



Effective July 1, 2025

Your Prescription Drug List

Serve You Rx Biosimilar Advantage 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 devices, and not all medications and devices 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.

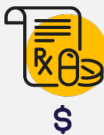
HOW DO I USE MY PRESCRIPTION DRUG LIST?

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
	Tier 1 Lowest Cost	Lower-cost, commonly used generic drugs	Use Tier 1 drugs for the lowest out-of-pocket costs.
	Tier 2 Mid-Range Cost	Many common brand-name drugs, called preferred brands	Use Tier 2 drugs, instead of Tier 3, to help reduce your out-of-pocket costs.
	Tier 3 Highest Cost	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.

PA	Prior Authorization — Your doctor is required to provide additional information to determine coverage.
ST	Step Therapy — 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.
QL	Quantity Limits — 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.
SP	Specialty Medication — Medication is designated as a specialty pharmacy drug.
E	Excluded — May be excluded from coverage or subject to prior authorization. Lower-cost options are available and covered. Authorized Brand Alternatives (ABAs) are excluded.

To learn more about a Serve You Rx Clinical Pharmacy Program, or to find out if it applies to you, please visit ServeYouRx.com or call customer service at 800-759-3203.

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.serveyou.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.

Bolero 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.

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. You can also use our member portal to: Perform drug cost comparisons;

- View your medication history;
- Locate in-plan, out-of-plan, and 24-hour pharmacies near you;
- 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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DRUG NAME	DRUG TIER	PROGRAMS AND LIMITS
Acne/Rosacea		
Absorica	E	
Absorica LD	3	PA
Accutane	1	
Amnesteem	1	
Claravis	1	
Isotretinoin	1	
Oracea	E	
Seysara	3	ST
Zenatane	1	
Addiction/Substance Abuse		
Brixadi	3	SP
Buprenorphine SL	1	QL
Buprenorphine/Naloxone	1	QL
Kloxxado	2	
Naloxone Nasal Spray	1	
Naltrexone Tab	1	
Opvee	2	
Rextovy	2	
Suboxone	E	
Sublocade	3	SP
Varenicline	1	
Vivitrol	3	SP
Zimhi	3	
Zubsolv	2	QL
Anti-Infectives: Antibiotics		
Amoxicillin	1	

DRUG NAME	DRUG TIER	PROGRAMS AND LIMITS
Amoxicillin/Clavulanate	1	
Azithromycin	1	
Bethkis	E	SP
Cayston	E	SP
Cefadroxil	1	
Cefdinir	1	
Cefpodoxime	1	
Cefuroxime	1	
Cephalexin	1	
Ciprofloxacin/Dexamethasone Otic	1	
Ciprofloxacin Tab	1	
Clarithromycin Tab	1	
Cleocin Vaginal Cream, Suppository	E	
Clindamycin Cap	1	
Clindamycin Vaginal Cream	1	
Difcid	3	
Doryx MPC	E	
Doxycycline Hyclate	1	
Doxycycline Hyclate DR Tab 80mg	E	
Doxycycline Monohydrate	1	
Kitabis	E	SP
Levofloxacin Tab	1	
Likmez	E	
Metronidazole Tab	1	
Minocycline Cap	1	

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

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

Not all medications and devices 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.

DRUG NAME	DRUG TIER	PROGRAMS AND LIMITS
Neomycin/Polymyxin/ HC Otic	1	
Nitrofurantoin Macrocrystals	1	
Nitrofurantoin Monohydrate Macrocrystals	1	
Nitrofurantoin Suspension 50mg/mL	E	
Nuessa	E	
Nuzyra	3	PA
Ofloxacin Otic	1	
Penicillin VK	1	
Sulfamethoxazole/Trimethoprim	1	
Sulfatrim Pediatric	1	
Targadox	E	
TOBI Nebulizer	E	SP
TOBI Podhaler	3	QL, SP
Tobramycin Nebulization Solution 300mg/5mL (Kitabis ABA)	E	SP
Anti-Infectives: Antifungals		
Brexafemme	E	
Ciclodan	1	
Clotrimazole Cream	1	
Clotrimazole Lozenge	1	
Cresemba	3	
Fluconazole	1	
Jublia	E	
Nyamyc	1	
Nystatin Mouth/Throat	1	
Nystop	1	

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DRUG NAME	DRUG TIER	PROGRAMS AND LIMITS
Terbinafine Tab	1	QL
Tolsura	E	
Vivjoa	E	
Anti-Infectives: Antivirals		
Acyclovir Cap, Tab	1	
Baraclude Tab	E	
Epclusa	2	PA, QL, SP
Harvoni	2	PA, QL, SP
Ledipasvir/Sofosbuvir (Harvoni ABA)	E	SP
Mavyret	2	PA, QL, SP
Oseltamivir Phosphate Cap	1	
Paxlovid	2	QL
Sofosbuvir/Velpatasvir (Epclusa ABA)	E	SP
Tamiflu	E	
Valacyclovir	1	QL
Valtrex	E	
Vemlidy	E	
Vosevi	2	PA, QL, SP
Xofluza	3	QL
Blood Disorders		
Advate	2	SP
Adynovate	3	SP
Afstyla	3	SP
Alprolix	3	SP
Altuviiio	3	SP
Aranesp	2	PA, SP

DRUG NAME	DRUG TIER	PROGRAMS AND LIMITS
Doptelet	3	PA, SP
Eloctate	3	SP
Empaveli	3	PA, SP
Epogen	E	SP
Esperoct	3	SP
Fabhalta	3	PA, QL, SP
Fulphila	E	SP
Fynetra	E	SP
Granix	E	SP
Idelvion	3	SP
Javygtor	E	SP
Jesduvroq	E	
Jivi	3	SP
Koate	2	SP
Kogenate FS	2	SP
Kovaltry	2	SP
Neulasta	3	PA, SP
Neulasta Onpro	3	PA, SP
Neupogen	E	SP
Nivestym	2	PA, SP
Novoeight	2	SP
Nuwiq	2	SP
Nyvepria	E	SP
Palynziq	E	SP
PiaSky	E	SP
Procrit	2	PA, SP
Promacta	3	PA, SP
Rebinyn	3	SP

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DRUG NAME	DRUG TIER	PROGRAMS AND LIMITS
Recombinate	2	SP
Releuko	E	SP
Retacrit	2	PA, SP
Rolvedon	E	SP
Sevenfact	E	SP
Soliris	3	PA, SP
Stimufend	E	SP
Tavalisse	3	PA, SP
Tranexamic Acid Tab	1	
Udenyca	3	PA, SP
Udenyca On-Body	3	PA, QL, SP
Ultomiris	3	PA, SP
Voydeya	3	PA, QL, SP
Wilate	2	SP
Xyntha	2	SP
Xyntha Solofuse	2	SP
Zarxio	2	PA, SP
Ziextenzo	E	SP
Cancer		
Abiraterone	1	PA, SP
Afinitor	E	SP
Afinitor Disperz	E	SP
Akeega	E	SP
Alecensa	2	PA, SP
Alunbrig	2	PA, QL, SP
Almysys	3	PA, SP
Anastrozole Tab	1	

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DRUG NAME	DRUG TIER	PROGRAMS AND LIMITS
Anktiva	3	PA, SP
Avastin	E	SP
Arimidex	E	
Augtyro	3	PA, QL, SP
Belrapzo	E	SP
Bendamustine (Apotex, Baxter manufacturer)	E	SP
Cabometyx	2	PA, SP
Calquence	3	PA, SP
Capecitabine	1	SP
Cosela	E	SP
Cotellic	3	PA, SP
Darzalex Faspro	E	SP
Erivedge	3	PA, SP
Erleada	3	PA, SP
Fotivda	E	SP
Gavreto	3	PA, SP
Gleevec	E	SP
Herceptin	E	SP
Herzuma	3	PA, SP
Iclusig	3	PA, QL, SP
Idhifa	3	PA, QL, SP
Imatinib Mesylate	1	PA, SP
Imbruvica Cap, Suspension, Tab 420mg	3	PA, SP
Imbruvica Tab 140mg, 280mg	E	SP
Inqovi	E	SP
Kanjinti	3	PA, SP

