



# Your 2021 Prescription Drug List

## Essential 4-Tier

Effective Jan. 1, 2021



**United  
Healthcare**

This Prescription Drug List (PDL) is accurate as of Jan. 1, 2021 and is subject to change after this date. This PDL applies to members of our UnitedHealthcare, All Savers, Golden Rule, Neighborhood Health Plan and River Valley medical plans with a pharmacy benefit subject to the Essential 4-Tier PDL. Your estimated coverage and copayment/coinsurance may vary based on the benefit plan you choose and the effective date of the plan.

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# Understanding your Prescription Drug List (PDL)

## What is a PDL?

This document is a list of the most commonly prescribed medications. It includes both brand-name and generic prescription medications approved by the Food and Drug Administration (FDA). Medications are listed by common categories or classes and placed in tiers that represent the cost you pay out-of-pocket. They are then listed in alphabetical order.

## How do I use my PDL?

You and your doctor can consult the PDL to help you select the most cost-effective prescription medications. This guide tells you if a medication is generic or brand name, and if there are coverage requirements or limits. Bring this list with you when you see your doctor. If your medication is not listed here, please visit your plan's member website or call the toll-free member phone number on your health plan 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 benefit plan. This is how much you will pay when you fill a prescription. See page 6 for more information.

## When does the PDL change?

PDL changes typically occur 2-3 times per year. However, changes that have a positive impact for you — such as coverage for new medications or cost savings — may occur at any time. You can log in to the member website listed on your ID card at any time to check your medication coverage and lower-cost options.

## Why are some medications excluded from coverage?

We review medications based on their total value, including effectiveness and safety, how much they cost, and the availability of alternative medications to treat the same or similar medical conditions. Certain medications may be excluded from coverage or be subject to prior authorization (sometimes referred to as precertification) if similar alternatives are available at a lower cost. Examples include medications that work the same way, but one is much more expensive than the other, or options that are available without a prescription (also referred to as over-the-counter medications). There are also some instances where the same product can be made by 2 or more manufacturers, but greatly vary in cost. In these instances, only the lower-cost product may be covered.

You should review your benefit plan documents to confirm if any medications are excluded from your plan. You can log in to the member website listed on your ID card at any time to check your medication coverage. Talk to your doctor to see if there are lower-cost options or over-the-counter medications available.

## Who decides which medications are covered?

Thousands of medications are already available and more come to the market regularly. Often, several medications are available to treat the same condition. The UnitedHealthcare® Pharmacy and Therapeutics Committee, which includes both internal and external doctors and pharmacists, meets regularly to provide clinical reviews of all medications. Using this information, the PDL Management Committee, which includes senior UnitedHealth Group® doctors and business leaders, meets to evaluate overall health care value. They also set coverage and tier status for all medications.

## About this PDL

Where differences exist between this PDL and your benefit plan documents, the benefit plan documents rule. This PDL is not a complete list of medications, and not all medications listed may be covered by your plan. Please look at the benefit plan documents provided by your employer or health plan to see which medications are covered under your plan.



# Medication tips

## 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 for 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.

## What if my doctor writes a brand-name prescription?

If your doctor gives you a prescription for a brand-name medication, ask if a generic equivalent or lower-cost option is available and could be right for you. Generic medications are usually your lowest-cost option, but not always. For some benefit plans, if a brand-name drug is prescribed and a generic equal is available, your cost-share may be the copayment PLUS the cost difference between the brand-name drug and the generic equivalent.

## What if I am taking a specialty medication?

Specialty medications are high-cost and are used to treat rare or complex conditions that require additional care and support. For most plans, these medications are managed through the specialty pharmacy program. Take advantage of personalized support designed to help you get the most out of your treatment plan. Visit the member website listed on your ID card or call the toll-free phone number on your ID card to learn more.

Please note, not all specialty medications are listed here. If you're taking a specialty medication that is on a higher tier, call the toll-free phone number on your ID card to talk with a pharmacist about finding lower-cost options.

## Over-the-counter (OTC) medications

An OTC 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 by your pharmacy benefit, they may cost less than a prescription medication.



# Reading your PDL

The PDL gives you choices so you and your doctor can decide your best course of treatment. In this PDL, brand-name medications are shown in UPPERCASE and generic medications in lowercase.

## Tier information

Using lower tier medications can help you pay your lowest 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 may apply once you hit your deductible.

In the chart below, overall value indicates medications' effectiveness and safety, cost and the availability of alternative medications to treat the same or similar medical condition(s).

Drug Tier	Includes	Helpful Tips
<b>Tier 1</b>	<b>\$ Lower-cost</b> Medications that provide the highest overall value. Mostly generic drugs. Some brand-name drugs may also be included.	Use Tier 1 drugs for the lowest out-of-pocket costs.
<b>Tiers 2 and 3</b>	<b>\$\$ Mid-range cost</b> Medications that provide good overall value. A mix of brand-name and generic drugs.	Use Tier 2 or Tier 3 drugs, instead of Tier 4, to help reduce your out-of-pocket costs.
<b>Tier 4</b>	<b>\$\$\$ Highest-cost</b> Medications that provide the lowest overall value. Mostly brand-name drugs, as well as some generics.	Many Tier 4 drugs have lower-cost options in Tiers 1, 2 or 3. 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 sets how these medications may be covered for you.

<b>H</b>	<b>Health Care Reform Preventive</b> —This medication is part of a health care reform preventive benefit and may be available at no additional cost to you.
<b>H-PA</b>	<b>Health Care Reform Preventive with Prior Authorization</b> —May be part of health care reform preventive and available at no additional cost to you if prior authorization criteria is met.
<b>NF</b>	<b>Non-Formulary</b> Non-formulary drugs are not covered by your insurance provider, however may be filled at a Tier 4 cost share if certain criteria is met.
<b>PA</b>	<b>Prior Authorization</b> —Requires your doctor to provide information about why you are taking a medication to determine how it may be covered by your plan.
<b>QL</b>	<b>Quantity Limits</b> —Specifies the largest quantity of medication covered per copayment or in a defined period of time.
<b>SP</b>	<b>Specialty Medication</b> —Specialty medications treat complex or rare conditions and may require special storage and handling. You may be required to obtain these medications from a specialty pharmacy.
<b>ST</b>	<b>Step Therapy (referred to as First Start in New Jersey)</b> —Requires prior authorization and may require you to try one or more other medications before the medication you are requesting may be covered.

# Reading your PDL (continued)

## Coverage details

Some drug classes in this PDL have additional/important coverage details. Review this list to see if drug classes that apply to you are noted.

- **Diabetes: continuous glucose monitors, sensors**

Coverage is set by the consumer's prescription drug benefit plan. Please consult plan documents regarding benefit coverage and cost-share. Diabetic self-management items, including continuous glucose monitors, may be covered under the consumer pharmacy and/or medical plan depending on the benefit.

- **Endocrine: growth hormone**

Coverage is set by the consumer's prescription drug benefit plan. Please consult plan documents regarding benefit coverage and cost-share.

- **Infertility**

Coverage is set by the consumer's prescription drug benefit plan. Please consult plan documents regarding benefit coverage and cost-share. This is not a covered benefit for Neighborhood Health Plan.

- **Medications for sexual dysfunction**

Coverage is set by the consumer's prescription drug benefit plan. Please consult plan documents regarding benefit coverage and cost-share.

## Questions

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



Call the toll-free member phone number on your ID card.



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

- View your pharmacy benefit and coverage information, including prescription history
- View medication interactions and side effects
- Locate a participating retail pharmacy by ZIP code
- Look up possible lower-cost medication alternatives
- Compare medication pricing and options

And, if home delivery services are included in your pharmacy benefit, you can also:

- Refill prescriptions
- Check the status of your order
- Set up reminders for refills
- Manage your account



Drug Name	Drug Tier	Requirements & Limits	Drug Name	Drug Tier	Requirements & Limits
<b>Analgesics - Drugs for Pain</b>			lidocaine-prilocaine external cream	1	
acetaminophen-codeine	1		lorcet	1	
acetaminophen-codeine #2	1		lorcet hd	1	
acetaminophen-codeine #3	1		lorcet plus	1	
acetaminophen-codeine #4	1		LORTAB	4	
apap-caff-dihydrocodeine oral capsule	NF	QL	MORPHABOND ER	NF	PA, ST, QL
ARYMO ER	NF	PA, ST, QL	morphine sulfate (concentrate) oral solution 100 mg/5ml, 20 mg/ml	1	
BELBUCA	NF	PA, QL	morphine sulfate er oral capsule extended release 24 hour	NF	PA, ST, QL
butalbital-apap-caffeine oral capsule 50-300-40 mg	3	QL	morphine sulfate er oral tablet extended release	1	PA, QL
butalbital-apap-caffeine oral capsule 50-325-40 mg	1	QL	morphine sulfate oral	1	
butalbital-apap-caffeine oral tablet	1	QL	morphine sulfate rectal	1	
CONZIP	NF	QL	MS CONTIN	3	PA, ST, QL
DILAUDID ORAL	4		NALOCET	NF	QL
DVORAH	NF	QL	NORCO	4	
endocet	1		NUCYNTA	4	QL
ESGIC	4	QL	NUCYNTA ER	3	PA, QL
fentanyl transdermal patch 72 hour 100 mcg/hr, 12 mcg/hr, 25 mcg/hr, 50 mcg/hr, 75 mcg/hr	2	PA, QL	OXAYDO	NF	QL
fentanyl transdermal patch 72 hour 37.5 mcg/hr, 62.5 mcg/hr, 87.5 mcg/hr	NF	PA, ST, QL	OXYCODONE HCL ER	NF	PA, ST, QL
FIORICET	4	QL	oxycodone hcl oral capsule	1	
hydrocodone-acetaminophen oral solution 10-325 mg/15ml	1		oxycodone hcl oral concentrate 100 mg/5ml	1	
hydrocodone-acetaminophen oral solution 7.5-325 mg/15ml	2		oxycodone hcl oral solution	1	
hydrocodone-acetaminophen oral tablet 10-300 mg, 5-300 mg, 7.5-300 mg	NF		oxycodone hcl oral tablet	1	
hydrocodone-acetaminophen oral tablet 10-325 mg, 5-325 mg, 7.5-325 mg	1		oxycodone-acetaminophen oral tablet 10-325 mg, 2.5-325 mg, 5-325 mg, 7.5-325 mg	1	
hydromorphone hcl er	NF	PA, ST, QL	OXYCONTIN	NF	PA, ST, QL
hydromorphone hcl oral	1		premium lidocaine	2	QL
hydromorphone hcl rectal	1		PRIMLEV	NF	
HYSINGLA ER	NF	PA, ST, QL	ROXICODONE ORAL TABLET 15 MG, 30 MG	4	
KADIAN ORAL CAPSULE EXTENDED RELEASE 24 HOUR 200 MG	NF	PA, ST, QL	ROXICODONE ORAL TABLET 5 MG	3	
lidocaine external ointment	2	QL	SUBSYS	NF	PA, QL
lidocaine external patch 5 %	3	PA, QL	tramadol hcl er (biphasic)	NF	QL
			TRAMADOL HCL ER ORAL CAPSULE EXTENDED RELEASE 24 HOUR 100 MG, 200 MG, 300 MG	NF	QL
			tramadol hcl er oral capsule extended release 24 hour 150 mg	1	QL

See page 7 for coverage details. Drugs listed as ST are subject to Prior Authorization in CT, NJ and NY.





Drug Name	Drug Tier	Requirements & Limits
tramadol hcl er oral tablet extended release 24 hour	2	QL
tramadol hcl oral tablet 50 mg	1	QL
TYLENOL WITH CODEINE #3	4	
ULTRAM	4	QL
VANATOL LQ	2	PA, QL
VANATOL S	2	PA, QL
vicodin hp oral tablet 10-300 mg	NF	
XTAMPZA ER	2	PA, QL
ZEBUTAL	4	QL
ZOXYDOL ER	NF	PA, ST, QL
ZYLKID	NF	PA, QL

#### Analgesics - Drugs for Pain and Inflammation

celecoxib oral	2	QL
diclofenac potassium	1	
diclofenac sodium er	1	
diclofenac sodium oral	1	
diclofenac sodium transdermal gel 1 %	NF	
diclofenac sodium transdermal solution	NF	
EC-NAPROSYN	3	
ec-naproxen	1	
etodolac	1	
etodolac er	1	
ibu	1	
ibuprofen oral suspension	NF	
ibuprofen oral tablet 400 mg, 600 mg, 800 mg	1	
INDOCIN ORAL	NF	
INDOCIN RECTAL	3	
indomethacin er	1	
indomethacin oral capsule 25 mg, 50 mg	1	
ketorolac tromethamine oral	1	
meloxicam oral	1	
MOBIC	4	
nabumetone oral	1	
NAPRELAN ORAL TABLET EXTENDED RELEASE 24 HOUR 750 MG	NF	
NAPROSYN ORAL SUSPENSION	4	PA
naproxen dr	1	

Drug Name	Drug Tier	Requirements & Limits
naproxen oral suspension	1	PA
naproxen oral tablet	1	
naproxen sodium er	NF	
naproxen sodium oral tablet 275 mg, 550 mg	1	
PENNSAID	NF	
QMIIZ ODT	NF	
RELAFEN DS	NF	
SPRIX	NF	ST, QL
VIVLODEX	NF	QL
ZIPSOR	NF	

#### Anti-Addiction / Substance Abuse Treatment Agents

BUNAVAIL	NF	PA, QL
buprenorphine hcl sublingual	1	QL
buprenorphine hcl-naloxone hcl	2	QL
CHANTIX	4	PA, H
EVZIO	NF	PA, QL
naloxone hcl injection solution	1	
naloxone hcl injection solution cartridge	1	
naloxone hcl injection solution prefilled syringe	1	
naltrexone hcl oral	1	
NARCAN	2	QL
ZUBSOLV	2	QL

#### Antibacterials - Drugs for Infections

amoxicillin	1	
amoxicillin-potassium clavulanate er	NF	
amoxicillin-potassium clavulanate oral	1	
AUGMENTIN ORAL SUSPENSION RECONSTITUTED 125-31.25 MG/5ML	NF	
avidoxy	1	
azithromycin oral	1	
BACTRIM	4	
BACTRIM DS	4	
cefadroxil	1	
cefdinir	1	
cefuroxime axetil	1	
CENTANY	4	QL
CENTANY AT	NF	
cephalexin	1	

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Drug Name	Drug Tier	Requirements & Limits
CIPRO ORAL TABLET	4	
ciprofloxacin hcl oral	1	
clarithromycin er	2	
clarithromycin oral suspension reconstituted	2	
clarithromycin oral tablet	1	
CLEOCIN ORAL CAPSULE 150 MG, 300 MG	4	
CLEOCIN ORAL CAPSULE 75 MG	2	
clindamycin hcl oral	1	
CLINDESSE	2	
coremino	NF	PA
DIFICID	4	QL
DORYX MPC	NF	
doxycycline hyclate oral capsule	2	
doxycycline hyclate oral tablet 100 mg	2	
doxycycline hyclate oral tablet 150 mg, 50 mg, 75 mg	NF	
doxycycline hyclate oral tablet 20 mg	1	
doxycycline hyclate oral tablet delayed release	NF	
doxycycline monohydrate oral capsule 100 mg, 50 mg	1	
doxycycline monohydrate oral capsule 150 mg, 75 mg	NF	
doxycycline monohydrate oral suspension reconstituted	3	
doxycycline monohydrate oral tablet	1	
FLAGYL	4	
KEFLEX	4	
LEVAQUIN ORAL TABLET 500 MG, 750 MG	4	
levofloxacin oral	1	
MACROBID	4	
MACRODANTIN	4	
metronidazole oral	1	
metronidazole vaginal	2	
minocycline hcl er oral tablet extended release 24 hour	NF	PA
minocycline hcl oral capsule	1	
minocycline hcl oral tablet	NF	

Drug Name	Drug Tier	Requirements & Limits
MINOLIRA	NF	PA
mondoxyne nl oral capsule 100 mg	1	
mondoxyne nl oral capsule 75 mg	NF	
morgidox oral	2	
mupirocin calcium	3	QL
mupirocin external	1	QL
nitrofurantoin macrocrystal oral	1	
nitrofurantoin monohydrate macrocrystals	1	
NUVESSA	NF	
okebo	NF	
penicillin v potassium	1	
sulfamethoxazole-trimethoprim oral	1	
sulfatrim pediatric	1	
vandazole	2	
VIBRAMYCIN ORAL CAPSULE	4	
VIBRAMYCIN ORAL SUSPENSION RECONSTITUTED	4	
XEPI	3	QL
XIMINO	NF	PA
ZITHROMAX ORAL	4	
ZITHROMAX TRI-PAK	4	
ZITHROMAX Z-PAK	4	
<b>Anticoagulants - Drugs to Treat or Prevent Blood Clots</b>		
BEVYXXA	3	QL
COUMADIN	3	
ELIQUIS	2	QL
enoxaparin sodium	2	QL
jantoven	1	
PRADAXA	2	QL
warfarin sodium oral	1	
XARELTO	2	QL
<b>Anticonvulsants - Drugs for Seizures</b>		
carbamazepine er oral capsule extended release 12 hour	2	
carbamazepine er oral tablet extended release 12 hour	3	
carbamazepine oral	1	
CARBATROL	4	
DEPAKOTE	4	PA
DEPAKOTE ER	4	PA, ST
DEPAKOTE SPRINKLES	4	PA, ST

See page 7 for coverage details. Drugs listed as ST are subject to Prior Authorization in CT, NJ and NY.



