetate/Ethinyl Estradiol/Fe	1	
Larin Fe 1.5/30	1		Norgestimate/Ethinyl Estradiol	1	
Lessina	1		Norgestimate/Ethinyl Estradiol Triphasic	1	
Levonorgestrel/Ethinyl Estradiol	1		Norlyroc	1	
Levonorgestrel/Ethinyl Estradiol 91-day	1		Nortrel 0.5/35 (28)	1	
Levonorgestrel/Ethinyl Estradiol and Ethinyl Estradiol	1		Nortrel 1/35 (21)	1	



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DRUG NAME	DRUG TIER	PROGRAMS AND LIMITS	DRUG NAME	DRUG TIER	PROGRAMS AND LIMITS
Nortrel 1/35 (28)	1		Xulane	1	
Nylia 1/35	1		Zafemy	1	
Nymyo	1		Zumandimine	1	
Ocella	1		<b>Women's Health: Hormone Replacement</b>		
Philith	1		Amabelz	1	
Pirmella 1/35	1		<b>Bijuva</b>	3	
Portia-28	1		<b>Climara Pro</b>	2	
Reclipsen	1		<b>Divigel</b>	3	
Rivelsa	1		Dotti	1	
Setlakin	1		<b>Duavee</b>	2	
Sharobel	1		<b>Elestrin</b>	3	
Simpesse	1		<b>Endometrin</b>	2	
<b>Slynd</b>	3	ST	Estradiol Patch, Tab, Vaginal Cream	1	
Sprintec 28	1		<b>EstroGel</b>	3	
Sronyx	1		<b>Evamist</b>	3	
Syeda	1		<b>Imvexxy</b>	2	
Tarina 24 Fe	1		Lyllana	1	
Tarina Fe 1/20 EQ	1		Medroxyprogesterone Acetate Tab	1	
Tri-Estarylla	1		Mimvey	1	
Tri-Linyah	1		<b>Myfembree</b>	2	PA, QL
Tri-Lo-Estarylla	1		<b>Premarin Tab</b>	2	
Tri-Lo-Marzia	1		<b>Premarin Vaginal Cream</b>	2	
Tri-Lo-Mili	1		<b>Premphase</b>	2	
Tri-Lo-Sprintec	1		<b>Prempro</b>	2	
Tri-Mili	1		Progesterone Cap	1	
Tri-Nymyo	1		Yuvaferm	1	
Tri-Sprintec	1		<b>Women's Health: Vaginal Anti-Infectives</b>		
Tri-Vylibra	1		<b>Clindesse</b>	3	
Tri-Vylibra Lo	1		<b>Gynazole-1</b>	3	
Vestura	1		Metronidazole Vaginal Gel	1	
Vienva	1		Terconazole Vaginal Cream	1	
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 Wilate, 9  
 Winlevi, 14  
 Wixela Inhub, 22  
 Wyzora, 14

## X

Xarelto, 10  
 Xcopri, 14  
 Xeljanz, 20  
 Xeljanz XR, 20  
 Xembify, 21  
 Xenleta, 8  
 Xeomin, 21  
 Xepi, 15

Xhance, 21  
 Xigduo XR, 17  
 Xiidra, 18  
 Ximino, 15  
 Xofluzo, 9  
 Xolair, 22  
 Xtampza ER, 22  
 Xtandi, 10  
 Xulane, 25  
 Xyntha, 9  
 Xyntha Solofuse, 9  
 Xyosted, 20  
 Xywav, 13

## Y

Yupelri, 22  
 Yuvafem, 25

## Z

Zafemy, 25  
 Zarxio, 9

Zegalogue, 17  
 Zejula, 10  
 Zelboraf, 10  
 Zenatane, 8  
 Zenpep, 19  
 Zeposia, 13  
 Zetonna, 22  
 Zilxi, 15  
 Zimhi, 8  
 Zioptan, 18  
 Ziprasidone, 12  
 Zirabev, 10  
 Zolgensma, 21  
 Zolpidem, 13  
 Zolpidem ER, 13  
 Zonegran, 14  
 Zonisamide, 14  
 Zoryve, 15  
 ZTIido, 22  
 Zubsolv, 8  
 Zumandimine, 25  
 Zylet, 18

## “My Medications” worksheet

Take this worksheet with you each time you visit a doctor. Each of your doctors should be aware of every drug you take and you should have a list as well.

NAME OF MEDICINE AND STRENGTH	DRUG TIER	I TAKE THIS MEDICINE FOR	DIRECTIONS	DOCTOR
Example: Lisinopril, 20 mg	Tier 1	High blood pressure	One tablet daily	Dr. Johnson





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