DRUG NAME	DRUG TIER	PROGRAMS AND LIMITS
Kisqali	3	PA, SP
Koselugo	3	PA, SP
Lenalidomide	1	PA, SP
Letrozole	1	
Lumakras	3	PA, SP
Lynparza	2	PA, SP
Mekinist	3	PA, SP
Mvasi	3	PA, SP
Nubeqa	3	PA, SP
Odomzo	3	PA, SP
Ogivri	2	PA, SP
Ojjaara	E	SP
Ontruzant	3	PA, SP
Orgovyx	3	PA, SP
Panretin	3	
Pemazyre	E	SP
Phesgo	2	PA, SP
Piqray	3	PA, SP
Pomalyst	3	PA, SP
Retevmo	3	PA, QL, SP
Revlimid	2	PA, SP
Rezlidhia	E	SP
Riabni	2	PA, SP
Rituxan	E	SP
Rozlytrek	3	PA, SP
Rubraca	E	SP
Ruxience	2	PA, SP
Rydapt	3	PA, SP

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

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DRUG NAME	DRUG TIER	PROGRAMS AND LIMITS
Rylaze	E	SP
Scemblix	3	PA, QL, SP
Sprycel	E	SP
Stivarga	2	PA, SP
Sutent	E	SP
Tabrecta	3	PA, SP
Tafinlar	3	PA, SP
Tagrisso	3	PA, SP
Talzenna	E	SP
Tamoxifen Tab	1	
Targretin Cap	E	SP
Tasigna	3	PA, SP
Tazverik	E	SP
Temozolomide	1	PA, SP
Tepmetko	E	SP
Trazimera	3	PA, SP
Treanda	E	SP
Truqap	3	PA, QL, SP
Truxima	3	PA, SP
Vegzelma	2	PA, SP
Verzenio	3	PA, SP
Vitrakvi	3	PA, SP
Vivimusta	E	SP
Xalkori	E	SP
Xtandi	3	PA, SP
Yonsa	E	SP
Zejula	2	PA, SP
Zelboraf	3	PA, SP

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DRUG NAME	DRUG TIER	PROGRAMS AND LIMITS
Zirabev	2	PA, SP
Zytiga	E	SP
Cardiovascular/Heart Disease: Anticoagulants		
Brilinta	2	
Clopidogrel	1	
Eliquis	2	QL
Enoxaparin	1	
Jantoven	1	
Plavix	E	
Prasugrel	1	
Warfarin	1	
Xarelto	2	QL
Yosprala	E	
Cardiovascular/Heart Disease: High Blood Pressure		
Altace	E	
Amlodipine	1	
Amlodipine/Benazepril	1	
Amlodipine/Olmesartan	1	
Amlodipine/Valsartan	1	
Atacand	E	
Atenolol	1	
Atenolol/Chlorthalidone	1	
Avapro	E	
Azor	E	
Benazepril	1	
Benicar	E	
Benicar HCT	E	
Bisoprolol	1	
Bisoprolol/HCTZ	1	

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DRUG NAME	DRUG TIER	PROGRAMS AND LIMITS
Bumetanide	1	
Bystolic	E	
Candesartan	1	
Cardizem LA	E	
Cartia XT	1	
Carvedilol	1	
Catapres-TTS	E	
Chlorthalidone	1	
Clonidine Tab	1	
Conjupri	E	
Coreg	E	
Coreg CR	E	
Cozaar	E	
Diltiazem ER	1	
Diovan	E	
Diovan HCT	E	
Doxazosin	1	
Edarbi	3	ST
Edarbyclor	3	ST
Enalapril	1	
Exforge	E	
Exforge HCT	E	
Furoscix	E	
Furosemide	1	
Guanfacine	1	
Hydralazine	1	
Hydrochlorothiazide	1	
Hyzaar	E	
Inderal LA	E	

DRUG NAME	DRUG TIER	PROGRAMS AND LIMITS
Inderal XL	E	
Innopran XL	E	
Irbesartan	1	
Irbesartan/HCTZ	1	
Kaspargo Sprinkle	E	
Katerzia	E	
Labetalol	1	
Lasix	E	
Levamlodipine (Conjupri ABA)	E	
Lisinopril	1	
Lisinopril/HCTZ	1	
Losartan	1	
Losartan/HCTZ	1	
Lotrel	E	
Metoprolol Succinate ER	1	
Metoprolol Tartrate	1	
Micardis	E	
Micardis HCT	E	
Minoxidil	1	
Nadolol	1	
Nebivolol	1	
Nifedipine ER	1	
Nifedipine ER Osmotic	1	
Norliqva	3	PA, QL
Norvasc	E	
Olmesartan	1	
Olmesartan/HCTZ	1	

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DRUG NAME	DRUG TIER	PROGRAMS AND LIMITS
Prazosin	1	
Propranolol	1	
Propranolol ER	1	
Ramipril	1	
Spironolactone	1	
Tekturna	2	ST
Telmisartan	1	
Tenormin	E	
Toprol XL	E	
Torsemide	1	
Triamterene/HCTZ	1	
Tribenzor	E	
Valsartan Solution	E	
Valsartan Tab	1	
Valsartan/HCTZ	1	
Verapamil ER	1	
Zestril	E	
Cardiovascular/Heart Disease: High Cholesterol		
Atorvaliq	E	
Atorvastatin	1	
Colestid	E	
Crestor	E	
Ezetimibe	1	
Fenofibrate	1	
Fenofibrate Micronized	1	
Gemfibrozil	1	
Icosapent Ethyl	1	

DRUG NAME	DRUG TIER	PROGRAMS AND LIMITS
Leqvio	E	
Lescol XL	E	
Lipitor	E	
Livalo	E	
Lovastatin	1	
Lovaza	E	
Nexletol	2	PA, QL
Nexlizet	2	PA, QL
Omega-3 Acid	1	
Praluent	E	
Pravastatin	1	
Questran	E	
Questran Light	E	
Repatha	2	PA, QL
Rosuvastatin	1	
Simvastatin	1	
Tricor	E	
Vascepa	2	
Vytorin	E	
Welchol	E	
Zetia	E	
Zocor	E	
Zypitamag	E	
Cardiovascular/Heart Disease: Other		
Amiodarone	1	
Aspruzyo Sprinkle	E	
Camzyos	E	SP

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DRUG NAME	DRUG TIER	PROGRAMS AND LIMITS
Corlanor	3	PA, QL
Entresto	2	QL
Flecainide	1	
Inpefa	E	
Isosorbide Mononitrate ER	1	
Multaq	3	
Nitroglycerin SL	1	
Nitrostat	E	
Ranolazine ER	1	
Soaanz	E	
Sotalol	1	
Tikosyn	E	
Verquvo	3	PA, QL
Cardiovascular/Heart Disease: Pulmonary Arterial Hypertension (PAH)		
Adcirca	E	SP
Adempas	2	PA, QL, SP
Letairis	E	SP
Opsumit	2	PA, QL, SP
Opsynvi	E	SP
Orenitram	3	PA, QL, SP
Remodulin	E	SP
Revatio	E	SP
Sildenafil Suspension	1	PA, QL
Sildenafil Tab 20mg	1	PA, QL
Tadliq	E	SP
Tracleer 62.5mg, 125mg	E	SP
Treprostinil	1	PA, QL, SP

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DRUG NAME	DRUG TIER	PROGRAMS AND LIMITS
Tyvaso	3	PA, QL, SP
Tyvaso DPI	3	PA, QL, SP
Central Nervous System: Alzheimer's/Dementia		
Adlarity	E	
Donepezil	1	
Kisunla	E	SP
Legembi	E	SP
Memantine	1	
Namzaric	2	QL
Central Nervous System: Antipsychotics		
Abilify	E	
Abilify Asimtufii	3	
Abilify Maintena	3	
Aripiprazole	1	QL
Aristada	3	
Aristada Initio	3	
Invega Hafyera	3	ST
Invega Sustenna	3	
Invega Trinza	3	
Latuda	E	
Lurasidone	1	QL
Lybalvi	E	
Olanzapine	1	
Perseris	3	
Quetiapine	1	
Quetiapine ER	1	QL
Rexulti	3	QL