Drug Name	Drug Tier	Requirements & Limits
divalproex sodium er	2	
divalproex sodium oral capsule delayed release sprinkle	2	
divalproex sodium oral tablet delayed release	1	
epitol	1	
gabapentin oral	1	
KEPPRA ORAL	4	PA, ST
KEPPRA XR	4	PA, ST
LAMICTAL	4	PA, ST
LAMICTAL ODT ORAL KIT	3	PA, ST
LAMICTAL ODT ORAL TABLET DISPERSIBLE	4	PA, ST
LAMICTAL STARTER	4	PA, ST
LAMICTAL XR ORAL KIT	NF	PA, ST
lamotrigine er	NF	PA
lamotrigine oral tablet	1	
lamotrigine oral tablet chewable	1	
lamotrigine oral tablet dispersible	3	PA, ST
lamotrigine starter kit-blue	1	
lamotrigine starter kit-green	1	
lamotrigine starter kit-orange	1	
levetiracetam er	2	
levetiracetam oral	1	
NAYZILAM SPRAY 5 MG	3	PA, QL
NEURONTIN	4	PA, ST
oxcarbazepine	1	
OXTELLAR XR	NF	PA, ST
roweepra	1	
roweepra xr	2	
SPRITAM	NF	PA, ST
subvenite	1	
subvenite starter kit-blue	1	
subvenite starter kit-green	1	
subvenite starter kit-orange	1	
TEGRETOL	3	
TEGRETOL-XR	4	
TOPAMAX	4	PA, ST
TOPAMAX SPRINKLE	4	PA, ST
topiramate er	NF	PA, ST
topiramate oral	1	
TRILEPTAL	4	PA, ST

Drug Name	Drug Tier	Requirements & Limits
TROKENDI XR	NF	PA, ST
VALTOCO	3	PA, QL
VIMPAT ORAL SOLUTION	3	PA
VIMPAT ORAL TABLET	NF	PA
XCOPRI PAK	NF	PA
XCOPRI TABLET	NF	PA
ZONEGRAN	4	PA, ST
zonisamide oral	1	

#### Antidementia Agents - Drugs for Alzheimer's Disease and Dementia

ARICEPT ORAL TABLET 10 MG, 5 MG	3	
donepezil hcl oral tablet 10 mg, 5 mg	1	
donepezil hcl oral tablet 23 mg	NF	
donepezil hcl oral tablet dispersible	1	

#### Antidepressants - Drugs for Depression

amitriptyline hcl oral	1	
bupropion hcl er (sr)	1	
bupropion hcl er (xl) oral tablet extended release 24 hour 150 mg, 300 mg	1	
BUPROPION HCL ER (XL) ORAL TABLET EXTENDED RELEASE 24 HOUR 450 MG	NF	QL
bupropion hcl oral	1	
citalopram hydrobromide	1	
desvenlafaxine succinate er	3	QL
doxepin hcl oral capsule	1	
doxepin hcl oral concentrate	1	
DRIZALMA SPRINKLE	4	PA, QL
duloxetine hcl oral capsule delayed release particles 20 mg, 30 mg, 60 mg	2	QL
duloxetine hcl oral capsule delayed release particles 40 mg	NF	
escitalopram oxalate oral solution	3	
escitalopram oxalate oral tablet	1	
fluoxetine hcl oral capsule	1	
fluoxetine hcl oral capsule delayed release	3	QL
fluoxetine hcl oral solution	1	
fluoxetine hcl oral tablet 10 mg	3	QL
fluoxetine hcl oral tablet 20 mg	3	

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Drug Name	Drug Tier	Requirements & Limits
fluoxetine hcl oral tablet 60 mg	NF	
fluvoxamine maleate	1	
fluvoxamine maleate er	4	QL
FORFIVO XL	NF	QL
mirtazapine oral	1	
nortriptyline hcl oral	1	
PAMELOR	4	
paroxetine hcl	1	
paroxetine hcl er	3	QL
PAXIL CR	4	QL
PAXIL ORAL SUSPENSION	3	
PAXIL ORAL TABLET	4	
REMERON	4	
REMERON SOLTAB	4	
sertraline hcl oral	1	
trazodone hcl oral	1	
TRINTELLIX	NF	ST, QL
venlafaxine hcl	1	
venlafaxine hcl er oral capsule extended release 24 hour	1	
venlafaxine hcl er oral tablet extended release 24 hour	NF	QL
VIIBRYD	4	QL
<b>Antiemetics - Drugs for Nausea and Vomiting</b>		
BONJESTA	NF	PA
doxylamine-pyridoxine	NF	PA
metoclopramide hcl oral solution 5 mg/5ml	1	
metoclopramide hcl oral tablet	1	
metoclopramide hcl oral tablet dispersible	NF	
ondansetron hcl oral	1	
ondansetron odt	1	
phenadoz	1	
prochlorperazine maleate oral	1	
promethazine hcl oral tablet	1	
promethazine hcl rectal	1	
promethegan	1	
REGLAN	4	
scopolamine	3	
TRANSDERM SCOP (1.5 MG)	4	
VARUBI (180 MG DOSE)	2	QL

Drug Name	Drug Tier	Requirements & Limits
ZOFRAN	4	
ZUPLENZ	NF	QL
<b>Antifungals - Drugs for Fungal Infections</b>		
ciclodan	1	
ciclopirox external gel	1	
ciclopirox external shampoo	2	
ciclopirox external solution	1	
ciclopirox treatment	NF	
CRESEMBA ORAL	3	
DIFLUCAN ORAL SUSPENSION RECONSTITUTED	4	
DIFLUCAN ORAL TABLET 100 MG, 150 MG, 200 MG	4	
DIFLUCAN ORAL TABLET 50 MG	3	
EXTINA	4	QL
fluconazole oral	1	
GYNAZOLE-1	3	
ketoconazole external cream	1	QL
ketoconazole external foam	3	QL
ketoconazole external shampoo	1	
ketodan external foam	3	QL
NIZORAL	4	
nyamyc	1	QL
nystatin external	1	QL
nystatin mouth/throat	1	
nystop	1	QL
terbinafine hcl oral	1	QL
terconazole	1	
XOLEGEL	NF	
<b>Antigout Agents - Drugs for Gout</b>		
allopurinol oral	1	
COLCHICINE ORAL CAPSULE	NF	
colchicine oral tablet	NF	
COLCRYS	NF	
febuxostat	NF	ST, QL
GLOPERBA	4	PA
MITIGARE	2	
ZYLOPRIM	4	
<b>Antimigraine Agents - Drugs for Migraines</b>		
AIMOVIG	2	PA, ST, QL
AMERGE	4	QL
eletriptan hydrobromide	NF	QL

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Drug Name	Drug Tier	Requirements & Limits
EMGALITY	2	PA, ST, QL
EMGALITY (300 MG DOSE)	2	PA, ST, QL
naratriptan hcl	1	QL
ONZETRA XSAIL	NF	QL
REYVOW TABLET	2	PA, ST, QL
rizatriptan benzoate	1	QL
sumatriptan succinate oral	1	QL
sumatriptan succinate refill	1	QL
sumatriptan succinate subcutaneous	1	QL
UBRELVY TABLET	2	PA, ST, QL
ZEMBRACE SYMTOUCH	NF	QL
<b>Antineoplastics - Drugs for Cancer</b>		
anastrozole oral	1	
bexarotene	NF	SP
capecitabine	NF	QL, SP
ERLEADA	3	PA, QL, SP
IBRANCE ORAL CAPSULE	3	PA, QL, SP
IDHIFA	3	PA, QL, SP
imatinib mesylate	1	PA, QL, SP
letrozole oral	1	
LYNPARZA	3	PA, QL, SP
mercaptopurine oral	1	
NUBEQA	3	PA, QL, SP
PURIXAN	4	PA, SP
REVLIMID	3	PA, QL, SP
SOLTAMOX	NF	
tamoxifen citrate oral tablet 10 mg	1	
tamoxifen citrate oral tablet 20 mg	1	H-PA
TARGRETIN EXTERNAL	4	QL, SP
TARGRETIN ORAL	3	SP
TASIGNA	3	PA, ST, QL, SP
VERZENIO	3	PA, QL, SP
XELODA	1	QL, SP
ZEJULA	3	PA, QL, SP
<b>Antiparasitics - Drugs for Parasitic Infections</b>		
ARAKODA	4	QL
atovaquone-proguanil hcl	2	
ELIMITE	4	
hydroxychloroquine sulfate oral	1	
KRINTAFEL	1	QL
MALARONE	4	

Drug Name	Drug Tier	Requirements & Limits
permethrin external	1	
<b>Antiparkinson Agents - Drugs for Parkinson's Disease</b>		
carbidopa-levodopa	1	
carbidopa-levodopa er	1	
DUOPA	4	PA
INBRIJA	3	PA, QL, SP
MIRAPEX	4	
NOURIANZ ORAL TABLET	NF	PA, QL
pramipexole dihydrochloride	1	
pramipexole dihydrochloride er	NF	
ropinirole hcl	1	
ropinirole hcl er	NF	
RYTARY	NF	
SINEMET	4	
<b>Antiplatelets - Drugs for Heart Attack and Stroke Prevention</b>		
BRILINTA	4	QL
clopidogrel bisulfate oral	1	
ZONTIVITY	4	QL
<b>Antipsychotics - Drugs for Mood Disorders</b>		
ABILIFY MYCITE	NF	PA, QL
aripiprazole oral solution	4	
aripiprazole oral tablet	2	QL
aripiprazole oral tablet dispersible	NF	QL
LATUDA	NF	QL
olanzapine oral tablet	1	QL
olanzapine oral tablet dispersible	2	QL
quetiapine fumarate	1	
quetiapine fumarate er	NF	ST, QL
risperidone	1	
SAPHRIS	NF	ST, QL
ziprasidone hcl	2	QL
<b>Antivirals - Drugs for Viral Infections</b>		
acyclovir oral	1	
ATRIPLA	NF	ST, QL
BARACLUDE ORAL SOLUTION	3	SP
CIMDUO	3	QL
DESCOVY	NF	PA, ST, QL
DOVATO	3	QL
emtricitabine/tenofovir disoproxil fumarate	1	QL, H
entecavir	3	SP

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Drug Name	Drug Tier	Requirements & Limits
EPCLUSA	2	PA, QL, SP
GENVOYA	4	QL
HARVONI ORAL TABLET 45-200 MG	3	PA, ST, QL, SP
HARVONI ORAL TABLET 90-400 MG	2	PA, ST, QL, SP
ISENTRESS	3	
ISENTRESS HD	3	
JULUCA	2	QL
LEDIPASVIR-SOFOSBUVIR	2	PA, ST, QL, SP
LEDIP-SOFOSB ORAL TABLET 90-400MG	2	PA, ST, QL, SP
MAVYRET	3	PA, QL, SP
NORVIR ORAL PACKET	3	
NORVIR ORAL SOLUTION	3	
ODEFSEY	4	QL
oseltamivir phosphate oral capsule	2	
oseltamivir phosphate oral suspension reconstituted	2	QL
PREZCOBIX	3	
PREZISTA	3	
ritonavir	3	SP
SITAVIG	NF	QL
SOFOS/VELPAT ORAL TABLET 400-100	2	PA, QL, SP
SOFOSBUVIR-VELPATASVIR	2	PA, QL, SP
STRIBILD	4	QL
SYMFI	3	QL
SYMFI LO	3	QL
TEMIXYS	NF	QL
tenofovir disoproxil fumarate	3	
TIVICAY	4	
TRIUMEQ	3	QL
TRUVADA	NF	QL
valacyclovir hcl oral	1	QL
VEMLIDY	4	ST, SP
VIREAD ORAL POWDER	4	
VIREAD ORAL TABLET 150 MG, 200 MG, 250 MG	2	
VOSEVI	3	PA, QL, SP
XOFLUZA	3	QL
ZEPATIER	3	PA, QL, SP
ZOVIRAX ORAL SUSPENSION	4	

Drug Name	Drug Tier	Requirements & Limits
<b>Anxiolytics - Drugs for Anxiety</b>		
alprazolam er	1	
alprazolam intensol	1	
alprazolam oral	1	
alprazolam xr	1	
buspirone hcl oral	1	
clonazepam oral	1	
diazepam intensol	1	
diazepam oral	1	
HALCION	4	
hydroxyzine hcl oral	1	
hydroxyzine pamoate oral	1	
lorazepam intensol	1	
lorazepam oral concentrate 2 mg/ml	1	
lorazepam oral tablet	1	
triazolam	1	
VISTARIL	4	
<b>Bipolar Agents - Drugs for Mood Disorders</b>		
lithium carbonate er	1	
lithium carbonate oral	1	
LITHOBID	4	
<b>Cardiovascular Agents - Drugs for Heart and Circulation Conditions</b>		
ACCUPRIL	4	
acetazolamide er	1	
acetazolamide oral	1	
ADALAT CC ORAL TABLET EXTENDED RELEASE 24 HOUR 60 MG	4	
ALDACTONE	4	
aliskiren fumarate	NF	
ALTACE	4	
ALTOPREV	NF	
amiodarone hcl oral	1	
amlodipine besylate oral	1	
amlodipine besylate-benazepril hcl	1	
amlodipine besylate-valsartan	2	
atenolol oral	1	
atenolol-chlorthalidone	1	
atorvastatin calcium oral tablet 10 mg, 20 mg	1	QL, H-PA