DRUG NAME	DRUG TIER	PROGRAMS AND LIMITS
Risperdal	E	
Risperidone	1	
Rykindo	3	QL
Saphris	E	
Secuado	E	
Seroquel	E	
Seroquel XR	E	
Uzedy	3	QL
Vraylar	3	QL
Ziprasidone	1	
Zyprexa	E	
Central Nervous System: Attention Deficit Disorder		
Adderall	E	
Adzenys XR-ODT	E	
Amphetamine/ Dextroamphetamine	1	
Amphetamine/ Dextroamphetamine ER	1	
Amphetamine/ Dextroamphetamine 3-Bead ER	1	
Atomoxetine	1	
Azstarys	2	ST
Cotempla XR-ODT	E	
Daytrana	E	
Dexmethylphenidate	1	
Dexmethylphenidate ER	1	
Dyanavel XR	E	

DRUG NAME	DRUG TIER	PROGRAMS AND LIMITS
Evekeo	E	
Focalin	E	
Focalin XR	E	
Guanfacine ER	1	
Intuniv	E	
Jornay PM	3	ST
Lisdexamfetamine	1	
Metadate CD	E	
Methylphenidate CD	1	
Methylphenidate ER	1	
Methylphenidate LA	1	
Methylphenidate OSM	1	
Methylphenidate Tab	1	
Methylphenidate XR	1	
Mydayis	E	
Qelbree	E	
Quillichew ER	E	
Quillivant XR	E	
Ritalin	E	
Ritalin LA	E	
Strattera	E	
Vyvanse	3	ST
Xelstrym	E	
Zenzedi	E	
Central Nervous System: Depression		
Amitriptyline	1	
Auvelity	E	

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DRUG NAME	DRUG TIER	PROGRAMS AND LIMITS
Bupropion	1	
Bupropion SR	1	QL
Bupropion XL	1	QL
Bupropion XL 450mg (Forfivo XL ABA)	E	
Celexa	E	
Citalopram Cap	E	
Citalopram Tab	1	
Cymbalta	E	
Desvenlafaxine ER	1	QL
Doxepin	1	
Duloxetine	1	QL
Effexor XR	E	
Escitalopram Tab	1	
Fluoxetine	1	
Fluvoxamine	1	
Forfivo XL	E	
Lexapro	E	
Mirtazapine	1	
Nortriptyline	1	
Paroxetine Tab	1	
Paxil CR	E	
Paxil Tab	E	
Pristiq	E	
Prozac	E	
Sertraline Cap	E	
Sertraline Tab	1	
Spravato	3	PA, SP

DRUG NAME	DRUG TIER	PROGRAMS AND LIMITS
Trazodone	1	
Trintellix	3	QL, ST
Venlafaxine	1	
Venlafaxine Besylate ER	E	
Venlafaxine ER	1	
Vilazodone	1	QL
Wellbutrin SR	E	
Wellbutrin XL	E	
Zoloft	E	
Zuruvae	3	PA, QL
Central Nervous System: Migraine		
Aimovig	2	PA, QL
Ajovy	2	PA, QL
Bac	1	
Butalbital/Acetaminophen/Caffeine	1	
Eletriptan	1	QL
Emgality 100mg/mL	2	PA, QL
Emgality 120mg/mL	E	
Imitrex	E	
Imitrex Statdose	E	
Maxalt	E	
Maxalt-MLT	E	
Naratriptan	1	QL
Nurtec	2	PA, QL
Onzetra Xsail	E	
Qulipta	2	PA, QL
Relpax	E	

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DRUG NAME	DRUG TIER	PROGRAMS AND LIMITS
Reyvow	E	
Rizatriptan	1	QL
Sumatriptan Injection	1	QL
Sumatriptan Tab	1	QL
Tosymra	E	
Treximet	E	
Trudhesa	E	
Ubrelvy	2	PA, QL
Zavzpret	3	PA, QL
Zembrace Symtouch	E	
Zomig Tab	E	
Central Nervous System: Multiple Sclerosis		
Ampyra	E	SP
Aubagio	E	SP
Avonex	2	PA, QL, SP
Bafiertam	2	PA, QL, SP
Betaseron	2	PA, QL, SP
Copaxone 20mg/mL	E	SP
Copaxone 40mg/mL	2	PA, QL, SP
Dalfampridine ER	1	PA, QL, SP
Dimethyl Fumarate	1	PA, QL, SP
Extavia	E	SP
Gilenya 0.5mg Cap	E	SP
Glatiramer Acetate	1	PA, QL, SP
Glatopa	1	PA, QL, SP
Kesimpta	2	PA, QL, SP
Mavenclad	3	PA, SP

DRUG NAME	DRUG TIER	PROGRAMS AND LIMITS
Mayzent	3	PA, QL, SP
Plegridy	E	SP
Ponvory	E	SP
Rebif	E	SP
Tascenso ODT	E	SP
Tecfidera	E	SP
Vumerity	2	PA, QL, SP
Zeposia	3	PA, QL, SP
Central Nervous System: Other		
Alprazolam Tab	1	QL
Armodafinil	1	
Ativan Tab	E	
Austedo	3	PA, QL, SP
Austedo XR	3	PA, QL, SP
Buspirone	1	
Daybue	E	SP
Diazepam Tab	1	
Gralise	3	QL, ST
Horizant	3	PA, QL
Hydroxyzine HCL	1	
Hydroxyzine Pamoate	1	
Lithium	1	
Lithium ER	1	
Lorazepam Tab	1	
Loreev XR	E	
Lumryz	E	SP
Modafinil	1	

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DRUG NAME	DRUG TIER	PROGRAMS AND LIMITS
Nuvigil	E	
Provigil	E	
Radicava ORS	2	PA, QL, SP
Sodium Oxybate [Xyrem ABA (Amneal manufacturer)]	E	SP
Sodium Oxybate (Hikma manufacture)	3	PA, QL, SP
Sunosi	2	PA, QL
Teglutik	2	PA, QL
Valium	E	
Wakix	3	PA, QL, SP
Xanax	E	
Xanax ER	E	
Xyrem	E	SP
Xywav	3	PA, QL, SP
Central Nervous System: Parkinson's Disease		
Benzotropine	1	
Carbidopa-Levodopa	1	
Crexont	3	
Dhivy	E	
Gocovri	E	
Inbrija	3	PA, SP
Neupro	3	
Ongentys	3	QL, ST
Osmolex ER	E	
Pramipexole	1	
Ropinirole	1	
Rytary	3	ST

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DRUG NAME	DRUG TIER	PROGRAMS AND LIMITS
Central Nervous System: Sedatives/Hypnotics		
Ambien	E	
Ambien CR	E	
Belsomra	3	QL, ST
Dayvigo	3	QL, ST
Eszopiclone	1	QL
Lunesta	E	
Quviviq	E	
Restoril	E	
Temazepam	1	
Triazolam	1	QL
Zolpidem Cap	E	
Zolpidem ER	1	QL
Zolpidem Tab	1	
Central Nervous System: Seizure Disorders		
Aptiom	3	
Briviact	3	ST
Carbatrol	E	
Clonazepam	1	QL
Depakote	E	
Depakote ER	E	
Depakote Sprinkles	E	
Dilantin Cap 100mg	E	
Dilantin Infatabs	E	
Dilantin Suspension	E	
Dilantin-125	E	
Divalproex DR	1	

DRUG NAME	DRUG TIER	PROGRAMS AND LIMITS
Divalproex ER	1	
Elepsia XR	E	
Epidiolex	3	PA, SP
Eprontia	E	
Fycompa	3	
Gabapentin	1	
Keppra	E	
Keppra XR	E	
Klonopin	E	
Lacosamide	1	
Lamictal	E	
Lamictal ODT	E	
Lamictal Starter Kit	E	
Lamictal XR	E	
Lamotrigine	1	
Lamotrigine ER	1	
Levetiracetam	1	
Levetiracetam ER	1	
Libervant	3	
Lyrica	E	
Lyrica CR	E	
Motpoly XR	3	ST
Nayzilam	3	QL
Neurontin	E	
Onfi	E	
Oxcarbazepine	1	
Oxtellar XR	E	
Pregabalin	1	QL

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DRUG NAME	DRUG TIER	PROGRAMS AND LIMITS
Primidone	1	
Qudexy XR	E	
Roweepra	1	
Sabril	E	SP
Subvenite	1	
Sympazan	3	PA
Tegretol	E	
Tegretol-XR	E	
Topamax	E	
Topamax Sprinkle	E	
Topiramate	1	
Trileptal	E	
Trokendi XR	E	
Valtoco	3	QL
Vigadrone	E	SP
Vimpat	E	
Xcopri	3	ST
Zonegran	E	
Zonisade	E	
Zonisamide	1	
Dermatology		
Acanya	E	
Aczone	E	
Acyclovir Ointment	1	
Adapalene/Benzoyl Peroxide Gel	1	
Aklief	3	PA
Ala-Cort	1	

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DRUG NAME	DRUG TIER	PROGRAMS AND LIMITS
Ala Scalp	E	
Amzeeq	3	
Arazlo	E	
Azelaic Acid Gel	1	
Benzamycin	E	
Betamethasone Cream, Ointment	1	
Cabtreo	E	
Calcipotriene Foam (Sorilux ABA)	E	
Ciclopirox Solution	1	
Clindacin ETZ Swab	1	
Clindacin-P	1	
Clindagel	E	
Clindamycin Gel, Lotion, Solution, Swab	1	
Clindamycin/Benzoyl Peroxide Gel	1	
Clobetasol Cream, Foam, Ointment, Shampoo, Solution	1	
Clobex	E	
Clodan	1	
Cloderm	E	
Clotrimazole/ Betamethasone Cream	1	
Cordran Tape	E	
Desonide Cream, Ointment	1	
Differin Cream, Gel, Lotion	E	
Duobrii	E	
Elidel	E	

DRUG NAME	DRUG TIER	PROGRAMS AND LIMITS
Enstilar	3	QL
Epiduo	E	
Epiduo Forte	3	
Epsolay	E	
Eucrisa	2	QL, ST
Fabior	E	
Finacea Foam	3	ST
Fluocinonide Cream, Ointment, Solution	1	
Fluorouracil Cream	1	
Fluticasone Cream	1	
Hallog	E	
Hydrocortisone Cream, Ointment	1	
Hyftor	E	
Imiquimod Cream	1	
Impoyz	E	
Kenalog Spray	E	
Ketoconazole Cream, Shampoo	1	
Klayesta	1	
Klisyri	3	ST
Lexette	E	
Lidocaine Ointment	1	
Lidocaine/Prilocaine Cream	1	
Metrogel	E	
Metronidazole Cream, Gel	1	
Mirvaso	2	
Mometasone Cream, Ointment	1	

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DRUG NAME	DRUG TIER	PROGRAMS AND LIMITS
Mupirocin Ointment	1	
Natroba	E	
Neuac	1	
Noritate	E	
Nystatin Cream, Ointment	1	
Onexton	3	
Opzelura	2	QL, ST
Pimecrolimus	1	
Retin-A	E	
Retin-A Micro 0.06%, 0.08%	3	PA
Retin-A-Micro 0.04%, 0.1%	E	
Rhofade	E	
Santyl	3	
Silvadene	E	
Soolantra	3	
Sorilux	E	
Taclonex	3	QL
Tacrolimus Ointment	1	
Tazarotene Foam	E	
Tazorac	E	
Topicort Spray	E	
Tretinoin Cream, Gel	1	PA
Triamcinolone Cream, Lotion, Ointment	1	
Triamcinolone in Absorbase	1	
Triderm	1	
Twynéo	3	PA
Vectical	E	

DRUG NAME	DRUG TIER	PROGRAMS AND LIMITS
Vtama	2	PA
Winlevi	E	
Wynzora	3	PA, QL
Xaciato	3	
Ycanth	3	
Ziana	E	
Zilxi	3	ST
Zoryve Cream	2	
Zoryve Foam	E	
Zovirax	E	
Zyclara	E	
Zyclara Pump	E	
Diabetes/Endocrine Blood: Glucose Monitoring		
Accu-Chek FastClix Lancet Kit	2	
Accu-Chek SoftClix Lancet Device Kit	2	
BD Ultra-Fine Insulin Syringes	2	
BD Ultra-Fine Pen Needles	2	
Cequr Simplicity 2U	2	
Cequr Simplicity Inserter	2	
Contour Next EZ Kit w/ Device	2	
Contour Next Gen Monitor	2	
Contour Next Monitor Kit w/Device	2	
Contour Next One Kit	2	
Contour Next Gen Test Strips	2	

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DRUG NAME	DRUG TIER	PROGRAMS AND LIMITS
Contour Plus Blue Kit w/ Device	2	
Contour Plus Test Strips	2	
Contour Test Strips	2	
Dexcom G6 Receiver, Sensor, Transmitter	2	
Dexcom G7 Receiver, Sensor	2	
Enlite Glucose Sensor	3	
Eversense 365 Sensor/ Holder	E	
Eversense 365 Smart Transmitter	E	
Eversense E3 Sensor/ Holder/Smart Transmitter	E	
Eversense Sensor/Holder/ Smart Transmitter	E	
FreeStyle Libre 2 Plus Sensor	E	
FreeStyle Libre 2 Reader, Sensor	E	
FreeStyle Libre 3 Plus Sensor	E	
FreeStyle Libre 3 Reader, Sensor	E	
FreeStyle Libre 14 Day Reader, Sensor	E	
Guardian 4 Glucose Sensor, Transmitter	3	
Guardian Connect Transmitter	3	
Guardian Link 3 Transmitter	3	
Guardian Sensor 3	3	
Novofine Pen Needles	2	

DRUG NAME	DRUG TIER	PROGRAMS AND LIMITS
Novofine Plus Pen Needles	2	
Omnipod 5 Dexcom Intro Kit	2	PA, QL
Omnipod 5 Dexcom Pods	2	PA, QL
Omnipod 5 Libre Intro Kit	2	PA, QL
Omnipod 5 Libre Pods	2	PA, QL
Omnipod Dash Intro Kit	2	PA, QL
Omnipod Dash Pods	2	PA, QL
OneTouch Ultra 2 Kit w/ Device	E	
OneTouch Ultra Blue Test Strips	E	
OneTouch Ultra Test Strips	E	
OneTouch Verio Flex System	E	
OneTouch Verio Reflect Kit w/ Device	E	
OneTouch Verio Test Strips	E	
Tempo Refill	E	
Tempo Smart Button	E	
Tempo Welcome	E	
V-Go 20	2	PA, QL
V-Go 30	2	PA, QL
V-Go 40	2	PA, QL
Diabetes/Endocrine: Insulin		
Admelog	1	
Admelog SoloStar	1	
Apidra SoloStar	1	
Apidra Vials	1	
Basaglar KwikPen	1	
Basaglar Tempo Pen	E	

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DRUG NAME	DRUG TIER	PROGRAMS AND LIMITS
Fiasp	1	
Fiasp FlexTouch	1	
Fiasp Penfill	1	
Humalog Mix 50/50 KwikPen	1	
Humalog Mix 75/25 Vials and KwikPen	1	
Humalog Tempo Pen	E	
Humalog U-100 Junior KwikPen	1	
Humalog Vials and KwikPen	1	
Humulin 70/30 Vials and KwikPen	1	
Humulin N Vials and KwikPen	1	
Humulin R U-500 Vials and KwikPen	1	
Humulin R Vials	1	
Insulin Aspart (Novolog ABA)	E	
Insulin Aspart FlexPen (Novolog FlexPen ABA)	E	
Insulin Aspart Penfill (Novolog Penfill ABA)	E	
Insulin Aspart Protamine & Insulin Aspart (Novolog Mix 70/30 ABA)	E	
Insulin Aspart Protamine & Insulin Aspart FlexPen (Novolog Mix 70/30 FlexPen ABA)	E	
Insulin Degludec (Tresiba ABA)	E	
Insulin Degludec FlexTouch (Tresiba FlexTouch ABA)	E	

DRUG NAME	DRUG TIER	PROGRAMS AND LIMITS
Insulin Glargine 100 unit/mL (Lantus ABA)	E	
Insulin Glargine SoloStar 100 unit/mL (Lantus SoloStar ABA)	E	
Insulin Glargine 300 unit/mL (Toujeo SoloStar and Max SoloStar ABA)	E	
Insulin Glargine-yfgn	E	
Insulin Lispro	1	
Insulin Lispro Junior Kwik-Pen	1	
Insulin Lispro Protamine & Insulin Lispro	1	
Lantus SoloStar	1	
Lantus U-100 Vials	1	
Lyumjev Tempo Pen	E	
Lyumjev Vials and KwikPen	1	
Novolin 70/30 Relion Vials and FlexPen	E	
Novolin 70/30 Vials and FlexPen	1	
Novolin R Relion Vials and FlexPen	E	
Novolin R Vials and FlexPen	1	
Novolin N Relion Vials and FlexPen	E	
Novolin N Vials and FlexPen	1	
Novolog FlexPen	1	
Novolog Mix 70/30 Vials and FlexPen	1	
Novolog Penfill	1	