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Drug Name	Drug Tier	Requirements & Limits
atorvastatin calcium oral tablet 40 mg, 80 mg	1	QL
AVALIDE	4	
AVAPRO	4	
benazepril hcl oral	1	
benazepril-hydrochlorothiazide	1	
BIDIL	2	
bisoprolol fumarate	1	
bisoprolol-hydrochlorothiazide	1	
BYSTOLIC	NF	
CALAN SR	4	
CARDIZEM LA ORAL TABLET EXTENDED RELEASE 24 HOUR 120 MG	NF	
CARDURA	4	
CAROSPIR	4	PA
cartia xt	2	
carvedilol	1	
CATAPRES	4	
chlorthalidone	1	
clonidine hcl oral	1	
colesevelam hcl	NF	
COREG	4	
CORGARD	4	
CORLANOR	3	PA, QL
COZAAR	4	
diltiazem hcl er coated beads	2	
diltiazem hcl er oral capsule extended release 12 hour	1	
diltiazem hcl oral	1	
dilt-xr	1	
doxazosin mesylate oral	1	
DYAZIDE	4	
EDARBI	3	
EDARBYCLOR	3	
enalapril maleate oral	1	
EPANED	4	PA
EZALLOR SPRINKLE	3	PA
ezetimibe	2	
ezetimibe-simvastatin	NF	
fenofibrate oral capsule 150 mg, 50 mg	NF	

Drug Name	Drug Tier	Requirements & Limits
fenofibrate oral tablet 120 mg, 40 mg, 48 mg	NF	
fenofibrate oral tablet 160 mg, 145 mg, 54 mg	2	
flecainide acetate	1	
FLOLIPID	4	PA
furosemide oral	1	
gemfibrozil oral	1	
GONITRO	NF	QL
guanfacine hcl	1	
HEMANGEOL	NF	
hydralazine hcl oral	1	
hydrochlorothiazide oral	1	
HYZAAR	4	
irbesartan	1	
irbesartan-hydrochlorothiazide	1	
isosorbide mononitrate	1	
isosorbide mononitrate er	1	
KAPSPARGO SPRINKLE	4	
labetalol hcl oral	1	
LASIX	4	
LIPOFEN	NF	
lisinopril oral	1	
lisinopril-hydrochlorothiazide	1	
LOPID	4	
LOPRESSOR	4	
losartan potassium	1	
losartan potassium-hctz	1	
LOTENSIN	4	
LOTENSIN HCT	4	
LOTREL	4	
lovastatin	1	H
matzim la	2	
MAXZIDE	4	
MAXZIDE-25	4	
metoprolol succinate er oral tablet extended release 24 hour 100 mg, 200 mg, 50 mg	2	
metoprolol succinate er oral tablet extended release 24 hour 25 mg	1	
metoprolol tartrate oral tablet 100 mg, 25 mg, 50 mg	1	

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Drug Name	Drug Tier	Requirements & Limits
metoprolol tartrate oral tablet 37.5 mg, 75 mg	NF	
MINIPRESS	4	
minitran	1	
MULTAQ	NF	PA
nadolol oral	1	
NEXLETOL TABLET	2	PA, ST, QL
NEXLIZET TABLET	2	PA, ST, QL
niacin (antihyperlipidemic)	2	
niacin er (antihyperlipidemic)	NF	
niacor	2	
NIASPAN	2	
nifedipine er	1	
nifedipine er osmotic release	1	
nifedipine oral	1	
NITRO-BID	2	
NITRO-DUR	3	
nitroglycerin sublingual	1	
nitroglycerin transdermal	1	
nitroglycerin translingual	NF	QL
NITROMIST	4	QL
NITROSTAT	4	
nitro-time	1	
olmesartan medoxomil oral	2	
olmesartan medoxomil-hctz	2	
omega-3-acid ethyl esters	NF	
PACERONE ORAL TABLET 100 MG, 400 MG	3	
pacerone oral tablet 200 mg	1	
PRALUENT	3	PA, ST, QL
PRAVACHOL	4	
pravastatin sodium	1	
prazosin hcl oral	1	
PRINIVIL	4	
PROCARDIA	4	
PROCARDIA XL	4	
propranolol hcl er	2	
propranolol hcl oral	1	
QBRELIS	4	PA
quinapril hcl	1	
ramipril	1	
ranolazine er	2	

Drug Name	Drug Tier	Requirements & Limits
REPATHA	3	PA, ST, QL
rosuvastatin calcium	2	QL
simvastatin oral tablet 10 mg, 20 mg, 40 mg, 5 mg	1	H-PA
simvastatin oral tablet 80 mg	1	
sotalol hcl oral	1	
SOTYLIZE	4	PA
spironolactone oral	1	
TEKTURNA HCT	NF	
telmisartan	2	
TOPROL XL	4	
toremide	1	
triamterene-hctz	1	
valsartan	2	
valsartan-hydrochlorothiazide	1	
VASCEPA ORAL CAPSULE 0.5 GM	4	PA
VASCEPA ORAL CAPSULE 1 GM	3	PA
verapamil hcl er oral capsule extended release 24 hour 100 mg, 200 mg, 300 mg	3	
verapamil hcl er oral capsule extended release 24 hour 120 mg, 180 mg, 240 mg, 360 mg	1	
verapamil hcl er oral tablet extended release	1	
verapamil hcl oral	1	
VERELAN	4	
VERELAN PM	4	
WELCHOL	2	
ZIAC ORAL TABLET 10-6.25 MG, 2.5-6.25 MG	3	
ZIAC ORAL TABLET 5-6.25 MG	4	
ZOCOR ORAL TABLET 10 MG, 20 MG, 40 MG, 80 MG	4	
<b>Central Nervous System Agents - Drugs for Attention Deficit Disorder</b>		
ADDERALL XR	2	QL
ADHANSIA XR	NF	PA, QL
amphetamine-dextroamphetamine	1	PA
amphetamine-dextroamphetamine er	NF	QL
APTENSIO XR	NF	PA, QL
atomoxetine hcl	4	QL
CONCERTA	2	PA, QL

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Drug Name	Drug Tier	Requirements & Limits
dexmethylphenidate hcl	1	PA
dexmethylphenidate hcl er	3	PA, QL
dextroamphetamine sulfate er	3	PA
dextroamphetamine sulfate oral solution	1	PA
dextroamphetamine sulfate oral tablet	3	PA
FOCALIN	4	PA
guanfacine hcl er	2	QL
JORNAY PM	NF	PA, QL
metadate er	NF	PA, QL
METHYLIN	4	PA
methylphenidate hcl er	NF	PA, QL
methylphenidate hcl er (cd)	2	PA, QL
methylphenidate hcl er (la)	2	PA, QL
methylphenidate hcl oral solution	1	PA
methylphenidate hcl oral tablet	1	PA
methylphenidate hcl oral tablet chewable	3	PA
MYDAYIS	NF	PA, QL
PROCENTRA	3	PA
QUILLICHEW ER	NF	PA, QL
QUILLIVANT XR	NF	PA, QL
relexxii	NF	PA, QL
RITALIN	4	PA
VYVANSE	NF	PA, QL
ZENZEDI ORAL TABLET 15 MG, 2.5 MG, 20 MG, 30 MG, 7.5 MG	NF	PA
<b>Central Nervous System Agents - Drugs for Multiple Sclerosis</b>		
AUBAGIO	4	PA, QL, SP
AVONEX	3	PA, QL, SP
BAFIERTAM CAPSULE	3	PA, QL, SP
BETASERON	3	PA, QL, SP
dalfampridine er	3	PA, QL, SP
dimethyl fumarate	3	PA, QL, SP
EXTAVIA	NF	PA, ST, QL, SP
GILENYA ORAL CAPSULE	4	PA, QL, SP
glatiramer acetate	3	PA, QL, SP
glatopa	3	PA, QL, SP
MAVENCLAD	4	PA, ST, QL, SP
MAYZENT	4	PA, QL, SP
PLEGRIDY	4	PA, QL, SP

Drug Name	Drug Tier	Requirements & Limits
REBIF	NF	PA, QL, SP
REBIF REBIDOSE	NF	PA, QL, SP
REBIF REBIDOSE TITRATION PACK	NF	PA, QL, SP
REBIF TITRATION PACK	NF	PA, QL, SP
TECFIDERA	NF	PA, QL, SP
<b>Central Nervous System Agents - Miscellaneous</b>		
AUSTEDO	3	PA, QL, SP
LYRICA CR	NF	ST, QL
NUDEXTA	2	PA
pregabalin oral capsule	NF	QL
pregabalin oral solution	NF	QL
RILUTEK	4	SP
riluzole	1	SP
TIGLUTIK	4	PA
<b>Dental and Oral Agents - Drugs for Mouth and Throat Conditions</b>		
cavarest	1	
chlorhexidine gluconate mouth/throat	1	
clinpro 5000	1	
denta 5000 plus	1	
dentagel	1	
fluoridex	1	
fluoridex enhanced whitening	1	
lidocaine hcl mouth/throat	1	
lidocaine viscous hcl	1	
NAFRINSE DAILY/NEUTRAL	2	
NAFRINSE WEEKLY	4	
neutral sodium fluoride	1	
paroex	1	
PERIDEX	4	
periogard	1	
PREVIDENT 5000 BOOSTER PLUS	3	
PREVIDENT 5000 DRY MOUTH	4	
PREVIDENT 5000 ORTHO DEFENSE	3	
PREVIDENT 5000 PLUS	4	
PREVIDENT DENTAL	4	
PREVIDENT MOUTH/THROAT	3	
sf	1	
sf 5000 plus	1	
sodium fluoride 5000 plus	1	

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Drug Name	Drug Tier	Requirements & Limits
sodium fluoride dental	1	
<b>Dermatological Agents - Drugs for Skin Conditions</b>		
ABSORICA	NF	PA
ACZONE EXTERNAL GEL 7.5 %	NF	QL
ALA SCALP	4	
ala-cort external cream 1 %	NF	
ala-cort external cream 2.5 %	1	
ALDARA	4	QL
ALTRENO	NF	PA, QL
amnestem	2	
AMZEEQ AER 4%	NF	PA, QL
avar cleanser	1	
azelaic acid external	3	
betamethasone dipropionate aug external cream	1	
betamethasone dipropionate aug external gel	1	
betamethasone dipropionate aug external lotion	3	
betamethasone dipropionate aug external ointment	3	
betamethasone dipropionate external cream	2	
betamethasone dipropionate external lotion	1	
betamethasone dipropionate external ointment	2	
calcipotriene-betameth diprop external ointment	3	QL
calcitriol external	1	QL
CAPEX	2	
CARAC	2	
claravis	2	
CLEOCIN-T EXTERNAL GEL	4	QL
CLEOCIN-T EXTERNAL LOTION	4	
clindacin etz external swab	1	
clindacin-p	1	
CLINDAGEL	NF	QL
clindamycin phos-benzoyl perox external gel 1.2-5 %	3	QL
clindamycin phosphate external foam	3	
clindamycin phosphate external lotion	3	

Drug Name	Drug Tier	Requirements & Limits
clindamycin phosphate external solution	1	QL
clindamycin phosphate external swab	1	
CLINDAMYCIN PHOSPHATE GEL 1 % EXTERNAL	NF	
clindamycin phosphate gel 1 % external	3	QL
clobetasol propionate external cream	2	QL
clobetasol propionate external foam	NF	QL
clobetasol propionate external gel	2	QL
clobetasol propionate external liquid	1	QL
clobetasol propionate external lotion	NF	QL
clobetasol propionate external ointment	2	QL
clobetasol propionate external shampoo	NF	QL
clobetasol propionate external solution	1	QL
clodan external shampoo	NF	QL
clotrimazole-betamethasone external cream	1	QL
clotrimazole-betamethasone external lotion	1	
dapsone external gel 5 %	NF	QL
DERMA-SMOOTH/FS BODY	4	QL
DERMA-SMOOTH/FS SCALP	4	
desonide cream, lotion, ointment	3	QL
desonide gel	NF	ST, QL
DESOWEN	3	QL
DIPROLENE	4	
DIPROLENE AF	4	
DUPIXENT	4	PA, ST, QL, SP
EFUDEX	4	
ENSTILAR	4	QL
EUCRISA	3	ST, QL
EVOCLIN	4	
FINACEA EXTERNAL GEL, FOAM	4	
fluocinolone acetonide body	3	QL
fluocinolone acetonide external cream	3	QL

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Drug Name	Drug Tier	Requirements & Limits
fluocinolone acetonide external ointment	2	QL
fluocinolone acetonide external solution	3	QL
fluocinolone acetonide scalp	3	
fluocinonide external cream 0.05 %	1	
fluocinonide external cream 0.1 %	NF	QL
fluocinonide external gel	1	
fluocinonide external ointment	1	
fluocinonide external solution	1	
FLUOROPLEX	4	
FLUOROURACIL EXTERNAL CREAM 0.5 %	4	
fluorouracil external cream 5 %	1	
fluorouracil external solution	1	
hydrocortisone external cream 1 %	NF	
hydrocortisone external cream 2.5 %	1	
hydrocortisone external lotion 2.5 %	1	
hydrocortisone external ointment 1 %, 2.5 %	1	
imiquimod external	1	QL
IMIQUIMOD PUMP	NF	QL
IMPOYZ	NF	QL
isotretinoin oral	2	
METROCREAM	4	
METROLOTION	4	
metronidazole external cream	1	
metronidazole external gel 0.75 %	1	
metronidazole external gel 1 %	NF	
metronidazole external lotion	1	
MIRVASO	4	PA, QL
mometasone furoate external	1	
myorisan	2	
neuac external gel	3	QL
NORITATE	NF	
PICATO	NF	QL
RHOFADE CREAM 1%	4	PA, QL
rosadan external cream	1	
rosadan external gel	1	
SERNIVO	NF	QL
SOOLANTRA CREAM 1%	NF	QL
sss 10-5	1	

Drug Name	Drug Tier	Requirements & Limits
sulfacetamide sodium-sulfur external cream 10-2 %, 10-5 %	1	
sulfacetamide sodium-sulfur external emulsion	1	
sulfacetamide sodium-sulfur external liquid 9-4 %, 9-4.5 %	1	
sulfacetamide sodium-sulfur external lotion 10-5 %	1	
sulfacetamide sodium-sulfur external pad	1	
sulfacetamide sodium-sulfur external suspension 10-5 %	1	
sulfacleanse 8/4	NF	
sulfamez wash	1	
TACLONEX EXTERNAL SUSPENSION	NF	QL
tazarotene external	NF	PA, QL
TAZORAC EXTERNAL CREAM	NF	PA, QL
TAZORAC EXTERNAL GEL	NF	PA, QL
TEMOVATE	4	QL
TEXACORT	2	
TOLAK	NF	
tretinoin external cream	3	QL
tretinoin external gel	NF	QL
triamcinolone acetonide external aerosol solution	2	QL
triamcinolone acetonide external cream 0.025 %, 0.1 %	1	
triamcinolone acetonide external cream 0.5 %	1	QL
triamcinolone acetonide external lotion	1	
triamcinolone acetonide external ointment 0.025 %, 0.1 %, 0.5 %	1	
triamcinolone acetonide external ointment 0.05 %	NF	
trianex	NF	
triderm external cream 0.1 %	1	
triderm external cream 0.5 %	1	QL
TRIDESILON	3	QL
VERDESO	NF	QL
zenatane	2	
ZYCLARA	NF	QL
ZYCLARA PUMP	NF	QL