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DRUG NAME	DRUG TIER	PROGRAMS AND LIMITS
Novolog Relion Mix 70/30 Vials and FlexPen	E	
Novolog Relion Vials and FlexPen	E	
Novolog U-100 Vials	1	
Rezvoglar KwikPen	1	
Semglee (yfgn)	E	
Soliqua	2	QL
Toujeo Max SoloStar	1	
Toujeo SoloStar	1	
Tresiba	E	
Tresiba FlexTouch	E	
Diabetes/Endocrine: Non-Insulin		
Alogliptin	E	
Alogliptin/Metformin	E	
Alogliptin/Pioglitazone	E	
Baqsimi	2	
Bexagliflozin (Brenzavvy ABA)	E	
Brenzavvy	E	
Bydureon BCise	2	PA, QL
Byetta	2	PA, QL
Dapagliflozin (Farxiga ABA)	E	
Dapagliflozin/Metformin ER (Xigduo XR ABA)	E	
Farxiga	2	
Glimepiride	1	
Glipizide	1	
Glipizide ER	1	

DRUG NAME	DRUG TIER	PROGRAMS AND LIMITS
Glucagon Emergency Kit (Fresenius manufacturer)	2	
Glyburide	1	
Glyxambi	2	
Gvoke HypoPen	E	
Gvoke Kit	E	
Gvoke PFS	E	
Invokamet	E	
Invokamet XR	E	
Invokana	E	
Janumet	2	
Janumet XR	2	
Januvia	2	
Jardiance	2	
Jentadueto	2	
Jentadueto XR	2	
Metformin 500mg, 850mg, 1000mg	1	
Metformin 625mg	E	
Metformin ER	1	
Metformin ER Modified Release (generic Glumetza)	E	
Metformin ER Osmotic (generic Fortamet)	E	
Mounjaro	2	PA, QL
Onglyza	E	
Ozempic	2	PA, QL
Pioglitazone	1	
Qtern	E	

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DRUG NAME	DRUG TIER	PROGRAMS AND LIMITS
Rybelsus	2	PA, QL
Segluromet	E	
Sitagliptin	E	
Sitagliptin/Metformin	E	
Steglatro	E	
Steglujan	E	
SymlinPen	3	PA
Synjardy	2	
Synjardy XR	2	
Tradjenta	2	
Trijardy XR	2	
Trulicity	2	PA, QL
Tzield	E	
Victoza	E	PA, QL
Xigduo XR	2	
Zegalogue	2	
Zituvimet	E	
Zituvimet XR	E	
Zituvio	E	
Endocrine: Growth Hormone		
Genotropin	E	SP
Genotropin MiniQuick	E	SP
Humatrope	E	SP
Ngenla	3	PA, SP
Norditropin FlexPro	2	PA, SP
Nutropin AQ NuSpin	3	PA, SP
Omnitrope	2	PA, SP

DRUG NAME	DRUG TIER	PROGRAMS AND LIMITS
Skytrofa	3	PA, SP
Sogroya	E	SP
Zomacton	E	SP
Endocrine: Other		
Acthar	2	PA, SP
Alkindi Sprinkle	E	
Cabergoline	1	
Calcitriol Cap	1	
Cortef	E	
Cortisone Tab	E	
Cortrophin	2	PA, SP
Dexamethasone Tab	1	
Fludrocortisone Acetate Tab	1	
Hemady	E	
Hydrocortisone Tab	1	
Isturisa	E	SP
Kenalog-40	E	
Lupron Depot 7.5mg, 22.5mg, 30mg, 45mg	2	PA, SP
Methylprednisolone Tab	1	
Mycapssa	E	SP
Osphena	3	
Prednisone	1	
Prednisolone	1	
Prednisolone Sodium Phosphate Solution	1	
Rayos	E	
Recorlev	E	SP

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DRUG NAME	DRUG TIER	PROGRAMS AND LIMITS
Signifor	E	SP
Somatuline Depot	3	PA, SP
Supprelin LA	2	PA, QL, SP
Tarpeyo	E	SP
Triptodur	3	PA, QL, SP
Endocrine: Thyroid Hormone Replacement		
Armour Thyroid	3	
Cytomel	E	
Ermeza	E	
Euthyrox	1	
Levo-T	1	
Levothyroxine Cap (Tirosint ABA)	E	
Levothyroxine Tab	1	
Levoxyl	1	
Liothyronine	1	
Methimazole	1	
Niva Thyroid	3	
NP Thyroid	1	
Synthroid	E	
Thyquidity	E	
Tirosint	E	
Tirosint-Sol	E	
Unithroid	1	
Eye Conditions: Antibiotics		
Azasite	3	
Besivance	3	
Ciprofloxacin Ophthalmic	1	

DRUG NAME	DRUG TIER	PROGRAMS AND LIMITS
Erythromycin Ophthalmic	1	
Moxifloxacin Ophthalmic	1	
Ofloxacin Ophthalmic	1	
Polymyxin B/Trimethoprim Ophthalmic	1	
Tobradex ST	3	
Tobramycin Ophthalmic	1	
Tobramycin/Dexamethasone Ophthalmic	1	
Vigamox	E	
Zylet	3	
Eye Conditions: Glaucoma		
Acetazolamide Tab	1	
Alphagan P	E	
Azopt	E	
Betimol	3	
Brimonidine Ophthalmic	1	
Brimonidine/Timolol Ophthalmic	1	
Combigan	E	
Cosopt	E	
Cosopt PF	E	
Dorzolamide/Timolol Ophthalmic	1	
Dorzolamide/Timolol Ophthalmic PF	1	
Iyuzeh	E	
Latanoprost Ophthalmic	1	QL
Lumigan	2	QL
Rhopressa	3	

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

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DRUG NAME	DRUG TIER	PROGRAMS AND LIMITS
Rocklatan	3	QL
Simbrinza	2	
Timolol Maleate Ophthalmic (Once-Daily)	1	
Timolol Maleate Ocudose	1	
Timolol Maleate Ophthalmic	1	
Timolol Maleate Ophthalmic PF	1	
Timoptic Ocudose	E	
Travatan Z	E	
Vyzulta	E	
Xalatan	E	
Zioptan	E	
Eye Conditions: Other		
Beovu	E	SP
Bepreve	E	
Bromsite	E	
Byooviz	E	SP
Cequa	3	PA
Cyclosporine Ophthalmic	1	PA
Eysuvis	3	PA, QL
Flarex	3	
Ilevro	E	
Inveltys	3	
Ketorolac Ophthalmic	1	
Latisse	E	
Lotemax Suspension	E	
Lotemax SM	3	
Lucentis	E	SP

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DRUG NAME	DRUG TIER	PROGRAMS AND LIMITS
Miebo	2	PA, QL
Neomycin/Polymyxin/ Dexamethasone Ophthalmic Ointment, Suspension	1	
Nevanac	E	
Pred Forte	E	
Prednisolone Ophthalmic	1	
Prolensa	E	
Restasis	2	PA
Restasis Multidose	2	PA
Tyrvaya	3	PA, QL
Verkazia	E	
Vevye	E	
Vuity	E	
Xdemvy	E	
Xiidra	2	PA
Zerviate	E	
Gastrointestinal: Acid Suppression		
Aciphex	E	
Carafate Tab	E	
Dexlansoprazole	1	QL
Dexilant	E	
Duexis	E	
Esomeprazole Magnesium (Rx only)	1	QL
Famotidine (Rx only)	1	
Ibuprofen/Famotidine	E	
Konvomep	E	
Lansoprazole (Rx only)	1	QL

DRUG NAME	DRUG TIER	PROGRAMS AND LIMITS
Misoprostol	1	
Nexium Cap	E	
Omeprazole (Rx only)	1	QL
Omeprazole/Sodium Bicarbonate	E	
Pantoprazole	1	QL
Prevacid	E	
Prevacid SoluTab	E	
Protonix Tab	E	
Rabeprazole	1	QL
Rabeprazole Sprinkle (Aciphex Sprinkle ABA)	E	
Sucralfate Tab	1	
Vimovo	E	