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Drug Name	Drug Tier	Requirements & Limits
<b>Diabetes - Glucose Monitoring</b>		
ACCU-CHEK AVIVA CONNECT KIT W/DEVICE	NF	
ACCU-CHEK AVIVA DEVICE	NF	
ACCU-CHEK AVIVA PLUS KIT W/DEVICE	NF	
ACCU-CHEK AVIVA PLUS TEST STRIPS	NF	QL
ACCU-CHEK COMPACT PLUS CARE KIT	NF	
ACCU-CHEK COMPACT PLUS TEST STRIPS	NF	QL
ACCU-CHEK GUIDE TEST STRIPS	3	QL
ACCU-CHEK GUIDE/GUIDE ME KIT W/DEVICE	3	
ACCU-CHEK NANO SMARTVIEW KIT W/DEVICE	NF	
ACCU-CHEK SMARTVIEW TEST STRIPS	NF	QL
ACCU-CHEK SOFTCLIX LANCET DEVICE KIT	1	
BD ULTRA-FINE PEN NEEDLES	2	
CONTOUR NEXT MONITOR	2	
CONTOUR NEXT TEST	2	QL
CONTOUR TEST	NF	QL
DEXCOM G4 / G5 / G6 RECEIVER, TRANSMITTER, SENSOR (INCLUDING PLATINUM, PLATINUM PEDIATRIC)	3	PA, QL
DEXCOM G4 / G5 / G6 RECEIVER, TRANSMITTER, SENSOR (INCLUDING PLATINUM, PLATINUM PEDIATRIC) DEVICE	3	PA, QL
FREESTYLE LIBRE 14 DAY READER	3	PA, QL
FREESTYLE LIBRE 14 DAY SENSOR	3	PA, QL
FREESTYLE LIBRE READER	3	PA, QL
FREESTYLE LIBRE SENSOR SYSTEM	3	PA, QL
FREESTYLE PRECISION NEO TEST	NF	QL
GUARDIAN CONNECT TRANSMITTER	3	
GUARDIAN CONNECT TRANSMITTER	3	PA, QL

Drug Name	Drug Tier	Requirements & Limits
GUARDIAN LINK 3 TRANSMITTER	3	
GUARDIAN SENSOR (3)	3	PA
INSULIN SYRINGES	2	
LANCETS	1	
NOVOFINE AUTOCOVER PEN NEEDLE	2	
NOVOFINE PEN NEEDLE	2	
NOVOFINE PLUS PEN NEEDLE	2	
ONETOUCH ULTRA 2 KIT W/DEVICE	1	
ONETOUCH ULTRA BLUE TEST STRIPS IN VITRO STRIP	1	QL
ONETOUCH ULTRA MINI KIT W/DEVICE	1	
ONETOUCH VERIO FLEX SYSTEM KIT W/DEVICE	1	
ONETOUCH VERIO IQ SYSTEM	1	
ONETOUCH VERIO KIT W/DEVICE	1	
ONETOUCH VERIO SYNC SYSTEM KIT W/DEVICE	1	
ONETOUCH VERIO TEST STRIPS	1	QL
SOFTCLIX	1	
<b>Diabetes - Insulin</b>		
ADMELOG	NF	QL
AFREZZA	NF	PA, QL
BASAGLAR KWIKPEN	NF	QL
HUMALOG	2	QL
HUMALOG KWIKPEN	2	QL
HUMALOG MIX 50/50 KWIKPEN	2	QL
HUMALOG MIX 50/50 VIAL	2	QL
HUMALOG MIX 75/25 KWIKPEN	2	QL
HUMALOG MIX 75/25 VIAL	2	QL
HUMALOG U-100 JUNIOR KWIKPEN	2	QL
HUMULIN 70/30 KWIKPEN	2	QL
HUMULIN 70/30 VIAL	2	QL
HUMULIN N KWIKPEN	2	QL
HUMULIN N VIAL	2	QL
HUMULIN R U-500 KWIKPEN	2	QL
HUMULIN R U-500 VIAL (CONCENTRATED)	2	QL
HUMULIN R VIAL	2	QL
INSULIN ASPART	NF	ST, QL

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Drug Name	Drug Tier	Requirements & Limits
INSULIN LISPRO	NF	QL
LANTUS SOLOSTAR	2	QL
LANTUS U-100 VIAL	2	QL
LEVEMIR U-100 FLEXTOUCH	NF	QL
LEVEMIR U-100 VIAL	NF	QL
NOVOLIN 70/30	NF	ST, QL
NOVOLIN N	NF	ST, QL
NOVOLIN R	NF	ST, QL
NOVOLOG	NF	ST, QL
TOUJEO MAX SOLOSTAR	3	QL
TOUJEO SOLOSTAR	3	QL
TRESIBA	NF	QL
TRESIBA FLEXTOUCH	NF	QL
<b>Diabetes - Non-Insulin Agents</b>		
ADLYXIN	NF	PA, ST, QL
ALOGLIPTIN BENZOATE	NF	QL
ALOGLIPTIN-METFORMIN HCL	NF	QL
ALOGLIPTIN-PIOGLITAZONE	NF	QL
AMARYL	4	
BAQSIMI ONE PACK	2	QL
BAQSIMI TWO PACK	2	QL
BYDUREON	2	PA, ST, QL
BYDUREON BCISE AUTOINJECTOR	2	PA, ST, QL
BYETTA	2	PA, ST, QL
FARXIGA	NF	ST, QL
glimepiride	1	
glipizide er	1	
glipizide ir	1	
glipizide xl	1	
GLUCAGON EMERGENCY KIT INJECTION KIT	2	QL
GLUCOTROL	4	
GLUCOTROL XL	4	
GLUCOVANCE ORAL TABLET 5-500 MG	4	
glyburide oral	1	
glyburide-metformin	1	
GLYXAMBI	2	ST, QL
GVOKE PFS	2	QL
INVOKANA	NF	ST, QL
JANUVIA	NF	ST, QL

Drug Name	Drug Tier	Requirements & Limits
JARDIANCE	2	ST, QL
JENTADUETO	2	QL
JENTADUETO XR	2	QL
KAZANO	2	QL
KOMBIGLYZE XR	2	QL
metformin hcl er	1	
metformin hcl er (mod)	NF	PA
metformin hcl er (osm)	NF	PA
METFORMIN HCL ORAL SOLUTION	3	
metformin hcl oral tablet	1	
NESINA	2	QL
ONGLYZA	2	QL
OSENI	2	QL
OZEMPIC	2	PA, ST, QL
pioglitazone hcl	1	QL
RIOMET	4	
RYBELSUS	2	PA, ST, QL
SOLIQUA	2	QL
SYNJARDY	2	QL
SYNJARDY XR	2	QL
TRADJENTA	2	QL
TRIJARDY XR	2	QL
TRULICITY	2	PA, ST, QL
VICTOZA SOLUTION PEN-INJECTOR 18 MG/3ML SUBCUTANEOUS (2 PACK)	2	PA, ST, QL
VICTOZA SOLUTION PEN-INJECTOR 18 MG/3ML SUBCUTANEOUS (3 PACK)	3	PA, ST, QL
<b>Drugs for Blood Disorders</b>		
ADVATE	3	SP
ADYNOVATE	4	PA, SP
AFSTYLA INTRAVENOUS KIT	4	PA, SP
ARANESP (ALBUMIN FREE)	3	QL, SP
ELOCTATE	NF	PA, SP
JIVI	4	PA, SP
KOGENATE FS	3	SP
KOVALTRY	3	SP
MULPLETA	3	PA, QL, SP
NEULASTA	4	SP
NOVOEIGHT	3	SP
NUWIQ	3	SP

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Drug Name	Drug Tier	Requirements & Limits
RECOMBINATE	3	SP
RETACRIT	3	QL, SP
ZARXIO	3	SP
ZIEXTENZO	4	SP
<b>Drugs for Sexual Dysfunction</b>		
ADDYI	NF	PA, QL
IMVEXXY	NF	QL
INTRAROSA	NF	QL
OSPHENA	3	PA, QL
sildenafil citrate oral tablet 100 mg, 25 mg, 50 mg	NF	QL
STENDRA	NF	PA, QL
tadalafil oral tablet 10 mg, 20 mg	NF	QL
tadalafil oral tablet 2.5 mg, 5 mg	NF	ST, QL
VYLEESI	NF	PA, QL
<b>Electrolytes / Vitamins</b>		
DRISDOL	4	
ERGOCAL	3	
ergocalciferol oral capsule	1	
FLORIVA PLUS	3	
folic acid oral tablet 1 mg	1	
klor-con	1	
klor-con 10	1	
klor-con m10	1	
KLOR-CON M15	3	
klor-con m20	1	
klor-con sprinkle	1	
K-TAB	3	
LOKELMA	3	PA, QL
multi-vitamin/fluoride	1	
multivitamin/fluoride oral solution	1	
multivitamin/fluoride oral tablet chewable 0.25 mg, 0.5 mg, 1 mg	1	
multivitamins/fluoride	1	
mvc-fluoride	1	
NASCOBAL	4	
POLY-VI-FLOR	3	
potassium chloride crys er	1	
potassium chloride er	1	
potassium chloride oral	1	
potassium citrate er	1	
QUFLORA PEDIATRIC	3	

Drug Name	Drug Tier	Requirements & Limits
UROCIT-K 10	4	
UROCIT-K 15	4	
UROCIT-K 5	4	
VELTASSA	3	PA, QL
vitamin d (ergocalciferol) oral capsule 1.25 mg (50000 ut)	1	
<b>Gastrointestinal Agents - Drugs for Acid Reflux and Ulcer</b>		
ACIPHEX SPRINKLE	NF	QL
CARAFATE	4	
CYTOTEC	4	
DEXILANT	3	QL
misoprostol oral	1	
OMECLAMOX-PAK	4	QL
omeprazole oral capsule delayed release	1	
pantoprazole sodium tablet delayed release 20 mg oral	1	
pantoprazole sodium tablet delayed release 40 mg oral	1	
PROTONIX ORAL PACKET	NF	
PYLERA	NF	QL
RABEPRAZOLE SODIUM ORAL CAPSULE SPRINKLE	NF	QL
rabeprazole sodium oral tablet delayed release	2	QL
sucralfate oral suspension	3	
sucralfate oral tablet	1	
<b>Gastrointestinal Agents - Drugs for Bowel, Intestine and Stomach Conditions</b>		
ACTIGALL	4	
AEMCOLO	NF	QL
ANASPAZ	2	
CLENPIQ	3	
dicyclomine hcl oral	1	
diphenoxylate-atropine	1	
ed-spaz	1	
gavilyte-c	1	H
gavilyte-g	1	QL, H
GOLYTELY ORAL SOLUTION RECONSTITUTED 227.1 GM	2	QL
GOLYTELY ORAL SOLUTION RECONSTITUTED 236 GM	4	QL
hyoscyamine sulfate er	1	
hyoscyamine sulfate oral	1	

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Drug Name	Drug Tier	Requirements & Limits
hyoscyamine sulfate sl	1	
hyoscyamine sulfate sublingual	1	
hyosyne	1	
LEVBID	4	
LEVSIN ORAL	4	
LEVSIN/SL	4	
LINZESS	2	PA, QL
LOMOTIL	4	
MOTTEGRITY	3	PA, QL
MOVIPREP	3	QL
NULEV	4	
oscimin	1	
oscimin sr	1	
peg-3350/electrolytes	1	QL, H
PLENVU	3	QL
PREPOPIK	3	QL
SUPREP BOWEL PREP KIT	3	QL
SYMAX DUOTAB	NF	
symax-sl	1	
symax-sr	1	
SYMPROIC	2	PA, QL
URSO 250	4	
URSO FORTE	4	
ursodiol oral	1	
VIBERZI	4	PA, QL
XIFAXAN	NF	PA, QL
ZELNORM	3	PA, ST, QL
<b>Genetic or Enzyme Disorder - Drugs for Replacement, Modification, Treatment</b>		
CERDELGA	3	PA, SP
clovique	NF	PA, SP
CREON	2	
CUPRIMINE	NF	SP
DEPEN TITRATABS	3	SP
ENDARI	4	PA, QL
KUVAN	3	PA, QL, SP
nitisinone	NF	PA, SP
NITYR	3	PA, SP
ORFADIN ORAL CAPSULE 20 MG	NF	PA, SP
ORFADIN ORAL SUSPENSION	NF	PA, SP
PANCREAZE	NF	ST
penicillamine oral capsule	4	SP

Drug Name	Drug Tier	Requirements & Limits
PERTZYE	4	ST
STRENSIQ	3	PA, QL, SP
TEGSEDI	3	PA, QL, SP
trientine hcl	NF	PA, SP
VIOKACE	4	ST
ZENPEP	2	
<b>Genitourinary Agents - Drugs for Bladder, Genital and Kidney Conditions</b>		
AURYXIA	3	
DITROPAN XL	3	
GELNIQUE	NF	
oxybutynin chloride er	2	
oxybutynin chloride oral	1	
phenazo oral tablet 200 mg	1	
phenazopyridine hcl oral tablet 100 mg, 200 mg	1	
PYRIDIUM	3	
TOVIAZ	3	
VELPHORO	2	
<b>Genitourinary Agents - Drugs for Prostate Conditions</b>		
alfuzosin hcl er	1	
finasteride oral tablet 5 mg	1	
PROSCAR	4	
tamsulosin hcl	1	
terazosin hcl	1	
UROXATRAL	4	
<b>Hormonal Agents - Hormone Replacement and Birth Control</b>		
afirmelle	1	H
ALORA TRANSDERMAL PATCH TWICE WEEKLY 0.025 MG/24HR, 0.075 MG/24HR, 0.1 MG/24HR	3	QL
altavera	1	H
alyacen 1/35	1	H
amethia	3	
amethia lo	4	
apri	1	H
ashlyna	3	
aubra	1	H
aubra eq	1	H
aurovela 1.5/30	2	
aurovela 1/20	2	
aurovela 24 fe	3	

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Drug Name	Drug Tier	Requirements & Limits
aurovela fe 1.5/30	1	H
aurovela fe 1/20	1	H
aviane	1	H
AYGESTIN	4	
ayuna	1	H
azurette	2	
balziva	2	
bekyree	2	
BIJUVA	3	
blisovi 24 fe	3	
blisovi fe 1.5/30	1	H
blisovi fe 1/20	1	H
briellyn	2	
camila	1	H
camrese	3	
camrese lo	4	
chateal	1	H
chateal eq	1	H
CLIMARA PRO	3	QL
cryselle-28	1	H
cyclafem 1/35	1	H
cyred	1	H
cyred eq	1	H
dasetta 1/35	1	H
daysee	3	
deblitane	1	H
delyla	1	H
DEPO-PROVERA INTRAMUSCULAR SUSPENSION 150 MG/ML	4	QL
DEPO-PROVERA INTRAMUSCULAR SUSPENSION PREFILLED SYRINGE	4	
DEPO-SUBQ PROVERA 104	2	QL
desogestrel-ethinyl estradiol oral tablet 0.15-0.02/0.01 mg (21/5)	2	
desogestrel-ethinyl estradiol oral tablet 0.15-30 mg-mcg	1	H
DIVIGEL TRANSDERMAL GEL	3	
dotti	NF	QL
drospiren-eth estrad-levomefol	NF	
drospirenone-ethinyl estradiol	NF	
DUAVEE	NF	QL