Gastrointestinal: Inflammatory Bowel Disease

Apriso	2	
Budesonide Cap, Tab	1	
Canasa	E	
Cortifoam	3	
Delzicol	E	
Dipentum	E	
Hydrocortisone (Perianal)	1	
Lialda	E	
Mesalamine DR	1	
Mesalamine ER 0.375gm	1	
Pentasa	E	
Proctofoam-HC	2	
Procto-Med HC	1	

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DRUG NAME	DRUG TIER	PROGRAMS AND LIMITS
Sulfasalazine	1	
Uceris Rectal	3	
Uceris Tab	E	

Gastrointestinal: Nausea/Vomiting

Gimoti	E	
Meclizine	1	
Metoclopramide	1	
Ondansetron ODT	1	
Ondansetron Tab	1	
Prochlorperazine	1	
Sancuso	E	
Scopolamine	1	
Varubi	3	QL

Gastrointestinal: Other

Amitiza	E	
Clenpiq	3	
Constulose	1	
Creon	2	
Dicyclomine	1	
Diphenoxylate/Atropine	1	
Gavilyte-C	1	
Gavilyte-G	1	
Gavilyte-N w/ Flavor Pack	1	
Glycopyrrolate Tab 1mg, 2mg	1	
Golytely	E	
Ibsrela	E	
Lactulose	1	

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DRUG NAME	DRUG TIER	PROGRAMS AND LIMITS
Linzess	2	QL, ST
Lubiprostone	1	QL
Motofen	E	
Movantik	E	
Moviprep	E	
Na Sulfate-K Sulfate-Mg Sulfate	1	
Omeclamox-Pak	2	
Pancreaze	E	
PEG 3350-KCl-Na Bicarb-NaCl	1	
PEG-3350/Electrolytes	1	
Pertzye	E	
Plenvu	E	
Pylera	3	ST
Rebyota	3	PA, QL, SP
Relistor	E	
Reltone	E	
Suflave	3	
Suprep Bowel Prep	3	
Sutab	3	
Symproic	2	QL, ST
Talicia	3	
Trulance	E	
Ursodiol Cap 200mg, 400mg (Reltone ABA)	E	
Viberzi	3	PA, QL
Viokace	E	
Voquezna	E	

DRUG NAME	DRUG TIER	PROGRAMS AND LIMITS
Vowst	E	SP
Xifaxan 200mg Tab	E	
Zenpep	2	
Gout		
Allopurinol	1	
Colchicine Tab	1	
Gloperba	E	
Lodoco	E	
Mitigare	E	
HIV/AIDS		
Biktarvy	3	
Cabenuva	E	
Cimduo	2	
Descovy	3	
Dovato	2	
Emtricitabine/Tenofovir Disoproxil Fumarate	1	
Juluca	2	
Prezcobix	2	
Symfi	2	
Symfi Lo	2	
Symtuza	3	
Triumeq	2	
Truvada	E	
Vocabria	E	
Infertility		
Cetrotide	E	SP

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DRUG NAME	DRUG TIER	PROGRAMS AND LIMITS
Follistim AQ	2	PA, SP
Ganirelix (Organon manufacturer)	1	SP
Gonal-f	E	SP
Gonal-f RFF	E	SP
Ovidrel	3	SP
Inflammatory Conditions		
Abrilada (preferred NDCs*)	2	PA, QL, SP
Actemra [†]	3	PA, QL, SP
Adalimumab-aacf	2	PA, QL, SP
Adalimumab-aaty	2	PA, QL, SP
Adalimumab-adaz	2	PA, QL, SP
Adalimumab-adbm (Behringer Ingelheim manufacturer)	2	PA, QL, SP
Adalimumab-fkjp	2	PA, QL, SP
Adalimumab-ryvk	E	SP
Amjevita	E	SP
Avsola	2	PA, SP
Bimzelx	3	PA, QL, SP
Cimzia	2	PA, QL, SP
Cosentyx	E	SP
Cyltezo	E	SP
Enbrel	2	PA, QL, SP
Entyvio	3	PA, QL, SP
Hadlima	2	PA, QL, SP
Hulio	E	SP
Humira	E	SP
Hydroxychloroquine	1	

DRUG NAME	DRUG TIER	PROGRAMS AND LIMITS
Hyrimoz (Cordavis manufacturer)	2	PA, QL, SP
Idacio	E	SP
Inflectra	3	PA, SP
Infliximab	2	PA, SP
Jylamvo	3	
Leflunomide	1	
Methotrexate Sodium	1	
Olumiant	3	PA, QL, SP
OmvoH	2	PA, QL, SP
Orencia [†]	3	PA, QL, SP
Otezla	2	PA, QL, SP
Otrexup	E	
Otulf	2	PA, QL, SP
Plaquenil	E	
Pyzchiva	E	SP
Rasuvo	2	PA, QL
Remicade	E	SP
Renflexis	3	PA, SP
Rinvoq	E	SP
Rinvoq LQ	E	SP
Scenesse	E	SP
Selarsdi	E	SP
Simlandi	2	PA, QL, SP
Simponi	2	PA, QL, SP
Simponi Aria	2	PA, SP
Skyrizi	E	SP
Sotyktu	2	PA, QL, SP

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DRUG NAME	DRUG TIER	PROGRAMS AND LIMITS
Sovuna	E	
Stelara	E	SP
Taltz	2	PA, QL, SP
Tremfya	E	SP
Trexall	3	
Tyenne	E	SP
Ustekinumab	E	SP
Ustekinumab-aekn	E	SP
Ustekinumab-ttwe	E	SP
Velsipity	2	PA, QL, SP
Wezlana	E	SP
Xeljanz	2	PA, QL, SP
Xeljanz XR	2	PA, QL, SP
Yesintek	2	PA, QL, SP
Yuflyma	E	SP
Yusimry	2	PA, QL, SP
Zymfentra	E	SP
*Check Member Portal for preferred NDCs		
†Tier 3 Preferred		

Men's Health: Erectile Dysfunction

Cialis	E	
Sildenafil 25mg, 50mg, 100mg	1	QL
Stendra	E	
Tadalafil	1	QL
Viagra	E	

Men's Health: Prostate

Alfuzosin ER	1	
Avodart	E	

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DRUG NAME	DRUG TIER	PROGRAMS AND LIMITS
Cialis 2.5mg, 5mg	E	
Dutasteride	1	
Finasteride 5mg	1	
Flomax	E	
Tamsulosin	1	
Men's Health: Testosterone Therapy		
Androgel	E	
Aveed	E	
Depo-Testosterone	E	
Jatenzo	E	
Natesto	E	
Testim	E	
Testopel	E	
Testosterone Cypionate IM Injection	1	
Testosterone Gel	1	
Tlando	E	
Vogelxo	E	
Xyosted	E	

Miscellaneous

Adbry	2	PA, QL, SP
Alyglo	E	SP
Amondys 45	E	SP
Arakoda	3	
Asceniv	E	SP
Atovaquone/Proguanil	1	
Auvi-Q	3	
Benlysta	3	PA, SP

DRUG NAME	DRUG TIER	PROGRAMS AND LIMITS
Benzonatate	1	
Besremi	3	PA, SP
Bivigam	3	PA, SP
Bronchitol	E	SP
Buphenyl	E	SP
Bylvay	3	PA, SP
Cerdelga	3	PA, SP
Chlorhexidine Gluconate Mouth/Throat	1	
Cibinqo	2	PA, QL, SP
Cinryze	E	SP
Clarinex	E	
Clarinex-D	E	
Cuprimine	E	SP
Cutaquig	3	PA, SP
Cuvrior	3	SP
Depen Titratabs	2	SP
Desmopressin Acetate Tab	1	
Dojolvi	E	
Dupixent	2	PA, QL, SP
Duvyzat	E	SP
Dysport	2	PA
Ebglyss	2	PA, QL, SP
Elevidys	E	SP
Elfabrio	E	SP
Elmiron	E	
Emflaza	E	SP
Emverm	2	