Drug Name	Drug Tier	Requirements & Limits
ELESTRIN	3	
elinest	1	H
eluryng	NF	
emoquette	1	H
enskyce	1	H
errin	1	H
estarylla	1	H
ESTRACE ORAL	4	
ESTRACE VAGINAL	3	
estradiol oral	1	
estradiol patch twice weekly transdermal (generic MINIVELLE)	2	QL
estradiol patch twice weekly transdermal (generic VIVELLE-DOT)	NF	QL
estradiol transdermal patch weekly (generic CLIMARA)	1	QL
estradiol vaginal cream	NF	
estradiol vaginal tablet	2	
ESTRING	2	QL
ESTROGEL	3	QL
etonogestrel-ethinyl estradiol	NF	
EVAMIST	2	
falmina	1	H
fayosim	NF	
femynor	1	H
gianvi	NF	
hailey 1.5/30	2	
hailey 24 fe	3	
heather	1	H
incassia	1	H
introvale	2	H
isibloom	1	H
jasmiel	NF	
jencycla	1	H
jolessa	2	H
juleber	1	H
junel 1.5/30	2	
junel 1/20	2	
junel fe 1.5/30	1	H
junel fe 1/20	1	H
junel fe 24	3	
kalliga	1	H

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Drug Name	Drug Tier	Requirements & Limits
kariva	2	
kurvelo	1	H
larin 1.5/30	2	
larin 1/20	2	
larin 24 fe	3	
larin fe 1.5/30	1	H
larin fe 1/20	1	H
larissia	1	H
lessina	1	H
levonorgest-eth est & eth est	NF	
levonorgest-eth estrad 91-day oral tablet 0.1-0.02 & 0.01 mg	4	
levonorgest-eth estrad 91-day oral tablet 0.15-0.03 & 0.01 mg	3	
levonorgest-eth estrad 91-day oral tablet 0.15-0.03 mg	2	H
levonorgestrel-ethinyl estrad oral tablet 0.1-20 mg-mcg, 0.15-30 mg-mcg	1	H
levora 0.15/30 (28)	1	H
lillow	1	H
LO LOESTRIN FE	NF	
LOESTRIN 1.5/30 (21)	4	
LOESTRIN 1/20 (21)	4	
LOESTRIN FE 1.5/30	4	
LOESTRIN FE 1/20	4	
loryna	NF	
LOSEASONIQUE	4	
low-ogestrel	1	H
lo-zumandimine	NF	
lutura	1	H
lyza	1	H
marlissa	1	H
medroxyprogesterone acetate intramuscular suspension	1	QL, H
medroxyprogesterone acetate intramuscular suspension prefilled syringe	1	H
medroxyprogesterone acetate oral	1	
melodetta 24 fe	NF	
MENOSTAR	3	QL
mibelas 24 fe	NF	
microgestin 1.5/30	2	

Drug Name	Drug Tier	Requirements & Limits
microgestin 1/20	2	
microgestin fe 1.5/30	1	H
microgestin fe 1/20	1	H
mili	1	H
MIRCETTE	4	
mono-lynah	1	H
NATAZIA	2	
necon 0.5/35 (28)	1	H
nikki	NF	
nora-be	1	H
norethin ace-eth estrad-fe oral tablet 1-20 mg-mcg(24)	3	
norethin ace-eth estrad-fe oral tablet 1-20 mg-mcg, 1.5-30 mg-mcg	1	H
norethin ace-eth estrad-fe oral tablet chewable	NF	
norethindrone acetate oral	1	
norethindrone acet-ethinyl est	2	
norethindrone oral	1	H
norgestimate-eth estradiol	1	H
norgestimate-ethinyl estradiol triphasic oral tablet 0.18/0.215/0.25 mg-25 mcg	2	
norgestimate-ethinyl estradiol triphasic oral tablet 0.18/0.215/0.25 mg-35 mcg	1	H
norlyda	1	H
norlyroc	1	H
nortrel 0.5/35 (28)	1	H
nortrel 1/35 (21)	1	H
nortrel 1/35 (28)	1	H
NUVARING	1	H
ocella	NF	
ogestrel	2	
orsythia	1	H
ORTHO MICRONOR	4	
philith	2	
pimtrea	2	
pirmella 1/35	1	H
portia-28	1	H
PREMARIN ORAL	NF	
PREMARIN VAGINAL	3	
PREMPHASE	3	

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Drug Name	Drug Tier	Requirements & Limits
PREMPRO	NF	
previfem	1	H
progesterone micronized oral	2	
PROVERA	4	
reclipsen	1	H
rivelsa	NF	
SEASONIQUE	4	
setlakin	2	H
sharobel	1	H
simliya	2	
simpesse	3	
sprintec 28	1	H
sronyx	1	H
syeda	NF	
tarina 24 fe	3	
tarina fe 1/20	1	H
tarina fe 1/20 eq	1	H
TAYTULLA	NF	
tri femynor	1	H
tri-estarylla	1	H
tri-linyah	1	H
tri-lo-estarylla	2	
tri-lo-mili	2	
tri-lo-sprintec	2	
tri-mili	1	H
tri-previfem	1	H
tri-sprintec	1	H
tri-vylibra	1	H
tri-vylibra lo	2	
tulana	1	H
tydemy	NF	
vienva	1	H
viorele	2	
VIVELLE-DOT	2	QL
vyfemla	2	
vylibra	1	H
wera	1	H
xulane	3	H
YASMIN 28	2	
YAZ	2	
yuvafem	2	

Drug Name	Drug Tier	Requirements & Limits
zarah	NF	
zumandimine	NF	
<b>Hormonal Agents - Oral Steroids</b>		
CORTEF	4	
DECADRON	NF	
dexamethasone intensol	1	
dexamethasone oral elixir	1	
dexamethasone oral solution	1	
dexamethasone oral tablet	1	
dexamethasone oral tablet therapy pack	3	
DEXPAK	4	
DXEVO 11-DAY	NF	
HIDEX 6-DAY	NF	
hydrocortisone oral	1	
MEDROL ORAL TABLET 16 MG, 4 MG, 8 MG	4	
MEDROL ORAL TABLET 2 MG	2	
MEDROL ORAL TABLET 32 MG	3	
MEDROL ORAL TABLET THERAPY PACK	4	
methylprednisolone oral	1	
MILLIPRED	2	
ORAPRED ODT	4	
PEDIAPRED	2	
prednisolone oral solution	1	
prednisolone sodium phosphate oral	1	
prednisone intensol	1	
prednisone oral	1	
RAYOS	NF	
TAPERDEX	3	
<b>Hormonal Agents - Other</b>		
cabergoline	2	
DDAVP INJECTION	4	
DDAVP ORAL	4	
desmopressin acetate injection	1	
desmopressin acetate oral	1	
GENOTROPIN	NF	PA, QL, SP
GENOTROPIN MINIQUICK	NF	PA, QL, SP
HUMATROPE	NF	PA, QL, SP
NOC DURNA	3	PA, QL

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Drug Name	Drug Tier	Requirements & Limits
NORDITROPIN FLEXPPO	NF	PA, QL, SP
NUTROPIN AQ NUSPIN 10	3	PA, QL, SP
NUTROPIN AQ NUSPIN 20	3	PA, QL, SP
NUTROPIN AQ NUSPIN 5	3	PA, QL, SP
OMNITROPE	NF	PA, QL, SP
ORLISSA	4	PA, QL
STIMATE	NF	
ZOMACTON	NF	PA, QL, SP

#### Hormonal Agents - Testosterone Replacement

ANDRODERM	2	PA, QL
DEPO-TESTOSTERONE INTRAMUSCULAR SOLUTION 100 MG/ML	3	
DEPO-TESTOSTERONE INTRAMUSCULAR SOLUTION 200 MG/ML	NF	
NATESTO	NF	PA, QL
STRIANT	NF	PA, QL
TESTIM	2	PA, QL
TESTOSTERONE CYPIONATE INJECTION	NF	
testosterone cypionate intramuscular	1	
testosterone enanthate intramuscular	1	
testosterone transdermal	NF	PA, QL
XYOSTED	NF	PA

#### Hormonal Agents - Thyroid

ARMOUR THYROID	3	
euthyrox	1	
levo-t	1	
levothyroxine sodium oral	1	
levoxl	2	
liothyronine sodium oral	2	
methimazole oral	1	
NATURE-THROID	3	
np thyroid	1	
SYNTHROID	NF	
TAPAZOLE	4	
thyroid oral tablet 120 mg, 15 mg, 30 mg, 60 mg, 90 mg	1	
TIROSINT	NF	
TIROSINT-SOL	4	PA

Drug Name	Drug Tier	Requirements & Limits
unithroid	1	
WESTHROID	3	
WP THYROID	3	

#### Immunological Agents - Drugs for Immune System Stimulation or Suppression

ACTEMRA	4	PA, ST, QL, SP
ASTAGRAF XL	NF	SP
AZASAN	4	SP
azathioprine oral	1	SP
CIMZIA	3	PA, QL, SP
COSENTYX	4	PA, ST, QL, SP
cyclosporine modified	1	SP
ENBREL	NF	PA, ST, QL, SP
ENVARUSUS XR	NF	SP
FIRAZYR	3	PA, QL, SP
gengraf	1	SP
HAEGARDA	3	PA, QL, SP
HUMIRA	3	PA, QL, SP
icatibant acetate	NF	PA, QL, SP
methotrexate oral	1	
methotrexate sodium oral	1	
mycophenolate mofetil	1	SP
mycophenolate sodium	3	SP
OLUMIANT	3	PA, QL, SP
OTEZLA	3	PA, QL, SP
OTREXUP	NF	QL
PROGRAF ORAL PACKET	4	PA, SP
RAPAMUNE ORAL SOLUTION	4	SP
RASUVO	2	QL
RINVOQ	3	PA, QL, SP
RUCONEST	4	PA, QL, SP
SIMPONI	3	PA, QL, SP
sirolimus oral solution	3	SP
sirolimus oral tablet	1	SP
SKYRIZI (150 MG DOSE)	3	PA, QL, SP
STELARA	3	PA, QL, SP
tacrolimus oral	1	SP
TAKHZYRO	3	PA, QL, SP
TREMFYA	3	PA, QL, SP
TREXALL	2	
XELJANZ	3	PA, ST, QL, SP

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Drug Name	Drug Tier	Requirements & Limits
XELJANZ XR ORAL TABLET EXTENDED RELEASE 24 HOUR 11 MG	3	PA, ST, QL, SP
<b>Infertility Agents</b>		
chorionic gonadotropin intramuscular	4	SP
CRINONE VAGINAL GEL 4 %	4	PA, ST
CRINONE VAGINAL GEL 8 %	4	PA, ST
ENDOMETRIN	2	PA
FOLLISTIM AQ	2	SP
ganirelix acetate solution prefilled syringe 250 mcg/0.5ml subcutaneous (Ferring)	4	QL, SP
ganirelix acetate solution prefilled syringe 250 mcg/0.5ml subcutaneous (Merck/Organon)	2	QL, SP
novarel intramuscular solution reconstituted 10000 unit	3	SP
NOVAREL INTRAMUSCULAR SOLUTION RECONSTITUTED 5000 UNIT	3	SP
pregnyl	1	SP
<b>Inflammatory Bowel Disease Agents</b>		
APRISO	2	
AZULFIDINE	4	
AZULFIDINE EN-TABS	4	
budesonide er	NF	
budesonide oral	2	
CANASA	NF	
CORTIFOAM	2	
DIPENTUM	NF	
hydrocortisone ace-pramoxine external cream 1-1 %	1	
hydrocort-pramoxine (perianal)	1	
mesalamine er	NF	
mesalamine oral	NF	
mesalamine rectal enema	1	
mesalamine rectal suppository	2	
PENTASA	NF	
PROCORT	NF	
PROCTOFOAM HC	2	
SFROWASA	NF	
sulfasalazine oral tablet	1	

Drug Name	Drug Tier	Requirements & Limits
UCERIS RECTAL	2	
<b>Metabolic Bone Disease Agents - Drugs for Osteoporosis</b>		
alendronate sodium	1	
BONIVA ORAL	4	
FORTEO	NF	PA, ST, SP
FOSAMAX	4	
ibandronate sodium oral	2	
TERIPARATIDE	NF	PA, SP
TYMLOS	NF	PA, SP
calcitriol oral	1	
ROCALTROL	4	
<b>Ophthalmic Agents - Drugs for Eye Allergy, Infection and Inflammation</b>		
ACULAR	4	
ACULAR LS	4	
ACUVAIL	NF	
ALREX	4	QL
AZASITE	3	
azelastine hcl ophthalmic	1	
BESIVANCE	3	
CILOXAN OPHTHALMIC OINTMENT	3	
CILOXAN OPHTHALMIC SOLUTION	4	
ciprofloxacin hcl ophthalmic	1	
erythromycin ophthalmic	1	H
ILEVRO	NF	
INVELTYS	3	
ketorolac tromethamine ophthalmic	1	
LASTACAPT	3	QL
LOTEMAX OPHTHALMIC GEL	NF	
LOTEMAX OPHTHALMIC OINTMENT	3	
LOTEMAX OPHTHALMIC SUSPENSION	4	QL
LOTEMAX SM	3	QL
loteprednol etabonate	3	QL
MAXITROL	4	
MOXEZA	4	
moxifloxacin hcl ophthalmic	3	
neomycin-polymyxin-dexameth ophthalmic ointment	1	

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Drug Name	Drug Tier	Requirements & Limits
neomycin-polymyxin-dexameth ophthalmic suspension 3.5-10000-0.1	1	
NEVANAC	4	
OCUFLOX	4	
ofloxacin ophthalmic	1	
olopatadine hcl ophthalmic solution 0.1 %	3	QL
olopatadine hcl ophthalmic solution 0.2 %	NF	QL
polymyxin b-trimethoprim	1	
POLYTRIM	4	
PRED FORTE	4	
PRED MILD	3	
prednisolone acetate ophthalmic	1	
TOBRADEX OPHTHALMIC OINTMENT	3	
TOBRADEX OPHTHALMIC SUSPENSION	4	
TOBRADEX ST	NF	
tobramycin ophthalmic	1	
tobramycin-dexamethasone	2	
TOBREX OPHTHALMIC OINTMENT	3	
TOBREX OPHTHALMIC SOLUTION	4	
<b>Ophthalmic Agents - Drugs for Glaucoma</b>		
ALPHAGAN P OPHTHALMIC SOLUTION 0.1 %	2	QL
ALPHAGAN P OPHTHALMIC SOLUTION 0.15 %	4	QL
AZOPT	2	QL
BETIMOL	2	QL
bimatoprost ophthalmic	NF	QL
brimonidine tartrate ophthalmic solution 0.15 %	2	QL
brimonidine tartrate ophthalmic solution 0.2 %	1	
COMBIGAN	2	QL
COSOPT	4	
dorzolamide hcl-timolol mal	2	
dorzolamide hcl-timolol mal pf	NF	QL
ISTALOL	4	
latanoprost ophthalmic	1	
LUMIGAN	2	
RHOPRESSA	3	QL

Drug Name	Drug Tier	Requirements & Limits
ROCKLATAN	3	QL
timolol maleate ophthalmic gel forming solution	1	
timolol maleate ophthalmic solution 0.25 %, 0.5 %	1	
timolol maleate ophthalmic solution 0.5 % (daily)	3	
TIMOPTIC	4	
TIMOPTIC OCUDOSE	2	
TIMOPTIC-XE	4	
TRAVATAN Z	4	QL
travoprost (bak free)	2	QL
VYZULTA	NF	ST, QL
XELPROS	3	QL
<b>Ophthalmic Agents - Drugs for Miscellaneous Eye Conditions</b>		
CEQUA	NF	PA, QL
RESTASIS	NF	PA, QL
RESTASIS MULTIDOSE	NF	PA, QL
XIIDRA	NF	PA, QL
<b>Otic Agents - Drugs for Ear Conditions</b>		
CIPRODEX	NF	ST
neomycin-polymyxin-hc otic	1	
ofloxacin otic	2	
<b>Respiratory - Drugs for Anaphylaxis</b>		
AUVI-Q	NF	QL
epinephrine solution auto-injector 0.15 mg/0.3ml injection (generic EPIPEN JR., 2 pack)	2	QL
epinephrine solution auto-injector 0.3 mg/0.3ml injection (generic EPIPEN, 2 pack)	2	QL
SYMJEPI	2	QL
<b>Respiratory Tract / Pulmonary Agents - Drugs for Allergies, Cough, Cold</b>		
azelastine hcl nasal solution 0.1 %, 137 mcg/spray	3	
azelastine hcl nasal solution 0.15 %	NF	
benzonatate oral capsule 100 mg, 200 mg	1	
benzonatate oral capsule 150 mg	NF	
bromfed dm	1	
cyproheptadine hcl oral	1	
fluticasone propionate nasal	2	QL

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Drug Name	Drug Tier	Requirements & Limits
hydrocodone polst-cpm polst er	NF	PA, QL
ipratropium bromide nasal	1	
levocetirizine dihydrochloride oral solution	3	
levocetirizine dihydrochloride oral tablet	1	
OMNARIS	NF	QL
promethazine hcl oral solution	1	
promethazine hcl oral syrup	1	
promethazine-codeine	1	PA, QL
promethazine-dm	1	
pseudoephedrine-bromphen-dm	1	
TESSALON PERLES	4	
TUSSICAPS	4	PA, QL
XHANCE	NF	QL
ZETONNA	3	QL
<b>Respiratory Tract / Pulmonary Agents - Drugs for Asthma and COPD</b>		
ADVAIR DISKUS	3	QL
ADVAIR HFA	3	QL
AIRDUO RESPICLICK 113/14	NF	QL
AIRDUO RESPICLICK 232/14	NF	QL
AIRDUO RESPICLICK 55/14	NF	QL
albuterol sulfate er	1	
albuterol sulfate hfa aerosol solution 108 (90 base) mcg/act inhalation (generic PROAIR HFA, PROVENTIL HFA)	4	QL
ALBUTEROL SULFATE HFA AEROSOL SOLUTION 108 (90 BASE) MCG/ACT INHALATION (generic VENTOLIN HFA)	NF	QL
albuterol sulfate inhalation	1	
albuterol sulfate oral	3	PA
ALVESCO	NF	QL
ANORO ELLIPTA	3	QL
ARNUITY ELLIPTA	2	QL
ASMANEX	NF	QL
ASMANEX HFA INHALATION AEROSOL 100 MCG/ACT, 200 MCG/ACT	NF	QL
ATROVENT HFA	3	QL
BEVESPI AEROSPHERE	2	QL

Drug Name	Drug Tier	Requirements & Limits
BREO ELLIPTA	3	QL
budesonide inhalation	2	QL
COMBIVENT RESPIMAT	4	QL
EASIVENT	3	
FASENRA PEN	4	PA
FLOVENT DISKUS	2	QL
FLOVENT HFA	2	QL
fluticasone-salmeterol inhalation aerosol powder breath activated 100-50 mcg/dose, 250-50 mcg/dose, 500-50 mcg/dose	NF	QL
FLUTICASONE-SALMETEROL INHALATION AEROSOL POWDER BREATH ACTIVATED 113-14 MCG/ACT, 232-14 MCG/ACT, 55-14 MCG/ACT	2	QL
INCRUSE ELLIPTA	NF	QL
ipratropium-albuterol	2	
LEVALBUTEROL HFA INHALATION AEROSOL 45 MCG/ACT	NF	QL
montelukast sodium oral packet	2	
montelukast sodium oral tablet	1	
montelukast sodium oral tablet chewable	1	
NUCALA	4	PA, QL, SP
PERFOROMIST	NF	QL
PROAIR HFA	4	QL
PROAIR RESPICLICK	4	QL
PROVENTIL HFA	4	QL
PULMICORT FLEXHALER	2	QL
QVAR REDHALER	NF	QL
SEREVENT DISKUS	2	QL
SINGULAIR ORAL PACKET	3	
SPIRIVA HANDHALER	2	QL
SPIRIVA RESPIMAT	2	QL
STRIVERDI RESPIMAT	2	QL
SYMBICORT	3	QL
TRELEGY ELLIPTA	3	QL
VENTOLIN HFA	2	QL
wixela inhub	NF	QL
XOPENEX HFA	NF	QL
YUPELRI	4	PA, QL

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Drug Name	Drug Tier	Requirements & Limits
<b>Respiratory Tract / Pulmonary Agents - Drugs for Cystic Fibrosis</b>		
BETHKIS	3	PA, QL, SP
KITABIS PAK	NF	PA, QL, SP
PULMOZYME	3	PA, QL, SP
TOBI PODHALER	NF	PA, QL, SP
tobramycin nebulization solution 300 mg/5ml inhalation	NF	PA, QL, SP
TOBRAMYCIN NEBULIZATION SOLUTION 300 MG/5ML INHALATION	NF	PA, QL, SP
<b>Respiratory Tract / Pulmonary Agents - Drugs for Pulmonary Hypertension</b>		
ADEMPAS	3	PA, QL, SP
bosentan	3	PA, QL, SP
OPSUMIT	3	PA, QL, SP
ORENITRAM	4	PA, QL, SP
TRACLEER 32 MG	2	PA, SP
TRACLEER 62.5 MG, 125 MG	3	PA, QL, SP
TYVASO	3	PA, SP
<b>Skeletal Muscle Relaxants - Drugs for Muscle Pain and Spasm</b>		
baclofen oral	1	
carisoprodol oral tablet 250 mg	NF	
carisoprodol oral tablet 350 mg	1	
cyclobenzaprine hcl er	NF	
cyclobenzaprine hcl oral 5 mg, 10 mg	1	
metaxalone	3	
methocarbamol oral	1	
OZOBAX	4	PA
ROBAXIN-750	4	
SOMA ORAL TABLET 350 MG	3	
tizanidine hcl oral capsule	3	
tizanidine hcl oral tablet	1	
ZANAFLEX ORAL CAPSULE	4	

Drug Name	Drug Tier	Requirements & Limits
<b>Sleep Disorder Agents</b>		
EDLUAR	NF	QL
eszopiclone	2	QL
modafinil	2	PA, QL
RESTORIL	4	
SUNOSI	3	PA, QL
temazepam	1	
WAKIX	4	PA, QL, SP
XYREM	NF	PA, QL, SP
zolpidem tartrate er	3	QL
zolpidem tartrate oral	1	QL
zolpidem tartrate sublingual	NF	QL

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carisoprodol oral tablet 250 mg . . . . .	31	CLENPIQ . . . . .	22	colesevelam hcl . . . . .	15
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CAROSPIR . . . . .	15	CLEOCIN ORAL CAPSULE 75 MG . . . . .	10	COMBIVENT RESPIMAT . . . . .	30
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celecoxib oral . . . . .	9	clindamycin hcl oral . . . . .	10	CORGARD . . . . .	15
CENTANY . . . . .	9	clindamycin phos-benzoyl perox external gel 1.2-5 % . . . . .	18	CORLANOR . . . . .	15
CENTANY AT . . . . .	9	clindamycin phosphate external foam . . . . .	18	CORTEF . . . . .	26
cephalexin . . . . .	9	clindamycin phosphate external lotion . . . . .	18	CORTIFOAM . . . . .	28
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CERDELGA . . . . .	23	clindamycin phosphate external swab . . . . .	18	COSOPT . . . . .	29
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chorionic gonadotropin intramuscular . . . . .	28	clobetasol propionate external gel . . . . .	18	CRINONE VAGINAL GEL 8 % . . . . .	28
ciclodan . . . . .	12	clobetasol propionate external liquid . . . . .	18	cryselle-28 . . . . .	24
ciclopirox external gel . . . . .	12	clobetasol propionate external lotion . . . . .	18	CUPRIMINE . . . . .	23
ciclopirox external shampoo . . . . .	12	clobetasol propionate external ointment . . . . .	18	cyclafem 1/35 . . . . .	24
ciclopirox external solution . . . . .	12	clobetasol propionate external shampoo . . . . .	18	cyclobenzaprine hcl er . . . . .	31
ciclopirox treatment . . . . .	12			cyclobenzaprine hcl oral 5 mg, 10 mg . . . . .	31
CILOXAN OPHTHALMIC OINTMENT . . . . .	28			cyclosporine modified . . . . .	27
CILOXAN OPHTHALMIC SOLUTION . . . . .	28			cyproheptadine hcl oral . . . . .	29
				cyred . . . . .	24
				cyred eq . . . . .	24
				CYTOTEC . . . . .	22



**D**

dalfampridine er. . . . .	17	DEXCOM G4 / G5 / G6 RECEIVER, TRANSMITTER, SENSOR (INCLUDING PLATINUM, PLATINUM PEDIATRIC) . . . . .	20	DIVIGEL TRANSDERMAL GEL . . . . .	24
dapsone external gel 5 % . . . . .	18	DEXCOM G4 / G5 / G6 RECEIVER, TRANSMITTER, SENSOR (INCLUDING PLATINUM, PLATINUM PEDIATRIC) DEVICE . . . . .	20	donepezil hcl oral tablet 10 mg, 5 mg . . . . .	11
dasetta 1/35. . . . .	24	DEXILANT . . . . .	22	donepezil hcl oral tablet 23 mg . . . . .	11
daysee . . . . .	24	dexmethylphenidate hcl . . . . .	17	donepezil hcl oral tablet dispersible . . . . .	11
DDAVP INJECTION . . . . .	26	dexmethylphenidate hcl er . . . . .	17	DORYX MPC . . . . .	10
DDAVP ORAL . . . . .	26	DEXPAK . . . . .	26	dorzolamide hcl-timolol mal . . . . .	29
deblitane. . . . .	24	dextroamphetamine sulfate er . . . . .	17	dorzolamide hcl-timolol mal pf. . . . .	29
DECADRON . . . . .	26	dextroamphetamine sulfate oral solution . . . . .	17	dotti . . . . .	24
delyla . . . . .	24	dextroamphetamine sulfate oral tablet . . . . .	17	DOVATO . . . . .	13
denta 5000 plus. . . . .	17	diazepam intensol . . . . .	14	doxazosin mesylate oral . . . . .	15
dentagel . . . . .	17	diazepam oral . . . . .	14	doxepin hcl oral capsule . . . . .	11
DEPAKOTE . . . . .	10	diclofenac potassium . . . . .	9	doxepin hcl oral concentrate . . . . .	11
DEPAKOTE ER . . . . .	10	diclofenac sodium er . . . . .	9	doxycycline hyclate oral capsule . . . . .	10
DEPAKOTE SPRINKLES . . . . .	10	diclofenac sodium oral . . . . .	9	doxycycline hyclate oral tablet 100 mg . . . . .	10
DEPEN TITRATABS . . . . .	23	diclofenac sodium transdermal gel 1 % . . . . .	9	doxycycline hyclate oral tablet 150 mg, 50 mg, 75 mg . . . . .	10
DEPO-PROVERA INTRAMUSCULAR SUSPENSION 150 MG/ML . . . . .	24	diclofenac sodium transdermal solution . . . . .	9	doxycycline hyclate oral tablet delayed release . . . . .	10
DEPO-PROVERA INTRAMUSCULAR SUSPENSION PREFILLED SYRINGE . . . . .	24	dicyclomine hcl oral . . . . .	22	doxycycline monohydrate oral capsule 100 mg, 50 mg . . . . .	10
DEPO-SUBQ PROVERA 104 . . . . .	24	DIFICID . . . . .	10	doxycycline monohydrate oral capsule 150 mg, 75 mg . . . . .	10
DEPO-TESTOSTERONE INTRAMUSCULAR SOLUTION 100 MG/ML . . . . .	27	DIFLUCAN ORAL SUSPENSION RECONSTITUTED . . . . .	12	doxycycline monohydrate oral suspension reconstituted . . . . .	10
DEPO-TESTOSTERONE INTRAMUSCULAR SOLUTION 200 MG/ML . . . . .	27	DIFLUCAN ORAL TABLET 100 MG, 150 MG, 200 MG . . . . .	12	doxycycline monohydrate oral tablet . . . . .	10
DERMA-SMOOTH/FS BODY . . . . .	18	DIFLUCAN ORAL TABLET 50 MG . . . . .	12	doxylamine-pyridoxine . . . . .	12
DERMA-SMOOTH/FS SCALP . . . . .	18	DILAUDID ORAL . . . . .	8	DRISDOL . . . . .	22
DESCOVY . . . . .	13	dilt-xr . . . . .	15	DRIZALMA SPRINKLE . . . . .	11
desmopressin acetate injection . . . . .	26	diltiazem hcl er coated beads . . . . .	15	drospiren-eth estrad-levomefol . . . . .	24
desmopressin acetate oral . . . . .	26	diltiazem hcl er oral capsule extended release 12 hour . . . . .	15	drospirenone-ethinyl estradiol . . . . .	24
desogestrel-ethinyl estradiol oral tablet 0.15-0.02/0.01 mg (21/5) . . . . .	24	diltiazem hcl oral . . . . .	15	DUAVEE . . . . .	24
desogestrel-ethinyl estradiol oral tablet 0.15-30 mg-mcg . . . . .	24	dimethyl fumarate . . . . .	17	duloxetine hcl oral capsule delayed release particles 20 mg, 30 mg, 60 mg . . . . .	11
desonide cream, lotion, ointment . . . . .	18	DIPENTUM . . . . .	28	duloxetine hcl oral capsule delayed release particles 40 mg . . . . .	11
desonide gel . . . . .	18	diphenoxylate-atropine . . . . .	22	DUOPA . . . . .	13
DESOWEN . . . . .	18	DIPROLENE . . . . .	18	DUPIXENT . . . . .	18
desvenlafaxine succinate er . . . . .	11	DIPROLENE AF . . . . .	18	DVORAH . . . . .	8
dexamethasone intensol . . . . .	26	DITROPAN XL . . . . .	23	DXEVO 11-DAY . . . . .	26
dexamethasone oral elixir . . . . .	26	divalproex sodium er . . . . .	11	DYAZIDE . . . . .	15
dexamethasone oral solution . . . . .	26	divalproex sodium oral capsule delayed release sprinkle . . . . .	11		
dexamethasone oral tablet . . . . .	26	divalproex sodium oral tablet delayed release . . . . .	11		
dexamethasone oral tablet therapy pack . . . . .	26				

**E**

EASIVENT . . . . .	30
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FORFIVO XL	12
FORTEO	28
FOSAMAX	28
FREESTYLE LIBRE 14 DAY READER	20
FREESTYLE LIBRE 14 DAY SENSOR	20
FREESTYLE LIBRE READER	20
FREESTYLE LIBRE SENSOR SYSTEM	20
FREESTYLE PRECISION NEO TEST	20
furosemide oral	15