DRUG NAME	DRUG TIER	PROGRAMS AND LIMITS
Endari	3	PA
Epinephrine Auto-Injector	1	
Epipen	3	ST
Epipen Jr	E	
Esbriet	E	SP
Exondys 51	E	SP
Fabrazyme	2	PA, SP
Fasenra	2	PA, SP
Fasenra Pen	2	PA, SP
Firazyr	E	SP
Firdapse	E	SP
Haegarda	3	PA, SP
Hemangeol	3	
Hetlioz	E	SP
Hetlioz LQ	E	SP
Hizentra	3	PA, SP
Ingrezza	3	PA, QL, SP
Igirvo	3	PA, QL, SP
Joenja	E	SP
Jynarque	E	SP
Kerendia	3	PA, QL
Kuvan	E	SP
Lidocaine Mouth/Throat	1	
Lidocaine Viscous	1	
Litfulo	3	PA, QL, SP
Livdelzi	3	PA, QL, SP
Livmarli	E	SP
Lupkynis	E	SP

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DRUG NAME	DRUG TIER	PROGRAMS AND LIMITS
Myobloc	2	PA
Neffy	3	
Nocdurna	3	
Nucala	2	PA, QL, SP
Ofev	3	PA, SP
Olpruva	E	SP
Orfadin	3	PA, SP
Oriahnn	2	PA, QL
Orilissa	2	PA, QL
Orladeyo	3	PA, QL, SP
Palforzia	E	SP
Panzyga	E	SP
Penicillamine Cap	E	SP
PerioGard	1	
Pheburane	3	SP
Phenazopyridine (Rx only)	1	
Privigen	3	PA, SP
Promethazine	1	
Promethazine DM	1	
Propecia	E	
Pseudoephedrine/ Brompheniramine/DM	1	
Pulmozyme	2	PA, SP
Qbrexza	3	QL
Ravicti	E	SP
Royaldee	3	PA
Rezdiffra	E	SP
Rezurock	E	SP

DRUG NAME	DRUG TIER	PROGRAMS AND LIMITS
Ruconest	3	PA, SP
Sandostatin	E	SP
Sensipar	E	
Strensiq	2	PA, SP
Syprine	E	SP
Takhzyro	3	PA, SP
Tavneos	E	SP
Thiola	3	SP
Thiola EC	3	SP
Trikafta	3	PA, QL, SP
Velphoro	E	
Veozah	E	
Viltepso	E	SP
Vyleesi	3	PA, QL
Vyondys 53	E	SP
Vyvgart	3	PA, SP
Vyvgart Hytrulo	3	PA, SP
Wainua	3	PA, QL, SP
Xembify	3	PA, SP
Xhance	E	
Xeomin	2	PA
Xphozah	E	
Yorvipath	3	PA, QL, SP
Zolgensma	3	SP
Musculoskeletal: Osteoarthritis		
Durolane	2	PA
Euflexxa	2	PA

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DRUG NAME	DRUG TIER	PROGRAMS AND LIMITS
Gelsyn-3	2	PA
Gel-One	E	
Genvisc 850	E	
Hyalgan	E	
Hymovis	E	
Monovisc	E	
Orthovisc	E	
Supartz FX	E	
Synojynt	E	
Synvisc	E	
Synvisc-One	E	
Triluron	E	
TriVisc	E	
Visco-3	E	
Musculoskeletal: Osteoporosis		
Alendronate Tab	1	QL
Forteo	E	SP
Ibandronate	1	QL
Prolia	2	PA, QL, SP
Teriparatide (Recombinant)	2	PA, QL, SP
Tymlos	2	PA, SP
Musculoskeletal: Other		
Amrix	E	
Baclofen Solution 10mg/5mL (Ozobax DS ABA)	E	
Baclofen Tab	1	
Carisoprodol	1	
Cyclobenzaprine Tab	1	

DRUG NAME	DRUG TIER	PROGRAMS AND LIMITS
Fleqsuvy	E	
Lyvispah	E	
Methocarbamol	1	
Ozobax DS	E	
Soma	E	
Tizanidine Tab	1	
Zanaflex	E	
Musculoskeletal: Pain Relief		
Acetaminophen w/ Codeine	1	QL
Acetaminophen/Caffeine/Dihydrocodeine	1	QL
Apadaz	E	
Arthrotec	E	
Belbuca	2	PA, QL
Benzhydrocodone/Acetaminophen	E	
Butrans	E	
Cambia	E	
Celebrex	E	
Celecoxib	1	QL
Conzip	E	
Coxanto	E	
Diclofenac Gel 1%	1	QL
Diclofenac Patch 1.3% (Flector ABA)	E	
Diclofenac Potassium Tab	1	
Diclofenac Sodium Tab	1	
Dilaudid Liquid, Tab	E	
Elyxyb	E	

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DRUG NAME	DRUG TIER	PROGRAMS AND LIMITS
Endocet	1	
Fenopron	E	
Fiorcet	E	
Fioricet/Codeine	E	
Flector	E	
Hydrocodone/ Acetaminophen	1	QL
Hydromorphone Tab	1	QL
Hysingla ER	2	PA, QL
Ibuprofen Suspension 100mg/5mL (Rx only)	1	
Ibuprofen Tab (Rx only)	1	
Indomethacin Cap	1	
Ketorolac Tab	1	QL
Licart	E	
Lidocan	E	
Lidocaine Patch	1	
Lidoderm	E	
Meloxicam	1	
Morphine Sulfate ER	1	PA, QL
MS Contin	E	
Nabumetone	1	
Nalfon	E	
Naprelan	3	
Naproxen (Rx only)	1	
Norgesic	E	
Norgesic Forte	E	
Nucynta	E	
Nucynta ER	E	

DRUG NAME	DRUG TIER	PROGRAMS AND LIMITS
Orphengesic Forte (Norgesic Forte ABA)	E	
Oxaprozin Cap (Coxanto ABA)	E	
Oxycodone w/ Acetaminophen	1	QL
Oxycodone ER (Oxycontin ABA)	E	
Oxycodone Powder	E	
Oxycodone Solution, Tab	1	QL
Oxycodone Tab 15mg (Roxybond ABA)	E	
Oxycontin	2	PA, QL
Pennsaid	E	
Percocet	E	
Qdolo	E	
Relafen DS	E	
Roxicodone	E	
Roxybond	E	
Sprix	E	
Tolectin	E	
Tramadol	1	QL
Tramadol ER (Conzip ABA)	E	
Tramadol Solution (Qdolo ABA)	E	
Trezix	3	QL
Tridacaine II	E	
Tridacaine III	E	
Xtampza ER	2	PA, QL
Zipsor	E	
ZTlido	E	

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DRUG NAME	DRUG TIER	PROGRAMS AND LIMITS
Overactive Bladder		
Gemtesa	E	
Mirabegron ER	1	
Myrbetriq Suspension	E	
Myrbetriq Tab	2	
Oxybutynin	1	
Oxybutynin ER	1	
Solifenacin	1	
Tolterodine ER	1	
Toviaz	E	
Vesicare	E	
Vesicare LS	E	
Respiratory: Asthma/COPD		
Advair Diskus	E	
Advair HFA	1	QL
AirDuo RespiClick	E	
Airsupra	2	QL
Albuterol HFA	1	QL
Albuterol Inhalation Solution	1	QL
Alvesco	E	
Anoro Ellipta	2	QL
Arnuity Ellipta	2	QL
Asmanex	E	
Asmanex HFA	E	
Atrovent HFA	3	QL
Bevespi Aerosphere	E	
Breo Ellipta	1	QL

DRUG NAME	DRUG TIER	PROGRAMS AND LIMITS
Breyna	1	
Breztri Aerosphere	2	QL
Brovana	E	
Budesonide Inhalation Suspension	1	QL
Combivent Respimat	2	QL
Duaklir Pressair	E	
Dulera	E	
Fluticasone Furoate/ Vilanterol (Breo Ellipta ABA)	E	
Fluticasone Propionate Diskus (Flovent Diskus ABA)	E	
Fluticasone Propionate HFA (Flovent HFA ABA)	E	
Fluticasone/Salmeterol 100/50, 250/50, 500/50	1	
Fluticasone/Salmeterol 45/21, 115/21, 230/21 (Advair HFA ABA)	E	
Fluticasone/Salmeterol 55/14, 113/14, 232/14 (AirDuo RespiClick ABA)	E	
Incruse Ellipta	E	
Ipratropium Bromide	1	QL
Ipratropium/Albuterol	1	QL
Levalbuterol HFA (Xopenex HFA ABA)	E	
Montelukast	1	
Ohtuvayre	E	
Perforomist	3	QL
ProAir RespiClick	E	