## G

gabapentin oral	11
ganirelix acetate solution prefilled syringe 250 mcg/0.5ml subcutaneous (Ferring)	28
ganirelix acetate solution prefilled syringe 250 mcg/0.5ml subcutaneous (Merck/Organon)	28
gavilyte-c	22
gavilyte-g	22
GELNIQUE	23
gemfibrozil oral	15
gengraf	27
GENOTROPIN	26
GENOTROPIN MINIQUICK	26
GENVOYA	14
gianvi	24
GILENYA ORAL CAPSULE	17
glatiramer acetate	17
glatopa	17
glimepiride	21
glipizide er	21
glipizide ir	21
glipizide xl	21
GLOPERBA	12
GLUCAGON EMERGENCY KIT INJECTION KIT	21
GLUCOTROL	21
GLUCOTROL XL	21
GLUCOVANCE ORAL TABLET 5-500 MG	21
glyburide oral	21
glyburide-metformin	21
GLYXAMBI	21

GOLYTELY ORAL SOLUTION RECONSTITUTED 227.1 GM	22
GOLYTELY ORAL SOLUTION RECONSTITUTED 236 GM	22
GONITRO	15
guanfacine hcl	15, 17
guanfacine hcl er	17
GUARDIAN CONNECT TRANSMITTER	20
GUARDIAN LINK 3 TRANSMITTER	20
GUARDIAN SENSOR (3)	20
GVOKE PFS	21
GYNAZOLE-1	12

## H

HAEGARDA	27
hailey 1.5/30	24
hailey 24 fe	24
HALCION	14
HARVONI ORAL TABLET 45-200 MG	14
HARVONI ORAL TABLET 90-400 MG	14
heather	24
HEMANGEOL	15
HIDEX 6-DAY	26
HUMALOG	20
HUMALOG KWIKPEN	20
HUMALOG MIX 50/50 KWIKPEN	20
HUMALOG MIX 50/50 VIAL	20
HUMALOG MIX 75/25 KWIKPEN	20
HUMALOG MIX 75/25 VIAL	20
HUMALOG U-100 JUNIOR KWIKPEN	20
HUMATROPE	26
HUMIRA	27
HUMULIN 70/30 KWIKPEN	20
HUMULIN 70/30 VIAL	20
HUMULIN N KWIKPEN	20
HUMULIN N VIAL	20
HUMULIN R U-500 KWIKPEN	20
HUMULIN R U-500 VIAL (CONCENTRATED)	20
HUMULIN R VIAL	20
hydralazine hcl oral	15
hydrochlorothiazide oral	15
hydrocodone polst-cpm polst er	30

hydrocodone-acetaminophen oral solution 10-325 mg/15ml	8
hydrocodone-acetaminophen oral solution 7.5-325 mg/15ml	8
hydrocodone-acetaminophen oral tablet 10-300 mg, 5-300 mg, 7.5-300 mg	8
hydrocodone-acetaminophen oral tablet 10-325 mg, 5-325 mg, 7.5-325 mg	8
hydrocort-pramoxine (perianal)	28
hydrocortisone ace-pramoxine external cream 1-1 %	28
hydrocortisone external cream 1 %	19
hydrocortisone external cream 2.5 %	19
hydrocortisone external lotion 2.5 %	19
hydrocortisone external ointment 1 %, 2.5 %	19
hydrocortisone oral	26
hydromorphone hcl er	8
hydromorphone hcl oral	8
hydromorphone hcl rectal	8
hydroxychloroquine sulfate oral	13
hydroxyzine hcl oral	14
hydroxyzine pamoate oral	14
hyoscyamine sulfate er	22
hyoscyamine sulfate oral	22
hyoscyamine sulfate sl	23
hyoscyamine sulfate sublingual	23
hyosyne	23
HYSINGLA ER	8
HYZAAR	15

## I

ibandronate sodium oral	28
IBRANCE ORAL CAPSULE	13
ibu	9
ibuprofen oral suspension	9
ibuprofen oral tablet 400 mg, 600 mg, 800 mg	9
icatibant acetate	27
IDHIFA	13
ILEVRO	28
imatinib mesylate	13
imiquimod external	19
IMIQUIMOD PUMP	19
IMPOYZ	19





IMVEXXY	22
INBRIJA	13
incassia	24
INCRUSE ELLIPTA	30
INDOCIN ORAL	9
INDOCIN RECTAL	9
indomethacin er.	9
indomethacin oral capsule 25 mg, 50 mg	9
INSULIN ASPART	20
INSULIN LISPRO	21
INSULIN SYRINGES	20
INTRAROSA	22
introvale	24
INVELTYS	28
INVOKANA	21
ipratropium bromide nasal	30
ipratropium-albuterol	30
irbesartan	15
irbesartan-hydrochlorothiazide	15
ISENTRESS	14
ISENTRESS HD	14
isibloom	24
isosorbide mononitrate	15
isosorbide mononitrate er	15
isotretinoin oral	19
ISTALOL	29

## J

jantoven	10
JANUVIA	21
JARDIANCE	21
jasmiel	24
jencycla	24
JENTADUETO	21
JENTADUETO XR	21
JIVI	21
jolessa	24
JORNAY PM	17
juleber	24
JULUCA	14
junel 1/20	24
junel 1.5/30	24
junel fe 1/20	24
junel fe 1.5/30	24
junel fe 24	24

## K

K-TAB	22
KADIAN ORAL CAPSULE EXTENDED RELEASE 24 HOUR 200 MG	8
kalliga	24
KAPSPARGO SPRINKLE	15
kariva	25
KAZANO	21
KEFLEX	10
KEPPRA ORAL	11
KEPPRA XR	11
ketoconazole external cream	12
ketoconazole external foam	12
ketoconazole external shampoo	12
ketodan external foam	12
ketorolac tromethamine ophthalmic	28
ketorolac tromethamine oral	9
KITABIS PAK	31
klor-con	22
klor-con 10	22
klor-con m10	22
KLOR-CON M15	22
klor-con m20	22
klor-con sprinkle	22
KOGENATE FS	21
KOMBIGLYZE XR	21
KOVALTRY	21
KRINTAFEL	13
kurvelo	25
KUVAN	23

## L

labetalol hcl oral	15
LAMICTAL	11
LAMICTAL ODT ORAL KIT	11
LAMICTAL ODT ORAL TABLET DISPERSIBLE	11
LAMICTAL STARTER	11
LAMICTAL XR ORAL KIT	11
lamotrigine er.	11
lamotrigine oral tablet	11
lamotrigine oral tablet chewable	11
lamotrigine oral tablet dispersible	11
lamotrigine starter kit-blue	11
lamotrigine starter kit-green	11

lamotrigine starter kit-orange	11
LANCETS	20
LANTUS SOLOSTAR	21
LANTUS U-100 VIAL	21
larin 1/20	25
larin 1.5/30	25
larin 24 fe	25
larin fe 1/20	25
larin fe 1.5/30	25
larissia	25
LASIX	15
LASTACAPT	28
latanoprost ophthalmic	29
LATUDA	13
LEDIP-SOFOSB ORAL TABLET 90-400MG	14
LEDIPASVIR-SOFOSBUVIR	14
lessina	25
letrozole oral	13
LEVALBUTEROL HFA INHALATION AEROSOL 45 MCG/ACT	30
LEVAQUIN ORAL TABLET 500 MG, 750 MG	10
LEVBID	23
LEVEMIR U-100 FLEXTOUCH	21
LEVEMIR U-100 VIAL	21
levetiracetam er.	11
levetiracetam oral	11
levo-t	27
levocetirizine dihydrochloride oral solution	30
levocetirizine dihydrochloride oral tablet	30
levofloxacin oral	10
levonorgest-eth est & eth est	25
levonorgest-eth estrad 91-day oral tablet 0.1-0.02 & 0.01 mg	25
levonorgest-eth estrad 91-day oral tablet 0.15-0.03 & 0.01 mg	25
levonorgest-eth estrad 91-day oral tablet 0.15-0.03 mg	25
levonorgestrel-ethinyl estrad oral tablet 0.1-20 mg-mcg, 0.15-30 mg-mcg	25
levora 0.15/30 (28)	25
levothyroxine sodium oral	27
levoxyl	27
LEVSIN ORAL	23
LEVSIN/SL	23





MINOLIRA . . . . .	10	<b>N</b>	nifedipine er . . . . .	16	
MIRAPEX . . . . .	13	nabumetone oral . . . . .	9	nifedipine er osmotic release . . . . .	16
MIRCETTE . . . . .	25	nadolol oral . . . . .	16	nifedipine oral . . . . .	16
mirtazapine oral . . . . .	12	NAFRINSE DAILY/NEUTRAL . . . . .	17	nikki . . . . .	25
MIRVASO . . . . .	19	NAFRINSE WEEKLY . . . . .	17	nitisinone . . . . .	23
misoprostol oral . . . . .	22	NALOCET . . . . .	8	NITRO-BID . . . . .	16
MITIGARE . . . . .	12	naloxone hcl injection solution . . . . .	9	NITRO-DUR . . . . .	16
MOBIC . . . . .	9	naloxone hcl injection solution cartridge . . . . .	9	nitro-time . . . . .	16
modafinil . . . . .	31	naloxone hcl injection solution prefilled syringe . . . . .	9	nitrofurantoin macrocrystal oral . . . . .	10
mometasone furoate external . . . . .	19	naltrexone hcl oral . . . . .	9	nitrofurantoin monohydrate macrocrystals . . . . .	10
mondoxyne nl oral capsule 100 mg . . . . .	10	NAPRELAN ORAL TABLET EXTENDED RELEASE 24 HOUR 750 MG . . . . .	9	nitroglycerin sublingual . . . . .	16
mondoxyne nl oral capsule 75 mg . . . . .	10	NAPROSYN ORAL SUSPENSION . . . . .	9	nitroglycerin transdermal . . . . .	16
mono-linyah . . . . .	25	naproxen dr . . . . .	9	nitroglycerin translingual . . . . .	16
montelukast sodium oral packet . . . . .	30	naproxen oral suspension . . . . .	9	NITROMIST . . . . .	16
montelukast sodium oral tablet . . . . .	30	naproxen oral tablet . . . . .	9	NITROSTAT . . . . .	16
montelukast sodium oral tablet chewable . . . . .	30	naproxen sodium er . . . . .	9	NITYR . . . . .	23
morgidox oral . . . . .	10	naproxen sodium oral tablet 275 mg, 550 mg . . . . .	9	NIZORAL . . . . .	12
MORPHABOND ER . . . . .	8	naratriptan hcl . . . . .	13	NOCDURNA . . . . .	26
morphine sulfate (concentrate) oral solution 100 mg/5ml, 20 mg/ml . . . . .	8	NARCAN . . . . .	9	nora-be . . . . .	25
morphine sulfate er oral capsule extended release 24 hour . . . . .	8	NASCOBAL . . . . .	22	NORCO . . . . .	8
morphine sulfate er oral tablet extended release . . . . .	8	NATAZIA . . . . .	25	NORDITROPIN FLEXPRO . . . . .	27
morphine sulfate oral . . . . .	8	NATESTO . . . . .	27	norethin ace-eth estrad-fe oral tablet 1-20 mg-mcg(24) . . . . .	25
morphine sulfate rectal . . . . .	8	NATURE-THROID . . . . .	27	norethin ace-eth estrad-fe oral tablet 1-20 mg-mcg, 1.5-30 mg-mcg . . . . .	25
MOTEGRITY . . . . .	23	NAYZILAM SPRAY 5 MG . . . . .	11	norethin ace-eth estrad-fe oral tablet chewable . . . . .	25
MOVIPREP . . . . .	23	necon 0.5/35 (28) . . . . .	25	norethindrone acet-ethinyl est . . . . .	25
MOXEZA . . . . .	28	neomycin-polymyxin-dexameth ophthalmic ointment . . . . .	28	norethindrone acetate oral . . . . .	25
moxifloxacin hcl ophthalmic . . . . .	28	neomycin-polymyxin-dexameth ophthalmic suspension 3.5-10000-0.1 . . . . .	29	norethindrone oral . . . . .	25
MS CONTIN . . . . .	8	neomycin-polymyxin-hc otic . . . . .	29	norgestimate-eth estradiol . . . . .	25
MULPLETA . . . . .	21	NESINA . . . . .	21	norgestimate-ethinyl estradiol triphasic oral tablet 0.18/0.215/0.25 mg-25 mcg . . . . .	25
MULTAQ . . . . .	16	neuac external gel . . . . .	19	norgestimate-ethinyl estradiol triphasic oral tablet 0.18/0.215/0.25 mg-35 mcg . . . . .	25
multi-vitamin/fluoride . . . . .	22	NEULASTA . . . . .	21	NORITATE . . . . .	19
multivitamin/fluoride oral solution . . . . .	22	NEURONTIN . . . . .	11	norlyda . . . . .	25
multivitamin/fluoride oral tablet chewable 0.25 mg, 0.5 mg, 1 mg . . . . .	22	neutral sodium fluoride . . . . .	17	norlyroc . . . . .	25
multivitamins/fluoride . . . . .	22	NEVANAC . . . . .	29	nortrel 0.5/35 (28) . . . . .	25
mupirocin calcium . . . . .	10	NEXLETOL TABLET . . . . .	16	nortrel 1/35 (21) . . . . .	25
mupirocin external . . . . .	10	NEXLIZET TABLET . . . . .	16	nortrel 1/35 (28) . . . . .	25
mvc-fluoride . . . . .	22	niacin (antihyperlipidemic) . . . . .	16	nortriptyline hcl oral . . . . .	12
mycophenolate mofetil . . . . .	27	niacin er (antihyperlipidemic) . . . . .	16	NORVIR ORAL PACKET . . . . .	14
mycophenolate sodium . . . . .	27	niacor . . . . .	16	NORVIR ORAL SOLUTION . . . . .	14
MYDAYIS . . . . .	17	NIASPAN . . . . .	16	NOURIANZ ORAL TABLET . . . . .	13
myorisan . . . . .	19				





novarel intramuscular solution reconstituted 10000 unit. . . . .	28
NOVAREL INTRAMUSCULAR SOLUTION RECONSTITUTED 5000 UNIT . . . . .	28
NOVOEIGHT . . . . .	21
NOVOFINE AUTOCOVER PEN NEEDLE . . . . .	20
NOVOFINE PEN NEEDLE . . . . .	20
NOVOFINE PLUS PEN NEEDLE . . . . .	20
NOVOLIN 70/30 . . . . .	21
NOVOLIN N . . . . .	21
NOVOLIN R . . . . .	21
NOVOLOG . . . . .	21
np thyroid . . . . .	27
NUBEQA . . . . .	13
NUCALA . . . . .	30
NUCYNTA . . . . .	8
NUCYNTA ER . . . . .	8
NUDEXTA . . . . .	17
NULEV . . . . .	23
NUTROPIN AQ NUSPIN 10 . . . . .	27
NUTROPIN AQ NUSPIN 20 . . . . .	27
NUTROPIN AQ NUSPIN 5 . . . . .	27
NUVARING . . . . .	25
NUVESSA . . . . .	10
NUWIQ . . . . .	21
nyamyc . . . . .	12
nystatin external . . . . .	12
nystatin mouth/throat . . . . .	12
nystop . . . . .	12

**O**

ocella . . . . .	25
OCUFLOX . . . . .	29
ODEFSEY . . . . .	14
ofloxacin ophthalmic . . . . .	29
ofloxacin otic . . . . .	29
ogestrel . . . . .	25
okebo . . . . .	10
olanzapine oral tablet . . . . .	13
olanzapine oral tablet dispersible . . . . .	13
olmesartan medoxomil oral . . . . .	16
olmesartan medoxomil-hctz . . . . .	16
olopatadine hcl ophthalmic solution 0.1 % . . . . .	29

olopatadine hcl ophthalmic solution 0.2 % . . . . .	29
OLUMIANT . . . . .	27
OMECLAMOX-PAK . . . . .	22
omega-3-acid ethyl esters . . . . .	16
omeprazole oral capsule delayed release . . . . .	22
OMNARIS . . . . .	30
OMNITROPE . . . . .	27
ondansetron hcl oral . . . . .	12
ondansetron odt . . . . .	12
ONETOUCH ULTRA 2 KIT W/DEVICE . . . . .	20
ONETOUCH ULTRA BLUE TEST STRIPS IN VITRO STRIP . . . . .	20
ONETOUCH ULTRA MINI KIT W/DEVICE . . . . .	20
ONETOUCH VERIO FLEX SYSTEM KIT W/DEVICE . . . . .	20
ONETOUCH VERIO IQ SYSTEM . . . . .	20
ONETOUCH VERIO KIT W/DEVICE . . . . .	20
ONETOUCH VERIO SYNC SYSTEM KIT W/DEVICE . . . . .	20
ONETOUCH VERIO TEST STRIPS . . . . .	20
ONGLYZA . . . . .	21
ONZETRA XSAIL . . . . .	13
OPSUMIT . . . . .	31
ORAPRED ODT . . . . .	26
ORENITRAM . . . . .	31
ORFADIN ORAL CAPSULE 20 MG . . . . .	23
ORFADIN ORAL SUSPENSION . . . . .	23
ORLISSA . . . . .	27
orsythia . . . . .	25
ORTHO MICRONOR . . . . .	25
oscimin . . . . .	23
oscimin sr . . . . .	23
oseltamivir phosphate oral capsule . . . . .	14
oseltamivir phosphate oral suspension reconstituted . . . . .	14
OSENI . . . . .	21
OSPHENA . . . . .	22
OTEZLA . . . . .	27
OTREXUP . . . . .	27
OXAYDO . . . . .	8
oxcarbazepine . . . . .	11
OXTELLAR XR . . . . .	11
oxybutynin chloride er . . . . .	23
oxybutynin chloride oral . . . . .	23

OXYCODONE HCL ER . . . . .	8
oxycodone hcl oral capsule . . . . .	8
oxycodone hcl oral concentrate 100 mg/5ml . . . . .	8
oxycodone hcl oral solution . . . . .	8
oxycodone hcl oral tablet . . . . .	8
oxycodone-acetaminophen oral tablet 10-325 mg, 2.5-325 mg, 5-325 mg, 7.5-325 mg . . . . .	8
OXYCONTIN . . . . .	8
OZEMPIC . . . . .	21
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**P**

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tamoxifen citrate oral tablet 10 mg . . . . .	13
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testosterone cypionate intramuscular . . . . .	27	TRACLEER 62.5 MG, 125 MG . . . . .	31	triderm external cream 0.5 % . . . . .	19
testosterone enanthate intramuscular . . . . .	27	TRADJENTA . . . . .	21	TRIDESILON . . . . .	19
testosterone transdermal . . . . .	27	tramadol hcl er (biphasic) . . . . .	8	trientine hcl . . . . .	23
TEXACORT . . . . .	19	TRAMADOL HCL ER ORAL CAPSULE EXTENDED RELEASE 24 HOUR 100 MG, 200 MG, 300 MG . . . . .	8	TRIJARDY XR . . . . .	21
thyroid oral tablet 120 mg, 15 mg, 30 mg, 60 mg, 90 mg . . . . .	27	tramadol hcl er oral capsule extended release 24 hour 150 mg . . . . .	8	TRILEPTAL . . . . .	11
TIGLUTIK . . . . .	17	tramadol hcl er oral tablet extended release 24 hour . . . . .	9	TRINTELLIX . . . . .	12
timolol maleate ophthalmic gel forming solution . . . . .	29	tramadol hcl oral tablet 50 mg . . . . .	9	TRIUMEQ . . . . .	14
timolol maleate ophthalmic solution 0.25 %, 0.5 % . . . . .	29	TRANSDERM SCOP (1.5 MG) . . . . .	12	TROKENDI XR . . . . .	11
timolol maleate ophthalmic solution 0.5 % (daily) . . . . .	29	TRAVATAN Z . . . . .	29	TRULICITY . . . . .	21
TIMOPTIC . . . . .	29	travoprost (bak free) . . . . .	29	TRUVADA . . . . .	14
TIMOPTIC OCUDOSE . . . . .	29	trazodone hcl oral . . . . .	12	tulana . . . . .	26
TIMOPTIC-XE . . . . .	29	TRELEGY ELLIPTA . . . . .	30	TUSSICAPS . . . . .	30
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TOBRADEX OPHTHALMIC SUSPENSION . . . . .	29	tri-estarylla . . . . .	26	UCERIS RECTAL . . . . .	28
TOBRADEX ST . . . . .	29	tri-linyah . . . . .	26	ULTRAM . . . . .	9
tobramycin nebulization solution 300 mg/5ml inhalation . . . . .	31	tri-lo-estarylla . . . . .	26	unithroid . . . . .	27
tobramycin ophthalmic . . . . .	29	tri-lo-mili . . . . .	26	UROCIT-K 10 . . . . .	22
tobramycin-dexamethasone . . . . .	29	tri-lo-sprintec . . . . .	26	UROCIT-K 15 . . . . .	22
TOBREX OPHTHALMIC OINTMENT . . . . .	29	tri-mili . . . . .	26	UROCIT-K 5 . . . . .	22
TOBREX OPHTHALMIC SOLUTION . . . . .	29	tri-previfem . . . . .	26	UROXATRAL . . . . .	23
TOLAK . . . . .	19	tri-sprintec . . . . .	26	URSO 250 . . . . .	23
TOPAMAX . . . . .	11	tri-vylibra . . . . .	26	URSO FORTE . . . . .	23
TOPAMAX SPRINKLE . . . . .	11	tri-vylibra lo . . . . .	26	ursodiol oral . . . . .	23
topiramate er . . . . .	11	triamcinolone acetonide external aerosol solution . . . . .	19	<b>V</b>	
topiramate oral . . . . .	11	triamcinolone acetonide external cream 0.025 %, 0.1 % . . . . .	19	valacyclovir hcl oral . . . . .	14
TOPROL XL . . . . .	16	triamcinolone acetonide external cream 0.5 % . . . . .	19	valsartan . . . . .	16
torse mide . . . . .	16	triamcinolone acetonide external lotion . . . . .	19	valsartan-hydrochlorothiazide . . . . .	16
TOUJEO MAX SOLOSTAR . . . . .	21	triamcinolone acetonide external ointment 0.025 %, 0.1 %, 0.5 % . . . . .	19	VALTOCO . . . . .	11
TOUJEO SOLOSTAR . . . . .	21	triamcinolone acetonide external ointment 0.05 % . . . . .	19	VANATOL LQ . . . . .	9
TOVIAZ . . . . .	23	triamterene-hctz . . . . .	16	VANATOL S . . . . .	9
		trianex . . . . .	19	vandazole . . . . .	10
		triazolam . . . . .	14	VARUBI (180 MG DOSE) . . . . .	12
				VASCEPA ORAL CAPSULE 0.5 GM . . . . .	16
				VASCEPA ORAL CAPSULE 1 GM . . . . .	16
				VELPHORO . . . . .	23
				VELTASSA . . . . .	22
				VEMLIDY . . . . .	14



venlafaxine hcl . . . . .	12	<b>W</b>	ZEMBRACE SYMTOUCH . . . . .	13		
venlafaxine hcl er oral capsule extended release 24 hour . . . . .	12	WAKIX . . . . .	31	zenatane . . . . .	19	
venlafaxine hcl er oral tablet extended release 24 hour . . . . .	12	warfarin sodium oral . . . . .	10	ZENPEP . . . . .	23	
VENTOLIN HFA . . . . .	30	WELCHOL . . . . .	16	ZENZEDI ORAL TABLET 15 MG, 2.5 MG, 20 MG, 30 MG, 7.5 MG . . . . .	17	
verapamil hcl er oral capsule extended release 24 hour 100 mg, 200 mg, 300 mg . . . . .	16	wera . . . . .	26	ZEPATIER . . . . .	14	
verapamil hcl er oral capsule extended release 24 hour 120 mg, 180 mg, 240 mg, 360 mg . . . . .	16	WESTHROID . . . . .	27	ZETONNA . . . . .	30	
verapamil hcl er oral tablet extended release . . . . .	16	wixela inhub . . . . .	30	ZIAC ORAL TABLET 10-6.25 MG, 2.5-6.25 MG . . . . .	16	
verapamil hcl oral . . . . .	16	WP THYROID . . . . .	27	ZIAC ORAL TABLET 5-6.25 MG . . . . .	16	
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VERELAN . . . . .	16	XARELTO . . . . .	10	ZIPSOR . . . . .	9	
VERELAN PM . . . . .	16	XCOPRI PAK . . . . .	11	ZITHROMAX ORAL . . . . .	10	
VERZENIO . . . . .	13	XCOPRI TABLET . . . . .	11	ZITHROMAX TRI-PAK . . . . .	10	
VIBERZI . . . . .	23	XELJANZ . . . . .	27, 28	ZITHROMAX Z-PAK . . . . .	10	
VIBRAMYCIN ORAL CAPSULE . . . . .	10	XELJANZ XR ORAL TABLET EXTENDED RELEASE 24 HOUR 11 MG . . . . .	28	ZOCOR ORAL TABLET 10 MG, 20 MG, 40 MG, 80 MG . . . . .	16	
VIBRAMYCIN ORAL SUSPENSION RECONSTITUTED . . . . .	10	XELODA . . . . .	13	ZOFRAN . . . . .	12	
vicodin hp oral tablet 10-300 mg . . . . .	9	XELPROS . . . . .	29	ZOHYDRO ER . . . . .	9	
VICTOZA SOLUTION PEN- INJECTOR 18 MG/3ML SUBCUTANEOUS (2 PACK) . . . . .	21	XEPI . . . . .	10	zolpidem tartrate er . . . . .	31	
VICTOZA SOLUTION PEN- INJECTOR 18 MG/3ML SUBCUTANEOUS (3 PACK) . . . . .	21	XHANCE . . . . .	30	zolpidem tartrate oral . . . . .	31	
vienna . . . . .	26	XIFAXAN . . . . .	23	zolpidem tartrate sublingual . . . . .	31	
VIIBRYD . . . . .	12	XIIDRA . . . . .	29	ZOMACTON . . . . .	27	
VIMPAT ORAL SOLUTION . . . . .	11	XIMINO . . . . .	10	ZONEGRAN . . . . .	11	
VIMPAT ORAL TABLET . . . . .	11	XOFLUZA . . . . .	14	zonisamide oral . . . . .	11	
VIOKACE . . . . .	23	XOLEGEL . . . . .	12	ZONTIVITY . . . . .	13	
viorele . . . . .	26	XOPENEX HFA . . . . .	30	ZOVIRAX ORAL SUSPENSION . . . . .	14	
VIREAD ORAL POWDER . . . . .	14	XTAMPZA ER . . . . .	9	ZTLIDO . . . . .	9	
VIREAD ORAL TABLET 150 MG, 200 MG, 250 MG . . . . .	14	xulane . . . . .	26	ZUBSOLV . . . . .	9	
VISTARIL . . . . .	14	XYOSTED . . . . .	27	zumandimine . . . . .	26	
vitamin d (ergocalciferol) oral capsule 1.25 mg (50000 ut) . . . . .	22	XYREM . . . . .	31	ZUPLENZ . . . . .	12	
VIVELLE-DOT . . . . .	24, 26	<b>Y</b>	YASMIN 28 . . . . .	26	ZYCLARA . . . . .	19
VIVLODEX . . . . .	9	YAZ . . . . .	26	ZYCLARA PUMP . . . . .	19	
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VYVANSE . . . . .	17	ZEBUTAL . . . . .	9	ZEJULA . . . . .	13	
VYZULTA . . . . .	29	ZELNORM . . . . .	23			



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<http://www.hhs.gov/ocr/office/file/index.html>

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**Mail:** U.S. Dept. of Health and Human Services  
200 Independence Avenue SW  
Room 509F, HHH Building  
Washington, D.C. 20201

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# Multi-language interpreter services

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PAALALA: Kung nagsasalita ka ng **Tagalog (Tagalog)**, may makukuha kang mga libreng serbisyo ng tulong sa wika. Pakitawagan ang toll-free na numero ng telepono na nasa iyong identification card.

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تنبيه: إذا كنت تتحدث **العربية (Arabic)**، فإن خدمات المساعدة اللغوية المجانية متاحة لك. الرجاء الاتصال على رقم الهاتف المجاني الموجود على معرف العضوية.

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توجه: اگر زبان شما **فارسی (Farsi)** است، خدمات امداد زبانی به طور رایگان در اختیار شما می باشد. لطفا با شماره تلفن رایگانی که روی کارت شناسایی شما قید شده تماس بگیرید.

ध्यान दें: यदि आप **हिंदी (Hindi)** बोलते हैं, आपको भाषा सहायता सेवाएं, नि:शुल्क उपलब्ध हैं। कृपया अपने पहचान पत्र पर सूचीबद्ध टोल-फ्री फोन नंबर पर कॉल करें।

CEEB TOOM: Yog koj hais Lus **Hmoob (Hmong)**, muaj kev pab txhais lus pub dawb rau koj. Thov hu rau tus xov tooj hu deb dawb uas teev muaj nyob rau ntawm koj daim yuaj cim qhia tus kheej.

ចំណាប់អារម្មណ៍: បើសិនអ្នកនិយាយ**ភាសាខ្មែរ(Khmer)**សូមជំនួយភាសាដទៃយកតម្កល់ គឺមានសំរាប់អ្នក។ សូមទូរស័ព្ទទំនាក់ទំនងលើខ្សែតតិតតុល ដល់មាន់លើអ្នកសព្វញ្ញាណាបណ្តុំរបស់អ្នក។

PAKDAAR: Nu saritaem ti **Ilocano (Ilocano)**, ti serbisyo para ti baddang ti lengguahe nga awanan bayadna, ket sidadaan para kenyam. Maidawat nga awagan iti toll-free a numero ti telepono nga nakalista ayan iti identification card mo.

DÍI BAA'AKONÍNÍZIN: **Diné (Navajo)** bizaad bee yániit'igo, saad beę áka'anída'awo'ígíí, t'áa jíík'eh, bee ná'ahóót'i'. T'áa shqodí ninaaltsos nit'i'izí bee nééhozinígíí bine'déę t'áa jíík'ehgo béesh bee hane'í biká'ígíí bee hodíilnih.

OGOW: Haddii aad ku hadasho **Soomaali (Somali)**, adeegyada taageerada luqadda, oo bilaash ah, ayaad heli kartaa. Fadlan wac lambarka telefonka khadka bilaashka ee ku yaalla kaarkaaga aqoonsiga.

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