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DRUG NAME	DRUG TIER	PROGRAMS AND LIMITS
Pulmicort Flexhaler	E	
Pulmicort Suspension	E	
Qvar RediHaler	2	QL
Serevent Diskus	2	QL
Singulair	E	
Spiriva HandiHaler	E	
Spiriva Respimat	2	QL
Stiolto Respimat	2	QL
Striverdi Respimat	2	QL
Symbicort	3	QL, ST
Tezspire	2	PA, QL, SP
Tiotropium Bromide Monohydrate	1	QL
Trelegy Ellipta	2	QL
Tudorza Pressair	E	
Ventolin HFA	E	
Wixela Inhub	1	QL
Xolair	2	PA, SP
Xopenex HFA	E	
Yupelri	3	QL
Respiratory: Nasal Allergies		
Azelastine Nasal Spray	1	QL
Azelastine/Fluticasone Nasal Spray	1	QL
Dymista	2	QL
Fluticasone Propionate Nasal Spray (Rx only)	1	
Ipratropium Nasal Spray	1	
Mometasone Nasal Spray	1	QL

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DRUG NAME	DRUG TIER	PROGRAMS AND LIMITS
Omnaris	3	QL
QNasi	3	QL
QNasi Childrens	3	QL
Ryaltris	3	
Respiratory: Oral Allergies		
Cetirizine Solution (Rx only)	1	
Cyproheptadine Tab	1	
Levocetirizine Tab (Rx only)	1	
Transplant		
Azathioprine Tab	1	
Mycophenolate Mofetil	1	
Mycophenolate Sodium	1	
Mycophenolic Acid	1	
Myhibbin	3	
Tacrolimus Cap	1	
Vitamins/Electrolytes		
Accrufer	E	
Auryxia	3	
Carnitor	E	
Carnitor SF	E	
Cyanocobalamin Injection 1000mcg/mL	1	
Cyanocobalamin Nasal Spray	1	
Ergocalciferol Cap	1	
Folic Acid 1mg Tab	1	
Klor-Con 10	1	
Klor-Con Extended Release	1	
Klor-Con m10, m15, m20	1	

DRUG NAME	DRUG TIER	PROGRAMS AND LIMITS
Lokelma	3	
Nascobal	3	
Pokonza	E	
Potassium Chloride Crys ER	1	
Potassium Chloride ER	1	
Potassium Citrate ER	1	
Veltassa	3	
Vitamin D (ergocalciferol) (Rx only)	1	
Weight Loss Management		
Adipex-P	E	
Contrave	E	
Imcivree	E	SP
Phentermine	1	PA
Qsymia	2	PA
Saxenda	2	PA
Wegovy	2	PA
Zepbound Auto-Injector	2	PA
Zepbound Vial	E	
Women's Health: Birth Control		
Afirmelle	1	
Altavera	1	
Annovera	3	
Apri	1	
Aubra EQ	1	
Aurovela 1/20	1	
Aurovela 1.5/30	1	
Aurovela 24 Fe	1	

DRUG NAME	DRUG TIER	PROGRAMS AND LIMITS
Aurovela Fe 1/20	1	
Aurovela Fe 1.5/30	1	
Aviane	1	
Ayuna	1	
Balcoltra	3	
Beyaz	E	
Blisovi 24 Fe	1	
Blisovi Fe 1/20	1	
Blisovi Fe 1.5/30	1	
Briellyn	1	
Camila	1	
Chateal EQ	1	
Cyred EQ	1	
Deblitane	1	
Delyla	1	
Drospirenone/Ethinyl Estradiol	1	
Eluryng	1	
Emzahh	1	
Eniloring	1	
Enskyce	1	
Errin	1	
Estarylla	1	
Estradiol/Norethindrone Acetate	1	
Etonogestrel/Ethinyl Estradiol	1	
Falmina	1	
Hailey 1.5/30	1	
Hailey 24 Fe	1	

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

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

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DRUG NAME	DRUG TIER	PROGRAMS AND LIMITS
Hailey Fe 1/20	1	
Hailey Fe 1.5/30	1	
Haloette	1	
Heather	1	
Incassia	1	
Isibloom	1	
Jasmiel	1	
Jencycla	1	
Juleber	1	
Junel 1/20	1	
Junel 1.5/30	1	
Junel Fe 1/20	1	
Junel Fe 1.5/30	1	
Junel Fe 24	1	
Kalliga	1	
Kurvelo	1	
Larin 1/20	1	
Larin 1.5/30	1	
Larin 24 Fe	1	
Larin Fe 1/20	1	
Larin Fe 1.5/30	1	
Lessina	1	
Levonorgestrel/Ethinyl Estradiol	1	
Levora-28 0.15/30	1	
Lo Loestrin Fe	E	
Loestrin 1/20 (21)	E	
Loestrin 1.5/30 (21)	E	
Loestrin Fe 1/20	E	

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DRUG NAME	DRUG TIER	PROGRAMS AND LIMITS
Loestrin Fe 1.5/30	E	
Loryna	1	
Lo-Zumandimine	1	
Lutera	1	
Lyleq	1	
Lyza	1	
Marlissa	1	
Medroxyprogesterone Acetate Injection	1	QL
Microgestin 1/20	1	
Microgestin 1.5/30	1	
Microgestin Fe 1/20	1	
Microgestin Fe 1.5/30	1	
Mili	1	
Mirena	3	
Mono-Linyah	1	
Natazia	2	
Nextstellis	E	
Nikki	1	
Nora-BE	1	
Norelgestromin/Ethinyl Estradiol	1	
Norethindrone	1	
Norethindrone Acetate	1	
Norethindrone Acetate/Ethinyl Estradiol	1	
Norethindrone Acetate/Ethinyl Estradiol/Fe	1	
Norgestimate/Ethinyl Estradiol	1	

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DRUG NAME	DRUG TIER	PROGRAMS AND LIMITS
Norgestimate/Ethinyl Estradiol Triphasic	1	
Norlyroc	1	
Ocella	1	
Phexxi	E	
Portia-28	1	
Reclipsen	1	
Safyral	E	
Sharobel	1	
Slynd	E	
Sprintec 28	1	
Sronyx	1	
Syeda	1	
Tarina 24 Fe	1	
Tarina Fe 1/20 EQ	1	
Tri-Estarylla	1	
Tri-Linyah	1	
Tri-Lo-Estarylla	1	
Tri-Lo-Marzia	1	
Tri-Lo-Mili	1	
Tri-Lo-Sprintec	1	
Tri-Mili	1	
Tri-Sprintec	1	
Tri-Vylibra	1	
Tri-Vylibra Lo	1	
Twirla	E	
Vestura	1	
Vienva	1	

DRUG NAME	DRUG TIER	PROGRAMS AND LIMITS
Vylibra	1	
Xulane	1	
Yasmin 28	E	
Yaz	E	
Zafemy	1	
Zumandimine	1	
Women's Health: Hormone Replacement		
Bijuva	3	
Climara	E	
Climara Pro	2	
Delestrogen IM Injection	E	
Divigel	3	
Dotti	1	
Duavee	2	
Elestrin	3	
Endometrin	2	
Estrace	E	
Estradiol Patch, Tab, Vaginal Cream	1	
EstroGel	3	
Evamist	3	
Gallifrey	1	
Imvexxy	2	
Lyllana	1	
Medroxyprogesterone Acetate Tab	1	
Mimvey	1	
Myfembree	2	PA, QL

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

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DRUG NAME	DRUG TIER	PROGRAMS AND LIMITS
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Premphase	2	
Prempo	2	
Progesterone Cap, Injection	1	
Prometrium	E	
Vagifem	E	
Vivelle-Dot	E	

DRUG NAME	DRUG TIER	PROGRAMS AND LIMITS
Yuvaferm	1	
Women's Health: Vaginal Anti-Infectives		
Clindesse	3	
Gynazole-1	3	
Metronidazole Vaginal Gel	1	
Terconazole Vaginal Cream	1	

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

Not all medications and devices 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.

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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.



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